

biophotonics end-users needs

## THE OPHTHALMOLOGIST'S NEEDS FOR THE ANALYSIS OF THE RETINA

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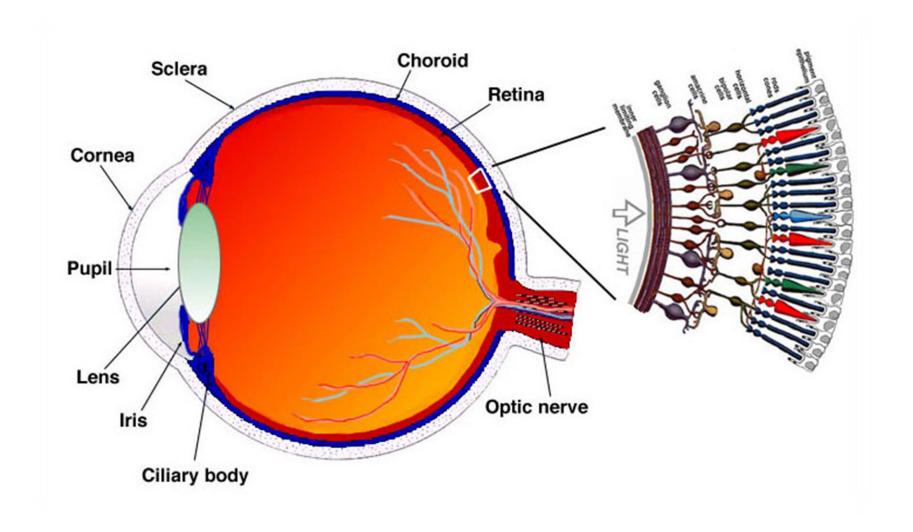




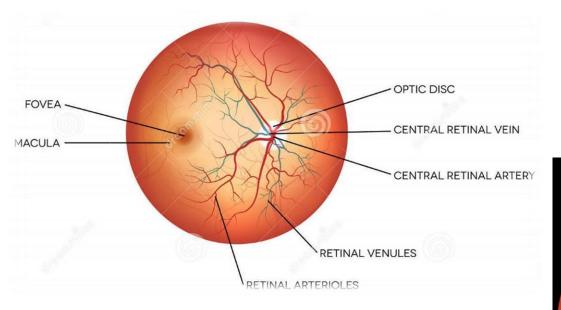




### ANATOMY OF THE RETINA

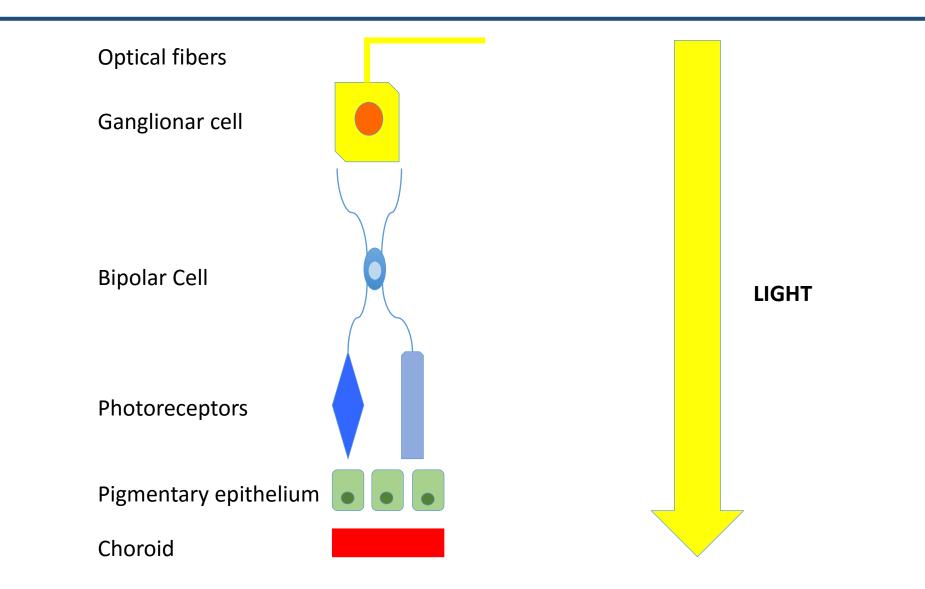


### ANATOMY OF THE RETINA



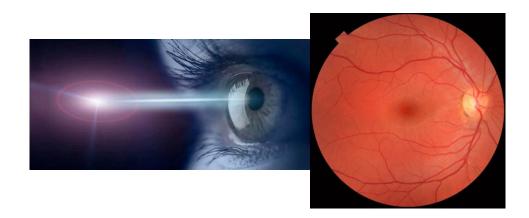


## ANATOMY OF THE RETINA



### The visual function and retinal structure

### are parameters intimately connected



### structural examination of the retina

## **Clinical examination**

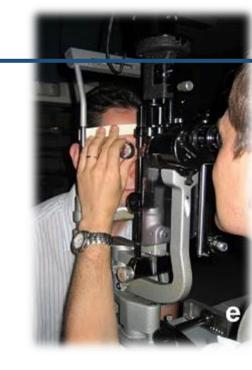
## Indirect or direct ophtalmoscopy

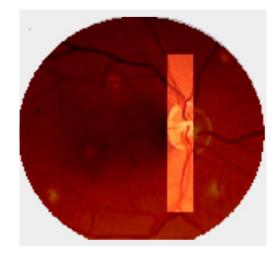
## Ophtalmoscopy

- What we actually do at each consultation
- The fundus is seen through a slit lamp
- Uses a light source and an aspherical

convergent lens

• Stereo vision but only a small field visible





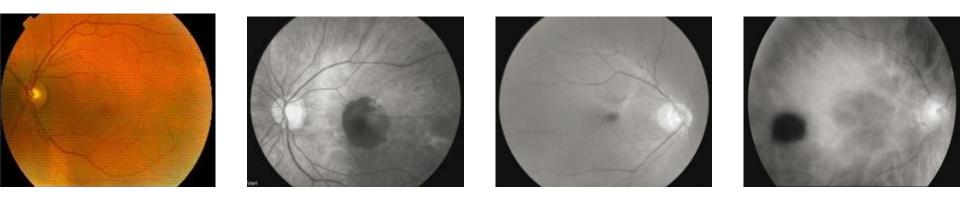
## Paraclinical exams

### RETINOGRAPHY

## RETINOGRAPHY

#### Objective:

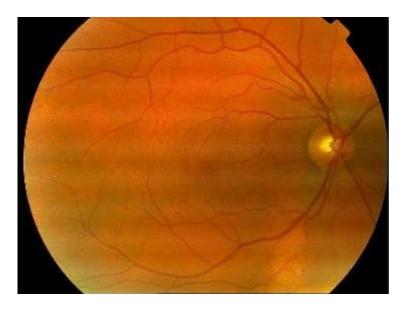
pictures of the eye fundus with different wavelengths



## RETINOGRAPHY

- Colored pictures:
- Uses white light
- Stereoscopic pictures are possible





#### **Monochromatic light**:

Blue (500nm) => surface of the retina
xantophyle pigment, optical fibers



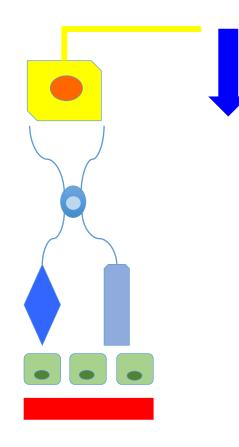
**Optical fibers** 

Ganglionar cell

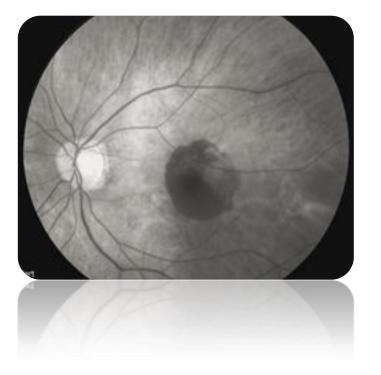
**Bipolar Cell** 

Photoreceptors

Pigmentary epithelium Choroid



#### **Green** (570nm) => vessels and hemorrhages no vision of the choroid



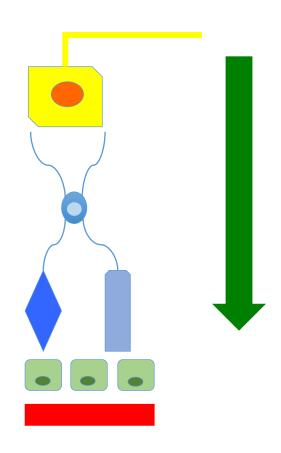
**Optical fibers** 

Ganglionar cell

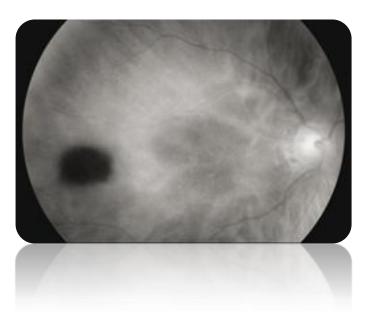
**Bipolar Cell** 

**Photoreceptors** 

Pigmentary epithelium Choroid



## **Red** (645 nm)=> pigments atrophy, detached EP and under the EP



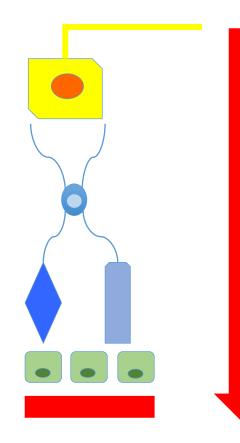
**Optical fibers** 

Ganglionar cell

**Bipolar Cell** 

Photoreceptors

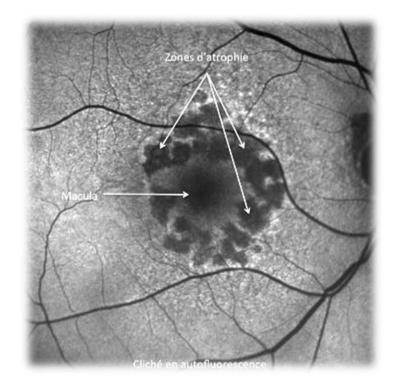
Pigmentary epithelium Choroid



<u>Autofluorescent</u>

## **480nm** with a barrier : **fluorescence light** dysfunctions of the RPE





## Paraclinical exams

ANGIOGRAPHY

## ANGIOGRAPHY

#### Study the vascularization of the retina



## Conventional angiographs

- 1st conventional angiographs with flash light
- The light was glared and time acquisition long

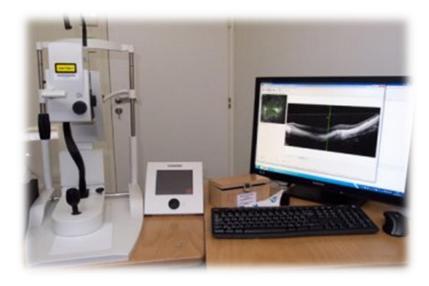


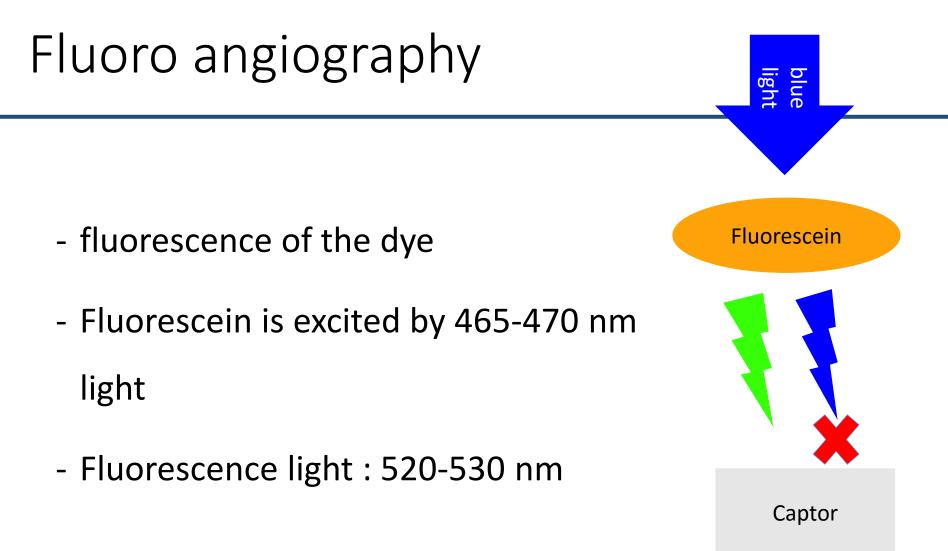


• Now we use Scanning Laser Ophtalmoscopy =SLO

It uses a laser beam that scans the retina in a confocal system







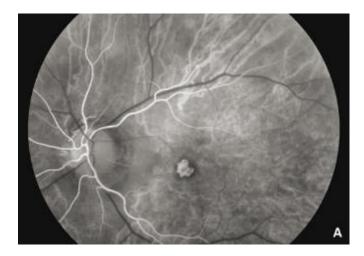


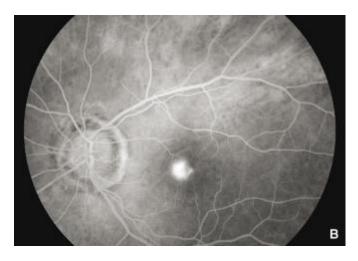
#### • Interests:

Shows us:

- Leackage of the vessels
- Neovascularization
- Abnormalities of the vessels: aneurysms, stenosis,,

ischaemia...



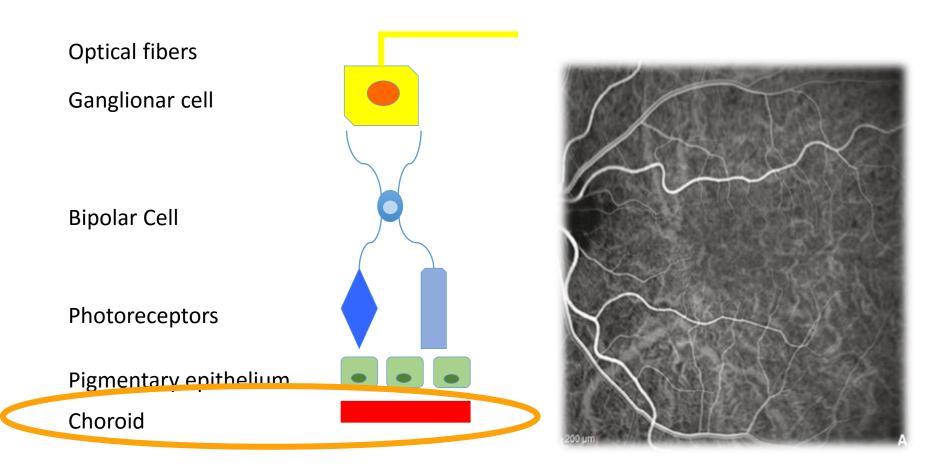


## Paraclinical exams

## Indocyanine Green angiography

#### • Objective:

Shows the deep vascularization = below the EP = the choroidal vascularization

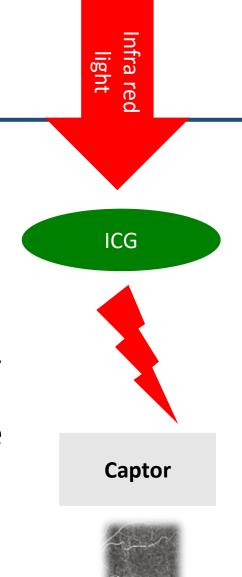


ICG Angiography

Green indocyanin is excited with infrared light

Infrared light has a poor absorption by

the RPE => the choroid below is visible



## ICG Angiography

#### Interests:

Shows the choroidal vascularization

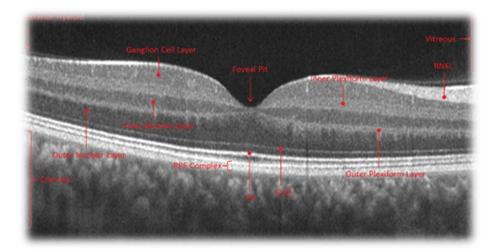
Less allergenic

Used for ARMD diagnosis +++

#### • <u>Limits</u>:

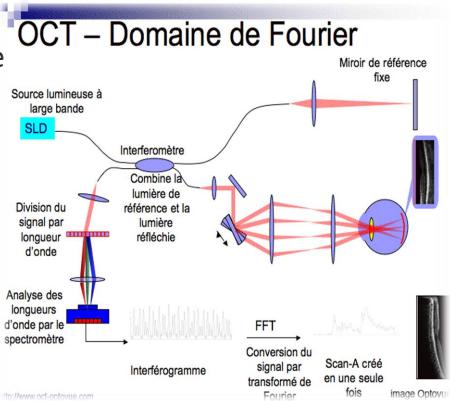
Limited resolution

## Optical Coherence Tomography = OCT



## **Optical Coherence Tomography**

- Analysis of the light reflectivity in the
- different layers of the retina using
- spectrometry
- 2 to 3 seconds to perform a hundred cross-sectional images on a square
- of 6x6 mm

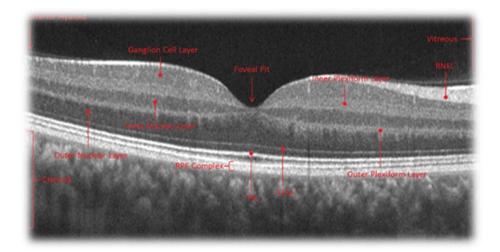


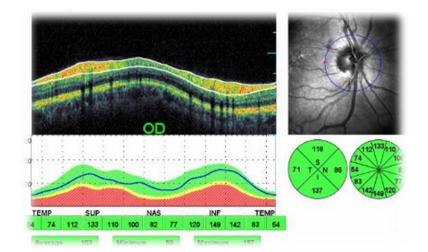
## **Optical Coherence Tomography**

None invasive study of the retina : cross-sectional images

 $1^{st}$  generation in the 90's : time domain (10  $\mu m)$ 

Actually: OCT spectral domain (5µm)





• OCT en face:

Analyses the different layers of

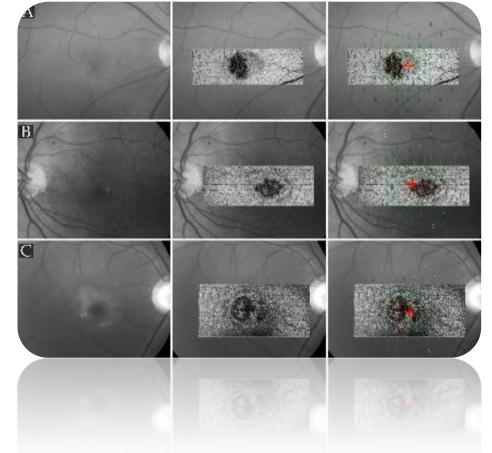
the retina not with cross

sectionnal images but in the

frontal plan

 $\Rightarrow$ To detect the path of the neovessels

 $\Rightarrow$ Surface of the lesions...



#### • <u>Limits</u>:

#### Not a dynamic examination



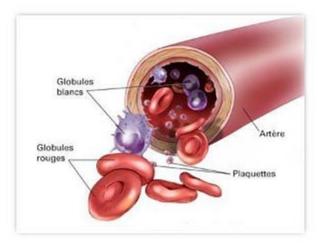


## Paraclinical exams

Angio-OCT



## Based on the concept that the only movable structures in the eye are the blood particles

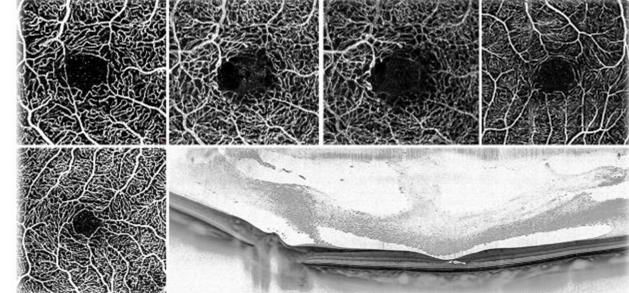






## Analyses the vascularization of the retina WITHOUT dye

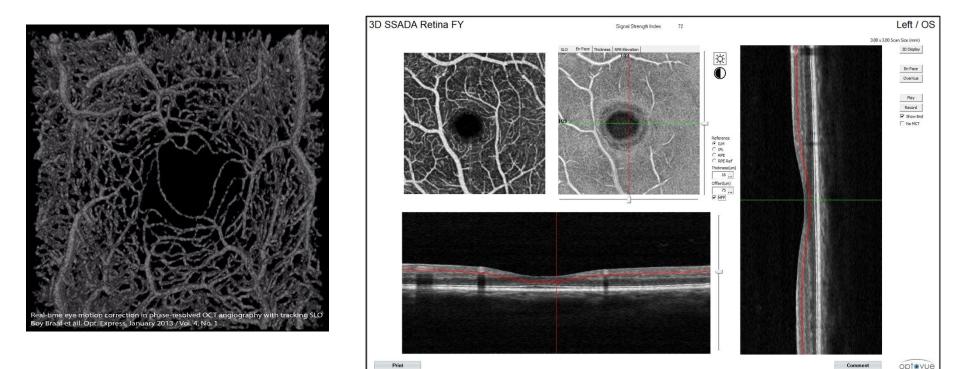
## To obtain a 3D visualization of the microvascularization of the retina



Maté Streho-Explore Vision

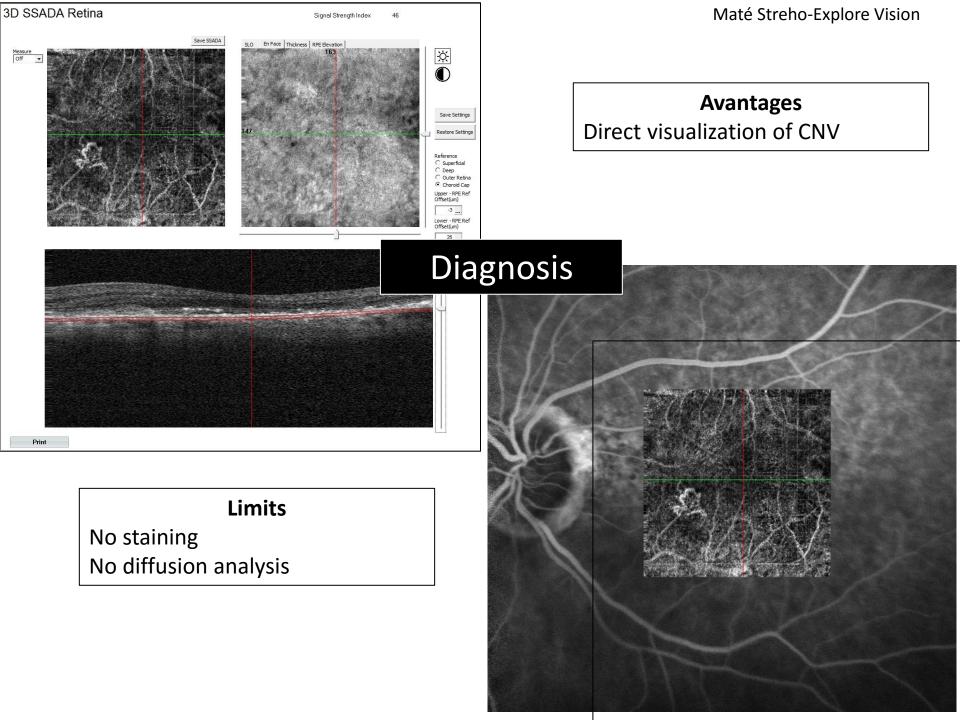
**Optovue** 





Optovue XR ADVANTI Module SSADA : Split-Spectrum Amplitude Decorrelation Algorithm Use movment of cells in vessels

#### But if the movement is too fast or too slow there is no signal



## Adaptative Optics

 The first in vivo retinal « microscope »

Visualisation of cells and vascular walls



The **rtx1** adaptive optics retinal camera from Imagine Eyes

## Cellular resolution

SLO (zooi

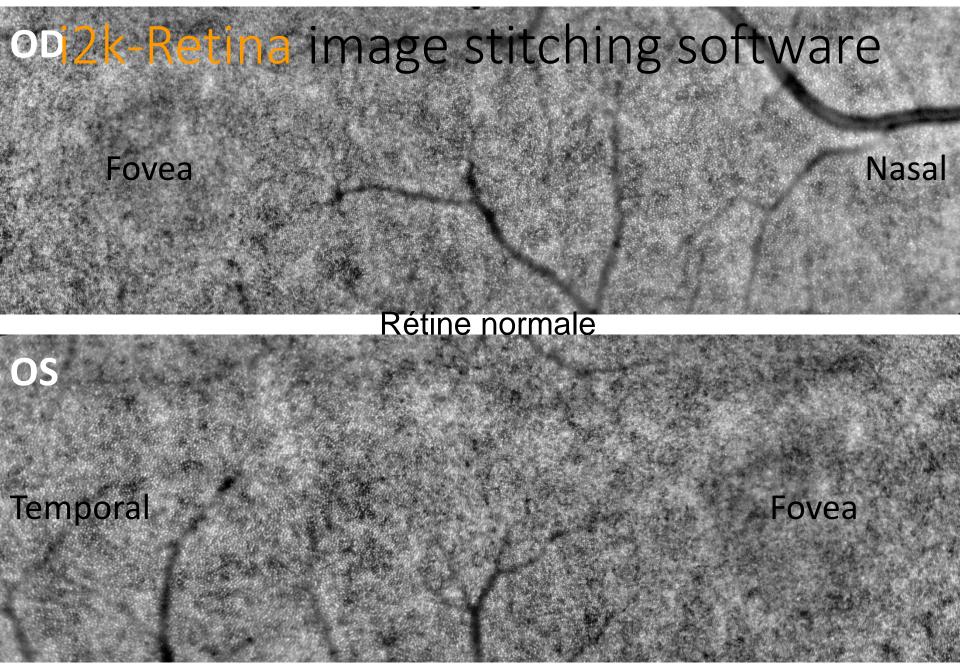
## SLO (Scanning laser ophthalmoscopy)

Resolution 15-20 µm microscopics structures are invisible

#### Resolution 2-4 µm Retinal cells are visible

daptive (zoom in

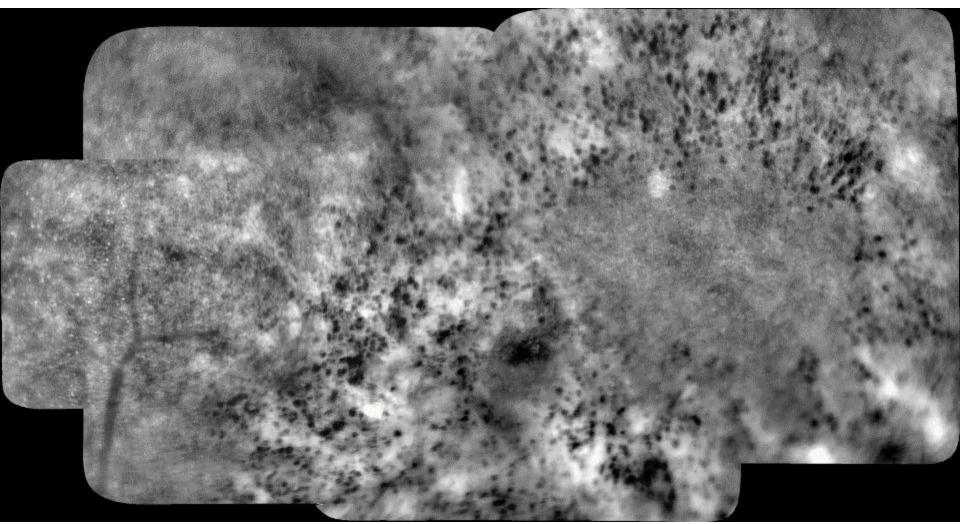
Images: courtesy of Gocho, Kameya et al., Nippon Medical School Hokusoh Hospital, Chiba, Japan



Courtesy Gocho & Pâques, Quinze-Vingts National Hospital, Paris

I2k is a registered trademark of DualAlign L

## i2k-Retina image stitching software



Courtesy Gocho & Pâques, Quinze-Vingts National Hospital, Paris Cone-rod dystrophy (CRD)

I2k is a registered trademark of DualAlign L



 The cluster OPTITEC in partnership with ONERA and Astrophysics Laboratory of Marseille (LAM) have opened the pooled European platform for adaptive optics (PEMOA)









	Clinic	Learning	Pre clinical
PEMOA Secoptitec	Finance research	logistics organization	Finance research Installation project
	RTX1 + RH		technical validation
Cerimed	-	Provision of lecture halls	project partnership Last available lab expertise
Imagine Eyes	Expertise	Devices	project partnership development Industrialization and Commercialization
AP HM Asistence Publique Hobitaux de Marselle	Facilities Clinical trials Doctors	Clinical learning	Animal models
Other parteners		Fresnel	Technical or academic partner (Pharmaceutical group?)



#### Partnership POMA / CERIMED

Promote the transfer of technology for the development of innovative products in the field of medical imaging

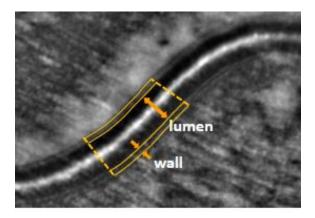






• The PEMOA platform is active since the end of 2014, is the result of a successful collaboration between various public and private actors on the theme of adaptive optics (AO).







## Conclusion

- Retinal imaging and ophthalmological imaging is a changing world
- The expectations of practitioners in their daily practice are mainly directed towards :
- higher resolution : cellular imaging
- Higher speed and larger field of view
- Combined imaging (multimodal and/or functional imaging)
- Dynamic imaging (vessels)
- Targeted imaging (cell markers)
- Partnerships with all actors are key to progress











# Thank you for your attention



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