

## Introduction: Motion Unsharpness

- Most common patient-related artifact\*
- Motion: local/regional or involves the entire breast
- Gross or Subtle

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- Repeats for motion increase radiation dose
- · Potential to miss breast cancer

\*Geiser et al: Challenges in Mammography; AJR:197, December 2011

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## Introduction: Motion Unsharpness

#### 2D Mammography

• Acquisition time is brief

## **3D** Tomosynthesis

- Longer acquisition time
- One image

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- Technologists/radiologists adept at detecting motion
- Repeats are left up to the Technologist
- Captures a moment in time Multiple image data set
  - Images acquired over a
  - period of time • 3D motion occurs at
  - about the same rate as 2D

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## Introduction: Motion Unsharpness

### **Factors contributing to Motion Unsharpness**

- -Inadequate Compression
- Poor Positioning
- Exposure Time
- Patient Movement
- -Heart Motion

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## Tomosynthesis and Motion

#### 3D Motion may be unrealized and unchecked

- Radiologists do not routinely review the projection dataset where motion can be confirmed or ruled-out
- Projection dataset may not be available to the radiologist (BTO)

#### It is up to the technologist to detect motion and repeat when advised

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## Tomosynthesis and Motion

#### Important notes:

- We do not yet understand the full impact of 3D motion on image quality and when repeat is necessary
- Motion can occur at one point, multiple points or through-out the duration of the entire projection series
- Motion can occur at different areas of the breast, which may or may not impact breast tissue
- May affect conspicuity, sharpness of detail

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## Appreciating 3D Motion

#### **Projection Series**

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- The x-ray tube moves in a path parallel to the chest wall
- The resulting breast image(s) and objects should move smoothly along this same pathway
  - Medial to Lateral /Lateral to Medial
- Anterior/posterior movement of the breast images or objects indicates motion

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#### Appreciating 3D Motion: QC Review

- Motion can be visible on both projection & tomosynthesis datasets
- Tomosynthesis Reconstruction
  - More difficult to detect/confirm motion on reconstruction
  - Unsharpness in the tomosynthesis dataset
  - Non-linear movement of calcifications
  - Objects or lesions look sharp in one view, but not the opposing view
- Projection Series

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- Most efficient way to detect motion
- Review series at Selenia<sup>®</sup> Dimensions<sup>®</sup> System

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## **Reviewing Projection Images for Motion**

- Review the Projections
  - -Cine Mode
  - Moderate to fast speed



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# Appreciating 3D Motion: Notes • Chest wall - Movement of the Pectoral Muscle

- Structures that shift in and out of view
- Inframammary fold

#### Abdomen motion

- Determine if it impacts the inferior and posterior breast
- Calcification

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- Should move in a straight line parallel to the chest wall
- More evident with large chunky calcifications
- Axilla

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Lymph Nodes shift back and forth or out of view

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## Engage Patient in Technique

- Inform the patient of the new 3D/2D technology
- Describe the c-arm movement

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- As typical for standard mammography, explain that motion can affect the image
- Instruct the patient in the breathing technique
  - Explain that STOP BREATHING means just that
  - Patient SHOULD NOT take in a breath & hold it

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## **Motion Repeats**

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- The significance of motion unsharpness on Tomosynthesis is not yet known
- How and when to repeat an image should be directed by the supervising radiologist

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