German Röntgen Congress 2018 to focus on heart, neuroradiology and digital communication

I would like to invite you to the 99th German Röntgen Congress, which will take place from May 9-12, 2018 in Leipzig, Germany.



'Radiology connects' is the motto for the 99th German Röntgen Congress, which will take place from May 9–12, 2018 at Leipzig's ultra-modern **Congress Centre**

'Radiology connects', and it will well as therapeutic expertise and European Commission in Brusfocus on the mediating and inte- the presentation of new channels grating function of radiology in of communication and service. relation to connecting diagnostic and therapeutic knowledge, on 2018 will of course provide a diverse bringing specialist disciplines that are part of the respective service for all occupational groups. You processes even closer, as well as on can look forward to established and regional service networks.

he German Röntgen Congress 2018 are:

- Heart and vessels: diagnostics and intervention
- intervention Digital communication in the
- field of radiology The congress will also place an International' and 'Forum IT'.

emphasis on imparting basic clinical knowledge in line with radiological specialist knowledge, and nelius Schmaltz, MD, Head of Unit

The motto for the congress is on the formation of diagnostic as Strategy – Health Research of the

The German Röntgen Congress and wide-ranging programme offering a platform to the internal formats and tools such as RSNA Diagnosis Live™ or the Interactive The three thematic focuses of Learning Platform of the German Röntgen Society with digital case collections, as well as 'Intervention live', a new course facilitating interaction with a combination Neuroradiology: diagnostics and of video-based case presentations and digital tools. What's more, you will also be able to listen to many exciting speeches as part of 'RöKo

> At the opening event a highlight speech will be made by Cor-

sels on 'Research politics of the European Union in the healthcare sector'. Jim Reekers, MD, Professor of Radiology, AMC University of Amsterdam, will give a presentation titled 'Diabetic foot perfusion imaging: The truth behind arterial tubes', as part of his radiological lecture.

Look out for more information on our website over the next couple of months. I look forward to welcoming you to the 99th German Röntgen Congress in Leipzig.

Prof. Dr. Peter Huppert is head of the Institute of Radiology. Neuroradiology and Nuclear Medicine at Klinikum Darmstadt hospital, Germany, and will act as the president of the 99th German Röntgen Congress

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Join our Lunch Symposium on Friday, March 2ND, 12.30-13.30, room N and ask us about our Live Sessions at our booth X2/221.

 Hitachi Medical Systems Europe Holding AG, Switzerland www.hitachi-medical-systems.com

BY WOLFRAM STILLER

Strategies for dose reduction in computed tomography: from technical concepts to clinical practice

Since its introduction in the 1970s, technical improvements have constantly extended the range of clinical applications and made new radiodiagnostic indications accessible in the field of computed tomography (CT).

four decades can be attributed to the wide availability, speed, and ing advanced image reconstruc- atic dose reduction in clinical pracdiagnostic benefits of this imaging tion algorithms to CT image data tice, e.g. for paediatric and chest CT modality. At the same time, pub- has opened a field of promising examinations. For paediatric body lic health concerns have arisen developments with great potential imaging, lowering the tube voltage regarding the radiation exposure to for widespread application in clin- from 120 kV, to 100 kV, will allow patients and the general population ical routine. The idea behind soft- tube current modulation to funccaused by CT examinations.

require patients to be exposed to is the simultaneous reduction of trast-enhanced studies of the thosome level of ionising radiation, dose image noise and the improvement rax, using a tube voltage of 80 kV_n reduction is an imperative when of overall image quality. As noise will result in increased conspicuity applying CT in clinical practice and and overall quality of the resulting of iodine-perfused vessels and tisapproaches for reducing the dose image data are directly linked to sues. The strategy of lowering tube associated with CT are required. To the radiation exposure a CT exam- voltage to 100 kV_{p} or 80 kV_{p} can also this end, different strategies for dose ination is associated with, a reducbe applied in the chest CT of adults, reduction in CT have been devel- tion or suppression of noise via albeit having to apply higher tube oped, spanning technical approaches the application of iterative image current settings. Decreasing the as well as specific examination techniques applied in clinical practice.

To date, several technical possibilities such as automatic tube current modulation (ATCM) and automated tube voltage selection as well as full statistical iterative algorithms, dynamic beam collimation are avail- are readily available. Compared to paediatric CT protocols to different able for reducing the dose associated with CT examinations. ATCM adapts the tube current to com- to changes in image texture and in immobilisation and correct posipensate for variations in patient the depiction of image detail. The tioning of the arms are essential. attenuation, resulting in compara- distinctly different 'look-and-feel' ble image quality independent of of iteratively reconstructed image protocols with the goal to reduce body region and patient constitu- data is often felt to be a challenge dose in clinical practice should be tion and the optimisation of the that has to be addressed when a team effort based on a systematic applied dosage. Automated tube implementing advanced CT image evaluation and review of the qualvoltage selection aims at optimising tube potential depending on patient size and diagnostic task. For example, applying lower tube potential for contrast-enhanced acquisitions of CT examinations, careful selec- image quality that allows confident results in higher image contrast tion and individual adaptation of diagnosis is regularly achieved. It

ware-based methods for iterative tion properly despite much smaller quently allows a reduction in dose. tion of radiation exposure to the Currently, several different types of patients if the tube current moditerative reconstruction algorithms, including hybrid-, model-based, and reviewed. In addition to specifically traditional filtered back projection patient weight categories, careful (FBP), the application of IR may lead centring of the patient, effective reconstruction in clinical routine.

Of late, the paradigm of apply- biggest potential to enable system-As CT examinations always image reconstruction (IR) in CT patient body diameter. For conreconstruction algorithms conse- tube voltage will also enable reduculation settings are concurrently tuning acquisition parameters of

> Optimisation of CT acquisition ity of clinical CT image data on a While all scanner technology cur- 'per acquisition protocol'/'per indirently available should be exploited cation' basis. The evaluation should for reducing the radiation exposure determine whether appropriate

The rapid growth in the number outweighing potentially increased the CT protocol parameters to each should consist of a stepwise optimiof CT examinations over the past noise at lower radiation exposure. specific clinical indication have the sation of each acquisition protocol with the aim to exploit available technology (e.g. automatic exposure control mechanisms, iterative reconstruction algorithms, etc.) while keeping radiation exposure below national diagnostic reference levels (DRLs) and ensuring image quality that is appropriate for the respective indication.

> While dose reduction is imperative in CT, excessive reductions will result in a loss of diagnostic image Imaging Steering Committee.

quality. Therefore, dose reduction of CT examinations in clinical practice is limited by the image quality requirements inherent to each specific diagnostic task to ensure confident diagnosis.

Dr. Wolfram Stiller is a physicist at the University Hospital in Heidelberg, Germany. He is dedicated to research in the field of x-ray computed tomography. He is a member of the ESR Radiation Protection Subcommittee and the EuroSafe

EuroSafe Imaging Session

Thursday, March 1, 10:30–12:00, Room X

EU 2 Strategies for dose reduction in computed tomography. from technical concepts to clinical practice

Chairpersons: W. Stiller; Heidelberg/DE R.W.R. Loose; Nuremberg/DE

- » Chairperson's introduction W. Stiller; Heidelberg/DE
- » Systems for dose reduction in CT:
- more than automated exposure control M. Prokop; Nijmegen/NL
- » Iterative image reconstruction for dose reduction in CT: technical background and concepts for clinical practice P.B. Noël; Munich/DE
- » Dose reduction strategies in paediatric CT E. Castellano; London/UK
- » Adapting protocols towards dose reduction in chest CT D. Tack; Baudour/BE
- » Dose reduction and image quality: when low is too low S.T. Schindera; Aarau/CH

This session is part of the EuroSafe Imaging campaign

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Browse through the posters of the EUROSAFE IMAGING POSTER EXHIBITION in the 'ECR Online & EPOS [™] Lounge' (1 st floor)	And join us at the EUROSAFE IMAGING POSTER PRESENTATION SESSION
to learn more about radiation protection initiatives worldwide.	at the Voice of EPOS [™] stage 1 on Saturday, March 3, 11:00-12:00
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