

Jornada sobre Protección Radiológica en Radiología Pediátrica. Criterio ALARA

Experiencias con equipos de Toshiba





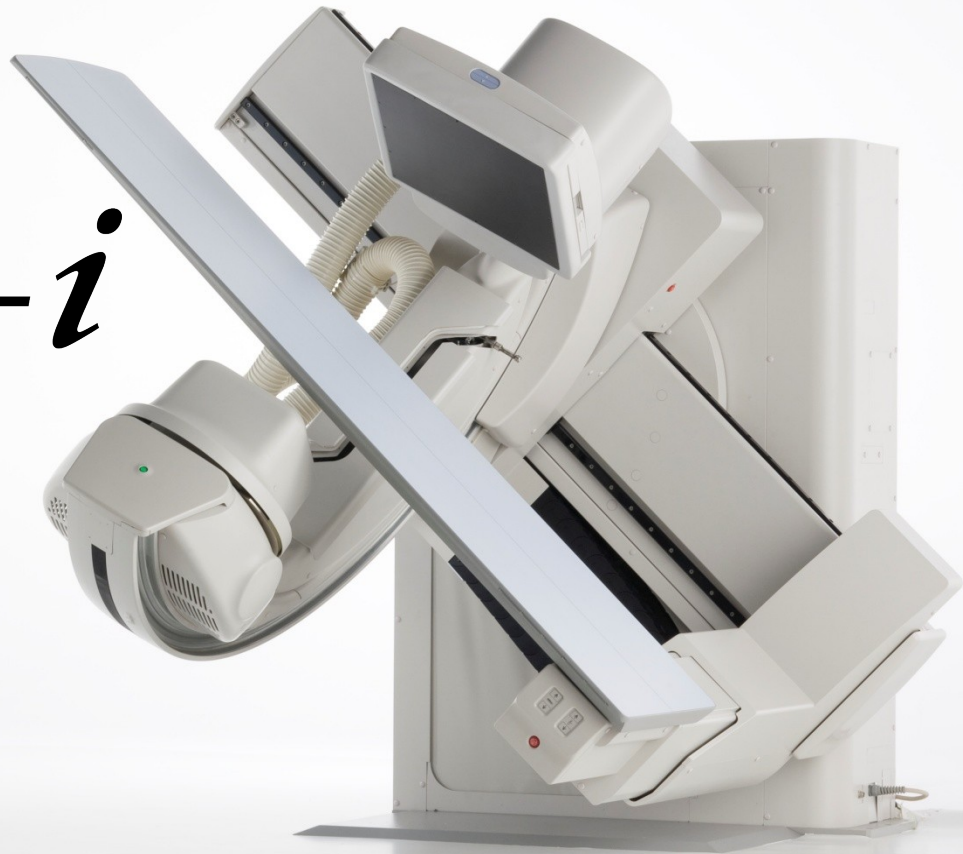




Toshiba Ultimax-i Multipurpose Digital RF System

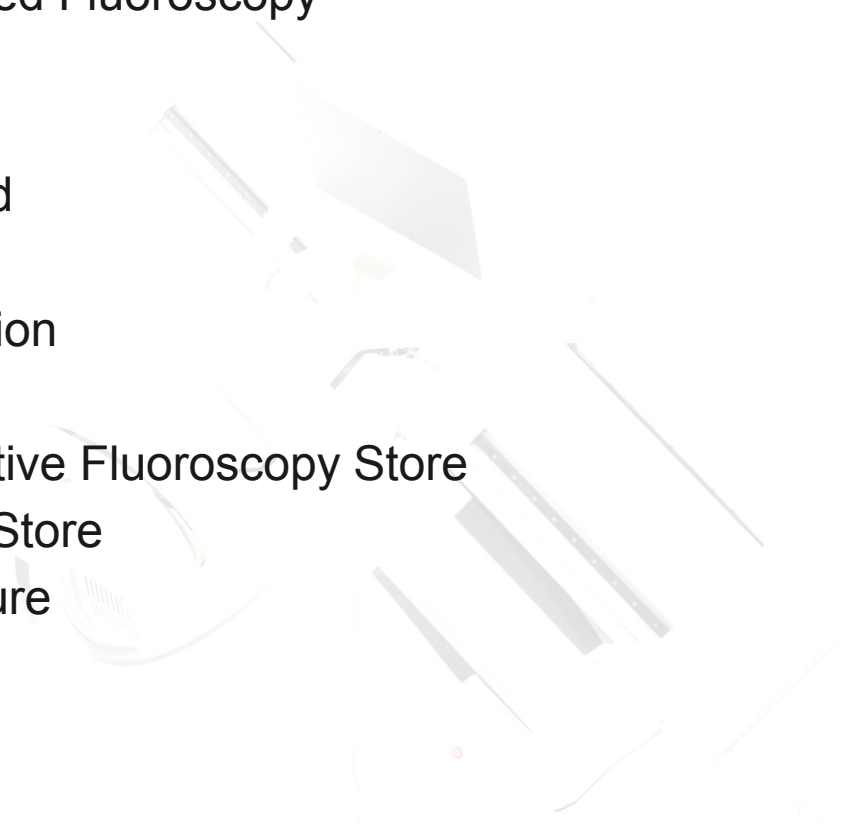
Ultimax-i

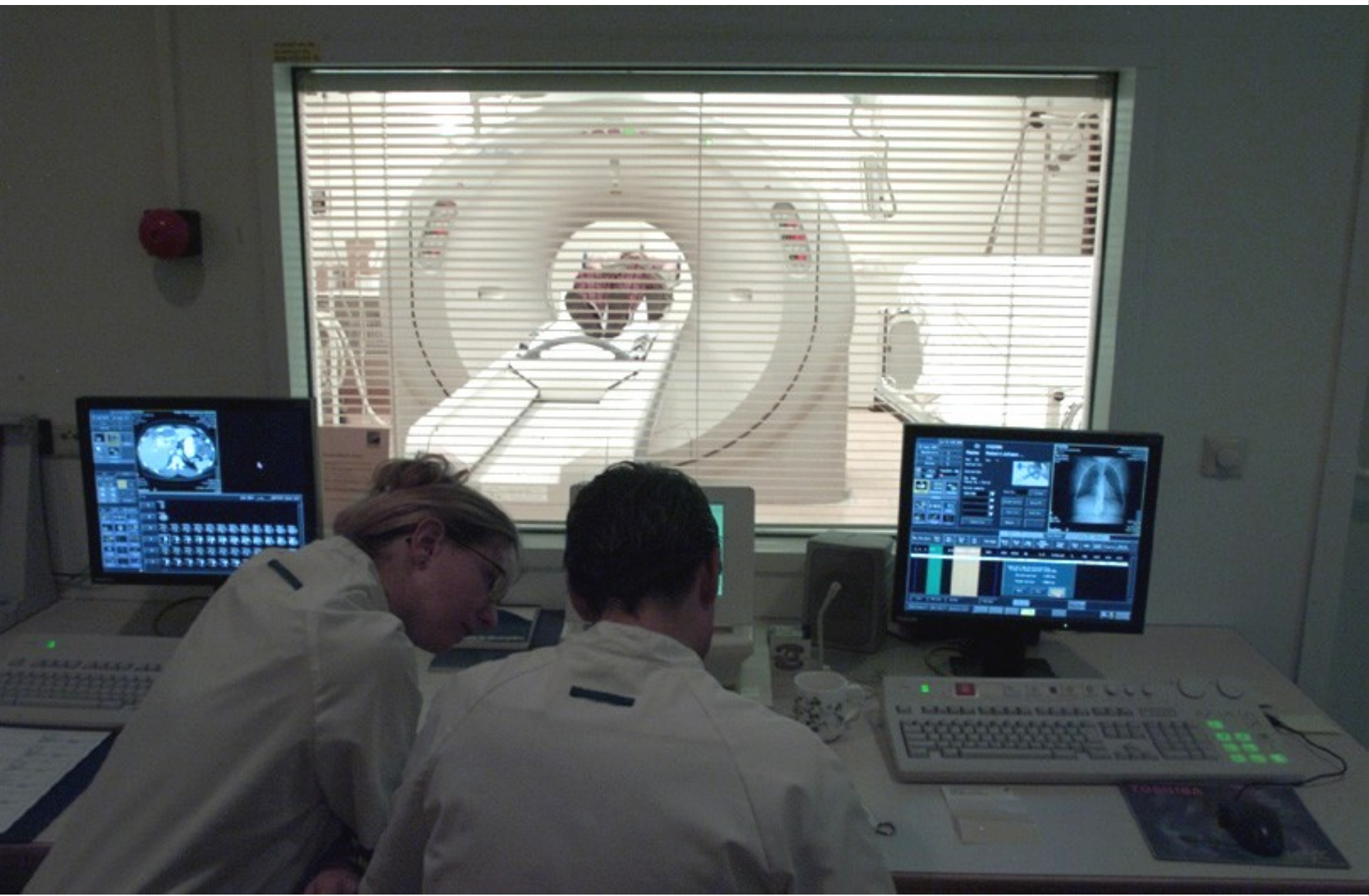
**Multipurpose
Digital RF
System**



Dose & Safety

- OptiBeam Tantalum Filter
- Digital Grid Controlled Pulsed Fluoroscopy
- Light Beam Collimator
- Laser Positioners
- Removable anti-scatter Grid
- Virtual Collimation
- Variable Dose Mode Selection
- Digital Zoom
- Retrospective and Prospective Fluoroscopy Store
- Single Frame Fluoroscopy Store
- Acquisition w/o Test Exposure

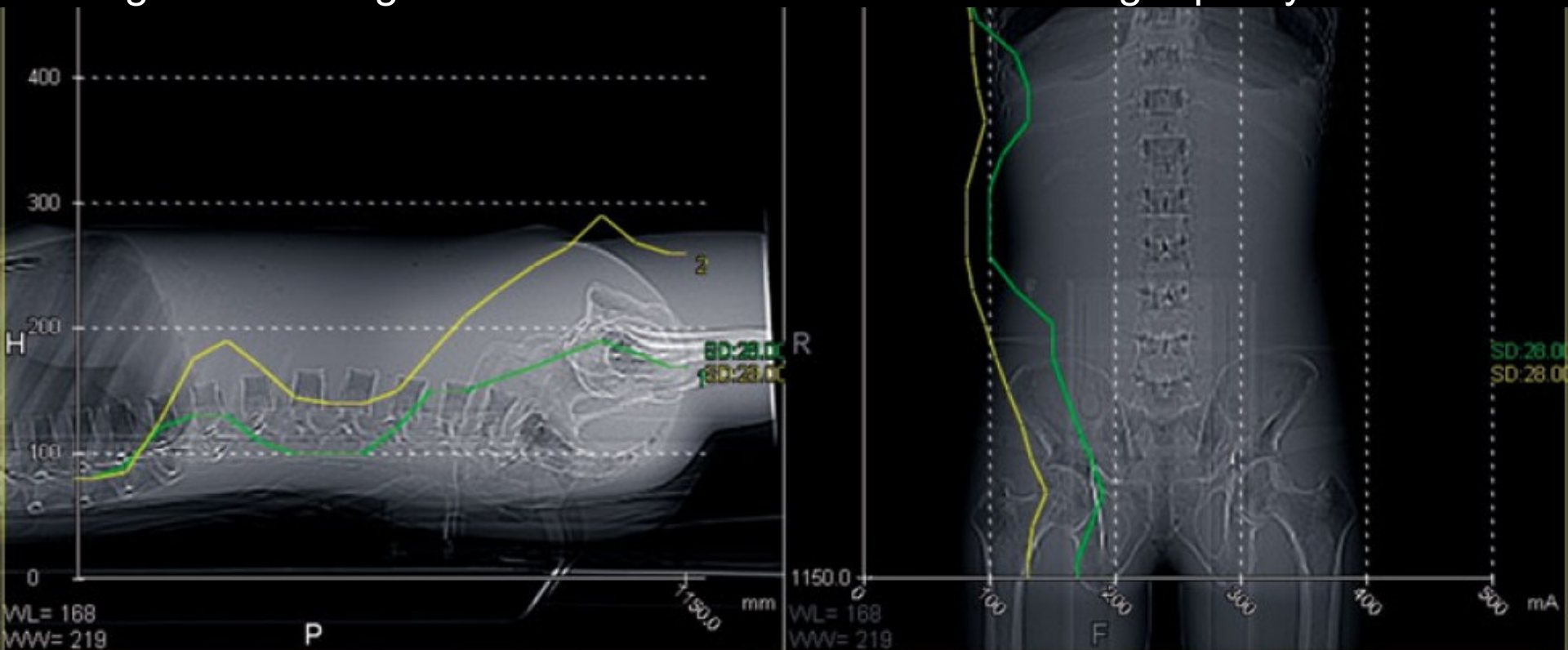




Computed tomography (CT) remains the imaging modality with the highest increase in utilization in children due to its widespread availability and rapid image acquisition.

A variety of hardware and software technical innovations have led to a significant reduction in CT radiation exposure.

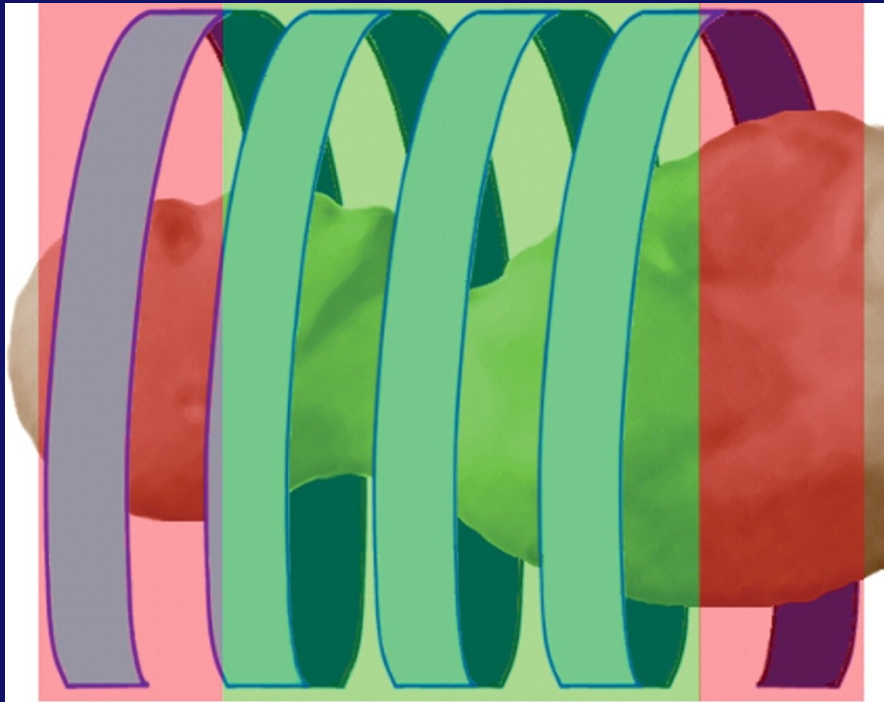
SUREExposure 3D from Toshiba: tube current modulation leads to more homogeneous image with dose reduction at constant image quality.



Pediatr Radiol (2010) 40:1324–1344, Multidetector CT in children: current concepts and dose reduction strategies. Nievelstein RA, van Dam IM, **van der Molen AJ**.
Submitted: Performance Evaluation of Longitudinal and Volumetric Tube Current Modulation in a 64-slice Multidetector Row CT. **van der Molen AJ, Joemai R, Geleijns J.**

Problem: overranging

The effect of overranging is larger in children than in adults.
The effect is also larger the more slices are being used.



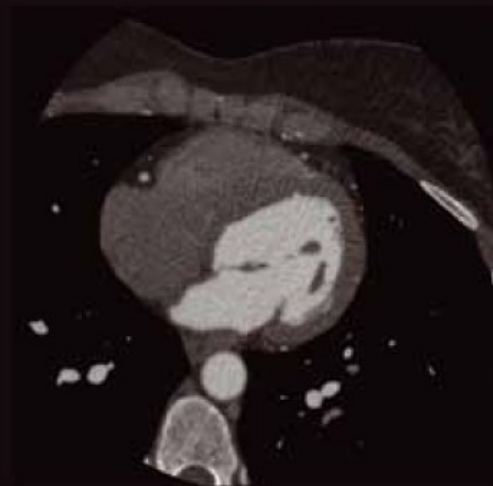
Overranging: at least an extra half rotation (red) is scanned before the start and beyond the end of the imaged volume (green).

- Toshiba offers Ultra Helical CT scanning, 160x0.5mm
- For Ultrahelical acquisitions the effect of overranging would become excessive
- Solution the active collimator: slowly opens during the start of the scan, and slowly closes during the end of the scan, thus avoiding overranging.
- With the active collimator, overranging is for helical CT scanning not a limiting factor anymore.

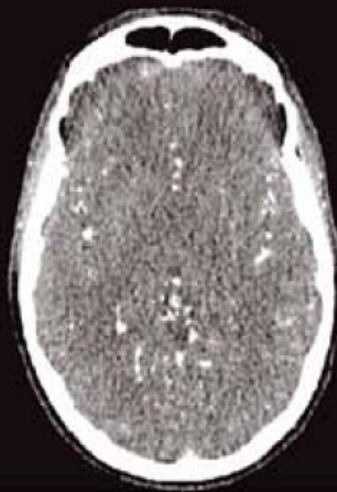
Visual comparison of two reconstruction methods show a decrease of noise for AIDR reconstruction.

Reconstructions with AIDR showed no negative influences on image quality and showed a significant decrease of image noise.

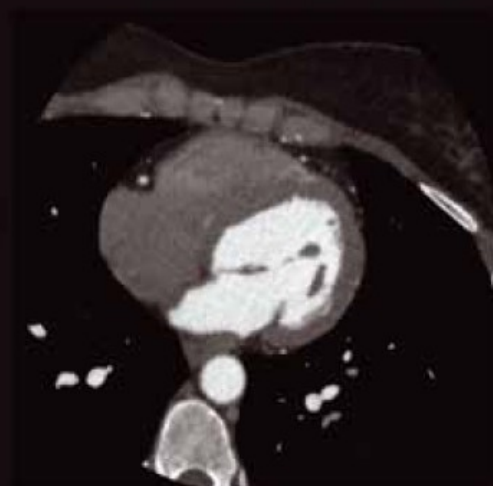
Standard reconstruction



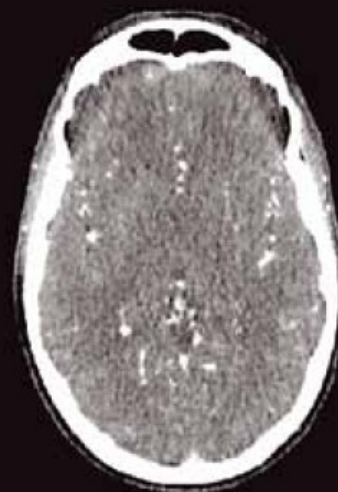
Noise: 60 HU



AIDR reconstruction



Noise: 34 HU



Volumetric scanning: low dose and fast cardiac CT in small children, no sedation required

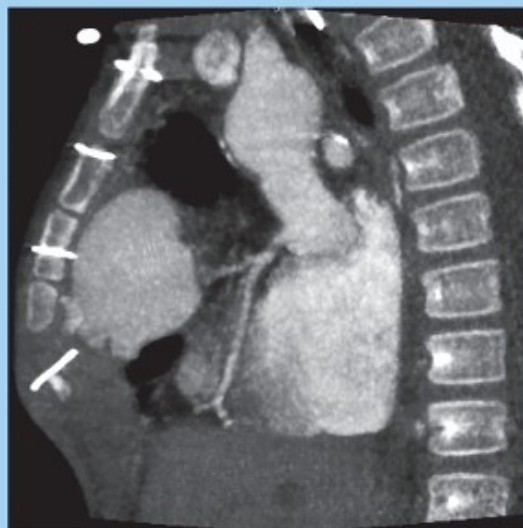
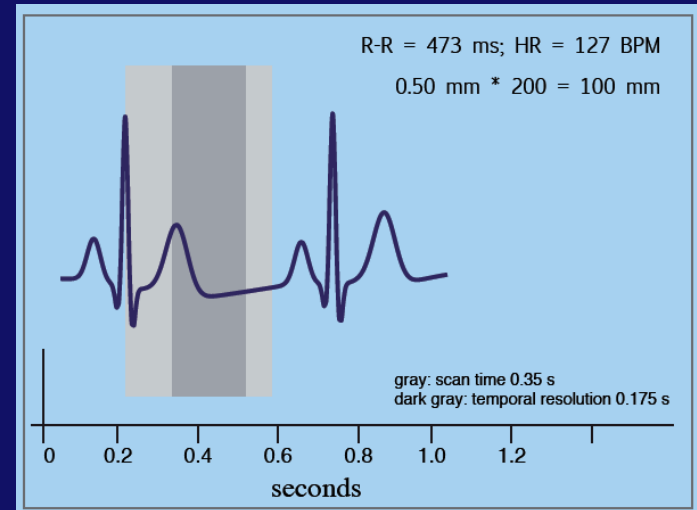
Aquilion ONE (320x0.5 mm)

160mm coverage in 0.35s

Only one rotation (axial acquisition)

Chest CTA of a 2 year old girl (10kg)

Effective dose 1.2 mSv



Causes of respiratory distress in neonates and infants can be visualized with dynamic axial volumetric CT scanning

Indication:

- 35w + 5 neonate (2500gr) with respiratory distress (stridor)
- Suspect for median neck cyst, laryngeal cyst, tracheal malacia or chord paralysis.
- Both the bronchoscopy and US of the large vessels (and heart) provides no clarity.

Report:

- Tracheal deviation to the right with stenosis due to compression by mass / cyst.
- DD: parathyroid cyst, persistent thymo-laryngeal duct cyst...
- Tracheal deviation with locally a strong stenosis.
- No evidence for a primary tracheal malacia.

Time resolved dynamic volumetric CT scanning can be performed at low radiation doses ($E = 1.9 \text{ mSv}$).

Causes of respiratory distress in neonates and infants can be visualized with dynamic axial volumetric CT scanning

Coronal 10mm Min-IP



Sagittal 10mm Min-IP

