

Dual Energy CT for Radiation Therapy: Technical Considerations and Clinical Applications







Clinical Applications

Courtesy of MAASTRO Clinic, The Netherlands

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Improved tumor visualization



Increased confidence in tumor contouring with the use of monoenergetic energies acquired with Dual Energy technologies tailored to each scanner.

Artifact reduction



Increased process efficiency and potentially improved clinical outcomes using Dual Energy for metal artifact reduction.

Tissue characterization



Increase the competitiveness of your institution – use Rho and Z as the new foundation for dosimetric calculations and tissue differentiation to put yourself at the forefront of innovation.

Left: Courtesy of: Universitätsspital Basel, / Basel, Switzerland Middle left: Courtesy of: Radiologische Allianz Hamburg Middle right: Courtesy of: Clinique CIMOP Bizet / Paris, France Right: Courtesy of: Khoo Teck Puat Hospital / Singapore

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Metal artefact reduction





Dual Energy CT

Pelvis images courtesy of Courtesy of :Radiologische Allianz Hamburg Spine images courtesy of Clinique CIMOP Bizet / Paris, France

Dual Enegery Monoenergy + Different keV lead to different image impressions





syngo.CT DE Monoenergetic Plus¹⁾ – Enhances soft tissue contrast

syngo.CT DE Monoenergetic Plus²⁾

"Monoenergetic reconstructions at **60 keV** of DECT imaging of head and neck SCC result in a significantly improved overall image quality¹)"







Dual Energy Monoenergy + Brain metastases





T1 WI MRI with Contrast

120 kV

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Electron Density and Effective Atomic Number – Proton Therapy



Image: space of the space of

- Access to electron density and effective atomic number maps in one examination
- Interactive adjustment of material decomposition parameters for immediate optimization of the results
- Separate windowing of low and high kV datasets

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What is Iodine Map? Liver VNC /Lung PBV/ Brain Hemorrhage /Virtual Unenhanced





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True and Virtual Non-contrast Images (VNC)









Lung perfused blood volume -Potentially Sparing Lung IMRT and SBRT planning



"DECT lodine maps **Strongly correlate** with standard **SPECT/CT** for evaluation of differential lung function"

"The use of functional imaging reveals significant variation in **functional dosimetric** parameters as compared to standard anatomical dosimetry in **SABR** and **IMRT** plans¹)"



Courtesy of Centre Hospitalier de l'Université de Montréal; 1) Houda et al, Phase I-II Study of Dual Energy Computed Tomography (DECT) for Assessment of Pulmonary Function in Radiotherapy Planning, Journal of Radiation Oncology. vol 120, p17, (Sep 2017)







Technical considerations



Dual Energy CT – Various approaches





Dual Spiral Dual Energy



2nd spiral @ high kV

- Full number of projections
- Full routine ready
- All dose reduction features available

TwinBeam Dual Energy





Simultaneous acquisition of low and high energy spectra

Dual Source CT Dual Energy





DSCT System Design

 Two X-ray tubes at 95° each with 100 or 120 kW

Two detectors at 95°

each with 0.6mm collimation and double z-sampling (z-flying focal spot)

 0.25s/0.28 s gantry rotation time¹





Dual Energy CT – Various approaches





- Simultaneous acquisition
- Best energy separation
- Limited DE field of view

- "Simultaneous" acquisition
- Decent energy separation
- 50 cm DE field of view

- Sequential acquisition
- Good energy separation
- 50 cm DE field of view



Thank you!



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