

# Imaging TC nello stroke e in cardio-TC: il contributo della ricostruzione model- based e dell'imaging spettrale

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# Iterative Model-Based Reconstruction

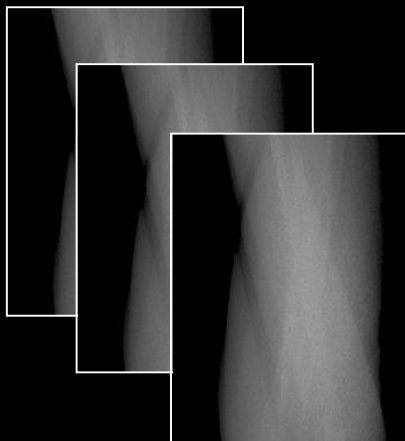


# Knowledge-based IR

## System Geometry Model

Incorporate *knowledge* of system geometry

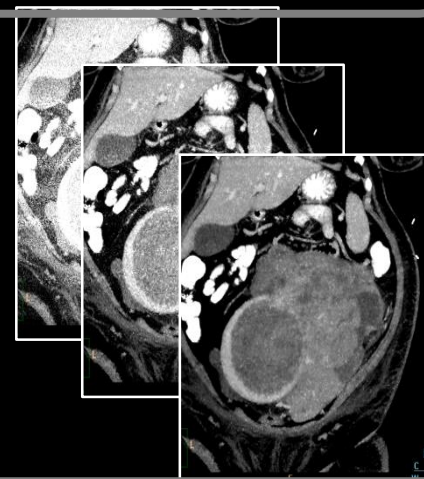
Enables pathway between projection & image domains



## Radiation Physics Model

Incorporate *knowledge* of X-ray statistics

Enables identification of real noise



Iterative  
Model  
Reconstruction

## Noise Statistical Model

Incorporate *knowledge* of object properties

Targets results with lowest noise

## Clinical Target Model

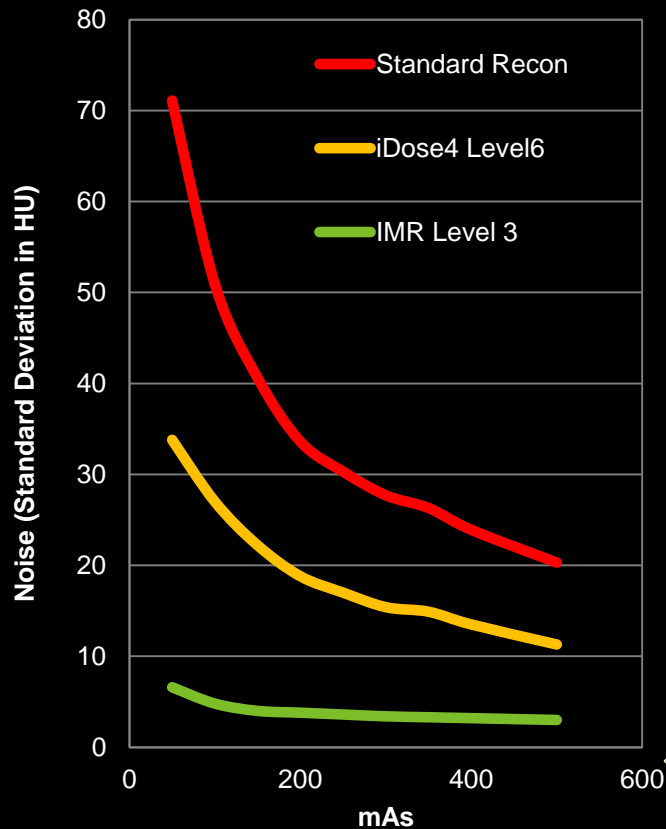
Incorporate *knowledge* of desired characteristics

Enables user control over desired results

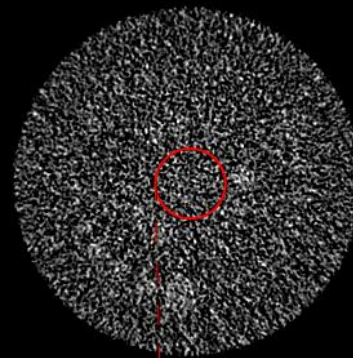


Virtually noise-free

73 - 90% Noise Reduction\*

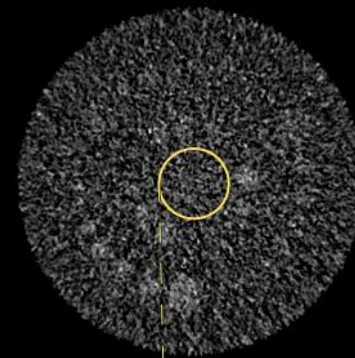


1 mm Slice Thickness, 10 mGy CTDI<sub>vol</sub>



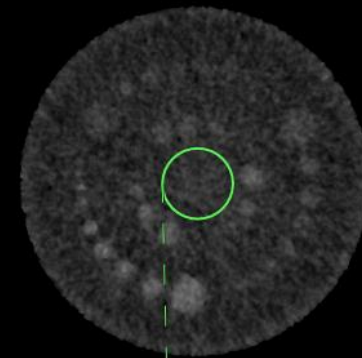
SD: 15.4

Standard  
Reconstruction



SD: 8.7

iDose<sup>4</sup>  
Level 6



SD: 1.9

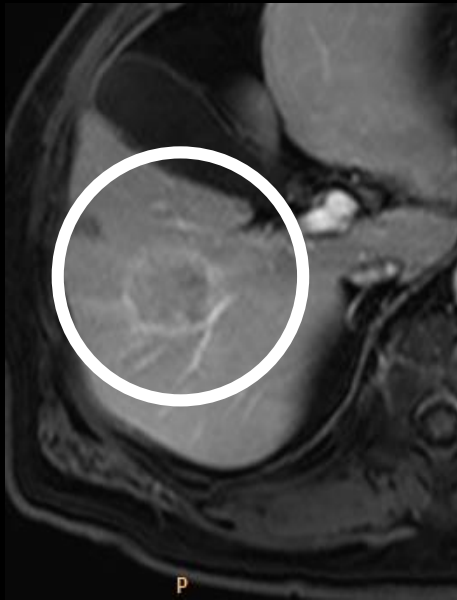
IMR

True model/knowledge-based IR

# IMR Industry-leading Low-contrast

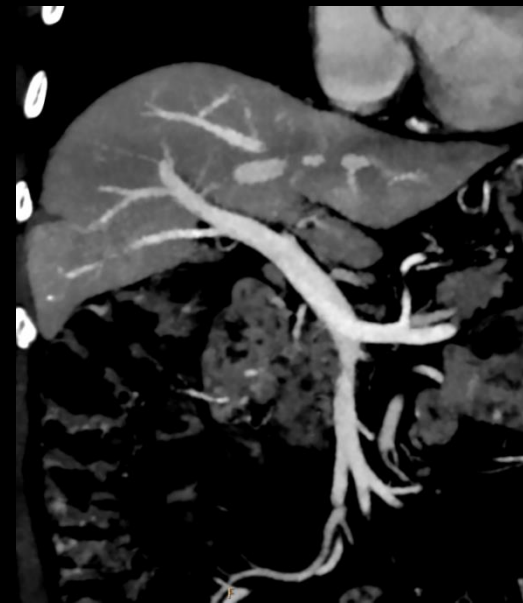
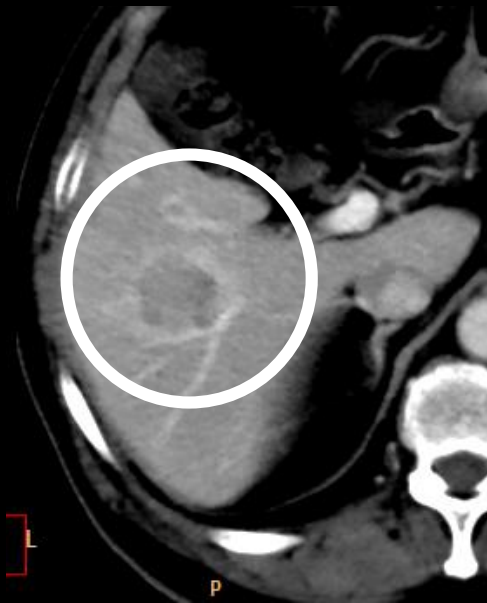
Visualize small and subtle detail

2 mm, 0.3 % @ 10.4 mGy CTDI<sub>vol</sub>



3T MR

*Lesion detected on CT, confirmed with MRI on same patient*



IMR

Courtesy: Amakusa Medical Center, Japan

\* Low-contrast resolution was assessed using reference body protocol across multiple scans/observations; performed using 7 mm slices, and tested on Catphan phantom. Data on file.



IMR in neuro



## Use in neuro

- Suspect stroke (in ER)
- AngioCT
- Oncology
- Brain Perfusion

CT

Computed  
Tomography

## IMR in Neuro



iDose<sup>4</sup>



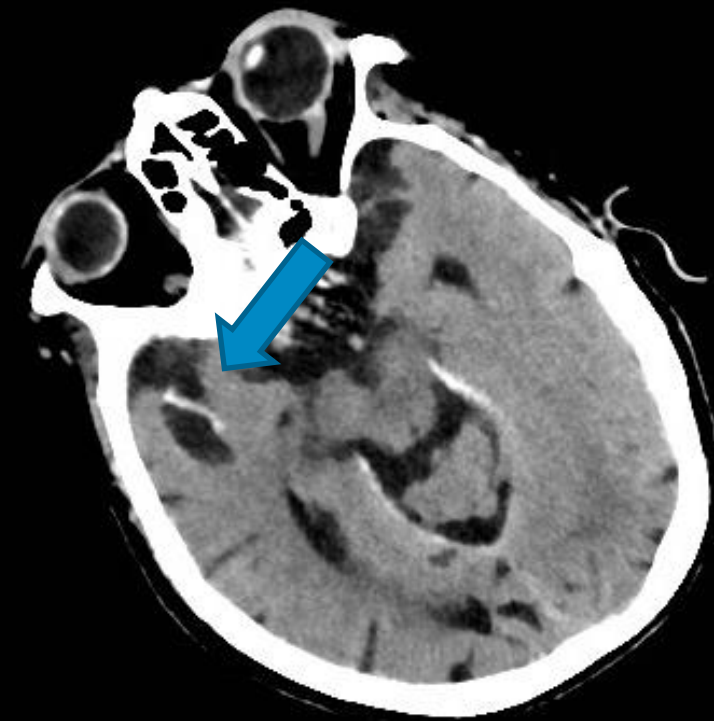
### Patient case:

ED patient, non cooperative, with stroke symptoms.

Non-enhanced CT was reconstructed with 4,5 mm thickness (iDose) and 2 mm (IMR).

IMR showed hyperdense vessel in right hemisphere not visible with iDose due to thicker slices.

Angio CT confirmed the stroke.





CT

Computed  
Tomography

## IMR in Neuro

iDose<sup>4</sup>

IMR

IMR

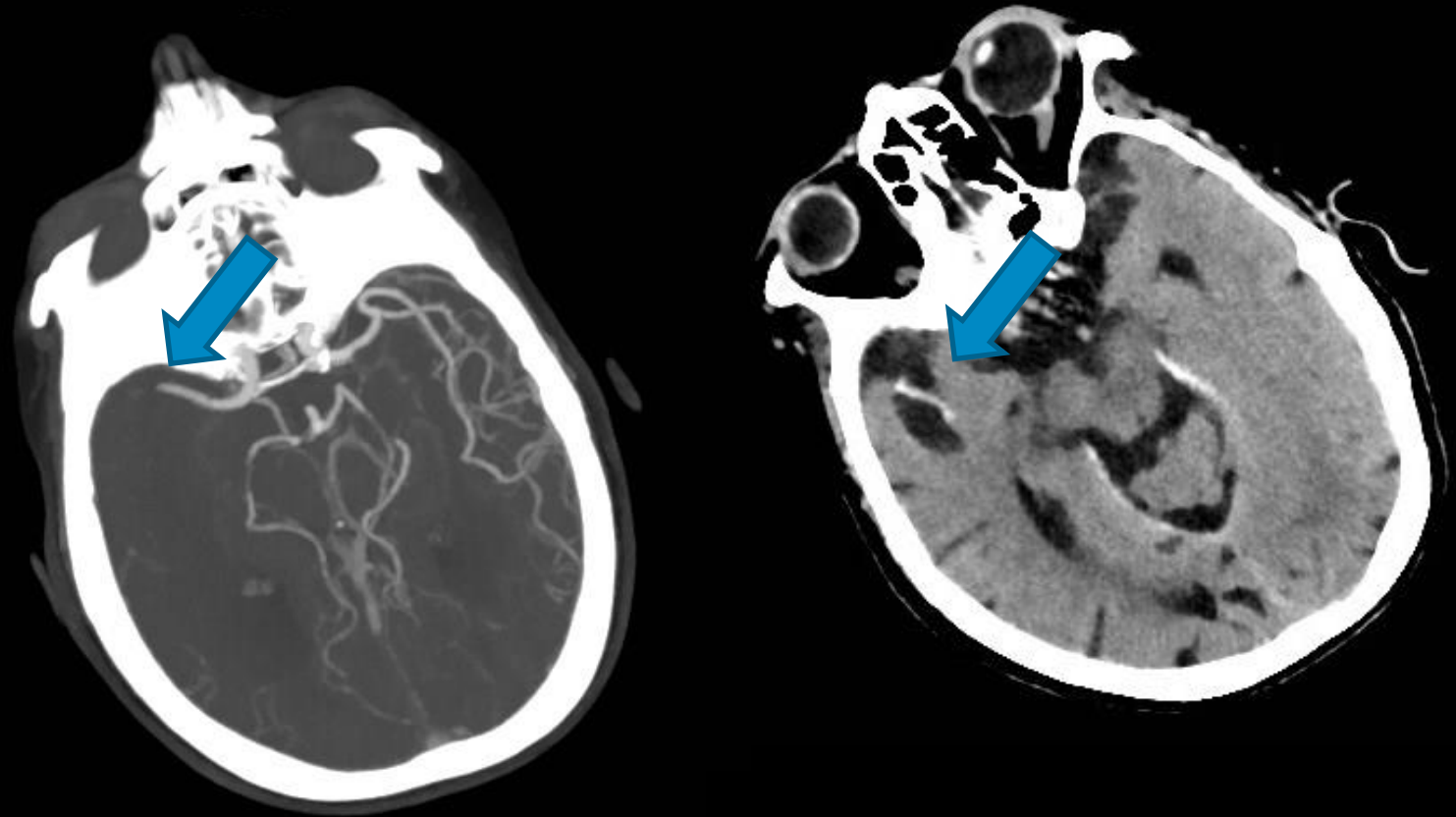
### Patient case:

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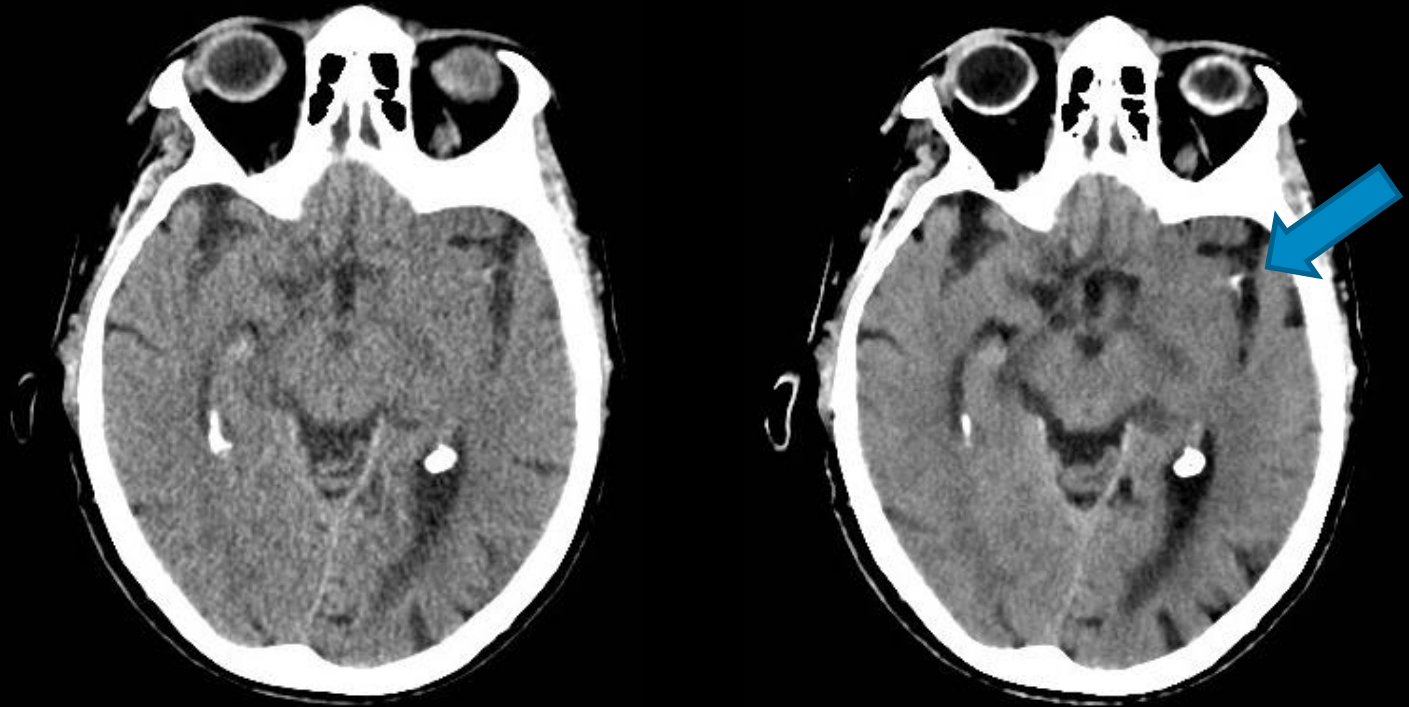
**Patient case:**

ED patient with stroke symptoms.

NECT was reconstructed with 4.5 mm thickness (iDose) and 2 mm (IMR).

IMR showed hyperdense vessel in left hemisphere hardly visible with iDose.

Follow up scan shows extended hypoperfusion area, better recognizable in IMR



CT

Computed  
Tomography

## IMR in Neuro

iDose<sup>4</sup>

IMR

IMR

### Patient case:

ED patient with stroke symptoms.

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CT

Computed  
Tomography

## IMR in Neuro

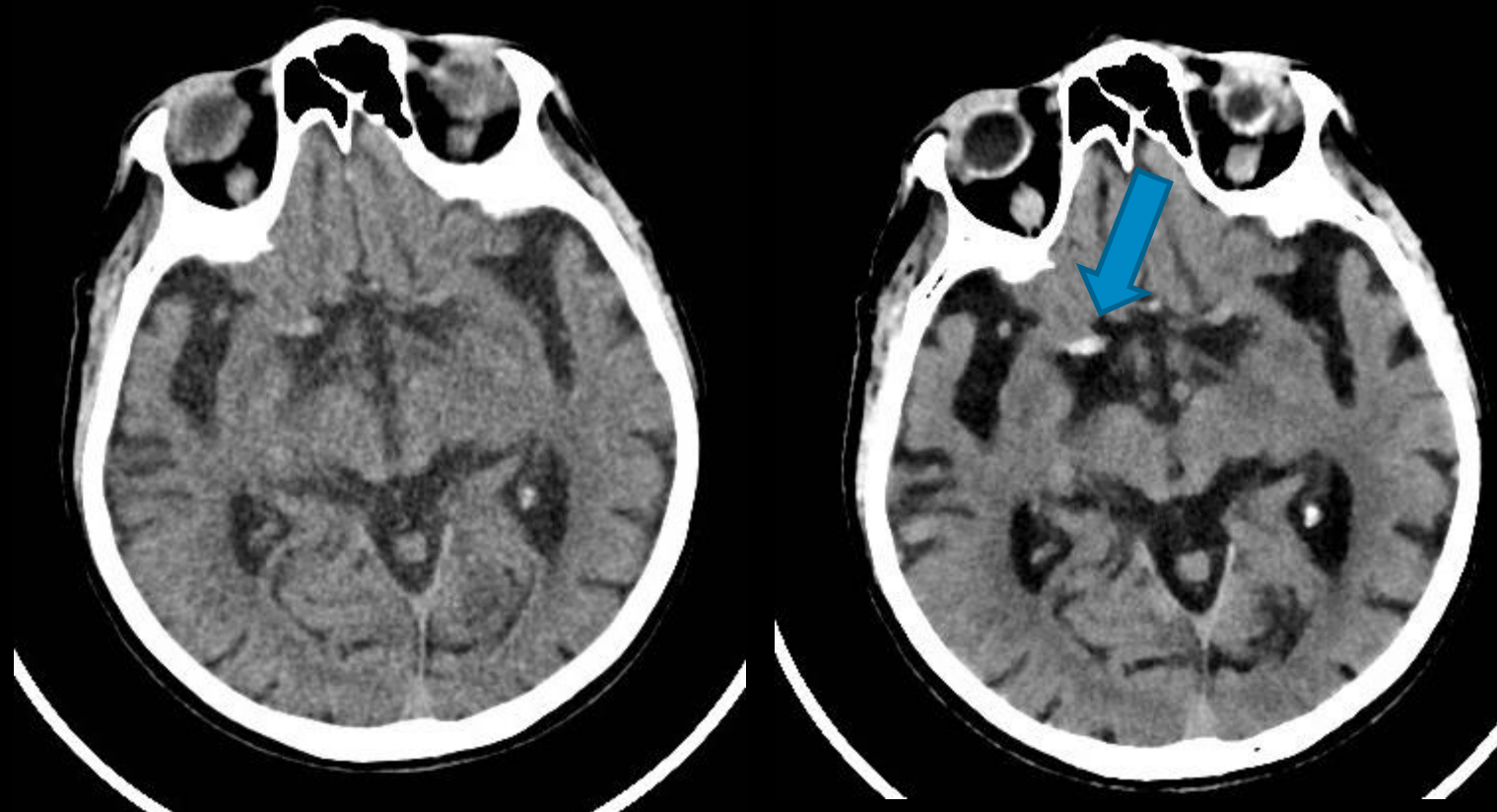
iDose<sup>4</sup>

IMR

IMR

### Patient case:

Patient with stroke symptoms.  
NECT was reconstructed with 4.5 mm thickness (iDose) and 2 mm (IMR).  
IMR showed hyperdense vessel in right hemisphere that could be easily missed with iDose.





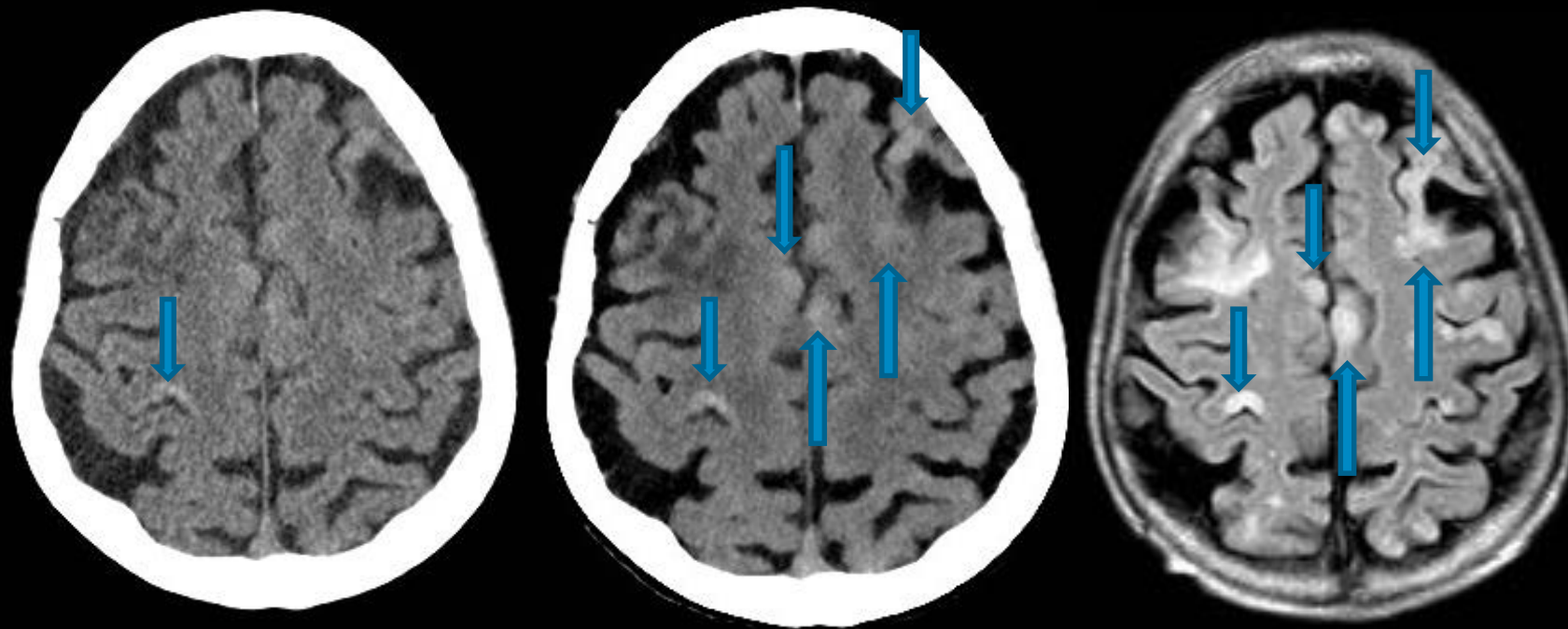
iDose<sup>4</sup>

## Patient case:

Patient with oncologic history (HCC), arrived in ED unconscious. NECT was reconstructed with 4.5 mm thickness (iDose) and 2 mm (IMR).

iDose showed hemorrhagic region in right hemisphere, with one small hyperdense area.

IMR showed several hyperdense areas, that MR confirmed to be brain metastases



Plaque  
delineation and  
differentiation



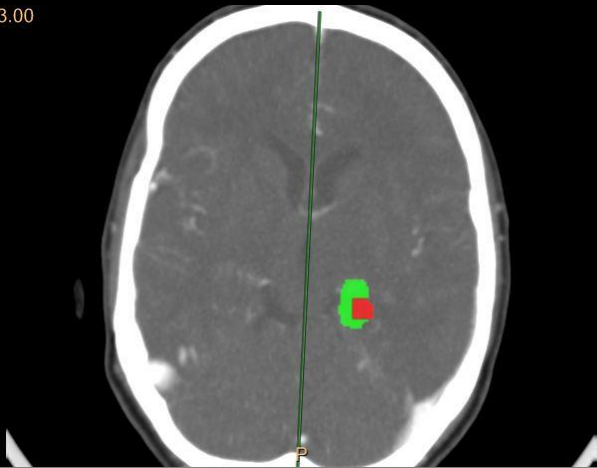
Advanced brain perfusion  
Time insensitive brain perfusion

8 Feb, 2011 / 16:30:03.00  
PERFUSION  
Series 3 - Slice 6  
Slice Pos: 225.7 mm

Inc. MTT &  
Norm. CBV

Inc. MTT &  
Red. CBV

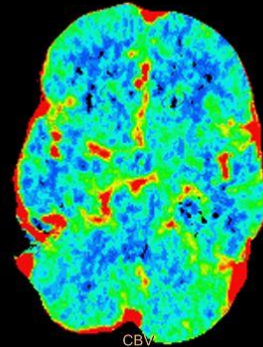
tMIP  
WL 96  
WW 510



MMC 8 Feb, 2011 / 16:30:03.00  
Philips, eCT  
80 kV  
FOV 220.0 mm  
Thickness 5.00 mm  
Zoom 1.28  
Contrast

R  
5 cm

WL 10  
WW 20  
8 Feb, 2011 / 16:30:03.00  
PERFUSION  
Series 3 - Slice 4  
Slice Pos: 215.0 mm

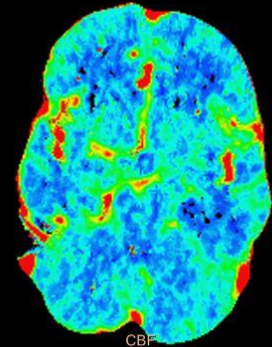


CBV  
P

MMC 8 Feb, 2011 / 16:30:03.00  
Philips, eCT  
80 kV  
FOV 220.0 mm  
Thickness 5.00 mm  
Zoom 1.00  
Contrast

R  
10 cm  
5  
0

WL 100  
WW 200  
8 Feb, 2011 / 16:30:03.00  
PERFUSION  
Series 3 - Slice 4  
Slice Pos: 215.0 mm



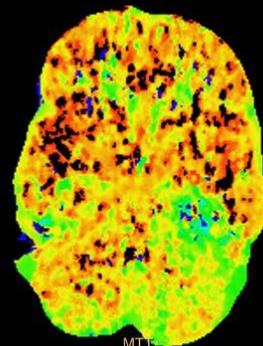
CBF  
P

R  
18.2  
13.5  
8.8  
4.1  
10 cm

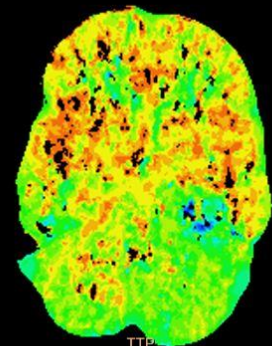
WL 38  
WW 14

ROI Statistics for Slice 6				
ROI#	CBV	CBF	MTT	TTP

WL 125  
PHILIPS



MTT  
P



TTP  
P



## Main benefits in neuro

- Virtually noise-free images
- Dose reduction
- Thinner slices to improve visualization of smaller details (dense vessels)
- Exceptional low-contrast resolution to improve subtle changes in parenchyma





...un piccolo fuori programma...

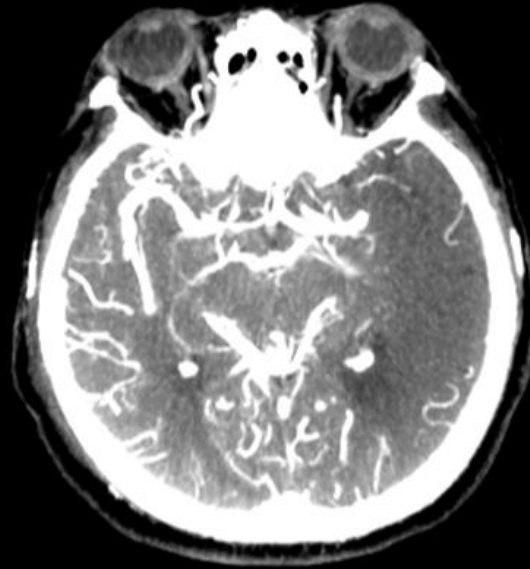
# Comprehensive stroke diagnosis based on 3 XperCT scans



*Non-contrast XperCT*



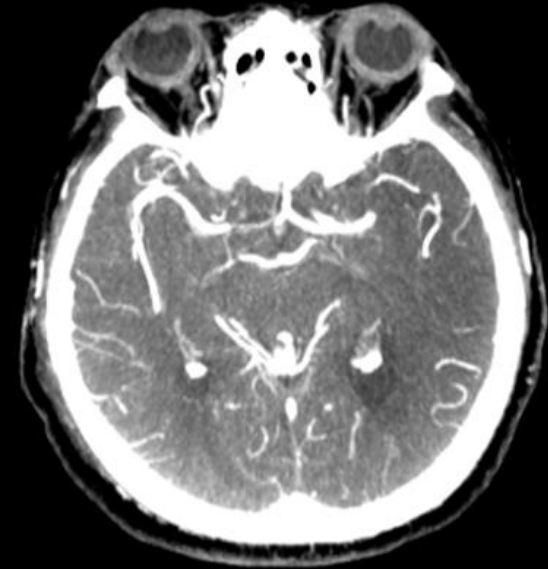
Identify bleeding  
and ischemic changes



*Early phase CE-XperCT*



Identify proximal occlusion



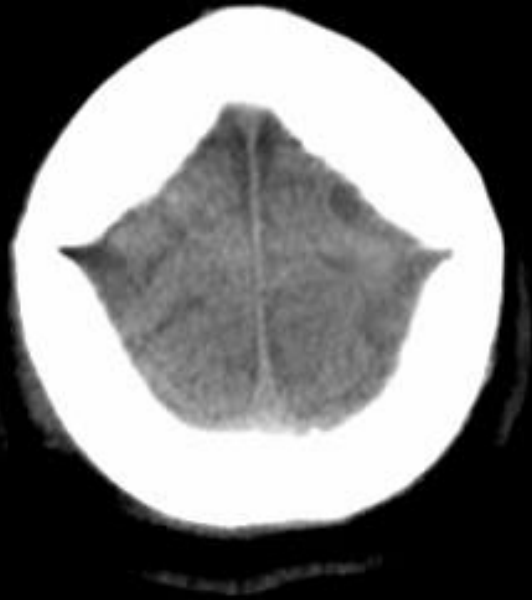
*Late phase CE-XperCT*



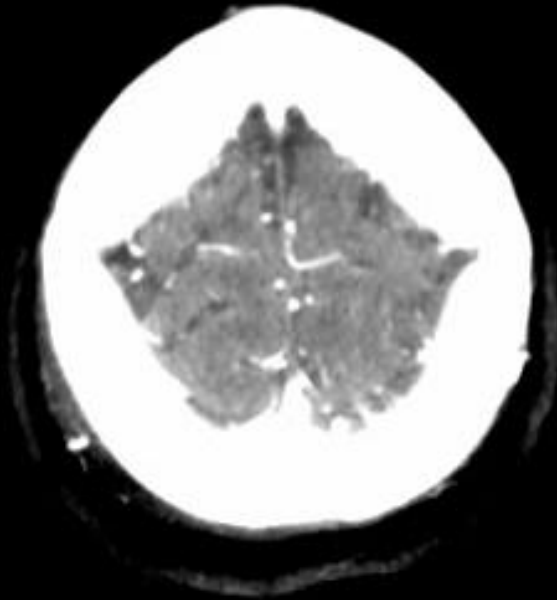
Identify collaterals



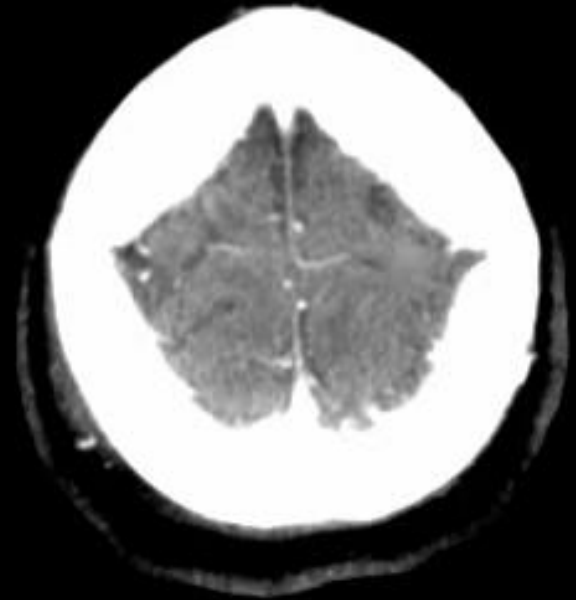
Identify penumbra



↓  
Identify bleeding  
and ischemic changes

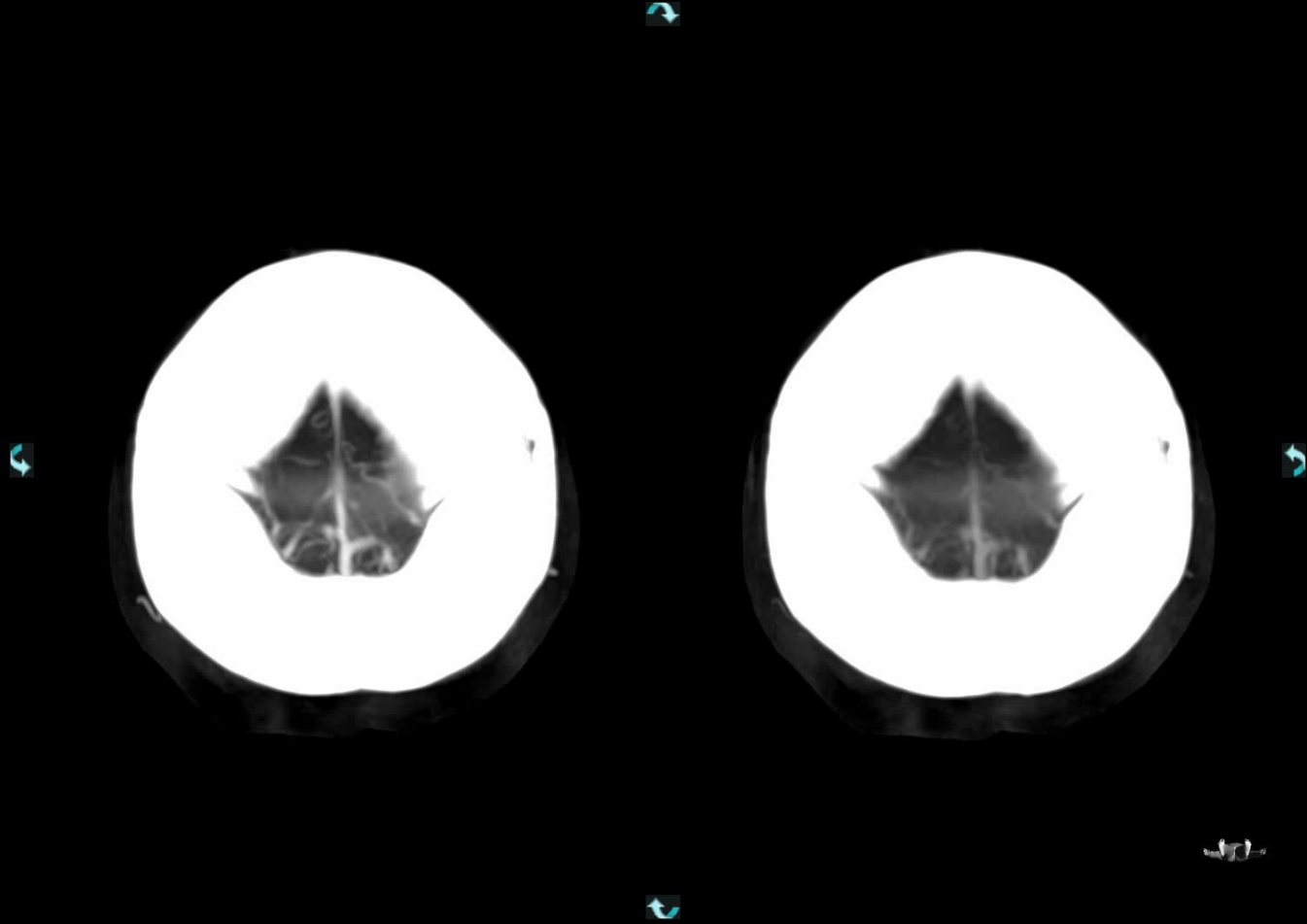


↓  
Identify proximal occlusion

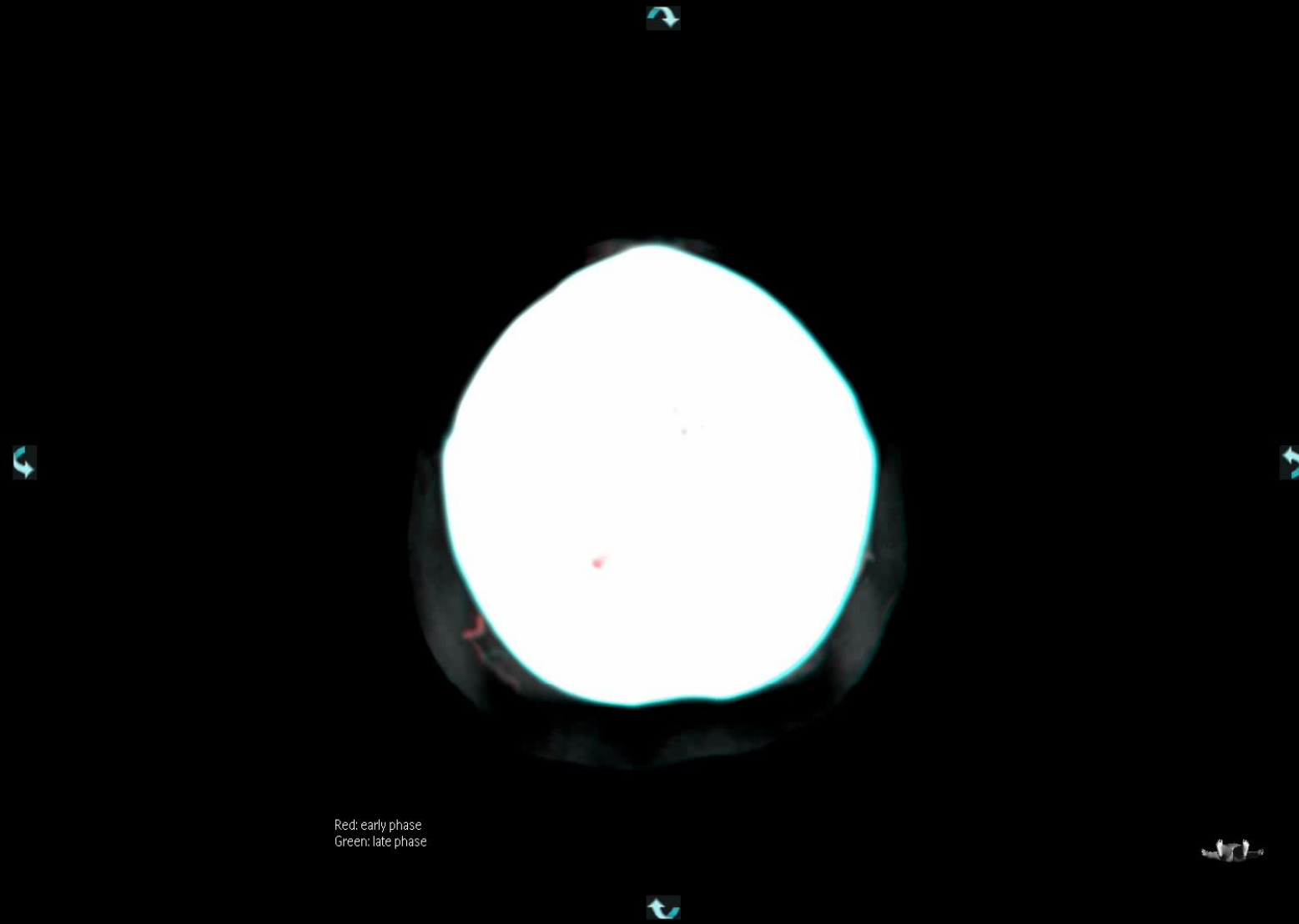


↓  
Identify collaterals

# Thick slab MIP



# Overlay of early and late phase CE-XperCT with Dual-View





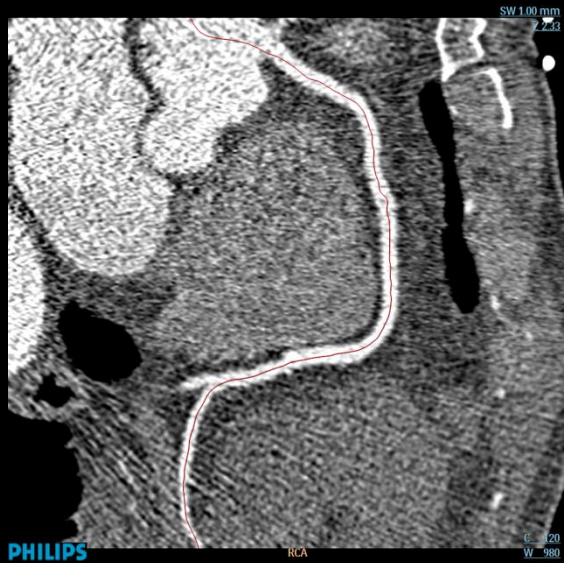
IMR in cardiac



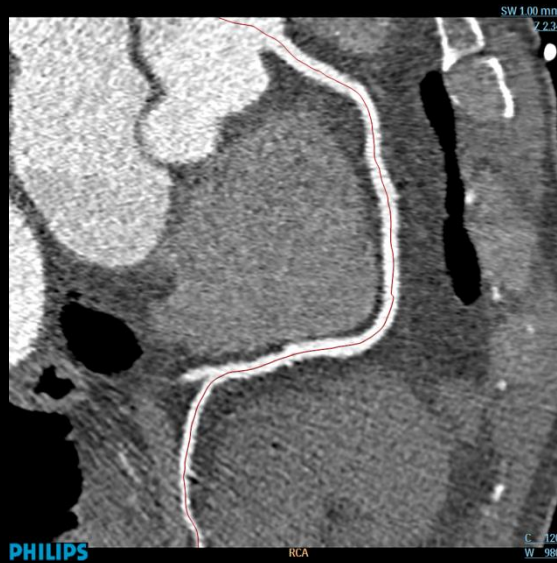
## Use in cardiac

- Ischaemia
- Intrastent stenosis
- Follow up post-intervention
- Myocardial Dynamic perfusion

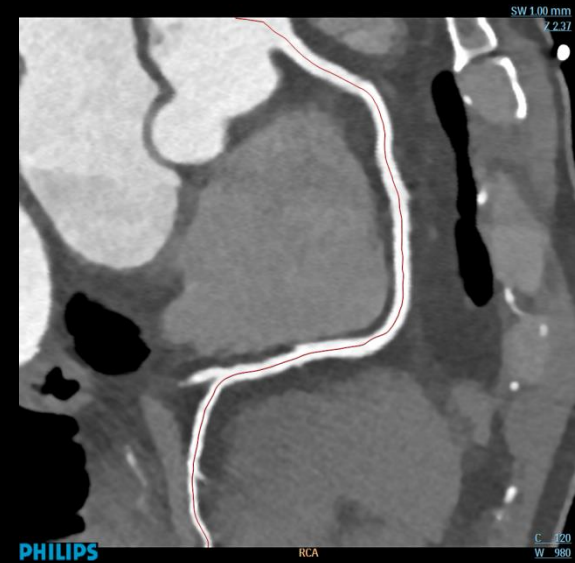
# 0.9 mSv IMR Cardiac



Standard  
Reconstruction



iDose Level 4



IMR Level 3

100 kVp, 110 mAs

CTDI<sub>vol</sub> 5.2 mGy, DLP: 67.1 mGyxc, Effective Dose: 0.9 mSv (k=0.014)\*,

\* AAPM technical report 96

Amakusa Medical Center Japan



# 0.9 mSv IMR Cardiac



Standard  
Reconstruction

iDose Level 4

IMR Level 3

100 kVp, 110 mAs

CTDI<sub>vol</sub> 5.2 mGy, DLP: 67.1 mGyxc, Effective Dose: 0.9 mSv (k=0.014)\*,

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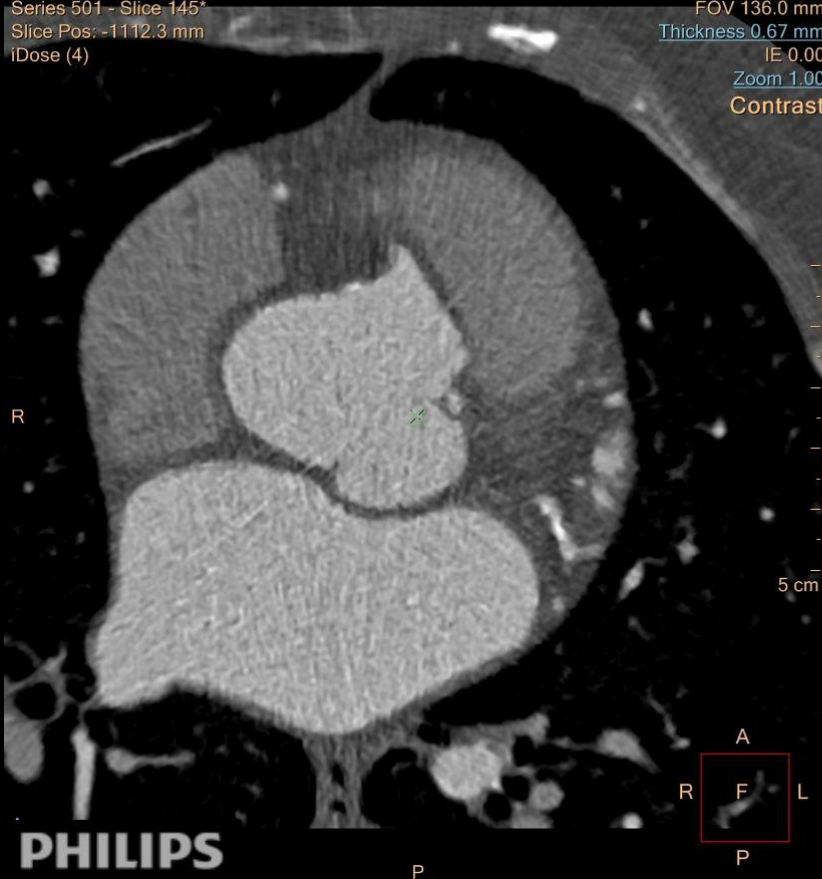
Amakusa Medical Center Japan

# Cardiac Step&Shot @ 0,53mSv !

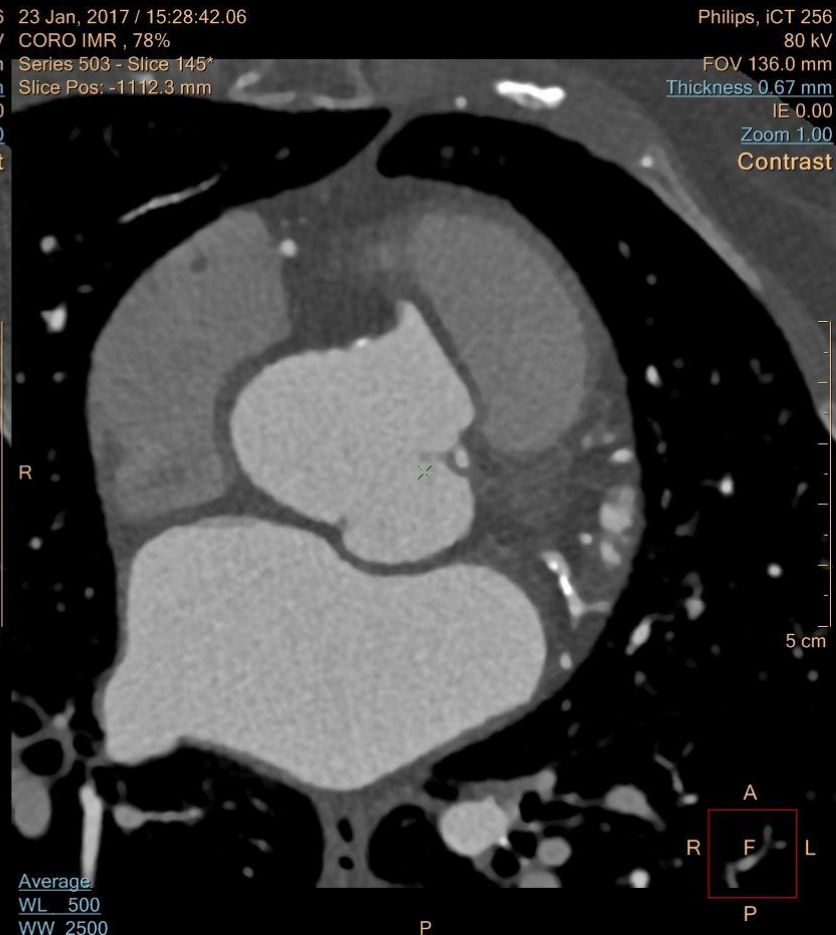
Effective Dose = 0,014 x DLP – AAPM 96

23 Jan, 2017 / 15:28:42.06  
CORO IDOSE, 78%, iDose (4)  
Series 501 - Slice 145\*  
Slice Pos: -1112.3 mm  
iDose (4)

Philips, iCT 256  
80 kV  
FOV 136.0 mm  
Thickness 0.67 mm  
IE 0.00  
Zoom 1.00  
Contrast



0,67 mm IDose LV 4



0,67 mm IMR Cardiac Routine LV1

# Cardiac Step&Shot @ 0,53mSv !

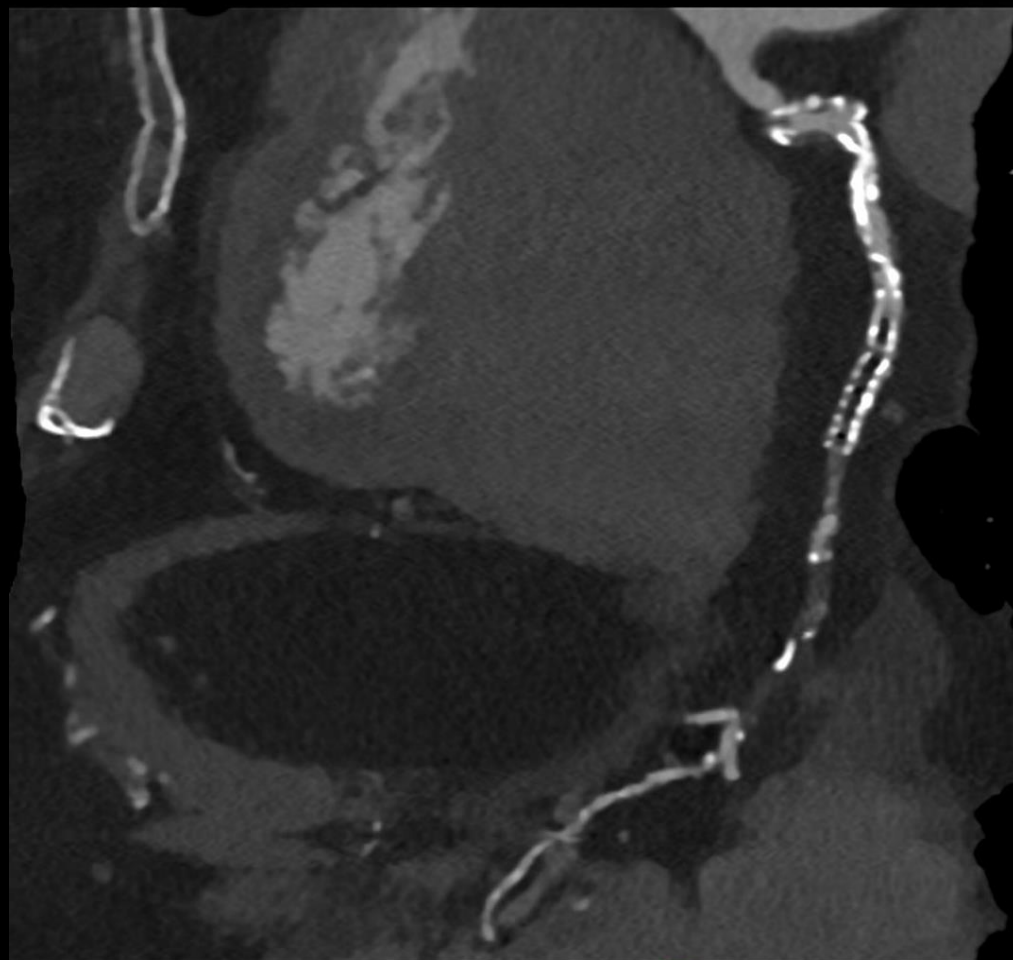
Effective Dose = 0,014 x DLP – AAPM 96



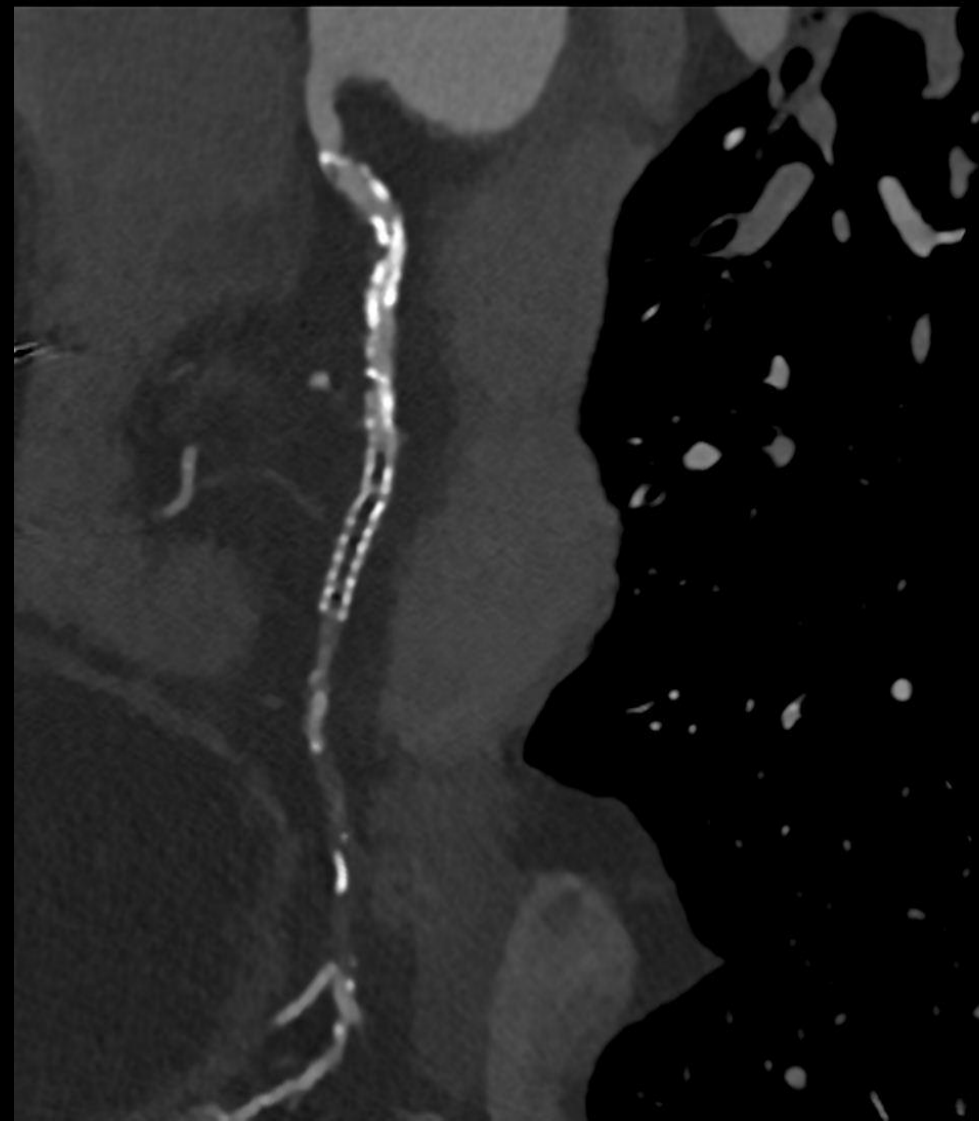


# Ingenuity Cardio TC

## Intrastent stenosis RCA

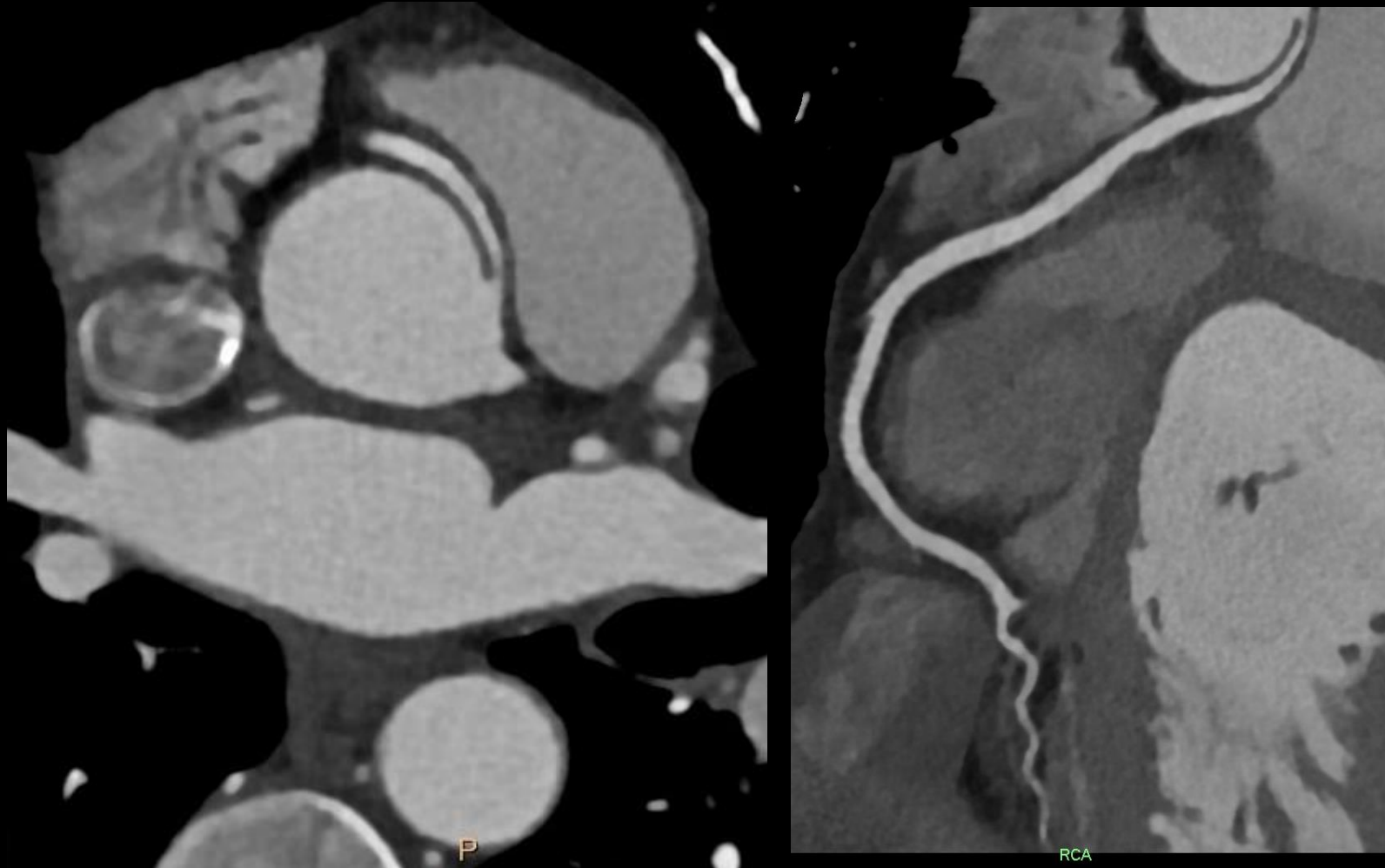


RCA



# Ingenuity Cardio TC

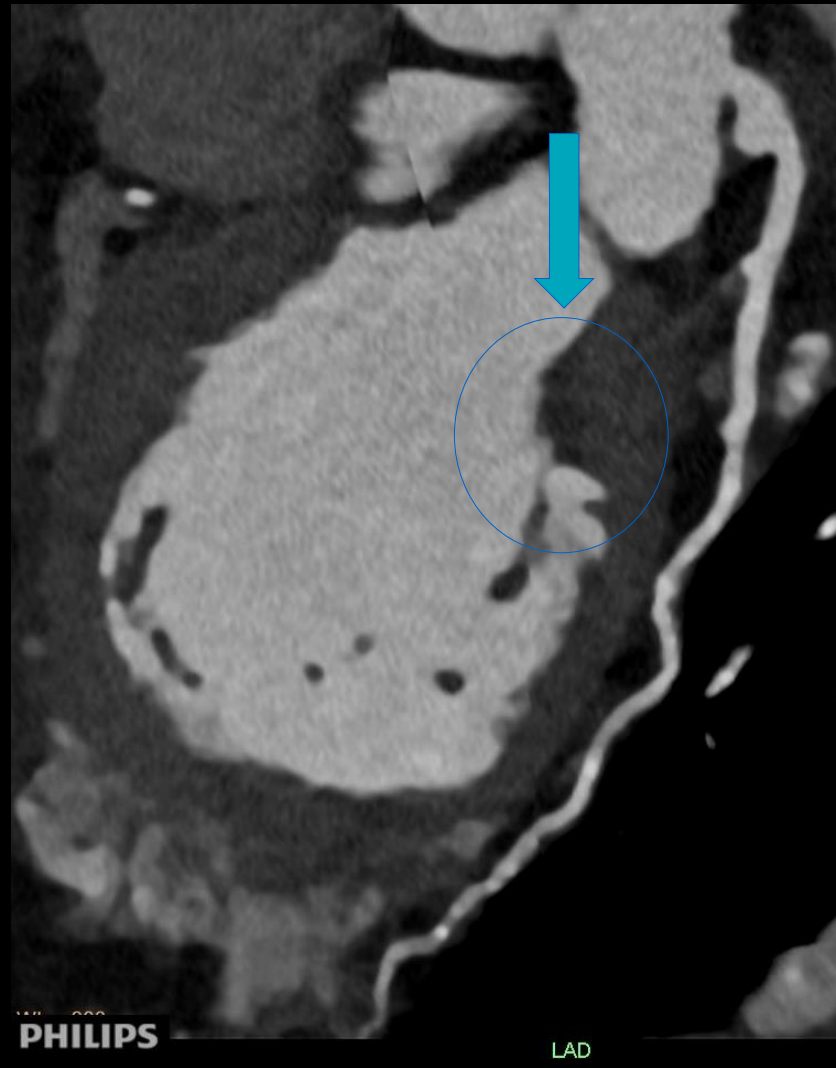
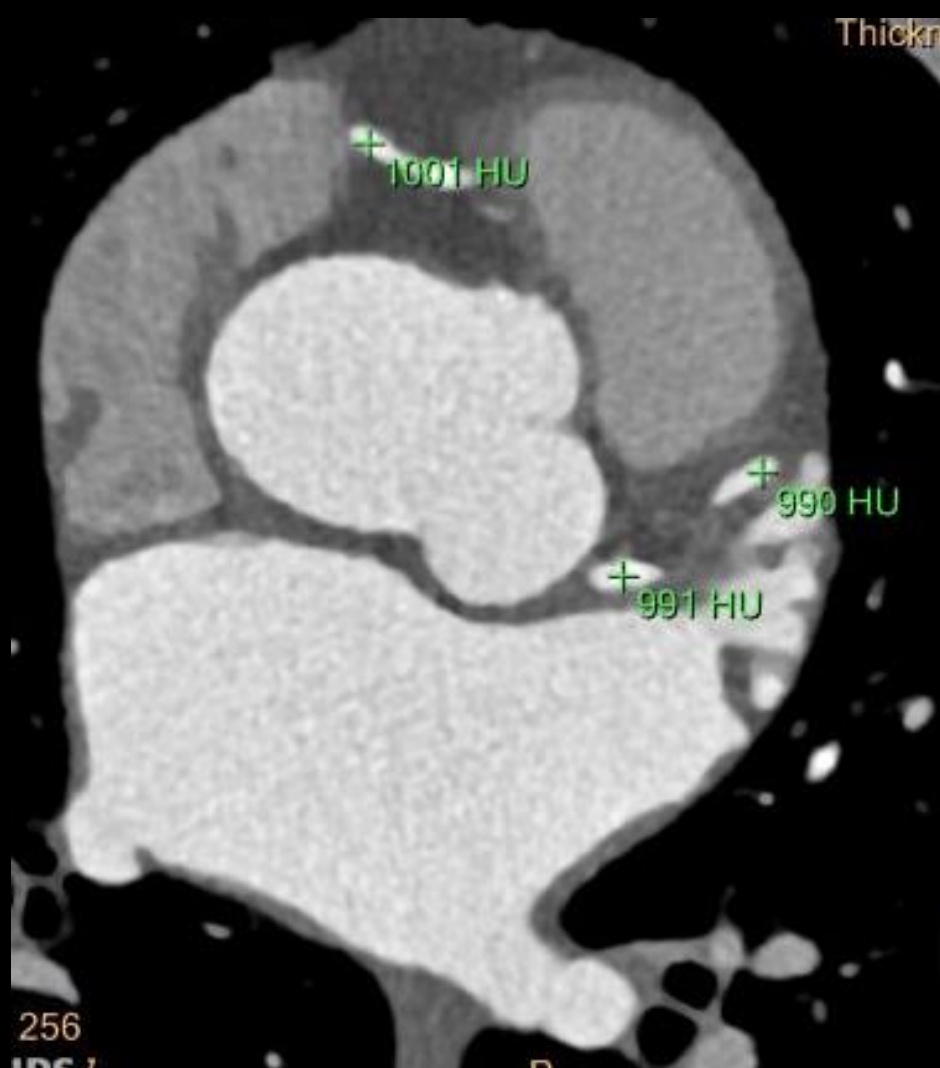
## Anomalous origin RCA



Injection protocol  
70ml – 350 mg/ml

# Ingenuity Cardio TC

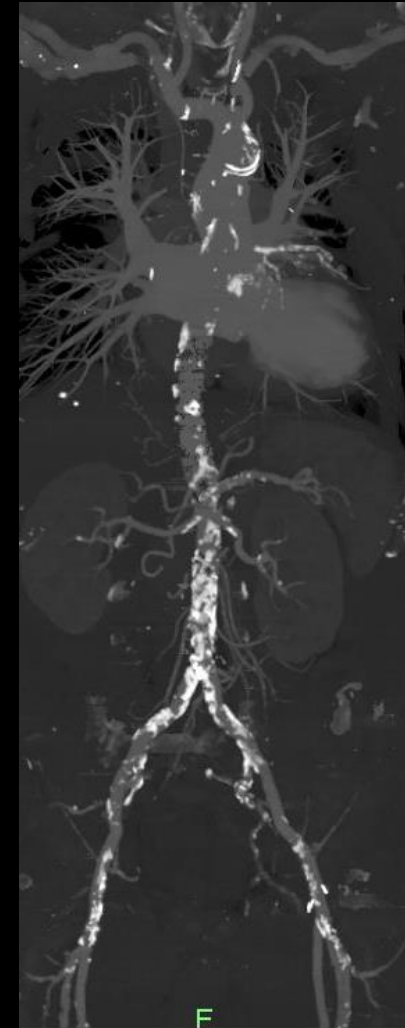
## Anomalous origin RCA



Injection protocol  
70ml – 350 mg/ml



CT  
Computed  
Tomography





## Main benefits in cardiac

- Virtually noise-free images
- Dose reduction (lower kV)
- Low noise with high spatial resolution to improve visualization of smallest plaques
- Improve visualization of vessel lumen even in mixed plaques
- Allows lower concentration of iodine





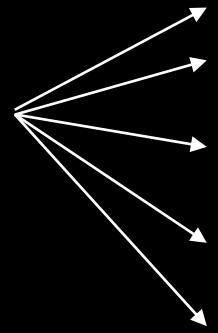
# IQon SpectralCT

## Spectral always on



# IQon Spectral CT

## Clinical features

- Dedicated spectral tools for vascular, cardiac, onco
  - Mono energetic images 40-200 keV with constant noise
  - Effective Z-number
  - Iodine map
  - Iodine quantification
  - Spectral tumor tracking with functional assesment
  - Cardiac perfusion with iodine quantification
  - Material decomposition  
(Iodine/Calcium/Uric acid/water)
  - Virtual no contrast
  - Attenuation curves analysis
- 
- Metal artifact reduction
  - Beam hardening reduction
  - Calcium blooming reduction
  - Low contrast resolution improvement
  - Reduce contrast usage

# IQon Spectral CT

Main operational benefits

Spectral on demand

No changes in workflow

No need to prospectively select patients

More info -> more diagnostic confidence  
-> less repeated exams





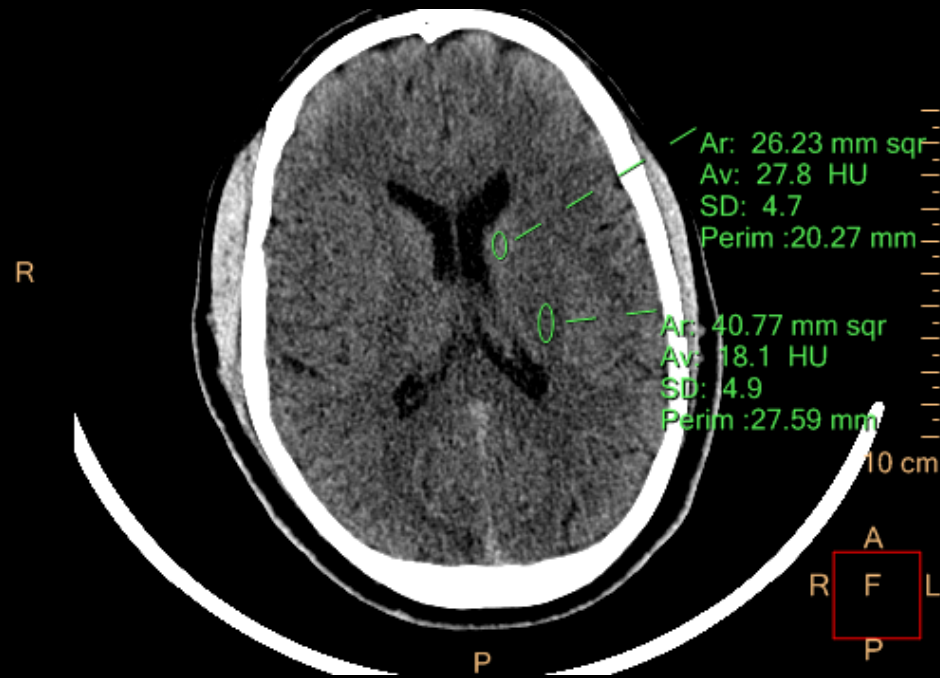
IQon in neuro



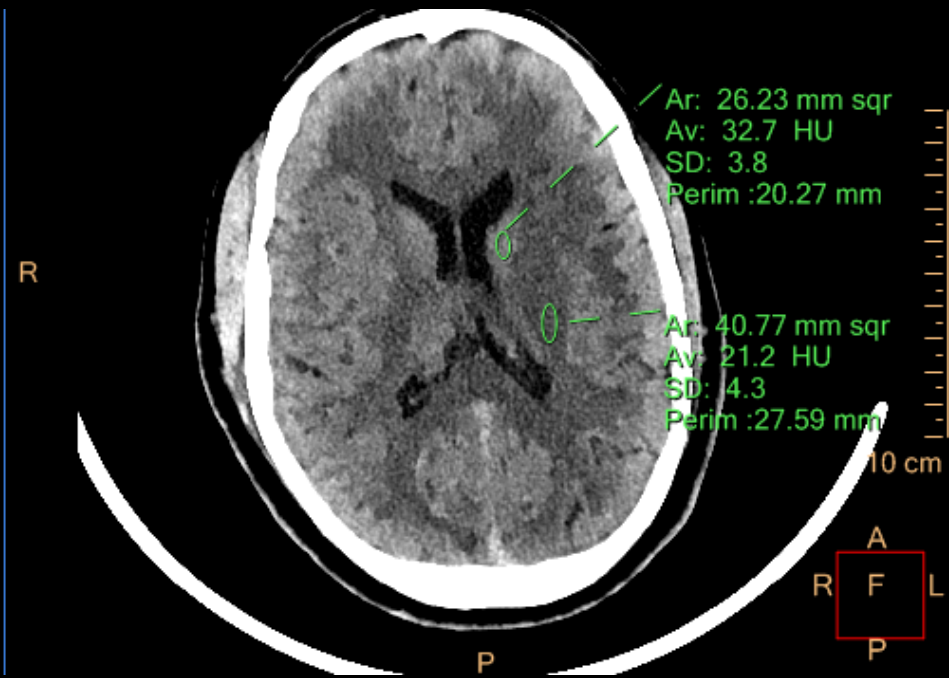
## Use in neuro

- Plaque characterization
- Vessel delineation and calcium blooming reduction (all in one)
- Calcium removal
- Improved white-grey matter differentiation thanks to low keV images

# Confidence in visualization Improved grey-white matter differentiation

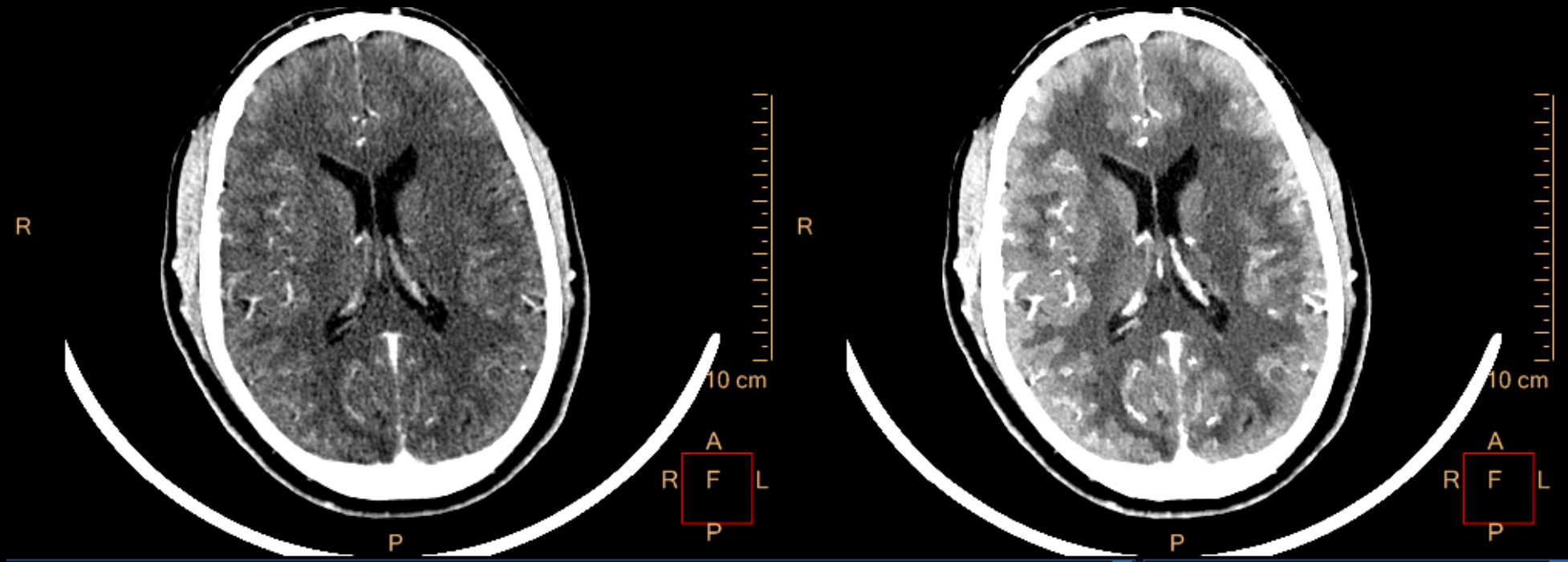


Conventional



MonoE 50 keV

**Confidence in visualization  
Improved grey-white matter differentiation**



**Conventional**

**MonoE 50 keV**



# Improved lumen delineation / reduction of Ca-blooming in complex mixed carotid plaque



MonoE 50keV

Conventional  
120 kVp

MonoE 100keV

Contrast enhancement

Calcium blooming  
reduction

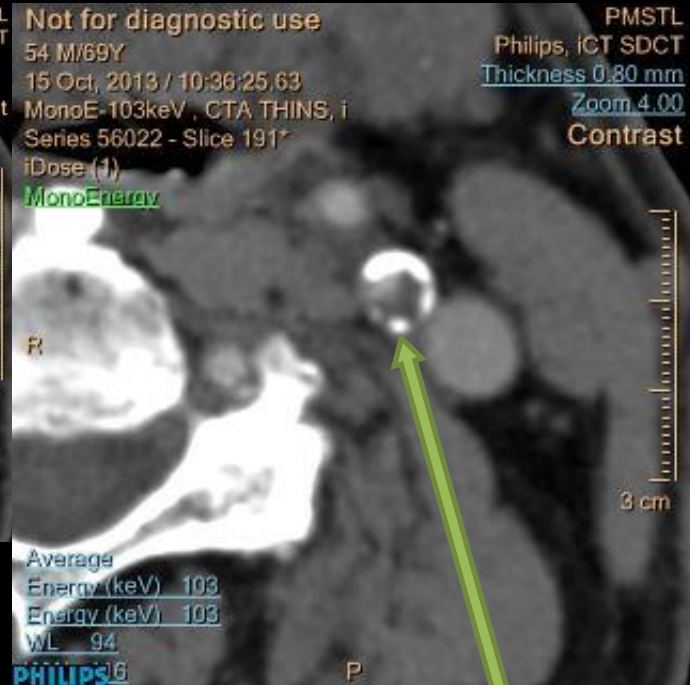
# Improved lumen delineation / reduction of Ca-blooming in complex mixed carotid plaque



MonoE 50keV



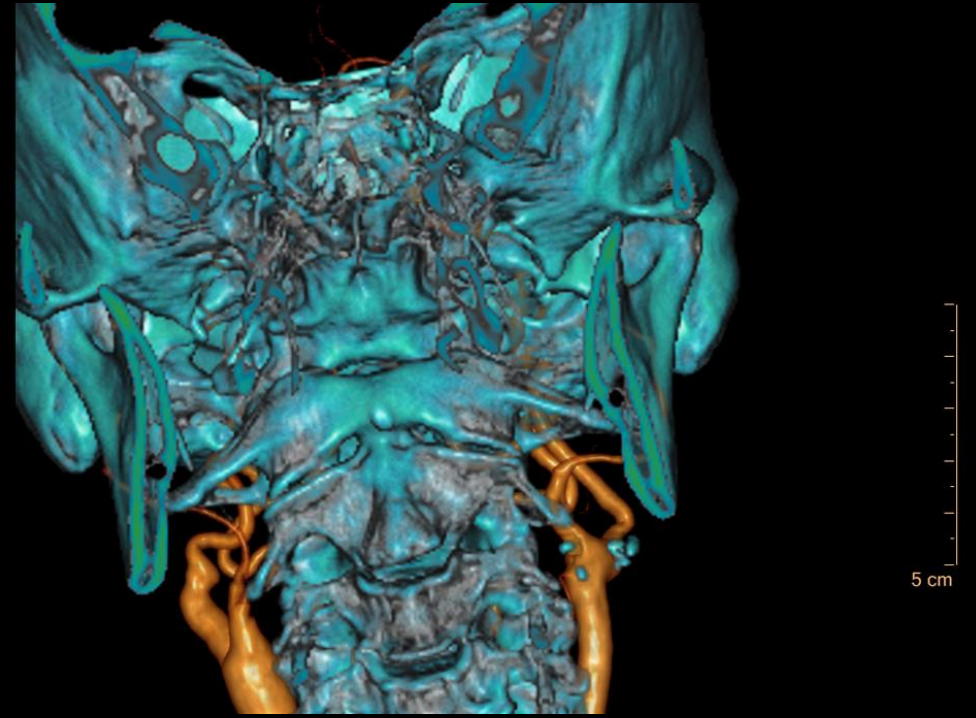
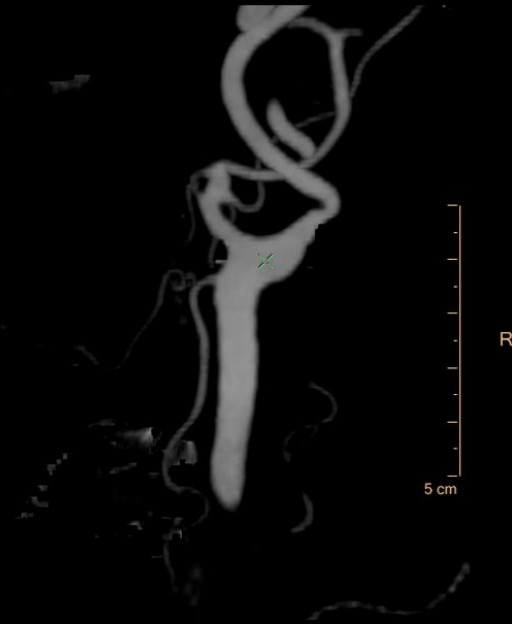
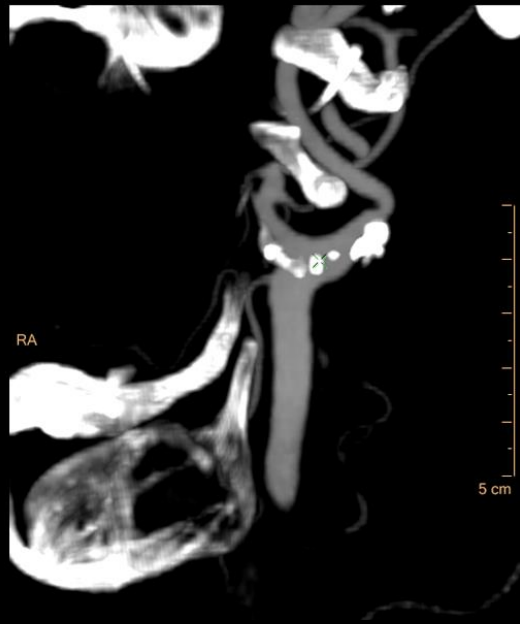
MonoE 75keV



**MonoE sequence**

Increased confidence in  
plaque assesment

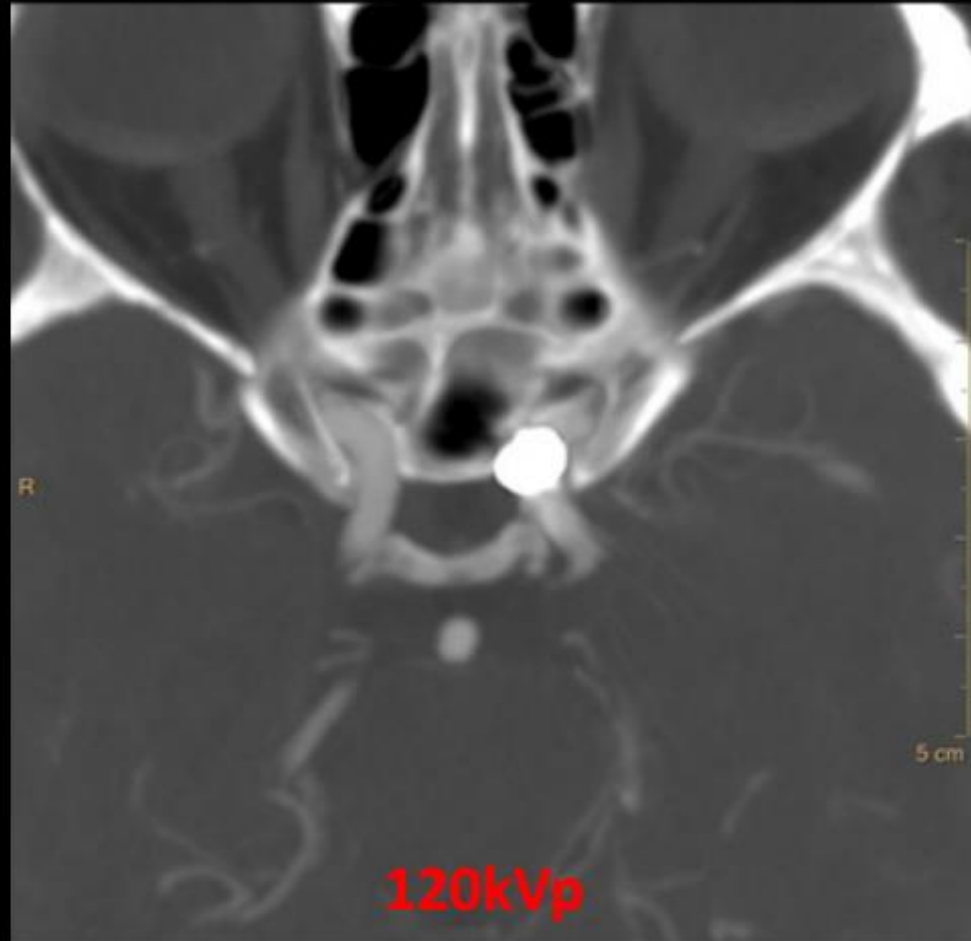
## Spectral results of carotid CTA with calcium in the left carotid



Material decomposition and Calcium subtraction

## Evaluation of vessels in the presence of embolization material

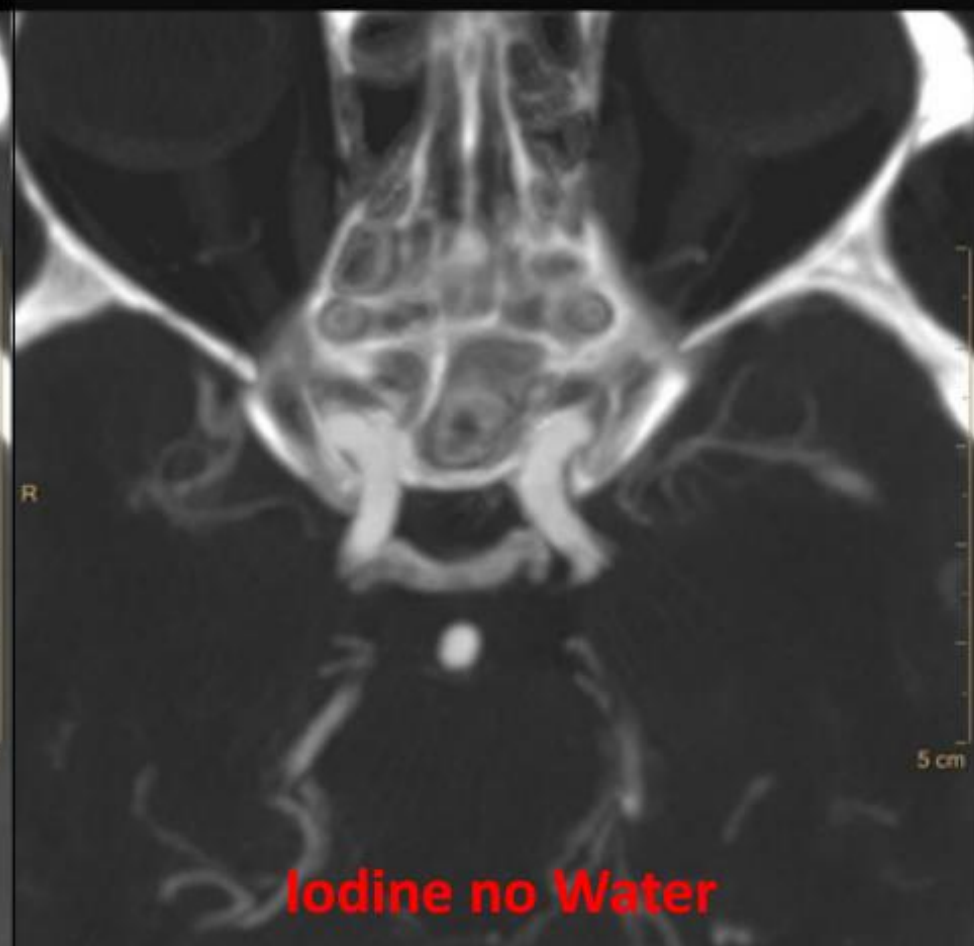
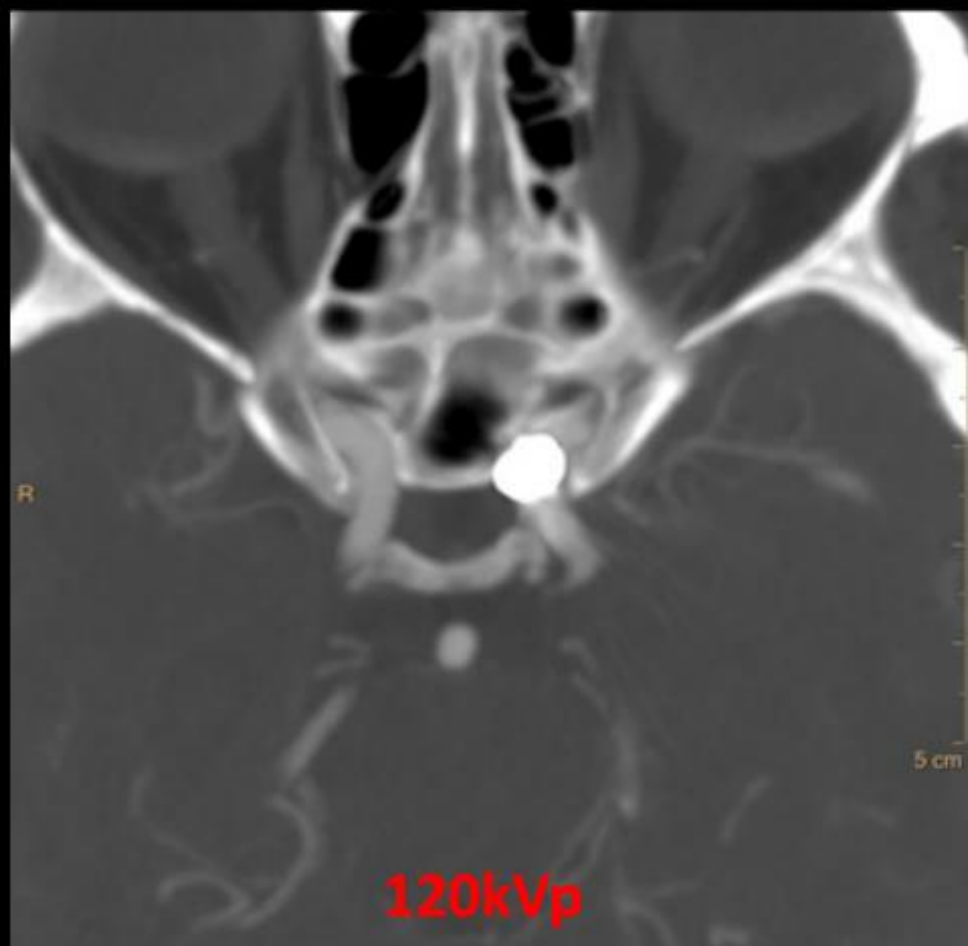
Conventional [HU]



## Evaluation of vessels in the presence of embolization material

□ Conventional [HU]

● Iodine no Water [mg/ml\*]







## Main benefits in neuro

- Plaque characterization
- Vessel delineation and calcium blooming reduction (all in one)
- Calcium removal
- Improved white-grey matter differentiation thanks to low keV images





IQon in cardiac

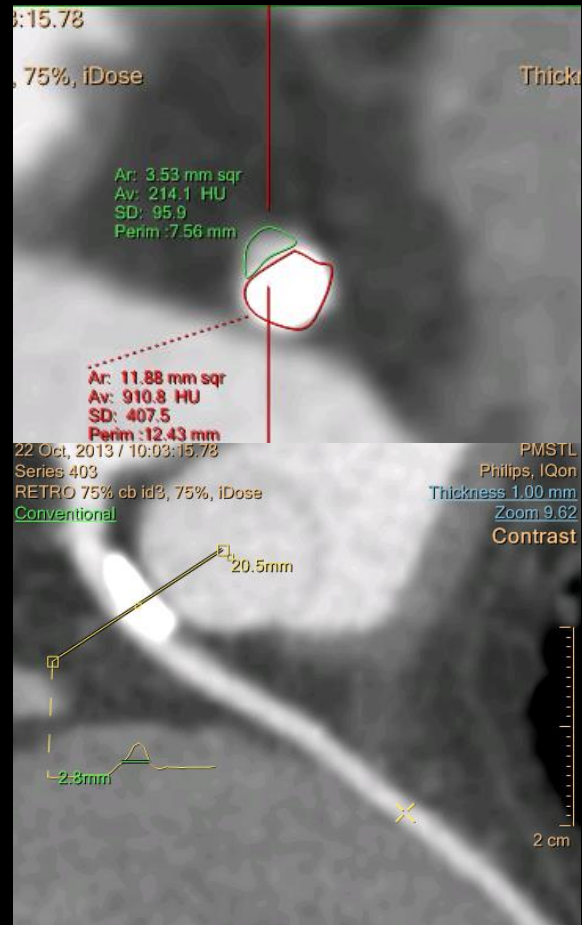


## Use in cardiac

- Plaque characterization
- Vessel delineation and calcium blooming reduction (all in one)
- Iodine concentration quantification
- Functional assessment of myocardium

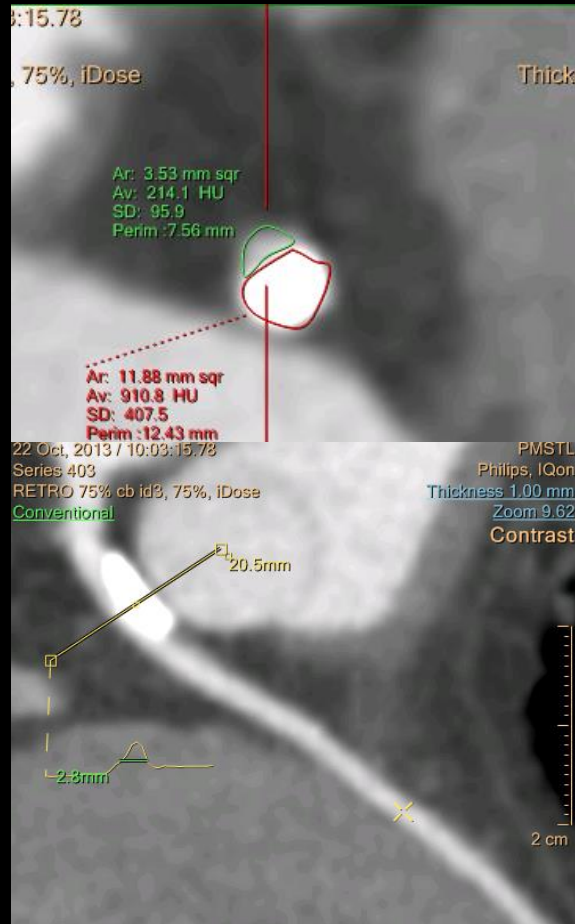
# Confidence in coronary stenosis assessment Reduced calcium blooming

120 kVp

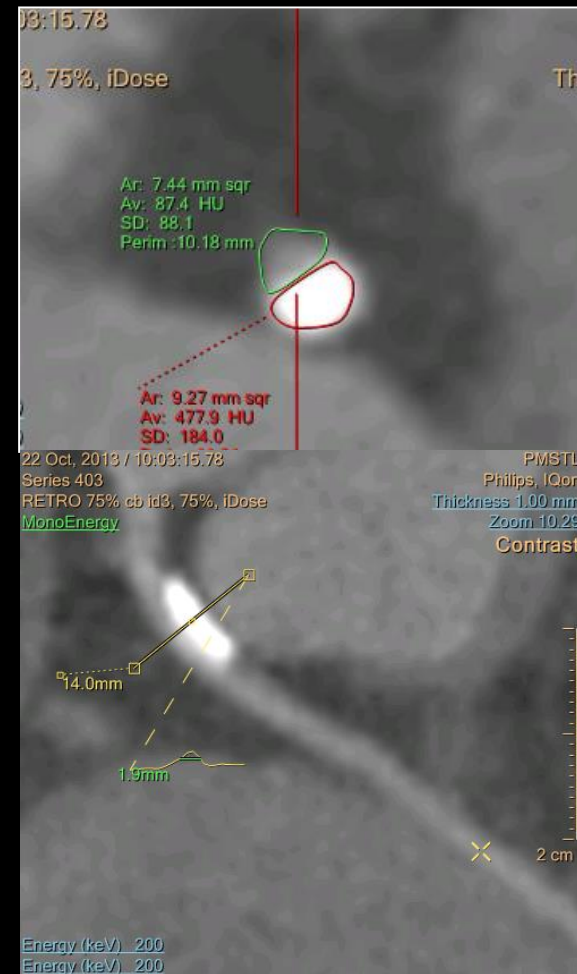


# Confidence in coronary stenosis assessment Reduced calcium blooming

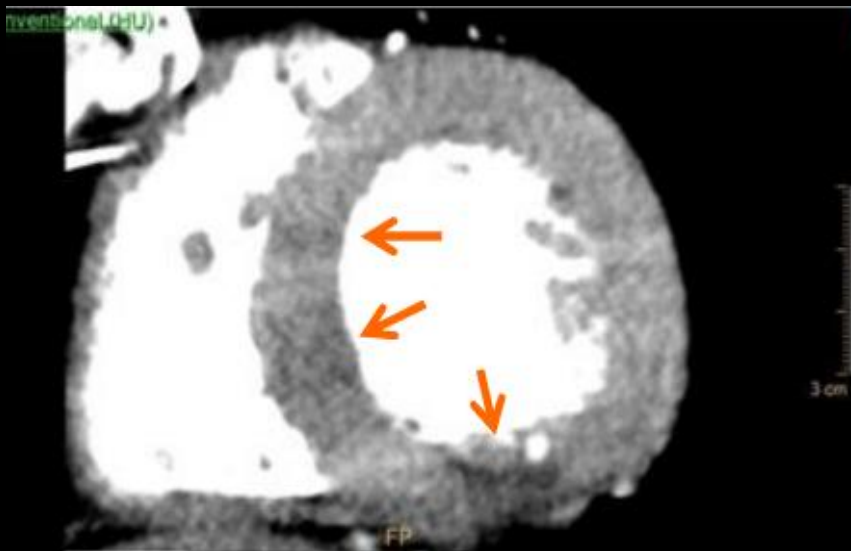
120 kVp



200 keV

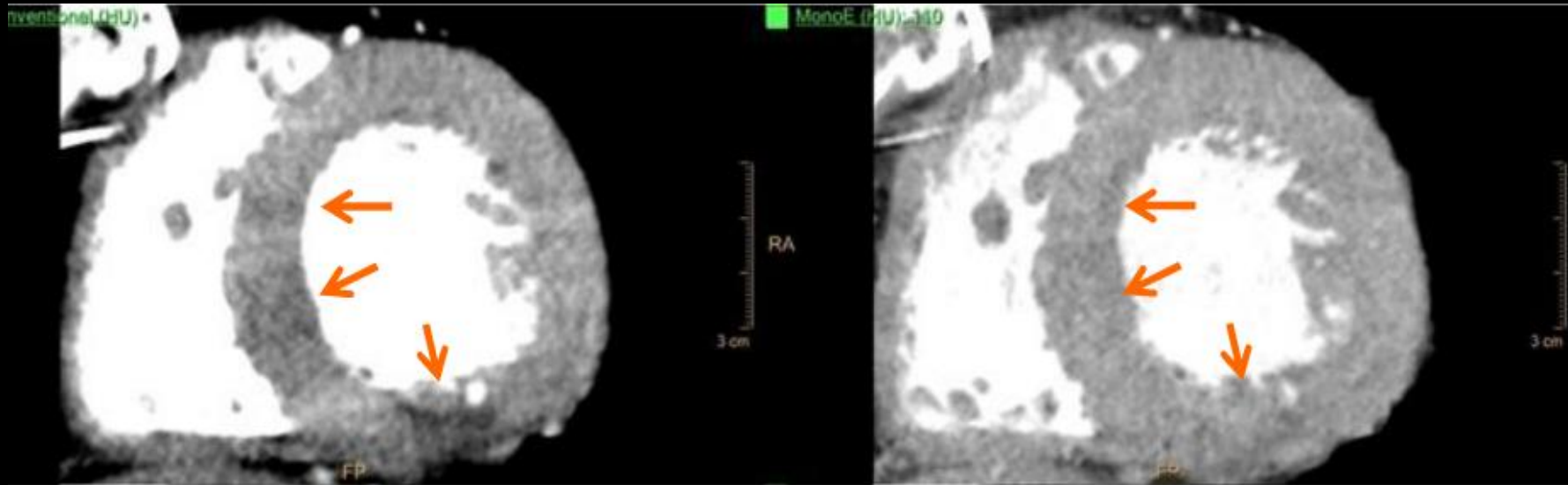


# Myocardium artifacts that mimic low perfusion regions



**Conventional 120kVp**

# Myocardium artifacts that mimic low perfusion regions

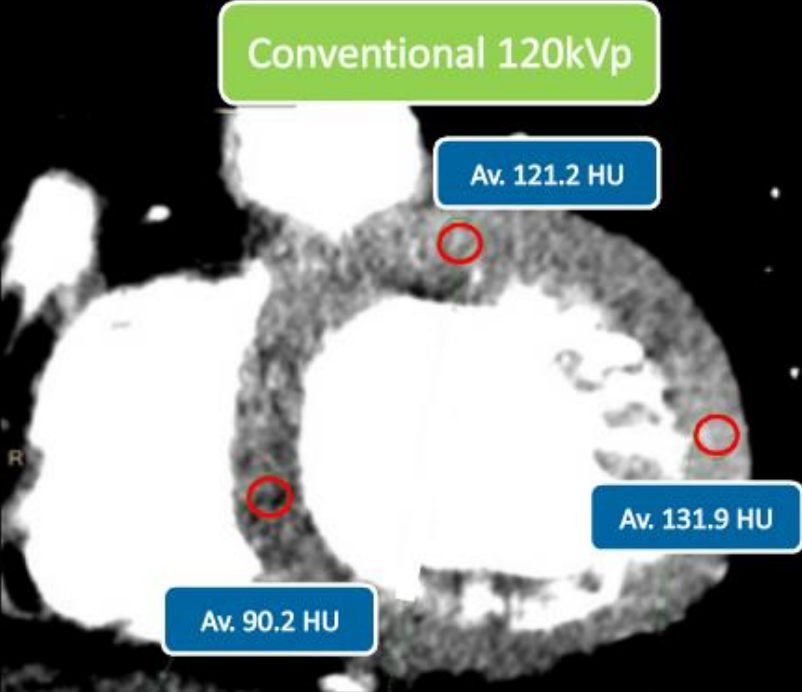


**Conventional 120kVp**

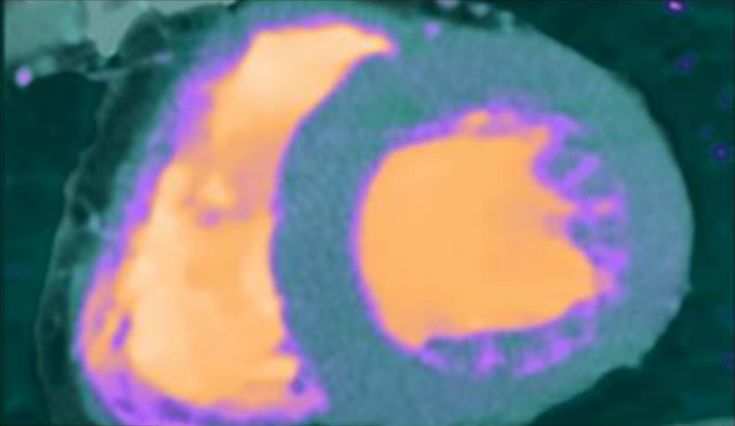
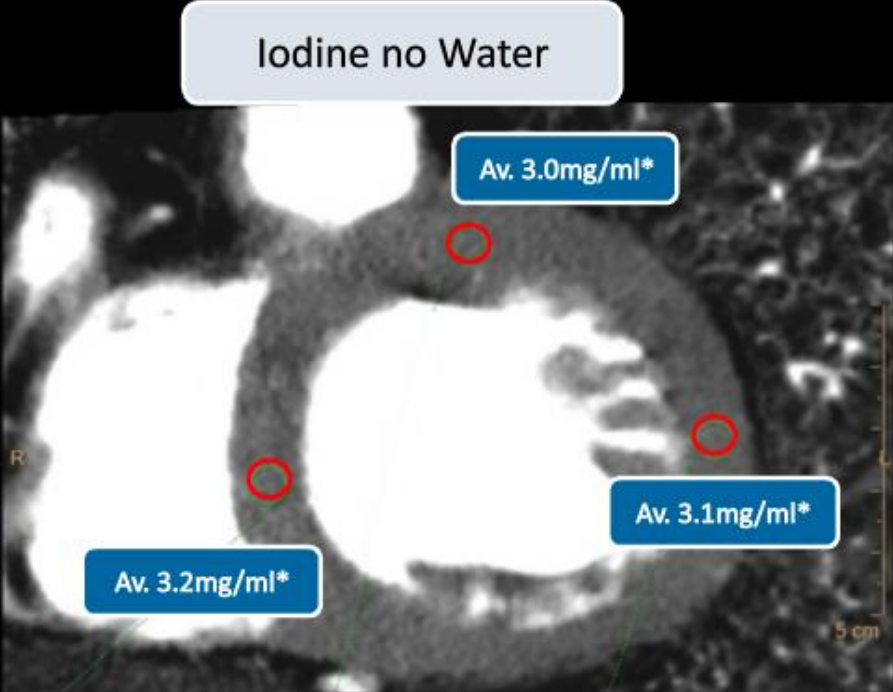
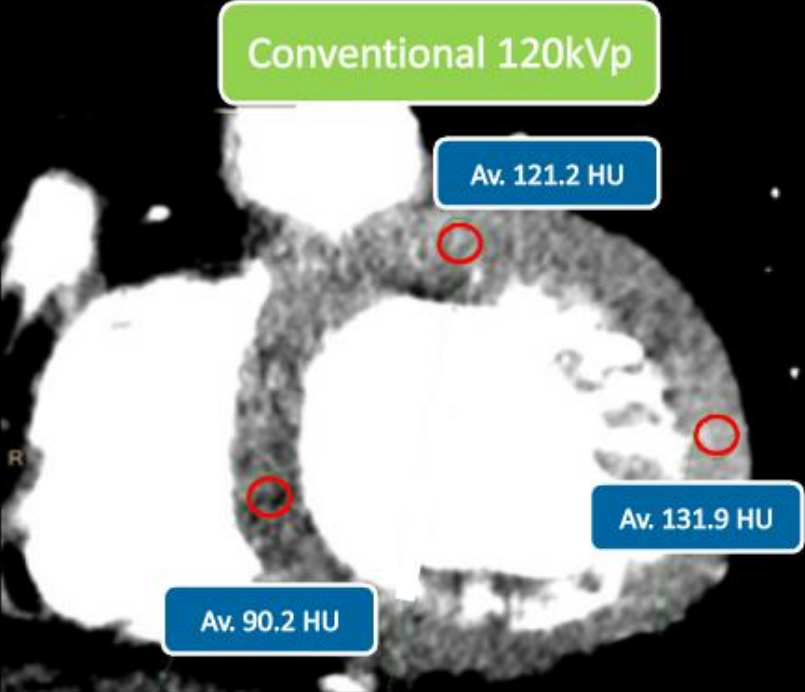
**MonoE 110keV**

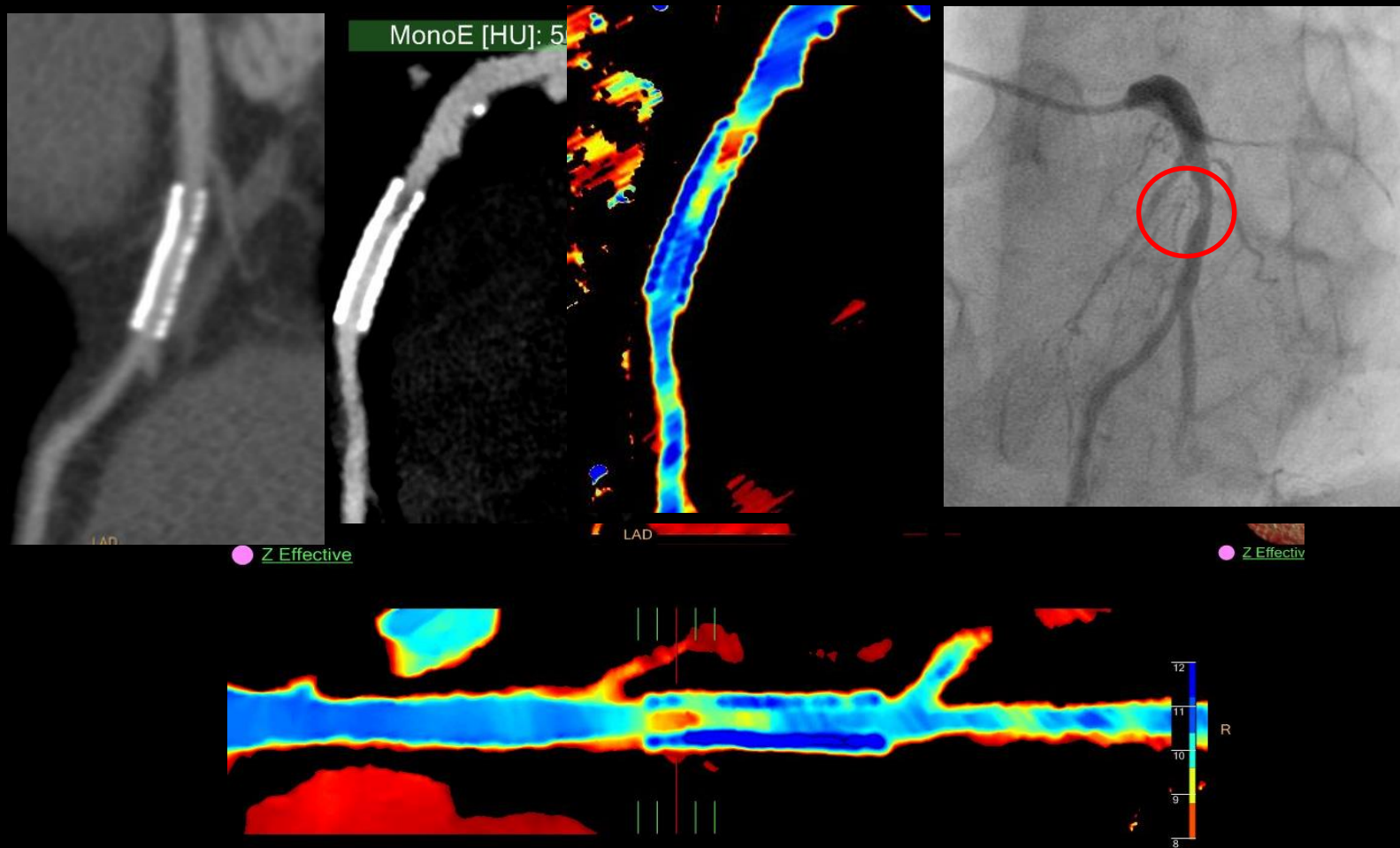


# Myocardium artifacts that mimic low perfusion regions



# Myocardium artifacts that mimic low perfusion regions





IQon Spectral CT retrospective gated cardiac CT

**Benefit**

Spectral based images were loaded into the Comprehensive Cardiac Application (CCA) allowing the physician to look at different spectral results and to evaluate the coronary artery segments .

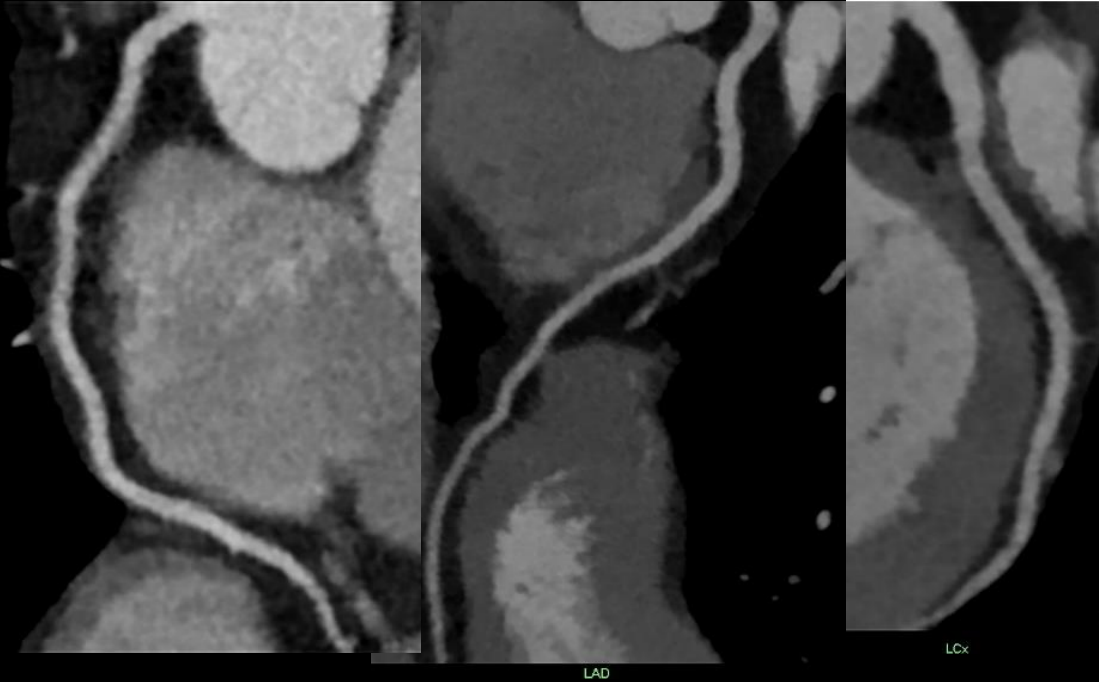
**Case Summary**

Curved multi-planar reformation (CMPR) images were generated for spectral results to evaluate the coronary stent in the proximal LAD. MonoE and Z effective reconstructions were used for evaluation. These results allowed the clinician to identify a blockage in the proximal stent graph which was confirmed with the angiography

C-MPR RCA

C-MPR LAD

C-MPR LCx



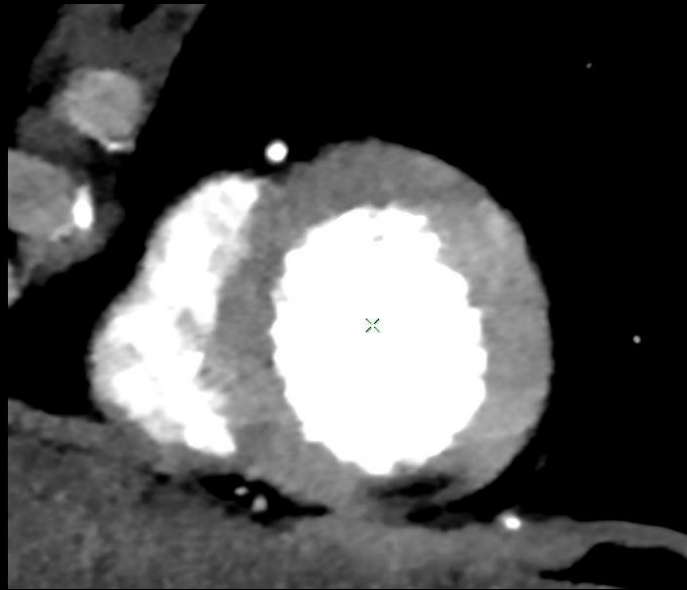
### **IQon Spectral CT cardiac**

#### **Benefit**

Gated spectral cardiac capabilities allowed the physician to review the spectral cardiac anatomy immediately post scan.

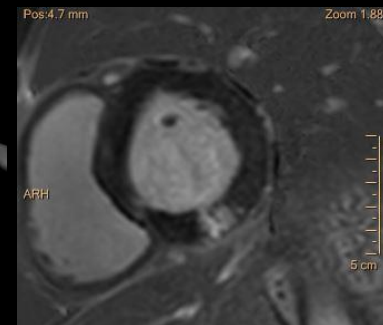
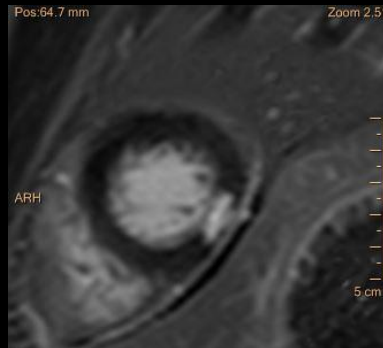
#### **Case Summary**

24 year old male admitted for atypical chest pain. The EKG showed a suspected inferior wall infarction and his troponins were elevated. Due to his young age myocarditis was clinically entertained as a suspected diagnosis. A gated cardiac CTA scan was performed on the IQon Spectral CT that showed normal coronary arteries, but a suspicious area that was questionable for an infarct was identified in the inferior wall of the myocardium.



monoE 55 keV  
Short Axis

## MRI



## IQon Spectral CT cardiac

### Benefit

Gated Spectral cardiac capabilities allowed the physician to review the spectral cardiac anatomy immediately post scan. The spectral Comprehensive Cardiac software allowed the ability to evaluate the short axis.

### Case Summary

24 year old male admitted for atypical chest pain. The EKG showed a suspected inferior wall infarction and his troponins were elevated. Due to his young age myocarditis was clinically entertained as a suspected diagnosis. A gated cardiac CTA scan was performed on the IQon Spectral CT that showed normal coronary arteries, but a suspicious area that was questionable for an infarct was identified in the inferior wall of the myocardium.



## Main benefits in cardiac

- Plaque characterization
- Vessel delineation and calcium blooming reduciotn (all in one)
- Iodine concentration quantification
- Functional assessment of myocardium



