

Hyperspectral and multispectral skin imaging

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Towards better skin assessment

- Skin cancer, other diseases → clinicians need **non-invasive**, **patient-friendly** and **informative** devices for skin diagnostics;
- Commercial skin imaging devices – still with drawbacks:
 - Low sensitivity/specificity;
 - Insufficient reliability;
 - Bulky design, cable/PC;
 - Able to collect spectral information, but too slowly – motion artifacts create problems; image conversion undeveloped;
 - Expensive, ~20-40 kEUR.



Siascope



DermaLite



MelaFind



Institute of Atomic Physics and Spectroscopy,
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(since 1967)

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Biophotonics laboratory: our profile

(5...40 co-workers, strongly depending on projects)

Aim – to develop handy and **affordable for end-users** methods, devices and technologies for clinical diagnostics and monitoring by exploiting **optical** features of *in-vivo skin*.

Non-invasive → non-contact imaging technologies:

- **Multi-spectral reflectance imaging** → skin chromophore mapping for diagnostics, follow-up and self-monitoring (today's topic)
- **Autofluorescence intensity, lifetime and photobleaching rate imaging** → skin cancer diagnostics (Emily's poster on Thursday)
- **Photoplethysmography imaging** → distant cardiovascular monitoring - e.g. heart rate and arrhythmia, anaesthesia control (NBC-17, Tampere, in 2 weeks)

Recent review paper



Review

Multispectral, Fluorescent and Photoplethysmographic Imaging for Remote Skin Assessment

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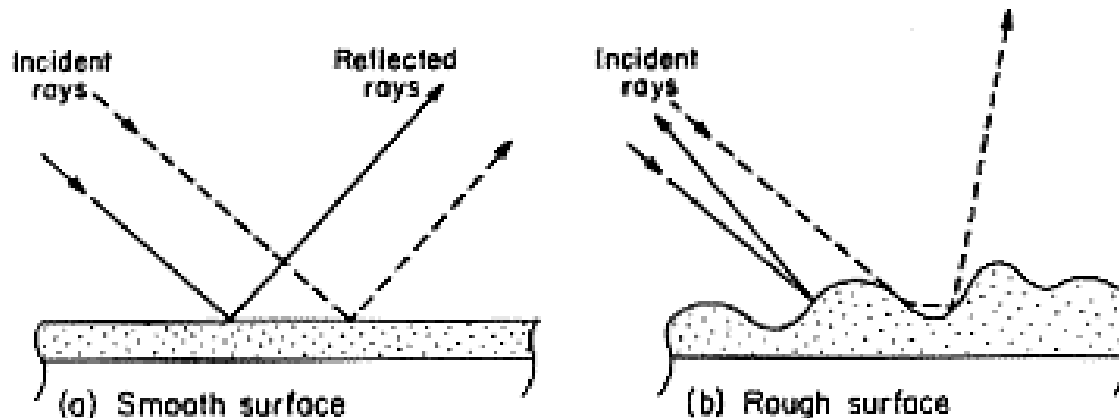
Sensors **2017**, *17*, 1165; (open access)

Outline

- Basics: spectral imaging and skin optics
- Hyperspectral imaging for skin cancer detection
- Smartphones for multispectral skin assessment
- Multi-monochromatic spectral imaging – a novel approach under development (skin + forensics)

Spectral imaging

- **Spectral reflectance** (single point): $R(\lambda) = I_r(\lambda)/I_o(\lambda)$,
where $I_o(\lambda)$ – intensity of **incident** light at the wavelength λ ; $I_r(\lambda)$ – intensity of **reflected** light at the same wavelength
- If reflected from a surface and detected at each point of it (e.g. by camera), we get x-y distribution of $R(\lambda)$: **spectral image** ($R_i(\lambda)$, i – number of pixels)
- λ – a specific single wavelength, e.g. 532nm



Two ways to obtain spectral images

1. By **narrowband filtering** of the photo-detector at broadband (e.g. white) illumination - for example, satellite spectral imaging of Earth (yesterday, Katya Lefevre on HSI)
2. By spectrally **narrowband illumination** of the object – only this particular spectral band can be reflected and detected (not always possible)

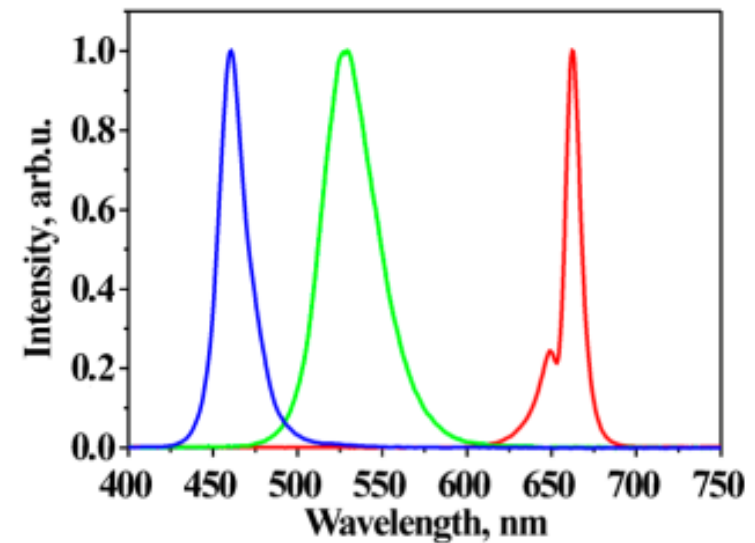
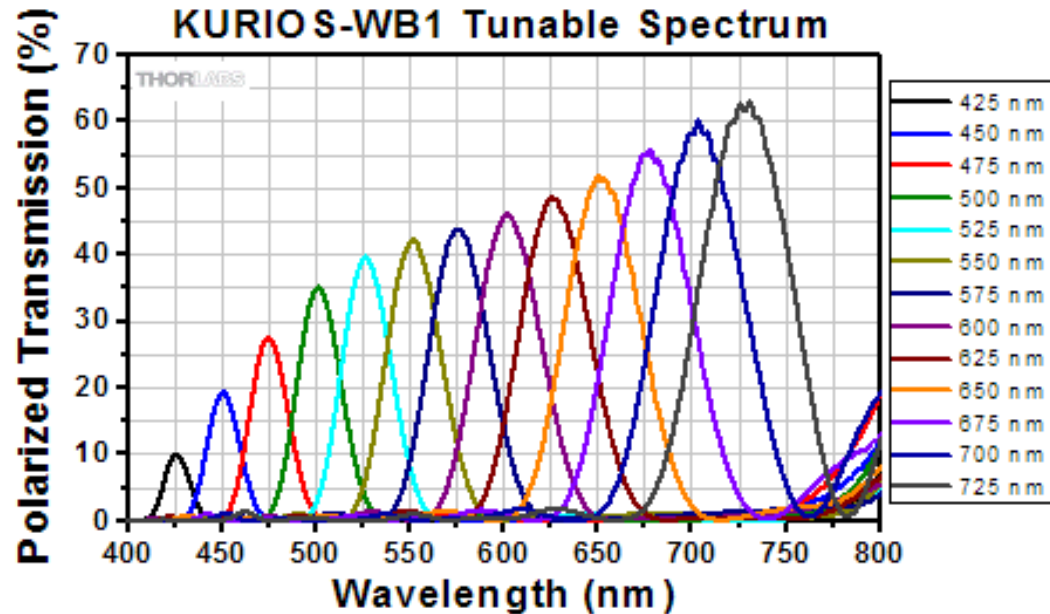
Hyperspectral & multispectral imaging (single \rightarrow multiple wavelengths)

Hyperspectral:

adjacent overlapping
spectral bands

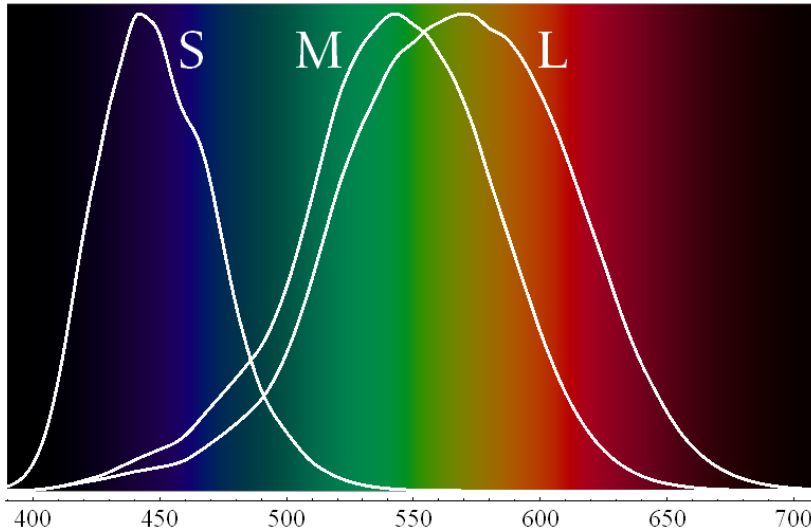
Multispectral:

selected non-
overlapping
spectral bands

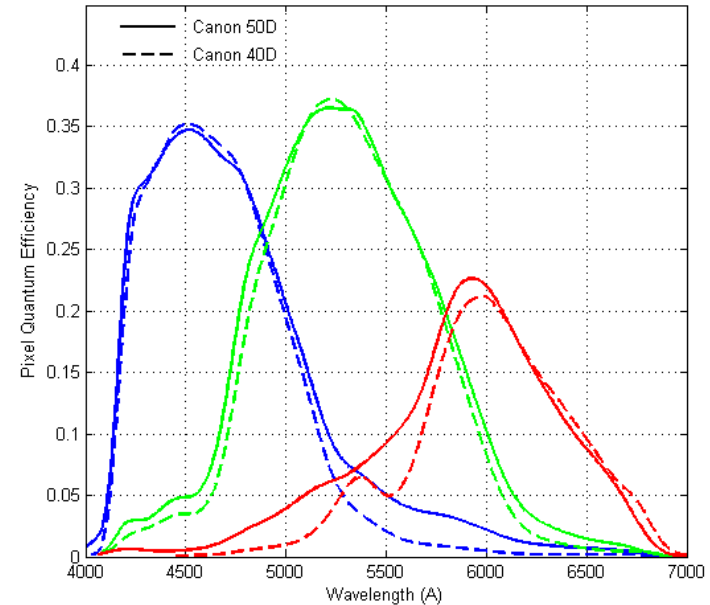


Human eyes and RGB image sensors are **hyperspectral** image detectors

Human eye



CMOS sensor



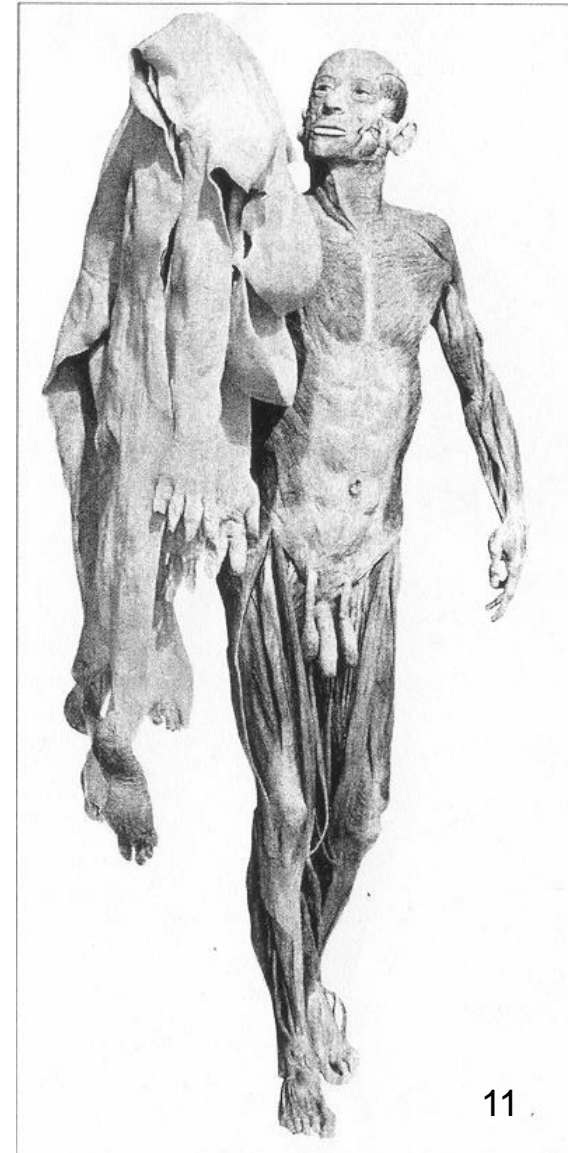
Human vision: brain processes in parallel the outputs of all 3 **retinal cones**, Σ RGB. Always merged (integrated) signal, **never a pure spectral image** (e.g. only R).

Image sensor first measures and reports **separated R, G, B values** from each pixel, and then calculates the corresponding color coordinates for the particular pixels

RGB image \rightarrow R-image, G-image, B-image; **3 SEPARATED SPECTRAL IMAGES!**

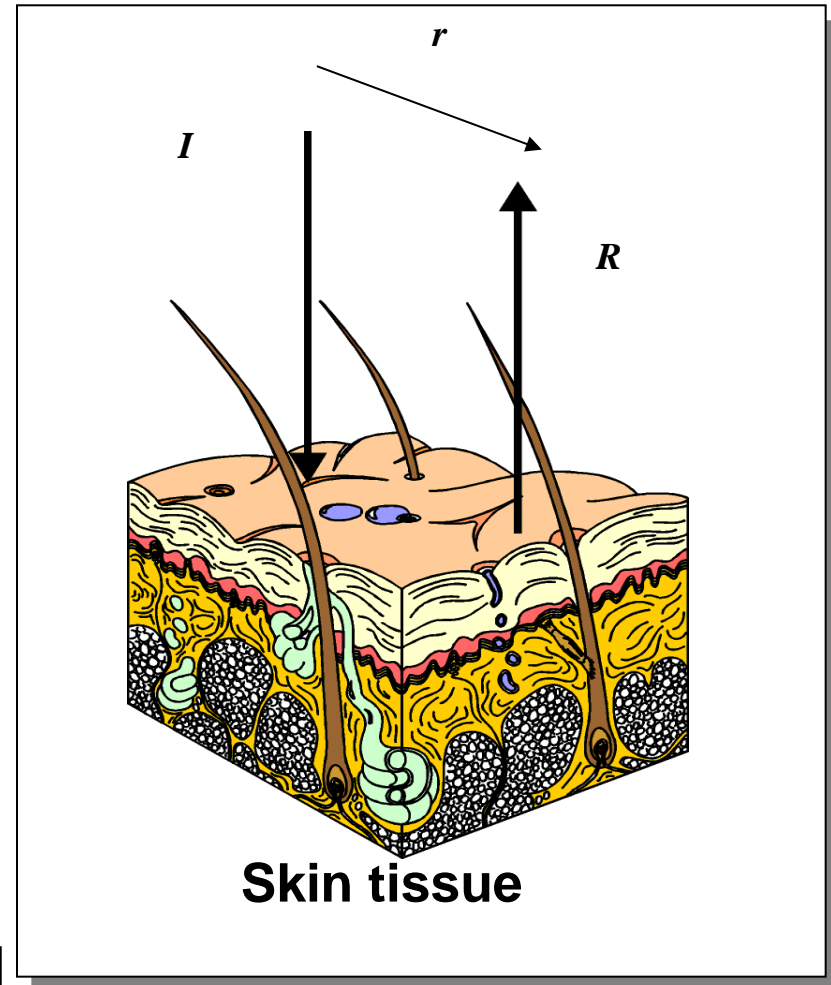
Skin: important for everybody

- total area ~ 1,5-2 m²
- contains ~ 1 liter blood (15-20% of total blood in human body)
- protects internal organs and tissues mechanically and biochemically
- thermoregulates the body (sweating, blood perfusion, ...)
- exchanges water (~ 1% / 24h) and salts
- ensures senses by skin receptors
- “soil” for hairs
- ...

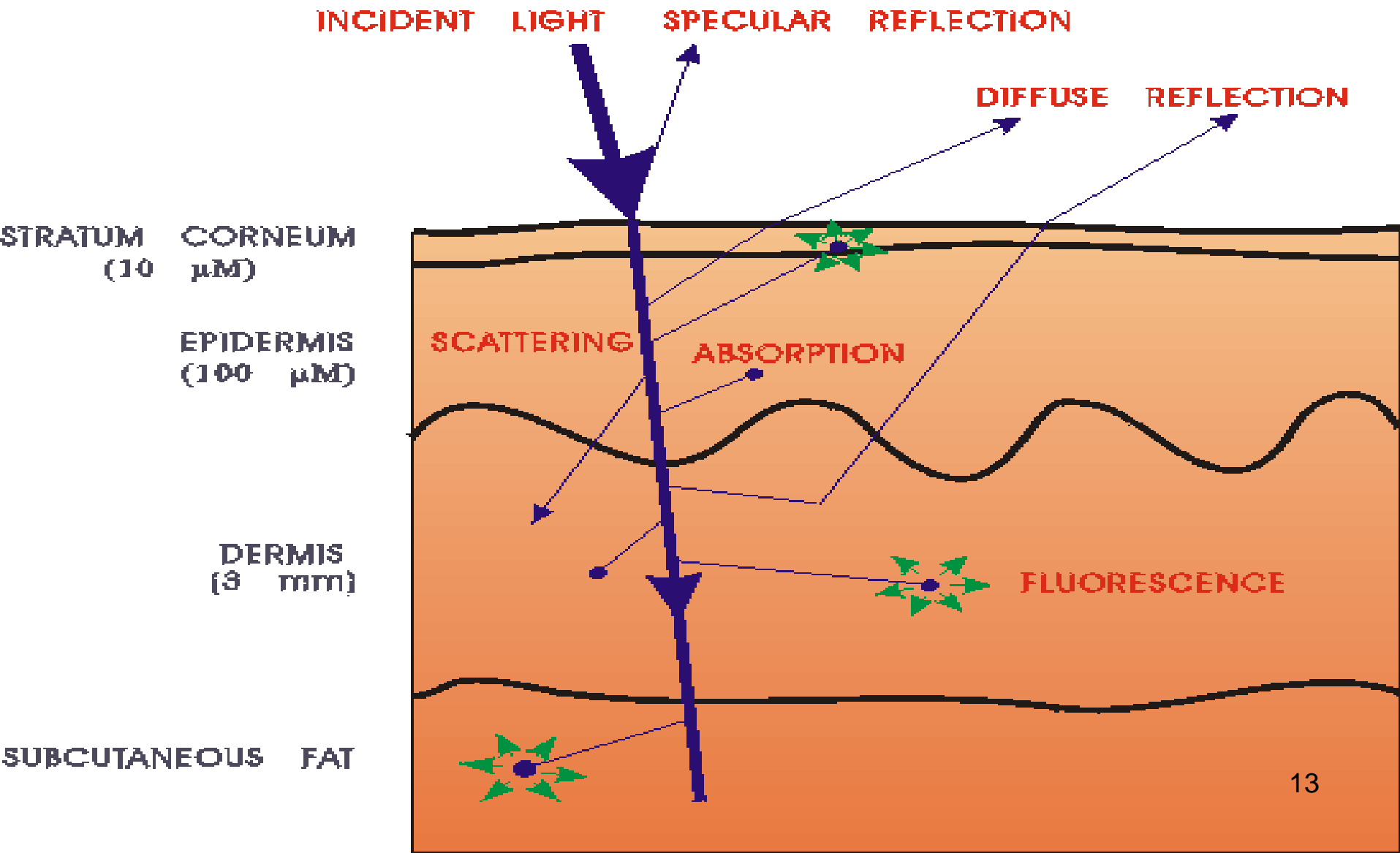


Skin structure

- Skin has a **multi-layer** (anisotropic) structure
- Each layer (stratum corneum, epidermis, dermis, hypodermis) has **different optical parameters**
- Absorption and scattering coefficients at each layer have different wavelength dependencies (spectra)
- Very complicated skin **chromophore** (pigment) and **fluorophore** composition

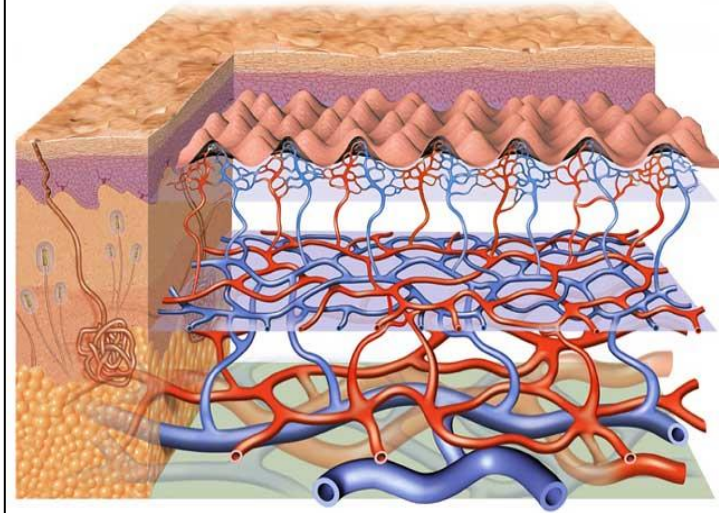
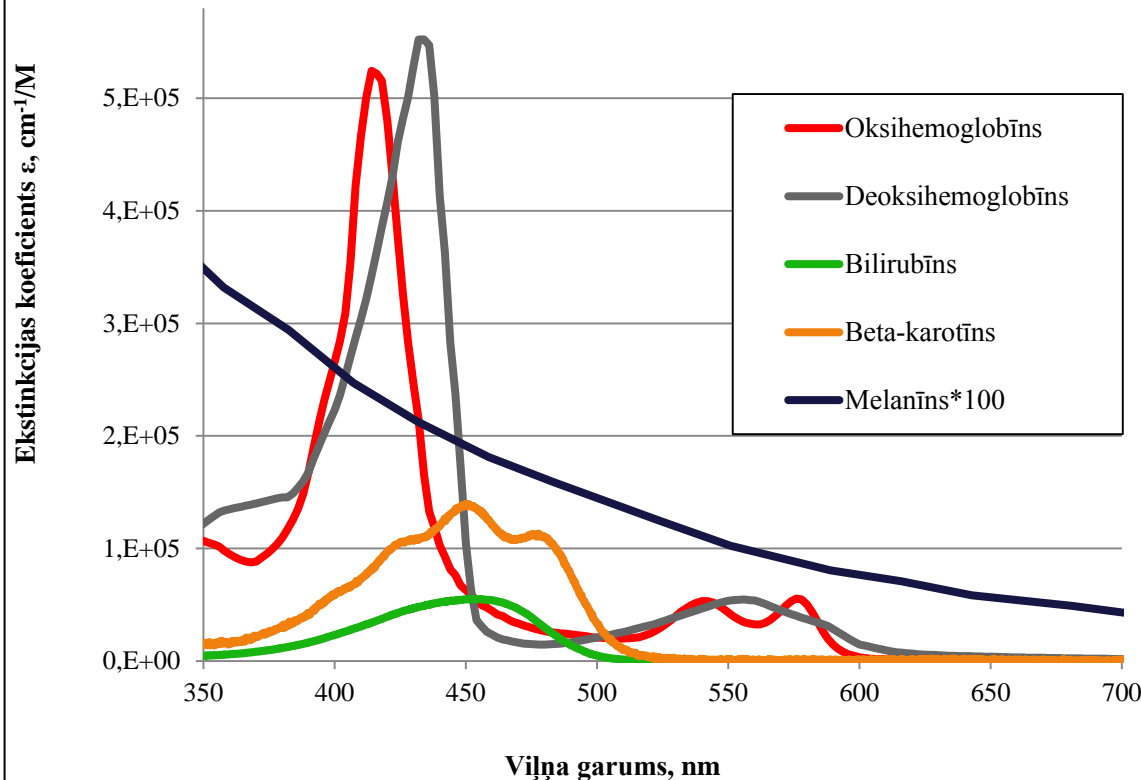


Shining light to skin: the basic options



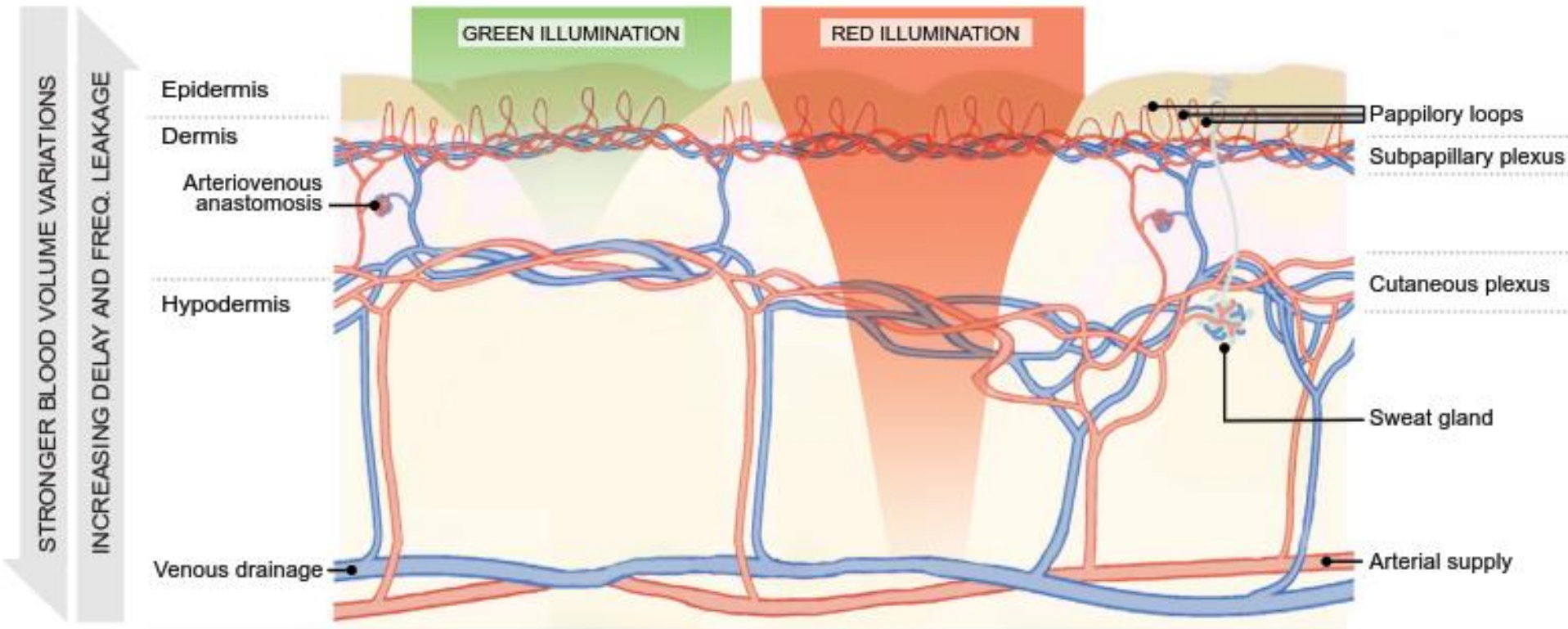
The main absorbers (chromophores) in skin

Hromoforu absorbcijas spektri



Skin color (400-700nm) is mainly determined by 3 chromophores – **melanin** (in epidermis) and **oxy- and deoxy-hemoglobin** (blood in dermis). **Bilirubin** content increases in bruises and if liver is not functioning properly (yellowish skin).

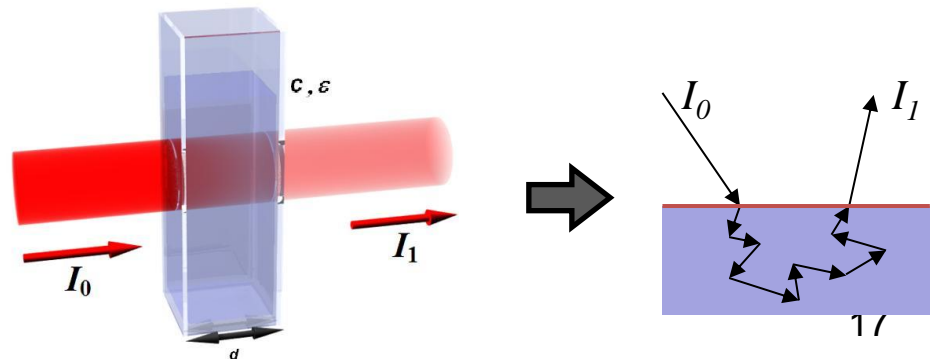
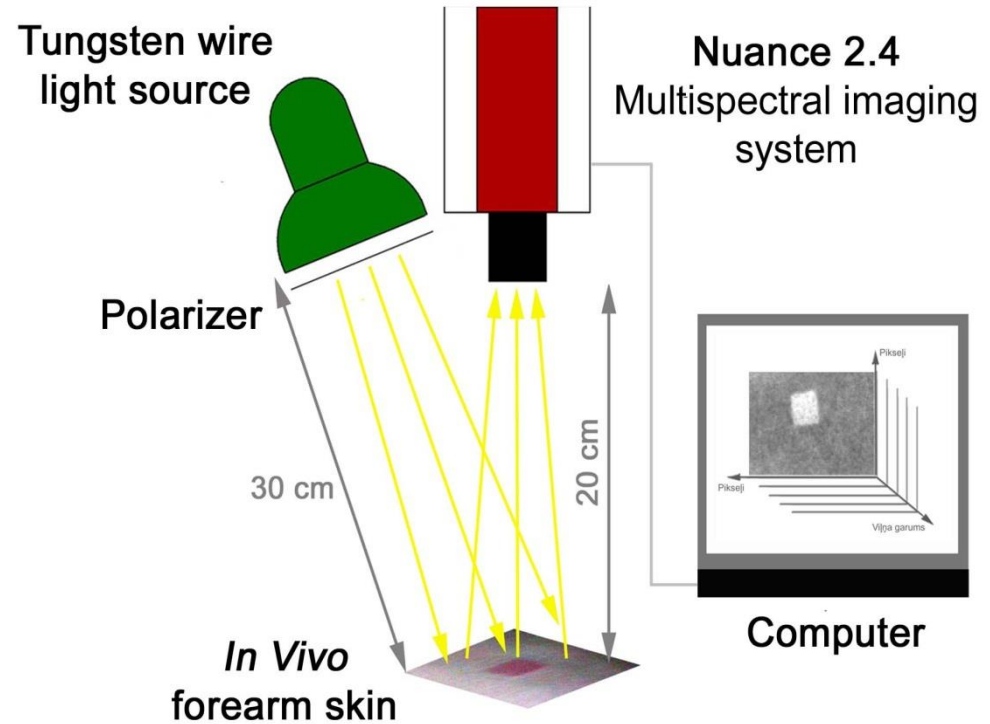
Light penetration in skin: depends on wavelength



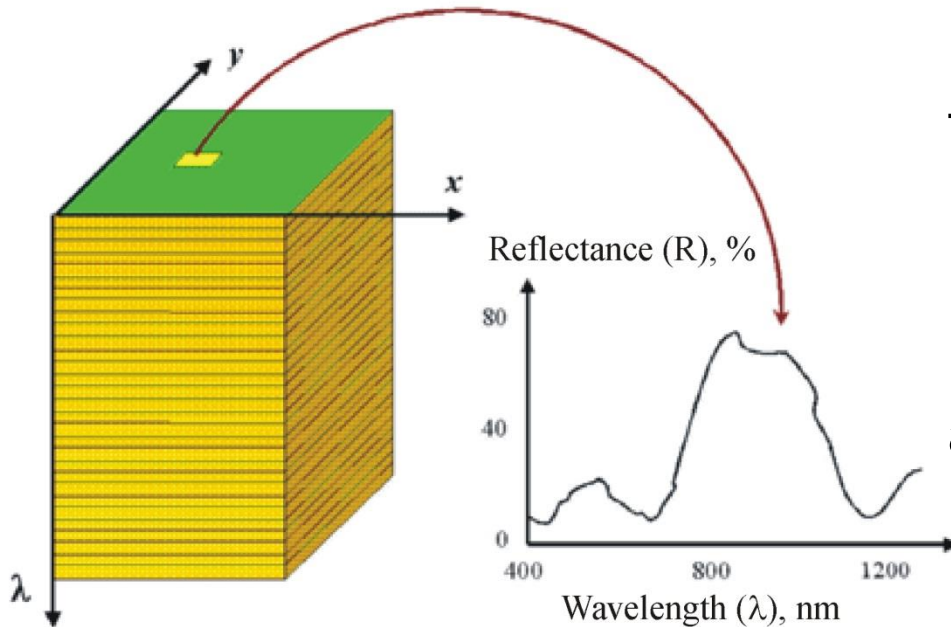
So, can we somehow measure
the skin chromophore content
and distribution?

Reflectance imaging spectroscopy

- Hyperspectral imaging cameras allow remote measuring of DR spectra at each image pixel (skin spot $<1\text{mm}^2$)
- New challenge: distant mapping of skin chromophore distribution
- Surface reflection is not informative, should be avoided (e.g. by crossed polarizers)



Skin chromophore mapping

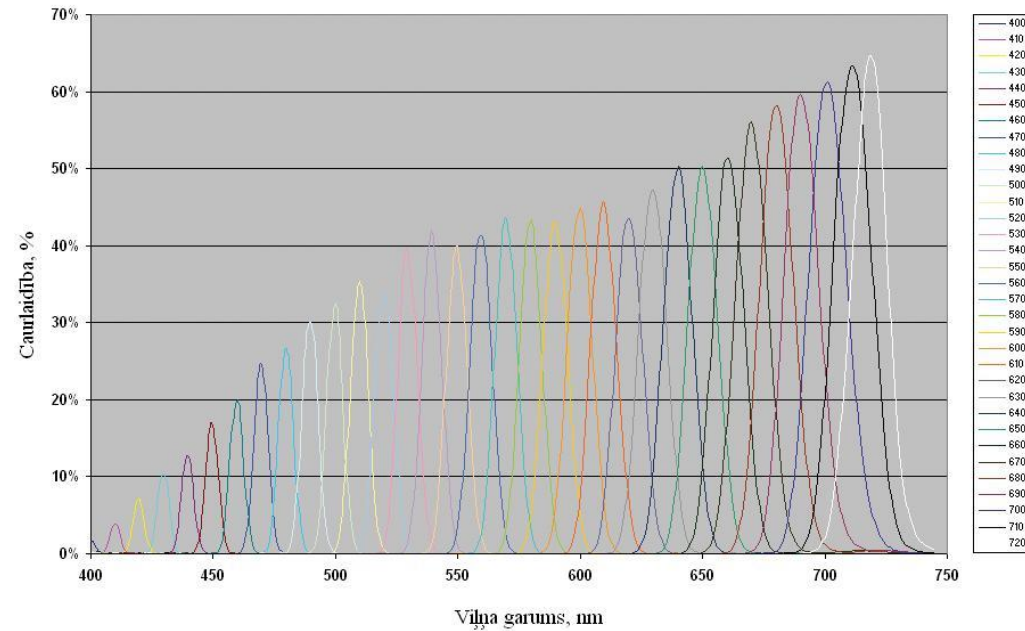
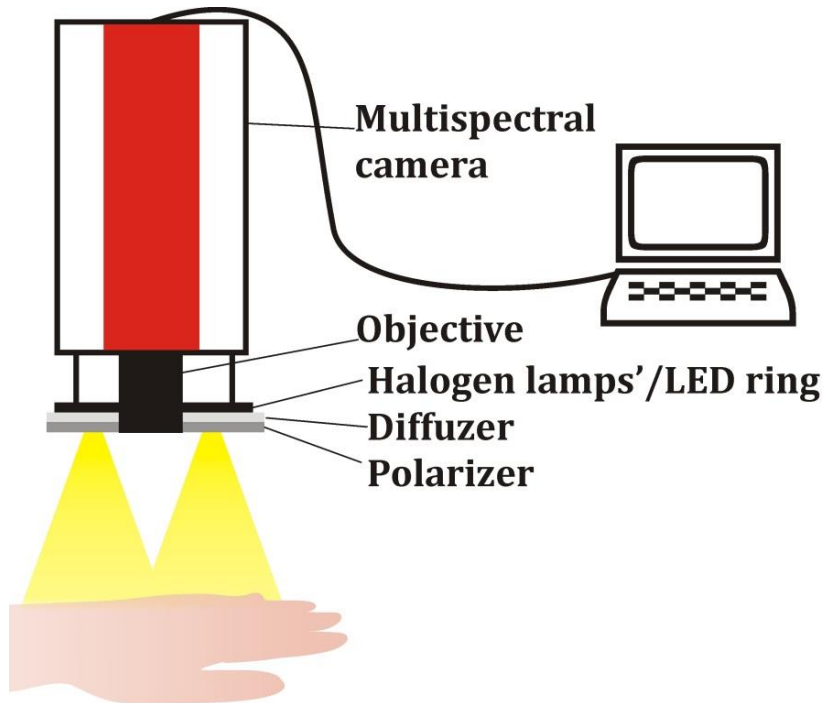


Principle: spectral image cube provides reflection spectrum from each image pixel
 → ***Fit the measured and calculated spectra***
 → find chromophore composition at each pixel
 → draw skin chromophore maps
 white reference needed (I_o)

3-chromophore approximation:

$$OD(\lambda) = a_{HbO_2} \epsilon_{HbO_2}(\lambda) + a_{Hb} \epsilon_{Hb}(\lambda) + a_m \epsilon_{Mel}(\lambda) + a_{back} \quad [= 10 \lg(I_o/I)]$$

HSI clinical measurement set-up



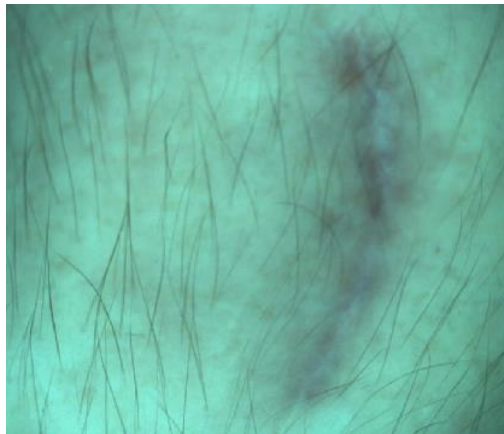
Hyperspectral imaging camera
Nuance EX, adapted for skin in vivo measurements:

- CCD 1392x1040 pixels
- Tunable liquid-crystal filter, selects 51 spectral band 450-950nm, $\Delta \sim 15\text{nm}$
- + white polarized light source
- + white reflector (reference) on skin

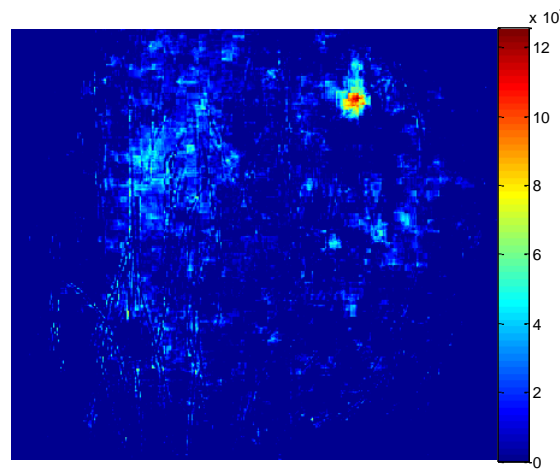
Chromophore maps: Scar phototherapy

Treatment performed with 810 nm diode laser

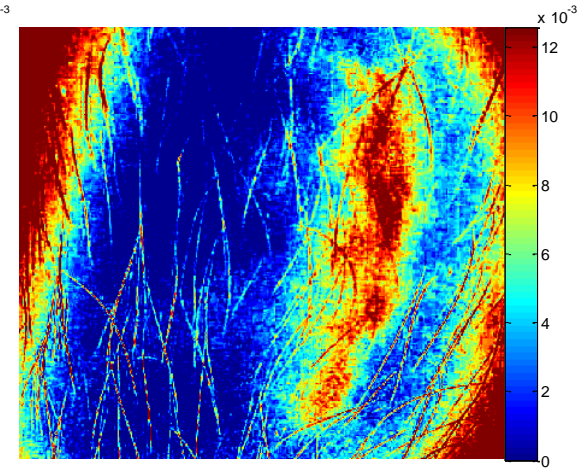
Before



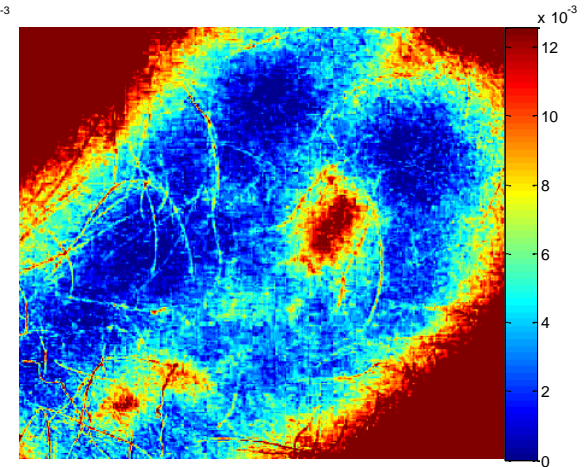
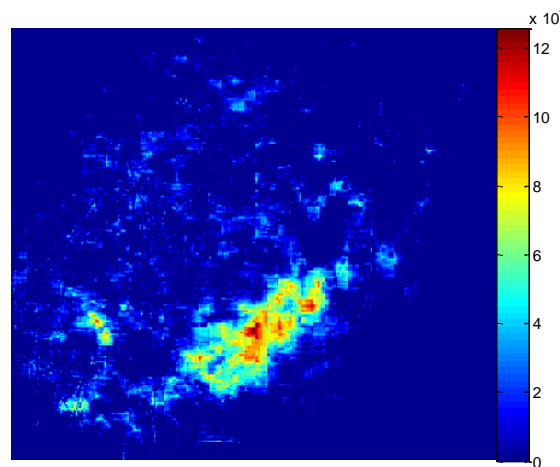
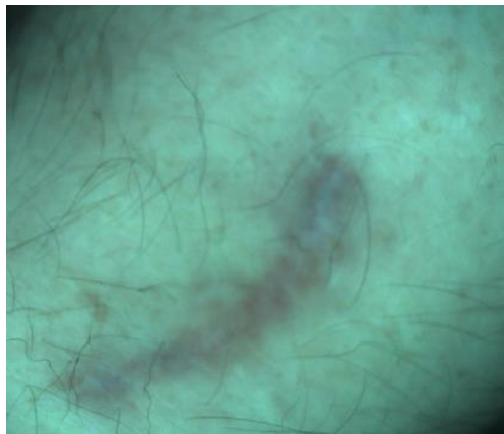
Oxy-hemoglobin



Deoxy-hemoglobin



After



Development of a skin bruise

pēc 2 dienām



pēc 5 dienām



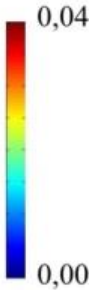
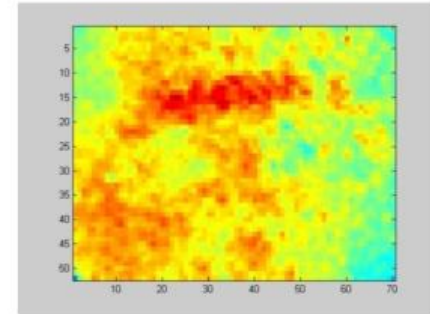
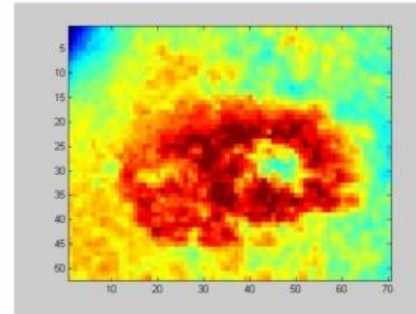
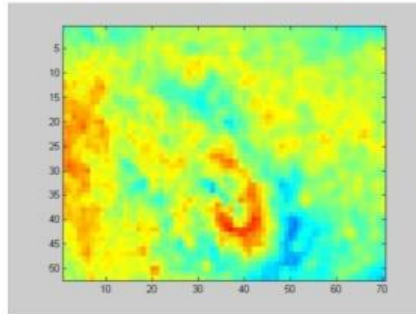
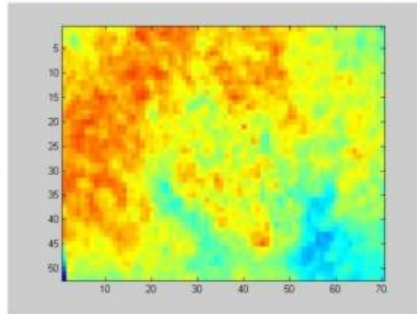
pēc 9 dienām



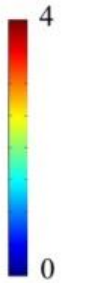
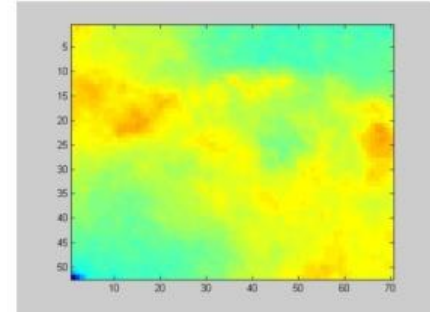
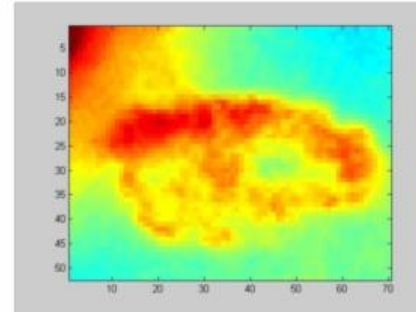
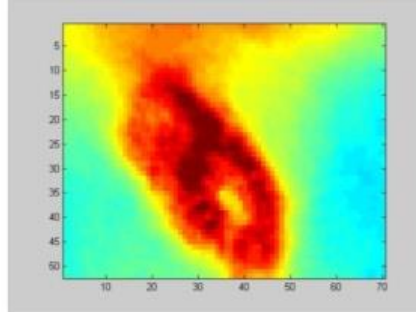
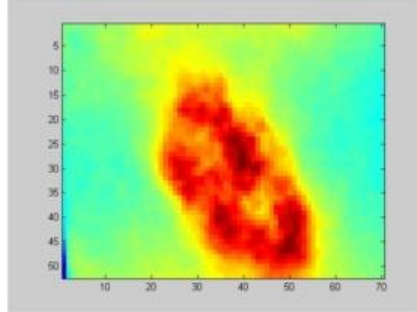
pēc 14 dienām



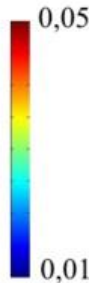
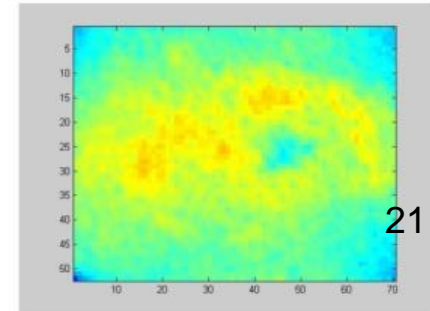
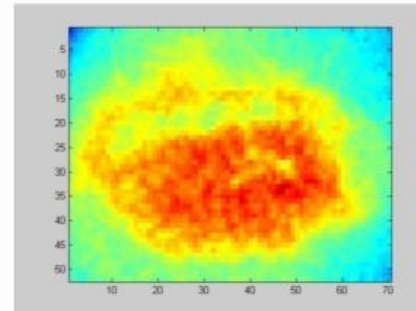
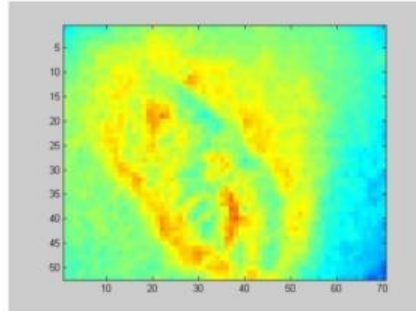
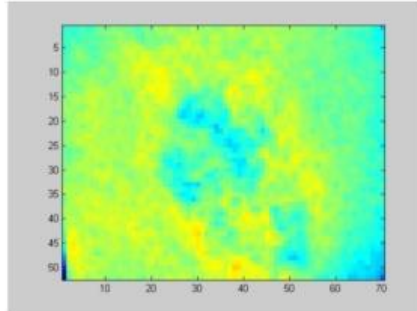
hemoglobīns



melanīns



bilirubīns



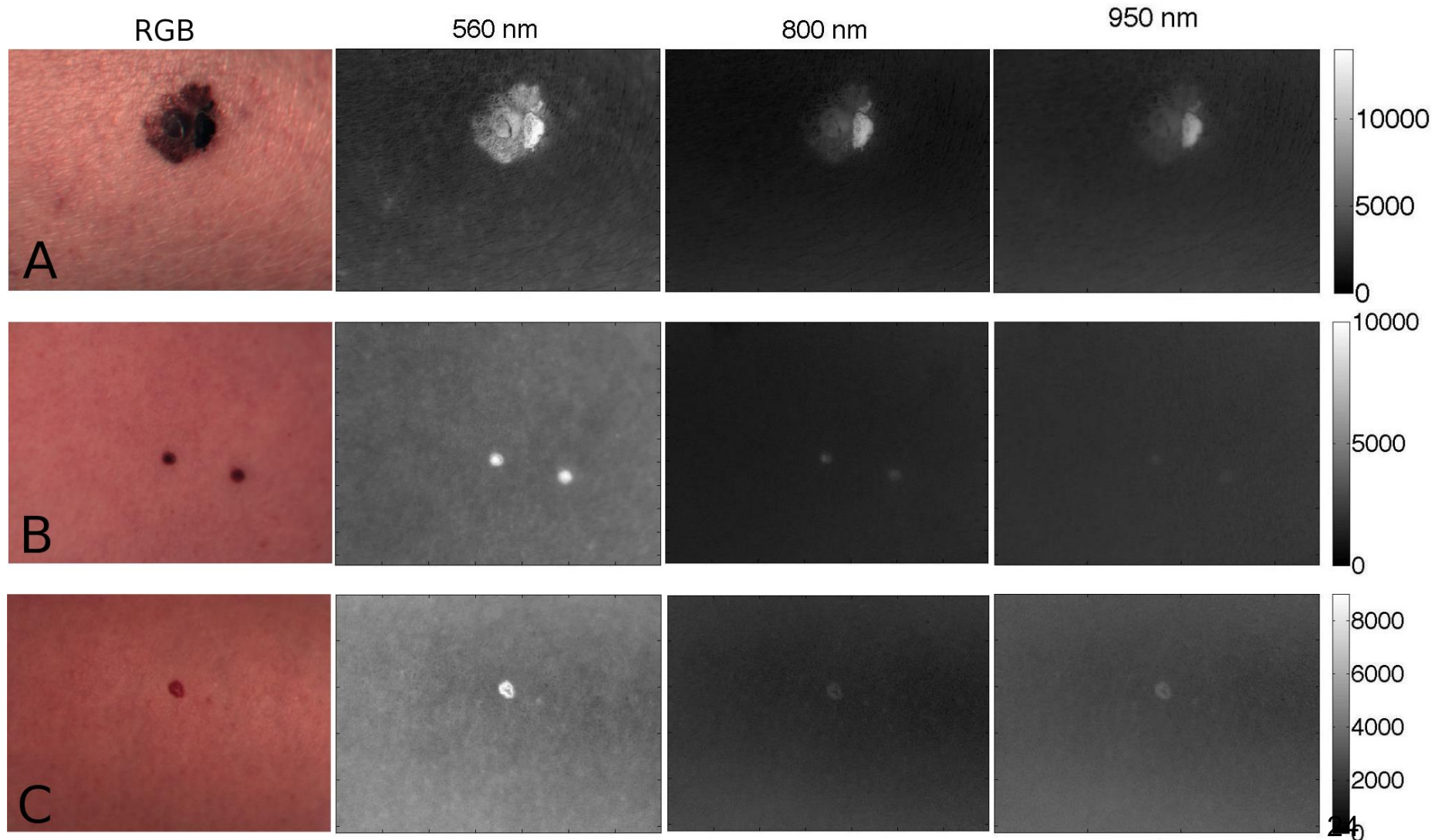
Dermatology: **skin melanoma**

- Melanoma is a leading fatal illness responsible for 80% of deaths from skin cancer
- Only biopsy (invasive sampling) can determine exact malformation diagnose: painful, long waiting time, can rise metastasizing
- Non-invasive / non-contact early assessment would be helpful to select melanomas from other pigmented lesions

Clinical trial

- 266 pigmented lesions and 49 vascular lesions have been studied by hyper-spectral imaging analysis in three Riga clinics:
 - **malignant pigmented lesions** (**16 cutaneous melanomas**, 6 dysplastic nevi and 1 lentigo maligna) - 23 cases,
 - **non-malignant pigmented lesions** (different kind of nevi and superficial pigmentation) – 243 cases,
 - **non-malignant vascular lesions** (port-wine stain, hemangioma, telangiectasia) – 49 cases,
 - **others** – 19 cases
- The hyperspectral imaging system *Nuance 2.4 (CRI)* and self-developed algorithms for mapping of the three main skin chromophores (melanin, Hb and HbO) were used.
- Pathology grouping: by correlation graphs of chromophores

RGB and spectral images of skin malformations (A- melanoma, B- nevus, C- angioma) at three wavelength bands

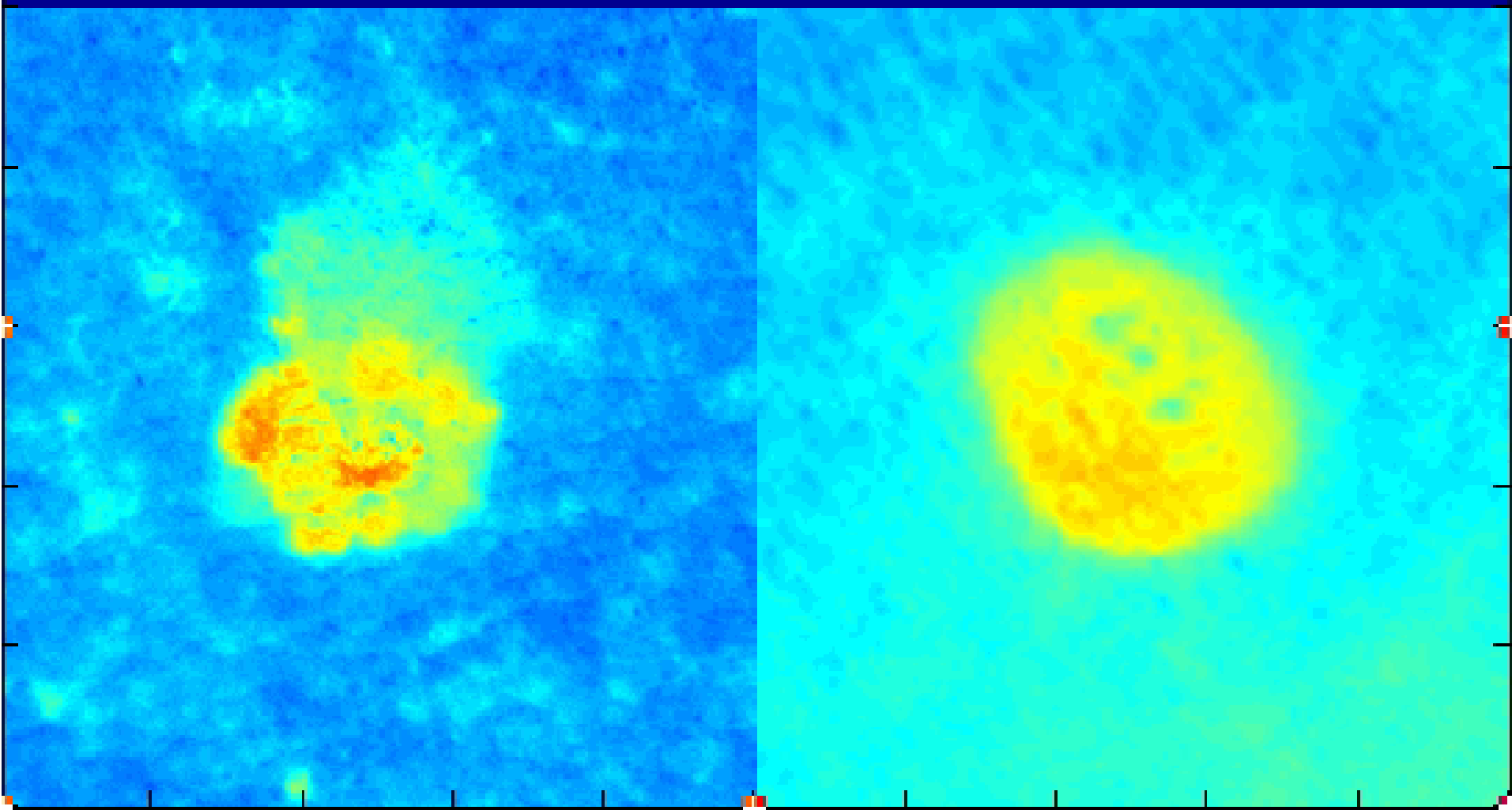


Skin reflectance (OD) at white illumination

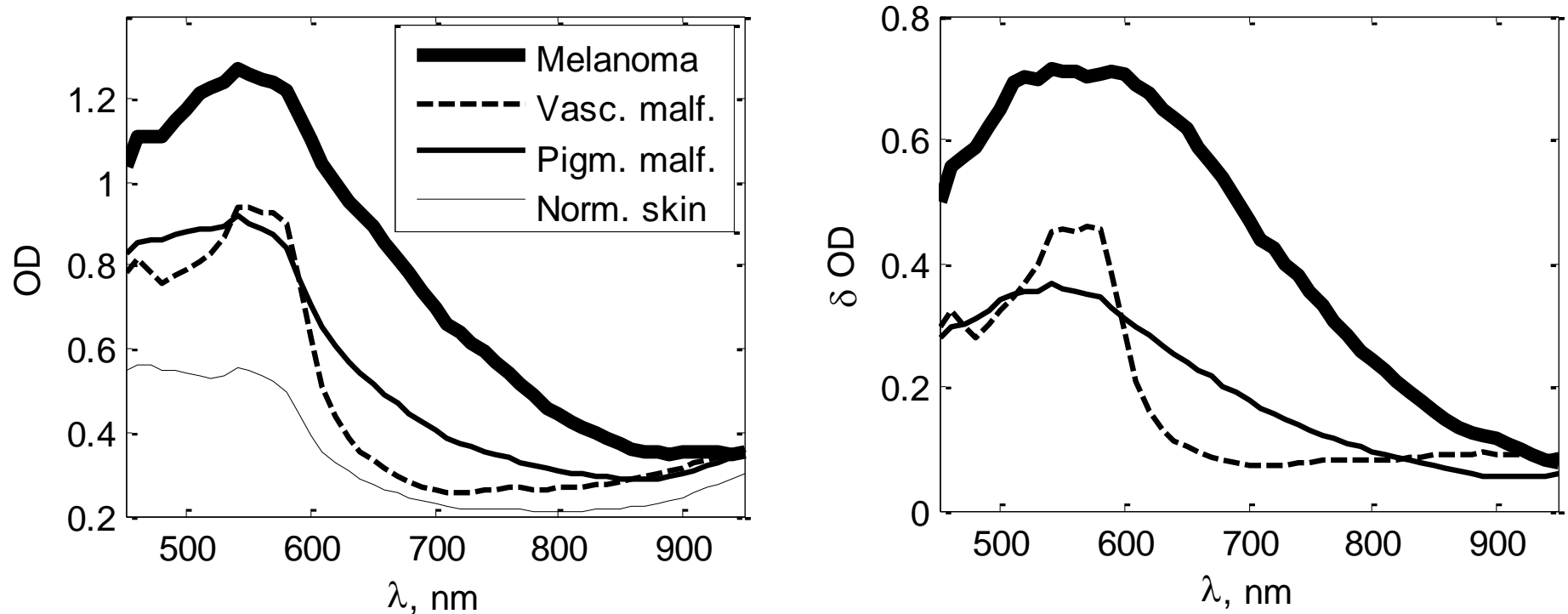
Melanoma

450 nm

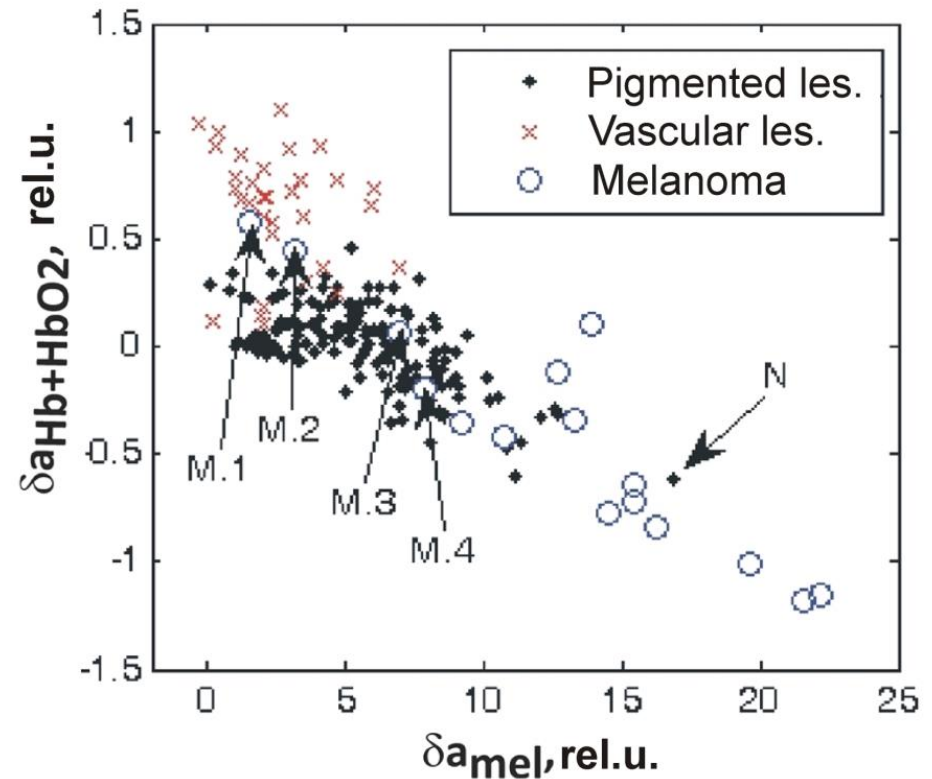
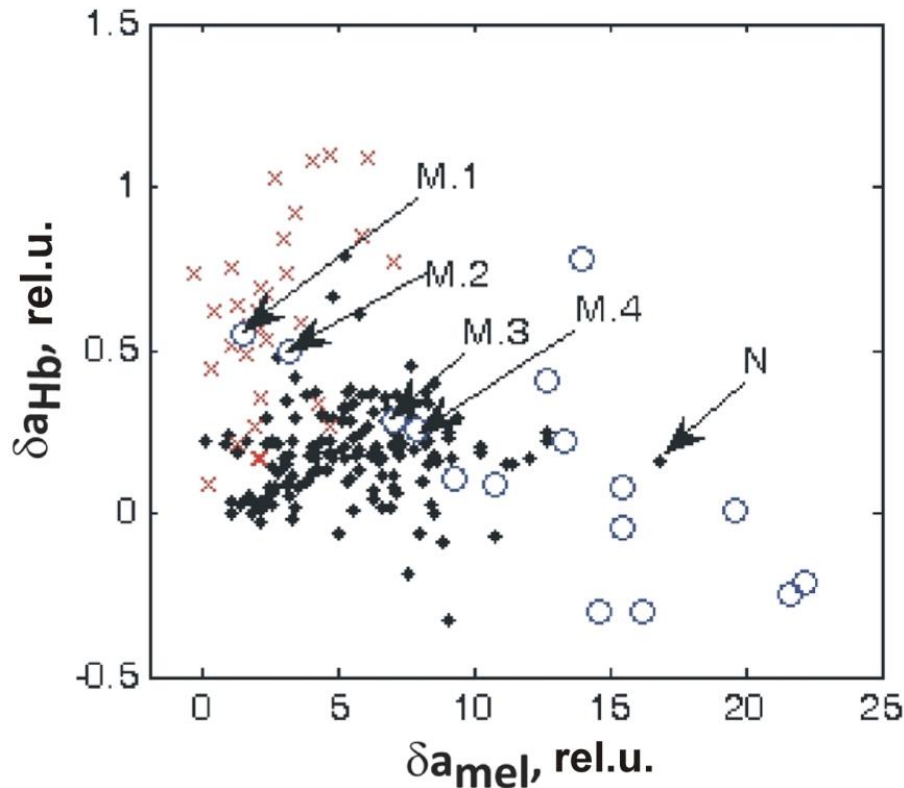
Nevus



The patient-averaged OD spectra (left) and **OD difference spectra** (right) for melanomas, other pigmented malformations, vascular malformations and normal skin behind the pathology border.



Correlations between the relative concentrations of skin chromophores

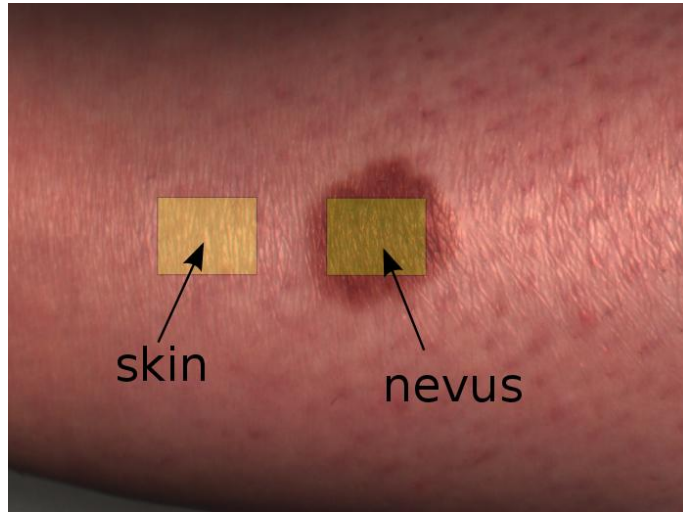


M1, M2 – melanomas in advanced stage (ulcerated) on back and foot.

M3 – melanoma on foot. **M4** – a melanoma on back.

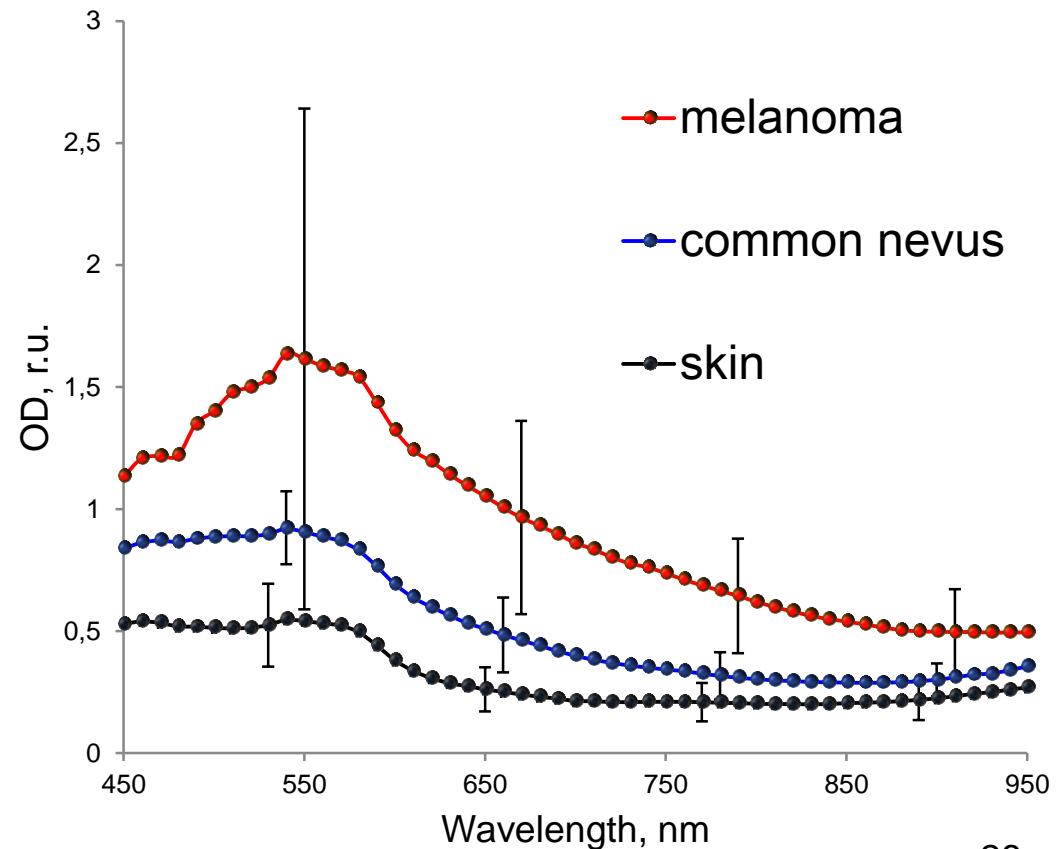
N – an intradermal nevus with hair follicles

Reduced number of spectral bands: parametric melanoma imaging



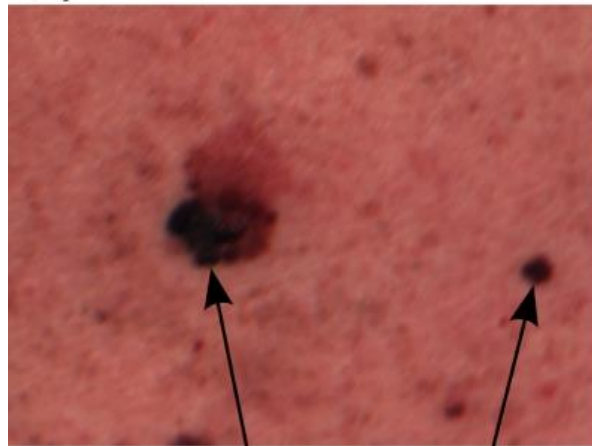
17 melanomas
65 nevi
82 healthy skin

$$p = OD_{650} + OD_{950} - OD_{540}$$



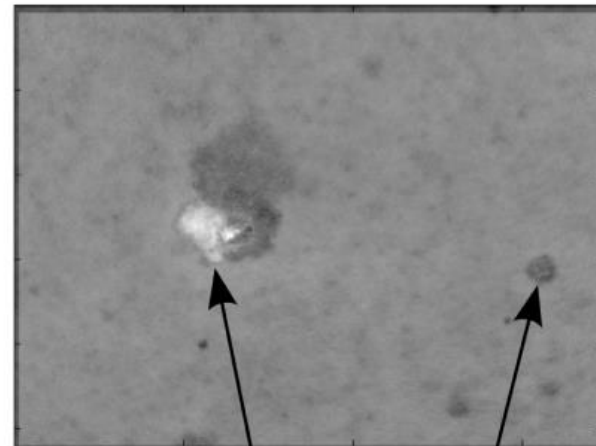
Melanoma-nevus differentiation by parametric imaging (right)

a)



MELANOMA

NEVUS



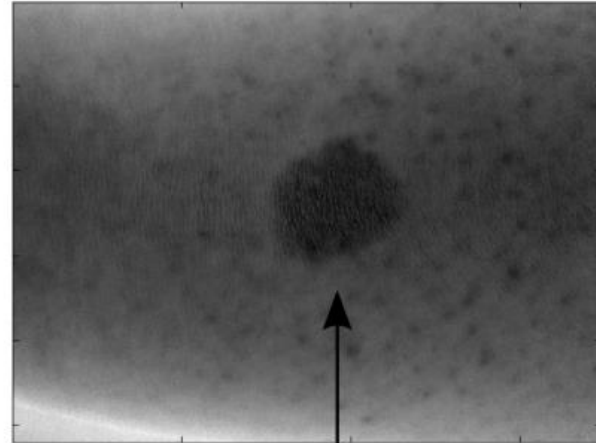
MELANOMA

NEVUS

b)

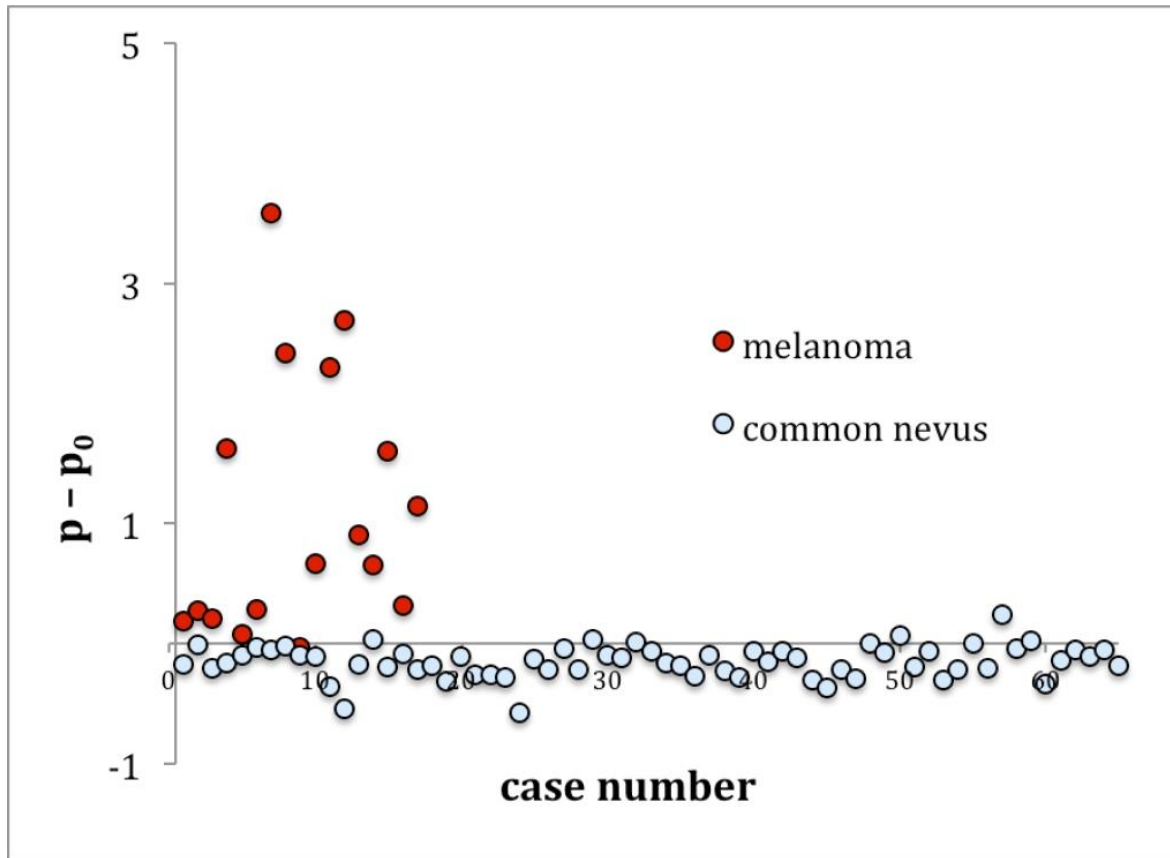


NEVUS



NEVUS

Melanoma-nevus differentiation: sensitivity and specificity



sensitivity = 94 %
specificity = 89 %

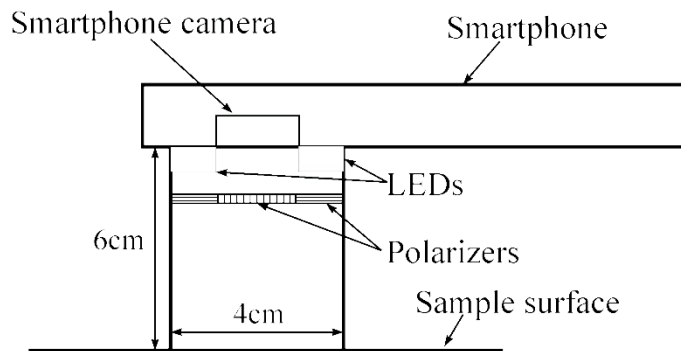
TP(true positive) = 16
FP(false positive) = 1
TN(true negative) = 58
FN(false negative) = 7

sensitivity = $TP / (TP + FN)$
specificity = $TN / (TN + FP)$

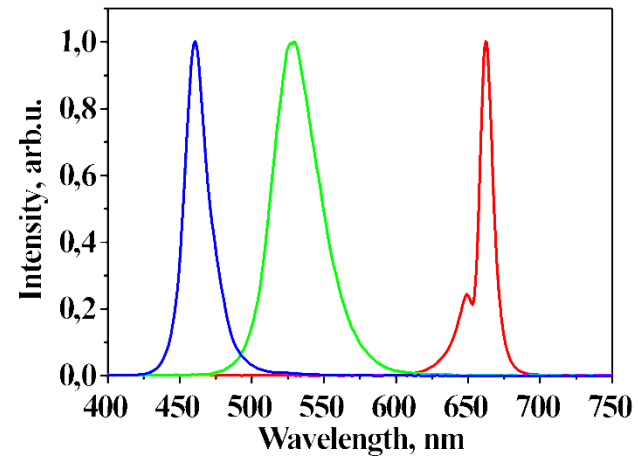
$p > p_0$
 p – lesion
 p_0 – surrounding healthy skin

I.Diebele, I.Kuzmina, A.Lihachev, J.Kapostinsh, A.Derjabo, L.Valeine, J.Spigulis. Clinical evaluation of melanomas and common nevi by spectral imaging, **Biomed. Opt. Express** 3(3), 467-472 (2012).

RGB-LED smartphone system



(a)

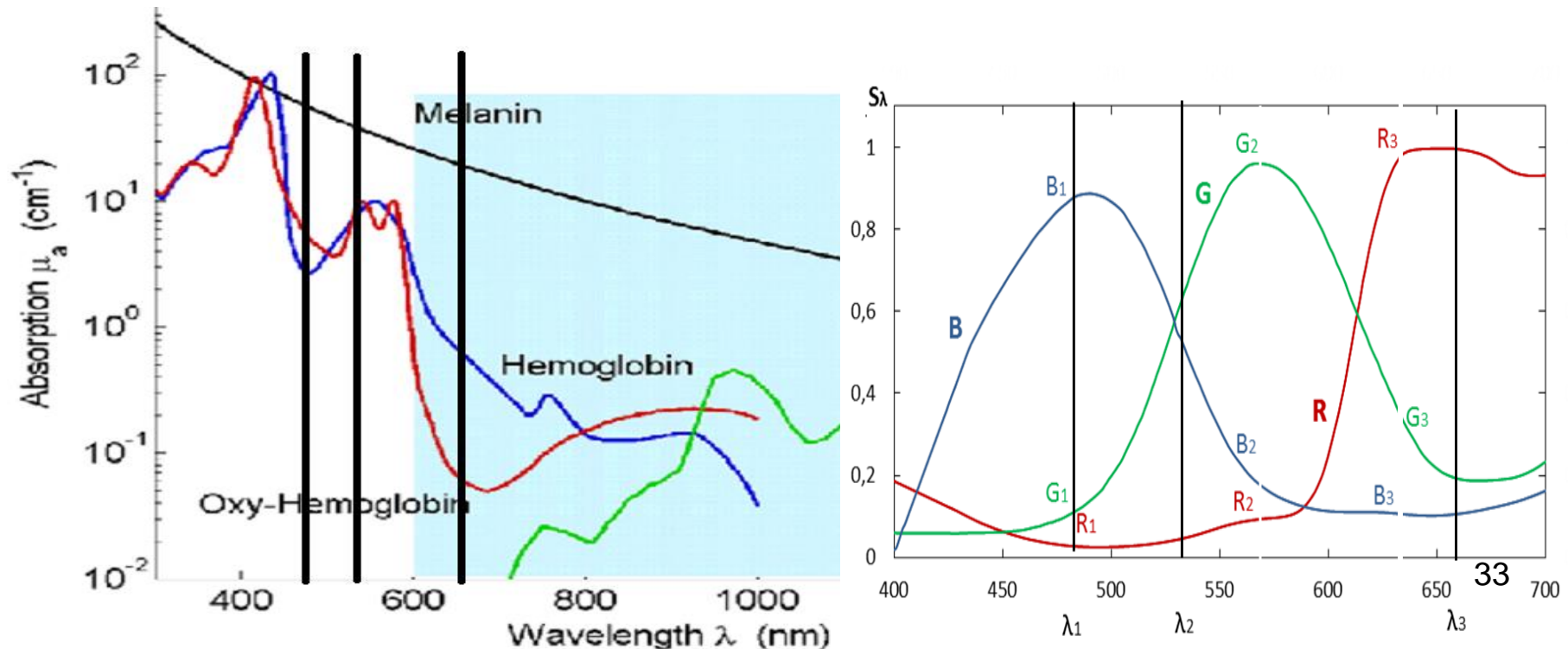


(b)

Can we do it faster and with
narrower spectral bands?

Multi-monochromatic spectral imaging

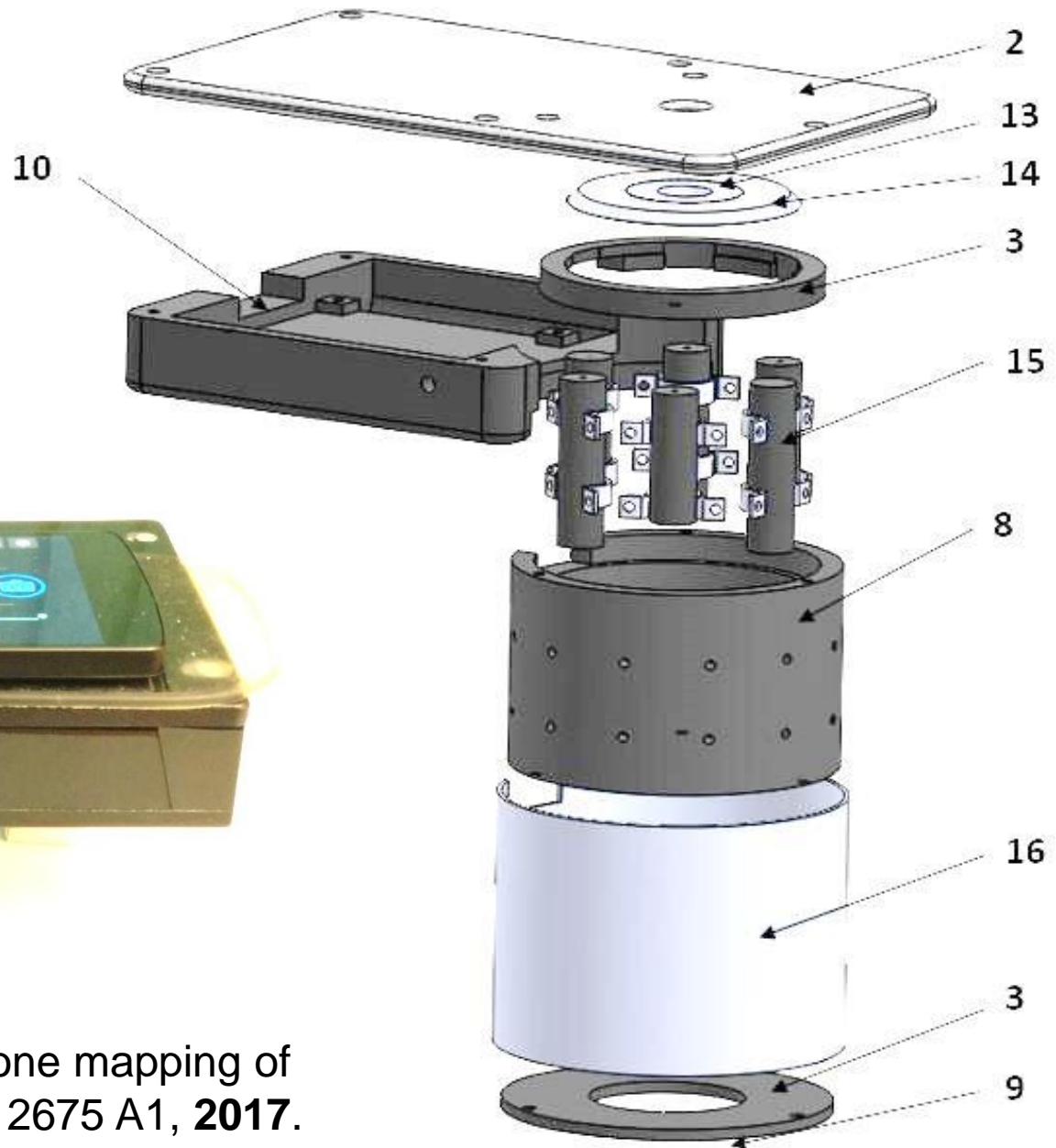
- We can extract 3 **monochromatic spectral images** from a **single-snapshot** RGB image data, if object (skin) is illuminated simultaneously by 3 laser lines and the RGB-band sensitivities of the image sensor are known
- Next step – conversion of 3 monochromatic spectral images into distribution maps of 3 main skin chromophores



Smartphone add-on triple wavelength laser illuminator: 450nm, 532nm, 659nm

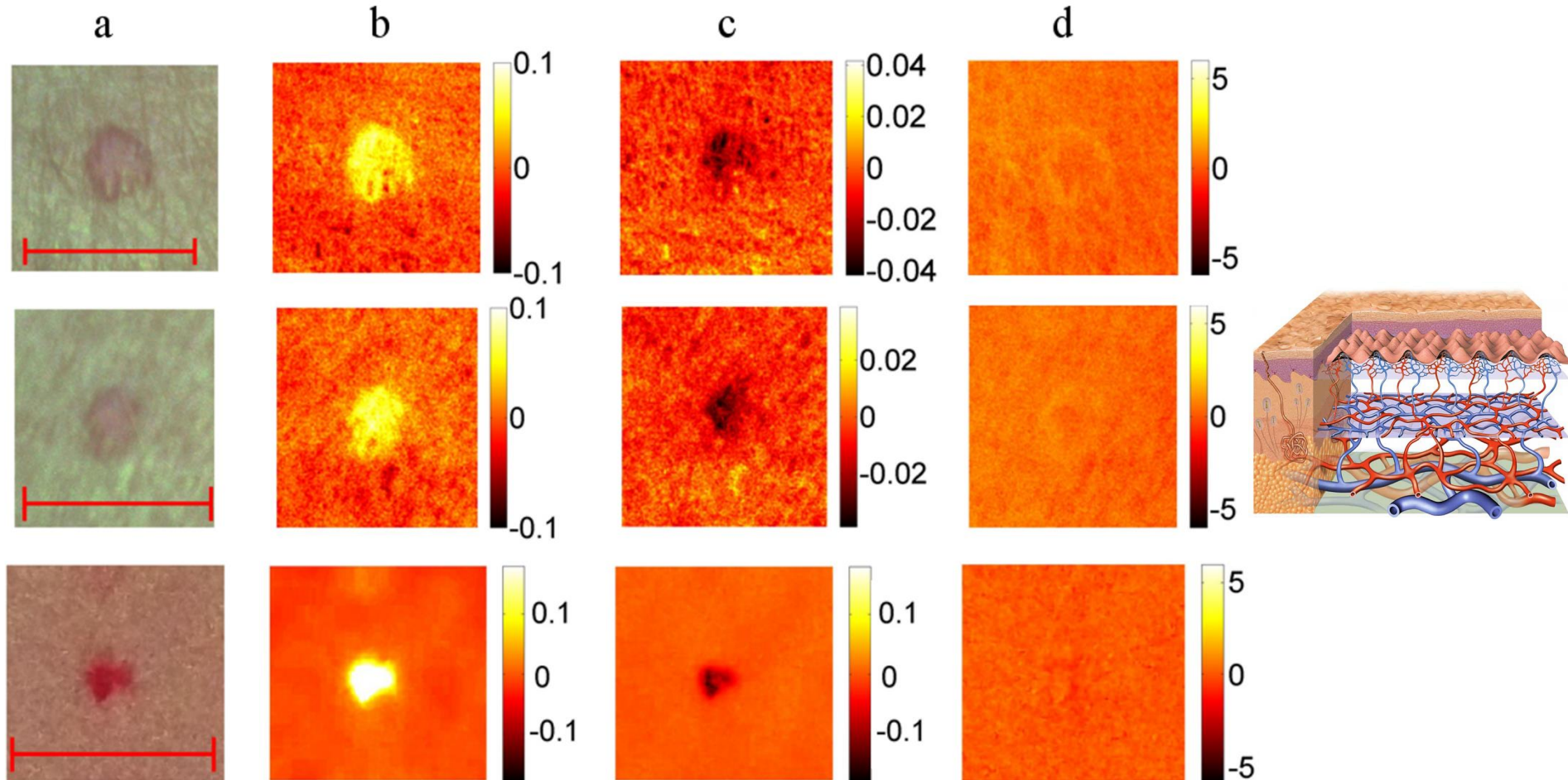


Method and device for smartphone mapping of
tissue compounds. WO 2017/012675 A1, **2017**.



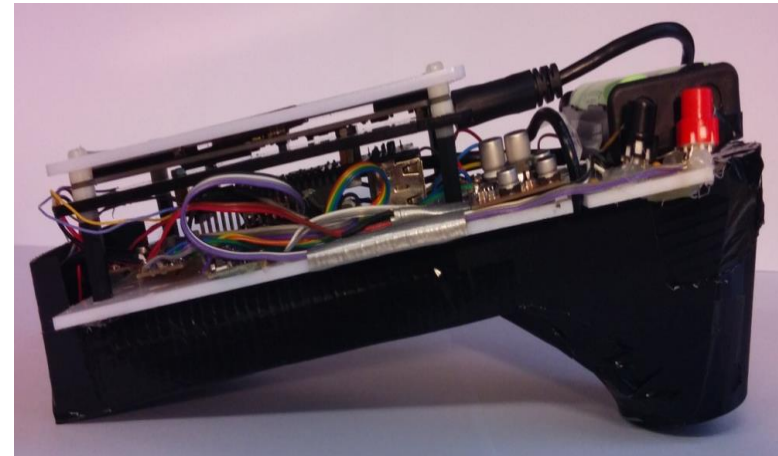
RGB image (a) and maps of chromophore content changes for 3 vascular hemangiomas:

b – oxy-hemoglobin, c – deoxy-hemoglobin, d – melanin



Under development

- **Double-snapshot** RGB imaging technique, each snapshot under different 3λ illumination → enables mapping up to 6 skin chromophores (patented)
- Quality improvement of the monochromatic spectral images by **laser speckle removal** (patented)
- First switchable 4λ and 5λ laser illuminator prototypes created →
- Monochromatic spectral imaging for **counterfeit detection** (forensics)



Smartphone forensics:

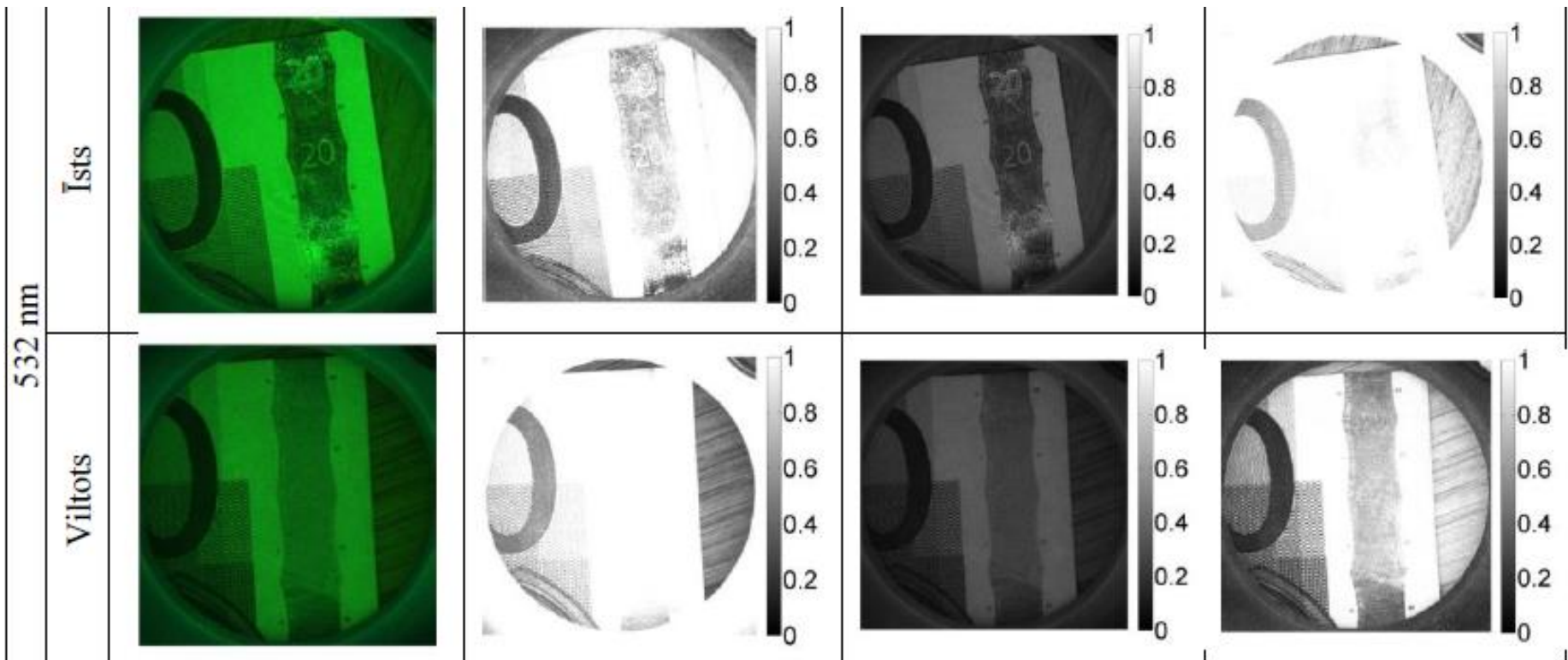
532nm monochromatic spectral images of authentic (upper row) and counterfeit (lower row, withdrawn by Bank of Latvia) 20 EUR banknotes

RGB

R

G

B



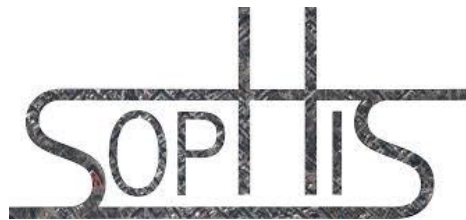
Summary

- Spectral imaging and its modalities (hyper-, multi-) ensure non-contact assessment of human skin malformations and patient-friendly skin cancer screening
- Smartphones are useful tools for skin diagnostics if supplied with add-on narrowband illuminators
- Single-snapshot RGB data at triple-wavelengths laser illumination instantly provide distribution maps of three main skin chromophores
- For mapping more chromophores, $n > 3$ wavelengths laser illumination systems are under development

Acknowledgments

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Thank You!

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