

# Treatment Effect of Balloon Pulmonary Angioplasty in CTEPH, Quantified by Automatic Comparative Imaging in CTPA

Zhiwei Zhai<sup>\*</sup>, Hideki Ota<sup>‡</sup>, Marius Staring<sup>\*</sup>,  
Jan Stolk<sup>+</sup>, Koichiro Sugimura<sup>°</sup>, Kei Takase<sup>‡</sup>,  
Berend Stoel<sup>\*</sup>

Leiden University Medical Center, Netherlands

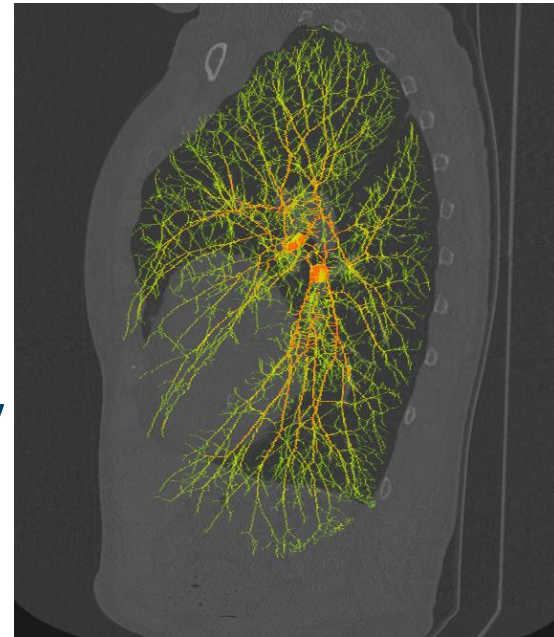
<sup>\*</sup> Div. of Image Processing, Dept. of Radiology

<sup>+</sup> Dept. of Pulmonology

Tohoku University Hospital, Japan

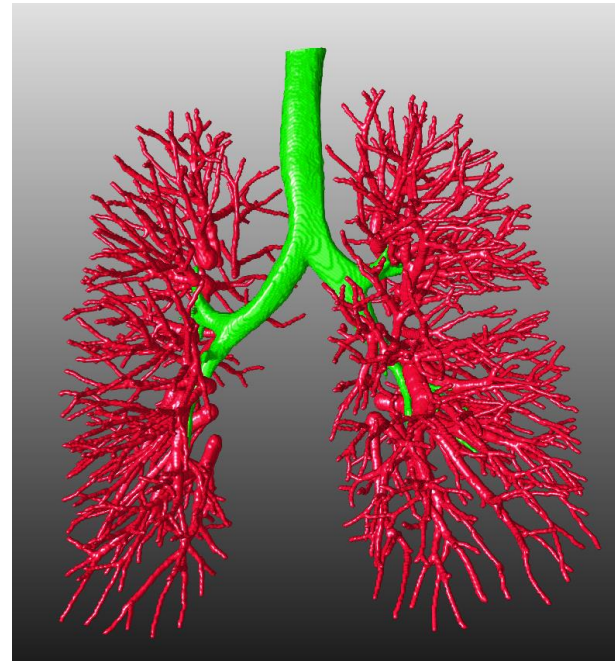
<sup>‡</sup> Dept. of Diagnostic Radiology

<sup>°</sup> Dept. of Cardiology



# Contents

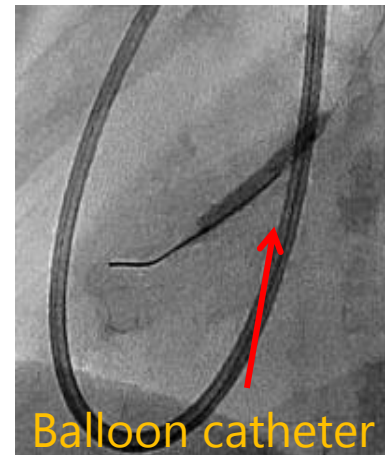
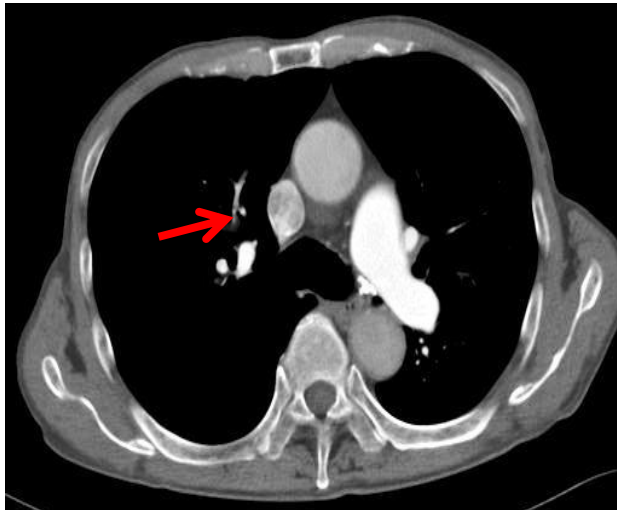
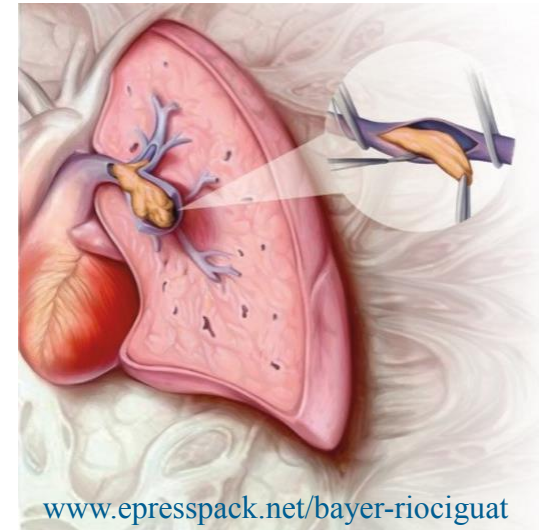
- **Introduction to CTEPH**
- Study population treated with BPA
- Methods of quantification
- Results & Discussion



# Introduction

## ■ Chronic thromboembolic pulmonary hypertension (CTEPH)

- Caused by persistent obstruction of pulmonary arteries
- Surgical treatment: pulmonary endarterectomy
- Inoperable CTEPH: Balloon Pulmonary Angioplasty (BPA) is an alternative treatment



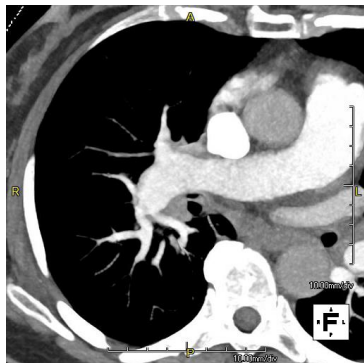
# Introduction

## ■ Assessment of treatment effects

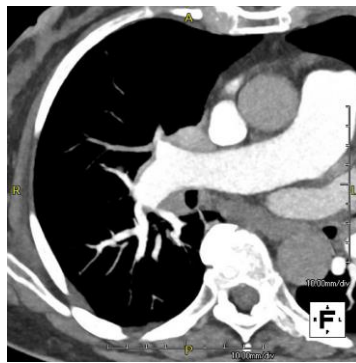
- Noninvasively: 6-min walk distance; brain natriuretic peptide (BNP) level; (dual-energy) CT pulmonary angiography (CTPA)
- Invasively: right heart catheterization (RHC) (gold standard)

## ■ Purpose of this study

- Automatic comparison of pre- and post-treatment CTPA, to provide a non-invasive assessment of BPA treatment



Pre BPA



Post BPA

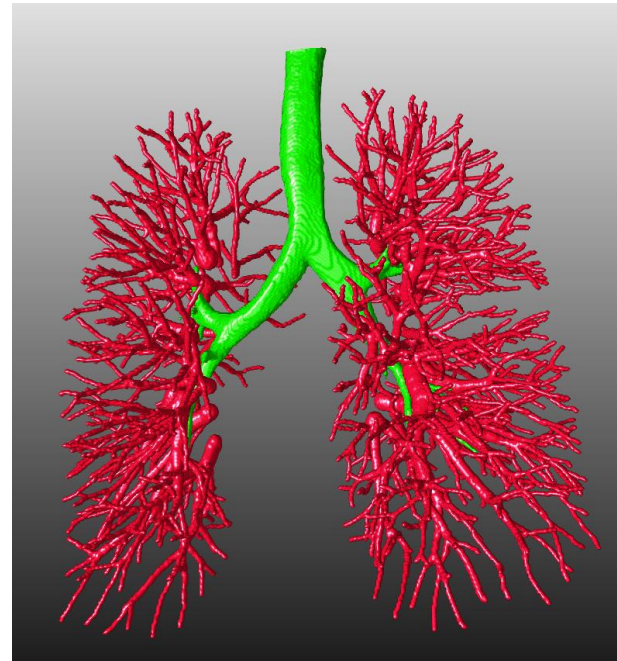
ESC-ERS Guidelines, European heart journal. 2015;ehv317

H Takagi et al., European Journal of Radiology. 2016;85(9):1574-80

JA Feinstein et al., Circulation 2001;103:10-13.

# Contents

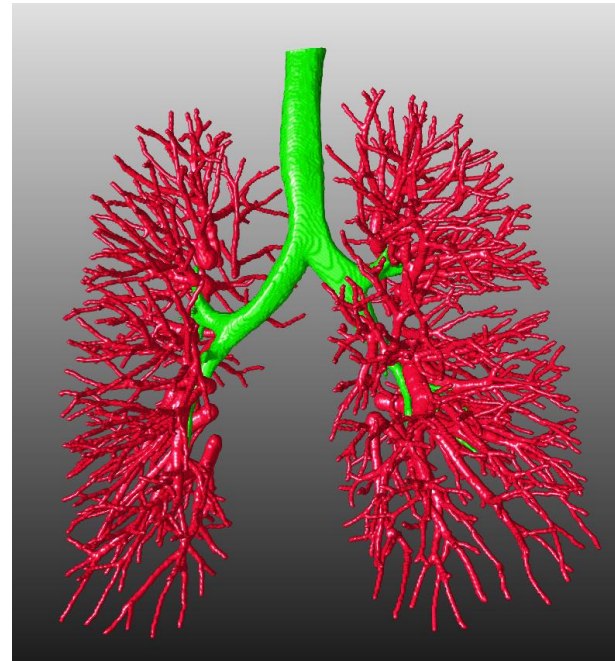
- Introduction to CTEPH
- **Study population treated with BPA**
- Methods of quantification
- Results & Discussion



- **14 CTEPH patients treated with BPA**
  - Mean age  $70.5 \pm 24$  years, 12 females (86%)
  - Right heart catheterization (RHC) performed pre- and post-BPA:
    - Pulmonary artery pressure (PAP: mean, systolic and diastolic)
    - Pulmonary vascular resistance (PVR)
  - CTPA of pre- and post-BPA were performed with iodine contrast
  - Interval between CTPA and RHC was 0 - 37 days (median 2 days)
  - All patient data were collected from Tohoku University Hospital (Japan)

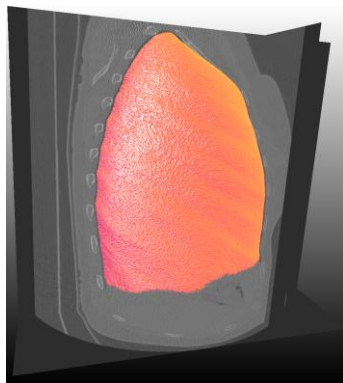
# Contents

- Introduction to CTEPH
- Study population treated with BPA
- **Methods of quantification**
- Results & Discussion

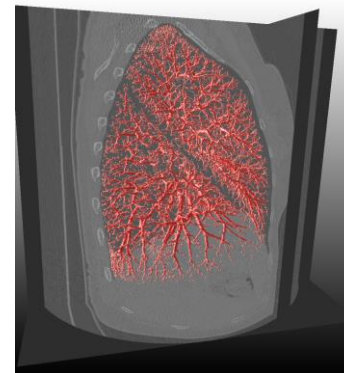
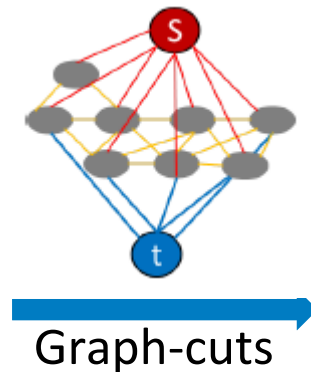


## ■ Methods

- Lung segmentation & lung vessel extraction
  - Atlas-based lung segmentation & graph-cuts based vessel extraction



Total lung



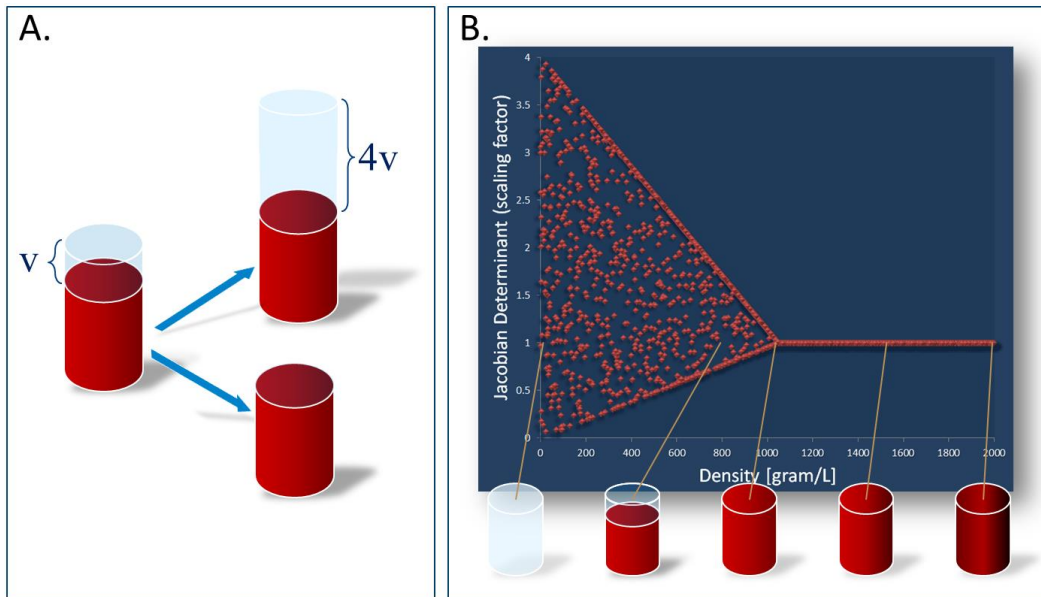
Vessel tree

- Automatic comparison of CTPAs of pre- and post-treatment
  - Pairwise image registration with volume correction
- Quantification of changes in perfusion using densitometry



# Methods

- Comparative imaging in CTPAs of pre- and post-treatment
  - Image registration of post-BPA and pre-BPA scans using Elastix
  - Volume correction using two-component model:



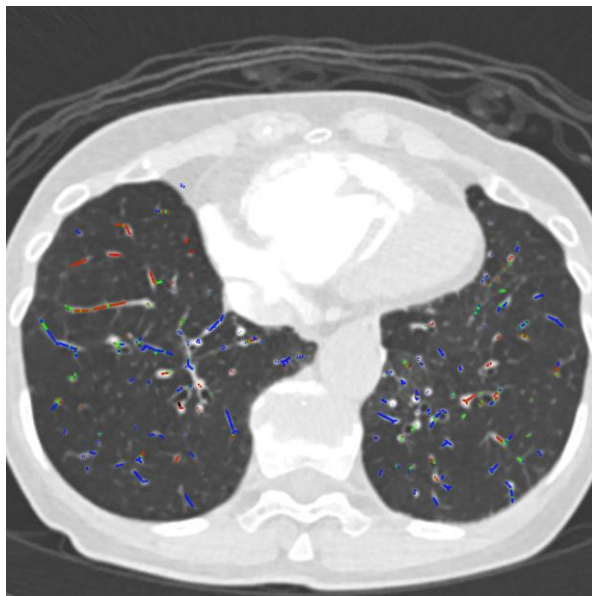
- $Progression(x) = I_1(T(x)) - I_0(x) \cdot \text{Max}\{\theta_{min}(I_0(x)), \text{Min}\{\theta_{max}(I_0(x)), \det J_T(x)\}\}^{-1}$

S Klein et al. IEEE transactions on medical imaging 29.1 (2010): 196-205.

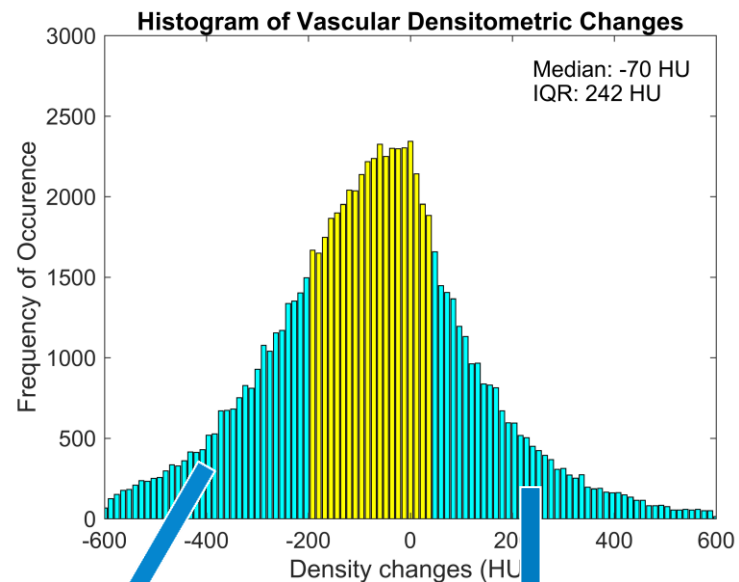
M Staring et al. Medical Physics. 2014;41(2).

# Methods

- Quantification of changes in perfusion
  - Vascular densitometry:  
median and IQR of vascular densitometric changes ( $\Delta$ VD)



(red: increase, blue: decrease)

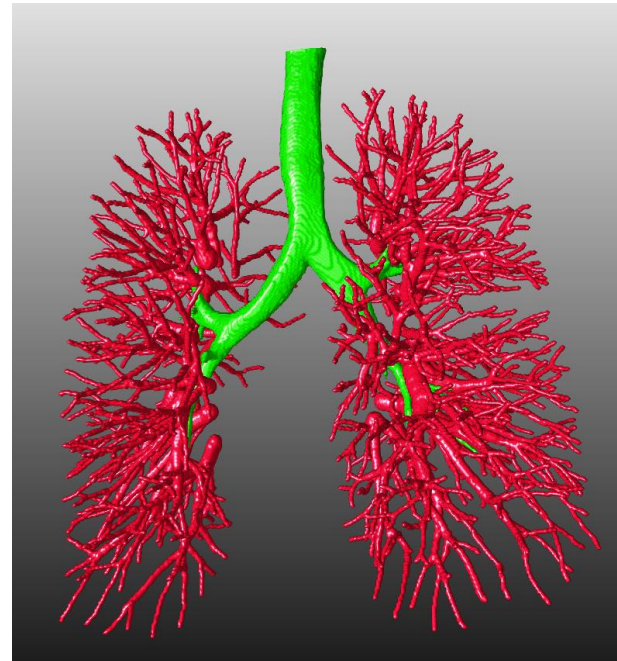


PV with Hypertension

PV with obstruction

# Contents

- Introduction to CTEPH
- Study population treated with BPA
- Methods of quantification
- **Results & Discussion**



# Results

## Changes in hemodynamic parameters and densitometry measurements

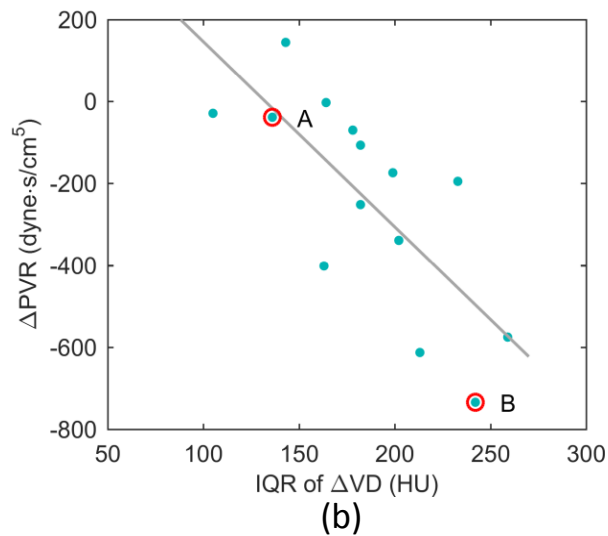
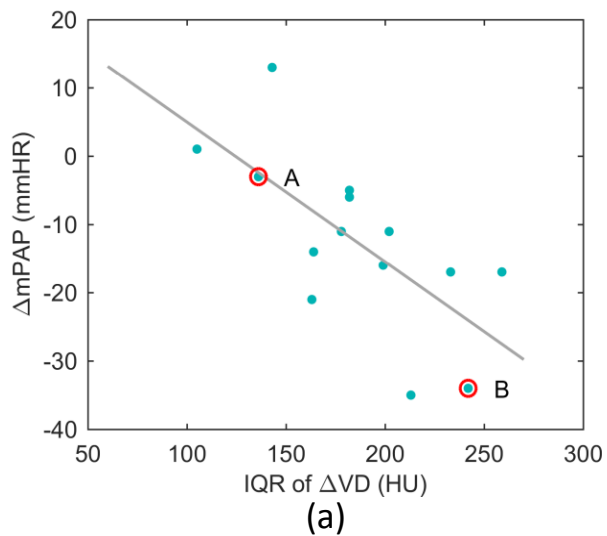
	Pre-BPA	Post-BPA	Change	p-value
RHC parameters				
sPAP (mmHg)	60.5 ± 33	36 ± 19	-23 ± 19	0.002
dPAP (mmHg)	20 ± 16	12.5 ± 11	-5 ± 11	0.006
mPAP (mmHg)	34.5 ± 17	21.5 ± 15	-12.5 ± 14	0.003
PVR (dyne·s/cm <sup>5</sup> )	496 ± 396	246 ± 185	-185 ± 409	0.004
Density measurements (HU)				
Median VD	-415 ± 101	-433 ± 114	-51.5 ± 20.8	<0.001
IQR of VD	437 ± 73	475 ± 67	182 ± 60	<0.001

Changes in RHC parameters and density measurements between pre- and post-BPA were tested using paired t-tests or Wilcoxon signed-rank tests, as appropriate.

# Results

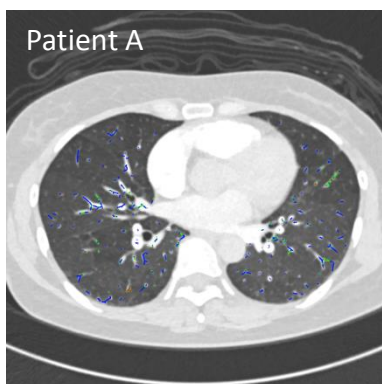
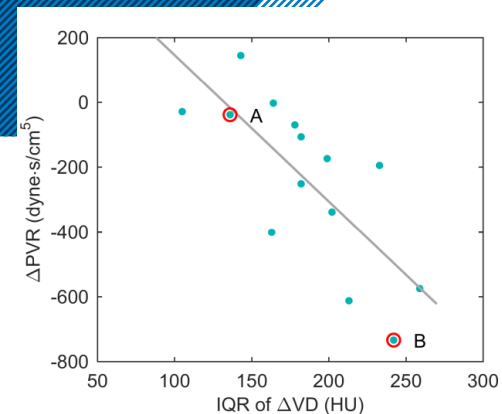
Spearman's correlation (R, p-value) between RHC changes and density changes

	$\Delta sPAP$	$\Delta dPAP$	$\Delta mPAP$	$\Delta PVR$
Median of $\Delta VD$	(0.53, 0.054)	(0.18, 0.536)	(0.46, 0.095)	(0.28, 0.325)
IQR of $\Delta VD$	(-0.58, 0.031)	(-0.71, 0.005)	(-0.71, 0.005)	(-0.77, 0.001)

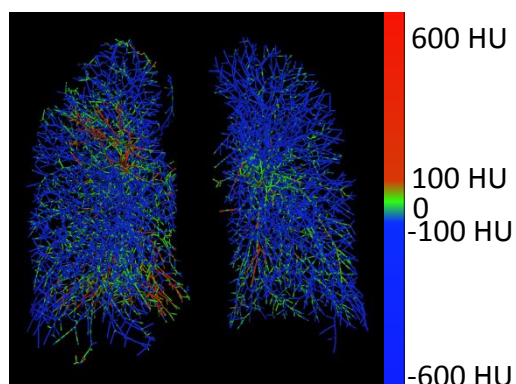


Correlation between  $\Delta mPAP$ ,  $\Delta PVR$  and IQR of  $\Delta VD$

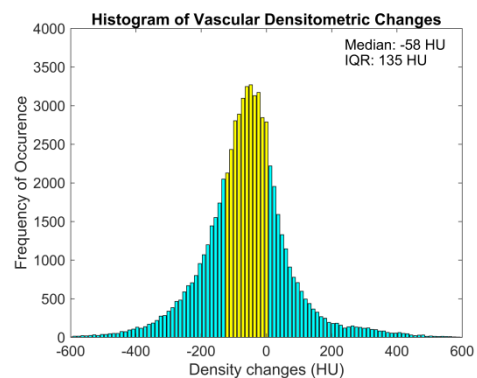
# Results



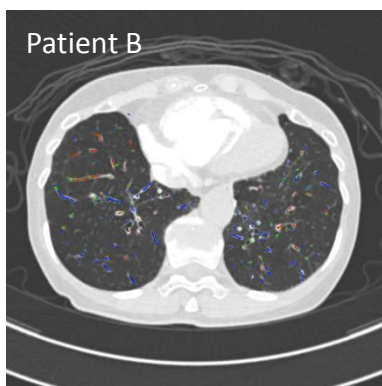
(a)



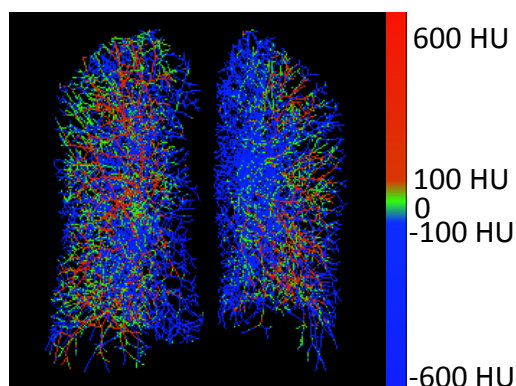
(b)



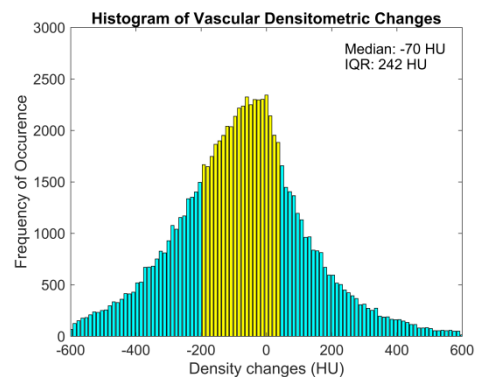
(c)



(d)



(e)



(f)

Vascular densitometric changes quantification of 2 patients.

## ■ Limitations

- The sample size of studied group is small
- Artery/vein were not separated

## ■ Conclusions:

- Hemodynamics were significantly improved after BPA, in the studied patient group
- Vascular densitometry can provide insight into local perfusion changes
- IQR of  $\Delta$ VD is correlated with hemodynamic changes and may be used as a non-invasive measurement for assessing BPA treatment effects

# Thank you!

- Acknowledgements:

*Leiden University Medical Center*

- Berend Stoel
- Marius Staring
- Jan Stolk
- Denis Shamonin
- Ningning Xu
- Boudewijn Lelieveldt

*Tohoku University Hospital*

- Hideki Ota
- Koichiro Sugimura
- Kei Takase
- Wenyu Sun

*CSC scholarship* No.201406120046.

