

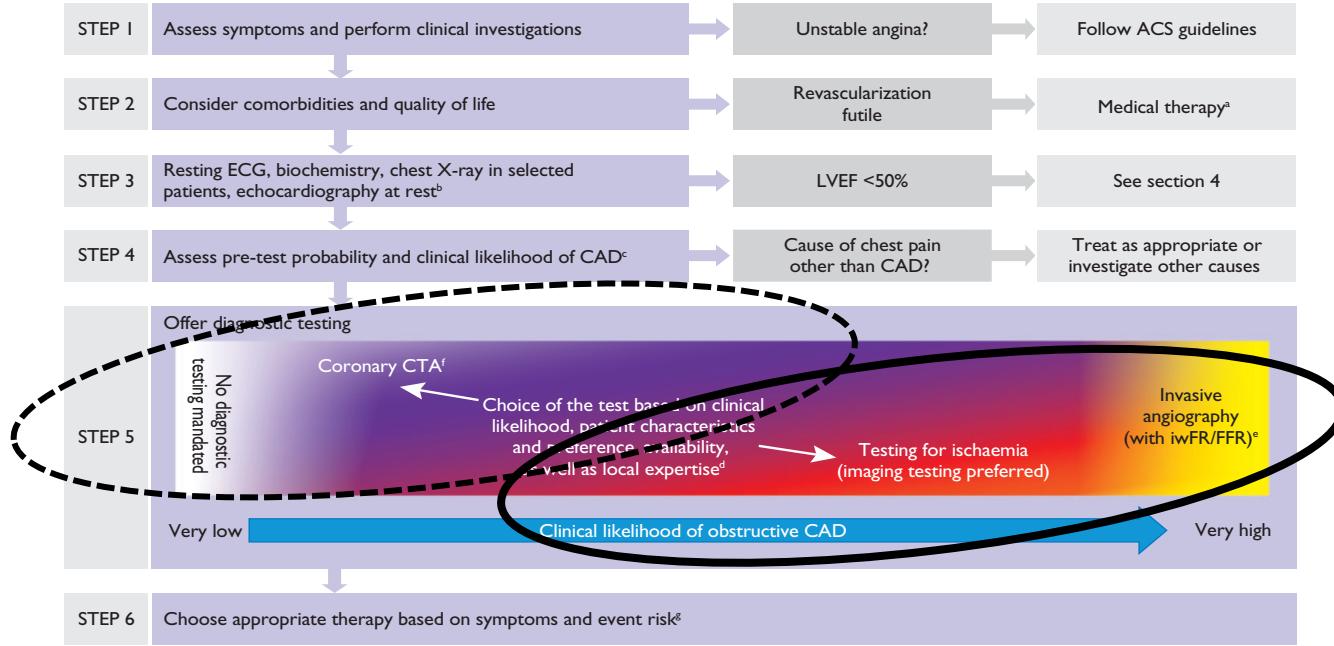
Scanner cardiaque de demain : haute résolution, comptage photonique, intelligence artificielle

JFR 2021

Présentateur : Salim Si-Mohamed, MD, PhD

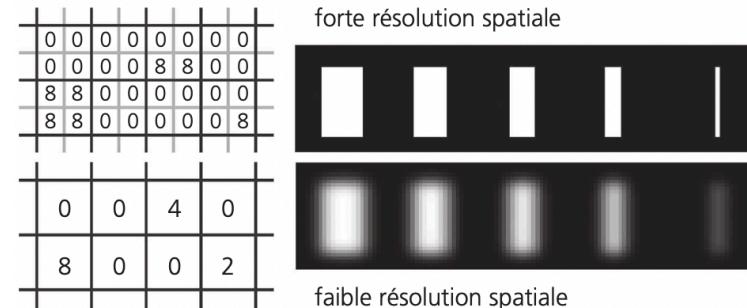
Salim Si-Mohamed, Philippe Douek
Imagerie, Hôpital cardiothoracique et vasculaire Louis Pradel
Laboratoire CREATIS, Equipe cardiovasculaire
CNRS – INSERM – Université Lyon 1





Limitations importantes en scanner conventionnel

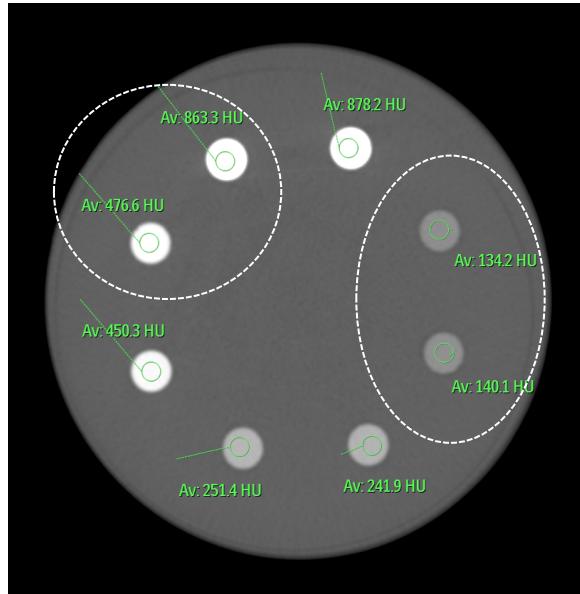
- Résolution spatiale
- Résolution en contraste
- Pas de quantification absolue
- Pas d'imagerie spécifique d'agents de contraste

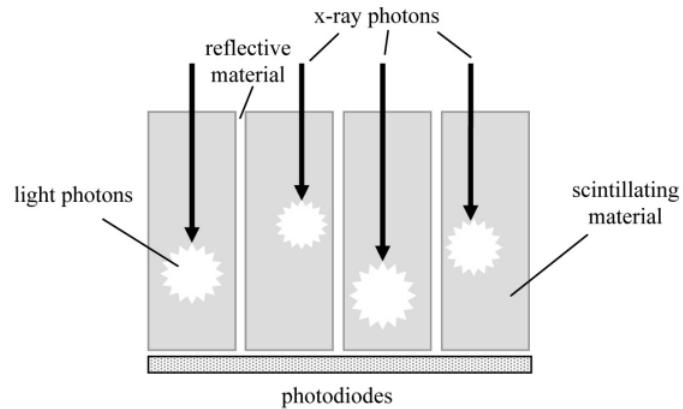


Durand et Blondieaux. Imagerie Médicale. Elsevier Masson. 2017

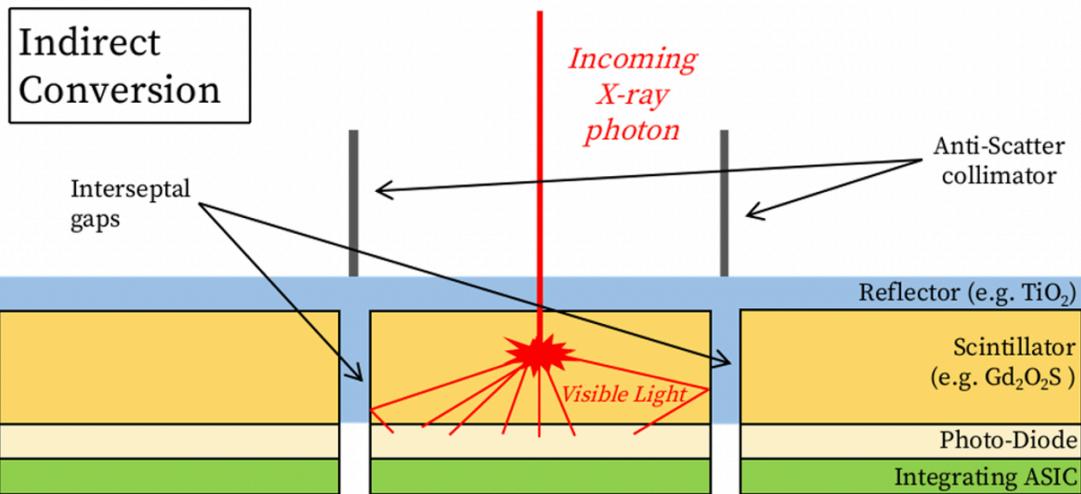
Limitations importantes en scanner conventionnel

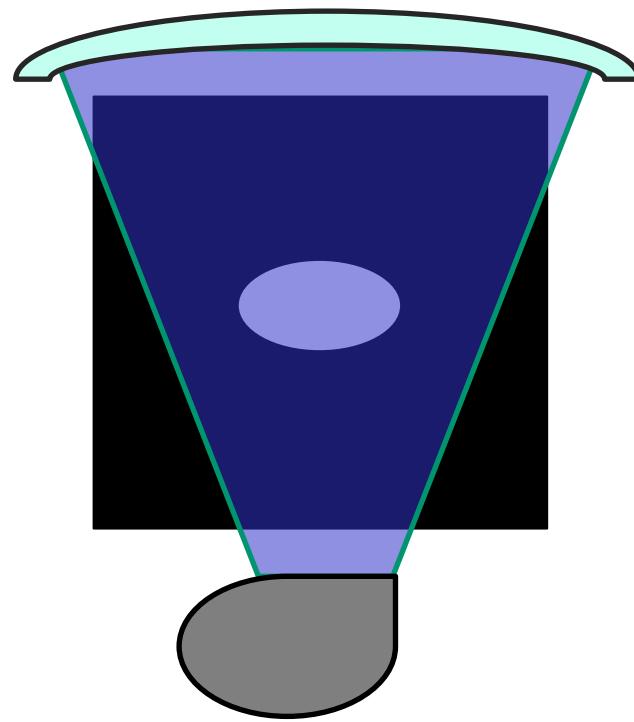
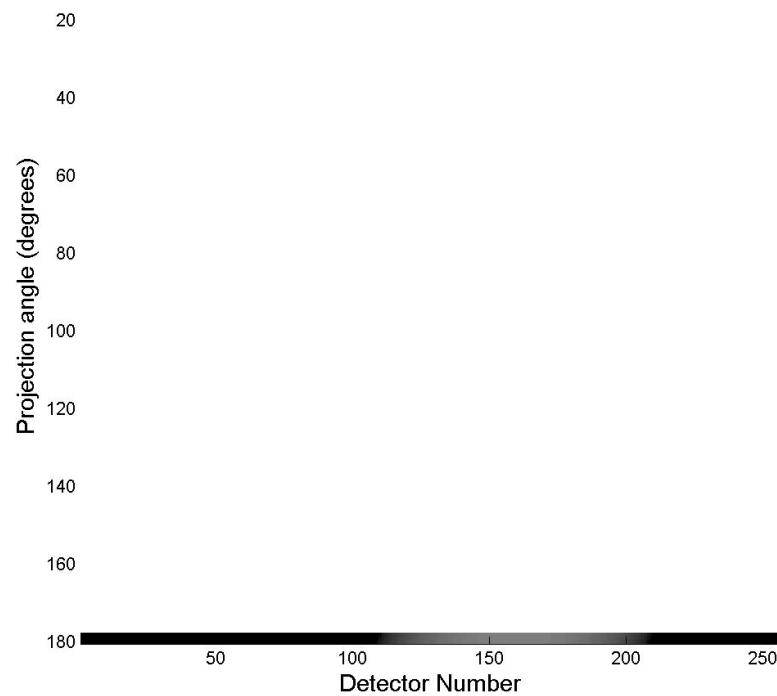
- Résolution spatiale
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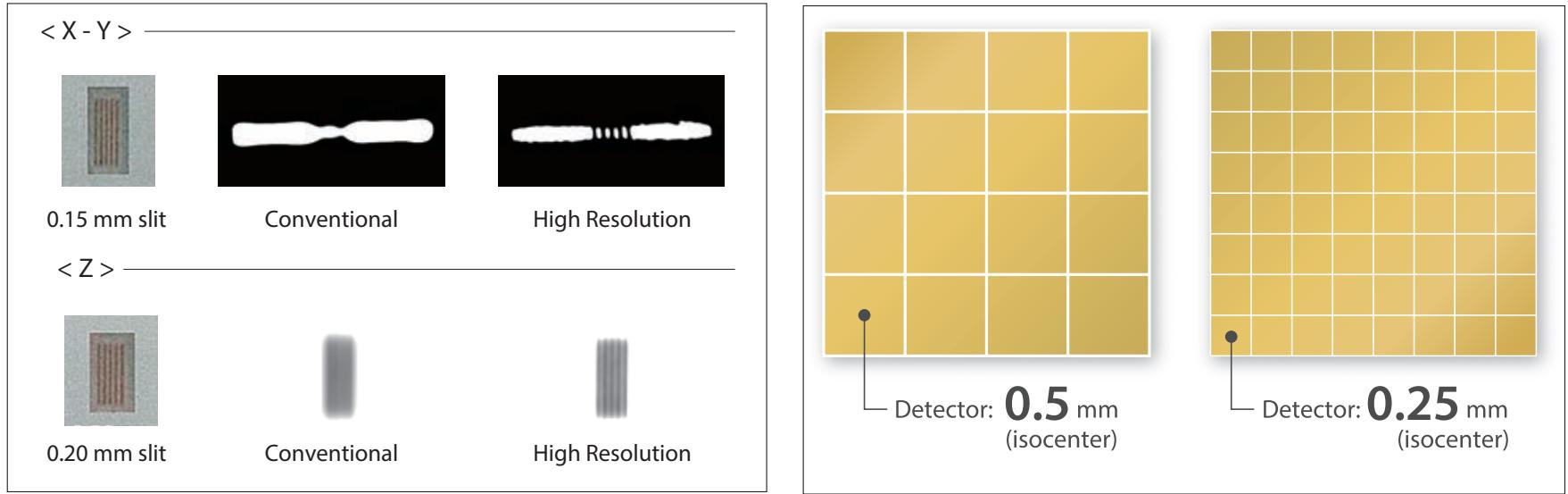


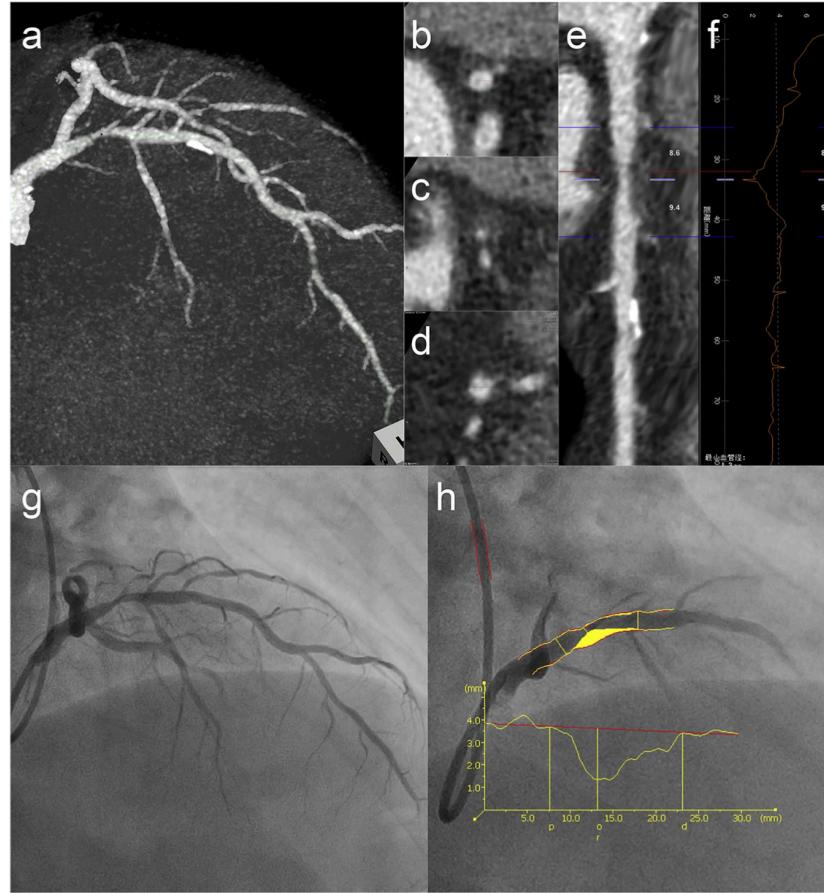


DéTECTEURS à intégrATION









Measurement of accuracy	Per-patient level (n = 38)	Per-vessel level (n = 113)	Per-segment level (n = 540)
True positive	32 (84)	49 (43)	62 (11)
True negative	4 (11)	50 (44)	458 (85)
False positive	2 (5)	12 (11)	17 (3)
False negative	0 (0)	2 (2)	3 (1)
% Sensitivity	100 (95–100)	96 (89–99)	95 (89–98)
% Specificity	67 (38–67)	81 (75–83)	96 (96–97)
% NPV	100 (57–100)	96 (89–99)	99 (98–100)
% PPV	94 (89–94)	80 (74–83)	79 (73–81)
% Accuracy	95 (86–95)	88 (81–90)	96 (95–97)
AUC	0.83 (0.53–0.96)	0.88 (0.81–0.93)	0.96 (0.92–0.98)

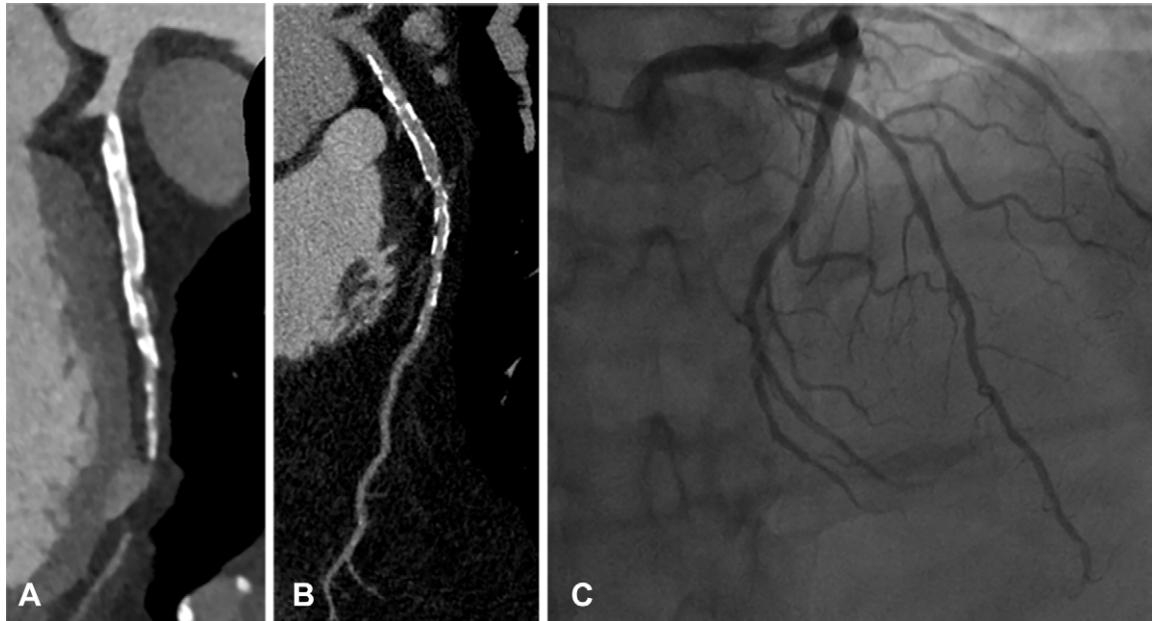


Table 3: Comparison of Stenosis Assessment by UHR-CT and Invasive Coronary Angiography on Vessel-level Analysis

UHR-CT Stenosis Assessment	Invasive Angiography Stenosis Assessment				
	<30%	30%–49%	50%–69%	≥70%	Total
<30%	18*	5	0	0	23
30%–49%	17	4*	3	1	25
50%–69%	1	2	6*	2	11
≥70%	0	4	4	19*	27
Total	36	15	13	22	86

Note.—Tabulated are the maximum coronary arterial lumen stenoses for the left main coronary artery, left anterior descending artery, left circumflex coronary artery, and right coronary artery for each patient using visual assessment with CT and with invasive angiography ($n = 36$).

*Agreement between the two modalities.

Se: 86% (95% CI: 65%, 97%)

Sp: 88% (95% CI: 77%, 95%) vs 56% dans CORE-64

Table 5

Radiation exposure for coronary computed tomography angiography (CCTA).

	Overall	Prospective ECG gating		Retrospective ECG gating (n = 1)
		35–80% RR interval (n = 6)	65–80% RR interval (n = 31)	
CTDI _{vol} , mGy	27 (14–78)	64 ± 12	27 ± 7	55
DLP, mGy cm	388 (208–1286)	925 ± 223	389 ± 93	802
Effective radiation dose, mSv	5.4 (2.9–18.0)	12.9 ± 3.1	5.4 ± 1.3	11.2

Collimation de 128 X 0.25

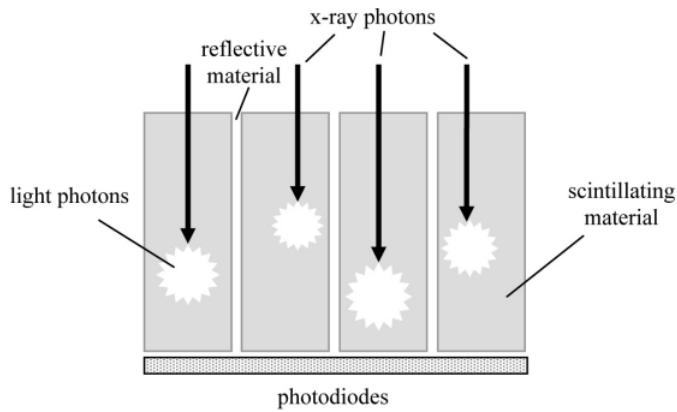
Takagi et al. Eur J Radiol. 2018

Mode prospectif 70-99%

Total CTDI (mGy)	146.4 (7.7)
Total DLP (mGy · cm)	678.5 (100.5)
Total effective radiation dose (mSv)†	11.4 (2.5)

Collimation de 160 X 0.25

Latina et al. Radiology. 2021



DéTECTEURS À INTÉGRATION

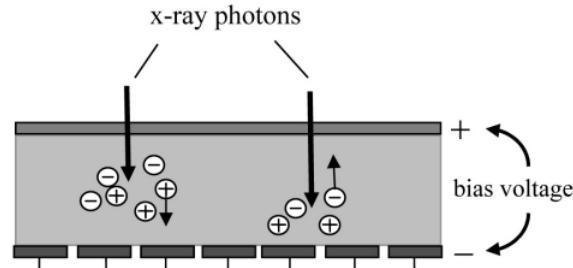


Figure 6.14 Schematic diagram of a semiconductor direct-conversion detector.

DéTECTEURS À COMPTAGE PHOTONIQUE

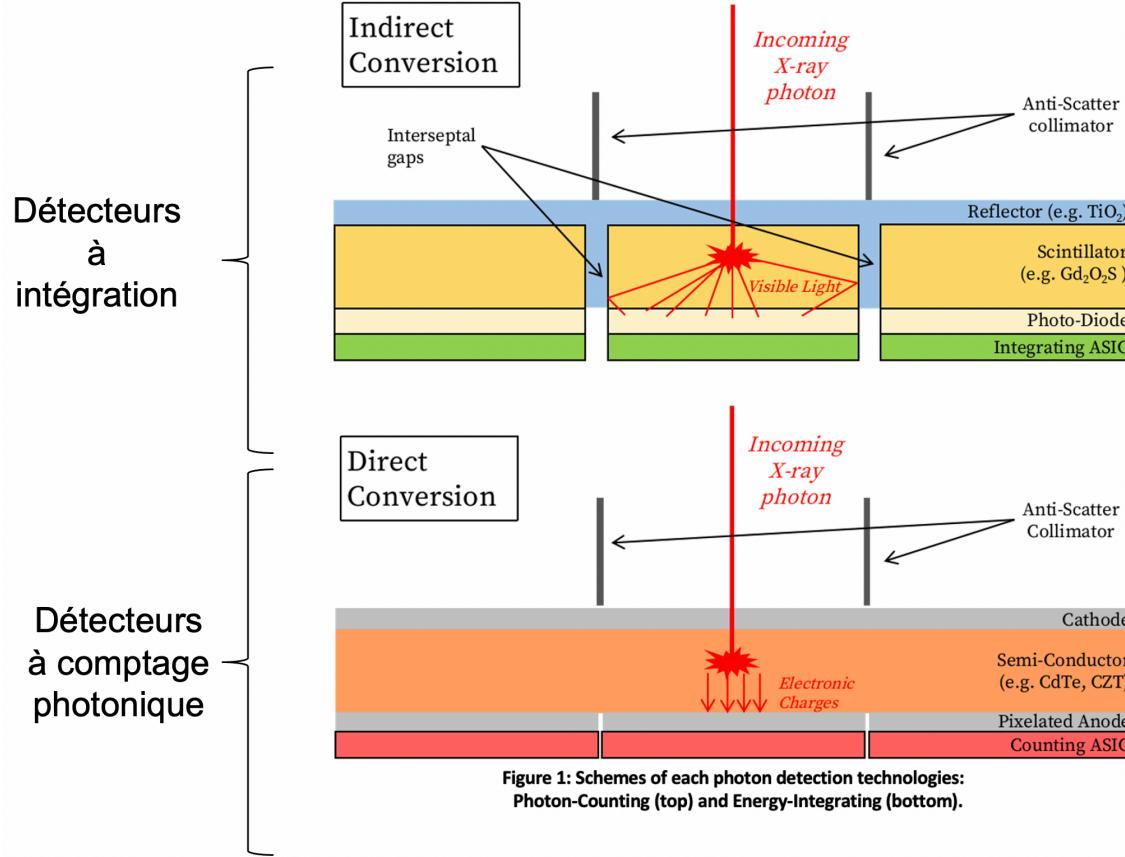
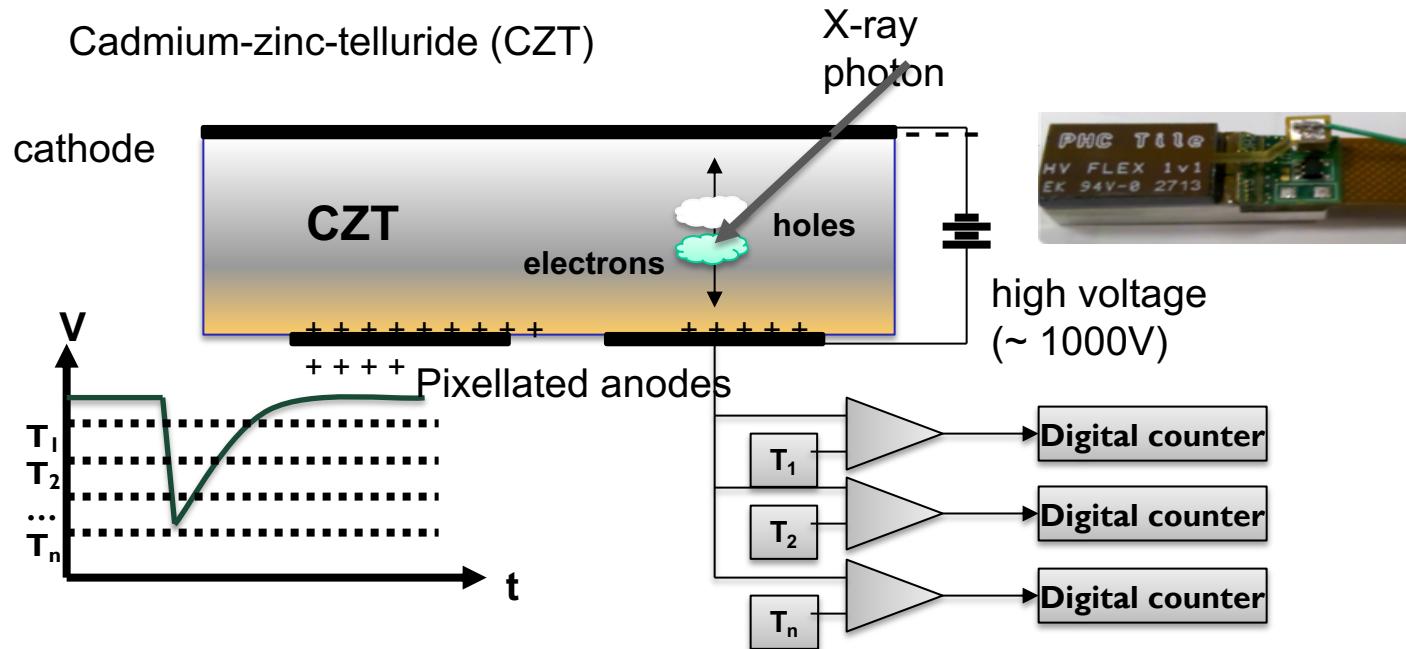
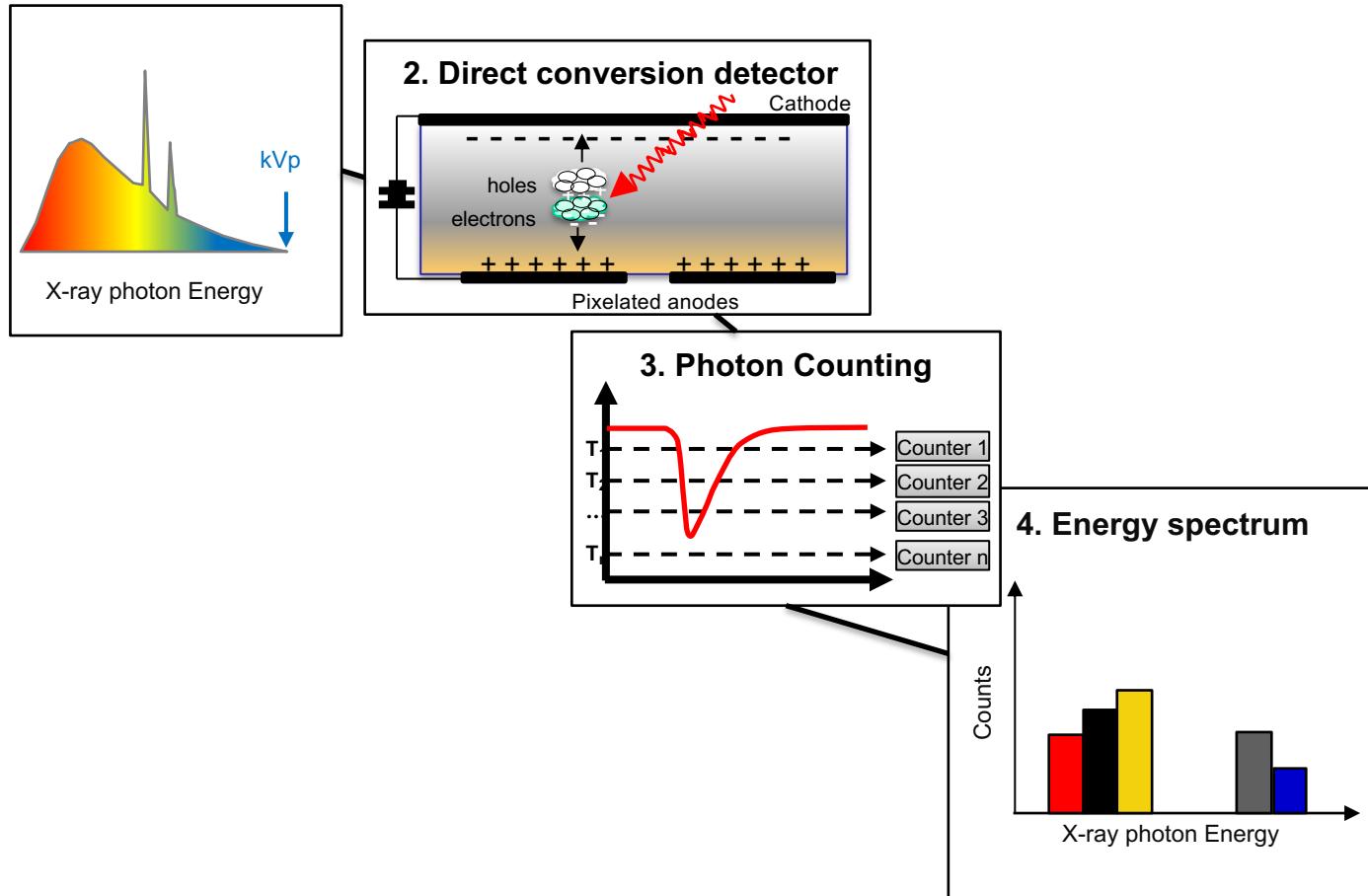


Figure 1: Schemes of each photon detection technologies:
Photon-Counting (top) and Energy-Integrating (bottom).





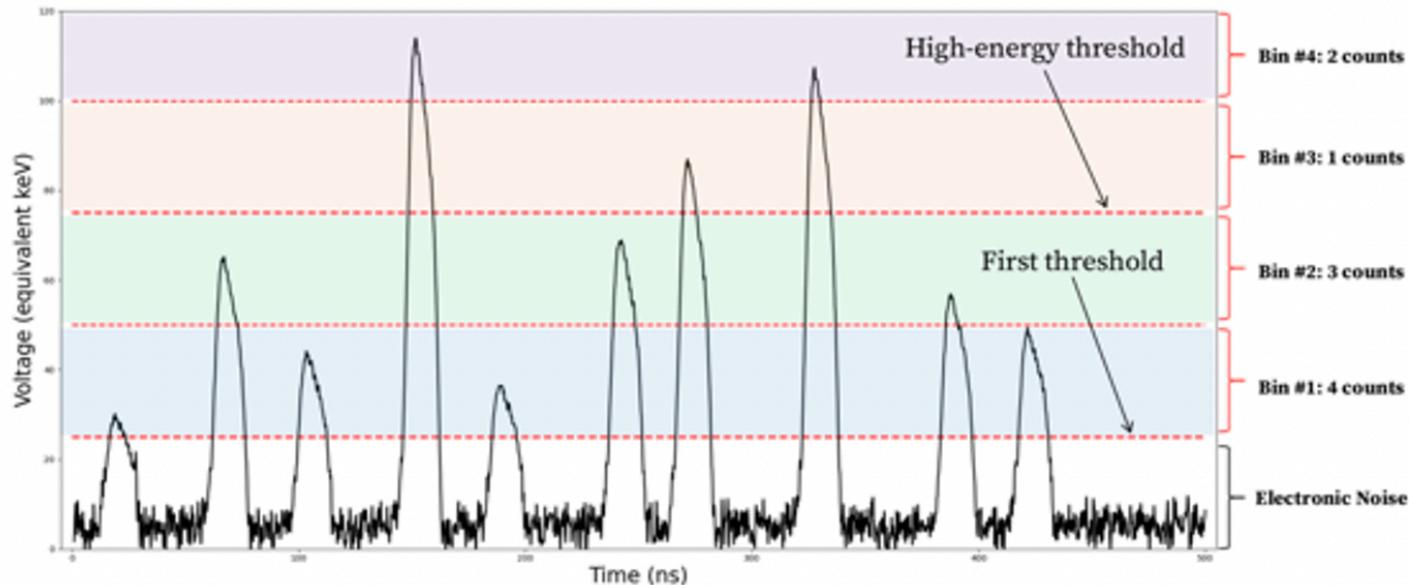
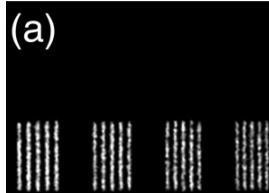


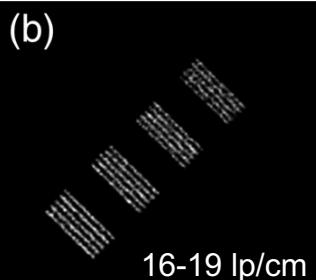
Figure 2. Example of a 500ns signal output of a PCD pixel.

PCCT



12-15 lp/cm

12 13 14 15



16-19 lp/cm

16 17 18 19

EID-CT



12-15 lp/cm



16-19 lp/cm

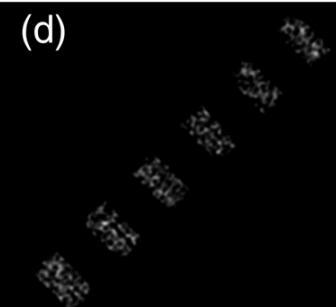
PCCT

(c)



20 21 22 23 24
20-24 lp/cm

(d)

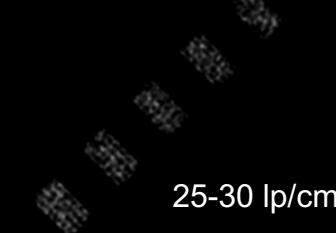


25 26 27 28 29 30
25-30 lp/cm

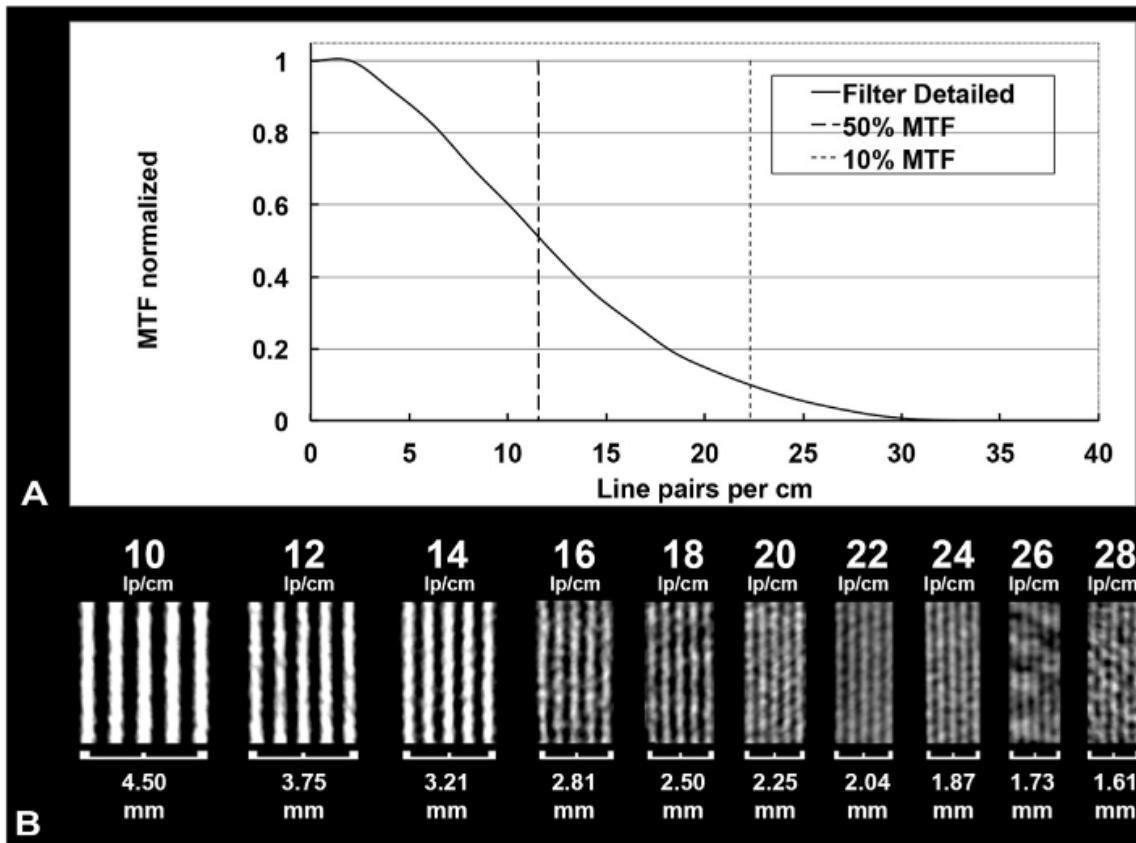
PCCT
Half-dose

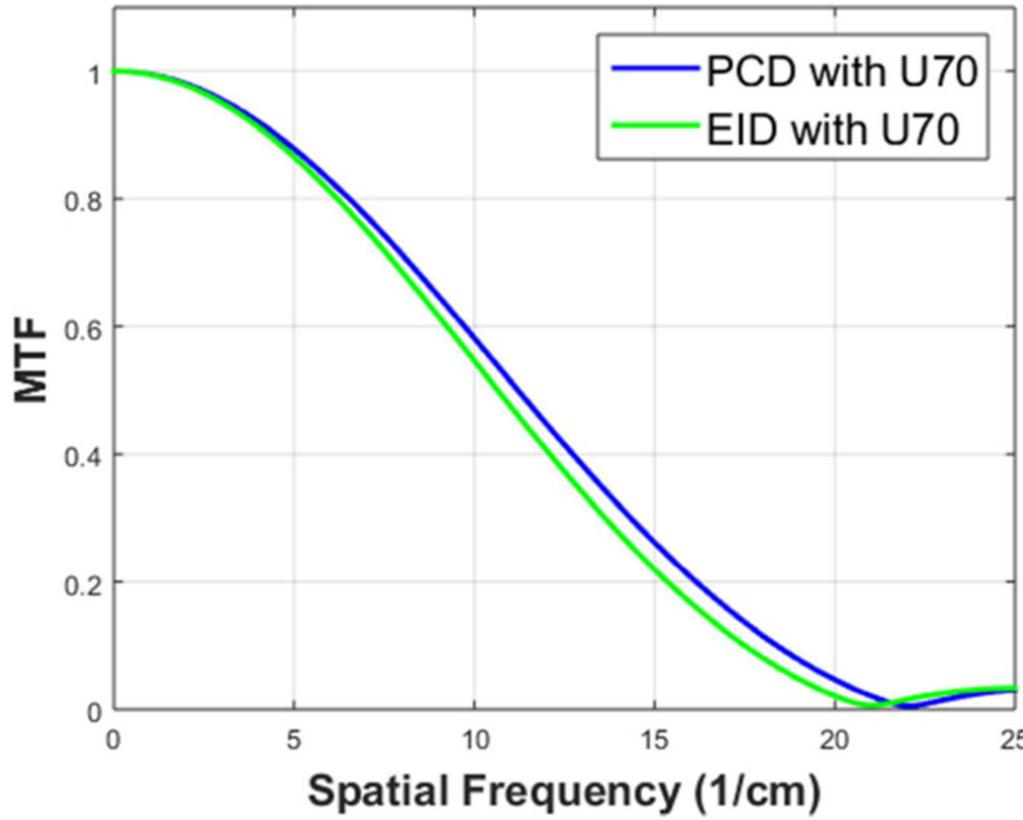


20-24 lp/cm



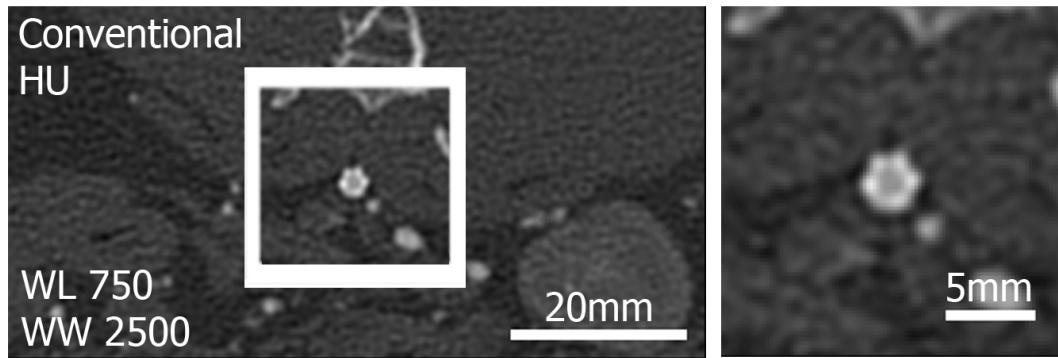
25-30 lp/cm



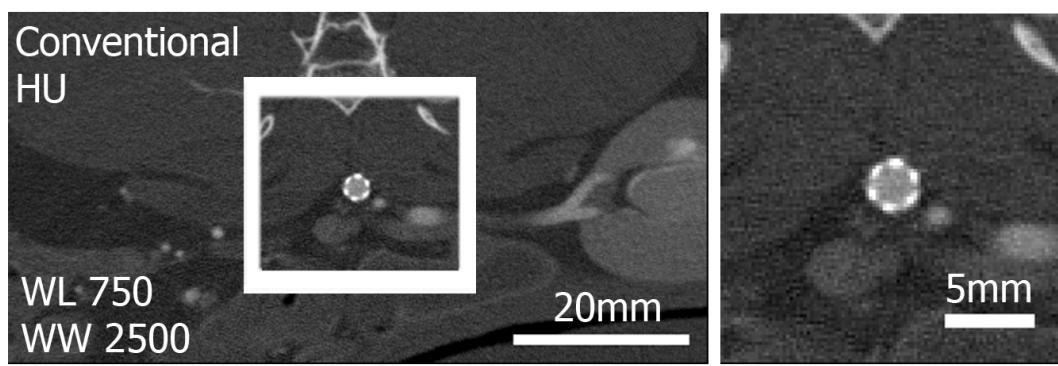


Imagerie du stent coronarien

B64

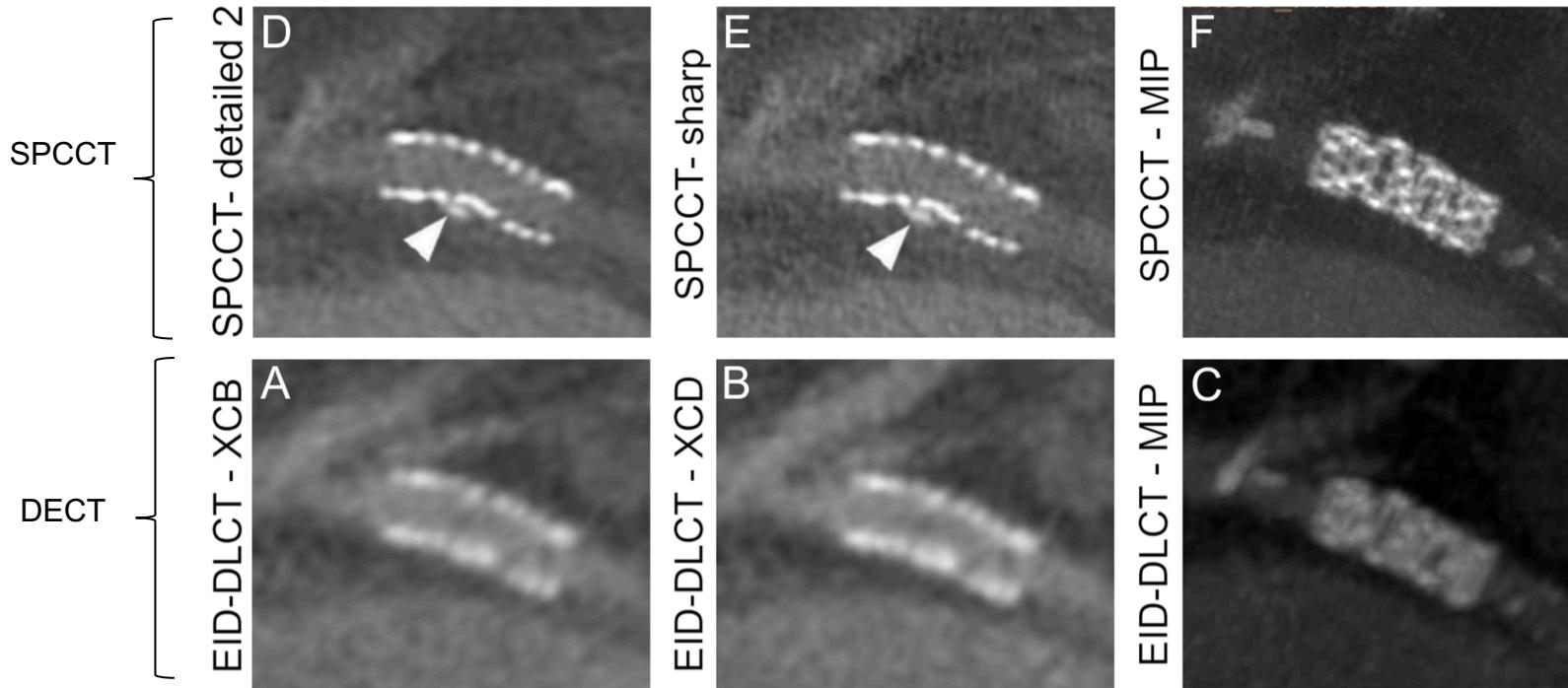


SPCCT



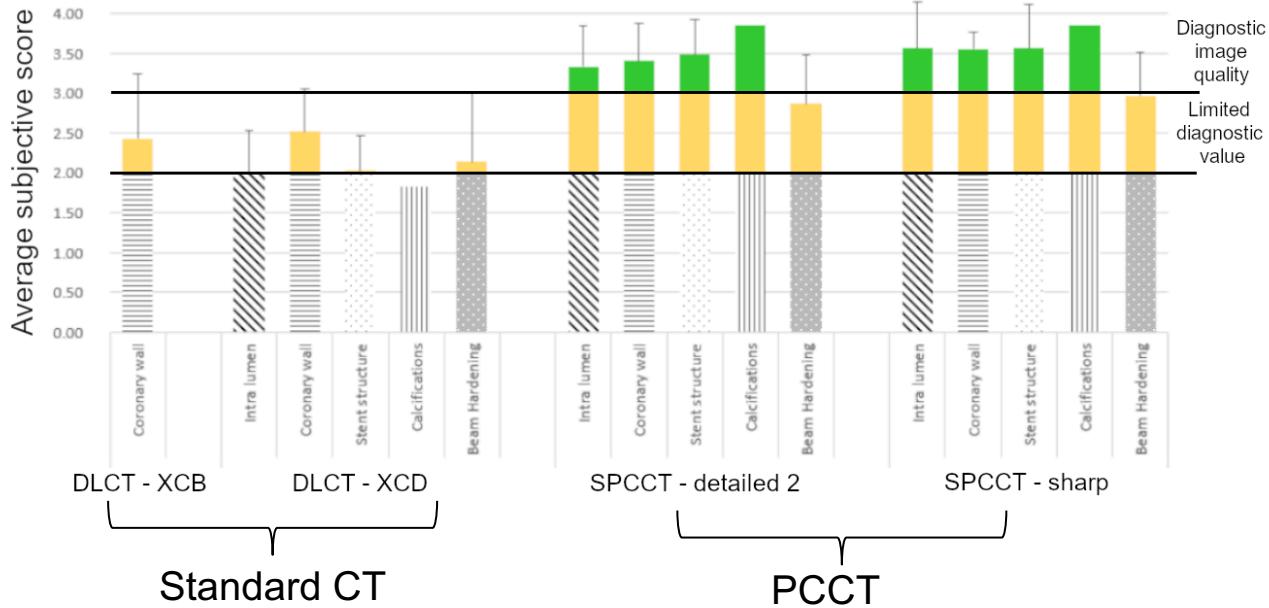
Imagerie du stent coronarien

H 71 ans, contrôle de stent (synergy 3.5x 12 mm)

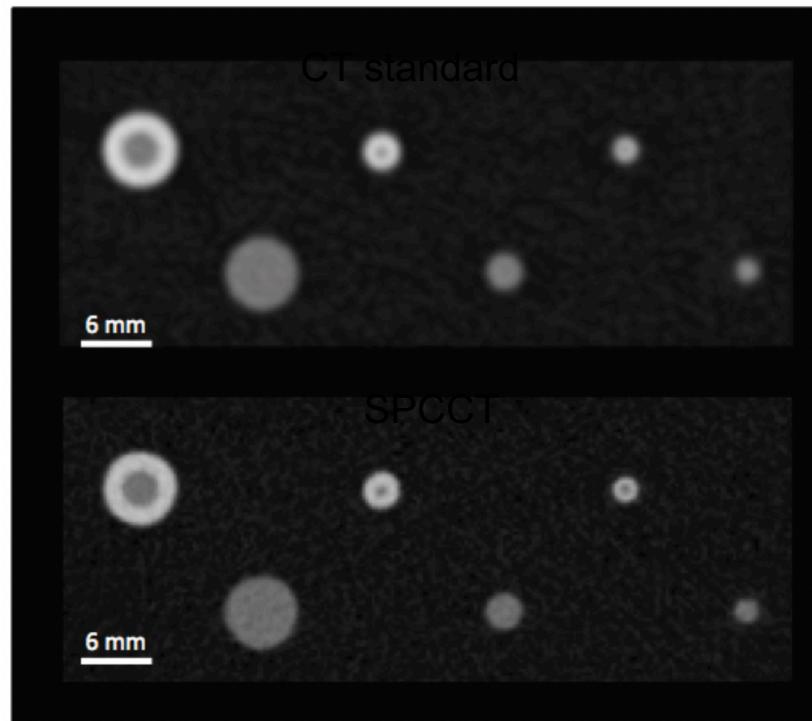


Imagerie du stent coronarien

Subjective analysis



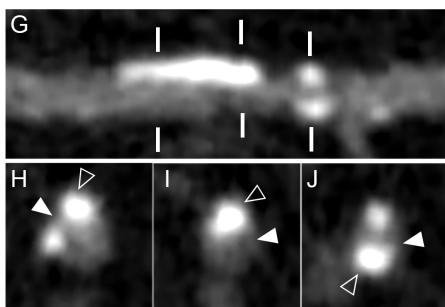
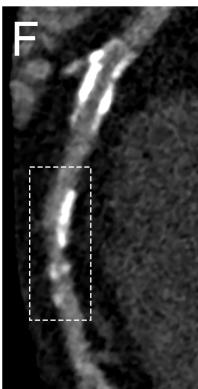
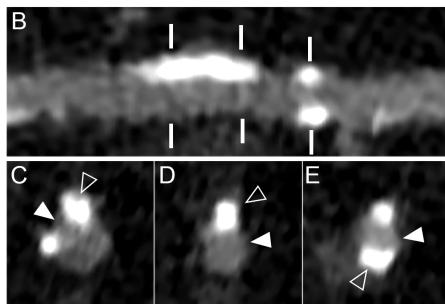
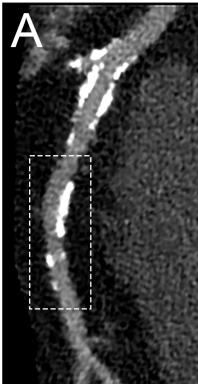
Imagerie des sténoses coronariennes



Si-Mohamed, S, L. Boussel, et P. Douek. « Clinical applications of spectral photon-counting CT ». In *Spectral, Photon Counting Computed Tomography: Technology and Applications*, CRC Press., **2020**.

Imagerie des sténoses coronariennes

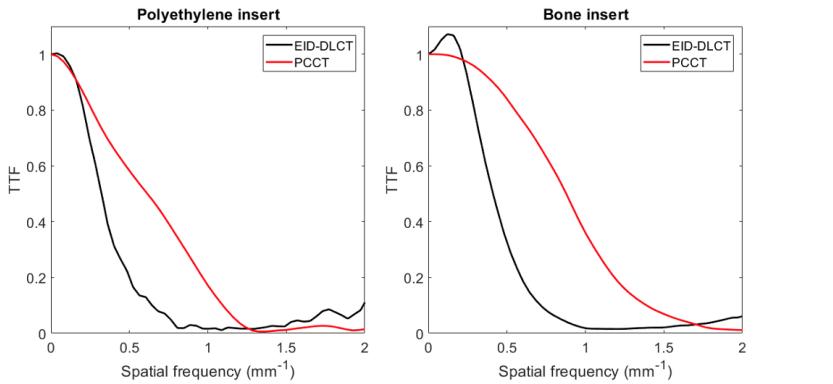
SPCCT



		PCCT	EID-DLCT	p
Diameter (mm)				
External	Reader 1	4.1 (1.9)	4.5 (2.0)	<.001
	Reader 2	4.1 (1.9)	4.5 (2.1)	<.001
Internal (lumen)	Reader 1	2.5 (1.5)	2.1 (1.6)	<.001
	Reader 2	2.3 (1.4)	2.1 (1.6)	<.01
Blooming (%)				
	Reader 1	36.4 (22.5)	48.4 (28.7)	<.001
	Reader 2	39.3 (22.3)	47.1 (28.5)	<.001

DECT

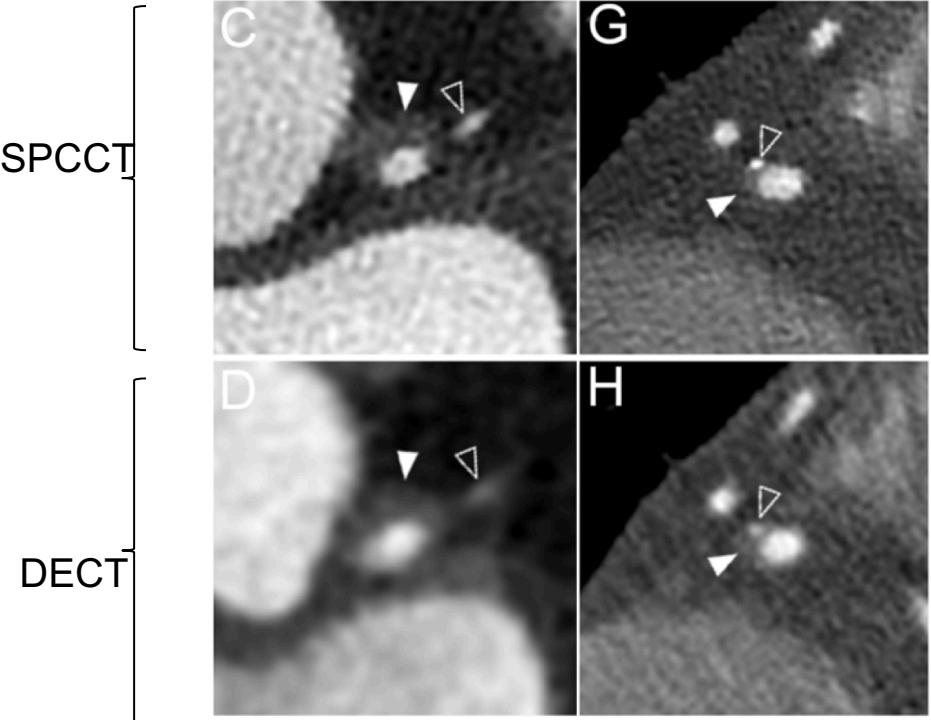
Imagerie de la plaque coronarienne



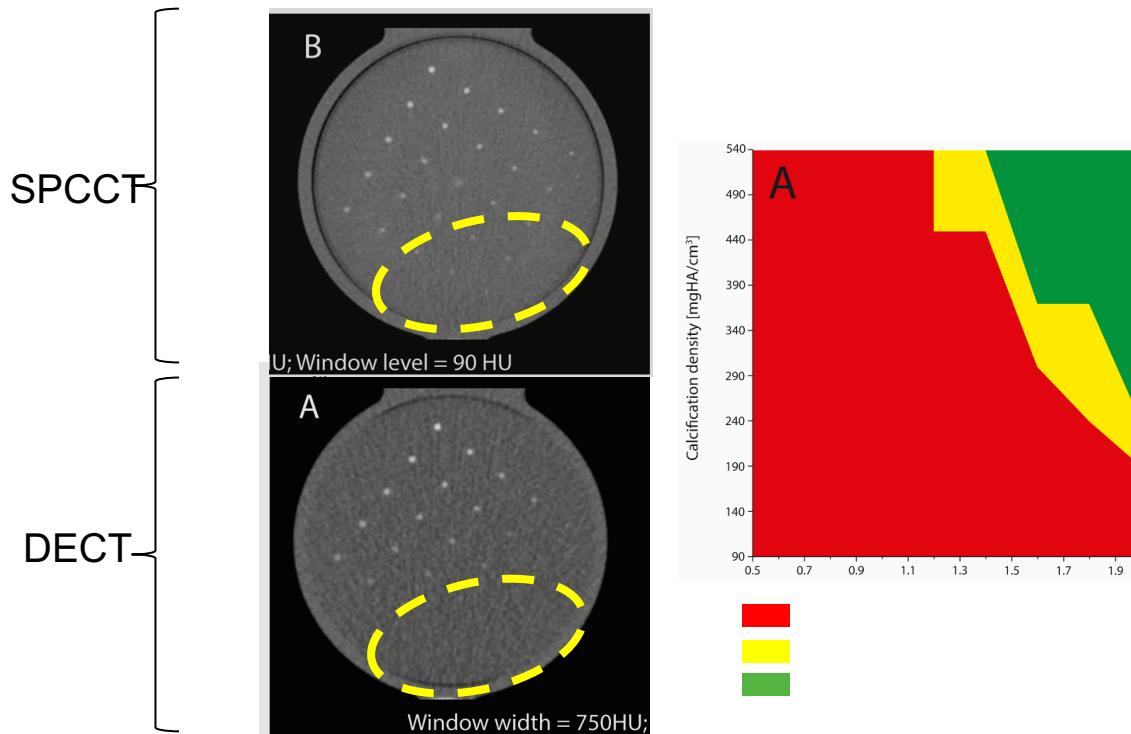
Detectability Index (d')

$d' 350 \text{ HU} - 4 \text{ mm}$	PCCT	EID-DLCT
$d' 40 \text{ HU} - 2 \text{ mm}$	41.78 ± 1.44	18.38 ± 0.36
	2.64 ± 0.06	0.92 ± 0.02

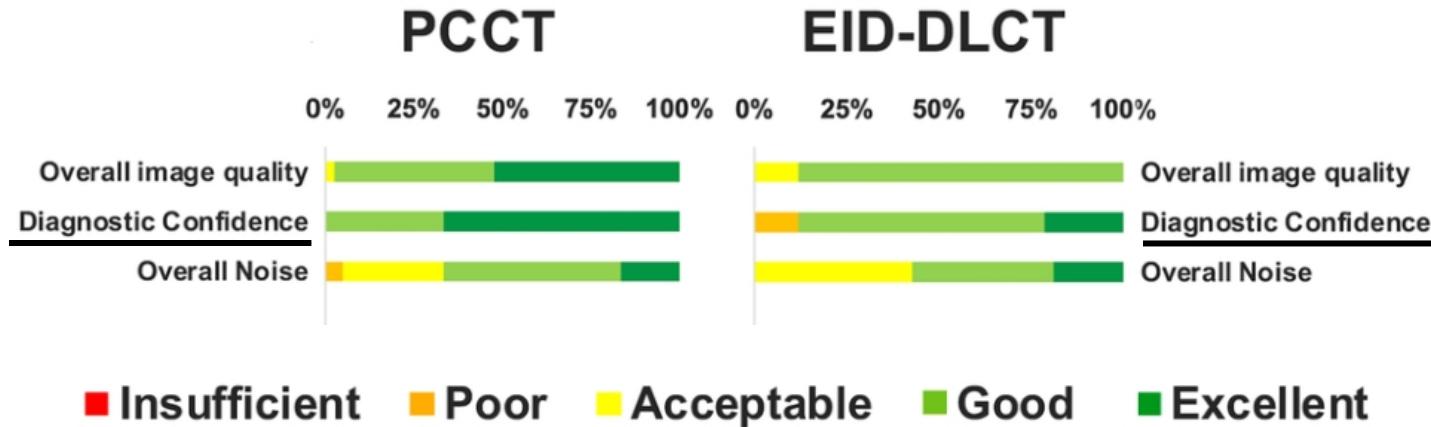
F, 40 ans, MINOCA H 69 ans, syndrome coronarien stable



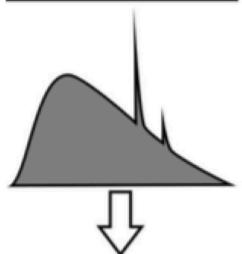
Imagerie des calcifications coronariennes



Imagerie cardiaque



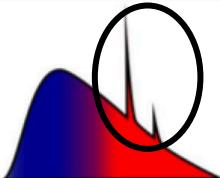
**Energy Integrating
DETECTORS**



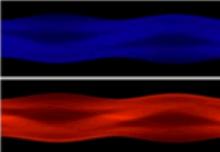
Global
Information



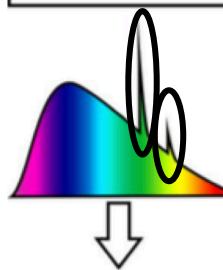
**Dual layer CT
Energy Integrating
DETECTORS**



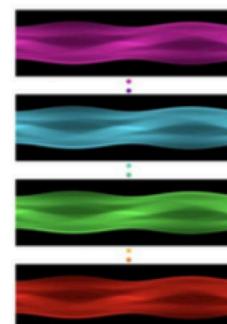
**DUAL
Spectral Discrimination**



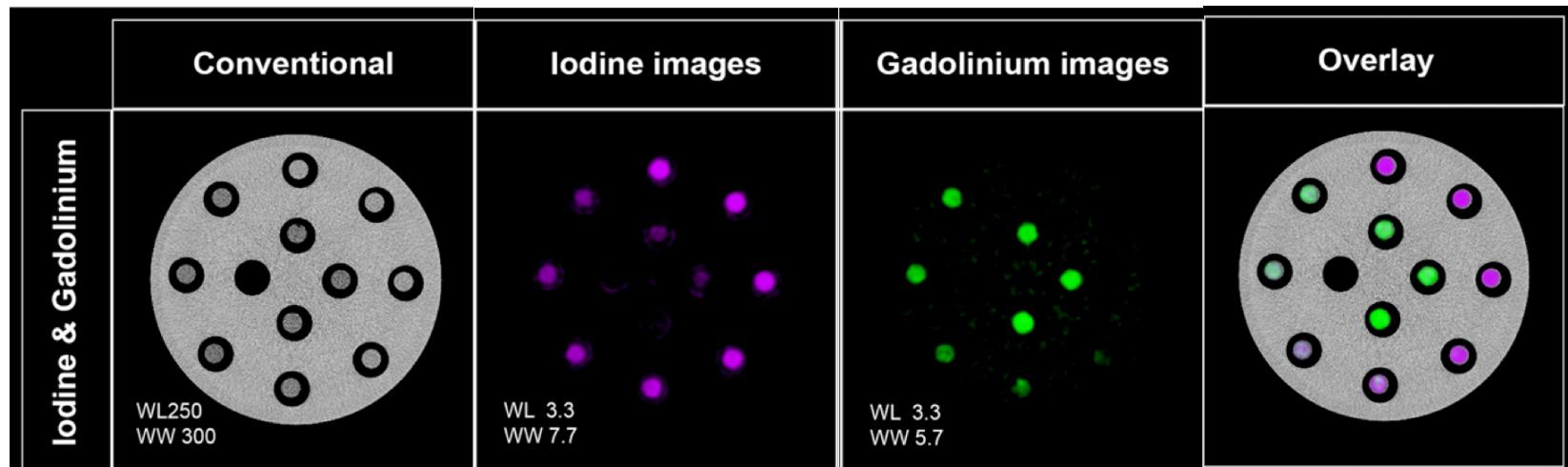
**SPCCT
Photon-Counting
DETECTORS**



**MULTIPLE
Spectral Discrimination**

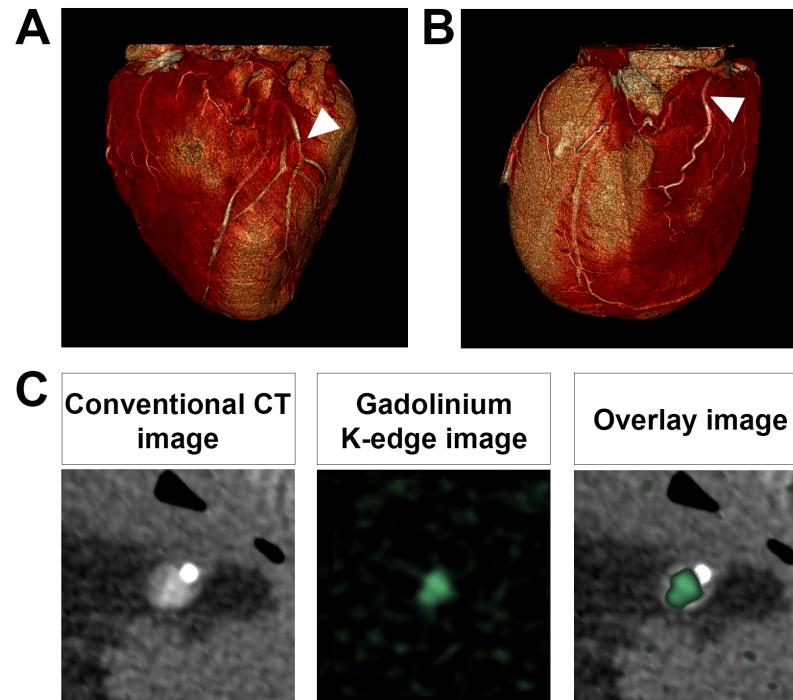


Imagerie multicolore



Imagerie coronarienne K-edge

Coronary spectral photon-counting K-edge imaging

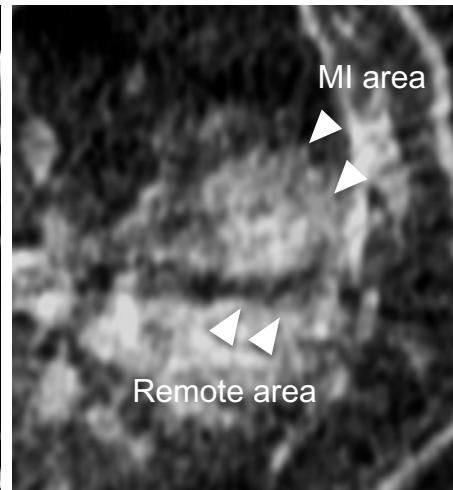


Imagerie monocouleur du volume extracellulaire spécifique et quantitative

HU images



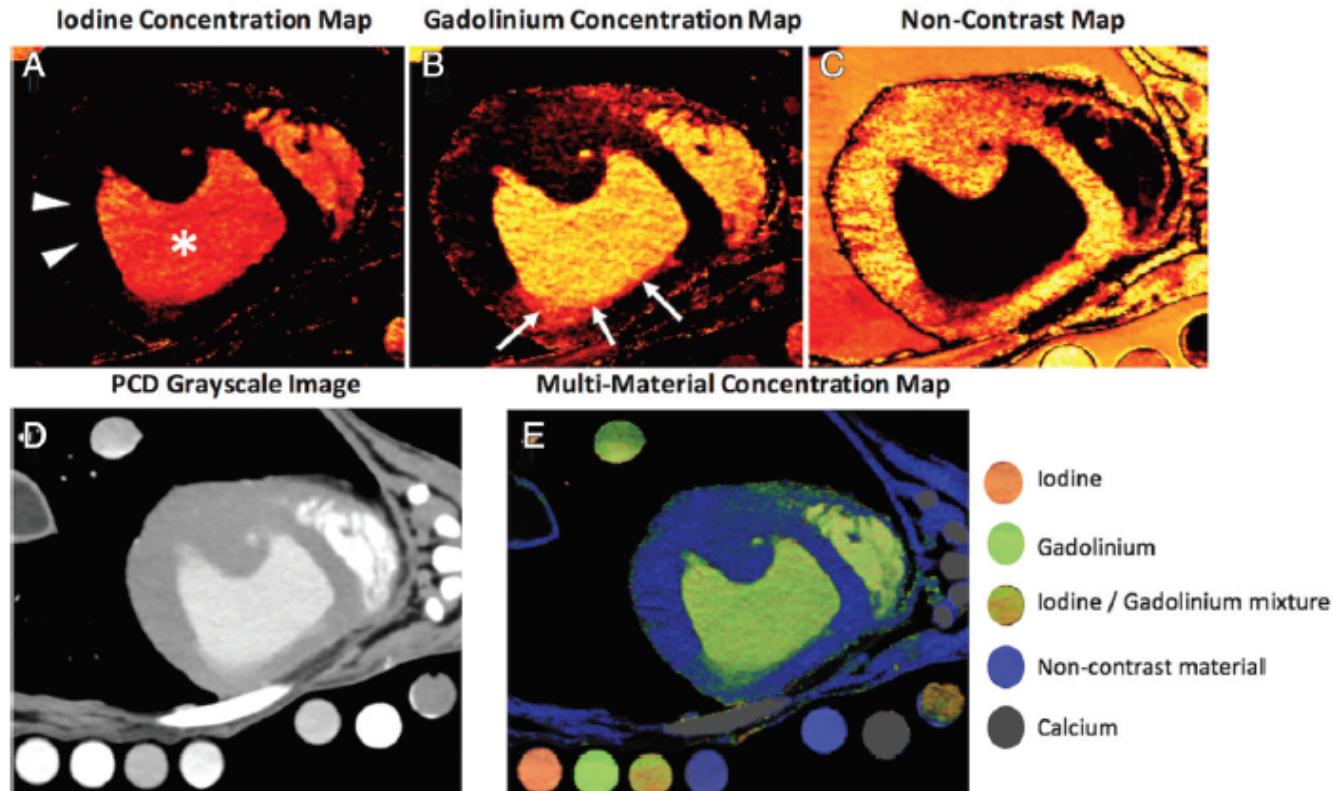
Gd K-edge images



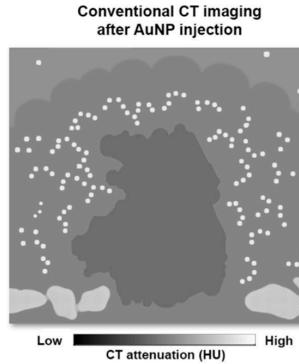
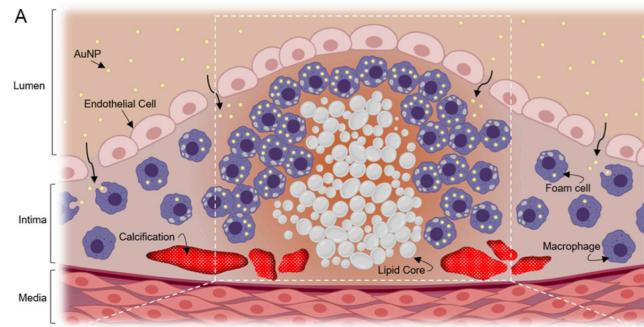
Infarcted zone: 384.1 ± 53 HU
Non infarcted zone: 233.6 ± 36.5 mg/ml

Infarcted zone: 8.53 ± 1.66 mg/ml
Non infarcted zone: 4.9 ± 1.56 mg/ml

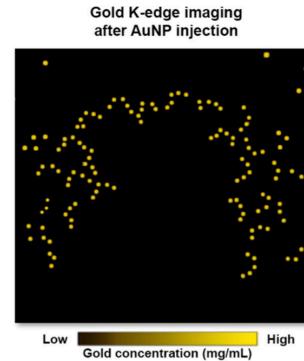
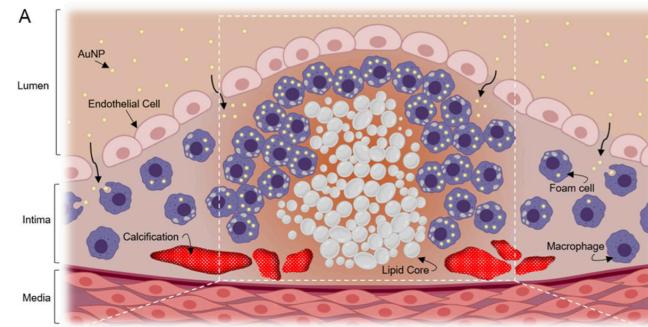
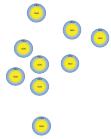
Imagerie multicolore du volume extracellulaire spécifique et quantitative



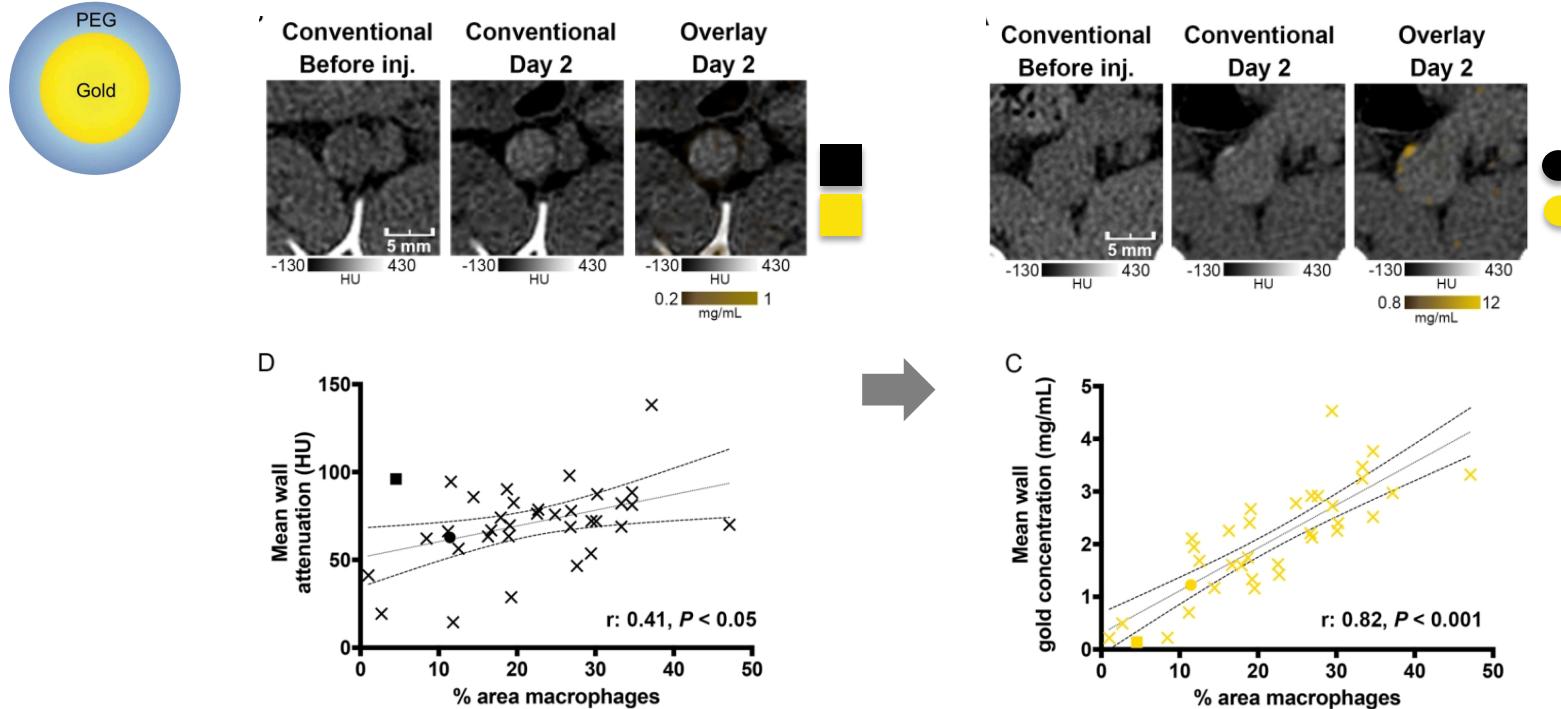
Imagerie moléculaire de la plaque d'athérosclérose coronarienne



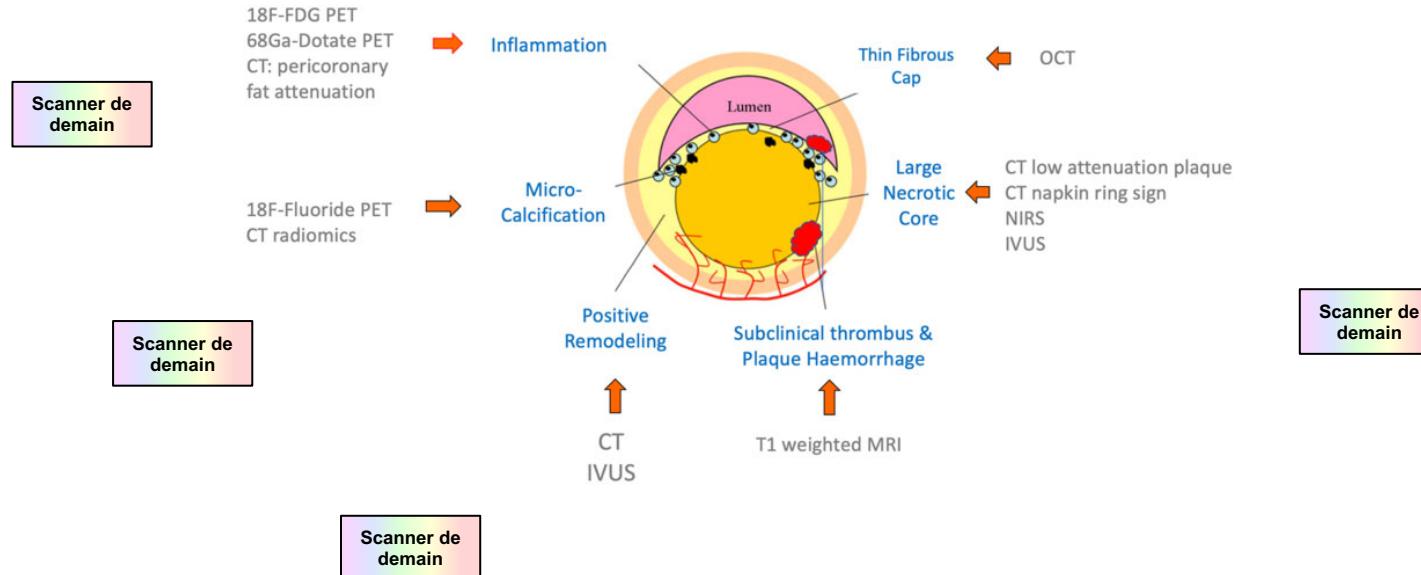
Imagerie moléculaire de la plaque d'athérosclérose coronarienne



Imagerie moléculaire de la plaque d'athérosclérose coronarienne



HR et Comptage photonique : SCANNER CARDIAQUE DE DEMAIN ?

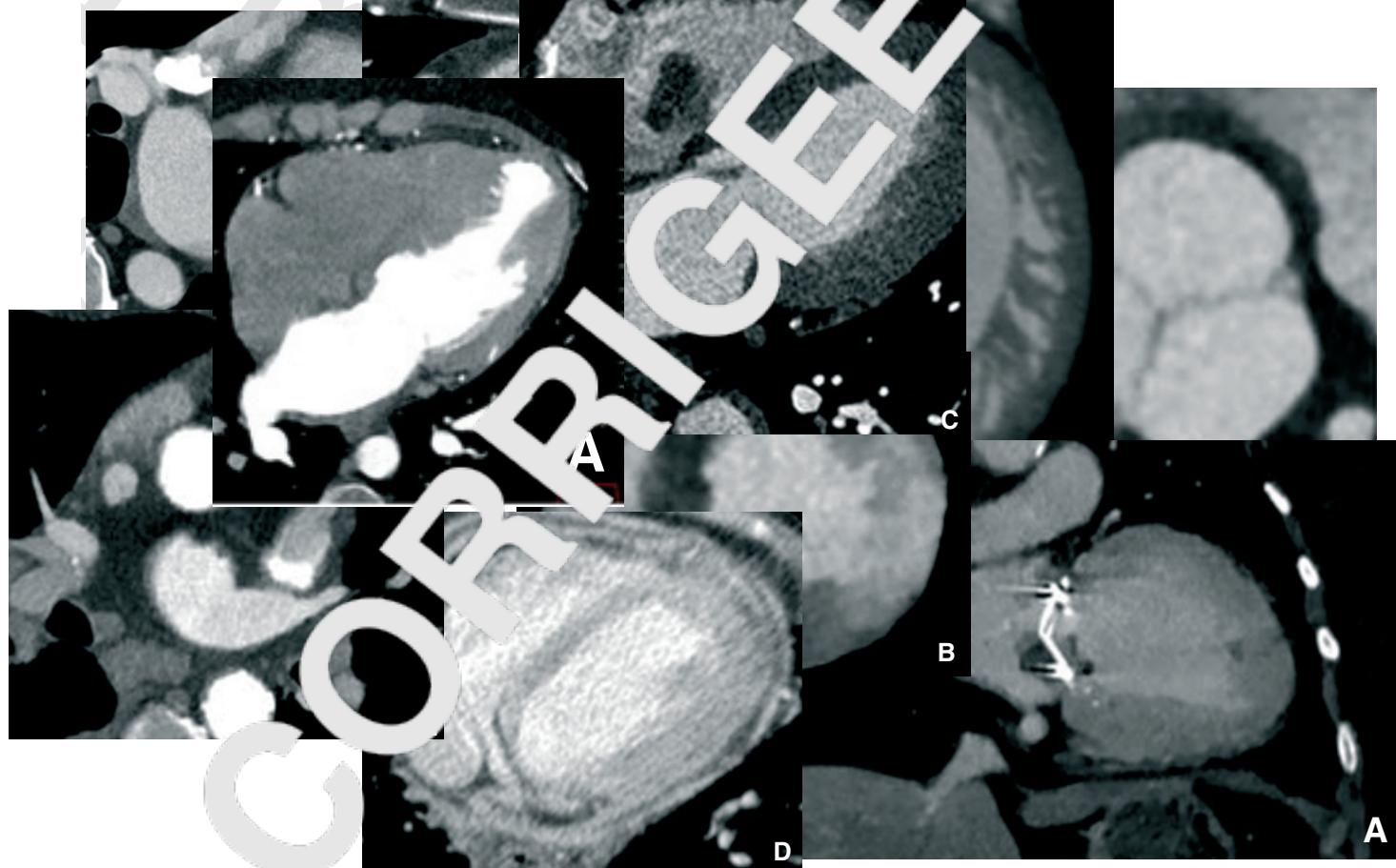


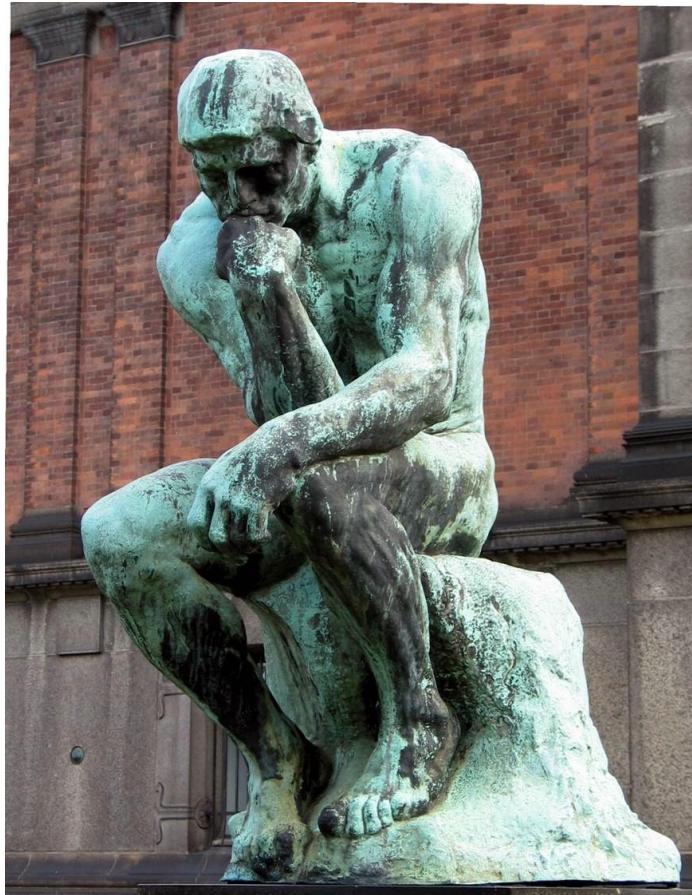
Evaluation morphologique

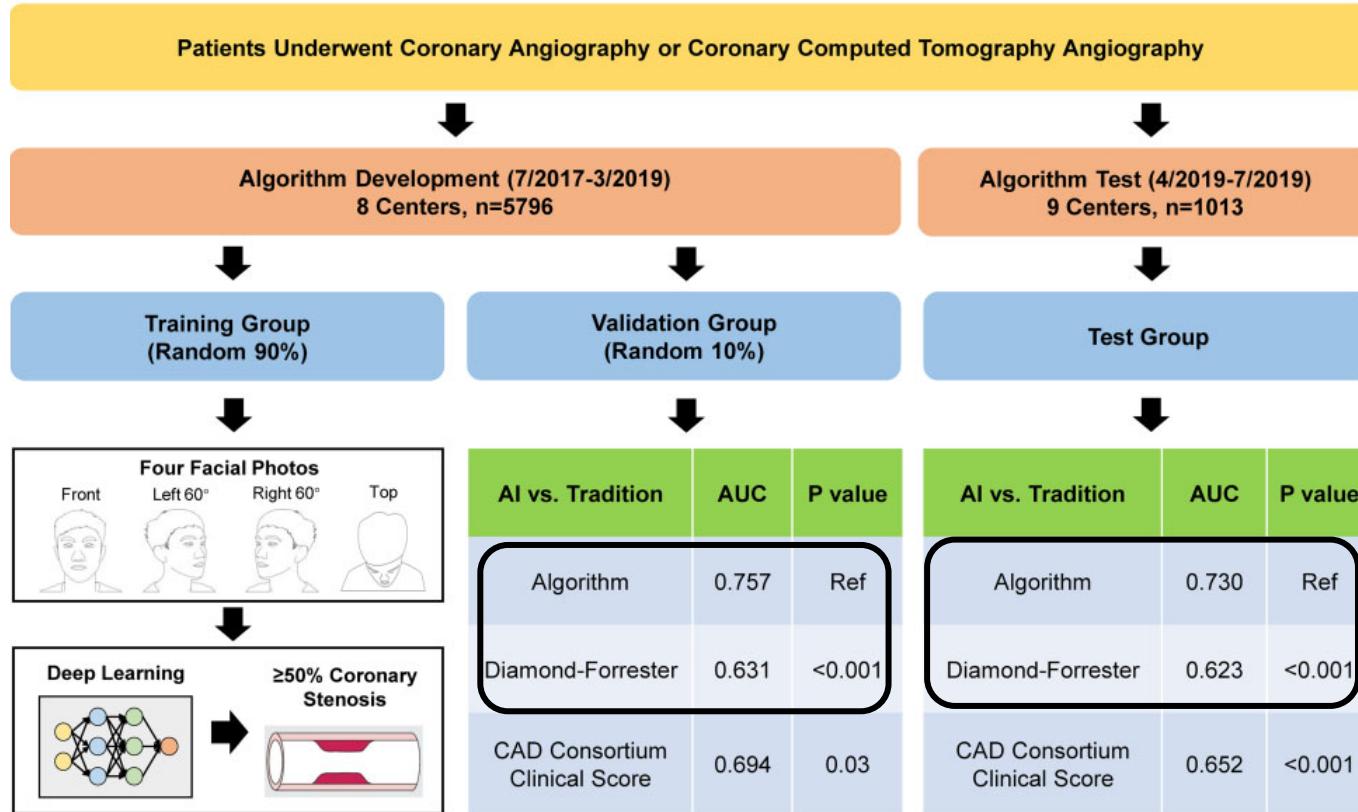
- Lumière
- Plaque

Evaluation fonctionnelle

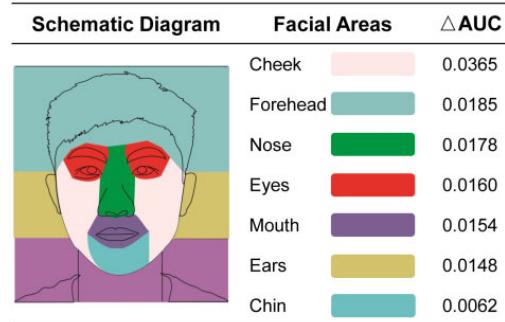
- Imagerie de l'inflammation spécifique et quantitative







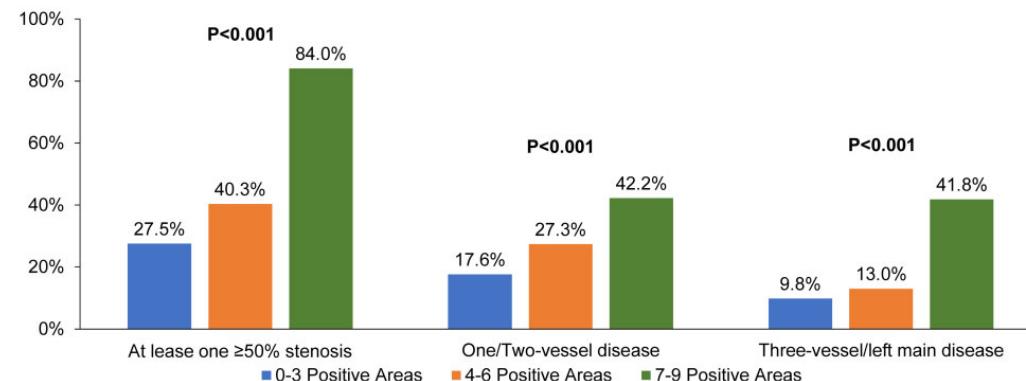
A Occluding Facial Region



B Occluding 11×11 Pixels Region



C Dose-response Relationship between Positive Facial Areas and Coronary Artery Disease



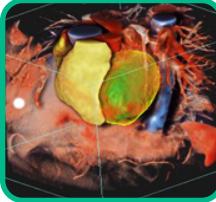
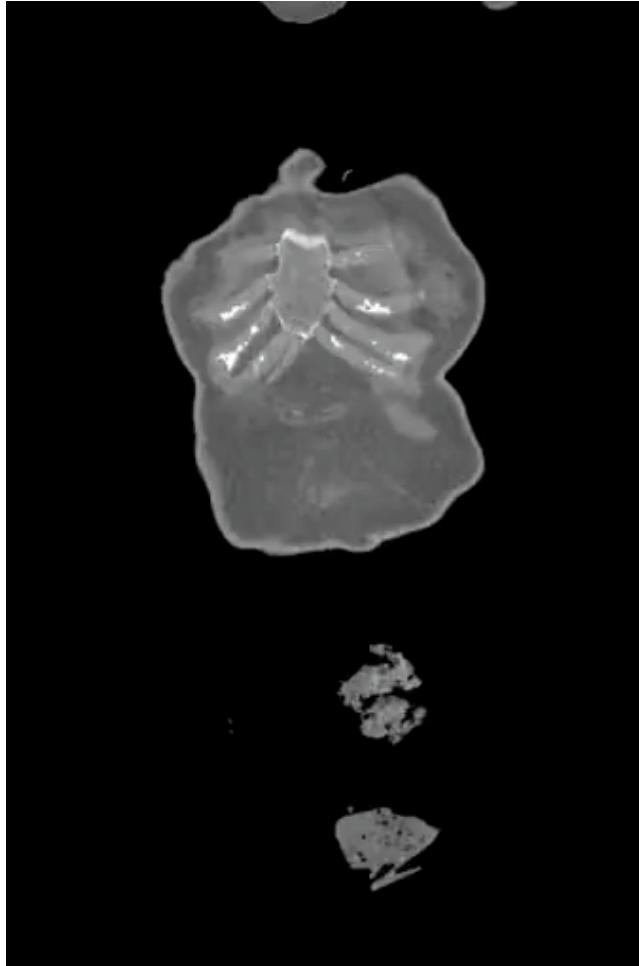
Quizz



His score is 133, and anything over 100 indicates plaque is present and that the patient has heart disease. According to Trump's official medical records, in 2009 his coronary calcium score was 34. In 2013, it was 98.

Most people might have not heard of this test also

Sténose coronarienne ?



Automatic segmentation

- Main organs and vessels
- Robust to protocol (contrast, FOV, kernel...)
- Spectral dedicated tools



Biomarkers extraction

- Volumes: cardiac chambers, lungs, liver...
- Vessels diameters
- Lungs kurtosis, skewness...
- ...



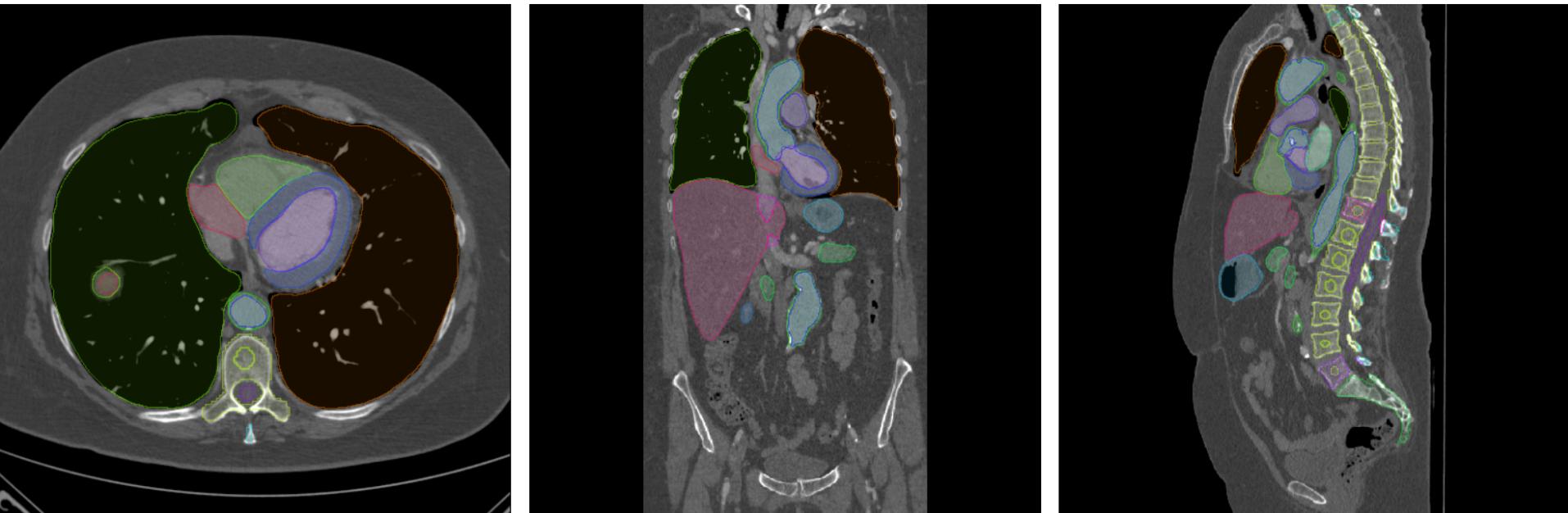
Patient characterization

- Identify abnormal measurements : SPECTRAL ALERTS
- Predict risk
- Augment patient record



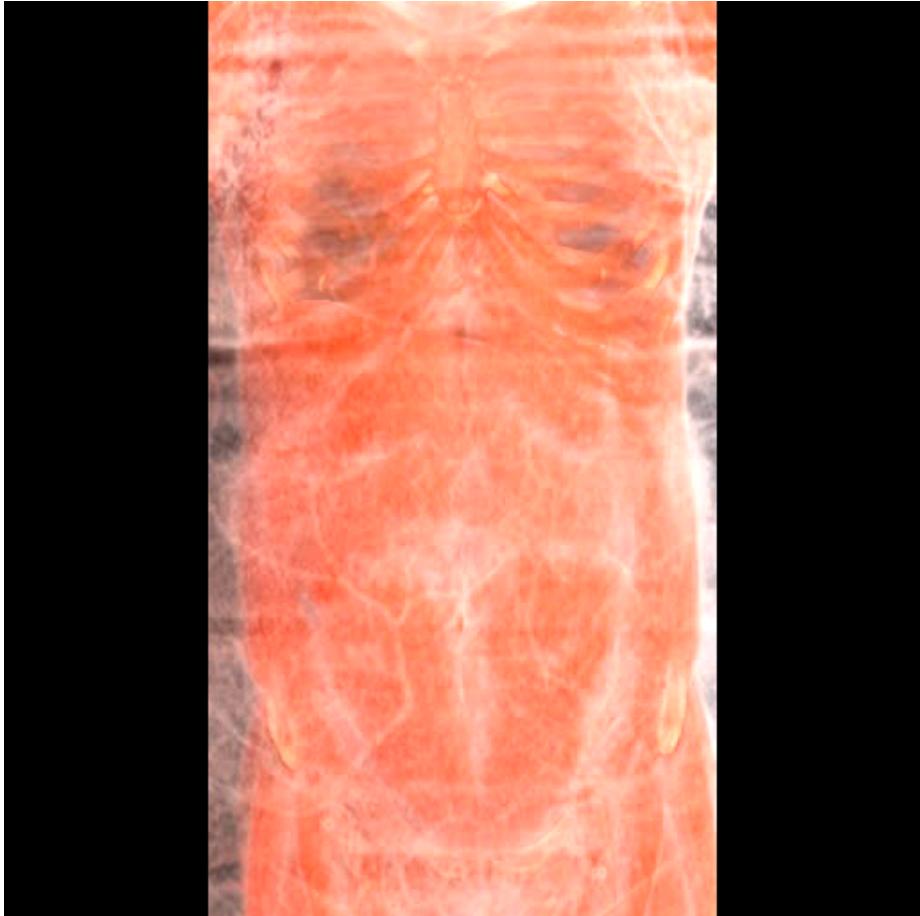
Courtoisie de Pierre-Jean Lartaud (doctorant CREATIS), supervision Loic Boussel

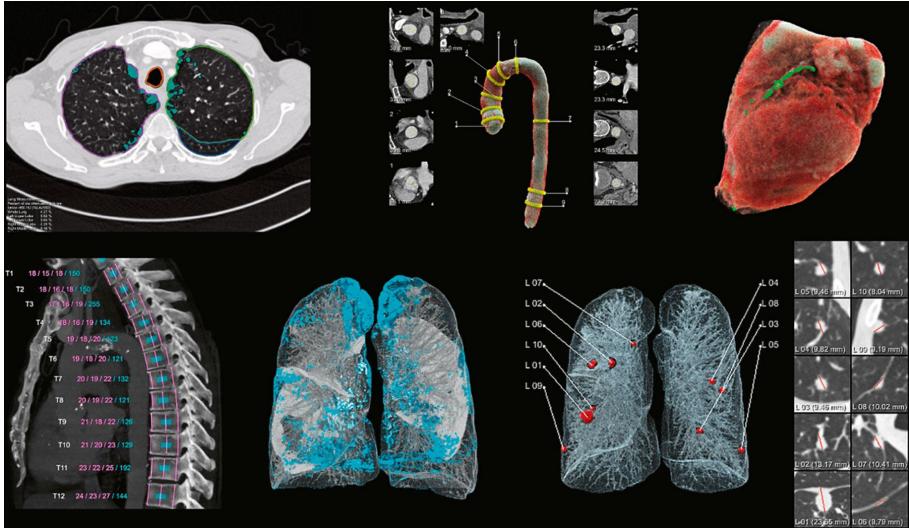
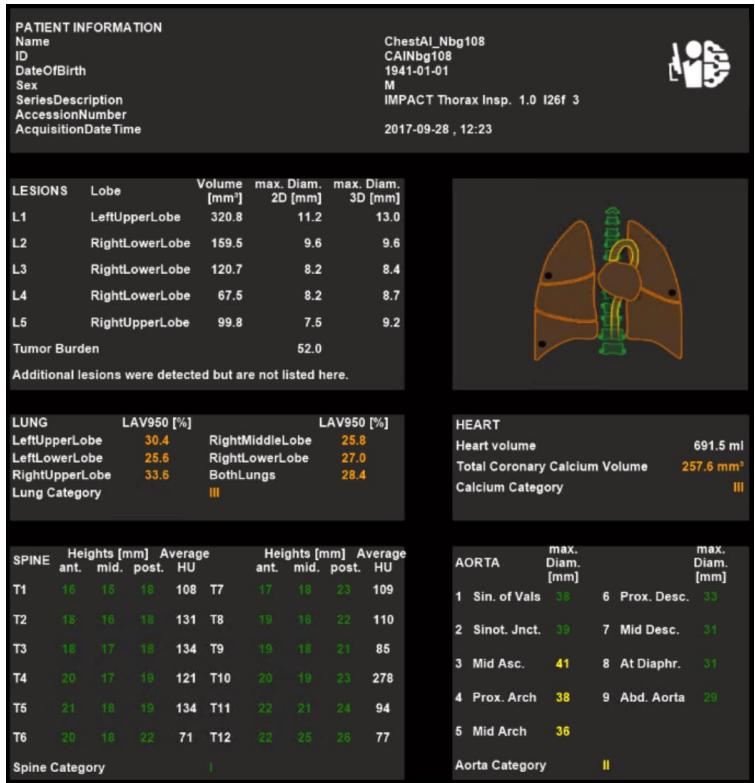
Segmentation multi-organes



Hospices Civils de Lyon, Philips Research

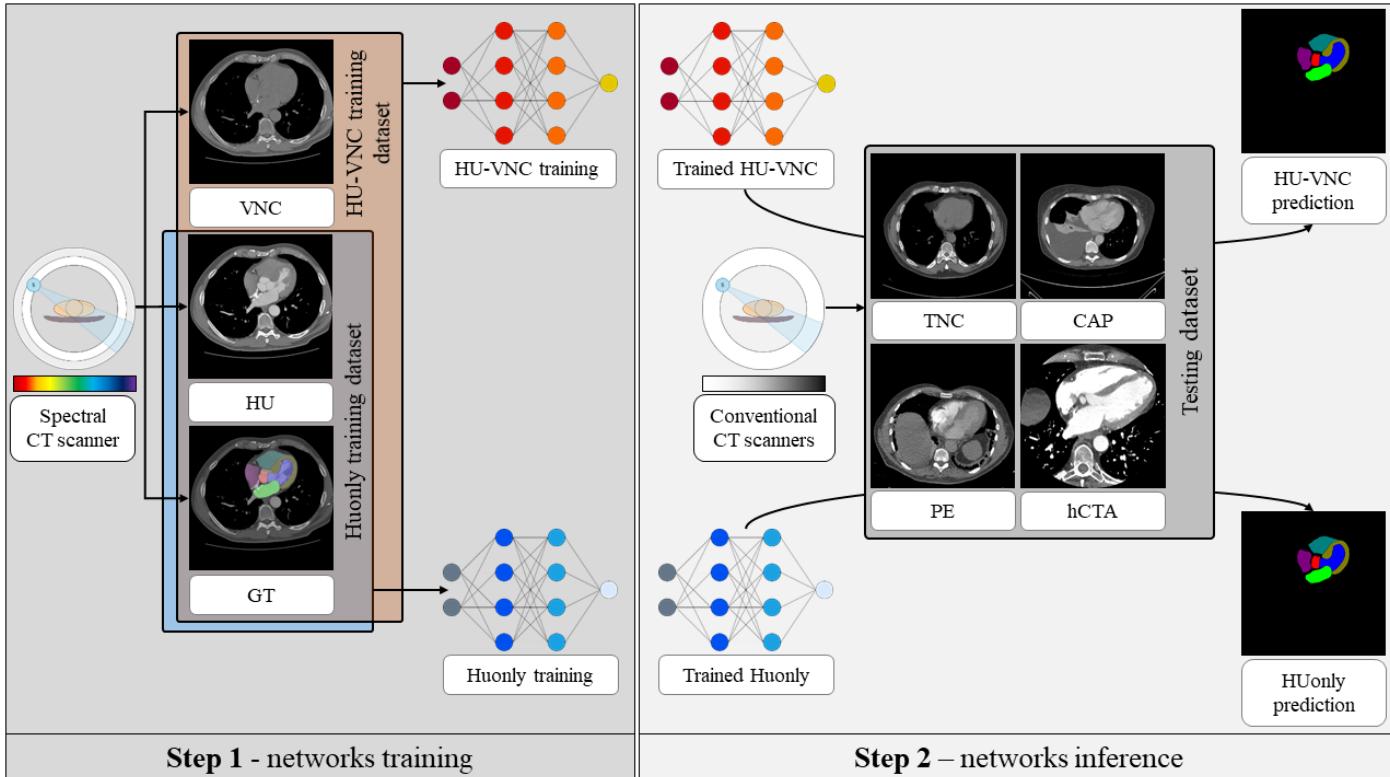
Report with Chest CT Biomarkers				
Cardiac	Left Ventricle	Volume	67mL	
	Left Atrium	Volume	45mL	
	Right Ventricle	Volume	84mL	
	Right Atrium	Volume	39mL	
Vascular	Aorta	Diameter max	44 mm	
		Diameter min	15mm	
	Pulm. Arteries	Diameter max	27mm	
Pulmonary	Lungs	Volume	6.4L	
		Emphysema	24%	(*)
	Left Lung	Volume	3.1L	
		Emphysema	16%	(*)
	Right Lung	Volume	3.3L	
		Emphysema	32%	
Bone Density	L1	HU	128HU	
		VNC	59HU	(*)
	Spine	HU	130HU	
		VNC	62HU	(*)
Metabolic	Liver	Density HU	42 HU	
		Density VNC	37 HU	(*)
	Spleen	Density HU	103 HU	
		Density VNC	55 HU	
	Abdominal Muscle	L3 area	124 cm³	
Conclusion: Emphysema 24 % – Important Steatosis - Osteoporosis				



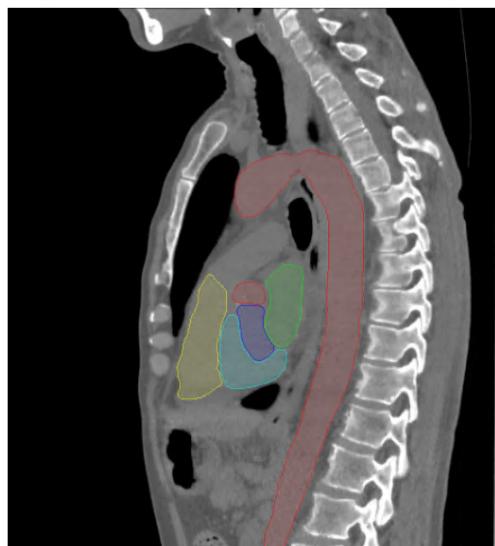
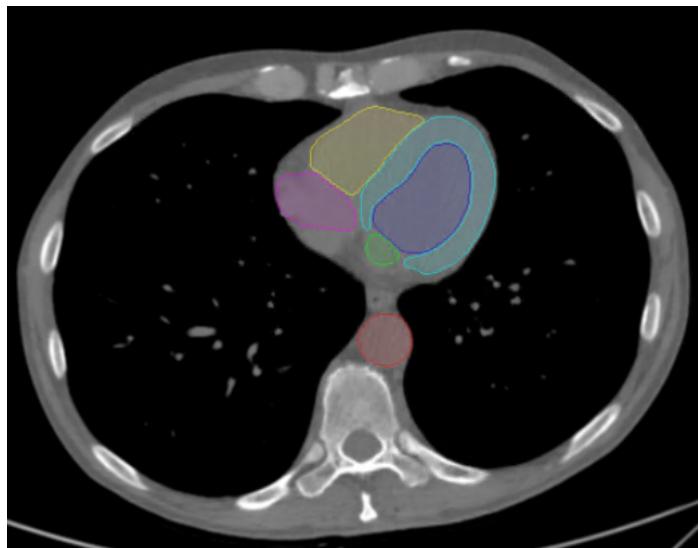


AI-Rad Companion Chest CT (Siemens)

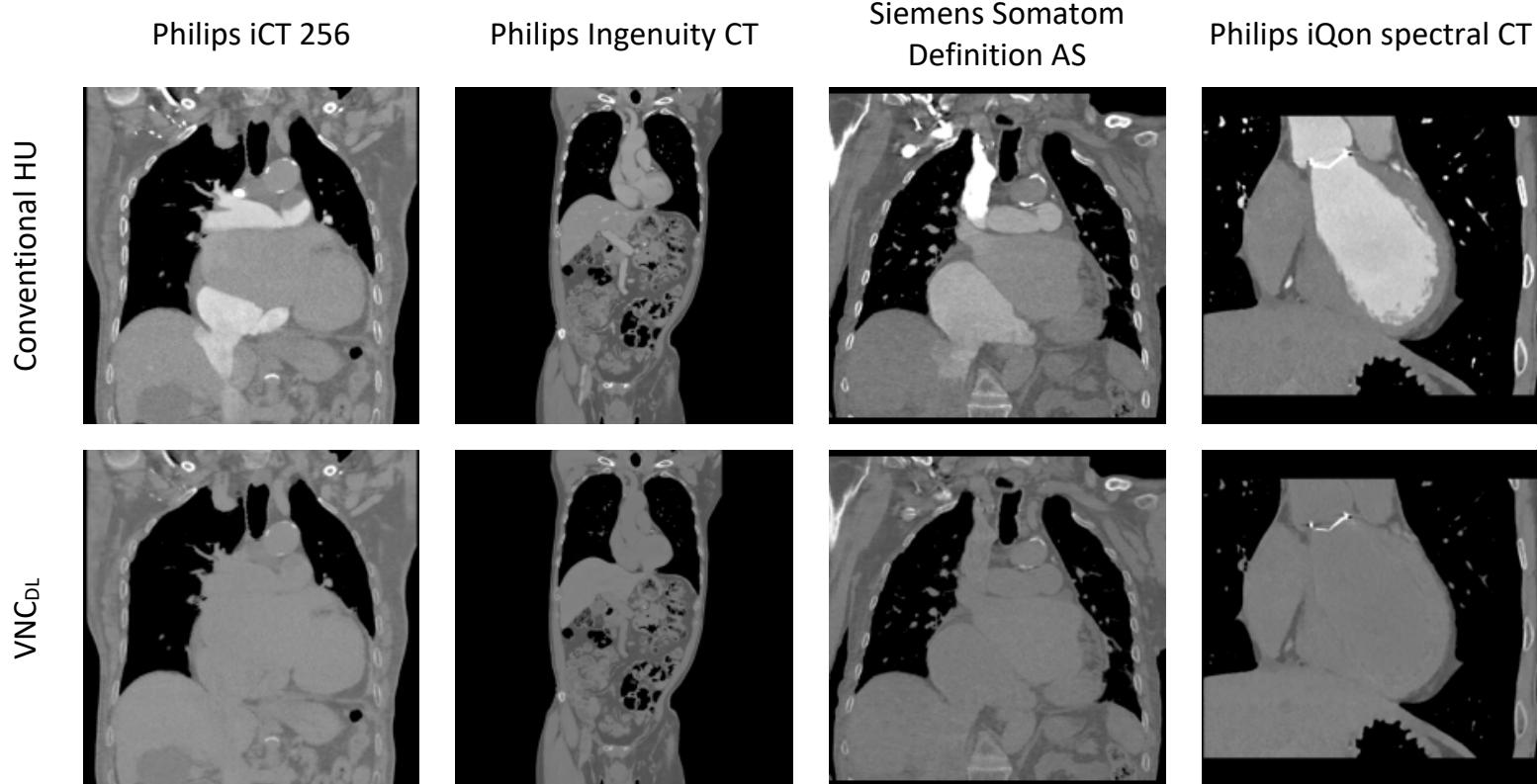
IA et données spectrales



Segmentation des cavités cardiaques



Exploitation des données spectrales - CASPER



Courtoisie de Pierre-Jean Lartaud (doctorant CREATIS), supervision Loïc Boussel

Conclusion

<https://museum.aapm.org/exhibit/07-ct/>

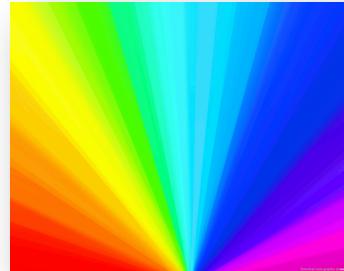
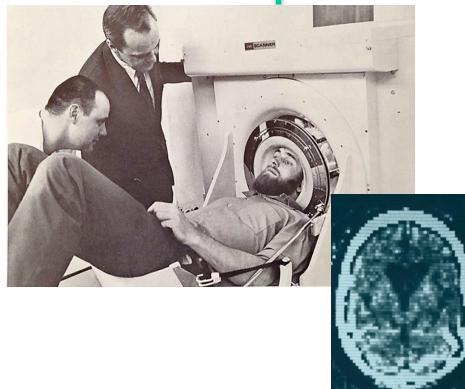
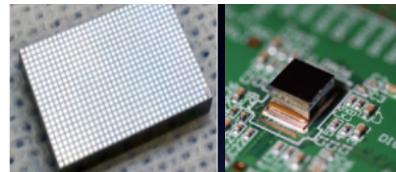
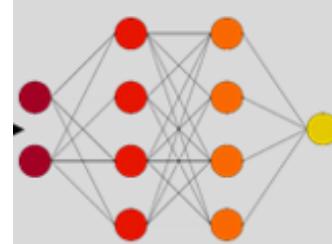


1971

1976

1990

Demand





MERCI POUR VOTRE ATTENTION

Salim Si-Mohamed, Philippe Douek
Imagerie, Hôpital cardiothoracique et vasculaire Louis Pradel
Laboratoire CREATIS, Equipe cardiovasculaire
CNRS – INSERM – Université Lyon 1

