ALZHEIMER'S QUASSOCIATION ALZHEIMER'S ASSOCIATION INTERNATIONAL CONFERENCE® JULY 16-20 > AMSTERDAM, NETHERLANDS, AND ONLINE

ISTAART Neuroimaging PIA THE BASICS OF NEUROIMAGING SEMINAR SERIES

ISTAART Neuroimaging PIA The Basics of Neuroimaging Series

ALZHEIMER'S PLASSOCIATION

BASICS OF NEUROIMAGING Positron Emission Tomography (PET) DR TOBEY BETTHAUSER UNIVERSITY OF WISCONSIN-MADISON, MADISON, WI, USA



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ALZHEIMER'S MASSOCIATION ALZHEIMER'S MASSOCIATION PAST PRESENTATIONS REFERENCED

Basics of Neuroimaging: Data Structure and Formats Dr. Ludovca Griffanti

ALZHEIMENS 90 ASSOCIATION NEUROIMAGING DATA ANALYSIS: A GENERIC BLUEPRINT



Basics of Neuroimaging: Structural MRI Dr. David Cash



Available On-Demand soon at: https://training.alz.org/research-webinars

Learning Objectives

By the end of this session, you should be able to:

- Understand the differences between PET imaging and other modalities
- Understand how PET imaging data is collected and image are created
- Perform basic PET imaging processing and quantification for tracers commonly used in ADRD

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Basics of PET Imaging

- How is PET different from other techniques?
- What is a PET tracer?
- How do we get an image?
- How do we quantify PET?

PET Image Processing

- MR-guided
- PET-Only
- Other Considerations

ALZHEIMER'S RUASSOCIATION[®] Introduction – Basics of PET

- How is PET different from other imaging modalities?
- What is a PET tracer?
- How do we get a PET image?
- How do we quantify PET?

How is PET different from other techniques?

Microscopy



~µm resolution Beta-amyloid plaque Neurofibrillary tau tangle

~1 mm resolution Brain Volume and Anatomy ~4-6 mm resolution Biology/Physiology





How is PET different from other techniques?

Some things PET can measure:

- Binding potential (proportional to receptor density)
- Rate Constants (e.g., influx/efflux from/to plasma and tissue, binding to and dissociation from target)
- Tissue Perfusion and Relative Perfusion
- Receptor Occupancy
- Metabolic Rate (FDG)

Low Spatial Resolution, High Molecular Specificity



~4-6 mm resolution Binding Potential

What is a PET tracer?

 A molecule we want to image with a positron emitting isotope attached (i.e., <u>radiolabeled</u>)



Water as a PET tracer of Perfusion



What is a PET tracer?

- A molecule we want to image with a positron emitting isotope attached (i.e., <u>radiolabeled</u>)
- A <u>radioactive isotope</u> is a form of an element (e.g., carbon) with an unstable nucleus that undergoes radioactive decay



What is a PET tracer?

- A molecule we want to image with a <u>positron emitting isotope</u> attached (i.e., <u>radiolabeled</u>)
- A <u>radioactive isotope</u> is a form of an element (e.g., carbon) with an unstable nucleus that undergoes radioactive decay
- Match radioactive half-life to biological process we're trying to detect





¹⁸F

Different PET tracers for different targets

| Table 2.1 Description of the second construction of the second consecond construction of the second construct | Brain I maging and Behavior (201 | 19) 13:354–365 | | 359 | 360 | | | Brain Imaging and Behavior (2019) 13:354-365 |
|--|--|---|---|---|---------------------|--|---|--|
| $ \begin{array}{c c c c c c c c c c c c c c c c c c c $ | Table 5 Representative examp | ples of radiotracers for CNS a | plications that have shown utility in hu | mans | Table 5 (continued) | Table 5 (continued) | | |
| p. Auguid [11:799 [11:799-auguid < | Targets Misfolded proteins | Carbon-11 labelled | Fluroine-18 labeled | Comments | Targets | Carbon-11 labelled | Fluroine-18 labeled | Comments |
| subset Information of the second se | β-Amyloid | [11C]PIB | [18F]Flutemetamol | | mGluR 1 | | [18F]FITM | |
| Ta Improvementation of a second provide provide a second provide of a second provide provide a second provide of a second provi | | | [18F]Florbetapir([18F]AV-45) [18F]AZD 4694 | | mGluR5 | [11C]SP 203 | [18F]SP 203 | |
| Ta Note:(a) III (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) | | | [18F]FBM [18F]FDDNP [18F]-SMIBR-W372 ([F-18]-W372) | | Nicotinic (a4β2) | [IIC]ABP688 | [18F]F-FPEB 2-[18F]F-A-85380 (2-[18F]FA) 6-[18F]FA [18F]Nifen e (agonist) [18F1AZAN | |
| Tai III TOT VLVIST, Review IIII Tot VLVIST, Review IIIII Tot VLVIST, Review IIIII Tot VLVIST, Review IIIII Tot VLVIST, Review IIIII Tot VLVIST, Review IIIIII Tot VLVIST, Review IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII | | | [18F]Florbetaban [18F]MK3328 | | Nicotinic (a7) | | [11C]CHIBA-1001 | |
| Import NMAX Import Rome NoP Integers Prove Pr | Tau | | [18F] T807 (AV1451; Flortaucipir) [18F]GTP1 | Relative sensitivity to 3-repeat to 4-repeat tau isoforms remains to be confirmed. | NKI | | [18F]ASEM [18F]SPA-RQ [18F]MK-0999 ([18F]FF-SPA-RO) | |
| 1879-1500 1000-1500 1 | | | [18F]RO6958948 [18F]MK6240 | | NMDA | | [18F]GE-179 | |
| Harrie of the series of the serie | | | [18F]PI-2620 | | NOP | [11C]NOP-1A | | |
| Amministration and detailed (ALC):- F1879-LDDR (MDM) Unit sease depuise growing as apply advantage providing as apply advantage p | Enzymes | | | | Opiate (DOR) | [11C]Methylnaltrindole | | |
| ADD [Juc] SM4 Functional dopuminergin galaxy. Signal 1 [Juc] SM4000000000000000000000000000000000000 | Aromatic amino acid decarboxylase (AADC). | | 6-[18F]-L-DOPA (FDOPA) | Used to assess dopamine synthesis capacity and storage; providing an indirect measure of functional integrity | Opiate (MOR) | [11C]Diprenorphine [11C]Carfentanil (agonist) [11C]CLY2795050 (antagonist) | [18F]Fluoroethyl-diprenorphine | |
| ACM [1/C]MP4 Transporter Aconstate [1/C]MP4 DT [1/C]MP4/sphesikale [1/F]FF-P21 FAAH [1/C]CMP3 [1/C]MP3/sphesikale [1/F]FF-P21 [1/F]FF-P21 MAOA [1/C]MP3/sphesikale [1/C]MP3/sphesikale [1/F]FF-P21 [1/F]FF-P21 MAOA [1/C]MP3/sphesikale [1/C]MP3/sphesikale [1/F]FF-P21 [1/F]FF-P21 MAOA [1/C]MP3/sphesikale [1/F]FF-P21 [1/F]FF-P21 [1/F]FF-P21 MAOB [1/C]MP3/sphesikale [1/F]FF-P21 [1/F]FF-P21 [1/F]FF-P21 MAOB [1/C]MP3/sphesikale [1/F]FF-P21 [1/F]FF-P21 [1/F]FF-P21 PDF [1/C]MP3/sphesikale [1/F]FF-P21 [1/F]FF-P21 | | | | of the nigrostriatal dopaminergic pathway. | Sigma 1 | [11C]SA4503 | | |
| Anomate FANH[11C]V08Interplay [11C]Methydination[18FPFR7] [11F]Methydination[18FPFR7] [18FPFN7]MADA [11C]Methydination[11C]Hamity [11C]Methydination[18FPFN7] [11C]Met | AChE | [11C]MP4A | | | Transporters | | | |
| FAM [11]CR08 [11] | Aromatase | [11C]VOR | | | DAT | [11C]PE2I | [18F]FP-CIT | |
| MACA [11]Classic [11 | FAAH | [11C]CURB | | | | [11C]Methylphenidate | [18F]FE-PE2I | |
| MAOB [11C]Pareovi-G May be used as a marker of satrocytes NT [11C]RAD0333 [MAVBAR2-42] PDEI A [11C]MA107 [11C]MA107 [11C]MA107 [11C]MA107 [INFPMARE-42] SRT [IIC]MA107 [11C]MARADAM PDEI A [11C]MA107 [11C]MA107 [INFPMARE-42] SRT [IIC]MA107 [11C]MA10A Ferrica Regions INCENTIONAL [IIC]MA107 [IIF]PRANE-42] SRT [IIC]MA10A Admosine AJ [IIC]SH44316 [IIF]PMARE-42] SRT [IIC]MA10A microgina activation, but stages on sinistry to change in close on sinistry (IIG]MA10A [IIF]PRANE-42] SRT [IIF]PRANE-42] CARAA (alpha SPERIN] [IIF]PMARE-42] IIIC]MA106 [IIF]PMA116 state remain sucks of IIIC]MA10A state remain sucks of IIIC]MA10A state remain sucks of IIIC]MA10A IIIE]PMA-714 state remain sucks of IIIE]MA10A state remain sucks of IIIE]MA10A state remain sucks of IIIE]MA10A IIIE]MA10A IIIE]MA10A state remain sucks of IIIE]MA10A state remain sucks of IIIE]MA10A IIIE]MA10A state remain sucks of IIIE]MA10A IIIE]MA10A state remain sucks of IIIE]MA10A IIIE]MA10A IIIE]MA10A IIIE]MA10A IIIE]MA10A IIIE]MA10A <t< td=""><td>MAO-A</td><td>[11C]Harmine [11C]Clorgyline [11C]Befloxatone</td><td></td><td></td><td>Glycine T1</td><td>[11C]CFpyPB [11C]GSK 931145</td><td>[18F]FECN1 [18F]CFPyPB</td><td></td></t<> | MAO-A | [11C]Harmine [11C]Clorgyline [11C]Befloxatone | | | Glycine T1 | [11C]CFpyPB [11C]GSK 931145 | [18F]FECN1 [18F]CFPyPB | |
| PDF4 [110](NB-Religam The Total and Tot | MAO-B | [11C]Deprenyl-d2 | | May be used as a marker of astrocytes | NET | [11C]R05013853 [11C]MeNER-d2 | [18FIFMeNER-d2 | |
| PDEI0A [LIC]MAI07 [LIFJMN859 IIC]MAI07 [LIFJMN859 Bit Control IIC IIC Advance IIC < | PDE4 | [11C](R)-Rolipram | | | SERT | TICIDASB | [] | |
| Beepton IIC/INFORMATION IIC/INFORMATION Commonly referred to as an arker of microgia sciencing without to taget sensitivity. The probability of taget sensitity. The probability of taget sensitity. The probability of taget se | PDE10A | [11C]IMA107 [11C]MP-10 [11C]Lu AE92686 | [18F]MNI659 | | | [11C]MADAM [11C]AFM | | |
| Advanie AlINFOInformation of the pression o | Receptors | [Inclustication of the second s | | | TERO | [11C]HOHMADAM | I SETE DB | Community of formal to an a market of |
| Adaoxie A2A [11G]CH443/6 [11F]PM144 to danges in off number visua activation GABAA [11G]DAA1106 [11F]PM2713 [11F]PM2713 to danges in off number visua activation GABAA (alpla 5 prefinity) [11C]DR415413 [11C]DR415413 [11C]DR4176 istate remain unckar CBB [11C]DR478 [11F]PM2714 [11C]DR478 [11C]DR478 istate remain unckar CBB [11C]DR478 [11F]PM2713 [11C]DR478 [11C]DR478 istate remain unckar CBB [11C]DR478 [11F]PM2713 [11C]DR478 [11C]DR478 istate remain unckar D1 [11C]DR478 [11F]PM2713 [11C]DR478 [11C]DR478 [11C]DR478 [11C]DR478 D2/D3 [11C]DR478 [11F]PA178 [11C]DR478 | Adenosine A1 | | [18F]CPFPX | | ISFO | [11C]/R/-PK 11195 | [18F]FEPPA | microglia activation, but target sensitivity |
| GABAA [11G]Pumeenil | Adenosine A2A | [11C]SCH442416 | [18F]MNI444 | | | [11C]DAA1106 | [18F]PBR111 | to changes in cell number versus activation |
| CABAAA (alpha Spredming) ILIG/DBL78 ILIG/DBL78 ILIG/DBL78 ILIG/DBL78 CBI ILIG/DBC4FPEP ILIFFEAMEP-d2 ILIG/DBC4 ILIFFIAMEP-d2 ILIFFIAMEP-d2 D1 ILIG/DBC4 ILIG/DBC4 ILIFFIAMEP-d2 ILIFFIAMEP-d2 ILIFFIAMEP-d2 D1 ILIG/DBC4 ILIG/DBC4 ILIFFIAMEP-d2 ILIFFIAMEP-d2 ILIFFIAMEP-d2 D2/D3 ILIG/DBC4 ILIFFIAMEP-d2 ILIFFIAMEP-d2 ILIFFIAMEP-d2 ILIFFIAMEP-d2 D2/D3 ILIG/DBC4 ILIFFIAMEP-d2 ILIFFIAMEP-d2 ILIFFIAMEP-d2 Orgen utilization ILIG/DBC4 ILIG/DBC4 ILIFFIAMEP-d2 ILIFFIAMEP-d2 Orgen utilization ILIG/DBC4 ILIG/DBC4 ILIG/DBC4 Orgen utilization Orgen utilization ILIG/DBC4 ILIG/DBC4 ILIG/DBC4 Patch symbolics Moto ILIG/DBC4 ILIG/DBC4 ILIG/DBC4 Patch symbolics Moto ILIG/DBC4 ILIG/DBC4 ILIG/DBC4 ILIG/DBC4 Moto ILIG/DBC4 ILIG/DBC4 ILIG/DBC4 ILIG/DBC4 ILIG/DBC4 SHT1A ILIG/DBC4 ILIF/DAC4 | GABAA | [11C]Flumazenil | [18F]Flumazenil | | | [11C]DPA-713 | [18F]DPA-714 | state remain unclear. |
| CBI ILIQMEPEP [INFJMARA 2] [INFJMARA 2] [INFJMARA 2] DI ILIQMAR 2] [INFJMARA 2] [INFJMARA 2] [INFJMARA 2] D1 ILIQMAR 2] [INFJMARA 2] [INFJMARA 2] [INFJMARA 2] D2/D3 ILIQMARA 2] [INFJMARA 2] [INFJMARA 2] [INFJMARA 2] D2/D3 ILIQMARA 2] [INFJMARA 2] [INFJMARA 2] Over utilization D2/D3 ILIQMARA 2] [INFJMARA 2] Over utilization Over utilization D2/D3 ILIQMARA 2] [INFJMARA 2] Over utilization Over utilization D2/D3 ILIQMARA 2] [INFJMARA 2] Over utilization Over utilization D2/D3 ILIQMARA 2] [INFJMARA 2] Over utilization Over utilization D2/D3 ILIQMARA 2] [INFJMARA 2] Over utilization Over utilization D1/D4 ILIQMARA 2] [INFJMARA 2] Over utilization Over utilization D1/D4 ILIQMARA 2] [INFJMARA 2] Marker of synaptic density Marker of synaptic density H1 ILIQMARA 2] [INFJMARA2] [INFJMARA2] INFJMARA2] INFJMARA2] | GABAA (alpha 5 preferring) | [11C]Ro15 4513 | | | VMAT2 | [IIC]ERI/6 | [18F]florbenazine | |
| ILICIONAR [IEFFPLOTEZ ILICIONAL Other DI ILICIPACIUS DI ILICIPACIUS DI ILICIPACIUS D2/D3 [IEFFPLOTEZ D1 ILICIPACIUS D2/D3 [IEFFPLOTEZ D1 ILICIPACIUS D2/D3 [IEFFPLOTEZ D1 [IEFFPLOTEZ D2/D3 [IEFFPLOTEZ D2/D3 [IEFFPLOTEZ D1 [IEFFPLOTEZ D2/D3 [IEFFPLOTEZ D2/D3 [IEFFPLOTEZ D2/D4 [IEFFPLOTEZ D1 [IEFFPLOTEZ D2/D5 [IEFFPLOTEZ D2/D5 [IEFFPLOTEZ D1 [IEFFPLOTEZ | CBI | [11C]MePPEP | [18F]FEMMEP-d2 | | | [11C]MTBZ | [18F]AV-133 | |
| D1 11Cl Solver 11Cl | | [11C]OMAR | [18F]MK-9470 | | 21 | | [18F]FP-DTBZ | |
| D2/D3 ICIS/CT 2330 Console dilutation D2/D3 ICIS/CT 2330 Outgoot dilutation ICIS/CT 2330 ISP/LAD Outgoot dilutation ICIS/CT 2330 ISP/LAD Blod flow ICIS/CT 2330 SV2a ICIC/CB-J H0 ICIS/CT 2330 Marker of synaptic density H3 ICIS/CT 2334 INFJP/CWAY ICIC/CMI (agaid) INFJP/CWAY INFJP/CWAY ISP/LOB/S1CDWAY INFJP/CWAY INFJP/CWAY ICIC/CMI (agaid) INFJP/FWAY ICIC/CMI (agaid) INFJP/FWAY ICIC/CMI (agaid) INFJP/FWAY ICIC/CMI (agaid) INFJP/FWAY S+HT1A ICIC/CMI (agaid) INFJP/CMAY INFJP/FWAY S+HT2A ICIC/CMI (agaid) INFJP/FWAY INFJP/FWAY S+HT2A ICIC/CMI (agaid) INFJP/FWAY INFJP/FWAY S+HT6 ICIC/CMI (agaid) <td< td=""><td>DI</td><td>[11C]SD5024 [11C]NNC 112</td><td></td><td></td><td>Other</td><td></td><td>HAPPED-C</td><td>Change and the state</td></td<> | DI | [11C]SD5024 [11C]NNC 112 | | | Other | | HAPPED-C | Change and the state |
| D2/D3 [1:GRzeboridz [1:GRZeboridz] [1:GRzeboridz] Ovygett tatilization [1:GNZeboridz] Ovygett tatilization [1:GNZeboridz] H1 [1:GNZeboridz] [1:GNZeboridz] Biol dow [1:GNZeboridz] Mexic regularization [1:GNZeboridz] Mexic regularization [1:GNZeboridz] <td< td=""><td></td><td>[11C]SCH 23390</td><td></td><td></td><td></td><td>116010</td><td>[18F]FDG</td><td>Grucose utilization</td></td<> | | [11C]SCH 23390 | | | | 116010 | [18F]FDG | Grucose utilization |
| 11 Clopenial in the second of the second | D2/D3 | [11C]Raclopride | [18F]Fallypride | | | [150]0xygen | | Oxygen utilization Blood flow |
| 11/10/ePHN0 (agoids) 11/10/excele PMeler of Symphic density 11/10/excele PMeler of Symphic density PMeler of Symphic density HI 11/10/excele MCI [11/10/excele PMeler of Symphic density HI 11/10/excele [11/10/excele MCI [11/10/excele PMeler of Symphic density HI 11/10/excele [11/10/excele [11/10/excele MCI [11/10/excele PMeler of Symphic density HI [11/10/excele [11/10/excele [11/10/excele MCI [11/10/excele PMeler of Symphic density HI [11/10/excele [11/10/excele [11/10/excele MCI [11/10/excele PMeler of Symphic density HI [11/10/excele [11/10/excele [11/10/excele MCI [11/10/excele PMeler of Symphic density SHTIA [11/10/excele [11/10/excele [11/10/excele [11/ | | [11C]FLB 457 [11C]MNPA (agonist) | | | | [150]waer | | Bioto now |
| II ClyDRA (agering) SVAI [IIC]ORA-19 Status for symptocidating H1 IIC]ORX189254 [IISF]PKH3 [IISF]PKH3 H3 [IIC]ORX189254 [IISF]PKH3 [IISF]PKH3 SHTIA [IIC]ORX189254 [IISF]PKH3 SHTIA [IISF]PKH47 [IISF]PKH47 SHTIA [IISF]PKH47 [IISF]PKH47 SHTIA [IISF]PKH47 SHTIA [IISF]PKH477 SHTIA [IISF]PKH477 SHTIA [IISF]PKH477 SHTIA [IISF]PKH477 SHTIA [IISF]PKH477 SHTIA [IIC]OND L000007 [IISF]PKH477 [IISF]PKH477 SHTIA [IIC]OND L000007 [IISF]PKH474 [IIC]OND L000007 SHTIA [IIC]OND L000007 <td< td=""><td></td><td>[11C](+)PHNO (agonist)</td><td></td><td></td><td>612-</td><td>[11C]Jeucine</td><td></td><td>Protein synthesis</td></td<> | | [11C](+)PHNO (agonist) | | | 612- | [11C]Jeucine | | Protein synthesis |
| HI [IIC]Daxpin [INF]CHAPE and Complex Formats (INF]CHAPE and C | | [11C]NPA (agonist) | | | SV2a MCI | [IIC]UCB-J | INFIDCED FE | Marker of synaptic density Mitrohondrial complant I density |
| H3 [IICGK18/274] [IBF/HI5 SHTTA [adversif1C[TWAY [IICGK18/27]] SHTTA [IICGK18/27] [IICGK18/27] SHTTA [IICGK18/27] [IICGK18/27] SHTTA [IICGK19/27] [IICGK19/27] [IICGK19/27] [IIF]Altaserin [III]A] SHTTA [IICGK21983] | HI | [11C]Doxepin | | | MCI | | [Ior]DCIT-IE | sinochondrial complex 1 density |
| S-HTIA [Lathows/H1C/WAY [Lathows/H1C/WAY] [LiFJA/WAY] S-HTIB [LiC/CMI (agains) [LiFJA/WAY] S-HTIA [LiC/SMD L000907 [LiFJA/Lauserin-42] S-HTTA [LiC/SMD L000907 [LiFJA/Lauserin-42] S-HTTA [LiC/SMD L000907 [LiFJA/Lauserin-42] | H3 | [11C]GSK189254 [11C]GR 103545 | [18F]FMH3 | | | | | |
| s-HTTB [IIIGAZION598] [IIIGAZION598] S-HTZA [IIIGN0L009997 [ISF]Altasseita S-HTT4 [IIIGN0L00997 [ISF]Altasseita S-HT6 [IIIGN0L00997]ISF]Altasseita S-HT6 [IIIGN0L00997]ISF]Altasseita S-HT6 [IIIIGN0L00997]ISF]Altasseita S-HT6 [IIIIGN0L00997]ISF]Altasseita S-HT6 [IIIIGN0L00997]ISF]Altasseita S-HT6 [IIIIGN0L00997]ISF]Altasseita S-HT6 [IIIIIGN0L00997]ISF]Altasseita S-HT6 [IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII | 5-HTIA | [carbonyl-11C]WAY [carbonyl-11C]DWAY [11C]CUMI (aconist) | [18F]FCWAY [18F]MefWAY [18F]MPPE | | | | | |
| SHT2A [I1C]MDL 100097 [INF]Altasseria SHT74 [I1C]SR-207148 [INF]Altasseria-2] SHT6 [I1C]SR-207148 SHT6 [INF]Altasseria-2] SHT6 [I1C]SR-207148 SHT6 [INF]Altasseria-2] | 5-HTIB | [11C]AZ10419369 [11C]P943 | Loulants | | | | | |
| SHT4 [110]SB-207146 SHT6 [110]SB-207146 SHT6 [110]SB-207146 SHT6 [110]SB-207146 | 5-HT2A | [11C]MDL 1000907 | [18F]Altanserin | | | | | |
| | 5.HT4 | [11C1SB-207145 | [18F]Altanserin-d2 | | Suridian et a | al Brain Im- | l hae naine | Rehavior 2010 |
| | 5-HT6 | [11CIGSK-215083 | | | Sunujan, et e | | aying anu i | |

Common Targets and Tracers for ADRD

Brain Imaging and Behavior (2019) 13:354-365

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| Targets Misfolded proteins | Carbon-11 labelled | Fluroine-18 labeled | Comments |
|-------------------------------|---|---|---|
| β-Amyloid | [11C]PIB | [18F]Flutemetamol [18F]Florbetapir([18F]AV-45) [18F]AZD 4694 [18F]FBM [18F]FDDNP [18F]FDDNP [18F]-SMIBR-W372 ([F-18]-W372) [18F]Florbetaban | |
| Tau | | [18F]MK3328 [18F] T807 (AV1451; Flortaucipir) [18F]GTP1 [18F]RC6958948 [18F]MK6240 [18F]PL5620 | Relative sensitivity to 3-repeat to 4-repeat tau isoforms remains to be confirmed. |
| TSPO | [11C](R)-PK 11195 [11C]PBR28 [11C]DAA1106 [11C]DPA-713 [11C]ER176 | [18F]FBR [18F]FEPA [18F]PBR111 [18F]DPA-714 | Commonly referred to as a marker of microglia activation, but target sensitivity to changes in cell number versus activation state remain unclear. |
| SV2a | [IIC]UCB-J | [18FIFDG | Marker of synaptic density Glucose utilization |
| | [150]water | Line he was | Blood flow |

Table 5 Representative examples of radiotracers for CNS applications that have shown utility in humans

Suridjan, et al. Brain Imaging and Behavior. 2019

Common Targets and Tracers for ADRD

Brain Imaging and Behavior (2019) 13:354–365

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Suridjan, et al. Brain Imaging and Behavior. 2019

Amyloid and Tau Tracers

Alzheimer's Disease Pathology

- A = Amyloid-beta plaques
- T = Tau neurofibrillary tangles



Nelson, et al. *J Neuropathol Exp* Neurol. 2012

Amyloid and Tau Tracers

Alzheimer's Disease Pathology

- A = Amyloid-beta plaques
- T = Tau neurofibrillary tangles



Nelson, et al. *J Neuropathol Exp* Neurol. 2012

PiB binds to insoluble, fibrillar beta-amyloid aggregates

| Plaque type | 6-CN-PiB intensity | X-34 intensity | |
|------------------------------|--------------------|----------------|--|
| Compact/cored (NC, PhG, Cr | bl) | | |
| Neuritic | ++++ | ++++ | |
| Non-neuritic | ++++ | ++++ | |
| Diffuse | | | |
| Amorphous (NC, PhG) | ++ | ++ | |
| Cloud-like (Str) | ++ | ++ | |
| Fleecy (Crbl) | 0 | ++ | |
| Non-plaque amyloid | 6-CN-PiB intensity | X-34 intensity | |
| Vascular | ++++ | ++++ | |
| Neurofibrillary tangles iNFT | + ^a | ++++ | |
| Neurofibrillary tangles eNFT | +++ | ++++ | |
| Neuropil threads | 0 | ++++ | |
| Dystrophic neurites | 0 | ++++ | |

 $\begin{array}{l} 0 = no \ 6-CN-PiB \ fluorescence \ signal; + = very \ light fluorescence \ barely \ above \ backgrounds; ++ = light fluorescence; \\ +++ = moderate \ fluorescence; +++ = nitense \ fluorescence. \\ NC = neocortex; \ PhG = parahippocampal \ gyrus; \ Str = striatum; \\ Crbl = corebellum; \ iNFT = intracellular \ NFT; \ eNFT = extracellular \\ NFT. \end{array}$

^aOnly a small proportion of tangles per section detected in entorhinal cortex and subiculum.



.01 .1 1 2 3 4 5 6 7+ 6-CN-PIB Plaque Load (% area)

Ikonomovic, et al. Brain. 2008

Amyloid and Tau Tracers

Alzheimer's Disease Pathology

- A = Amyloid-beta plaques
- T = Tau neurofibrillary tangles



Nelson, et al. *J Neuropathol Exp* Neurol. 2012 MK-6240 binds to insoluble tau aggregates: neurofibrillary tangles, neuritic pathology, neuritic plaques



Betthauser, Ikonomovic, et al. HAI 2023 (unpublished)

Amyloid and Tau Tracers



Therriault, et al. Nature Aging, 2022

Amyloid and Tau Tracers



Therriault, et al. Nature Aging, 2022

PET-measured AD pathology, especially tau, associates with cognitive deficits



Johnson KA, et al. Annals of Neurology, 2015

Amyloid and Tau Tracers



Therriault, et al. Nature Aging, 2022



Betthauser, et al. Brain, 2020

ALZHEIMER'S N ASSOCIATION AAC 23 FDG PET



Grothe, et al. Alz & Demen. 2022

FDG hypometabolic spatial patterns may indicate underlying neuropathology

ALZHEIMER'S N ASSOCIATION[®] Introduction – Basics of PET

- How is PET different from other imaging modalities?
- What is a PET tracer?
- How do we get a PET image?
- How do we quantify PET?

PET Scanning Overview

Cyclotron



PET Steps:

- 1) Isotope Production
- 2) Synthesize
- 3) Administer
- 4) Scan
- 5) Process

Image Processing



Radiochemical Synthesis and Purification



Administer

- IV Injection
- Inhalation



PET/CT Scanner



- 1) Radioisotope decays
- 2) Positron annihilation
- 3) "Coincident" Photons detected



- 1) Radioisotope decays
- 2) Positron annihilation
- 3) "Coincident" Photons detected
- 4) Detect many events over time





- 1) Radioisotope decays
- 2) Positron annihilation
- 3) "Coincident" Photons detected
- 4) Detect many events over time
- 5) Image Reconstruction



- 1) Radioisotope decays
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- 1) Radioisotope decays
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- 5) Image Reconstruction





- Radioisotope decays
- 2) Positron annihilation
- 3) "Coincident" Photons detected
- 4) Detect many events over time
- Image Reconstruction 5)
- 6) Image Processing

100 120

Time [min]



Example Parametric Images



PET provides macroscopic <u>quantitative</u> measures of <u>underlying molecular biology</u> <u>and/or physiology *in vivo*</u>

ALZHEIMER'S N ASSOCIATION AAIC 23 Introduction – Basics of PET

- How is PET different from other imaging modalities?
- What is a PET tracer?
- How do we get a PET image?
- How do we quantify PET?



Optimal Quantification Method is a Trade-off

Accuracy and Information

Optimal Quantification Method is a Trade-off

Accuracy and

PET with arterial sampling

- arterial cannulation
- long scan duration
- + full kinetic modeling



Experimental Complexity

Optimal Quantification Method is a Trade-off

Accuracy and

- PET with arterial sampling - arterial cannulation
- long scan duration
- + full kinetic modeling

Full-Dynamic Imaging

- + no arterial sampling
- long scan duration
- + quantitative accuracy



Optimal Quantification Method is a Trade-off

Accuracy and

- PET with arterial sampling
- arterial cannulation
- long scan duration
- + full kinetic modeling

Full-Dynamic Imaging

- + no arterial sampling
- long scan duration
- + quantitative accuracy

Late-frame Dynamic Imaging

- less accurate
- binding estimates impacted by blood flow
- + short scan duration
- + some kinetic information



Experimental Complexity

Optimal Quantification Method is a Trade-off

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- + no arterial sampling
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Late-frame Dynamic Imaging

- less accurate
- binding estimates impacted by blood flow
- + short scan duration
- + some kinetic information

Late-frame Static Imaging

- less accurate
- no kinetic information
- + short scan duration
- + less data (smaller files)


Kinetic Modeling Primer



Kinetic Modeling Primer



Kinetic Modeling Primer

Kinetic Model Arterial Blood Tissue K₁k₃-Specifically Plasma Free Bound **k**₂ k_4 k_5 k_6 Non-Specific **PET Signal**

Distribution Volume

$$V_T = \frac{C_T}{C_P}$$

$$V_T = V_F + V_{NS} + V_S$$

Kinetic Modeling Primer

2-tissue Compartment Model



Distribution Volume

$$V_T = \frac{C_T}{C_P}$$

$$V_T = V_{ND} + V_S$$

Kinetic Modeling Primer

2-tissue Compartment Model



 B_{max} is the <u>density</u> of the target receptor 1/K_D is referred to as the <u>affinity</u> **Distribution Volume**

$$V_T = \frac{C_T}{C_P}$$

$$V_T = V_{ND} + V_S$$

Distribution Volume Ratio (DVR)

$$\frac{V_T^{target}}{V_T^{ref}} = \frac{V_{ND} + V_S}{V_{ND}}$$

$$DVR = 1 + BP_{ND}$$
$$BP = \frac{B_{max}}{K_D}$$

Kinetic Modeling Primer

2-tissue Compartment Model

Arterial BloodTissueDistribution VolumeK.k. $V_{\tau} = \frac{C_{T}}{T}$ For reversibly bound PET ligands, **Binding**Potential (and therefore DVR) is a quantitative in
vivo measure that is directly proportional to
molecular receptor density

 B_{max} is the <u>density</u> of the target receptor

 $1/K_D$ is referred to as the <u>affinity</u>

$$DVR = 1 + BP_{ND}$$
$$BP = \frac{B_{max}}{K_D}$$

Optimal Quantification Method is a Trade-off

Accuracy and

Information

- PET with arterial sampling
 - V_T
 - Rate Constants
 - Tracer Metabolism



Experimental Complexity

Optimal Quantification Method is a Trade-off

PET with arterial sampling

• V_T

Experimenta Complexity

- Rate Constants
- Tracer Metabolism

Full-Dynamic Imaging

- DVR (reference tissue methods)
- R₁ (relative perfusion)



Optimal Quantification Method is a Trade-off

Accuracy and

nformation

- PET with arterial sampling
 - V_T
- Rate Constants
- Tracer Metabolism
- Full-Dynamic Imaging
- DVR (reference tissue methods)
- R₁ (relative perfusion)

Late-frame Dynamic Imaging

SUVR

Late-frame Static Imaging

SUVR



Experimenta Complexity

ALZHEIMER'S RUASSOCIATION AAIO223 PET Image Processing

- MR-Guided Image Processing
- PET only Image Processing
- Other Considerations

ALZHEIMER'S RUASSOCIATION AAIC 23 PET Image Processing

- MR-Guided Image Processing
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- Other Considerations

ALZHEIMER'S ALZHEIMER'S ALZHEIMER'S ALZHEIMER'S ALSOCIATION

T1-weighted MRI

- High-resolution (~1 mm) information about neuroanatomy and neurodegeneration
- Can be acquired in any orientation in ~4-6 minutes
- Good contrast between different tissues (GM, WM, CSF)







↓36 months

Slide courtesy of Dr. Dave Cash

Co-registration: Within subject, within session

- Structural T1 provides high-resolution anatomical context for other lower resolution modalities (fMRI, DWI, PET)
- Regions of interest (ROIs) defined on the structural T1 scan can be transferred to co-registered images
- Tissue properties from segmentation can also provide some information on partial volume effect (mixture of different tissues)



Slide courtesy of Dr. Dave Cash

co-registered

Co-registration: Within subject, within session

- Structural T1 provides high-resolution anatomical context for other lower resolution modalities (fMRI, DWI, PET)
- Regions of interest (ROIs) defined on the structural T1



See Previous Basics of Neuroimaging Structural MRI presented by Dr. David Cash

 Tissue properties non-segmentation can also provide some information on partial volume effect (mixture of different tissues)



Slide courtesy of Dr. Dave Cash

MR-Guided PET Image Processing

Process MRI (ROI Parcellation)

Smooth/De-noise

Interframe Alignment (i.e., motion correction)

Co-Registration to MRI

Extract Reference Region TAC

Generate Parametric Image(s)

MR-Guided PET Image Processing

Process MRI (ROI Parcellation)

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See Previous Basics of Structural MRI Webinar presented by Dr. Dave Cash

MR-Guided PET Image Processing

Process MRI (ROI Parcellation)

Smooth/De-noise

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Extract Reference Region TAC

Generate Parametric Image(s)

Individual PET frames are noisy!



Single [¹¹C]PiB PET Frame (30-35 min)

MR-Guided PET Image Processing

Process MRI (ROI Parcellation)

Smooth/De-noise

Interframe Alignment (i.e., motion correction)

Co-Registration to MRI

Extract Reference Region TAC

Generate Parametric Image(s)

t = 87.5 min Gaussian Kernel

Spatial Smoothing

- Spatial smoothing reduces voxel variance but increase covariance of adjacent voxels
- Can be applied during or after image reconstruction
- Over smoothing reduces spatial resolution

MR-Guided PET Image Processing

Process MRI (ROI Parcellation)

Smooth/De-noise

Interframe Alignment (i.e., motion correction)

Co-Registration to MRI

Extract Reference Region TAC

Generate Parametric Image(s)



Single [¹¹C]PiB PET Frame (30-35 min)











ALZHEIMER'S **C** ASSOCIATION[®] **MR-Guided PET Image Processing** Process MRI Standard SPM (ROI Parcellation) Realignment Smooth/De-noise First Frame Interframe Alignment 0-2 min (i.e., motion correction) Co-Registration to MRI **Extract Reference** Last Frame 85-90 min **Region TAC Generate Parametric**

Image(s)

Realignment

Modified SPM



[¹⁸F]MK-6240

MR-Guided PET Image Processing

Process MRI (ROI Parcellation)

Smooth/De-noise

Interframe Alignment (i.e., motion correction)

Co-Registration to MRI

Extract Reference Region TAC

Generate Parametric Image(s) Intermodal Registration (PET to T1-w MRI) Unregistered Registered





Reference Image: MRI Source Image: SUM PET

MR-Guided PET Image Processing

Process MRI (ROI Parcellation)

Smooth/De-noise

Interframe Alignment (i.e., motion correction)

Co-Registration to MRI

Extract Reference Region TAC

Generate Parametric Image(s)

Intermodal Registration (PET to T1-w MRI) Unregistered Registered





- Can apply transformation to the PET image using header OR
- Can reslice the registered PET image to match voxel-voxel with MRI (requires interpolation but enables extracting ROI-level data)

MR-Guided PET Image Processing

Process MRI (ROI Parcellation)

Smooth/De-noise

Interframe Alignment (i.e., motion correction)

Co-Registration to MRI

Extract Reference Region TAC

Generate Parametric Image(s) Intermodal Registration (PET to T1-w MRI) Unregistered Registered



See Previous Basics of Neuroimaging Data Structure and Formats presented by Dr. Ludovca Griffanti





- Can apply transformation to the PET image using header OR
- Can reslice the registered PET image to match voxel-voxel with MRI (requires interpolation but enables extracting ROI-level data)



MR-Guided PET Image Processing

Process MRI (ROI Parcellation)

Smooth/De-noise

Interframe Alignment (i.e., motion correction)

Co-Registration to MRI

Extract Reference Region TAC



Summing Different Frames Can Improve RegistrationGM TPMMK-6240 SUM 0-10 minutes



More mutual information between early frame-data and GM TPM compared to late-frame data

MR-Guided PET Image Processing

Process MRI (ROI Parcellation)

Smooth/De-noise

Interframe Alignment (i.e., motion correction)

Co-Registration to MRI

Extract Reference Region TAC

Generate Parametric Image(s)

Coregistered PET to MRI



Reference Region VOI





MR-Guided PET Image Processing

Process MRI (ROI Parcellation)

Smooth/De-noise

Interframe Alignment (i.e., motion correction)

Co-Registration to MRI

Extract Reference Region TAC

Generate Parametric Image(s)



[¹¹C]PiB DVR Warped to MNI-152 Space







Apply MRI deformation field from T1-w spatial normalization

ALZHEIMER'S **C** ASSOCIATION[®] **MR-Guided PET Image Processing** AAIL>23 Can generate other Parametric Images also (e.g., R_1) Process MRI (ROI Parcellation) 4D PET Cerebellum Smooth/De-noise Interframe Alignment (i.e., motion correction) 30 90 120 0 60 **Co-Registration to MRI Extract Reference Region TAC** Simplified Reference Tissue Method (SRTM) $C(T) = \mathbf{R_1}C_{ref}(t) + \left\{k_2^{ref} - \frac{R_1k_2^{ref}}{1 + RP}\right\}C_{ref}(t) \otimes e^{-\left[\frac{k_2^{ref}}{(1 + BP)} + \lambda\right]t}$ **Generate Parametric** Image(s)




MR-Guided PET Image Processing

Process MRI (ROI Parcellation) Create SUVR image by dividing entire image by mean activity concentration in the reference region

I_{SUM}

 $mean(I_{SUM,ref})$

Smooth/De-noise

Interframe Alignment (i.e., motion correction)

Co-Registration to MRI

Extract Reference Region TAC

Generate Parametric Image(s) Coregistered Summed PET



SUVR Image



MR-Guided PET Image Processing

Process MRI (ROI Parcellation)

Smooth/De-noise

Interframe Alignment (i.e., motion correction)



[¹⁸F]MK-6240 SUVR Warped to MNI Space







Apply MRI deformation field from T1-w spatial normalization

Co-Registration to MRI

Extract Reference Region TAC

Generate Parametric Image(s)

ALZHEIMER'S N ASSOCIATION AAAO 23 PET Image Processing

- MR-Guided Image Processing
- PET only Image Processing
- Other Considerations

ALZHEIMER'S RUASSOCIATION AAIO223 Creating a study-specific template to reduce errors in spatial normalisation



ALZHEIMER'S () ASSOCIATION ALZHEIMER'S () ASSOCIATION PET-Only Processing (PET template)



Lao, et al., Brain Imaging and Behavior, 2019

ALZHEIMER'S N ASSOCIATION ALZHEIMER'S N ASSOCIATION PET-Only Processing (Hand Drawn)



ROIs can also be Hand drawn on SUM or SUV Images

- Create SUM PET image
- Manually draw ROIs on image
- Extract TACs or regional mean
- Generate parametric image

Adapted from Price, et al. JCBFM. 2005

ALZHEIMER'S RUASSOCIATION AAIO223 PET Image Processing

- MR-Guided Image Processing
- PET only Image Processing
- Other Considerations

Other Considerations

- Reconstruction parameters (corrections for deadtime, scatter, attenuation, decay, etc.,)
- Standardization across tracers, sites, acquisition protocols, etc.,
- Partial Volume Effects
- Reference region selection
- Off-target binding
- Brain-penetrable radiometabolites

AAC 23 POP QUIZ!



QUESTION 1

- Which of the following statements best describes PET imaging?:
 - a) High spatial resolution, high molecular specificity
 - b) Low spatial resolution, high molecular specificity
 - c) High spatial resolution, low molecular specificity
 - d) Low spatial resolution, low molecular specificity



- Which of the following statements best describes PET imaging?:
 - a) High spatial resolution, high molecular specificity
 - b) Low spatial resolution, high molecular specificity
 - c) High spatial resolution, low molecular specificity
 - d) Low spatial resolution, low molecular specificity



The signal we detect with PET imaging is:

- a) Single gamma photons
- b) Beta particles
- c) X-rays
- d) Coincident gamma photons



The signal we detect with PET imaging is:

- a) Single gamma photons
- b) Beta particles
- c) X-rays
- d) Coincident gamma photons

QUESTION 3

PET radiotracers for amyloid and tau mostly reflect:

- a) Soluble protein fragments
- b) Transient pathological changes in beta-amyloid and tau
- c) Insoluble protein aggregates
- d) None of the above

QUESTION 3

PET radiotracers for amyloid and tau mostly reflect:

- a) Soluble protein fragments
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- d) None of the above

QUESTION 4

Registering PET to MRI provides:

- a) Less noisy images
- b) Anatomical reference and regions of interest
- c) The underlying radiotracer distribution at higher resolution
- d) Regional radiotracer perfusion information



Registering PET to MRI provides:

- a) Less noisy images
- b) Anatomical reference and regions of interest
- c) The underlying radiotracer distribution at higher resolution
- d) Regional radiotracer perfusion information



- A SUM PET image is:
- a) A time-weighted average of all or some PET frames
- b) A quantitative measure of binding potential
- c) Always a straight average of all of some PET frames
- d) A quantitative measure of perfusion



- A SUM PET image is:
- a) A time-weighted average of all or some PET frames
- b) A quantitative measure of binding potential
- c) Always a straight average of all of some PET frames
- d) A quantitative measure of perfusion

List Mode



 $\frac{\sum_{f=frame_{end}}^{frame_{end}} C(t)_f \times \Delta t_f}{\sum_{f=frame_{end}}^{frame_{end}} \Delta t_f}$



ISTAART Neuroimaging PIA The Basics of Neuroimaging Series





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Past Webinars in this Series:

- Basics of Neuroimaging: Data structure and formats by Ludovica Griffanti
- Basics of Neuroimaging: Structural MRI by David Cash

On demand at https://training.alz.org/research-webinars

Next up:

- Basics of Neuroimaging: Diffusion-Weighted Imaging (DWI) by Alexa Pichet Binette 21 April, 2023; 9AM – 10AM CT

- Basics of Neuroimaging: Functional Magnetic Resonance Imaging (FMRI) by Luigi Lorenzini 26 April, 2023; 10AM – 11AM CT

GETTING STARTED WITH NEUROIMAGING WORKSHOP Friday, July 14 8:00-12:00 Amsterdam





Wisconsin Alzheimer's Disease Research Center UNIVERSITY OF WISCONSIN SCHOOL OF MEDICINE AND PUBLIC HEALTH Wisconsin Registry for Alzheimer's Prevention UNIVERSITY OF WISCONSIN SCHOOL OF MEDICINE AND PUBLIC HEALTH