

AB056. P-24. Characterization of cholangiocarcinoma cells by Fourier transform infrared spectral pattern

Molin Wongwattanakul^{1,2}, Sirinart Chio-Srichan³, Chanvit Leelayuwat¹, Temduang Limpai boon¹, Philip Heraud⁴, Patcharee Jearanaikoon^{1,2}

¹Centre for Research and Development of Medical Diagnostic Laboratories, Faculty of Associated Medical Sciences, Khon Kaen University, Khon Kaen, Thailand; ²Cholangiocarcinoma Research Institute, Faculty of Medicine, Khon Kaen University, Khon Kaen, Thailand; ³Synchrotron Light Research Institute (Public Organization), Nakhon Ratchasima, Thailand; ⁴Monash Biomedicine Discovery Institute, Faculty of Medicine, Nursing and Health Sciences, Monash University, Clayton, Victoria, Australia

Correspondence to: Molin Wongwattanakul. Centre for Research and Development of Medical Diagnostic Laboratories, Faculty of Associated Medical Sciences, Khon Kaen University, Khon Kaen, Thailand. Email: moliwo@kku.ac.th.

Background: Cholangiocarcinoma (CCA) is a major health problem in Thailand especially in the northeast. Advanced imaging technology and tumour markers are used in the diagnosis but not highly specific for CCA diagnosis. Fourier transform infrared (FTIR) microspectroscopy is the upcoming powerful technique to diagnose several diseases. This study aims to characterize the infrared spectral pattern of CCA cells from normal cholangiocytes in both of cell lines and human tissues which can provide the specific spectral signature for CCA diagnosis.

Methods: Cell lines including immortal cholangiocyte cell line (MMNK-1) and CCA cell lines (KKU-214 and KKU-139) were cultured onto sterile transfection slides. For human tissues, frozen CCA and normal adjacent tissues were cryosectioned at 4 μm thickness and placed onto transfection slides. The parallel tissue sections were stained with H&E for area identification. All samples were prepared for FTIR microspectroscopy measurement. Samples were detected with synchrotron source at Australian Synchrotron using 10 μm \times 10 μm aperture size with 4 cm^{-1} spectral resolution. The spectral analysis was performed with OPUS software and principal component analysis (PCA) by The Unscrambler[®] X software at C-H stretching and fingerprint region.

Results: The spectral region at C-H stretching can classify the CCA cells in both of cell lines and tissues better than a fingerprint region. The major infrared spectral signature of CCA showed peaks at 2,921 cm^{-1} of CH₂ asymmetric stretching and 2,852 cm^{-1} of CH₂ symmetric stretching modes from carbohydrates and lipids. On the other hand, the cholangiocyte showed increased intensity at 2,875 cm^{-1} of CH₃ symmetric stretching.

Conclusions: This FTIR technique shows potential for characterization of the non-cancerous and cancerous CCA cells. Therefore, the useful of infrared spectral pattern may be used as a marker for CCA diagnosis. However, more tissues samples size should be used for further investigation.

Keywords: Cholangiocarcinoma (CCA); infrared spectrum; Fourier transform infrared (FTIR); diagnosis; multivariate analysis

Cite this abstract as: Wongwattanakul M, Chio-Srichan S, Leelayuwat C, Limpai boon T, Heraud P, Jearanaikoon P. Characterization of cholangiocarcinoma cells by Fourier transform infrared spectral pattern. *HepatoBiliary Surg Nutr* 2019;8(Suppl 1):AB056. doi: 10.21037/hbsn.2019.AB056