

**SIEMENS**

# **SOMATOM Definition Flash**

Flash Speed. Lowest Dose.

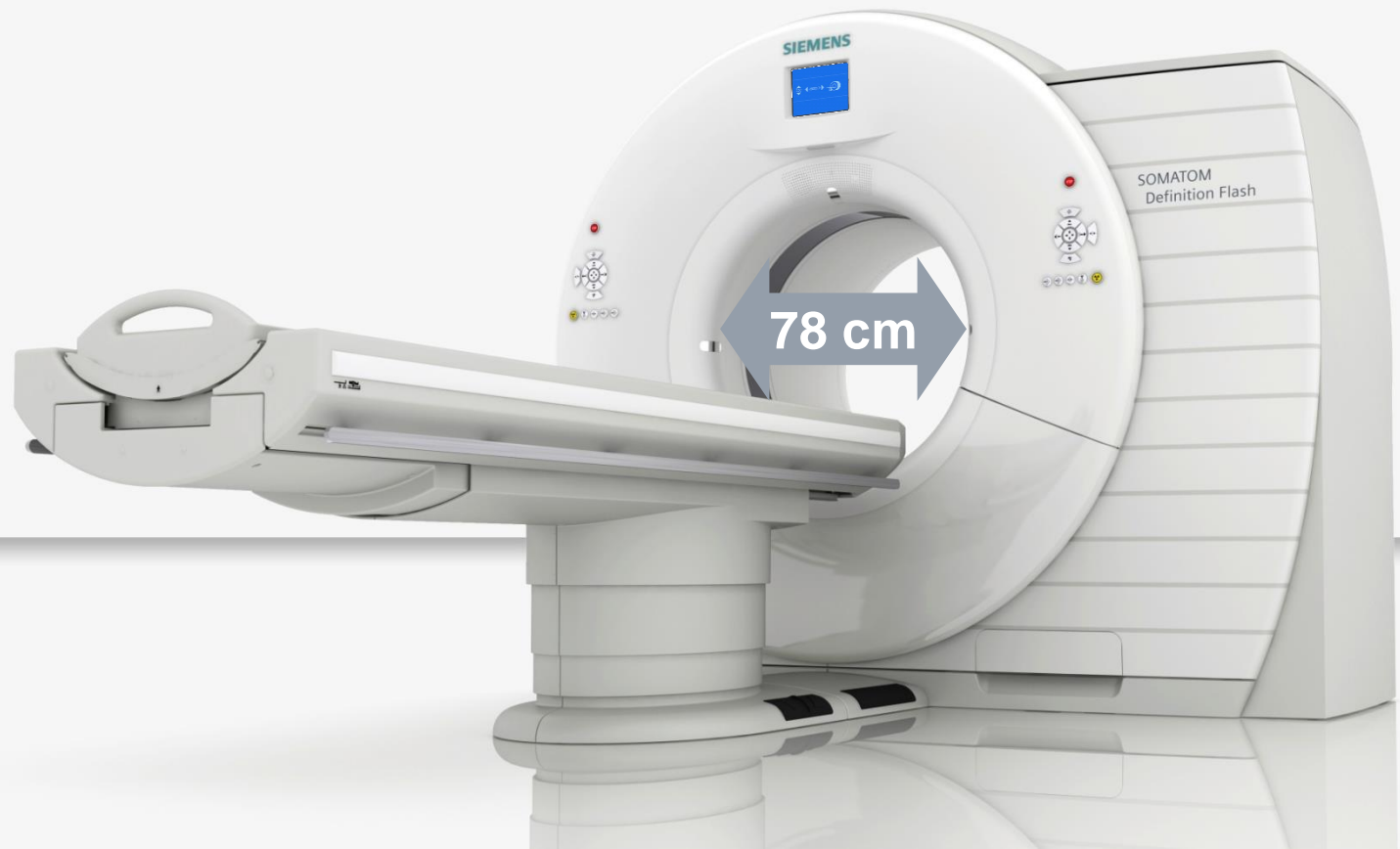


# SOMATOM Definition Flash

Flash Speed. Lowest Dose.

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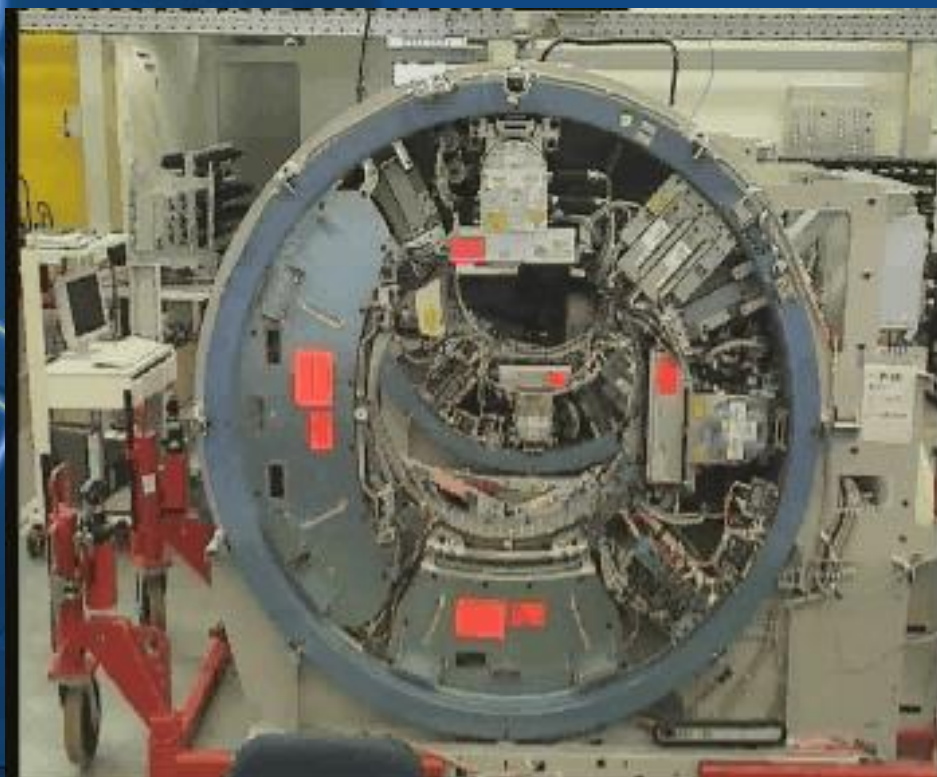
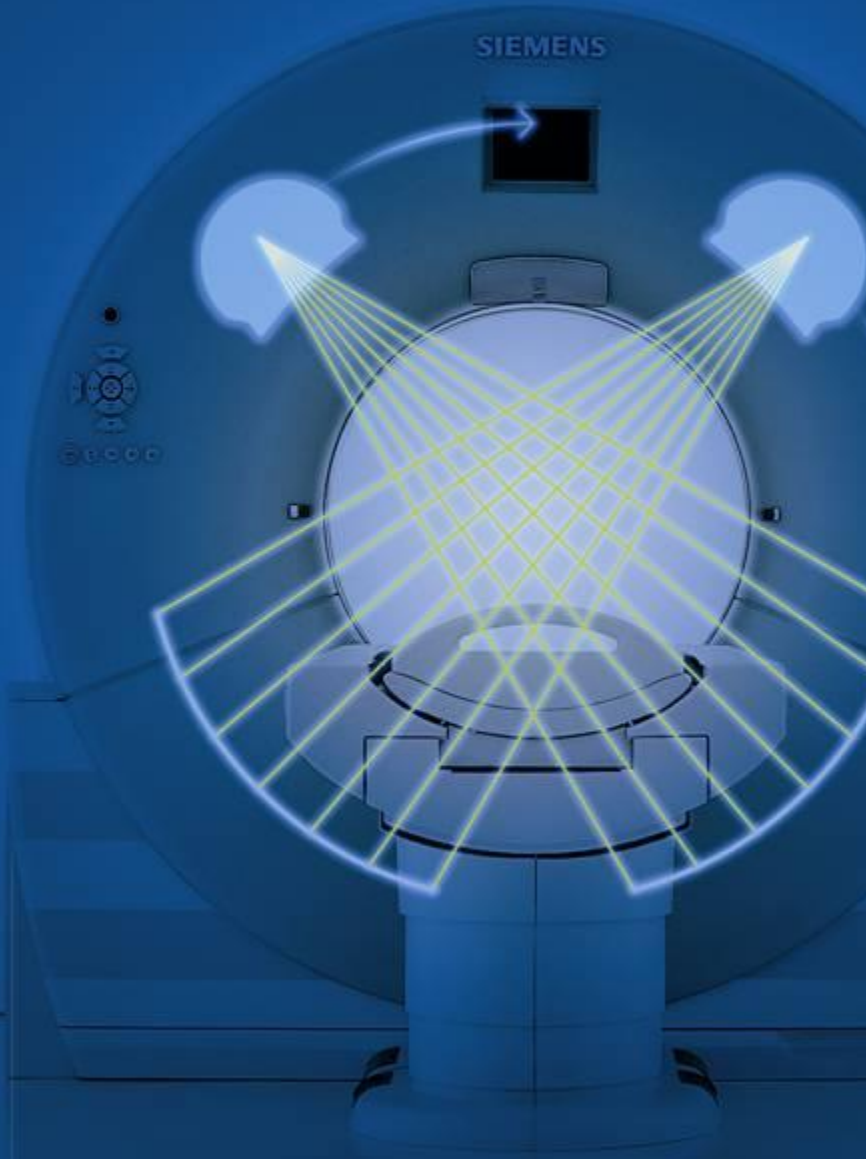
- Dual Source
- 0.28 s rotation
- 75 ms temporal resolution
- 200 cm scan range



## Dual Source CT:

Two X-Ray Sources and Two Detectors at the Same Time

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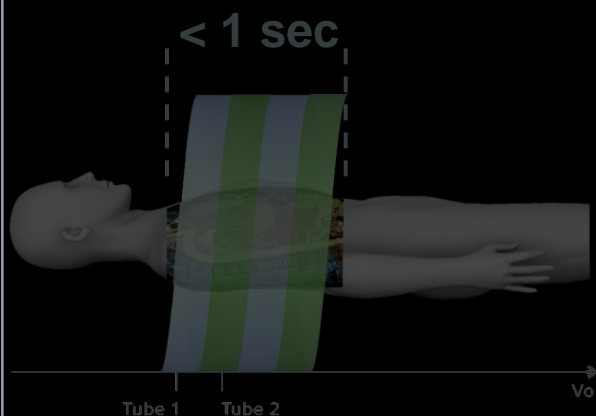


# SOMATOM Definition Flash

Flash Speed. Lowest Dose.

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## Split-Second Scanning

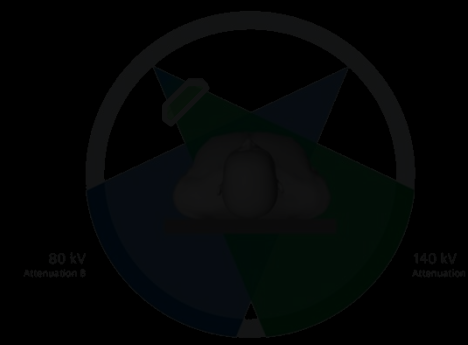


## Defining Low Dose CT



## Dual Source DE for all Patients

Always 2<sup>nd</sup> Contrast

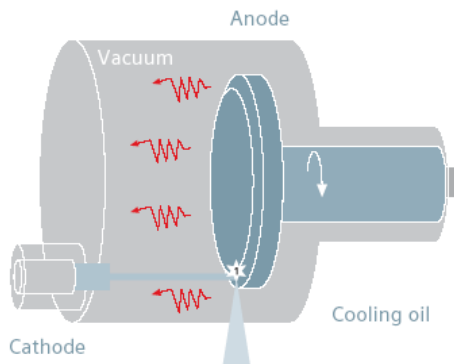


# Flying Focal Spot with z-Sharp

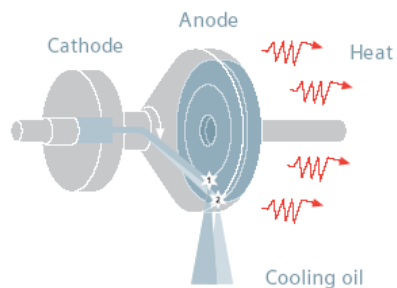
Isotropic spatial resolution of 0.33 mm<sup>3</sup>

## Tube design

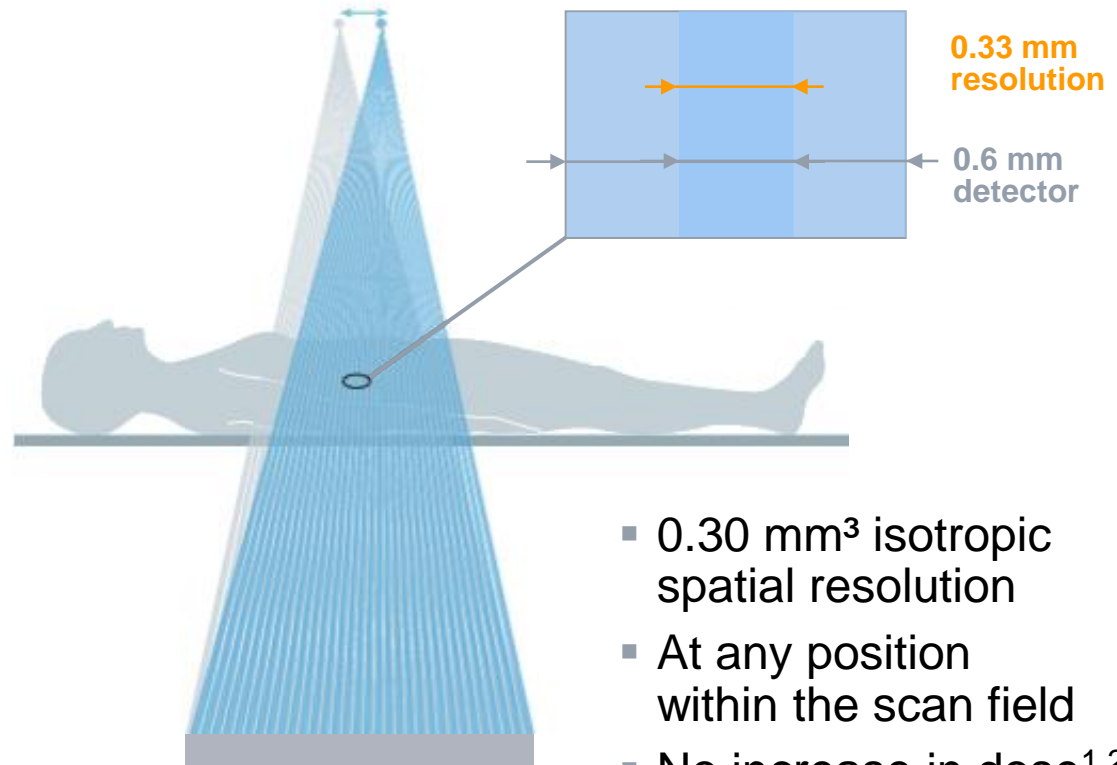
### Conventional technology



### STRATON with z-Sharp



## Overlapping projections with distinct X-ray beam



# SOMATOM Definition Flash

## Split-second scanning advantages

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### Single source CT



Result: Single source CT is limited to slow pitch and slow scan speed



# SOMATOM Definition Flash

Split-second scanning with Flash Spiral mode

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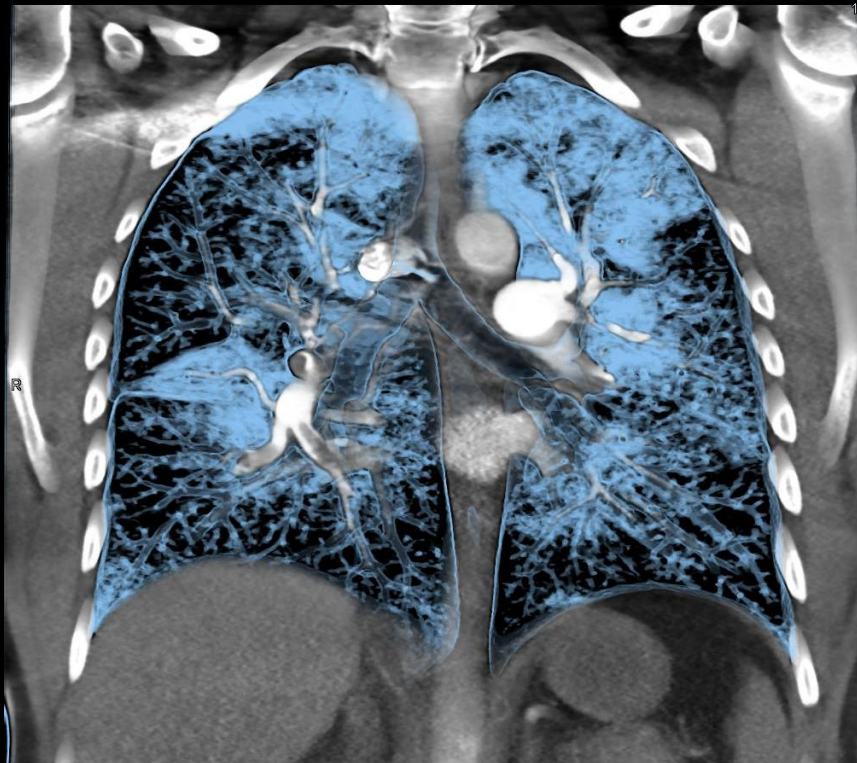
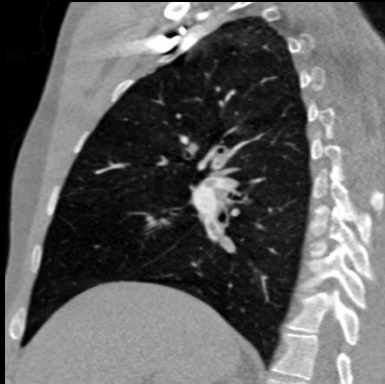
## Conventional Technology



# SOMATOM Definition Flash

Triple rule-out reveals pulmonary embolism

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## SOMATOM Definition Flash

**Flash Speed.  
Lowest Dose.**

collimation: 128 x 0.6 mm  
spatial resolution: 0.33 mm  
scan time: 0.67 s  
scan length: 287 mm  
rotation time: 0.28 s  
100/100 kV, 269 mAs/rot  
CTDIvol: 3.0 mGy

**Flash Spiral**

Scan time: 0.67 s  
Eff. dose: 1.4 mSv

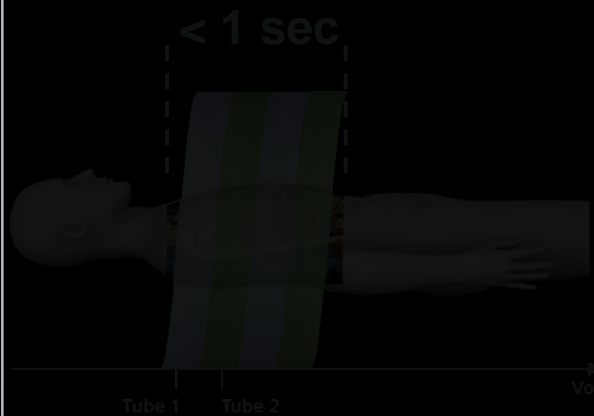


# SOMATOM Definition Flash

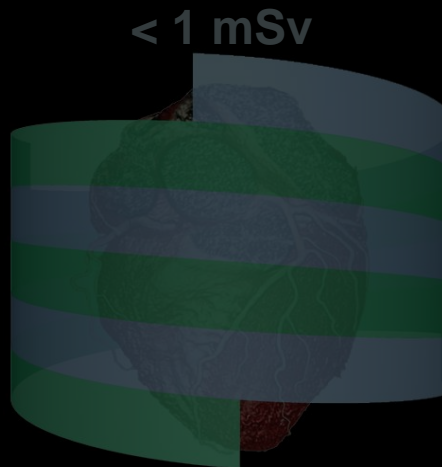
Flash Speed. Lowest Dose.

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## Split-Second Scanning

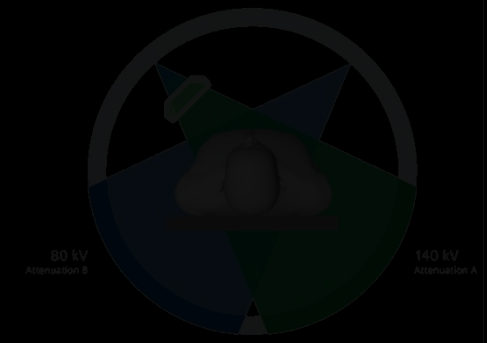


## Defining Low Dose CT



## Dual Source DE for all Patients

Always 2<sup>nd</sup> Contrast



# An Innovation Leader in Low Dose Computed Tomography

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<p>Up to 68%</p> <p>CARE Dose4D</p> <p>1994</p>	<p>Up to 30%</p> <p>Ultra Fast Ceramic (UFC)</p> <p>1997</p>	<p>Up to 70%</p> <p>Hand CARE</p> <p>1999 <b>Siemens Exclusive</b></p>	<p>Up to 50%</p> <p>Pediatric 80 kV Protocols</p> <p>2002</p>	<p>Up to 50%</p> <p>DSCT</p> <p>2005 <b>Siemens Exclusive</b></p>	<p>1-3 mSv</p> <p>Adaptive ECG-Pulsing/Sequence</p> <p>2007</p>
					
<p>Up to 25%</p> <p>Adaptive Dose Shield</p> <p>2007</p>	<p>&lt; 1 mSv</p> <p>Flash Spiral</p> <p>2008 <b>Siemens Exclusive</b></p>	<p>No penalty</p> <p>Selective Photon Shield</p> <p>2008 <b>Siemens Exclusive</b></p>	<p>Up to 40%</p> <p>X-CARE</p> <p>2008 <b>Siemens Exclusive</b></p>	<p>Up to 60%</p> <p>SAFIRE</p> <p>2010 <b>Siemens Exclusive</b></p>	<p>To minimize electronic noise</p> <p>2011</p>

\*In clinical practice, the use of IRIS and SAFIRE may reduce CT patient dose depending on the clinical task, patient size, anatomical location, and clinical practice. A consultation with a radiologist and a physicist should be made to determine the appropriate dose to obtain diagnostic image quality for the particular clinical task.

\*\* Dose reduction potential was determined by lowering dose by 60% and reconstructing with IRIS. Noise, CT numbers, homogeneity, low-contrast resolution and high contrast resolution were assessed in a Gammex 438 phantom. Low dose data reconstructed with IRIS showed the same image quality compared to full dose data based on this test. Data on file.

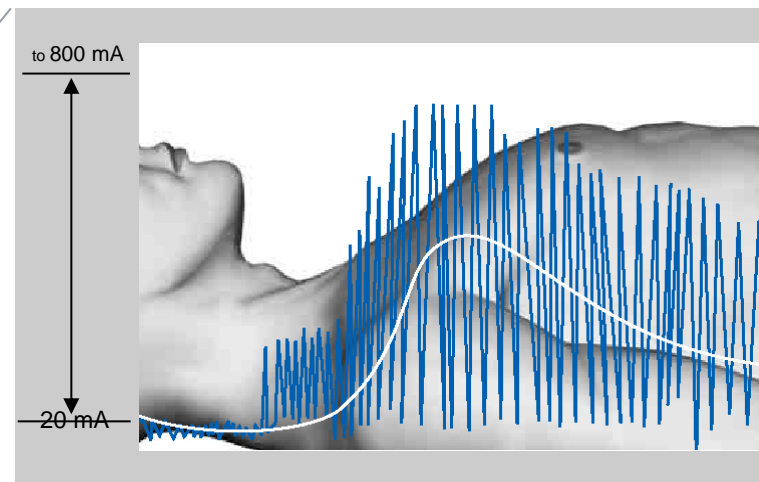
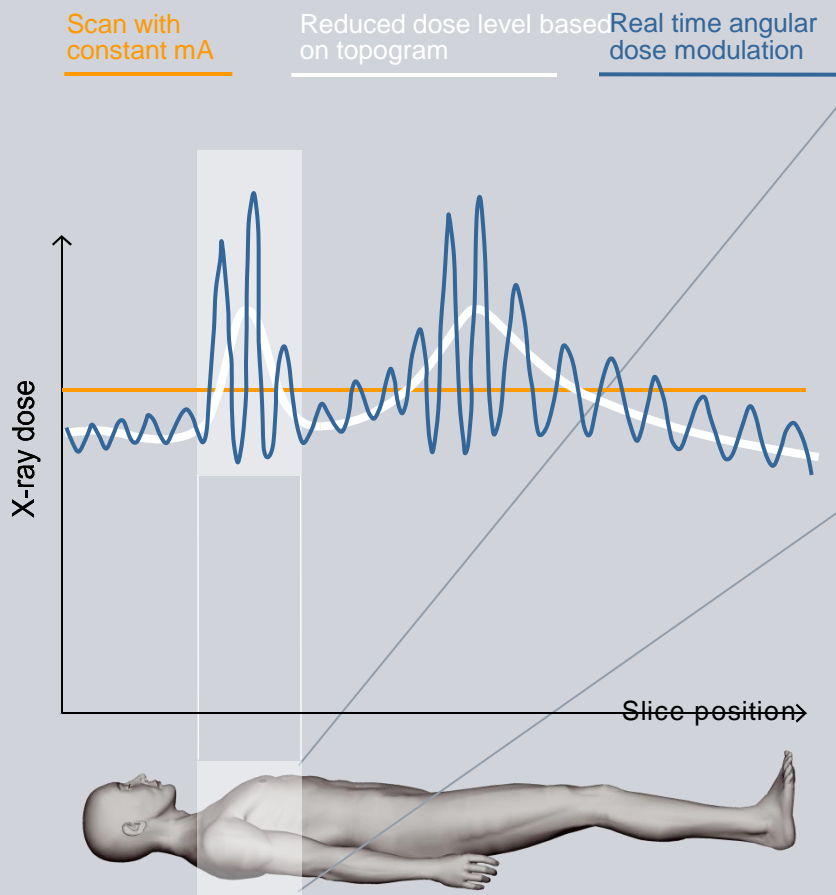
\*\*\* The information about this product is being provided for planning purposes. The product is pending 510(k) review, and is not yet commercially available in the U.S. Dose reduction potential was determined by lowering dose by 60% and reconstructing with SAFIRE. Noise, CT numbers, homogeneity, low-contrast resolution and high-contrast resolution were assessed in a Gammex 438 phantom. Low dose data reconstructed with SAFIRE showed the same image quality compared to full dose data based on this test. Data on file.

# Care Dose 4D

# CARE Dose4D

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Minimal dose, maximum quality, and fully automated



- Fino al 68% di riduzione di dose senza compromettere la qualità di immagine.
- Modulazione di dose in real time.



# **X Care**

# SOMATOM Definition Flash

## Dose reduction with X-CARE

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### Conventional Technology



- **Full radiation of breast**
- Breast is always included in any diagnostic thoracic scan, but never organ of interest

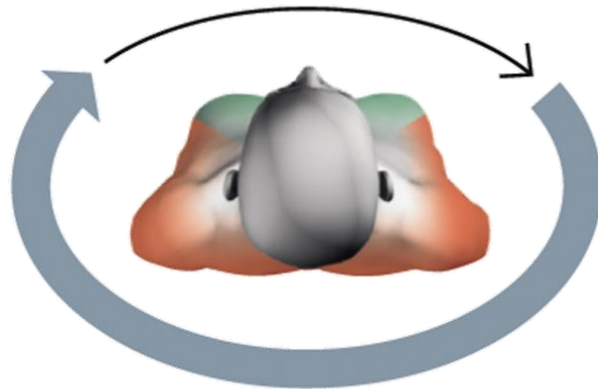
# X- CARE

Organ sensitive protection

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Up to  
**40%**

X-ray low



X-ray on

## X-CARE protects the most radiation sensitive organs

- Spesso organi come iride, tiroide e mammella sono esposti inutilmente a dose
- Riduzione di dose fino al **40%** senza compromettere la qualità di immagine
- Modulazione della corrente del tubo in alcuni organi target.

# SOMATOM Definition Flash

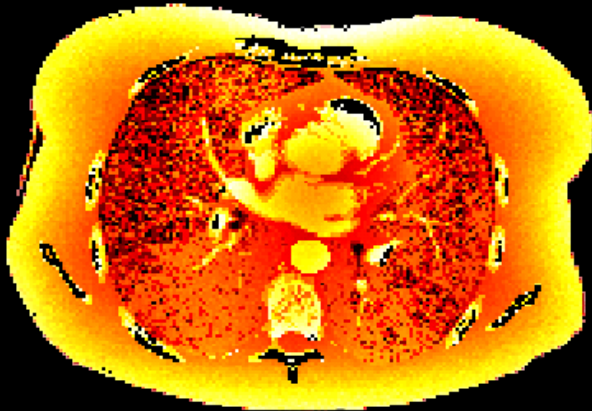
Up to 40% dose reduction with X-CARE

**SIEMENS**

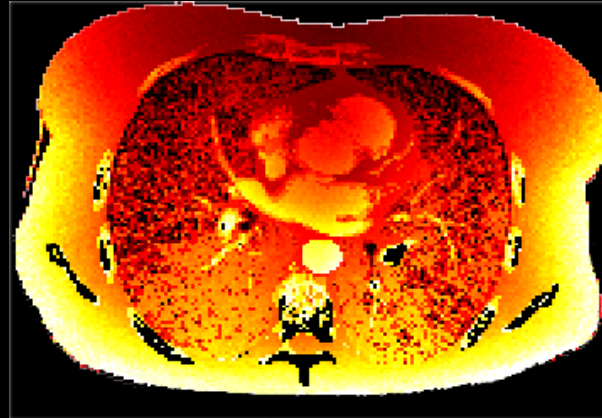
## SOMATOM Definition Flash

Flash speed.  
Lowest dose.

X-CARE  
Spatial res. 0.33 mm

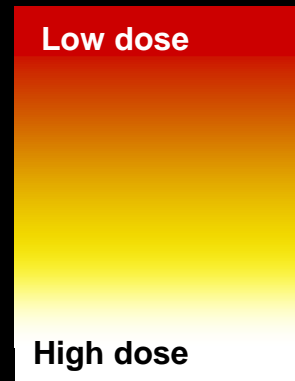


without X-CARE



with X-CARE

**Up to 40%  
dose reduction**



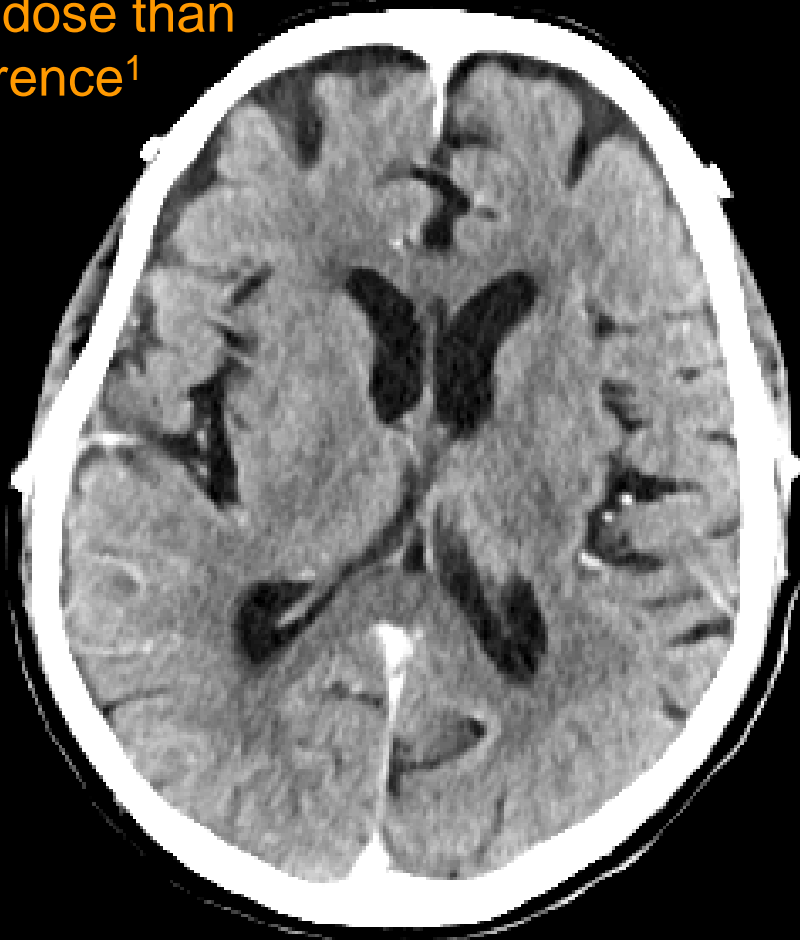


# SOMATOM Definition Flash

Defining low dose neuro CT with X-CARE

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30% less dose than  
ACR reference<sup>1</sup>



## SOMATOM Definition Flash

Flash Speed.  
Lowest Dose.

scan time: 8 s  
scan length: 128 mm  
rotation time: 1 s  
100 kV, 580 eff. mAs / rot

Tube voltage: 100 kV  
Dose: 52 mGy

# **Stellar Detector**

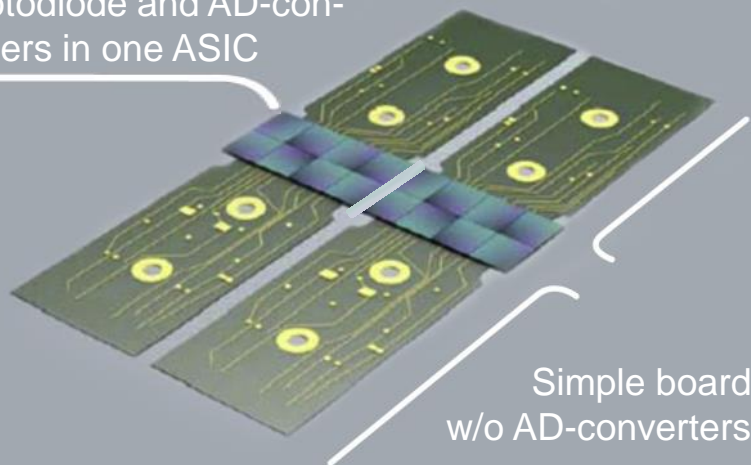
# Stellar Detector

Minimized cross-talk and electronic noise

SIEMENS

## Fully Integrated Stellar Detector

Photodiode and AD-con-  
verters in one ASIC



## TrueSignal Technology

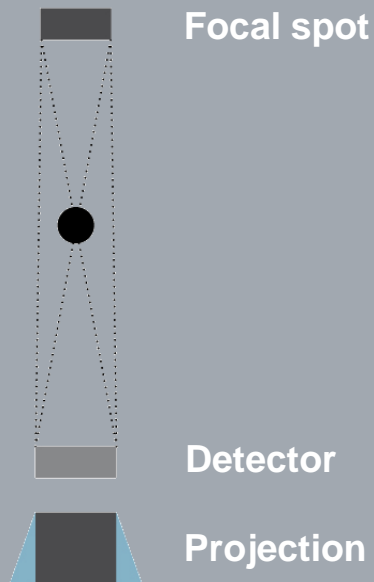
- Riduzione del rumore fino al 20%, più alto rapporto segnale/rumore, incremento quindi della qualità di immagine su scansioni a bassa dose, pazienti obesi e Dual Energy
- Incremento della risoluzione spaziale fino a 0,3 mm e ricostruzione delle immagini a strato ancora più sottile, fino a 0,5 mm.

# Stellar Detector

High resolution scanning

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## New Stellar Detector



## Edge Technology

- Reduced cross-talk for minimized slice blurring enables Edge Technology
- 0.5 mm slices with increased cross-plane resolution of 0.30 mm

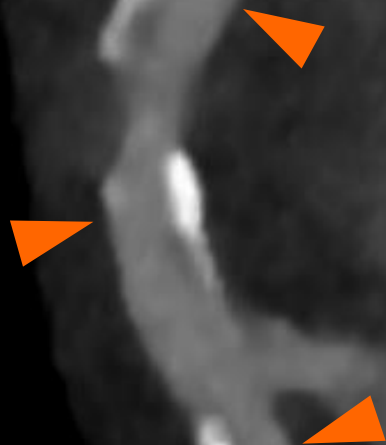


# Stellar Detector in Coronary CTA

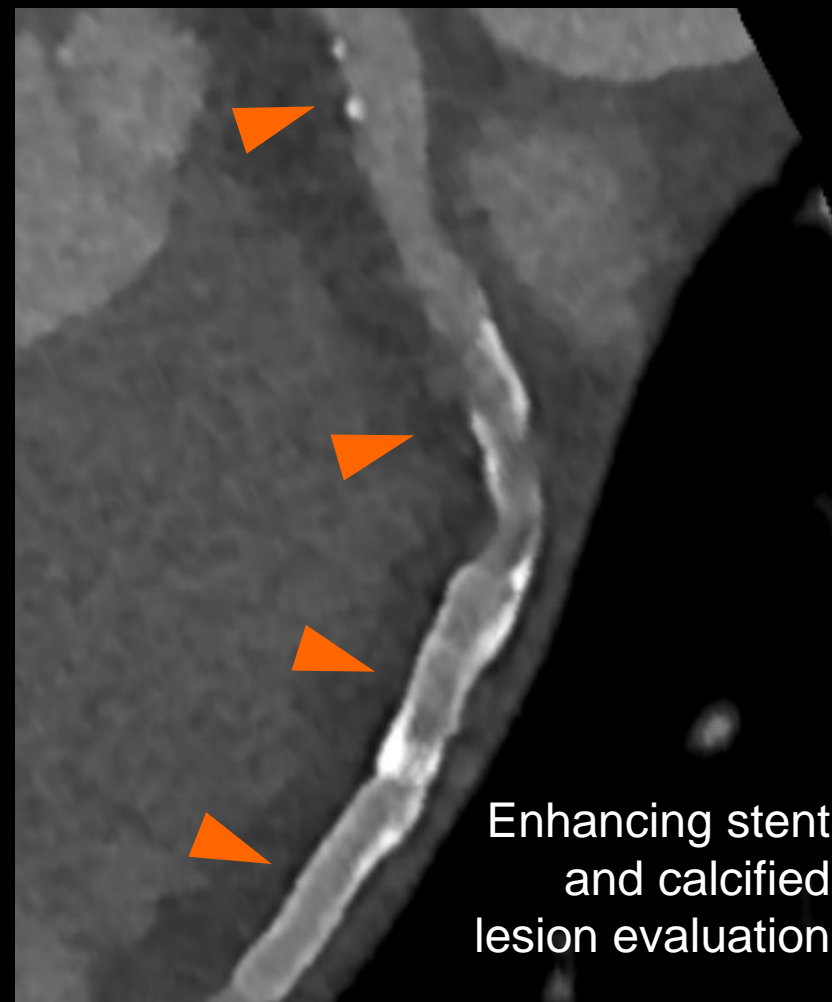
Increased vessel delineation and minimized blooming

SIEMENS

Reduced blooming and  
increased sharpness



Enhancing stent  
and calcified  
lesion evaluation



**Care kV**

## Riduzione della dose

### - CARE kV

Adatta automaticamente i kV in funzione del topogramma, dell'organo analizzato e del tipo di esame per migliorare la qualità di immagine e il rapporto segnale-rumore riducendo la dose erogata al paziente.

### Definition of Image Quality

CARE Dose4D  CARE kV Semi

Eff. mAs 210 kV 120

Organ characteristic: Abdomen

CTDIvol (32cm): 14.19 mGy DLP: 100

Scan time 5.15 s

Rotation time 0.5 s

Delay 2 s

Scan start Start button

Language German

API None

Routine Scan Recon Auto Tasking

Quality ref. mAs 210 Ref. kV 120

Dose saving optimized for:

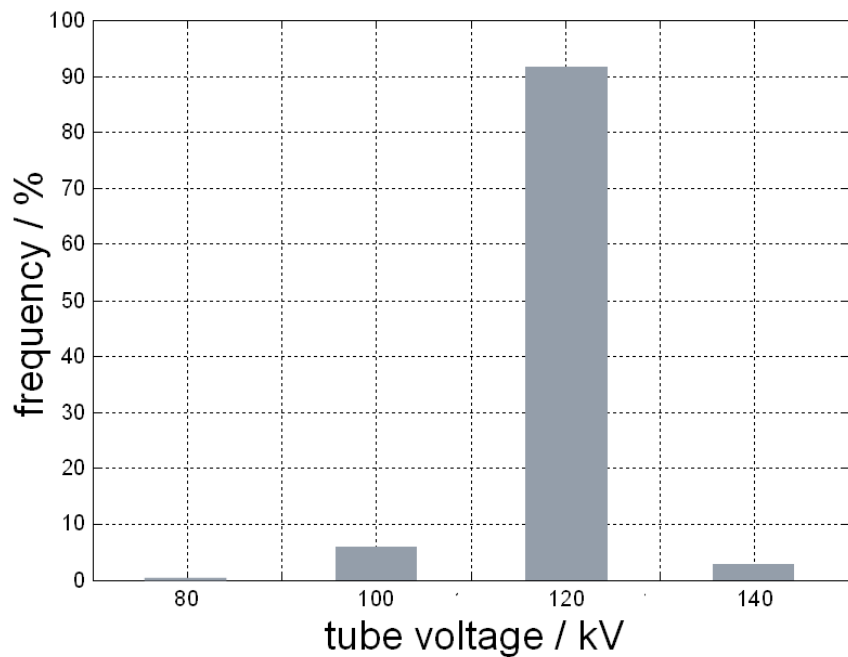
1 2 3 4 5 6 7 8 9 10 11 12

70  
80  
100  
120  
140

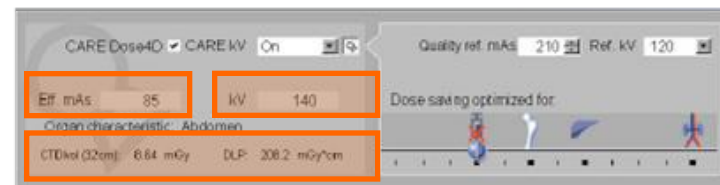
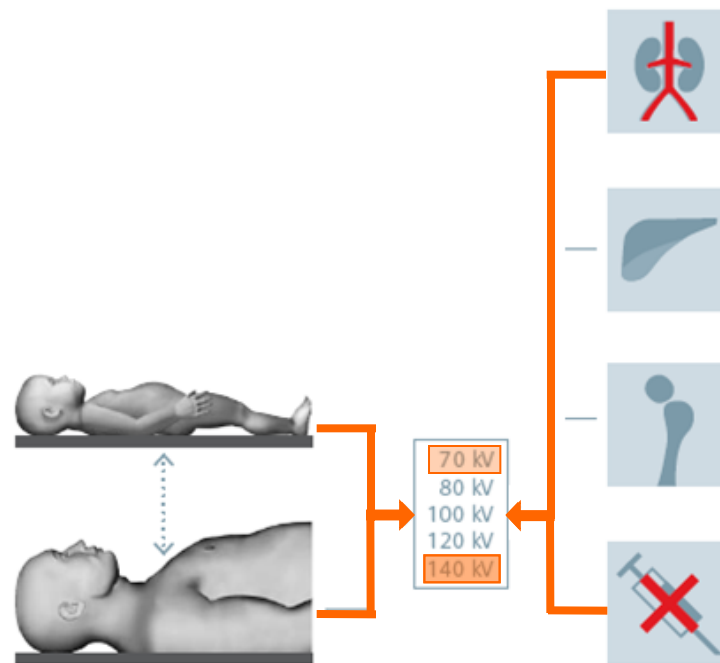
# CARE kV

Automated, exam-specific kV setting

## Untapped potential: right kV setting



## Habitus and exam based kV setting



# **Safire**

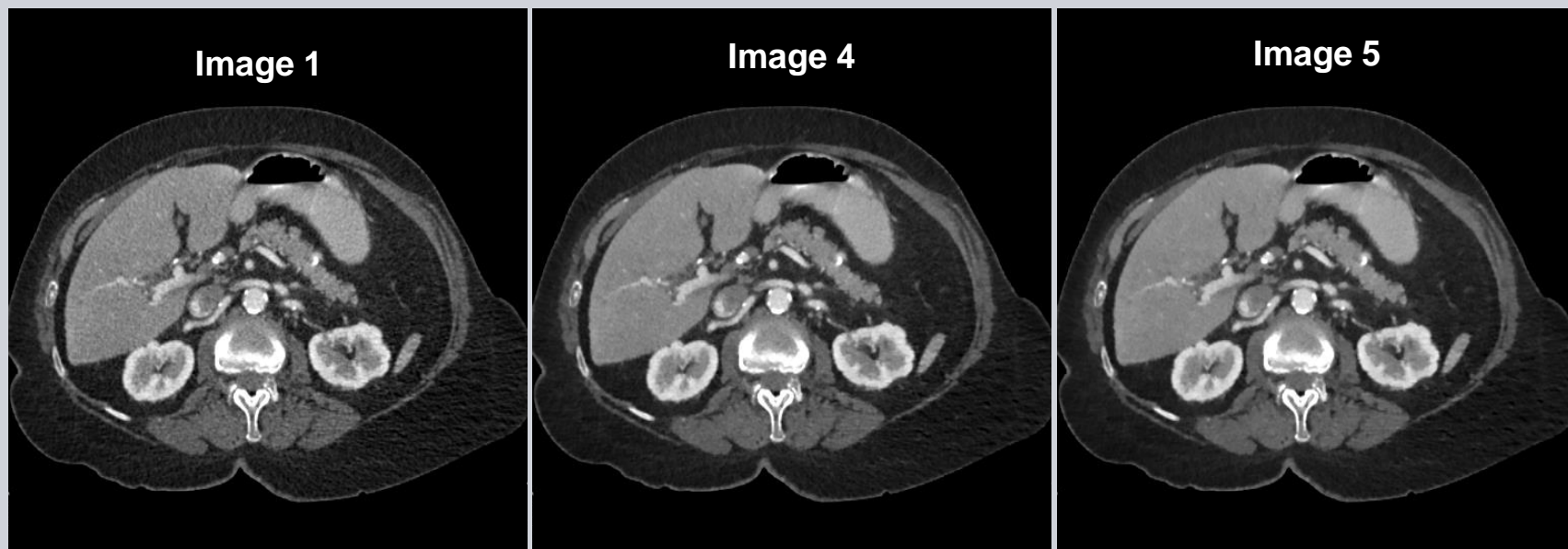
# SAFIRE\*

Ready for clinical routine

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## SAFIRE is customizable

- 5 image noise levels selectable from a preview set of images

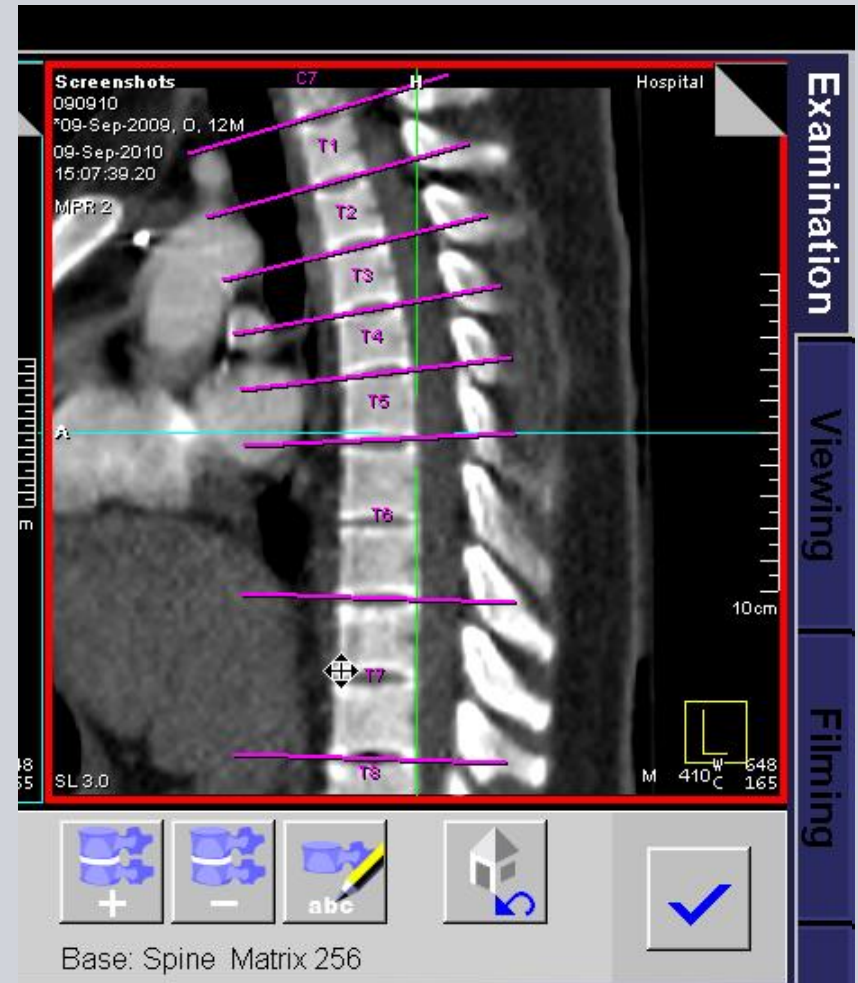
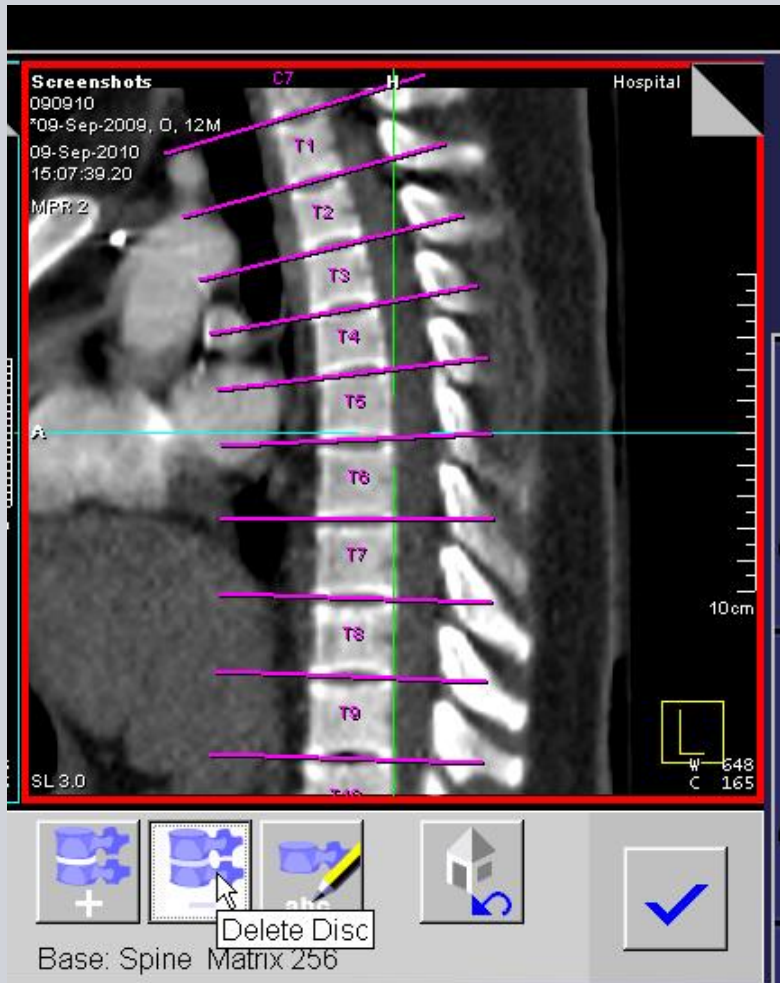
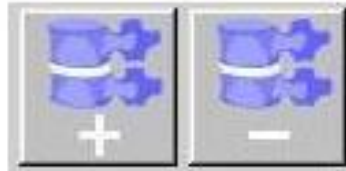


- There's an incremental **reduction of noise** in each of the images

# **FAST Spine**



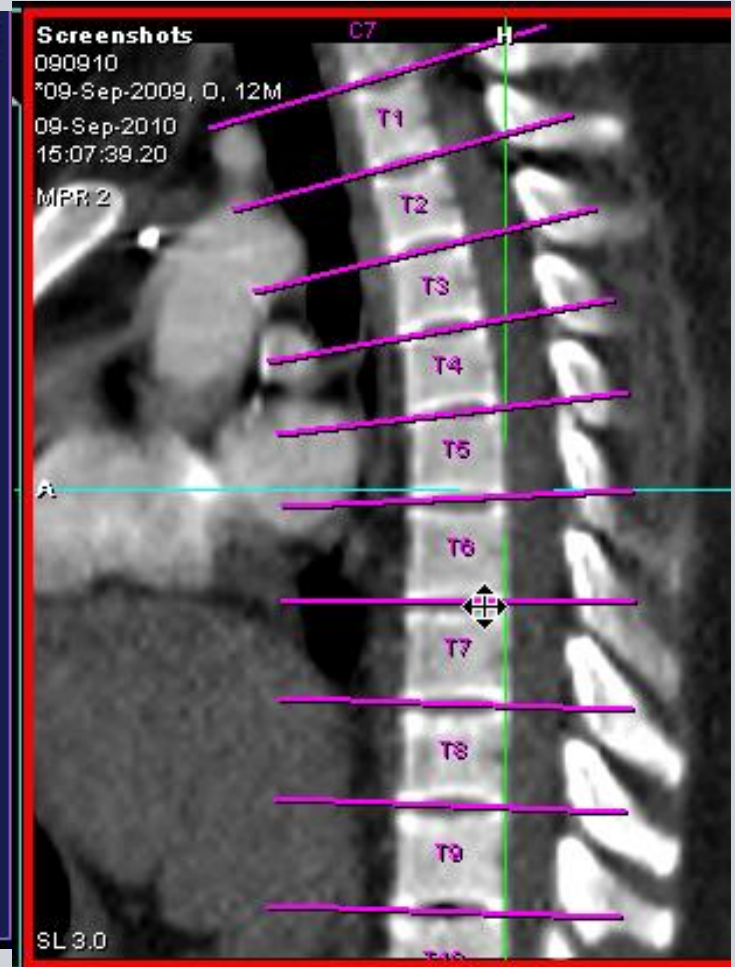
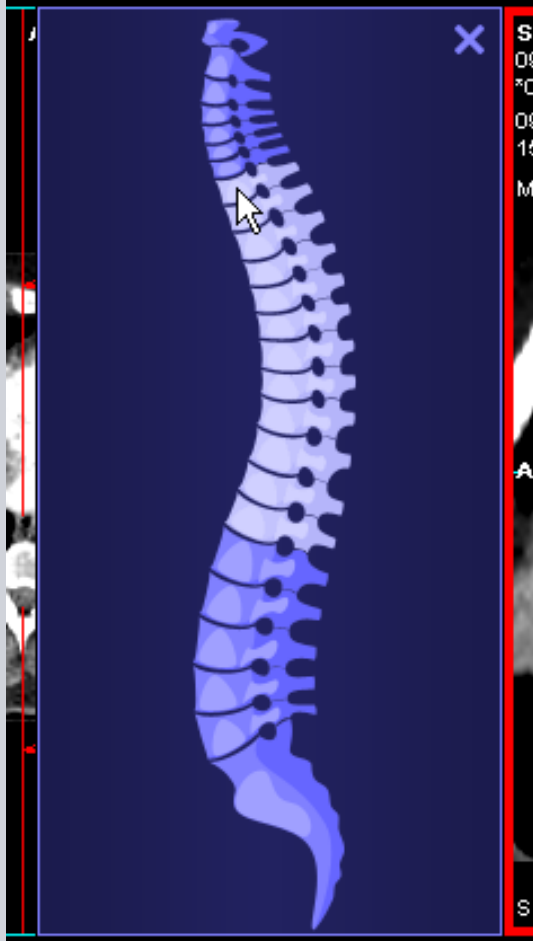
## Add/Remove Disc



# Apply Vertebra Labels

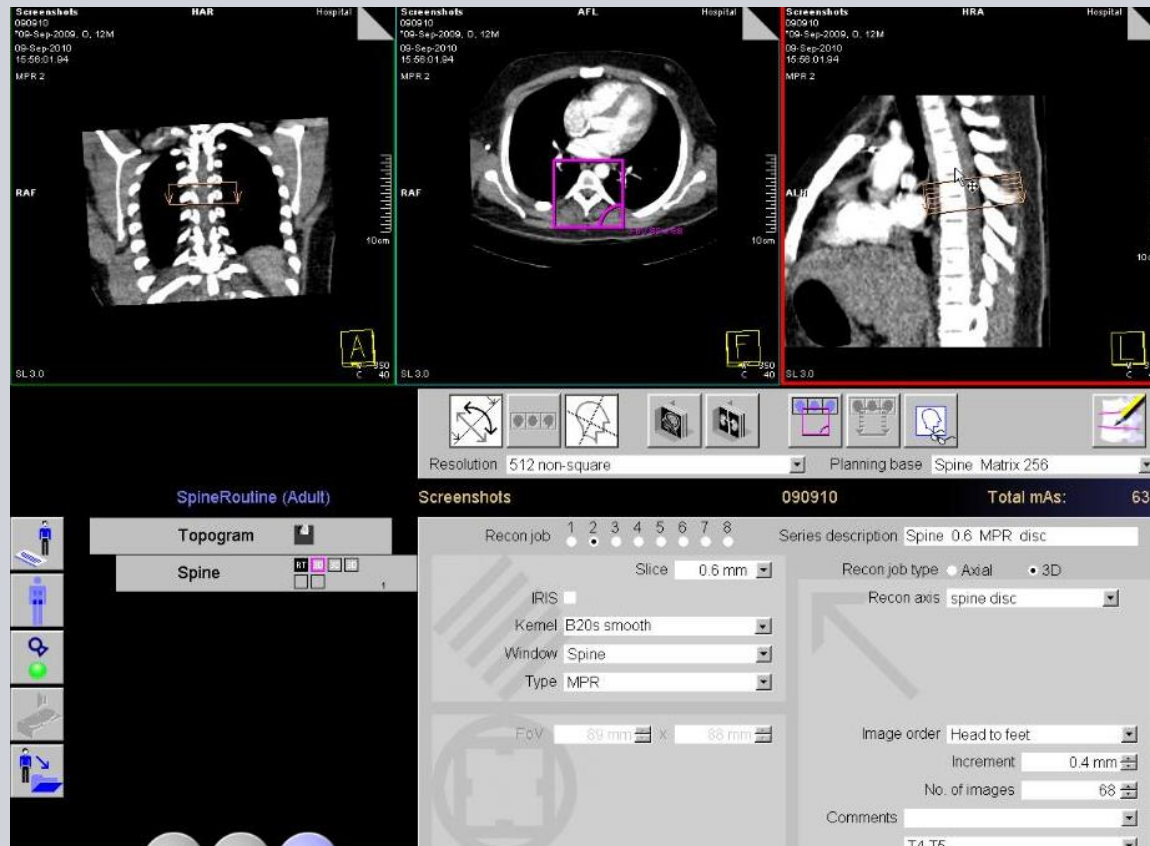


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## Spine Disc

The **Spine disc mode** provides a reconstruction range, placed and oriented on a specific disc. By clicking onto another disc, the range follows.



- Changing the FoV or the range exists FAST Spine
- Labels are deleted
- Changing back to s FAST Spine reactivates FAST Spine

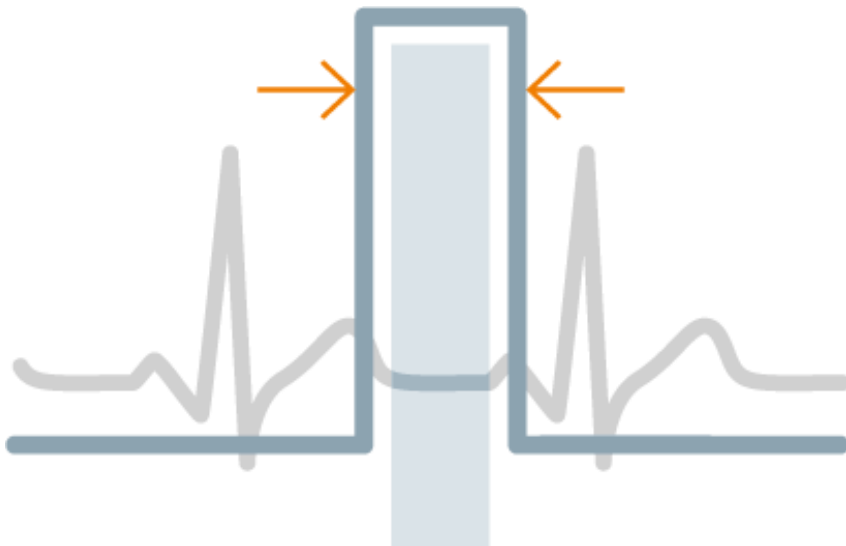
# **Cardio CT**

# Adaptive ECG pulsing

First cardiac CT ECG modulation method

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Up to  
**50%**



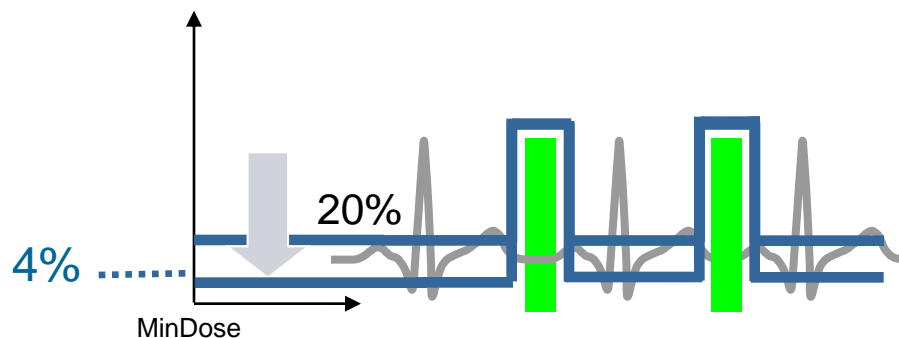
## Dose reduction in cardiac protocols

- Per la prima volta l'uso di modulazione ECG negli esami cardio CT.
- Riduzione di dose fino al 50%

# Adapts for complete dose protection

## Lowest Dose with Highest Reliability in Spiral Mode

Adaptive ECG pulsing



High dose saving with fast acquisition speed

### SOMATOM Definition AS +

temp. res.	150 ms
Ø dose	@ 2-3 mSv

#### Arrhythmia compensation:

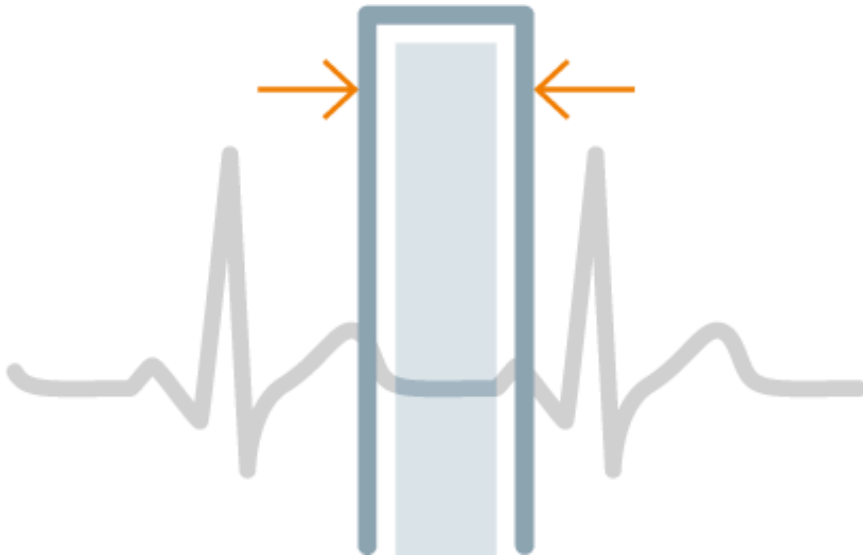
- ECG pulsing (20%) e MinDose (4%)

# Adaptive Cardio Sequence

Enabling routine cardiac scanning below 3 mSv

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2-3 mSv<sup>1</sup>



## Intelligent cardiac sequence

- Non c'è acquisizione quando siamo in presenza di un battito ectopico.
- Dose tra **2-3 mSv**.

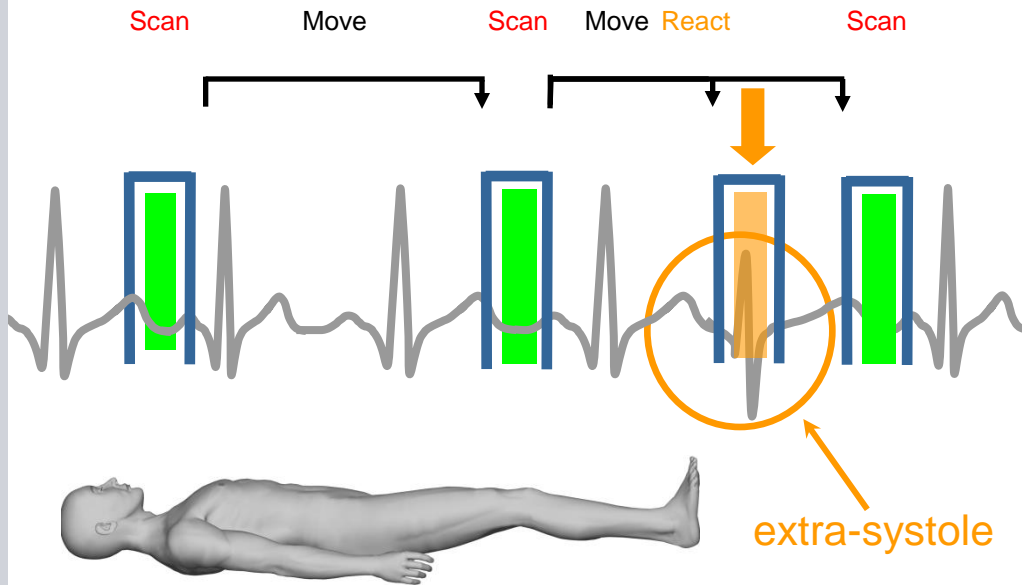


# Maximum Dose Saving for Low Heart Rates

## Adaptive Cardio Sequence

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Adaptive Cardio Sequence



### SOMATOM Definition AS +

temp. res.

150 ms

Ø dose

@ 1,5 mSv

### Arrhythmia compensation:

- Detezione on-line di extrasistole

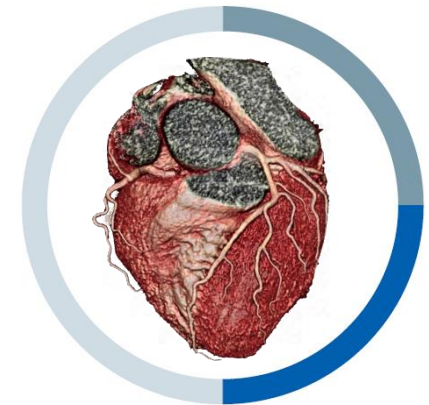
## Scanning Technology Comparison

### SOMATOM Definition Flash

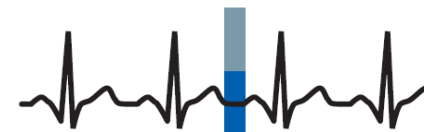
All heart rates – no exclusions<sup>1,2</sup>

Heart rate independent  
temporal resolution of **75 ms**

Two simultaneous tubes  
freeze any cardiac motion



100 bpm Dual Source CT

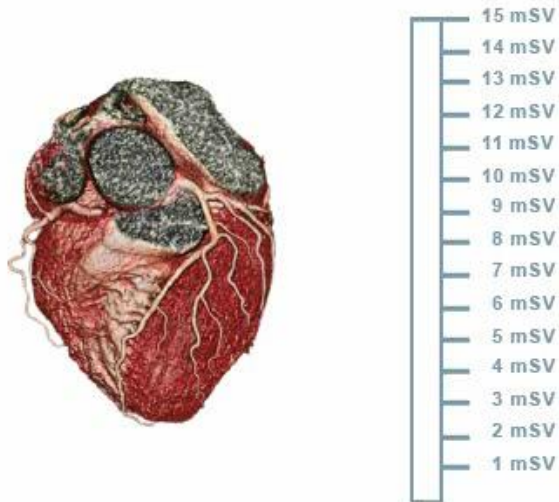


# SOMATOM Definition Flash

## Sub-mSv heart

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### Conventional CTA

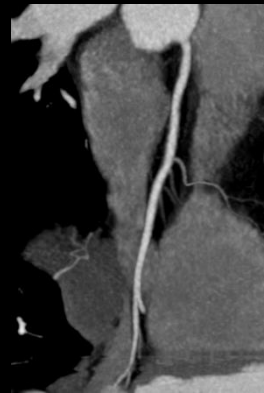


- 135-175 ms temporal resolution
- 2-10 s scan time
- **5.7 – 36.5 mSv dose<sup>1</sup>**

# Adapts for complete dose protection

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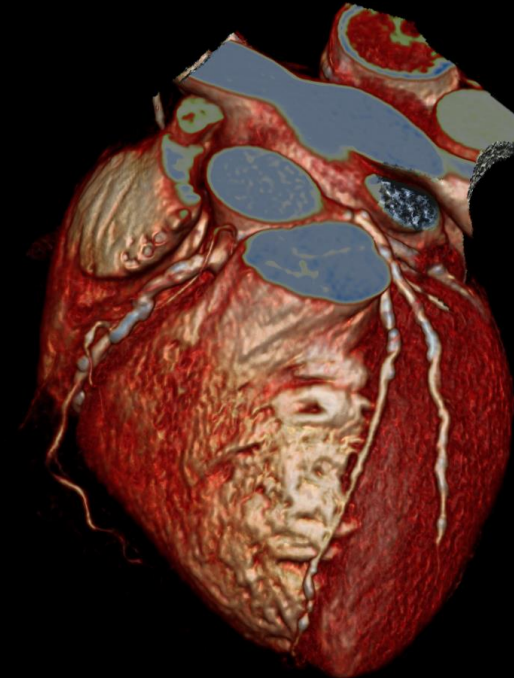
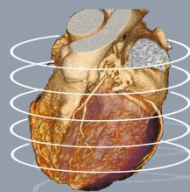
## Lowest Dose with Highest Reliability in Spiral and Sequence



only 2 - 3 mSv

Adaptive ECG pulsing

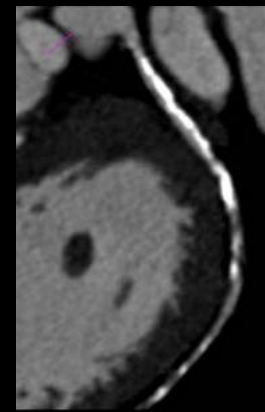
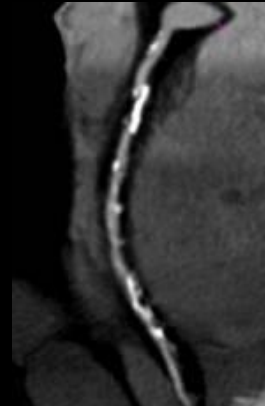
- Reliable @ All Heartrates
- High Dose Saving



only 1 - 2 mSv

Adaptive Cardio Sequence

- Best @ Low Heartrates
- Maximum Dose Saving

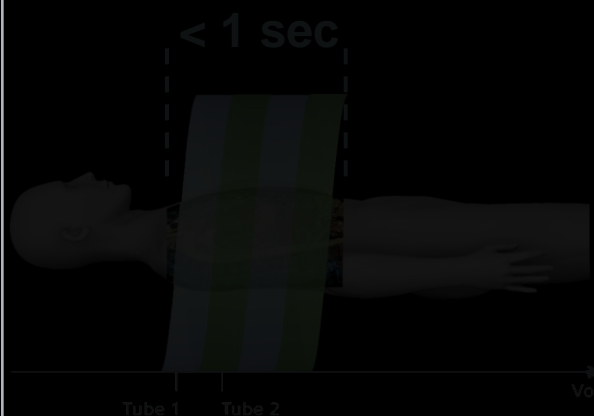


# SOMATOM Definition Flash

Flash Speed. Lowest Dose.

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## Split-Second Scanning

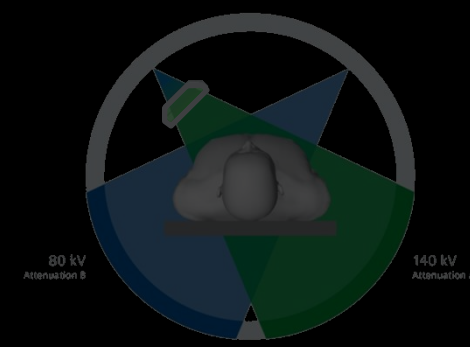


## Defining Low Dose CT



## Dual Source DE for all Patients

Always 2<sup>nd</sup> Contrast



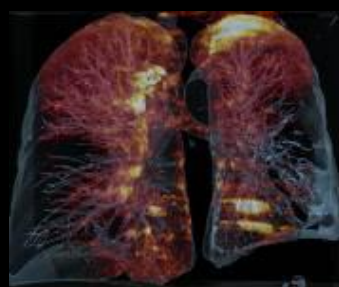
# Turning Dual Energy into Daily Clinical Routine

Always 2nd contrast

**SIEMENS**



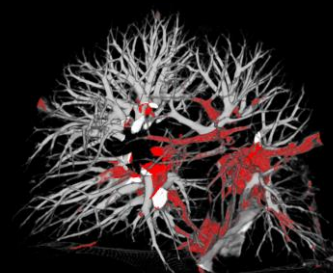
**Direct Angio**



**Lung PBV**



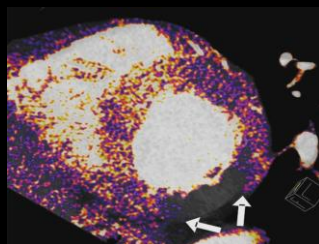
**Virtual Unenhanced**



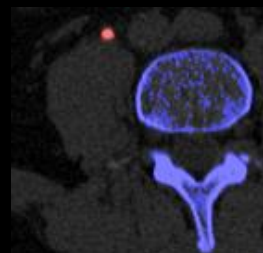
**Lung Vessels**



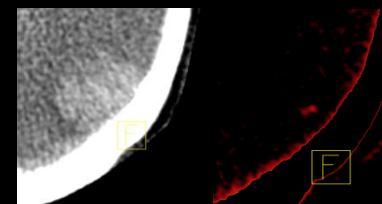
**Hardplaque Display**



**Heart PBV**



**Calculi Characterization**



**Brain Hemorrhage**



**Musculoskeletal**



**Gout**



**Lung Nodules\***



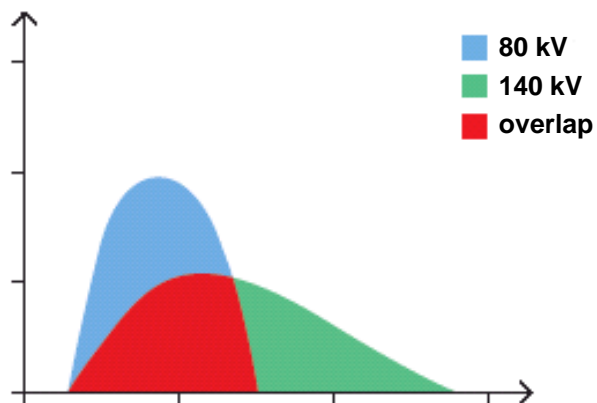
**Xenon\***



# Selective Photon Shield

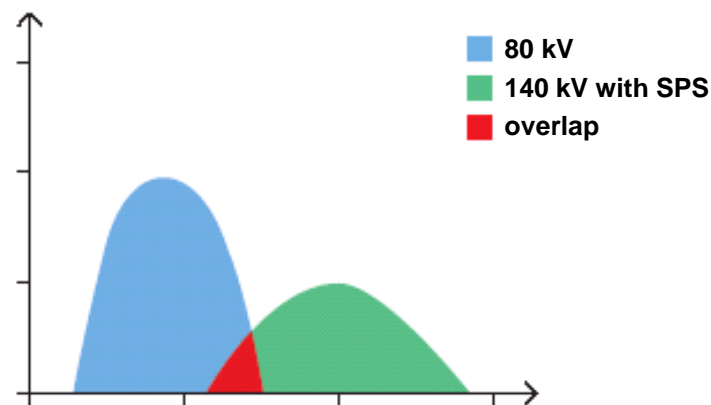
## Spectra separation and dose saving

### Conventional DE



- Significant spectral overlap
- Limits energy separation
- **Limits dose efficiency**

### DE with Selective Photon Shield



- Minimized spectral overlap
- Up to 80% better energy separation
- **Complete dose neutrality<sup>1,2</sup>**
- **Dual Source only**

1: Schenzle JC et al. Dual energy CT of the chest: how about the dose? Invest Radiol. 2010 Jun;45(6):347-53.

2: Thomas C et al. Differentiation of urinary calculi with dual energy CT: effect of spectral shaping by high energy tin filtration. Invest Radiol. 2010 Jul;45(7):393-8.



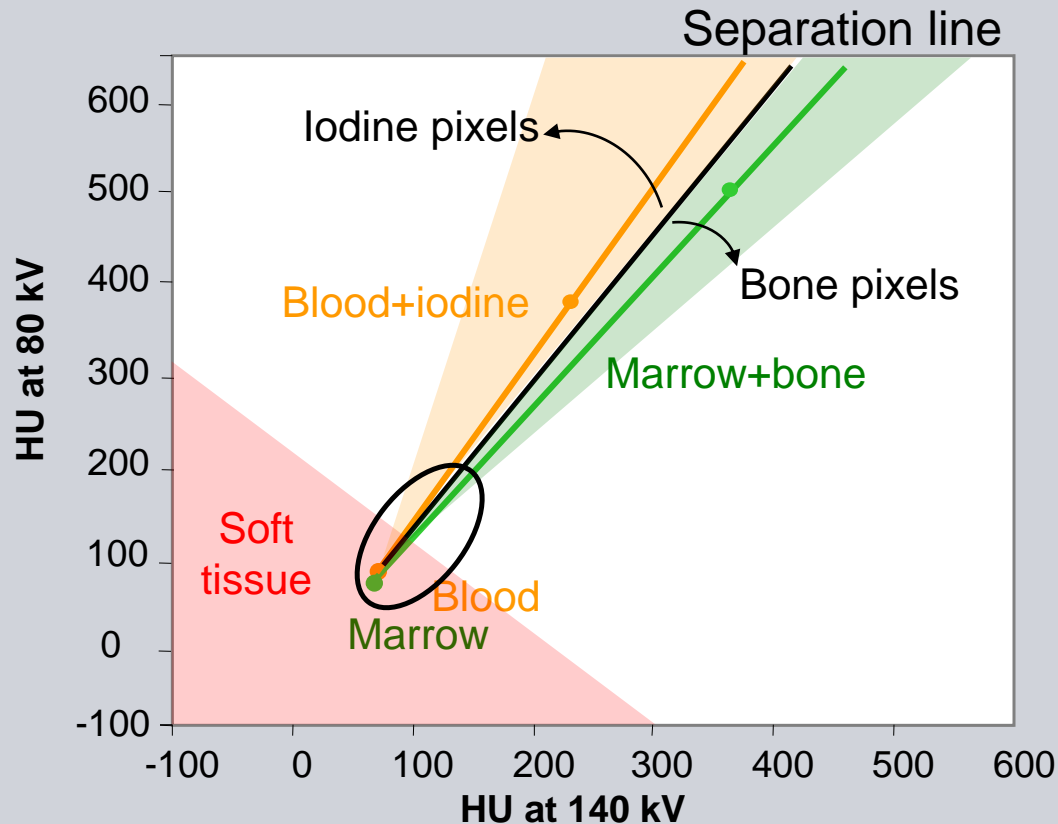
# Post-Processing of Dual Energy Data

## syngo Dual Energy - Direct subtraction of bone

- **Modified 2- material decomposition: Separation of bone and Iodine**
- **Automatic bone removal without user interaction**
  - Clinical benefits in complicated anatomical situations:
    - Base of the skull
    - Carotid arteries
    - Vertebral arteries
    - Peripheral runoffs

# syngo Dual Energy Direct subtraction of bone

- Modified 2-material decomposition: Separation of two materials
  - Assume mixture of **blood + iodine (unknown density)** and **bone marrow + bone (unknown density)**



- Additional postprocessing to improve classification at low HU numbers

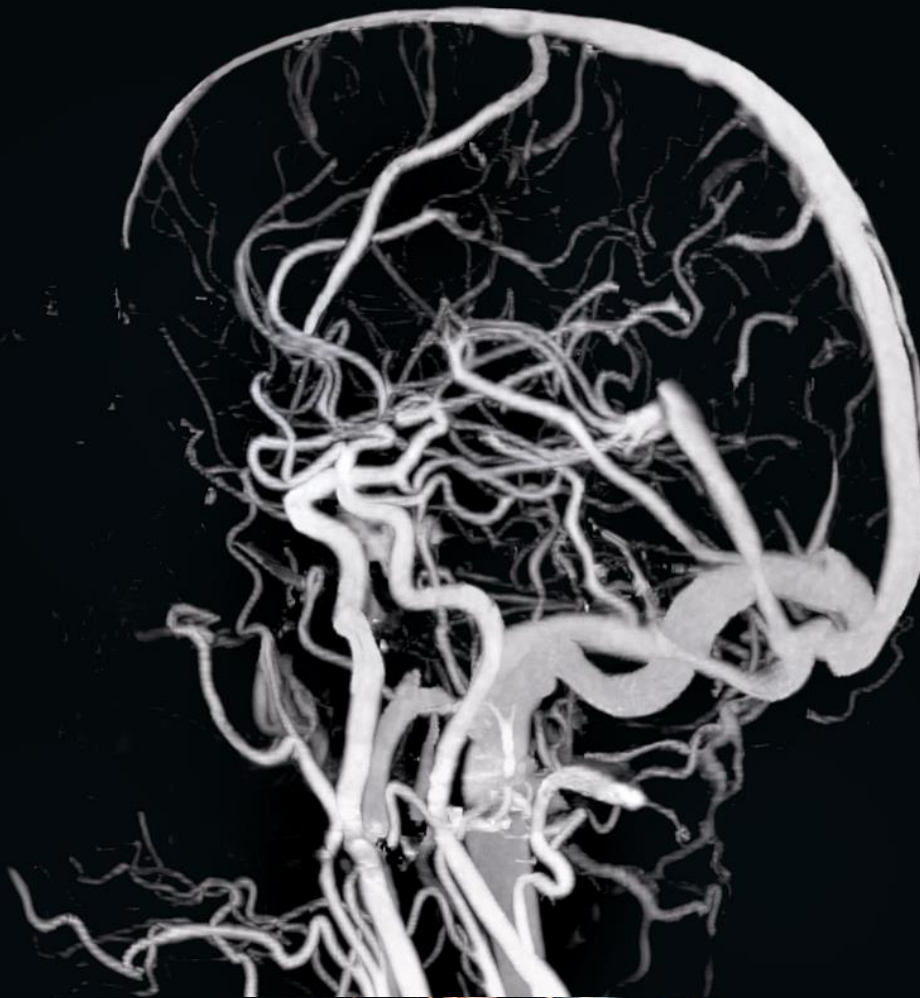
**Direct Dual Energy subtraction of bone  
even in complicated anatomical regions**

**SIEMENS**

**SOMATOM  
Definition  
Flash**

**Flash speed.  
Lowest dose.**

Coll. 128 x 0.6 mm  
Spatial res. 0.33 mm  
Rotation 0.28 s  
100/Sn140 kV  
106/110 effective mAs

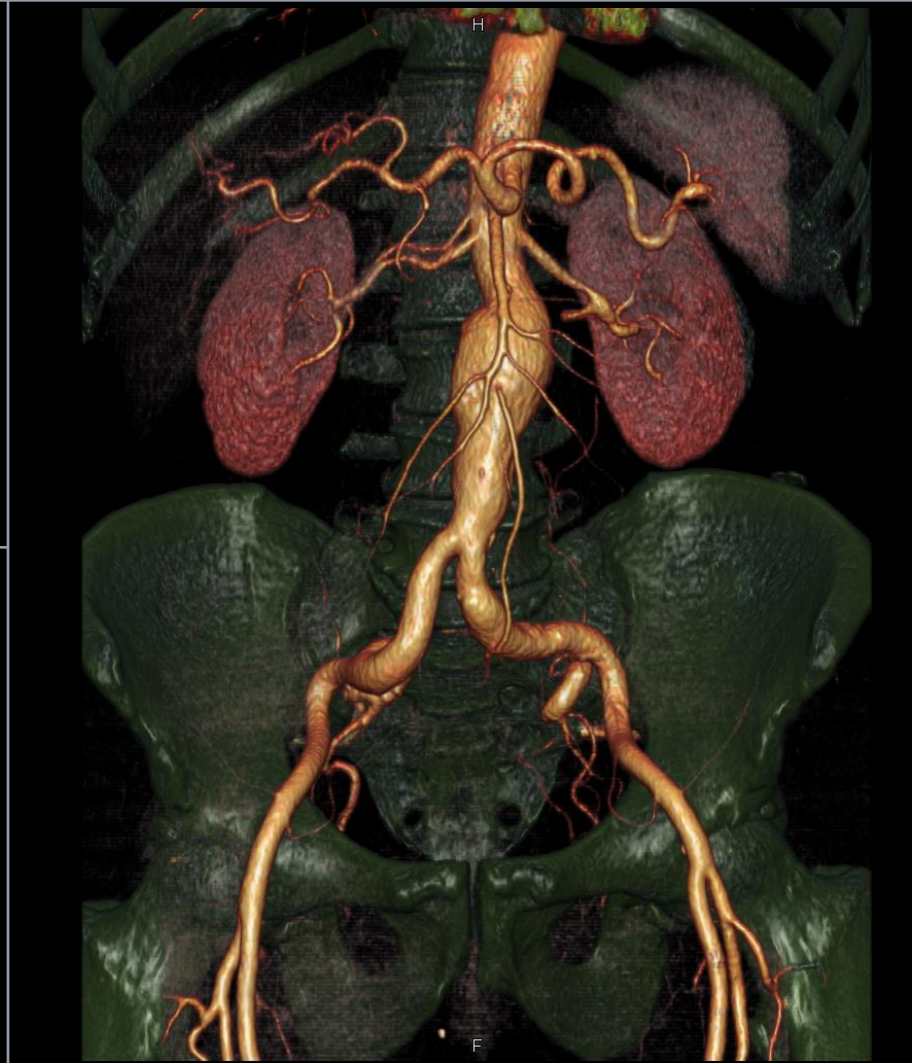


CM Ultravist® by  
Bayer Schering  
Pharma AG

Courtesy of University Hospital of Munich - Grosshadern / Munich, Germany

**Direct Dual Energy subtraction of bone  
speeds up your workflow**

**SIEMENS**



## **SOMATOM Definition Flash**

**Flash speed.  
Lowest dose.**

Coll. 128 x 0.6 mm  
Spatial res. 0.33 mm  
Rotation 0.5 s  
100/Sn140 kV  
180/140 effective mAs

CM Ultravist® by  
Bayer Schering  
Pharma AG

Courtesy of NYU Medical Center / New York, USA

## DE Hardplaques – Clinical Application

The **DE Hardplaques Application Class** can be applied to any DE CTA dataset to facilitate plaque analysis

*DE Hardplaques enables differentiation of iodine-filled vessel lumen from calcified plaques in contrast-enhanced scans*

An additional non-contrast scan, which is frequently performed prior to the CTA scan, can be avoided, thus reducing patient dose for the CTA exam

The algorithm automatically defines the calcified plaques and provides color-coded visualization, which in turn:

- May reduce observer-dependent variability in stenosis grading (independent of window settings)
- Simplifies presentation of the findings to the referring clinicians

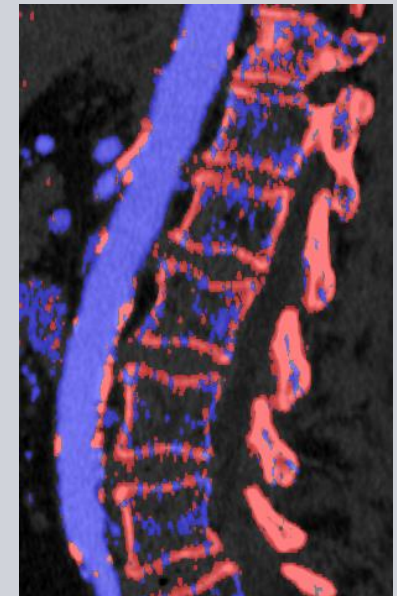
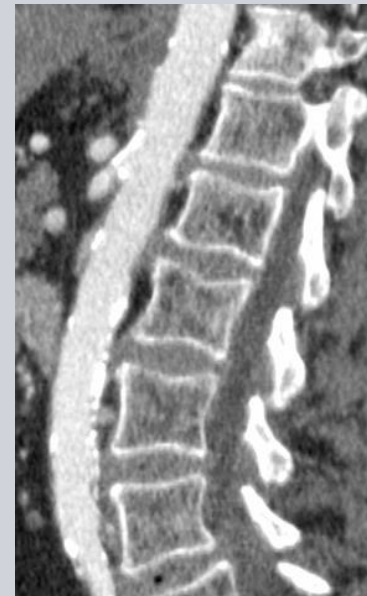
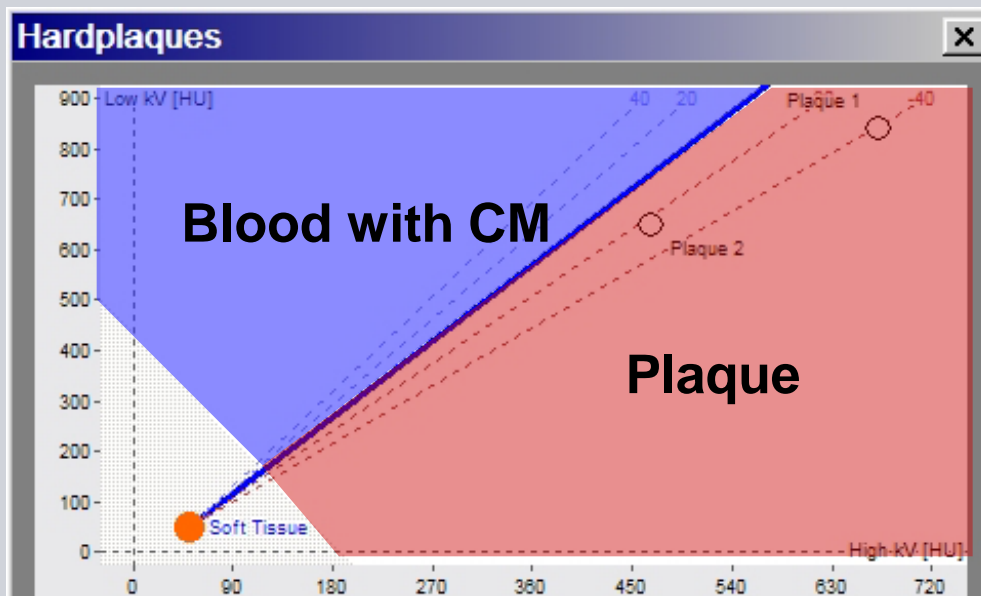


# Rationale behind DE Hardplaques

**Motivation – Highlight calcified plaques in DE CTA data even if they have HU values that are comparable to the neighboring contrast agent**

- 2 base materials are considered – Blood and Bone (plaque)
- Attenuation behaviors of iodine and bone differ greatly at 80 kV and at 140 kV and this difference is used to differentiate between iodinated blood and bone voxels
- The blue line represents the border between iodinated blood and calcified plaque

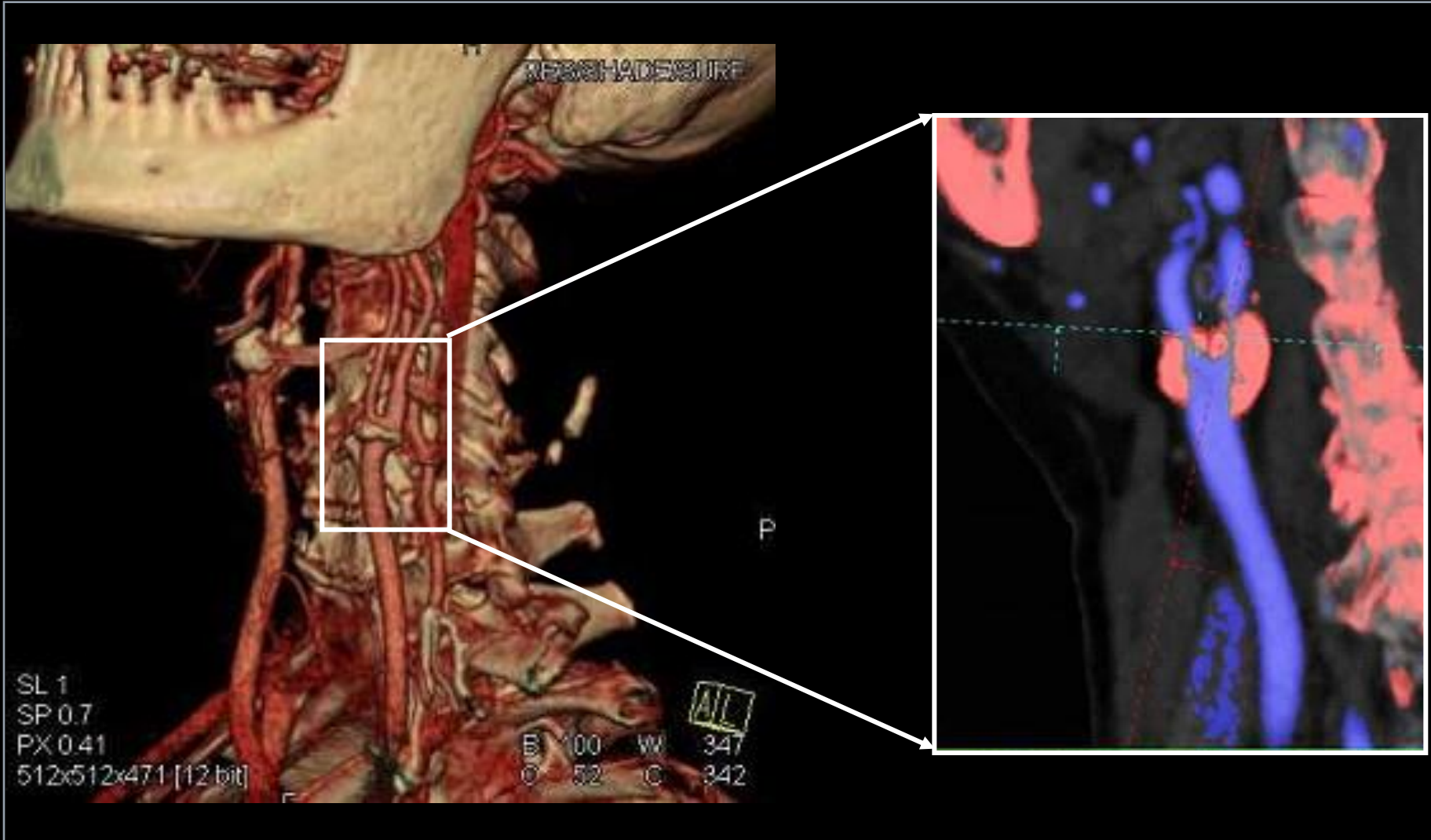
**Color LUT** is applied to highlight iodinated blood in **blue** and calcified plaque in **red**



**syngo DualEnergy**

**Differentiation between hard plaques and contrast agent**

**SIEMENS**



Courtesy of CCM Monaco, Monaco



# syngo Dual Energy – Kidney Stones

## Clinical Background and Motivation

- Kidney (and ureteral) stones are one of the most common and frequently painful disorders of the urinary tract
- Dual Energy imaging can depicts the chemical differences of the stones, permits differentiation of uric acid (UA) and non uric acid stones
- Identification of uric acid stones is important because non-invasive treatment (urinary alkalinization) can be prescribed early without lengthy metabolic workup e.g. 24-hour urine collection, and blood serum collection
- DECT can provide simple and reliable differentiation if UA versus non-UA stones, thereby potentially saving patients from undergoing invasive treatment procedures

# Kidney stone types

There are four common stone types in the human body

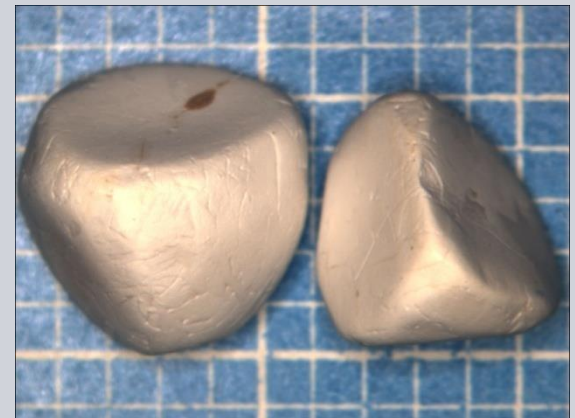
## Calcium Stones

- Mainly consists of calcium oxalate or calcium phosphate and less frequently of hydroxyapatite
- 75% prevalence



## Struvite Stones

- Mainly consists of magnesium ammonium phosphate
- They develop when there is too much ammonia in the urine and maybe form after an infection in the urinary system
- 15 % prevalence



# Kidney stone types

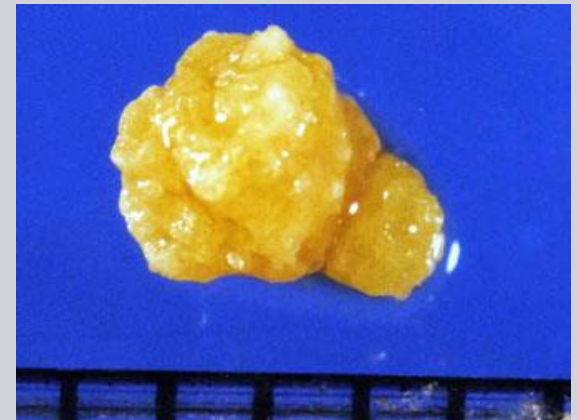
## Uric acid Stones

- Excess amounts of uric acid can be caused by high purine intake with diets consist mainly of meats, fish, legumes and meat extracts
- 6 – 10 % prevalence



## Cystine Stones

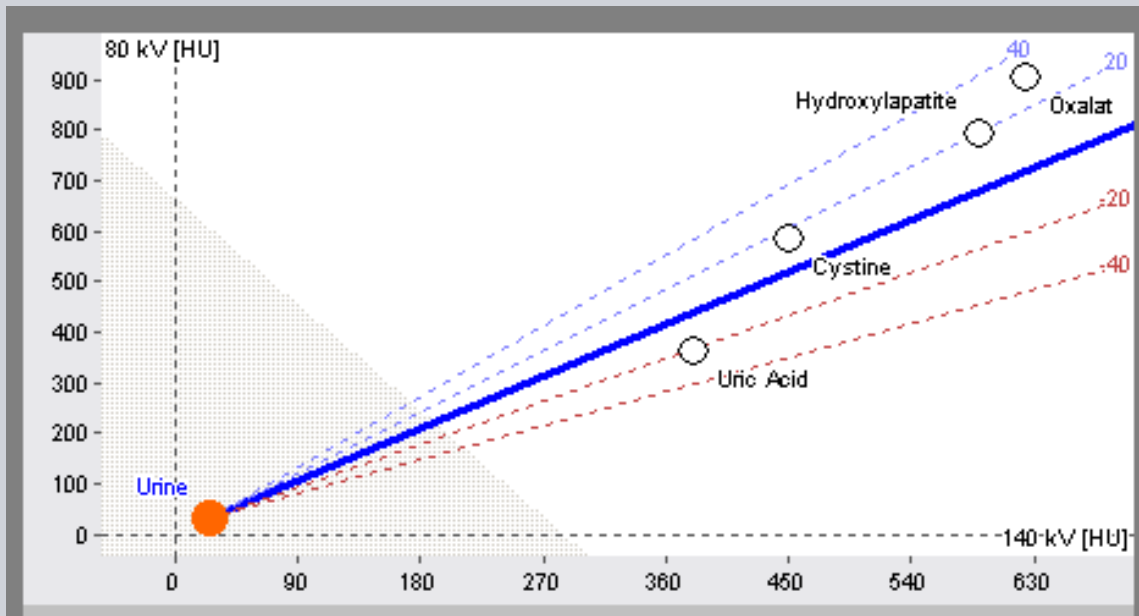
- Cystine stones are yellow and crystalline
- They are rare and develop when a metabolic defect keeps the kidneys from reabsorbing several compounds
- 2 % prevalence



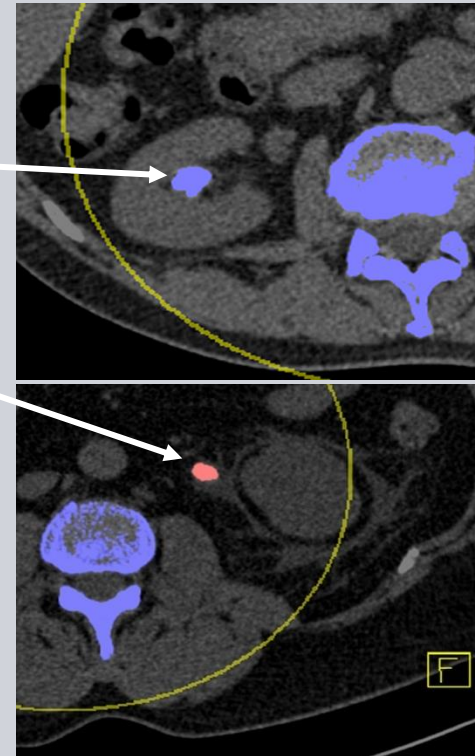
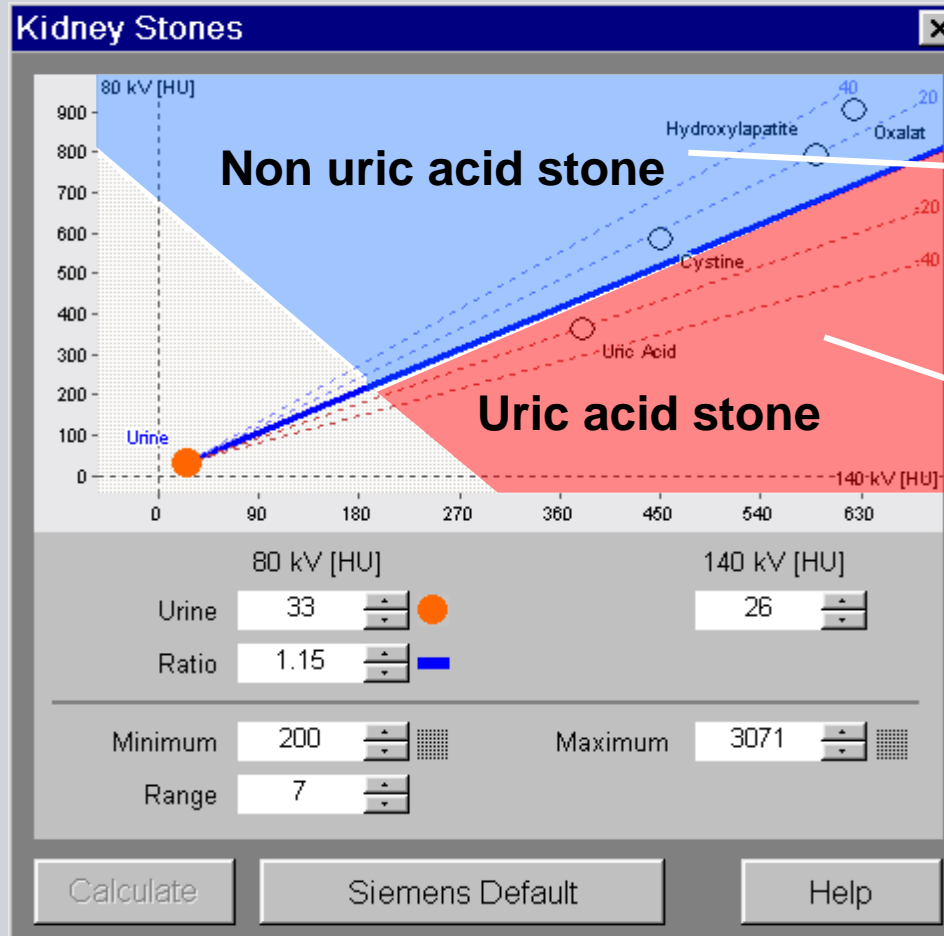
# Rationale behind DE Kidney Stones Algorithm

## Goal – Characterization of Kidney Stone Composition

- Uric acid stones are composed of light chemical elements (H, C, N, O); other stone types (calcium, oxalate, hydroxyapatite, cystine) are composed of heavy elements (P, Ca, S)
- Uric acid stones have higher CT numbers at higher kV than at lower kV; other stone types have higher CT number at lower kV than at high kV (as indicated in the graph)
- The algorithm distinguishes between uric acid stones from other stone types by exploiting the difference in the stones attenuation properties at high and low kV



# Principle of Material Decomposition

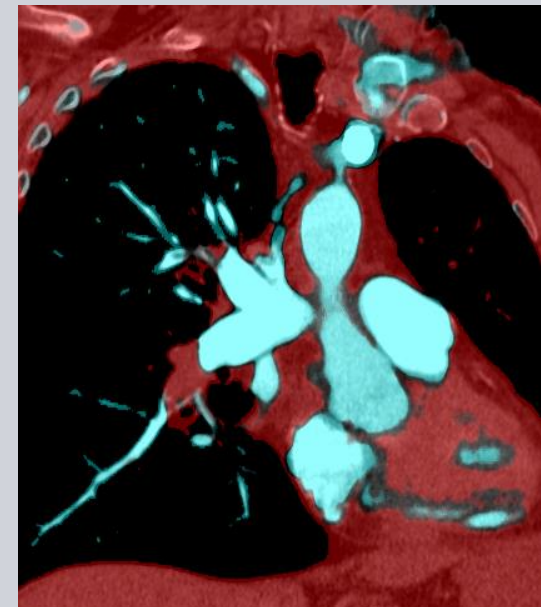
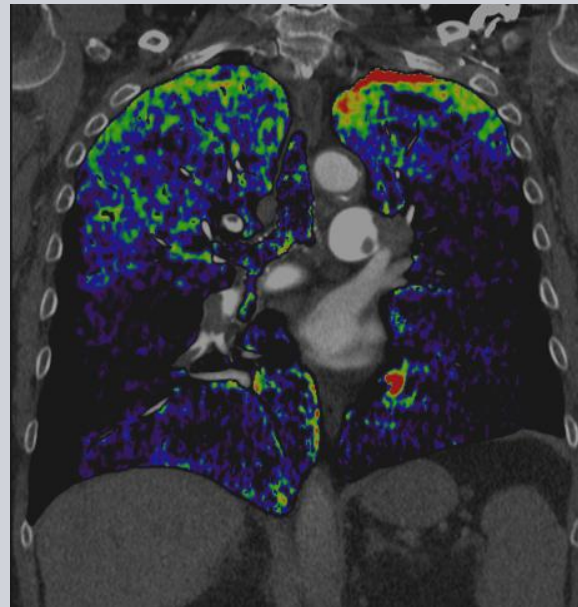
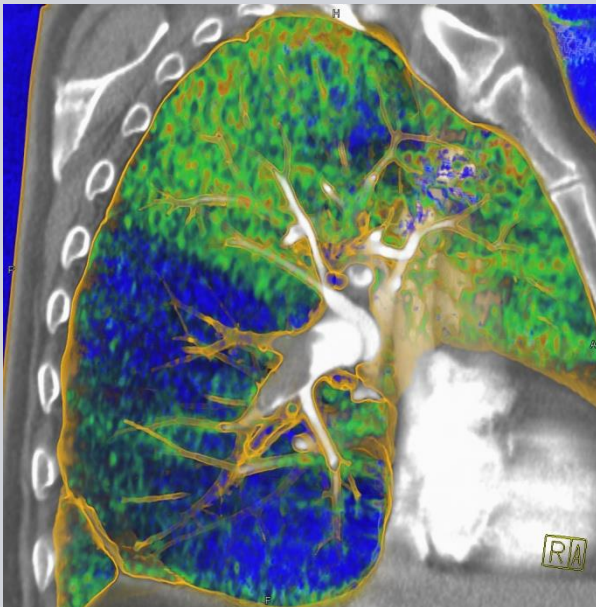


- Material decomposition into uric acid, soft tissue (gray area) and oxalate
- Blue line represents separation border between uric acid and non uric acid stones; its ratio determines the color (i.e. types) of the stone in the result image
- Color overlay is applied to differentiate the two stone types: **uric acid stones in red** and **non uric acid stones in blue**

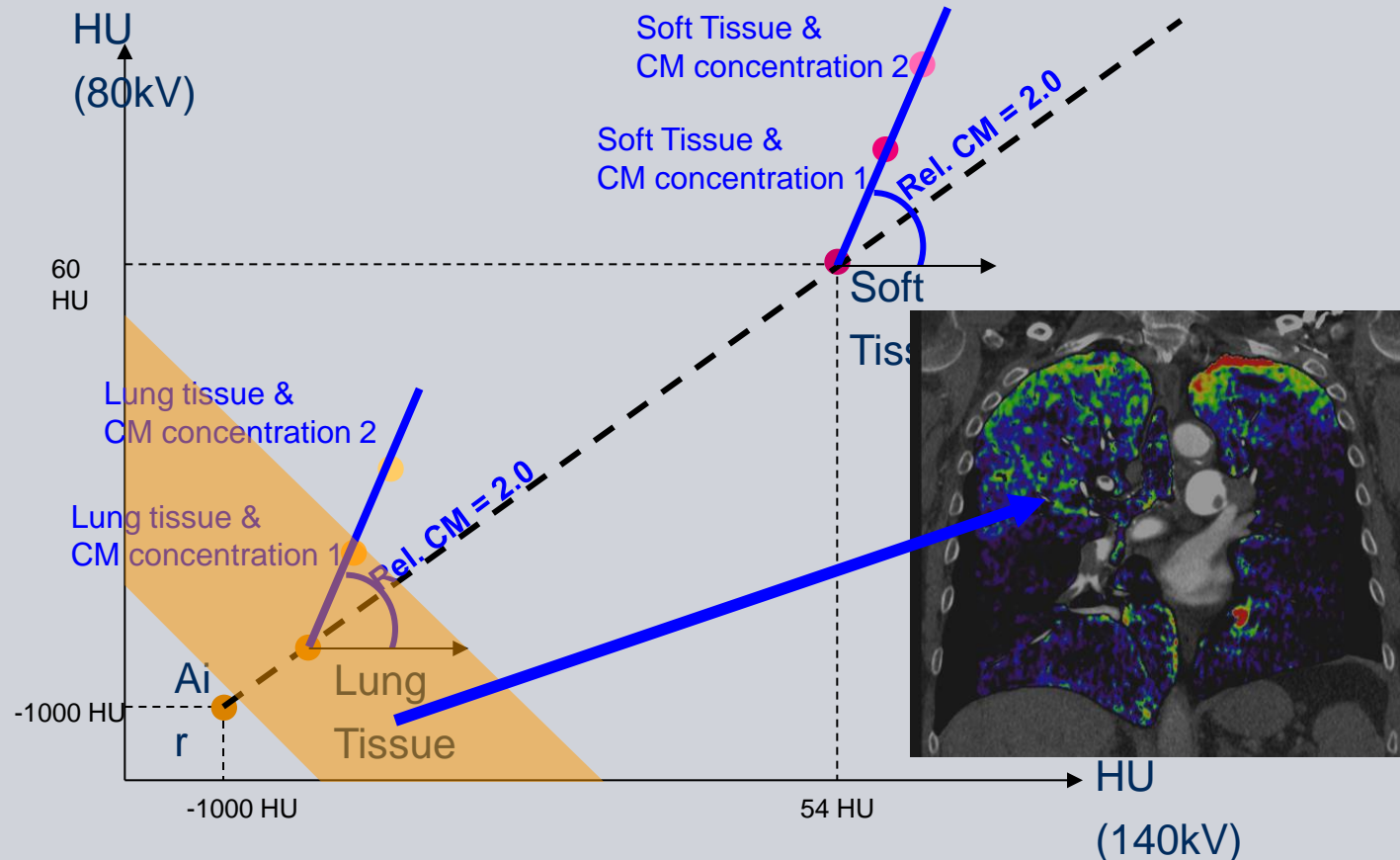


## DE CTA Lung Perfusion – Clinical Background

- CT angiography has proven to be the initial test of choice for the detection of pulmonary embolism (> 95% sensitivity and specificity)
- Discrepancy between the clinical relevance and size or location of pulmonary embolism
- Small occlusive emboli may be more relevant for blood oxygenation than large central, non-occlusive emboli



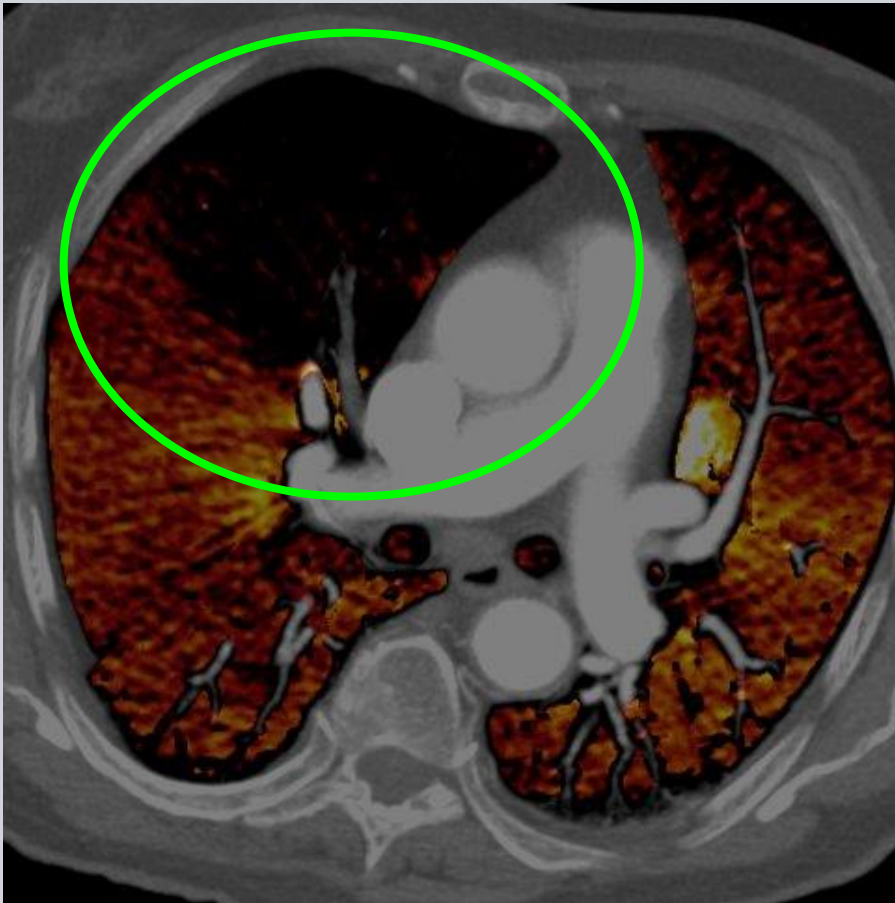
# DE Lung PBV - Principle of Material Decomposition



- 3 base materials are considered – Iodine, Air & Soft Tissues
  - HU Threshold set to include the lung parenchyma (orange area) for the calculation
  - Perfused lung tissue contains both air, soft tissue and iodine
  - Iodine distribution can be mapped in color to visualize perfusion deficits in the lungs

## Lung PBV (Perfused blood volume)

The degree of enhancement (iodine distribution) in the lung parenchyma is represented by a Color Overlay in the result images



- determine amount of contrast agent in lung parenchyma
- find affected region with perfusion defect

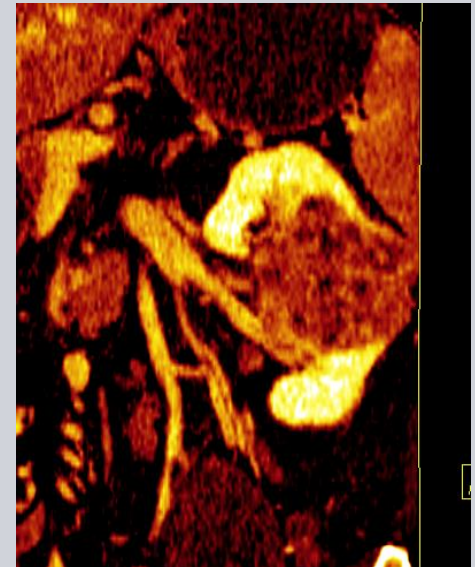
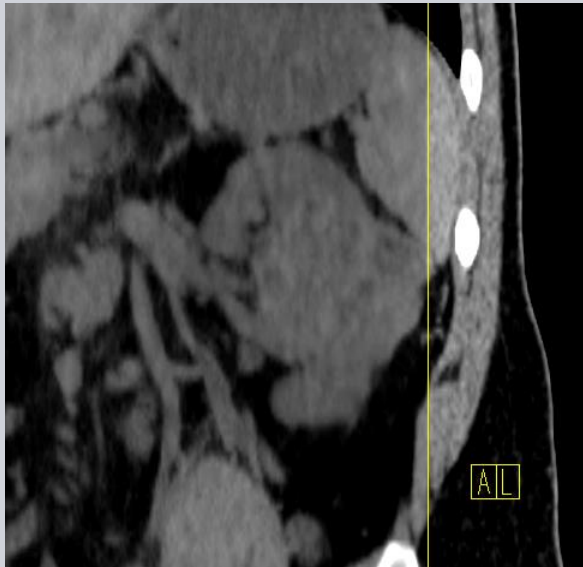


# DE Virtual Non-Contrast (VNC) Clinical Applications

## FACTS:

Over 90% of CT examinations requires intravenous contrast enhancement

- In some examinations, non-contrast scans are performed to:
  - Establish a baseline for lesion or tissue enhancement
  - Detect the presence of calcifications
  - Rule out stones
  - Rule out hemorrhage or active bleed



## Motivation for Liver VNC application

**Dual Energy Liver VNC Application** generates Virtual Noncontrast (VNC) images from a DE contrast enhanced study

The VNC images can be used for:

- Baseline density measurement of lesions in the kidneys and liver ***without the need for an additional noncontrast scan***
- Rule out or detection of calcifications, stones or active bleed in contrast exams ***without the need for an additional noncontrast scan***

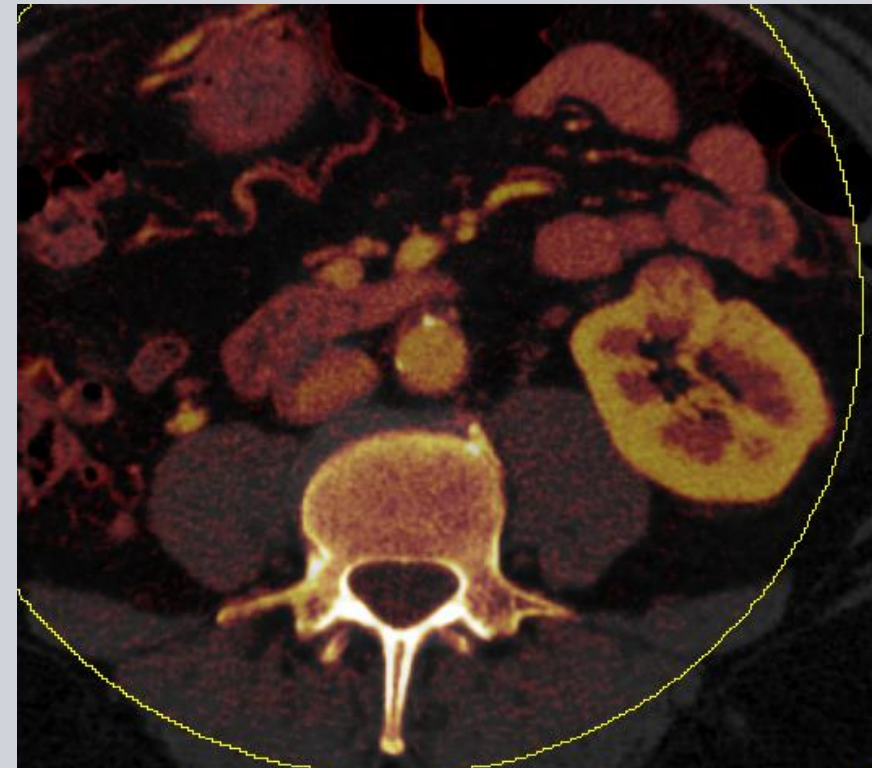
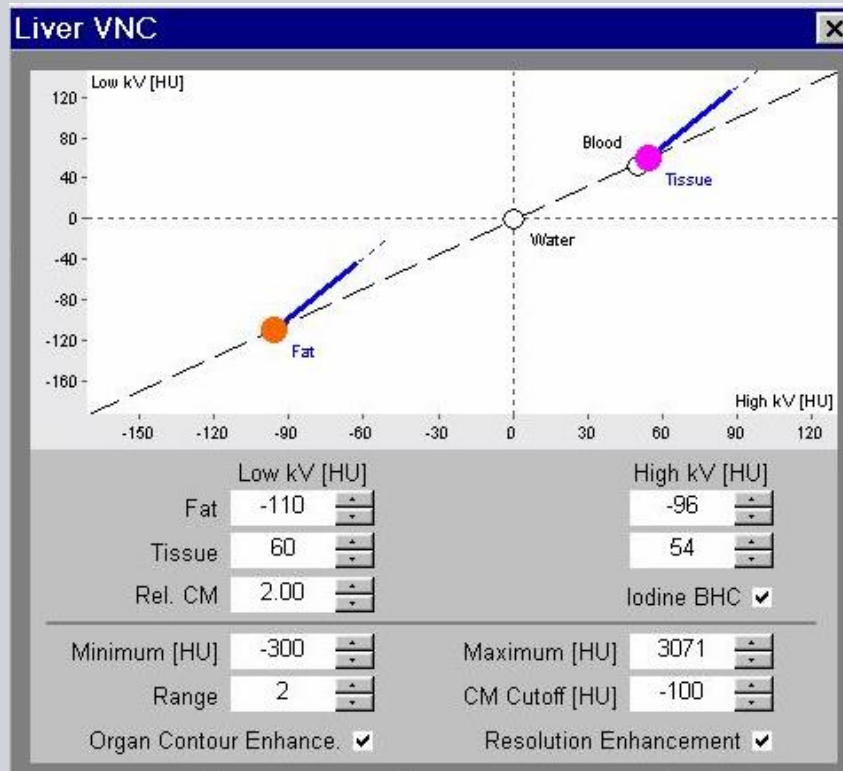
→ **Bottom line: Reduce radiation dose to patient by eliminating non-contrast scan**

# Rationale behind Liver VNC Algorithm

## Motivation – Visualization of contrast uptake in soft tissue organs

3 base materials are considered – Fat, Soft Tissues and Iodine

- Iodine distribution is mapped by a color **Overlay** which is blended over the VNC or Enhanced CT image
- Iodine voxels are extracted from the DE datasets to generate the **VNC** image.

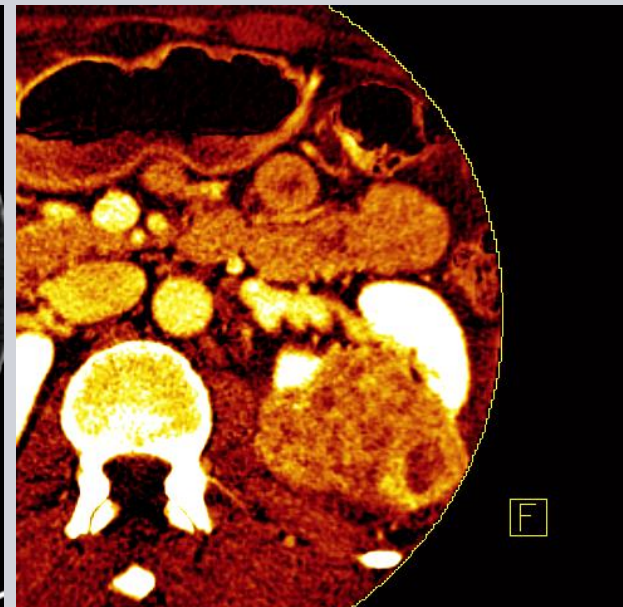
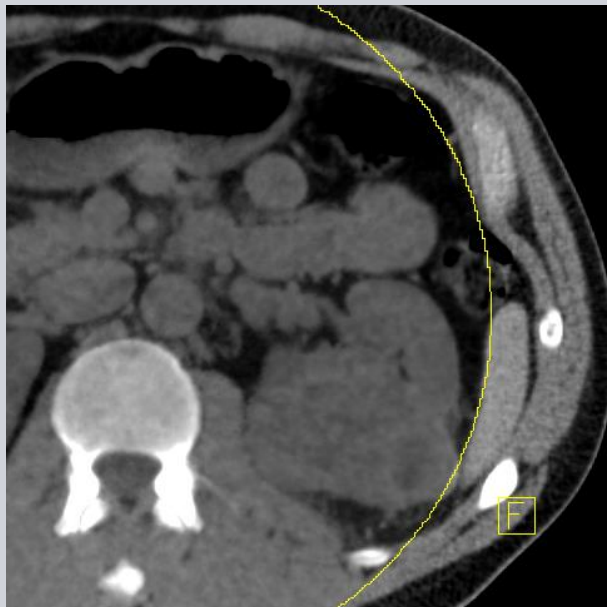


## 46 year old Male, Left Kidney Mass

Body diameter = 33 cm

DE scan acquired in the nephrographic, no non-contrast scan

- VNC image accurately depicts the mass, no intrarenal calcification
- Post-contrast CT image shows that the mass is enhanced
- Overlay image provides an iodine distribution map for the kidney and mass

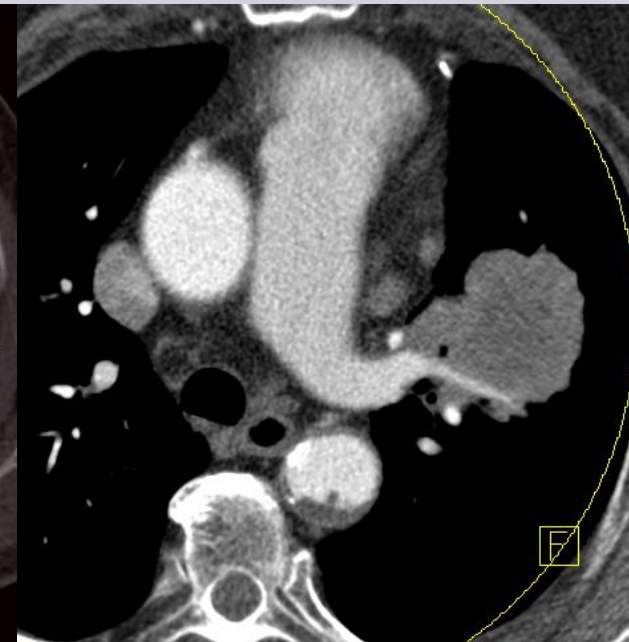
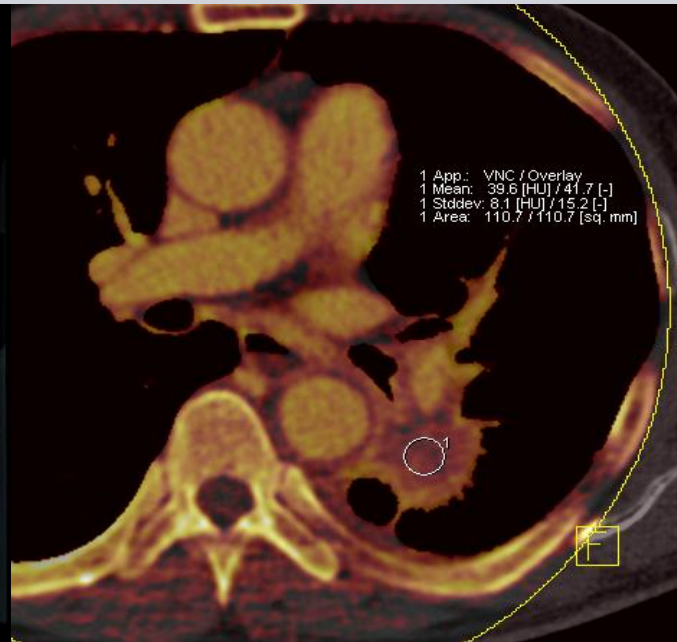
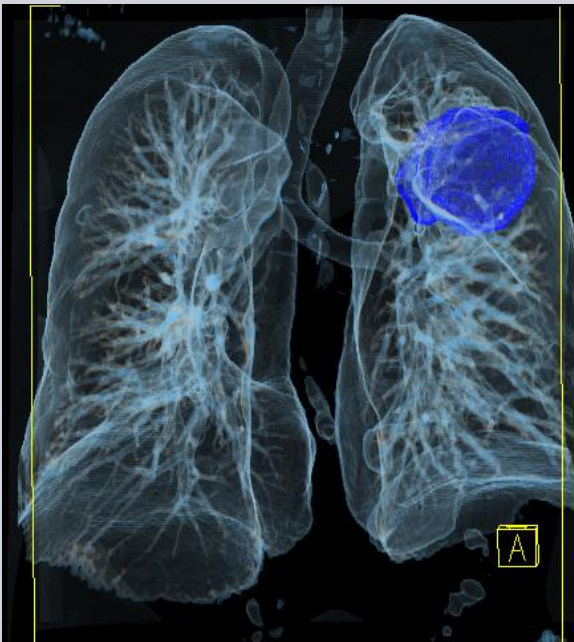




# syngo DE Lung Nodule

## Clinical Background - SPN

- **Solitary Pulmonary Nodules (SPNs)** - a **single**, discrete pulmonary opacity with **< 3cm in diameter**, surrounded by normal tissue
- Usually **asymptomatic**
- SPNs are one of the most common thoracic radiographic findings



# SOMATOM Definition Flash

Small pulmonary emboli causing perfusion deficit

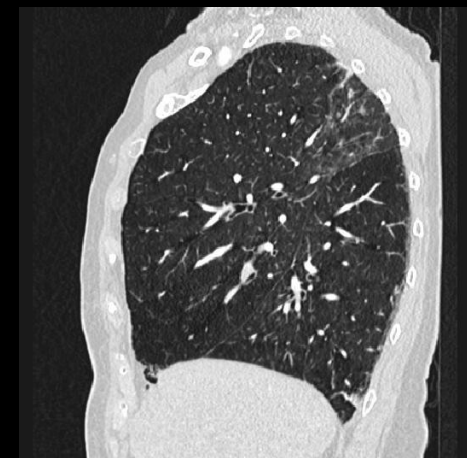
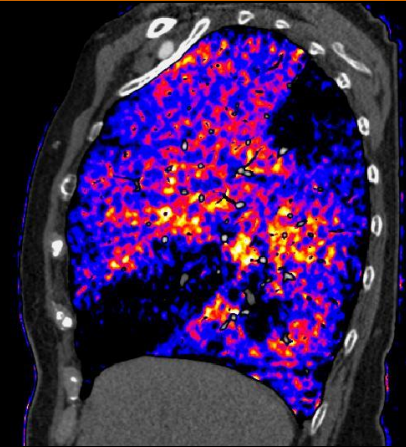
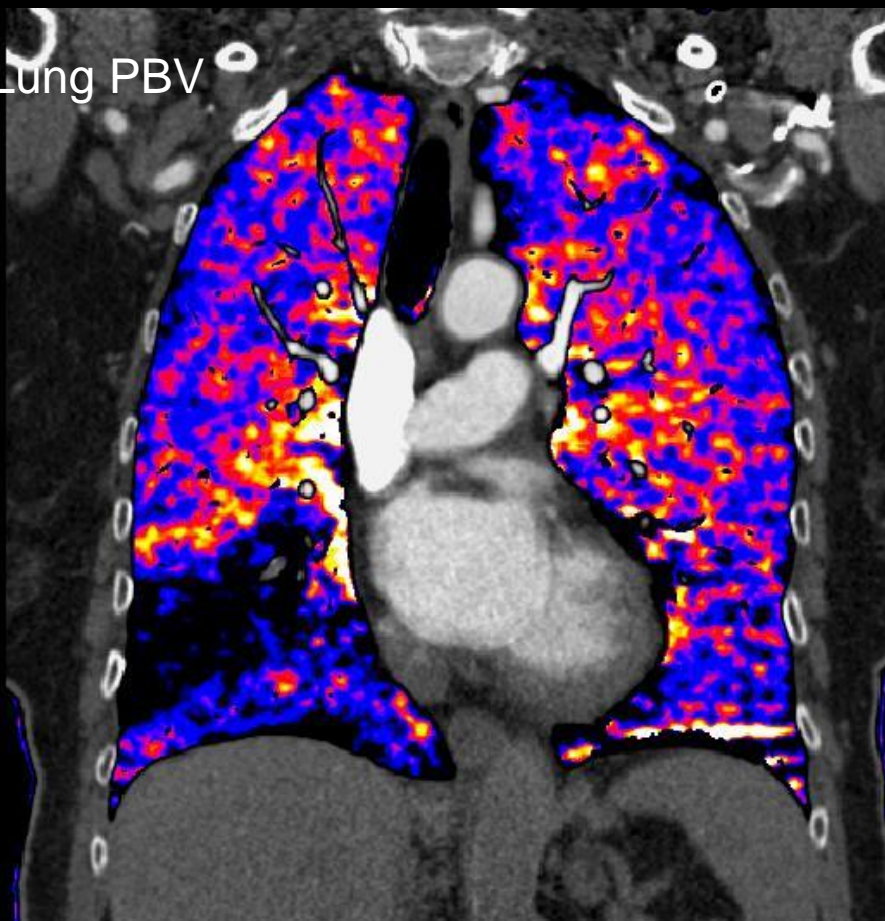
SIEMENS

Characterize

Highlight

Quantify

*syngo* DE Lung PBV



Courtesy of Hospital Povisa / Vigo, Spain

SOMATOM Definition Flash: 0.33 mm spatial resolution, 12 s for 287 mm, 0.28 s rotation, 100/Sn140 kV, 40/100 effective mAs



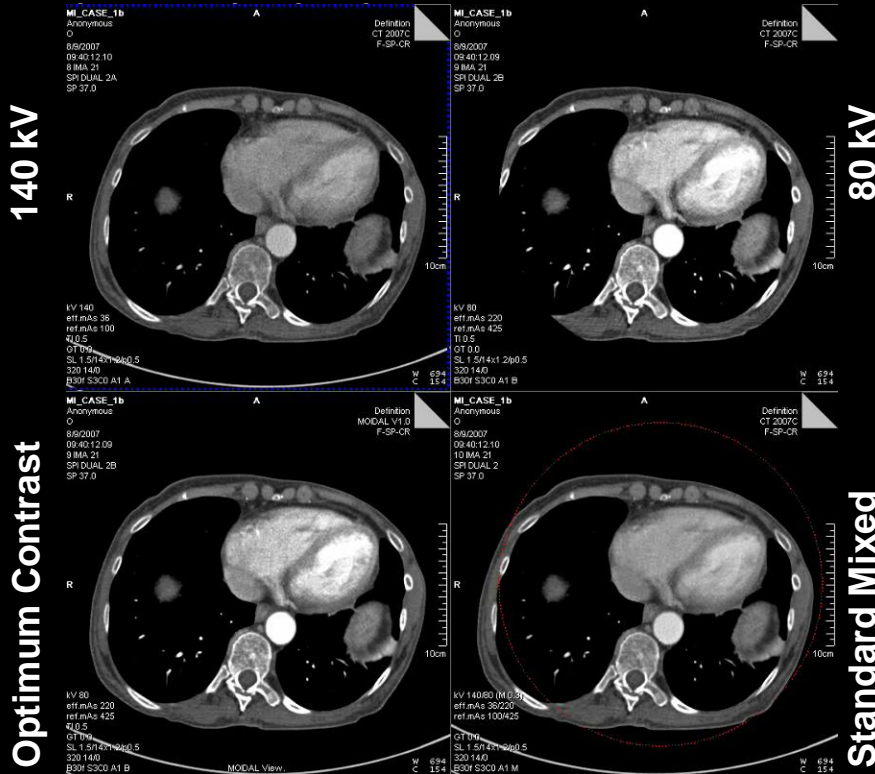
# Dual Source DE for all Patients

## General image optimization

SIEMENS

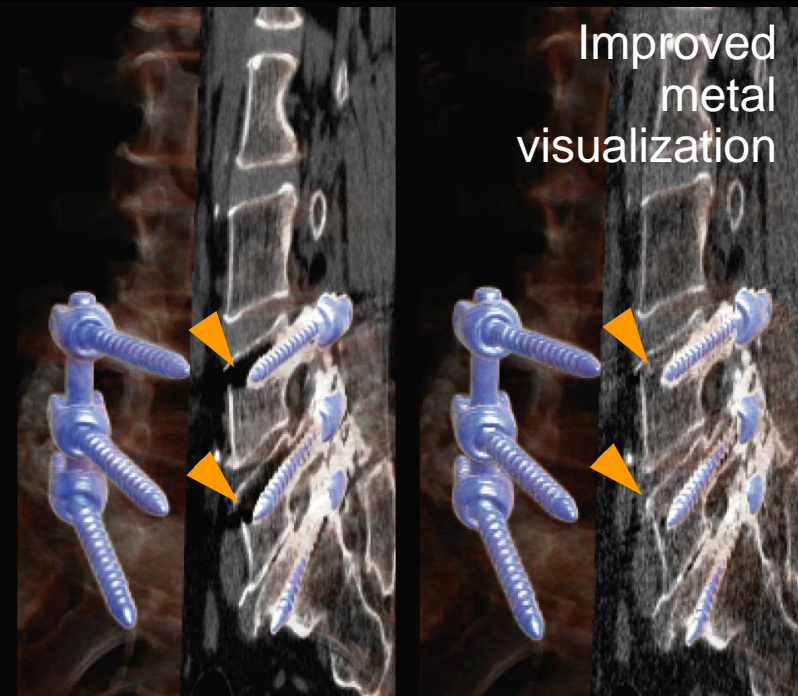
### Optimum Contrast

- Combines high iodine contrast of 80 kV with low noise of 140 kV



### Monoenergetic images

- Images of 151 energies can be calculated out of Dual Energy datasets (40 – 190 keV)





# Dual Source DE for all Patients

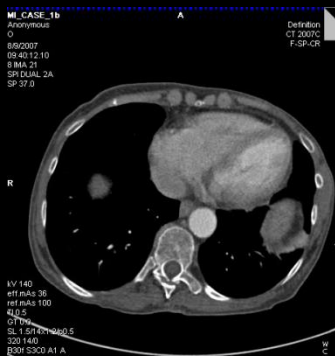
## General image optimization

SIEMENS

### Optimum Contrast

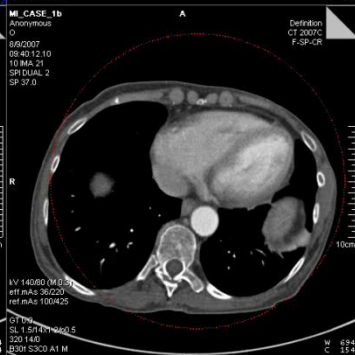
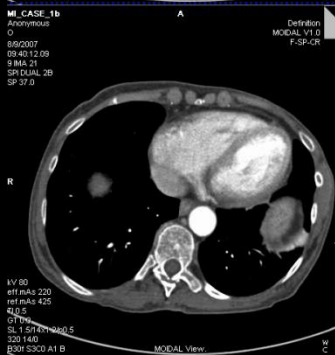
- Combines high iodine contrast of 80 kV with low noise of 140 kV into a single dataset

140 kV



80 kV

Optimum Contrast



Standard Mixed

### Monoenergetic images

- Images of 151 energies calculated out of DE datasets (40 – 190 keV)
- Example: metal artifact reduction



Metal blurring with conventional CT



Improved metal display with Dual Energy

# SOMATOM Definition Flash

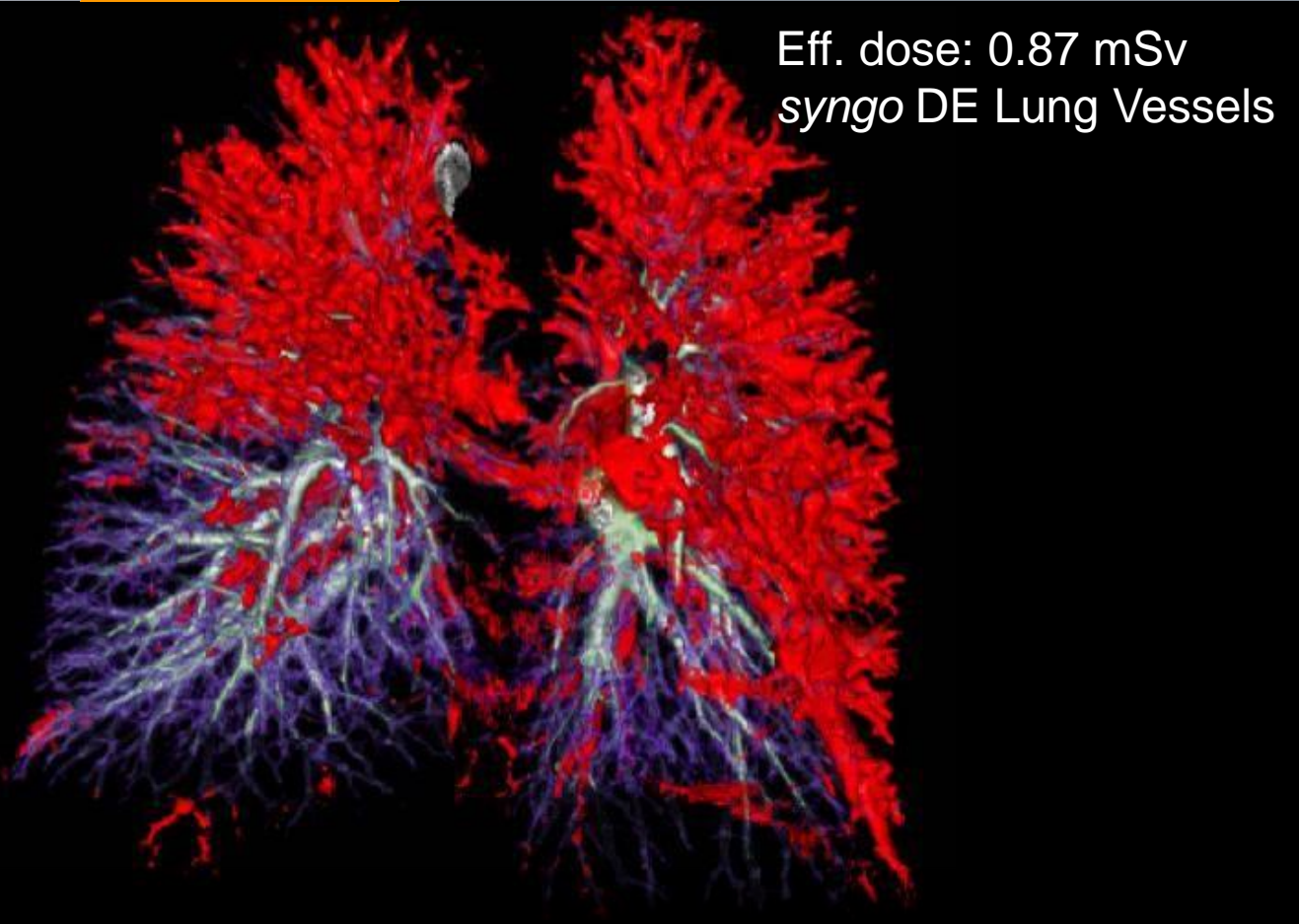
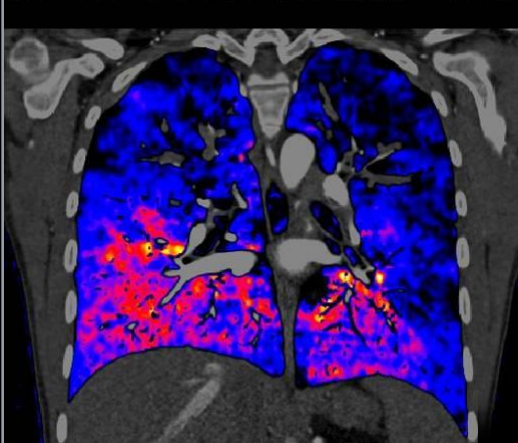
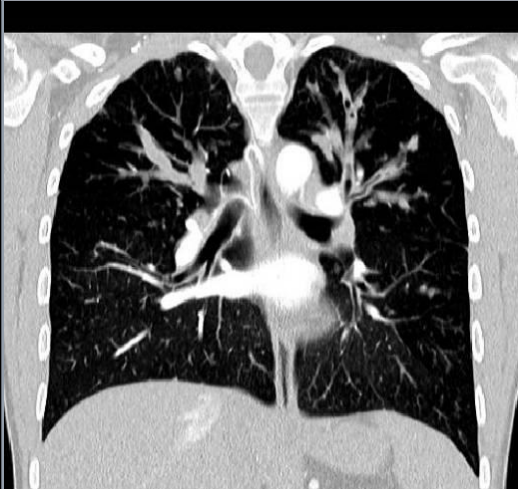
## Low dose imaging of cystic fibrosis

SIEMENS

Characterize

Highlight

Quantify



Eff. dose: 0.87 mSv  
syngo DE Lung Vessels

# Dual Source DE for all Patients

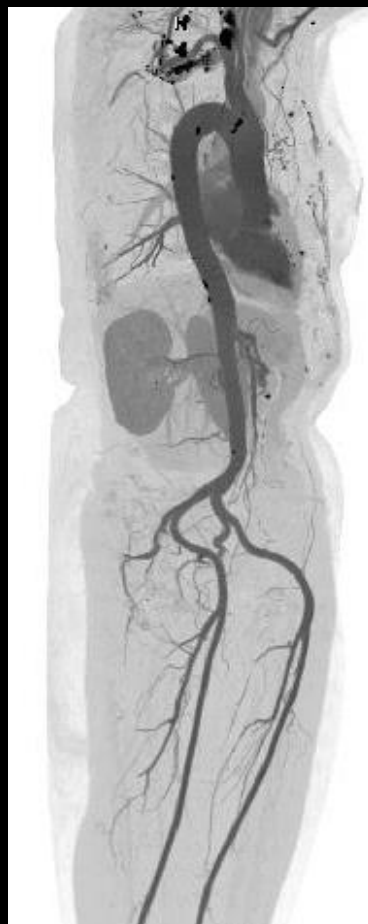
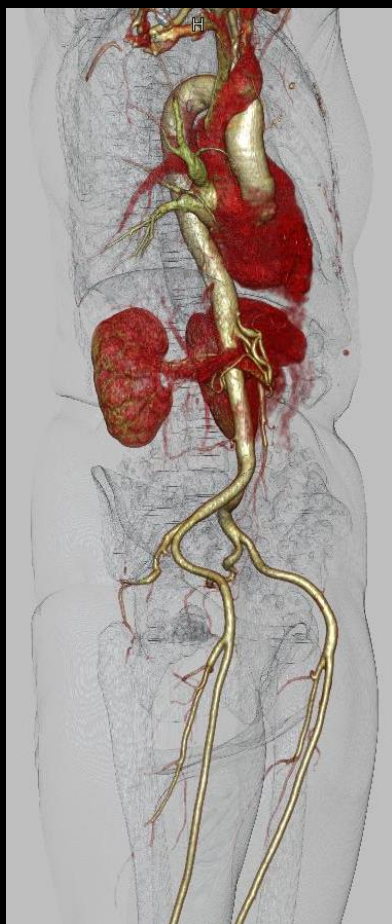
Quick bone removal pre-processed with *syngo.via*

**SIEMENS**

Characterize

Highlight

Quantify





# Dual Source DE for all Patients

Pre-processed bone & hard plaque removal with *syngo.via*

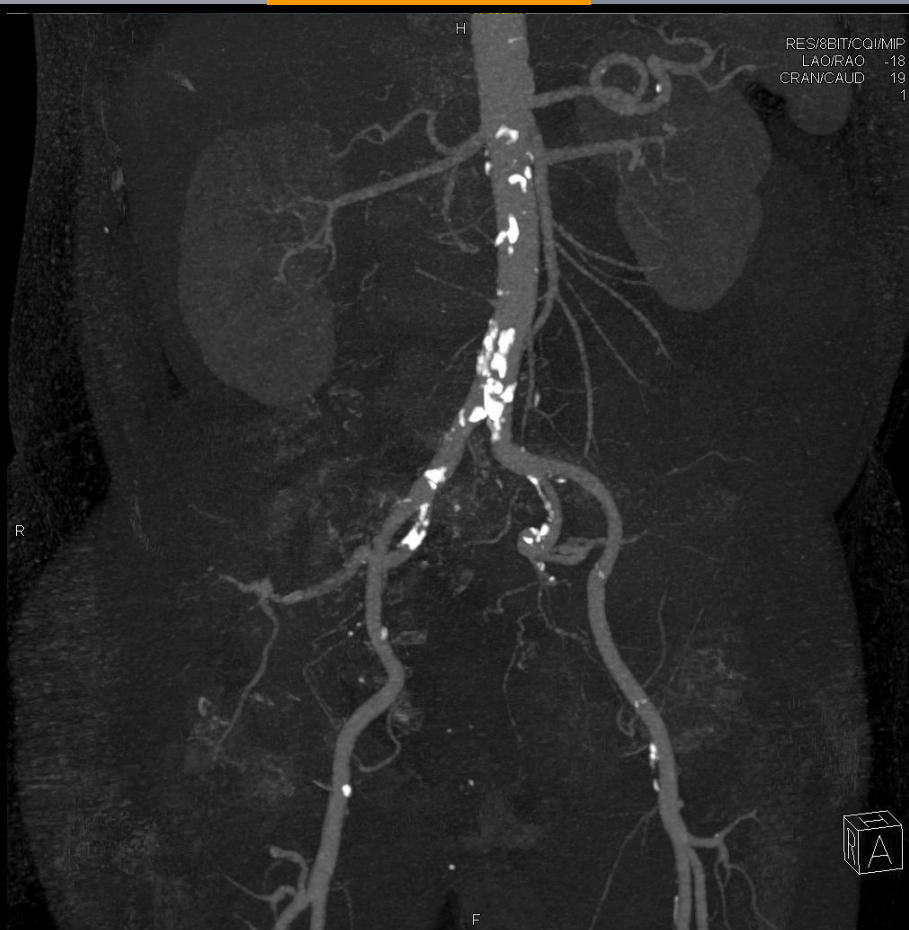
SIEMENS

Characterize

Highlight

Quantify

Plaque on



**Computed Tomography.  
Answers for life.**