New medical imaging, Physics, Medical Need and Commercial Viability

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Things Change Slowly in Medical Land...

Pulse Oximeter



Things Change Slowly in Medical Land...

- Nuclear Medicine 1950's
- Ultrasound 1960's
- CT 1970's
- MRI 1980's

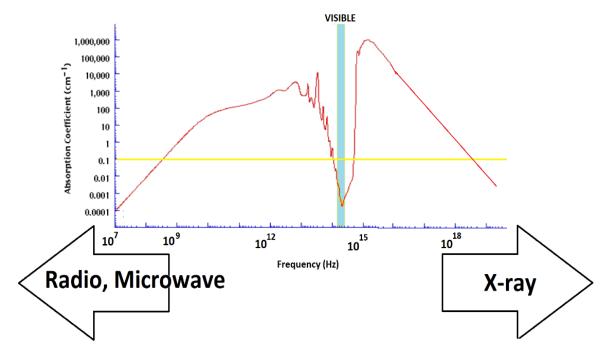


Absorption Coefficient of Water (cm⁻¹)

VISIBLE 1,000,000 100,000 Absorption Coefficient (cm⁻¹) 10,000 1,000 100 10 0.1 0.01 0.001 0.0001 10¹⁸ 10⁹ 10¹² 10¹⁵ 10 Frequency (Hz) Radio, Microwave X-ray

The dead hand of Physics

Absorption Coefficient of Water (cm⁻¹)



Deep body imaging only with frequencies under the yellow line (absorption coefficient of <0.1/cm)

Radio waves and microwaves are utilised by electrocardiography, electroencephalography and MRI

Diagnostic X-rays, CT scans, Nuclear Scans

GHz, THz, Infrared frequencies

Diagnostics of surface lesions, destroying surface lesions like melanoma – dial the depth of destruction by selecting frequency of the radiation.

Ultrasound

Penetration decreases with increased frequency

Resolution increases with increased frequency

Air is a poor conductor of high frequencies (conductive gel, long time with

trained operator, inconsistency

Core hydration meter

Techniques that replace a procedural intervention with an imaging modality

Of the patients with positive fecal occult blood test, 58% will have normal colonoscopy

Techniques that improve accuracy to avoid procedural intervention

Accuracy of MRI for knee cartilage lesions between 15% and 60%

Better techniques that show how things work, not just how they look

Cardiology is good at this, the rest not so good – problems with field of view

Commercial viability

The physics may be right, the need is there, but they will not pay!

MRI is expensive but they pay – the information is really important

What would I pay for a hydration meter? \$100 ? Probably ... \$10,000? Not likely...

The sweet spot

