Lasers in Medicine and Life Sciences Szeg



MINT. SAME DELIS 2019

Lasers in Medicine and Life Sciences



 5 Jul Fri
 ▶ 9⁰⁰-10³⁰ • Zsolt Tóth, Lasers for dental applications

> University of Szeged, Faculty of Dentistry Department of Oral Biology and Dental Research

Contents of this talk

- Lasers
- Light material interactions
- Overview of dental applications

Lasers Light Amplification by Stimulated Emission of Radiation



Lasers are unique light sources. Many important parameters of laser light are substantially different from those of the light emitted by classical (thermal or fluorescent) light sources

"a solution looking for a problem,"

Short history of Laser development

Article (PDF Available) in Applied Optics 49(25):F99-122 · September 2010 with 1,155 Reads

DOI: 10.1117/1.3483597 · Source: PubMed

🛃 Cite this publication



Jeff Hecht II 32.32 · Institute of Electrical and Electronics Engineers

Abstract

Half a century has passed since Theodore Maiman's small ruby rod crossed the threshold of laser emission. The breakthrough demonstration earned headlines, but in the early years the laser was called "a solution looking for a problem," and there was a germ of truth in the joke. Years of development since then have vastly improved laser performance, and tremendously increased their variety, earning lasers important roles in scientific research, consumer products, telecommunications, engineering, medicine, materials working, and a host of other applications. This article reviews the highlights of those developments and puts them into context, showing how laser technology has evolved to meet application requirements.

Optical spectrum

range name, sign	subrange name, sign		λ (nm)	v [1/cm]	f(THz)	<i>E</i> (eV)
Ultraviolet (UV)	Vacuum UV VUV	UV- C	100 - 200	5·10 ⁴ -10 ⁵	1498-2997	6,2 - 12,4
	Far UV FUV		200 - 280	35700-5.104	1070-1498	4,43 - 6,2
	UV-B		280 - 315	31700-35700	951-1070	3,94 - 4,43
	UV-A		315 - 400	25000-31700	749 -95 I	3,1 - 3,94
Visible (VIS)	VIS		400 - 800	12500-25000	375-749	1,55 - 3,1
Infrared (IR)	Near IR NIR	IR- A	800 - 1400	7100-12500	214-375	0,89 - 1,55
		IR-B	1400 - 3000	3300-7100	99-214	0,41 - 0,89
	Mid IR MIR	IR-C	3000 - 5·10 ⁴	200-3300	6-99	0,025 - 0,41
	Far IR FIR		5·10 ⁴ - 10 ⁶	10-200	0,3-6	0,00124- 0,025

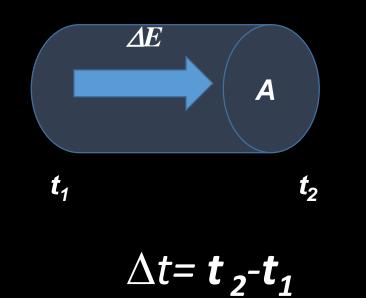
Different spectral ranges, and the associated λ wavelengths, v wave numbers, f frequencies, and E photon energy values.

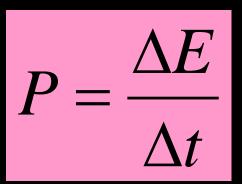
Definition of power of radiation

The quantity of energy reaching the surface during a unit time gives the current of light or power of light.

In a time interval Δt

energy in an amount of ΔE is transported through an area A

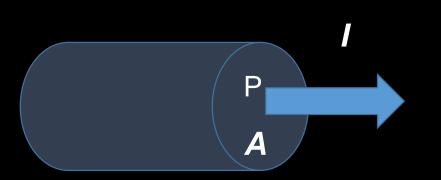


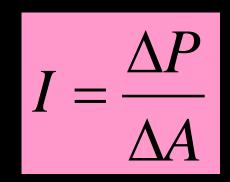


unit: //s=W

Intensity

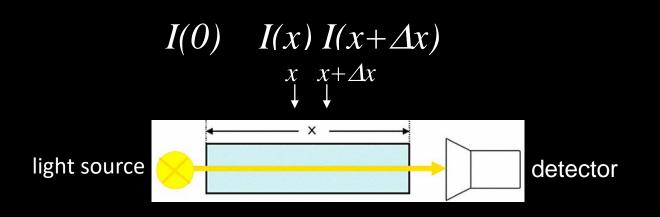
The strength of phototermal, or photochemical effects depends on the *l* **intensity**, **or power density** of the light. This is the light power which falls to a unit area:

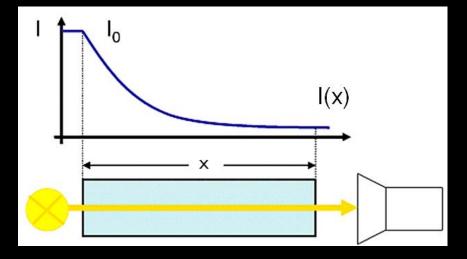




unit:W/m²

Light absorption





 $\Delta I i$ s directly proportional to both I and Δx

$$\Delta I = - \alpha(\lambda) \cdot I \cdot \Delta x \quad ,$$

$$I(x) = I_0 \cdot e^{-\alpha(\lambda) \cdot x}$$

Due to absorbtion the light intensity exponentially decreases as a function of depth. This is *Lambert-law*.

Principles of operation

Absorption

electron moves from an enery level E_0 to a higher level E_1 by absorbing a photon with a probability B_{12}

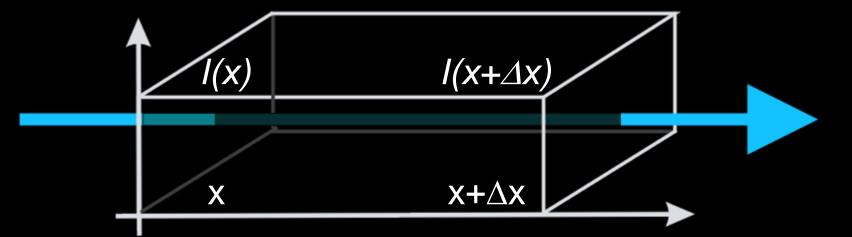
Emission

When an excited electron returns to its ground level, it emits a photon with a probability A_{21} . The energy of this photon is equal with the difference of energies of the excited and the ground levels.

Stimulated emission

Due to the interaction of an excited atom and a photon, the atom returns to its ground state and emits an other photon with a probability B_{21}

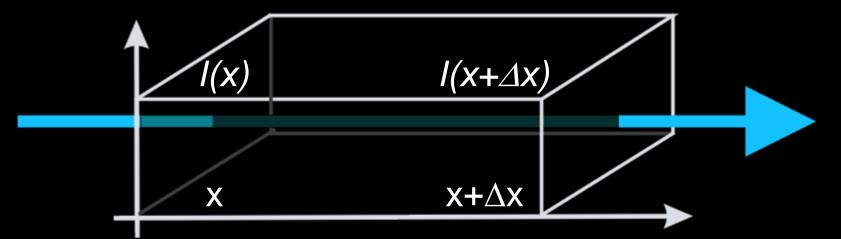
 $B_{12}=B_{21}$



Let N₁ and N₂ the number of atoms in ground and excited state, respectively.

- absorption decreases the intensity,

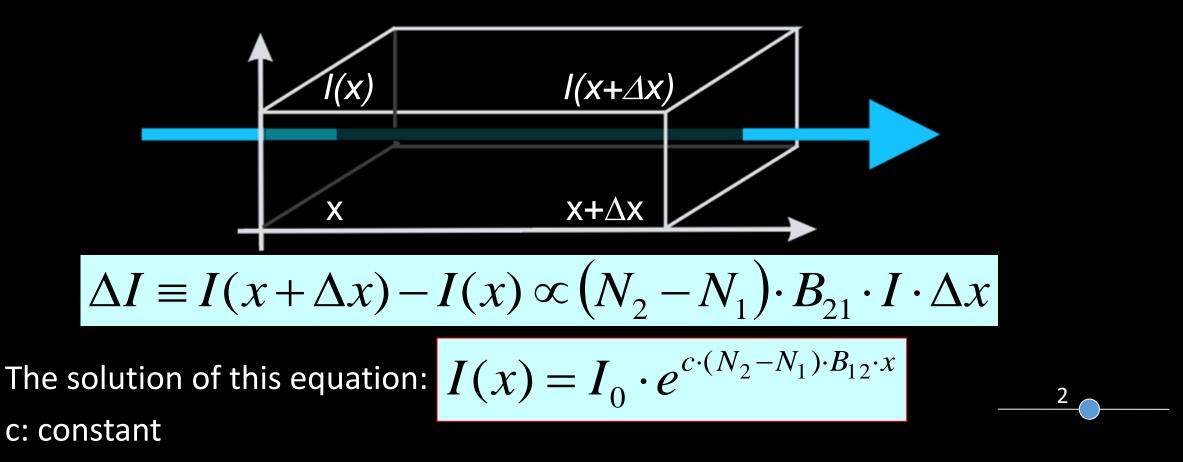
$$\propto N_1 \cdot B_{12}$$



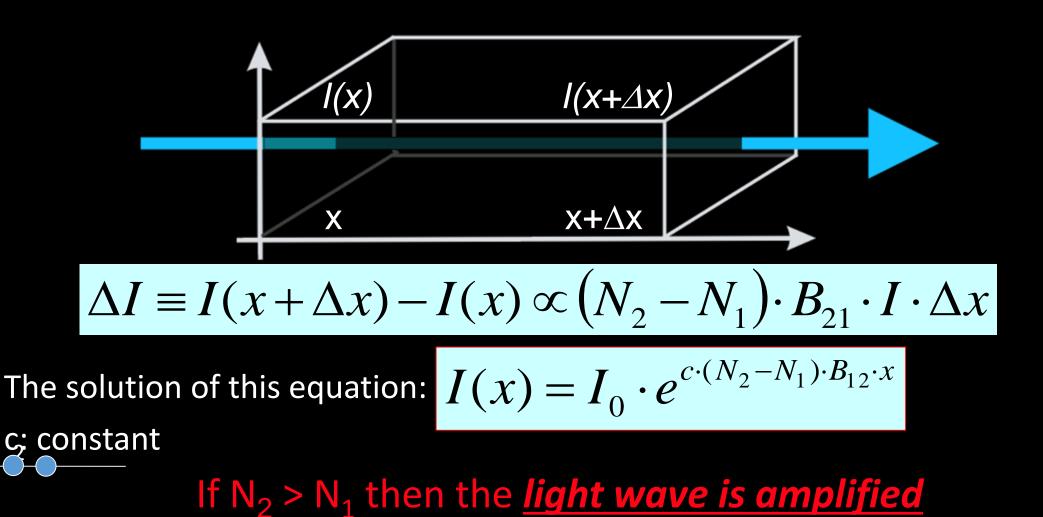
Let N₁ and N₂ the number of atoms in ground and excited state, respectively.

- stimulated emission increases the intensity

$$\propto N_2 \cdot B_{21}$$

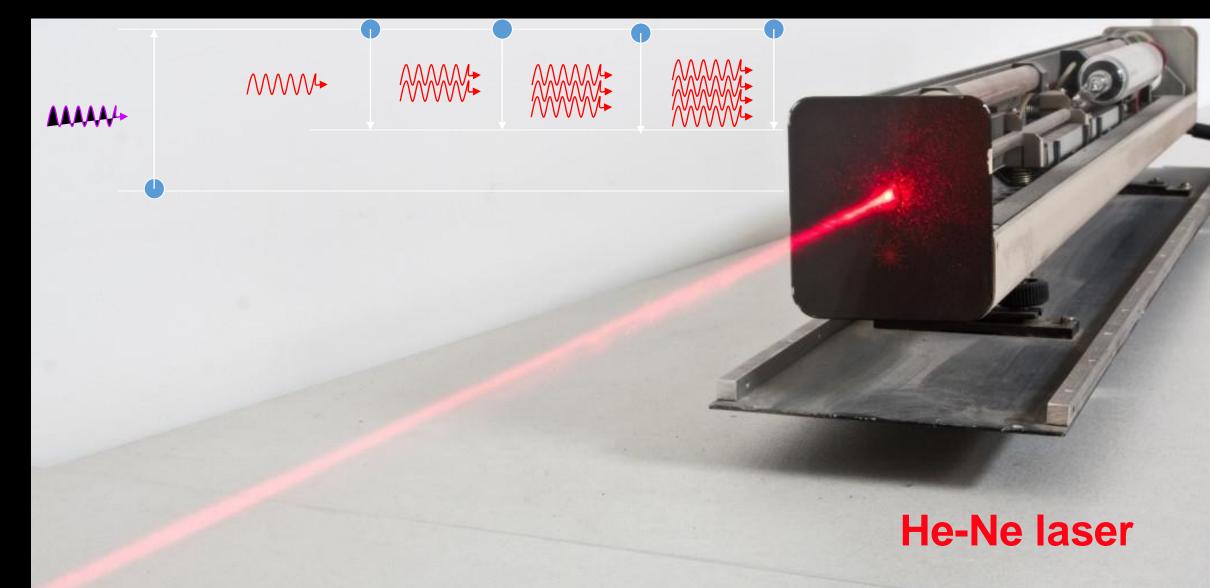


If $N_1 > N_2$ then the light wave weakens (as in case of Lambert law!)



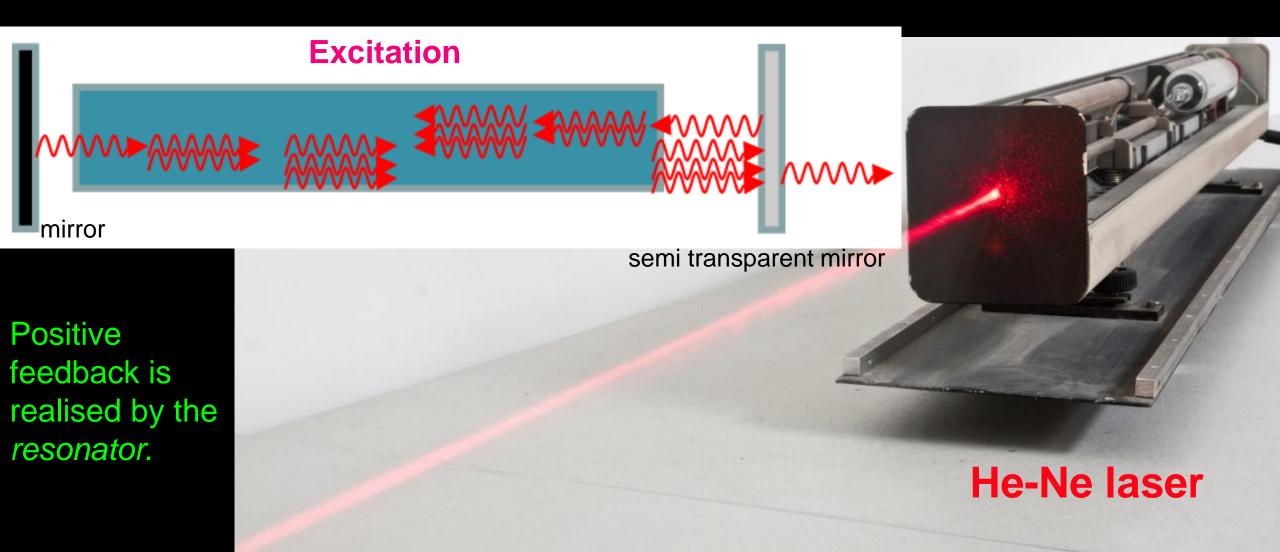
Operation of lasers

Stimulated emission + Population inversion = Amplification



Operation of lasers

Amplification +Feedback = LASER



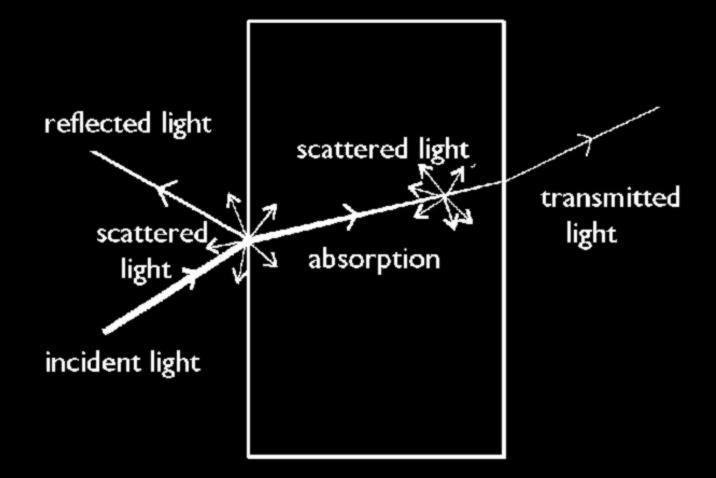
Properties of laser light

- Wavelength: it depends on the energy difference of the electronic transitions
- Monochromaticity: laser radiation consists of one single color or wavelength
- **Divergence:** the laser radiation is directional (collimated)
- Coherence: it characterizes the phase relation of the waves. Coherent light rays are able to produce interference
- Energy and oputput power: The output power is defined by several laser parameters (pumping, amplification, feedback, outcoupling)
- The laser radiation can be continuous (CW laser means Continuous Wave laser) in time or pulsed.

Lasers, power densities, pulse lengths

Laser type	Process time	Power density [W/cm²]	wavelength
ion lasers (He-Ne, Ar+, Kr+)	ms-min	10 ³ -10 ⁶	VIS
CO ₂ lasers	ms-s	10 ⁵ -10 ⁷	10,6 μm
Diode lasers	μs-s	10 ³ -10 ⁶	UV-VIS-NIR
Q-switched solid state lasers	ns	10 ⁶ -10 ¹³	UV-VIS-NIR
excimer lasers	ns	10 ⁶ -10 ¹¹	UV
Dye excimer laser	fs-ps	10 ¹⁰ -10 ¹⁴	UV
CPA solid state lasers	fs	10 ¹⁰ -10 ¹⁷	700-800 nm

Light – material interaction

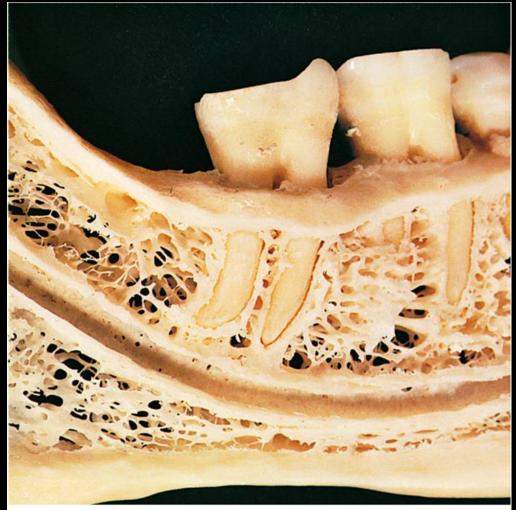


Teeth...

The mouth is the primary portal of the alimentary system and a secondary portal for the respiratory system.

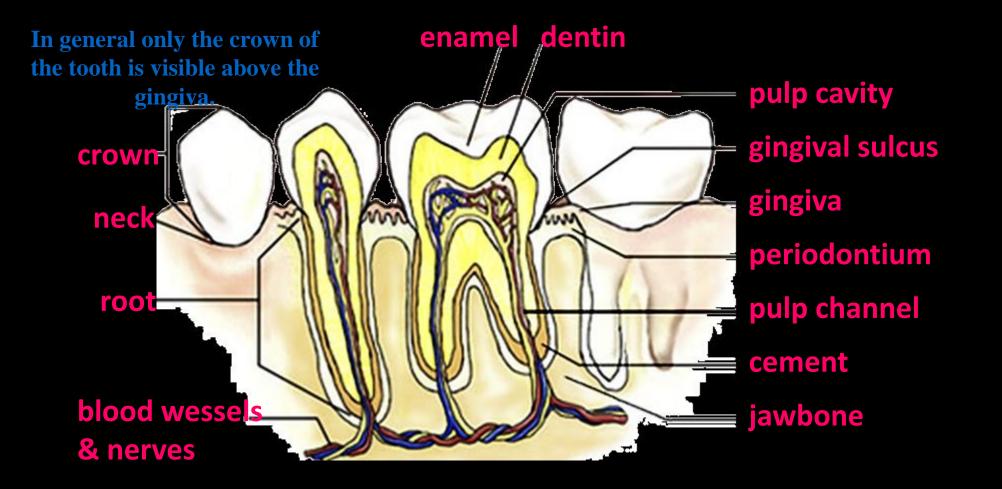
The roots of teeth are embedded inthe maxilla (upper jaw) orthe mandible (lower jaw)and are covered by gums.





Benninghoff / Drenckhahn: Anatomie 1, 17.A. © Elsevier GmbH. www.studentconsult.de

Teeth and their structure



Each tooth has 3 mineralized portions: Enamel / substantia Adamantina

98% inorganic components (Calcium phosphate) 2% organic material (soluble and insoluble proteins) The enamel is made of enamel-prisms and is cell-free!

Dentin / substantia eburnea

70% inorganic components

(primarily calcium and phosphate in the form of hydroxyapatite crystals).

20% organic matrix

90% of them - Type I collagen, 10% proteoglycans).

10% water

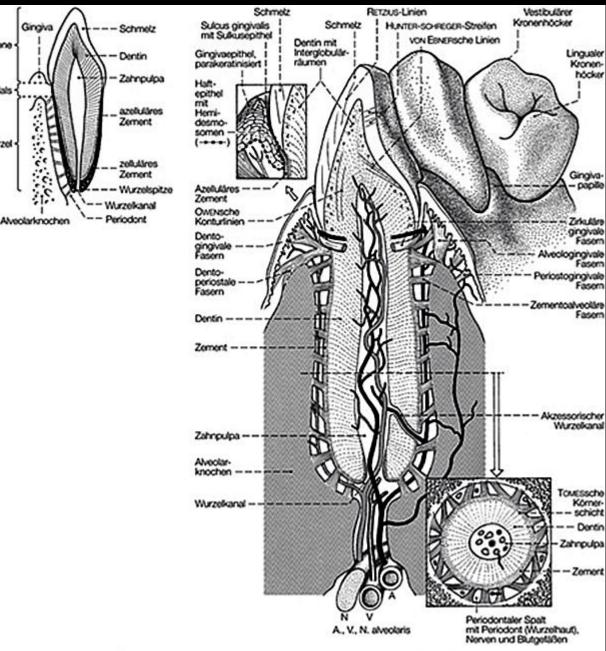
Cement / substantia ossea

Covers the dentin of the root;

Formed by the cementoblasts; they are already surrounded by the matrix cementocytes;

50% inorganic material - amorphous calcium phosphate, hydroxyapatite crystals;

50% organic material: collagen fibers;



Krone -

Wurzel

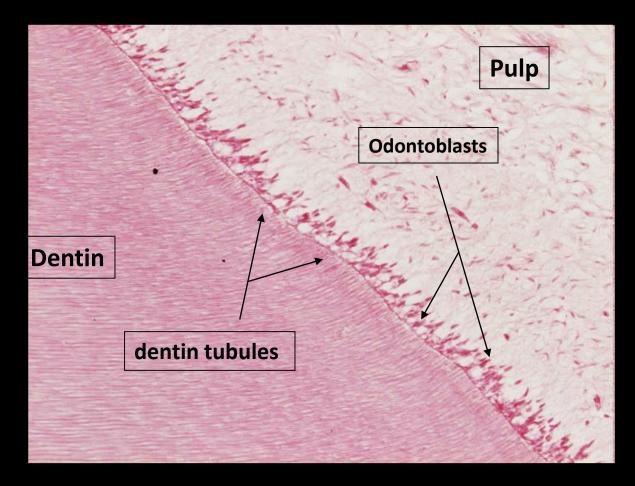
Benninghoff / Drenckhahn: Anatomie 1, 17.A. @ Elsevier GmbH. www.studentconsult.de

Dental pulp

Loose connective tissue rich in blood vessels and nerves.

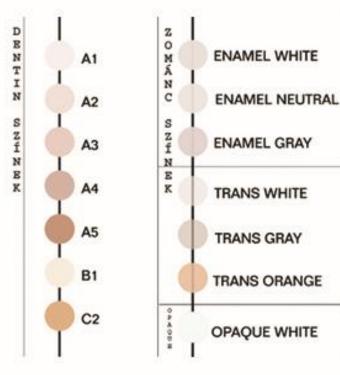
The dentin producing cells: odontoblasts

The Tomes fibers of the odontoblasts run into the dentinal tubules.



Optical properties: color of teeth



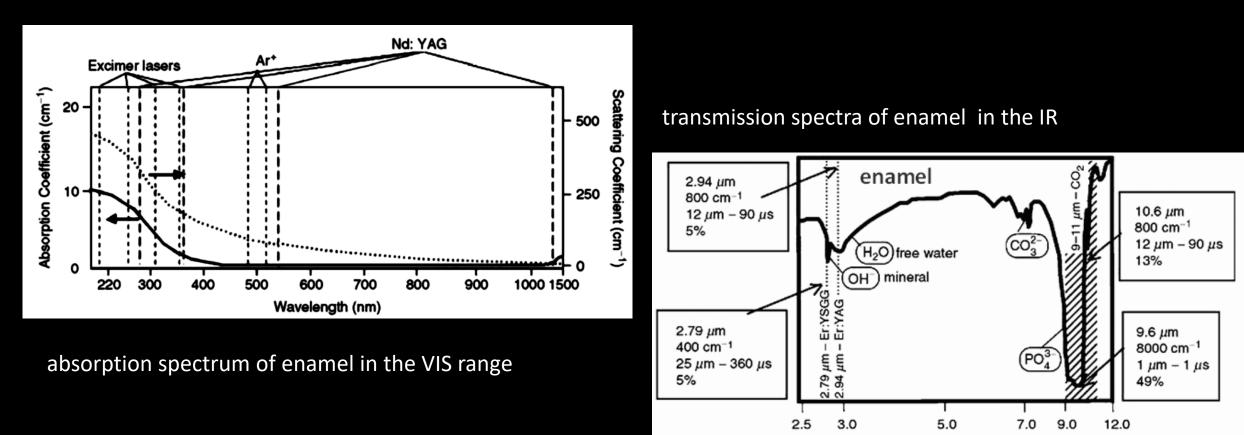






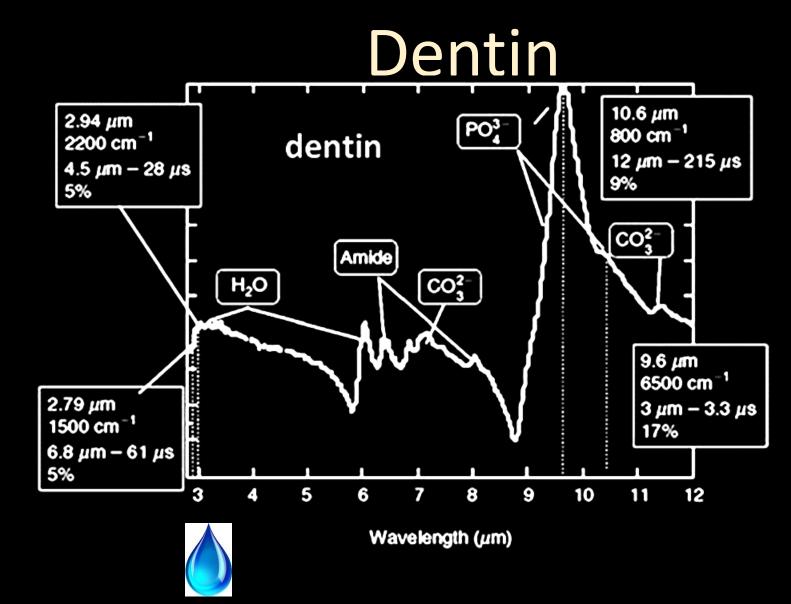
Optical properties: transmission, scattering, absorption

Enamel



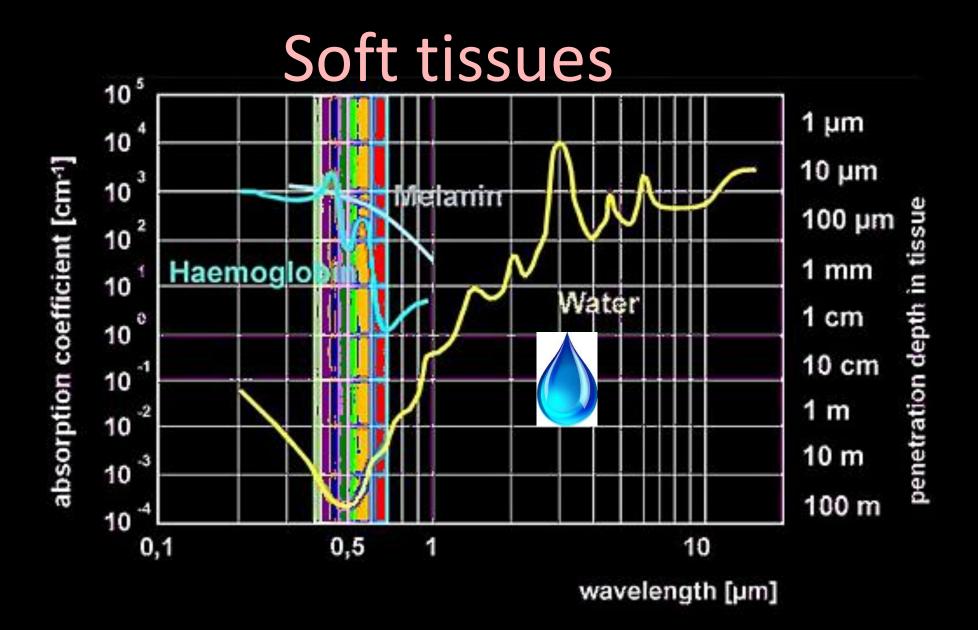
Wavelength (µm)

Optical properties: transmission, scattering, absorption



Absorption spectrum of dentin in the IR

Optical properties: absorption spectra



Laser processing of biological materials

- production of high energy particles,
 hadron therapy
- drilling of teeth
- evaporation of hard tissues
- evaporation of soft tissues
 laser surgery
- coagulation
- selective heat treatment
 - local heating of tumors treatment of skin deseases (e.g. psoriasis)
 - treatment of allergic reactions of mucosa
- wound healing

Plasma formation peneration of shock waves plasmachemical reactions

Evaporation

drilling
cutting

High temperature treatment

$I = \frac{E}{A t}$

Heat treatment

Stimulation without significant
heating

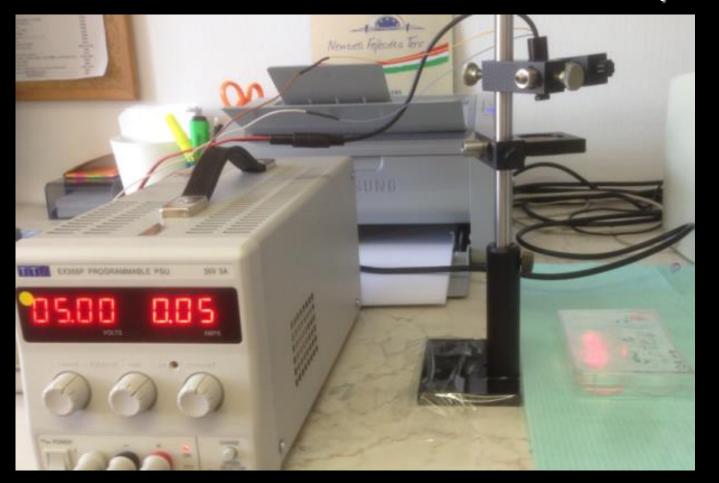
Low-level laser therapy (LLLT): Ion lasers - Laser diodes red wavelengths

- Modestly effective, in relieving short-term pain
- The evidence for LLLT being useful in the treatment dentistry, and wound healing is unclear.
- Effects of LLLT appear to be limited to a specified set of wavelengths

Diode Laser on Healing of Tooth Extraction Socket:

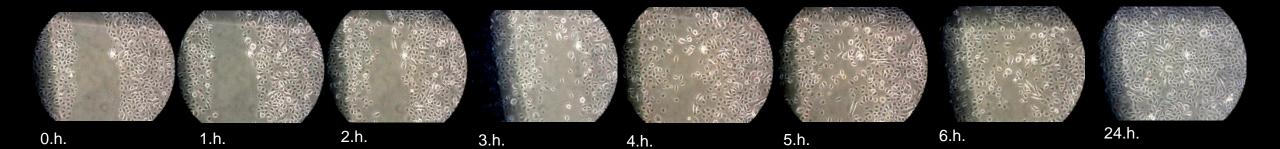


Low-level laser therapy (LLLT): Laser diode - cell culture experiment

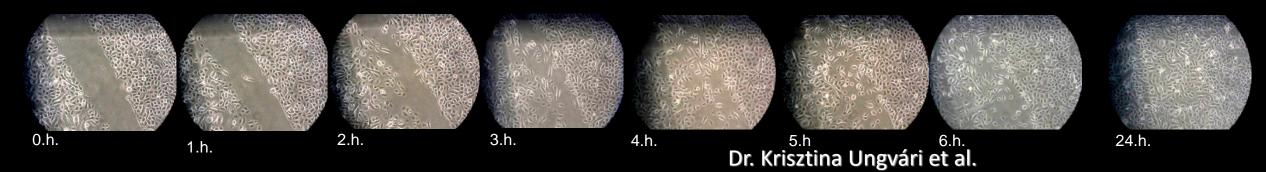


Dr. Krisztina Ungvári et al.

Low-level laser therapy (LLLT): Laser diode - cell culture experiment HUMAN EPITHEL CELLS



• Diode Laser: (λ =650 nm) Power: 20 mW 30 s illumination



Tooth whitening CW ion / semiconductor lasers: Blue wavelengths







Active laser medium is CO_2 gas. wavelength of 10,9 μ m,

• Soft tissue applications Frenectomy



Peri-Implantitis treatment



smile design





Little to no bleeding, swelling, post-operative pain Less risk of infection: Quicker healing time

Solid State Lasers: Nd:YAG lasers Root canal treatment

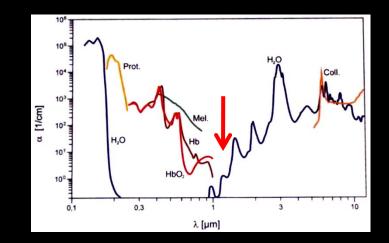
Active laser medium is neodymium-doped yttrium aluminium garnet (Nd:Y3Al5O12). wavelength of 1064 nm,

ENDODONTIC Treatments

The laser disinfection complements conventional treatment.

- The high energy laser light is capable to destroy bacteria in the root canal and in dentinal channels.
- Approx. 500 μ m in depth of the dentin tubules is also effective in addition to the canal walls.
- Greater security can be the sterilized running inside the tooth root canal.
- Using the laser success, rate of endodontic treatments increases.

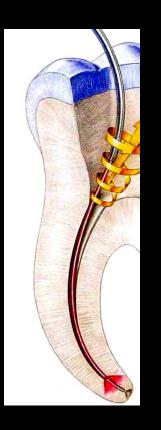


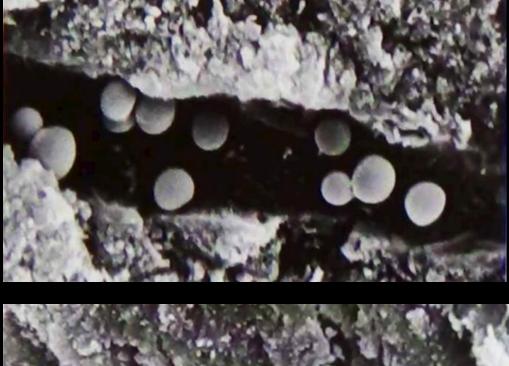


Root canal treatment











Nd:YAG laser treated dentinal channels

Solid State Lasers: Er:YAG or Er,Cr:YSGG lasers

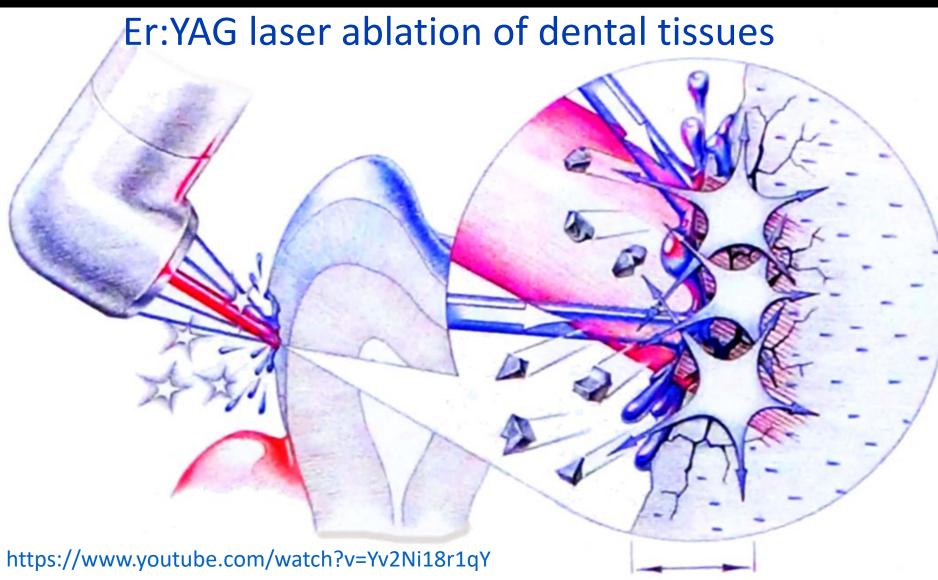
- Active laser medium is erbium-doped yttrium aluminium garnet (Er:Y3Al5O12).
- wavelength of 2940 nm,
- Soft tissue application
- like CO₂ lasers

• Periodontal pocket treatments

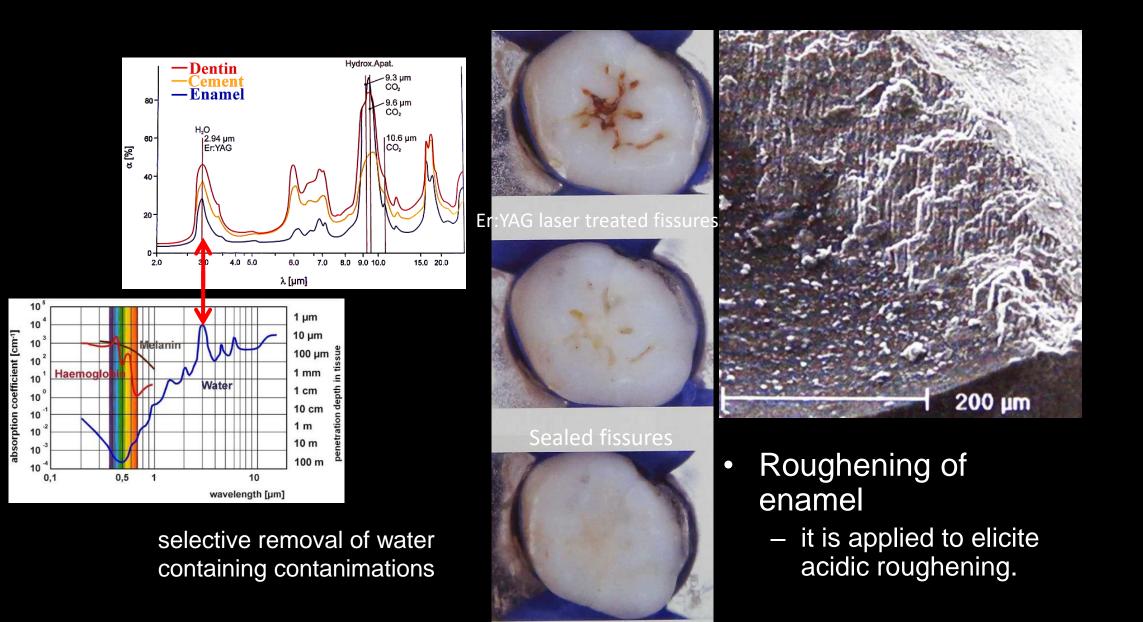


Solid State Lasers: Er:YAG or Er,Cr:YSGG lasers

• Hard tissue application

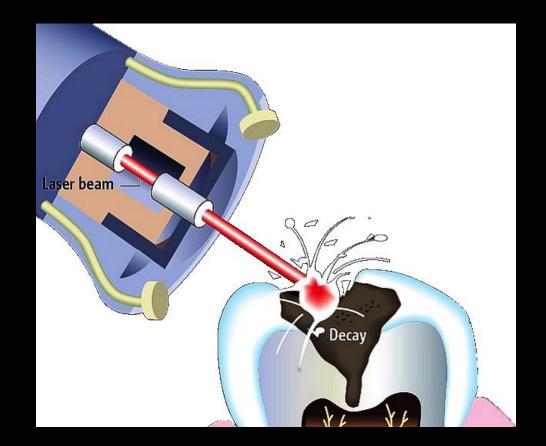


Extended fissure sealing



Cavity preparation

- Dental Erbium YAG laser drills through photodistruption (crushing) effect.
- The short pulses absorbed by the water content of enamel and dentin.
- As water instantly boiled, its pressure mechanically break out of the hard tissue particles in the form of very small crystals.
- Minimal thermal effect on dentin.
- Selective removal of tooth decay.
- Removal of fillings.
 - It is not good for amalgam! Mercury gas forms.

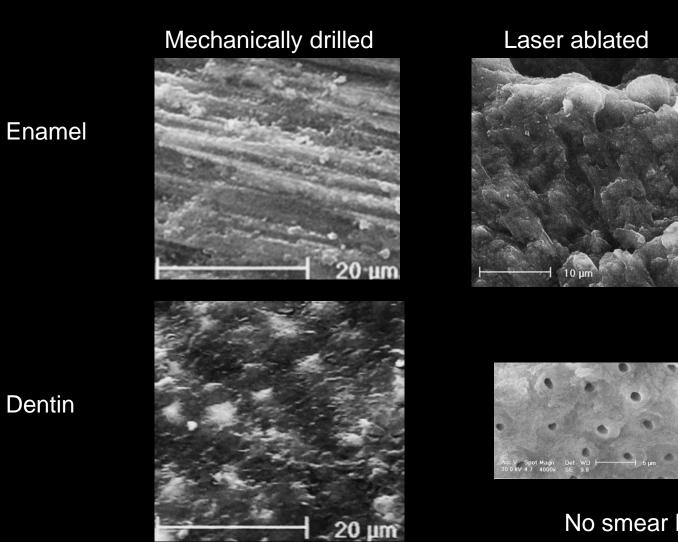


Cavity preparation

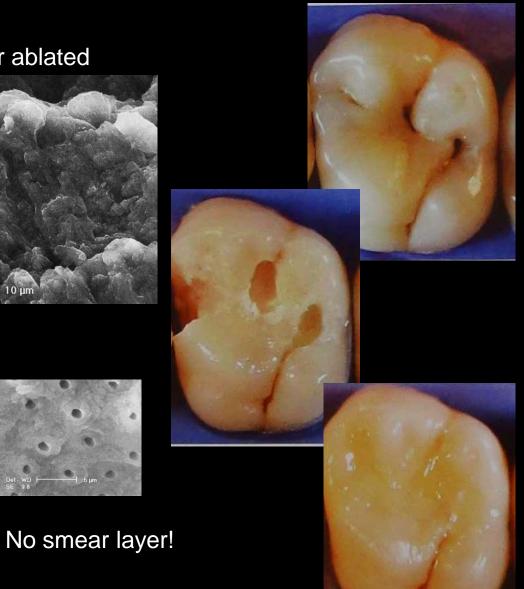
- In most cases local anesthesia is not necessary because laser drilling is painless.
- There is no damage to the tooth by heat because the surrounding dental tissue do not have time to warm up because of short pulses.
- There is no vibration and vibration of the tooth in the skull, because the laser drill a tooth without touching.
- The formed cavities will be sterile, since the laser beam evaporates the bacteria from the cavity.
- The surface will be uneven, which provides better grip all adhesive filling methods, thus increasing traction is no longer necessary by etching with acid of the developed cavities.



Cavity preparation



Dentin

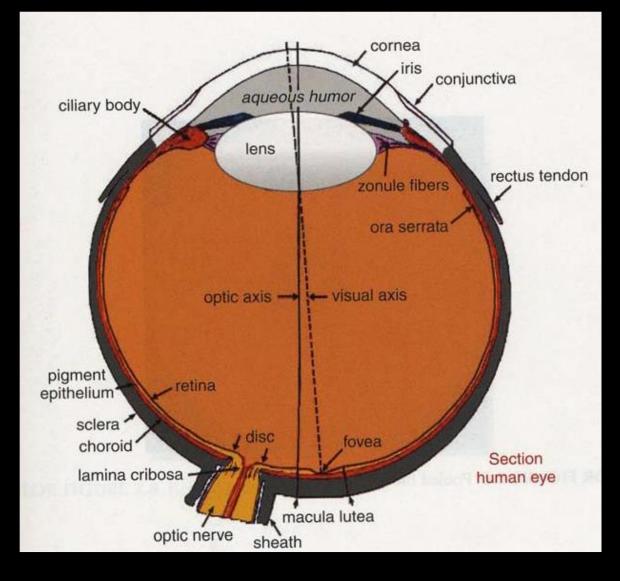






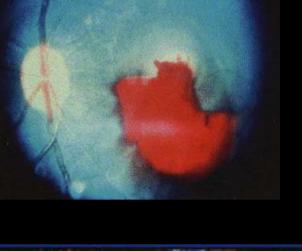
Laser safety

- Cornea, lens, and retina are susceptible to damage by laser light.
- Parallel laser light is focused by the lens onto the retina!
- The eye in essence intensifies light intensity, particularly the visible and the near-infrared wavelengths, in some cases as much as 100,000 times.



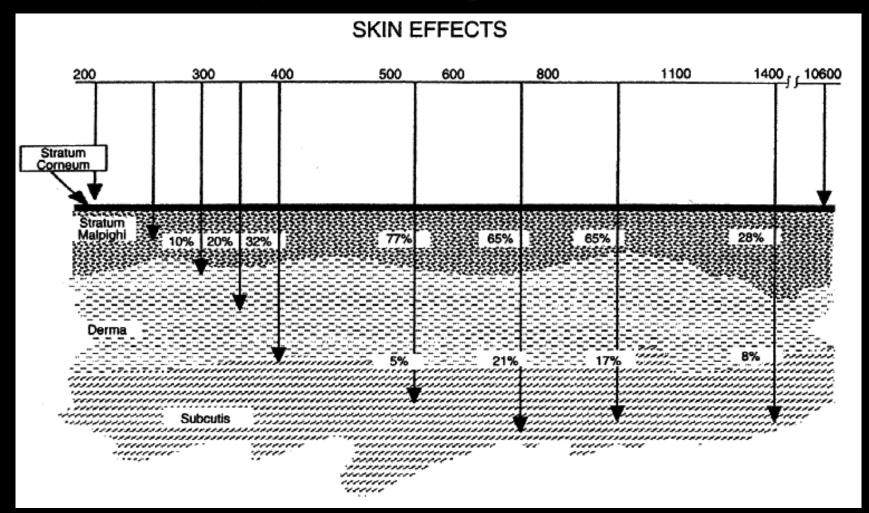
Eye injury by laser light

- Symptoms of Exposure: If the eye has been damaged by laser light the first symptoms can be a bright flash of light (if a visible wavelength) followed by watering of the eye, headache, and floaters.
- Floaters are actually dead cells that have detached from the retina and choroid.
- If the cornea has been damaged there will be a sensation of grittiness, as if sand were in the eye. In some cases there may be immediate pain at the site of exposure.





Skin transmission by wavelength



Hazards caused by various light wavelengths

Wavelength Range Ultraviolet C 200–280 nm

Ultraviolet B 280-315 nm Ultraviolet A 315-400 nm Visible 400-700 nm Near-infrared 700-1.400 nm Mid-infrared 1,400-3,000 nm Far-infrared 3,000-100,000 nm Effect on Eye Photokeratitis

Photokeratitis

Photochemical cataract

Photochemical Thermal retinal injury Cataract and retinal burn

Corneal burn Aqueous flare, cataract Corneal burn Effect on Skin Erthema (sunburn) Skin cancer Accelerated skin aging Increased pigmentation

Pigment darkening Skin burn Pigment darkening Skin burn Skin burn

Skin burn

Skin burn

Laser hazard classification

Class

Class 1: Safe Visible and nonvisible

Class 2: Low power Visible only

Class 1M: Safe without viewing aids 302.5 to 4000 nm

Class 2M: Safe without viewing aids Visible only

Class 3R: Low and medium power 302.5 nm to 1 mm Class 3B: Medium and high power Visible and nonvisible

Class 4: High power Visible and nonvisible

Basis for Classification

Lasers that are safe under reasonably foreseeable conditions of operation; generally a product that contains a higher-class laser system but access to the beam is controlled by engineering means.

For CW lasers, protection of the eyes is normally provided by the natural aversion response, including the blink reflex, which takes approximately 0.25 sec. (These lasers are not *intrinsically* safe.) AEL = 1 mW for a CW laser.

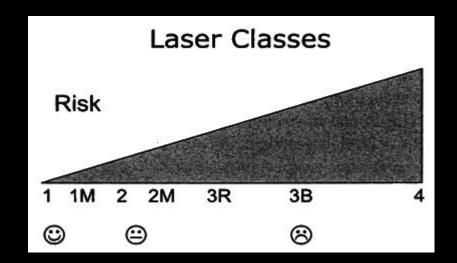
Safe under reasonably foreseeable conditions of operation. Beams are either highly divergent or collimated but with a large diameter. May be hazardous if user employs optics within the beam.

Protection of the eyes is normally provided by the natural aversion response, including the blink reflex, which takes approximately 0.25 sec. Beams are either highly divergent or collimated but with a large diameter. May be hazardous if user employs optics within the beam.

Risk of injury is greater than for the lower classes but not as high as for class 3B. Up to 5 times the AEL for class 1 or class 2.

Direct intrabeam viewing of these devices is always hazardous. Viewing diffuse reflections is normally safe provided the eye is no closer than 13 cm from the diffusing surface and the exposure duration is less than 10 sec.

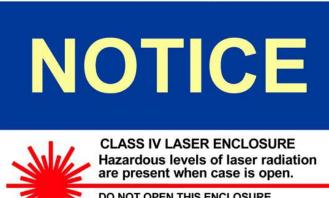
AEL = 500 mW for a CW laser Direct intrabeam viewing is hazardous. Specular and diffuse reflections are hazardous. Eye, skin and fire hazard. Treat class 4 lasers with caution.

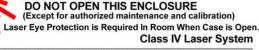


How to protect?

• Take seriously the labels:







UNIVERSITY OF WASHINGTON ENVIRONMENTAL HEALTH AND SAFETY RADIATION SAFETY (206) 543-0463



How to protect?

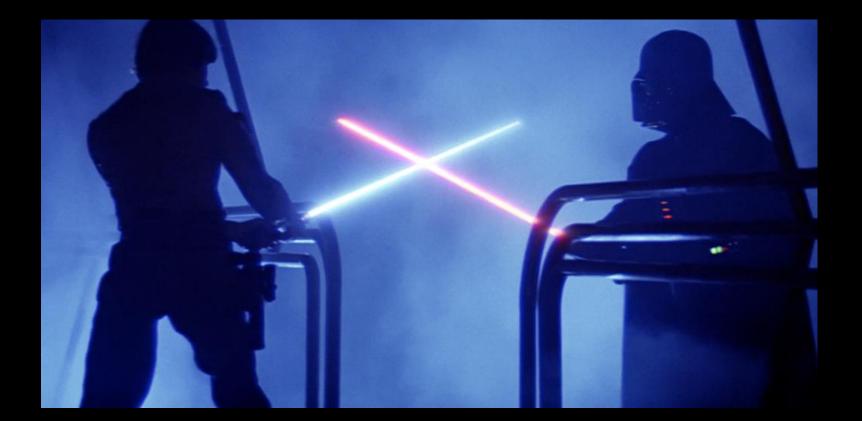
- Do not look to laser light directly!
- Use the appropriate protecting glasses for your patient and YOURSELF!





How to protect?

• Cover the skin with clothes:



SUMMARY: examples for Laser applications in dentistry

prevention

- treatment of sensitivity by closing tubules
- supplementing fluoride treatment
- preventing tooth decay (UV light germicidal effect)

diagnosis

 caries detection by photoluminescence

science

- implant surfaces
- interferometry
- holography, etc

therapy

- teeth whitening by oxidative processes (promoting lower drug concentrations, shorter treatment time and higher sufficiency)
- tooth drilling
- root Canal Treatment
- fillings removal
- treatment of oral and periodontal diseases
- laser surgery
- photodynamic therapy
- soft laser therapy: stimulation of wound healing and periodontitis
- and many more...

Thank you for your attention!

