

Factors affecting the task specific modulation transfer function in computed tomography

Naomi Clayton
Trainee Clinical Scientist

The problem

- Optimisation
 - The balance between image quality and dose
 - Particularly important in CT
- Image quality testing
 - But is image quality testing really representative of clinical image detectability?

A solution?

Observer studies

- Time
- 'Clinical' images or test object
- Different or poor?

Figure of merit

- Need clinical input to decide acceptable detectability
- NPS and MTF and dose

MTF

- Physicist only
- Possible within normal QC

Factors affecting MTF in CT

- Iterative reconstruction
 - Different manufacturers have shown differences in MTF of between 0% and 12%
- Task specific contrast levels
 - Papers disagree on the effect on MTF

Project Aim

- Method of task specific MTF measurement
 - Manufacture of a suitable phantom
 - Development of analysis software
- Greater understanding of Siemens Somatom Definition AS+ algorithms used at UHBristol.

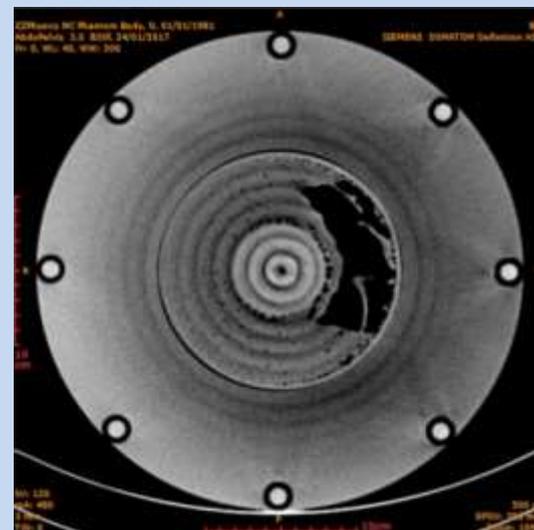
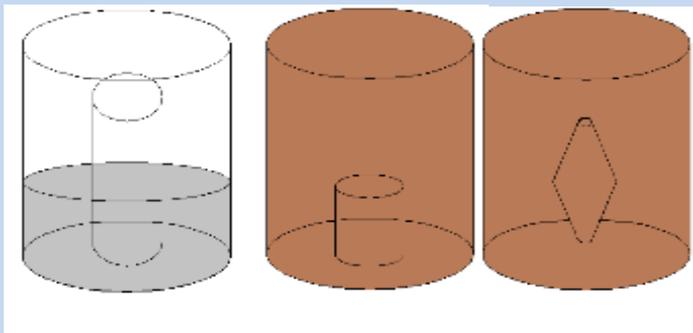
Phantom planning

- MTF by circular edge method
 - PMMA rods (120HU)
- Multiple contrast levels

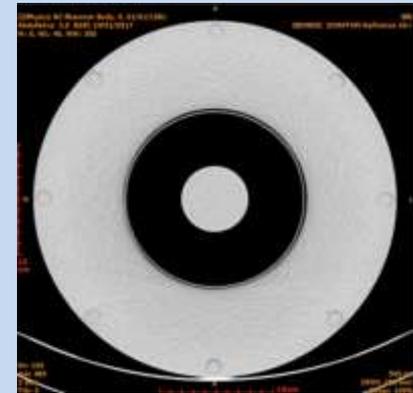
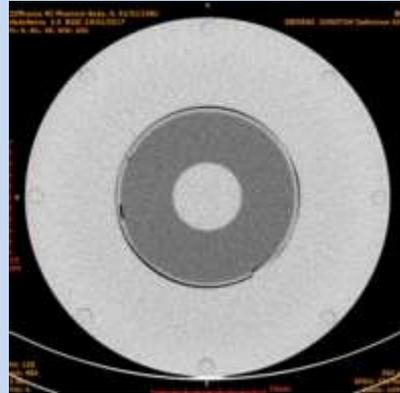
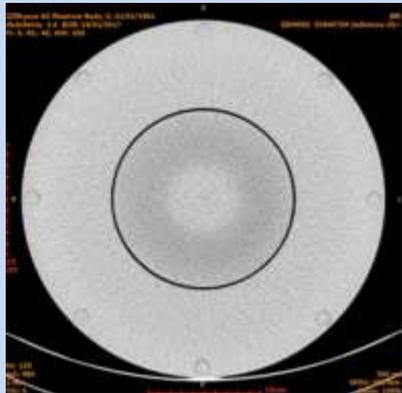
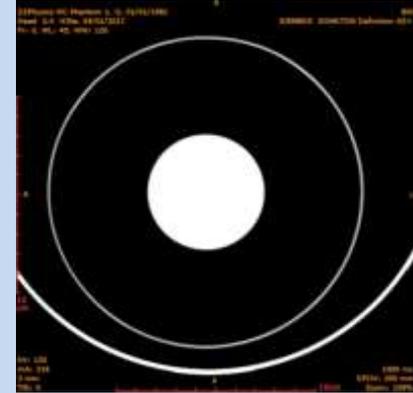
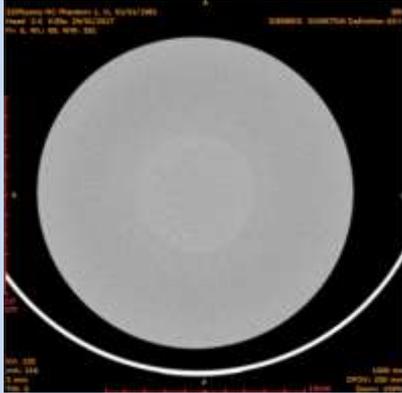
| Air | Axson F18 fast cast | DSM6060 Polyester |
|---------|---------------------|-------------------|
| -1000HU | 20HU | 115HU |
| 1120HU | 100HU | 5HU |

- Inside CTDI phantom for “body”

Phantom building



Imaging



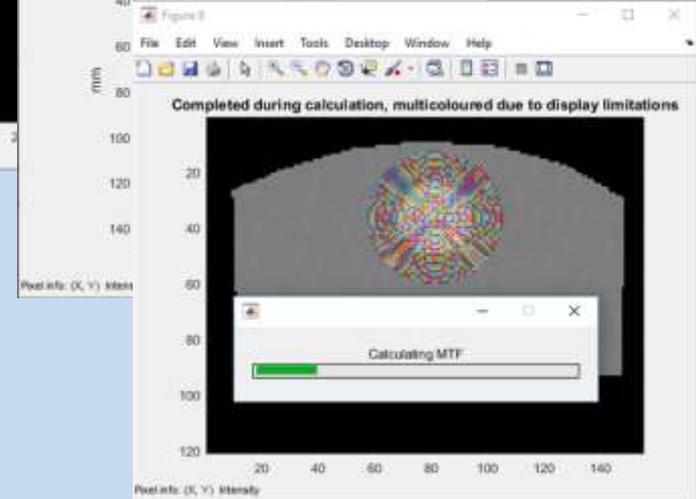
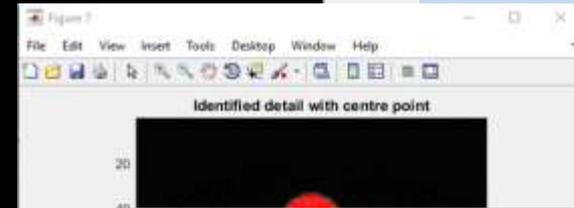
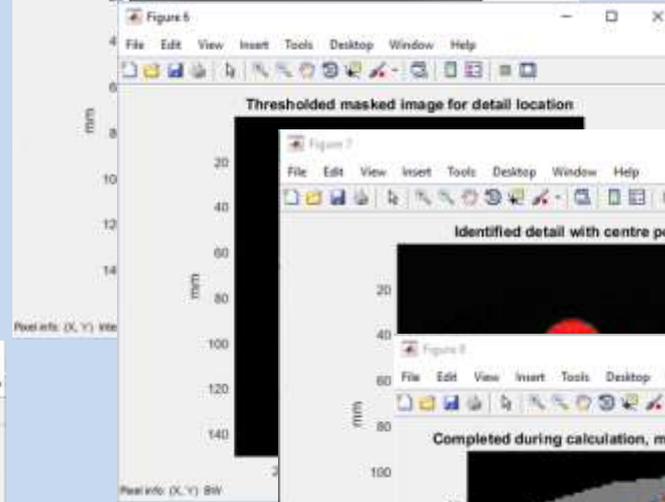
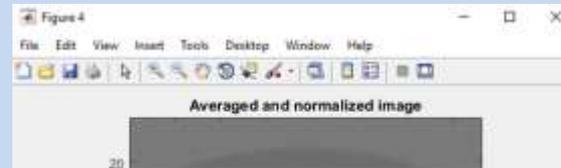
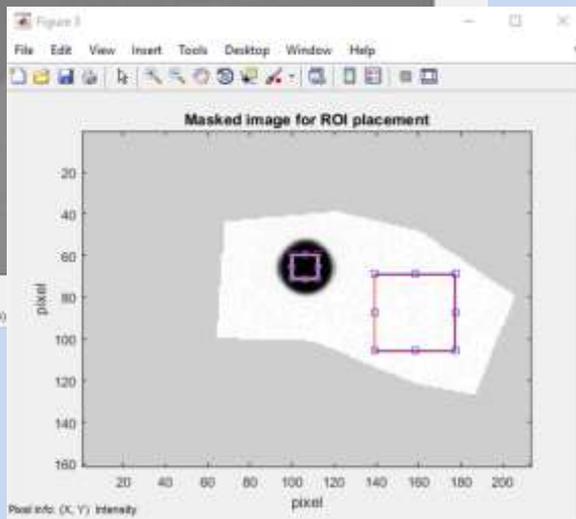
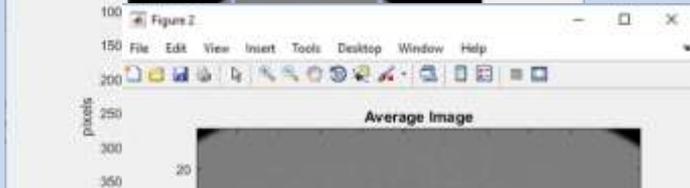
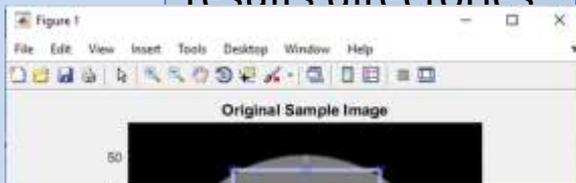
Code writing

- Original MATLAB code published by Friedman et.al. MedPhys 2013
- Limitations to adapt
 - Used full ACR phantom edge with air
 - Need to be able to select region and remove artefacts/other details
 - Generates two text files with the axis and MTF data
 - Excel output for easier manipulation

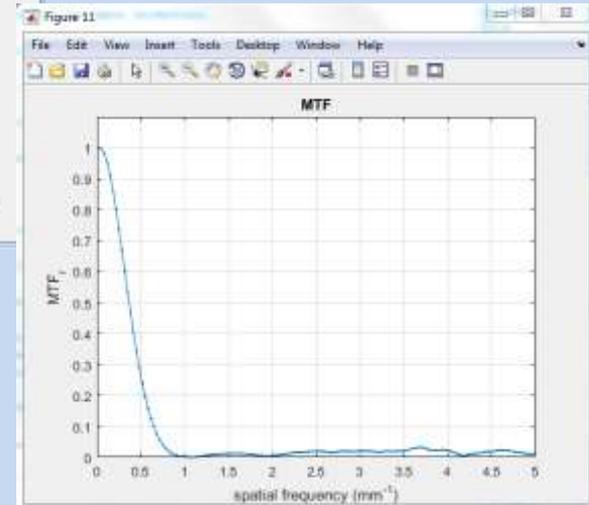
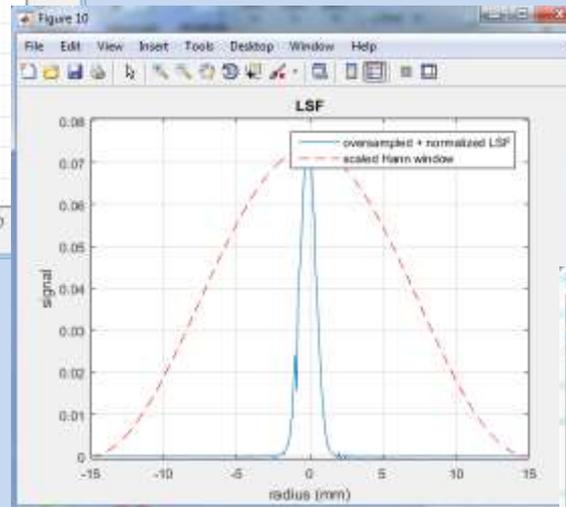
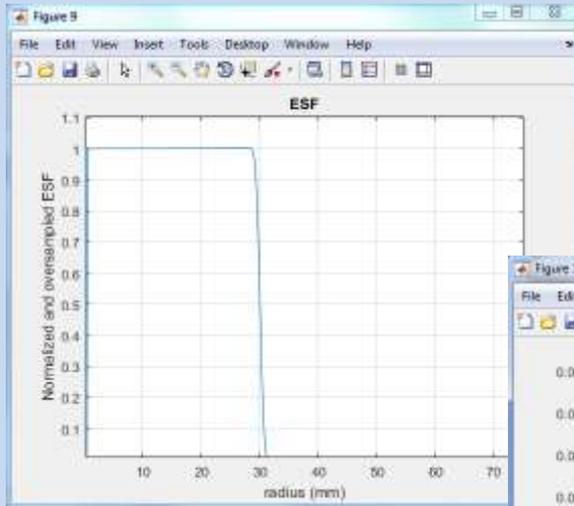
MATLAB Code

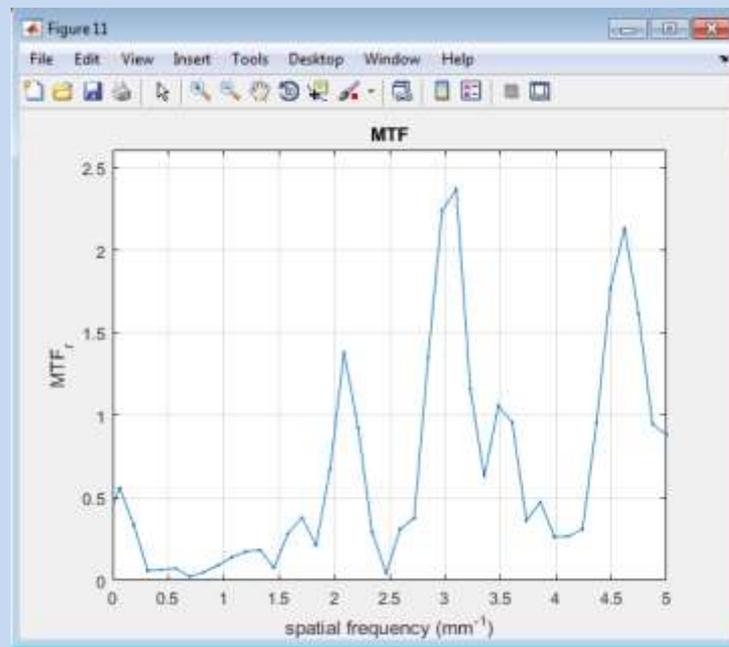
User defined
variables

Select data and
results directories



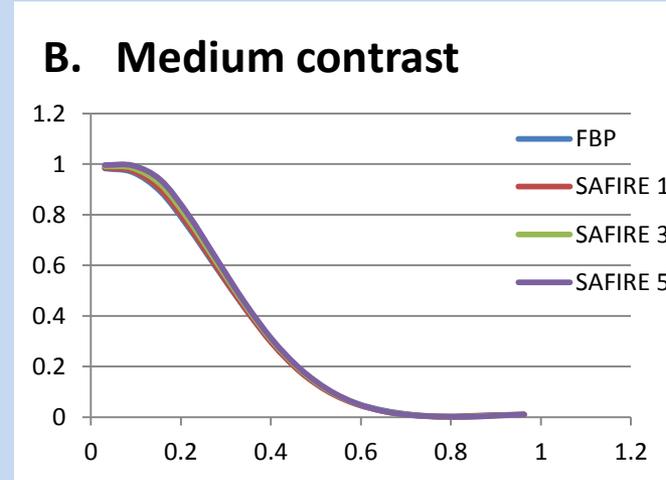
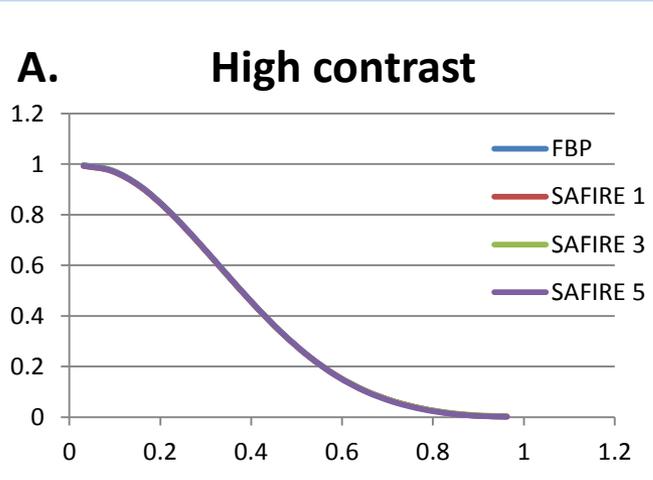
MATLAB Code



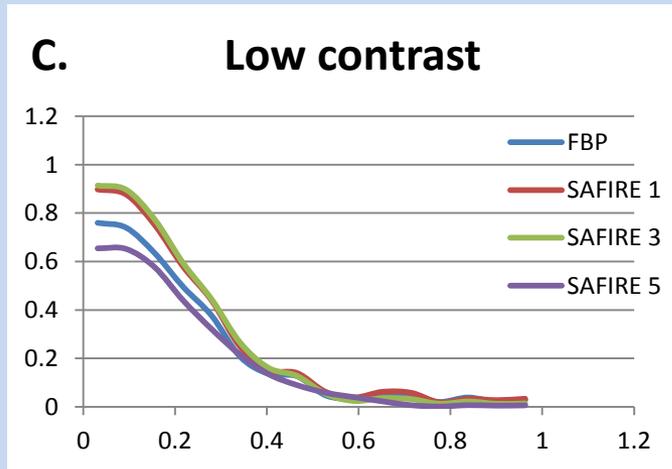


- Low contrast region too noisy – unusable
- Very careful user region definition required
 - Any tiny artefacts/CATPHAN detail changes the peak in the LSF
- Removal of noisy tails of LSF required in med/low contrast regions
 - Leads to reduction in MTF through loss of data

Iterative Reconstruction Results

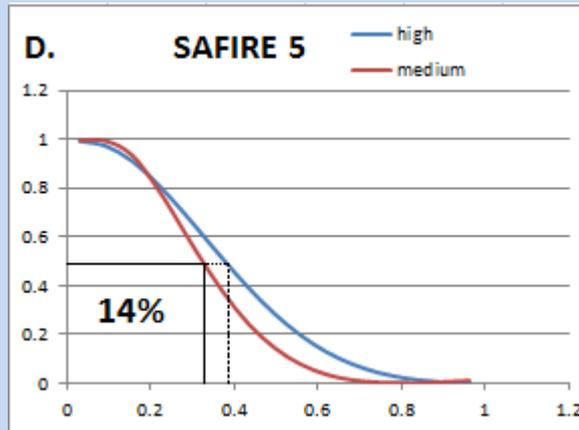
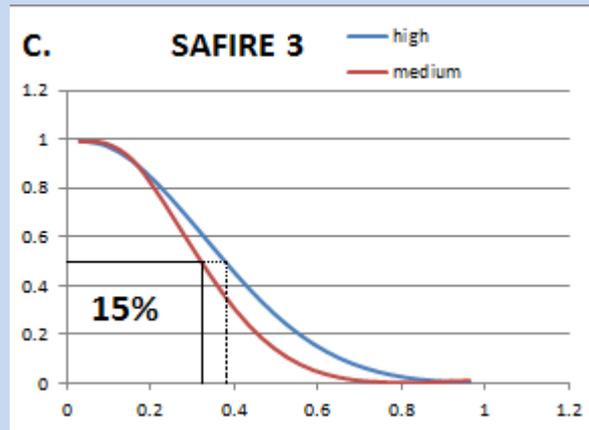
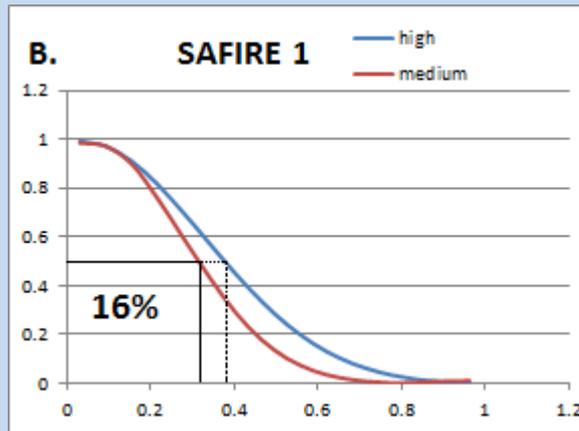
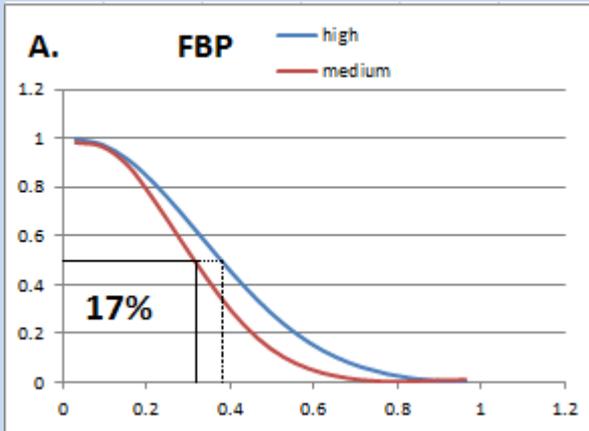


3%



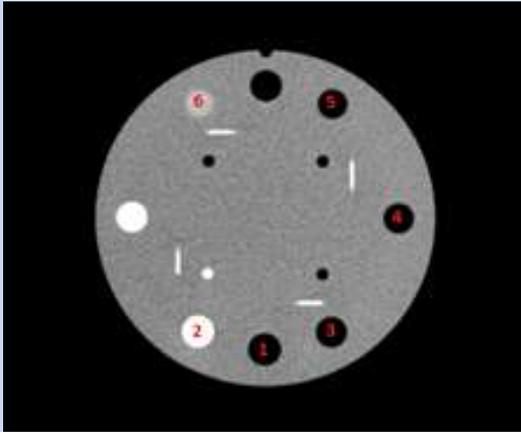
- Very little effect on MTF due to the use of iterative reconstruction

Detail contrast results



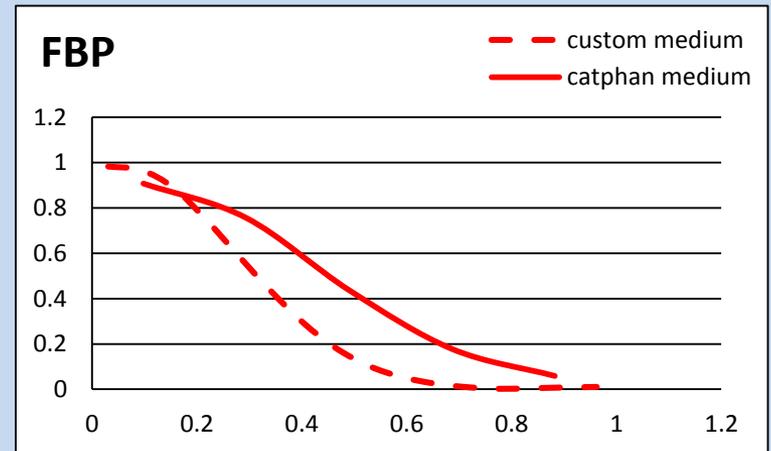
- The contrast of the detail used does affect the 0.5MTF by up to 17%

CATPHAN



| Detail number | Material | Expected CT no. | Measured CT no. | Contrast | Comparable to custom phantom |
|---------------|-------------|-----------------|-----------------|----------|------------------------------|
| 1 | Air | -1000 | -994 | 1089 | High (1120) |
| 2 | Teflon | 990 | 910 | 815 | |
| 3 | PMP | -200 | -183 | 278 | |
| 4 | LDPE | -100 | -92 | 187 | |
| 5 | Polystyrene | -35 | -35 | 130 | Medium (100) |
| 6 | PMMA | 120 | 115 | 20 | Low (5) |

- Very different shape from custom phantom.
- Size of detail causing the drop from 1 at $f=0$.
 - Try decreasing the radius increment of calculation.



Conclusions

- Phantom manufacture is very difficult!
- The Siemens Somatom iterative reconstruction algorithms did not affect MTF (across all contrasts tested)
- For the custom phantom there was a 17% difference in MTF (max) between high and medium contrast details (for FBP and IR)

Further work

- Look at other manufacturers scanners within UHBristol
 - No effect of iterative recon in Philips
 - Toshiba and GE to go
- Further discussion needed to find of ways to look at low contrast
 - Fillable phantom?
- Converting MATLAB code to ImageJ for wider use.



Thank you!

Naomi.Clayton@uhbristol.nhs.uk

References

- Friedman, 2013. A simple approach to measure computed tomography MTF and NPS using the ACR accreditation phantom. *Medical Physics*, 40(5).
- Friedman & Cunningham, 2008. Normalisation of the modulation transfer function: The open-field approach. *MedPhys*, 35(10).
- Christianson, 2015. An improved Index of Image Quality for task-based performance of CT iterative reconstruction across three commercial implementations. *Radiology*, 275(3).
- Edyvean, 2004. *Comparison of CT scanner image noise, image width, dose and spatial resolution using standard test methods*. Pittsburgh, AAPM.
- Richard, 2012. Towards task-based assessment of CT performance: System and object MTF across different reconstruction algorithms. *Medical Physics*, Issue 39.
- Schindera, 2013. Iterative reconstruction algorithm for CT: Can radiation dose be decreased while low contrast detectability is preserved? *Radiology*, 269(2), pp. 511-518.
- Baker, 2012. Contrast to noise ratio and low contrast object resolution on full and low dose MDCT:SAFIRE versus filtered back projection in a low contrast object phantom and in the liver. *AJR*, Volume 199, pp. 8-18.
- Jaffe, 2007. Radiation doses from small bowel follow through and abdominopelvic MDCT in Crohn's disease. *AJR*, 1022(195), p. 1015.