

Telling the Biological Story with Multi-Modality Imaging

Emily A. Thompson

MD Anderson Cancer Center

Imaging Physics

Houston, TX

ethompson@mdanderson.org

Driving Force in Imaging

I. Introduction

II. Telling the Biological Story

III. Research Opportunities

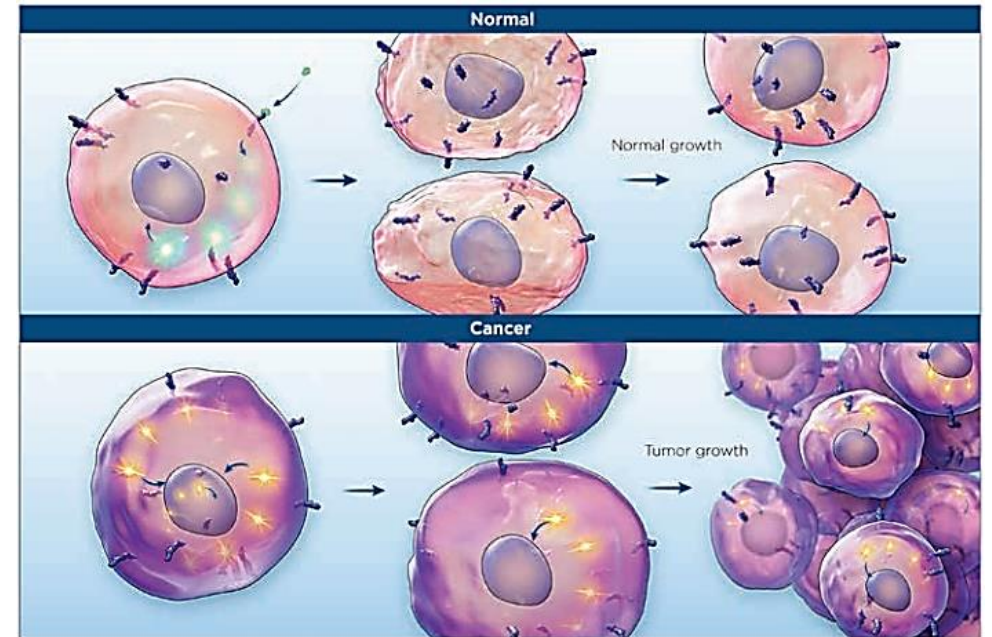
IV. Conclusion

Overarching Question:

- Tumor vs. normal cells
- Exploit differences for visibility

Treatment Specifics:

- Changing characteristics
- Quantify treatment progress
- Outcomes and follow up



Proliferative signaling of cancer cells allows tumor growth as normal cellular growth suppressors, such as the TP53 gene, are mutated.

ThermoFisher Scientific, Handbook of Cancer Cell Culture Basics



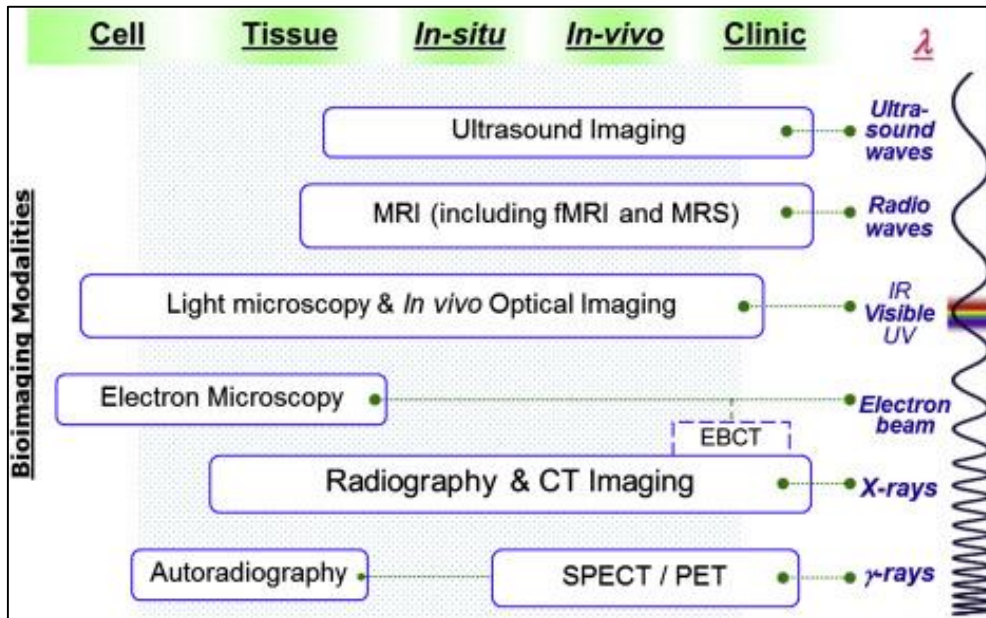
Multiple Modality Imaging

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Source: (Ying et al., 2017)

What is multi-modality imaging?

- Incorporating information from 2 or more imaging modalities
- Scans can be done in a single examination (preferred) or separate examinations

Benefits:

- Enables anatomic and functional imaging
- Considering multiple characteristics at the same time can provide a more comprehensive analysis



The Biological Story: Early Stages

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Patient presents with the following symptoms:

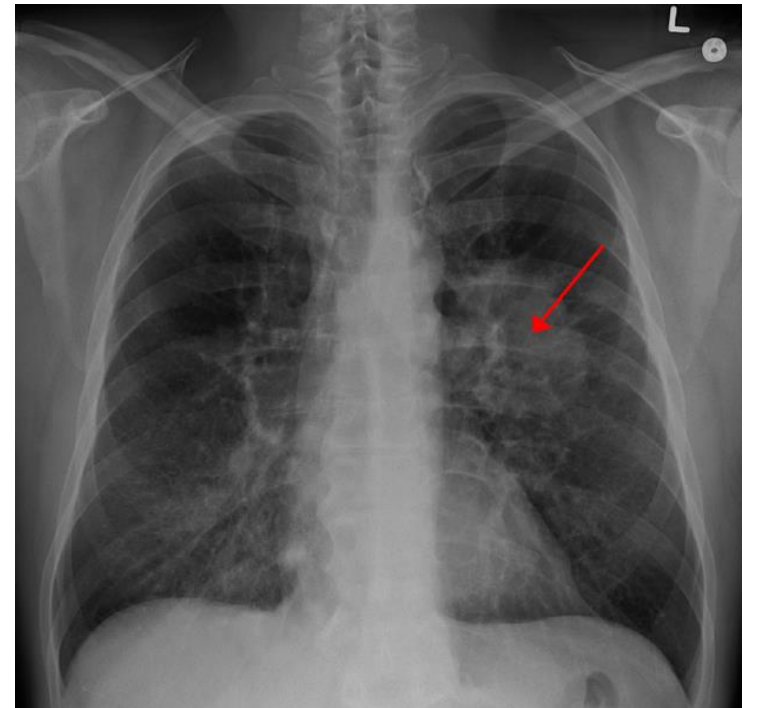
- Persistent cough
- Chest pain
- Pneumonia
- Loss of appetite
- Wheezing

Patient risk factors:

- Age: 74
- Smoking history: 10-pack-years
- COPD
- Overweight

Physician orders a chest radiograph and finds a focal lesion.

*Note: this patient example uses a hypothetical patient that will undergo a hypothetical diagnosis and treatment plan.



Lung cancer as seen on chest radiograph with red arrow.

Source: James Heilman, MD



The Biological Story: Next Steps

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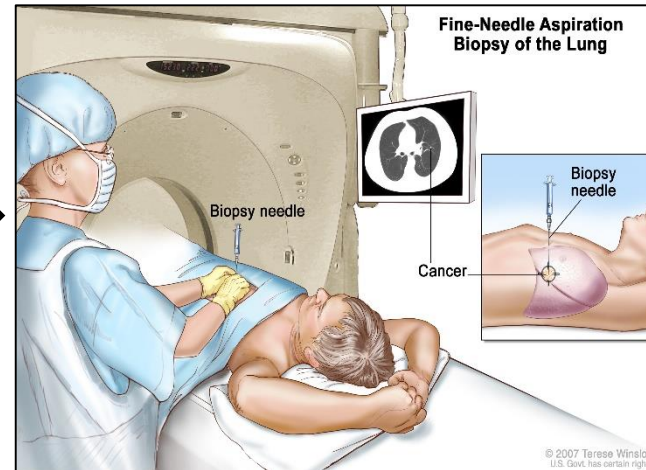
IV. Conclusion

Patient undergoes chest CT scan



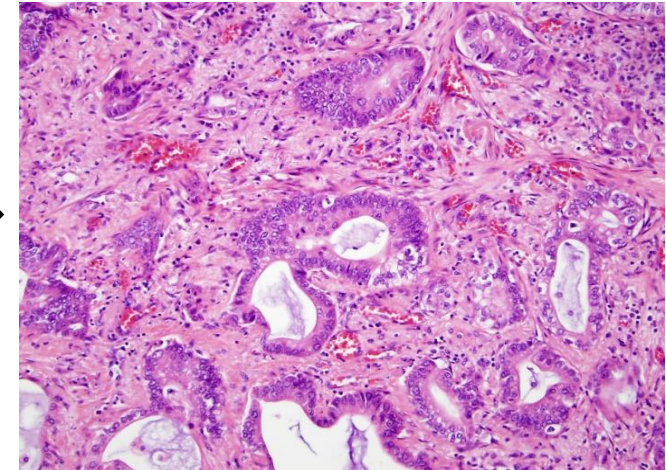
Source: Wikimedia, CC BY-SA 2.0

Fine-needle aspiration biopsy of lung tumor



Winslow, T. [2007]. Retrieved from <https://siteman.wustl.edu/glossary/cdr00005607>
45/

Histopathology confirms diagnosis of non small cell lung cancer (NSCLC)



(*Non-Small Cell Lung Cancer*, 2019)



The Biological Story: Identifying Metastases

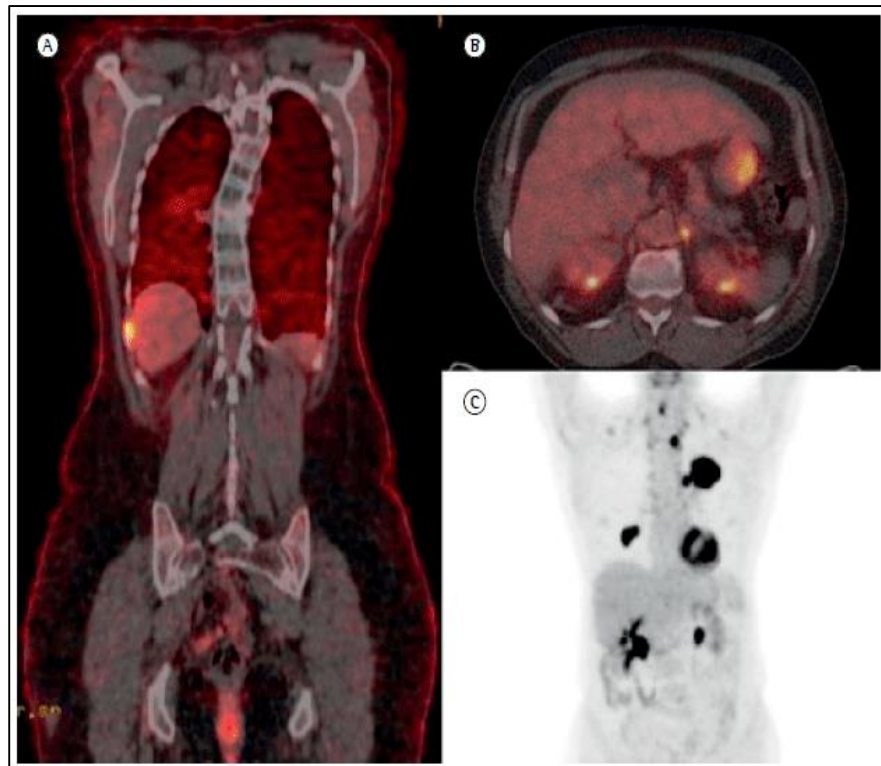
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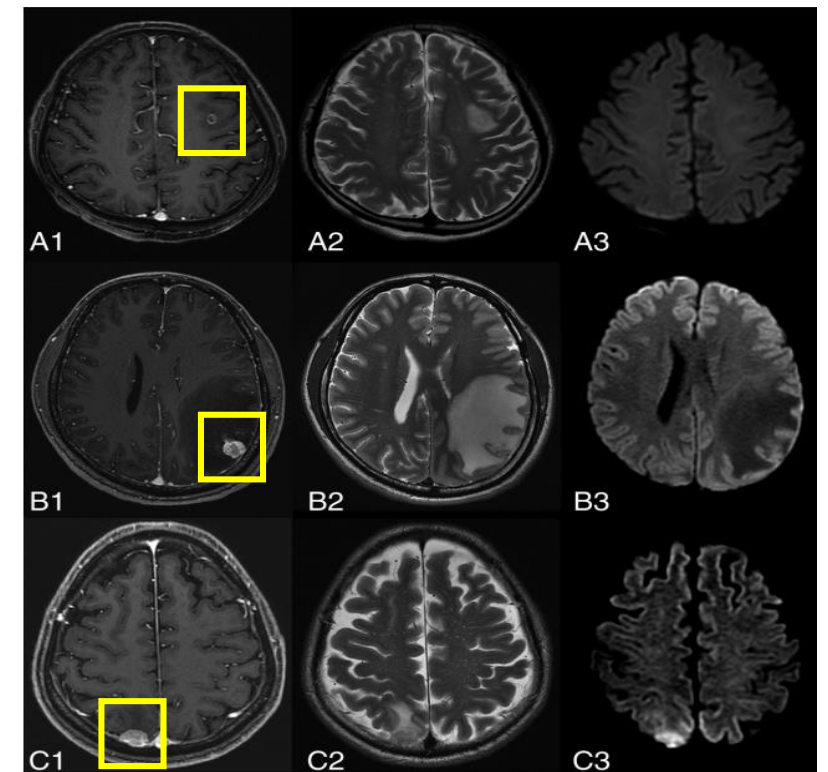
IV. Conclusion

PET/CT to identify metastases

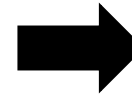


(Hochhegger et al., 2015)

Brain MRI to identify metastases



(Jung et al., 2018)



The Biological Story: Treatment Planning

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Patient is prescribed radiation therapy:

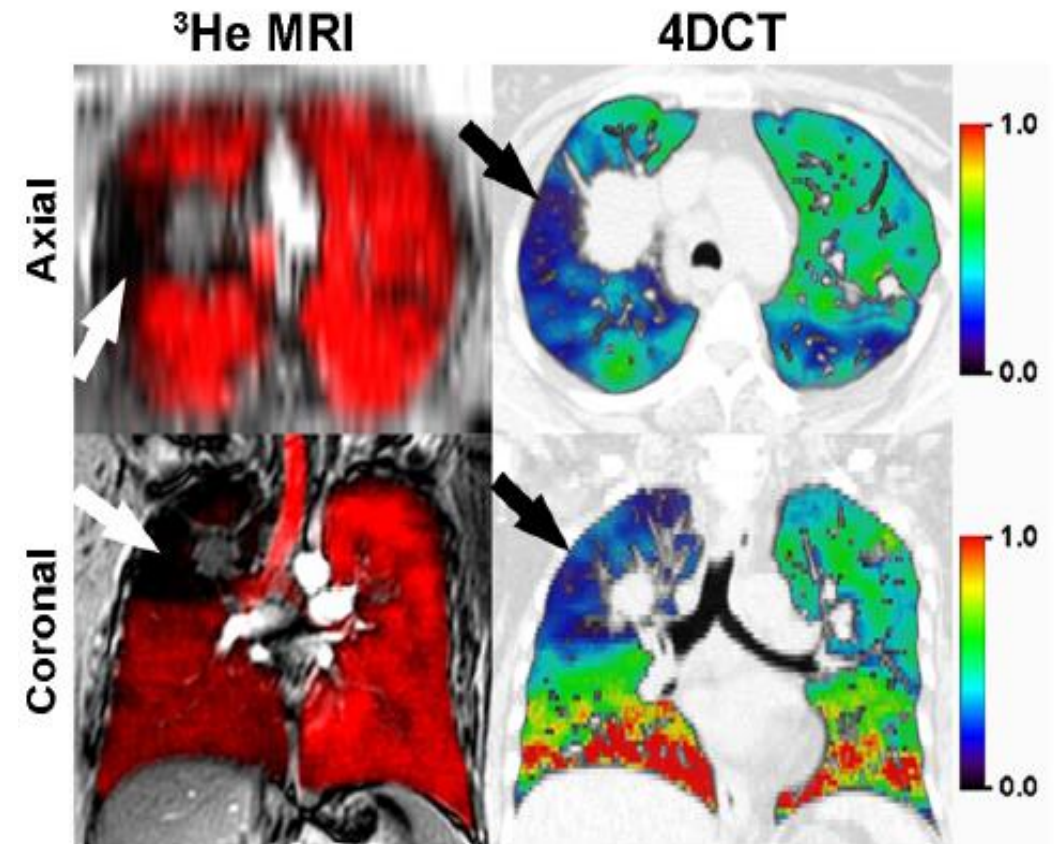
- IMRT (6000cGy)

As a physicist, how can we help create the most effective treatment plan?

- Sufficient dose to most aggressive areas of tumor
 - FDG uptake on PET
 - Hypoxia imaging
- Minimize side effects
 - Radiation pneumonitis
- Maximize healthy tissue sparing
 - Perfusion imaging to identify functional areas of lung

Molecular characterization to determine concurrent therapy:

- EGFR tyrosine kinase inhibitors for patients with EGFR mutations
- ALK inhibitors for patients with ROS1 or EML4-ALK oncogene



(Simon et al., 2012)



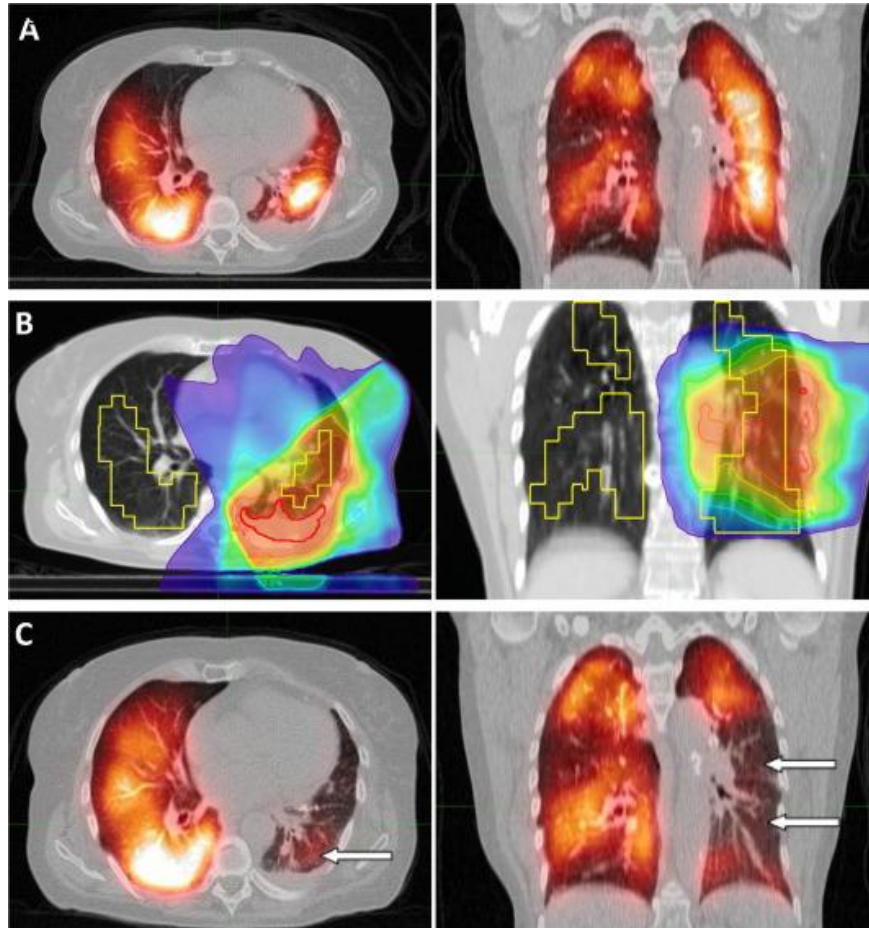
The Biological Story: Treatment Outcomes

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(Farr et al., 2018)

Considerations:

- How do we classify treatment completion?
- What is the patient's quality of life?
 - Can we do anything to improve this?
- What does surveillance look like?
 - How does this fit into the patient's lifestyle?
- Are there other imaging metrics we can use that are more representative of patient progress?



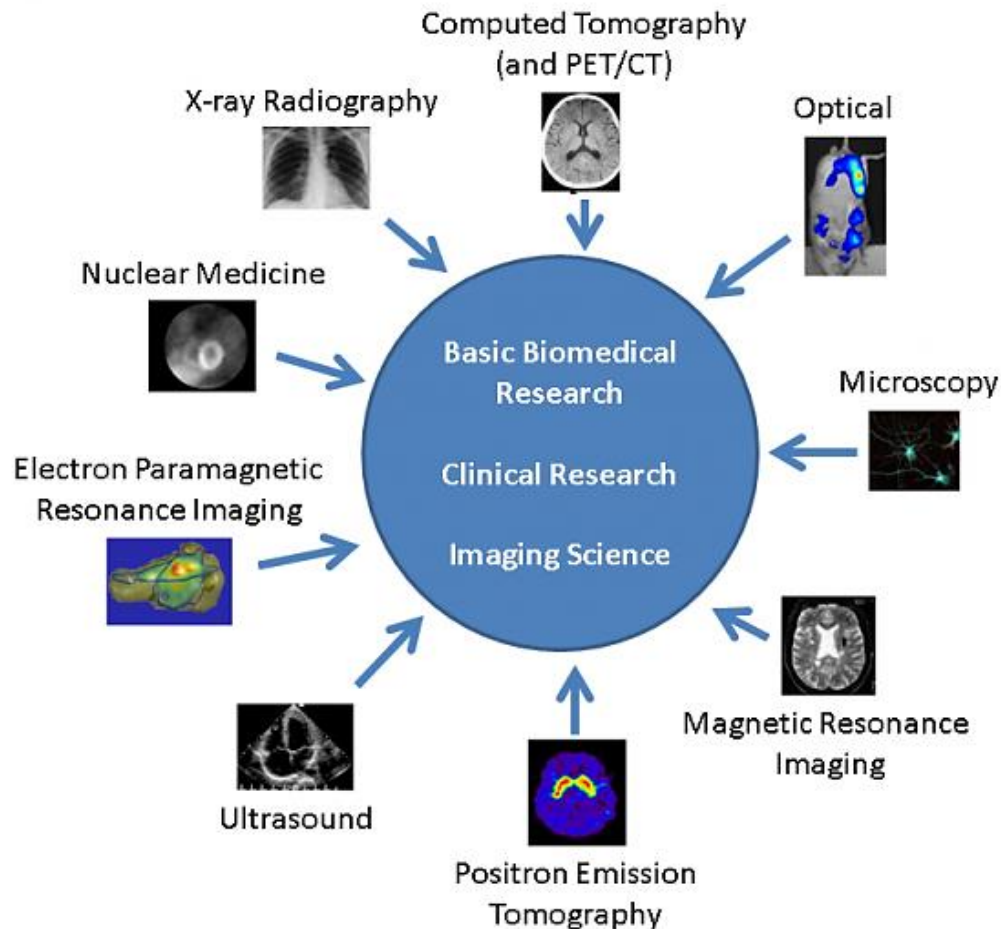
How can you get involved?

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Endless research opportunities:

- Functional imaging
- Bioluminescence imaging
- MRI pulse sequences
- Biomarkers
- Image registration
- Image quality
- Image-guided therapy
- Adaptive therapy
- Hypoxia imaging
- Radiomics
- Deep learning
- Image segmentation
- And many more...



Related Areas of Research

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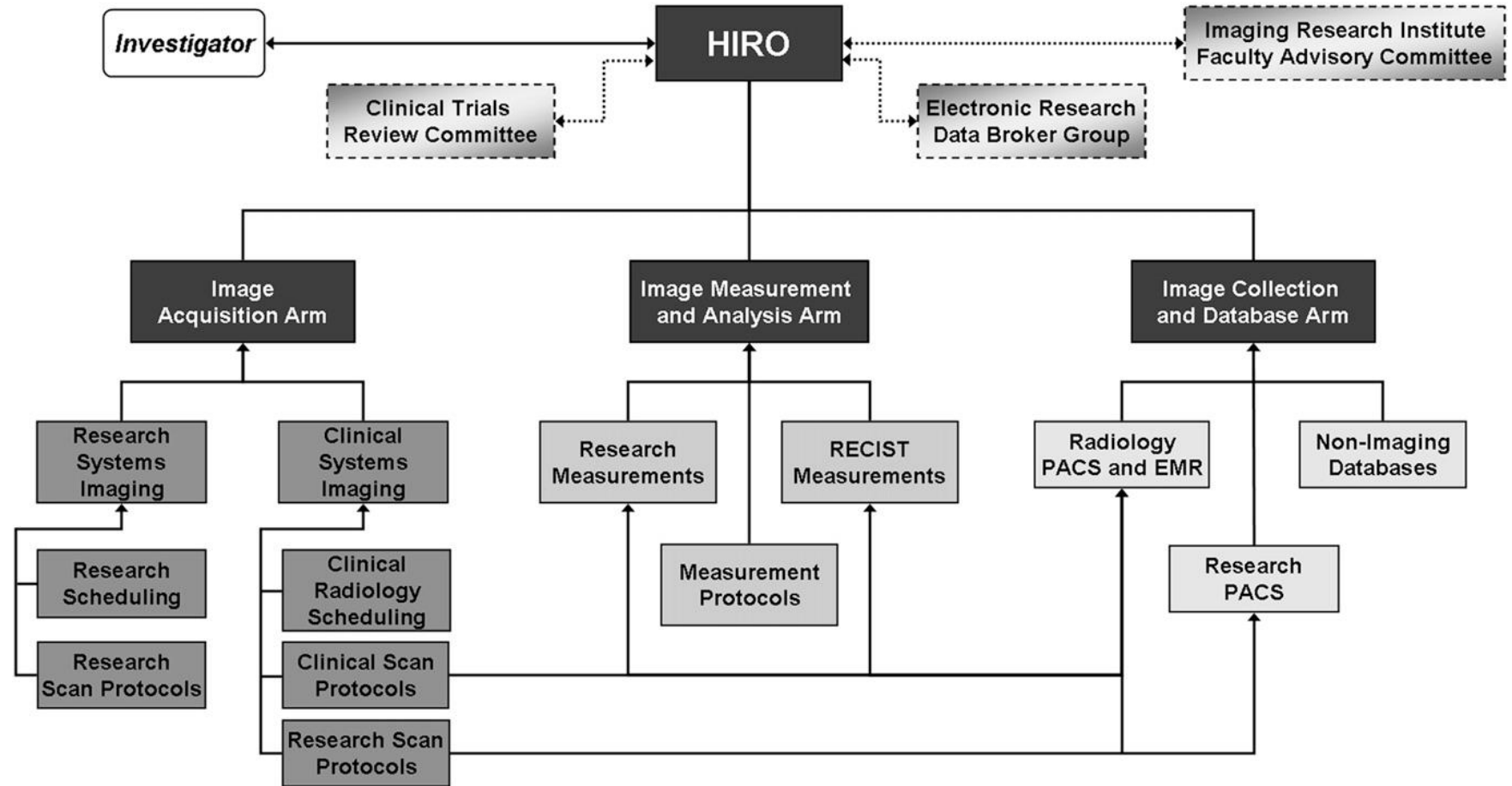


Figure 1. Organizational structure of the Human Imaging Research Office.

(Armato et al., 2012)



Future Importance

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Source: GE Healthcare: Why Doctors of the Future May Know Code

Future:

- Evolving role of imaging
- Collaborations with researchers in the basic sciences
 - What imaging techniques do they use?
 - How can we incorporate with current imaging?
- Move towards individualized patient care

Exciting time in imaging research!



References and Resources

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