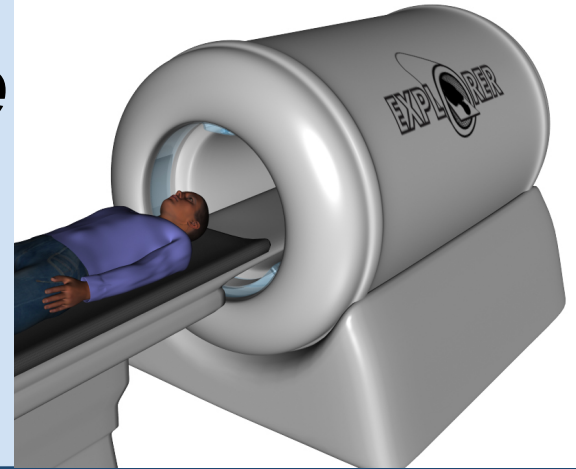


# **EXPLORER** *An Ultra-Sensitive Total Body PET Scanner for Biomedical Research*



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Jennifer Huber, Srilalan Krishnamoorthy,  
Qiyi Peng, Jonathan Poon,  
Suleman Surti, Xuezhu Zhang, Jian Zhou,  
Terry Jones, Ramsey Badawi

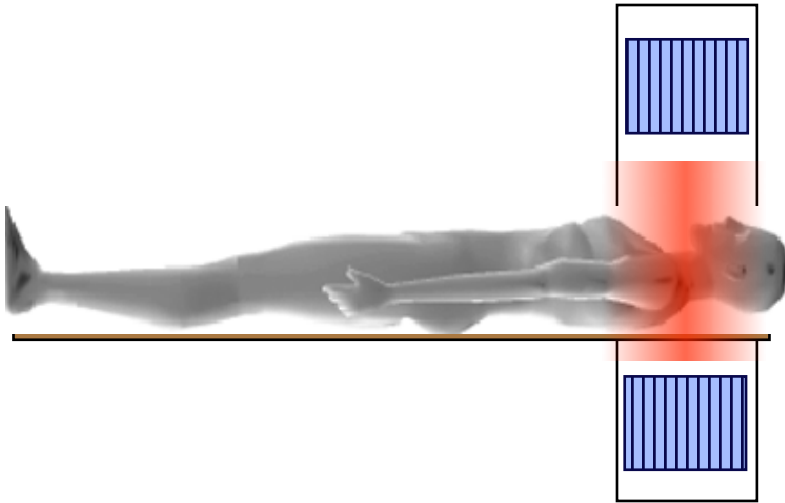


# Acknowledgments

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- ***Senior Advisors:***
  - Tom Budinger and Michael Phelps
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  - Pat Price (Imperial College)
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# Sensitivity – Every Count Counts

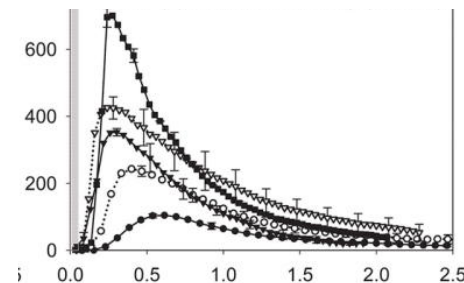
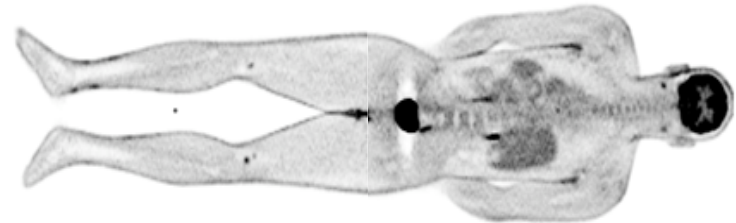
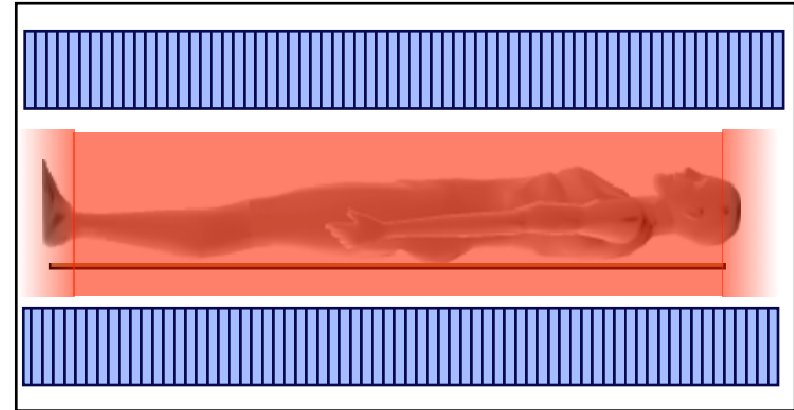


- PET provides the most sensitive non-invasive molecular assay of the human body
- All PET studies are limited by statistics, radiation dose, or both

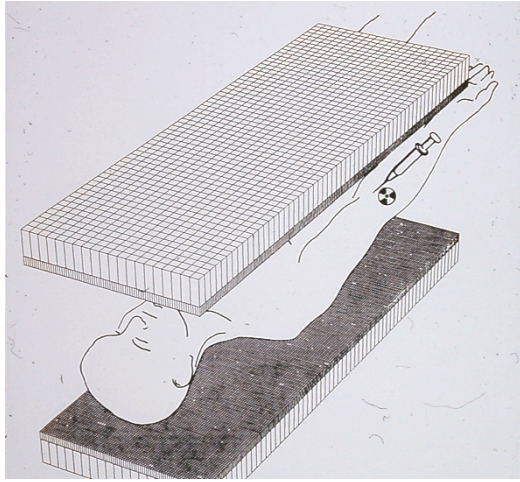
**Current scanners do not maximize the sensitivity for whole-body imaging**

# Total-Body PET: Maximizing Sensitivity

- x40 gain NEC!
- Higher statistics
  - Support higher spatial resolution
- Lower radiation dose
  - Whole body scans at  $\sim 100 \mu\text{Sv}$
- Higher dynamic range
  - Late imaging, 5 more  $T_{1/2}$
- Whole-body kinetics
  - Better temporal resolution
  - All tissues/organs simultaneously



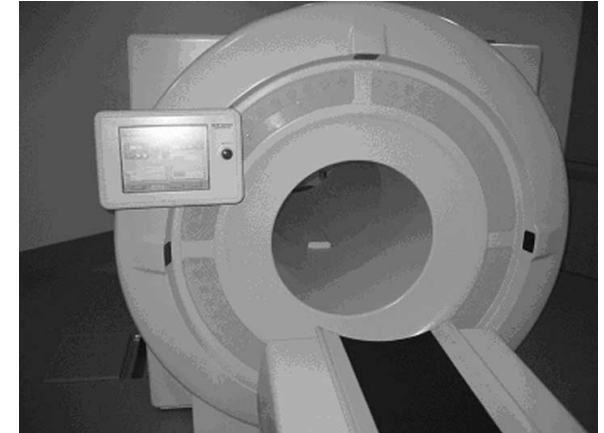
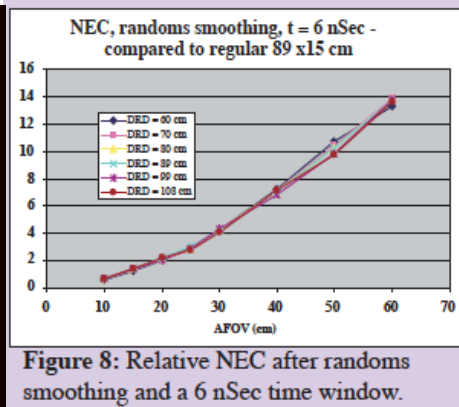
# Not a New Idea!



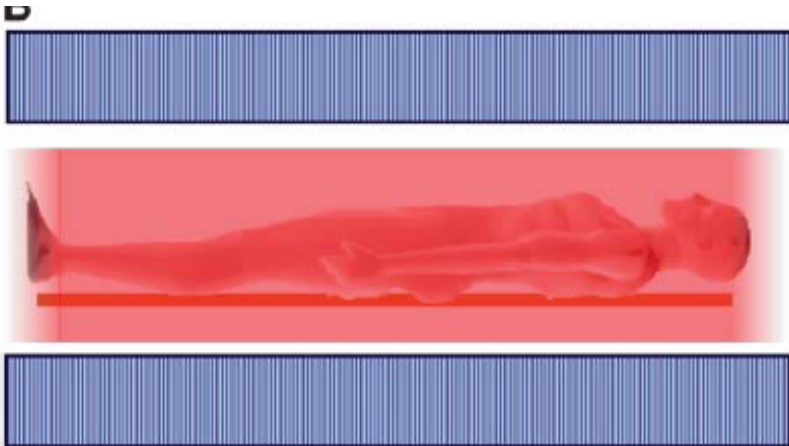
Terry Jones, circa 1990



Badawi et al, *IEEE Trans Nucl Sci* 2000;47:1228–32



Watanabe et al, *IEEE Trans Nucl Sci* 2004;51:796–800.



Cherry, *J Nucl Med* 2006;47:1735–45.

Eriksson et al.  
*IEEE Nucl Sci Symp Conf Rec* 2008:1632–6.

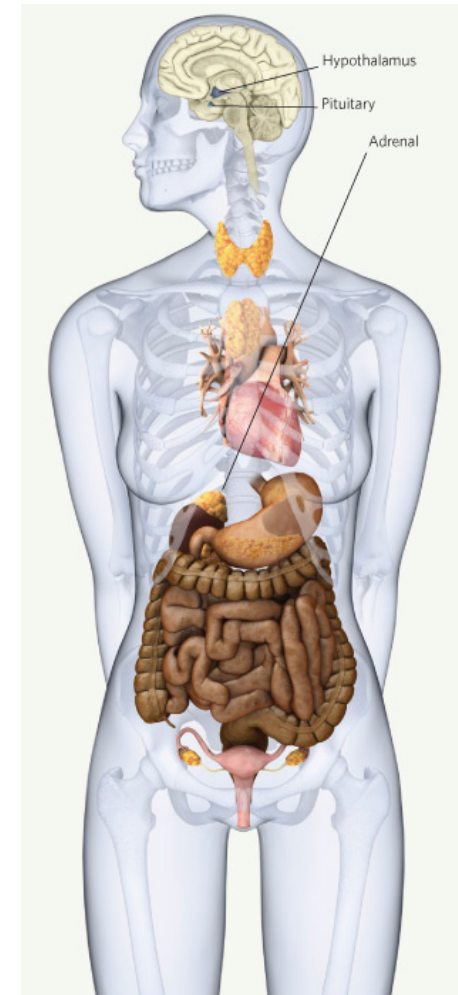
Borasi et al.  
*Eur J Nucl Med Mol Imaging* 2010; 37:1629–32.

Crosetto  
*IEEE Nucl Sci Symp Conf Rec* 2003; 2415–19.



# Applications

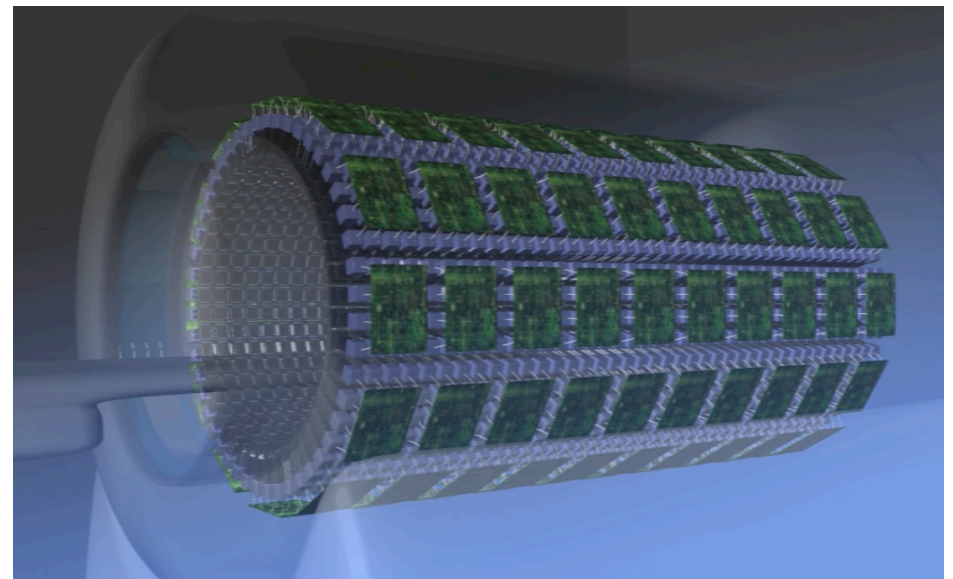
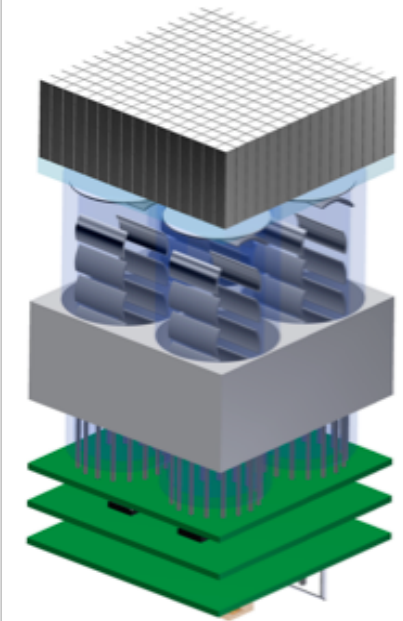
- **Systemic disease and therapies:**
  - Cancer: Ultra-staging and micrometastasis
  - Inflammation
  - Infection
  - Cellular therapy and trafficking
  - Mind-body interactions
- **Total body pharmacokinetics**
  - Drug development
  - Toxicology
  - Biomarker discovery
- **Low Dose may enable:**
  - Expanded use in pediatrics
  - Use in chronic disease
  - Studies of normal biology





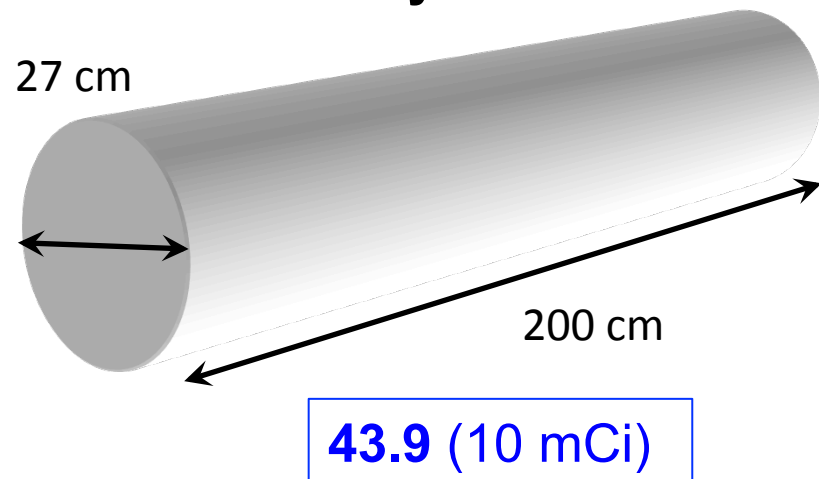
# Working Design

- Modular “Block” Detectors
- $\sim 3.1 \times 3.1 \times 20$  mm L(Y)SO (16 x16)
- PMT (possibly SiPM) readout
- Time of flight and 1-bit DOI
- 40 rings, 48 detectors/ring
- $\sim 78.6$  cm ring diameter
- 215 cm axial FOV
- OpenPET electronics

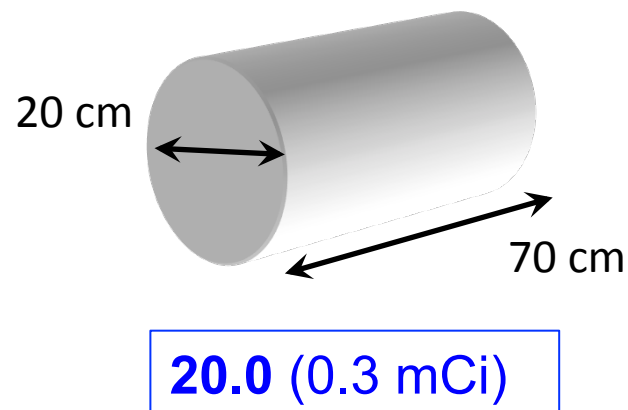


# Predicted NEC<sub>TOF</sub> Gains versus Siemens Biograph mCT

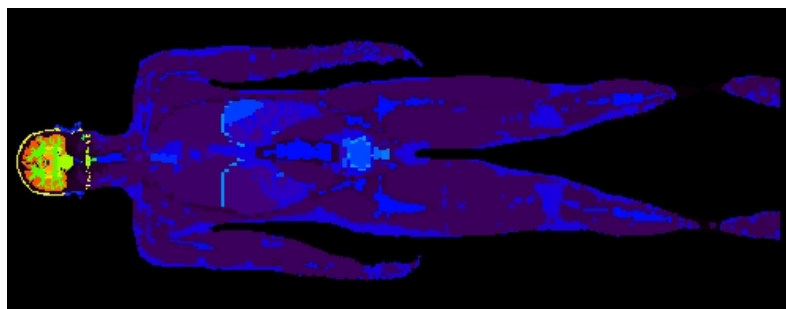
**Adult Total Body Phantom:**



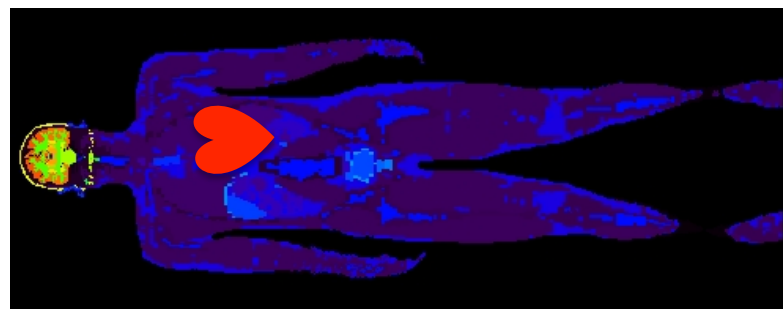
**Pediatric Total Body Phantom:**



**Brain:** (Voxtiss 8, 6:1 brain to body)

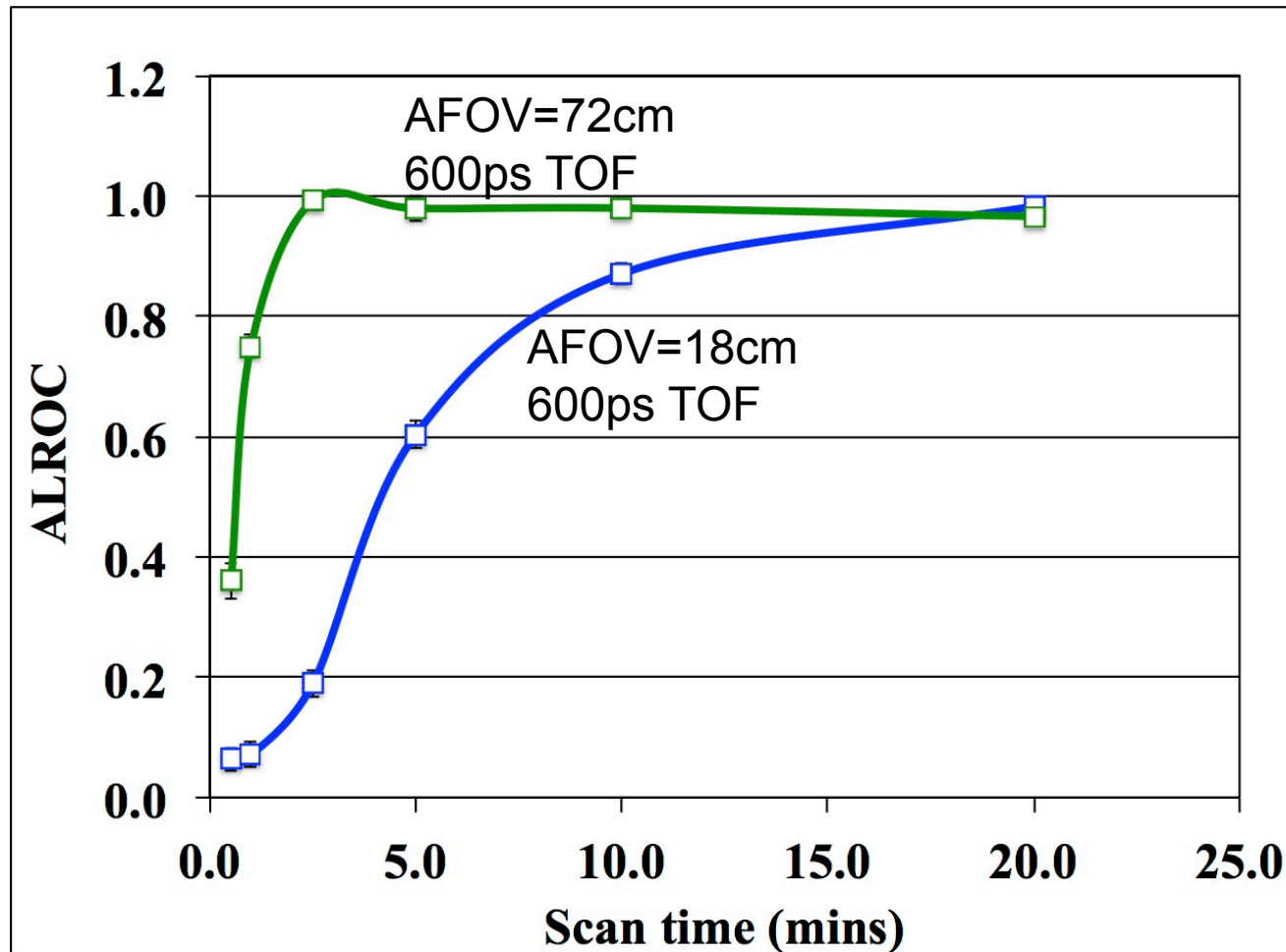


**Heart:** (Voxtiss 8, all in heart)

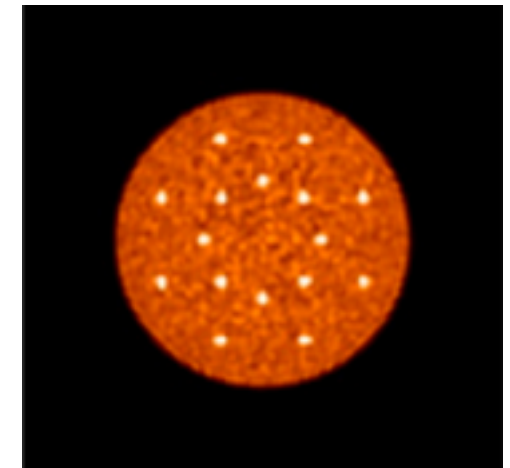
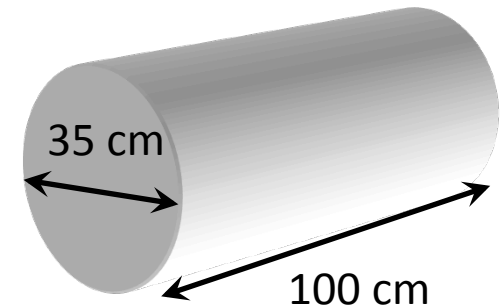




# Lesion Detectability - ALROC

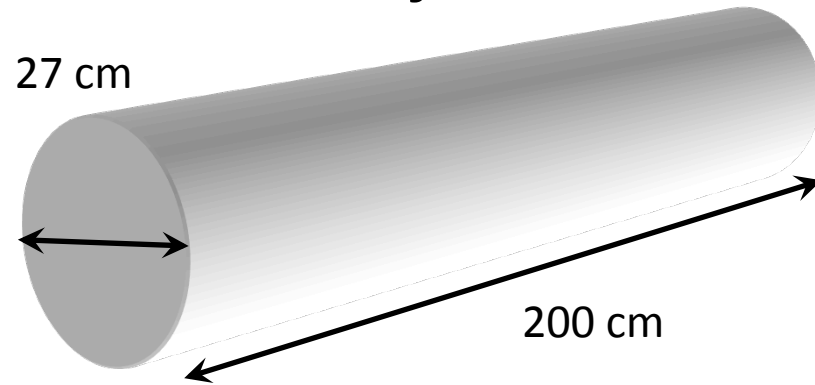


Scan times are total for imaging a 100 cm x 35cm dia. cylinder  
Spheres are 1.0 cm diameter with 3:1 uptake ratio



# Expected Counting Rates

**Adult Total Body Phantom:**



**10 mCi in phantom**

**Optimal ring difference:**  
284 (~40% axial FOV)

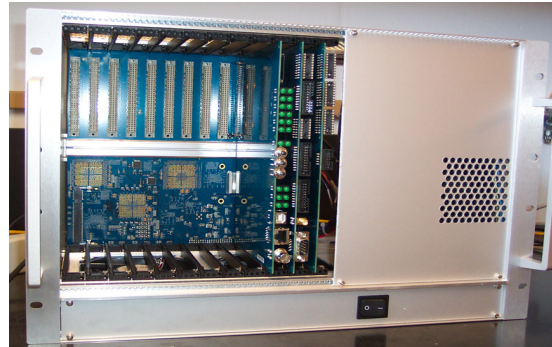
Singles:	164 Mcps
Prompts:	47 Mcps
Randoms:	34 Mcps

**Singles:Prompts ratio: 3.5**

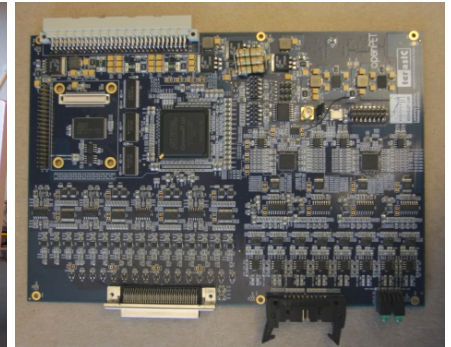


# Electronics openPET

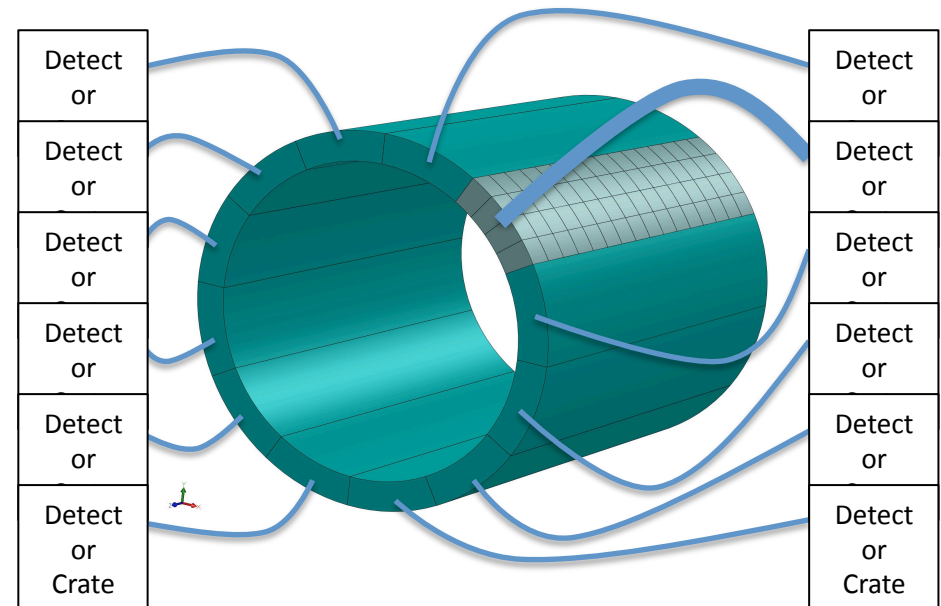
- Acquire singles
- Each detector crate writes singles to own disk
  - completely independent and scaleable
- Detector crates all synchronized in time
- Coincidences identified offline
  - complete flexibility in terms of energy window, timing windows etc...



Detector Crate

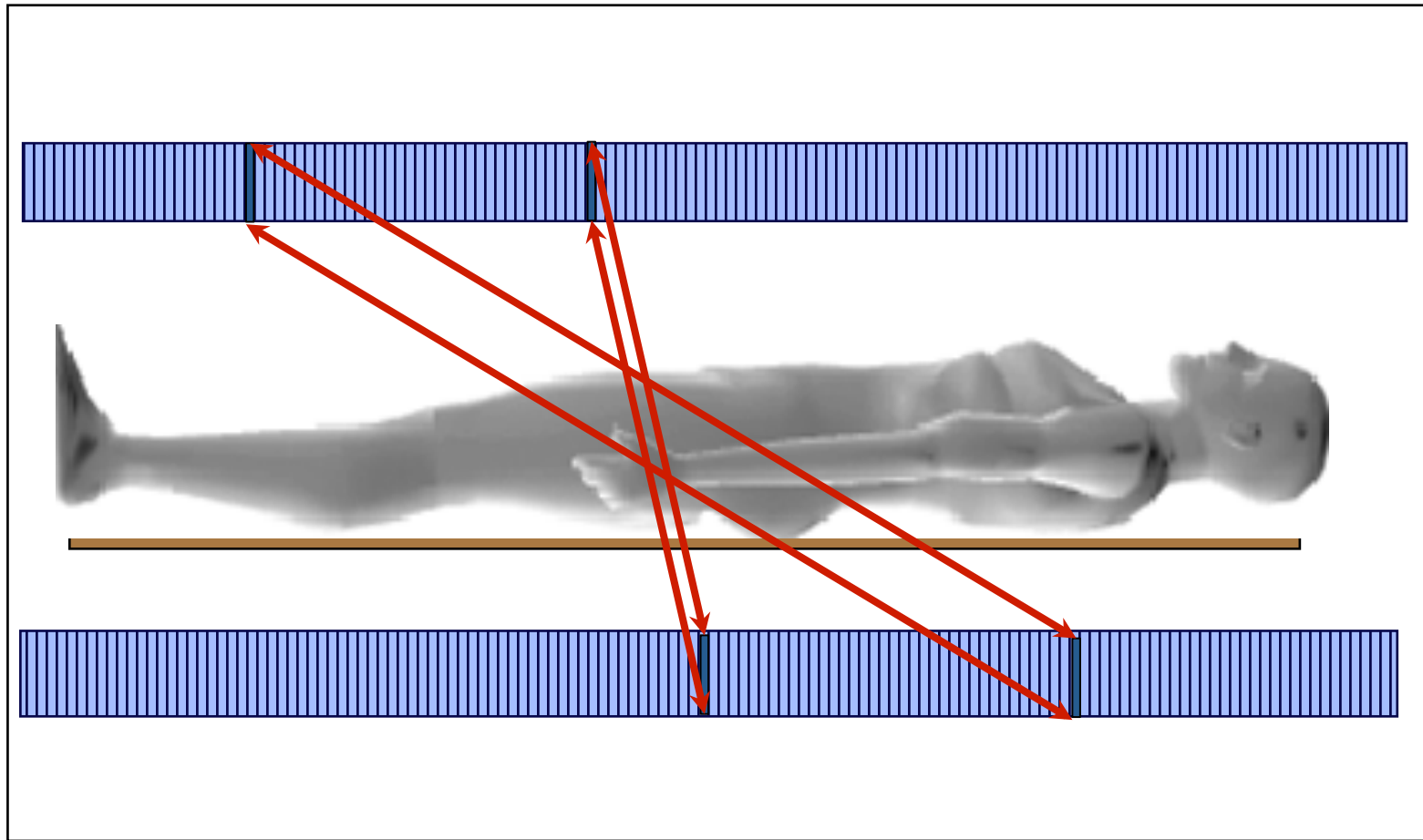


16 Channel  
Detector Board



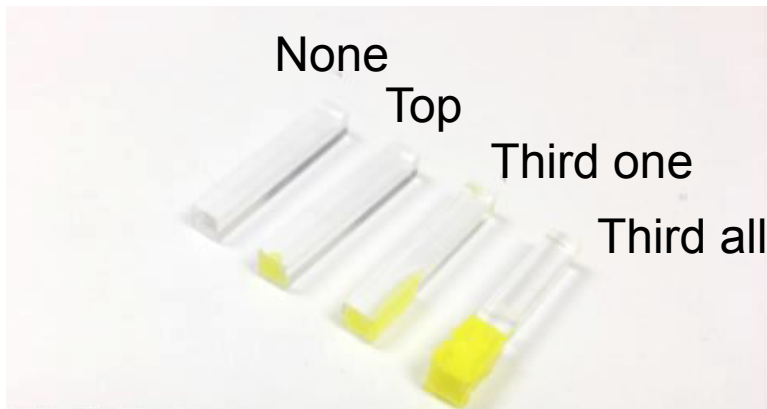
OpenPET Meeting  
18:30 Thursday ASEM 201

# Why DOI-Encoding may be Necessary

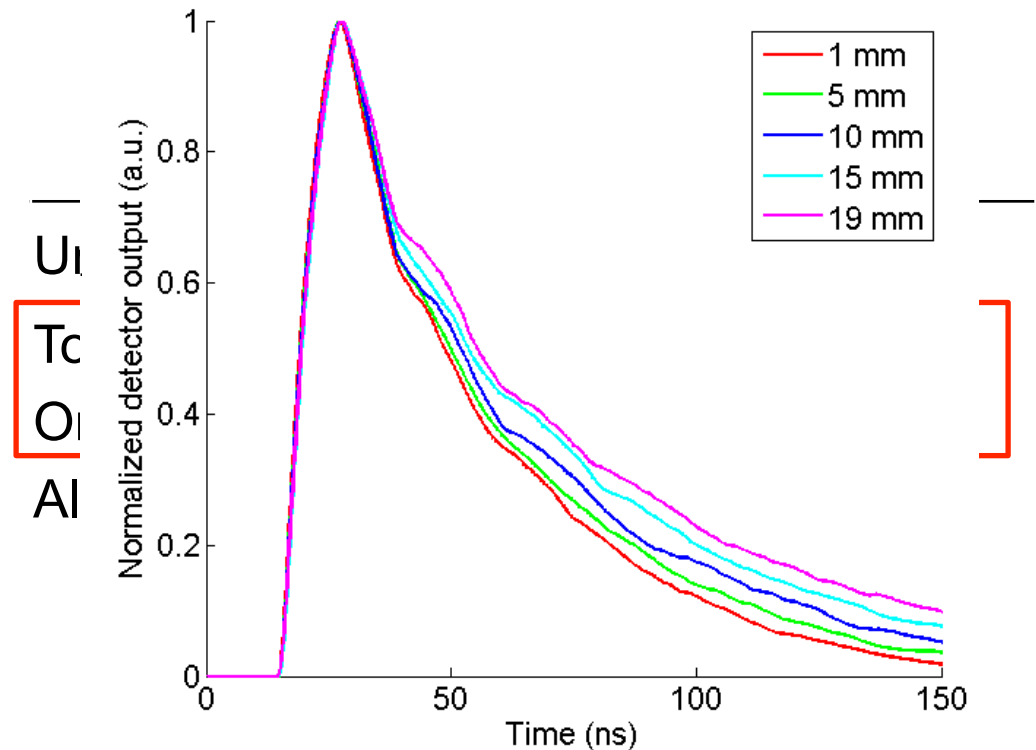


# Detector Development

- **Goal:**  
< 400 ps timing resolution with 1-bit DOI
- **Approaches:**  
Phosphor-coating, two-layer, monolithic...

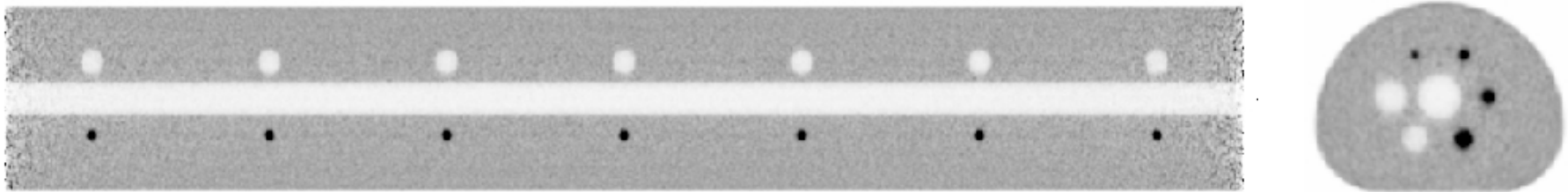


3 x 3 x 20 mm LYSO with  
YAG phosphor



# Image Reconstruction

- 2 meter extended NEMA IQ phantom
- Reconstruction:
  - OSEM (5 iterations/2 subsets)
  - 2 mm voxels, 160 x 160 x 1000 image matrix
  - dual 8-core CPUs @ 2.0 GHz,
  - ~10 mins/iteration per 1 billion events



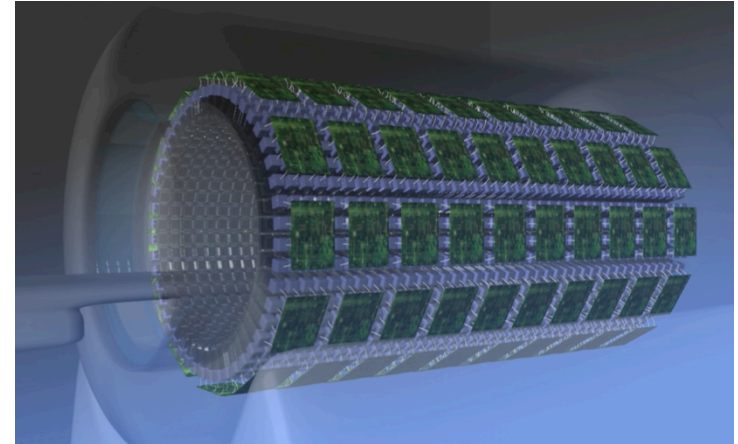
Reconstructed image corresponding to 4-minute scan, 10 mCi in phantom.



# Other Considerations

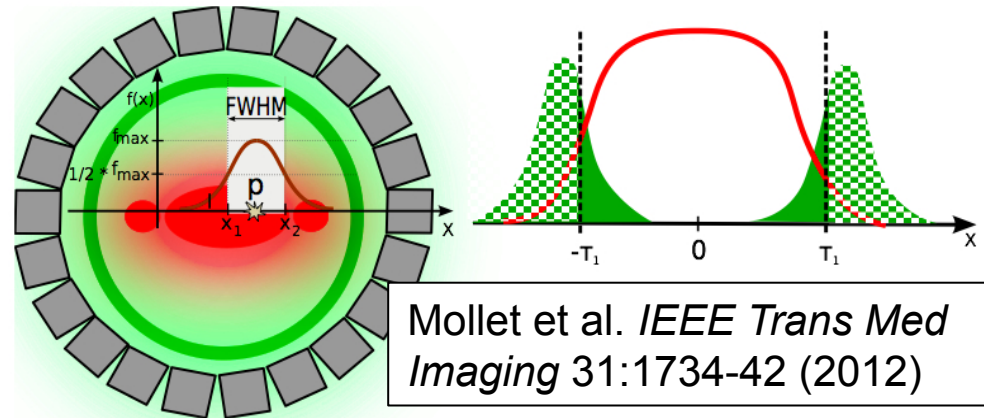
- **Mechanical design**

- Scale
  - 491,520 crystals
  - 880 kg of L(Y)SO!
- Thermal management (~30-40 kW)
- Highly reliable & easily serviced
- Efficient fabrication scale-up



- **Attenuation correction**

- Low-dose CT?
- Static transmission rods?
- LSO background?



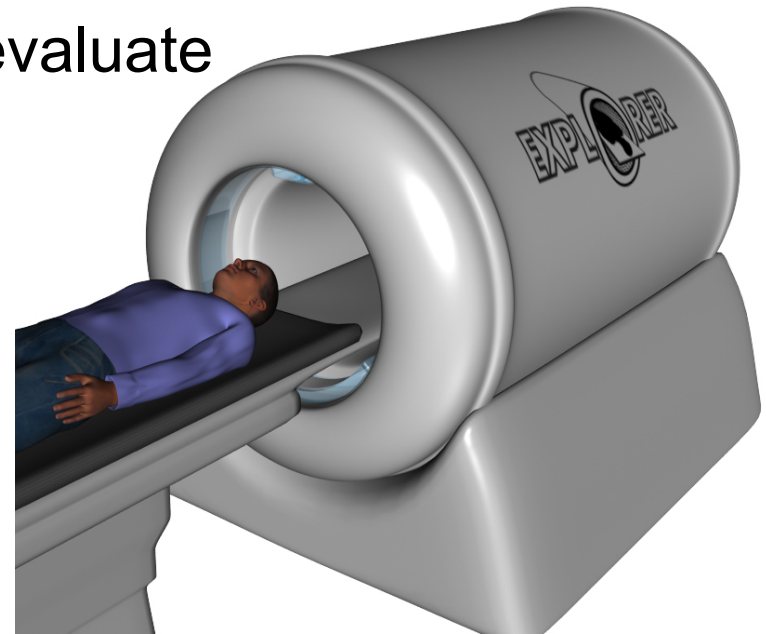
Mollet et al. *IEEE Trans Med Imaging* 31:1734-42 (2012)

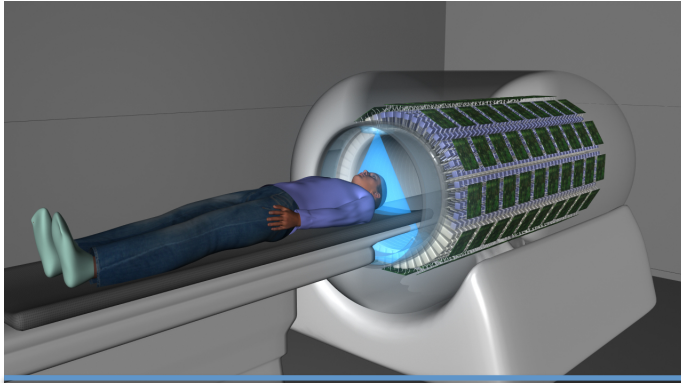
- **Respiratory Gating**



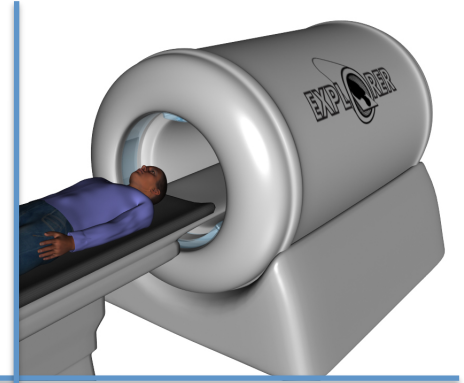
# Current Status

- Project launched to build prototype total-body PET scanner with unprecedented sensitivity
  - Simulations are being used to evaluate design trade-offs
  - Initial design and feasibility studies underway
  - Conceptual applications in clinical medicine and research have been formulated
- Community input and participation encouraged





[EXPLORER.ucdavis.edu](http://EXPLORER.ucdavis.edu)



- **Greatly increased utilization of available signal**
  - Natural technical progression for the development of PET
  - Scans approaching background radiation dose, or,
  - High statistics scans at current radiation dose
- **Assured unique novel human applications**
- **The need for advances which embrace the skill base of the IEEE imaging community:**
  - Appropriate TOF/DOI detector technology
  - Optimal sorting and use of singles information
  - Accurate and fast detector normalization
  - Low dose attenuation correction
  - Efficient and accurate image reconstruction
  - ...