




All I know about

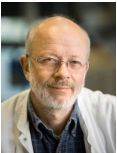
PET

(and PET/CT, PET/MR, and SPECT/CT)

Medical Imaging Systems
DTU, November 2024

Søren Holm

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Dept. of Nuclear Medicine, Rigshospitalet



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Rigshospitalet, Copenhagen



PET

Entrance 39

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Photo: Flying Professor Andreas Kjær

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Thanks to:

GE Medical Systems
CPS Innovation (Bernard Bendriem)
Siemens Medical Solutions
Philips Medico
Impact (www.impactscan.org)
UC Davis, Simon Cherry

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Overview (0):

- Different kinds of tomography – PET in particular
- Reconstruction from projections, FBP vs. iterative methods
- Positron imaging history
- Raw data structure - sinograms - types of acquisition and presentation
- 2D/3D, advanced data structure – Michelogram
- Resolution and noise

- Scanner physics 1 – PET detectors
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- Attenuation and scatter correction of PET-data
- Hybrid systems – PET/CT- PET/MR - SPECT/CT... Future ideas

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(T)CT

Computer(ized)

ECT

SPECT

PET

from:

TRANSMISSION

EMISSION

attenuation of photons

structure / anatomy

distribution of tracer

function / physiology

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CT

PET

attenuation of photons

structure / anatomy

distribution of tracer

function / physiology

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PET is stationary – SPECT rotates

All directions detected

simultaneously

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CT

PET

attenuation of photons

structure / anatomy

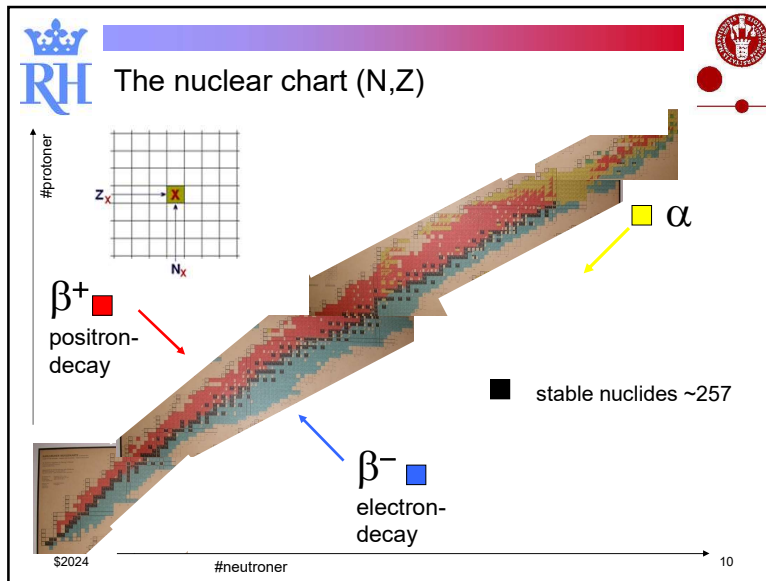
distribution of tracer

function / physiology

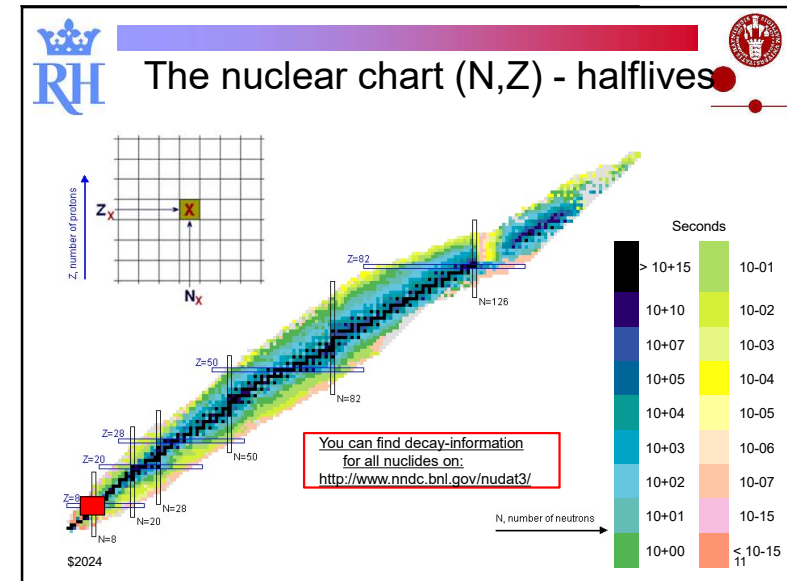
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RH ...magnified

	Ne 16	Ne 17	Ne 18	Ne 19	Ne 20
		109 ms	1,67 s	17,22 s	90,51
	p	β^+ 8,0; 13,5 β^- 4,59; 3,77; 5,12...	β^+ 3,4... γ 1042...	β^+ 2,2... γ (1357...)	α 0,037
	F 15	F 16	F 17	F 18	F 19
			64,8 s	109,7 m	100
	p	p	β^+ 1,7 no γ	β^+ 0,6 no γ	α 0,0095
O 12	O 13	O 14	O 15	O 16	O 17
	8,9 ms	70,59 s	2,03 m	99,762	0,038
	β^+ 16,7 β^- 1,44; 6,44; 0,93	β^+ 1,8; 4,1... γ 2313...	β^+ 1,7 no γ	α 0,000176	α 0,00016
	N 12	N 13	N 14	N 15	N 16
	11,0 ms	9,96 m	99,63	0,37	7,13 s
	β^+ 16,4 γ 4439...	β^+ 1,2 no γ	α 0,0075 α 0,000024	β^+ 1,2 no γ	β^+ 3,2; 8,7... β^- 1,17; 0,98; γ 871; 2184
C 10	C 11	C 12	C 13	C 14	C 15
	19,3 s	20,38 m	98,90	1,10	2,45 s
	β^+ 1,0 no γ	α 0,0034	α 0,0009	β^+ 0,2 no γ	β^+ 4,5; 9,8... γ 5298...

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RH PET is really ART:
Annihilation Radiation Tomography

511 keV

511 keV

β^+

e^-

1955

1905

$E = mc^2$

Result: Two photons on an **almost** straight line that **nearly** contains the point of decay

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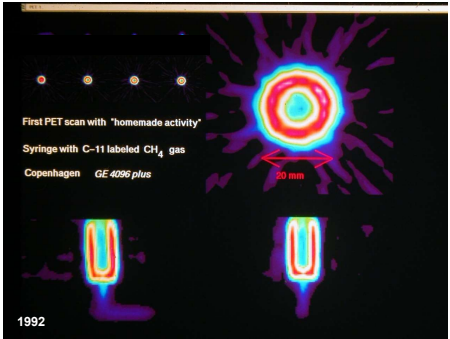
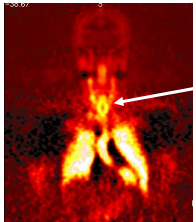
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Positron Emission Tomography (?) or ART

We never detect the positrons directly, only the annihilation photons

Annihilation Radiation Tomography

Inhalation of radioactive β^+ gas

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PET radiation detection

A PET scanner counts coincidences

detector d1

detector d2

Tube or Line Of Response (LOR)

Coincidence window Δt

d1

d2

Coincidences

time

$|t_1 - t_2| < \Delta t?$

yes coincidence

$\Delta t \sim 4-12 \text{ ns}$

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PET detection, Time-of-Flight

A PET scanner counts coincidences

detector d1

detector d2

Line Of Response (LOR)

Coincidence window Δt

d1

d2

Coincidences

time

Measure $t_1 - t_2$

Calculate position along LOR

$\Delta t = 1 \text{ ns}$

$\sim \Delta x = 15 \text{ cm}$

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Time of Flight (TOF) PET

— more than just a coincidence...

Detector 1

Detector 2

Patient outline (diameter D)

t_1

t_2

Δd

- tried and abandoned in ancient PET times (~1985)
- idea commercially relaunched in 2006 by Philips

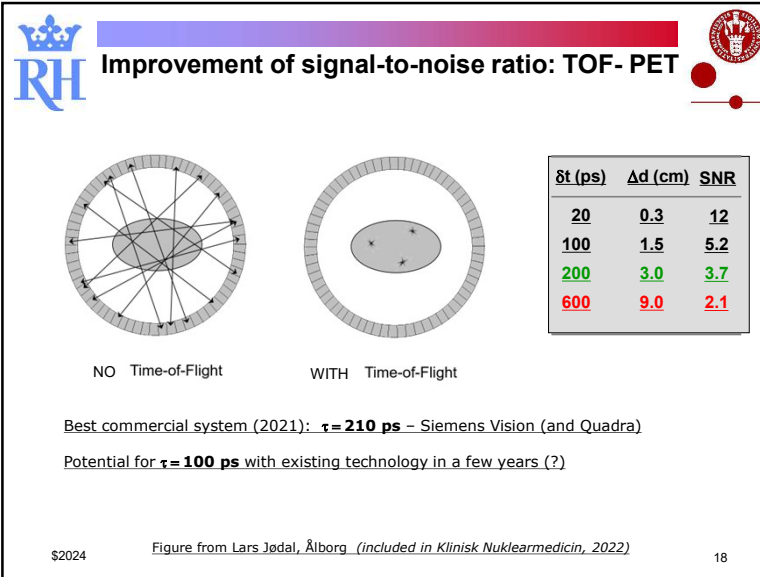
δt (ps)	Δd (cm)	SNR
20	0.3	12
100	1.5	5.2
200	3.0	3.7
600	9.0	2.1

- More information available for image formation
- better image quality, or shorter scanning time, or less injected activity

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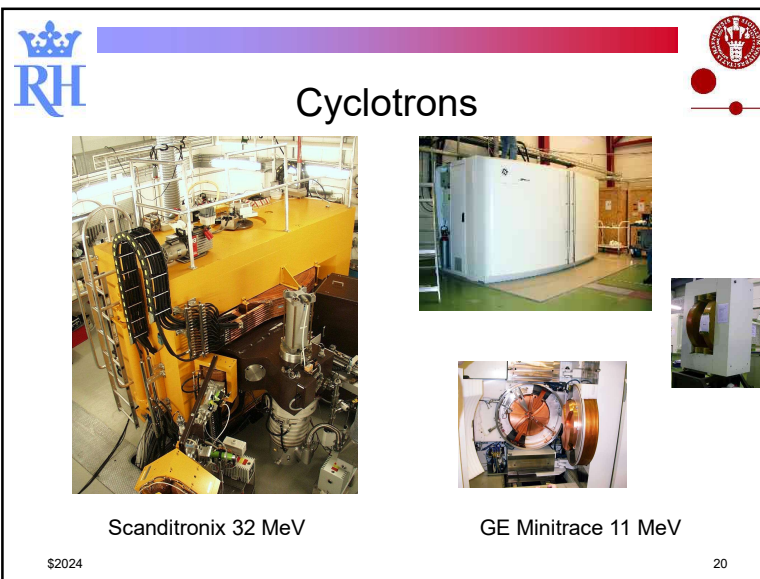
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RH Positron Emitting Isotopes

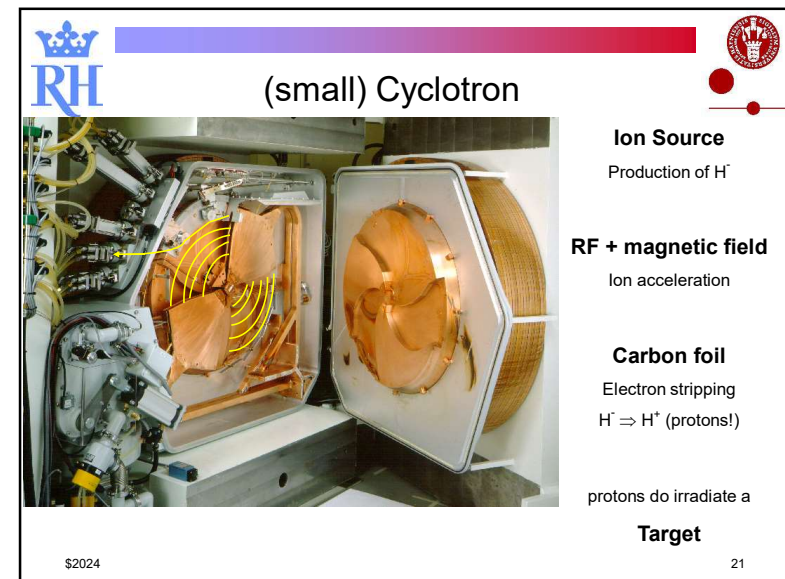
Isotope	Half-Life	Production
Carbon-11	20.5 min	$^{14}\text{N}(p,\alpha)^{11}\text{C}$
Nitrogen-13	10.0 min	$^{16}\text{O}(p,\alpha)^{13}\text{N}$
Oxygen-15	2.1 min	$^{14}\text{N}(d,n)^{15}\text{O}$
Fluorine-18	110 min	$^{18}\text{O}(p,n)^{18}\text{F}$ (F ⁻), $^{20}\text{Ne}(d,\alpha)^{18}\text{F}$ (F ₂)
Gallium-68	68 min	Daughter of Ge-68 (271 days)
Rubidium-82	1.3 min	Daughter of Sr-82 (25 days)
Other: Sc-43/44, Cu-64, Zr-89, I-124...		

- Small elements (C,N,O,F) allow “real” biochemistry
- Short half-lives make tracer production an integral part of PET

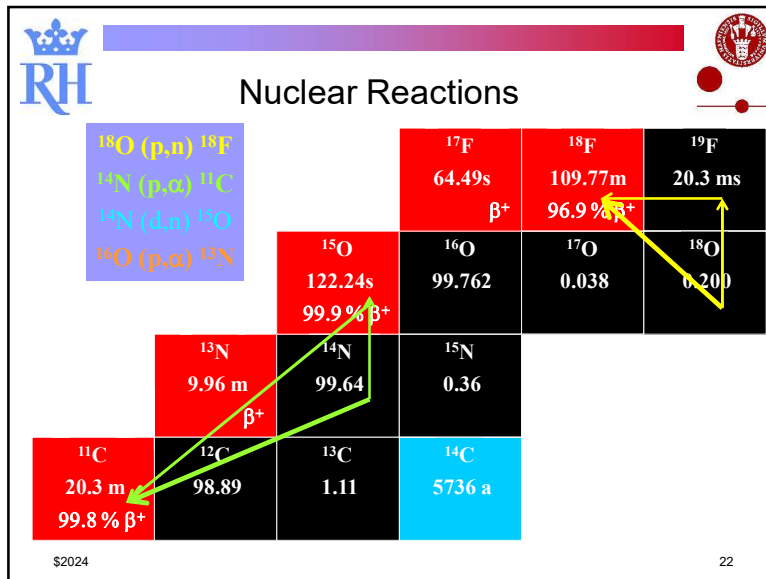
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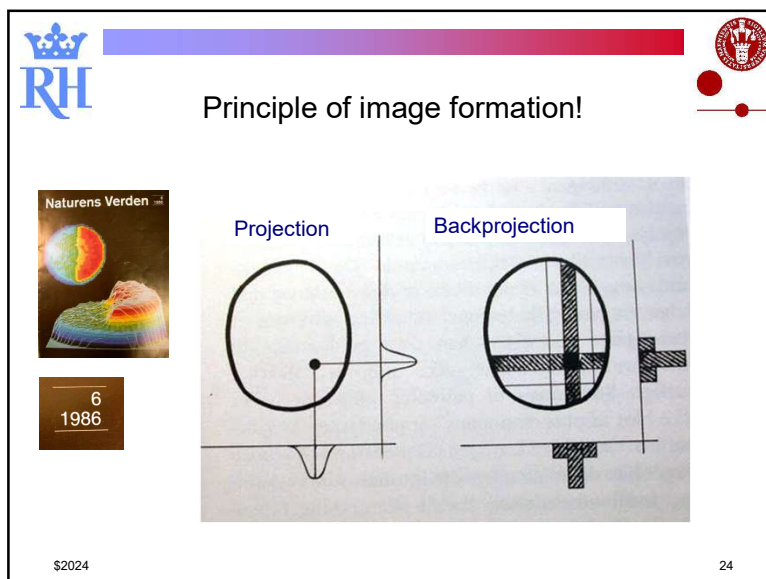
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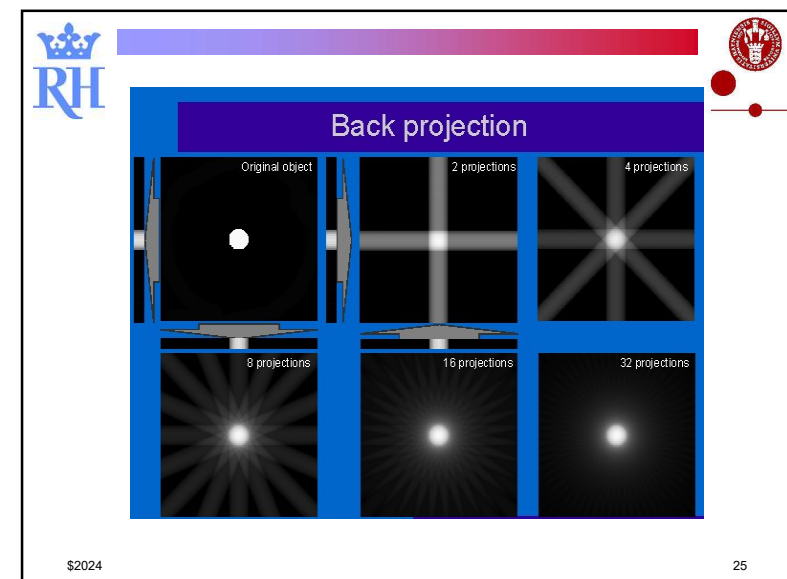
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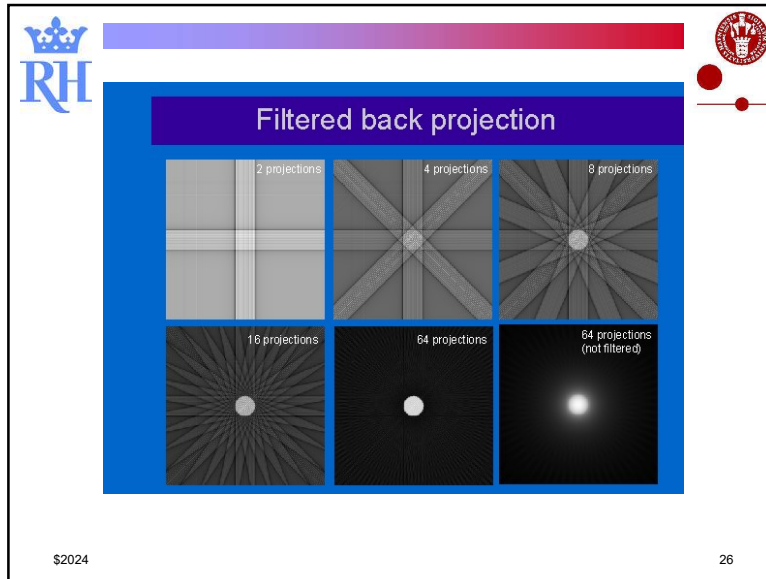
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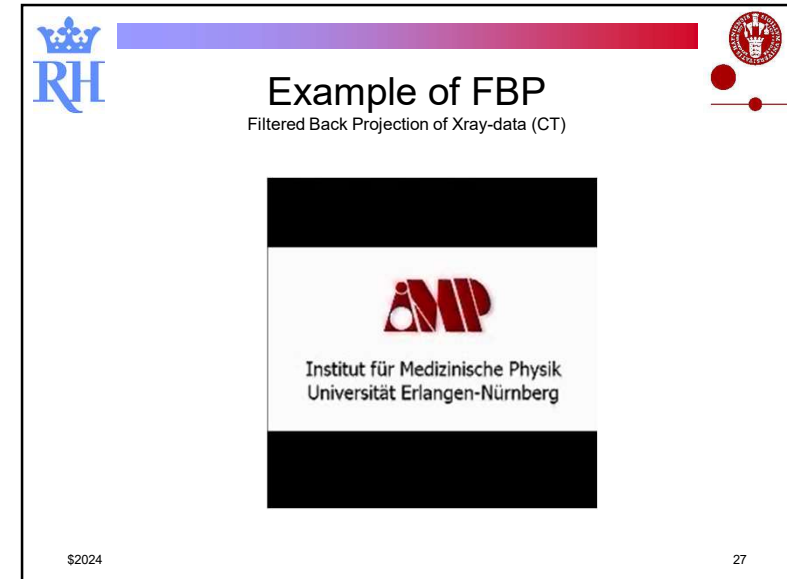
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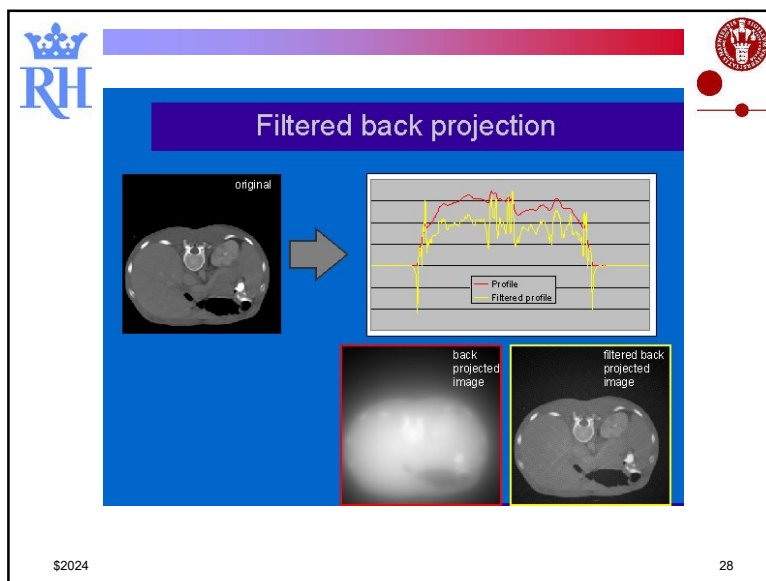
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Iterative Algorithms

- For example, ML-EM, OS-EM,
- Discretize the image into pixels
- Solve matrix equation
 $Ax=p$ ($x=A^{-1}p$)
- x = unknowns (pixel values)
- p = projection data
- A = imaging system matrix

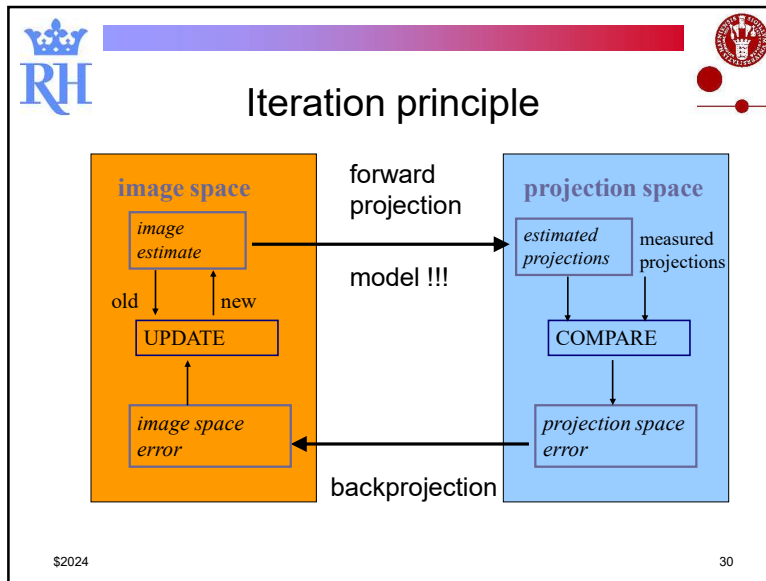
a_{ij} : contribution of image voxel j to projection bin i

p

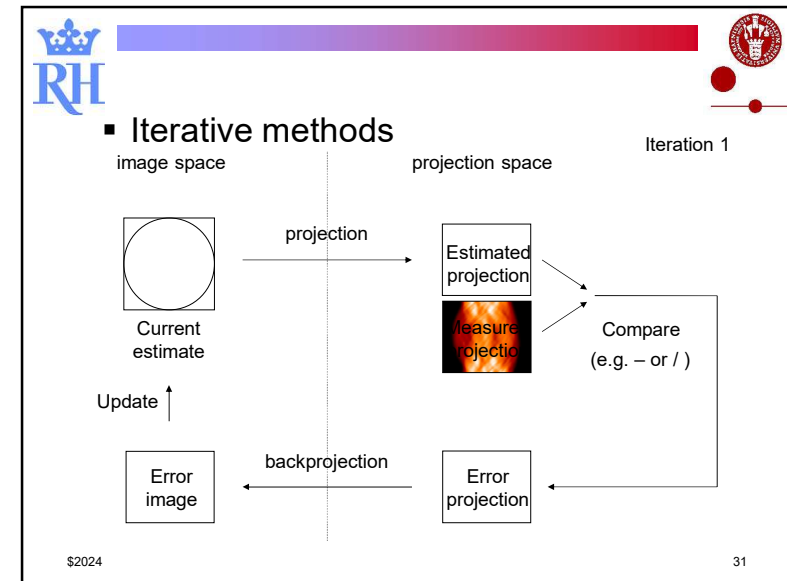
x

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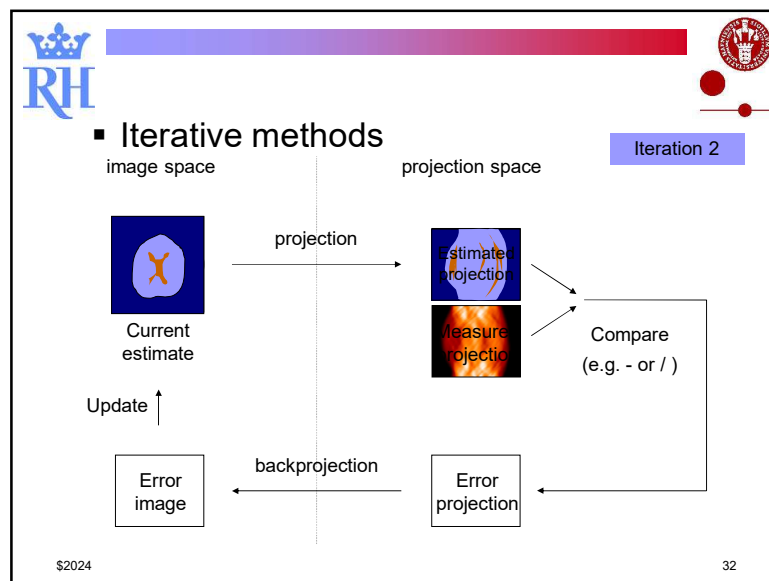
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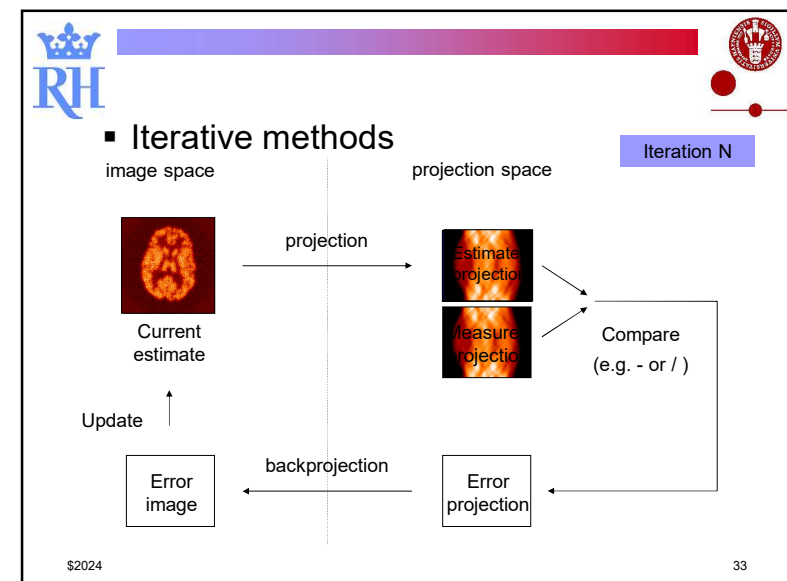
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Iterative Recon versus FBP



	FBP Methods	Iterative Methods
Implementation:	Simple	Complex
Reconstruction speed:	Very fast	Slow with ML-EM, fast with OSEM
Imbedded corrections:	None	anything you can model
Low-count image:	Noisy	Less noise
Reconstruction artifacts:	Streak/spill artifacts	None, regular activity distribution



FBP reconstructed image

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OSEM reconstructed image

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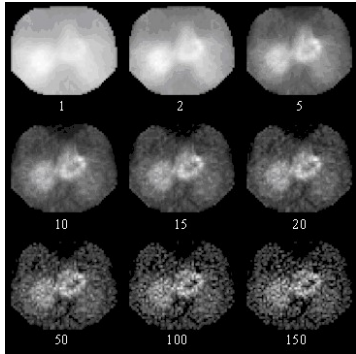
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Image at different iteration numbers



Smooth
Low resolution



Noisy
High resolution

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Overview (2):





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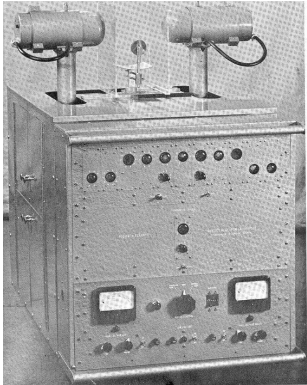
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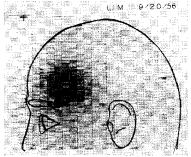
Positron scanner (*not PET*)

(Brain tumor scanner at MGH 1955-)





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Positrocephalogram (PCG)
of patient with meningioma

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**COINCIDENCE SCANNING WITH POSITRON-EMITTING
ARSENIC OR COPPER IN THE DIAGNOSIS
OF FOCAL INTRACRANIAL DISEASE**

By
William H. SWEET, John MEALEY, Jr.,
Gordon L. BROWNELL and Saul ARONOW

Departments of Surgery and Medicine, Harvard Medical School, and the
Neurosurgical Science and Physics Research Laboratory of
Massachusetts General Hospital, Boston, Massachusetts, U.S.A.



(IAEA meeting 1959)

Abstract

This is a report on coincidence counting in man of the paired annihilation gamma rays from positron-emitting copper or arsenic. We discuss the relevant biological behavior of inorganic arsenate and arsenite, of copper versenate, and the results of using these substances during automatic scanning to localize intracranial masses. Radioassay of biopsies of the principal normal cephalic tissues, of various types of neoplasms, of hematomas, abscesses and zones of demyelination were carried out. With arsenic the ratios of concentrations of tumor to normal brain were up to 50 for meningiomas. The remaining main tumor types, in order of decreasing concentrations of isotope, were acoustic neuroma, glioblastoma, metastatic malignancy and astrocytoma. The high tumor uptake with arsenic persists long enough so that repeat scans one day after injection are valuable. The muscle : brain ratio of concentrations of circa 3 is high enough to interfere with the accuracy of diagnosis in lesions beneath the lower temporal and especially the upper nuchal masses of muscle. Hematomas, abscesses and zones of demyelination also have high enough ratios to permit localization in the majority of patients. The results on biopsies containing copper versenate showed similar ratios insofar as ascertainable from fewer samples. The meningiomas are a probable exception, yielding lower ratios with the copper.

On the basis of radioassay both of urinary excretion and of the full range of tissues obtainable at autopsy we compute the local whole-body radiation with As⁷⁴ to be about 3.2 rads after the usual scanning dose of 2.3 mCi(70 kg). The kidney receives about 12.7 and the liver 9.7 rads. The corresponding figures for Cu⁶⁴ are 0.325 rads to the whole body, but with a dose to the liver of 3.2 rads because this organ takes up about half of the administered versenate.

The automatic scan includes in 2 simultaneously evolving side views a coincidence count or positron-gamma ratio (PCG) and a plot of the asymmetry of the total gamma radiation, or asymmetrogammagram (AGG). A sagittal PCG is also taken. The lateral scan requires 40 minutes, the sagittal 30 minutes.

Of 14 more than 3900 cases examined and out report were only the 285 performed in the last 3 1/2 years on a special group of 334 patients, who nearly all proved to have

**MEDICAL
RADIOISOTOPE SCANNING**

Proceedings
of a seminar jointly organized by
The International Atomic Energy Agency and the World Health Organization
Vienna, 25 — 27 February, 1959

PCG:

**A "routine"
examination!**



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The figure consists of two parts: a schematic diagram of a scintillation camera and a block diagram of its electronic circuit.

Fig. 1. Sectional drawing of scintillation camera.

This diagram shows a cross-section of the camera. At the top, a 'Lead housing' contains several 'Phototubes'. Light rays from a 'Scintillation crystal' pass through a 'Pinhole aperture' to form an image of the 'Subject' on the phototubes. Gamma rays from the subject pass through the pinhole and hit the scintillation crystal.

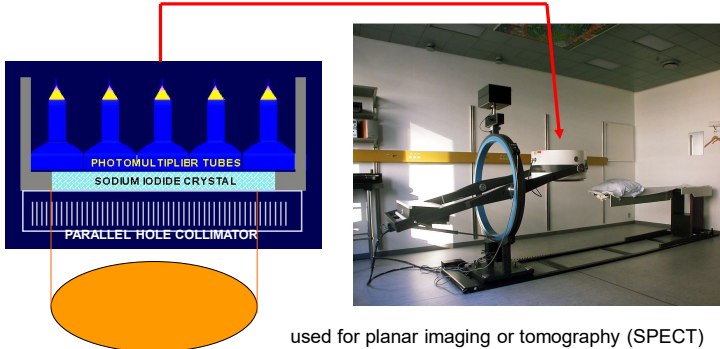
Fig. 2. Block diagram of electronic circuit.

This diagram shows the electronic circuit. It includes a 'Scintillation crystal' connected to 'Phototubes'. The phototubes are connected to a 'Difference circuit' which outputs 'X signal' and 'Y signal'. These signals are then processed by 'X-axis amplifier' and 'Y-axis amplifier' respectively. The 'Z signal' is processed by a 'Z-axis amplifier'. The 'X-axis amplifier' and 'Y-axis amplifier' are connected to a 'Pulse generator' which outputs 'X-axis input' and 'Y-axis input' to a 'Cathode ray tube'. The 'Z-axis amplifier' is connected to a 'Pulse generator' which outputs 'Z-axis input' to the 'Cathode ray tube'. The 'Pulse generator' also outputs 'X-axis input' and 'Y-axis input' to the 'Cathode ray tube'.

Gamma camera principle

position sensitive photon-detector



PHOTOMULTIPLIER TUBES
SODIUM IODIDE CRYSTAL
PARALLEL HOLE COLLIMATOR

used for planar imaging or tomography (SPECT)

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Anger Positron Camera

NEW POSITRON TECHNIQUE

The Anger positron camera has proven to be of considerable value in high-sensitivity scanning.³ This camera, shown in Figure 12, consists of a conventional Anger camera coupled



The image shows a large, complex piece of scientific equipment. On the left is a tall, vertical stand with a large, cylindrical detector assembly mounted on it. To the right of the stand is a control console with a large, flat-panel display or control surface, a smaller circular dial or gauge, and various control knobs and switches. The entire setup is on a sturdy metal base.

FIGURE 12. Anger positron camera. The crystal matrix is used to select and position pulses from the Anger scintillation camera. (3)

NUCLEAR-CHICAGO

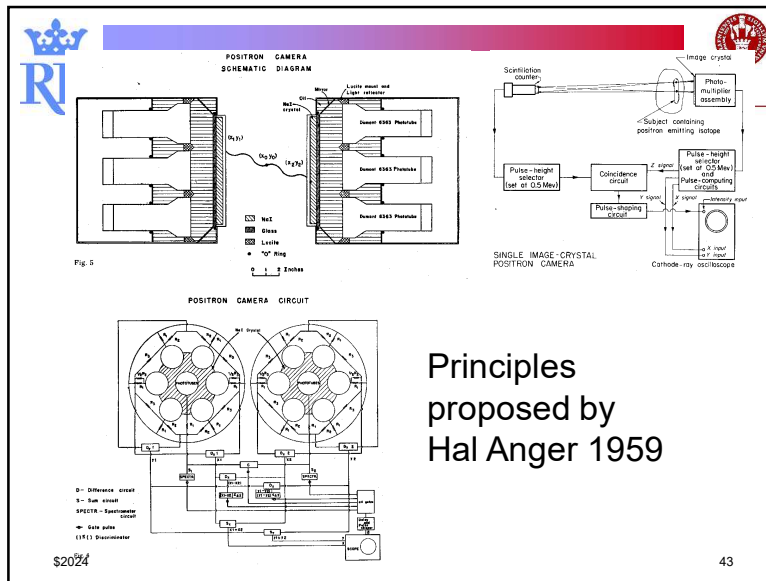
Gamma camera for positron imaging:

NOT a recent invention

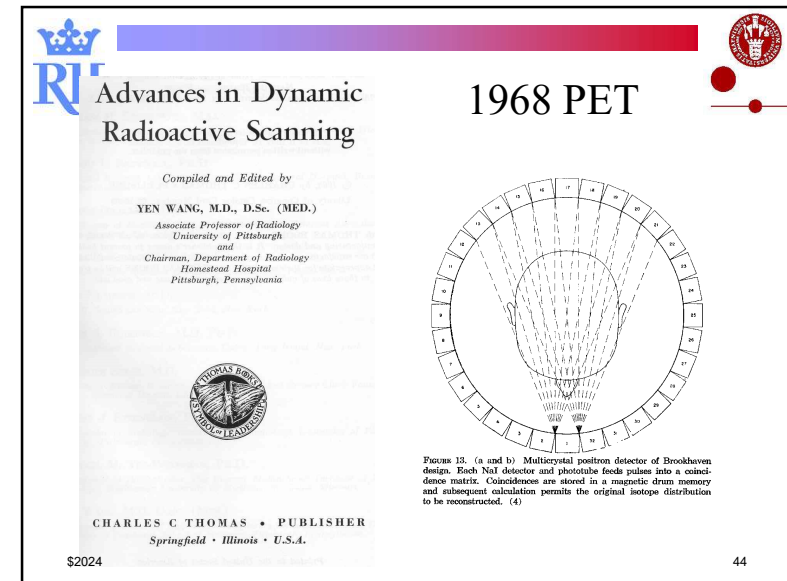
with a second matrix of sodium-iodide detectors. Only pulses in the scintillation camera which are coincident with pulses in the detector matrix are recorded. The position of the pulses are adjusted according to the location of the detector in the second matrix. By a simple control, it is possible to focus on various planes within the object. Because of the very-wide-

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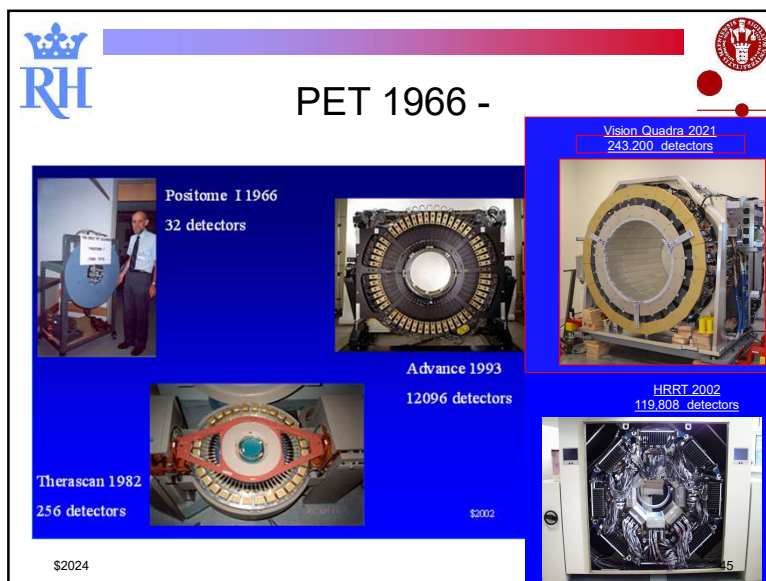
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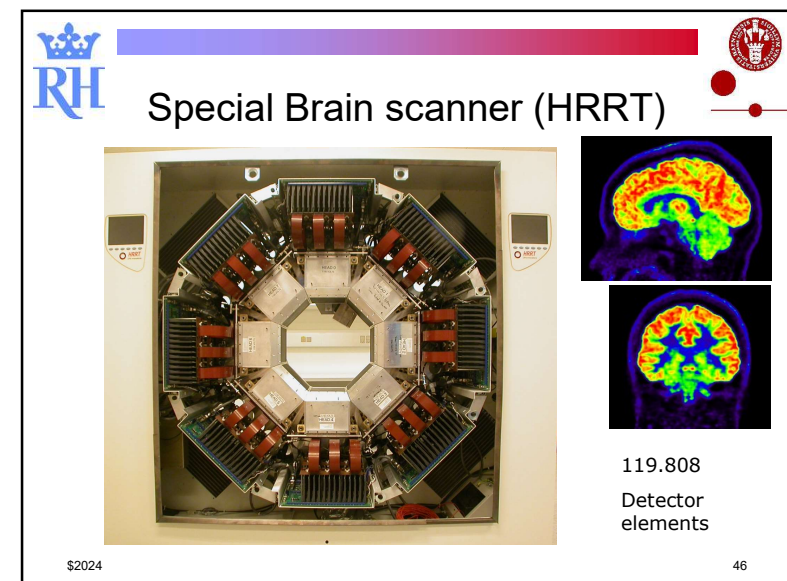
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Time to breathe...

[Reykjavik, 25. August 2011]

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Coincidence Projections

Coincidence events determine sampling paths (**Lines Of Response**)

Parallel Lines Of Response are sorted into a row of count numbers (**Projection**), representing the number of 511 keV photon pairs detected.

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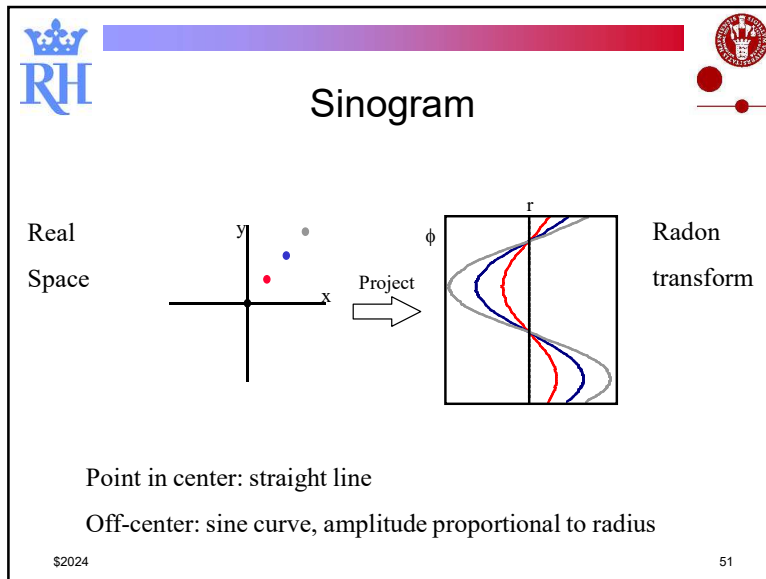
Data-Sorting Sinogram

Each **projection** is entered as a row into a **sinogram**. A sinogram is an array which stores the number of coincidence events for each detector **position** and each **angle**.

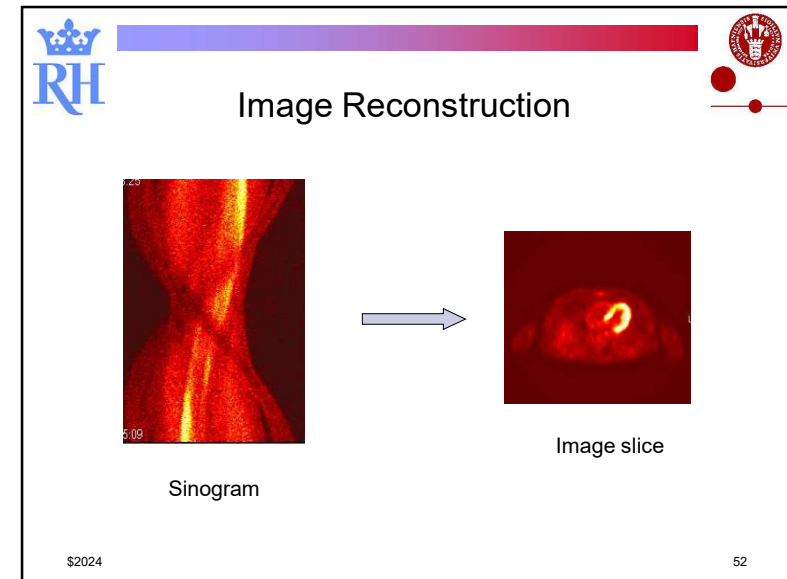
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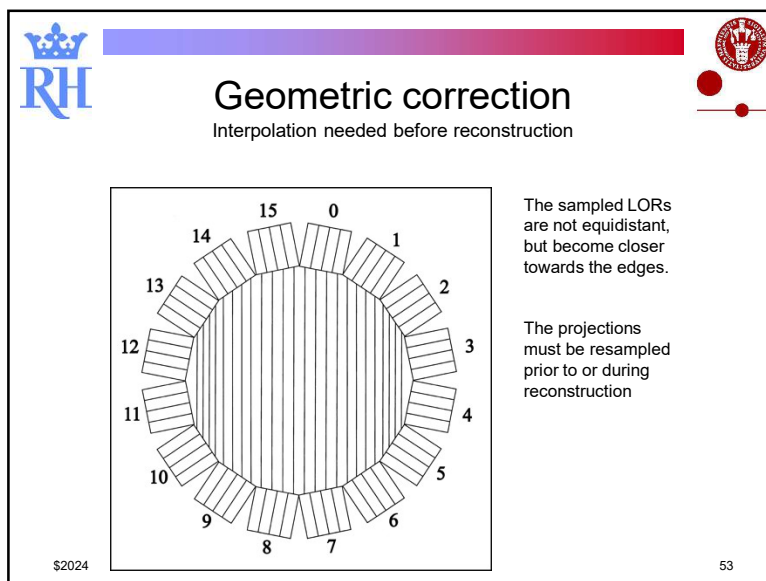
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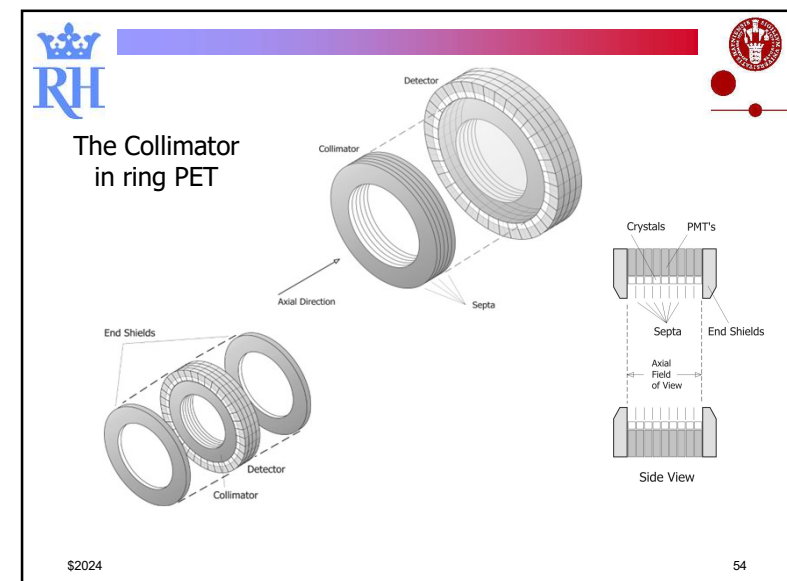
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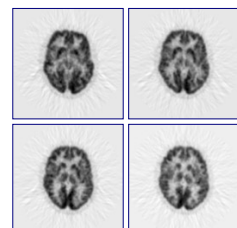
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Static Frame Acquisition

- Set of slices in a single FOV
- No patient table motion
- Brain scan
- Heart examinations (myocardial perfusion, metabolism and viability)



Adjacent brain PET static slices

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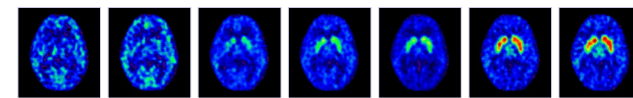
Dynamic Frame Acquisition

- Set of slices over time in a single FOV (like a movie)
- No patient table motion
- Start data acquisition as the tracer is administered
- Quantitative flow study (blood or other fluid): brain or heart

Cerebral dynamic PET scan

Tracer is ^{18}F -labeled D2 dopaminergic receptor ligand

Finding: caudate and putamen normal tracer uptake



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time

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Gated Acquisition

- Set of slices over time in a single FOV (like a movie)
- No patient table motion
- Heart imaging without cardiac motion blurring
- Myocardial perfusion, metabolism and viability



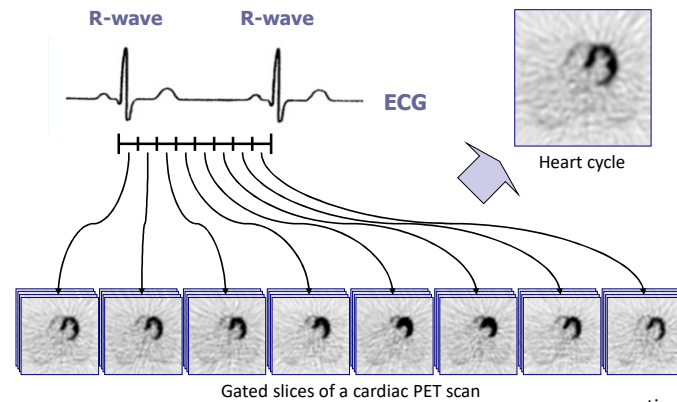
Electrocardiogram

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Gated Acquisition



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time

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List Mode data (LM)

- List mode is an alternative way to store data during acquisition
- In the sinogram, events are counted in each matrix element. In List Mode, the two addresses (the detector numbers) of the two detectors involved are written to a continuous datastream.
- Every millisecond a timestamp is added to the stream
- Signals from cardiac or respiratory monitoring may be added
- After the acquisition, the LM-file can be replayed and sorted into sinograms
- This allows dynamic and gated studies to be acquired without assumptions about time frames and number of gating bins
- In some cases it may even save raw data storage capacity

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Whole-Body Acquisition

- Metastatic spread of cancer
- Set of slices in multiple FOVs
- Step-by-step (or continuous) tabletop motion during acquisition

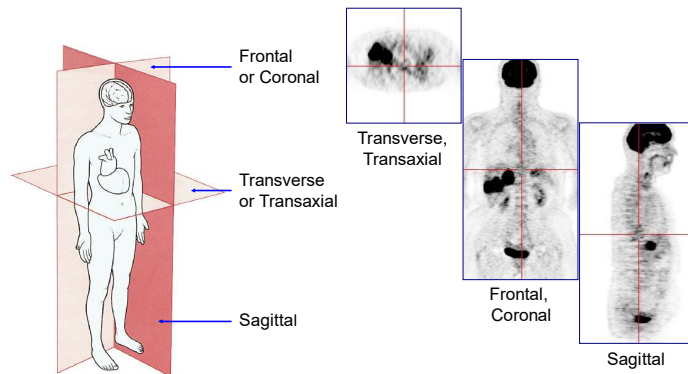


Whole-body scan₆₀

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Body Tomographic Planes

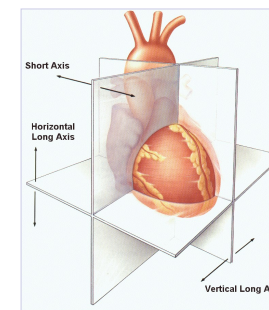


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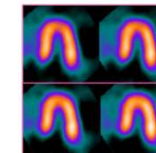
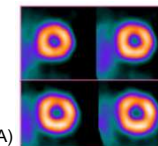
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Tomographic Planes for the Heart

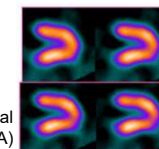


Short Axis (SA)



Horizontal Long Axis (HLA)

Vertical Long Axis (VLA)



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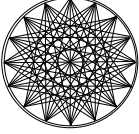
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Comparison of PET and SPECT:

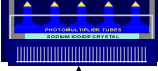




all directions simultaneously

+ PET

- 1: Higher sensitivity, with "electronic collimation"
- 2: Fast dynamic scans
- 3: "Biological" tracers with C-11, N-13, O-15, F-18
- 4: Quantitative technique, with attenuation correction



en retning ad gangen

+ SPECT

- 1: Dual isotopes possible
- 2: Tc-99m generator + kits !
- 3: Less expensive to run

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Overview (4):





- Different kinds of tomography – PET in particular
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- Scanner physics 1 – PET detectors
- Scanner physics 2 – good, bad, and noise equivalent counts (NEC)
- Attenuation and scatter correction of PET-data
- Hybrid systems – PET/CT- PET/MR - SPECT/CT... Future ideas

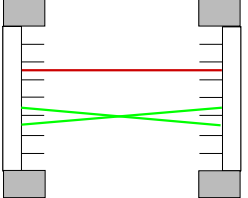
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64



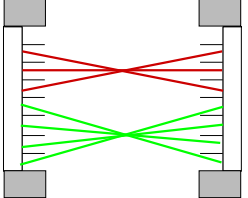
2D Imaging





High Resolution Mode

- Direct $\Delta Z = 0$
- Cross $\Delta Z = \pm 1$
- Limited Sensitivity



High Sensitivity Mode

- Direct $\Delta Z = 0, \pm 2$
- Cross $\Delta Z = \pm 1, \pm 3$
- Increased Sensitivity

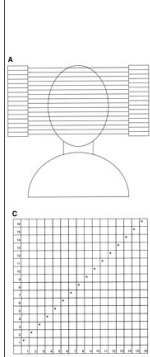
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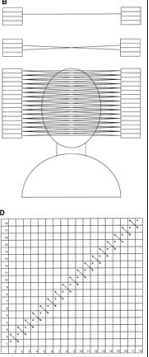


Michelogram — direct and cross slices





Direct only



Direct and Cross

The diagram shows all possible combinations of two detector rings.

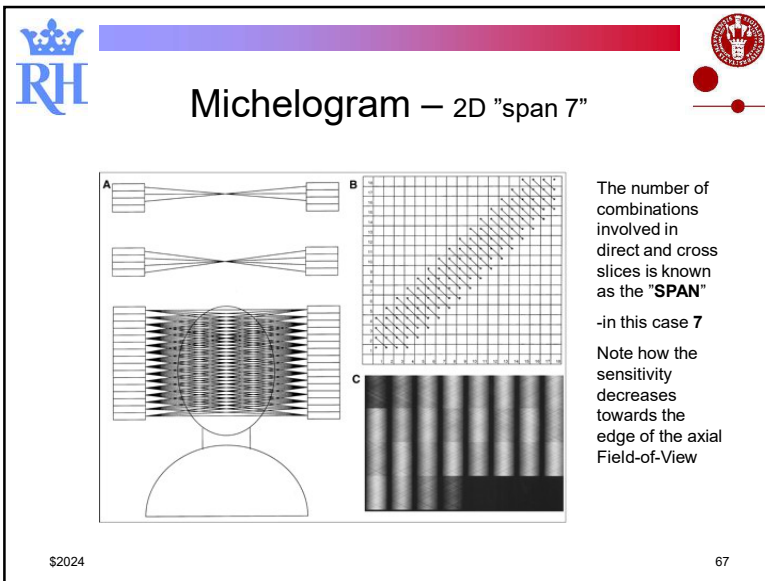
The ones "allowed" are marked with a "*".

Combinations that add to one sinogram are connected with a line between the points

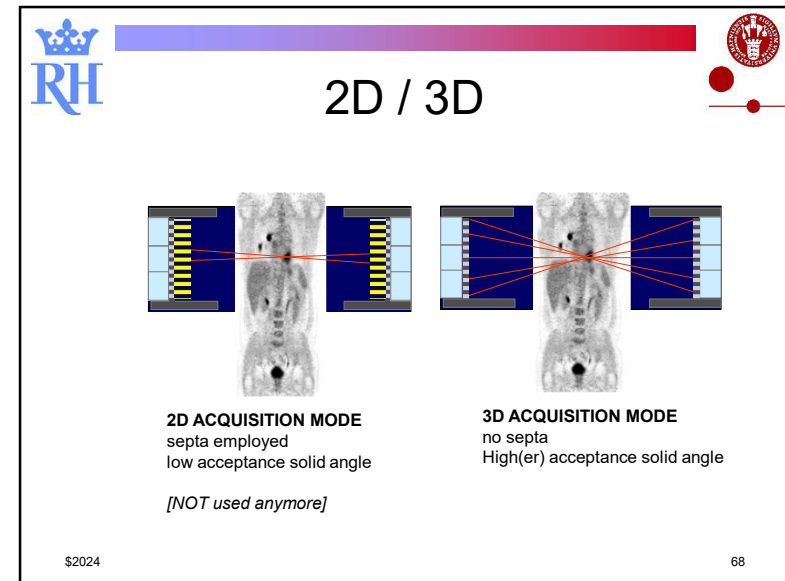
Shown examples are the simple **direct slices** (diagonal in diagram) and simple **cross slices**

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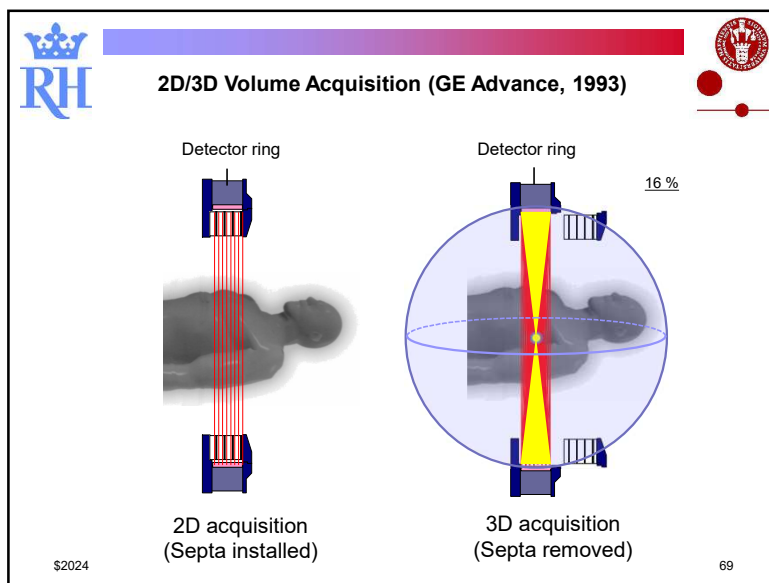
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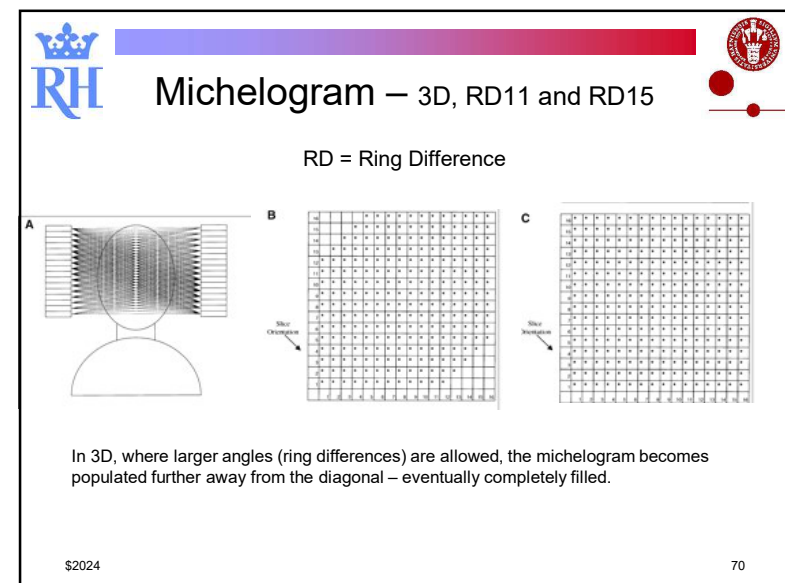
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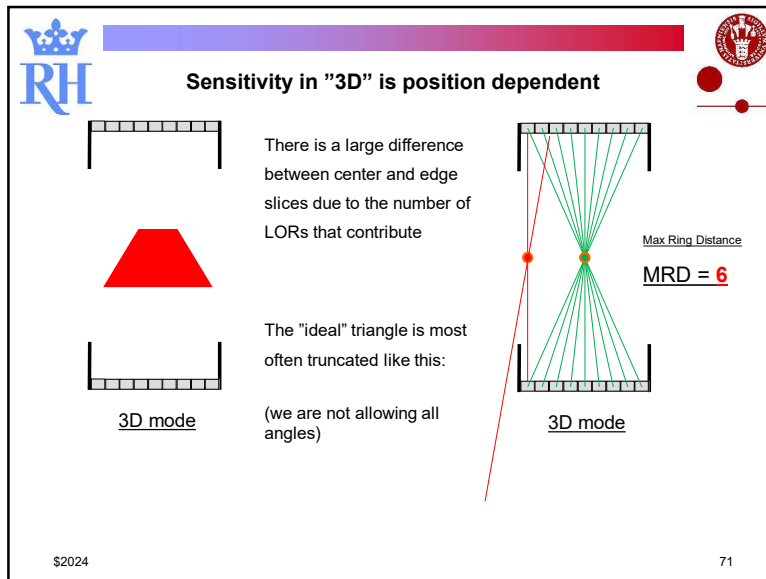
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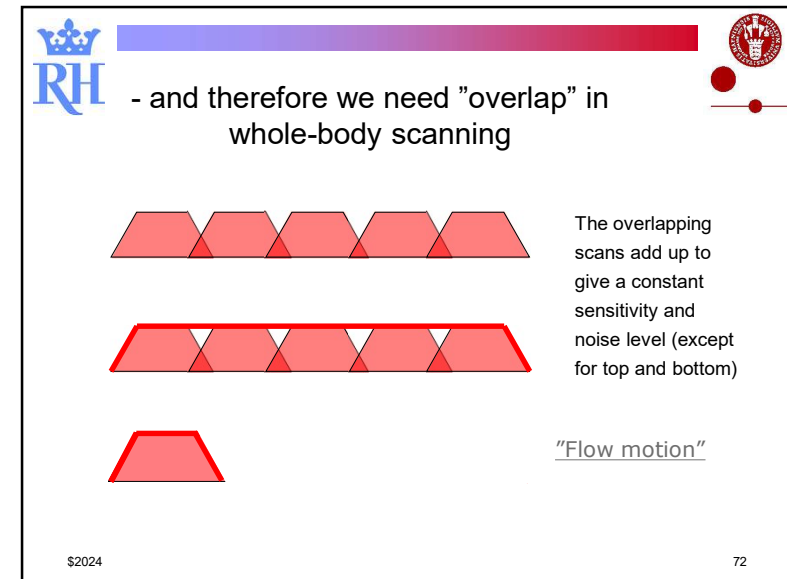
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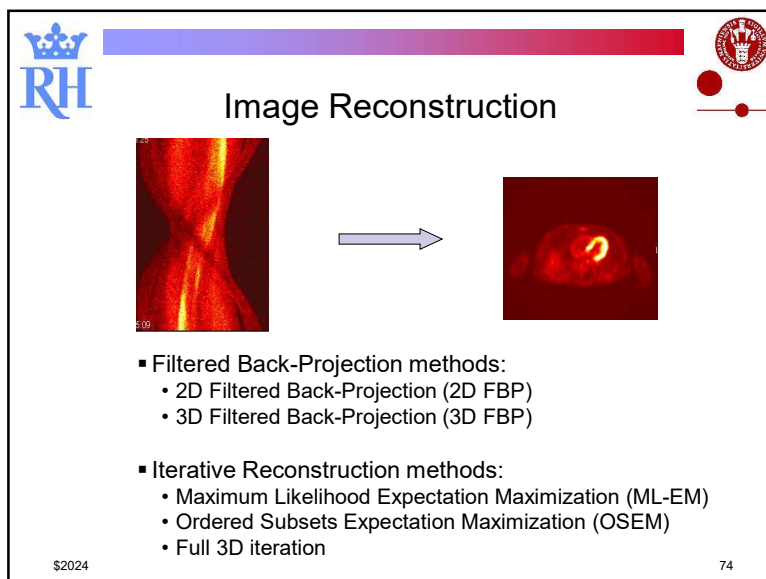
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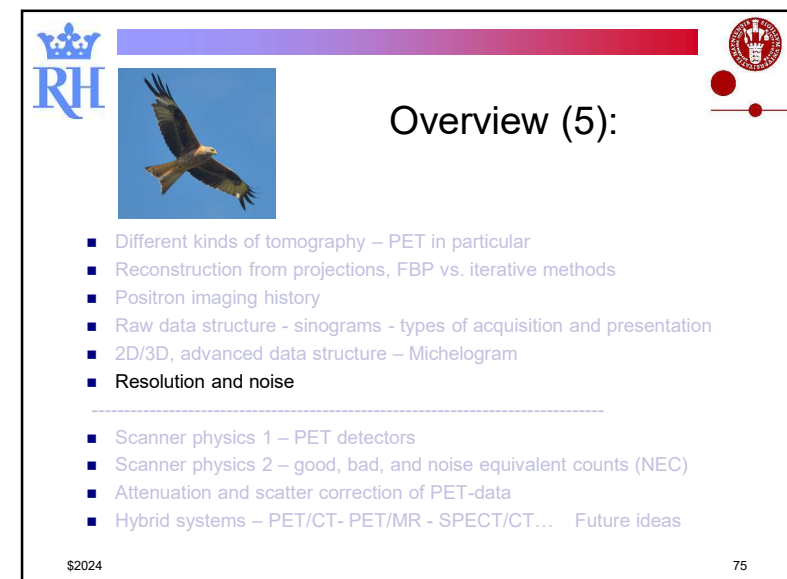
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72



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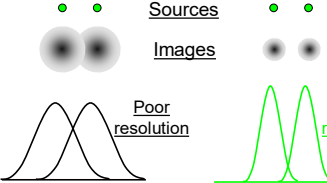


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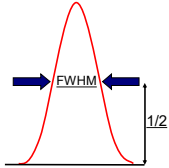

Spatial Resolution

- How small an object can you see in PET?
- Ability to separate two objects close together: **Resolution**



Line profile of a point source (PSF)

- Full Width at Half Maximum (FWHM) is the measure of resolution (unit: mm).
- Depends on position and direction in the field.
- Typical PET resolution: FWHM $\approx$ 5 mm.



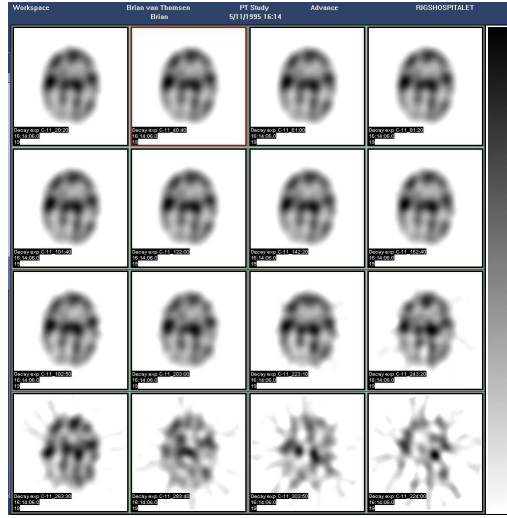
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Filtering is a balance between noise and resolution (FWHM)



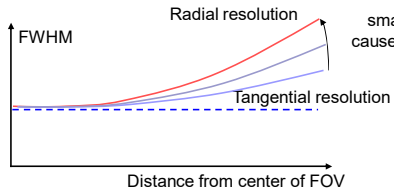
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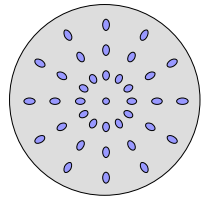
78




Radial Vs Tangential Resolution



Plot of resolution versus radial position



Smearing of point sources within the FOV

- Radial resolution degrades toward the edge of the field-of-view.
- Tangential resolution is almost constant within the field-of-view.

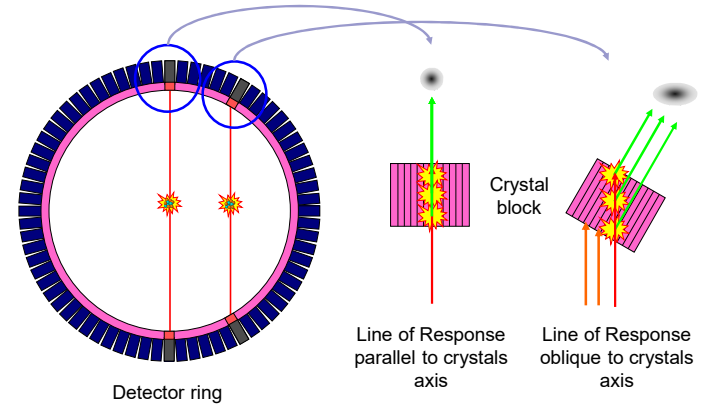
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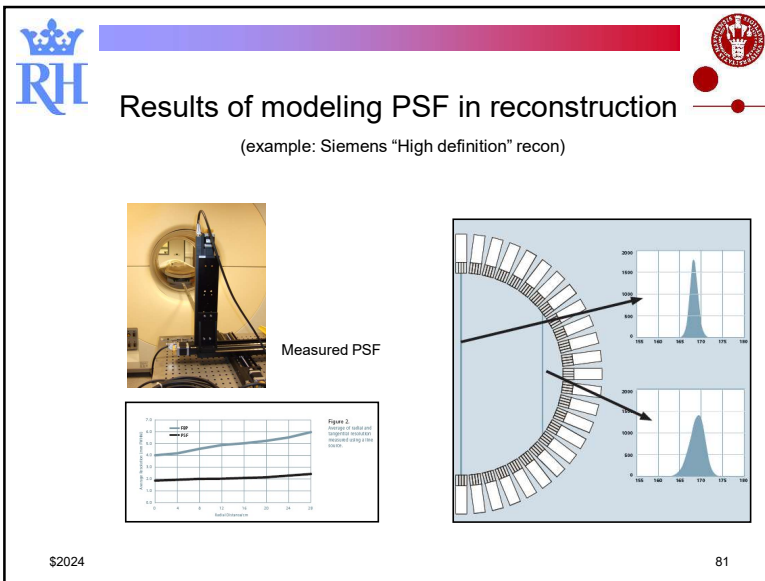

Radial Vs Tangential Resolution



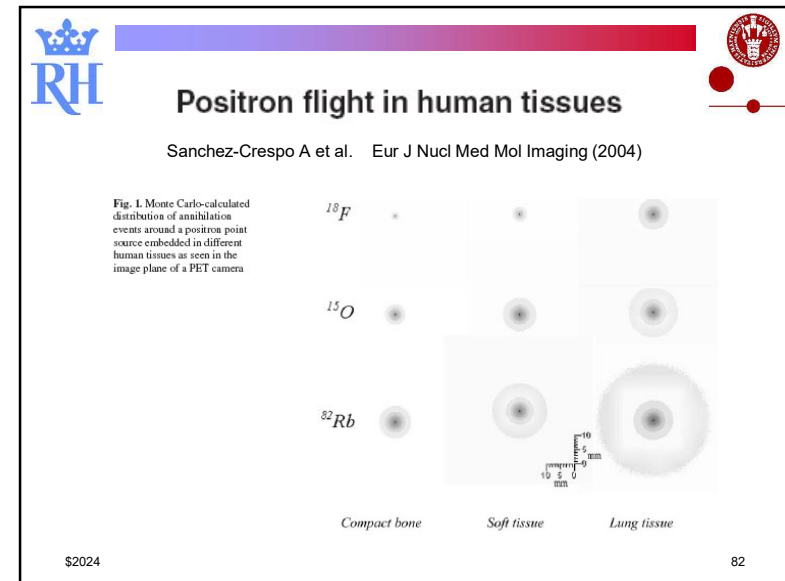
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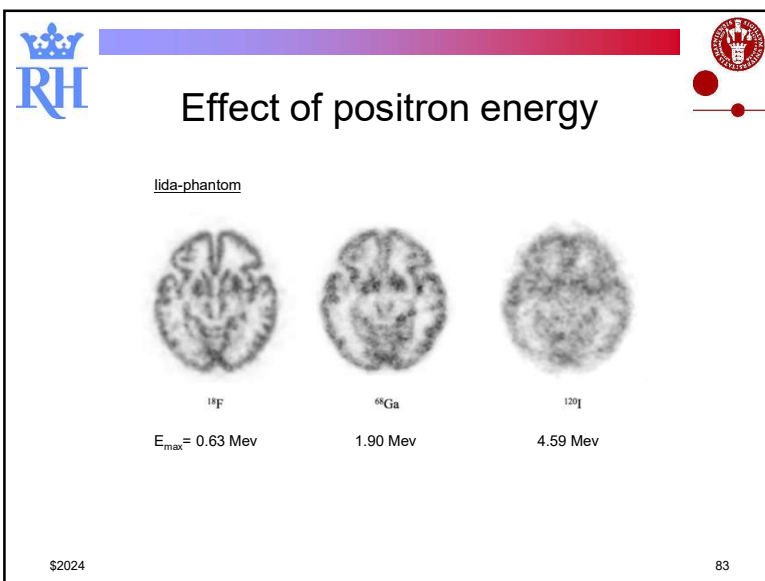
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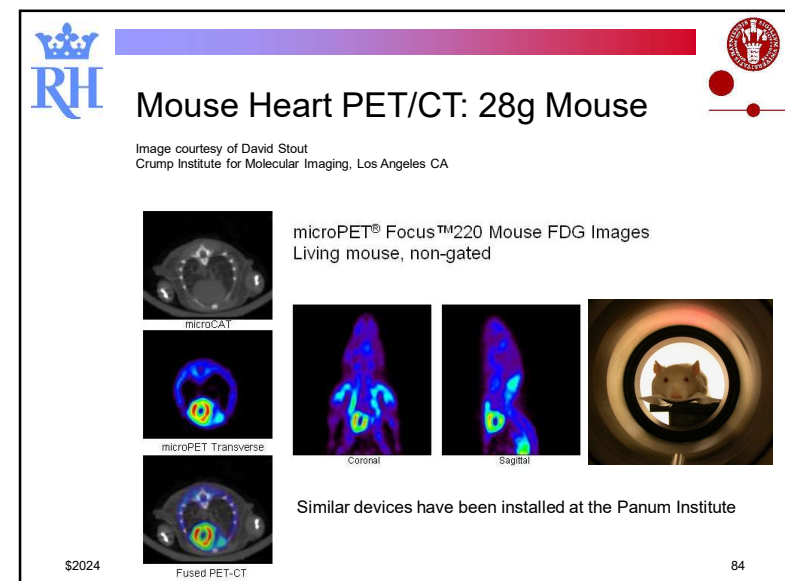
81



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Overview (6):



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Detection of 511 keV photons



- First, we need to stop the photons
 - That requires some high Z, high density material
 - which converts the energy to low energy photons
- Then this signal must be amplified and digitized
 - Two options:
 - photo multiplier tube (PMT) or
 - solid state detectors (APD, SiPM)

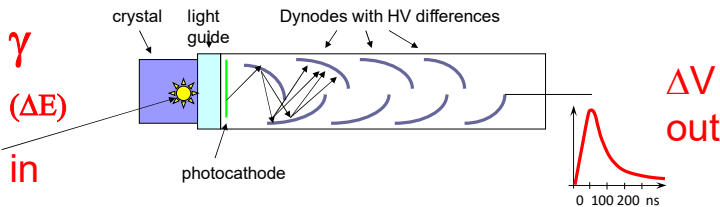
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Scintillation detector





γ - photon absorbed - converted to light – starts cascade of electrons

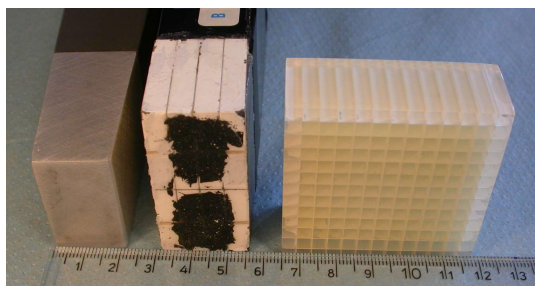
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Evolution of PET-detectors

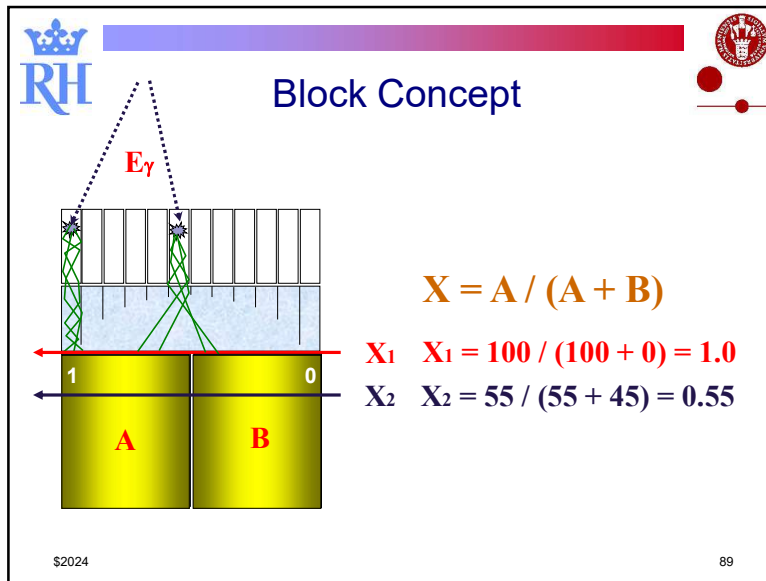




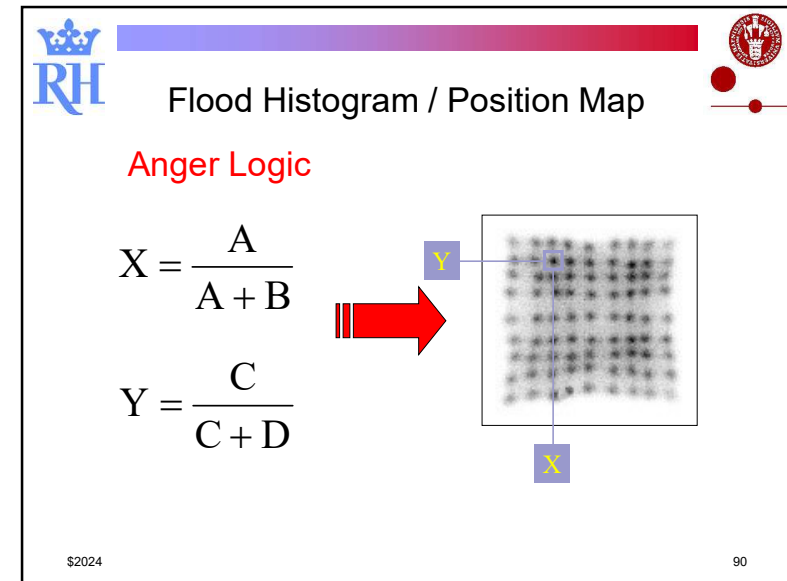
Therascan	4096+	Biograph Hirez	Biograph Vision
1981 (89)	1991	2005	2018
single detector	4*4 block	13*13 block	(4*2) 5*5 miniblock
20*35 mm	6*12 mm	4*4 mm	3.2*3.2 mm
total # 256	total # 4096	total # 24336	total # 60800

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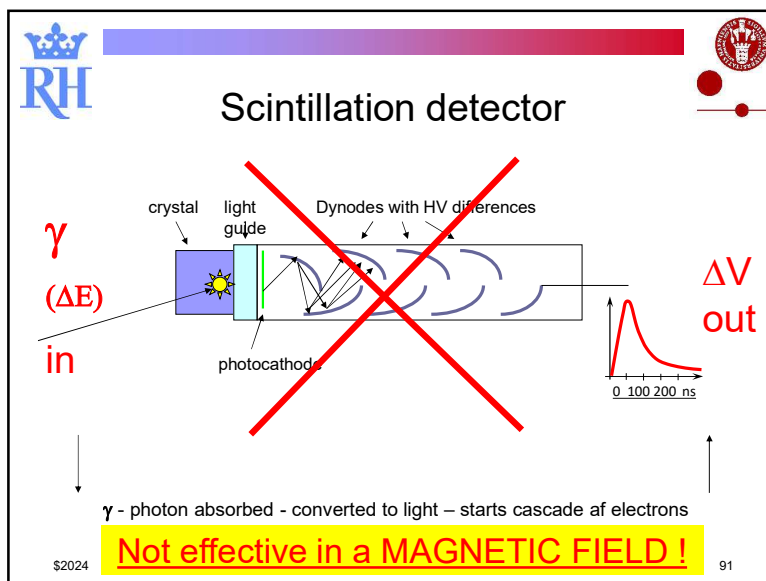
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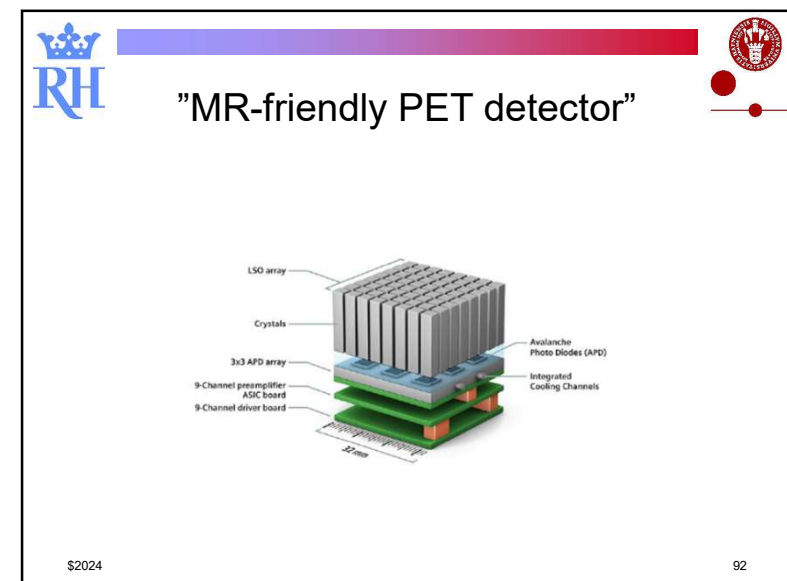
89



90



91



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Basic PET Detector technologies

Solid-state photo-multipliers (SSPMs) can be fabricated from small silicon sub-pixels to replace PMTs making them attractive for PET+MR and TOF-PET:

- fast, low-jitter time response
- magnetic field immunity
- small form-factor

Technical challenges:

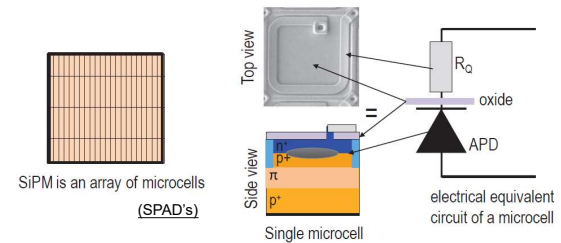
- Readout circuits/ASIC development
- Multiplexing options
- Handling multi-crystal events
- MR compatible architecture

	PMT	SSPM SiPM	APD
Detection efficiency	25%	50%	50%
Coincidence timing res.	550ps	250ps	1000ps
Gain	10^6	10^5 - 10^6	10^2
Height	100 mm	2 mm	2 mm
Magnetic Sensitivity	High	Low	Low
Noise	Low	Low	High
Cost	Low	High	High

SiPM = Silicon PhotoMultiplier

HAMAMATSU
PHOTONICS K.K.

SiPM structure



First characterization of a digital SiPM based time-of-flight PET detector with 1 mm spatial resolution 3063

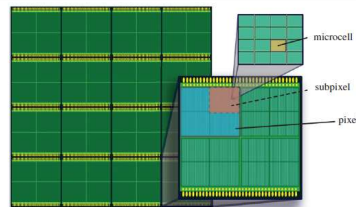
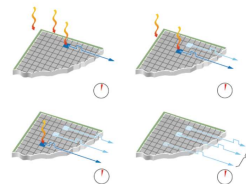


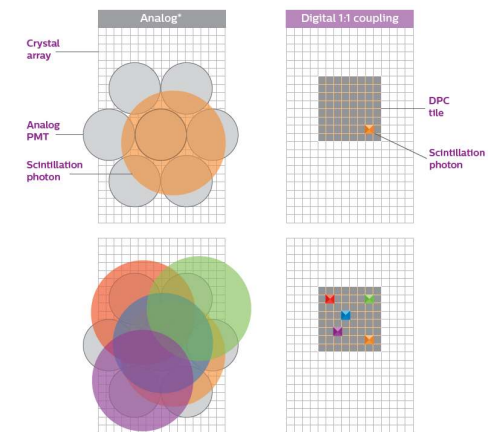
Figure 1. Schematic representation of the digital silicon photomultiplier (dSiPM) array. The larger inset depicts a zoom on a single die consisting of four pixels. Each pixel contains 6396 microcells (a number of which are shown in the smaller inset) that are arranged into 4 subpixels.

1 Tile
16 dies
4 pixels
4 subpixels
~1600 microcells

Philips Vereos Digital PET dSiPM



Shared PMTs versus 1 to 1 coupling



PET Detector Components

Crystal elements and photomultiplier tubes

Detector block

Detector blocks and front-end electronics

Detector ring

Module array

Detector module

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PET (example: GE Advance)

PMT-gain

Energy-windows

Uniformity

336 *

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Every pair of blocks is tuned for coincidence timing

99

98

99

Block contribution to sinogram

A

B

C

All the contributions from a single detector will be on a line, angled as shown. Due to sensitivity differences a certain "rhombic" structure will be visible in the sinogram.

One defective block will show up as a black, empty area in the sinogram

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100

100

Normalisation correction

– Compensates systematic efficiency variations (system geometry, crystal efficiency)

Sinogram **before** normalisation correction

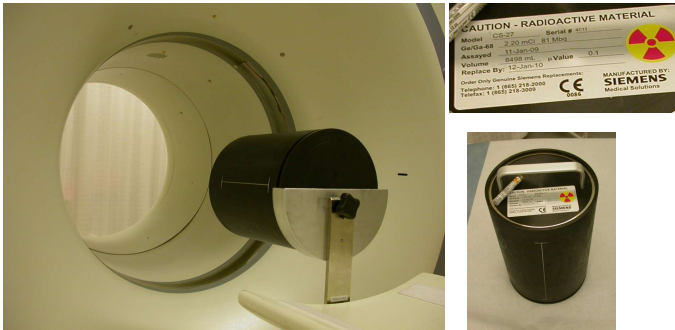
Sinogram **after** normalisation correction

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101

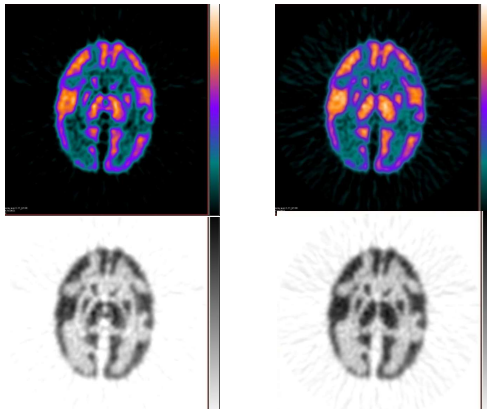
RH Siemens Biograph uses ^{68}Ge cylinder
- but recently intrinsic radiation from Lu-176 (crystals!) is utilized over night



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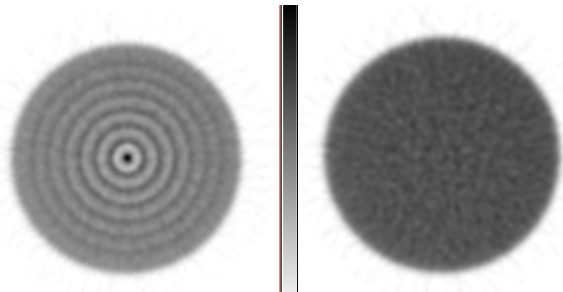
RH Effect of Normalisation



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RH Uniform phantom – very sensitive to NORM



without with

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RH Overview (7):



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RH Two processes stop photons in tissue:

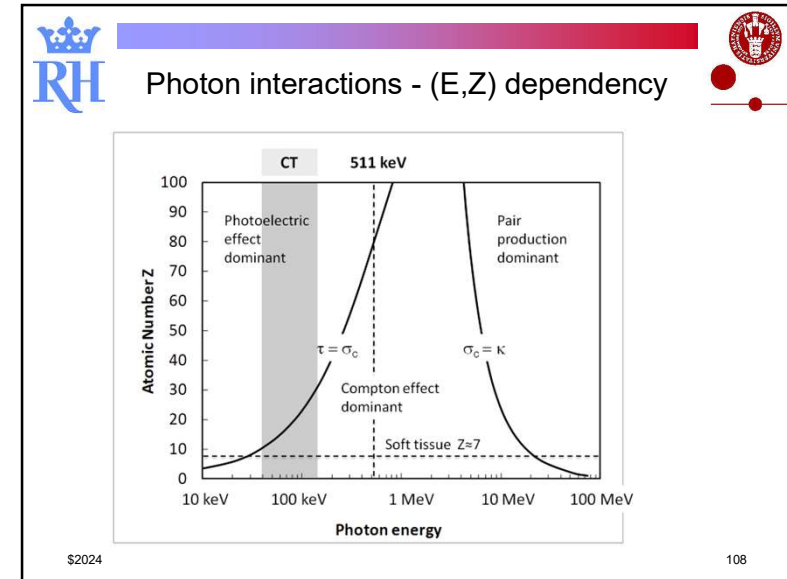
Absorption: Simple, no parameters

Compton scattering: Parameters E' and θ

E γ e^- θ γ' $E' (<E)$

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RH True Coincidence Scatter Coincidence

Vary linearly with injected activity

Not all counts are created equal...

there are the good, the bad, and the ugly counts

Random Coincidence Vary quadratically with injected activity and linearly with coincidence window

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RH The ideal scintillation detector has

- High element no (Z) $\Rightarrow$ Good absorption
- High density (ρ) $\Rightarrow$ High sensitivity
- Short decay of light $\Rightarrow$ Less Deadtime, fast counting
- High light output $\Rightarrow$ Narrow coincidence window $\Rightarrow$ less Randoms
- Low price $\Rightarrow$ Good energy resolution $\Rightarrow$ Scatter rejection

crystal light guide dynodes photocathode

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RH

PET Detector Scintillator Materials

Crystal material	max Z	effective Z	density g/cm ³	output photons/keV	decay time ns
NaI:Tl	53	51	3.7	40	230
BGO	83	73	7.1	8	300
LSO:Ce	71	66	7.4	28	40
LYSO	71	54	5.4	28	53
GSO:Ce	64	59	6.7	7.5	56
BaF ₂	55	54	4.1	2	0.8

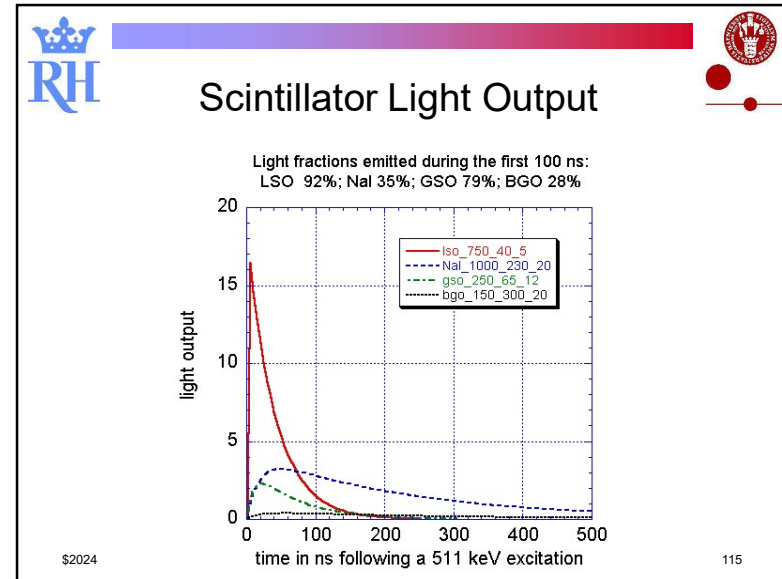
"New" promising crystal materials: LaBr₃, CeBr₃ and TlBr

BGO may have a come-back

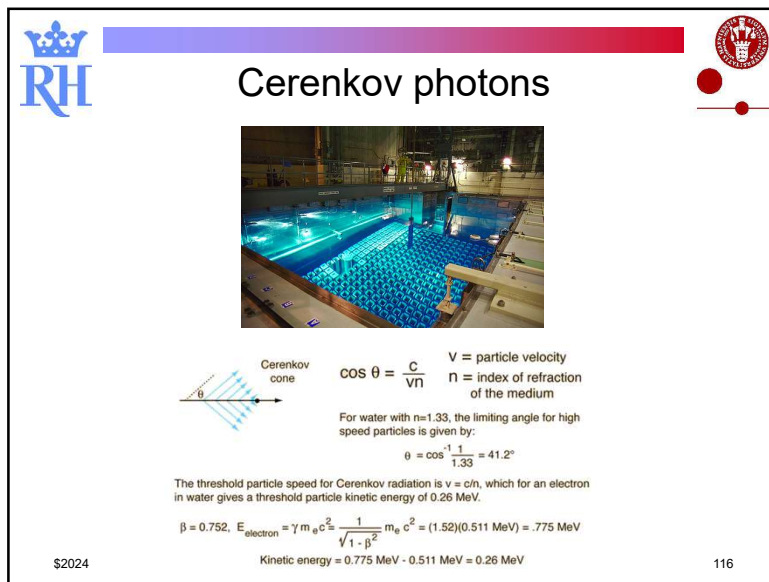
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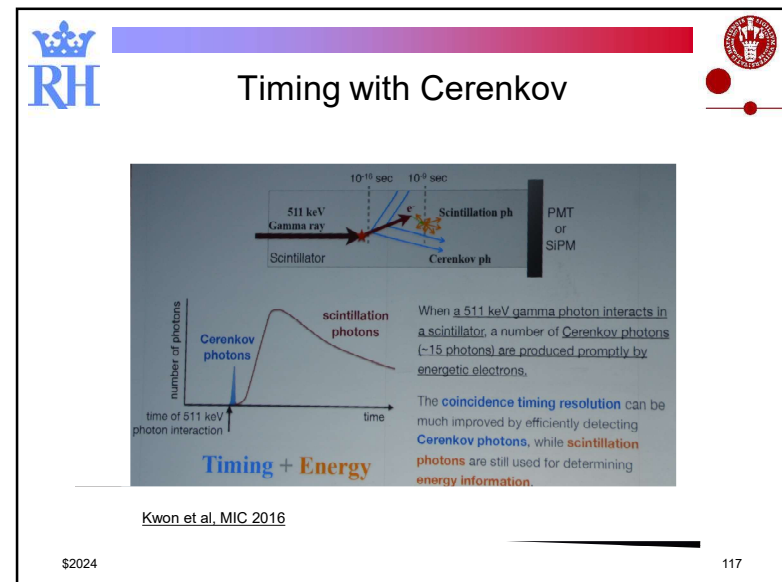
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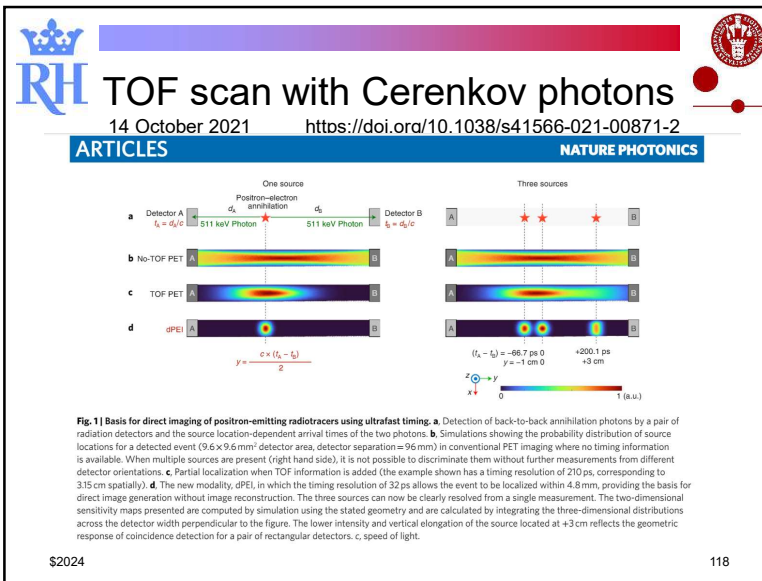
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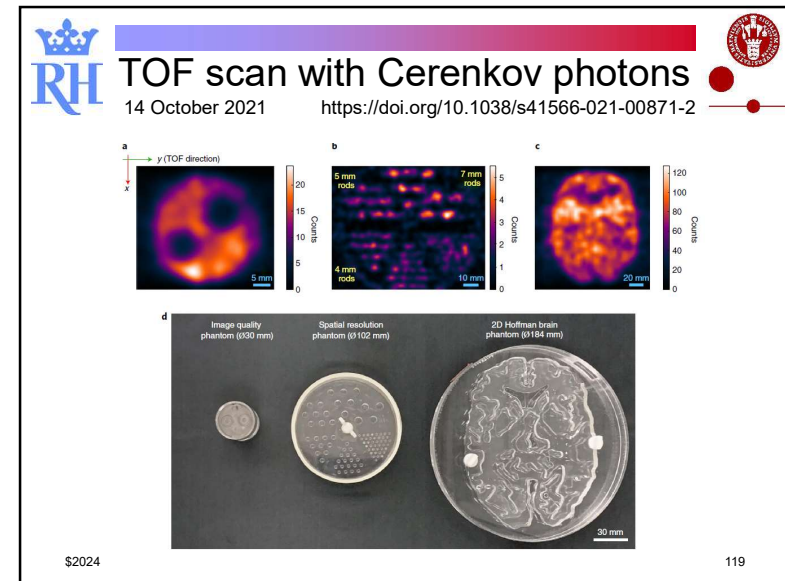
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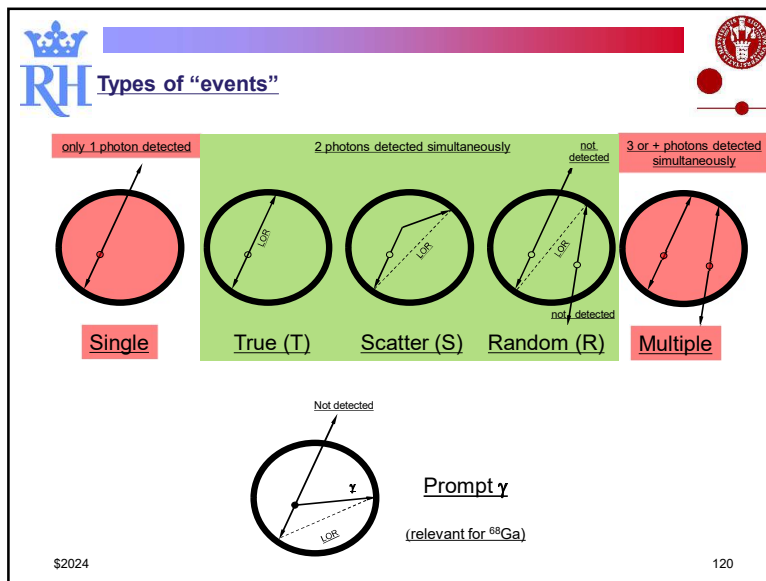
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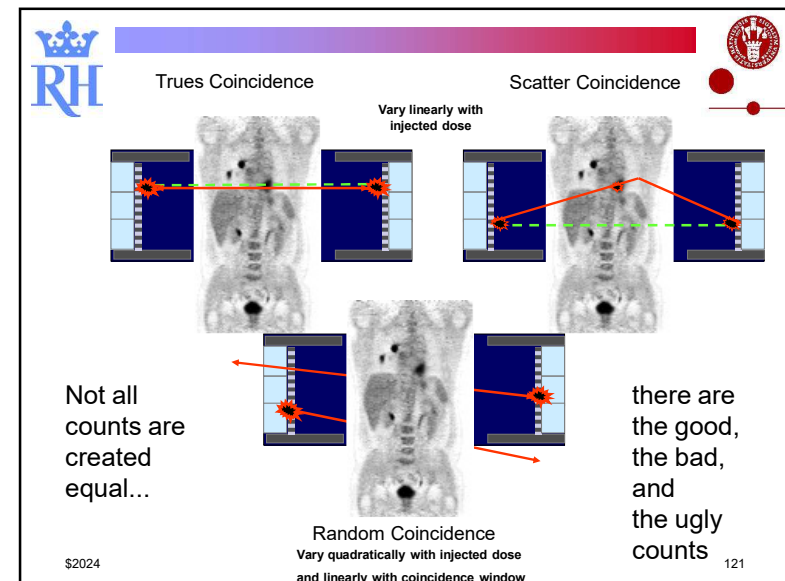
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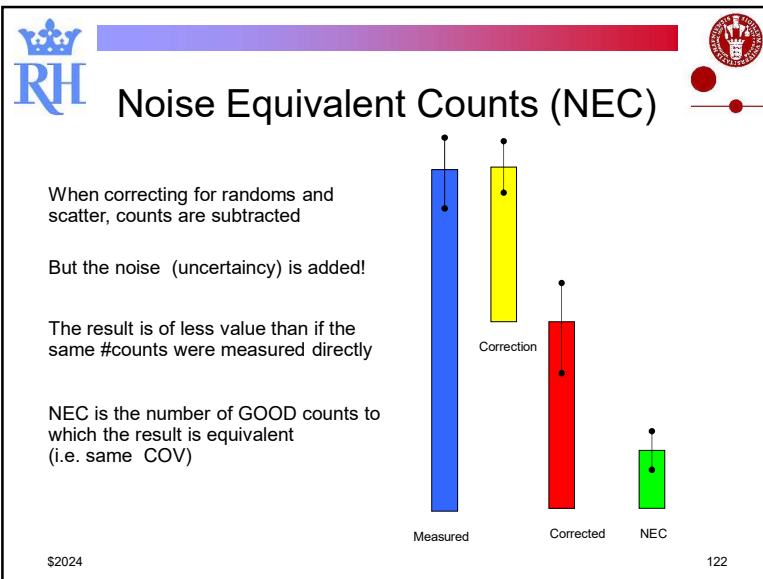
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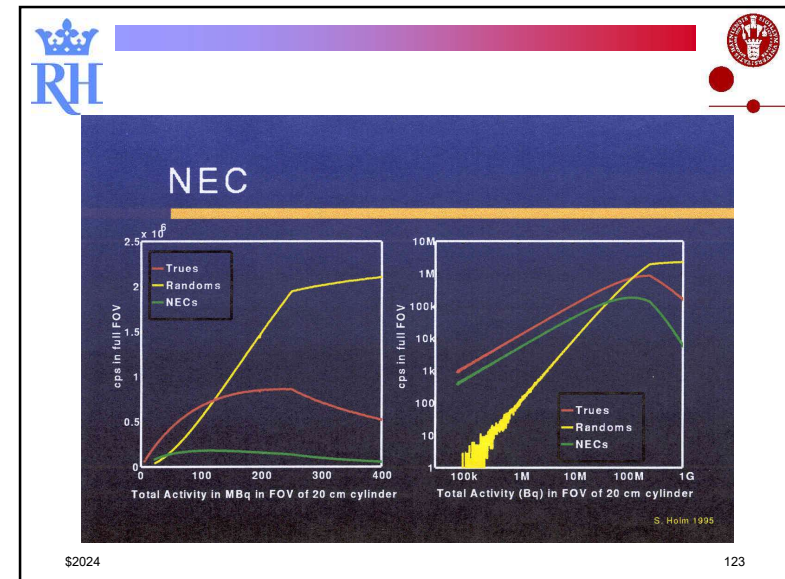
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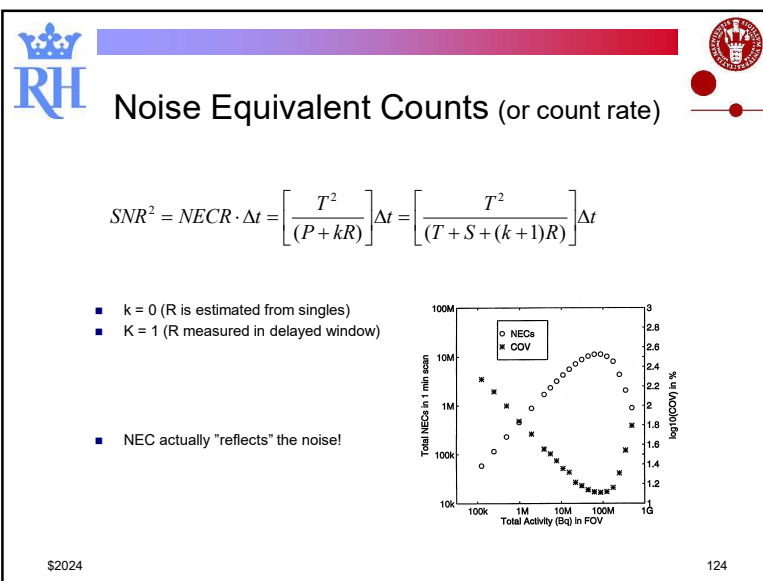
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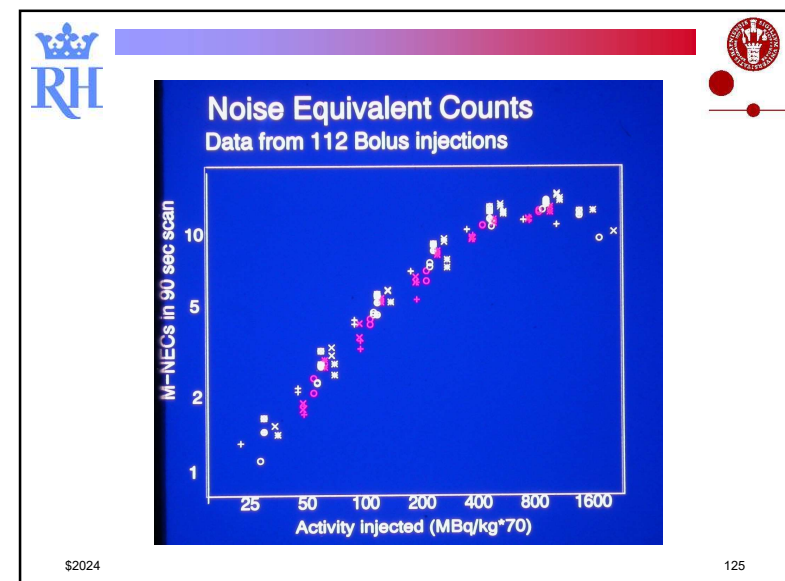
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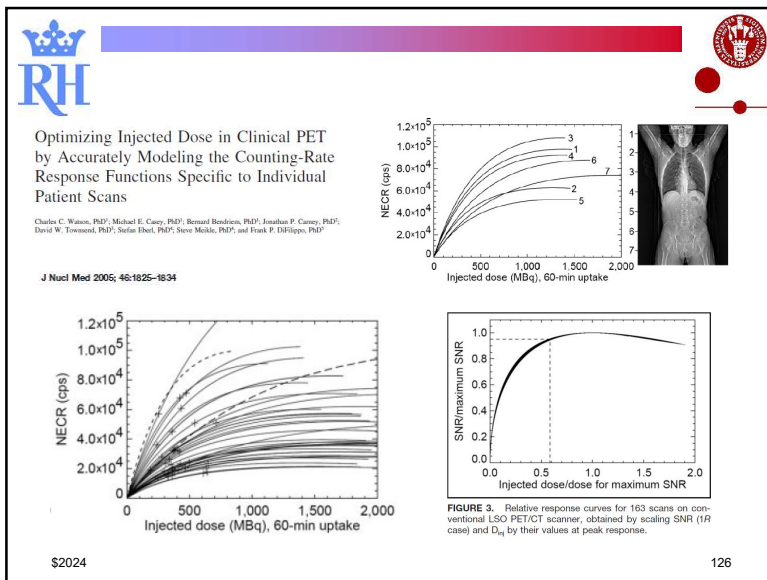
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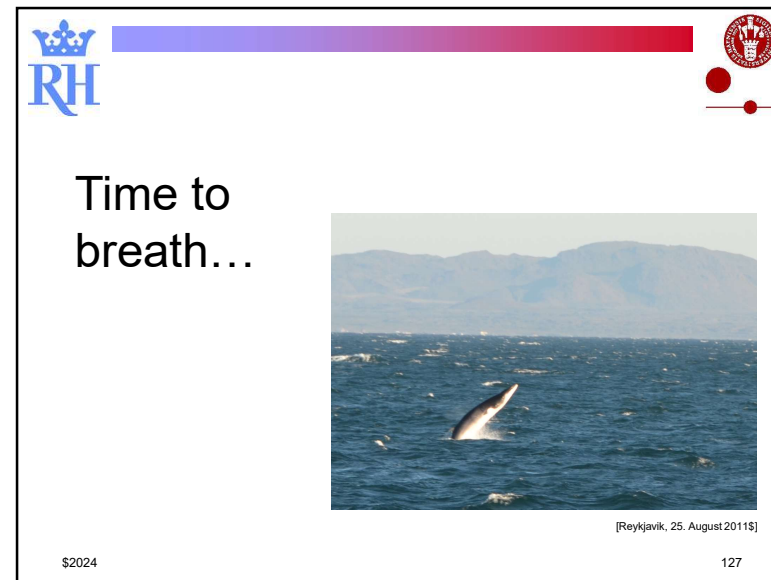
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RH

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RH

PET is a quantitative technique

(although most people don't care these days...)

IF all the necessary corrections are applied:

- Deadtime
- Geometry, Normalization
- Randoms subtraction
- Attenuation and scatter
- Decay
- ...

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Attenuation and Scatter

- It is a paradox in our terminology that from a *physics* point of view, **attenuation** (in NM) is caused mainly by **scattering** processes (and only partly by absorption)
- but in our *correction* procedures:
 - Attenuation** is "lack of counts" that we must restore while
 - Scatter** is a surplus of counts (in wrong places) to be removed
- Correcting one without the other will give wrong results

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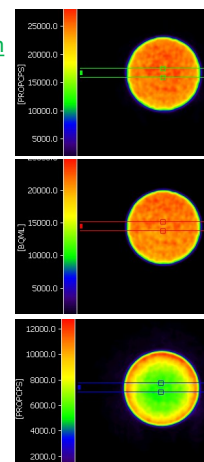


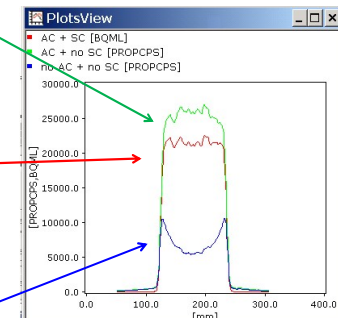
Attenuation and Scatter

Attenuation correction

Attenuation + Scatter correction

No correction





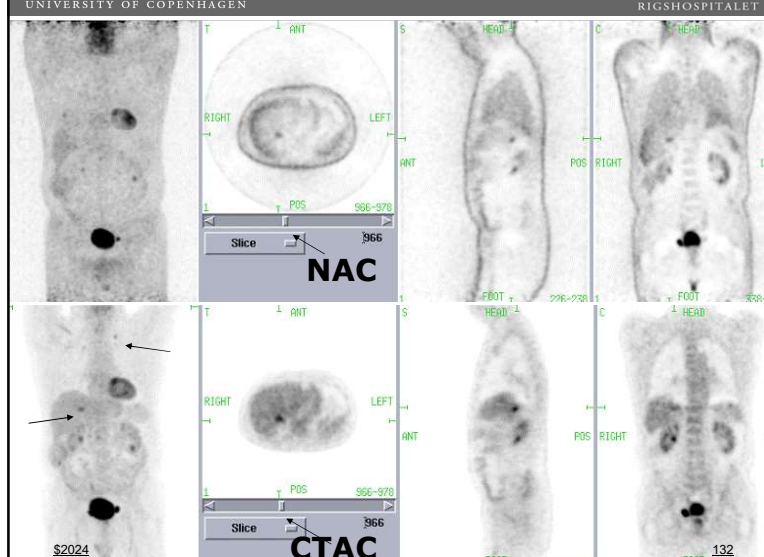
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RIGSHOSPITALET



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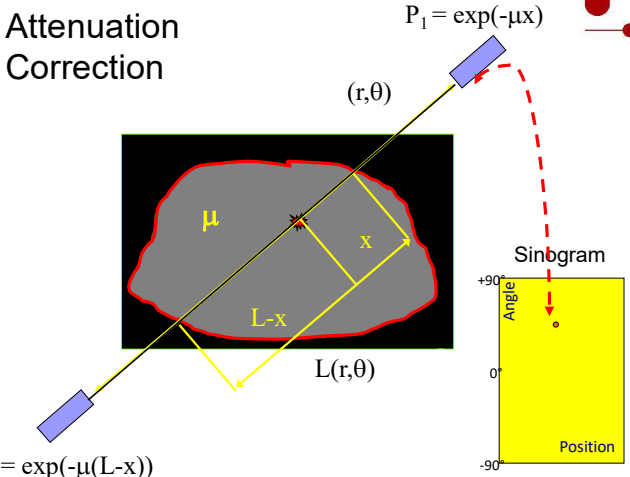
132



Attenuation Correction

$$P_1 = \exp(-\mu x)$$

$$P_2 = \exp(-\mu(L-x))$$



Sinogram

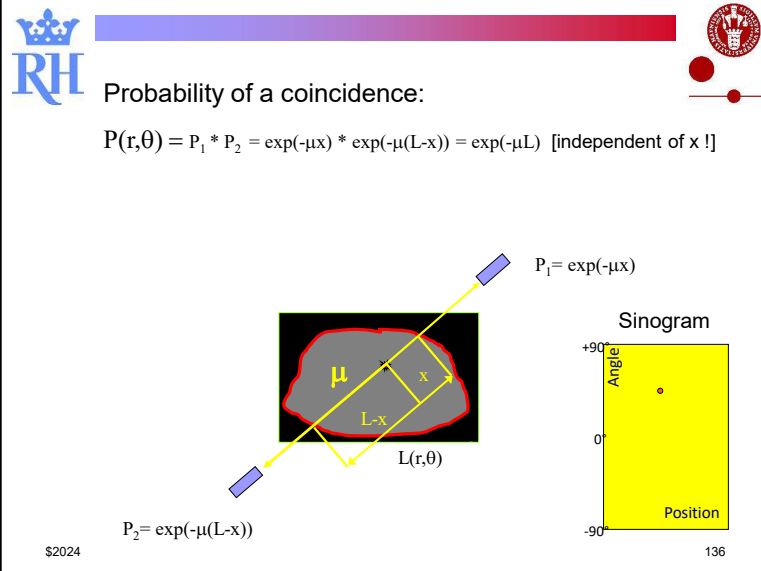
Angle

Position

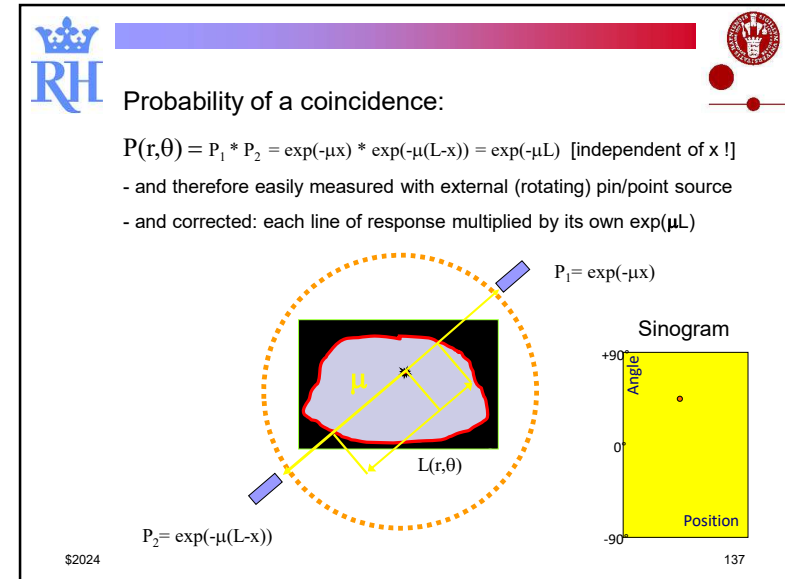
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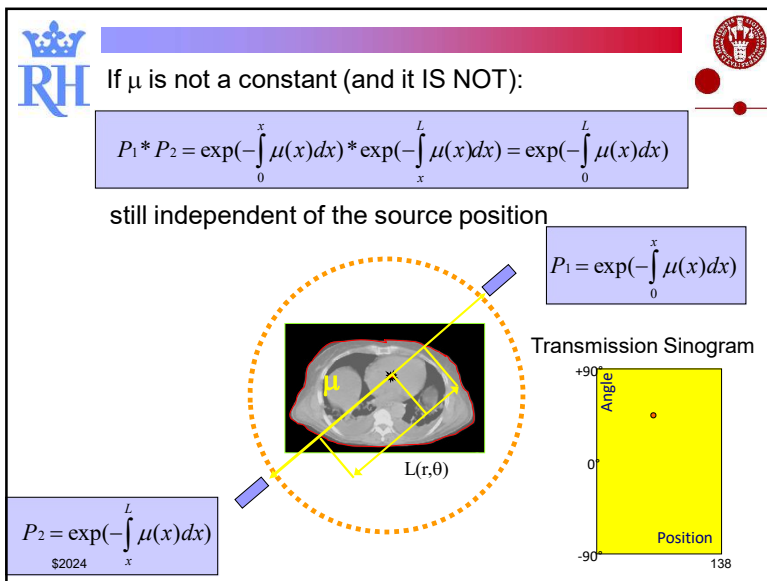
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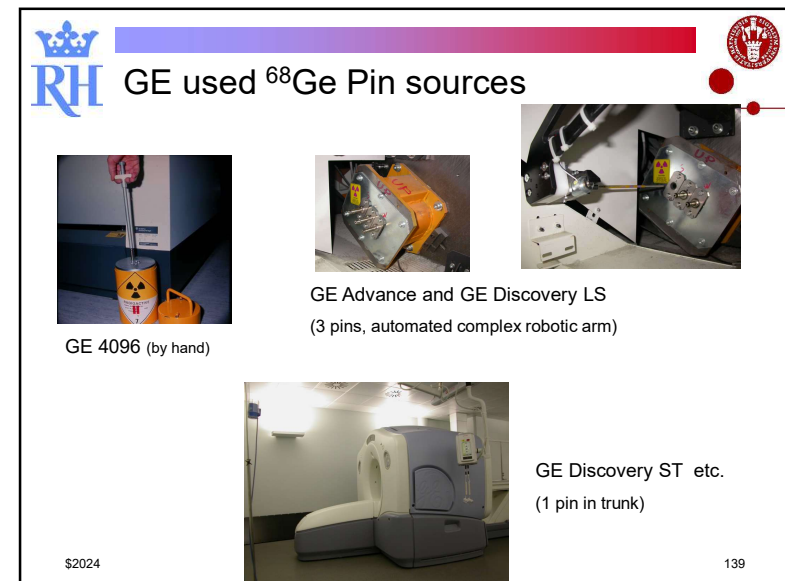
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CT scans are μ -maps (in HU)

They can be used for attenuation correction – essentially noise free

But: $\mu(511\text{ keV}) \neq \mu(80\text{ keV})$, therefore a scaling is required

Soft tissue and bone (and contrast) scale differently

Not one simple scaling factor, but a lookup table for $\mu(\text{HU}; \text{kV}_p)$

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Scatter in SPECT and PET

appears "inside" the object

may appear outside object

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Scatter Correction by Function Fitting

- Fit data to projection tails
- This requires tails!
- More elaborate methods model the scatter from detailed knowledge of the object

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Scatter removal by energy discrimination

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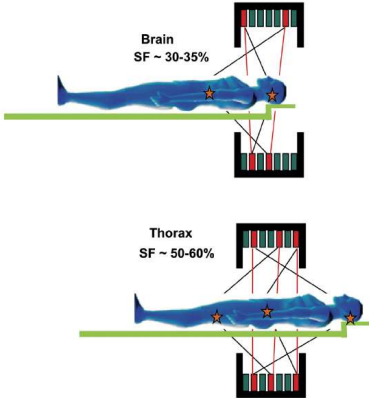
144

144



Scatter fractions in 3D PET





Brain
SF ~ 30-35%

Thorax
SF ~ 50-60%

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Scatter correction techniques



- Metz / Wiener filtering
- Asymmetrical energy window
- Dual energy window
- Dual photopeak window
- Weighing of detected events (WAM)
- Channel ratio method
- Photopeak energy distribution analysis
- Position dependent scatter correction
- Stationary / Non-stationary deconvolution
- Iterative reconstruction techniques
- Neural network
- Pixel by pixel spectral analysis
- Regularized deconvolution-fitting method
- Scatter-free imaging (CFI)
- Holospectral imaging
- Factor analysis of medical image sequences
- **Single scatter simulation techniques**

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Overview (9):





- Different kinds of tomography – PET in particular
- Reconstruction from projections, FBP vs. iterative methods
- Positron imaging history
- Raw data structure - sinograms - types of acquisition and presentation
- 2D/3D, advanced data structure – Michelogram
- Resolution and noise

- Scanner physics 1 – PET detectors
- Scanner physics 2 – good, bad, and noise equivalent counts (NEC)
- Attenuation and scatter correction of PET-data
- Hybrid systems – PET/CT- PET/MR - SPECT/CT... Future ideas

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PET/CT scanner:



First “physicist’s” PET-CT was constructed by Townsend, Beyer, Kinahan et al in Pittsburgh 1994-

We (Rigshospitalet) got a prototype from GE in 2001

Today commercial devices exist from:

- GE
- Siemens
- (Philips)
- United Imaging
- and a few others
- - with more than 10000 installations worldwide

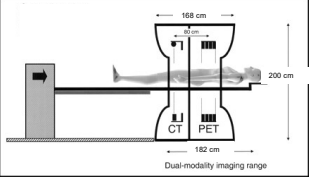
■ Since 2005, almost NO stand-alone PETs have been installed

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PET/CT (or SPECT/CT) scanner:




(Townsend et al 2004)

- combines two modalities in one gantry, common axis, common bed
- allows precise fusion of images
- provides structure + function in the same image
- can use CT for attenuation correction of PET /SPECT)

Anatomical localisation of tracer – Attenuation correction

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PET/CT: GE Discovery LS

Advance NXI + Lightspeed plus



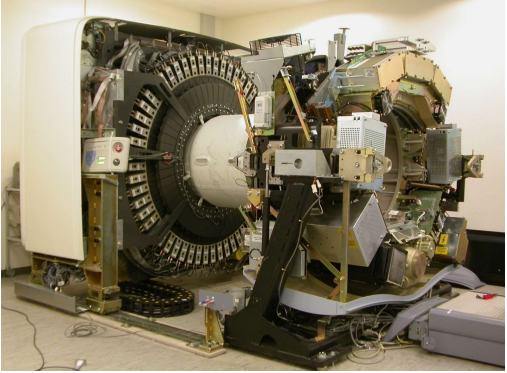
Detector material
BGO

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Inside Discovery LS



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PET/CT (images from around 2005)

Herlev
Hillerød
Vejle (2)
Århus RT



Philips Gemini (KAS Herlev)



Siemens Biograph (RH)

Unknown company:
Viborg
Esbjerg
Åbenrå
...



GE Discovery (Milano San Raffaele)

RH (6)
Næstved (2)
Århus PET (4)
Herning
Herlev (3)
Glostrup

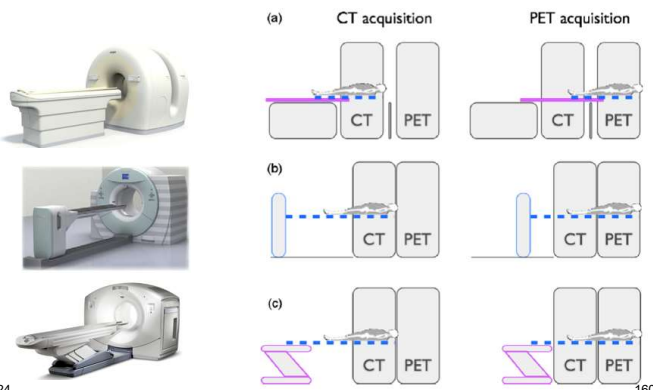
Odense (5)
Ålborg (2)
Køge (2)
Hvidovre
Gentofte
Bispebjerg (3)
Herlev RT

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RH PET/CT instrumentation: adding CT

□ Important design criterion: keeping the patient position (height) stable



(a) CT acquisition PET acquisition

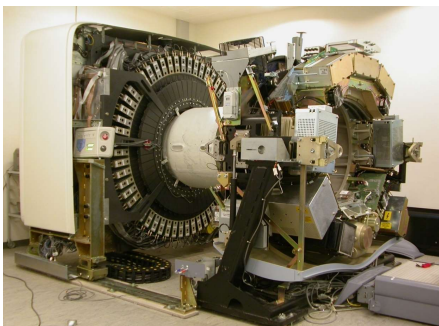
(b) CT PET

(c) CT PET

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RH PET/CT alignment /registration



Not likely to change spontaneously.

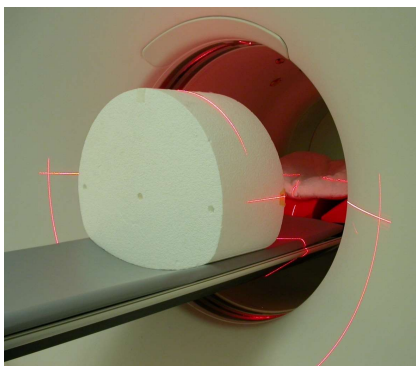
For **GE** and **Siemens**: Only opened by service. Must be measured after "invasive procedures"

Philips Gemini designed to scan in the separated position also.

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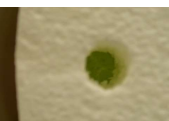
RH GE PET – CT alignment



GE Discovery aligns CT with PET transmission using the built-in Ge-68 line sources.

No (other) activity is required
The phantom contains 5 glass spheres

Newest GE-scanners use similar phantom with Ge-68 spheres



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RH Siemens PET – CT alignment



Siemens Biographs have no transmission sources.

Instead 2 Ge-68 line sources mounted in a black box are used.

They are visible on both PET and CT, and an automated algorithm provides the correction

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Philips PET – CT alignment

- Special service tool holding 6 Na-22 point sources
- Registration performed at 1 year interval



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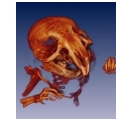
164

164

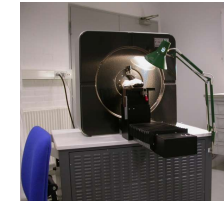
Small Animal PET-CT



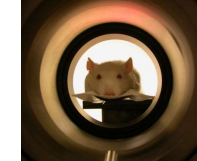
CT resolution down to 15 μ



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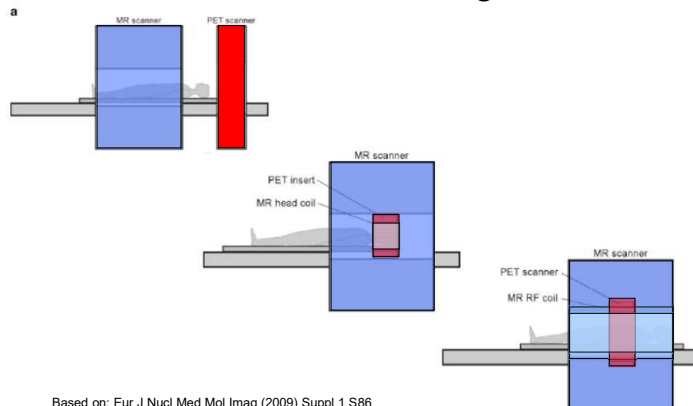
PET resolution < 2 mm



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Potential PET-MR configurations



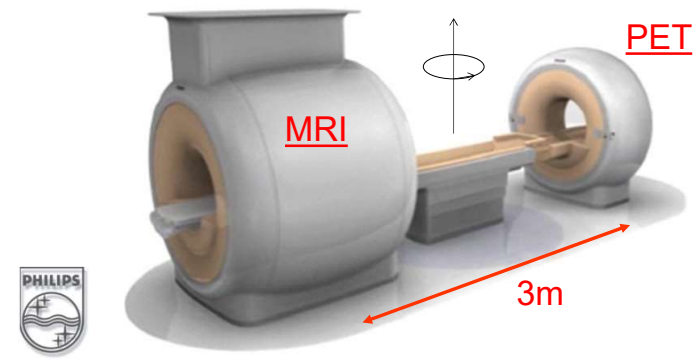
Based on: Eur J Nucl Med Mol Imag (2009) Suppl 1 S86

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PET-MR: the "easy" solution



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PET-MR: the "easy" solution



Philips Medical, exhibition RSNA 2012

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(real) PET-MR

- Siemens made a prototype combination in 2007:
 - 3 T MR scanner with brain coil
 - PET "insert" between coil and magnet
 - Requires detector insensitive to magnetic field
- In 2011, Siemens made an integrated system (APD)
- In 2014, GE followed (SiPM – TOF possible)

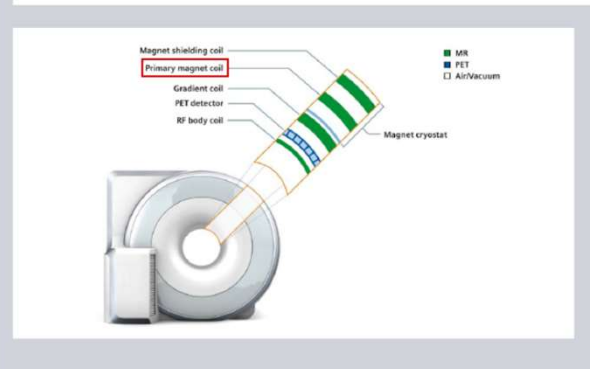
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two is now one.
The first whole-body MR-friendly PET architecture

SIEMENS

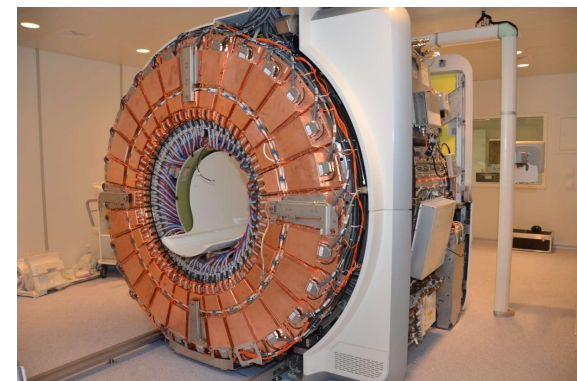


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PET/MR

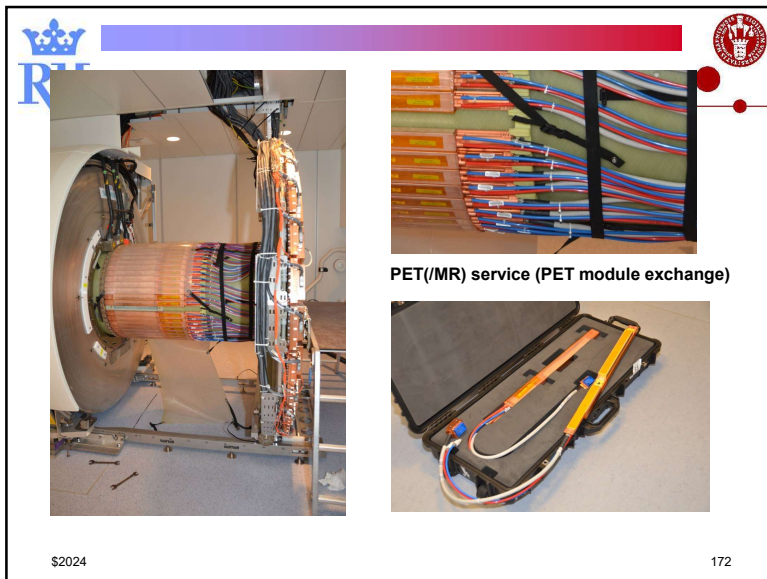


All PET electronics is encapsulated in a Faraday cage to avoid RF-interference

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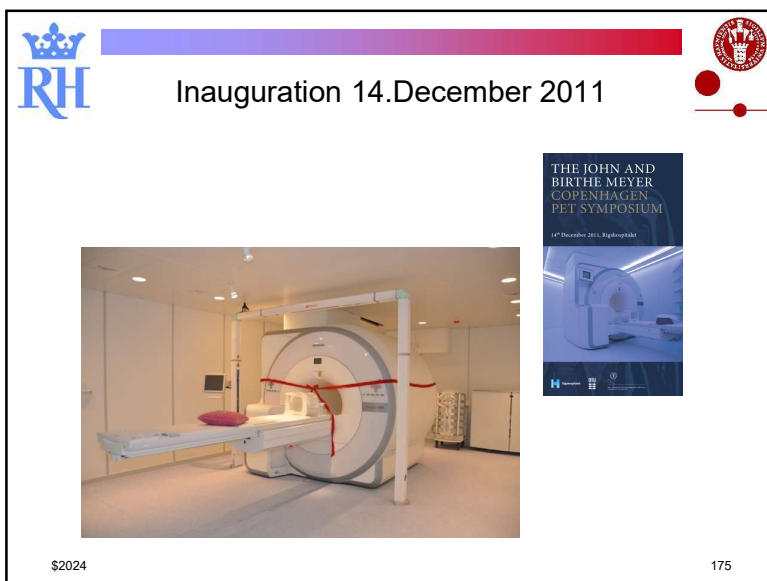
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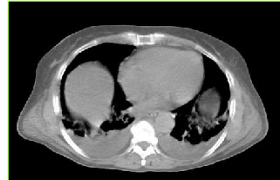
176

With PET/CT:

A CT scan is a μ -map (expressed in HU)
 A scaling for energy difference between CT and PET is required
 Soft tissue and bone (and contrast) scale differently
 $\Rightarrow$ (only) minor errors in quantitation of PET images



GE Discovery LS (2001)



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In PET/MR:

Attenuation correction is a challenge (and still a research topic)

MR images (in general) are NOT μ -maps

Bone, Air, and Metal implants show almost same MR-signal: ~ 0
 - but they have very different influence on PET attenuation



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SPECT/CT

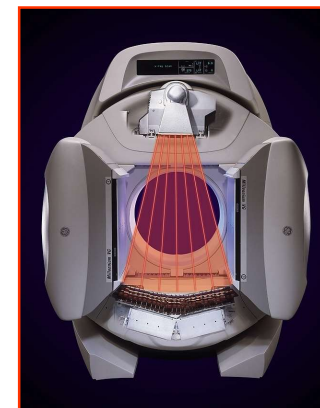
- serves the same dual purpose of Anatomical localisation of tracer and Attenuation correction
- AC is not as simple or "exact" as in PET because we have only one photon
- With CT and iterative recon, quantitation is feasible

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SPECT/CT (GE Hawkeye)



X-Ray Tube is mounted on the same gantry as the gamma cameras

A 'CT scan' takes 15 s / cm

With 1 inch crystals, "PET" is possible



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SPECT/CT

Siemens



Symbia

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Philips



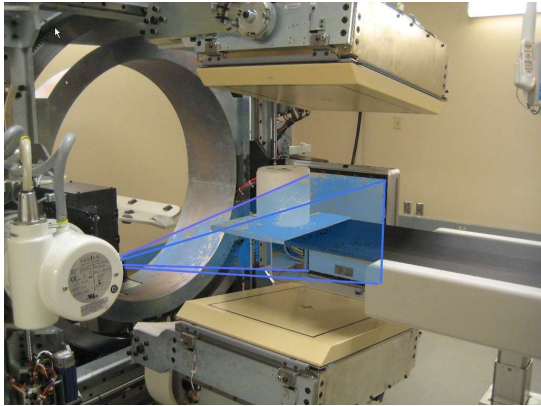
Precedence =
Skylight SPECT + Brilliance CT

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BrightView XCT SPECT/CT





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Combinations...

PET-CT / SPECT-CT / PET-MRI / SPECT-MRI



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Exhibition EANM October 2012

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PET / SPECT / CT

for small animals



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VECTor: A Preclinical Imaging System for Simultaneous Submillimeter SPECT and PET

Marlies C. Goorden^{*1}, Frans van der Have^{*1,2}, Rob Kreuger¹, Ruud M. Ramakers^{1,2}, Brendan Vastenhouw^{1,2}, J. Peter H. Burbach³, Jan Booij⁴, Carla F.M. Molthoff⁵, and Freek J. Beekman^{1,2}

J Nucl Med 2013; 54:306-312
DOI: 10.2967/jnumed.112.109538

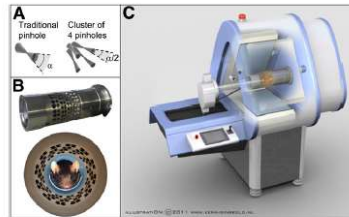


FIGURE 1. Integration of clustered-pinhole collimator into existing SPECT/CT platform. (A) Traditional pinhole with opening angle α and cluster of 4 pinholes with approximately same field of view and opening angle $\alpha/2$. (B) Clustered-pinhole collimator optimized for imaging SPECT and PET tracers, into which mouse is placed. (C) Collimator mounted in SPECT/CT system.

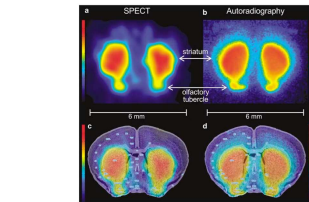


Figure 2. High resolution in vivo imaging of animal DAT (left) compared with DAT autoradiography (right).

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MI Labs

G-SPECT

• Game-Changing SPECT

?



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Spectrum Dynamics D-SPECT



CZT

= CdZnTe

Solid state detector
at room temperature

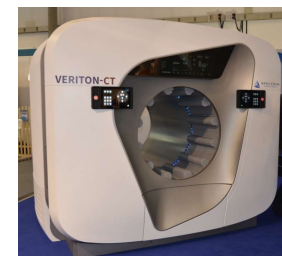
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Spectrum Dynamics Veriton-CT

CZT = CdZnTe



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PET / SPECT / CT

AnyScan

Mediso

Budapest

Exhibition at EANM 2008

Still marketed



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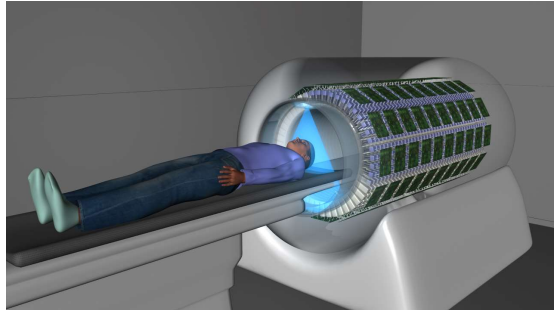
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EXPLORER Total-Body PET









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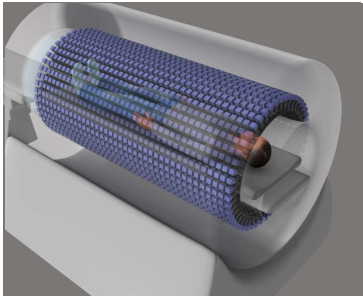
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Maximizing Sensitivity by Total-Body PET



~40-fold increase for adult total-body imaging

~20-fold increase for pediatric total-body imaging

~4-fold increase for single organ imaging

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Completed EXPLORER Scanner

System:

Ring diameter: 78.6 cm

Transaxial FOV: 68.6 cm

Axial FOV: 194.8 cm

of crystals: 564,480

crystal blocks: 13,440

of SiPMs: 53,760

80 detector row CT







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Slightly less ambitious: 1 m FOV

Arrived at RH on August 17, 2021



BIOGRAPH Vision
Quadra

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3.2-mm crystal Vision technology



Made out of
4 Vision systems, each with:
8 rings á 10 crystals axial
38 modules á 20 crystals in each ring

crystals: 243.200 (ca. 368 kg)
[[5x5] * (2x4) * 8 * 38] * 4 stk * 0.15 cm³ * 7.4 g/cm³

Bonus-info: ca. 15 MBq Lu-176
Dosis rate in center < 1 µSv/h

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Specs?

Practically identical with Siemens Vision for

- Spatial resolution
- Energy resolution
- Timing (for TOF)

Major difference (obviously):

Sensitivity

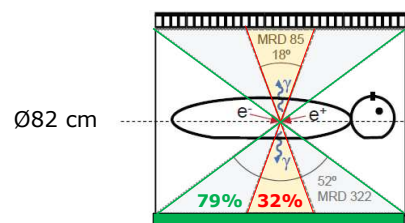
What is sensitivity?
something about... counts per Bq in known geometry
preferably just one number

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Sensitivity for point source in center



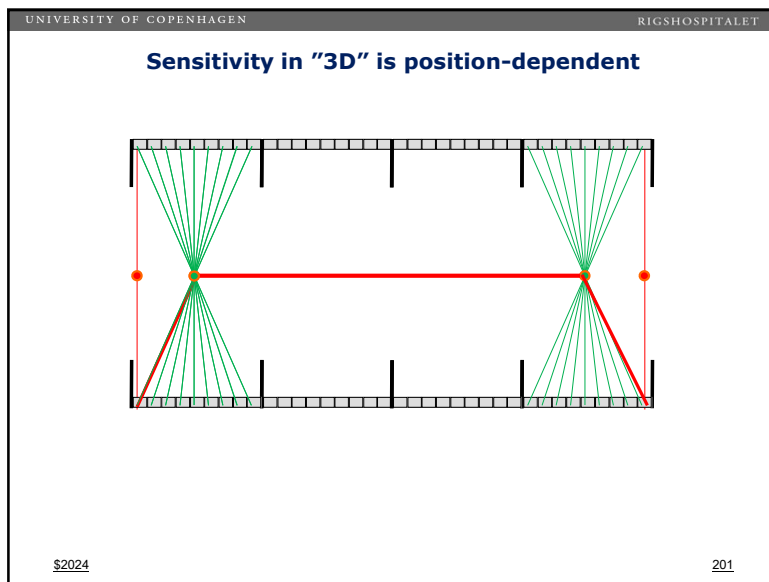
Expanding
MRD = Max Ring Difference
from 85 to full value of 322
Increases the sensitivity at the **center** by a factor of 2.5, but it still drops to 0 at the edge.
In a Vision, MRD = 79.
Now: Quadra = 1.08 Vision
Future: Quadra ~ 3 * Vision

L = 106 cm

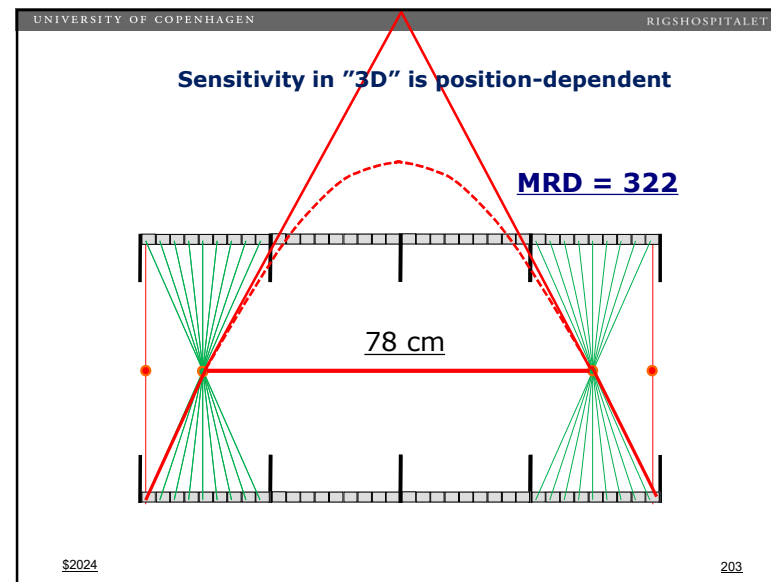
Figure based on Prenosil et al. JNM 2021

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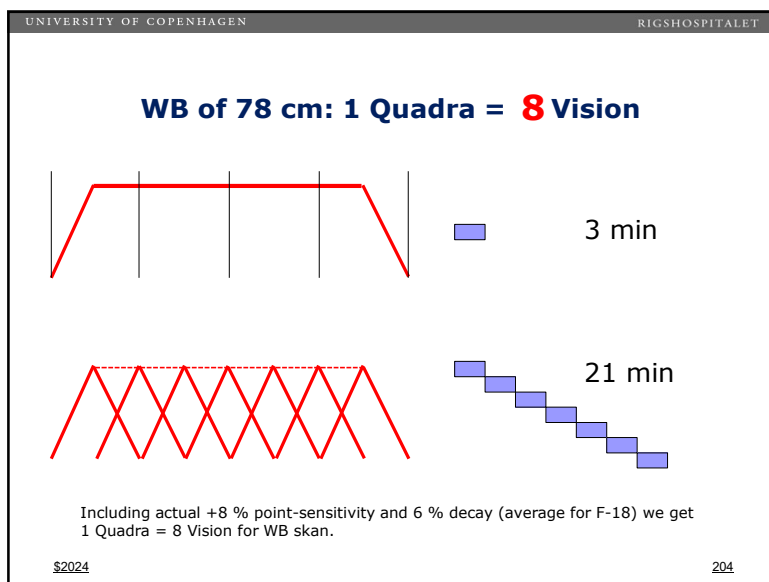
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201



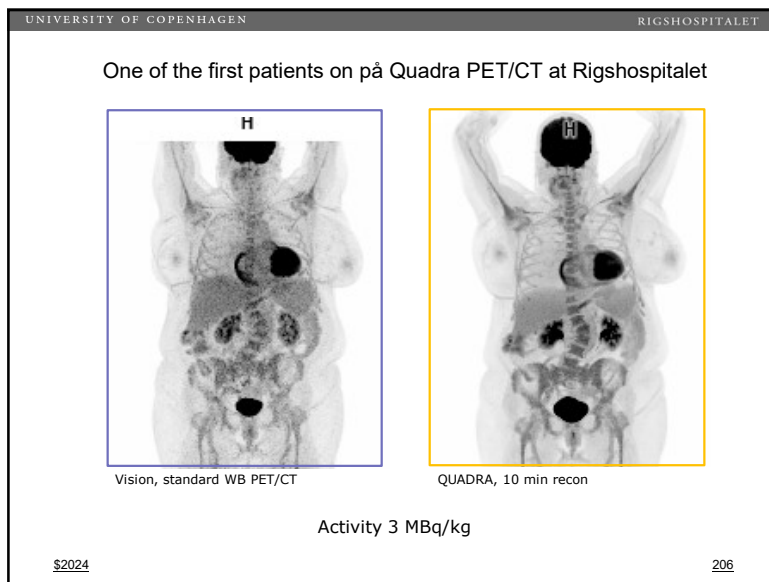
203



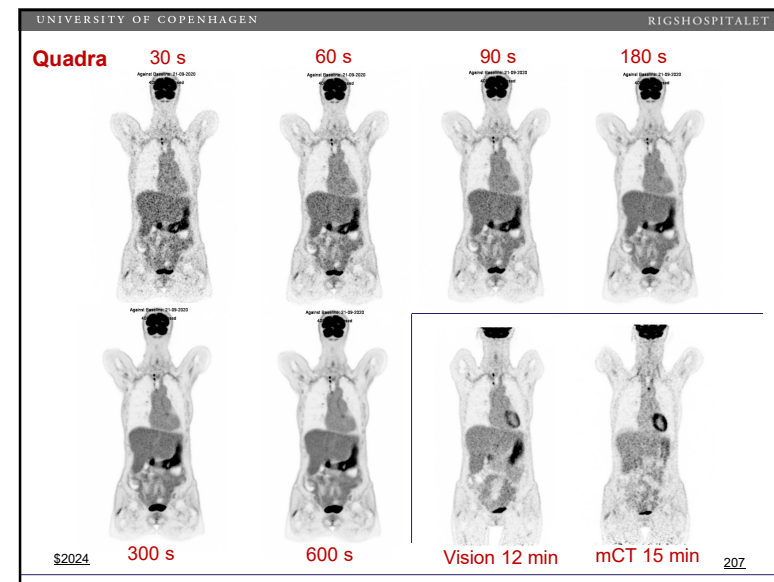
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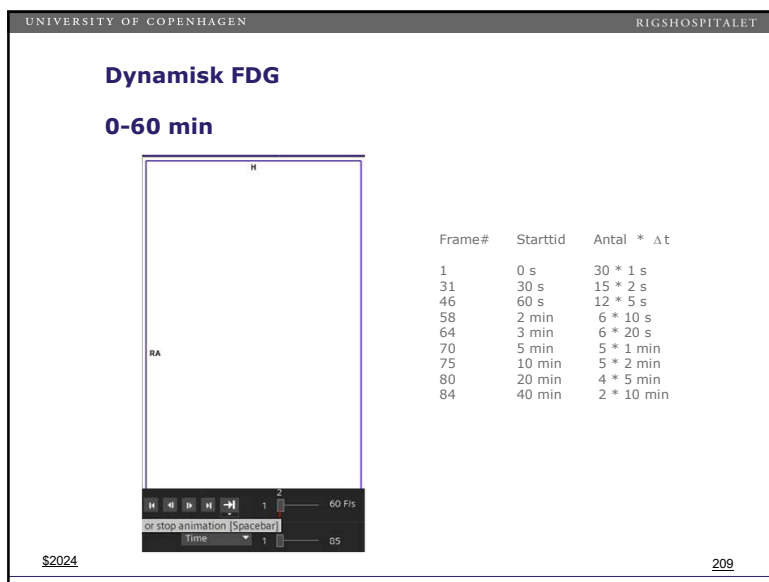
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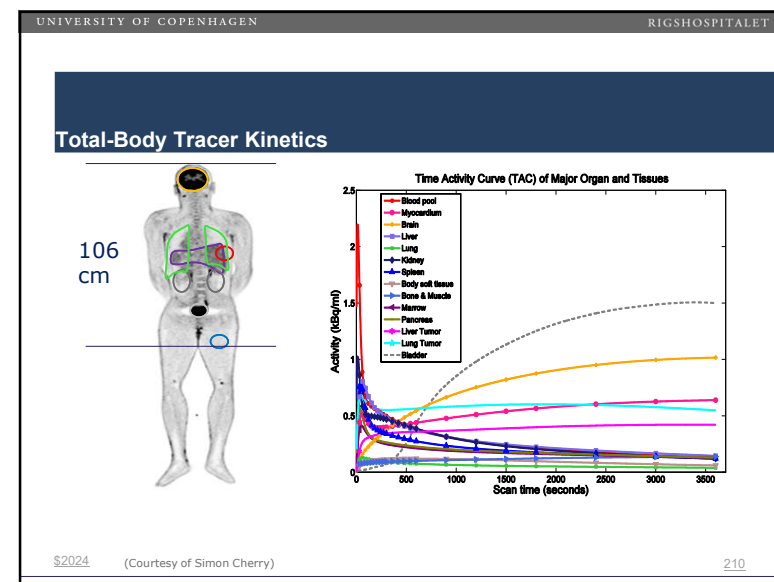
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J-PET

Longitudinal plast-scintillators

P Moskal *et al*
Phys. Med. Biol. **61** (2016) 2025

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J-PET Prototype (50 cm)

\$2024

Kilde: CERN Courier November 2018

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Screenshot fra ECMP2021

Commissioning of 50 cm AFOV modular plastic J-PET scanner

Background

PET imaging accuracy is severely in progress of decreasing resolution. PET systems in order to increase the sensitivity of detection system by increasing total field-of-view (AFOV). One of the approaches to increase AFOV is to use plastic scintillators instead of crystals. Instead of crystals, scintillators are used as plastic scintillators. Instead of crystals, scintillators are used as plastic scintillators. Instead of crystals, scintillators are used as plastic scintillators.

Materials and methods

A modular, modular prototype of the J-PET detector, a PET scanner based on plastic scintillators, is being constructed at the Copenhagen University (see Fig. 2). Each module consists of an average of 100 plastic scintillators. A total of 100 modules are required to form the J-PET detector. The J-PET detector is composed of 100 modules. Each module is composed of 100 plastic scintillators. The J-PET detector is composed of 100 modules. Each module is composed of 100 plastic scintillators.

Phys Med Biol 66 (2021)

References

1. J. Moskal, et al., Med. Phys. 48 (2021) 1000000.
2. J. Moskal, et al., Med. Phys. 48 (2021) 1000000.
3. J. Moskal, et al., Med. Phys. 48 (2021) 1000000.
4. J. Moskal, et al., Med. Phys. 48 (2021) 1000000.
5. J. Moskal, et al., Med. Phys. 48 (2021) 1000000.

Summary

Commissioning of the 50 cm AFOV modular J-PET scanner is in progress at the Copenhagen University and preliminary results show that it is ready to perform for data on clinical patients. The total development of the J-PET has started.

Though the whole-body sensitivity increase of the TB-J-PET is less than the one of uExplorer it is still a significant improvement with respect to the current 16-26 cm long PET systems (and can still be increased by adding a third detection layer). This makes J-PET an economic and alternative technology for the construction of the total-body PET systems. The cost of the TB-J-PET is expected to be a factor of 5 lower with

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J-PET

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Walk-Through TB-PET

Patient in upright position

Walk and stand in the scanner

Our mock-up at the Infinity lab

EUROPEAN PATENT APPLICATION

(12) (43) Date of publication: 17.07.2024 Bulletin 2024/29 (51) International Patent Classification (IPC): G01T 1/167 (2006.01) G01T 1/29 (2006.01) A61B 6/03 (2006.01)

(21) Application number: 23151344.1 (52) Cooperative Patent Classification (CPC): G01T 1/1615; A61B 6/037; A61B 6/4258; A61B 6/4286; A61B 6/4429; G01T 1/2985

(22) Date of filing: 12.01.2023

(71) Applicant: Universiteit Gent 9000 Gent (BE)

(72) Inventor: VANDENBERGHE, Stefaan 9860 Scheldewindeke (BE)

(74) Representative: De Clercq & Partners Edgard Gevaertdreef 10a 9830 Sint-Martens-Latem (BE)

(84) Designated Contracting States: AL AT BE BG CH CY CZ DE DK EE ES FI FR GB GR HR HU IE IS IT LI LT LU LV MC ME MK MT NL NO PL PT RO RS SE SI SK SM TR Designated Extension States: BA Designated Validation States: KH MA MD TN

70 cm wide 50 cm gap 110 cm high

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Advances in Dynamic Radioactive Scanning

Compiled and Edited by

YEN WANG, M.D., D.Sc. (MED.)
Associate Professor of Radiology
University of Pittsburgh
and
Chairman, Department of Radiology
Homestead Hospital
Pittsburgh, Pennsylvania

1968 PET

CHARLES C THOMAS • PUBLISHER
Springfield • Illinois • U.S.A.

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1966 169-181

WFNMB2018 Melbourne

First clinical test

2015

Development of the Helmet-Chin PET Prototype

Hidetaka Tashima, Eiji Yoshida, Fumihiko Nishikubo, Hirotaka Wakana, Masataka Nara, Akio M. Akino, Akio M. Akino, Shinya Tanaka, Yutaka Kawanishi, Tetsuya Nakano, Yutaka Nishikubo, and Tetsuya Nakano, Member, IEEE

Chiba, Japan [Poster M3CP-97 at MIC2015]

(a) design sketch (b) and geometry of the crystals (c), (d)

Fig. 1. Photograph of the first prototype of the helmet-chin PET (a), design sketch (b), and geometry of the crystals (c), (d)

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RIGSHOSPITALET

2019: Commercial product (Korea)

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(exhibition at EANM 2022, Barcelona)
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2023: Commercial product (Switzerland)

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(exhibition at EANM 2023, Vienna)
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Could this become a sales success" ?

IF a cure for, e.g. Alzheimer's disease is found

AND

IF we have a PET-tracer that can tell if that cure works for YOU

AND

IF attenuation correction can be made from PET data with AI

AND

IF this device can be manufactured for ¼ of the price of WB PET/CT

THEN it is likely to.

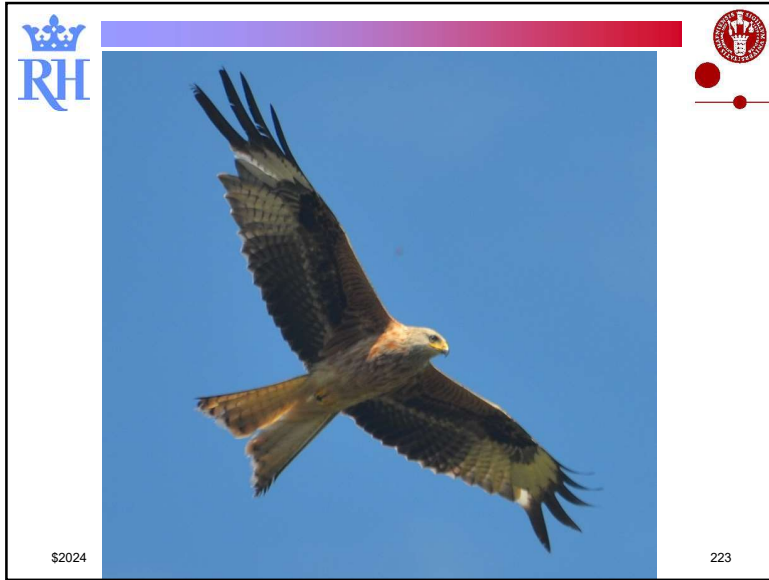
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Time to press...

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