

The Quantitative Imaging Biomarkers Alliance (*QIBA*) was organized by RSNA in 2007 to unite researchers, healthcare professionals, and industry stakeholders in the advancement of quantitative imaging and the use of biomarkers in clinical trials and practice.

Quantitative imaging is the acquisition, extraction and characterization of relevant quantifiable features from medical images for use in research and patient care. Standardizing the use of imaging biomarkers in clinical trials will reduce the variance inherent across different hardware and software platforms. RSNA views this work as a step toward an ultimate goal of enhancing the use of quantitative imaging methods in clinical practice.

QIBA is an important part of RSNA's commitment to transforming radiology from a *qualitative* to a more *quantitative* science and to the improved patient care resulting from accelerated development and dissemination of new pharmacologic, biologic and interventional diagnosis and treatment approaches.

QIBA Mission

Improve the value and practicality of quantitative imaging biomarkers by reducing variability across devices, patients and time.

The work of QIBA has advanced through the generous efforts of volunteer members from academia, the medical device industry, the pharmaceutical and other business sectors, and government. There are eight biomarker committees – **CT Volumetry, Lung Density, fMRI, Perfusion, Diffusion and Flow–MRI, FDG-PET/CT, PET-Amyloid, MRE, and Ultrasound Shear Wave Speed** open to all interested persons. These Committees have specific tasks and deliverables for their respective modalities and disease-based approach. A ninth committee, **SPECT**, is currently under consideration.

The QIBA Approach

The work of the QIBA Committees follows a defined, coordinated process to develop solutions and promote their adoption.

I. Identify Sources of Error and Variation in Quantitative Results from Imaging Methods. Stakeholders work to identify problems leading to error or variability in quantitative results from imaging methods.

II. Specify Potential Solutions. Stakeholders identify potential strategies and infrastructure for error mitigation and collaborate on development of hardware, software, and protocol solutions, documenting them in the form of QIBA Profiles.

III. Test Solutions. Vendors and researchers implement QIBA solutions to assess their feasibility and efficacy.

IV. Promulgate Solutions. Validated solutions are disseminated and implemented through vendor adoption, research integration and clinical education.

QIBA Resources

QIBA meeting summaries, key criteria for identifying biomarker opportunities, the *QIBA Newsletter* and other documents are available on the QIBA website RSNA.ORG/QIBA and wiki <http://qibawiki.rsna.org/>

Volunteers for the QIBA Committees are welcome; please contact us at: qiba@rsna.org

QIBA Committees

QIBA Governance Structure

QIBA Chair:	Daniel C. Sullivan, MD	(Duke University Medical Center / RSNA Science Advisor)
QIBA Vice-Chair:	Edward F. Jackson, PhD	(University of Wisconsin, School of Medicine & Public Health)
QIBA Program Director:	Andrew J. Buckler, MS	(Elucid Bioimaging, Inc.)
QIBA Program Advisor:	Kevin O'Donnell, MASc	(Toshiba Medical Research Institute USA, Inc.)
Scientific Liaison: CT:	Andrew J. Buckler, MS	(Elucid Bioimaging, Inc.)
Scientific Liaison: MR:	Edward F. Jackson, PhD	(University of Wisconsin, School of Medicine & Public Health)
Scientific Liaison: NM:	Paul E. Kinahan, PhD, FIEEE	(University of Washington)
Scientific Liaison: US:	Paul L. Carson, PhD	(University of Michigan Health System)

Coordinating Committees

Computed Tomography (CT) Coordinating Committee

Chair:	Greg Goldmacher, MD, PhD	(ICON Medical Imaging Inc.)
Vice Chair:	Larry Schwartz, MD	(New York Presbyterian Hospital/Columbia University)

Nuclear Medicine (NM) Coordinating Committee

Chair:	Richard Wahl, MD	(Mallinckrodt Inst., Washington University)
Vice Chair:	Eric Perlman, MD	(Perlman Advisory Group, LLC)

Magnetic Resonance Imaging (MR) Coordinating Committee

Co-Chairs:	Alex Guimaraes, MD, PhD	(Oregon Health Sciences University)
	Gudrun Zahlmann, PhD	(Roche Pharmaceuticals)
Vice Chair:	Cathy Elsinger, PhD	(NordicNeuroLab, Inc.)

Ultrasound (US) Coordinating Committee

Chair:	Tim Hall, PhD	(Univ. of Wisconsin, Madison)
Vice Chair:	Brian Garra, MD	(Washington DC VA Medical Center/FDA)

Process Coordinating Committee

Chair:	Kevin O'Donnell, MASc	(Toshiba Medical Research Institute USA, Inc.)
Vice Chair:	Daniel Sullivan, MD	(Duke University Medical Center)

Biomarker Committees (by imaging modality)

CT Volumetry

Co-Chairs:

Samuel G. Armato III, PhD	(University of Chicago)
Gregory V. Goldmacher, MD, PhD	(ICON Medical Imaging)
Jenifer Siegelman, MD, MPH	(Harvard Medical School Brigham and Women's Hospital)

Lung Density

Chair:

Philip F. Judy, PhD	(Brigham and Women's Hospital and Harvard Medical School)
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Perfusion, Diffusion and Flow - MRI

Co-Chairs:

Michael Boss, PhD	(NIST)
John Kirsch, PhD	(Siemens Medical Solutions USA, Inc.)
Mark Rosen, MD, PhD	(University of Pennsylvania)

fMRI

Co-Chairs:

Edgar DeYoe, PhD	(Medical College of Wisconsin)
Jeffrey Petrella, MD	(Duke University Medical Center)
James Reuss, PhD	(Prism Clinical Imaging, Inc.)

MRE

Patricia Cole, PhD, MD	(Takeda Pharmaceuticals)
Richard Ehman, MD	(Mayo Clinic)

FDG-PET

Co-Chairs:

Rathan Subramaniam, MD, PhD, MPH	(Johns Hopkins University School of Medicine)
John J. Sunderland, PhD	(University of Iowa)
Scott Wollenweber, PhD	(GE Healthcare)

PET-Amyloid

Co-chairs:

Satoshi Minoshima, MD, PhD	(University of Utah)
Eric Perlman, MD	(Perlman Advisory Group, LLC)
Anne Smith, PhD	(Siemens Medical Solutions USA, Inc.)

SPECT (proposed)

Leaders TBD

Ultrasound Shear Wave Speed

Co-Chairs:

Brian Garra, MD	(Washington DC VA Medical Center / FDA)
Timothy J. Hall, PhD	(University of Wisconsin, School of Medicine & Public Health)
Andy Milkowski, MS	(Siemens Healthcare)
