

EVATUATION OF THE SCAN PROTOCOL IN THE MEASUREMENTS OF CORONARY ARTERY CALCIUM: IMAGE QUALITY



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INTRODUCTION

• The amount of calcium deposits in the coronary arteries is an indirect marker of total atherosclerotic and has been strongly associated with future cardiac events in asymptomatic patients;

• As calcium has high X-ray attenuation, the detection can be easily performed with a gated non-contrasted CT of the heart;

• This procedure increased significantly in recent years, providing great clinical benefit for patients, however the collective dose was increased considerably;

Objective: to evaluate the influence of the tube current applied for studies of calcium score.

MATERIAL AND METHOD

• Institutions: two private clinics of Rio de Janeiro.

- CT Scanners: 64-slice and 256-slice.
- Scan Parameters: 80, 120 and 140 kV and 30 to 220 mAs.

• Phantom: Cardiac phantom (QRM GmbH, Germany), simulating a large adult thorax attenuation:

9 varying size compartments, simulating cardiac calcification $(200, 400 \text{ and } 800 \text{ mg HA/cm}^3)$.

 Agatson and Mass CS: automatically calculated with a dedicated offline software.

• Noise: standard deviation measurement in a ROI placed inside a phantom water compartment.

Radiation dose: DLP obtained in scanner report; E = DLP x 0.014 (conversion factor for chest).







RESULTS AND DISCUSSIONS

2. Mass Score

1. Agatson Score:











256-slice

3. Image noise:





Tube current (mAs)

140

200 mg/cm







CONCLUSIONS: Although noisier images was obtained with the mAs reduction, the diagnostic information was not compromised and the patient dose was reduced around 50%. This studied demonstrated the importance and viability of optimization procedures.

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