

Peristaltic Pump Silicone Tubing: Maximizing Squeeze-Cycle Lifespan and Resisting Flow Occlusion

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1. Executive Summary: The Dynamic Heart of Aseptic Fluid Transfer

In biopharmaceutical processing, hemodialysis equipment, and aseptic liquid filling lines, peristaltic pump tubing serves as the dynamic heart of the fluidic architecture. Unlike rigid piping, peristaltic tubing is subjected to continuous, rhythmic mechanical crushing. The pump's rotary rollers compress the elastomeric tube completely flat against the pump housing (total occlusion) to drive fluid forward, followed immediately by rapid elastic rebound to draw in the next fluid bolus.

This relentless mechanical fatigue exposes standard elastomers to two catastrophic failure modes. The first is **Spallation**, where the internal walls of the tubing degrade under friction, shedding microscopic polymer particles directly into the high-purity drug fluid or blood stream. The second is **Volumetric Decay**, where the tube loses its hyperelastic memory (high compression set), failing to fully rebound after occlusion. This results in plunging flow rates and compromised dosing accuracy. To engineer a fault-tolerant fluidic conduit, facility designers mandate premium Platinum-Cured Silicone Tubing. This specification outlines the fatigue dynamics, volumetric flow mechanics, and dimensional extrusion tolerances required to sustain multi-million squeeze-cycle lifespans.

***Bioprocessing Axiom:** Tubing cannot be treated as a passive conduit. In a peristaltic pump, the silicone tube acts as the actual pump chamber. Any loss of elastic rebound geometry directly destroys the volumetric accuracy of the entire aseptic dosing line.*

2. Kinematics of Occlusion: Spallation Defense and Fatigue Life

During the rotary occlusion phase, the inner diameter (ID) of the tubing is forced together under extreme compressive strain. The maximum compressive bending strain ($\epsilon_{\max}$) occurring at the inner hinge points of the flattened tube is modeled as:

$$\epsilon_{\max} = t / (R_c + t/2)$$

Where t represents the wall thickness of the silicone tubing, and R_c represents the minimal bend radius induced by the pump roller. In standard, unreinforced silicone matrices, this localized high-strain zone accumulates micro-fissures. As the rollers generate longitudinal friction along the tube, these fissures shear off, causing spallation. Particle shedding is strictly prohibited under USP <788> (Particulate Matter in Injections).

To completely neutralize spallation, Reemane utilizes an ultra-high molecular weight, Platinum-catalyzed silicone matrix reinforced with high surface-area fumed silica. The platinum cross-linking establishes a dense, three-dimensional siloxane lattice that exhibits massive tear strength (> 40 N/mm). Furthermore, the extrusion line integrates a post-cure thermal annealing phase (200°C for 4 hours) that relieves all residual extrusion stress. This creates an ultra-smooth, low-friction inner bore that resists abrasive roller shear, extending the continuous pumping lifespan beyond 1,000 hours at 300 RPM without releasing measurable sub-visible particles.

3. Volumetric Flow Constancy and Dimensional Precision

The flow rate (Q) of a peristaltic pump is entirely dependent on the internal volume of the tubing rebounding perfectly after each roller pass. The theoretical volumetric flow is defined by the following hydraulic relationship:

$$Q = (\pi \cdot ID^2 / 4) \cdot L \cdot N \cdot \eta_v$$

Where ID is the inner diameter, L is the linear length of the tube between two occluding rollers, N is the rotational speed of the pump head (RPM), and η_v is the volumetric efficiency factor (dictated by the tube's elastic rebound speed). If the tubing wall thickness (t) is inconsistent, or if the ID fluctuates due to poor extrusion control, the fluid dosing will suffer severe pulsatile variations.

To guarantee absolute dosing accuracy for critical biopharma filling machines, Reemane implements closed-loop laser micrometer metrology directly on the extrusion line. The Inner Diameter and Wall Thickness are continuously monitored across three axes, maintaining extraordinary dimensional tolerances of ± 0.05 mm. This geometric perfection ensures that the tubing compresses uniformly and rebounds instantly ($\eta_v \approx 1.0$), maintaining flow rate constancy with less than 1.5% drift over a 120-hour continuous pumping validation.

4. Material Matrix Performance Comparison: Peristaltic Fluidics

Performance Criteria	Reemane Platinum Silicone	Thermoplastic Elastomer (TPE)	Peroxide-Cured Silicone
Spallation (Particle Shedding)	Ultra-Low (Passes USP <788>)	High (Sheds plastic micro-particles)	Moderate (Prone to friction degradation)
Elastic Rebound / Flow Constancy	Elite (< 1.5% flow decay over 120h)	Poor (Rapid loss of volume/memory)	Excellent (High elastic memory)
Extractables & Leachables (E&L)	Zero Byproducts (Ultra-high purity)	Moderate (Risk of plasticizer leaching)	High (Leaches benzoic acid residues)

5. Platinum-Catalyzed Purity and Extractables Mitigation

In upstream bioprocessing and vaccine manufacturing, the fluid passing through the peristaltic tube contains highly sensitive, high-value biological proteins and monoclonal antibodies (mAbs). Legacy peroxide-cured silicones leave behind volatile organic acids (such as 2,4-dichlorobenzoic acid) within the polymer matrix. When subjected to heated fluids or cleaning solvents, these residues leach out, aggressively binding to active pharmaceutical ingredients (APIs), causing protein denaturation and catastrophic batch contamination.

Reemane exclusively formulates peristaltic tubing using highly purified, addition-cure Platinum catalyst systems. This specific hydrosilylation reaction produces zero cleavage byproducts. The tubing is extruded in ISO 14644-1 Class 7 cleanrooms and undergoes exhaustive E&L (Extractables & Leachables) profiling using GC-MS and LC-MS analytics. It is fully certified to meet USP Class VI (In Vivo Biological Reactivity), ISO 10993, and European Pharmacopoeia (EP 3.1.9) standards, guaranteeing absolute biochemical inertness for critical human health applications.

Maximize Aseptic Pumping Efficiency with Reemane High-Fatigue Tubing

Eliminate volumetric flow decay, eradicate spallation contamination risks, and ensure absolute regulatory compliance across global bioprocessing networks. Reemane provides full hyperelastic fatigue modeling, laser-micrometer extrusion tolerances, and certified USP Class VI extraction data logs. To coordinate a technical review, contact our biopharma engineering desk at sales@siliconefactories.com or inspect our cleanroom extrusion facility at www.siliconefactories.com.