

BT TEKNOLOJİSİNDE YENİLİKLER VE DOZ AZALTMA TEKNİKLERİ

DR. GÖKÇE KAAN ATAÇ

SUNUM PLANI

- DOZ ve BT' DE DOZ KAVRAMI
- BT' NİN BÖLÜMLERİ
- YENİLİKLER
- DOZ HESAPLAMA
- DOZ DÜŞÜRME

FAYDA ZARAR

- Her radyoloji alıřanının sorumluluęu,
 - Faydaları ve riskleri anlamak,
 - Faydayı en ykseęe ıkarmak
 - Zararı en aza indirmek
- BT'nin akılcı kullanımında iki esas konu;
 - Doęru hasta seęimi, (klinikisyen, radyolog, rehberler)
 - Tanısal grnt kalitesini bozmayan en dřk dozu uygulama.

RADYASYON DOZU

X IŞINI

Organ-doku
dozu (Gy)

Belirli dokuda absorbe edilen

doku ağırlık
faktörü

Doz
eşdeğeri
(Sievert)

Organ-dokuda

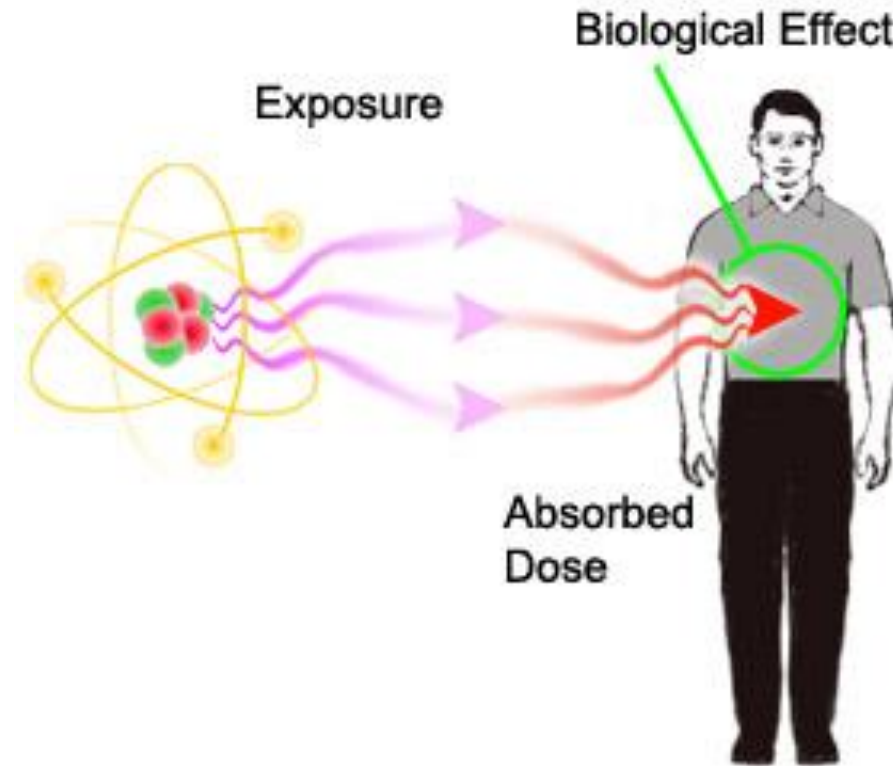
toplamı

Etkin doz
(Sievert)

Tüm organ-
doku toplamı

GONADLAR 0.20 → 0.08
MEME AKC 0.05 → 0.12
ICRP 2007

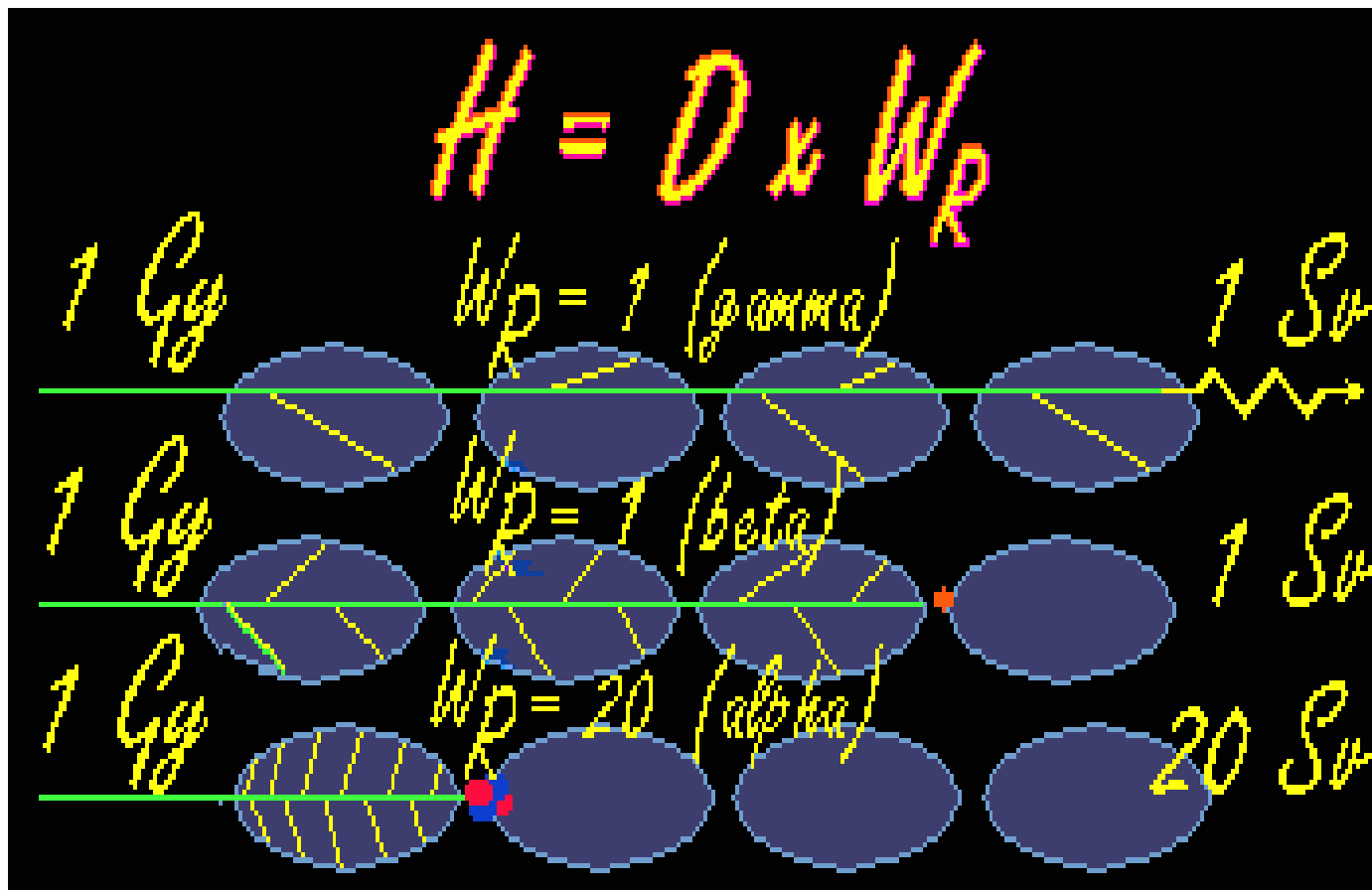
ABSORBE EDİLEN DOZ



1 Gray: 1 joule / kilogram

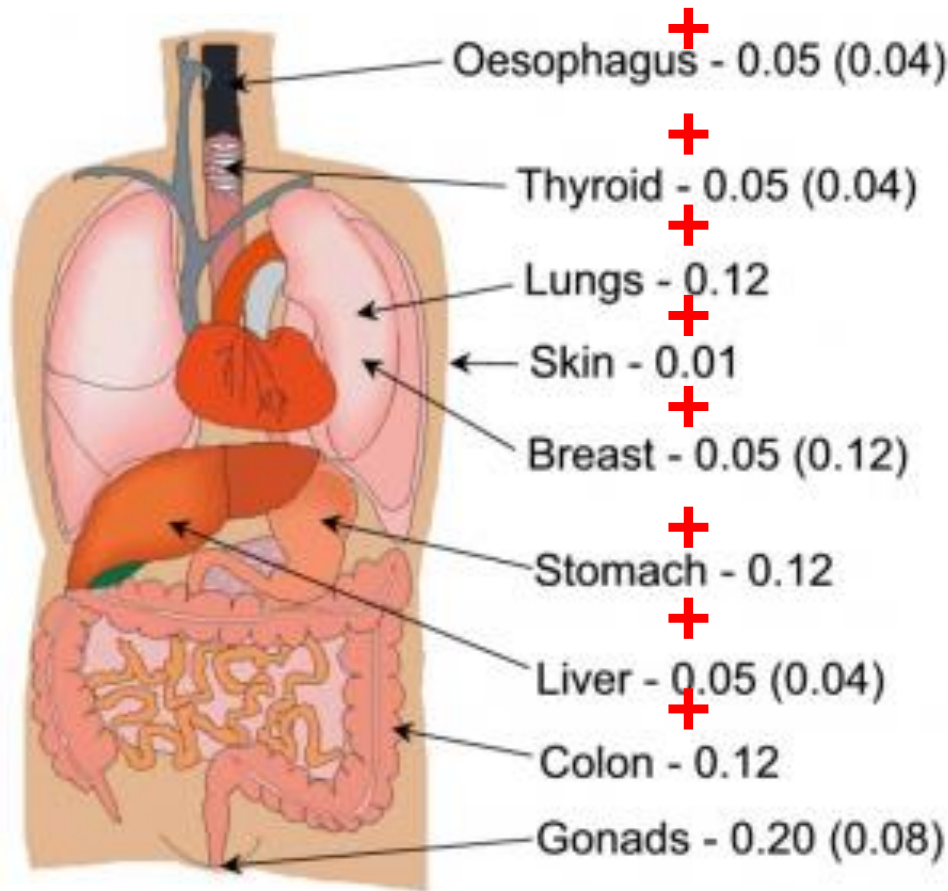
1 Gray: 100 rad

EKİVALAN DOZ



EFFEKTİF DOZ

doku ağırlık faktörleri



= 1

Efektif doz (ED)=

Σ

absorbe edilen
doz

x

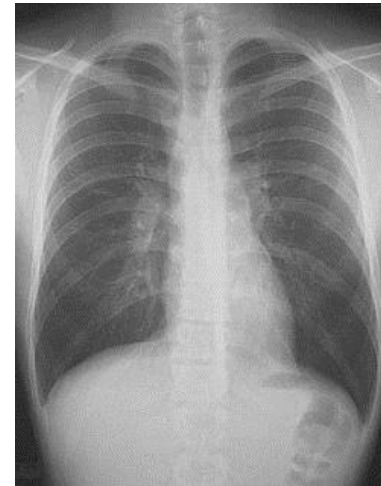
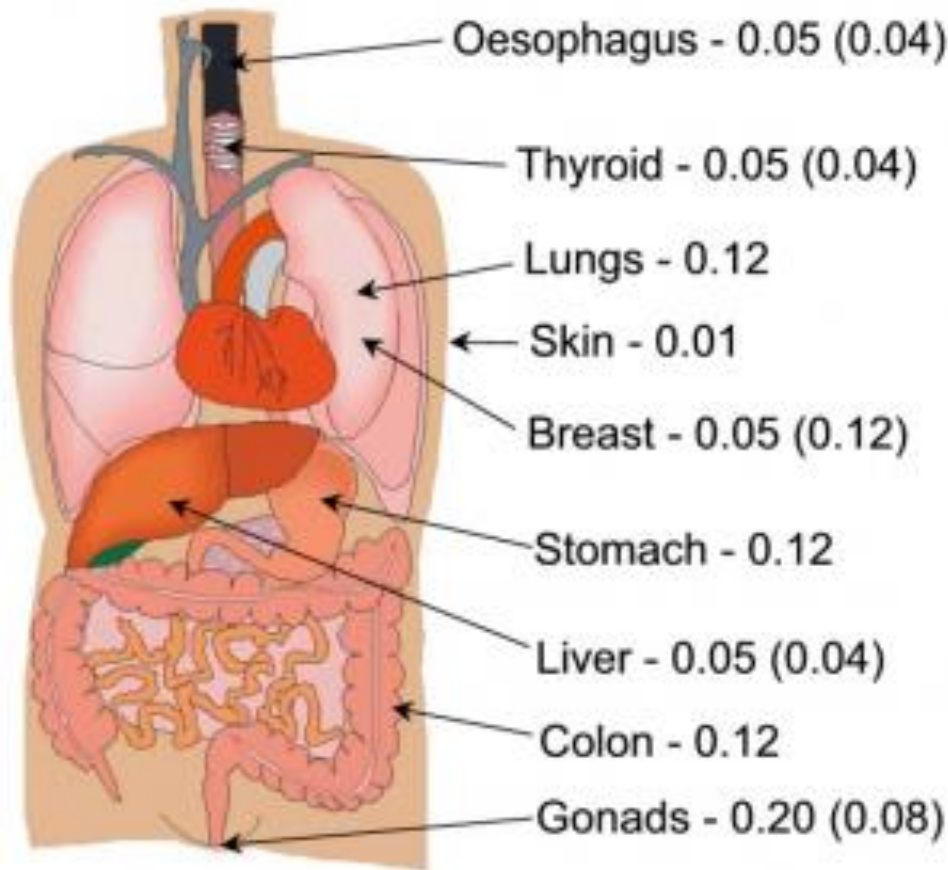
doz ağırlık
faktörleri

EFFEKTİF DOZ

Ekivalan doz
mSv

Absorbe edilen

doku ağırlık faktörleri



10 mGy

Ö → $0.04 \times 10 = 0.4$

T → $0.04 \times 10 = 0.4$

L → $0.12 \times 10 = 1.2$

S → $0.01 \times 10 = 0.1$

B → $0.12 \times 10 = 1.2$

$\Sigma 3.3 \text{ mSv}$

10 mGy

S → $0.12 \times 10 = 1.2$

L → $0.05 \times 10 = 0.5$

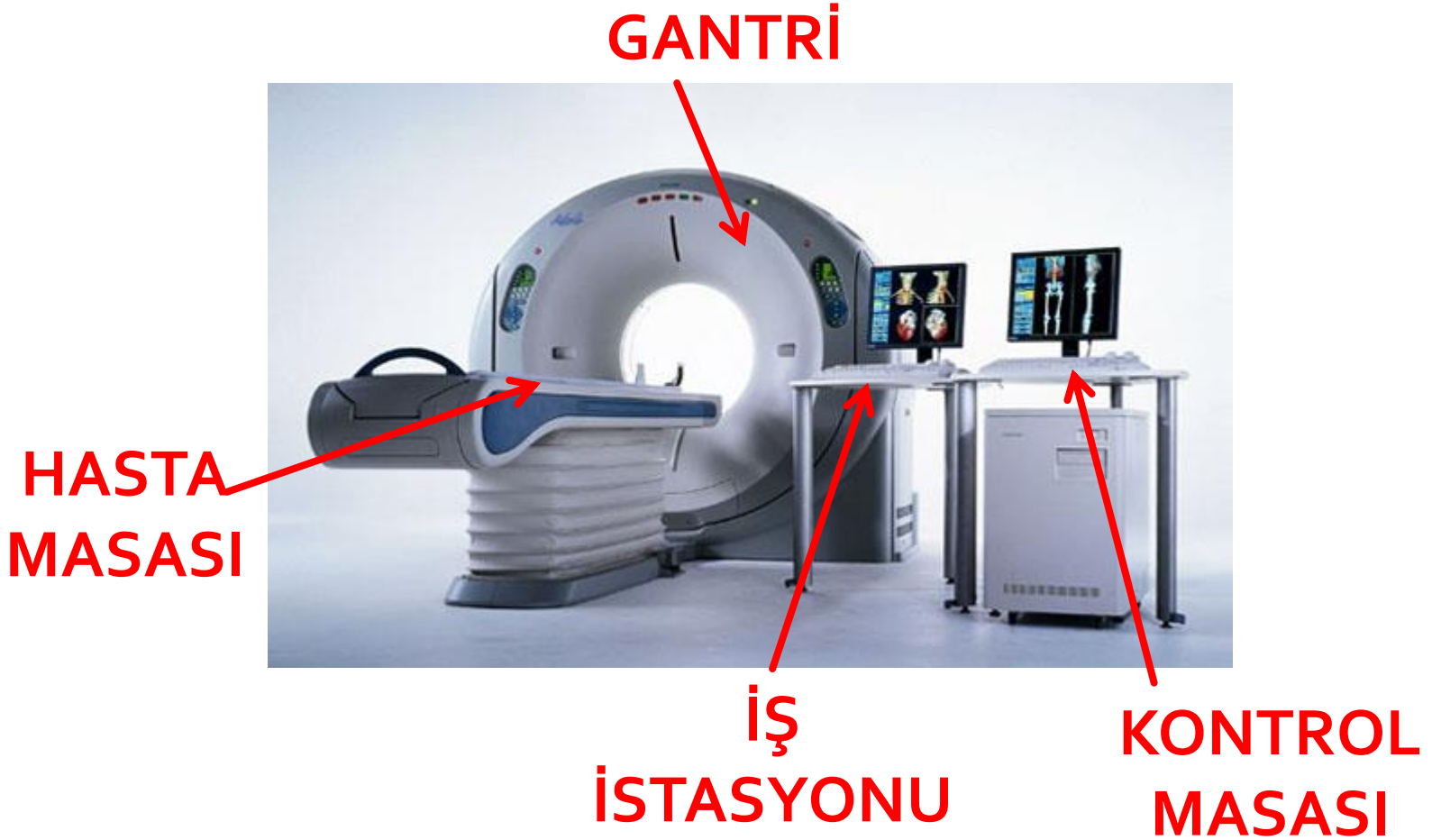
C → $0.12 \times 10 = 1.2$

G → $0.20 \times 10 = 2$

$\Sigma 4.9 \text{ mSv}$

BT BÖLÜMLERİ

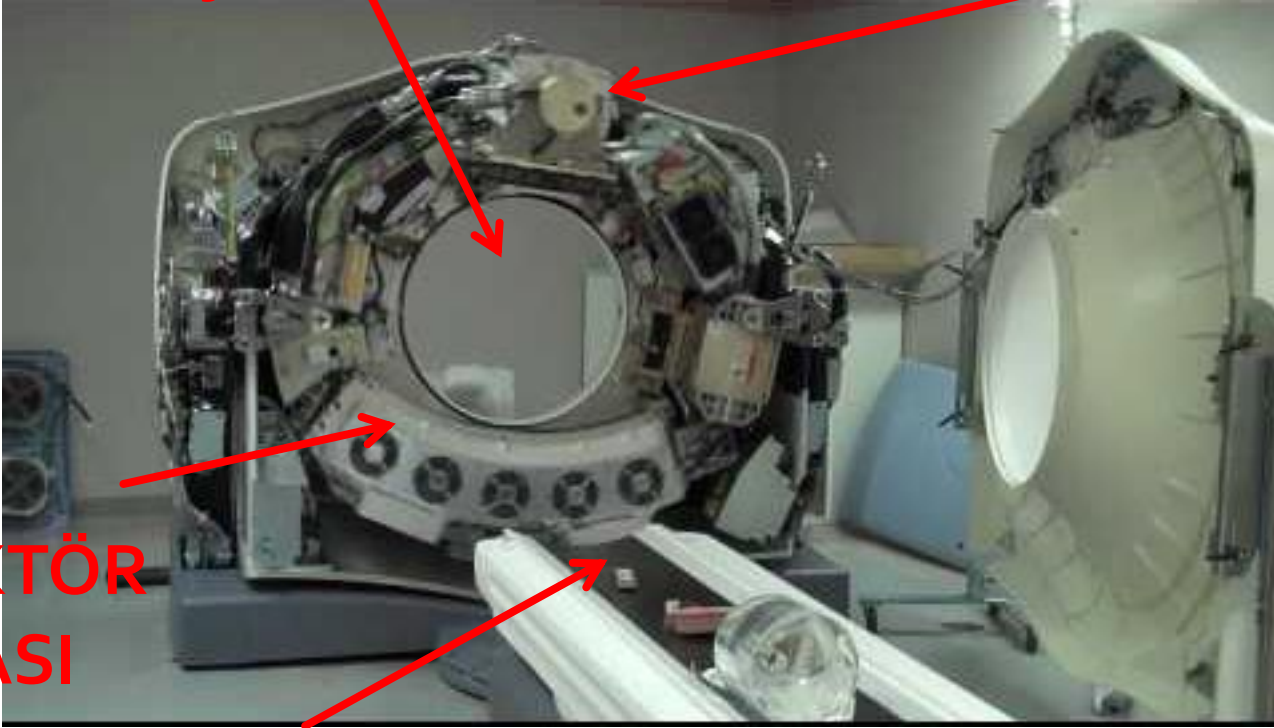
BT NİN BÖLÜMLERİ



BT NİN BÖLÜMLERİ

GANTRİ
AÇIKLIĞI

X İŞİN
TÜPÜ



DETEKTÖR
SIRASI

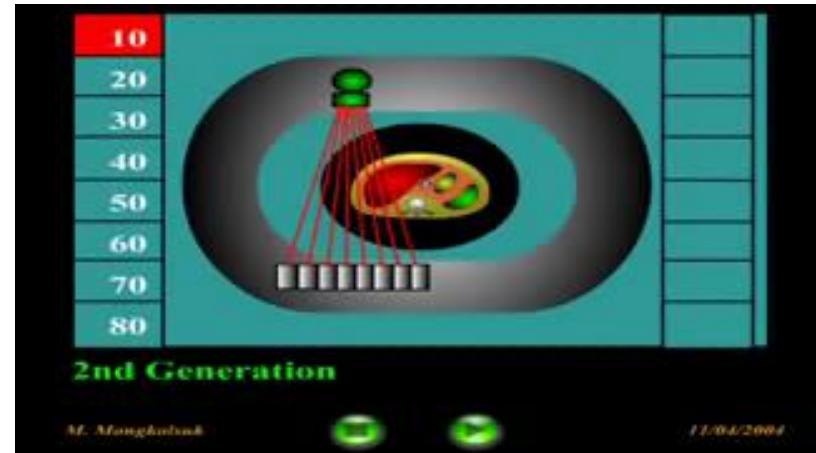
HASTA
MASASI

BT NİN GEÇMİŞİ

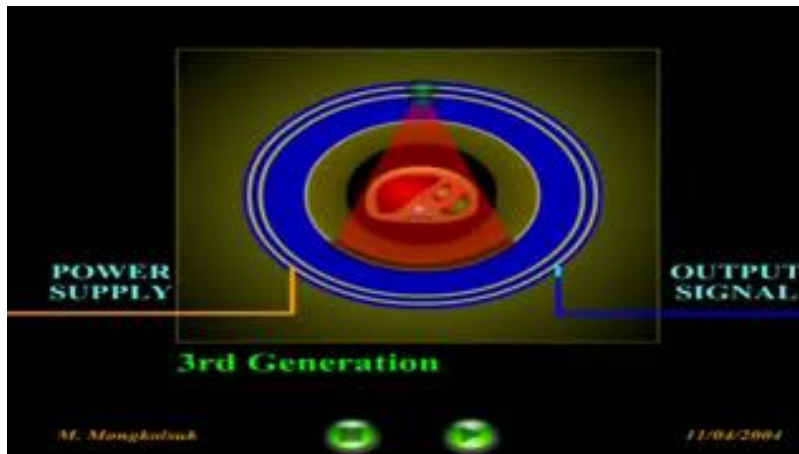
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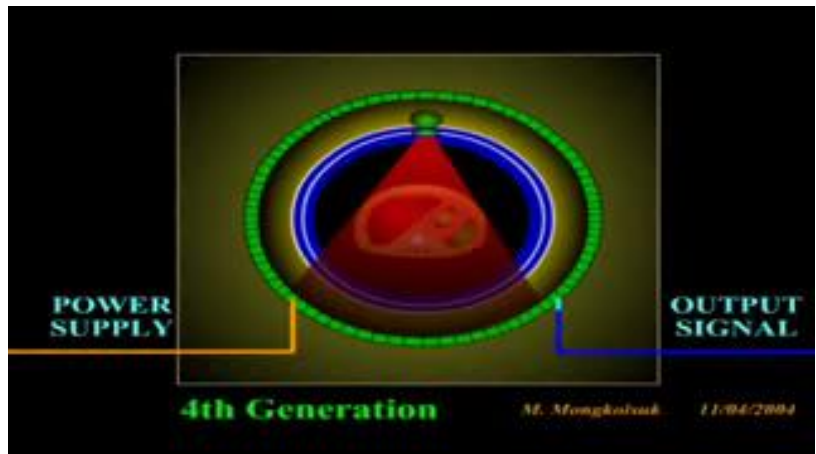
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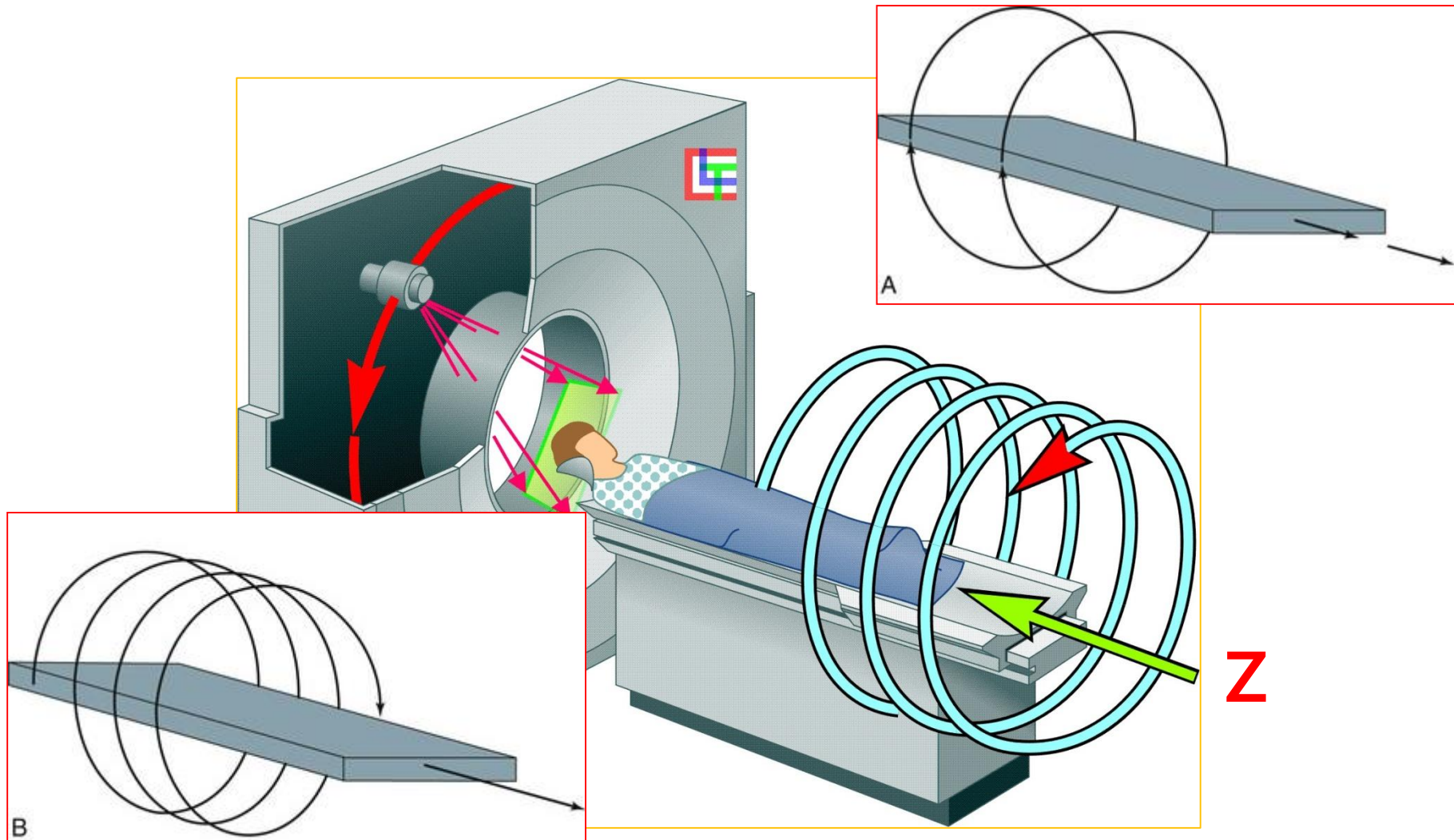
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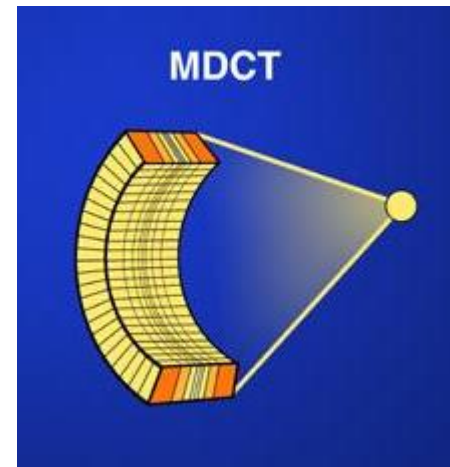
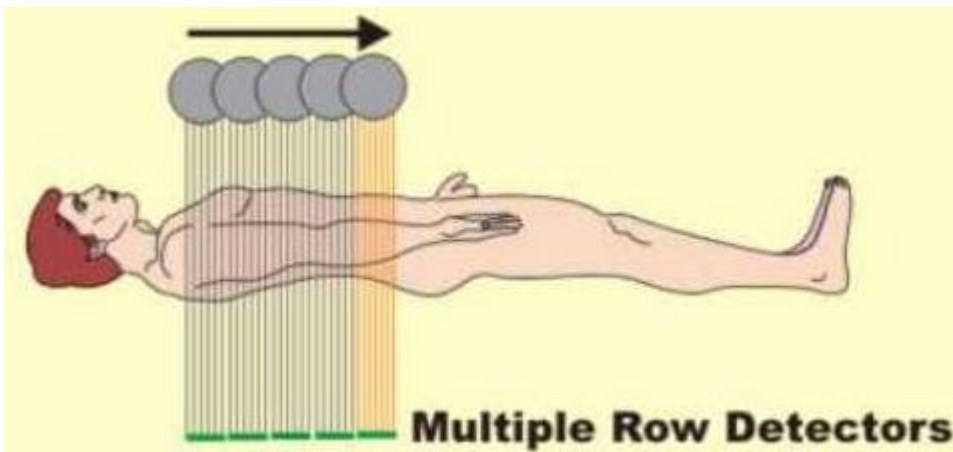
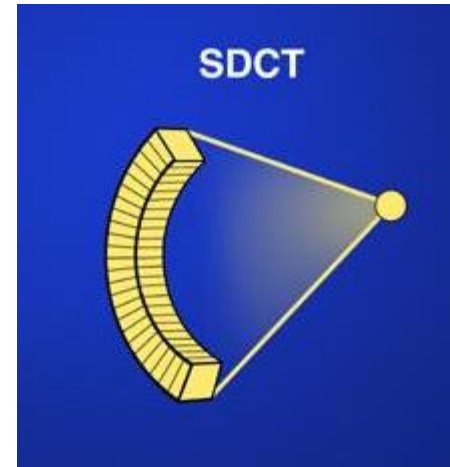
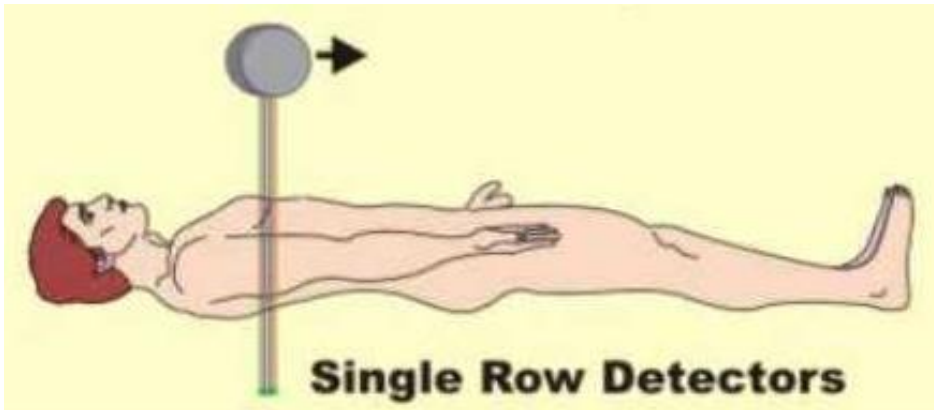
4.



SPIRAL BT

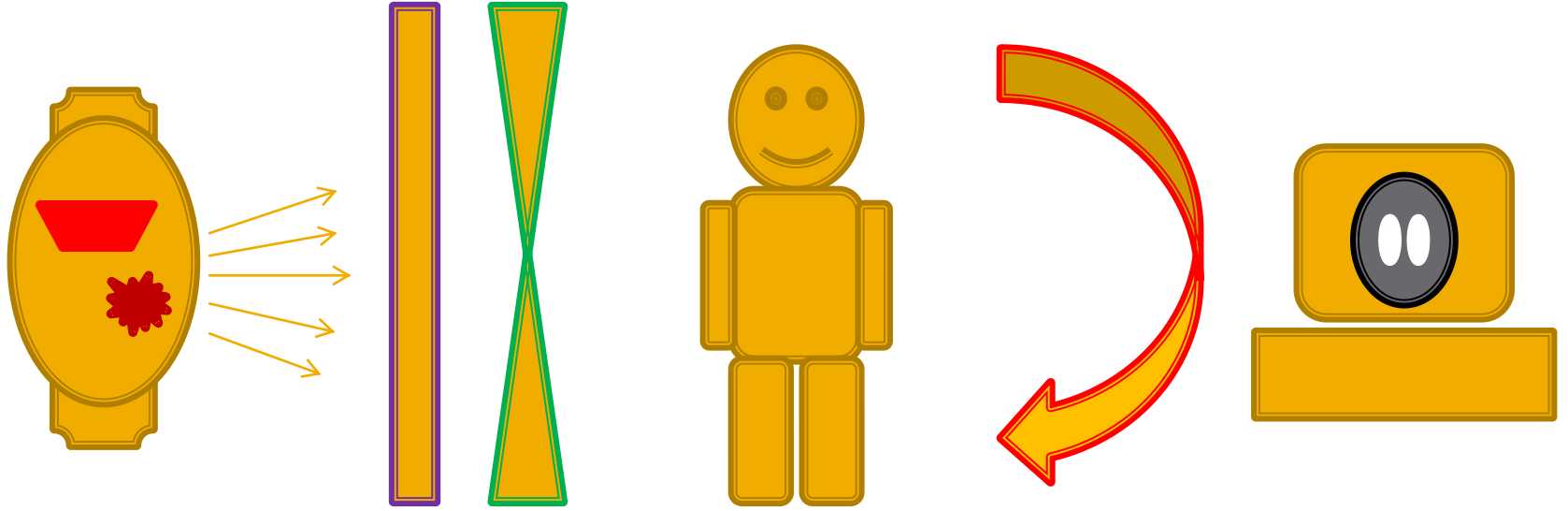


ÇOK DETEKTÖRLÜ BT - MDCT



YENİLİKLER

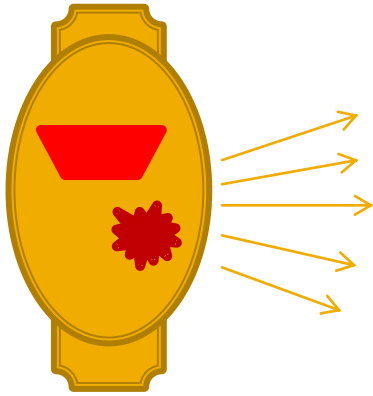
BT GÖRÜNTÜLEME ZİNCİRİ



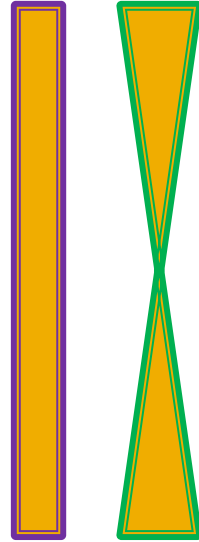
BT GÖRÜNTÜLEME ZİNCİRİ

•Xışınınu oluşumu

•kVp, mA, sn

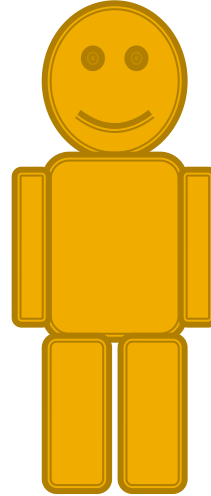


•Işın demeti



•Atenüasyon

•Hasta dozu



•Detektör

•Kolimasyon

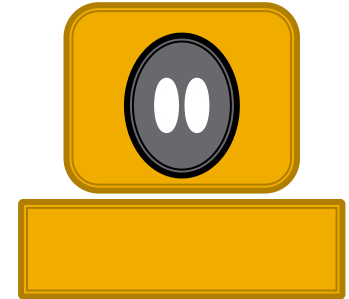
•Pitch



•FBP

•İteratif rekon

•MRP,MIP,SR,VR



TÜP

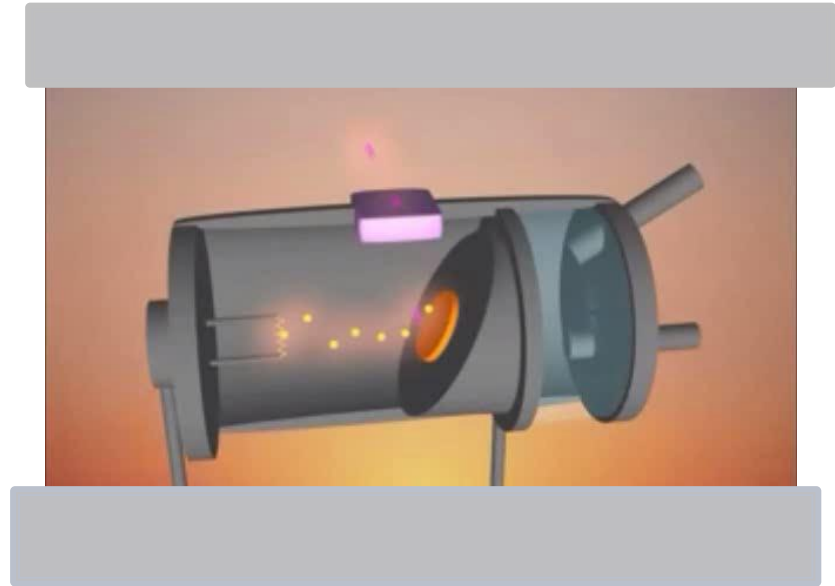
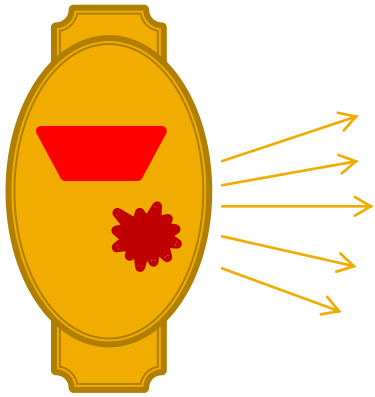
FİLTRE

OBJE

DETEKTÖR

REKONSTK

STRATON

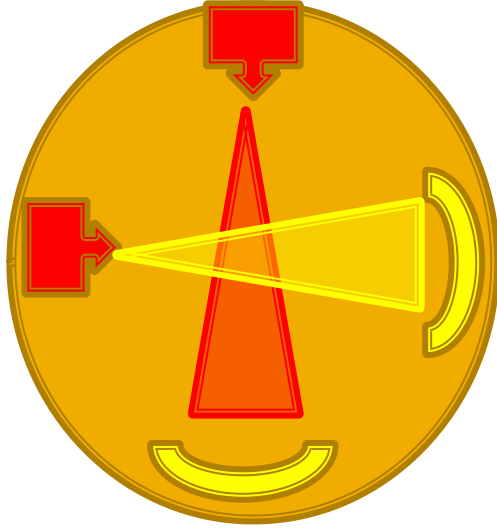


STRATON

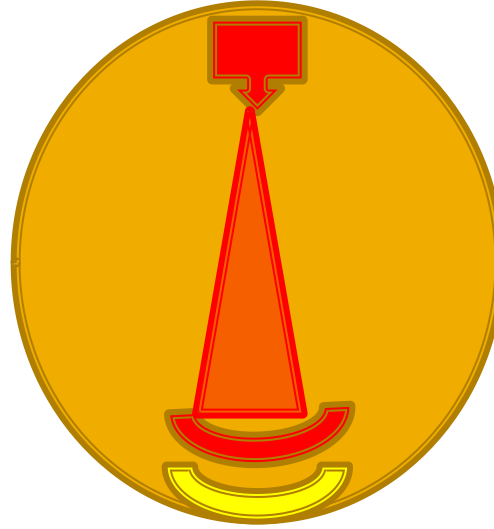


DUAL - ÇİFT ENERJİ

ÇİFT TÜP



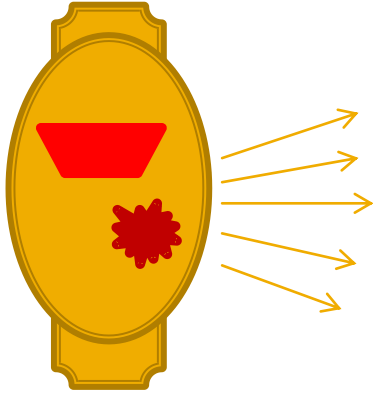
ÇİFT DETEKTÖR



DEĞİŞKEN IŞIN



DUAL - ÇİFT ENERJİ



- Değişken keV görüntü oluşturma,
- Materyal karakterizasyonu
- Doz etkinliğinde artış

TÜP

FLTR

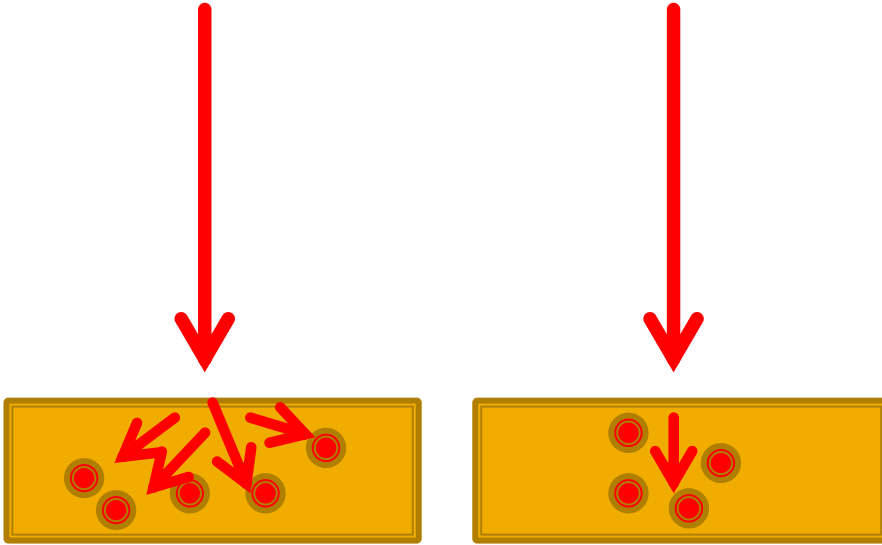
OBJE

DETEKTÖR

REKONSTK

FOTON TOPLAMALI

- Her fotondaki enerjinin ölçülmesi,
- Daha az elektronik noise,
- Yüksek SNR,
- Artmış doz etkinliği (%32),
- Multienerji görüntüleme,
- Yüksek çözünürlük



DOZ HESAPLAMA

DOKU REAKSİYONU



Report of the H-39
Task Force on CT Brain
Perfusion Exposure
Survey



ÇOCUK NEDEN FARKLI



- Kitle daha küçük,
- Biyolojik etkiler daha ciddi (kanser 2,5-10 kat)
- Uzun yaşam beklentisi,
- Daha az yağ dokusu,
- Kooperasyon daha az,
- US, MRG etkin alternatif
- Değişik patolojiler çok

DOZU ETKİLEYEN FAKTÖRLER

- Işın dağılımı ; 180 derece ve 360 derece dönüş,
- Filtrasyon ; düşük enerjili ışınların uzaklaştırılması,
- Detektör etkinliği; solid state , xenon gaz detektör
- Kesit kalınlığı ve aralığı ; kolimasyon
- Pitch
- Tarama alanı çapı; çocuk büyükten çok doz alır
- BT tekniği : mAs, kVp
- Hasta çapı ve kalınlığı ; iri hasta ve zayıf hasta
- Tekrar taramalar
- Topogram (scanogram, scout view)

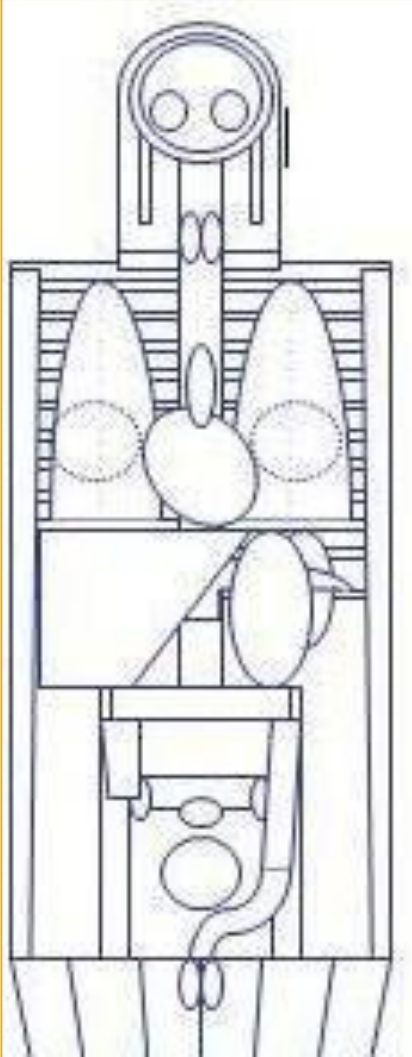
EFFEKTİF DOZ

BÖLGE	0 YAŞ	1 YAŞ	5 YAŞ	10 YAŞ	ERİŞKİN
KAFA.BOYUN	0.013	0.0085	0.0057	0.0042	0.0031
KAFA	0.0011	0.0067	0.0040	0.0032	0.0021
BOYUN	0.017	0.012	0.011	0.0079	0.0059
TORAKS	0.039	0.026	0.018	0.013	0.014
BATIN	0.049	0.030	0.020	0.015	0.015
TÜM GÖVDE	0.044	0.028	0.019	0.014	0.015

k (mSv mGy⁻¹ cm⁻¹)

$$ED \text{ (mSv)} = DLP \times k$$

ORTALAMA DOZ-BT



**İNCELENEN
BÖLGE**

**EFFEKTİF DOZ
(mSv)**

Kranyum

2

Servikal -Boyun

3

Akciğer - Toraks

7

Üç fazlı karaciğer

15

**Kalsiyum
skorlama**

3

Koroner anjio BT

15

Tüm abdomen

16

ORTALAMA DOZ-GRAFI

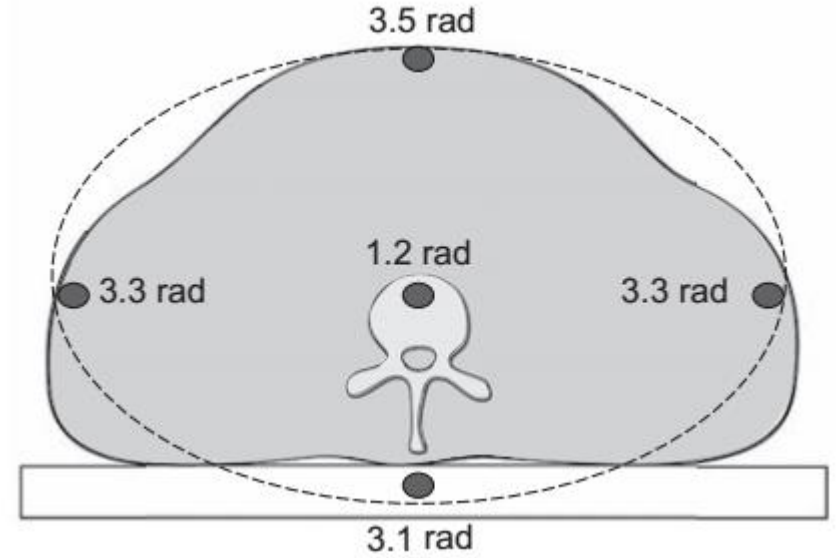
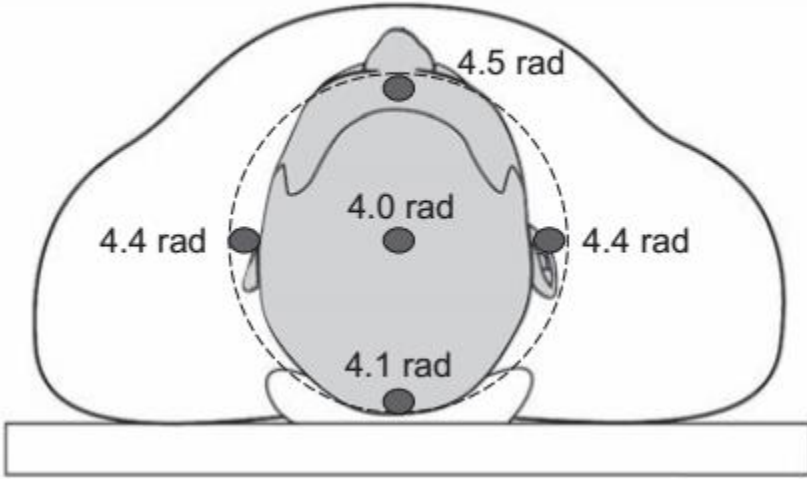


RADYOGRAFI	EFFEKTİF DOZ (mSv)
Kranyum	0,1
Akciğer	0,1
Lomber vert.	1,5
Abdomen	0,7
İVP	3,0
Mide Barsak grafisi	6,0
Kolon Grafisi	8,0

ORTALAMA DOZ

DOZ (mSv)	ETKİLER
0,05 / yıl	Nükleer Elektrik Santrali çevresinde izin verilen max
2,5 / yıl	Ortalama ortam (background), 0,7 mSv Rodon'dan
3-5/ yıl	Uranyum maden işçileri , uçak personel i ortalaması
20 / yıl	Radyasyon çalışanına ortalama izin verilen max doz
50 / yıl	Radyasyon çalışanına yılda izin verilen max doz
100 / yıl	Kanser olasılığını gösteren en düşük düzey
1000 / yıl	Kısa süreli ekspozurda radyasyon hastalığı oluşabilir

DOZ DAĞILIMI



**TARANAN VÜCUT BÖLGESİ BÜYÜDÜKÇE, DIŞTAN İÇE
RADYASYON ALANI ŞİDDETİ AZALIR**

CTDI 100

$\frac{1}{3} \text{CTDI}_m + \frac{2}{3} \text{CTDI}_{\text{çevre}}$

=

CTDI weighted (ağırlıklı) / PITCH

=

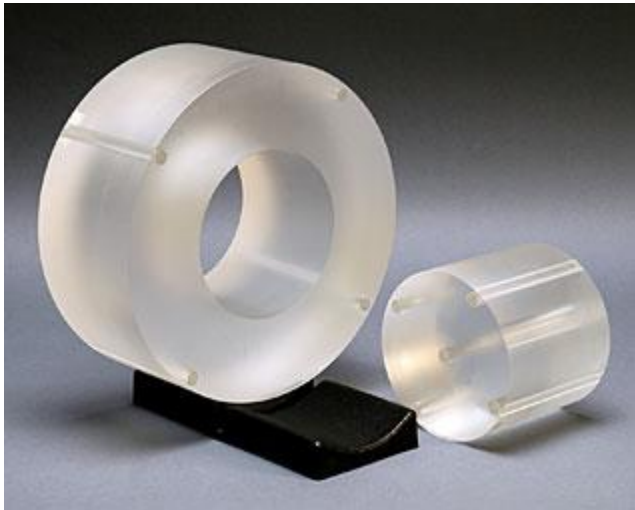
CTDI vol x tarama UZUNLUĞU

=

DLP (Dose Length Product) x k

=

EFFEKTİF DOZ



BT DOZ BİRİMLERİ

$$\begin{array}{|c|c|c|c|} \hline \text{1/3 CTDI CENTER} & + & \text{2/3 CTDI PERİFER} & = & \text{CTDI W} \\ \hline \end{array}$$

$$\begin{array}{|c|c|c|c|} \hline \text{CTDI W} & \div & \text{PITCH} & = & \text{CTDI VOLUME} \\ \hline \end{array}$$

$$\begin{array}{|c|c|c|c|} \hline \text{CTDI VOLUME} & \times & \text{TARAMA UZUNLUĐU} & = & \text{DLP} \\ \hline \end{array}$$

$$\begin{array}{|c|c|c|c|} \hline \text{DLP} & \times & \text{KATSAYI} & = & \text{EFFEKTİF DOZ} \\ \hline \end{array}$$

+ TG 204 / TG 220

EFFEKTİF DOZ

BÖLGE	0 YAŞ	1 YAŞ	5 YAŞ	10 YAŞ	ERİŞKİN
KAFA. BOYUN	0.013	0.0085	0.0057	0.0042	0.0031
KAFA	0.0011	0.0067	0.0040	0.0032	0.0021
BOYUN	0.017	0.012	0.011	0.0079	0.0059
TORAKS	0.039	0.026	0.018	0.013	0.014
BATIN	0.049	0.030	0.020	0.015	0.015
TÜM GÖVDE	0.044	0.028	0.019	0.014	0.015

$$\text{EFFEKTİF DOZ (BT)} = \text{DLP} \times k$$

$$k \text{ (mSv mGy}^{-1} \text{ cm}^{-1} \text{)}$$

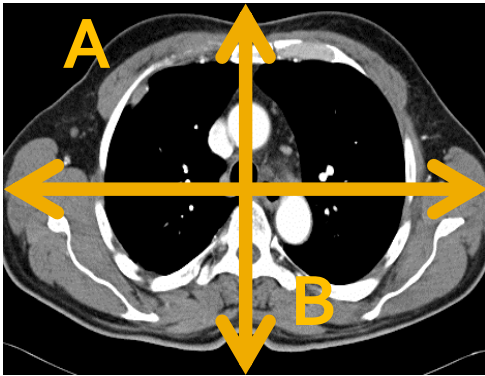
ÖRNEK

Table 1—Conversion factor k values for calculation of effective dose⁽¹⁴⁾.

Body region	k (mSv mGy ⁻¹ cm ⁻¹)				
	0 year-old	1-year-old	5-year-old	10-year-old	Adult
Head and neck	0.013	0.0085	0.0057	0.0042	0.0031
Head	0.011	0.0067	0.0040	0.0032	0.0021
Neck	0.017	0.012	0.011	0.0079	0.0059
Chest	0.039	0.026	0.018	0.013	0.014
Abdomen	0.049	0.030	0.020	0.015	0.015
Trunk	0.044	0.028	0.019	0.014	0.015

SIZE SPECIFIC DOSE ESTIMATE (SSDE)

TG 204



$$\text{ETKİN ÇAP} = \sqrt{A \times B}$$

TG 220

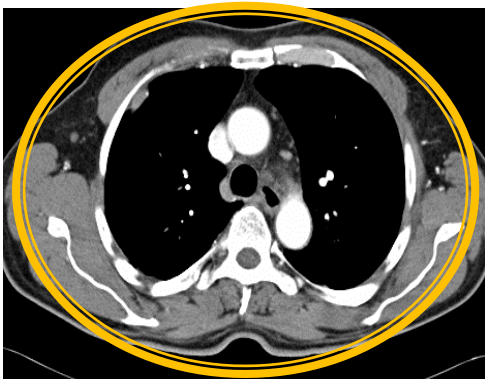


Table 1A

Lat+AP Dim (cm)	Effective Dia (cm)	Conversion Factor
16	7.7	2.79
18	8.7	2.69
20	9.7	2.59
22	10.7	2.50
24	11.7	2.41
26	12.7	2.32

Patient Age (years)	Effective Diameter (cm)
0.0	11.2
0.2	12.1
0.4	13.1
0.6	13.9
0.8	14.6
1.0	15.1
1.2	15.6

$$\text{SU EŞDEĞERİ ÇAP} = 2 \sqrt{\left[\frac{1}{1000} \overline{CT(x,y)}_{ROI} + 1 \right] \frac{A_{ROI}}{\pi}}$$

DOZ DÜŞÜRME

İNCELEME ÖNCESİNDE

- Radyologlar teknoloji ve protokolleri anlamlı öğrenmeli?
- Tekrar çekimleri önle



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QUALITY & SAFETY

Accreditation

Appropriateness Criteria®

Practice Parameters

Quality Measurement

NRDR Data Registries

Radiology Safety

ACR Appropriateness Criteria®

November 2015 ACR Appropriateness Criteria®

The ACR Appropriateness Criteria® (AC) are evidence-based guidelines to assist referring physicians and other providers in making the most appropriate imaging or treatment decision for a specific clinical condition. Employing these guidelines helps providers enhance quality of care and contribute to the most efficacious use of radiology. [Learn More](#)

- Tü
- gö

İNCELEME ÖNCESİNDE

- CTDI / DLP ışınlama parametre ve fantom boyutlarına bağlı önceden belirli,
 - Sınırları var
 - Hastada etkin dozu tahmininde
 - k faktöre bağlı
 - standart hasta için
 - Ağırlık faktörleri sınırlı



İNCELEME ÖNCESİNDE

- Her işlemde CTDI ve DLP yi incele

- Bazı kanunlar var

- Tipik değerleri bil

- AAPM

- Diagnostic

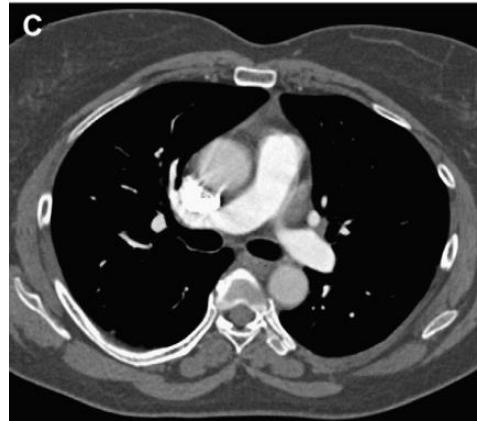
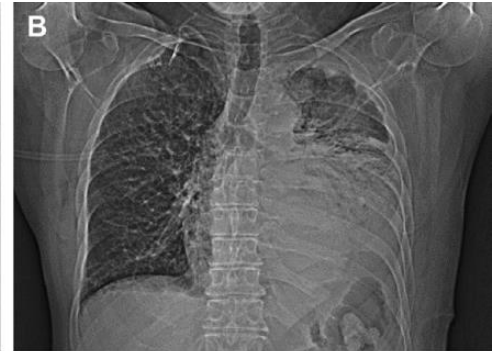
Reference Level

Table 1: Notification Values recommended by the AAPM Working Group on Standardization of CT Nomenclature and Protocols

CT Scan Region (of each individual scan in an examination)	CTDIvol Notification Value (mGy)
Adult Head	80
Adult Torso	50
Pediatric Head	
<2 years old	50
2 – 5 years old	60
Pediatric Torso	
<10 years old (16-cm phantom) ^a	25
<10 years old (32-cm phantom) ^b	10
Brain Perfusion (examination that repeatedly scans the same anatomic level to measure the flow of contrast media through the anatomy)	600
Cardiac	
Retrospectively gated (spiral)	150
Prospectively gated (sequential)	50

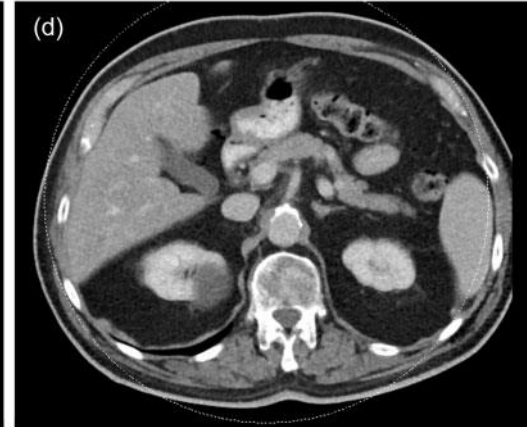
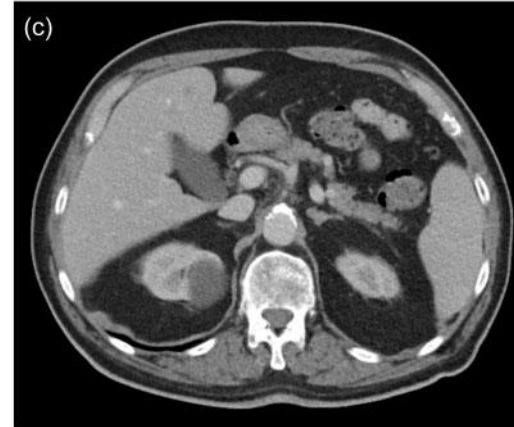
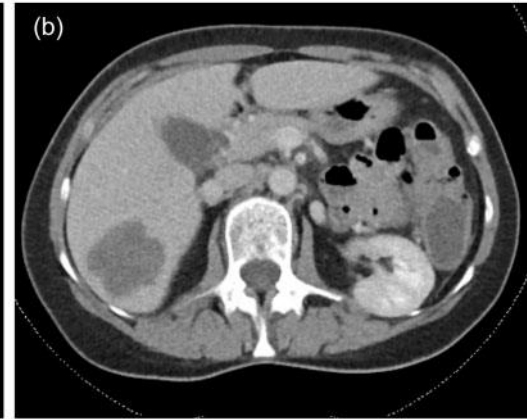
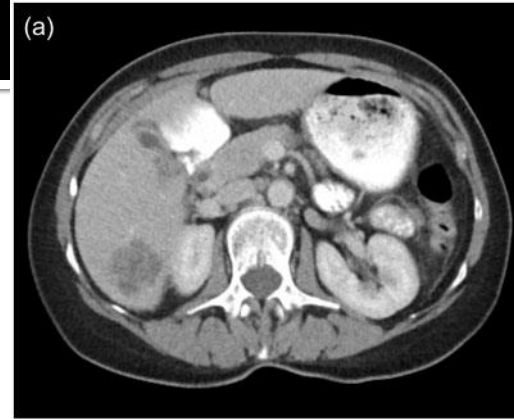
İNCELEME SIRASINDA

- Hasta boyutuna göre protokol yap uygula
 - Gürültü tüp akımının (mA) karekökü ile deęişir
- Doz düşürme araçlarını öğren
 - Doz modülasyonu (ATM)
 - Scanogram
 - EKG modülasyonu
 - Noise seçenekleri
- Faz sayısını azalt
- Split bolus



İNCELEME SIRASINDA

- Klinik endikasyon
 - aorta diseksiyon, PE, taş
- İlk kontrastsız fazı alma
- Yüksek test öncesi olasılık,
- Örtüşen tarama alanlarından sakın,
- Portal venöz faza dikkat
- Mas ı düşür geri plan ile kontrast yaş spn



İNCELEME SIRASINDA

Adult Routine Head CT Protocols Version 2.0 3/1/2016

ADULT HEAD – ROUTINE (AXIAL) (selected GE scanners)

[\(Back to INDEX\)](#)

SCOUT: Lateral, S150-I50. 120 kV, 10 mA PA Scout optional.

GE	LightSpeed Ultra (8)	BrightSpeed 16 Select	LightSpeed 16 BrightSpeed 16	LightSpeed Pro 16
Scan Type	AXIAL	AXIAL	AXIAL	AXIAL
Rotation Time (s)	2	2	2	2
Detector Configuration	4 x 2.5 (10mm, 2i)	4 x 2.5 (10mm, 2i)	16 x 0.625 (10mm, 2i)	16 x 0.625 (10mm, 2i)
Pitch	-	-	-	-
Table Feed/Interval (mm)	10	10	10	20
kV	120	120	120	120
mA	140	140	140	140
Auto-mA	no	No	no	no
SFOV	HEAD	HEAD	HEAD	HEAD
Breath-hold	--	--	--	--
Prep Delay	--	--	--	--
CTDI-vol (mGy)	58.2	62.8	57.7	62.2

Recon 1

Recon Start	Base of Skull	Base of Skull	Base of Skull	Base of Skull
Recon End	Vertex	Vertex	Vertex	Vertex
Plane	Axial	Axial	Axial	Axial
Algorithm	Std	Std	Std	Std

•Acil

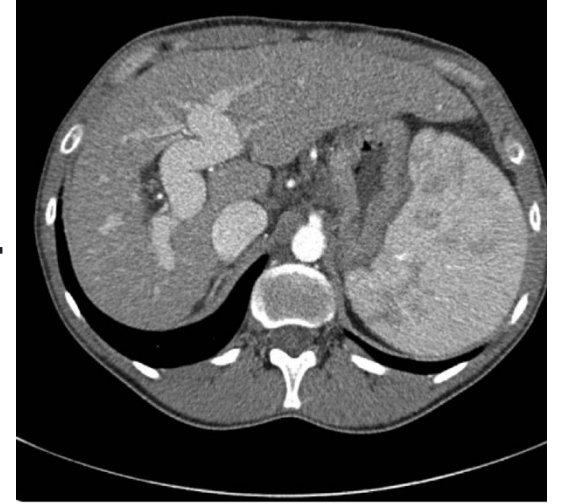
•Kilo

•Oto

•Has

İNCELEME SONRASI

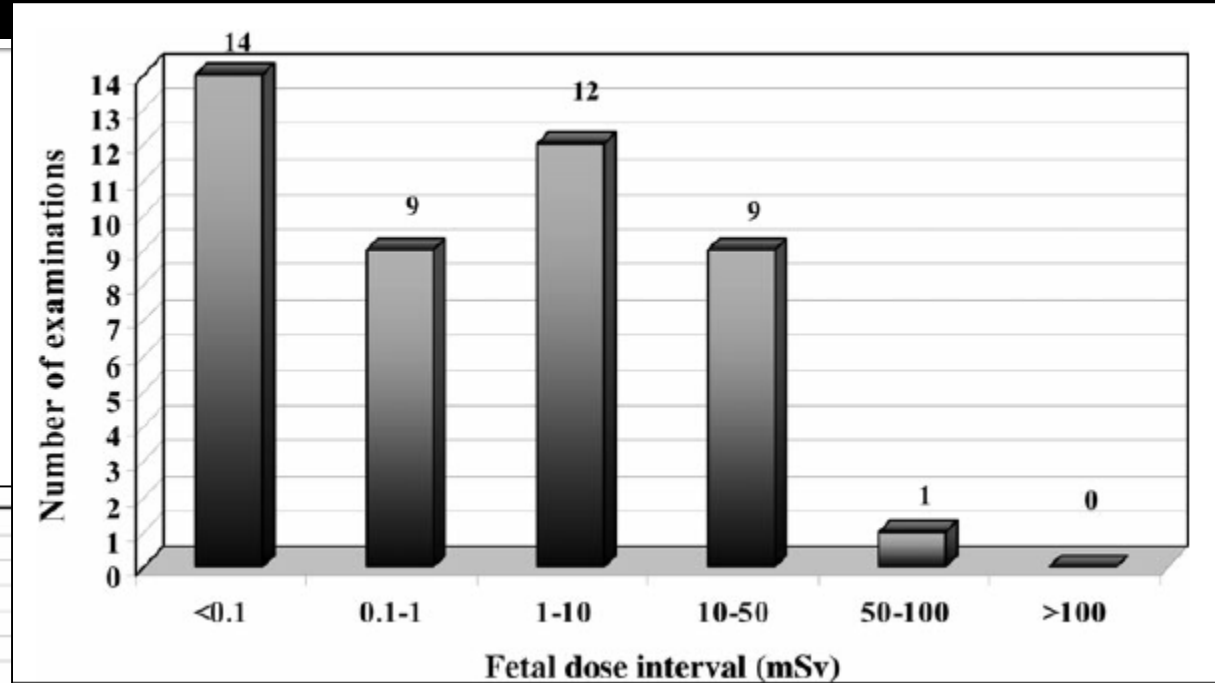
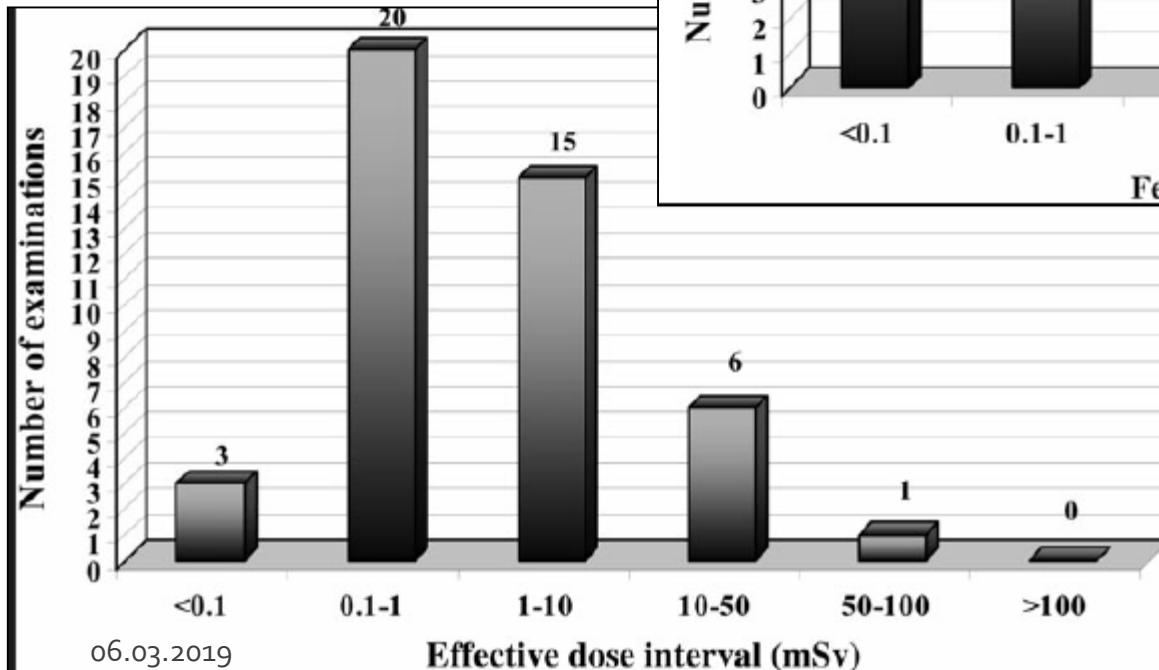
- Gürültü azaltıcı yöntemler
- Yumuşak kernel kullan, (!) ayrıntı kaybolabilir
- Daha kalın rekon kesitleri $1 < 4$ mm, x2 noise
- İteratif rekon
- Hasta doz kayıt takibi



(a)



GEBELİKTE KAZA İLE IŞINLAMA



TEŞEKKÜR EDERİM ...