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Quantification of Coronary Artery Calcium Using Dual Energy Subtraction Digital Radiography

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PURPOSE

The computed tomography (CT) calcium score predicts risk of cardiovascular events. However, relatively high cost (\$250-1000) and radiation dose (1-3 mSv) limit its universal utility as a screening tool. Dual Energy Subtraction Digital Radiography is an inexpensive (<\$60) and low radiation technique (0.07 mSv) that enables improved detection of calcified structures when compared to conventional chest radiographs. In this pilot study, we evaluated the feasibility of a coronary artery calcium (CAC) score system based on dual energy subtraction digital radiography (DEDR).

METHOD AND MATERIALS

We identified 39 patients with documented CAC for DEDR scoring who underwent non-contrast CT and DEDR chest imaging performed within 12 months. A semi-automated calcium score system was developed based on pixel intensity multiplied by the area of the region of interest. DEDR scores were plotted against CT scores and a receiver operating characteristic (ROC) curve was performed to determine a DEDR score threshold that predicted a CT score ≥ 400 . A relatively high DEDR score threshold would be chosen in order to maximize positive predictive value (PPV).

RESULTS

The DEDR score yielded a correlation coefficient of 0.87 ($p < 0.0001$) when compared to the CT score. Of all 39 patients in the cohort, 14 had a DEDR score of ≥ 270 , and 26 had a CT score ≥ 400 . This DEDR threshold demonstrated a PPV of 100% and a negative predictive value of 52% in predicting a CT score ≥ 400 .

CONCLUSION

This pilot study supports the hypothesis that DEDR can quantify CAC and correlates with the CT score. DEDR also demonstrates excellent PPV for CT scores ≥ 400 . Further refinement of DEDR as a safe and inexpensive supplemental tool to assess CAC appears warranted.

CLINICAL RELEVANCE/APPLICATION

Although the CT score independently predicts cardiovascular risk, its high cost and radiation dose (1-3 mSv) limit its universal use. DEDR (0.07 mSv) can quantify CAC and correlates with the CT score.