## A comparison of q-ball and PASMRI on sparse diffusion MRI data

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Introduction. Recent studies [1-7] have highlighted the failure of diffusion tensor MRI in regions of complex microstructure such as white-matter fibre-crossings. Diffusion tensor MRI adopts a Gaussian model of the displacement density function p, which fits the data poorly in regions of fibre-crossings. Several alternative approaches can resolve the orientations of crossing fibres. A simple approach is the diffusion spectrum imaging (DSI) method of Wedeen et al [3], which acquires measurements on a grid of wavenumbers q allowing fast Fourier transform reconstruction of p. This technique requires long acquisition times to provide sufficient detail in p. However, DSI is wasteful of information, as only the angular structure of the reconstructed p provides information about fibre orientations and the radial component is typically discarded. Recent techniques reconstruct only the angular structure of p from measurements spread over a shell of wavenumbers with fixed |q|. Tuch's q-ball algorithm [4] estimates the orientation distribution function  $\varphi(p)$ , which is the feature determined in DSI. Jansons and Alexander's PASMRI algorithm [5] extracts the persistent angular structure (PAS) of p. Both  $\varphi(p)$  and the PAS are functions of the unit sphere and their peaks provide estimates of fibre orientations. Tuch tests q-ball on data sets with 492 measurements per voxel acquired with  $|q|=3.6\times10^5$  m<sup>-1</sup> ( $b\approx4000$  s mm<sup>-2</sup>). The estimates of  $\varphi$  closely resemble those from DSI. Jansons and Alexander show in simulation that PASMRI recovers the directions of two or three orthogonal crossing fibres from sparser data sets with 54 measurements acquired with  $|q|=2.0\times10^5$  m<sup>-1</sup> ( $b\approx 1200$  s mm<sup>-2</sup>), which is more typical of clinical diffusion MRI. Here we compare the abilities of these two methods to recover crossing fibre directions from sparse data with relatively low |q|, as used in [5], and compare performance in simulation as we vary some properties of the data.

Methods. The brain data set used in this study is a  $128 \times 128 \times 60$  array of voxels reconstructed from a  $62 \times 96 \times 60$  measurement array. Each voxel contains M = 6measurements with q = 0 and N = 54 measurements with unique gradient directions and  $|q| = Q = 2.0 \times 10^5 \text{ m}^{-1}$ . The gradient directions minimize the electrostatic energy

of N pairs of equal and opposite points on the unit sphere with equal charges. The gradient pulse separation  $\Delta = 0.04$  s; the gradient pulse duration  $\delta = 0.034$  s; the magnitude of the gradients |g| = 0.022 T m<sup>-1</sup>. The average signal to noise ratio in the q = 0 images  $S \approx 16$  in white matter regions.

We synthesize data by emulating the scanner sequence. Given a model p for the diffusion displacement density, we sample F, the Fourier transform of p, M times at q=0 and once at each non-zero wavenumber sampled by the scanner. To each sample we add a random complex number with independent real and imaginary parts each with distribution N(0,  $\sigma^2$ ), where  $\sigma = F(0)/S$ . The modulus of the noisy sample is the synthetic measurement. We use variations of three basic test functions:

 $p_1(x) = G(x; \mathsf{D}_1, t),$ 

 $p_3(x) = (G(x; D_1, t) + G(x; D_2, t))/2$ , and

 $p_4(x) = (G(x; D_1, t) + G(x; D_2, t) + G(x; D_3, t))/3,$ 

where G(.; D, t) is a zero-mean trivariate Gaussian function with covariance matrix 2tD and t is the diffusion time; the diffusion tensors are  $D_1 = \text{diag}(\lambda_1, \lambda_2, \lambda_2), D_2 = \text{diag}(\lambda_2, \lambda_1, \lambda_2), D_3 = \text{diag}(\lambda_2, \lambda_2, \lambda_1); \lambda_1$ =  $17 \times 10^{-10} \text{ m}^2 \text{ s}^{-1}$  and  $\lambda_2 = (21 \times 10^{-10} - \lambda_1)/2$ .

To determine the ability of a method to recover directions from the test functions, we compute a performance index called the consistency fraction C. We use PASMRI and q-ball to estimate the principal directions of p from noisy synthetic data. The result is consistent if the number of estimated directions equals the number of ridges of p and the estimated directions match the ridge directions of p to within a small angular tolerance, which we set to  $\cos^{-1}(0.95)$ . The consistency fraction is the fraction of 256 trials in which the result is consistent.

Both PASMRI and q-ball contain parameters that must be tuned to maximize performance. The PASMRI algorithm has a regularization parameter r and a search radius  $\rho$  in the algorithm to find local maxima of the PAS. The q-ball algorithm has several regularization parameters and a similar search radius. We select values of these parameters that maximize the sum of the consistency fractions for  $p_1$ ,  $p_3$  and  $p_4$  using the scanning sequence of the brain data over a discrete grid of possible settings.

Experiments and Results. Figure 1 shows principal directions maps over part of a coronal slice through the pons and the corpus callosum for PASMRI (bottom-left) and q-ball (bottom-right). The characteristic reduction in anisotropy in the fibre crossing at the pons is clear in the anisotropy map (top). In the pons, PASMRI extracts the expected left-right and superior-inferior fibre directions of the intersecting corticospinal tract and trans-pontine fibres consistently in the region of the pons. The q-ball algorithm only recovers both directions in about half the voxels in the pons region. Both algorithms recover single fibre directions consistently in the corpus callosum and cortico-spinal tract outside the fibre crossing.

Figure 2 shows a plot of C against S for each test function using both algorithms. As expected, Cincreases with S. For  $p_3$  and  $p_4$ , C increases more quickly for PASMRI that q-ball; for  $p_1$ , C increases more quickly using q-ball. Using PASMRI, C > 95% for  $p_1$ ,  $p_3$  and  $p_4$  with S > 16 and using q-ball only

with S > 24. Other experiments with synthetic data show that: 1) reducing  $\lambda_1$  reduces C more quickly using PASMRI for  $p_1$ , but more quickly using q-ball for  $p_3$  and  $p_4$ . 2) For all the test functions, increasing |q| increases C with both algorithms to a peak at approximately 2Q. 3) For  $p_1$ , C > 95% with  $N \ge 10$  using PASMRI,  $N \ge 20$  using q-ball; for  $p_3$ , C > 95% with  $N \ge 10$ 20 using PASMRI,  $N \ge 40$  using q-ball; for  $p_4$ , C > 95% with  $N \ge 54$  using PASMRI,  $N \ge 110$  using q-ball.

Conclusion. The PASMRI algorithm appears more sensitive to directions in the data and gives cleaner principal direction maps on current data sets. However, results on synthetic data suggest that q-ball can achieve similar performance with a moderate increase in data quality. The q-ball algorithm is faster than PASMRI by several orders of magnitude, so the investment in higher quality data will often be justified. Computation times in PASMRI may be reduced in alternative implementations of the algorithm to that presented [5], though it is not clear how this will affect performance. Possible improvements to the q-ball algorithm may increase performance. Similar algorithms presented in [6] and [7] will be compared. We note that other indices of performance must be considered in a full performance comparison, such as accuracy and consistency of indices of shape derived from these algorithms. These will be examined in future work.

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Figure 1. Shows the principal directions from PASMRI (left) and q-ball (right) in the pons and corpus callosum.

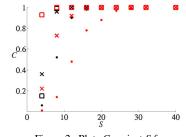


Figure 2. Plots C against S for  $p_1$  $(\Box), p_3 (\times) \text{ and } p_4 (\bullet) \text{ using}$ PASMRI (black) and q-ball (red).

