Plasma Mexander Fridman | Gary Friedman



Contents

<u>Cover</u>

Title Page

<u>Copyright</u>

Preface

<u>Acknowledgements</u>

Chapter 1: Introduction to Fundamental and Applied Aspects of Plasma Medicine 1.1 Plasma medicine as a novel branch of medical technology 1.2 Why plasma can be a useful tool in medicine 1.3 Natural and man-made, completely and weakly ionized plasmas 1.4 Plasma as a non-equilibrium multitemperature system 1.5 Gas discharges as plasma sources for biology and medicine 1.6 Plasma chemistry as the fundamental basis of plasma medicine 1.7 Non-thermal plasma interaction with cells and living tissues 1.8 Applied plasma medicine

<u>Chapter 2: Fundamentals of Plasma</u> <u>Physics and Plasma Chemistry for</u> <u>Biological and Medical Applications</u>

2.1 Elementary plasma generation processes
2.2 Excited species in plasma medicine:
Excitation, relaxation and dissociation of neutral particles in plasma
2.3 Elementary plasma-chemical reactions of excited neutrals and ions
2.4 Plasma statistics, thermodynamics, and transfer processes
2.5 Plasma kinetics: Energy distribution functions of electrons and excited atoms and molecules
2.6 Plasma electrodynamics

<u>Chapter 3: Selected Concepts in Biology</u> and Medicine for Physical Scientists

3.1 Molecular basis of life: Organic molecules primer

3.2 Function and classification of living forms

3.3 Cells: Organization and functions

3.4 Overview of anatomy and physiology

<u>Chapter 4: Major Plasma Disharges and</u> <u>their Applicability for Plasma Medicine</u>

<u>4.1 Electric breakdown and steady-state regimes</u>
<u>of non-equilibrium plasma discharges</u>
<u>4.2 Glow discharge and its application to biology</u>
<u>and medicine</u>

<u>4.3 Arc discharge and its medical applications</u> <u>4.4 Radio-frequency and microwave discharges in</u> <u>plasma medicine</u>

4.5 Coronas, DBDs, plasma jets, sparks and other non-thermal atmospheric-pressure streamer discharges

4.6 Discharges in liquids

<u>Chapter 5: Mechanisms of Plasma</u> <u>Interactions with Cells</u>

5.1 Main interaction stages and key players

5.2 Role of plasma electrons and ions

5.3 Role of UV, hydrogen peroxide, ozone and water

5.4 Biological mechanisms of plasma interaction for mammalian cells

<u>Chapter 6: Plasma Sterilization of Different</u> <u>Surfaces and Living Tissues</u>

6.1 Non-thermal plasma surface sterilization at low pressures

6.2 Surface microorganism inactivation by nonequilibrium high-pressure plasma

6.3 Plasma species and factors active for sterilization

6.4 Physical and biochemical effects of atmospheric-pressure air plasma on microorganisms

6.5 Animal and human living tissue sterilization

6.6 Generated active species and plasma sterilization of living tissues
6.7 Deactivation/destruction of microorganisms due to plasma sterilization: Are they dead or just scared to death?

Chapter 7: Plasma Decontamination of Water and Air Streams

7.1 Non-thermal plasma sterilization of air streams

7.2 Direct and indirect effects in non-thermal plasma deactivation of airborne bacteria

7.3 Non-thermal plasma in air-decontamination: Air cleaning from SO₂ and NO₂

7.4 Non-thermal plasma decontamination of air from volatile organic compound (VOC) emissions 7.5 Plasma desinfection and sterilization of water

Chapter 8: Plasma Treatment of Blood

8.1 Plasma-assisted blood coagulation 8.2 Effect of non-thermal plasma on improvement of rheological properties of blood

Chapter 9: Plasma-assisted Healing and Treatment of Diseases

9.1 Wound healing and plasma treatment of wounds

9.2 Treatment of inflammatory dysfunctions

<u>9.3 Plasma treatment of cancer</u>

<u>9.4 Plasma applications in dentistry</u> <u>9.5 Plasma surgery</u>

Chapter 10: Plasma Pharmacology

10.1 Non-thermal plasma treatment of water 10.2 Deionized water treatment with DBD in different gases: Experimental setup 10.3 Deionized water treatment with DBD in different gases: Results and discussion 10.4 Enhanced antimicrobial effect due to organic components dissolved in water 10.5 Summary

<u>Chapter 11: Plasma-assisted Tissue</u> <u>Engineering and Plasma Processing of</u> <u>Polymers</u>

11.1 Regulation of biological properties of medical polymer materials 11.2 Plasma-assisted cell attachment and proliferation on polymer scaffolds 11.3 Plasma-assisted tissue engineering in control of stem cells and tissue regeneration 11.4 Plasma-chemical polymerization of hydrocarbons and formation of thin polymer films 11.5 Interaction of non-thermal plasma with polymer surfaces

<u>References</u>

<u>Index</u>

Plasma Medicine

Alexander Fridman and Gary Friedman Drexel University, Philadelphia, PA, USA



This edition first published 2013 © 2013 John Wiley & Sons, Ltd

Registered office

John Wiley & Sons Ltd, The Atrium, Southern Gate, Chichester, West Sussex, PO19 8SQ, United Kingdom

For details of our global editorial offices, for customer services and for information about how to apply for permission to reuse the copyright material in this book please see our website at <u>www.wiley.com</u>.

The right of the author to be identified as the author of this work has been asserted in accordance with the Copyright, Designs and Patents Act 1988.

All rights reserved. No part of this publication may be reproduced, stored in a retrieval system, or transmitted, in any form or by any means, electronic, mechanical, photocopying, recording or otherwise, except as permitted by the UK Copyright, Designs and Patents Act 1988, without the prior permission of the publisher.

Wiley also publishes its books in a variety of electronic formats. Some content that appears in print may not be available in electronic books.

Designations used by companies to distinguish their products are often claimed as trademarks. All brand names and product names used in this book are trade names, service marks, trademarks or registered trademarks of their respective owners. The publisher is not associated with any product or vendor mentioned in this book. This publication is designed to provide accurate and authoritative information in regard to the subject matter covered. It is sold on the understanding that the publisher is not engaged in rendering professional services. If professional advice or other expert assistance is required, the services of a competent professional should be sought.

The publisher and the author make no representations or warranties with respect to the accuracy or completeness of the contents of this work and specifically disclaim all warranties, including without limitation any implied warranties of fitness for a particular purpose. This work is sold with the understanding that the publisher is not engaged in rendering professional services. The advice and strategies contained herein may not be suitable for every situation. In view of ongoing research, equipment modifications, changes in governmental regulations, and the constant flow of information relating to the use of experimental reagents, equipment, and devices, the reader is urged to review and evaluate the information provided in the package insert or instructions for each chemical, piece of equipment, reagent, or device for, among other things, any changes in the instructions or indication of usage and for added warnings and precautions. The fact that an organization or Website is referred to in this work as a citation and/or a potential source of further information does not mean that the author or the publisher endorses the information the organization or Website may provide or recommendations it may make. Further, readers should be aware that Internet Websites listed in this work may have changed or disappeared between when this work was written and when it is read. No warranty may be created or extended by any promotional statements for this work. Neither the publisher nor the author shall be liable for any damages arising herefrom.

Library of Congress Cataloging-in-Publication Data Fridman, Alexander A., 1953– Plasma medicine / Alexander Fridman, Gary Friedman. p. ; cm. Includes index. ISBN 978-0-470-68970-7 (cloth) – ISBN 978-0-470-68969-1 (paper) I. Friedman, Gary (Gary G.) II. Title. [DNLM: 1. Biomedical Engineering. 2. Plasma Gasestherapeutic use. 3. Plasma Gases-pharmacology. 4. Wound Healing. QT 36] 610.28-dc23 2012025754

A catalogue record for this book is available from the British Library.

Print ISBN: Cloth: 9780470689707 Paper: 9780470689691

Preface

Plasma medicine has inspired the last decade of the authors' professional activities at Drexel Plasma Institute of the Drexel University. Plasma medicine is a very exciting and new multidisciplinary branch of modern science and technology. Even the term 'plasma medicine' has only been in existence since the start of the 21st century. Plasma medicine embraces physics required to develop novel discharges relevant for medical plasma applications, medicine to apply the technology not only in vitro but also in vivo testing and, last but not least, biology to understand the complicated biochemical processes involved in plasma interaction with living tissues.

While an understanding of the mechanisms by which nonthermal plasma interacts with living systems has begun to emerge only recently, a significant number of journal publications and even reviews focused on plasma medicine appeared during the last 5-10 years. Several have prestigious journals have published special issues dedicated to the topic, the new *Plasma Medicine* journal has been recently inaugurated, multiple world symposiums have created special sessions in this new field and plasma medical workshops have been organized in the USA, Germany, France, Korea, Japan, China and other countries. Four successful International Conferences on Plasma Medicine (ICPM) took place during the last 7 years in the USA, Germany and France; the 5th ICPM is planned to be held in Japan. Finally, the International Society on Plasma Medicine has been organized to coordinate the efforts of physicist, chemists, biologists, engineers, medical doctors and representatives of the industry working in this new field.

Despite the tremendous interest in plasma medicine, no single monograph has published in this field. There is no book where recent developments in plasma medicine, both technological and scientific, are described in a fashion accessible to the highly interdisciplinary audience of doctors, physicists, biologists, chemists and other scientists, university students and professors, engineers and medical practitioners. This is exactly the goal of the present Plasma Medicine book. The book is written for numerous scientists professors medical practitioners, students, and and industrial professionals who are involved today in plasma medicine.

When kept writina the book. in mind we the multidisciplinary nature of the field of plasma medicine. Physicists, chemists and engineers should be able to learn the different terminology of their biologist and medical practitioner partners, and vice versa. The book is beneficial to sides and should promote more effective development of the field of plasma medicine. The subject of plasma medicine has recently been included in the academic curriculum of universities, and we hope that the book will be helpful in this regard to students (as well as professors) involved in plasma-medical education.

Plasma Medicine consists of 11 chapters; Chapters 1–5 are focused on the **fundamentals of plasma medicine** and Chapter 6–11 are focused on **applied plasma medicine**.

Chapter 1 introduces the subject of plasma medicine. Chapter 2 describes the fundamental physical and chemical processes in plasmas relevant to its interaction with living tissues, providing a basic introduction to plasma medicine. Chapter 3 describes fundamental biology relevant to an understanding of the major principles of plasma interaction with living tissues. This topic covers the basic biological and medical introduction to plasma medicine, and will help physicists and engineers understand that even simple living

are much more complicated than electric organisms describes plasma devices. Chapter 4 physics and engineering of the systems and devices relevant for medical applications. This chapter covers physical, chemical and engineering aspects of major electric discharges used for plasma-medical applications. In chapter 5, a description of the biophysical and biochemical mechanisms of plasma interaction with living tissues is provided. This chapter enables an understanding of the kinetics of plasma interaction with eukaryotic and prokaryotic cells, starting from gas phase and surface processes stimulated by active plasma species and including the consequent biochemical processes inside the cells.

Chapters 6 and 7 describe plasma sterilization of inanimate surfaces, as well as plasma sterilization of water and air. These chapters cover multiple applications of different low-pressure and atmospheric-pressure nonthermal discharges for disinfection and sterilization of different surfaces (e.g. medical instruments, food, spacecrafts etc.); natural, drinking and industrial water; and largevolume air flows. Chapter 8 is focused on plasma-induced cauterization and blood coagulation. Plasma control of blood composition and relevant plasma treatment of blood diseases is also discussed in this chapter. Chapter 9 describes plasma treatment and healing of different wounds and diseases, in particular, plasma abatement of skin, dental and internal infections, treatment and healing of wounds and plasma treatment of oncological (cancerous), gastrointestinal, cardiovascular and other diseases. Chapter describes plasma pharmacology, which 10 suggests preliminary plasma treatment of water or special organic or inorganic solutions. These plasma-treated solutions can then be utilized for sterilization or healing purposes. The last chapter is focused on basic aspects of plasma-medical tissue engineering. This topic covers major modern aspects

of plasma treatment of biomaterials and plasma-supported tissue engineering. This very important topic of applied plasma medicine is not directly related to plasma interaction with living tissue. This part of modern plasma medicine is very interesting, significant and relatively better developed (in particular, by our colleagues from University of Bari) than other branches; only a concise review of the subject is provided in this book.

Instructors can access PowerPoint files of the illustrations presented within this text, for teaching, at <u>http://booksupport.wiley.com</u>.

Alexander Fridman and Gary Friedman Philadelphia

Acknowledgements

The authors gratefully acknowledge the support of their families, support of Drexel Plasma Institute (DPI) by John and Chris Nyheim and Kaplans family, support from leaders of Drexel University (President John Fry, Provost Mark Greenberg, Dean Joe Hughes, and senior vice-provost Deborah Crawford). The authors greatly appreciate support of their plasma-medical research by the National Institute of Health, National Science Foundation, US Department of Defense (especially DARPA and TATRC), W.M. Keck Foundation, Coulter Foundation, NASA and USDA; as well as the support of our industrial sponsors, especially Johnson & Johnson and GoJo.

For stimulating discussions on the topic of plasma medicine and assistance in development of the book, the authors gratefully acknowledge their colleagues and friends from Drexel University, especially Professors Danil Dobrynin, Gregory Fridman, Young Cho, Ari Brooks, Jane Azizkhan-Clifford, Richard Hamilton, Donna Murasko and Banu Onoral as well as Dr Terry Freeman from Jefferson University, Dr Steve Davis from University of Miami, Dr Alexander Gutsol from Chevron, Professor Ken Blank from Temple University, Professor Richard Satava from the University of Washington (formerly with DARPA) and many wonderful graduate students. Special thanks are addressed to Kirill Gutsol for assistance with illustrations.

Introduction to Fundamental and Applied Aspects of Plasma Medicine

1.1 Plasma medicine as a novel branch of medical technology

New ideas bring new hopes: plasma medicine is definitely one of those. Recent developments in physics and engineering have resulted in many important medical advances. The various medical technologies that have been widely described in the existina literature include applications of ionizing radiation, lasers. ultrasound. magnetism, and others. Plasma technology is a relative newcomer to the field of medicine. Very recent exponential developments in physical electronics and pulsed power engineering promoted consequent have significant developments in non-thermal atmospheric-pressure plasma science and engineering. Space-uniform and well-controlled cold atmospheric-pressure plasma sources have become a reality, creating the opportunity to safely and controllably apply plasma to animal and human bodies. This has instigated the creation of a novel and exciting area of medical technolgy: plasma medicine.

Experimental work conducted at several major universities, research centers, and hospitals around the world over the last decade demonstrates that non-thermal plasma can provide breakthrough solutions to challenging

medical problems. It is effective in sterilization of different surfaces including living tissues, disinfects large-scale air and water streams, deactivates dangerous pathogens including those in food and drinks, and is able to stop serious bleeding without damaging healthy tissue. Nonthermal plasma can be directly used to promote wound healing and to treat multiple diseases including skin, gastrointestinal, cardiovascular, and dental diseases, as well as different forms of cancer. It has also proven effective in the treatment of blood, controlling its properties. Nonthermal discharges have also proven to be very useful in the treatment of different biomaterials and tissue in engineering, tissue analysis and diagnostics of diseases. Research indicates that non-thermal plasma may prove to be useful in pharmacology by changing properties of existing drugs and creating new medicines. Non-thermal plasma, developed recently due to the rapid progress in electronics, is clearly a promising new tool which should be provided to medical doctors to resolve medical problems. Plasma medicine, the subject of this book, is a source of great interest today.

When talking about the novel plasma sources which it is possible to apply to human and animal bodies, as well as for the treatment of cells and tissues in detailed biomedical experiments, we have to stress the *safety* and *controllability* of these novel plasma devices. As an example, the floatingelectrode dielectric barrier discharge (FE-DBD) plasma source widely used for medical applications, in particular in Drexel University, applies c. 30–40 kV directly to the human body (see one of the authors of this book in <u>Figure 1.1</u>). Obviously, safety is the main issue in this case. Of no less importance is the controllability of the plasma parameters. The uniform cold atmospheric-pressure plasmas as well as some other plasma-medical devices developed recently can be effectively controlled; this is important not only for prescribing specific doses of medical treatment, but also for investigation of the mechanisms of plasma-medical treatment. Without detailed understanding of physical, chemical, and biomedical mechanisms, plasma tools have little chance of successful application in medicine.

Figure 1.1 Non-thermal short-pulsed 40 kV FE-DBD plasma sustained directly between a dielectric-coated electrode and a human body.



Non-thermal plasma is very far from thermodynamic equilibrium, which is discussed below. Such strongly nonequilibrium medium can be very 'creative' in its interactions with biomolecules. As first demonstrated in the 1950s by

Stanley Miller (see Figure 1.2) and his colleagues from the University of Chicago, plasma is even able to generate amino acids from methane and inorganics. It is very much possible that plasma, being a strongly non-equilibrium and multi-parametric medium, can even be responsible for the creation of life itself. Recent experiments prove that controllable changes of DNA after non-thermal plasma treatment are very sensitive to plasma parameters. This explains the great importance of the controllability of deep understanding of plasma parameters and а mechanisms for successful progress of plasma-medical science. The success of plasma medicine requires a detailed understanding of physical, chemical, and biomedical the strongly non-equilibrium mechanisms of plasma and living tissues. interaction with cells Without a fundamental understanding, plasma medicine is at risk of become a modernized medieval magic (see Figure 1.3).

Figure 1.2 In the 1950s, Stanley Miller of the University of Chicago synthesized amino acids in plasma from methane and inorganic compounds.



Figure 1.3 International Society for Plasma Medicine (ISPM) signifies crucial importance of deep and detailed research focused on fundamental understanding of physical, chemical and biological bases of plasma medicine.



Plasma medicine is a multidisciplinary branch of modern science and technology. It embraces physics (required to develop novel plasma discharges relevant for medical applications), medicine (to apply the technology for not only in vitro but also in vivo testing), and last but not least biology (to understand the complicated biochemical processes involved in plasma interaction with living tissues). While an understanding of the mechanisms by which nonthermal plasma can interact with living systems has begun to emerge only recently, a significant number of original journal publications and even reviews have appeared since the mid-2000s. Several prestigious journals have published

special issues dedicated to the plasma medicine, the new *Plasma Medicine* journal has been recently launched, multiple world symposiums have created special sessions in this new field, and plasma-medical workshops have been organized in the USA, Germany, France, Korea, Slovakia, and other countries. The most important world forum of plasmamedical research is the International Conferences on Plasma Medicine (ICPM). Four of these biannual conferences have already been successfully organized: ICPM-1 in Corpus Christi, Texas, USA; ICPM-2 in San-Antonia, Texas, USA; ICPM-3 in Greifswald, Germany; and finally ICPM-4 in Orleans, France in 2012. Finally, the International Society on Medicine was launched this year (2012) to Plasma coordinate the efforts of physicist, chemists, biologists, engineers, medical doctors and representatives of the industry in the new field of plasma medicine.

Hopefully, this book will be helpful to this entire and very multidisciplinary group of researchers and industry representatives. Plasma scientists and medical doctors speak different languages; they even have two different meanings for the word 'plasma' itself. Plasma scientists, medical doctors and biologists often have very different approaches to fundamental knowledge as well as practical applicability, but this book recognizes that they are united by a mutual interest in this new field of plasma medicine and by the common idea that development of plasma medicine brings new opportunities for treating human conditions.

1.2 Why plasma can be a useful tool in medicine

While the term 'medicine' in the title of the book does not require a special introduction, the term 'plasma' may require some elucidation (especially for medical practitioners). Plasma is an ionized gas and a distinct fourth state of matter. 'Ionized' means that at least one electron is not bound to an atom or molecule, converting them into positively charged ions. As temperature increases, atoms and molecules become more energetic and the state of matter transforms in the sequence: solid to liquid, liquid to gas and finally gas to plasma, which justifies the label of 'fourth state of matter'.

The free electric charges, electrons and ions make plasma electrically conductive (with magnitudes of conductivity sometimes exceeding that of gold and copper), internally interactive, and strongly responsive to electromagnetic fields. Ionized gas is defined as plasma when it is electrically neutral (electron density is balanced by that of positive ions) and contains a significant number of electrically charged particles, sufficient to affect its electrical properties and behavior. In addition to being important in many aspects of our daily lives, plasmas are estimated to constitute more than 99% of the known universe.

The term 'plasma' was first introduced by Irving Langmuir in 1928 when the multi-component, strongly interacting ionized gas reminded him of blood plasma; the term 'plasma' itself therefore has a strong relation to medicine. This can however be confusing: for example, read the discussions regarding plasma treatment of blood plasma in Chapter 8 of this book. Defining the term plasma, Irving Langmuir wrote: "Except near the electrodes, where there are sheaths containing very few electrons, the ionized gas contains ions and electrons in about equal numbers so that the resultant space charge is very small. We shall use the name **plasma** to describe this region containing balanced charges of ions and electrons". Plasmas occur naturally, but can also be effectively produced in laboratory settings and in industrial or hospital operations, providing opportunities

applications including for thermonuclear numerous fluorescent synthesis. electronics. lasers. lamps. cauterization and tissue ablation during surgeries, and many others. We remind the reader that most computer and cellphone hardware is based on plasma technology, not to forget about the plasma TV. In this book, we will focus on and practical aspects the fundamental of plasma applications to medicine, biology, and related disciplines, which represent today probably the most novel and exciting component of plasma science and engineering. Plasma is widely used in practice today. Generally, plasma offers three major features which are attractive for major practical applications.

1. *Temperatures* and energy densities of some plasma significantly components can exceed those in conventional technologies. These temperatures can easily exceed the level of c. 10 000 K. For example, if melted ceramics are needed to make relevant coatings, requiring temperatures above 3000 K, there is no choice plasma. In medical settings, but to use hiah temperatures and energy densities can be useful for cauterization and tissue ablation during surgery, for example.

2. Plasmas are able to produce a *very high concentration* of energetic and chemically active species (e.g., negative ions, atoms electrons. positive and and radicals, excited atoms and molecules, as well as photons that span wide spectral ranges). A high concentration of active species is crucial for important plasma applications such as plasma-assisted ignition and combustion (probably the oldest plasma application) and plasma generation of ozone for water cleaning. In medical settings, generation of the high concentration of and reactive species can excited be useful for

sterilization of surfaces, air, and water streams, as well as for tissue engineering.

3. Plasma systems can be very far from thermodynamic equilibrium, providing an *extremely high concentration* of the chemically active species while maintaining bulk temperatures as low as room temperature. This feature determines exclusiveness of plasma use in microelectronics and semiconductor industries: most elements of modern computers, cell phones, television equipment, cold lighting, and other electronic devices are manufactured using cold plasma technology. This important feature also determines the wide application of cold plasma in treatment of polymers: most textiles for our clothes, photographic paper, wrapping materials and so on are today plasma treated. In medical settings, the generation of an extremely high concentration of the chemically active species, while maintaining bulk temperatures as low as room temperature, can be useful for: non-thermal blood coagulation; corrections of blood composition and properties; sterilization of skin and other living tissues; healing wounds; and treating diseases not effectively treated before.

The three specific plasma features described above permit significant intensification of traditional chemical and biochemical processes, improvements in their efficiency, stimulation and often successful of chemical and biochemical reactions possible that are not usina conventional techniques.

1.3 Natural and man-made, completely and weakly ionized plasmas Plasma comprises the majority of the mass in the known universe: the solar corona, solar wind, nebula, and the Earth's ionosphere are all plasmas. The most readily recognized form of natural plasma phenomenon in the Earth's atmosphere is lightning. The breakthrough experiments with this natural form of plasma were performed long ago by Benjamin Franklin (Figure 1.4), which explains the special interest in plasma research in the Philadelphia area where the authors of this book are based (Drexel Plasma Institute, Drexel University).

Figure 1.4 Benjamin Franklin successfully performed the first experiments with the atmospheric plasma phenomenon of lightning.



At altitudes of approximately 100 km, the atmosphere no longer remains non-conducting due to significant ionization and formation of plasma by solar radiation. As one progresses further into near-space altitudes, the Earth's magnetic field interacts with charged particles streaming from the sun. These particles are diverted and often become trapped by the Earth's magnetic field. The trapped particles are most dense near the poles, creating the beautifully rendered Aurora Borealis (<u>Figure 1.5</u>). Lightning and the Aurora Borealis are the most common forms of natural plasmas observed on earth.

Figure 1.5 Aurora borealis.



or manufactured Natural and man-made plasmas (generated in gas discharges) occur over a wide range of pressures, electron temperatures, and electron densities (see Figure 1.6). Temperatures of manufactured plasmas range from slightly above room temperature to temperatures comparable to the interior of stars, with electron densities that span over 15 orders of magnitude. Most plasmas of practical significance, however, have electron temperatures of 1-20 eV with electron densities in 10⁶–10¹⁸ cm⁻³ (high temperatures the range are conventionally expressed in electron-volts, with 1 eV c. 11 600 K).

<u>Figure 1.6</u> General chart of plasma temperatures and densities.



Not all particles need to be ionized in plasma; a common condition in plasma chemistry is for the gases to be only partially ionized. The ionization degree (ratio of density of major charged species to that aas) of neutral in conventional plasma-chemical systems is in the range 10^{-7} - 10^{-4} . When the ionization degree is close to unity, such plasma is referred to as *completely ionized plasma*. plasmas ionized conventional Completely are for thermonuclear plasma systems (tokomaks, stellarators, plasma pinches, focuses, etc.). When ionization degree is low, the plasma is called *weakly ionized plasma*. Weakly important the ionized plasmas and chemical and biochemical processes stimulated in such plasmas is the focus of this book.

Both natural and manufactured or man-made laboratory plasmas are quasi-neutral, which means that concentrations of positively charged particles (positive ions) and negatively charged particles (electrons and negative ions) are well balanced. Langmuir was one of the pioneers who studied gas discharges, and defined plasma to be a region not influenced by its boundaries. The transition zone between the plasma and its boundaries was termed the plasma *sheath*. The properties of the sheath differ from those of the plasma and these boundaries influence the motion of the charge particles in this sheath. They form an electrical screen for the plasma from influences of the boundary. Very important concepts group plasma physics, plasma chemistry, and plasma medicine into two major classes – those of thermal and non-thermal plasmas – which are discussed in the following section.

1.4 Plasma as a non-equilibrium multi-temperature system

Temperature in plasma is determined by the average energies of the plasma particles (neutral and charged) and their relevant degrees of freedom (translational, rotational, vibrational, and those related to electronic excitation). As multi-component systems, plasmas are therefore able to exhibit multiple temperatures. In electric discharges common for plasmas generated in the laboratory, energy from the electric field is first accumulated by the electrons through collisions; it is subsequently transferred from the electrons to the heavy particles. Electrons receive energy from the electric field during their mean free path. During the following collision with a heavy particle, they only lose a small portion of that energy (because electrons are much lighter than the heavy particles). That is why electron temperature in plasma is initially higher than that of heavy particles. Subsequently, collisions of electrons with heavy particles (Joule heating) can equilibrate their temperatures unless time or energy are not sufficient for the equilibration (such as the situation in coronas and pulsed discharges), or there is an intensive cooling mechanism preventing heating of the entire gas (as for wall-cooled low-pressure discharges).

The temperature difference between electrons and heavy neutral particles due to Joule heating in the collisional weakly ionized plasma is conventionally proportional to the square of the ratio of the electric field (E) to the pressure (p). Only in the case of small values of E/p, the temperatures of electrons and heavy particles approach each other. This is a basic requirement for the so-called local thermodynamic equilibrium (LTE) in plasma. Additionally, LTE conditions require chemical equilibrium as well as restrictions on the gradients. The LTE plasma follows major laws of the equilibrium thermodynamics and can be characterized by a single temperature at each point of space. Ionization and chemical processes in such plasmas are determined by temperature (and only indirectly by the electric fields through Joule heating). The quasi-equilibrium plasma of this kind is usually called thermal plasma. In nature, thermal plasmas can be represented by solar plasma (see Figure 1.7).

<u>Figure 1.7</u> Solar plasma.