

# Assessment of Intraoperative OCT Imaging in a Simulated Micro-surgical Task

## Checkpoint Presentation

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# Project Background

## Main Goals:

- Assess efficacy of intraoperative OCT for locating epiretinal membranes
  - Design an experimental task
  - Develop a phantom
  - Obtain IRB approval
  - Conduct study and analyze data
- Improve the user interface/GUI
- Implement smart OCT processing & color enhancements



# Update on Milestones

- Design of micro-surgical task to simulate ERM detection (3/12/12 -> 3/21/12)
  - Working phantom (3/12/12 -> 4/1/12)
- IRB approval (3/19/12 -> 4/4/12)
- Advertisement and incentive for subject recruitment (3/19/12-> >)
  - Completion subject trials (4/16/12->4/25/12)
  - Statistical analysis of data from subject trials (4/16/12->4/25/12)
  - Time-space correction (4/9/12->4/16/12)
  - Color enhancement (4/9/12->4/30/12)
  - ~~Annotation of anatomical landmark~~
  - GUI improvement (4/9/12->4/30/12)



# Deliverables: revised

## Old

### Minimum

- Phantom
- IRB approval
- Subject experiment
- Refined mScan user interface

### Expected

- Functional demo of GUI
- Results from executed experiments
- Statistical analysis of results
- OCT image enhancement

### Maximum

- Automatic scanning
- Time-space differences correction
- Publication
- Robot integration

## New

### Minimum

- Phantom
- IRB approval
- Subject experiment
- Robot integration

### Expected

- Results from executed experiments
- Statistical analysis of results
- OCT image enhancement
- Time-space differences correction

### Maximum

- ~~Automatic scanning~~
- ~~Publication~~ (Paper -> Report)
- Refined mScan user interface
- Functional demo of GUI

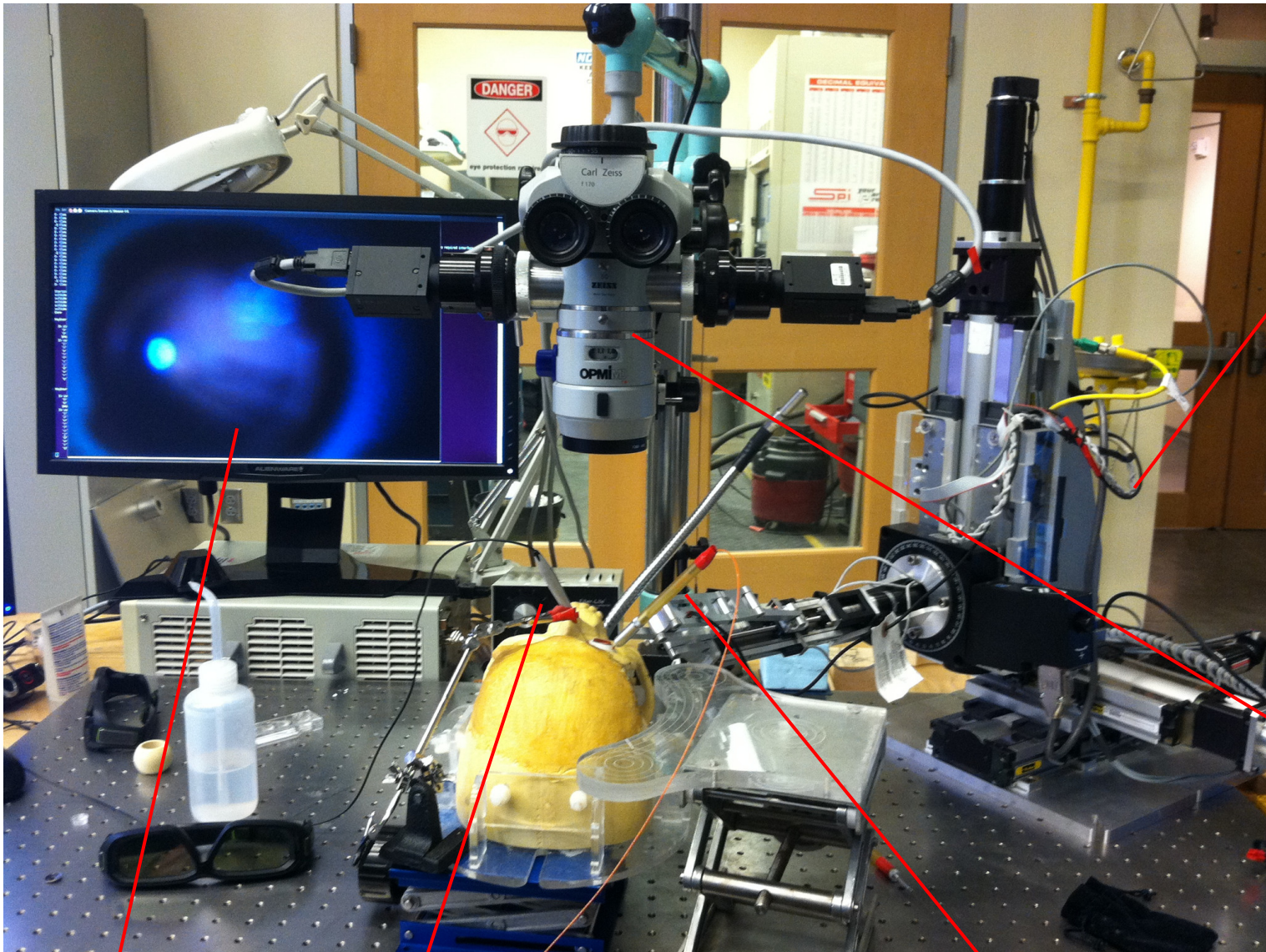


# Experimental Task

## *Experimental set-up:*

- An eye phantom mounted on an adjustable platform
- Two probes inserted into phantom via trocars—one for the light source and one for the pipette/probe tool—held either freehand or with a steady hand robot
- Visualization through microscope or 3D stereo display





Steady Hand Robot

Microscope

Stereo display

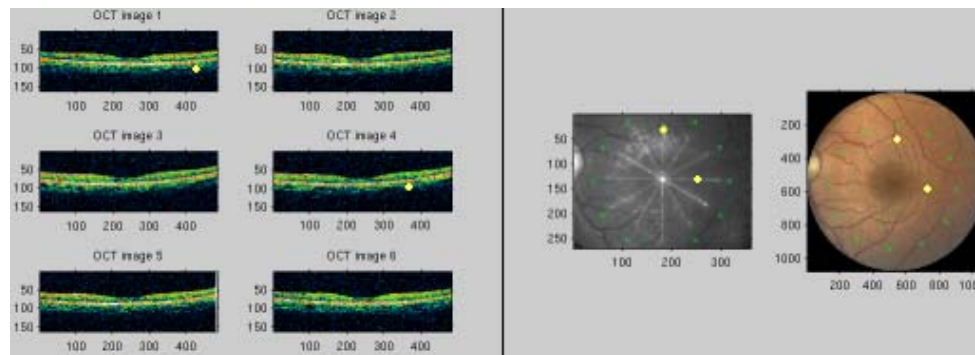
Light source

OCT probe



# Experimental task

- Two segments: intraoperative OCT imaging assisted vs unassisted (control), preceded by demo and practice
- Segment order alternated between subjects to account for learning curve
- 3 to 5 phantoms per segment depending on time constraints
- Provide pre-operative OCT images in a radial pattern along with 'fundus' image indicating location of each scan

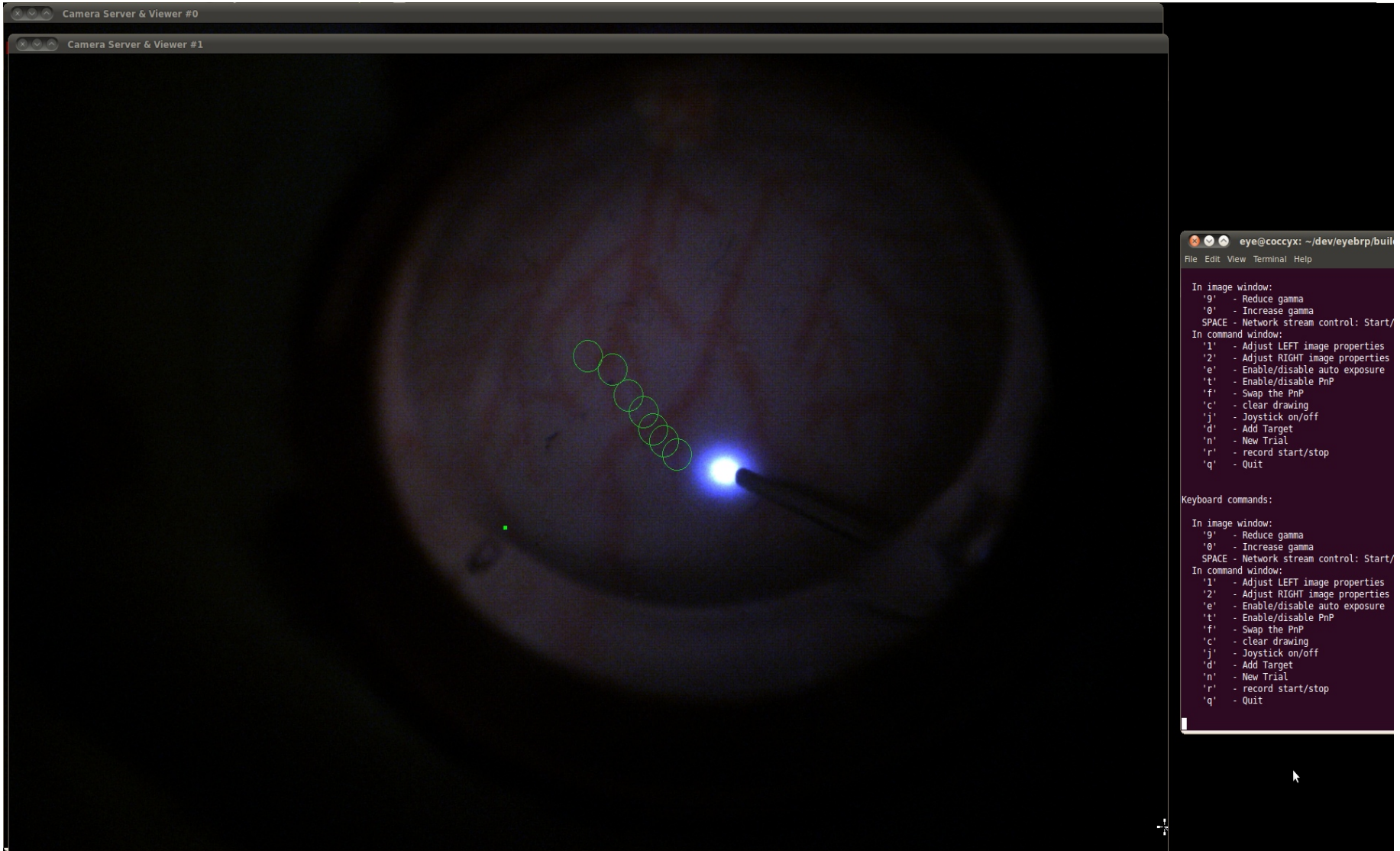


# Experimental task

- Unassisted segment: locate ERM edge by closely inspecting microscope/stereo image
- Assisted segment: additional overlays display data from the OCT probe, scan path, ability to select landmark in OCT image and have it highlighted in scan path
- 2 to 5 mins per phantom to demarcate as much of the ERM edge as possible, using at least 5 points
- When edge is found a circle will be drawn around it, inside which no more points can be selected

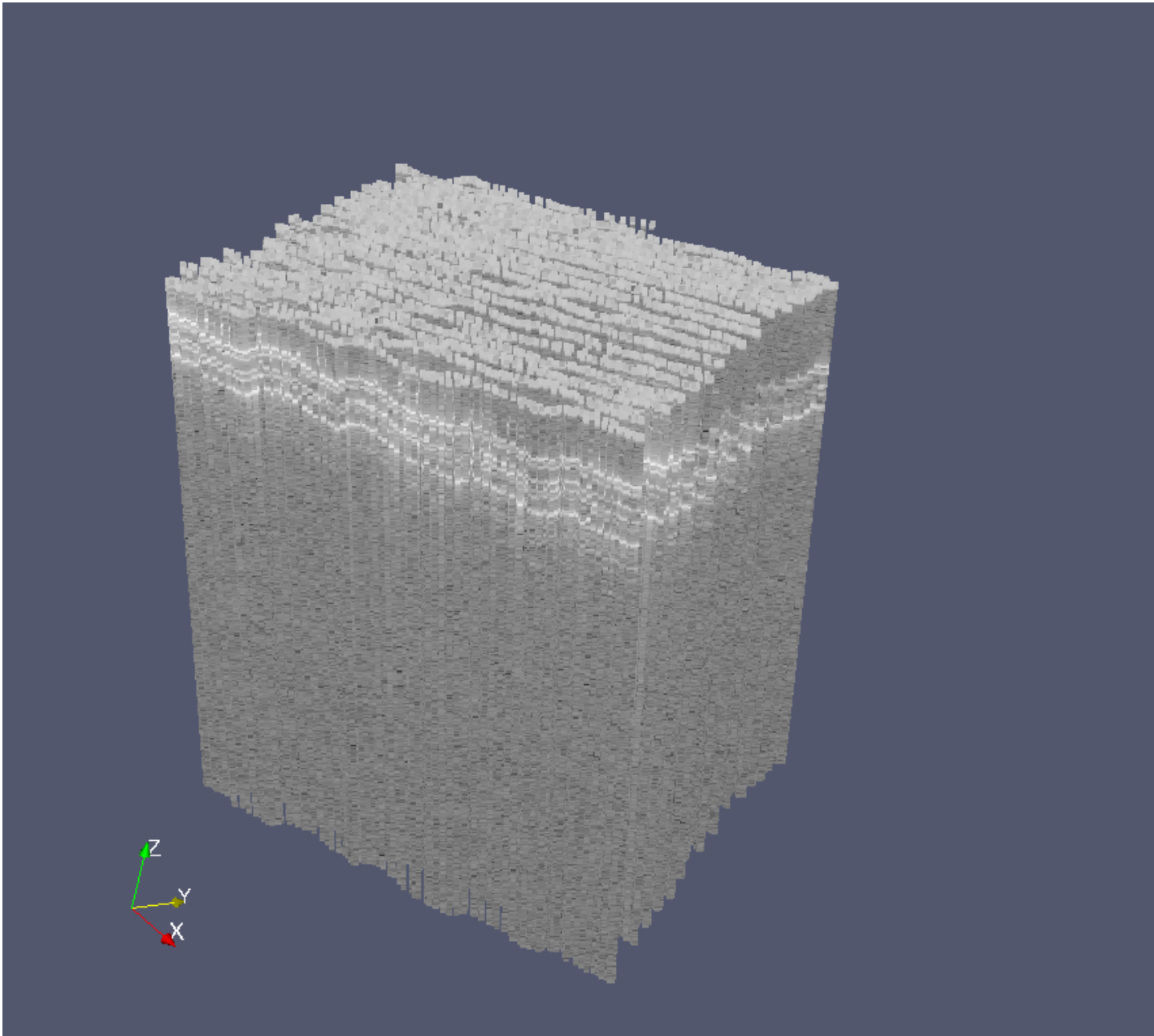






# Experimental task

- For each point selected the shortest distance to the true location of the membrane edge will be computed
- True location of membrane:
  - Robot programmed to scan area containing membrane
  - Obtain 3D image of tissue
  - Project to obtain 2D image
  - Register with image containing subject guesses using anatomical landmarks



Marcin Balicki



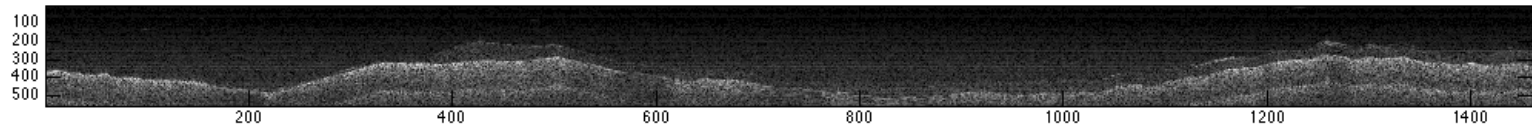
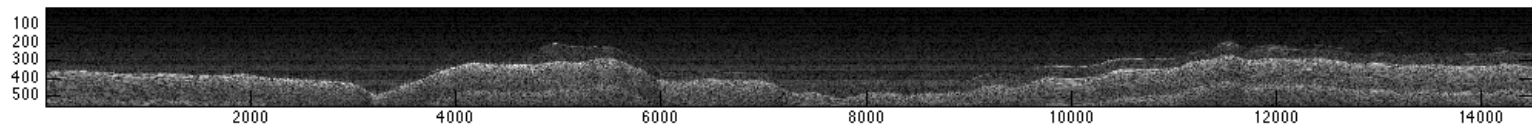
# Phantom

- Plenty of failed attempts...
- Retina: ~25 layers of latex paint on which vessels and a macula are drawn
- ERMs: thin layers of household adhesive sealant (silicone) applied with a razor
- Eye: recipe courtesy of Kevin Olds



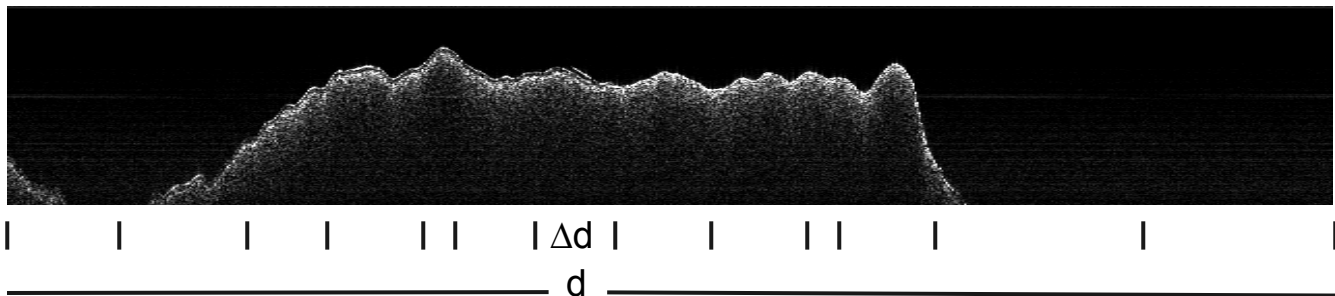
# Time-space correction

- Correlation-coefficient algorithm
  - Premise: spatially adjacent A-scans will be highly similar and probably redundant
    - i. Successive A-scans are compared to the latest reference
    - ii. Only scans that are sufficiently distinct from the reference are collected to the image



# Time-space correction

- Distance-scaling algorithm
  - Premise: width of a section of the image should be proportional to distance traveled by the probe in that section
    - i. Divide OCT scan path into segments
    - ii. For each segment compute segment:path length ratio
    - iii. Scale A-scan history corresponding to this segment by the computed ratio



# Timeline: revised

	Week 1 13-Feb	Week 2 20-Feb	Week 3 27-Feb	Week 4 5-Mar	Week 5 12-Mar	Week 6 19-Mar	Week 7 26-Mar	Week 8 2-Apr	Week 9 9-Apr	Week 10 16-Apr	Week 11 23-Apr
<b>Read Relevant Literature</b>											
<b>Plan Project</b>											
<b>Evaluate Success of mScan for Finding ERM Edges</b>											
IRB Application											
IRB Training											
Attend Vitreoretinal Surgery											
Design Phantom											
Design Experimental Task											
IRB Approval											
Make Subject Incentives											
Recruit Subjects											
Perform Subject Experiments											
Analyze Data											
<b>Develop GUI with OCT Path Overlay and mScan Display</b>											
Improve User Interface											
mScan-OCT Path Correspondence											
Automatic Scanning											
<b>Project Conclusion</b>											
Poster Design											
Final Report											



# Dependencies

Dependency	Solution	Status	Fallback Plan
Access to Robotorium	Apply	Resolved	
Functional OCT System, probes and software	Schedule time for use	Resolved (schedule based on subject availability)	
Visualization system & software	Schedule time for use	Resolved (schedule based on subject availability)	
Marcin	Schedule weekly meetings	Resolved	
Materials and resources for phantom	Get access and funding	Resolved (budget approved)	
IRB approval	Submit application	Resolved	
Attend Vitreoretinal Surgery	Ask Marcin for help scheduling	Unresolved	Discuss with surgeons
Subject Recruitment	Flyers, emails, etc.	Resolve by 4/12 (3/21)	Advertise more heavily
Subject Incentive Funding	Gift cards	Budget approved	



# References

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- “Common-path Fourier-domain Optical Coherence Tomography with a Fiber Optic Probe Integrated Into a Surgical Needle” Jae-Ho Han, Marcin Balicki, Kang Zhang, Jae-Ho Han, Marcin Balicki, Kang Zhang, Xuan Liu, James Handa, Russell Taylor, and Jin U. Kang; Proceedings of CLEO Conference, May 2009
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- “Biopsy site re-localisation based on the computation of epipolar lines from two previous endoscopic images.” Allain B, Hu M, Lovat LB, Cook R, Ourselin S, Hawkes D. Centre for Medical Image Computing, University College London
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# Thank you!

# Questions?