Estimate, Compensate, Iterate

Joint Motion Estimation and Compensation in 4-D Cardiac C-arm Computed Tomography

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Outline

- 1. Introduction: Clinical Setting
- 2. State-of-the-Art: 4-D Cardiac C-arm CT
- 3. **Method**: Iterative Motion Estimation and Compensation
- 4. **Experiments:** Data, Quantitative and Visual Results
- 5. Summary and Outlook: Trade-off, Functional Analysis









Clinical Setting

- Interventional 4-D (3-D+t) C-arm CT of the left ventricle
- Goal: Functional analysis of cardiac motion



Fig.: Artis zeego multi-axis C-arm system, Siemens Healthcare GmbH, Forchheim, Germany.



Fig.: Rotational angiogram, courtesy of Dr. Bernd Abt, Centre of Cardio-vascular Diseases, Rotenburg a.d. Fulda, Germany.



Gated Reconstruction

Retrospective electrocardiography (ECG) gating [1]:



Fig.: Projection images from a C-arm sweep belonging to the same relative heart phase.

[1] Desjardin et al.: ECG-gated Cardiac CT, Am J Roentgenol, 2004



Motion Compensation

- Image quality of gated reconstructions insufficient
 - Artifacts due to angular undersampling
- Approach: Motion compensated reconstruction [1]
 - Estimate motion from initial reconstruction
 - Final reconstruction from all data



[1] Müller et al.: Image artefact propagation in motion estimation and reconstruction in interventional cardiac C-arm CT, *Physics in Medicine and Biology*, 2014



Temporal Inconsistency



MICCAI'15 | Oct 6, 2015 | Oliver Taubmann | Pattern Recognition Lab, FAU | Estimate, Compensate, Iterate



Temporal Inconsistency – How to Deal with It?

- Artifacts appear to "jump" over time
 - Undesired flickering impression
 - Tough challenge for non-rigid motion estimation
- Temporal regularization / smoothing
 - Temporal TV regularization in algebraic reconstruction [1]
 - Motion estimation using 4-D B-Splines (implicit smoothing) [2]
 - Adaptive Gaussian smoothing based on a motion map [3]

[1] Mory et al.: Cardiac C-arm computed tomography using a 3D + time ROI reconstruction method with spatial and temporal regularization, *Med Phys*, 2014

[2] Metz et al.: Nonrigid registration of dynamic medical imaging data using nD + t B-splines and a groupwise optimization approach, *Med IA*, 2011

[3] Taubmann et al.: Keeping the Pace: Heart Rate Informed 3-D Motion Detection for Adaptive Temporal Smoothing, *Fully3D*, 2015



Iterative Motion Estimation and Compensation







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Method Overview





Motion Estimation

Pair-wise 3-D/3-D image registration [1] of all cardiac phases:

$$\boldsymbol{M}^{*} = \left\{ \underset{\boldsymbol{M}_{t \to t'}}{\operatorname{argmin}} \left[\mathcal{D} \left(\boldsymbol{I}^{t'}, \boldsymbol{M}_{t \to t'} \boldsymbol{I}^{t} \right) \right] : t, t' \in \mathcal{N}_{\text{ph}}, \ t \neq t' \right\}$$



Fig.: Registration of each phase to one reference.

[1] Klein et al.: elastix: a toolbox for intensity based medical image registration, *IEEE Trans Med Imaging*, 2010



Motion Estimation

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• $I = \{I^t : t \in \mathcal{N}_{ph}\}$ • $\mathcal{D}(\cdot, \cdot)$

3-D images for all cardiac phases • $M = \{M_{t \rightarrow t'} : t, t' \in \mathcal{N}_{ph}\}$ Deformation operators for all phase pairs Dissimilarity metric (negative NCC)

[1] Klein et al.: elastix: a toolbox for intensity based medical image registration, IEEE Trans Med Imaging, 2010



Motion Estimation

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- Cubic B-Spline motion model
- Multi-resolution scheme with 3-level pyramid
- Optimization with L-BFGS and random image sampling
- Restricted to ROI \varOmega around the heart

[1] Klein et al.: elastix: a toolbox for intensity based medical image registration, *IEEE Trans Med Imaging*, 2010



Motion Compensation

Motion-compensated (filtered backprojection) reconstruction [1]:

$$oldsymbol{I}^* = \left\{oldsymbol{I}^t: oldsymbol{A}^{t'}oldsymbol{M}_{t
ightarrow t'}oldsymbol{I}^t = oldsymbol{P}^{t'}; \ t,t' \in \mathcal{N}_{ ext{ph}}
ight\}$$

- A^t X-ray projection operator corresponding to P^t
- P^t Measured projections assigned to phase t

[1] Schäfer et al.: Motion-compensated and gated cone beam filtered back-projection for 3-D rotational x-ray angiography, *IEEE Trans Med Imaging*, 2006



Motion Compensation

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Spatio-temporal Regularization

Spatial and temporal bilateral filtering:

$$\boldsymbol{I}_{S}^{t}(\boldsymbol{x}) = \sum_{\boldsymbol{x}' \in N(\boldsymbol{x})} \quad \frac{\boldsymbol{I}^{t}(\boldsymbol{x}')}{w_{S}} \cdot \exp\left(-\frac{\|\boldsymbol{x} - \boldsymbol{x}'\|_{2}^{2}}{2\sigma_{S}^{2}} - \frac{(\boldsymbol{I}^{t}(\boldsymbol{x}) - \boldsymbol{I}^{t}(\boldsymbol{x}'))^{2}}{2\sigma_{I}^{2}}\right)$$
$$\boldsymbol{I}_{ST}^{t}(\boldsymbol{x}) = \sum_{t' \in \mathcal{N}_{ph}} \quad \frac{\boldsymbol{I}_{S}^{t'}(\boldsymbol{x})}{w_{T}} \cdot \exp\left(-\frac{\operatorname{dist}^{2}(t, t')}{2\sigma_{T}^{2}} - \frac{(\boldsymbol{I}^{t}(\boldsymbol{x}) - \boldsymbol{I}^{t'}(\boldsymbol{x}))^{2}}{2\sigma_{I}^{2}}\right)$$

- $\sigma_S, \sigma_T, \sigma_I$ std. devs. in spatial, temporal and intensity domain
- w_S, w_T normalization factors
- dist(t, t') distance of phases in the cardiac cycle



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temporal proximity

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Experiments and Results







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Experimental Setup

- Images compared:
 - Proposed: $I_3^t(x)$, result after three iterations
 - Reference: $I_1^t(x)$, result after first compensation step
- Data:
 - 3 clinical patient data sets
 - Acquisition duration 14.5 s
 - RV pacing to 115 bpm
 - Systemic contrast injection
 (91 ml total, pulmonary artery)

- Dynamic heart phantom [1,2]
 - Scan protocol identical to clinical data sets
 - Ground truth reconstruction from projections of static phantom

[1] Segars et al.: 4D XCAT phantom for multimodality imaging research, *Medical Physics*, vol. 37, 2010.
[2] Maier et al.: CONRAD - A software framework for cone-beam imaging in radiology, *Medical Physics*, vol. 40(11), 2013



Quantitative Results (Phantom)

Quality measures w. r. t. ground truth calculated over Ω :

- RMSE
- UQI [1]

86.3 HU → 73.6 HU (**-14.7 %**)

 $0.80 \rightarrow 0.95$

Motion estimation error $2.08 \pm 1.92 \text{ mm} \rightarrow 1.52 \pm 1.91 \text{ mm}$



[1] Wang et al.: A Universal Image Quality Index, Signal Processing Letters, IEEE, vol. 9, 2002.



Quantitative Results (All Data Sets)

- Quantify reduction of artificial motion
 - Measured in ideally static region $oldsymbol{\Omega}_s \subset oldsymbol{\Omega}$
 - Decrease of temporal intensity variance
- Assess (motion) blur
 - Sharpness of left ventricular blood pool boundary preserved or increased



Fig.: Selected ideally static region in patient 1 (yellow).

Details at our poster or in the paper!





Human Observer Study

Visual image quality rated by human observers

- 9 technical experts blinded to the method
- Scale: 0 ("unacceptable") through 4 ("very good")

| Data set | $oldsymbol{I}_1^t$ | $oldsymbol{I}_3^t$ |
|-----------|--------------------|-----------------------|
| Patient 1 | 2.1 ± 0.60 | 3.7 ± 0.50 |
| Patient 2 | 1.4 ± 0.73 | 2.4 ± 0.88 |
| Patient 3 | 1.4 ± 0.53 | $\textbf{3.4}\pm0.73$ |
| Phantom | 1.9 ± 0.78 | $\textbf{3.7}\pm0.50$ |



Summary and Outlook

• Iterative scheme for improved image quality / motion accuracy:



- Reduced artificial motion patterns ⇔ Increased computational effort
- Future work:
 - Experiments with 4-D iterative reconstruction methods
 - Advancing functional analysis in the interventional suite





Thanks for your attention! Any questions?







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