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(12) **United States Patent
Brannan**(10) **Patent No.: US 8,323,275 B2**
(45) **Date of Patent: Dec. 4, 2012**(54) **LAPAROSCOPIC PORT WITH MICROWAVE
RECTIFIER**(75) Inventor: **Joseph D. Brannan**, Erie, CO (US)(73) Assignee: **Vivant Medical, Inc.**, Boulder, CO (US)(*) Notice: Subject to any disclaimer, the term of this
patent is extended or adjusted under 35
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A61B 18/04 (2006.01)(52) **U.S. Cl.** **606/33; 600/424; 343/703**(58) **Field of Classification Search** 340/573.1,
340/600; 600/424, 430; 606/33; 250/336.1,
250/395; 343/703, 841

See application file for complete search history.

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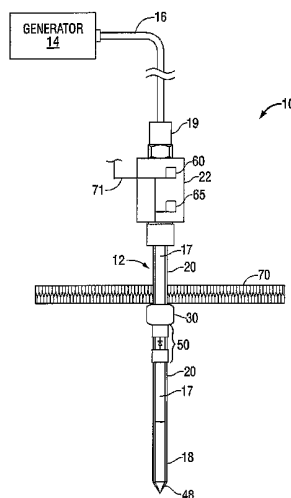
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Primary Examiner — Eric M Blount(57) **ABSTRACT**

A radiation detector disposed on a microwave antenna assembly to receive unintended field exposure in an insufflated abdomen. The radiation detector includes a receiving antenna made up of at least two pieces of metal externally attached to the microwave antenna within the abdomen. The radiation detector is adapted to receive errant microwave energy that resonates in the abdomen. A rectifier is coupled between the two pieces of metal, where the pieces of metal are strips, rings, patches, or other geometric combinations. The rectifier is adapted to rectify at least a portion of the errant microwave energy. A filter is coupled to the rectifier and is adapted to convert the rectified microwave energy into a detection signal. An inflatable stop is located on a distal end of the microwave antenna and the inflatable stop is inflated when inserted within the abdomen. The inflated stop prevents inadvertent removal of the microwave antenna.

20 Claims, 6 Drawing Sheets

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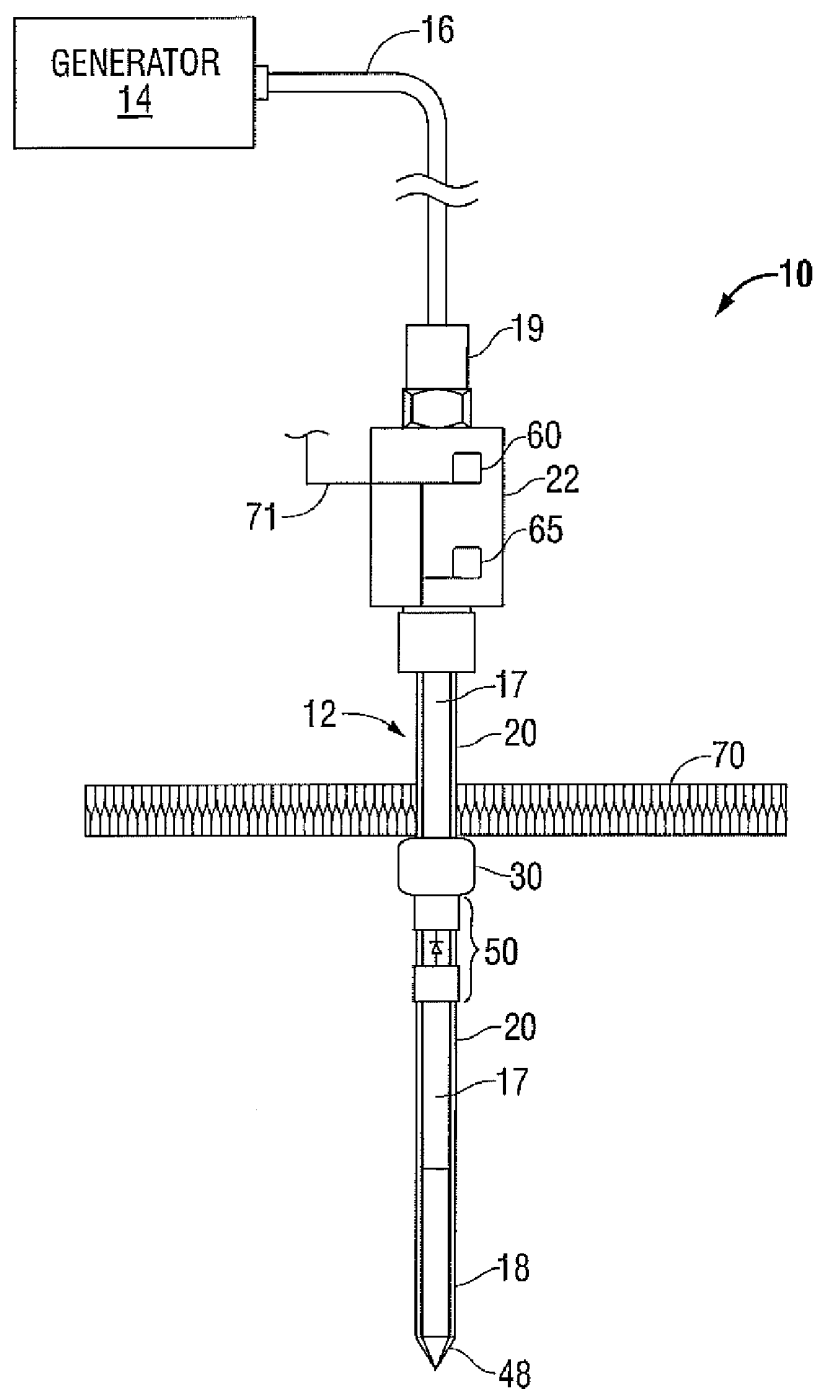
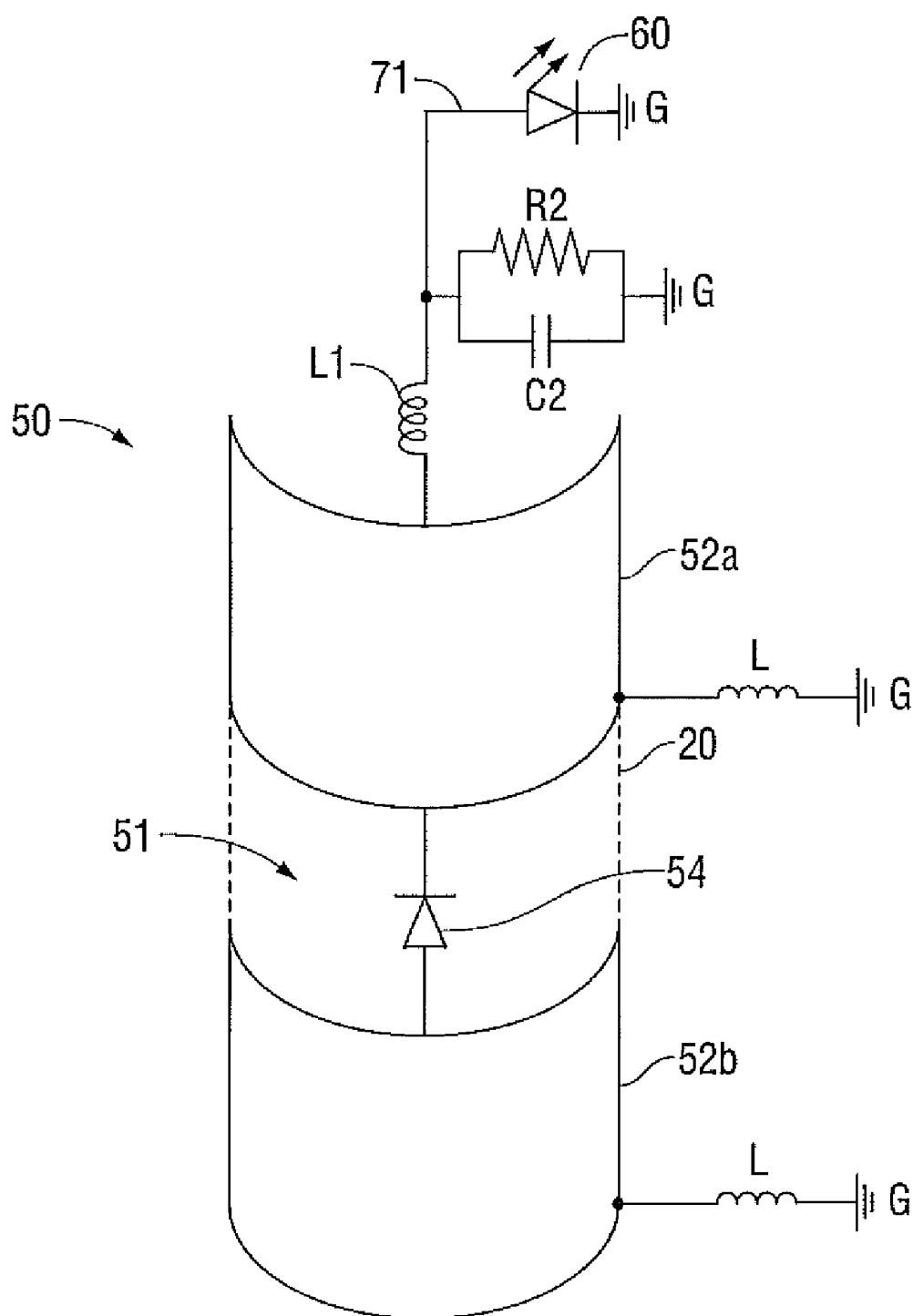
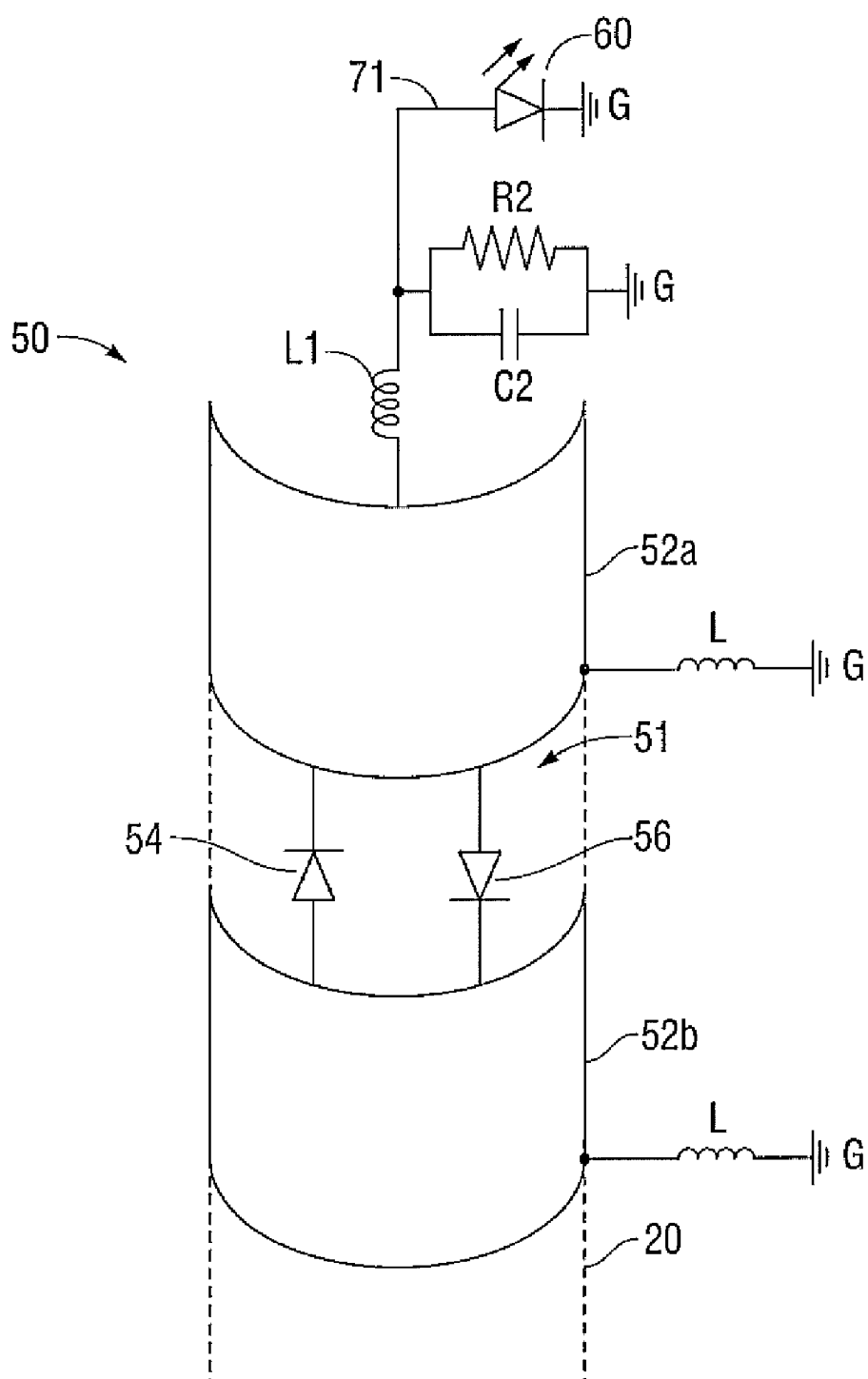


FIG. 1

**FIG. 2A**

**FIG. 2B**

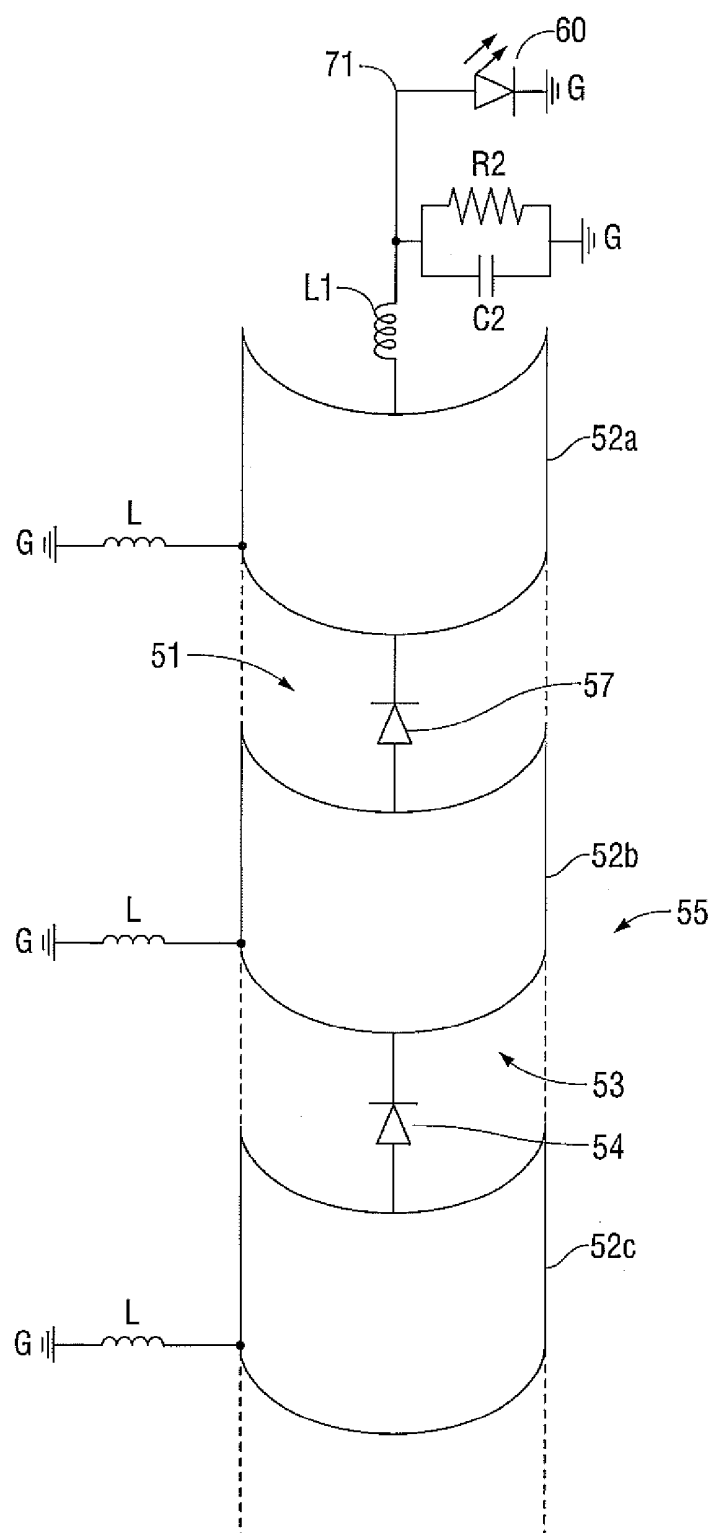


FIG. 2C

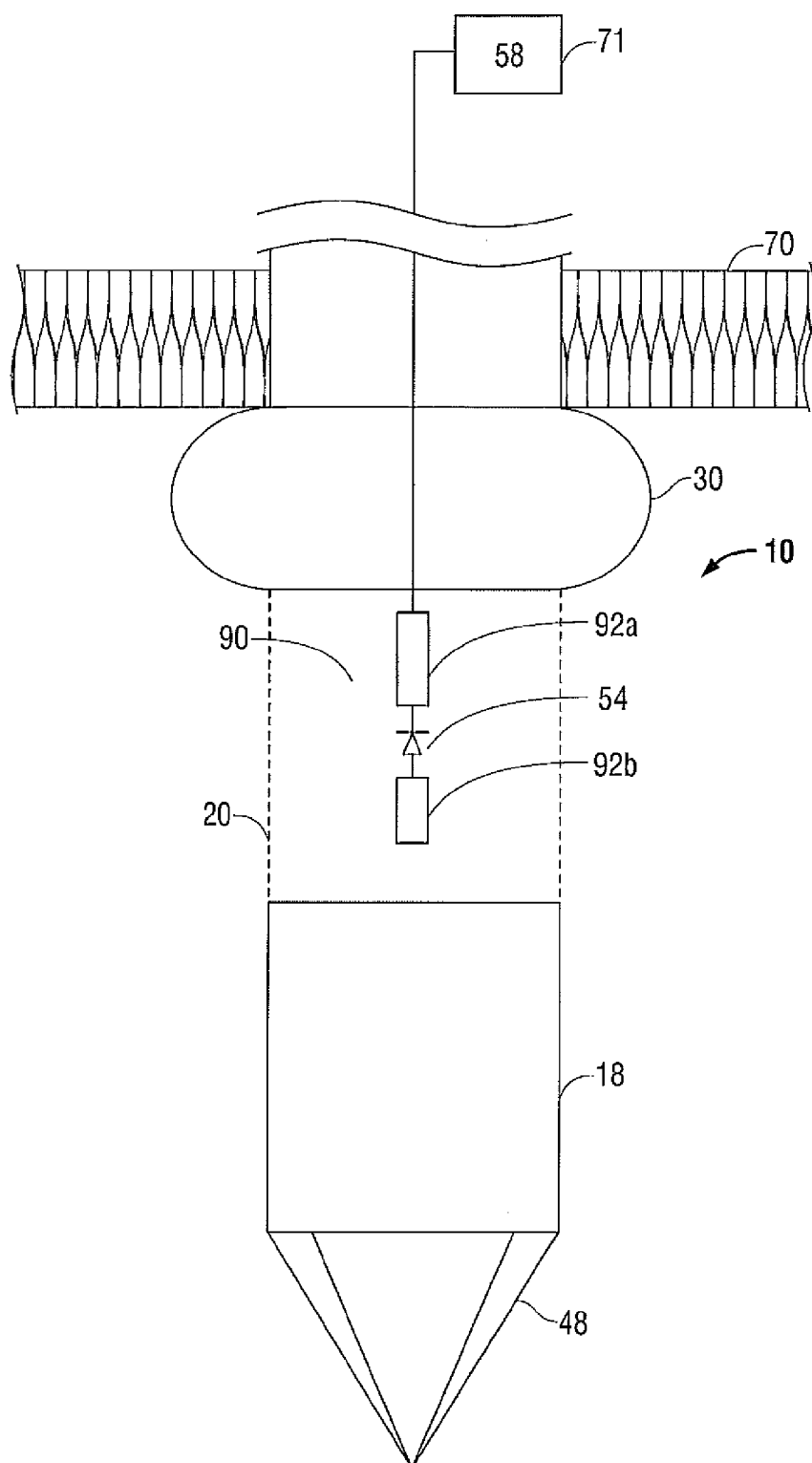


FIG. 3

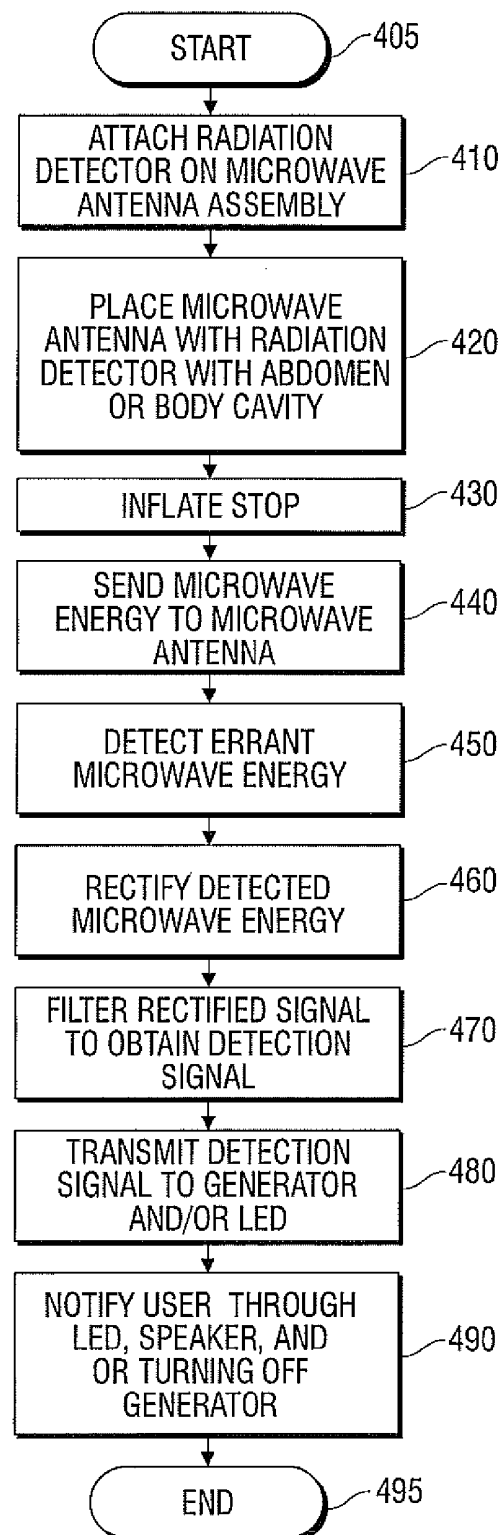


FIG. 4

LAPAROSCOPIC PORT WITH MICROWAVE RECTIFIER

CROSS-REFERENCE TO RELATED APPLICATION

The present application is a continuation-in-part of a U.S. application Ser. No. 12/487,917 entitled "Microwave Ablation Antenna Radiation Detector" filed on Jun. 19, 2009, which is hereby incorporated by reference in its entirety.

BACKGROUND

1. Technical Field

The present disclosure relates generally to microwave antennas. More particularly, the present disclosure is directed to radiation detectors for microwave ablation antennas.

2. Background of Related Art

Treatment of certain diseases requires destruction of malignant tissue growths (e.g., tumors). It is known that tumor cells denature at elevated temperatures that are slightly lower than temperatures injurious to surrounding healthy cells. Therefore, known treatment methods, such as hyperthermia therapy, heat tumor cells to temperatures above 41° C., while maintaining adjacent healthy cells at lower temperatures to avoid irreversible cell damage. Such methods involve applying electromagnetic radiation to heat tissue and include ablation and coagulation of tissue. In particular, microwave energy is used to coagulate and/or ablate tissue to denature or kill the cancerous cells.

Microwave energy is applied via microwave ablation antennas that penetrate tissue to reach tumors. There are several types of microwave antennas, such as monopole and dipole, in which microwave energy radiates perpendicularly from the axis of the conductor. A monopole antenna includes a single, elongated microwave conductor whereas a dipole antenna includes two conductors. In a dipole antenna, the conductors may be in a coaxial configuration including an inner conductor and an outer conductor separated by a dielectric portion. More specifically, dipole microwave antennas may have a long, thin inner conductor that extends along a longitudinal axis of the antenna and is surrounded by an outer conductor. In certain variations, a portion or portions of the outer conductor may be selectively removed to provide more effective outward radiation of energy. This type of microwave antenna construction is typically referred to as a "leaky waveguide" or "leaky coaxial" antenna.

During microwave ablation, unintended field exposure to healthy tissue may occur due to incorrect device use. For example, damage to healthy tissue may occur if a surgeon inserts the probe to an insufficient depth while performing an ablation, the probe slipping out due to surgeon error or fatigue, or activation of the probe prior to placing the probe in tissue. Also, the repercussions of the unintended field exposure may increase during laparoscopic procedures due to high field intensities as a result of an insufflated abdomen acting as a resonant microwave cavity. Burns to the abdominal wall along device/probe insertion tracks have occurred due to these factors.

SUMMARY

A radiation detector disposed on a microwave antenna assembly to receive unintended field exposure in an insufflated abdomen. The radiation detector includes a receiving antenna made up of at least two pieces of metal externally attached to the microwave antenna on the distal end so as to be

within the abdomen. The radiation detector is adapted to receive errant microwave energy that resonates in the abdomen. A rectifier is coupled between the two pieces of metal, where the pieces of metal are strips, rings, patches, or other geometric combinations. The rectifier is adapted to rectify at least a portion of the errant microwave energy. A filter is coupled to the rectifier and is adapted to convert the rectified microwave energy into a detection signal. An inflatable stop is located on a distal end of the microwave antenna and the stop is inflated when inserted within the abdomen. The inflated stop prevents inadvertent removal of the microwave antenna.

According to one aspect of the disclosure, a radiation detector disposed on a microwave antenna assembly is disclosed. The radiation detector includes a receiving antenna adapted to receive microwave energy. The receiving antenna is formed from two pieces of metal externally attached to a microwave antenna of the microwave antenna assembly. The radiation detector further includes at least one rectifier coupled between the pieces of metal adapted to rectify at least a portion of the microwave energy and a filter coupled to the at least one rectifier and adapted to convert the rectified microwave energy into a detection signal.

According to another aspect of the present disclosure, a microwave antenna assembly is disclosed. The microwave antenna assembly includes a hub adapted to couple the microwave antenna assembly to a microwave generator and a radiating section coupled to the hub through a feedline. The microwave antenna assembly further includes an inflatable stop surrounding the feedline. The inflatable stop is inflated when the feedline is placed within an abdomen of a patient to prevent the radiating section from inadvertently withdrawing from the abdomen. Additionally, the microwave antenna assembly includes a radiation detector disposed on the microwave antenna assembly near the radiating section. The radiation detector includes a receiving antenna adapted to receive microwave energy. The receiving antenna is formed from two pieces of metal externally attached to the feedline within the abdomen. The receiving antenna further includes at least one rectifier coupled between the pieces of metal adapted to rectify at least a portion of the microwave energy that resonates in the abdomen. Additionally, the receiving antenna includes a filter coupled to the at least one rectifier and adapted to convert the rectified microwave energy into a detection signal.

A method for detecting errant microwave energy is also contemplated by the present disclosure. The method includes the steps of receiving resonant microwave energy from an insulated abdomen with a receiving antenna and rectifying at least a portion of the microwave energy through at least one rectifier coupled to the receiving antenna. Further the method includes the step of filtering the rectified microwave energy through a filter coupled to the at least one rectifier to convert the rectified microwave energy into a detection signal.

BRIEF DESCRIPTION OF THE DRAWINGS

The above and other aspects, features, and advantages of the present disclosure will become more apparent in light of the following detailed description when taken in conjunction with the accompanying drawings in which:

FIG. 1 is a schematic diagram of a microwave ablation system according to an embodiment of the present disclosure;

FIGS. 2A-2C are schematic diagrams of a microwave detector according to different embodiments of the present disclosure;

FIG. 3 is a schematic diagram of a linear antenna for use in detecting microwaves according to an embodiment of the present disclosure; and

FIG. 4 is a flow chart of a method according to the present disclosure.

DETAILED DESCRIPTION

Particular embodiments of the present disclosure as described herein below with reference to the accompanying drawings. In the following description, well-known functions or constructions are not described in detail to avoid obscuring the present disclosure in unnecessary detail.

The present disclosure provides for a radiation detector disposed on a microwave antenna. Generally, the detector is disposed in a location such that any unintended and/or errant radiation of microwave energy within the abdomen is detected. The radiation detector converts the detected radiation into a detection signal, which is then transmitted to a control system (e.g., microwave generator) to either shut off the power supply and/or alert the user.

FIG. 1 shows a microwave ablation system 10 that includes a microwave antenna assembly 12 coupled to a microwave generator 14 via a flexible coaxial cable 16. The generator 14 is configured to provide microwave energy at an operational frequency from about 500 MHz to about 10,000 MHz. In the illustrated embodiment, the antenna assembly 12 includes a radiating section 18 connected by feedline 20 (or shaft) to the cable 16. More specifically, the feedline 20 is connected to a hub 22, which is connected to the cable 16 through a cable connector 19. The hub 22 may have a variety of suitable shapes, e.g., cylindrical, rectangular, etc. Further, the antenna assembly 12 includes a radiating section 18 with a tip 48 on the distal end of the feedline 20.

The feedline 20 may be coaxial and include an inner conductor surrounded by an inner insulator, which is, in turn, surrounded by an outer conductor 17 (e.g., a cylindrical conducting sheath). The inner conductor and outer conductor 17 may be constructed of copper, gold, stainless steel or other conductive metals with similar conductivity values. The metals may be plated with other materials, e.g., other conductive materials, to improve their properties, e.g., to improve conductivity or decrease energy loss, etc. In one embodiment, the feedline 20 may be formed from a coaxial, semi-rigid or flexible cable having a wire with a 0.047" outer diameter rated for 50 Ohms.

The antenna assembly 12 includes a radiation detector 50 disposed along the feedline 20 just on the inside of the abdominal wall 70. Further, the radiation detector 50 may be located near an inflatable stop 30. The radiation detector 50 is shown in detail in FIGS. 2A-2C. The radiation detector 50 is connected through a filter (See FIG. 2A) to wire 71. The wire 71 may be disposed anywhere along the antenna assembly 12 such that the wire 71 has minimal effect on the radiation efficiency of the antenna assembly 12. The wire 71 may be connected to a light emitting diode (LED) 60, a speaker 65, and/or a controller (not shown) within the generator 14.

The inflatable stop 30 is a balloon or other inflatable material that surrounds the feedline 20. The stop 30 may be formed from materials having suitable mechanical properties (such as puncture resistance, pin hole resistance, tensile strength, conformability when inflated), chemical properties (such as forming a suitable bond to the feedline 20), and biocompatibility. In another embodiment, the walls of the inflatable stop 30 may be formed from a suitable polyvinyl chloride (PVC). Other suitable materials include polypropylene, polyethylene

terephthalate (PETP), low-density polyethylene (LDPE), silicone, neoprene, polyisoprene, or polyurethane (PU).

The inflatable stop 30 is located on the distal end of the feedline 20 so as to be inside the abdomen wall 70 or body cavity wall. The location of the inflatable stop 30 may be adjusted based on the size of the abdomen and/or the depth necessary to perform the surgery.

Prior to inserting the radiating section 18 and feedline 20 within the patient's abdomen or body cavity, the inflatable stop 30 is in a collapsed form. After inserting the radiating section 18 and feedline 20 within the patient's abdomen, the inflatable stop 30 is inflated using a conduit or catheter (not shown). The inflatable stop 30 may be filled with gaseous or fluid inflation media, e.g., air, water, saline etc., in a selective manner such that inflation media may be introduced and/or withdrawn from inflatable stop 30 as desired. Once inflated, the inflatable stop 30 prevents inadvertent removal of the radiating section 18. Inadvertent removal may cause ablation to the wrong tissue. The inflatable stop 30 is then deflated upon completion of the procedure to allow removal of the radiating section 18 and feedline 20.

FIG. 2A shows a first embodiment of a radiation detector 50. The radiation detector 50 includes two metal rings 52a-52b that wrap around the feed line 20. The metal rings 52a-52b are connected together using a rectifying device 54 across gap 51. The rectifying device 54 may be any type of suitable diodes such as Zener diode, Schottky diode, tunnel diode and the like. One metal ring 52a is connected LED 60 and ground circuit (R2 and C2 in parallel and G) through inductor L1. Alternatively, both metal rings 52a-52b may be connected to a ground circuit that includes a RF impedance/low DC impedance element L and a ground G. The DC ground connections are made in locations of low RF voltage. The inductor L1 functions as a low pass filter and converts the signal from the rectifying device 54 into a DC signal which is sent across wire 71 to a LED 60, speaker 65, and/or a controller within the generator 14.

The radiation detector 50 may be located anywhere along the feedline 20 and or radiating section 18 as long as the radiation detector 50 is within the patient's abdomen or body cavity. The radiation detector 50 is typically located along the feedline 20 so as to have gap 51 be in a location of high RF voltage.

The metal rings 52a-52b may be formed from a conformal sheet of conductive material such as copper, gold, stainless steel or other conductive metals with similar conductivity values. The width of each ring may be about 0.10 inches to about 2.5 inches with a thickness between about 0.001 inches to about 0.010 inches. The metal rings 52a-52b may be situated over a ground plane with a dielectric insulation providing separation. The dielectric insulation R2 may be formed from a non-conductive conformal material such as polyesters, polyimides, polyamides, polyamide-imides, polyetherimides, polyacrylates, polyethylene terephthalate, polyethylene, polypropylene, polyvinylidene chloride, polysiloxanes, combinations thereof and the like.

The use of one rectifying device 54 in FIG. 2A allows for half wave rectifying. FIG. 2B shows an alternate embodiment of radiation detector 50 that includes two rectifying devices 54 and 56. The rectifying devices 54 and 56 are soldered to metal pieces 52a-52b in reverse polarity. The rectifying devices 54 and 56 together allow for full wave rectifying.

FIG. 2C shows another embodiment of radiation detector 55 that includes three rings 52a-52c. The three rings are connected together with rectifying devices 54 and 57 in the same polarity. The use of three rings allows for a larger antenna aperture and increased bandwidth for detecting rec-

tified microwave energy. Alternatively, the rings **52a-52c** may be connected together with the rectifying devices **54** and **57** in reverse polarity. Additionally, two of the rectifying devices (e.g. **54** and **56**) may be connected in reverse polarity in each gap **51** and **53**, similar to the arrangement shown in FIG. 2B.

FIG. 3 discloses an alternative radiation detector **90** formed into a linear antenna from two strips of metal **92a-92b**. Depending on the operating frequency of the microwave ablation assembly **12**, the two strips **92a-92b** may have a length and width that range between about 0.1 inches and about 2 inches with a thickness of about 0.005 inches. The strips of metal **92a-92b** may be connected together with rectifying device **54**. Alternatively, the strips of metal **92a-92b** may be connected together with two rectifying devices (e.g. **54** and **56**) in reverse polarity to allow for full wave rectification, similar to the arrangement shown in FIG. 2B. The rectifying device **54** is connected to a filter (inductor **L1**) to convert the signal into a DC signal. The DC signal is sent over wire **71** to a LED **60**, speaker **65**, and/or a controller in the generator **14**. If the DC signal is above a set limit, then the user is notified visually through LED **50**, and/or audibly through speaker **65**. Alternatively, if the DC signal is above a set limit, then controller may automatically stop sending an electrical signal to the antenna assembly. This limit may vary between about 0.5 volts and about 3 volts based on the operating frequency of the microwave ablation assembly **12**. The linear antenna radiation detector **90** may also be used as a patch rectifier or a dipole rectifier.

The strips of metal **92a-92b** may be attached to a grounding plane (not shown) with an insulating dielectric between. The strips of metal **92a-92b** and grounding plane may be made of conductive material such as copper, gold, stainless steel or other conductive metals with similar conductivity values. The insulating dielectric may be a non-conductive conformal material such as polyesters, polyimides, polyamides, polyamide-imides, polyetherimides, polyacrylates, polyethylene terephthalate, polyethylene, polypropylene, polyvinylidene chloride, polysiloxanes, combinations thereof and the like.

FIG. 4 shows a process **400** for detecting errant microwave energy within an insufflated abdomen with reference to radiation detector **50**. It should be appreciated that the method may be practiced with other radiation detectors, such as the radiation detector **90**, **55** and the like. The process **400** starts at step **405** with an initial step of attaching the radiating detector **50** on the microwave antenna assembly **12** at step **410** which includes wrapping the metal pieces **52a-52b** around feedline **20**. The method may also include the step of connecting the radiation detector **50** to the generator **14** or another control system. Next, the microwave antenna **12** with radiation detector **50** is placed within a patient's abdomen or body cavity at step **420**. Alternatively, the detector **50** may be placed into the insufflated abdomen via a lap port (not shown) and slid over the radiating section **18** and around feedline **20** after insertion of radiating section **18** and feed line **20** through the abdominal wall to reduce gauge size of the device. Detector **50** interfaces with one or more electrode contacts (not shown) on feedline **20**. At step **430**, the microwave antenna **12** is secured in place within the abdomen. For example, the inflatable stop **30** may be inflated at step **430**. Other types of securement materials may also be contemplated. A controller (not shown) in generator **14** may prevent sending electrical energy to the microwave antenna **12** until the microwave antenna **12** is secured, e.g., until the inflatable stop **30** is inflated. Next, at step **440**, microwave energy is sent from the generator **14** to microwave antenna **12**.

During operation, any errant microwave radiation outside the desired emission area, such as outside the radiating sec-

tion **18**, is picked up by the radiation antenna **50**, namely, the metal rings **52a-52h** at step **450**. The detected microwave energy is then rectified by rectifier **54** at step **460** and the rectified signal is filtered by a filter into a detection signal (e.g., a DC voltage signal **71**) at step **470**. The filter may include a simple inductor **L1**, or inductor resistor series elements (not shown). The detection signal is then transmitted to generator **14**, LED **60**, and/or speaker **65** at step **480**. The generator **14** and/or other control circuitry (not shown) compares the detection signal to a threshold value to determine whether the level of the microwave energy is unsafe. If the determination is made that the level of microwave energy is excessive, the generator **14** may either suspend the supply of microwave energy and/or notify the user of this occurrence at step **490** prior to process **400** ending at step **495**. The user may be notified using speaker **65** and/or LED **60**.

The described embodiments of the present disclosure are intended to be illustrative rather than restrictive, and are not intended to represent every embodiment of the present disclosure. Various modifications and variations can be made without departing from the spirit or scope of the disclosure as set forth in the following claims both literally and in equivalents recognized in law.

What is claimed is:

1. A radiation detector disposed on a microwave antenna assembly, the radiation detector, comprising:
 - a receiving antenna adapted to receive microwave energy, wherein the receiving antenna is formed from two pieces of metal externally attached to a microwave antenna of the microwave antenna assembly;
 - at least one rectifier coupled between the pieces of metal adapted to rectify at least a portion of the microwave energy; and
 - a filter coupled to the at least one rectifier and adapted to convert the rectified microwave energy into a detection signal.
2. The radiation detector according to claim 1, wherein the receiving antenna further comprises:
 - two dielectric substrates each having a top surface and a bottom surface;
 - each piece of metal is disposed on the top surface of each dielectric substrate; and
 - a grounding member disposed on the bottom surface of each dielectric substrate, wherein the antenna and grounding members are electrically insulated by the dielectric substrate.
3. The radiation detector according to claim 2, wherein the dielectric substrate is formed from a non-conductive, conformal material and the grounding member are formed from a conductive, conformal material.
4. The radiation detector according to claim 1, wherein the at least one rectifier is a diode.
5. The radiation detector according to claim 1, further comprising:
 - a light-emitting device coupled to the filter, the light-emitting device adapted to operate when the detection signal is above a predetermined threshold signal.
6. The radiation detector according to claim 1, wherein the two pieces of metal have a geometry of a ring, a patch, a linear strip, or a combination of geometries.
7. The radiation detector according to claim 1, further comprising:
 - a speaker coupled to the filter, the speaker adapted to operate when the detection signal is above a predetermined threshold signal.
8. The radiation detector according to claim 1, wherein the receiving antenna further comprises:

a third piece of metal externally attached to the antenna of the microwave antenna assembly, wherein the third piece of metal is coupled to the two pieces of metal with a second rectifier.

9. The radiation detector according to claim 1, wherein the radiation detector is located on the distal end of the microwave antenna within an abdomen of a patient.

10. The radiation detector according to claim 1, further comprising a gap between the two metal pieces and the gap is located along the antenna at a position of a high RF voltage.

11. The radiation detector according to claim 1, further comprising a second rectifier coupled between the two metal pieces, wherein the two rectifiers are soldered to the metal pieces in reverse polarities.

12. A microwave antenna assembly, comprising:

a hub adapted to couple the microwave antenna assembly to a microwave generator;

a radiating section coupled to the hub through a feedline; an inflatable stop surrounding the feedline, wherein the inflatable stop is inflated when the feedline is placed within an abdomen of a patient to prevent the radiating section from inadvertently withdrawing from the abdomen; and

a radiation detector disposed on the microwave antenna assembly near the radiating section, the radiation detector comprising:

a receiving antenna adapted to receive microwave energy, wherein the receiving antenna is formed from two pieces of metal externally attached to the feedline within the abdomen;

at least one rectifier coupled between the pieces of metal adapted to rectify at least a portion of the microwave energy that resonates in the abdomen; and

a filter coupled to the at least one rectifier and adapted to convert the rectified microwave energy into a detection signal.

13. The microwave antenna assembly according to claim 12, wherein the receiving antenna is a ring antenna, and the receiving antenna further comprises:

two dielectric substrates each having a top surface and a bottom surface;

each piece of metal is disposed on the top surface of each dielectric substrate; and

a grounding member disposed on the bottom surface of each dielectric substrate, wherein the antenna and grounding members are electrically insulated by the dielectric substrate.

14. The microwave antenna assembly according to claim 12, wherein the feedline includes an outer conductor and the receiving antenna is a linear antenna disposed on the outer conductor of the feedline such that a longitudinal axis of the linear antenna is substantially parallel to a longitudinal axis of the feedline.

15. The microwave antenna assembly according to claim 12, wherein the receiving antenna further comprises a gap between the two metal pieces and the gap is located along the feedline at a position of a high RF voltage.

16. The microwave antenna assembly according to claim 12, wherein the receiving antenna is located near a distal end of the inflatable stop.

17. A method for detecting microwave energy, the method comprising:

receiving resonant microwave energy from an insulated abdomen with a receiving antenna;

rectifying at least a portion of the microwave energy through at least one rectifier coupled to the receiving antenna; and

filtering the rectified microwave energy through a filter coupled to the at least one rectifier to convert the rectified microwave energy into a detection signal.

18. The method according to claim 17, further comprising: comparing the detection signal with a predetermined threshold signal; and

suspending supply of microwave energy based on the comparison of the detection signal with the predetermined threshold signal.

19. The method according to claim 17, further comprising: comparing the detection signal with a predetermined threshold signal; and

providing an alert based on the comparison of the detection signal with the predetermined threshold signal, wherein the alert is a visual or audible alert.

20. The method according to claim 17, further comprising: inserting a radiating section of a microwave antenna assembly within an abdomen of a patient; and

inflating an inflatable stop to ensure the radiating section is positioned within the abdomen and preventing the radiating section from unintentionally withdrawing from the abdomen.

* * * * *

专利名称(译)	腹腔镜端口配微波整流器		
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[标]申请(专利权)人(译)	VIVANT医疗		
申请(专利权)人(译)	VIVANT MEDICAL , INC.		
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摘要(译)

设置在微波天线组件上的辐射检测器，用于接收吹气腹部中的非预期的场暴露。辐射探测器包括接收天线，该接收天线由外部连接到腹部内的微波天线的至少两块金属制成。辐射检测器适于接收在腹部谐振的错误微波能量。整流器耦合在两块金属之间，其中金属块是条带，环，贴片或其他几何组合。整流器适于矫正至少一部分错误的微波能量。滤波器耦合到整流器并适于将整流的微波能量转换成检测信号。可充气止动件位于微波天线的远端，并且当插入腹部内时，可充气止动件被充气。充气停止可防止无意中移除微波天线。

