

Motion in MRI

Challenges, Strategies & Quality Evaluation

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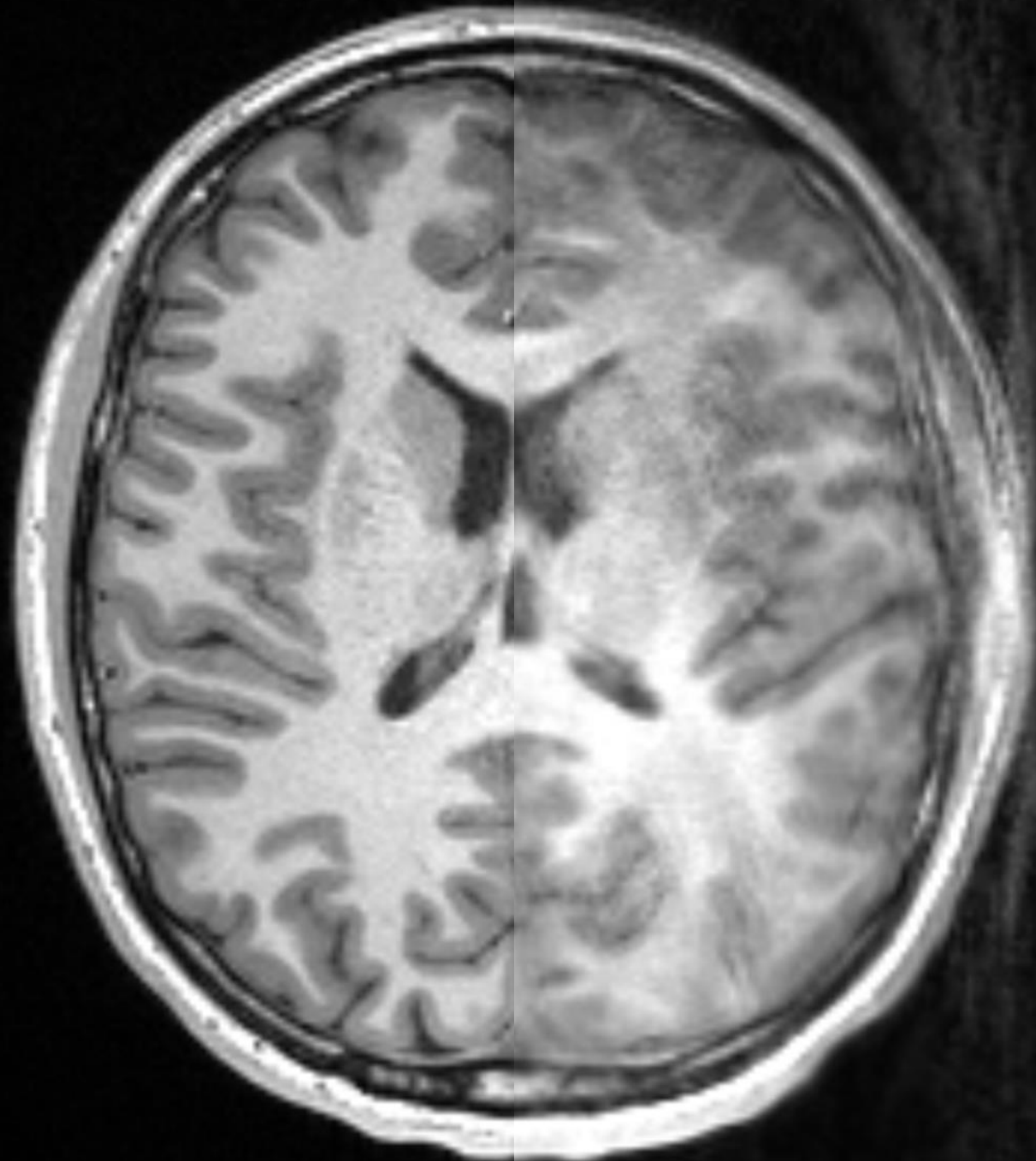
BIC-ISMRM Ed Talks
April 4th, 2025



Center for
Advanced Imaging
Innovation and Research

**HELMHOLTZ
MUNICH**

TUM | Universitäts
Klinikum



Outline

1a) Challenges

Motion types

Motion in k-space

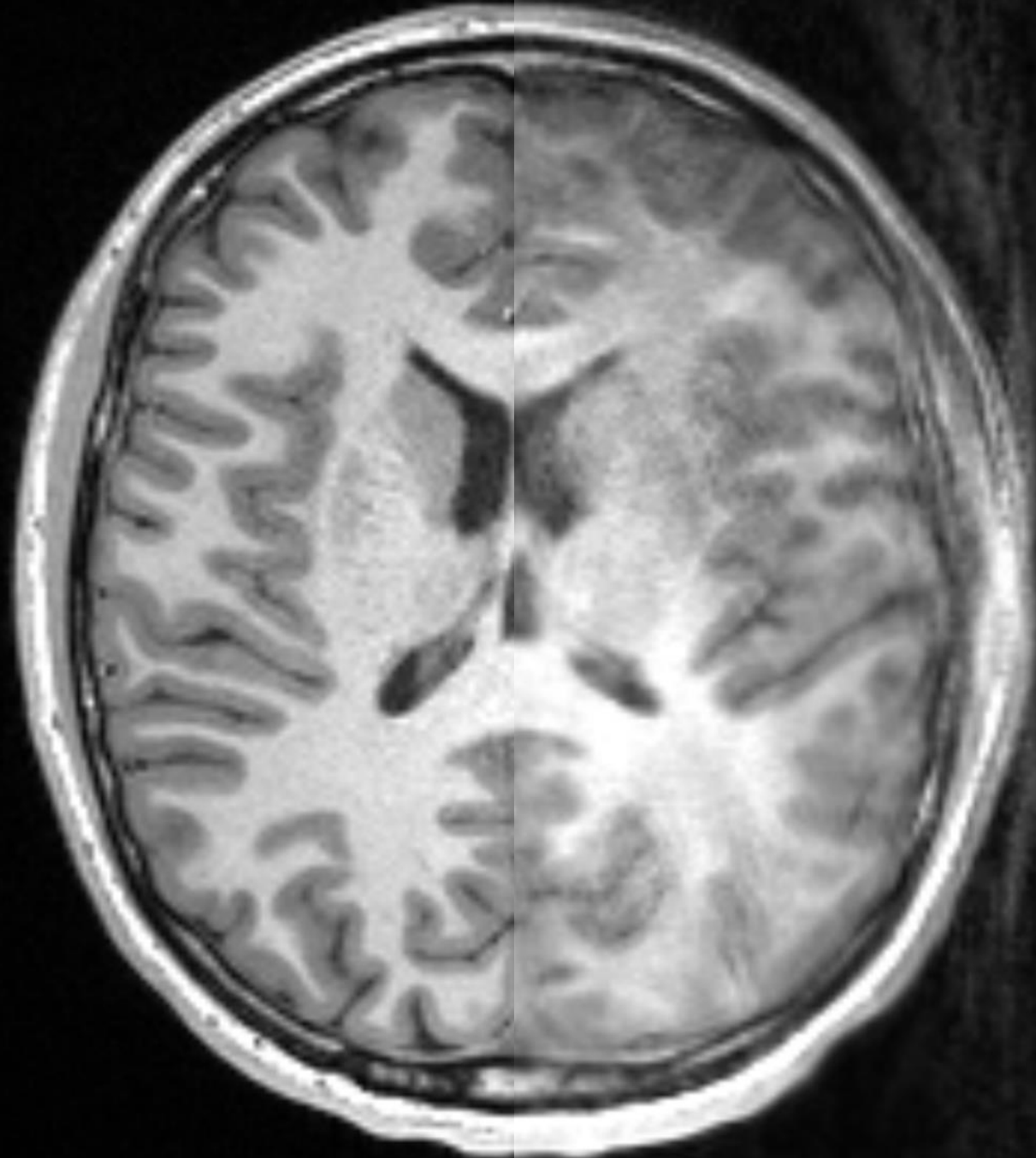
1b) Strategies

Motion estimation

Prospective vs. retrospective

Learning-based correction

2) Image Quality Evaluation



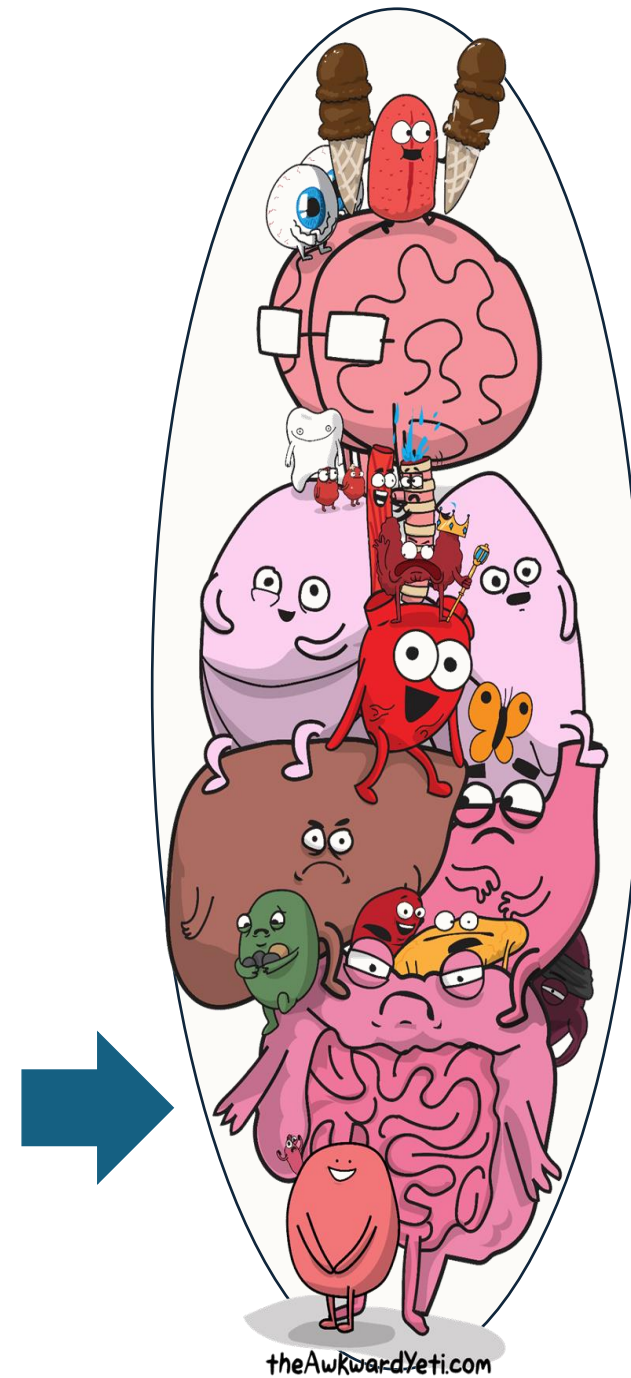
Motion in different body parts

Gastrointestinal



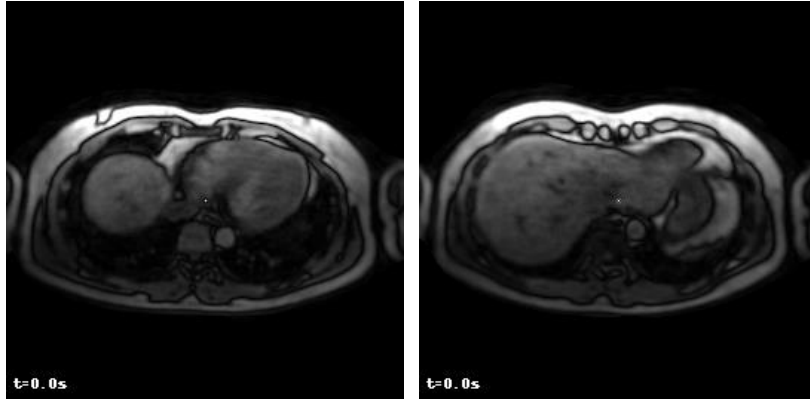
- **What:** digestive system
- **How:** peristalsis, random
- **Extent:** depending on subject, digestion status

Slide Courtesy by Laura Bortolotti (with adaptations)
Alshammari et al. Neurogastroenterol. Motil. (2023), de Jonge et al. Br J Radiol (2018)



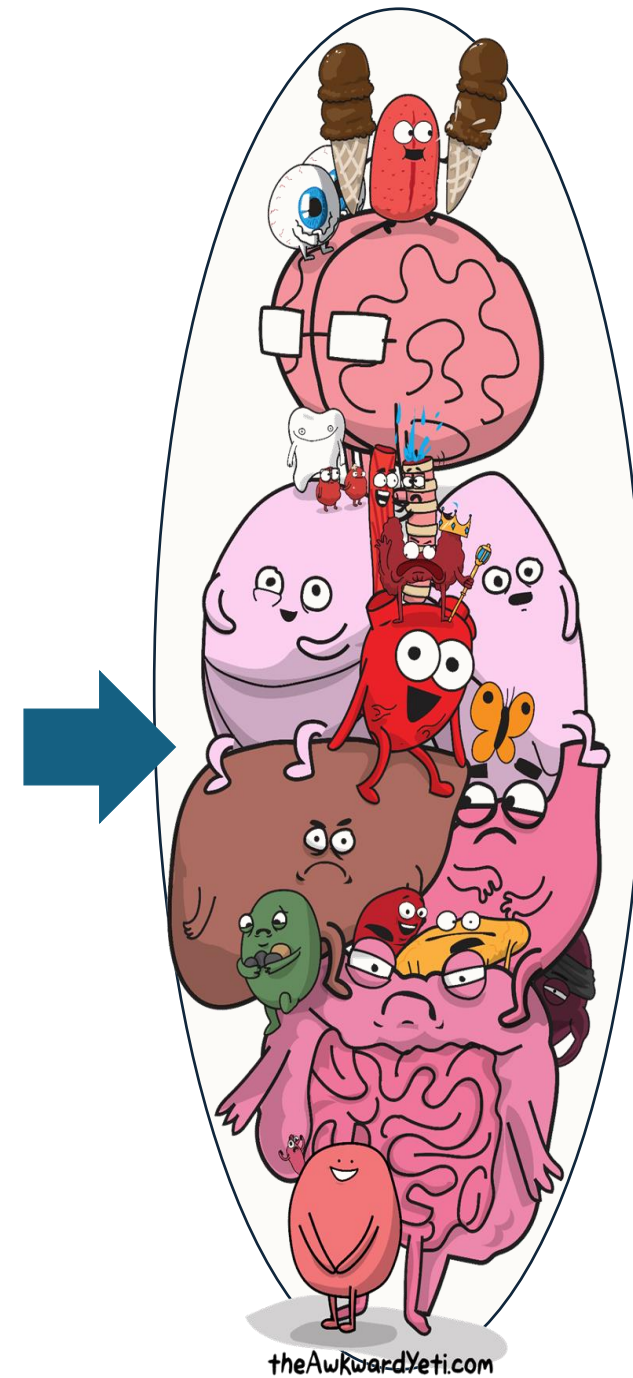
Motion in different body parts

Abdomen/Torso



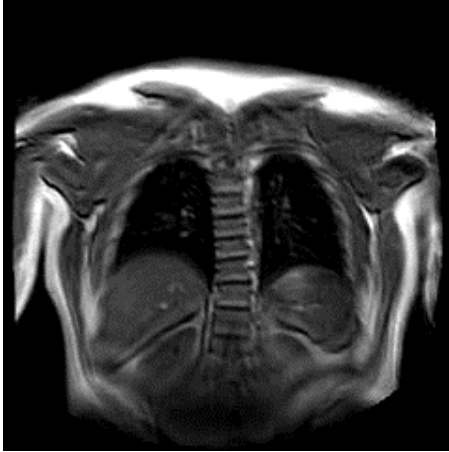
- **What:** involuntary body motion
- **How:** periodic (respiration) and random (reflex actions and postural adjustments)
- **Extent:** depending on subject and position

Slide Courtesy by Laura Bortolotti (with adaptations)
Bortolotti et al. ISMRM (2023), Spieker et al. arXiv (2025)

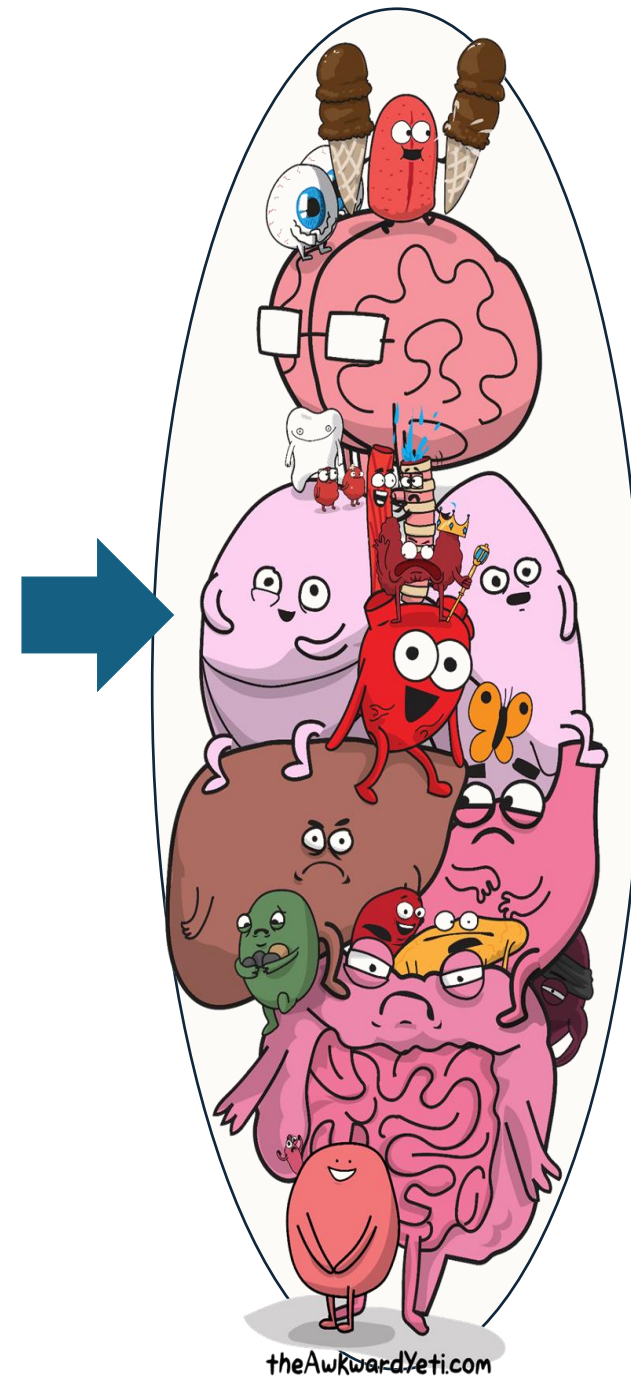


Motion in different body parts

Upper abdominal organs

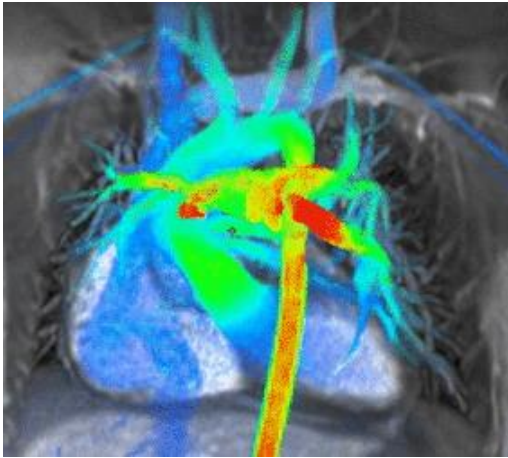


- **What:** diaphragm/lung motion
- **How:** periodic (respiration)
- **Extent:** highly depending on subject



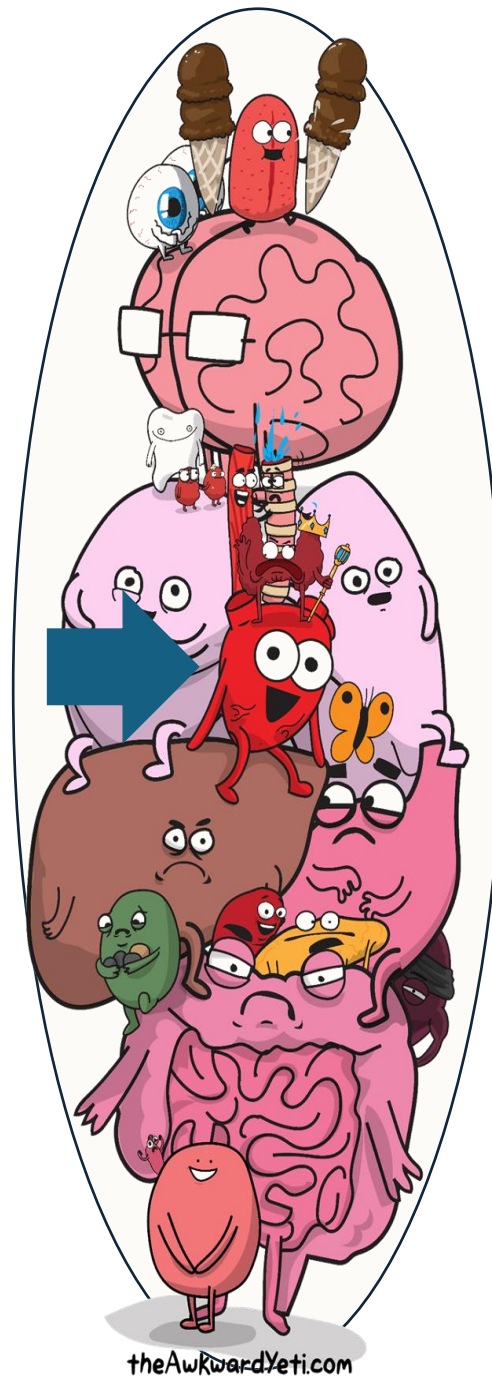
Motion in different body parts

Heart



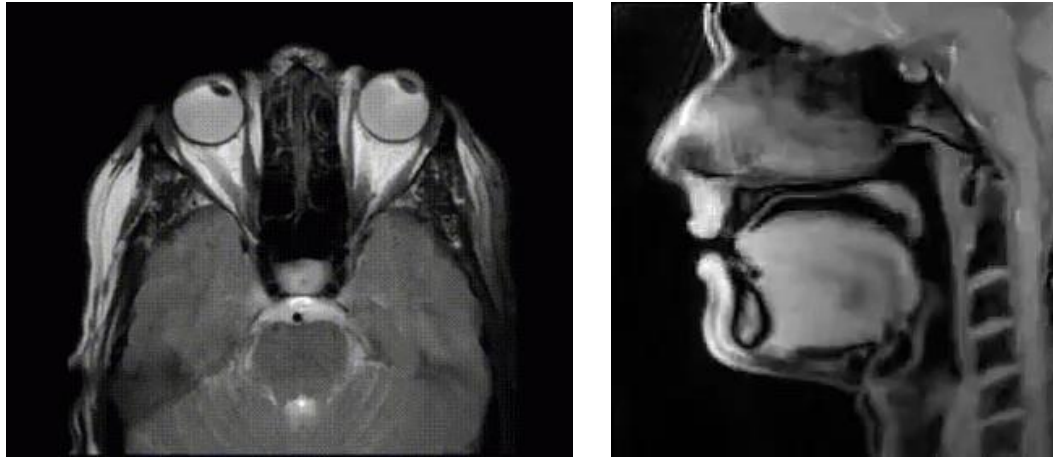
- **What:** Muscle contractions
- **How:** periodic (heartbeat)
- **Extent:** ~cm

Slide Courtesy by Laura Bortolotti (with adaptations)
Campbell-Washburn et al. JMRI (2017), Rashid et al. JMRI (2023)
https://commons.wikimedia.org/wiki/File:Cardiac_MRI_flow.gif



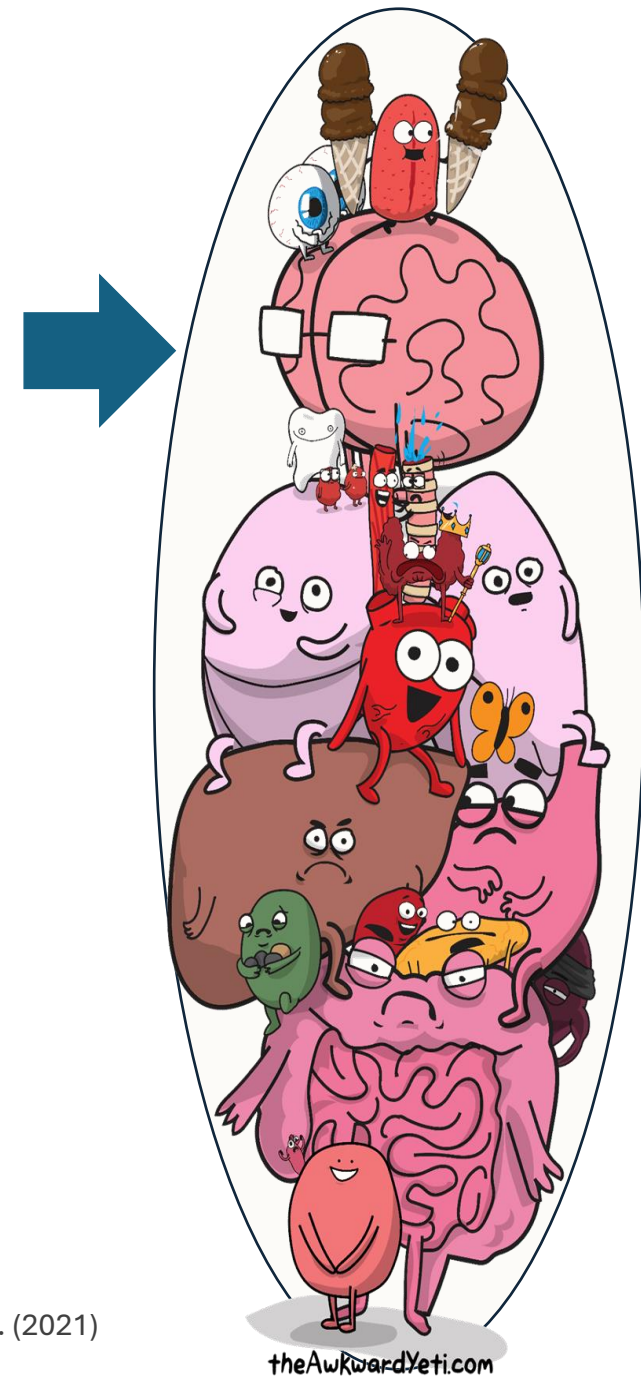
Motion in different body parts

Head and brain



- **What:** Rigid-body motion of the head
- **How:** random, mostly z-translation and x-rotation
- **Extent:** subject-dependent, up to 15 cm

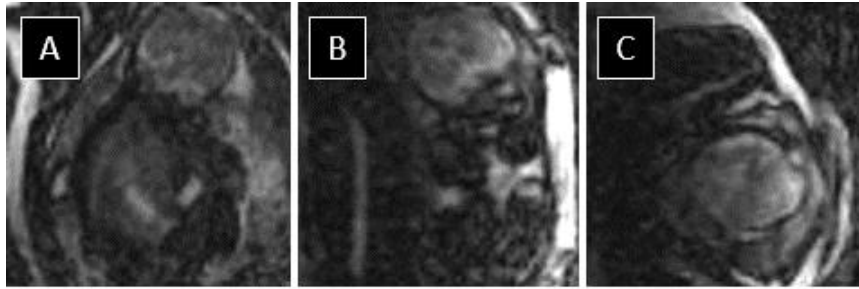
Slide Courtesy by Laura Bortolotti (with adaptations)
Kirchner et al. et al. Eneuro (2022), Godenschweger et al. PMB (2016), Eichhorn et al. Front. Radiol. (2021)
“Singing in the MRI with Tyley Ross” (<https://m.youtube.com/watch?v=J3TwTb-T044>)



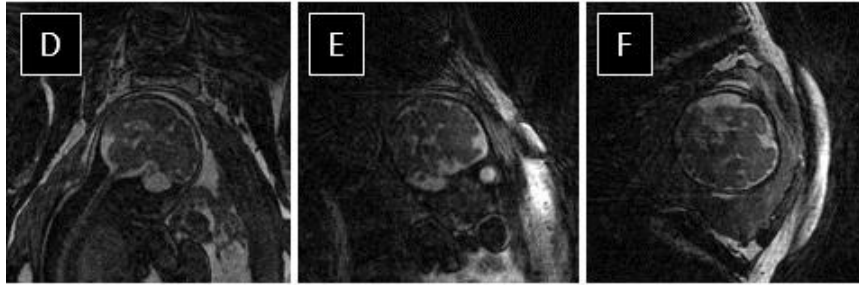
Motion in different body parts

Fetal MRI

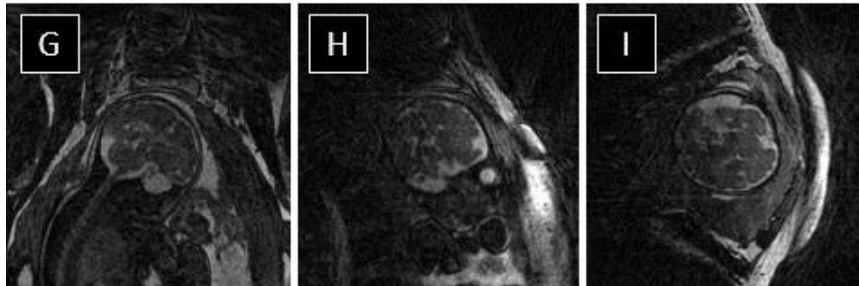
Low spatial
resolution 3D
acquisition



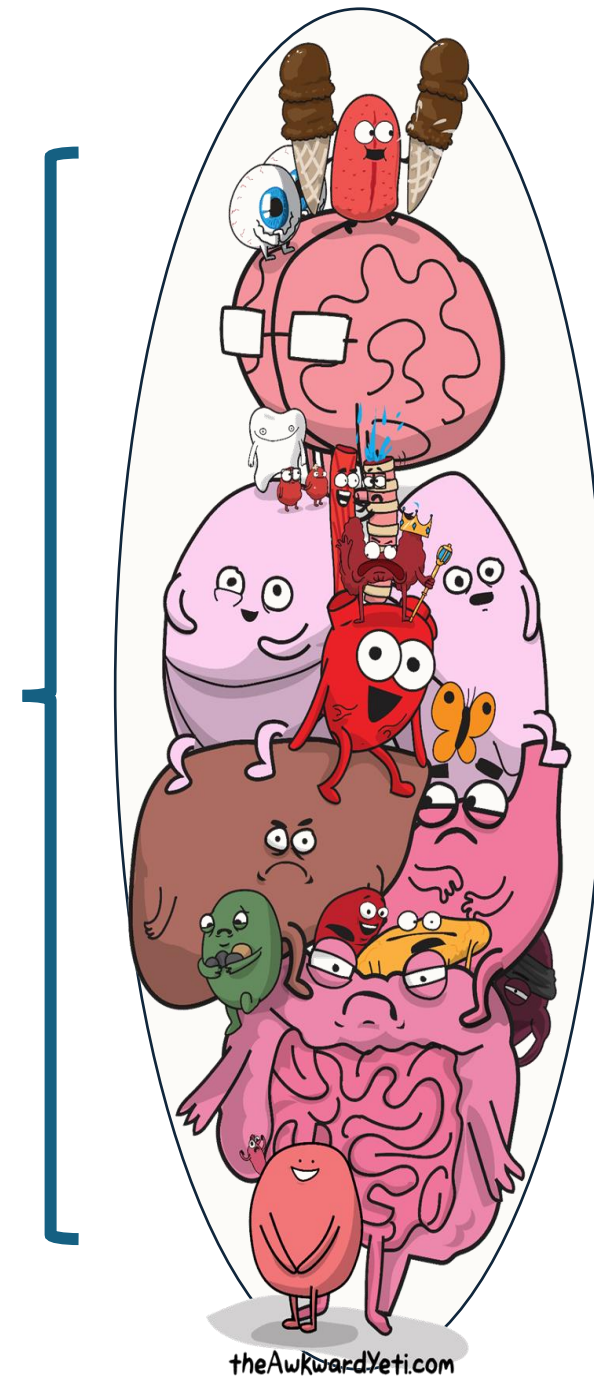
Reconstruction
(1mm isotropic)



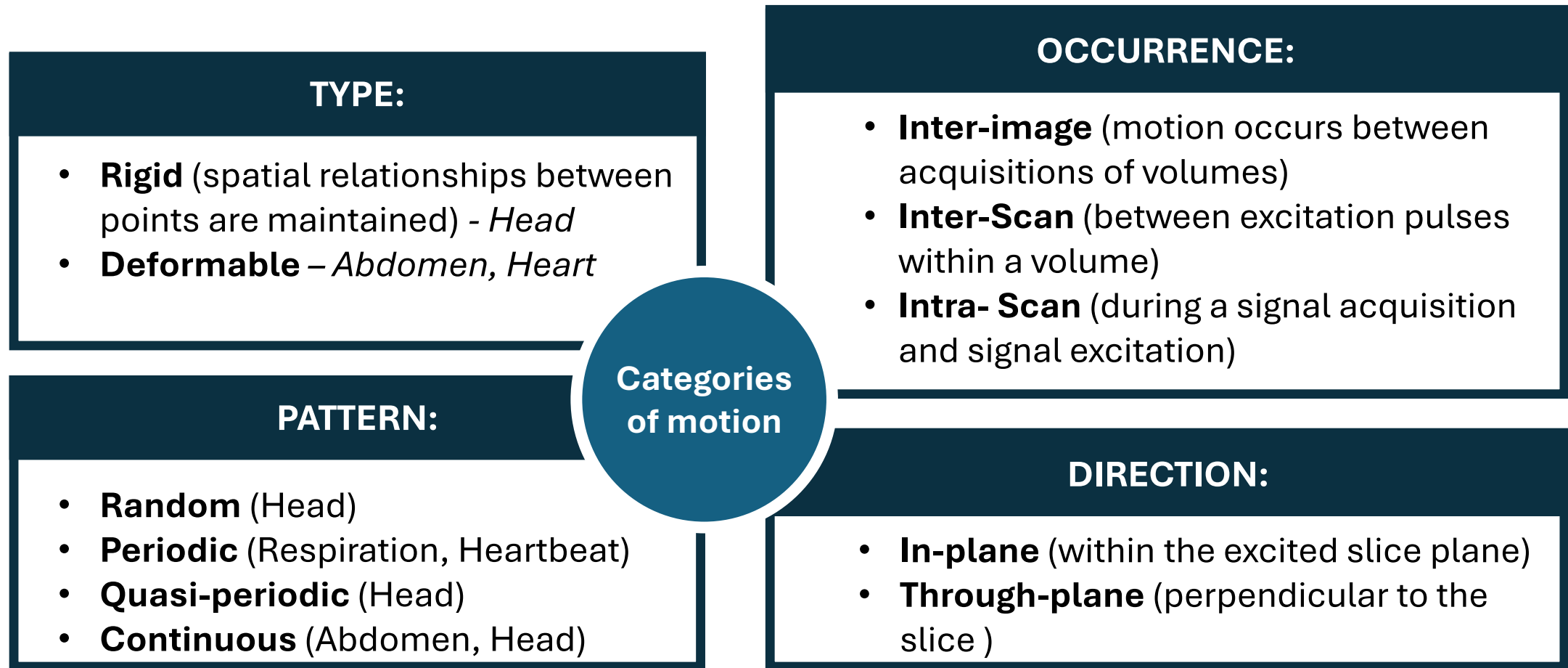
Motion
compensated



Slide Courtesy by Laura Bortolotti (with adaptations)
Roy et al. et al. ISMRM (2021), Uus et al. Brit. J. Radiol (2023)



Motion in different body parts – “It varies”



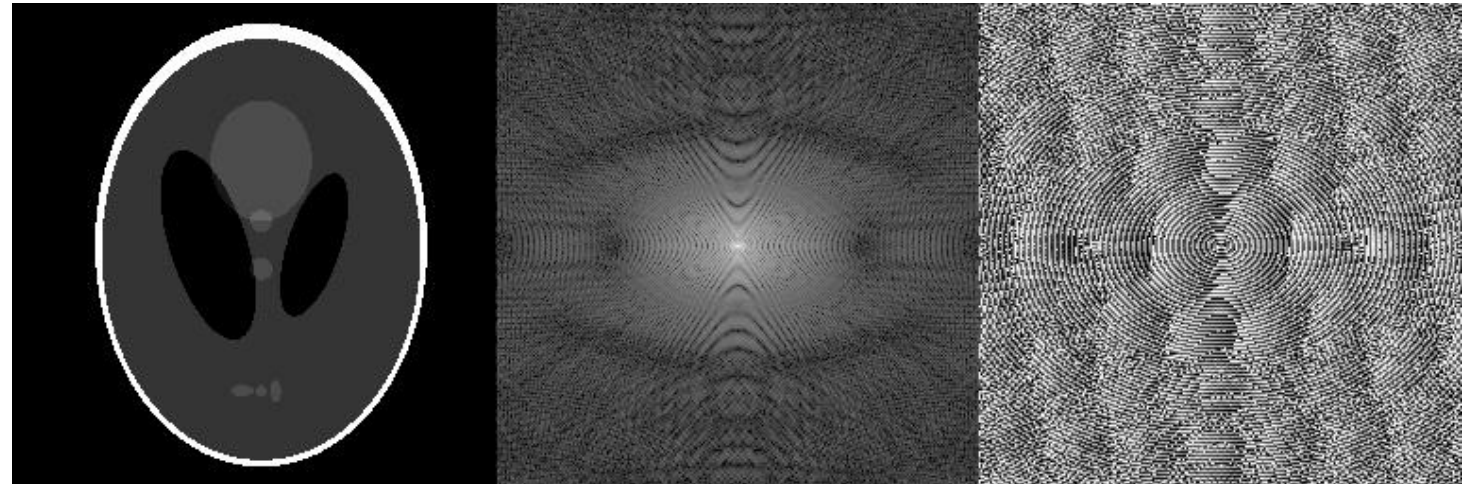
Motion in the k-space

- Translations

$$s(\bar{k}) = F\{\rho(\bar{x})\}(\bar{k}) = \int_{-\infty}^{\infty} \rho(\bar{x}) e^{-i2\pi\bar{k}\cdot\bar{x}} d\bar{x} \quad \xrightarrow{\bar{a} = (\Delta_x, \Delta_y, \Delta_z)} \quad F\{\rho(\bar{x} - \bar{a})\}(\bar{k}) = \int_{-\infty}^{\infty} \rho(\bar{x} - \bar{a}) e^{-i2\pi\bar{k}\cdot\bar{x}} d\bar{x}$$

Fourier Shift Theorem

$$F\{\rho(\bar{x} - \bar{a})\}(\bar{k}) = e^{-i2\pi\bar{k}\cdot\bar{a}} F\{\rho(\bar{x})\}(\bar{k})$$

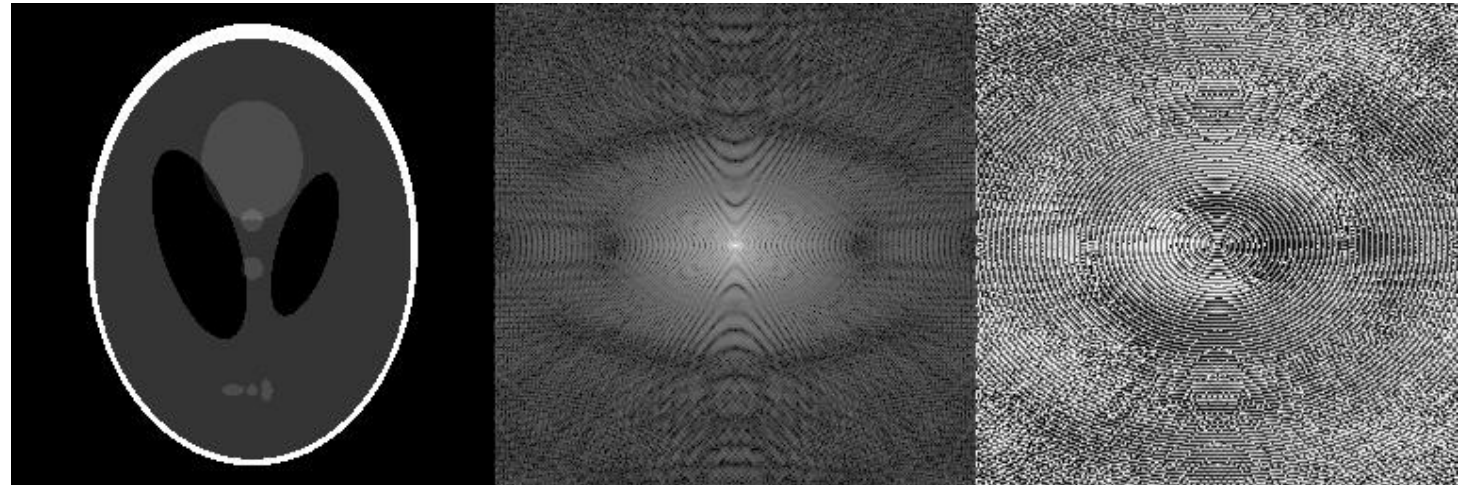


Motion in the k-space

- Rotations

$$\begin{aligned} F\{\rho(R\bar{x})\}(\bar{k}) &= \int_{-\infty}^{\infty} \rho(R\bar{x}) e^{-i2\pi\bar{k}\cdot\bar{x}} d\bar{x} \\ &= \int_{-\infty}^{\infty} \rho(\bar{y}) e^{-i2\pi(R\bar{k})\cdot\bar{y}} d\bar{y} \end{aligned}$$

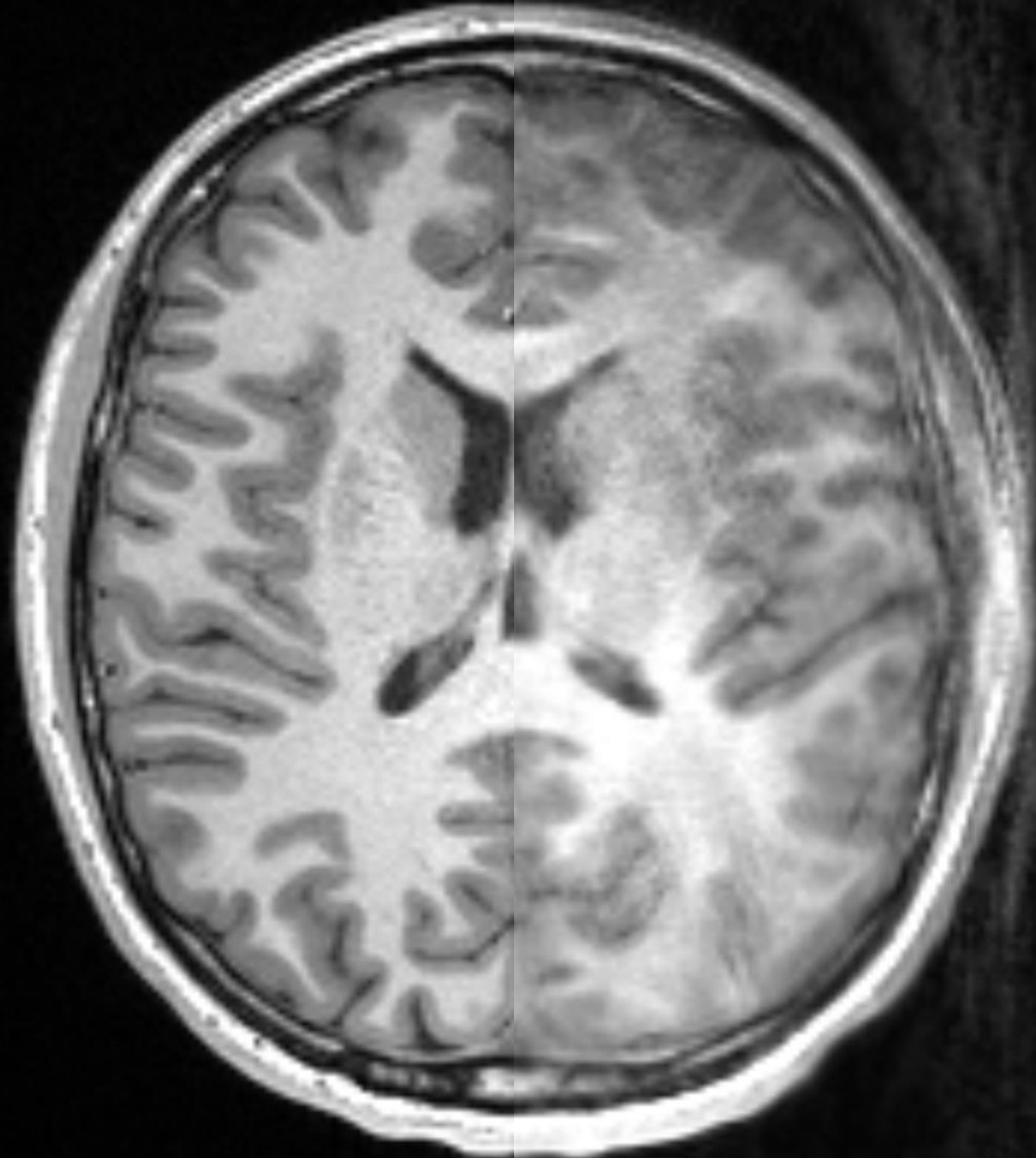
$$F\{\rho(R\bar{x})\}(\bar{k}) = F\{\rho(\bar{x})\}(R\bar{k})$$



Linear phase in a rotated k-space: $F\{\rho(R\bar{x} - \bar{a})\}(\bar{k}) = e^{-i2\pi(R\bar{k})\cdot\bar{a}} F\{\rho(\bar{x})\}(R\bar{k})$

Motion in MRI

Strategies



Motion Mitigation



Patient Positioning



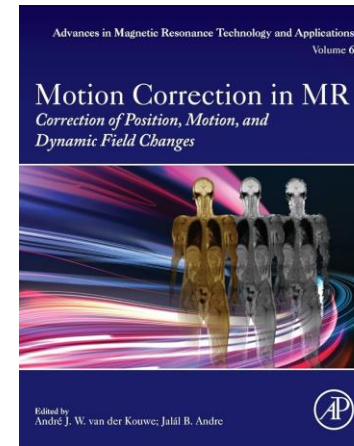
Guidance / Training



Sedation / GA

Motion Estimation

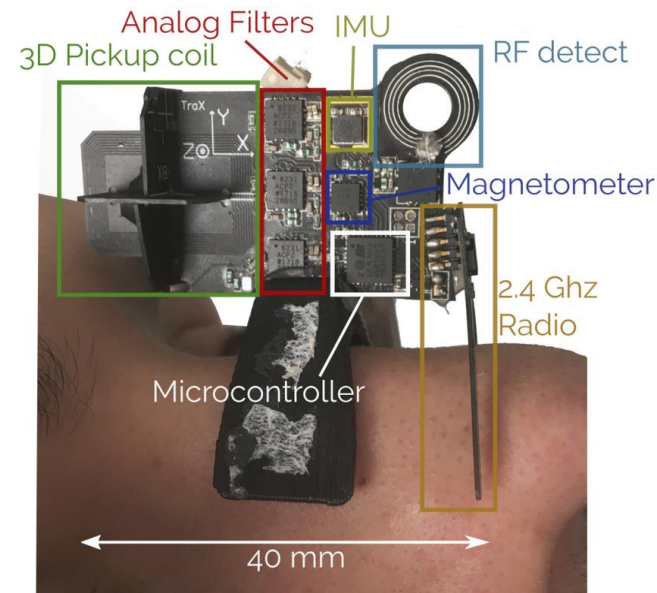
- External Tracking Systems
- Navigators
- Navigators without Gradients



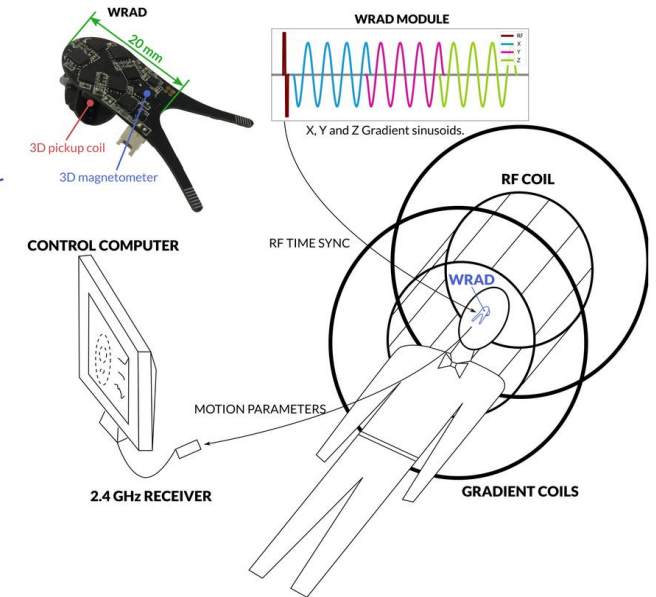
MoCo Virtual Seminars:
Educational/Scientific Talks

Attached Sensors

- Physically attached
- Field detection methods
- RF markers or magnetometers to detect the scanner gradient fields changing



Niekerk et al. IEEE Trans Med Imaging (2019)



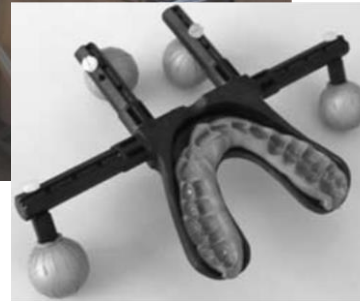
Norbeck et al. MRM (2020)

Camera systems using markers

Multi-camera systems

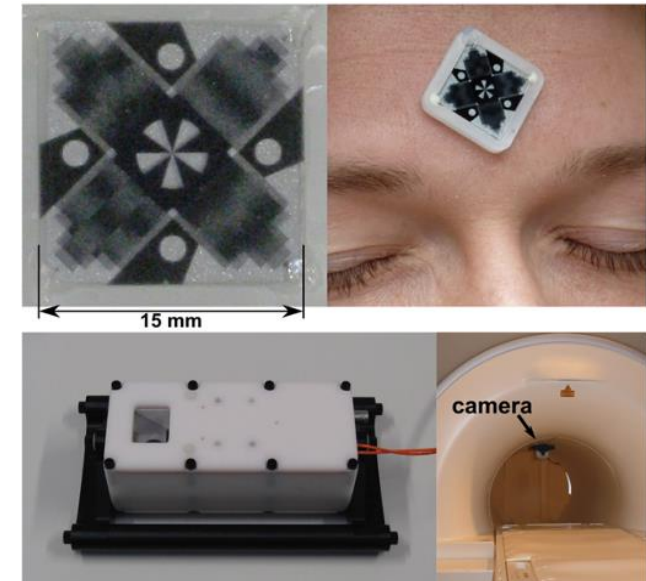


Zaitsev et al. NeurolImage (2006)



- Physically attached markers
 - Reflective markers
 - Pattern markers
 - e.g., Moiré Phase Tracking

Single camera systems



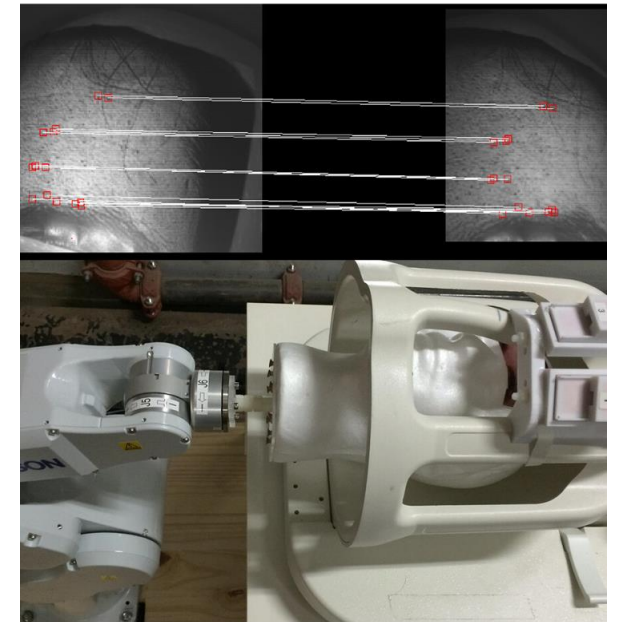
Maclaren et al. PLOS One (2012)

Camera systems without markers

- Tracking based on natural face or body features
 - Structured-light
 - Stereo-camera



Tracoline TCL3.1
Image courtesy of Stefan
Glimberg



Kyme et al. Med. Phys. (2020)

Review: Madore et al., External hardware and sensors, for improved MRI, JMRI (2023)

K-space-based navigators

- Based on Fourier properties
 - Rotations affect the magnitude
 - Translations affect the phase
- Different k-space trajectories

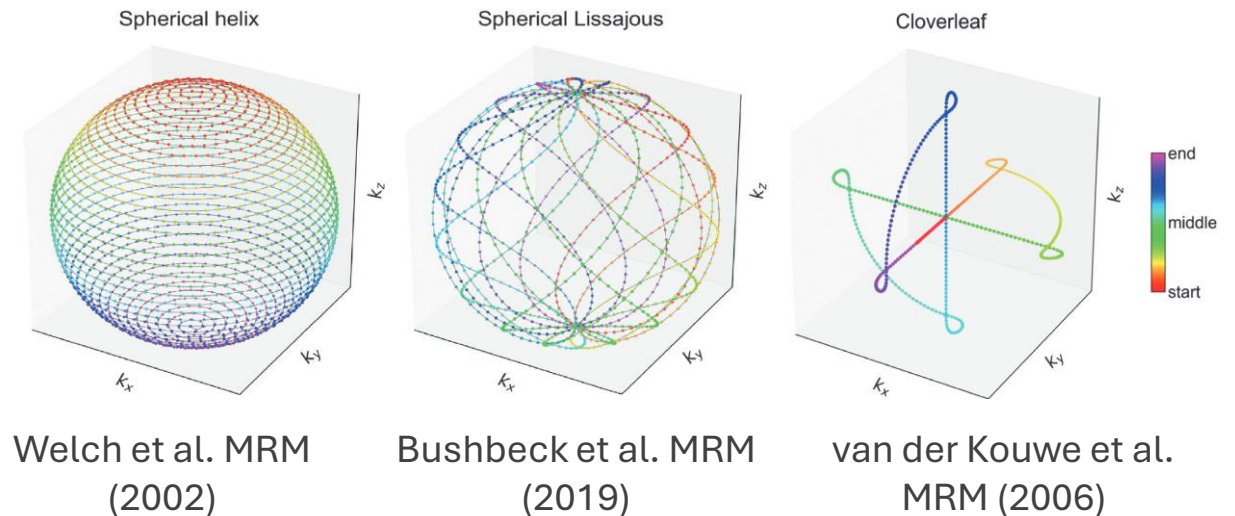


Image-based navigators

- Motion estimates derived reconstructed low-resolution images
- Fast 2D/3D acquisition

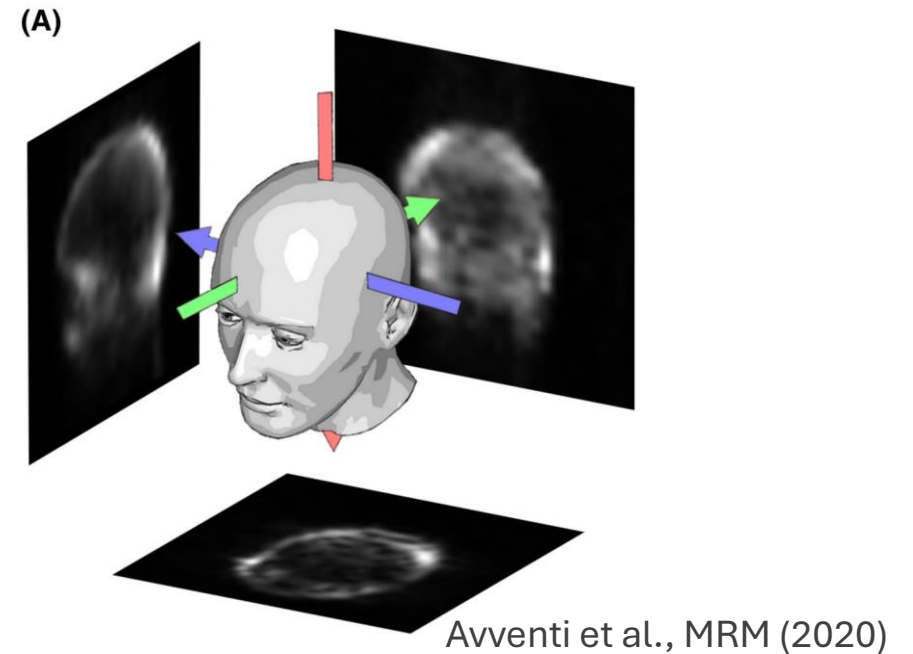
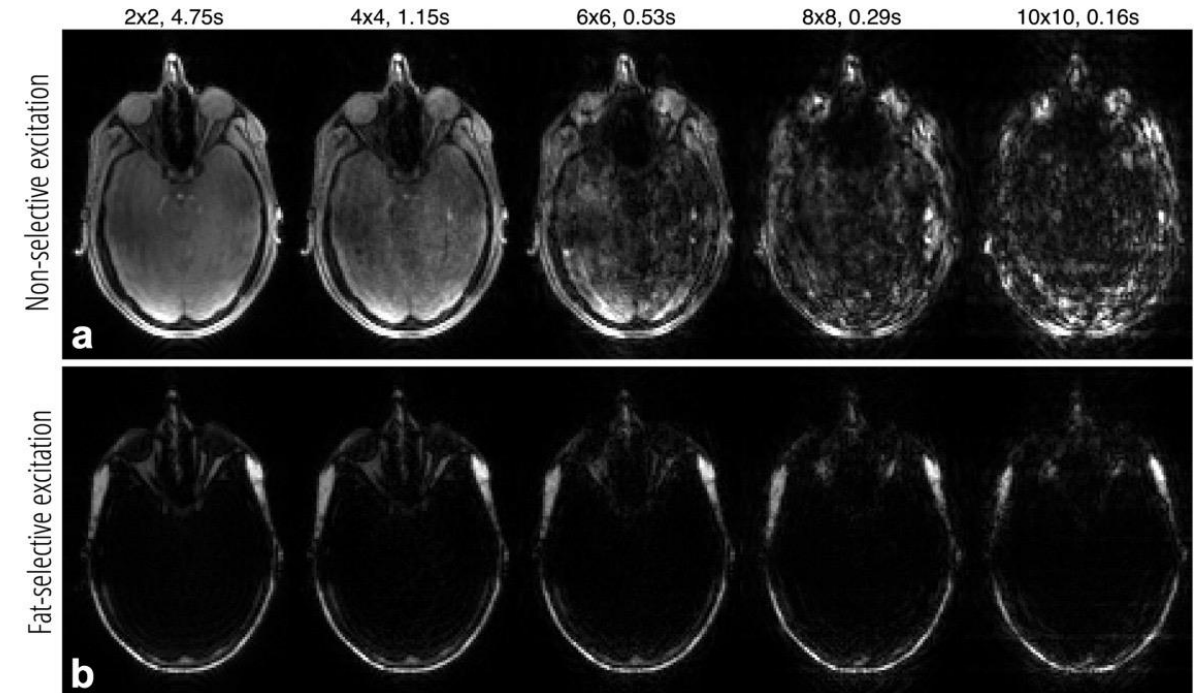


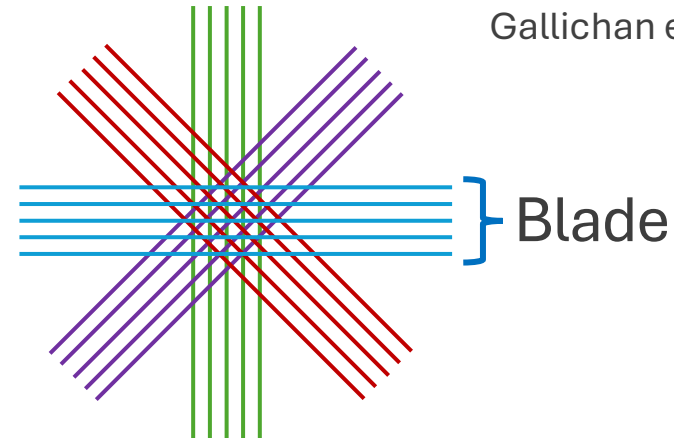
Image-based navigators

- Motion estimates derived reconstructed low-resolution images
- Fast 2D/3D acquisition
- Highly accelerated 3D volumes
- Enables self-navigated motion correction

○ *PROPELLER* (Pipe, MRM 1999)

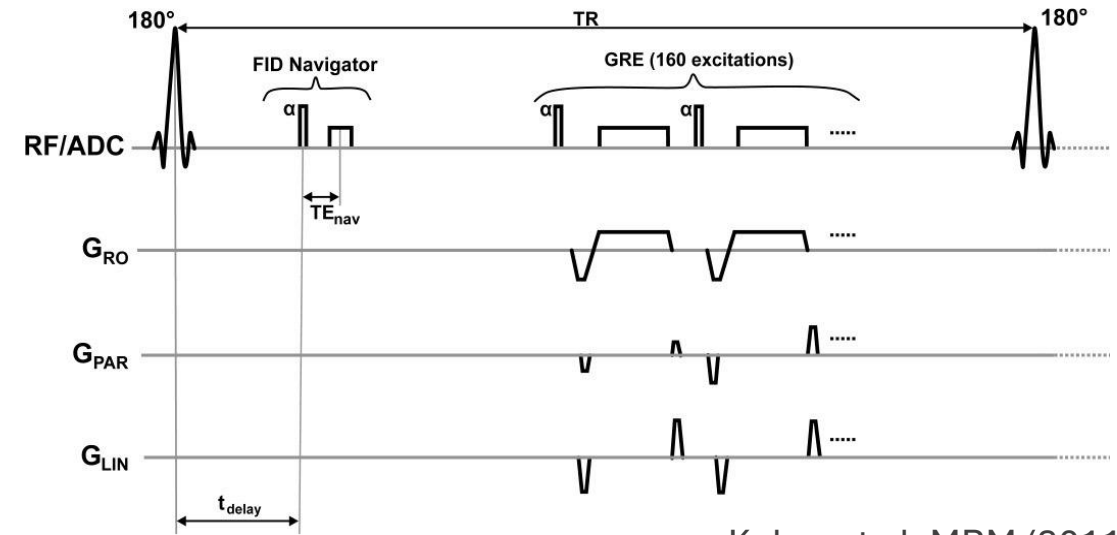


Gallichan et al. MRM (2016)

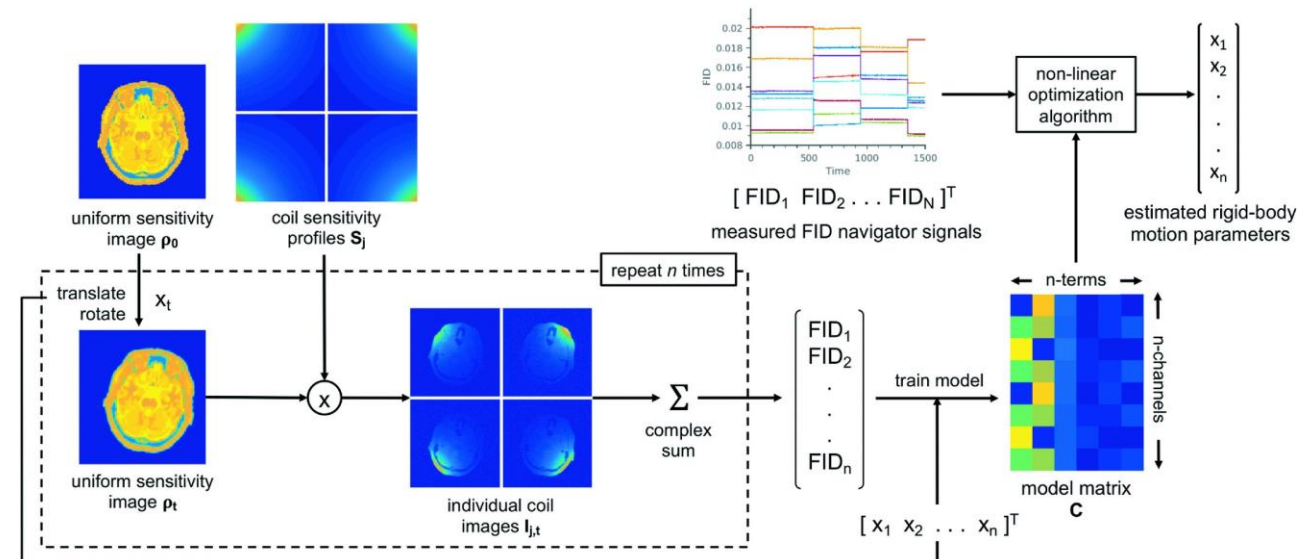


FID-Navigators

- Measuring the Free Induction Decay signal after an excitation pulse
- Monitor the signal information coming from a multi-channel coils over time
- Model of the FID signal in presence of motion

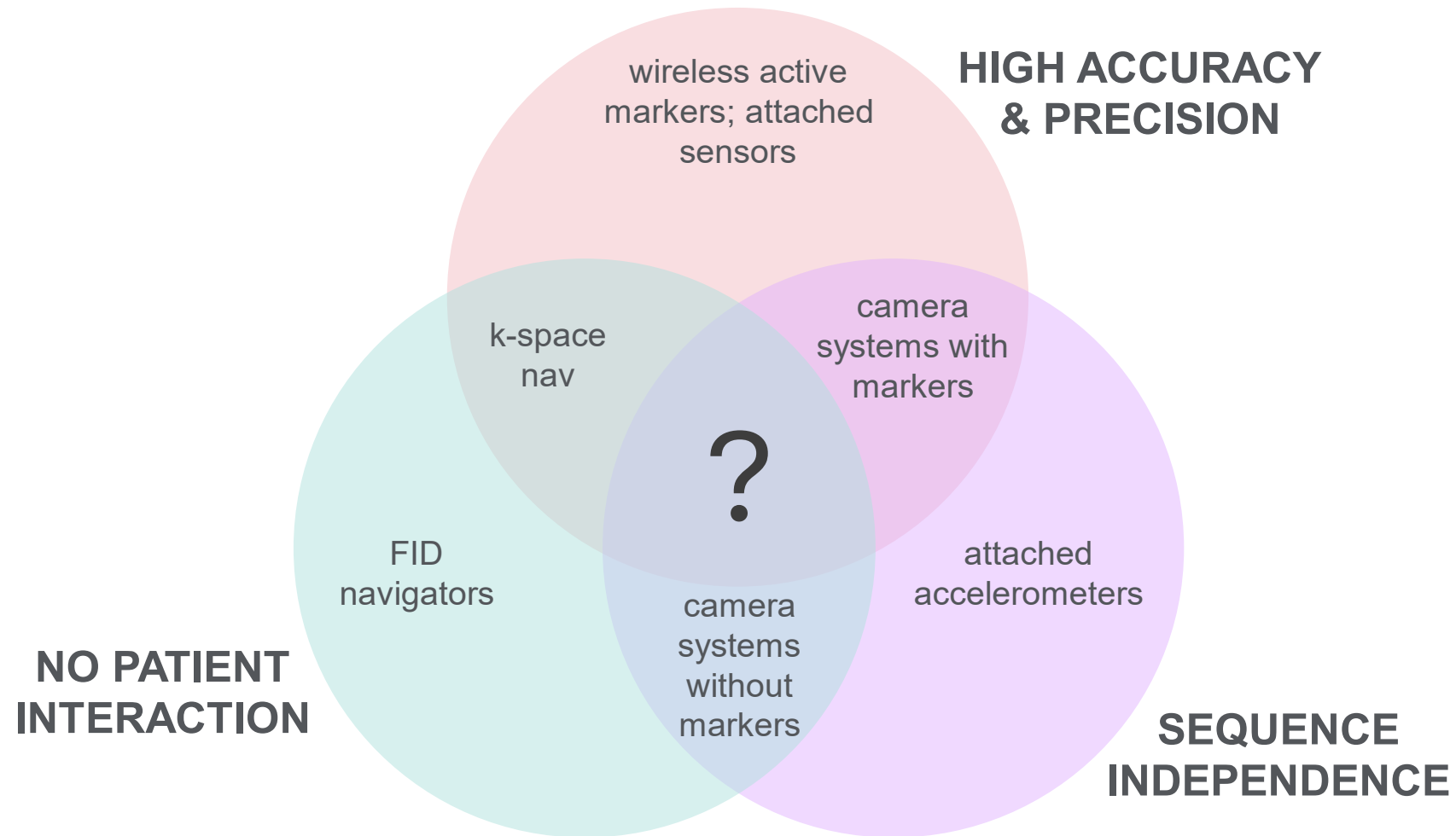


Kober et al. MRM (2011)



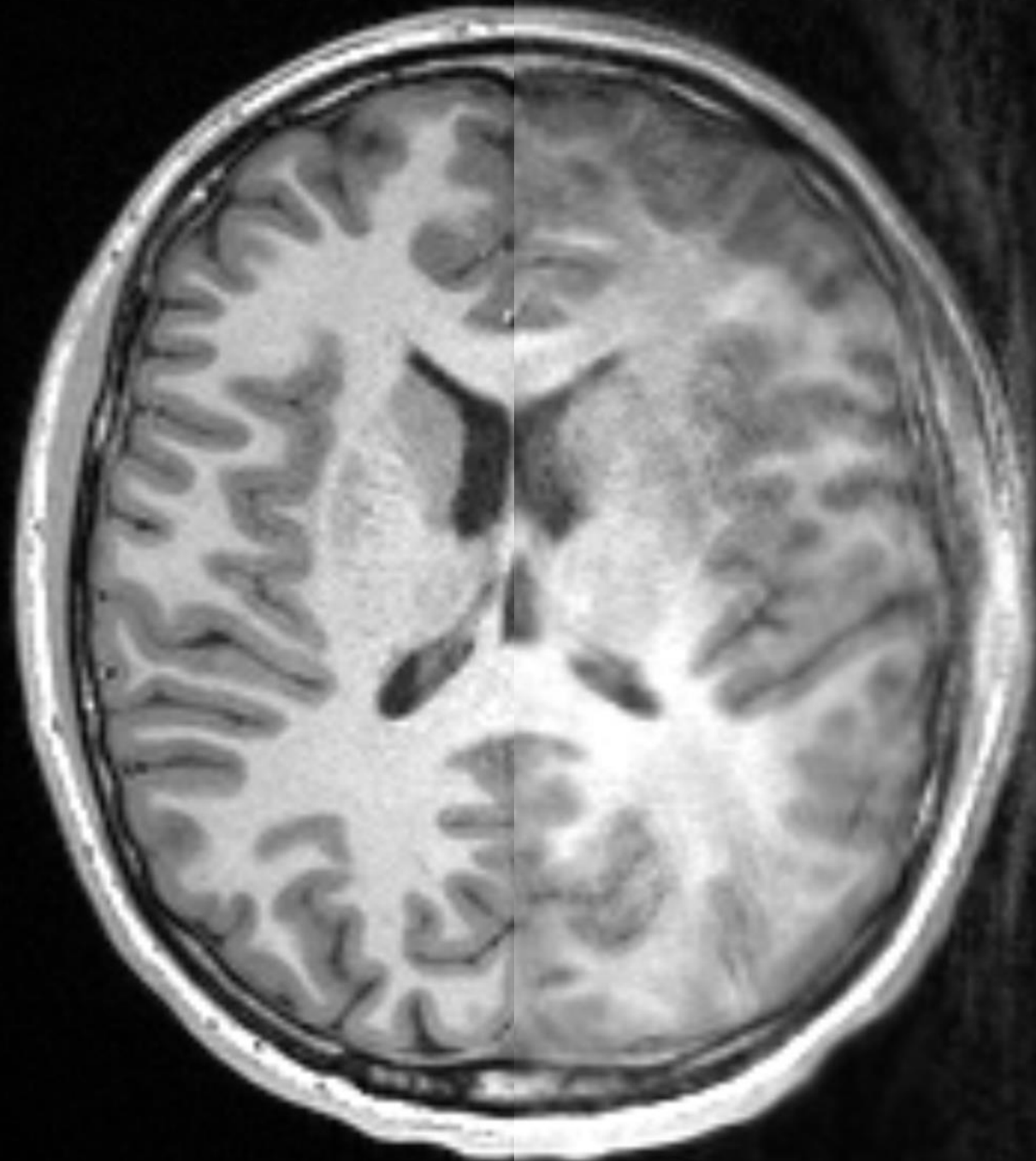
Wallace et al. MRM (2019)

Motion Estimation



Motion in MRI

Correction

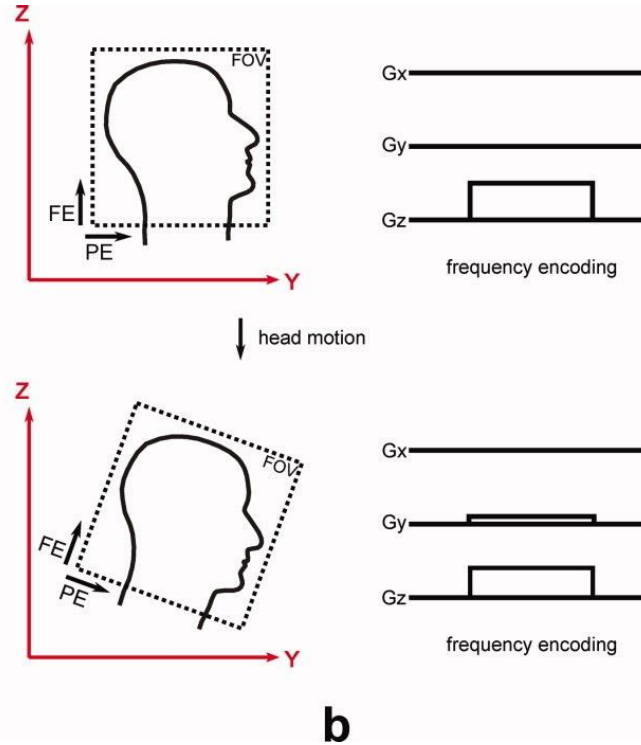


The diagram illustrates a closed-loop system architecture for motion correction. At the top center is a 3D rendering of a medical scanner gantry. Below it, three components are arranged in a triangle, connected by curved arrows forming a clockwise loop:

- scanner controller** (left circle): Receives **RF and gradient update** from the scanner and sends **object pose information** to the tracking modality.
- tracking modality** (right circle): Receives **object pose information** from the scanner controller and sends **motion** feedback to the scanner.

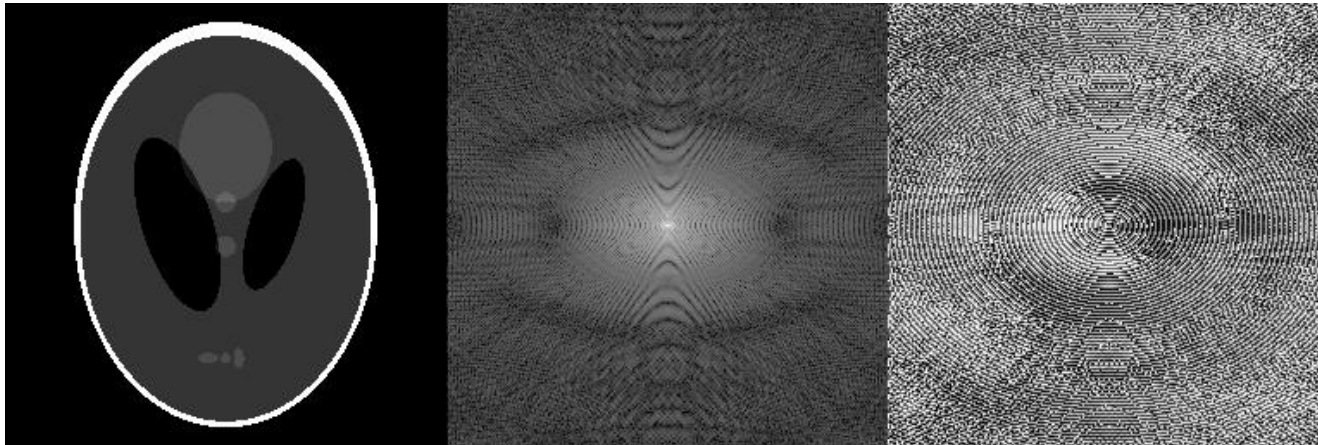
The scanner itself receives **motion** feedback from the tracking modality and sends **RF and gradient update** to the scanner controller.

a



- Maclaren et al. MRM (2012)

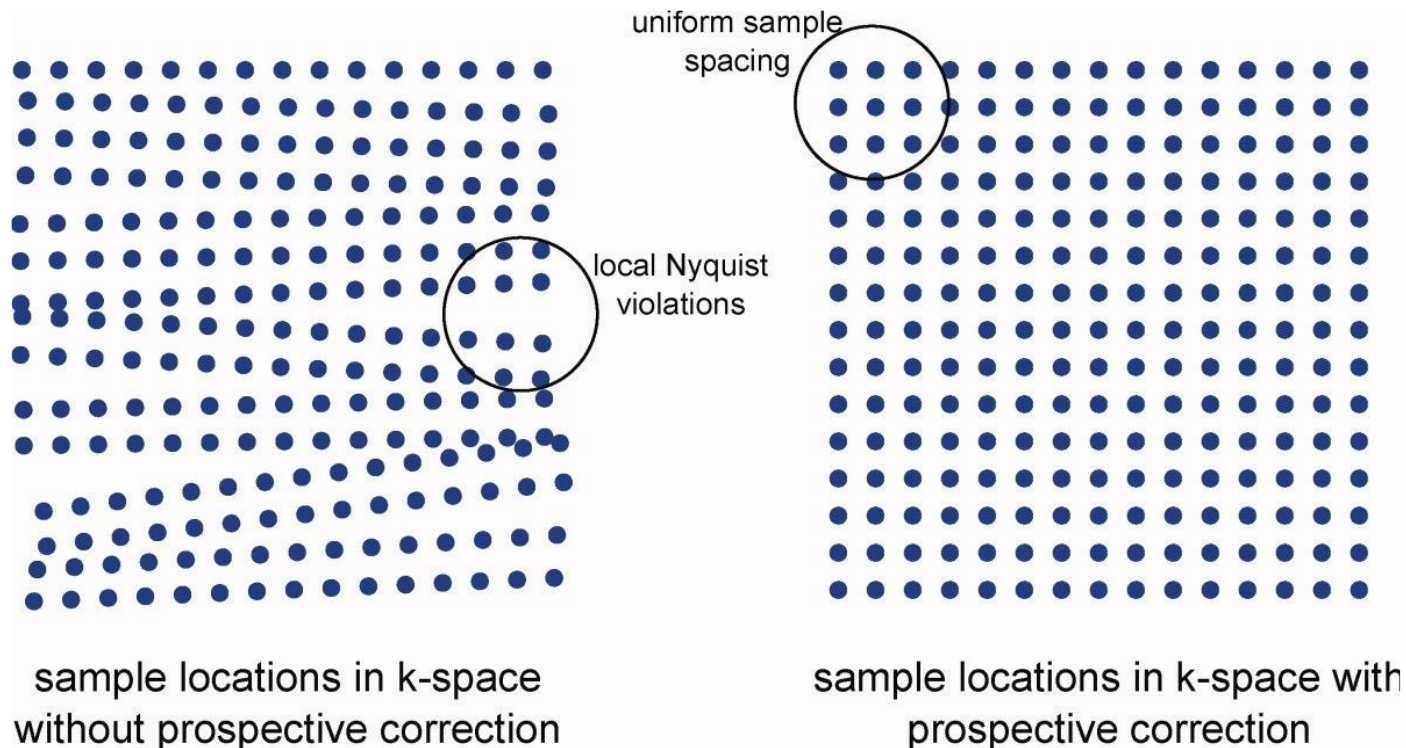
Retrospective Motion Correction



$$F\{\rho(R\bar{x} - \bar{a})\}(\bar{k}) = e^{-i2\pi(R\bar{k}) \cdot \bar{a}} F\{\rho(\bar{x})\}(R\bar{k})$$

- Applies Fourier properties
 - Fourier Shift Theorem
 - Rotation Theorem
- Uncorrected image is available
- Does not require any sequence adjustments

Retrospective Motion Correction



- Applies Fourier properties
 - Fourier Shift Theorem
 - Rotation Theorem
- Uncorrected image is available
- Does not require any sequence adjustments
- Rotations can cause the *pie-slice* effect, which can cause striking and ghosting artifacts
- Requires NFFT to resample the k-space into a Cartesian grid.

Autofocusing

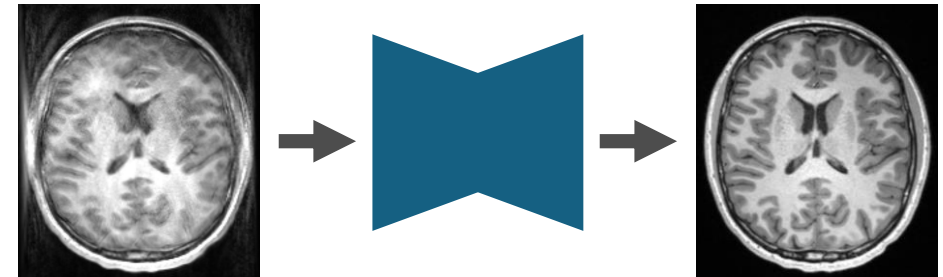
- Iterative correction based on Fourier shift and rotation theorems
- Correct motion estimates minimize a cost-function (e.g., image entropy in Atkinson et al. MRM 1999)
- **Cons**
 - Incorrect motion estimates can introduce artifacts if errors propagate through k-space
 - Computationally expensive
- **Potential use**
 - Improve efficiency using prior information (e.g., navigators)
 - Address residual artifacts remaining after initial motion correction



Motion correction with Deep Learning



Deep Learning has shown capability
to cope with complex problems

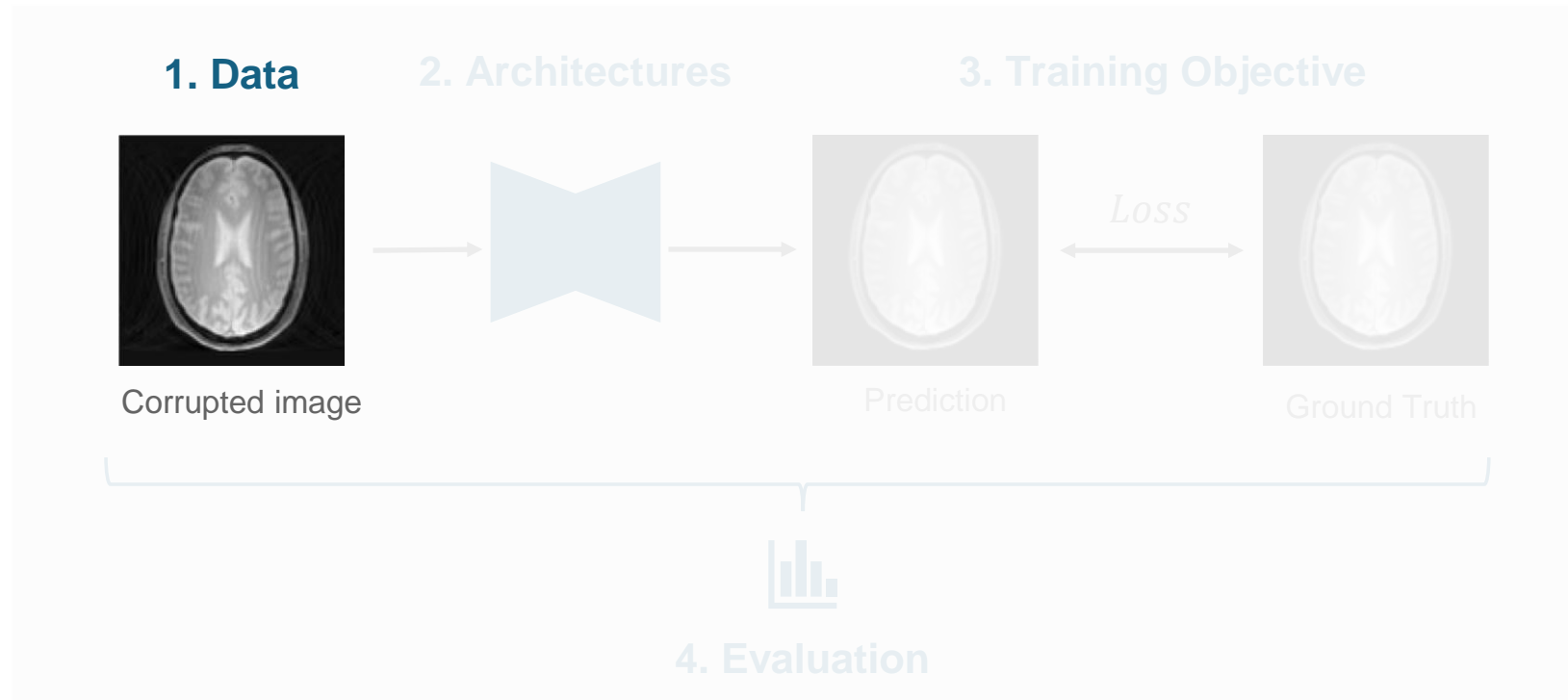


Various approaches for retrospective
motion correction



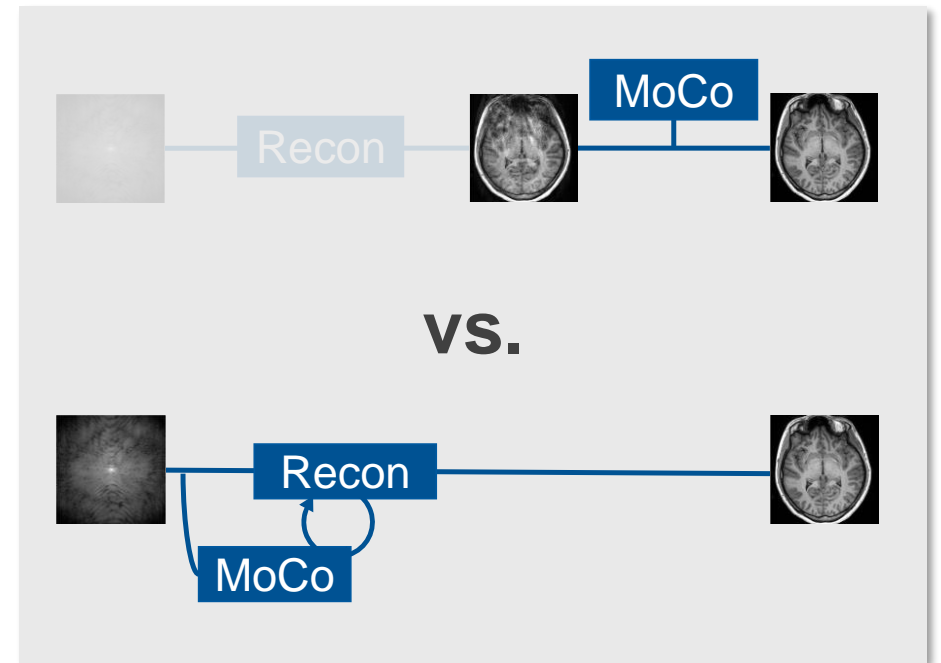
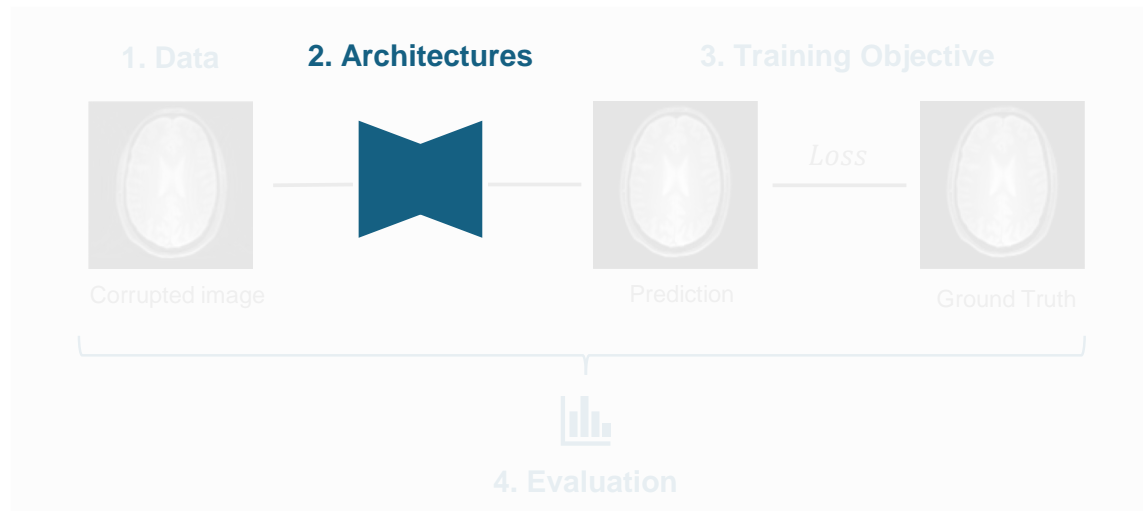
Motion correction with Deep Learning

Aspects of learning-based motion correction



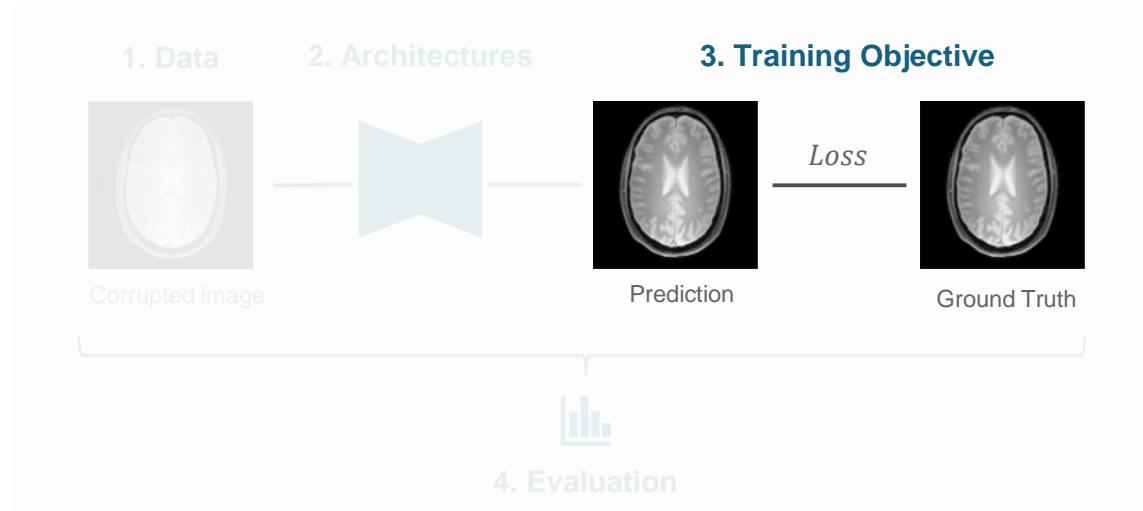
Motion correction with Deep Learning

Architectures: image-based vs. k-space-based

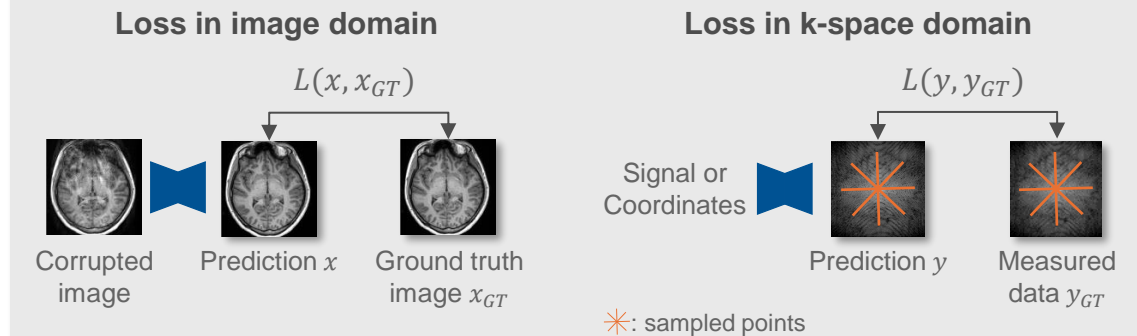


Motion correction with Deep Learning

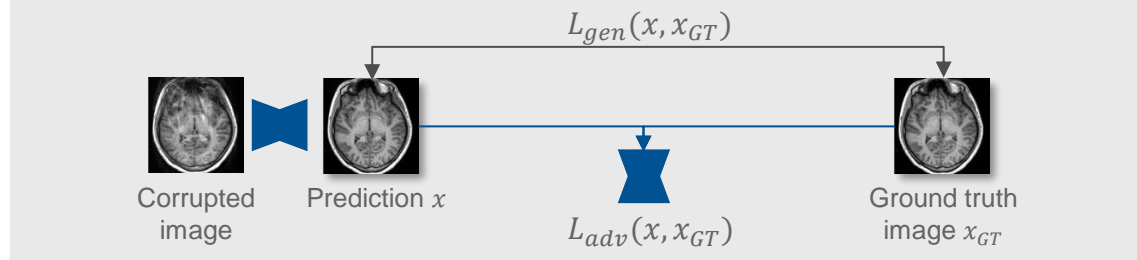
Training objectives: how much supervision?



A Classical training

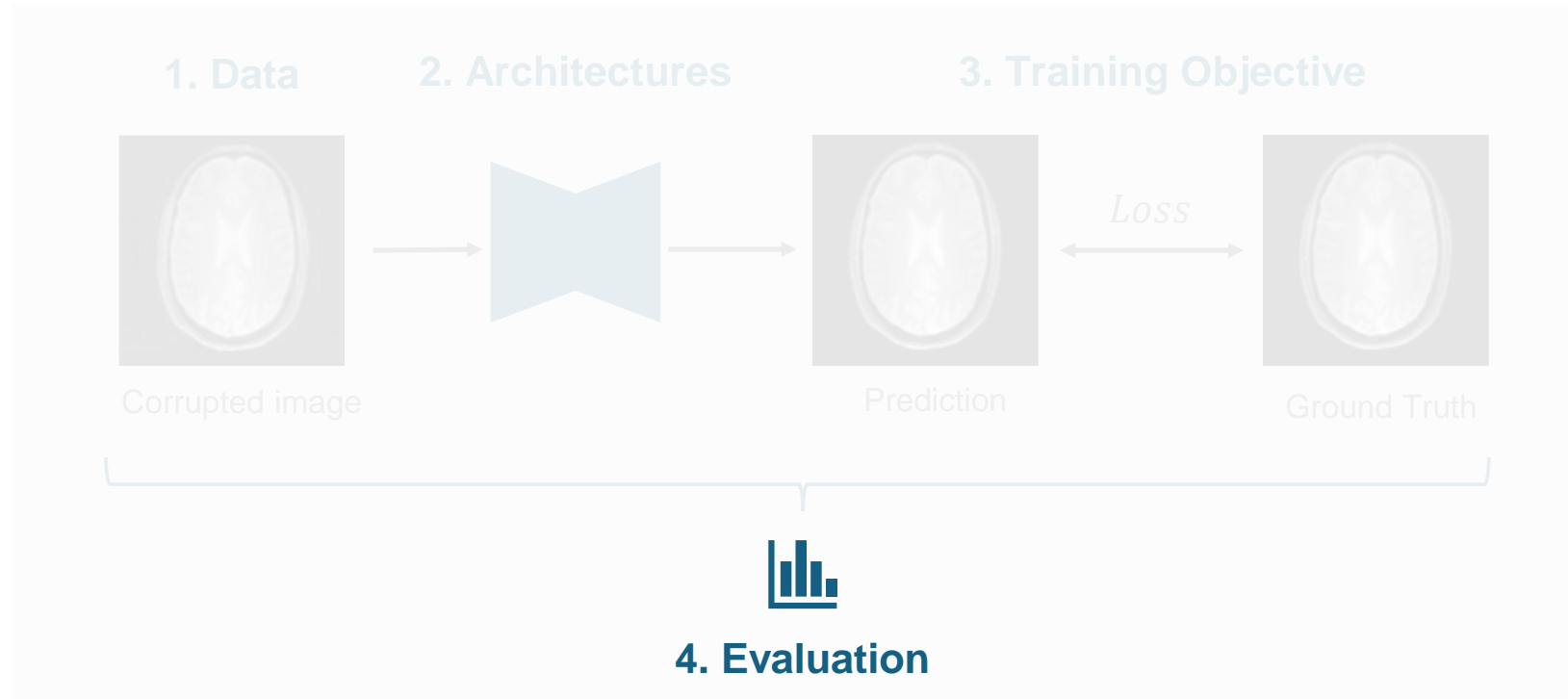


B Adversarial training



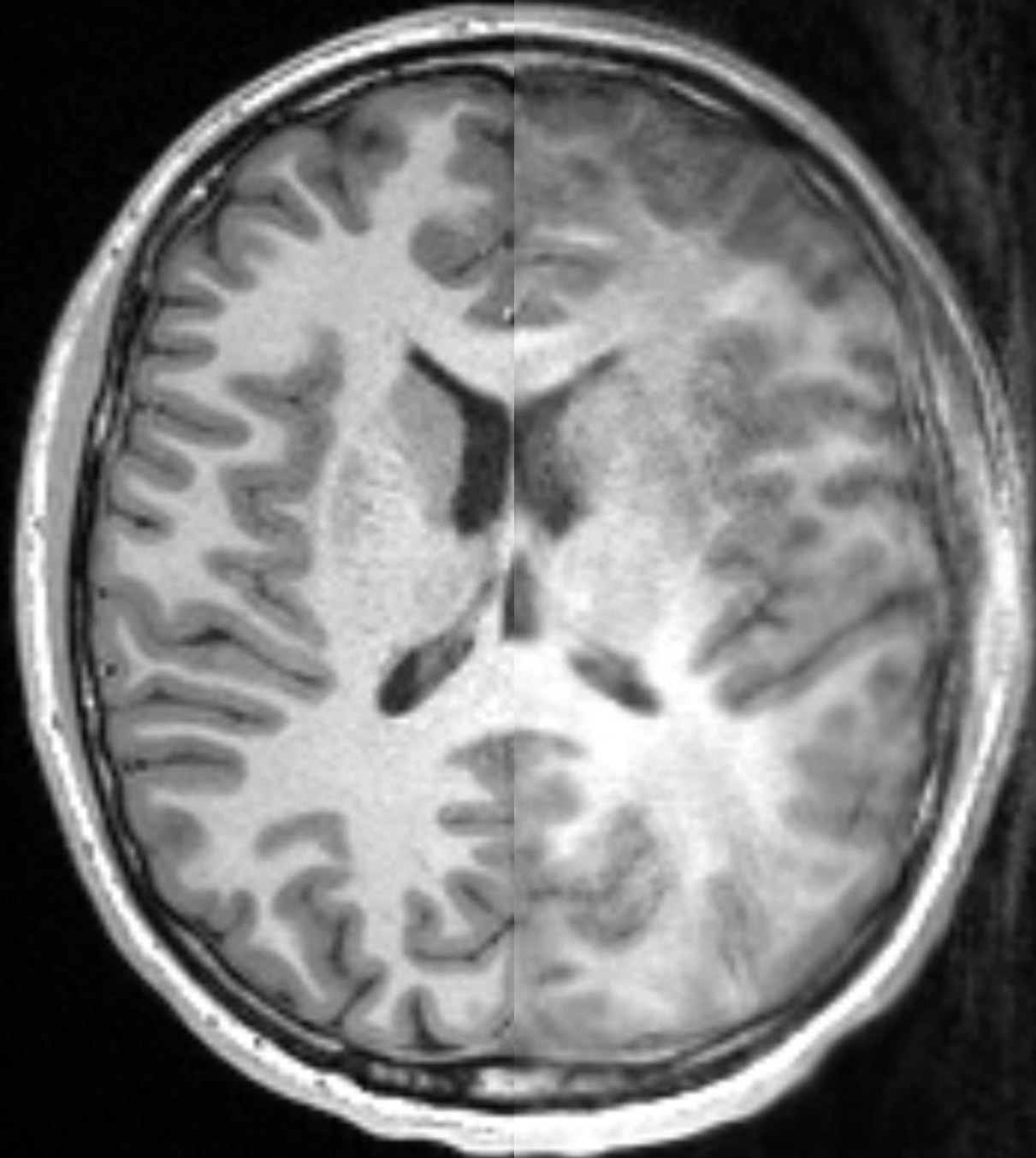
Motion correction with Deep Learning

Aspects of learning-based motion correction



Motion in MRI

Image Quality Evaluation

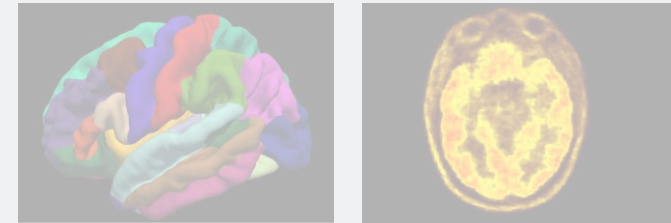


Types of image quality evaluation

Qualitative assessment



Task-based



Reference-based vs. reference free
image quality metrics (IQMs)

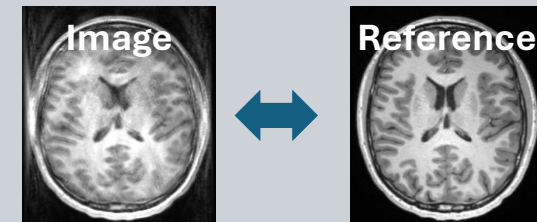
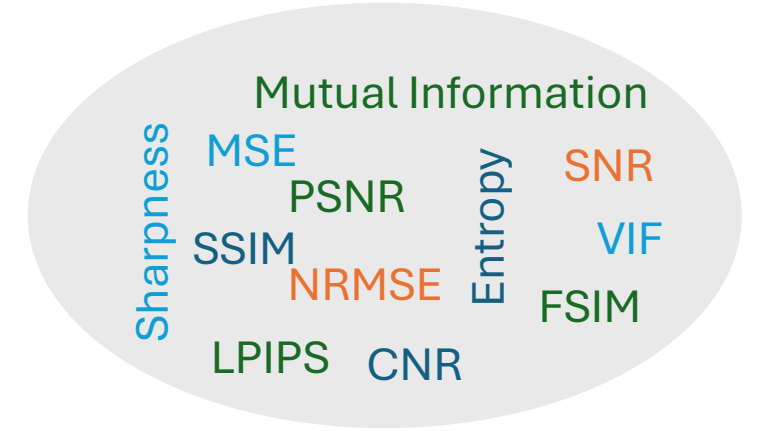


Image quality metrics

- Large number of IQMs used in literature
→ lack of standardization
- Most IQMs originally designed for natural images
- Medical image quality:
How well can the desired clinical information be extracted?
→ radiological evaluation gold standard

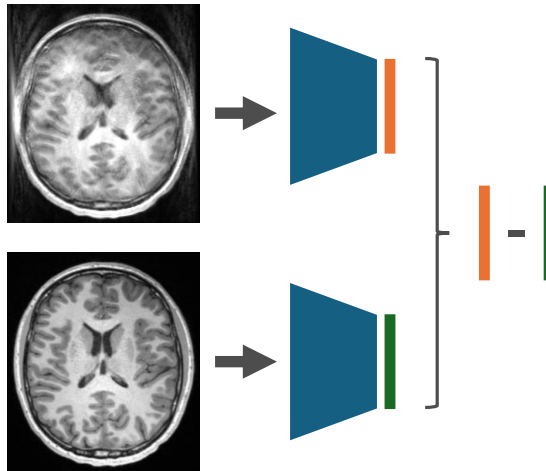


“To SSIM or not to SSIM?”

- SSIM and PSNR most used IQMs
- fastMRI challenges:
 1. SSIM consistent with radiological evaluation
 2. SSIM failed to detect hallucinations
- Recent studies:
 - SSIM and PSNR perform worse than more advance IQMS (e.g. FSIM, VIF)
 - SSIM less sensitive to simulated motion than e.g. VIF

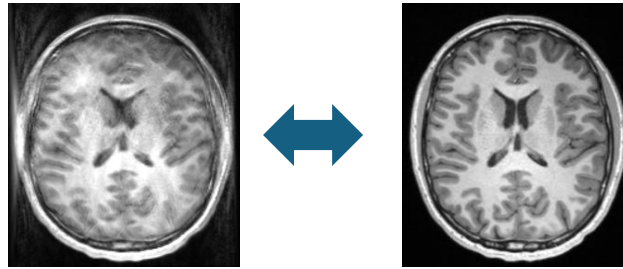


Perceptual metrics based on deep features



- Increasingly used in computer vision community
- First studies analyzing their potential in MRI (accelerated reconstruction)
- Comprehensive evaluation for motion in MRI missing

Reference-based vs. reference-free IQMs



- Reference-based IQMs rely on **high-quality reference**
 - “Hidden noise” problem
 - Reference not available for all applications



Reference-free image quality evaluation challenging

Agreement of Image Quality Metrics with Radiological Evaluation in the Presence of Motion Artifacts



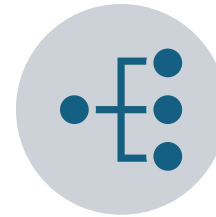
Performance of ten commonly used IQMs



Selection of IQMs focused on **relevance & usage** in the MoCo field



Based on **real motion** data



Effect of common **pre-processing** steps

Preprint:



Code:



Methods

Image Quality Evaluation

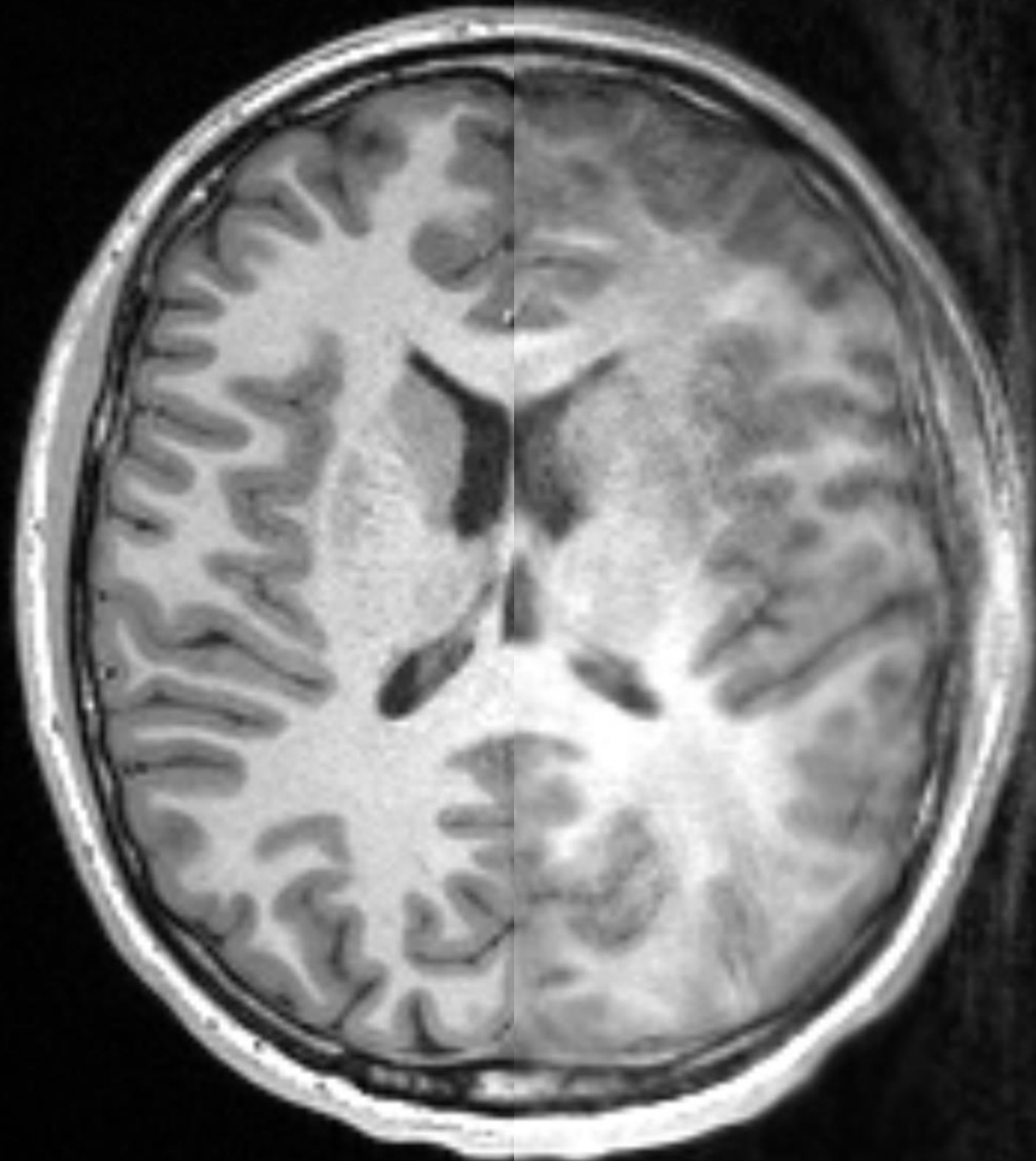




Image Quality Metrics

- Comparison of 10 different image quality metrics

- **5 Reference-Based**: require a reference (ground-truth) image
 - Reference image *without motion* and *without motion correction*
 - Good quality is not *always* guaranteed
 - Not always available in clinical practice

Structural Similarity Index Measure (SSIM)	Wang et al., IEEE (2004)
Peak Signal-to-Noise Ratio (PSNR)	Hore et al., 20 th ICPR (2010)
Feature Similarity Index Measure (FSIM)	Zhang et al., IEEE (2011)
Visual Information Fidelity (VIF)	Sheikh et al., IEEE (2006)
Perceptual Image Patch Similarity (LPIPS)	Zhang et al., Proc. IEEE (2018)



Image Quality Metrics

- Comparison of 10 different image quality metrics
 - **5 Reference-Free**: no reference (ground-truth) image required

Tenengrad (TG)	Kecskemeti et al., Radiology (2018)
Average Edge Strength (AES)	Pannetier et al., MRM (2016)
Normalized Gradient Square (NGS)	McGee et al., JMRI (2000)
Image Entropy (IE)	Atkinson ET AL., IEEE (1997)
Gradient Entropy (GE)	McGee et al., JMRI (2000)

Image Acquisition



Datasets from 2 research institutes:

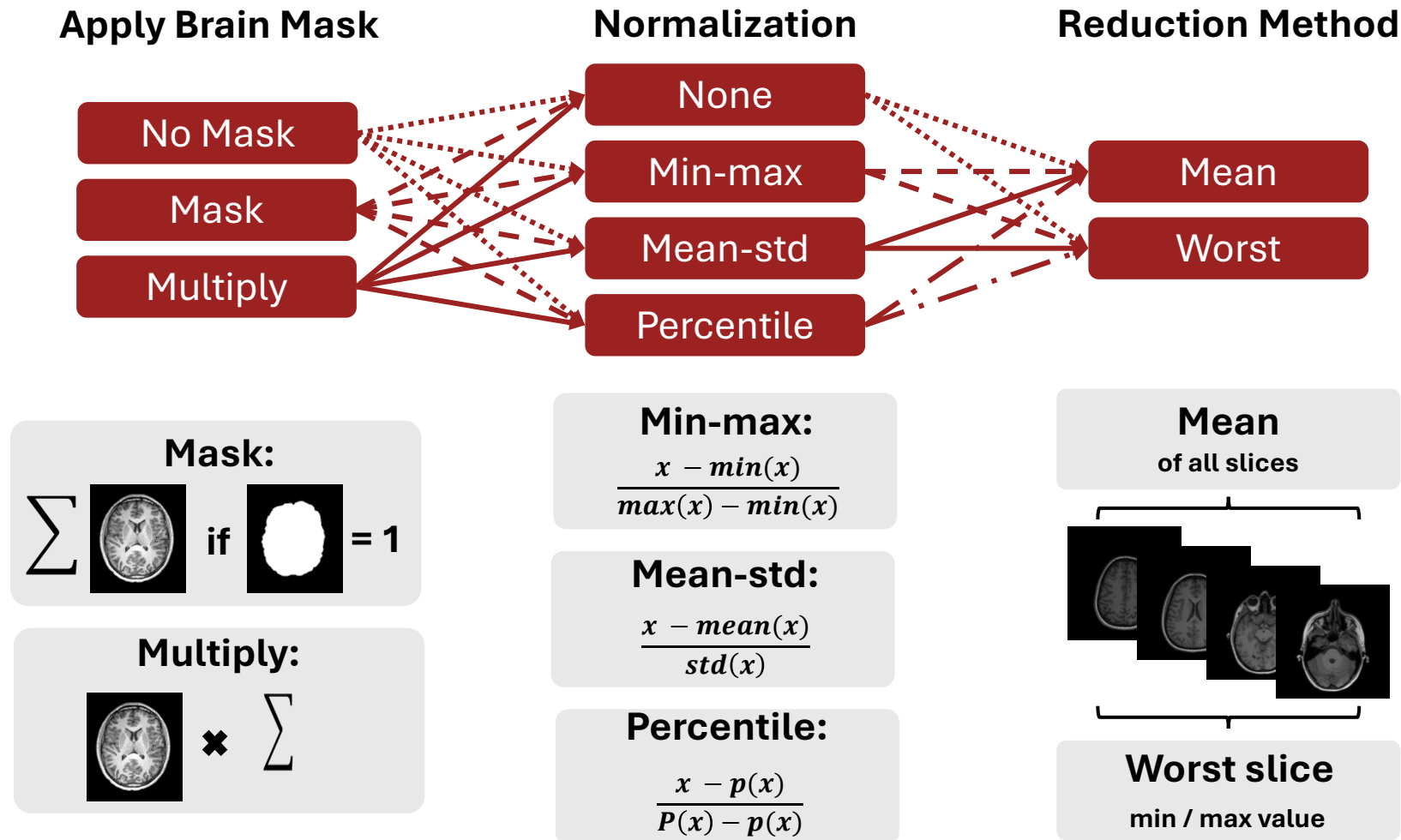
1. Neurobiology Research Unit - NRU (Copenhagen, Denmark)
2. Cardiff University Brain Research Imaging Centre - CUBRIC (Cardiff, UK)

Dataset 1 (NRU)

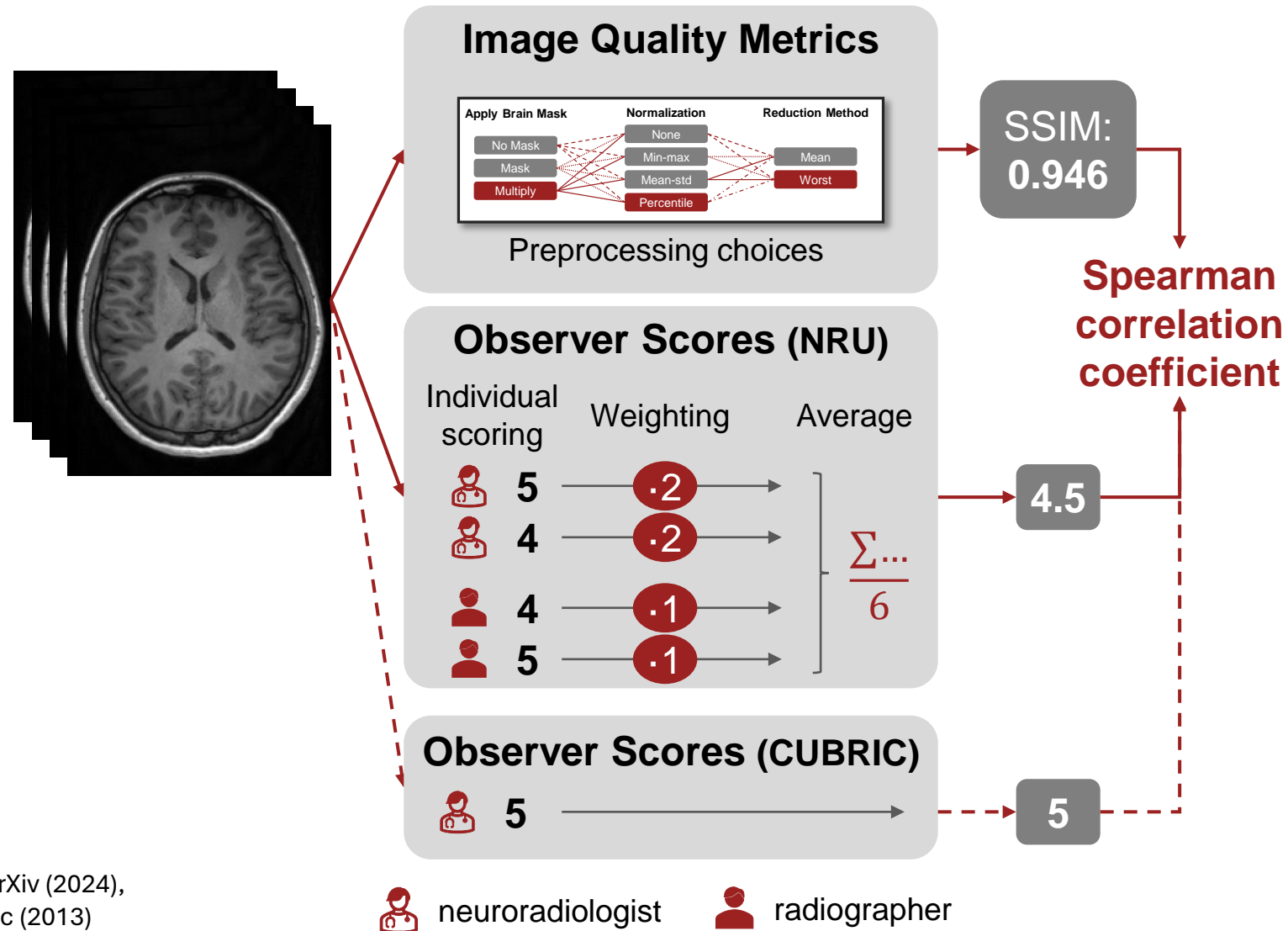
Dataset 2 (CUBRIC)

Scanner	Prisma 3T	Prisma 3T
Participants	22 healthy subjects	9 healthy subjects
Sequences	3D MP-RAGE, 3D T ₂ FLAIR, 2D T ₂ TSE, 2D T ₁ TIRM	3D MP-RAGE
Motion	Nodding and shaking	Nodding, circular-motion and stepwise motion
Motion correction	Prospective motion correction with marker-based method	Retrospective motion correction with marker-based and navigator-based methods.
Total images	584	217
Image quality assessment	2 Radiologists and 2 Radiographers	1 Radiologist

Pre-Processing Evaluation

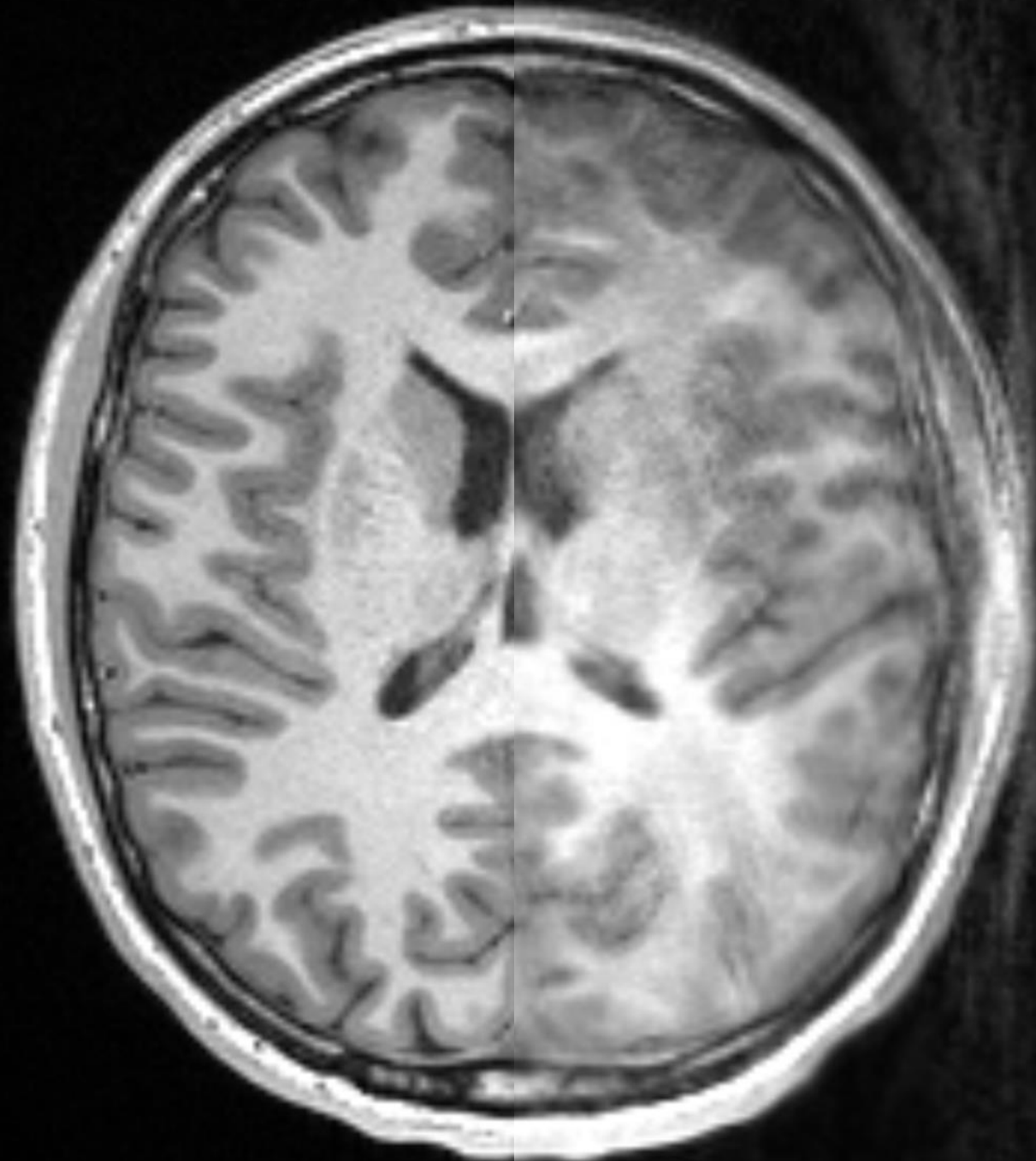


Correlation Analysis



Results

Image Quality Evaluation

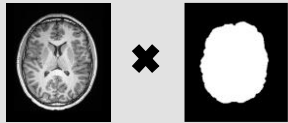


Correlation Analysis

"Default" settings:

- Apply Mask:

Multiply:



- Normalization:

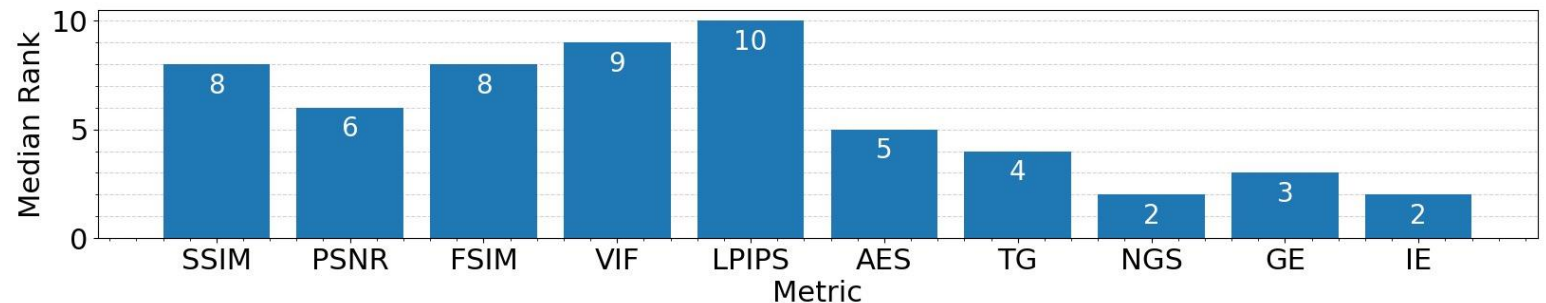
Percentile:

$$\frac{x - p(x)}{P(x) - p(x)}$$

- Reduction:

Worst slice

min / max value



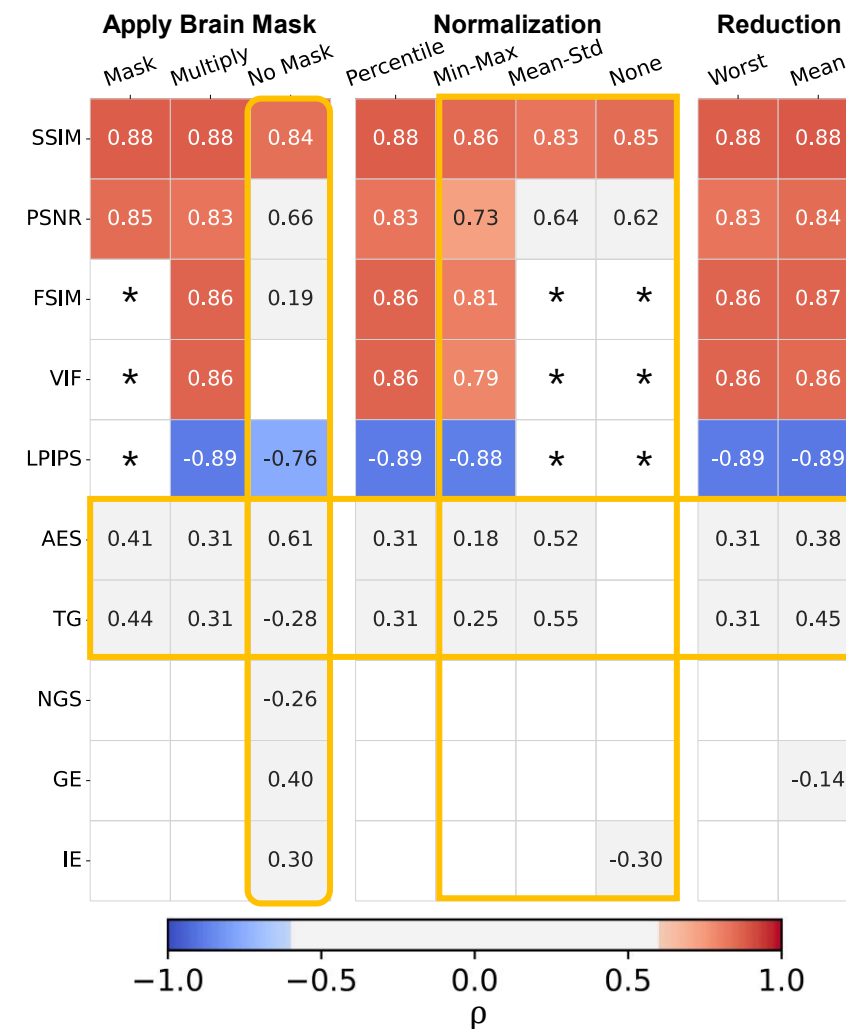
MP-RAGE

Dataset 1

Dataset 2

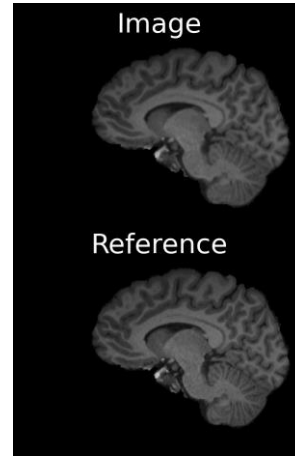
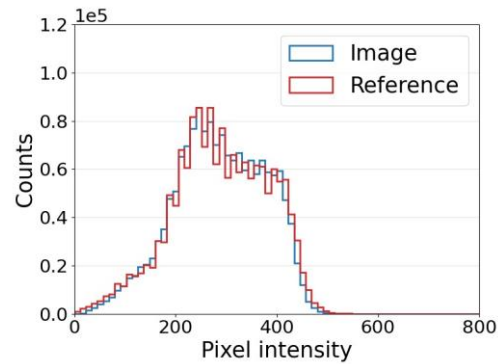
*could not be calculated
because metric requires
a certain range

No significant correlation

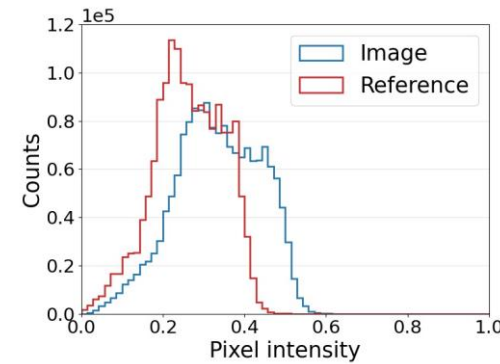


Effect of Normalization

A None

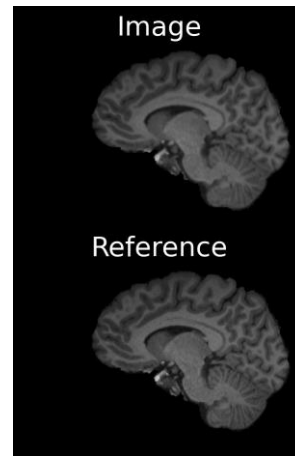
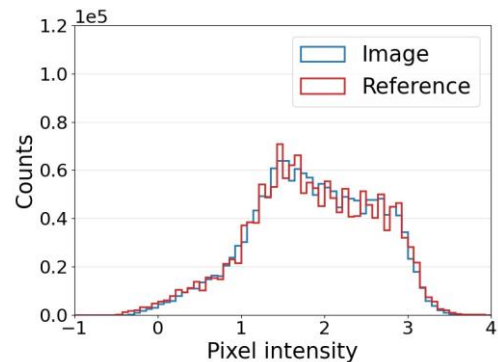


B Min-max

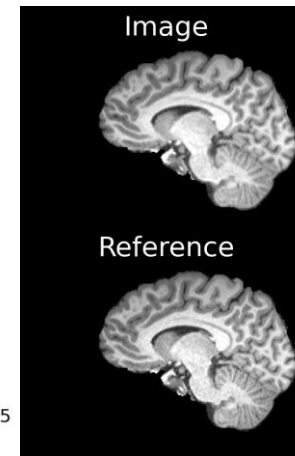
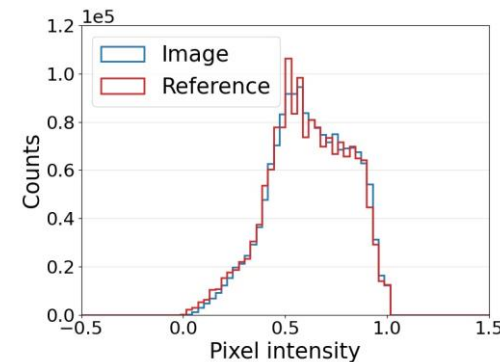


*Calculated within the brain mask

C Mean-std

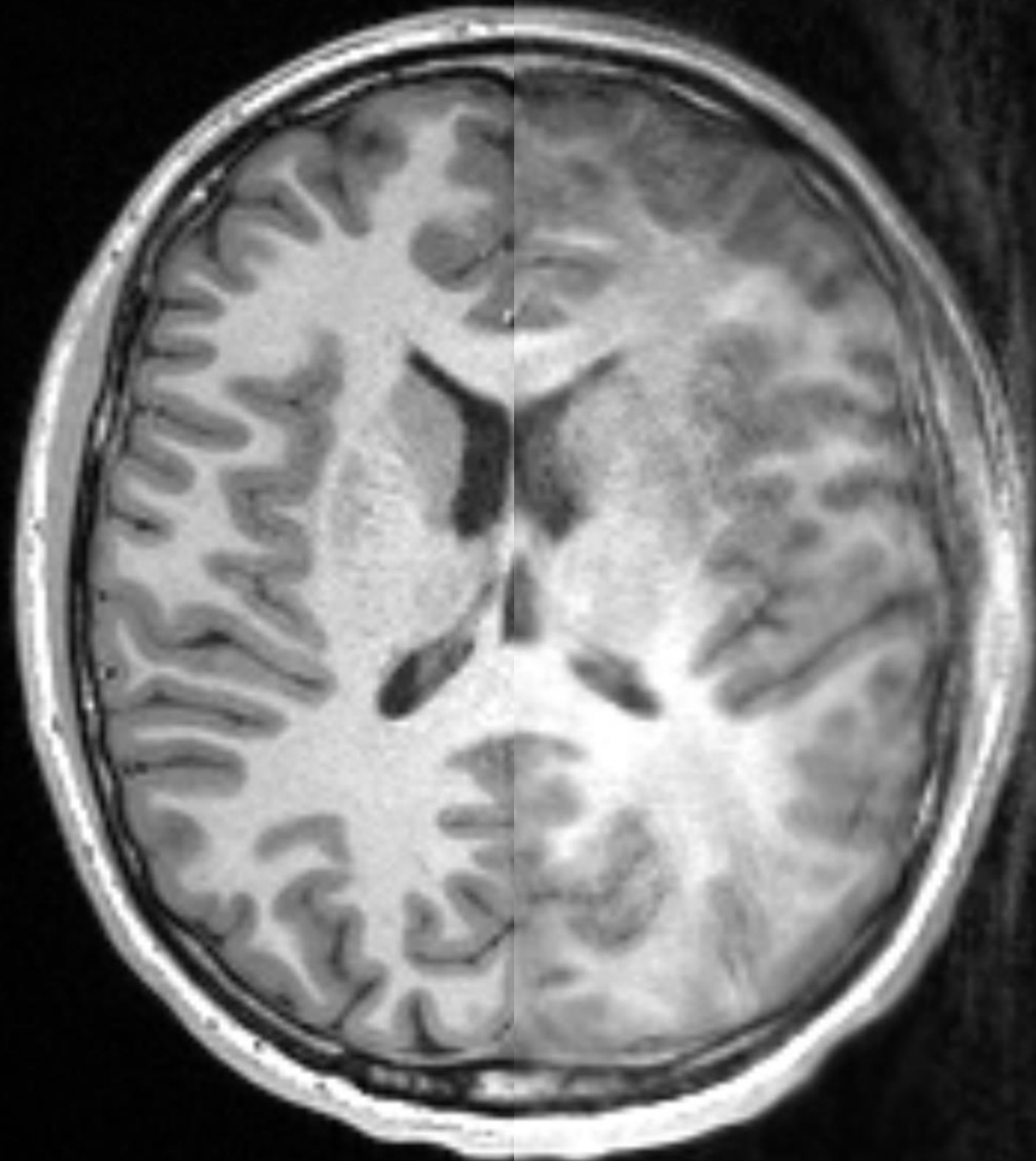


D Percentile



Discussion

Image Quality Evaluation

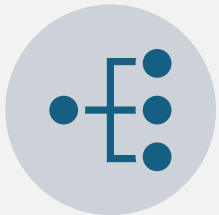


Discussion



Reference-based IQMs
more consistent than
reference-free IQMS

*Best reference-free IQMS:
Average Edge Strength
& Tenengrad*



Normalization and
masking proved essential

*We recommend:
percentile normalization
and using a brain mask*

! Masking might be
• application-specific

Outlook & future work



Further pre-processing steps



Influence of mis-registration

→ *quality inspection,
clear documentation
& code sharing*



Distribution-based
metrics & learning-based
approaches promising

Thank you!

... also to L. Bortolotti, R. Frost and
A. van der Kouwe for the slide courtesies.

Work together with **Melanie Ganz**,
Daniel Gallichan, Julia A. Schnabel



Preprint:



Code:



We gratefully acknowledge funding by:

elsass
foundation

MUDS Munich School for
Data Science
HELMHOLTZ · TUM · LMU



Let's start the discussion...

... What are key barriers for real-time quality evaluation in the clinical workflow and how to overcome them?

... What would be requirements for AI-based automated quality evaluation methods?

... How can we ensure AI-based methods remain interpretable and generalizable?

... How can the MR community establish standardized datasets and benchmarks to ensure consistent IQM comparisons across studies?

Preprint:



Code:



Work together with **Melanie Ganz**,
Daniel Gallichan, Julia A. Schnabel



