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Quantitative transverse flow measurement using OCT speckle decorrelation analysis

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Abstract

We propose an inter-Ascan speckle decorrelation based method that can quantitatively assess blood flow normal to the direction of the OCT imaging beam. To validate this method, we performed a systematic study using both phantom and *in vivo* animal models. Results show that our speckle analysis method can accurately extract transverse flow speed with high spatial and temporal resolution.

Optical coherence tomography (OCT) has been shown to be able to measure sub-surface microvasculature blood flow [1–7]. One widely used approach is optical Doppler tomography (ODT) that extracts Doppler frequency shift or broadening from the OCT signal to deduce blood flow with a component that is along the direction of the incident light beam [1–3]. ODT, however, is not sensitive to the flow in a plane normal to the incident beam. Alternatively, changes in OCT speckle pattern can be used to detect transverse flow without the longitudinal component. It has been shown that, by calculating inter-frame speckle variance of OCT images, speckle variance OCT (svOCT) is highly effective in detecting blood vessels [4, 5] or even flow quantification [6]. However, H. Ren *et al.* demonstrated that svOCT was incapable of quantitatively measuring blood flow [7]. Nevertheless, J. Barton *et al.* used spatial speckle frequency analysis of OCT image to assess flow velocity [8]. Their results show that the high-to-low ratio (HLR) of the spatial frequency of speckle was linearly related to the flow rate. The physical implication of HLR, however, was not straightforward and it was challenging to extract absolute flow rates from HLR. Z.Y. Shen *et al.* recently used an OCT system to image two slightly displaced cross-sections of a flow channel multiple times and then calculated the transverse flow velocity [9]. The scanning protocol used in this study, however, was very different from a conventional OCT scan. Although promising results were obtained from the above-mentioned studies, it still remains challenging to quantify blood flow from speckle features. In our study, we propose an inter-

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Ascan speckle decorrelation method that allows to use conventional OCT scanning protocol for depth resolved quantitative blood flow measurement. The cross-correlation coefficient (XCC) between adjacent Ascans was shown to have an explicit functional dependency on lateral displacement between the sampling points of the Ascans. Based on this finding, we used speckle decorrelation analysis to correct non-constant scanning speed in manually scanned OCT in our previous work [10]. In this study, we used XCC to quantitatively measure sample movement (i.e., flow), given the beam scanning parameters are known. We first theoretically derived the physical origin of the flow-induced speckle pattern change. Afterwards, we conducted experiments using a well-established phantom model to validate our method. We further validated our method using an *in vivo* mouse model.

A Cartesian coordinate system (x, y, z) is used to describe the 3D space in this paper: z indicates the axial direction; x is the direction of the beam scanning; y is the direction normal to x - z plane. In this study, pure transverse flow in a direction normal to the beam scanning is considered; i.e., the flow is along y axis. The three dimensional (3D) field reflectivity at an arbitrary time t is denoted as $r_s(x, y, z, t)$ and the corresponding OCT signal over the 3D space can be considered as the convolution of $r_s(x, y, z, t)$ with OCT system's point spread function (PSF) denoted as $h(x, y, z)$. Assuming an Ascan $I_1(z)$ is obtained at a spatial location (x_0, y_0) at time t_0 with infinitesimally short time to acquire the Ascan, we can express $I_1(z)$ as:

$$I_1(z) = [r_s(x, y, z, t_0) * h(x, y, z)]|_{x=x_0, y=y_0} \quad (1)$$

In Eq (1), $*$ indicates 3D convolution.

Consider a subsequent Ascan $I_2(z)$ obtained at time $t_0 + t$. As the beam scans along axis x , the sampling point now becomes $(x_0 + \delta x, y_0)$ and $I_2(z)$ can be expressed as:

$$I_2(z) = [r_s(x, y, z, t_0 + \Delta t) * h(x, y, z)]|_{x=x_0 + \delta x, y=y_0} \quad (2)$$

Due to the flow, the 3D field reflectivity of flowing blood at time $t_0 + t$ is a shifted version of the 3D field reflectivity at time t_0 , as shown in Eq (3).

$$r_s(x, y, z, t_0 + \Delta t) = r_s(x, y - \delta y, z, t_0) \quad (3)$$

In Eq (3), y displacement δy equals $v \cdot t$ where v is the flow speed.

Writing the 3D convolution in Eq (2) explicitly and plugging Eq (3) into Eq (2), we can re-write Eq (2) as:

$$I_2(z) = [r_s(x, y, z, t_0) * h(x, y, z)]|_{x=x_0 + \delta x, y=y_0 - \delta y} \quad (4)$$

Comparing Eq (4) with Eq (2), it is clear that taking an Ascan image at a point $(x_0 + \delta x, y_0)$ from the 3D object at time $t_0 + t$, is in fact equivalent to taking an Ascan image at a different imaging point $(x_0 + \delta x, y_0 - \delta y)$ from the 3D object at time t_0 . Here, δx is the distance that the

incident beam scans during time interval Δt and $\delta x = v_s \Delta t$ where v_s is the speed of beam scanning; δy is the distance scatters travel during the time interval Δt due to flow. As a result, if we consider a static object obtained by freezing $r_s(x, y, z, t)$ at time point t_0 , and calculate the cross-correlation between an Ascan obtained at (x_0, y_0) and an Ascan obtained at $(x_0 + \delta x, y_0 - \delta y)$ from this frozen object, the result is the same as the cross-correlation between $I_1(z)$ and $I_2(z)$, which are Ascans obtained subsequently from the flowing object. In our previous work, we have developed a method to use XCC values to extract lateral displacement between Ascans from a static object [10]. The above-discussed equivalency implies that we can perform our speckle decorrelation analysis for quantitative flow measurement. The degree of correlation between adjacent, over-sampled Ascans can be calculated by Pearson cross-correlation coefficient (XCC), shown as Eq (5).

$$\rho_{I_{x,y}, I_{x+\delta x, y-\delta y}} = \frac{\langle [I_{x,y}(z) - \langle I_{x,y}(z) \rangle] [I_{x+\delta x, y-\delta y}(z) - \langle I_{x+\delta x, y-\delta y}(z) \rangle] \rangle}{\sigma_{I_{x,y}(z)} \sigma_{I_{x+\delta x, y-\delta y}(z)}} \quad (5)$$

In Eq (5), $\langle \rangle$ indicates taking the mean value of the signal. Here $I_{x,y}(z)$ is the Ascan at (x, y) and $I_{x+\delta x, y-\delta y}(z)$ is the Ascan (usually a certain amount of pixels in an A-scan) that is displaced by $(\delta x, -\delta y)$. $\sigma_{I_{x,y}(z)}$ and $\sigma_{I_{x+\delta x, y-\delta y}(z)}$ are the square roots of variance for $I_{x,y}(z)$ and $I_{x+\delta x, y-\delta y}(z)$. The same segments in adjacent Ascans are used for the calculation of mean and variance.

As shown in our previous study, XCC between Ascans, denoted by ρ , depends on lateral displacement δl explicitly, as shown in Eq (6).

$$\rho = \exp(-\delta l^2 / \delta w^2) \quad (6)$$

In Eq (6), w is the Gaussian beam waist and the lateral displacement is calculated as $\delta l = (\delta x^2 + \delta y^2)^{1/2} = (v_s^2 + v^2)^{1/2} \Delta t$. v_s can be calculated from the galvanometer scanner parameter and the focal length of the scanning lens, or obtained from a simple calibration experiment; Δt is determined by the line scan rate of the OCT system; therefore, we can obtain the flow speed v using XCC value, as shown in Eq (7).

$$v = \pm \left[\sqrt{w^2 \ln(1/\rho) - v_s^2} \right] / \Delta t \quad (7)$$

The $\pm$ in Eq (7) indicates that we are not able to determine the direction of the flow using a one-directional simple scanning pattern. We used the absolute value of v in this paper to represent flow speed. However, by introducing more sophisticated scanning pattern, it is possible to determine the flow magnitude as well as the direction. It is worth mentioning that all the pixels or a fraction of the pixels in adjacent Ascans can be involved in the calculation of XCC using Eq (5). When segments of Ascan at different imaging depths are used to obtain depth-resolved XCC, depth resolved transverse flow measurement can be obtained. Therefore, the speckle decorrelation analysis proposed in this paper allows imaging transverse flow at different lateral and axial locations.

The spectral domain OCT (SD OCT) system used in this study has been described in detail in our earlier papers [3, 5]. Two phantoms were used in flow imaging experiments. In the first experiment, we used a microchannel phantom fabricated by drilling a 300 μm diameter circular channel in a transparent plastic substrate [3]. In the second study, a microfluidics device fabricated by a computer-controlled laser micromachining system that consists of a diode pumped solid state laser [11]. In our phantom experiments, the speed of the flow was controlled using a precise syringe pump; the direction of beam scanning was performed normal to the flow. Finally, we performed the *in vivo* study using a mouse model.

To obtain the speckle pattern change due to the change in the flow rates, we imaged a home-made 300 μm microchannel pumped with bovine milk at a lateral step size of 0.6 μm . Bscan image taken at zero flow rate is shown in Fig. 1. (a). In Fig. 1. (b) – (e), we show the same area of the Bscan image indicated by the rectangular box in Fig. 1. (a), at flow rates 30 $\mu\text{L}/\text{min}$, 90 $\mu\text{L}/\text{min}$, 150 $\mu\text{L}/\text{min}$, and 210 $\mu\text{L}/\text{min}$. The dimension of ROI in Fig. 1. (b) – (g) is 50 μm (axial) $\times$ 60 μm (lateral). Fig. 1. (b) – (e) clearly show that the speckle size in lateral direction becomes smaller at a larger flow rate, because as v_y becomes larger, the equivalent displacement δl which is equal to $(v_s^2 + v^2)^{1/2} t$ also becomes larger. According to Eq (6), this results in a smaller value of XCC or a speckle pattern with a smaller grain size in lateral dimension. Using a segment of the image over the depth range indicated by the red arrow in Fig. 1. (a), we calculated XCC and show the results in Fig. 1. (f), which corresponds to flow rates 30 $\mu\text{L}/\text{min}$, 90 $\mu\text{L}/\text{min}$, 150 $\mu\text{L}/\text{min}$, and 210 $\mu\text{L}/\text{min}$. It is clear that the overall XCC values are smaller for a larger flow rate, which is consistent with Eq (6). In addition, we calculated v_y using Eq (6) and show the results in Fig. 1. (g). We also performed parabolic fitting using v_y values within the channel and show the results as thick, dashed curves in Fig. 1. (g). The consistency between the experimental and the fitting curves indicates that the parabolic flow profiles can be extracted from speckle cross-correlation analysis. The non-zero flow signal at the capillary edge is due to speckle decorrelation induced by the structure of the sample, rather than speckle.

To further validate that the speckle decorrelation technique can be used to extract flow information quantitatively, we performed another set of phantom experiments using a microfluidic channel. The microfluidic device was built with a new, inexpensive methodology based on laser machining of common tape [11]. Single-sided tape was attached to a glass substrate and laser machined down to form the channel. A second layer of tape was then added to seal the channels. Very complex vasculature architectures can be created with this methodology. We used this structure because the planar structure of the flow channel does not create a lens effect for our scanning beam that would otherwise be introduced by a round flow channel; second, the incident beam diameter stays almost constant within the channel due to its small thickness. The cross-section of the microchannel is illustrated in Fig. 2. (a) and the corresponding OCT image is shown in Fig. 2. (b). The OCT signal inside the flow channel was due to the scattering of bovine milk. OCT images were obtained at a 0.35 μm lateral step size. We selected the rectangular region corresponding to the microflow channel, calculated XCC between adjacent segments of A-scans, used the ensemble average of XCC to estimate v according to Eq (7). Flow rate was then calculated by multiplying v with the cross-sectional area of the flow channel, which

was obtained from the OCT image. Flow rates obtained with speckle decorrelation analysis are shown as blue circles in Fig. 2. (c). In Fig. 2. (c), we also show the flow rate obtained from the reading of the syringe pump as the black curve. The consistency between the blue circles and the black curve shows that it is possible to measure transverse flow using speckle analysis, quantitatively. We also performed Doppler analysis on the same data set. As shown in Fig. 2. (red circles), the ODT signal cannot be used to extract transverse flow, because Doppler phase shift is introduced by motion along the incident beam.

To show that our speckle analysis can be used to measure blood flow *in vivo*, we imaged a blood vessel from a live mouse and obtained 250 frames each with 2048 (axial) $\times$ 1000 (lateral) pixels. The animal study was conducted in accordance with the Johns Hopkins University Animal Care and Use Committee Guidelines. The mouse was anaesthetized and the femoral artery in the limb of mouse was exposed for OCT imaging through a surgical procedure. With the CCD camera operated at its maximum speed (70 kHz line rate), the data acquisition took 3.6 seconds, which contained multiple cardiac cycles (Media 1). One of the Bscan images of the blood vessel is shown in Fig. 3. (a). To show the temporal variation of blood flow, we selected rectangular ROIs corresponding to blood, as illustrated by the red dashed rectangle in Fig. 3. (a). It is worth mentioning that due to the tissue bulk movement, we selected different ROIs in different frames. Afterwards, we calculated XCC values at different lateral location within the ROI, averaged the values of XCC obtained from the ROI of each Bscan, and showed the result as the black curve in Fig. 3. (b). For comparison, we also used non-blood regions indicated by ROI1 and ROI2 in Fig. 3. (a) to calculate the averaged XCC. The results are shown as green (ROI1) and blue (ROI2) curves in Fig. 3. (b). In Fig. 3. (b), the black curve shows periodical pulsation which does not exist in the green and blue curve, indicating the pulsation is due to blood flow speed variation in cardiac cycles rather than bulk tissue motion in respiration cycles. Blood flow speed within blood ROI was calculated with XCC values and shown as a black curve in Fig. 3. (c). We performed Fourier analysis on the obtained blood flow graph and obtained a frequency peak at 2.8Hz corresponding to a heart beat rate of 168 beats per minute. To demonstrate the difference in speckle pattern at different flow speeds, in Fig. 3. (d) – (f) we show OCT images corresponding to fast, medium, and slow flow as indicated by red circles in Fig. 3. (b). A smaller lateral speckle size is found in Fig. 3. (d) obtained with a high flow speed; a larger lateral speckle size is found in Fig. 3. (f) obtained with a low flow speed. The variation of speckle size can be seen more clearly in Fig. 3. (h) – (j) which are the central part of ROIs of Fig. 3. (d) – (f) chosen for XCC calculation. To further obtain transverse blood flow image, $v(x,z)$, we took two adjacent Ascans at lateral coordinate x ; calculated ρ using Eq (5) using 16-pixel segments (corresponding to an axial resolution of 20 μm) centered at axial coordinate z , and calculated flow speeds using Eq (6). With laterally and axially resolved XCC values and flow speeds, we obtained flow images as shown in Media 2. In Fig. 3. (l) – (n), we show flow images obtained from OCT images in Fig. 3. (d) – (f) using speckle decorrelation analysis. Fig. 3. (l), (m), and (n) show large, medium, and small flow signal, which is consistent with Fig. 3. (d). We overlaid the 250 frames of OCT structural image and tabulated flow image using HSV colormap in Media 3 which highlights blood and show blood flow variation (H: hue takes the value of 0; S: saturation takes the value from flow image; V: value takes the value from OCT structural image).

The sensitivity of our transverse flow measurement depends on the statistical noise associated with speckle phenomena. As shown in our previous work, XCC obtained from a static sample is also a random variable which leads to uncertainty in flow measurement [9]. Also, when the flow speed is too high—so that the effective displacement $v_y t$ becomes comparable with the OCT system's lateral resolution—subsequently acquired A-scans become completely decorrelated, which limits the maximum flow speed measurable using this speckle decorrelation analysis. Moreover, the signal to noise ratio of OCT signal would affect the results of decorrelation analysis, because lower SNR increases signal randomness and decreases the value of cross correlation coefficient between adjacent A-scans. Quantitative estimation of the dynamic range of this transverse flow measurement can be obtained using the speckle simulation method we recently developed [12]. This work also indicated that the effect of optical signal attenuation on speckle decorrelation analysis can also be digitally compensated.

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Fig. 1.

(a) OCT image of a circular microchannel filled with milk; (b) – (g) Bscan images at different flow rates of 30 $\mu\text{L}/\text{min}$, 90 $\mu\text{L}/\text{min}$, 150 $\mu\text{L}/\text{min}$, and 210 $\mu\text{L}/\text{min}$; (f) XCC as a function of lateral position, at different flow rates; (g) calculated flow velocity across the flow channel fitted with parabolic.

Fig. 2.

(a) Illustration of the cross-section of microfluidics; (b) OCT image of the cross-section of microfluidics; with flowing milk in a circular micro channel; (c) results of flow rate measurement from Doppler phase shift (red circles) and speckle decorrelation analysis (blue circles).

Fig. 3.

(a) A representative OCT image (Media 1); (b) time sequences of XCC obtained from ROI corresponding to the area with blood flow, ROI1, and ROI2; (c) blood flow speed calculated from XCC; (d) – (f) OCT images obtained at fast, medium, and slow blood flow speed; (h) – (j) central part of ROIs of Fig. 3. (d) – (f) chosen for XCC calculation; (l) – (n) 2D images of blood flow corresponding to Fig. 3. (d) – (f) (Media 2 and Media 3).