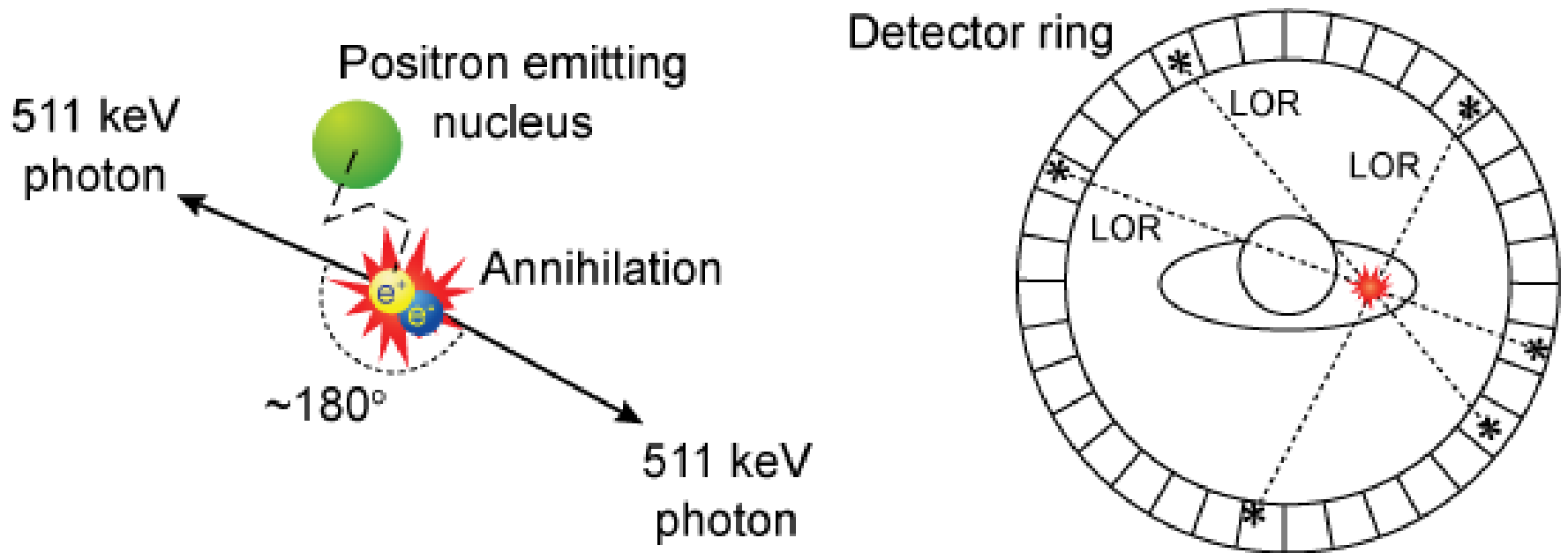


A cost-effective, scalable approach to high-resolution, sub-100 ps TOF-PET

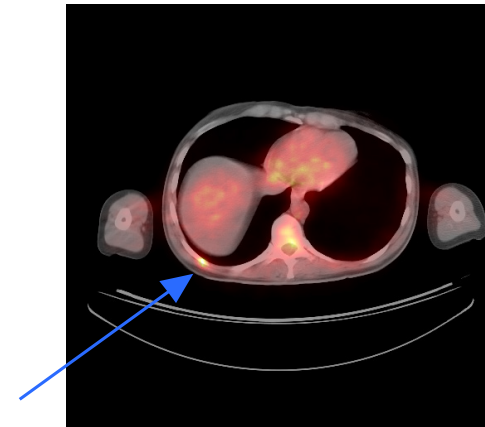
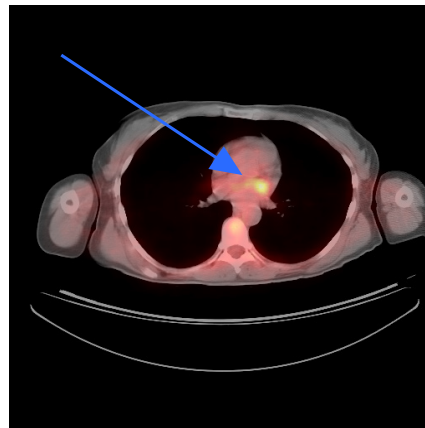
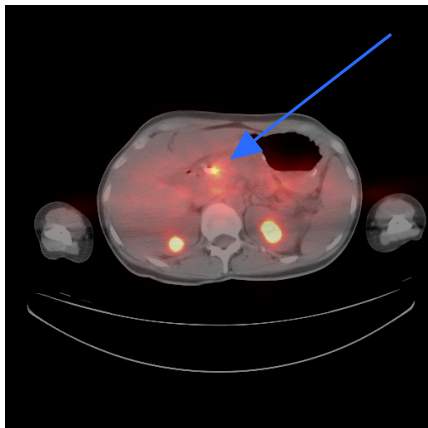
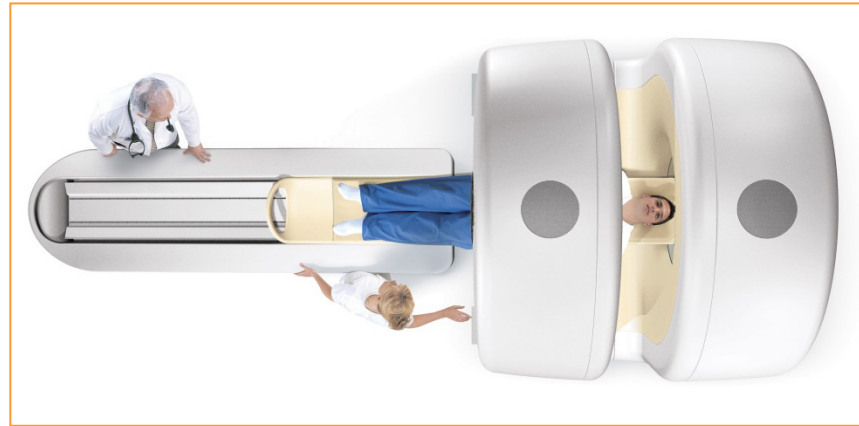


MEDAMI 2016, May 1-5, 2016, Ajaccio, Corsica

Positron Emission Tomography



PET/CT



PET/CT (fused images): primary pancreatic cancer with suspicious chest wall and mediastinum lesions

In vivo molecular imaging

PET provides 4D in vivo molecular imaging with:

- the best spatial resolution
- the highest molecular sensitivity ($\sim 10^6$ times better than MRI)
- and the most accurate quantitation

available clinical practice today

Use of PET

PET is e.g. used in **oncology** for:

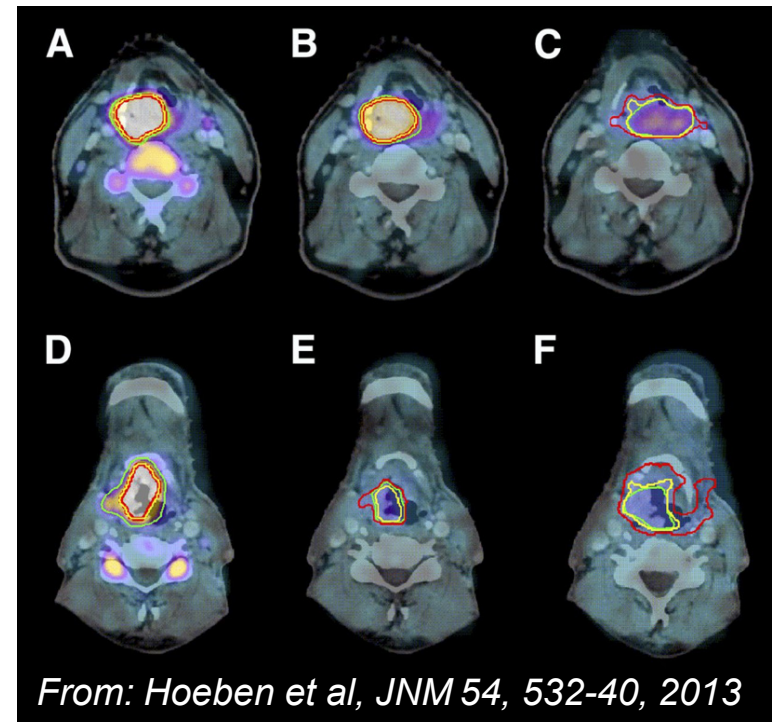
- Preclinical research
- Clinical research
- Cancer diagnosis
- Cancer staging
- Treatment planning
- (Early) monitoring of response to treatment
- Follow-up

⇒ PET is a truly **translational modality** as well as a proven and widely used tool in **personalized medicine**

^{18}F FLT-PET/CT before therapy (A,D), in 2nd week of therapy (B,E) and in 4th week (C,F)

Top row shows slow decrease in FLT uptake in patient treated for supraglottic laryngeal carcinoma

Bottom row shows a patient with fast decrease of FLT uptake, associated with better survival probability



Why is PET not yet used as often as e.g. CT or MRI?

What is still missing?

In vivo molecular imaging needs:

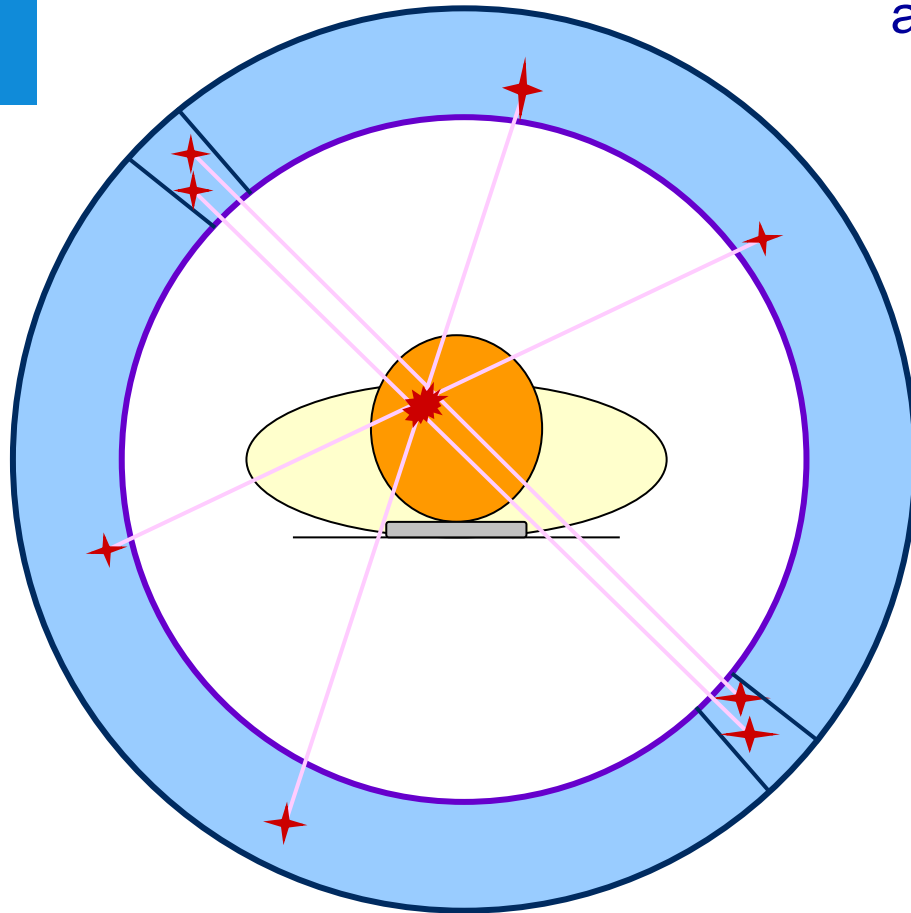
- More and more specific tracers, readily available, and affordable
- Lower dose (currently 5-25 mSv, should be \ll 1 mSv)
- Shorter scan time (currently $>$ 10 minutes, should be $<$ 1 minute)
- More flexibility (combination with imaging and therapeutic modalities)
- Lower costs (currently $>$ 1000 € per scan, must be value-based)

Technologically, this necessitates:

- Order-of-magnitude increase in molecular sensitivity (**=> TOF!**)
- High spatial resolution and DOI recovery
- Quantitative accuracy ($<$ 5%)
- Compact, flexible, scalable, and affordable solutions

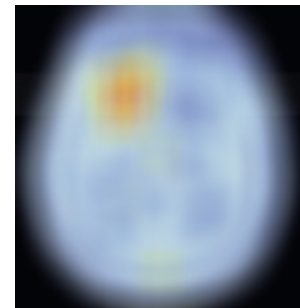
The importance of spatial resolution

Image resolution is determined by the accuracy with which we can determine the interaction position of the gamma photon in the detector

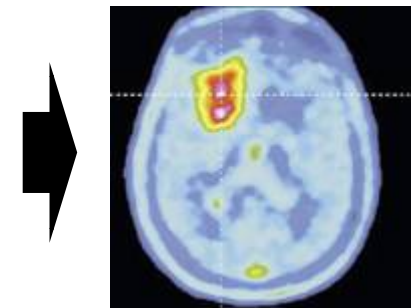


Clinical PET today: ~ 4-5 mm

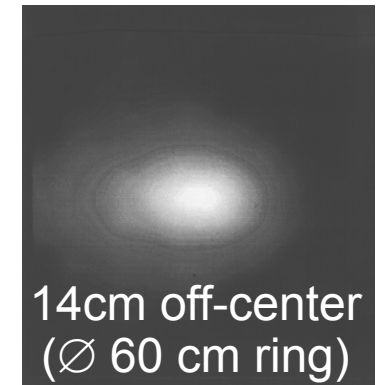
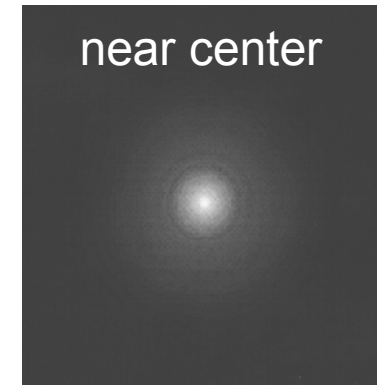
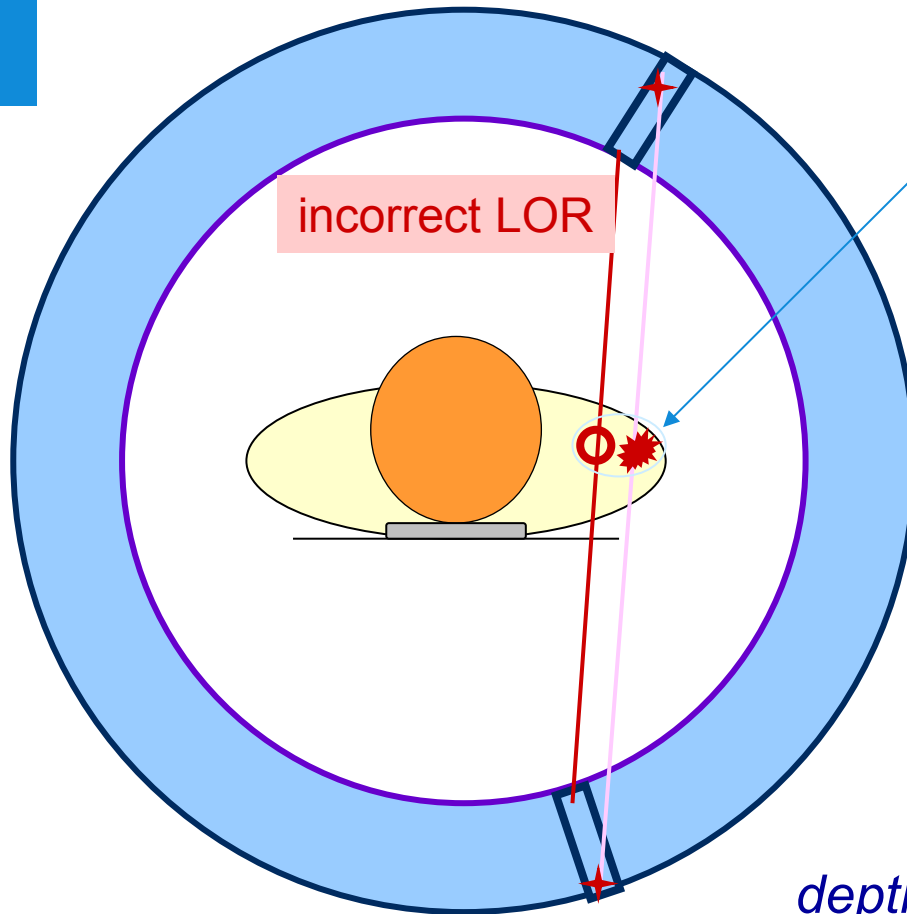
low spatial resolution:



high spatial resolution:



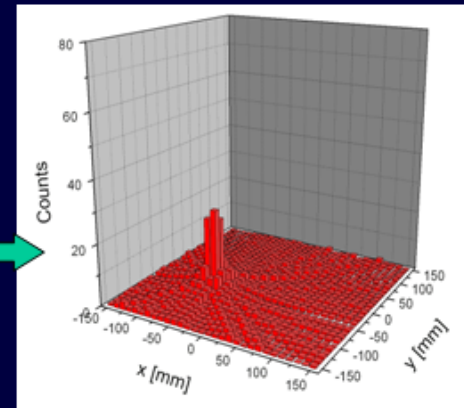
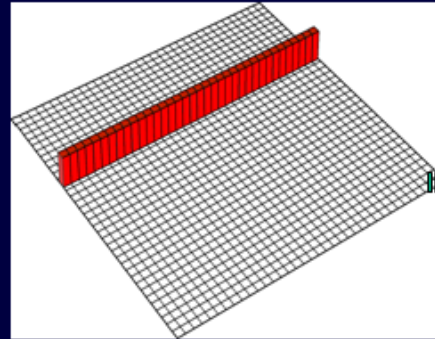
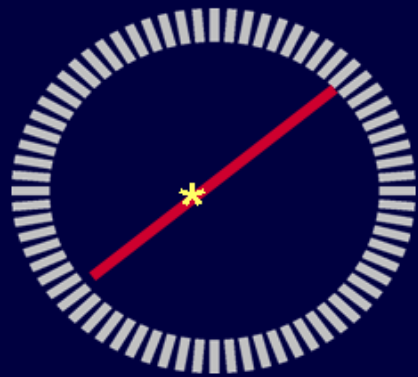
Depth of interaction errors



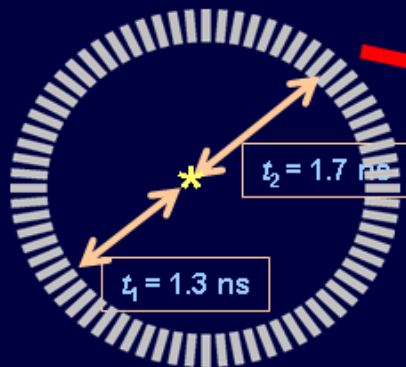
Parallax errors can be avoided by correcting for the *depth of interaction (DOI)* in the scintillator

Time of Flight PET Systems

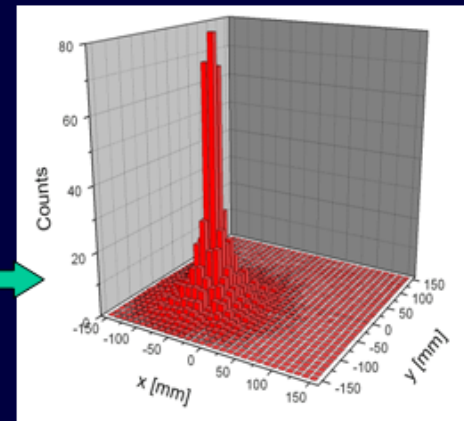
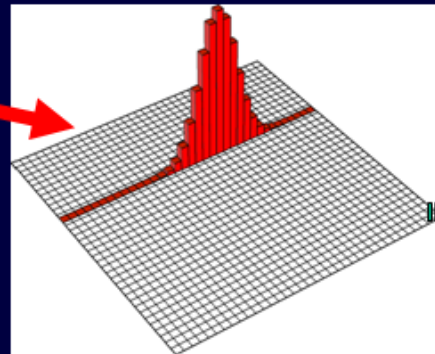
Conventional PET/ ToF off



Time-of-Flight PET



$t_2 - t_1$

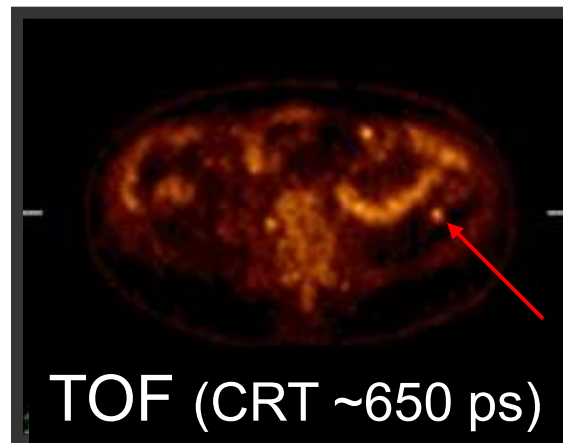
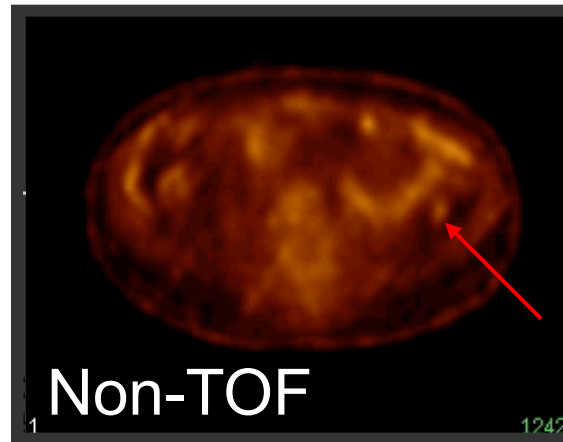
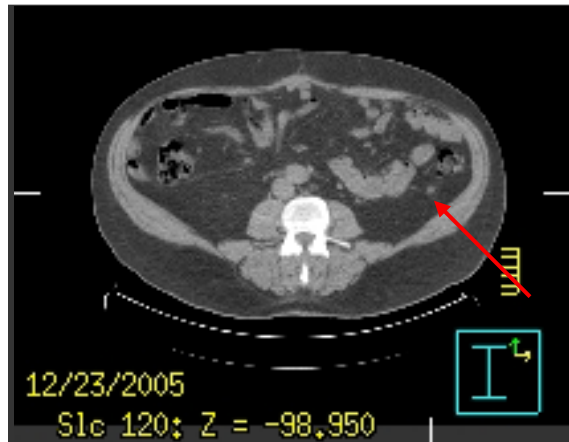


→ ToF: more signal, less noise

Time-of-flight PET

Colon cancer, left upper quadrant peritoneal node

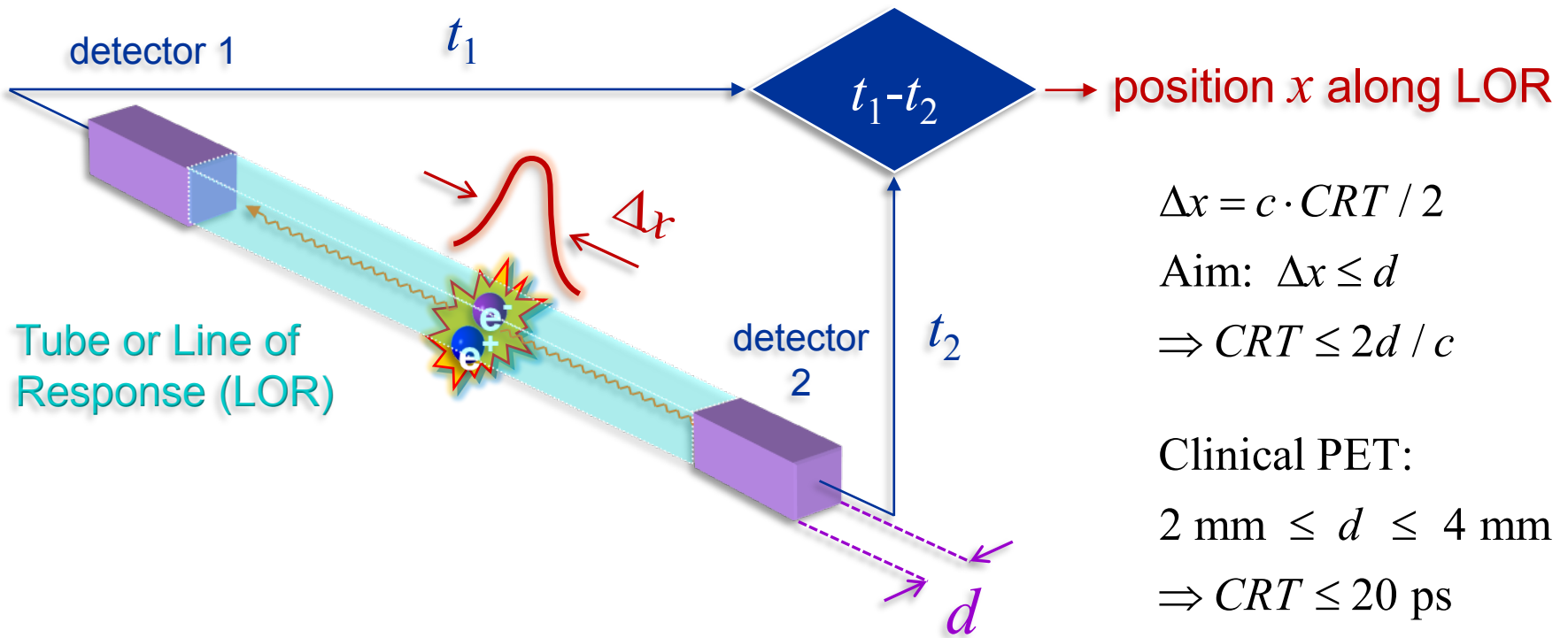
114 kg; BMI = 32.2
13.4 mCi; 2 hr post-inj



The holy grail: “10-picosecond PET”

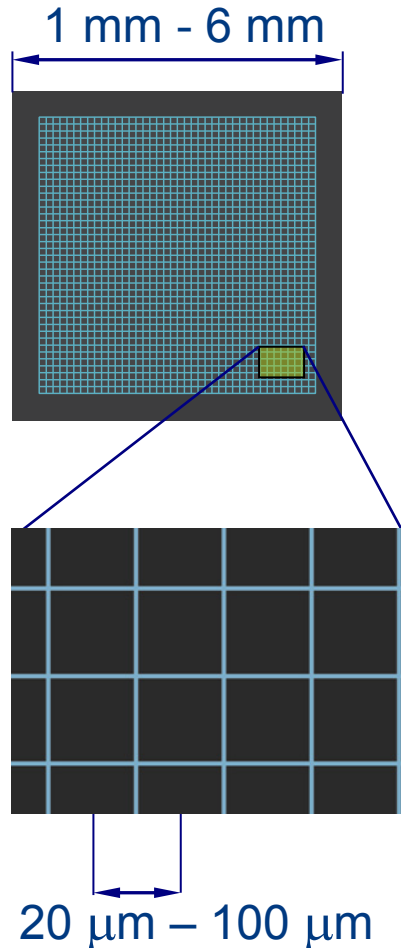
With a CRT of ~ 10 ps events can be localized directly:

- Image reconstruction no longer needed \Rightarrow real-time image formation
- Extreme sensitivity \Rightarrow new applications (e.g. single cell tracking?)



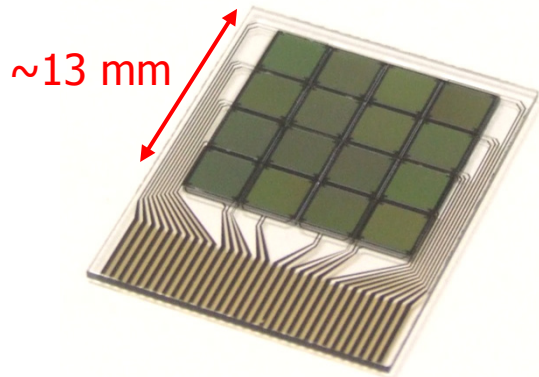
The silicon photomultiplier (SiPM)

- a disruptive photosensor technology



- Array of many self-quenched Geiger-mode APDs (microcells) connected in parallel
- Increasingly interesting as replacement for PMTs:
 - high gain ($\sim 10^6$)
 - high PDE
 - compact and rugged
 - transparent to γ -photons
 - fast response (ns)
 - insensitive to magnetic fields

First SiPM array based PET detectors (2008)

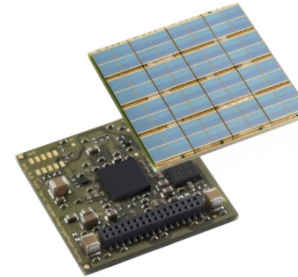
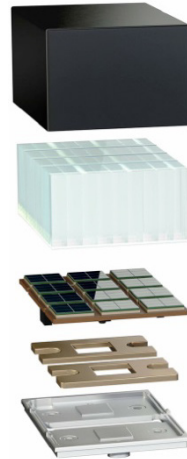


SciSiLiA
Project
(2006-2010)

One of the first SiPM arrays: SensL SPMarray 3035G16 (Dec 2007), containing 4 x 4 SiPMs of ~3 x 3 mm² each

SiPMs have arrived in nuclear medicine

TOF-PET/MRI and TOF-PET/CT system based on Silicon Photomultipliers



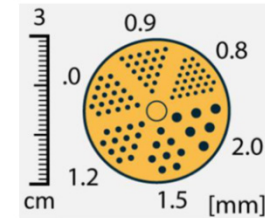
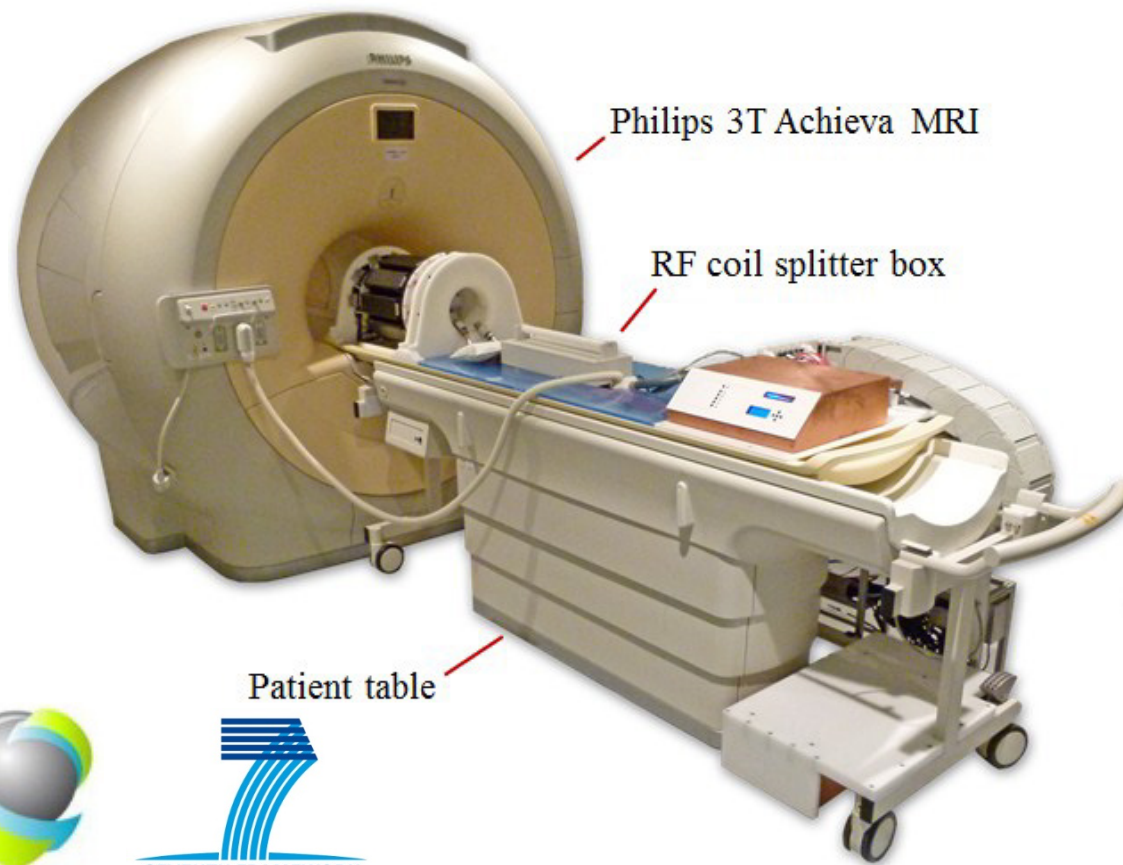
PHILIPS

System Performance	
CRT	< 400 ps FWHM
Sensitivity	21 kcps/MBq
FOV	60 x 25 cm
Spatial res	4.1 mm
Energy res	< 12%

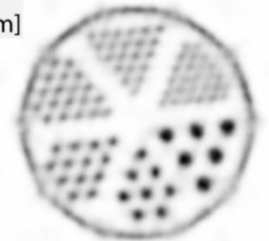
System Performance	
CRT	325 ps FWHM
Eff. sens.	22 kcps/MBq
FOV	67.6 x 16.4 cm
Spatial res	4.1 mm
Energy res	< 12%

Fully digital MR-compatible PET insert

For small-animal imaging



Spatial
resolution
~0.8 mm



SUBLIMA (FP7, 2010-2015)

- Philips
- RWTH
- TU Delft
- KCL
- U Gent
- UHEI
- FBK
- and others...



HYPMED: PET/MRI insert for breast

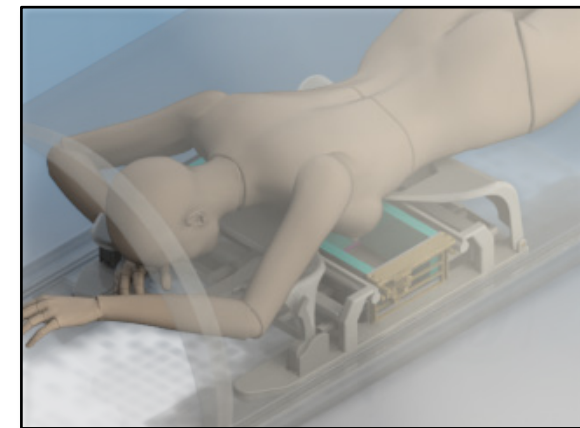
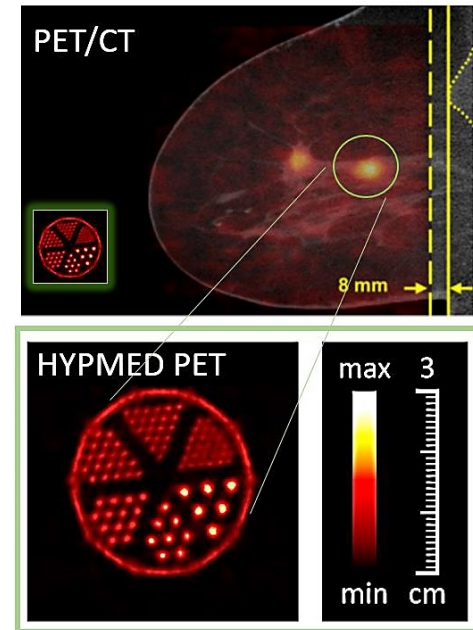
HYPMED: a new device for breast PET/MRI hybrid imaging

H2020-PHC11-2015 (2016-2020, ~6 M€)

- MRI-transparent PET-detector integrated with PET-transparent breast MRI coil
- ~ 1 mm spatial resolution, ~200 ps CRT, 4x sensitivity w.r.t. whole-body PET/MR
- prospective clinical study with 200 patients to evaluate clinical utility

Objectives:

- improve early diagnosis of breast cancer
- reduce need for invasive biopsies
- improve treatment planning
- identify novel biomarkers
- reduce dose (~8x)

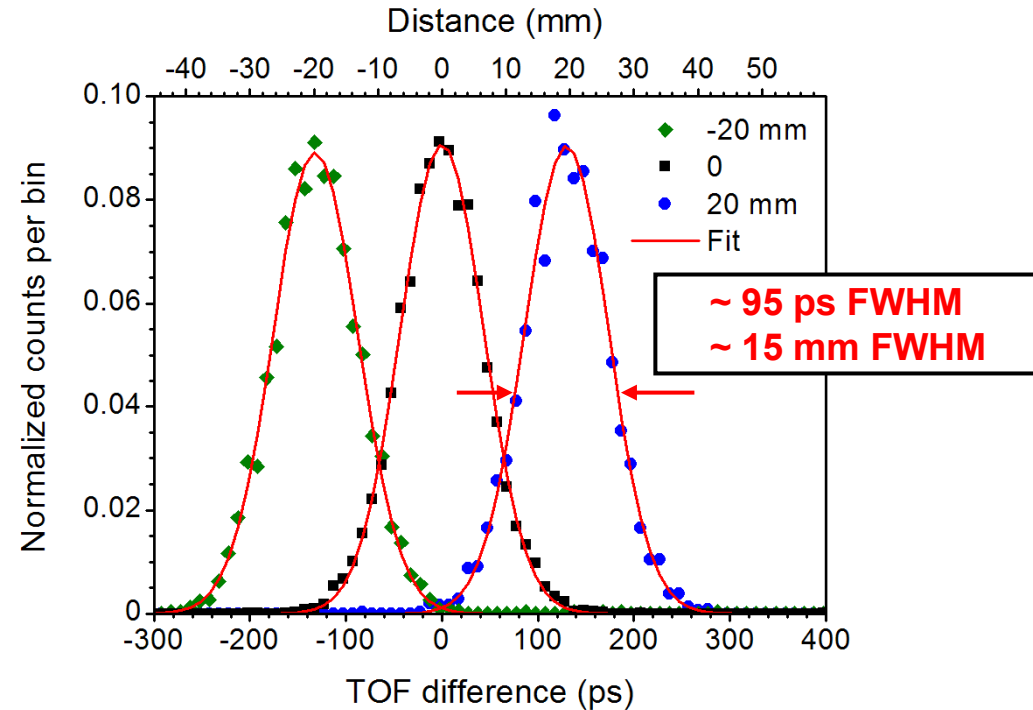
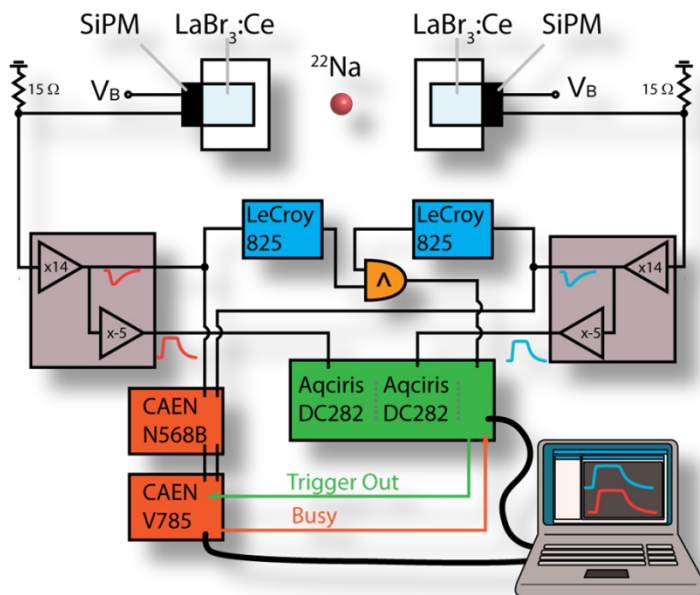


A few words on breaking speed limits...

100 ps barrier already broken in lab (2009)

Made possible by the combination of:

- Small $\text{LaBr}_3:\text{Ce}(5\%)$ crystals (3 mm x 3 mm x 5 mm)
- Silicon Photomultipliers (Hamamatsu MPPC-S10362-33-050C)
- Digital Signal Processing (DSP)

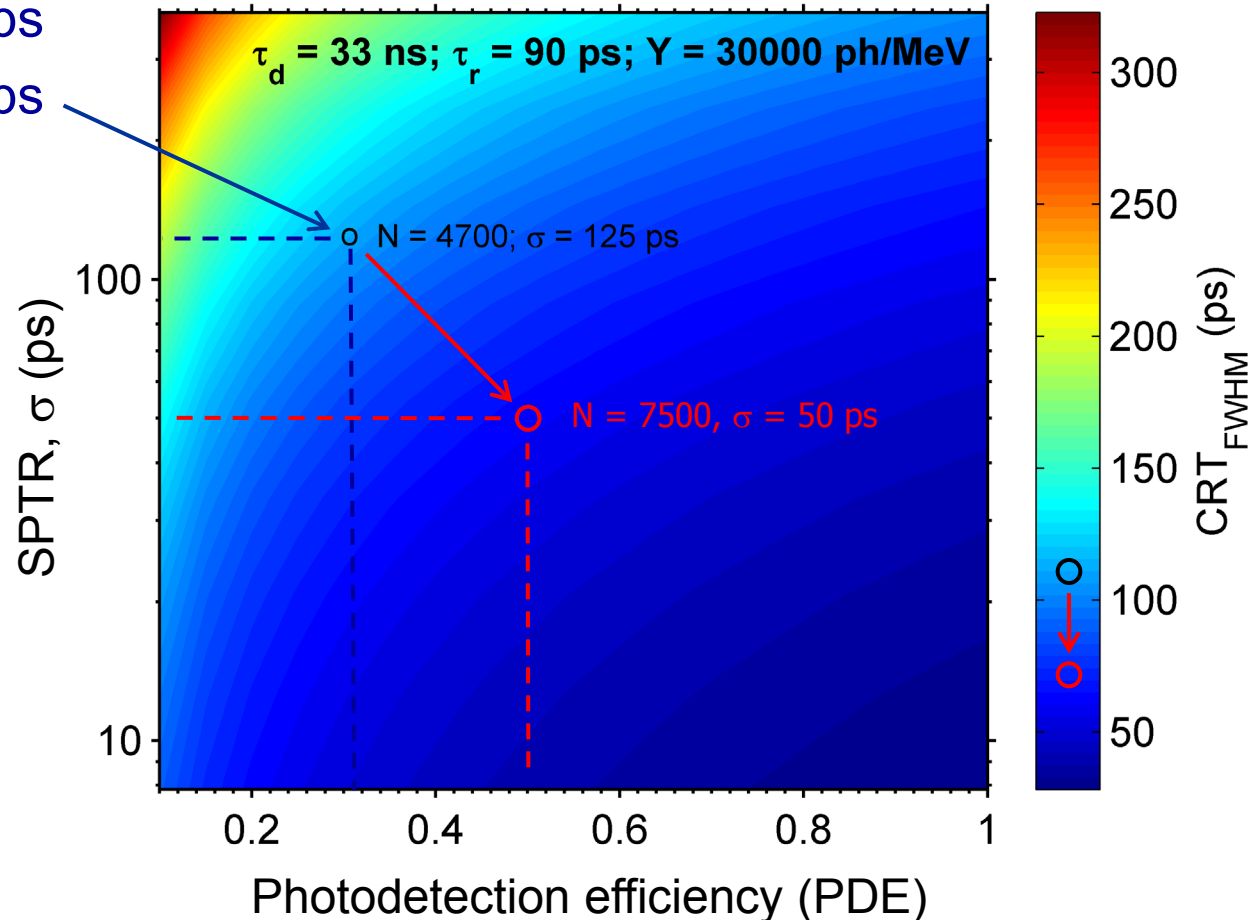


Example: CRT of LSO:Ce,Ca

Measured: ~125 ps
 CRT_{LB}: ~110 ps

$$\text{var}(\Xi) \geq \frac{1}{I_{T_d}(\Theta)}$$

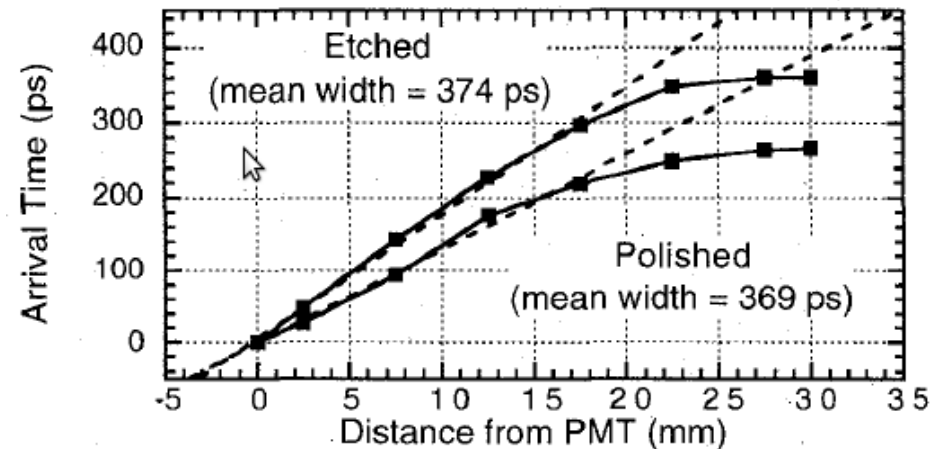
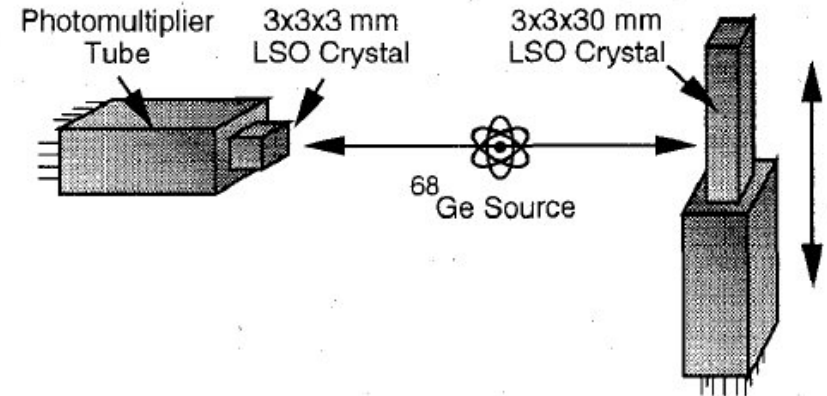
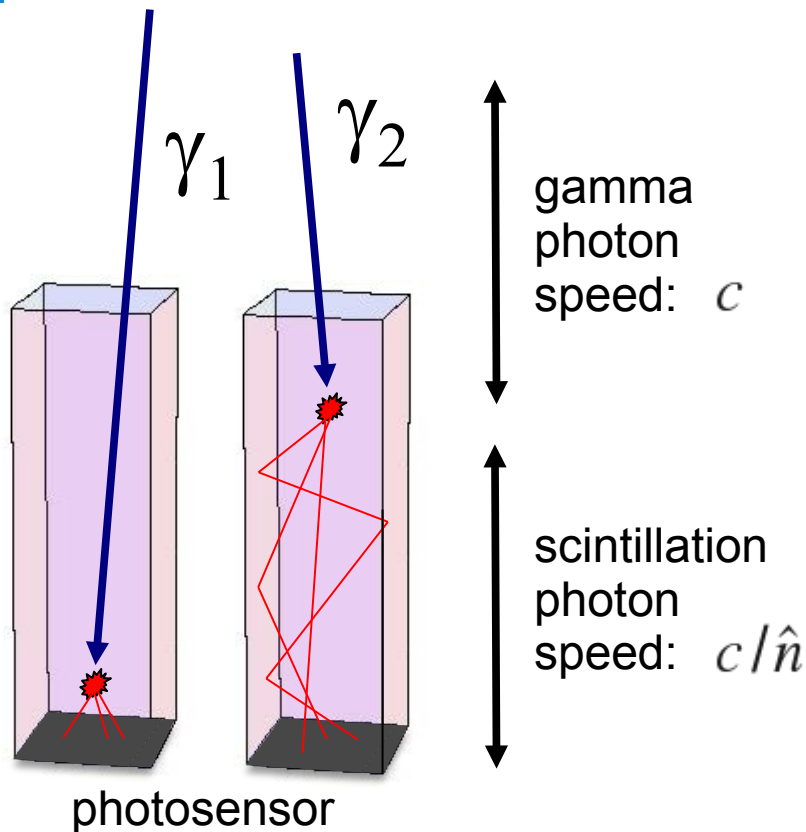
CRT < 100 ps is feasible with further (d)SiPM improvements (PDE and TTS)



Lower bound on the CRT of LSO:Ce,Ca + MPPC as a function of PDE and TTS

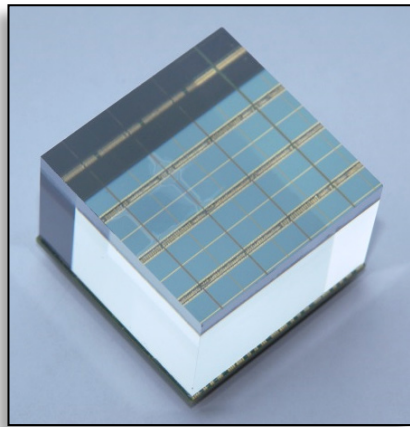
DOI-dependent signal delay in crystal

Depth-of-interaction (DOI) variations deteriorate timing resolution

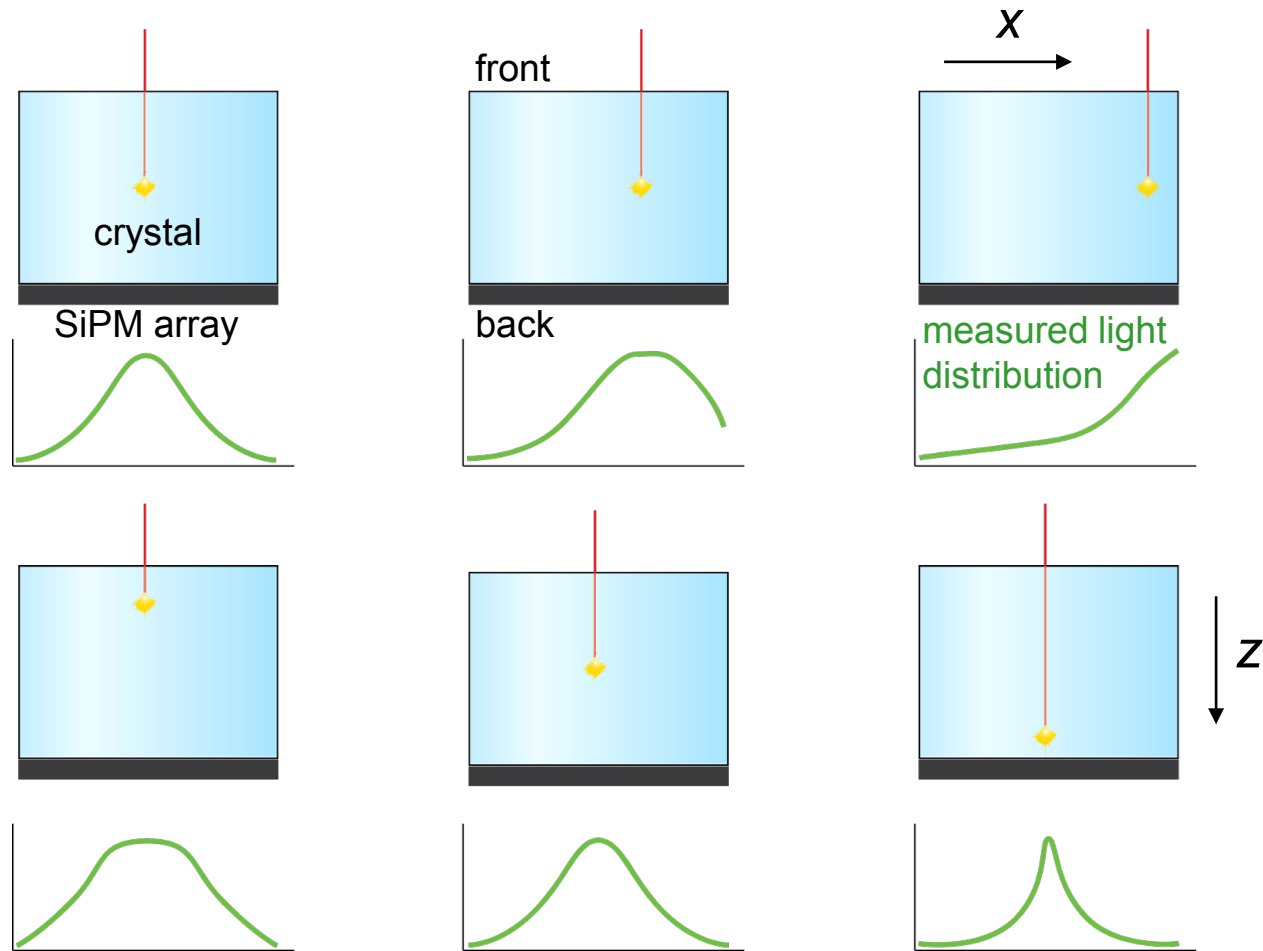


WW Moses and SE Derenzo
IEEE Trans. Nucl. Sci. 46, 474-478 (1999)

Monolithic scintillator detectors

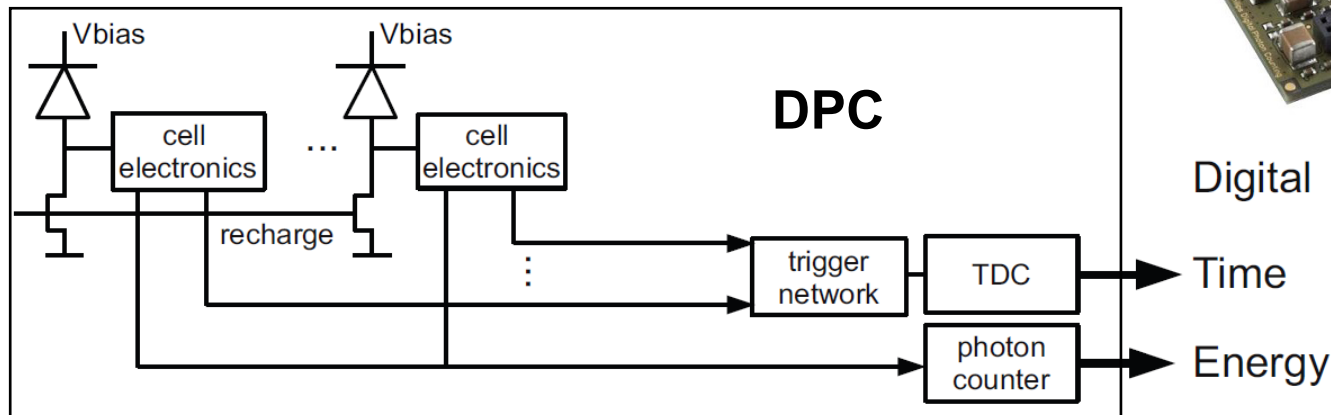
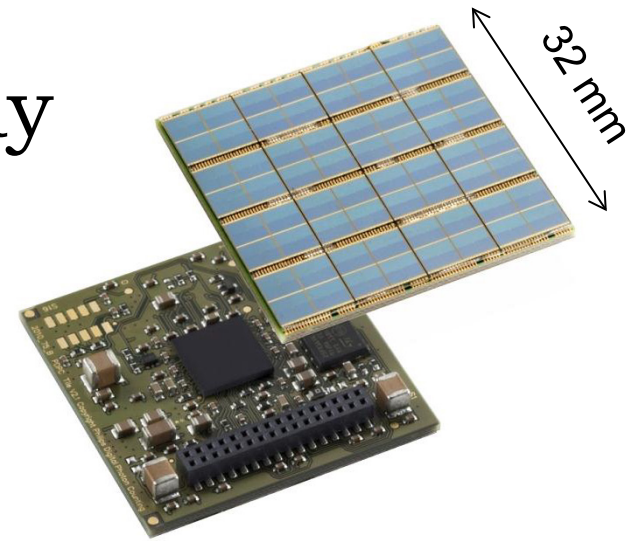


32 mm x 32 mm x 22 mm
monolithic LYSO:Ce
crystal on digital silicon
photomultiplier (dSiPM)
array



Monolithic scintillator operating principle

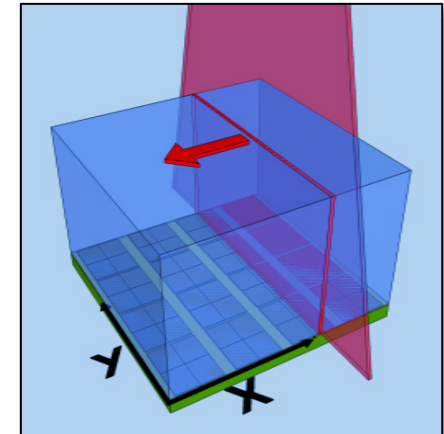
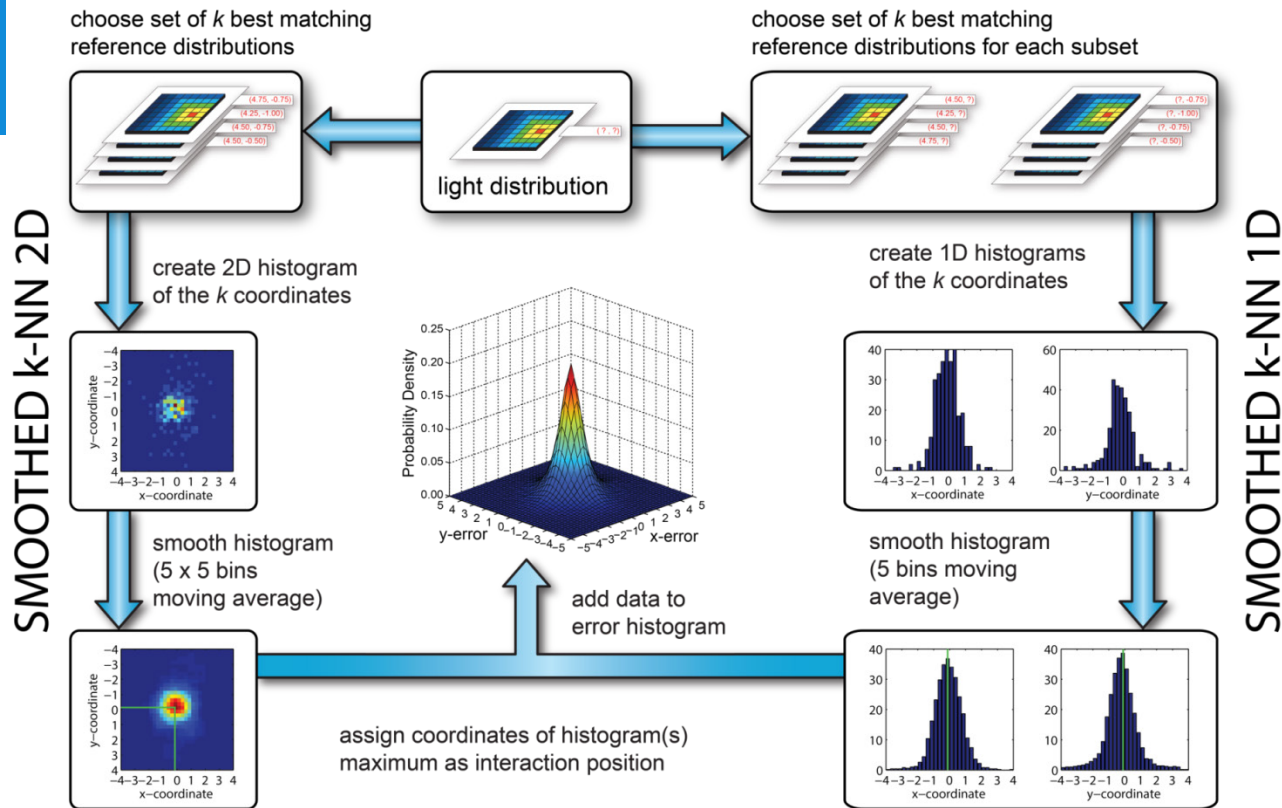
Readout: digital SiPM array



- ++ small single-photon time jitter
- ++ negligible noise at the single photon level
- ++ ~ 30% photon detection efficiency
- + MR-compatible

16 Si chips (4 x 4)
→ 16 time stamps
→ 64 pixel values
(no. of counts)

k -NN position estimation



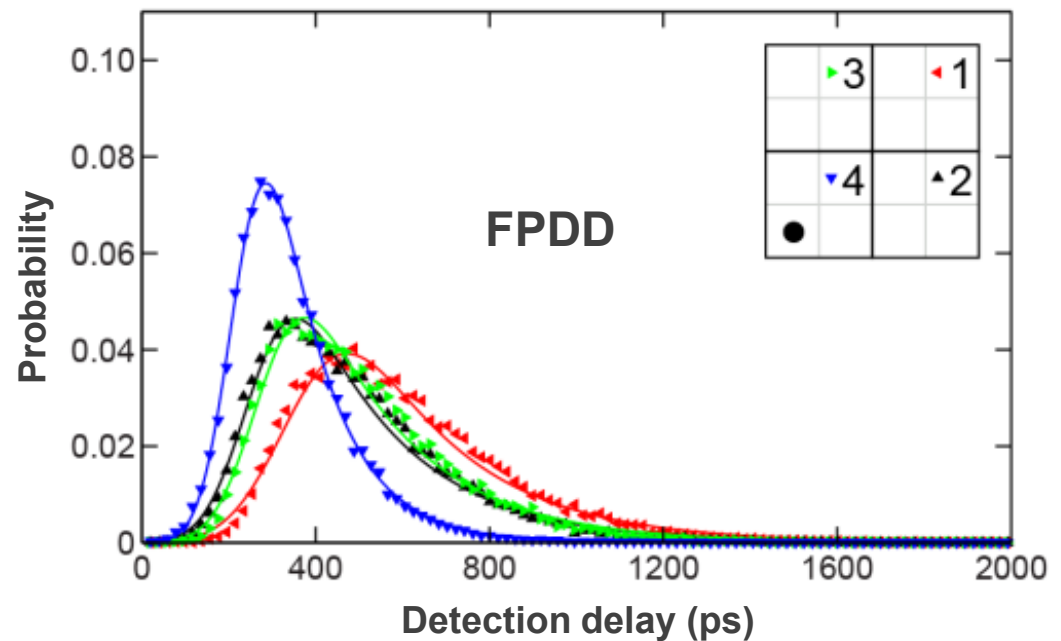
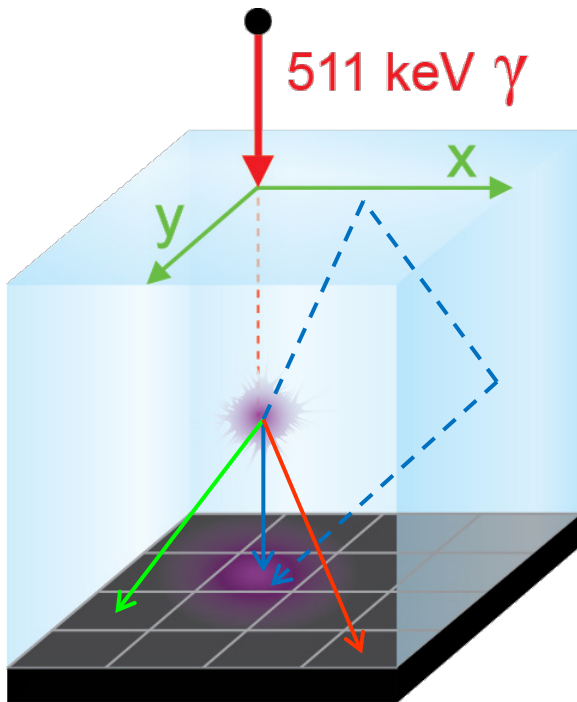
**Fast calibration:
separate collection
of reference
events for each
coordinate using a
fan-beam**

Smoothed k -NN 2D: Van Dam et al,
Phys Med Biol 56, 4135-45, 2011

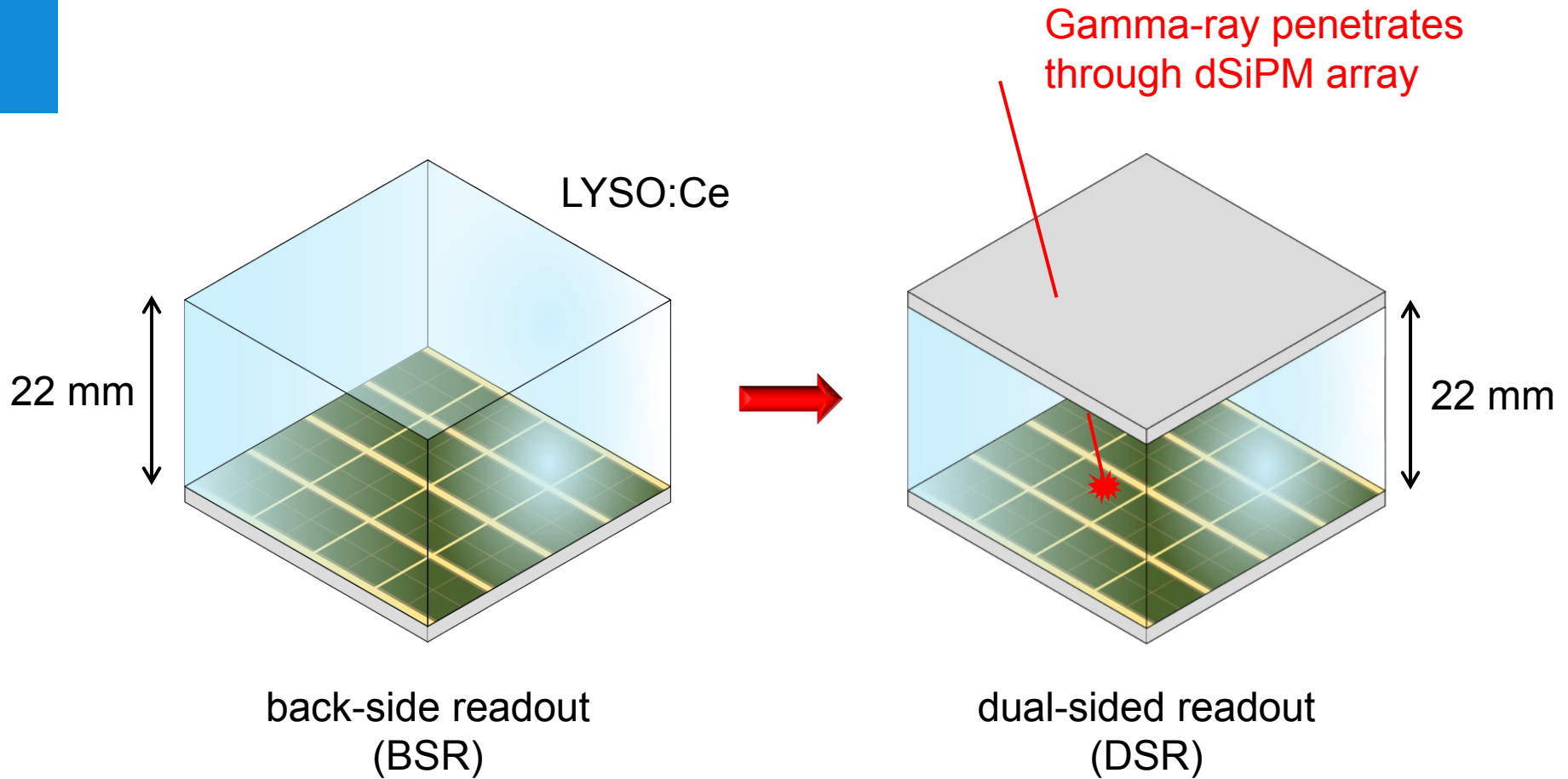
Smoothed k -NN 1D: Borghi et al,
IEEE Trans Nucl Sc 62, 57-67, 2015

ML interaction time estimation (MLITE)

MLITE enables sub-200 picosecond timing in monolithic crystals using measured first photon detection delay (FPDD) probability distribution for each (x,y,z) position

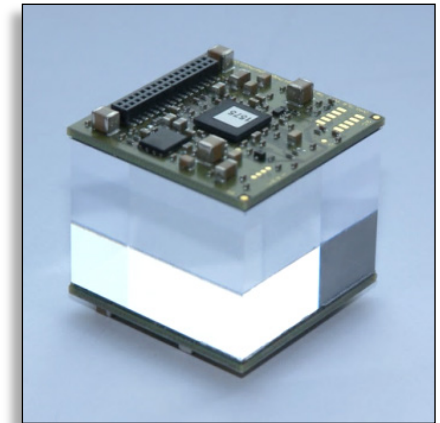


Back-side vs. dual-sided readout



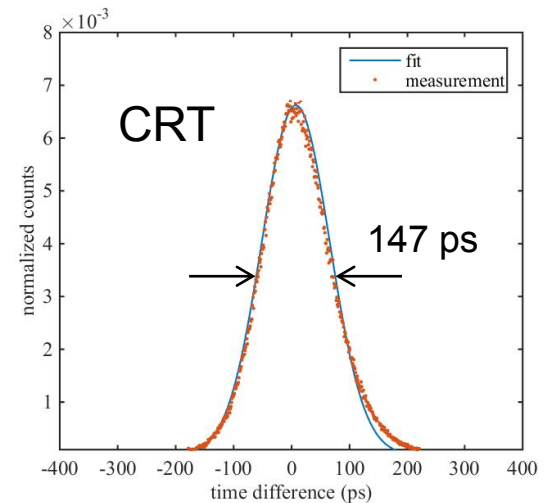
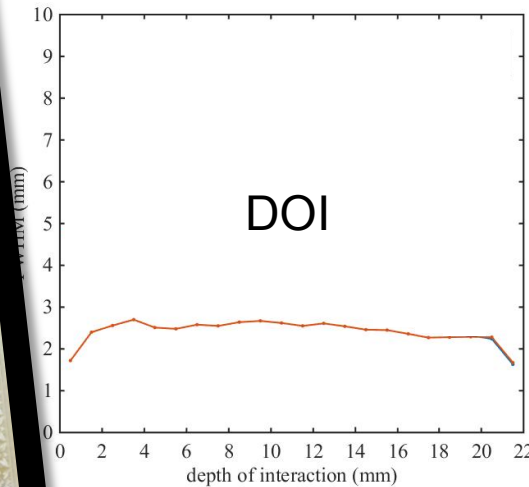
Performance summary

A practical and cost effective detector for PET/CT and PET/MRI with ultrahigh spatial resolution, CRT, and detection efficiency



32 mm x 32 mm x 22 mm commercial-grade LYSO:Ce with double-sided dSiPM readout

Performance parameter	State of the art	BSR monolithic	DSR monolithic
Energy resolution	< 12%	~10%	~10%
Spatial resolution	~4 mm	1.7 mm	1.1 mm
DOI resolution	None	3.7 mm	2.4 mm
Coincidence resolving time	325 - 400 ps	214 ps	147 ps



B.J. Peet et al, SNMMI 2015



Table-top gantry

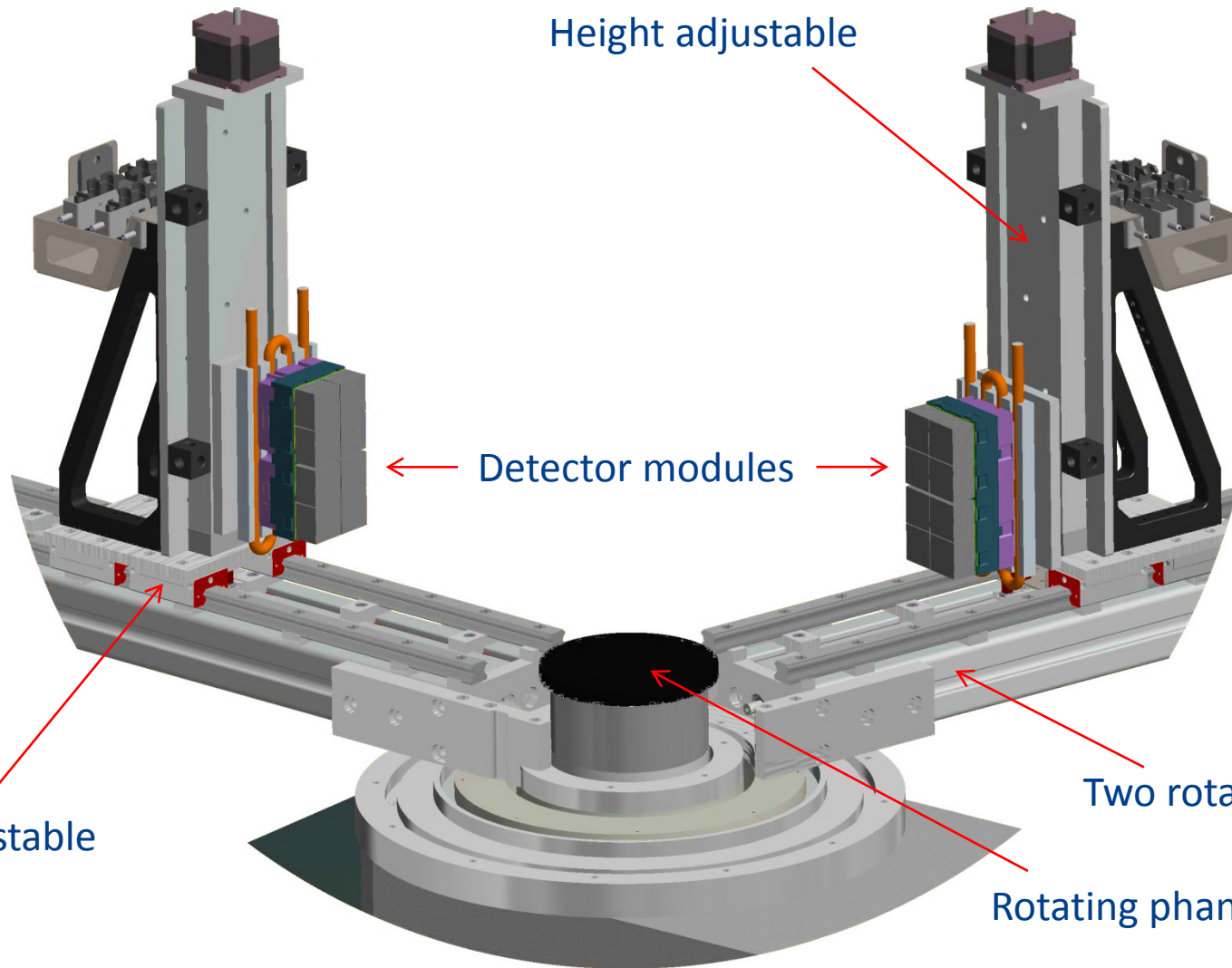
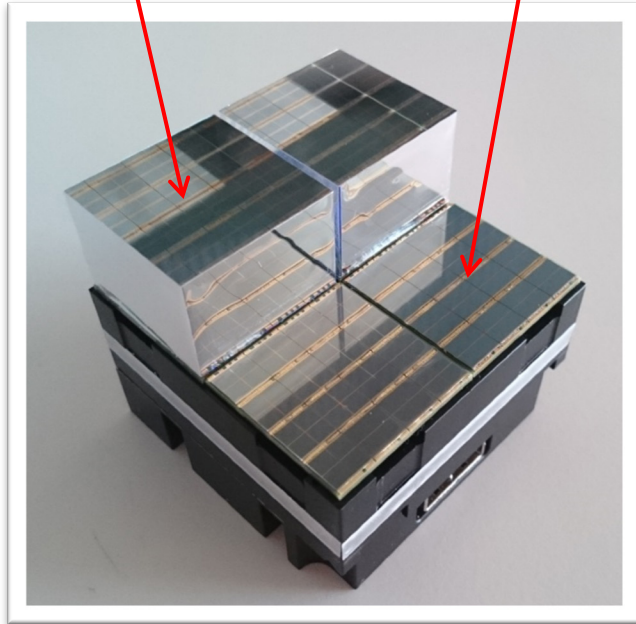


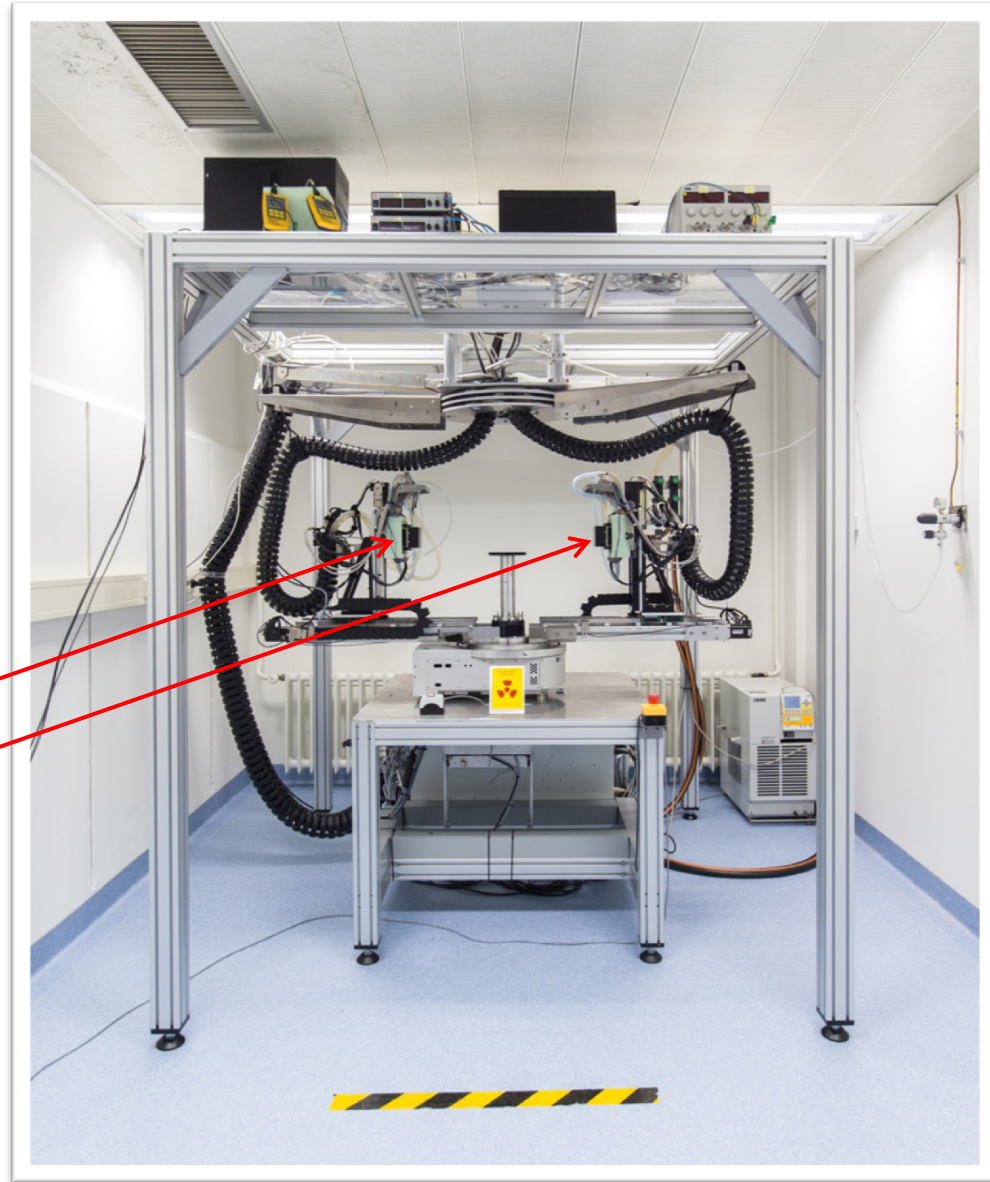
Table-top gantry

32 mm x 32 mm x 22 mm LYSO:Ce

DPC 3200-22-44



Detector module with 4 monolithic scintillators (2 mounted)



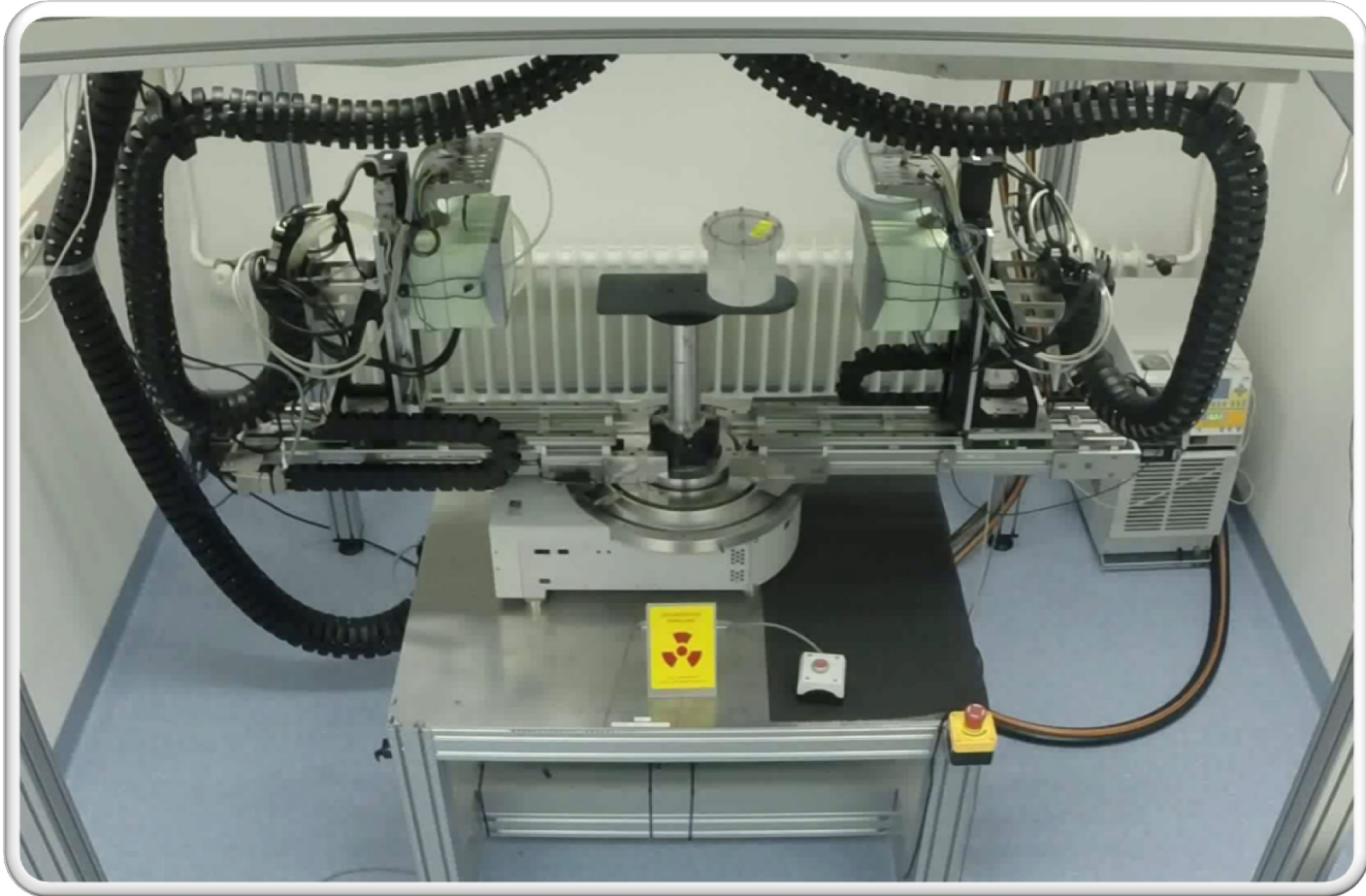
Na-22 filled Derenzo phantom



In-house made Derenzo phantom. Rod diameters 2.5 mm, 3.0 mm, 3.5 mm, 4.0 mm, 5.0 mm and 7.0 mm. Filled with ~20 MBq of Na-22 in H₂O.

Table-top gantry

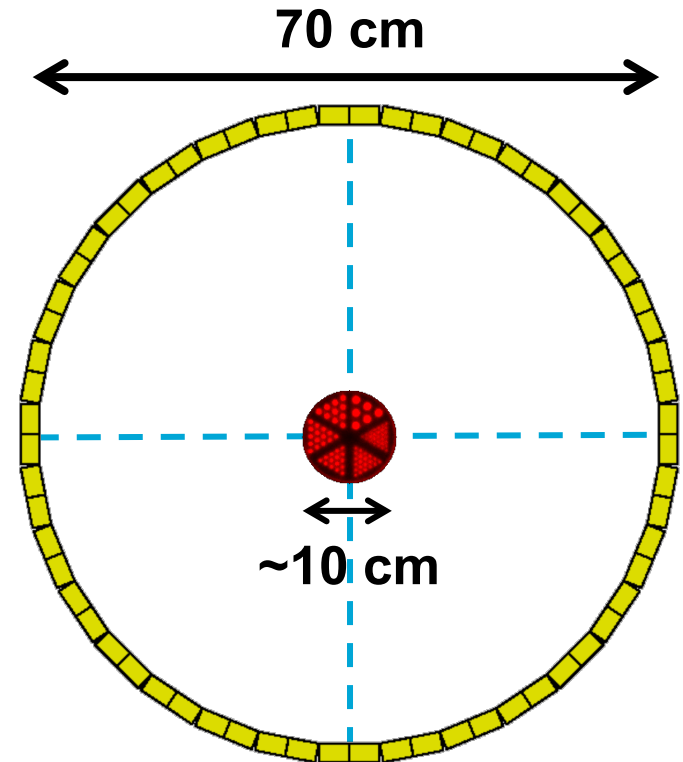
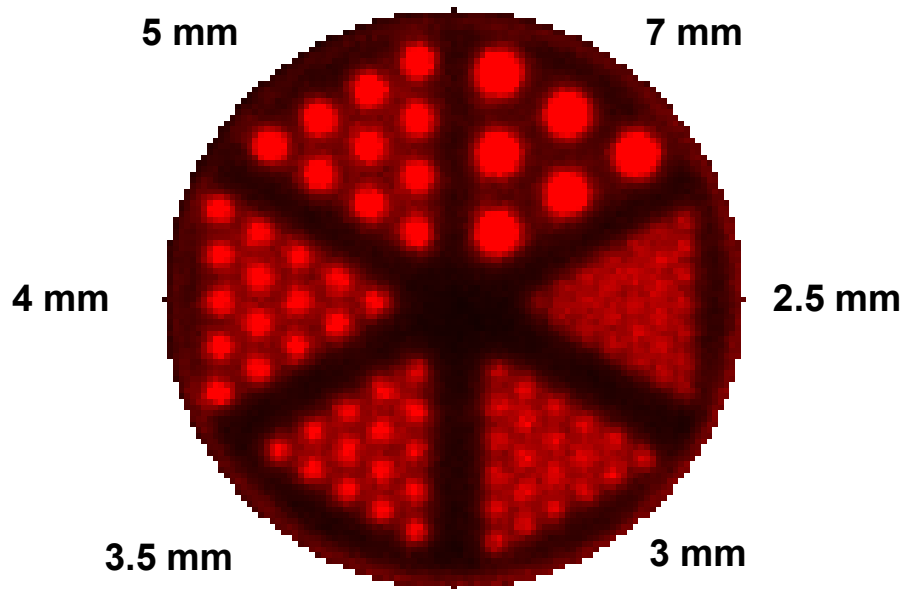
Time-lapse: full-ring image acquisition of Na-22 filled Derenzo phantom



Na-22 filled Derenzo phantom (ML-EM)

ML-EM reconstructed image of Na-22 filled Derenzo phantom

PRELIMINARY



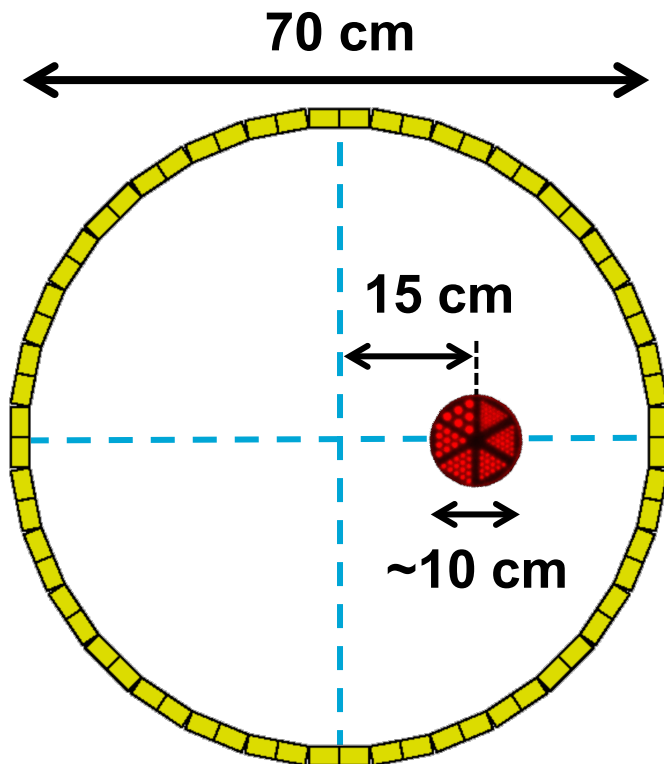
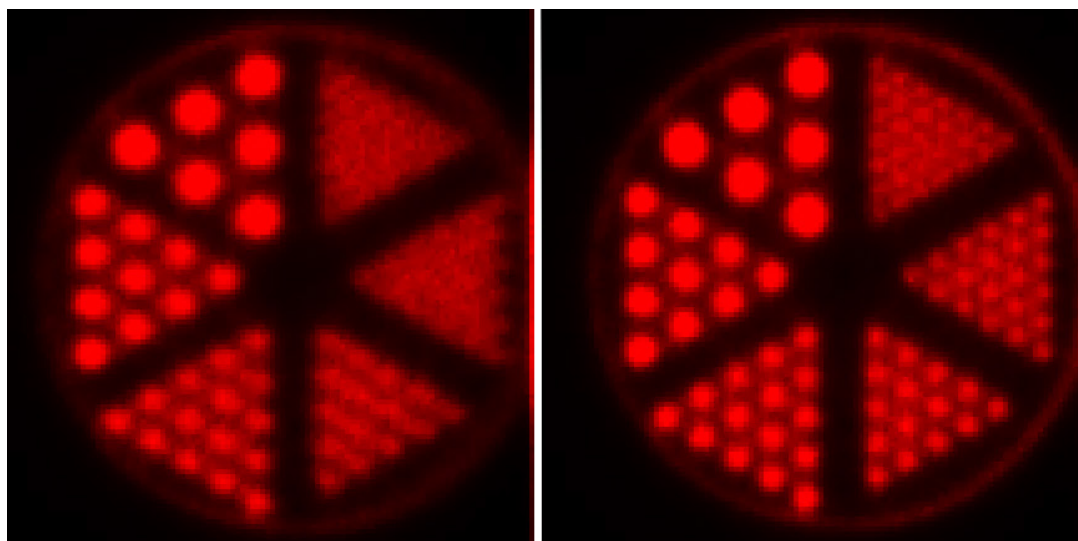
Sub-3 mm spatial resolution & 212 ps timing in a whole-body clinical TOF-PET geometry using monolithic LYSO:Ce scintillators and digital SiPM arrays

Na-22 filled Derenzo phantom (ML-EM)

PRELIMINARY

No DOI

DOI



ML-EM reconstructed images of the Na-22 filled Derenzo phantom at 15 cm off-center, with (right) and without (left) depth-of-interaction (DOI) correction.

Paediatric PET

Princess Máxima Centre for paediatric oncology (PMC)

- National treatment and research centre
- Opening of new building planned 2017
- Treatment of almost all children with cancer within The Netherlands
- Increase cure rate to > 90%
- Reduce side effects of treatment



Princess (now queen) Máxima at the opening of the Centrum Princess Máxima Centre

PMC Partner Institutes:



Hubrecht
Institute



Example application: paediatric

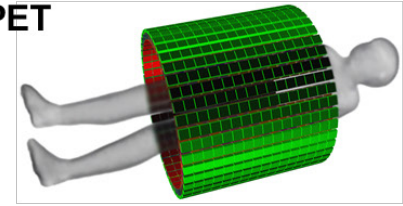


GEMINI-TF

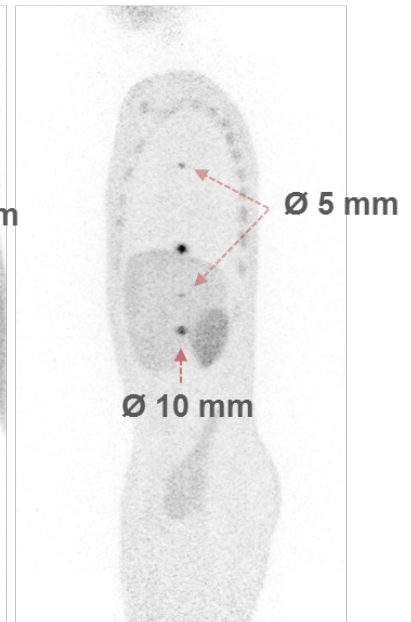
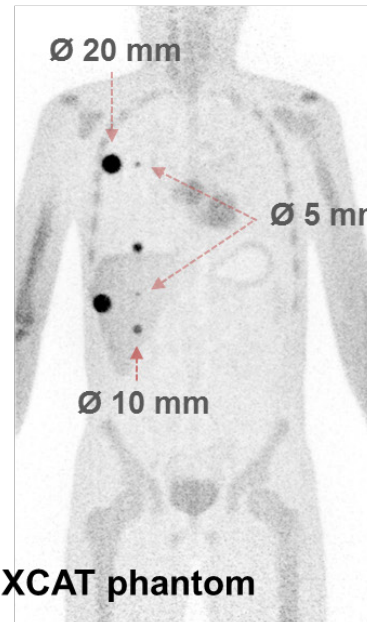
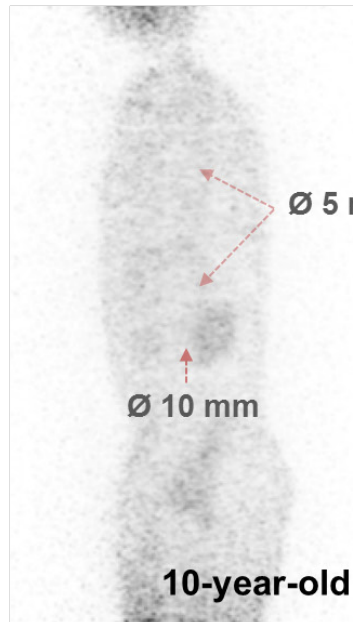
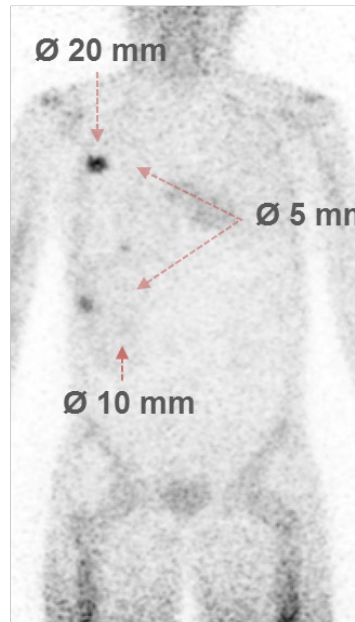
- 4 mm pixels
 - 600 ps TOF
 - 18 cm axial length
 - 90 cm bore
- 200 × 200 × 340
2 × 2 × 2
10

- no. bed positions: 9
- T_{acq} per bed position (s): 20
- total T_{acq} : 3 min.
- total counts: 9 M
- image matrix size (pix.): 200 × 200 × 340
- image voxel size (mm³): 2 × 2 × 2
- LM-OSEM iterations: 10

Paediatric PET



- 1.5 mm FWHM
- 150 ps TOF
- 54 cm axial length
- 53 cm bore



10-year-old boy XCAT phantom

Equal low activity of 40 MBq & equal total acquisition time of only 3 min



Thank You