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APPLICATION POSSIBILITIES OF INFRARED THERMOGRAPHY IN MEDICAL DIAGNOSTICS

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Using of thermal imaging camera is a highly effective and informative means of patients screening for the detection of inflammatory processes in the early disease stages. Nowadays criteria of thermal imaging diagnostics for more than two hundred diseases and pathological conditions are developed and this list is constantly being replenished.

It is known, that various parts of human body have an individual normal average temperature, due to the existence of features in the degree of their blood supply and innervations. However, surface temperature of symmetrical sections for the same areas does not significantly differ normally. Consequently, opposite symmetrical region of the body should be used as a control site for identifying pathologies.

Medical thermography is becoming more widely used every day in multi-disciplinary medical institutions. The work of thermographer during screening diagnostics takes place, as a rule, in unstable environmental conditions. This determines requirements for medical worker to have a high qualification and special abilities to take into account the influence of external factors, as well as, incomplete thermal adaptation of patients in the diagnostic process [1]. Therefore, one of the pressing issues remains the increase in the information content and the correspondence of the taken indicators to the real temperature of the surface area of the object under observation. Therefore, one of the pressing issues remains the increase in information content and correspondence of taken indicators to real temperature of surface area at observation object. It is worth noting, that diagnosis adequacy also depends on correct interpretation of thermograms, which, in turn, is possible only when a clear image with high quality is obtained. The above parameters largely depend on the operating conditions and influence of environmental factors to thermography camera design.

Today, thermography diagnostics is used in various areas of medicine: oncology, mammalogy, otorhinolaryngology, cardiac surgery, forensic examination and others. One of the most important problems at cardiac surgical interventions is ischemic myocardial damage, since normal coronary perfusion is absent due to aorta clamping. For complete control over the temperature distribution using of infrared cameras is promising and innovative, that allows to get a highly informative image of temperature distribution on entire heart surface [2, 3].

Temperature fluctuations on myocardium surface in study area are clearly defined during hypothermia and hyperthermia under conditions of cardiopulmonary bypass. Exact temperature control of cooling and heating for brain and heart tissues

minimizes cardiopulmonary bypass time and provides maximum protection of myocardium during surgery manipulation.

Temperature lowering of the heart and brain from +36 °C to +18 °C is the main factor in protecting against brain hypoxic damage when these organs are turned off from blood circulation during open heart surgery. During warming at the initial stage temperature difference between heat transfer agent and human body should not exceed 5 °C. At other stages of patient warming until 36 °C, the temperature gradient should not exceed 8 °C and heat transfer agent temperature should be strictly maintained in range of 39,0-39,5 °C [4, 5]. Consequently, during such operations high-precision temperature control is necessary, both for the heat carrier and patient.

Thermal imaging cameras use two wavelength ranges of the optical spectrum that correspond to atmospheric transparency windows: 3-5 micrometers or 8-14 micrometers. However, in the case of medical thermography choice of spectral range is not solely due to requirements of atmosphere transparency, since measurement object (human) is situated close to the camera and level of infrared radiation absorption by air is significant less [6, 7]. At the same time, it was found that thermography cameras operating in spectral range of 3-5 μm are more sensitive to reflexes of skin reradiation from thermal radiation external sources. Considering that the maximum spectral intensity of human body radiation with temperature of 37 °C is approximately at 9.3 μm [8] and the influence of spurious backgrounds is less significant in range of 8-14 μm, it is advisable focusing at photodetector nodes design for medical thermal imagers of this spectral range.

Keywords: *infrared imaging camera, medical heat vision, open heart surgery, thermography diagnostics, thermogram analysis.*

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