



La science pour la santé From science to health



IN VIVO REAL-TIME MASS SPECTROMETRY FOR GASTRIC CANCER GUIDED SURGERY WITH **SPIDERMASS**

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INTRODUCTION Mass analyzer In 2011, the number of esogastric cancers were estimated at 1,500,000 new cases and **1.** Laser microprobe 2,110,100 new cases are expected in 2025. The detection of the esogastric cancer is ✓ Mini invasive sampling generally at a late stage and a surgical procedure is usually carried out. To avoid a risk of ✓ Generation of gas phase relapse, the surgeons take between 5 and 8 cm of cancer margins but only a histological ions diagnosis is performed to ensure the total removal of cancer cells. However, the time of histological diagnosis lasts more than 30 minutes and cannot provide a quick answer for the surgeons. This diagnosis is long and shows an error rate around 25%. In addition, the poorly 2. Transfer line ✓ Real-time transmission Ion transfer of the generated aerosol tubing Laser fiber from the probe to the MS system 3. Mass spectrometer (MS) Micro sampling ✓ Real-time MS analysis **Poorly cohesive cells** device 4. Data Processing ✓ Real-time interrogation of a molecular databank via classification models

cohesive carcinoma, an aggressive form of esogastric cancer, is difficult to identify in some cases, and new diagnosis need to be developed to bring a more accurate diagnosis. Since 2014, Prism laboratory has been developing a new ambient mass spectrometry system designed for in vivo and real time guided surgery: the SpiderMass. This system has shown the capability to analyze biopsies and correctly assigned a classification of tumor subtype and grade. Here, we present the analysis of ex vivo biopsies using the Spidermass and Maldi-Imaging to classify the esogastric cancer.

Tubular, Papillary, Mucinous





EXPERIMENTAL DESIGN



FREGAT national clinico-biological database

- >Clinical, socio-economical, psychological data
- >40% inclusions in Lille, 78 publications, 42 clinical







→ Based on the molecular profile, we can determine the nature of the biopsies.

CONCLUSIONS

- SpiderMass can molecularly distinguish between adenocarcinoma and PCC biopsies. More biopsies need to be analyzed to create a robust databank.
- We can cross-validate the most discriminant lipid features with MALDI-MSI
- In the future, the SpiderMass diagnosis will be tested in peroperative conditions and compared to the pathologist diagnosis.

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heterogeneity of tissue.

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