Instant Digital Pathology
Confocal Laser Scanning Microscopy
VivaScope® 2500 – Ex Vivo
Intraoperative analysis of excised tissue in just a few minutes

VivaScope 2500 is a confocal laser scanning microscope designed specifically for the analysis of biopsies and the assessment of tumour margins during surgery. Samples can be examined directly after an excision without lengthy procedures.
Speed counts – an alternative to frozen sectioning

- Minimal Preparation
- Direct Assessment
- Considerable Time Savings
- Tissue Integrity
- Remote Diagnosis – Telemedicine

**Minimal Preparation**
Tissue preparation takes less than one minute. Imaging can begin immediately after.

**Direct Assessment**
The images directly reveal the morphology in subcellular resolution.

**Considerable Time Savings**
Compared to conventional frozen or paraffin sections, the time required to assess the excised tissue is dramatically reduced.

**Tissue Integrity**
The examined tissue remains unharmed by the procedure and can be processed for histology later on.

**Remote Diagnosis – Telemedicine**
The pathologist can remotely evaluate the images immediately after scanning.
The workflow – staining procedure & image acquisition

Tissue can be examined immediately after an excision without lengthy procedures. This allows for the direct assessment of tissue right in the operating room.

1 **Tissue Removal**
   The tissue can be examined directly after excision without fixation.

2 **Staining Procedure**
   The tissue sample is stained with a fluorescent dye in less than one minute, then mounted on a glass slide.

3 **Confocal Imaging**
   The VivaScope 2500 scans the excised tissue and reveals the cellular morphology in optical sections. Scan time for a tissue sample of 8 x 8 mm ~ 00:50 min / 16 x 12 mm ~ 02:10 min.

4 **Remote Diagnosis – Telemedicine**
   During surgery, a pathologist can evaluate biopsies or tumour margins directly on site or via remote access.

5 **Finalise Surgery**
   After histopathological confirmation of tumour free margins, the surgery can be completed.
Pseudo-coloured images correlate to H&E

The device’s software uses an algorithm to translate the acquired image information into colours that resemble H&E. The pseudo-coloured images contain similar information to conventional histology and can be examined at any magnification up to 550 x.

VivaScope 2500

H&E

Images courtesy of Dr. Javiera Pérez-Anker. Different subtypes of basal cell carcinoma, acquired with VivaScope 2500 (left) and after H&E staining (right).
Groundbreaking innovation in surgery

Samples can be examined directly after an excision without time consuming procedures. Tissue preparation and staining take only minutes. For easy portability, the VivaScope 2500 may be installed on a movable table and thus can be used in different locations.
Medical applications

VivaScope technology provides images for fast diagnosis of biopsies and intraoperative tumour margins. Surgical workflows and patient management can be improved substantially. VivaScope technology is well-validated in dermatology, especially Mohs surgery. According to recent studies, using the VivaScope in urological procedures offers radically new treatment pathways. Additionally, pilot studies show a great potential for various other fields like lung, breast, thyroid, colon and brain tissue.

Selected publications

Ex Vivo Confocal Fluorescence Microscopy for Rapid Evaluation of Tissues in Surgical Pathology Practice. Krishnamurthy S et al., Arch Pathol Lab Med. 2018


Fluorescence confocal microscopy for pathologists. Ragazzi M et al., Modern Pathology 2013

Find out more at vivascope-pub.com
VivaScope® 2500 in dermatology

Confocal microscopy of unfixed tissue using a VivaScope revolutionises diagnosis and surgical workflows in dermatology. Directly after an excision or biopsy, fresh tissue can be prepared and imaged in less than five minutes.

Mohs Surgery

Confocal microscopy replaces frozen section histology during Mohs surgery, reducing the time needed to complete surgery by more than 50%. Integrated in a surgical workflow, the VivaScope scans provide information equivalent to H&E or frozen section histology slides without the need for a laboratory and in just a few minutes. Reliability of the technology has been assessed in numerous clinical studies, showing very high sensitivity and specificity.

Diagnostic Biopsies

Only few minutes after taking a biopsy, the histology of the tissue can be evaluated and the presence of a tumour determined. Appropriate treatment of the skin lesion can thus begin immediately.

References


Diagnostic accuracy of ex vivo fluorescence confocal microscopy for Mohs surgery of basal cell carcinomas: a prospective study on 753 margins. Longo C et al., Br J Dermatol. 2018


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Basal Cell Carcinoma

Image courtesy of Dr. Javiera Pérez-Anker, Hospital Clinic of Barcelona.
Prostate Biopsies
The analysis of standard biopsies takes less than 5 minutes, allowing for radical changes in the surgery workflow. Pathologists can access the images remotely to provide a diagnosis, independent of their location, enabling decisions to be taken and treatments commenced whilst the patient is still present.

Radical Prostatectomy
Recently, instant examination using a VivaScope 2500 has been performed during robot-assisted radical prostatectomy where non-neoplastic and cancerous prostate tissue was compared to a histopathological diagnosis. Preliminary results show an overall substantial diagnostic agreement of 91% between confocal and histopathological diagnoses (n=89). (Puliatti.S et al., BJU Int. 2019)

Urothelial Carcinoma
In a second study, the diagnosis of high-grade/low-grade urothelial carcinoma in bladder and ureter has been assessed. Preliminary results showed a 100% accordance between the grading of FCM images and the final histopathology of all bladder urothelial carcinoma specimens (n=8).
Acinar prostatic adenocarcinoma with atypical glands

Image 1 – Normal prostatic glands with inflammatory component: (A) ex vivo FCM image of prostatic biopsy; (B) zoomed image enhances visualisation of tissue and cell morphology details; (C) corresponding H&E image

Image 2 – Acinar prostatic adenocarcinoma with atypical glands: (D) ex vivo FCM image of prostatic biopsy; (E) zoomed image; (F) corresponding H&E image

Urothelial carcinoma in ureter and bladder

High-grade urothelial carcinoma in ureter with nuclear pleomorphism and mitotic activity: (A) ex vivo FCM image (B) corresponding H&E image

Urothelial carcinoma in bladder: nests of atypical cells in the corion: (C) ex vivo FCM image (D) corresponding H&E image

Image courtesy of Dr. Stefano Puliatti, Dr. Laura Bertoni, Dr. Paola Azzoni, Dr. Luca Reggiani-Bonetti and Prof. Bernardo Rocco, University of Modena and Reggio Emilia, Italy.
VivaScope® 2500: Simultaneous reflectance and fluorescence confocal microscopy

Like H&E staining, VivaScope images are generated from two components. Two lasers of different wavelengths create two distinct images, a fluorescence image and a reflectance image. Both signals are scanned simultaneously and are used to create pseudo-coloured images.
**VivaScope® 2500 technology – key advantages**

VivaScope technology is based on confocal microscopy and acquires images of superb optical resolution and contrast. VivaScope images allow for direct pathological diagnosis during surgery. VivaScope devices are characterised by the following unique features.

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**Two Lasers of different Wavelengths**

A 488 nm laser (blue, fluorescence signal) and a 638 nm laser (infrared, reflection signal) are used simultaneously. Both signals are acquired and correlated in real-time.

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**Pseudo-coloured Images**

A built-in algorithm translates the reflectance and fluorescence signals into H&E-like pseudo-coloured images. The resulting images contain similar information to conventional histology.

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**Macro Image**

The digital camera provides a colour image of the specimen. This macro image correlates precisely with the confocal image and thus allows for easy tissue navigation, visualisation of tissue marking dye and simplified selection of regions of interest.

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**Advantages over Cryosectioning**

Adipose tissue often is difficult to handle during cryosectioning. However, fat cells can easily be imaged and evaluated using the VivaScope technology. Additionally to that, tissue is not damaged during the imaging process and can be used for further analyses.

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**Tissue Flattening**

A patented tissue flattening solution simplifies examining excised tissue, regardless of its shape.
VivaScope® 2500 – technical data

<table>
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<tr>
<th>Optical features</th>
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<tbody>
<tr>
<td>Optical resolution</td>
<td>Horizontal &lt; 1.25 μm at centre of field of view, vertical &lt; 5.0 μm at centre of field of view</td>
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<tr>
<td>Imaging depth</td>
<td>Adjustable up to 200 μm (dependent on tissue type)</td>
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<tr>
<td>Single field of view size</td>
<td>550 μm x 550 μm</td>
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<tr>
<td>Image resolution</td>
<td>1024 x 1024 pixels (single field of view), 0,5 μm/pixel</td>
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<tr>
<th>Other specifications</th>
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<tbody>
<tr>
<td>Maximum sample size</td>
<td>25 mm x 25 mm</td>
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<tr>
<td>Maximum image resolution</td>
<td>51.000 x 51.000 pixels</td>
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<tr>
<td>Operating wavelengths</td>
<td>488 nm &amp; 638 nm</td>
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<td>Objective</td>
<td>Caliber I.D. StableView™ gel immersion 38x</td>
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<tr>
<td>Magnification</td>
<td>Seamless zoom up to 550x</td>
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<tr>
<td>Macro camera</td>
<td>5 megapixel full scale colour</td>
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<tr>
<td>Laser classification</td>
<td>Class I</td>
</tr>
<tr>
<td>Laser signal strength</td>
<td>Adjustable laser power allows for optimised image quality</td>
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<table>
<thead>
<tr>
<th>Device features</th>
<th></th>
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</thead>
<tbody>
<tr>
<td>Dimensions (LxWxH)</td>
<td>25 x 52.5 x 25 cm (Scan head only)</td>
</tr>
<tr>
<td>Weight</td>
<td>17.2 kg</td>
</tr>
<tr>
<td>Power source</td>
<td>220 – 240 V, 50 Hz</td>
</tr>
<tr>
<td>Typical scan times</td>
<td>8 x 8 mm ~ 00:50 min / 16 x 12 mm ~ 02:10 min / 20 x 20 mm ~ 04:25 min</td>
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Introductory on-site Training

After the installation of a VivaScope, users are provided with a training course, during which the essential knowledge for the daily routine is taught. Presentations, manuals, imaging guidelines and publications are provided to support the training.

Training by Experts

In a clinical setting, users obtain further knowledge about VivaScope applications from renowned experts. The course focuses on staining protocols, tissue handling and imaging tips as well as expert image interpretation.
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