# Stabilized Adaptive Optics Imaging for Laser Microsurgery

### NIH NIBIB Image Guided Interventions Workshop

D. X. Hammer Physical Science Inc. Andover MA

Support by EB003111

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# **Program Objectives**

- Overall Program Goal
  - Design, construct, and test a prototype clinical imaging and irradiation system, based upon adaptive optics, retinal tracking, and ultrashort laser pulse-induced retinal damage mechanisms.

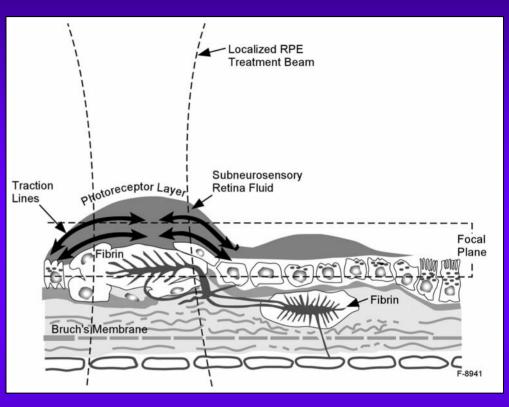
### Specific Program Objectives

- Design and construct an adaptive optics scanning laser ophthalmoscope (AOSLO).
- Integrate a retinal tracker into the AOSLO (TAOSLO).
- Characterize the TAOSLO imaging and tracking performance in human subject tests at PSI.
- Deliver and setup the TAOSLO for ultrashort pulse delivery at the Optical Radiation Branch (AFRL/HEDO, Brooks AFB TX) and test in an animal model.



# **Motivation and Clinical Significance**

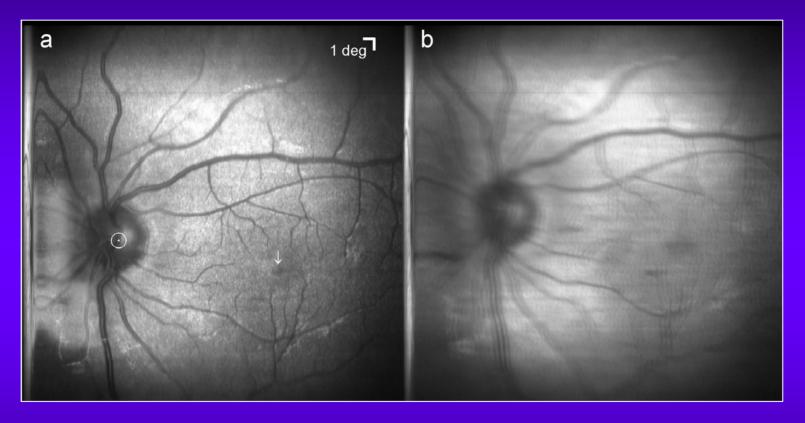
- Advances in diagnostic laser technologies have far outpaced advances in laser therapies (except for PDT)
- Retinal diseases
  - Age-related macular degeneration (AMD)
  - Diabetic retinopathy (DR)
  - Retinitus pigmentosa (RP)
  - Intraocular melanoma (IM)
- Potential therapies with the proposed system Early detection and treatment for:
  - Selective destruction of RPE with ultrashort pulses (fs-ns)
  - Destruction of feeder vessels in choroidal neovascularization (CNV) related to DR
  - Other potential targets: drusen, small tumors, microaneurysms



#### AMD retinal pathology



## Core Technology Retinal Tracking

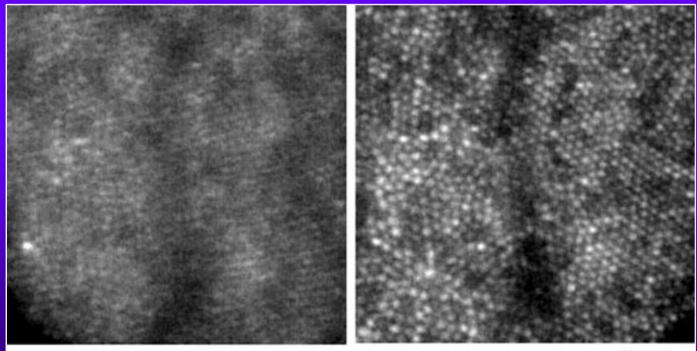


- PSI's retinal tracking technology
  - US Patents 5,767,941 and 5,943,115
  - Enables visualization, photonic analysis, and phototherapy of retinal structures with superior sensitivity and resolution
  - Absolutely required for precision laser retinal surgery



## Core Technology Adaptive Optics

- Correction of ocular aberrations by wavefront compensation & correction allows increased transverse resolution for several imaging technologies (e.g. SLO and OCT)
- For precision laser retinal surgery, AO is necessary to achieve a diffractionlimited spot at the retina



Cone mosaic imaged with and without wavefront compensation

Used with permission from Austin Roorda: http://www.opt.uh.edu /research/aroorda

Without Compensation

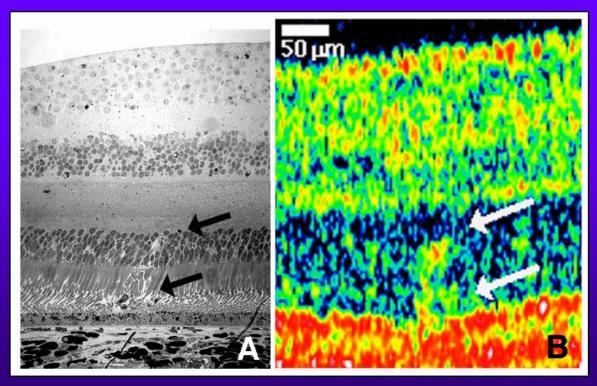
With Adaptive Compensation

5 arcmin



## Core Technology Ultrashort Pulse Laser Damage

- Non-linear mechanisms (primarily optical breakdown) mediate retinal damage from ultrashort pulses (< 10 ns).
- Ultrashort pulse damage is therefore characterized by
  - Low energy thresholds
  - Highly localized damage with little collateral damage
- Recent engineering advances are moving ultrashort pulse lasers closer to routine use in clinical systems (OCT, refractive surgery, etc.)

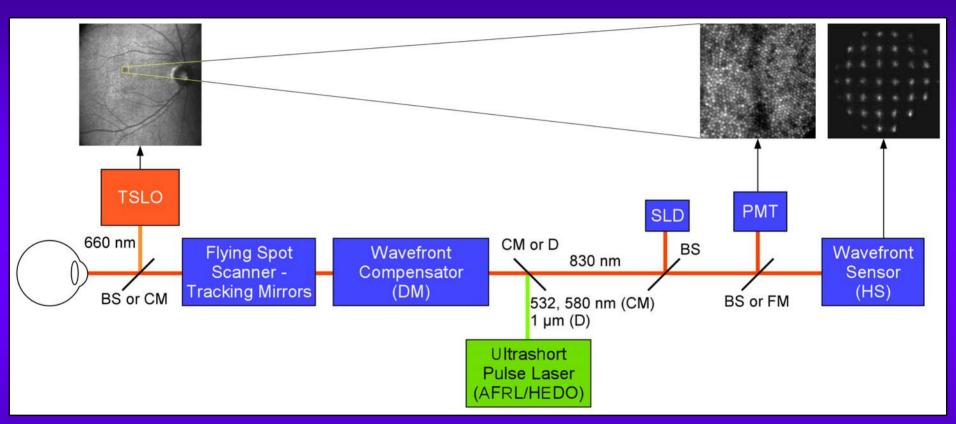


Histology and OCT image of RPE disruption from 3 ps pulses.

Roach et al. JBO, in press.



# System Overview



#### • Dichroic beamsplitter (D)

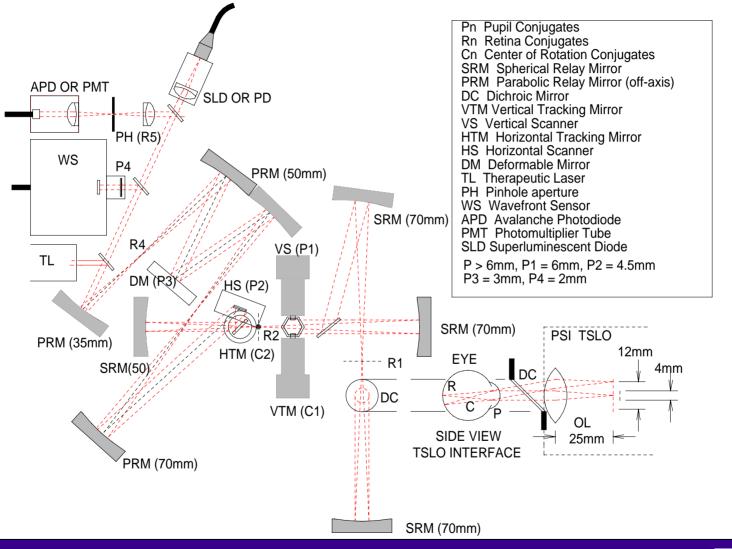
- 400-860 nm R > 95%
- 870-1100 nm T > 85%

#### • Cold mirror (CM)

- 400-700 nm R > 95 %
- 780-1250 nm T > 85%

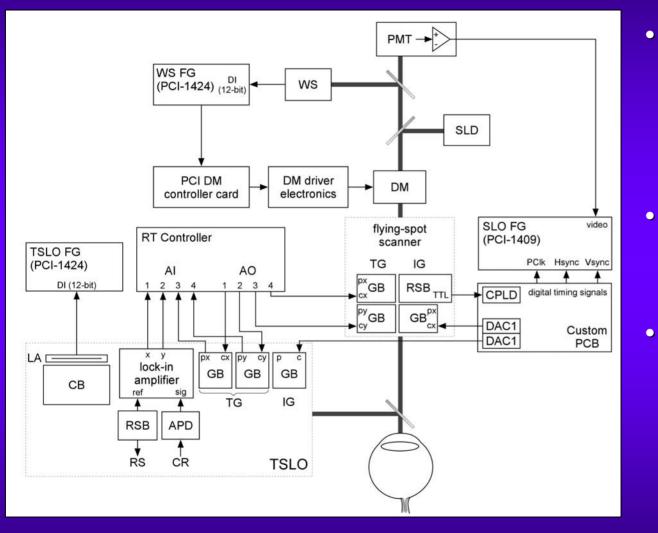


# **TAOSLO Optical Schematic**





# **TAOSLO Instrumentation**



- Custom PCB
  - LUT to linearize
    SLO image
    resonant scanner
  - Synchronize and drive vertical scanner
  - 3 framegrabbers (FG)
    - TSLO
    - Flying-spot SLO
    - WS
- RT controller
  - Retinal tracking bandwidth > 1 kHz
  - AO closed-loop bandwidth > 10 Hz



# **Research Plan and Acknowledgments**

### Research Plan

- Optical and instrumentation design complete
- System construction complete by Fall
- Human and animal subject testing in 2005
- Acknowledgments
  - Physical Sciences Inc.
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    - David Stolarski
  - Consulting support
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