Fiber coupled FTIR-spectroscopy for biomedical diagnostics

V. Artyushenko*, J. Mannhardt*; N. Pleshko**, C. McGoverin**, Q. Onigbanjo**; T. Sakharova*** *art photonics GmbH, Rudower Chaussee 46, 12489 Berlin, Germany, <u>sa@artphotonics.com</u> **Dept. of Bioengineering, Temple University, Philadelphia, PA, USA *** General Physics Institute RAN, Moscow, Russia

Development of Mid IR fiber optics within the last decade enables biomedical applications of FTIR-spectroscopy not only for *in-vitro*, but for *in-vivo* diagnostics. While in the past fiber coupled FTIR-spectrometers were produced with LN-cooled MCT detectors, now very good S/N Ratio can be reached with room temperature DTGS-detectors. High quality Polycrystalline PIR-fibers from Silver Halide crystals and Chalcogenide As-Sglass CIR-fibers provide good throughput in optimal coupling with FTIR - making biomedical diagnostics possible using ATR absorption and reflectance spectroscopy in Mid IR - the most informative finger-print region for organic molecular vibrations.



FTIR spectrometers equipped by DTGS-detectors & coupled with ATR-fiber probes by mirror-fiber couplers installed in sample chambers. *Fig. 1. Fiber coupled FTIR*

from Thermo (iS5) and ABB

While all fiber optic probes reduce S/N Ratio when coupled to FTIR-spectrometers - due to an evident troubles of efficient coupling, – their spectra quality is almost the same as for a common ATR-accessories used for FTIR with DTGS detectors:

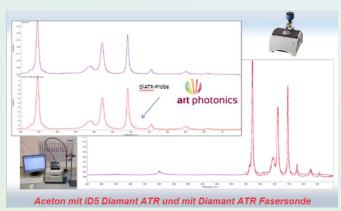


Fig. 2. Example of Acetone spectra measured with iS5 FTIR from Thermo equipped with standard ATR-accessories and 1,5m long PIR-fiber ATR-Probe

At the 1st stage fiber coupled FTIR-spectrometers should be used for intensive studies of tissue or bioliquid in a broad spectral range to detect specific changes related to the disease, but these changes are already known for the set of few wavelengths (signal & reference) – then small and low cost fiber sensors can be developed for specific diagnostics.



Fig.3. Fabry-Perot Spectral Engine from VTT vs iS5

ATR-Probes

ATR-Absorption Spectroscopy with detachable PIR-fiber loops enable molecular analysis of liquids and tissue in-vivo, in real-time, including endoscopic applications, in two parts of Mid IR-range (due to use of CIRor PIR-fibers): 6500-1700cm-1 and 3600-600cm-1.

Fig. 4. Transmission spectra of different ATR-probes of 1,5m length and design of detachable single & multi-loop ATR-tips.

ATR-probes with detachable tips based on PIR-Loops (or other ATRtips – like Silicon or Diamond-cone) enables to sterilize them and to use for diagnostics in-vivo (which is also needed for disposable PIR-loops).

Fig. 5 Examples of ATR-absorption spectra for a hand skin.

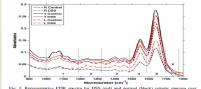
Sterilization is needed for all biomedical applications in-vivo and it was tested for detachable PIR-Loop ATR-tips. Spectral overlay of bovine cartilage after sterilization does not show any significant changes in the Amide I & II peak heights

Fig. 6. Photos of PIR-loops glued in detachable PEEK-caps & Absorption spectra of bovine cartilage after PIR-Loops sterilization

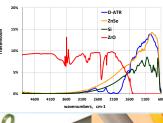
FTIR-spectroscopy with ATR-Fiber Probes in biomedical applications

Pioneering applications of FTIR-fiber spectroscopy were started long time ago to detect malignant tissue during cancer operation (#1) and now much more trials are done in-vivo (#2) & invitro (#3) – see data presented from 3 articles at Fig. 7 to show great potential of FTIR-spectroscopy for molecular tissue diagnostics.

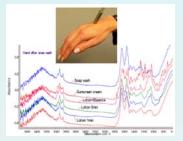
#3 1 October 2010 / Vol. 1, No. 3 / BIOMEDICAL OPTICS EXPRESS 1014

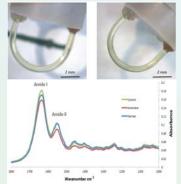


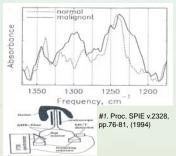
adverges. spectral regime between 950 and 1800 cm⁻¹ was collected from excised colonic specimens and compared with histology. Our model identified 3 sub-ranges that optimize the classification results, and the performance for detecting inflammation resulted in a sensitivity, specificity, accuracy, and positive predictive value of 926, 88%, 90%, and 88%, respectively.

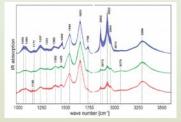












 #3. Spectra of normal Blue), necrotic (green) and carcinoma (red) brain tissue.
N.Bergner et al., *Analyst*, 2013, 138, 3983

