



CMRSegTools: an Osirix plugin for myocardial infarct sizing on DE-CMR images

Magalie Viallon, Joel Spaltenstein, Charles de Bourguignon, Coralie Vandroux, Olivier Bernard, Loic Belle, Patrick Clarysse, Pierre Croisille

► To cite this version:

Magalie Viallon, Joel Spaltenstein, Charles de Bourguignon, Coralie Vandroux, Olivier Bernard, et al.. CMRSegTools: an Osirix plugin for myocardial infarct sizing on DE-CMR images. Journal of Cardiovascular Magnetic Resonance, 2014, 16 (Suppl 1), pp.P204. inserm-00932134

HAL Id: inserm-00932134

<https://inserm.hal.science/inserm-00932134>

Submitted on 16 Jan 2014

HAL is a multi-disciplinary open access archive for the deposit and dissemination of scientific research documents, whether they are published or not. The documents may come from teaching and research institutions in France or abroad, or from public or private research centers.

L'archive ouverte pluridisciplinaire **HAL**, est destinée au dépôt et à la diffusion de documents scientifiques de niveau recherche, publiés ou non, émanant des établissements d'enseignement et de recherche français ou étrangers, des laboratoires publics ou privés.

POSTER PRESENTATION

Open Access

CMRSegTools: an Osirix plugin for myocardial infarct sizing on DE-CMR images

Magalie Viallon^{1*}, Joel Spaltenstein², Charles de Bourguignon¹, Coralie Vandroux¹, Olivier Bernard¹, Loic Belle³, Patrick Clarysse¹, Pierre Croisille^{1,4}

From 17th Annual SCMR Scientific Sessions
New Orleans, LA, USA. 16-19 January 2014

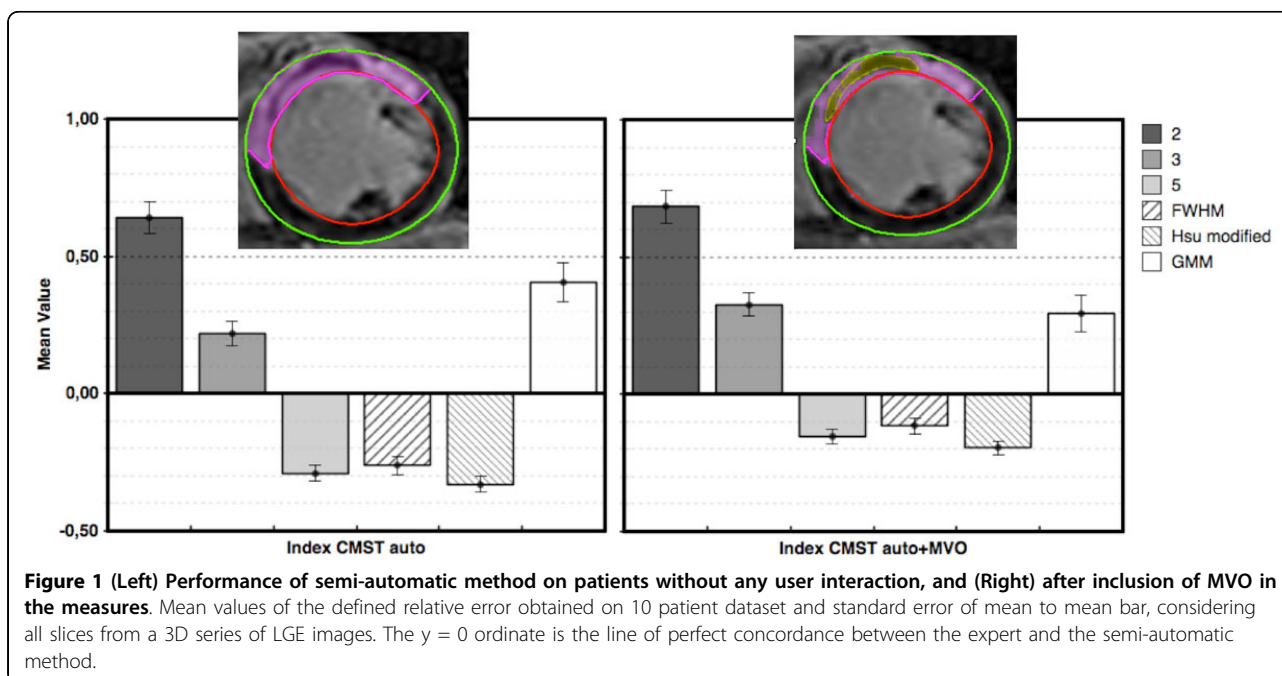
Background

CMR is an established method for the diagnosis and assessment of myocardial infarction in routine exams. In addition, there has been a growing interest in using infarct size as a surrogate endpoint for clinical trials assessing the efficacy of acute MI reperfusion treatments and MI size is reported to be a stronger predictor of outcome than LVEF and LV volumes[1]. Various methods have been proposed for infarct size (IS) measurement without reference standard method and side-by-side

comparison among them. The goal was to develop a user-friendly cardiac segmentation toolbox implemented as a plugin in the open-source OsiriX software with a set of commonly proposed semi-automatic algorithms

Methods

Contour segmentation was implemented using a fast automated segmentation framework (B-spline Explicit Active Surfaces[2]) that could be corrected or manually performed. Several semiautomatic methods were imple-



¹CREATIS UMR CNRS 5220 INSERM U1044, Université de Lyon, Lyon, France
Full list of author information is available at the end of the article

mented from simple image intensity threshold based on 1) histogram, or 2) equal to $\times$ standard deviation (xSD) above the mean of remote normal myocardial intensity 3) full-width at half-maximum (FWHM) with 2D/3D and maximum or region based variants. More sophisticated algorithms were also implemented including 4) the Gaussian Mixture Model (GMM) and 5) the method proposed by Hsu that assign a weighting to each voxel depending on its image intensity or use a combination of methods along with regional feature analysis. Performance of methods was 1) evaluated for precision and accuracy on a realistic phantom based on real datasets with varying contrast to noise ratio (CNR) between infarct area and normal myocardium and 2) compared in-vivo on DE-CMR images in post-AMI patients.

Results

When evaluated on the phantom study, accuracy of all algorithms reached 100% when $CNR > 7$. For low CNR

values, whereas xSD and FWHM appeared more robust, GMM illustrated its intrinsically higher sensitivity to the noise level. Figure 1 shows the overall performance of implemented technique. Figure 2 shows results obtained in-vivo in a patient with a large infarct including a micro-vascular obstruction (MVO) lesion. Whereas 2SD and 3SD tends to overestimate IS, 5SD and FWHM are close to the expert results, when MVO lesions, if present, are added to the segmented lesions.

Conclusions

CMRSegTools brings in a user friendly interface integrated as a plugin in the widely available advanced open-source OsiriX dicom workstation, a toolbox allowing to calculate, display and interactively analyze myocardial lesions and especially myocardial infarct lesions. CMRSegTools offers a fast, real-time and integrated process and advanced published algorithms for quantification purposes in CMR through an ergonomic

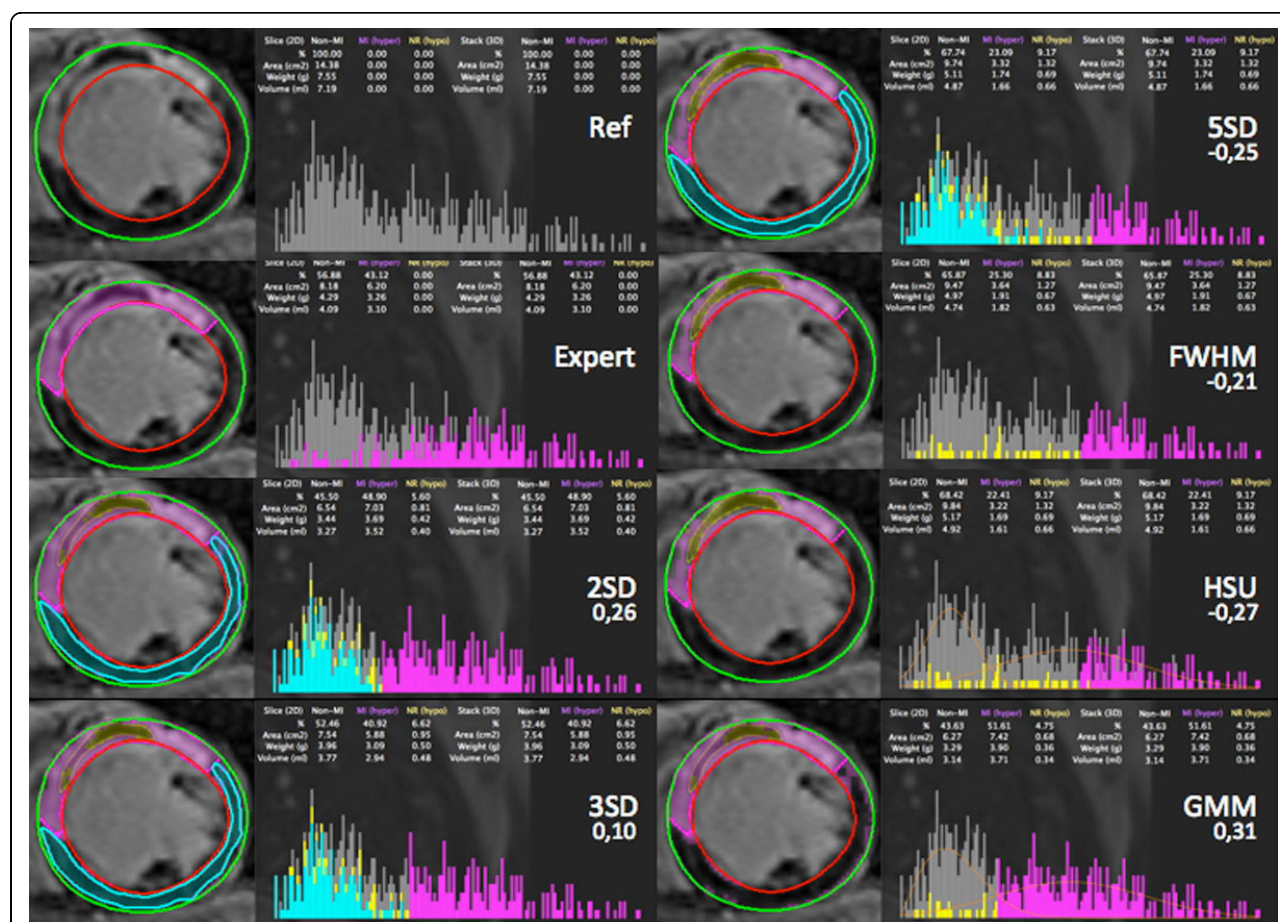


Figure 2 The error to expert segmentation is given below the name of the method on the image and is calculated as: $\text{error} = (\text{Area}_{\text{MI}}(\text{method}) - \text{Area}_{\text{MI}}(\text{reference expert})) / \text{Area}_{\text{MI}}(\text{reference expert})$; $\approx$ accurate results, >0 : over-estimation, <0 : under-estimation. The expert segmentation is given for reference as a pink line in each segmented images. all pixels within the reference ROI used for the xSD method are categorized in cyan blue, MVO as yellow.

interface. It can be proposed for newly available methods, as a platform for algorithm performance comparison and validation.

Authors' details

¹CREATIS UMR CNRS 5220 INSERM U1044, Université de Lyon, Lyon, France.

²Spaltenstein Natural Image, Geneva, Switzerland. ³Cardiology, CH Annecy, Annecy, France. ⁴Radiology, CHU Saint-Etienne, Université J. Monnet, saint-Etienne, France.

Published: 16 January 2014

References

1. Wu E: *Am J Cardio* 2007, **100**:930-936.
2. Barbosa D: *IEEE Trans Image Process* 2012, **21**(1):241-251.
3. Hsu LY: *JMRI* 2006, **23**:298-308.

doi:10.1186/1532-429X-16-S1-P204

Cite this article as: Viallon *et al.*: CMRSegTools: an Osirix plugin for myocardial infarct sizing on DE-CMR images. *Journal of Cardiovascular Magnetic Resonance* 2014 **16**(Suppl 1):P204.

Submit your next manuscript to BioMed Central and take full advantage of:

- Convenient online submission
- Thorough peer review
- No space constraints or color figure charges
- Immediate publication on acceptance
- Inclusion in PubMed, CAS, Scopus and Google Scholar
- Research which is freely available for redistribution

Submit your manuscript at
www.biomedcentral.com/submit

