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Theoretical Model for Temperature Distribution Resulting from CW-Laser Radiation Heats up Tumor Tissues

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ABSTRACT

Continuous wave laser radiation is used to heat up tumor tissue where the cells in this tissue are more sensitive to heating. Temperature distribution is connected to hyper thermal therapy. First, the nonlinear bio-heat transfer equation of Penne's type in three dimensions was solved using the approximate analytical Adomian Decomposition Method (ADM), where the thermal conductivity of tissue and blood perfusion are temperature dependent. Next, this model was applied to study the effect of parameters such as laser power and irradiated time, and impact of the parameters on laser heat distribution within the tumor tissue. It was found out that, the temperature of the tissue increases with laser power and irradiation time. Finally, important effects in the simulation on laser thermal therapy are discussed.

Keywords: Bio-Heat Equation, Laser Thermal Therapy, Tumor Tissue, Blood Perfusion, Adomian Decomposition Method (ADM).

1. INTRODUCTION

Laser systems become important medical equipment that can be used in medical surgery to treat or remove tissues, as well as to diagnosis cancer. Various types of laser have been used in such processes in the medical industry such as CO_2 lasers, diode lasers, dye lasers, excimer lasers, fiber lasers, gas lasers etc. [1].

The continuous wave (CW) lasers have limited usage because collateral damage on living tissues needs to be controlled or eliminated. This has prompted the use of pulse wave lasers in medical imaging and therapy applications. Pulse lasers offer the advantage of target delivery of heat energy, i.e. minimizing the spread of heat to the surrounding healthy tissues [2]. Thermal therapy treatment for cancer is a kind of treatment, in which tissue is exposed to high temperatures to damage cancer cells with minimal injury to the surrounding tissues, making the treatment is much safer than classical treatment therapies [3]. Laser beam interaction with tissues is categorized into several mechanisms which includes photo-mechanical, photo-thermal and photo-chemical [4, 5]. The photo-thermal effect is considered the most observed mechanism. In fact, majority of the tumor therapy through radiation techniques use either CW laser beam or long pulsed laser. The CW laser beam will produce more residual thermal damage to the surrounding than short pulsed CO_2 laser but less depth of ablation. However, many researchers found the ability of pulse laser to produce highly localized heating at the desired location, which has made the pulse laser to be more efficient for tumor irradiation than the CW lasers [6,7].

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In this work, the axial and radial temperature distribution resulted from CW-Laser radiation heats up tumor tissues was modeled theoretically**.** The obtained results were compared with recent practical and theoretical studies [8, 9]. Well-established studies have shown that the tissues are sensitive to heating and the temperature required to kill the tumor depends on the irradiation time and laser power [1, 4]. CO_2 laser is the most widely used in the field of dermatology, owing to its suitable wavelength in the mid-infrared (at 10,600 nm) and absorption coefficient in water (around 500 m^{-1}). Therefore, all incident beam energy is well absorbing in tissue water and prevents deeper tissue damage, which makes the CO_2 laser as the safest system [10]. Many experiments have found out that temperature elevation to at least 56 C° for one second or more should be sufficient to kill cancer cells [11, 8]. Thus, there is no consensus in the literature on the exact extent of the temperature rise and the exposure time necessary for complete tumor ablation. In present model, it is assumed that, the beam applies heat at a point in the center of tumor only. In this study, the tissue blackbody intensity is much smaller than the incident laser intensity hence the radiation emission from the tumor tissue was neglected [2].

2. MATHEMATICAL MODEL

In this model, the authors utilize the non-liner Penne's bio-heat equation in three dimensions i.e. the general heat diffusion equation with additional terms for perfusion of blood, thermal conductivity, as temperature-dependent functions [12, 13] as follows:

$$\rho_t c_t \frac{\partial T(r,t)}{\partial t} = \nabla\kappa(T)\nabla T(r,t) - \omega_b(T)\rho_b c_b(T - T_a) + Q_m + Q(r,t) \tag{1}$$

Here ρ_t and c_t are the density and specific heat of tissue, respectively, ρ_b and c_b denotes the density and specific heat of blood, r contains the Cartesian coordinates x, y. $\kappa(T)$ is the temperature-dependent thermal conductivity; and $\omega_b(T)$ is the blood perfusion. The value of blood perfusion represents the blood flow rate per unit tissue volume. T_a is the blood temperature in the arteries supplying the tissue and it is often treated as a constant at 37 C°. $T(r,t)$ is the tissue temperature Q_m is the metabolic heat generation, and $Q(r,t)$ is the distributed volumetric heat source due to externally applied spatial heating. Laser heat flux is considered as a heat source imposed on the top side of the slab (see Figure 1).

$$Q(r,t) = \frac{2\alpha P_o e^{-\alpha z}}{\pi\omega_o^2} e^{-2\frac{(x^2+y^2)}{\omega_o^2}} \tag{2}$$

Where α is the tissue absorption coefficient, P_o is the laser power intensity in watts at the surface, ω_o is the beam waist [14, 15].

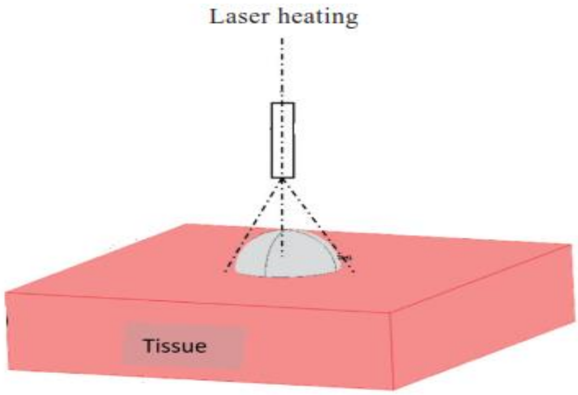

Figure 1. A schematic diagram of a laser-irradiated tumor tissue.

The left-hand side of Equation (1) represents the rate of thermal energy which absorbed per volume unit, where the biological tissue is included. According to Fourier's law, the first term in the right-hand side is the rate of heat conduction. In addition, the second term represents the rate of heat convection through blood vessels. The convective heat exchanges by blood circulation insures thermal regulation throughout the body. Blood enters the tissue at the arterial temperature T_a, exchanges a certain amount of energy which is equivalent to $\omega_b(T)\rho_b c_b(T - T_a)$ and bring the blood temperature to the level. In this work, $\kappa(T)$ the thermal conductivity and $\omega_b(T)$ blood perfusion rate are assumed to be linear function of the temperature [12, 16-18]:

$$\kappa(T) = \kappa_a + \beta(T - T_a) \tag{3}$$

$$\kappa_a = 639\ W/mK, \quad \beta = -0.000758/K, \quad T_a = 300\ K$$

$$\omega_b(T) = a_1 + a_2 T \tag{4}$$

Where $a_1 = 0.0005$ and $a_2 = 0.0001$

The distribution of heat flow in a three-dimensional space is governed by the following initial boundary value problem;

$$0 \leq x \leq a\,, 0 \leq y \leq b\,, 0 \leq z \leq L$$

Boundary conditions,
$$\left.\begin{aligned} T(0, y, z, t) = u(a, y, z, t) = T_o \\ T(x, 0, z, t) = u(x, b, z, t) = T_o \\ T(x, y, 0, t) = u(x, y, L, t) = T_o \end{aligned}\right\} \tag{5}$$

And, initial conditions,
$$T(\vec{r}, 0) = T_o \tag{6}$$

Where, $T \equiv T(\vec{r},t)$ is the temperature of any point located at the position $\vec{r}$ of a rectangular volume at any time t.

2.1 Solution of Equation (1) by (ADM)

Adomian Decomposition Method [16,19], known as semi-analytical (or approximate analytical), have been proposed for solving nonlinear problems. This method was first developed by Adomian [20] and has been used by many researchers [21]. Several applications of this method has been reported. The method has been employed to solve linear and nonlinear equations in physics [22].

The formulation of (ADM) [19] for solving equation (1) is as follows:
Dividing equation (1) by $\rho_t c_t$, one can get;

$$\frac{\partial T(r,t)}{\partial t} = \frac{1}{\rho_t c_t} \nabla\kappa(T)\nabla T(r,t) - \frac{\omega_b(T)\rho_b c_b(T-T_a)}{\rho_t c_t} + \frac{Q_m+Q}{\rho_t c_t} \tag{7}$$

By rewriting equation (7) in an operator form by;

$$L(T) = N(T)$$

Where, the differential operator L is given by:

$$L(.) = \frac{d}{dt}(.)$$

And;

$$N(T) = \frac{1}{\rho_t c_t}\left[\frac{\partial}{\partial x}\left(\kappa(T)\frac{\partial T}{\partial x}\right) + S(T) + Q(r,t)\right] \tag{8-a}$$

$$M(T) = \frac{1}{\rho_t c_t}\left[\frac{\partial}{\partial y}\left(\kappa(T)\frac{\partial T}{\partial y}\right)\right] \tag{8-b}$$

$$F(T) = \frac{1}{\rho_t c_t}\left[\frac{\partial}{\partial z}\left(\kappa(T)\frac{\partial T}{\partial z}\right)\right] \tag{8-c}$$

With;

$$S(T) = \omega_b(T)\rho_b c_b(T - T_a) \tag{9}$$

The inverse operator L^{-1} is considered as integral operator defined by;

$$L^{-1}(.) = \int_0^t (.)dt \tag{10}$$

By operating L^{-1} in the righthand side of equations (8-a, b, c) and using of the initial conditions,

T(x ,y, z, 0)= 37 C^{o} , leads to ;

$$T(x,y,z,t) = T(x,y,z,0) + L^{-1}[N(T) + M(T) + F(T)] \tag{11}$$

The solution $T(x,y,z,t)$ introduced by ADM in an infinite series form as;

$$T(x,y,z,t) = \sum_0^\infty T_n(x,y,z,t) \tag{12}$$

where, the components $T_n(x,y,z,t)$ are determined recurrently, the nonlinear operators $N(T), M(T), F(T)$ can be decomposed into an infinite series of polynomials which are given by ;

$$N(T) = \sum_{n=0}^\infty A_n \;; \qquad M(T) = \sum_{n=0}^\infty B_n \;; \quad F(T) = \sum_{n=0}^\infty C_n$$

where A_n , B_n , C_n are the Adomian polynomials which has been introduced by the Adomian himself by the formula.

$$A_n(T_0, T_1, T_2, \dots, T_{n-1}) = \frac{1}{n!}\frac{d^n}{d\lambda^n}\left[N\left(\sum_{i=0}^n \lambda^i T_i\right)\right]_{\lambda=0} \qquad n = 0,1,2,\dots \tag{13-a}$$

$$B_n(T_0, T_1, T_2, \dots, T_{n-1}) = \frac{1}{n!}\frac{d^n}{d\lambda^n}\left[M\left(\sum_{i=0}^n \lambda^i T_i\right)\right]_{\lambda=0} \tag{13-b}$$

$$C_n(T_0, T_1, T_2, \dots, T_{n-1}) = \frac{1}{n!}\frac{d^n}{d\lambda^n}\left[F\left(\sum_{i=0}^n \lambda^i T_i\right)\right]_{\lambda=0} \tag{13-c}$$

If the above equations are used (8-13),

$$T(x,y,z,t) \ = T_0(x,y,z,0) + L^{-1}\left[\sum_{i=0}^\infty (A_n + B_n + C_n)\right] \tag{14}$$

According to Adomian, $T_0(x,y,z,0)$ is identified with the following recurrence,

$$T_{n+1}(x,y,z,t) = L^{-1}(A_n + B_n + C_n)\,, \quad n \geq 0 \tag{15}$$

The solution will be approximated by a series of the form;

$$\Phi_N(x,y,z,t) = \sum_0^N T_n(x,y,z,t) \tag{16}$$

So that a series solution for equation (1) is obtained.

By assuming the thermal conductivity of tissue and blood perfusion are temperature dependent, the generated solution is in the general form. The solution is more realistic as compared with the method of simplifying the physical problems [12] because the method does not resort to linearization or assumption of weak nonlinearity [19].

3. RESULT AND DISCUSSION

When a tumor tissue is subjected to CO_2 laser beam at specific wave length, the light penetrates into a certain distance (nearly 15 – 20 μm) [23,24]. The power absorbed in the tissue will be changed to heat, which transports through skin by heat conduction. Cell proteins as well as the RNA, DNA and all the cell contents begin to dissolve at a temperature of 40 C. Therefore, the laser reaction with the tissue can cause tissue necrosis, blood coagulation and change in the structure. The change depends on laser power density, surface area subjected to the radiation, the wave length and speed of laser diffusion through the tissue [25, 26, 27]. Therefore, it can be said that thermotherapy can affect tissue temperature and its regulation.

In the present work, temperature distributions in a tissue medium during a (CW) laser irradiation has been obtained semi-analytically using ADM. Radial and axial temperature distribution in three dimensions were obtained in tumor tissue samples for the case of CO_2 laser beam with wavelength of 10.6 μm to treat a skin tissue of $2 \times 2\ mm^2$ with a thickness of 4 mm There is swelling on the skin surface of diameter 1 mm. The laser beam subjected to the tumor circular position approximates to the surface area ($\approx 12\ mm^2$). In particular, $z(m)$ represents depth into the tumor tissue, so that $z = 0$ at the surface and $z > 0$ depth inside the tumor tissue. Furthermore, $r(m)$ represents the transverse distance which is the distance from the beam axis. The tumor irradiation technique used continuous wave (CW) or long pulsed laser which has recently become preferable for this application. The ability to produce high localized heating at the desired location has made the CW lasers to be more attractive in heating tumor tissue using suitable energy input and irradiation time. The constants of laser source and tumor tissue in the Tables 1 and 2 were used in this model [8].

Table 1 Specifications of laser source CO_2 [8]

Parameters	Value
Wavelength	$10.6\ \mu m$
Divergence	$2\ mrad$
Output beam diameter	$6\ mm$
Output mode	$TEMoo$
Output power level in (CW) mode	(1-50) $watt$
Max. output power	70 $watt\ max$

Table 2 Constants and symbols used in this study [9]

Description	Symbol	Value
Density of blood	ρ_b	1000 Kg/m^3
Specific heat of blood	C_b	4200 $J/Kg\ .K$
Arterial blood temperature	T_b	37 C°
Thermal conductivity of tumor	K_t	0.5 $W/m\ .K$
Density of tumor	ρ_t	1050 kg/m^3
Specific heat of tumor	C_t	3600 $J/kg\ .K$
Blood perfusion rate of tumor	ω_b	$6x10^{-3}/s$
Metabolic heat source	Q_m	33800 W/m^3
External heat source	Q	W/m^3(Equation 11)
Body core temperature	To	37 C°
Absorption coefficient	A	500 cm^{-1}
Power	P_o	W
Spot size	$\omega(z)$	mm
Spot area		mm^2

The following problems are studied via the solution of Equation 1:

i. Surface temperature distribution in three dimensions has located in the middle of the treated area using the estimated program. This area is explained previously in Figure 2.
ii. The relation between the heat distribution in tumor tissue and the penetration depth of the laser irradiation is discussed. It can be noticed that the temperature increases when the laser power increases. In addition, highest temperature is at the tumor surface as in Figure 3. These results agree with the previous studies [23, 8].
iii. The relation between heat distribution in tumor tissue and laser exposure time is discussed. The highest temperature is at the longest time of exposure and it decreases gradually as depth of the tumor increases, as seen in Figure (4). This result agrees with other studies [8, 9].
iv. The relation between heat distribution and depth in the tumor tissue is given in three dimensions as shown in Figure 5. The laser power and exposure time are fixed while spot size of laser beam is shown in the figure. It is clear that the temperature of tumor is inversely proportional with spot size of the laser beam. This result agrees with those obtained by other researchers [8].
v. Filled temperature contours for the case of laser beam focused on the surface of tumor tissue represents the relation between spot size of laser beam and the temperature. It is noticed that in Figure 6, the temperature is inversely proportioned with the spot size of the laser beam. The temperature is at the highest level when the spot size is at the lowest level.

The obtained results indicate that the ideal use of laser system must be carried out after the relation between the laser beam power, spot size and the biology of the tumor tissue is understood. On the other hand, the understanding of the effective physical factors in the laser power which have great heat role, i.e., controlling with unwanted effects.

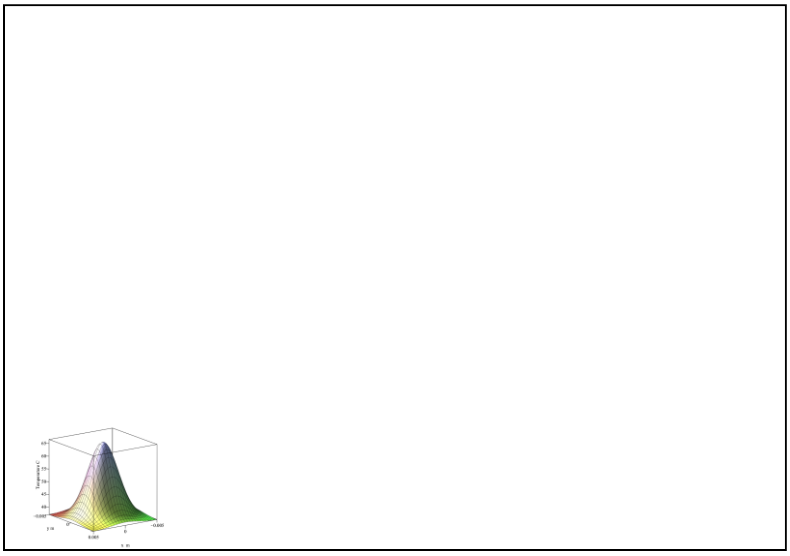

Figure 2. Surface temperature distribution in three dimensions taken from the middle of the work piece obtained from the computer program at irradiation time t=1sec, laser power 10 W.

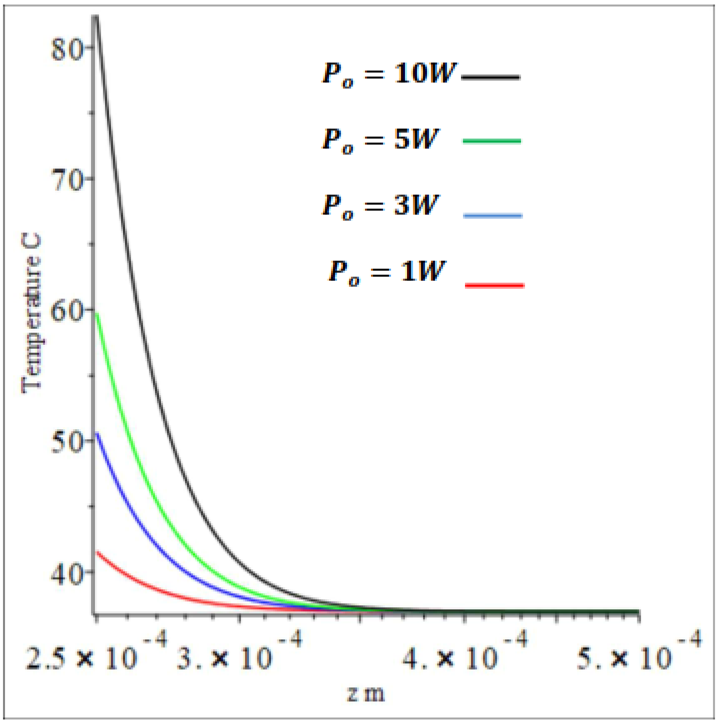

Figure 3. Radial temperature distribution with depth into the tumor tissue z for different laser power P_o at the center of the laser beam band (r = 0) and irradiation time t = 0.5 sec.

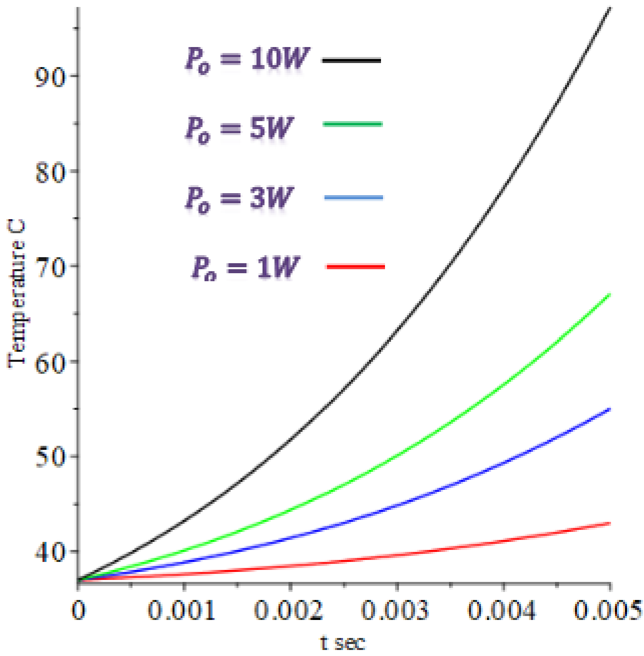

Figure 4. Radial temperature distribution against irradiation time t for beam focusing at the surface of tumor tissue $z = 0$ with different laser power P_o and at the center of the laser beam band (r = 0).

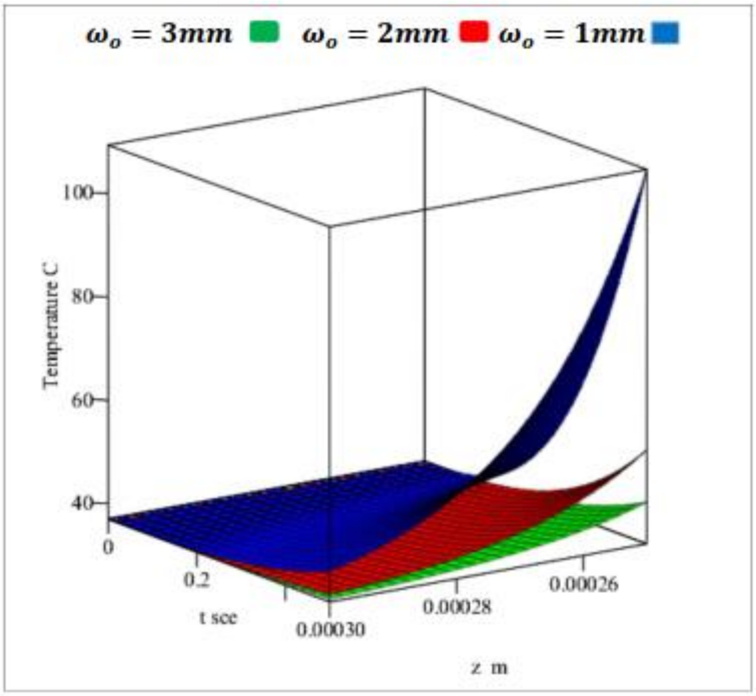

Figure 5. The relation between temperature against irradiation time and penetration depth in to the tumor tissue when the laser power is (1 W) for different spot size of the laser beam.

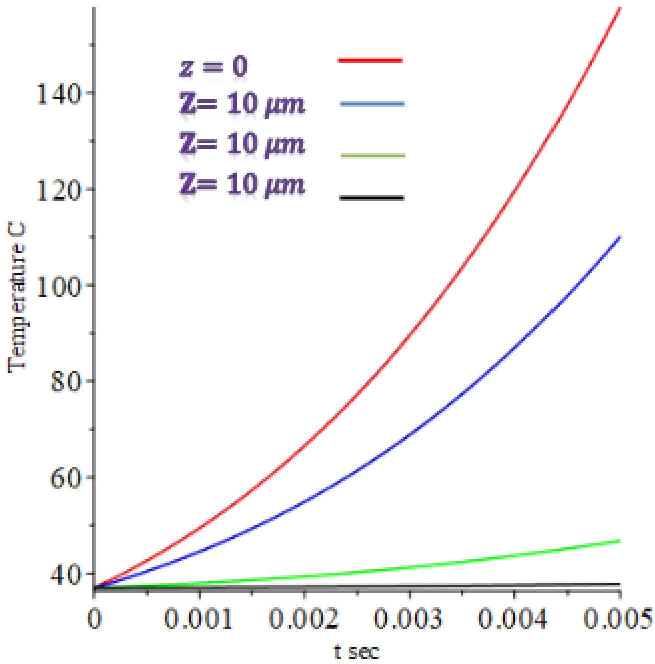

Figure 6. Radial temperature response against irradiation time for different penetration depths in to the tumor tissue for spot size = 2 mm and laser power 5 W.

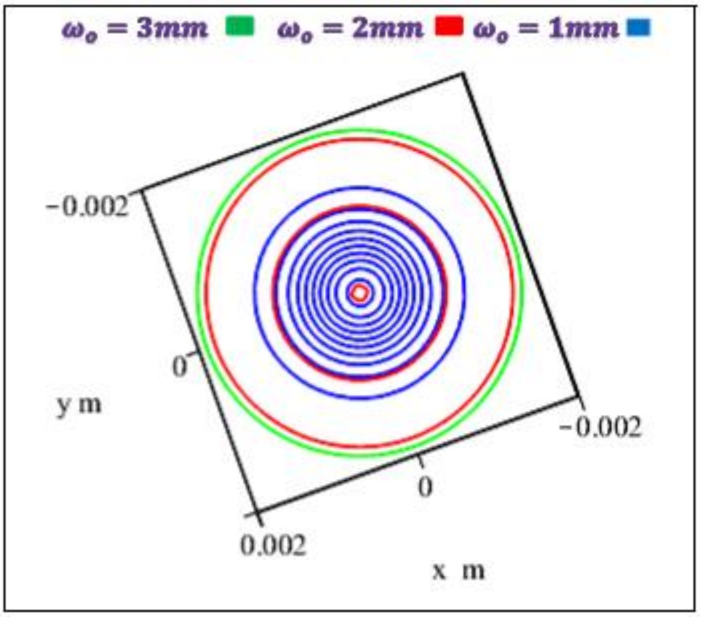

Figure 7. Filled temperature contours, represent the relation between spot size of laser beam and temperature, for the case of laser beam focused on the surface of tumor tissue.

4. CONCLUSIONS

Result of this study is concentrated on the physical features that related to the reaction of the (CW) beam of CO_2 laser with a tumor tissue and to understand the biological effects. Important conclusions from the theoretical study are drawn, after comparing the results with previous practical and theoretical results.

In case of using high power 5 W –10W, after fixed the exposure time, the depth inside the tissue has increased. However, the opposite results were shown in the low power status 1 W - 3 W. While, using different exposure time with constant power density of laser, the tissue damages will increase as the exposure time increases. It is very important to decrease the un-desired side effect as much as possible. The high-power density of CO_2 laser in thermal therapy can lead to damage in the tissue.

Moreover, using ADM process by building the required program makes the process more actual when there are less summations. The process does not require long measuring hence reduces the time wasting. The findings encourage the authors to study the pulses laser therapy using the same mathematical model.

For future study, tumor can be indirect heating with low power density of radiation using gold nano-particles based on Plasmon Resonance Phenomenon (PRP). This is to increase possibility by solving the space and the time dependent bio-heat equation with different conditions using the same mathematical treatment.

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REFERENCES

[1] K. S. Ganesh, Numerical modeling of heat distribution during laser tissue interaction, Thesis, NIT, Rourkela, INDIA, 2012.
[2] Jaunich, M., Raje, S., Kim, K., Mitra, K., Guo, Z., Int. J. of Heat and Mass Trans. **51** (2008) 5511–5521.
[3] G. Mohit, Analyzing Thermal and Mechanical Effects of Pulsed Laser Irradiation on Tissues, Thesis, IIT Guwahati, INDIA, 2012.
[4] Jacques, S.L., Surg. Clin. N. Am. **72** (1992) 531–558.
[5] Jacques, S.L., Proc. SPIE, (1991) 316–322.
[6] Lim, HS., Biomed, J., Opt. **17** (2012) 12, 8001.
[7] Kofford, M., Lasers in Surgery and Medicine **42** (2010) S22, 1–125.
[8] Baha, T. C. & Jinan, F. M., J. Medenat Alelem college **2**, 8 (2016).
[9] Kawther, M. S., Moustafa, S., J. of Laser in Med. Sci. **5**, 3 (2014).
[10] Omi, T., Numano, K., Laser Ther. **23**, 1 (2014) 49-60.
[11] Mhamed, N., Mohammed, B., Emmanuel, K., Karim, El. G., & Ahmed, L., Inter. J. of Pharma Med. and Bio. Sci. **5**, 4 (2016).
[12] Kawthar, S., Nabil, K. & Wesam, B., J. Lasers Med. Sci., **8**, 3 (2017) 118-122.
[13] Ansam, M. S., Amal, F. J. & Alaa, A. J., Al-Nahrain J. Eng. Sci. **20**, 4 (2017) 894-903.
[14] A. H. Faisal, Thesis, Study of CO2 Laser Effect on the Laboratory Rats Skin, College of Sci., Univ. of Basrah, (2014).
[15] Barvinschi, P., Bunoiu, O. M., Romanian Rep. phys. **69**, 2 (2017).
[16] Seyfolah, S., Mohammad, J. N., & Davood, D. G., J. Biomaterials and Tissue Eng. **5** (2015) 532–538.
[17] Bhattacharya, A. and Mahajan, R. L., Physiol. Meas. **24** (2003) 769–783.
[18] Emmanuel, K., Fathi, B. H., Ahmed, L., App. Mat. **4** (2013) 1471-1484.
[19] Rochdi, J., Imed, G., Abderrahman, B., Int. J. Math. Anal. **7**, (2013)15, 725 – 734.
[20] Adomian, G., J. Math. Anal. Appl. **135** (1988) 501-544.
[21] Huifeng, Gu., Zhi-bin, Li., Appl. Math. & Comp. **187** (2007) 748-755.
[22] Sharvari, K., Kalyanrao, T., Int. J. of Eng., Contemporary Math. & Sci. **1**, 2 (2015)
[23] Dustin, G. M., William, P. R., XVlll, Proc . of SplE **64** (2007) 3506.
[24] R. H. Ossoff & L. Reinisch, Laser Surgery: Basic Principles and Safety Considerations, C.V. Mosby Company, St. Louis, (1986).
[25] L. Fodor, " Light Tissue Interactions ", Springer-Verlag London Limited, (2011).
[26] P. Davidovits, Physics in Biology and Medicine, Third Edition, Academic Press is an imprint of Elsevier, Elsevier, (2008).
[27] Bergh, A., Nyman, G., Lundeberg, T. & Drevemo, S., Equine and Comparative Exercise Physiology **2**, 1 (2004) 61–69.