

Joint Hardware and Patient Attenuation Correction for Hybrid PET/MR Imaging

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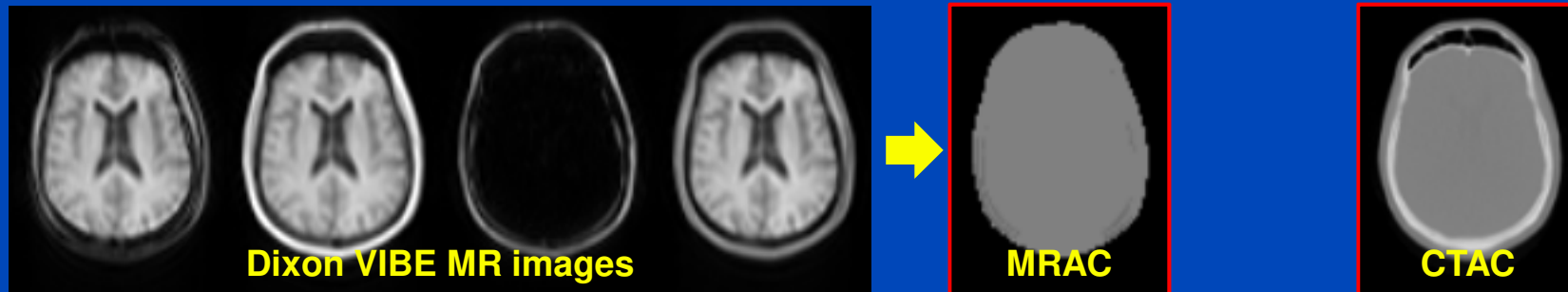
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DEUTSCHES
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IN DER HELMHOLTZ-GEMEINSCHAFT

Aim

- Current PET/MR status



- Aim: To improve patient AC for non-TOF PET/MR.

- Algorithms (all based on MLAA¹)

- MR-MLAA Emission-based patient AC for PET/MR
- xMLAA Emission-based hardware AC for PET/MR
- **xMR-MLAA** Combination of MR-MLAA and xMLAA



Biograph
mMR
(non TOF)

¹ J. Nuyts, P. Dupont, S. Stroobants, R. Benninck, L. Mortelmans, and P. Suetens, "Simultaneous maximum a posteriori reconstruction of attenuation and activity distributions from emission sinograms.," IEEE Trans. Med. Imaging 18(5):393–403, 1999.

MR-MLAA

- **Joint estimation of attenuation and activity**
 - Using PET emission data
 - Incorporating MR-based prior information
- **Iterative approach**
 - Update attenuation and activity in an alternating manner

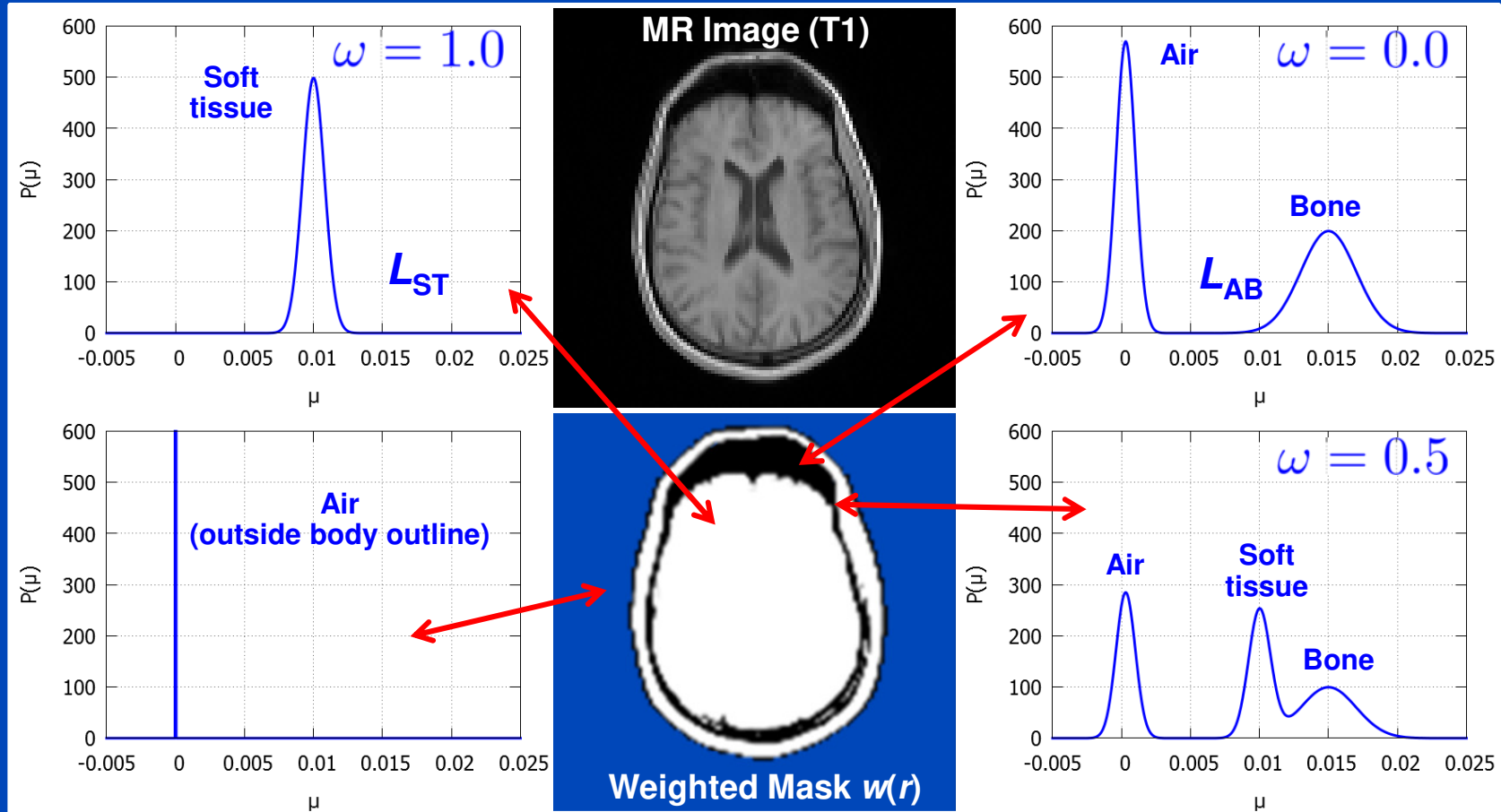
- **Objective function**

$$Q(\lambda, \mu) = \underbrace{L(\lambda, \mu)}_{\text{Log-likelihood}} + \underbrace{L_S(\mu) + L_I(\mu)}_{\text{Prior terms}}$$

λ = activity
 μ = attenuation

- **Intensity prior L_I**
 - Voxel-dependent probability distribution of attenuation values
 - Derived from diagnostic T_1 -weighted MR images

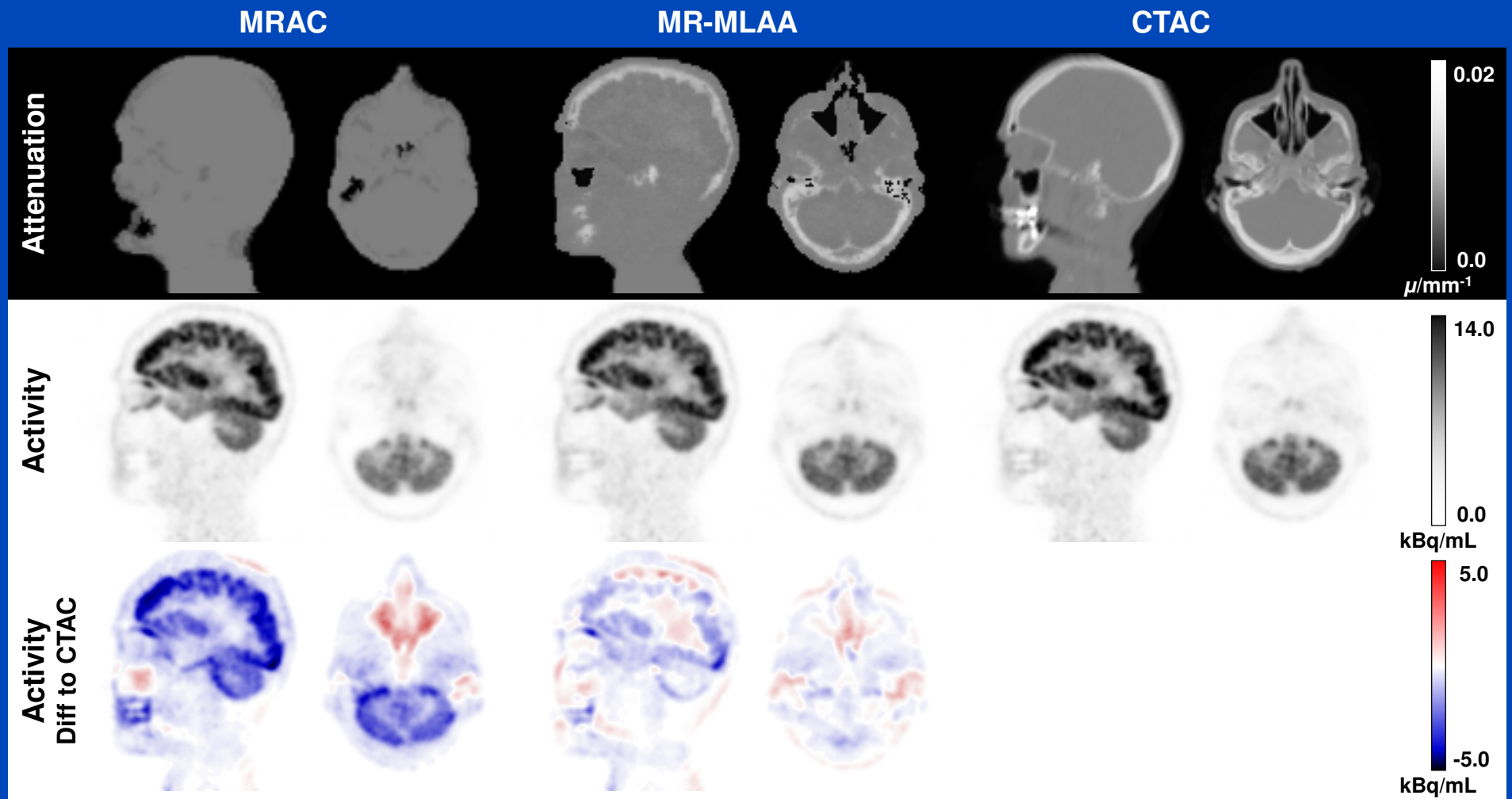
MR-MLAA's Intensity Prior



$$L_I(\mu) = \omega(r)\beta_{ST}L_{ST}(\mu) + (1 - \omega(r))\beta_{AB}L_{AB}(\mu)$$

We use $\beta_{ST} = 0.1$ and $\beta_{AB} = 0.6$ throughout this presentation.

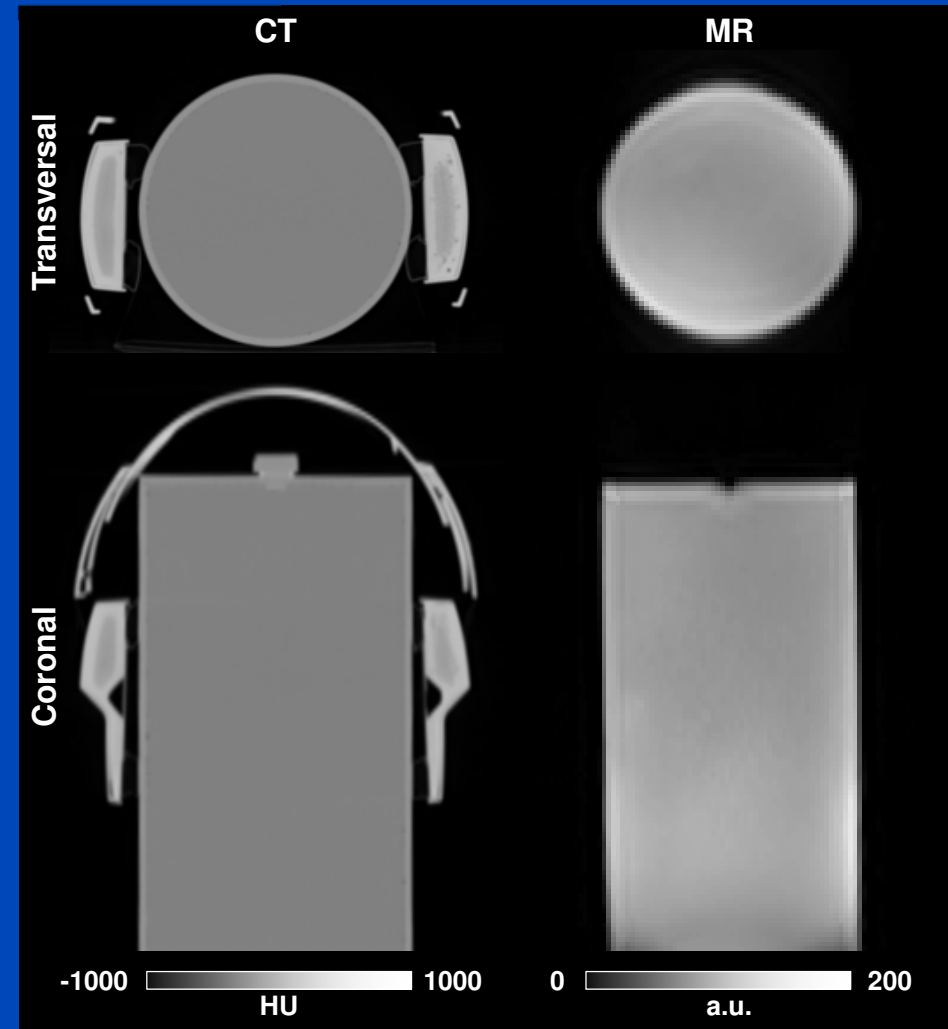
MR-MLAA Patient Example



T. Heußer, C.M. Rank, M.T. Freitag, A. Dimitrakopoulou-Strauss, H.-P. Schlemmer, T. Beyer, and M. Kachelrieß, "MR-Consistent Simultaneous Reconstruction of Attenuation and Activity for non-TOF PET/MR," *IEEE Trans. Nucl. Sci.* 63(5):2443-2451, 2016.

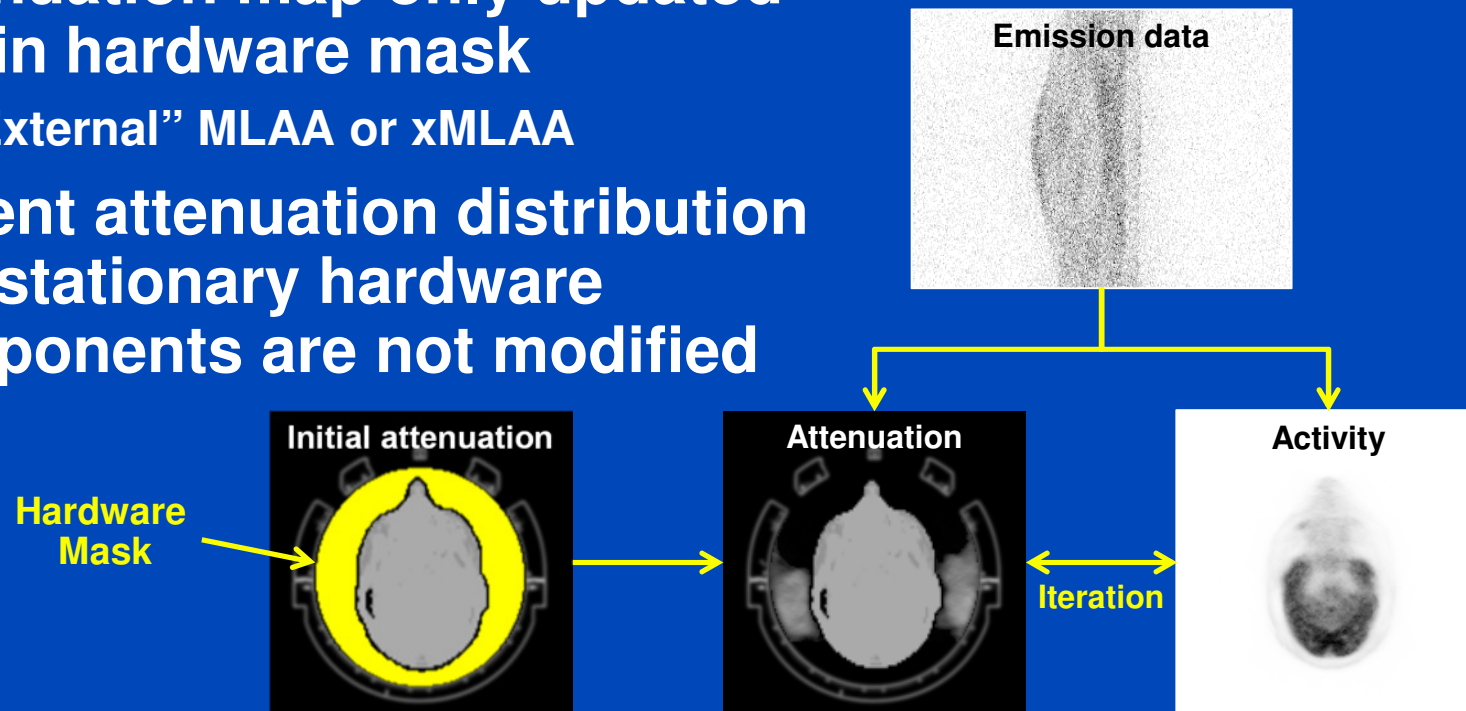
xMLAA

- Flexible hardware components are currently neglected in MR-based AC
 - MR-safe headphones
 - Radiofrequency torso surface coils
 - Positioning aids
 - ...
- Aim
 - Estimate attenuation of flexible hardware components from the PET emission data

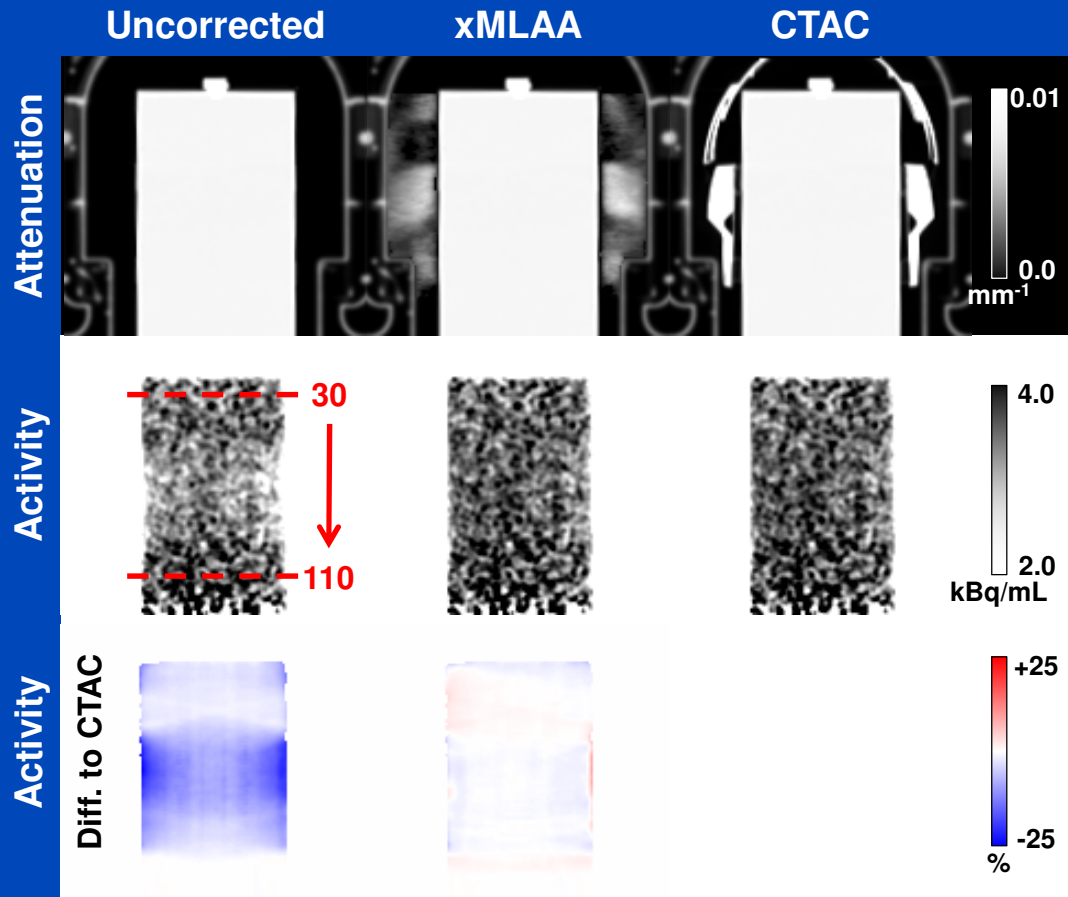


xMLAA

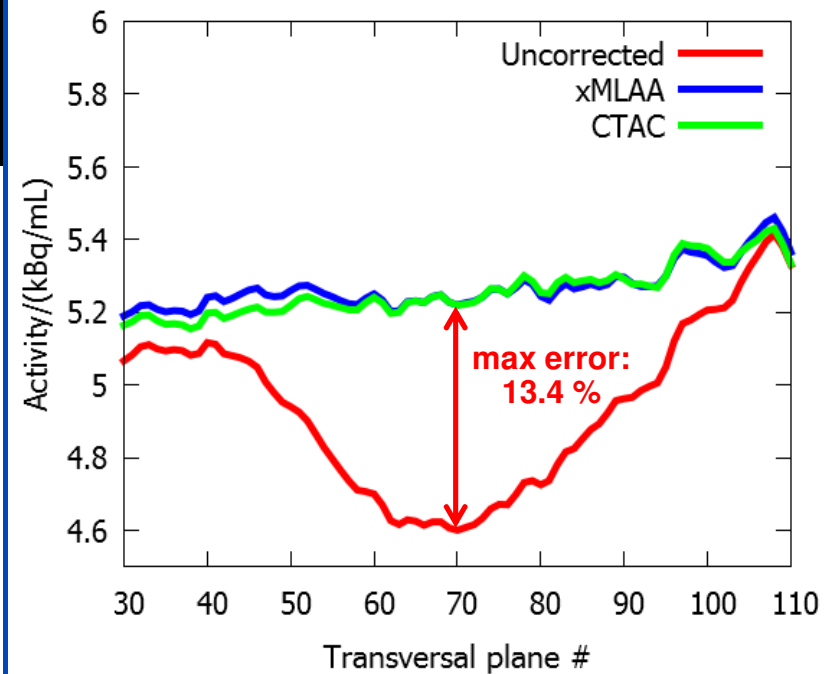
- **Joint estimation of attenuation and activity**
 - Based on the MLAA algorithm
- **Attenuation map only updated within hardware mask**
 - “External” MLAA or xMLAA
- **Patient attenuation distribution and stationary hardware components are not modified**



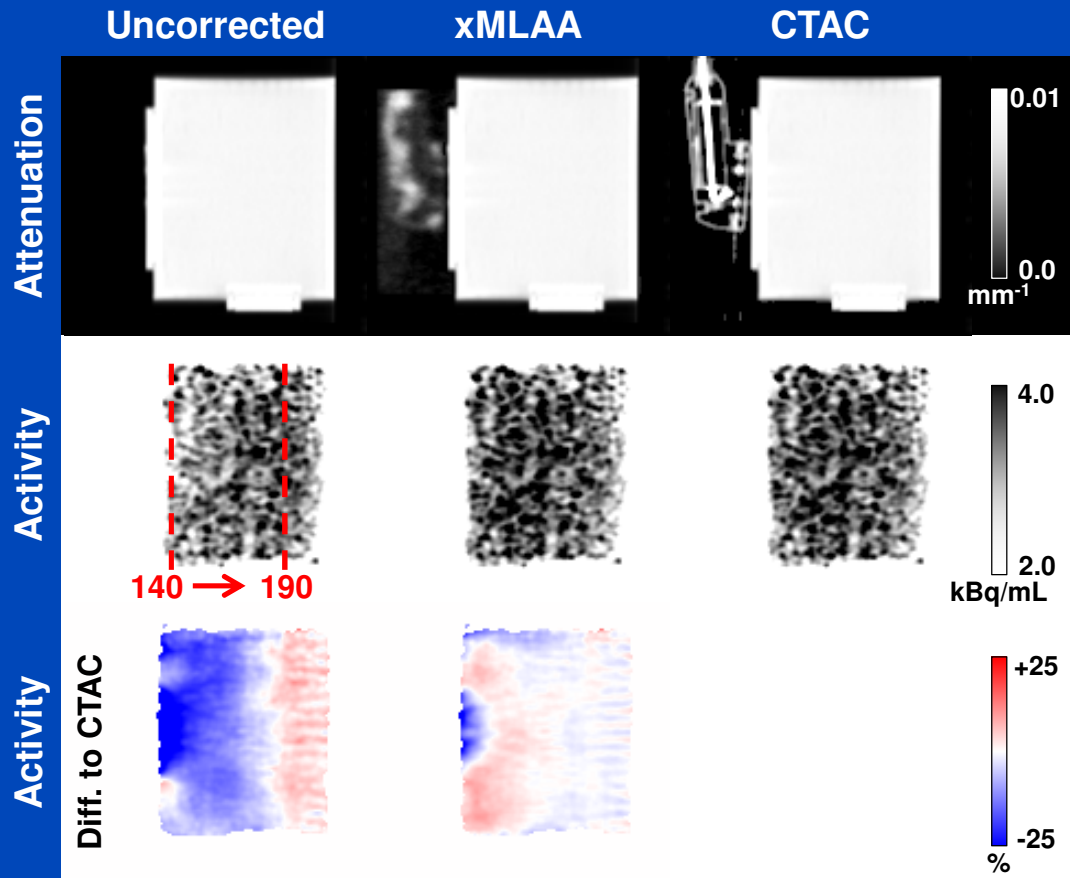
xMLAA with Headphones



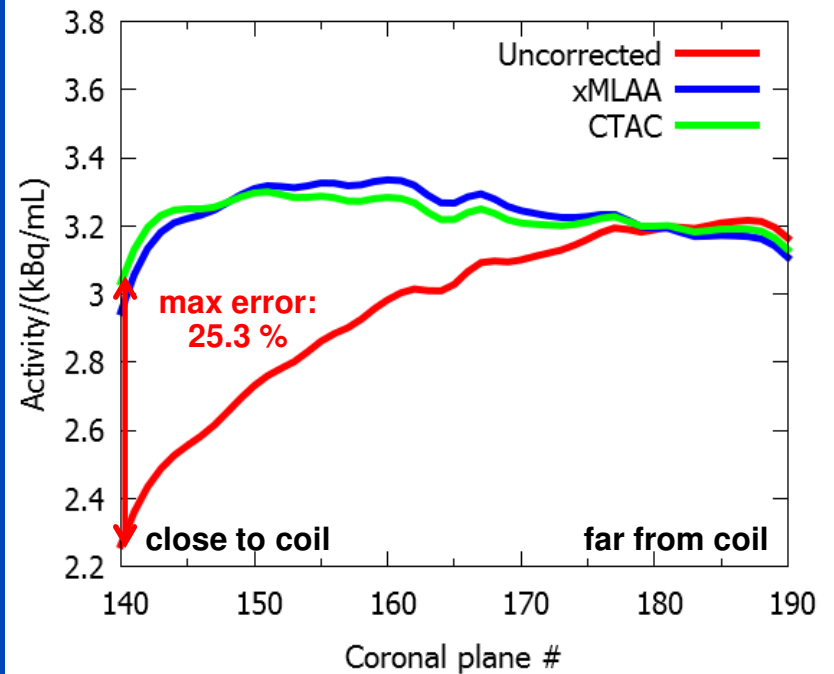
Average Activity in Transversal Planes



xMLAA with Torso Coil

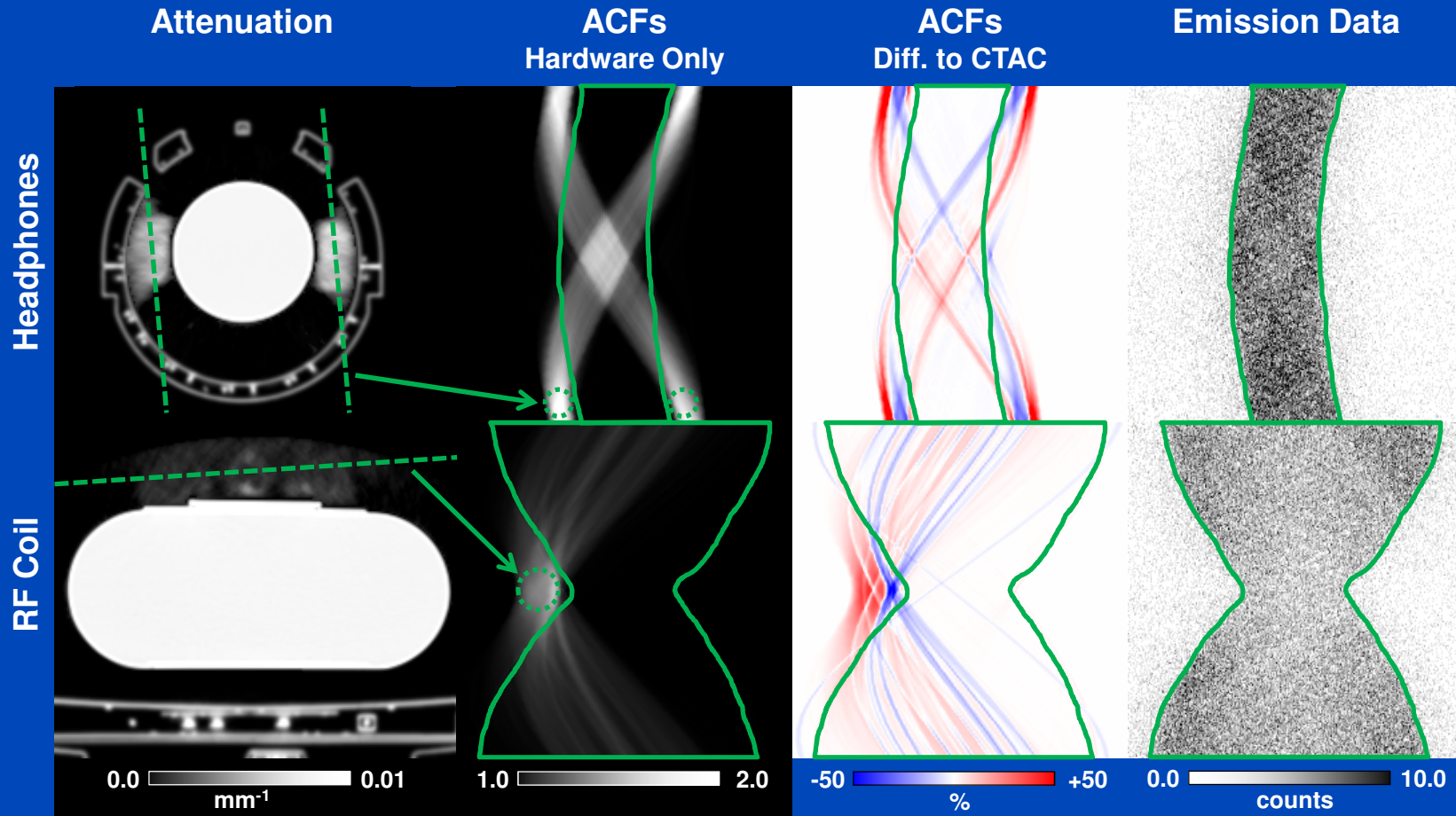


Average Activity in Coronal Planes



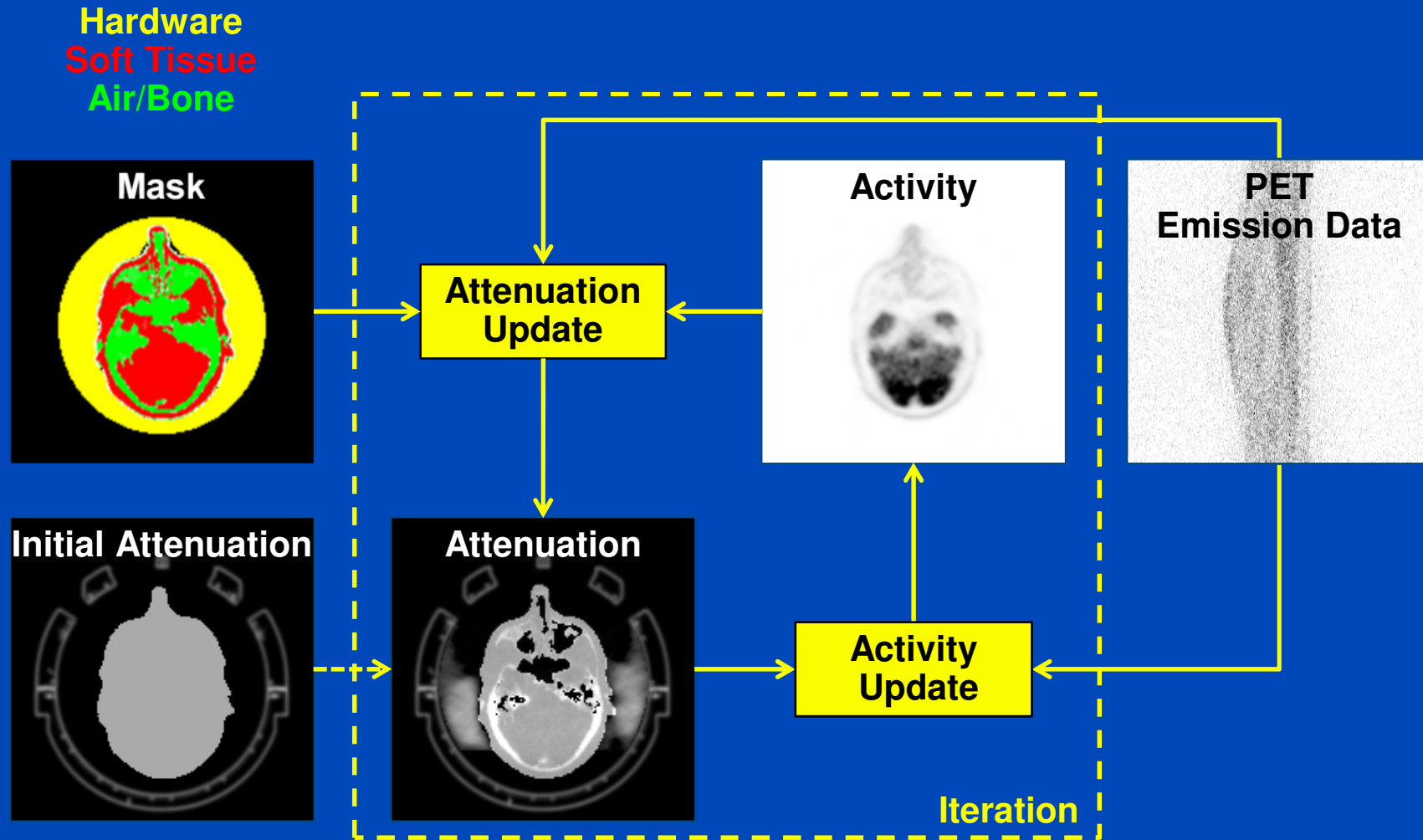
xMLAA

Attenuation Correction Factors



xMR-MLAA

Combination of MR-MLAA and xMLAA



xMR-MLAA Algorithm

- Hardware and patient attenuation are updated sequentially
- Hardware update
 - xMLAA
 - 2 iterations, 21 subsets
- Patient update
 - MR-MLAA
 - 3 iterations, 21 subsets
- Intensity prior



Hardware
Soft Tissue
Air/Bone

$$L_I(\mu) = \omega_x(\mathbf{r})\beta_x L_x(\mu) + (1 - \omega_x(\mathbf{r}))L_{MR}(\mu)$$

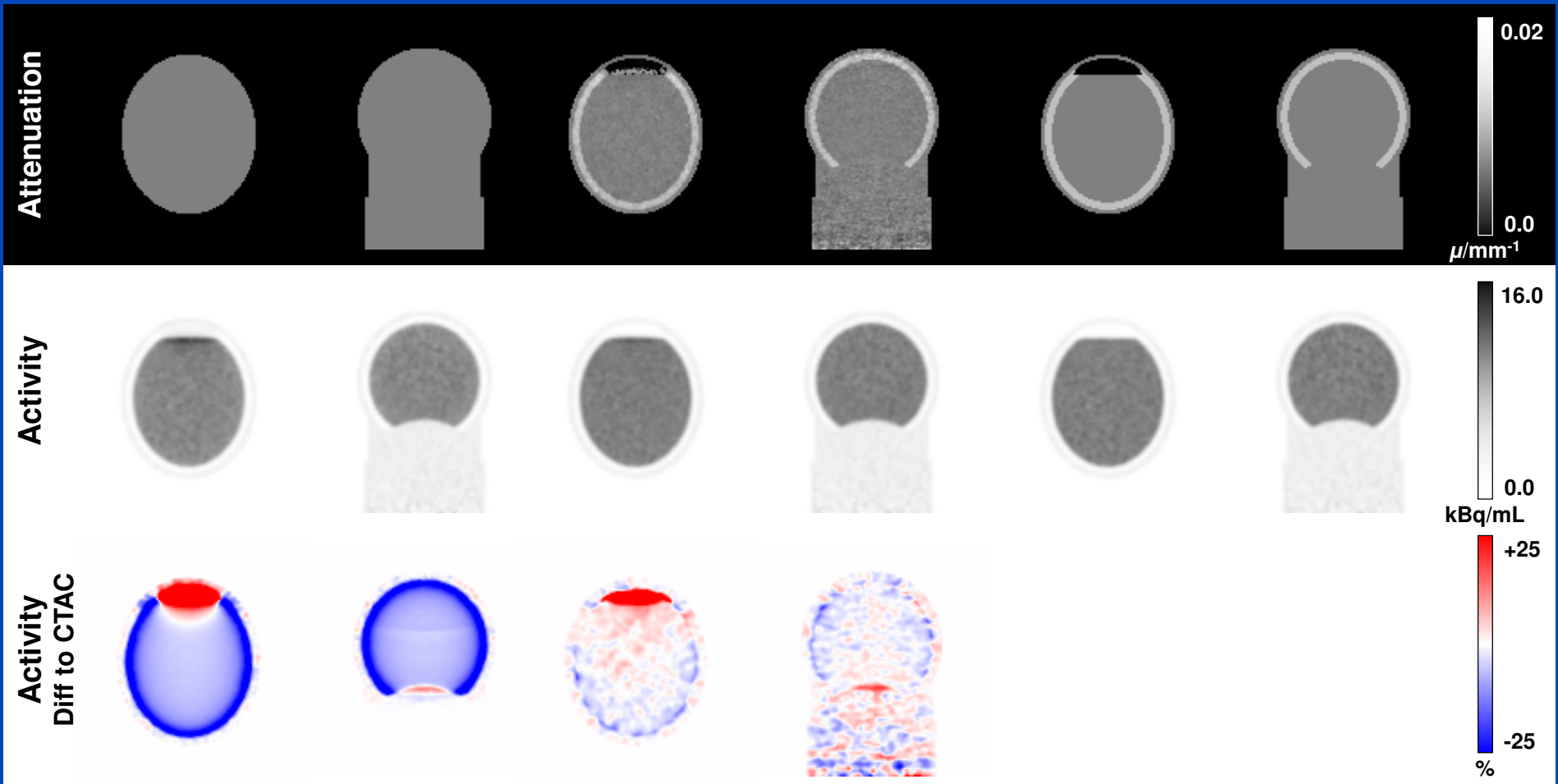
$$L_{MR}(\mu) = \omega(\mathbf{r})\beta_{ST} L_{ST}(\mu) + (1 - \omega(\mathbf{r}))\beta_{AB} L_{AB}(\mu)$$

Simulation without Hardware

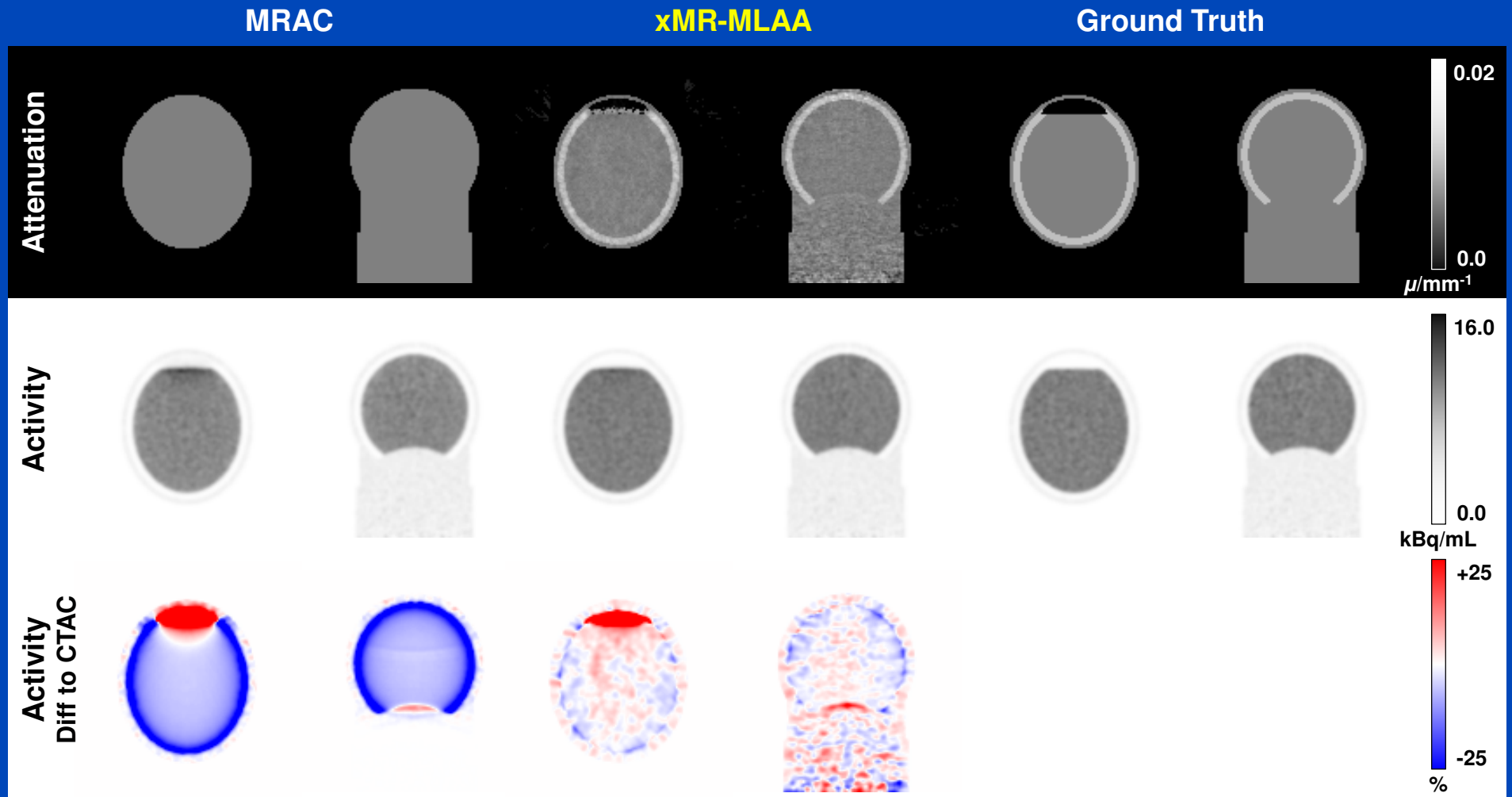
MRAC

MR-MLAA

Ground Truth



Simulation without Hardware

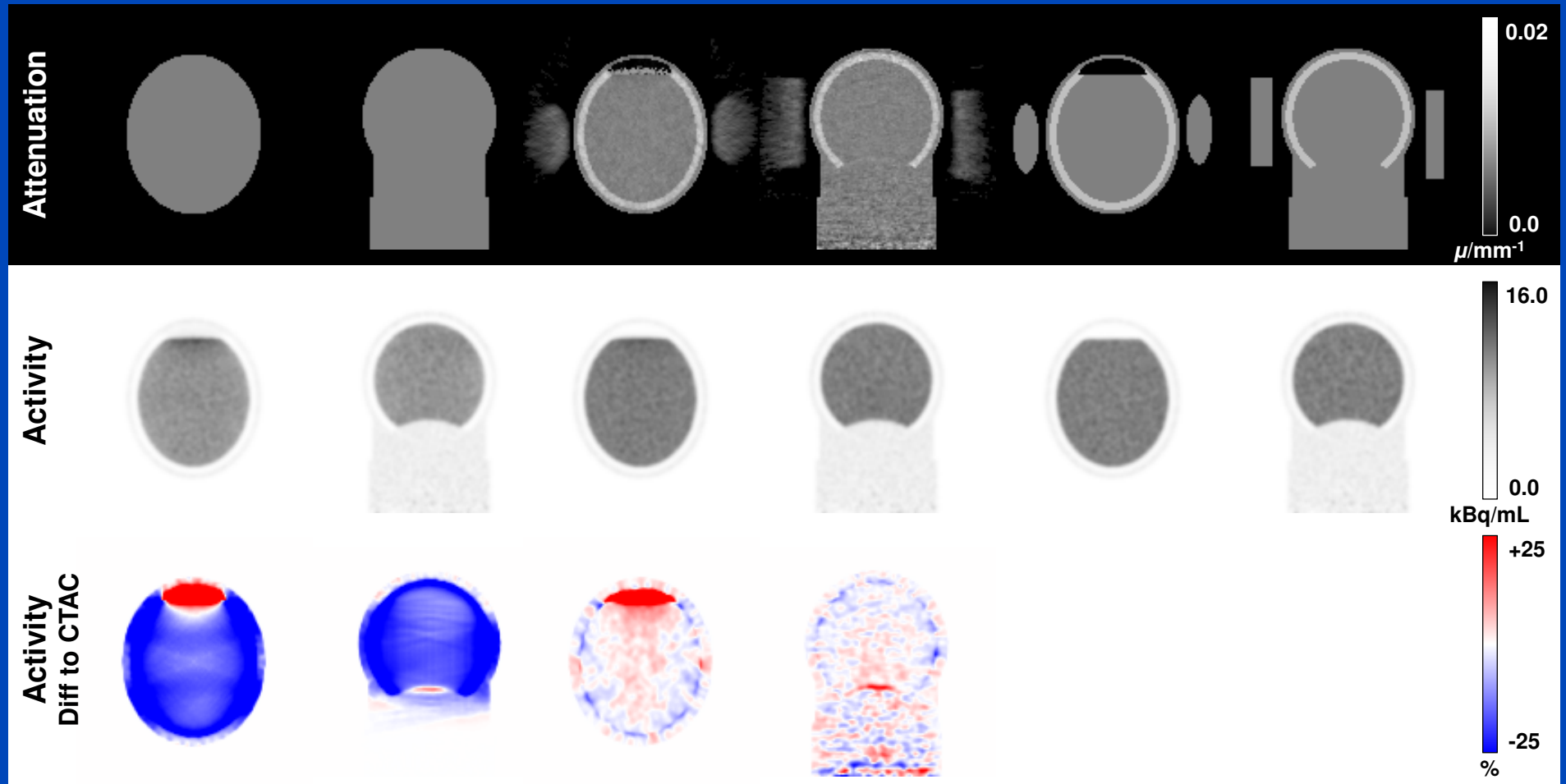


Simulation with Hardware

MRAC

xMR-MLAA

Ground Truth

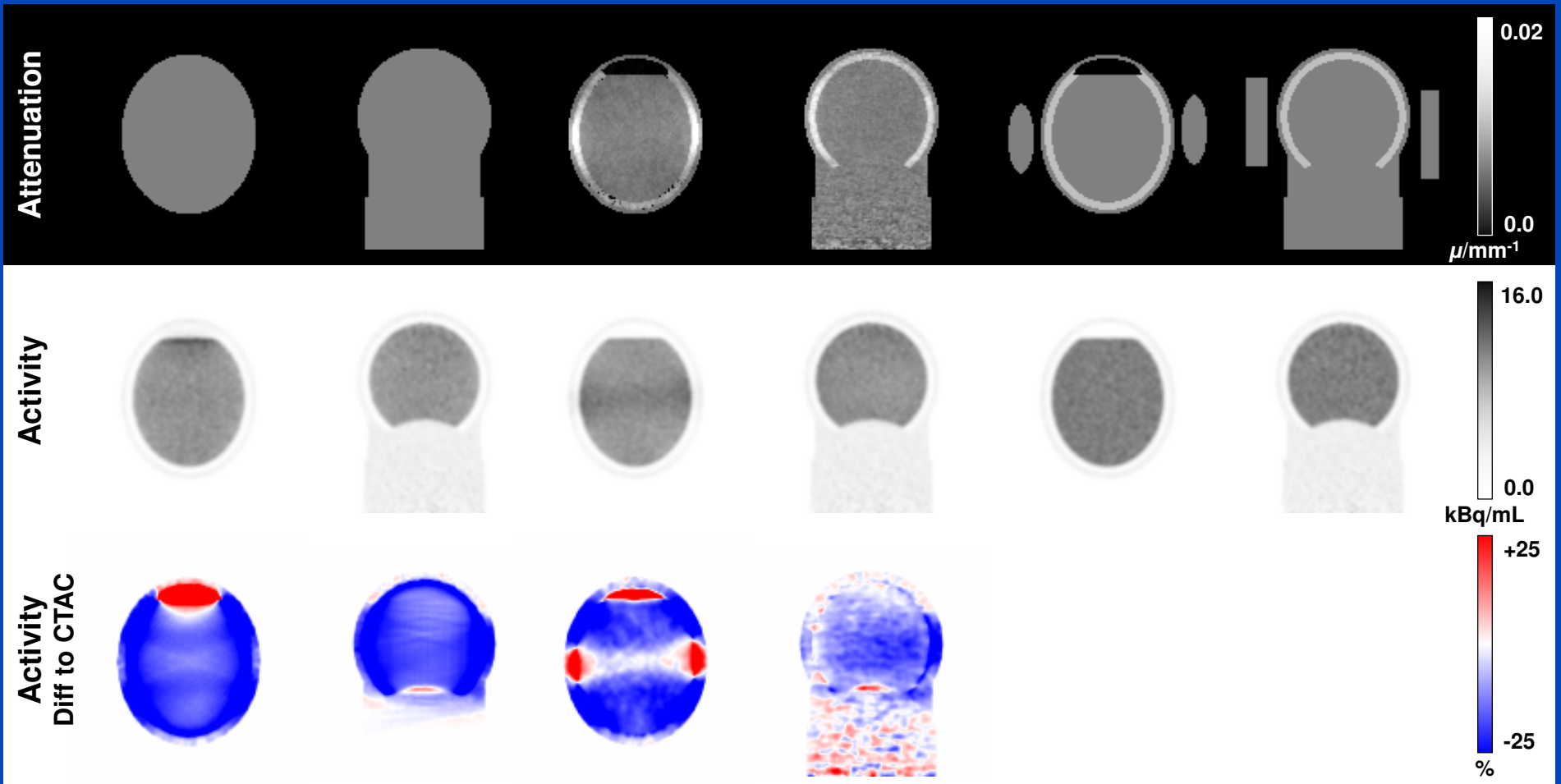


Simulation with Hardware

MRAC

MR-MLAA

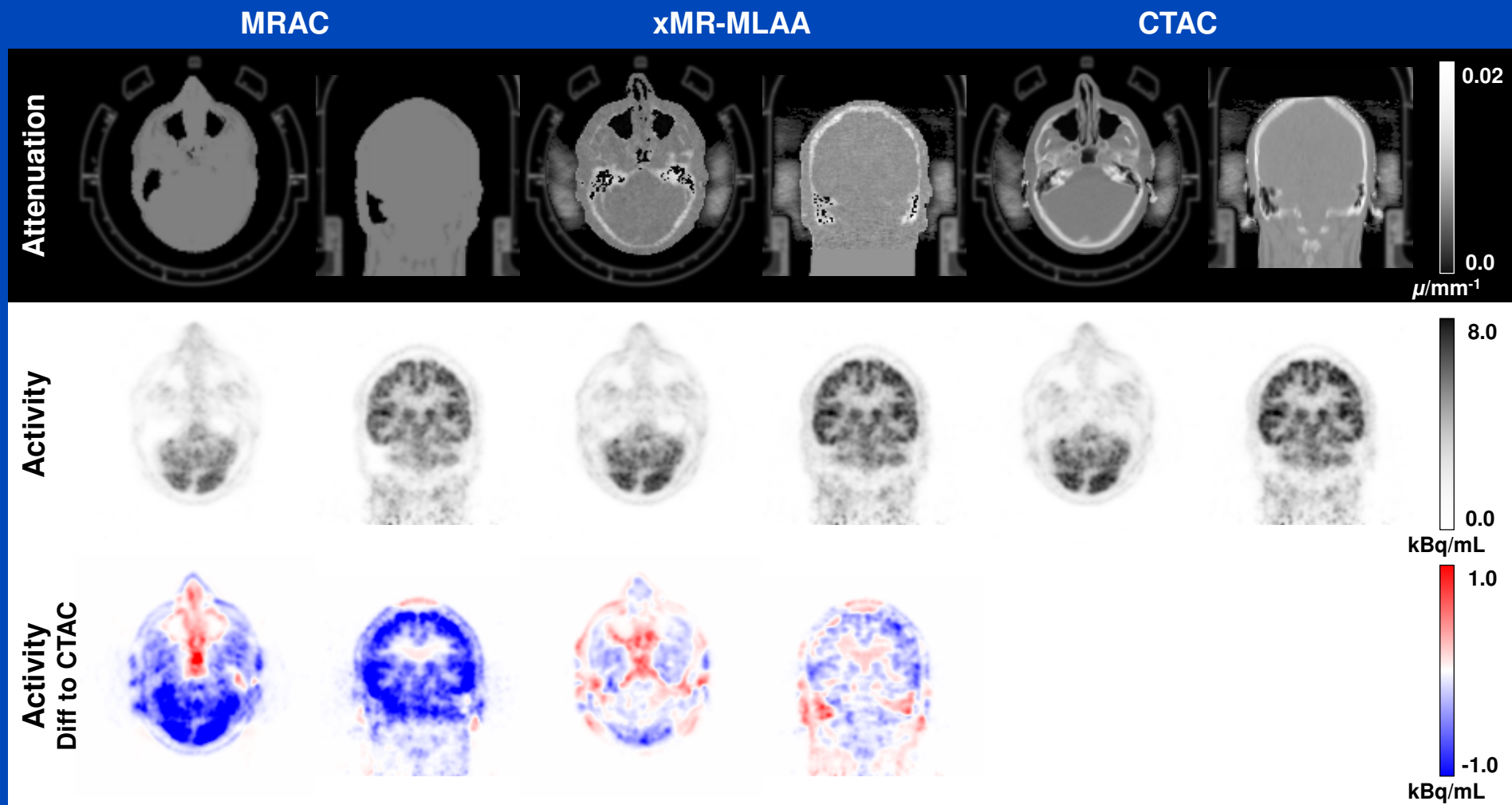
Ground Truth



xMR-MLAA Patient Study

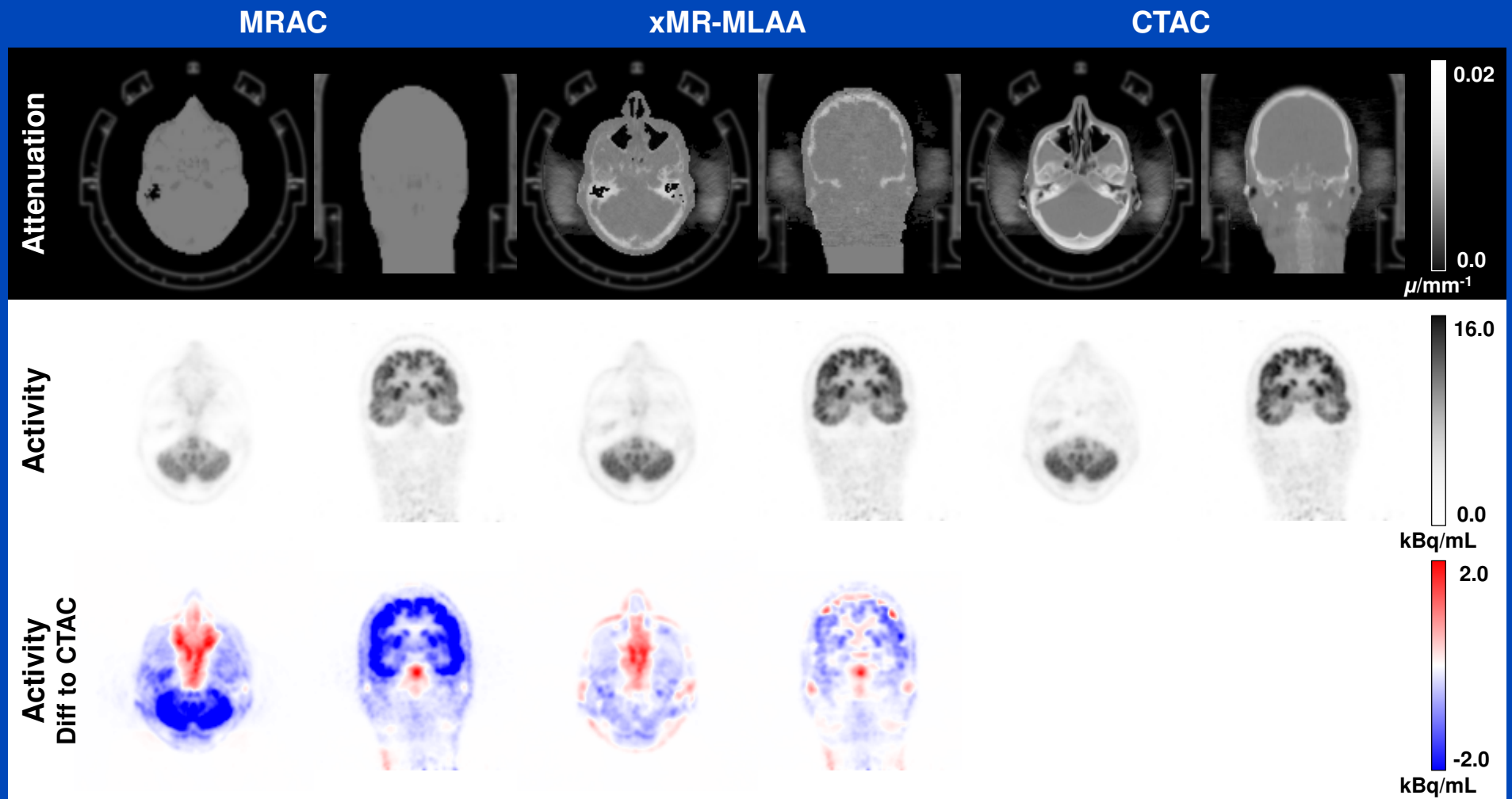
- Clinical non-TOF ^{18}F -FDG-PET/MR data of the head region acquired with a Siemens Biograph mMR
- Attenuation correction
 - MRAC: standard MR-based AC
 - xMR-MLAA: proposed method
 - CTAC: CT-derived AC
- Perform OSEM reconstructions using
 - 3 iterations
 - 21 subsets
 - Gaussian post-smoothing ($\sigma = 2.0$ mm)
- Limitation
 - MR hardware components are not present in the CT-based attenuation maps.
 - Therefore, we added the xMLAA-based hardware estimates to the CT-based attenuation maps.

xMR-MLAA Patient Example 1



Deviations in region of paranasal sinuses due to MR misclassification, not due to xMR-MLAA.

xMR-MLAA Patient Example 2



Deviations in region of paranasal sinuses due to MR misclassification, not due to xMR-MLAA.

Conclusions on xMR-MLAA

- Jointly estimates hardware and patient attenuation from the non-TOF PET/MR data.
- Has the potential to reduce the activity underestimation from around 15% to below 5%.
- Outlook: Including TOF information should yield even better performance.

- Job opportunities through DKFZ's international PhD or Postdoctoral Fellowship programs (www.dkfz.de), or directly through marc.kachelriess@dkfz.de.
- This work was supported by the Helmholtz International Graduate School for Cancer Research, Heidelberg, Germany. Parts of the reconstruction software were provided by RayConStruct® GmbH, Nürnberg, Germany.
 - This presentation will soon be available at www.dkfz.de/ct.



Thank You!