## Ultraspartus ir aukštos rezoliucijos akies vaizdinimas su pilnojo lauko optine koherentine tomografija

## Full-field Optical Coherence Tomography for ultrafast high-resolution eye imaging

<u>Egidijus Auksorius</u><sup>1</sup>, Dawid Borycki<sup>2,3</sup>, Piotr Węgrzyn<sup>2,3</sup>, Ieva Žičkienė<sup>1</sup>, Slawomir Tomczewski<sup>2,3</sup>, Karolis Adomavičius<sup>1</sup>, Mounika Rapolu<sup>2,3</sup>, Kamil Liżewski<sup>2,3</sup> and Maciej Wojtkowski<sup>2,3</sup>
<sup>1</sup>Center for Physical Sciences and Technology (FTMC), Saulėtekio al. 3, LT-10257 Vilnius, Lithuania
<sup>2</sup>Institute of Physical Chemistry, Polish Academy of Sciences, Kasprzaka 44/52, 01-224 Warsaw, Poland
<sup>3</sup>International Center for Translational Eye Research, ul. Skierniewicka 10a 01-230 Warsaw, Poland

egidijus.auksorius@ftmc.lt

Optical Coherence Tomography (OCT) has become a standard of care for diagnosing and monitoring eye diseases. However, despite its rapid development, highresolution in vivo imaging with penetration into deeper tissue layers is still a major challenge for classical OCT. Namely, OCT is limited by the presence of coherent noise that is due to the use of spatially coherent lasers, necessary for scanning and confocal detection. The noise, which manifest itself as speckle or crosstalk, effectively limits the achievable imaging depth and spatial resolution, which in turn reduce its diagnostic capabilities. Recently, to speed up OCT imaging, Fourier-domain Full-Field OCT (FF-FD-OCT) has been introduced that uses a multipixel (2D) detector (camera) to parallelize signal acquisition. We have shown that destroying spatial coherence of a laser not only allows removing crosstalk noise [1], which is common with camera detection, but also reduces speckle size when imaging retina [2]. We have optimized the system by employing a multimode fiber for crosstalk reduction [3] and by implementing a fast preview mode [4] that enabled acquisition of high-resolution, high-contrast OCT images deep in retina [5].

Fig. 1(a) shows the FD-FF-OCT system that consists of a fast-tunable laser source, a Linnik interferometer and an ultrahigh-speed 2-D camera. The laser light is delivered to the interferometer by the help of 300 meters multimode fiber (with 50 µm core). Interference between photons backscattered from the retina and reflected from the reference mirror is detected by the camera after recombination with the beamsplitter. A stack of multispectral interferometric images is acquired within just 10 ms by tuning (in the range of ~80 nm) the wavelength of the laser while the camera acquires 60000 images per second. To derive retinal volumes, Fourier transform is performed on each pixel. The illumination path features a rod mirror that separated illumination path from that of the backscattered light to implement a fast preview mode with an additional (line) camera. OCT images in Fig. 1 were acquired in vivo from a human volunteer. Multiple 3D volumes were generated (each acquired in <10 ms) and stitched together to obtain a large field of view (FOV) of the retina (1.7 x 1.7 mm), as shown in *enface* (XY) projection in Fig. 1(b) and in axial (XZ) projection in Fig. 1(e). The images clearly demonstrate that high-contrast high-resolution images can be acquired all the way to the choroid. In conclusion, FD-FF-OCT, unlike other OCT techniques, is less

sensitive to coherent noise and therefore allows imaging various retinal layers with higher quality and contrast promising to become a viable clinical tool in ophthalmology.



Fig. 1. (a) FD-FF-OCT system. (b) A large field-of-view and 15  $\mu$ m thick image of inner segment/outer segment (IS/OS) of the retina. Red box in (b) image is shown zoomed-in to various degrees below in (c) and (d). The image reconstruction was numerically compensated (22nd order Zernike polynomials) for ocular aberrations revealing photoreceptor structure, seen clearly in (d). (e) Cross-sectional image along the papillomacular axis of the human retina.

Key words: Retinal imaging, Optical Coherence Tomography.

## References

- [1] P. Stremplewski, E. Auksorius, P. Wnuk *et al.*, Optica, 6(5), 608 (2019).
- [2] E. Auksorius, D. Borycki, and M. Wojtkowski, Biomed. Opt. Exp., 10(12), 6390 (2019).
- [3] E. Auksorius, D. Borycki, and M. Wojtkowski, Opt. Lett., 46(6), 1413 (2021).
- [4] E. Auksorius, Opt. Lett., 46(18), 4478 (2021).
- [5] E. Auksorius, D. Borycki, P. Wegrzyn *et al.*, arXiv preprint arXiv:2107.10672, (2021).