



BIOMEDICAL APPLICATIONS OF NANO-SPECTROSCOPY

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early diagnosis of cancer and disease
(Oesophagous, Cervical, ALS, ...) **Activity at ALICE**
Daresbury, micro-Raman

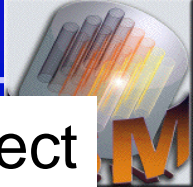
Perspective with fs lasers



Prevention of cancer related death by early diagnosis is estimated at 90%, strongly motivating the continuous development of better diagnostic techniques.

Problem of resolution with standard infrared microscopy

The tumor cells are localized in different and small areas (hundreds of nanometers), so if we want to prevent the disease we must look at single area: average techniques are not good enough



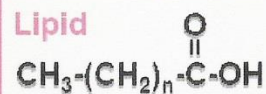
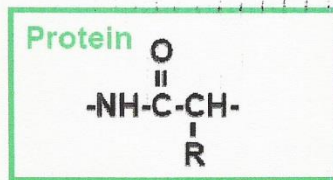
tissue imaging by **nano-spectroscopic methods** to detect **alterations of the biochemical composition** (modifications in lipid components, protein aggregations or conformational changes, disruption of nucleic acids organisation, etc....) with unprecedented resolution.

These molecular changes will be designated as **diagnostic markers of cancer and diseases in general**. Monitoring the impact of advanced therapeutic treatments (deriving from the related nanotechnology field) is a further opening.

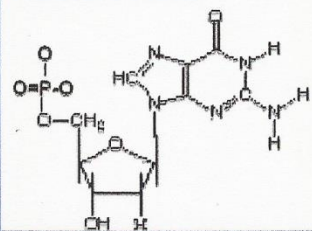
In parallel, the development of ultrasensitive biosensors based on an **enhanced optical response** and targeting specific pathogens leading to the occurrence of cancer will be supported.

Spectroscopy and microscopy in the infrared

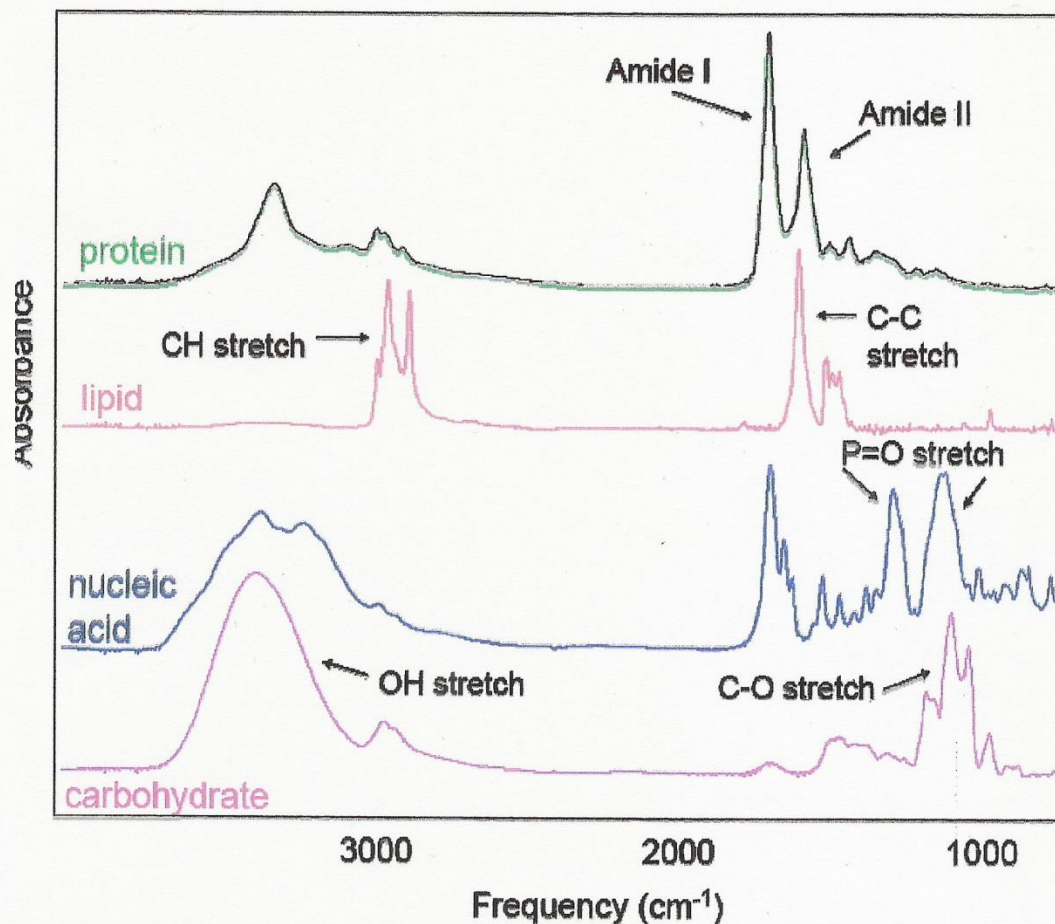
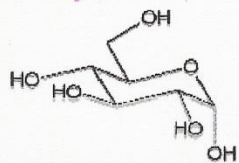
Strength: Spectral fingerprints of molecules



Nucleic Acid



Carbohydrate



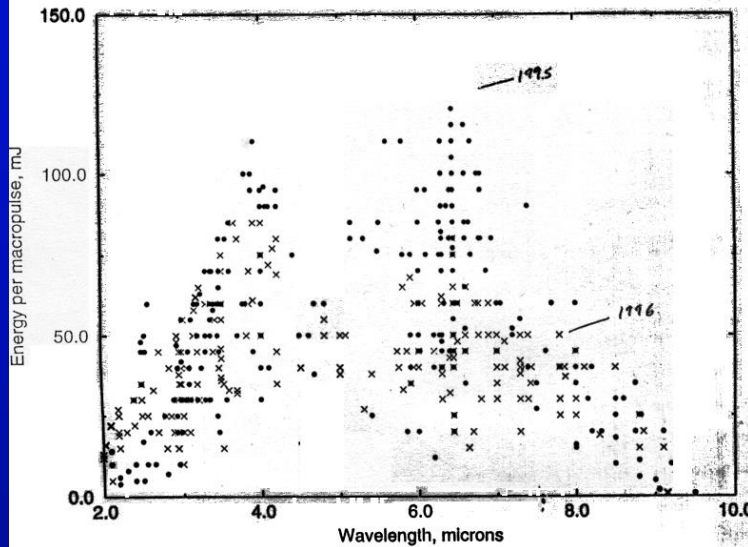
Weakness: Long wavelengths Spatial Resolution $\sim \lambda/2$

Solution: Near field optics ----> SNOM ---> needs high intensity

Combine Spectroscopy and SNOM ---> needs very high intensity ---> IR FEL

Free Electron Laser (FEL)

Logged Energy vs. Wavelength

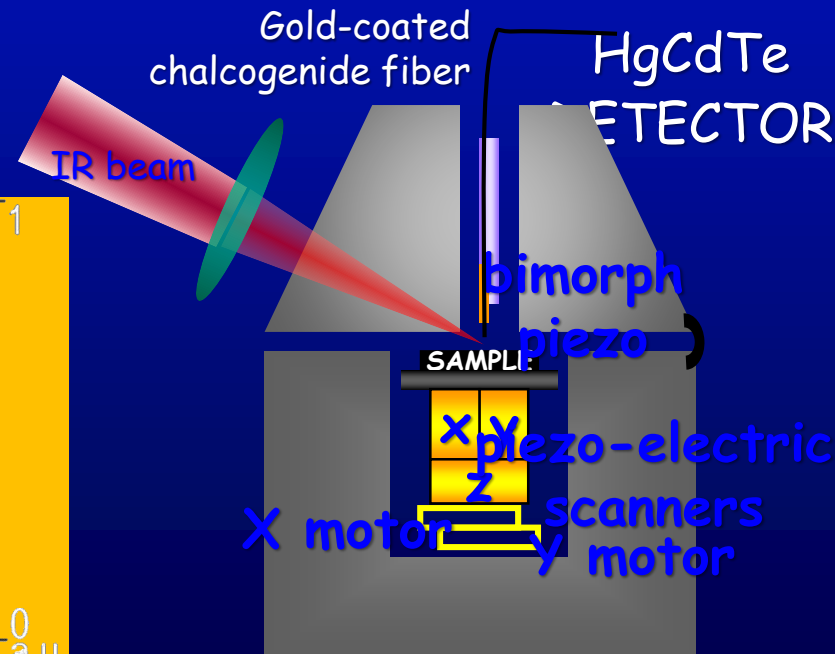
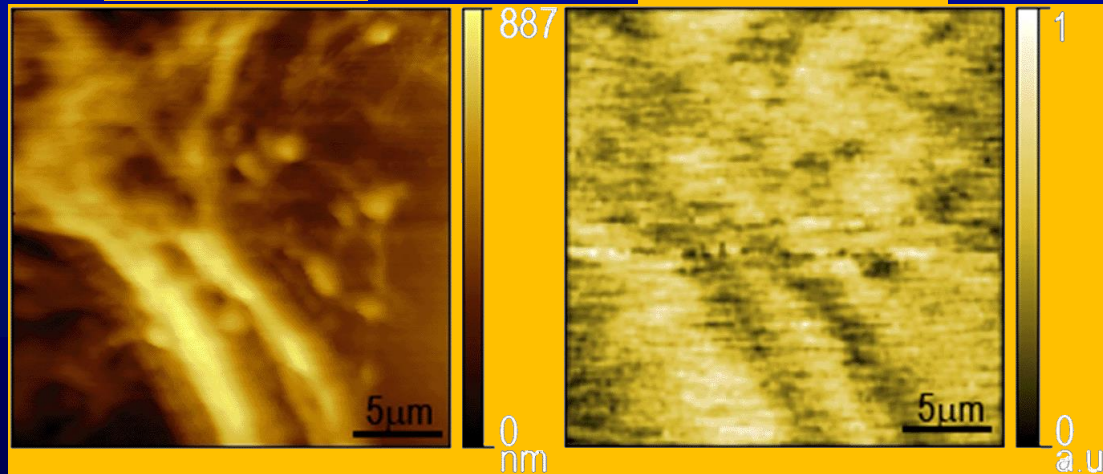


Chose wavelengths corresponding to vibrational modes of the interested chemical bonds

obtain a map of sample's chemical contents

topography

optical signal



Au (Golden Coating)

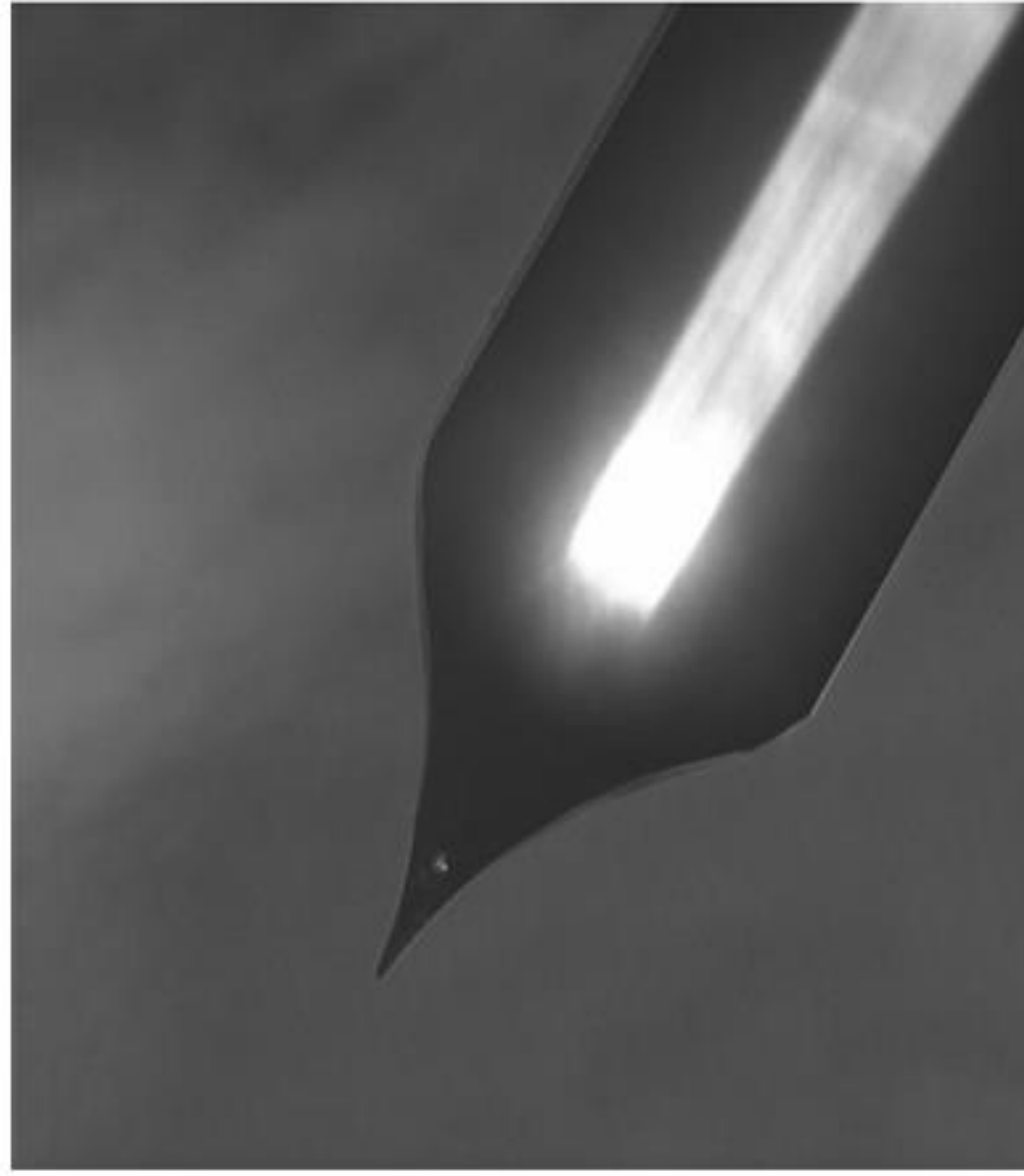
As₄₀Se₆₀

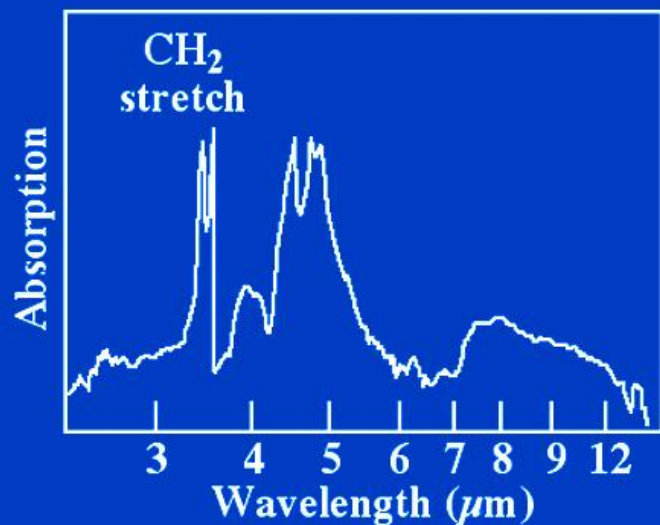
As₃₈Se₆₂

190 μm

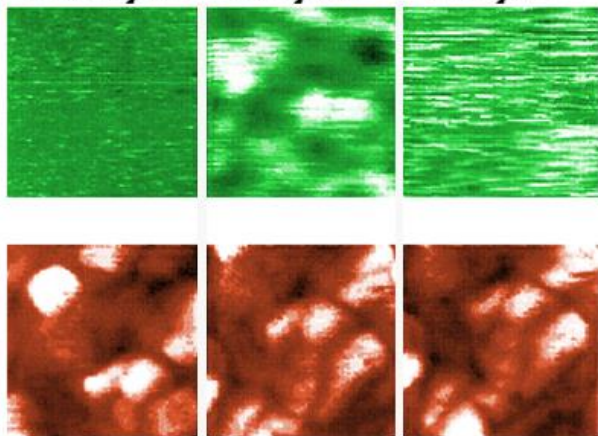
120 μm

$\sim 50 \text{ nm}$





SNOM images
 $\lambda = 3.25 \mu\text{m}$ $3.5 \mu\text{m}$ $3.7 \mu\text{m}$



topographic images

**example of
IR Spectroscopic
SNOM:
diamond films**

J. Microscopy 202, 446 (2001).

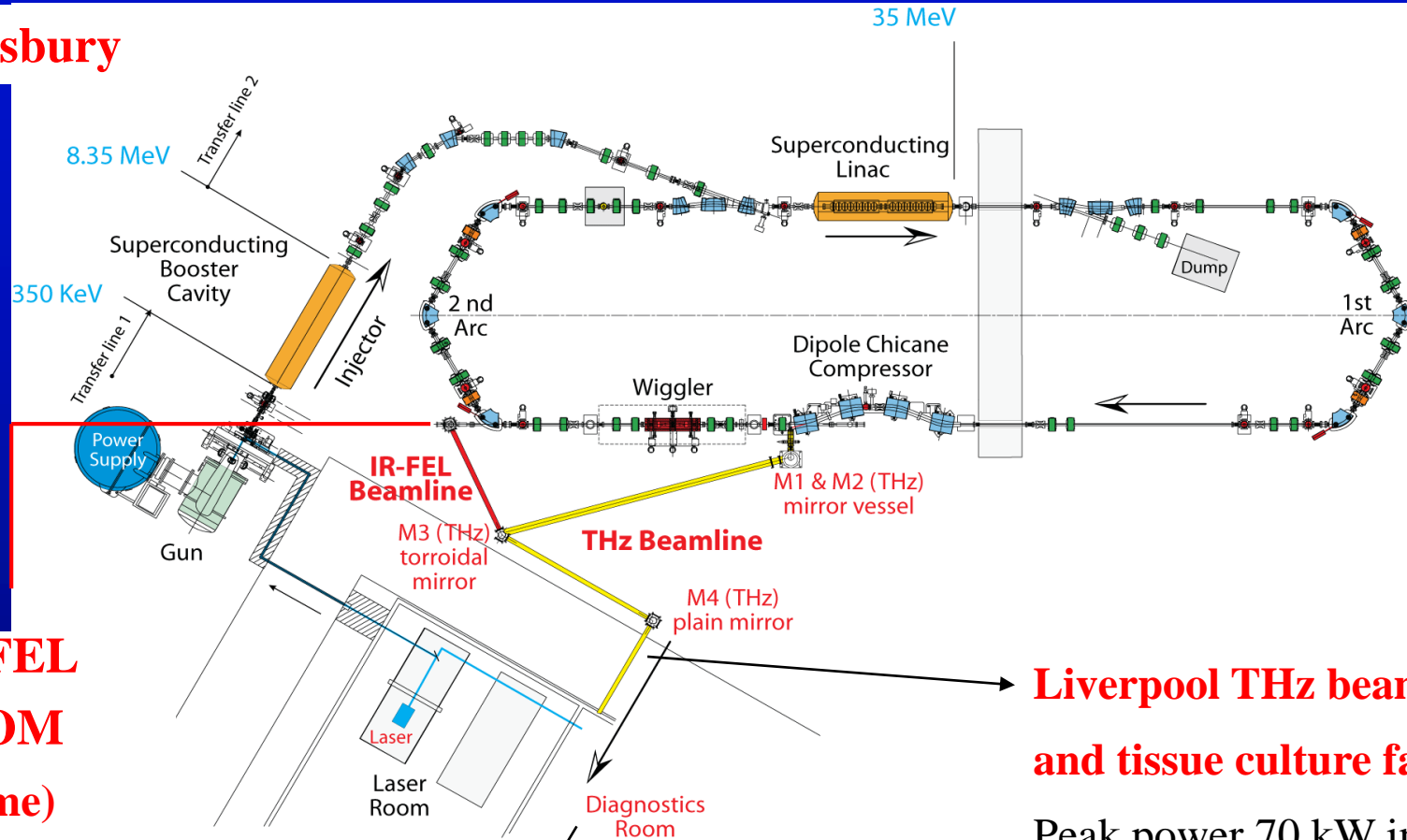


Diagnosis of cancer at Daresbury 2011-

THz and IR Research Cancer Programme on ALICE



Daresbury



IR FEL SNOM (Rome)

High spatial
and high
spectral
resolution
imaging

**Tissue Culture Facility
on 2nd floor**

**Liverpool THz beamline
and tissue culture facility**

Peak power 70 kW in 0.6 psec

Average power 24 mW

No thermal effects

EPSRC: “The mechanism of biological organisation”

Oesophageal Adenocarcinoma

Oesophageal cancer is the fastest rising incidence of cancer in the western world.

Most patients have distant metastases on diagnosis and are not suitable for surgery.

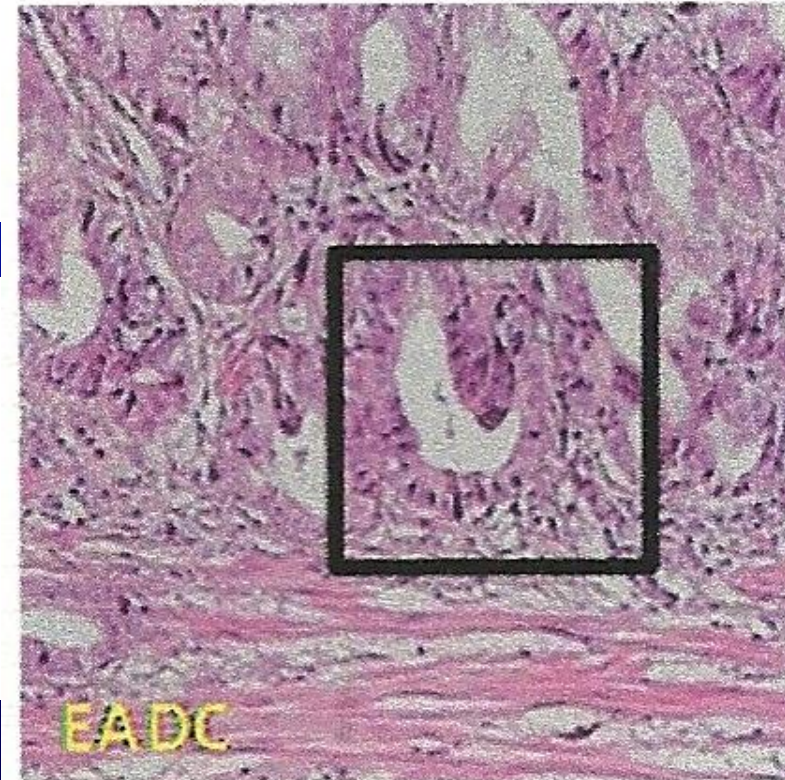
Surgery is the only potentially curative treatment so survival rates are very poor.

However, very low percentage (8%) in identify it

The challenge is to do early diagnosis on patients who can develop oesophageal cancer.

Detail: Stroma

Oesophageal cancer consists of cancer cells surrounded by stroma made up of various (non-cancer) cell types and extracellular matrix (ECM) proteins.



Visible light image of specimen of Barrett's oesophagus.

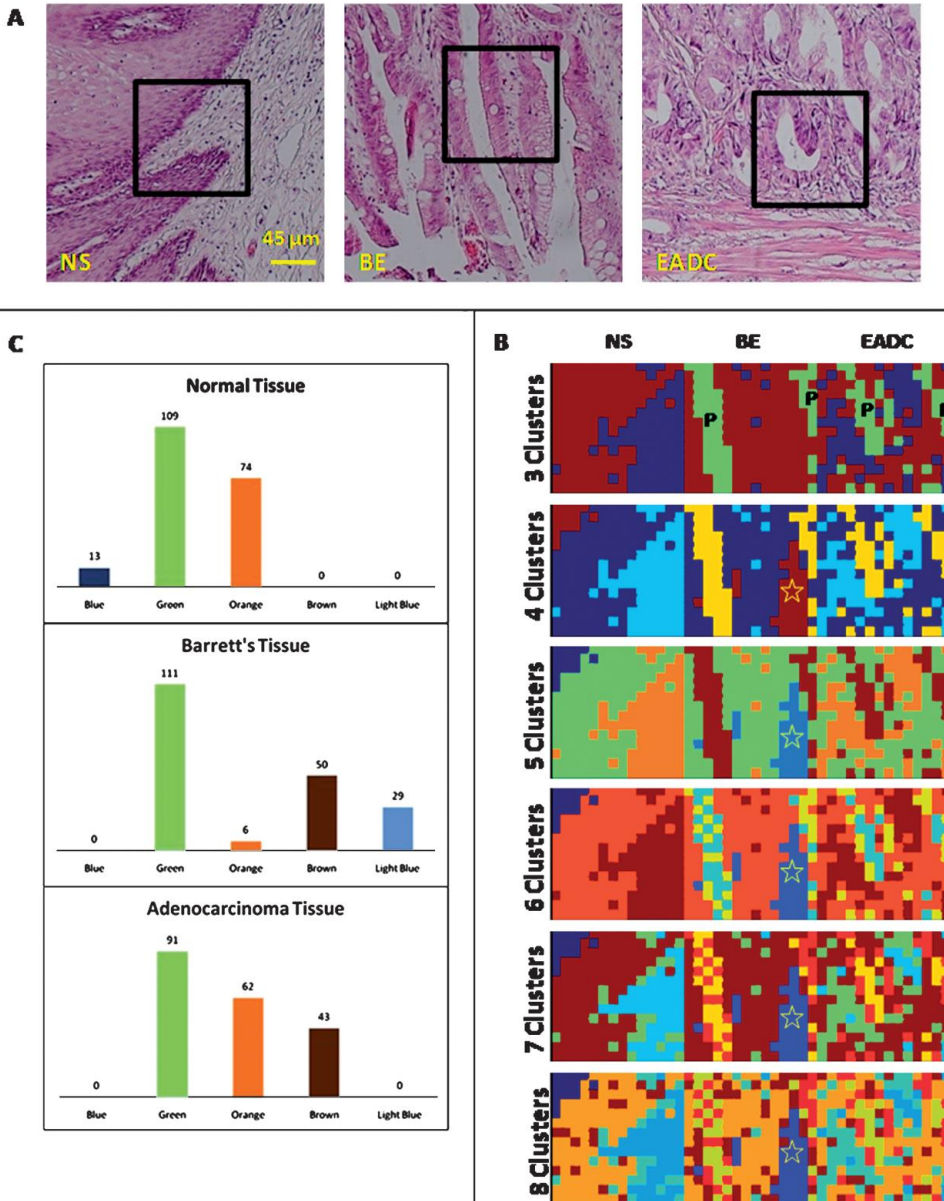
Previous work: FTIR on a Synchrotron



Quaroni et al. 2009
Esophagous cells
Synchrotron IR
15 micron step
900-1300 cm⁻¹

Blue bands of
glycogen

Number of pixels in a given region of
normal, Barrett's and adenocarcinoma
tissue in particular regions of the infrared
spectrum

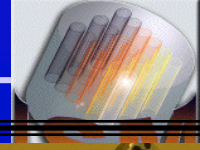


Problem of resolution with standard infrared microscopy

The tumor cells are localized in different and small areas (hundreds of nanometers), so if we want to prevent the disease we must look at single area: average techniques are not good enough



Technical Issues



Accelerator and IR FEL

Optimise performance of accelerator
for IR FEL characteristics

Stability: intensity, frequency

Tuning: $4\mu\text{m}$ to $10\mu\text{m}$

Macro bunch structure 10 Hz

ALICE 100 μs

Vanderbilt 25 μs

SNOM

Electronics matched to macro bunch

Control of scan

Optics: fabrication of tips

Performance

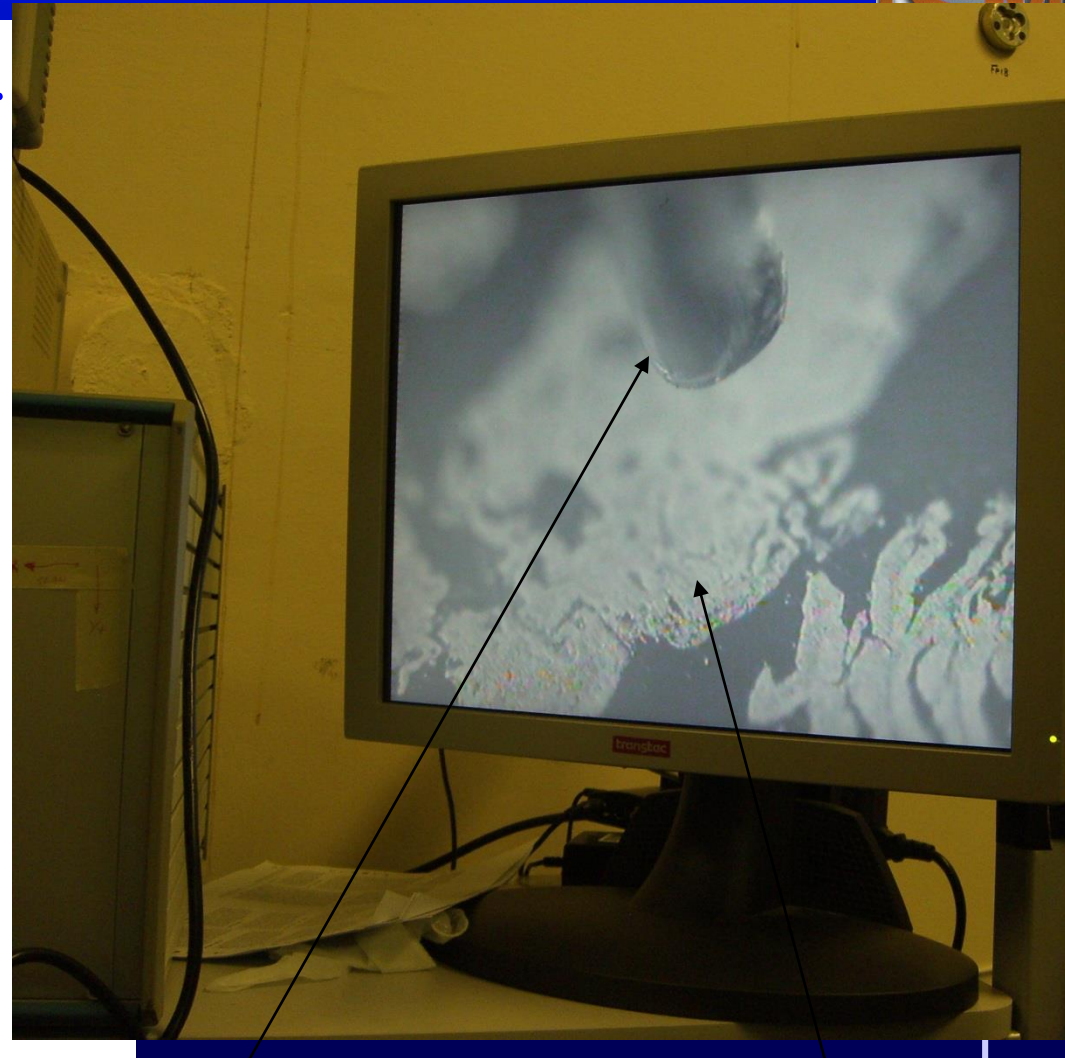
Images at different λ

$10\mu\text{m} \times 10\mu\text{m}$ at

$0.1\mu\text{m}$ spatial resolution

10000 points IR Intensity/stability is key

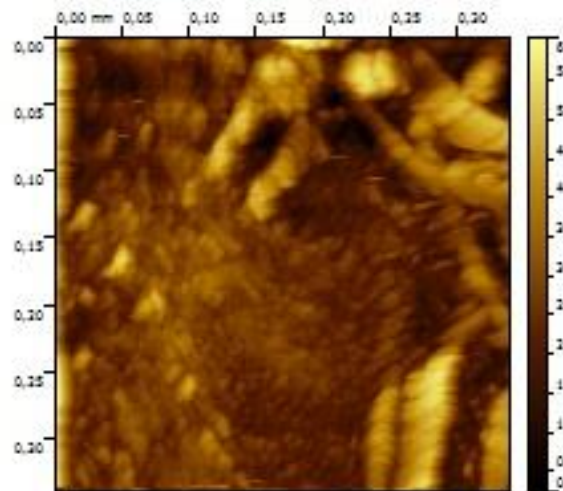
Beamline: Commissioned



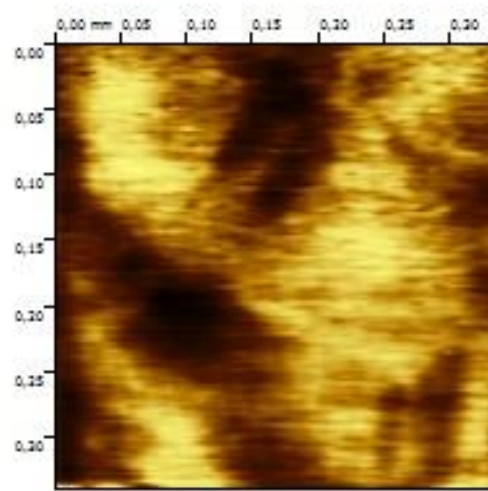
Tip
Diameter $300\mu\text{m}$
Aperture $\sim 1\mu\text{m}$

Specimen
Scan $50\mu\text{m} \times 50\mu\text{m}$

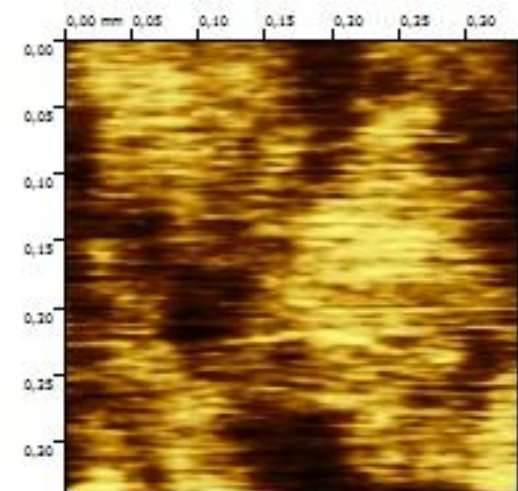
Benign cells



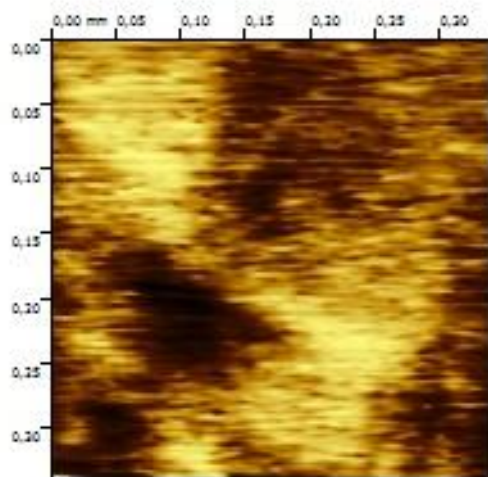
Topography



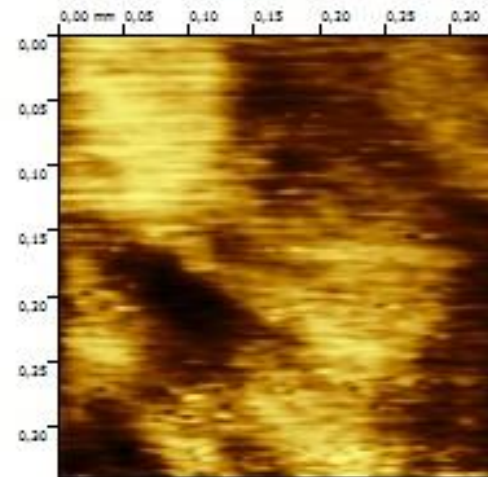
$\lambda=8,60\mu$



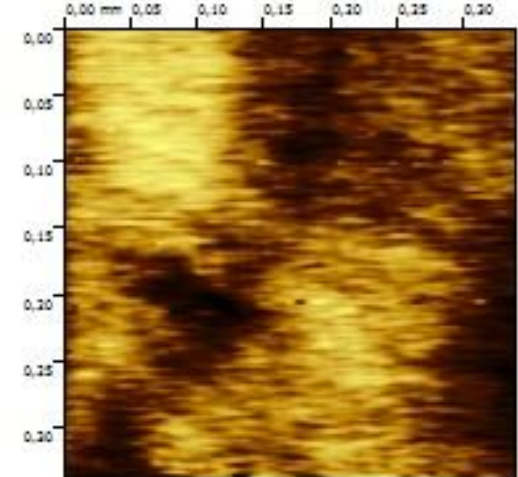
$\lambda=8,05\mu$



$\lambda=7,30\mu$

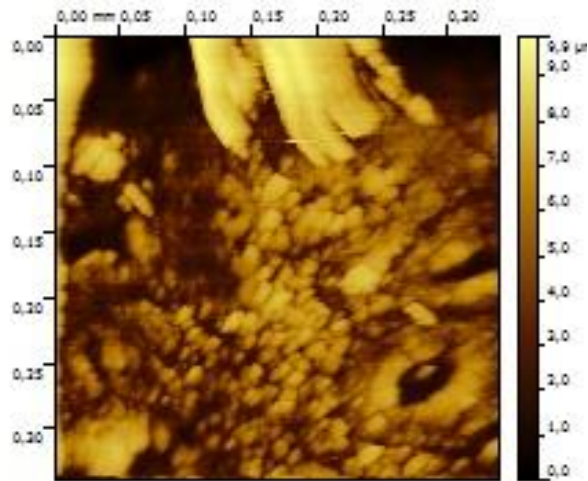


$\lambda=7,00\mu$

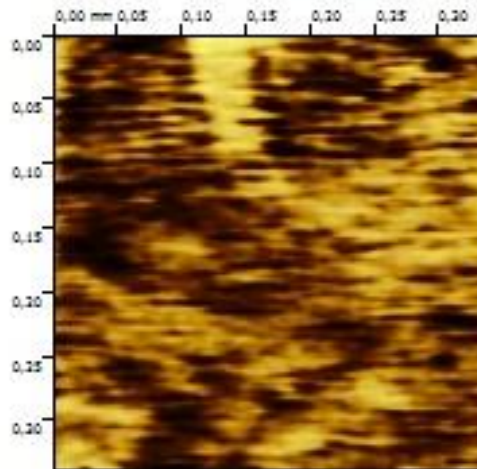


$\lambda=6,50\mu$

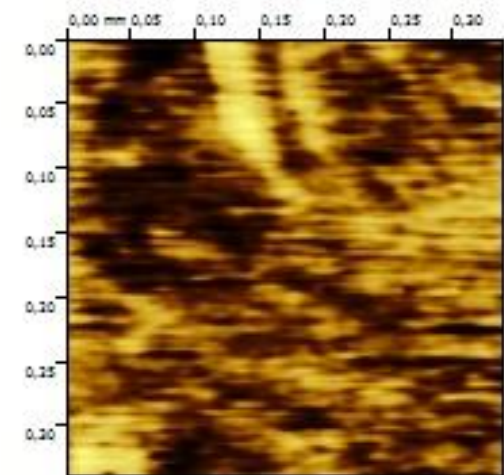
Cancer cells



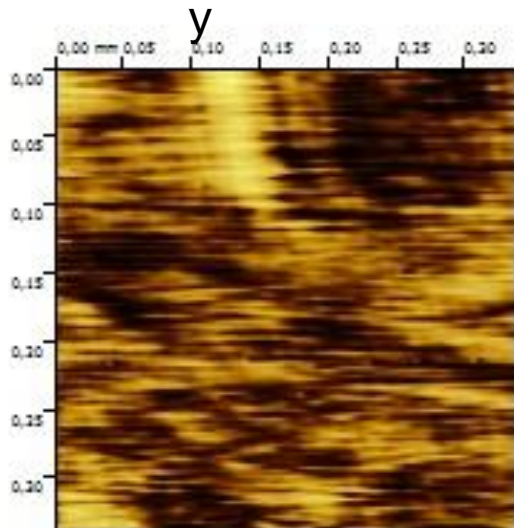
Topograph



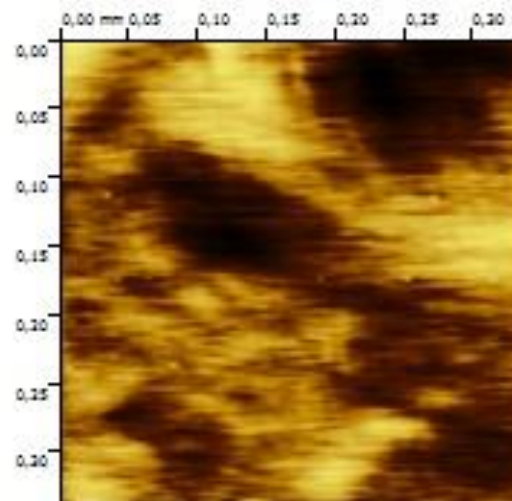
$\lambda=8,60\mu$



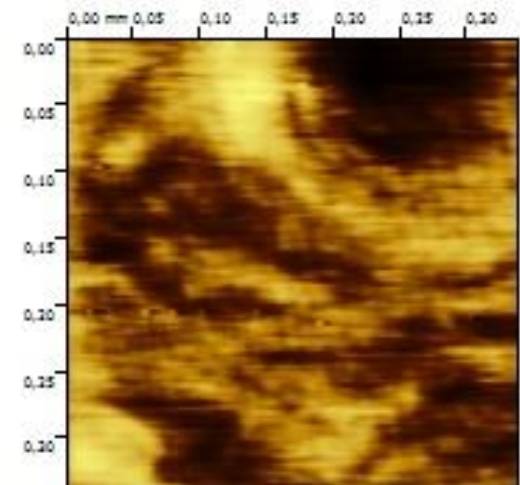
$\lambda=8,05\mu$



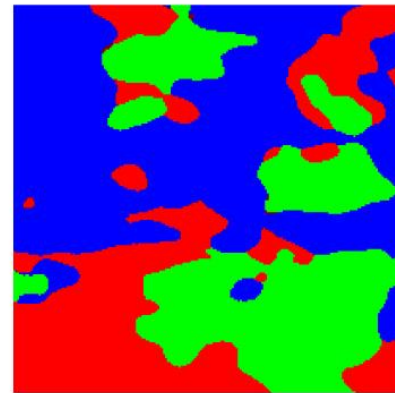
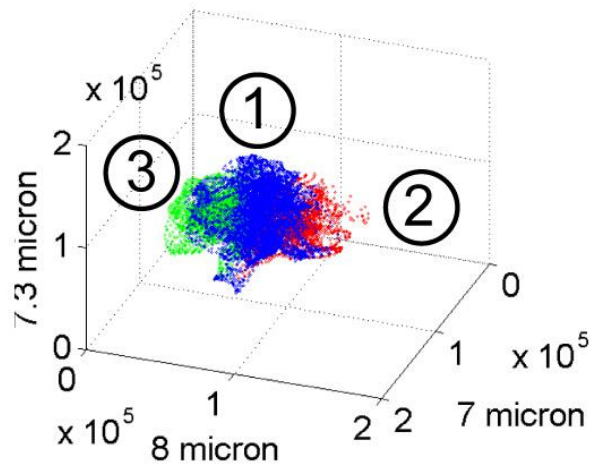
$\lambda=7,30\mu$



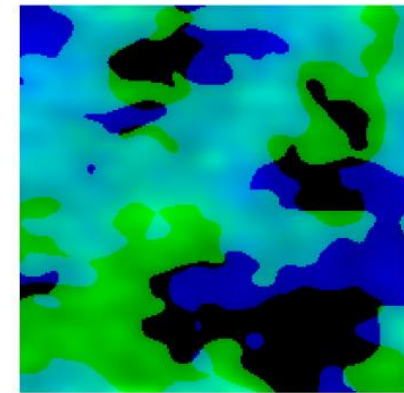
$\lambda=7,00\mu$



$\lambda=6,50\mu$

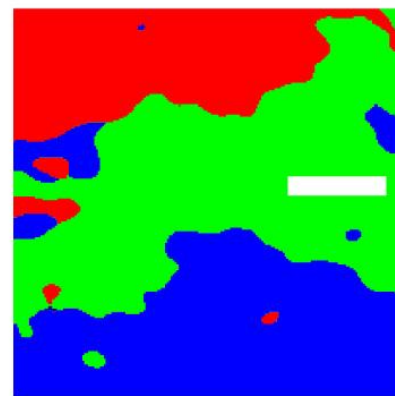
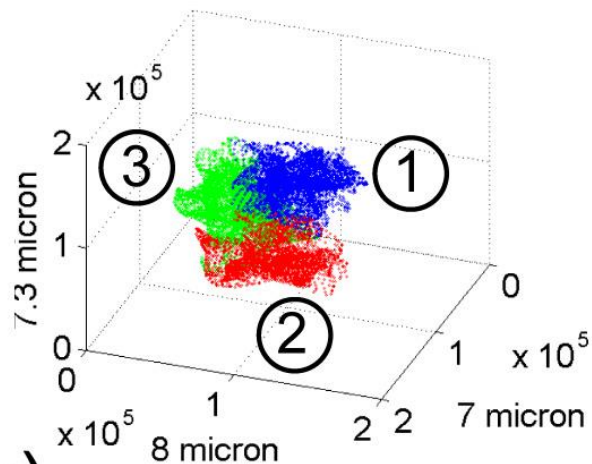


Clusters

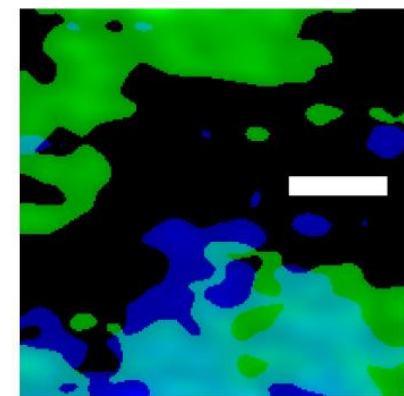


IR-SNOM

Sample A



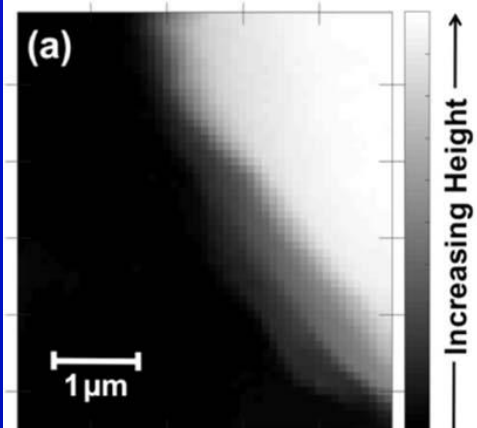
(b)



(c)

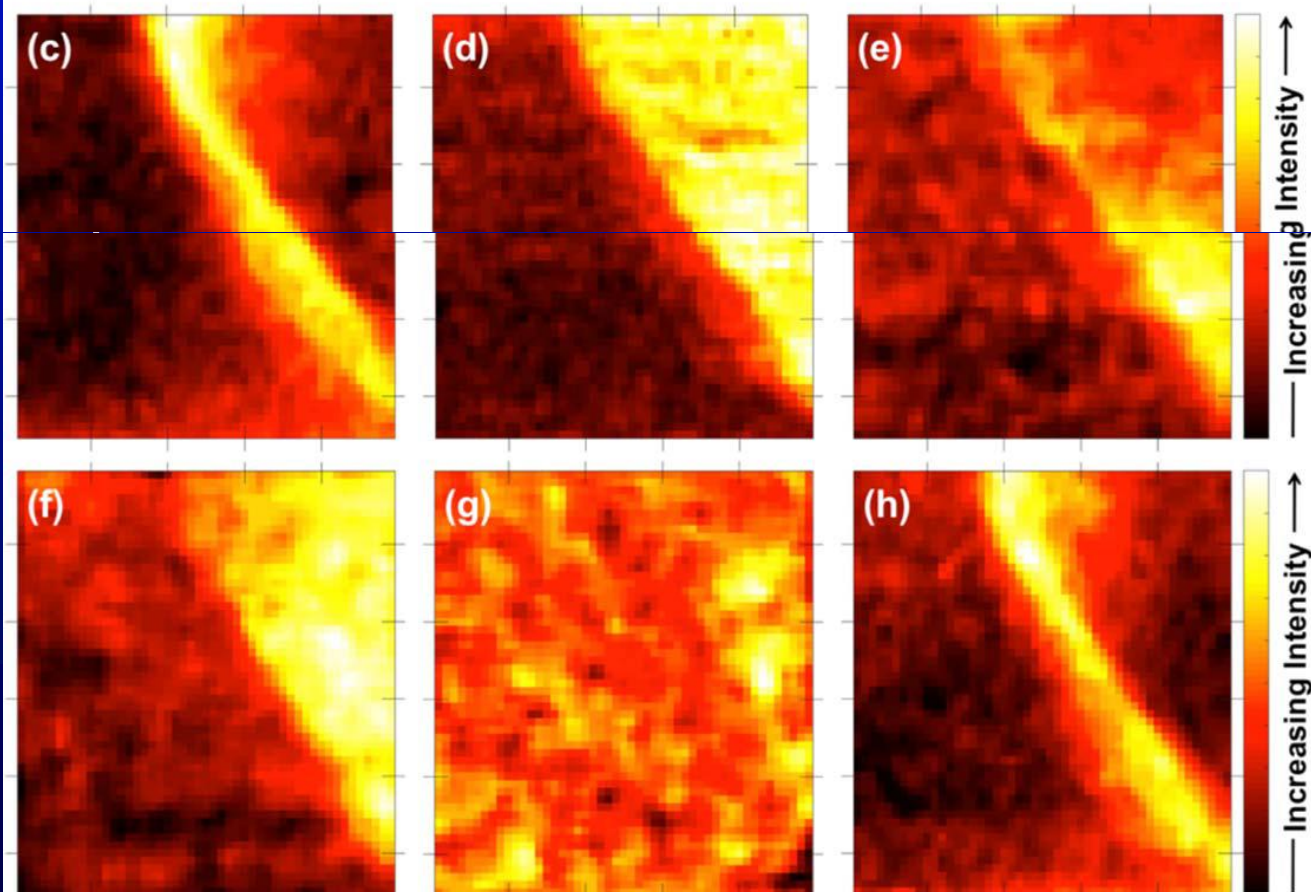
Sample B

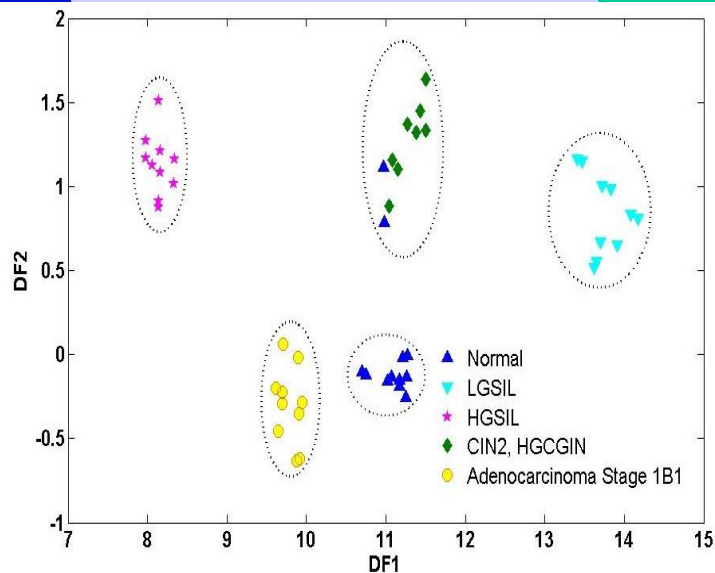
(a)



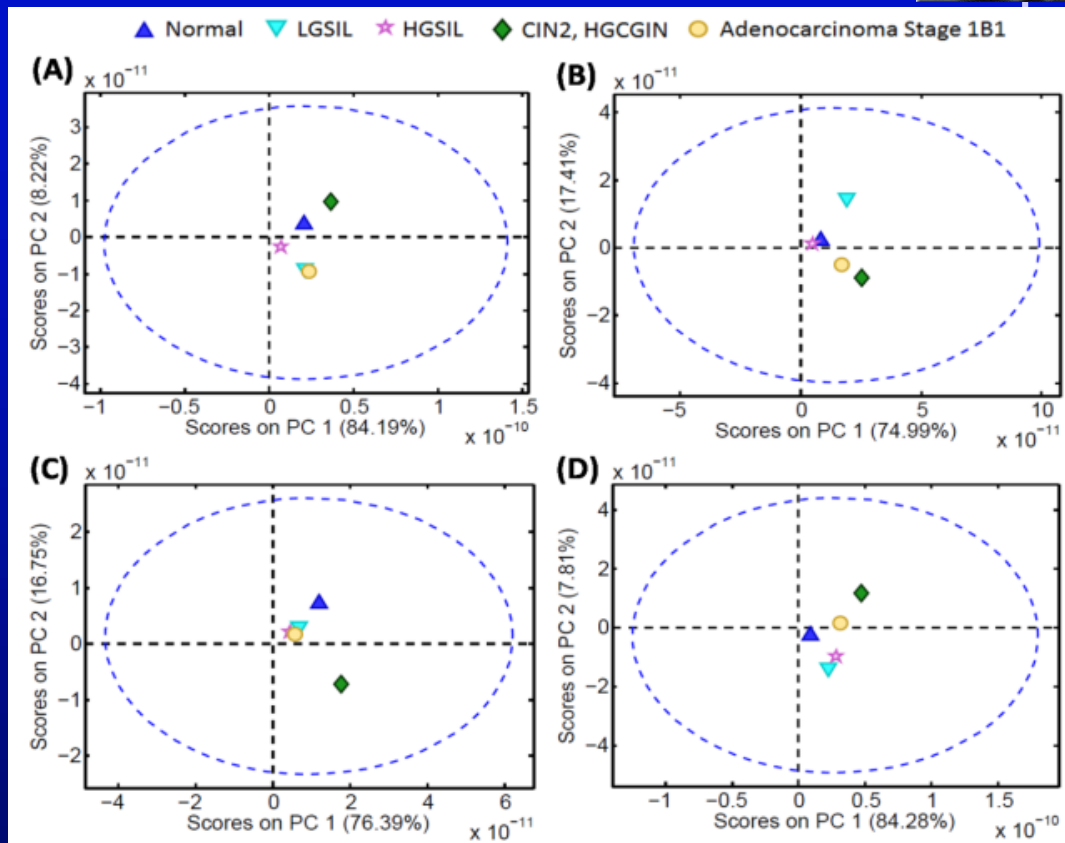
(b)

λ (μm)	Fig. 2 Pane	Biomarker
8.05	(c) and (h)	Relating to DNA
7.30	(d)	Control
6.50	(e)	Amide II (Largely β -sheet)
6.06	(f)	Amide I (Largely α -helix)
5.71	(g)	Lipids



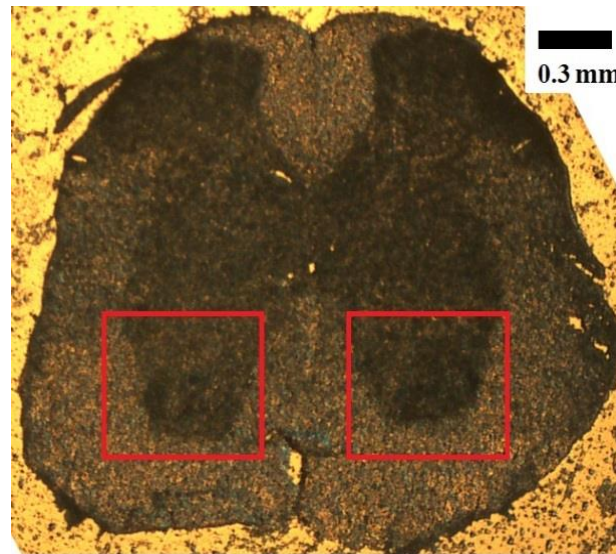
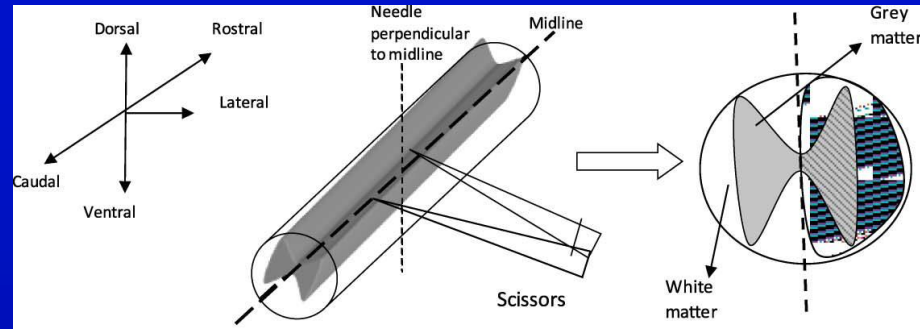


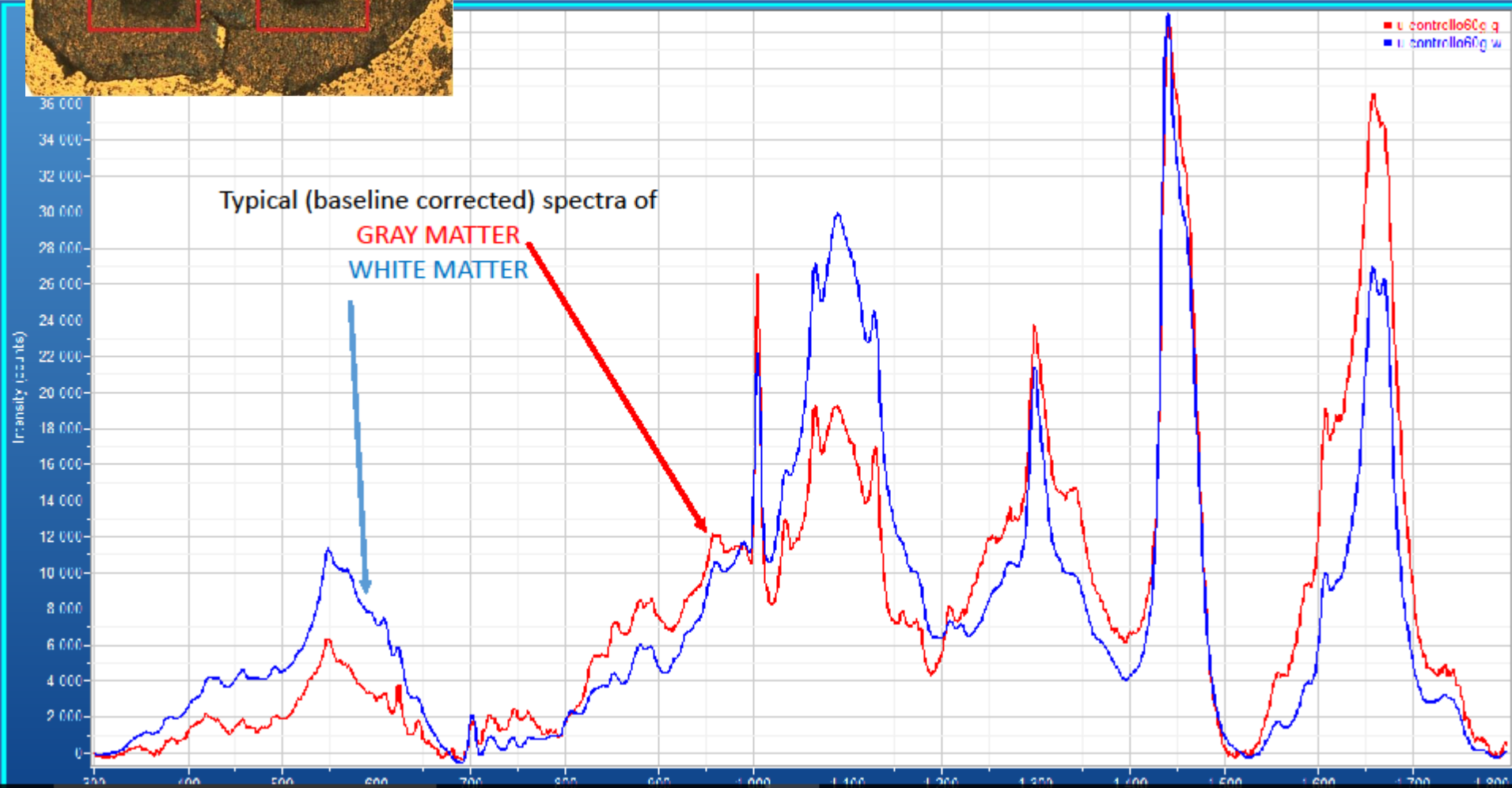
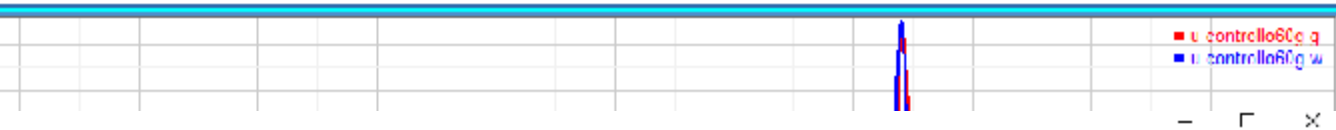
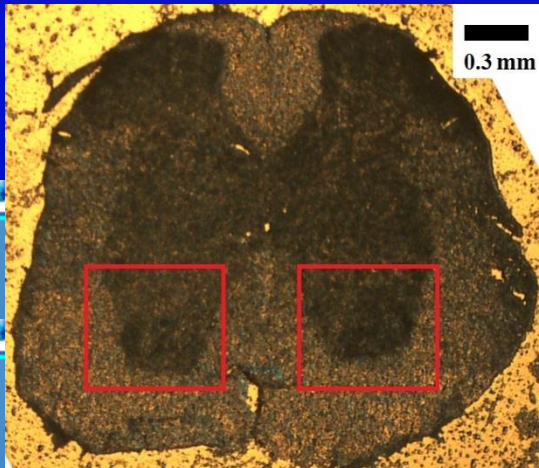
ATR-FTIR Spectroscopy

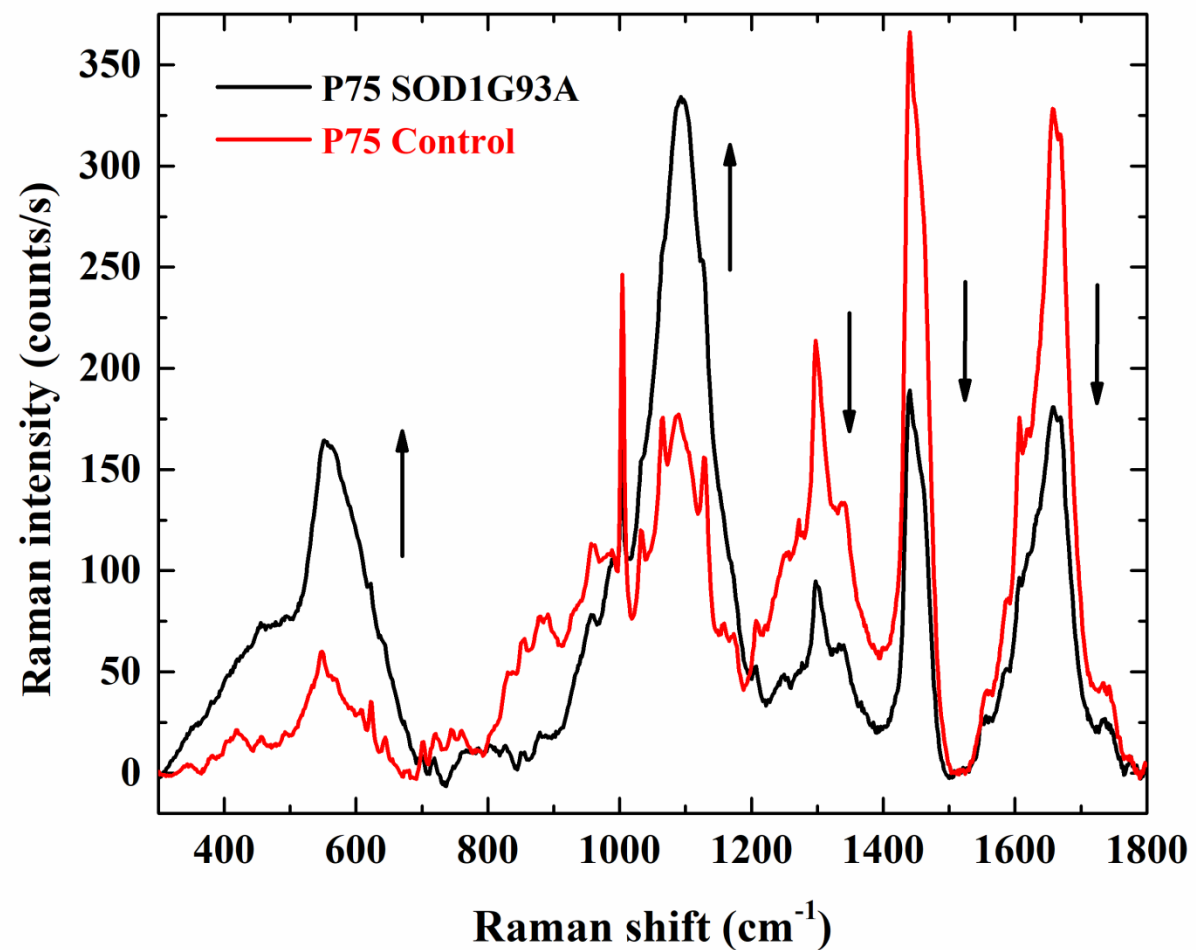
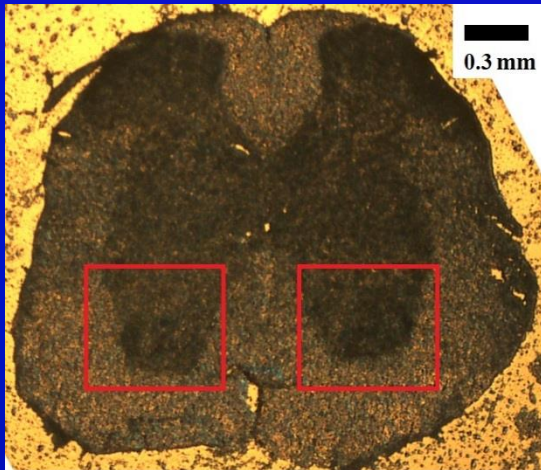


SNOM-IR-FEL: Principle Component Analysis

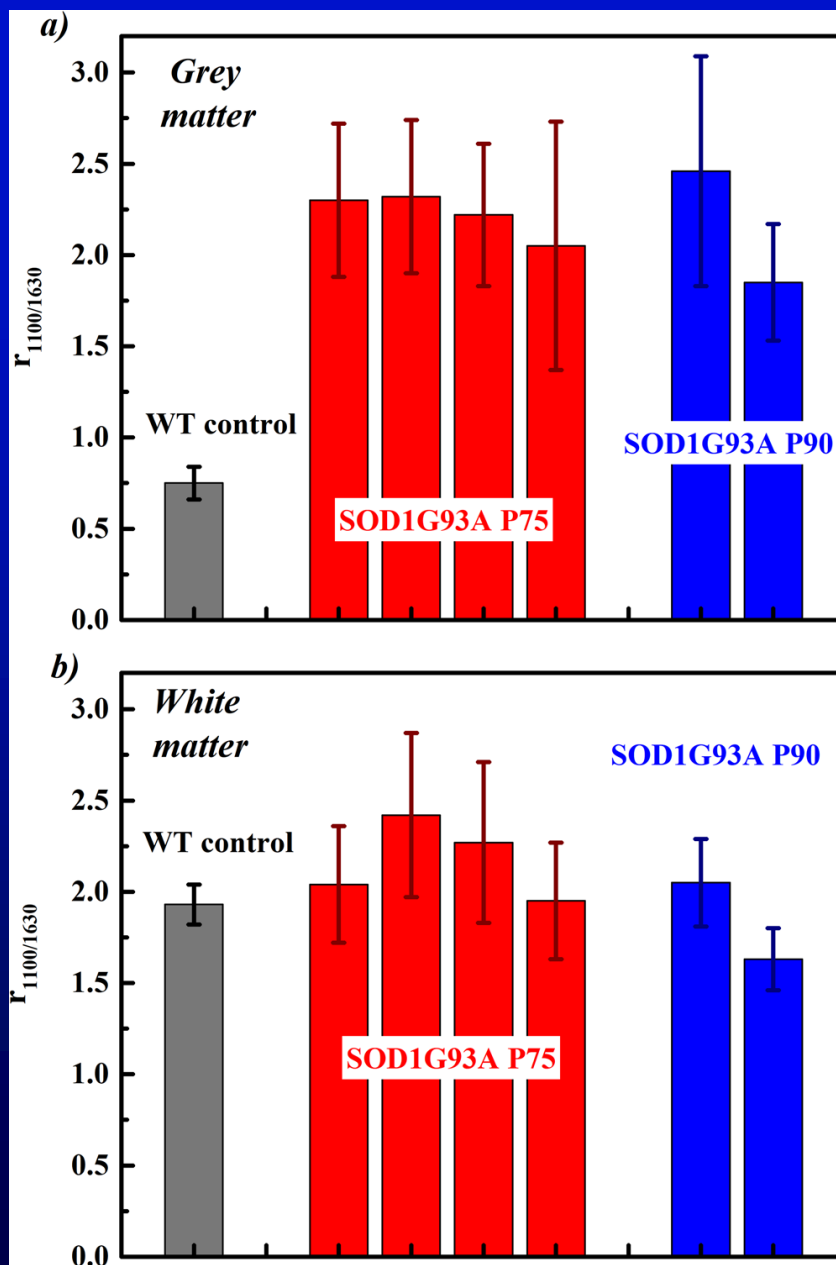
Halliwell Diane E, Morais Camilo LM, Lima Kássio MG, Trevisan Julio, Siggel-King Michele RF, Craig Tim, Ingham James, Martin David S, Heys Kelly A, Kyrgiou Maria, Mitra Anita, Paraskevaidis Evangelos, Theophilou Georgios, Martin-Hirsch Pierre L, Cricenti Antonio, Luce Marco, Weightman Peter, Martin Francis L; Nature Scientific Reports; 6 (2016) 29494.





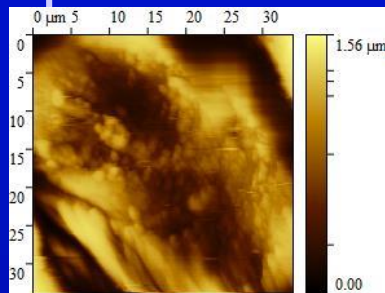


Disease detectable at 75 days from infection Scientific Report 2018

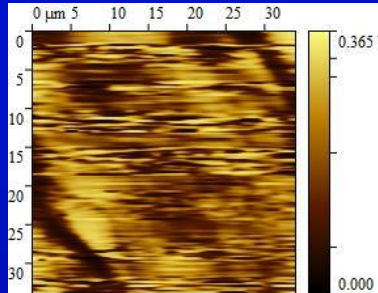


Histogram reporting the Raman signal intensity ratio between the spectral envelopes centred at 1100 cm^{-1} and at 1630 cm^{-1}

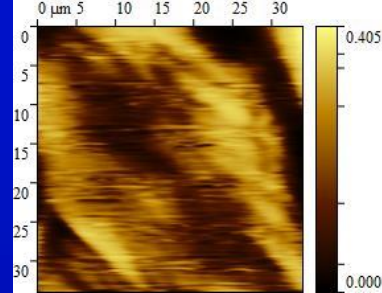
Osteoblast cells observed with SNOM coupled with 30 fs laser



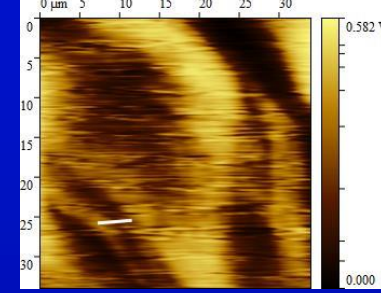
Topography



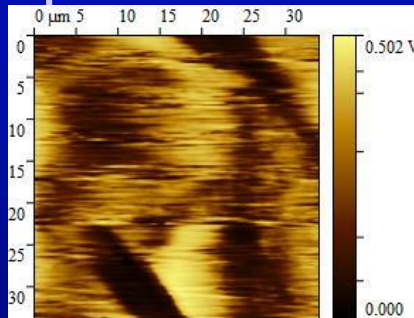
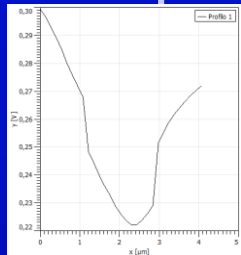
$\lambda=2,5\mu$



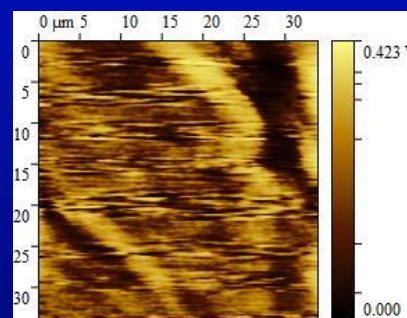
$\lambda=3,3\mu$



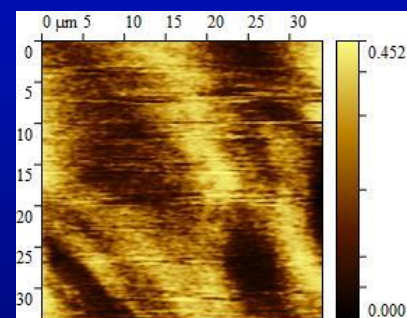
$\lambda=5,7\mu$



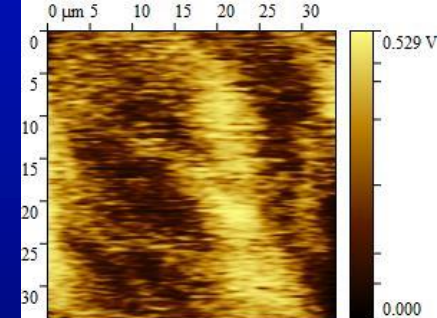
$\lambda=6,1\mu$



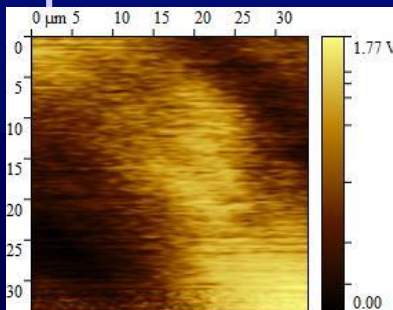
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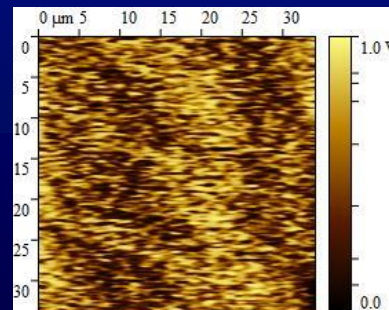
$\lambda=7,0\mu$



$\lambda=7,5\mu$



$\lambda=8,05\mu$



$\lambda=8,6\mu$



Conclusions and perspectives

IR, micro-Raman (TERS), AFM and SNOM (aperture, scattering, nano-IR) can be used for early diagnosis of cancer and deseases (ALS)

The advancement in technology give us a good possibility to be able to perform statistics for an early diagnosis of cancer

Collaborators

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Support from many ASTeC staff in operating ALICE

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Royal Liverpool and Broadgreen Hospital and University of Liverpool

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