

Rapid Detection & Diagnosis of Bacterial Pathogens in Clinical Specimens Using Laser-Induced Breakdown Spectroscopy

Presented at 2022 CAP Congress

Emma Blanchette
Department of Physics
University of Windsor



Introduction and Motivation

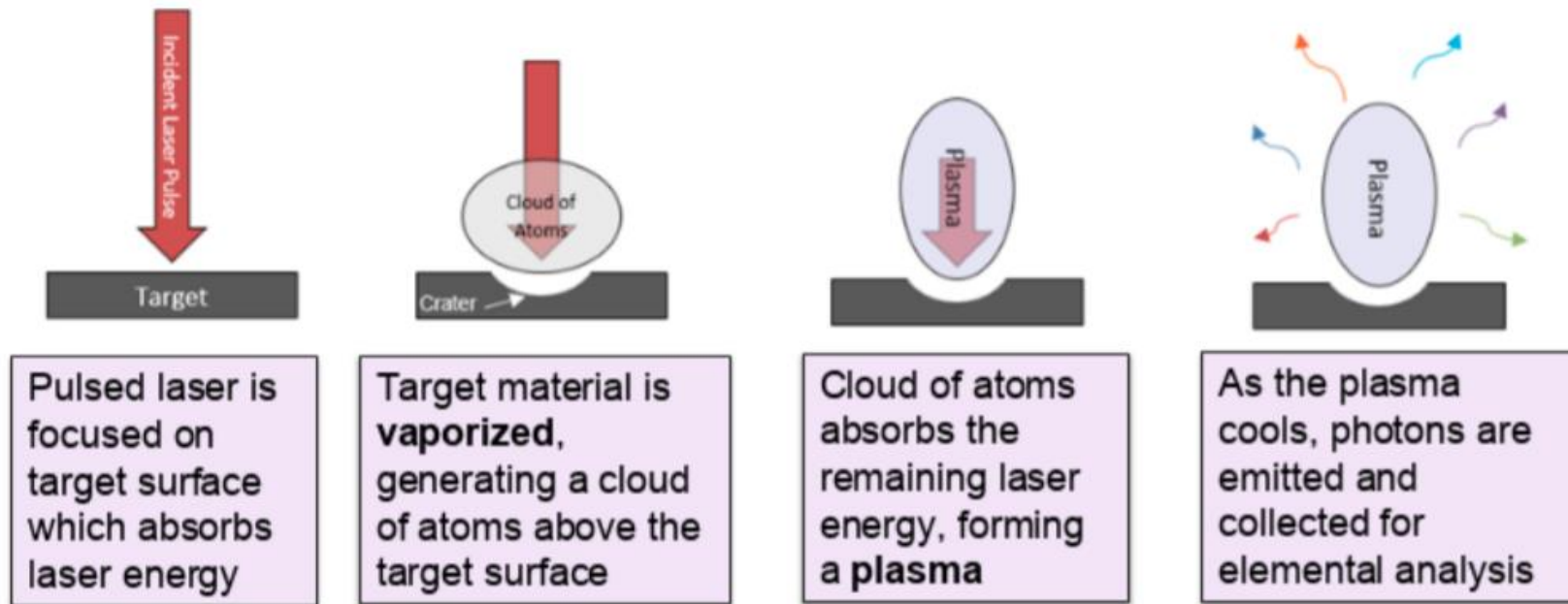
- We are using laser induced breakdown spectroscopy (LIBS) to rapidly diagnose bacterial pathogens
- Current methods of diagnosis takes ~ 1-3 days
 - Lack of technology for fast diagnosis → use of **broad spectrum drugs**
 - Sepsis requires fast treatment; preferably within an hour of diagnosis
 - UTI's are the second most common infection people seek treatment for

Goal: Develop rapid technique to diagnose bacterial infection in clinical setting



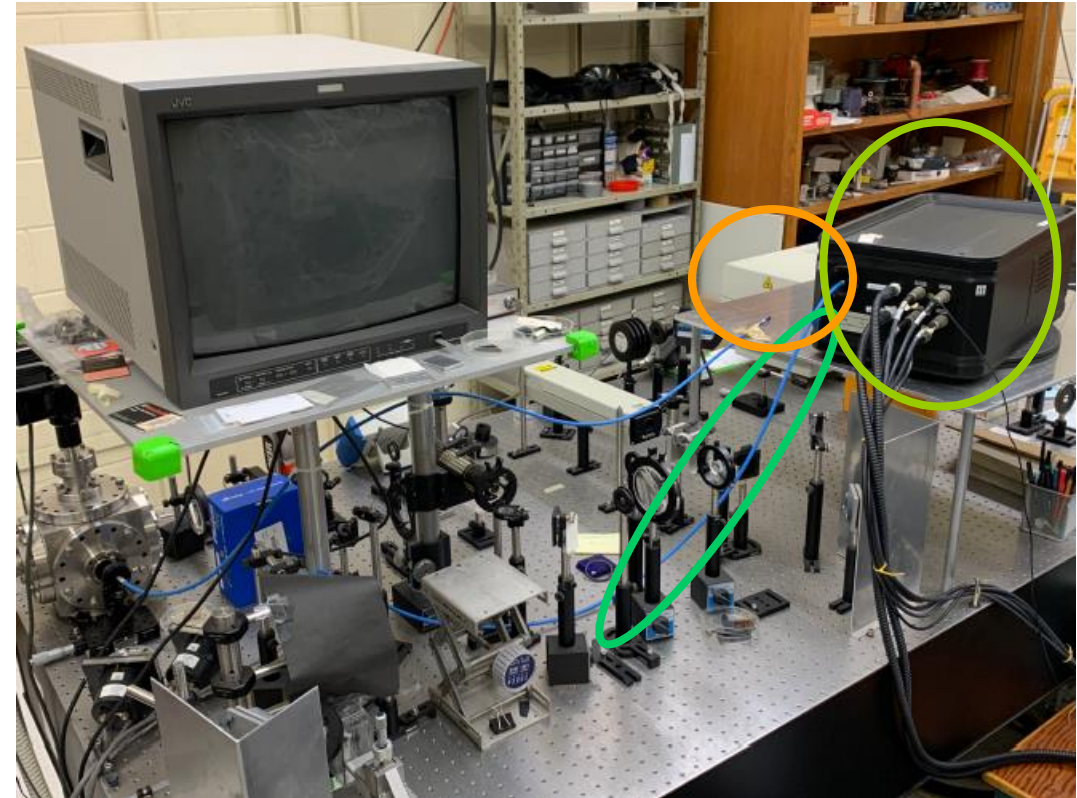
LIBS has Potential for This Application... it's Fast!

- A laser is focused onto a target to create a high temperature microplasma
- Time-resolved spectra is recorded... all in under 1 minute!

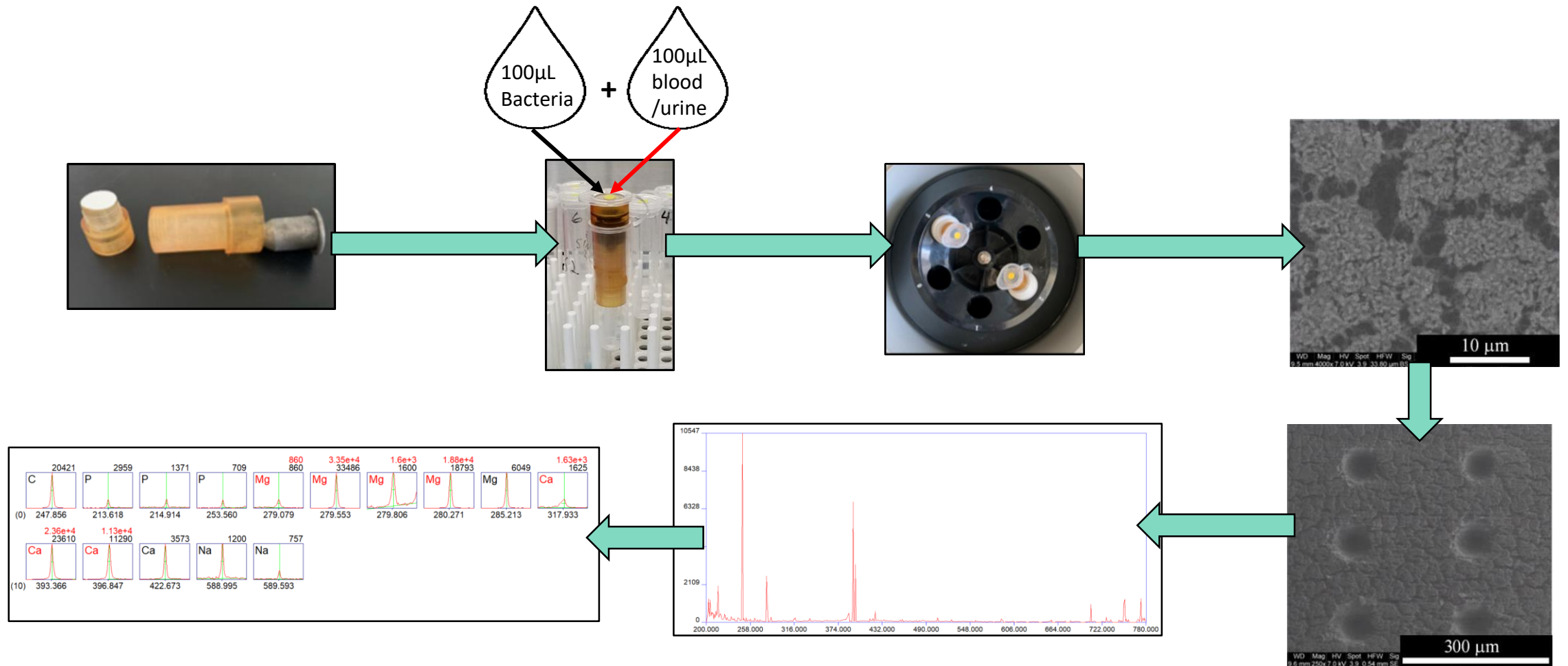


Experimental Setup and Parameters

- **Nd:YAG laser**, with 10 ns pulse duration and 10 Hz pulse frequency
- Light is collected from ablation events and fed into a **steel-encased optical fibre**
 - NA = 0.22, core ϕ = 600 μm
- **Echelle spectrometer** detects the light from fibre and generates a spectrum
 - Spectrometer uses an ICCD camera to convert photons to signal

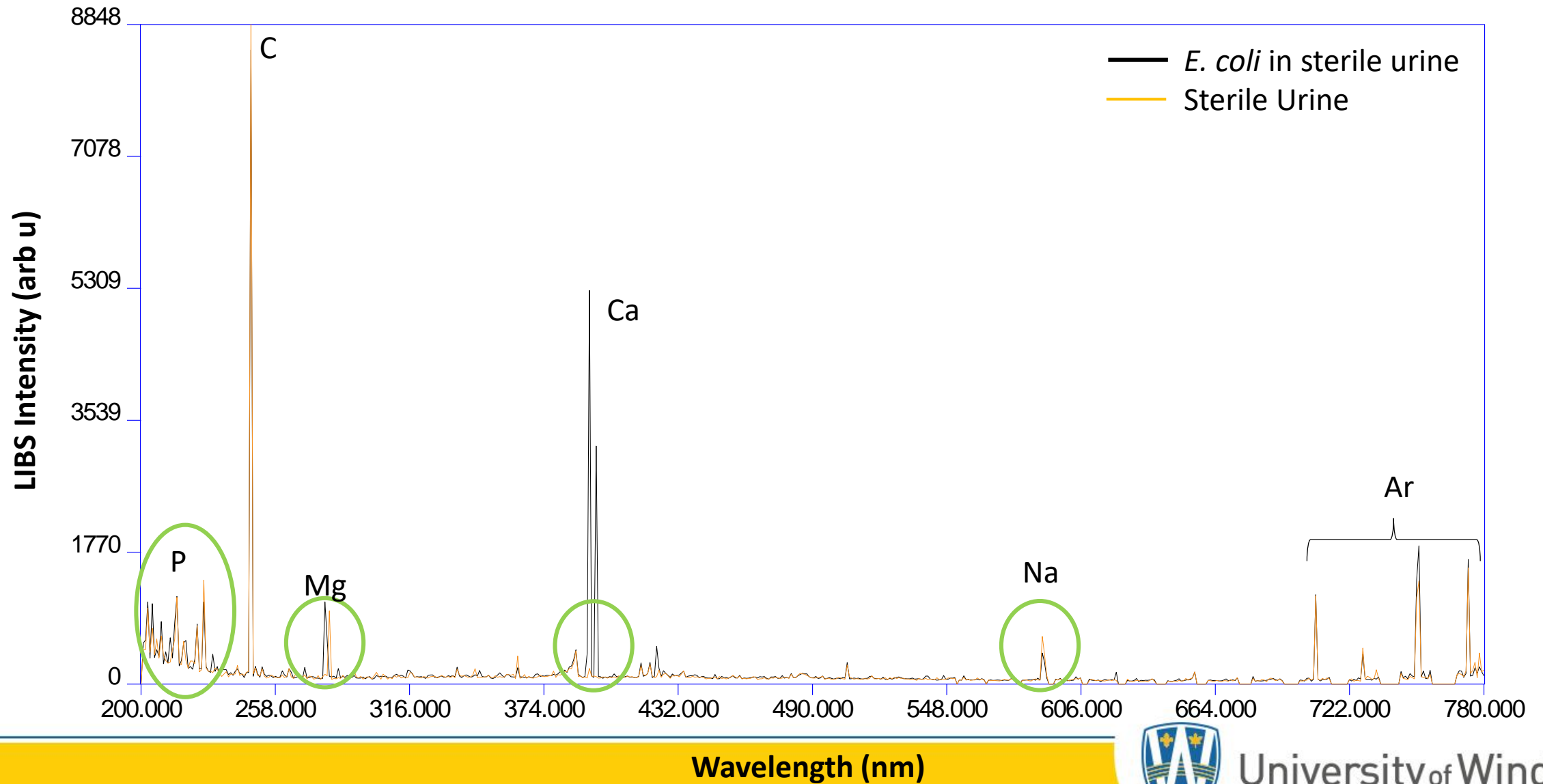


Sample Preparation (Blood & Urine + Bacteria)



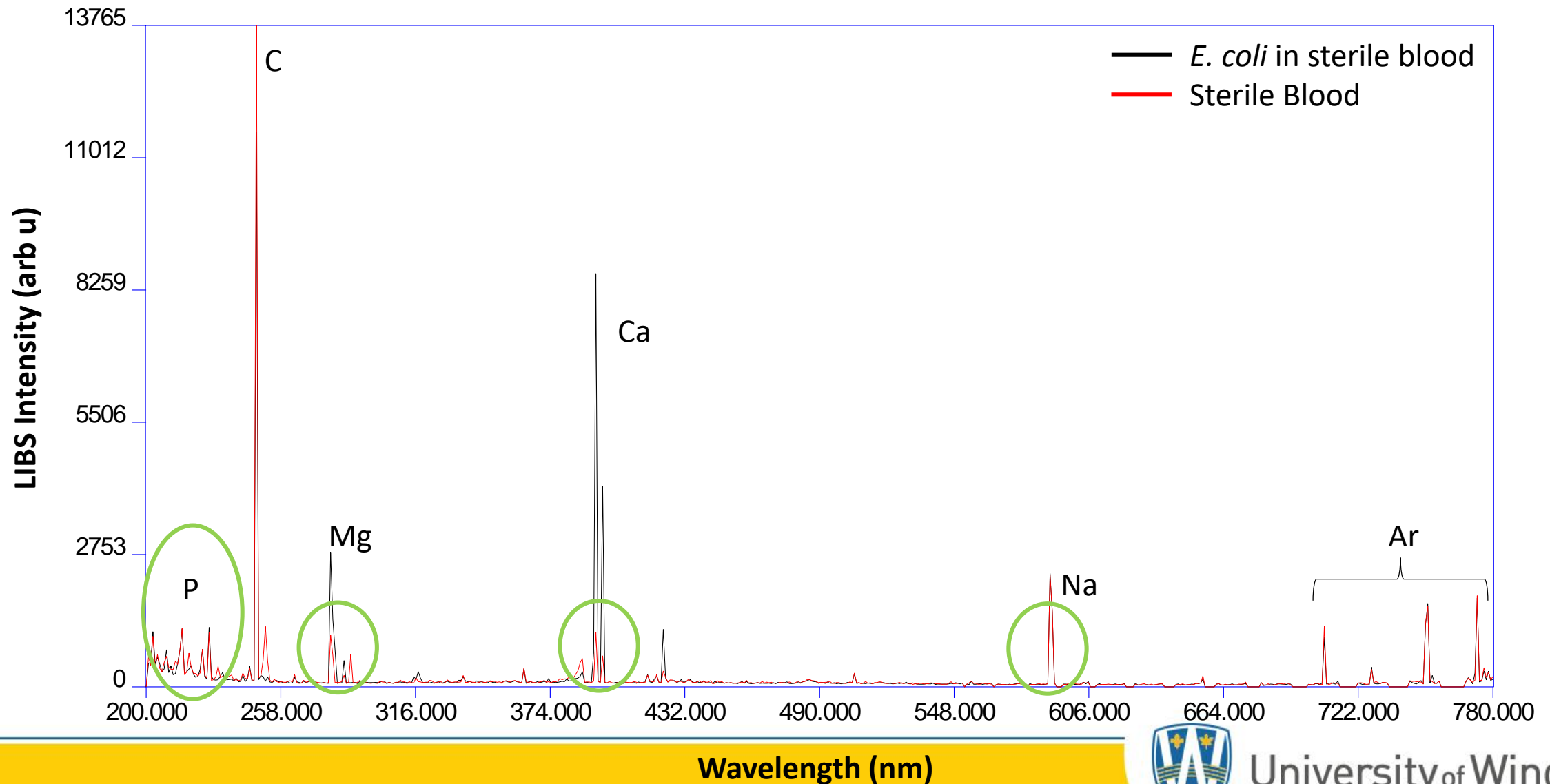
Results: Urine Spectrum

E. coli in sterile urine and Sterile Urine
2 μ s delay after plasma initiation
20 SCFH Argon environment
Single laser shot



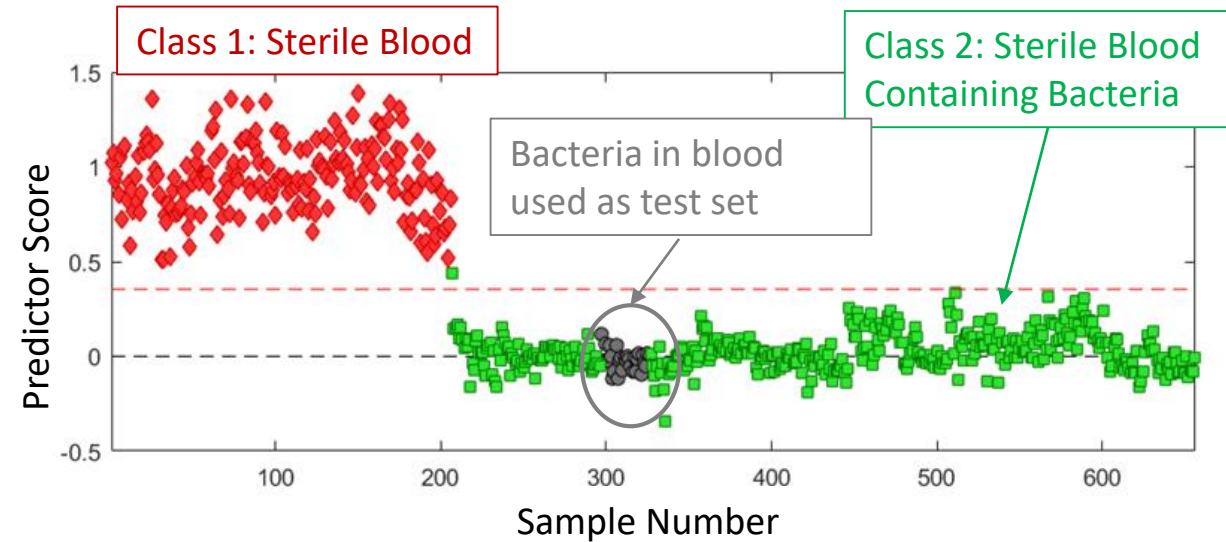
Results: Blood Spectrum

E. coli in sterile blood and Sterile Blood
2 μ s delay after plasma initiation
20 SCFH Argon environment
Single laser pulse

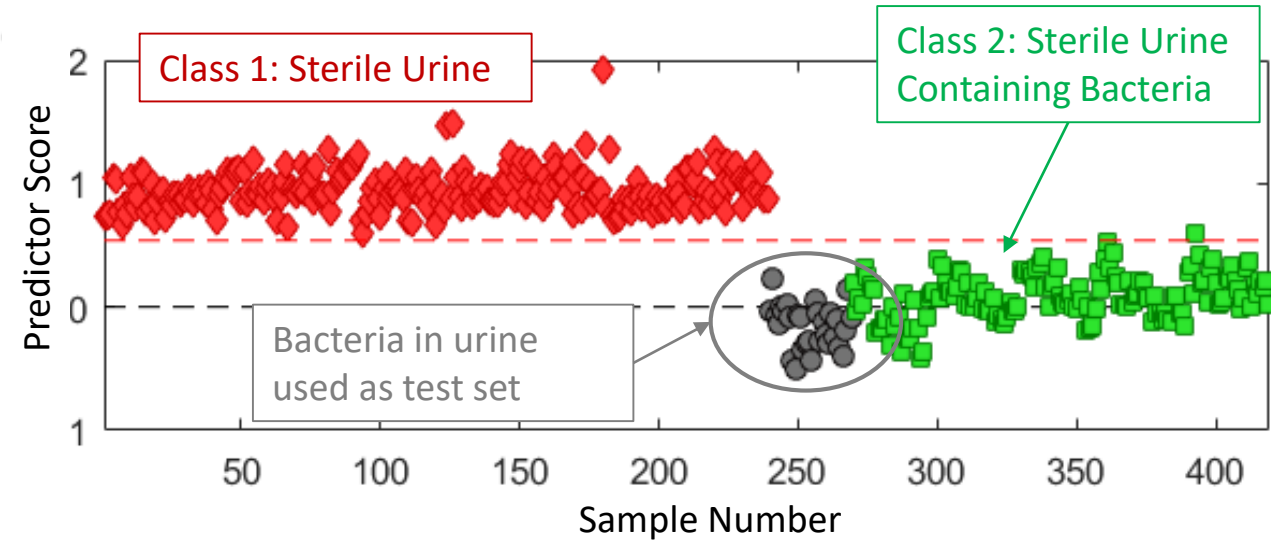


Is the Fingerprint of Blood/Urine Different than Bacteria?

- A **partial least squares discriminant analysis (PLSDA)** test was conducted using external validation to determine if bacteria can be detected in blood and urine
- ✓ We can detect several types of bacteria in blood and urine reliably



Average Sensitivity: 99.56%
Average Specificity: 100%



Average Sensitivity: 98.90%
Average Specificity: 100%

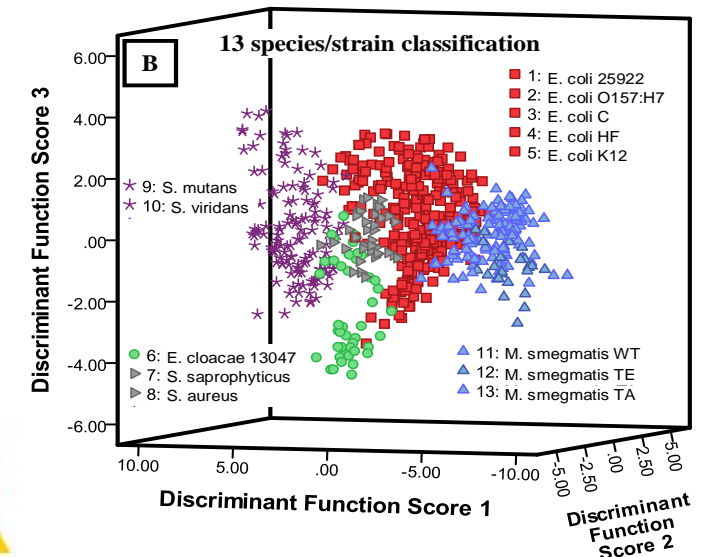
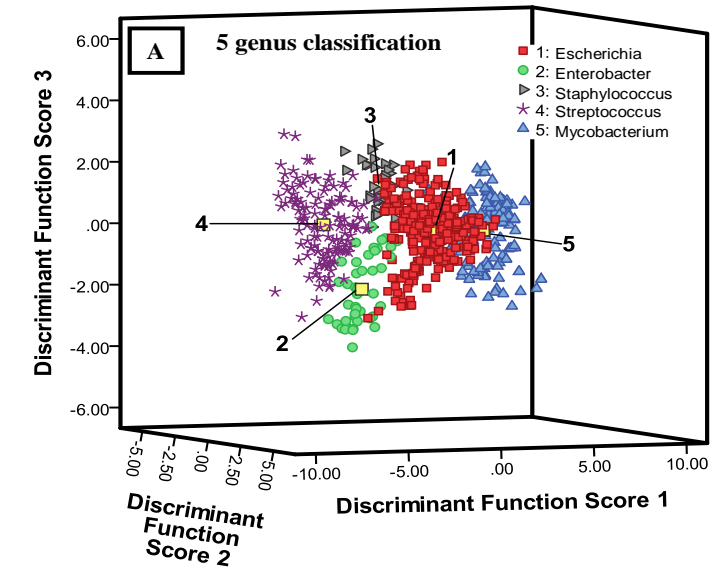


Can we differentiate between species?

- ✓ We can discriminate between species with high specificity and sensitivity (confirmed by others) using **discriminant function analysis (DFA)**
- ✓ We can differentiate between strains of *E. coli*
- ✓ Many multivariate techniques work²

DFA			PLSDA		
E. COLI	True	False	E. COLI	True	False
Positive	95.65%	9.17%	Positive	89.63%	15.95%
Negative	90.83%	4.35%	Negative	84.05%	10.37%
STAPHYLOCOCCUS	True	False	STAPHYLOCOCCUS	True	False
Positive	54.05%	0.51%	Positive	86.49%	5.85%
Negative	99.49%	45.95%	Negative	94.15%	13.51%
STREPTOCOCCUS	True	False	STREPTOCOCCUS	True	False
Positive	95.59%	1.02%	Positive	99.26%	13.32%
Negative	98.98%	4.41%	Negative	88.68%	0.74%
MYCOBACTERIUM	True	False	MYCOBACTERIUM	True	False
Positive	88.31%	1.06%	Positive	96.10%	4.08%
Negative	98.94%	11.69%	Negative	95.92%	3.90%

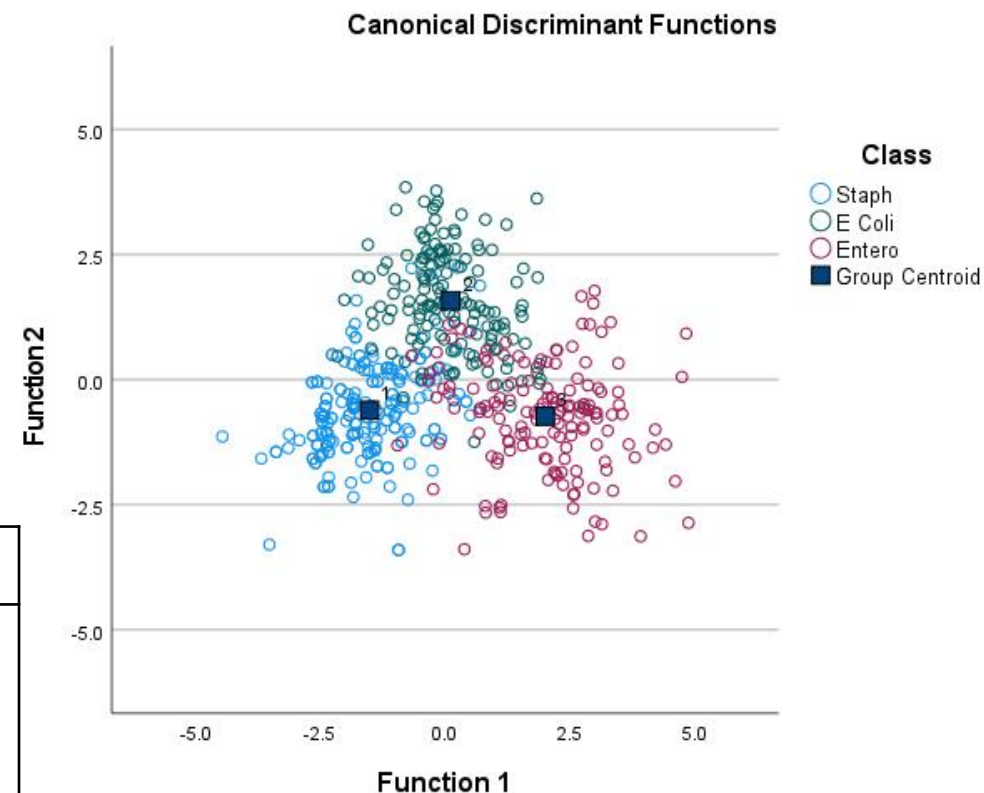
DFA: Sensitivity: 91.37 ± 16.39 % Specificity: 97.46 ± 9.35 %
PLSDA: Sensitivity: 93.13 ± 10.25 % Specificity: 90.60 ± 21.33 %



DFA – Diagnosing a Bacterial Infection in Blood

- Attempting to replicate previous results with:
 - Fewer cells
 - Non-zero background (coming from filter and blood)
- ✓ Average Sensitivity = 80.97 %
- ✓ Average Specificity = 90.8 %*

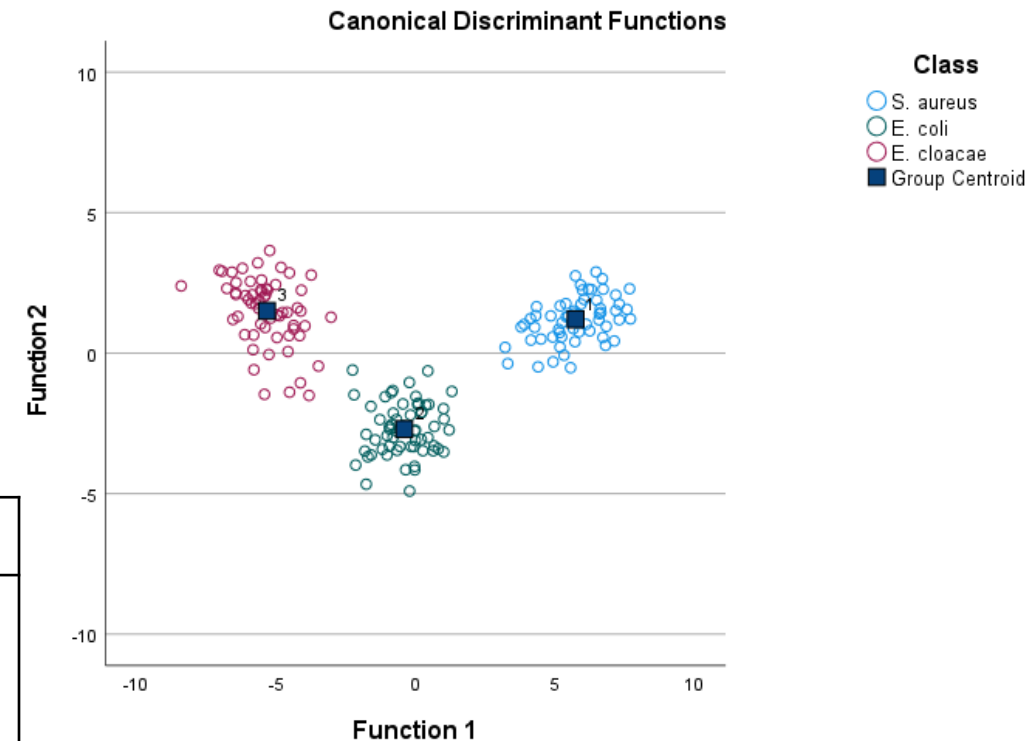
Bacteria	Sensitivity	Specificity	Classification Error
<i>E. coli</i> in sterile blood	78.8 %	90.4 %	15.40 %
<i>S. aureus</i> in sterile blood	86.1 %	89.4 %	12.25 %
<i>E. cloacae</i> in sterile blood	78.0 %	92.5 %	14.75 %



DFA – Diagnosing a Bacterial Infection in Urine

- Attempting to replicate previous results with:
 - Fewer cells
 - Non-zero background (coming from filter and urine)
- ✓ Average Sensitivity = 91.70 %
- ✓ Average Specificity = 95.8 %*

Bacteria	Sensitivity	Specificity	Classification Error
<i>E. coli</i> in sterile urine	96.7 %	98.3 %	2.5 %
<i>S. aureus</i> in sterile urine	91.7 %	91.7 %	8.3 %
<i>E. cloacae</i> in sterile urine	86.7 %	97.5 %	7.9 %



ANN Results – Diagnosing a Bacterial Infection in Blood & Urine

ANN on Bacteria in Blood

- Can discriminate between species with good specificity and variable sensitivity
- Slightly better than DFA
- **Avg Sensitivity: 82.5 %**
- **Avg Specificity: 91.3 %***

Sample Type	Sensitivity	Specificity
Sterile blood containing <i>S. aureus</i>	87.5 %	89.2 %
Sterile blood containing <i>E. coli</i>	79.2 %	91.3 %
Sterile blood containing <i>E. cloacae</i>	80.8 %	93.3 %

ANN on Bacteria in Urine

- Can discriminate between species with high specificity and high sensitivity
- Better than DFA
- **Avg Sensitivity: 95.8 %**
- **Avg Specificity: 98.9 %***

Sample Type	Sensitivity	Specificity
Sterile Urine containing <i>S. aureus</i>	98.9 %	100 %
Sterile Urine containing <i>E. coli</i>	89.5 %	99.6 %
Sterile Urine containing <i>E. cloacae</i>	99.1 %	97.1 %

Parameters:

Test size = 20% of data (80% is used for the model)

Hidden layers = 1

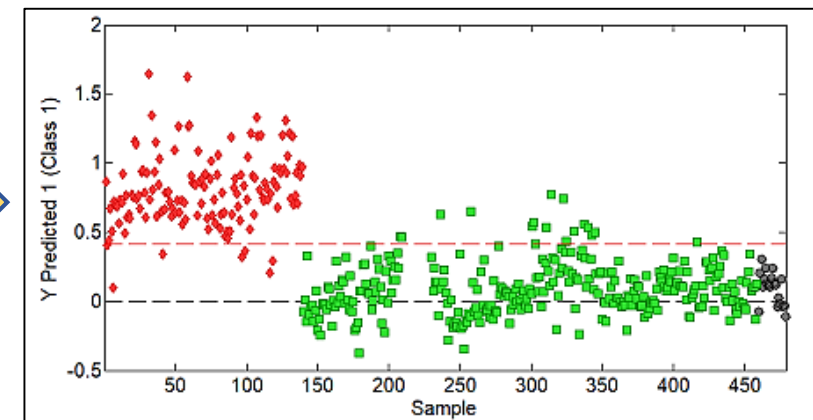
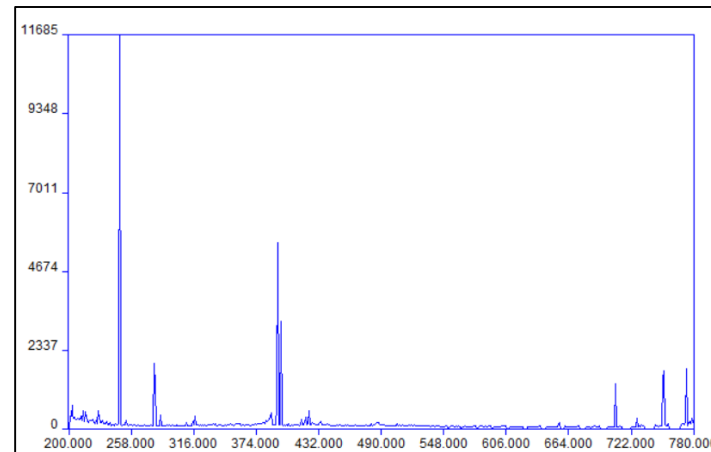
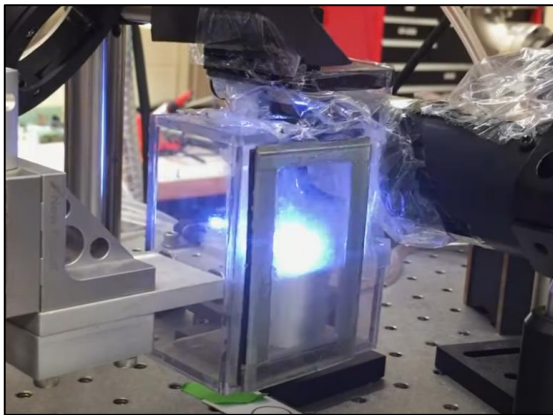
Batch size = 32

Epochs: determined by algorithm (based on loss curve)

Optimizing: hidden nodes & patience for each data set

Conclusions

- ✓ We have determined that spectra of blood/urine and bacteria are different
- ✓ We can reliably detect bacteria in sterile blood and urine
- ✓ DFA and ANN shows promising results for discrimination between species present in blood



Detection and Classification of Bacterial Cells After Centrifugation and Filtration of Liquid Specimens Using Laser-Induced Breakdown Spectroscopy

Applied Spectroscopy
2022, Vol. 0(0) 1–11
© The Author(s) 2022



Article reuse guidelines:
sagepub.com/journals-permissions
DOI: 10.1177/00037028221092789
journals.sagepub.com/home/asp



Emma J. Blanchette¹, Sydney C. Sleiman¹, Haiqa Arain¹, Alayna Tieu¹, Chloe L. Clement¹, Griffin C. Howson¹, Emily A. Tracey¹, Hadia Malik¹, Jeremy C. Marvin¹ and Steven J. Rehse¹ 

Special Issue

Applied
Spectroscopy




Silver Microparticle-Enhanced Laser-Induced Breakdown Spectroscopy

Applied Spectroscopy
2022, Vol. 0(0) 1–12
© The Author(s) 2022



Article reuse guidelines:
sagepub.com/journals-permissions
DOI: 10.1177/00037028221096483
journals.sagepub.com/home/asp



Jeremy C. Marvin¹, Emma J. Blanchette¹, Sydney C. Sleiman¹, Haiqa Arain¹, Emily A. Tracey¹ and Steven J. Rehse¹ 

Acknowledgements

- Advisor: Dr. Steven Rehse
- Colleagues:
 - Haiqa Arain
 - Emily Tracey
 - Griffin Howson
 - Alayna Tieu
 - Chloe Clement
 - Hadia Malik
 - Caroline Alionte
 - Grace Johnson
 - August Baughan
- Sponsors:
 - Natural Sciences and Engineering Research Council of Canada (NSERC)
 - University of Windsor Outstanding Scholars



Commercial benchtop systems have been built...

Coriosity Laser Imager - Elemission



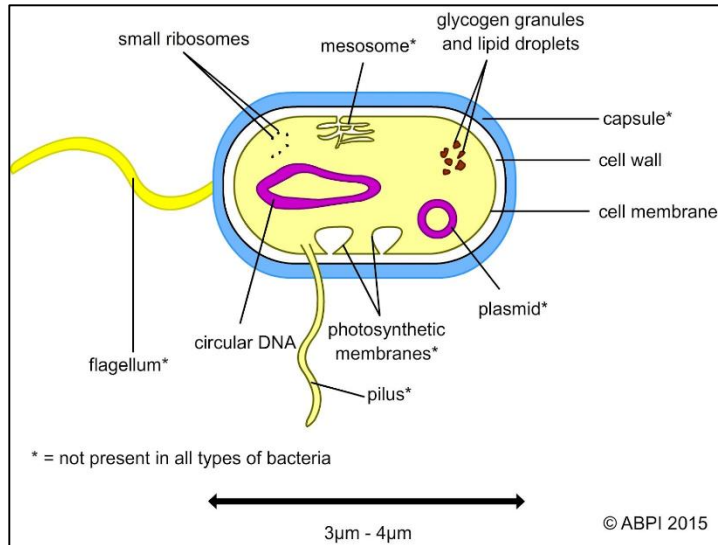
J200 – Applied Spectra



ChemReveal LIBS Desktop Elemental Analyzer – TSO

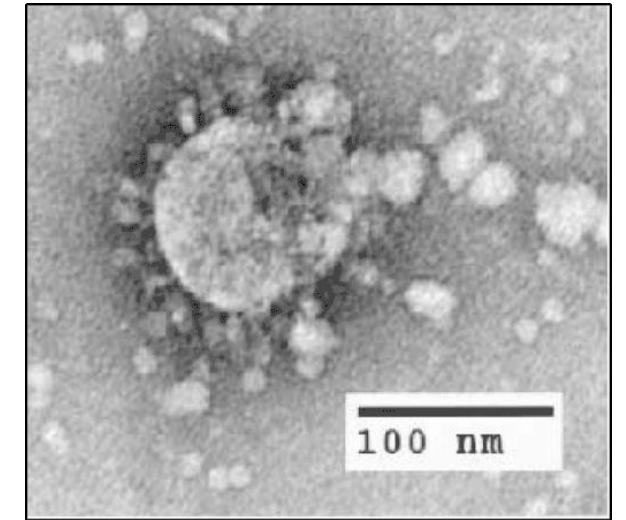


LIBS on Viruses? Size matters!



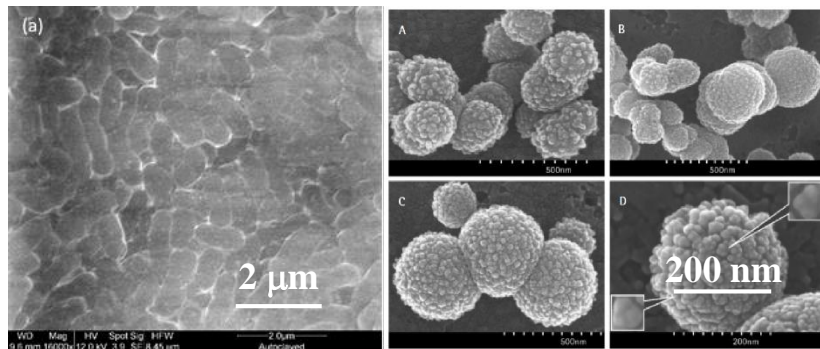
<https://www.abpischools.org.uk/topic/pathogens/2/1>

- Bacteria are ~1-3 µm
- Corona viruses are ~100-300 nm
- Volume is roughly 1,000 – 10,000 lower!
- Also, viruses are not rich / don't contain trace metals, as bacteria do.



C.S. Goldsmith, CDC,

<https://www.cdc.gov/sars/lab/images.html>



SEM of *E. coli* specimen from our lab

vs.

SEM of SARS coronavirus, Antiviral Therapy 9:287-289, 2004

Two known papers on the use of LIBS to identify viruses:

(full details in S.J. Rehse, Spectrochimica Acta Part B 154 (2019) 50–69)

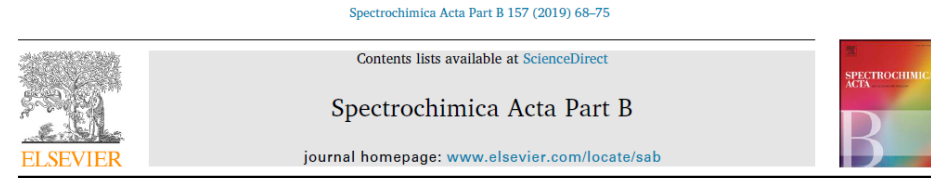
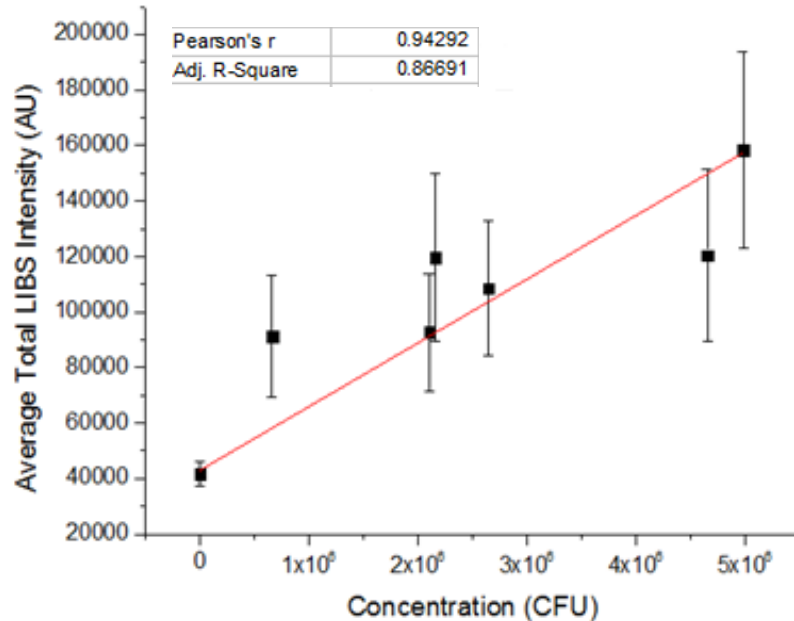
detect the presences of an MS-2 bacteriophage (smallpox surrogate)

J.L. Gottfried, Anal. Bioanal. Chem. 400 (2011) 3289–3301,

differentiation with LIBS of four strains of *hantavirus*

R.A. Multari et al., Appl. Opt. 51 (2012) B57–B64,

Metal Cone: Limit of Detection

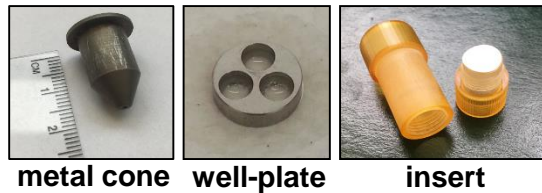


Concentration of bacterial specimens during centrifugation prior to laser-induced breakdown spectroscopy analysis^{*}

Alexandra E. Paulick, Dylan J. Malenfant, Steven J. Rehse^{*}
 Department of Physics, University of Windsor, 401 Sunset Avenue, Windsor, Ontario N9B 3P4, Canada

LOD ~ 11 000 CFU per laser ablation event

Recall:
 Well-plate → LOD ~ 50 000 CFU per laser ablation event
 Insert → LOD ~ 90 000 CFU per laser ablation event



metal cone

well-plate

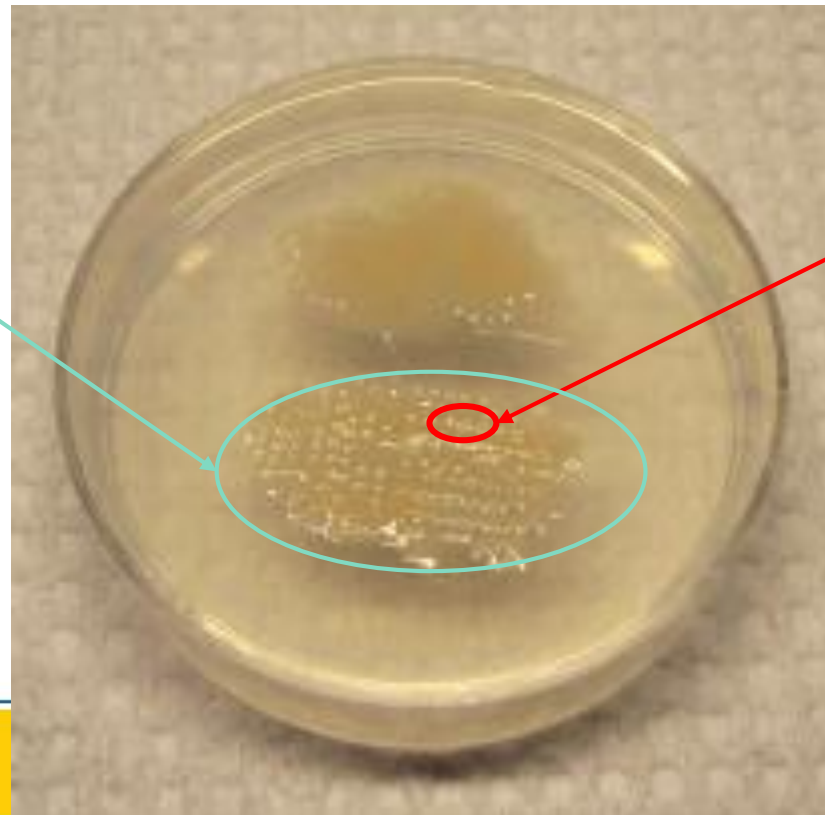
insert



Bacteria on Agar – Initial DFA Results

- Bacteria was ablated on nutrient-free agar surface providing essentially zero background signal

Bacteria film deposited
on agar



Ablation craters



Confirming the Different Spectral Fingerprints With ANN

- ANN was used to confirm the previous result
- 3 species of bacteria and several samples of sterile blood were input into our ANN
- ✓ Sterile blood is classified correctly 100% of the time
- ✓ We can reliably detect bacteria in blood

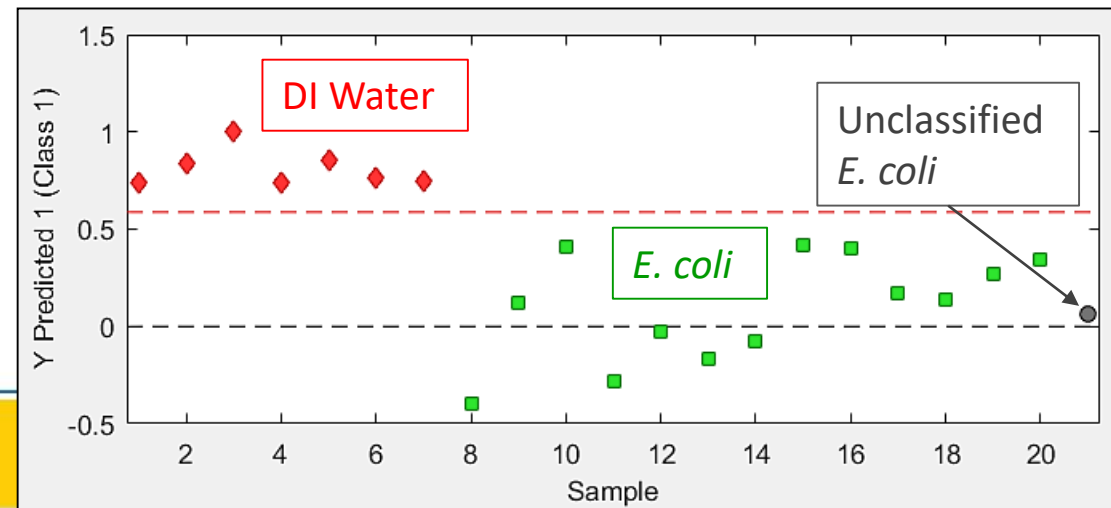
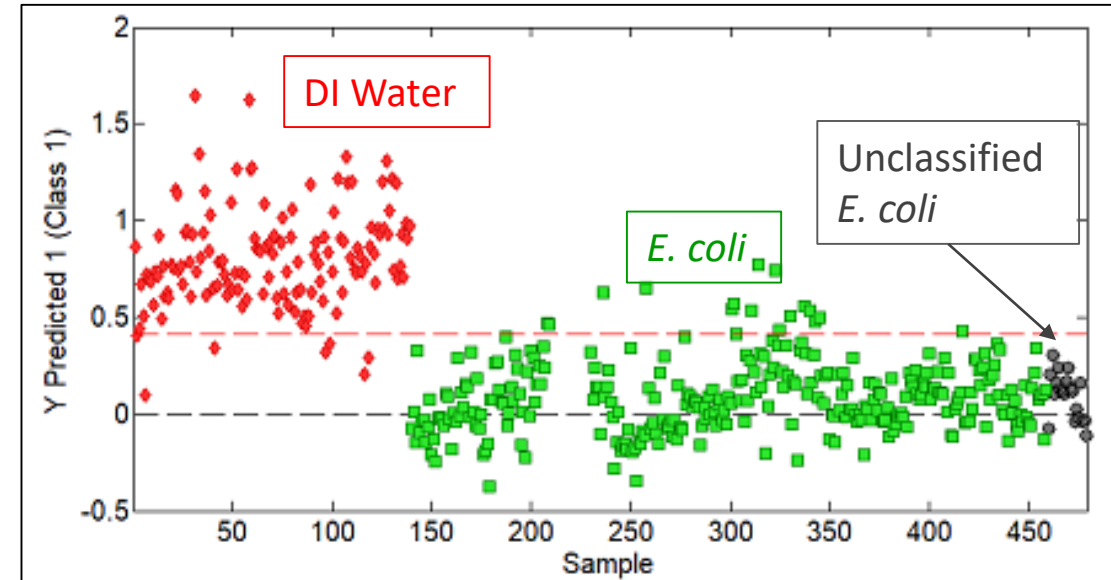
Sample Type	Sensitivity	Specificity
Sterile Blood	100 %	100 %
Sterile blood containing <i>S. aureus</i>	73.33 %	91.23 %
Sterile blood containing <i>E. coli</i>	53.33 %	98.86 %
Sterile blood containing <i>E. cloacae</i>	93.33 %	93.86 %



How do we use the bacterial signal?

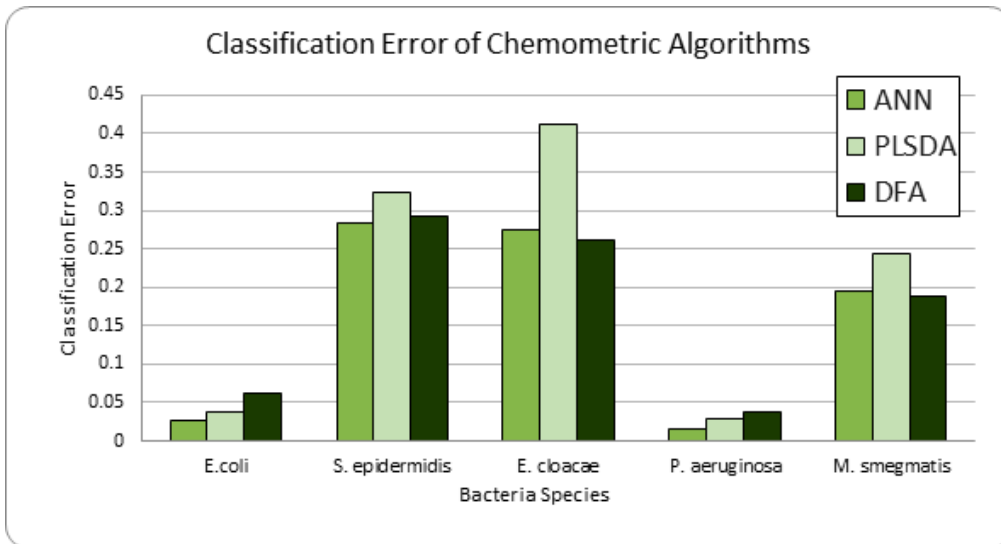
- DETECTION: need to be able to detect the presence of bacteria from sterile sources
- ✓ We can discriminate between single-shot data of bacteria and sterile water with good accuracy¹
- ✓ After summing all single shots on a filter, we can discriminate between bacteria and sterile water reliably¹

	Single-Shot Spectra	Added Spectra
Sensitivity	87%	100%
Specificity	93%	100%



Sensitivity, Specificity, and Classification Error

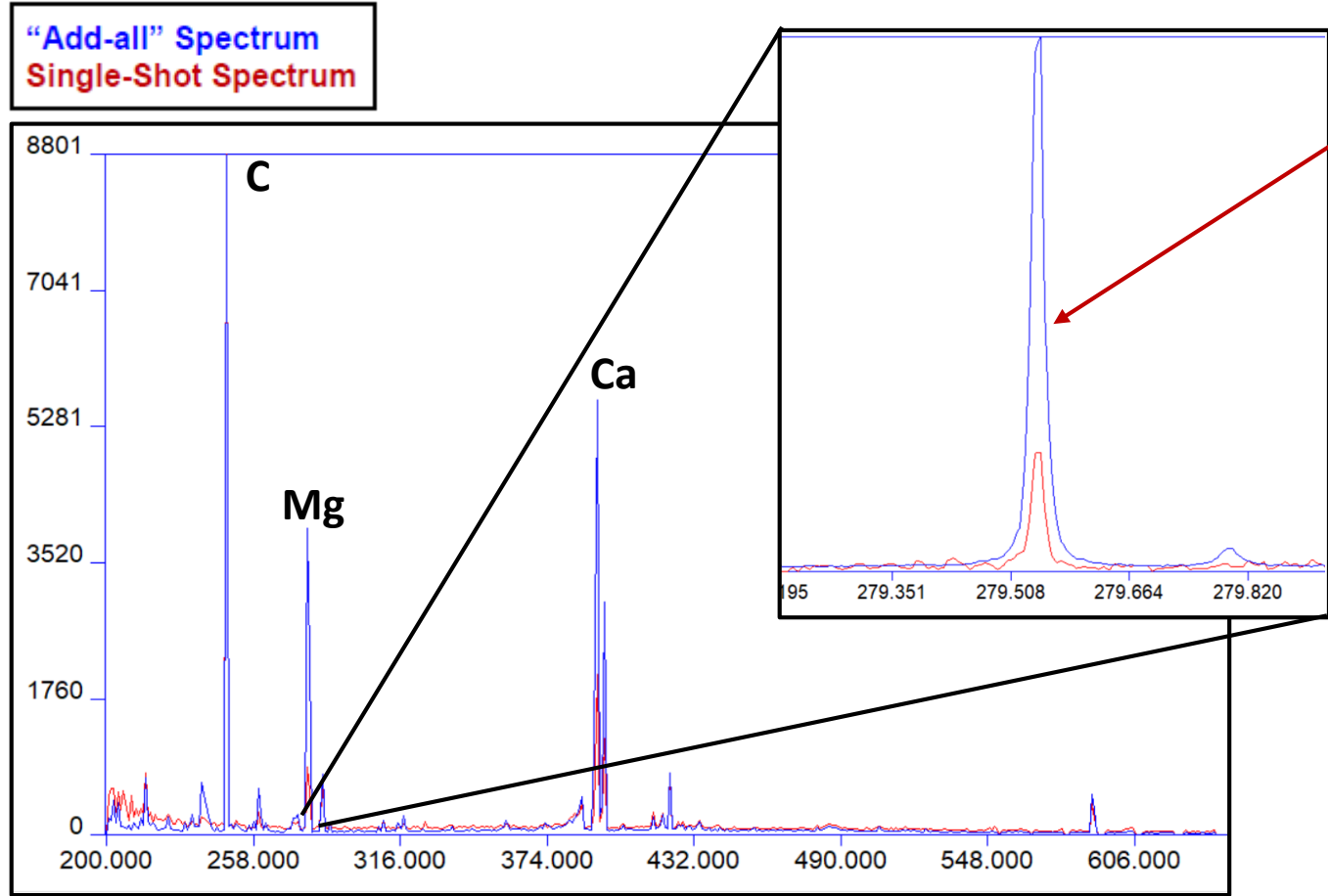
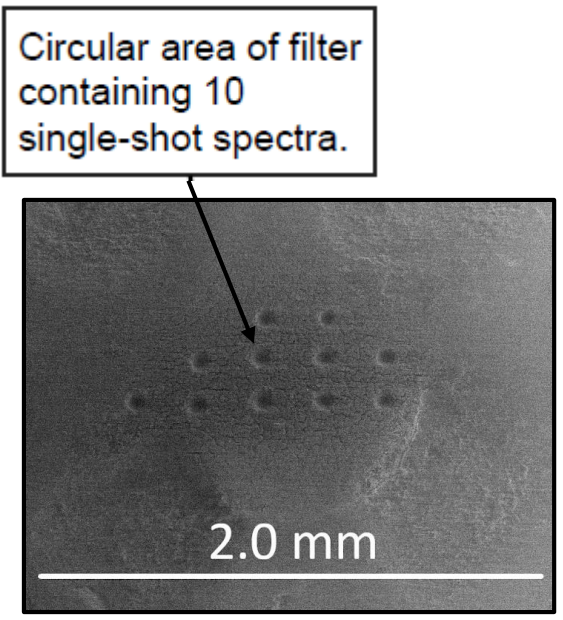
Sensitivity = (True Positives)/(True Positives + False Negatives)
Specificity = (True Negatives)/(True Negatives + False Positives)



The classification error combines the sensitivity and specificity
Classification error = $1 - (\text{sensitivity} + \text{specificity})/2$



Effect of Adding Spectra

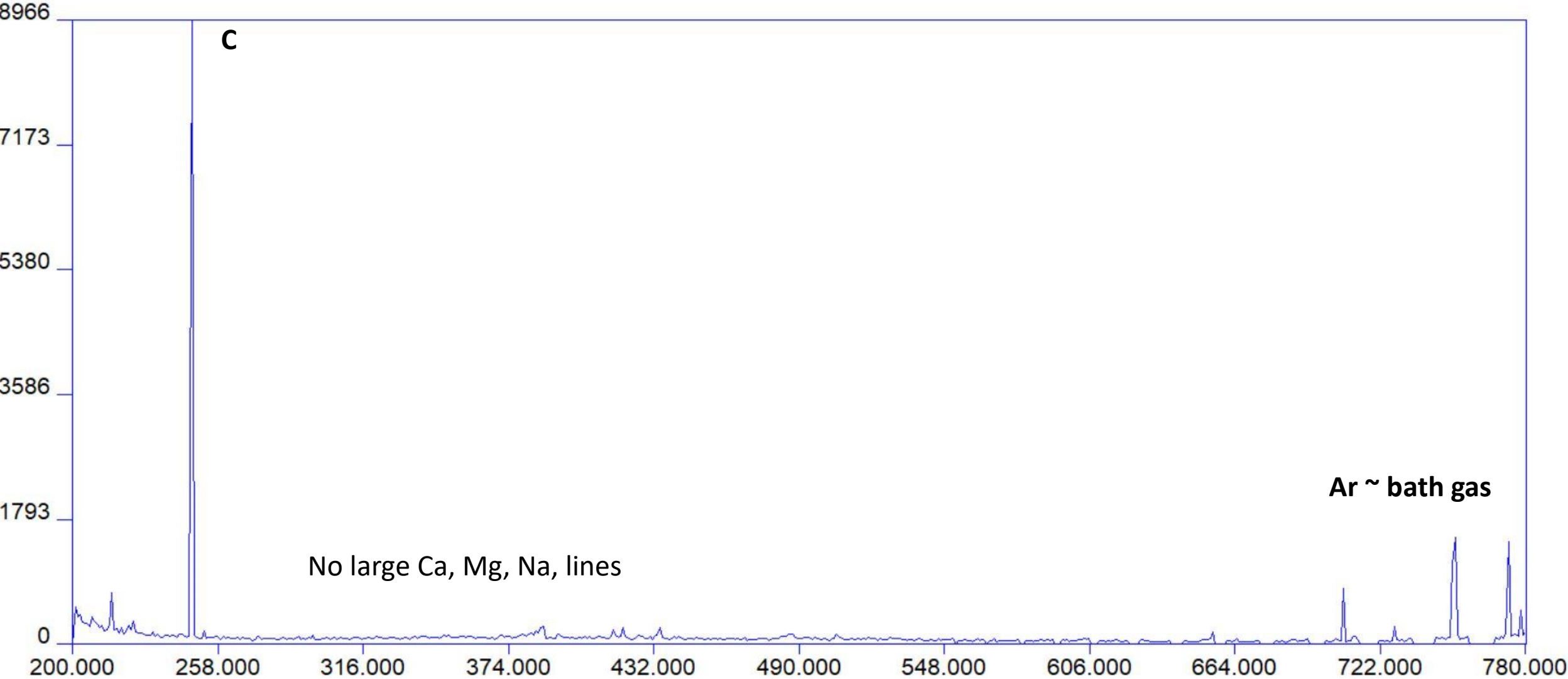


Magnesium 279 nm line has greater intensity

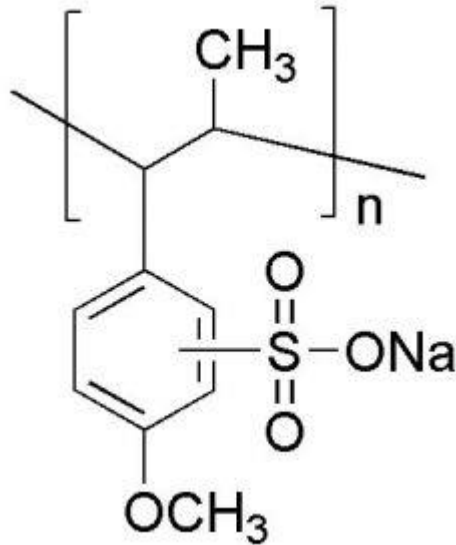
The Add-all spectra increases the signal to noise ratio



Blank Filter Spectrum



Sodium Polyanetholesulfonate (SPS)



- Structure of the blood anti-coagulant; the only thing we see in our spectrum is sodium
- Doesn't appear to affect detection of bacteria



Image of Plasma

