

QLF technology and History



Oral Health Care Assistant

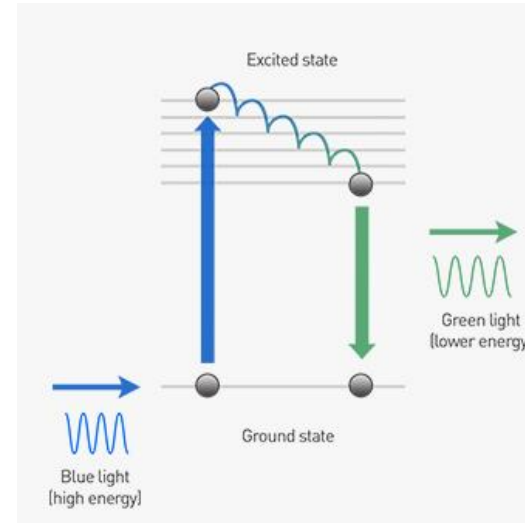
Qscan directly reveals incipient caries, plaque, tartar, tooth fractures and denture cracks through red fluorescence. This is equipment specifically developed for the patient to use him or herself at home.

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PhD, Prosthodontist
Private practitioner (BestDen Dental Clinic, Seoul)
CEO of AIOBIO



Qraypen C™

Light interaction with the dental hard tissue



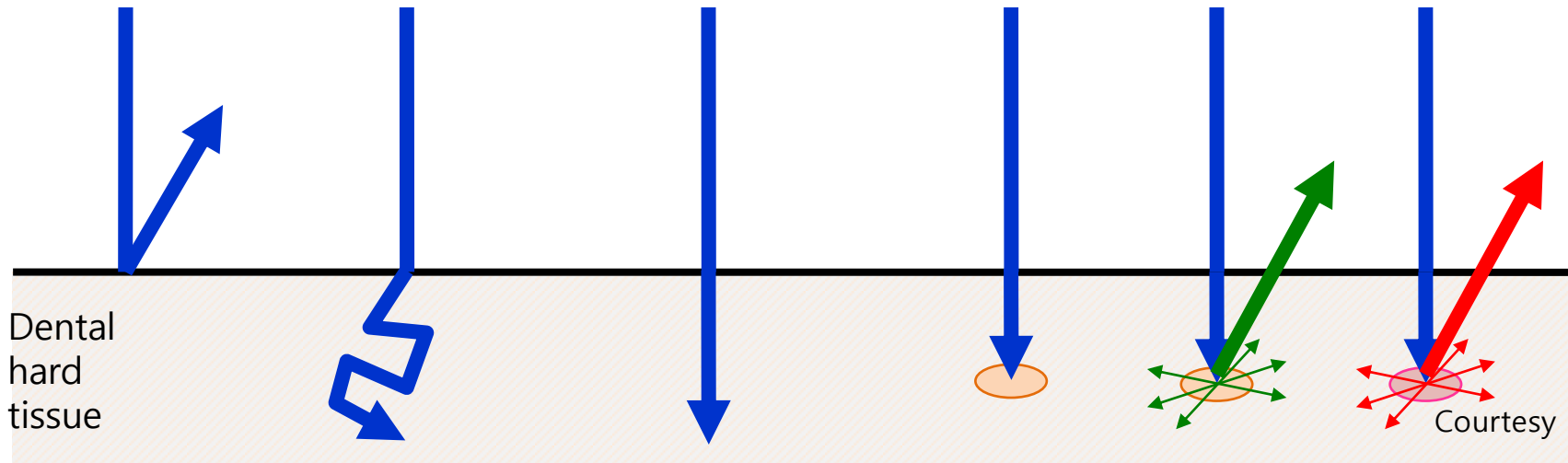
Reflection

Scattering

Transmission

Absorption

Fluorescence

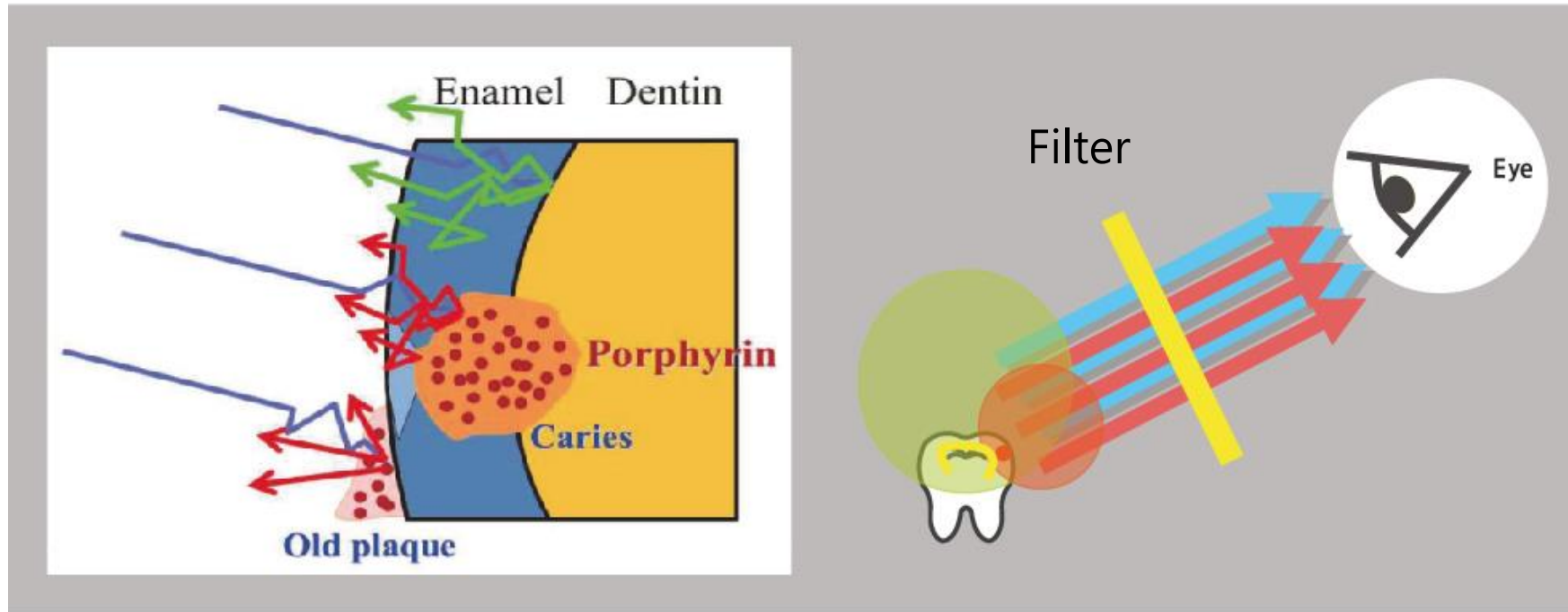


Advanced Inspection of Biofilm



○ Quantitative Light-induced Fluorescence : QLF or Qray

Light source : 405nm (Visible light)



The QLF system can detect not only mineral contents but also bacterial porphyrin-induced red fluorescence at high resolution.

QLF History: 1981

Introduction: Laser Fluorescence

United States Patent [19]
Ingmar

[11] Patent Number: 4,515,476
[45] Date of Patent: May 7, 1985

[54] DEVICE FOR THE OCULAR DETERMINATION OF ANY DISCREPANCY IN THE LUMINESCENCE CAPACITY OF THE SURFACE OF A TOOTH FOR THE PURPOSE OF IDENTIFYING ANY CARRIED AREA ON THE SURFACE TO THE TOOTH

[76] Inventor: Bjelkhagen H. Ingmar, Hagagatan 54, 113 47 Stockholm, Sweden

[21] Appl. No.: 363,788
[22] Filed: Mar. 31, 1982

[30] Foreign Application Priority Data
Apr. 1, 1981 [SE] Sweden 8102103

[51] Int. Cl.³ G01N 21/64; A61B 6/00
[52] U.S. Cl. 356/318; 128/665; 250/458.1

[58] Field of Search 356/317, 318, 417, 237; 350/96.26; 250/458.1, 459.1, 461.1, 461.2; 128/633, 634, 665

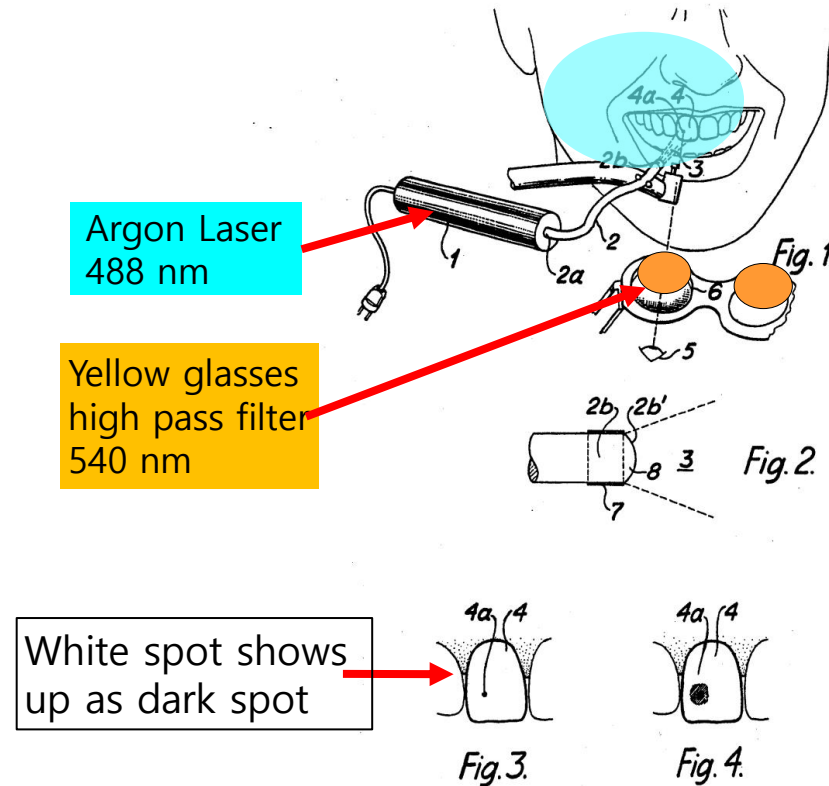
[56] References Cited
U.S. PATENT DOCUMENTS
3,494,354 2/1970 Yokota et al. 350/96.26 X
4,290,433 9/1981 Alfano 356/318
FOREIGN PATENT DOCUMENTS
1186602 4/1970 United Kingdom 350/96.26

Primary Examiner—F. L. Evans
Attorney, Agent, or Firm—Burns, Doane, Swecker & Mathis

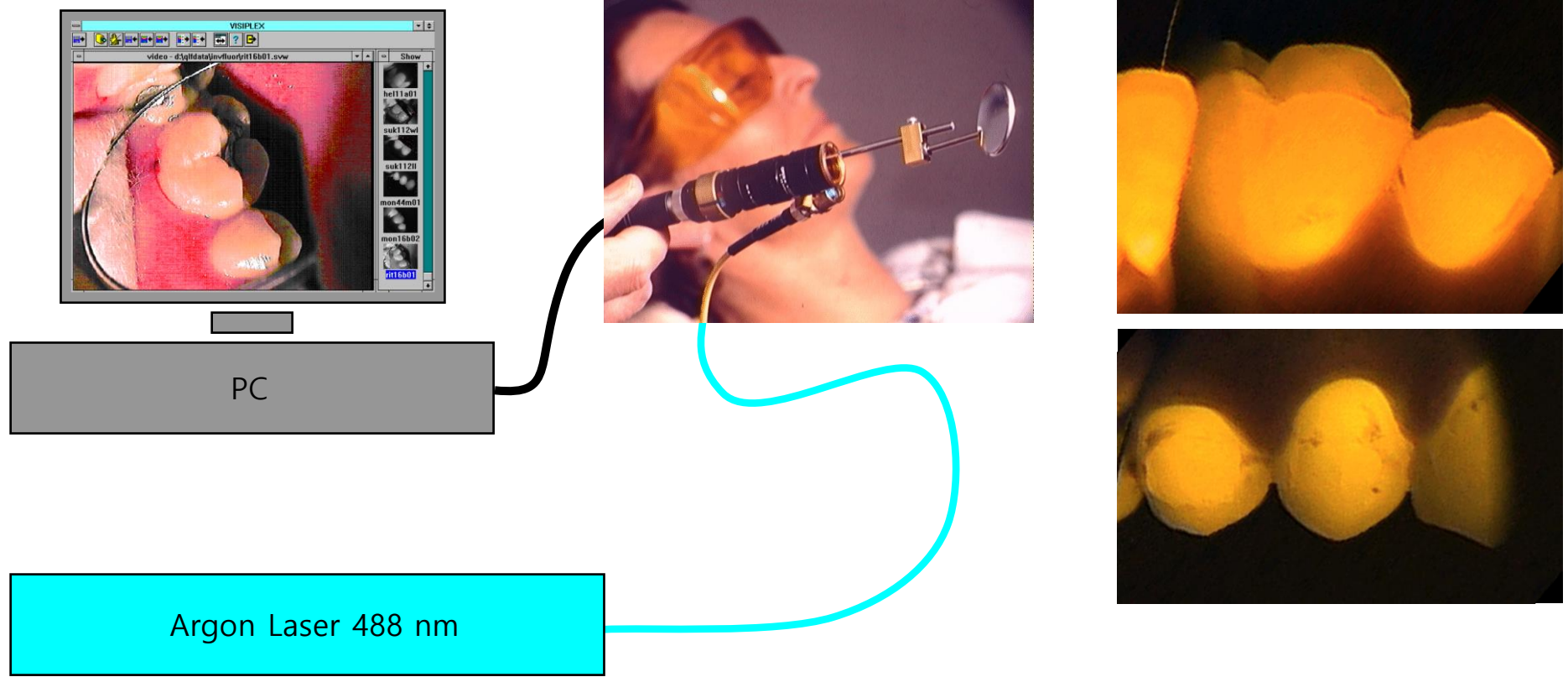
[57] ABSTRACT
A device for the ocular determination of any discrepancy in the luminescence capacity of the surface of a tooth (4) for the purpose of assessing the extent of any part (4a) of the surface of the tooth exhibiting caries and/or a coating and/or a defect. The surface of the tooth (4) is illuminated by a light (3) with a predetermined wavelength and/or wave range, for example a laser light. The luminescence capacity of the surface of the tooth at another wavelength and/or within another wave range shall be assessed, when any carried or similar part (4a) will show a discrepancy in relation to the normal luminescence capacity of the tooth (4) and will be perceived as a darker area. If the surface of the tooth (4) is illuminated by means of a light which is visible to the eye, then the observer (5) shall use an absorption filter (6) capable of absorbing light at the emitted wavelength or wave range reflected from the surface of the tooth. The invention may also be used in the course of treatment in order to determine when the carried part has been removed from the enamel surface and/or dentine surface produced by the treatment.

10 Claims, 4 Drawing Figures

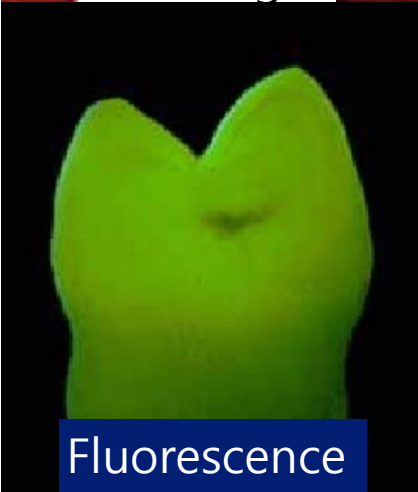
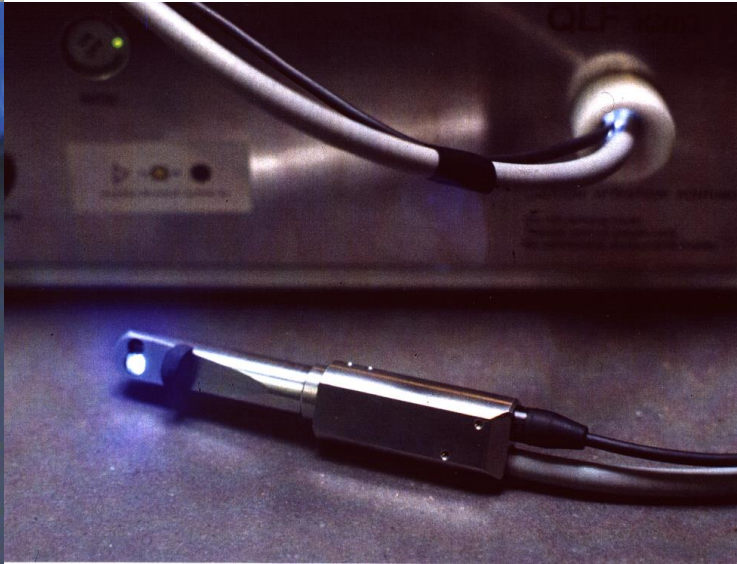
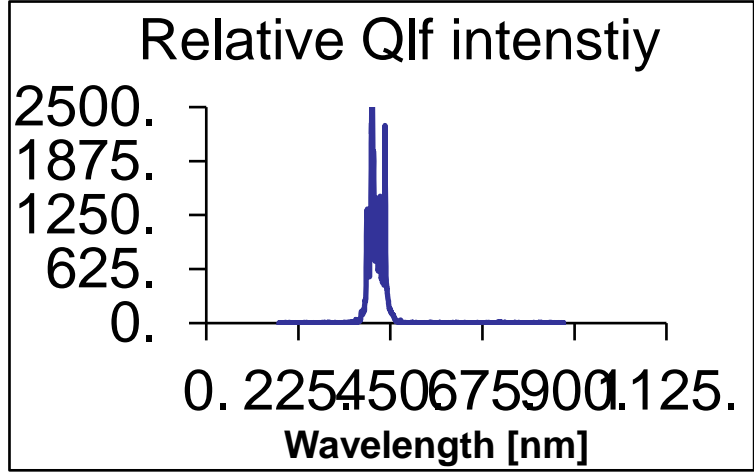
U.S. Patent May 7, 1985 4,515,476



QLF History: 1992



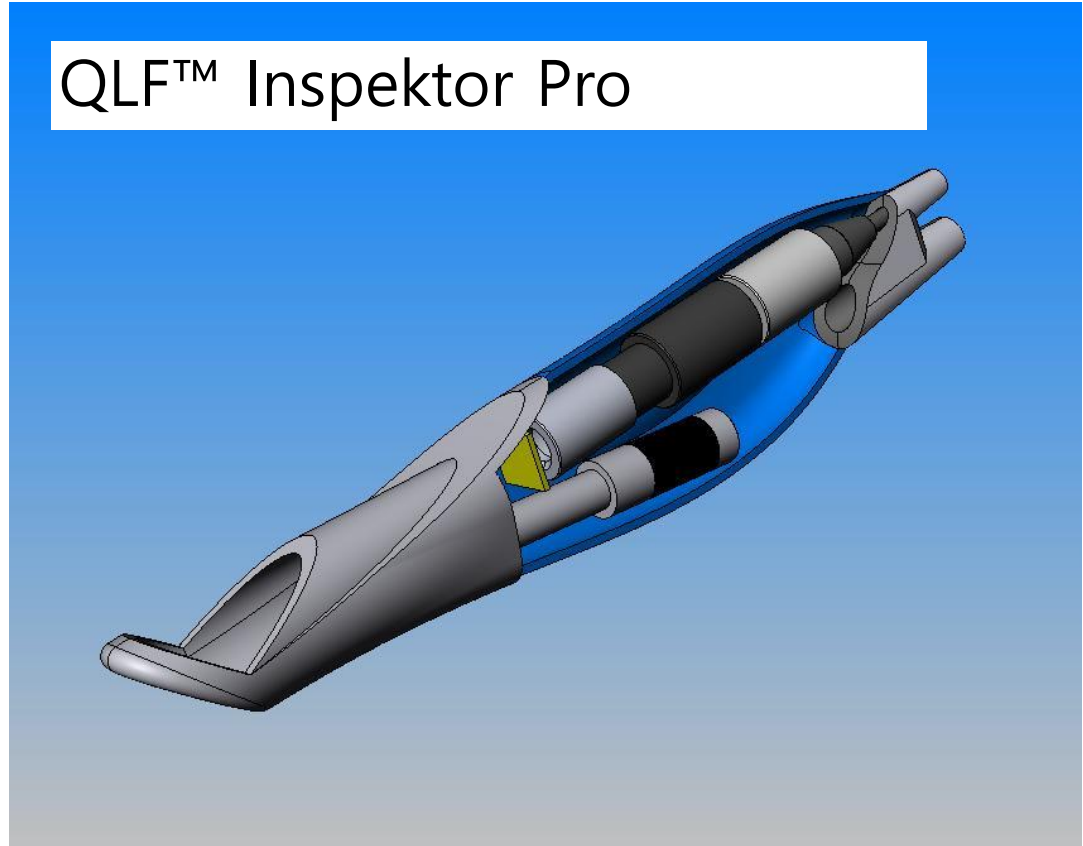
QLF History: 1996



QLF History: 2004



2004, FDA approval
2005, ADA approval



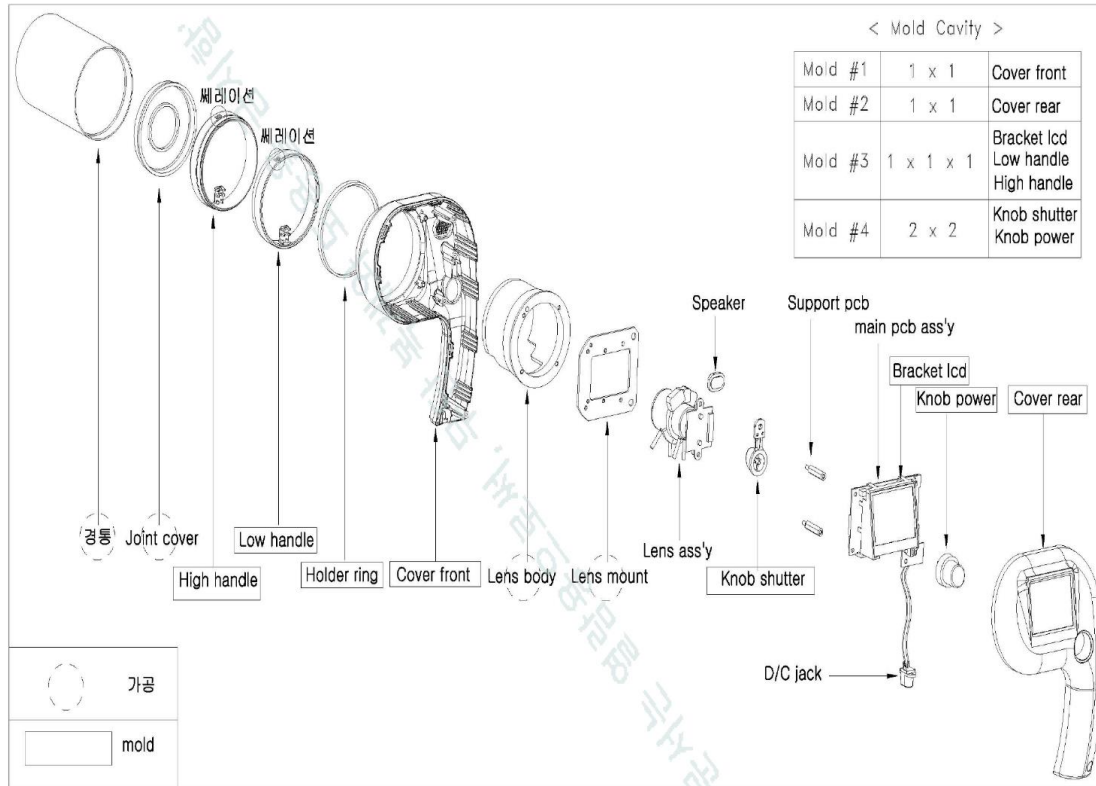
QLF History: 2011

QLF-D

Quantitative light-induced fluorescence-digital



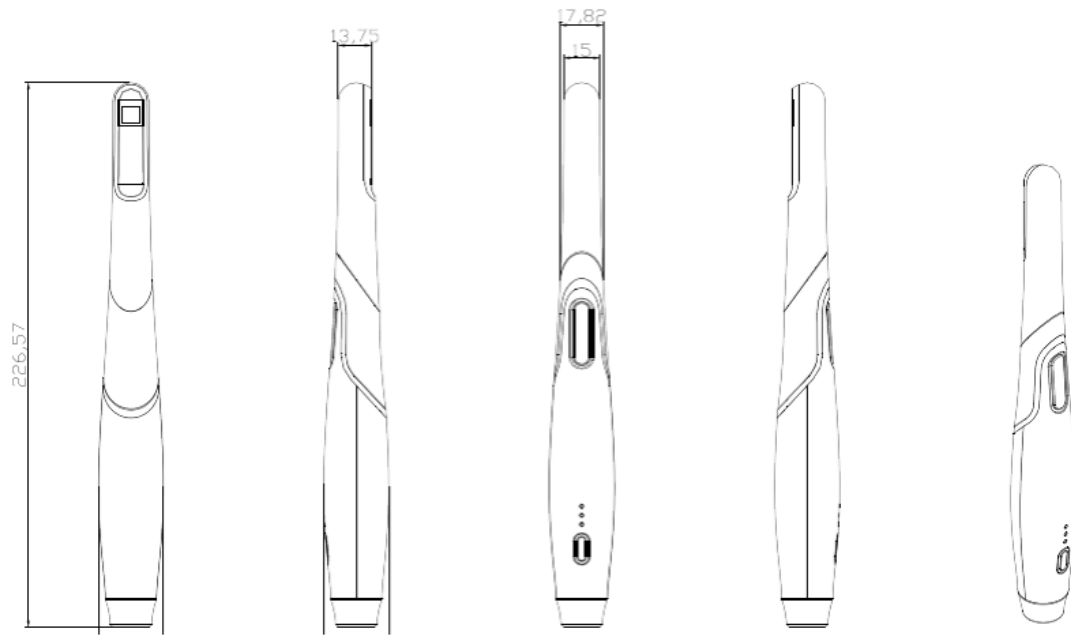
QLF History: 2014



Qraycam™



QLF History: 2015



Qraypen™



Advanced Inspection of Biofilm



QLF History: 2018

Qraypen C™



Qray cam pro

Oral Health Care Assistant
 Qscan directly reveals incipient caries, plaque, tartar, tooth fractures and denture cracks through red fluorescence. This is equipment specifically developed for the patient to use him or herself at home.

Oral Health Care System Design
 Design Rendering
 2017.09.18



B

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EASY CDE™



Comparison of QLF systems

1st
t generation



Inspektor pro

2nd
d generation



QLF-D

3rd
d generation



GrayCam



GrayPen

Comparison of fluorescence loss measurements among various generations of QLF devices

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Seok-Woo Park^{1,2)}, Hyung-Suk Lee^{1,2)}, Sang-Kyeom Kim^{1,2)}, Eun-Song Lee^{1,2)}, Elbert de Josselin de Jong^{1,2,3,4)}, Baek-II Kim^{1,2)}

Comparison of fluorescence loss measurements among various generations of QLF devices

¹Department of Preventive Dentistry & Public Oral Health, Yonsei University College of Dentistry, ²BK21 PLUS Project, Yonsei University College of Dentistry, ³Department of Health Services Research, University of Liverpool, Liverpool, United Kingdom, ⁴Inspektor Research Systems BV, Amsterdam, The Netherlands
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Purpose: The aim of *in vitro* study was to compare the diagnostic accuracy to detect non-cavitated enamel caries on smooth surface by using four kinds of the QLF devices.

Materials and Methods: A total of 52 human permanent premolars and molars were used. Fluorescence images were captured by the QLF devices (Inspektor Pro, QLF-D, Qraycam, and Qraypen). Fluorescence loss of the QLF was calculated. The severity of lesions was categorized into the following 3 scores using polarized light microscopy: normal (S), enamel demineralization to outer half of enamel (D1), and inner half of the enamel up to the dentin-enamel junction (D2). The Kruskal-Wallis test was used to compare the fluorescence loss among the QLF devices. Spearman rank correlation coefficient between histological scores and fluorescence loss of the devices was calculated. The sensitivity, specificity, and area under the receiver operating curve (AUROC) were calculated to compare their diagnostic accuracies.

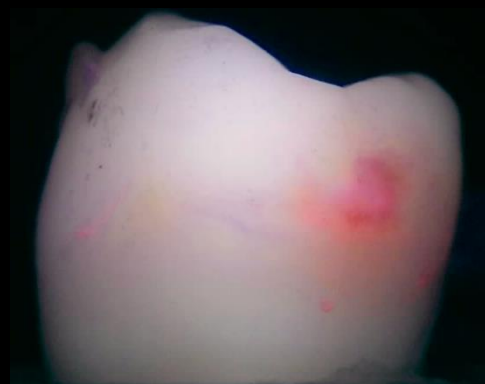
Results: The correlation coefficients between histological scores and the fluorescence loss of the devices showed 0.77 to 0.81 ($P < 0.001$). All histological scores, the fluorescence loss among the devices showed no statistical difference. Among the devices, sensitivity, specificity, and AUC values of the fluorescence loss showed 0.84 to 0.94, 0.76 to 0.90, and 0.90 to 0.92, respectively.

Conclusions: All QLF devices had no difference with excellent diagnostic accuracies to detect non-cavitated enamel caries on smooth surface.

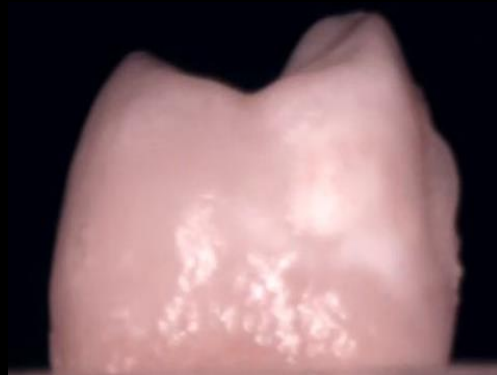
QLF-D



QrayCam



QrayPen



Comparison of QLF systems

Table 1. Distribution of fluorescence parameters from each QLF devices

QLF device	Histological score*			Correlation†
	S (n=21)	D1 (n=18)	D2 (n=13)	
Inspektor Pro	0.00 (0.00, 5.45)	9.85 (6.53, 13.33)	16.60 (14.20, 25.70)	0.78
QLF-D	0.00 (0.00, 0.00)	8.65 (5.80, 13.60)	18.10 (14.55, 27.45)	0.81
Qraycam	0.00 (0.00, 5.85)	9.15 (7.68, 17.25)	25.00 (19.25, 37.35)	0.78
Qraypen	0.00 (0.00, 6.35)	10.20 (6.78, 15.55)	19.90 (15.25, 29.10)	0.77
<i>P</i> -value	0.694	0.628	0.347	

All values represent median (25th, 75th percentiles).

P-values were calculated by Kruskal-Wallis test.

† indicated statistically significance by Spearman rank correlation, $P < 0.0001$.

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Quantitative Light-induced Fluorescence

QLF : Academic field

Qray : Clinical field



신의료기술 최종 인정 및 고시

“정량광형광기를 이용한 치아우식증 검사” 신의료기술인정(2018-8-13)

보건복지부고시 제2018 - 165호

「의료법」 제53조 및 「신의료기술평가에 관한 규칙」 제4조에 의한 「신의료기술의 안전성·유효성 평가결과 고시」(보건복지부 고시 제2018 - 140호, 2018. 7. 12.)를 다음과 같이 개정·발령합니다.

2018년 08월 13일

보건복지부장관

신의료기술명	고시날짜
341. 부분치수절단술	2013.10.10
496. 자가치아 유래 골 이식술	2015.01.29
680. 치근 천공 수복	2017.10.16
717. 정량광형광기를 이용한 치아우식증 검사	2018.08.13

전체 신의료기술	719
치과 신의료기술	4
백분율	0.556%

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