On the Need for Dynamic Segmentations in Quantitative Dynamic Nuclear Medicine

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General Context: The Medical Aspect

- A drug, Candesartan, was synthesized with ¹⁸F. This drug is used for renal hypertension;
- The radiolabelled drug would be used to verify whether the drug would be useful for a given patient;

Health Santé Canada Canada

For acceptance by Health Canada, it must first be shown that the radiopharmaceutical drug binds





Figure: [¹⁸F]fluoropyridine-candesartan

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General Context: The Inception

- The left kidney of the animals had to be analyzed for pharmacokinetic parameters;
- The reference tool used would have been the Task Group 211 (TG-211) Report from the American Association of Physicists in Medicine (AAPM);
- The proposed methods are static and don't consider metabolic and physical movements of the subjects between timeframes.





Figure: Two temporally adjacent timeframes for a PET acquisition on a rat

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New Goal

- The new goal is to understand the impact of a static segmentation on a dynamic PET image;
- This would lead to a better understanding of:
 - Methodological Errors;
 - Impact of the segmentation method;
 - Impact upon the subsequent analyses (qualitative and quantitative).



Figure: Schematic Representation of the phantom

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Experimental Approach: Theoretical Model

A simple two-compartment model is regulated by the following set of differential equations:

$$\begin{bmatrix} Q_1' \\ Q_2' \\ Q_3' \end{bmatrix} = \begin{bmatrix} -\frac{\gamma_{12}}{V_1} & 0 & 0 \\ \frac{\gamma_{112}}{V_1} & -\frac{\gamma_{23}}{V_2} \\ 0 & \frac{\gamma_{23}}{V_3(t)} & 0 \end{bmatrix} \begin{bmatrix} Q_1 \\ Q_2 \\ Q_3 \end{bmatrix}$$

This model can be analytically solved for the two first compartments, which are of interest:

$$\begin{aligned} C_1(t) &= \frac{Q_0}{V_1} e^{-\frac{\gamma_{12}}{V_1}t} \\ C_2(t) &= Q_0 \left(\frac{\gamma_{12}}{\gamma_{23}V_1 - \gamma_{12}V_2}\right) \left[e^{-\frac{\gamma_{12}}{V_1}t} - e^{-\frac{\gamma_{23}}{V_2}t}\right] \end{aligned}$$

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Experimental Approach: Experimental Model

- In order to understand the limitations of static segmentations in dynamic imaging, a custom phantom was made;
- The phantom had three compartments with the two of interest;
- Many dynamic acquisitions were done with FDG.



Figure: X-ray view of the phantom

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Analysis: First Steps

- With the images, we took a subsample (4-D subset of the image) of it containing the compartment of interest;
- We did various segmentations based on the AAPM TG-211 categories (statistical, gradient, and filling);
 - The segmentation were done on a given timeframe and kept constant for the whole dynamic acquisition;
- We selected by hand the segmentations that gave a roughly desirable shape.



Figure: Left: A top view of a given dynamic acquisition at a given timeframe Right: The subset for the second compartment (right) Need for Dynamic Segmentation

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Analysis: The Segmentations



Figure: Top: Reconstructed Image centered around the second compartment for a given timeframe;

Bottom: Segmentations of the top image based, respectively, on gradients, statistics, and filling methods.

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Analysis: The Tools

- To analyze the results and the quality of the segmentations, three quantitative tools were used:
 - Dice Coefficients;
 - TACs with shifting errors;
 - Pharmacokinetic parameters from the TACs.
- For the two last methods, an uncertainty was introduced into the TACs by moving subtly the segmentations by one voxel.



Figure: Left: TACs as obtained directly Right: TACs with the introduced uncertainty Need for Dynamic Segmentation

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Analysis: Sørensen-Dice Coefficient

 The Sørensen-Dice coefficient can be used to compare two segmentations;

 $D(A,B) = \frac{2|A \cup B|}{|A| + |B|}$

For a given segmentation, the segmentations based on different timeframes were compared.



Figure: Dice Coefficients for a given dynamic acquisition based on many timeframes. N.B.: The number of decent segmentations varied greatly with the method.

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Analysis: TACs

- The TACs were qualitatively compared to see whether they overlapped in their uncertainties;
- For the phantom, this was the case for most of the acquisitions.



Figure: TACs with uncertainties for a given acquisition. In this case, most of the TACs overlap.

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Analysis: Pharmacokinetic Parameters

- By using the two-compartment model, it is possible to estimate the pharmacokinetic parameters;
- This extraction was made using the Dynesty package in Python.



Figure: Pharmacokinetic parameters obtained via *Dynesty* for a specific dynamic acquisition.

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- The results so far indicate that static segmentations are not adequate for dynamic acquisitions, even in the simplest case;
- For preclinical dynamic images, more work needs to be done;
- Possible future endeavours include:
 - The use anatomical images;
 - The use of segmentations valid for dynamic images;
 - The integration of sufficient uncertainties in the proposed results.



Figure: Three views for a dynamic acquisition on a rat

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Manual Segmentations: Why Not

- The image for a given timeframe is not necessarily very different from the subsequent one;
- The shape is not always nice and solid;
- The model requires the whole volume to be segmented;
- There is a high risk for inter- and intra-user variability.



Figure: Three temporally adjacent timeframes for a given phantom acquisition

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Selection of the Segmentations

Some segmentations were not kept for the analyses;

- It was too early in the acquisition;
- The visual segmentation was aberrant.



Figure: Some segmentations that were not kept for the subsequent analyses

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