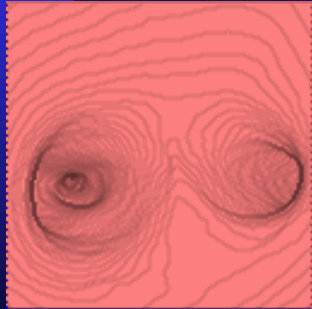
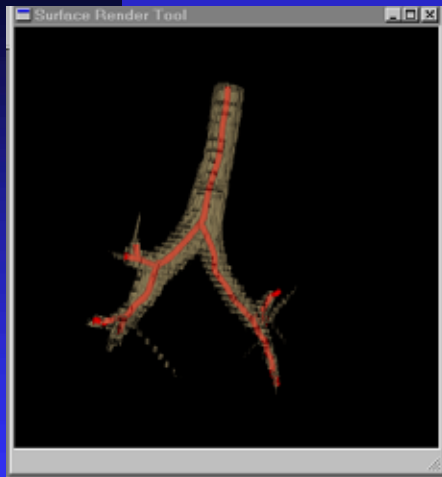


# Virtual Bronchoscopic approach for combining 3D CT and endoscopic video



Anthony J. Sherbondy,<sup>1</sup> Atilla P. Kiraly,<sup>1</sup> Allen L. Austin,<sup>1</sup>  
James P. Helferty,<sup>1</sup> Shu-Yen Wan,<sup>1</sup> Janice Z Turlington,<sup>1</sup> Tao  
Yang,<sup>1</sup> Chao Zhang,<sup>1</sup> Eric A. Hoffman,<sup>2</sup> Geoffrey McLennan,<sup>2</sup>  
and William E. Higgins<sup>1,2</sup>



<sup>1</sup>Penn State University, University Park, PA 16802

<sup>2</sup>University of Iowa, Iowa City, IA 52246

*SPIE Med. Imaging 2000*, San Diego, CA, 12 February 2000



# Virtual Endoscopy:

- New field: 1994.
  - ◆ Virtual bronchoscopy (VB) -- focus on chest
- VB Needs: better reporting, path planning, bridge to live bronchoscopy
- CT-only reporting: Summers98, Vining99
- CT-Bronchoscopy linkage: Bricault98

# Our Work:

- *Complete pulmonary assessment*
  - *3D CT Assessment* → *Bronchoscopy*
  - *Suite of graphics tools to augment vision*
- *Case Study*
  - *Multimedia report*
  - *Bronchoscopic guidance*

# Remainder of Presentation:

- I. Two-stage CT-to-Videobronchoscopy paradigm
- II. CT-only examples: Humans
- III. CT-video progress: bronchoscopy training device

# Two-Stage CT-Video Paradigm

## ■ Stage 1 (CT Assessment)

1. Create new Case Study.
2. Invoke graphics tools.
3. Identify key sites.
4. Compute guidance data.
5. Build complete Case Study.

*Roadmap to  
bronchoscopy*

## ■ Stage 2 (Bronchoscopy)

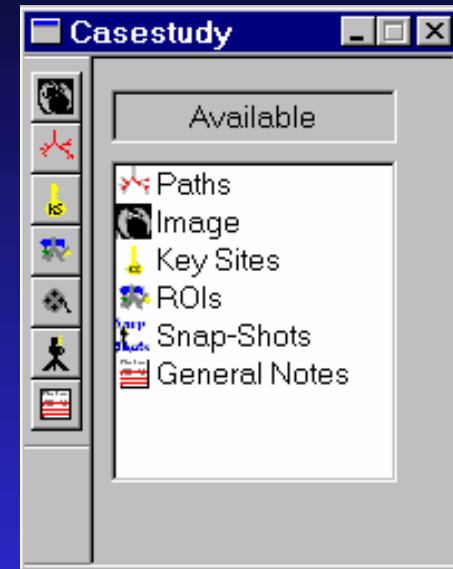
1. Load Case Study.
2. Invoke graphics tools.
3. Do virtual-guided bronchoscopy.
4. Perform biopsy.



# Case Study:

- Multimedia report
  - 3D CT assessment
- Supplemental plan
  - guide bronchoscopy

➤ *Build with Graphics/Processing Tools*



# Elements of Case Study:

## 1. Data Sources

- ◆ 3D CT Image
- ◆ Bronchoscopic Video

## 2. Data Abstractions

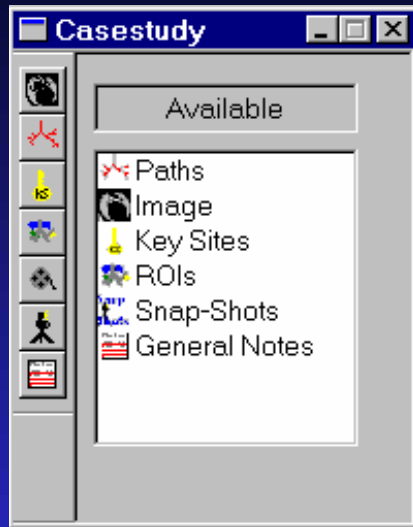
- ◆ Root Site
- ◆ Key Sites
- ◆ Paths
- ◆ Tree

## 3. Reporting Abstractions

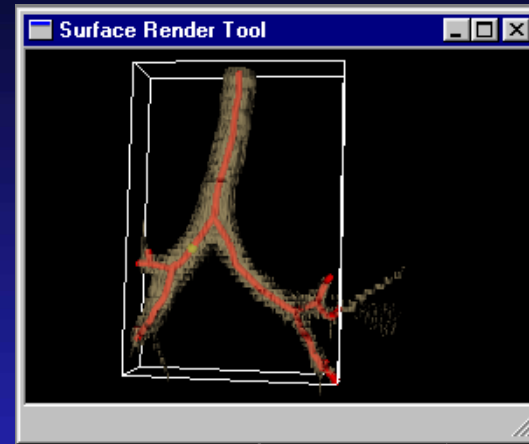
- ◆ Snapshots
- ◆ Plots
- ◆ Movies
- ◆ Case Notes
- ◆ Measurements



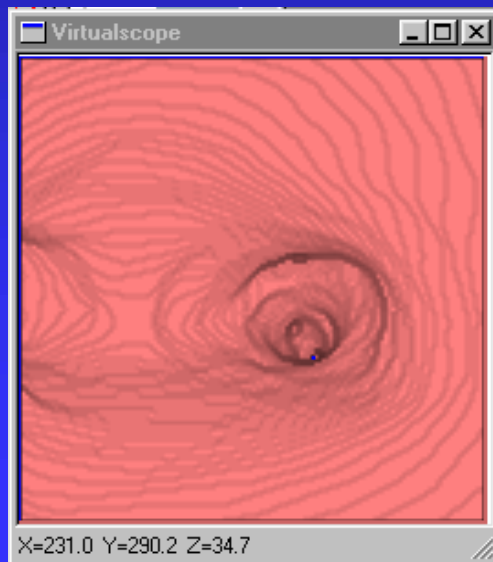
# Graphics Tools - 1



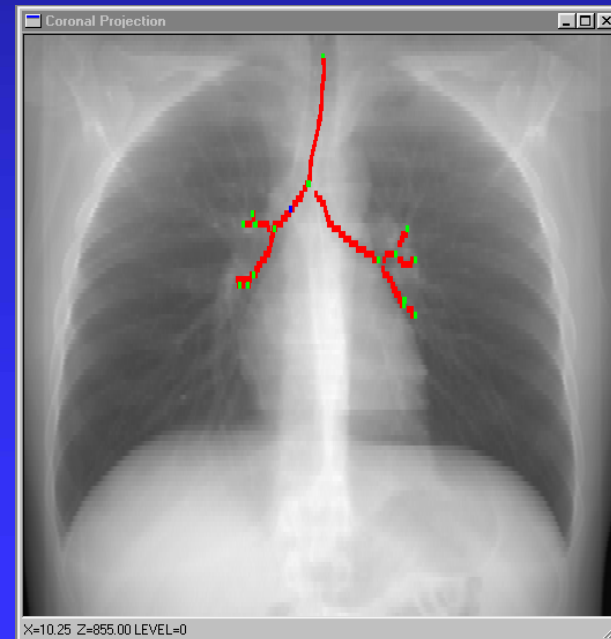
*Case Study Manager*



*3D Surface Tool*

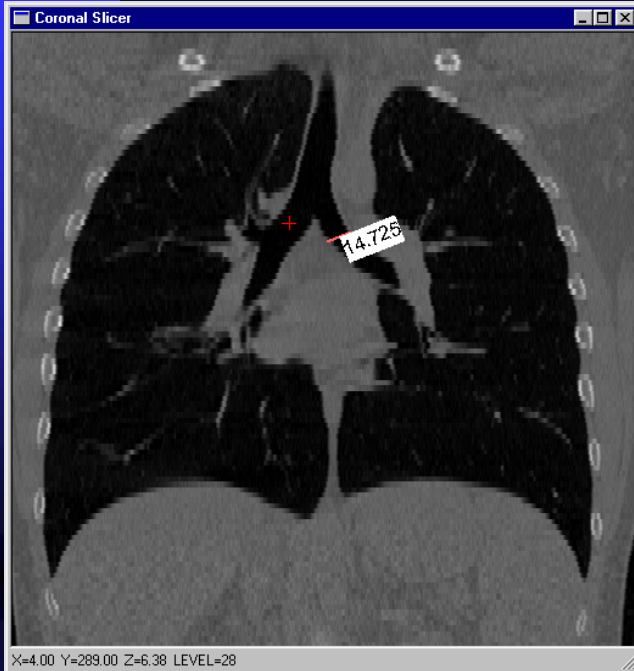


*Virtualscope*



*Projection Tool (Coronal)*

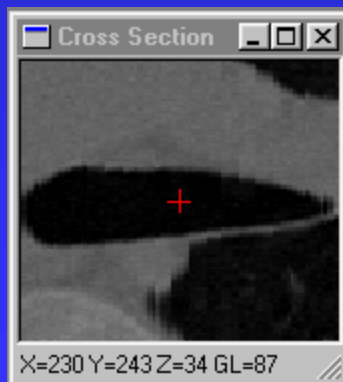
# Graphics Tools - 2



*Slicer Tool (MPR View, Coronal)*



*Sliding Thin Slab Tool (Transverse)*



*Cross Section Tool (Horizontal)*



*Plot Tool*

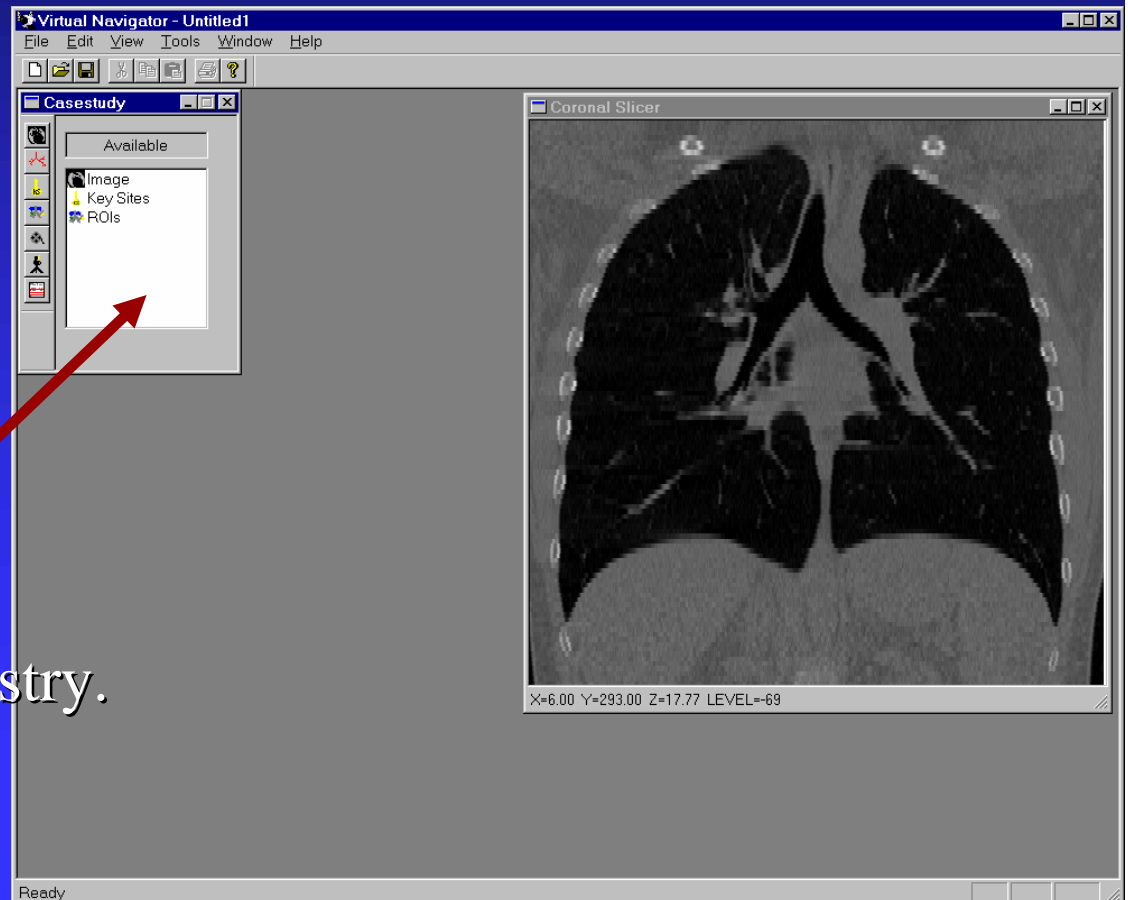
## II. CT-only Examples

### Example 1: Healthy Female

- 3D EBCT image at 90% TLC
  - 115 slices; 512x512 per slice
  - 3.0mm slice thickness; 0.684mm [x-y] resol.
- Emphasize automatic tree generation

# Stage 1 (CT Assessment)

1. Create new Case Study.
2. Invoke graphics tools.
3. Identify Key Sites.
4. Compute guidance data.
5. Build complete Case Study.

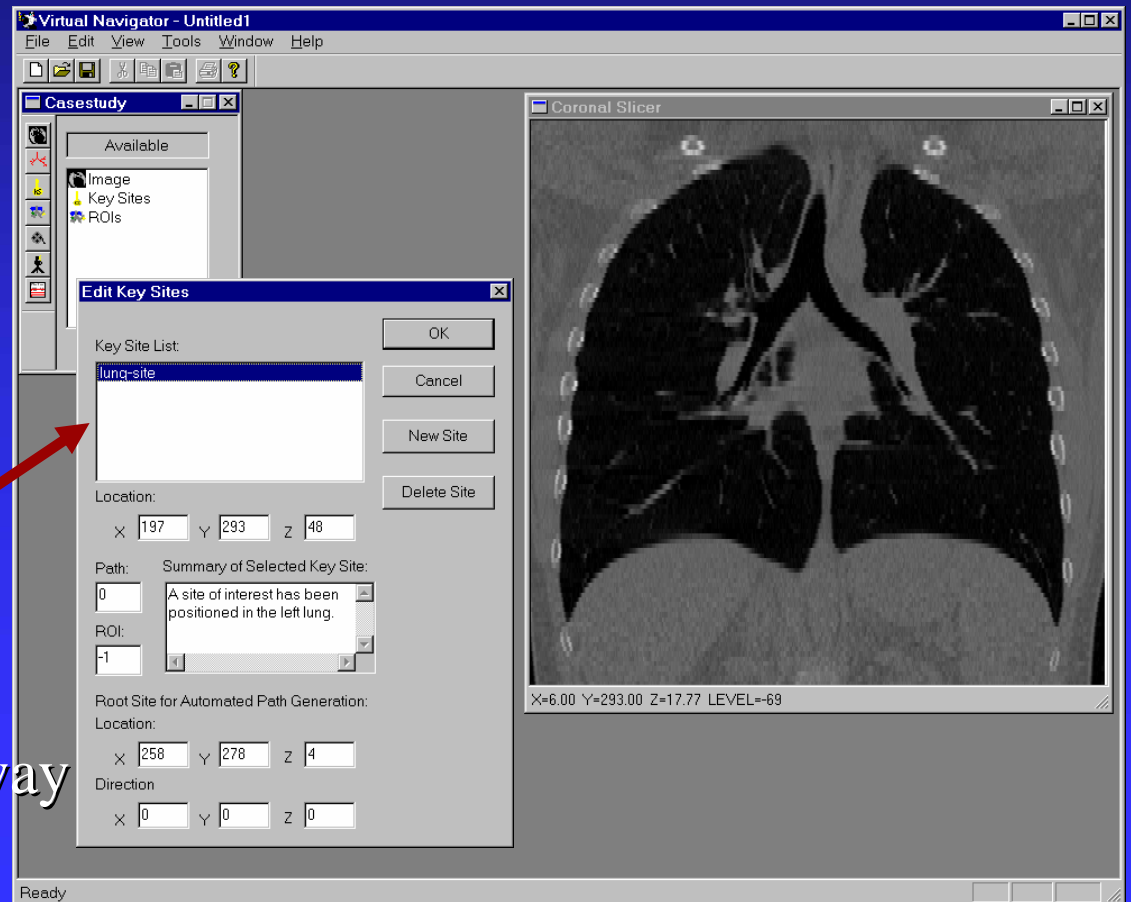


Case Study registry.

# Stage 1 (CT Assessment)

1. Create new *Case Study*.
2. Invoke Graphics tools.
3. **Identify Key Sites.** ←
4. Compute guidance data.
5. Build complete *Case Study*.

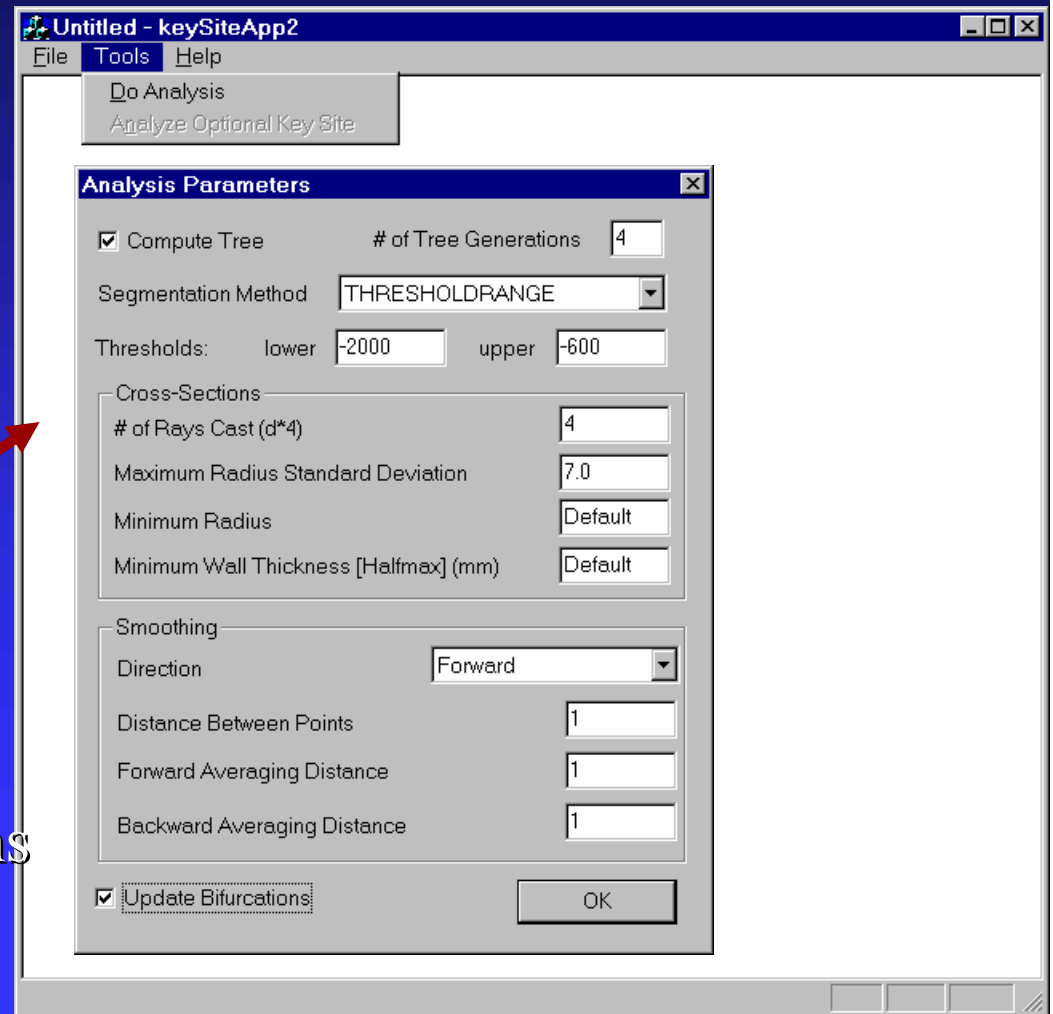
Set up data for Key sites and airway tree calculation.



# Stage 1 (CT Assessment)

1. Create new *Case Study*.
2. Invoke graphics tools.
3. Identify Key Sites.
4. **Compute guidance data.**
5. Build complete *Case Study*.

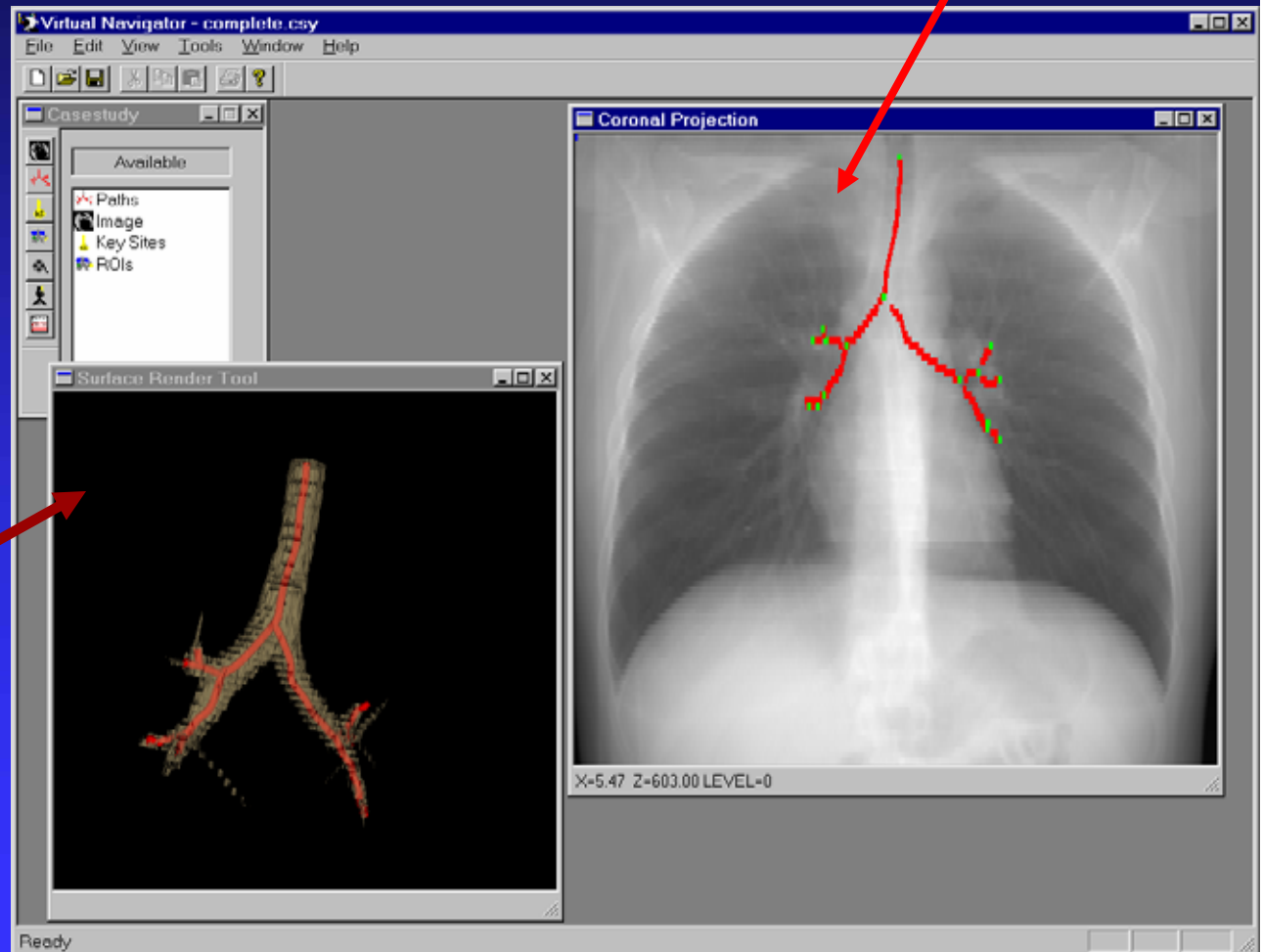
Invoke automated run to compute airway tree and paths to defined key sites.



# Stage 1 (CT Assessment)

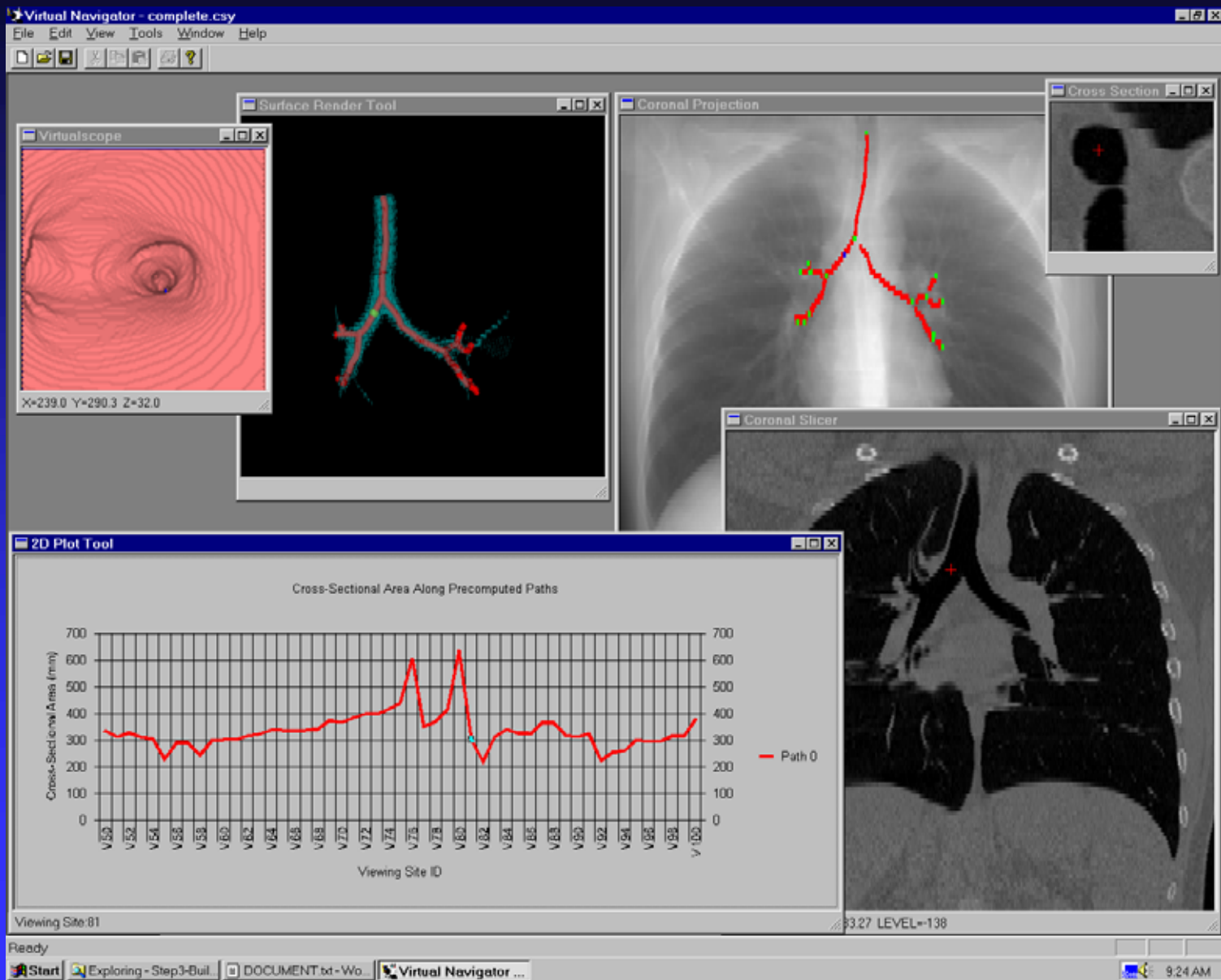
1. Create new *Case Study*.
2. Invoke graphics tools.
3. Identify Key Sites.
4. Compute guidance data.
5. **Build complete Case Study.**

Coronal weighted-sum projection showing extracted airway tree.



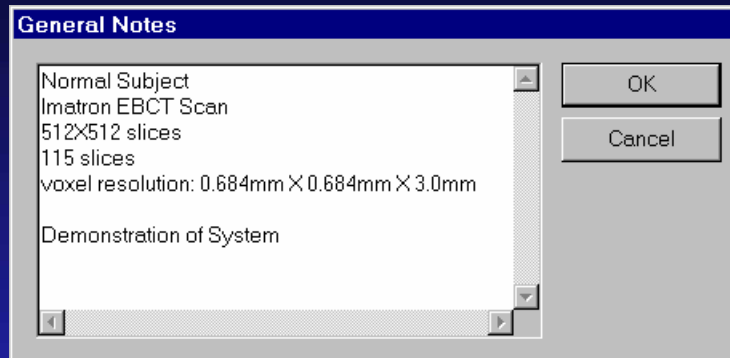
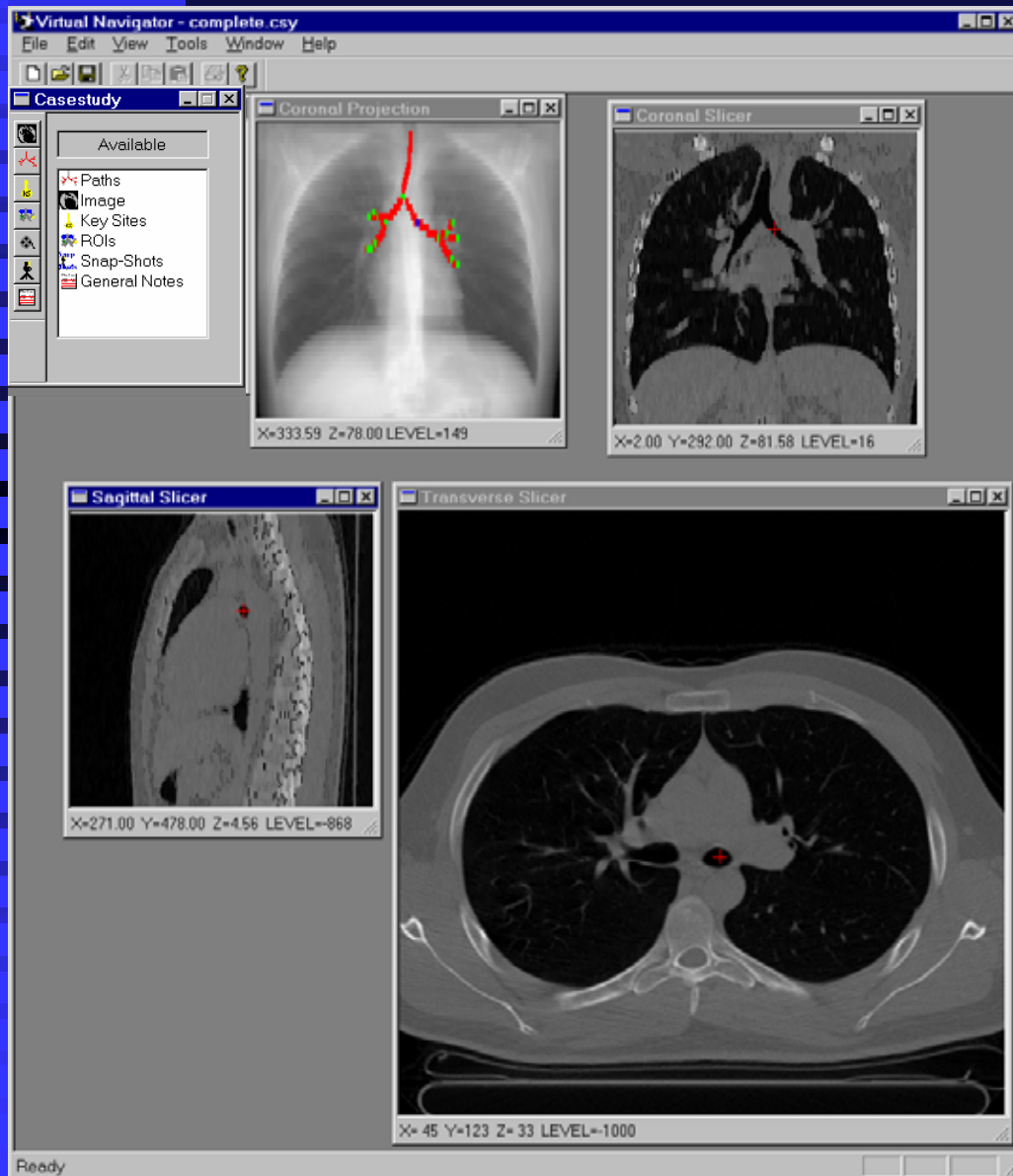
Rendered airway tree, with extracted paths through airways.

# Composite Case Study -- Part 1

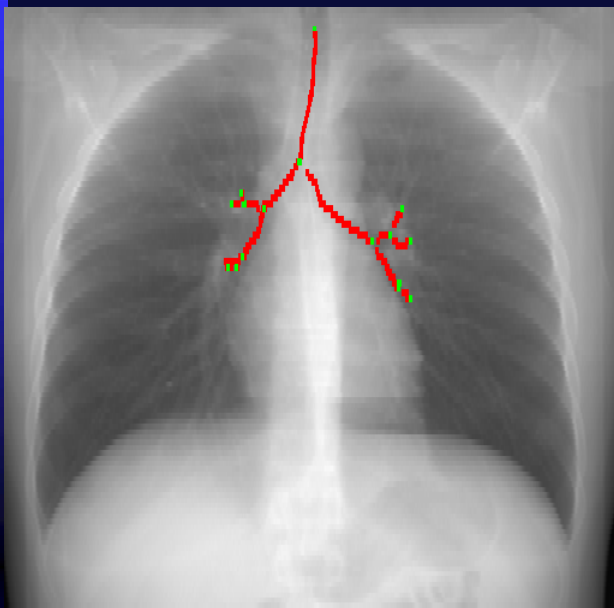




# Composite Case Study - part 2



# Complete Case Study – Snapshots are saved.



Coronal weighted-sum projection with extracted tree.

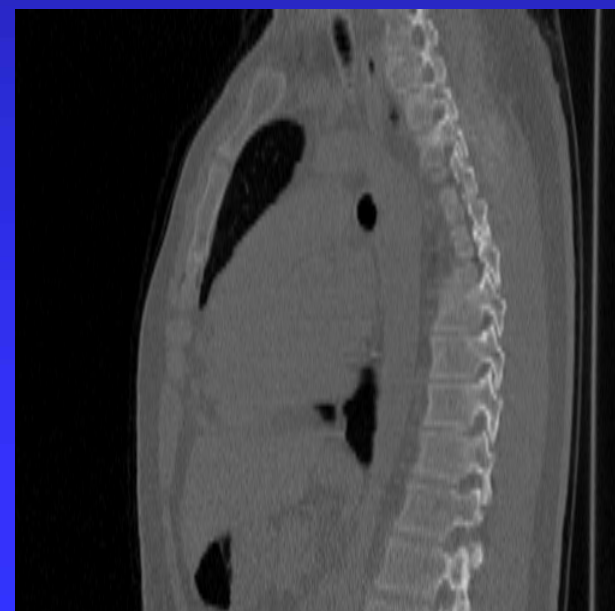
Coronal Slicer view.



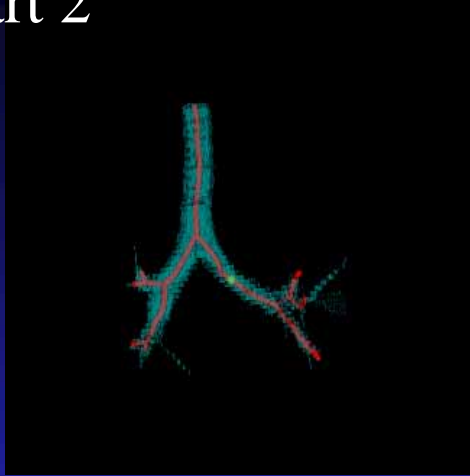
Sagittal Slicer view.



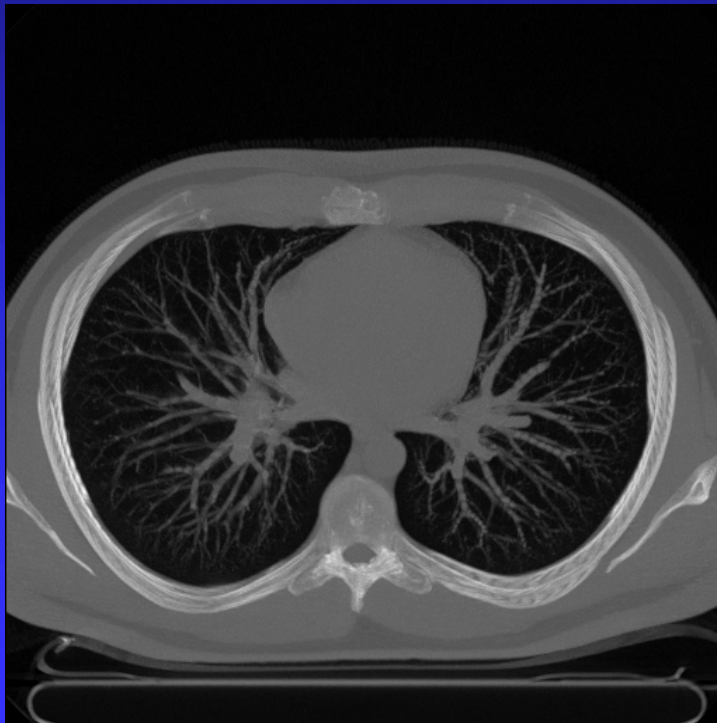
Oblique cross-section.



## Complete Case Study - part 2



Rendered airway tree with extracted airway paths.

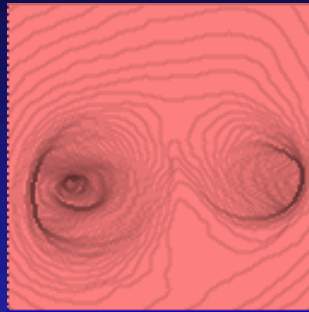


Transverse Sliding Thin Slab (STS) view.

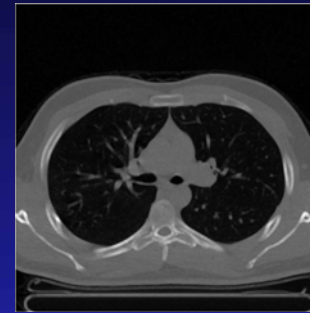


Transverse slice image.

# Viewable *Movie Sequences* saved with final Case Study



Virtualscope



Tranverse Slicer



Oblique Cross-Section

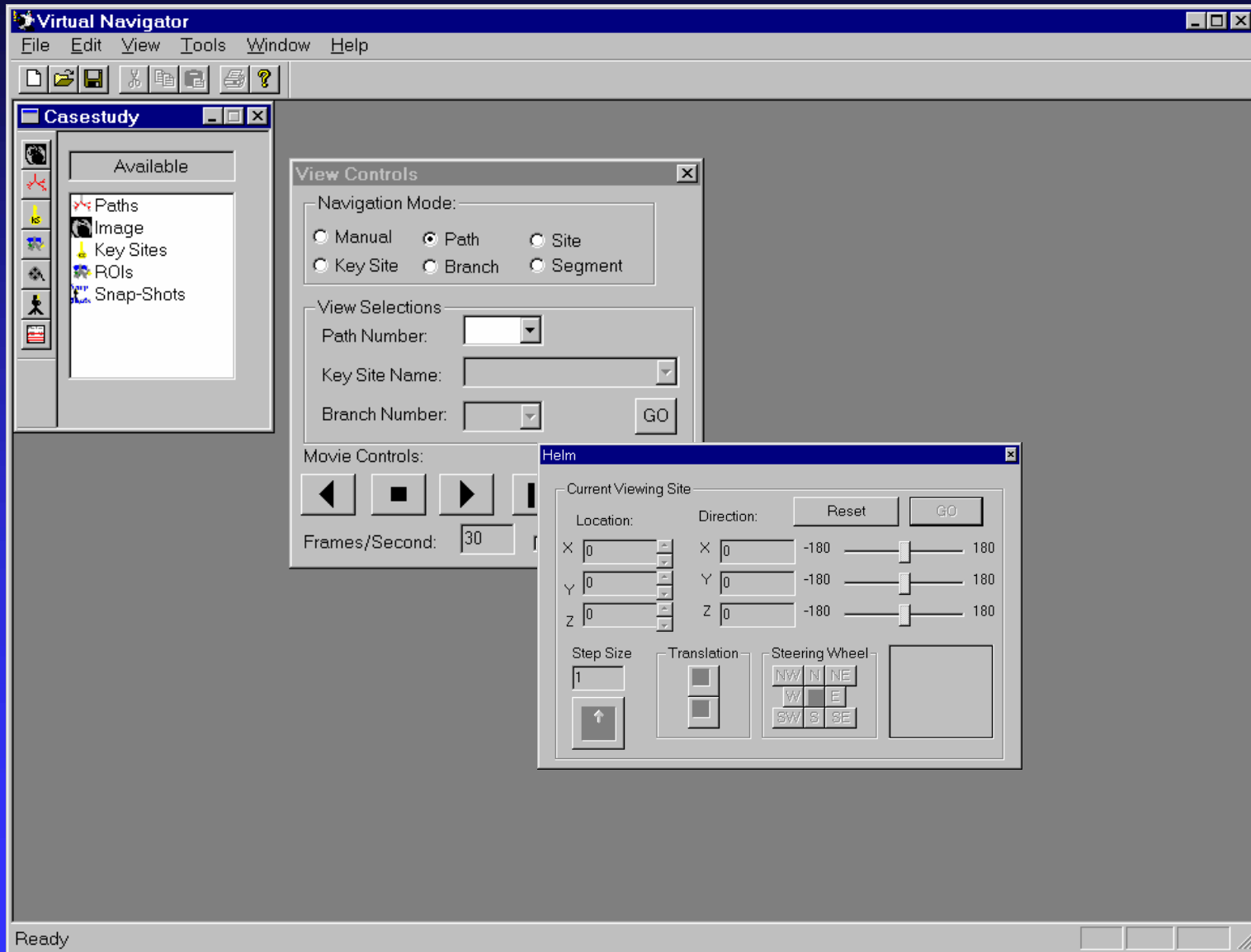


Sagittal Slicer



Coronal Slicer

# Other Navigation Tools



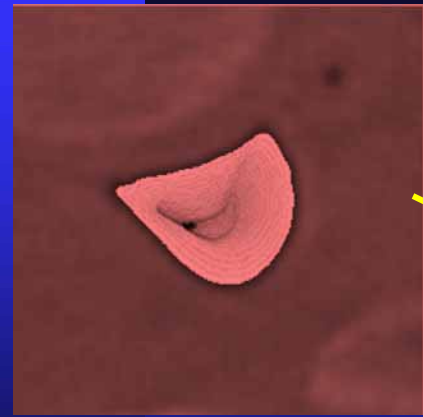


# Example 2: Pathology Case

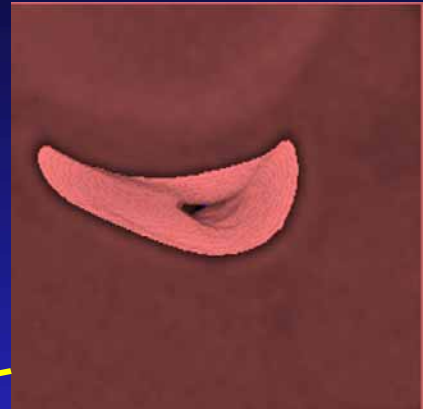
- Patient suffering from tracheomalacia
  - EBCT scan; 133 slices; 512x512 voxels/slice
  - 1.5mm slice thickness
  - 0.586mm axial-plane resolution
- Illustrates utility of a **Key Site**

# Ex #2: Coronal Weighted-Sum Projection showing computed path

Virtual endoscopic renderings shown for selected sites.



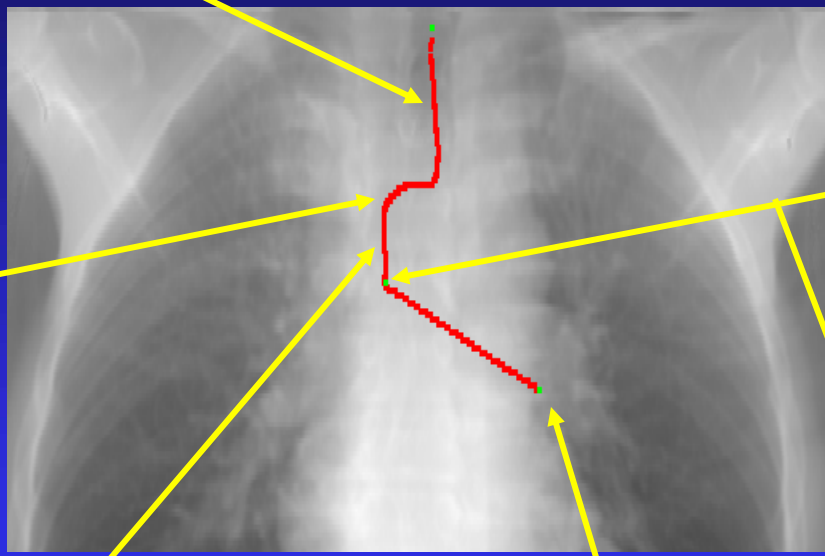
Site #20 approaching tracheal collapse



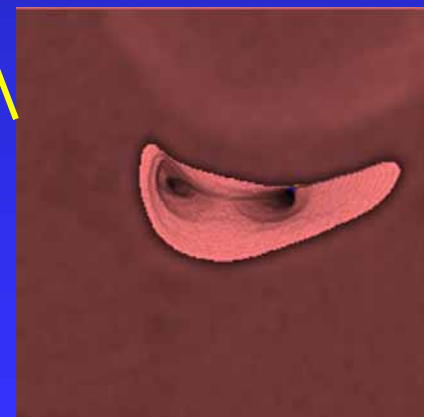
Looking back toward tracheal collapse from site #99



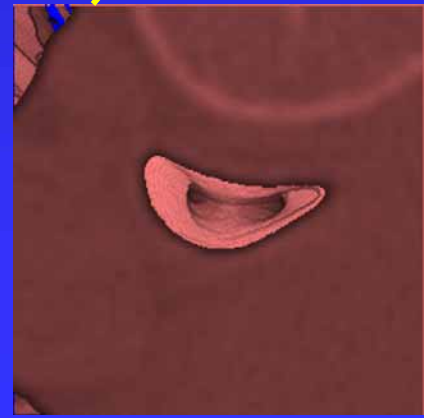
Site #56 within tracheal collapse



Preselected *Key Site* used to initiate path.



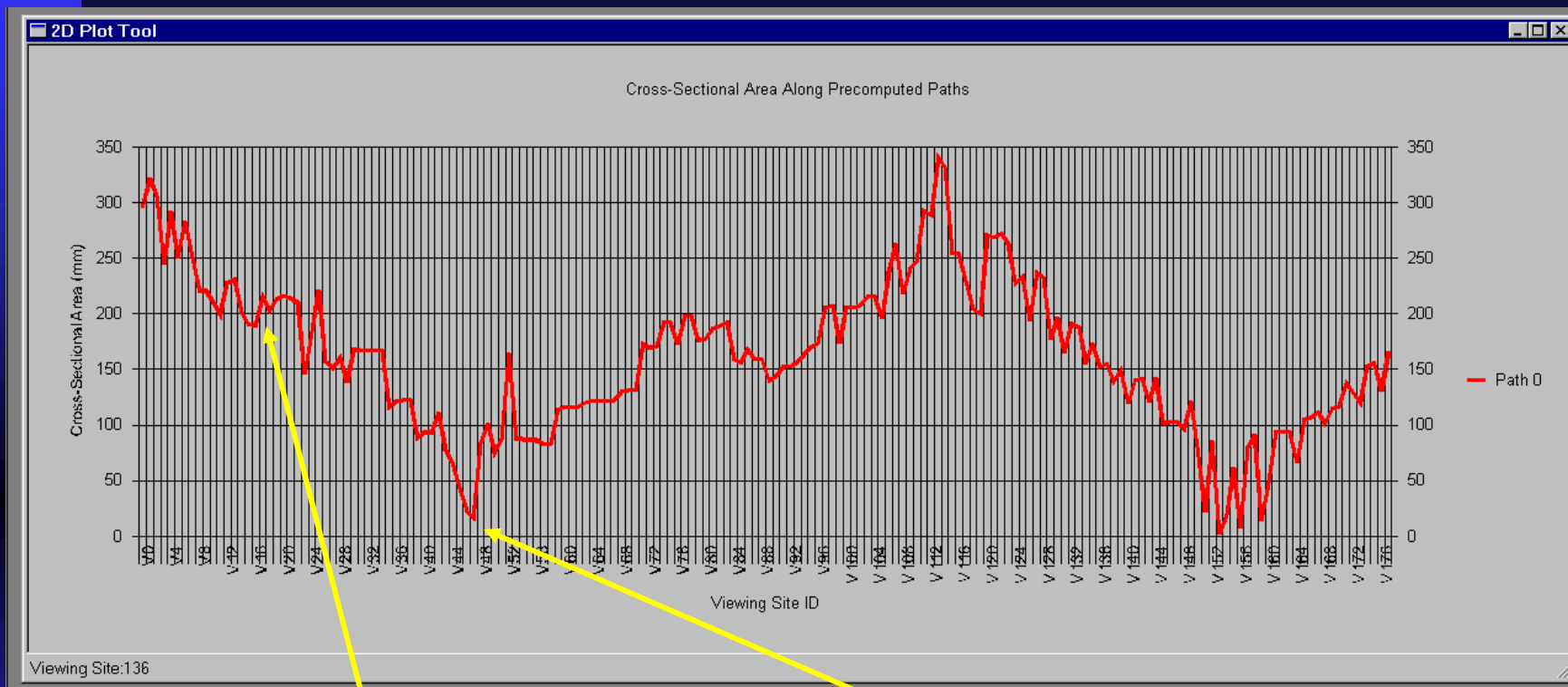
Site #99 near carina



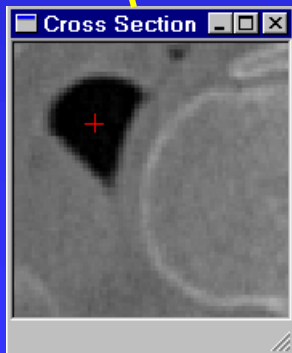
Site #86 leaving trachea



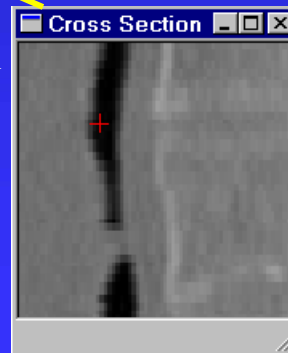
## Example 2: Plot of Airway Cross-Sectional Area along Path



Oblique Cross-Section  
at site #18, near  
tracheal collapse.



Oblique Cross-Section  
at site #48, within  
tracheal collapse.

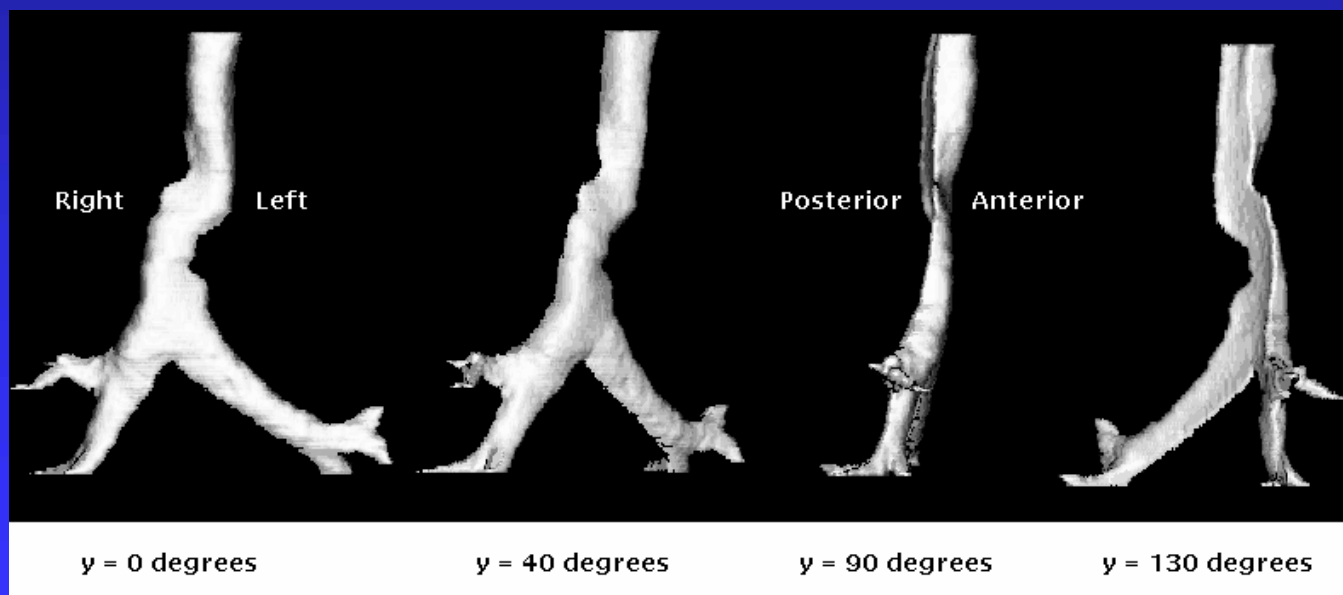


*Plot clearly shows  
drop in cross-  
section where  
blockage occurs.*

## Example 2: Captured Snapshots of Pathology

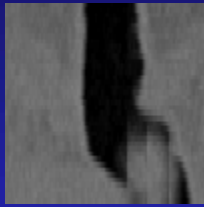


Coronal Slicer snapshot clearly shows pathology.

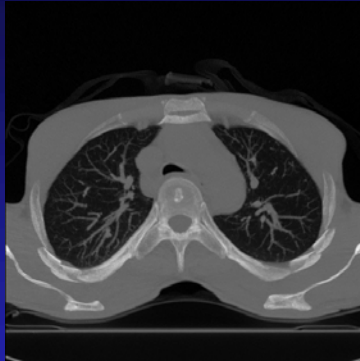


Renderings of Airway tree clearly show pathology.

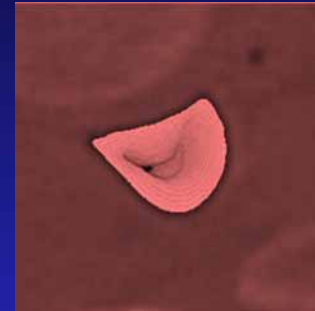
# Example 2: *Movie Sequences* saved with Case Study



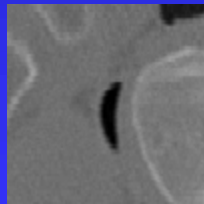
Vertically Oriented  
Cross-Section



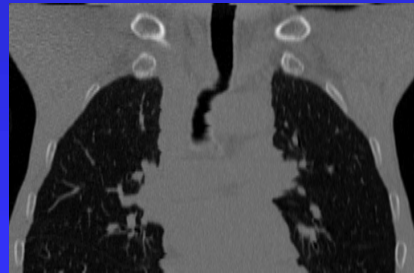
Transverse STS-Max



Virtualscope



Orthogonal Cross-Section



Coronal Slicer



Sagittal Slicer



# III. Complete CT-Video: progress

## ➤ Virtually guided bronchoscopy



1. Overview
2. Mutual information algorithm
3. Test results: bronchoscopy training device

## Application to TBNA (needle biopsy)

- TBNA -- blind procedure for sampling tissue
- Use VB-generated path:
  - » bronchoscopist sees more, maintains orientation
- Matched video with rendered 3D CT scan
  - » identify target areas for biopsy

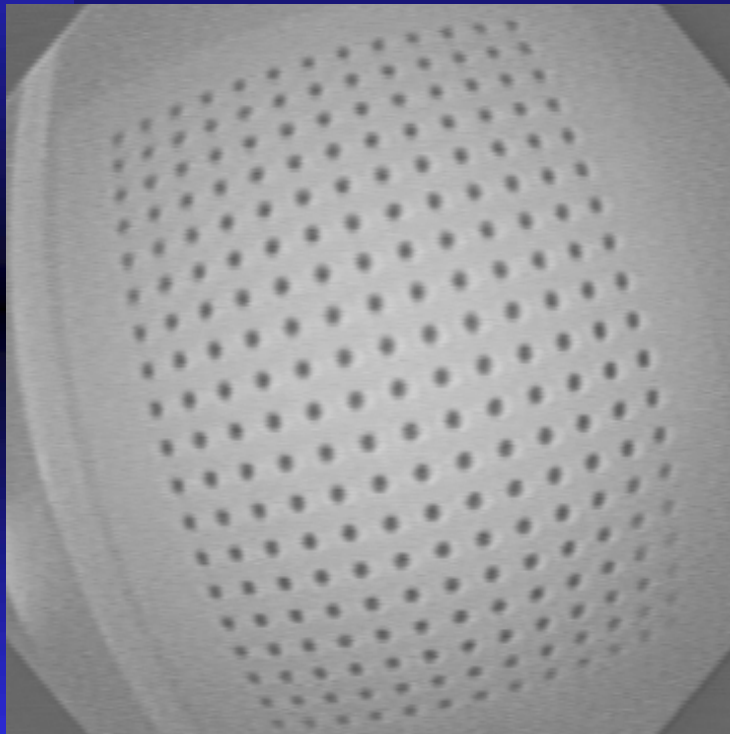
## CT-Video Matching: mutual-information algorithm

- Match rendered endoluminal CT view to video.
- Normalized Mutual Information Criteria
  - Studholme, IEEE TMI, Jan 1999
- Rendered Images with Graphical Accelerator
  - Hata, Lect. Notes in Comp. Sci., vol. 1131
- Steepest decent optimization.

# Barrel-Distortion Correction of Bronchoscopic Video

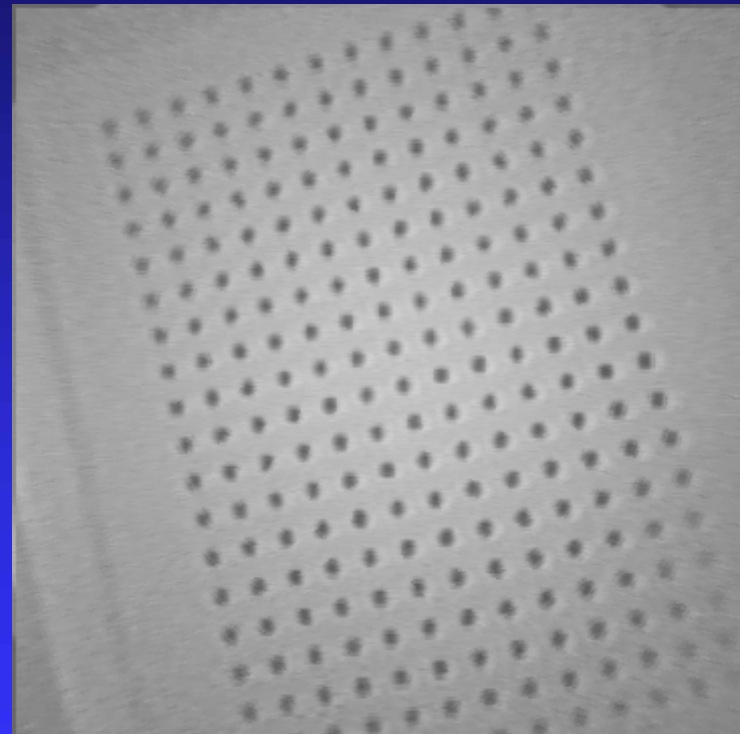


Necessary for proper registration of video to rendered CT



Before correction

(video frame of a test pattern)




After correction

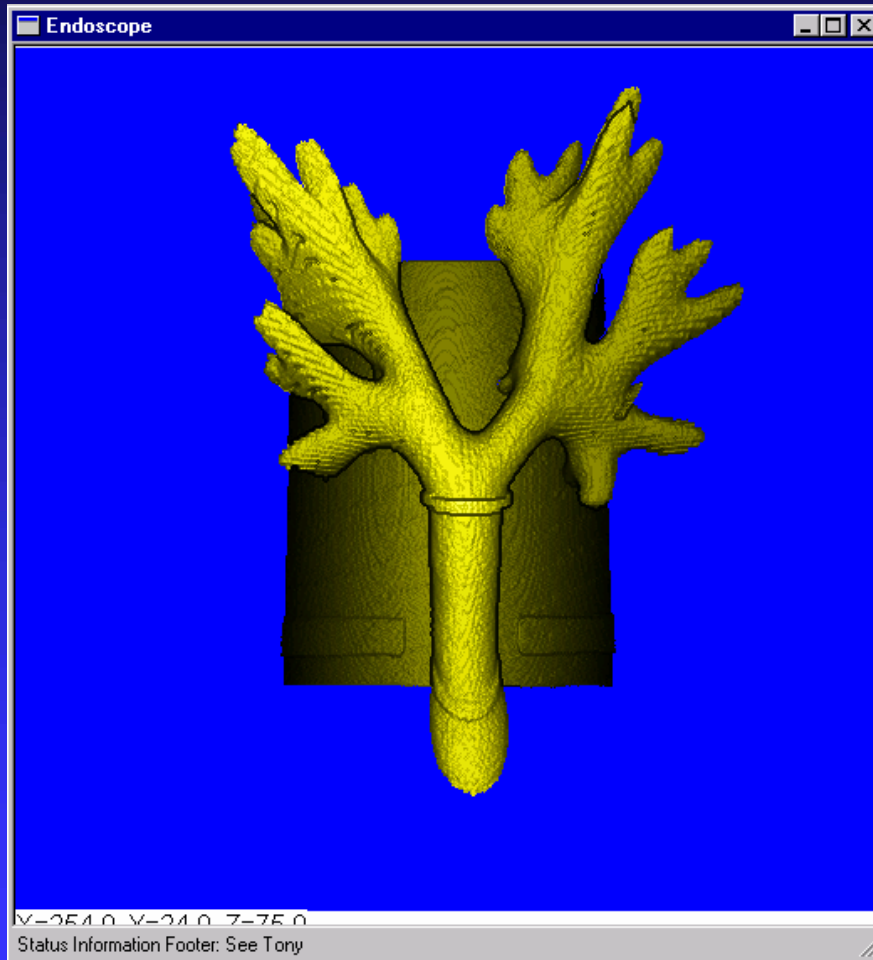
\*See Zhang, ICIP2000



# Registration of Rendered 3D CT & Bronchoscopic Video

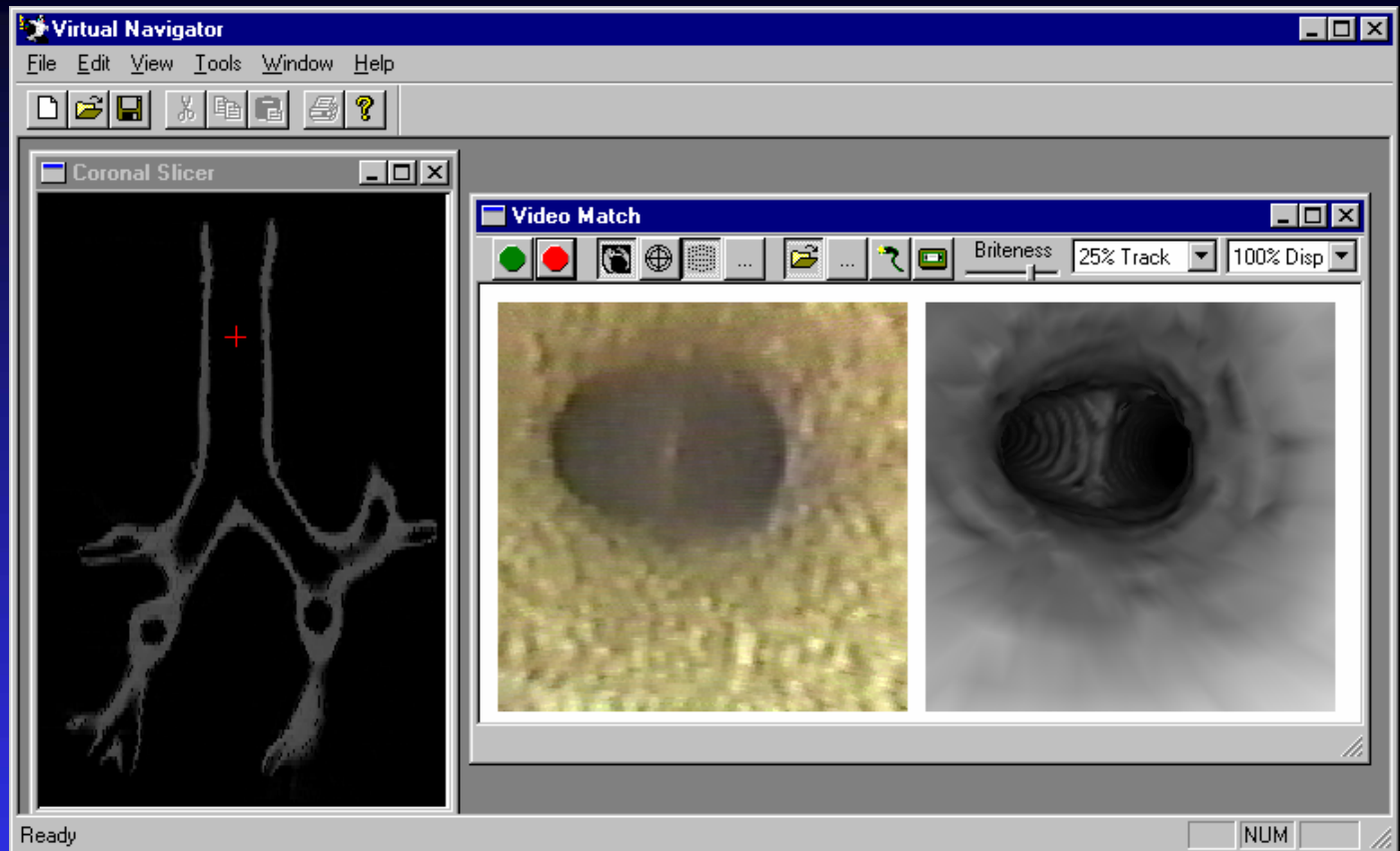
1. Use bronchoscopy training device.
2. Collect high-resolution EBCT scan.
3. “Perform” bronchoscopy on device  
     collect video

# Bronchoscopy Training Device



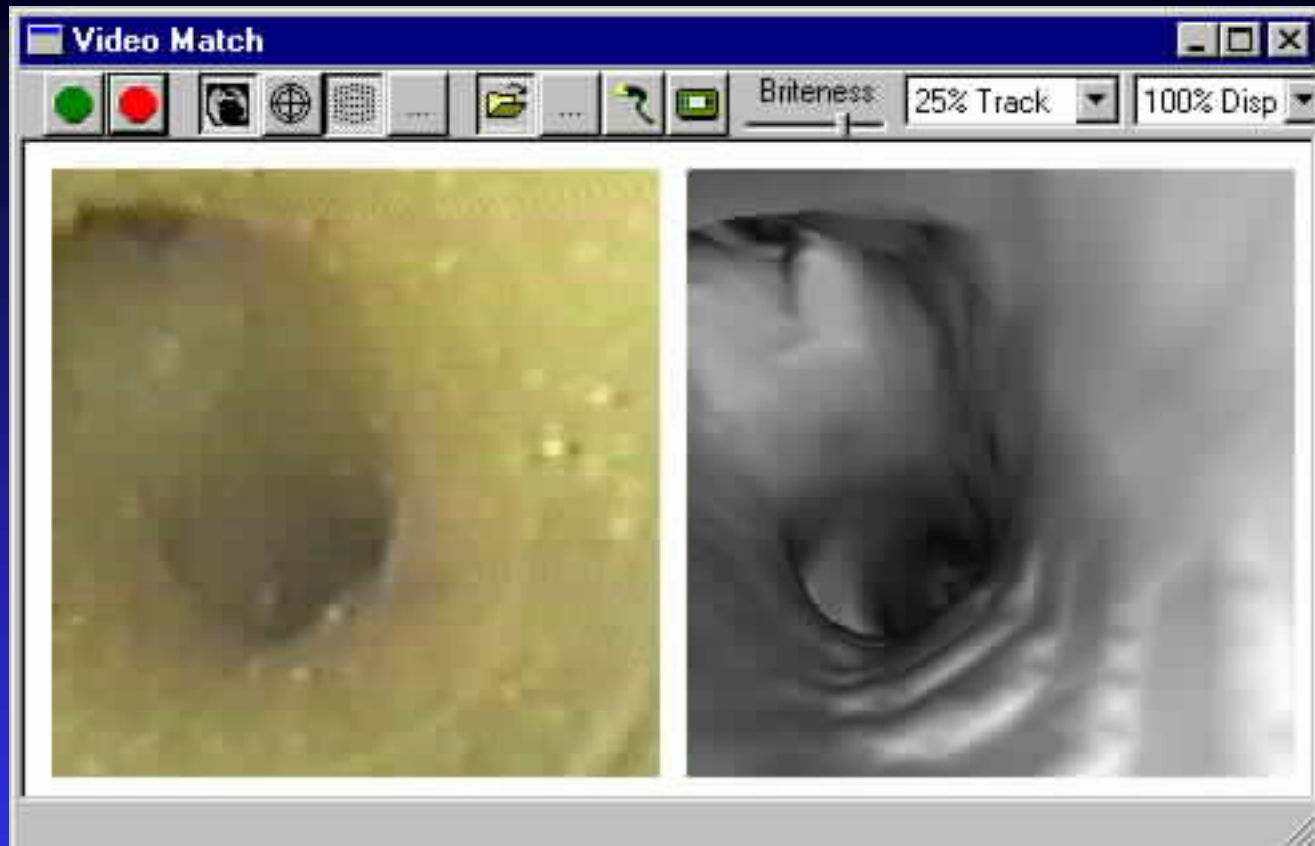
➤ *3D CT image rendered*

*Initial  
Point:  
Registration  
near Carina*



- Initial point chosen in virtual 3D-CT world.
- Bronchoscope moved in “live” world to point.
- Optimal viewpoint calculated using mutual information.

*Registration  
in Left  
Bronchus*



➤ *Bronch video  
frame*

➤ *Matching  
rendered CT view*

# Future Work

- Design specific VB-based protocols:  
lymph-node location, stent design
- Combine CT-based analysis with video  
during live bronchoscopic procedures.

# Other SPIE Talks

- 5:30 tonight -- California Room
  - ◆ “Place of Virtual Bronchoscopy in Clinical Practice: Barriers and Solutions”
- 1:20 today -- *Image Display* conference
  - ◆ “New Techniques for Fast Sliding Thin-Slab Volume Visualization” by J. Turlington