# Phase-retrieval Effect on Angiographic X-ray Imaging

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# Motivation: Angiography



Fig 1. Angiography procedure. Taken from [1].

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- Invasive method.
- Blood vessels can't absorb well X-rays [2].
- Low contrast imaging.
- No visibility of blood vessels' internal walls.
- Requires a contrast agent.



# Motivation: Atherosclerosis



Fig 2. Atherosclerosis disease [3-5].



Fig 3. Atherosclerosis disease. Taken from [6].



# The objective of our project

• Quantify the phase-retrieval effect in the quality of angiographic images.



• Compare the techniques of *In-line Phase-contrast Imaging* and *Speckle-based Phase-contrast Imaging.*



# A brief theory review

• In-line Phase-contrast Imaging [7-11]

$$
I(x_1, y_1) = \frac{I(x, y)}{M^2} \left[ 1 - \frac{z_1}{kM} \nabla_T^2 \Delta \phi(x, y) \right] \qquad M = \frac{z_0 + z_1}{z_0}
$$

 $\Delta\phi(x,y,z_0) = \frac{\delta}{2\beta} Ln\left(\mathcal{F}^{-1}\left[\frac{\mathcal{F}(I(x,y,z_1)/I_0)}{1+\frac{z_1\delta}{2k\beta}(k_x^2+k_y^2)}\right]\right)$ Paganin Algorithm [12]



- Speckle Phase-contrast Imaging [14-19]
	- $I_R(x,y) I_M(x,y) = \frac{z_1}{k} \vec{\nabla}_T \cdot \left( I_R(x,y) \vec{\nabla}_T \Delta \phi(x,y) \right)$  $-z_1\nabla_T^2(D_{ef}(x, y, z_1)I_R(x, y))$

MIST Algorithm [20,21]

$$
\Delta\phi(x,y) = \frac{\delta}{2\beta} Ln\left(\mathcal{F}^{-1}\left[\frac{\mathcal{F}(\mathcal{S}(x,y))}{1+\frac{2z_1\delta\pi^2}{k\beta}(k_x^2+k_y^2)}\right]\right)
$$

$$
D_{ef}(x, y, z_1) = \frac{1}{z_1} \frac{I_{M_1}(x, y)I_{R_2}(x, y) - I_{M_2}(x, y)I_{R_1}(x, y)}{I_{R_2}(x, y)\nabla_T^2 I_{R_1}(x, y) - I_{R_1}(x, y)\nabla_T^2 I_{R_2}(x, y)}
$$



Fig 5. Speckle PCI. Taken from [15].



# Metodology

Computational simulations using Geant4

### Experimental images

- PEPI Package.
- In-line and Specklebased Phase-contrast imaging for angiography setup design.
- Phase-retrieval.
- In-line and Specklebased Phase-contrast imaging for angiography setup implementation.
- Inorganic Phantom: PMMA and Organic: Pig artery.
- Phase-retrieval.



- CNR calculation to evaluate the angiographic images quality.
- Estimate the absorbed dose to quantify the phaseretrieval effect.



- Study which technique provides better quality as a function of the absorbed dose.
- Compare experimental and computational results.

# Materials and Methods

- Policromatic X-ray source with  $200 \mu m$ berilium window: 28kV, 48kV, 78kV.
- Photon-counting detector with silicon sensor and a pixel size of  $55 \mu m \times 55 \mu m$ .
- Angiographic phantom made of PMMA/Pig Artery with artificial blood and atherosclerotic plaque HA-PMMA  $(5\% - 95\%)$ .
- Geometric magnification 2x.
- Additionally for speckle: A sand paper with speck size of  $58.5 \mu m$  located between the Xray source and the sample.





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# Computational Simulations

- Simulations developed in Geant4 [22] using PEPI [23].
- Monte Carlo-based: We use an X-ray spectrum (Fluence vs Energy) [24,25].
- Plaque simulated as a 1/8 of a cylinder inside other one made of PMMA.
- Sandpaper:  $2.0 \times 10^5$  spheres made of silicon carbide resting on both sides of a cellulose surface of  $250\mu m$ . Cross steps of  $60\mu m$ .
- Events:  $2 \times 10^9$  raw y  $3 \times 10^9$  flat field.









# Experimental set up

#### PMMA Phantom Pig Artery



- X-ray source Hammamatsu L6622-01.
- Medipix3RXV1 with silicon sensor detector.



- For Speckle: Sandpaper P240.
- Cross steps of  $60 \mu m$ .



# Absorbed dose: Computational Measurement



In-line provides 1.78 times more absorbed dose than speckle-based. Which means that one phase image retrieved by MIST implies near 12% more absorbed dose than one retrieved by Paganin algorithm.

# Computational Results



It is necesary to apply a Gaussian filter with 150 sigmas to reduce noise  $\blacktriangleright$ in the images

#### CNR Calculation







# Computational Results





In-line provides more visibility per dose absorbed than speckle. 25% at 28kV 42% at 48kV 55% at 78kV



# Experimental results: PMMA Phantom



Gaussian Filter



#### CNR Calculation







# Experimental results: PMMA Phantom



Applying a Gaussian filter is completely necesary for speckle to be a competitive technique



At 48 kV speckle provides 77.8% more visibility per absorbed dose than in-line

# Experimental results: Pig Artery



# Experimental results: Pig Artery



Gaussian filter applied. We can see the plaque-blood interface near pixel 200.

#### CNR Calculation





The presence of artifacts in the speckle images

affects the CNR regions and therefore decreases with energy.

# Conclusions

- One phase image retrieved with MIST provides 12% more absorbed dose than one retrieved with Paganin algorithm. This means the main difference between techniques is CNR calculated on the atherosclerotic plaque.
- Statistical fluctuations is the major weakness of the speckle-based method.
- It is neecsary to implement a Gaussian filter to reduce noise in the retrieved images.
- As the phase recovery algorithms were implemented, the technique that offers the best image quality as a function of its dose is In-line PCI.

# Future work

- We must make more precise measurements of the incident and absorbed radiation by the phantom at an experimental level, using technologies such as TIMEPIX detector and NOMEX dosimeter.
- Our results are highly dependent on the phase retrieval algorithm, we suggest employing other algorithms such as Beltrán (in-line) and UMPA or XSVT (speckle-based).
- We must explore the utility of Dark-field imaging in angiography.
- The  $\delta/\beta$  ratio of blood has a maximum between 35keV and 40keV. It would be desirable to use an effective energy on the source near these energies to obtain a better visibility and in consecuece better image quality.



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# Result analysis: CNR and Dose

 $CNR$ 

We calculate CNR as

I

Absorbed dose by a material is

$$
= \left| \frac{\overline{S}_{placa} - \overline{S}_{sangre}}{\sigma_{sangre}} \right|
$$

$$
D = \frac{\Delta E}{\Delta M}
$$

$$
[D] = J/kg = Gy
$$

$$
F = \frac{CNR^2}{Dosis}
$$

To compare both tecniques we use

Experimentally we tried to measure kerma in air with NOMEX dosimeter

<i>kerma</i> por segundo $(\pm 0.001 \mu Gy/s)$			
Voltaje	Ausencia de lija	Presencia de lija   Cociente	
28kV	0.160	0.120	1.33
48kV	0.421	0.329	1.28
78kV	0.815	0.780	1.04

Medida Experimental and Medida Computacional



NOMEX measurements are not accurate  $\rightarrow$  We studied dose computationally  $\rightarrow$  Absorbed dose



# Photoelectric and Compton Effect Cross-sections



Fig 6. Relative importance between the effects that involve X-ray photons. Taken from [26].

Fig 7. Cross-sections of the radiation-matter interactions. Taken from [27].

In our project the Photoelectric Effect domains over others in the energy range used  $\sim$ 7 keV



## $\delta/\beta$  ratio as a function of energy

Cociente  $\delta/\beta$  para distintos materiales en función de la energía  $3000 -$ Aorta PMMA Polietileno  $2500 -$ Polipropileno Silicona PVC  $2000$ g 1500 - $1000 -$ 500  $0\,$  - $\overline{1}$  $\overline{1}$  $\mathbf{I}$  $\overline{1}$ 20 80 140 0 40 60 100 120 Energía (keV)

PMMA is the most physically suitable material to simulate blood vessels.



## $\delta/\beta$  ratio of aorta and blood



While it appears that the  $\delta/\beta$  ratio is the same for blood and aorta, they differ subtly. This is sufficient to identify each material in a phase image.

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# Dark-field images







V



78kV M=2x

- Datos Experimentales

Perfil de intensidad campo oscuro

78kV M=2x

Datos Simulados

Simulations

Due to the high attenuation of blood, darkfield images do not provide any additional information about structures that are not resolved by the detector.

Pig artery

PMMA Phantom



# Phase images: Computational simulations



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## Phase images: Experimental images



# Phase-images: Filtered speckle-based images



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VIII

# Phase-images: Filtered speckle-based images





## CNR Calculation: Regions of interest



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