

# Context-Sensitive Organ-Specific Evaluation and Analysis of DECT Images

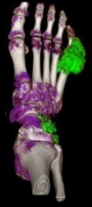
Sabrina Dorn<sup>1,2</sup>, Shuqing Chen<sup>3</sup>, Francesco Pisana<sup>1,2</sup>,  
Mahmut Özdemir<sup>1,2</sup>, Joscha Maier<sup>1,2</sup>, Michael Knaup<sup>1</sup>, Stefan Sawall<sup>1,2</sup>,  
Andreas Maier<sup>3</sup>, Michael Lell<sup>4</sup>, and Marc Kachelrieß<sup>1,2</sup>

<sup>1</sup>German Cancer Research Center (DKFZ), Heidelberg, Germany

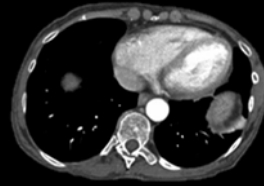
<sup>2</sup>University of Heidelberg, Germany

<sup>3</sup>Friedrich-Alexander University Erlangen-Nürnberg, Germany

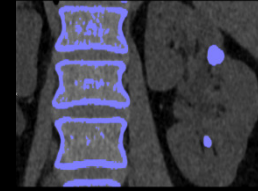
<sup>4</sup>Hospital Nürnberg, Paracelsus Medical University



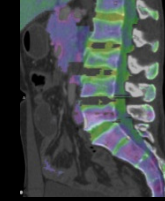
**Gout**



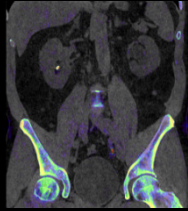
**Optimum Contrast**



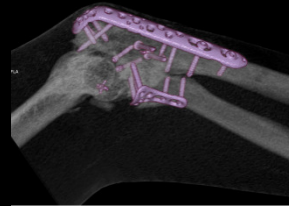
**Calculi Characterization**



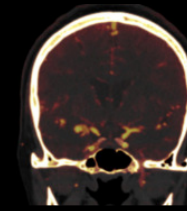
**Bone Marrow**



**Rho/Z**



**Monoenergetic**



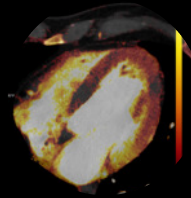
**Brain Hemorrhage**



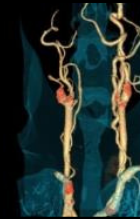
**Musculoskeletal**



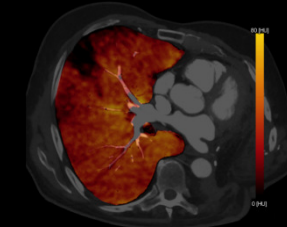
**Xenon**



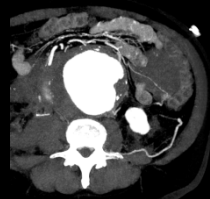
**Heart PBV**



**Direct Angio**



**Lung Analysis**



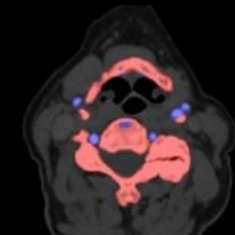
**Monoenergetic Plus**



**Lung Nodules**



**Virtual Unenhanced**



**Hardplaque Display**

Syngo.CT DECT application examples. Virtual unenhanced contains liver VNC, lung analysis contains lung PBV.  
Courtesy of Siemens Healthineers, Forchheim, Germany

SIEMENS Doc Server: anjavia

SD\_FL\_DE\_Liver/Kidn... Male  
CT Dual Energy  
9/24/1955 0128

**CT Dual Energy**

CT Dual Energy

Abdomen (CA) Application Profile

Body Bone Removal

Liver VNC

Resolution 2

Maximum HU-Value 3071

Iodine Ratio 2.24

MM Volume Compare

Archive results from current

Findings Navigator

2:28 PM

SD\_FL\_DE\_Liver/Kidney VNC, Waikato NZ, Patikiki  
Waikato Ref: User One  
#2010E0025116-2  
5/13/2010  
1:41:48:40 PM  
521 FRW 1  
SP L11.0 / SP L11.0

SD\_FL\_DE\_Liver/Kidney VNC, Waikato NZ, Patikiki  
Waikato Ref: User One  
#2010E0025116-2  
5/13/2010  
1:41:48:40 PM  
521 FRW 1  
SP A157.5 / SP A167.5

SD\_FL\_DE\_Liver/Kidney VNC, Waikato NZ, Patikiki  
Waikato Ref: User One  
#2010E0025116-2  
5/13/2010  
1:41:48:40 PM  
521 FRW 1  
SP F145.5 / SP F145.5

Manip MPR FUSION  
DE VNC/CON  
+C

Manip MPR FUSION  
DE VNC/CON  
+C

Manip MPR FUSION  
DE VNC/CON  
+C

CT Mixing Ratio Overlay

50% 50%

W 600 | W 500  
C 150 | C 250

W 600 | W 500  
C 150 | C 250

W 600 | W 500  
C 150 | C 250

Algorithm Parameters

Material Definitions

Presets

Preprocess Options

	Low Energy [HU]	High Energy [HU]
Tissue	60	55
Fat	-110	-87
Rel. CM	3.01	

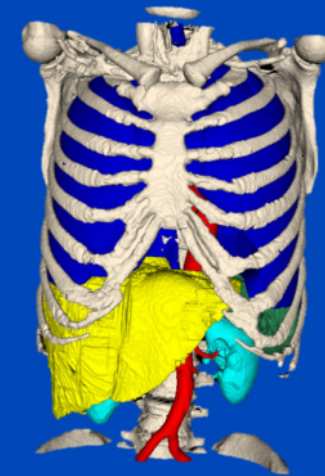
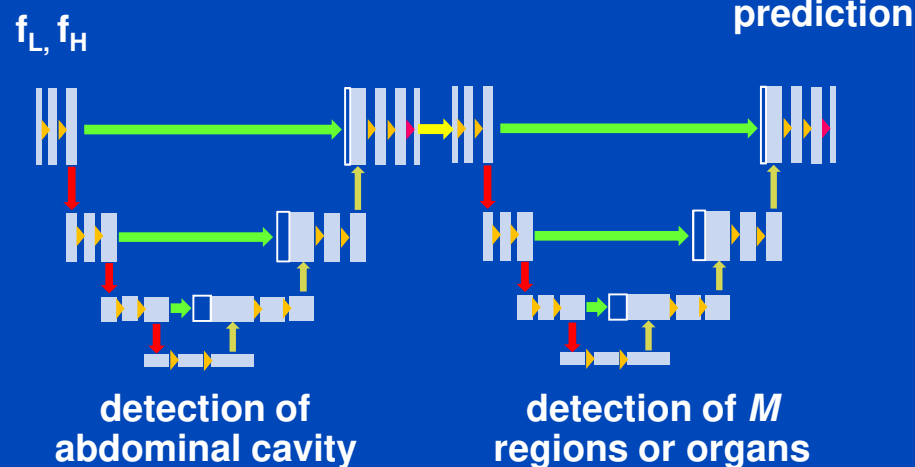
Iodine BHC

# Aim

**To facilitate radiologists' workflow by combining various dual energy applications into an automatic analysis tool.**

# Method

- Prior anatomical knowledge: 3D fully convolutional network<sup>1</sup>
  - Segmentation of dual energy data
  - Cascaded neural network architecture
    1. Detection of abdominal cavity
    2. Final detection of organ boundaries

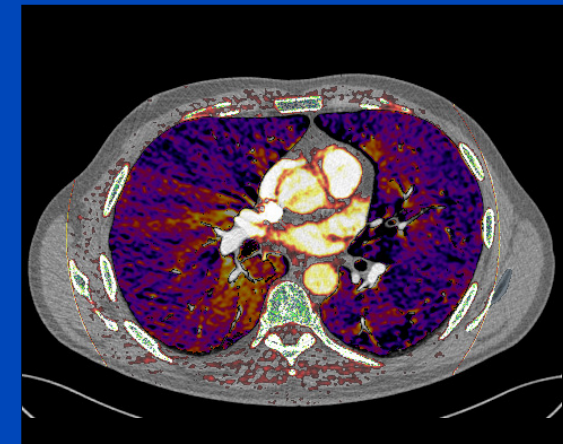
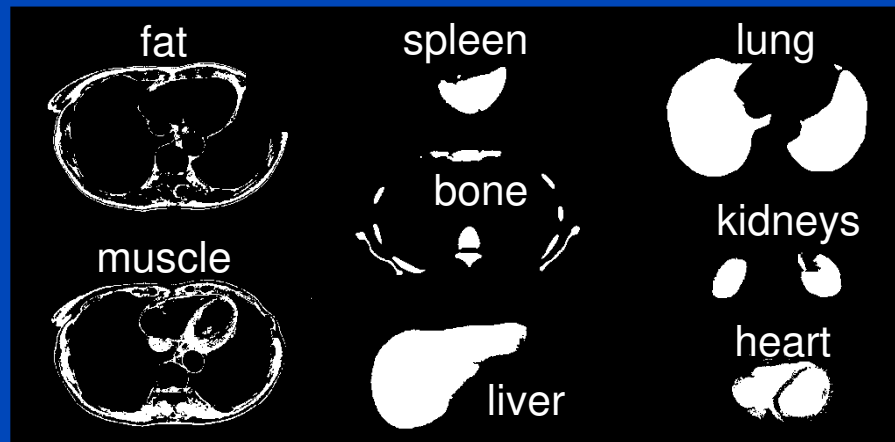
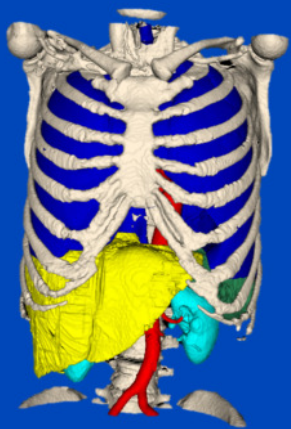


- Automatically segment **liver, kidneys, spleen, lung, bone, and aorta.**
- Thresholding remaining voxels into **muscles, fat, and vasculature.**
- Currently, manual corrections are necessary (until today).

[1] S. Chen, H. Roth, S. Dorn, M. May, A. Cavallaro, M. Lell, M. Kachelrieß, H. Oda, K. Mori, and A. Maier. Towards Automatic Abdominal Multi-Organ Segmentation in Dual Energy CT using Cascaded 3D Fully Convolutional Network. *CoRR*, 2017

# Method

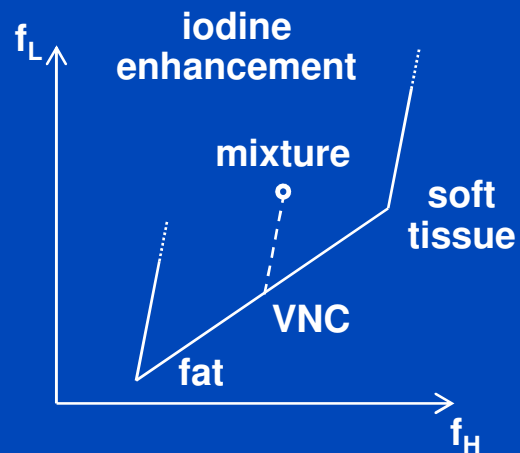
- Segmentation delivers a binary mask for each organ.
- Use masks to allow for
  - **Standardization** of DE evaluation
    - Automatic placement and evaluation of region-of-interests (ROIs)
    - Automatic patient-specific calibration
  - **Automation**
    - Automatic selection of DE application for specific organs
    - Simultaneous DE evaluation of varying applications



# Dual Energy Evaluation Methods

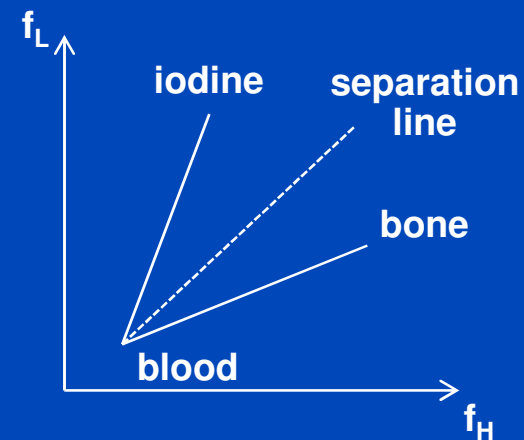
Most of the DE applications rely on two basic strategies (Siemens Syngo.Via):

## Material decomposition



- LiverVNC, virtual unenhanced
- Lung perfused blood volume
- ...

## Material classification

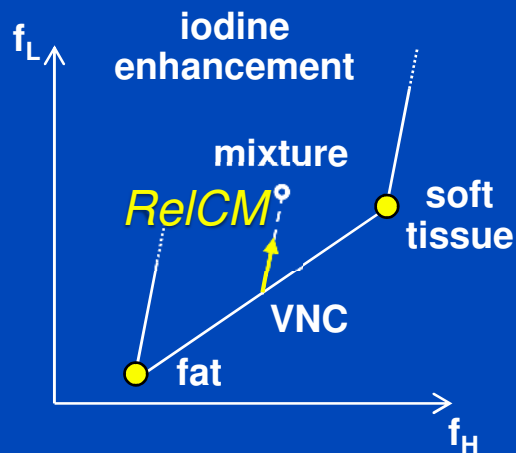


- Body bone removal
- Kidney stone discrimination
- ...

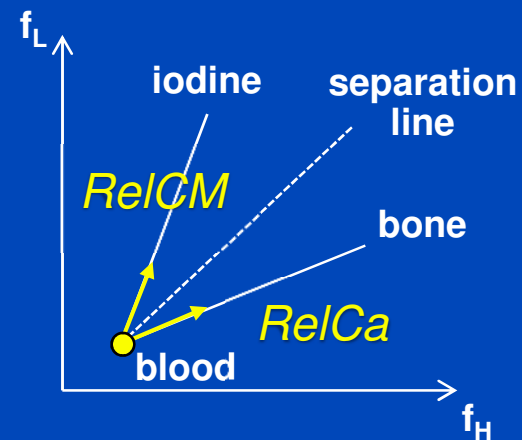
# Dual Energy Evaluation Methods

Most of the DE applications rely on two basic strategies (Siemens Syngo.Via):

## Material decomposition



## Material classification



- Calibration of reference points (**fat, soft tissue, blood** etc.) and relative contrasts of iodine and calcium ( $RelCM$ ,  $RelCa$ ) needed.
  - Manually placed region-of-interests (ROIs)



# Relative Contrast

- Two water-iodine mixtures of unknown mixing ratio

$$CT_1(E) = (1 - w_1)CT_W(E) + w_1CT_I(E) = w_1CT_I(E)$$

$$CT_2(E) = (1 - w_2)CT_W(E) + w_2CT_I(E) = w_2CT_I(E)$$

- Their relative contrast is independent of the mixing ratio

$$RelCM = \frac{CT_1(E_L) - CT_2(E_L)}{CT_1(E_H) - CT_2(E_H)} = \frac{CT_I(E_L) - CT_W(E_L)}{CT_I(E_H) - CT_W(E_H)}$$

- Hence, it can be used to calibrate DECT.



# Automatic Calibration

## *RelCM*

- Automatic evaluation of two ROIs that contain water-iodine mixtures at two energies
  - ROI in aorta
  - ROI in liver

$$RelCM = \frac{CT_1(E_L) - CT_2(E_L)}{CT_1(E_H) - CT_2(E_H)} = \frac{\Delta CT_1(E_L)}{\Delta CT_1(E_H)}$$

## *RelCa*

- Automatic evaluation of two ROIs, one contains Ca-fat mixture and one contains fat , at two energies
  - ROI in bone
  - ROI in fat

$$RelCa = \frac{CT_1(E_L) - CT_2(E_L)}{CT_1(E_H) - CT_2(E_H)} = \frac{\Delta CT_B(E_L)}{\Delta CT_B(E_H)}$$

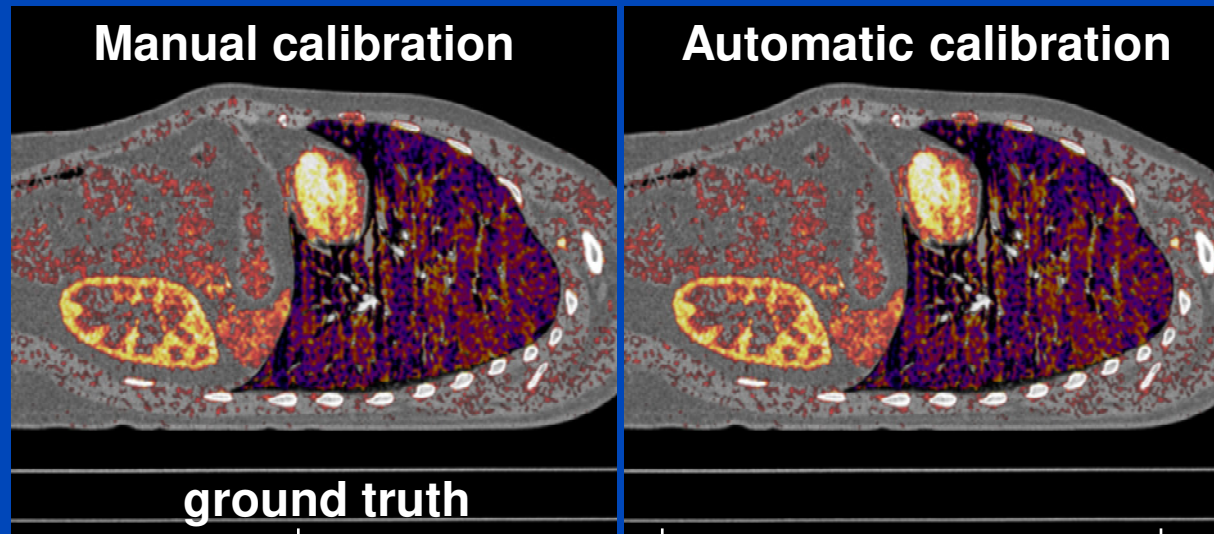
## Position of reference points in DE diagram

- Evaluation of ROIs in muscle, fat, aorta, liver, bone etc.

# Manual vs. Automatic Calibration

## Iodine Quantification Accuracy

patient 008

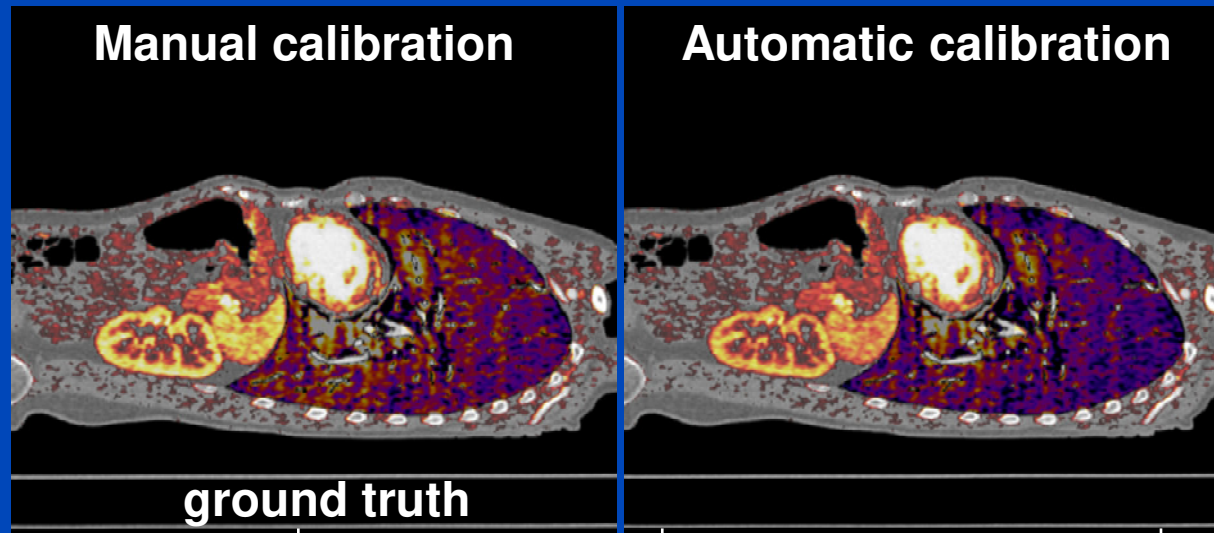


	Ground truth	Automatic calibration	absolute error	relative error
<b>lung</b>	2.50 mg/mL	2.56 mg/mL	0.06 mg/mL	2.4%
<b>heart</b>	11.29 mg/mL	11.31 mg/mL	0.02 mg/mL	0.2%
<b>kidney</b>	7.26 mg/mL	7.27 mg/mL	0.01 mg/mL	0.01%
<b>spleen</b>	2.94 mg/mL	2.94 mg/mL	0.00 mg/mL	0.00%
			mean relative error:	0.6%

# Manual vs. Automatic Calibration

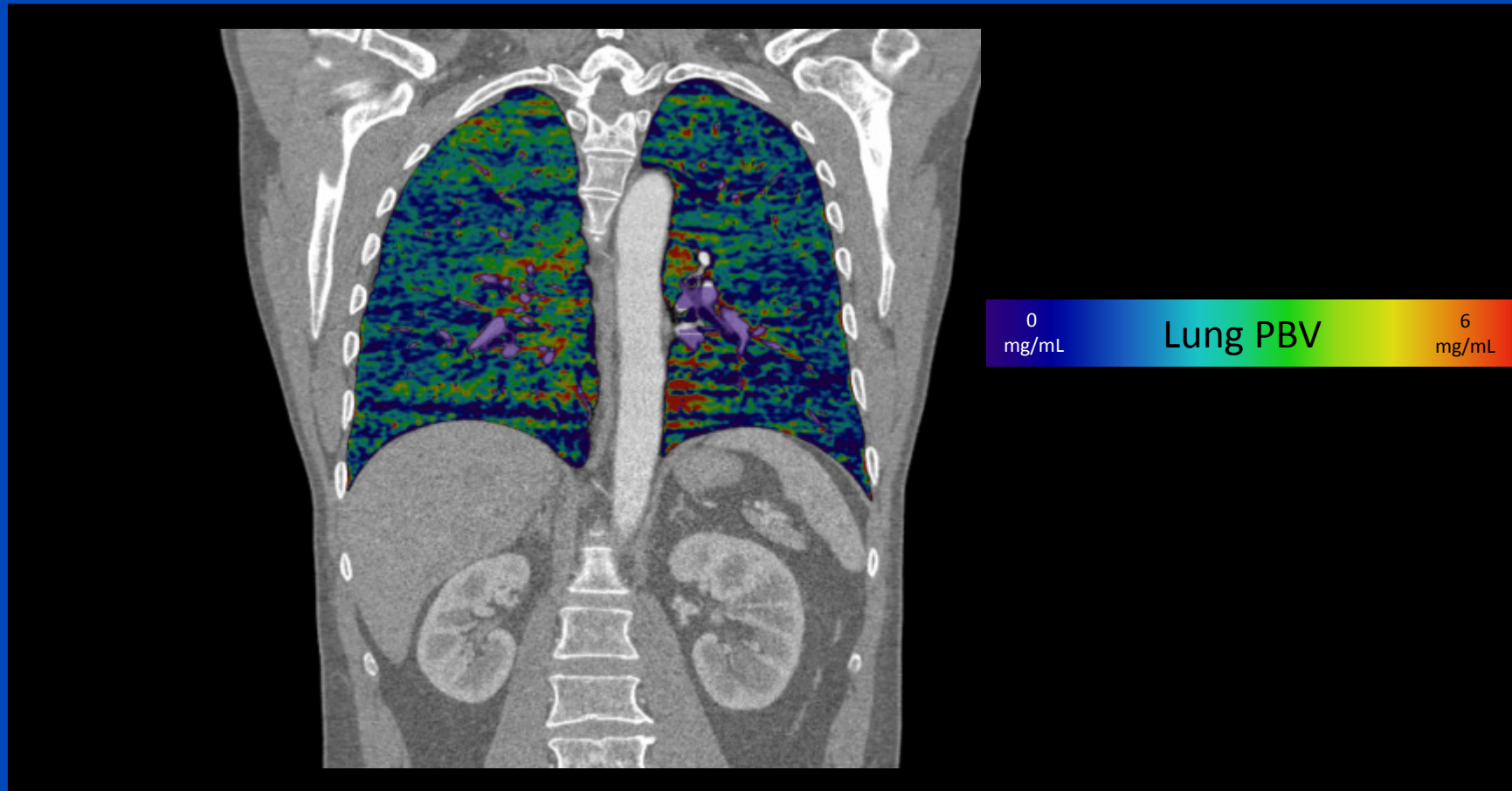
## Iodine Quantification Accuracy

patient 004



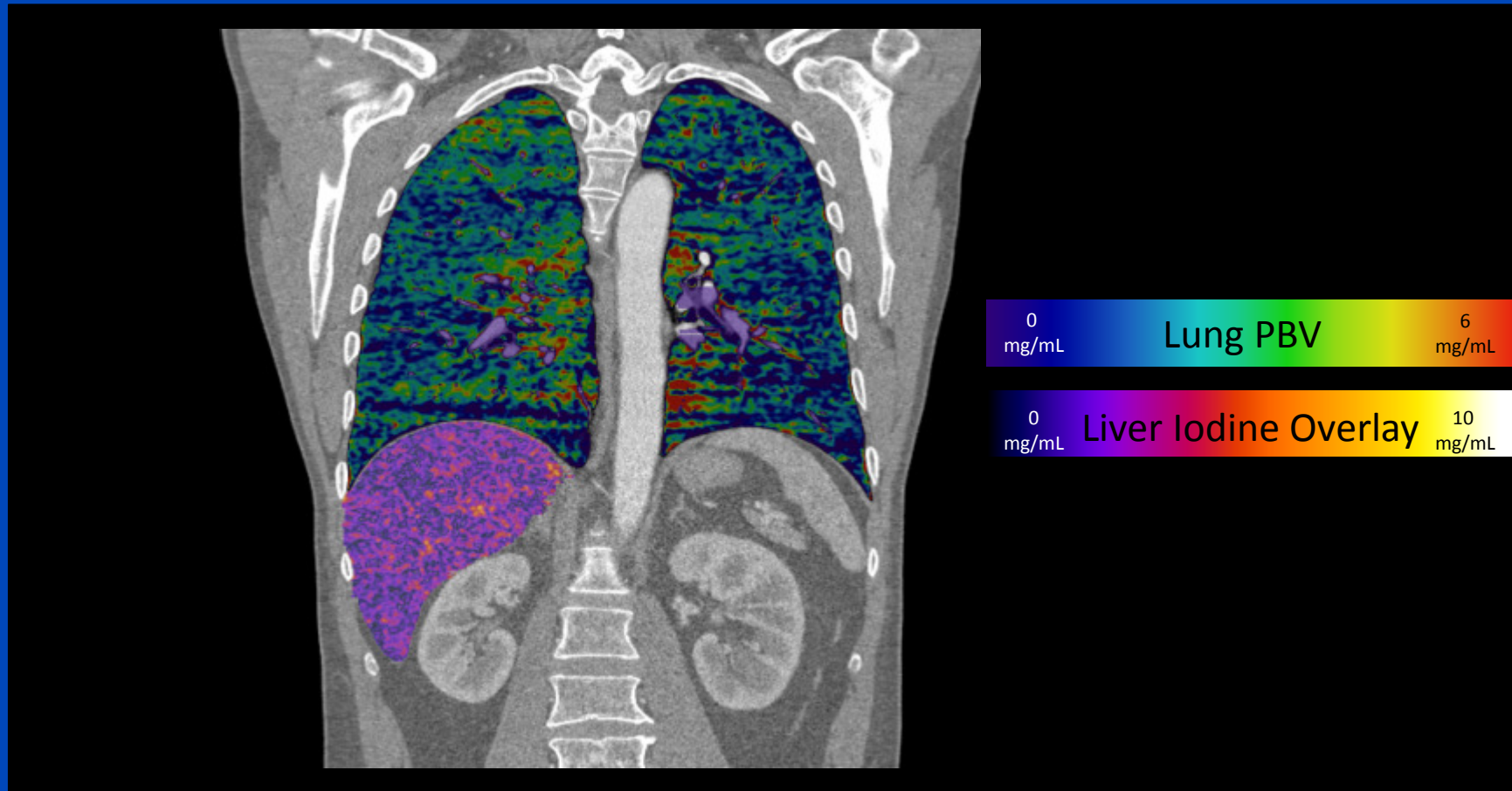
	Ground truth	Automatic calibration	absolute error	relative error
<b>lung</b>	1.50 mg/mL	1.62 mg/mL	0.12 mg/mL	8.0 %
<b>heart</b>	12.39 mg/mL	13.16 mg/mL	0.77 mg/mL	6.2 %
<b>kidney</b>	5.96 mg/mL	6.41 mg/mL	0.45 mg/mL	7.6 %
<b>spleen</b>	4.57 mg/mL	4.91 mg/mL	0.34 mg/mL	7.4 %
			mean relative error:	7.3 %

# Results



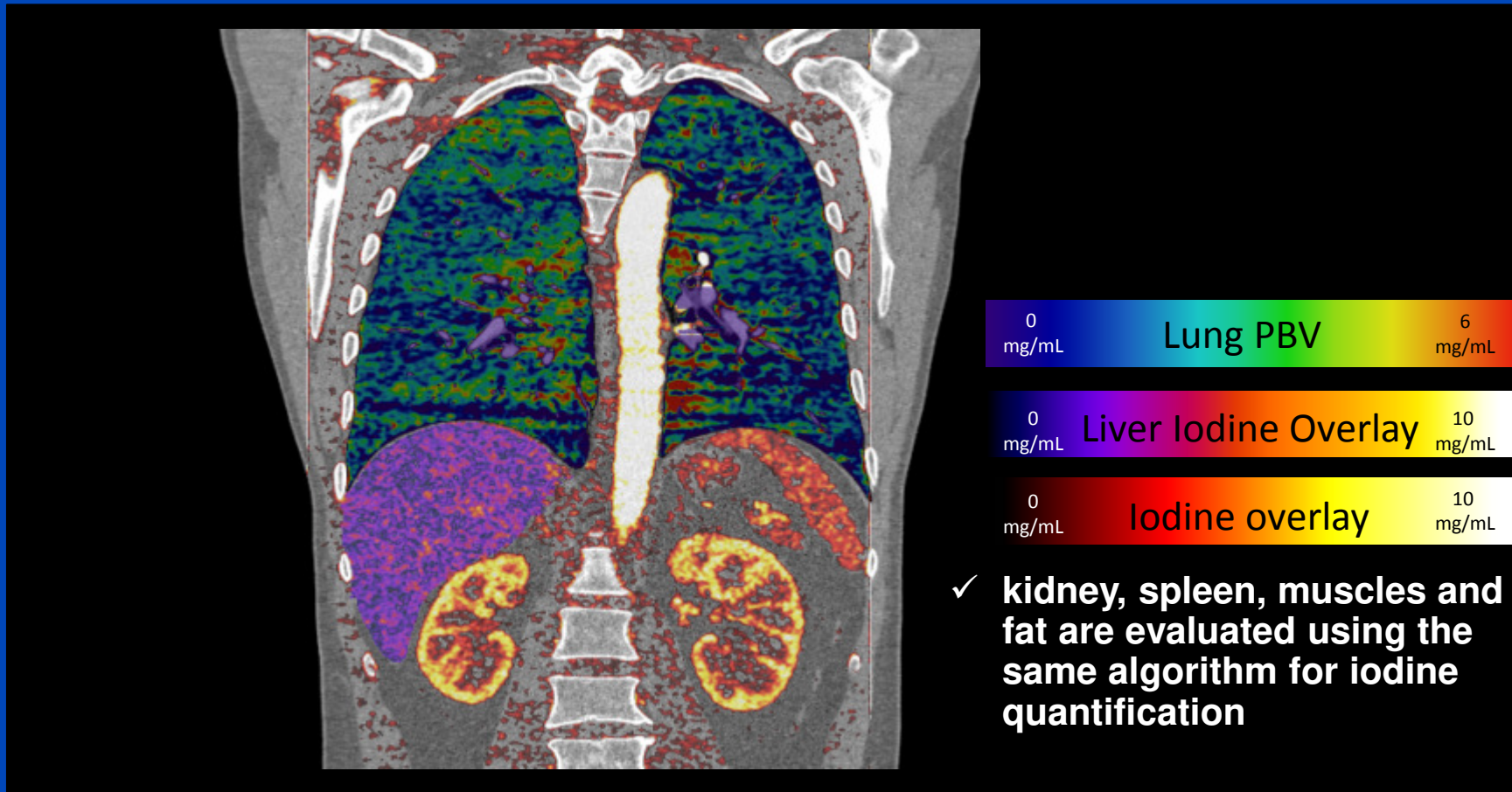
C = 0 HU / W = 1000 HU

# Results



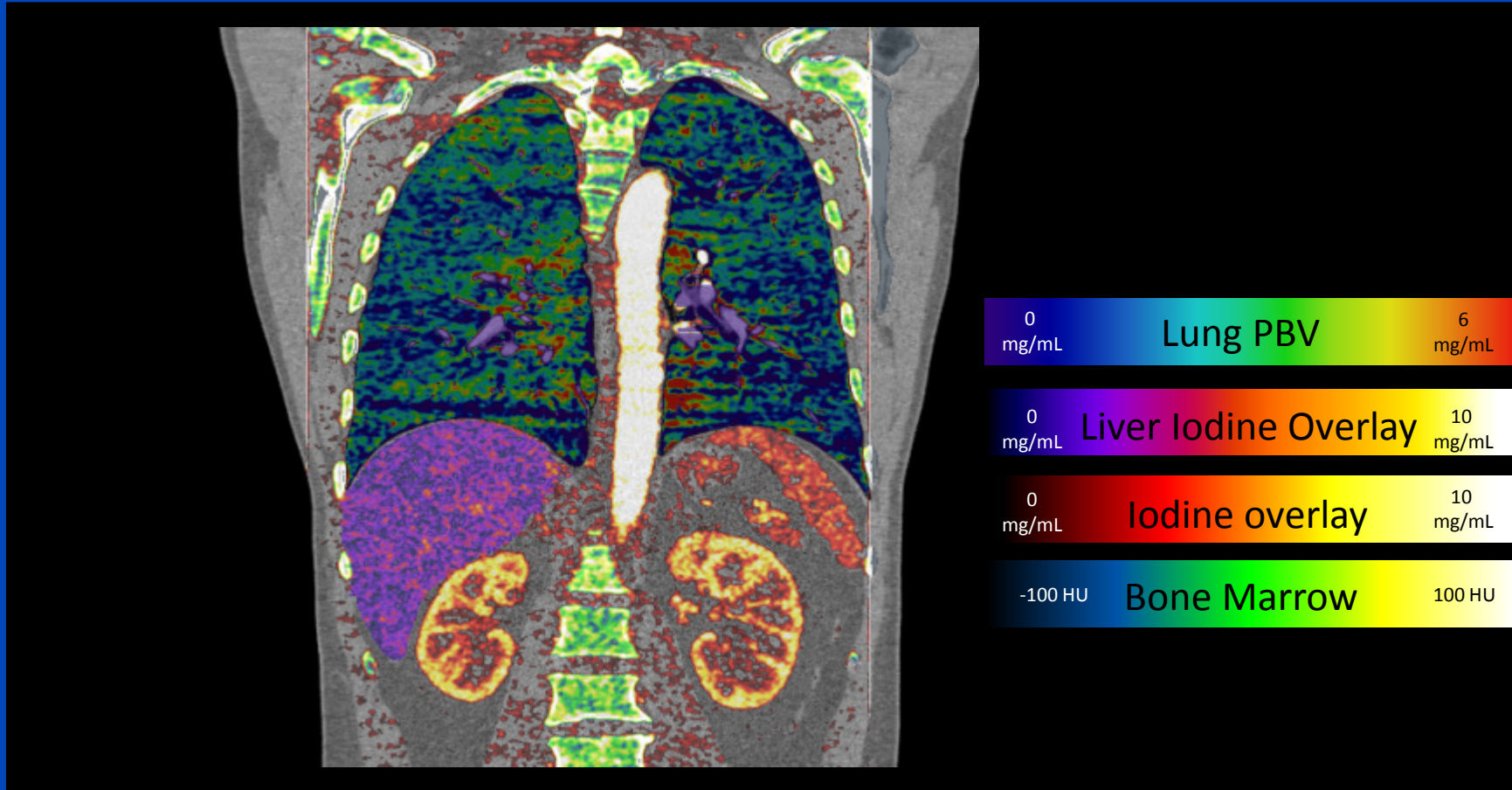
C = 0 HU / W = 1000 HU

# Results



C = 0 HU / W = 1000 HU

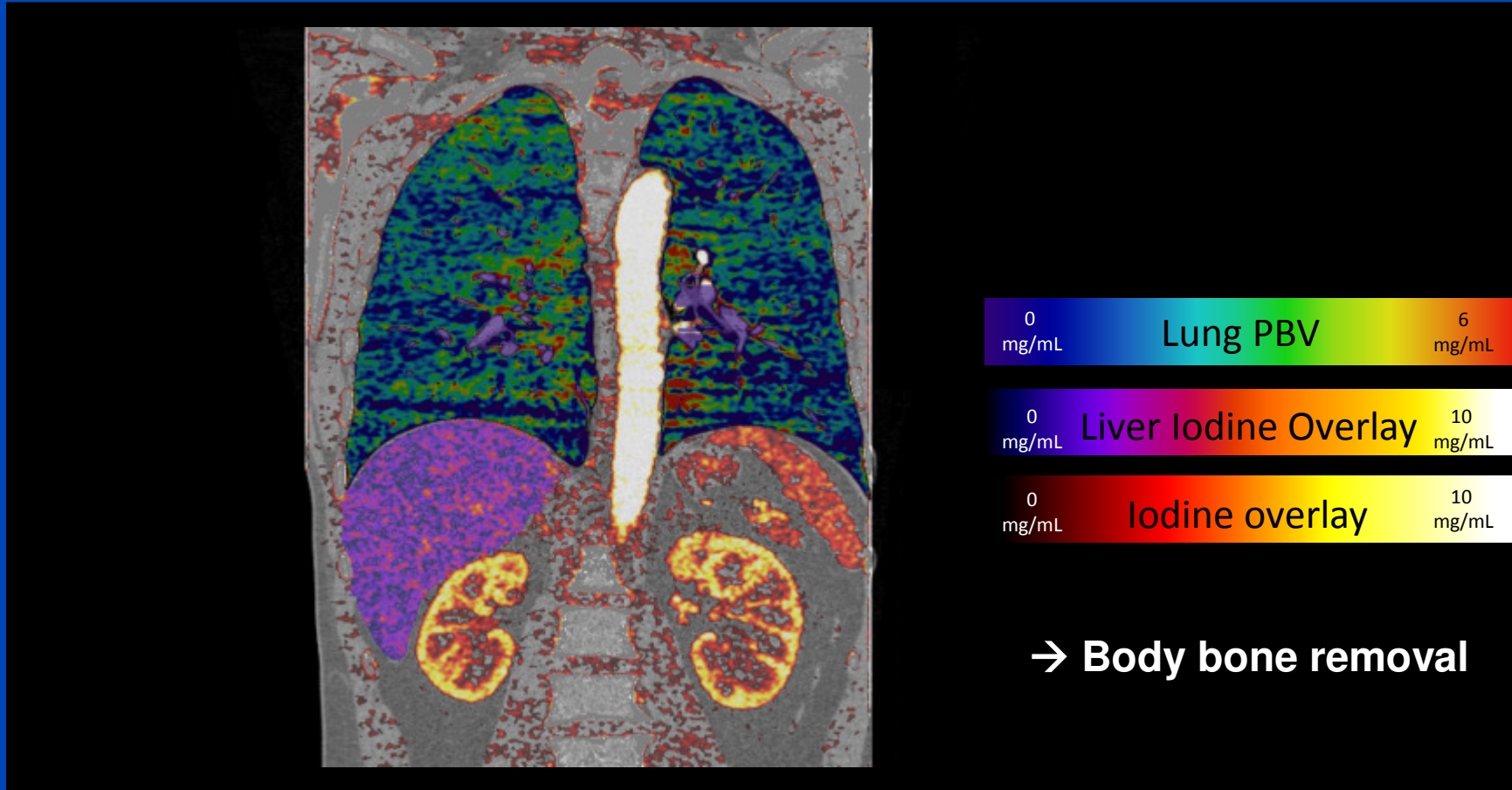
# Results



C = 0 HU / W = 1000 HU

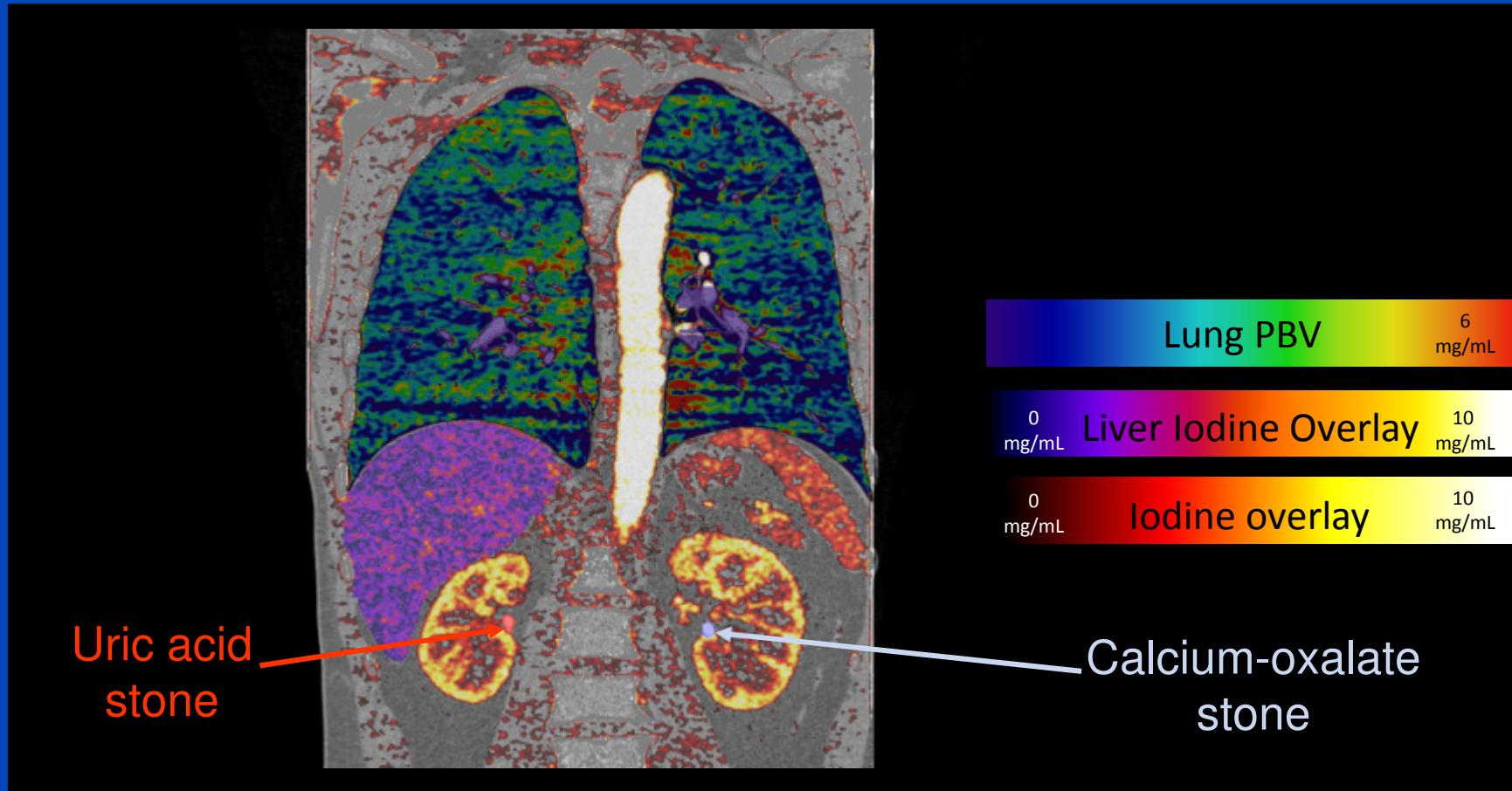


# Results



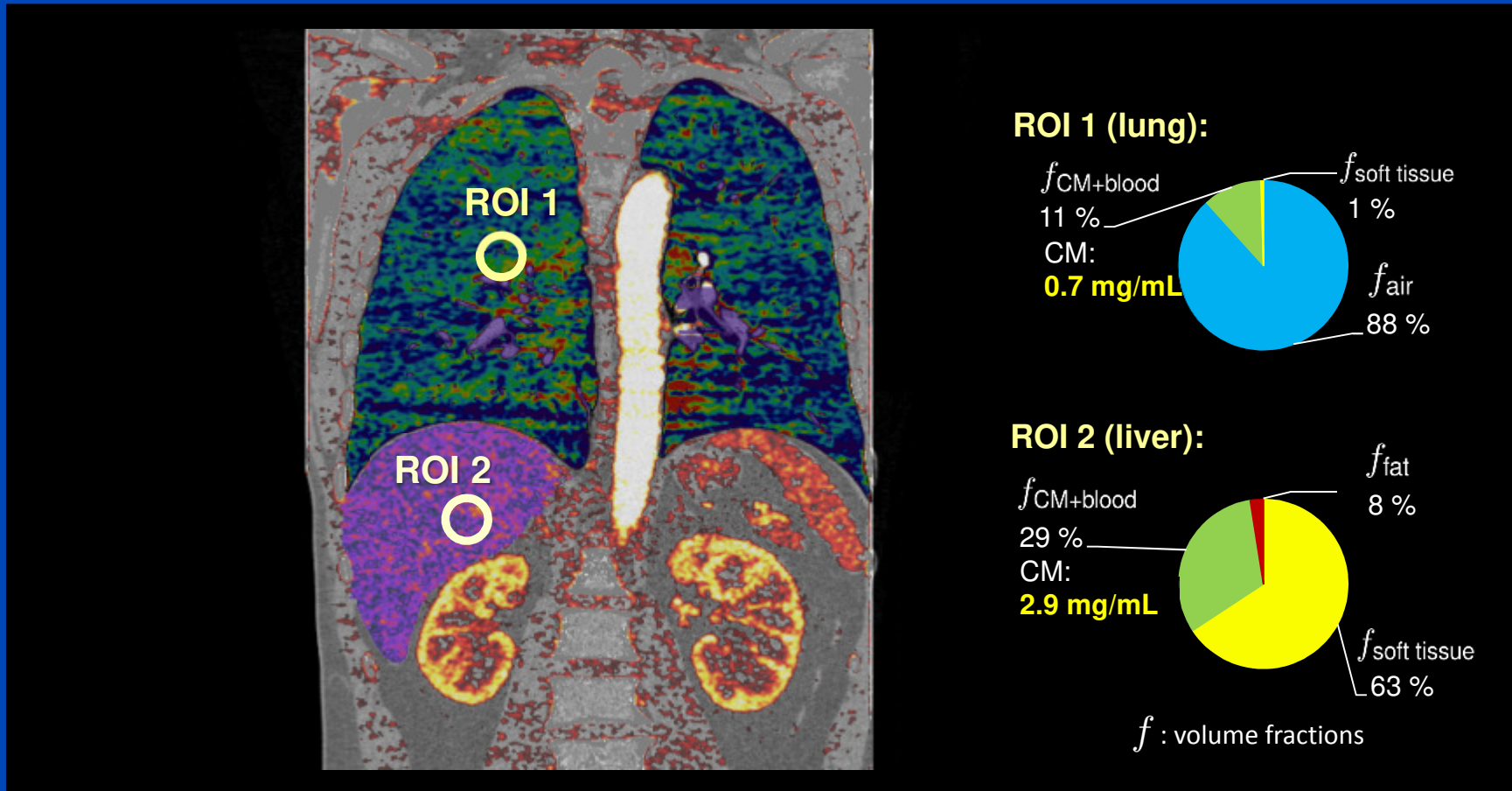
C = 0 HU / W = 1000 HU

# Results



C = 0 HU / W = 1000 HU

# Results



C = 0 HU / W = 1000 HU

# Conclusions

- **Automatic patient-specific calibration potentially provides a high iodine quantification accuracy**
  - Results comparable to those obtained by a user who calibrated, selected and applied the applications to various organs
- **Simultaneous evaluation and combination of varying DE applications**
  - Potentially, no further user-interaction is needed
- **Important step towards the presentation of evermore increasingly complex information in spectral CT**
- **However, the automatic segmentation is still an issue.**

# Thank You!

This presentation will soon be available at [www.dkfz.de/ct](http://www.dkfz.de/ct).

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Job opportunities through DKFZ's international PhD or Postdoctoral Fellowship programs ([marc.kachelriess@dkfz.de](mailto:marc.kachelriess@dkfz.de)).

Parts of the reconstruction software were provided by RayConStruct® GmbH, Nürnberg, Germany.