

Fluorescence microscopy and spectroscopy as tools for rapid bacterial detection and assessment of disinfection techniques in clinical settings

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With increasing information on the involvement of resistant biofilms in a large proportion of persistent infections, more focus is being given to the development of appropriate disinfection methods and the detection of residual bioburden. In dental root canal treatments approximately 24% require secondary treatment due to persistence of biofilms in the root canal space [1]. Similarly, dental implant failures related to microbial resistance occur in 17% of cases and lead to complications in over 50% [2].

Here, we demonstrate fluorescence-based chair-side detection of biofilms during and after root canal treatments. Live fluorescent staining with calcein AM followed by spectral analysis has shown to be a clinically viable method for detection within 5 minutes [3]. 1-year follow ups of treated patients highlight the clinical relevance of bacterial detection post-treatment.

In addition, we show how fluorescence microscopy and spectroscopy can be applied as tools to assess disinfection methods *in-vitro* in a rapid and user-friendly manner. A *P. gingivalis* biofilm model was used to assess a number of disinfection methods. Comparison of culturing and optical detection methods, such as optical coherence tomography, was carried out. Fluorescence staining combined with microscopy and spectroscopy was shown to be a rapid method for the reliable detection of residual stressed vital biofilm bacteria, whereas commonly used culture methods can often produce a false negative result (Figure 1).

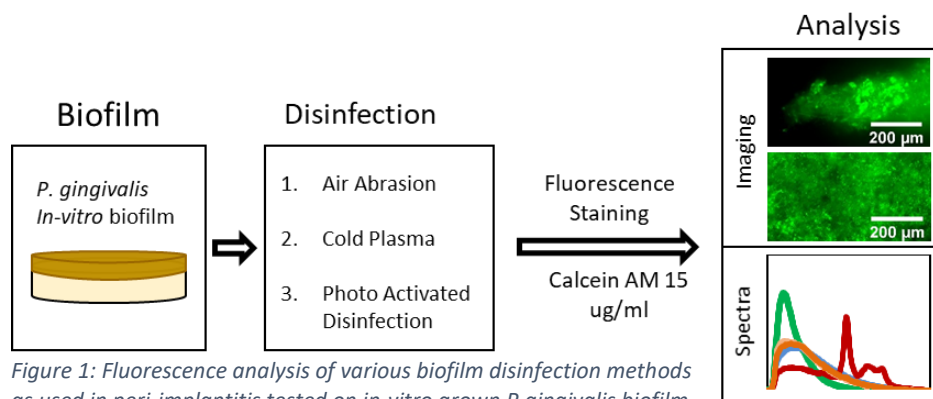


Figure 1: Fluorescence analysis of various biofilm disinfection methods as used in peri-implantitis tested on *in-vitro* grown *P.gingivalis* biofilm.

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