



# Medical Imaging Physics

## Spring Quarter

### Week 7-1

## X-Rays

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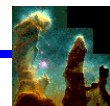
May 6, 2008

Medical Imaging Physics 13



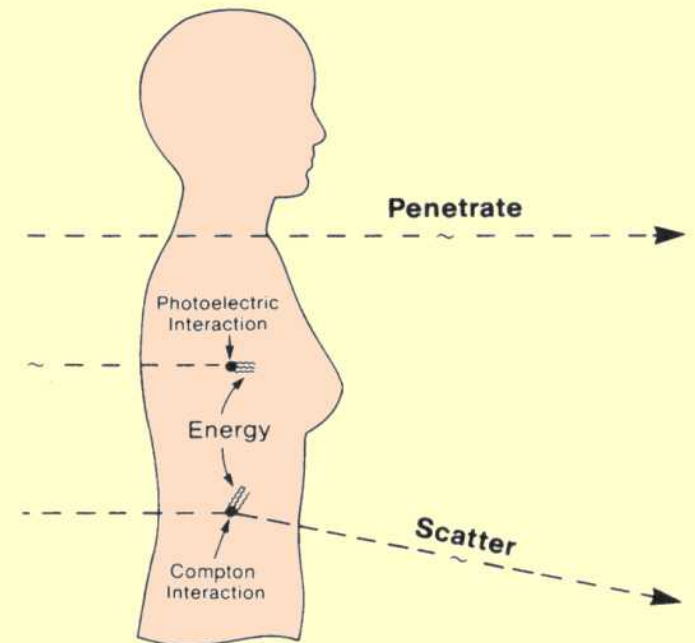
# Outline

- Midterm
- Radiology, CT
- Reading assignment:
  - ▶ CSG D 16; <http://www.sprawls.org/ppmi2/>
- Homework
  - ▶ Essay questions
  - ▶ Due Thursday, May 8



# Radiation Interaction with Matter

- X or Gamma rays (photons) can interact with matter:
  - ▶ Penetration w/o interaction
  - ▶ Absorption and deposition of all energy
    - Photoelectric effect
  - ▶ Scattering and partial deposition of energy
    - Compton scattering



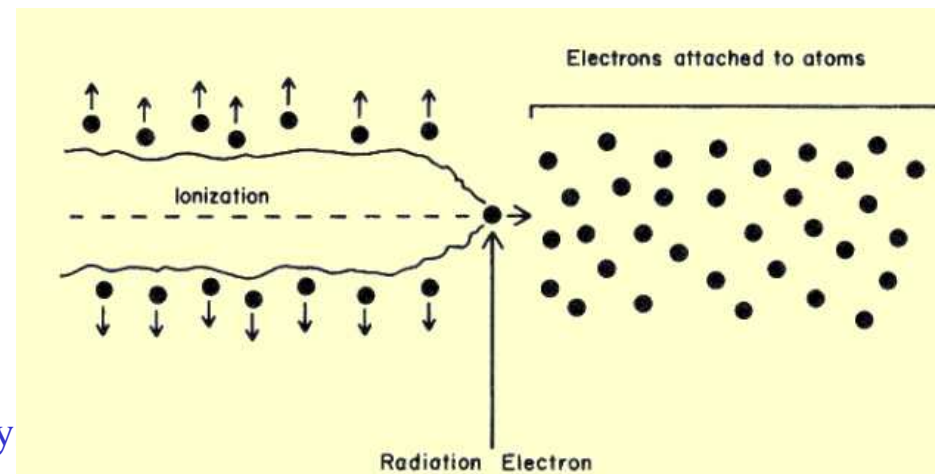
# Interactions

- Photoelectric (photon-electron) effect:
  - ▶ Photon transfers all its energy to a bound electron (K or L)
  - ▶ Electron is ejected from the atom and gets quickly absorbed close to the origination point
  - ▶ The vacancy is filled with another electron
    - Characteristic radiation (x-rays or visible light)
    - It's called Fluorescent Radiation
- Compton scattering
  - ▶ Photon bounces off an electron and changes its direction
  - ▶ Similar to partially inelastic collision of billiard balls
  - ▶ Part of the photon energy transfers to the electron



# Secondary Interactions

- Electron interactions
  - ▶ Ejected electron interacts with matter and loses its energy
    - Elevated energy state of atoms
    - Ionization of atoms (33.4 eV per ionization of one “atom” of air)
    - Very important: 50-keV x-ray photon undergoing a photoelectric interaction
      - The initial interaction of the photon ionizes one atom
      - The resulting energetic electron ionizes approximately 1,500 additional atoms



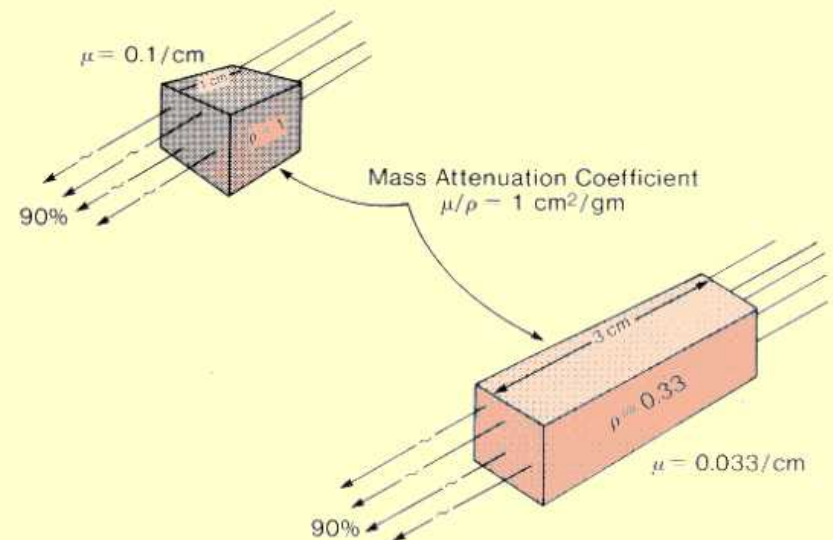
# Attenuation

- Linear attenuation coefficient
  - ▶ The fraction of photons interacting per 1-unit thickness of material
- Mass attenuation coefficient

Mass Attenuation Coefficient ( $\mu/\rho$ ) = Linear Attenuation Coefficient ( $\mu$ ) / Density ( $\rho$ )

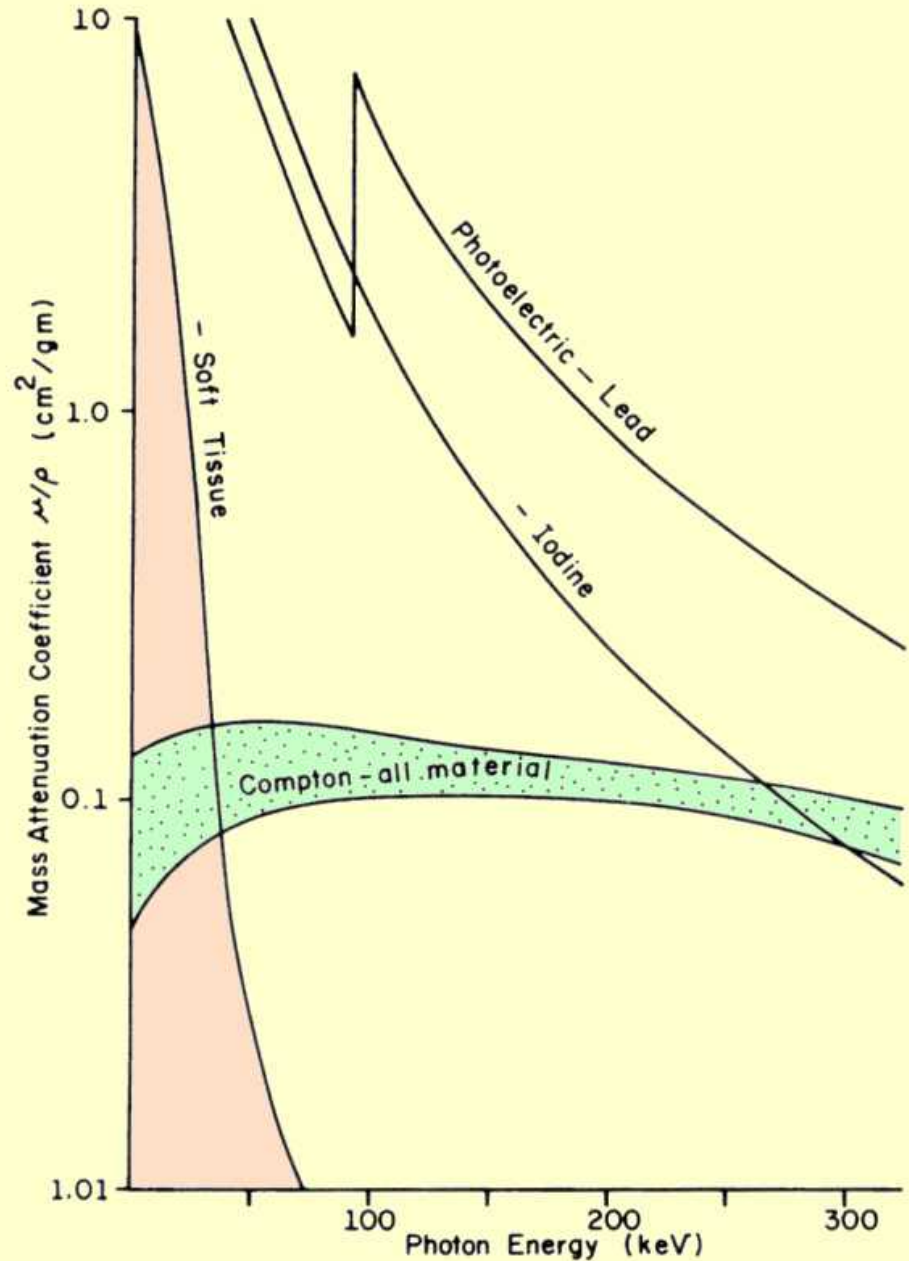
- ▶ Area mass is the amount of material behind a 1-unit surface area

Area Mass ( $\text{g}/\text{cm}^2$ ) = Thickness ( $\text{cm}$ )  $\times$  Density ( $\text{g}/\text{cm}^3$ )



# Overall Picture

- PE effect attenuates much stronger because all photon energy is deposited
- Compton
  - ▶ Predominant at higher energies
  - ▶ In tissue: above 30 keV



# X-Ray Imaging

- Two different ways:
  - ▶ Projecting a (large) shadow image on the receptor
    - Radiography and fluoroscopy
  - ▶ Scanning with a thin x-ray beam and reconstructing 3-D image
    - Computed Tomography (CT)
- In general, larger penetration requires higher energies
- Different issues define image quality (contrast)
  - ▶ Scattered radiation
  - ▶ Characteristics of the receptor and display system
  - ▶ Characteristics of body parts and radiation





# Contrast

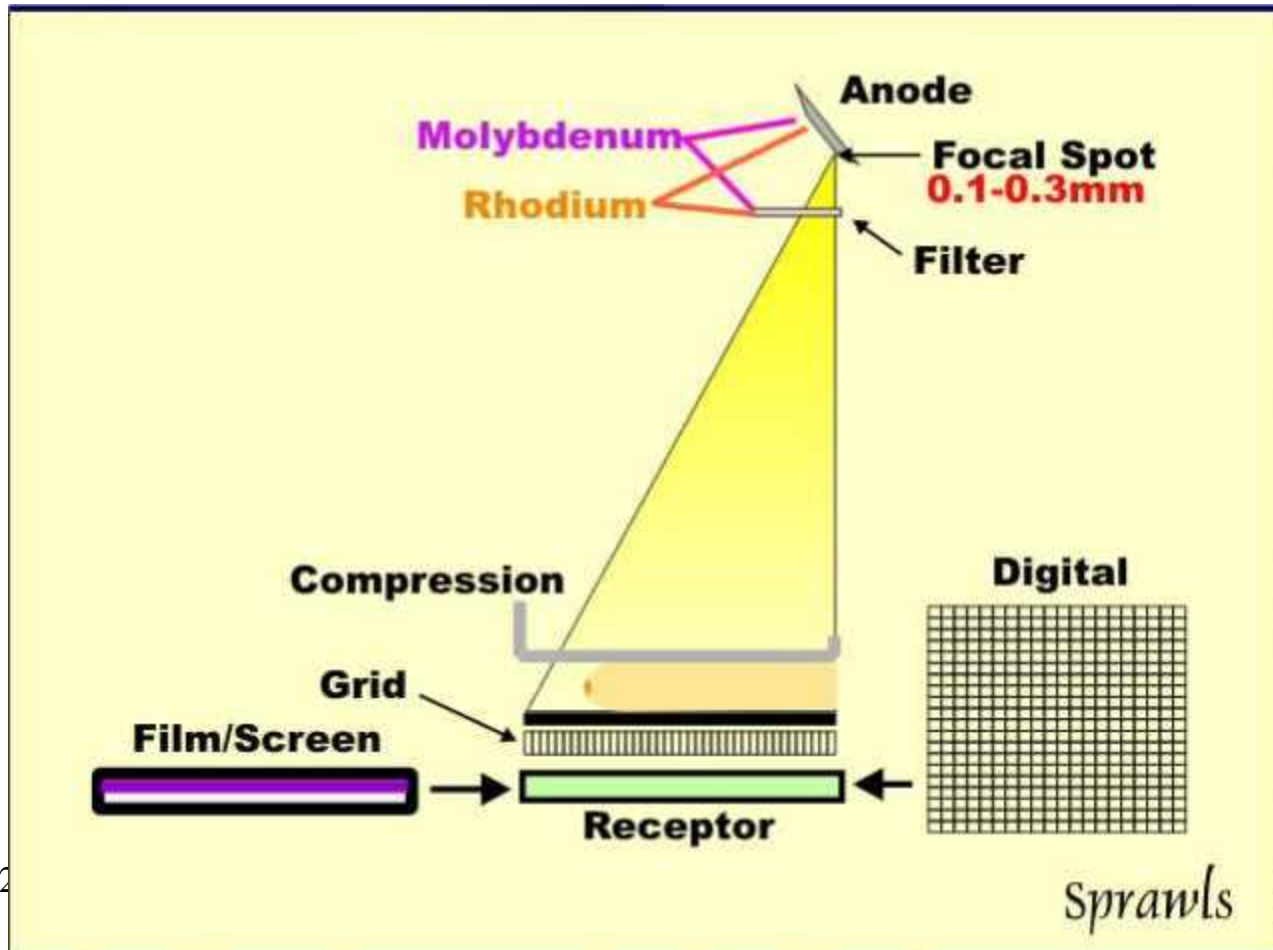
- X-ray imaging contrast:
  - ▶ Either atomic number ( $Z$ ) or density difference

<i>Material</i>	<i>Effective Atomic Number (<math>Z</math>)</i>	<i>Density (<math>\text{g}/\text{cm}^3</math>)</i>
Water	7.42	1.0
Muscle	7.46	1.0
Fat	5.92	0.91
Air	7.64	0.00129
Calcium	20.0	1.55
Iodine	53.0	4.94
Barium	56.0	3.5



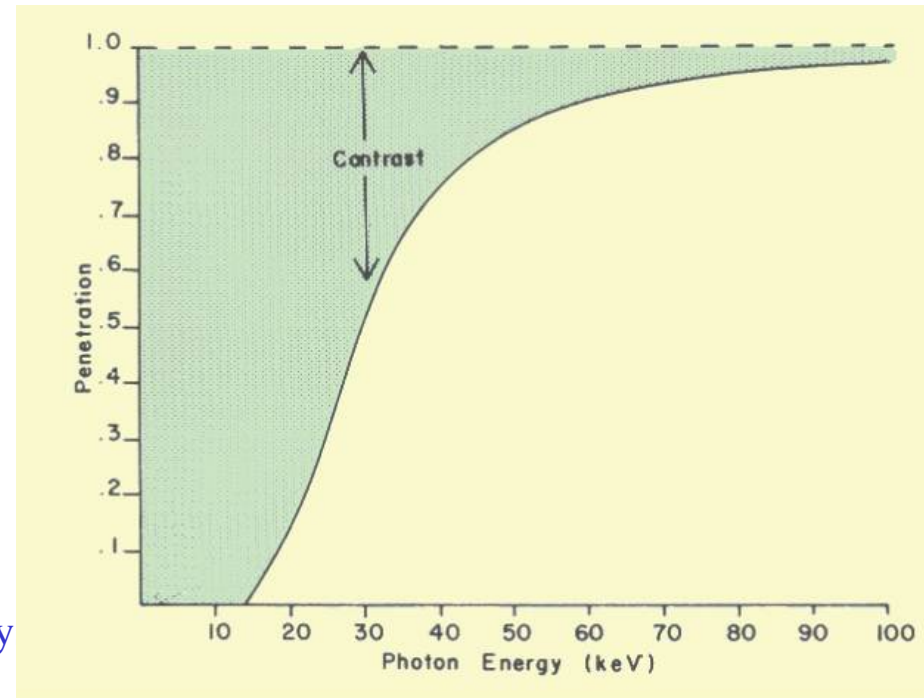
# Mammography

- The setup:



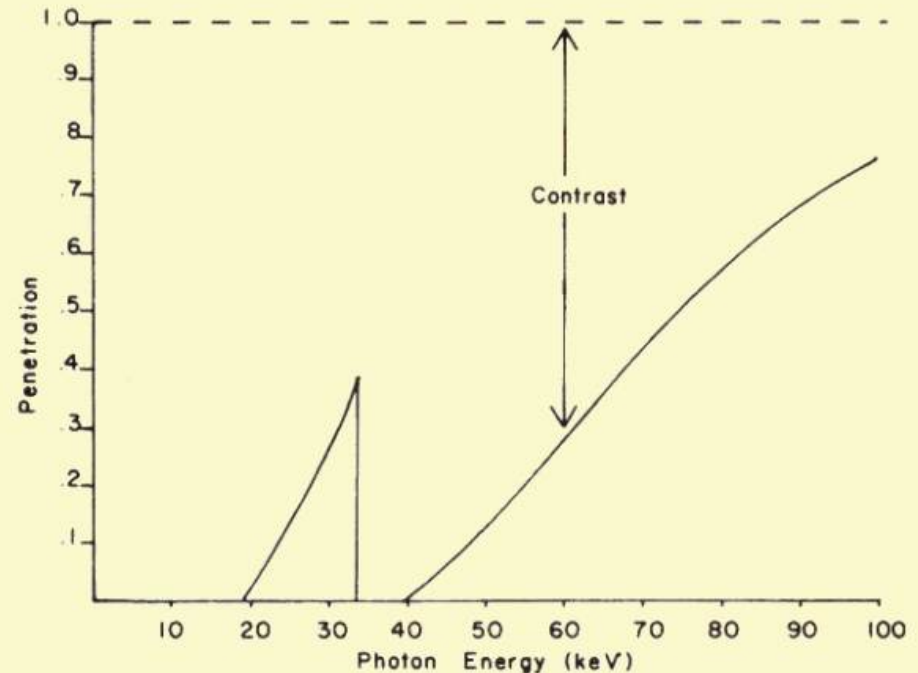
# Calcium Effects

- Calcium is a source of contrast
  - ▶ Important for imaging bones
  - ▶ Even more important in calcifications that are associated with some pathological conditions
  - ▶ Used x-ray energy will depend on the size
    - Imaging bones requires high energy
    - Smaller calcifications in breasts require lower energy



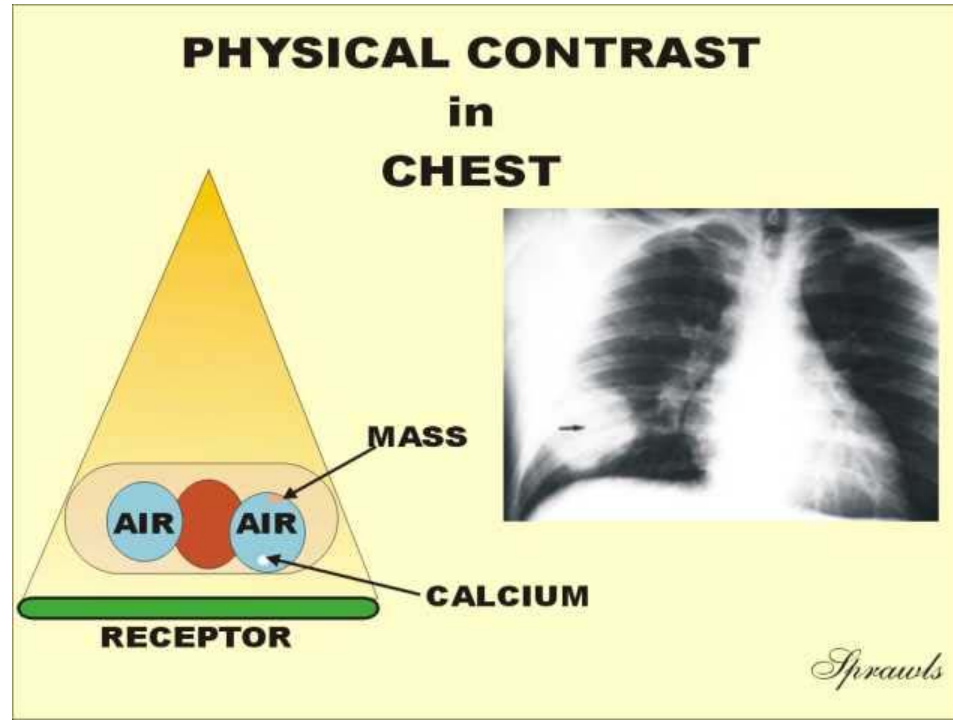
# Other Contrast Media

- Iodine and Barium
  - ▶ K edge (I) = 33 keV
  - ▶ K edge (Ba) = 37 keV
- The highest contrast achieved with a slightly higher x-ray energy
  - ▶ Maximizes PE effect



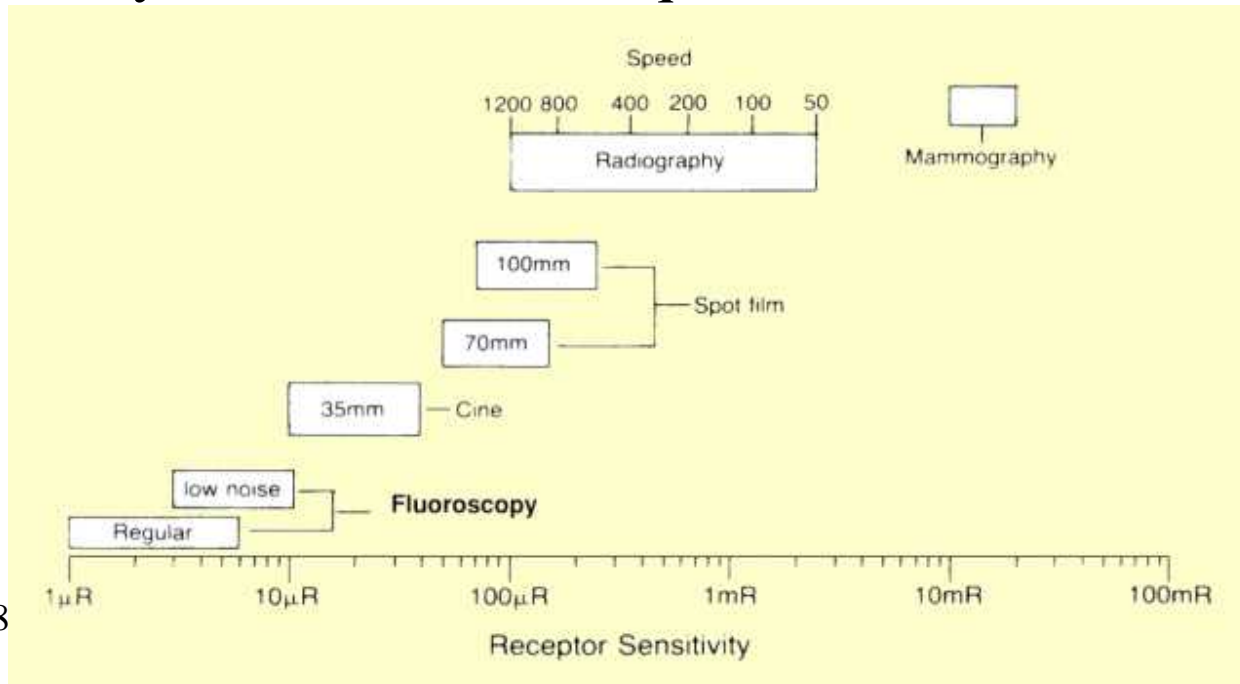
# Radiography

- Chest imaging is challenging
  - ▶ High contrast between lungs and the mediastinum
  - ▶ High penetration needed
  - ▶ Some objects that need to be identified (calcifications) are very small



# Radiography

- Different receptors used
  - ▶ Film – dynamic range has to be high
  - ▶ Digital imaging – overcomes some problems with digital processing (local enhancements of contrast,...)
- Sensitivity of different techniques



# Imaging Media

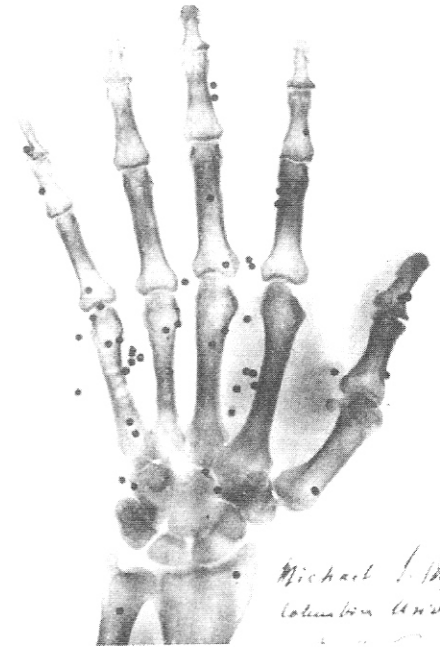
- **Film**
  - ▶ Traditionally used
  - ▶ Proper exposure is crucial
  - ▶ Good detail – long exposures needed
  - ▶ Image has to be developed
- **Intensifying screen and image intensifier**
  - ▶ Increase the efficiency and shorten exposure time
  - ▶ Calcium tungstate fluoresces in blue and additionally exposes the film
  - ▶ Different materials are used lately (rare-earth elements)

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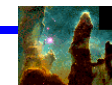
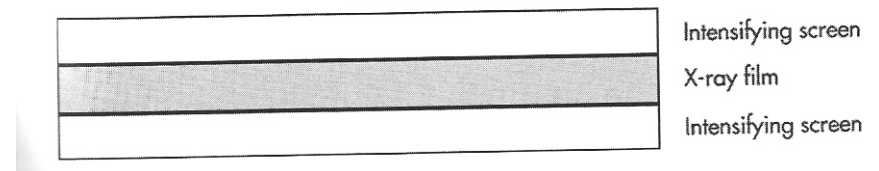
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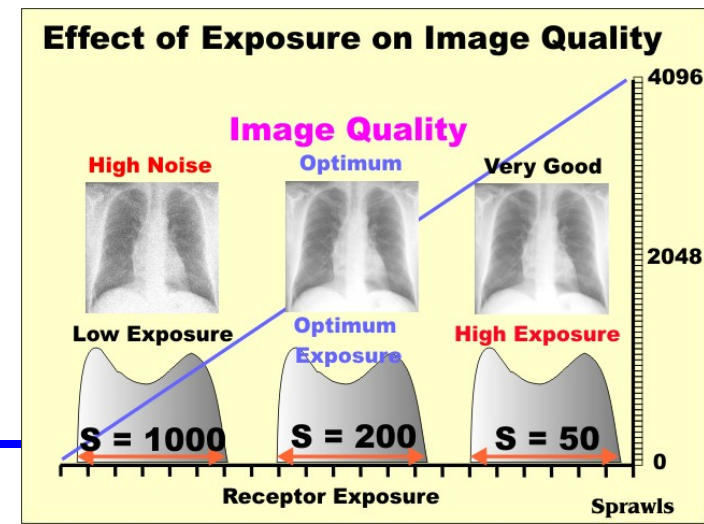
**MARGIN FIGURE 9-2**

First screen-film radiograph obtained by M. Pupin of Columbia University in February 1896. The radiograph demonstrates a shotgun wound to the hand.<sup>1</sup>



# Imaging Media

- Digital detectors
  - ▶ Pixels define the image
  - ▶ Manipulation and storage simpler
  - ▶ Based on photodiodes, scintillation probes, CCDs, storage phosphors,...
- Digital systems
  - ▶ Do not have limitations on exposure time, as defined by film speed
  - ▶ Wide dynamic exposure range
  - ▶ Much more sensitive than image screen systems





# Fluoroscopy

- Radiography furnishes information at a particular point in time
- Fluoroscopy: continuous stream of images
  - ▶ Radiation passing through the patient directed to the fluorescent screen
  - ▶ Image intensifier and camera are usually used



# Fluoroscopy

- Image intensifier
  - ▶ Layer of CsI emits visible light in proportion to x-ray intensity incident on the screen
  - ▶ Light ejects electrons from photocathode surface
  - ▶ Electrons are accelerated toward the anode and form an image on output screen
  - ▶ Significant brightness gain (minification and electronic gain)

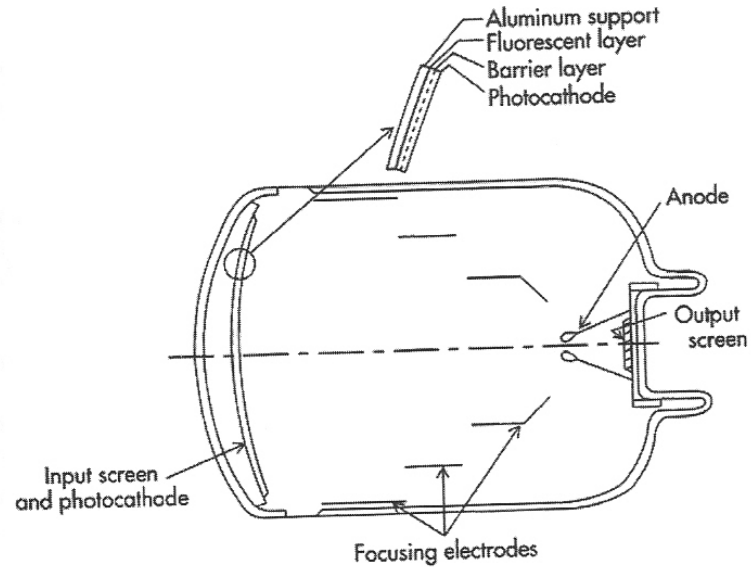


FIGURE 9-5  
Section of an x-ray image intensifier.



# Next Time

- Computed Tomography
- Radiation Doses

