

The Clinical Research Tool: A High-Performance Microdialysis-Based System for Reliably Measuring Interstitial Fluid Glucose Concentration

Gregor Ocvirk, Ph.D.,¹ Martin Hajnsek, Dipl. Ing.,² Ralph Gillen, Ph.D.,¹ Arnfried Guenther,¹ Gernot Hochmuth, Dipl. Ing. (FH),¹ Ulrike Kamecke, Dipl. Ing. (FH),³ Karl-Heinz Koelker, Dipl. Ing. (FH),¹ Peter Kraemer,¹ Karin Obermaier,¹ Cornelia Reinheimer,¹ Nina Jendrike, M.D.,⁴ and Guido Freckmann, M.D.⁴

Abstract

Background:

A novel microdialysis-based continuous glucose monitoring system, the so-called Clinical Research Tool (CRT), is presented. The CRT was designed exclusively for investigational use to offer high analytical accuracy and reliability. The CRT was built to avoid signal artifacts due to catheter clogging, flow obstruction by air bubbles, and flow variation caused by inconstant pumping. For differentiation between physiological events and system artifacts, the sensor current, counter electrode and polarization voltage, battery voltage, sensor temperature, and flow rate are recorded at a rate of 1 Hz.

Method:

In vitro characterization with buffered glucose solutions ($c_{\text{glucose}} = 0 - 26 \times 10^{-3}$ mol liter⁻¹) over 120 h yielded a mean absolute relative error (MARE) of $2.9 \pm 0.9\%$ and a recorded mean flow rate of 330 ± 48 nl/min with periodic flow rate variation amounting to $24 \pm 7\%$. The first 120 h *in vivo* testing was conducted with five type 1 diabetes subjects wearing two systems each. A mean flow rate of 350 ± 59 nl/min and a periodic variation of $22 \pm 6\%$ were recorded.

Results:

Utilizing 3 blood glucose measurements per day and a physical lag time of 1980 s, retrospective calibration of the 10 *in vivo* experiments yielded a MARE value of 12.4 ± 5.7 . Clarke error grid analysis resulted in 81.0%, 16.6%, 0.8%, 1.6%, and 0% in regions A, B, C, D, and E, respectively.

Conclusion:

The CRT demonstrates exceptional reliability of system operation and very good measurement performance. The ability to differentiate between artifacts and physiological effects suggests the use of the CRT as a reference tool in clinical investigations.

J Diabetes Sci Technol 2009;3(3):468-477

Author Affiliations: ¹Roche Diagnostics GmbH, Mannheim, Germany; ²Roche Diagnostics Graz GmbH, Graz, Austria; ³Meteccon GmbH, Mannheim, Germany; and ⁴Institut für Diabetes-Technologie, Ulm, Germany

Abbreviations: (BG) blood glucose, (CRT) clinical research tool, (EGA) error grid analysis, (MARE) mean absolute relative error, (PAES) polyarylethersulphone, (PC) personal computer, (PRESS) predictive error sum of squares, (SCGM) subcutaneous continuous glucose monitoring, (SMBG) self-monitoring of blood glucose

Keywords: biosensor, clinical investigation, continuous monitoring, flow rate sensor, glucose, microdialysis

Corresponding Author: Gregor Ocvirk, Ph.D., Roche Diagnostics GmbH, Diabetes Care, Technology Development, Sandhofer Strasse 116, 68305 Mannheim, Germany; email address gregor.ocvirk@roche.com