

# Accelerated Cardiac Diffusion Tensor Imaging via Graph Neural Networks Based Multi-Modality Magnetic Resonance Restoration

## Supervisor(s):

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## Project description:

### Background

In vivo cardiac diffusion tensor imaging (cDTI) is an emerging Magnetic Resonance Imaging (MRI) technique that has the potential to describe the micro-structure of myocardial tissue in the living heart. However, cDTI faces challenges such as low resolution, low signal-to-noise ratio nature and prolonged scanning time. During routine cardiac MR scanning, radiologists tend to acquire images with different modality to comprehensively evaluate patients' conditions. The purpose of multi-modality image restoration is to use a high-quality (or fully-sampled) reference image with a shorter acquisition time to enhance the quality of images (or reconstruct images) with a longer scanning time. However, most existing multi-modality methods required registered image pairs, which limits their applicability to cDTI data due to the movement derived from the heartbeat and human breath.

### Main Goal

This main goal of this study is to develop GNN-based unregistered multi-modality MR restoration model for cDTI reconstruction, denoising and super-resolution, guided by fully sampled high-quality modality, such as cine MRI. In contrast to conventional methods that treat MR images as pixel arrays, this approach transforms MR images into patch-based graphs. The relationship between unregistered modalities can be learning from the graph connection rather than aligned pixel array.

### Experiment Approach

1. We will develop a GNN-based single-modality restoration model as the baseline.
2. We will simulate the misalignment on multi-contrast brain dataset (e.g., BraTS), and develop a GNN-based multi-modality restoration model.
3. We will exploit this GNN-based multi-modality methods on cDTI (target) dataset and cine (reference) dataset.

### Outcome

The outcome of this work is developing advanced GNN-based multi-modality methods for unregistered cDTI reconstruction, super-resolution and denoising. We hypothesise that the proposed model can provide high-quality cDTI restoration leveraging the information from unregistered reference modality.

## Timeline (tentative):

- (1) 31/10/2024: 1-page plan agreed with student on the project.
- (2) 30/11/2024: data curation, paper reading.
- (3) 31/12/2024: training baseline segmentation model of GNN-based single-modality cDTI restoration.
- (4) 31/1/2025: simulated R&D reports.
- (5) 31/3/2025: develop GNN-based unregistered (simulation) multi-modality restoration on brain dataset.
- (6) 31/5/2025: develop GNN-based unregistered multi-modality restoration on cDTI dataset.
- (7) 31/8/2025: final thesis submission.

## Minimum viable thesis:

We will develop a novel GNN-based multi-modality model on registered brain dataset. The backbone of the proposed multi-modality model can be existing Vision GNN.

## Required background & skills:

Excellent interpersonal communication; Superb reading and written skills in English; Good basis of mathematic theory; Skilful at programming, e.g., Python, Pytorch, DGL, etc.

**Representative References:**

- [1] C.-M. Feng et al., ‘Multimodal Transformer for Accelerated MR Imaging’, *IEEE Transactions on Medical Imaging*, vol. 42, no. 10, pp. 2804–2816, Oct. 2023, doi: 10.1109/TMI.2022.3180228.
- [2] Q. Lyu et al., ‘Multi-Contrast Super-Resolution MRI Through a Progressive Network’, *IEEE Transactions on Medical Imaging*, vol. 39, no. 9, pp. 2738–2749, Sep. 2020, doi: 10.1109/TMI.2020.2974858.
- [3] J. Huang et al., ‘Deep Learning-based Diffusion Tensor Cardiac Magnetic Resonance Reconstruction: A Comparison Study’. *arXiv*, Apr. 04, 2023. doi: 10.48550/arXiv.2304.00996.
- [4] K. Han, Y. Wang, J. Guo, Y. Tang, and E. Wu, ‘Vision GNN: An Image is Worth Graph of Nodes’, *Advances in Neural Information Processing Systems*, vol. 35, pp. 8291–8303, Dec. 2022.
- [5] J. Huang, A. Aviles-Rivero, C.-B. Schonlieb, and G. Yang, ‘ViGU: Vision GNN U-Net for Fast MRI’. *arXiv*, Jan. 23, 2023. Accessed: Jun. 13, 2023.