



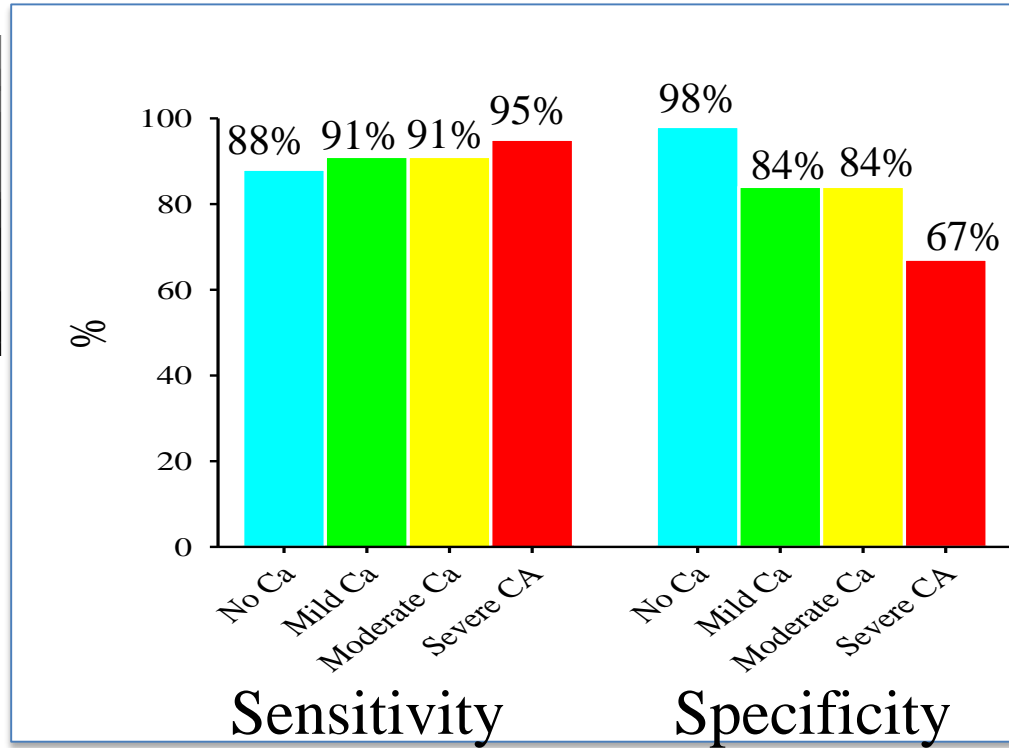
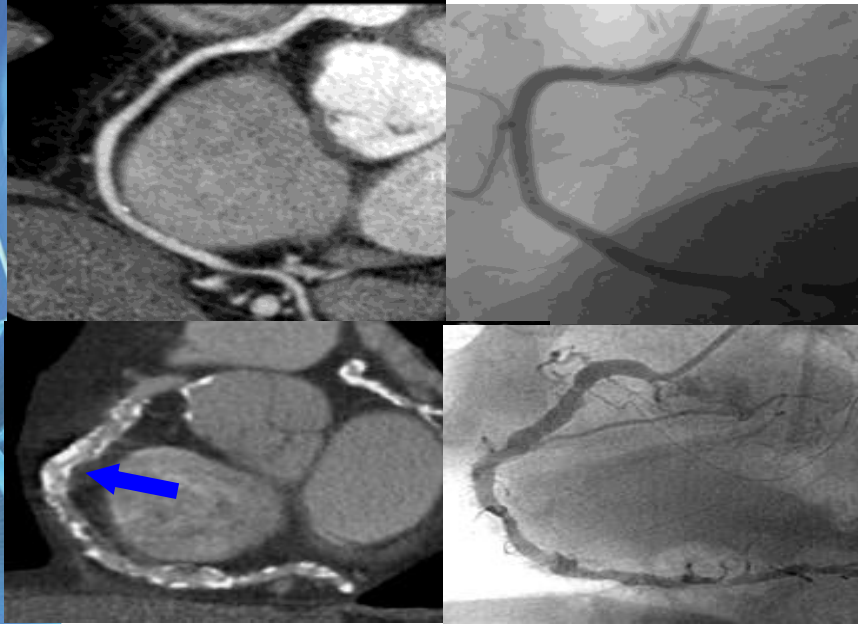
CT PERFUSION

Pr Gilles Barone-Rochette
Interventional cardiology and cardiac imaging
Pôle Thorax et vaisseaux- CHU de Grenoble
Inserm 1039

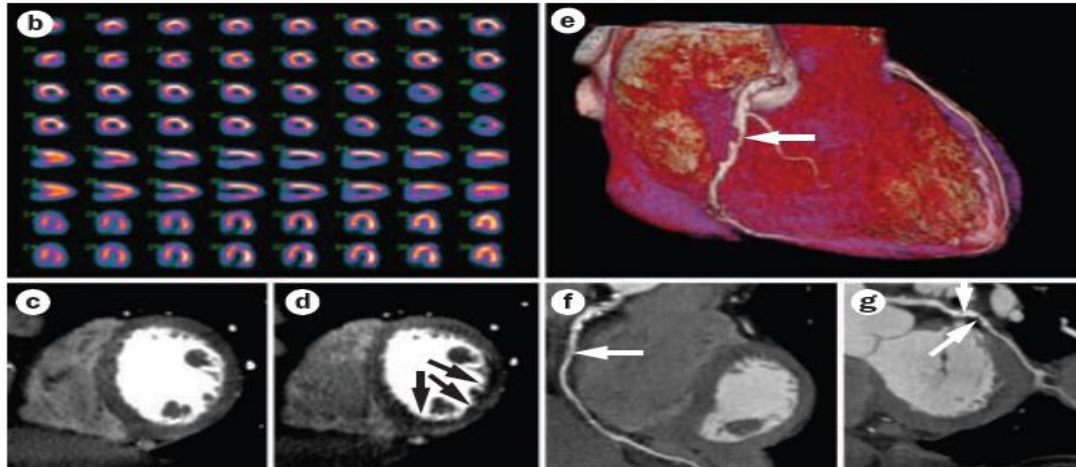
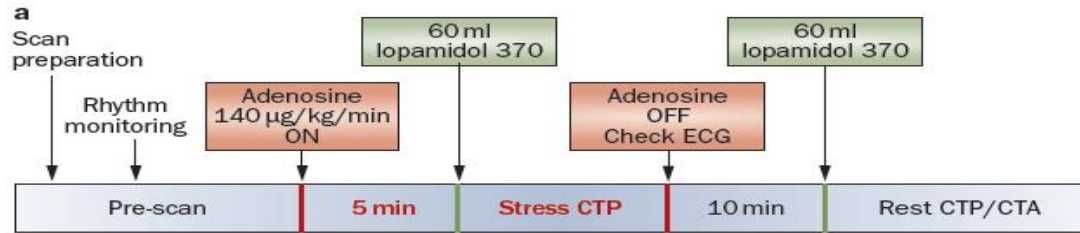
2^{eme} Congrès : Journées Francophones de Médecine Nucléaire
Samedi 21 mai 2016
Grenoble



MDCT Limitations Calcium

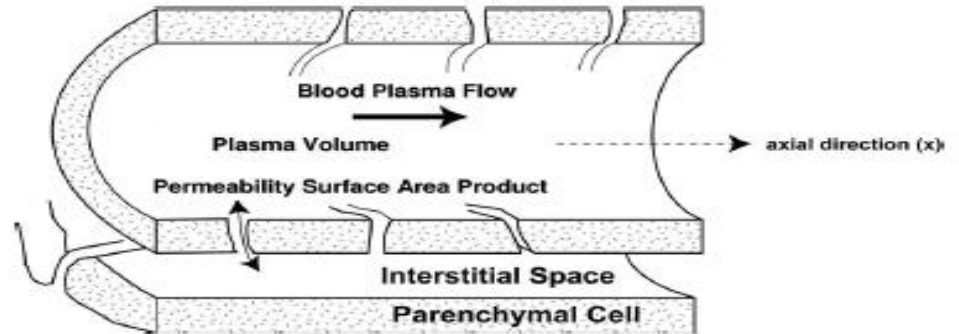
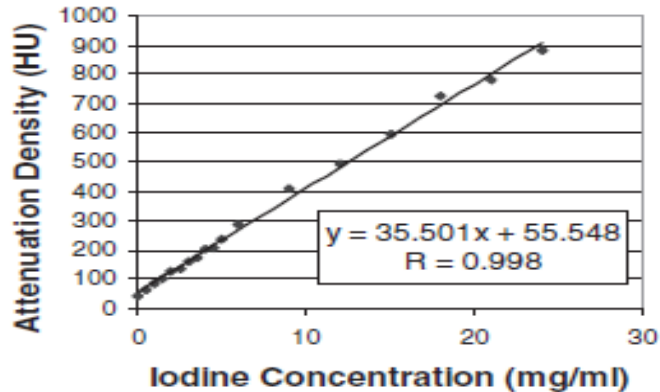
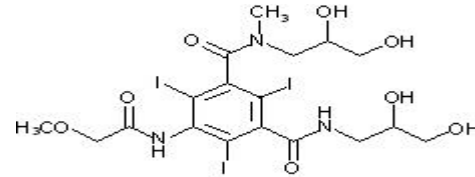


Stress CT perfusion Principles

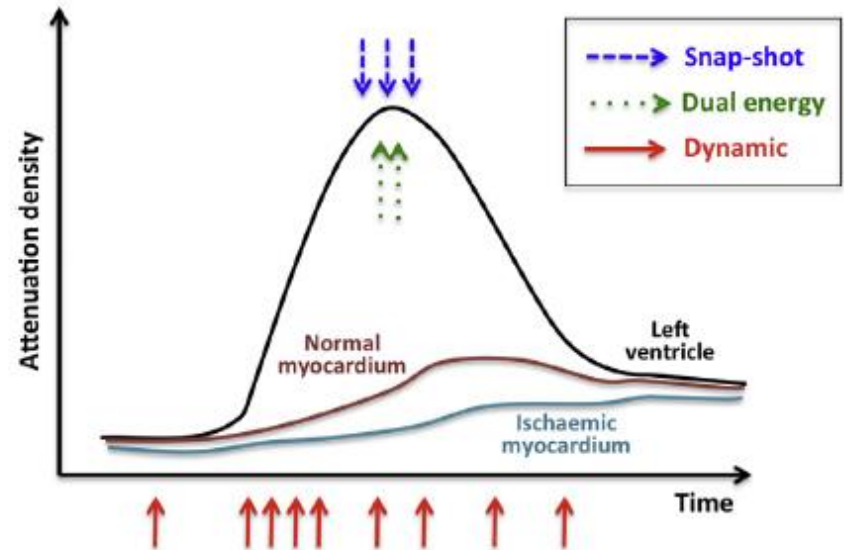
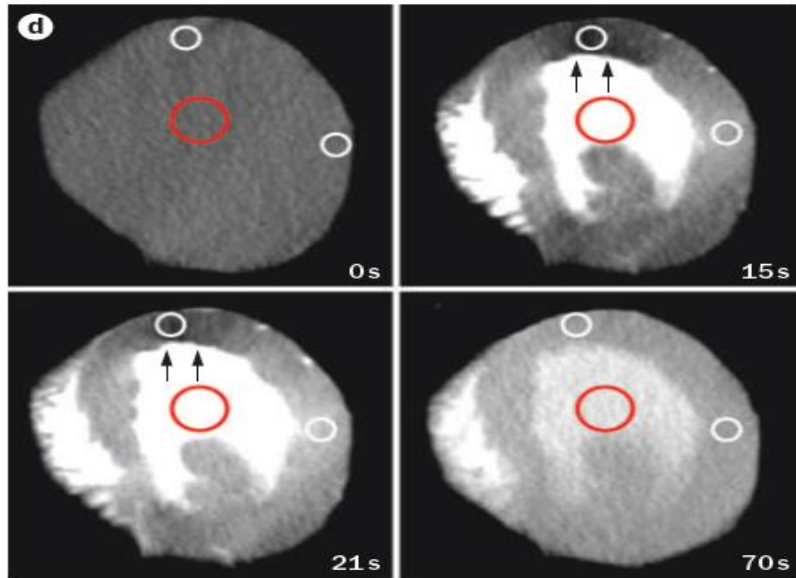


CT Contrast Agent Properties

- Iodinated contrast agents
 - Mol weight: 500-700 u
 - Extravascular diffusion

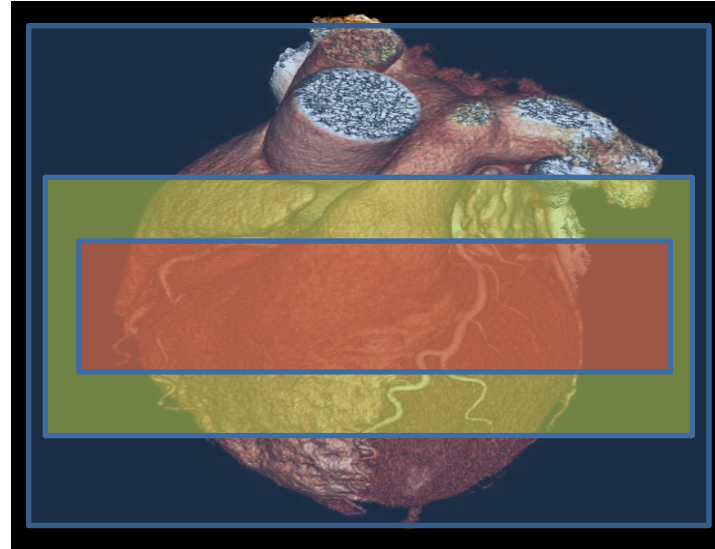


Time course of Contrast enhancement



Limitations of dynamic scanning for absolute quantification

- Requires dynamic full body coverage CT
 - 320 slice CT with 16 cm coverage
- Radiation dose.

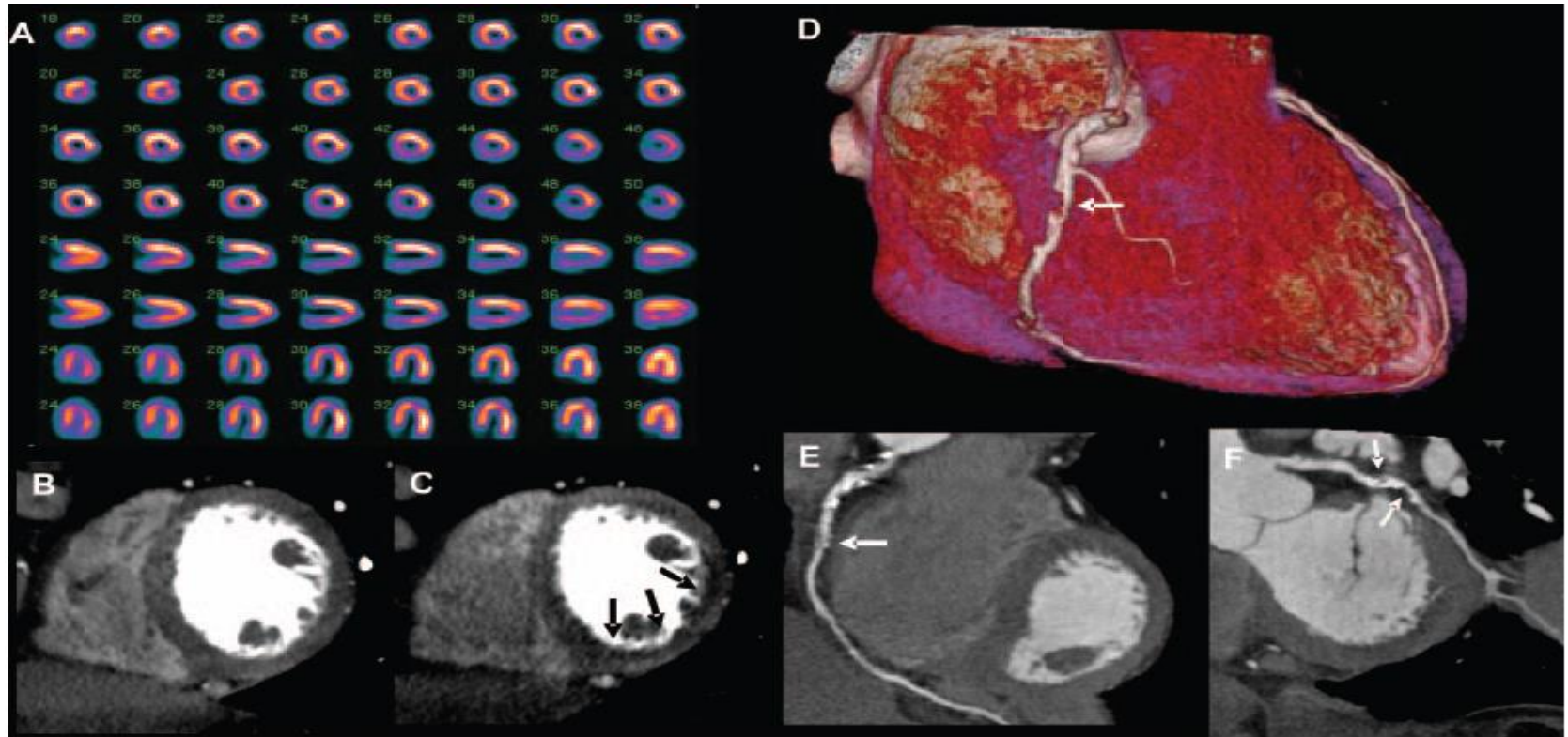


320 slice
=16 cm coverage
1 stack

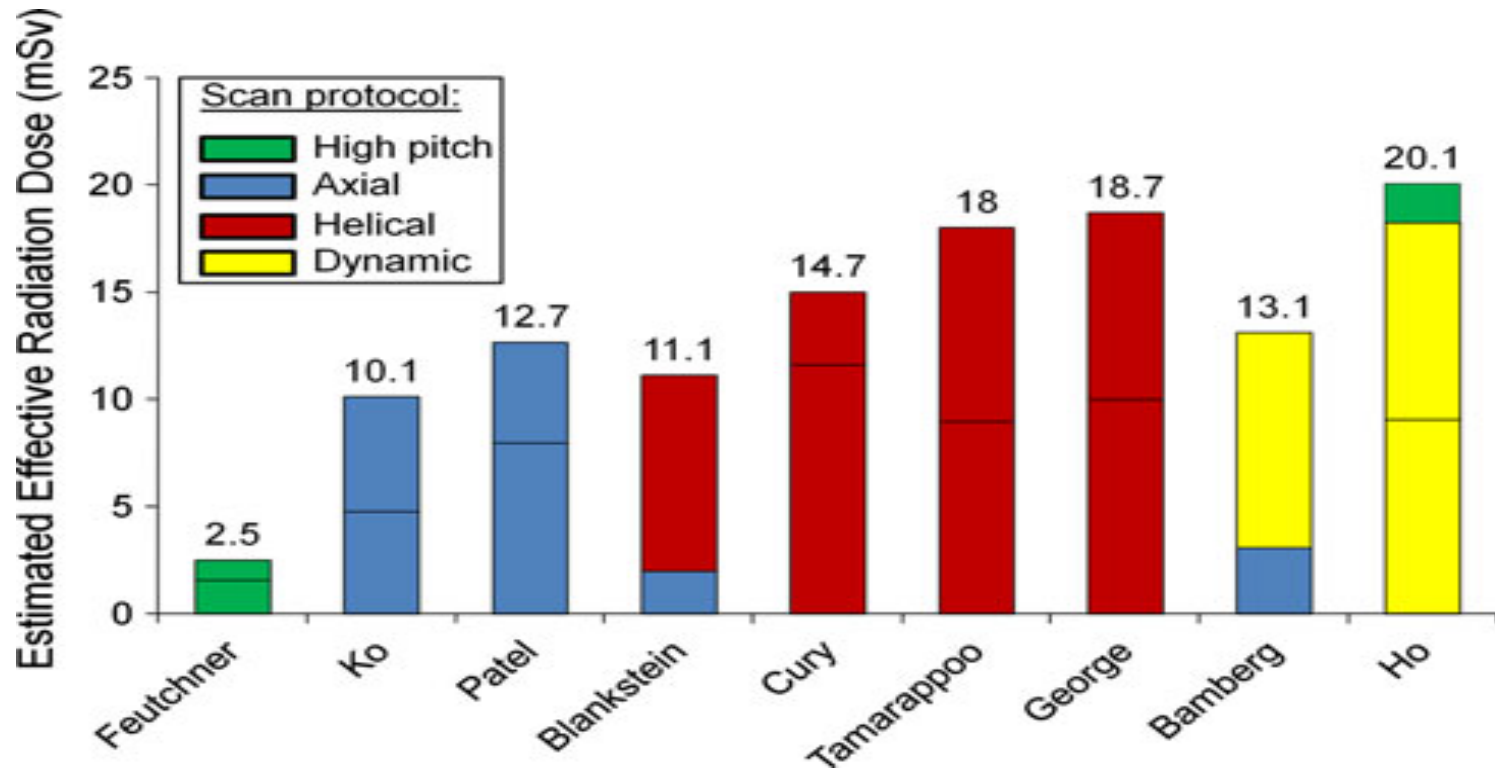
128 slice
=8 cm coverage
2 stacks

64 slice
=4 cm coverage
4 stacks

320 slice CT



CT Perfusion Imaging Radiation Dose



Results:

Single Center Studies CTP+CTA vs QCA/ FFR

Study	Scanner	n	Sens	Spect	PPV	NPV
George et al. 2009	64/256 MDCT	27	86	92	92	85
Blanstein 2009	DSCT	33	92	7	89	79
Rocha-Filho 2010	DSCT	34	96	100	100	91
Cury 2010	64-MDCT	36	94	75	89	86
Ho 2010	DSCT	35	95	65	78	79
Ko 2011	DSCT	40	87	95	89	94
		205	86-96	67-100	78-100	79-94

Multi Center Studie CTP+CTA vs ICA and SPECT

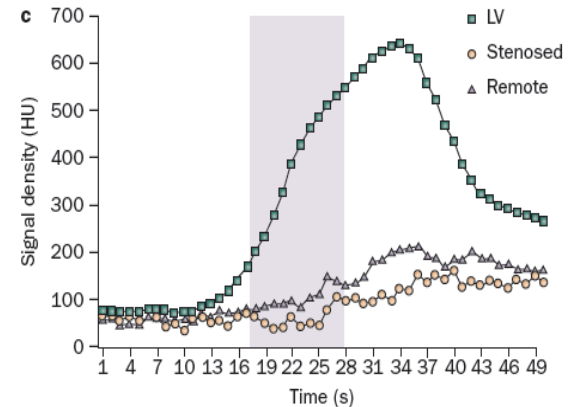
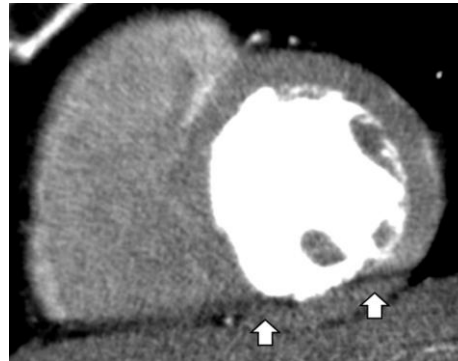
	Sensitivity (%)	Specificity (%)	PPV (%)	NPV (%)
CTA alone	92 (87-96)	51 (44-57)	53 (47-60)	92 (86-96)
CTA + CTP	80 (72-86)	74 (68-80)	65 (58-72)	86 (80-90)

- Parameter : Ischemia, EF, volumes, prognosis, MBF, prognosis value (?)

- Success ?:

- limited expertise, many trap
- artifact, heterogeneity in protocols

- Price : Research



To conclude

- Stress perfusion CT is a promising approach to combine functional with anatomical imaging.
- First single and multicenter results are promising, but the technique requires further development.