

Organ-Specific Context-Sensitive CT Image Reconstruction and Display

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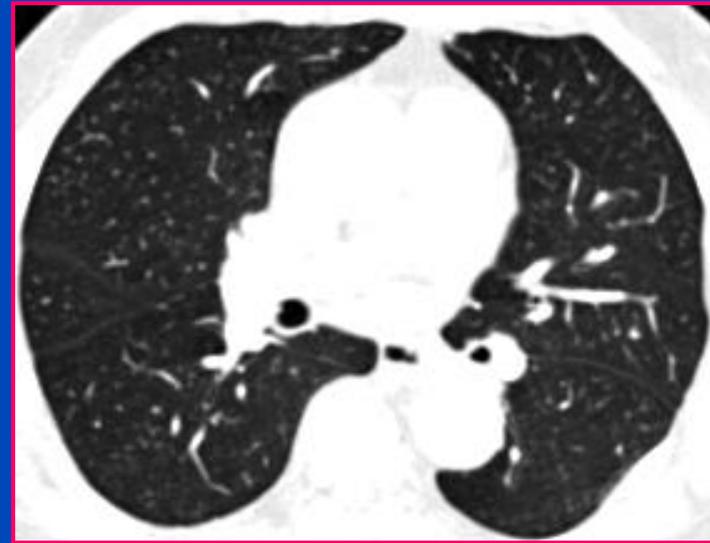
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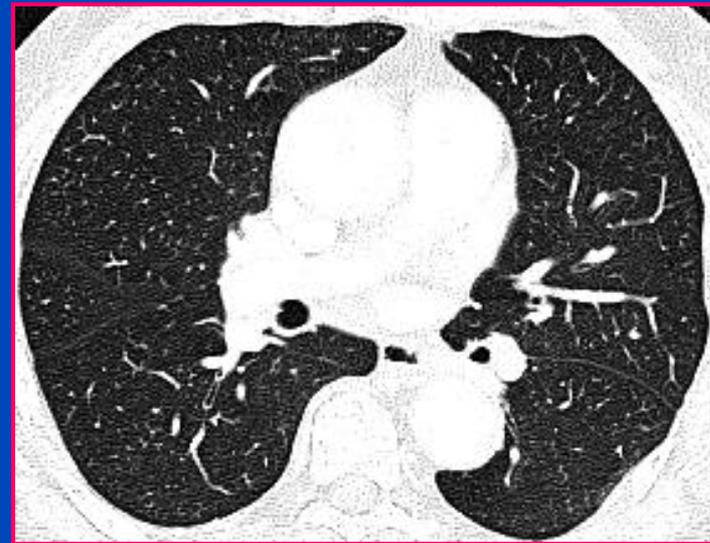
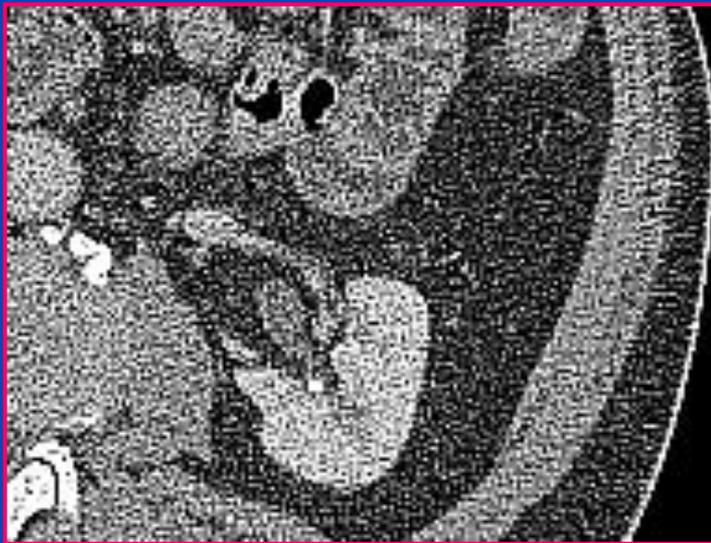
³Friedrich-Alexander University Erlangen-Nürnberg, Germany

⁴Hospital Nürnberg, Paracelsus Medical University

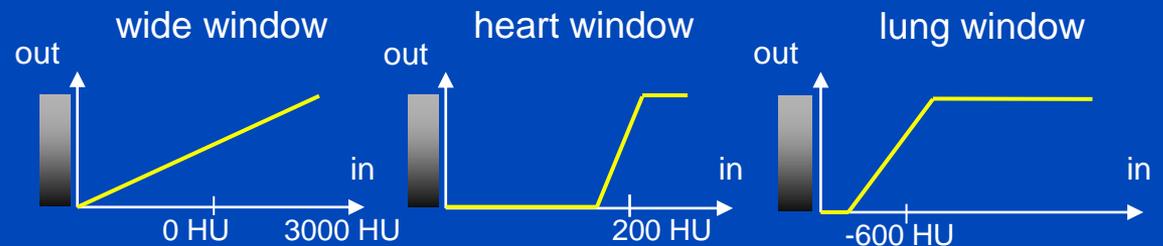
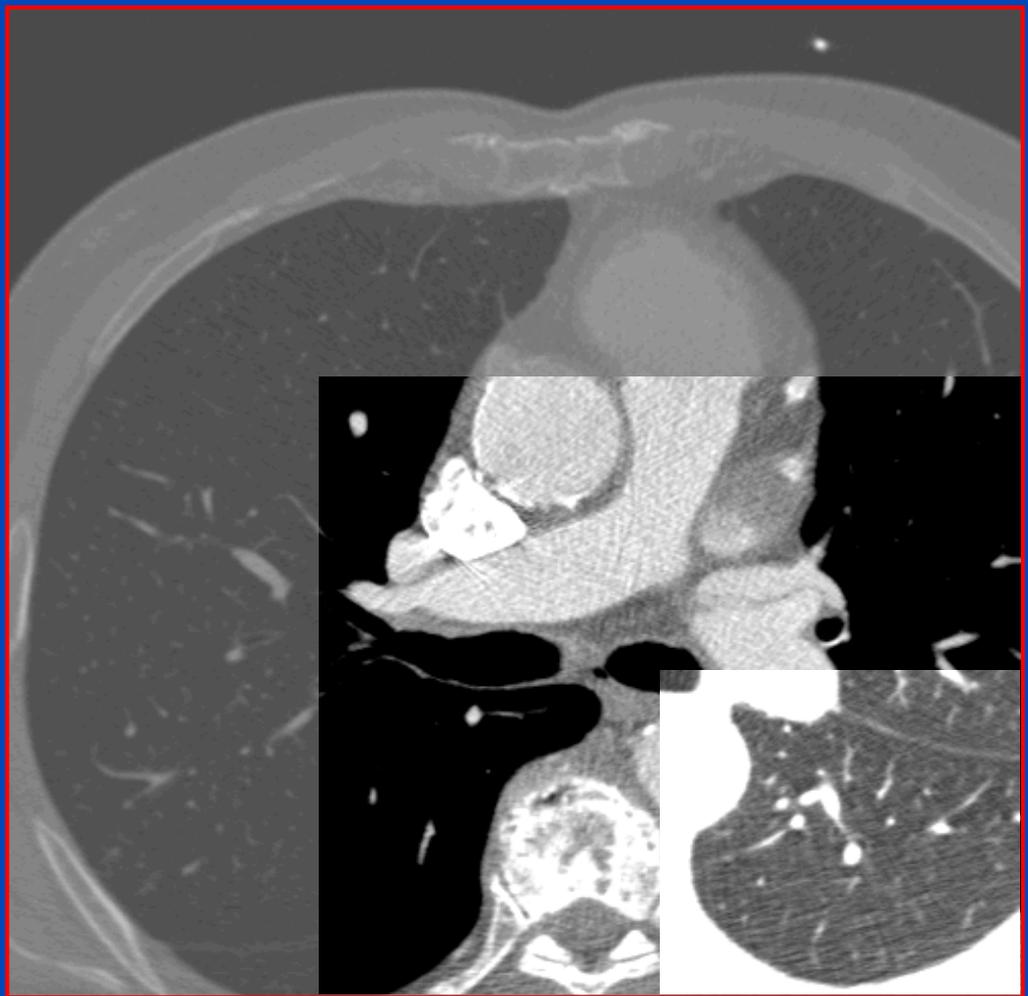
smooth kernel reconstruction



sharp kernel reconstruction



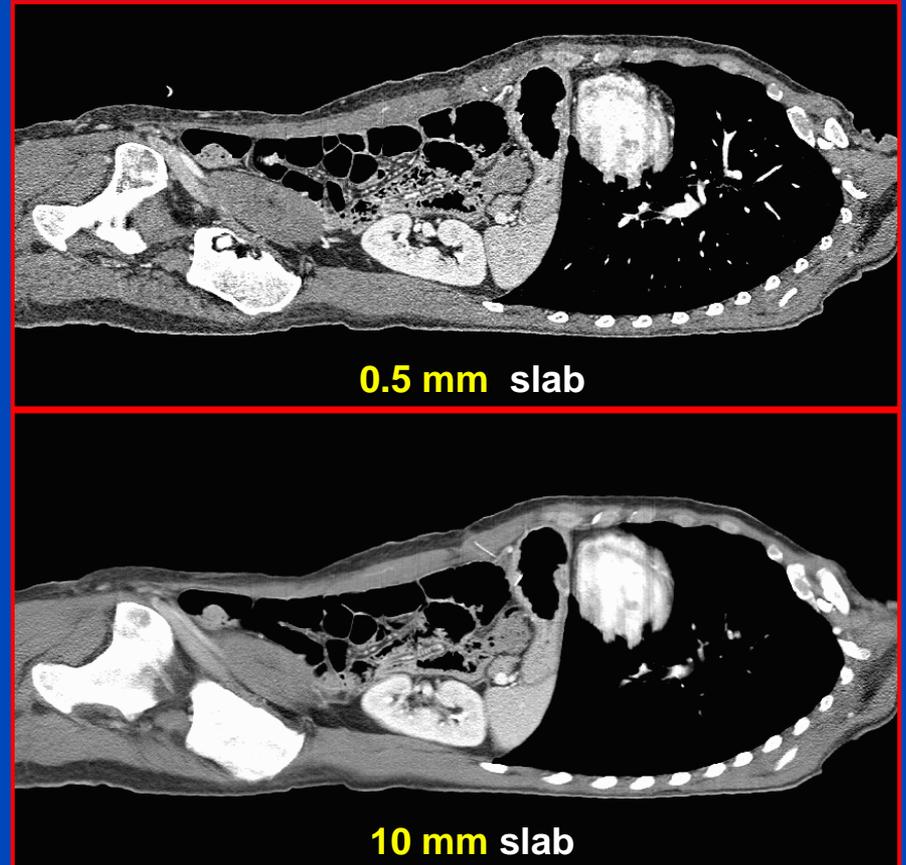
	Center	Width
pelvis	35 HU	350 HU
soft tissue	60 HU	400 HU
abdomen	40 HU	300 HU
liver	40 HU	200 HU
lung	-600 HU	1200 HU
heart	200 HU	600 HU
bone	450 HU	1500 HU
spine	40 HU	350 HU
mediastinum	40 HU	400 HU
angiography	80 HU	700 HU



sliding thin slab (STS) display with
maximum intensity projection (MIP)



sliding thin slab (STS) display with
mean intensity projection (mean-IP)

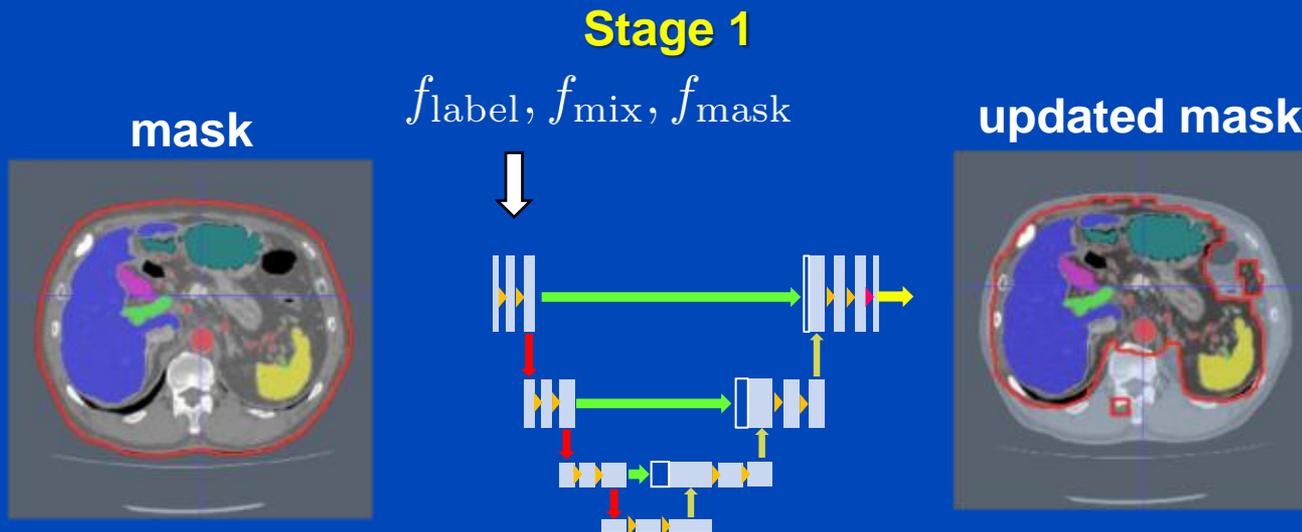


Aim

To combine mutually exclusive CT image properties into a single organ-specific image reconstruction and display using prior anatomical information.

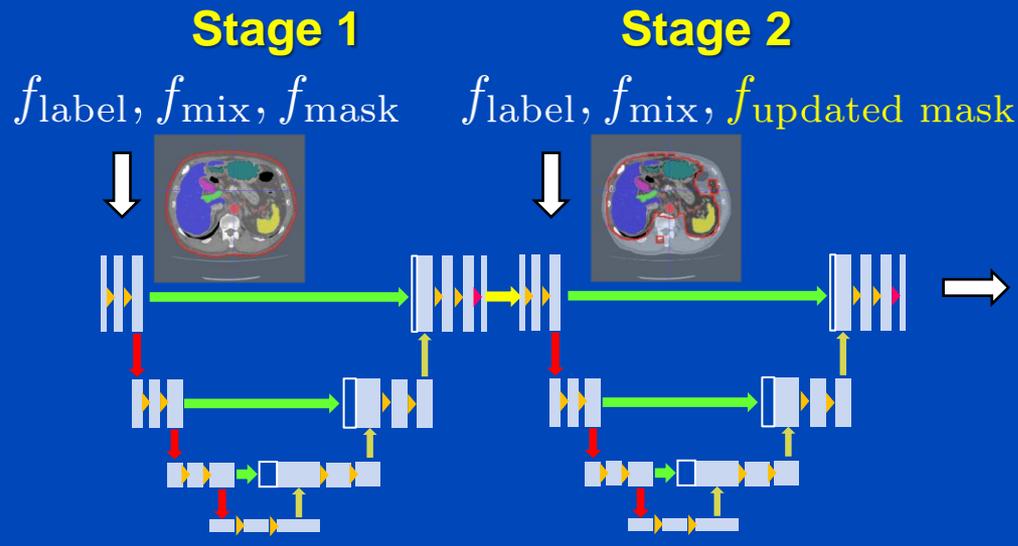
Methods

- Prior anatomical knowledge is gained from an automatic multi-organ segmentation
 - Hierarchical 3D fully convolutional neural network consisting of two consecutive stages¹
 - Coarse-to-fine segmentation based on 3D U-Net
1. Detection of abdominal cavity



Methods

- Prior anatomical knowledge is gained from an automatic multi-organ segmentation
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 1. Detection of abdominal cavity
 2. Detection of target organ boundaries



detection of
multiple organs

Methods

Open-source implementation of two stages cascaded network²

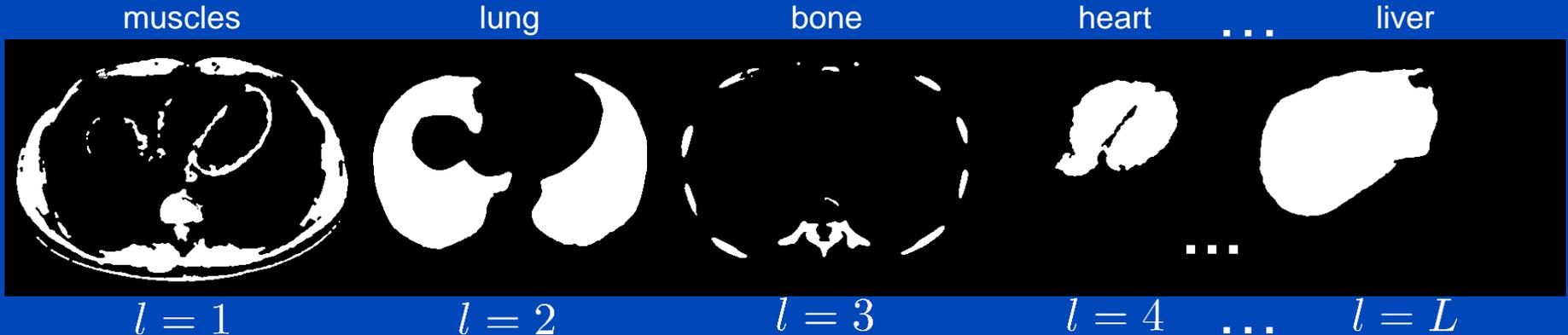
→ fine-tuning of pre-trained network to fit to our data

- **42 contrast-enhanced clinical torso DECT datasets**
 - 30 for training, 6 for validation, 6 for test
- **NVIDIA GeForce GTX 1080 Ti**
- **Training: ~ 3 days per stage**
- **Segmentation: several minutes**

Methods

- Automatic segmentation: **liver, kidneys, spleen, lung, aorta.**
- Thresholding remaining voxels into the following tissue types: **muscles, fat, bone, vasculature.**
- Currently, manual corrections are necessary (until today).

→ Segmentation delivers a binary mask $m_l(\mathbf{r})$ for each tissue label



Methods

- Smoothing of the binary masks $m_l(\mathbf{r})$ to cope with the boundaries of adjacent anatomical structures.

$$\bar{w}_l(\mathbf{r}) = m_l(\mathbf{r}) * G(\mathbf{r})$$
$$w_l(\mathbf{r}) = \frac{\bar{w}_l(\mathbf{r})}{\sum_l^L \bar{w}_l(\mathbf{r})}$$
$$G(\mathbf{r}) = \frac{1}{\sigma\sqrt{2\pi}} \exp^{-\frac{r^2}{2\sigma}}$$
$$\sum_l^L w_l(\mathbf{r}) = 1$$

- Zero-mean Gauss, σ determines width of overlap in mm.
- Weighting masks $w_l(\mathbf{r})$ allow for individual settings for each organ.



Context-sensitive (CS) = organ-dependent parameter adaptation

Context-Sensitive (CS) Reconstruction

- Reconstruct B basis $f_b(\mathbf{r})$ emphasizing certain image properties
 - f_1 = smooth reconstruction (for e.g. soft tissue, liver, etc.)
 - f_2 = sharp reconstruction (for e.g. lung, bone, etc.)

- The CSR image is defined as

$$f_{\text{CSR}}(\mathbf{r}) = \sum_{l=1}^L \sum_{b=1}^B w_l(\mathbf{r}) \cdot \Gamma(l, b) \cdot f_l(\mathbf{r})$$

$$\Gamma(l, b) = \begin{cases} 1 & , \text{if basis image } b \text{ is assigned to label } l \\ 0 & , \text{otherwise.} \end{cases}$$

- L #labels
- B #basis images
- $w_l(\mathbf{r})$ prior organ-specific weight for each voxel \mathbf{r}

$$L \geq B$$

Context-Sensitive (CS) Display

- The CS center and width for each voxel is given by

$$C_{CS}(\mathbf{r}) = \sum_{l=1}^L w_l(\mathbf{r}) \cdot C_l,$$
$$W_{CS}(\mathbf{r}) = \sum_{l=1}^L w_l(\mathbf{r}) \cdot W_l.$$

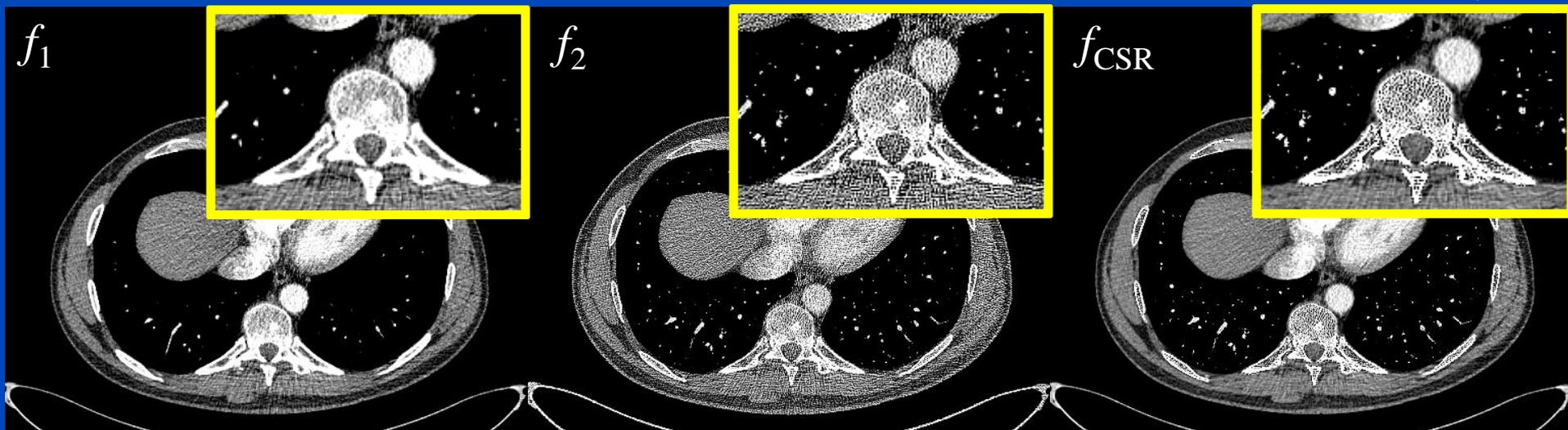
- C_l, W_l predefined center/width for label l
- Images are viewed with an adaptive sliding thin slab (STS) technique.
 - STS mean intensity projection in e.g. soft tissue
 - STS maximum intensity projection (MIP) in e.g. lung

CS Reconstruction

standard low resolution
image (smooth kernel D30f)

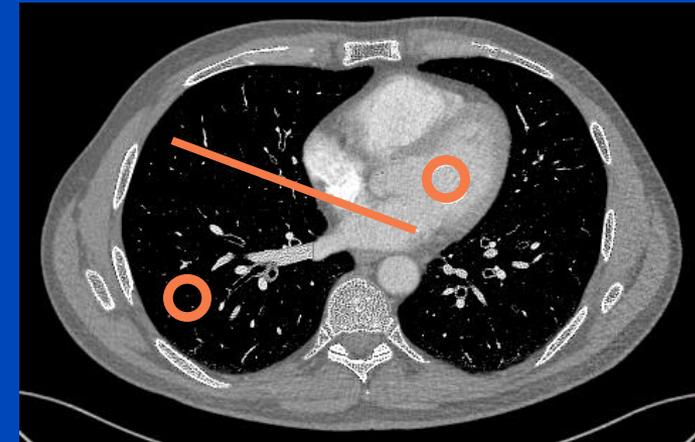
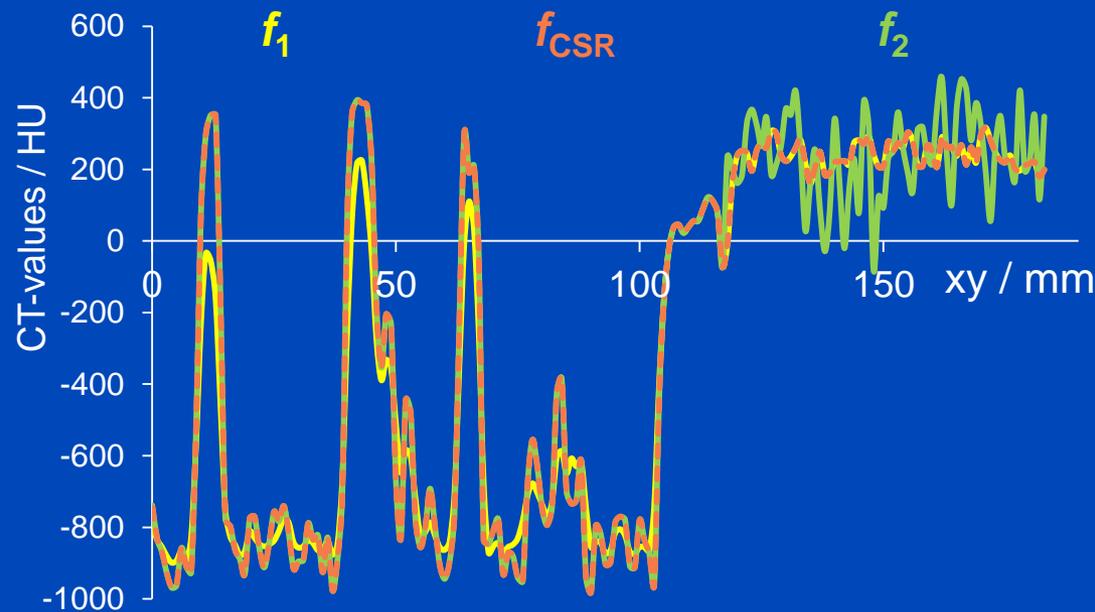
standard high resolution
image (sharp kernel B70f)

resolution-mixed image
(high resolution in lung and bone,
low noise in soft tissue)



C / W = 60 / 400 HU

CS Reconstruction



	ROI ₁ lung $\mu \pm \sigma$	ROI ₂ heart $\mu \pm \sigma$
f_1	-820 \pm 58 HU	240 \pm 48 HU
f_2	-814 \pm 152 HU	233 \pm 121 HU
f_{CSR}	-814 \pm 152 HU	240 \pm 48 HU

- ✓ Increased spatial resolution in bone and lung
- ✓ Decreased noise level in soft tissue

CS Reconstruction



abdomen window
C/W = 40 / 300 HU

lung window
C/W = -600/1200 HU

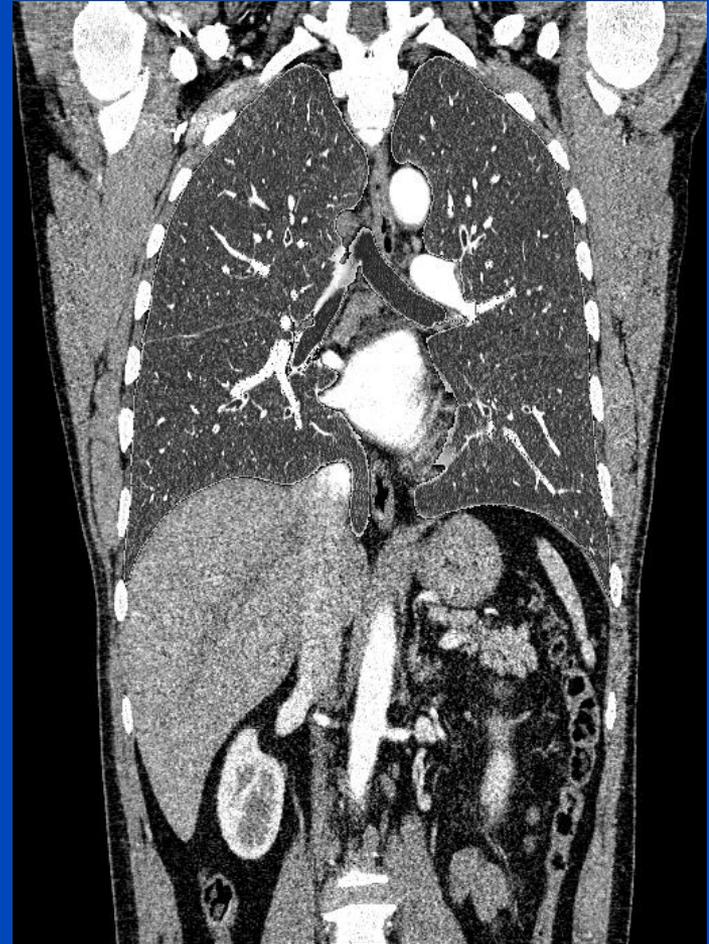
bone window
C/W = 450/1500 HU

→ Need of a context-sensitive display approach!

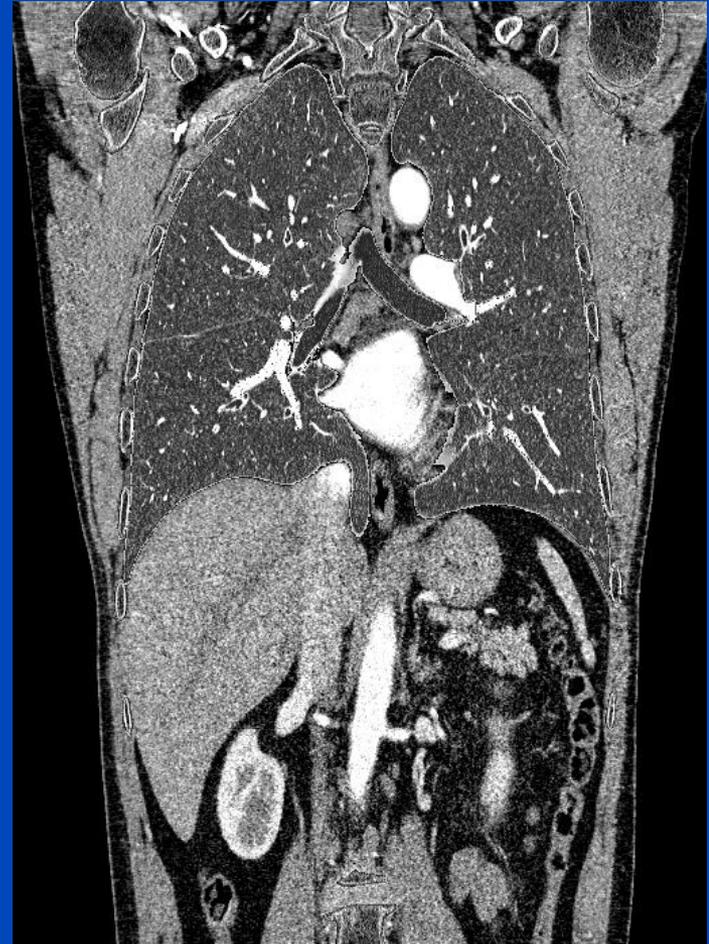
CS Display Adaptive Windowing



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CS Display Adaptive Windowing

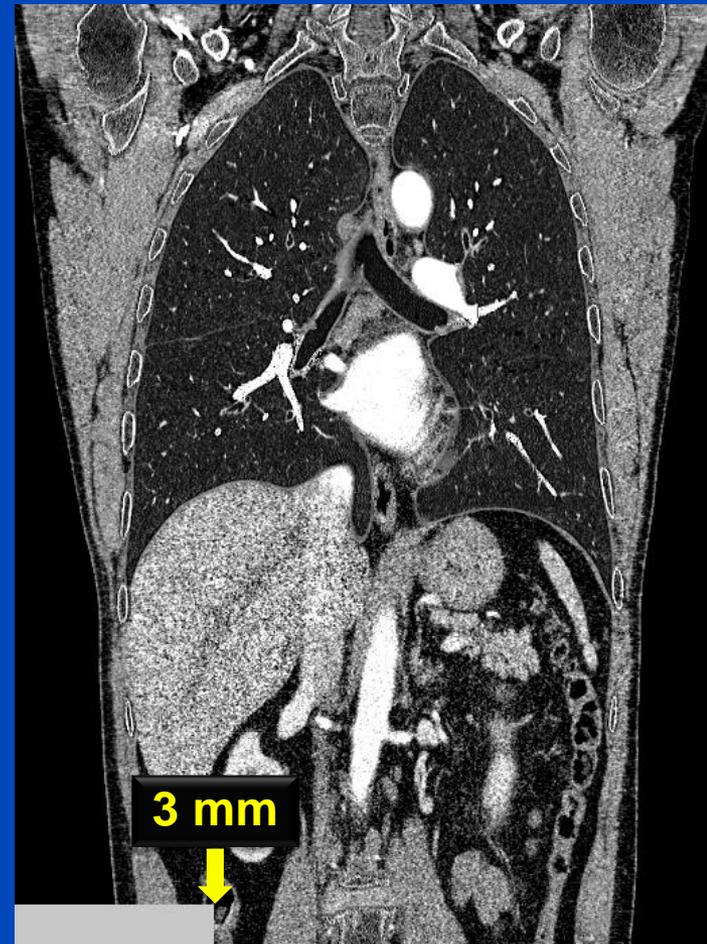


CS Display Adaptive Windowing



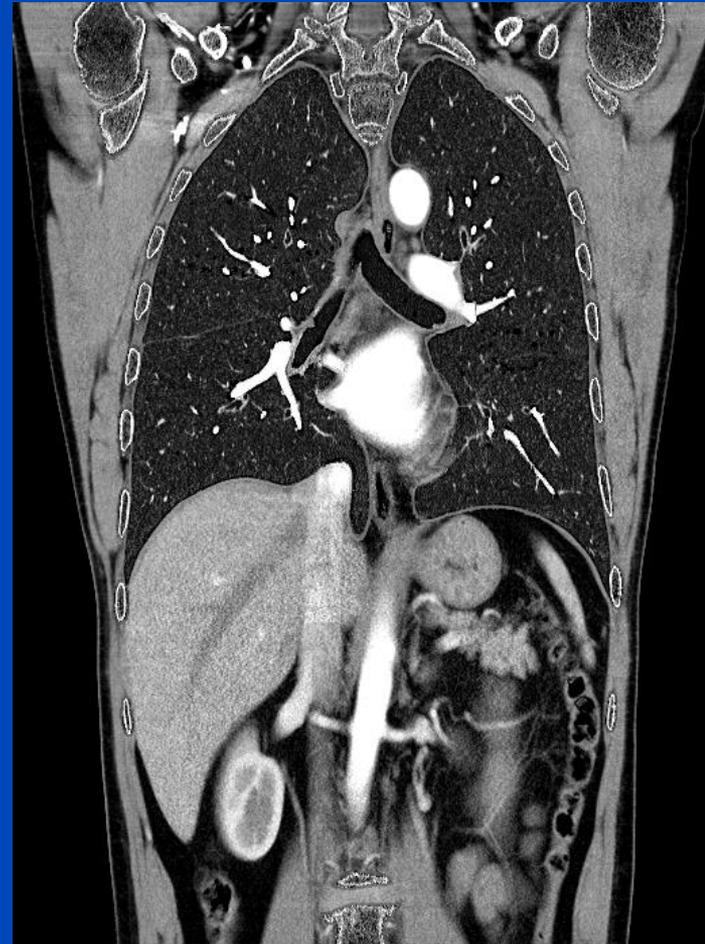
CS Display Soft Blending

- Varying σ during the Gaussian smoothing result in different blending widths $w_l(r)$
- We use 3 mm blending
 - Good compromise between hard transitions and over smoothing



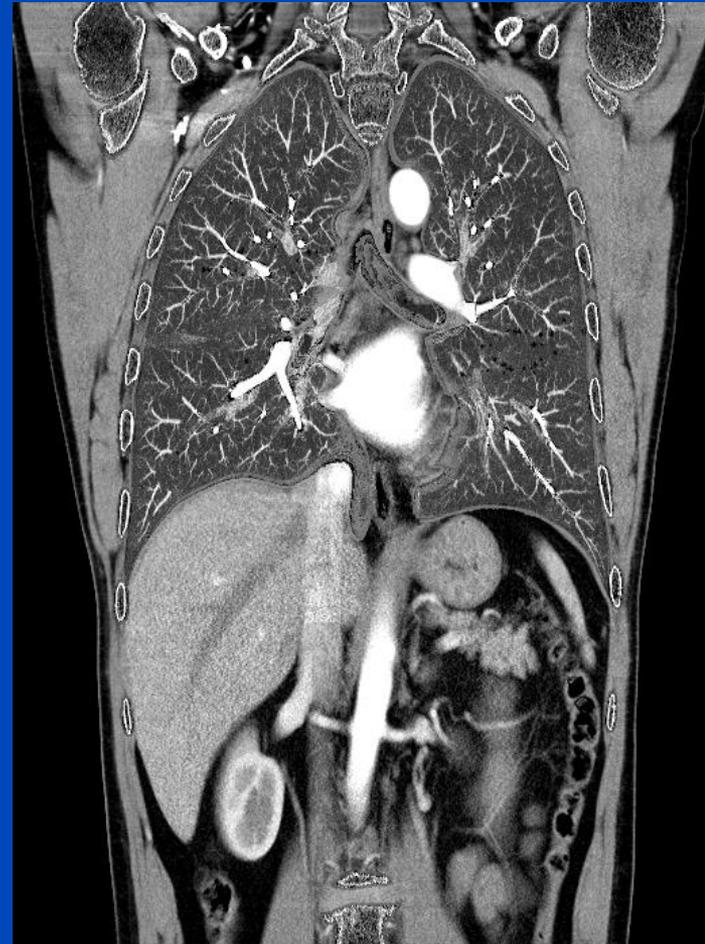
CS Display Sliding Thin Slab

- STS mean in soft tissue (5 mm)
 - Less noise in soft tissue



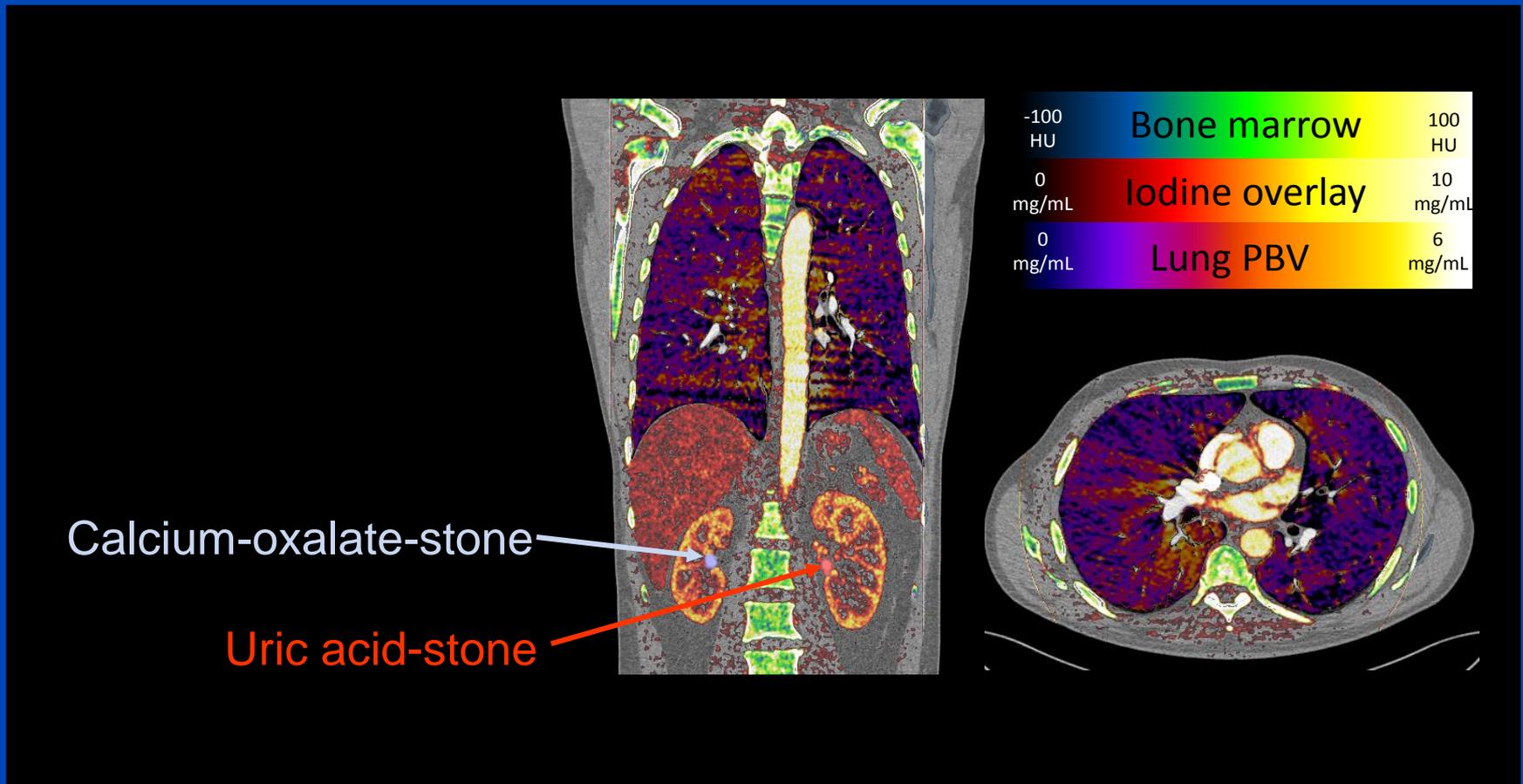
CS Display Sliding Thin Slab

- STS MIP in lung (10 mm)
 - Better visualization of lung vessels



Context-Sensitive Dual Energy

- Simultaneous DE evaluation with commonly used applications



Conclusions

- **Method strongly depends on the segmentation accuracy**
 - Still needs improvement
- **Context-sensitive reconstruction**
 - Combines mutually exclusive image properties
 - » High spatial resolution in bone and lung
 - » Low noise in soft tissue
- **Context-sensitive display**
 - Able to present significantly more information to the reader simultaneously
 - Dealing with multiple image stacks may be no longer necessary

Outlook

- **Development of GUI for CS reconstruction and display**
- **Method readily extendable to multi energy data as well as to other modalities**

Thank You!

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This presentation will soon be available at www.dkfz.de/ct.

Job opportunities through DKFZ's international PhD or Postdoctoral Fellowship programs (www.dkfz.de), or directly through Marc Kachelriess (marc.kachelriess@dkfz.de).

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