

in the Name of Allah, the Beneficient, the Merciful



Reconstruction of PET/CT images: Challenges and Opportunities

By:

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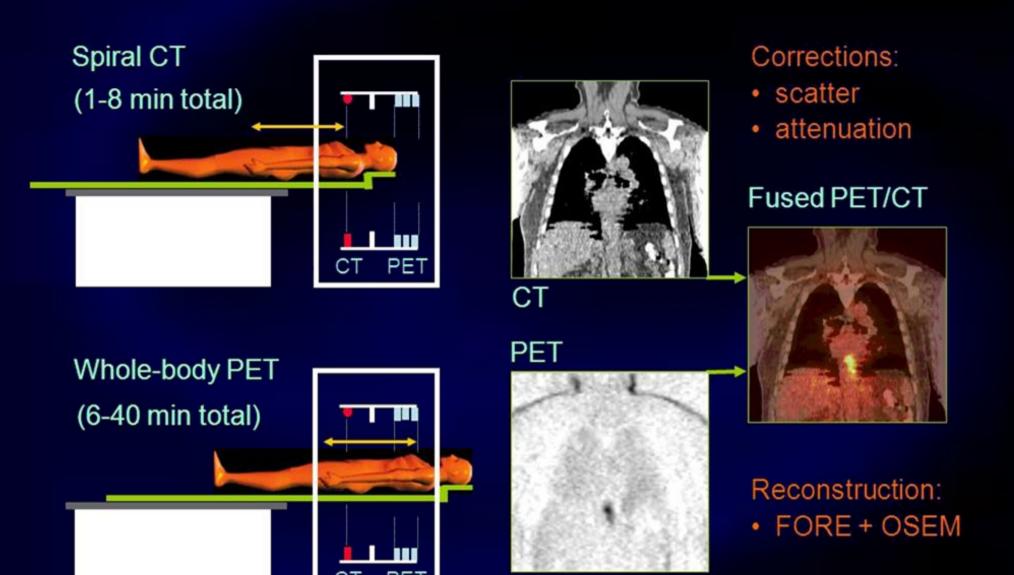
Outline

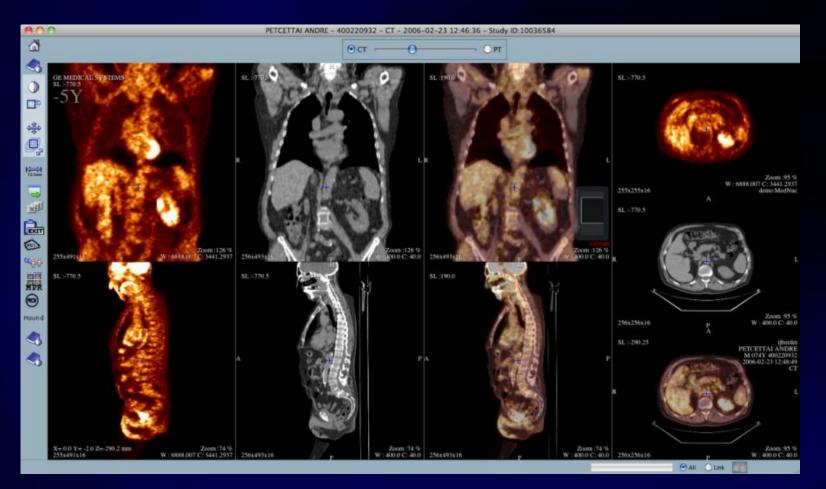
- Introduction
- Basic Concepts
- Data Correction
- Effects of Image Reconstruction Parameters on PET Images
- Commercial Options
- Challenging Area





PET/CT imaging





- diagnosis
- staging / restaging
- therapy monitoring
- treatment planning in clinical oncology



$SUV = \frac{Activity\ concentration\ in\ tissue}{(Injected\ activity)/(Body\ size)}$

BIOLOGICAL	
Element	Description
PVE	
Patient preparation	
Tumor heterogeneity	
Tumor size	Including leakage from nearby structures.
Cell type	
Tumor avidity	
Other phenotype information	
Treatment effectiveness	
Patient motion	Between the PET and the CT scan.
Respiratory motion	
True tracer uptake	
Chemotherapy	Disturbed renal function from chemotherapy can reduce the FDG clearance.
Overlap between malignant and benign diseases	Difficulties in deciding the correct threshold.
Body size measurement	
Mass correction	
Blood glucose level	

TECHNOLOGICAL	
Element	Description
PFT scanner	Malfunction and sensitivity.
Reconstruction algorithm	
Filters	Consider level of smoothing.
Interobserver variability	
Scan duration	
Sinogram noise	
Image noise	Consider the noise level as it is a cause of over half of a SUV_{max} variation.
Measurement error	Occurs in 30 % of SUV _{max} measurements.
Correct data entry	9 of 15 steps are constructed so that a technologist is required to measure, record and/or enter a value.
Image reconstruction parameters	Number of iterations when using IR, field of view (FOV number of subsets, voxel dimension, certain scanner specific enhancements, detector modeling and TOF.
Timing mismatch	Between the scanner and the dose calibrator.
SUV variability	The variation is described to have a log-normal distribution rather than a normal distribution.
Calibration errors	According to the decay of the radio-pharmaceutical.
Contrast material	

SUVs

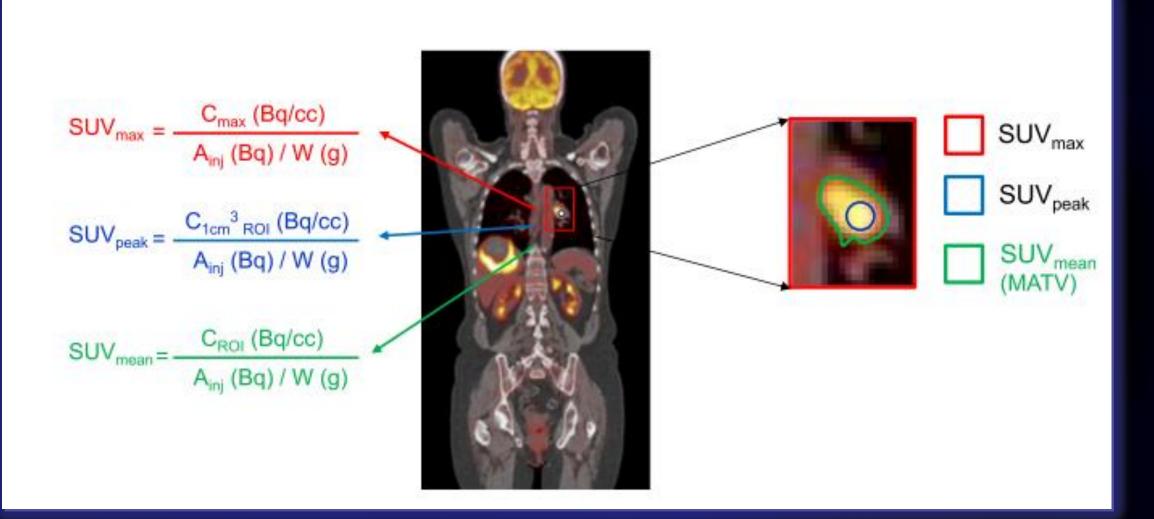
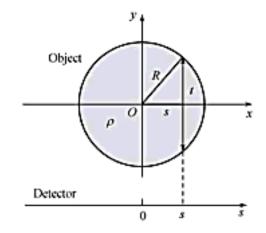
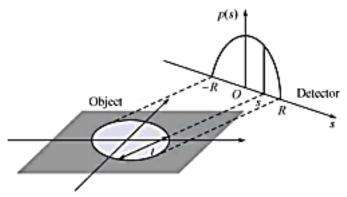




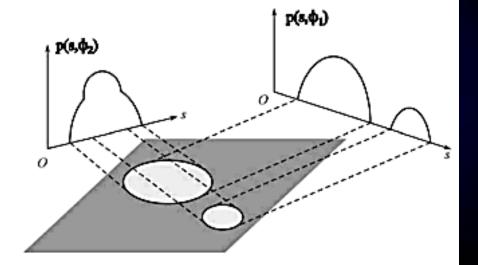
Image reconstruction

• Projection $p(s, \phi)$ at angle ϕ , s is coordinate on detector



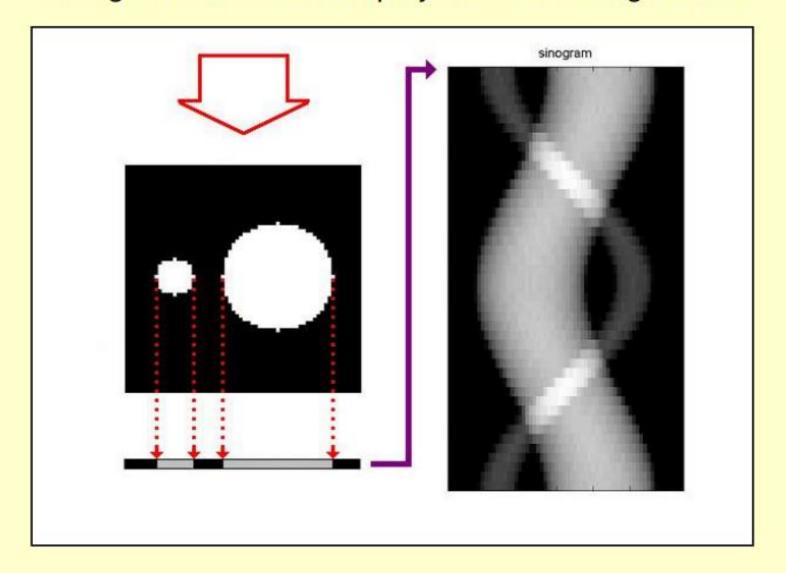


Projection p(s) the same for any ϕ



Projection $p(s, \phi)$ depends on orientation

Sinogram = collection of projections of a single slice

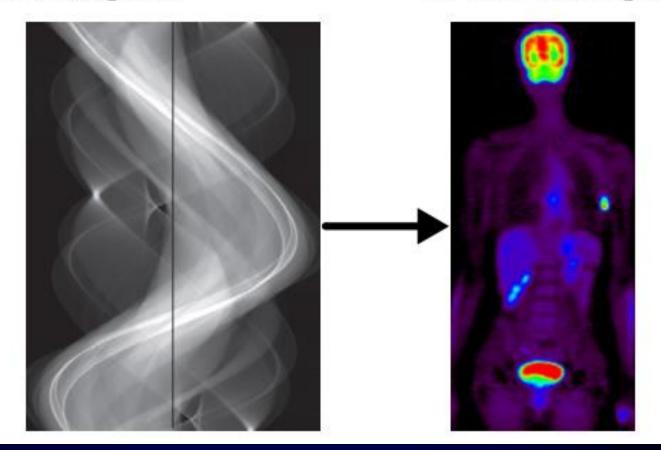


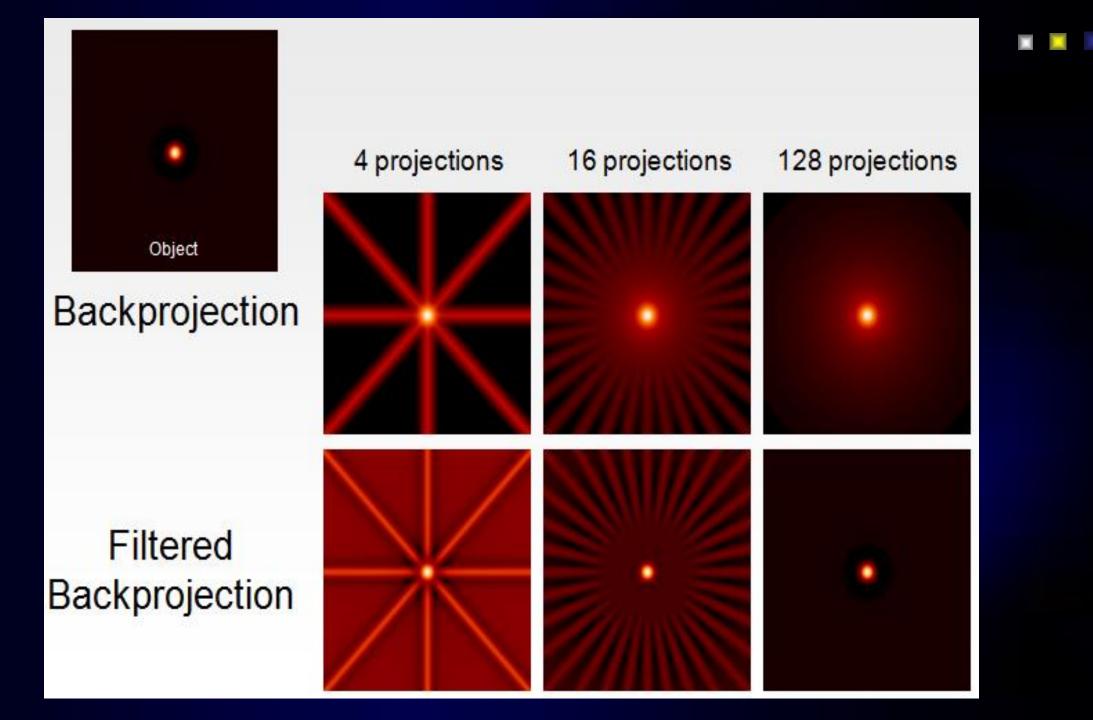
Tomography

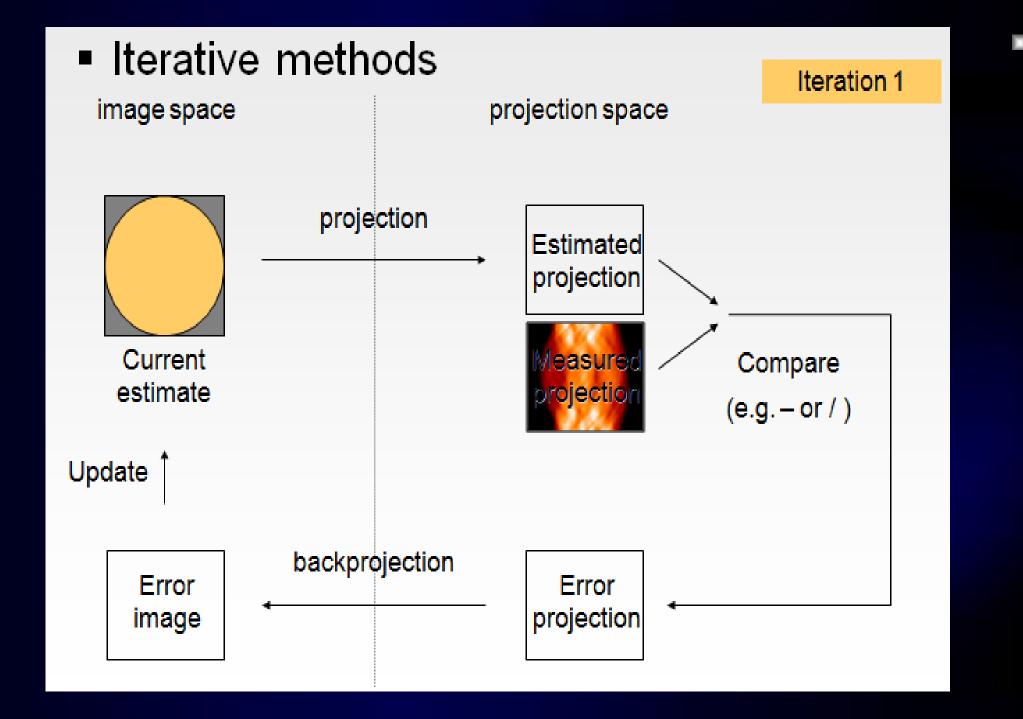
Find the image f(x,y) from the measured projections $p(s,\phi)$

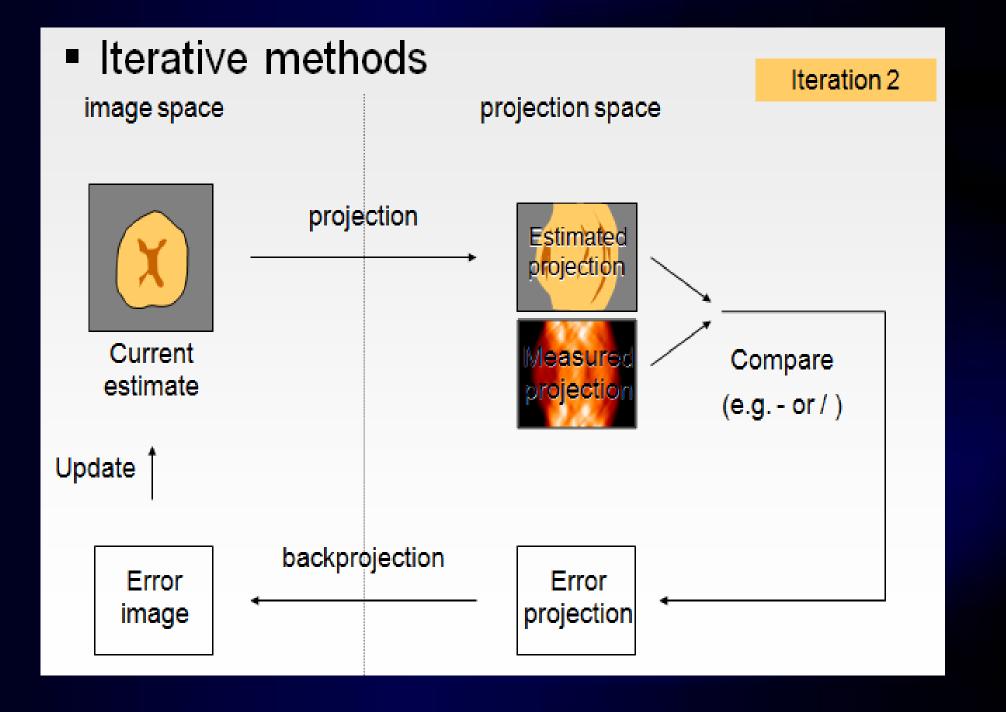
We measure a sinogram:

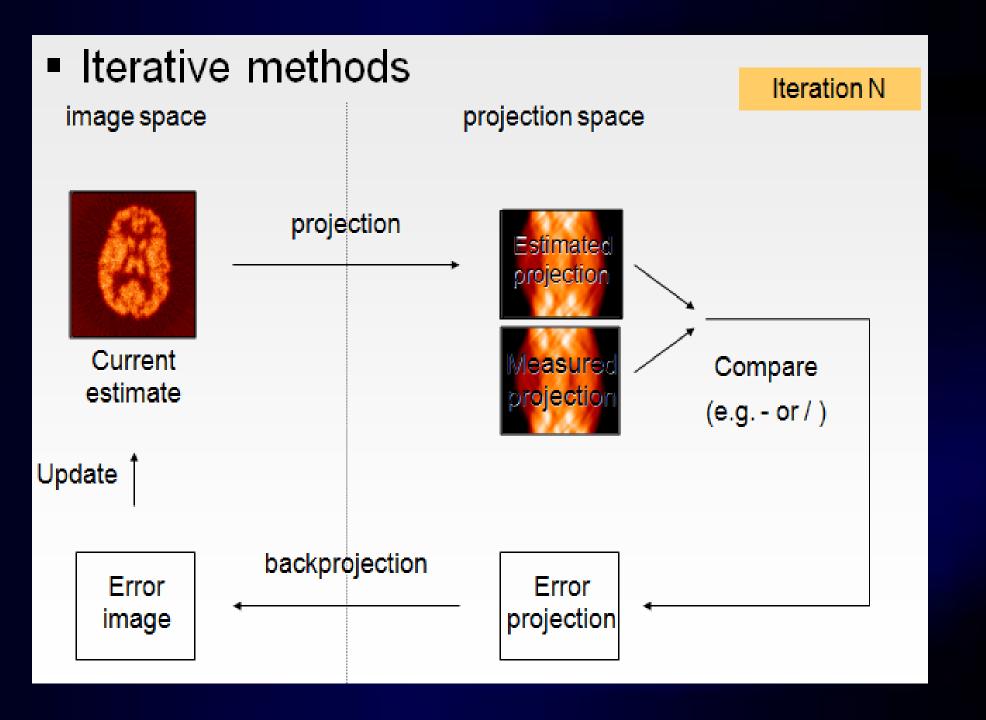
We want an image:





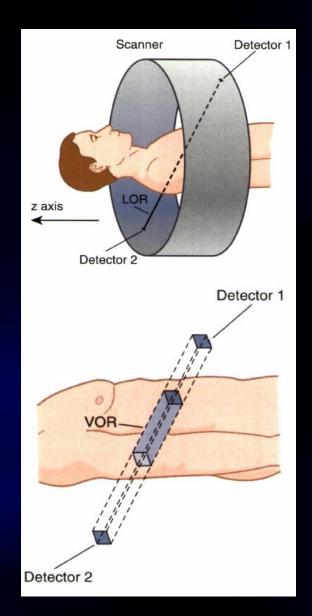




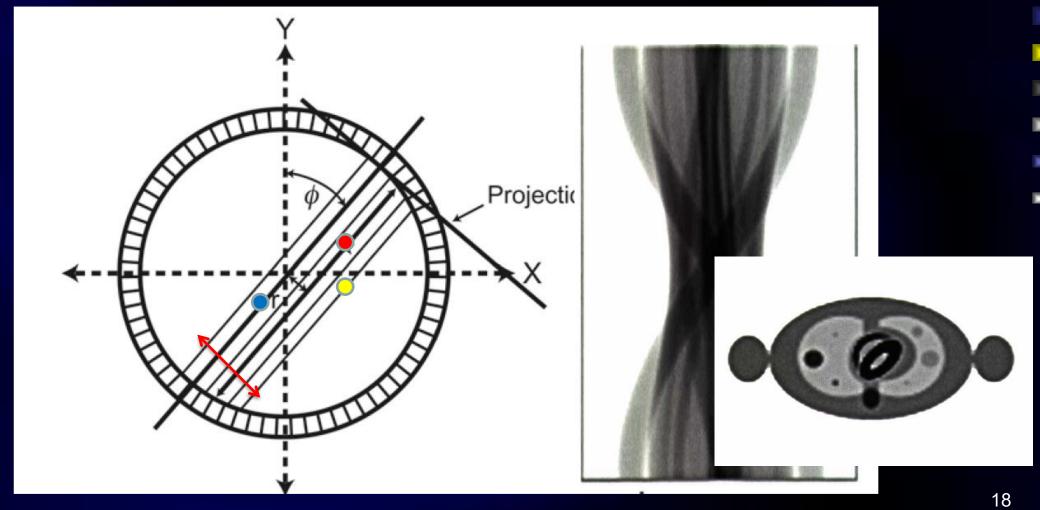


Data Acquisition (Steps)

- In PET imaging, two 511 keV annihilation photons are detected in coincidence by two opposite detectors along a straight line, called the line of response (LOR), So:
- ☐ Three steps in PET data acquisition:
 - 1- Finding location of detector pair (PMT)
 - 2- Analyze pulses using PHA (PMT) & CW Circuit
 - 3- Sorting LOR positions in a "sinogram", via 1 to 1 arrangement



How do the lines of response organize into sinograms?

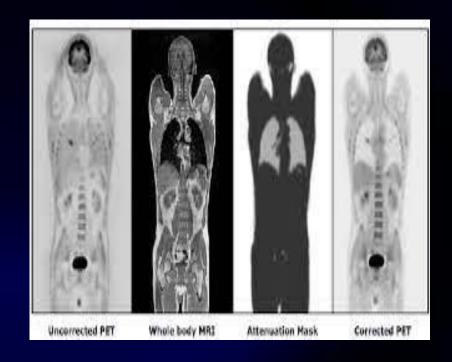




Factors Affecting PET

- Attenuation
- Random Coincidences
- Scatter Coincidences
- Parallax error

Time of flight (TOF)

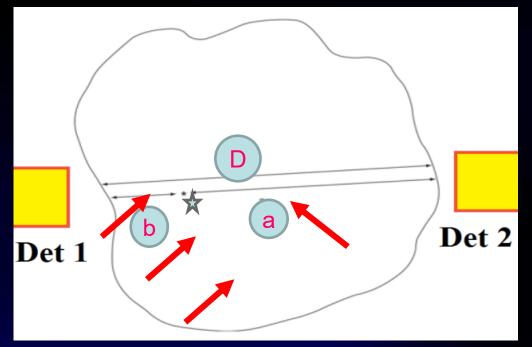


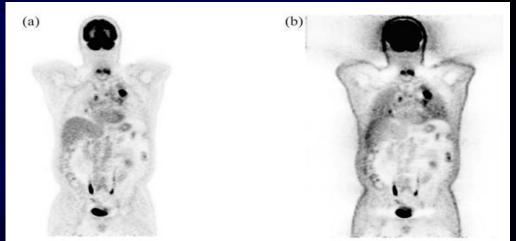
1) Attenuation Correction

Attenuation correction P for each pixel (i.e., each LOR) is given by:

$$P = e^{-\mu a} \times e^{-\mu b} = e^{-\mu(a+b)} = e^{-\mu D}$$

Linear attenuation coefficients and related thickness are derived from CT imaging.



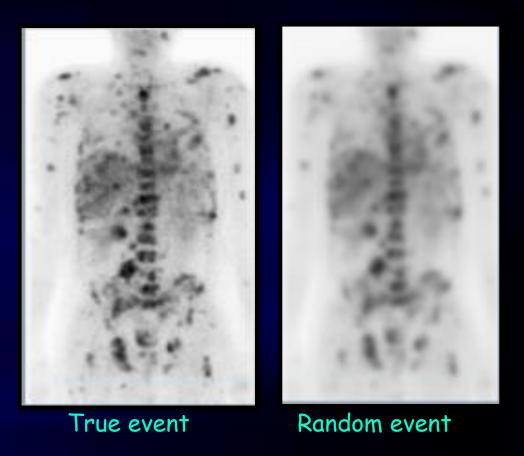


2) Random Coincidences

They create invalid spatial information & low contrast. Randoms can equal or exceed true events number!

Consequences:

Reduced contrast Reduced accuracy



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Correction method #1:

By separately measuring two single count rates, R_1 and R_2 , of a radioactive source by each of the detector pair, Random count rate is:

$$R_c = 2\tau R_1 R_2$$

 R_c will be subtracted from the prompt (T+R+S) count rate

Correction method #2:

One is set at a standard coincidence timing window (e.g.12 ns) the other at a delayed (e.g. 55 ns) time window (55-67 ns)

The counts in the standard time window: True + Scatter + Random The counts in the delayed time window: Only random events

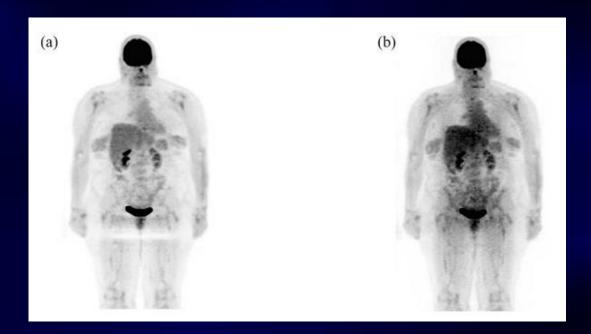
Assumption: Random counts will be the same in both coincidence and delayed coincidence windows.

3) Scatter Coincidences

Background of the image is increased by these radiations with concomitant loss of image contrast and quantification accuracy.

But,... What affects Scattering?

Density and depth of tissue, Density of detector, Activity, PHA window



Correction method #1:

The weighted scatter counts are then subtracted from the measured photopeak counts to obtain the corrected counts for use in reconstruction.

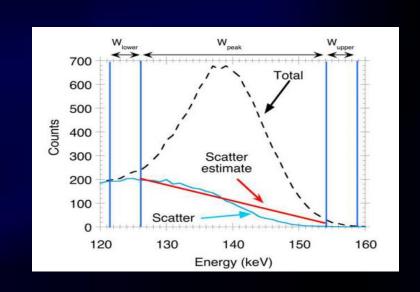
This technique increases data processing time and the noise in the image.

SCATTER BGO LSO LSO 100 200 300 400 500 600 700 Energy (keV)

Correction method #2:

Triple window technique has been employed using two overlapping low energy windows with a common upper energy level just below the photopeak window.

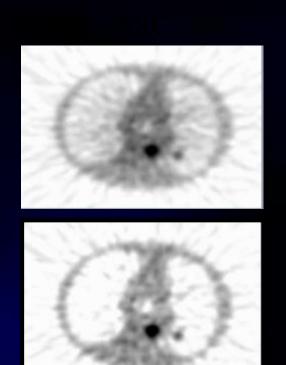
This technique has reasonable success.



Correction method #3:

Theoretical models in which (after random corrections), Guassian or parabolic fit is applied to the scatter distribution outside the photopeak, then extrapolated to estimate the scatter contribution under the photopeak.

- ☐ It works well in 2D PET Brain studies
- ☐ It is inaccurate in areas of high attenuation (e.g. thorax with arms down)



Correction method #4:

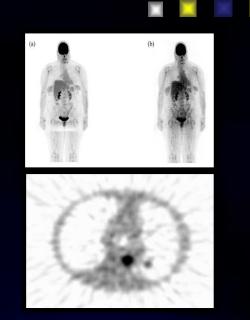
Convolution method in which a scatter function is measured from a point source. Then it convolves with source distribution to estimate the scatter data

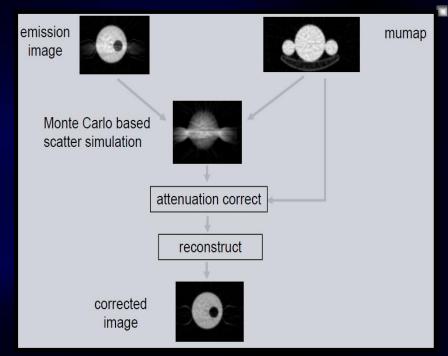
- ☐ It takes the scatter dependence on the position
- ☐ It is Computationally efficient

Correction method #5:

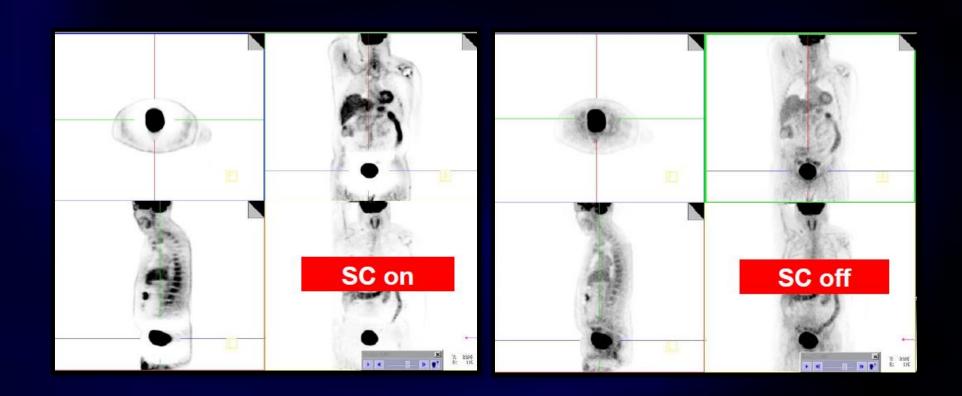
Monte Carlo method in which each interaction of photon in the patient and its detection in the block detector is traced in a simulation process.

This method does not take into account scatter from outside the source.

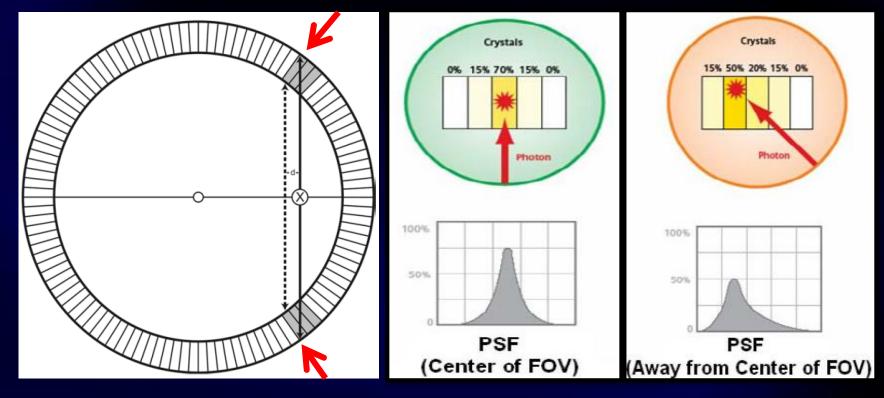




We may see artifacts in scatter correction especially low adjacent activity areas around high activity concentrations overcorrects and make a photopenic area.



4) Parallax error (Radial Elongation - Radial Astigmatism)



X, Y positioning of the detectors is defined by the dashed line some distance d away from the actual LOR. This effect results in some <u>blurring of the image</u> due to unknown depth of interactions, and <u>worsens</u> with the <u>LORs farther away from the center</u> and with a <u>thicker</u> <u>detector</u>.

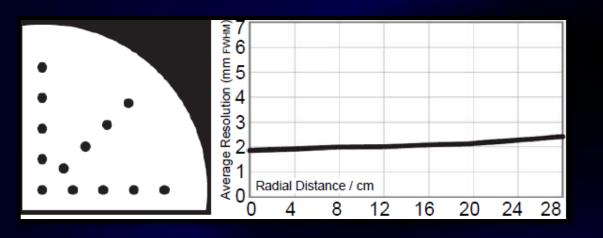
We know that Point Spread Function (PSF) describes response of imaging system to a point source.

A system that knows the response of a point source from everywhere in its field of view can use this information to recover the original shape and form of imaged objects.

System corrects the LOR because of a better understanding of the PSF!

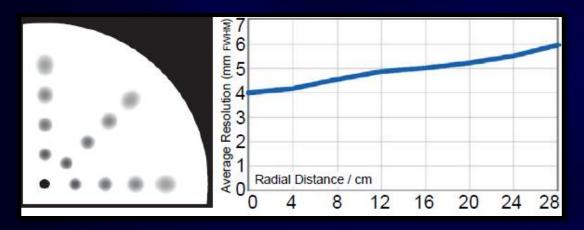


Robot to measure PSF



HD•PET improves image resolution



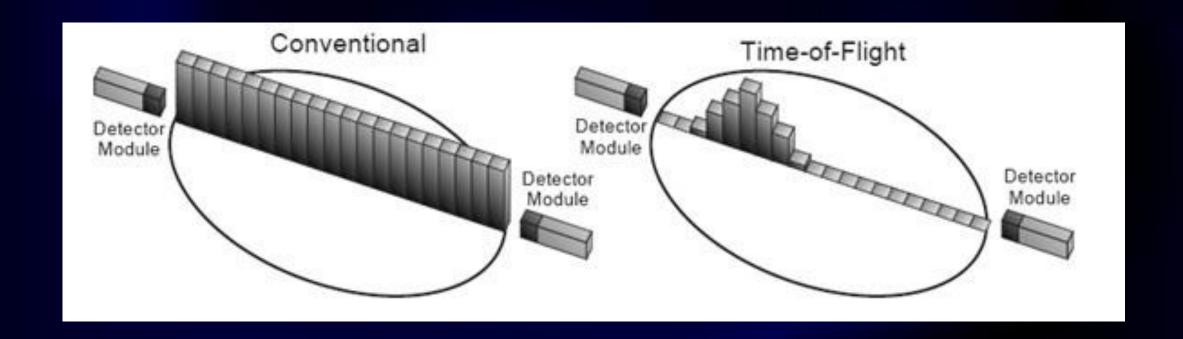


PET resolution is lost in the geometry of the detector



5) Time of Flight (TOF)

definition of the position of annihilation along the line of annihilation using the measured difference in arrival times

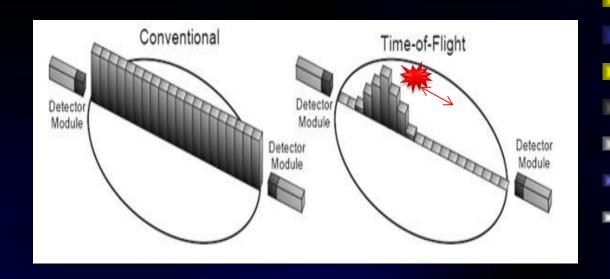


$\Delta t = Timing resolution = TOF Res.$

$$\Delta t = t_1 - t_2 = \frac{x + \Delta x}{C} - \frac{x - \Delta x}{C} = \frac{2.\Delta x}{C}$$

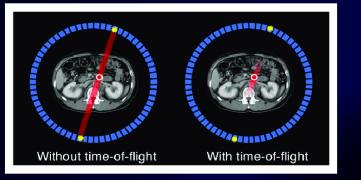
$$\Delta t = \frac{2.\Delta x}{c}$$

$$= TOF Res.$$



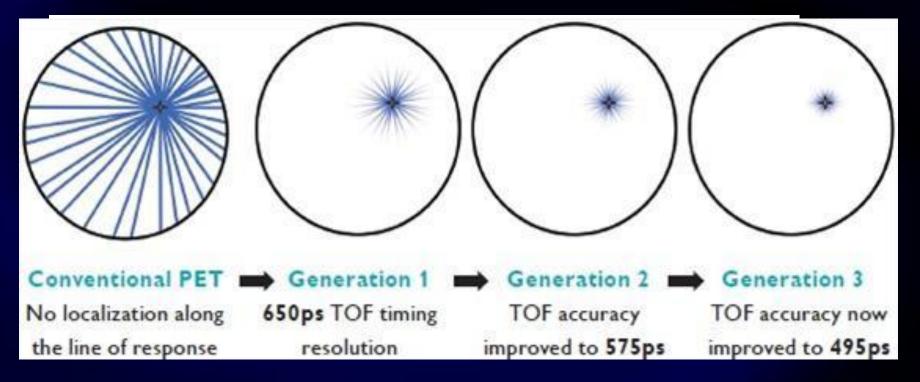
$$\Delta t = 300 \ ps$$

$$\rightarrow \Delta x = \frac{C.\Delta t}{2} = \frac{3 * 10^{10} cm^{5} * 300 * 10^{12}}{2} = \frac{9}{2} = 4.5 cm$$

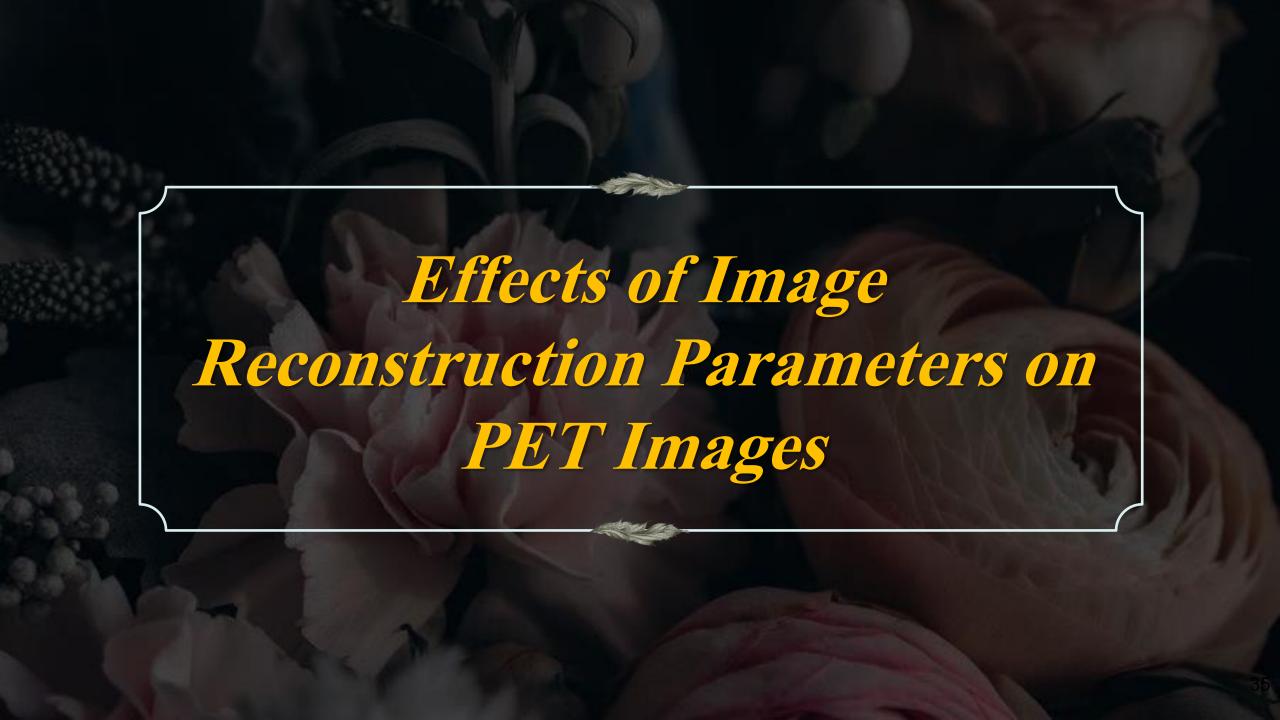


TOF current situation

Best Current Timing Res. ~ 300 ps ~ 4.5 cm TOF Kernel

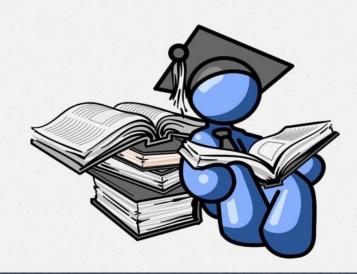


In a perfect TOF-PET system (TOF resolution \rightarrow ~0) image reconstruction would not become necessary!

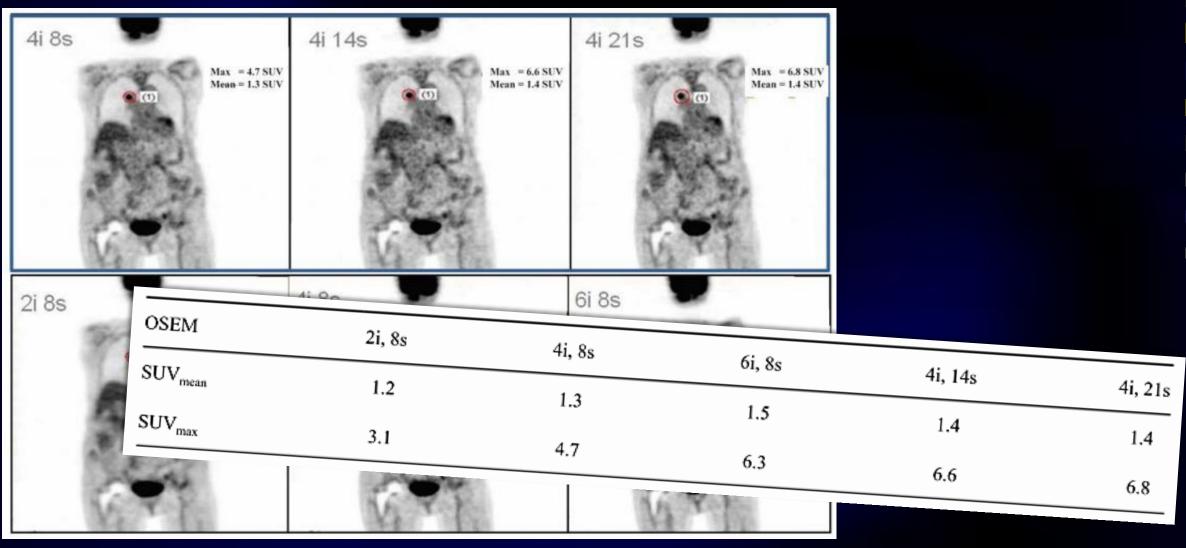




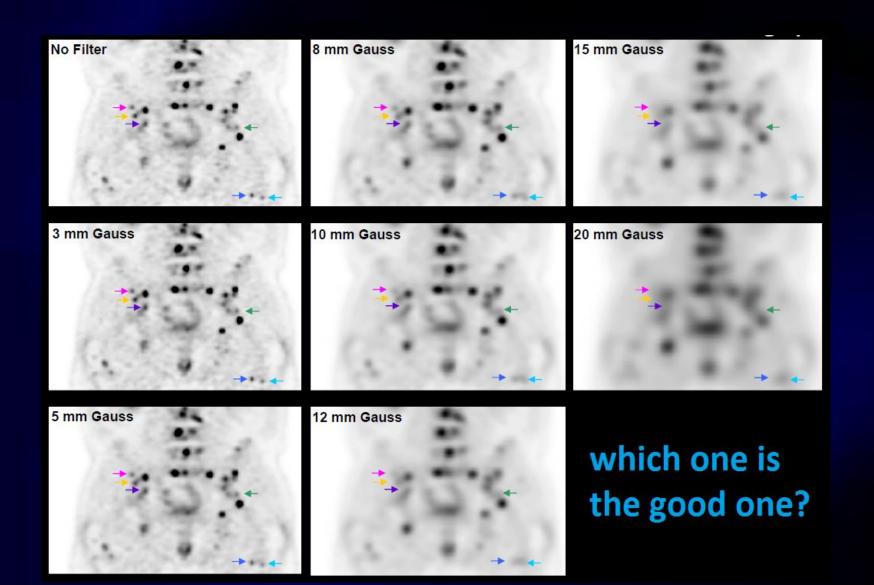
Quantification and harmonization



Iteration x subsets



Post-smoothing filter



Post-smoothing filter

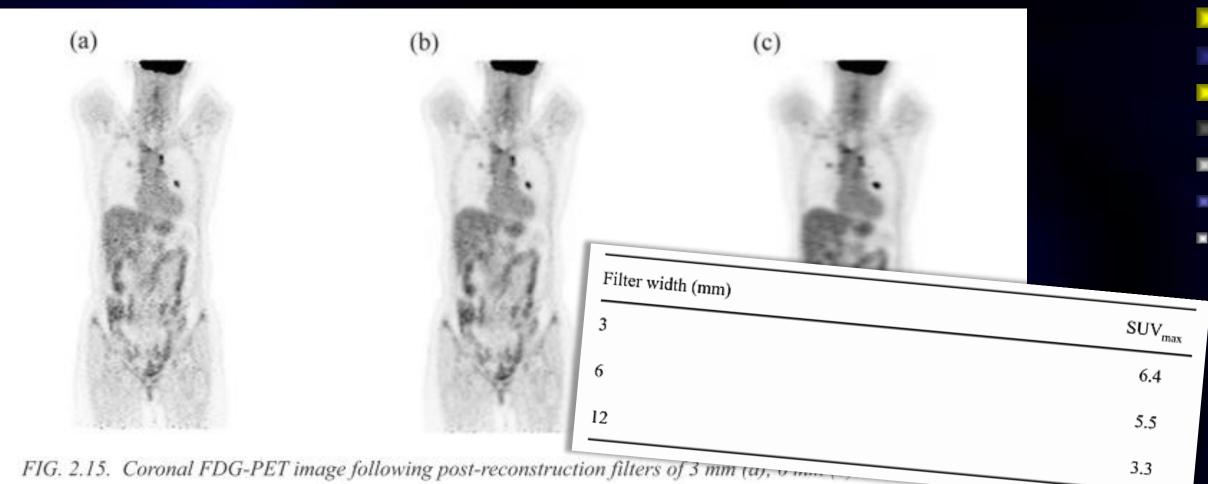
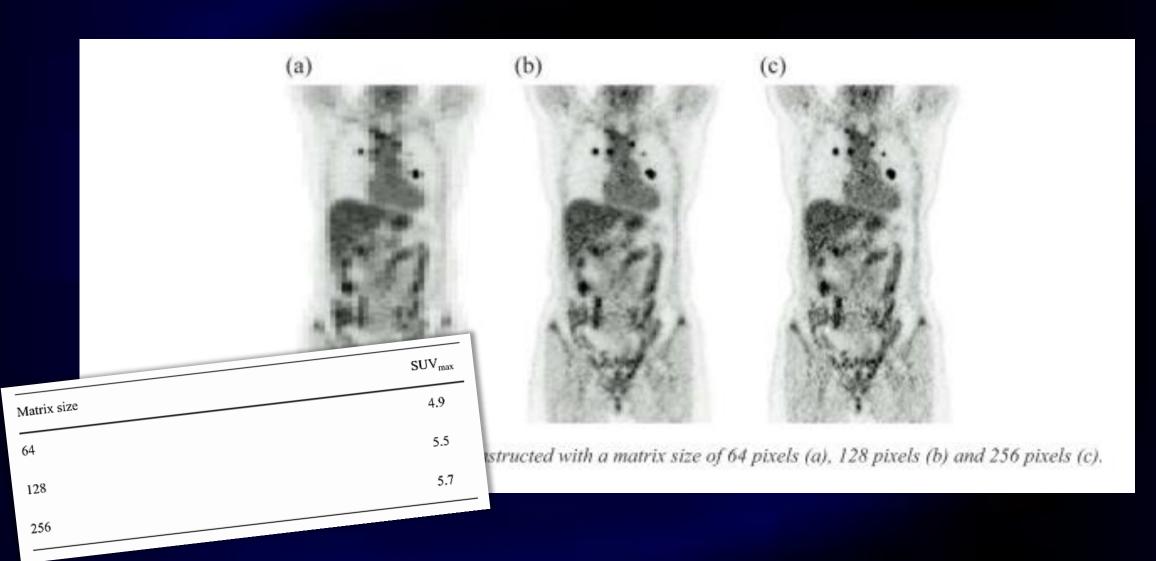
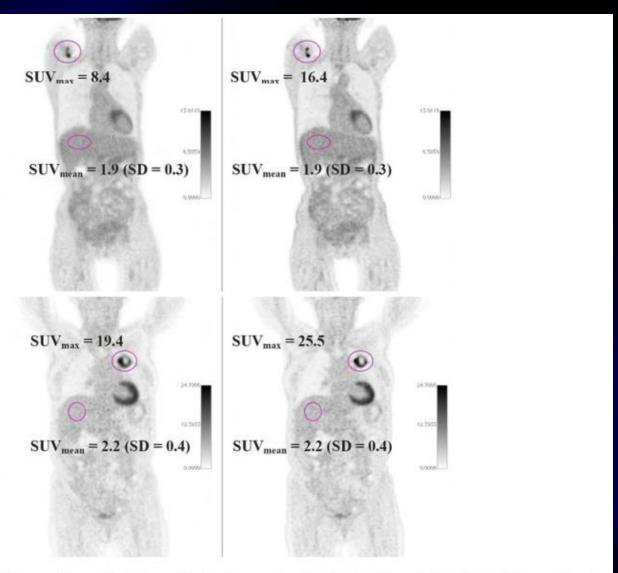


Image matrix size



Point Spread Function (PSF)



PSF methods are
available from vendors
under different names
(TrueX from Siemens,
SharpIR from GE and
Astonish from Philips)

Optimization reconstruction parameters regarding image quality

Vosoughi, 2024, IRJNM

Khazaee, 2017, nuclear medicine communication

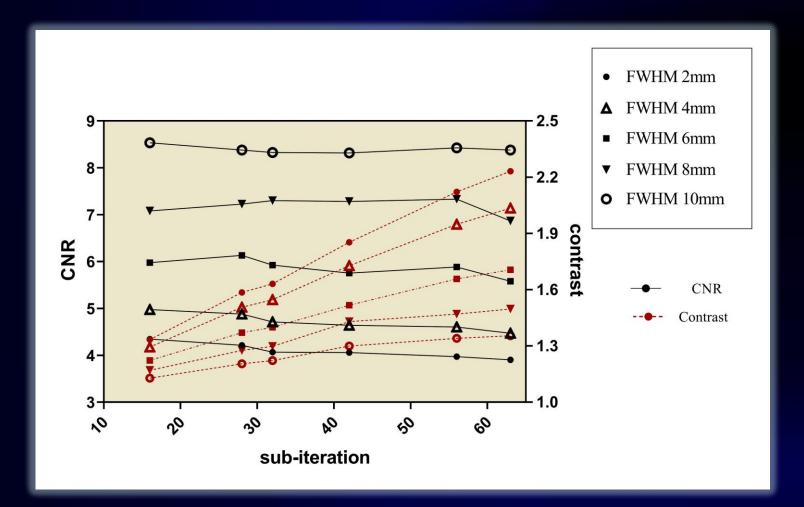
Prieto, 2015, Physica Medica

Akamatsu , 2012, JNM

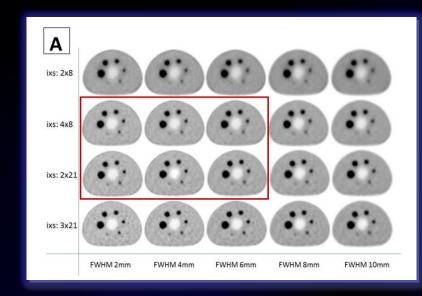
- assessment of iterations, subsets and FWHM of Gaussian filter on CNR, contrast and noise
- By increasing ixs and decreasing FWHM:

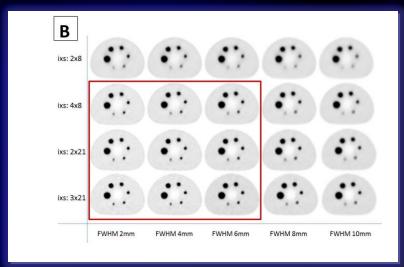






The width of the Gaussian filter was more important than the number of sub-iterations in the detectability assessment.





Effects of reconstruction parameters on PET image quantification

Kelly, 2011, EJNMMI Research

Sunderland, 2015, JNM

Tsutsui, 2017, AOJNMB

Armstrong, 2017, Nuclear Medicine Communication

Bing Bai , 2011, IEEE

- Evaluation of various FWHM of Gaussian filter with different reconstruction sets on SUV in multicenter studies
- Using advanced reconstruction algorithms (PSF/TOF)
 overestimate the SUVmax edge artifact

Appropriate FWHM of Gaussian filter



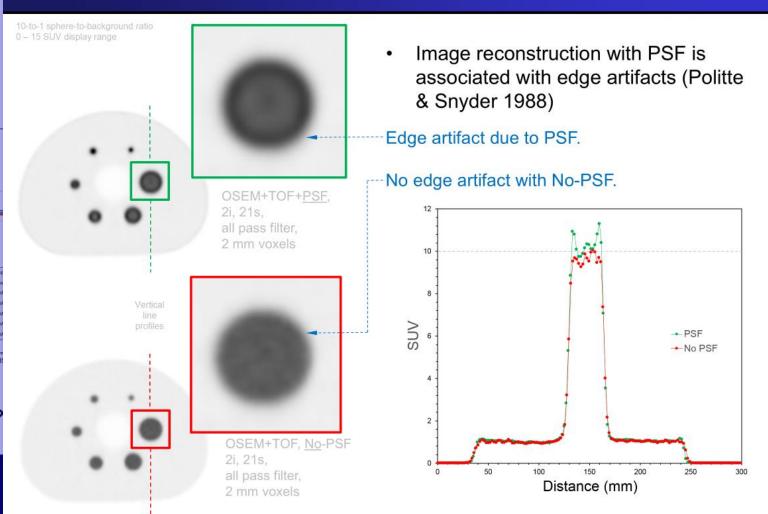
No-PSF vs. PSF

10-to-1 sphere-to-background ratio 0 – 15 SUV display range

OSEM+TOF, 2i, 21s, 5 mm Gaussian, 4 mm vo)

Sphere diameter (mm)

Edge Artifact

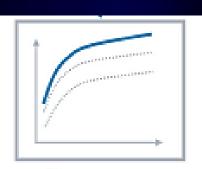


Harmonization

RESEARCH 4 LIFE®



The EARL & EARL accreditation



Recovery



Lucy C. Pike · Wolfgang A. Weber · Sigrid Stroobants · Dominique Delbeke · Kevin J.
Donohoe · Scott Holbrook · Michael M. Graham · Giorgio Testanera · Otto S. Hoekstra · Josee Zijlstra · Eric Visser · Corneline J. Hoekstra · Jan Pruim · Antoon Willemsen · Bertjan Arends · Jörg Kotzerke · Andreas Bockisch · Thomas Beyer · Arturo Chiti · Bernd J. Krause

1. Technical factors:

calibration between PET scanner and dose calibrator, residual activity in syringue after injection or paravenous injection, synchronization of clocks of PET scanner and dose calibrator

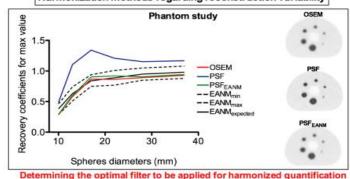
2. Biological factors :

blood glucose level, uptake period, patient discomfort, inflammation, patient motion and/or breathing

3. Physical factors:

scan acquisition parameters, image reconstruction parameters, ROI definition, normalization factor for SUV, the of contrast agents, blood glucose level correction

Harmonization methods regarding reconstruction variability



Life optimal litter to be applied for harmonized quantification

EQ-PET 1 dataset : PSF and PSF EANM



PSF PSF_{EANM}

Harmonized quantification = PSF_{EQ} Harmonized quantification = PSF_{EANM}

Eur J Nucl Med Mol Imaging (2017) 44 (Suppl 1):S17–S31 DOI 10.1007/s00259-017-3740-2



+ 18.0 % (SMD)

REVIEW ARTICLE

PERCIST: +16.3% (SMD)

EANM/EARL harmonization strategies in PET quantification: from daily practice to multicentre oncological studies

Nicolas Aide 1,2
 \odot - Charline Lasnon 2,3 - Patrick Veit-Haibach 4,5 - Terez Sera
 6 - Bernhard Sattler 7 - Ronald Boellaard 8,9

Received: 19 April 2017 / Accepted: 24 April 2017 / Published online: 16 June 2017 © The Author(s) 2017. This article is an open access publication

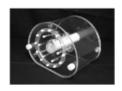
OSEM PSF+TOF SUL_{max} = 47.0 SUL_{peak} = 29.6 SUL_{max} = 28.1 SUL_{maxEQ} = 29.1 SULpeak = 23.9 SUL_{peakEQ} = 24.7 pre treatment PET SUL_{max} = 46.6 SUL_{peak} = 33.3 $SUL_{max} = 33.8$ SUL_{maxEQ} = 34.3 SUL_{peak} = 27.8 SUL_{peakEQ} = 28.2 post treatment PET **EORTC PERCIST** OSEM_{PET1}/PSF+TOF_{PET2} + 65.8% (PMD) + 39.3% (PMD) Standard of reference → PSF+TOF_{PET1}/OSEM_{PET2} - 28.1% (PMR) -6.1% (SMD) OSEM_{PET1}/OSEM_{PET2} → PSF+TOF.EQ_{PET1}/OSEM_{PET2} + 16.2% (SMD) + 12.6 % (SMD) EORTC: + 20.3% (SMD)

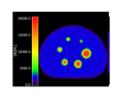
➤ OSEM_{PET1}/PSF+TOF.EQ_{PET2} + 22.1% (SMD)

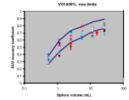
Multi-center QC and calibration RESEARCH



- Calibration QC specification:
 - maximum allowable calibration deviation = + or 10% (global)
- SUV recovery specifications:
 - for SUVmax (focus –as SUVmax is used clinically!)
 - for SUVmean



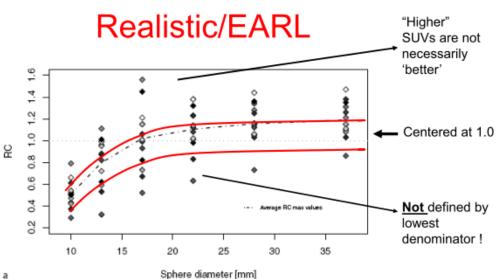




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Vosoughi, 2023, QIMS

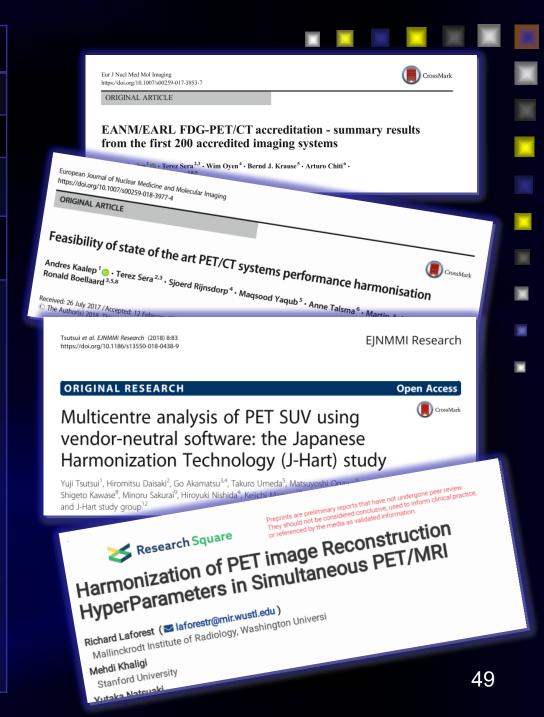
Kaalep, 2017, EJNMMI

Kaalep, 2018, EJNMMI

Tsutsui , 2018, EJNMMI Research

Laforest, 2020, Research Square

- Techniques used for harmonization
- Variations due to the performance of PET/CT systems are reduced when RCs are within the acceptable EARL range.
- Feasibility of harmonization and provision of new reference criteria to achieve higher RCs
- Modification of reconstruction protocols by applying appropriate FWHM of Gaussian filter brings RCs values of different scanners closer together
- Increasing Reproducibility and Repeatability



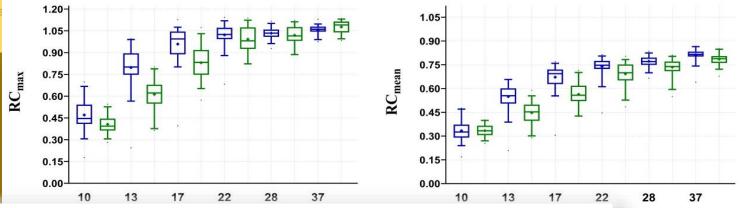
Multicenter quantitative ¹⁸F-fluorodeoxyglucose positron emission tomography performance harmonization: use of hottest voxels towards more robust quantification

Habibeh Vosoughi ^{1,^}, Mehdi Momennezhad ², Farshad Emami ³, Mohsen Hajizadeh ¹, Arman Rahmim ^{4,5}, Parham

Geramifar ^{6,^,⊠}

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PMCID: PMC10102741 PMID: 37064407



iameter (mm)	SBR 10:1				SBR 4:1				
	RC _{max}	RC_{mean}	RC_{peak}	$\mathrm{RC}_{10\mathrm{V}}$	RCmax	RC _{mean}	RC_{peak}	$\mathrm{RC}_{10\mathrm{V}}$	- 上山古中中
10	0.4-0.54	0.29-0.37	0.25-0.29	0.33-0.41	0.36-0.44	0.3-0.36	0.29-0.33	0.33-0.39	户工了 * *
13	0.74-0.89	0.50-0.6	0.47-0.53	0.61-0.71	0.54-0.67	0.39-0.49	0.42-0.5	0.5-0.61	
1 7	0.88-1.05	0.62-0.71	0.65-0.73	0.8-0.93	0.74-0.91	0.52-0.61	0.58-0.66	0.66-0.79	
22	0.99-1.07	0.72-0.77	0.85-0.91	0.94 -1	0.92-1.07	0.65-0.75	0.79-0.88	0.88-0.99	
28	1.01-1.06	0.74-0.79	0.91-0.98	0.97-1.04	0.98-1.08	0.71-0.77	0.88-0.96	0.95-1.04	
3 7	1.04-1.08	0.8-0.83	0.94-0.99	1.01-1.05	1.04-1.11	0.76-0.8	0.91-1.03	1.01-1.09	28 37
									- (mm)

□ SBR 10:1

□ SBR 4:1

Image reconstruction and Al

Kuang Gong, 2024, IEEE

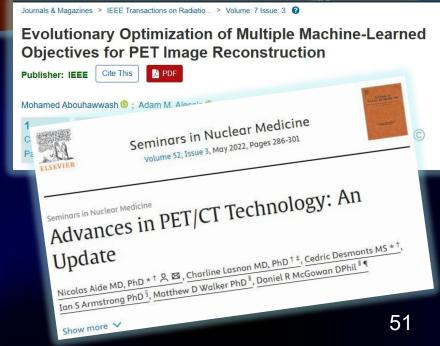
Chi Qi, 2022, EJNMMI

Mohamed Abouhawwash , 2022, IEEE

Nicolas Aide, 2022, Seminars in Nuclear Medicine

- Direct reconstruction method from PET sinogram using supervised deep learning methods for denoising/reconstruction
- Developing Al-driven accurate WB FDG image quality using IQA-CCN
- propose a novel deep learning function (CNN) to estimate the goodness of image quality
- focus on TOF,PSF modelling, BPL algorithm, AI approaches







SIEMENS ... Healthineers

Reconstruction Algorithms:
 3D-OSEM
 TrueX (HD)
 TrueX + TOF (ultra-HD)

• Scatter correction methods: relative, absolute, WB relative, WB absolute

• Filters: Gaussian, Butterworth



Scatter Correction in 3D Positron Emission Tomography

www.siemens.com/medical



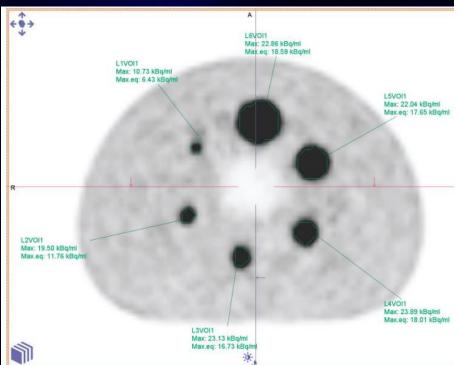
EQ•PET: Achieving NEMAreferenced SUV Across Technologies

Matthew Kelly, PhD, Siemens Healthcare Sector

White Pape

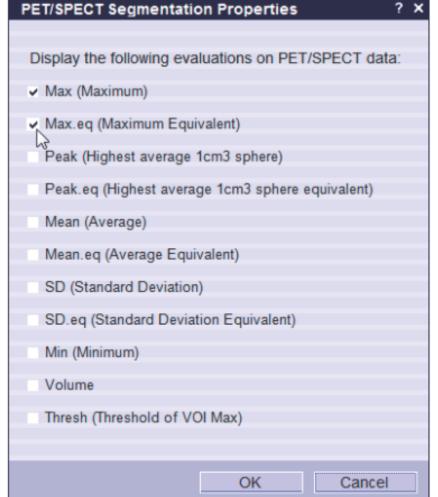
EQ•PET: Achieving NEMAreferenced SUV Across Technologies

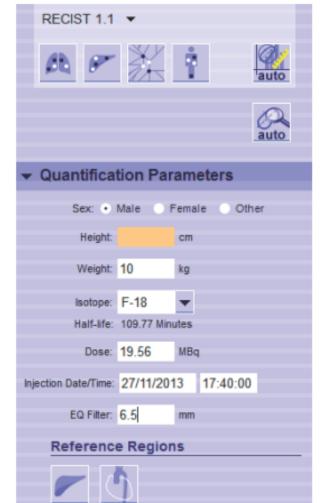
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Reconstruction Algorithms:

FORE-FBP (Fourier REbinning - Filtered Back Projection)

Filters: Hanning, Shepp-Logan, Rectangle, Butterworth

SharpIR

VUE Point HD (VPHD) - iterative/OSEM

VUE Point FX (VPFX) - use TOF

Q.Clear - full convergence while maintaining acceptable image quality , use Bayesian Penalized Likelihood (BPL) algorithm



PHILIPS Healthcare

Reconstruction Protocols:

Body-EARL

· Filters: Gaussian

Smooth/Sharp

Consists of four user-selectable Gaussian post-filter options with increasing levels of filtering/smoothing (as shown in the table below):

- Normal
- Smooth (default)
- SmoothA
- SmoothB

Filtering Options	Normal	Smooth (default)	SmoothA	SmoothB	
FWHM (mm)	4	5	6	7	



PET AR Instructions For Use

lish

9801904271_C

PET Adaptive Reconstruction

Version 1.0

PHILIPS

PSF (point spread function)

Using Richardson-Lucy algorithm which is iterative.

For control of noise → use regularization (Sieve-kernel (FWHM))

PET Adaptive Reconstruction

The default PSF parameters are:

- PSF Iterations = 1
- PSF Regularization = 6 mm



1. Correction Challenges

- Motion correction (especially for whole-body dynamic scans) is still very imperfect.
- Scatter correction is never 100% accurate. Especially in low-count regions, or at edges (lung/liver interfaces, for example), scatter estimation errors propagate badly.
- Attenuation correction errors from CT mismatches or MR-based estimation (in PET/MR) are still a big source of bias.
- Partial volume correction (PVE correction) remains an issue, especially for very small lesions.

2. Reconstruction Algorithm Development

- Time-of-Flight (TOF) integration is strong now, but there are
 opportunities to push TOF resolution better or exploit it more cleverly.
- Regularization (penalizing noise without blurring detail) finding new priors for MAP (maximum a posteriori) reconstruction is an active area.
- Ultra-fast reconstruction using deep learning is popular but still faces issues with generalization and trust (artifact hallucination risk).

3. AI/Deep Learning Application

- End-to-end learned reconstruction (e.g., skipping traditional iterative reconstruction and letting a network learn it all) is promising but unstable and risky for clinical trust.
- Physics-informed neural networks networks that respect PET physics rather than just doing black-box prediction — are a growing but challenging field.
- Low-count PET reconstruction (e.g., 1% of standard dose) with deep learning denoising or reconstruction is very active but still not perfect.
- Uncertainty quantification AI reconstructions often look good, but how
 do you know if a result is reliable? This is a hot topic.

4. Novel Applications/Problems

- Dynamic PET reconstruction (parametric imaging) harder and often still relies on simplifying assumptions (like simple kinetic models). New models, AI acceleration for parametric imaging, or better noise handling could be huge.
- Total-body PET (like the EXPLORER scanner) opens new reconstruction challenges because of enormous data volume and new motion patterns.
- Multi-tracer PET (imaging two tracers at once) needs very sophisticated reconstruction algorithms to untangle signals.

Hot topics in 2025

Rank	Topic	Novelty (2025)	Practical Impact
R	Uncertainty Maps for AI-Reconstructed PET	****	****
8	AI-Enhanced Scatter Correction	****	****
W	Parametric PET Imaging Acceleration	****	****
4	Motion Correction Whole-Body PET	****	****
5	Low-Dose AI PET Reconstruction	***	****
6	Total-Body PET Fast Reconstruction	****	★★☆☆ (if no data access)





★★☆☆ (if no data access)

