

Lineal Confocal-OCT

Josep Malvehy

Hospital Clinic of Barcelona, Spain

Conflicts

SPEAKER: Almirall, BMS, ISDIN, La Roche Posay, Leo, Novartis, Pierre Fabre, Roche, Sanofi

HONORARIA OR CONSULTATIONS FEES : Almirall, BMS, Biofrontera, GSK, ISDIN, La Roche Posay, Leo, Novartis, Polychem

GRANTS & RESEARCH SUPPORT: Almirall, Amgen, BMS, Biofrontera, Canfield, Cantabria, Fotofinder,

GSK, ISDIN, La Roche Posay, Leo, Mavig, Nevisense, Novartis, Polychem, Roche, iTOBOs (EU Grant), Castle Biosciences, NelaCare, and SkylineDx, Amlo Bioscience

Spouse/partner: Almirall, Amgen, BMS, Biofrontera, Canfield, Cantabria, Fotofinder, GSK, ISDIN, La Roche Posay, Leo, Mavig, Nevisense, Novartis, Pierre Fabre, Polychem, Roche

Other support (please specify): Abbie (educational activities), Lilly (educational activities), Novartis

Co-founder of Diagnosis Dermatologica sl and Athena Care sl.



FOUNDING & COLLABORATIONS



New imaging technology in skin cancer



**IN VIVO CONFOCAL
MICROSCOPY**



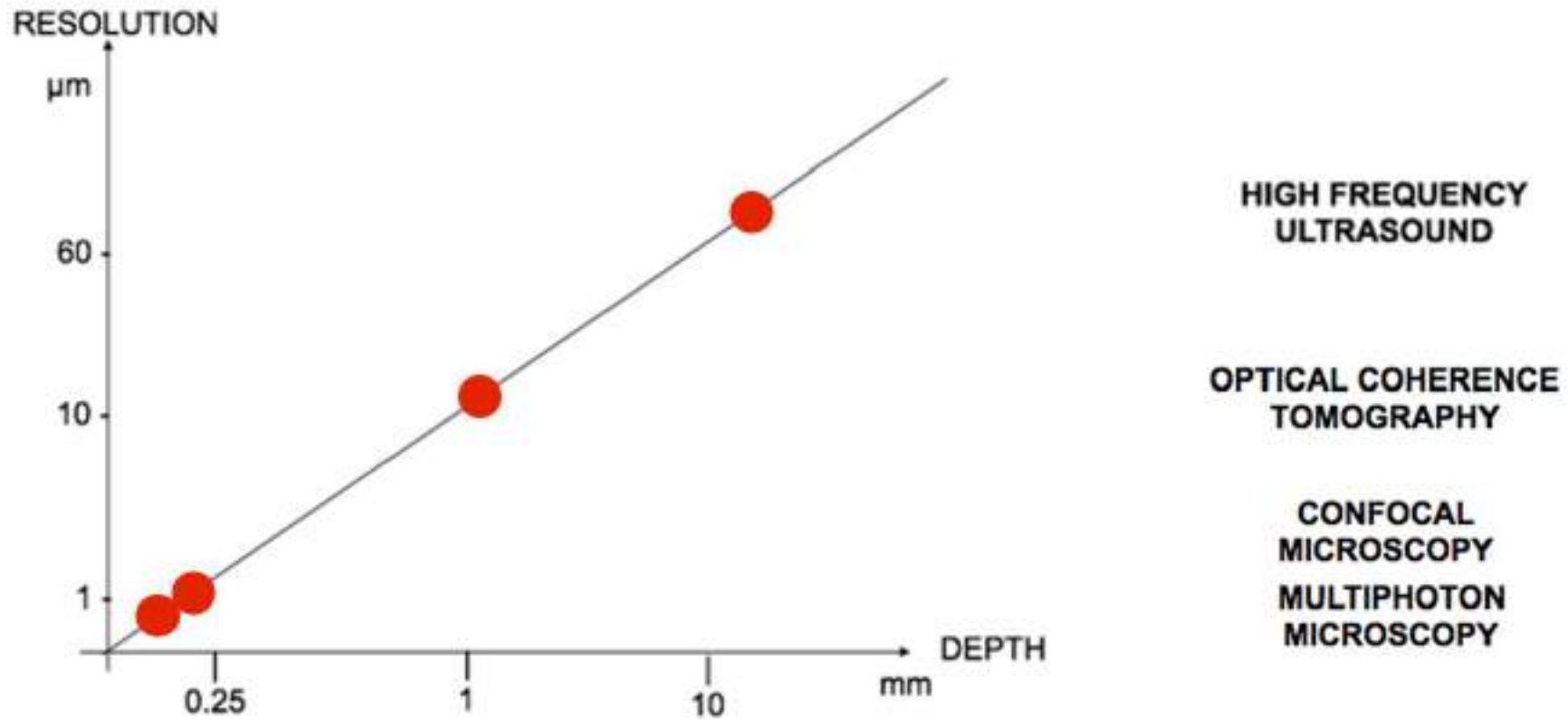
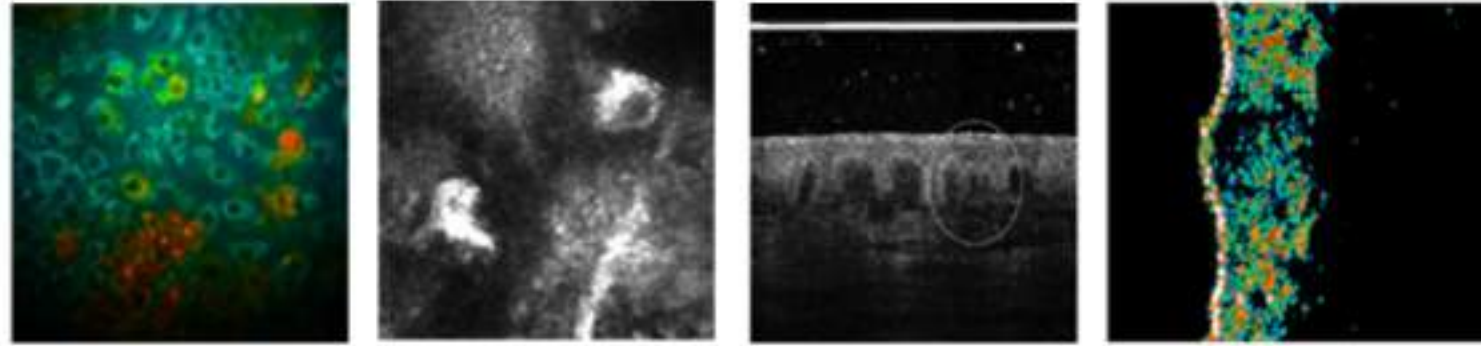
**MULTIPHOTON
MICROSCOPY**



**OPTICAL COHERENCE
TOMOGRAPHY**

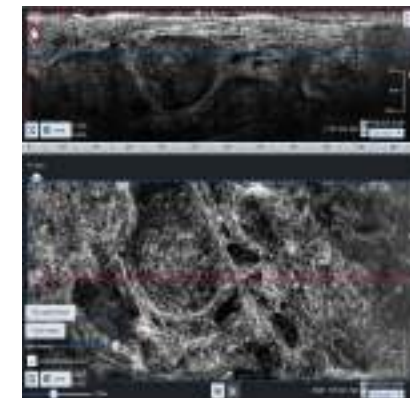
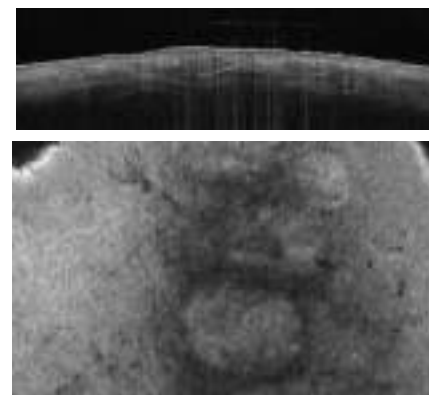
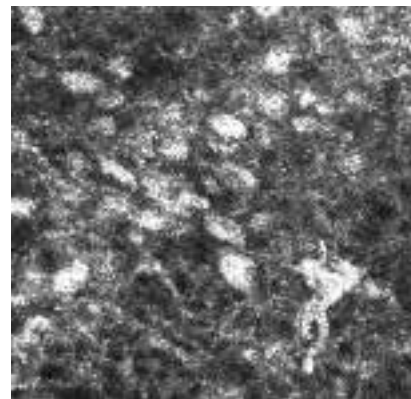


**HIGH FREQUENCY
ULTRASOUND**



Courtesy of Giovanni Pellacani

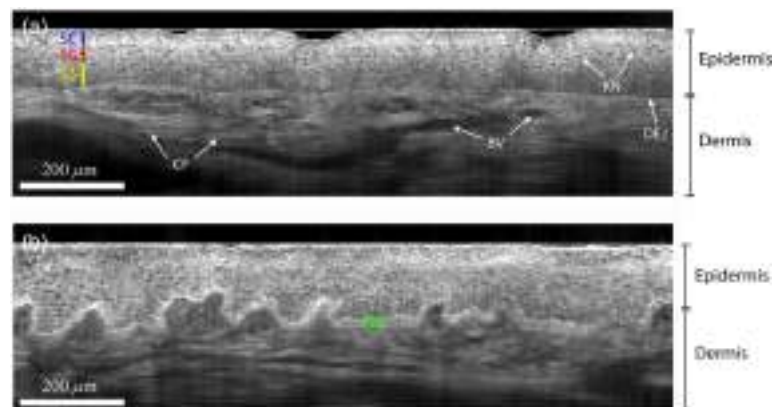
Technical characteristics of RCM and OCT microscopes with clinical applicability



	RCM	OCT	LF-OCT
Horizontal (en face)	Yes	Yes	Yes
Vertical (slice, cross-sectional)	No	Yes (3D)	Yes (3D)
Depth	250 μm	2000 μm	500 μm
Lateral resolution	1 μm	7.5 μm	1 μm
Axial resolution	3 μm	10 μm	1 μm
Cellular resolution	Yes	No	Yes
Time exam	1-5 min	1 min	1-5 min
Field of view	500x500 μm 750x750 μm Vivablocks 8x8 mm	6 x 6 mm	1,2 x 0,5 mm

Line-field confocal optical coherence tomography for high-resolution noninvasive imaging of skin tumors

Arnaud Dubois
Olivier Levecq
Hicham Azimani
David Siret
Anaïs Barut
Mariano Suppa
Véronique del Marmol
Josep Malvehy
Elisa Cinotti
Pietro Rubegni
Jean-Luc Perrot

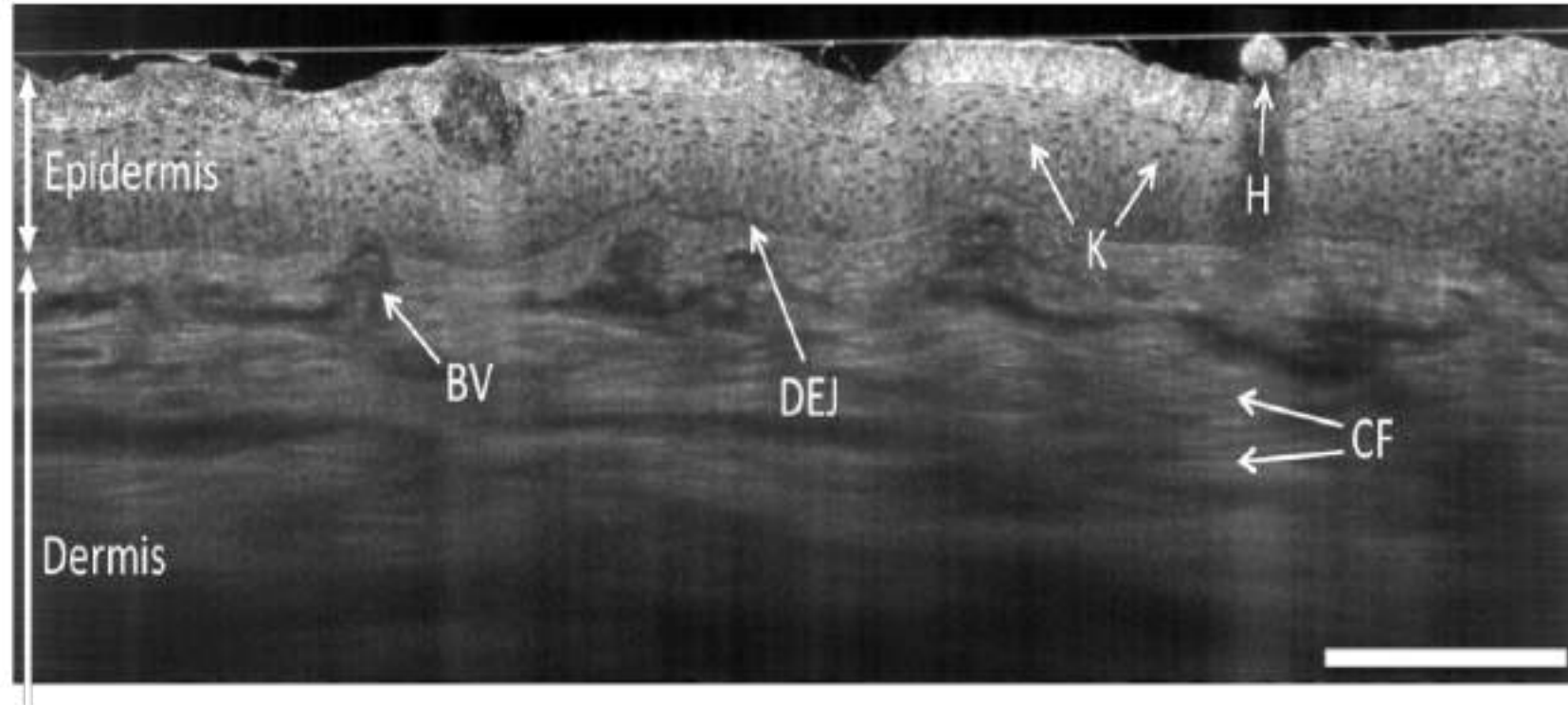


LC-OCT measures the echo-time delay and amplitude of light back scattered from cutaneous microstructures through low-coherence interferometry associated with confocal spatial filtering.



Arnaud Dubois, Olivier Levecq, Hicham Azimani, David Siret, Anaïs Barut, Mariano Suppa, Véronique del Marmol, Josep Malvehy, Elisa Cinotti, Pietro Rubegni, Jean-Luc Perrot, "Line-field confocal optical coherence tomography for high-resolution noninvasive imaging of skin tumors," *J. Biomed. Opt.* 23(10), 106007 (2018), doi: 10.1117/1.JBO.23.10.106007.

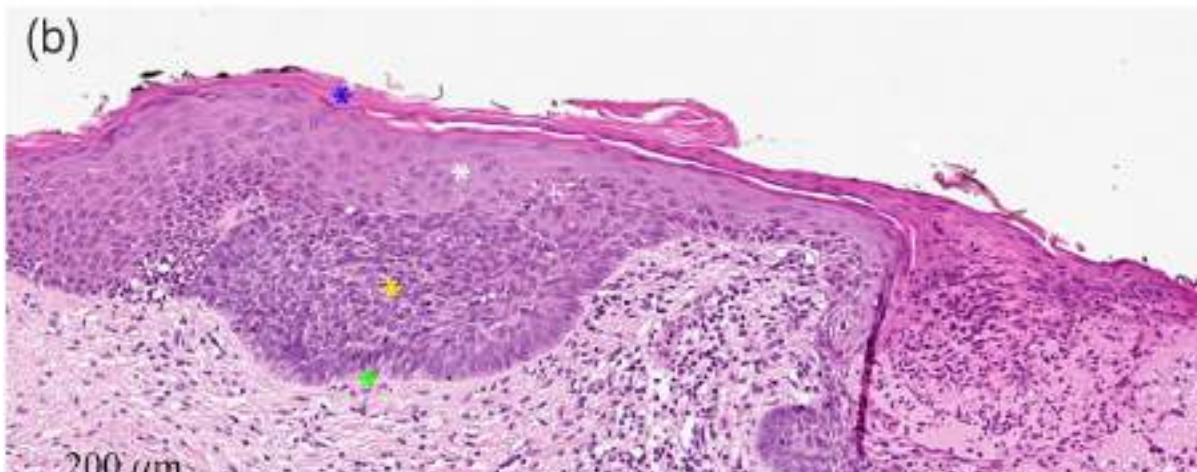
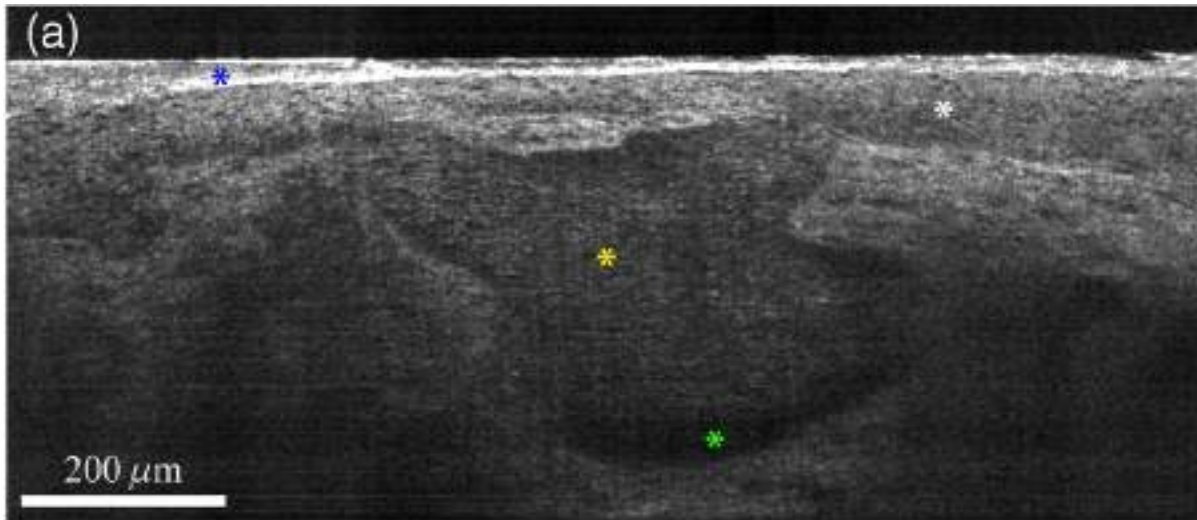
Line-field Confocal Optical Coherence Tomography (LC-OCT)



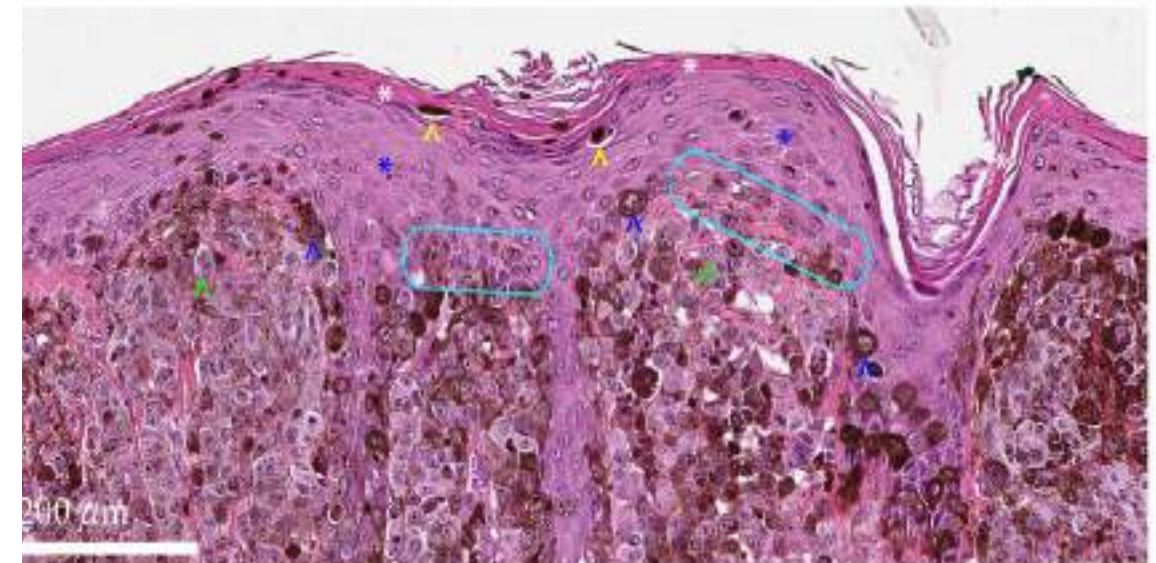
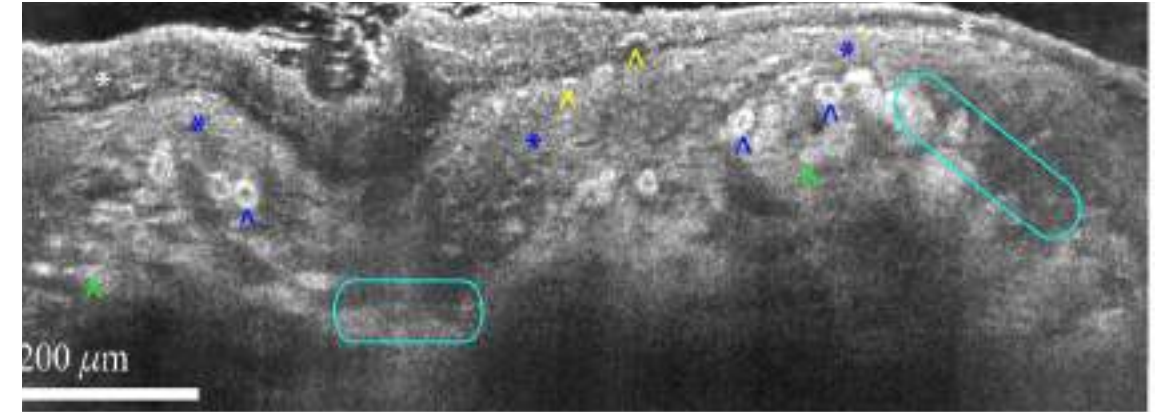
B-scan image of healthy human skin (back of the hand), obtained with OCTAV[®] (Scale bar: 200 μ m)

Line-field Confocal Optical Coherence Tomography (LC-OCT)

Basal cell carcinoma



Melanoma



Consortium for research in LC-OCT

Hôpital Erasme – ULB

Veronique del Marmol
Mariano Suppa
Jovanie Razafindrakoto
Florence Bourlond

Hôpital St Etienne

Jean Luc Perrot

Hosp.Clínic Barcelona

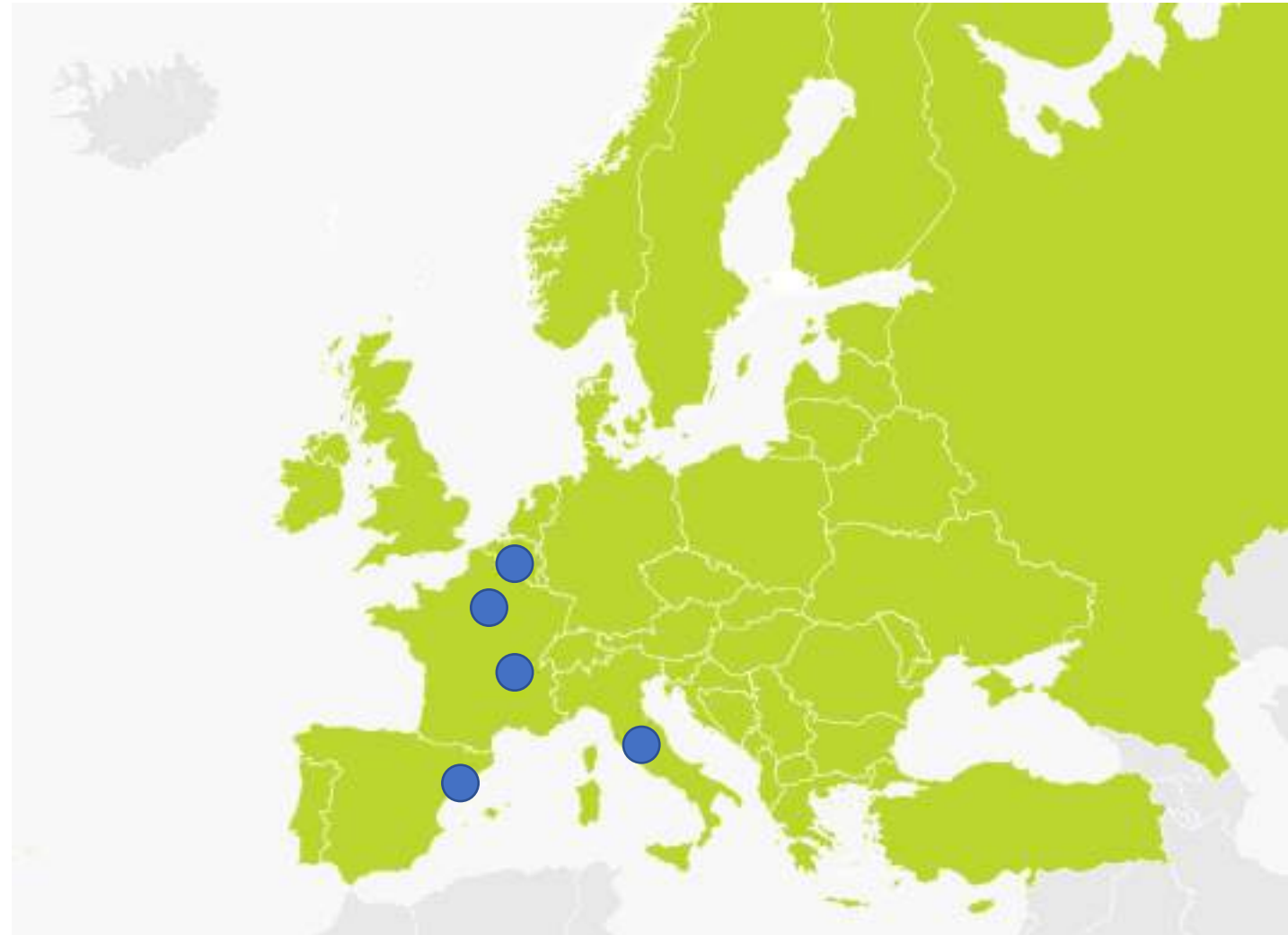
Josep Malvehy
Susana Puig
Javiera Pérez
Pau Roses

University of Siena, S. Maria alle Scotte Hospital

Pietro Rubegni
Elisa Cinotti
L. Tognetti

DAMAE

Maxime Cazalas
Clothilde Raoux
Nicolas Linard



Consortium for research in LF- OCT

DAMAE

Anaïs Barut, DAMAE Medical affairs
Maxime Cazalas, DAMAE, innovation manage
Nicolas Linard, Medical department DAMAE

Hôpital Erasme – ULB

Veronique del Marmol, Dermatology Department
Makiko Miyamoto, Dermatology Department
Mariano Suppa, Dermatology Department
Jovanie Razafindrakoto, Dermatology Department
Florence Bourlond, Dermatology Department

Hôpital St Etienne

Jean Luc Perrot, Dermatology Department

Hosp.Clínic Barcelona

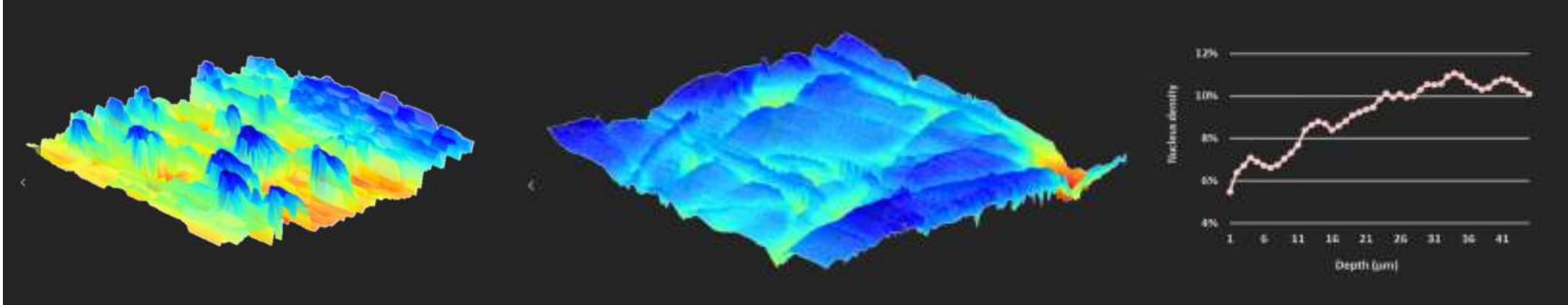
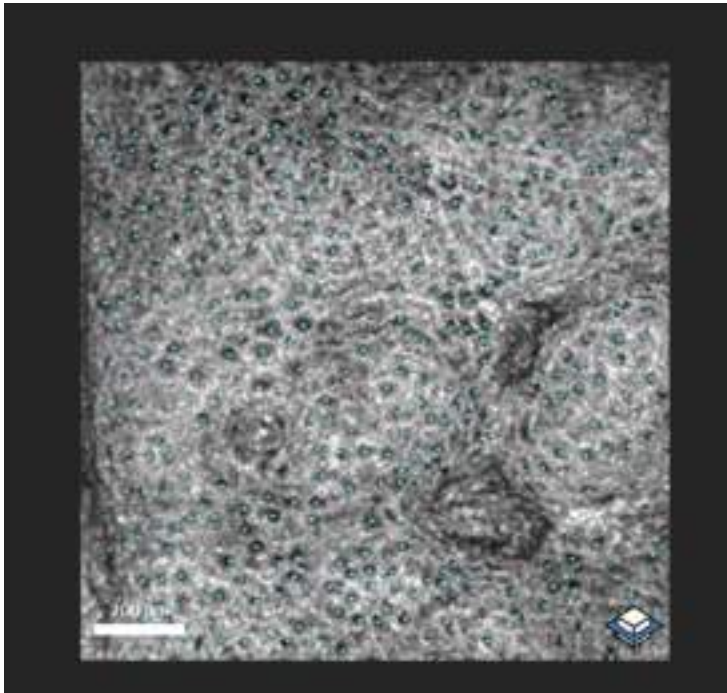
Josep Malvehy, Dermatology Department
Susana Puig, Dermatology Department
Alicia Barreiro, Dermatology Department
Jilliane Monnier, Dermatology Department
Javiera Pérez, Dermatology

University of Siena, S. Maria alle Scotte Hospital

Pietro Rubegni, Dermatology Department
Elisa Cinotti, Dermatology Department
L. Tognetti, Dermatology Department

- Description of Healthy skin
- Evaluation of features in BCC, AK, SCC
- Evaluation of melanocytic lesions
- Other tumours
- Inflammatory diseases
- Comparison and combination with other techniques

In vivo Line Field-OCT



In vivo characterization of healthy human skin with a novel, non-invasive imaging technique: line-field confocal optical coherence tomography

Methods

Seven body sites (back of the hand, forehead, cheek, nose, chest, forearm and back) were investigated.

An independent qualitative [cutaneous structures' description; visibility of keratinocytes' nuclei and dermal-epidermal junction (DEJ)] and quantitative [stratum corneum (SC)/epidermal thicknesses; height of dermal papillae] assessment of the LC-OCT images was performed.

Results

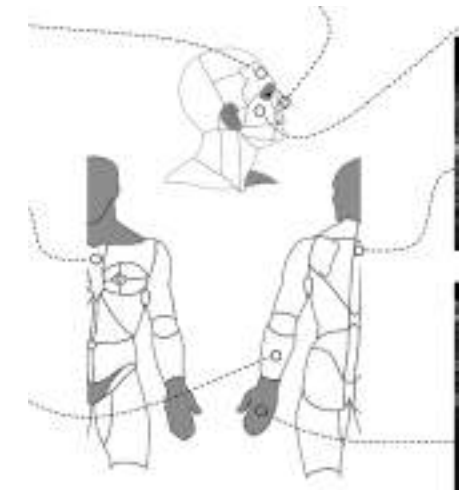
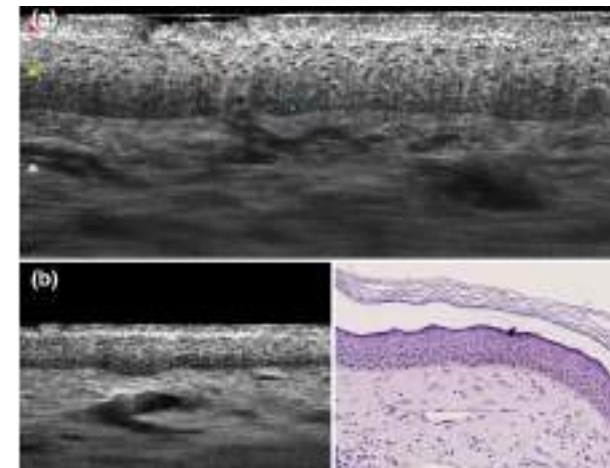
A total of 88 LC-OCT images were collected from 29 participants (20 females; nine males; mean age 25.9 years). Keratinocytes' nuclei and DEJ were visible in the totality of images. The different layers of the epidermis and the remaining cutaneous structures/findings were visualized. Body sites-related variability was detected for SC/epidermal thicknesses and height of dermal papillae. Inter-observer agreement was excellent (SC thickness), good-to-excellent (epidermal thickness) and moderate-to-good (papillae).

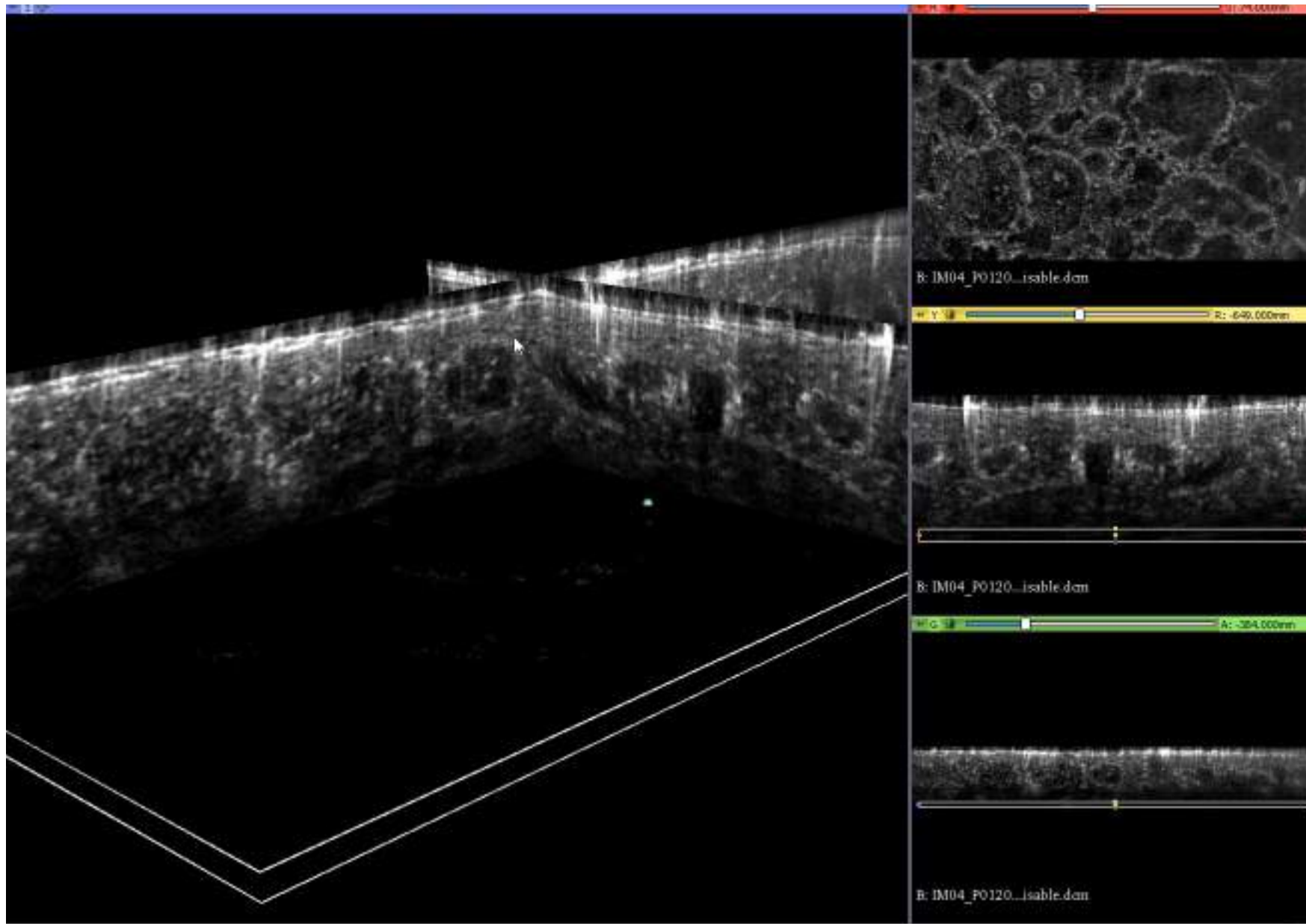
Conclusions

Line-field confocal-OCT provides non-invasive, real-time imaging of the skin in vivo with deep penetration and high resolution, enabling the visualization of single cells. The histology-like vertical view provides an easy way to recognize/measure different cutaneous structures/findings. LC-OCT appears as a promising technique for the examination of physiological/pathological skin.

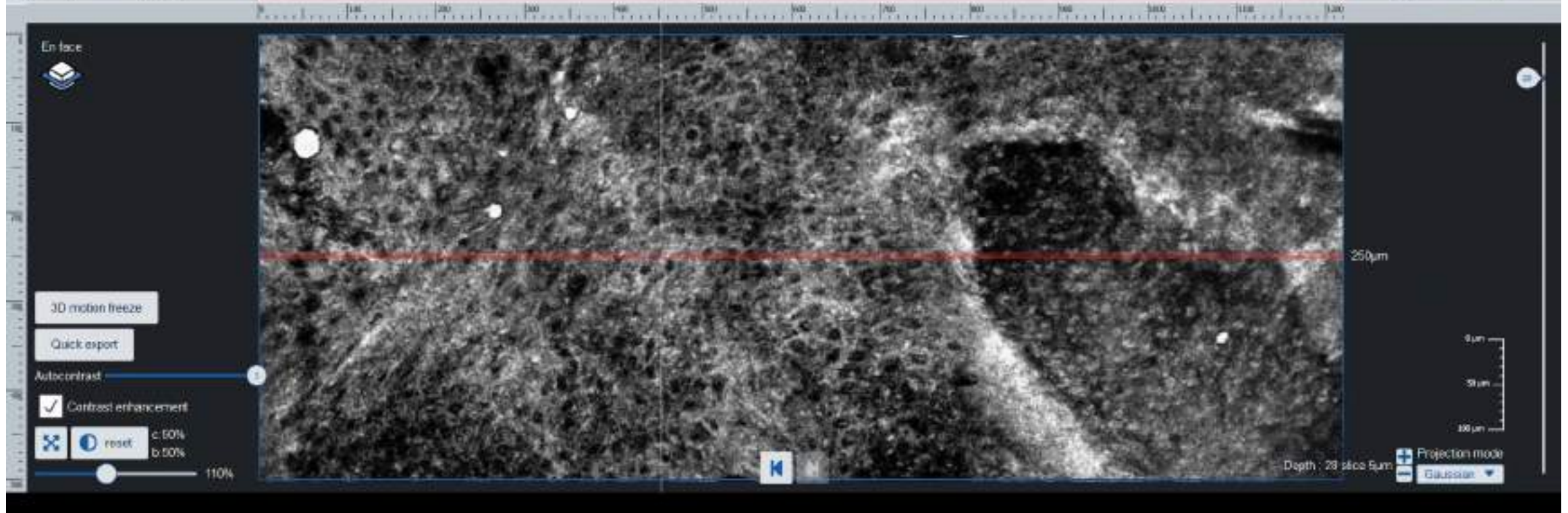
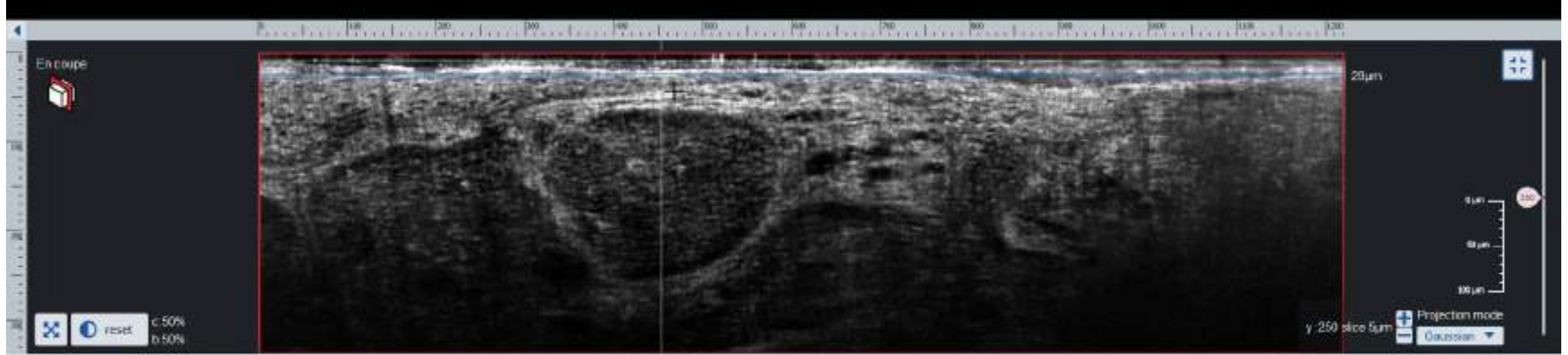
Table 1 Quantitative evaluation of the skin at different body sites by means of line-field confocal optical coherence tomography (LC-OCT) images

Body site	Stratum corneum thickness (%)	Epidermal thickness (%)	Height of dermal papillae (%)
Forehead	11.6 ± 1.7 (15)	81.1 ± 12.9 (16)	18.3 ± 21.5 (117)
Nose	10.4 ± 1.4 (14)	84.4 ± 15 (18)	—
Cheek	9 ± 1.1 (13)	58.7 ± 9.7 (16)	—
Chest	9.1 ± 1.2 (14)	54.3 ± 5.9 (11)	22.6 ± 12.9 (57)
Back	9.5 ± 1.3 (14)	59.9 ± 4.5 (8)	27.5 ± 7.2 (26)
Forearm (posterior)	12.7 ± 3.2 (25)	70.7 ± 12.8 (18)	7 ± 10.1 (144)
Hand (back)	29.5 ± 5.7 (19)	98.9 ± 15.6 (16)	18.7 ± 22.8 (122)

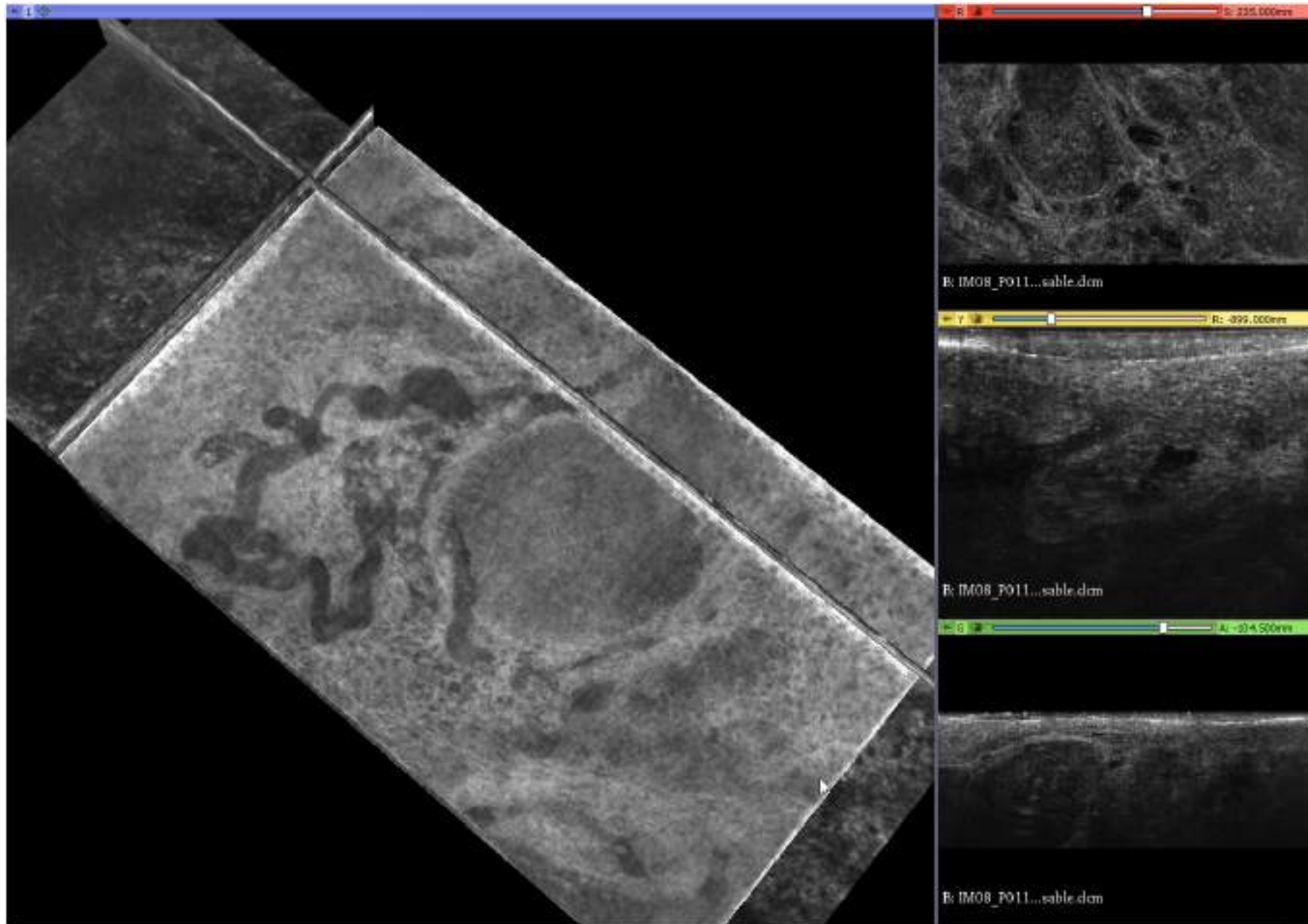




movie

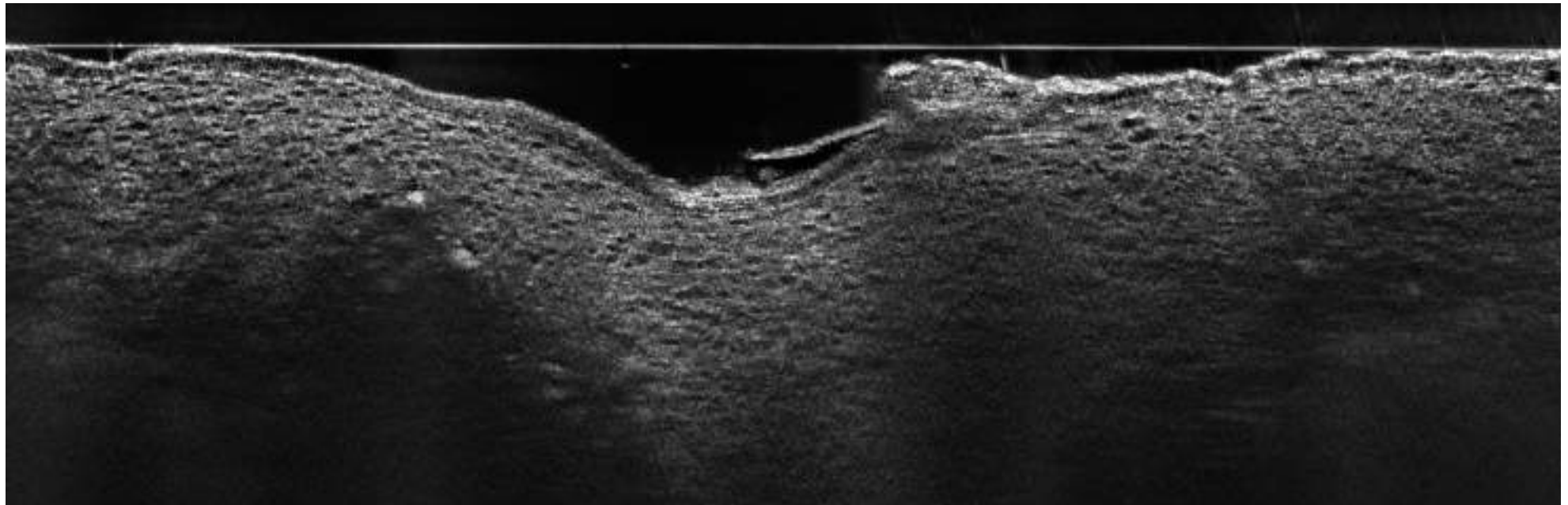
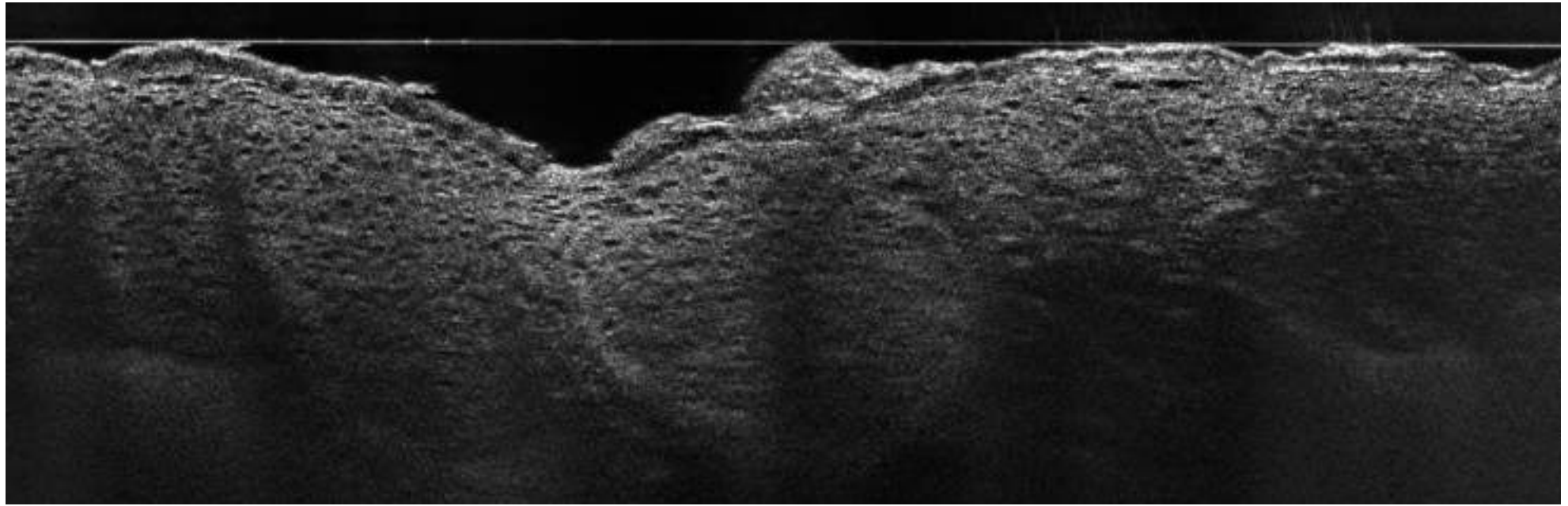


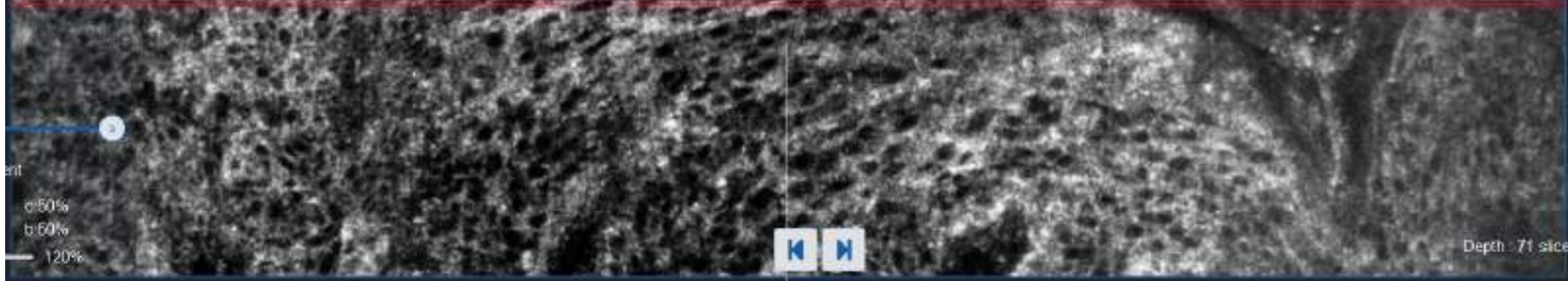
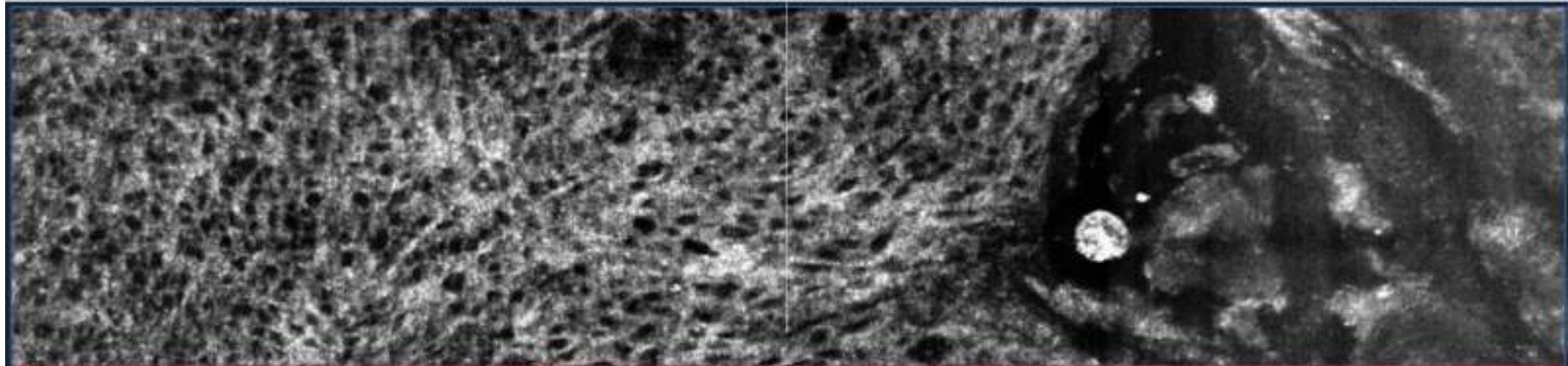
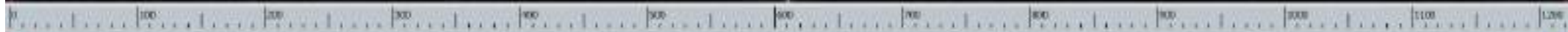
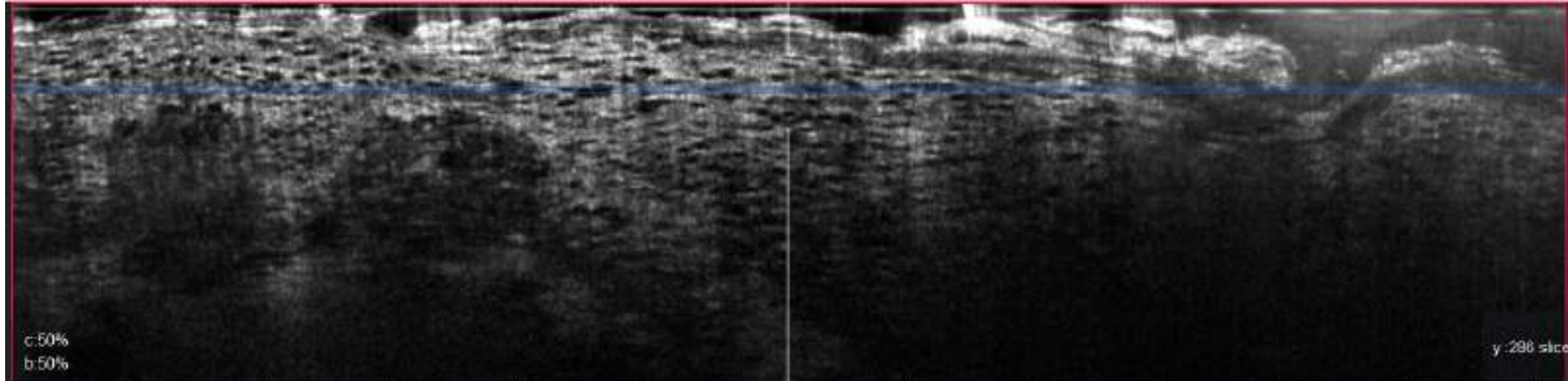
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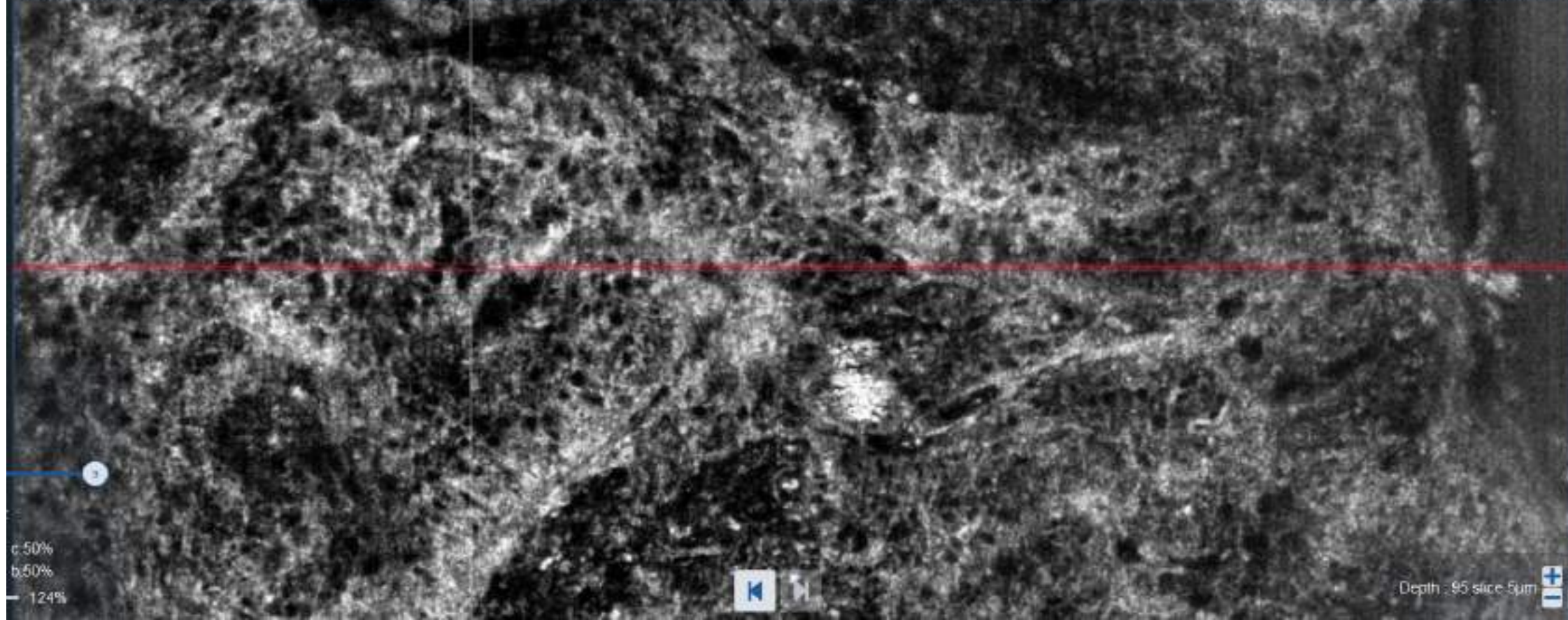
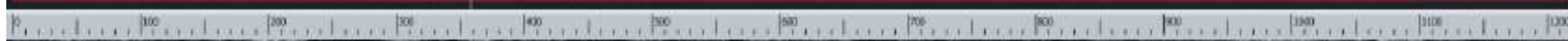
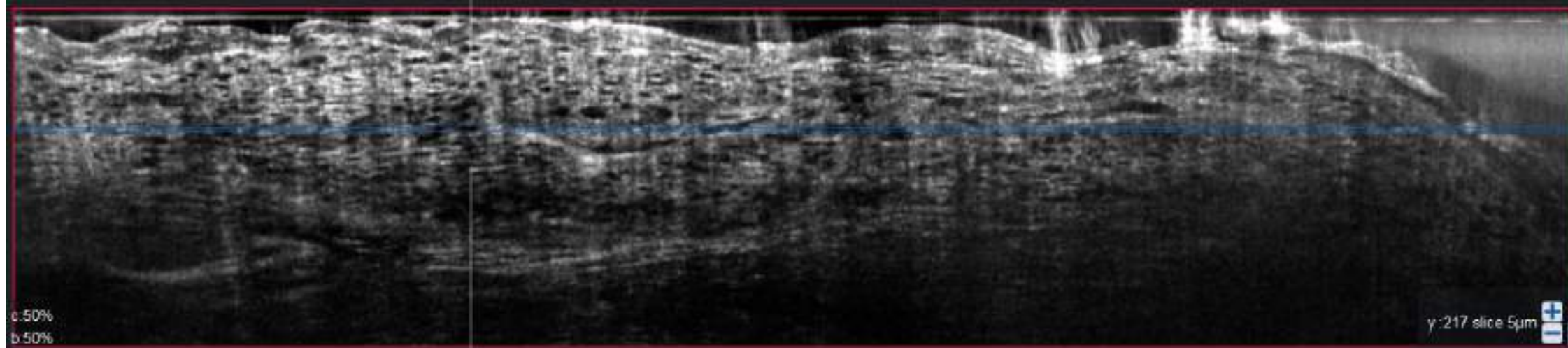


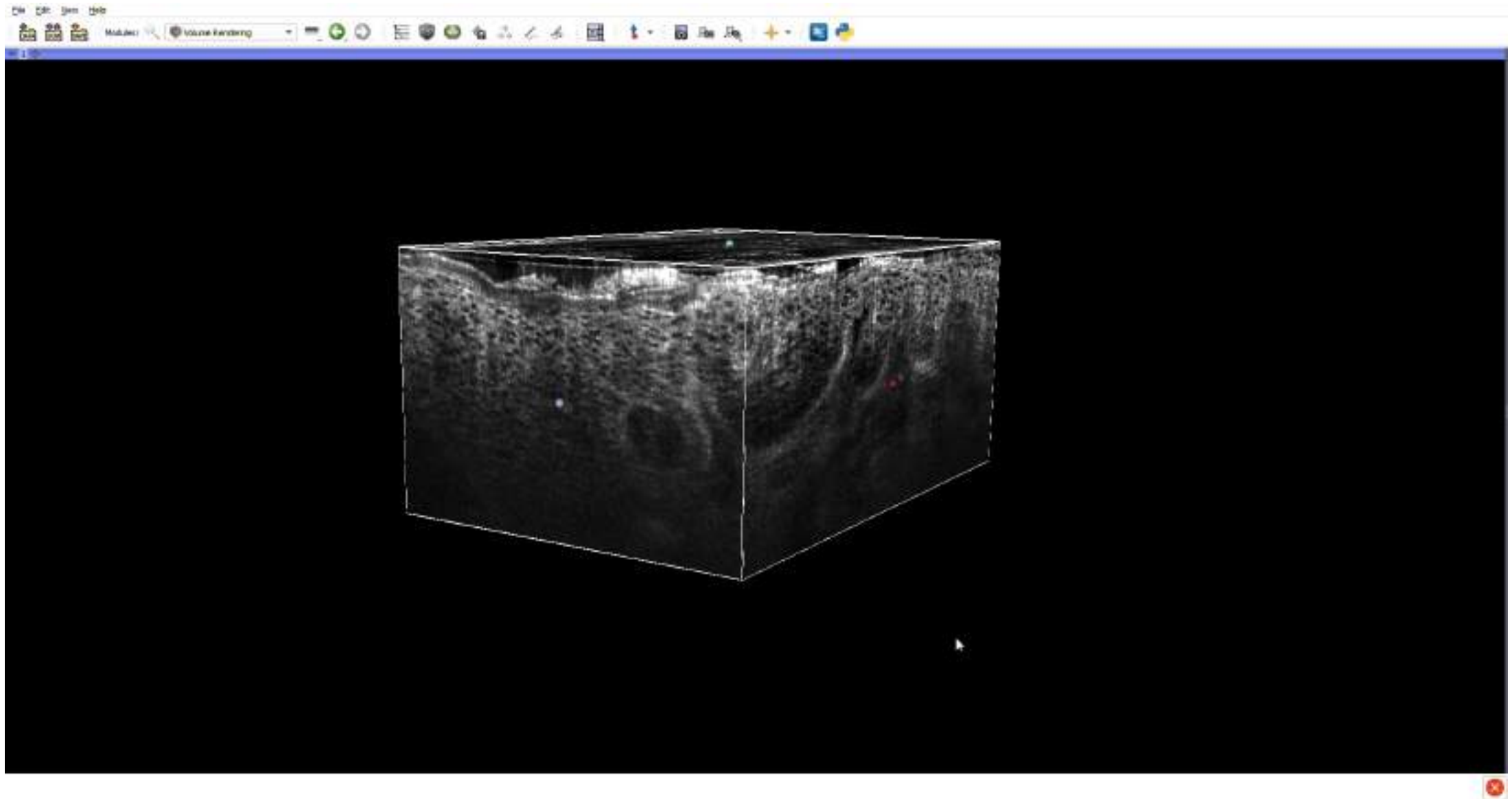
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P115, SCC









movie

Line-field confocal optical coherence tomography of basal cell carcinoma: a descriptive study

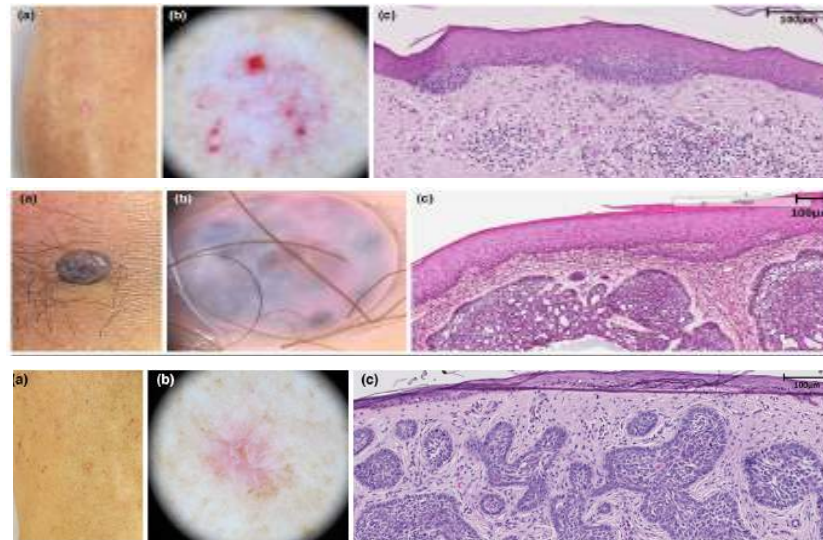
Table 1 Description of LC-OCT criteria for basal cell carcinoma (based on literature review and expert opinion)

LC-OCT criteria	Description	Interpretation
Lobule	Structure with variable shape, size and location within the dermis, characterized by a grey core usually surrounded by a darker rim	Aggregates of basaloïd cells growing into the dermis (BCC tumour islands)
Macrolobules	Much larger than the size of epidermis (>100 µm)	Large aggregates of basaloïd cells (>100 µm)
Microlobules	Equal or smaller than the size of epidermis (<100 µm)	Small aggregates of basaloïd cells (<100 µm)
Millefeuille pattern	Specific LC-OCT pattern characterized by a grey, laminated structure at the core of the BCC lobule, orientated along the horizontal plane. It resembles the pattern seen in the eponymous French delicacy <i>millefeuille</i>	Dense cellularity orientated along the same axis within the tumour island, composed of basaloïd cells, immune cells, apoptotic bodies and mitotic figures
Clefting	Dark rim surrounding the core of the lobule	Peritumoral mucin deposition
Bright rim	Outer rim surrounding the lobule characterized by a brighter colour than the stroma	Compression/alteration of the collagen fibres of the stroma by the tumour island (mass effect and tumour-stroma interaction)
Triad of colours	The simultaneous presence of inner lamination, middle clefting and outer bright rim gives rise to a cockade aspect, characterized by three colours (grey, black and white, respectively)	Classic appearance of a BCC tumour island, especially seen in nBCC
Lobule location		
Separated from epidermis	Absence of lobule connection with the epidermis	Tumour island not connected to the epidermis: it points to other subtypes than sBCC
Connected to epidermis	Presence of lobule connection with the epidermis	Tumour island connected to the epidermis: it points to sBCC subtype
Lobule morphology	Various morphologies can be encountered: <i>round, elongated/ovoid, hemispheric</i> (usually leaning towards the epidermis), <i>branched</i> (lobule dividing into one or more subdivisions with progressive loss of contour definition) and <i>polymorphic</i> (simultaneous presence of two or more morphologies)	Various morphologies of the tumour islands may point to particular BCC subtypes (e.g. hemispheric morphology suggests sBCC; branched morphology suggests iBCC)
Blood vessels	Well-defined, hypo-reflective structures of various shape/size localized within the dermis and especially next to lobules. In the LC-OCT <i>in vivo</i> acquisition modality and videos, hyper-reflective elements can be seen flowing within them	Dermal blood vessels, particularly prominent when next to tumour islands (neo-angiogenesis); blood cell flow can be visualized within them
Stroma		
Stretching	The dermis surrounding the lobules appears stretched, i.e. polarized in one direction	Distortion of the collagen/elastic fibres of the stroma due to the presence of tumour islands (mass effect and tumour-stroma interaction). It is more common in BCC subtypes other than sBCC
Brightness	The dermis surrounding the lobules appears whiter (brighter) than the overlying epidermis	Increased reflectivity of the stroma due to the presence of tumour islands (mass effect and tumour-stroma interaction). It is more common in BCC subtypes other than sBCC
Epidermal changes		
Parakeratosis	Dark little roundish structures in the upper layer of the epidermis	Nucleated keratinocytes in the stratum corneum
Disorganized epidermis	Variability of size and shape of the keratinocytes' nuclei within a particular layer of the epidermis	Pleomorphism in the epidermis
Disrupted dermal-epidermal junction	Loss of a clear separation between the epidermis and the dermis	It may be related to the presence of hemispheric lobules leaning towards the epidermis or the loss of its visibility due to ulceration, crusts or artefacts
Bright cells within epidermis/lobules	Hyper-reflective structures within the epidermis and/or within the lobules. They can have various shape/size: small, large or dendritic (tree-like shape or spindle shape)	Immunologically competent skin cells (Langerhans cells and granulocytes) and activated melanocytes in pigmented BCCs
Other criteria		
Erosion/Ulceration	Partial/complete loss of continuity of the epidermis (without/with involvement of the DEJ)	Partial/complete loss of the epidermis (without/with involvement of the basal membrane)
Crust	Accumulation of hyper- and hypo-reflective structures overlying the epidermis	Dried material (sebum, pus, blood, serum) usually mixed with epithelial debris, at the surface of the lesion

Table 2 Characteristics of the basal cell carcinomas included in the study

	Overall	Head/neck	Trunk	Upper extremities	Lower extremities
Pure BCC subtypes					
Superficial	19 (21.4)	7 (13.7)	5 (23.8)	4 (80.0)	3 (37.5)
Nodular	31 (34.8)	17 (33.3)	8 (38.1)	0 (0)	2 (25.0)
Infiltrative	16 (18.0)	9 (17.7)	5 (23.8)	0 (0)	2 (25.0)
Mixed BCC subtypes					
Superficial and infiltrative	8 (9.0)	6 (11.8)	2 (9.5)	0 (0)	0 (0)
Superficial and nodular	5 (5.6)	4 (7.8)	1 (4.8)	0 (0)	0 (0)
Nodular and infiltrative	7 (7.9)	6 (11.8)	0 (0)	1 (20.0)	0 (0)
Superficial, nodular and infiltrative	1 (1.1)	1 (2.0)	0 (0)	0 (0)	0 (0)
Metatypical	1 (1.1)	0 (0)	0 (0)	0 (0)	1 (12.5)
Fibroepithelioma of pinkus	1 (1.1)	1 (2.0)	0 (0)	0 (0)	0 (0)
Total	89	51	21	5	8

N (%) displayed in each box. Numbers do not always add up to the total due to missing values. BCC, basal cell carcinoma.



Suppa M, Fontaine M, Dejonckheere G, Cinotti E, Yélamos O, Diet G, Tognetti L, Miyamoto M, Orte Cano C, Perez-Anker J, Panagiotou V, Trepant AL, Monnier J, Berot V, Puig S, Rubegni P, Malveyh J, Perrot JL, Del Marmol V. Line-field confocal optical coherence tomography of basal cell carcinoma: a descriptive study. *J Eur Acad Dermatol Venereol*. 2020 Dec 7.

Line-field confocal optical coherence tomography of basal cell carcinoma: a descriptive study

Table 3 Distribution of LC-OCT criteria overall and according to BCC subtype

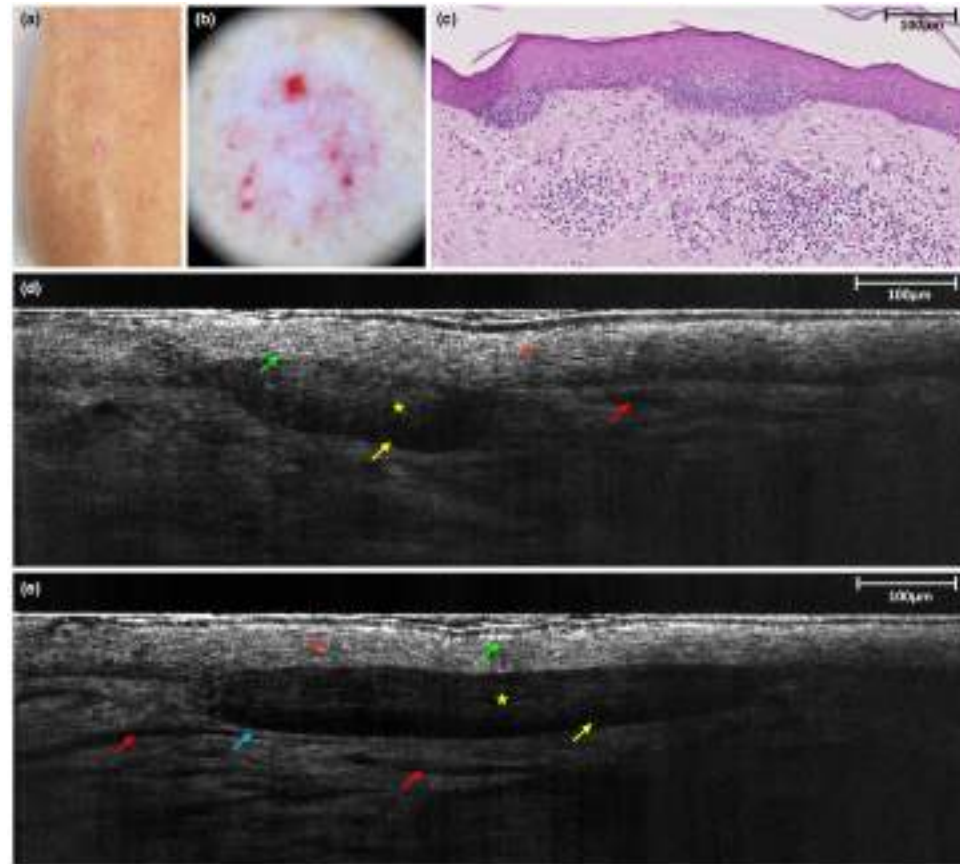
	A. Overall	B. According to BCC subtype			P-value
	(n = 89)	sBCC (n = 19)	nBCC (n = 31)	iBCC (n = 16)	
Lobule	88 (98.9)	19 (100)	30 (96.8)	16 (100)	0.56
Lobule size					
Macrolobules	73 (82.0)	9 (47.4)	29 (93.5)	14 (87.5)	<0.001
Microlobules	49 (55.1)	14 (73.7)	12 (38.7)	10 (62.5)	0.04
Lobule composition					
Lamination	75 (84.3)	14 (73.7)	29 (93.5)	14 (87.5)	0.14
Clefting	82 (92.1)	18 (94.7)	29 (93.5)	15 (93.8)	0.99
Bright rim	66 (74.2)	9 (47.4)	27 (87.1)	14 (87.5)	0.003
Triad of colours	56 (62.9)	5 (26.3)	24 (77.4)	12 (75.0)	0.001
Lobule location					
Separated from epidermis	68 (76.4)	7 (36.8)	28 (90.3)	15 (93.8)	<0.001
Connected to epidermis	57 (64.0)	19 (100.0)	15 (48.4)	10 (62.5)	0.001
Lobule morphology					
Round	42 (47.2)	5 (26.3)	16 (51.6)	10 (62.5)	0.08
Elongated	56 (62.9)	6 (31.6)	24 (77.4)	11 (68.8)	0.004
Hemispheric	23 (25.8)	12 (63.2)	5 (16.1)	1 (6.3)	<0.001
Branched	25 (28.1)	3 (15.8)	9 (29.0)	9 (56.3)	0.03
Polymorphic	11 (12.4)	2 (10.5)	4 (12.9)	2 (12.5)	0.97
Blood vessels	84 (94.4)	16 (84.2)	31 (100)	16 (100)	0.02
Stroma involvement					
Stretching	68 (76.4)	8 (42.1)	27 (87.1)	14 (87.5)	0.001
Brightness	41 (46.1)	4 (21.1)	17 (54.8)	9 (56.3)	0.04
Epidermal changes					
Parakeratosis	17 (19.1)	1 (5.3)	9 (29.0)	1 (6.3)	0.04
Disorganized epidermis	17 (19.1)	4 (21.1)	7 (22.6)	4 (25.0)	0.96
Disrupted DEJ	57 (64.0)	15 (78.9)	16 (51.6)	11 (68.8)	0.13
Bright cells within epidermis					
Small bright cell	86 (96.6)	19 (100.0)	30 (96.8)	15 (93.8)	0.56
Large bright cell	9 (10.1)	0 (0.0)	3 (9.7)	3 (18.8)	0.16
Dendritic bright cell	4 (4.5)	1 (5.3)	0 (0.0)	1 (6.3)	0.40
Bright cells within lobules					
Small bright cell	78 (87.6)	15 (78.9)	29 (93.5)	14 (87.5)	0.31
Large bright cell	21 (23.6)	1 (5.3)	12 (38.7)	5 (31.3)	0.03
Dendritic bright cell	9 (10.1)	0 (0.0)	6 (19.4)	2 (12.5)	0.13
Other					
Ulceration	24 (27.0)	2 (10.5)	11 (35.5)	4 (25.0)	0.15
Cysts	10 (11.2)	2 (10.5)	3 (9.7)	1 (6.3)	0.90
Crust	28 (31.5)	4 (21.1)	12 (38.7)	5 (31.3)	0.43

N (%) displayed in each box, unless otherwise stated.

P-values were calculated by means of Pearson's chi-squared test.

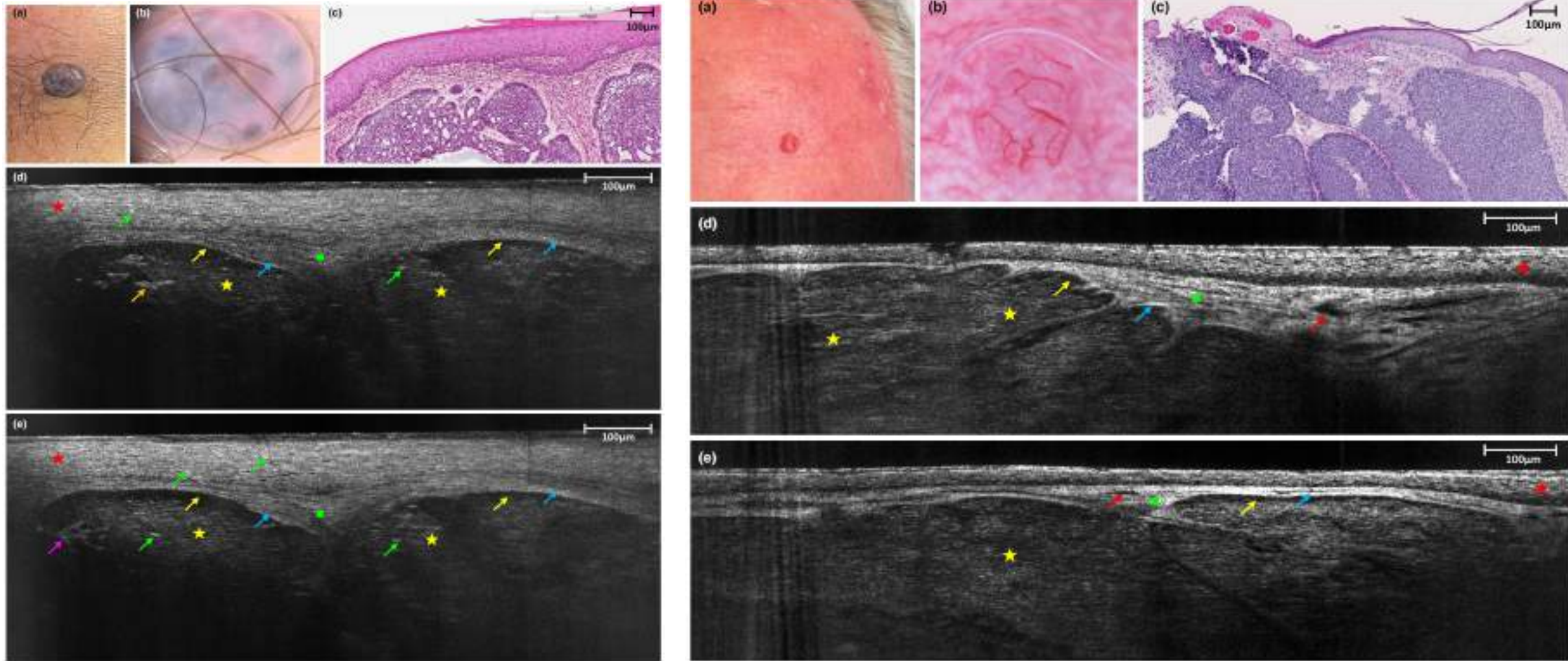
Significant findings are highlighted in bold.

DEJ, dermal-epidermal junction; iBCC, infiltrative basal cell carcinoma; nBCC, nodular basal cell carcinoma; sBCC, superficial basal cell carcinoma.



Suppa M, Fontaine M, Dejonckheere G, Cinotti E, Yélamos O, Diet G, Tognetti L, Miyamoto M, Orte Cano C, Perez-Anker J, Panagiotou V, Trepant AL, Monnier J, Berot V, Puig S, Rubegni P, Malvehy J, Perrot JL, Del Marmol V. Line-field confocal optical coherence tomography of basal cell carcinoma: a descriptive study. J Eur Acad Dermatol Venereol. 2020 Dec 7.

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Suppa M, Fontaine M, Dejonckheere G, Cinotti E, Yélamos O, Diet G, Tognetti L, Miyamoto M, Orte Cano C, Perez-Anker J, Panagiotou V, Trepant AL, Monnier J, Berot V, Puig S, Rubegni P, Malvehy J, Perrot JL, Del Marmol V. Line-field confocal optical coherence tomography of basal cell carcinoma: a descriptive study. *J Eur Acad Dermatol Venereol*. 2020 Dec 7.

Line-field confocal optical coherence tomography of basal cell carcinoma: a descriptive study

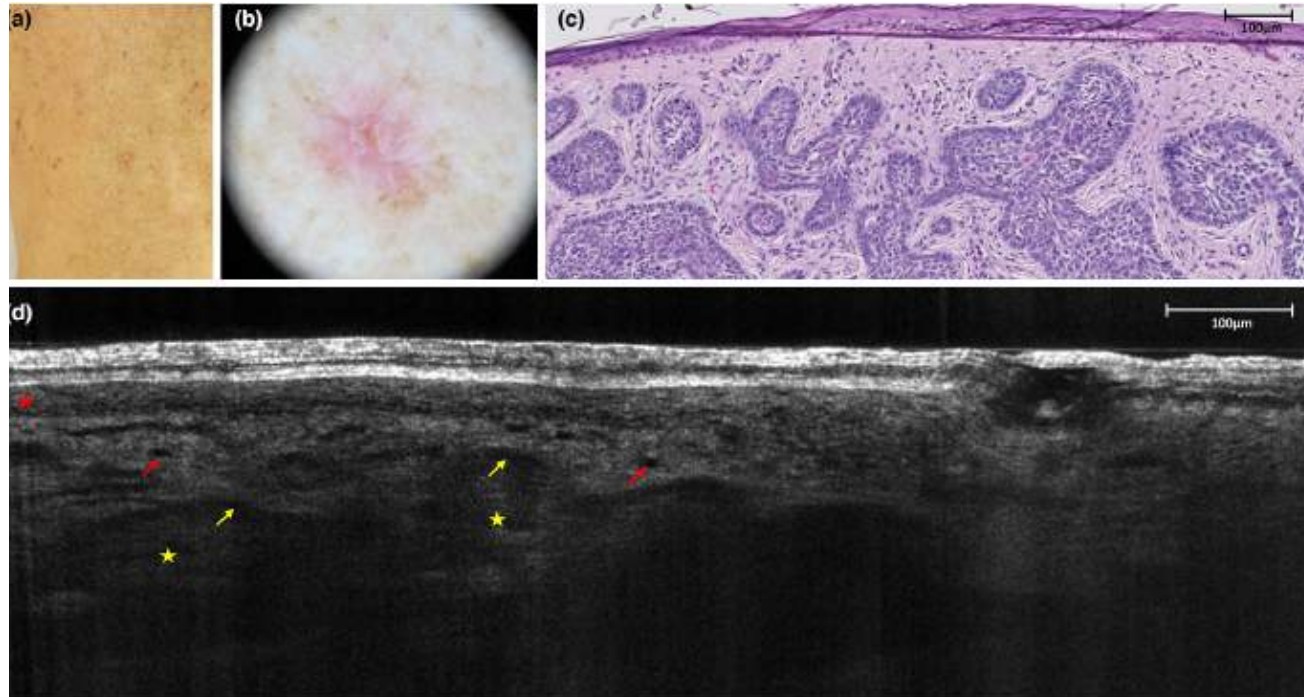
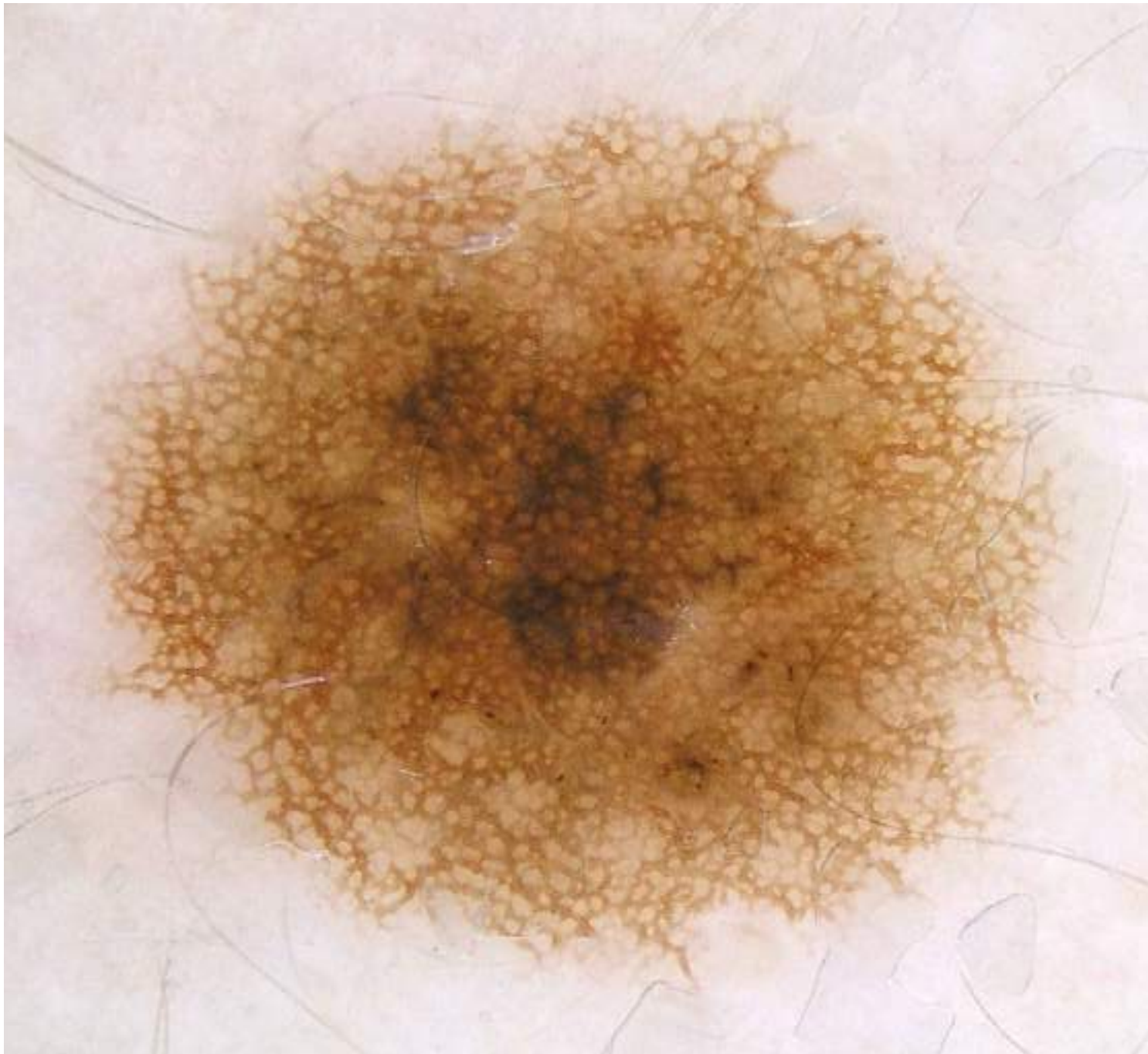


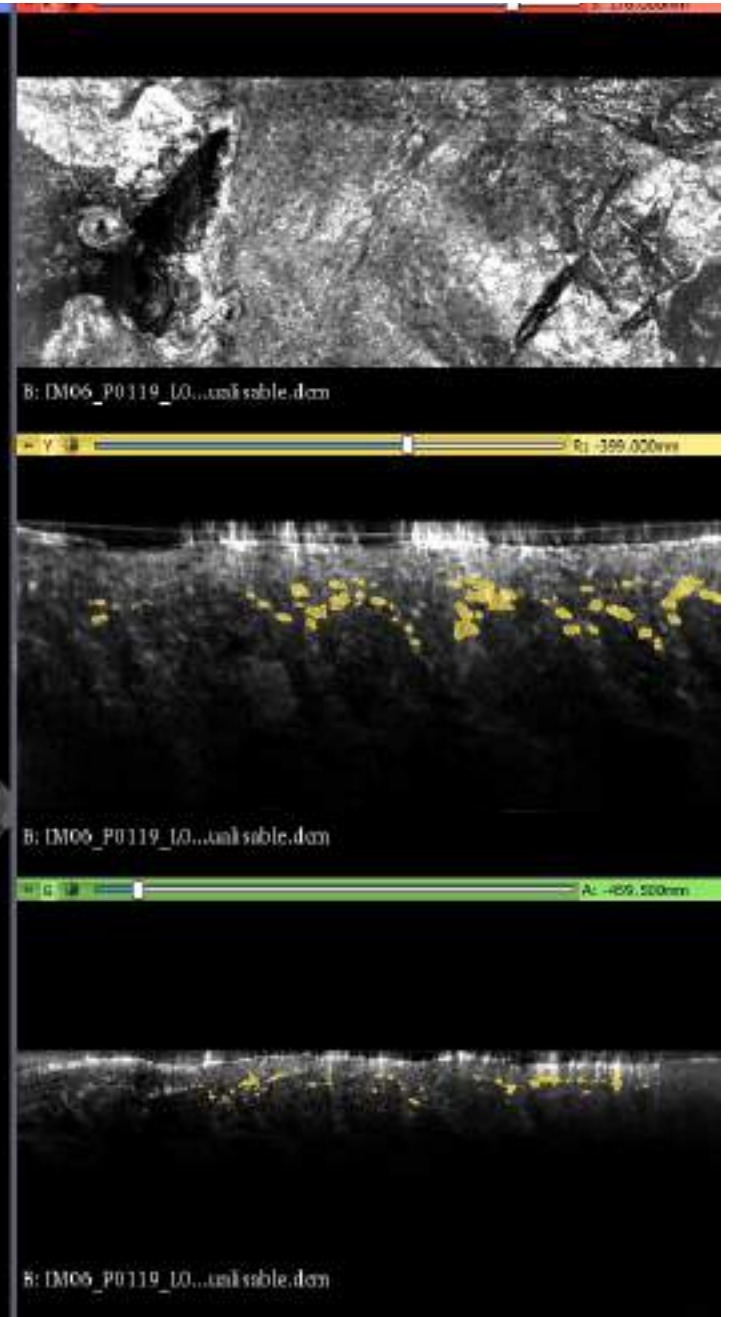
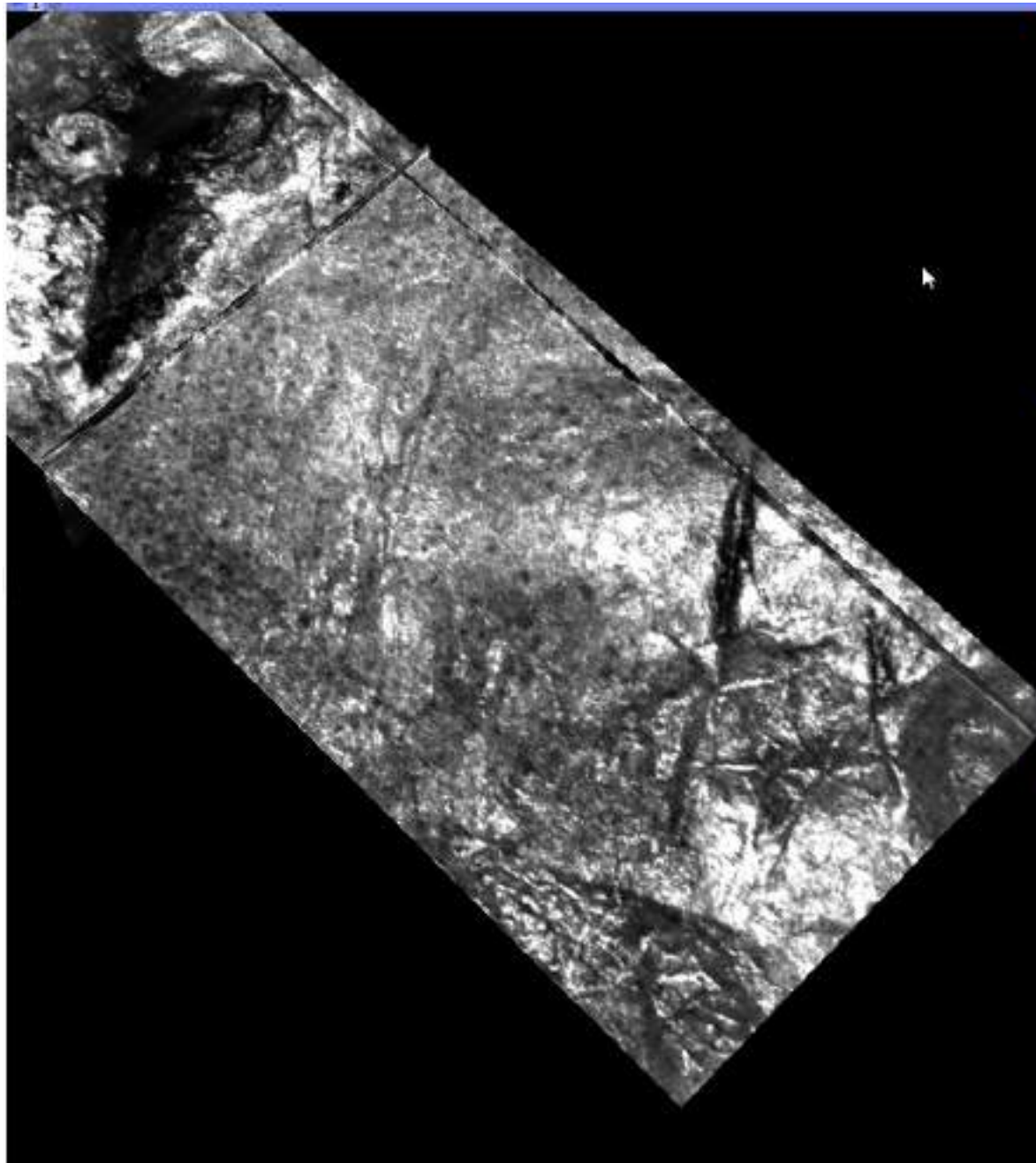
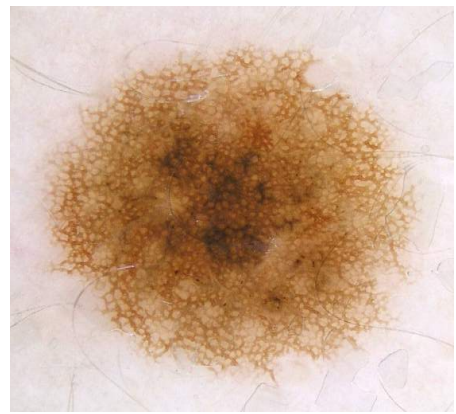
Table 4 Independent LC-OCT predictors of each BCC subtype

	OR (95% CI)	P-value
Superficial BCC		
Hemispheric lobule(s)	12.60 (2.10–75.57)	0.006
Lobule(s) separated from epidermis	0.19 (0.04–0.93)	0.04
Stretching of the stroma	0.09 (0.01–0.54)	0.008
Nodular BCC		
Macrolobule(s)	9.44 (1.66–53.65)	0.01
Lobule(s) connected to epidermis	0.16 (0.05–0.57)	0.005
Infiltrative BCC		
Branched lobule(s)	4.07 (1.25–13.27)	0.02

P119,
IM6



P119,
IM6



movie

P116, L1

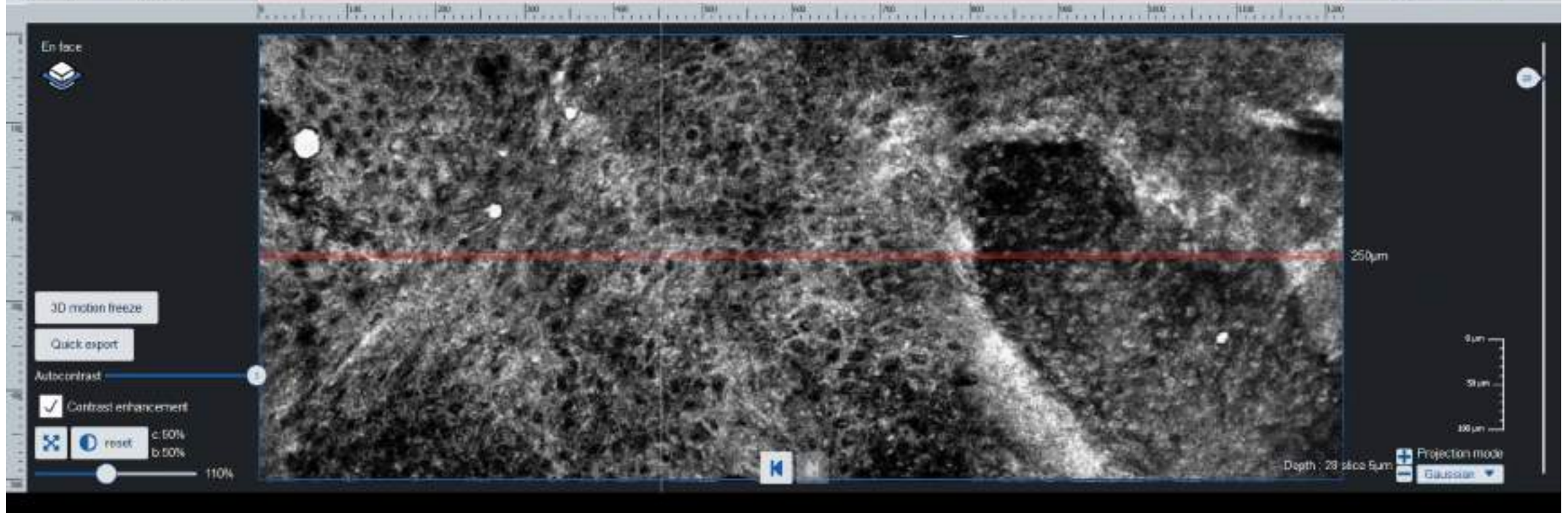
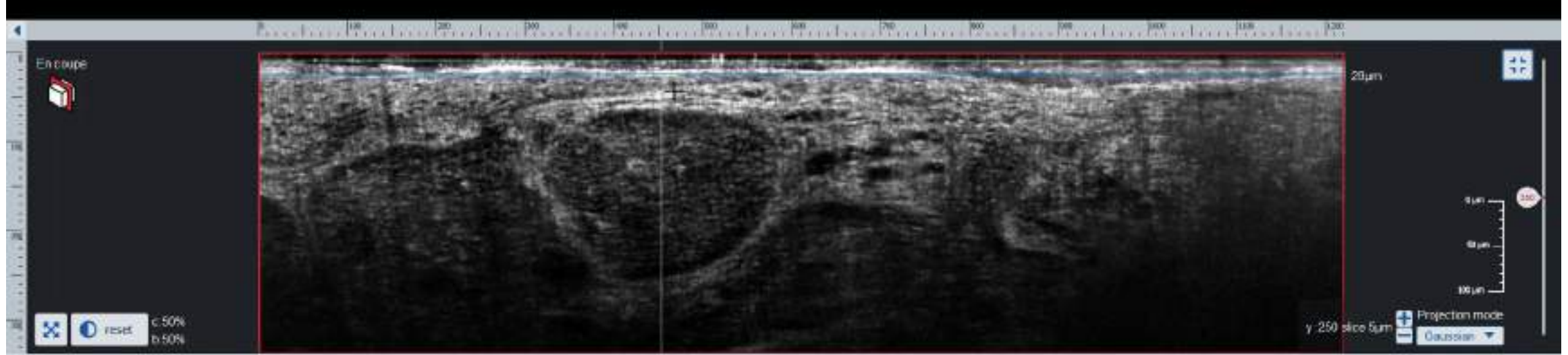


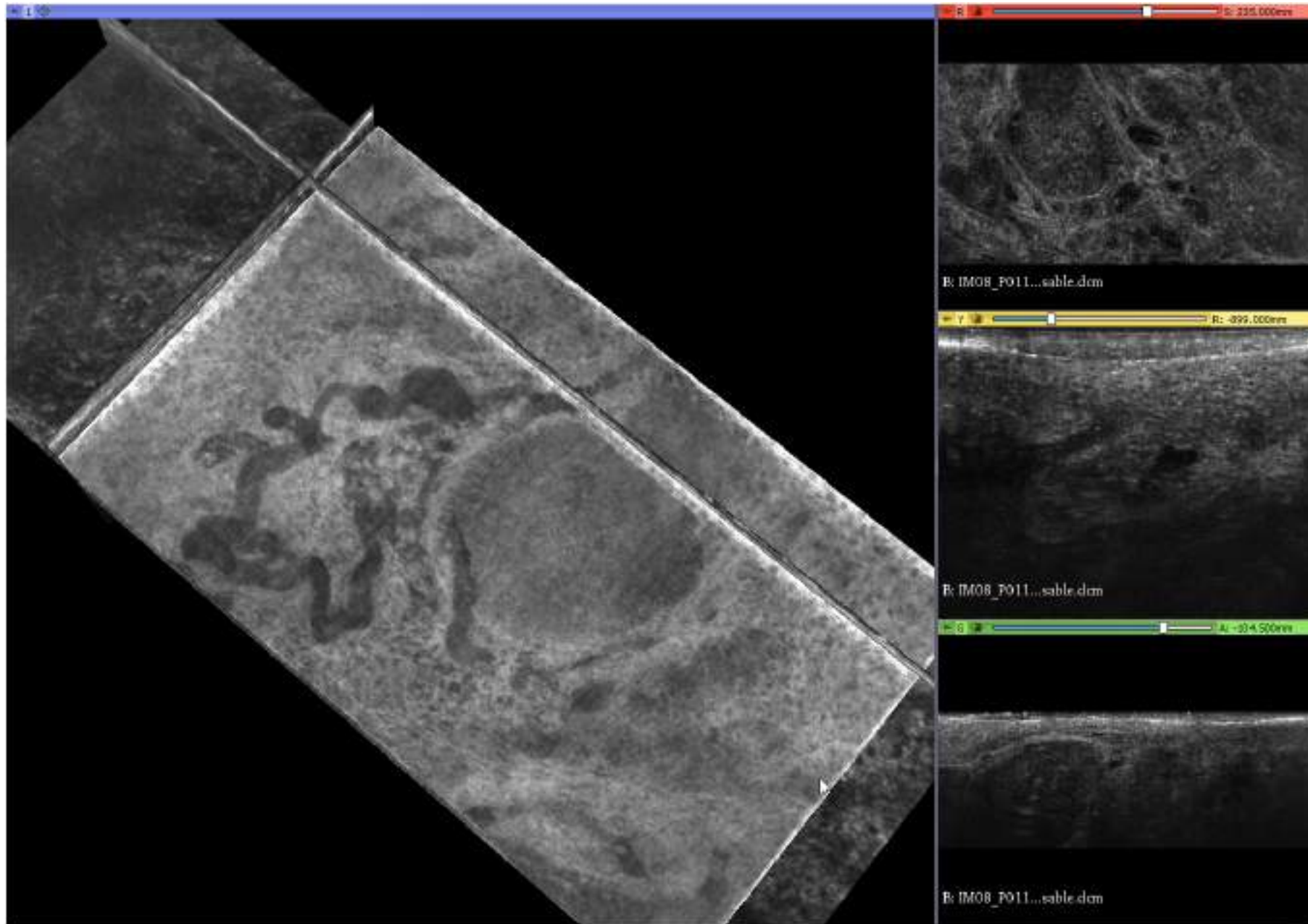
P116, L1



P116, L1

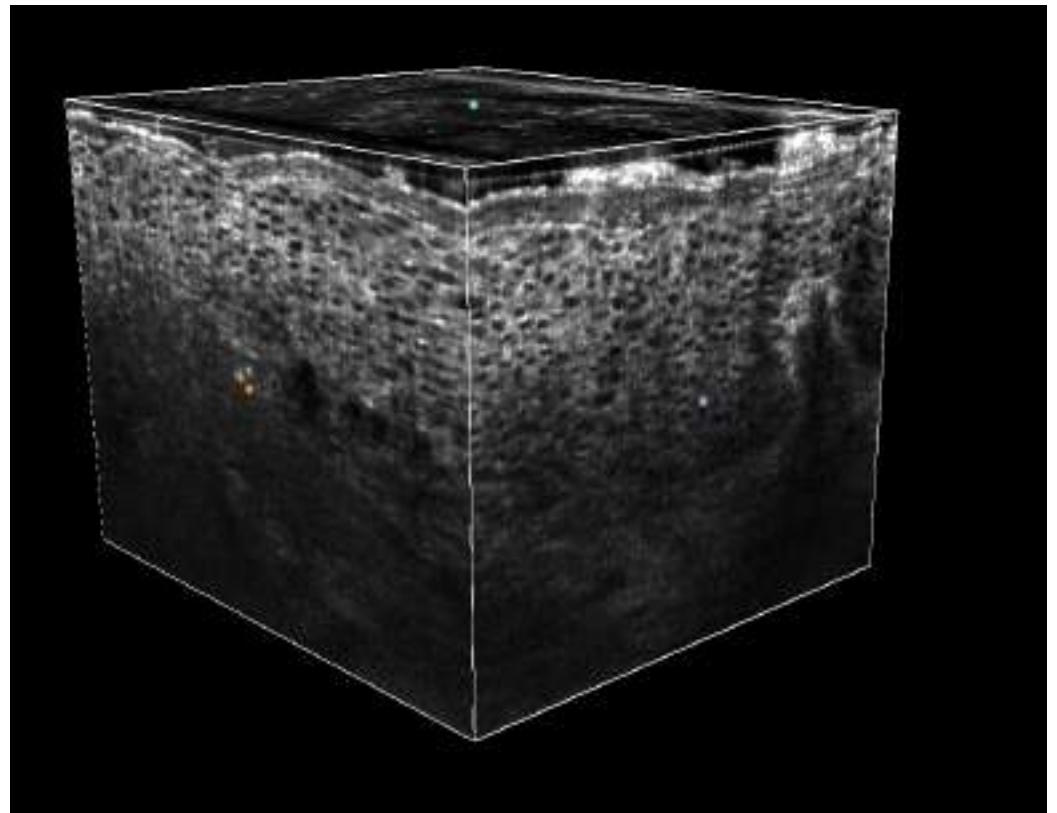
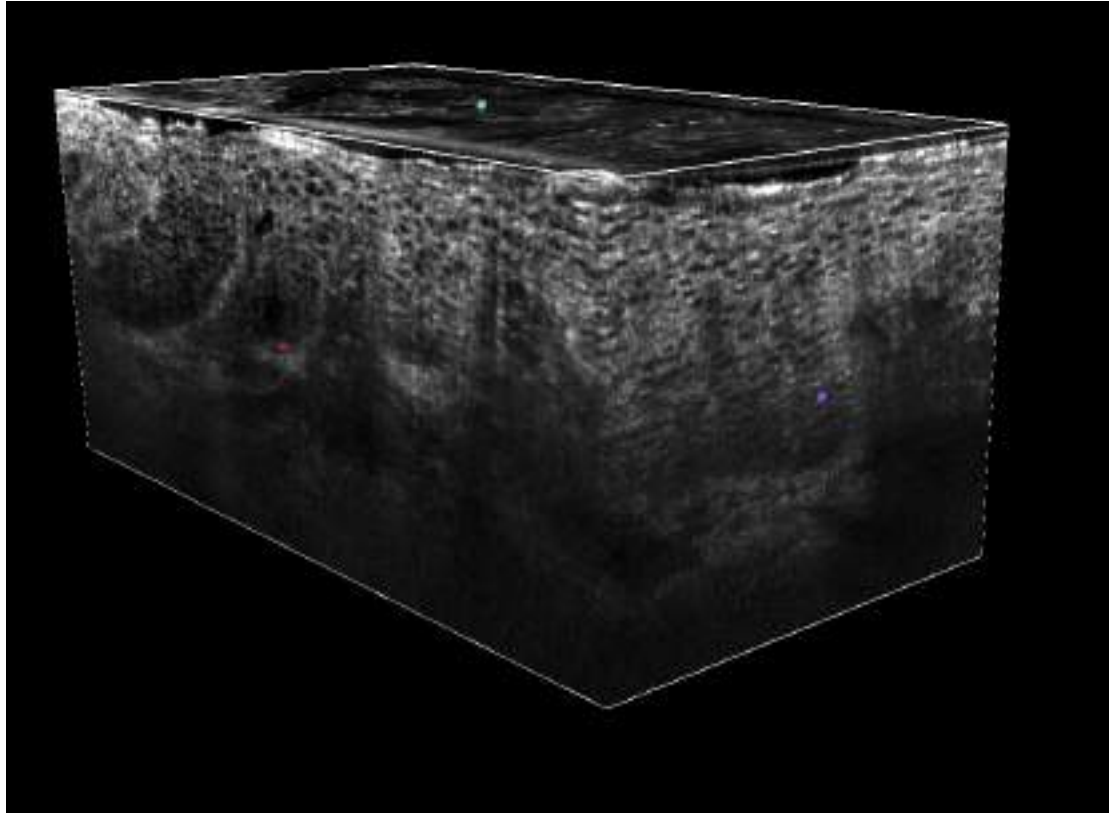


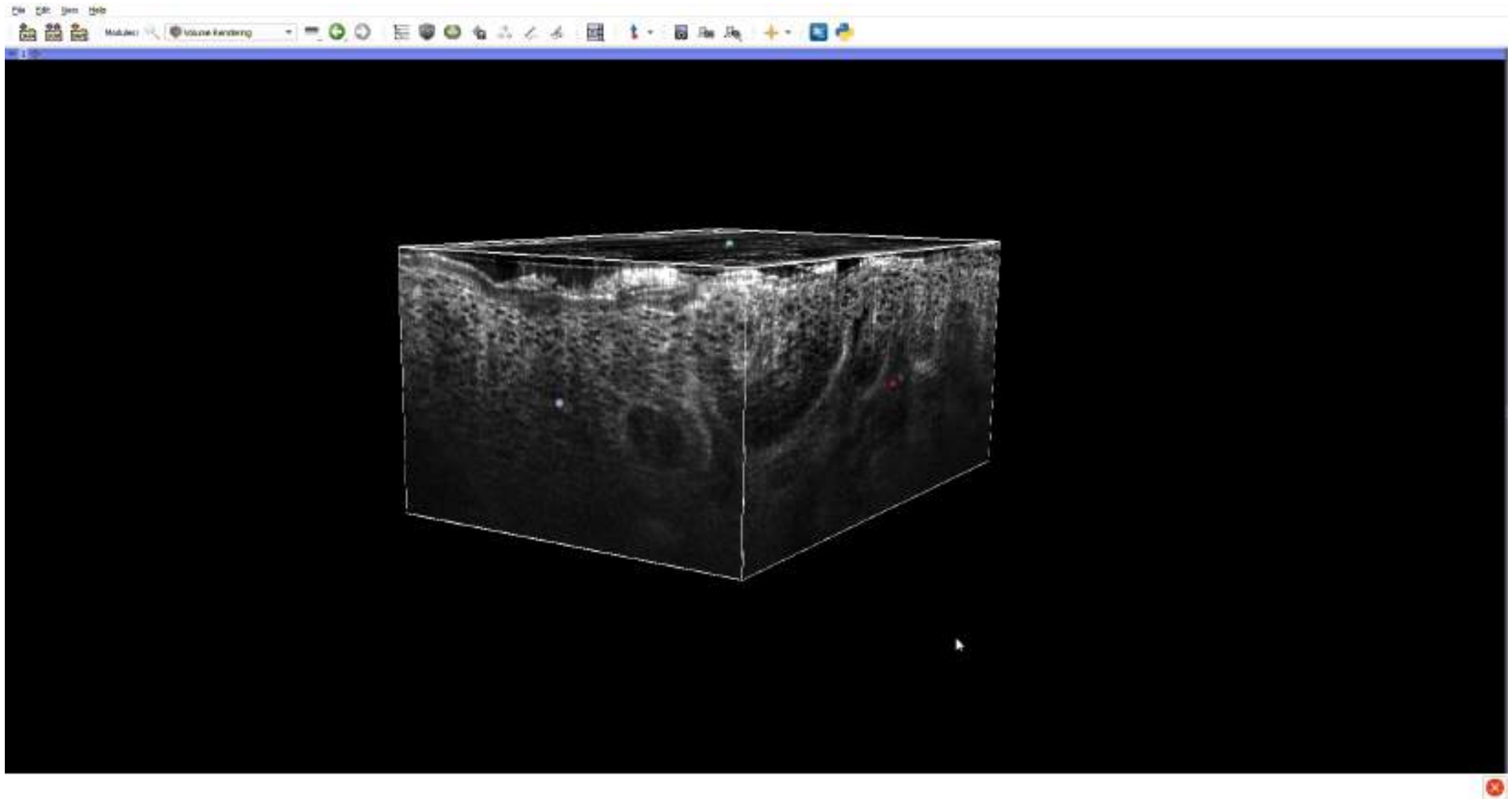




movie

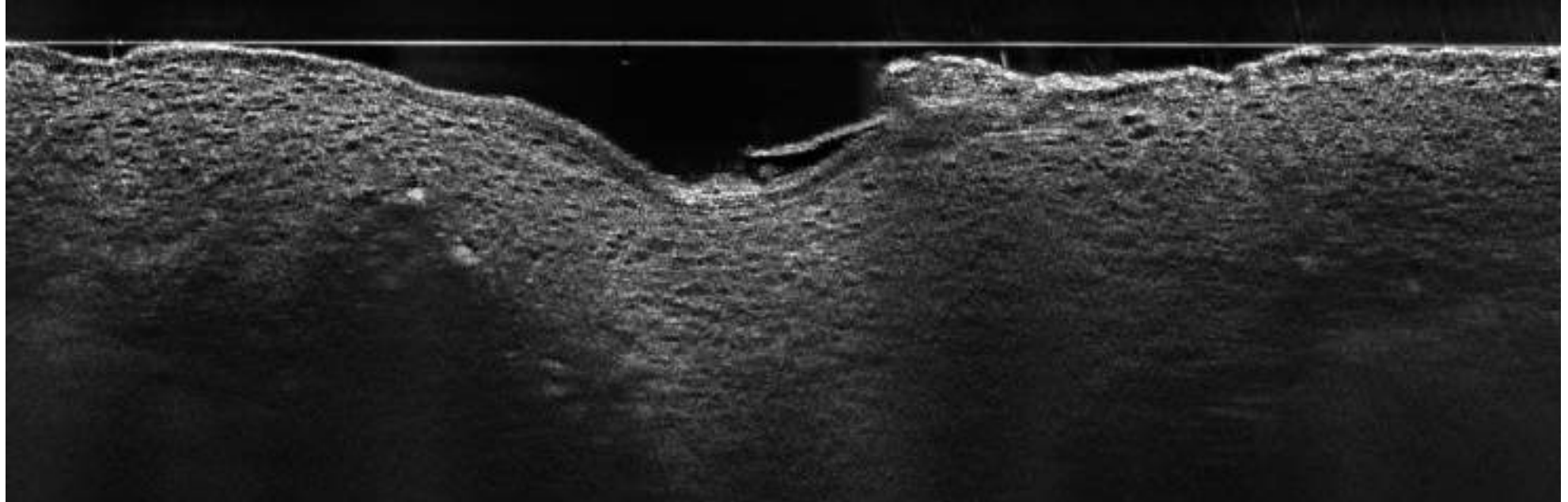
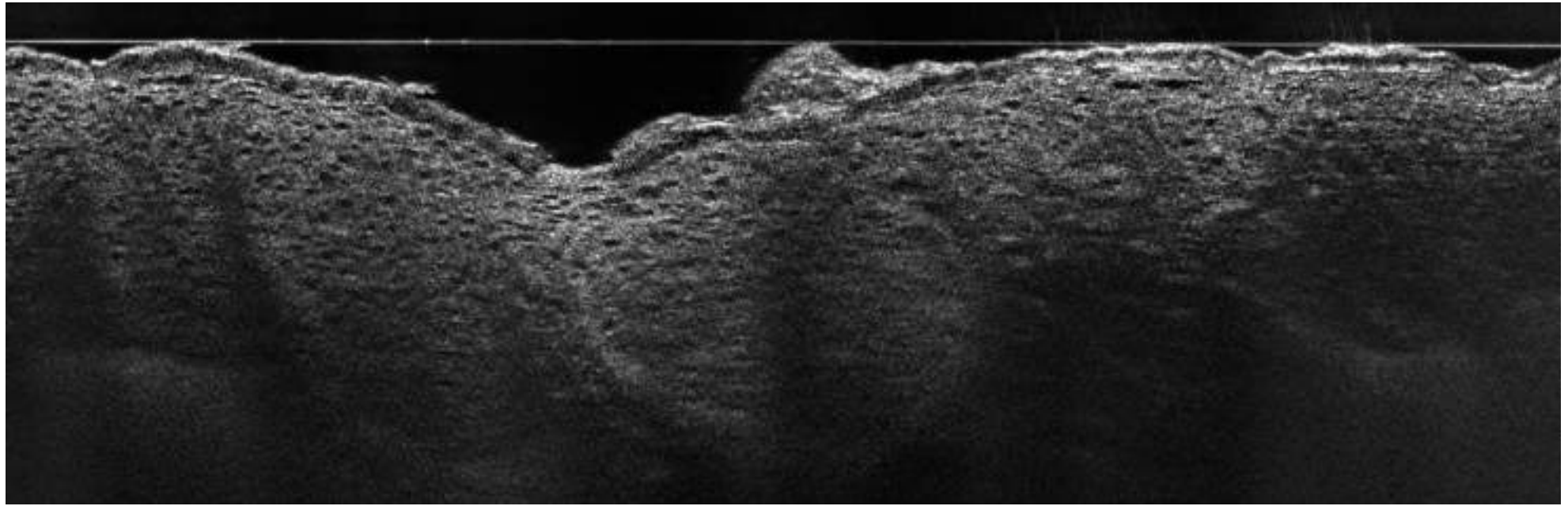


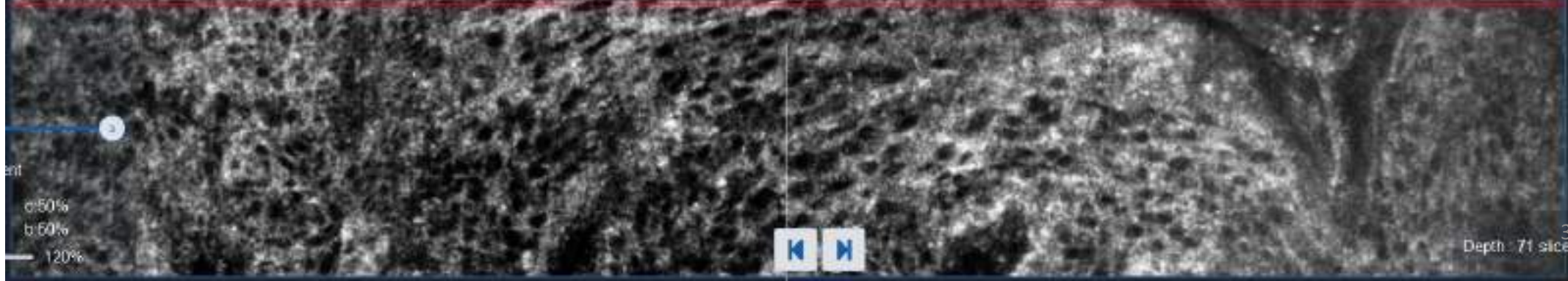
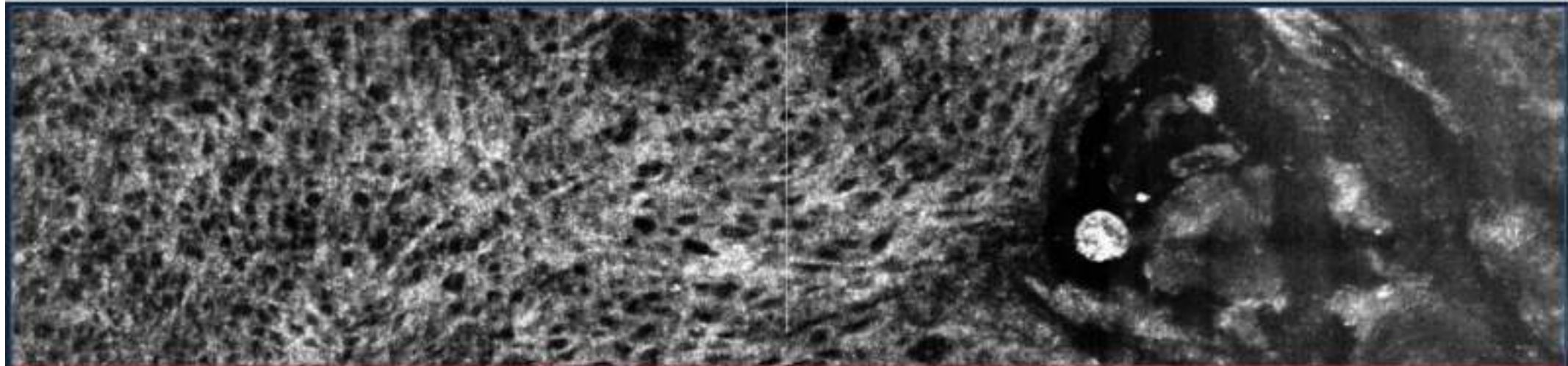
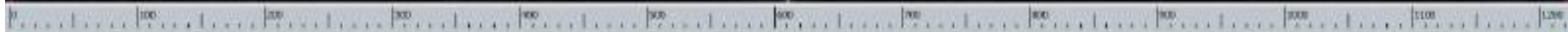
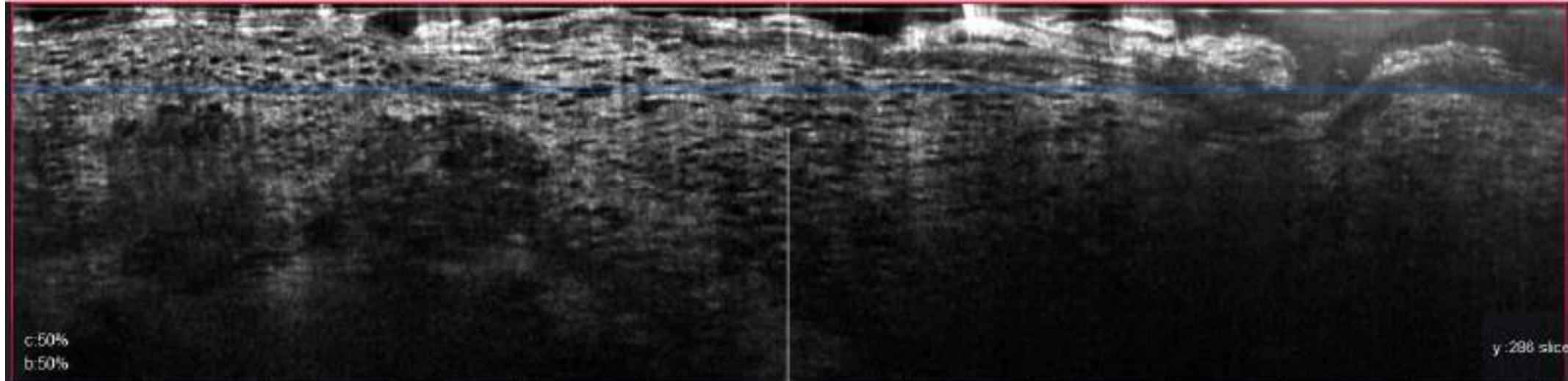


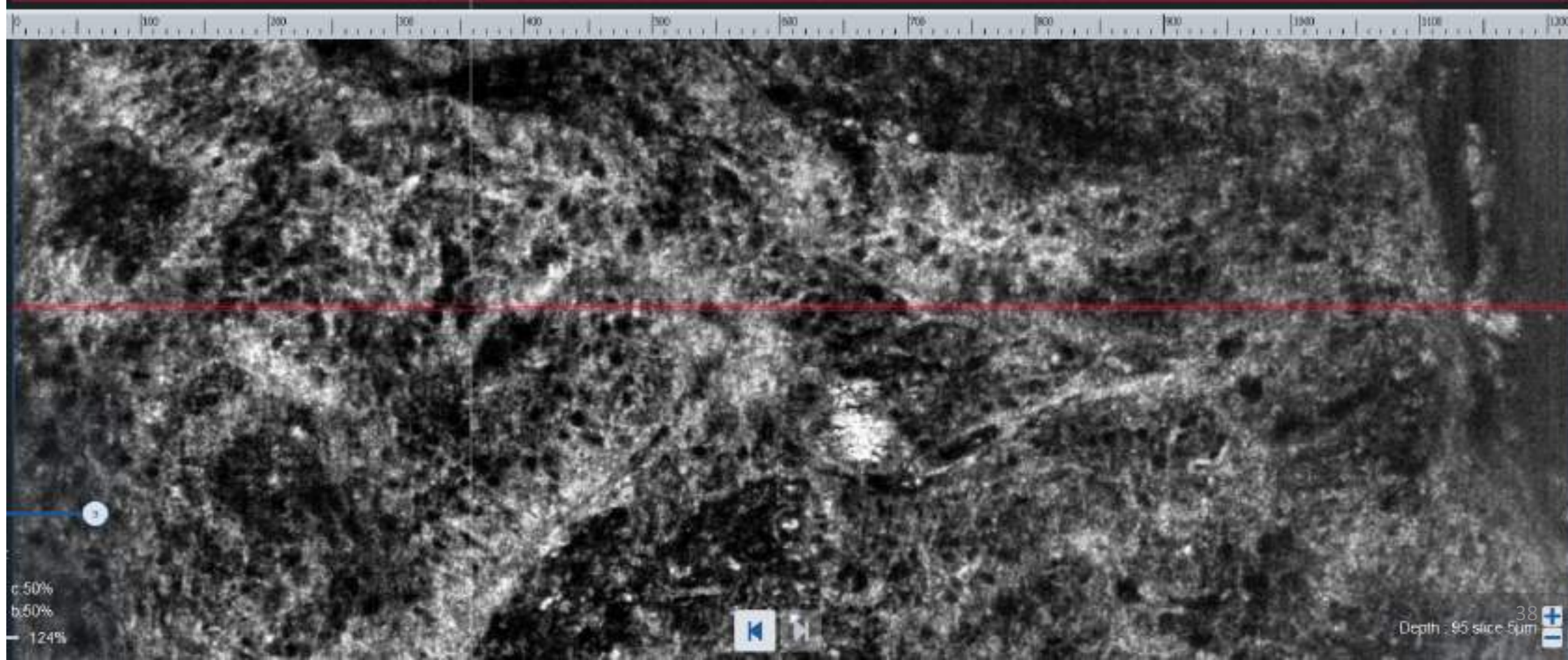
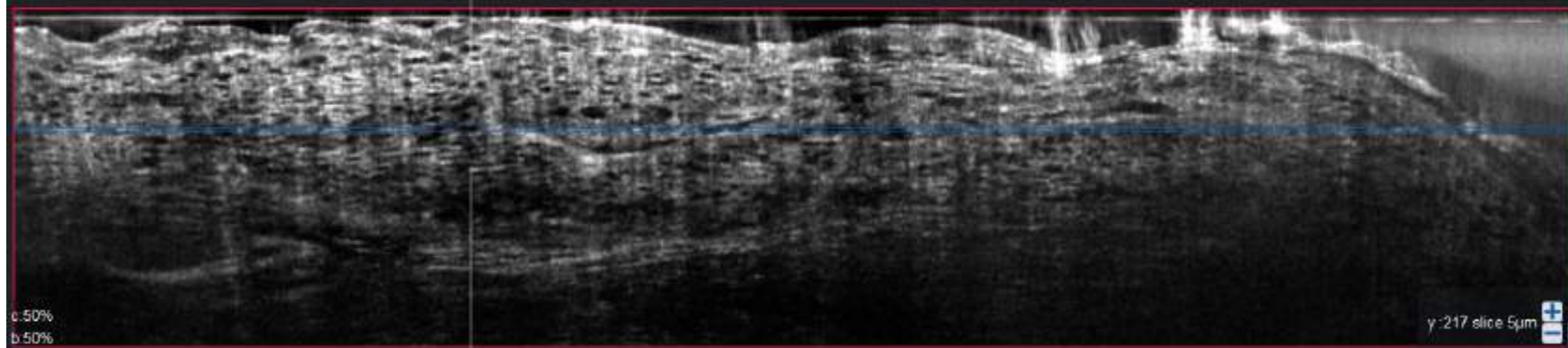


movie

P115, SCC



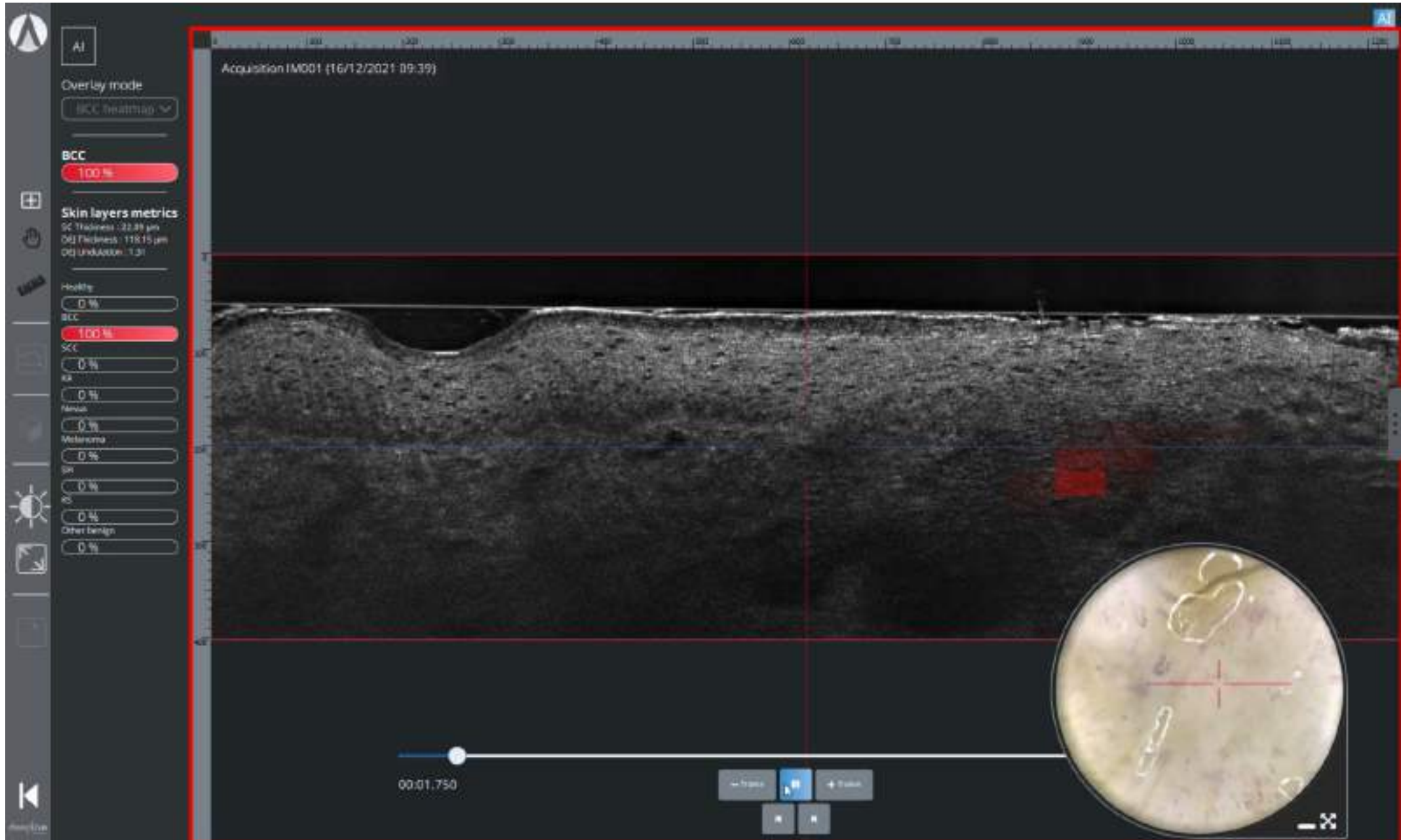






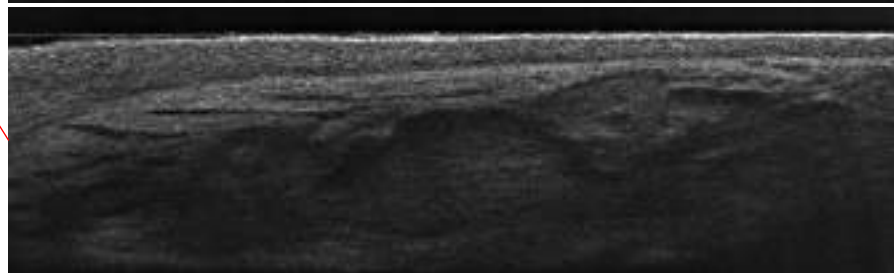
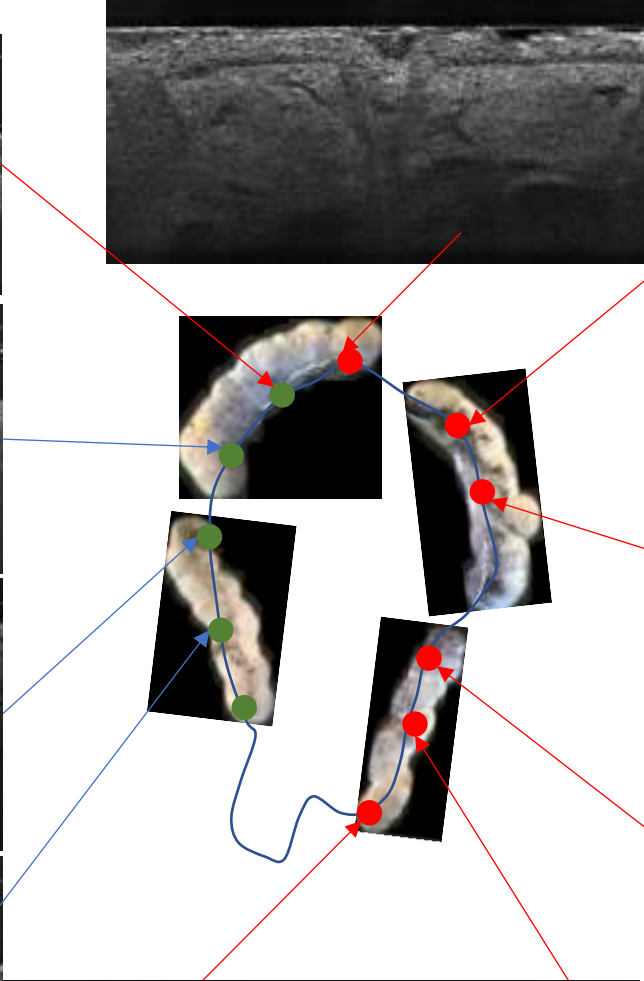
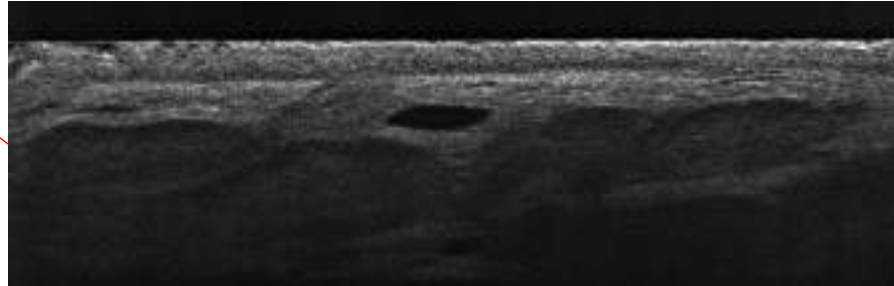
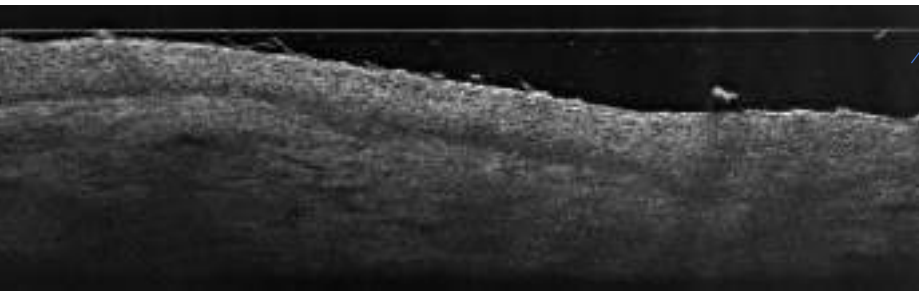
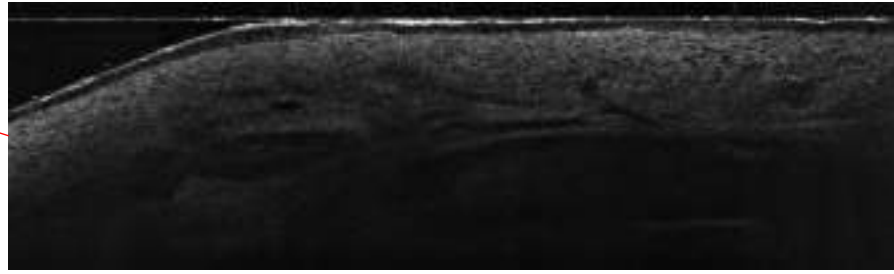
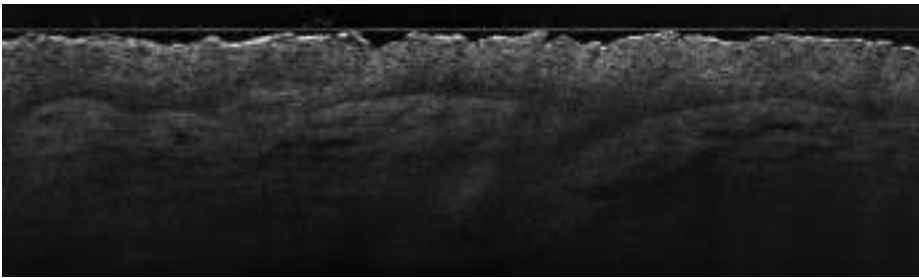
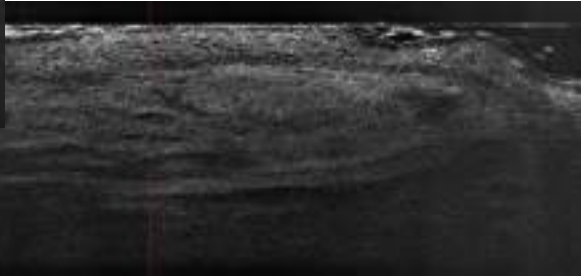
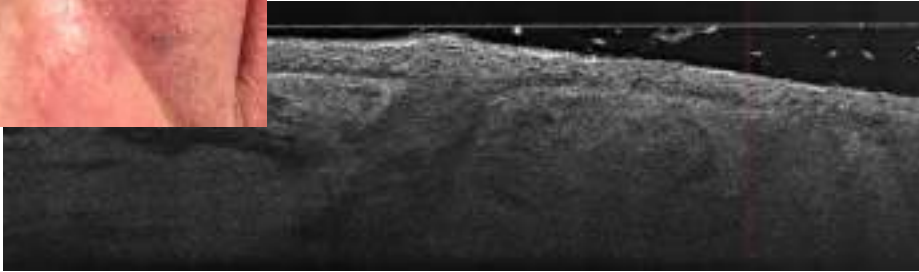
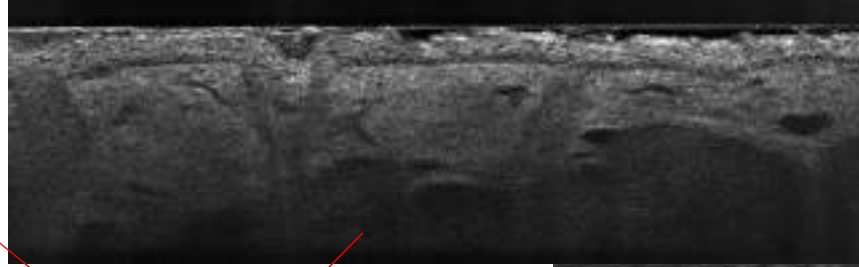
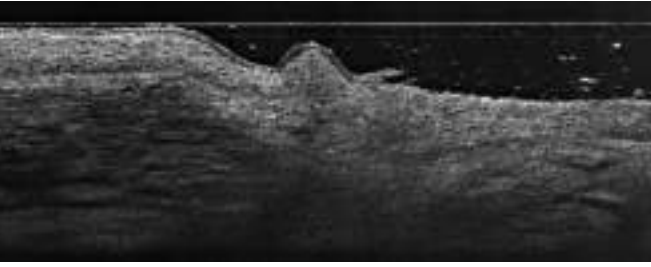
deepLive
by DAMAE MEDICAL

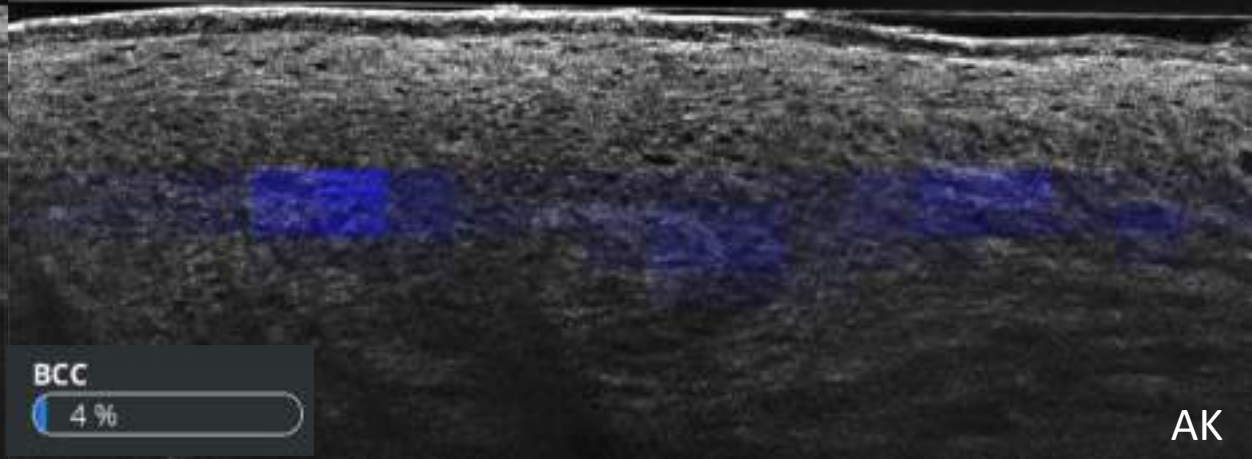
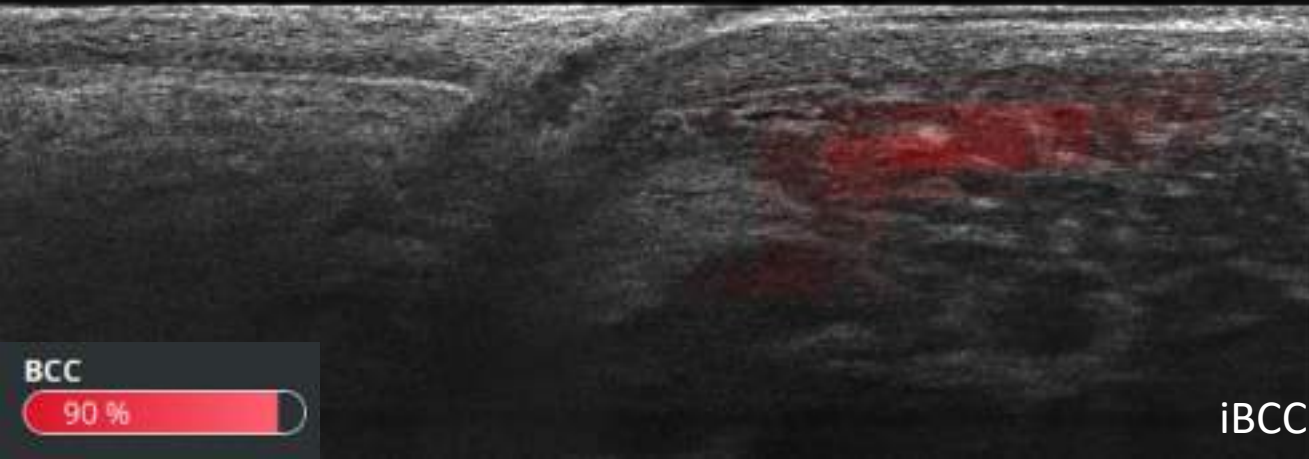
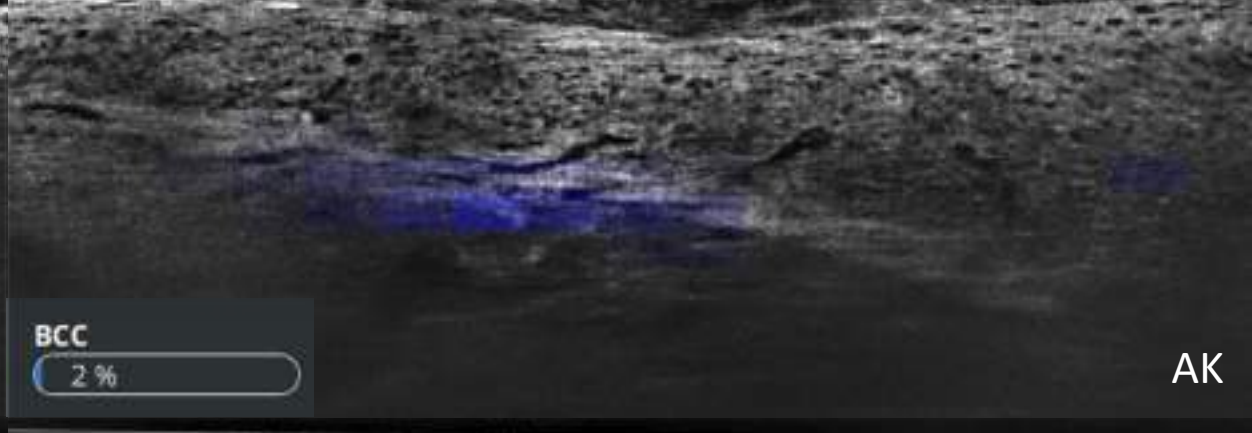
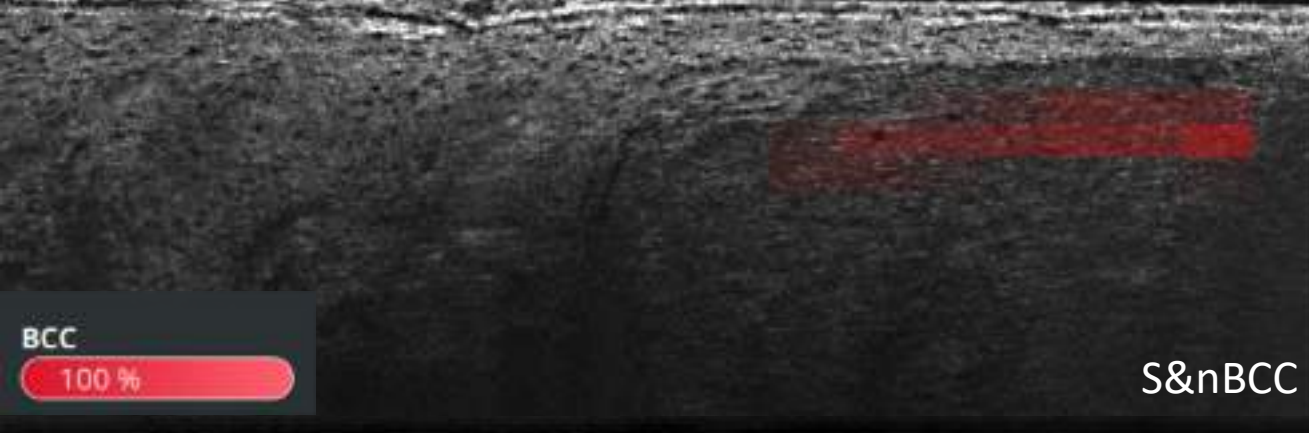
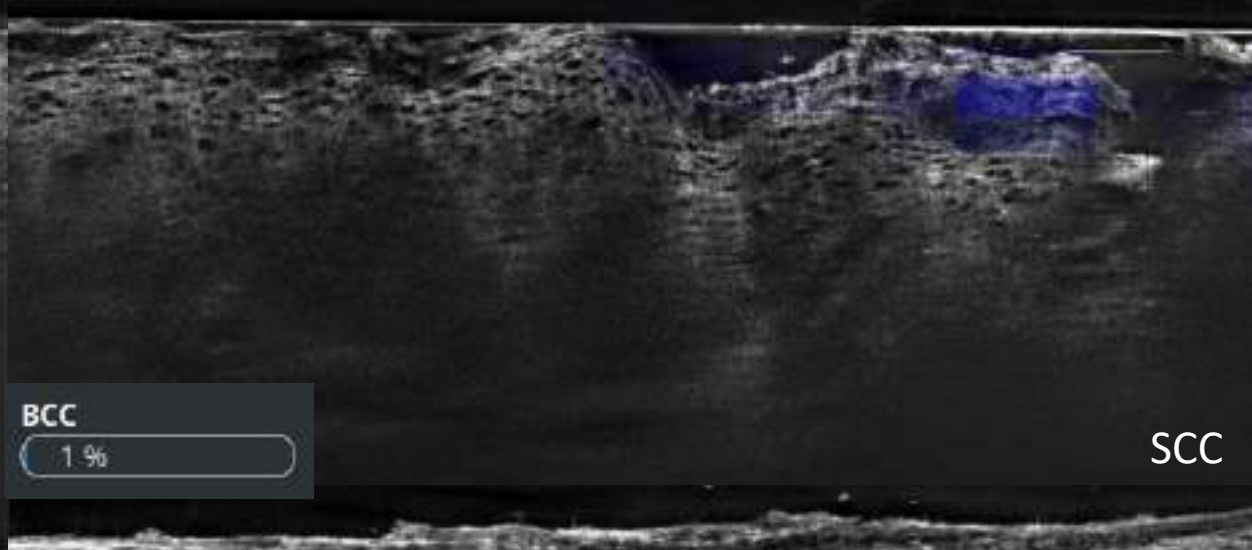
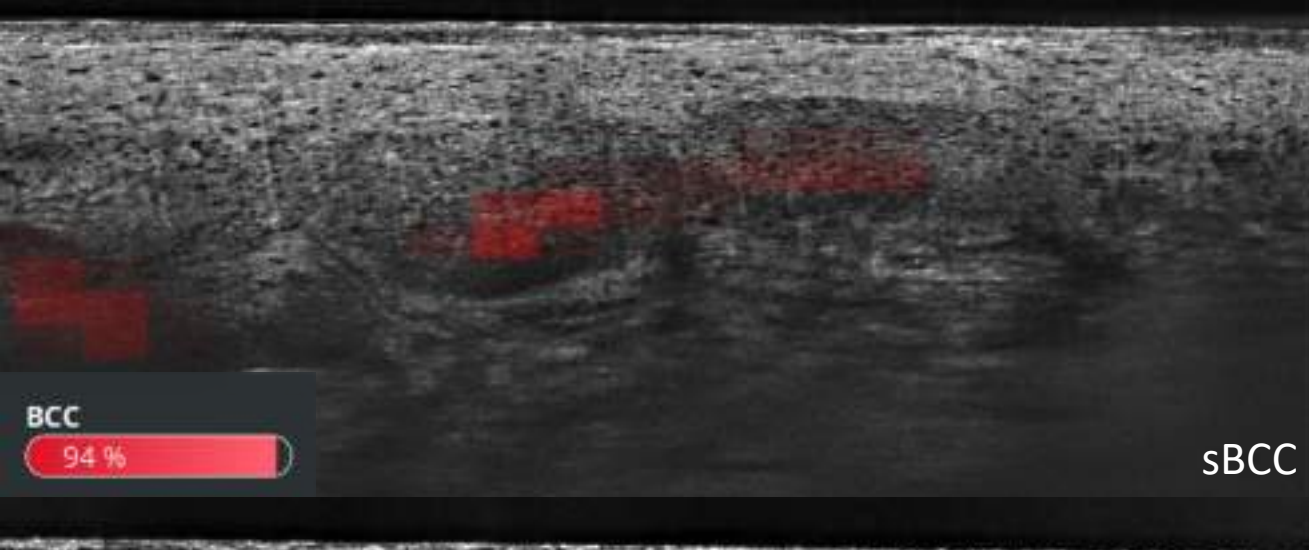
AI DETECTION OF BCC



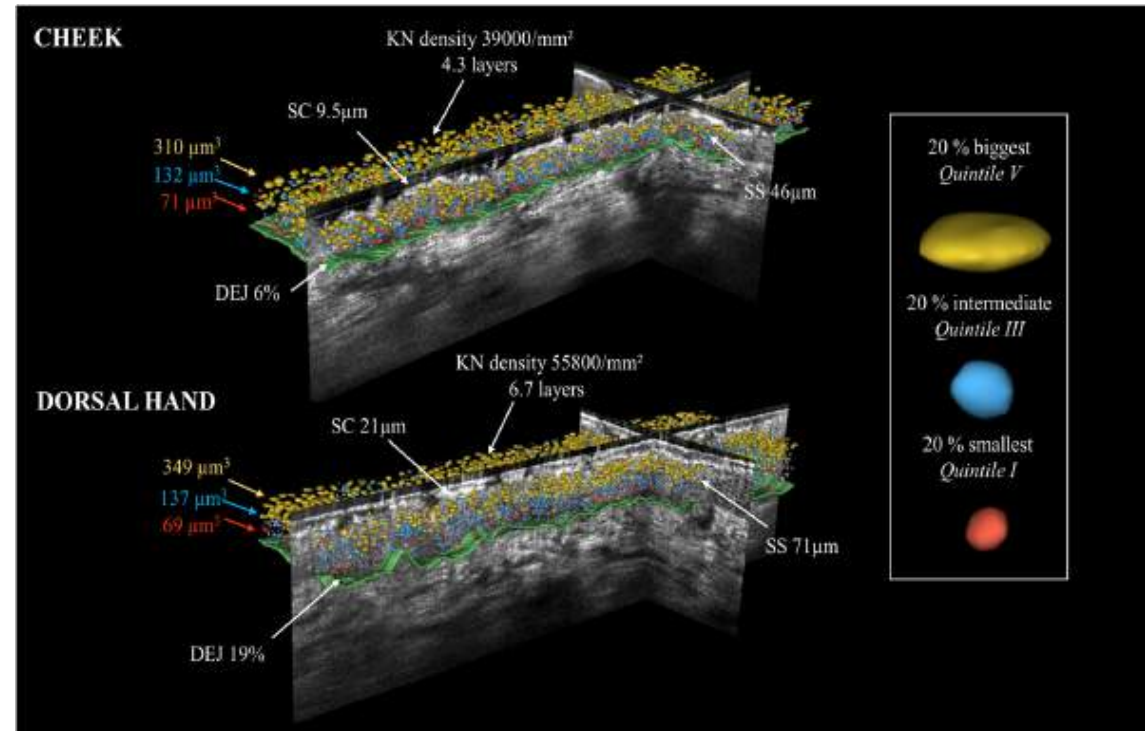
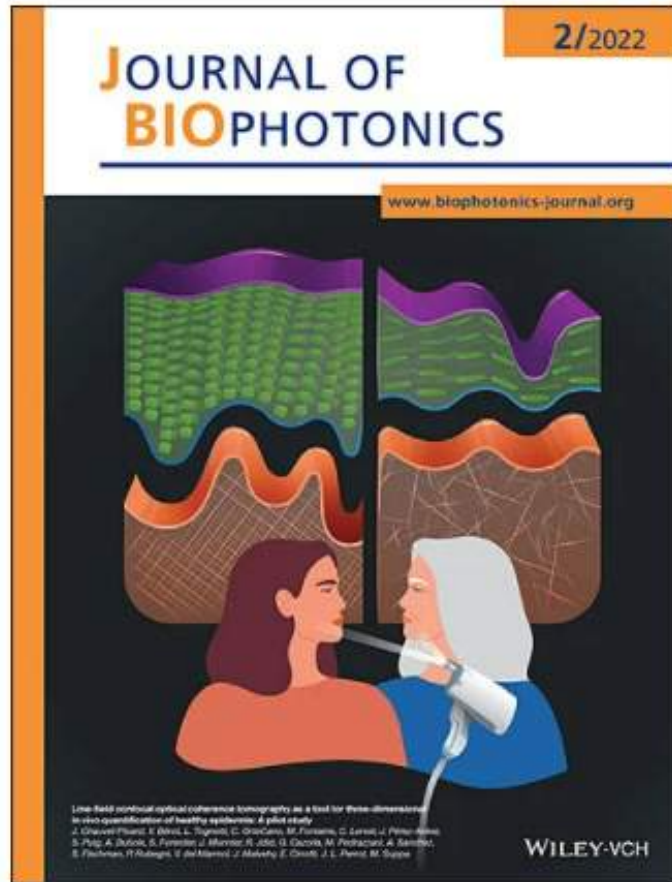
PRE-SURGICAL MARGINS ASSESSMENT





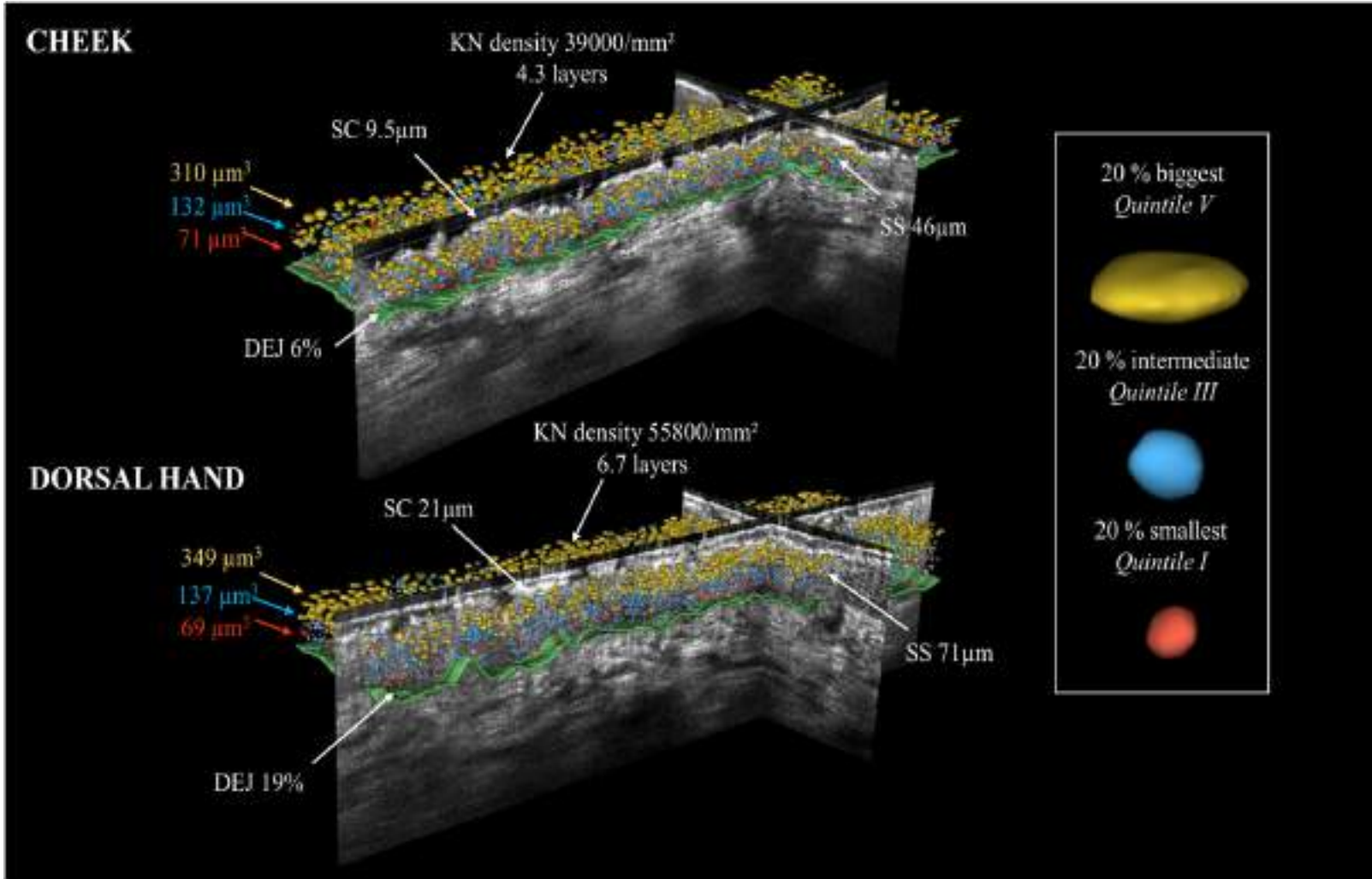


Skin layers quantification



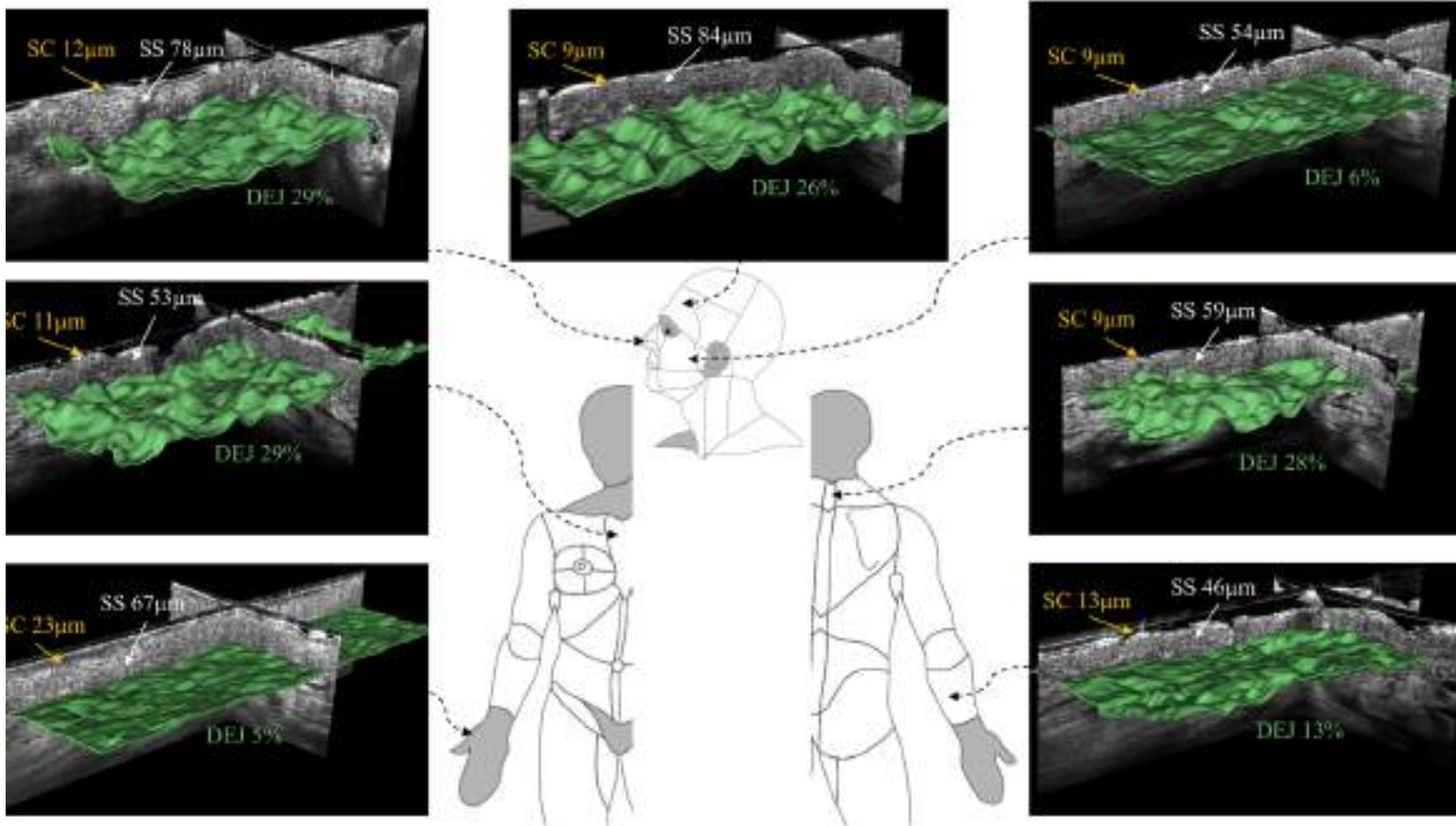
Chauvel-Picard J, Bérot V, Tognetti L, Orte Cano C, Fontaine M, Lenoir C, Pérez-Anker J, Puig S, Dubois A, Forestier S, Monnier J, Jdid R, Cazorla G, Pedrazzani M, Sanchez A, Fischman S, Rubegni P, Del Marmol V, Malveyh J, Cinotti E, Perrot JL, Suppa M. Line-field confocal optical coherence tomography as a tool for three-dimensional in vivo quantification of healthy epidermis: A pilot study. J Biophotonics. 2022 Feb;15(2):e202100236. doi: 10.1002/jbio.202100236. Epub 2021 Oct 21. PMID: 34608756.

Measurement of KC nuclei distribution (LC-OCT)



Keratinocyte nuclei distribution according to their volume (level of keratinocyte maturation) on the cheek and dorsal hand of the same study participant (21-year-old female, phototype II). Keratinocytes are illustrated in 3D and colored according to nuclei volume (red, quintile I including the smallest; blue, quintile III including the intermediate; yellow, quintile V including the biggest). The dermal-epidermal junction is depicted as a green layer (undulation index expressed in percentage). Three distinct layers are visible: a lower, red layer (just above the DEJ) containing small, immature basal keratinocytes; an intermediate, blue layer containing maturing keratinocytes; and an upper, yellow layer containing large, mature keratinocytes. DEJ, dermal epidermal junction; KN, keratinocytes; SC, stratum corneum; SS, stratum spinosum. Thicknesses (μm); nuclei volume (μm³); keratinocyte density (mm²) (Chauvel-Picard J et al)

Measurement of photoageing: lineal confocal-OCT (LC-OCT)

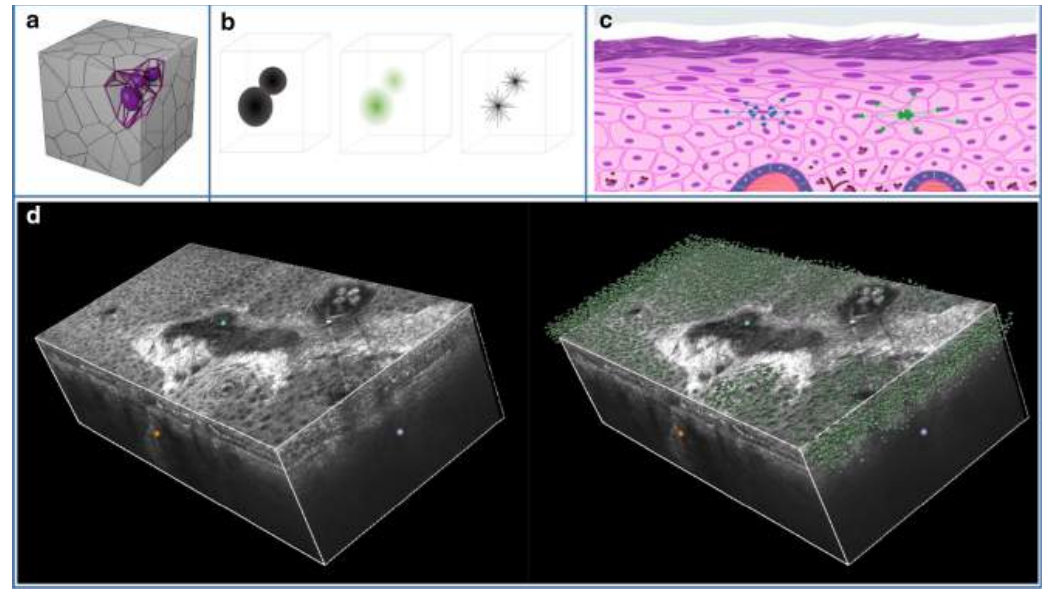
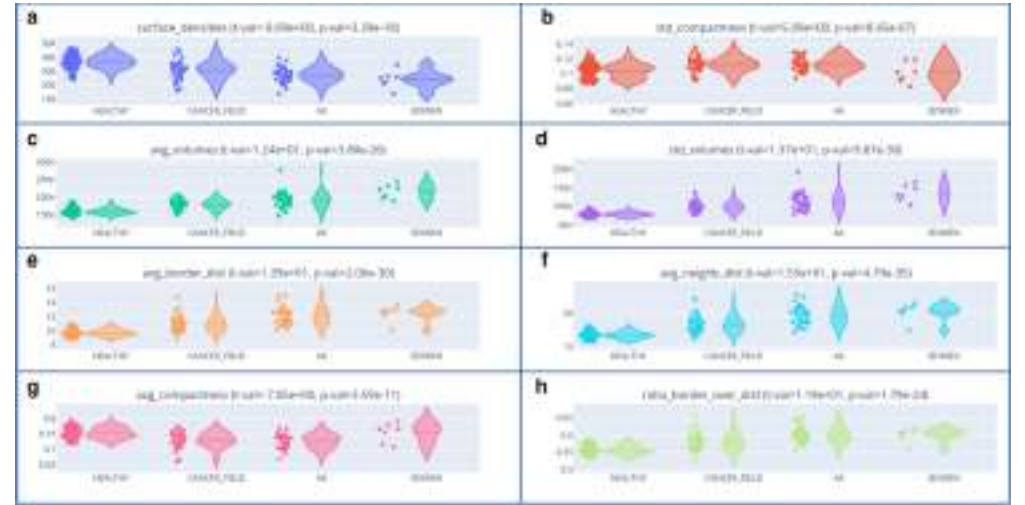
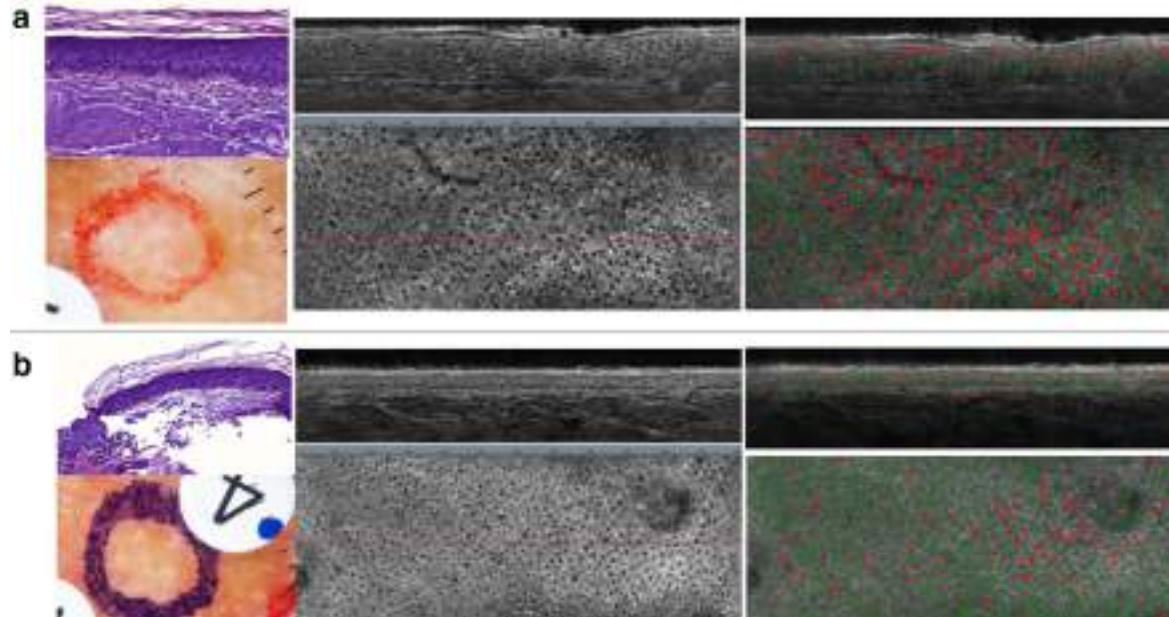


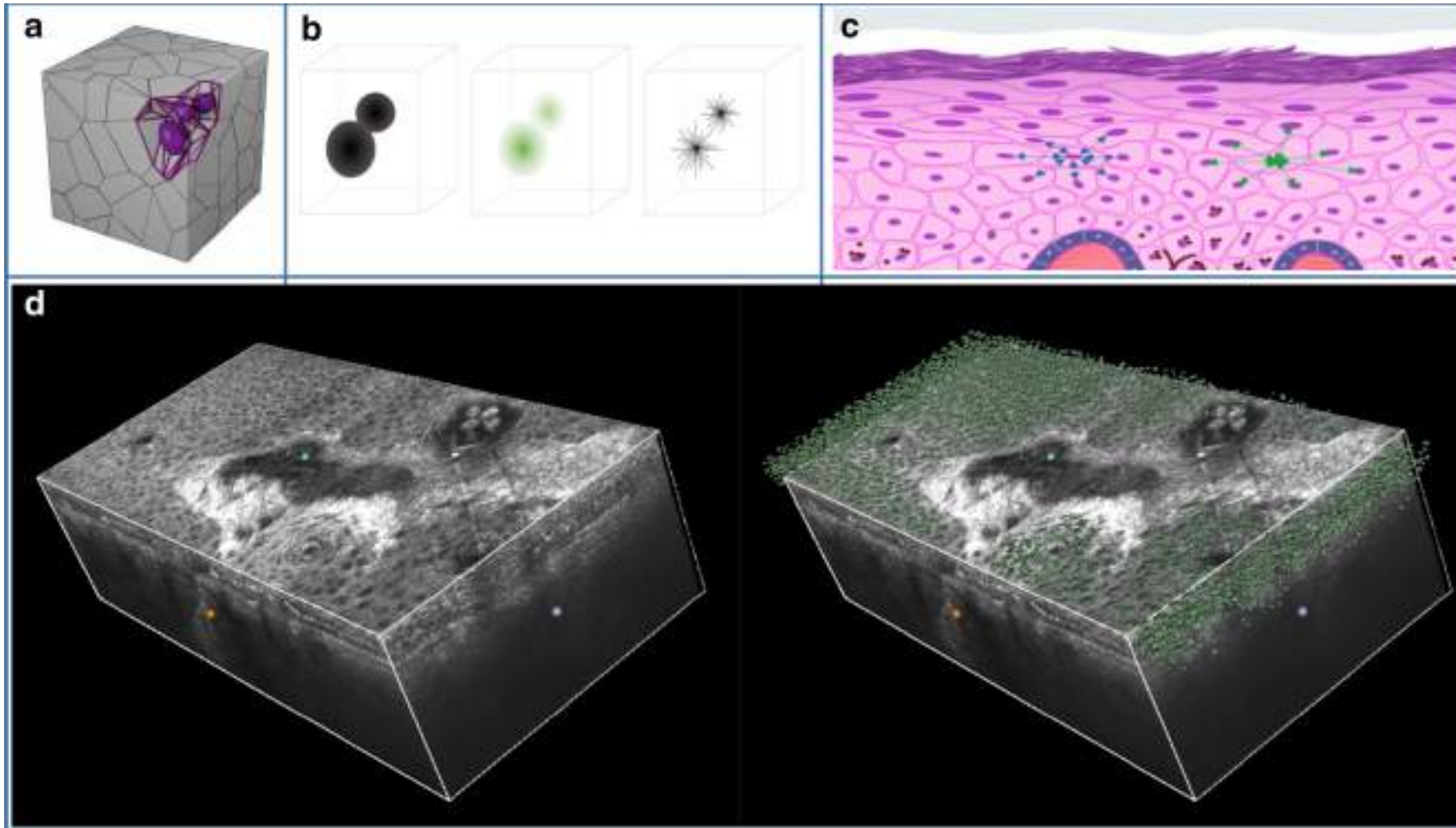
3D LC-OCT quantification of epidermal characteristics in seven body sites on the same subject (27-year-old female, phototype II). The thickness of stratum corneum (SC) and stratum spinosum (SS) are reported in μm , whereas the undulation of the dermal-epidermal junction (DEJ, green layer) is expressed in percentage (Chauvel-Picard J et al)

OPEN Non-invasive scoring of cellular atypia in keratinocyte cancers in 3D LC-OCT images using Deep Learning

Check for updates

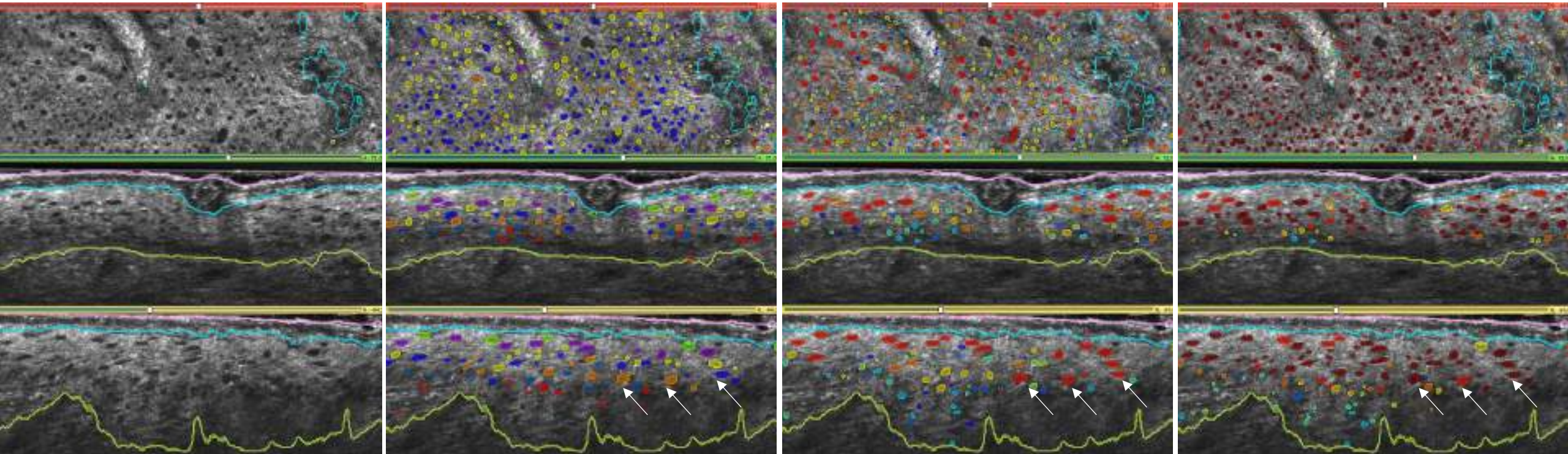
Sébastien Fischman^{1,2,3}, Javiera Pérez-Anker^{2,3}, Linda Tognetti⁴, Angelo Di Naro⁴, Mariano Suppa^{5,6,7}, Elisa Cinotti^{4,6}, Théo Viel¹, Jilliana Monnier^{6,8}, Pietro Rubegni⁴, Véronique del Marmol⁵, Josep Malvehy^{2,3}, Susana Puig^{2,3}, Arnaud Dubois⁹ & Jean-Luc Perrot¹⁰





- 3.7 million nuclei detected by the Deep Learning model (2.5 millions healthy images, 491000 in AK, images= 630000 in fields of cancerization and 95000 in SCC).
- Atypia of KC: larger nuclei, less spherical, heterogeneous

Measurement of KC nuclei distribution (LC-OCT)



Skin layers segmentation

Nuclei per layers (3D)

Green: 1st top layer

Blue: middle layer

Red: bottom layer

Nuclei per size (volume)

red: largest nuclei

Green/yellow: intermediate

blue: smallest

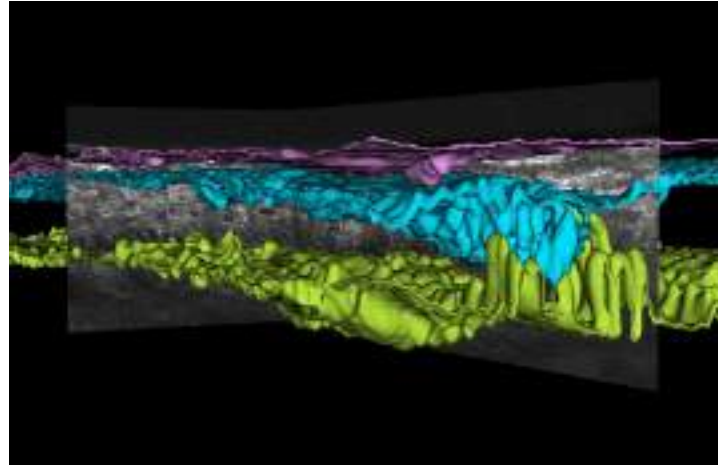
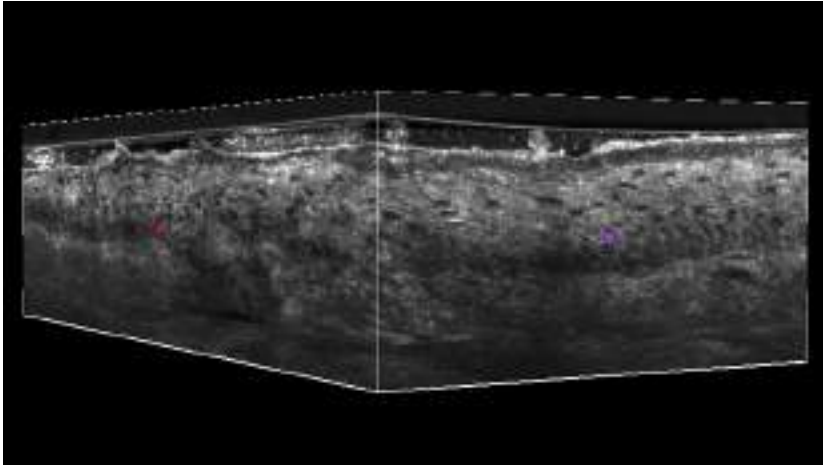
Nuclei per atypia (AI score)

red: highest atypia

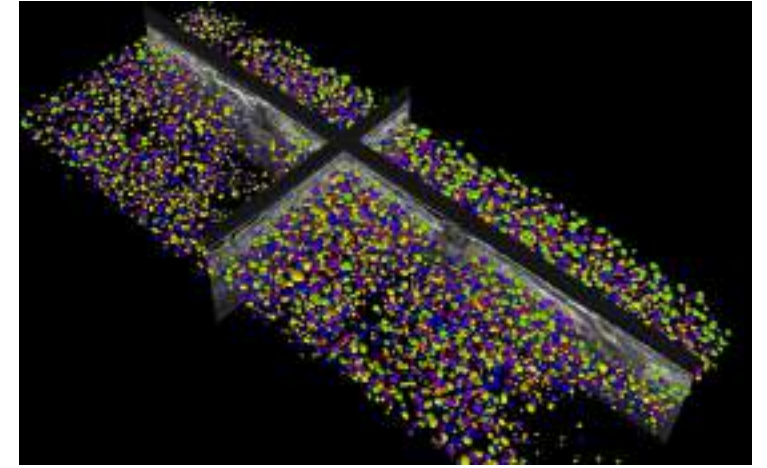
Green/yellow: intermediate

blue: smallest atypia

- In the combined images of this study, a total of more than 3.7 million nuclei were detected by the Deep Learning model with 2.5 millions nuclei from healthy images, 491000 in AK, 630000 in fields of cancerization and 95000 in Bowens.
- Atypia of KC: larger nuclei, less spherical, heterogeneous

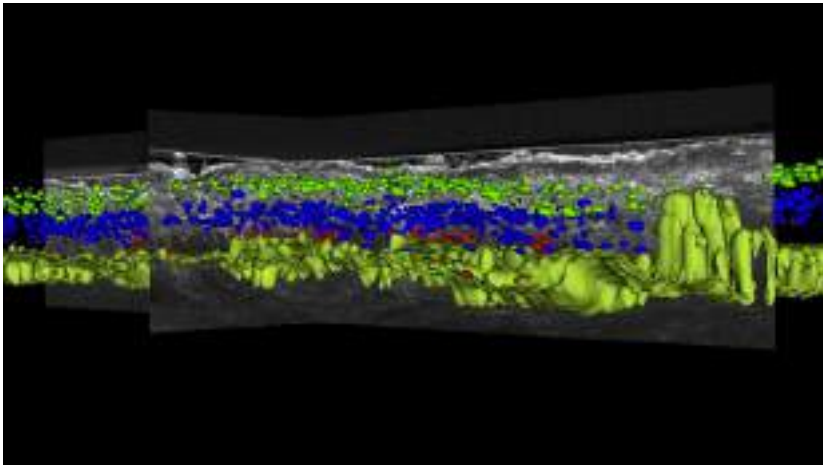


Skin layers segmentation



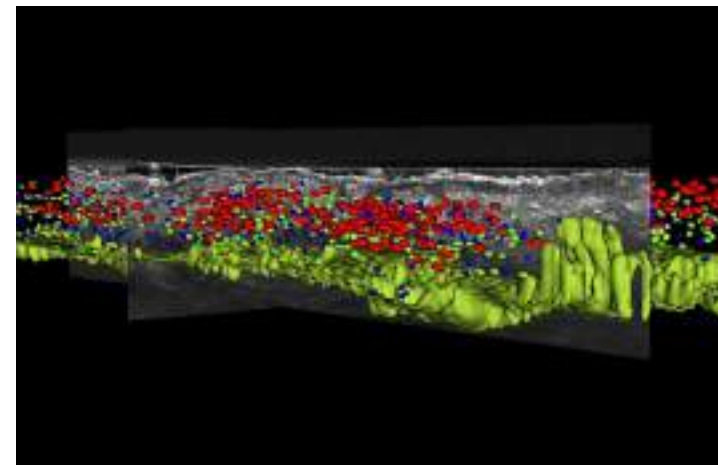
Nuclei per layers (3D)

Green: 1st top layer / Blue: middle layer /
Red: bottom layer



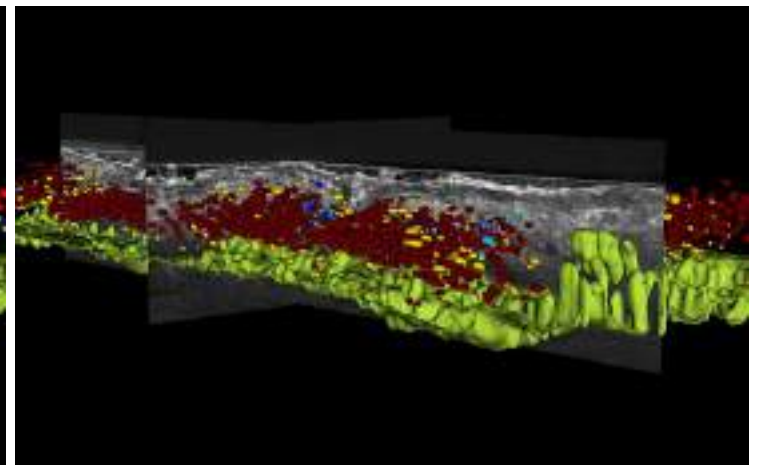
Nuclei per layers (3D)

Green: 1st top layer
Blue: middle layer
Red: bottom layer



Nuclei per size (volume)

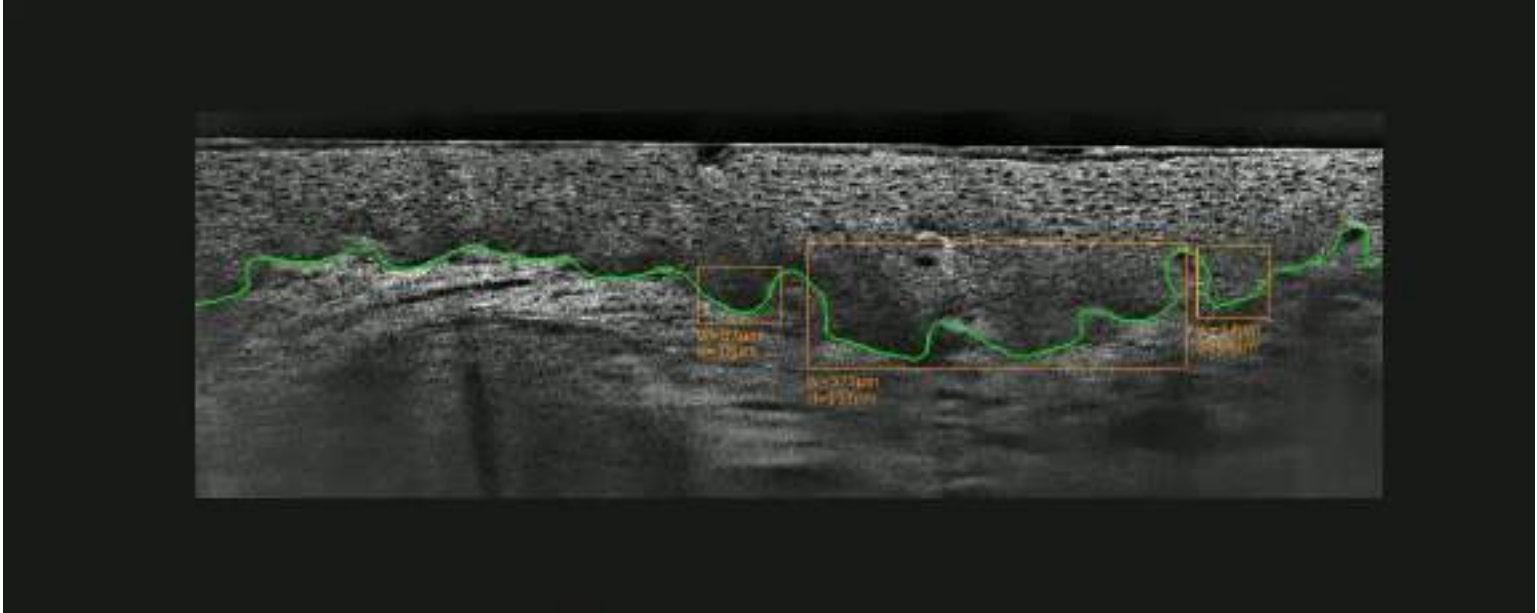
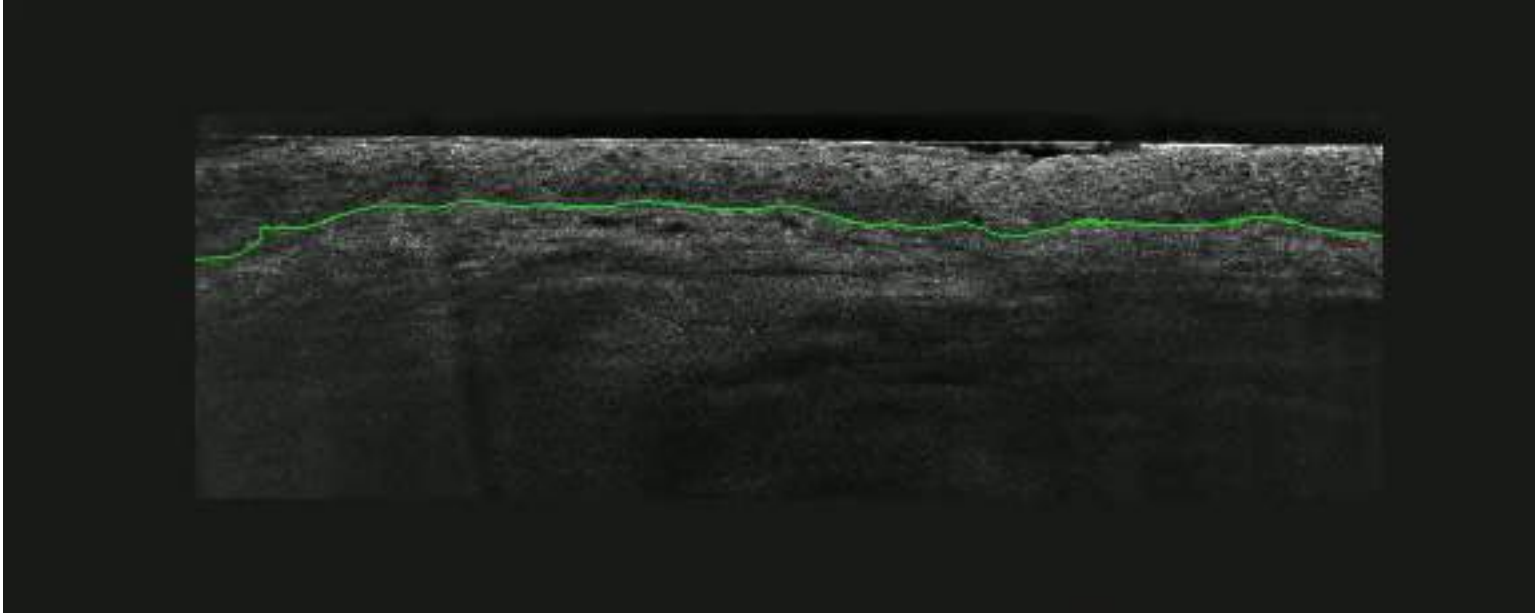
red: largest nuclei
Green: intermediate
blue: smallest

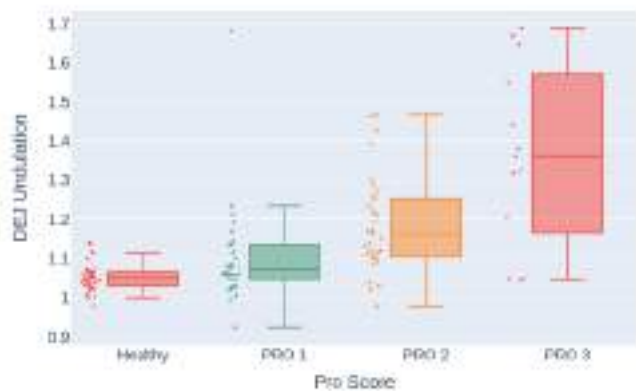


Nuclei per atypia (AI score)

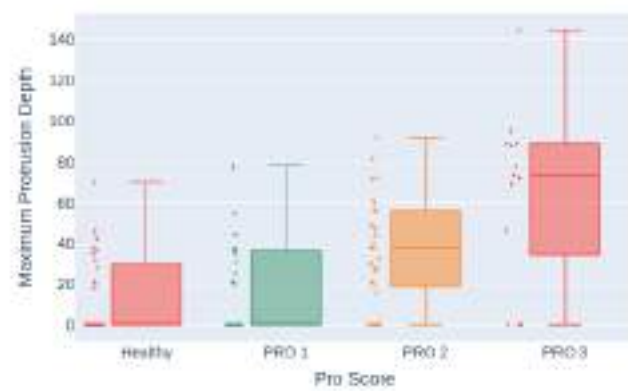
red: highest atypia
Green/yellow: intermediate
blue: smallest atypia

Examples of live protrusion quantification

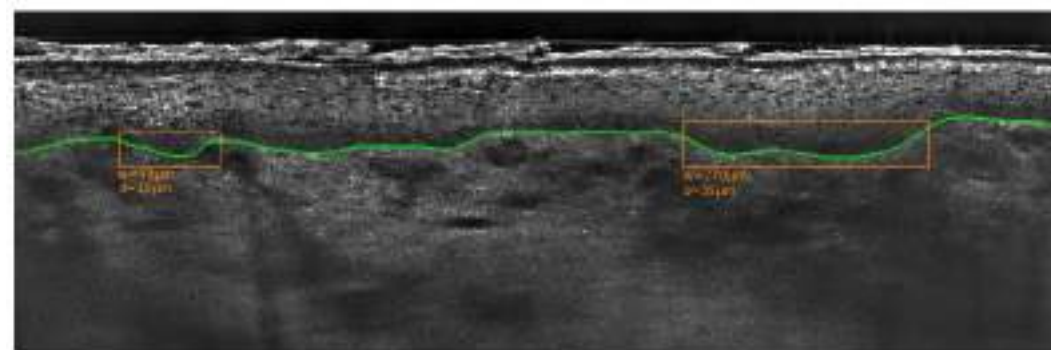




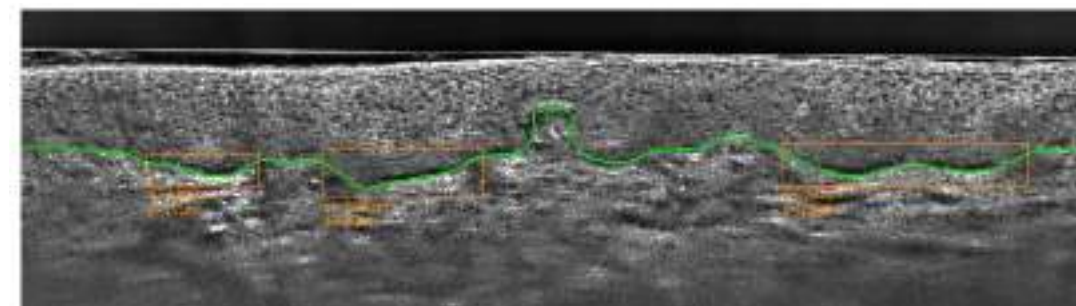
(a) Undulation.



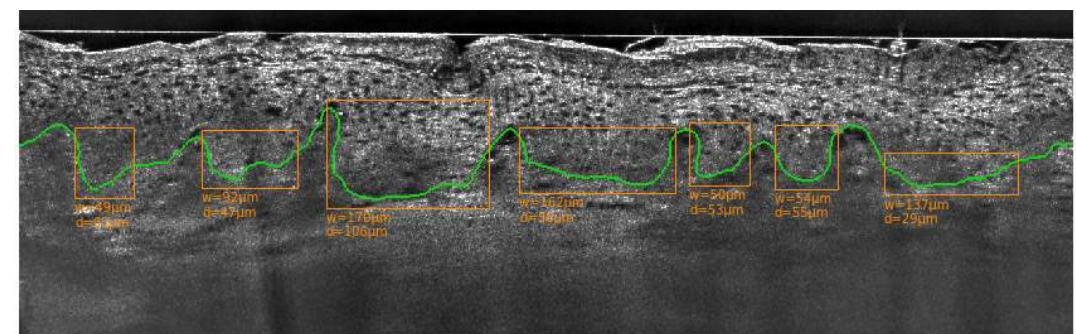
(b) Maximum protrusion depth.



-> Grade based on undulation : [PRO 1]
 JDE thickness : 80 µm
 JDE undulation : 1.116



-> Grade based on undulation : [PRO 2]
 JDE thickness : 101 µm
 JDE undulation : 1.267



-> Grade based on undulation : [PRO 3]
 JDE thickness : 105 µm
 JDE undulation : 1.604

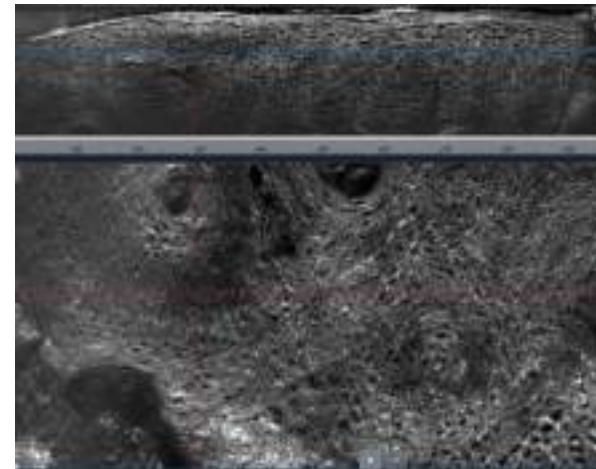
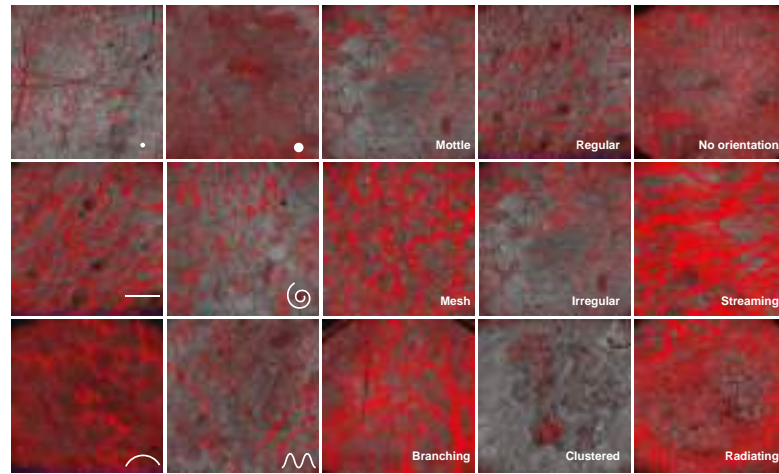
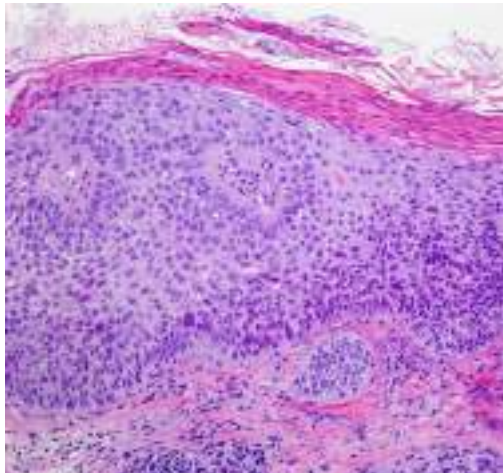
Predicted Label

		PRO I	PRO II	PRO III
<i>Ground truth</i>	PRO I	20	10	0
	PRO II	4	28	1
	PRO III	3	1	9

Table 2. Confusion matrix of the PRO Scoring model.

Conclusions

- No reliable clinical criteria to identify “high-risk” AKs
- Proliferative patterns of AKs associated to resistance to Tx and SCC
- LC-OCT aids in the identification of PRO AKs
- LC-OCT aids in the identification of SCC
- AI and LC-OCT to quantify the skin changes in AKs and SCC



Dermatology Department Hospital Clinic





Hybrid Congress

3rd World Congress on Confocal Microscopy

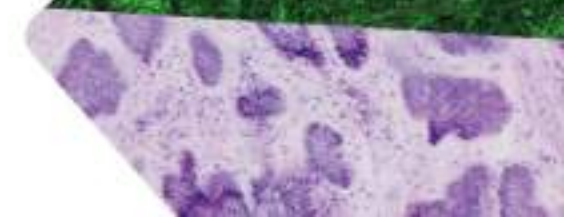
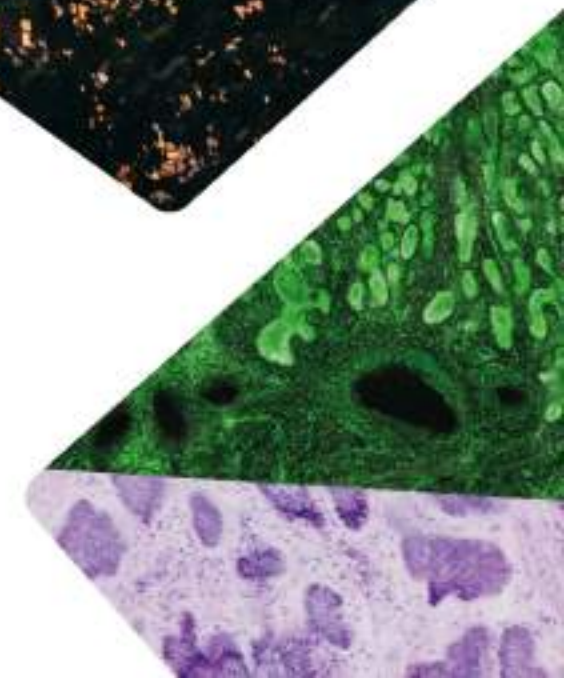
June, 1-3, 2023
Barcelona, Spain

Save the date!



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Salvador González
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9º CURSO

FORMATO HÍBRIDO

Avanzado de Dermatoscopia

Curso teórico-práctico

Barcelona 21, 22 y 23 de Septiembre

PROGRAMA PRELIMINAR



Organizado por:

ASOCIACIÓ PER LA FORMACIÓ CONTINUADA EN DERMATOLOGIA

Directores del Curso:

Dr. Josep Malvehy

Dra. Susana Puig

Servicio de Dermatología
Hospital Clínic Barcelona

#cursodermatoscopia

- Nuevos criterios diagnósticos en tumores y otras enfermedades de la piel.
- Desarrollo de la tecnología y su combinación con otras técnicas de diagnóstico no invasivo y la inteligencia artificial.
- Kahoots para jugar después de cada bloque de temas
- e-pósters para su discusión y la votación para elegir al premiado será entre todos los asistentes.

Profesorado

- **Zoe Apalla**. Servicio de Dermatología. Universidad Aristóteles. Tesalónica. Grecia
- **Giuseppe Argenziano**. Servicio de Dermatología. Universidad de Campania. Nápoles. Italia
- **José Bañuls Roca**. Servicio de Dermatología. Hospital General Universitario. Alicante
- **Cristina Carrera Álvarez**. Servicio de Dermatología. Hospital Clínic. Barcelona
- **Natalia Espinosa**. Servicio de Dermatología. Hospital Clínic. Barcelona
- **Lara Ferrándiz Pulido**. Servicio de Dermatología. Hospital Universitario Virgen de la Macarena. Sevilla
- **Reyes Gamo Villegas**. Servicio de Dermatología. Fundación Hospital Alcorcón. Madrid
- **Aimillos Lallas**. Servicio de Dermatología. Universidad Aristóteles. Tesalónica. Grecia
- **Caterina Longo**. Universidad de Módena y Reggio Emilia. Modena, Italia
- **Josep Malvehy Guilera**. Servicio de Dermatología. Hospital Clínic. Barcelona
- **David Moreno Ramírez**. Servicio de Dermatología. Hospital Universitario Virgen de la Macarena. Sevilla
- **Javiera Pérez Anker**. Servicio de Dermatología. Hospital Clínic. Barcelona
- **Sebastian Podlipnik**. Servicio de Dermatología. Hospital Clínic. Barcelona
- **Susana Puig Sardà**. Servicio de Dermatología. Hospital Clínic. Barcelona
- **Gissele Rezze**. Servicio de Dermatología. Hospital Clínic. Barcelona
- **Luc Thomas**. Servicio de Dermatología. Centro Hospitalario Universitario Lyon-Sud. Lyon. Francia
- **Pedro Zaballos Diego**. Servicio de Dermatología. Hospital de Sant Pau i Santa Tecla. Tarragona