The development of infrared radiation applications

in medical field

Running Title: IR employment advance

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Abstract

The medical employ of thermography by infrared began in Germany shortly after 1950, where the single thermal picture of the individuals affected was shown long before (1928). Single IR detectors were used at the outset. For a long time, Thermal photography cameras soon taken from combat operations operations from low (thermal rather than spatial) resolution And extraordinarily high product value In addition, The decrease in lapptop hardware value and software value puters. Since about 1980, better medical-suitable technology has been available hot thermocouple scale FPA processes have become more reachable, primarily LN2 cooled MCT scanners and then used widely, after 2000 and have been widely used in medicine, despite some methodological concerns leading to medical misinterpretation. CE certification was issued for the individual medical thermal photography process. in 2007, enabling them to be used as medical instruments for thermal measurement Complying with European Health Instructions. Other instruments minus CE health qualification are restricted as photography is not required. Functions for measurement and not being recording the temperature. A wide range of uses are covered by trained medical infrared imaging: breast area of female, rheumatology and orthopaedics, neurology, cardiac photography practical (swing -libration vascular thrombosis), lab test, surgical interventions and completing body picturing, containing sensitive of thermal effort tests thermal radiation.

Keywords: microwave , spectroscopy, diagnosis, metabolic diseases,

Introduction

Medical evaluation is based on both structural and functional evidence. Structural techniques are X-radiation, Doppler effect, light microscopy and the magnetic resonance electron. Electrocardiogram, hematology pressure measurement, electroencephalogram, pulmonary air flow management and thermos-picture are practical techniques.

Centered on state of the art technology, institutional criteria and protocols, and competent experiments,, each diagnostic technique has its own scientific methodology and knowledge base. Each method's diagnostic value It is distinguished by its highsensitivity and its precision (ability to diagnose illness).

The first decades of medical infrared thermography were not approved by the medical community due to many shortcomings(Many branched techniques and heath agreement, long-standing thermal structures, soft or without computer mechanical operations). The majority of doctors have favored good structural evaluation methods such as X-ray

(computer tomography) growth, Doppler effect and magnetic resonance electron.. Structural imaging by ills is easier to correlate with function processes. And there is a growing potential for thermal photography in modern medicine.

There is a strong diagnostic accuracy in IR thermography and can therefore classify medical safety rather than single decline from the condition of object medical safety. New horizons for IR thermography are opened by the recent shift from the conventional medical model A new approach to development (identifying and minimizing hazards) (diagnosis and repair) and improved identification of medicine and helping to support it could be possible.

Medicine's thermal picture

In 1956, [1] when patients of breast tumor were tested for asymmetric thermal spots rather than vascularity in IR picture of the breasts, the first recorded use of thermal picturing in medicine field .but some scientific results have been published ([2,3] and the first boom in medical field suppling of IR technology [4] was observed in the 1960s, [5] with the firstly process of breast tumor evaluation . In medicine today, thermal picture was not always accepted, primarily due to the early employ. The process, the shallow understanding of thermal images, and its poorly handled introduction to breast cancer detection in the 1970s [6] . Recently, developments have moved forward a series of activities in a range of related areas to identify the role of IR imaging in medicine [7,8,9,10,11] . These developments . In order to determine health status and assessment, an affectation-effective, non-surgical, non-harmful and friend of injured patients can also evaluate assistance, including the development of new-production thermal technology, intelligent image treatment viruses, and physiological illness-depending on thermal image information.

The region between visible and microwaves in the spectrum is dominated by IR radiation. Based on their temperature,, all objects in the universe emit radiation in the thermal area. It gives more strong radiation from the infrared when an object gets warmer, It radiates to a lower one, wavelength[9]. IR rays cannot be observed by the sight of a human, Thermal cameras and detectors can, however, be identified. Figure 1 displays the fine-scale IR spectral band. It is not settled on and can vary the boundaries between various IR spectral regions. The limits that we accept here [12,13]

In general, IR radiation encompasses wavelengths ranging from 0.751 m to 10001 m, among which typical human body emissions measured for diagnostic purposes only occupy a narrow band at wavelengths of 81 m to 121 m[14]. The thermal wave is predicated on references [16,16,17,18,19]. This area is also known as the infrared rays of the long-wave IR (LWIR) or body. Thermal infrared (TIR) is another concept generally used in medical IR imaging, which, as shown in Fig. 1, above Fig, spans wavelengths. The continuum of electromagnetics and the Thermal Sector roughly 1.41m.

In this area, the thermal emission is primarily heat or thermal radiation, and thus the thermo-graphy symbol. The image of the thermal exposure yield is known as the thermal image. The near infrared (NIR) zone occupies wavelengths between 0.751 m and 1.41m. In this region, the thermal diffusion we find is without thermal diffusion[18].

The use of multispectral imaging in medicine has been made possible by new-generation detectors, despite the near and mid-wave thermal locals are not commonly used in human body imaging photography in which both NIR[20] and MWIR (Once of Naval Research Press Release)are detected in various diagnostic cases. In this paper, we focus on the issue of thermal imaging in health with the entire thermal spectral region,

Understanding of IR Imaging Pathophysiologically Dependent

Thermal picturing is a biophysiological analysis that screens for minor physiological changes that several disorders, such as contusions, fractures, burns, carcinomas, lymphomas, melanomas, prostate cancer, dermatological diseases, rheumatoid arthritis, diabetes mellitus, deep venous thrombosis (DVT), liver disease, bacterial infections, etc., may trigger. Regional vasodilation, hyperthermia, hyperperfusion, hypermetabolism, and hypervascularization [21.22.23.24.25,26] are generally associated with these conditions, producing higher-temperature sources of heat. thermal picturing offers practical data non readily calculated with other tests, various picturing systems like X-radiation traditionally and computed tomography, which mainly it gives data on anatomical aspects. Proper employ of thermal pictures therefore useful in thickness biophysiological expertise its own eelective understanding. Tumor biological cells as a type of chronic genes modification from an natural biological cell resulted with certain equipped physical effects, such as chemical factors, X-radiation, ultra violet, etc. The imbalanced metabolic activity in all types of cancer cell.

It leads to the use of a large dose of blood glucose and results in a high dose of lact ate in the blood. In addition, the high metabolic rate of cancer cells causes an increase in local temperature as compared to nor- mal cells. These variables have allowed IR imaging to visualize the anomaly as a viable process. Thermal imaging provides the best complex strange cell information as the strange cell appears as a soft cell, despite being able to improve rapidly, working it as a high temperature spot in the thermal picture [27.28]. The heat originating from the heat supply and the hematological environment on the surface was quantitated using the betwwen biological cell and Pennes heat link equation [29]. This formula involves the shift in heat respect or biological cell attachment, the metabolic heat output of biological cell size, and the rate of hematology perfusion size whose strength is understood to be the difference in arterio-venous temperature [30].

$k \notin 2T$; cbwb(T ; Ta) + qm = 0 (1)

K is conductivity, qm is the tissue's volumetric metabolic rate, cbwb is the product of the basic heat power and the blood mass °ow rate per unit volume of biological cell, T is the unidentified tissue temperature, and Ta is the arte-rial temperature. Theoretically, considering the ema- nating heat from the surface of the body determined By solving the problem of heat movement, we can find the heat style of various internal parts of the body through high thermal imagery. Various states of solving heat transfer in the biological cell equation have been documented in literature [31,32].

Al- Although thermodynamics can quantify a thermal body's thermal radiation, the complexity of the biological body-related boundary conditions makes this method impractical.

A multi-stage analytical repair is biological spectroscopy, including initialization of spacemen, learning the spectrum, repair, and data analysis. One of these steps is hard to find recorded findings in appropriate handling tests [33]. Any molecule has an appropriate infrared spectrum, just like any molecule has its own appropriate vibrational properties. Based on this fact, wave frequency spectroscopy was regarded as a wonderful instrument in the characteristics of multi atomic components. Spectrum comprises a collection of acceptable characteristics such as band position, band depth, and band density with area re-running between bands and peaks to a representation of the multi atomic components of the specimen. These properties may be used in various environments, such as disease states, to acquire functional group information or track molecules. Raman spectroscopy, infrared spectroscopy, and 10[^] 12 Hz spectroscopy are used in wavelength spectroscopy. Ill states allow changes in multi-atomic structure, density, elements, and multi-molecular roles to be expressed in the frequency spectrum bands and can be resold with frequency spectroscopy device analyzed. [34,35]. Infrared spectroscopy consists of IR spectroscopy which is far, mid, and close. In biological and medical fields, vibrational spectroscopy has been commonly used. As a simple, precise, non-invasive, cost-effective and operator-independent tool, This analytical system offers distinct data to assess the spectral agent that increases from environmental and pathological conditions. Here in this chapter, we will discuss infrared analysis in the feature post. The characteristic effect is a recurrent instability between the state of power absorption and dissipation that activates hyper weight gain. In last years, the prevalence of obesity has risen significantly and achieved global epidemic proportions [36,37] .Unhealthy eating patterns, decreased physical activity, Life design improvement, planning, genetic preparation, and youth opposite contribute to an environment that promotes characteristics that allows these ills to be gradually diffused by most older classes.[38] .A level of specific body fat aggregation results in the respective improvement of a distinct metabolic virus like insulin confrontation, high glucose sensor, diabetes event, high blood pressure, blood fat adjustment, brain stopping, disease of fatty liver, disease of coronary heart, tumor, and disease of metabolic [39,40,41]. The advent of metabolic complications leads to genetic and environmental factors, leading to a major medicine and a major economic challenge. Obesity also causes performance to decline due to daily work failures, death ratio and chronic deficiency [42,43,44] Along with excess expenditure on health care. Early diagnosis is desperately needed, taking into account the non-health implications and medical hazards associated with more fat in the body.

A variety of approaches have been suggested for identifying and characterizing obesity and treating this global burden. The Quetelet Index represents the Body Mass Index (BMI, with unit, in kg/m2) that is widely used and measured in kilograms converted into meters squared by body weight, like body weight. Additionally, as a body fat code, ultra-weight (25-30 g/m2), [45] may be unique. The waist circumference (WC) is often used to track central obesity and is measured at a level between the lowest rib and the iliac crest. The risk of disease is determined by a cut-off of 102 cm for men and 88 cm for women with regard to the World Health Organization (WHO). This approach defines the danger of obesity poorly in relation to its systemic difficulties, such as the established issue of measuring bones. As more precise methods for measuring fat lining concentration and body fat spread, magnetic resonance imaging (MRI) or double energy X-radiation absorption (DEXA) have been used

[46] . They are expensive and inaccessible, so other techniques are skin layer thickness, double X-radiation power absorptiometry, bio-electrical resistance, preferred layout, down water calculation, CT scan, and close thermal contact. Most of the measured ones are costly and rely on theory and styles without control [47,48]. Because of the above-mentioned advantages, high sensitivity and ease of application. In the field of biophysical and medical articles, infrared wavelength represents the strong energy. In addition, during the appointment method, infrared frequency is recorded as a high that is more suitable to determine the amount of structure change, function, composition and separation of biologically in a relationship components in the specimen.

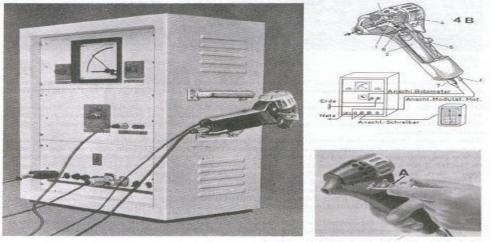
The interactions between matter and spectroscopy are based on (sample nalyzed)

Radiation wave frequency section. Infrared spectroscopy reflects the many well-known analytical methods that can be used to evaluate each type of spaceman, such as solutions, powders, liquids, pastes and top planesThermal frequencies have been economically useful since the 1940s [49]. The very structured increase in thermal wavelength is the beginning of the Fourier-transform formula in the spectrometer unit. This tool uses a coordination scale and potentially defines the Fourier-transformation mechanism as a benefit. Fourier-transform infrared wavelengths have the potential to notice specimens in their fluid state. The accuracy of IR spectra has been significantly improved and the time needed for data acquisition has been minimized [50,51]. Furthermore, with continuous progress in the laptop and light microscope combined with the computer, IR spectroscopy has made more substantial strides. This section abbreviates the essential ideas and their principles related by thermal wavelength and microscopy.

The infrared spectrometer is a system supplied to the infrared wavelength absorption watch that accepts the opening of the multi atom between changing levels of power. The different frequency between changing levels is expressed when the infrared frequency supplement is represented. Notification of infrared radiation absorption and a top peak is determined. If the absorbed frequency is limited, the infrared frequency and energy are measured as a wavelength function. With infrared study, the motion between strong frequency and curve changes is determined. A chemical infrared wavelength substance is a clone of a multi atomic for its fixed wavelength. Infrared microscopy is a kind of light microscopy, often referred to as IR micro scale spectroscopy, which is useful as a supply that moves infrared light frequencies to recognize the image of the specimen. The infrared microscope has optics like reflective properties that have allowed it to limit the spectrum of all thermal light wavelengths. This system normally consists of an FTIR spectrometer, an optical microscope, and an IR detector. In order to display various parts of the sample. At a single point, a straight array or centered in the plane array point, the infrared assessment will detect thermal light. This allows both topical and wavy information to be processed with respect to the specimen part. The microscope's FT infrared sample is reserved for FT infrared microscopy. The spectrometer's infrared radiation instruments focus on a sample position in the conventional x-radiation process of the light microscope. Upon moving through the sample that produces images of the sample within the restricted area at the microscope, the infrared bands are obtained with topical [52]. A variable aperture is located inside this image plane. The radiation is concentrated on the MCT detector by another condenser after that. Work to imagine the viewing of models clearly, there are also glass targets. Additionally, by moving mirrors in the optical train, the microscope can be transformed from the transmission mode to the reflectance mode.

1-Medical thermography and infrared imaging background

In Germany, the use of infrared thermography for medical targets started in 1952, together with physicist testing, SCHWAMM enhancement of an individual infrared thermometer detector for cascading thermal estimates of individual surface areas of the skin to determine outcomes [53]. Their method has been patented in many countries, including the USA. The individual thermographic health connected with them was noted in 1954. The Deutsche Gesellschaft für Thermographie and Regulationsmedizin e.V. (Deutsche Gesellschaft für Thermographie und Regulationsmedizin e.V., German Field for Thermal Imaging and Health Coordination) continues to be effective today. In the world, both created and tested medical thermographic medical ties. In figure 1, the first medical thermographic system is seen.



Ultrarot-Strahlungsmesser für Diagnostik und Therapiekontrolle nach Dr. Schwamm-Reeh.

Figure. 1: First thermographic medical unit, developed in 1953 by SCHWAMM and REEH

2- Thermography of electronic and LC (liquid crystal) contacts

The temperature of the skin may also be measured by touch measurement. For unique synthesis as well as plates for two-dimensional region shielding, like encapsulated LC LC, one of the essential thermal measurement thermocouples of electronics as Fig2 has been used (liquid cholesterol crystals, Fig.3) [54,55,56,57]. These tools are of historical use where they have _______ been



extremely expensive to use as long as thermal cameras have been used and are being installed at an early stage. A range of disadvantages, including contact interference with the restricted section.

Figure. 2: Thermocouples of electronics using for fustigation of medical

Figure. 3: touch thermos -picture device with fluid

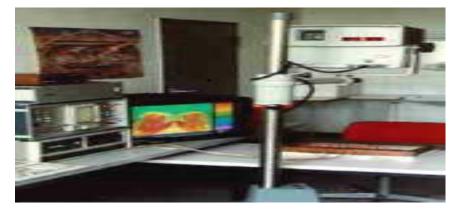


Figure. 4: The iconic 1985 Zeiss Icotherm

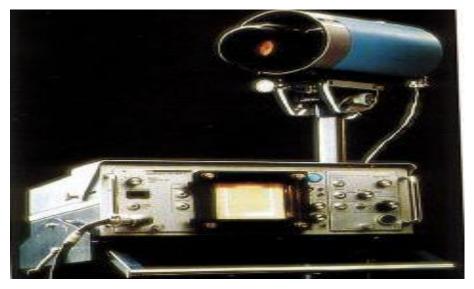


Figure 5: Thermovision cameras which are medically commonly Using

The last 20 years have been characterized by a "explosion" of thermal camera models and manufacturing rather than being used for health objectives. Their software program is growth, as it is historically based on the scanning sensor process. Furthermore, through completely new technology, individual thermal cameras, non-cooled focus plane array thermocouple cameras, found for health use, facing noise, still pattern, thermal withdrawal and increased instability at the beginning (Fig. 6).

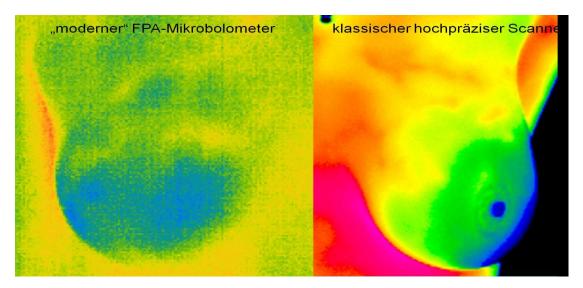


Figure. 6: Compare between cooled scanner sensor and non-cooled focus plane array cameras

Together with advanced microelectronic infrared cameras, significant advantages have recently been achieved. It is a slow recording (1 Hz) and therefore not a real-time imaging system, although it is still necessary to call the cooled MCT scanner the gold standard. Scanners for growth, such as the Jenoptik VarioScan HR (Fig. 7) by high analysis and greater stability, multi-sensitivity (better than 30 mK) and thermal drift estrangement, the illumination, penetrating, audio problem and pixel-free images are given.



Figure 7: The gold standard in medical thermography still today: Jenoptik VarioScan HR

The geometric resolution of even Compared to Megapixel cameras, the new high-resolution thermal cameras are lightweight and arrive to 1×10^6 sensors with resolution development .Thermal cameras are ideal for medical use with High Research Matrix Microbolometer Fig. 8).



Figure 8: Improved analysis 384x288 Jenoptik VarioCam HR

3- Early cameras for IR

The early infrared cameras were weak from today's point of view in terms of thermal and geometric resolution and many other things, For example, equilibrium, reproducibility, precise results . Nevertheless, they found that the measured values to be stated were therefore non-contact, dealing with the calculated skin, single employed with (Lawson, 1956.)[58] . In the mid-1980s, the researcher Carl Zeiss Oberkochen enhancement noticed heath system at a time span of several years. The Icotherm LN2 cooled MCT scanner (Fig. 4), which is sadly highly costly and unaffordable for doctors and clinics. For the most part, since 1983, BERZ [59.60,61,62] has used all cameras, the more approved watch hot machines (Fig. 5), the medical standard at high time. Body heat is produced and holds the center temperature is provided by metabolism and muscular activity, slowly vibration scale (close to 37 ° degree). The heat disappears from the body rather than the skin, convection, infrared ray, and surface steam when breathing and other processes, depending on both environmental factors and surface outcomes, Fig. (9).With convection (blood drift) and attachment, heat is transported within the organism.

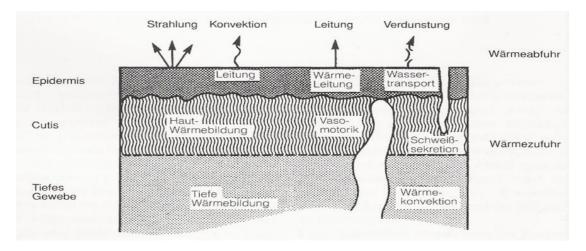


Figure. 9: On the surface of the biological cell, heat loss processes

There is no closely unlearned skin thermal blueprint under administered experimental conditions. That is the acquisition of, well explained by human physiology and pathophysiology, of various synergistic and antagonistic factors and processes. According to the PLANCK law, the dry human surface, nearly built black body [63], is a low thermal wave frequency with a high emission of about 10 μ m.

In general, the biological tissue has a "heat stairway" with the highest heat in the head and down the field escorted with the trunk and lowered to the digits of the toes farther on the limbs. There is excess heat that cannot be used while the skin is above the surface for diagnosis (for example, down the breasts section , Fig. 6). Lateral symmetry is the most important feature of the tissue surface temperature design.

3. Diagnostic Infrared Devices Medical Criteria

1- The IR Cameras

Medically appropriate IR cameras have to follow those specifications. The geometric resolution and temperature analysis of the detector components is similar to 80 °C or more,

ideally greater than 50 $^{\circ}$ C. It is important to reliably increase the computed values . It is important to keep the thermal drift in a very narrow range .

Several well-known infrared cameras have recently met these specifications. Individual infrared cameras used for medical computing must be medically CE-certified and certified in accordance with medical device legislation (in Germany Medizinproduktegesetz).2-Assessment and data administration

In a data analysis that has the capacity to be used in reading in any external medical program, the measurement information must be sent to the lossless data management system. Characteristic magnitude analysis used by many infrared camera instruments makes their cameras unsuitable for health use. The arrangement of magnitude in health artifacts is extremely constrained and cannot be accomplished by standard software programs supplied by many universally available infrared cameras. All IR applications emoloyed for health objectives must be certified rather than approved in accordance with the regulations on medical devices, similar to IR cameras (in Germany Medizinproduktegesetz).

3- Method of data assessment and diagnosis

The challenging and softer link with the health infrared thermal image sequence is the use of a checked, evaluated and clinically reliable software solution. A CE certifying body must testify to the overall accuracy of the thermal camera movement measurement study via a laptop in the medical infrared external software program. On the basis of precise measurement results, medical IR services will evaluate the data evaluation process and provide recommendations for pathological processes, diagnostic relevance, and therapeutic considerations. Medical Officer.

4-Protocols and standardization

Medical infrared thermography has been distinguished by a lack of agreed and mandatory general requirements in recent decades. Before and during the test, these requirements shall cover In the clinic, patient planning and patient management (details in ROST [60].

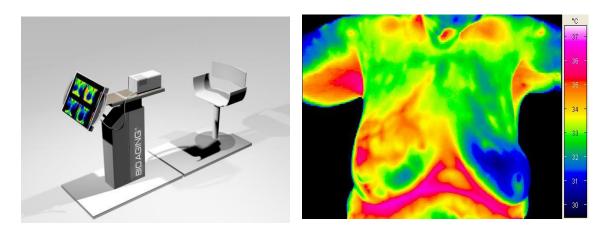
Similarly, the data management and storage procedures, the use of geometric or other assessment methods, and the statistical techniques used must obey agreed protocols. Unlike the situation in the USA, where there are many competing medical associations and academies, there are only two approved and cooperating infrared thermography medical societies in Europe: the Deutsche Gesellschaft für Thermographie und Regulationsmedizin e.V., referred to above. (DGTR Deutsche Gesellschaft für Thermographie and Control Medicine), which has been in existence .

Health consumers with unsafe approved infrared thermal image systems (referring to health staff, experienced physicians, clinic managers, etc.) are more detrimental to the option of both fines and expenses without harmonious infrared equipment.

4. Medical Infrared Imaging utilization Developed

There are several medical areas where it is possible to apply infrared thermography. Just a brief description (details in BERZ [64,65,66,67] in ROST and BERZ [68] and BERZ and SAUER can be given here.

- A- Breast imaging in the infrared (Fig. 11)
- B- Whole body Infrared Control picturing thermal I(Fig. 10)
- C- Divisional infrared photography of some body parts
- D-Joint pain, protection of the bone, joint picturing (Fig. 12)
- E- Neuroscience F- blood capillary vessels, Infrared venous, arterial and vein picturing Fig. 13



Figs. 10 and 11: Kit for inspection (left) and corresponding image of breast cancer

(right)

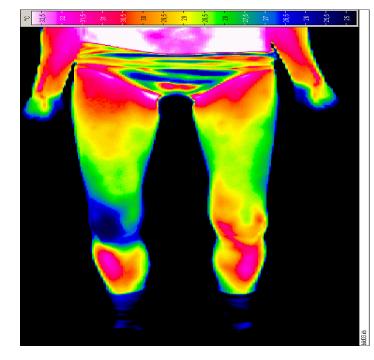


Fig. 12: Gonarthritis of the left knee:

Discussion and conclusion

This article addressed recent medical thermography research advances with an emphasis detection of breast tumor at an early stage. The aim is to demonstrate that infrared imaging is appropriate to be used as an individual phase to complement both health surveillance and medical assessment with regard to the use of infrared devices, the image treatment system and electrocardiogram pathophysiological design. We have set up a website [69] to enable scientists working within the medical tomography limit to share article findings. We appreciate this set list's contributions to Enrich.

The infrared instrument is a spectroscopic oscillator device that depends on the type of infrared radiation compared to the concussion of multi-atom bonds [70]. It is a versatile instrument for studying biomolecules, cells, and tissue Alterations in structure, roles, and composition. In recent years, the efficiency of this technique In medical cases, like tumors and metabolic diseases, has continued to be enhanced by scientific researchers. Obesity one of the main factors in tissues like adipose, liver, and muscle is That rising the number of harmful diseases. Unilateral blockages and consequences. Using infrared device system, it is possible to classify molecular modifications as a result of obesity, to consider the multi-atom activity of the disease, and accurate biomarkers of the spectrum that can be used for diagnosis can be identified. In addition, to classify the required The medications, and their medication doses, these spectral biomarkers may be used. Applications of spectroscopic and microscopic infrared techniques for characterization. This chapter addresses understanding the diagnosis of magnitude, the metabolism of immensity will resolve the unequal influence of these approaches.Such new methods in the future, light will be added to the estimation of importance in medical applications [71].

Capturing and analyzing infrared images is an excellent technology that enables noncontact, non-invasive biological system investigation, both in preclinical research environments and in patient clinical evaluation. No harmful radiation or other interventions are exposed to the examined specimen, and thus infrared imaging can be considered to be one of the few genuinely green imaging technologies with a great potential for widespread use both in various clinical medicine specialties and in research settings [72].

It is a low-cost, non-radioactive detection tool for the study of skin temperaturerelated physiological roles called medical infrared thermography that has been used without surgery. Medical thermography has been made a reliable medical measurement instrument by technical advances. A scientific literature search [73] was carried out in order to explore the long-standing assessment and warning value of medical thermography in general medical research. Endocrine glands, repair medicine, musculoskeletal sweats, neural vacillates, tumors and surgery, hover in the area of capillary sweats, We have identified prospective applications. It also helps to know the way Western medical program activities, such as Ayurveda, yoga, and pricked danbees. Coming research must focus on medical thermography testing and clinical modification feasibility testing [35].

References

- Lawson R. N.. Implications of surface temperature in the diagnosis of breast cancer. Canad Med Assoc J, 75:309-310, 1962
- [2] Lawson R. N. and Chughtai. M. S. Breast . cancer and body temperatures. Can Med Assoc J, 88:68-70, 1963.
- [3] Handley R. S..2The temperature of breast tumors as a pos- sible guide to prognosis. Acta Unio Int Contra Cancrum, 18:822, 1963
- [4]] Gershen-Cohen J., Haberman, J. and Brueschke E. E., Medical thermography: a summary of current status. Radiol Clin North Am, 3:403-431. 1965
- [5] Haberman J. The presetn status of mammary thermog- raphy. Ca A Cancer Journal for Clinicians, 18:314-321, 1968
- [[6] Keyserlingk, J. R Ahlgren, P. D.. Belliveau, E. Yu, N and assa M. Y. Functional infrared imaging of the breast.IEEE Engineering in Medicine and Biology, pages 30-41, May/June . 2000
- [7 Anbar M. Quantitative and dynamic telethermometry-a fresh look at clinical thermology. IEEE Engineering in Medicine and Biology Magazine, 14(1):15-16, Jan.-Feb. 1995
- [8] Head, J. F Wang F., Lipari C. A, and. Elliott R. L. The important role of infrared imaging in breast cancer. IEEE Engineering in Medicine and Biology, pages 52-57, May/June. 2000.
- [9] Head J. F. and. Elliott R. L Infrared imaging: making progress in ful⁻lling its medical promise. IEEE Engineer-ing in Medicine and biology Magazine, 21(6):80-85, Nov.- Dec.. 2002
- [10] Jones. B. F. A reappraisal of the use of infrared ther- mal image analysis in medicine. IEEE Transactions on Medical Imaging, 17(6):1019-1027, December. 1998
- [11]. Keyserlingk. J. Time to reassess the value of infrared breast imaging? Oncology News Int., 6(9), 1997
- [12] AL-dulamey,1 Q. KH, Ismail2 A. H. and Al-Jawwady3, Yasi, A. Testicular Effect of Electromagnetic Radiation on the Function of White Mice .Iraqi Journal of Veterinary Medicine Vol.39 N(2) pp48-54 2015.
- [13]AL-Dulamey Q. KH., Al-Jawwady Yasir A., Ismail A. H., Biophysical Effect of Electromagnetic Radiation on Sex Ratio of White Mice. International Journal of Advanced Research, Volume 3, Issue 6, 1149-1155. 2015.
- [14]AL-dulamey Q. K., Ismail A. H. and Al-Jawwady Yasir, A. Biophysical effect for electromagnetic radiation on some blood factors of Swiss albino Female mice. IRAQ Journal of Veterinary Medicine . vol39 N0.2: pp 12-14. 2015.
- [15]AL-Dulamey Q. K., Ismail Abd –Alkareem H. and Al-Jawwady Yasir, A. Biophysical effect of EMR with 5 GHz on male reproductive system of Mus musclus mice .Raf.j. Sci, .Vol,27No.5/Zoology special Issue for the third Scientific Conference of Biology pp.1-11. 2018.
- [16] Electromagnetic spectrum. http://www.lbl.gov/ MicroWorlds/ALSTool/EMSpec/EMSpec2.html. 2001..
- [17] HyperPysics. http://hyperphysics.phy-astr.gsu.edu/ hbase/ems1.html#c1. 2002
- [18] Infrared. http://en.wikipedia.org/wiki/Infrared. 2002.
- [19] Near, mid & far infrared. http://www.ipac.caltech edu/Outreach/Edu/Regions/irregions.html. 2001.
- [20] Thermal imaging. http://www.ibd.nrc-cnrc.gc.ca/ english/spec_e_thermal.htm. 2002.
- [21] Whale. J. An introduction to dynamic radiometric ther- mal diagnostics and dielectric resonance management procedures. Positive Health. 2001
- [22]. Mans eld J. R. Sowa⁻, M. G., Payette J. R, Abdul- rauf B., Stranc M. F, and Mantsch. H. H. Tissue viability by multispectral near infrared imaging: a fuzzy C-means clustering analysis. IEEE Trans. on Medical Imaging, 17(6):1011{1018, December. 1998.
- [23]Once of Naval Research Press Release. September .Detecting breast cancer with a new algorithm and a multispectral infra-red imaging system. http://www.onr.navy.mil/media/article.asp?ID=14,. 2002.
- [24] Anbar M. Clinical thermal imaging today. IEEE Engi-neering in Medicine and Biology Magazine, 17(4):25-33,. 1998.
- [25 Bale. M. July-Aug. 1998. High-resolution infrared technology for soft- tissue injury detection. IEEE Engineering in Medicine and Biology Magazine, 17(4):56-59,.
- [26]. Harding J. R. . Investigating deep venous thrombosis with infrared imaging. IEEE Engineering in Medicine and Bi- ology Magazine, 17(4):43-46, 1998.
- [27] Jones B. F. and. Plassmann. P. Digital infrared thermal imaging of human skin. IEEE Engineering in Medicine and Biology Magazine, 21(6):41-48, Nov.- 2002..
- [28] Ring.] E. F. J. Progress in the measurement of human body temperature. IEEE Engineering in Medicine and Biology Magazine, 17(4):19-24. 1998.
- [29]Szabo T., Fazekas L, Geller L, Horkay, F. Merkely. B. Gyongy, T and Juhasz-Nagy. May-June .A Cardiothermographic assessment of arterial and venous revascularization. IEEE Engineering in Medicine and Biology Magazine, 19(3):77-82, 2000.
- [30]. Hay. G. A. Medical Image: Formation, Perception and Measurement. The Institute of Physics and John Wiley & Sons, 1976.
- [31]Watmough. D. J. The role of thermographic imaging in breast screening, discussion by C R Hill. In Medical Images:formation, perception and measurement 7th L H Gray Conference:Medical Images, pages 142-158, 1976.
- [32] Pennes. H. H. Analysis of tissue and arterial blood tem-perature in resting human forearm. Journal of Applied Physiology, 2:93-122, 1948.
- [33] Ng E. Y. K. and. Sudarshan. N. M. Numerical computa- tion as a tool to aid thermographic interpretation. Journal of Medical Engineering and Technology, 25(2):53-60. 2001.

- [34]Chan C. L. Boundary element method analysis for the bioheat transfer equation. ASME J. Heat Transfer,114:358-365, 1992
- [35] Hsu, T. R. Sun N. S, and Chen. G. G.Finite element formulation for two dimensional inverse heat conduction analysis. ASME J. Heat Transfer, 114:553-557, 1992.
- [36] Severcan F, Haris PI. Vibrational Spectroscopy in Diagnosis and Screening. Amsterdam: IOS Press;pp. 12-52. DOI: 10.3233/BSI-130036. 2012
- [37] Baloglu FK, Severcan F.Characterization and differentiation of adipose tissue by spectroscopic and spectral imaging techniques.In: Szablewski L, editor. Adipose Tissue. Rijeka, Croatia: InTechOpen;. DOI: 10.5772. 2018 intechopen.75156
- [38] Maiano C, Hue O, Morin AJ, et al. Prevalence of overweight and obesity among children and adolescents with intellectual disabilities: A systematic review and meta-analysis. Obesity Reviews.;17:599-611. DOI: 10.1111/ obr.12408. 2016
- [39] Zylke JW, Bauchner H. The unrelenting challenge of obesity. Journal of the American Medical Association.;315:2277-2278. DOI: 10.1001/jama.2016.6190. 2016
- [40] Kevin NK, Vinicius FC, Rodrigo C, et al. Molecular events linking oxidative stress and inflammation to insulin resistance and β-cell dysfunction. Oxidative Medicine and Cellular Longevity.:181643. DOI: 10.1155/2015/181643. 2015.
- [41]] Afshin A, Forouzanfar MH, Reitsma MB, et al. Health effects of overweight and obesity in 195 countries over 25 years. The New England Journal of Medicine.;377:13-27. DOI: 10.1056/ NEJMoa1614362. 2017
- [42] Jacome-Sosa MM, Parks EJ. Fatty acid sources and their fluxes as they contribute to plasma triglyceride concentrations and fatty liver in humans. Current Opinion in Lipidology ;25:213-220. DOI: 10.1097/ MOL.0000000000000080. 2014
- [43] Hubler MJ, Kennedy AJ. Role of lipids in the metabolism and activation of immune cells. The Journal of Nutritional Biochemistry. 2016;34:1-7. DOI: 10.1016/j. jnutbio. 11.002 2015.
- [44] Andreyeva T, Sturm R, Ringel JS.Moderate and severe obesity have large differences in health care costs. Obesity Research.;12:1936-1943. DOI: 10.1038/oby.2004.243. 2004
- [45] Dee A, Kearns K, O'Neill C, et al. The direct and indirect costs of both overweight and obesity: A systematic review. BMC Research Notes.;7:242. DOI: 10.1186/1756-0500-7-242 2014
- [46] Tremmel M, Gerdtham UG, Nilsson PM, et al. Economic burden of obesity: A systematic literature review. International Journal of Environmental Research and Public Health.;14(4):435. 2017
- [47] Falagas ME, Kompoti M. Obesity and infection. The Lancet Infectious Diseases.;6:438e46. DOI: 10.1016/ S1473-3099(06)70523-0. 2006
- [48] Seabolt LA, Welch EB, Silver HJ. Imaging methods for analyzing body composition in human obesity and cardiometabolic disease. Annals of the New York Academy of Sciences.;1353:41-59. DOI: 10.1111/nyas.12842. .2015
- [49] Azizian H, Kramer JK, Heymsfield SB, et al. Fourier transform near infrared spectroscopy: A newly developed, non-invasive method to measure body fat: Non-invasive body fat content measurement using FT-NIR. Lipids.;43(1):97-103. DOI: 10.1007/s11745-007-3121. 2008
- [50] Bernhard AB, Santo MA, Scabim VM, et al. Body composition evaluation in severe obesity: A critical review. Advances in Obesity, Weight Management & Control.;4(6):00113. DOI: 10.15406/ aowmc.2016.04.00113. 2016
- [51] Stuart B. Infrared Spectroscopy: Fundamentals and Applications. England: John Wiley & Sons; pp. 15-44. DOI: 10.1002/0470011149. 2004.
- [52] Griffiths PR, Haseth JA. Fourier Transform Infrared Spectrometry.2nd ed. New York: Wiley; pp. 1240-1241. DOI: 10.1002/ bbpc.19860901224 . 1986.
- [53] Stuart B. Analytical Techniques in Materials Conservation. Chichester: Wiley; p. 113. DOI:10.1002/9780470060520. 2007
- [54][Movasaghi Z, Rehman S, Rehman I. Fourier transform infrared (FTIR) spectroscopy of biological tissues. Applied Spectroscopy Reviews ;43(2):134-179. DOI: 10.1080/05704920701829043. 2008
- [55] Dogan A, Lasch P, Neuschl C, et al. ATR-FTIR spectroscopy reveals genomic loci regulating the tissue response in high fat diet fed BXD recombinant inbred mouse strains. BMC Genomics.;14:386. DOI: 10.1186/1471-2164-14-386. 2013
- [56] Baloglu FK, Baloglu O, Heise S, et al.Triglyceride dependent differentiation of obesity in adipose tissues byFTIR spectroscopy coupled with chemometrics. Journal of Biophotonics.;10(10):1345-1355. DOI: 10.1002/ jbio.201600223. 2017
- [57] Schwamm E, Reeh J: Die Ultrarotstrahlung des Menschen und seine Molekularspektroskopie. Hippokrates 24, 737-742. 1953.
- [58] Rost A: Untersuchungen über Kontakt und kontaktlose thermographische Messungen. Phys Med Rehab 21, 610-614. 1980.
- [59] Rost A: Die thermischen Regulationsphänomene und ihre Bedeutung für Diagnose und Prognose. Thermologische Fachberichte, notamed, Baden-Baden .1983
- [60] Rost A: Lehrbuch der Regulationsthermographie. Stuttgart 1994
- [61] Fergason JL: Liquid crystals. Scientific American 211, 76-85.1964.
- [62] Lawson RN: Implications of surface temperature in the diagnosis of breast ledions. Canad Med Ass 75, 309. 1956.
- [63] Berz R: Therapieplanung und Therapiekontrolle mit Hilfe der Thermoregulationsdiagnostik. ErfHK 34 .916-922 . 1985

- [64] Berz R: Das Wärmebild und die Reaktion auf Abkühlung bei jungen gesunden Probanden. Ärztezeitschrift f Naturheilverfahren 26,237-243. 1985
- [65] Berz R: Thermographie im Wirbelsäulenbereich. Thermodiagnostik 1 ,20.1985
- [66] Berz R: Introducing Regulation into Infrared Imaging: ReguVision and MammoVision. In: Institute of Electronics, Technical University of Lodz (Ed): Proceedings of the 4th National Conference "Termografia i Termometria w Podczerwieni" TTP 2000. Lodz, Poland, 206-212. 2000
- [67] Berz R: Infrared Regulation Imaging (IRI) a different approach to health, wellness, and to prevention. ThermoMed 16 ,49-58 .2000
- [68] Berz R: MammoVision A New Approach to Diagnosis and Prevention of Breast Cancer. In: Benkö I, Kovaczicz I, Lovak I (Eds.): 12th International Conference on Thermal Engineering and Thermogrammetry (THERMO), Budapest. Mate, Hungary, 2001, 265-272. 2001
- [69] Berz R: Punktuelle und flächige Brustthermographie im Kontakt- und Infrarotverfahren eine vergleichende Übersicht. ThermoMed 17/18, 29-51. 2002
- [70] Rost A, Berz R: Regulationsthermographie nach Rost. In: Augustin M, Schmiedel V (Eds): Leitfaden Naturheilkunde – Methoden, Konzepte und praktische Anwendung. München (Urban und Fischer), 503-510. 2003
- [71] Berz R, Sauer H: Infrarot Regulations Imaging innovative Funktionsdiagnostik f
 ür Fr
 üherkennung, Pr
 ävention und Problemf
 älle. (Infrared Regulation Imaging (IRI) - innovative functional diagnosis for early detection, prevention and solving unclear complaints) ErfHK 55, 241-250 2006
- [72] Berz R, Sauer H: Comparing effects of thermal regulation tests (cool air stimulus vs. cold water stress test) on infrared imaging of the female breast. In: Institute of Physics and Engineering in Medicine (Ed): Clinical temperature measurement & thermography. York, UK, , 36-41. 2007
- [73] Berz R, Sauer H: Thermographie und Infrarot Regulations Imaging (IRI). In: Augustin M, Schmiedel V (Eds): Leitfaden Naturheilkunde - Methoden, Konzepte und praktische Anwendung. München (Elsevier, Urban und Fischer), 479-487. 2007