# **Instrumentational Setup**

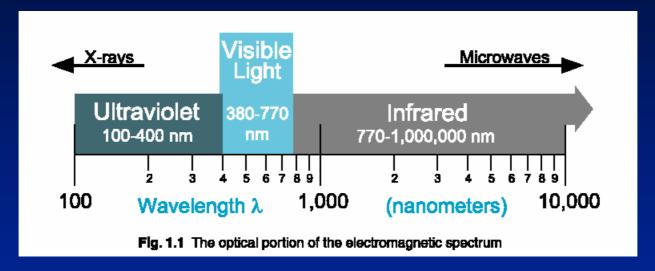




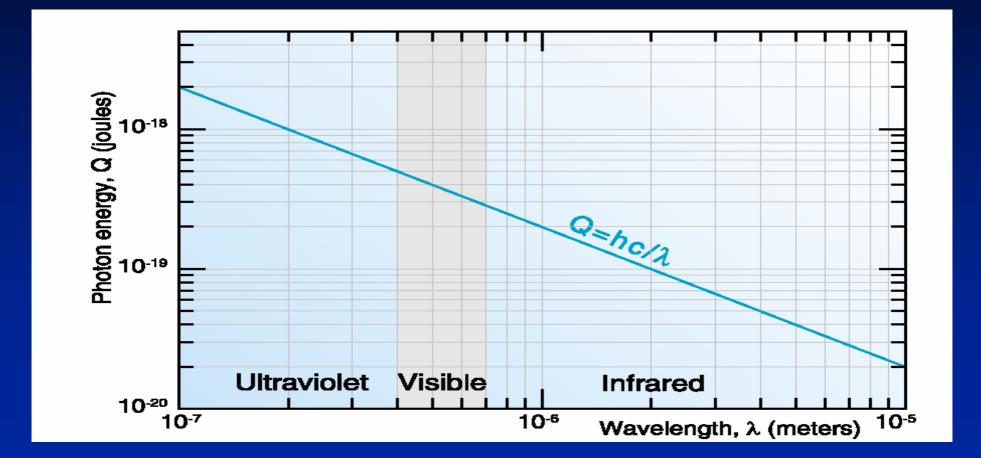
Some instruments we may encounter Basics on PDT, PDD



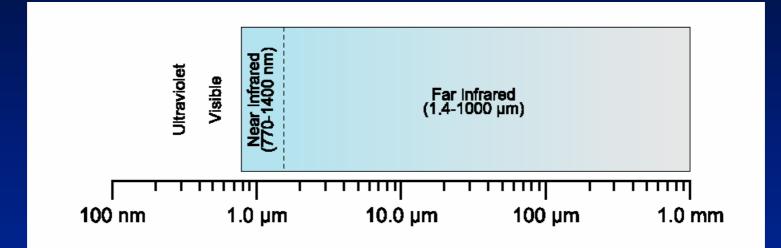
# **Electromagnetic waves**



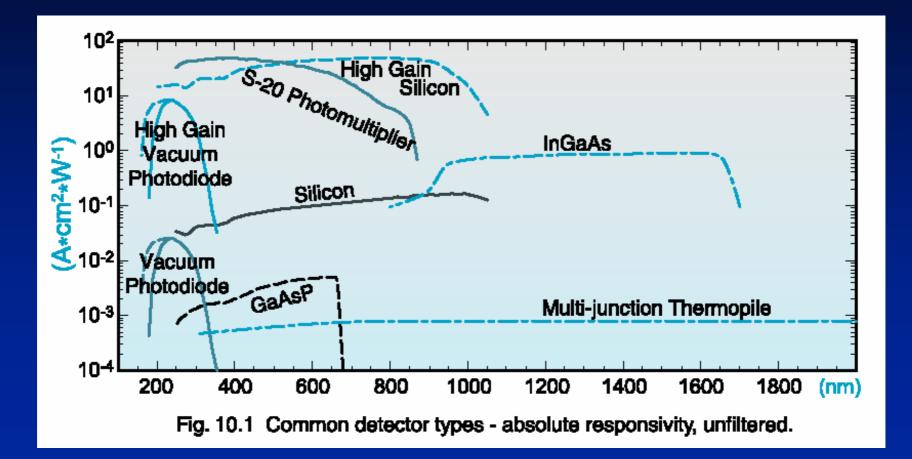
# **Optical Power**



# **Infrared Light**

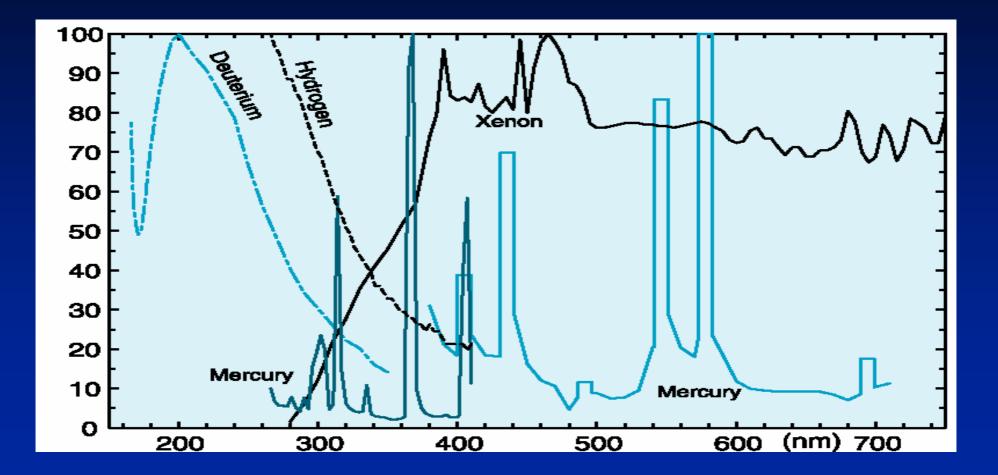


# **Detector Types**

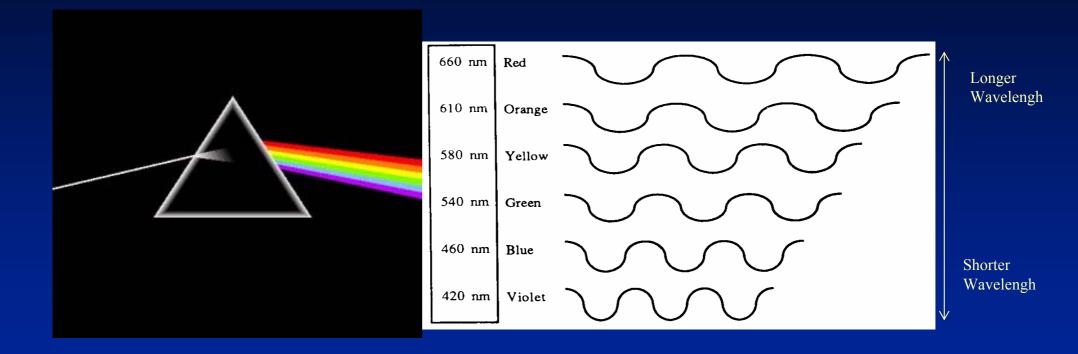




# **Luminescent Sources**

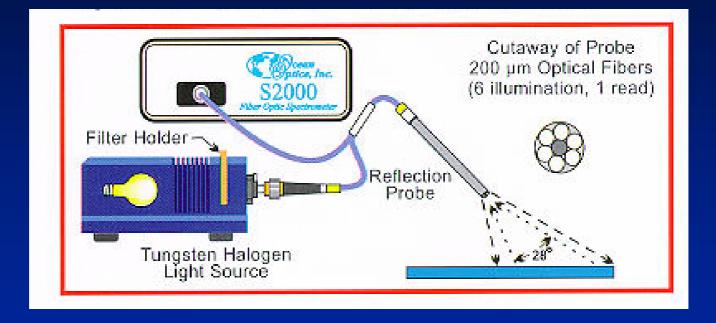


# Spectral range of visible light

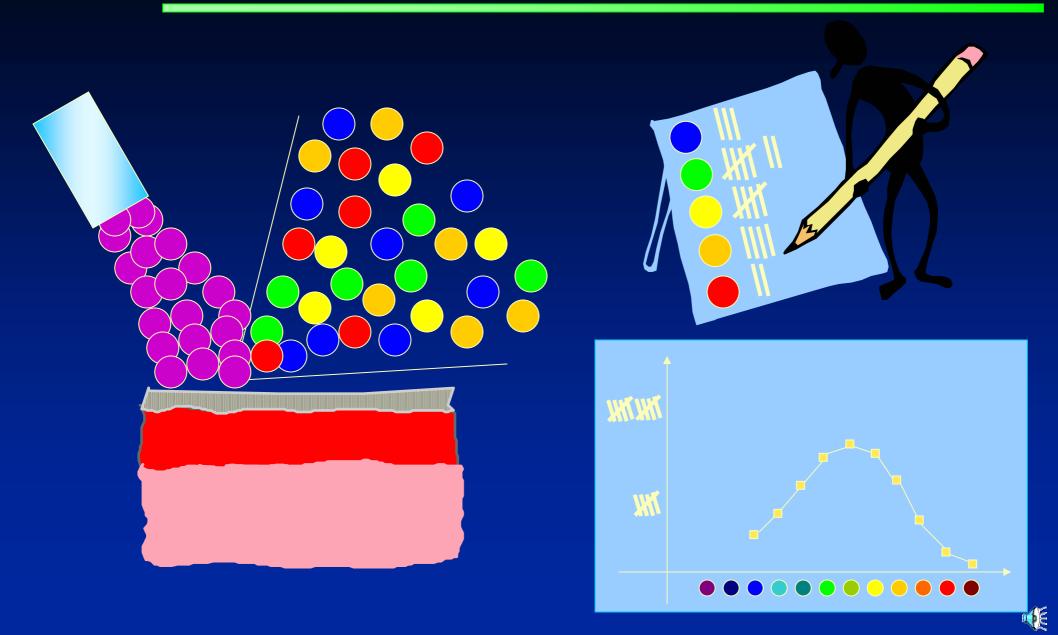


All colours have a specific wavelength The wavelength increases as the colours approach the red end of the spectrum

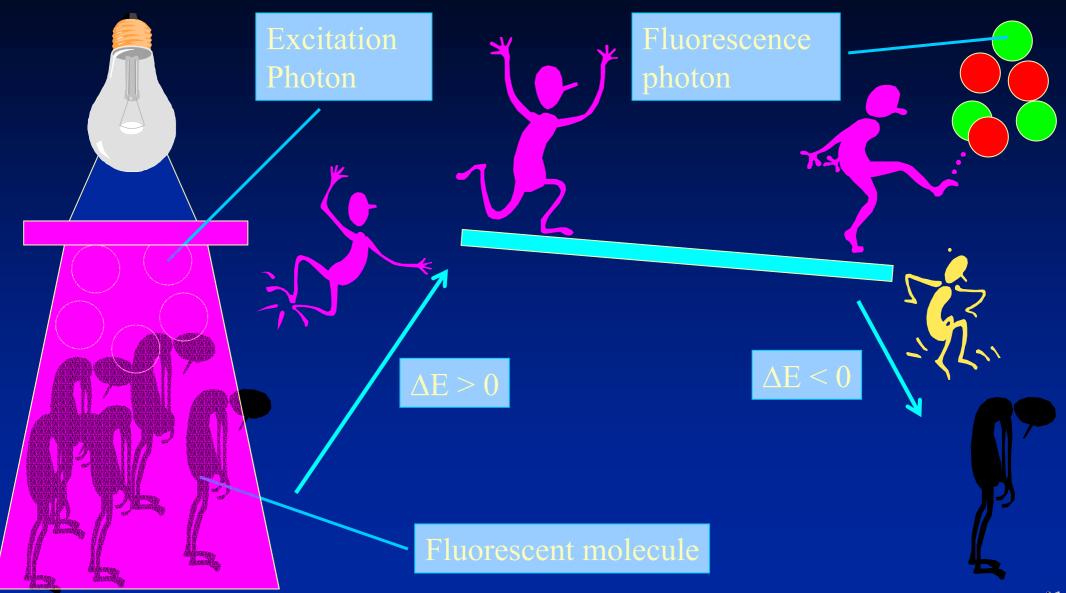
### Spectroscope setup

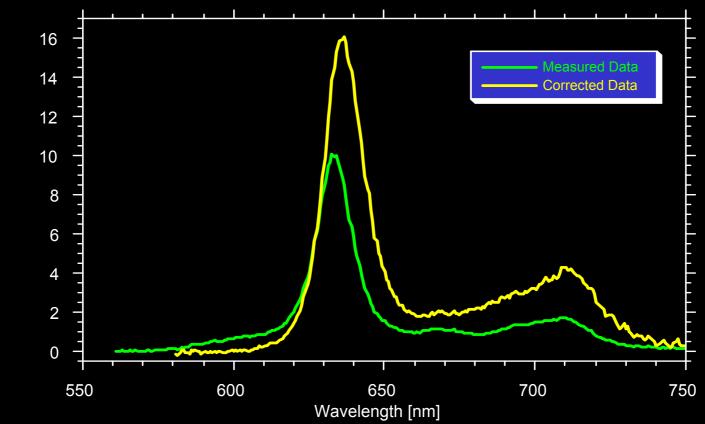


### Principle of fluorescence spectroscopy



### Principle of fluorescence

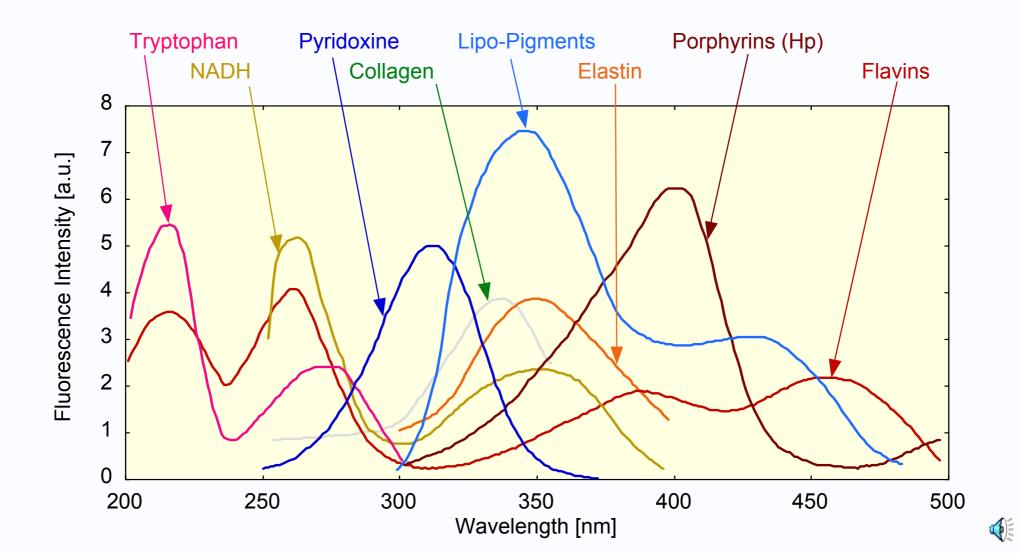




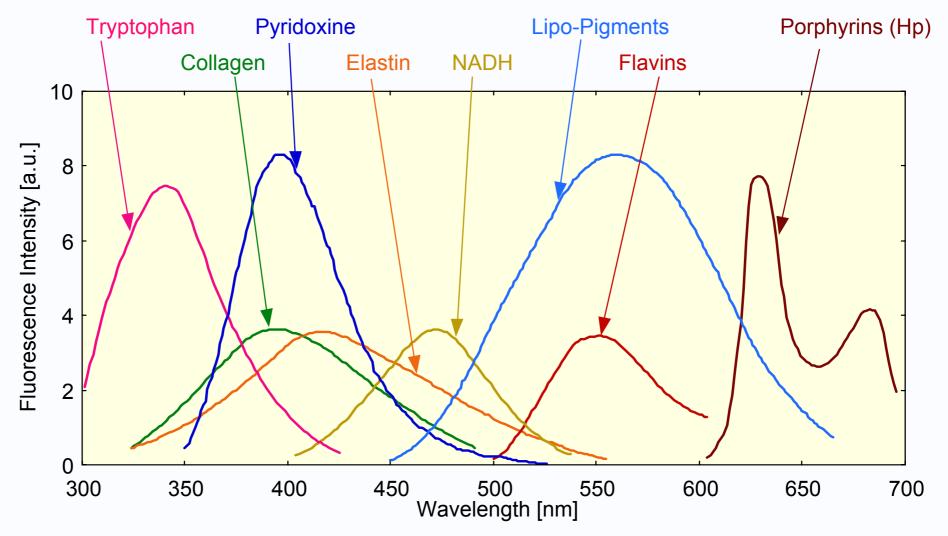
Fluorescence emission [a.u.]



# Excitation Spectra of some Biomolecules



# Emission Spectra of some Biomolecules





# Fluorescence emission spectra of cervical tissues

#### **(b)** 450 nm 0.2 T Fluorescence Intensity (c.u.) 0.18 normal 0.16+ $\lambda_{Ex} = 330 \text{ nm}$ 472 nm 0.14+ 460 nm 0.12 HPV 0.1 CIN II 0.08 472 nm 0.06 0.04-0.02 0 -450 550 350 500 400 600 650 Wavelength (nm)

Ramanujam & al. Spectroscopic diagnosis of CIN, Gynecologic Oncology 52, 31-38 (1994)

N III

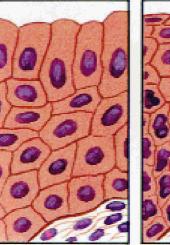
and HPV infection

#### Why is there a difference between neoplasic lesions vs. healthy tissue

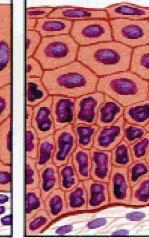
• The diagnostic basis of spectroscopy is not yet understood at the biochemical level

Possible explanations:

- Attenuators
  - Increase in Oxy-haemoglobin attenuation
- Relative contribution of tissue fluorophores
  - Decrease in contribution of collagen fluorescence
  - Increase in the contribution of NADH
- Architectural effect
- Other.



SQUAMOUS METAPLASIA



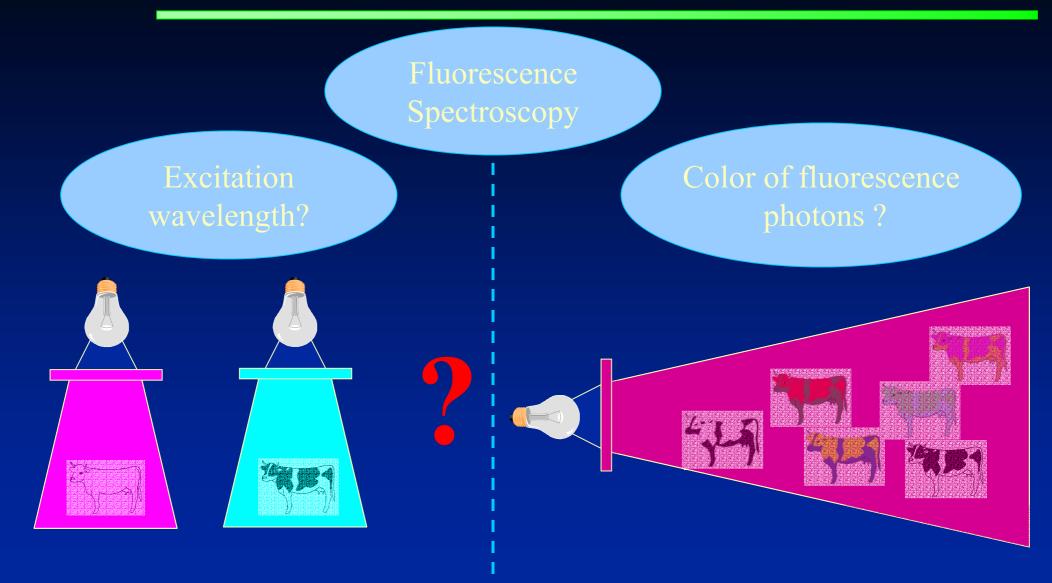
DYSPLASIA



CARCINOMA IN SITU

Æ

### Parameters of fluorescence spectroscopy



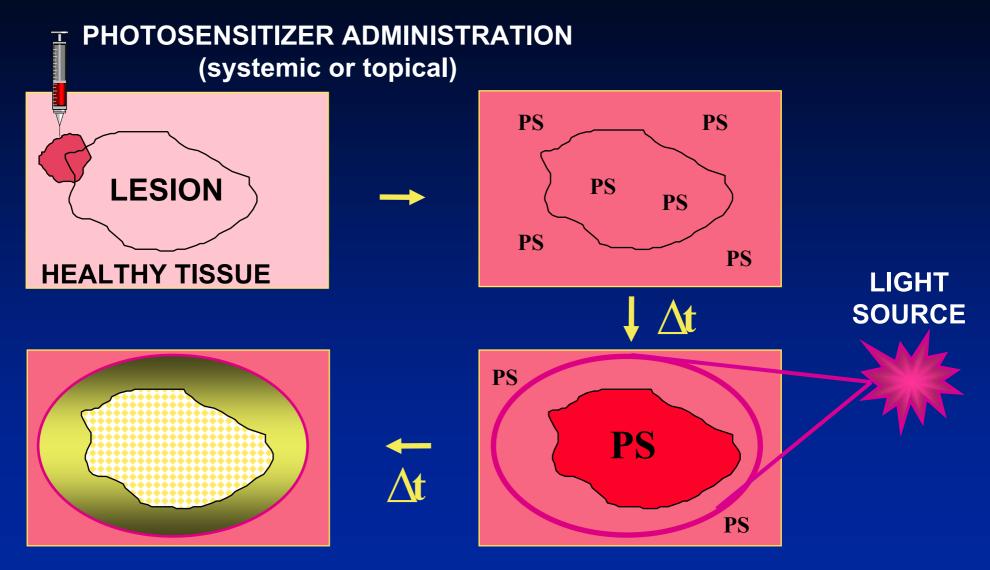
# Autofluorescence (ENT)



Early Tumor Detection without Marker Substance Carcinoma of the left vocal cord, precancerous lesion right vocal cord (bacterial growth)

> K. Malzahn, C. Arens, H. Glanz Justus-Liebig-University Giessen

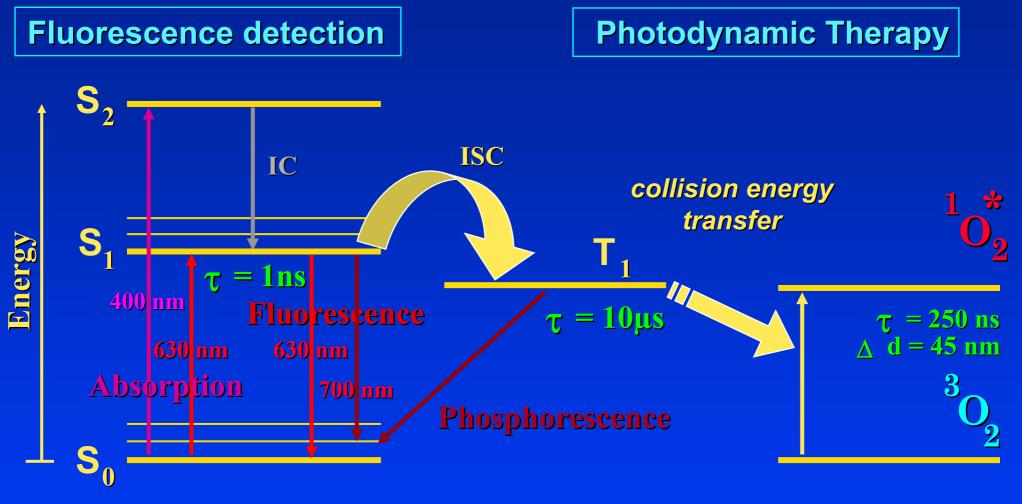
# **Principle of PDT**



#### **"SELECTIVE" DESTRUCTION**

#### "SELECTIVE" ILLUMINATION

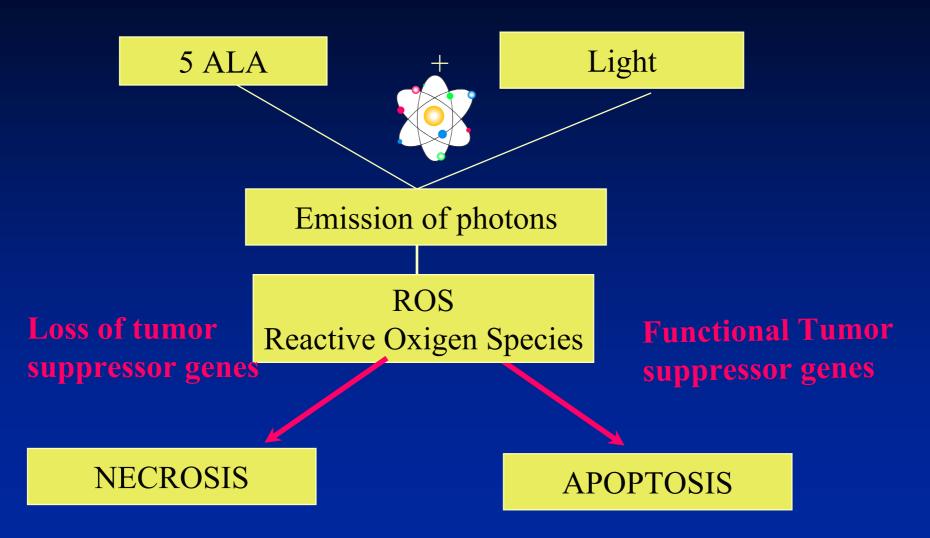
### **Photophysical Processes in:**



**Porphyrins spectroscopy** 

Singlet Oxygen production

#### Possible Effects of PDT



# Mechanisms of Selective Tumor Uptake and Localization of Exogenous Photosensitizers

- The Properties of the Tumor
  - Leaky Vasculature
  - Compromised Lymphatic drainage
  - Large interstitial space
  - Decreased pH value

(reduces solubility of porphyrins

aggregation + protein association)

# Mechanisms of Selective Tumor Uptake and Localization of Exogenous Photosensitizers

- The Properties of the Tumor (Cont.)
  - Elevated numbers of low-density protein receptors
  - Presence of macrophages (take up large amounts of HPD)
  - High amount of newly synthesized collagen (that binds porphyrins)
  - High amount of Lipid (that has a high affinity for lipophilic dyes)
  - Membrane potentials of malignant cells

**PDT** with second generation **PS** 



- Absorption at 635 nm (Blue light also used)
- Dose 30 60 mg/kg orally (20% for topical administrations)
- D / L interval 4 18 h
- Light dose 10 150 J/cm2
- Skin photosensitization 24 48 h

### **Fluorescence contrast**

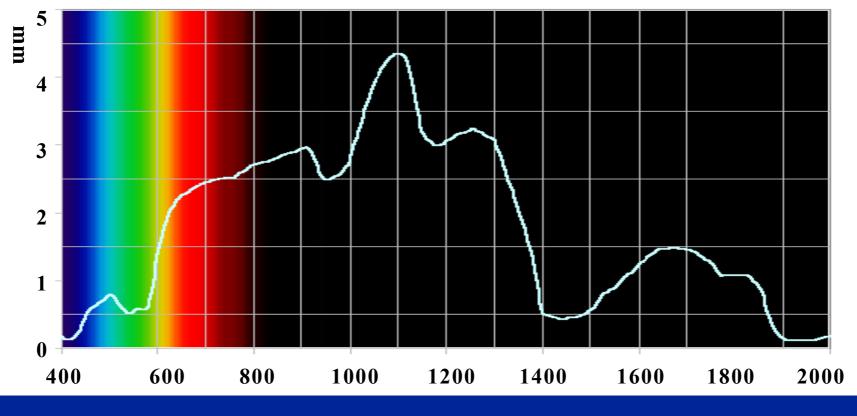
Fluorophores ? -

Autofluorescence, Endogenous Fluorophores: Flavins, Porphyrins, NADH, etc

**Endogenously induced:** ALA-PPIX

**Exogenous:** Photophrin<sup>®</sup>, mTHPC

#### Penetration depth of light in tissue in relation to the wavelength



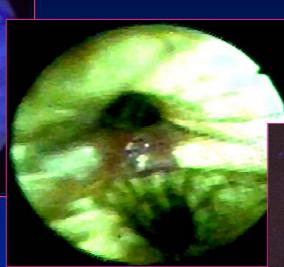
Wavelength [nm]

**Photodynamic Therapy** 

**Light parameters** 

- Wavelength
- Drug light interval
- Irradiance
- Duration of irradiation
- Total light dose

# Early Tumor Detection PDD/AF



#### Pneumology

Urology



#### **Neurosurgery**

#### **Combined Diagnosis System**

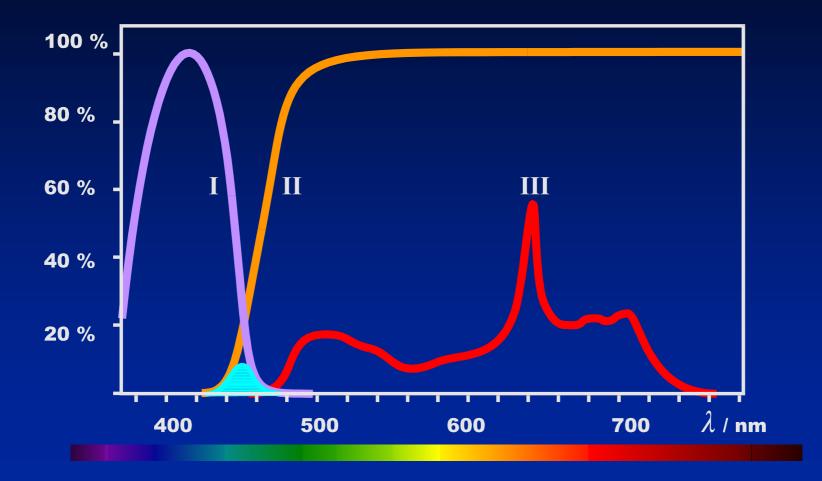


- White Light
- ALA-Mode
- Autofluorescence-Mode

- Rigid Telescopes
- Fiberscopes
- OP Microscopes



#### **Fluorescence Observation (PPIX)**



### Neurosurgery

#### Special Fluorescence Microscope

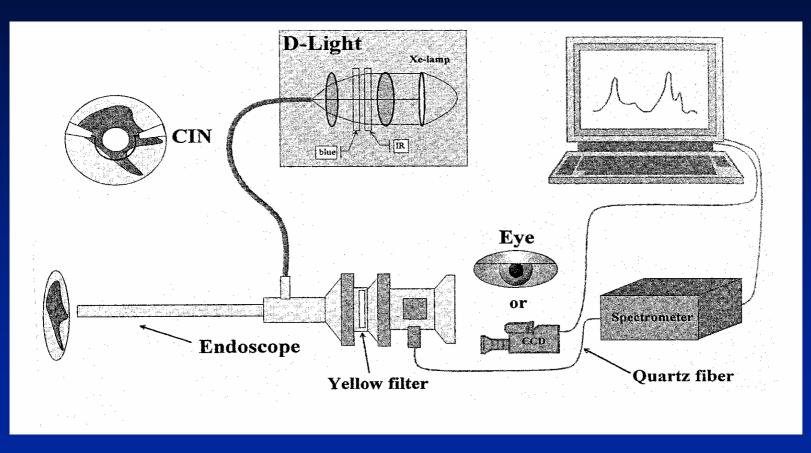
Storz AG/ Carl Zeiss

Early Tumor Detection with Marker Substance



High grade Glioma

Stummer, Reulen Munich-Großhadern Fluorescence imaging and spectroscopic system used for fluorescence photodetection of cervical lesions after topical application of 5-ALA or h-ALA



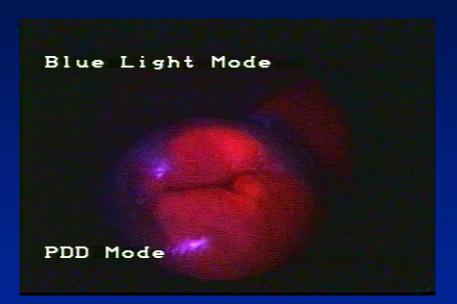
Hillemanns & al. Photodetection of Intraepithelial Neoplasia, Cancer 88, 2275-92 (2000)

# Fluorescence image of the cervix after h-ALA application

#### White light



#### Fluorescence



Fluorescence image and white light image of the cervix uteri after the application of 3% acetic acid. Application of 10mg h-ALA in 10ml 0.9% NaCl solution on the cervix during 3 hrs.

# Conclusion

- Existing instrumentation in clinical practice
- In certain disciplines may need adaptation or development
- Much clinical development and research is done in the field of photosensitizers
- Autofluorescence diagnostic procedures become more interesting