

Dual-Energy / Spektral-CT: Unterschiedliche Techniken mit vielen Anwendungsmöglichkeiten

PD Dr. med. Matthias Eberhard, EBCR

Institut für Diagnostische und Interventionelle Radiologie, Universitätsspital Zürich

Radiologie; Spitäler Frutigen Meiringen Interlaken AG

Disclosure

- Siemens: Speaker's Bureau

Dual-energy – häufiger als Mann denkt...



smiths detection

SCANNER FÜR FRACHTRAUMGEPÄCK
CTX 5800

- ☛ für Waren
- ☛ Röntgen
- ☛ zur Sprengstoffdetektion



DETEKT-IN

3D-SCANNER
XT2100HS

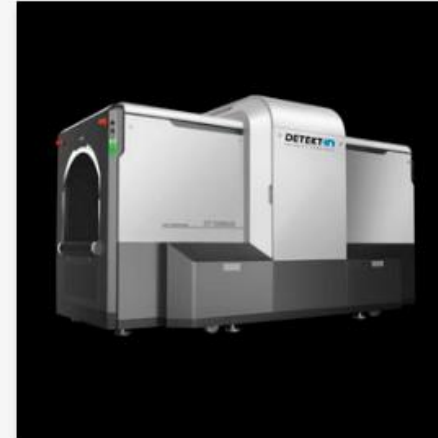
- ☛ Gepäck
- ☛ Röntgen
- ☛ mit Förderer



DETEKT-IN

GEPÄCK-SCANNER
CX6040D

- ☛ für Päckchen
- ☛ Röntgen
- ☛ mit Förderer



DETEKT-IN

GEPÄCK-SCANNER
XT2080AD

- ☛ Röntgen
- ☛ mit Förderer
- ☛ zur Sprengstoffdetektion

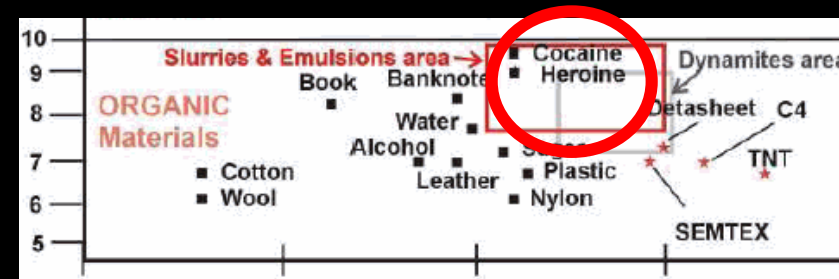
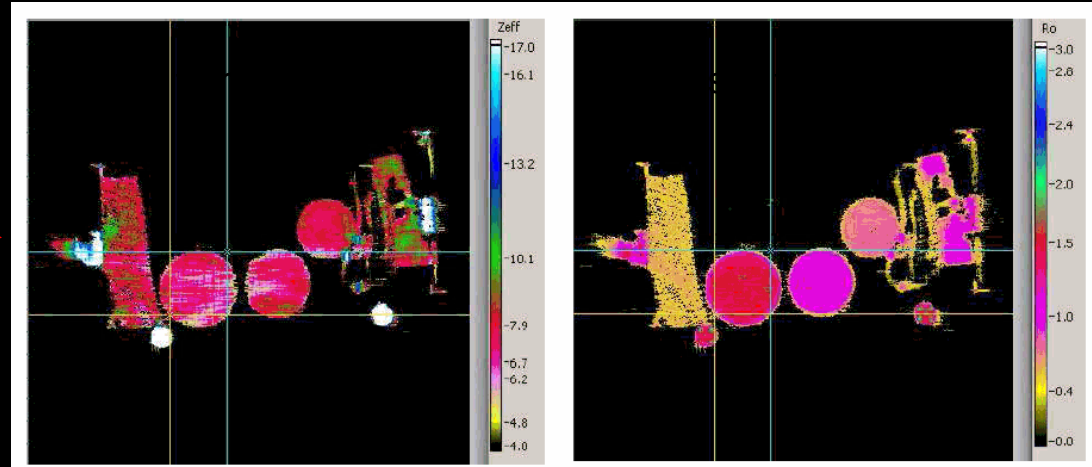
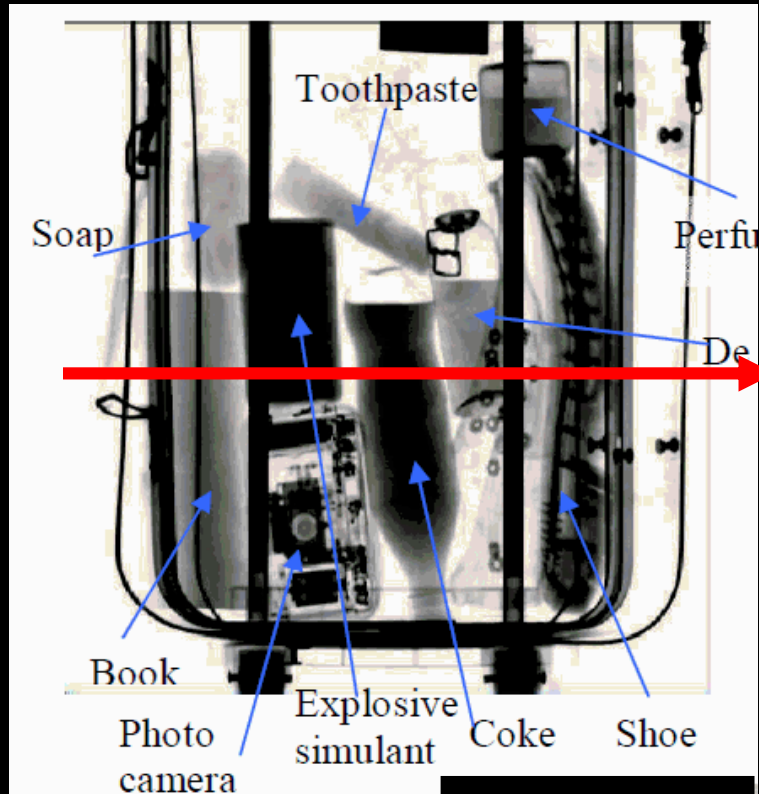


**unival
group**

GEPÄCK-SCANNER
BV 5030CA

- ☛ Röntgen

Materialcharakterisierung



Inhalt

- Single-energy versus Dual-energy CT
 - Das Prinzip
- Dual-energy CT
 - Die unterschiedlichen Techniken
 - Die vielen Möglichkeiten und potentielle Anwendungen

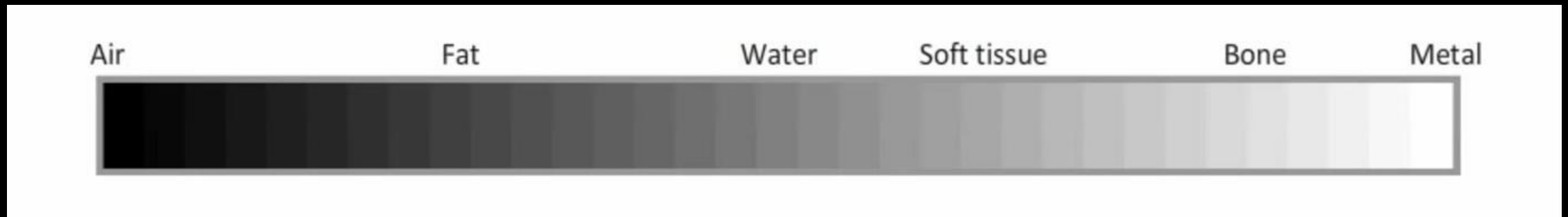
Inhalt

- Single-energy versus Dual-energy CT
 - Das Prinzip
- Dual-energy CT
 - Die unterschiedlichen Techniken
 - Die vielen Möglichkeiten und potentielle Anwendungen

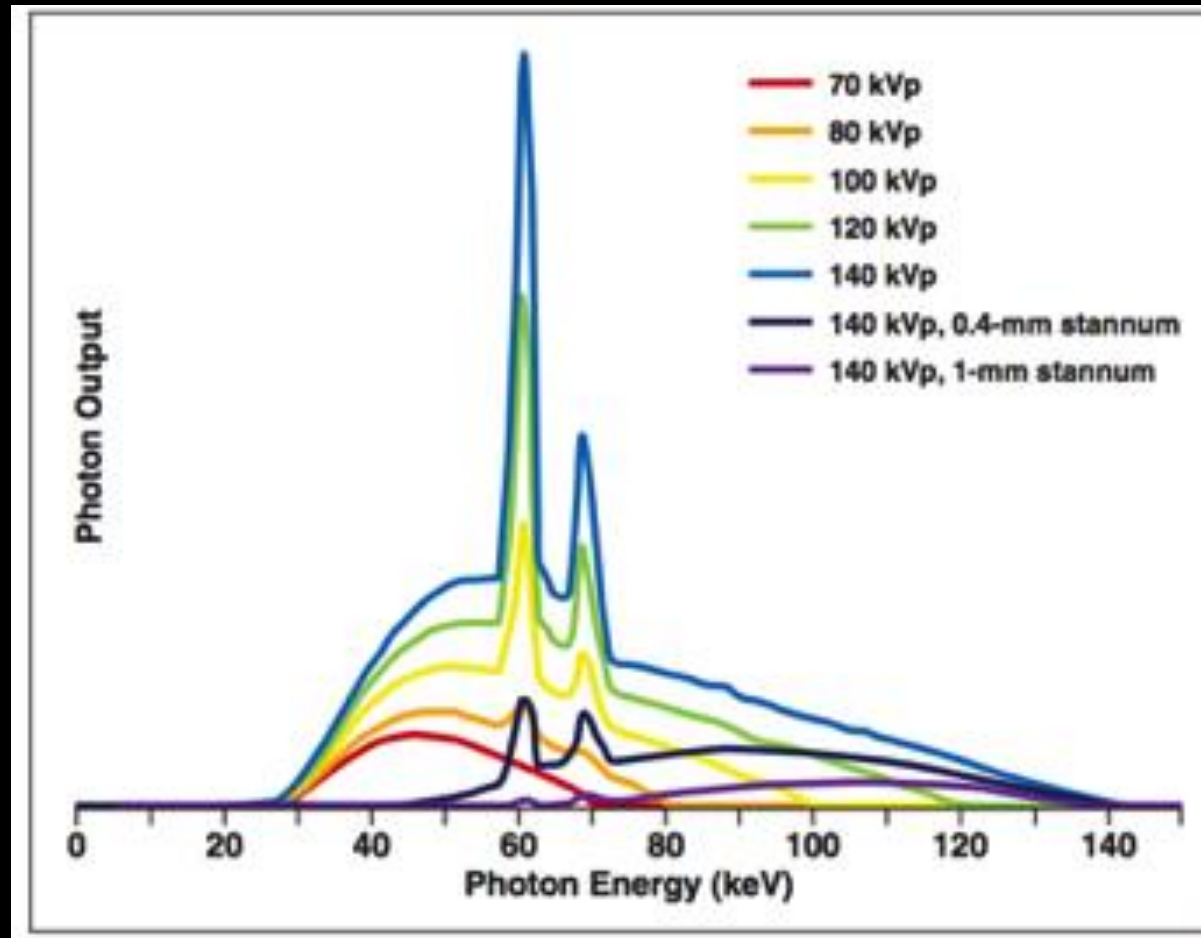
Single-energy CT

Single-energy CT: singuläre Materialcharakterisierung
“Wasser”

Alles ist entweder dichter oder weniger dicht als Wasser.

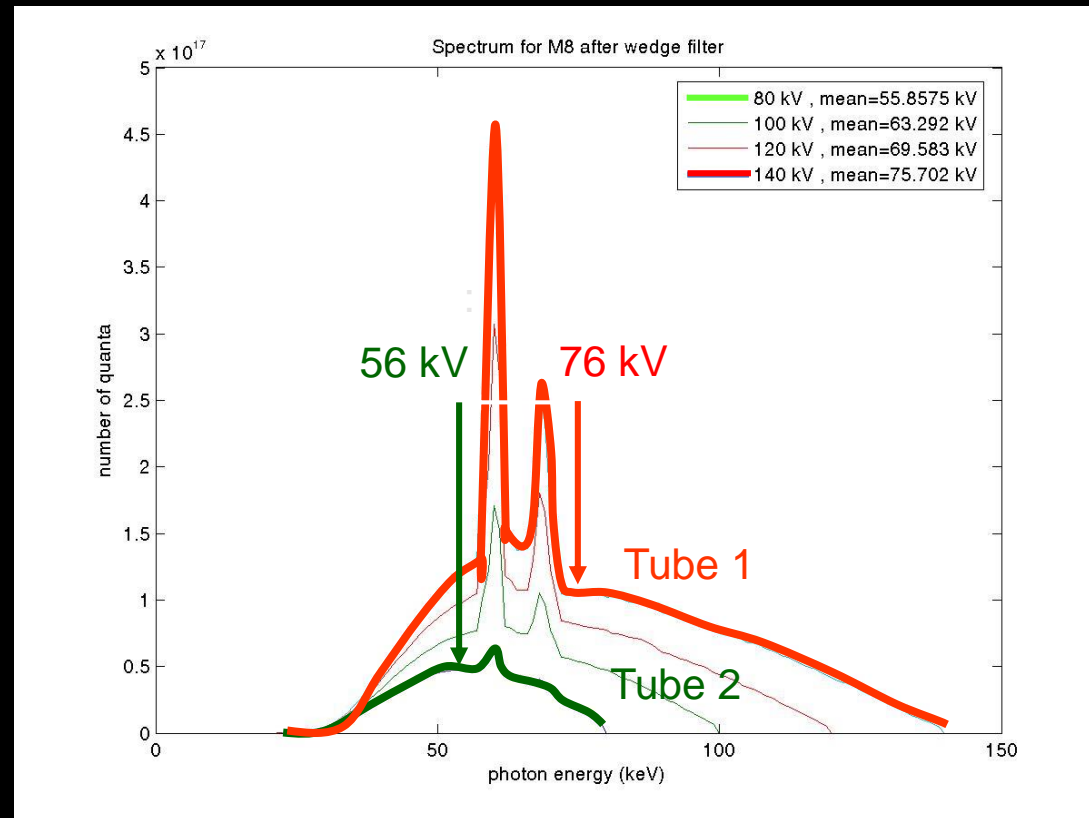


Energiespektren – Röhrenspannung



Qualität und Quantität

Dual-energy – Zwei Energiespektren



Unterschiedliche Schwächung

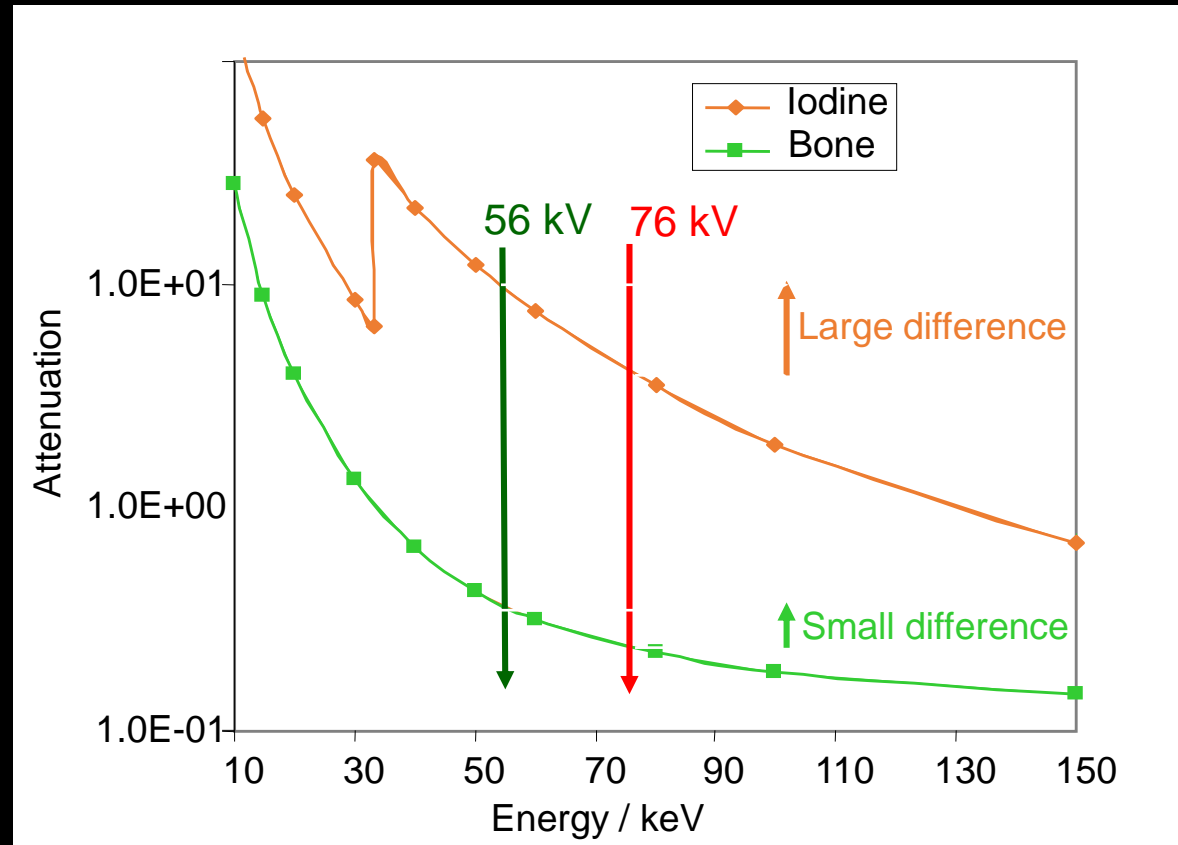
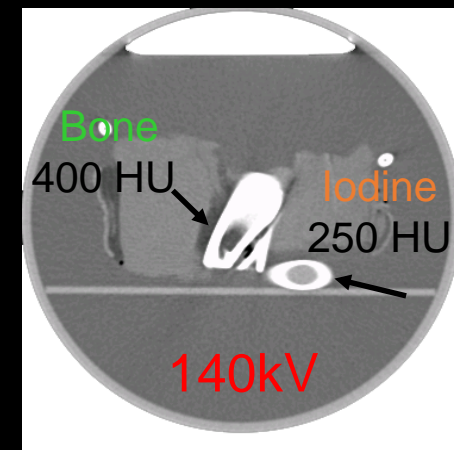
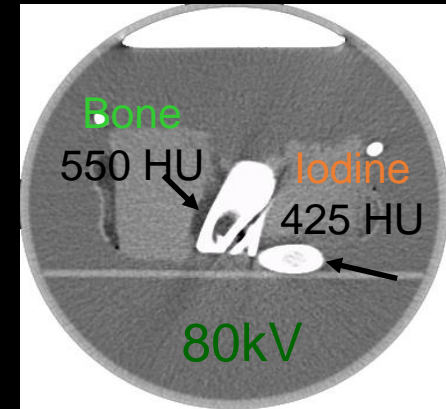
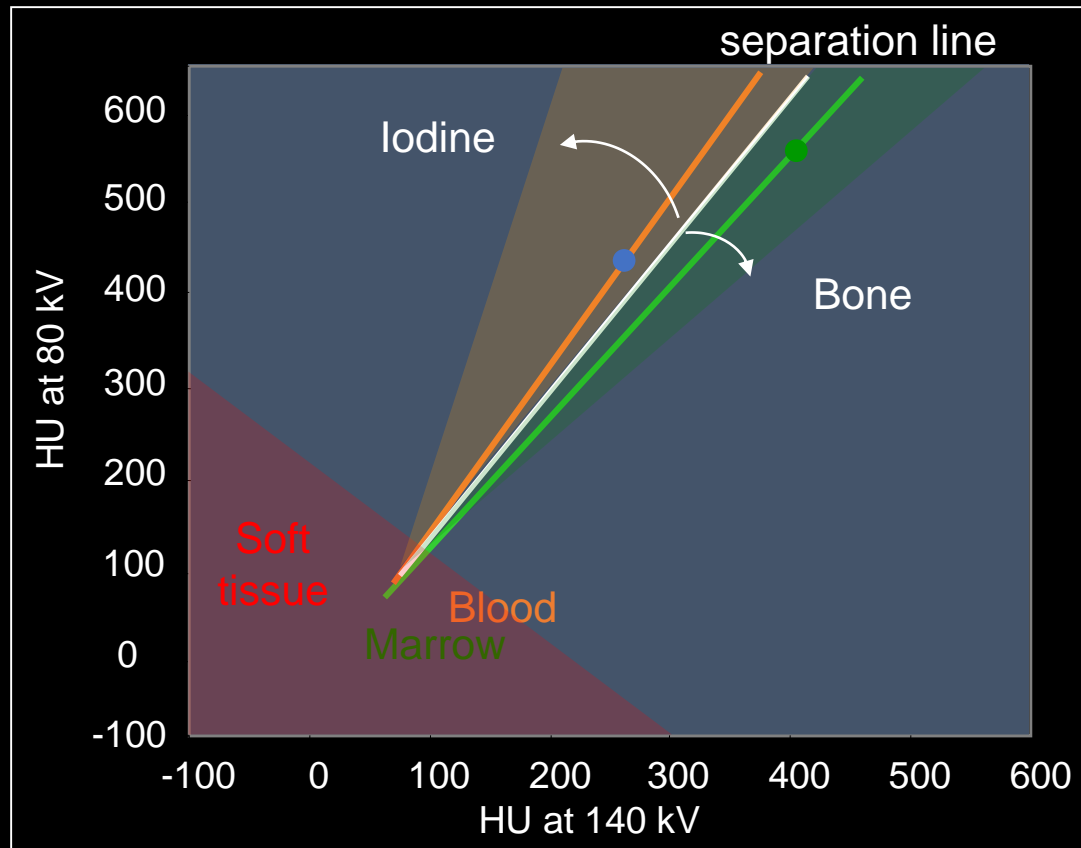


Photo effect \leftrightarrow Compton effect

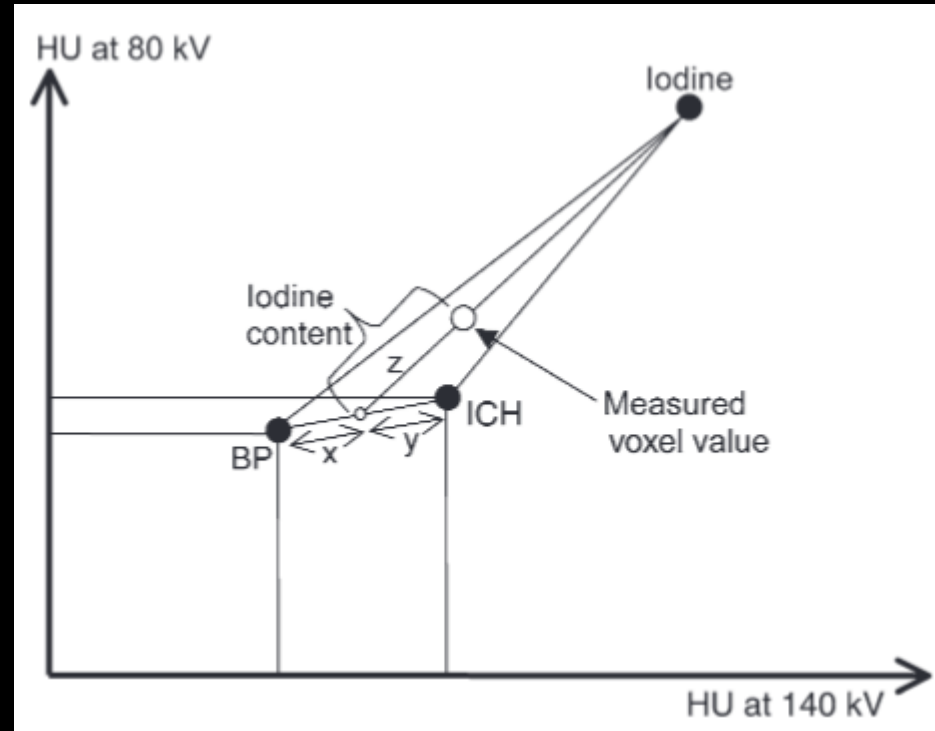
Dual energy – das Prinzip

- Zerlegung von 2-Materialien → z.B. Knochen u. Jod



Material decomposition

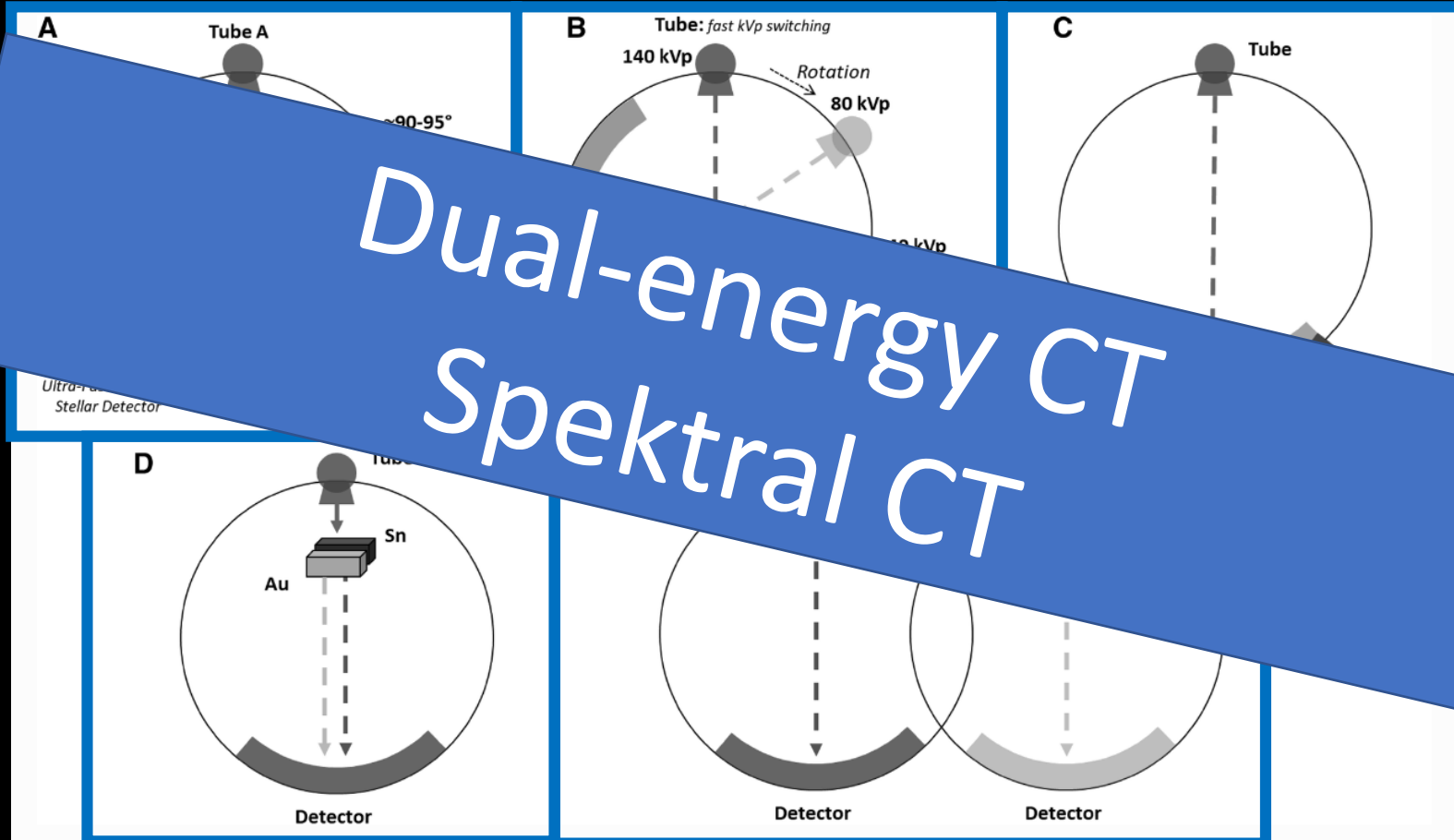
- 3-Material Dekomposition → Hirnparenchym, Blut und Jod



Inhalt

- Single-energy versus Dual-energy CT
 - Das Prinzip
- Dual-energy CT
 - Die unterschiedlichen Techniken
 - Die vielen Möglichkeiten und potentielle Anwendungen

Different approaches



Dual-energy CT
Spektral CT

Photon-Counting Detector

Figure 7

Semiconductor
(e.g. CdTe) diode
converts x-ray

Low keV
High keV

Figure 7: Schematic of the detector components. The detector is a semiconductor diode that converts x-ray energy into electrical charge, which is a current. The detector is a current scintillating detector with high efficiency. The signal is binned in the signal from the application-specific

Figure 8

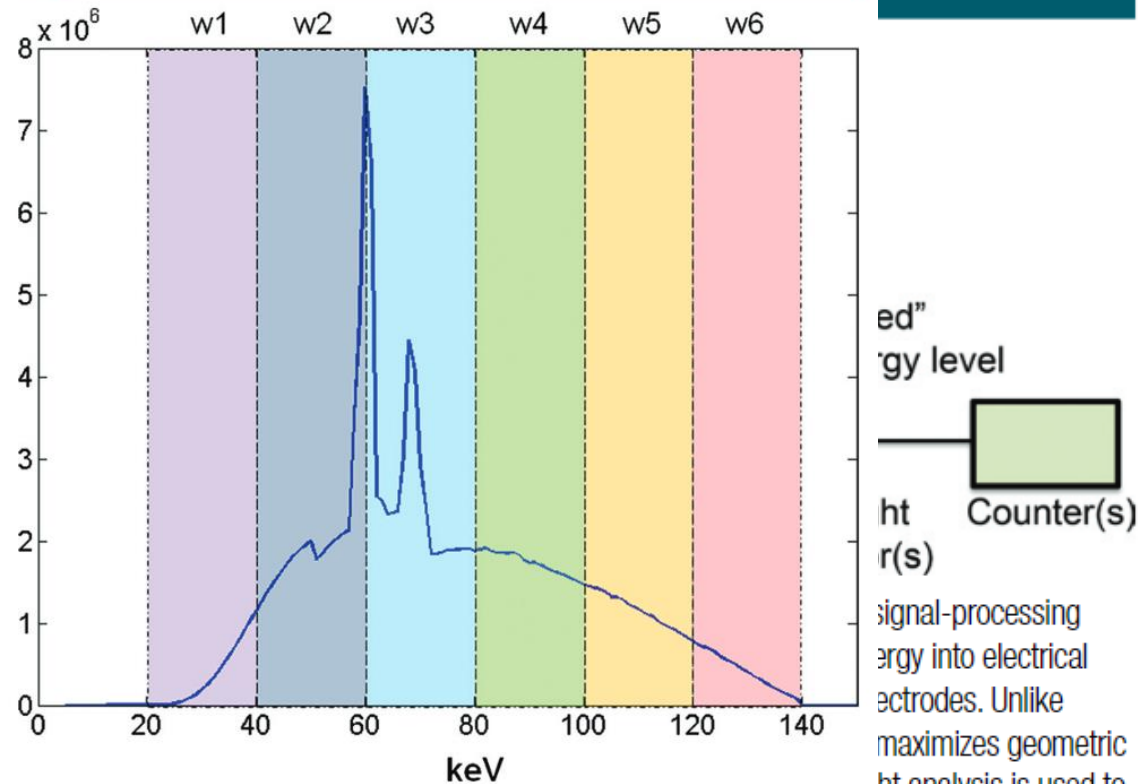


Figure 8: Illustration of the binning of detected x-rays into six energy windows ($w1-w6$). This illustration neglects nonideal properties such as pulse pile-up, which occurs when the count rate is too high, and charge sharing or K-escape phenomena, which occur when the discrete spacing of the signal electrodes is too small. To achieve both an accurate photon count and spectral measurement in CT, both hardware and software advances are necessary. keV = Kiloelectron volt.

Dual-Energy CT: Radiation Dose Aspects

Conclusion

Of the various methods that have been proposed for acquiring DECT data, image acquisition based on DSCT is the most intensely evaluated approach in the current literature. There is strong evidence that DECT imaging with DSCT is not associated with increased radiation dose levels. Radiation dose data on DECT techniques based on rapid kilovoltage switching to date are inconclusive. Reports on radiation dose with other approaches for DECT data acquisition are scarce or nonexistent, and a conclusive evaluation of the radiation dose associated with these techniques remains elusive. Finally, judicious use of DECT techniques holds the potential of drastically reducing radiation exposure, for example, by the elimination of unnecessary unenhanced CT.

Hensler et al. AJR 2012; 199:S16–S25

Dual-Energy CT of the Abdomen and Pelvis: Radiation Dose Considerations

SA-CME

Joseph R. Grajo, MD^a, Dushyant V. Sahani, MD^b

Credits awarded for this enduring activity are designated "SA-CME" by the American Board of Radiology (ABR) and qualify toward fulfilling requirements for Maintenance of Certification (MOC) Part II: Lifelong Learning and Self-assessment. To access the SA-CME activity visit <http://bit.ly/ACRSACME>.

Table 2. Opportunities for Dose Reduction

Potential Dose Reduction Methods
Elimination of phases through acquisition of virtual enhanced images
Advanced iterative reconstruction techniques
Limiting field of view to reduce scatter radiation
Combining dynamic phases of contrast
Individual tailoring of exams to patient body weight to reduce exposure

J Am Coll Radiol 2018;15:1128-1132.

Inhalt

- Single-energy versus Dual-energy CT
 - Das Prinzip
- Dual-energy CT
 - Die unterschiedlichen Techniken
 - Die vielen Möglichkeiten und potentielle Anwendungen



Single-energy

vs

Dual-energy / Spektral-CT



Konventionelles CT
70 - 150kVp



Elektronendichte



Ca-Suppression



Harnsäure



Z eff



VNC



Iod



VMI

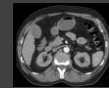


Konventionell

Dual-energy / Spektral-CT



VMI



Konventionell

High-Pitch Photon-Counting Detector Computed Tomography Angiography of the Aorta

Intraindividual Comparison to Energy-Integrating Detector Computed Tomography at Equal Radiation Dose

André Euler, MD, Kai Higashigaito, MD,* Victor Mergen, MD,* Thomas Sartoretti, BMed,*†
Bettina Zanini,* Bernhard Schmidt, PhD,‡ Thomas G. Flohr, PhD,‡ Stefan Ulzheimer, PhD,‡
Matthias Eberhard, MD, EBCR,* and Hatem Alkadhi, MD, MPH, FESER, EBCR**

- 40 Patienten eingeschlossen, CTA an einem EID-CT (Somatom Force) und einem Photon-counting CT (Naeotom alpha)
- Gleiche Strahlendosis: CTDI_{vol} 2.68 ± 1.33 mGy für EID-CT und 2.63 ± 1.3 mGy für Photon-counting CT

TABLE 1. CT Scan Parameters

CT Parameter	EID-CT	PCD-CT
Detector collimation, mm	192 × 0.6 = 115.2 (z-flying focal spot)	144 × 0.4 = 57.6
Tube voltage, kV	ATVS (ref. 100 kV)	120
Tube current (reference tube current time product for EID-CT and IQ for PCD-CT)	Ref. mAs = 162	IQ = 58
Gantry rotation time, s	0.25	0.25
Pitch	3.2	3.2





CTA der Aorta – high pitch

100 kVp
CTDI_{vol} 3.93

40 keV
CTDI_{vol} 3.93

45 keV
CTDI_{vol} 3.93

50 keV
CTDI_{vol} 3.93

55 keV
CTDI_{vol} 3.93

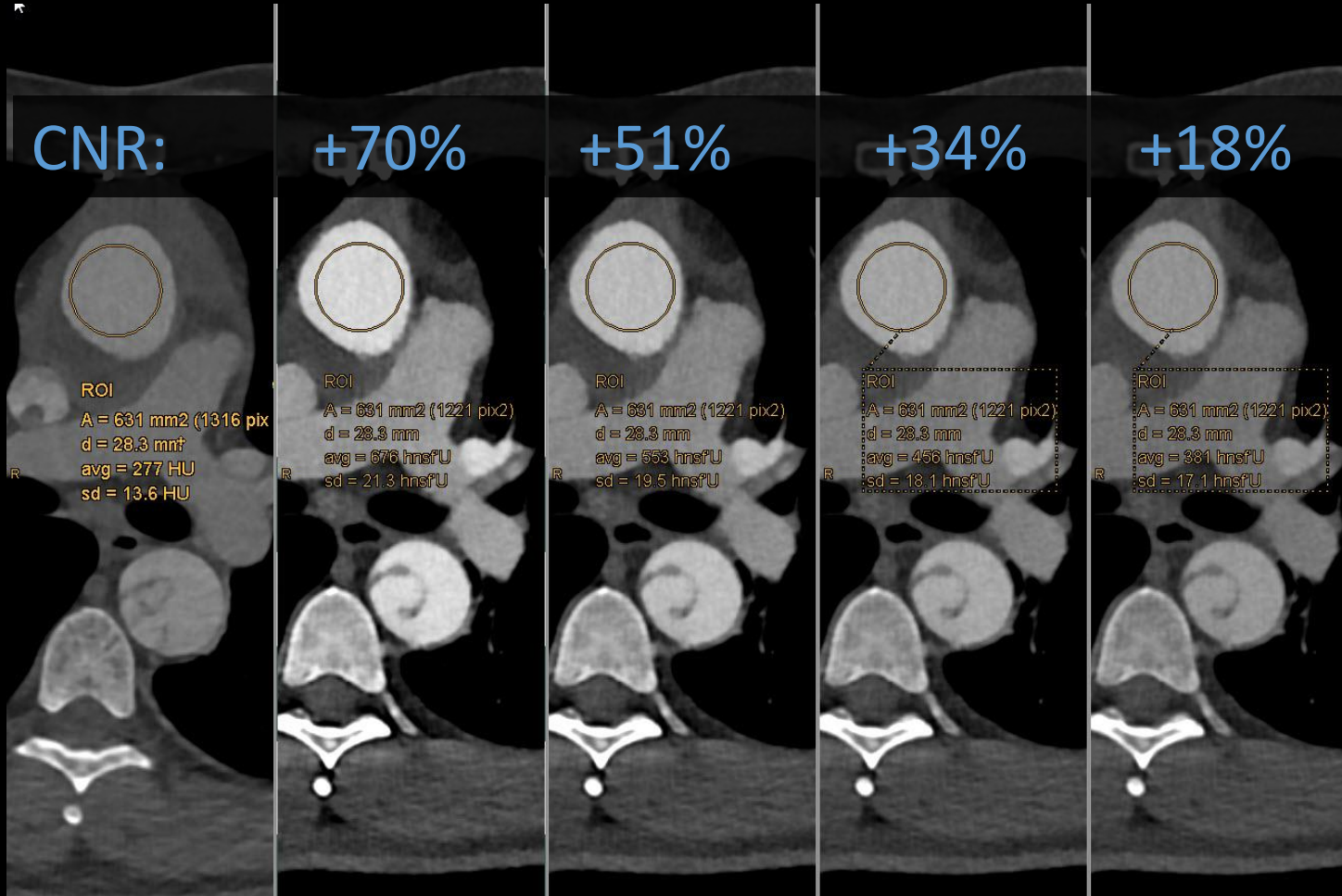
CNR:

+70%

+51%

+34%

+18%



FORCE

NAEOTOM

NAEOTOM

NAEOTOM

NAEOTOM



CTA der Aorta – high pitch

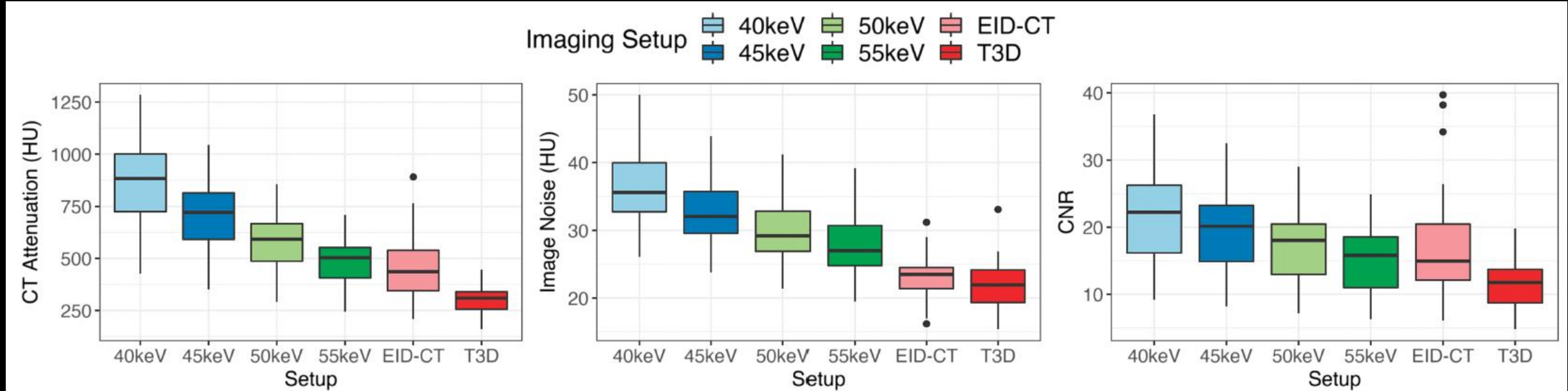


FIGURE 1. Computed tomography (CT) attenuation of the aorta, image noise, and contrast-to-noise ratio as a function of imaging setup. Box and whisker plots demonstrate increasing mean CT attenuation of the aorta, contrast-to-noise ratio (CNR), and noise with decreasing keV level.

Epikardiales Fettgewebe

Epicardial Adipose Tissue Attenuation and Fat Attenuation Index: Phantom Study and In Vivo Measurements With Photon-Counting Detector CT

Victor Mergen, MD¹, Emanuel Ried, MD¹, Thomas Allmendinger, PhD², Thomas Sartoretti, BMed¹, Kai Higashigaito, MD¹, Robert Manka, MD^{1,3}, Andre Euler, MD¹, Hatem Alkadhi, MD, MPH¹, Matthias Eberhard, MD¹

Cardiothoracic Imaging · Original Research

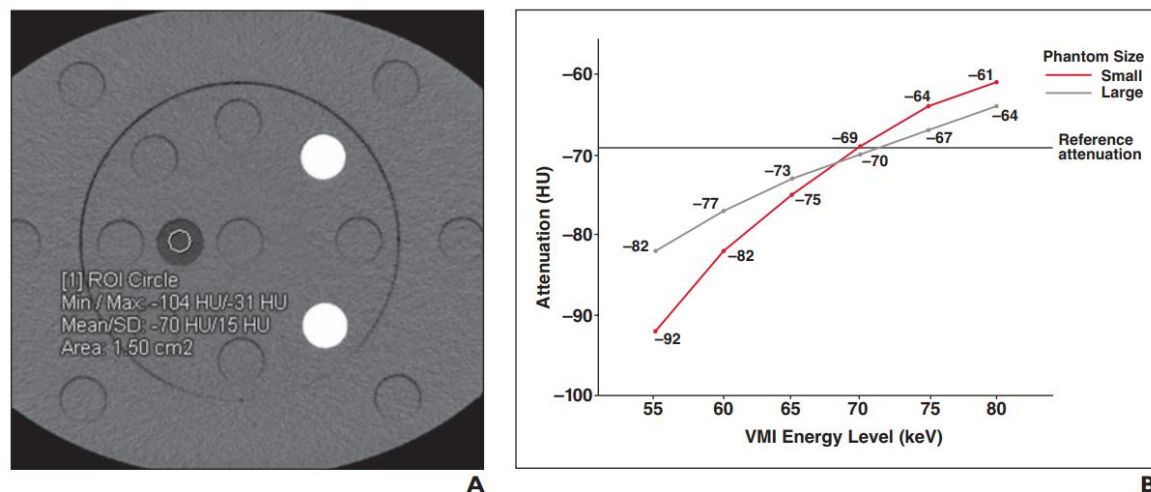
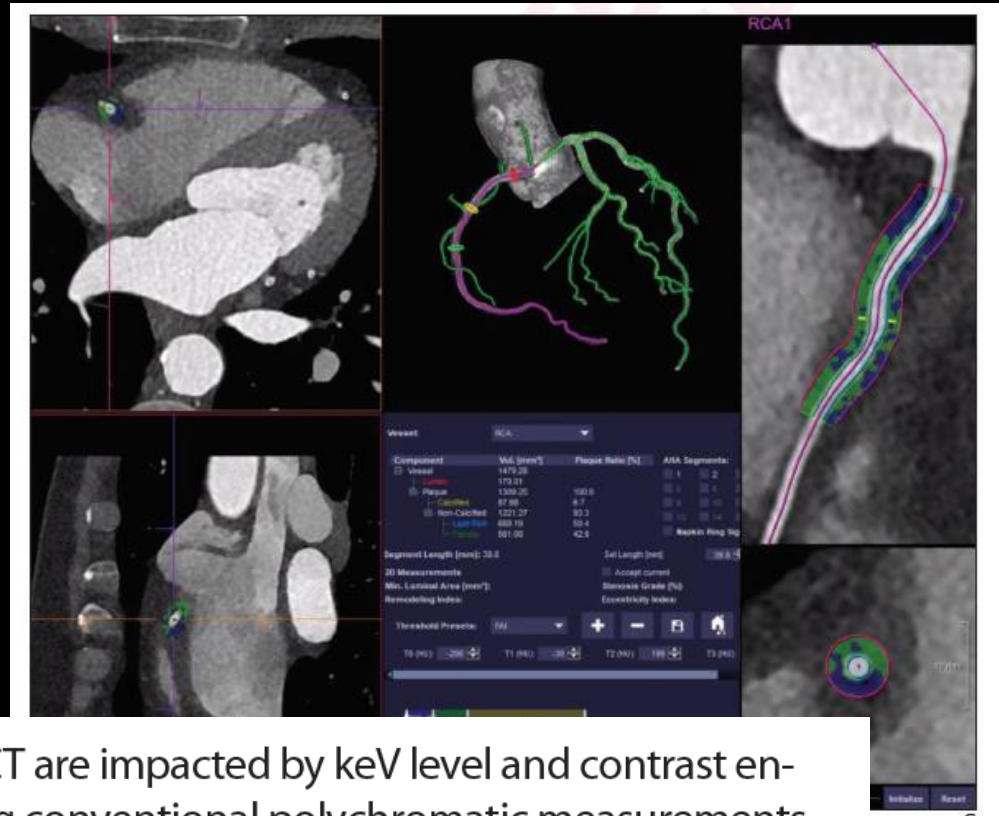


Fig. 1—Measurement of attenuation in phantom fat insert. **A**, Photon-counting detector (PCD) CT image of large phantom (using extension ring measuring 20 × 40 cm) shows ROI placement in fat insert. PCD CT images of phantom were reconstructed using quantum iterative reconstruction 3 and quantitative reconstruction kernel Qr44. **B**, Graph shows attenuation values of fat insert in relation to energy level. Horizontal reference line represents attenuation of fat insert determined on energy-integrating detector CT (-69 HU). VMI = virtual monoenergetic image.

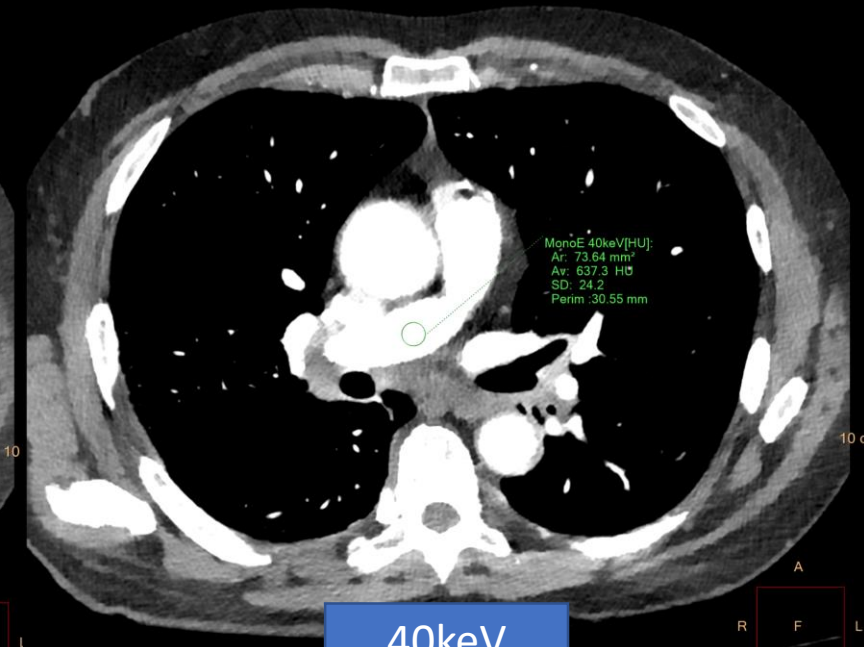
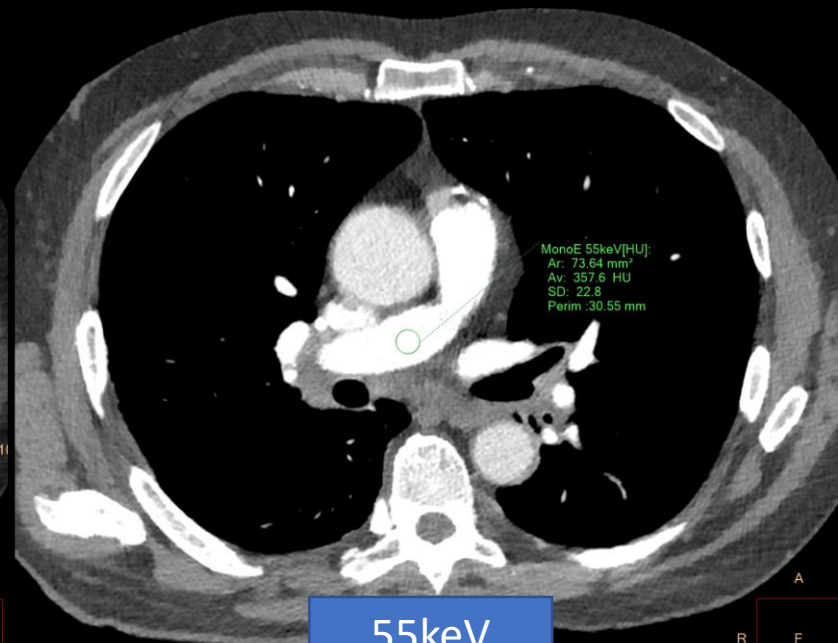
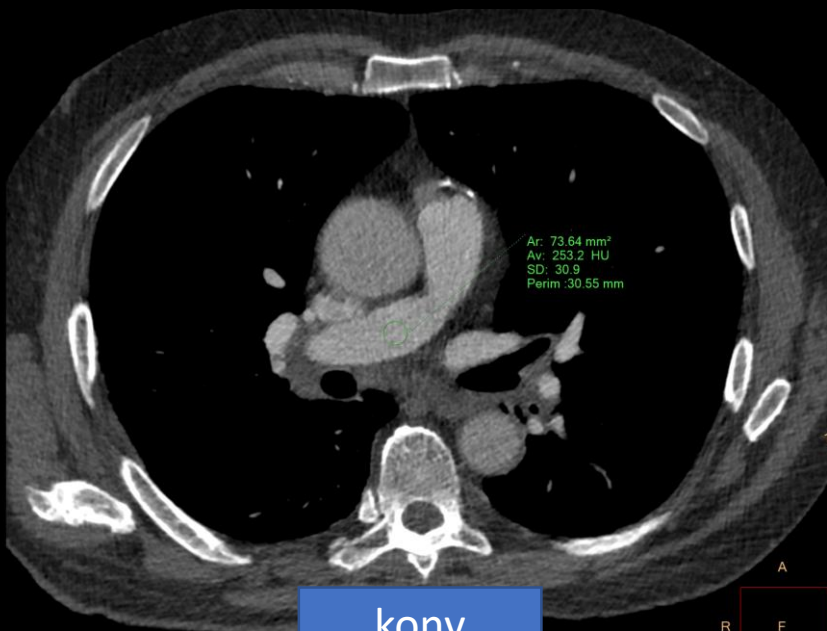


Conclusion: EAT attenuation and FAI measurements using PCD CT are impacted by keV level and contrast enhancement. Use of 70 keV provides fat attenuation approximating conventional polychromatic measurements.

Real-life - Lungenembolie



Kontrastmittel		
Optiray 370	ml	Flow
KM	30	3
NaCl	50	3



Metal-Artefaktreduktion

VMI ↑

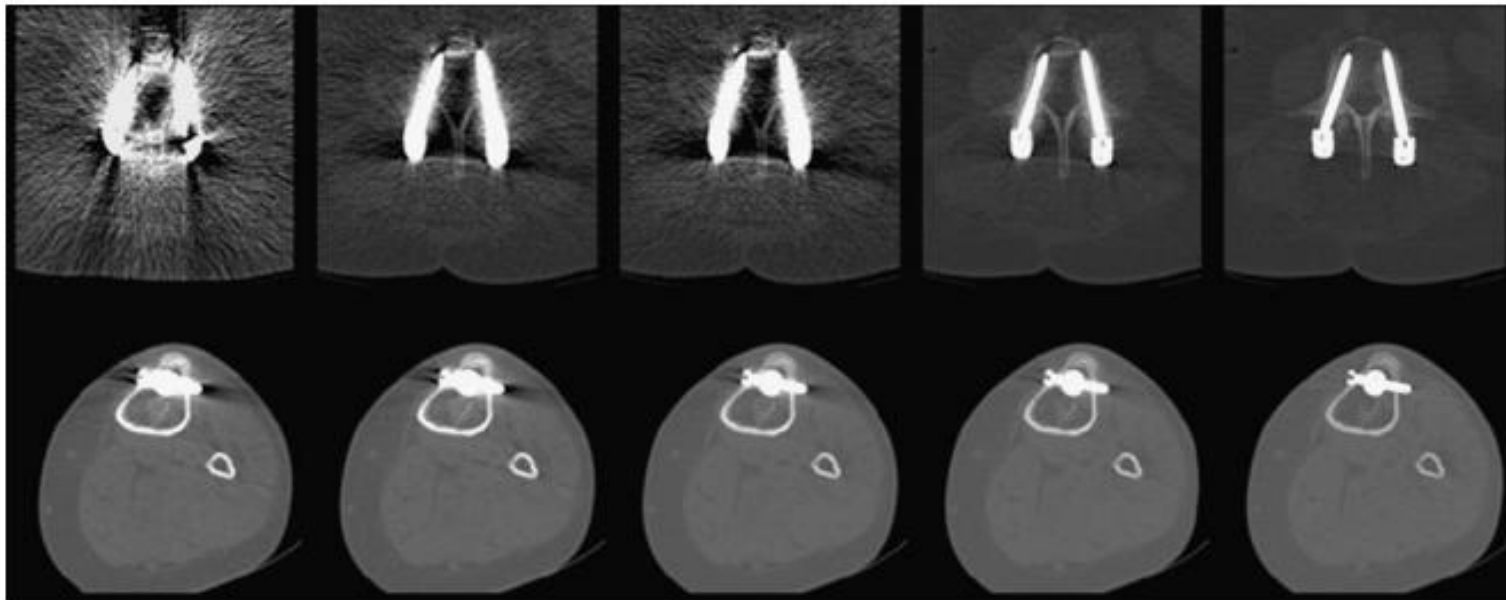
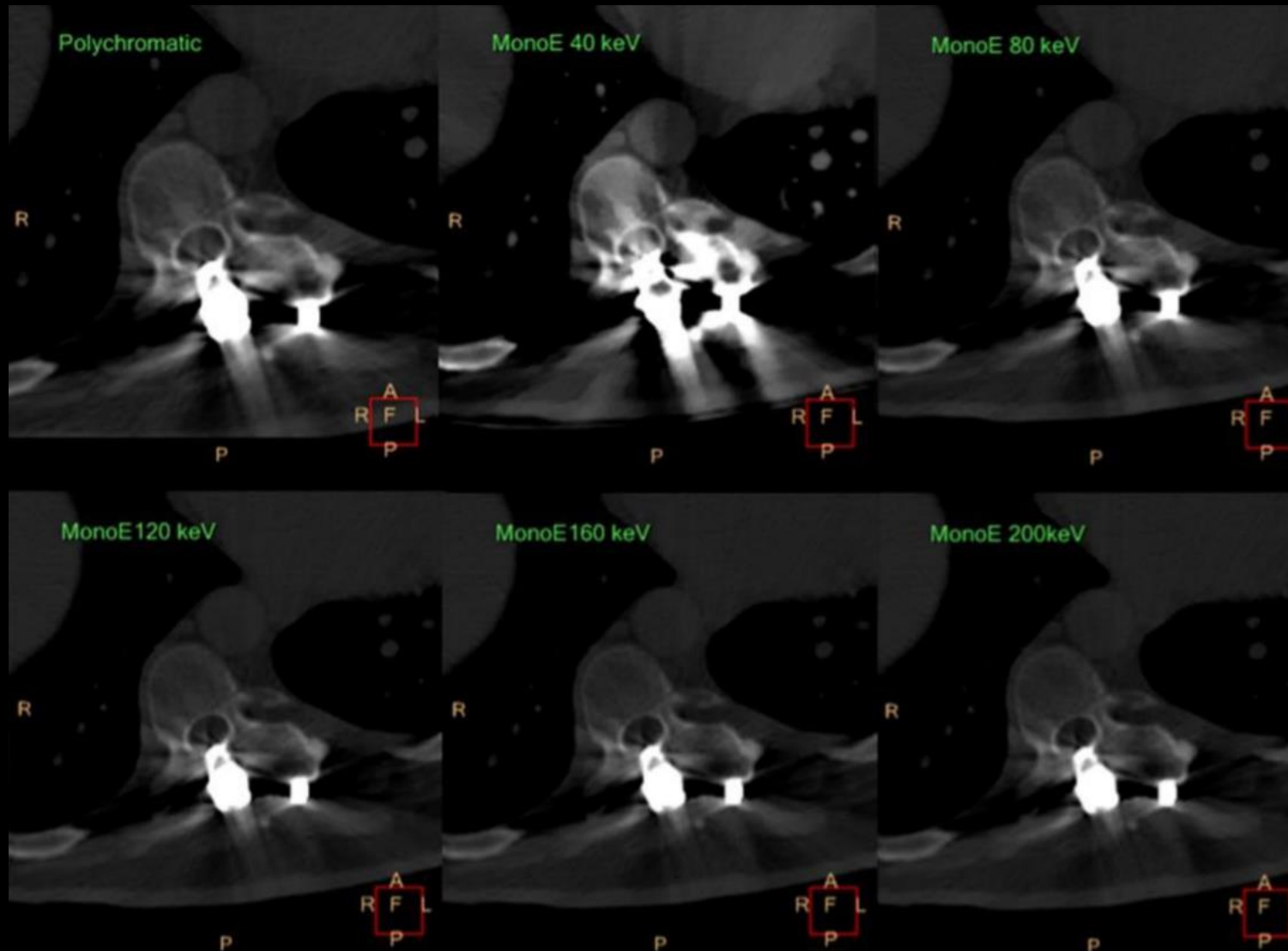


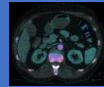
Fig. 1 Two sets of images showing screws in the spine and in the tibia reconstructed at 64, 69, 88, 105 and an optimal keV setting (left to right). Note that the spinal canal the thin layer of bone covering the

left screw are only discernible in the two reconstructions at the highest energy. Similarly, the screw in the tibia is optimally depicted in the rightmost image

Metal-Artefaktreduktion



Dual-energy / Spektral-CT



Iod

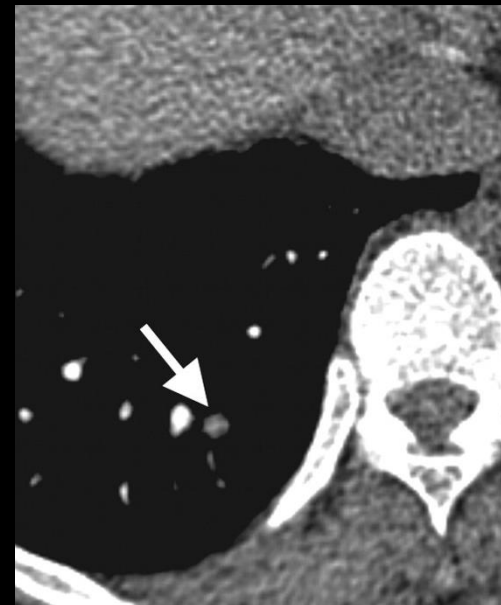
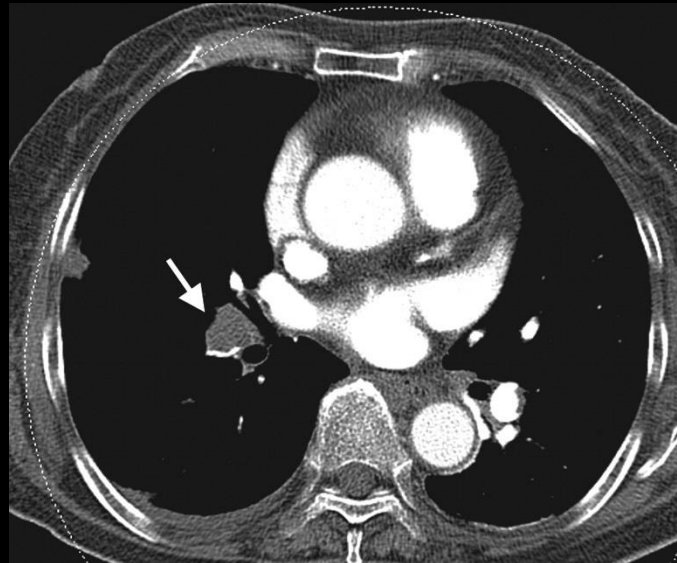
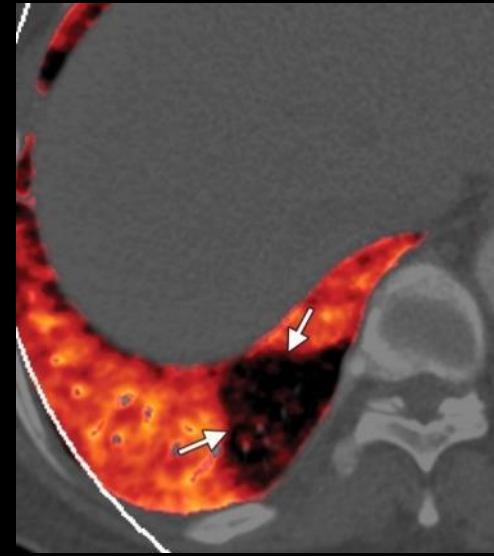
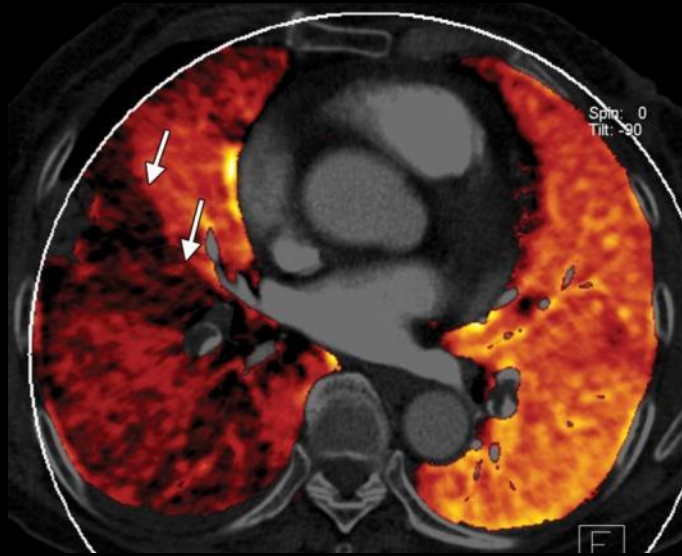


VMI

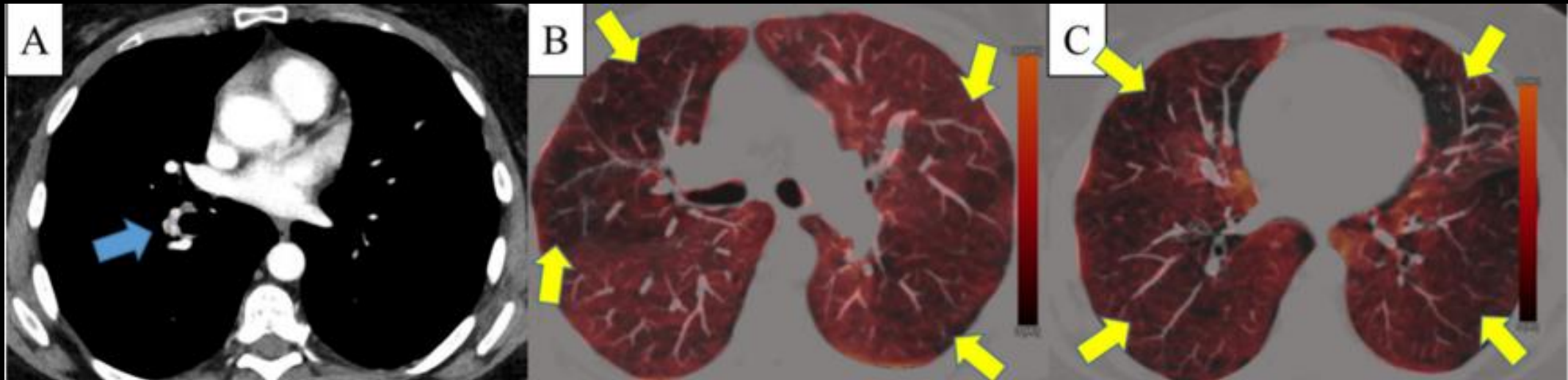


Konventionell

Lungen-Perfusion



Lungen-Perfusion

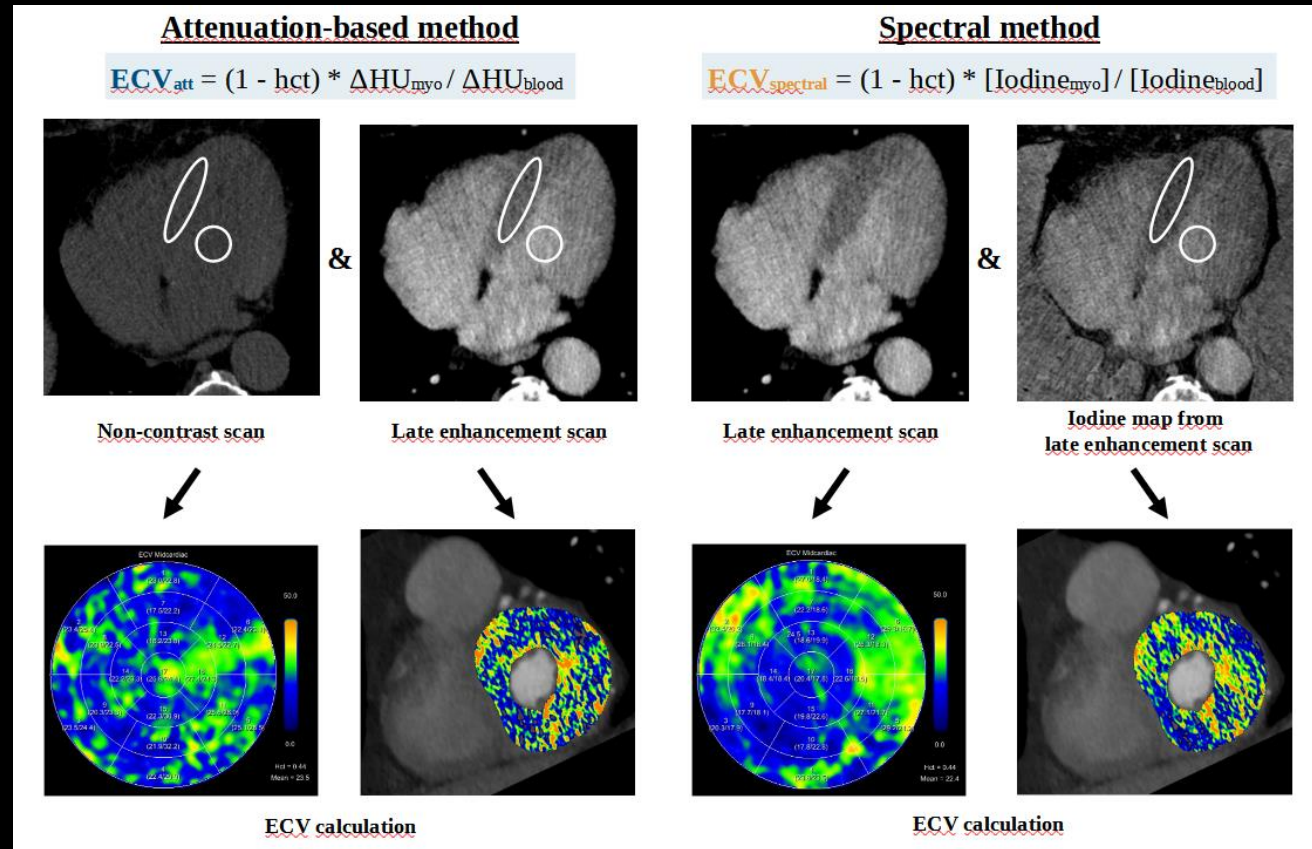


Myokardiales late enhancement



Myocardial extracellular volume quantification with computed tomography—current status and future outlook

Giulia Cundari^{1,2}, Nicola Galea², Victor Mergen¹, Hatem Alkadh^{1*} and Matthias Eberhard^{1,3}

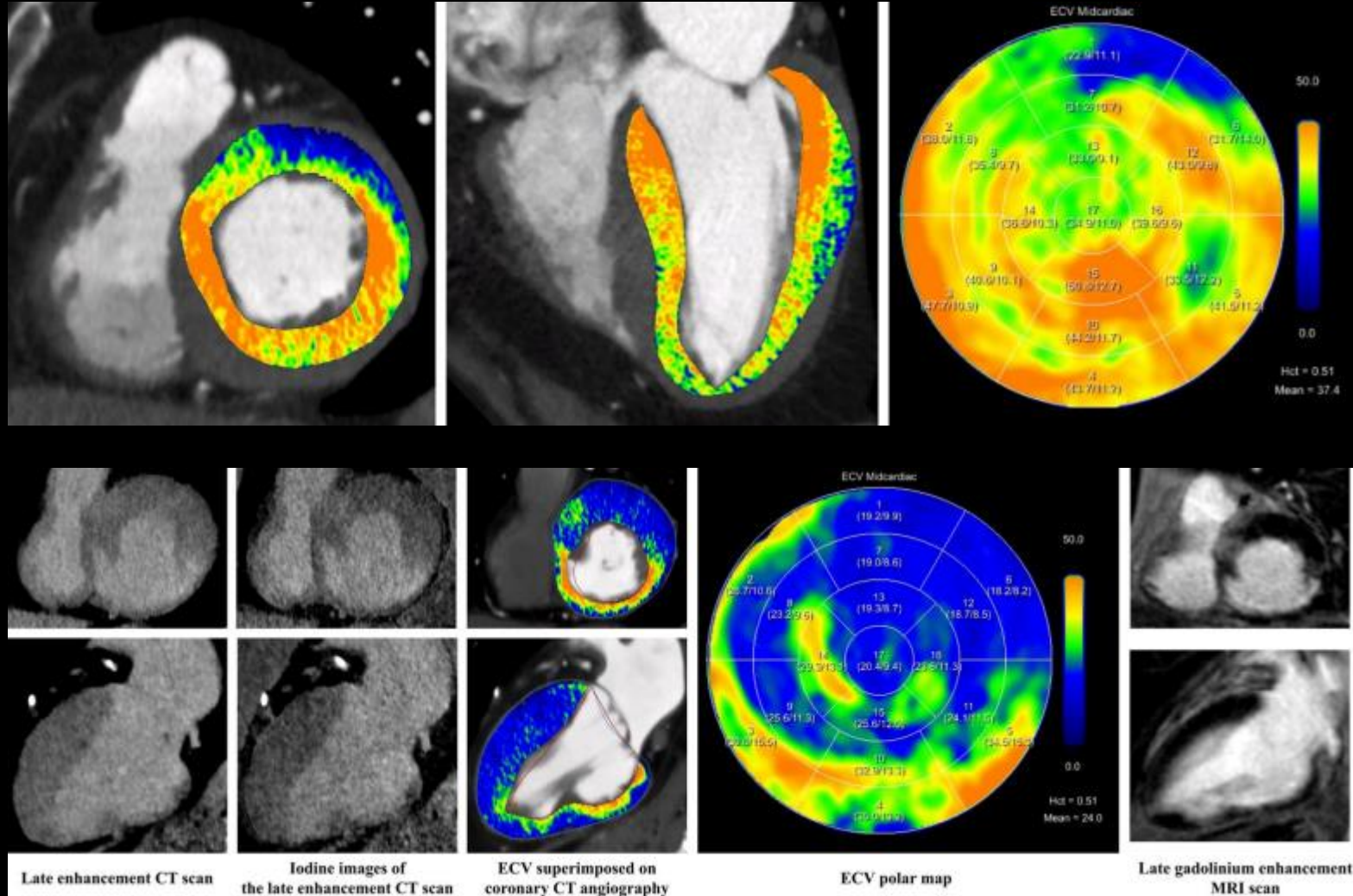


Myokardiales late enhancement

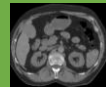


Myocardial extracellular volume quantification with computed tomography—current status and future outlook

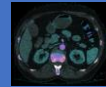
Giulia Cundari^{1,2}, Nicola Galea², Victor Mergen¹, Hatem Alkadh^{1*} and Matthias Eberhard^{1,3}



Dual-energy / Spektral-CT



VNC



Iod

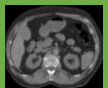
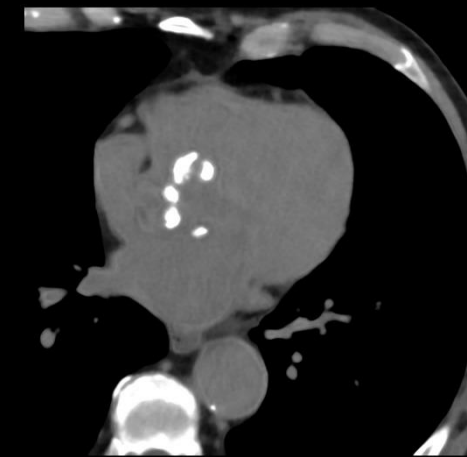
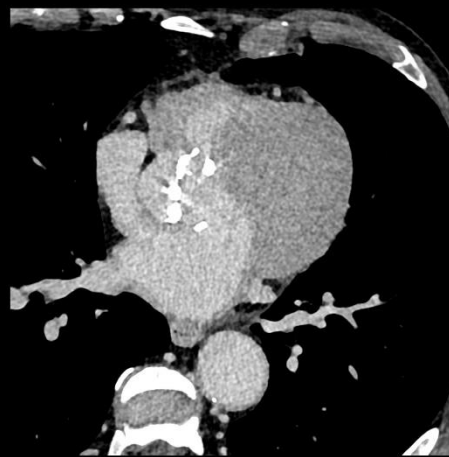
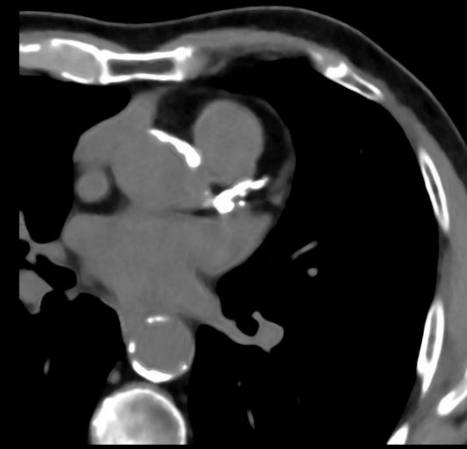


VMI



Konventionell

Pure Calcium – Dual-energy-basierte Iod-Subtraktion



VNC

TNC

LE

VNI

Radiology: Cardiothoracic Imaging

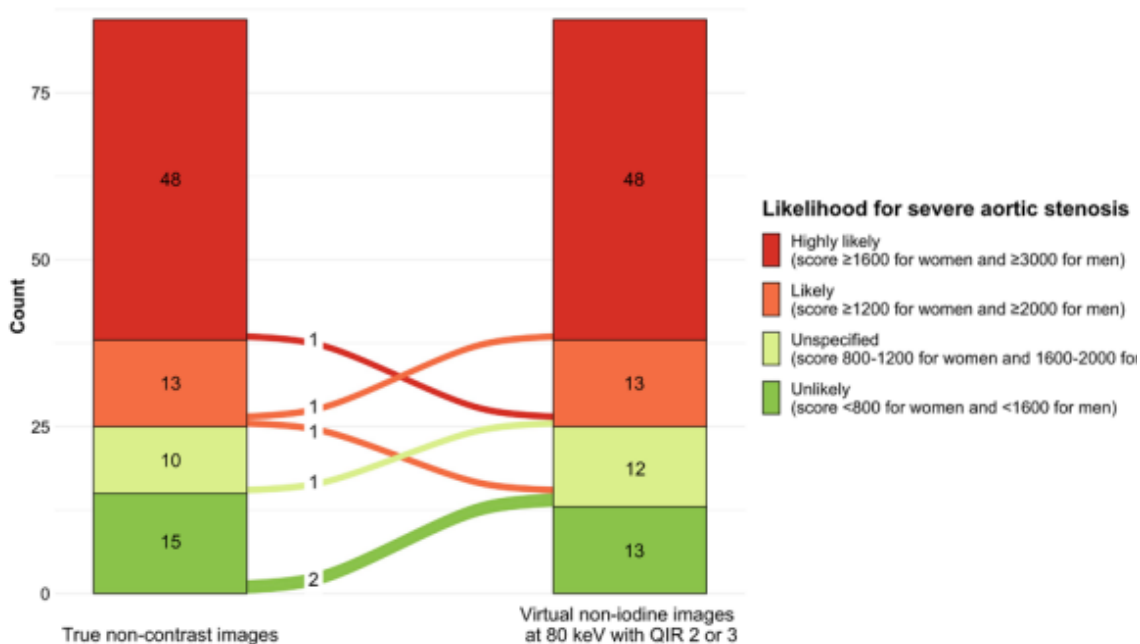
ORIGINAL RESEARCH

Cardiac Virtual Noncontrast Images for Calcium Quantification with Photon-counting Detector CT

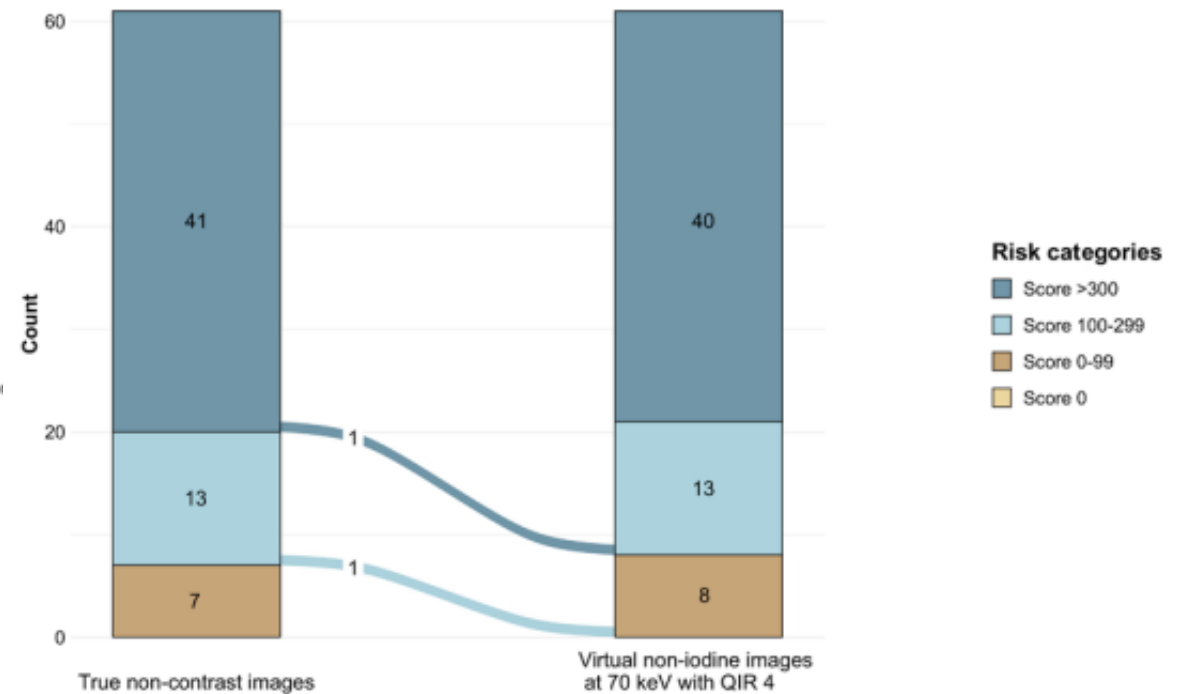
Victor Merges, MD • Sadaf Ghossein, BMed • Thomas Sartoretti, BMed • Robert Mankas, MD • André Ender, MD • Albert M. Klotz, MD • Hani Alkadhi, MD, MPH, EBCR • Matthias Eberhard, MD, EBCR

Pure Calcium – Dual-energy-basierte Iod-Subtraktion

Aortic valve calcification categories



Coronary artery calcification categories

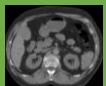


Radiology: Cardiothoracic Imaging

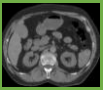
ORIGINAL RESEARCH

Cardiac Virtual Noncontrast Images for Calcium Quantification with Photon-counting Detector CT

Victor Mergen, MD • Sadaf Ghouse, BMed • Thomas Sartoretti, BMed • Robert Manka, MD • André Euler, MD • Albert M. Kasel, MD • Hatem Alkadhi, MD, MPH, EBCR • Matthias Eberhard, MD, EBCR

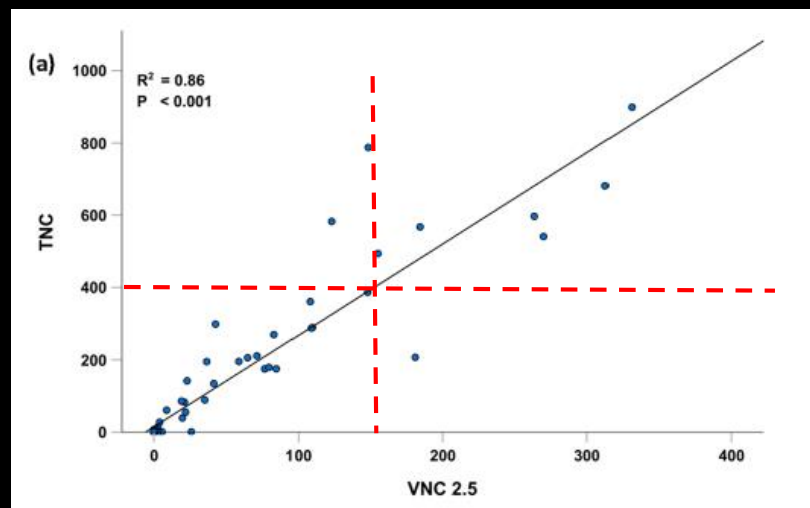
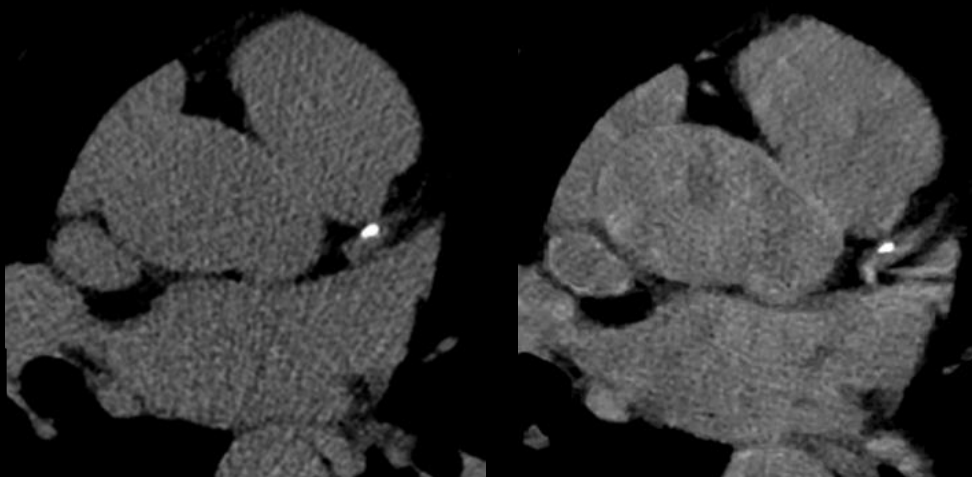
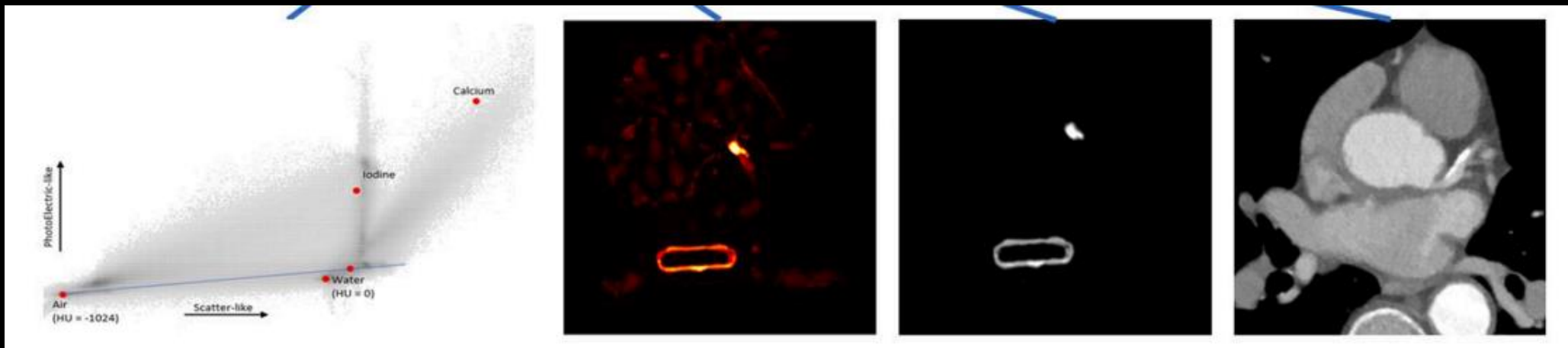


VNC

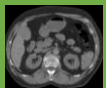
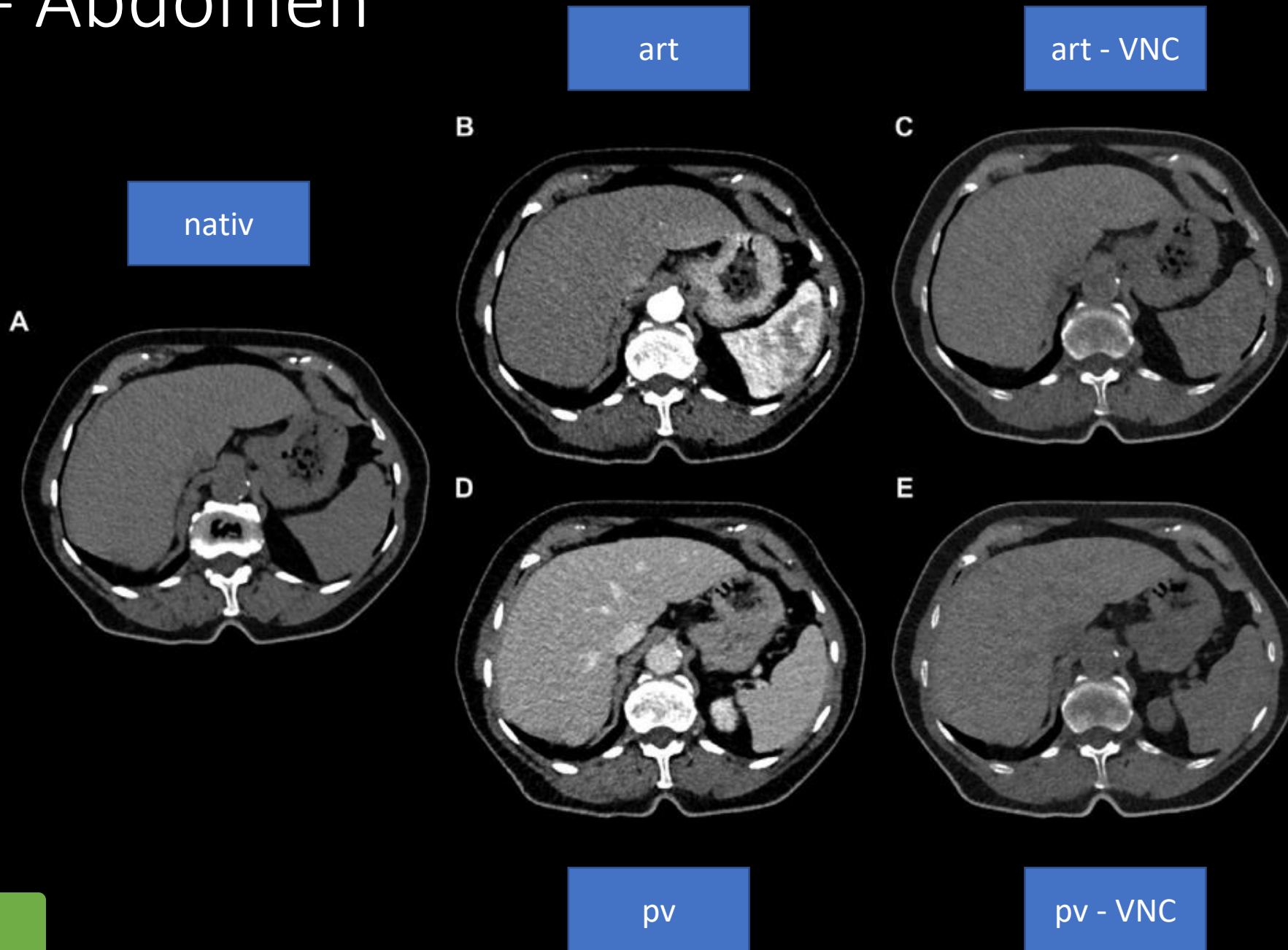


Coronary calcium scoring using virtual non-contrast reconstructions on a dual-layer spectral CT system: Feasibility in the clinical practice

I.L. Langenbach^{a,b,*}, H. Wienemann^c, K. Klein^a, J.E. Scholtz^d, L. Pennig^a, E. Langzam^e, G. Pahn^f, J.A. Holz^g, D. Maintz^a, C.P. Naehle^{a,h}, M.C. Langenbach^{a,b}

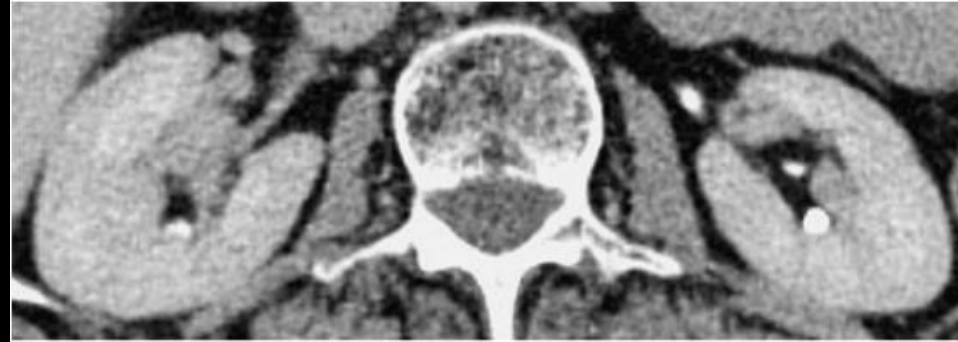


VNC - Abdomen

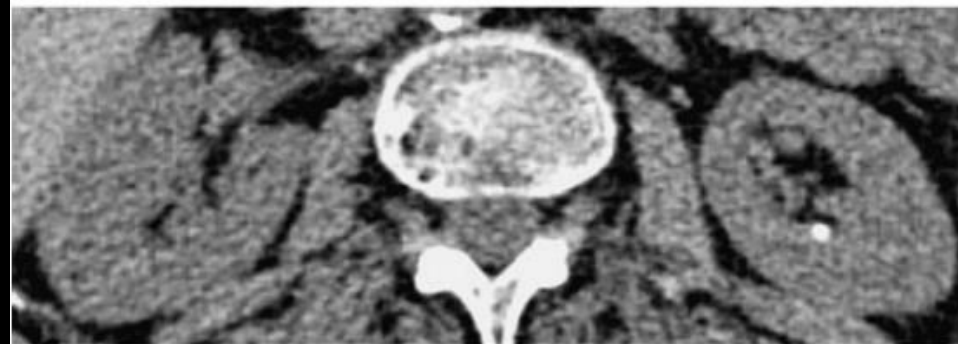


VNC

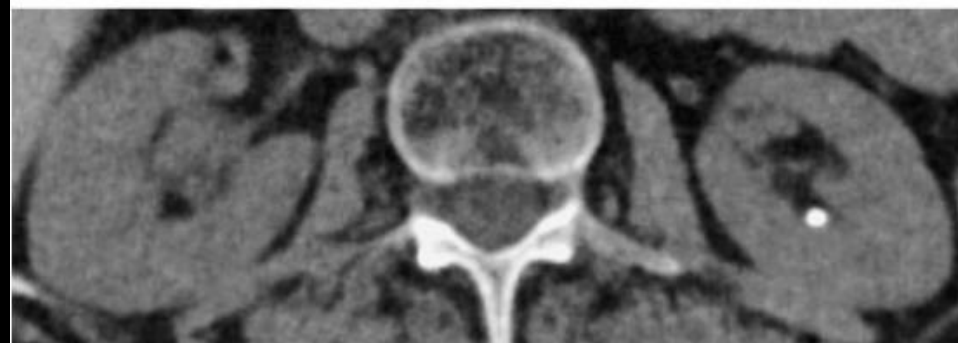
Jodsubtraktion – *virtuell* native Bilder



Split-bolus CT
dual-energy

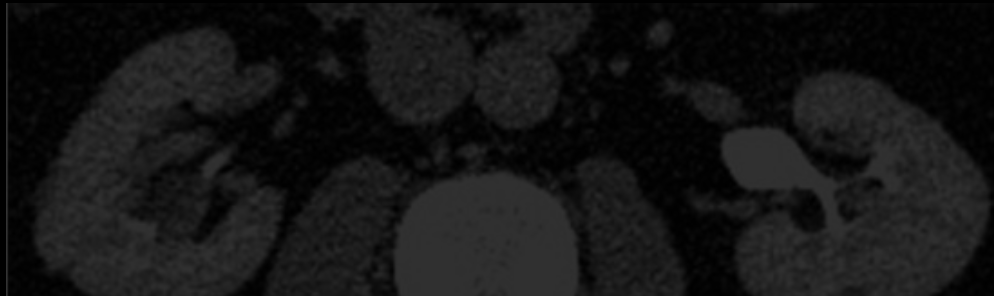


standard
nativ



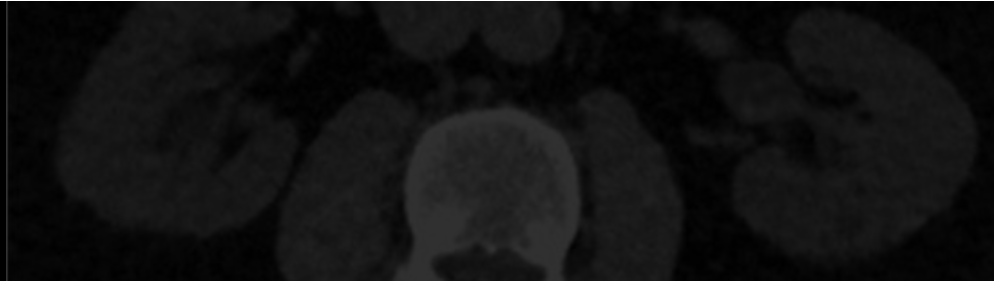
virtuell
nativ

Jodsubtraktion – *virtuell* native Bilder



Split-bolus CT
dual-energy

In conclusion—while the combination of a split-bolus contrast injection protocol and reconstruction of VNEI from DECT urography was feasible in 94% of patients and improved when applying the 100/140 kVp tube voltage setting—a considerable number of urinary stones smaller than 4 mm were missed on VNEI, thus limiting its use as a standard tool in clinical routine.



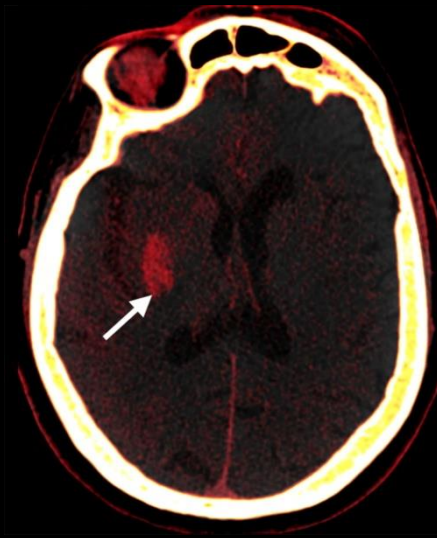
virtuell
nativ

dual-energy CT: Unterscheidung *Jod* vs *Blut*

Schädel CT 30 min. nach i.a. Lyse (mit i.a. KM-Gabe)



standard CT



Jodbild



virtuell nativ

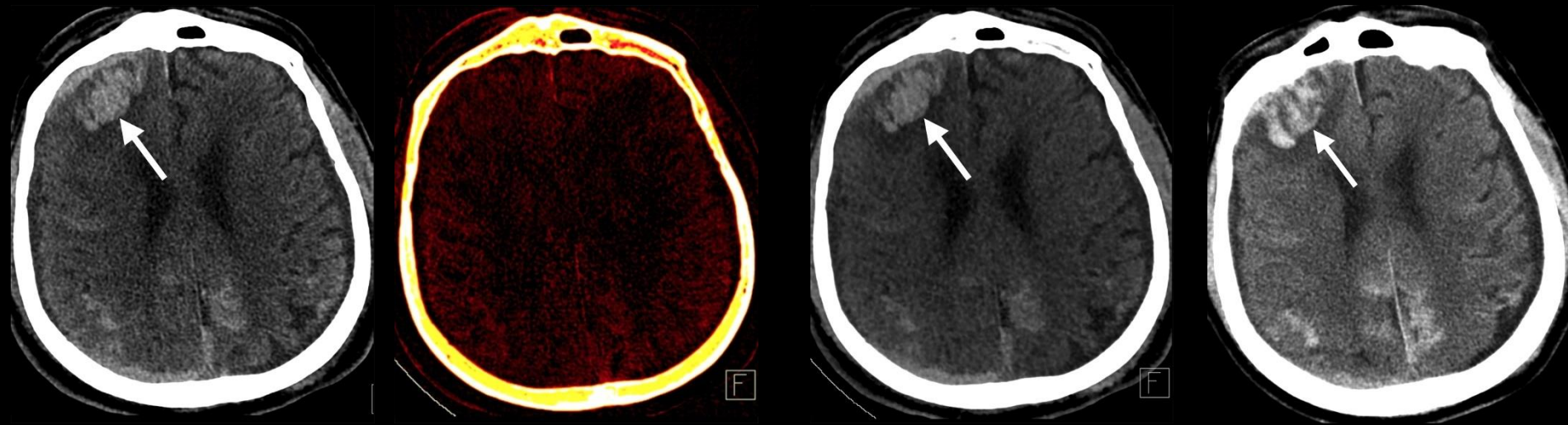


follow-up

= Jodextravasation

dual-energy CT: Unterscheidung *Jod* vs *Blut*

Schädel CT 30 min. nach i.a. Lyse (mit i.a. KM-Gabe)



standard CT

Jodbild

virtuell nativ

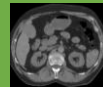
follow-up

= Einblutung

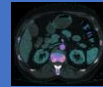
Dual-energy / Spektral-CT



Harnsäure



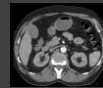
VNC



Iod




VMI



Konventionell

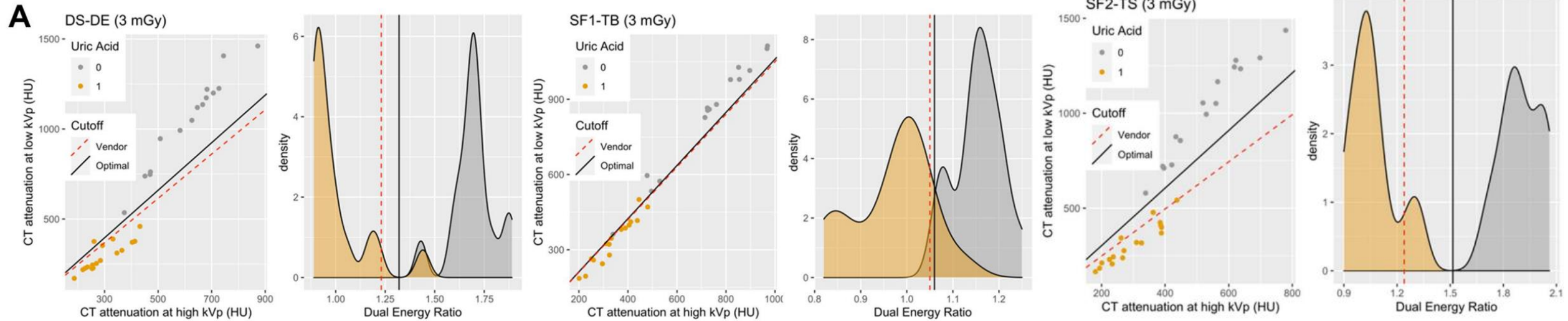
Kidney Stones

Low-dose dual-energy CT for stone characterization: a systematic comparison of two generations of split-filter single-source and dual-source dual-energy CT

Dominik Nakhostin¹  · Thomas Sartoretti¹ · Matthias Eberhard¹ · Bernhard Krauss² · Daniel Müller³ · Hatem Alkadhi¹ · André Euler¹



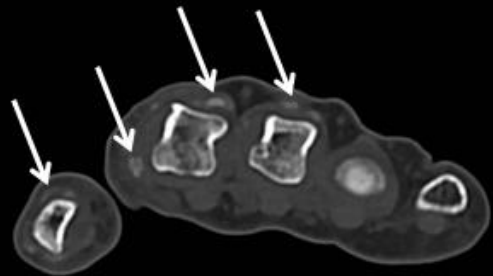
Nierensteine



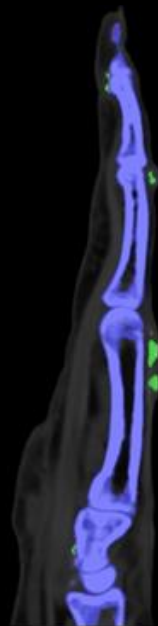
Low-dose dual-energy CT for stone characterization: a systematic comparison of two generations of split-filter single-source and dual-source dual-energy CT

Dominik Nakhostin¹ · Thomas Sartoretti¹ · Matthias Eberhard¹ · Bernhard Krauss² · Daniel Müller³ · Hatem Alkadhi¹ · André Euler¹

DECT: Charakterisierung von Weichteilverkalkungen



A



B



C

Dual-energy / Spektral-CT



Ca-Suppression



Harnsäure



VNC



Iod



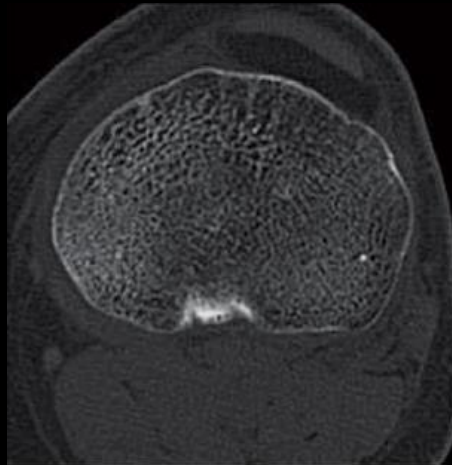
VMI



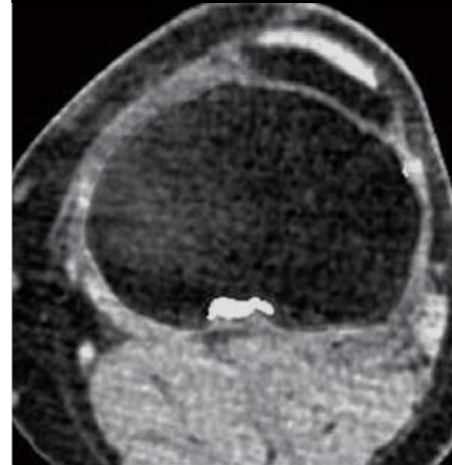
Konventionell

DECT: Calcium-Subtraktion

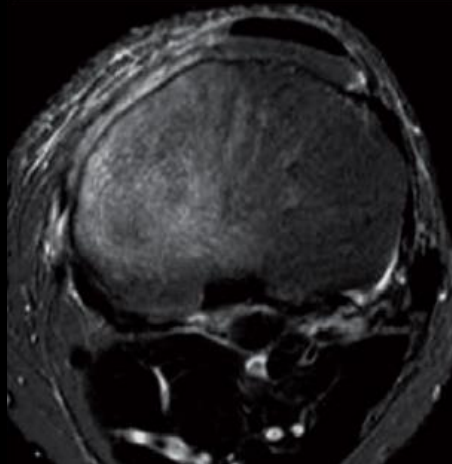
single-energy CT



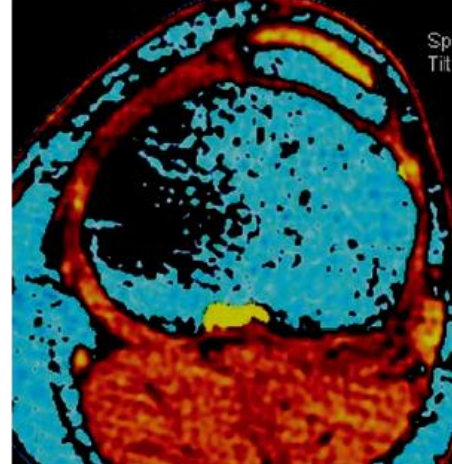
dual-energy CT
non-calcium



T2w MRT

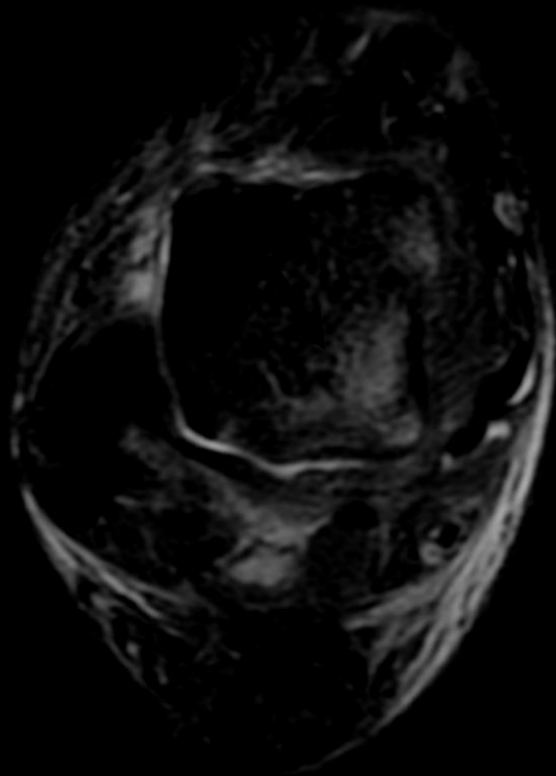


dual-energy CT
color-coded

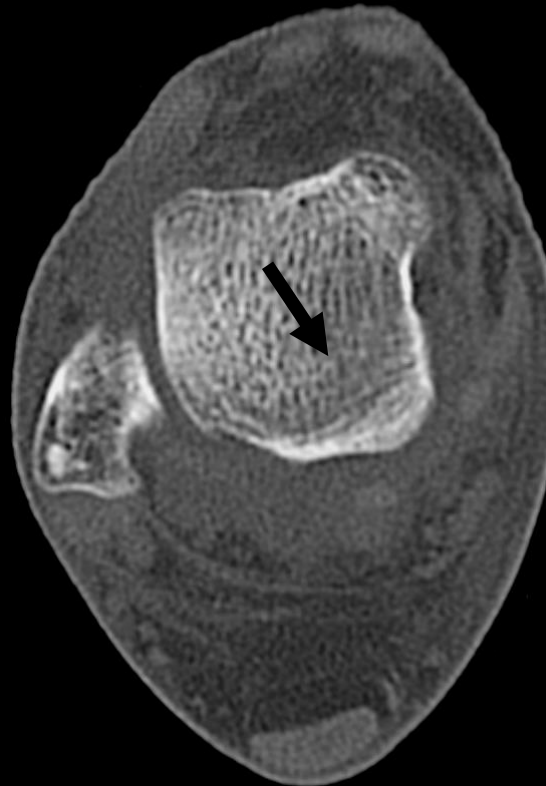


DECT: Calcium-Subtraktion

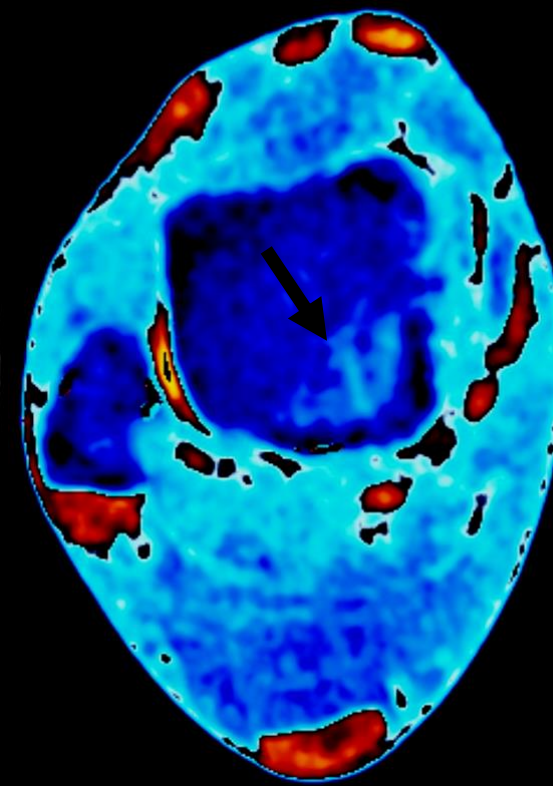
T2w MR



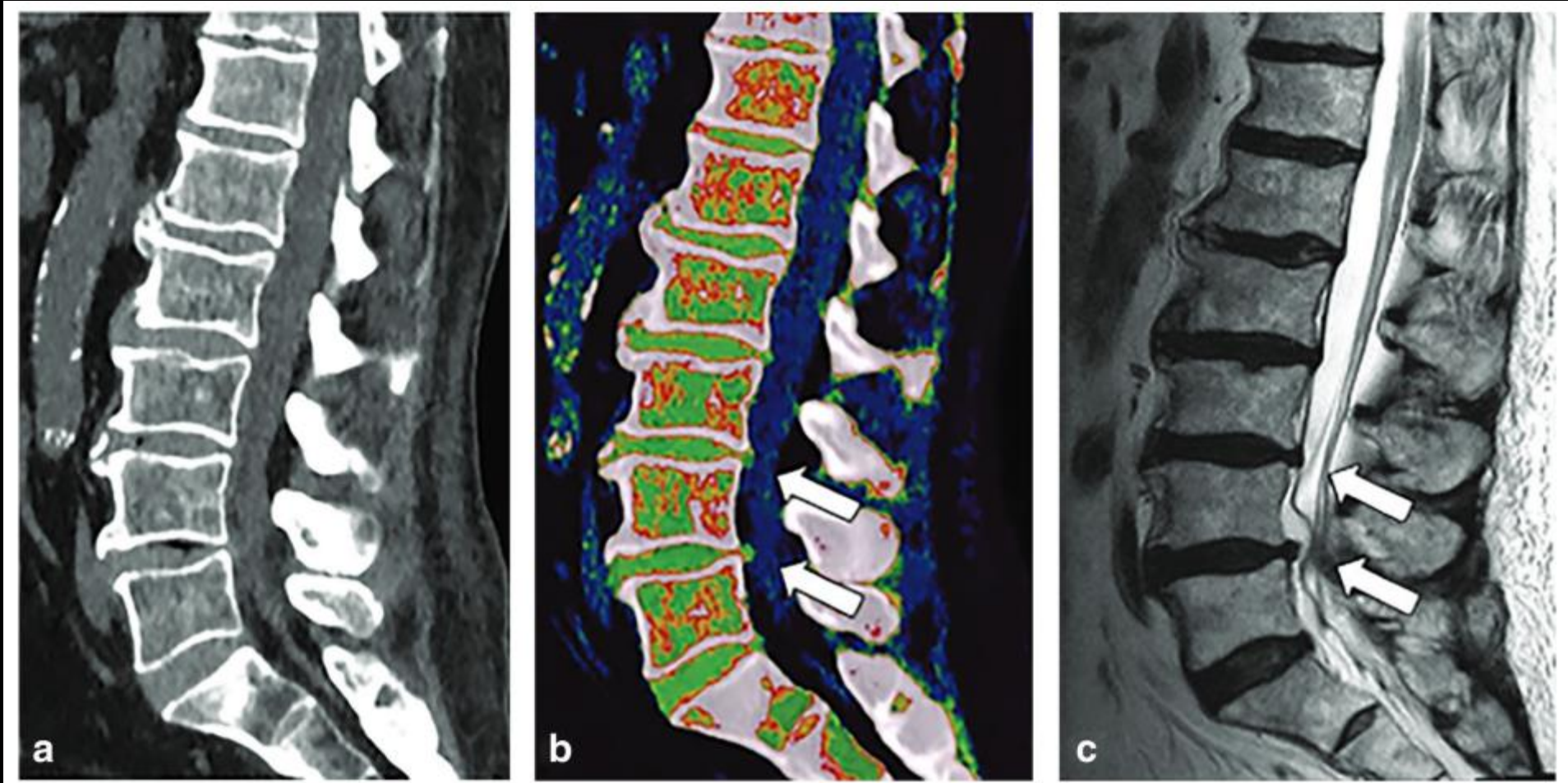
single-energy CT



dual-energy CT



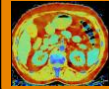
DECT: Calcium-Subtraktion



Dual-energy / Spektral-CT



Elektronendichte



Z eff



Ca-Suppression



Harnsäure



VNC



Iod



VMI



Konventionell

Zusammenfassung

- Es gibt mehrere unterschiedliche Techniken für die Dual-energy CT Bildgebung
- Dual-energy CT ermöglicht die Differenzierung und Charakterisierung einzelner Materialien
- Das Post-processing von Dual-energy CT-Daten kann in unterschiedlichen Bereichen einen Mehrwert bieten, z.B. zur Reduktion von KM oder zur Vermeidung zusätzlicher Scans oder Untersuchungen



Herzlichen Dank für Eure Aufmerksamkeit!

matthias.eberhard@usz.ch

Danke an Prof. Hatem Alkadhi für die Überlassung einiger Folien

