

QIBA Contrast Enhanced Ultrasound (CEUS) Biomarker Committee (BC) Call

Friday, June 8, 2018; 11 AM CT

Call Summary

In attendance			RSNA
Mike Averkiou, PhD (Co-Chair)	Christian Greis, PhD	Shigeto Ono	Joe Koudelik
Todd Erpelding, PhD, MSE (Co-Chair)	Timothy Hall, PhD	Lihong Pan, PhD	Susan Stanfa
Cristel Baiu, MS	Kenneth Hoyt, PhD, MBA	Thierry Rognard	
Paul Carson, PhD	Nancy Obuchowski, PhD	Theresa Tuthill, PhD	

Moderator: Dr. Averkiou

2018 QIBA Annual Meeting Update (Drs. Erpelding & Carson)

- This meeting was held May 15-16 at RSNA Headquarters in Oak Brook, Illinois
- Topics included:
 - Profiles: FDG-PET Profile is the most advanced; pursuing Claim Conformance – provided experience
 - Coordinating Committee updates provided
 - Modality-based breakout sessions
- As federal support from the NIBIB contract has ended, the Sustainability Task Force has been exploring different avenues for funding, which include:
 - Grant applications
 - Modality or BC-specific alliances/collaboration with other organizations or foundations for groundwork support, e.g. ACR, QIN, EIBALL, clinical trial groups
 - QIBA performance certification based on Profiles, DROs, phantoms, etc. are potential revenue streams, but would create new hurdles such as monitoring and managing revenue
 - QIBA consulting, wherein experts within QIBA could volunteer time to sites that want to be QIBA-conformant
- Caution voiced that imaging technology changes rapidly, and QIBA must keep up by identifying Profile stopping points/stages (even at a lower performance bar) to remain relevant
- Consulting with Dr. Obuchowski upfront on approach to study design will lead to a smoother, more efficient process
- Dr. Carson to send Dr. Obuchowski's paper, "Sample size tables for receiver operating characteristics studies," to RSNA staff for distribution

Reproducibility Study Update: Time-Intensity Curves (TIC) Variability Results (Dr. Averkiou)

[Some of the information below was taken from Dr. Averkiou's slide presentation]

- An overview of the CEUS QIBA TIC Phantom construction was provided
- Characterized "ideal TIC" using clinical liver data
 - Liver studies of HCC, metastases, FNH, and normal parenchyma were used
 - Parameters for an "ideal TIC" were determined:
 - RT: ~15-20 seconds
 - MTT: ~30-40 seconds
- Imaging systems used:
 - Philips iU22
 - Phillips EpiQ
 - GE LOGIQ E9
- Imaging analysis software used:
 - MATLAB - LN curve fit

- Vuebox (Bracco) - Proprietary curve fit model
- QLAB (Philips)
- TIC Analysis (GE)
- Linearization & Curve Fitting
 - TIC Analysis or QLAP curve fitting (parameters) were not used at the present time
 - Vuebox has “proprietary” curve fitting algorithm
 - Vuebox gets linearized data directly from GE DICOM files; however, Vuebox experimentally determines calibration files to derive linearized data from Philips DICOM files
- Dr. Averkiou to follow up with Dr. Obuchowski regarding assessing model fit and how to analyze the data; data will be made available for committee use soon after
- Study 2: SonoVue
 - Protocol
 - CEUS QIBA TIC flow phantom setup; solution was described
 - Included three days of experiments per system with five trials per day and same diluted solution for all trials
 - Settings for the following systems and transducers were outlined
 - iU22 C5-1
 - EpiQ C5-1
 - GE LOGIQ E9 C1-6VN
 - All three systems were tested each day over the three days of experiments
 - The contrast timer was used to time trials

WebEx Calls: **June 8:** US CEUS BC **June 29:** US Coordinating Cmte **July 13:** CEUS BC **July 27:** SWS BC

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