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Detection of Low-Concentration Magnetic Particles by GMR Probe for Medical Applications

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Abstract

While cancer as a disease evolves continuously, treatments also need to advance for the benefit of the patient. One such way to manage cancer is hyperthermia treatment. Cancer cells are different to normal cells in many ways including how they react to heat. Taking into account this difference it is possible for hyperthermia treatment to destroy cancer cells without harming the healthy normal cells surrounding the tumor. Magnetic fluid with magnetic nano-particles is injected into the affected area. Magnetic particles generate heat by hysteresis loss and temperature is increased when a time varying external magnetic field is applied. Successful treatment depends on how efficiently the heat is controlled. Thus, it is very important to estimate the magnetic fluid density in the body. Experimental apparatus designed for testing, and results obtained by experimentation using a simple yet novel and minimally invasive needle type spin-valve giant magnetoresistance (SV-GMR) sensor, to estimate low concentration magnetic fluid weight density and estimation of magnetic fluid in a reference medium is reported.

Keywords: hyperthermia treatment, giant magnetoresistance sensor, low-invasive, magnetic fluid, weight density, permeability, demagnetizing factor, helmholtz coil

1 Introduction

With the recent advancements in nanotechnology, smart sensors have been used extensively in explicit biomedical applications [1]. Hyperthermia treatment has the potential to be an effective tool for healing cancer. The principle behind hyperthermia treatment lies in the fact that cancer cells are more sensitive to heat than normal healthy cells [2]. While it has been known for some time that heat does shrink tumors it is only recently that safe ways have been found to raise body temperature in a safe and effective manner. Thus, hyperthermia treatment can be used effectively to kill or weaken cancer cells with negligible effects on healthy cells. The many advantages of this type of treatment include no side effects or pain for the patient, minimally invasive and time for treatment is less, compared to treatments such as chemotherapy and radiotherapy, and even though the cancer cells do not die completely they may be become more susceptible to treatments such as ionizing radiation or chemotherapy, allowing such therapy to be given in small doses [3].

Magnetic fluid with magnetic nano-particles is injected into the affected area. Magnetic particles generate heat by hysteresis loss and temperature is increased when a time varying external magnetic field is applied [4]. The movement of the magnetic particles can be controlled by external magnetic fields, which means it can be directed to an area of interest, held there until treatment concludes and then removed. As a result of external magnetic fields the temperature of the magnetic nano-particles increases, due to eddy current loss [5]. Given sufficient heat it is possible to destroy or partly destroy cancer cells in the affected area. The amount of nano-particles inside the body must be verified before treatment so that healthy cells won't be affected.

Once the magnetic fluid is injected it spreads throughout the tissue decreasing the content density. Magnetic density is then needed to be confirmed once inside the tissue. The needle type SV-GMR sensor is proposed to estimate low concentration magnetic fluid content density inside the body in a minimal, low invasive way.

2 Principles of Hyperthermia Treatment

Lately hyperthermia has been shown to be a possible cancer therapy based on induction heating[4,5]. The sensitivity of cancer cells to heat compared with healthy cells paves the way for effective cancer management using hyperthermia treatment.

Dextran magnetite (DM) is a complex of dextran and superfine iron oxide particles, and this complex is stable as a colloid without aggregation or deposition in various

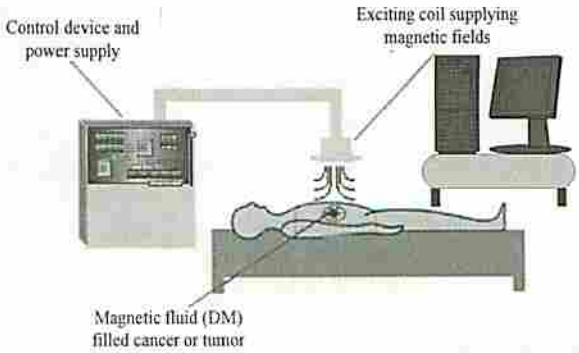


Fig. 1 Hyperthermia treatment as a cancer therapy

solvents or serum [6]. As shown in Fig. 1, DM is injected into the affect area in the body and brought close to the cancerous cells. The nano-particles heat up to around 42.5°C due to the external AC magnetic fields that are acted upon the tumor [7]. Tumor tissues are heated directly since hysteresis loss is induced. Exposure to such heat for a given time will kill or partly destroy tumor tissue, where the latter can be utilized for giving low doses of other treatments such as X-ray therapy.

The heat capacity, Q (W/ml) generated by magnetite can be obtained by experiment as follows:

$$Q = k_m f D_w B^2 \tag{1}$$

where f ; exciting frequency (kHz),
D_w; magnetic fluid weight density (mgFe/ml),
B ; applied magnetic flux density amplitude (T),
k_m ; 3.14×10^3 (W/Hz/(mgFe/ml)/T^2/ml).

The value of the constant k_m was obtained by experiment, where an exciting magnetic flux at frequency 158 kHz was applied to Resovist®, a substance with a magnetic weight density of 28 mgFe/ml. It can be seen from Eq. (1) that all parameters except the magnetic fluid weight density (D_w) is generally known. When DM is injected into the affected area it spreads inside the cancer tissue effectively decreasing the magnetic fluid weight density [7,8]. So to control the heat in hyperthermia treatment it is important to verify D_w.

3. Analytical Estimation of Magnetic Fluid Content Density

3.1 Relationship between relative permeability and magnetic fluid weight density

The relative permeability of the magnetic fluid can be estimated by measuring the magnetic flux density in tissue injected with magnetic fluid. A relationship is established between the magnetic fluid weight density and relative permeability. Based on this relationship the magnetic fluid volume density, D_v, is calculated. The magnetic fluid weight density is estimated as,

$$D_w = \frac{\gamma_f \times D_v}{(1-D_v)+\gamma_f \times D_v}, \tag{2}$$

simplified and rearranged to obtain the magnetic fluid volume density as,

$$D_v = \frac{1}{1+\left(\left(\frac{1}{D_w}\right)-1\right)\gamma_f} \tag{3}$$

where γ_f = 4.58 (W-35 sample – Taiho Co.) and is the specific gravity of magnetic bead

Magnetic nano-particles are assumed to have a cylindrical shape with equal height and diameter, and that they are uniformly distributed in the fluid. Furthermore it is assumed that the nano-particles have an infinite permeability and water has one. Magnetic fluid density can be estimated based on the prediction of the magnetic field path when the fluid is placed under a uniform magnetic flux density. Two equivalent magentic paths, with and without magntic particles, are considered. Then an equation is obtained for the relative permeability derived from the equivalent magnetic permeance of one cubic meter [8]. So then the relative permeability, μ^*, of magnetic fluid as a bulk is estimated as,

$$\mu^* = 1+4D_v = 1+4D_w/\gamma_f \tag{4}$$

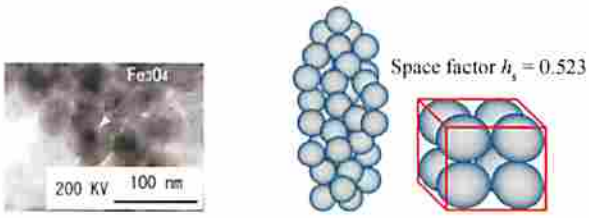
Eq. (4) shows that the shape and/or the size of magnetic particles have no effect on the relative permeability. Assuming the same equivalent path the equivalent relative permeability has the same expression even though the particle could be of spherical shape. The expression holds on the condition that the cavity includes a little amount of magnetic particle.

The electron microscopy of the magnetic fluid shows that the magnetic particles has a cluster structure as shown in Fig. 2(a). It was then assumed that the cluster of magnetite is distributed uniformly as shown in Fig. 2(b). It can be seen that there is some space in the cluster model and so we considered the space factor of spherical magnetite h_s. So then the effective specific gravity is expressed as,

$$\gamma_f' = h_s \gamma_f , \tag{5}$$

where h_s is 0.523. Eq. (4) can then be written as,

$$\mu^* = 1+4D_w/(h_s\gamma_f) \tag{6}$$



(a) Electron microscopy slide of magnetic fluid (b) Cluster model of magnetite

Fig. 2 Microscopic model of magnetite.

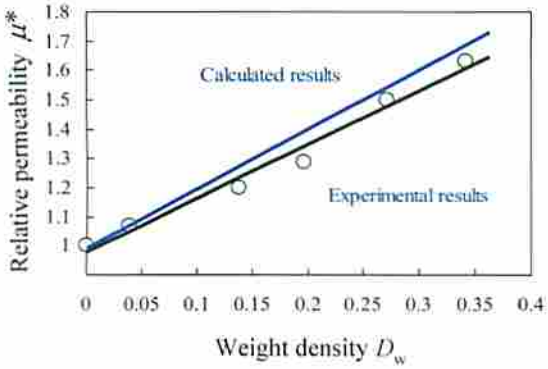


Fig. 3 Relative permeability vs weight density of magnetic fluid for space factor of 0.523.

To verify Eq. (6) solenoidal shape vessels were filled with magnetic fluid of varying weight density. B-H curve tracer was used to measure the relative permeability. Fig. 3 shows the comparison of the results obtained by theory to experiments for a space factor of 0.523. It can be seen that the relative permeability is linearly proportional to the magnetic fluid weight density.

3.2 Magnetic flux density inside and outside a magnetic fluid filled cavity under uniform magnetic fields

Fig. 4 shows a magnetic fluid filled cavity placed under a uniform magnetic flux density. Flux lines will then concentrate at the magnetic fluid filled cavity, which is assumed to have a permeability slightly greater than one. If a magnetic flux, B_0, is applied then the flux in the cavity is assumed as B_1. The magnetic flux density inside the magnetic fluid filled cavity, B_1, will change according to the content density of the magnetic fluid.

The magnetic flux at the centre of the cavity, B_1, can be expressed according to the following equation:

$$B_1 = \frac{\mu^* B_0}{1 + N(\mu^* - 1)} \qquad (7)$$

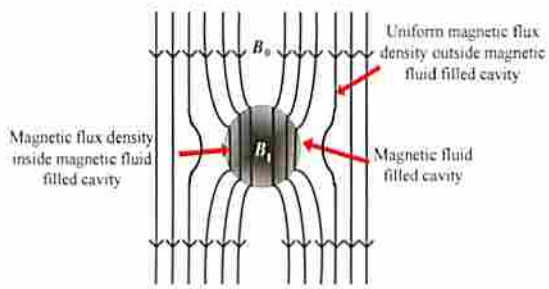


Fig. 4 Model showing magnetic flux distribution inside an embedded cavity.

where μ^* is the relative permeability which is assumed as slightly greater than 1 and N is the demagnetizing factor of the cavity.
Substituting Eq. (4) for Eq. (7), we get,

$$\frac{(B_1 - B_0)}{B_0} = 4(1 - N)D_w/(h_s \gamma_f) \quad (D_w \ll 1) \qquad (8)$$

From Eq. (8), it can be seen that from the difference between the applied flux, B_0, and the flux in the magnetic fluid, B_1, the volume density and thus the weight density of the magnetic fluid can be estimated. The change between the applied magnetic flux and the flux in the container is directly proportional to the magnetic fluid volume density.

3.3 Helmholtz tri-coil and uniform magnetic flux density

Helmholtz coils are used in a variety of applications, primarily due to its ability to produce a relatively uniform field configuration, ease of construction and flexibility [9,10]. Fig. 5 shows the designed Helmholtz tri-coil. The parameters are: a = 770 mm, b = 260 mm, c = 214 mm, h = 315 mm, N_1, N_2 and N_3 are 140, 4 and 1 turns respectively. In biomedical applications low concentration magnetic fluid (typically less than 1.2 % volume density) is used. To clearly differentiate between magnetic fluid at low volume densities it is essential that the error from the midpoint in the uniform region is very low.

The Helmholtz tri-coil was designed to have an error less than or equal to 0.01 % 0.03 m in the axial and radial direction from the midpoint. Fig. 6 shows the analytical results obtained for the designed tri-coil and

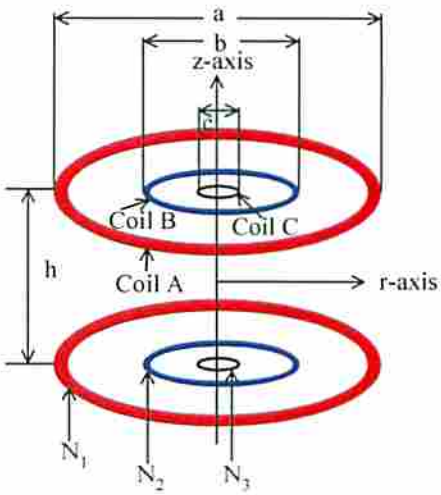


Fig. 5 Helmholtz tri-coil.

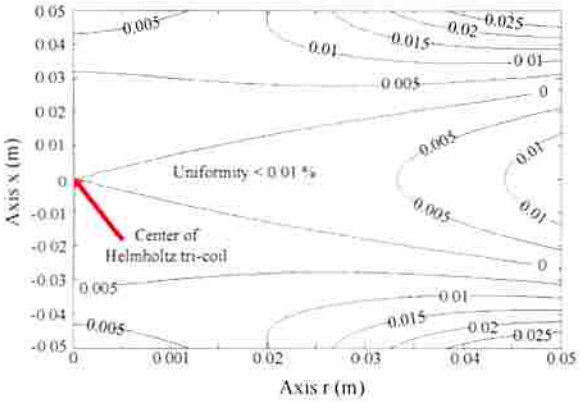


Fig. 6 Contour plot of error from the midpoint.

there is an error of less than or equal to 0.01% in an area of ±0.03 m in the axial direction and 0.03 m in the radial direction from the midpoint.

4. Experimental results

4.1 SV-GMR Sensor and Experimental Setup

The needle type SV-GMR sensor and the experimental setup used to estimate the magnetic fluid weight density is shown in Fig. 7. By measuring the applied flux density (outside of the cavity) and the magnetic flux density inside the magnetic fluid filled cavity the magnetic fluid weight density can be estimated. The SV-GMR sensor is especially fabricated for testing inside the body in a simple and a minimally low invasive way. The SV-GMR element with sensing area of 75 μm × 40μm is at the tip of the needle. The sensing direction is parallel to the needle.

A constant current of 5 mA is applied to the SV-GMR sensor. The small signal characteristics of the sensor at 1 kHz is shown in Fig. 8. The sensitivity is approximately 12.5 μV/μT.

Magnetic fluid is injected into cylindrical cavity of 16 mm diameter and 18 mm height. The Helmholtz tri-coil

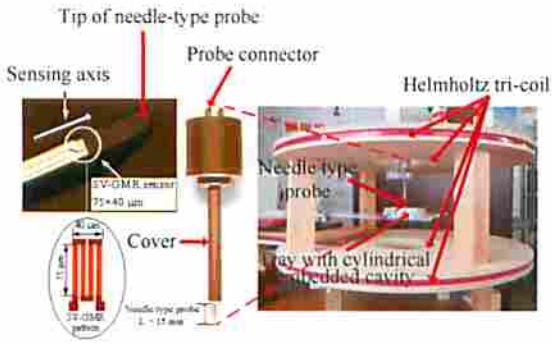


Fig. 7 Experimental setup.

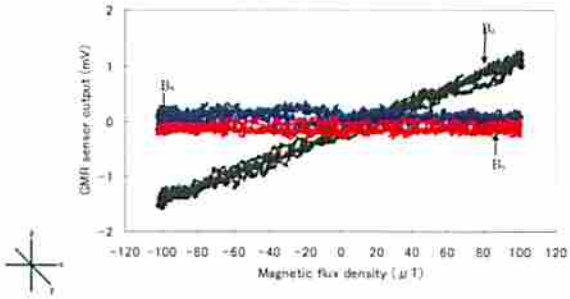


Fig. 8 Small signal characteristics of needle-type SV-GMR sensor at 1 kHz.

is used to produce uniform magnetic flux of 100 μT for frequencies 100 and 200 Hz. The SV-GMR sensor needle tip is placed in the middle of the Helmholtz coil and the cylindrical cavity is moved so that the needle tip is in the centre of the cavity.

4.2 Results of estimation

4.2.1 Estimation of low concentration magnetic fluid weight density

The volume density of DM used in medical applications such as in hyperthermia treatment is less than 1.2 %. So it is importaint to measure low concentration DM inside the body before as well as after treatment. Fig. 9 show the experimental results obtained. The relationship between the magnetic fluid weight density and the change in magnetic flux density is obtained. The relationship between the change in magnetic flux density and the magnetic fluid weight density is linear and proportional.

4.2.2 Detection of magnetic fluid

Experiments were performed to simulate potential in-vivo experimentation. A concentration of agar and magnetic fluid was made (5 % agar, 5 % magnetic fluid and 90 % distilled water) and cooled to solidify. Then, potato starch was made and the solidified agar pieces were inserted into the potato starch as shown in Fig. 10.

Experiments were performed with the needle-type SV-GMR sensor to estimate the magnetic fluid filled cylindrical agar pieces (diameter 16 mm and height 10 mm) that were inserted in potato starch. The demagnetizing factor of a cavity depends on the ratio of height to diameter of cavity (m). The sensor needle was applied to the middle of the agar pieces and the results are shown below in Fig. 11 for weight density percentages of 0.24, 0.36, 0.47 and 0.81. The result obtained here is only the amplitude of the signal corresponding to the magnetic flux density inside the magnetic fluid. The change in signal is the difference between the signal obtained inside the magnetic fluid

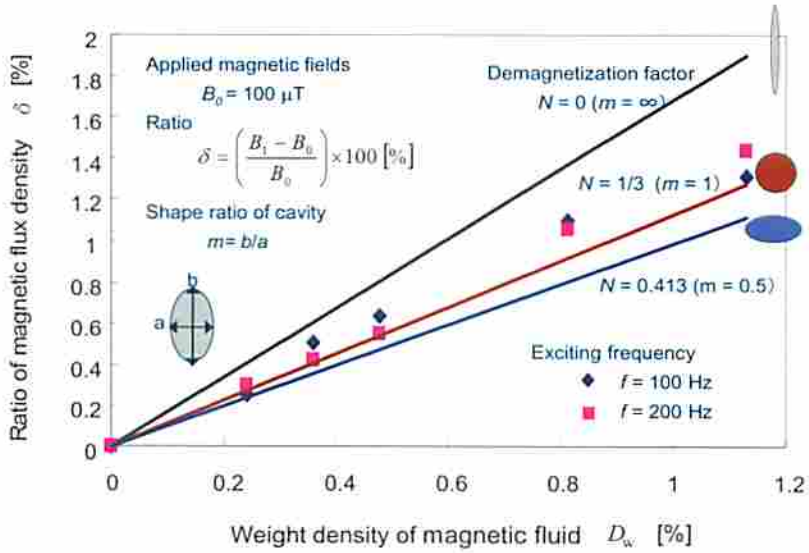


Fig. 9 Experimental results estimating low concentration magnetic fluid weight density.

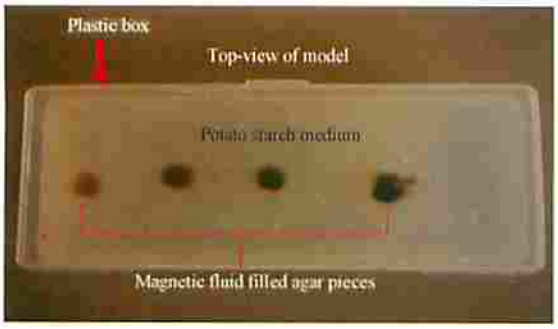


Fig. 10 Top-view model of magnetic fluid and potato starch

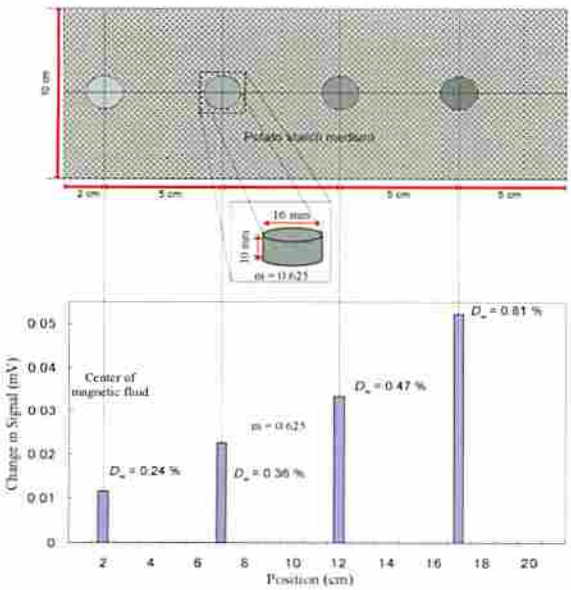


Fig. 11 Estimation of magnetic fluid for varying weight densities.

and in potato starch (reference medium). Next experiments were performed to verify Eq. (8). Eq. (8) shows that magnetic flux density inside and outside the cavity should only change with D_w.

It can be seen that given the demagnetizing factor is the same the change in magnetic flux density is solely dependent on the magnetic fluid volume density. Shown in Fig. 12 and 13 are the results obtained for a weight density of 0.81 % for different sizes of magnetic fluid filled agar pieces (m = 0.625 and 1). For m = 1 the same diameters and positioning were used as in Fig. 12.

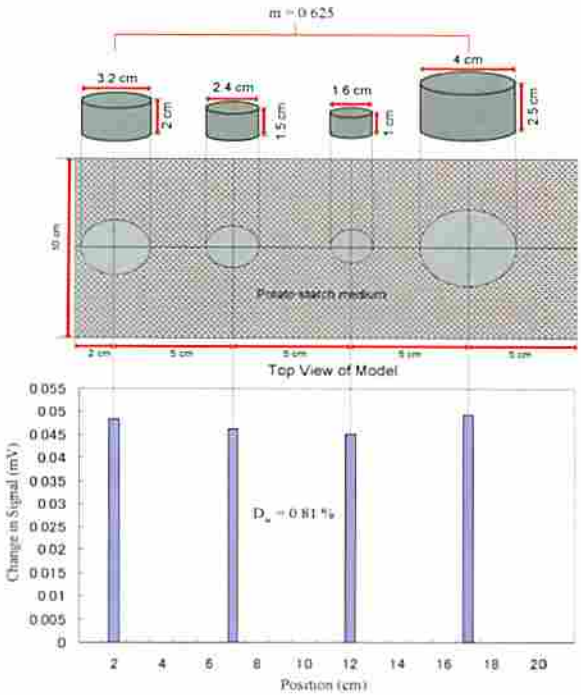


Fig. 12 Estimation of magnetic fluid for weight density of 0.81 % (m = 0.625).

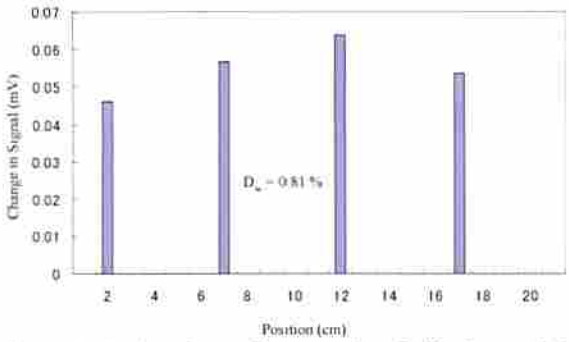


Fig. 13 Estimation of magnetic fluid for weight density of 0.81 % (m = 1).

The results show that change in signal do not vary so much between the four samples, verifying Eq. (8).

5. Conclusions

A novel needle type spin-valve giant magnetoresistance sensor is proposed for estimating the low concentration magnetic fluid weight density, which is prevalent in the biomedical field. The control of heat is critical in hyperthermia treatment so it is essential to verify the magnetic fluid weight density once inside the body before and after treatment. The relationship between the change in magnetic flux density inside and outside a magnetic fluid cavity has been shown by experimentation. Experiments were also performed to estimate magnetic fluid filled agar pieces inside potato starch reference medium. The experiments showed that magnetic fluid inside a reference medium can be estimated and shape of the cavity does not affect the magnetic flux density inside the magnetic fluid filled agar pieces. The results show that the proposed technique can be applied to biomedical engineering such as in the confirmation of magnetic fluid density injected into human body for cancer treatment by means of hyperthermia therapy, based on induction heating technique.

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