

Infrared spectroscopy-based Chemical imaging for biomedical research and cancer pathology

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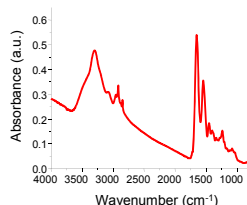
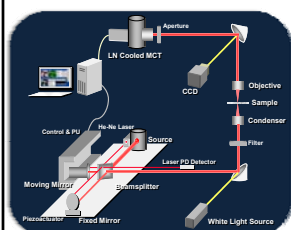


What is chemical imaging?

- Principle: Employs the intrinsic chemical contrast of tissue to provide an image: label-free method
- Chemical content is determined by spectroscopy
 - Vibrational spectroscopic imaging (*molecular spectroscopy* → *chemical imaging*)
 - FTIR absorption imaging (Mid-IR – 2 to 14 μm)
 - Raman scattering imaging – Raman, RRS, SERS, CARS (UV/visible/near-IR: 300 nm – 1.1 μm)
 - Other techniques of selective chemical sensitivity
 - NIR/Vis spectroscopy – overtones, refractive index
 - Intrinsic fluorescence, FLIM – important specific classes
 - MR spectroscopic imaging – metabolites
 - Mass spectroscopic imaging – proteins



IR imaging technology



- Instrumentation based on classical techniques (40-100 years), hardware (<10 years)
- Data correlations for over 100 years
- What can we measure in tissue?
 - "Mesoscale" chemistry



FT-IR spectroscopy → Imaging

- Typical characteristics
 - Wavelengths (2048 elements over 2.5 – 12.5 μm), x, y typically ~1024
- Computation is essential to recover data
 - Manual examination is prohibitive
- Trade-offs: spatial coverage vs. resolution, spectral resolution vs. signal-to-noise ratio, time vs. data quality/size vs. information

Motivation

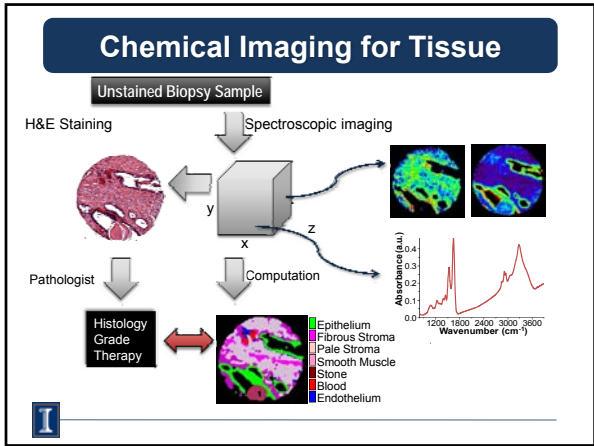
- Cancer pathology
 - Prostate cancer as a paradigm – 1 in 6 men
 - Biopsies: >1 million annually with disease ~20%
 - Diagnoses: ~200,000 annually with lethal ~20%
 - Grading is subjective, variable, leads to conflicting therapy routes
 - Prognosis tools are not perfect – 97% undergo therapy
 - "Holy Grail" of oncologic pathology
 - Primary evaluative standard for research
- Manual recognition in stained tissue

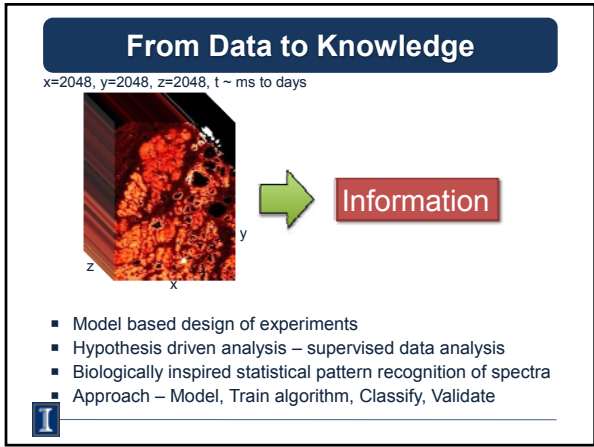
Cancer and Diagnostic Process

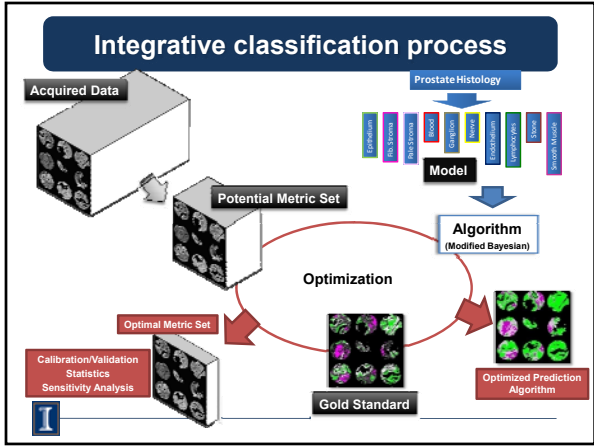
Gender	Cancer Type	Count	Percentage
Males	Prostate	168,303	28%
	Lung & bronchus	114,850	19%
	Colon & rectum	77,280	13%
	Urinary bladder	51,300	9%
	Non-Hodgkin lymphoma	35,400	6%
	Melanoma of the skin	34,900	6%
	Kidney & renal pelvis	33,100	6%
	Oral cavity & pharynx	25,310	4%
	Leukemia	25,180	4%
	Pancreas	18,710	3%
All Sites	743,188	100%	
Females	Breast	182,480	28%
	Lung & bronchus	100,320	16%
	Colon & rectum	71,380	11%
	Uterine corpus	40,100	6%
	Non-Hodgkin lymphoma	30,070	5%
	Thyroid	28,410	4%
	Melanoma of the skin	27,510	4%
	Ovary	21,020	3%
	Kidney & renal pelvis	21,360	3%
	Leukemia	16,180	3%
All Sites	652,008	100%	

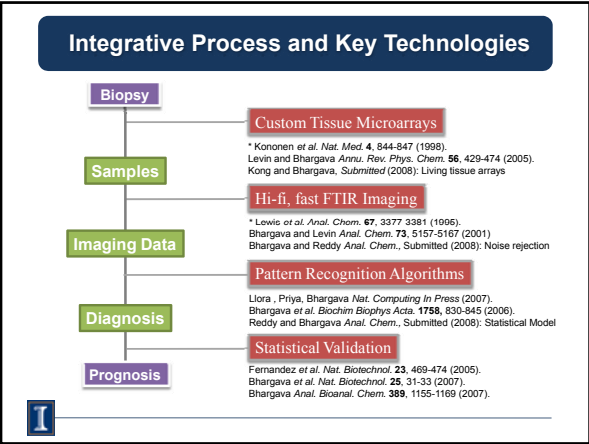
■ No stains, no manual decisions

American Cancer Society, est. 2008

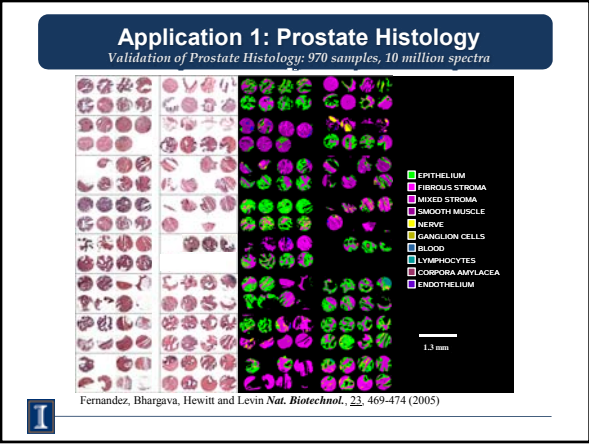








- Major Translational Themes**
- Translation to clinical practice
 - Comprehensive histopathology - Model-based visualizations
 - Screening Pathology
 - Prognosis
 - Translation to research
 - Replicate some functions of molecular imaging
 - Multimodal imaging
 - Automated molecular analysis



Classification examples

- Elimination of chance/bias
 - Samples from 30 different hospitals- preparation diversity
 - Multiple arrays, mixed arrays, copies of arrays
 - Instrument changes
 - Experimental: thickness effects, artifacts, population diversity

Metrics, Training and Validation

Prostate Histology

Calibration Data: 175 K/16

Validation Data: 2 mil/400

Operating point ROC

Pathology

Class	AUC
Epithelium	0.994
F. Stroma	0.983
M. Stroma	0.961
Muscle	0.894
Stone	0.991
Ganglion	0.954
Nerve	0.971
Lymphocytes	0.990
Blood	0.932
Endothelium	0.983

Colon Histology

Automated Grading Results

Assigned Grades: Pathologist Review Assigned Grades: Spectroscopy+Computation

- First attempts were unsuccessful
- Questions:
 - Can cancer be detected?
 - Is morphological grading possible with chemical data?

Sensitivity	81.8%
Specificity	72.6%

2 Class Models

50 patient NCI validation: Cancer and Normal Adjacent Prostate (NAP)

Patient 01 Patient 06 Patient 11 Patient 16 Patient 21
Patient 02 Patient 07 Patient 12 Patient 17 Patient 22
Patient 03 Patient 08 Patient 13 Patient 18 Patient 23
Patient 04 Patient 09 Patient 14 Patient 19 Patient 24
Patient 05 Patient 10 Patient 15 Patient 20 Patient 25

Epithelium Adenocarcinoma 700 μm

Overall Pixel Accuracy
Tuned for Epithelium Sensitivity

Ground Truth Class	Benign Epithelium	Adenocarcinoma
Result of Classification		
BENIGN EPITHELIUM	89.59	25.50
ADENOCARCINOMA	18.41	74.50

% Adenocarcinoma
Patient Number

Prostate Cancer Diagnosis

Array - 80 Patients Array - Histology Pathology Design Pathology Result

- Overall pixel accuracy ~ 88.5% ; Heterogeneity in samples?
- 1 cancer sample classified as benign (71)
- 1 benign sample classified as cancerous (69)
- Sensitivity and specificity exceeding human capabilities
- Large validation studies underway

Challenges

- Opportunity to leverage both structure and chemistry without human supervision, dyes or probes
- Objective, quantitative and automated nature may be advantageous
- Clinical translation facilitated by
 - Better, cheaper and faster instrumentation
 - Multi-institution validation
 - Novel concepts
 - Integration with clinical workflow

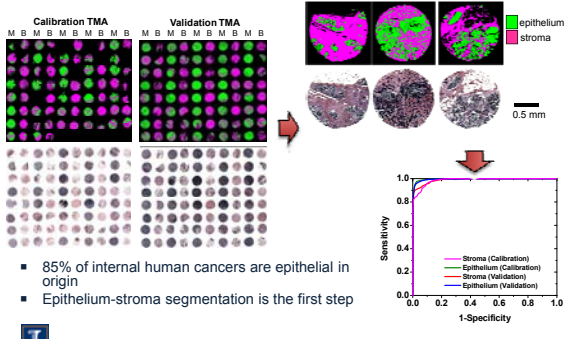


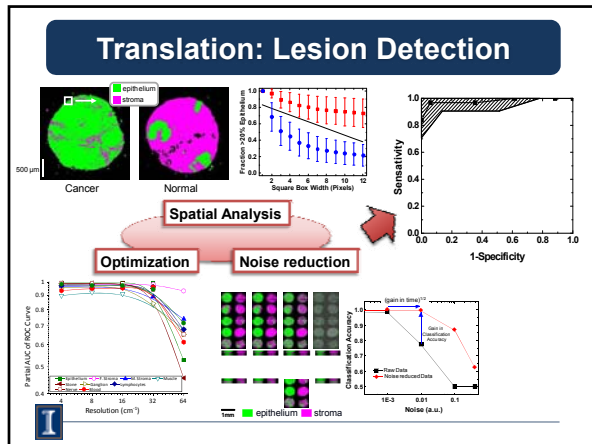
Breast Pathology: Case Study

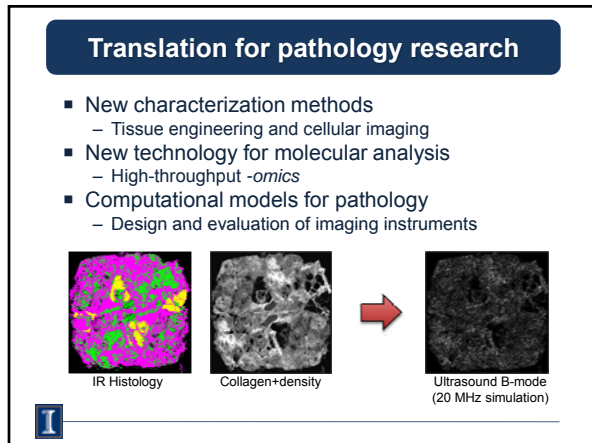
- Application: rapid screening of biopsies
 - Detect cancers rapidly
 - Quantify lesion size
- Desirable translational features
 - Accurate
 - Fast and simple to understand
 - Minimal supervision
 - Quality control steps
- Developments
 - "Bare bones" model: 2 class (epithelium/stroma; cancer/no cancer)
 - Move to larger (poorer) detectors
 - Use computation for noise rejection
 - Use spatial and spectral features

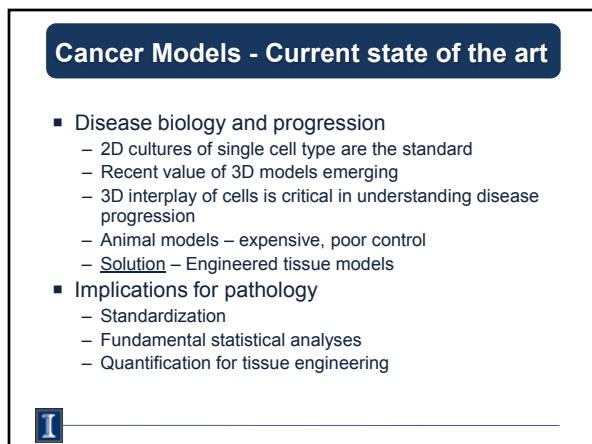


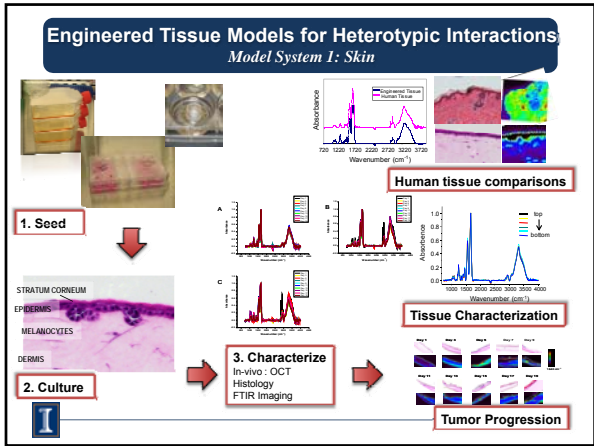
2 Class Breast Histology Model

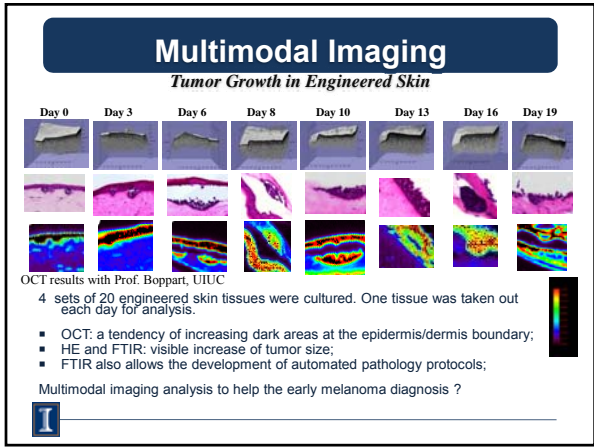


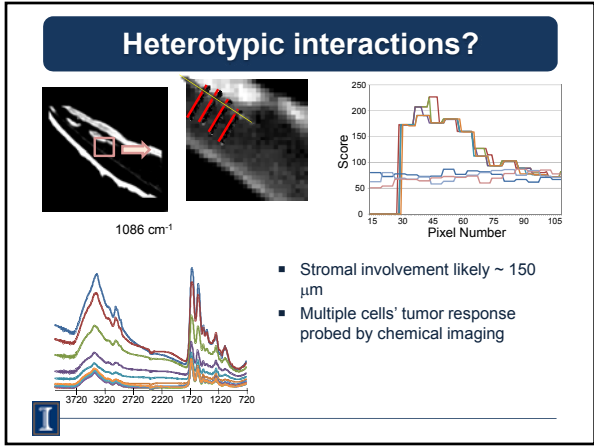










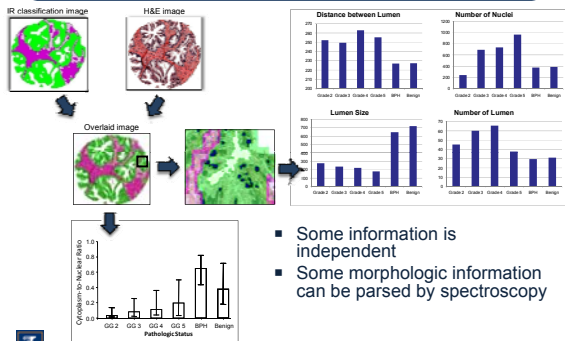


Summary: What's in store?

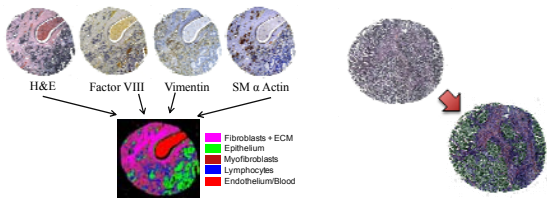
- Descriptive pathology
 - Attempt to match pathologist/molecular techniques
 - Comprehensive histology
 - Diagnostic pathology
 - Clinical samples and problems drive solutions
 - Biopsy screening
 - New technology from classical pathology knowledge
 - Tissue analysis
 - Automated LCM
- Predictive pathology
 - Newer ideas
 - Utilize full power of spectroscopic and imaging techniques
 - Key enabling technology



Tech. 1: Parsing Rules from Multimodal Imaging

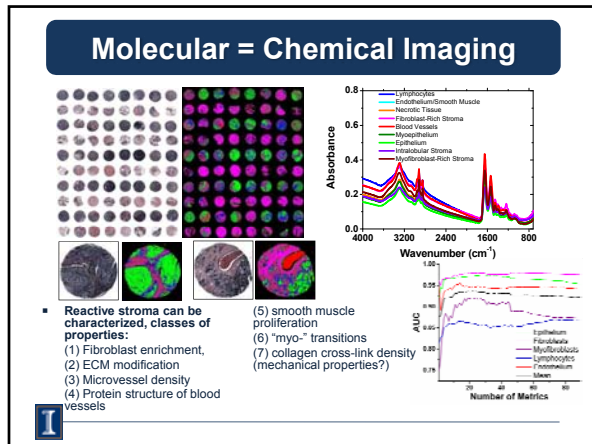


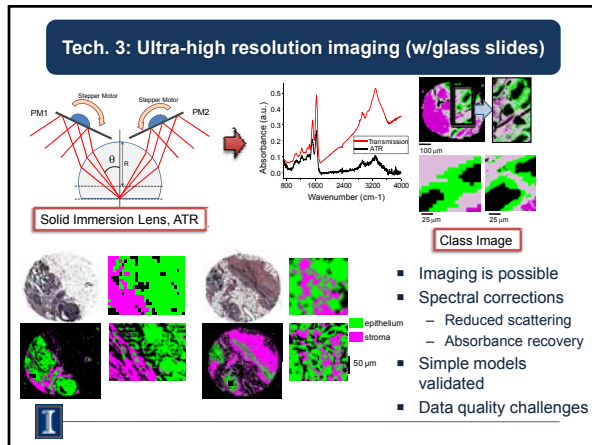
Tech 2. Molecular Imaging Vs. Chemical Imaging

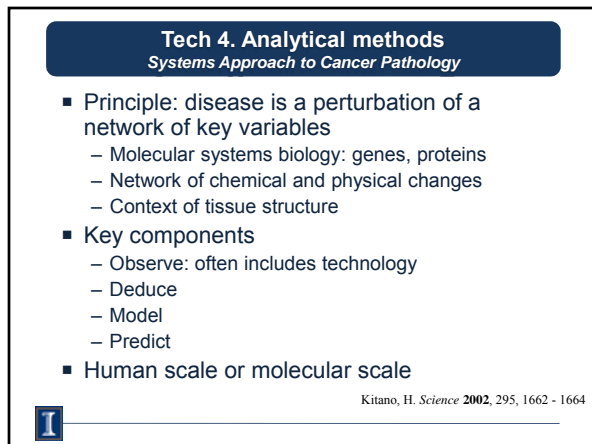


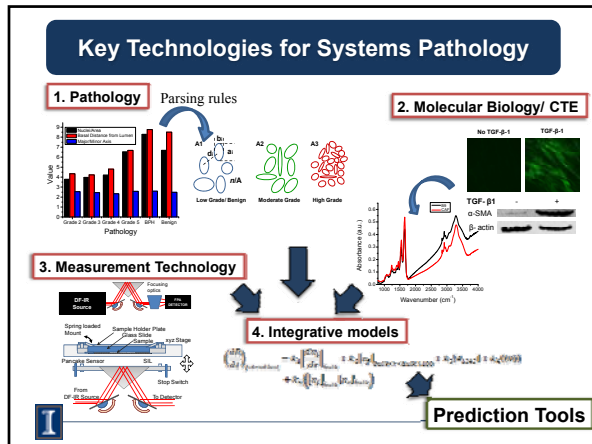
- Principle: molecular imaging measures one target – chemical imaging measures the state of the tissue
- Identification potential is preserved
- Molecular localization/origin is lost; Chemical sensitivity is gained, accuracy may be better
- Some molecular information can be parsed by spectroscopy

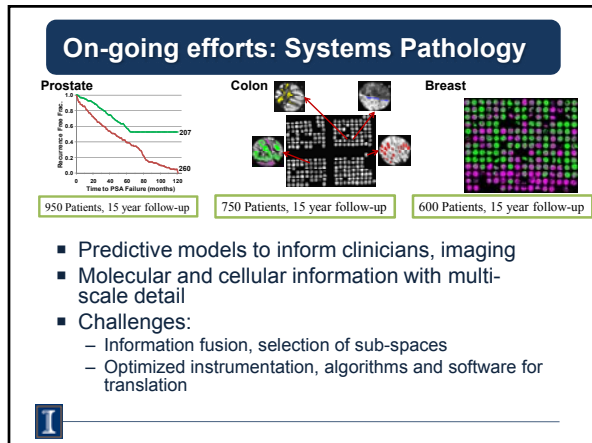












Thank you

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 - Breast: Michael Walsh, Frances Pounder
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 - Colon: Jason Ip
 - Molecular and Tissue: Synthia Lane, Rong Kong, Jing Xu, Sarah Holton
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- Wash Univ, St Louis - Guido Sauter, Hamburg
- Colon: Gus Davis, Yale

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