

# **Detektorabtastung und Dosisreduktion in der photonenzählenden Computertomographie – Eine Phantom- und Ex-Vivo-Studie**

**Master's thesis**

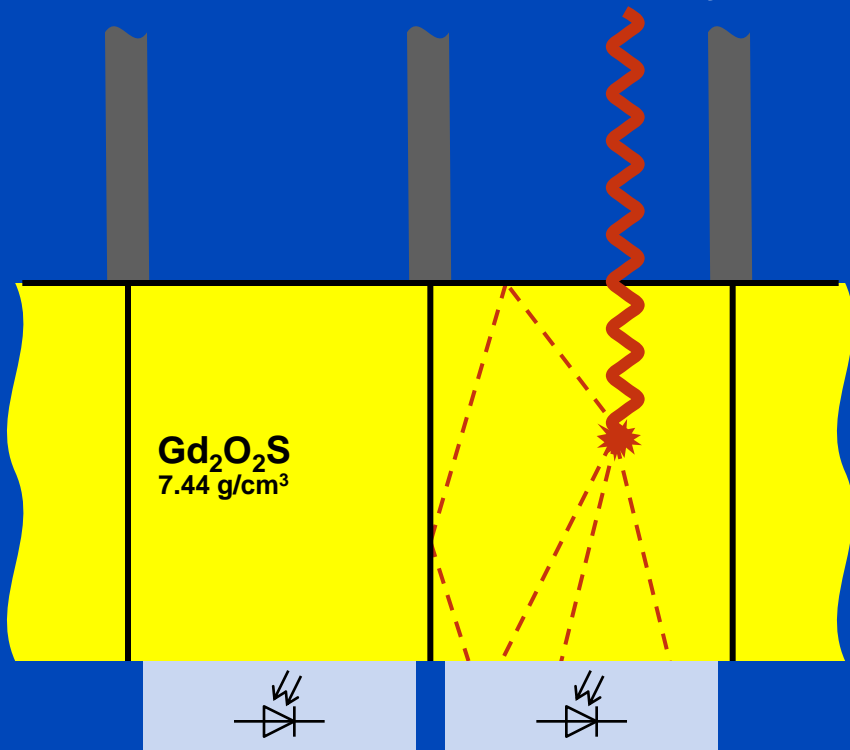
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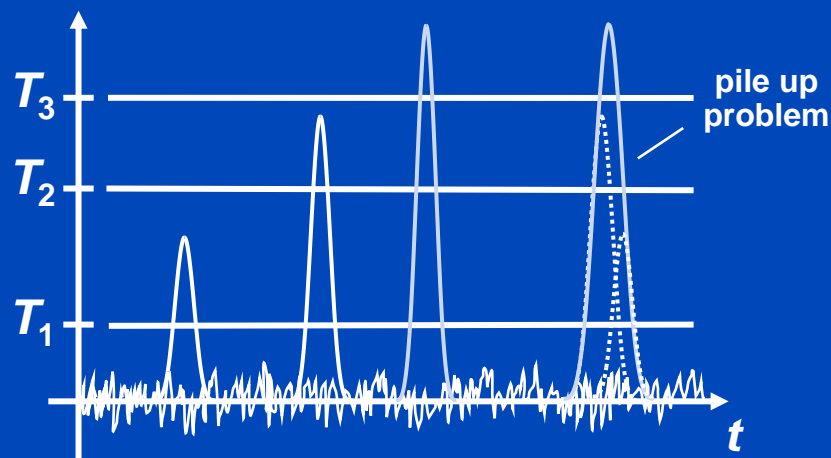
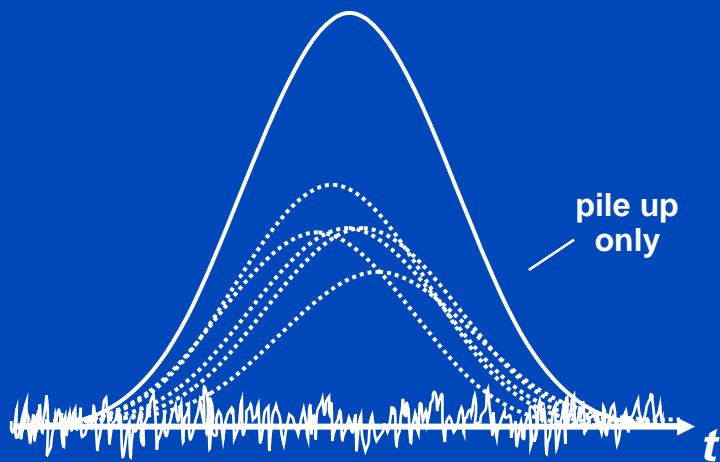
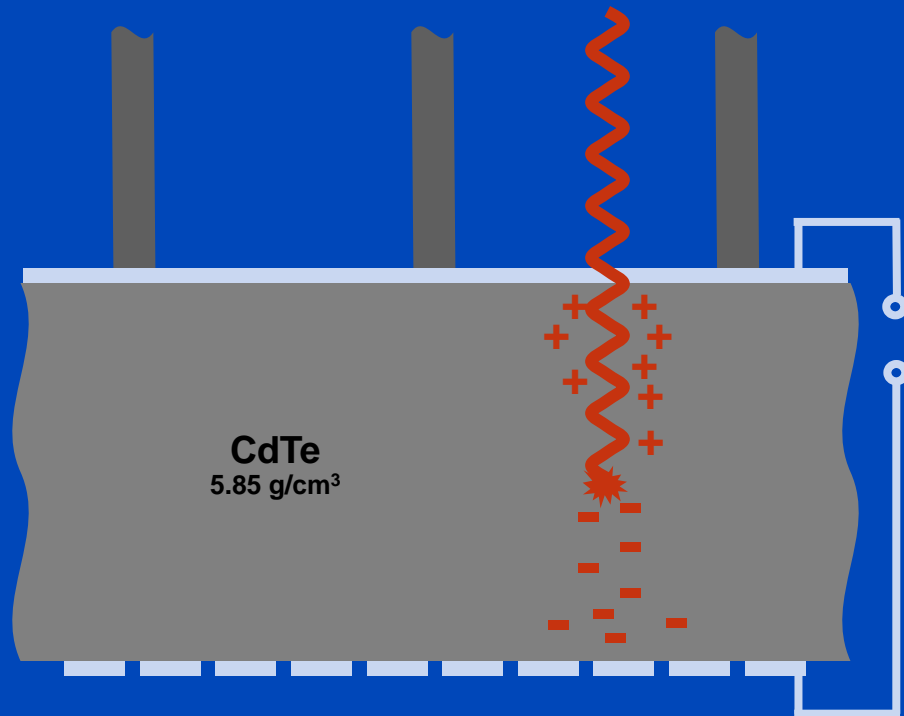
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**<sup>3</sup>Institute of Forensic and Traffic Medicine, Heidelberg, Germany**

# Indirect Conversion (Today)



# Direct Conversion (Future)

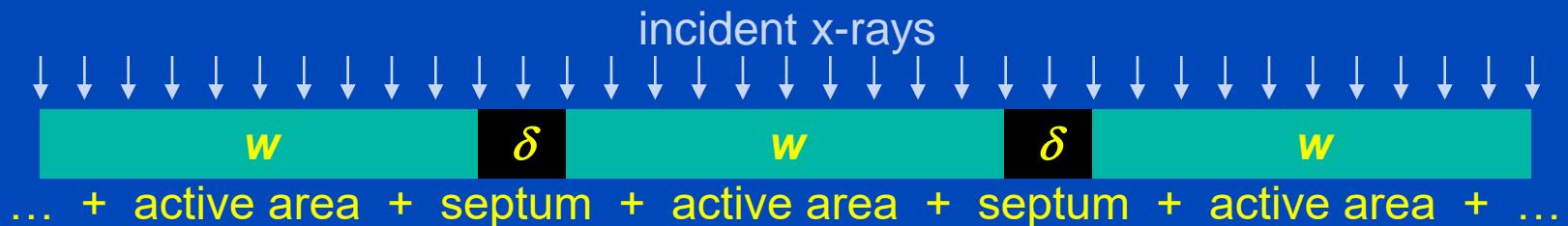


# System Model

- True projection  $f(x)$
- Presampling function  $s(x)$ , normalized to unit area
- Algorithm  $a(x)$ , normalized to unit area
- Observed projection  $g(x)$  with

$$g(x) = f(x) * s(x) * a(x) = f(x) * \text{PSF}(x)$$

- Example:



$$s(x) = \Pi_d^*(x)$$

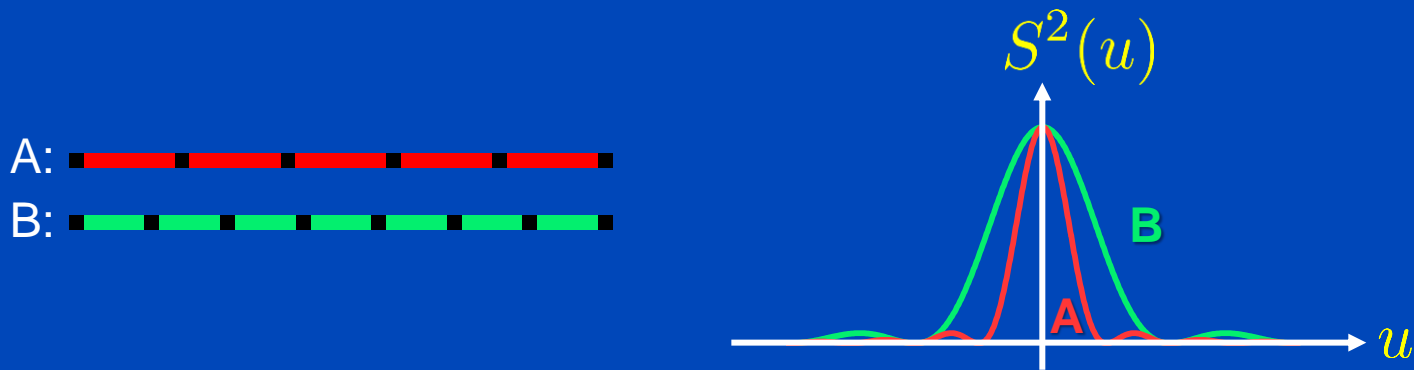
$w$  = detector pixel width  
 $\delta$  = dead space between pixels

# To Bin or not to Bin?

- We have  $\text{PSF}(x) = s(x) * a(x)$  and  $\text{MTF}(u) = S(u)A(u)$ .
- From Rayleigh's theorem we find noise is

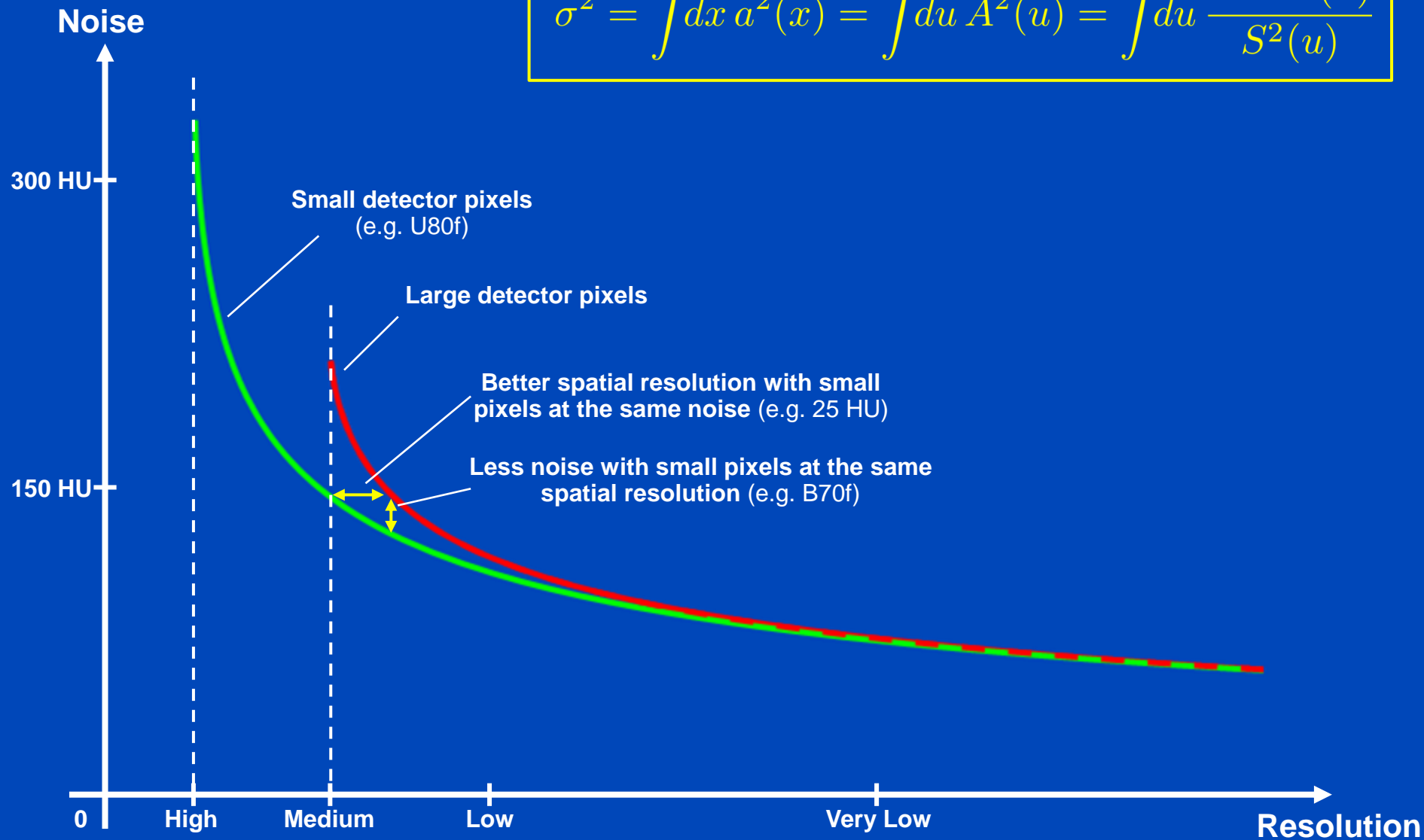
$$\sigma^2 = \int dx a^2(x) = \int du A^2(u) = \int du \frac{\text{MTF}^2(u)}{S^2(u)}$$

- Compare large (A) with small (B) detector pixels:



- We have  $S_B(u) > S_A(u)$  and thus  $\sigma_B^2 < \sigma_A^2$ .
- This means that a desired PSF/MTF is often best achieved with smaller detectors.

$$\sigma^2 = \int dx a^2(x) = \int du A^2(u) = \int du \frac{\text{MTF}^2(u)}{S^2(u)}$$

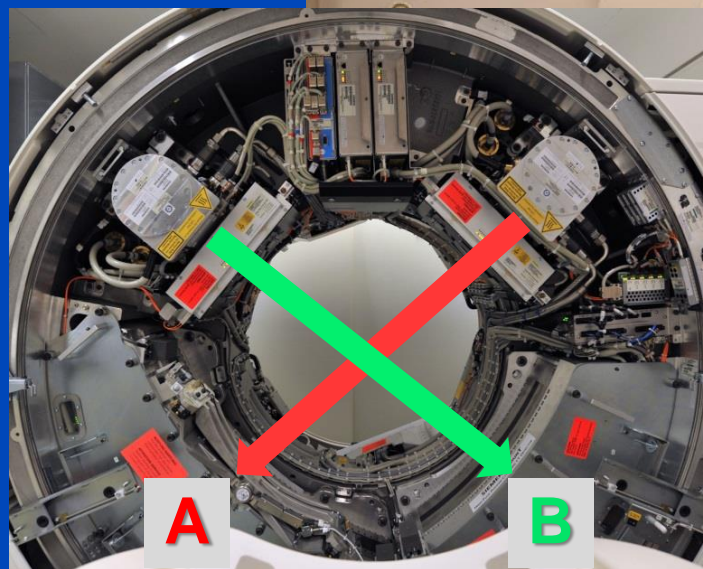


# CounT CT System at the DKFZ

Gantry from a clinical dual source scanner

**A:** conventional CT detector  
(50.0 cm FOV)

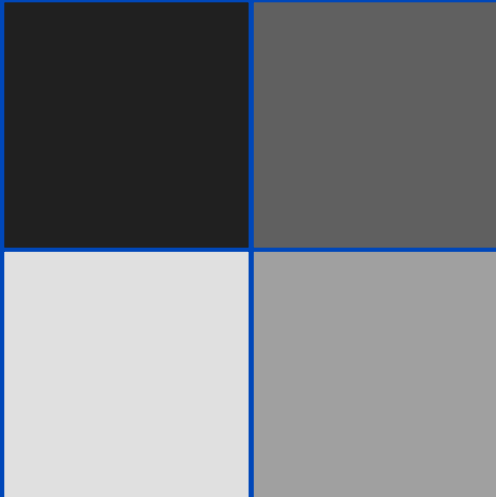
**B:** Photon counting detector  
(27.5 cm FOV)



Prototype, not commercially available.

# Readout Modes of the CounT

**PC-UHR Mode**  
0.25 mm pixel size



**PC-Macro Mode**  
0.50 mm pixel size

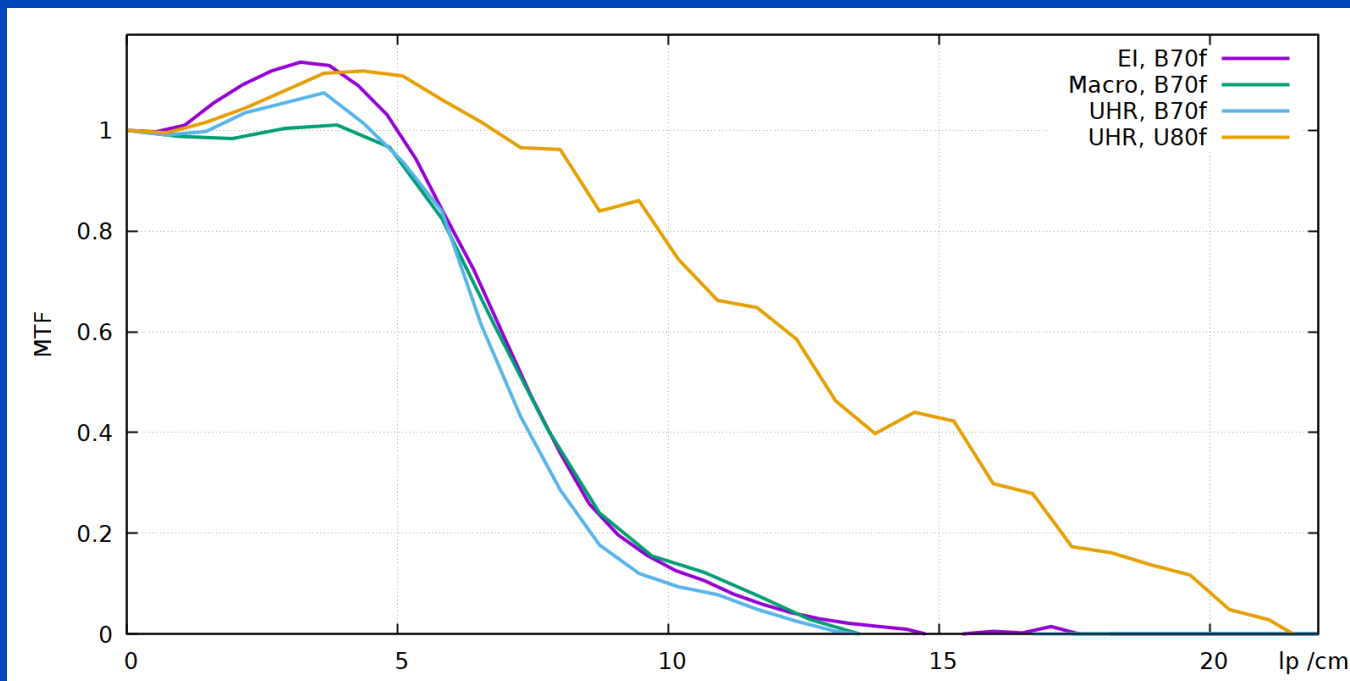


**EI detector**  
0.60 mm pixel size



# Reconstruction

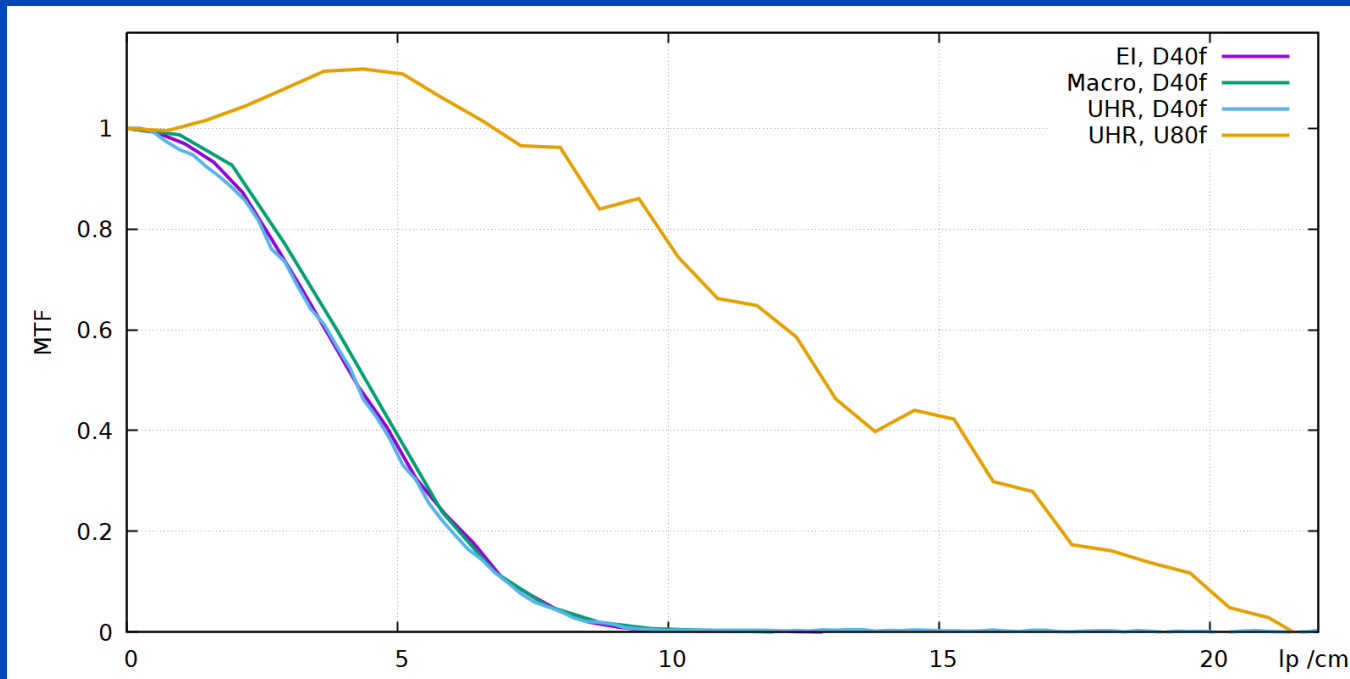
	Pixel size	Kernel	MTF <sub>10%</sub>
EI	0.60 mm	B70f	10.8 lp/cm
Macro	0.50 mm	B70f	11.1 lp/cm
UHR	0.25 mm	B70f	10.0 lp/cm
UHR-U80f	0.25 mm	U80f	19.8 lp/cm





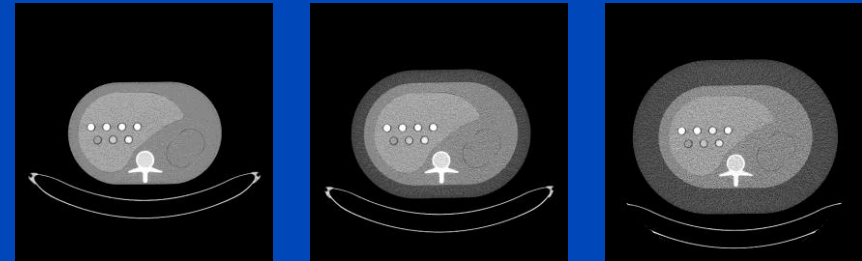
# Reconstruction

	Pixel size	Kernel	MTF <sub>10%</sub>
EI	0.60 mm	D40f	7.0 lp/cm
Macro	0.50 mm	D40f	7.1 lp/cm
UHR	0.25 mm	D40f	7.0 lp/cm
UHR-U80f	0.25 mm	U80f	19.8 lp/cm



# Materials and Methods

- Abdomen phantoms of three different sizes (S, M, L) with iodine inserts of different concentrations
  - Small: 20 cm × 30 cm
  - Medium: 25 cm × 35 cm
  - Large: 30 cm × 40 cm
- Animal and human cadavers
- Tube voltages: 80 kV, 100 kV, 120 kV, and 140 kV
- Effective tube current of 200 mAs
- Collimation:
  - UHR: Acq. 64 × 0.25 mm
  - Macro: Acq. 32 × 0.50 mm
  - EID: Acq. 32 × 0.60 mm



# Contrast-to-Noise Ratio (CNR)

- By selecting two ROIs, the CNR can be calculated using

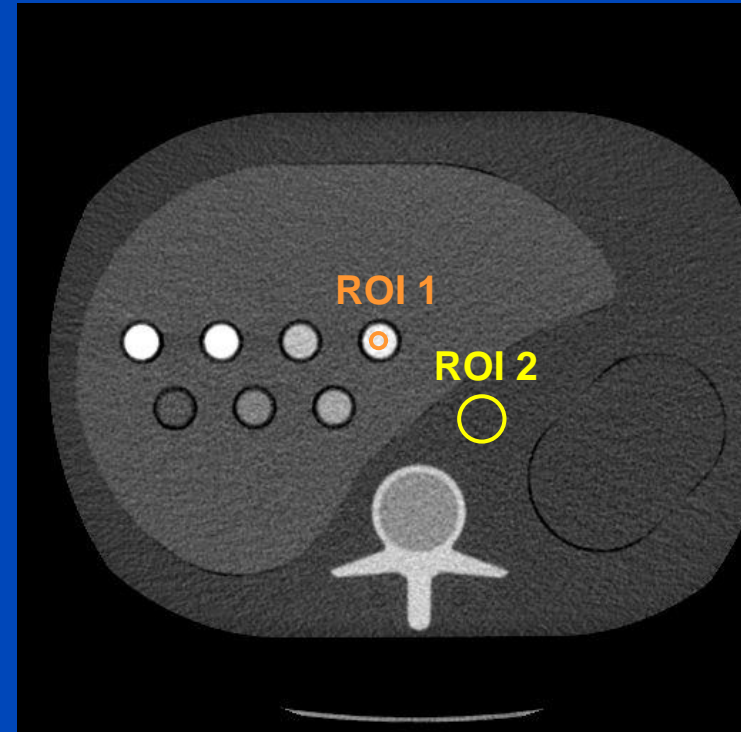
$$\text{CNR} = \frac{|\mu_1 - \mu_2|}{\sqrt{\sigma_1^2 + \sigma_2^2}}$$

- Normalization to dose  $D$  :

$$\text{CNRD} = \frac{\text{CNR}}{\sqrt{D}}$$

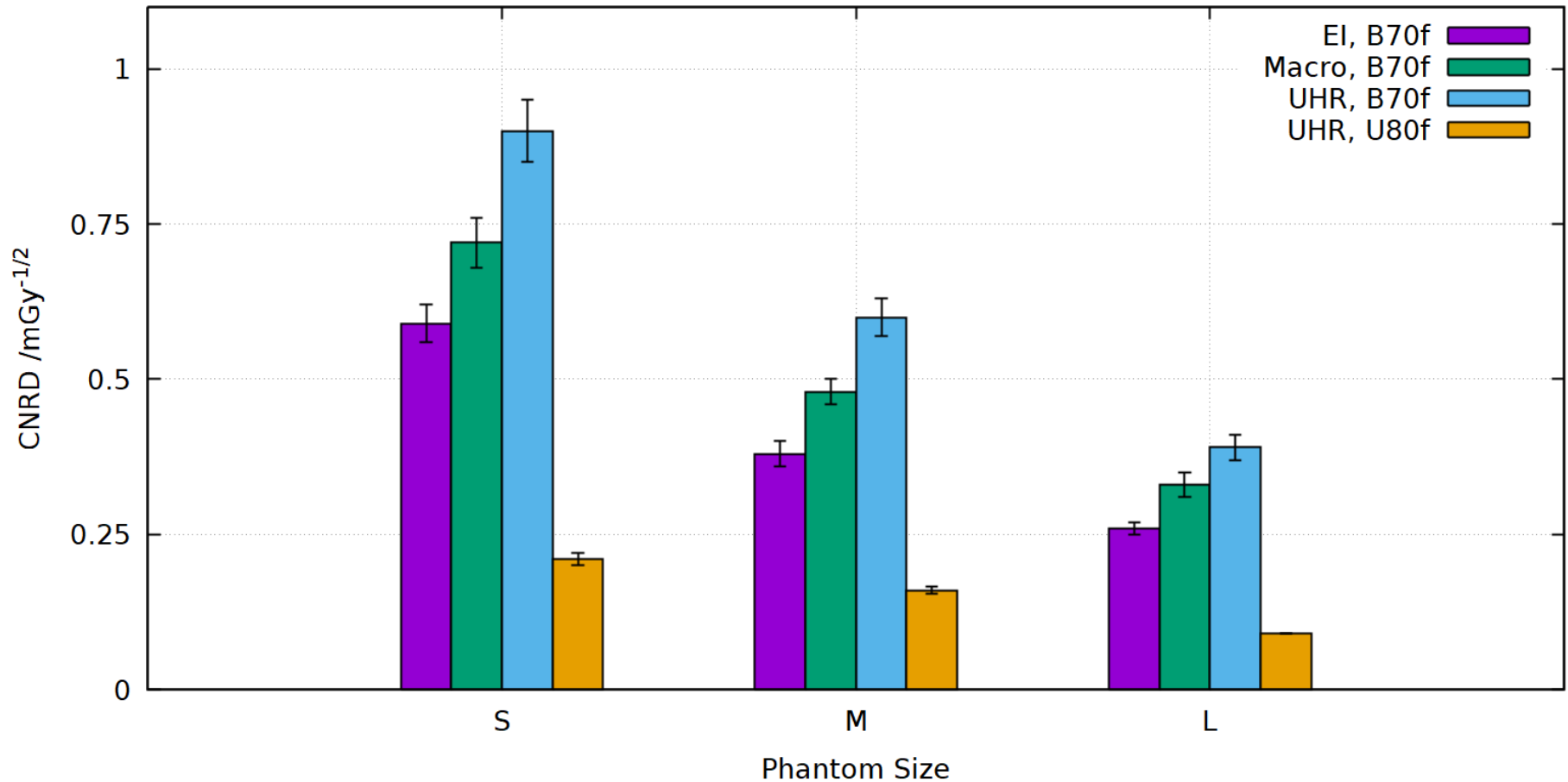
- The potential x-ray dose reduction can be calculated by

$$\text{Dose Reduction} = 1 - \frac{\text{CNRD}_{\text{Ref}}^2}{\text{CNRD}_{\text{PC}}^2}$$



The iodine concentration in ROI 1 is 25 mg/mL. The CT value is about 520 HU at 120 kV.

# Results at 120 kV

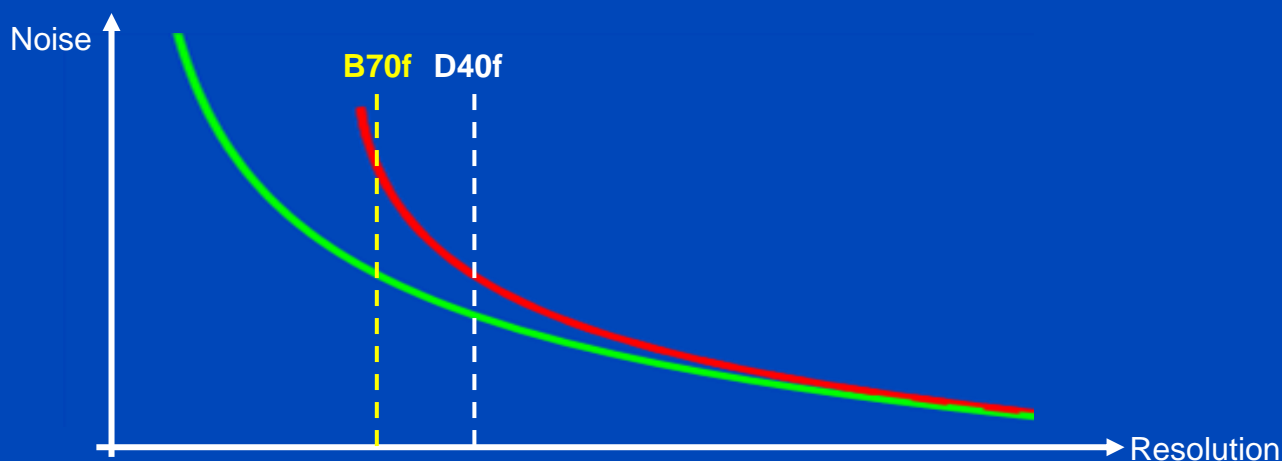


Error bars indicate the errors when analyzing 15 different slices of the same contrast.

# X-Ray Dose Reduction of B70f

<b>UHR vs. Macro</b>	<b>80 kV</b>	<b>100 kV</b>	<b>120 kV</b>	<b>140 kV</b>
S	23% ± 12%	34% ± 10%	35% ± 11%	25% ± 10%
M	32% ± 10%	32% ± 8%	35% ± 8%	34% ± 9%
L	35% ± 10%	29% ± 15%	27% ± 9%	31% ± 11%

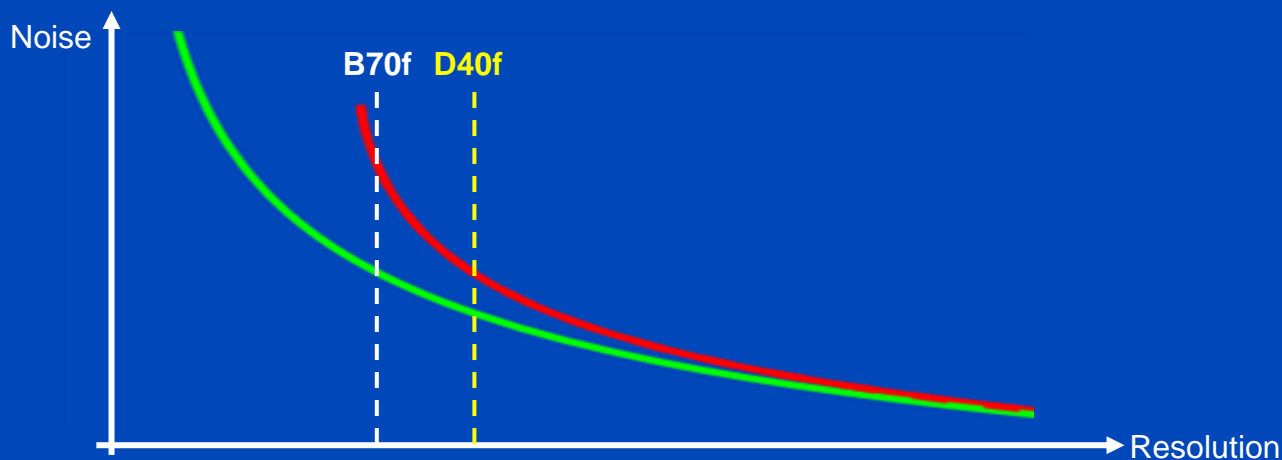
<b>UHR vs. EI</b>	<b>80 kV</b>	<b>100 kV</b>	<b>120 kV</b>	<b>140 kV</b>
S	33% ± 9%	52% ± 5%	57% ± 7%	57% ± 6%
M	41% ± 8%	47% ± 7%	60% ± 6%	62% ± 4%
L	48% ± 8%	43% ± 10%	54% ± 6%	63% ± 5%



# X-Ray Dose Reduction of D40f

<b>UHR vs. Macro</b>	<b>80 kV</b>	<b>100 kV</b>	<b>120 kV</b>	<b>140 kV</b>
S	5% ± 16%	12% ± 17%	17% ± 17%	9% ± 15%
M	11% ± 14%	9% ± 12%	16% ± 16%	13% ± 13%
L	11% ± 14%	6% ± 17%	6% ± 17%	4% ± 17%

<b>UHR vs. EI</b>	<b>80 kV</b>	<b>100 kV</b>	<b>120 kV</b>	<b>140 kV</b>
S	10% ± 11%	28% ± 11%	36% ± 12%	38% ± 12%
M	15% ± 12%	23% ± 12%	40% ± 10%	43% ± 9%
L	24% ± 14%	17% ± 11%	33% ± 12%	43% ± 9%



El, B70f

± 89 HU



Macro, B70f

± 77 HU



UHR, B70f

± 62 HU



UHR, U80f

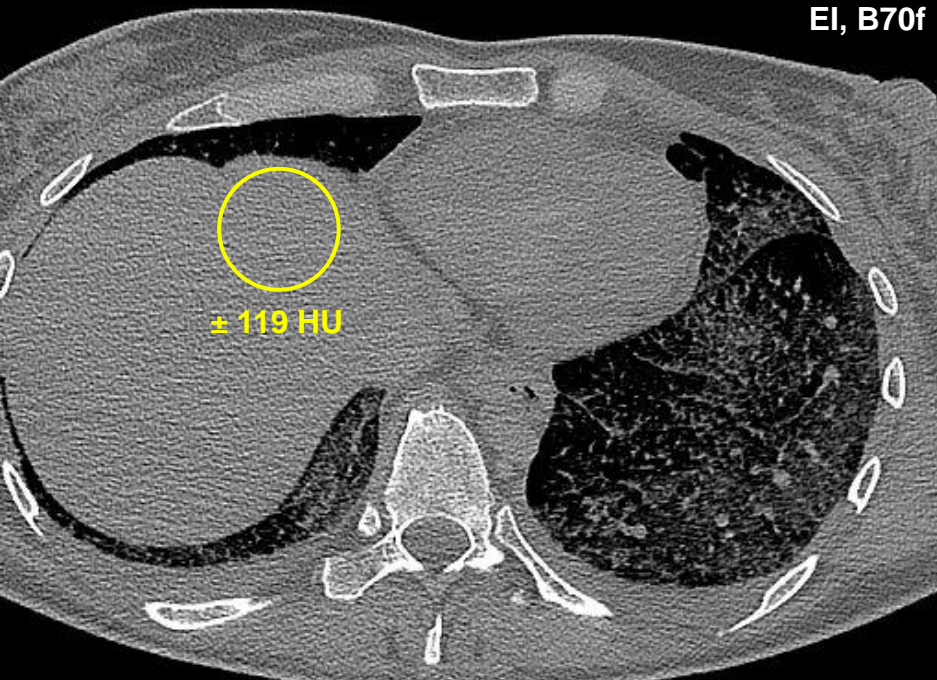
± 158 HU



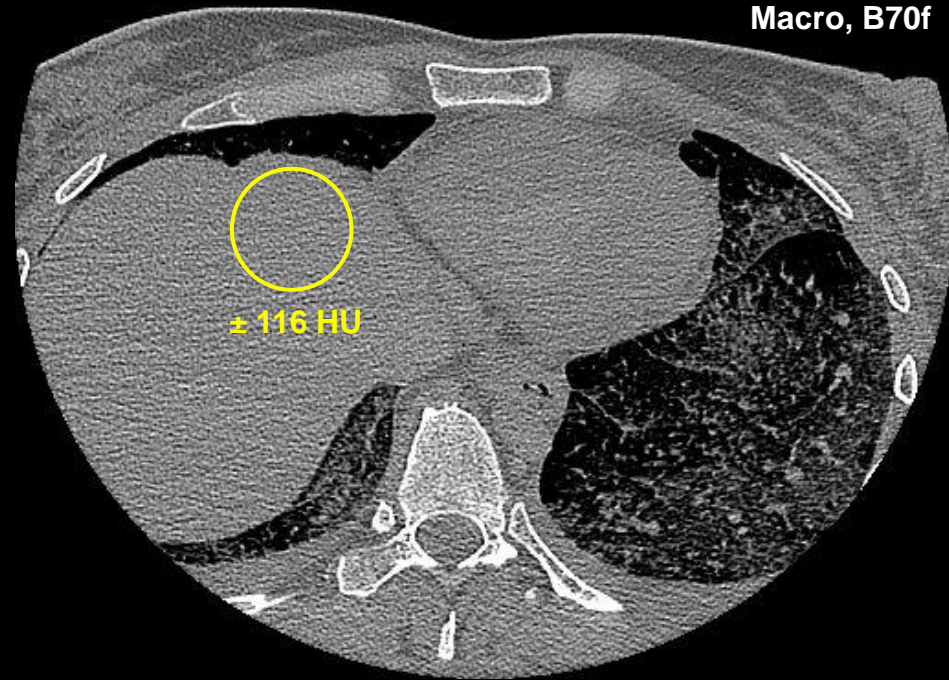
C = 1000 HU  
W = 3500 HU



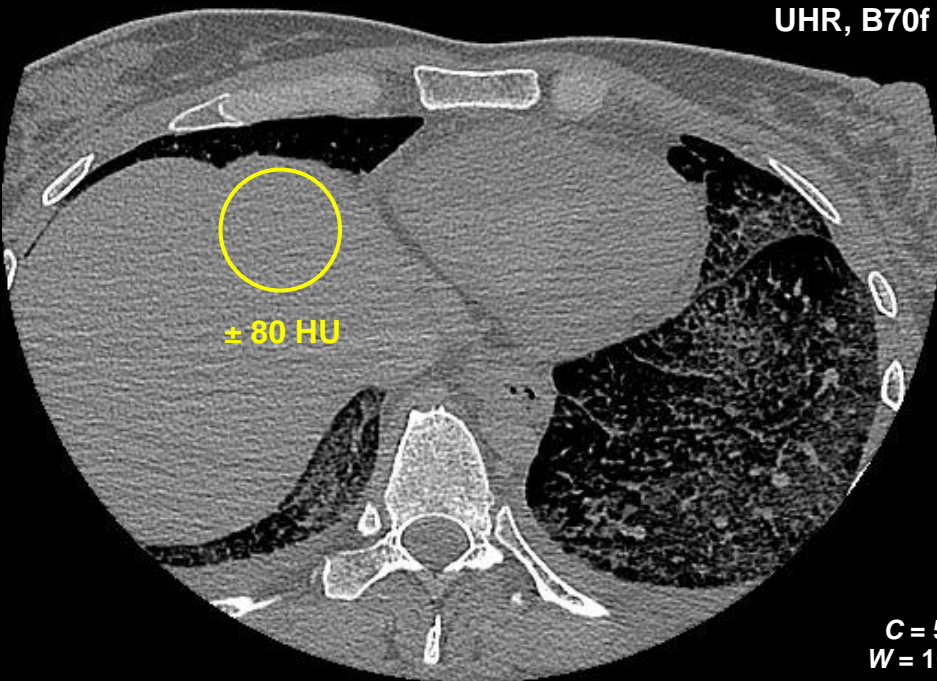
EI, B70f



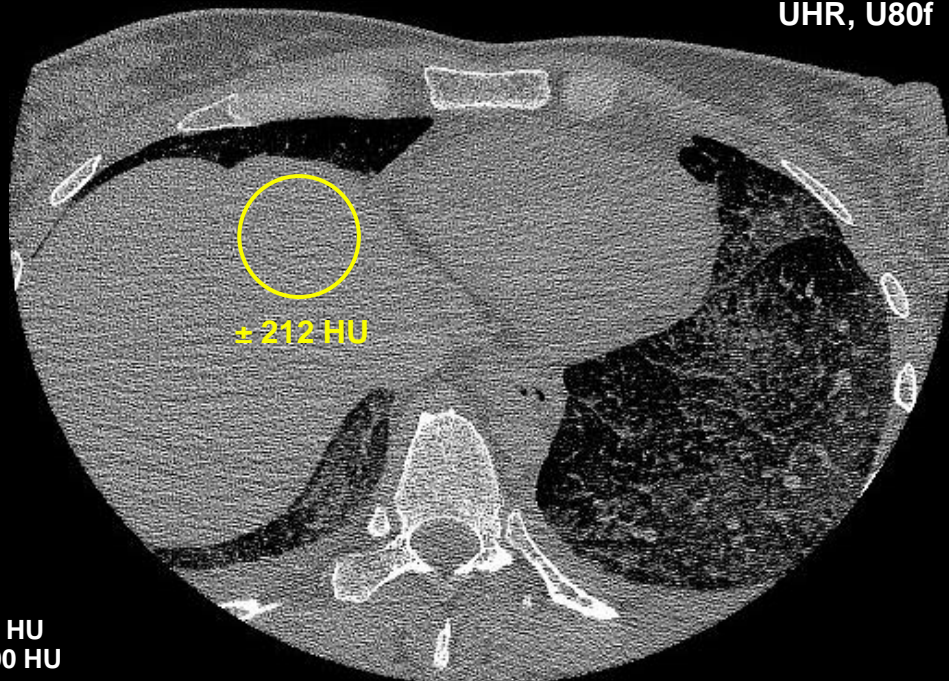
Macro, B70f



UHR, B70f



UHR, U80f



C = 50 HU  
W = 1000 HU



# Conclusions

- This is the first systematic study<sup>1</sup> quantifying the effects of detector sampling on noise reduction in a clinical whole-body photon counting CT.
- The results illustrate that it is favorable to measure with smaller pixels even if the high spatial resolution is not of interest.
- A significant clinical dose reduction can be achieved, depending on the chosen resolution.

<sup>1</sup>Further evaluation and the discussion of other studies can be found in Klein et al. Invest. Radiol. 55(2), Feb 2020, in press.

# Thank You!



## The 6<sup>th</sup> International Conference on Image Formation in X-Ray Computed Tomography

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Conference Chair: **Marc Kachelrieß**, German Cancer Research Center (DKFZ), Heidelberg, Germany

This presentation will soon be available at [www.dkfz.de/ct](http://www.dkfz.de/ct).  
Job opportunities through DKFZ's international Fellowship programs ([marc.kachelriess@dkfz.de](mailto:marc.kachelriess@dkfz.de)).  
Parts of the reconstruction software were provided by RayConStruct® GmbH, Nürnberg, Germany.