

# Stack Transition Motion Compensation in Sequential and in Cardiac CT

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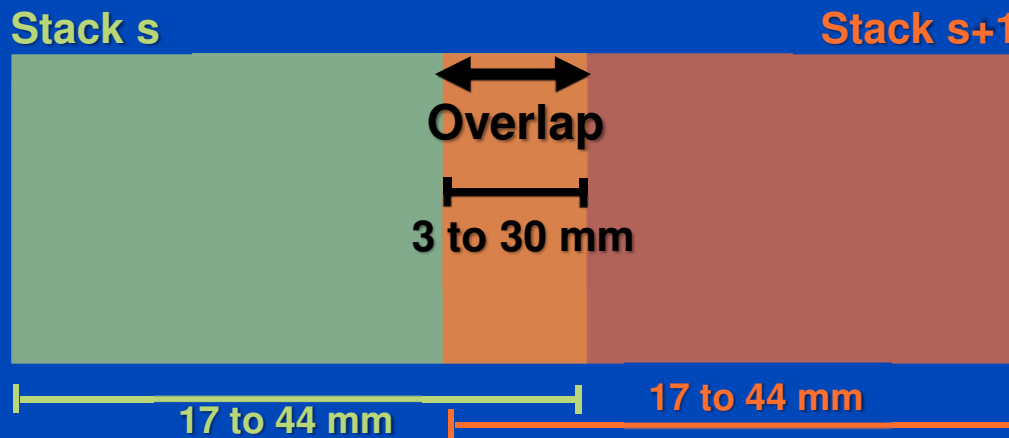
**SIEMENS**

**dkfz.**

DEUTSCHES  
KREBSFORSCHUNGSZENTRUM  
IN DER HELMHOLTZ-GEMEINSCHAFT

# Cardiac CT

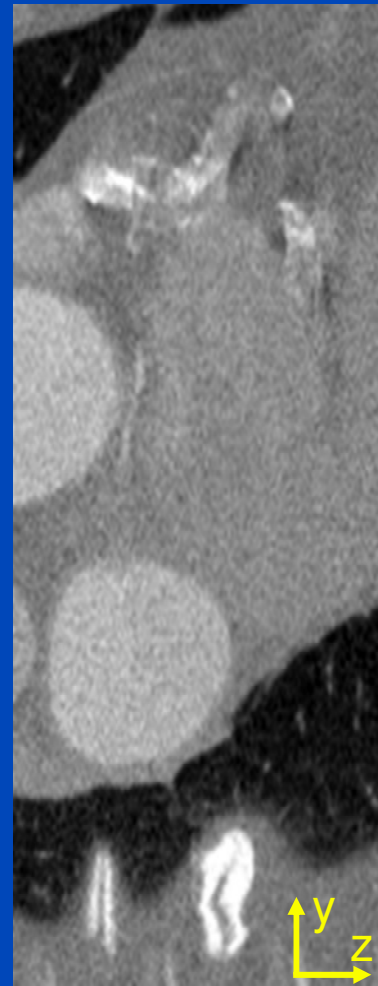
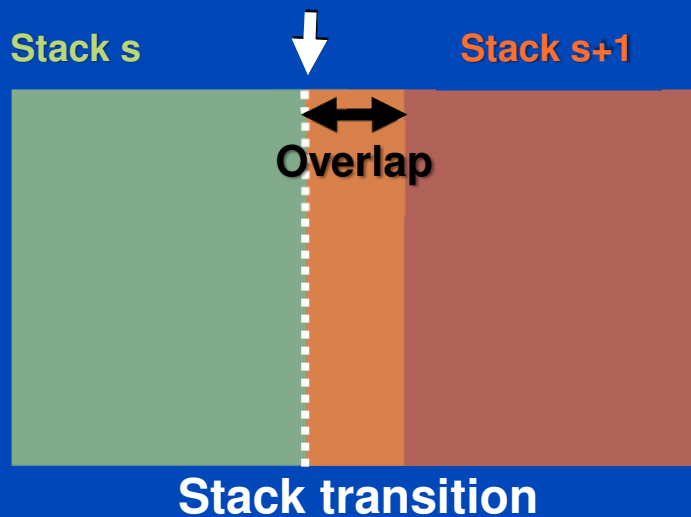
- Prospective or retrospective ECG-gating
- Low pitch sequence or spiral CT scans
- Reconstructions yield sub volumes (stacks) corresponding to the same heart beat and phase.
- The depth of the stacks depends on the collimation, pitch value, and heart beat.
- The stacks have a longitudinal overlap.
- Stack size and overlap values depend on pitch, heart rate, and heart rate variability.



stacks

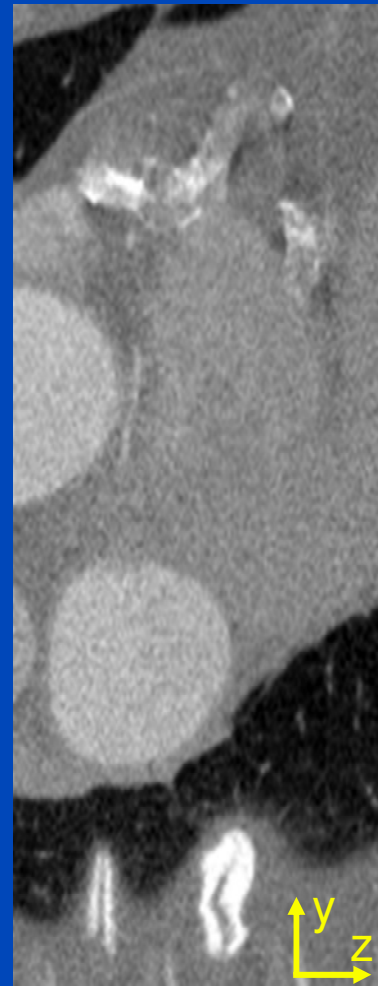
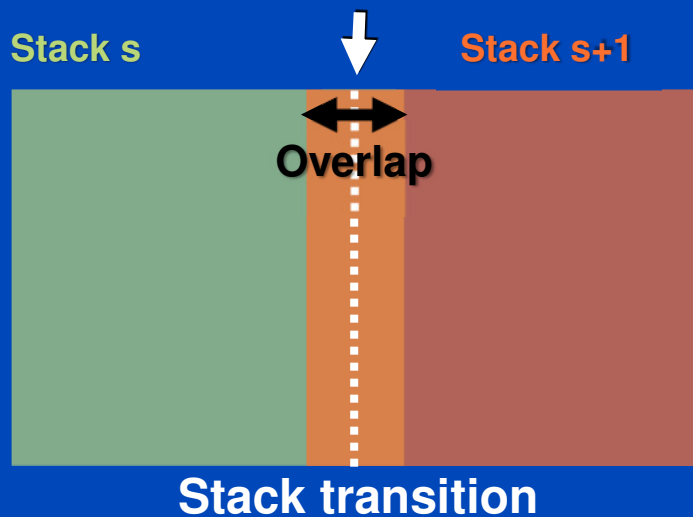
# Stacks

- The final CT volume is assembled from the stacks.
- The stack transition, from which the next stack is used, can theoretically be set to any position within the stack overlap.
- A blending between the stacks can also be performed.



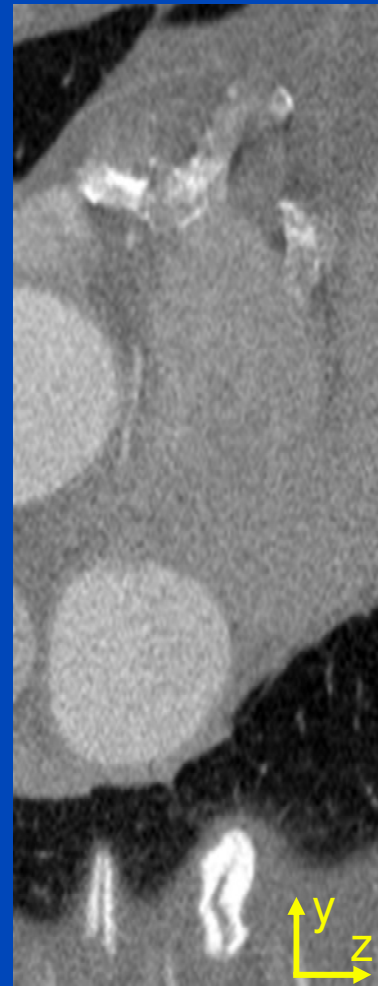
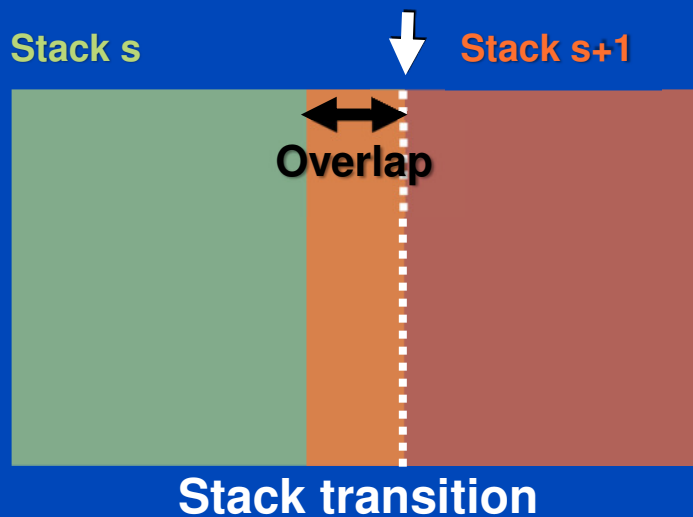
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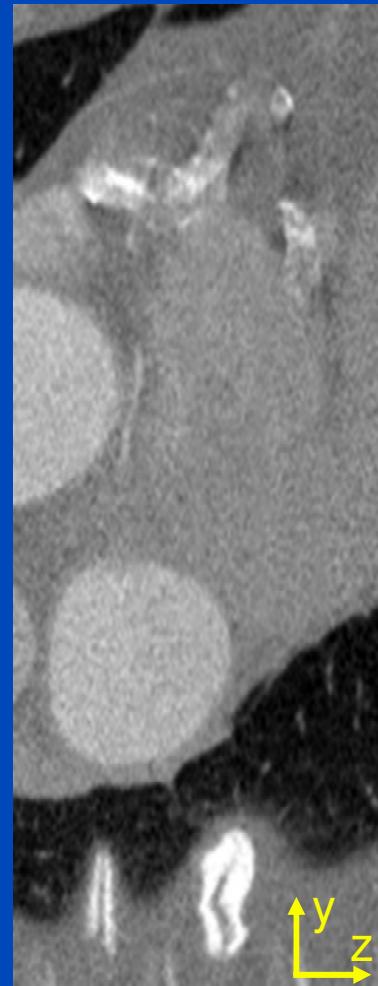
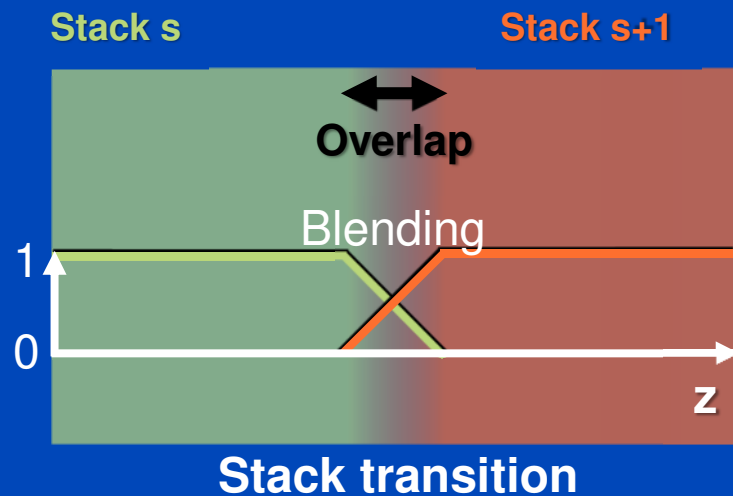
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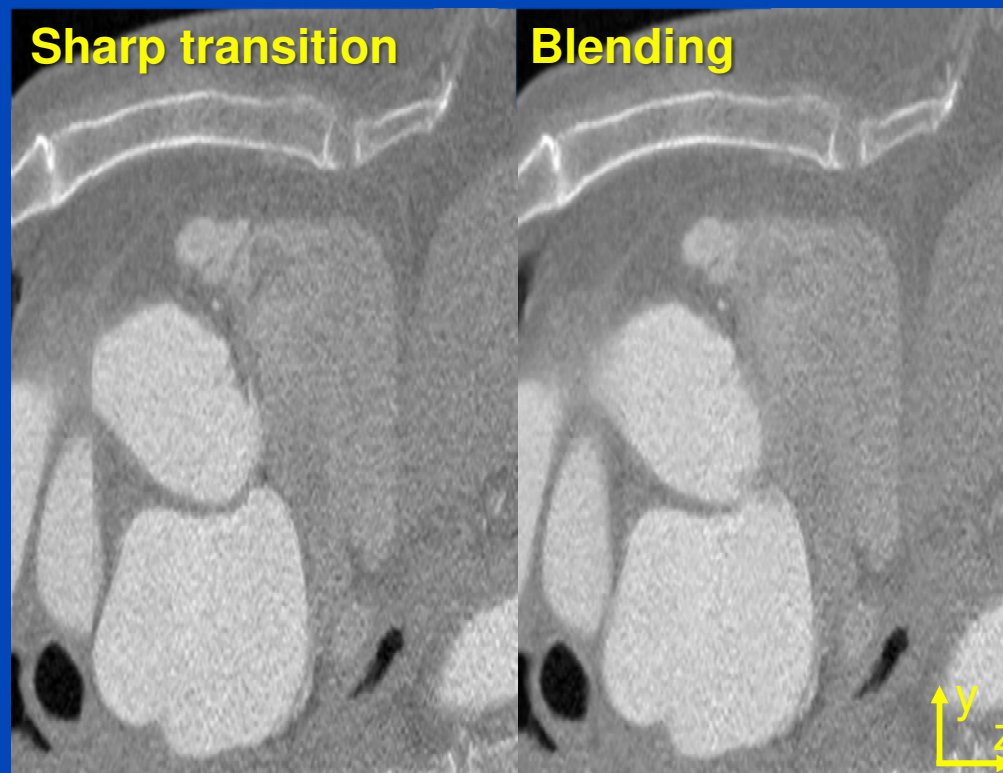
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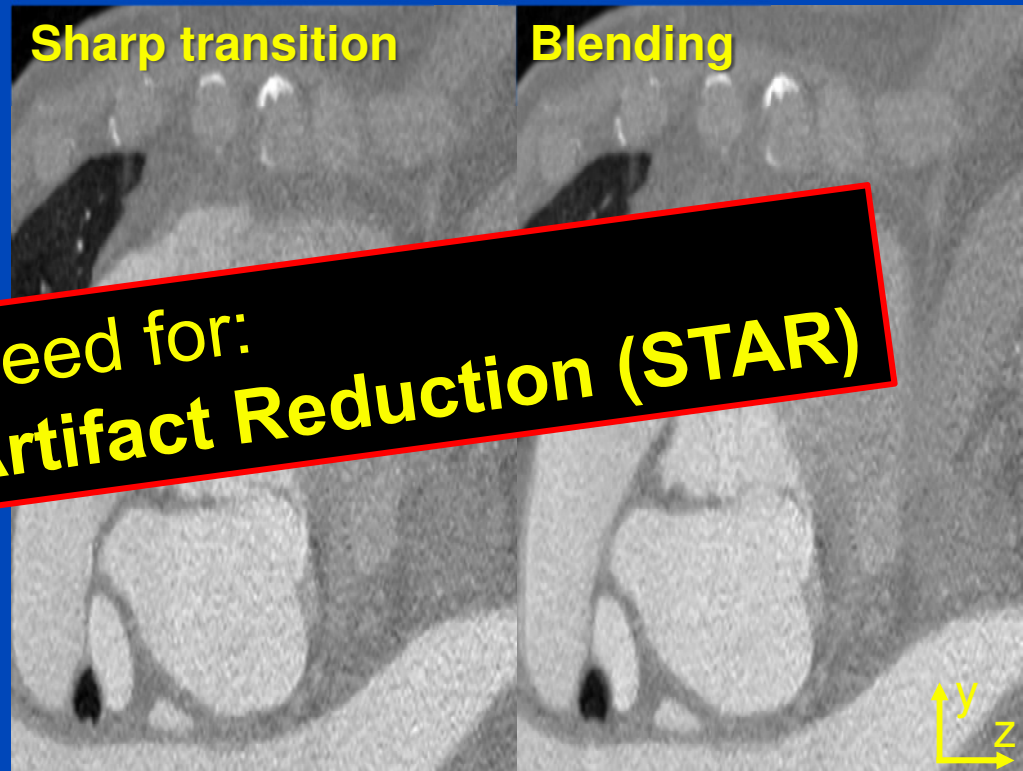
# Stack Transition Artifacts

- Irregular motion leads to stacks that do not represent exactly the same volume.
- Discontinuities at stack transitions arise when stitching the stacks together to yield the complete CT volume.



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- Discontinuities at stack transitions arise when stitching the stacks together and yield the...



Need for:  
**Stack Transition Artifact Reduction (STAR)**



# STAR

- Given two stacks  $f_1(r)$  and  $f_2(r)$ , compute a DVF  $d(r)$  that will symmetrically register them.

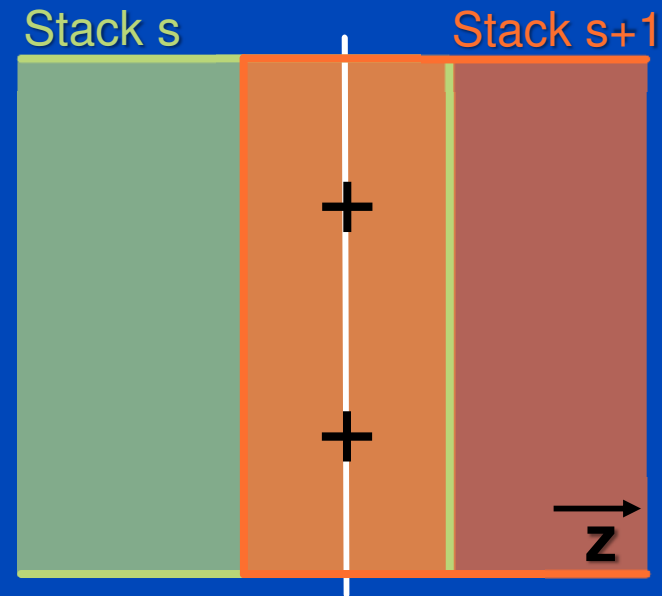
$$g_1(\mathbf{r}) = f_1(\mathbf{r} + \mathbf{d}(\mathbf{r}))$$

$$g_2(\mathbf{r}) = f_2(\mathbf{r} - \mathbf{d}(\mathbf{r})).$$

- The deformed stacks  $g_1(r)$  and  $g_2(r)$  need to be as similar as possible in the overlap region.
- The DVFs shall be smooth throughout the whole volume.

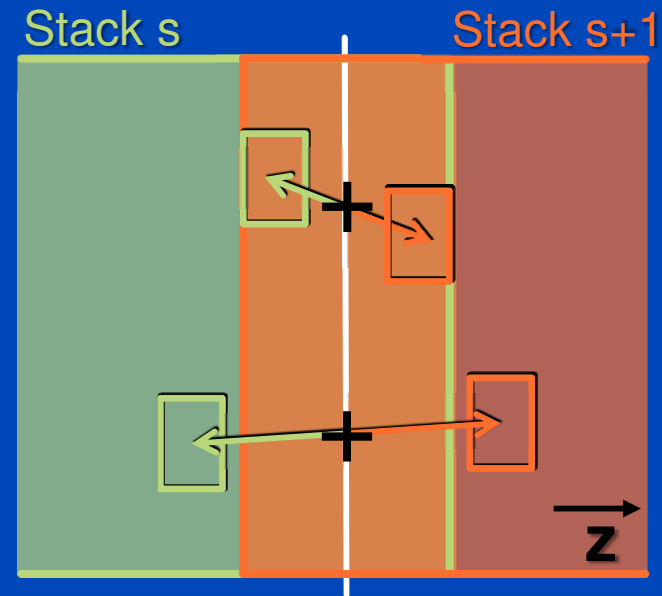
# Symmetric Patch Matching

1. Evenly distribute control points (CPs) in the center plane of each overlapping region.



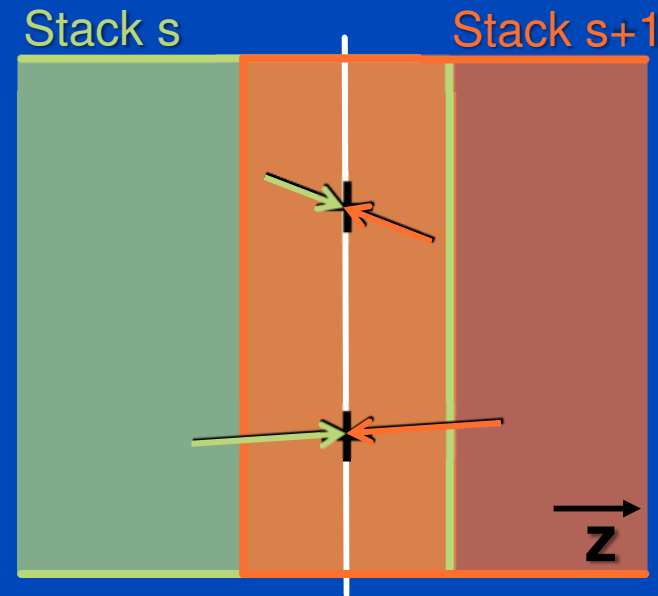
# Symmetric Patch Matching

1. Evenly distribute control points (CPs) in the center plane of each overlapping region.
2. Look for the most similar sub volume (patch) pairs at opposite offsets from a CP within the two stacks.



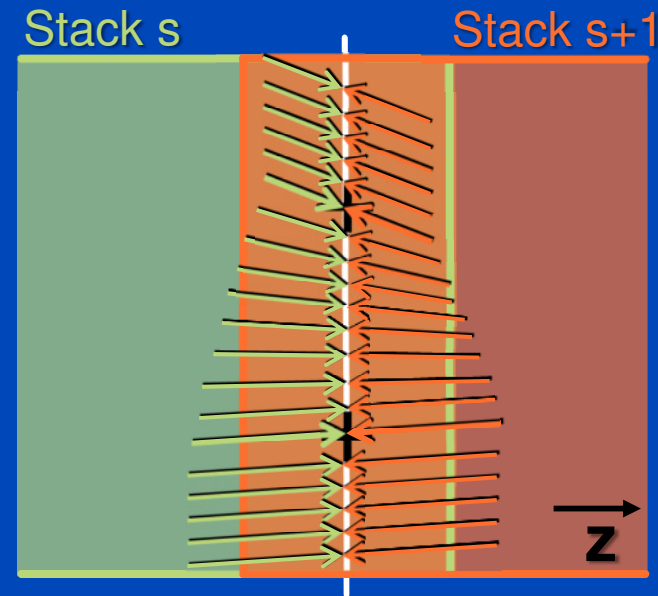
# Symmetric Patch Matching

1. Evenly distribute control points (CPs) in the center plane of each overlapping region.
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3. Invert the offset vectors to get deformation vectors for a source driven transformation (at the CPs).



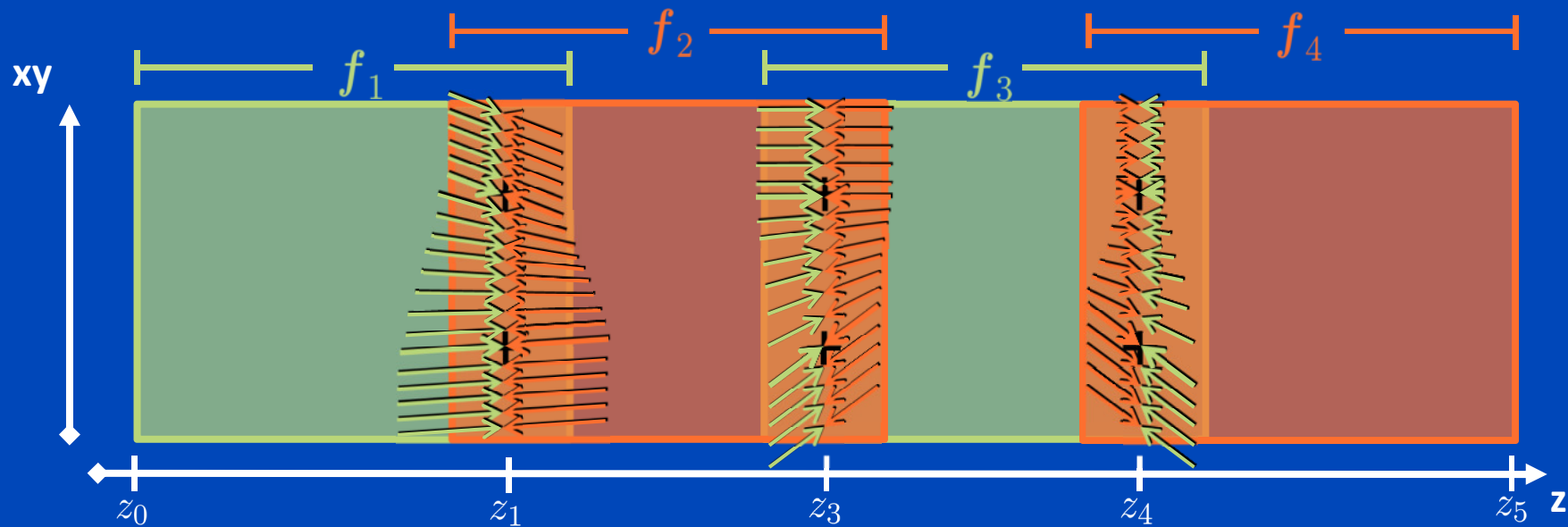
# Symmetric Patch Matching

1. Evenly distribute control points (CPs) in the center plane of each overlapping region.
2. Look for the most similar sub volume (patch) pairs at opposite offsets from a CP within the two stacks.
3. Invert the offset vectors to get deformation vectors for a source driven transformation (at the CPs).
4. In order to get a smooth DVF on the central plane perform a bilinear interpolation in  $x$  and  $y$ .
5. Finally, perform a linear interpolation in  $z$ .



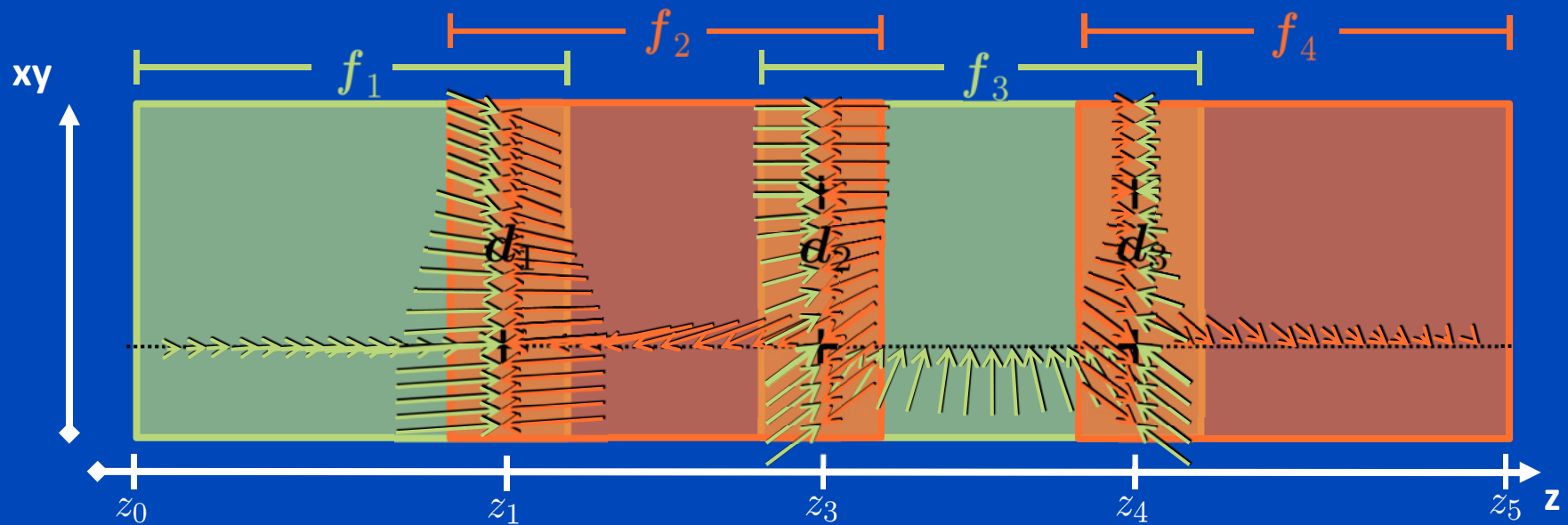
# DVF Interpolation along z

$$g_s(\mathbf{r}) = f_s \left( \mathbf{r} - \frac{z_s - z}{z_s - z_{s-1}} \mathbf{d}_{s-1}(x, y, z_{s-1}) + \frac{z - z_{s-1}}{z_s - z_{s-1}} \mathbf{d}_s(x, y, z_s) \right)$$



# DVF Interpolation along z

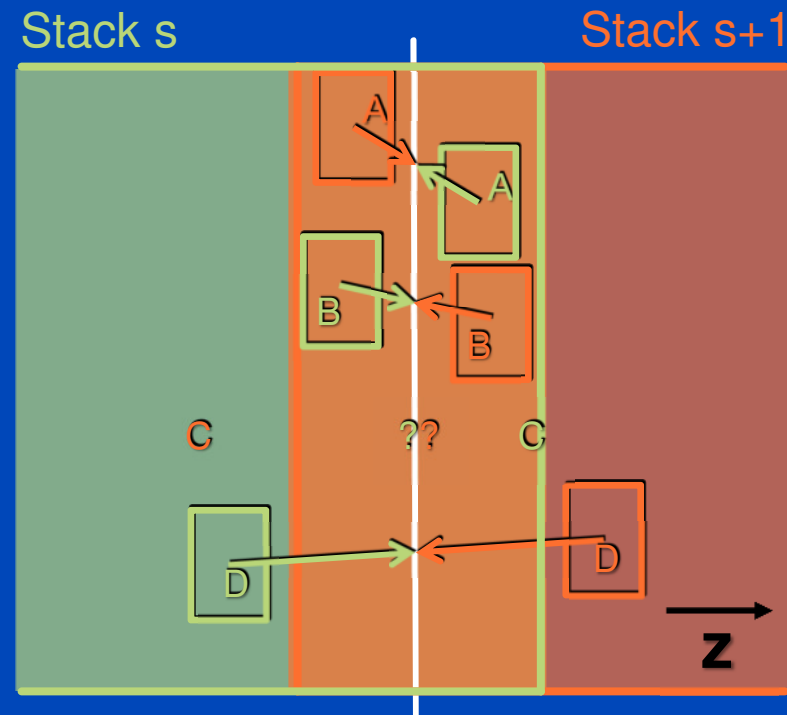
$$g_s(\mathbf{r}) = f_s\left(\mathbf{r} - \frac{z_s - z}{z_s - z_{s-1}} \mathbf{d}_{s-1}(x, y, z_{s-1}) + \frac{z - z_{s-1}}{z_s - z_{s-1}} \mathbf{d}_s(x, y, z_s)\right)$$



# Methods

## Symmetric Patch Matching

- Ideally the patches are matched based on anatomical landmarks.
- Patches can be placed on either side of a control point in and outside the overlap region (cases A, B, and D)
- Patches must remain inside the stack and there is a maximum allowed displacement
- If an anatomical landmark is located outside one of the stacks they cannot be matched (case C).





# Parameters

## STAR parameters

- Similarity metric:  
Sum of squared differences
- Patch size:  $15 \times 15 \times 2 \dots 5 \text{ mm}^3$   
(overlap/2)
- Patch sampling:  $10 \times 10 \text{ mm}^2$
- Number of control points:  
 $16 \times 16 \times 1$
- DVF vectors restricted to 6 mm length. Thus, deformations of up to 12 mm are permitted.

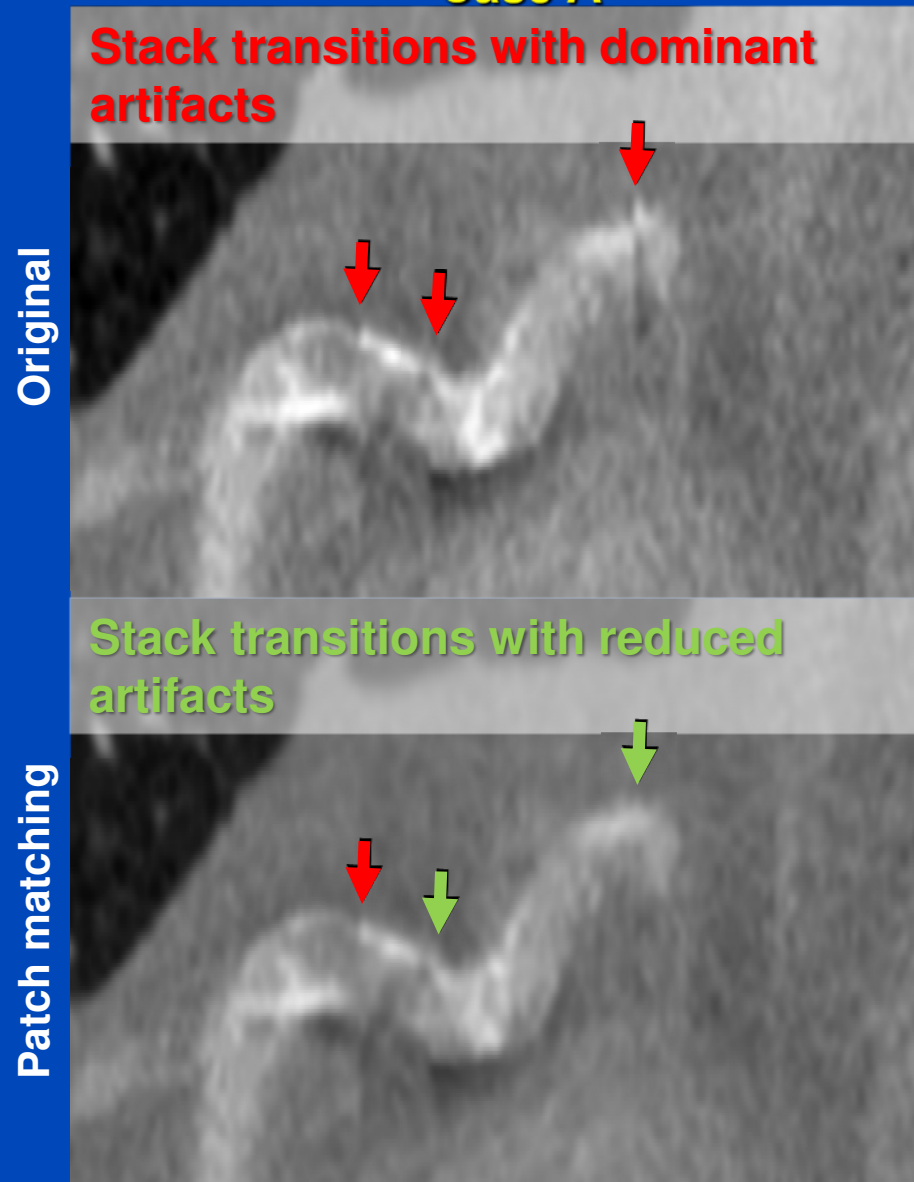
## Scan parameters

- Siemens Somatom Definition Flash and AS+
- Standard partial scan WFBP reconstructions
- 285 ms rotation time
- $92 \dots 374 \text{ mAs}_{\text{eff}}$
- $80 \dots 125 \text{ kV}$
- $7 \dots 82 \text{ mGy CTDI}_{\text{vol}}$
- $110 \dots 1254 \text{ mGy} \cdot \text{cm DLP}$

# Results

C = 0 HU, W=2000 HU

## Case A



# Results

C = 0 HU, W=2000 HU

Case B

Stack transitions with dominant artifacts

Original



Stack transitions with reduced artifacts

Patch matching



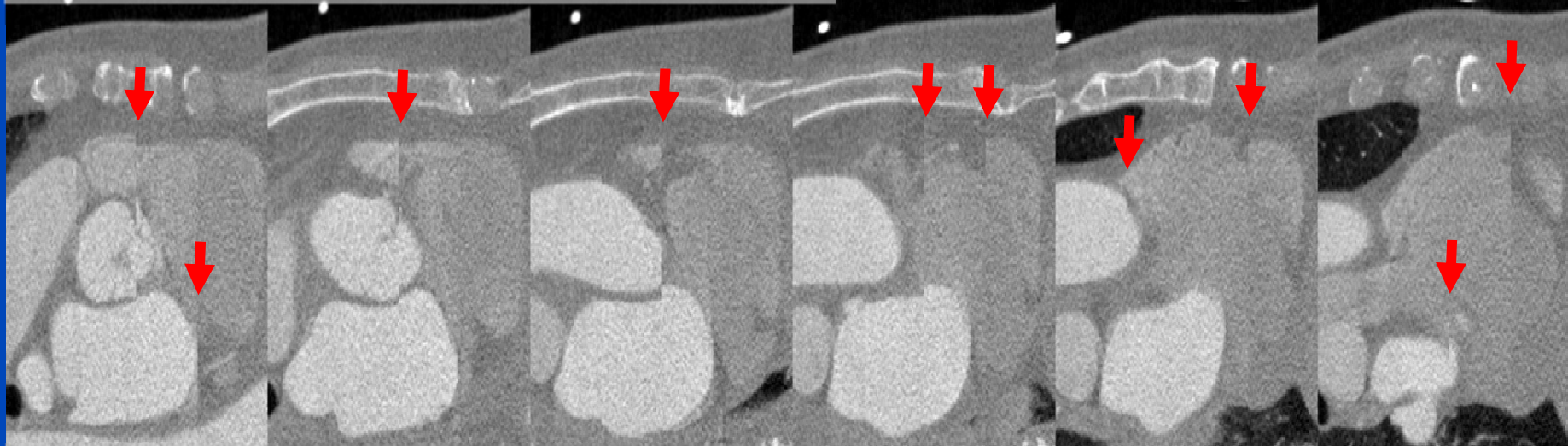
# Results

C = 0 HU, W=2000 HU

Case C

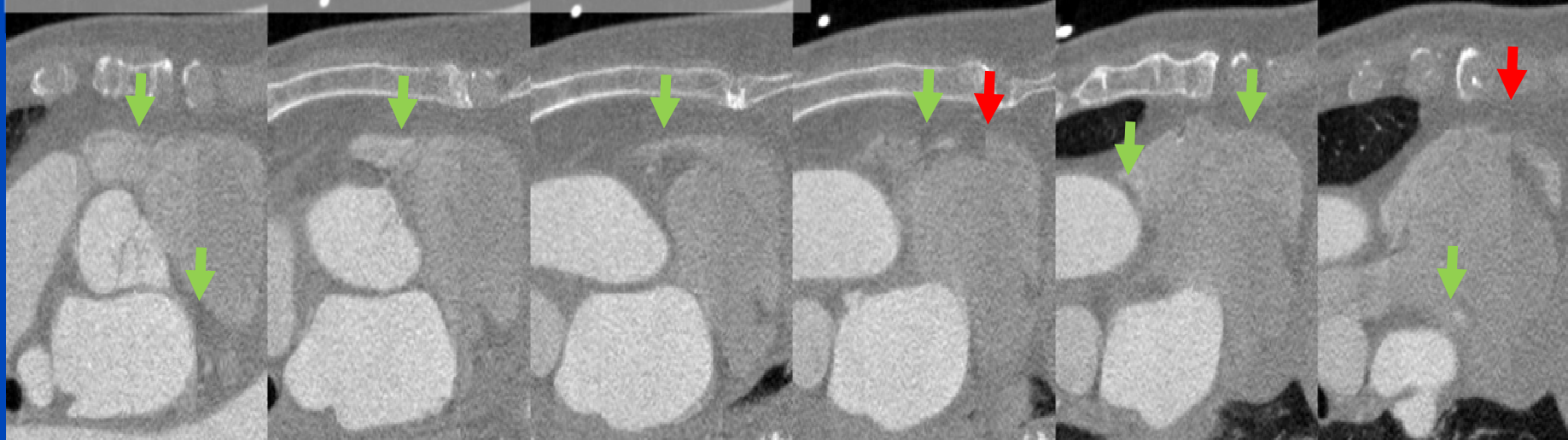
Stack transitions with dominant artifacts

Original



Stack transitions with reduced artifacts

Patch matching



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Sagittal slices in 8 mm increments.

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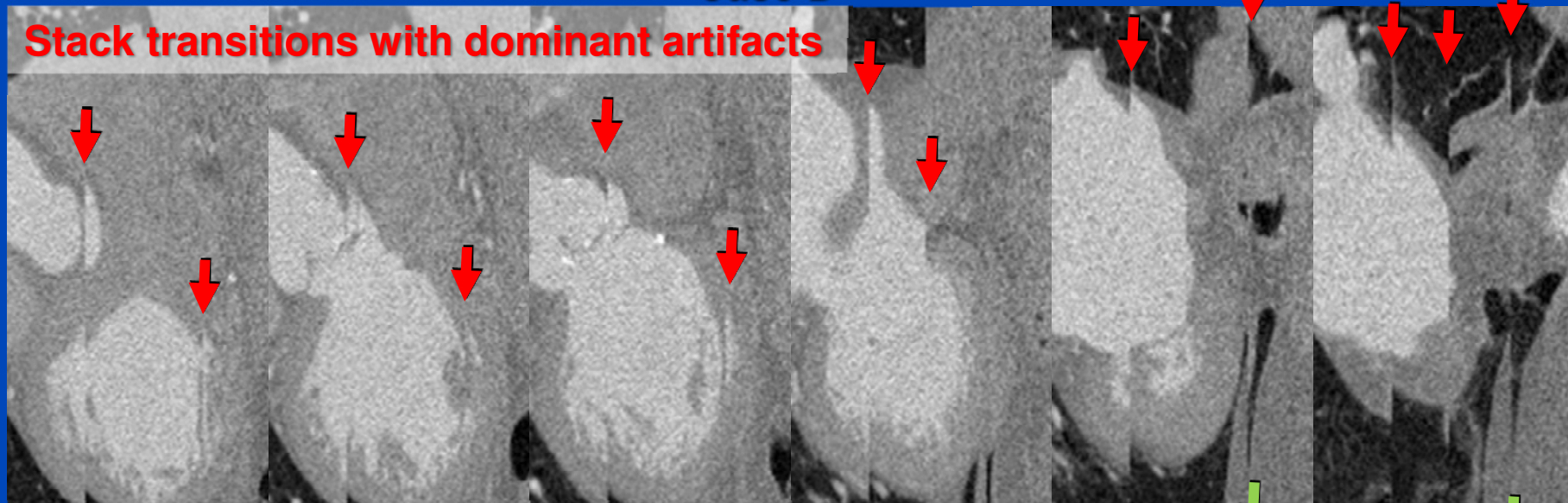
# Results

C = 0 HU, W=2000 HU

Case D

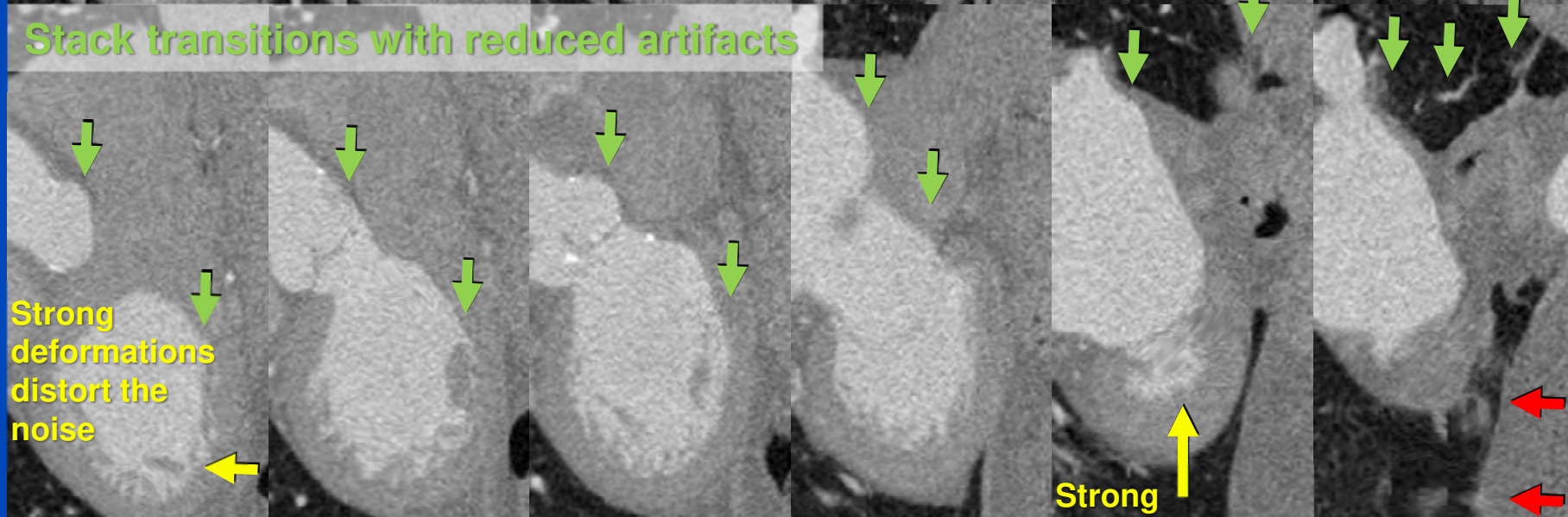
Stack transitions with dominant artifacts

Original



Stack transitions with reduced artifacts

Patch matching



Strong deformations distort the noise

Strong deformations distort the noise

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Coronal slices in 8 mm increments.

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# Conclusions on STAR

- STAR improves image quality considerably.
- Some stack transition artifacts may remain.
- Variations in gray value for the same tissue will be addressed in the future.
- DVFs obtained by our patch-based STAR are useful to initialize a demons-based STAR algorithm\*.

\* Sergej Lebedev, Eric Fournie, Karl Stierstorfer, and Marc Kachelrieß. Stack transition artifact removal (STAR) for cardiac CT using a symmetric demons algorithm. Conference Program of the 5<sup>th</sup> International Conference on Image Formation in X-Ray Computed Tomography, May 2018

# Thank You!

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

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.

