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Provisional Application for Patent Cover Sheet

This is a request for filing a PROVISIONAL APPLICATION FOR PATENT under 37 CFR 1.53(c)

Inventor(s)

Inventor 1

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Title of Invention

NEAR-INFRARED LASERS FOR NON-INVASIVE MONITORING OF GLUCOSE, KETONES, HBA1C, AND OTHER BLOOD CONSTITUENTS

Attorney Docket Number (if applicable)

OMNI0101PRV

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Signature	/David S. Bir/			Date (YYYY-MM-DD)	2012-12-31
First Name	David	Last Name	Bir	Registration Number (If appropriate)	38383
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NEAR-INFRARED LASERS FOR NON-INVASIVE MONITORING OF GLUCOSE, KETONES,
HBA1C, AND OTHER BLOOD CONSTITUENTS

TECHNICAL FIELD

[0001] This disclosure relates in general to lasers and light sources for healthcare, medical, or bio-technology applications including systems and methods for using near-infrared light sources for non-invasive monitoring of different blood constituents or blood analytes, such as glucose, ketones, and hemoglobin A1C (HbA1C).

BACKGROUND AND SUMMARY

[0002] With the growing obesity epidemic, the number of individuals with diabetes is also increasing dramatically. For example, there are over 200 million people who have diabetes. Diabetes control requires monitoring of the glucose level, and most glucose measuring systems available commercially require drawing of blood. Depending on the severity of the diabetes, a patient may have to draw blood and measure glucose four to six times a day. This may be extremely painful and inconvenient for many people. In addition, for some groups, such as soldiers in the battlefield, it may be dangerous to have to measure periodically their glucose level with finger pricks.

[0003] Thus, there is an unmet need for non-invasive glucose monitoring (e.g., monitoring glucose without drawing blood). The challenge has been that a non-invasive system requires adequate sensitivity and selectivity, along with repeatability of the results. Yet, this is a very large market, with an estimated annual market of over \$10B in 2011 for self-monitoring of glucose levels.

[0004] One approach to non-invasive monitoring of blood constituents or blood analytes is to use near-infrared spectroscopy, such as absorption spectroscopy or near-infrared diffuse reflection or transmission spectroscopy. Some attempts have been made to use broadband light sources, such as tungsten lamps, to perform the spectroscopy. However, several challenges have arisen in these

efforts. First, many other constituents in the blood also have signatures in the near-infrared, so spectroscopy and pattern matching, often called spectral fingerprinting, is required to distinguish the glucose with sufficient confidence. Second, the non-invasive procedures have often transmitted or reflected light through the skin, but skin has many spectral artifacts in the near-infrared that may mask the glucose signatures. Moreover, the skin may have significant water and blood content. These difficulties become particularly complicated when a weak light source is used, such as a lamp. More light intensity can help to increase the signal levels, and, hence, the signal-to-noise ratio.

[0005] As described in this disclosure, by using brighter light sources, such as fiber-based supercontinuum lasers, super-luminescent laser diodes, light-emitting diodes or a number of laser diodes, the near-infrared signal level from blood constituents may be increased. By shining light through the teeth, which have fewer spectral artifacts than skin in the near-infrared, the blood constituents may be measured with less interfering artifacts. Also, by using pattern matching in spectral fingerprinting and various software techniques, the signatures from different constituents in the blood may be identified. Moreover, value-add services may be provided by wirelessly communicating the monitored data to a handheld device such as a smart phone, and then wirelessly communicating the processed data to the cloud for storing, processing, and transmitting to several locations.

BRIEF DESCRIPTION OF THE DRAWINGS

[0006] For a more complete understanding of the present disclosure, and for further features and advantages thereof, reference is now made to the following description taken in conjunction with the accompanying drawings, in which:

[0007] FIGURE 1 plots the transmittance versus wavenumber for glucose in the mid-wave and long-wave infrared wavelengths between approximately 2.7 to 12 microns.

[0008] FIGURE 2 illustrates measurements of the absorbance of different blood constituents, such as glucose, hemoglobin, and hemoglobin A1c. The measurements are done using an FTIR spectrometer in samples with a 1mm path length.

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