



**Minimizing patient-to-patient liver enhancement
variability while personalizing iodine load delivery:
a multicenter multivendor study**

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H G Brat⁽¹⁾ B Rizk⁽¹⁾ B Dufour⁽¹⁾ P Pujadas⁽²⁾ D Fournier⁽¹⁾ F Zanca⁽³⁾

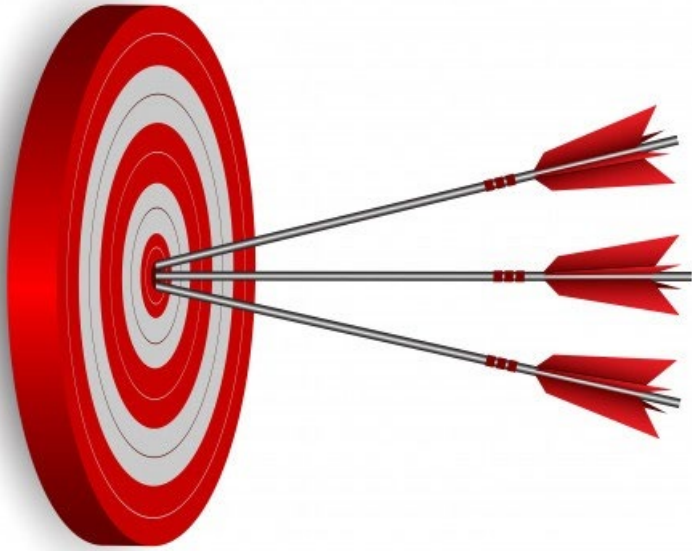
(¹) Groupe 3R, Switzerland (²) GE Healthcare, France (³) Palindromo Consulting, Belgium



Introduction

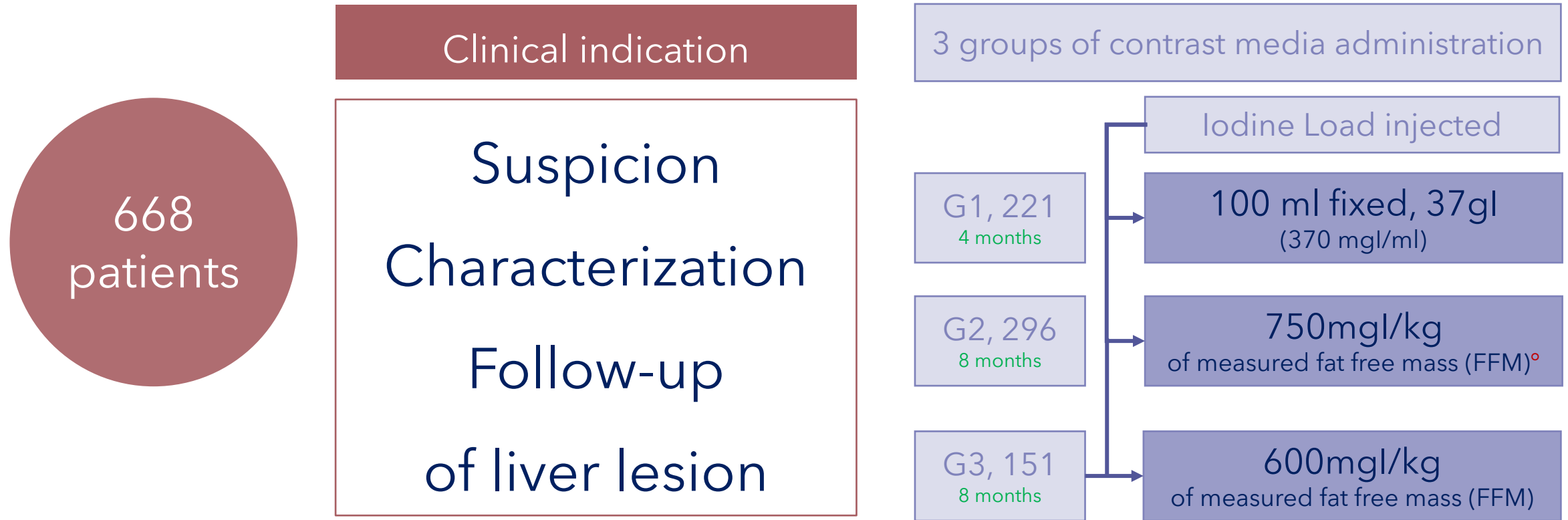
- Contrast-enhanced **MDCT** is used for detection, characterization and follow-up of liver lesions
- **Liver enhancement** across patients is often highly variable (under- to over-enhancement)
- Patient-to-patient **uniformity** of liver enhancement is **essential** for lesion assessment and reporting accuracy in baseline and follow-up CT examinations

Purposes



- To **reduce** patient-to-patient liver parenchyma enhancement **variability**
- To reach a clinical **Target** enhancement, i.e. a diagnostically appropriate level of **50 HU** for all patients

METHODS AND MATERIAL

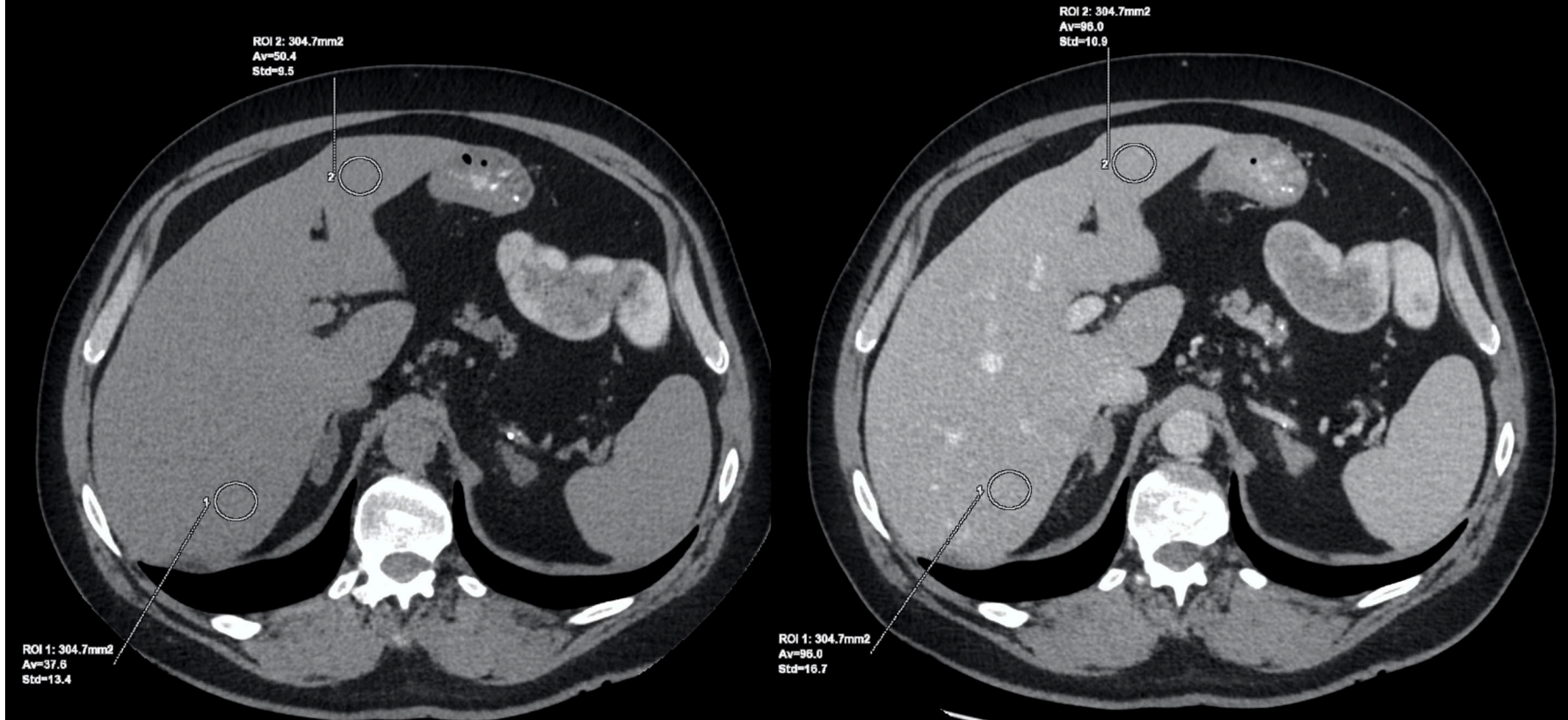


^oThe Optimal Body Size Index with Which to Determine Iodine Dose for Hepatic Dynamic CT: A Prospective Multicenter Study. Awai K et al. Radiology 2016 Mar;278(3):773-81. doi: 10.1148/radiol.2015142941. Epub 2015 Sep 10.

METHODS AND MATERIAL

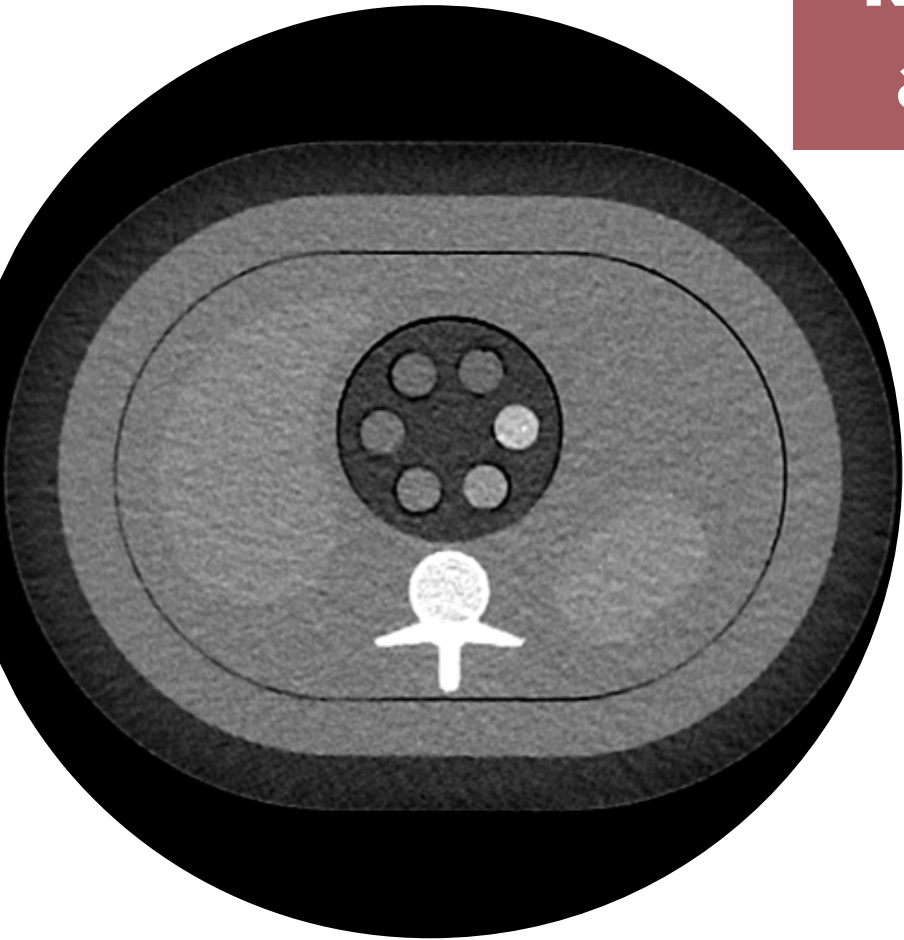
Liver Contrast Enhancement Index

$$CEI = HU_{ROIportal} - HU_{ROIunenhanced}$$



METHODS AND MATERIAL

kV scaling factors measurements using an anthropomorphic phantom (QRM)



QRM abdomen phantom

(Medium and Large)

5 contrast syringes

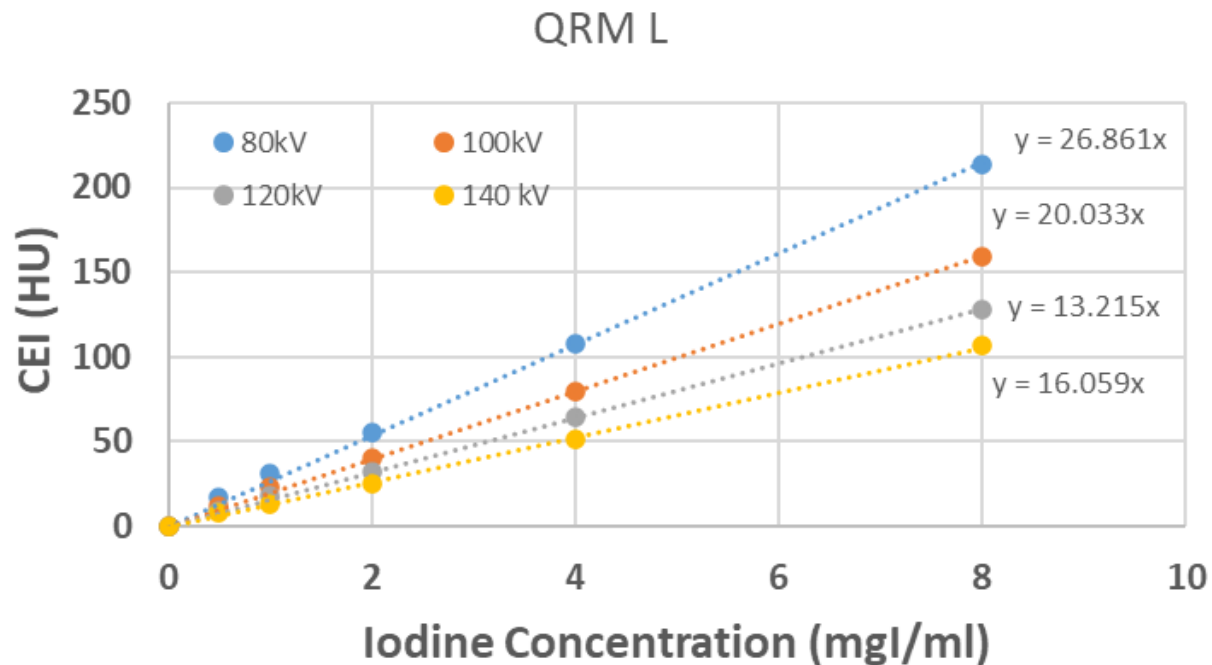
[0.5, 1, 2, 4, 8] mg/ml I₂

1 NaCl syringe

CEI at 80, 100, 120, 140kVp

RESULTS

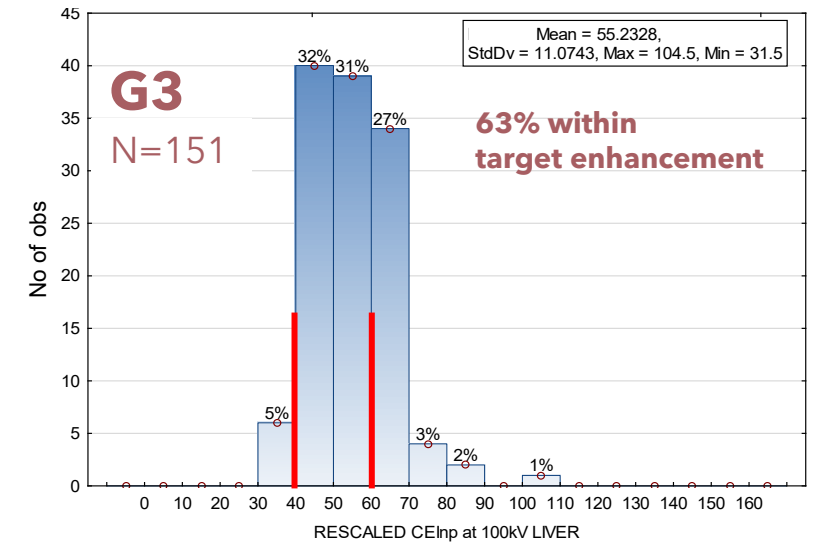
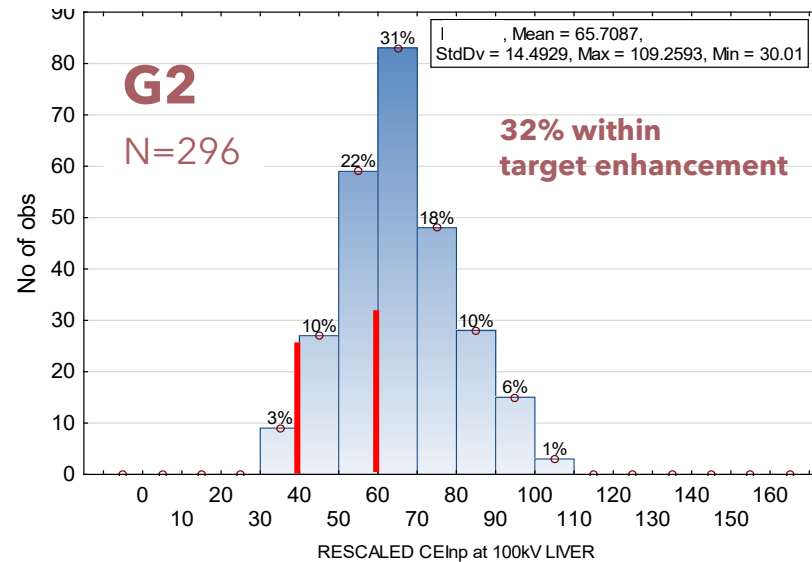
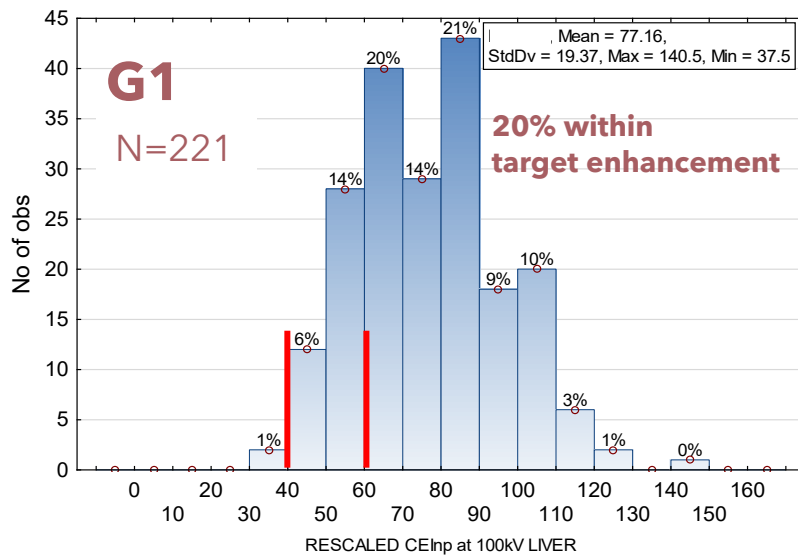
kVp scaling factors



Tube potential (kVp)	Scaling factor	
	Mean	SD
80	0.737	0.030
100	1.000	0.000
120	1.267	0.018
140	1.535	0.016

RESULTS

CEI histograms and SD



Target enhancement was reached in 63% of G3 (G1:20%; G2:32%)
SD was reduced to 11.1% in G3 (19.4%; 14.5%)

WORKFLOW DIAGRAM

10 sites - multivendor CT

Standardized protocols

80 - 140kV

5ml/s injection rate

80 sec portal phase delay

350, 370, 400mg/ml

Dose management Software (Dosewatch™)

2 senior radiologists

impedancemeter (BIA-ACC, Biotekna)

Medical Physics Expert

3 groups of contrast media administration

G1, 221
4 months

Iodine Load injected

100 ml fixed, 37 gI
(370 mgI/ml)

G2, 296
8 months

750mgI/kg of measured
fat free mass (FFM)

G3, 151
8 months

600/kg of measured fat
free mass (FFM)

Liver Contrast enhancement CEI
measured

kV scaling factors measurements using
an anthropomorphic phantom (QRM)

Comparison among 3 groups
(one-way ANOVA or Kruskal-Wallis) for:

Mean iodine dose (gI)

Median CEI@100kV

Variance of the CEI distributions and
comparison to a target CEI of 50 HU



CONCLUSION

- We improved patient-to-patient liver parenchyma enhancement uniformity with a three-steps strategy to optimize and personalize our contrast media injection protocol according to kV, patient habitus and Iodine concentration
- We reached the target enhancement for 63% of the patients

