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PET/MRI: Technical Design Challenges and Innovations

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PET/MRI: Technical Design Challenges and Innovations Agenda

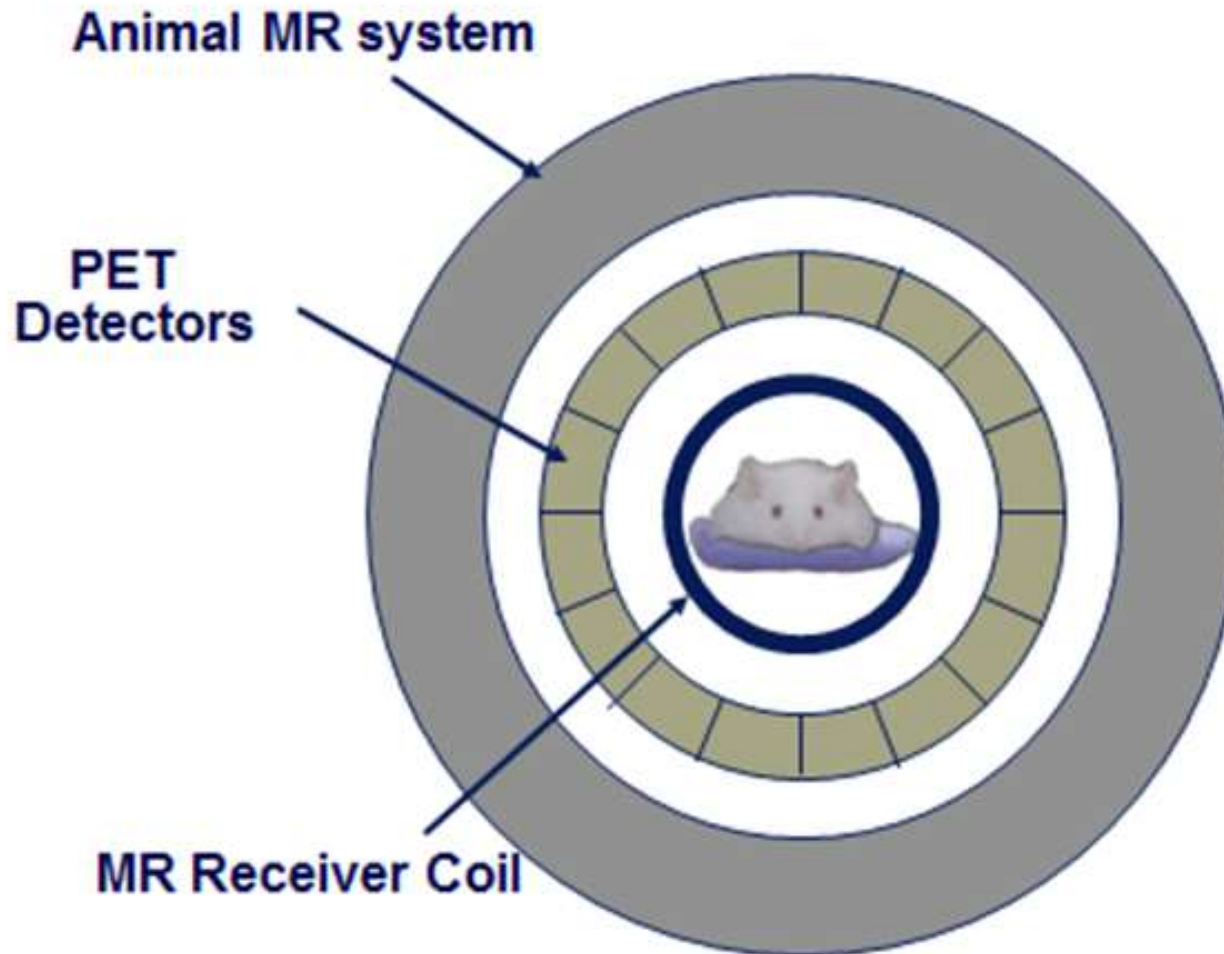


- Historical development of MR and PET technology
- Current hybrid technology
- Potential future outlook

Historical Development of MR and PET Technology

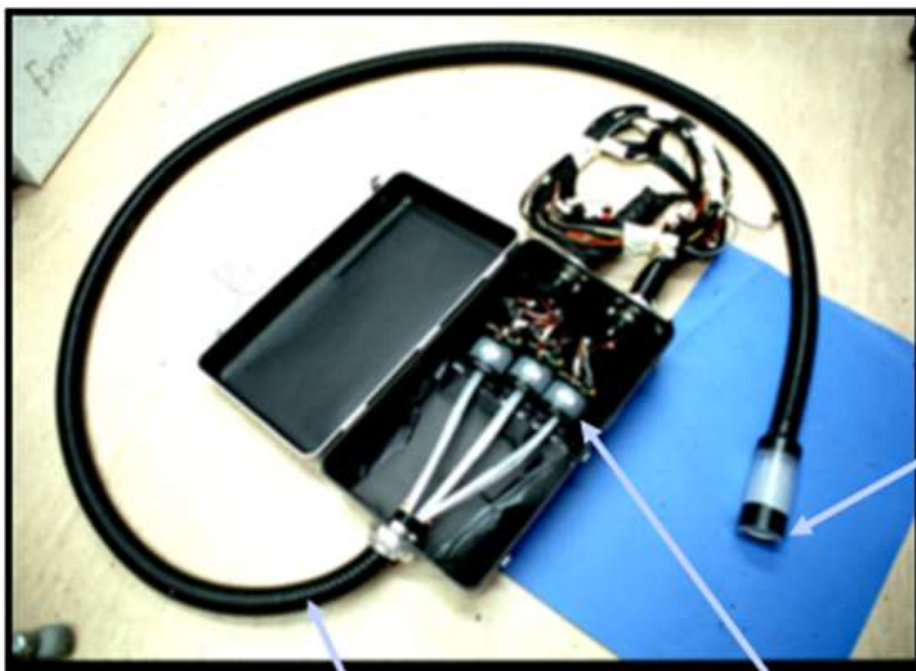
MR Compatible PET System (McPET)

Insert concept by Cherry, et al. – Circa 1997



McPET

System design



optical fibers

PMT's



56 mm ring diameter
72 2x2x25 mm LSO scintillators

McPET Experiment

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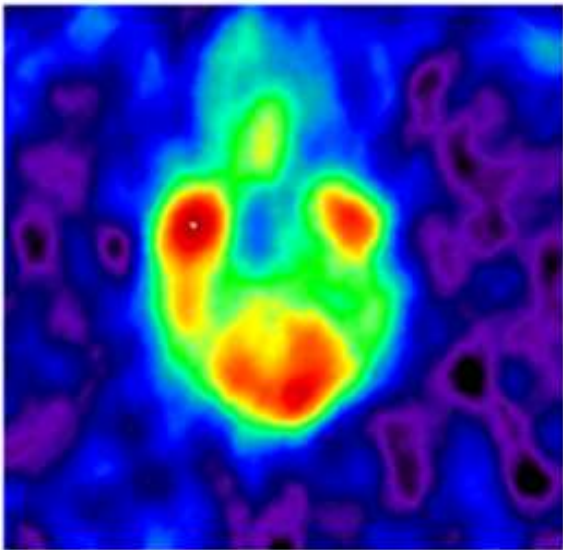


- Prototype MR compatible PET scanner inside 1.5T clinical MR

McPET

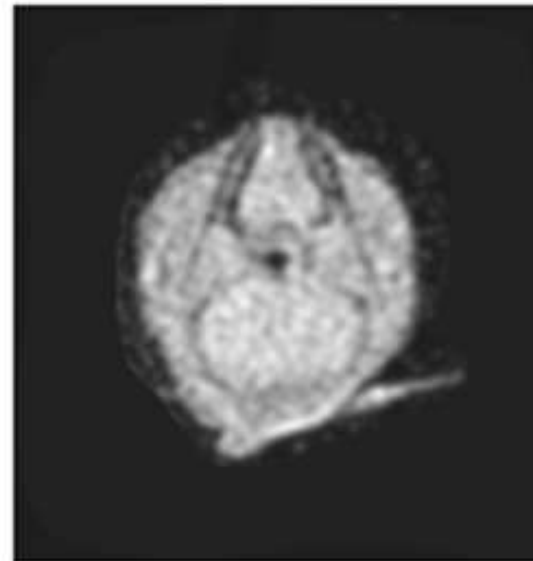
Initial images ~1997-98

Simultaneous *In Vivo* Imaging PET Brain



- 200 g rat injected with 1.3 mCi ^{18}F FDG
- Imaging time = 30 mins
- Slice thickness ~ 2 mm

MR Brain



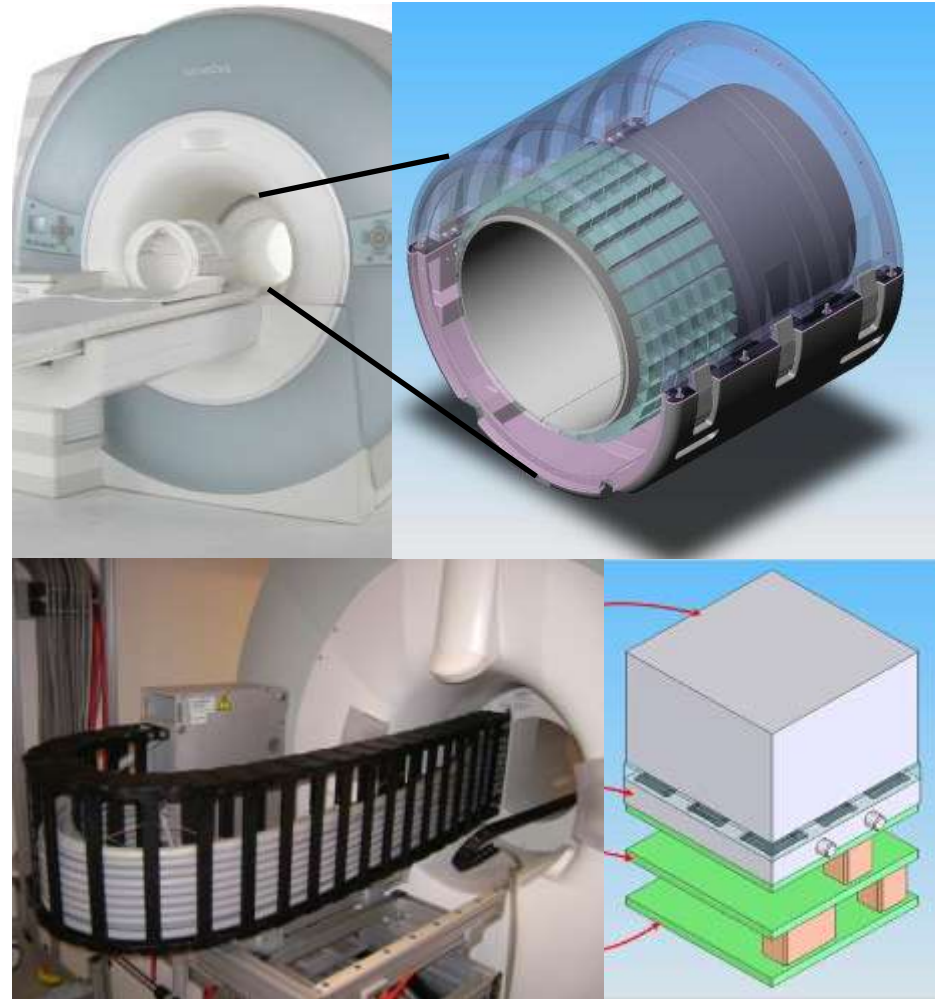
- TE = 12 msec, TR = 280 msec
- Continuous 75 sec acquisition during PET study
- Slice thickness = 4 mm

BrainPET

Siemens' 1st Clinical PET/MRI – Head Insert – Circa 2006

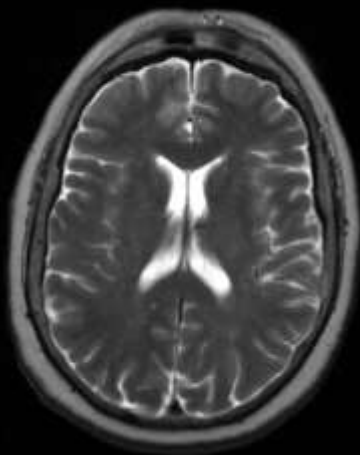
Technical Hurdles:

- Physical size constraints
- Cooling requirements
- RF interference
- Perturbation of MR image quality
- Perturbation of PET image quality
- Serviceability

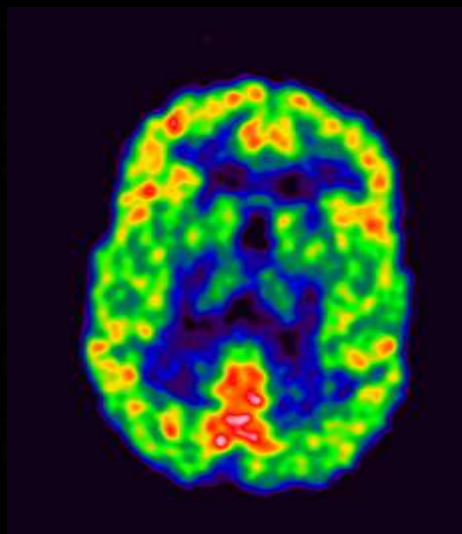


BrainPET

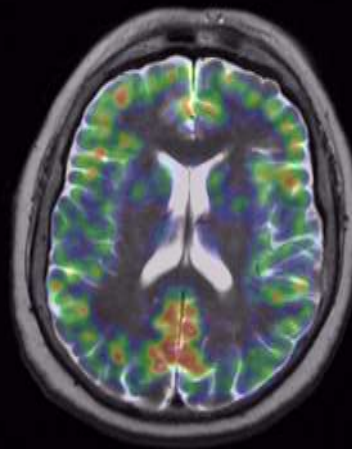
Clinical results ~2006



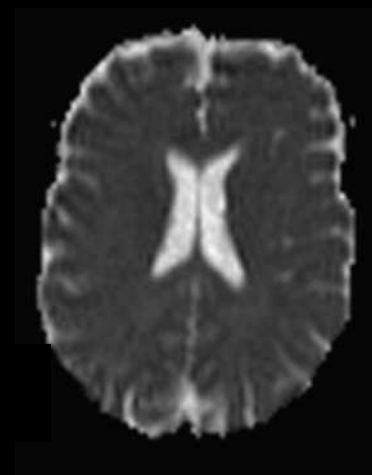
T2 TSE



PET



MR-PET



ADC

- Diffusion EPI sequence applied during PET acquisition.

Current Hybrid Technology

Biograph mMR

First to chart a path

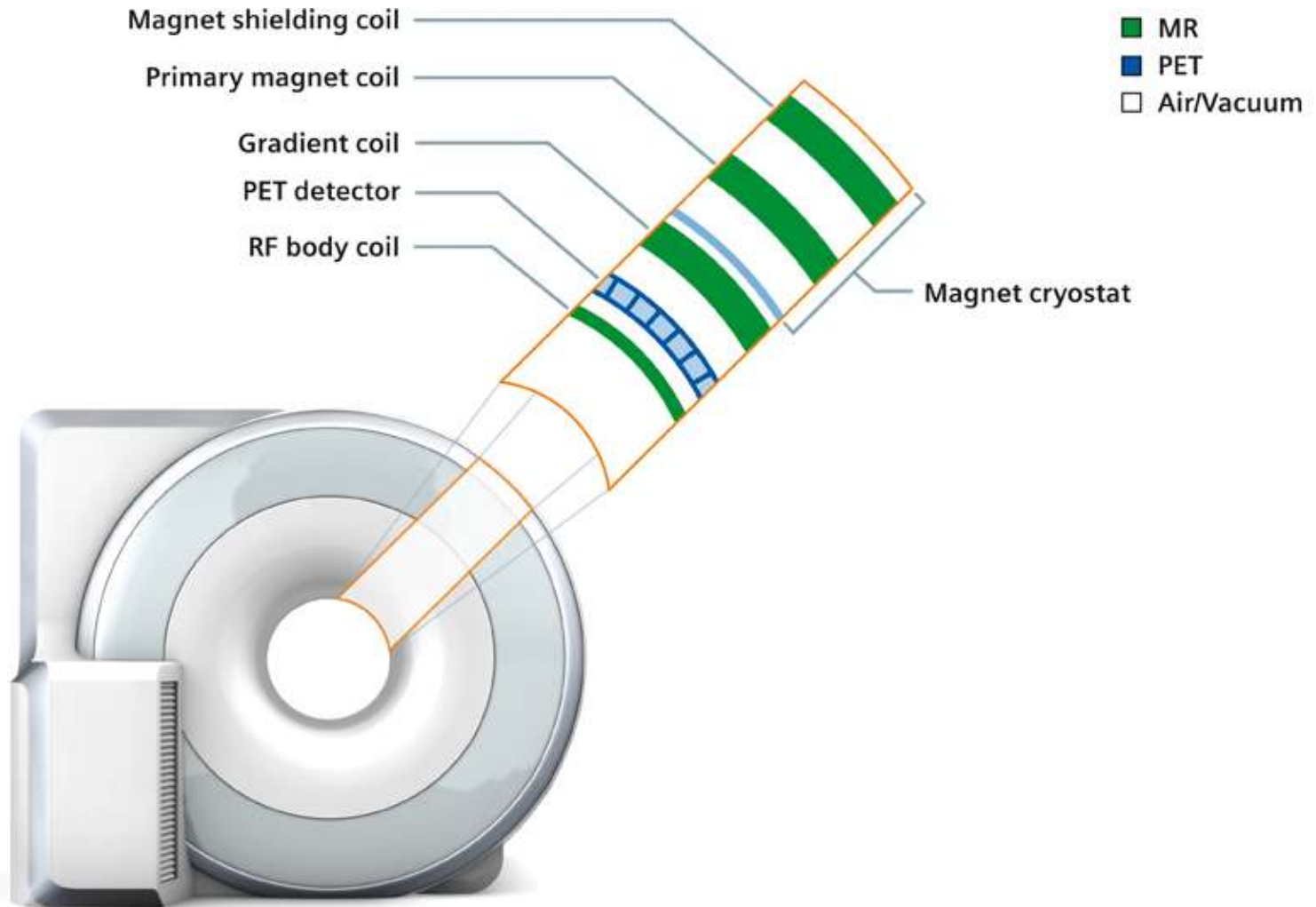
Goals:

- First fully integrated MR and PET system in the world
- Simultaneous imaging of MR and PET
- Ability to image the whole-body
- No compromises on image quality for MR or PET systems
- Workflow integration and efficiency



Biograph mMR

System design concept

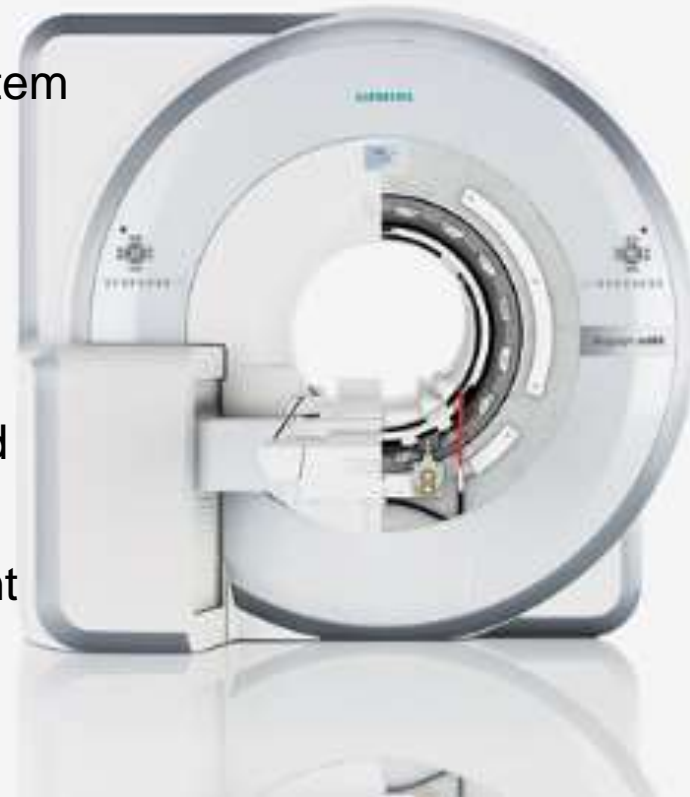


Biograph mMR

System architecture

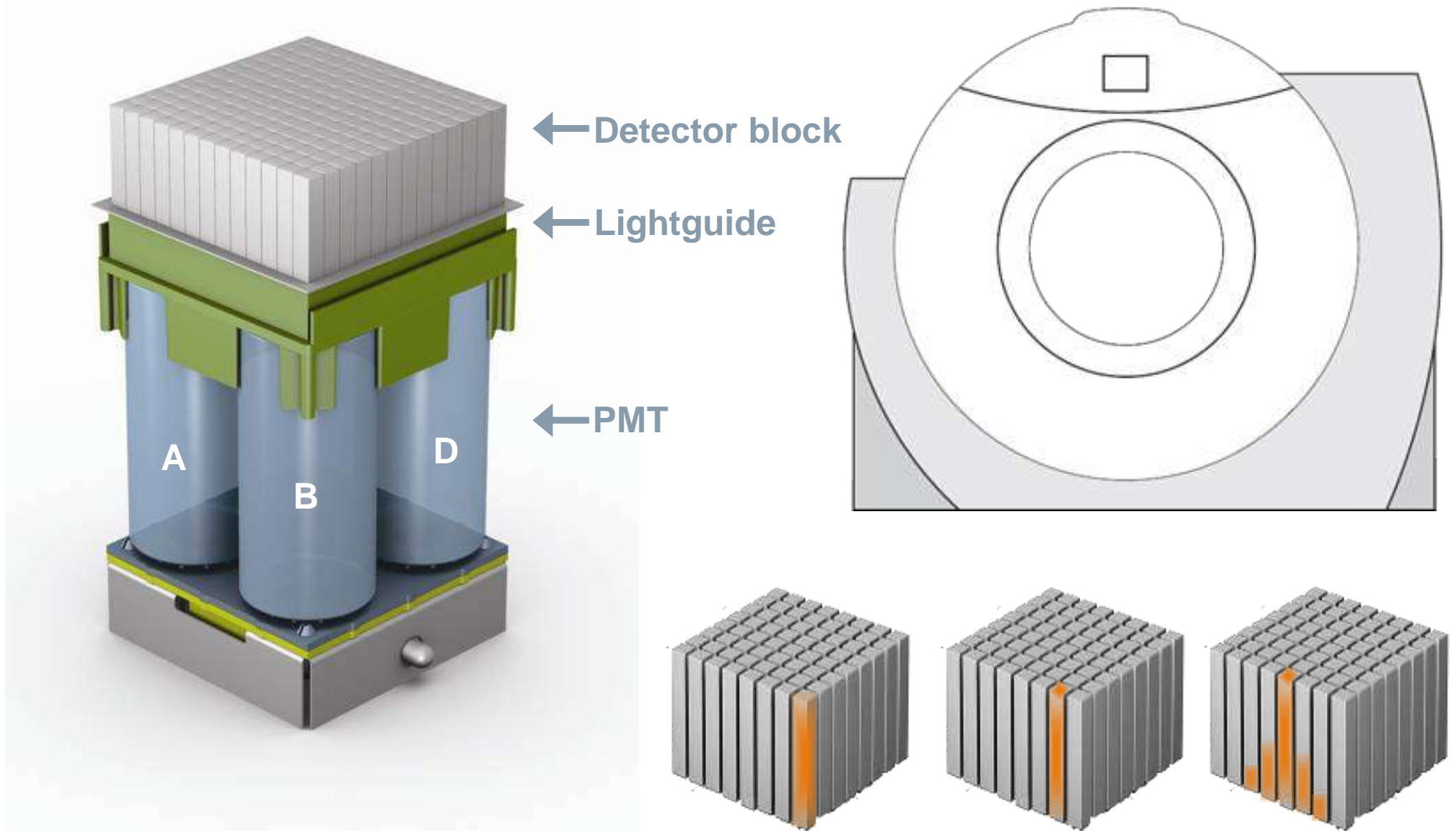
Technical Innovations:

- Solid state detector design
- Common cooling and feedback system
- Component redesign for PET optimization (reduce attenuation)
- RF interference optimization using filtering
- Heat dissipation through design and component selection
- Baseline correction to avoid gradient amplifier noise effects



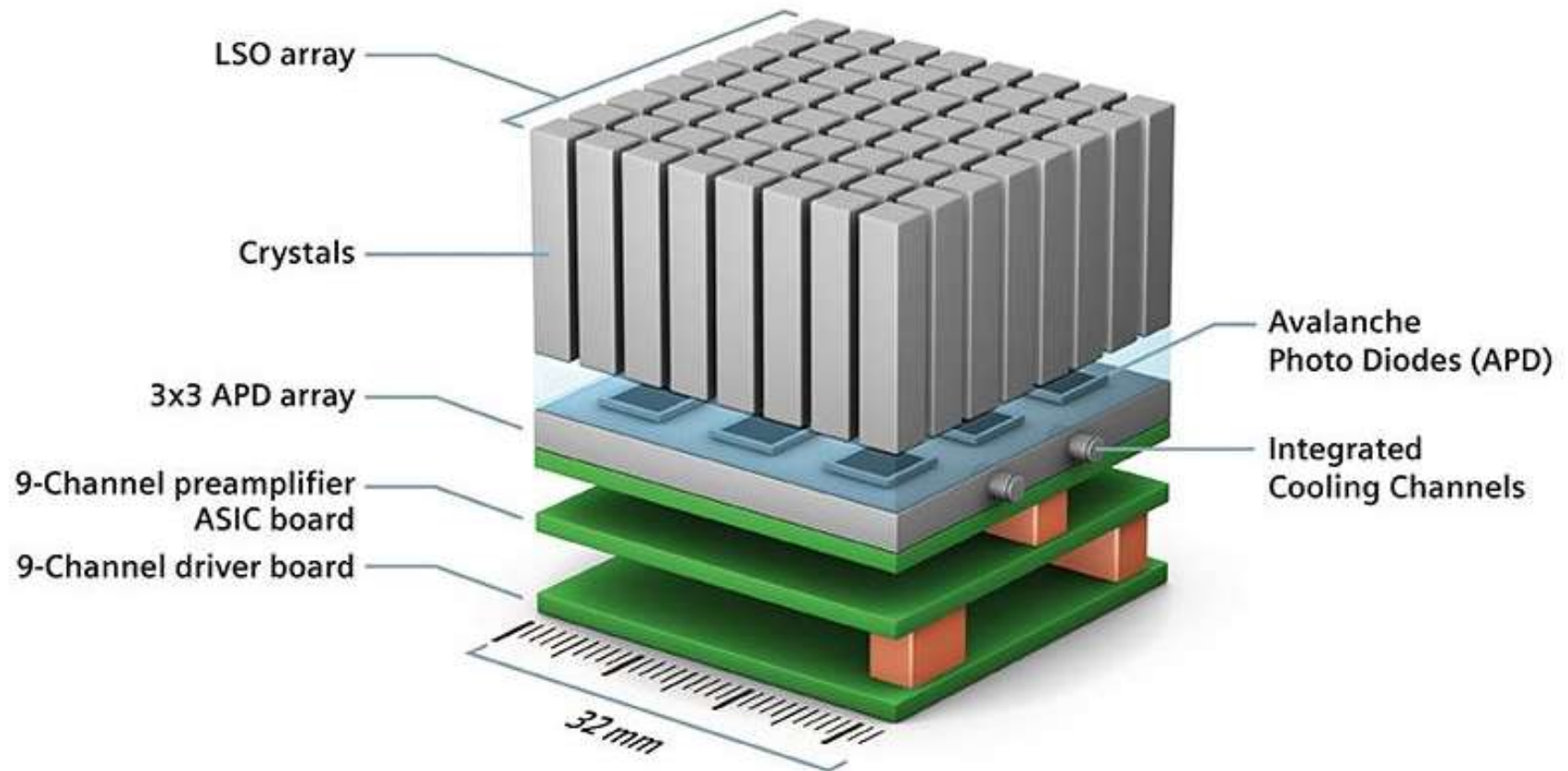
PET Detector Technology

Photomultiplier tube (PMT) based



Biograph mMR

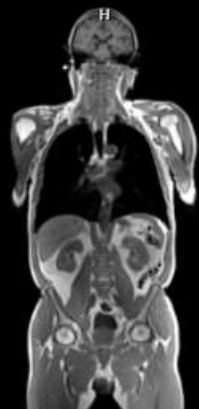
Solid state detector design concept



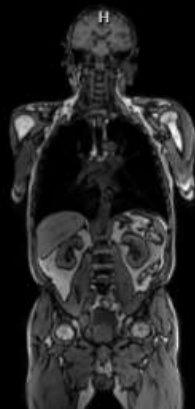
Attenuation Correction (AC)

MRI-based AC of a patient body

Dixon VIBE Sequence



In Phase



Opp Phase



Water



Fat



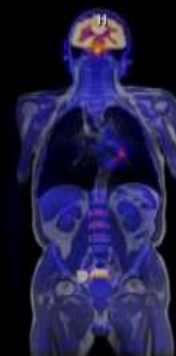
μ -Map



Attenuation correction



Uncorrected PET

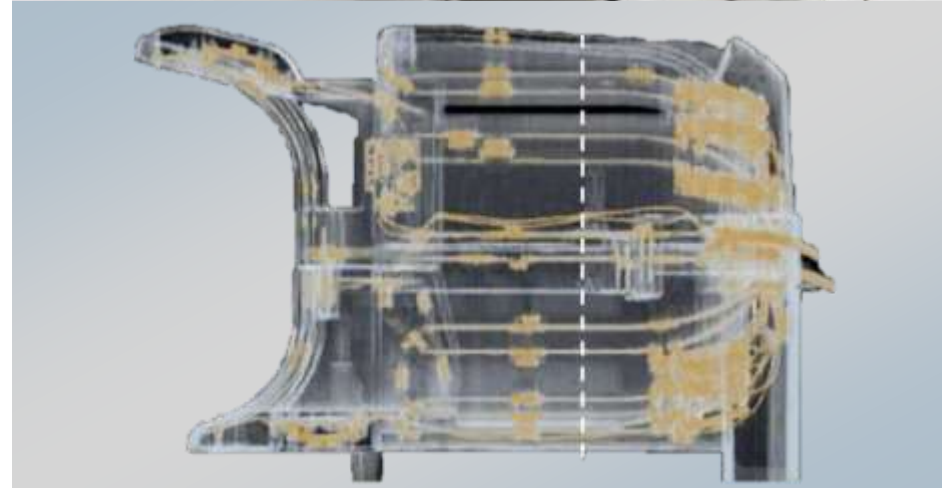


Fused PET

Attenuation Correction

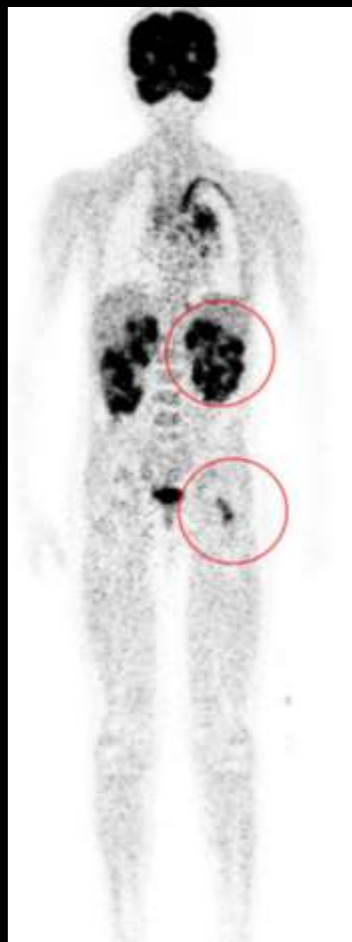
Rigid stationary hardware

- CT-based AC for table, head/neck and spine coils
- μ -map is part of PET reconstruction process
- Relevant part of μ -map is automatically selected for each table position

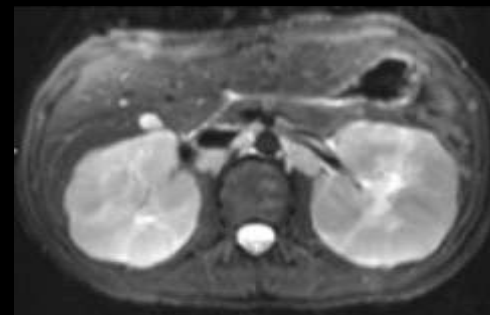
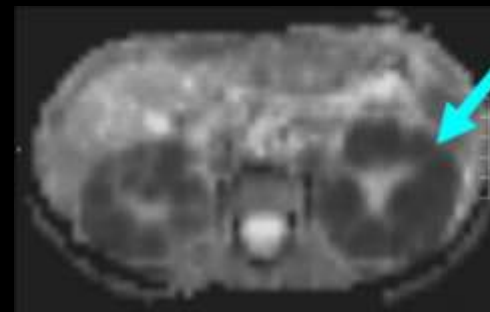


Biograph mMR

Pediatric images



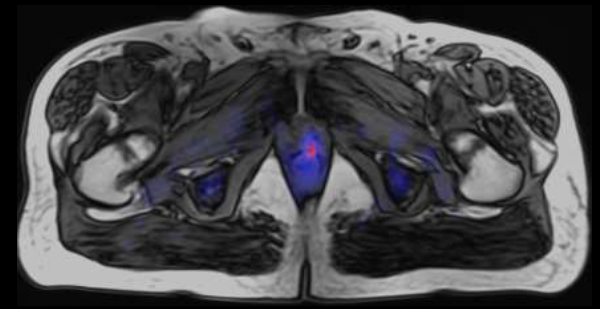
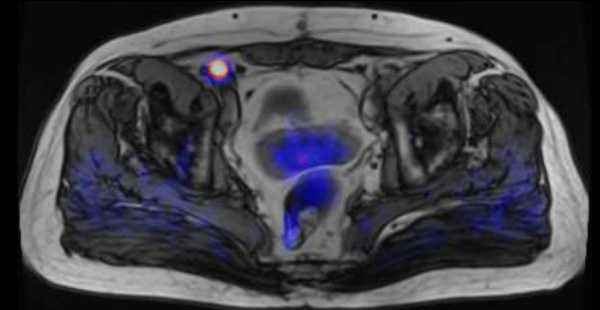
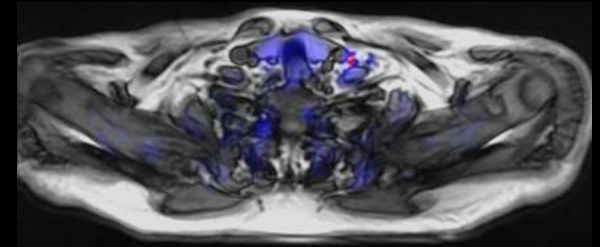
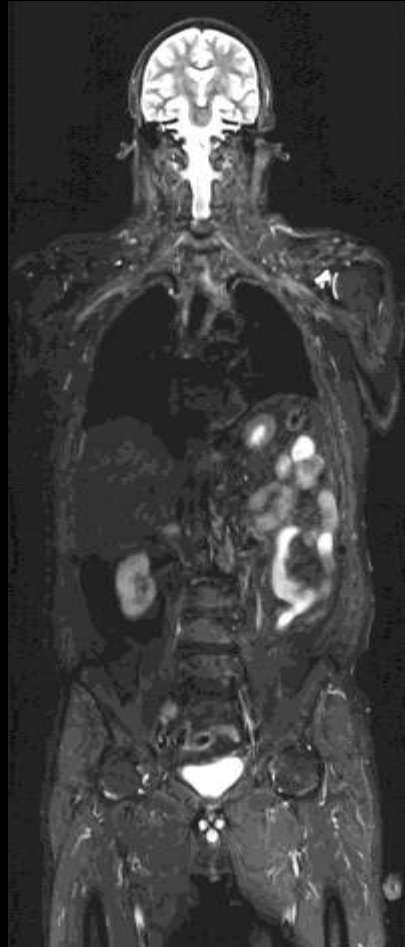
11-year-old, male with T-cell lymphoma; DWI and PET provide the full picture



Biograph mMR

Clinical images

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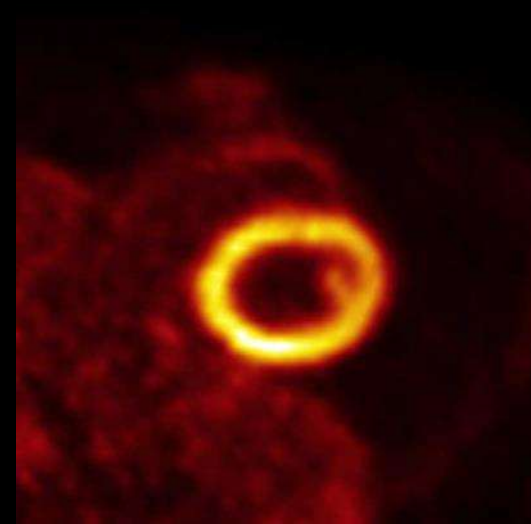
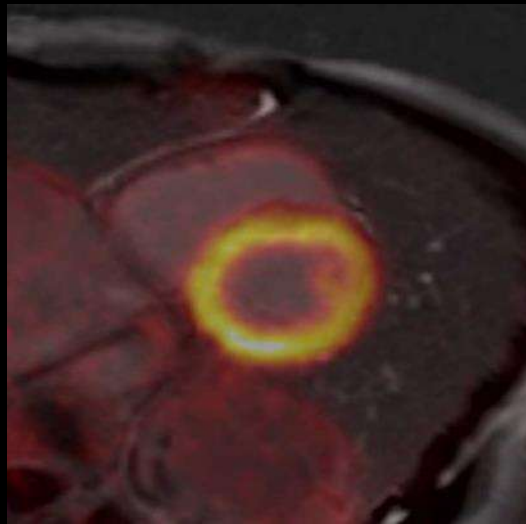
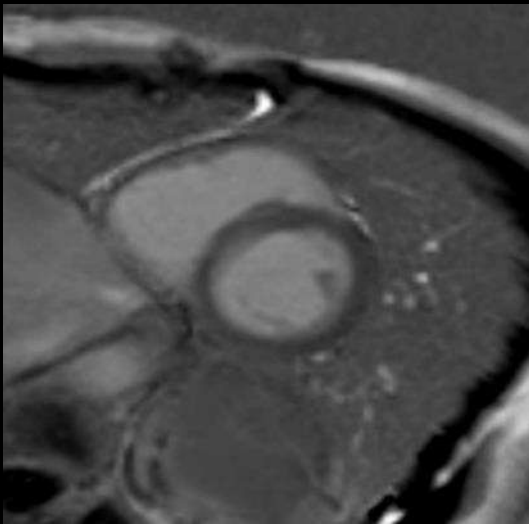


Data courtesy of Center for Modern Diagnostics (CEMODI), Bremen, Germany

Biograph mMR

Temporal co-registration

Cardiac molecular MR



Simultaneously gated PET and cardiac MR images

- PET data acquired in list mode and binned retrospectively
- MRI acquired in diastole, fused with diastolic PET data

Future Outlook

Biograph mMR

Road forward

Facts:

- Biograph mMR is a clinical reality
- Numerous sites are performing clinical and research studies

Future Path:

- Incorporate further customer feedback
- Focus on clinical outcomes



**Let the
clinicians
lead the
way!**



Biograph mMR

Clinical perspective

“**Dose reduction** is a major concern of ours -- and this can be quite **considerable**.

This is particularly **critical** in the examination of **children and young adults**, especially in cases of **frequent follow-up examinations** in therapy monitoring.”

*Markus Lentschig, MD
Radiologist and partner at the CEMODI
practice
Bremen, Germany
First purely private Biograph mMR user*



Biograph mMR

Clinical perspective

“From our own experience in cervical cancer patients, we see that **simultaneous** MR and PET is the ideal imaging tool covering the whole range of clinical care from diagnosis, therapy planning, monitoring and follow-up.

The **benefits** over other modalities are improved spatial registration, the high soft tissue contrast and functional capabilities of MRI, and minimizing the patient’s scan time or dose burden.”

*Perry W. Grigsby, MD
Professor, Radiation Oncology
Director, Brachytherapy Center
Washington University, St. Louis, MO, USA*



The statements by Siemens' customers described herein are based on results that were achieved in the customer's unique setting. Since there is no "typical" setting and many variables exist there can be no guarantee that other customers will achieve the same results.

Biograph mMR

Early adopters > 35

North America

- MGH, Boston, USA
- NIH, Bethesda, USA
- Washington Univ., St. Louis, USA
- Univ. of N. Carolina, Chapel Hill, USA
- Mt. Sinai Medical Center, New York, USA
- Indiana University, Indianapolis, USA
- Lawson Health Research Institute, London, Canada
- UPMC, Pittsburgh, USA
- NYU, New York, USA
- Cleveland Clinic Foundation, Cleveland, USA
- Stony Brook University, Stony Brook, USA
- Weill Cornell Imaging, New York Presbyterian, NY, USA (2x)
- Cedar-Sinai Medical Center, Los Angeles, USA
- UHN Toronto, Canada

Europe

- IMP Erlangen, Germany
- Klinikum r. d. Isar, Munich, Germany
- Univ. Hospital Tübingen, Germany
- Univ. Hospital Leipzig, Germany
- CEMODI Bremen, Germany
- Univ. Hospital Essen, Germany
- Univ. College London Hospitals, UK
- SDN, Naples, Italy
- DKFZ, Heidelberg, Germany
- Rigshospitalet, Copenhagen, Denmark
- St. Olav Hospital, Trondheim, Norway
- DLRZ, Bonn, Germany
- University of Padua, Italy
- CERMEP/Univ. of Lyon, France
- AKH/MUW, Vienna, Austria
- OAO RZD, Moscow, Russia
- King's College London, UK
- Centr. Onkologii, Bydgoszcz, Poland

Asia

- PLA 301 Hospital, Beijing, China
- Parkway Mt. Elizabeth Novena Hospital, Singapore
- CIRC/NUS/A*Star, Singapore
- Yeungnam Univ. Hospital, Daegu, Korea
- SNUH, Seoul, Korea
- Apollo Hospitals, Delhi, India
- Fukushima Medical Univ, Fukushima, Japan
- TNUH, Taipei, Taiwan
- NIMHANS, Bangalore, India
- HKSH, Hong Kong, China

Future innovations* ...

- Workflow improvements
- Extended MR FoV
- Motion correction
- Whole-body bone segmentation

Thank you!



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