



سَلَامٌ

A large, stylized calligraphic inscription in black ink on a white background. The text reads "سَلَامٌ" (Salam), which means "peace" or "greetings". The script is fluid and modern, with a prominent horizontal stroke connecting the letters. A small decorative flourish or dot is positioned above the second letter.



Optical Coherence Tomography in Glaucoma

OCT

Ramin Daneshvar, M.D.

Feb 2010

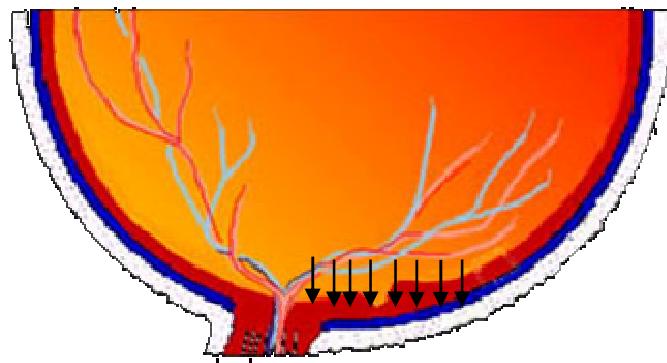


Optical coherence tomography

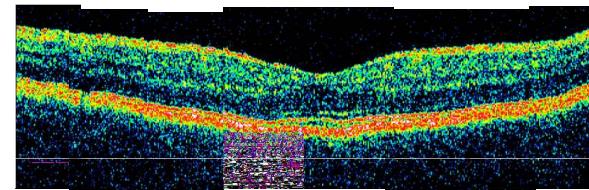
- Introduced in 1991, provides high-resolution direct measurements and cross-sectional imaging of the retina and the NFL. (OCT; Zeiss)



Is analogous to ultrasound B-scan imaging



OCT



B-Scan



- A short coherence length superluminescent diode source (850 nm)



- The operation of OCT is based on the principle of low coherence interferometry

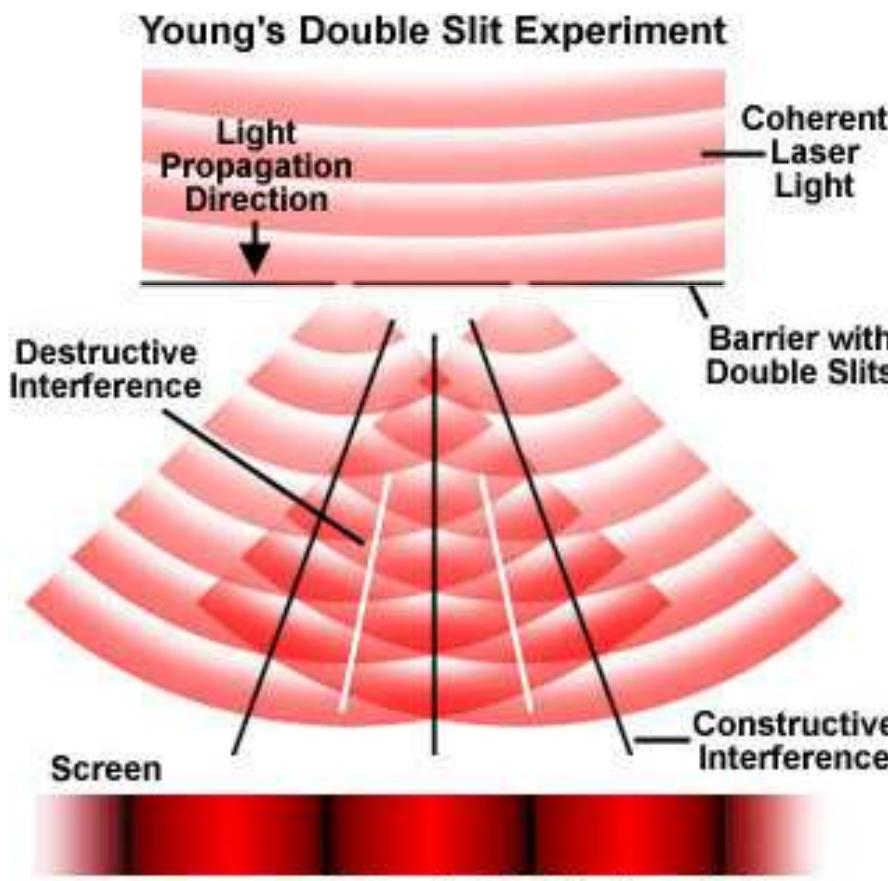
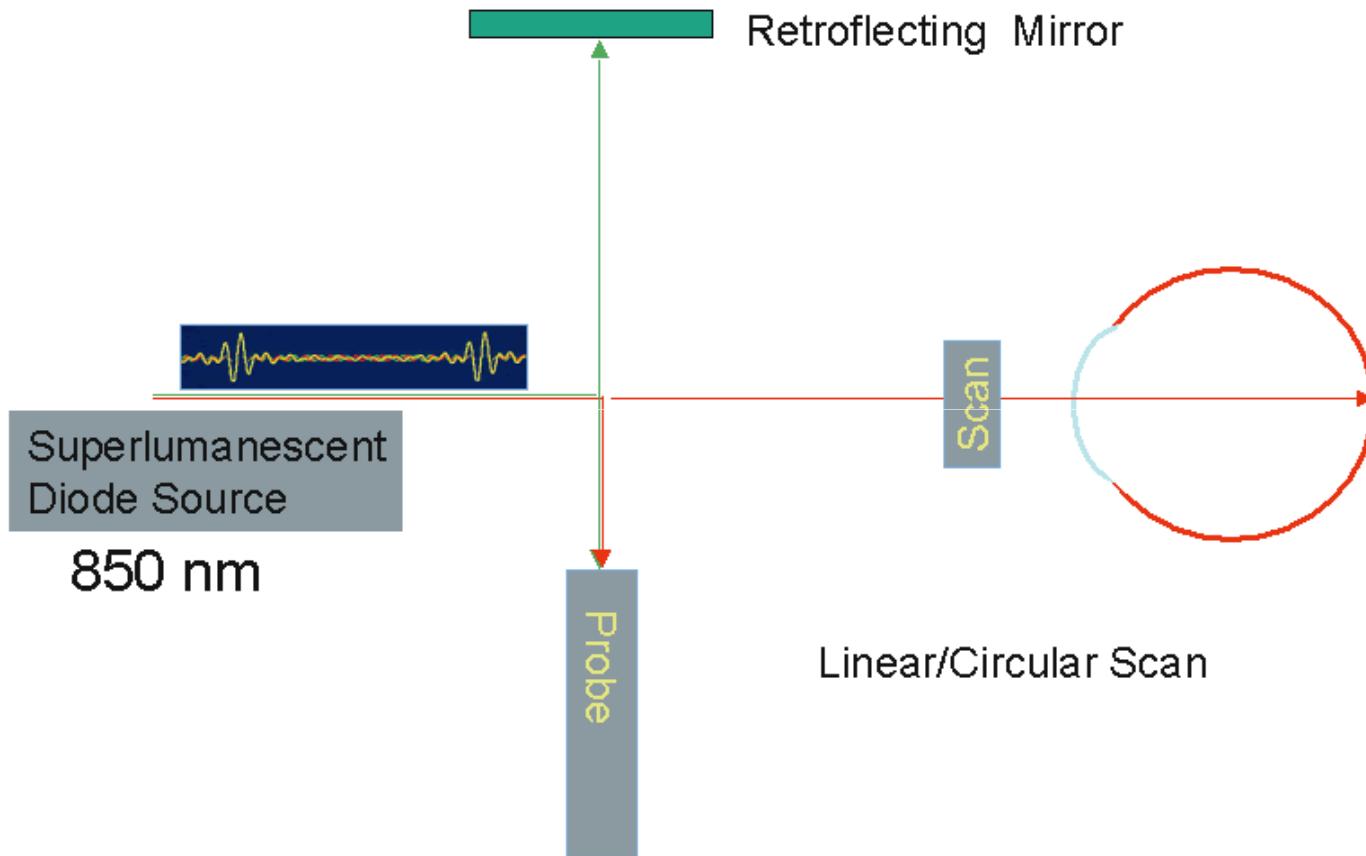


Figure 4 Intensity Distribution of Fringes
Ramin Daneshvar



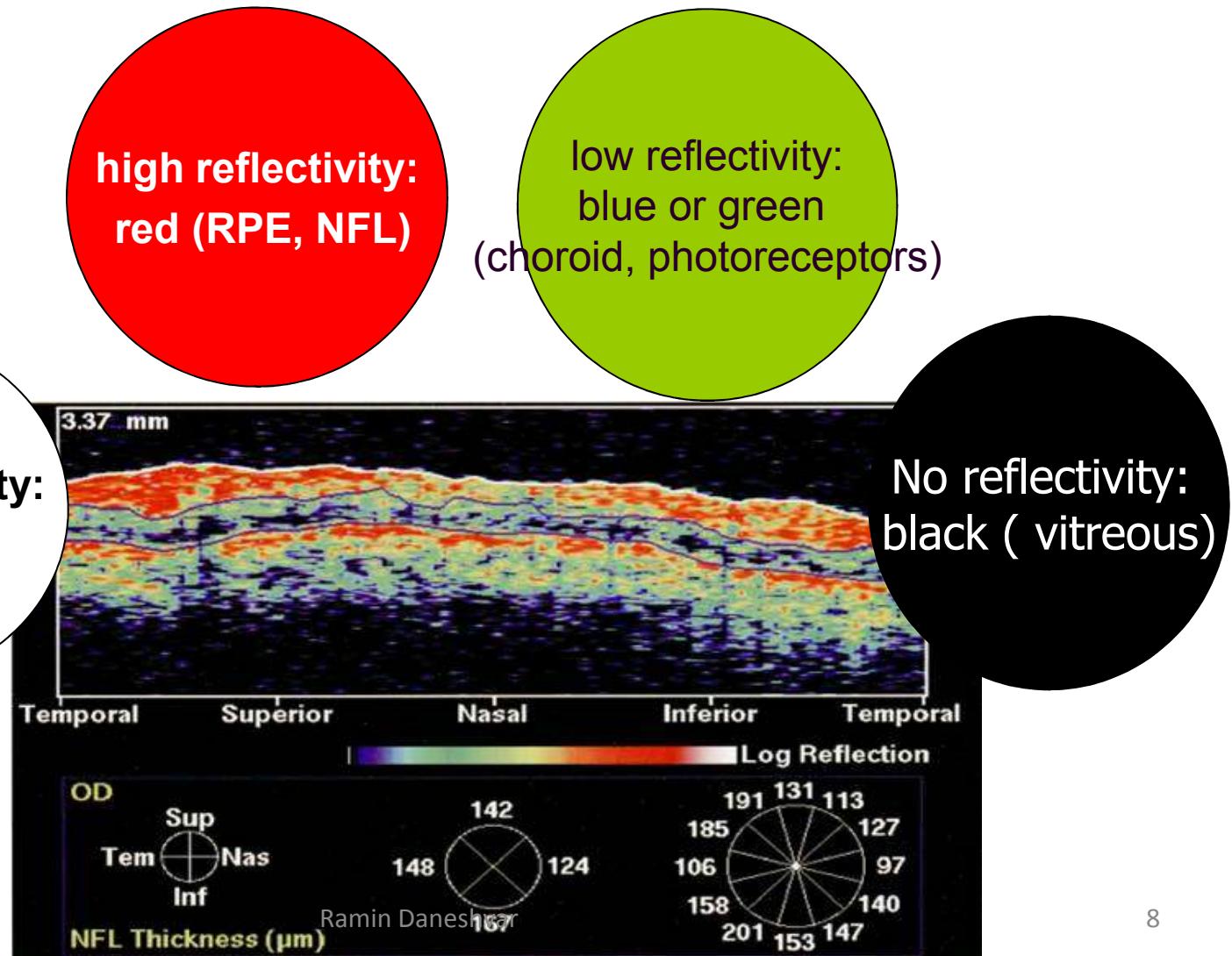
Michelson Interferometer

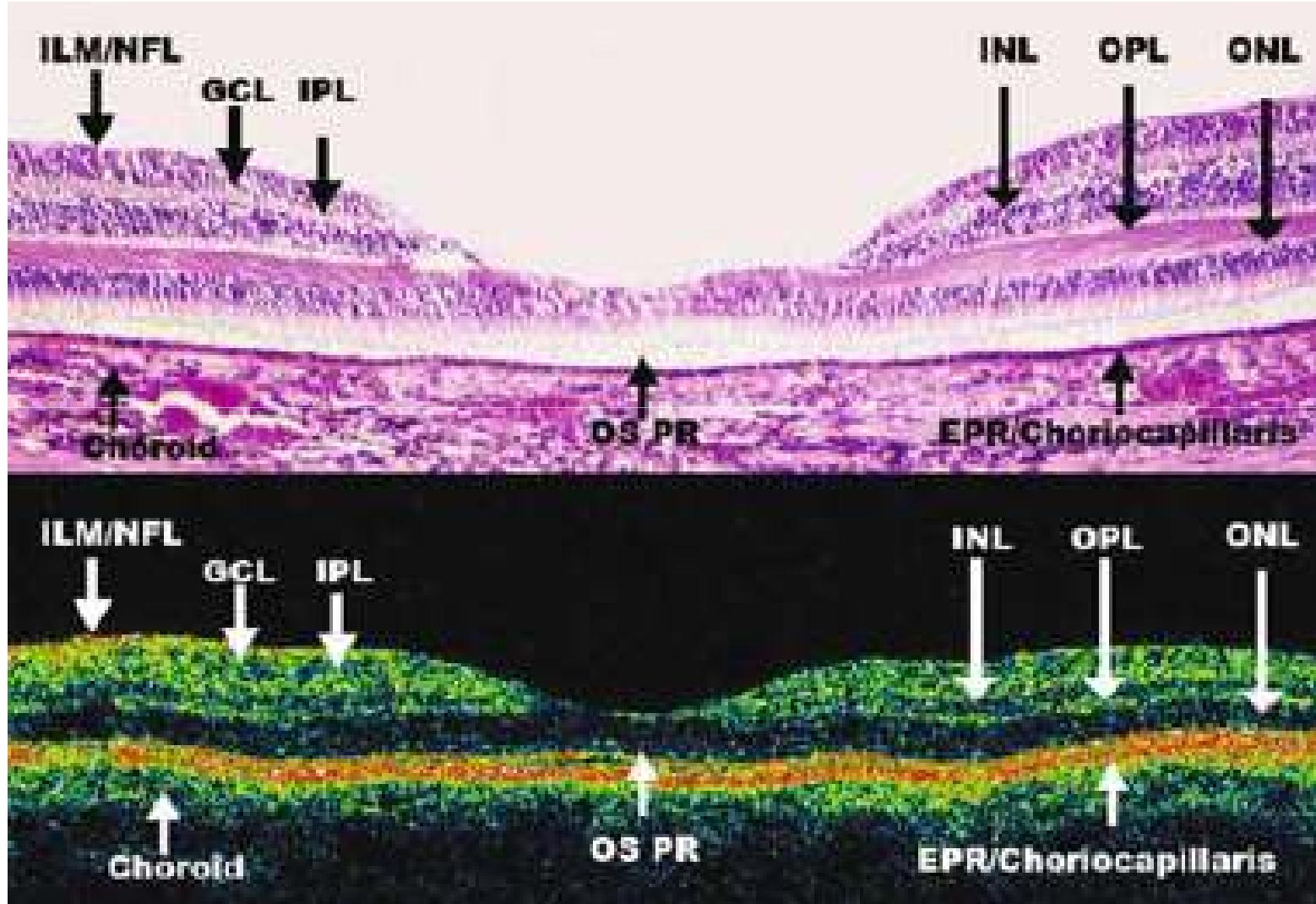


Reference Beam distance is known based on light velocity and time measurement



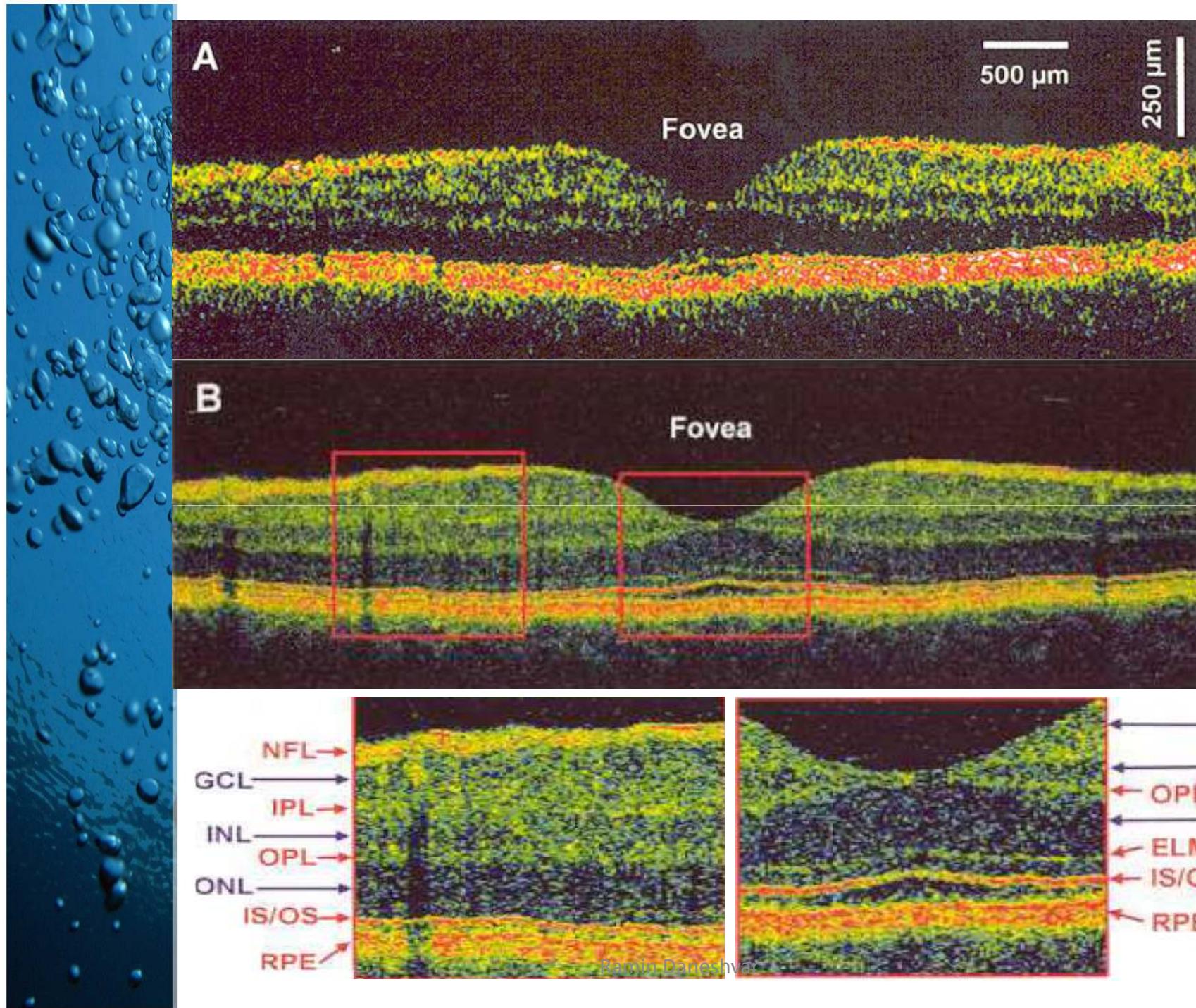
Pseudo-chromatic scale





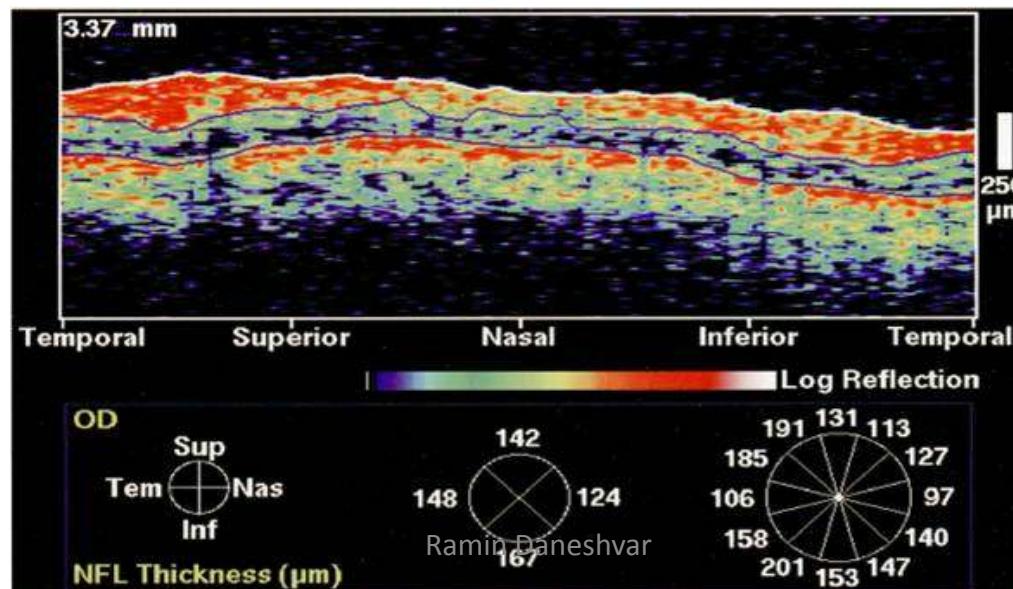


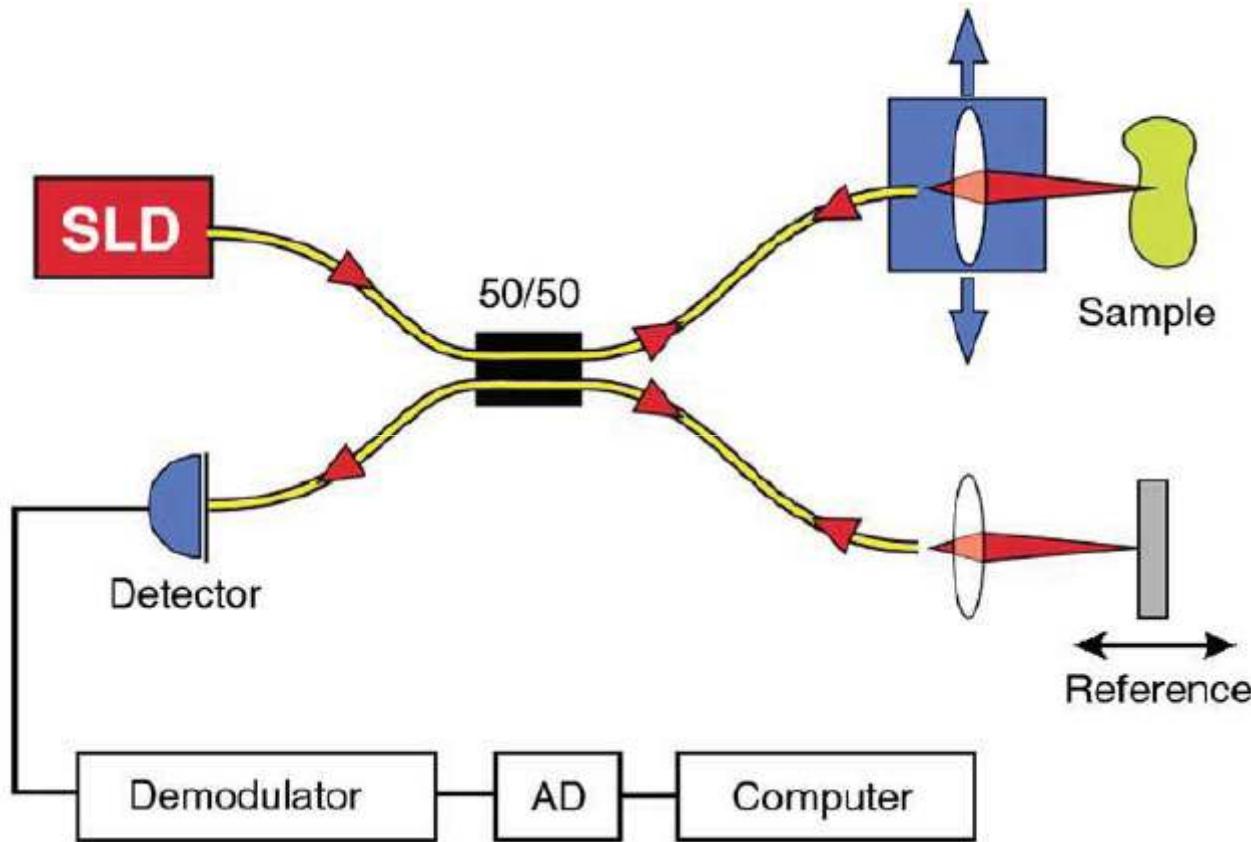
- Increased speed:
 - minimizes eye motion artifacts
 - Transverse and axial scan ↑
 - 3D image

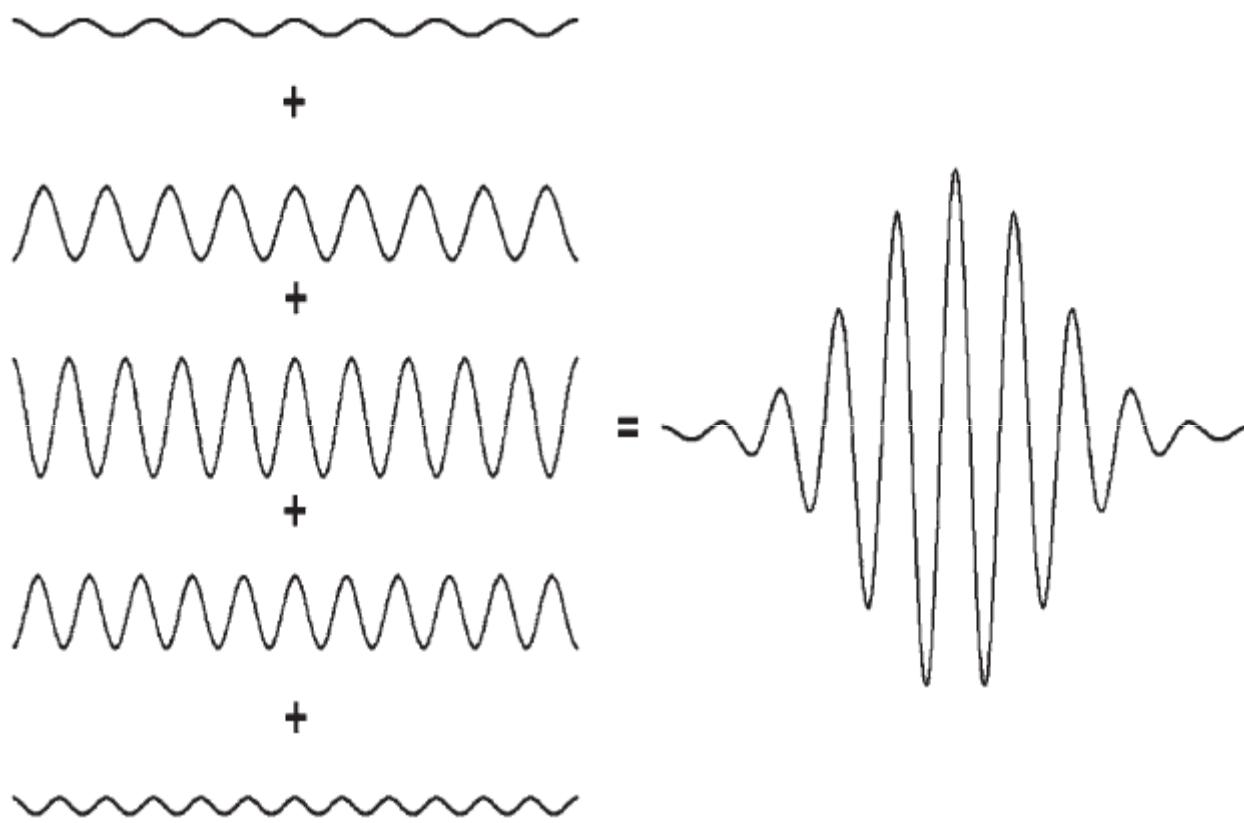


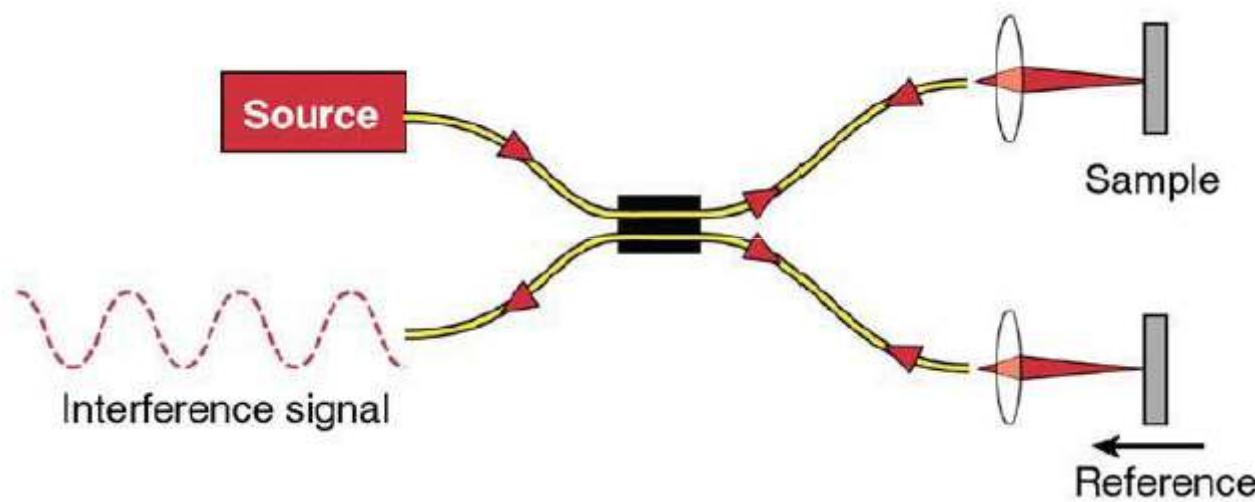


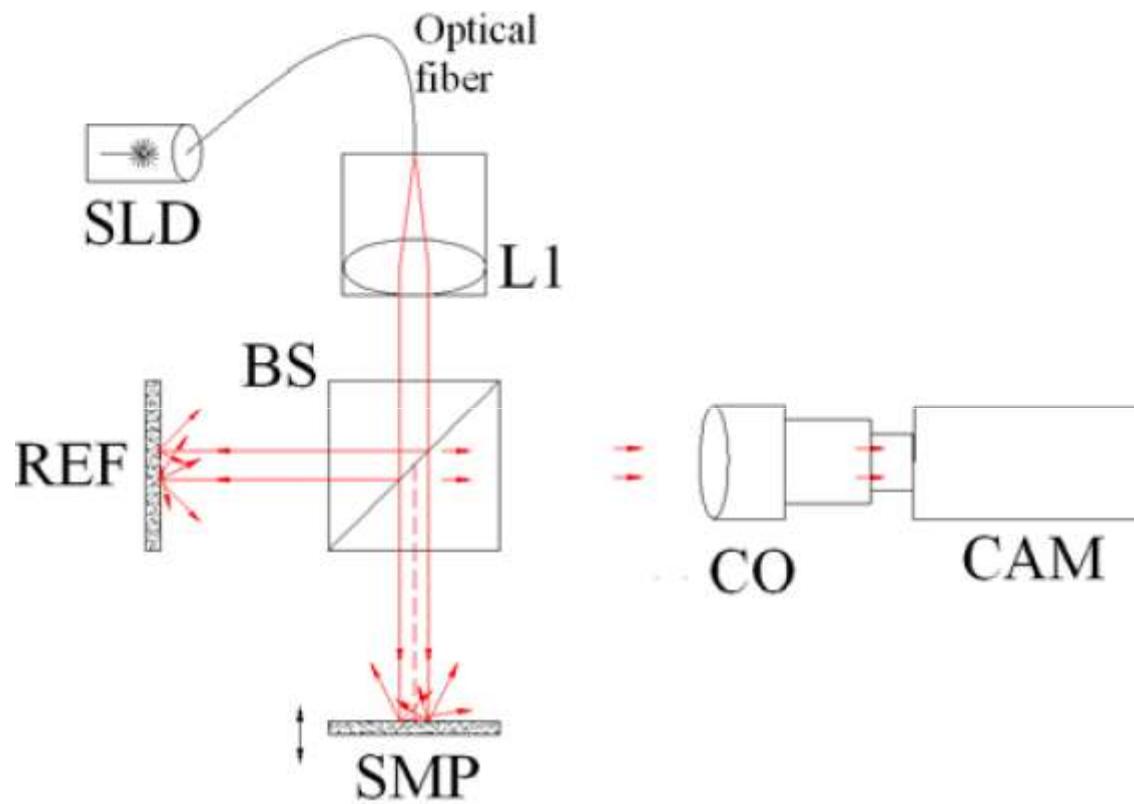
- The first reflection is the vitreoretinal interface
- The inner margin of the retina shows another bright area of backscattering corresponds to the RNFL.
- The highly reflective layer delineates the posterior boundary corresponding to the RPE

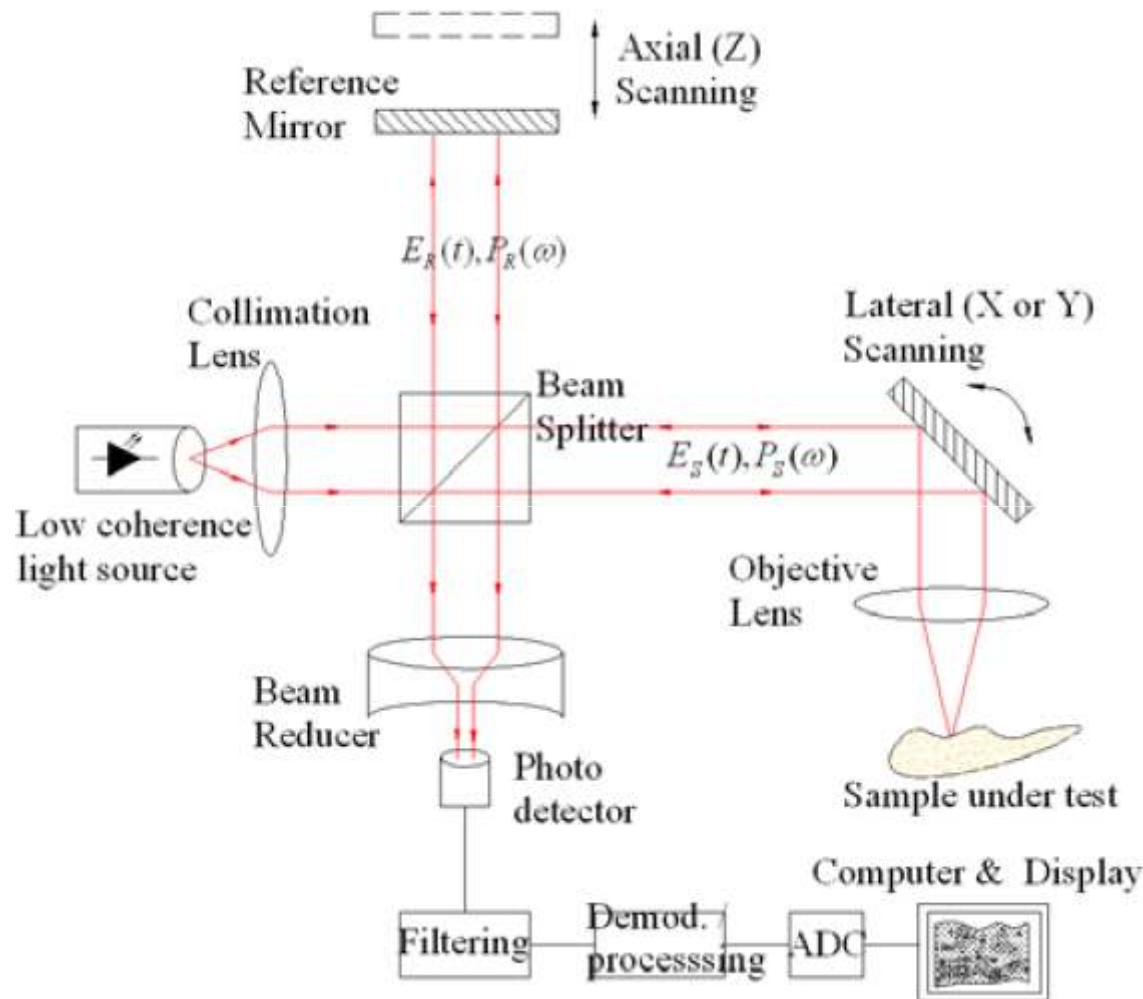


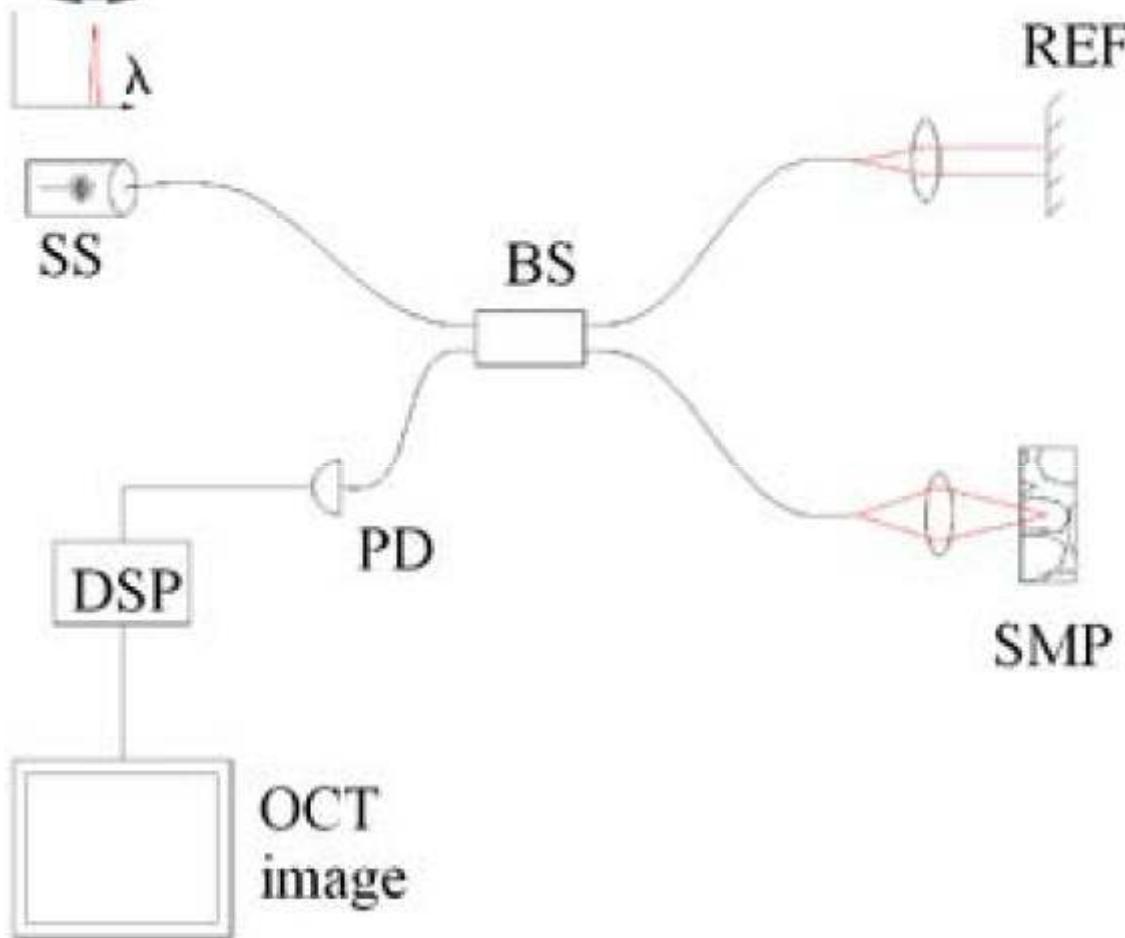


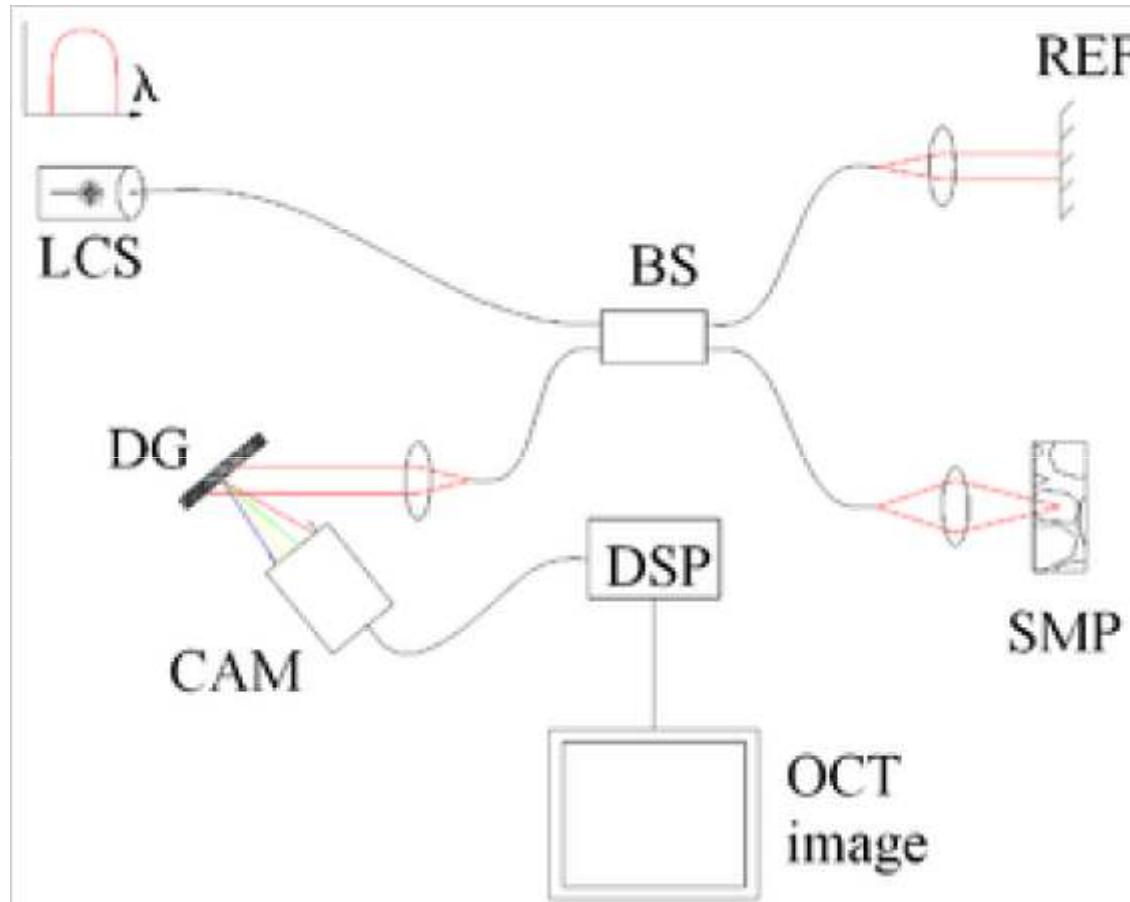


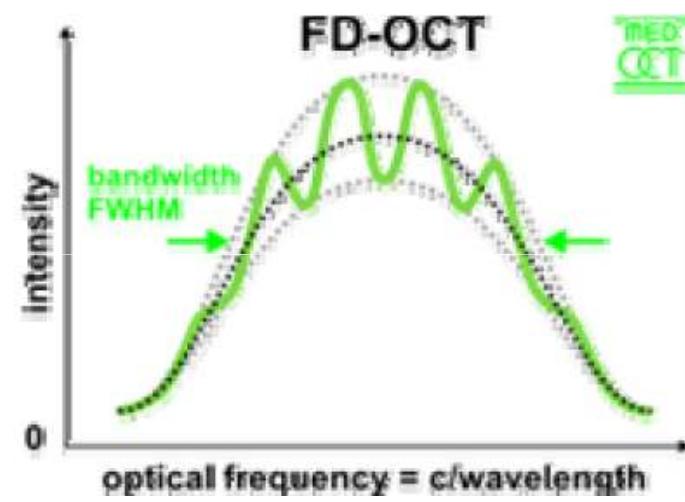
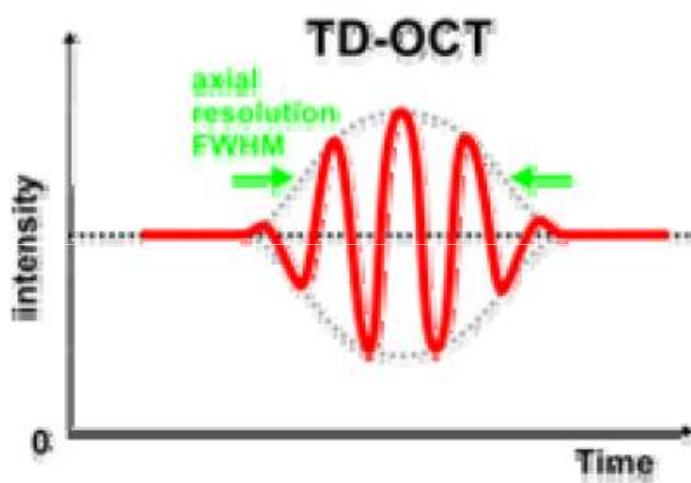


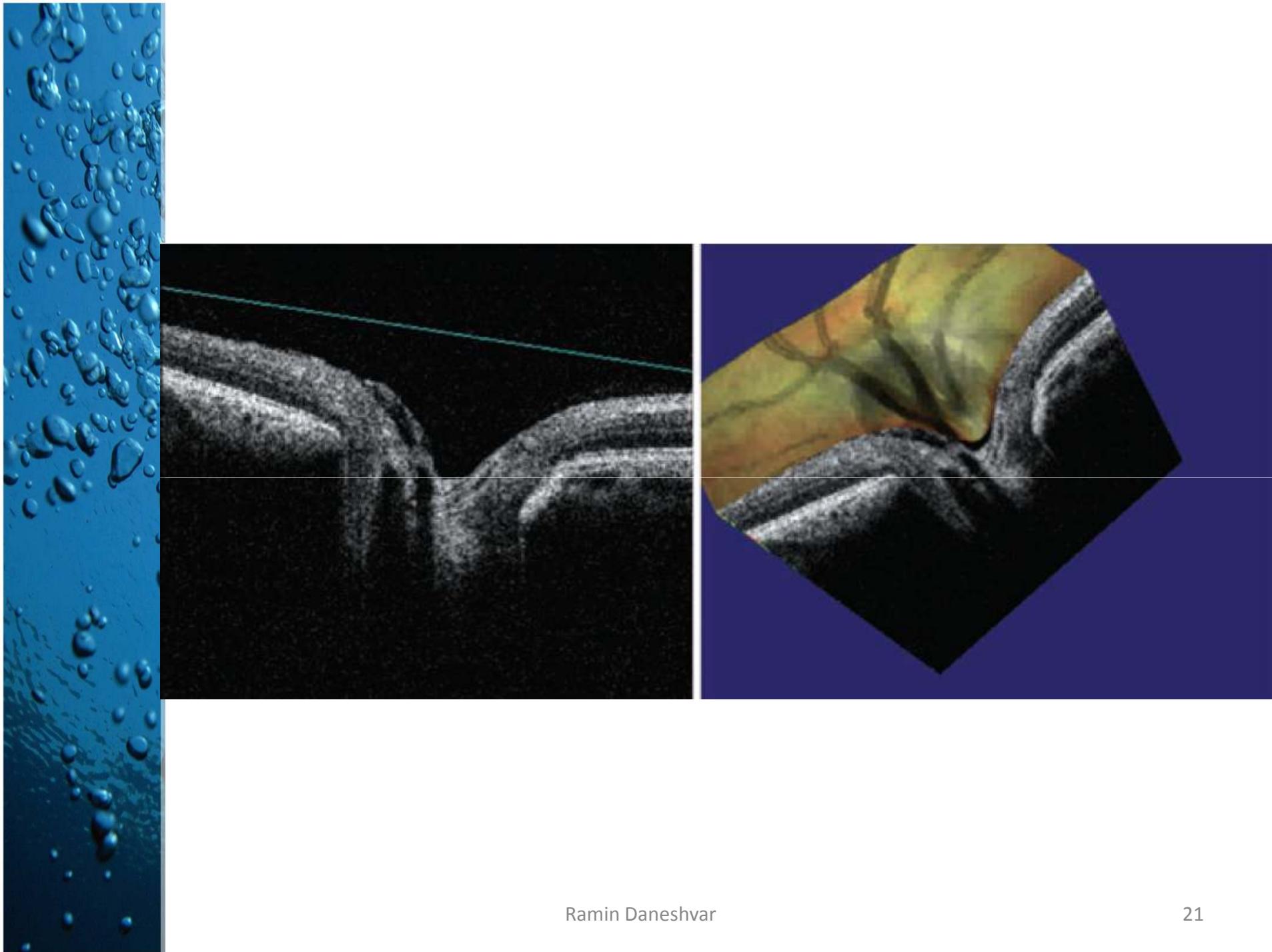




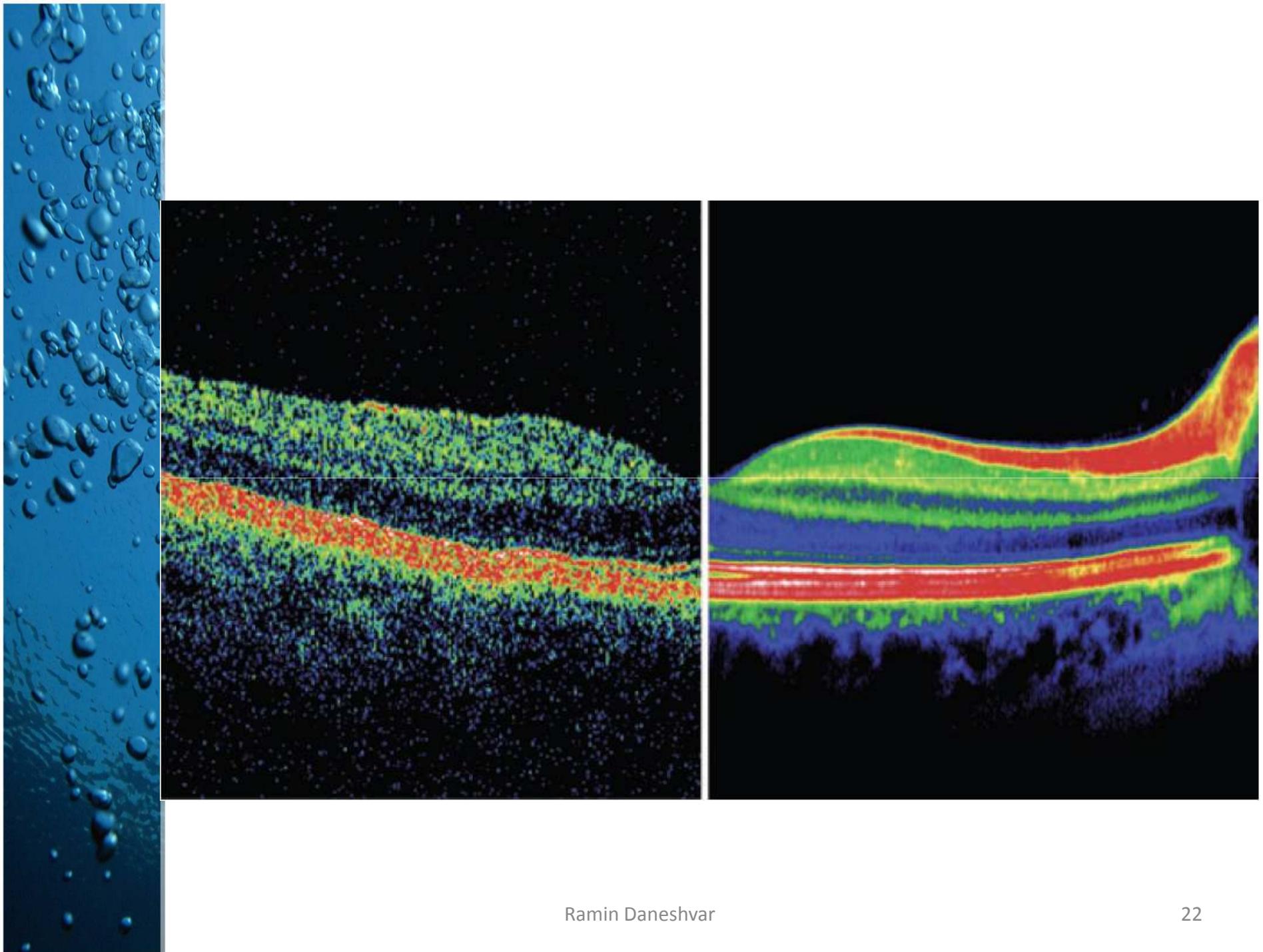








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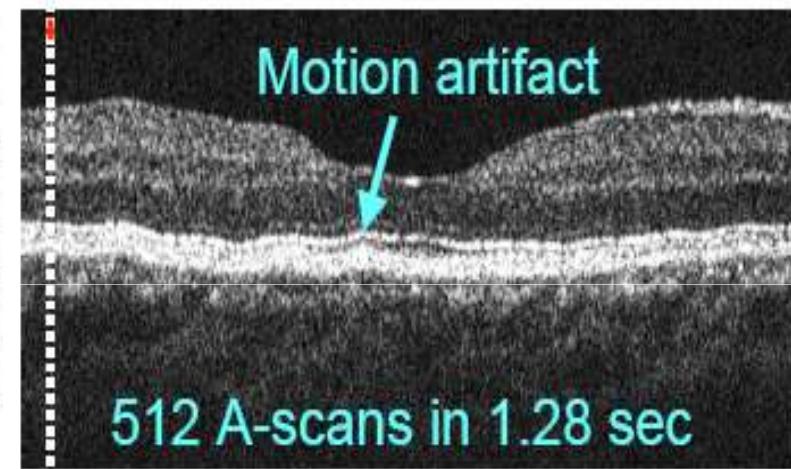
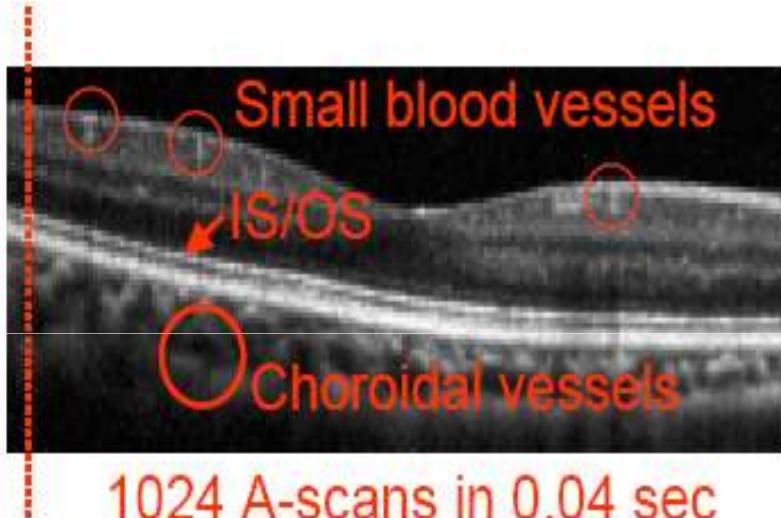
Instrument	Manufacturer	Axial resolution (μm)	Transverse resolution (μm)	Scan speed	Additional features
RTVue OCT	OptoVue	5	15	26 000 A-scan/s	Segmentation of multiple retinal layers, anterior segment OCT module
Cirrus HD-OCT	Carl Zeiss Meditec	5	25	27 000 A-scan/s	Segmentation of the ILM and RPE
Spectralis OCT	Heidelberg Engineering	3.5	14	40 000 A-scan/s	Eye tracking, automatic rescan, infrared imaging
Spectralis OCT + HRA	Heidelberg Engineering	3.5	14	40 000 A-scan/s	Same as above + red-free imaging, autofluorescence, fluorescein, and ICG angiography
SOCT Compernicus HR	Optopol Technology SA	3	12–18	55 000 A-scan/s	Detect RAPD, Doppler analysis of retinal blood flow
Spectral OCT SLO	OPKO Instruments/OTI OPKO Health	5–6	15	27 000 A-scan/s	Registration with SLO, Microperimetry
3D OCT-1000	Topcon Medical Imaging Systems	6	20	18 000 A-scan/s	Combined OCT with fundud camera
Bioptigen SDOCT	Bioptigen	4.5	10	20 000 A-scan/s	Handheld



FD OCT(RTVue)

- Fourier domain instead of time domain
- Decreases image acquisition time and improves resolution
- Permits 3-D imaging
- Compare to Stratus
 - 2x resolution
 - 65x faster





Higher speed, higher definition and higher signal.



- The pupil should be pharmacologically dilated
- Pupillary dilatation :
 - OCT I and II : 5 mm,
 - OCT III : 3 mm
 - Cirrus, fourier domain: optional
- Need fixation
- Measurements are **not** affected by:
 - refractive status
 - moderate NS

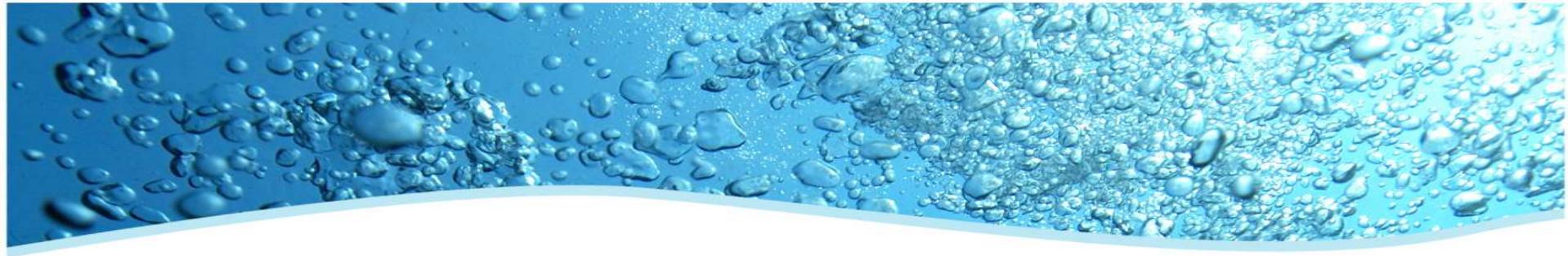


- SENSITIVITY: 76-82%
- SPECIFICITY: 84-92%
- Correlation with
 - SLP, HRT
 - SAP, SWAP



Comparison of imaging device resolutions

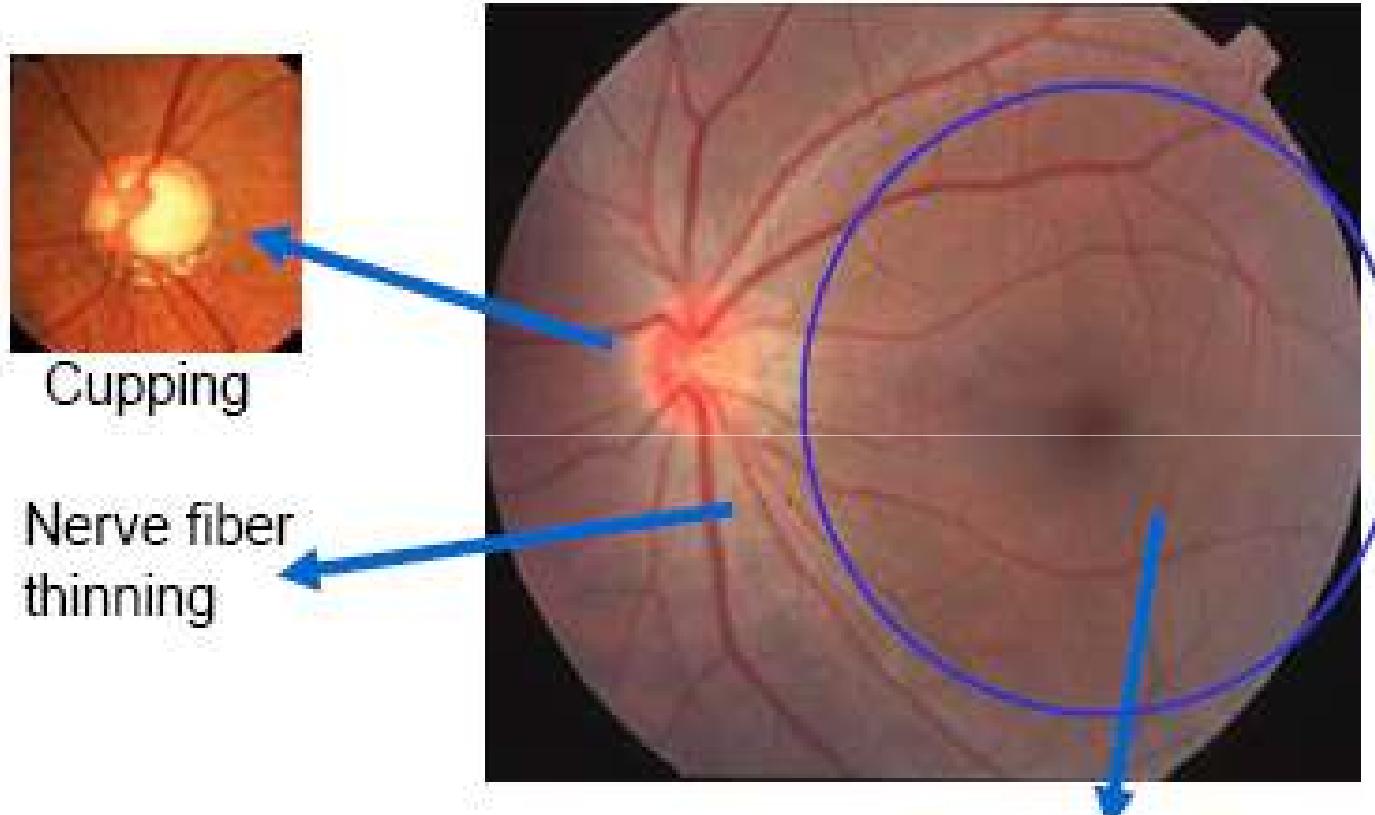
- CT and MRI: hundreds of microns
- Conventional ultrasound: 150μ
- UBM 20μ (penetration: 4 mm)
- OCT I, II : $12-15 \mu$
- OCT III : $8-10 \mu$
- Ultra-high resolution (UHR) OCT : $2-3\mu$



***IMAGES
FOR
GLAUCOMA***



Glaucoma affects 3 areas in the posterior segment of the eye



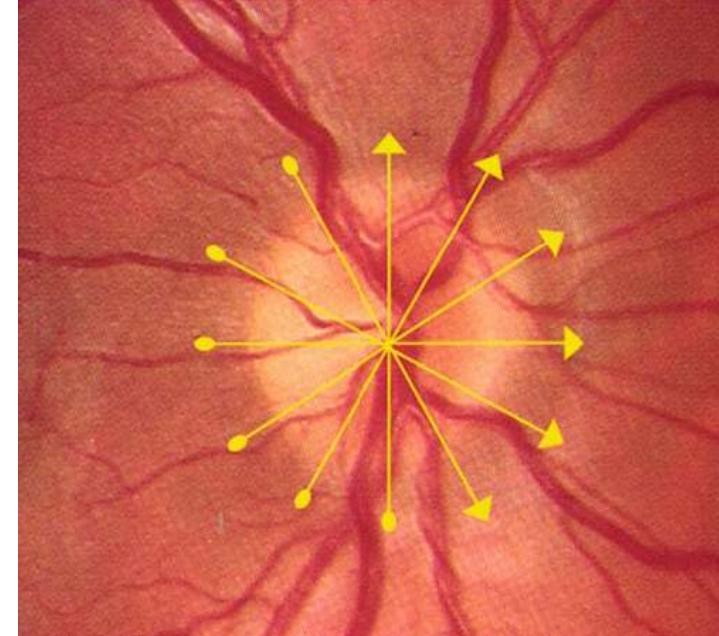
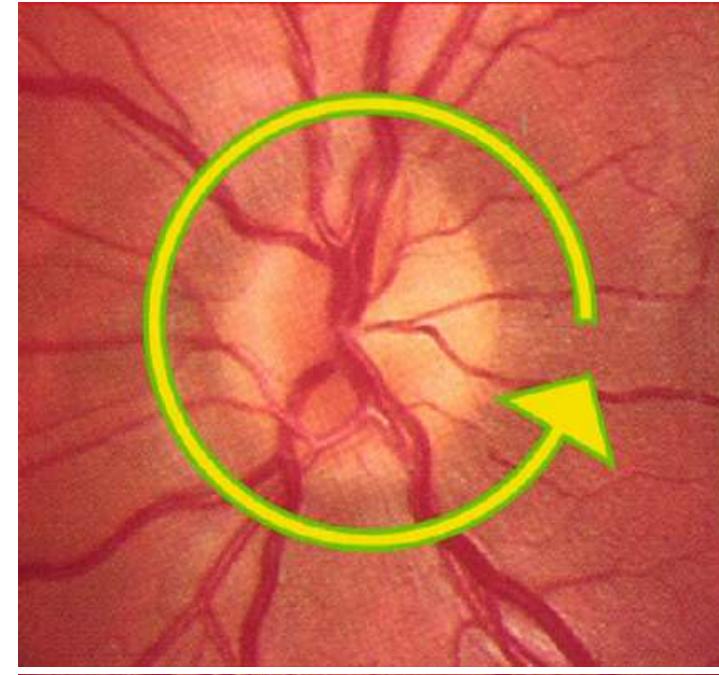
Macular volume

(has a reverse correlation with glaucoma damage)

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- NFL thickness in the peripapillary region
circular (3.4mm)
- Optic nerve head profile



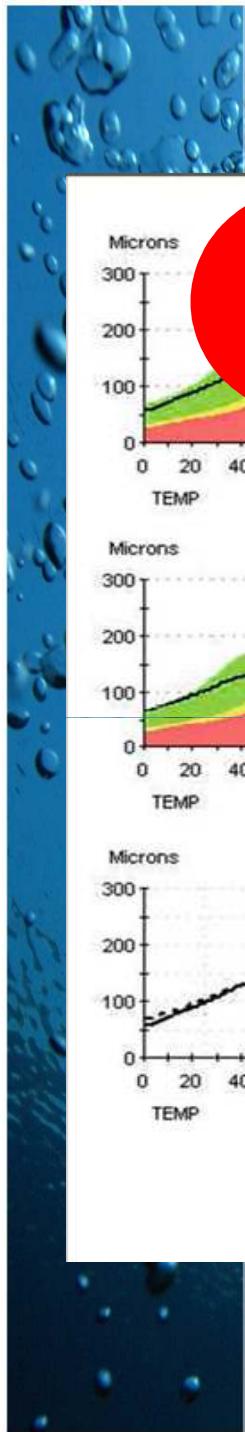


Stratus OCT

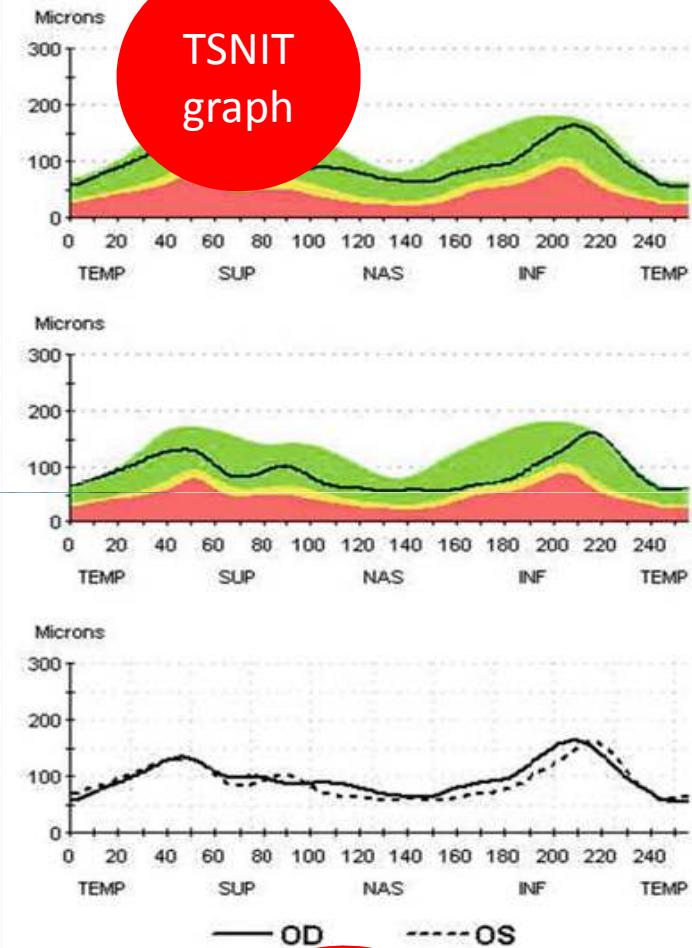


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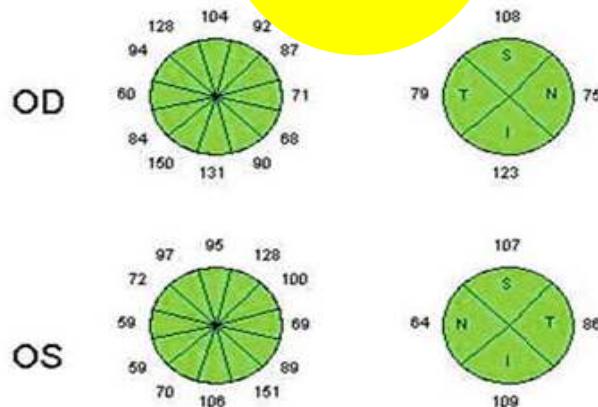


TSNIT
graph

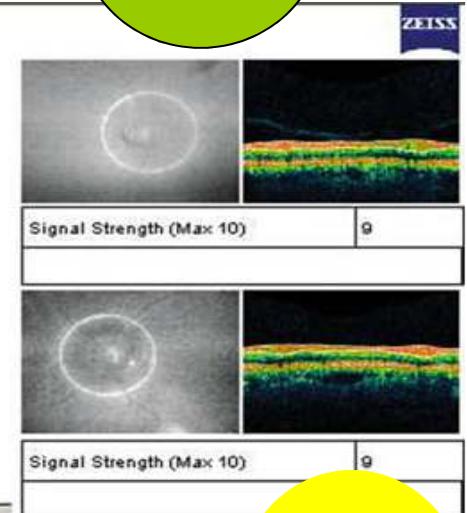


OU graph

Sector & quadrant averages

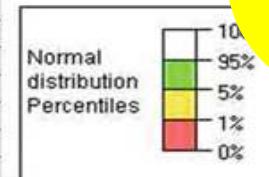


Fundus image
Scan image



Signal
strength

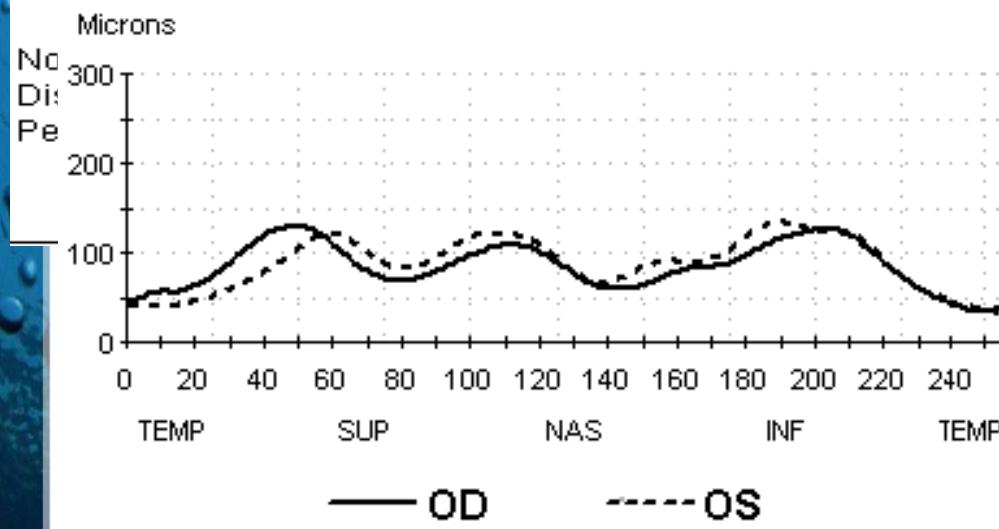
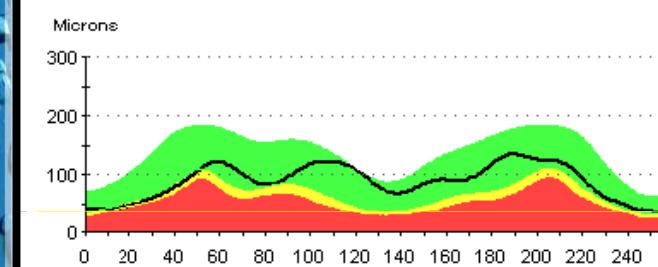
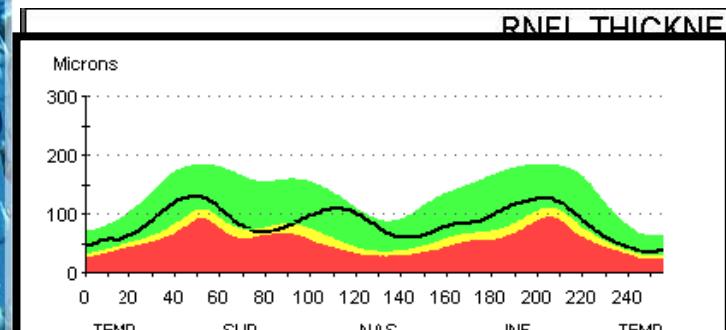
	OD (N=3)	OS (N=3)	OD-OS
I _{max} /S _{max}	1.21	1.22	0.00
S _{max} /I _{max}	0.82	0.82	0.00
S _{max} /T _{avg}	1.69	1.54	0.15
I _{max} /T _{avg}	2.05	1.87	0.18
S _{max} /N _{avg}	1.78	2.08	-0.30
Max-Min	107.00	103.00	4.00
S _{max}	134.00	132.00	2.00
I _{max}	162.00	161.00	1.00
S _{avg}	108.00	107.00	1.00
I _{avg}	123.00	109.00	14.00
Avg.Thickness	96.59	91.26	5.33



Patient/Scan Information

DOB: 2/18/1936, ID: NA, Female
Scan Type Fast RNFL Thickness (3.4)
Scan Date 5/12/2005
Scan Length 10.87 mm

Tubular
Data



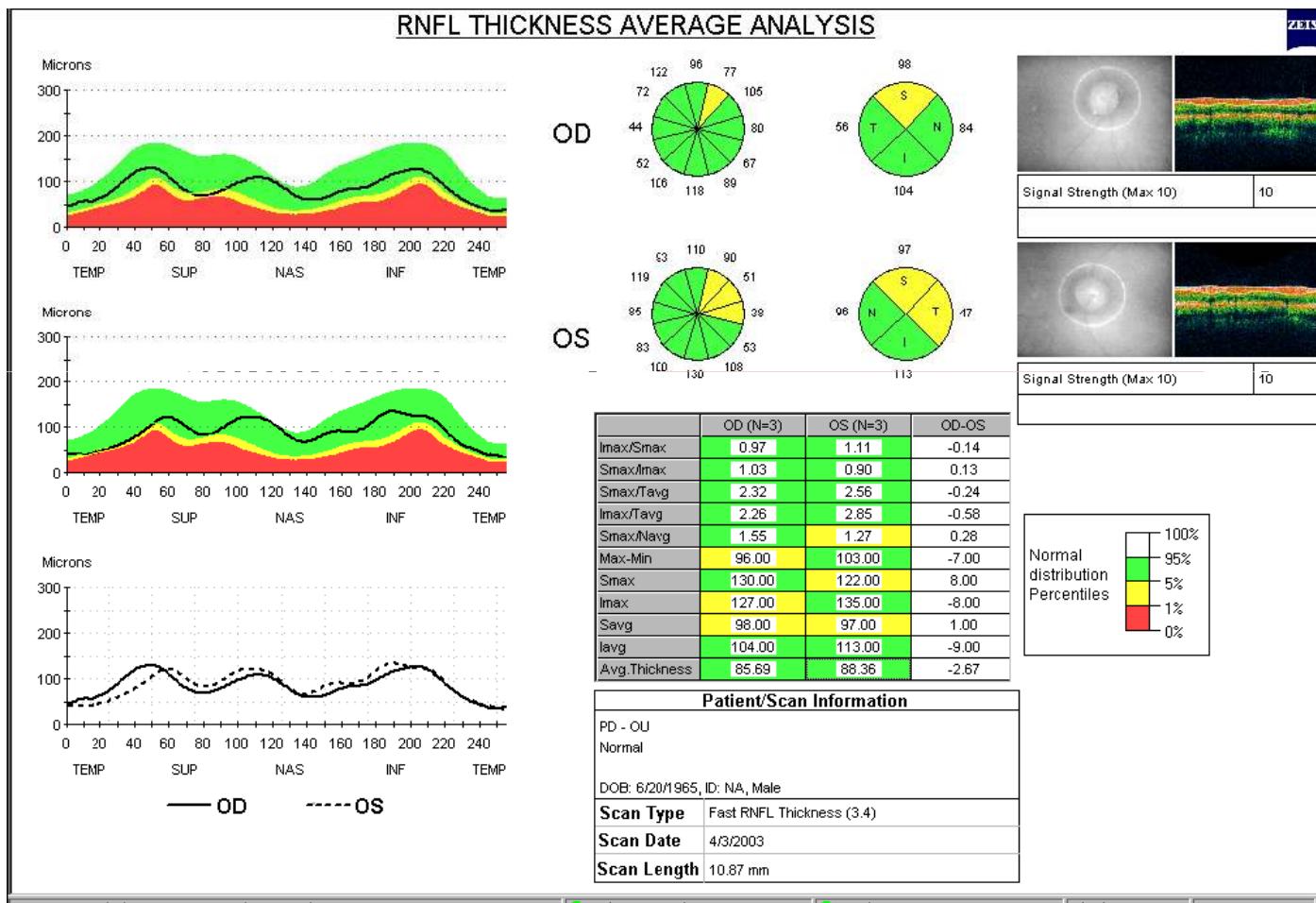
weak) to 10 (strong).
6 not accepted

Signal Strength (Max 10)

10

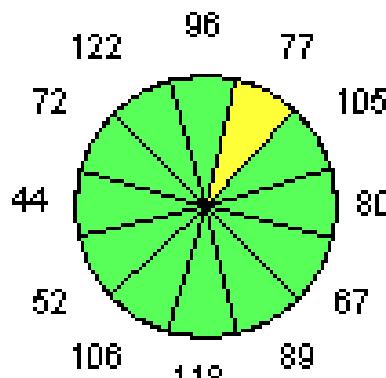
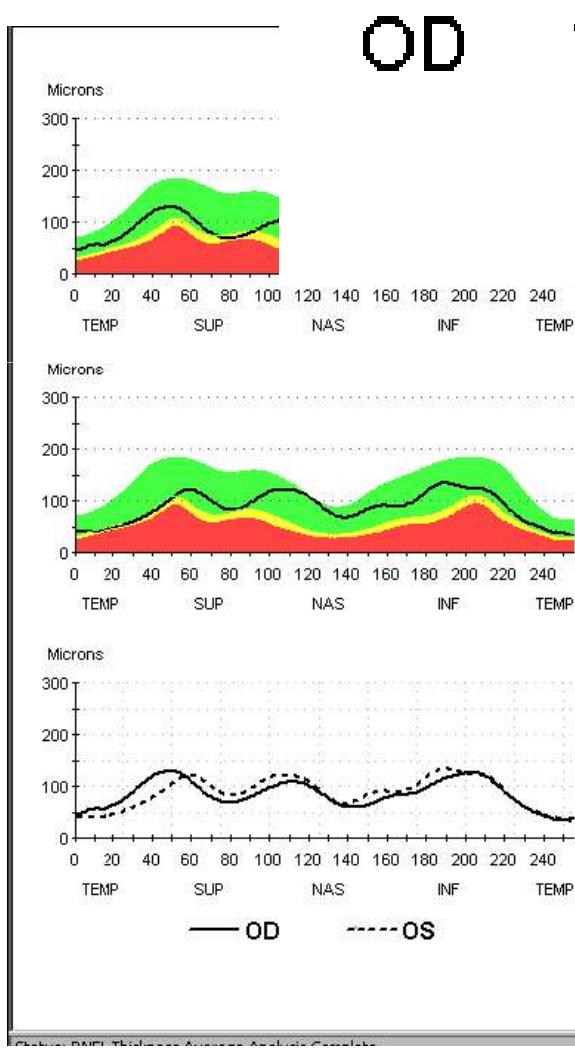


RNFL thickness (TSNIT) chart

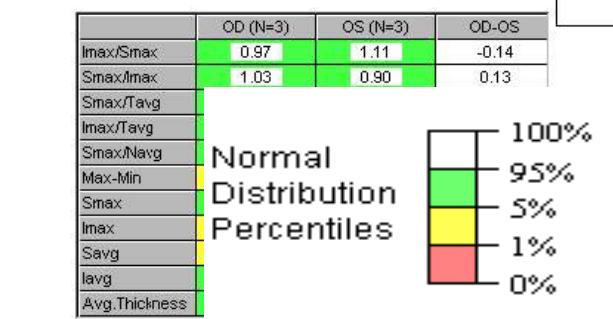
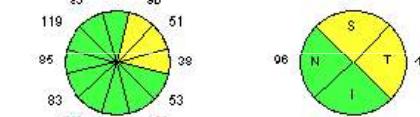




Sector and Quadrant Averages Legend



OS



PD - OU
Normal

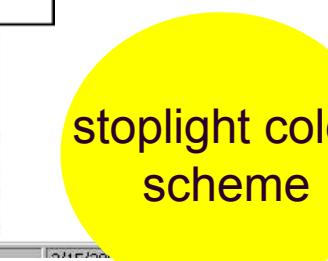
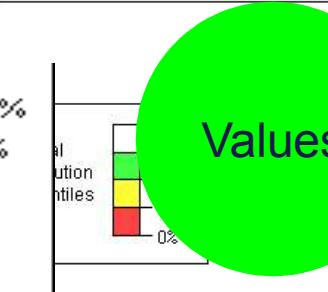
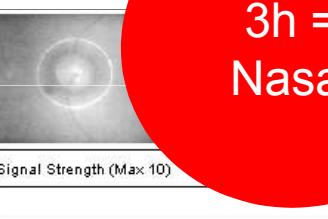
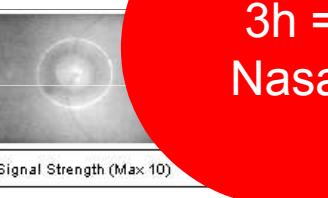
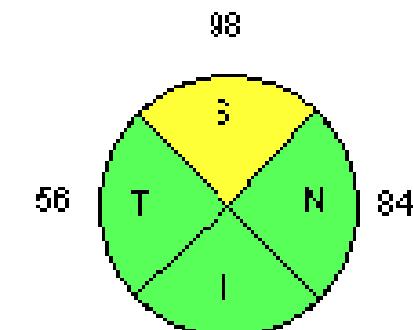
DOB: 6/20/1965, ID: NA, Male

Scan Type: Fast RNFL Thickness (3.4)

Scan Date: 4/3/2003

Scan Length: 10.87 mm

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Tubular data

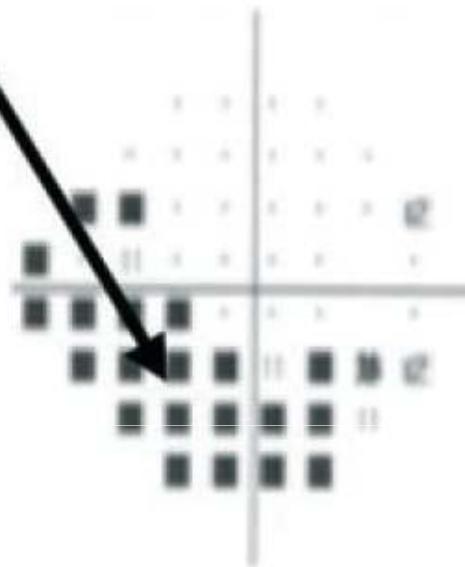
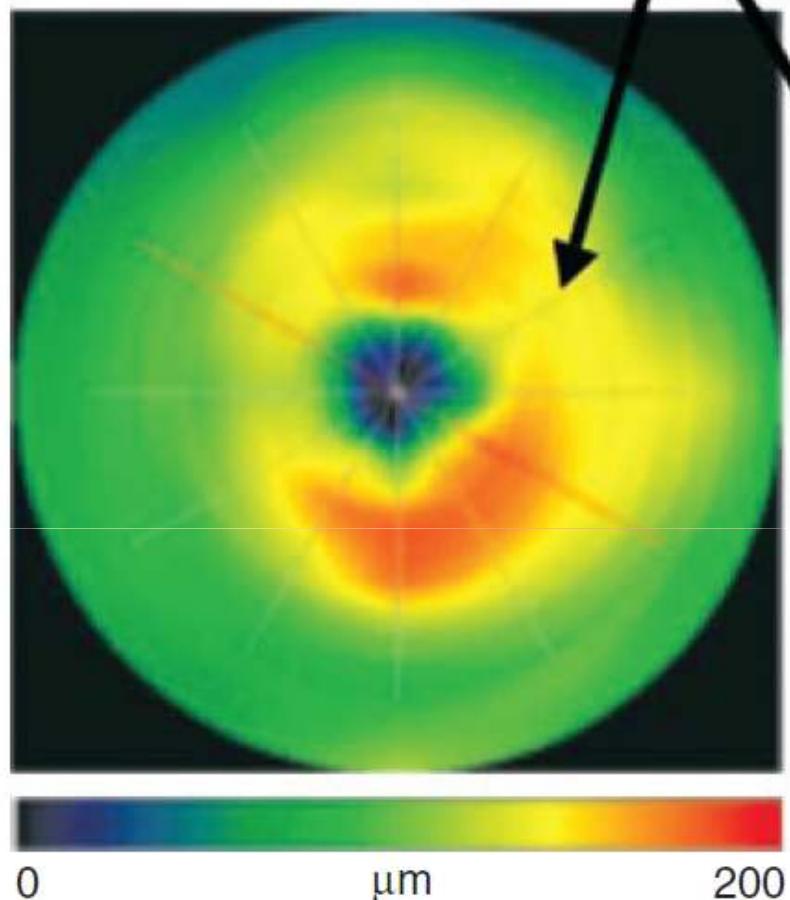
Is there any smart parameter like NFI?

	OD (N=3)	OS (N=3)	OD-OS
I _{max} /S _{max}	0.97	1.11	-0.14
S _{max} /I _{max}	1.03	0.90	0.13
S _{max} /T _{avg}	2.32	2.56	-0.24
I _{max} /T _{avg}	2.26	2.85	-0.58
S _{max} /N _{avg}	1.55	1.27	0.28
Max-Min	96.00	103.00	-7.00
S _{max}	130.00	122.00	8.00
I _{max}	127.00	135.00	-8.00
S _{avg}	98.00	97.00	1.00
T _{avg}	104.00	113.00	-9.00
Avg.Thickness	85.69	88.36	-2.67

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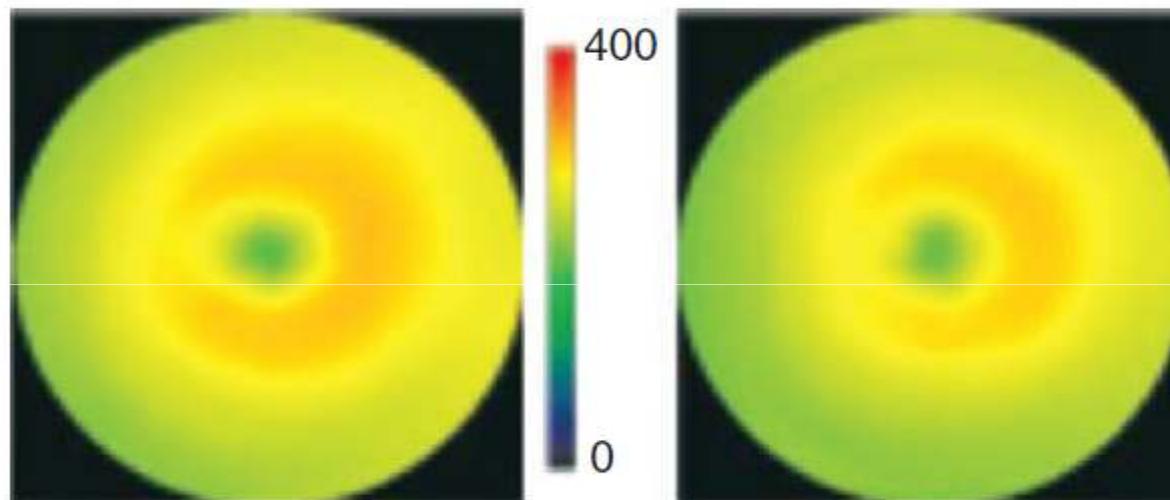
Correspondence of thinning
and field defect



Glaucomatous Eye with NFL loss in
maculopapillary bundle



Whole retina



AROC 0.82

$265.3+/-8.3$

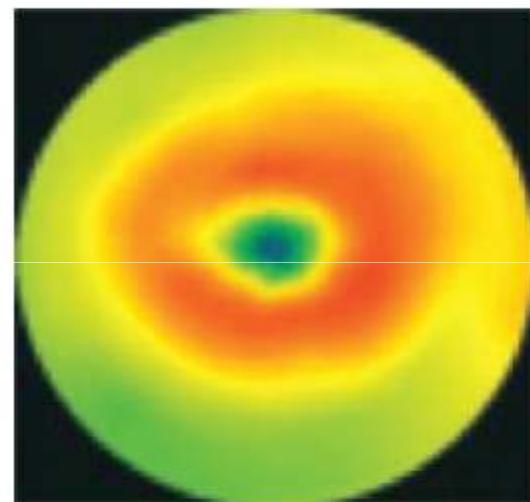
Normal

$240.6+/-23.3^{***}$

Glaucoma



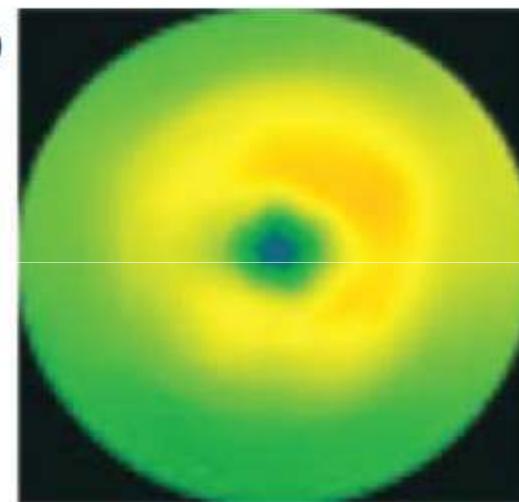
Inner retinal complex



90.7+/-4.2

Normal

AROC 0.94

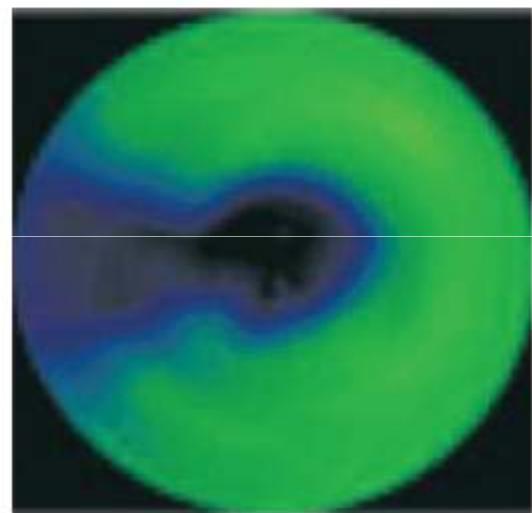


73.7+/-8.8***

Glaucoma



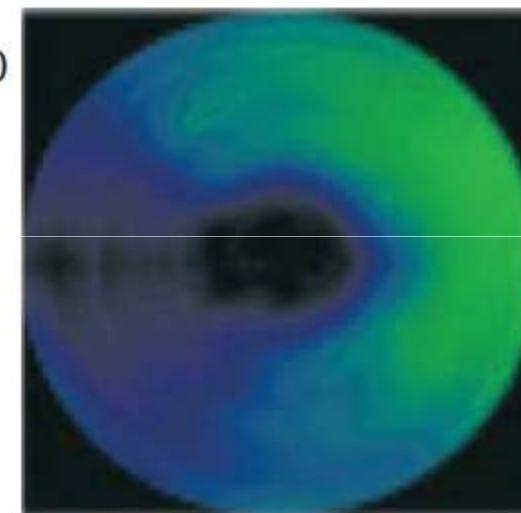
Macular nerve fibre
layer thickness



28.4+/-4.7

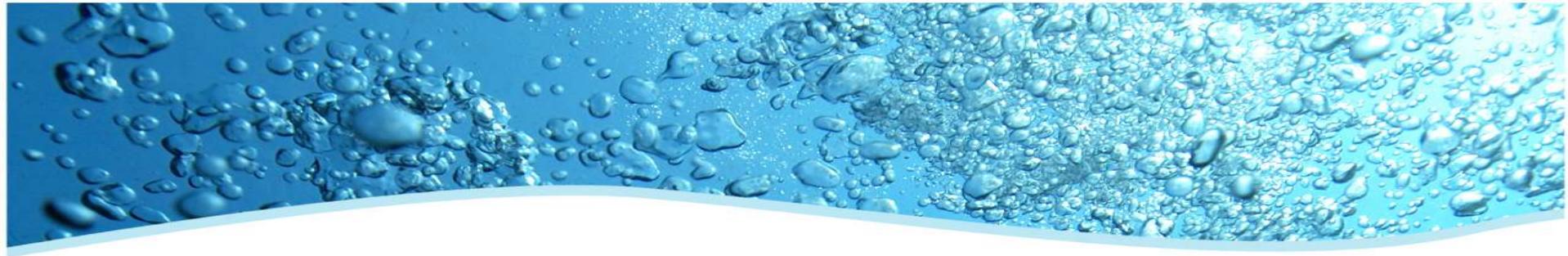
Normal

AROC 0.95



15.6+/-6.3***

Glaucoma

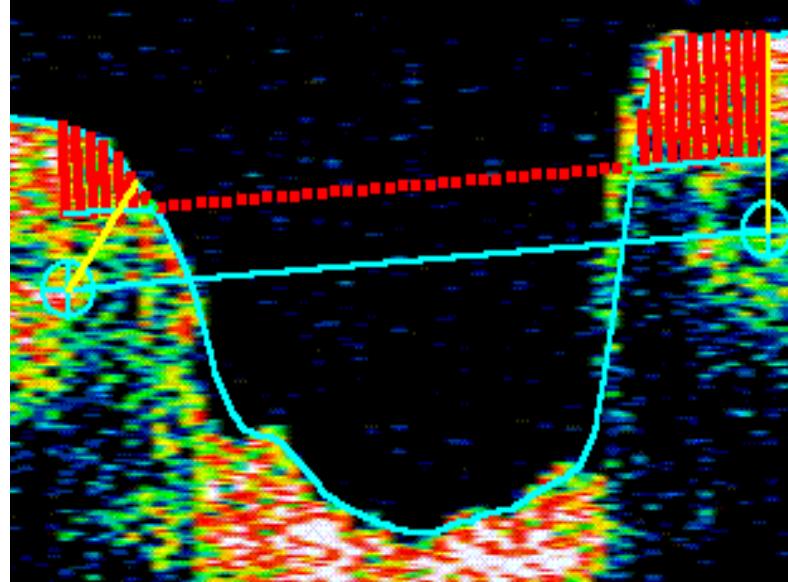


***OPTIC
NERVE
HEAD
ANALYSIS***



Optic Nerve Head Analysis

- Disk margin is selected from the end of RPE reflection.
- Does not require reference plane.



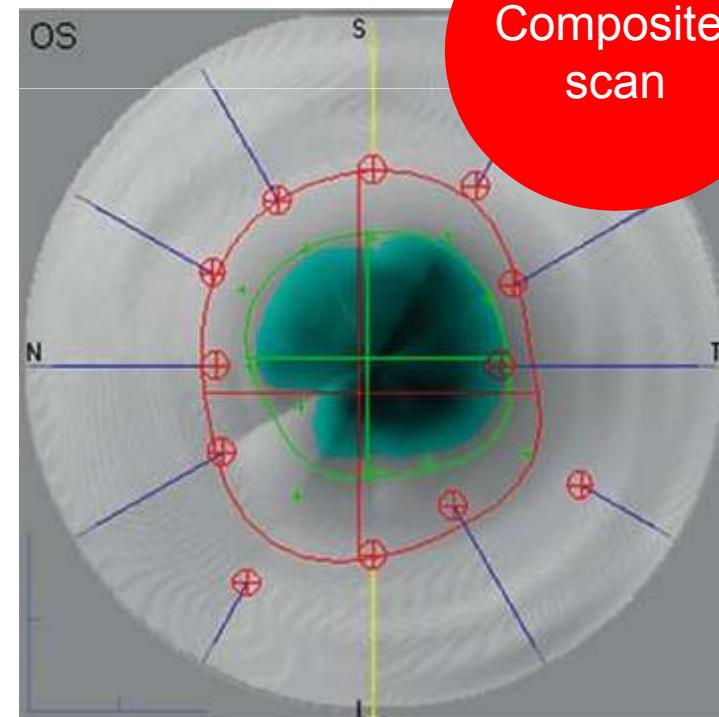
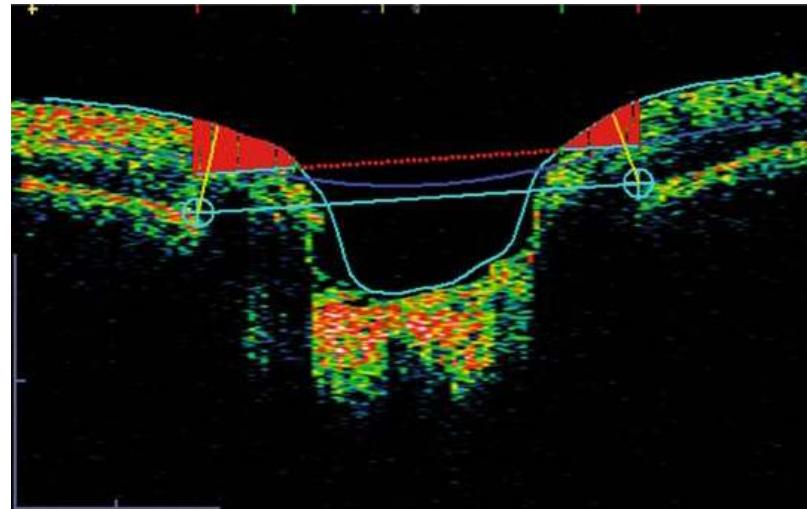
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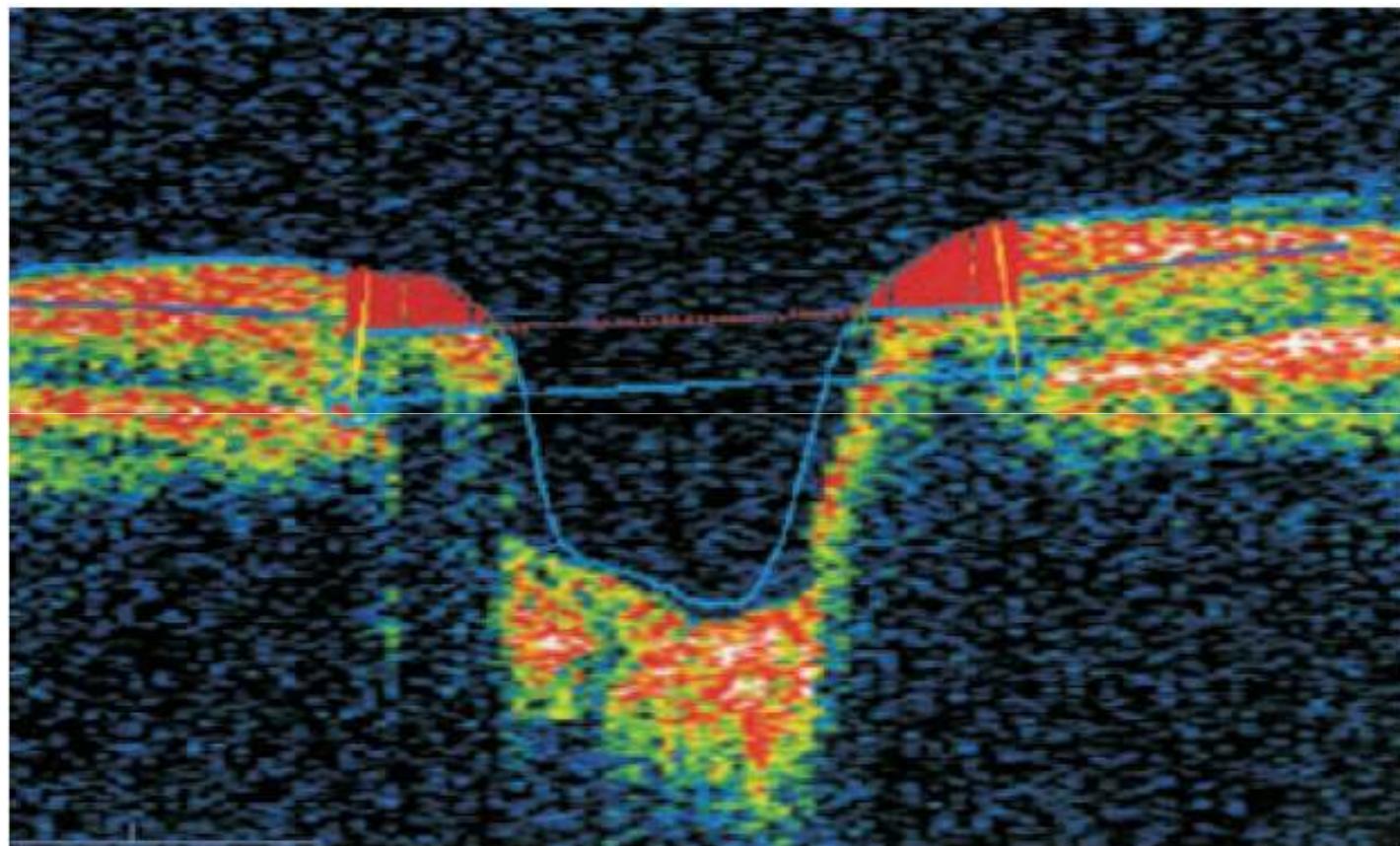


Optic Nerve Head Analysis

- A parallel line 150 μm anterior to it is used to define the cup (area below) and the neuroretinal rim (area above)



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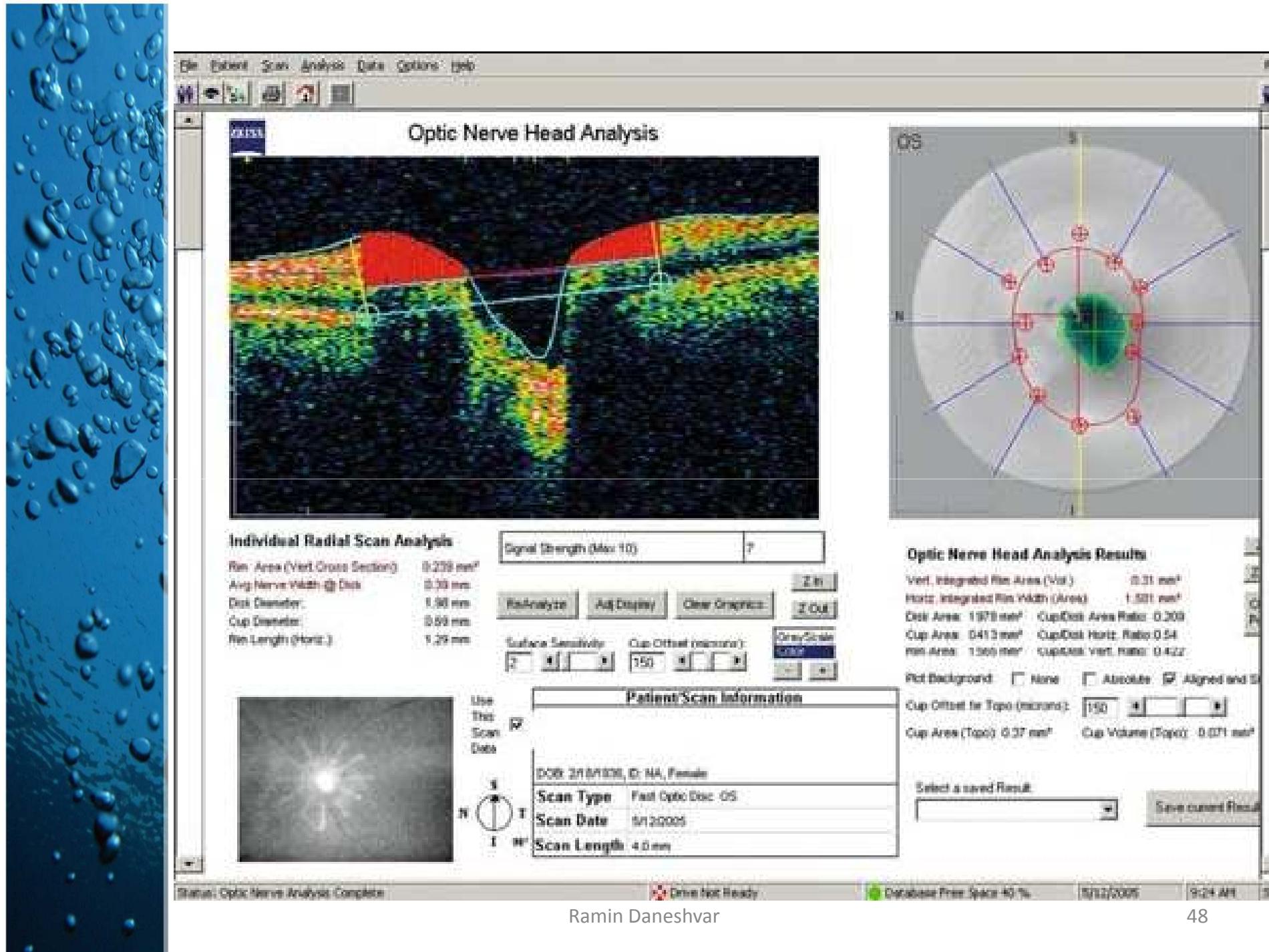


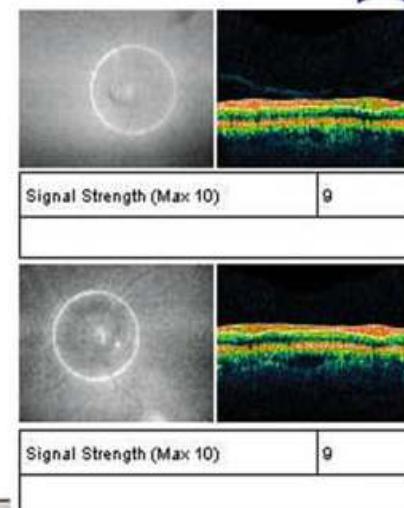
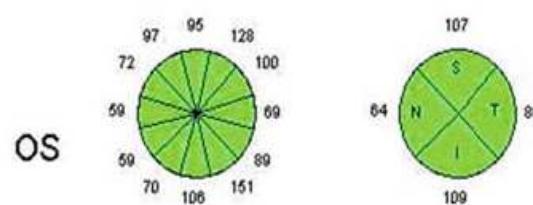
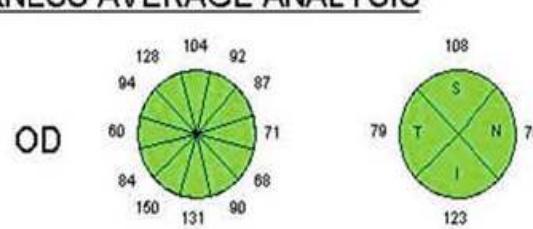
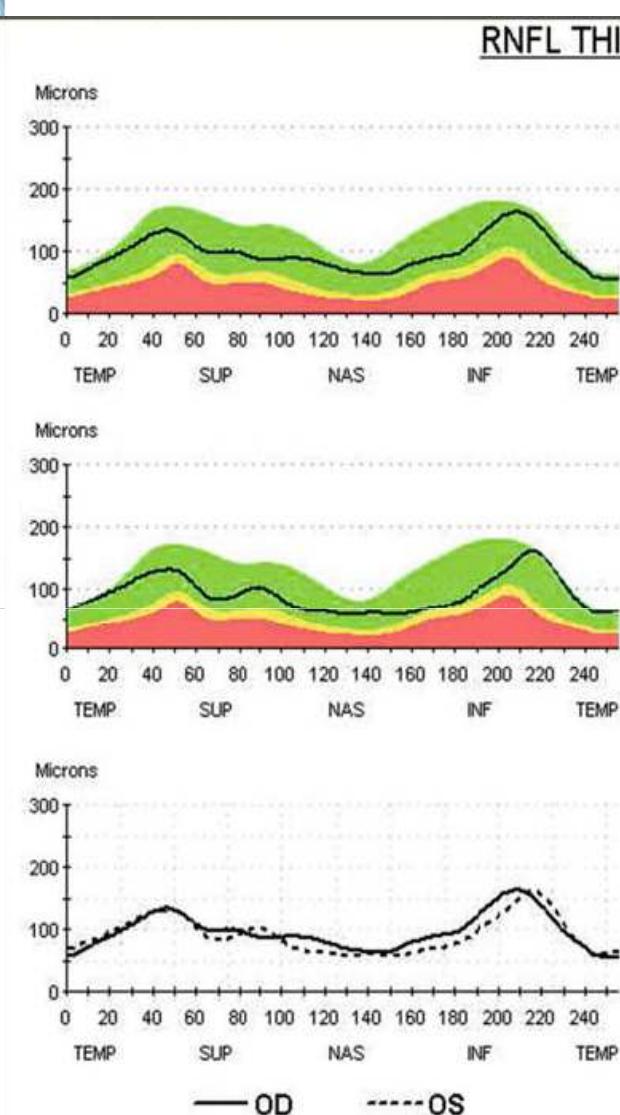
Rim Area (Vert.Cross Section): .122 mm²
Avg Nerve Width @ Disk .34 mm
Disk Diameter: 2.06 mm
Cup Diameter: 1.43 mm
Rim Length (Horiz.): .63 mm

Vert. Integrated Rim Area (Vol.)	.202 mm ³
Horiz. Integrated Rim Width (Area)	1.586 mm ²
Disk Area	3.061 mm ²
Cup Area	1.731 mm ²
Rim Area	1.33 mm ²
Cup/Disk Area Ratio	0.566
Cup/Disk Horiz. Ratio	0.79
Cup/Disk Vert. Ratio	0.727

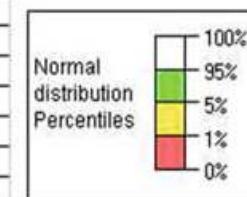


- The edge of the cup:
 - green dot on the scan image
 - Green x on the composite diagram.
- The end of RPE:
 - blue on scan image
 - Red on composite diagram

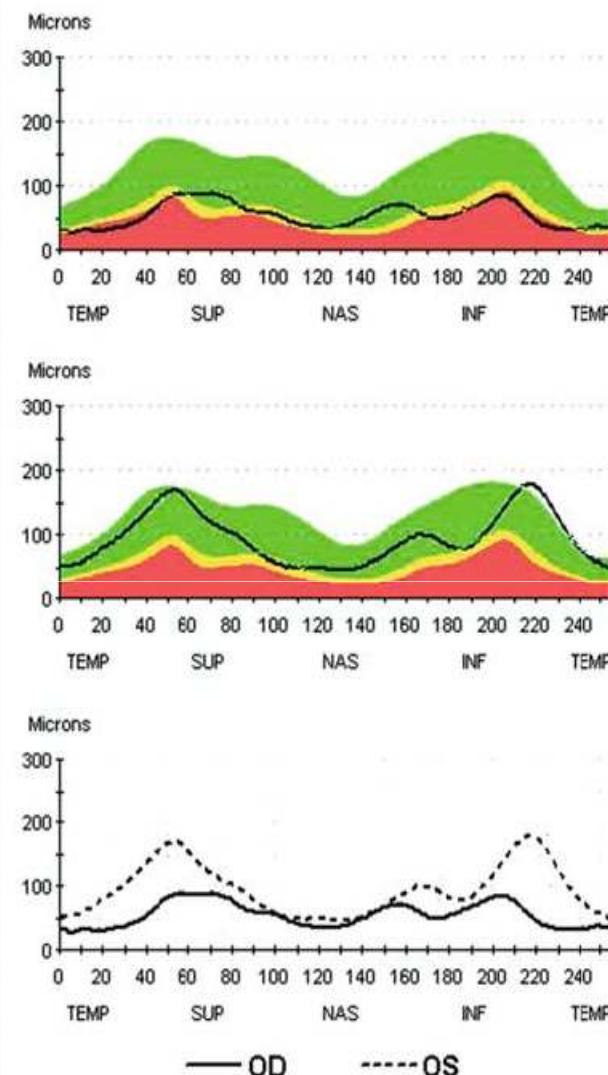




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I _{max} /T _{avg}	2.05	1.87	0.18
S _{max} /N _{avg}	1.78	2.08	-0.30
Max-Min	107.00	103.00	4.00
S _{max}	134.00	132.00	2.00
I _{max}	162.00	161.00	1.00
S _{avg}	108.00	107.00	1.00
I _{avg}	123.00	109.00	14.00
Avg.Thickness	96.59	91.26	5.33



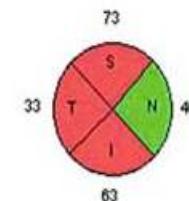
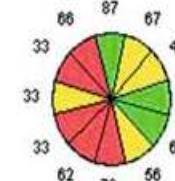
Patient/Scan Information		
DOB:	2/18/1936	ID: NA, Female
Scan Type	Fast RNFL Thickness (3.4)	
Scan Date	5/12/2005	
Scan Length	10.87 mm	



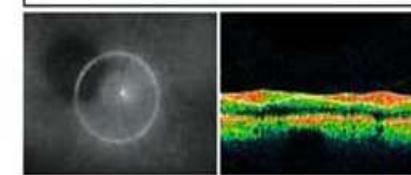
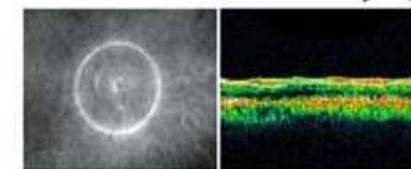
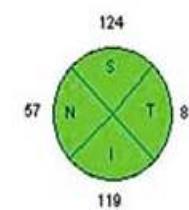
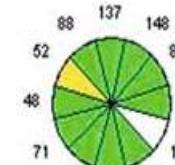
RNFL THICKNESS AVERAGE ANALYSIS

ZEISS

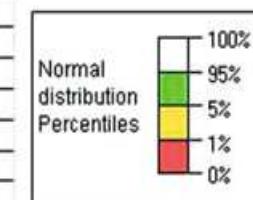
OD



OS



	OD (N=3)	OS (N=3)	OD-OS
I _{max} /S _{max}	0.95	1.05	-0.10
S _{max} /I _{max}	1.05	0.95	0.10
S _{max} /T _{avg}	2.70	2.10	0.60
I _{max} /T _{avg}	2.56	2.20	0.36
S _{max} /N _{avg}	1.81	2.96	-1.16
Max-Min	60.00	131.00	-71.00
S _{max}	89.00	169.00	-80.00
I _{max}	84.00	178.00	-94.00
S _{avg}	73.00	124.00	-51.00
I _{avg}	63.00	119.00	-56.00
Avg.Thickness	54.71	95.20	-40.49



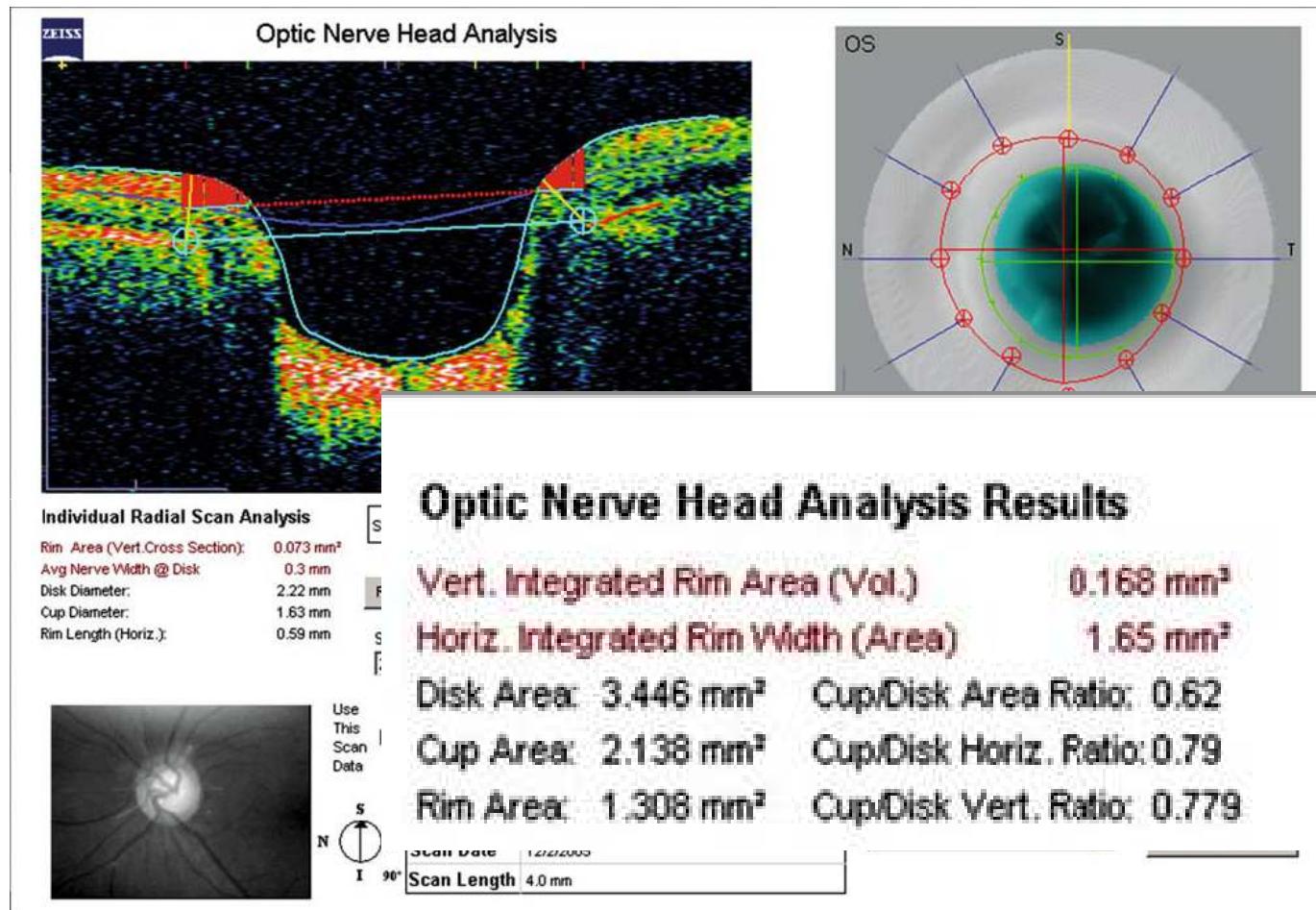
Patient/Scan Information

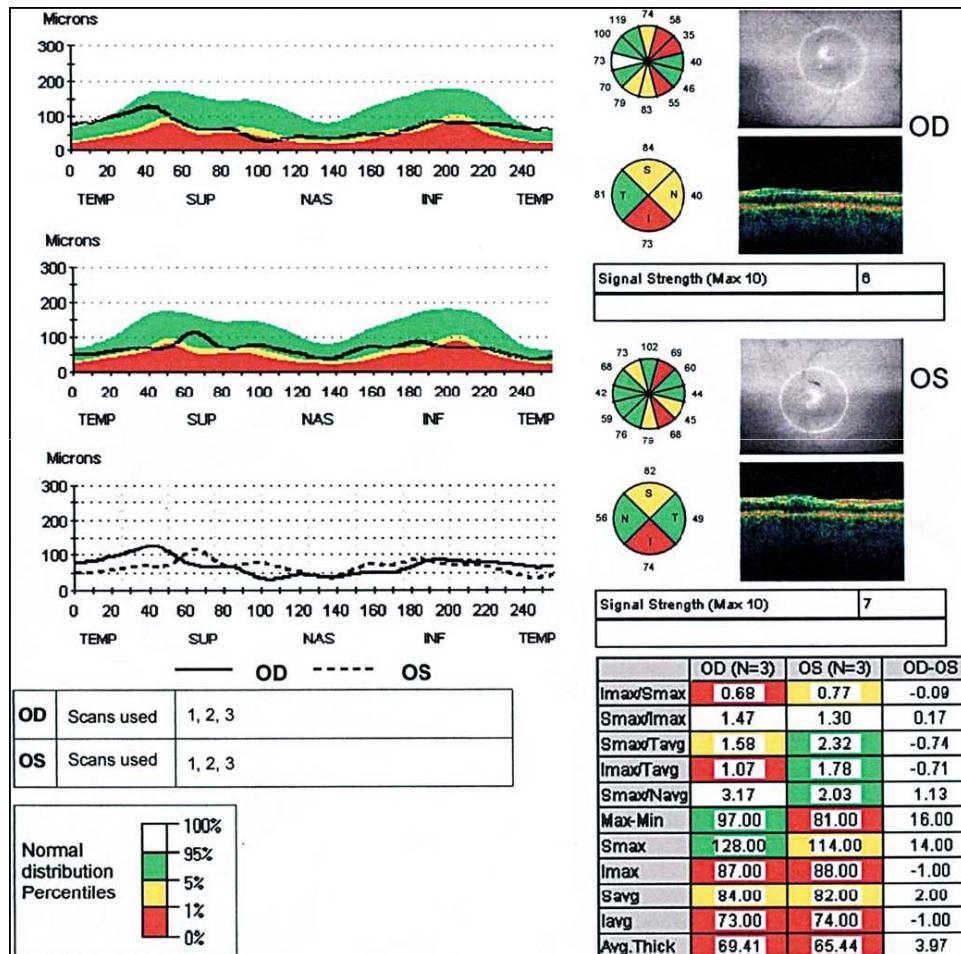
DOB: 6/26/1942, ID: HTG2, Female

Scan Type Fast RNFL Thickness (3.4)

Scan Date 2/25/2005

Scan Length 10.87 mm







Cirrus HD OCT



Ramin Daneshvar

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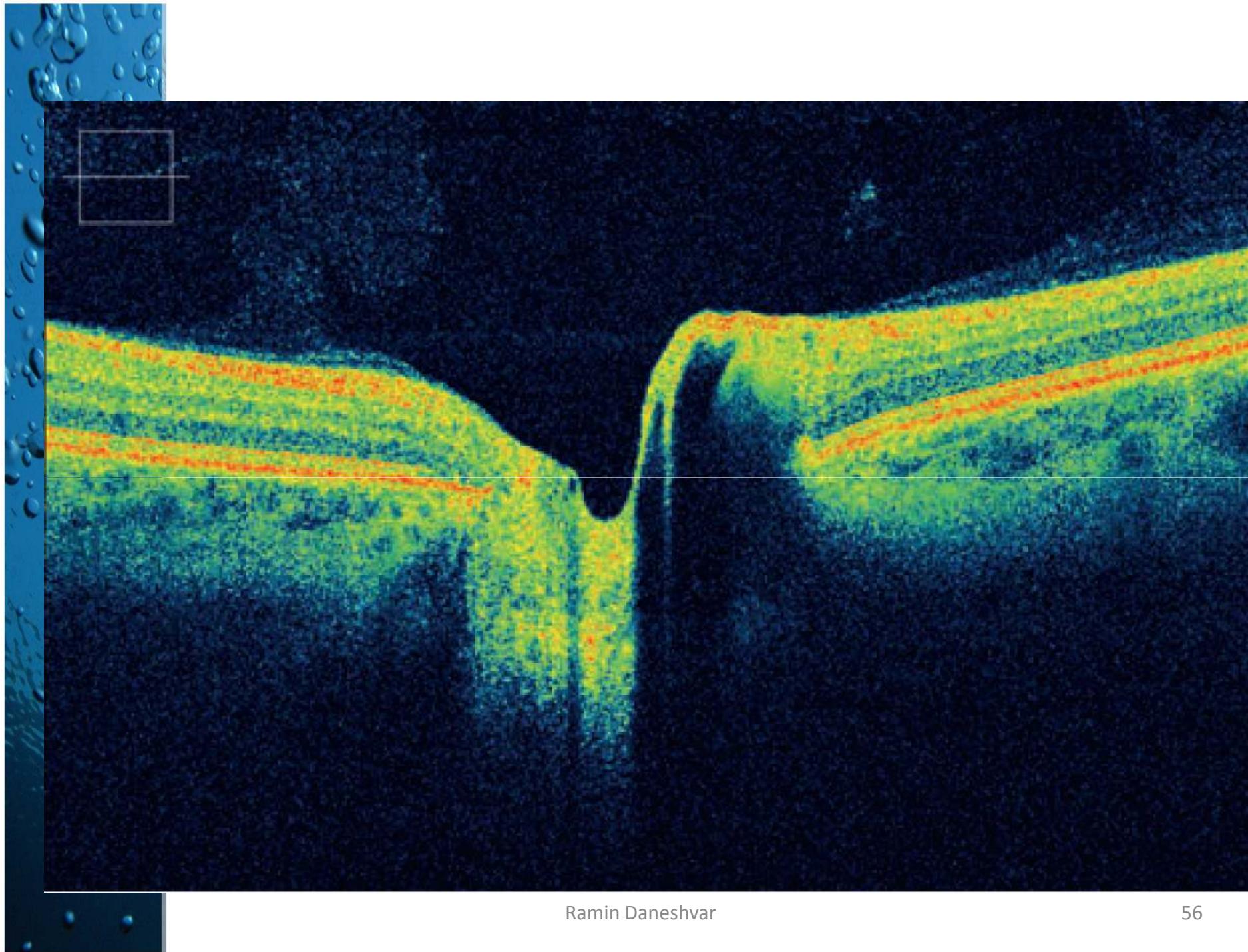
Ramin Daneshvar



Immerse yourself in the Image

Some views draw the observer directly into the picture – views such as those offered by Cirrus HD-OCT. This new high-performance OCT instrument from Carl Zeiss Meditec offers a quantum leap forward. Featuring spectral domain technology, Cirrus HD-OCT delivers exquisite high-definition images of the ocular structures. For the first time, immerse yourself in truly grand views.

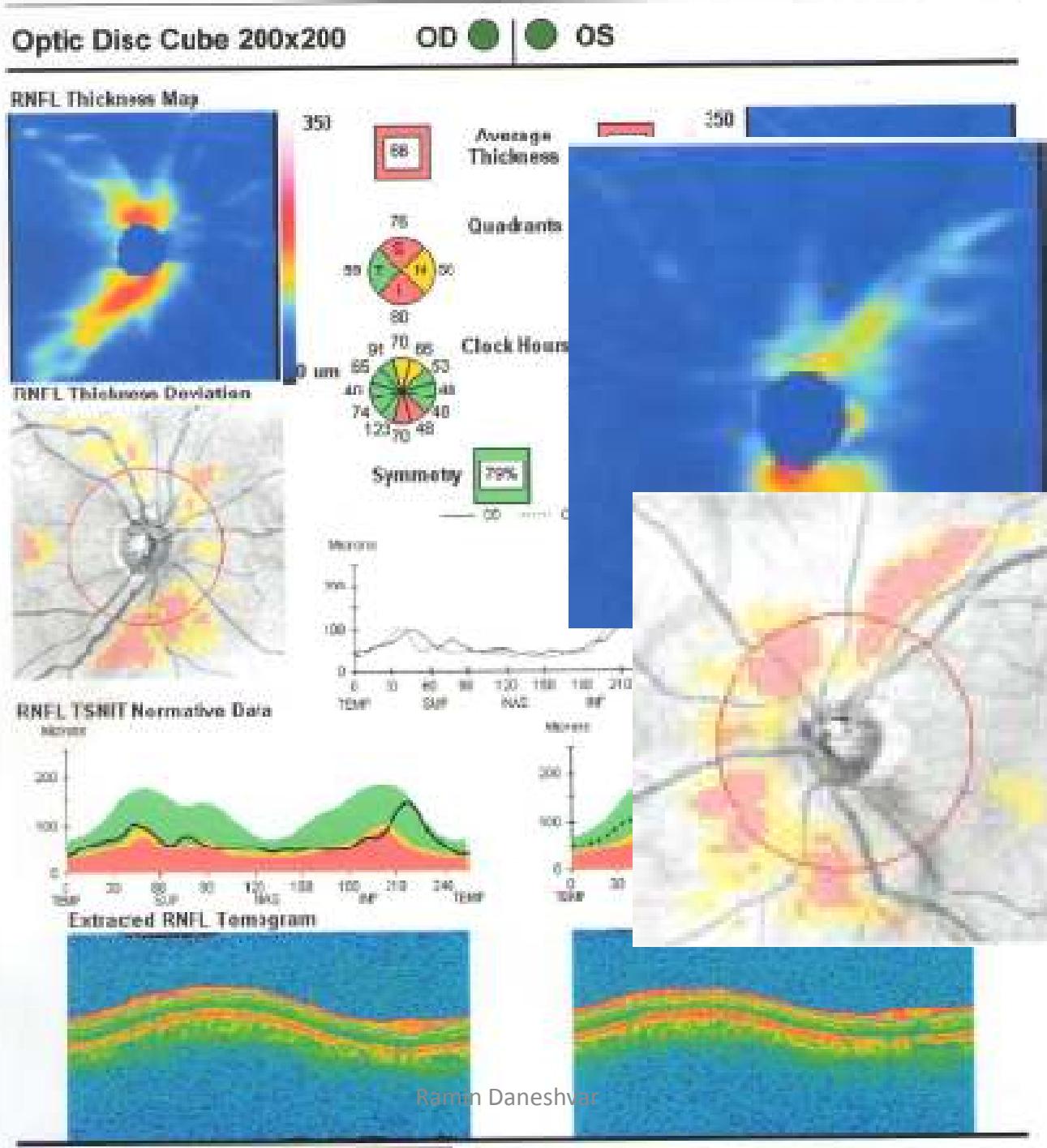
Ramin Daneshvar

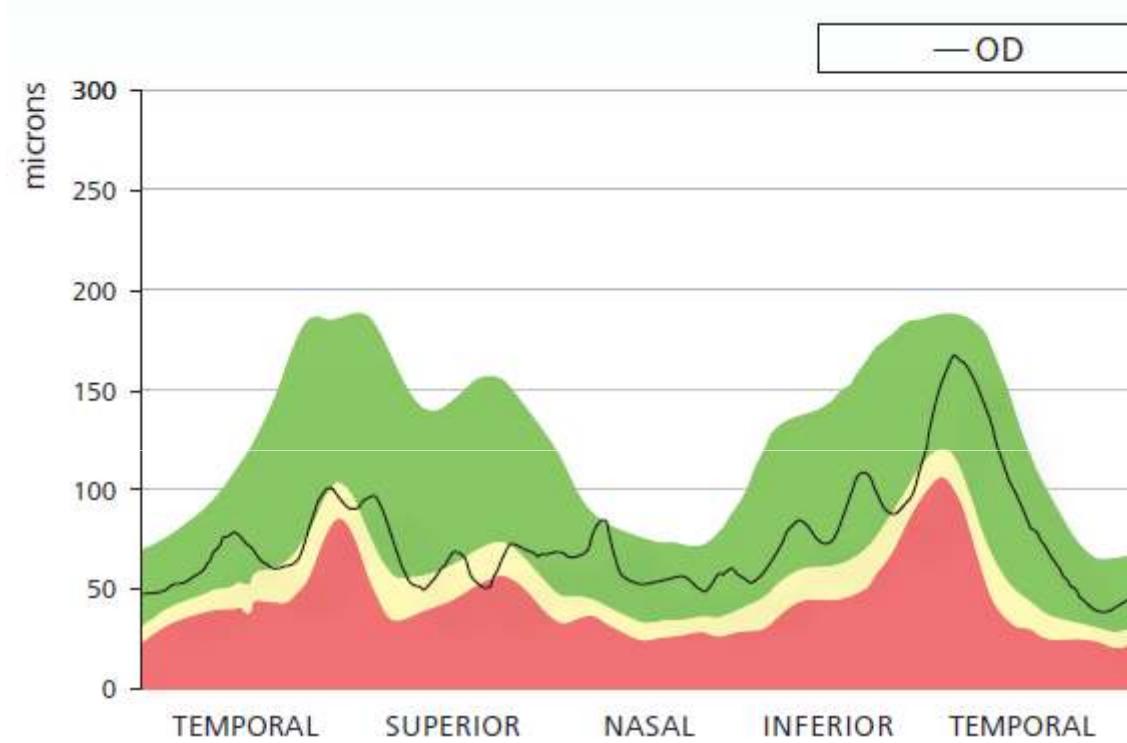


Ramin Daneshvar



- ☛ RNFL Thickness Analysis
- ☛ Faster: 3D Volume
- ☛ Precise registration
- ☛ Printout like GDx
- ☛ Deviation MAP





*TSNIT graph plots RNFL thickness and compares it
to a normative database*

1. Fundus Image

- Well focused
- Evenly illuminated
- Well centered

2. Thickness Map

- RNFL thinning Superior OS
- Wedge defects Inferior OU

3. Deviation Map

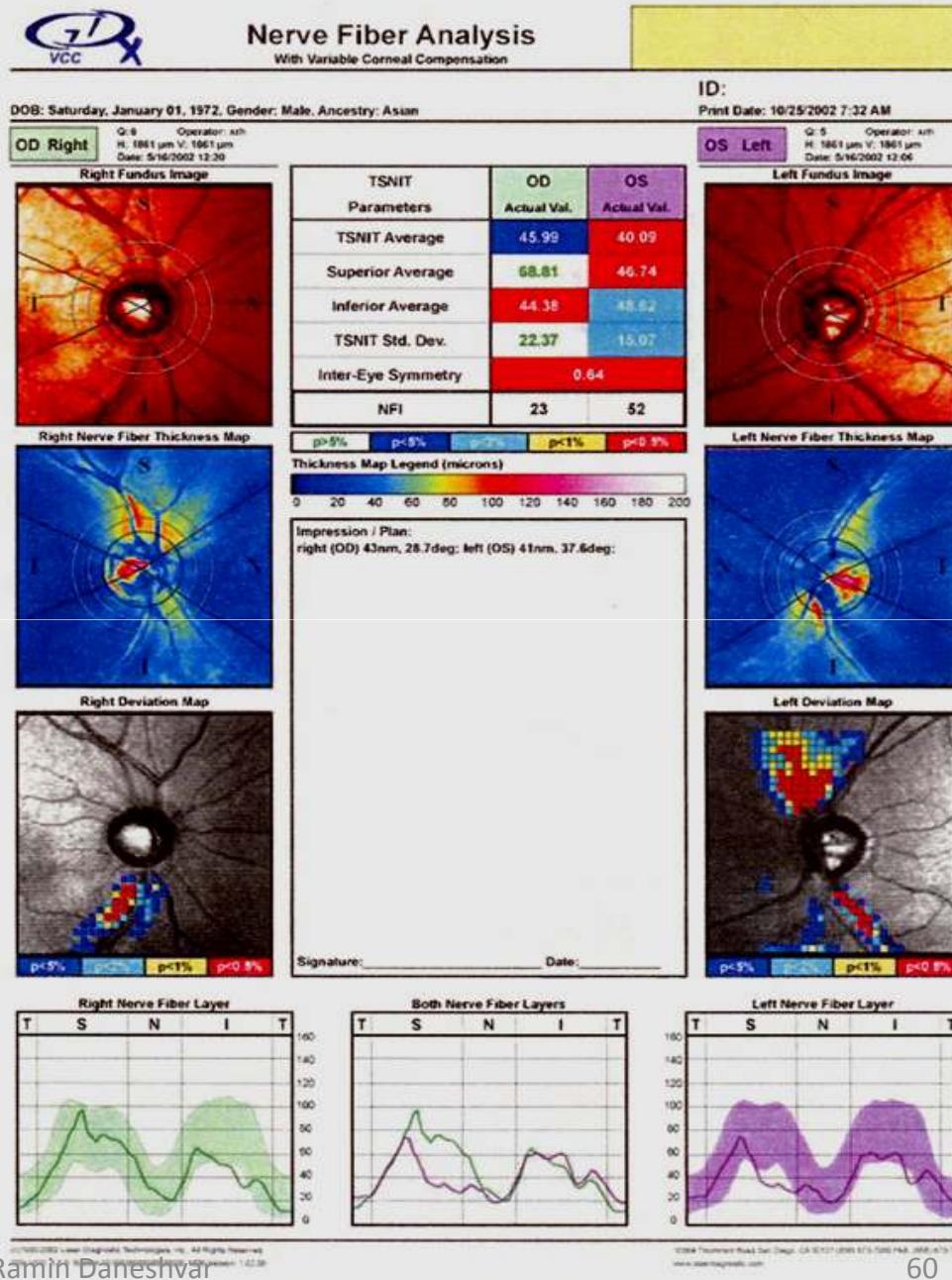
- Extensive RNFL loss Superior OS
- Wedge defects Inferior OU

4. TSNIT Graph

- Falls outside shaded area in Inferior region OU
- Falls below shaded area Superior OS

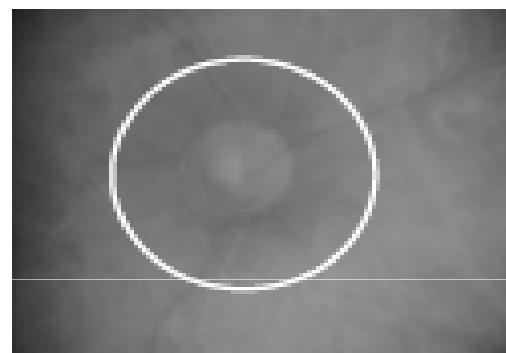
5. Parameter Table

- Abnormal:
 - TSNIT Average and Inferior Average OU
 - Superior Average and TSNIT SD OS
 - IES value
 - NFI OS
 - NFI values abnormal OU

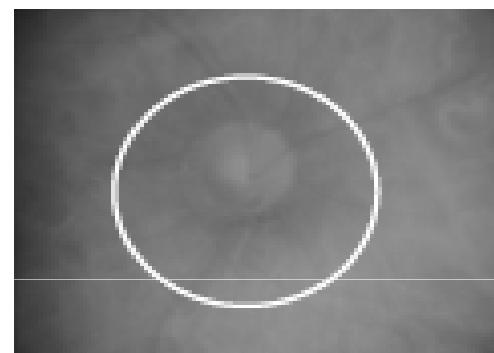




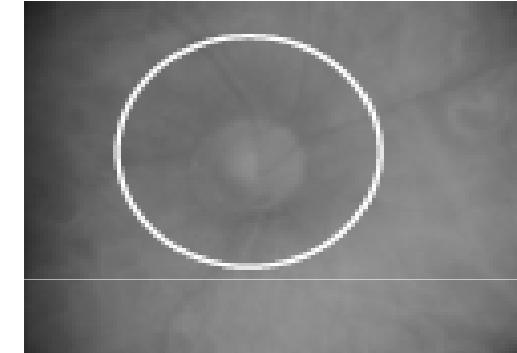
Scan location and eye movements affect results



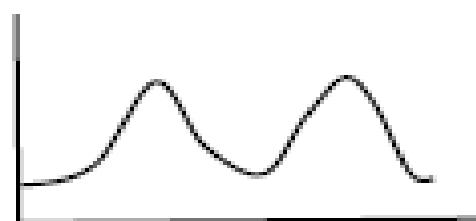
Properly centered



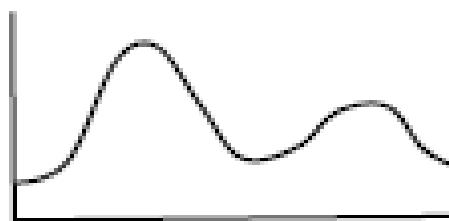
Poorly centered: too inferior



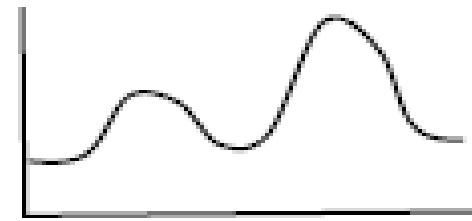
Poorly centered: too superior



T S N I T
Normal Double Hump



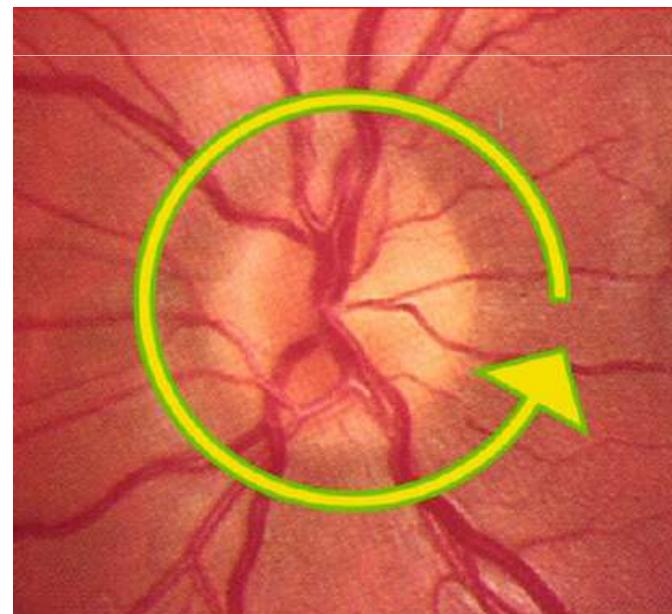
T S N I T
Inferior RNFL "Loss"

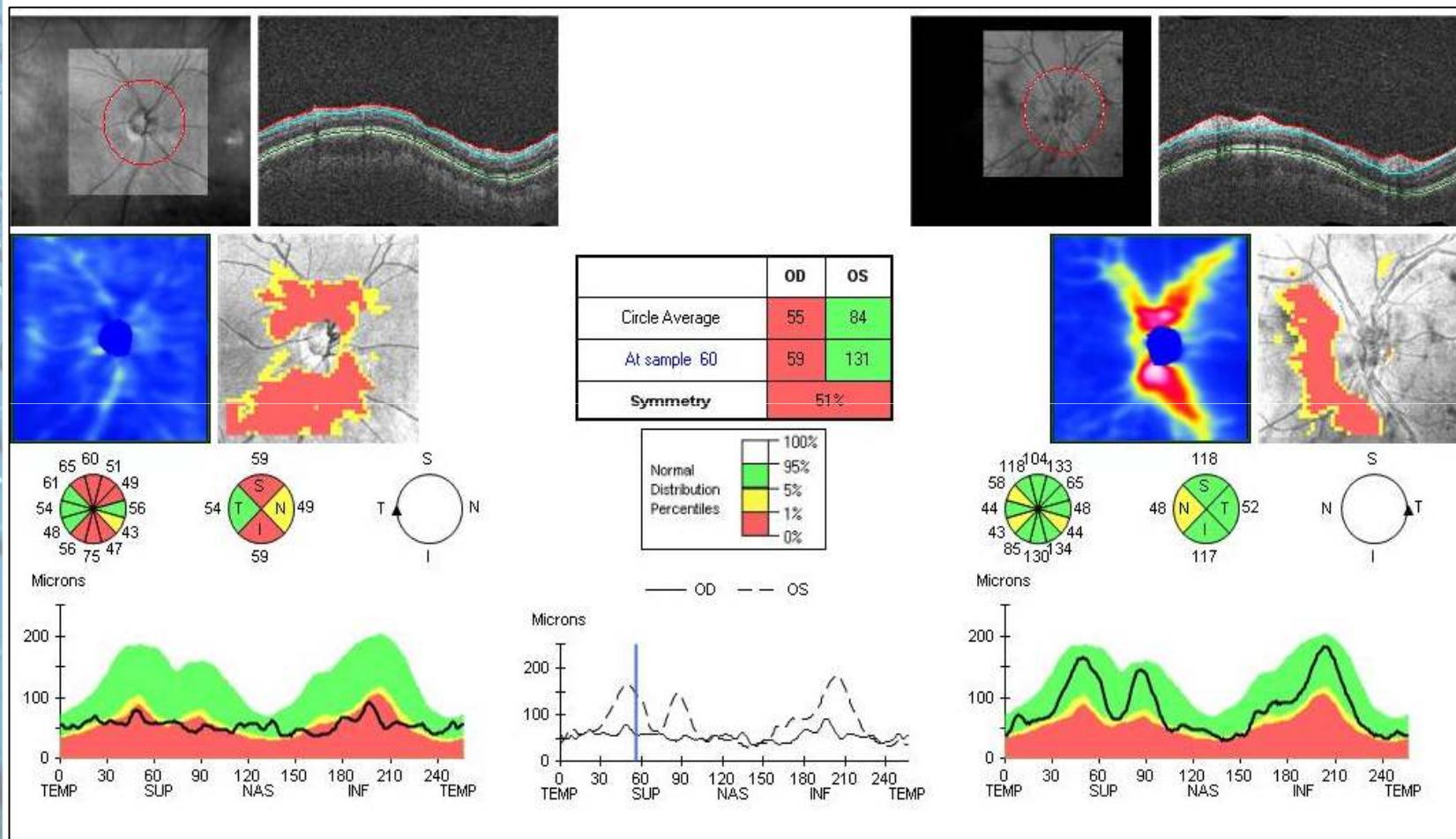


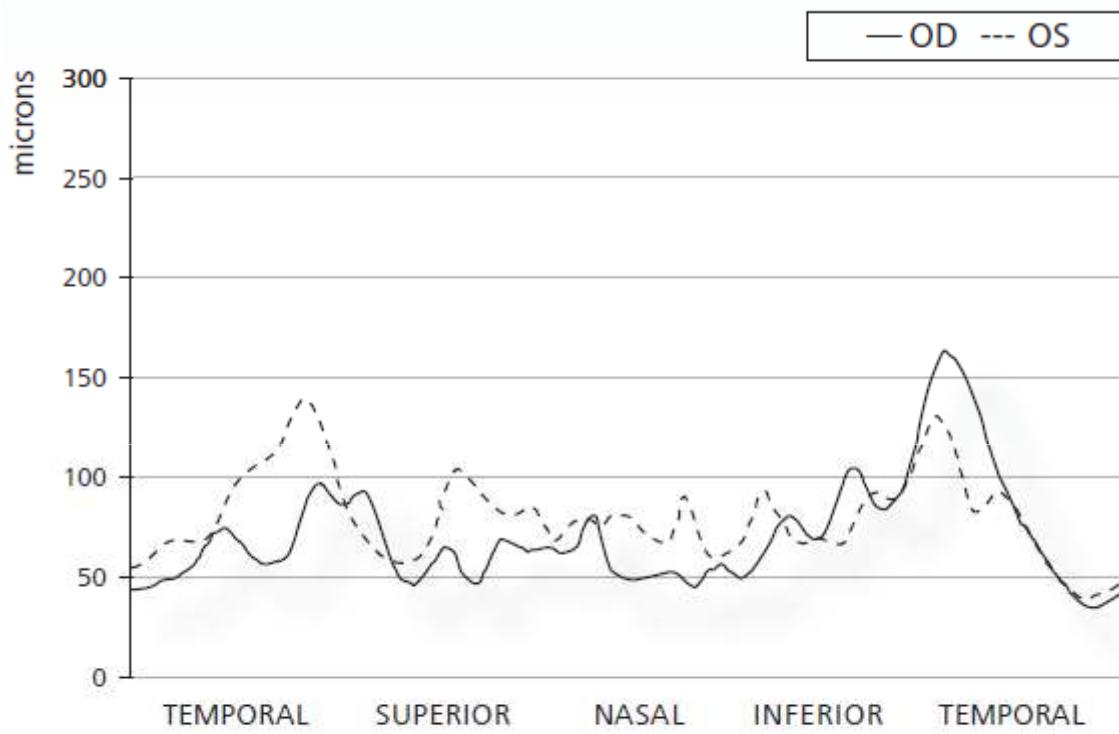
T S N I T
Superior RNFL "Loss"



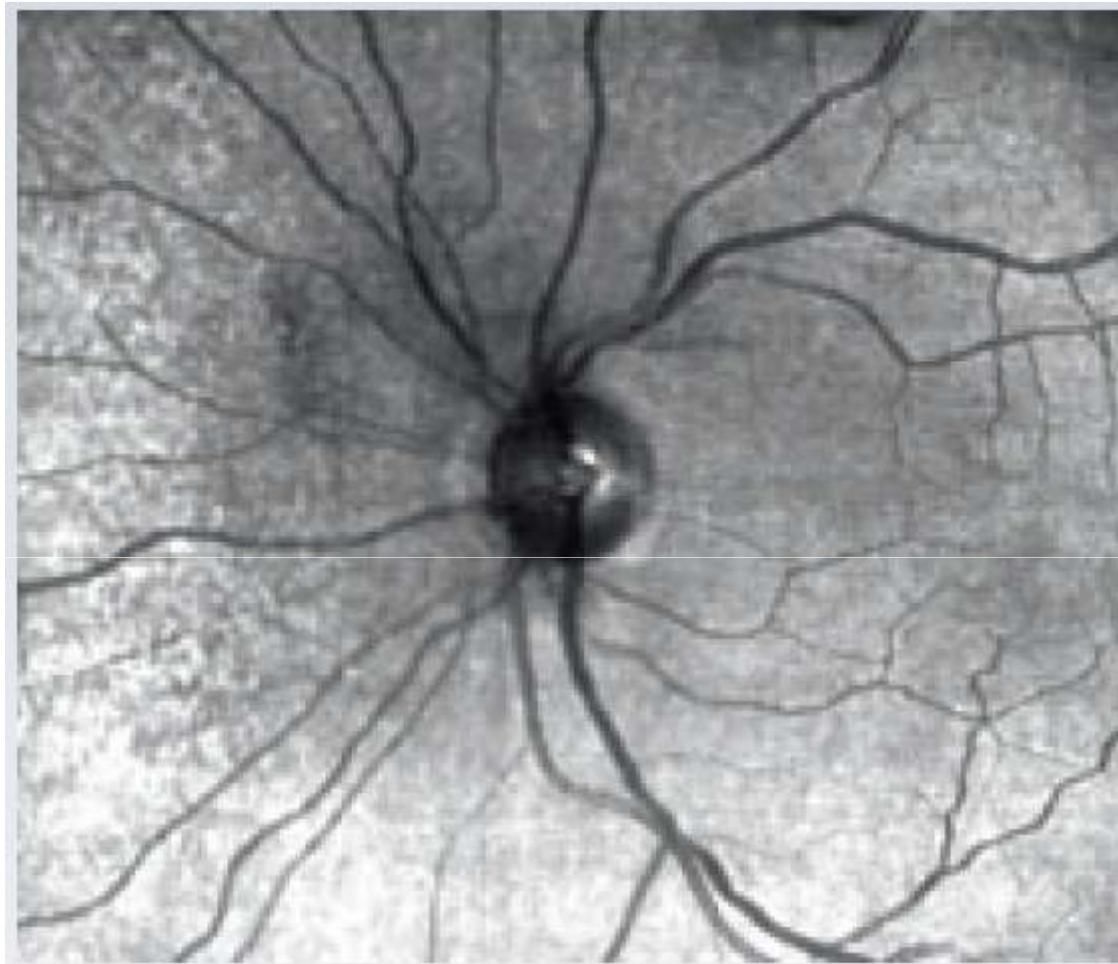
- Center of disc is automatically identified
- F/U Software GPA



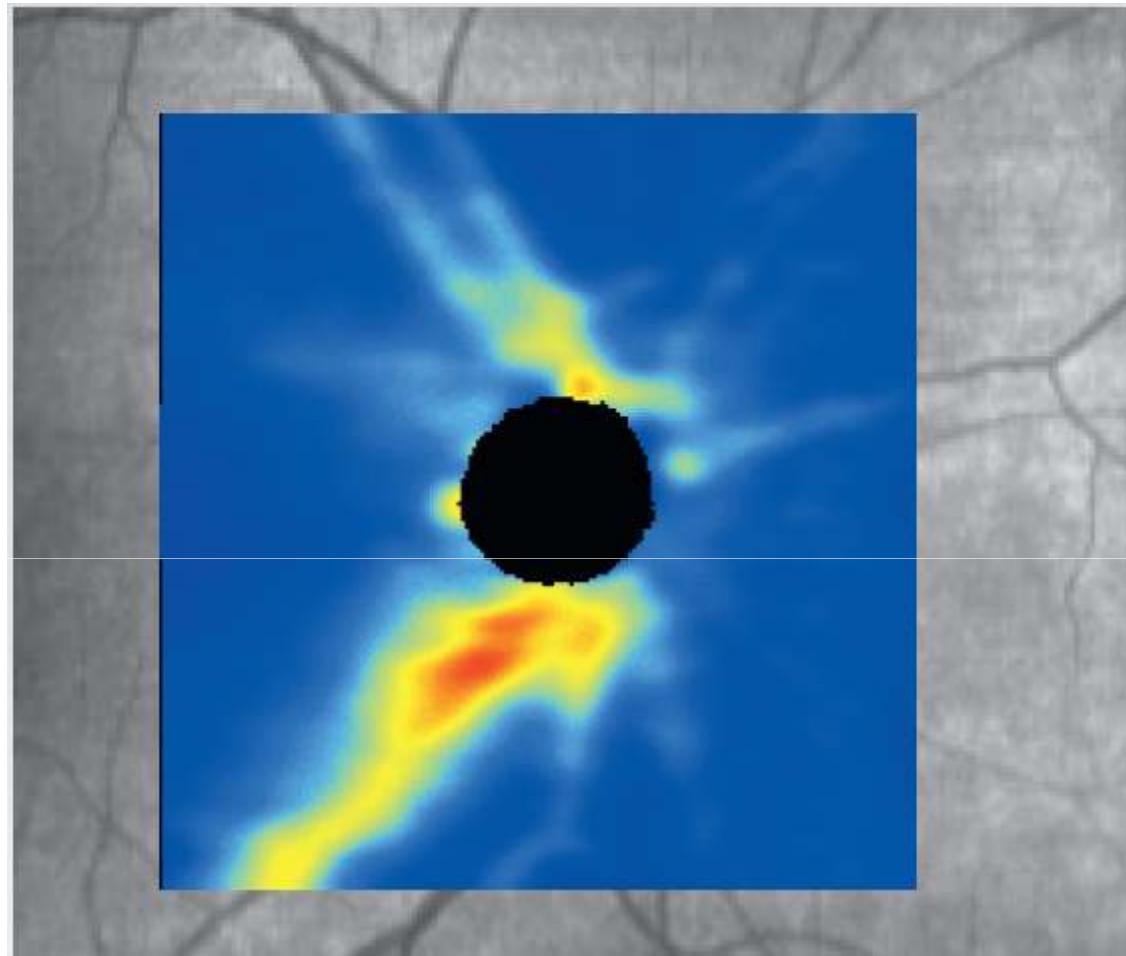




OU TSNIT graph displays RNFL thickness of both eyes for identification of asymmetry



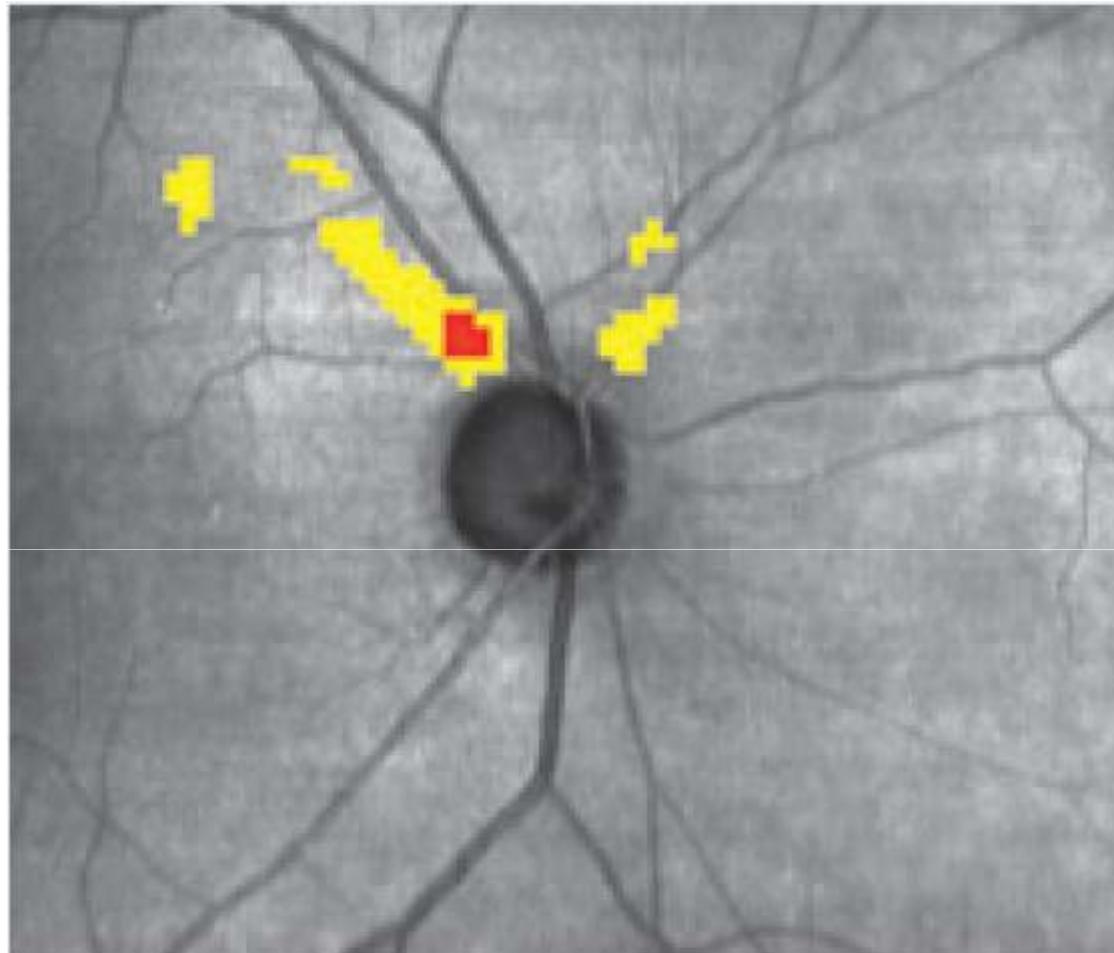
LSO provides an exquisite fundus image for visualization of the optic nerve head



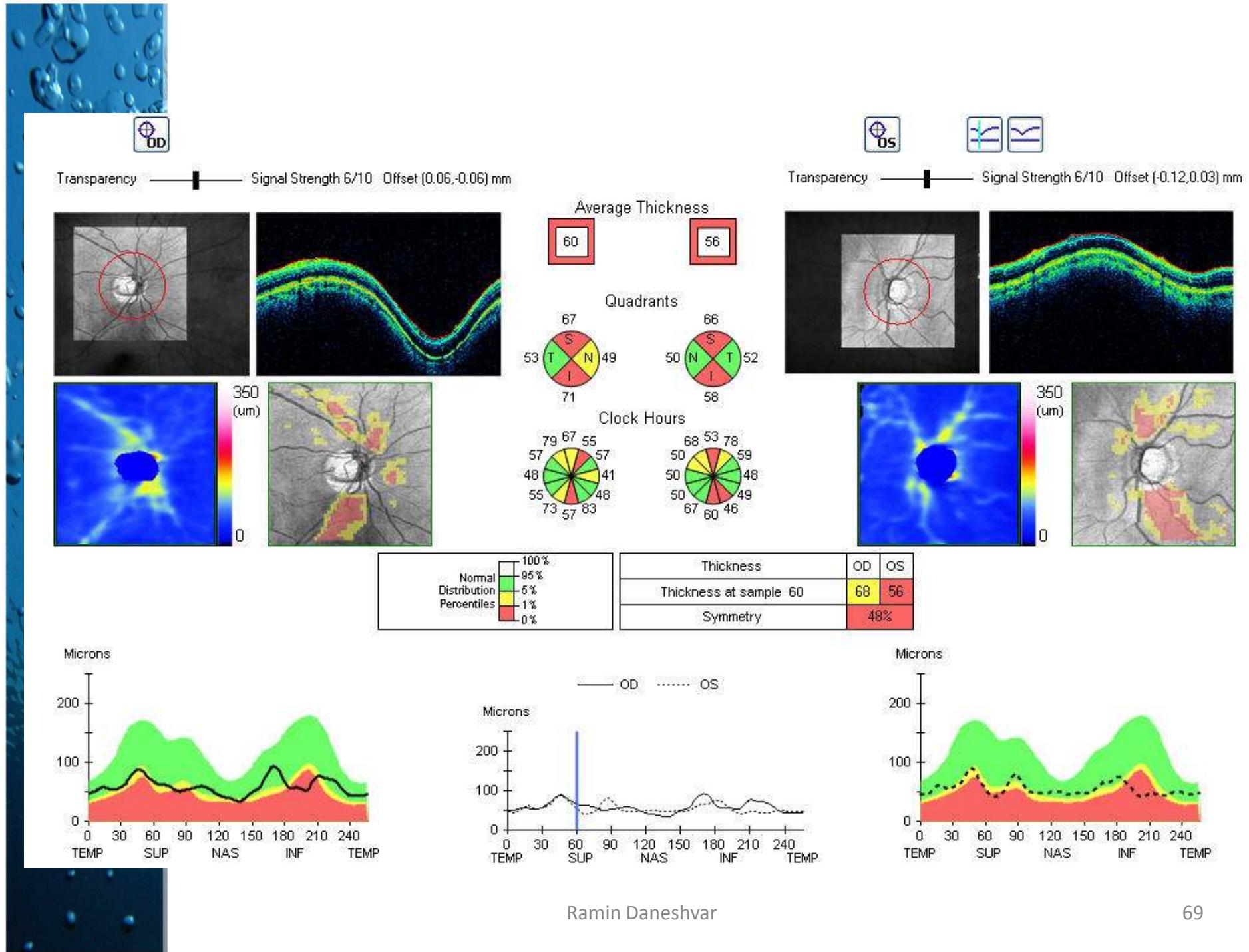
RNFL thickness map presents the pattern and thickness of the nerve fiber layer and aids in the detection of pattern defects

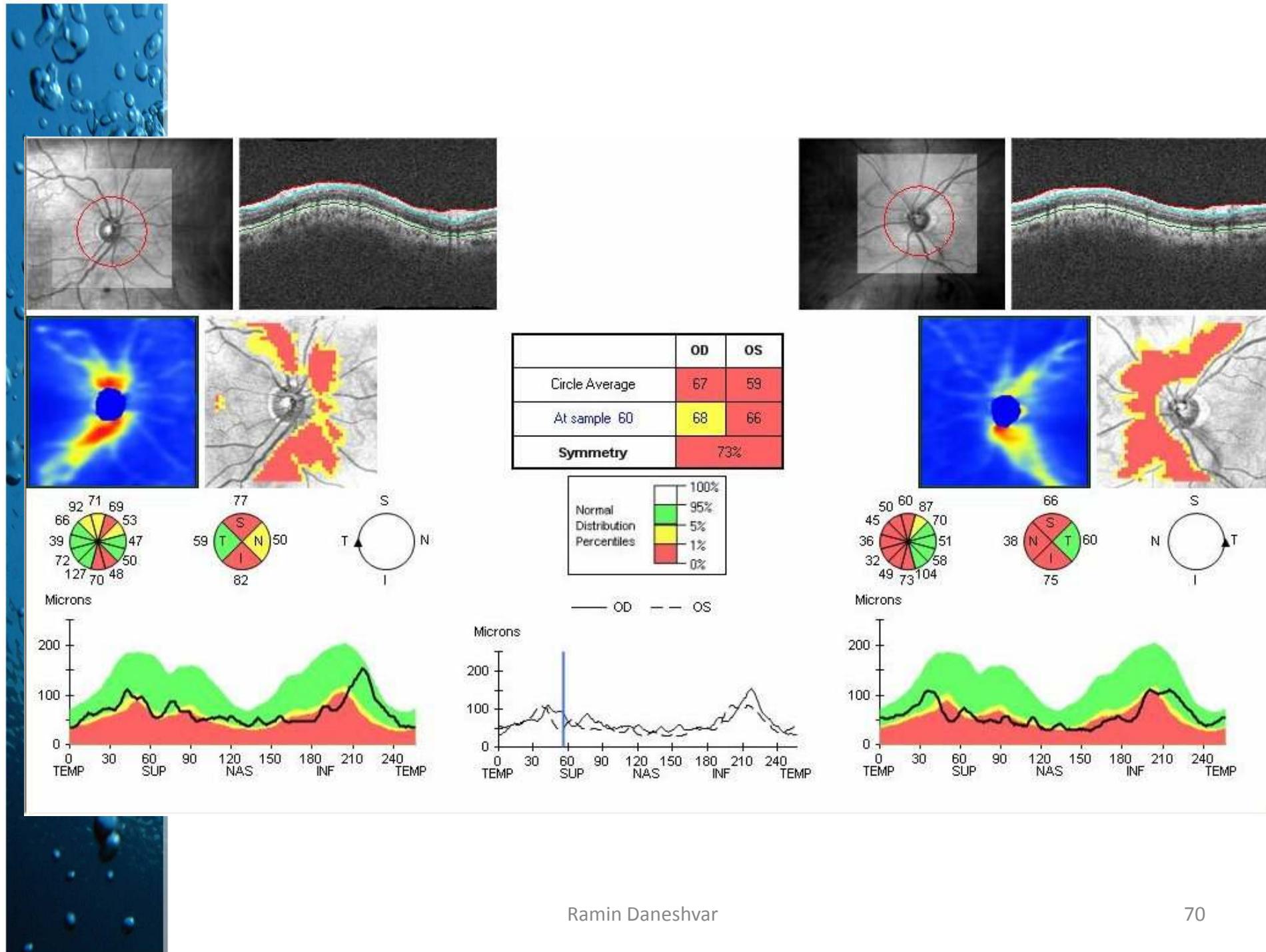


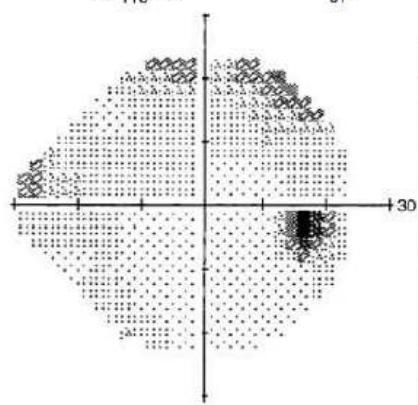
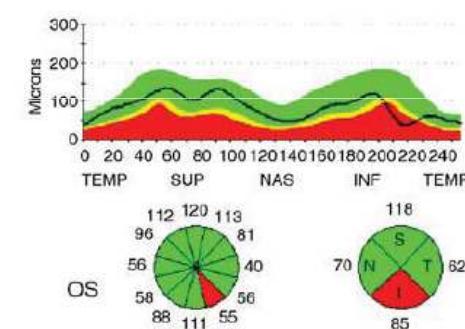
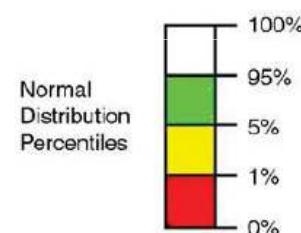
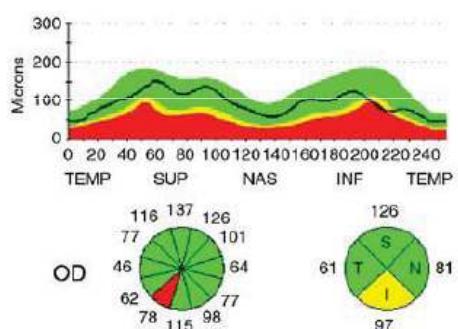
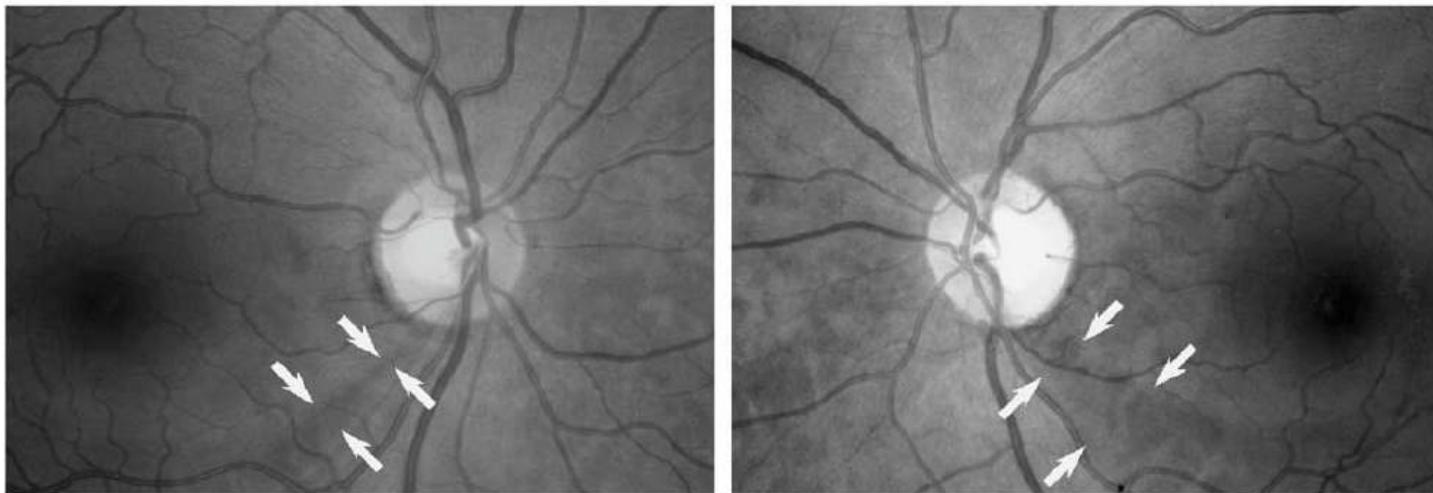
LSO with OCT fundus overlay from previous visit demonstrates visit-to-visit registration, assuring excellent reproducibility



Deviation map, overlayed on OCT fundus image, illustrates where RNFL thickness deviates from a normal range

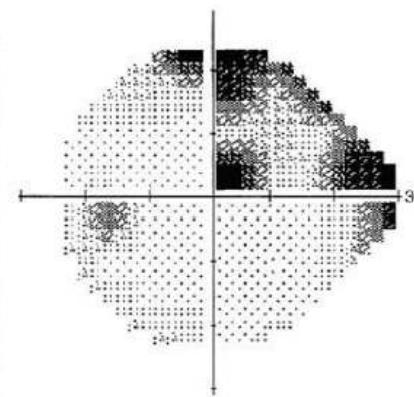






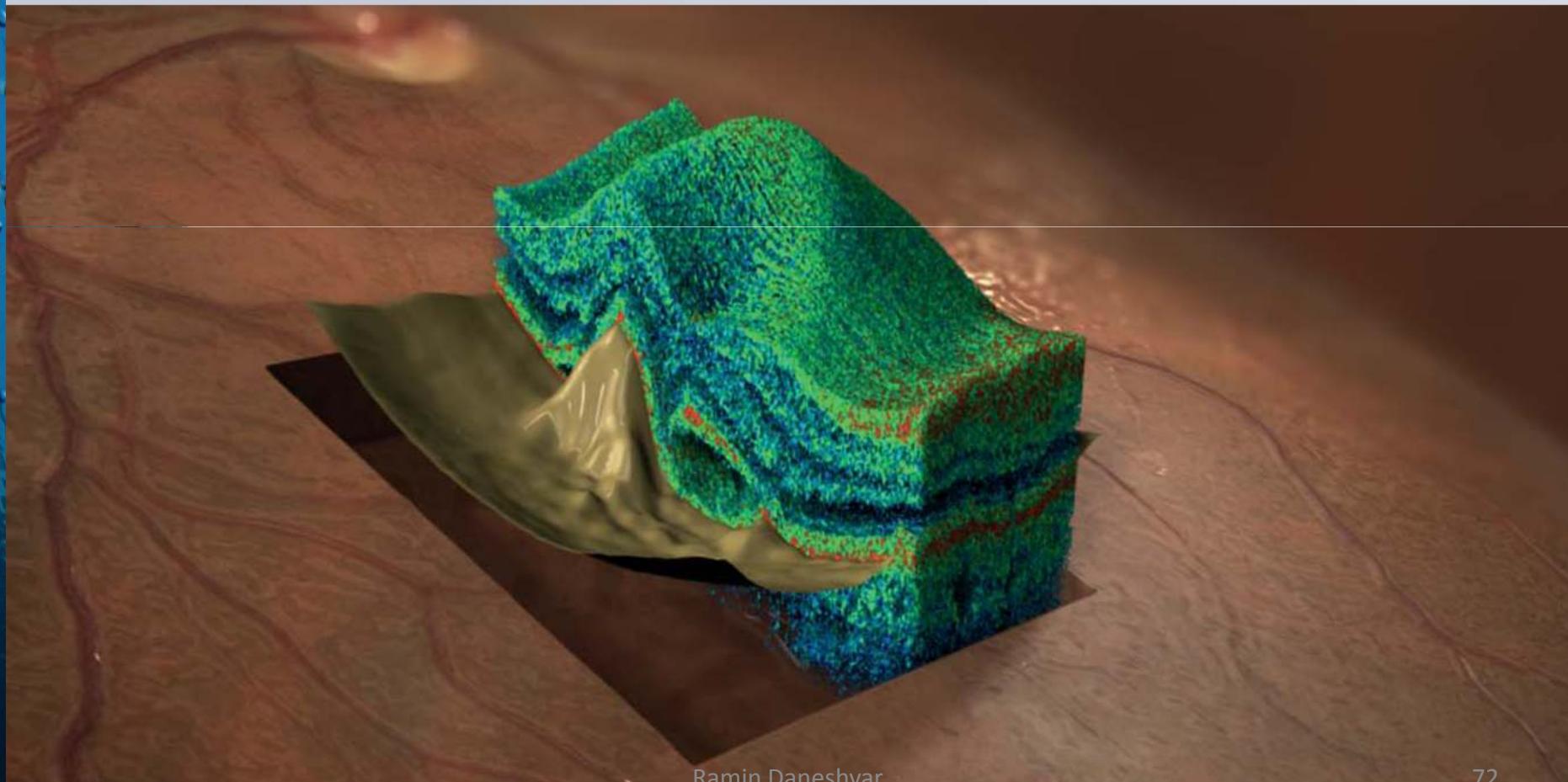
	OD (N=3)	OS (N=3)	OD-OS
I _{max} /S _{max}	0.82	0.88	-0.06
S _{max} /I _{max}	1.22	1.14	0.08
S _{max} /T _{avg}	2.43	2.20	0.24
I _{max} /T _{avg}	1.99	1.92	0.07
S _{max} /N _{avg}	1.86	1.94	-0.09
Max-Min	105.00	98.00	7.00
S _{max}	150.00	136.00	14.00
I _{max}	122.00	119.00	3.00
S _{avg}	126.00	118.00	8.00
I _{avg}	97.00	85.00	12.00
Avg.Thickness	91.00	83.74	7.65

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**It's not just spectral domain,
it's High-Definition OCT.**

Cirrus™ HD-OCT



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Technical data	
OCT Scanning	<ul style="list-style-type: none">• Axial resolution: 5 µm (in tissue)• Transverse resolution: 15 µm (in tissue)• Scan speed: 27,000 A-scans per second• A-scan depth: 2.0 mm (in tissue), 1024 points• Optical source: superluminescent diode (SLD), 840 nm
Fundus Imaging	<ul style="list-style-type: none">• Line scanning ophthalmoscope (LSO)• Live during scanning• Transverse resolution: 25 µm (in tissue)• Optical source: superluminescent diode (SLD), 750 nm• Field of view: 36° x 30°
Scan Patterns	<ul style="list-style-type: none">• Macular Cube 200 x 200 Combo: 200 horizontal scan lines comprised of 200 A-scans• Macular Cube 512 x 128 Combo: 128 horizontal scan lines comprised of 512 A-scans• 5 Line Raster: 4096 A-scans per B-Scan (adjustable length, spacing and orientation)
Focus Adjustment Range	<ul style="list-style-type: none">• -20D to +20D (diopters)
Fixation	<ul style="list-style-type: none">• Internal and external
Computer	<ul style="list-style-type: none">• Windows® XP Pro• High-performance multi-core processor• Internal storage: > 80,000 scans• CD-RW, DVD-ROM drive• Integrated 15" color flat panel display
Pupil Size Requirement	<ul style="list-style-type: none">• ≤ 2.0 mm (\geq 3.0 mm optimal for LSO)
Dimensions/Weight (Instrument Only)	<ul style="list-style-type: none">• 25.6 L x 17.3 W x 20.9 H (in); 65 L x 44 W x 53 H (cm)• 83 lbs; 37.6 kg
Electrical	100–120V~, 50/60Hz, 5A 220–240V~, 50/60Hz, 2.5A 24Vdc, 2Ahvar



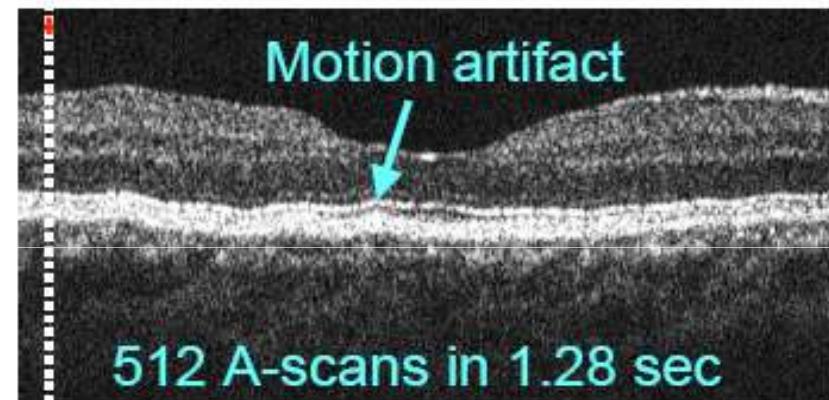
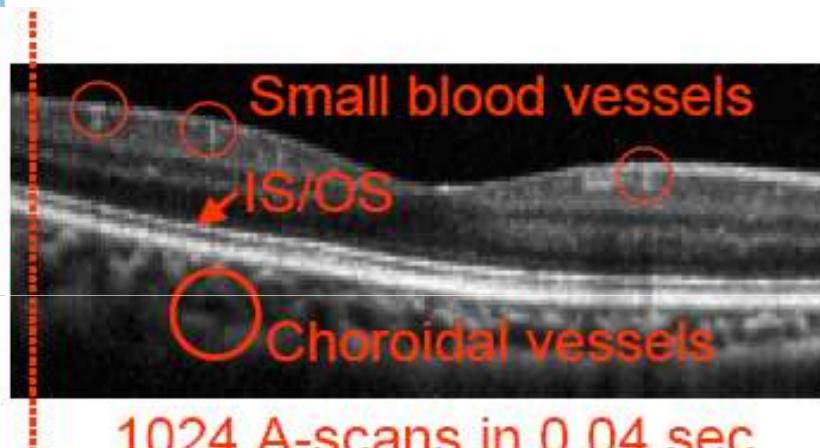
User Features	GDx	Stratus OCT	Cirrus HD-OCT
General			
Technology	Scanning Laser Polarimetry	Optical Coherence Tomography (OCT)	Spectral Domain OCT
Integrated design	•		•
Portable	•		
Acquisition			
Non-mydriatic	•		•
Joystick operation	•	•	
Point-and-click mouse driven operation			•
Fastest scan speed			•
Technician time for two eyes	< 3 min	< 5 min	< 3 min
Glaucoma screening mode	•		
Software Features			
Repeat scan function	•	•	•
Review Software	•	•	•
Correlation of scan to fundus image	•		•
Auto Patient Recall™			•
Bulk image export	•	•	
Images			
Cross-sectional OCT image		•	•
High-definition fundus image			•
3D volume rendering of macula and optic nerve head			•
3D fly-through video			•
Segmentation layer maps of ILM and RPE			•
Analyses			
Retinal thickness analysis		•	
RNFL thickness analysis	•	•	•
Optic nerve head analysis		•	
Automated optic nerve head registration	•		•
Macular thickness normative data		•	
RNFL normative data	•	•	•
Guided Progression Analysis™ (GPA)	•		
GPA Advanced Serial Analysis		•	
Technical Specifications			
Field of view	40 x 20 degrees	26 x 20.5 degrees	36 x 30 degrees
Scan speed	41 frames/sec	400 A-scans/sec	27,000 A-scans/sec
A-Scan depth	N/A	2.0 mm (in tissue)	2.0 mm (in tissue)
Axial resolution	N/A	10 µm (in tissue)	5 µm (in tissue)
Transverse resolution	45 µm	20 µm (in tissue)	15 µm (in tissue)
Minimum pupil diameter	2 mm	3.2 mm	2 mm
Dimensions (in inches)	14h x 10w x 24d	19.2h x 16.5w x 23.7d	20.9h x 17.3w x 25.6d
Weight	45 lbs (21 kg)	58 lbs (26.3 kg)	83 lbs (37.6 kg)



FD OCT(RTVue)

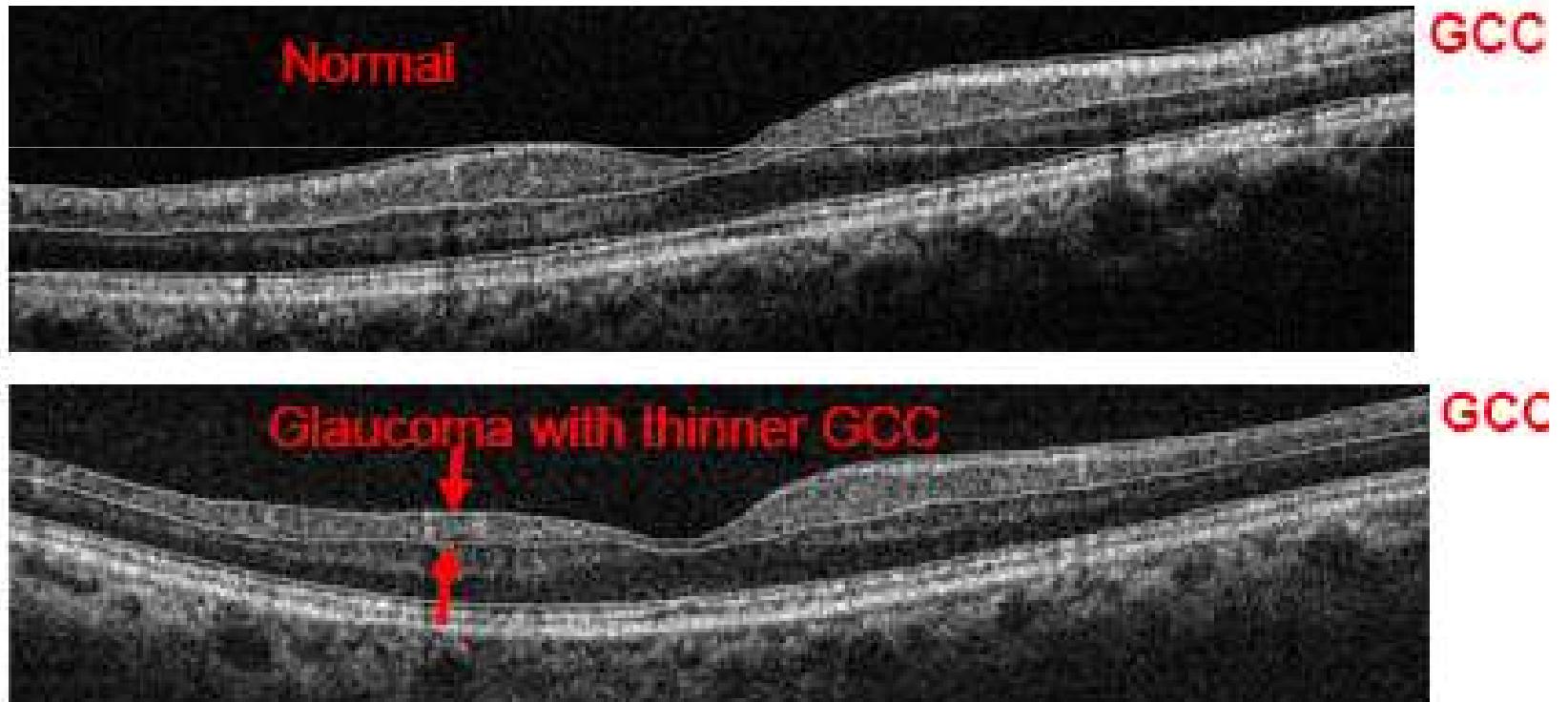
- Decreases image acquisition time and improves resolution
- Permits 3-D imaging
- Compare to Stratus
 - 2x resolution
 - 65x faster





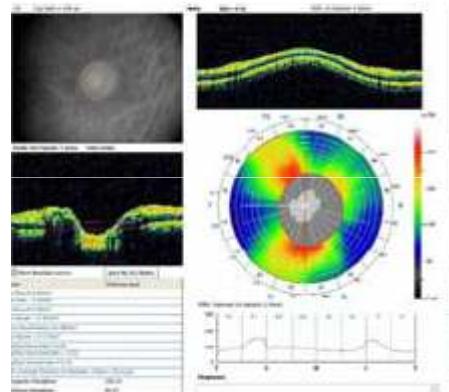
Higher speed, higher definition and higher signal.

The Ganglion Cell Complex (GCC) becomes thinner in glaucomatous eyes

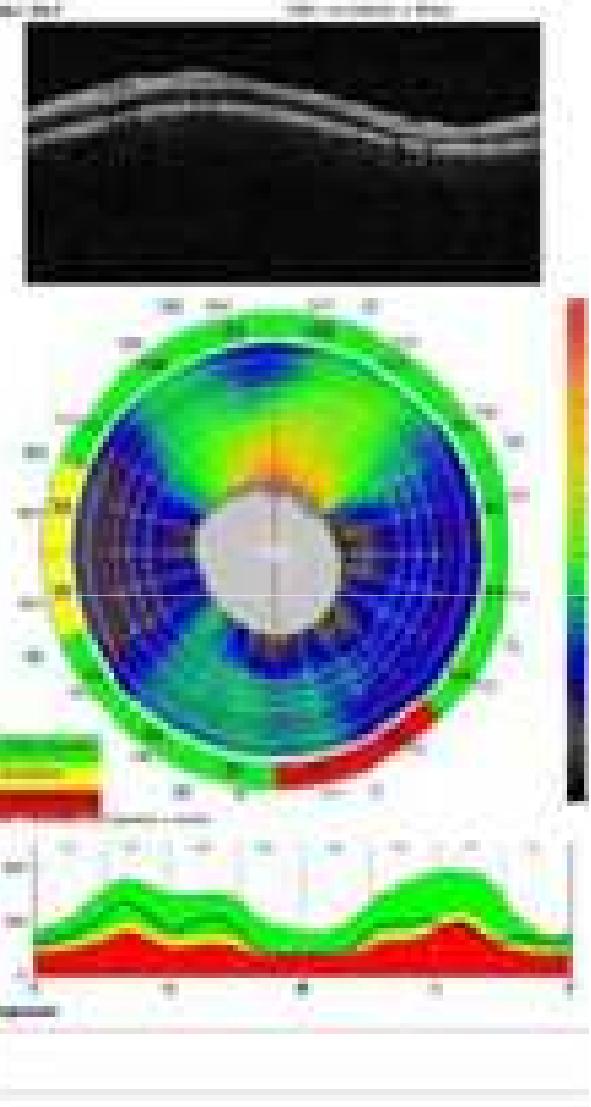


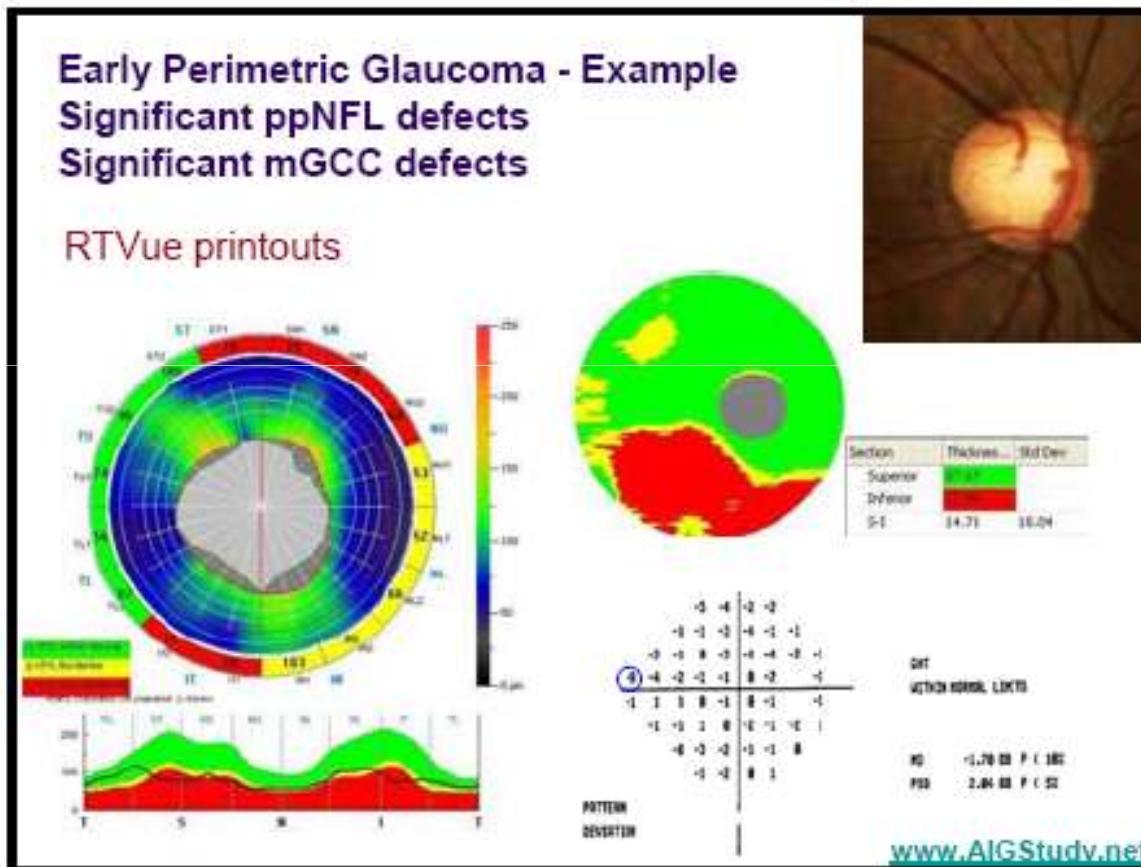


"NHM4" maps disc rim, ciliary nerve fiber layer



Normal



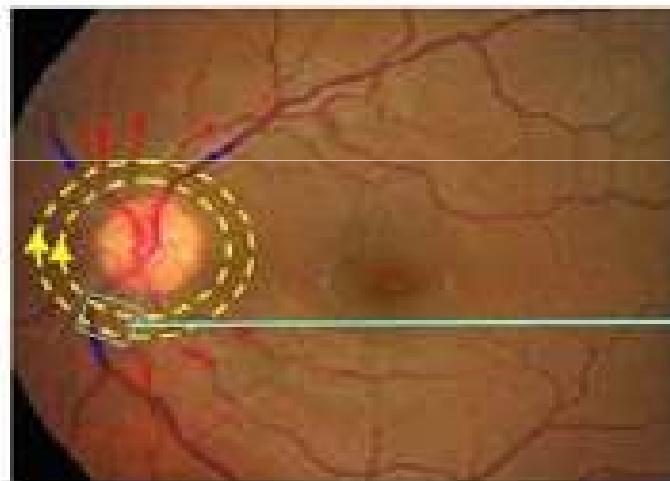




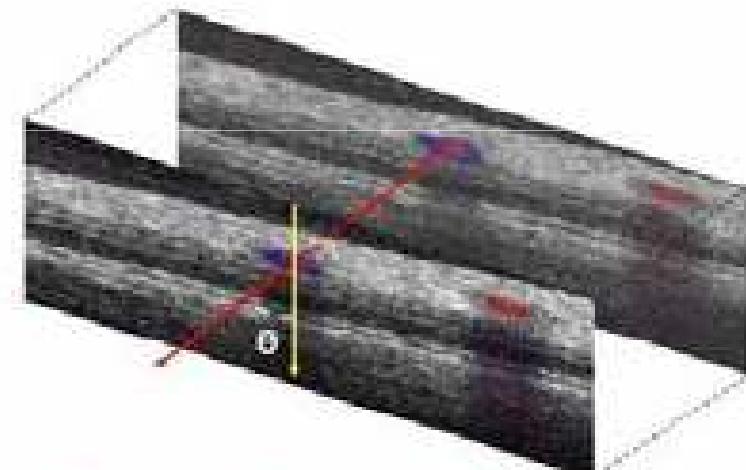
FD OCT can measure Blood flow

Measurement by comparing 2 parallel cross-section

Important Sp. in NTG



Double circular scan



Flow profile and direction determined on parallel sections



OCT Advantages

- Noninvasive
- Non-contact
- High resolution
- High sensitivity
- Topographical
- Reference plane not required
- Not affected by axial length and refraction



Disadvantages of OCT

- Requires pupil dilation:
OCT I and II: 5mm, OCT III: 3mm,
UHR/UHS: optional
- Needs fixation
- Impaired by media opacity sp. PSC
- Expensive technology
- Overlap among normal and abnormal values
- More variable in advanced glaucoma



	GDx	HRT	OCT
Principle	Birefringence	SLO	Interferometry
Pixel	65000	65000	50000
Pupil dialation	No	No	Yes
Normative data	1200 eyes	100 eyes	150 eyes
Parameter	Peripap RNFL	OD contour	Peripap RNFL
Reproducibility	5-10%	5-10%	5-10%
Sensitivity	70-80%	65-75%	70-80%
Specificity	60-80%	70-80%	75-85%
Change detection	Yes	Yes	Yes
Change probability	Yes	Yes	Yes



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