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## Advanced GeAnt4-based platform for virtual clinical Trials in X-ray breAst imaging

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#### **Breast Cancer**



Worldwide, in female subjects, breast cancer is the most commonly diagnosed cancer, accounting about 2.1 million newly diagnosed breast cancer (1 in 4 cancer cases among women) and the leading cause of cancer death, followed by colorectal and lung cancer for incidence, and vice versa for mortality. In 2018, among European females, breast cancer was by far the most frequently diagnosed neoplasm (522,500, 28.2% of the total), followed by colorectal (228,000, 12.3%), lung (158,000, 8.5%) and corpus uteri (122,000 , 6.6%) cancers.

As suggested by the WHO, to improve breast cancer outcomes and survival, early detection is critical. There are two prerequisites for reducing the rate of death: early diagnosis and mass screening procedures. Screening consists of testing women to identify cancers before any symptoms appear.

F. Bray, J. Ferlay, I. Soerjomataram, R. L. Siegel, L. A. Torre, and A. Jemal, 'Global cancer statistics 2018: GLOBOCAN estimates of incidence and mortality worldwide for 36 cancers in 185 countries', *CA. Cancer J. Clin.*, vol. 68, no. 6, pp. 394–424, 2018, doi: 10.3322/caac.21492





#### **Breast screening tecniques**



Breast cancer screening programs have been introduced by public health services of many countries. Early detection and accurate diagnosis are carried out with X-ray Digital Mammography (DM) and, in the last few years, with Digital Breast Tomosynthesis (DBT).

DM and DBT provide radiographic images of the compressed breast. In the first case two images for each breast are acquired (CC and MLO views), while in DBT the X-ray tube moves in an arc over the compressed breast and multiple projections are acquired and then reconstructed by a computer, forming pseudo-three-dimensional images.



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## **DBT** and **BCT**: the advent of **3D** x-ray breast imaging







#### **Advantages of Digital Breast Tomosynthesis**

(2D) Digital Mammography





#### (pseudo-3D) Digital Breast Tomosynthesis





#### **Advantages of Digital Breast Tomosynthesis**





In this screening case, an asymptomatic woman has a tumor that is not discernible on digital mammography (left) but appears as a clearly visible spiculated lesion on digital breast tomosynthesis (white arrow), which shows the slice where the lesion is in focus. The lesion is a 13-mm invasive ductal carcinoma, grade 2. *Images courtesy of Dr. Sophia Zackrisson*.





#### **Breast Computed Tomography (bCT)**

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A breast CT scanner with the patient in prone position with one breast being imaged at a time (typically 10 seconds or less) and without compression. Image courtesy of Dr. Willi Kalender

In bCT the uncompressed breast hangs at the scanner isocenter in pendant geometry and the gantry rotates over 360 degrees around a vertical axis of rotation.

Higher x-ray beam energy (49–80 kVp) than mammography ~500 frames or projection images are acquired over about 16 seconds acquisition sequence

 $512 \times 512$  pixels reconstructed images are produced



Example of reconstructed bCT slices. Courtesy of J.M. Boone

thickness



## Digital breast phantom for dosimetry in DM and DBT



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Elemental composition and density for glandular and adipose tissues.

| Tissue    | Η     | С     | Ν     | 0     | Р     | density    |
|-----------|-------|-------|-------|-------|-------|------------|
|           |       |       |       |       |       | $(g/cm^3)$ |
| glandular | 0.102 | 0.184 | 0.032 | 0.677 | 0.005 | 1.04       |
| adipose   | 0.112 | 0.619 | 0.017 | 0.251 | 0.001 | 0.93       |

In Monte Carlo (MC) models, the breast digital phantom is modelled as a semi-cylinder with an outer layer of skin made by adipose tissue while the inner part is a homogeneous mixture of adipose and glandular tissues. Glandularities ranging from 0 to 100% are composed by mixing properly glandular and adipose tissues.

The glandular tissue is the radiosensitive tissue in the breast. Thus, Mean Glandular Dose (MGD) is the parameter used to assess dose delivered to the gland.



Introduction ➤ **Digital Breast Phantoms** ➤ The AGATA Platform ➤ Discussion





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#### **Digital breast phantom for dosimetry in bCT**

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#### Homogeneous phantom for dosimetry



#### Heterogeneous phantom







Literature updates based in bCT







#### The myth of the 50-50 breast

M. J. Yaffe, J. M. Boone, N. Packard, O. Alonzo-Proulx, S.-Y. Huang, C. L. Peressotti, A. Al-Mayah, and K. Brock

2831 bCT patient exams have been analyzed and the Volume Breast Density (VBD) has been evaluated. **The mean VBD was found to be 14.3%** by volume with a standard deviation of 10.3% with skin excluded.

TABLE I. Characteristics of the four groups for whom density was measured. For each group the mean and standard deviation ( ) of VBD are given both for the "skin-included" and "skin-excluded" conditions. The difference between these means, the mean compressed breast thickness and the mean total breast volumes are also given.

| Group      | N    | Mean age (Range) | Mean<br>breast volume<br>(cm <sup>3</sup> ) | $VBD_{Sk}$<br>(%) ( $\sigma$ ) | VBD <sub>NSk</sub><br>(%) ( $\sigma$ ) | $\Delta VBD$ (%) | Mean compressed thickness $(mm) (\sigma)$ |
|------------|------|------------------|---|--------------------------------|--|------------------|---|
| A          | 191  | 53.8 (35-82)     | 769   | 25.6(12.6)                     | 14.3(10.3)                             | 11.3             | N/A                                       |
| В          | 1029 | N/A              | 512   | 21.7(12.8)                     | 16.8(11.5)                             | 4.9              | 56(19)                                    |
| С          | 1020 | 59.2 (40-85)     | 720   | 18.9(12.3)                     | 14.2(11.1)                             | 4.7              | 57(14)                                    |
| D          | 591  | 61.4 (50-76)     | 755   | 13.7(7.5)                      | 0.0(6.7)                               | 3.8              | 65(11)                                    |
| All groups | 2831 |                  |   | 19.3(12.1                      | 14.3(10.7)                             | 5.0              |   |





#### Literature updates based in bCT







Among 219 bCT data sets, the volume glandular fraction VGF was examined in coronal and sagittal planes of the breast, and the radial distribution of breast glandular fraction within a coronal bCT image was examined for three breast regions.







## Literature updates based in bCT







#### Virtual clinical trials

| 7 March 2019<br>Virtual clinical trial for task-based evaluation of a<br>deep learning synthetic mammography algorithm<br>Andreu Badal; Kenny H. Cha; Sarah E. Divel; Christian G. Graff; Rongping Zeng; Aldo Badano<br>Author Affiliations -<br>Andreu Badal, <sup>1</sup> Kenny H. Cha, <sup>1</sup> Sarah E. Divel, <sup>1,2</sup> Christian G. Graff, <sup>1</sup> Rongping Zeng, <sup>1</sup> Aldo Badano <sup>1</sup>  | International Workshop on Breast Imaging         WDM 2016: Breast Imaging pp 145-151   Cite as         Evaluation of the BreastSimulator Software Platform for         Breast Tomography: Preliminary Results         Authors       Authors and affiliations         Giovanni Mettivier , Kristina Bliznakova, Francesca Di Lillo, Antonio Sarno, Paolo Russo  |  |  |  |  |
|--|--|--|--|--|--|
| <sup>1</sup> U.S. Food and Drug Administration (United States) <sup>2</sup> Stanford Univ. (United States) Proceedings Volume 10948, Medical Imaging 2019: Physics of Medical Imaging; 1094800 (2019) <a href="https://doi.org/10.1117/12.2513062">https://doi.org/10.1117/12.2513062</a> Event  | Development and validation of a modelling framework for<br>simulating 2D-mammography and breast tomosynthesis<br>images<br>Premkumar Elangovan <sup>1</sup> , Lucy M Warren <sup>2,3</sup> , Alistair Mackenzie <sup>2,3</sup> , Alaleh Rashidnasab <sup>1</sup> , Oliver Diaz <sup>1</sup> ,  |  |  |  |  |
| Evaluation of Digital Breast Tomosynthesis as Replacement<br>of Full-Field Digital Mammography Using an In Silico Imaging Tri<br>Aldo Badano, PhD; Christian G. Graff, PhD; Andreu Badal, PhD; Diksha Sharma, MSc; Rongping Zeng, PhD; Frank W. Samuelson, PhD;<br>Stephen J. Glick, PhD; Kyle J. Myers, PhD   | Towards 4D dedicated breast CT perfusion imaging of<br>cancer: development and validation of computer simulated<br>images<br>Marco Caballo <sup>1</sup> (b), Koen Michielsen <sup>1</sup> , Christian Fedon <sup>1,2</sup> (b) and Ioannis Sechopoulos <sup>1,3,4</sup>  |  |  |  |  |
| VIRTUAL CLINICAL TRIALS OF BREAST TOMOSYNTHESIS<br>Predrag R. Bakic<br>University of Pennsylvania, Philadelphia, PA, USA.<br>Penn Anatomy and Imaging Simulation Pipeline<br>Simulate Normal<br>Anatomy Insert Lesion(s) Simulate<br>Deformation and<br>Deformation Insert Lesion(s) Orientation Insert Lesion(s) Orientation and<br>Deformation Insert Lesion(s) Orientation Insert Lesi | Published 13 December 2019 • © 2019 Institute of Physics and Engineering in Medicine<br>Physics in Medicine & Biology, Volume 64, Number 24<br><b>Valuation of a free from too Structure free acquisition</b><br><b>of mampagraphic images with different</b><br><b>Joana Boita</b> ; Alistair Mackenzie; Joannis Sechopoulos<br>Author Affiliations +<br>Proceedings Volume 10948, Medical Imaging 2019: Physics of Medical Imaging; 109481K (2019)<br>https://doi.org/10.1117/12.2513293 |  |  |  |  |
| Figure 1 – Flowchart of a virtual clinical trial of breast imaging.  | Event: <u>SPIE Medical Imaging</u> , 2019, San Diego, California, United States 13   |  |  |  |  |







Advanced Geant4-based Application for in-silico clinical Trial in x-ray breAst imaging

The **first platform** for virtual clinical trials in **2D** and **3D** (2D mammography, DBT and BCT) x-ray based breast imaging based on a **Monte Carlo** software and **patient-derived** digital breast models.





#### Patient derived digital breast phantoms







#### **Segmentation process evaluation**







#### **Database of uncompressed breast phantoms**



85 digital breast phantoms from 85 unaffected breast acquired with the UC Davis BCT scanner

|  | Mean   | Std. Dev. | Min.   | Max.   |
|--|--------|-----------|--------|--------|
| Glandular fraction by mass                       | 0.13   | 0.10      | 0.01   | 0.59   |
| Glandular fraction by volume                     | 0.11   | 0.10      | 0.01   | 0.53   |
| Breast volume – skin excluded (cm <sup>3</sup> ) | 513.83 | 198.24    | 139.36 | 880.25 |
| Breast length from chest wall to nipple (mm)     | 84.29  | 12.93     | 49.85  | 104.14 |
| Equivalent diameter at the center of mass (mm)   | 105.87 | 14.66     | 57.13  | 136.23 |



## The simulation platform for bCT

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Breast CT exam



Dose distribution assessment with patient derived digital breast phantoms can help in evaluating peak doses and validating homogeneous breast models for average glandular dose estimates.



#### Simulated dedicated breast CT

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Comparison of clinical and simulated CT dataset Multiscale structural similarity index – MS-SSID: 0.88 @ 49 kV, 0.84 @ 80 kV



Introduction ➤ Digital Breast Phantoms ➤ **The AGATA Platform** ➤ Discussion



## **The simulation platform for DM / DBT**







#### What will the Agata platform permit?

The AGATA platform will constitute an engaging proposal to a broad community, also including those people involved in R&D of applications and scanners which have not easy access to clinical data.

#### THE PLATFORM WILL PERMIT:

- 1) comparison of breast imaging modalities and technical solutions;
- 2) development of scanners on the basis of comparison between several solutions;
- 3) refinement of imaging protocols and dose optimization;
- 4) developing of software which needs the knowledge of the ground truth
  - (organ state and morphology)
- 5) comparison of artifacts removing algorithms;
- 6) development of scatter correction algorithms;
- 7) development and feasibility studies of new technologies
- 8) teaching and divulgation support







## **Ongoing work**

Validation of the segmentation and compression processes
 Extention of the uncompressed digital breast phantoms to 300 cases
 Generation of compressed phantoms for all the uncompressed ones
 Development of the Monte Carlo code for DM and DBT

**Computing Power** 4 x Server DELL EMC PowerEdge R7425 with 8 x AMD EPYC<sup>TM</sup> 7281 (16 core, 32 working threads)







#### ...and a little treat



#### **3D** printing @INFN Napoli



# Thank you for your attention!



Advanced GeAnt4-based platform for virtual clinical Trials in X-ray breAst imaging