

SPECT/CT INSTRUMENTATION AND CLINICAL APPLICATIONS

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Medical Physics Workshop PET Development and Applications

Ohrid, 6th september 2015



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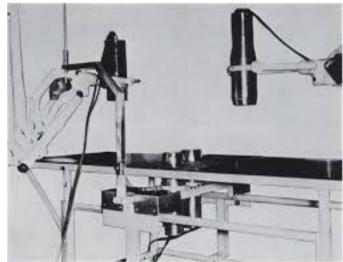
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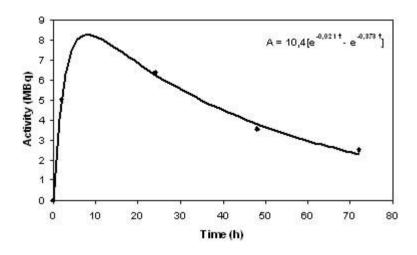


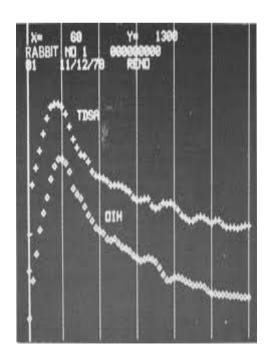
SCINTILATION PROBES





TIME ACTIVITY CURVES

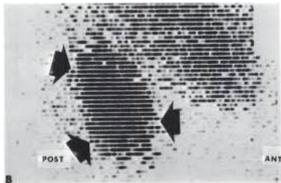


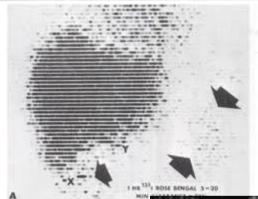


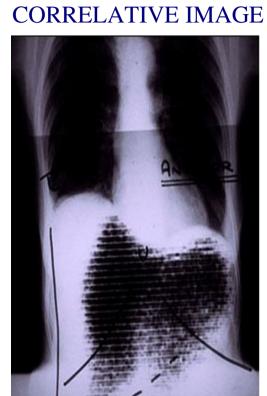
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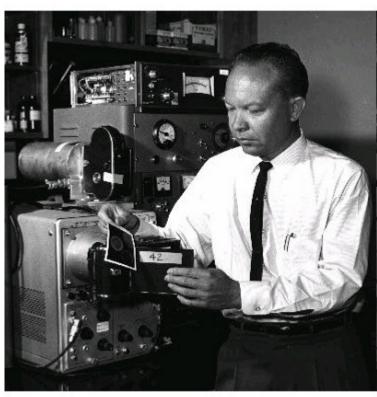
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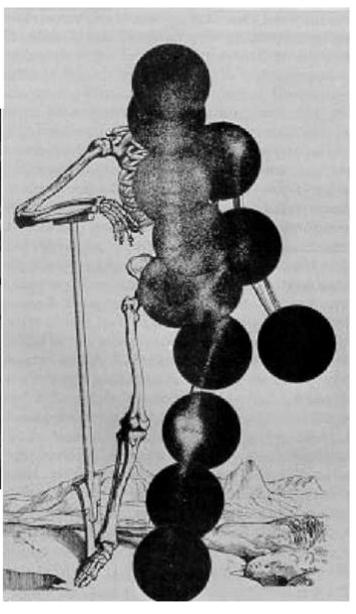




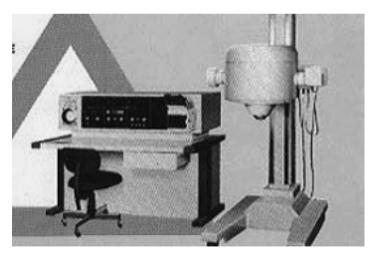


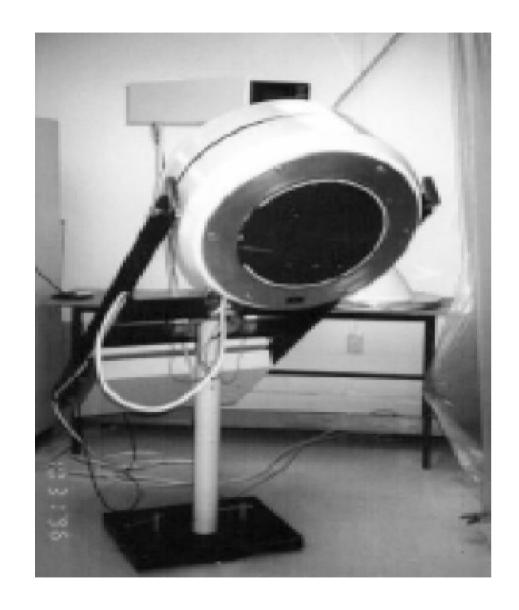


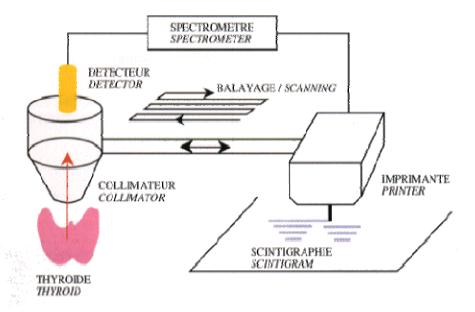


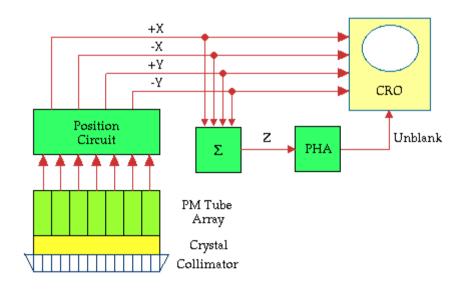






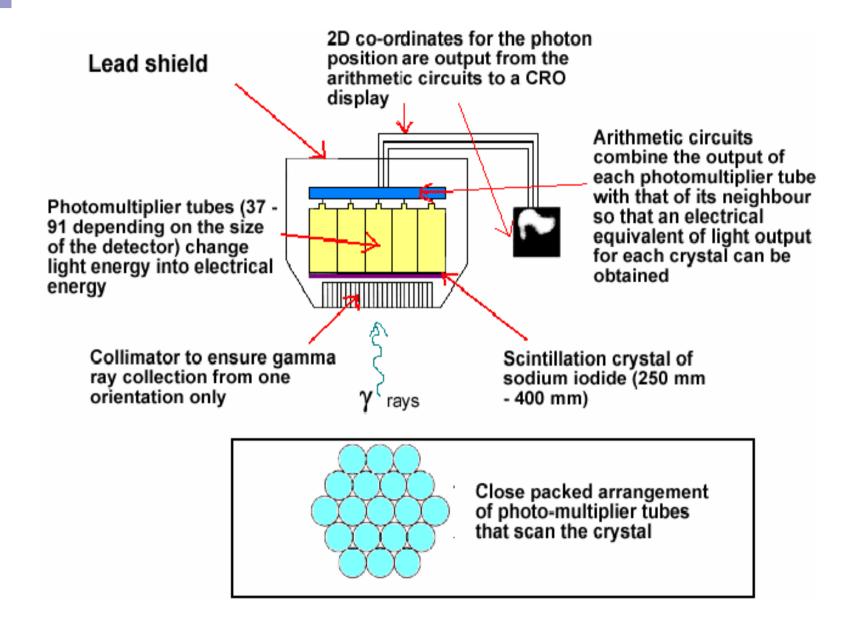


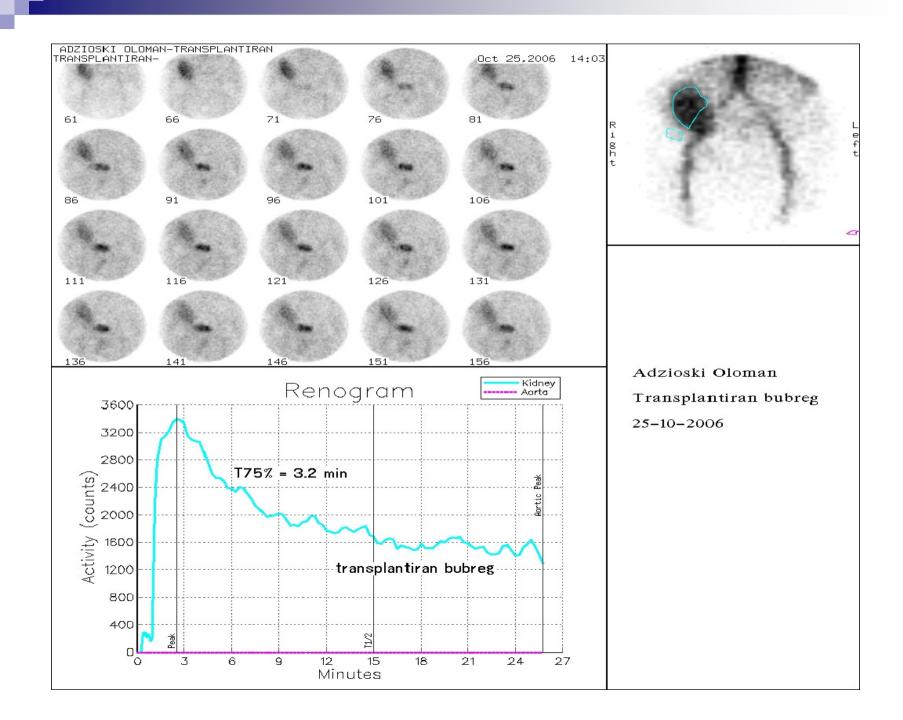


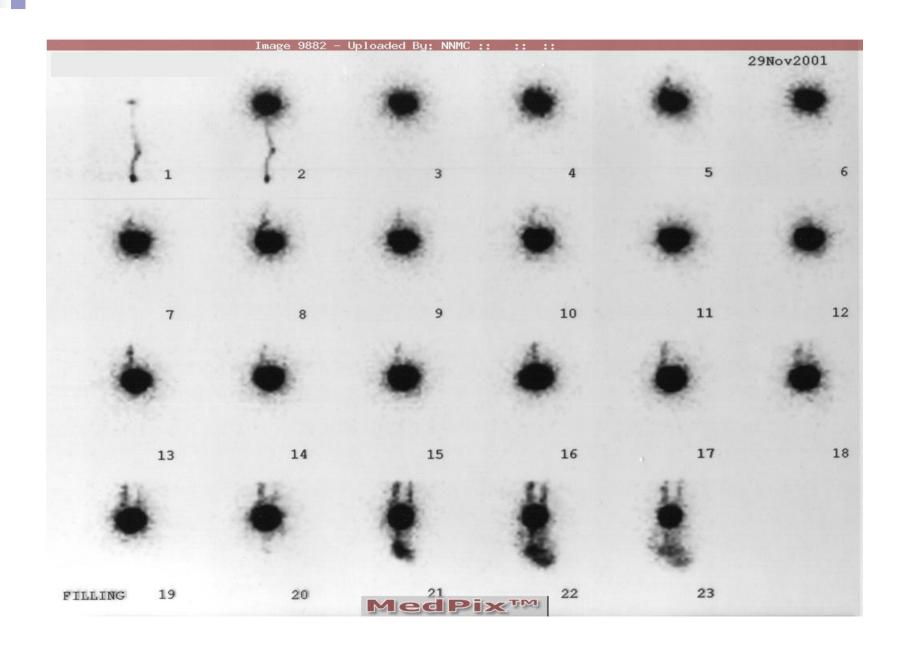




Organ containing radiopharmaceutical



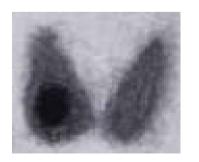


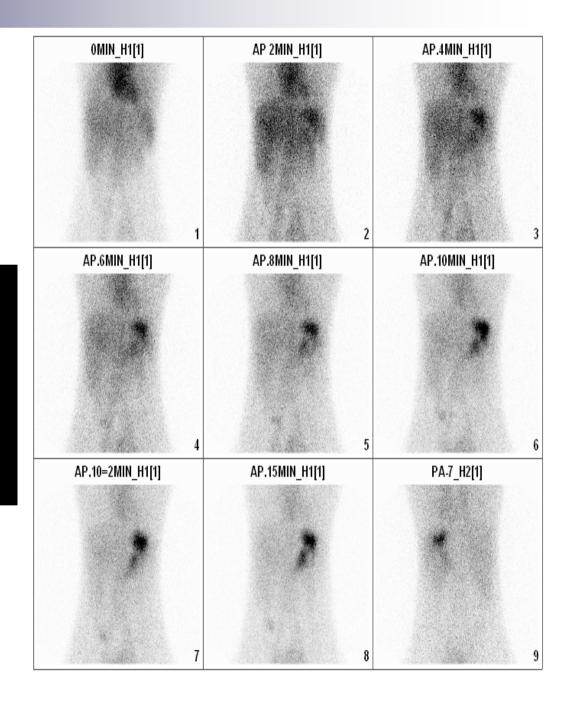




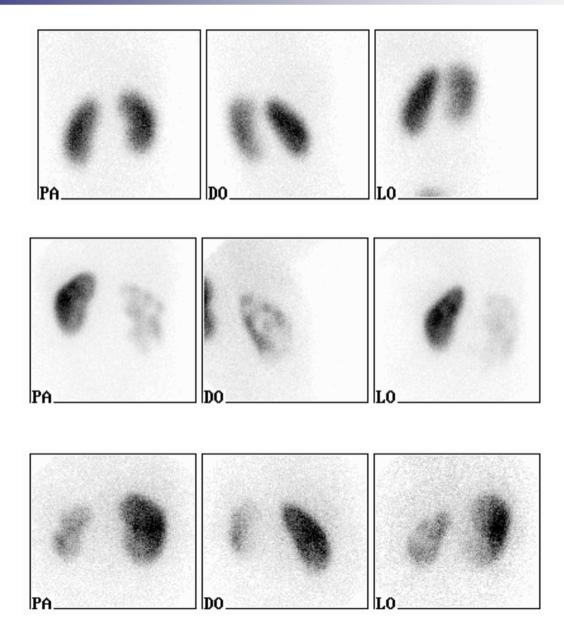


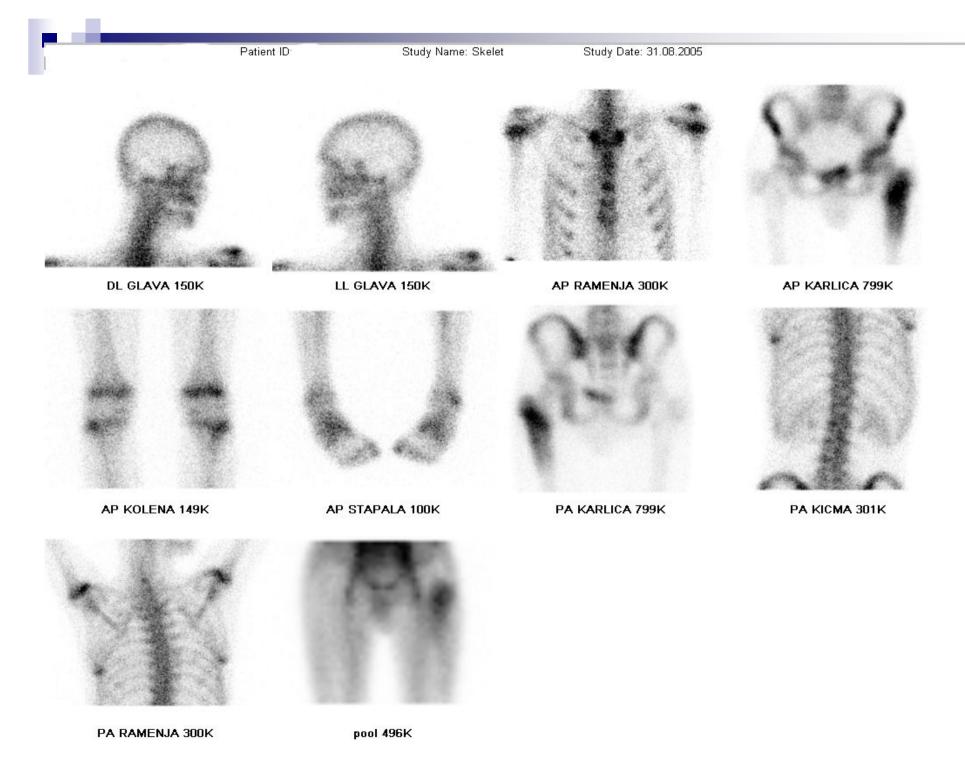


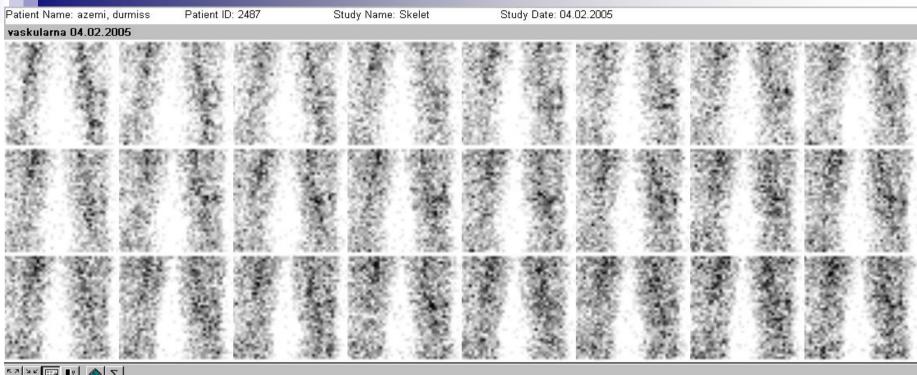








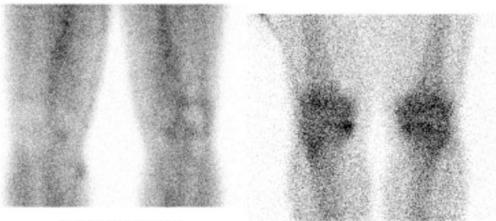






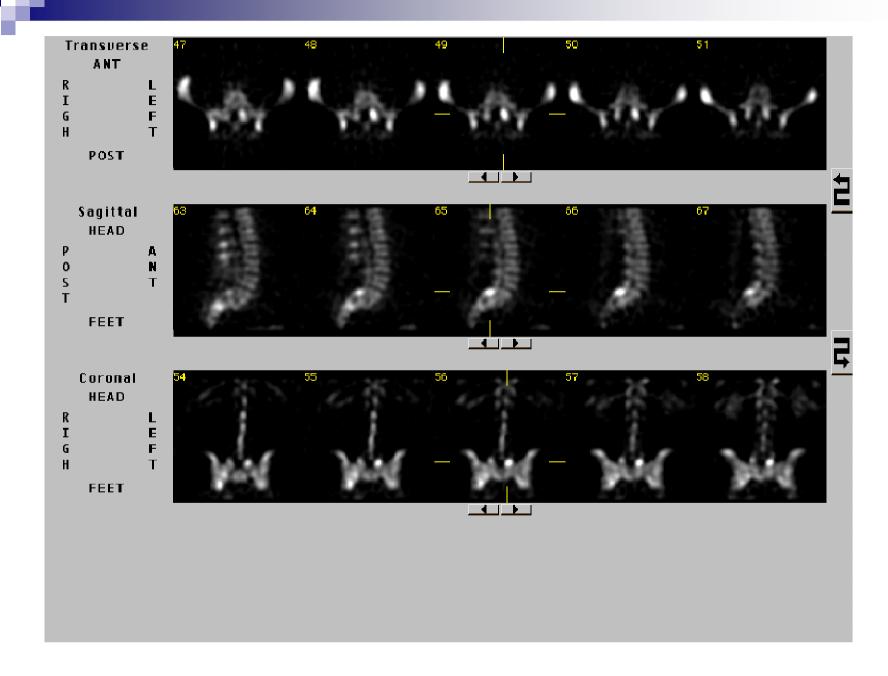
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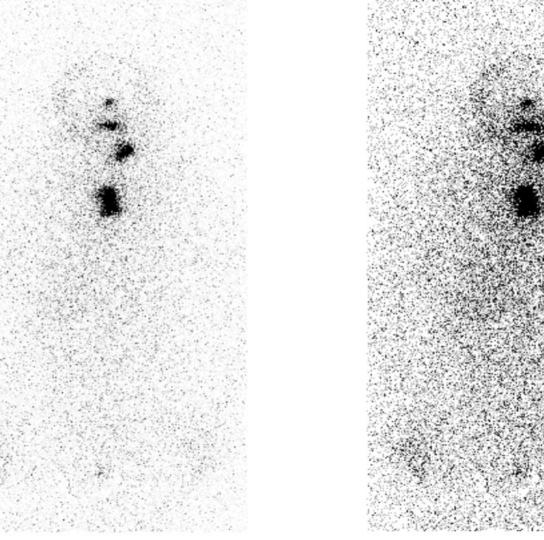
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pool 500K Duration:134sec

AP 152K Duration:124sec







SPECT/CT

- > SPECT principles
- > Iterative SPECT reconstruction
- Advantage of SPECT/CT hybrid imaging
- Current clinical applications of SPECT/CT



SPECT princples

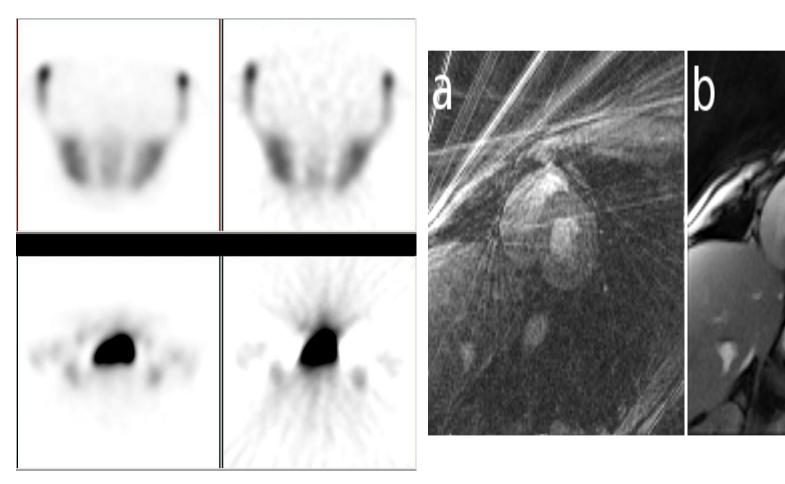
- Flat panel *head* used for detection
- Acquisition time depending on
 - -detector, collimator
 - -size of the imaging region
 - -amount of activity available

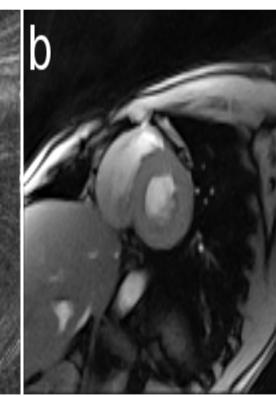
Data Acquisition - low energy all purpose collimator/high resolution; 30sec/projection in 64 projections over 360 degrees on single-headed gamma camera

- -acquisition processing
- -uniformity correction
- -filtered backprojection



Iterative reconstruction / filtered back projection







Dual Isotope Imaging with SPECT

- Bone scan with 99mTc-MDP and Thyroid imaging with 123I/thyroid and parathyroid imaging
- □99mTc (140.5 keV)
- □ 123I (159.0 keV)

Energy window (99mTc) 140 keV Energy window (123I) 160 keV

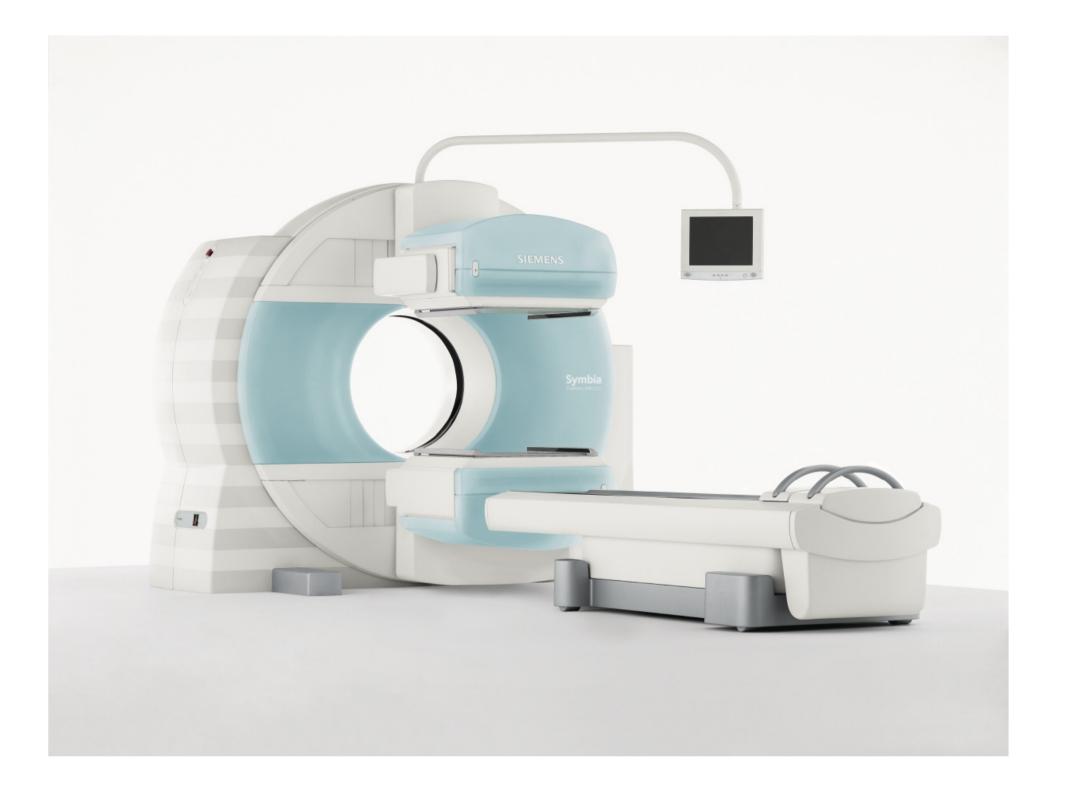
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SPECT radionuclides

- 99 m**Tc** T1/2 = 6 hr, γ = 140 keV
- 111 In T1/2 = 67 hr; γ 's = 172, 245 keV
- 123 **I** T1/2 = 13 hr, $\gamma = 159 \text{ keV}$
- 67 **Ga** T1/2 = 78 hr; γ 's = 93, 184, 296 keV
- 201 **Tl** $^{11/2}$ = 73 hr, 70 keV X-rays, γ = 167 keV
- 131 **I** T1/2 = 193 hr, $\gamma = 364 \text{ keV*}$
- 153 Sm T1/2 = 46 hr, $\gamma = 103 \text{ keV*}$

^{*} used for internal therapy (β -) as well!!!







BENEFITS OF FUSION IMAGING

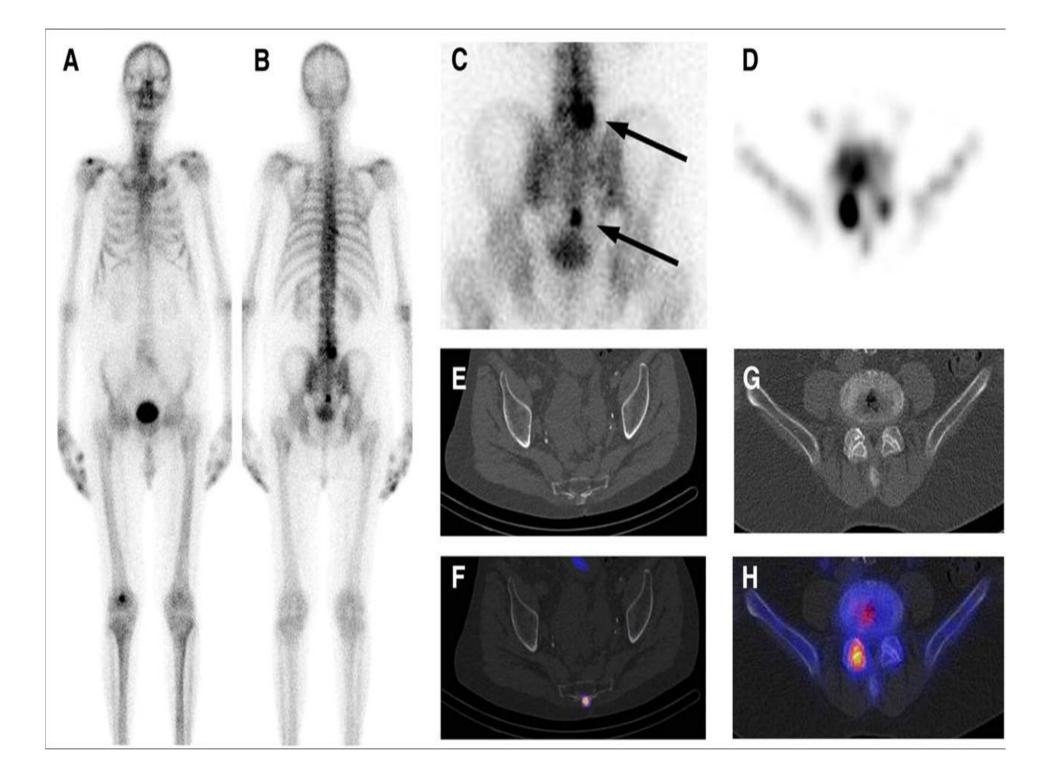
- Increased sensitivity and specificity
- Precise anatomic localization of findings seen in nuclear imaging
- Identify normal physiologic activity which can be misinterpreted as disease
- Patient convenience. Eliminates need for multi-day imaging protocol

	without CT attenuation correction	with CT attenuation correction
cardiac		
skeletal		
brain		



MAIN INDICATIONS FOR SPECT/CT

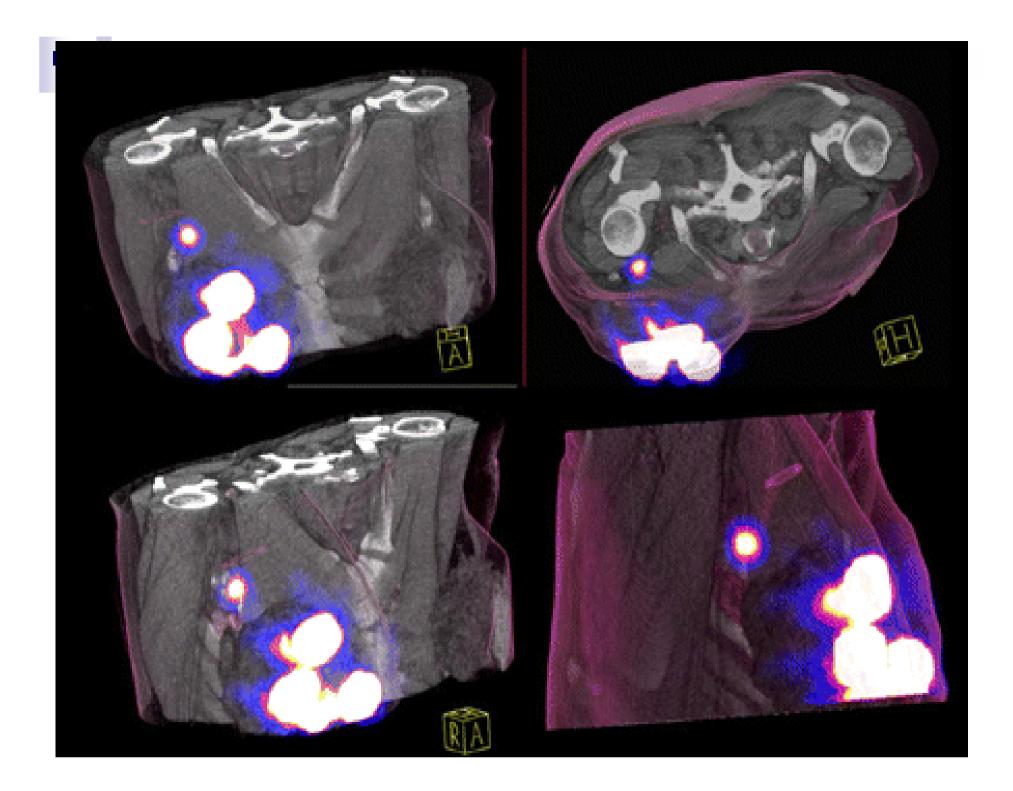
- Bone Scanning
- Graft Infections
- Cardiac Imaging
- Parathyroid Imaging
- Lymphoscintigraphy
- Tumor and mass localization
- Patients with abdominal pain
- Thyroid Cancer Staging



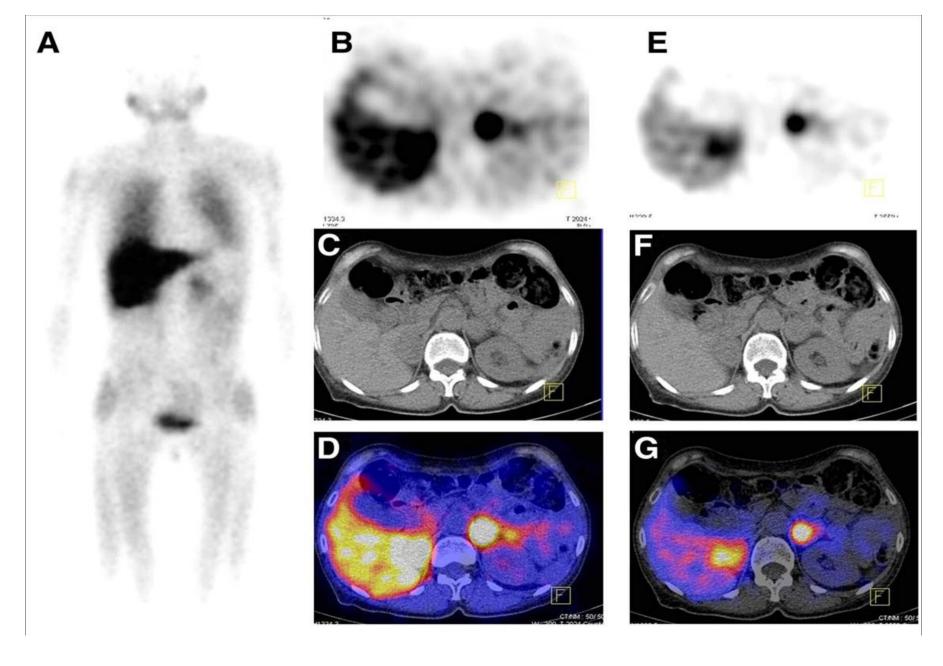


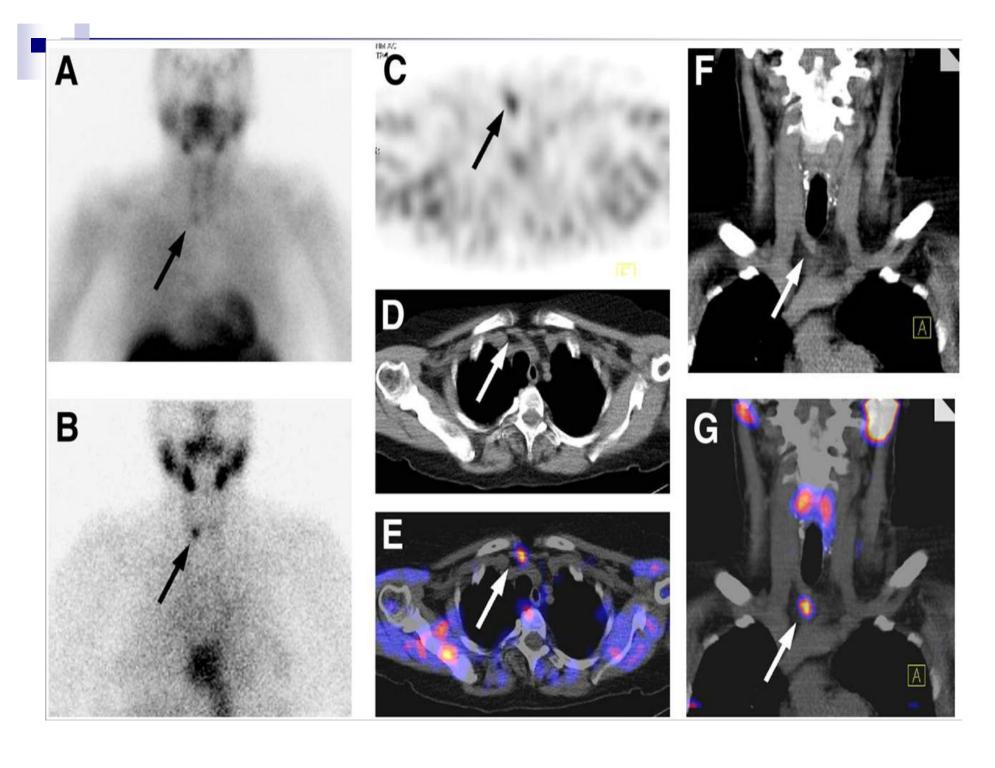
BONE SCANS

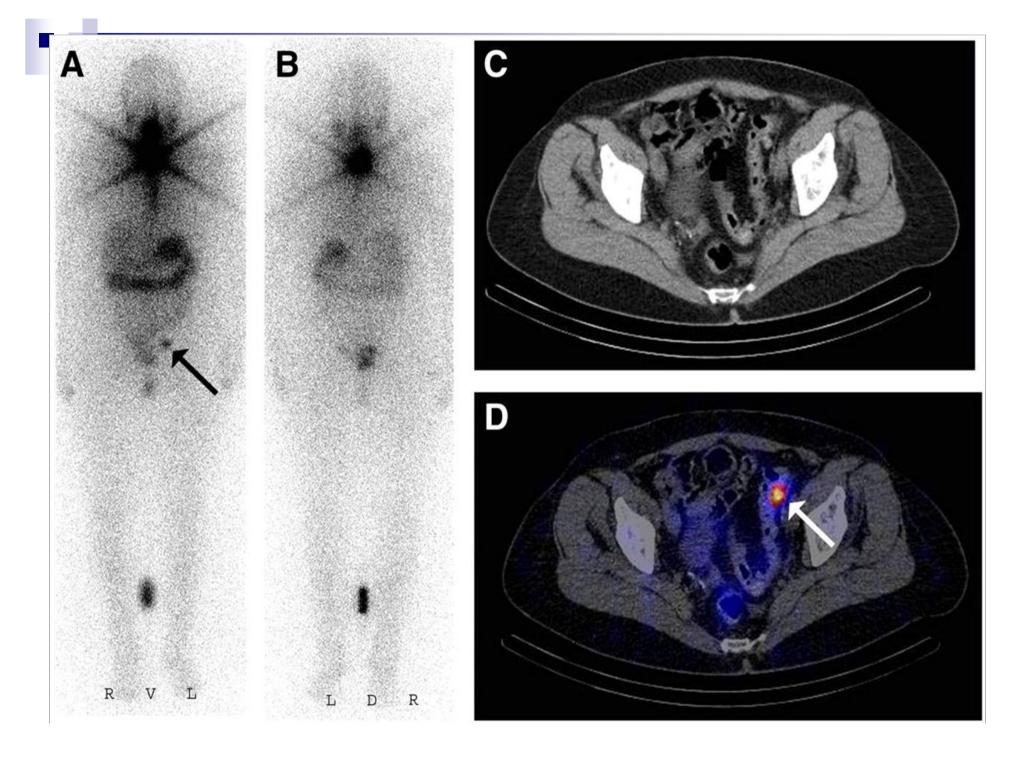
- Highly sensitive, but not often specific
- Benign processes can simulate malignancy
- Neoplastic lesions may occur in distribution suggestive of arthritic change
- Soft tissue abnormalities are usually not detected on routine bone scanning

















THANK YOU. ENJOY THE CONFERENCE!















