

MUSE

(Microscopy with UV Surface Excitation)

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UC DAVIS
HEALTH



UCLA Health

ASDP 54th Annual Meeting, Baltimore, MD



➤ Disclosure

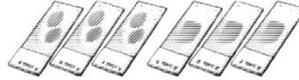
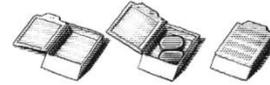
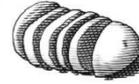
- Dr. Richard Levenson is co-founder and CEO of MUSE Microscopy Inc.
- Remaining authors declare no conflicts of interest



➤ Pathology



➤ Pathology

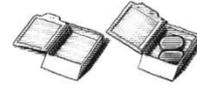


Conventional microscopy

❖ Require traditional fixation, thin-sectioning and staining



➤ Pathology



Conventional microscopy

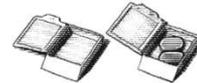
- ❖ Require traditional fixation, thin-sectioning and staining

Ex-vivo microscopy (Slide-free)

- ❖ Rapid imaging of biopsy material



➤ Pathology



- Conventional microscopy

- ❖ Require traditional fixation, thin-sectioning and staining

- Ex-vivo microscopy (Slide-free)

- ❖ Rapid imaging of biopsy material



- In-Vivo microscopy (Biopsy-free)

- ❖ Evaluation of human tissue microstructure in real time



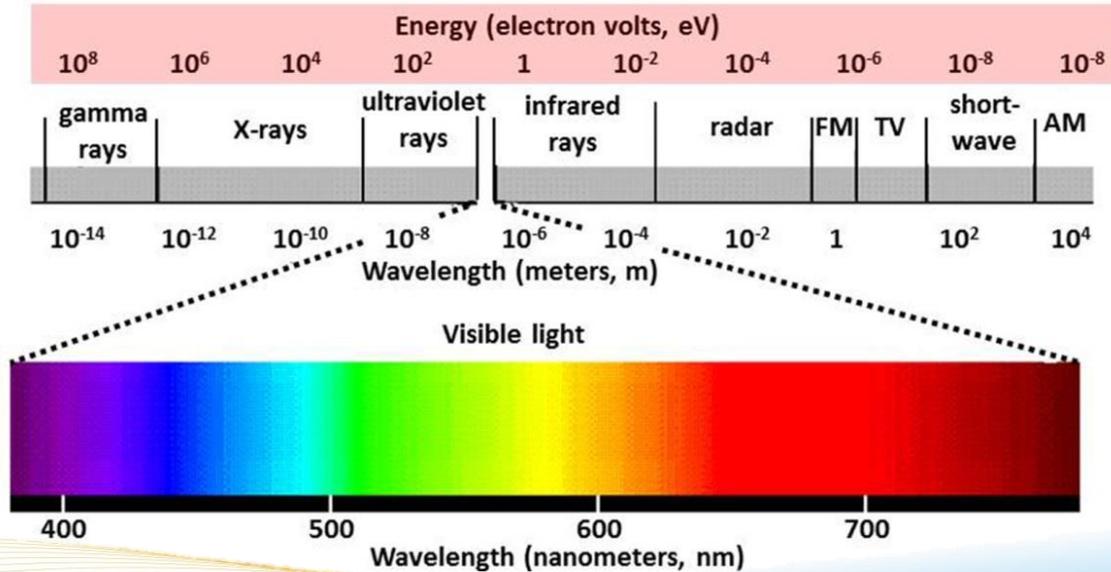
➤ What is MUSE?

- ❑ A novel Ex-Vivo microscopy
 - ❖ Slide-free method developed at UC Davis
 - ❖ First in evaluating on human tissue
- ❑ Microscopy with UV Surface Excitation (MUSE)
 - ❖ Using UV-emitting LED with wavelength of 275 to 285 nm
 - ❖ Digital camera captures the excitation light



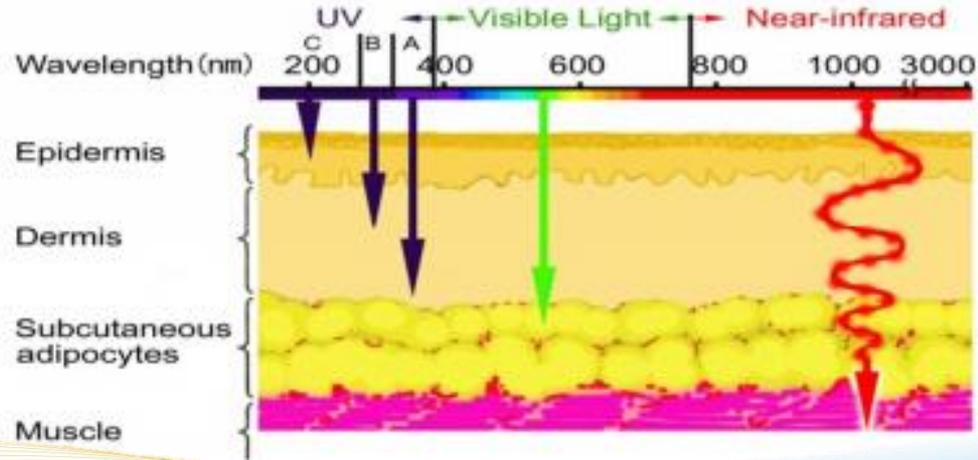
➤ How MUSE works?

- Ultraviolet (UV) is an electromagnetic radiation
 - ❖ Wavelength: 10 nm to 400 nm (Shorter than visible light)



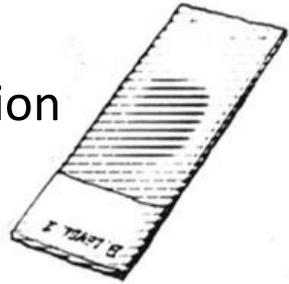
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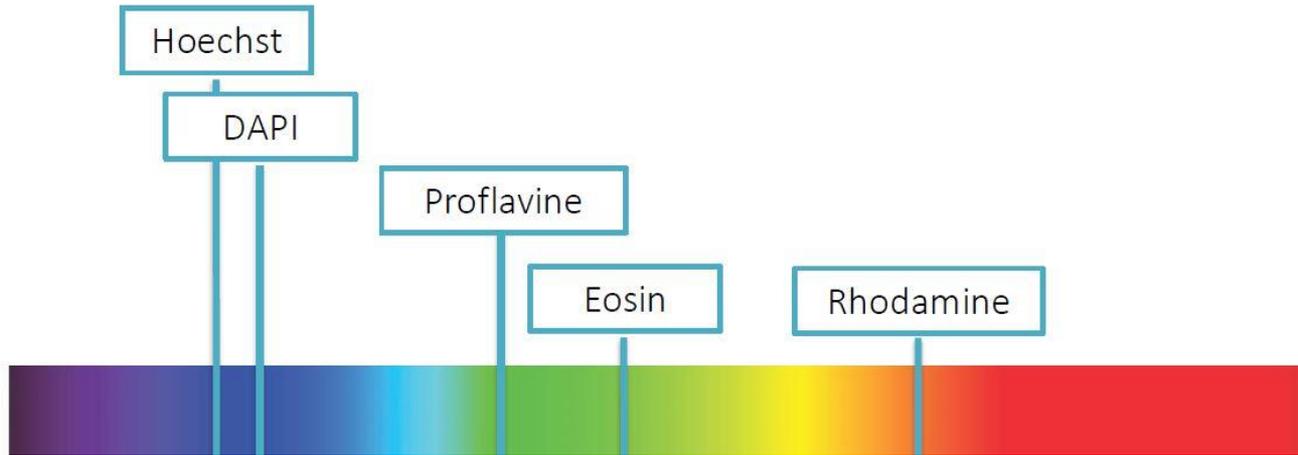
➤ How MUSE works?

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 - ❖ Wavelength: 10 nm to 400 nm (Shorter than visible light)
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- ❑ 275 to 285 nm UV light has penetrate depth of 3 microns
 - ❖ Approximately the thickness of a conventional tissue section



➤ How MUSE works?

- ❑ UV light can excite dyes or endogenous auto-flourescent materials
 - ❖ The emission light varies from blue to red

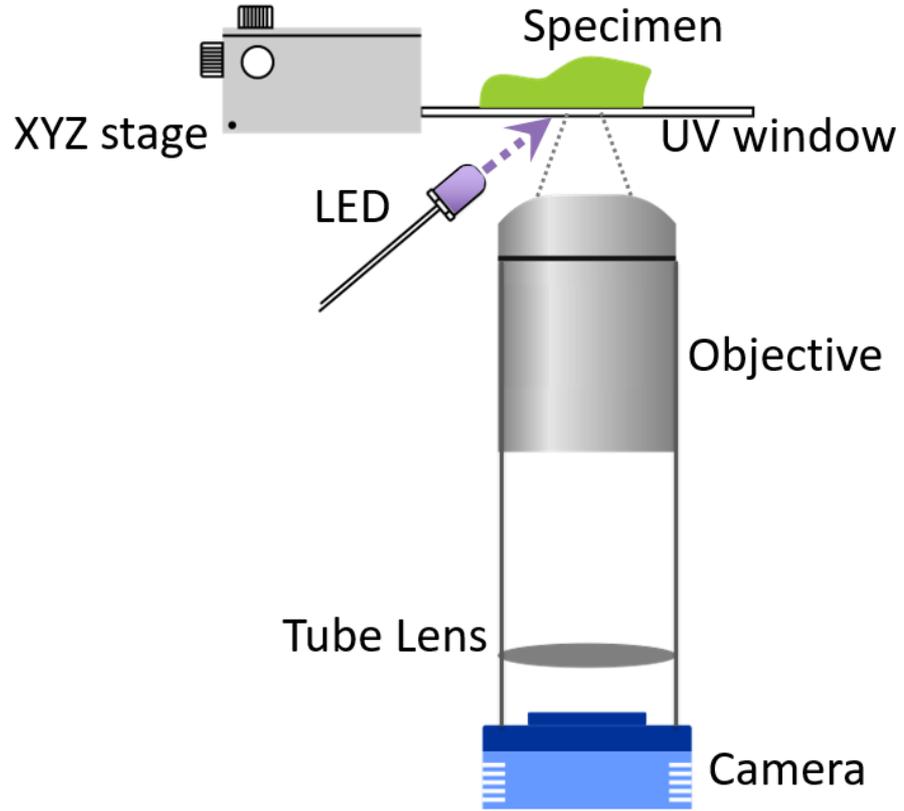


➤ How MUSE works?

- ❑ UV light can excite dyes or endogenous auto-florescent materials
 - ❖ The emission light varies from blue to red
- ❑ A digital camera can capture the emitted lights
 - ❖ 3 microns thickness from the surface of the specimen
 - ❖ The images must be similar to H&E but in full color

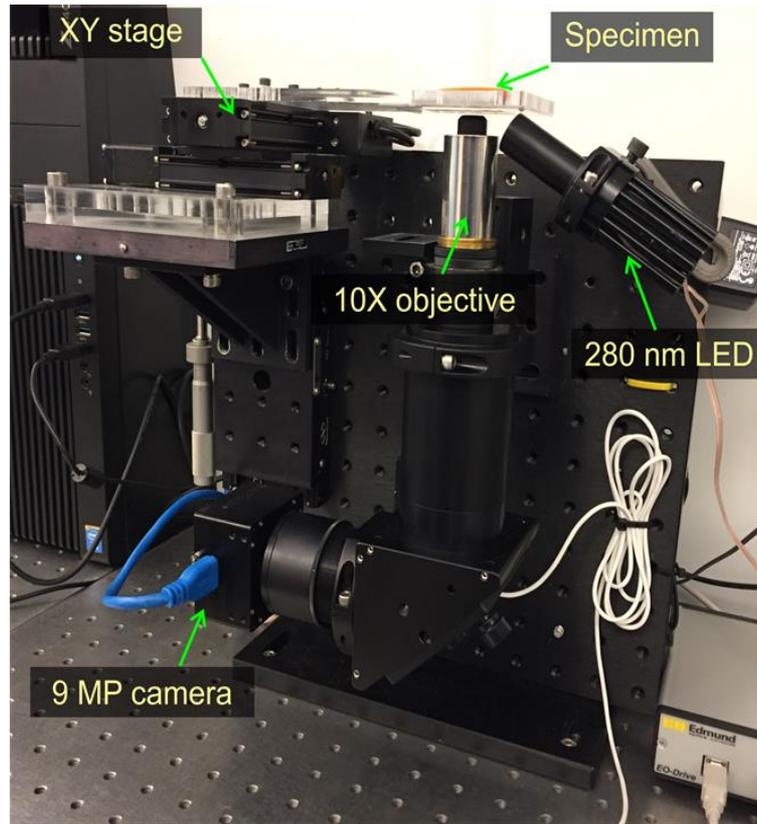


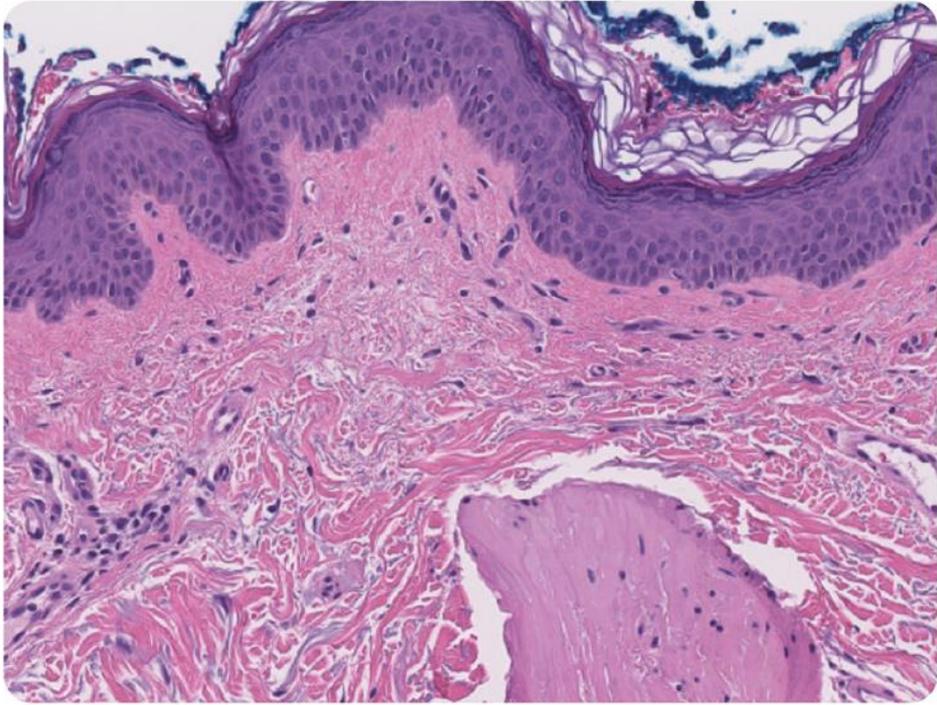
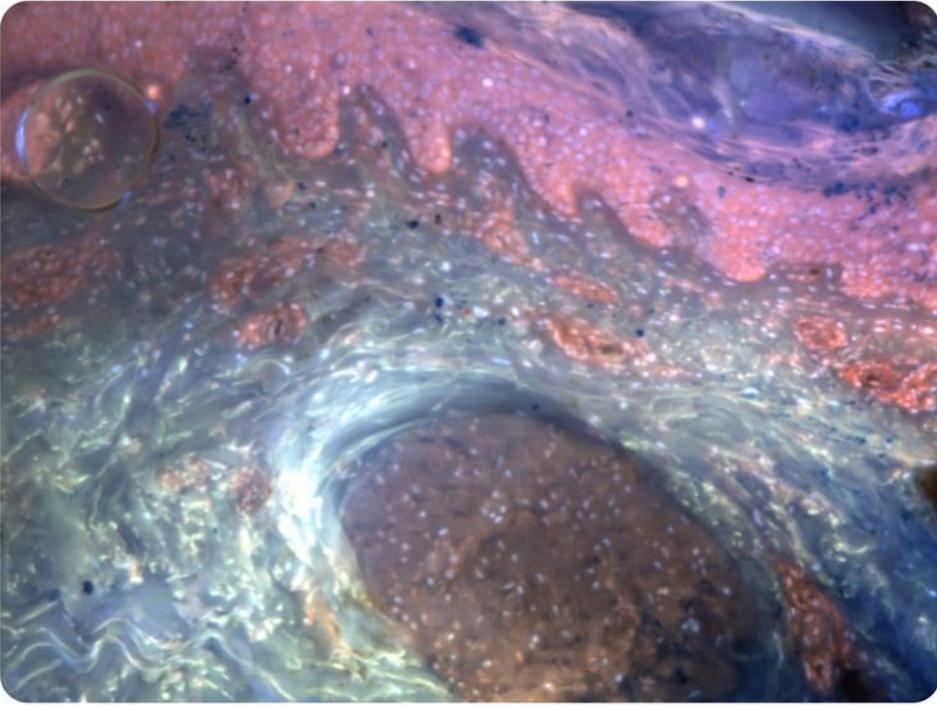
➤ MUSE setup:



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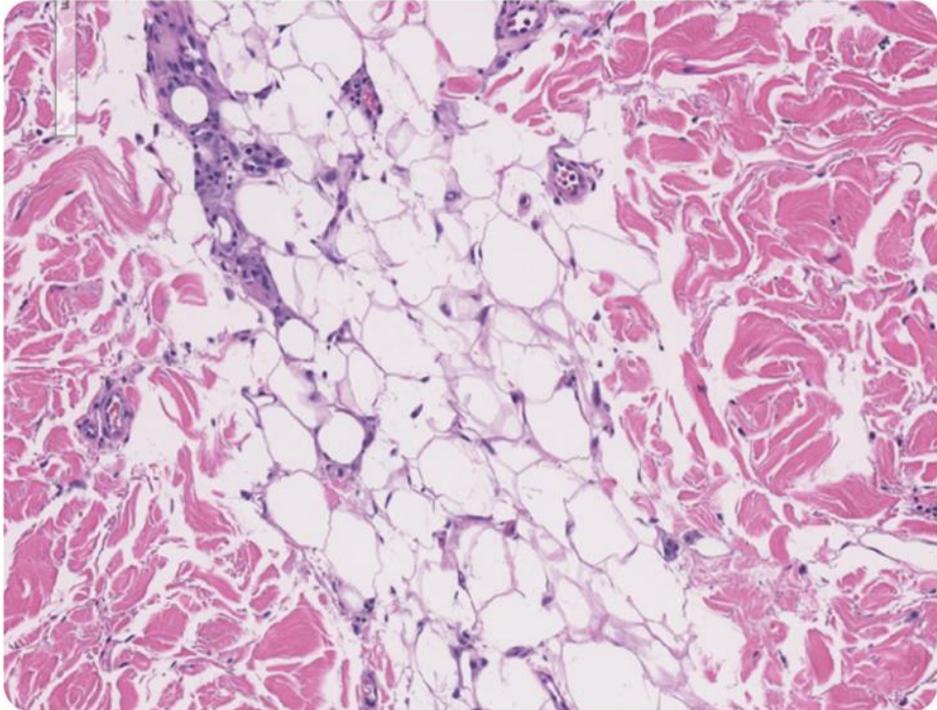
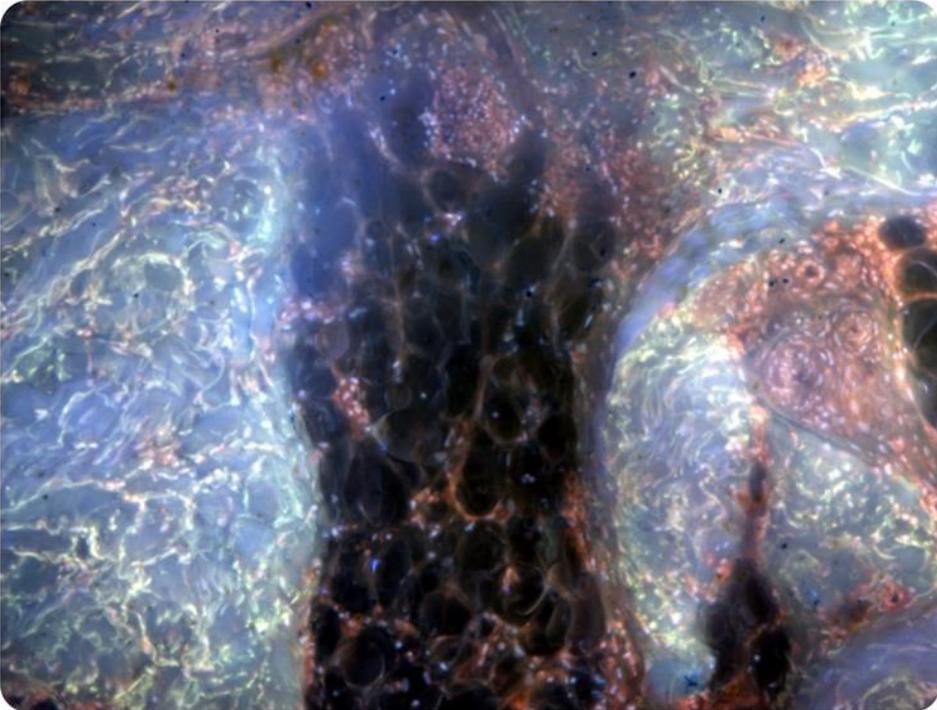
- ❑ Prepare flat tissue surface
- ❑ Staining (50 sec total)
 - ❖ Rhodamine B,
 - ❖ Hoechst 33342
 - ❖ Eosin
 - ❖ Propidium iodide
- ❑ Capture images





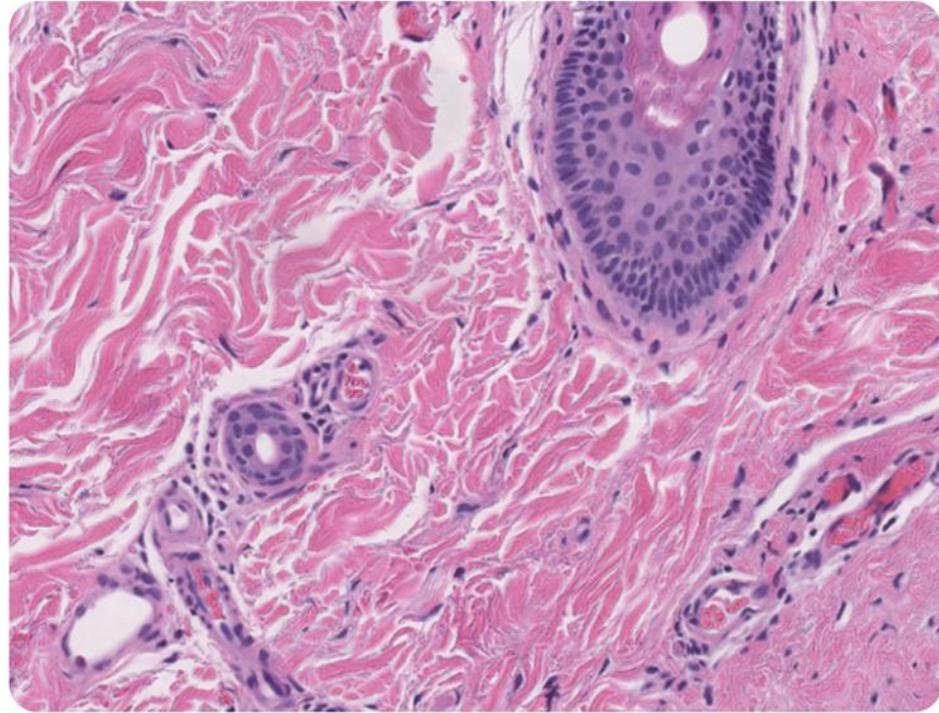
Normal Histology





Normal Histology

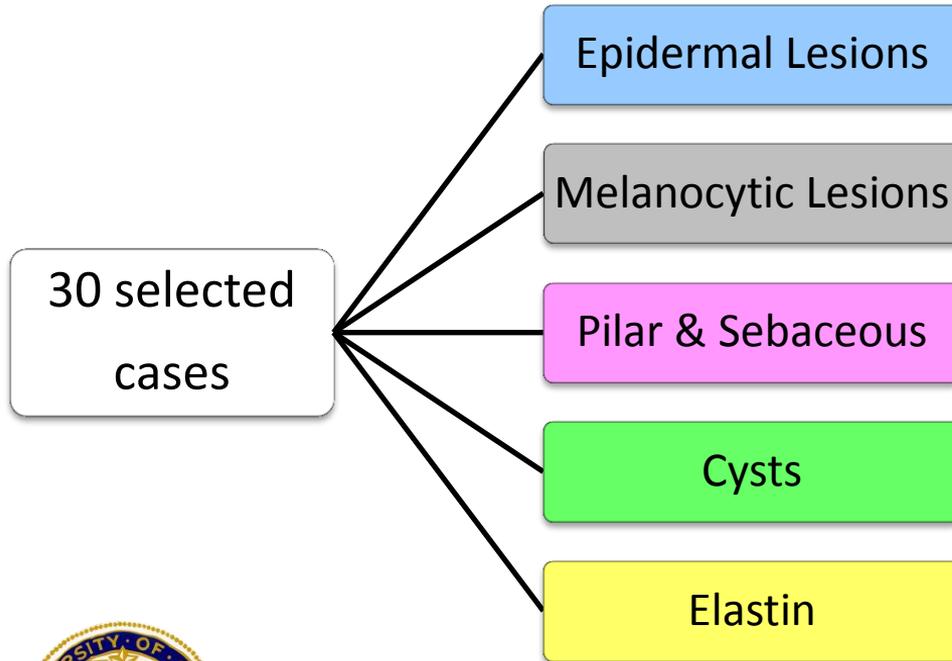




Normal Histology



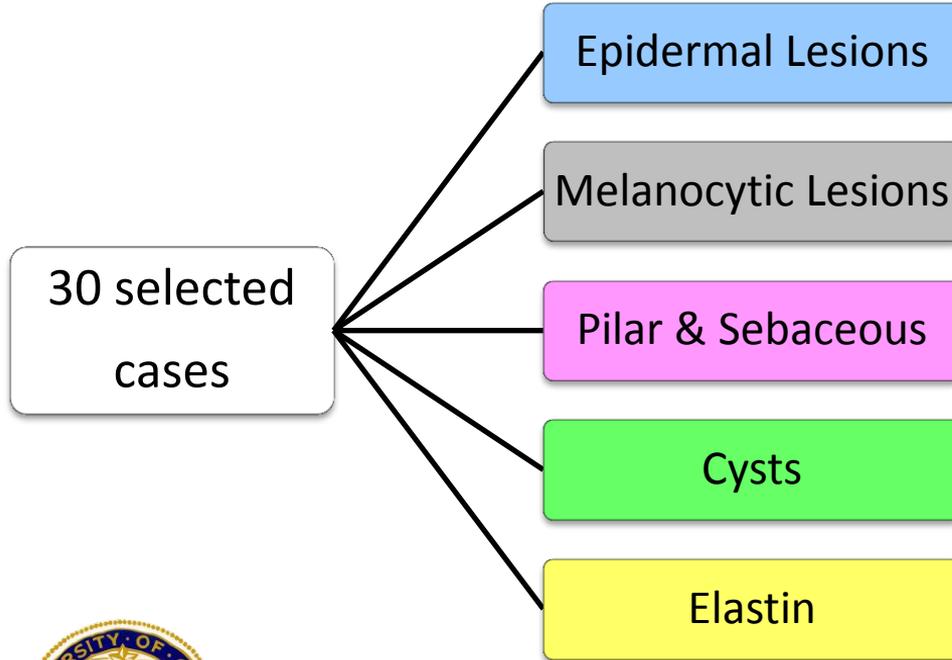
➤ MUSE: Diagnostic value



1	Verruca Vulgaris
2	AK, Acantholytic and hypertrophic
3	Bowen's
4	SCC KA type
5	SCC in dermis
6	BCC superficial
7	BCC nodular
8	Pig nodular BCC
9	BCC infiltrative
10	Pig Seborrheic keratosis



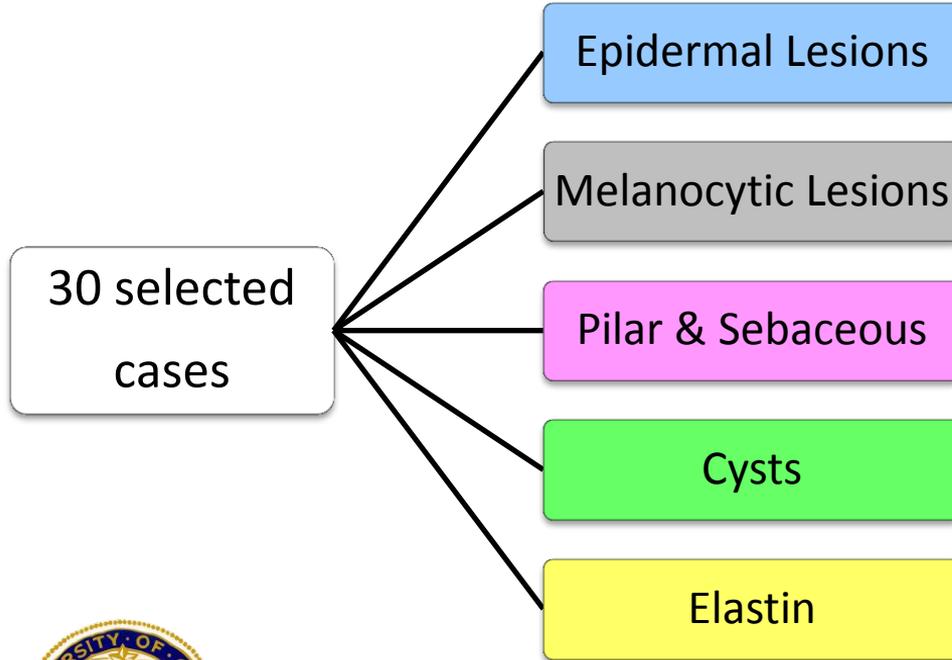
➤ MUSE: Diagnostic value



11	IDN
12	Compound Nevus
13	Lentiginous Nevus
14	Blue Nevus
15	Spitz Nevus
16	MIS
17	MM



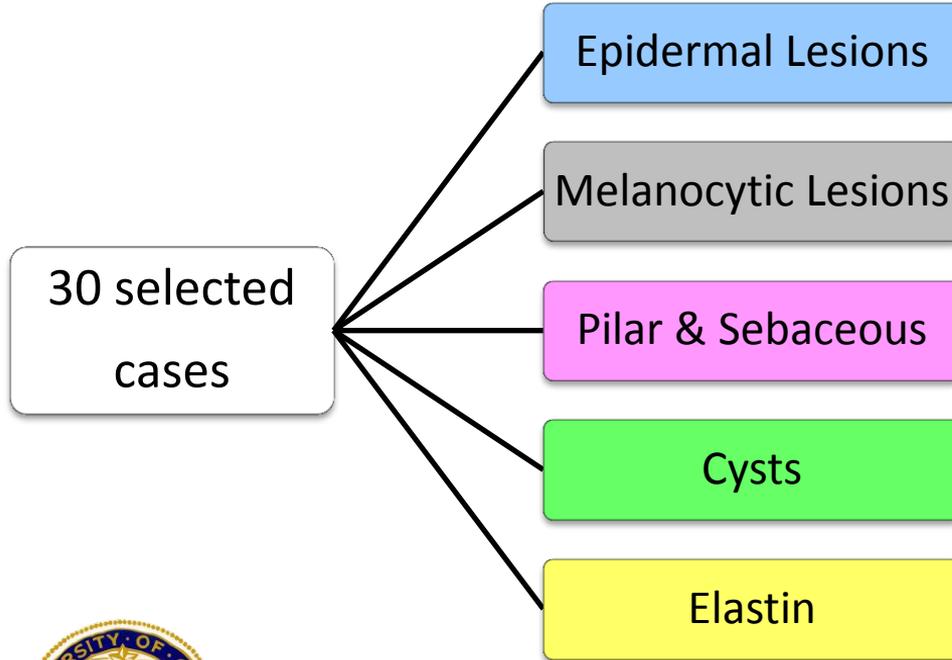
➤ MUSE: Diagnostic value



18	Sebaceous hyperplasia
19	Nevus Sebaceous
20	Pilomatricoma
21	Cylindroma
22	Poroma
23	Mixed tumor
24	Syringoma



➤ MUSE: Diagnostic value



25	Hidrocystoma
26	Steatocystoma
27	Pilar Cyst
28	EIC

29	PXE
30	Solar elastosis



➤ MUSE: Scoring

❑ Diagnostic score:

- ❖ Percentage of correct diagnosis of each MUSE image

❑ Comparison score:

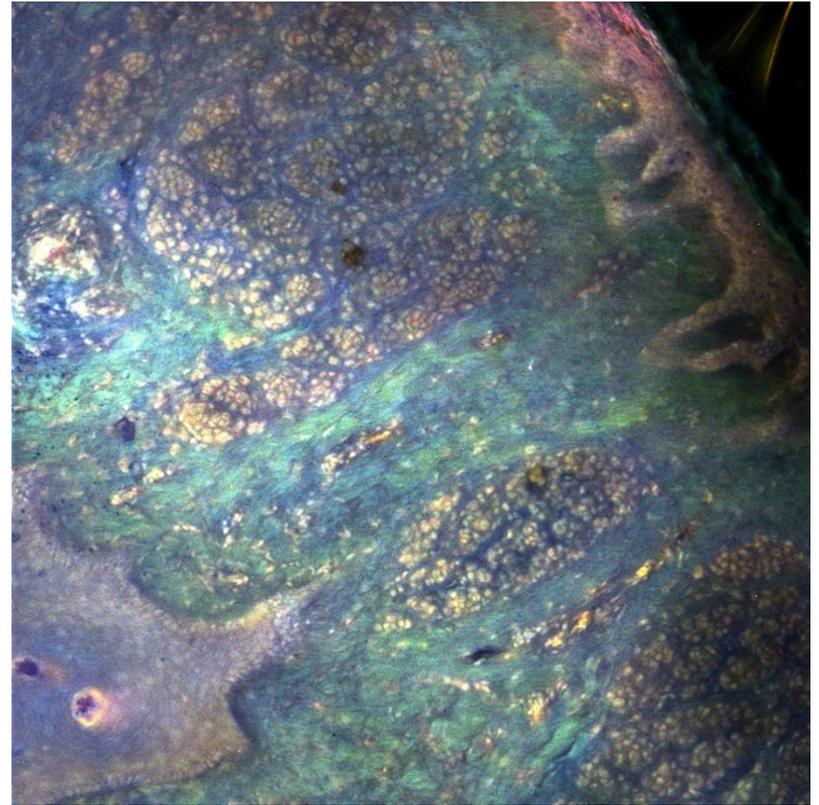
- ❖ Assessed by the concordance between MUSE images and correlated H&E images generated by whole slide scanner



➤ MUSE: Diagnostic score

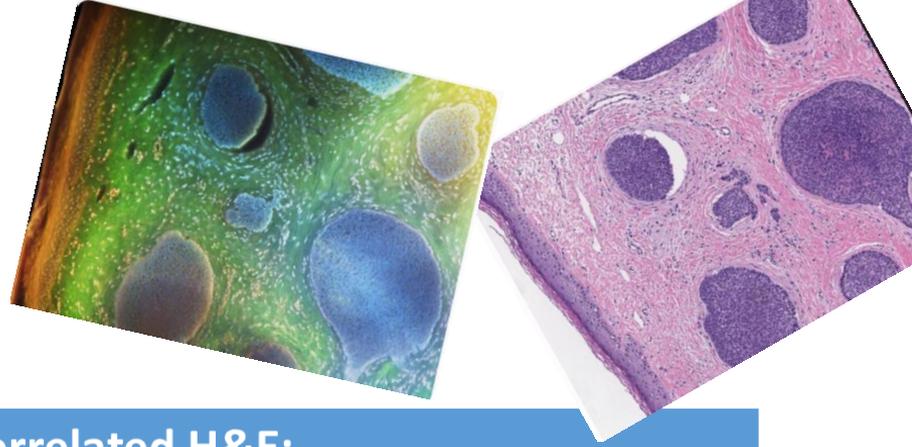
- ❑ What is this?

- ❑ Total Dx score: 70.83%
 - ❖ Cystic lesions: 88%
 - ❖ Epidermal lesions: 80%
 - ❖ Adnexal lesions: 79%
 - ❖ Melanocytic: 46%
 - ❖ Elastin lesions: 62%



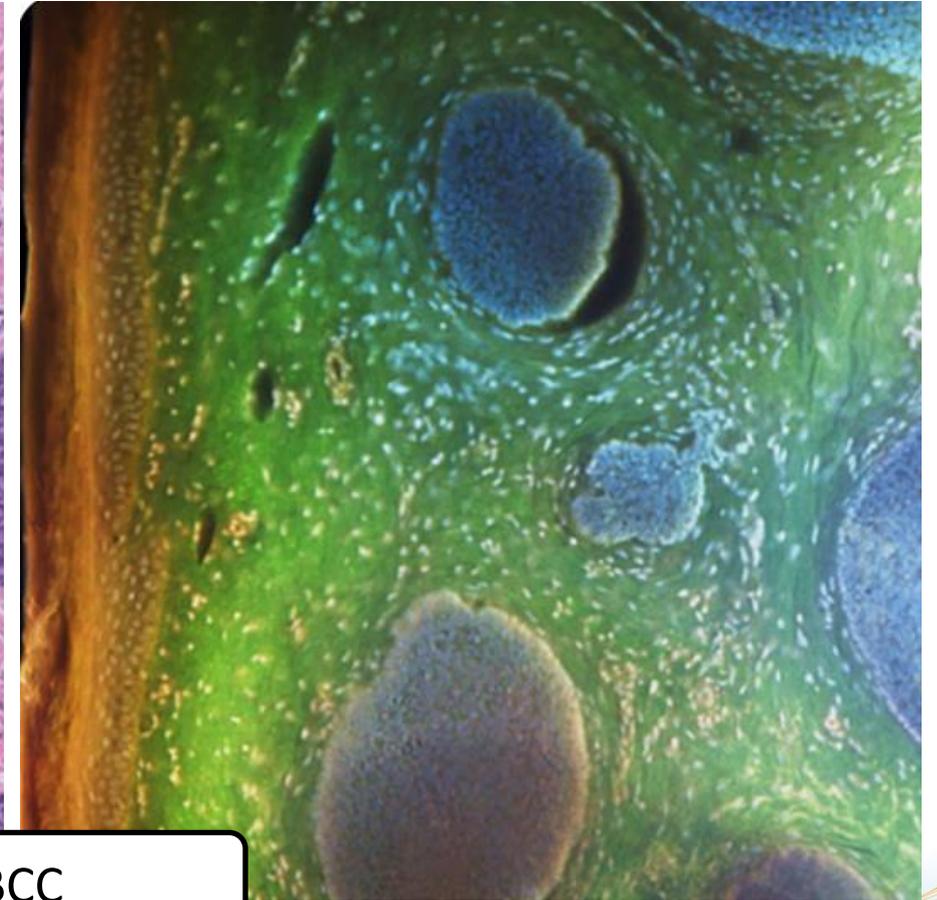
➤ MUSE: Comparison score

❑ Is it better than H&E?



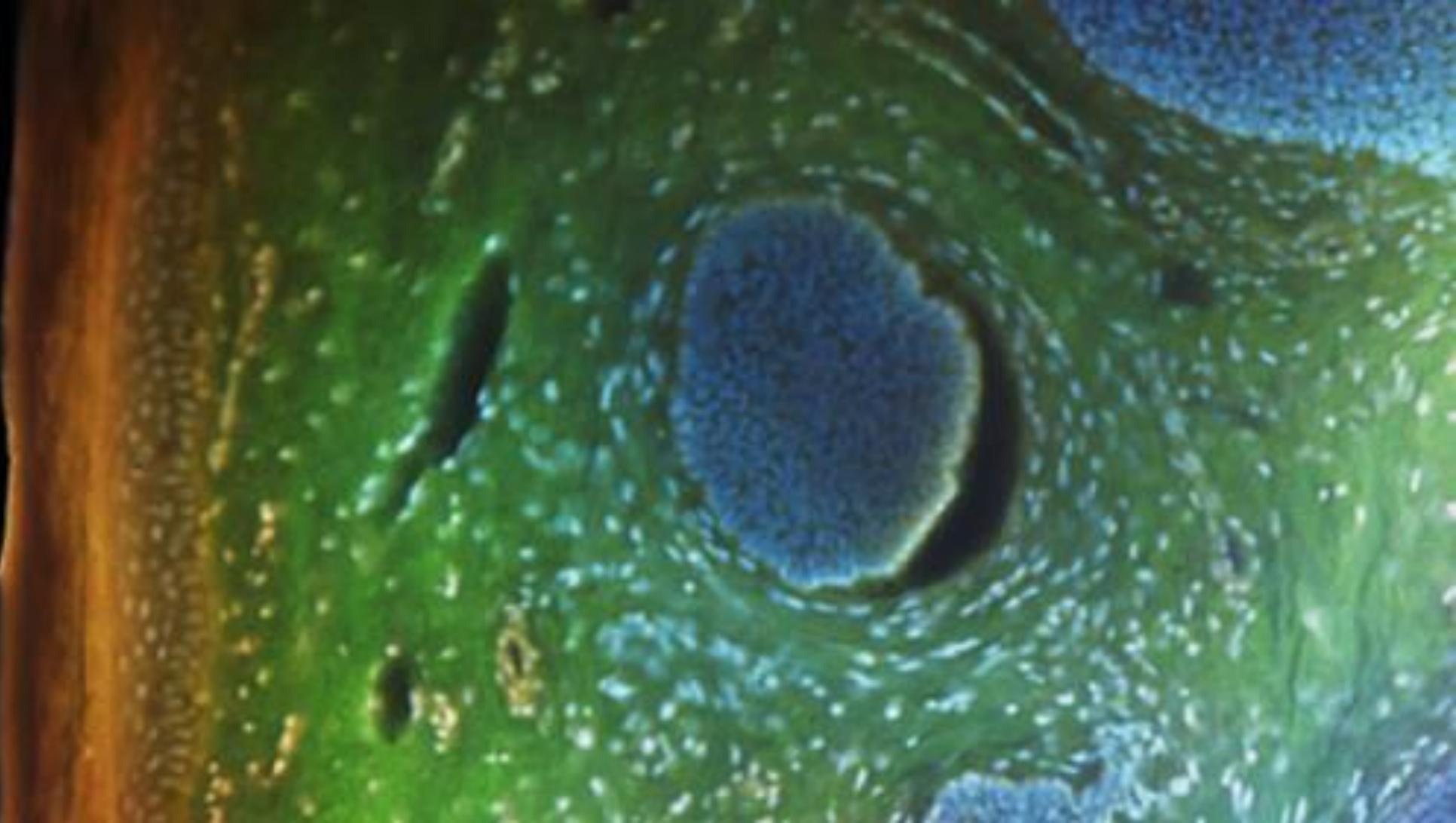
Score	By comparing the MUSE with correlated H&E:
0	MUSE works poorly compare to the H&E/ Diagnosis cannot be made just by MUSE / MUSE failed to show the required diagnostic features
1	MUSE can diagnosis without the need of H&E (can show the diagnostic details)
2	MUSE is better than H&E in diagnosis or showing the details (More details/ less artifact/...)

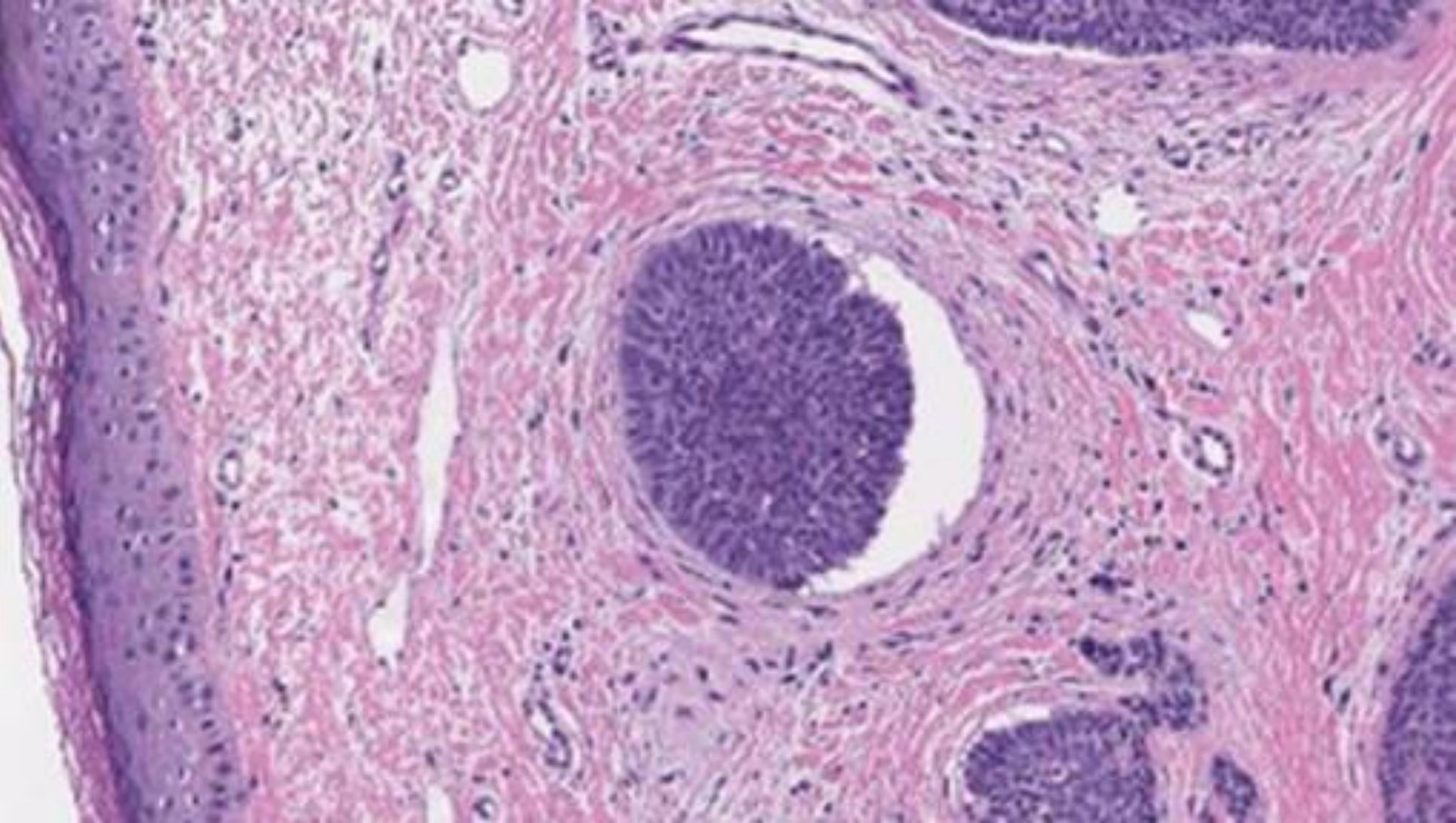


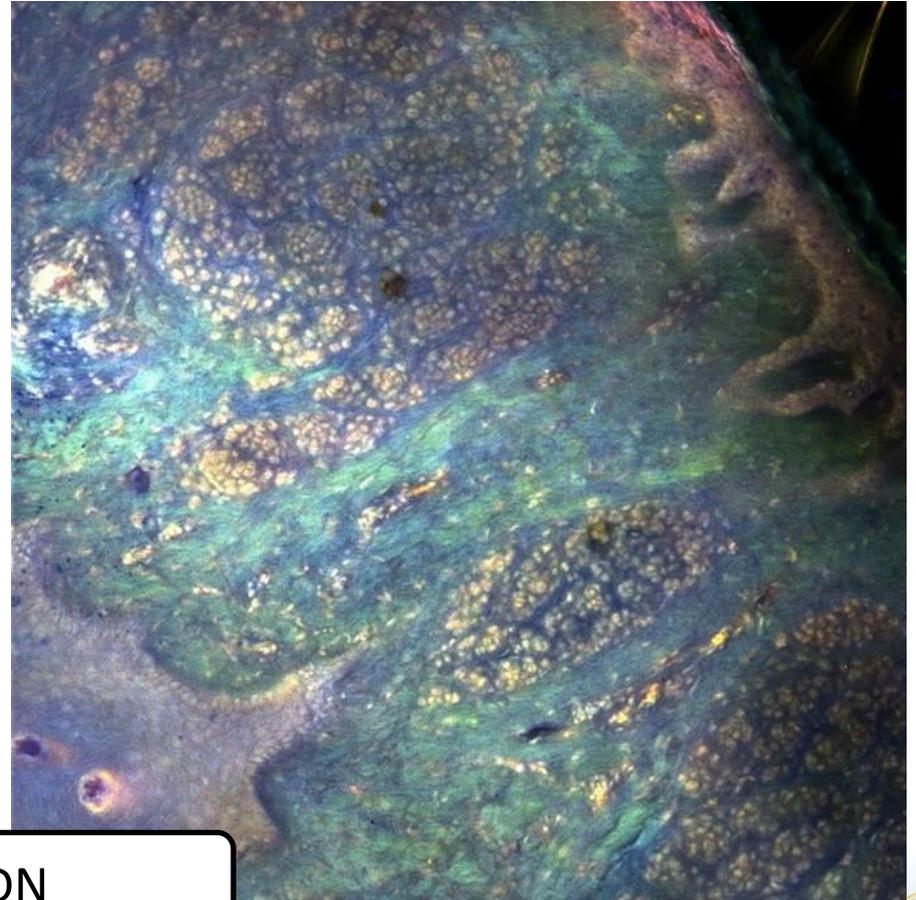
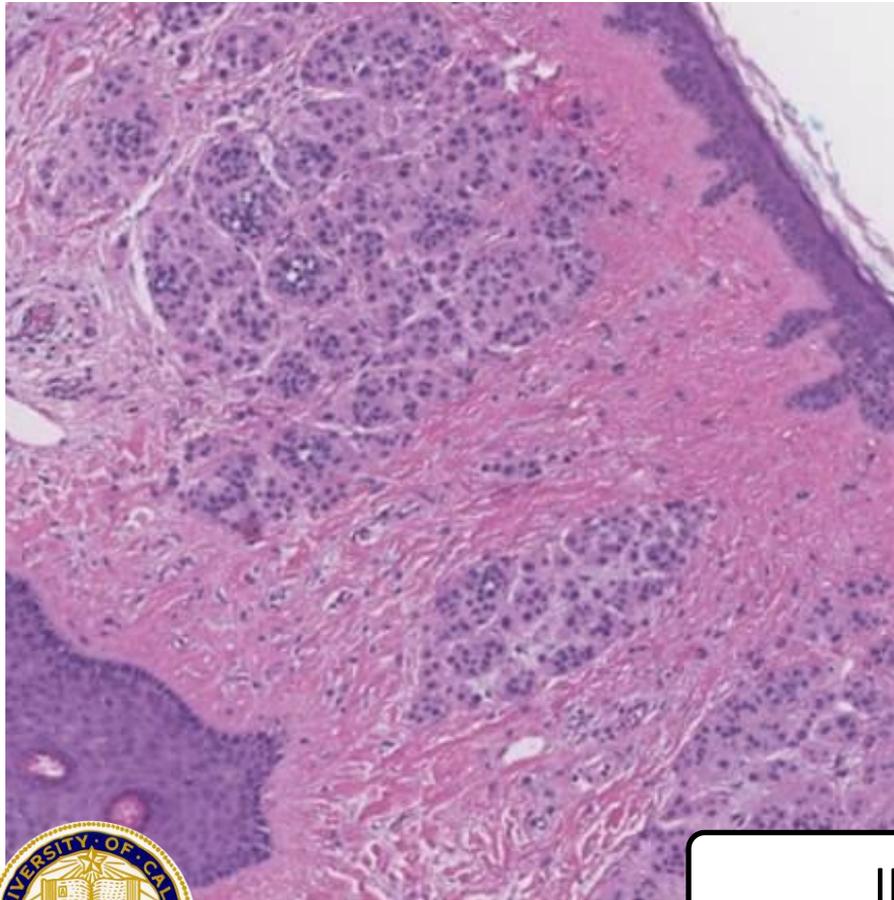


BCC



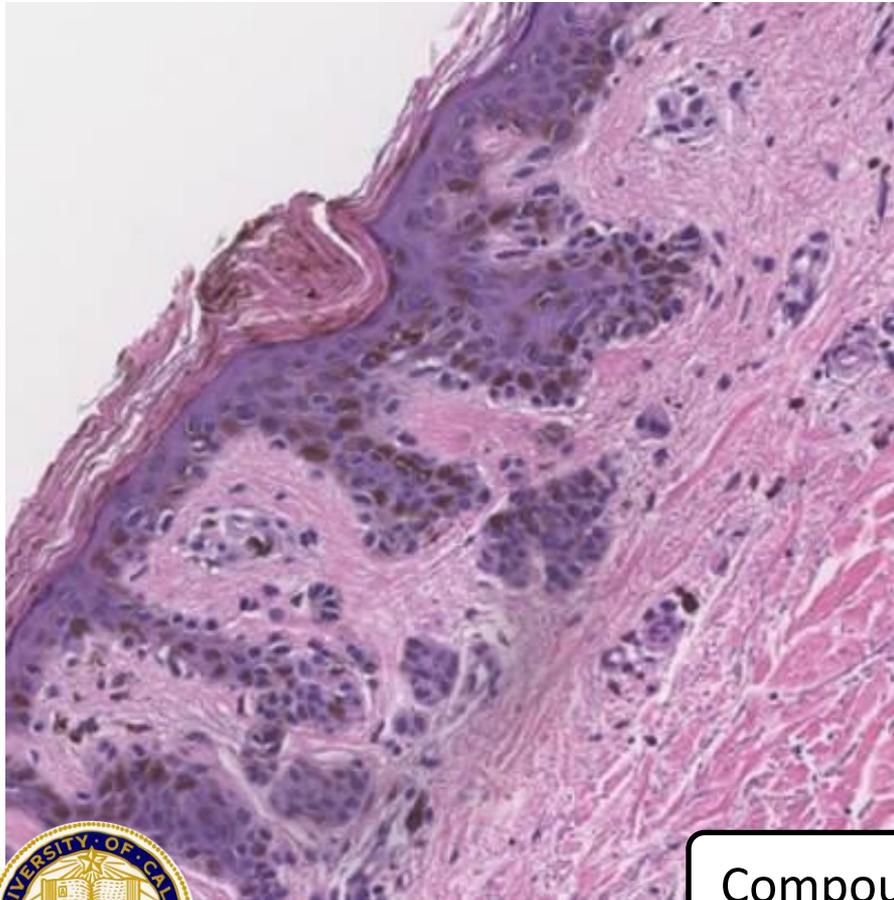






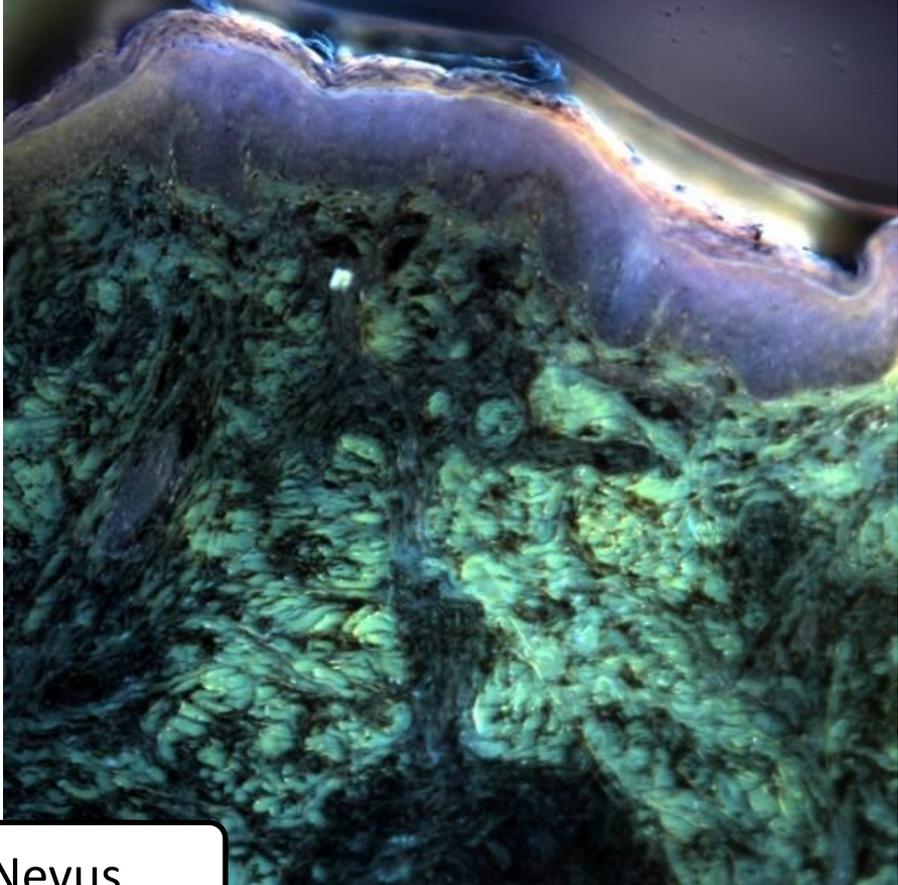
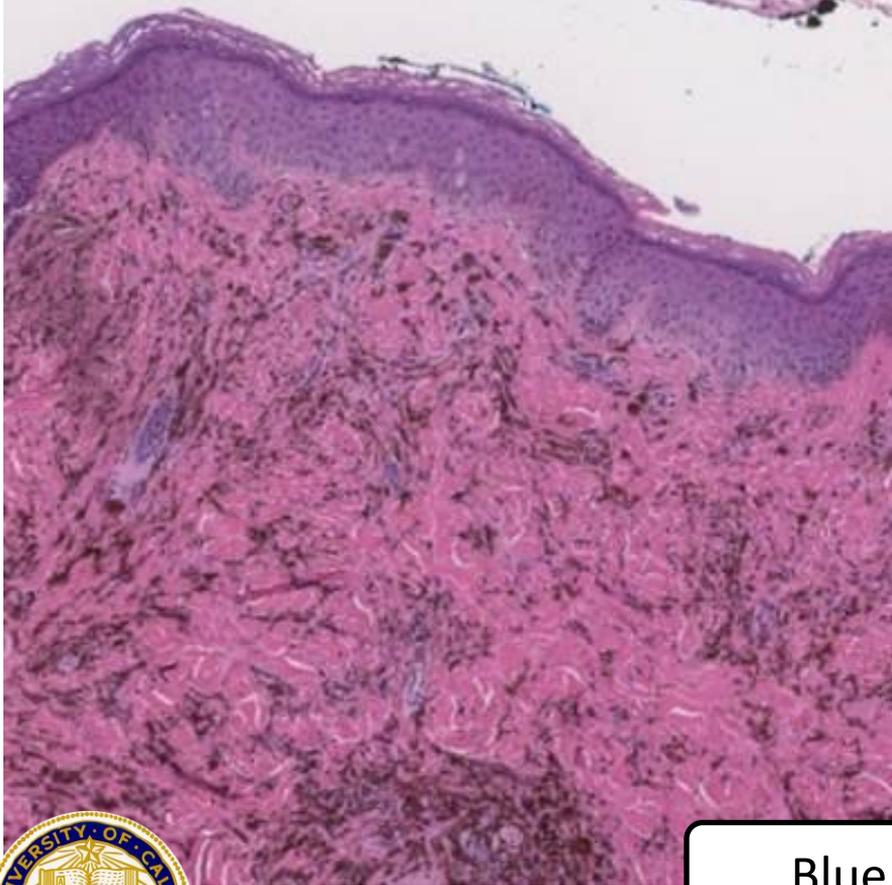
IDN





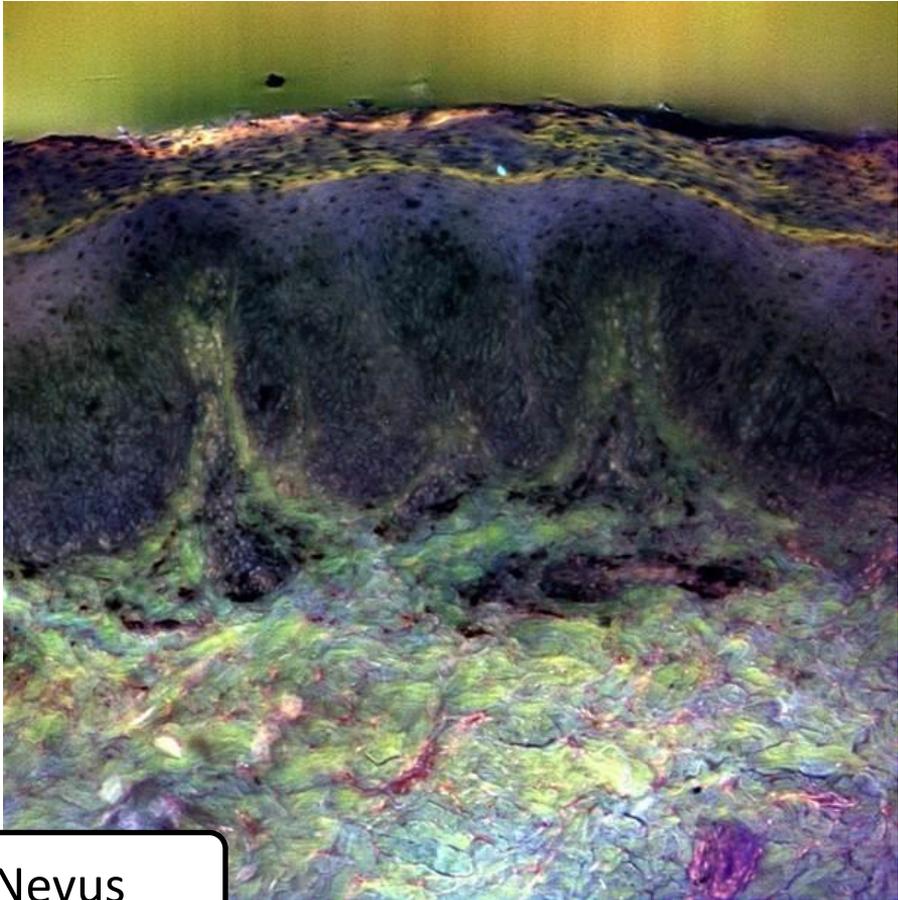
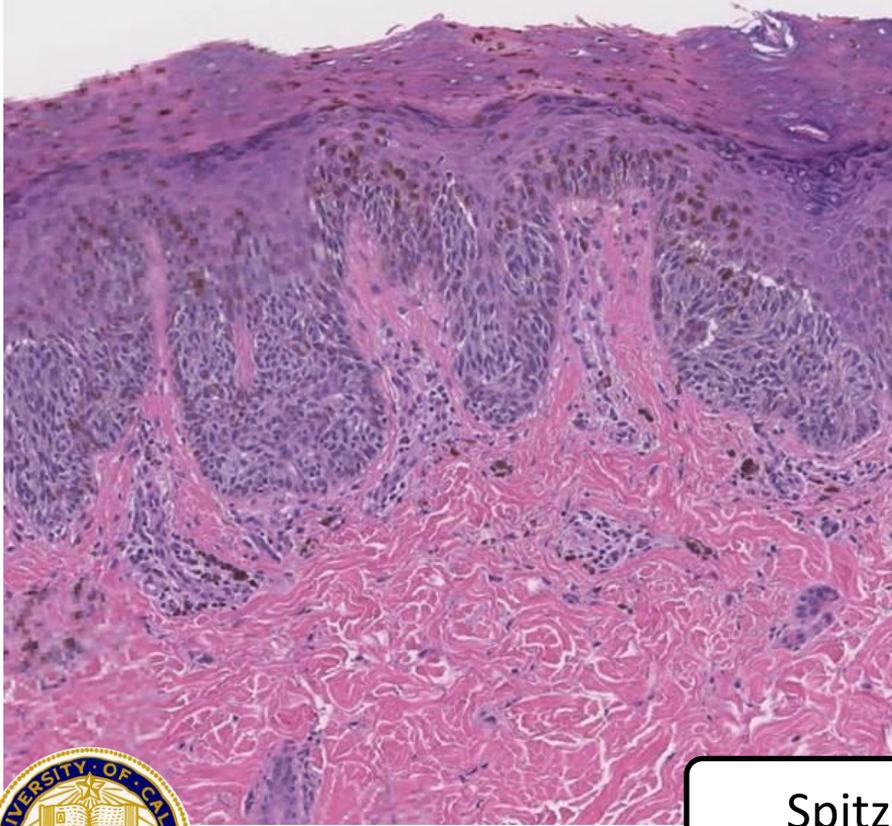
Compound Nevus





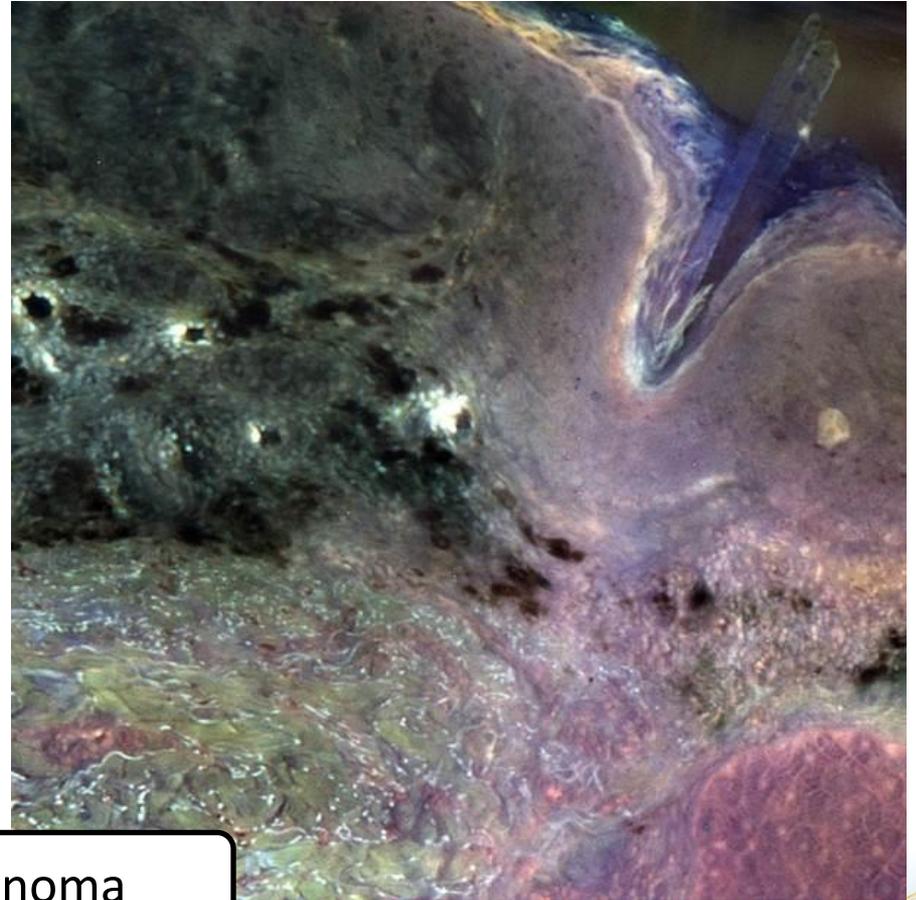
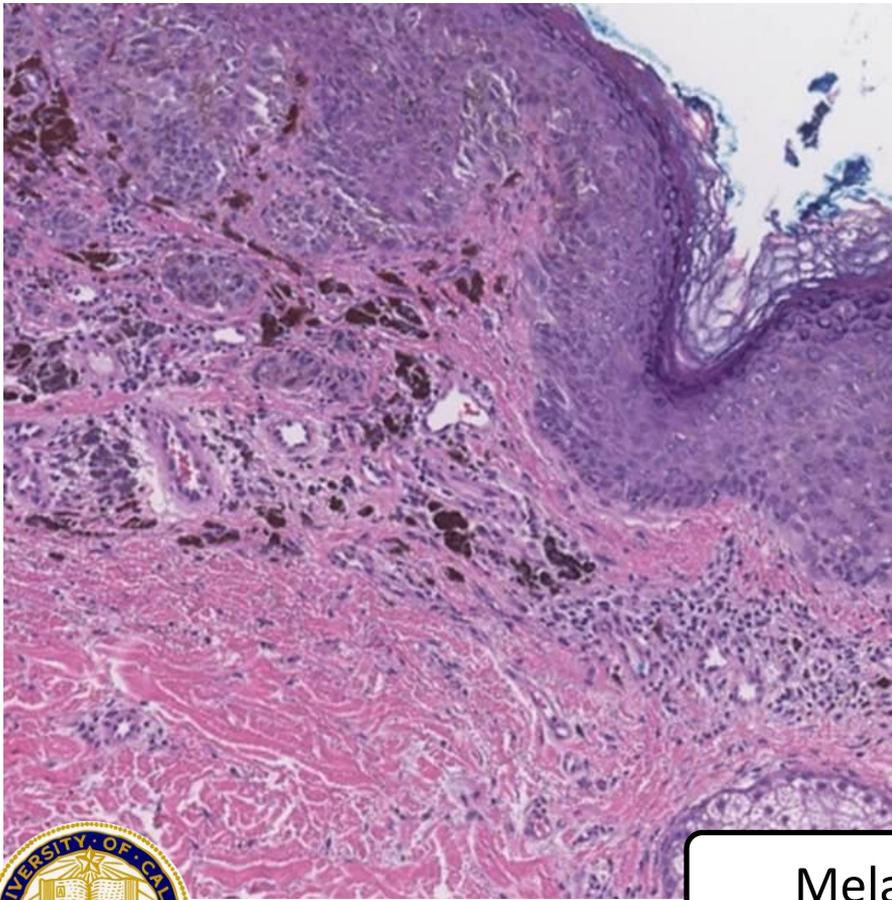
Blue Nevus





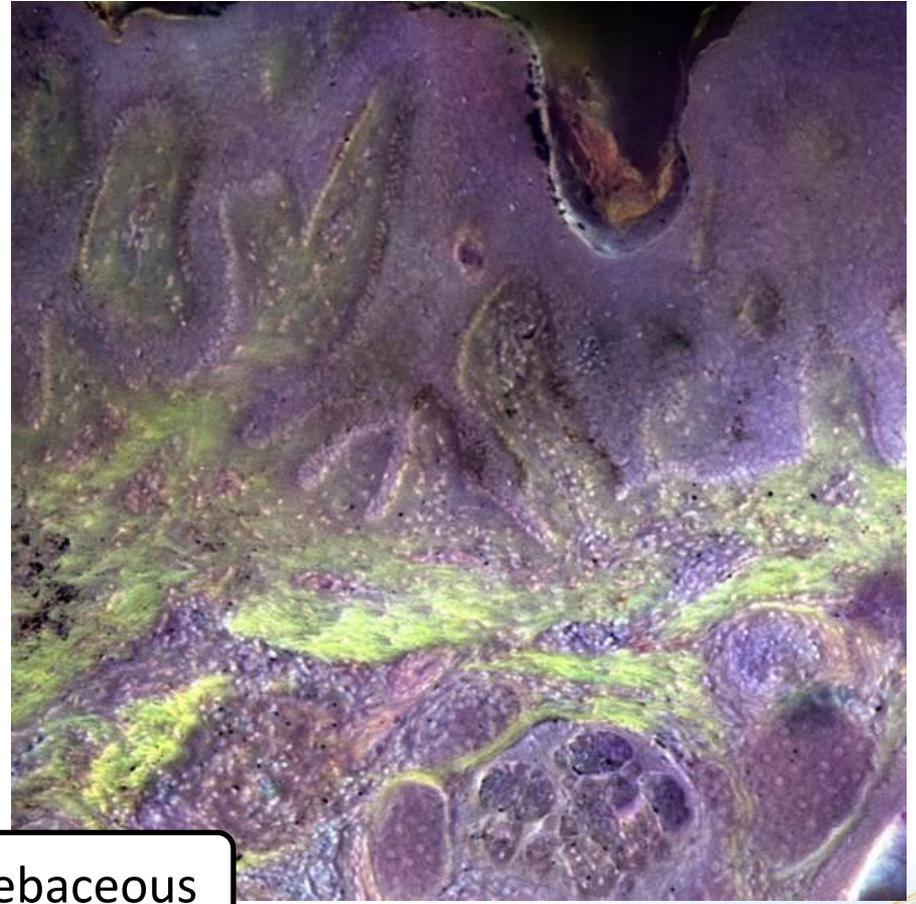
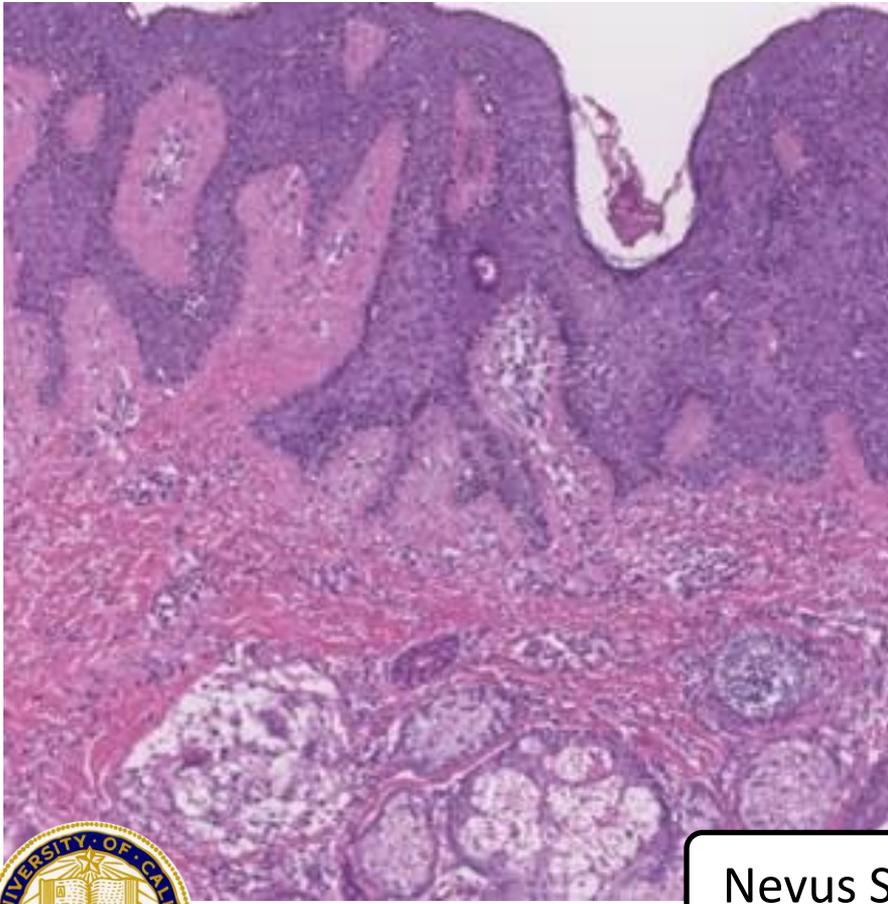
Spitz Nevus





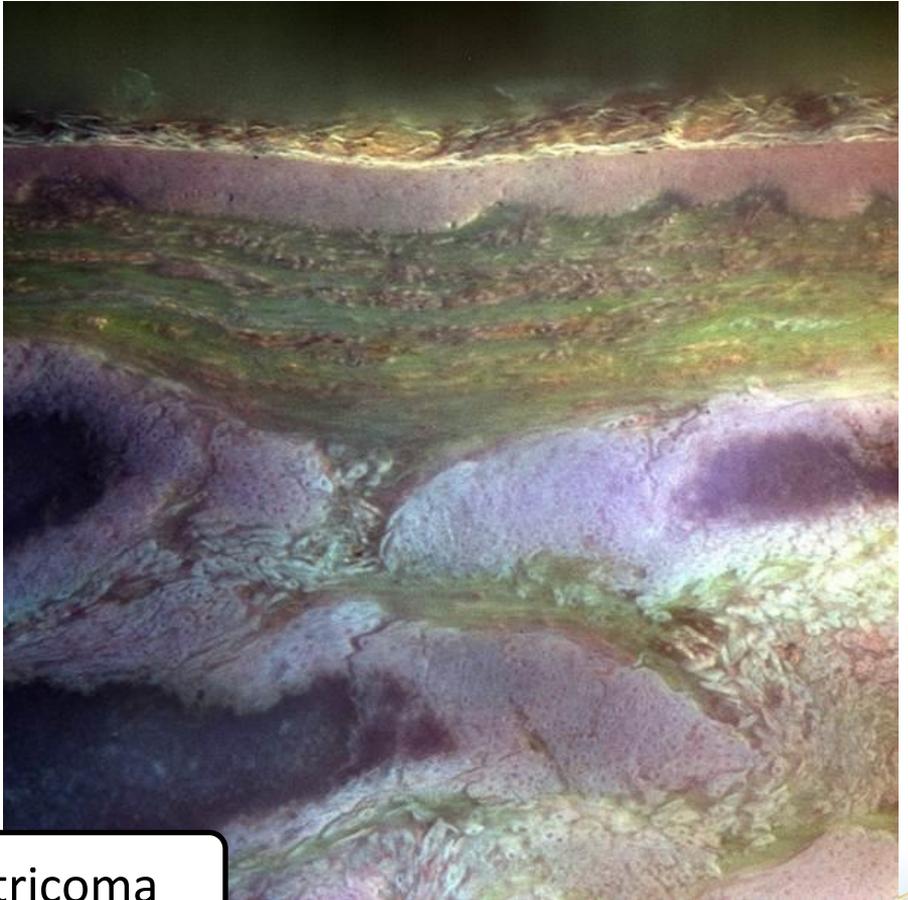
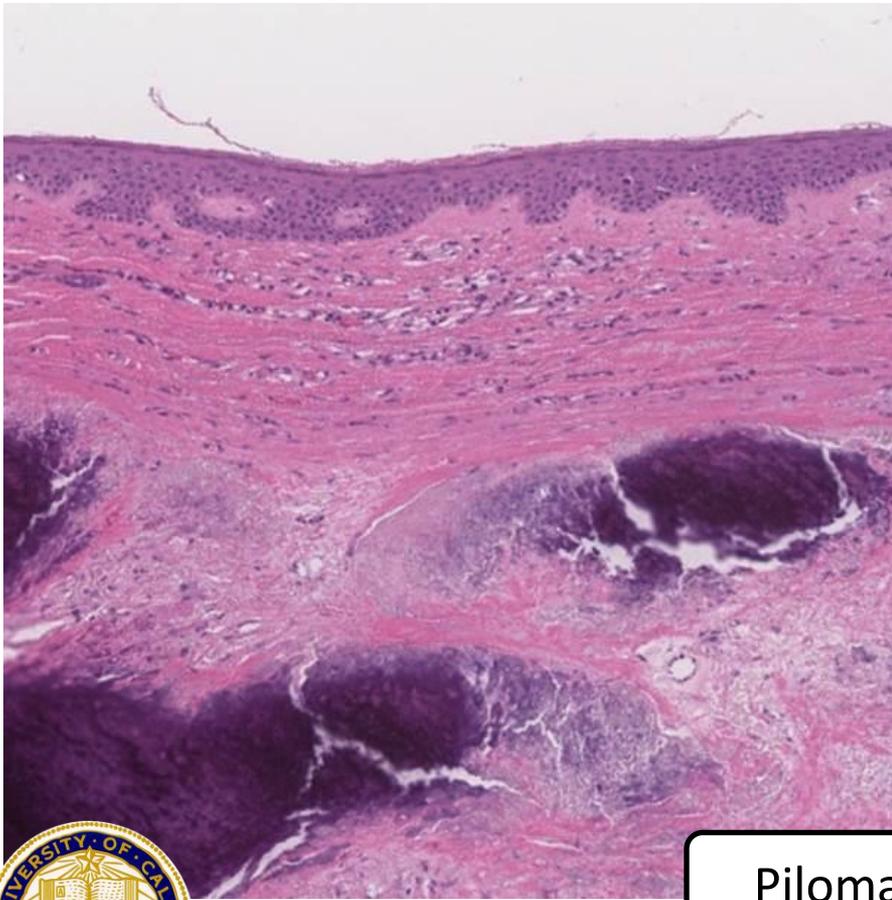
Melanoma





Nevus Sebaceous

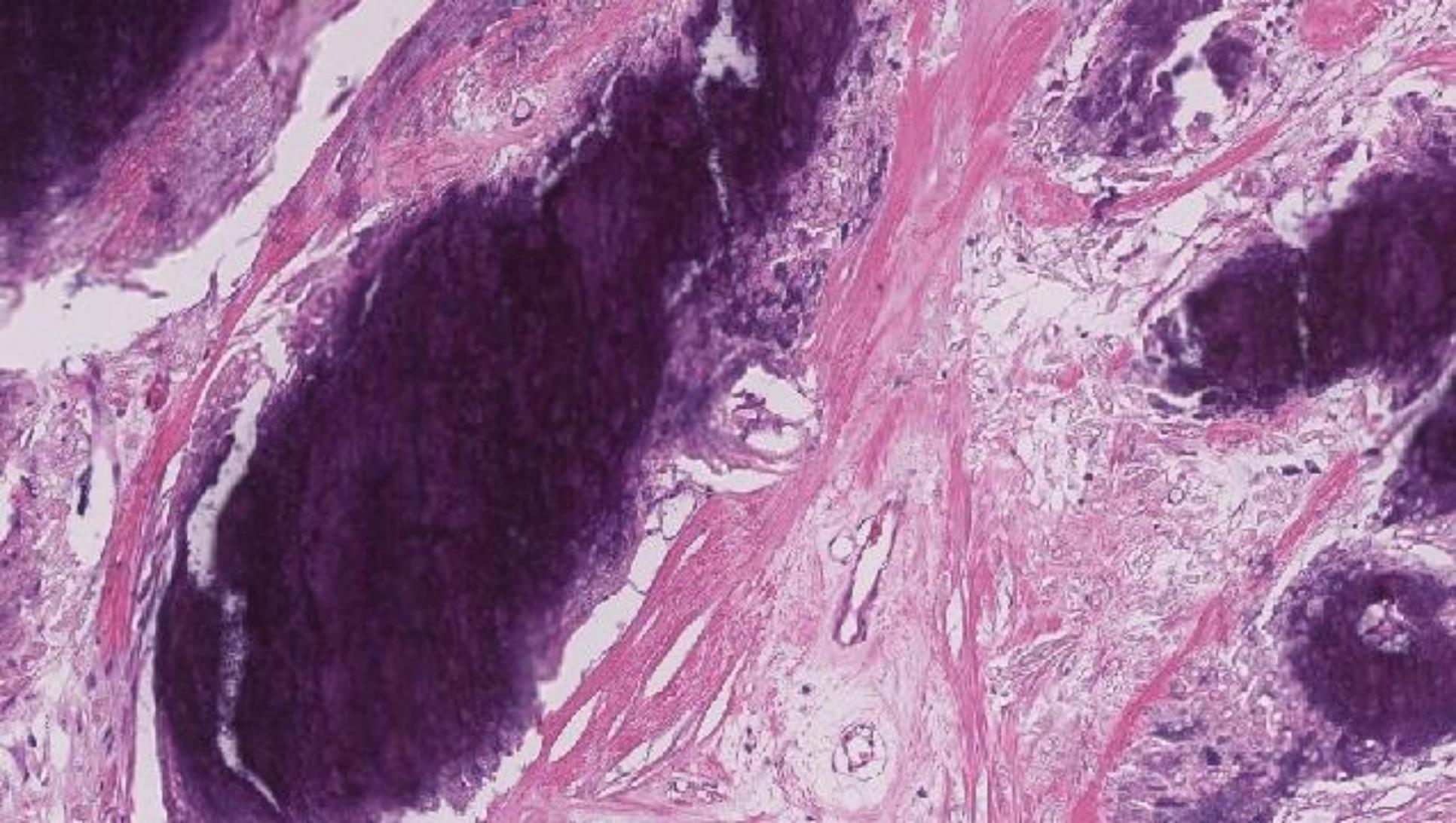


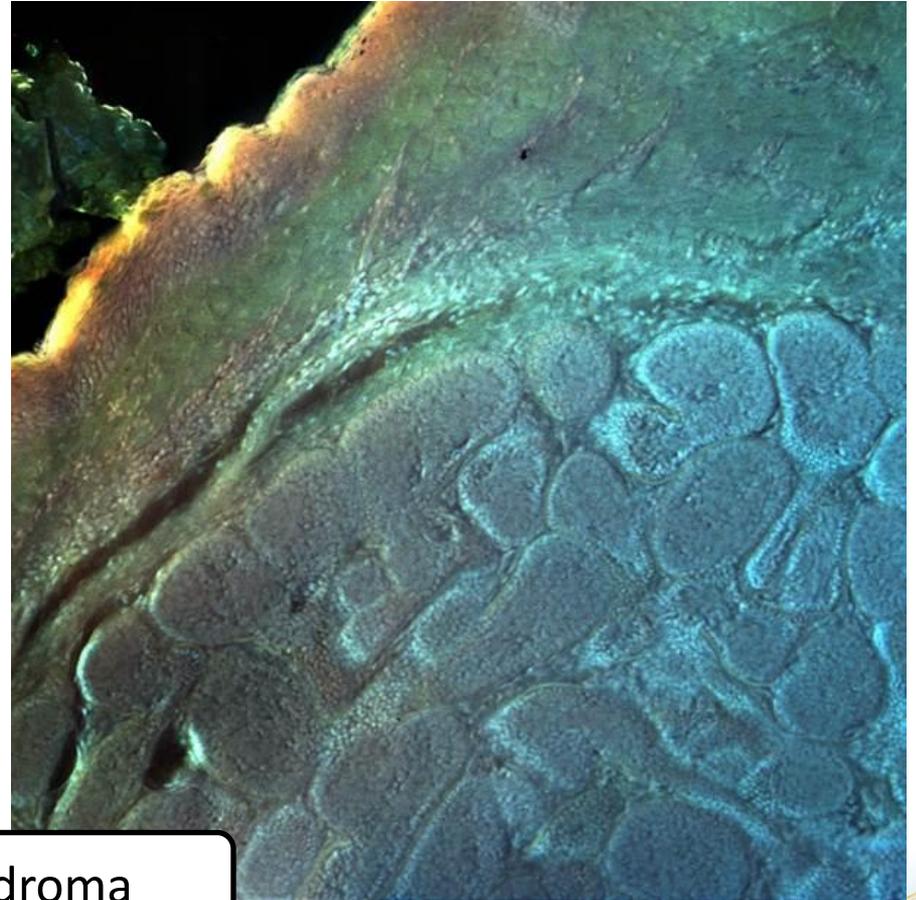
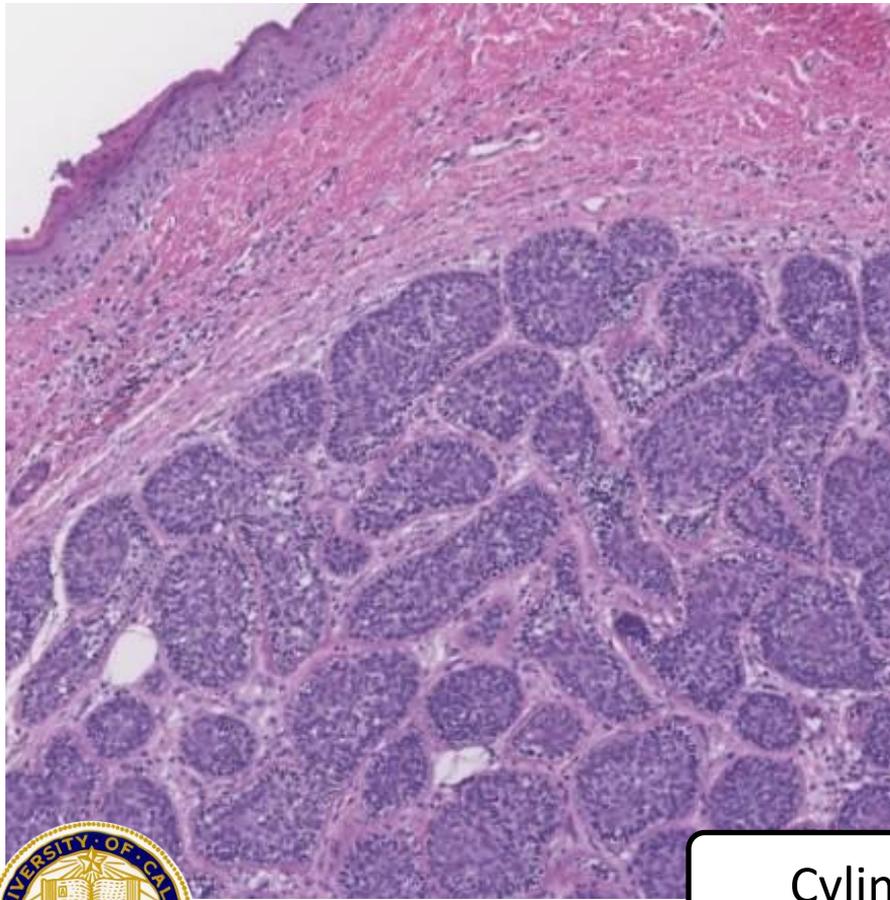


Pilomatricoma



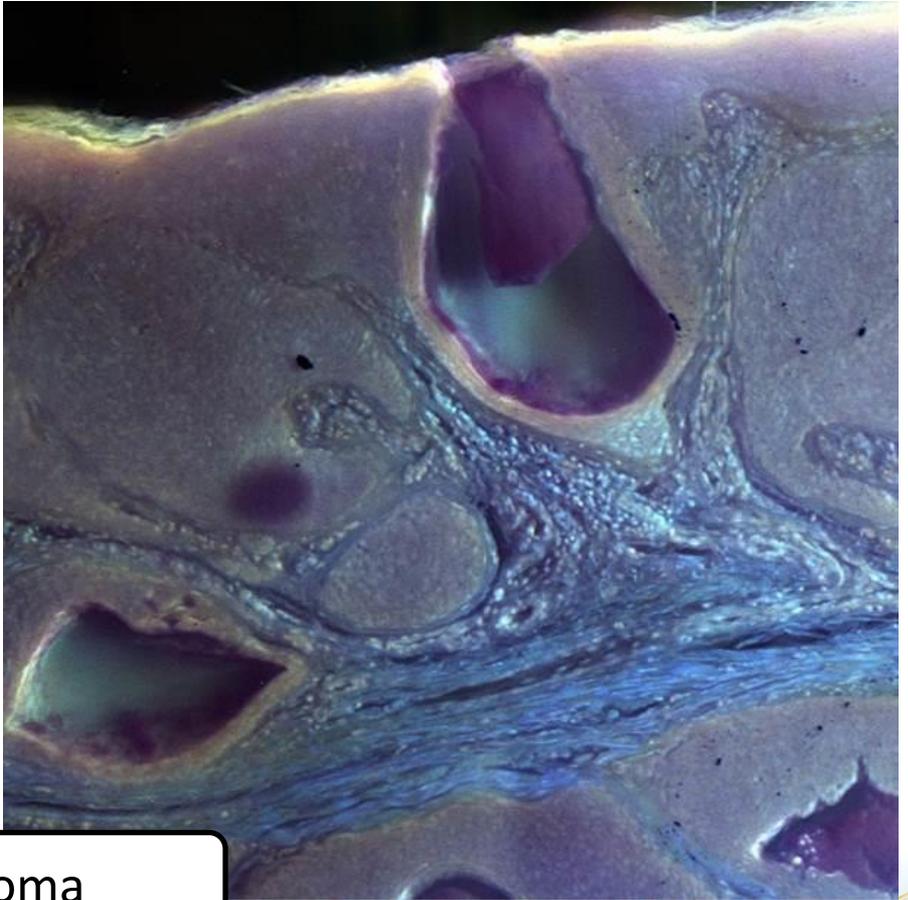
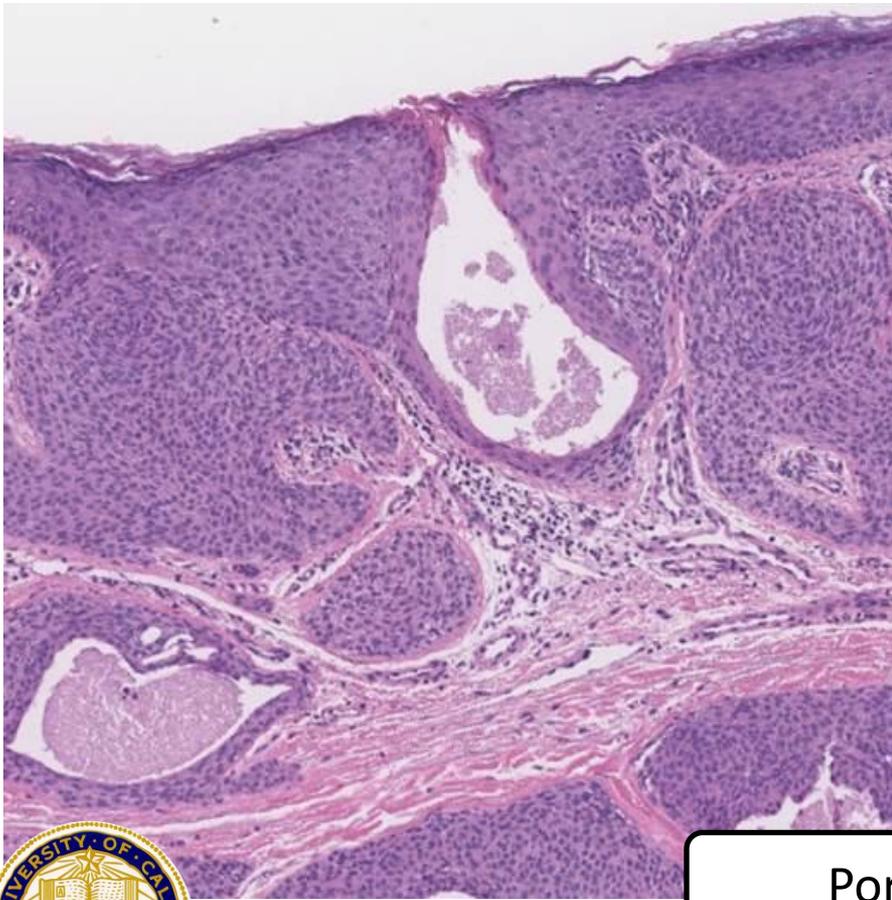






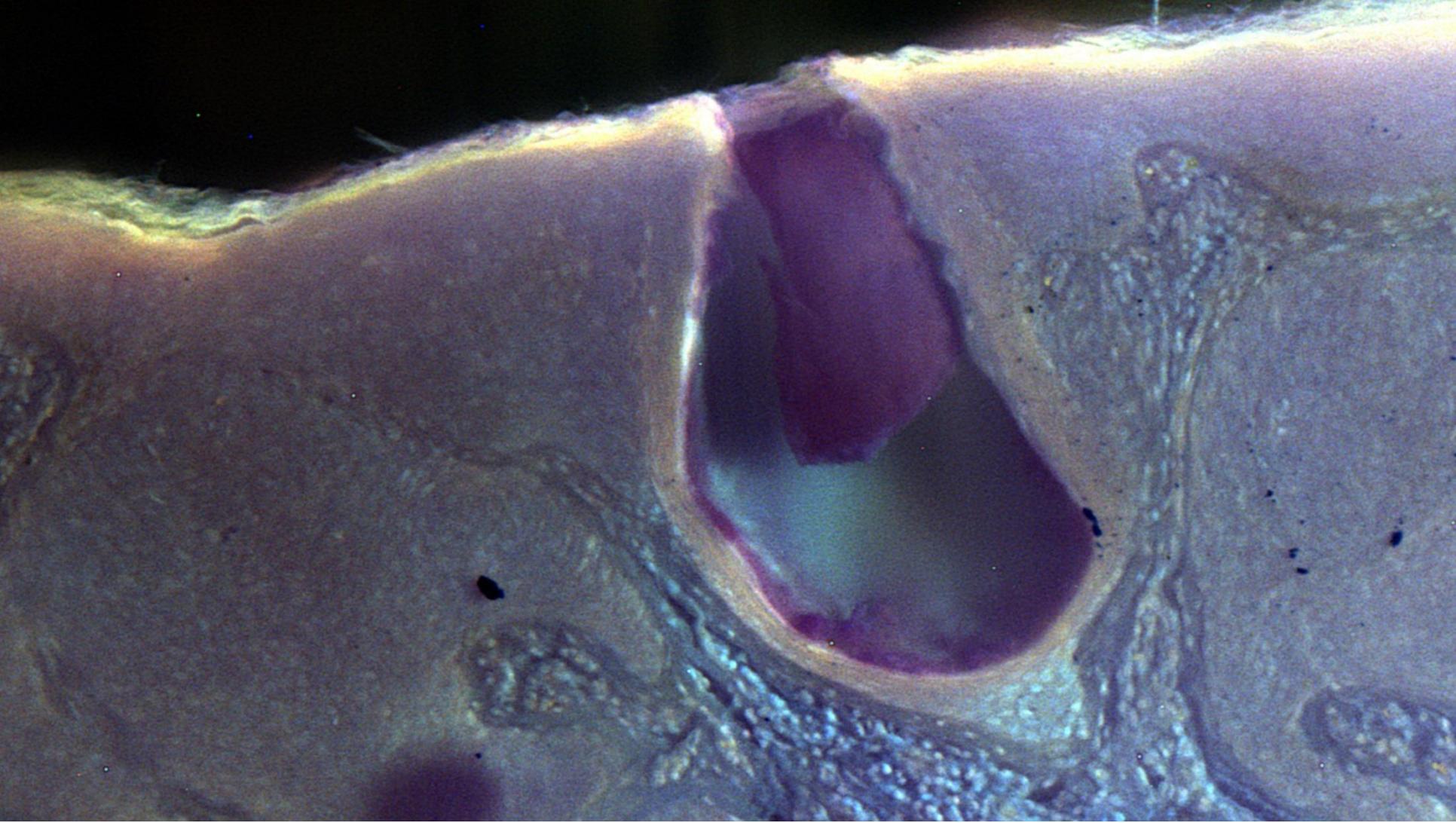
Cylindroma

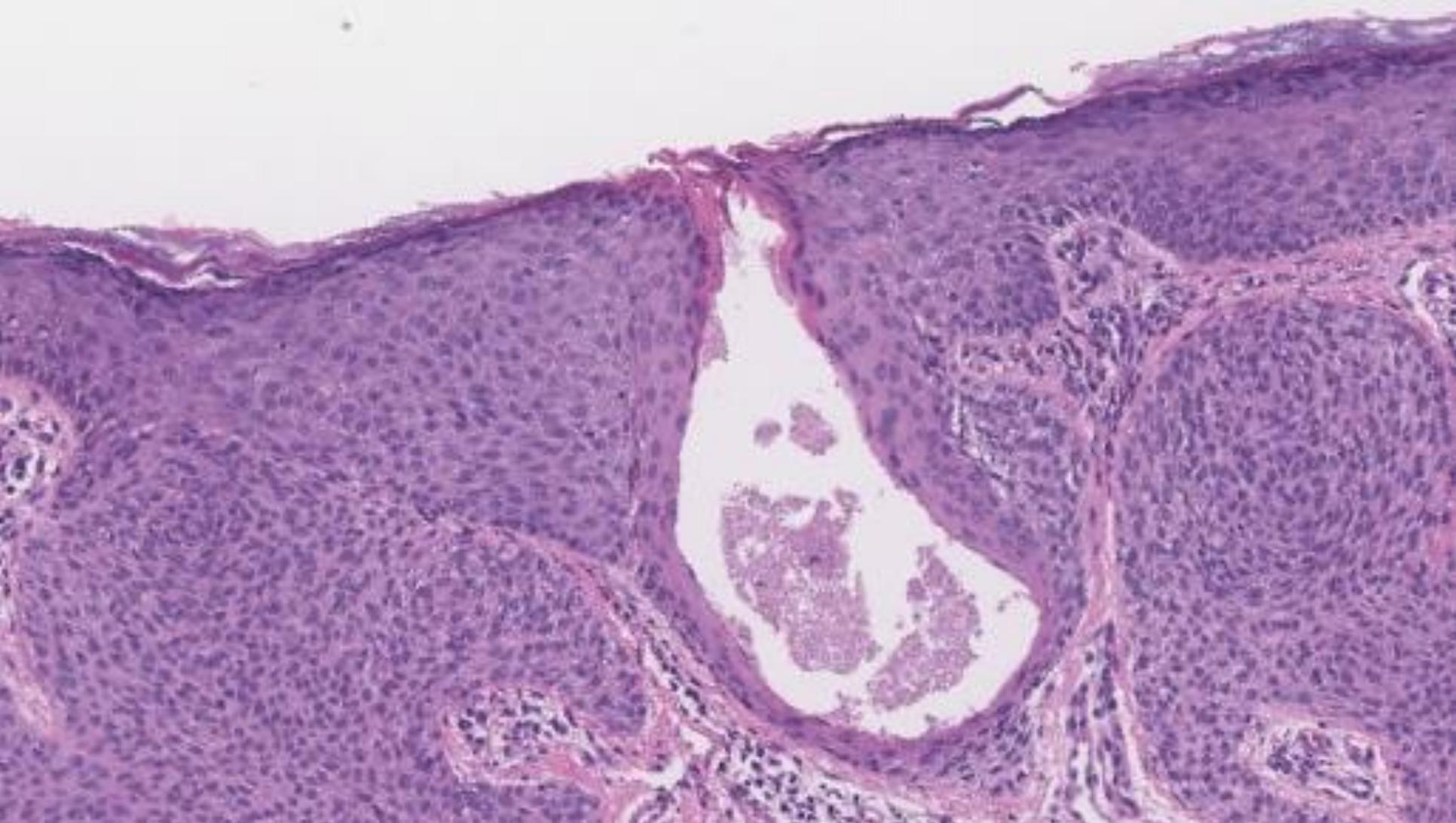


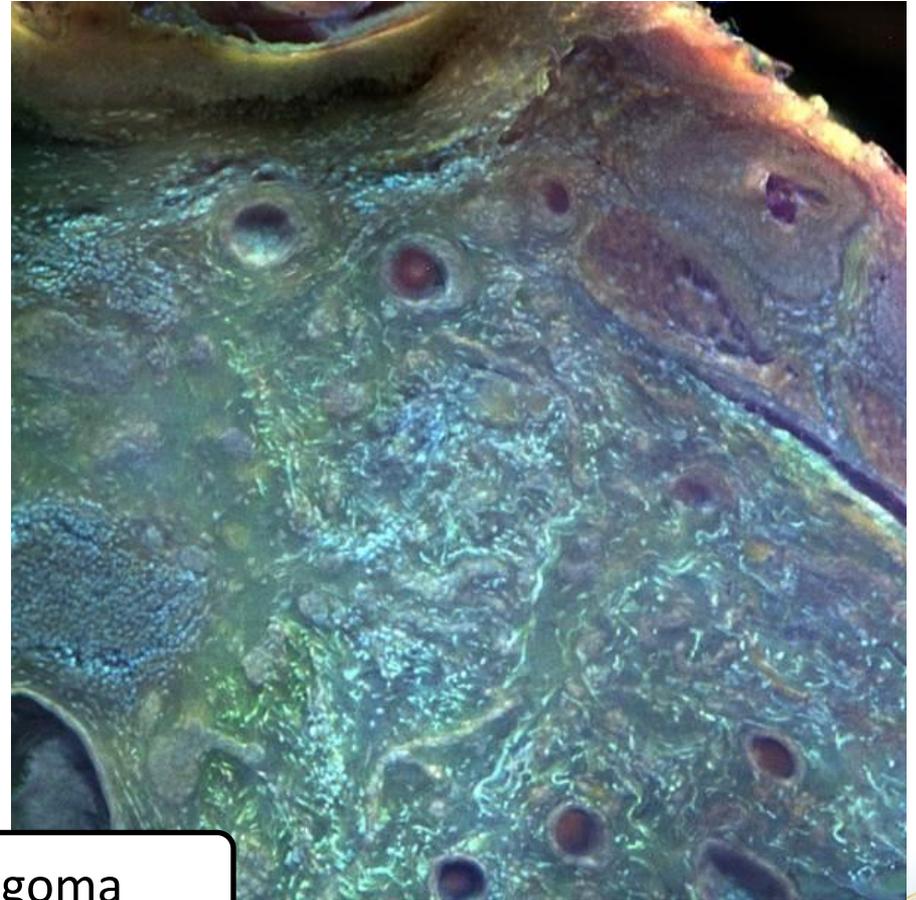
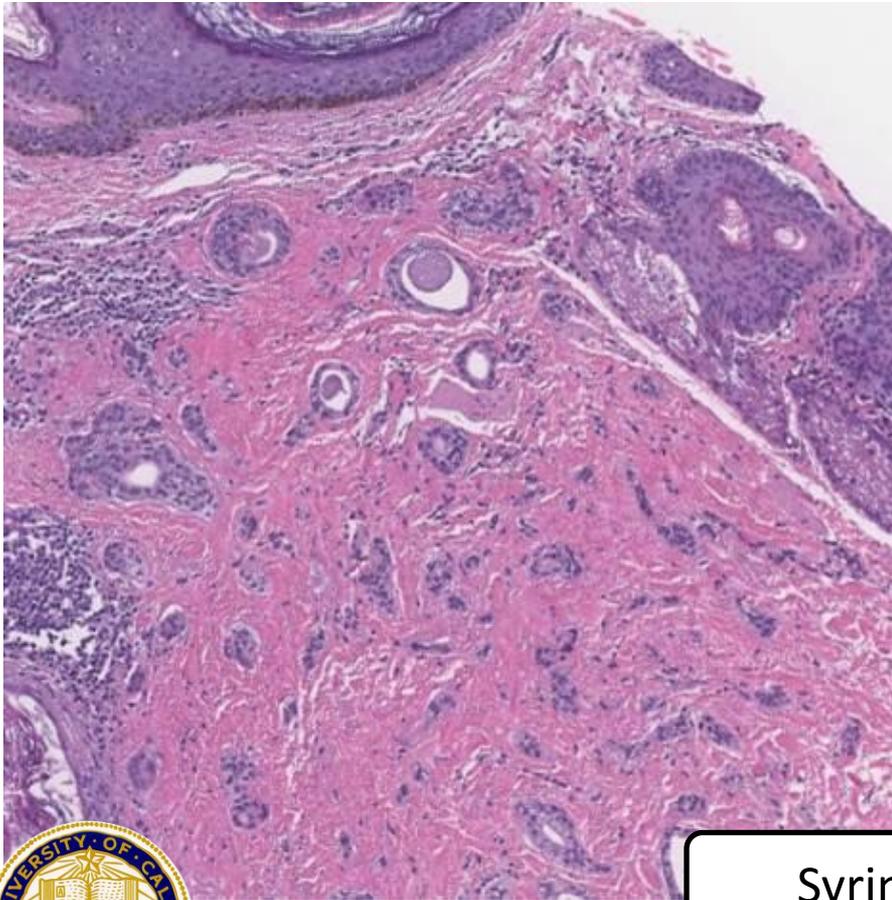


Poroma



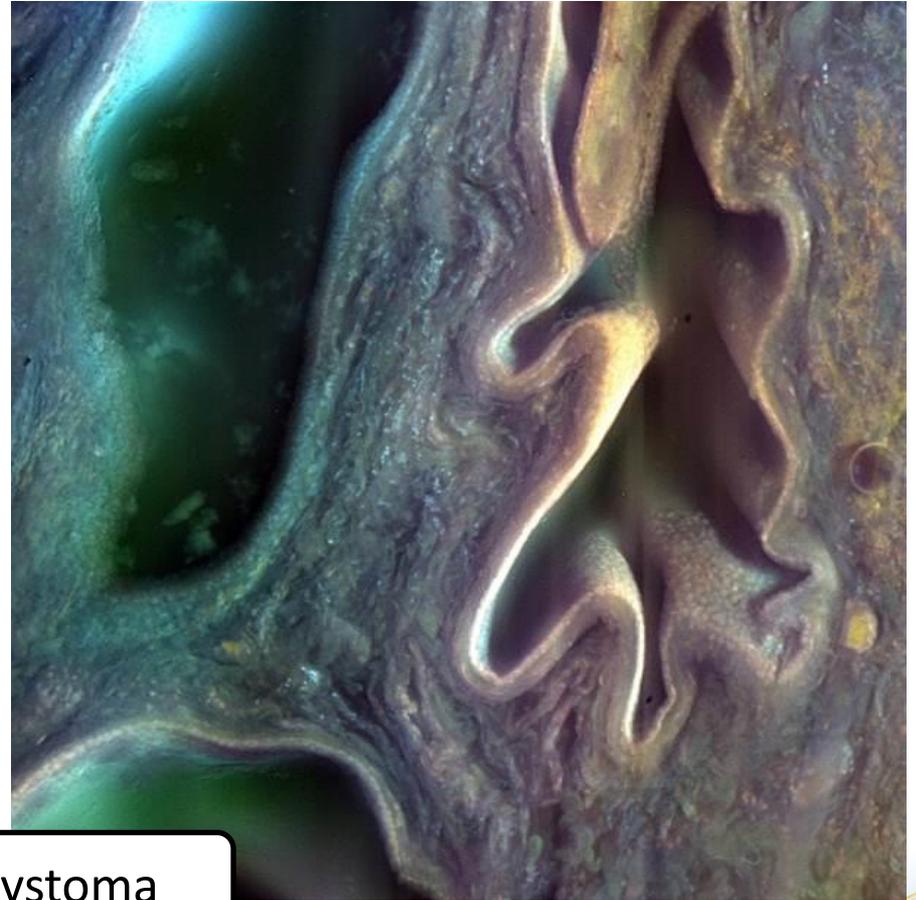
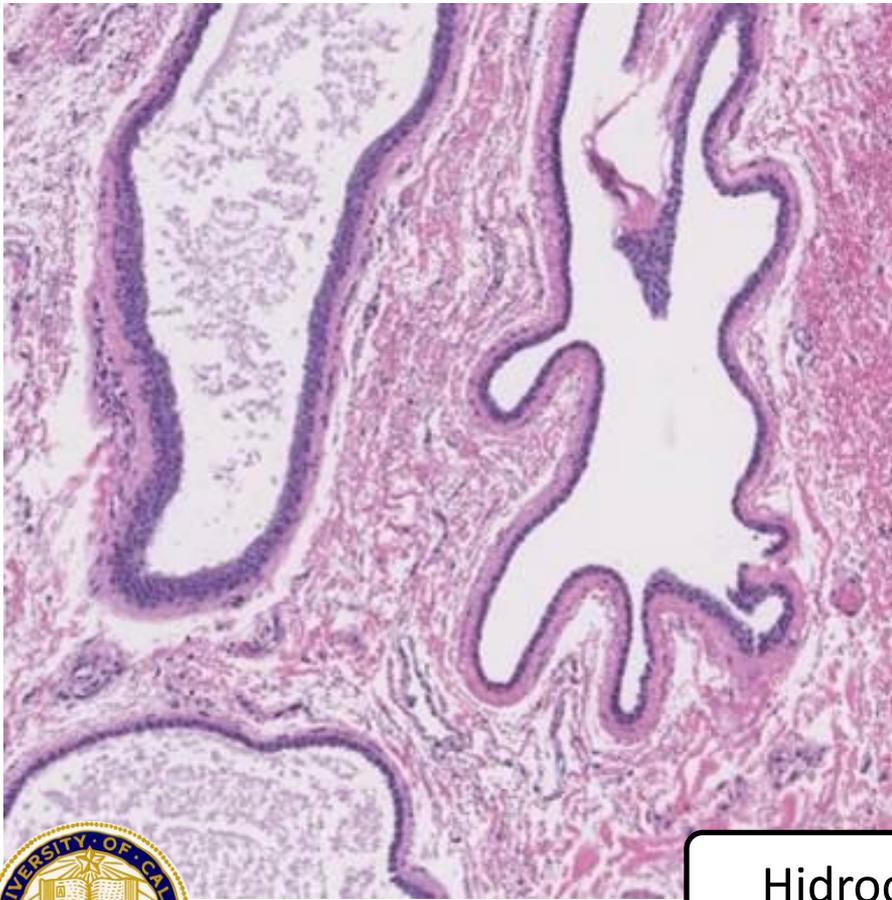






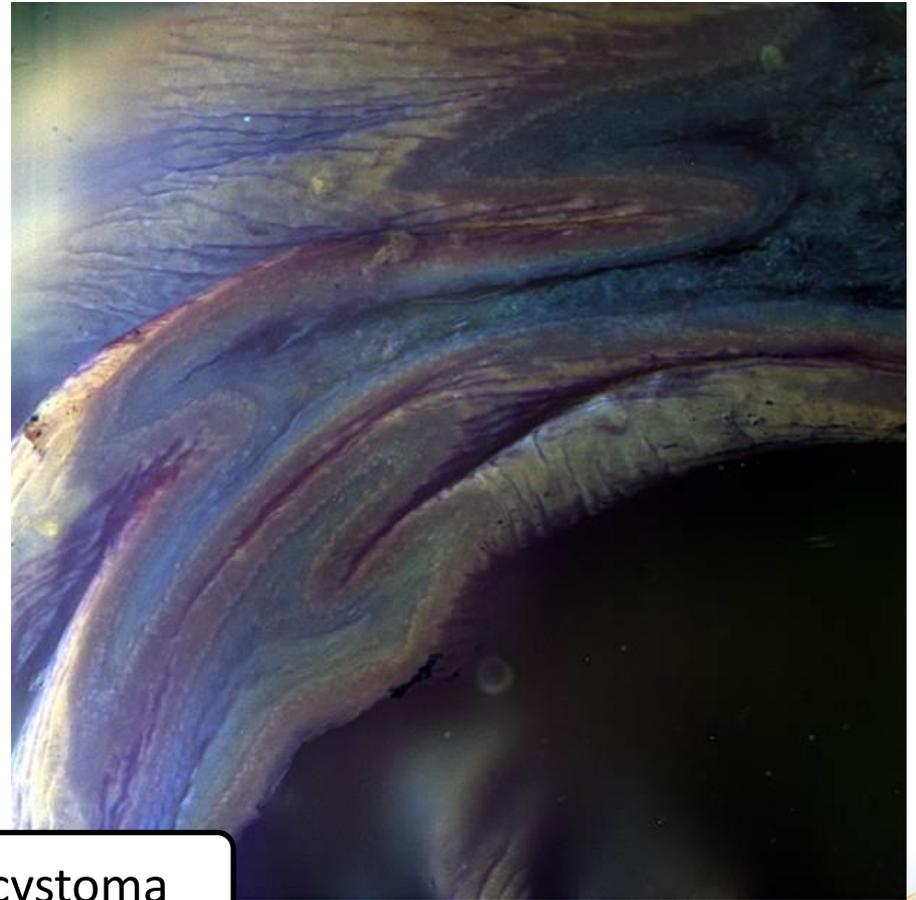
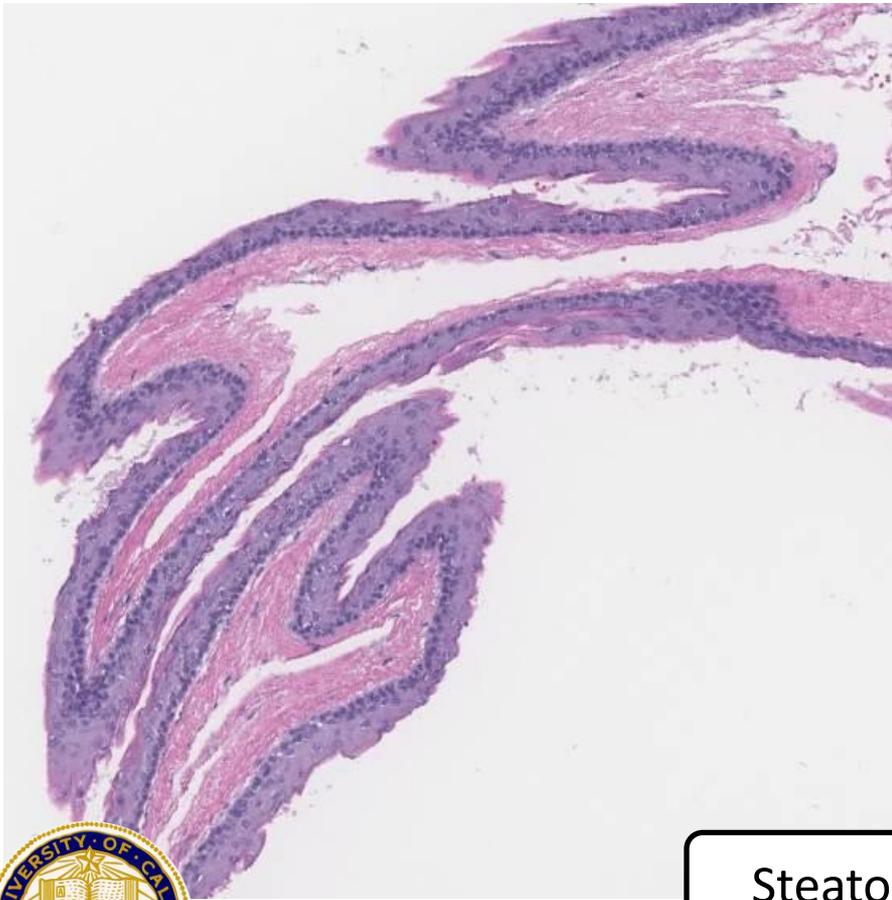
Syringoma





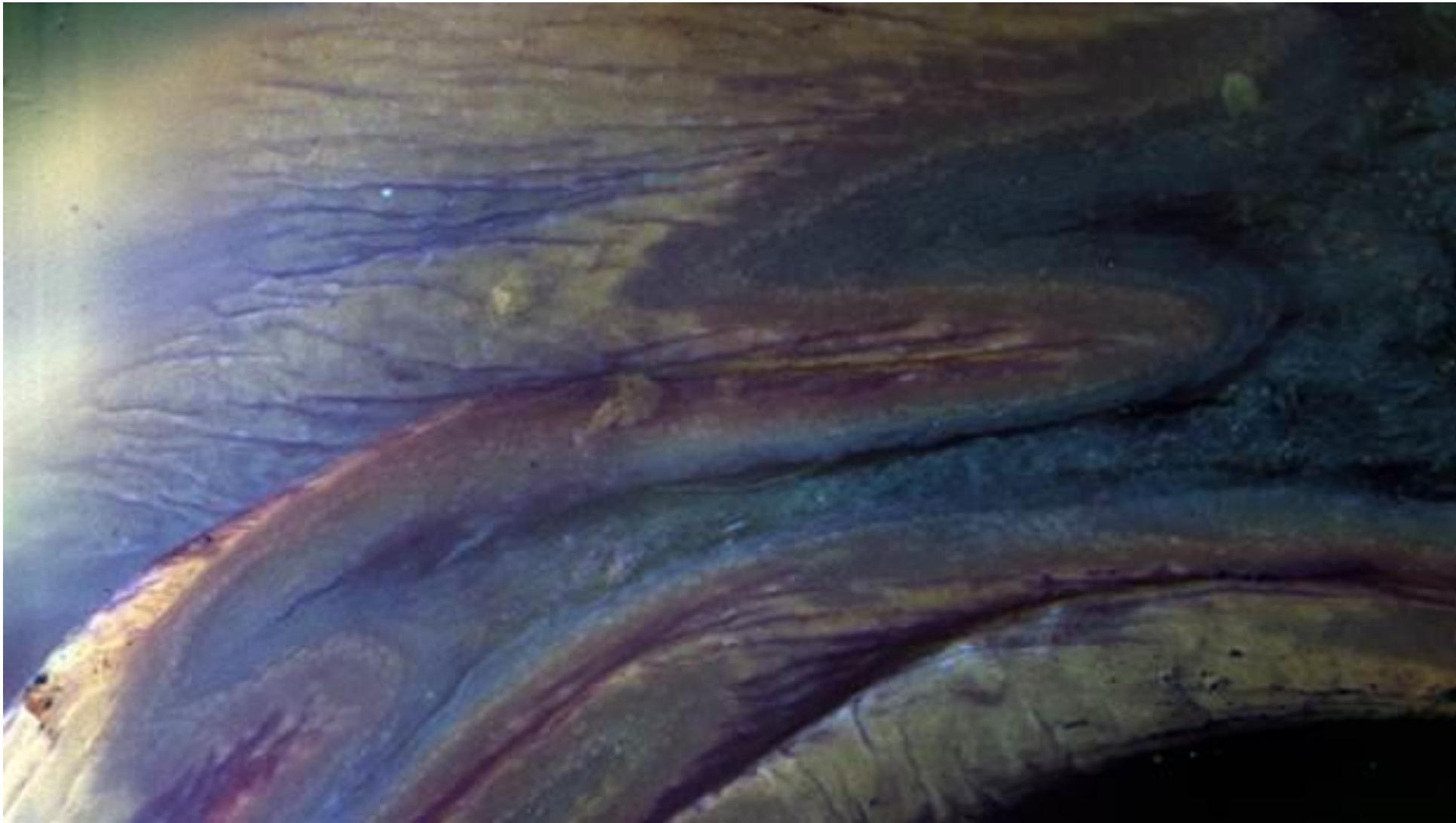
Hidrocytoma

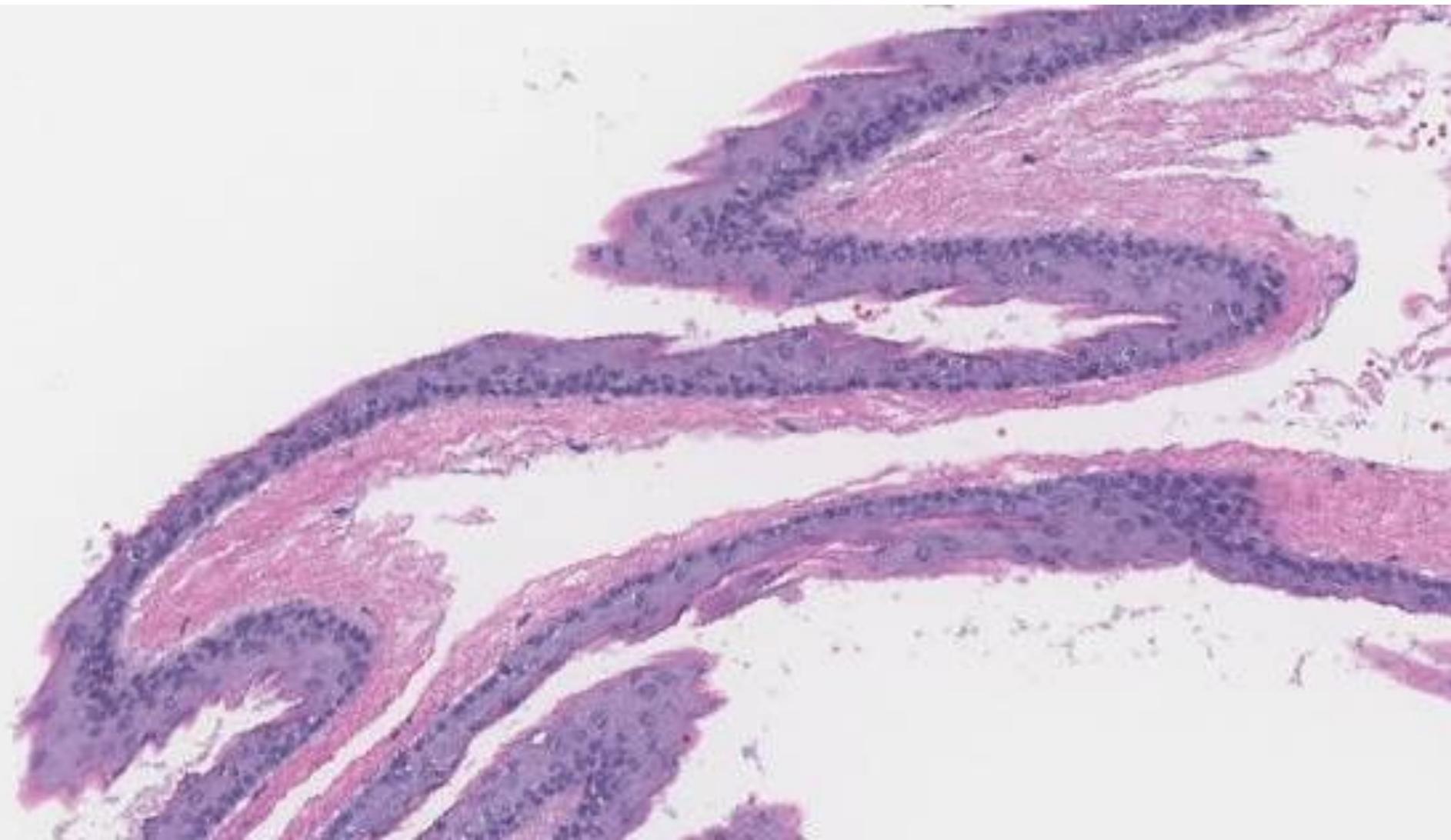


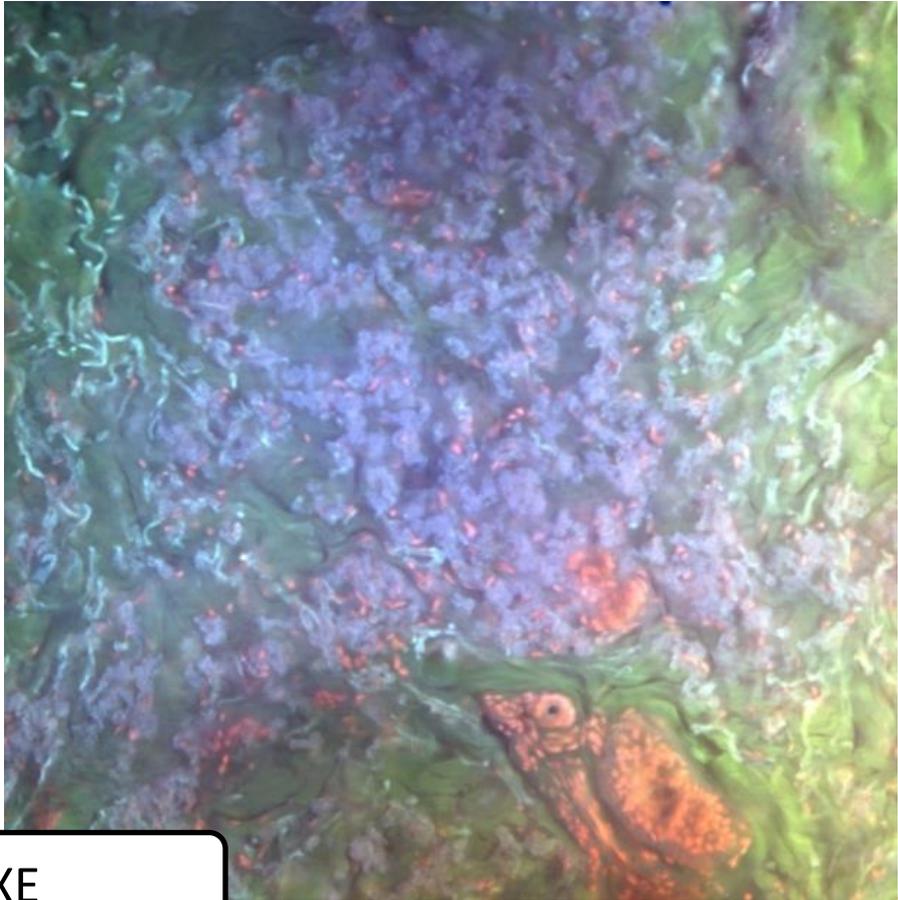
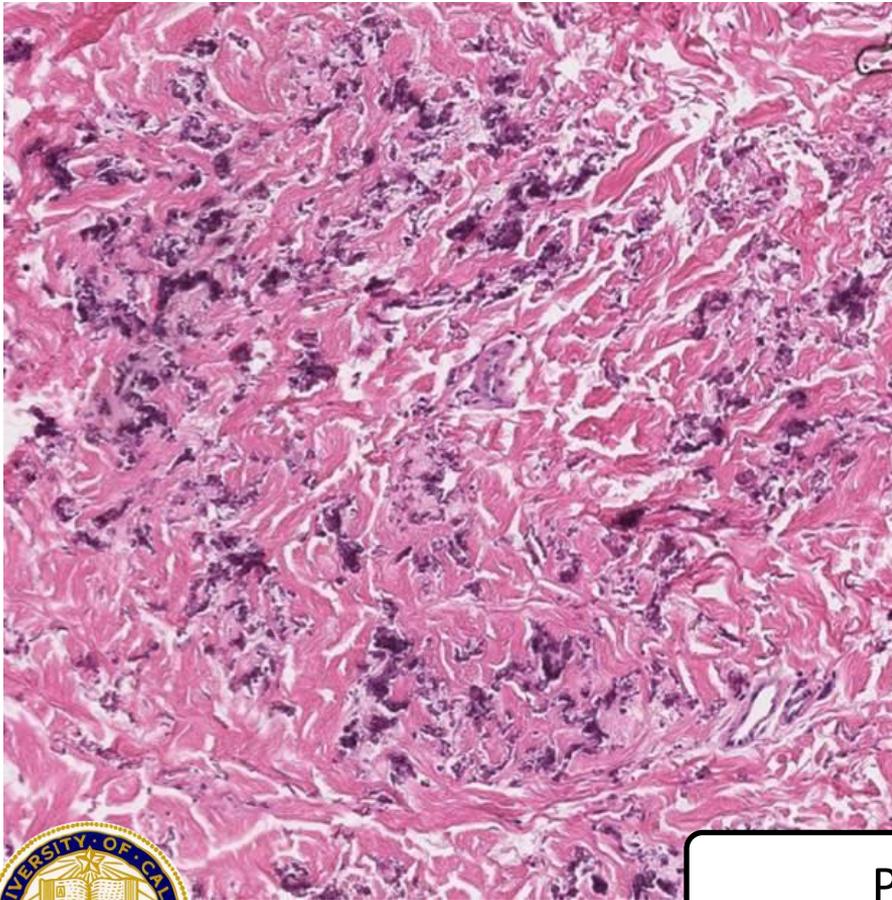


Steatocystoma









PXE

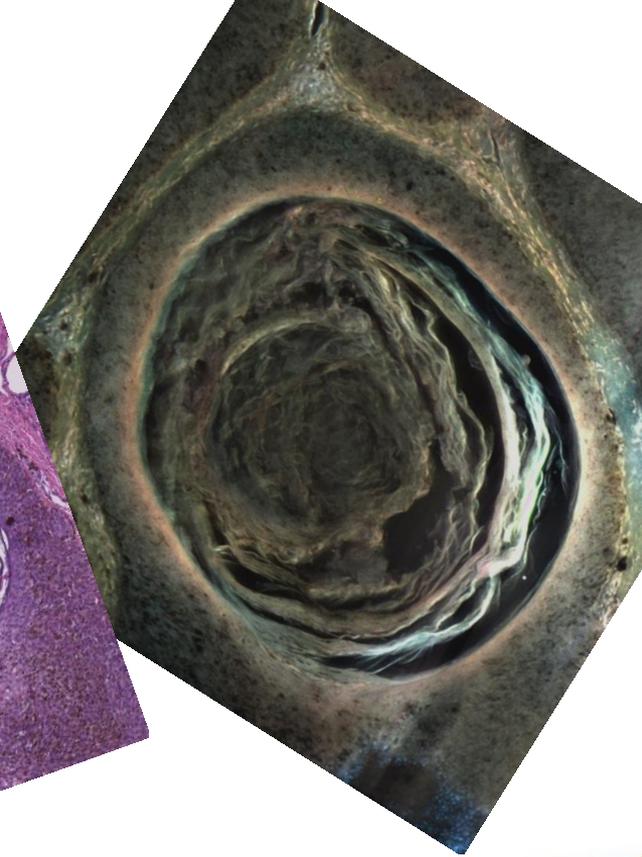
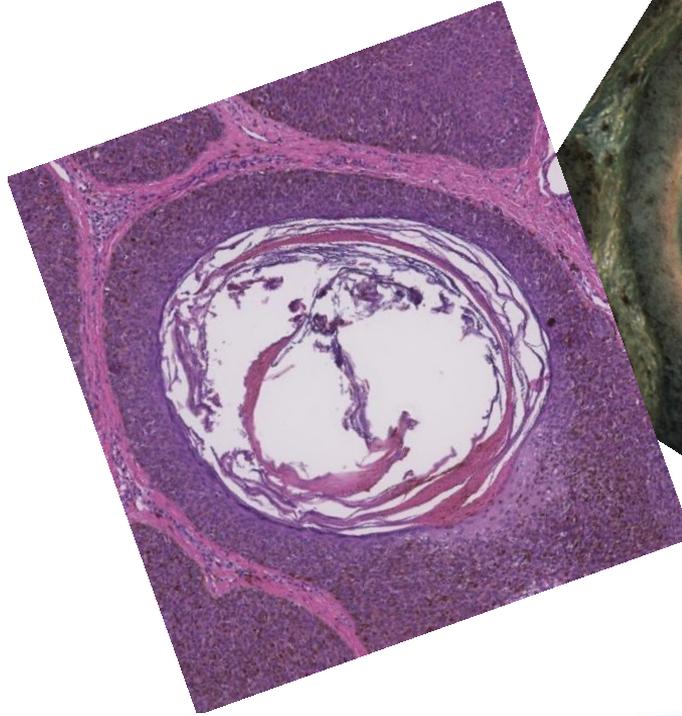


➤ MUSE: Comparison score

Is it better than H&E?

Total C. score: 0.8

- ❖ Cystic lesions: 1.2
- ❖ Adnexal lesions: 1.0
- ❖ Elastin lesions: 1.0
- ❖ Epidermal lesions: 0.7
- ❖ Melanocytic: 0.6



➤ MUSE vs H&E:



➤ MUSE vs H&E:

□ Cons:

❖ Pre-image:

- Unable to changing magnifications
- Hard to work with very small specimens

❖ Image:

- Nuclear features (melanocytic, inflammatory)
- Unfamiliar colors

❖ Post-image:

- Large data
- Tissue storage



➤ MUSE vs H&E:

☐ Pros:

❖ Robust method

- Simple physical & chemical principles
- Fast (2 minutes)
- Fresh, formalin or alcohol

❖ MUSE images:

- Multi-color (more informative)
- 3 Dimensional
- Similar to H&E (orientation/thickness)
- High diagnostic value (even for fresh eyes)



➤ MUSE vs H&E:

☐ Pros:

❖ Ex-vivo microscopy:

- Inexpensive (No histology)
- Preserving tissue (downstream molecular testing)
- Potential use in intraoperative consultation
- Can potentially be used as POC

❖ Digital pathology:

- Provide service to low resource areas



➤ MUSE vs H&E:

□ Pros:

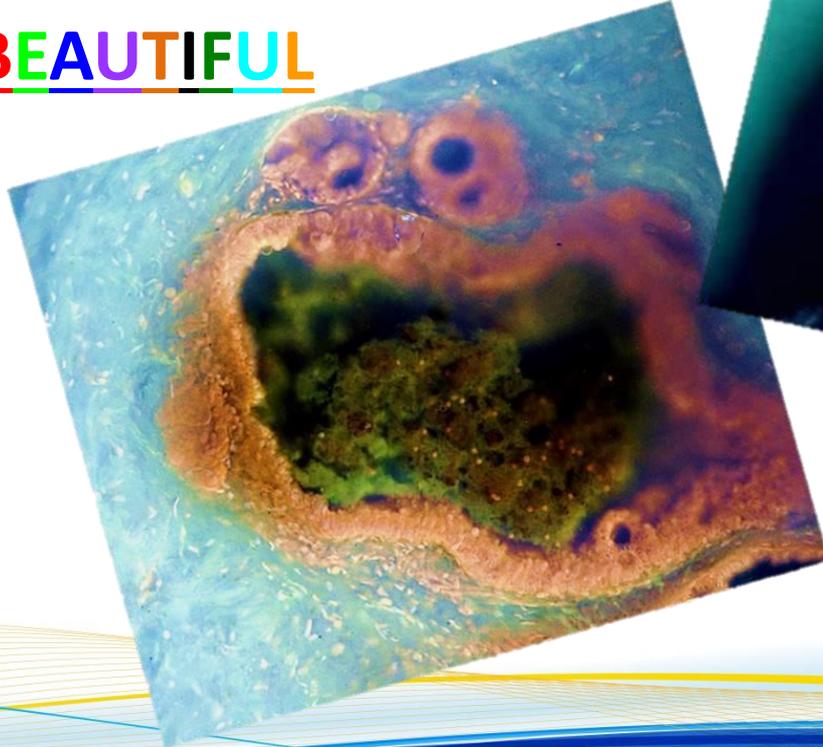
❖ Its BEAUTIFUL



➤ MUSE vs H&E:

☐ Pros:

❖ Its BEAUTIFUL



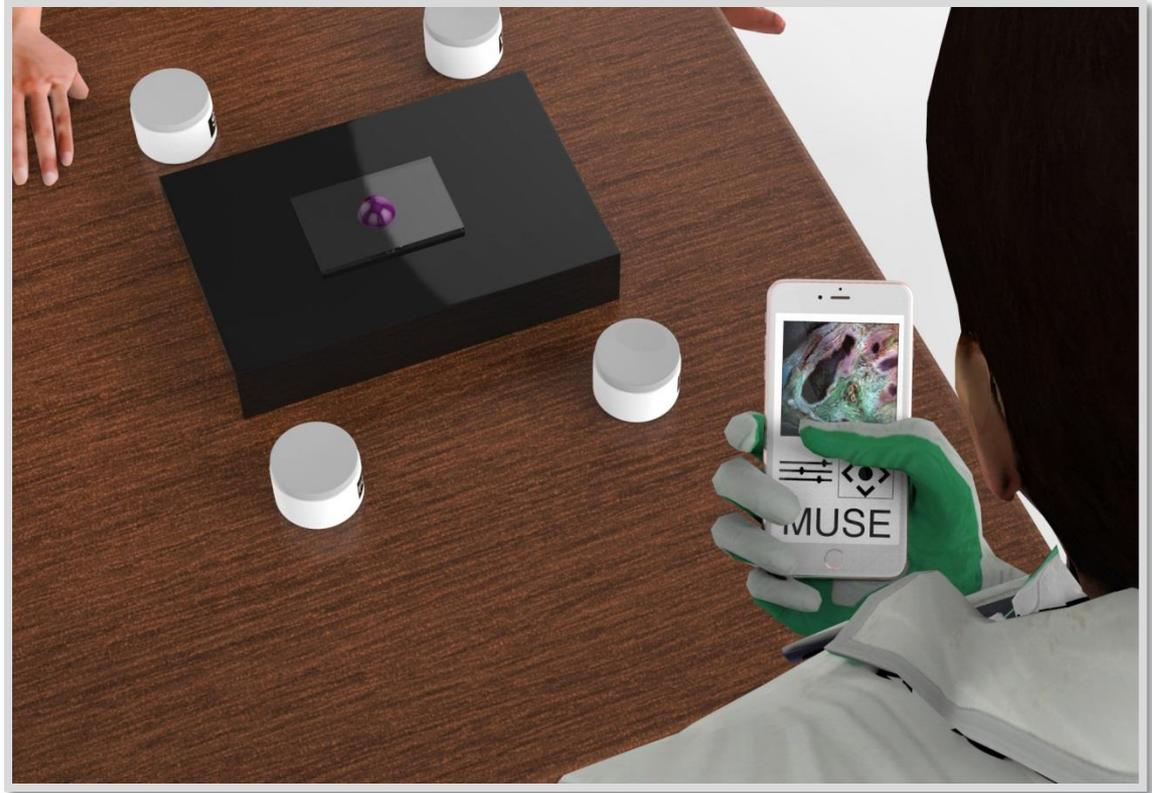
➤ MUSE now:



➤ MUSE future?



➤ MUSE future?

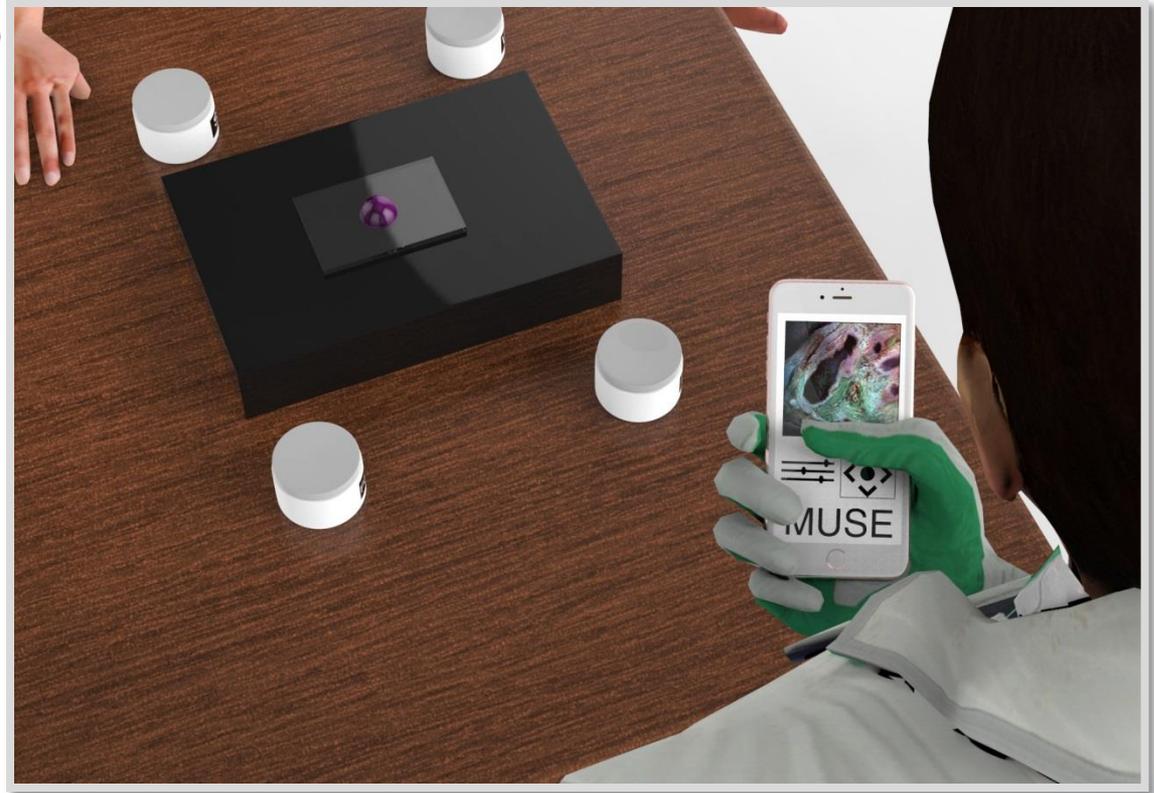


➤ MUSE future?



@BSTPath

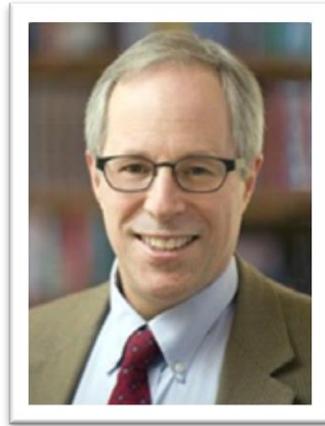
@FungMaxwell



➤ Our team:



Maxwell A Fung MD



Richard Levenson MD



Samuel Balin MD PhD



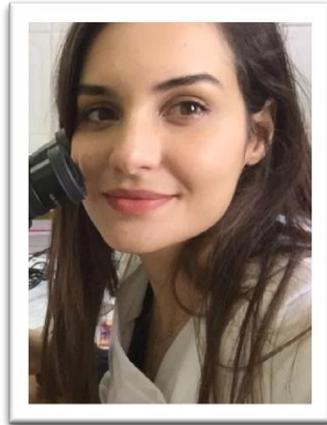
Tareq Mohammad MD



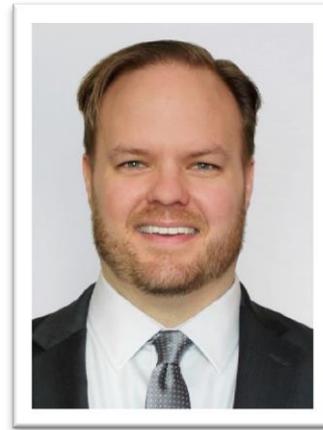
➤ Our team:



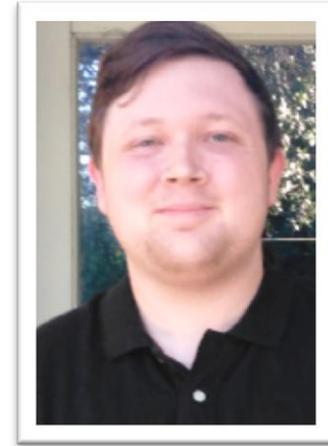
Farzad Fereidouni PhD



Yasmine Lahoubi MD



Zachary Harmany PhD



Austin Todd



➤ Thank you ...



➤ Thank you ...

