Kinetic compressive sensing: improving image reconstruction and parametric maps

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Background

Parametric images provide insight into the spatial distribution of physiological parameters, but they are often extremely noisy, due to low SNR of tomographic data. Direct estimation of maps from projections (1) allows accurate noise modeling, improving the results of post-reconstruction fitting. We propose a method, which we name kinetic compressive sensing (KCS), based on a hierarchical Bayesian model and on a novel reconstruction algorithm, that encodes sparsity of kinetic parameters. The parametric maps are reconstructed by maximizing the joint probability of all unknown parameters in the graph in *Fig.1* using an iterated conditional modes (ICM) approach (3).

Algorithm workflow

The algorithm consists of **alternating** the **optimization** of the activity time series and of the kinetic parameters: 1) given the kinetic parameters: one-step-late maximum a-posteriori expectation-maximization (OSL-MAP-EM) (4) 2) given the activity time series: maximum-a-posteriori Levemberg-Marquardt (MAP-LM) optimization



Simulations

Simulation setup

To assess the effect of the KCS algorithm in comparison with standard kinetic modeling techniques, and to evaluate the performance of the GPU implementation, we realized a *Monte* Carlo (MC) simulation with 100 noisy realizations of a simple geometrical phantom. The kinetic behavior of the three main regions has been simulated using a **2-tissues irreversible** compartment model (i.e. 3 parameters model), while the square area in the center has been modeled as a blood input region. In this simulation study we generated synthetic dynamic PET data, according to the hierarchical bayesian model presented above.



Results

OSEM recon **INDIRECT** recon

DIRECT recon **KCS** recon

Fig. 2

We compared the results of three different methods (indirect recon, direct recon, and direct recon with kinetic compressive sensing, KCS).

In Fig.2, it is easy to recognize a first reduction in voxel-byvoxel variance when the kinetic model is used to regularize the reconstruction (DIRECT), which is further reduced when the sparsity assumption of the spatial derivatives of the parametric maps is enforced (**KCS**).

Human Data



Estimate of K; maps [net uptake rate] DIRECT estimate **KCS** estimate

PET recon of frame #24 [35 min after TOI]

INDIRECT estimate



Fig.4

Conclusions



PET Results

PET Dataset



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The conventional indirect and direct, and the novel KCS approaches were applied to (18F)-FDG brain PET data, acquired on a Siemens mMR PET-MR scanner, using a 2tissue irreversible compartment model.

The **bias/variance** plot shows how a direct approach improves the quality of the estimate of parametric maps, with respect to the results provided by a standard indirect post-reconstruction fitting, but also how the novel sparsity constraint is able to further reduce the variance of the produced parametric maps, without affecting (if not decreasing) **the bias**.

References

The simulation study demonstrated that the proposed method of introducing a sparsity-inducing prior in a direct reconstruction framework can help in producing high-quality images and parametric maps, which are both amenable for display and quantitatively more accurate than what a post-reconstruction fitting and unconstrained direct reconstruction can achieve (i.e. lower bias and lower variance, Fig.3).

This method appears to be promising as a feasible approach for applying kinetic modeling to very large 4D clinical datasets with a *reduced computational cost*, thanks to the parallel GPU implementation based on the analytic expression of the kinetic model and its derivatives.

Future studies will extend the current open-source implementation, by integrating different kinetic models (linear and non-linear) and different priors.

The proposed approach can also be adapted not only to PET data, but also to different dynamic imaging techniques, such as dynamic CT or dynamic contrast enhancement (DCE) MRI.

(1) A.J. Reader, and J. Verhaeghe. 4D image reconstruction for emissiontomography. Physics in medicine and biology, 2014.

(2) B.R. Smith, G. Hamarneh and A. Saad. Fast GPU Fitting of KineticModels for Dynamic PET. MICCAI High Performance Workshop, 2010.

(3) J. Besag. On the statistical analysis of dirty pictures. J.Roy.Stat., 1986.

variance

Fig.3

(4) P.J. Green. On use of the EM algorithm for likelihood estimation. J. Roy. Stat., 1990.

(5) S. Pedemonte, C. Catana, and K. Van Leemput. An Inference Languagefor Imaging. BAMBI. Springer International Publishing, 2014.

(6) P.J. Huber. *Robust Statistics*. John Wiley & Sons. New York, NY, USA: 1981.

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