

Monte Carlo simulations in emission tomography and GATE: an overview

Irène Buvat¹, Delphine Lazaro¹
for the OpenGATE collaboration²

¹ U678 INSERM, Paris, France

² <http://www.opengatecollaboration.org>

Outline

- Evolution of the use of MC simulations in ET since 1995
- Evolution of the codes used for MC simulations in ET since 1995
- New features in MC simulators in ET
- New applications for MC simulations
- Upcoming developments in MC simulations
- Conclusion

Evolution of the use of MC simulations in ET since 1995

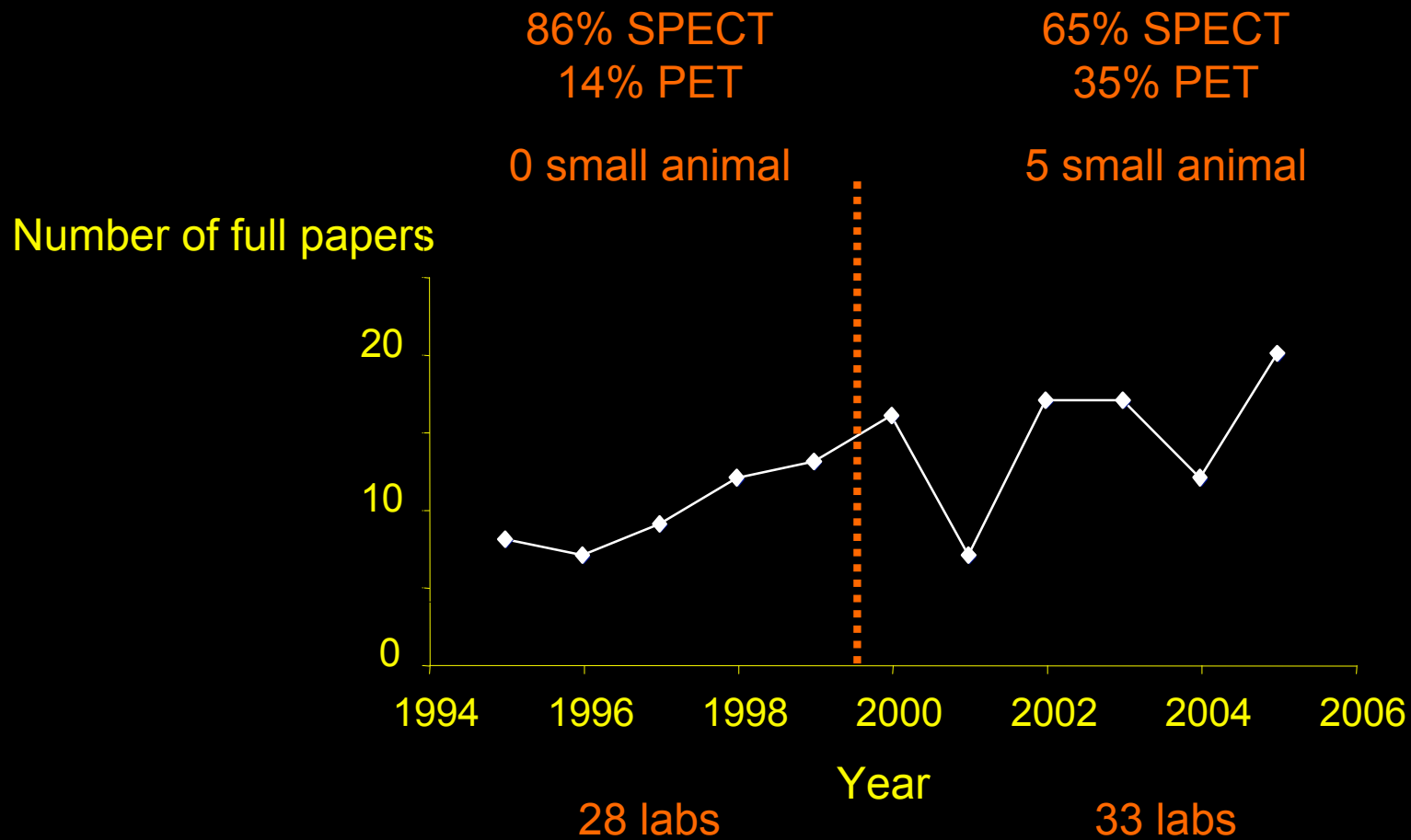
Important role in SPECT and PET, for optimizing detector design, designing and assessing acquisition and processing protocols.

- Zaidi, Relevance of accurate Monte Carlo modeling in nuclear medical imaging. *Med Phys* 26 (1999) 574-608
- Buvat and Castiglioni, Monte Carlo simulations in SPET and PET. *Q J Nucl Med* 46 (2002) 48-61



Evolution of the use of MC simulations in ET since 1995

- 666 entries since 1995 at the date of the search (July 1995)
- Use of MC simulations to produce SPECT and PET images: 130 entries



Evolution of the codes used for MC simulations in ET since 1995

1995-1999

- 14 different codes:
 - 10 « home-made »
 - 4 publicly released or available from authors

2000-2004

- 15 different codes:
 - 8 « home-made »
 - 7 publicly released or available from authors

No « standard » code for Monte Carlo simulations in SPECT and PET

Most frequently used

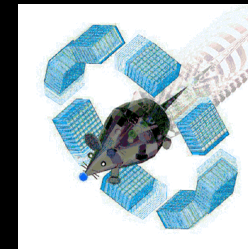


SimSET



SIMIND

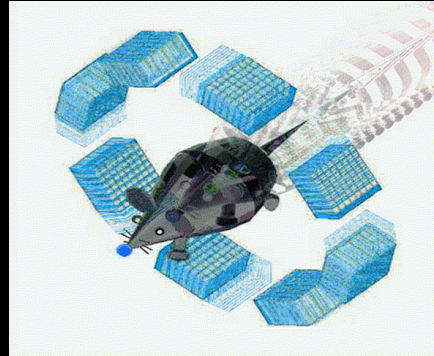
And recently



GATE

Penelope

Most recent code: GATE



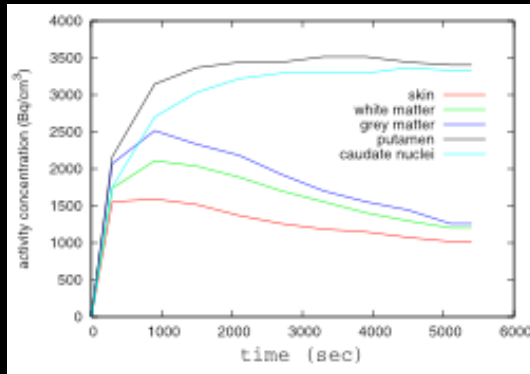
- Motivation in 2001: provide a public code
 - based on a standard code to ensure reliability
 - enabling SPECT and PET simulations (possibly even more)
 - accommodating almost any detector design (including prototypes)
 - modeling time-dependent processes
 - user-friendly
- Developed by the OpenGATE collaboration (21 labs)
- Based on GEANT4
- Publicly released May 2004: <http://www.opengatecollaboration.org>
- More than 400 subscribers to the Gate users mailing list
- IEEE MIC 2004: 61 proceedings involving MC simulations in SPECT and PET
 - 11 used GATE, 9 used GEANT4, 8 used SimSET, 4 used SIMIND

Monte Carlo simulations today

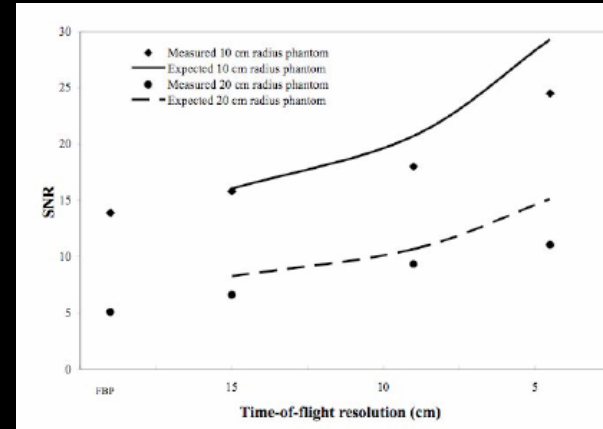
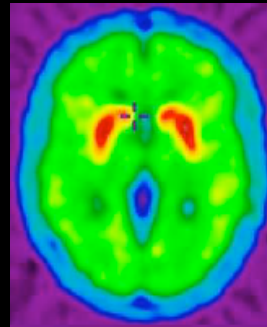


Modeling time dependent processes

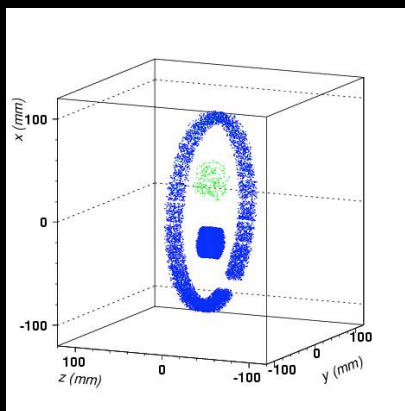
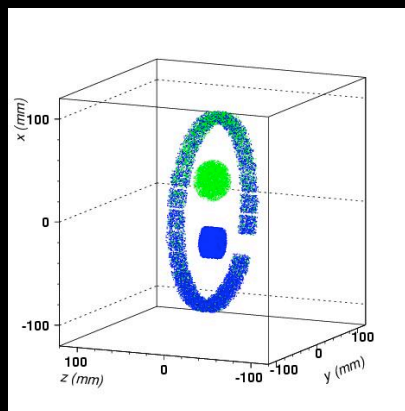
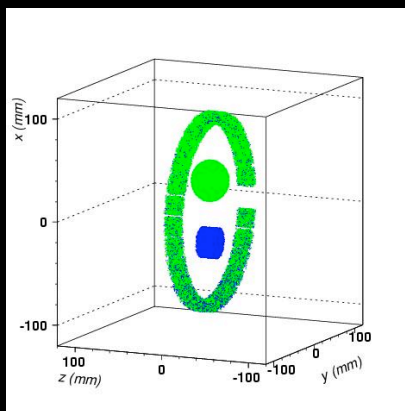
Possible using SORTEO, SimSET and GATE



Reilhac et al, IEEE TNS 2005



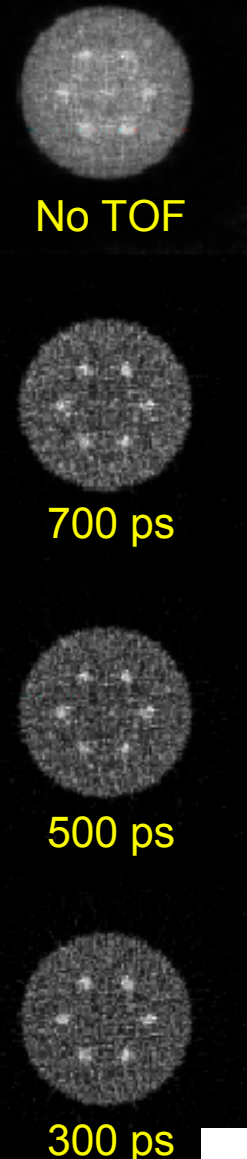
Harrison et al, IEEE MIC Conf Rec 2004



Santin et al, IEEE TNS 2003

^{15}O (2 min)
 ^{11}C (20 min)

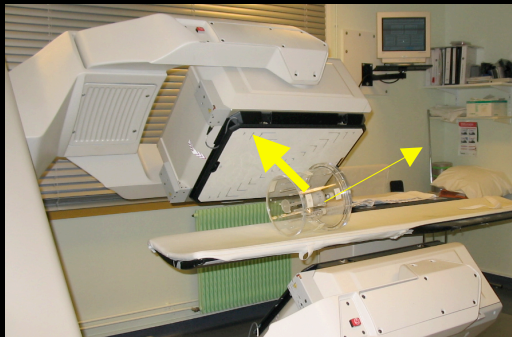
Groiselle et al, IEEE MIC Conf Rec 2004



Increasing the throughput of the simulations

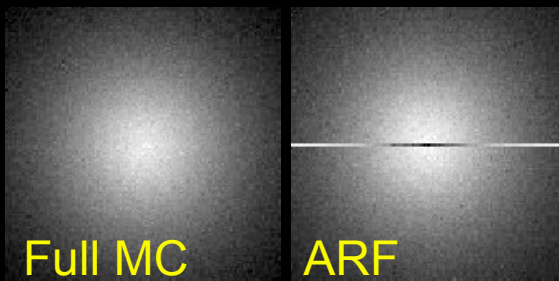
Using acceleration methods

- Variance reduction techniques such as importance sampling (e.g. in SimSET)
→ speed-up factors between 2 and 15

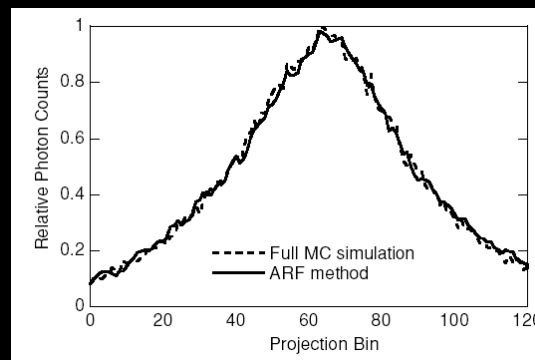


- Fictitious cross-section (or delta scattering)

Combining MC and non MC modeling

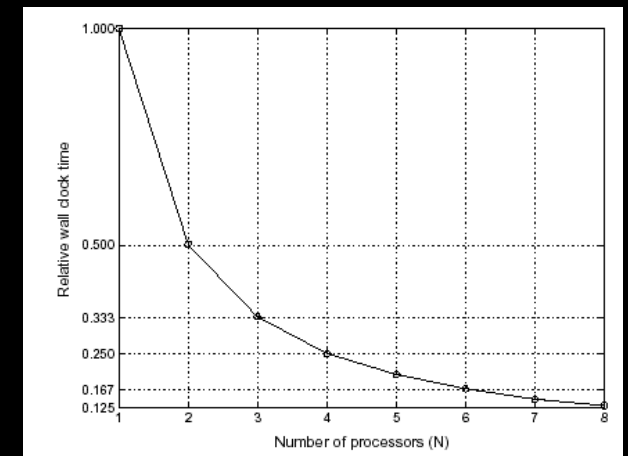
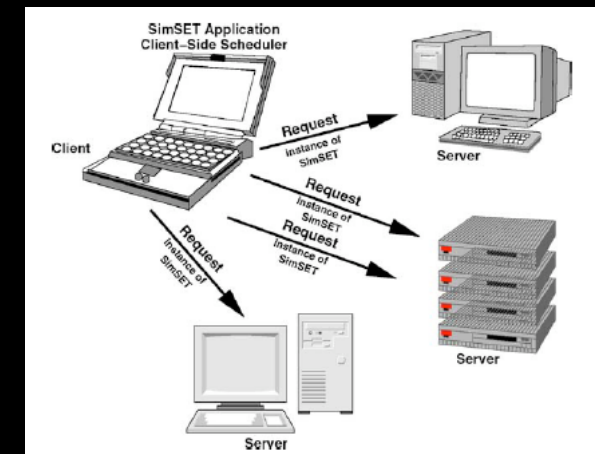


Song et al, Phys Med Biol 2005



increase in efficiency > 100

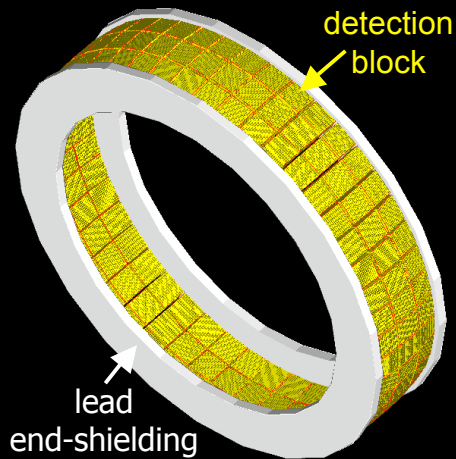
Parallel execution of the code



Thomason et al, Comp Methods Programs Biomed 2004

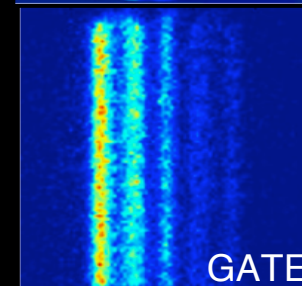
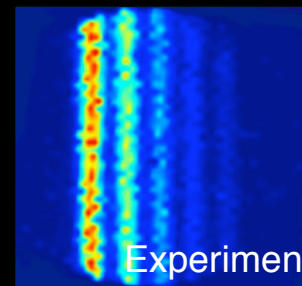
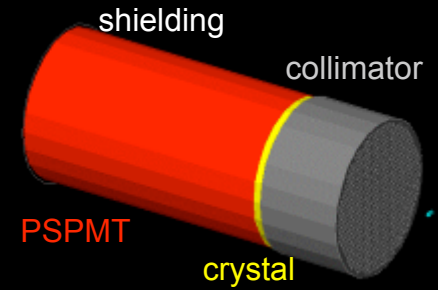
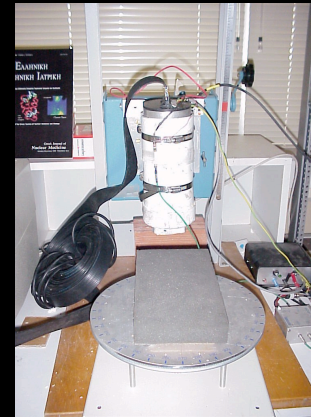
Modeling original detector designs

Non-conventional geometries

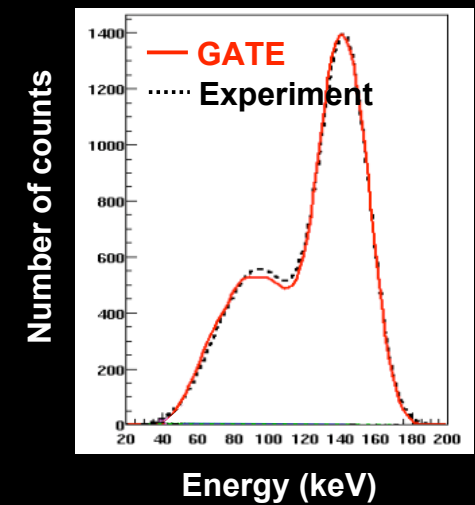


Spherical geometry of the Hi-Rez PET scanner
Lazaro et al, SNM 2005

Prototypes



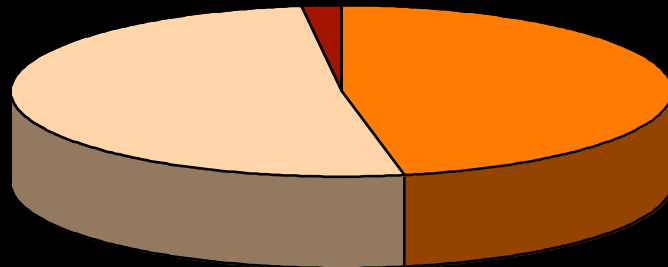
Energy spectrum



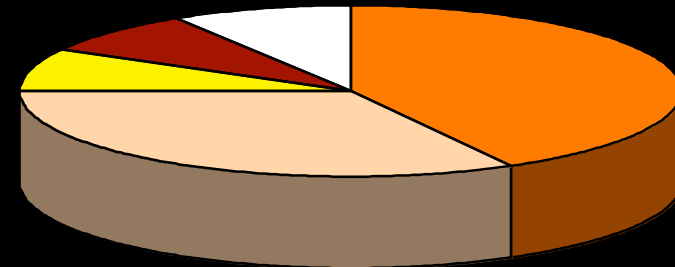
Lazaro et al, Phys Med Biol 2004






New applications for Monte Carlo simulations

1995-1999

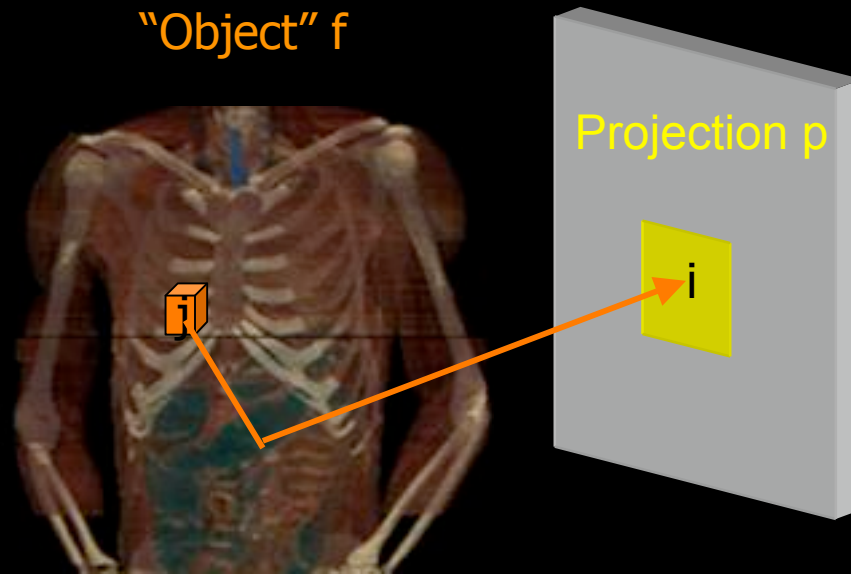


2000-2004



-  Design and assessment of correction and reconstruction methods
-  Study of an imaging system response
-  Use in the very imaging process
-  Data production for evaluation purpose
-  Description and validation of a code

Using Monte Carlo simulations for calculating the system matrix



$$p = R f$$

$R(i,j)$: probability that a photon emitted in voxel j be detected in pixel i

Calculating R using Monte Carlo simulations:

- for non conventional imaging design (small animal)
- to account for fully 3D and patient-specific phenomena difficult to model analytically (mostly scatter)

Using Monte Carlo for feeding database

<http://www.ibfm.cnr.it/mcet/index.html>

<http://sorteo.cermep.fr>

The MC-ET database

#	Description of study	Scanner	Available Data	Total events
▶ 1	18F-FDG Brain study: normal subject	GE-Advance	Sinograms	3318047
▶ 2	18F-FDG thorax study: thyroid tumour with metastases in the abdomen	GE-Advance	Sinograms	1210779
▶ 3	18F NEMA uniform cylinder: 20x18 cm	GE-Advance	Sinograms	4500951
▶ 4	18F hot sphere cylinder: 20x14 cm	GE-Advance	Sinograms	4814214
▶ 5	18F NEMA 8 cm off-centered line source in water	GE-Advance	Sinograms	2138901
▶ 6	18F uniform cylinder: 14x75 cm	ADAC-CPET	Sinograms	2144551
▶ 7	18F uniform cylinder: 35x75 cm	ADAC-CPET	Sinograms	97956
▶ 8	18F NEMA uniform cylinder: 20x18 cm	ADAC-CPET	Sinograms	19742
▶ 9	18F NEMA 20 cm off-centered line source in air	CPS-HR+	Sinograms	96010
▶ 10	18F NEMA centered line source in air	CPS-HR+	Sinograms	78994
▶ 11	18F NEMA centered line source in water	CPS-HR+	Sinograms	207690
▶ 12	18F NEMA 8 cm off-centered line source in water	CPS-HR+	Sinograms	293841
▶ 13	18F NEMA uniform cylinder: NEMA 20x18 cm	CPS-HR+	Sinograms	284759
▶ 14	18F Zubal phantom: thorax	CPS-HR+	Sinograms, images	1945948
▶ 15	18F Zubal phantom: abdomen with lesions	CPS-HR+	Sinograms, images	2250675
▶ 16	18F-FDG oncological patient without attenuation: liver with lesions (lesions to background 3:1)	CPS-HR+	Sinograms, images	22186058
▶ 17	18F-FDG oncological patient :liver with lesions (lesions to background 3:1)	CPS-HR+	Sinograms, images	18026320
▶ 18	18F-FDG oncological patient without attenuation: liver with lesions (lesions to background 4:1)	CPS-HR+	Sinograms, images	22787362
▶ 19	99mTc NEMA centered line source in air	ELSCINT Helix dual-head	Projections	507285
▶ 20	99mTc NEMA off-centered line source in air	ELSCINT Helix dual-head	Projections	516296

Downloads [[buvat0](#)]

Jacob
Zubal
Patient 01
Patient 02
Patient 03
Patient 04
Patient 05
Patient 06
Patient 07
Patient 08
Patient 09
Patient 10
Patient 11
Patient 12
Patient 13
Patient 14
Patient 15

MRI

Labels

[18F]FDG PET Images [18F]FDG PET Sino

[18F]DOPA PET Images [18F]DOPA PET Sino

[11C]Raclopride PET Images [11C]Raclopride PET Sino

Transmission Sino

Common : [Blank](#)

Common : [Normalization](#)

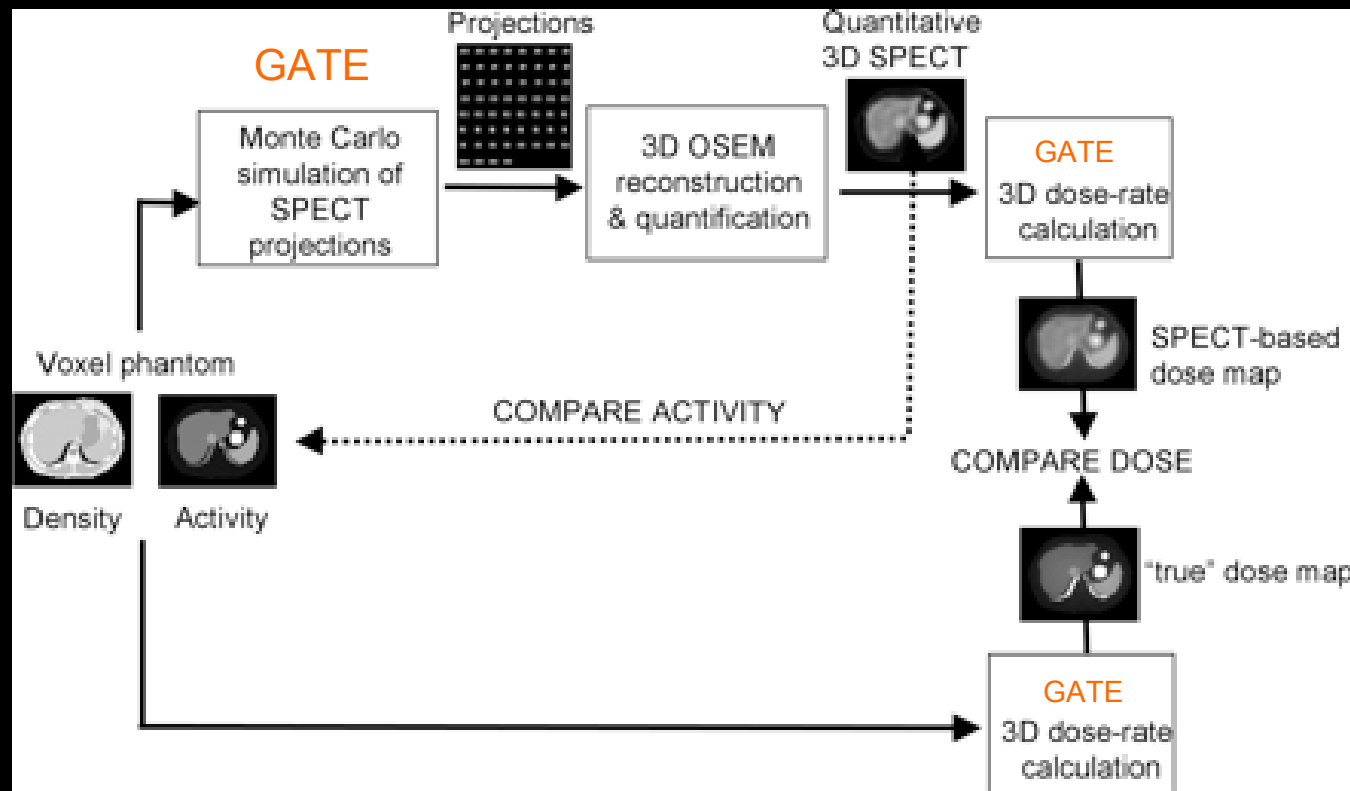
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What next?



Bridging the gap between MC modelling in imaging and dosimetry

Accurate dosimetry in ¹³¹I radionuclide therapy using patient-specific, 3-dimensional methods for SPECT reconstruction and absorbed dose calculation

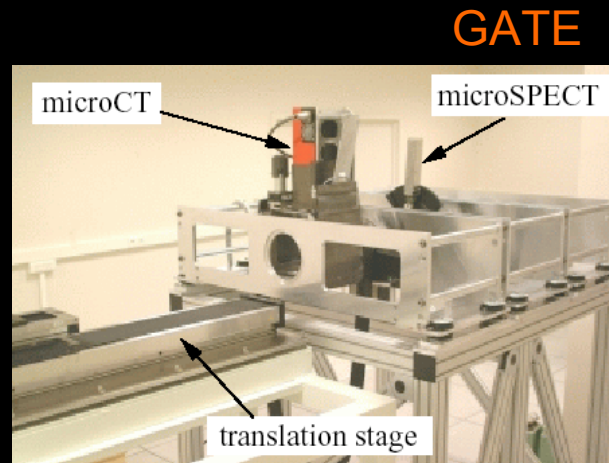


Modeling hybrid machines (PET/CT, SPECT/CT, OPET)

PET/CT

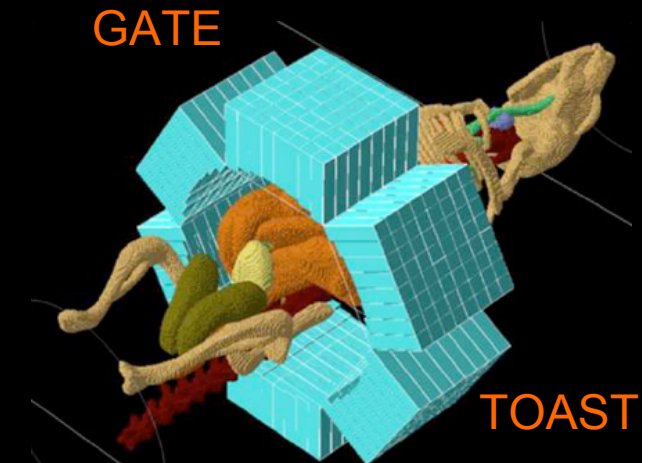


SPECT/CT



*Brasse et al, IEEE MIC Conf
Rec 2004*

OPET



*Alexandrakis et al, Phys Med
Biol 2005*

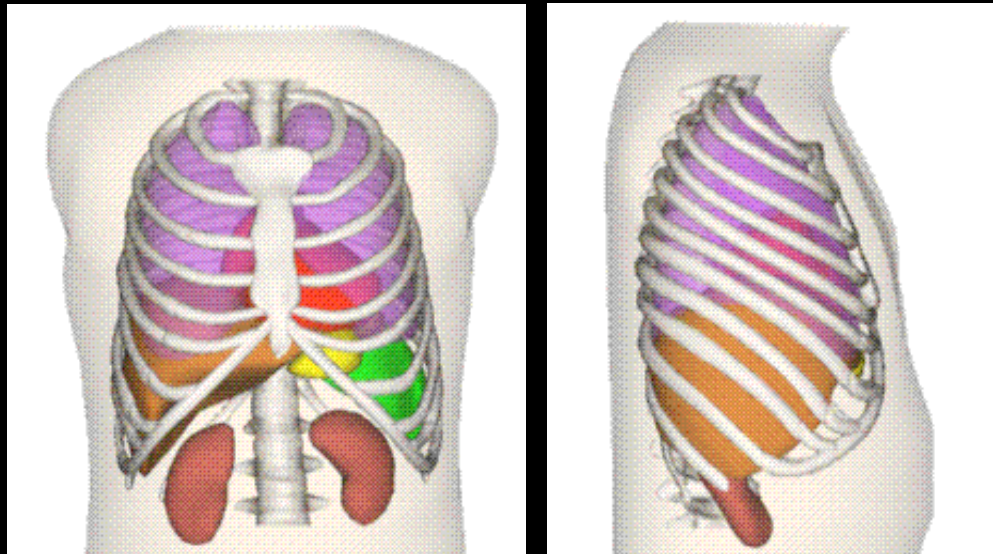
Integrating Monte Carlo modeling tools for:

- common coordinate system
- common object description
- consistent sampling
- convenient assessment of multimodality imaging

Designing realistic phantoms

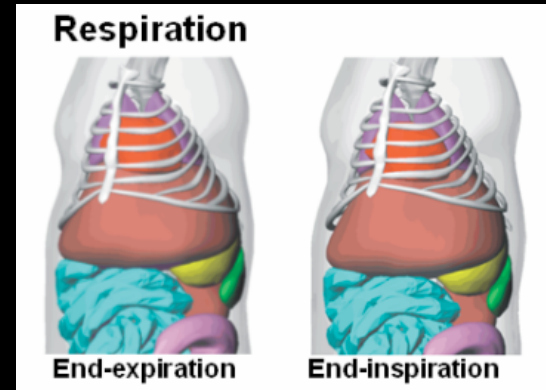
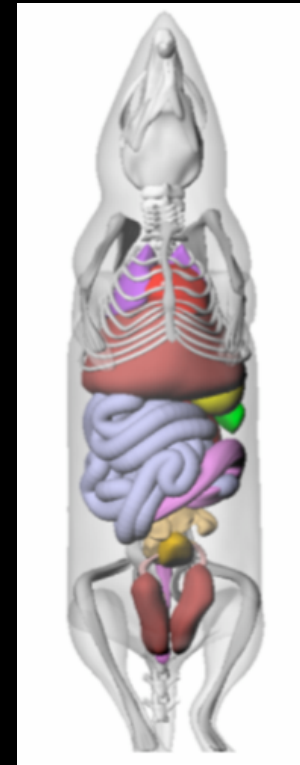
Interfacing realistic phantoms with simulator input

NCAT



Segars et al, IEEE TNS 2001

MOBY

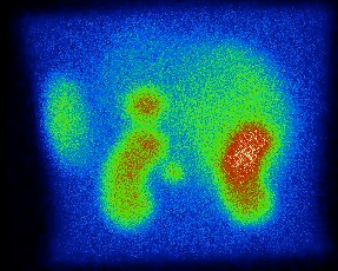
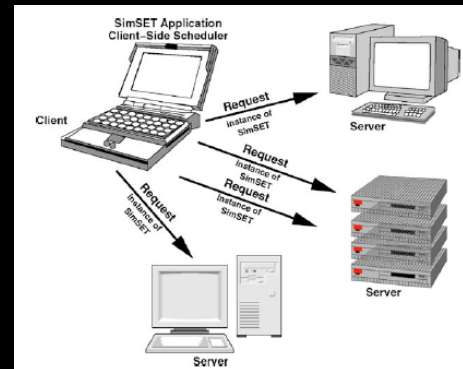
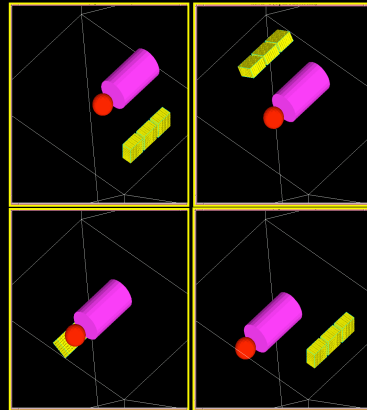
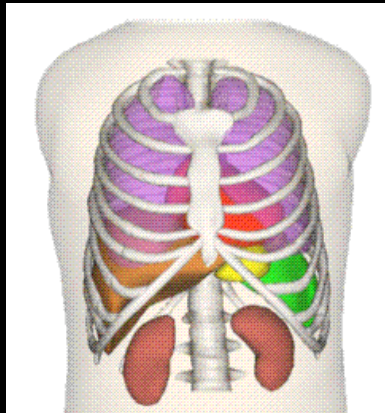


Segars et al, Mol Imaging Biol 2004

Making it easier to model a wide range of body habitus and physiological motions

Conclusion

- Monte Carlo simulation is a more and more accurate modelling tool in SPECT and PET



- They will be more and more present in (nuclear) medical imaging in the future:
 - as a invaluable guide for designing imaging protocols and interpreting SPECT and PET scans,
 - in the very imaging process of a patient

Acknowledgments



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