



Seminar Presentation: Metal Artifact Removal in C-arm Cone-Beam CT

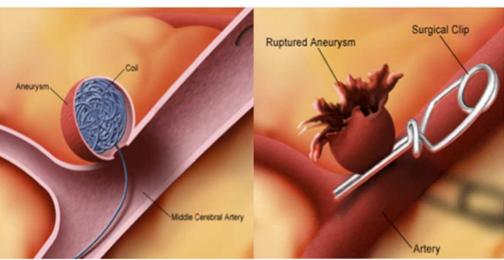
Marta Wells Group 4





Project Mission

- Construction of brain phantoms and acquisition of CT images for a quantitative data analysis and assessment of (a) image quality and (b) metal artifact removal algorithm accuracy.
- Mentors: Dr.
 Siewerdsen, Dr.
 Radvany, and Dr.
 Ehtiati
- Group 4 Members: Carolina Cay-Martinez and Marta Wells



Coil procedure (left) and clipping treatment (right) for cerebral aneurysm. Image provided by hopkinsmedicine.org





Paper Selection

- Frequency split metal artifact reduction (FSMAR) in computed tomography
 - Authors: Esther Meyer, Rainer Raupach, Michael Lell, Bernhard Schmidt, Marc Kachelrieß. Institute of Medical Physics, University of Erlangen-Nürnberg, Erlangen, Germany.
 - Published: The International Journal of Medical Physics Research, April 2012.





FSMAR in CT

- Purpose: To present a new MAR technique, frequency split metal artifact reduction (FSMAR), that ensures efficient reduction of metal artifacts at high image quality with enhanced preservation of details close to metal implants.
- Relevance:
 - Outlines the implementation of the FSMAR method
 - Comparison of effectiveness of various combinations of MAR algorithms





Summary of Problems

- Metal implants create severe artifacts that degrade image quality and reduce the diagnostic value of CT images.
- Many standard inpainting-based MAR methods simply replace data and lead to blurring and loss of critical information.

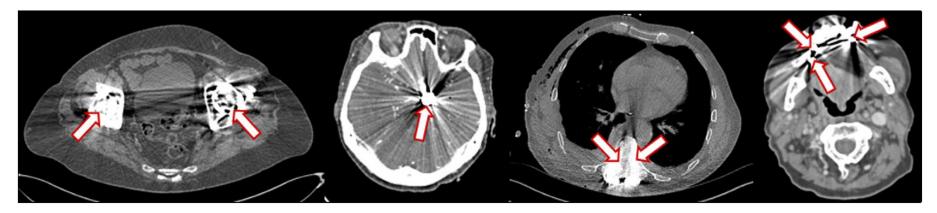


Image provided by Meyer et al.





Background

- Metal artifacts are caused by beam hardening.
- Sinogram inpainting methods of MAR use threshold segmentation to remove metal affected data.
 - New artifacts are often introduced in the sinogram restoration process.

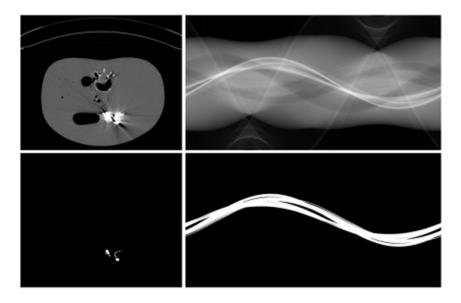


Image provided by Muller et al.





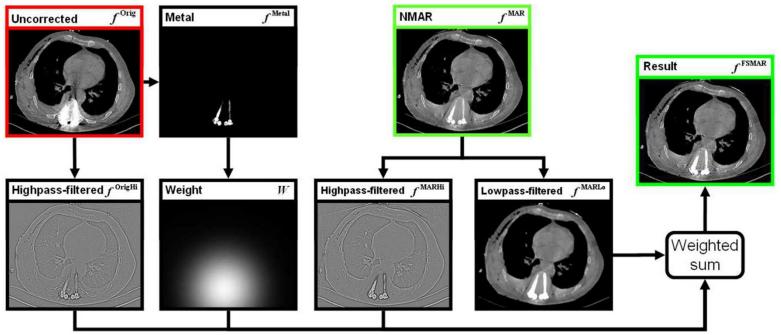
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FSMAR Algorithm

- Preprocessing 1.
- Segmentation of metal 5. Spatial Weighting 2.
- MAR by sinogram 3. inpainting

- 4. Frequency split

Image provided by Meyer et al.







Results

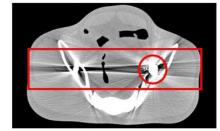
- Hip phantom
- Spine phantom
- Two patients with hip prostheses
- Patient with internal spine fixation
- Patient with dental fillings
- Patient after coiling of an intracranial aneurysm





Results – Hip Phantom

Uncorrected



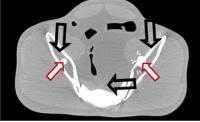


MAR1

NMAR



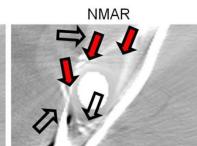
Ground Truth







MAR1



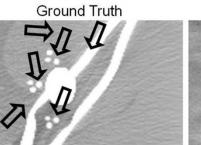
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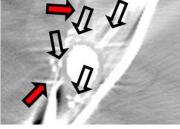
Without FS

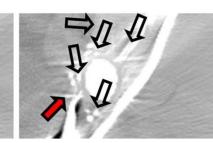
With FS

With FS

Image provided by Meyer et al.











Results – Patient Spine Fixation

I-STAR

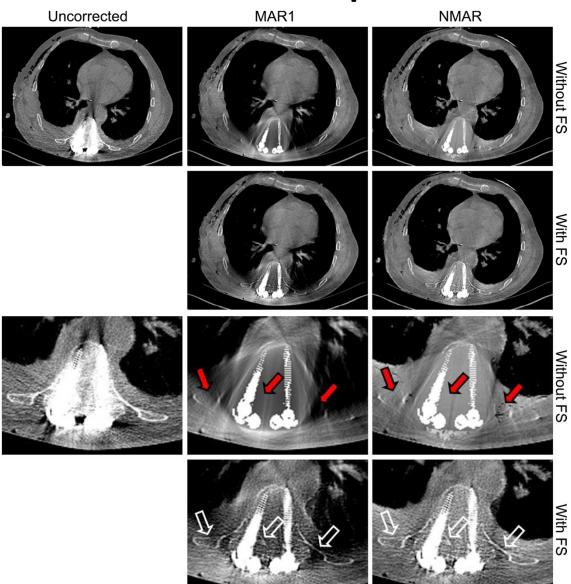


Image provided by Meyer et al.

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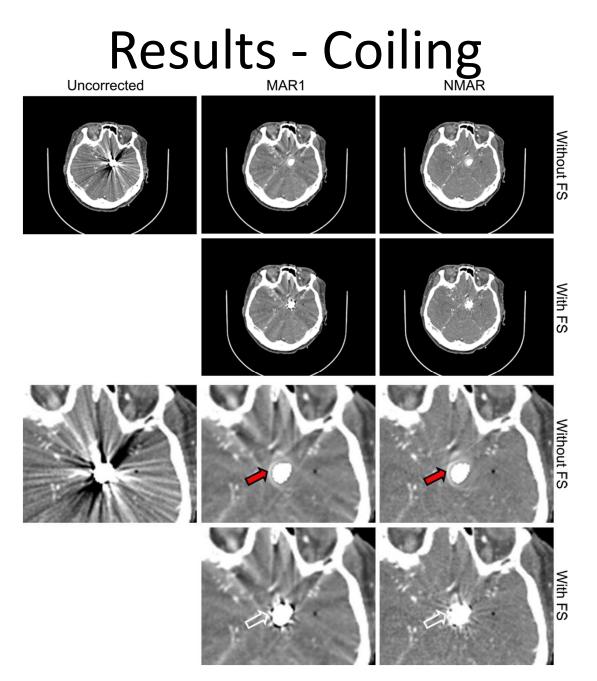


Image provided by Meyer et al.





Benefits of FSMAR

- FSMAR is easily combined with existing MAR techniques
- Advantages of FSMAR over other MAR methods alone
 - Clear edges and fine anatomical details are recovered.
 - Restoration of structures between metal implants.
 - Outline of metal implants is more accurate.
- FSMAR is computationally efficient and inexpensive.





Limitations of FSMAR

• More extensive and objective clinical evaluation by medical experts is necessary.





My Assessment

- FSMAR is more effective for larger metal implants.
- Additional clinical testing, particularly with small metal objects.
- Necessary to test FSMAR method with variable parameters
- Lacking quantitative measurements in real patient data.





Questions?





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Frequency Split Equations

$$\begin{split} f^{\text{OrigLo}} &= f^{\text{Orig}} * G(\sigma), \quad f^{\text{MARLo}} = f^{\text{MAR}} * G(\sigma), \\ f^{\text{OrigHi}} &= f^{\text{Orig}} - f^{\text{OrigLo}}, \quad f^{\text{MARHi}} = f^{\text{MAR}} - f^{\text{MARLo}}, \\ f^{\text{FSMAR}}_{ij} &= f^{\text{MARLo}}_{ij} + W_{ij} f^{\text{OrigHi}}_{ij} + (1 - W_{ij}) f^{\text{MARHi}}_{ij}, \end{split}$$

RMSE
$$(f, f^{\text{GT}}) = \sqrt{\frac{1}{I \cdot J} \sum_{i=1}^{I} \sum_{j=1}^{J} (f_{ij} - f_{ij}^{\text{GT}})^2},$$