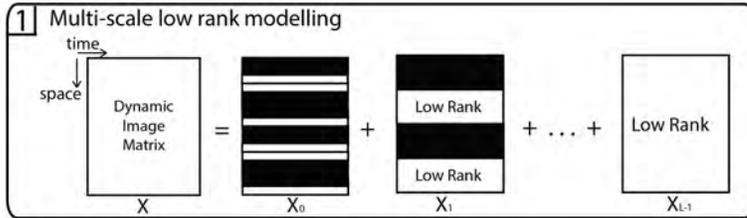


Beyond Low Rank + Sparse: Multi-scale Low Rank Reconstruction for Dynamic Contrast Enhanced Imaging

Frank Ong¹, Tao Zhang², Joseph Cheng², Martin Uecker³, and Michael Lustig³

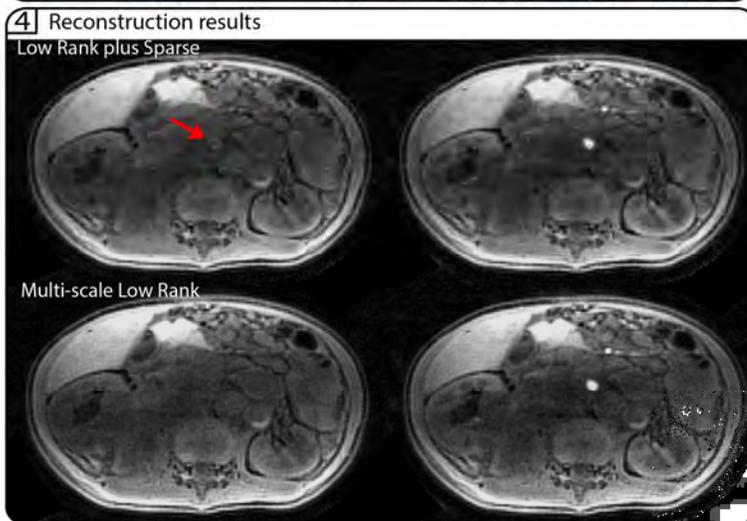
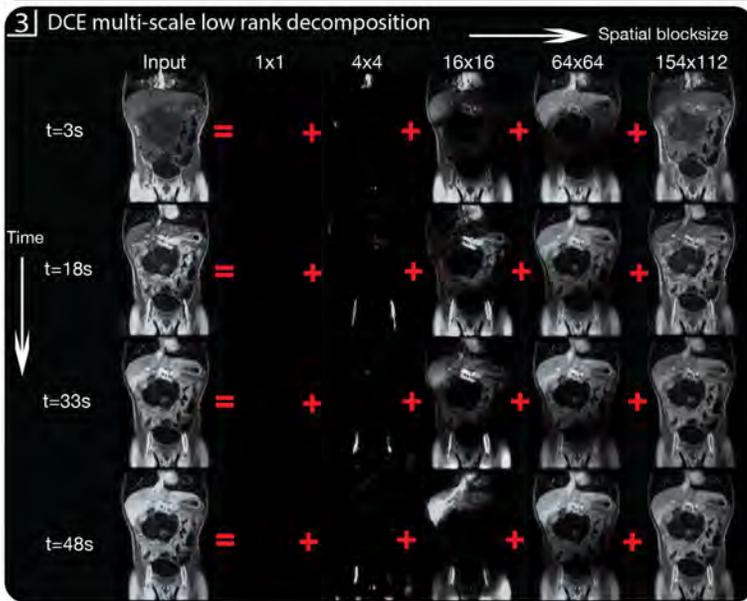
¹Electrical Engineering and Computer Sciences, University of California, Berkeley, Berkeley, California, United States, ²Stanford University, California, United States, ³University of California, Berkeley, California, United States



2 Problem

$$\min_{X_i} \frac{1}{2} \|A \sum_i X_i - Y\|_2^2 + \sum_i \lambda_i \|X_i\|_{(i)}$$

X_i : image matrix at i th scale $\|\cdot\|_{(i)}$: (m_i, n_i) block-wise nuclear norm
 A : sensing matrix Y : kspace matrix λ_i : penalty for i th level $\approx \sqrt{m_i} + \sqrt{n_i}$



TARGET AUDIENCES: Those interested in dynamic imaging, low rank signal modeling, sparse sampling.

PURPOSE: Dynamic Contrast Enhanced (DCE) MRI is a powerful method that can provide comprehensive information to characterize lesions. High temporal resolution is often desired for 3D DCE, but at the cost of lower spatial resolution. Low rank / partial separable methods¹⁻⁴ offer an effective way of balancing this tradeoff by exploiting spatio-temporal correlations of dynamic images. However, existing low rank methods model contrast dynamics either globally, locally or globally with sparsity and do not capture spatio-temporal correlations in intermediate scales. In this work, we present a new multi-scale low rank reconstruction method that can effectively capture spatio-temporal correlations at different scales, thereby providing a more accurate reconstruction.

METHODS: We model contrast dynamics in DCE at different scales as block low-rank matrices over time with different block sizes (Fig. 1). We approach the problem via a convex demixing formulation⁵ and for each block we use the nuclear norm as the convex surrogate for matrix rank (Fig. 2). Penalizing parameters are chosen proportional to the block size. Update steps can be derived using ADMM.⁶

The proposed multi-scale low rank reconstruction is combined with ESPiRiT⁷, a compressed sensing and parallel imaging reconstruction algorithm and was compared with locally low rank³ (8×8 spatial block size) and low rank plus sparse⁴ modeling. To evaluate the reconstruction performance, a free breathing DCE dataset was acquired in a pediatric patient with 18 contrast phases, matrix size 192×156×100, 1×1.4×2 mm³ resolution, and ~8 s temporal resolution. Soft gating was used according to Cheng et al.⁸. The acquisition was performed on a 3T GE MR750 scanner with a 32-channel cardiac array using an RF-spoiled gradient-echo sequence. The total acceleration factor per temporal phase was ~8.

RESULTS AND DISCUSSIONS: Figure 3 shows the result of multi-scale low rank decomposition on a fully sampled dataset over time. Small contrast dynamics in vessels are captured in 4×4 blocks while bigger contrast dynamics in the liver are captured in 16×16 blocks. The biggest block size captures the static tissues and interestingly the respiratory motion. Figure 4 shows the comparison results. Low rank plus sparse reconstruction displays artifacts around the pulsatile flow, which is neither globally low rank nor sparse, but rather locally low rank. Locally low rank reconstruction captures the correct dynamics but exhibits more flickering artifacts (can be viewed at <http://youtu.be/ff-MLrF2oJc>). Multi-scale low rank reconstruction offers a balance between two methods.

CONCLUSIONS: The proposed multi-scale low rank reconstruction exploits spatio-temporal correlations at all scales and provides a more accurate DCE reconstruction. The code will be available online.⁹

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