

# KIT 3D Ultrasound Computer Tomography – a data & computing intensive approach at multimodal ultrasound imaging

**M. Zapf, T. Hopp, H. Gemmeke, N. V. Ruiter, et al.**

INSTITUTE FOR DATA PROCESSING AND ELECTRONICS

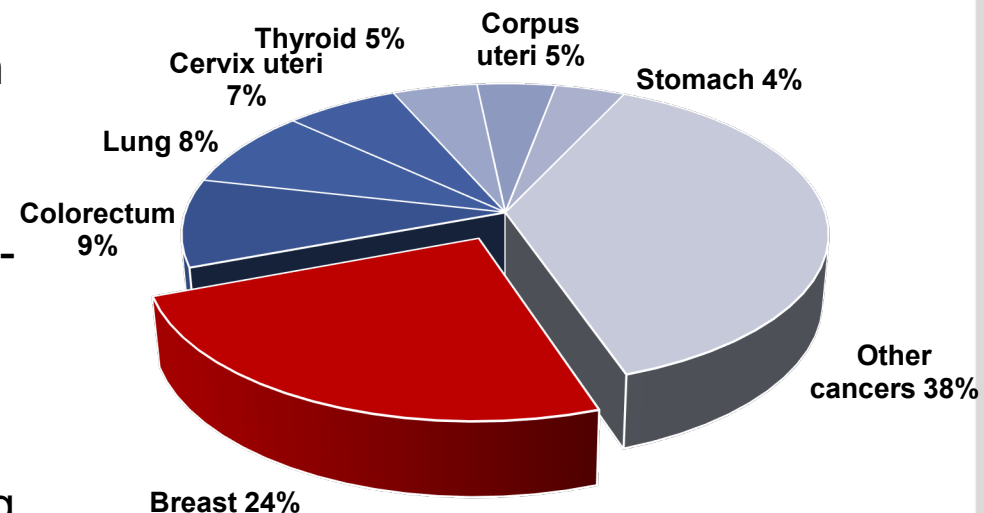


# Background: Medical situation

## ■ Motivation: Breast cancer

- Most common cancer of women in western world (every 10<sup>th</sup> woman)
- Deadly, despite not being a non-vital organ
- Challenge & solution: Early diagnosis
- Current diagnosis and screening methods have disadvantages

New cancer cases in 2020, females



Source: International Agency for research on cancer, <https://gco.iarc.fr>  
Data source: WHO cancer statistics 2020, GLOBOCAN 2020

# Background: Medical situation

## Screening



*X-Ray Mammography*

## Symptomatic patients



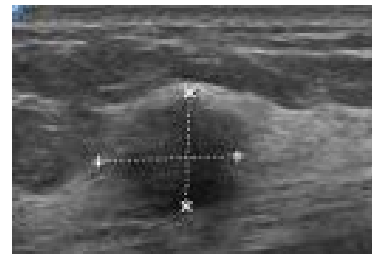
*Ultrasound (US) Sonography*



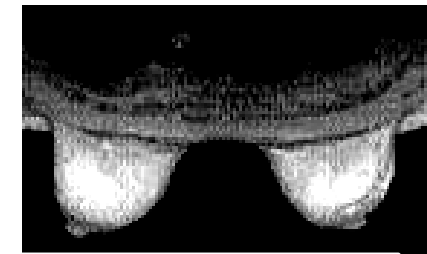
*Magnetic Resonance Imaging (MRI)*



*X-ray mammography image*



*Sonography B-Scan image*



*MRI image (transversal cut)*

- Current diagnosis and screening methods have disadvantages
  - Uncomfortable, ionizing (harming), 2D, non-reproducible, expensive, specificity problems (“false positives”), requires contrast agents...

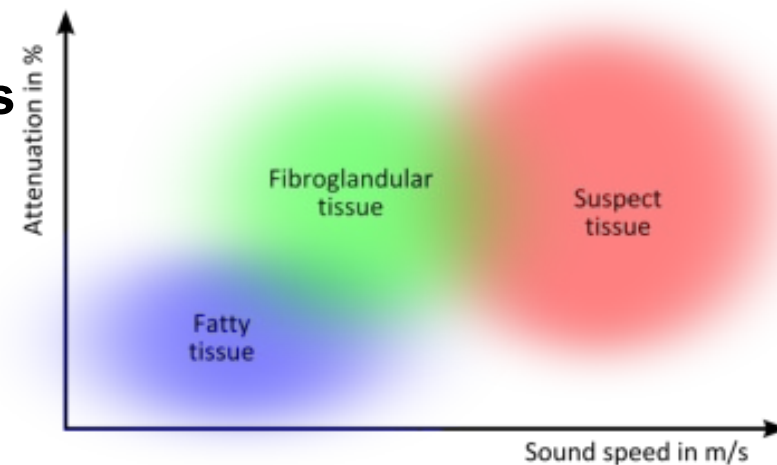
# Vision

## Basic idea: why not combining the best of these methods?

- As sensitive as XR mammography
- 3D like MRT
- Non-ionizing like ultrasound sonography

## Diagnostic value: Specificity

- Ultrasound can contain **three modalities** concurrently:
  - **Reflection / morphology** information  
High quality “B-scans” from sonography
  - **Speed of sound and attenuation**  
Quantitative information



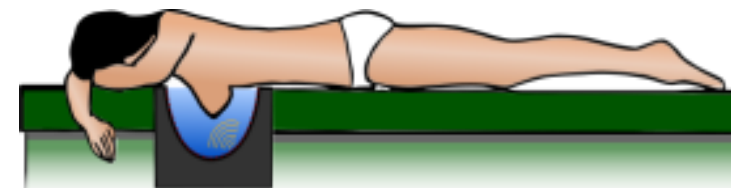
*Simplified from Greenleaf et al., 1981*

# Vision (2)

- Technical properties
  - Fixed and reproducible measurements
    - Surround object with (unfocused) ultrasound transducers
  - Milimeter to sub-mm resolution
    - Water as imaging medium
    - MHz ultrasound
  - Multimodal
    - Measure reflection and transmission signals
  
- Object surrounding aperture
  - Many ultrasound transducers surround the object hemisphere



*Manual guided imaging setup*



*Breast imaging in fixed setup*

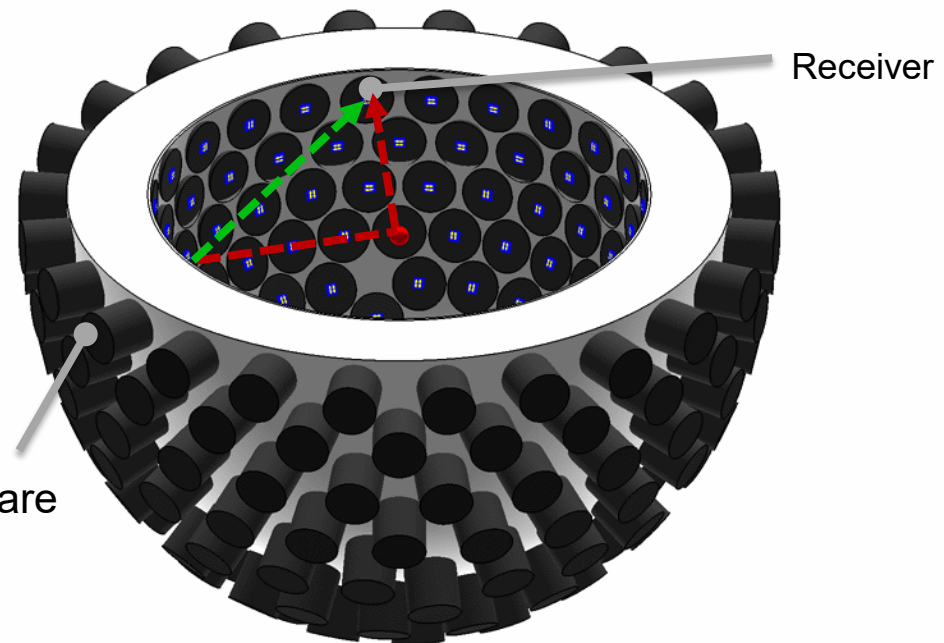
# Vision (3)

## ■ Operation principle

- 3D phased array imaging like sonography takes too long
  - ⇒ shifting to software
  - ⇒ Synthetic aperture focussing technique (SAFT)

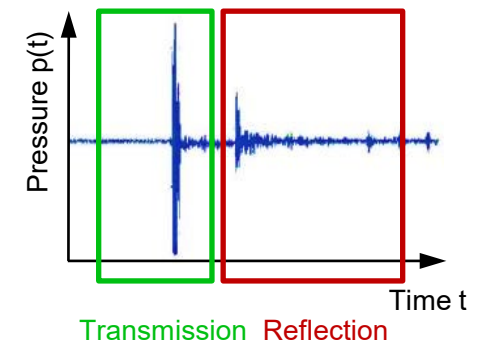
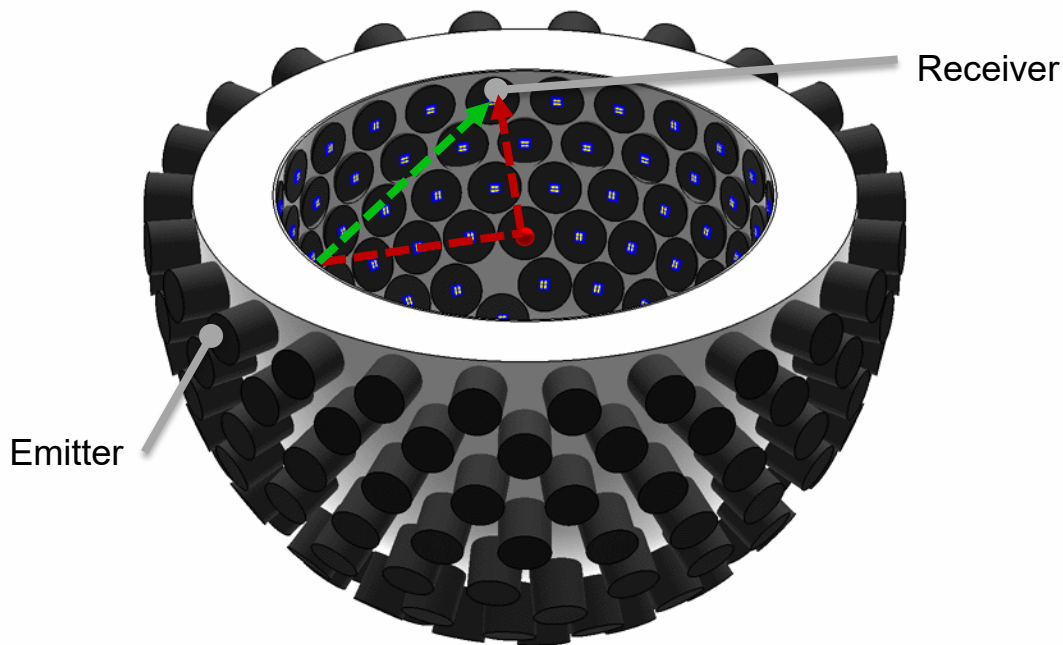
## ■ One transducer emits only, many transducer receive

- Many DAQ channels (RX), a singular excitation channel (TX)
- Iterative, sequential excitation
- Focussing and imaging in software on raw data
- Not a real time system



# 3D USCT: measurement principle and signals

- Separation of measurement phase + imaging phase

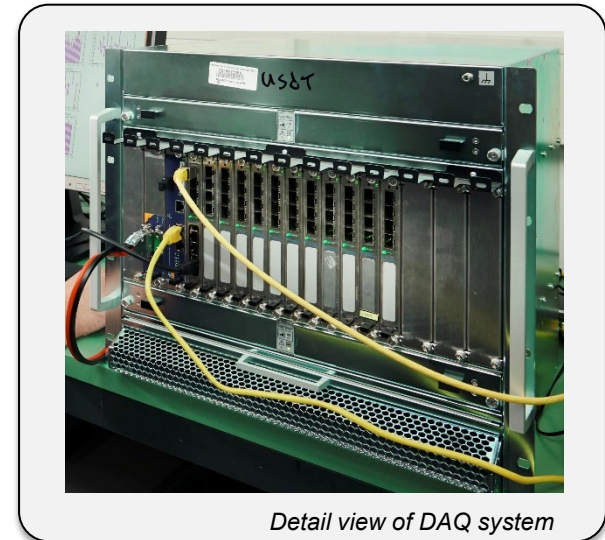
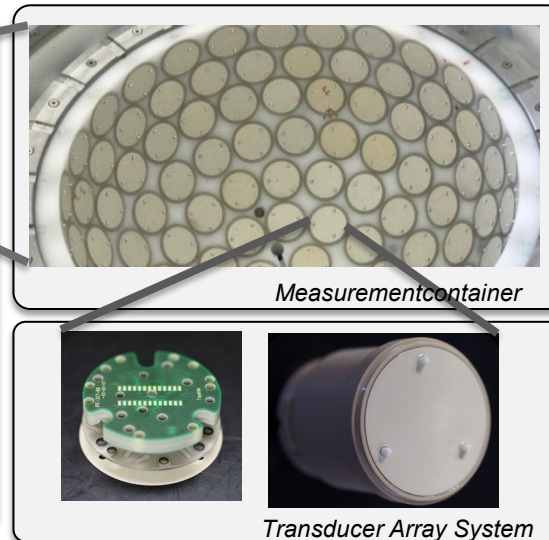
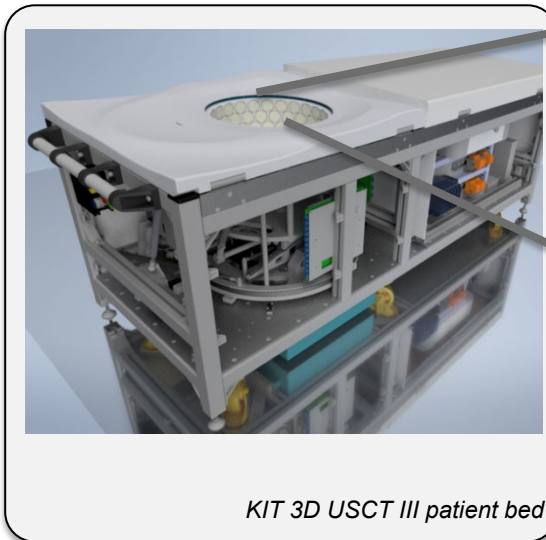


*Pressure over time ultrasound signal, so called AScan*

## Multimodal imaging:

- Sound speed
- Attenuation
- Reflection

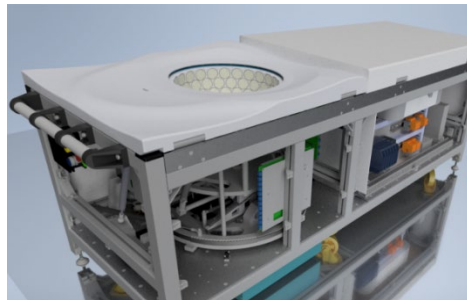
# Realization: KIT 3D USCT III



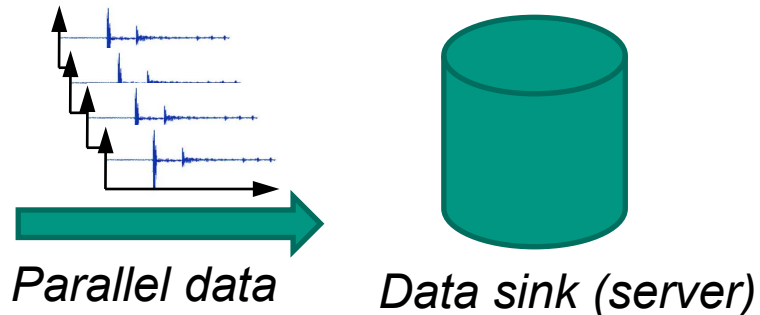
- 3D hemisphere
- Diameter: 35 cm
- 2304 US transducers (TX + RX), pseudo-random
- 2.6 MHz center freq (3.4 MHz bandwidth @ -10dB)
- 384 channels 20MHz sample rate
- 96 GB memory buffer



# 3D USCT III: Measurement time and data



*3D USCT III system*



## ■ Measurement process

- 2304 emitters are excited individually and iteratively
- Measurement window: 400 $\mu$ s
- => 1 to 10 minutes (parameter dependend)

## ■ DAQ

- 384 channels, 6x time muxing (2304 channels)
- 10 MHz sample rate, 400 $\mu$ s window, 16 bit datatype
- => 80GByte

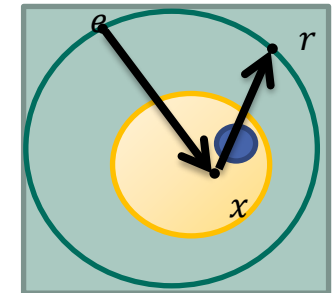
**=> Clinical applicable with ~ 10 min**

# Image reconstruction: reflectivity

- „Weakly scattering assumption“: first reflection only
- **Ellipsoid backprojection: Synthetic Aperture Focusing Technique (3D SAFT)**

$$I(x) = \sum_{e,r} A_{e,r}(t) \quad \text{with } t = \frac{|e - x| + |x - r|}{c}$$

- Extensions:
  - Sound speed correction  $c_{water} \rightarrow c_{path(e,x,r)}$  [1]
  - Attenuation correction [2]  $A_{e,r}(t) \rightarrow a_{path(e,x,r)} \cdot A_{e,r}(t)$
- „Ridiculous easy parallelizable“: over data, over image
  - ....But on modern systems bandwidth limited
- Typical use case:
  - Data:  $10^6$  Ascans, length 4096 samples (10MHz), datatype double (8Byte)
  - Image: ROI  $20 \times 20 \times 20 \text{cm}^3$ , 0.2mm resolution =>  $1024^3$  voxel ,
    - => data read bandwidth:  $(4096 \times 2304 \times 128 \times 18 \times 2 \times 8) / 1024^3 = 324 \text{ GByte}$
    - => Image write bandwidth:  $((2304 \times 128 \times 18 \times 2 \times 8) \times 1024^3) / 1024^5 = 81 \text{ PetaByte}$
    - => Reconstruction time (8x RTX 2080 TI GPUs): **~30 min.**



*I*: image  
*x*: voxel position  
*A*: amplitude scan  
*e*: emitter position  
*r*: receiver position  
*c*: sound speed  
*t*: time of flight

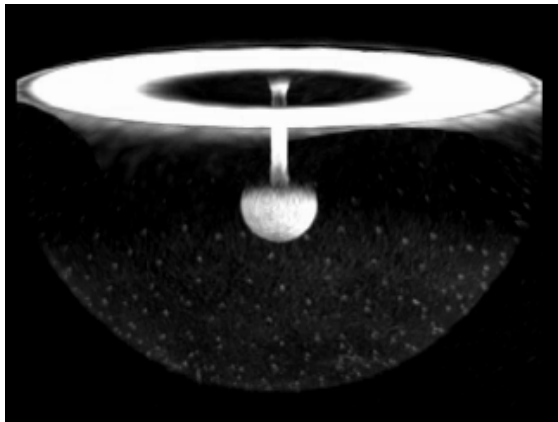
**=> Clinical applicable with ~ 30min**

[1] E. Kretzek, N. V. Ruiter, "GPU based 3D SAFT reconstruction including phase aberration," Proc. SPIE 9040, Medical Imaging 2014: Ultrasonic Imaging and Tomography, 90400W (2014)

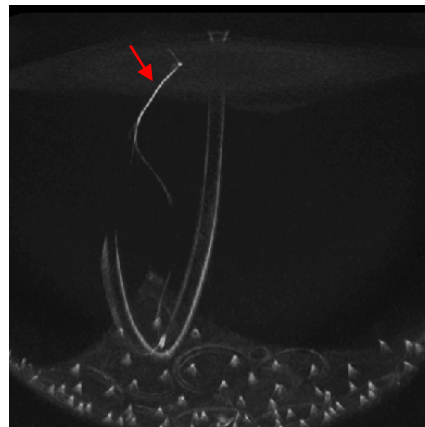
[2] E. Kretzek, T. Hopp, N. V. Ruiter, "GPU-based 3D SAFT reconstruction including attenuation correction," Proc. SPIE 9419, Medical Imaging 2015: Ultrasonic Imaging and Tomography, 94190E (2015)

# Results: 3D Reflectivity imaging (1)

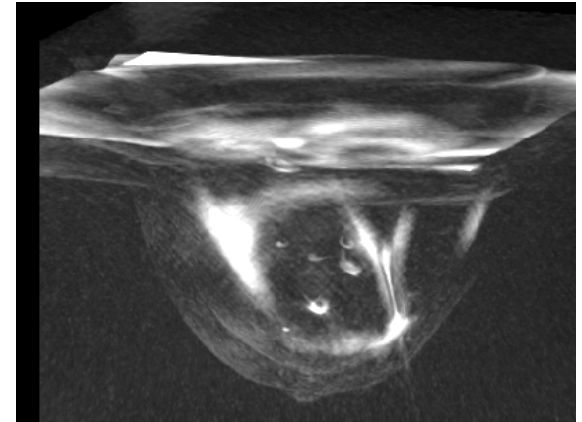
- Phantom images
  - Maximum intensity projection from 3D volume



*Steel sphere*



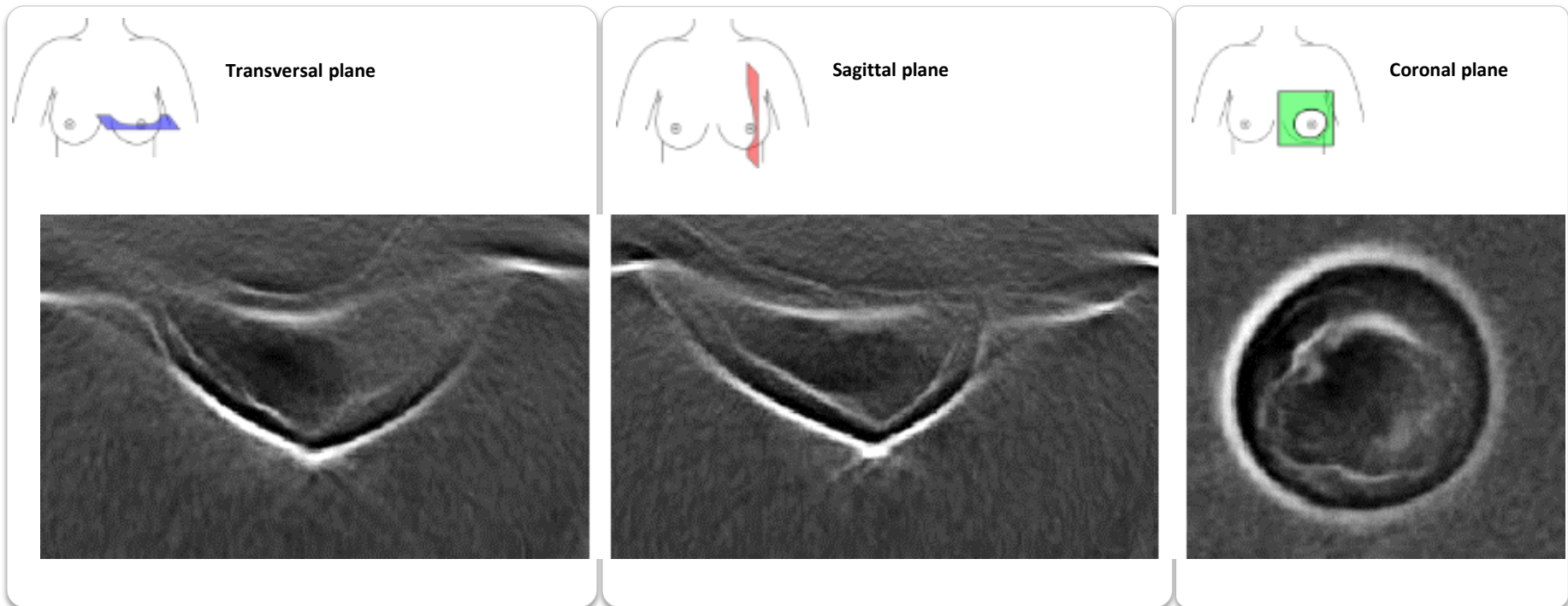
*0.2 mm soldering tin wire*



*CIRS triple modality phantom*

# Results: 3D Reflectivity imaging (2)

- Healthy volunteer reflectivity images
  - 2D slices out of 3D volume



# Image reconstruction: transmission

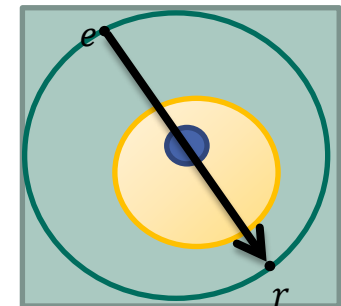
- Ray based back-projection for quantitative soundspeed or attenuation images
  - Not trivial paralizable
  
- Bent ray reconstruction
  - Fast marching method to update  $M$  [1]
- Algebraic Reconstruction Technique (ART)

$$t = \boxed{M}^{1/c}$$

Matrix Size:  $128^3$  voxels  $\times$   $10^7$  measurements  $\times$  8 Byte  $\Rightarrow$  153 PetaByte (dense)

- Total variation minimization (TVAL3)
  
- Reconstruction time: **~15 min.**

**$\Rightarrow$  Clinical applicable with ~ 15min**



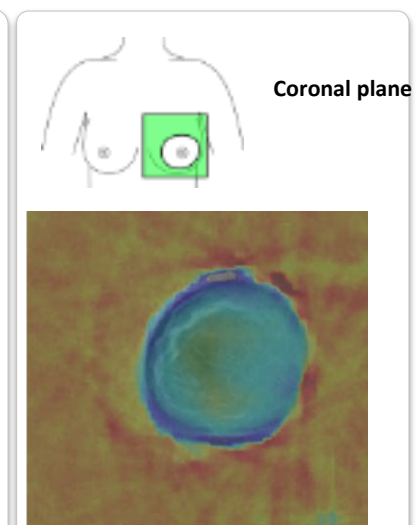
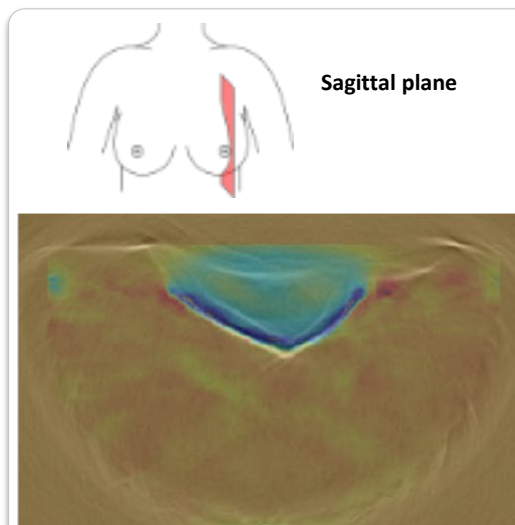
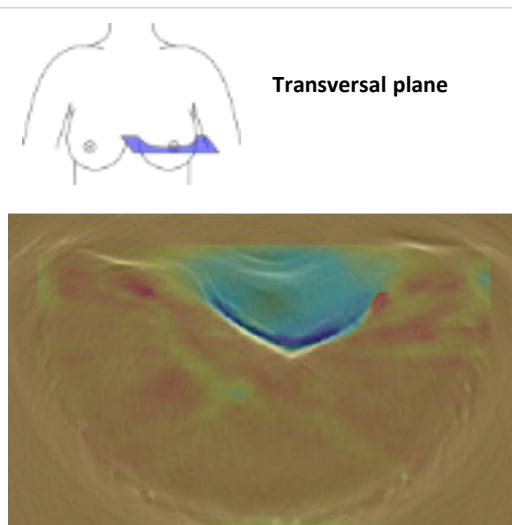
$M$ : system matrix  
 $e$ : emitter position  
 $r$ : receiver position  
 $c$ : sound speed  
 $t$ : time of flight

[1] R. Dapp: Abbildungsmethoden für die Brust mit einem 3D-Ultraschall-Computertomographen, Dissertation, KIT, 2013

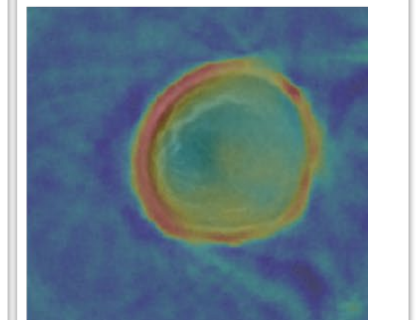
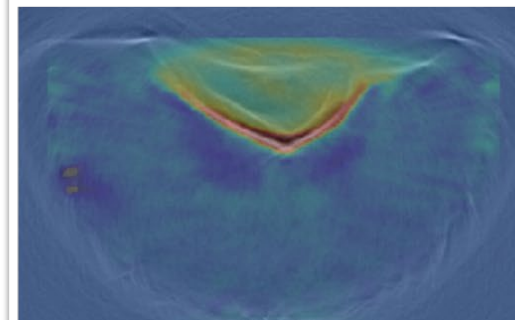
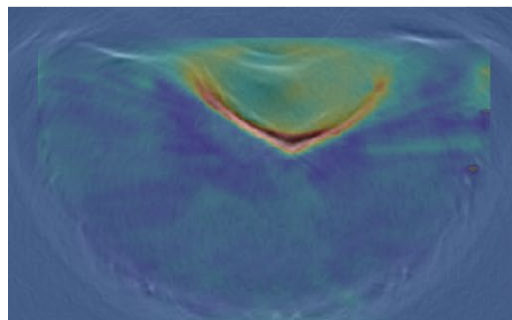
# Results: transmission image

- Healthy volunteer
- Image fusion with transmission images

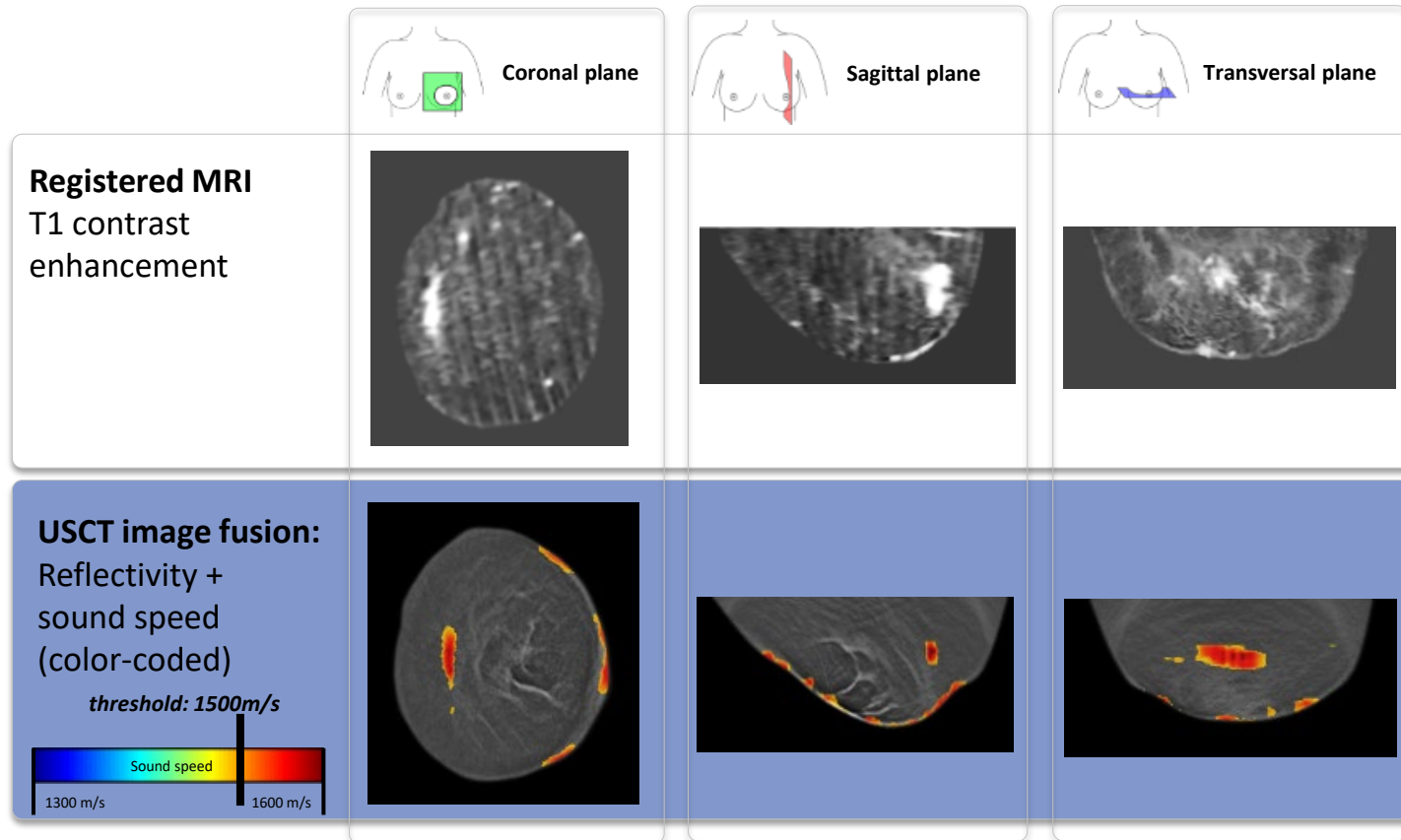
Reflectivity +  
Sound speed



Reflectivity +  
attenuation



# Results: Clinical use case: Multicenter carcinoma



# KIT 3D USCT: Status – finished?

- Not in market yet
- Collaborations and ongoing work

European  
Innovation  
Council



瑞康医药股份有限公司  
Realcan Pharmaceutical Co., Ltd.



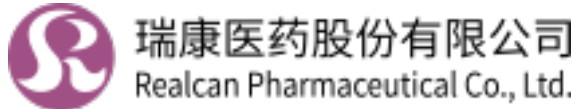
UMM

UNIVERSITÄTSMEDIZIN  
MANNHEIM

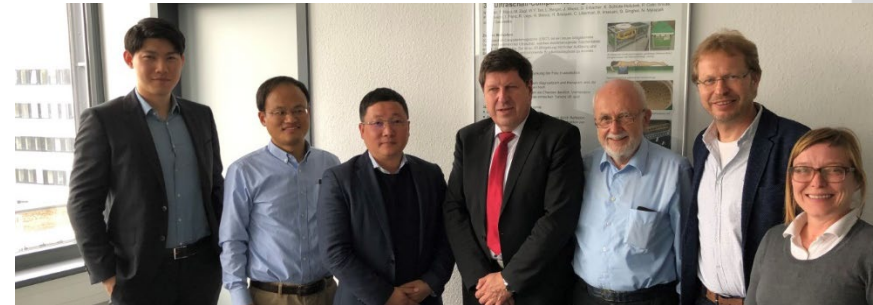
- EIC QusTom: Kick off February 2024
  - Open goals:
    - Showing clinical viability of the method
    - Showing viability of full waveform image reconstruction methods
- Equilibrium 9 Technology Transfer project (2024-25)
  - Open goals:
    - Passing chinese regulatory process and entering the Chinese Market
    - Showing viability via Multicenter study



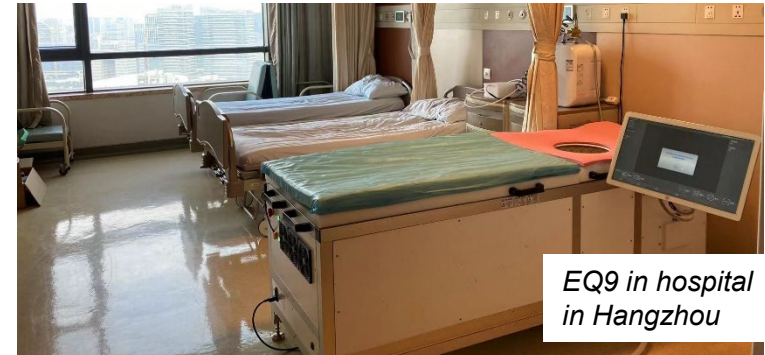
# USCT 2024: USCT Technology transfer project



- Aim: 3D USCT for multi-center study in China, five USCT III, approx. 1000 patients
- Current status: Technology transfer finished (end 2023), first pre-trial in Hangzhou
- In-process 2024:
  - CFDA approval and fabrication site in Hangzhou (near Shanghai)
  - KIT supports EQ9 for study and built up of USCTs and commercialization



*Zhejiang Equilibrium Nine Medical Equipment Co., Ltd*



# Status USCT 2024: QusTom Project



## ■ EIC Pathfinder Grant: QusTom

- Aim: 60 patient study for full 3D wave inversion reconstruction imaging
- Status: Preparations for „Kick off in Hospital“: Crunch from Nov. 23 to 9th of Feb. 2024



*Preparation and packaging for transport to Spain, Barcelona*

# Status: QusTom Project

- Kick off: Arrival at Barcelona: 13th February 2024
  - Handover at 15th of February



*Transportbox arrives at Val'd Hebron*



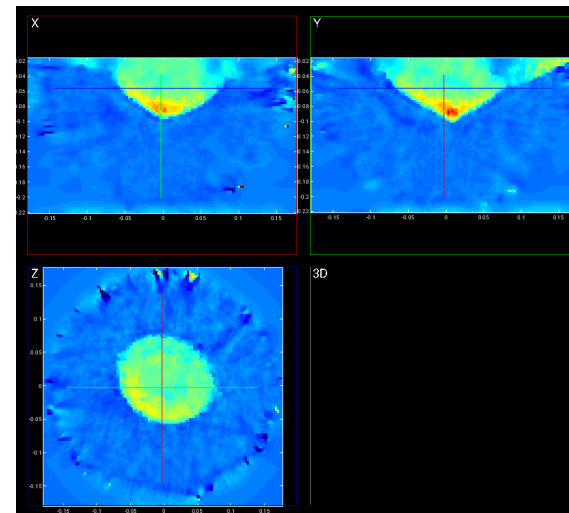
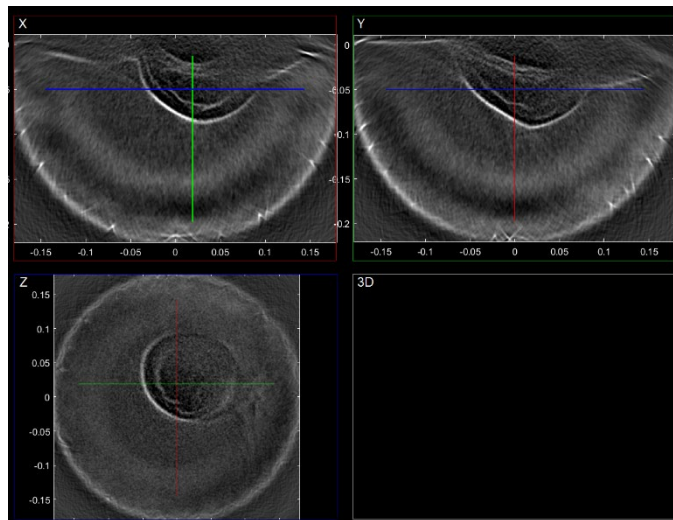
*Built up and comissioning of the system*



*Handover to the hospital and trial coordinators*

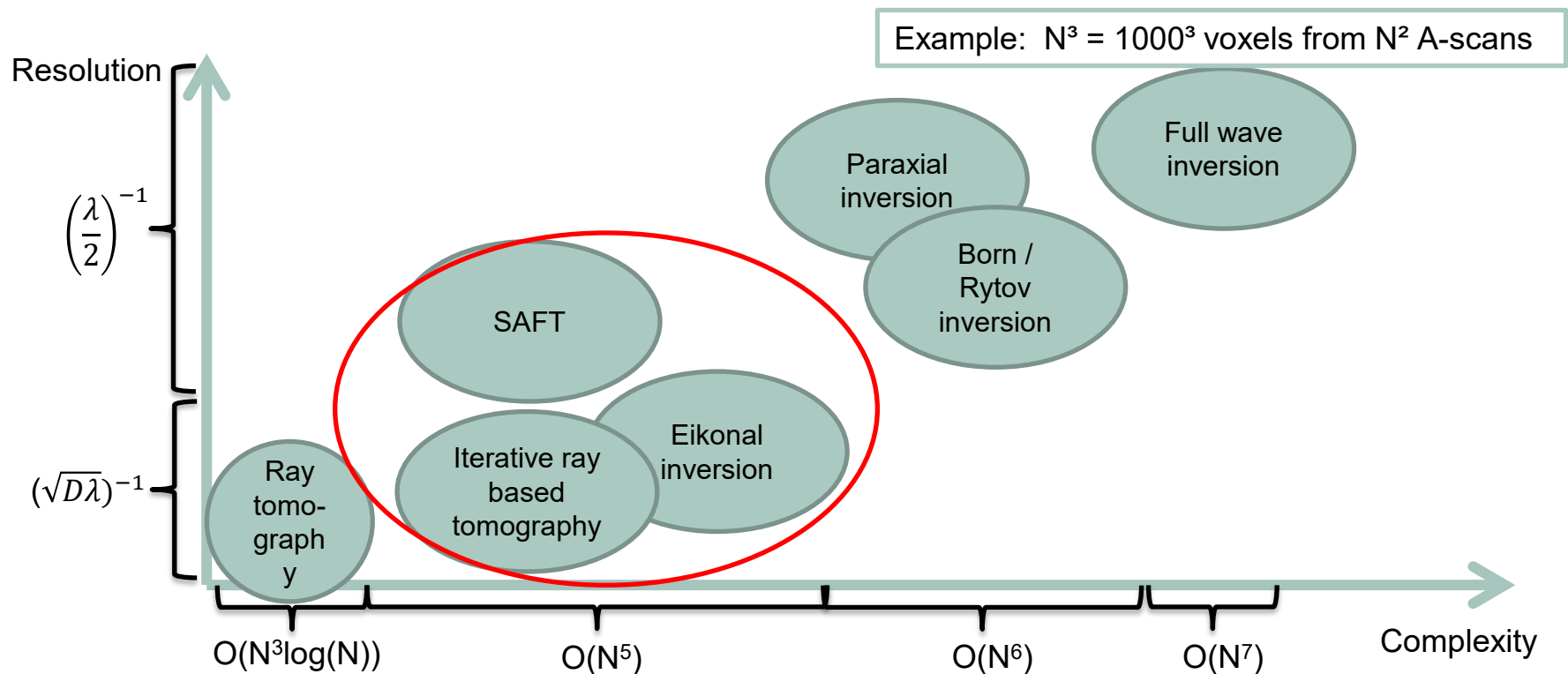
# KIT 3D USCT: Status

- Current project status
  - Realizability?
    - Done
  - Clinical Viability?
    - Measurement time: 5-20min,
    - Imaging time : 30min
    - Ongoing patient & hospital studies
  - Fully realized imaging potential?

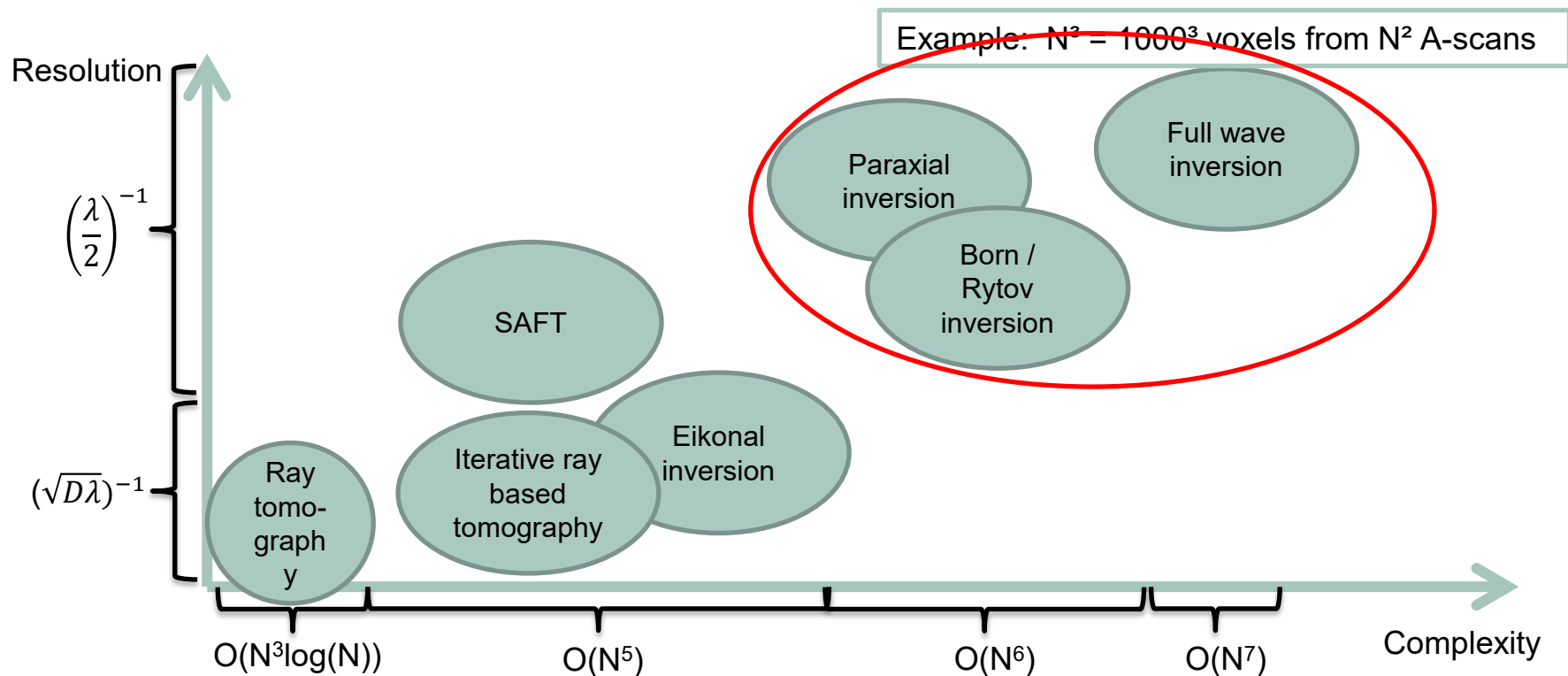


*Left: 2D cuts of reflectivity imaging, Right: soundspeed of healthy volunteer P1 (2023)*

# Image reconstruction: Future

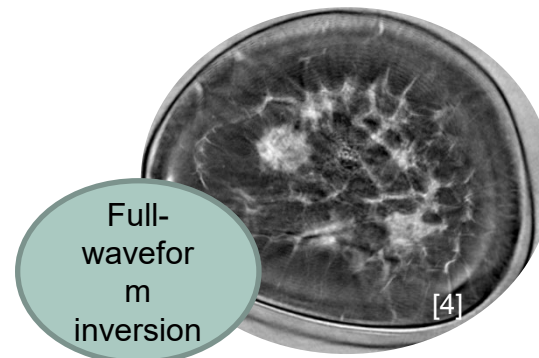
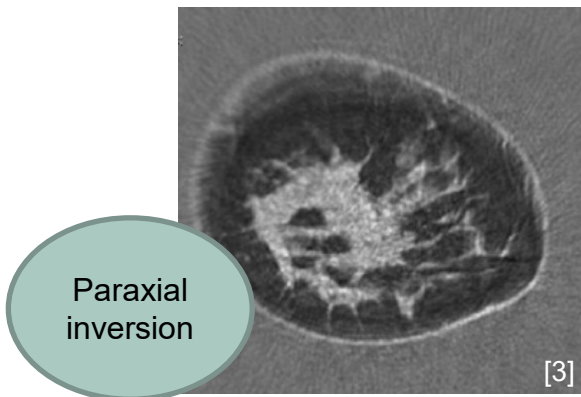
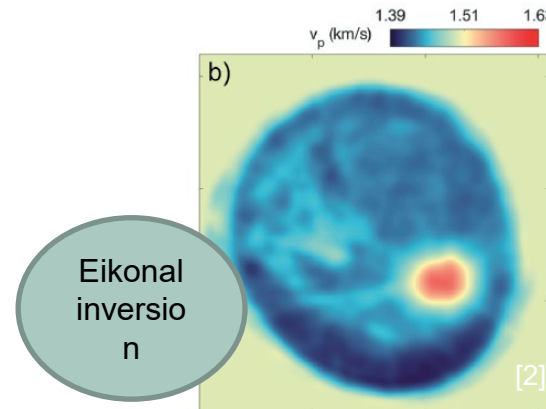
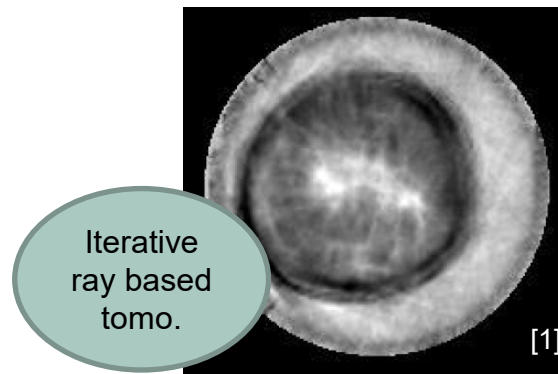


# Image reconstruction: Future



# Image reconstruction: Future: 2D Speed of Sound

- More advanced methods...for quantitative imaging
  - Examples from 2D systems



[1] Li et al. Proc. SPIE Medical Imaging, 2008  
[2] Agudo, et al. Proc. of MUST, 2017

[3] Wiskin et al. Proc. SPIE Medical Imaging, 2020  
[4] Littrup, Duric, et al. Proc. of MUST, 2017.

# Image Reconstruction: Full wave form inversion – paraxial approximation

- The spherical wave in the forward direction can be approximate by a plane wave.

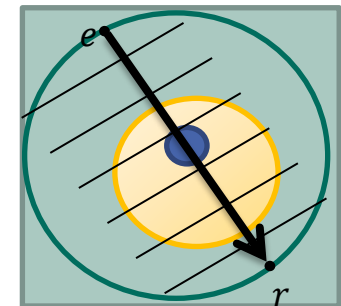
$$p = \frac{e^{-ikr}}{r}$$

$$r = \sqrt{x^2 + y^2 + z^2} = z \sqrt{1 + \frac{x^2 + y^2}{z^2}}$$

Taylor series:  $\sqrt{1 + b} = 1 + \frac{1}{2}b + O(b^2)$

$$\Rightarrow r \approx z + \frac{x^2 + y^2}{2z} \approx z \quad \text{for } x, y \ll z$$

$$\Rightarrow p_{\text{paraxial}} = \frac{e^{-ikr_{\text{paraxial}}}}{r_{\text{paraxial}}} \approx \frac{e^{-ikz}}{z}$$



*M*: system matrix  
*e*: emitter position  
*r*: receiver position  
*c*: sound speed  
*t*: time of flight

Approximation: Up to an angle of 25° between wave vector and z-axis the deviation for the amplitude is under 10 %.



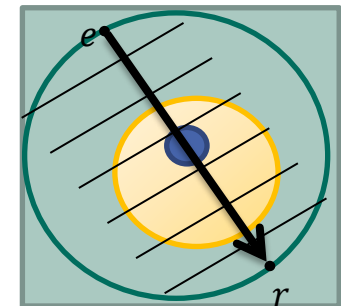
# Image Reconstruction: Full wave form inversion – paraxial approximation (2)

## ■ Iterative method

$$p(x, y, z + \Delta z) = e^{-i k_0 \eta \Delta z} \underbrace{\mathbf{F}^{-1}}_{\text{phase}} \left\{ e^{-i k_0 \sqrt{1 - \frac{\xi_{x,y}^2}{k_0^2}} \Delta z} \underbrace{\mathbf{F}\{p(x, y, z)\}}_{\text{propagator}} \right\}$$

- Forward model, backward, update...
- Initial pressure  $p_0$  can be calculated analytical in homogeneous medium:

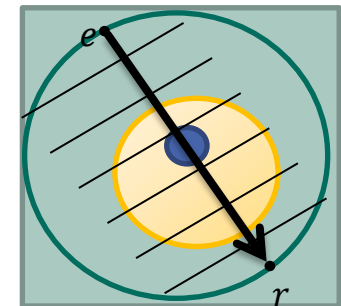
spherical wave, piston model, ...



*M*: system matrix  
*e*: emitter position  
*r*: receiver position  
*c*: sound speed  
*t*: time of flight

# Image Reconstruction: Full wave form inversion – paraxial approximation (3)

- Iterative Scheme, sequential (not trivial parallizeable):
  - Per emission, per frequency,
    - forward projection 2D plane, along Z, to receiver
      - => Many fourier transformations
  - Per emitter: Rotation & interpolation of image domain
    - => many rotations in image domain required
  - Matrix Inversion

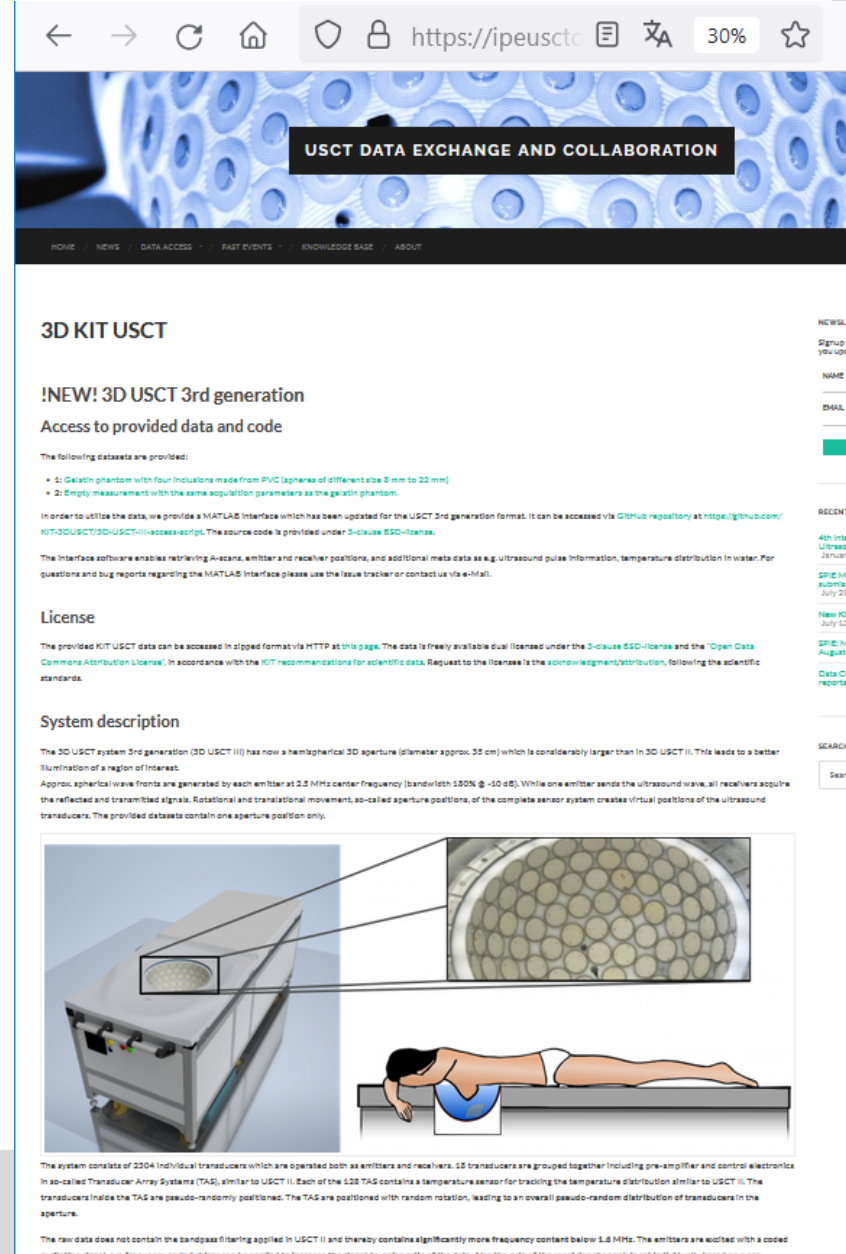


*M*: system matrix  
*e*: emitter position  
*r*: receiver position  
*c*: sound speed  
*t*: time of flight

- Applicability:
  - Runs for 2D subsets and < 1MHz center frequency ~ 30min
  - 3D not realized, applicability currently limited by: Memory, bulk calculation time in the many fourier transformations & rotations

# Solution: Open data and open access to 3D USCT data

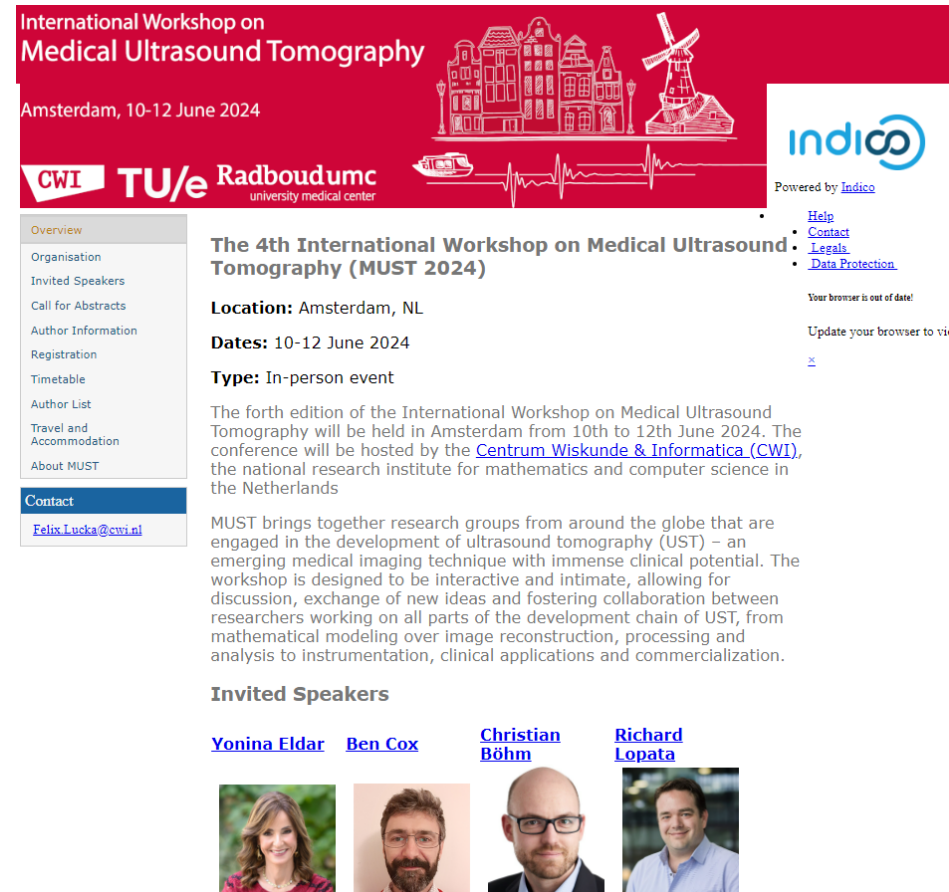
- 3D KIT USCT – USCT data exchange and collaboration
  - A MATLAB script with some reference imaging and visualization code:
  - „3D-USCT-III-access-script“ KIT-3DUSCT/3D-USCT-III-access-script ([github.com](https://github.com))
  - The following datasets are provided:
    1. Gelatin phantom with four inclusions made from PVC (spheres of different size 8 mm to 22 mm)
    2. Empty measurement with the same acquisition parameters as the gelatin phantom.



The screenshot shows the website for 3D KIT USCT. The header includes navigation links: HOME, NEWS, DATA ACCESS, PAST EVENTS, KNOWLEDGE BASE, ABOUT. A prominent banner reads "USCT DATA EXCHANGE AND COLLABORATION". The main content area features a "3D KIT USCT" section with a "NEW! 3D USCT 3rd generation" announcement. It states that access to provided data and code is available. Two datasets are listed: 1) Gelatin phantom with four inclusions made from PVC (spheres of different size 8 mm to 22 mm) and 2) Empty measurement with the same acquisition parameters as the gelatin phantom. A license section explains that the data is freely available under the 3-clause BSD-license and the Open Data Commons Attribution License. A system description notes that the 3D USCT system 3rd generation (3D USCT III) has a hemispherical 3D aperture (diameter approx. 35 cm) which is considerably larger than in 3D USCT II. Below the text is an image showing the physical system and a person lying on a table with the system positioned over them. The system consists of 2304 individual transducers arranged in a hemispherical array.

# Meet us at MUST 2024

- Workshop on Medical Ultrasound Tomography (MUST) at 10-12 June 2024, in Amsterdam, Amsterdam Science Park, Centrum Wiskunde & Informatica (CWI)
- <https://www.cwi.nl/en/events/must-2024/>



International Workshop on  
**Medical Ultrasound Tomography**  
 Amsterdam, 10-12 June 2024

**CWI** **TU/e** **Radboudumc**  
 university medical center

**The 4th International Workshop on Medical Ultrasound Tomography (MUST 2024)**

**Location:** Amsterdam, NL

**Dates:** 10-12 June 2024





**Type:** In-person event

The fourth edition of the International Workshop on Medical Ultrasound Tomography will be held in Amsterdam from 10th to 12th June 2024. The conference will be hosted by the [Centrum Wiskunde & Informatica \(CWI\)](#), the national research institute for mathematics and computer science in the Netherlands

MUST brings together research groups from around the globe that are engaged in the development of ultrasound tomography (UST) – an emerging medical imaging technique with immense clinical potential. The workshop is designed to be interactive and intimate, allowing for discussion, exchange of new ideas and fostering collaboration between researchers working on all parts of the development chain of UST, from mathematical modeling over image reconstruction, processing and analysis to instrumentation, clinical applications and commercialization.

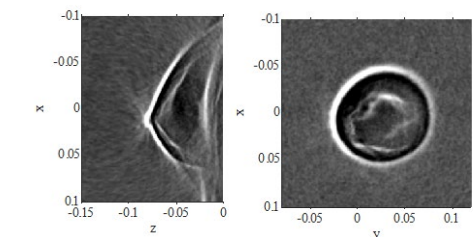
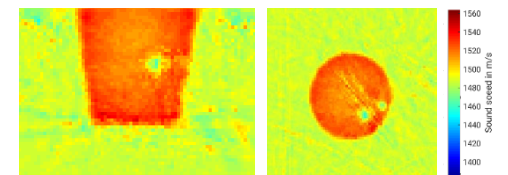
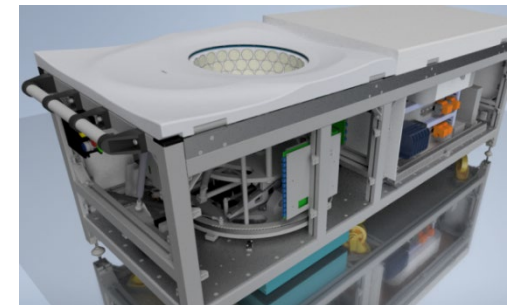
**Invited Speakers**

[Yonina Eldar](#) [Ben Cox](#) [Christian Böhm](#) [Richard Lopata](#)

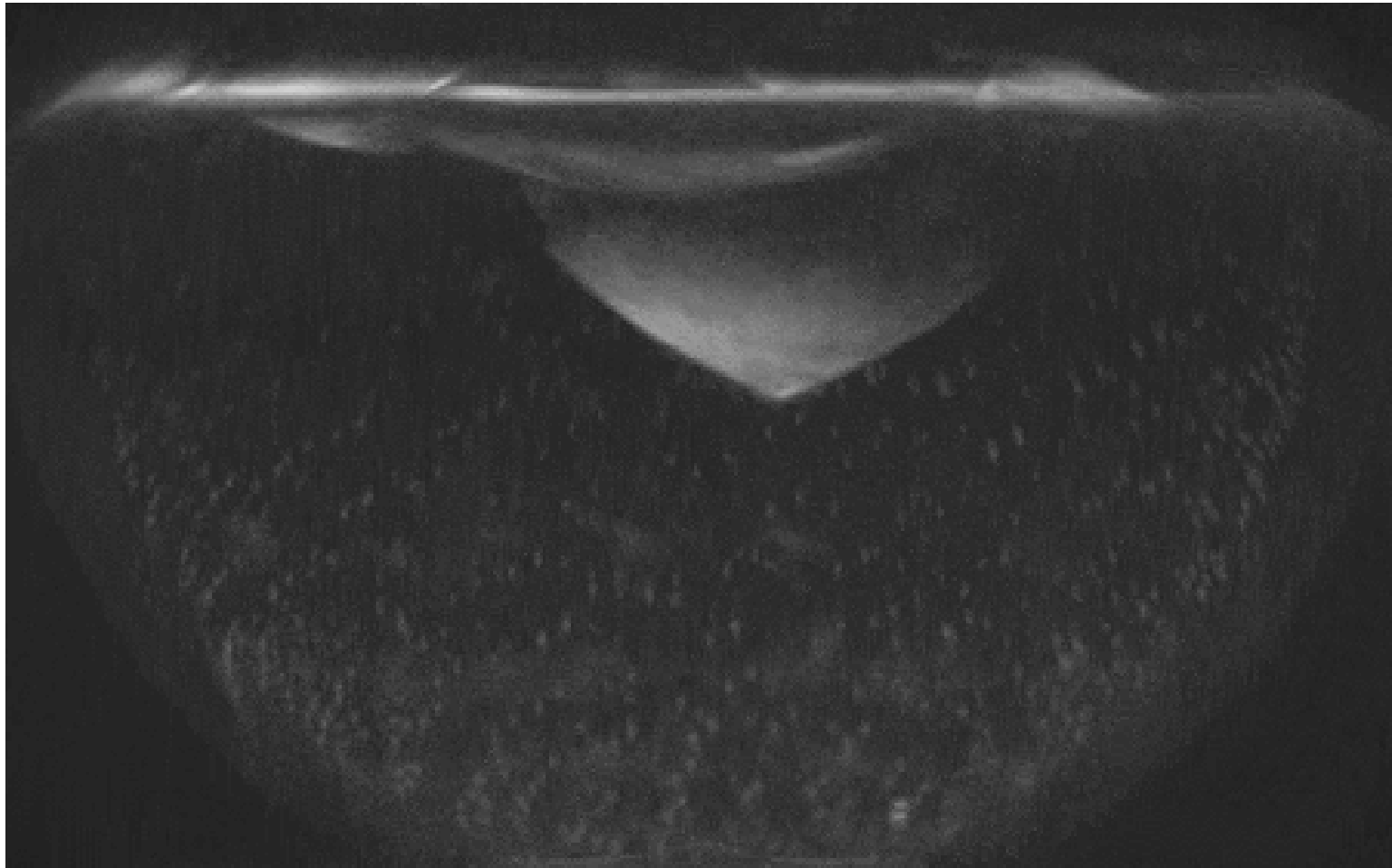





# Summary

- Realizability:
  - Successful realization of KIT 3D USCT III as full 3D and multimodal ultrasound computertomography device
- Clinical viability:
  - Promising first images with phantoms and volunteers
    - Measurement time: 5-20min
    - Imaging time: 30min
    - Ongoing multicenter study
    - Ongoing steps into Chinese and European market
- Full realization of imaging potential:
  - Computational and ressource wise challenging due to **3D approach** and **high frequency system**
    - Paraxial currently 30min (2D), to days (3D) with low frequencies (<1MHz)



# Join our data challenge!



<http://ipeusctdb1.ipe.kit.edu/~usct/challenge/>  
or contact me: [michael.zapf@kit.edu](mailto:michael.zapf@kit.edu)