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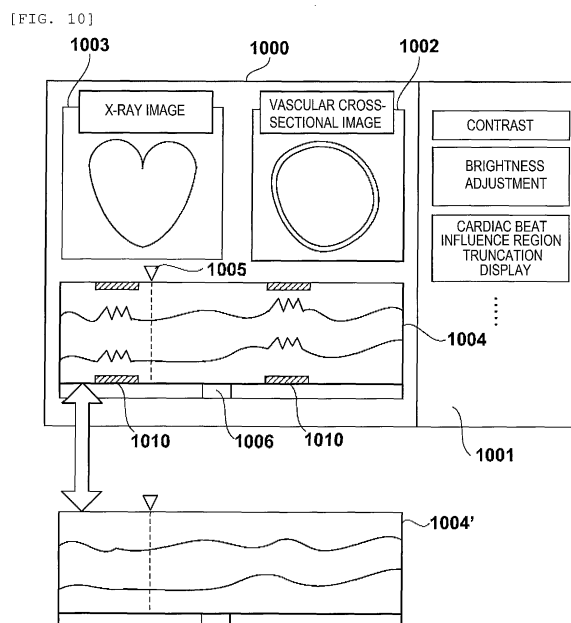
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(54) **IMAGE DIAGNOSTIC DEVICE, METHOD FOR CONTROLLING SAME, PROGRAM, AND COMPUTER-READABLE STORAGE MEDIUM**

(57) According to the present invention, when acquiring data through a rotation position and a movement of an imaging core, X-ray images at a fixed viewpoint position are synchronized so as to be continuously input along a time axis. Then, timing when vascular activity such as a cardiac beat and the like occurs is determined based on the X-ray images. A plurality of vascular cross-sectional images on a plane orthogonal to a vascular axis acquired through the rotation and the movement of the imaging core are acquired. Then, a vascular image along the vascular axis is generated from the vascular cross-sectional image or the vascular cross-sectional images in series, and when performing a display, a site having vascular activity is displayed in a discriminable manner.



Description

Technical Field

5 **[0001]** The present invention relates to a technology of generating a tomographic image of a biological tissue by using light or ultrasounds.

Background Art

10 **[0002]** Conventionally, imaging apparatuses for diagnosis have been widely used to perform diagnoses of arteriosclerosis, and to perform preoperative diagnoses or to check postoperative results when intra-vascular treatment is performed using a high-performance catheter such as a balloon catheter, a stent, and the like.

[0003] The imaging apparatus for diagnosis includes an intra-vascular ultrasound apparatus for diagnosis (IVUS), an optical coherence tomography apparatus for diagnosis (OCT), and the like, each of which has characteristics different from one another.

15 **[0004]** In addition, recently, an imaging apparatus for diagnosis (an imaging apparatus for diagnosis including an ultrasound transmitting and receiving unit which can transmit and receive ultrasounds, and a light transmitting and receiving unit which can transmit and receive light) in which a function of the IVUS and a function of the OCT are combined together has been proposed (for example, refer to PTL 1 and PTL 2).

20 **[0005]** The aforementioned imaging apparatus for diagnosis obtains tomographic images which are orthogonal to the axis of a blood vessel. Therefore, a three-dimensional image can be generated by connecting the tomographic images in series. Once the three-dimensional image is generated, the tomographic image can be obtained at a free viewpoint and a free cross section.

25 **[0006]** Incidentally, a blood vessel which is positioned close to the heart, particularly, the coronary artery which is positioned so as to surround the heart is influenced by beating activities (hereinafter, simply referred to as "the cardiac beat") of the heart, and the position thereof changes. Even though the continuous tomographic images along a vascular axis of the blood vessel are obtained by the above-described imaging apparatus for diagnosis, when there is vascular activity, for example, a site influenced by a cardiac beat resulting in vascular activity and a site not influenced do not smoothly connect to each other, thereby exhibiting unnatural images. In a case of an experienced doctor, it may be understood that the unnatural site implies an occurrence of an influence of vascular activity such as a cardiac beat and the like. However, it is difficult for other ones to judge the state.

30 **[0007]** PTL 3 discloses a known technology of detecting cardiac beating activity and correcting the image. According to the technology, a position sensor is provided inside a catheter and scanned (IVUS or OCT) images are recorded together with positions detected by the position sensor. Certainly, it is possible to confirm a movement locus of the catheter when the catheter internally equipped with the position sensor is used. However, it is difficult to determine whether the locus is caused due to the shape of a blood vessel or such a movement locus occurs due to a cardiac beat.

Citation List

40 Patent Literature

[0008]

PTL 1: JP-A-11-56752
 45 PTL 2: JP-A-2006-204430
 PTL 3: JP-A-2005-253964

Summary of Invention

50 Technical Problem

[0009] The present invention has been made in consideration of the above-described problems. In this Description, provided is a technology which clearly displays a site having vascular activity and a site without thereof (for example, a site influenced by a cardiac beat and a site not influenced).

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Solution to Problem

[0010] In order to solve the above-described problems, according to this Description, there is provided an imaging

apparatus for diagnosis as follows.

[0011] That is,

there is provided an imaging apparatus for diagnosis acquiring information of an inside of a blood vessel and reconstructing a vascular image by using a probe that accommodates an imaging core which emits light or ultrasounds toward a lumen surface of a blood vessel of an examinee and detects reflection thereof, so as to rotate the imaging core and to move the imaging core along the probe at a predetermined velocity, the apparatus including:

X-ray image acquisition means for continuously acquiring X-ray images of the examinee along a time axis while acquiring the information of the inside of the blood vessel by performing the rotation and the movement of the imaging core;

specification means for specifying the vascular-activity occurrence X-ray image based on a degree of relationship of an adjacent X-ray image with respect to the time axis of the X-ray image which is acquired by the X-ray image acquisition means,

determination means for determining a corresponding position of the moving imaging core for imaging timing of the X-ray image which is specified by the specification means;

generation means for generating the axially-directed cross-sectional image along the vascular axis based on the information acquired through the rotation and the movement of the imaging core; and

display means for displaying a composite result of the axially-directed cross-sectional image which is generated by the generation means and an image which shows the position determined by the determination means.

Advantageous Effects of Invention

[0012] According to this Description, when displaying a vascular image orthogonal to a vascular axis or a vascular image along the vascular axis, a site influenced by vascular activity (for example, a site which is estimated to be influenced by a cardiac beat) can be displayed in a discriminable manner.

[0013] Other features and advantages of the present invention will be clearly described below with reference to the accompanying drawings. In the accompanying drawings, the same reference numerals and signs will be applied to the same or similar constitutions.

Brief Description of Drawings

[0014] The accompanying drawings are incorporated in this Description, take part in the constitution, illustrate embodiments of the present invention, and are used to describe the principle of the present invention together with the disclosure thereof.

[Fig. 1] Fig. 1 is a diagram illustrating a constitution of the appearance of an imaging apparatus for diagnosis of the present embodiment.

[Fig. 2] Fig. 2 is a diagram illustrating an overall constitution of a probe unit and a cross-sectional constitution of a distal end portion.

[Fig. 3] Fig. 3 is a diagram illustrating a functional constitution of the imaging apparatus for diagnosis.

[Fig. 4] Fig. 4 is a diagram for illustrating reconstruction processing of a cross-sectional image.

[Fig. 5] Fig. 5 is a diagram illustrating an example of reconstructed three-dimensional model data of a blood vessel.

[Fig. 6] Fig. 6 is a diagram for illustrating an example of a two-dimensional X-ray image of the embodiment.

[Fig. 7] Fig. 7 is a diagram for illustrating synchronization between storage data which becomes a base of a tomographic image and the X-ray image in the embodiment.

[Fig. 8] Fig. 8 is a flow chart illustrating a procedure of processing of the embodiment.

[Fig. 9] Fig. 9 is a flow chart illustrating detailed processing of Fig. 8 deciding a cardiac beat influence section.

[Fig. 10] Fig. 10 is a diagram illustrating an example of a user interface displayed in a display screen of the imaging apparatus for diagnosis in the embodiment.

[Fig. 11A] Fig. 11A is a diagram illustrating an example of another display form of a cross section of the blood vessel in an axial direction.

[Fig. 11B] Fig. 11B is a diagram illustrating an example of further another display form of the cross section of the blood vessel in the axial direction.

Description of Embodiments

[0015] Hereinafter, embodiments of the present invention will be described in detail with reference to the accompanying drawings. In this Description, descriptions are given regarding an example which is applied to an apparatus for acquiring

an optical tomographic image. However, the embodiments can be applied to an apparatus which uses ultrasounds or an apparatus which uses both light and ultrasounds. Therefore, the present invention is not limited to the aforementioned point.

1. Constitution of Appearance of Imaging Apparatus for Diagnosis

[0016] Fig. 1 is a diagram illustrating a constitution of the appearance of an imaging apparatus 100 for diagnosis according to an embodiment of the present invention.

[0017] As illustrated in Fig. 1, the imaging apparatus 100 for diagnosis includes a probe unit 101, a scanner and pull-back unit 102 and an operation control device 103. The scanner and pull-back unit 102 and the operation control device 103 are connected to each other through a signal wire 104 so as to be able to transfer various signals.

[0018] An imaging core which is directly inserted into a blood vessel is interpolated into the probe unit 101. The imaging core includes a light transmitting and receiving unit which continuously transmits transferred light (measurement light) into a blood vessel and continuously receives reflected light from the inside of the blood vessel. In the imaging apparatus 100 for diagnosis, the imaging core is used to measure a state inside a blood vessel.

[0019] The probe unit 101 is attached to the scanner and pull-back unit 102 in a freely detachable manner. A built-in motor is driven so as to define axial motion inside a blood vessel and rotary motion around the axis of the imaging core which is interpolated into the probe unit 101.

[0020] The operation control device 103 includes a function of inputting various setting values when performing measurement and a function of processing data obtained through the measurement and displaying various images of a blood vessel.

[0021] In the operation control device 103, the reference numeral 111 indicates a main body control unit. The main body control unit 111 causes reflected light obtained through the measurement to interfere with reference light obtained by separating light from a light source, thereby generating interference light data, and the main body control unit 111 performs processing of line data generated based on the interference light data, thereby generating a vascular cross-sectional image (a radially-directed cross-sectional image).

[0022] The reference numeral 111-1 indicates a printer and DVD recorder, which prints a processing result of the main body control unit 111 and stores the processing result as data. The reference numeral 112 indicates an operation panel, and a user inputs various setting values and instructions via the operation panel 112. The reference numeral 113 indicates an LCD monitor as a display device, which displays a cross-sectional image generated in the main body control unit 111. The reference numeral 114 indicates a mouse which is a pointing device (a coordinate input device).

2. Overall Constitution of Probe Unit and Cross-sectional Constitution of Distal End Portion

[0023] Subsequently, an overall constitution of the probe unit 101 and a cross-sectional constitution of a distal end portion will be described with reference to Fig. 2. As illustrated in Fig. 2, the probe unit 101 is constituted to include an elongated catheter sheath 201 which is inserted into a blood vessel, and a connector portion 202 which is disposed on a hand side of a user to be operated by the user without being inserted into a blood vessel. The distal end of the catheter sheath 201 is provided with a guide wire lumen tube 203 which fixes a guide wire 250 for guiding the probe unit 101 to the position of a blood vessel in a diagnostic target. The catheter sheath 201 forms a lumen which continues from a portion connected to the guide wire lumen tube 203 to a portion connected to the connector portion 202.

[0024] Inside the lumen of the catheter sheath 201, an imaging core 220 including a transmitting and receiving unit 221 and a coiled drive shaft 222 is inserted through the catheter sheath 201 throughout substantially the overall length thereof. In the transmitting and receiving unit 221, the light transmitting and receiving unit for transmitting and receiving light is disposed. The drive shaft 222 is internally provided with an optical fiber cable and transfers a rotary drive force for rotating thereof.

[0025] The connector portion 202 includes a sheath connector 202a which is constituted to be unified to a proximal end of the catheter sheath 201, and a drive shaft connector 202b which is constituted to rotatably fix the drive shaft 222 to a proximal end of the drive shaft 222.

[0026] A kink-proof protector 211 is provided at a boundary portion between the sheath connector 202a and the catheter sheath 201. Accordingly, predetermined rigidity is maintained so as to be able to prevent bending (kink) occurring due to a rapid change of properties.

[0027] The proximal end of the drive shaft connector 202b is attached to the scanner and pull-back unit 102 in a freely detachable manner.

[0028] A housing 223 is a metallic pipe having a short cylindrical shape in which a notch portion is partially provided. The housing 223 is molded by performing carving from a metal ingot, metal powder injection molding (MIM), and the like. In addition, a short coiled elastic member 231 is provided on the distal end side thereof.

[0029] The elastic member 231 is formed with a coiled stainless steel wire. Since the elastic member 231 is disposed

on the distal end side, the imaging core 220 is prevented from being caught inside the catheter sheath 201 when moving forward and rearward.

[0030] The reference numeral 232 indicates a reinforcement coil which is provided for the purpose of preventing sudden bending at the distal end portion of the catheter sheath 201.

[0031] The guide wire lumen tube 203 has a lumen for guide wire allowing the guide wire 250 to be inserted. The guide wire 250 is used in order to introduce the distal end of the catheter sheath 201 to a target lesion.

3. Functional Constitution of Imaging Apparatus for Diagnosis

[0032] Subsequently, a functional constitution of the imaging apparatus 100 for diagnosis will be described. Fig. 3 is a diagram illustrating the functional constitution of the imaging apparatus 100 for diagnosis having the function of the OCT (herein, a swept source OCT as an example). Hereinafter, a functional constitution of the swept source OCT will be described with reference to the same diagram.

[0033] In the diagram, the reference numeral 408 indicates a wavelength swept light source (swept laser), which is a type of an extended-cavity laser constituted of an optical fiber 416 coupled with a semiconductor optical amplifier 415 (SOA) in a ring shape, and a polygon scanning filter (408b).

[0034] Light output from the SOA 415 passes through the optical fiber 416 and enters the polygon scanning filter 408b. The light is subjected to wavelength selection herein, is amplified by the SOA 415, and is lastly output from a coupler 414.

[0035] In the polygon scanning filter 408b, the wavelength is selected through a combination of a diffraction grating 412 which diffracts light, and a polygon mirror 409. Specifically, the light diffracted by the diffraction grating 412 is concentrated on a surface of the polygon mirror 409 by using two lenses (410 and 411). Accordingly, only the light having a wavelength orthogonal to the polygon mirror 409 returns to the same optical path, thereby being output from the polygon scanning filter 408b. In other words, time sweeping of a wavelength can be performed by rotating the polygon mirror 409.

[0036] In the polygon mirror 409, for example, a 32-hedron mirror is used and the number of rotations is approximately 50,000 rpm. It is possible to perform high-speed and high-output wavelength sweeping through the wavelength swept source method in which the polygon mirror 409 and the diffraction grating 412 are combined together.

[0037] Light of the wavelength swept light source 408 output from the coupler 414 is incident on one end of a first single mode fiber 440, thereby being transferred to the distal end side thereof. The first single mode fiber 440 is optically coupled to a second single mode fiber 445 and a third single mode fiber 444 in a photo coupler unit 441 in the middle therebetween.

[0038] On the distal end side from the photo coupler unit 441 of the first single mode fiber 440, an optical rotary joint (a photo coupling portion) 403 which connects a non-rotary portion (fixed portion) and a rotary portion (rotary drive portion) with each other and transfers light is provided inside the rotary drive device 404.

[0039] Moreover, on a distal end side of a fourth single mode fiber 442 in the optical rotary joint (the photo coupling portion) 403, a fifth single mode fiber 443 of the probe unit 101 is connected thereto via an adaptor 402 in a freely detachable manner. Accordingly, light from the wavelength swept light source 408 is transferred to the rotatably driven fifth single mode fiber 443 which is inserted through the inside of the imaging core 220.

[0040] Irradiation of the transferred light in rotary motion and axial motion is performed with respect to a biological tissue in a blood vessel from the light transmitting and receiving unit 221 of the imaging core 220. A portion of the reflected light scattering on a surface or inside a biological tissue is collected by the light transmitting and receiving unit 320 of the imaging core 220, and returns to the first single mode fiber 440 side via the optical path in reverse. Moreover, the portion of the reflected light moves to the second single mode fiber 445 side by the photo coupler unit 441 and is emitted from one end of the second single mode fiber 445. Thereafter, the portion of the reflected light is received by a photo detector (for example, a photo diode 424).

[0041] The rotary drive portion side of the optical rotary joint 403 is rotatively driven by a radial scanning motor 405 of the rotary drive device 404.

[0042] Meanwhile, an optical path length variable mechanism 432 for performing fine adjustment of the length of the optical path of the reference light is provided at the distal end on a side opposite to the photo coupler unit 441 of the third single mode fiber 444.

[0043] The optical path length variable mechanism 432 includes optical path length changing means for changing the length of the optical path corresponding to a fluctuation in the length of each probe unit 101 so as to be able to absorb the fluctuation in the length thereof when the probe unit 101 is replaced and used.

[0044] The third single mode fiber 444 and a collimating lens 418 are provided on a one-axis stage 422 which is movable in the optical-axis direction thereof as indicated by the arrow 423, thereby forming the optical path length changing means.

[0045] Specifically, the one-axis stage 422 functions as the optical path length changing means having a variable range of the optical path length as wide as the fluctuation in the length of the optical path of the probe unit 101 can be

absorbed when the probe unit 101 is replaced. Moreover, the one-axis stage 422 also includes a function as adjustment means for adjusting an offset. For example, even when the distal end of the probe unit 101 is not in close contact with a surface of a biological tissue, it is possible to set a state of being interfered with the reflected light from the surface position of the biological tissue by performing fine changing of the length of the optical path through the one-axis stage.

[0046] The length of the optical path is subjected to fine adjustment through the one-axis stage 422, and light reflected by a mirror 421 via a grating 419 and a lens 420 is mixed with light obtained from the first single mode fiber 440 side in the photo coupler unit 441 which is provided in the middle of the third single mode fiber 444, thereby being received by the photo diode 424.

[0047] The interference light received by the photo diode 424 as described above is subjected to photoelectric conversion, thereby being input to a demodulator 426 after being amplified by the amplifier 425. The demodulator 426 performs demodulation processing of extracting only a signal portion of the interference light, and an output thereof is input to an A/D converter 427 as an interference light signal.

[0048] In the A/D converter 427, the interference light signal is sampled at 90 MHz at as many as 2,048 points, for example, thereby generating digital data (interference light data) for one line. The sampling frequency is set to 90 MHz on the premise that approximately 90% of a periodical cycle (12.5 μ sec) of the wavelength sweeping is extracted as digital data at 2,048 points when a repetition frequency of the wavelength sweeping is set to 40 kHz. However, the sampling frequency is not particularly limited thereto.

[0049] The interference light data generated by the A/D converter 427 in a line unit is input to the signal processing unit 428. The signal processing unit 428 generates data (line data) in a depth direction by causing the interference light data to be subjected to frequency resolution through fast fourier transform (FFT). Then, the generated data is subjected to coordinate conversion so as to construct a cross-sectional image at each position in a blood vessel, thereby outputting the constructed image to the LCD monitor 113.

[0050] Furthermore, the signal processing unit 428 is connected to an optical path length adjustment means control device 430. The signal processing unit 428 controls a position of the one-axis stage 422 via the optical path length adjustment means control device 430.

[0051] The processing of the signal processing unit 428 is realized as a predetermined program is installed in an embedded system and executed.

[0052] Moreover, the imaging apparatus 100 for diagnosis of the embodiment includes an interface (I/F) 431 connecting an X-ray imaging device 500 as illustrated. The imaging apparatus 100 for diagnosis can acquire an image of the heart of the examinee in real time from the X-ray imaging device 500 via the interface 431.

4. Image Reconstruction Processing

[0053] In the above-described constitution, when a user operates the operation control device 103 and inputs an instruction to start scanning, the signal processing unit 428 controls the scanner and pull-back unit 102 so as to rotate the imaging core 220 and to pull the imaging core 220 at a predetermined velocity, thereby performing a movement in a blood vessel in the longitudinal direction. In this case, in order to prevent the imaging core 220 emitting and receiving light from being hindered by blood, a transparent flushing liquid is generally caused to flow inside a blood vessel. As a result thereof, as described above, the A/D converter 427 outputs digital interference light data, and the signal processing unit 428 stores the data in a memory 428a. Then, the signal processing unit 428 constructs cross-sectional images of each position along the imaging core 220 in the movement direction, from the data stored in the memory 428a.

[0054] Here, processing related to generation of one cross-sectional image will be described with reference to Fig. 4. Fig. 4 is a diagram for illustrating reconstruction processing of the cross-sectional image of a blood vessel 451 in which the imaging core 220 is positioned. The measurement light is transmitted and received for multiple times while the imaging core 220 makes one rotation (rotates 360 degrees). As transmission and reception of light are performed once, data of one line in the direction in which irradiation of the light is performed can be obtained. Therefore, for example, when transmission and reception of light are performed 512 times during one rotation, it is possible to obtain 512 items of the line data radially extending from a rotary center 452. As the line data is subjected to the known computation, it is possible to generate the vascular cross-sectional image oriented in the radial direction (r-direction) from the rotary center position. One line of the vascular cross-sectional image is constituted of 1024 brightness values from I0 to I1023. I0 is the brightness value of the rotary center position, and I1023 is the brightness value of a farthest position away from the rotary center position.

[0055] In this manner, 512 items of the line data are constructed. However, 512 items of the line data are close to one another in the vicinity of the rotary center position and are estranged from one another as being away from the rotary center position. Therefore, regarding the pixels in the empty space of each line, known interpolation processing is performed so as to generate an image, and thus, it is possible to generate the cross-sectional image which can be visually recognized by a person. Note that, the center position of the cross-sectional image coincides with the rotary center position of the imaging core 220 but is not the center position of the vascular cross section.

[0056] Since there is reflection of the catheter sheath 201 itself when performing transmission and reception of light, a shadow 453 of the catheter sheath 201 is formed in the cross-sectional image as illustrated. In addition, the reference numeral 454 in the diagram indicates the shadow of the guide wire 250. Actually, the guide wire 250 is made of metal and does not allow light to transmit therethrough. Therefore, an image of the rear side portion (when seen from the rotary center position) of the guide wire 250 cannot be obtained. Be sure that, the illustration is merely a conceptual diagram.

[0057] When a user operates the operation control device 103 and inputs an instruction to start scanning, the signal processing unit 428 controls the scanner and pull-back unit 102 so as to rotate the imaging core 220 and to pull the imaging core 220 at a predetermined velocity, thereby performing a movement in a blood vessel in the longitudinal direction (the pull-back processing). As a result thereof, the signal processing unit 428 receives the line data of each rotary angle and the data is stored in the memory 428a. Then, when the pull-back processing ends, the line data stored in the memory 428a is processed so as to form a plurality of the cross-sectional images, and the images are stored in the memory 428a again. Moreover, the images are connected in series, thereby constructing a three-dimensional model of a blood vessel lumen in the memory 428a.

[0058] Fig. 7 shows a storage state of the line data stored in the memory 428a through the pull-back processing. The embodiment describes an example in which one vascular cross-sectional image is constructed by using 512 items of the line data. If the rotational velocity of the imaging core 220 is 9,600 rpm and the time taken for the pull-back is five seconds, the imaging core 220 makes 800 rotations ($= 9,600/60 \times 5$) during the time thereof. Since 512 items of the line data can be obtained in one rotation, approximately 400,000 items of the line data are stored in the memory 428a.

[0059] Fo (1), Fo (2), Fo (3), and so on in Fig. 5 respectively indicate the vascular cross-sectional images each of which is constructed so as to have 512 items of the line data as a unit, in the line data illustrated in Fig. 7. Then, as the vascular cross-sectional images Fo (1), Fo (2), Fo (3), and so on are connected in series, it is possible to construct a three-dimensional model 460.

5. Display Processing of Cardiac Beat Influence Section

[0060] The diagnostic target of the embodiment is the coronary artery (or the coronary vein). Since the coronary artery is positioned so as to surround the heart, the coronary artery itself also moves (vibrates) due to an influence of a cardiac beat of the heart. In the imaging apparatus for diagnosis of the embodiment, the imaging core 220 is positioned in a blood vessel, and the cross-sectional images thereof are constructed from the data which is obtained through the pull-back processing in which the imaging core 220 rotates and moves. Therefore, an influence of a cardiac beat is unavoidable.

[0061] The sequence of the vascular cross-sectional images Fo (1), Fo (2), Fo (3), and so on in Fig. 5 is a positional order of a blood vessel in the axial direction and is a chronological order as well. Therefore, during the pull-back scanning, the vascular cross-sectional image at the timing when there is a cardiac beat is in a misaligned state with respect to the vascular cross-sectional image at the timing when there is no influence of a cardiac beat, and is in disorder. Then, the three-dimensional model exhibits the disorder.

[0062] In the present embodiment, when the three-dimensional model 460 is visualized and displayed, a site in disorder due to an influence of a cardiac beat and a site not in disorder are displayed in an easily discriminable manner. As a result thereof, a user (doctor) is prevented from erroneously diagnosing the site as an abnormal vascular site.

[0063] In order to solve the problem, there is a need to detect the timing when there is a cardiac beat. In the present embodiment, the X-ray imaging device 500 detects the cardiac beat and obtains the detection timing. In order to obtain the timing of cardiac beat detection, the vascular cross-sectional image and the X-ray image need to be synchronized. Here, first, synchronization thereof will be described, and thereafter, cardiac beat detection will be described.

[0064] The X-ray imaging device 500 of the embodiment images the heart of the examinee and outputs 30 items of the X-ray image data per second, for example, while having the viewpoint position is fixed. In the following description, 30 items per second is exemplified. However, the quantity can be changed to 15 items per second and the like by setting the X-ray imaging device 500. The embodiment of the present invention can perform the processing regardless of the setting of the X-ray imaging device 500. Therefore, the embodiment is not particularly limited thereto. The imaging apparatus 100 for diagnosis of the embodiment sequentially stores the X-ray image data from the X-ray imaging device 500 in the memory 428a via the interface 431 at least during the pull-back processing.

[0065] The vascular cross-sectional images are expressed as Fo (1), Fo (2), and so on. In order to be distinguished therefrom, hereinafter, the X-ray images stored in chronological order are expressed as Fx (1), Fx (2), and so on.

[0066] As described above, since the imaging core 220 rotates at a velocity of 9,600 rpm, it is possible to mention that the imaging core 220 makes 160 rotations per second, that is, 160 pseudo vascular cross-sectional images are imaged per second. Meanwhile, since the X-ray imaging device 500 images 30 X-ray images per second, approximately five vascular cross-sectional images are constructed while imaging one X-ray image, in simple calculation.

[0067] Here, regarding the method of synchronization therebetween in the embodiment, after the pull-back processing starts and while each item of the line data obtained based on optical coherence is stored in the memory 428a, when

one X-ray image $Fx(i)$ ($i = 1, 2$, and so on) is acquired from the X-ray imaging device 500 via the interface 431, the timing when the X-ray image $Fx(i)$ starts to be acquired is caused to correspond to the line data of that timing. Fig. 7 illustrates that the X-ray image $Fx(1)$ is stored in the memory 428a via the interface 431 when the line data of a line 3 in the first rotation is stored.

[0068] As a result thereof, when the signal processing unit 428 reconstructs the vascular cross-sectional image $Fo(1)$ based on the line data stored in the memory 428a, it is possible to know that the line data includes the line data of the timing when the X-ray image $Fx(1)$ is acquired. Therefore, it is possible for the signal processing unit 428 to consider that the vascular cross-sectional image $Fo(1)$ and the X-ray image $Fx(1)$ are the images obtained at the same timing, thereby performing processing. In other words, synchronization between the vascular cross-sectional image and the X-ray image can be achieved.

[0069] Fig. 7 illustrates an example in which one item of the line data is individually caused to correspond to the X-ray image. However, it is acceptable as long as accuracy at which one vascular cross-sectional image corresponds to the X-ray image is achieved. Since 512 items of the line data utilized when constructing one vascular cross-sectional image can be obtained in $1/160$ seconds ($= 6.25$ msec), it is sufficient when accuracy is achieved as the time accuracy for the timing of starting acquisition of one X-ray image. In addition, the synchronization is not limited to the above-described example. For example, when the X-ray image $Fx(i)$ is received, information may be retained so as to indicate which optical coherence data in series is received.

[0070] Subsequently, determination of the presence and the absence of a cardiac beat will be described. The X-ray imaging device 500 of the embodiment outputs the X-ray images of the heart of the examinee at the velocity of 30 items per second at the fixed viewpoint. When the X-ray images obtained after the timing when the pull-back processing starts are expressed as $Fx(1)$, $Fx(2)$, $Fx(3)$, and so on, the memory 428a stores the X-ray images as illustrated in Fig. 6.

[0071] A cardiac beat can be considered to be variation in form with respect to the time axis of the heart. Therefore, the presence and the absence of a cardiac beat can be determined by whether the correlation is high or low between two X-ray images of the heart which are adjacent to each other on the time basis. When the correlation between the two adjacent X-ray images is high, it denotes that the difference between the two adjacent images is small. In addition, when the correlation between the two adjacent X-ray images is low, it denotes that the difference between the two adjacent images is significant. In the embodiment, a mutual difference between the two X-ray images adjacent to each other on the time basis is expressed in numerical form, the difference and a threshold value are compared to each other, and the degree of dissimilarity is determined, thereby determining the presence and the absence of a cardiac beat.

[0072] When the X-ray image which is presently targeted is considered to be $Fx(i)$, it is possible to express the X-ray image one before thereof (before $1/30$ seconds) as $Fx(i-1)$. In addition, when x_{max} represents the number of pixels of the X-ray image in the horizontal direction, y_{max} represents the number of pixels thereof in the vertical direction, and $Fx(i, x, y)$ represent the pixel values of the coordinates (x, y) in the i th X-ray image, dissimilarity D of the target X-ray image $Fx(i)$ with respect to the X-ray image $Fx(i-1)$ which is one before thereof may be obtained through the following expression.

$$D(i) = \sum \sum \{ Fx(i, x, y) - Fx(i-1, x, y) \}^2$$

Here, $\sum \sum$ represents a sum total when the variables x and y are respectively varied within a range of 1 to x_{max} and 1 to y_{max} .

[0073] Then, when the dissimilarity $D(i)$ and a threshold value Th set in advance are compared to each other, resulting in a relationship of $D(i) > Th$, it denotes that the target X-ray image is significant in variation (small in correlation) compared to the X-ray image immediately before thereof, and the target X-ray image is determined to be significantly influenced by a cardiac beat.

[0074] As described above, since the X-ray image and the vascular cross-sectional image can be synchronized together, it is possible to specify a portion significantly influenced by a cardiac beat and a portion less influenced thereby in the three-dimensional model of a blood vessel. However, as described above, there is a need to note that the X-ray image and the vascular cross-sectional image are different from each other in the number of items which can be obtained per unit time.

[0075] Here, it is determined that an influence of a cardiac beat is significant within the range from the X-ray images $Fx(10)$ to $Fx(20)$. In this case, when the vascular cross-sectional image $Fo(100)$ is synchronized with the X-ray image $Fx(10)$, and $Fo(155)$ is synchronized with the X-ray image $Fx(20)$, it is determined that the influence of a cardiac beat is significant within the range of a section from the vascular cross-sectional images $Fo(100)$ to $Fo(155)$. In other words, the two vascular cross-sectional images respectively corresponding to the X-ray images positioned at both ends of the section which is determined to be significant in cardiac beat are specified, thereby determining a range interposed between the two vascular cross-sectional images as the section which is significantly influenced by a cardiac beat.

6. Description of User Interface

[0076] Hereinbefore, descriptions are given regarding the principle in determining the site significantly influenced by a cardiac beat and the site less influenced thereby in the three-dimensional model of the embodiment obtained from the vascular cross-sectional images.

[0077] Fig. 10 illustrates an example of a user interface 1000 which is displayed in the LCD monitor 113 after the pull-back processing is performed.

[0078] The user interface 1000 includes a display region 1001 in which various types of instruction buttons are disposed for a user so as to make an instruction, a display region 1002 displaying a vascular cross-sectional image on a plane orthogonal to the vascular axis, a display region 1003 displaying the X-ray image, and a display region 1004 displaying the cross-sectional image when the three-dimensional model of a blood vessel is cut on a plane along the vascular axis. The display region 1004 displays a variable marker 1005 of which a position is variable by using the mouse 114. In addition, a scroll bar 1006 for performing scrolling in the horizontal direction is also provided in a lower portion of the display region 1004.

[0079] The display region 1002 displays the vascular cross-sectional image (the cross-sectional image on a plane vertical to the vascular axis) which corresponds to the broken line portion indicated by the position of the marker 1005. In addition, the display region 1003 displays the X-ray image which is imaged at the timing when the imaging core 220 is at the position of the marker 1005. The X-ray image has an imaging time interval greater than that of the vascular cross-sectional image. Therefore, strictly speaking, the display region 1002 displays the X-ray image which is imaged at the time nearest to the time shown by the position which the marker 1005 indicates.

[0080] As the characteristic point of the embodiment, in order to emphasize the section in the display region 1004 which is determined to be influenced by a cardiac beat, discrimination bars (or marks) 1010 are disposed at the upper end and the lower end in the horizontal axis (the pull-back direction of the imaging core 220) as illustrated. It is quite obvious for a user to find a section having a cardiac beat in the display. Therefore, it is possible to easily determine whether or not the disorder in the section is an influence of a cardiac beat.

[0081] Moreover, in the present embodiment, considering that reliability is low in an image of the section having a cardiac beat, particularly in an image of the section in which the movement of the X-ray image is significant, there is provided a display mode for truncating the section displayed by the bar 1010. When using this mode, it is desirable to recognize the level of the section having particularly significant activity so as to truncate the section having significant activity. The method of realizing thereof will be described below. The mode is realized by clicking the button of "cardiac beat influence region truncation display" which is positioned on the right side in the diagram. As the button is clicked, the display region 1004 is switched to a display region 1004' as illustrated at the lower portion in the diagram. When the mode is switched to the display region 1004', one image on the bar 1010 is truncated from the left end to the right end, and an image immediately adjacent to the left side from the left end of the bar 1010 and an image immediately adjacent to the right side from the right end of the bar 1010 are connected together, thereby performing processing of adding a display so as to recognize the position through which the connected position can be confirmed (truncation processing). When shifted to the display region 1004', the sign "cardiac beat influence region truncation display" of the button is switched to "cardiac beat influence region display". As a user operates the mouse and clicks the button of the sign, the display region 1004' returns to the display region 1004 again.

7. Description of Procedure of Processing

[0082] Hereinafter, a procedure of processing of the signal processing unit 428 will be described with reference to the flow charts in Figs. 8 and 9. The program in the procedure of processing according to the flow charts in Figs. 8 and 9 is stored in a hard disk device or the like (not illustrated). In addition, the processing is performed when a catheter is positioned in the coronary artery of a patient, and a pull-back instruction is made through the operation panel 112.

[0083] As the pull-back instruction is made, in Step S801, the signal processing unit 428 causes the imaging core 220 to rotate at a predetermined velocity, while performing pulling processing at a predetermined velocity. Thus, while optical coherent line data is stored in the memory 428a, the X-ray images transferred from the X-ray imaging device 500 are also stored in the memory 428a. In this case, in order to achieve synchronization between the optical coherent line data and the X-ray image, as illustrated in Fig. 7, every time one X-ray image is acquired, information indicating that the corresponding X-ray image is acquired is added to the line data at the timing of starting acquisition thereof.

[0084] In this manner, when the pull-back processing ends, the processing proceeds to Step S802, thereby performing processing of constructing the cross-sectional image of the rotation plane of the imaging core 220 based on the received line data, and generating the three-dimensional model of the vascular lumen surface by connecting the images in series.

[0085] Thereafter, in Step S803, the X-ray image influenced by a cardiac beat is specified based on the X-ray image, thereby specifying the section in which the X-ray images influenced by a cardiac beat continue, in the group of the X-ray images which continue in time series. Then, when one section is targeted, two vascular cross-sectional images

corresponding to two X-ray images at the position on both ends of the section are specified, thereby making a decision as the section in which an influence of a cardiac beat is significant between the two vascular cross-sectional images.

[0086] Then, in Step S804, a composite result of the cross-sectional image of the three-dimensional model along the vascular axis generated as described above, and the image indicating the section which is determined to be influenced by a cardiac beat is displayed (refer to Fig. 10).

[0087] Subsequently, descriptions will be given with reference to the flow chart in Fig. 9 regarding the processing in which the X-ray image influenced by a cardiac beat is obtained from the X-ray images stored in the memory 428a in Step S803 described above, thereby obtaining the corresponding vascular cross-sectional image. As is clear from the descriptions above, note that, the X-ray images Fx (1), Fx (2), and so on which continue in time series are stored already in the memory 428a.

[0088] First, in Step S901, the signal processing unit 428 resets the variable i for specifying the X-ray image to "1", and in Step S902, the signal processing unit 428 reads the X-ray image Fx (i) (= Fx (1)) from the memory 428a.

[0089] Subsequently, in Step S903, the variable i is increased by "1", and in Step S904, the X-ray image Fx (i) is read. Note that, two X-ray images Fx (i) and Fx (i-1) which continue in time series are read at this time.

[0090] Subsequently, in Step S905, the difference D between two images is calculated. Repeatedly, the following expression is used.

$$D = \sum \sum \{ Fx(i, x, y) - Fx(i-1, x, y) \}^2$$

Then, in Step S906, the difference D and the threshold value Th are compared to each other. In a case of $D > Th$, in Step S907, variation of the target X-ray image Fx (i) is greater than that of the X-ray image Fx (i-1) immediately before thereof, thereby being considered to be influenced by a cardiac beat. Therefore, the value which is indicated by the current variable i is stored in the memory region prepared in advance.

[0091] Then, in Step S908, processing after Step S903 is repeated until it is judged that all the X-ray images are determined.

[0092] In this manner, as the determination processing for all the X-ray images ends, the processing proceeds to Step S909, thereby deciding the section of the vascular cross-sectional image which is determined to be significantly influenced by a cardiac beat, from the group in which the numbers of the X-ray images which are determined to be significantly influenced by a cardiac beat through the above-described determination processing continue in series. For example, as the group in which the numbers of the X-ray images which are determined to be significantly influenced by a cardiac beat continue in series, {3, 4, 5, 6, 7}, {31, 32, 33, 34, 35}, and so on are found.

[0093] Since two X-ray images Fx (3) and Fx (7) at both ends in the first group are known, if the vascular cross-sectional images synchronized therewith are searched for the data in Fig. 7, two corresponding vascular cross-sectional images can be found, thereby determining that the section therebetween as the section which is significantly influenced by a cardiac beat. In a case of the second group, the vascular cross-sectional images corresponding to the X-ray images Fx (31) and Fx (35) are searched.

[0094] Specifying of the section of the vascular cross-sectional image significantly influenced by a cardiac beat is equivalent to the specification of the section of the three-dimensional model in the vascular axis direction. Therefore, similar processing may be performed with respect to the group of the continuous X-ray images.

[0095] As described above, according to the present embodiment, a section significantly influenced by a cardiac beat is displayed in the cross-sectional image (the image displayed in the display region 1004 of Fig. 10) along the vascular axis of a blood vessel in a discriminable manner. As a result thereof, even a relatively inexperienced doctor can easily discriminate whether or not an unnatural vascular site is caused due to an influence of a cardiac beat.

[0096] In the embodiment described above, the vascular cross-sectional images are connected in series so as to generate a 3D model, and the cross-sectional images along the vascular axis are reconstructed. However, the present invention is not limited thereto. For example, it is possible to reconstruct the image along the vascular axis by simply connecting line images of a vertical line (without being limited to the vertical line, it is acceptable as long as the line images are in the same direction) passing through the pixels at the center (the rotary center position of the imaging core 220 as well) of each of the cross-sectional images orthogonal to the vascular axis. As a result thereof, processing can be more simplified compared to a case of reconstructing a 3D model, and thus, rendering processing can be speeded up.

<Other Embodiments>

[0097] In the embodiment described above, descriptions are given regarding the example in which the bars indicating the section significantly influenced by a cardiac beat are disposed at the upper end and the lower end of the display region so as to interpose the cross-sectional image along the vascular axis of a blood vessel. However, the embodiment

is not limited thereto. That is, it is acceptable as long as the section significantly influenced by a cardiac beat and the section having no influence can be discriminated from each other. Therefore, as illustrated in Fig. 11A, an image 1101 in the section significantly influenced by a cardiac beat may be displayed in color or density different from that of other images.

[0098] In addition, in the embodiment, the influence of a cardiac beat is classified into two types such as a significant grade and a small grade. However, determination can be made in three-grade scale such as a significant grade, an intermediate grade, and a small grade in an influence of a cardiac beat by providing two threshold values. Moreover, determination can be made in multi-grade scale which is subdivided further by setting more threshold values. For example, when performing three-grade evaluation, as illustrated in Fig. 11B, it is possible to display a section 1102 in which an influence of a cardiac beat is intermediate and a section 1103 in which an influence of a cardiac beat is significant so as to be discriminated from each other. In a case of Fig. 11B, the display button for truncating the cardiac beat influence region is prepared as many as the number corresponding to the number of the grade in scale. In other words, a button for truncating the region in which an influence of a cardiac beat is equal to or greater than the intermediate grade, and a button for truncating the region in which an influence of a cardiac beat is equal to or greater than the significant grade may be respectively prepared.

[0099] In addition, in the embodiment, the section having or not having an influence of a cardiac beat is displayed (the bar 1010 and the like) by utilizing the cross-sectional image along the vascular axis. However, the present invention is not limited only thereto and can be constituted as follows.

[0100] As is clear from the descriptions above, a user can freely change the position of the marker 1005. The marker 1005 indicates not only the position of the physical space along the vascular axis but also allows to see the indicated position of the time axis, as described. Therefore, determining whether or not the position of the marker 1005 instructed by a user is in the cardiac beat influence region is equivalent to determining whether or not the timing when the imaging core is positioned at the position of the marker 1005 instructed by a user is in the time interval having an influence of a cardiac beat. Therefore, the display form of the display region 1002 may be switched depending on the timing when the imaging core is positioned at the position instructed by using the marker 1005 is in the time interval having an influence of a cardiac beat or out of the time interval. There are several examples of switching the display form. For example, the frame color of the display region 1002 may be switched. As an example thereof, the frame color of the display region 1002 is displayed in red when the position of the marker 1005 is in the time interval having an influence of a cardiac beat, and the frame color of the display region 1002 is displayed in white when the position is out of the time interval thereof. In addition, in a case where the influence of a cardiac beat is subdivided into multi-grade scale, the frame color may be changed for each of the grades. In addition, regarding switching of the display form of the display region 1002, the color of the character string "vascular cross-sectional image" of the index may be changed instead of the frame. Depending on the cases, a display of the background color of the display region 1002 may be switched.

[0101] As described above, naturally, switching of the display form of the display region 1002 and displaying of the presence and the absence of the cardiac beat influence region in the display region 1004 may be performed at the same time.

[0102] Hereinbefore, the embodiments have been described. In the embodiments, the example in which a vascular tomographic image is used in an optical coherence apparatus for diagnosis has been described. However, it is clear that the embodiments can be applied to an ultrasound apparatus for diagnosis or an apparatus having both thereof. Therefore, the present invention is not limited to only the optical apparatus for diagnosis as described above.

[0103] As is clear from the embodiment described above, reconstruction of the cross-sectional image and reconstruction processing of the cross-sectional image in the vascular axis direction are performed by the signal processing unit 428 which is constituted of a micro-processor. Since the micro-processor realizes the function by executing the program, the program is naturally included in the scope of the present invention as well. In addition, generally, the program is stored in a computer readable storage medium such as CD-ROM, DVD-ROM, or the like, and the program is set to a reading device (a CD-ROM drive or the like) included in the computer, thereby being executable by being copied or installed in the system. Therefore, it is clear that the computer readable storage medium is included in the scope of the present invention as well.

[0104] The present invention is not limited to the embodiments described above, and thus, various changes and modifications can be made without departing from the gist and the scope of the present invention. Therefore, in order to make the scope of the present invention to be in public, the following claims are attached herein.

Claims

1. An imaging apparatus for diagnosis acquiring information of an inside of a blood vessel and reconstructing a vascular image by using a probe that accommodates an imaging core which emits light or ultrasounds toward a lumen surface of a blood vessel of an examinee and detects reflection thereof, so as to rotate the imaging core and to move the

imaging core along the probe at a predetermined velocity, the apparatus comprising:

X-ray image acquisition means for continuously acquiring X-ray images of the examinee along a time axis while acquiring the information of the inside of the blood vessel by performing the rotation and the movement of the imaging core;

specification means for specifying the vascular-activity occurrence X-ray image based on a degree of correlation of an adjacent X-ray image with respect to the time axis of the X-ray image which is acquired by the X-ray image acquisition means;

determination means for determining a corresponding position of the moving imaging core for imaging timing of the X-ray image which is specified by the specification means;

generation means for generating the axially-directed cross-sectional image along the vascular axis based on the information acquired through the rotation and the movement of the imaging core; and

display means for displaying a composite result of the axially-directed cross-sectional image which is generated by the generation means and an image which shows the position determined by the determination means.

2. The imaging apparatus for diagnosis according to Claim 1, further comprising:

first instruction means for making an instruction regarding a position in a vascular axis direction in the axially-directed cross-sectional image which is displayed by the display means,

wherein the display means also displays a vascular cross-sectional image on a plane orthogonal to the vascular axis at the position instructed by the first instruction means, and the X-ray image acquired at timing when the imaging core is positioned at the position instructed by the instruction means.

3. The imaging apparatus for diagnosis according to Claim 2,

wherein the display means includes means for determining whether or not the timing when the imaging core is positioned at the position in the vascular axis direction instructed by the first instruction means is vascular-activity occurrence timing, and switching a display form of a radially-directed cross-sectional image in accordance with a determination result thereof.

4. The imaging apparatus for diagnosis according to Claim 3,

wherein the display means switches any one of a frame color, an index color, and a background color for displaying the radially-directed cross-sectional image, based on whether or not the timing when the imaging core is positioned at the position in the vascular axis direction instructed by the first instruction means is the vascular-activity occurrence timing.

5. The imaging apparatus for diagnosis according to any one of Claims 1 to 4,

wherein when $F_x(i)$ represents an i th target X-ray image in imaged sequence and $F_x(i, x, y)$ represent pixel values of coordinates (x, y) in the target X-ray image, the specification means computes the following expression so as to obtain dissimilarity between the target X-ray image and an X-ray image immediately before thereof: $D(i) = \sum \sum \{F_x(i, x, y) - F_x(i-1, x, y)\}^2$, here, $\sum \sum$ represents a sum total of computation results for all the coordinates; and when dissimilarity $D(i)$ and a threshold value Th set in advance are compared to each other resulting in a relationship of $D(i) > Th$, it is determined that the vascular activity occurs in the target X-ray image $F_x(i)$.

6. The imaging apparatus for diagnosis according to any one of Claims 1 to 5, further comprising:

second instruction means for making an instruction so as to perform a display excluding a vascular-activity occurrence site,

wherein when an instruction is made by the second instruction means, the display means deletes the image at the position determined by the determination means from the axially-directed cross-sectional images which are generated by the generation means, and displays truncated images after deletion.

7. The imaging apparatus for diagnosis according to any one of Claims 1 to 6,

wherein the display means causes a mark image to be displayed at the vascular-activity occurrence site in the axial direction of the axially-directed cross-sectional image which is generated by the generation means.

8. The imaging apparatus for diagnosis according to Claim 7,

wherein the display means causes the mark image which shows a degree of magnitude of activity to be displayed at the vascular-activity occurrence site in the axial direction of the axially-directed cross-sectional image which is

generated by the generation means.

9. The imaging apparatus for diagnosis according to any one of Claims 1 to 6,
wherein the display means causes a vascular-activity occurrence region in the axial direction of the axially-directed cross-sectional image which is generated by the generation means, to be displayed in color or density different from the color or the density of a region having no vascular-activity occurrence.

10. A method of controlling an imaging apparatus for diagnosis acquiring information of an inside of a blood vessel and reconstructing a vascular image by using a probe that accommodates an imaging core which emits light or ultrasounds toward a lumen surface of a blood vessel of an examinee and detects reflection thereof, so as to rotate the imaging core and to move the imaging core along the probe at a predetermined velocity, the method comprising:

an X-ray image acquisition step of continuously acquiring X-ray images of the examinee along a time axis while acquiring the information of the inside of the blood vessel by performing the rotation and the movement of the imaging core;

a specification step of specifying the vascular-activity occurrence X-ray image based on a degree of correlation of an adjacent X-ray image with respect to the time axis of the X-ray image which is acquired by the X-ray image acquisition step;

a determination step of determining a corresponding position of the moving imaging core for imaging timing of the X-ray image which is specified by the specification step;

a generation step of generating the axially-directed cross-sectional image along the vascular axis based on the information acquired through the rotation and the movement of the imaging core; and

a display step of displaying a composite result of the axially-directed cross-sectional image which is generated by the generation step and an image which shows the position determined by the determination step.

11. A computer program which is read and executed by a processor included in an imaging apparatus for diagnosis so as to cause the processor to execute each of the steps according to Claim 10.

12. A computer readable storage medium in which the program according to Claim 11 is stored.

13. An imaging apparatus for diagnosis acquiring information of an inside of a blood vessel and reconstructing a vascular image by using a probe that accommodates an imaging core which emits light or ultrasounds toward a lumen surface of a blood vessel of an examinee and detects reflection thereof, so as to rotate the imaging core and to move the imaging core along the probe at a predetermined velocity, the apparatus comprising:

X-ray image acquisition means for continuously acquiring X-ray images of the examinee along a time axis while acquiring the information of the inside of the blood vessel by performing the rotation and the movement of the imaging core;

specification means for specifying a vascular-activity occurrence time interval based on a degree of correlation of an adjacent X-ray image with respect to the time axis of the X-ray image which is acquired by the X-ray image acquisition means;

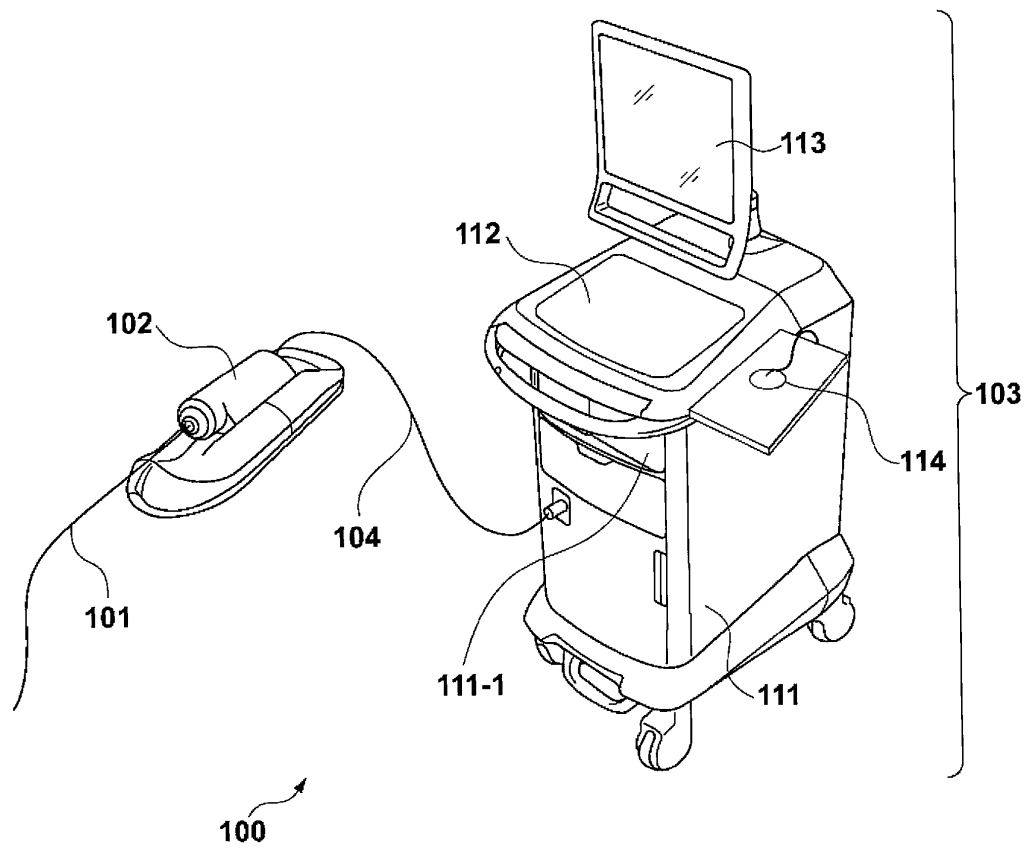
generation means for generating a plurality of radially-directed cross-sectional images orthogonal to the vascular axis at each of the positions along the vascular axis based on the information acquired through the rotation and the movement of the imaging core;

instruction means for making an instruction for one of the radially-directed cross-sectional images which are generated;

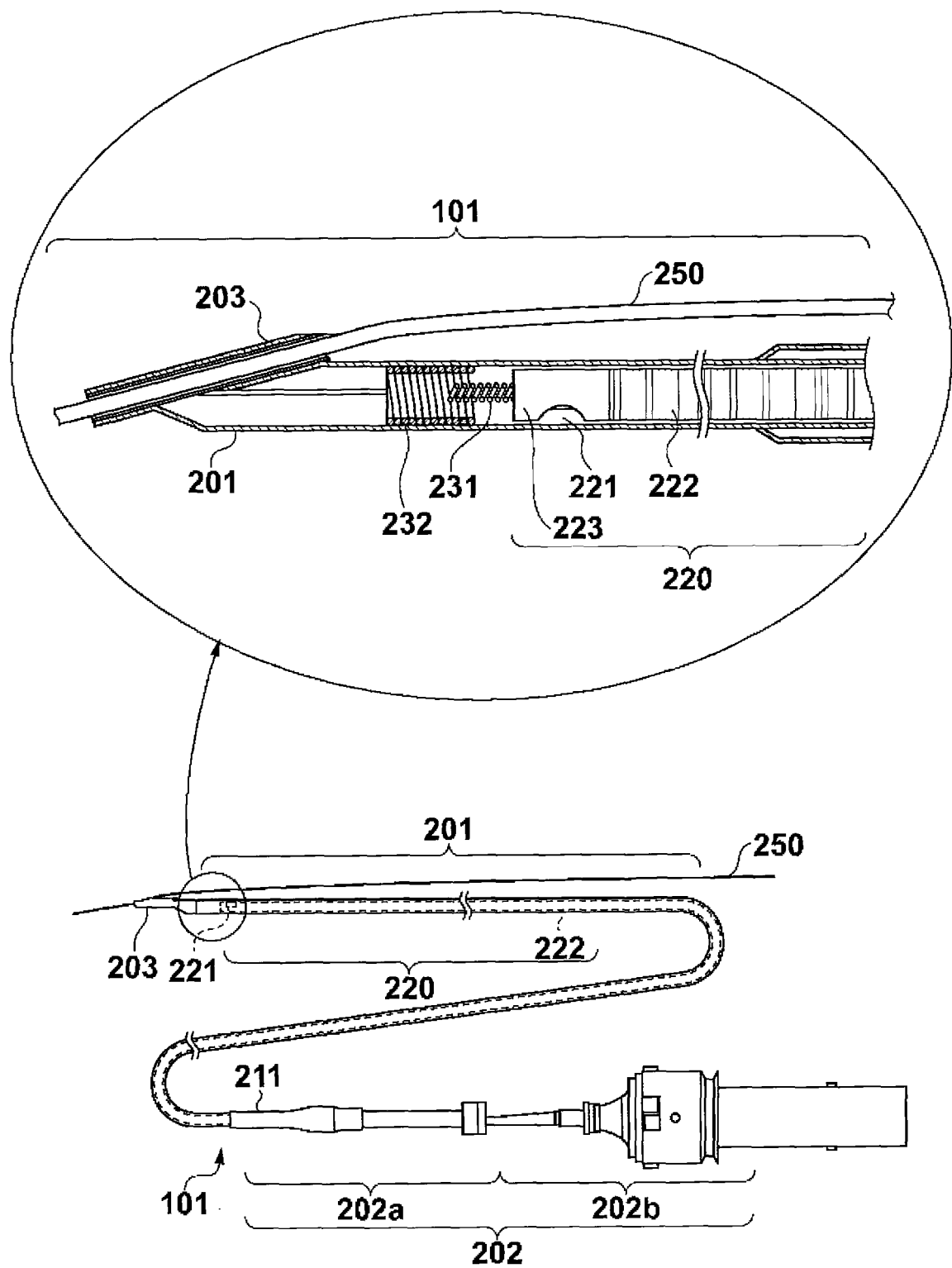
determination means for determining whether or not timing when the imaging core is positioned at the position on the vascular axis of the radially-directed cross-sectional image instructed by the instruction means is within the time interval which is specified by the specification means; and

display means for displaying the radially-directed cross-sectional image instructed by the instruction means in a display form in accordance with a result determined by the determination means.

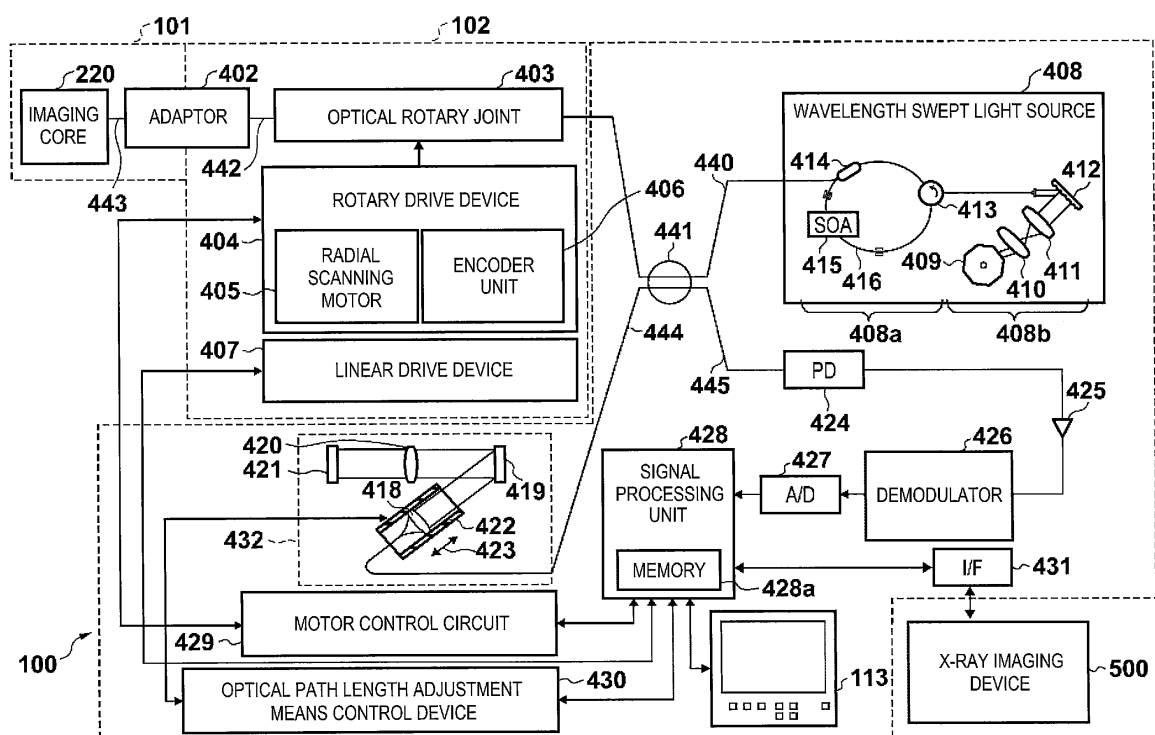
[FIG. 1]



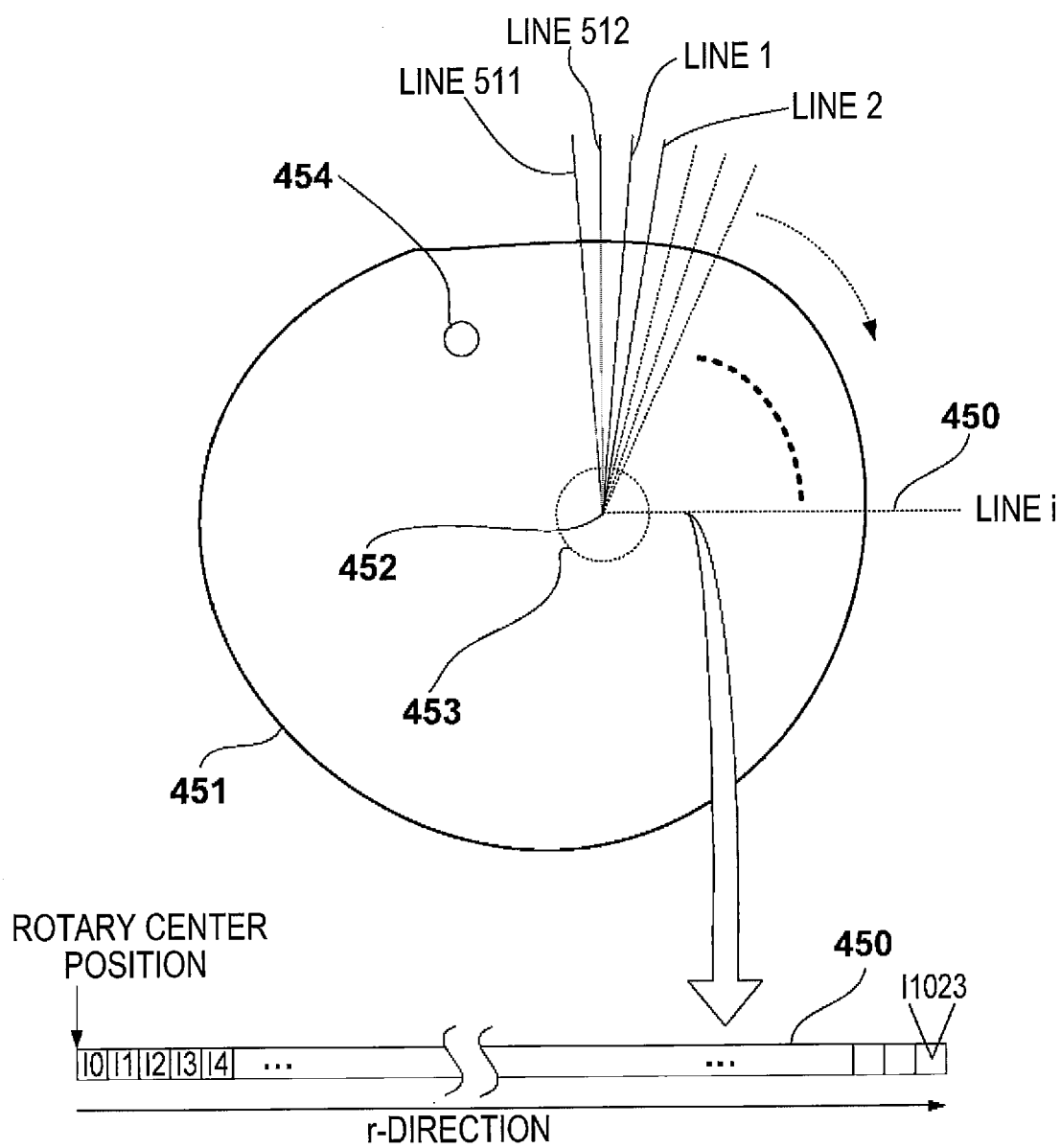
[FIG. 2]



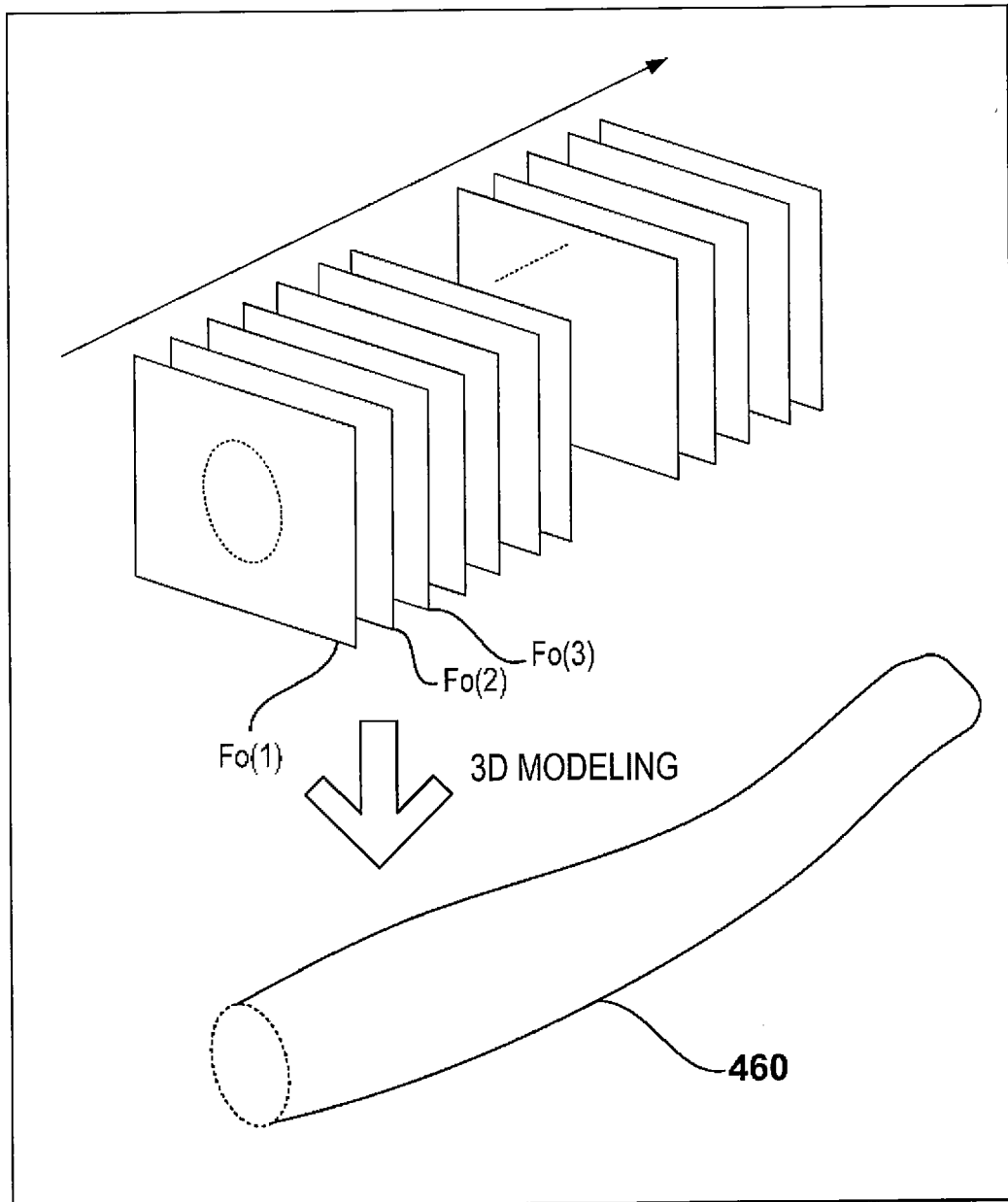
[FIG. 3]



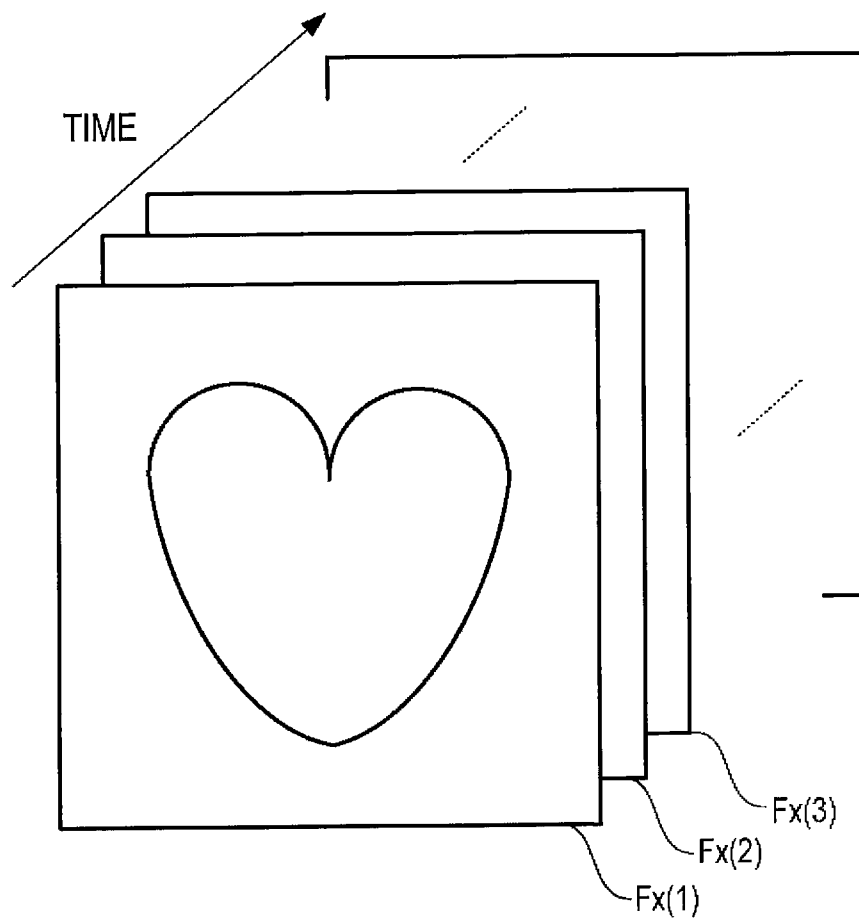
[FIG. 4]



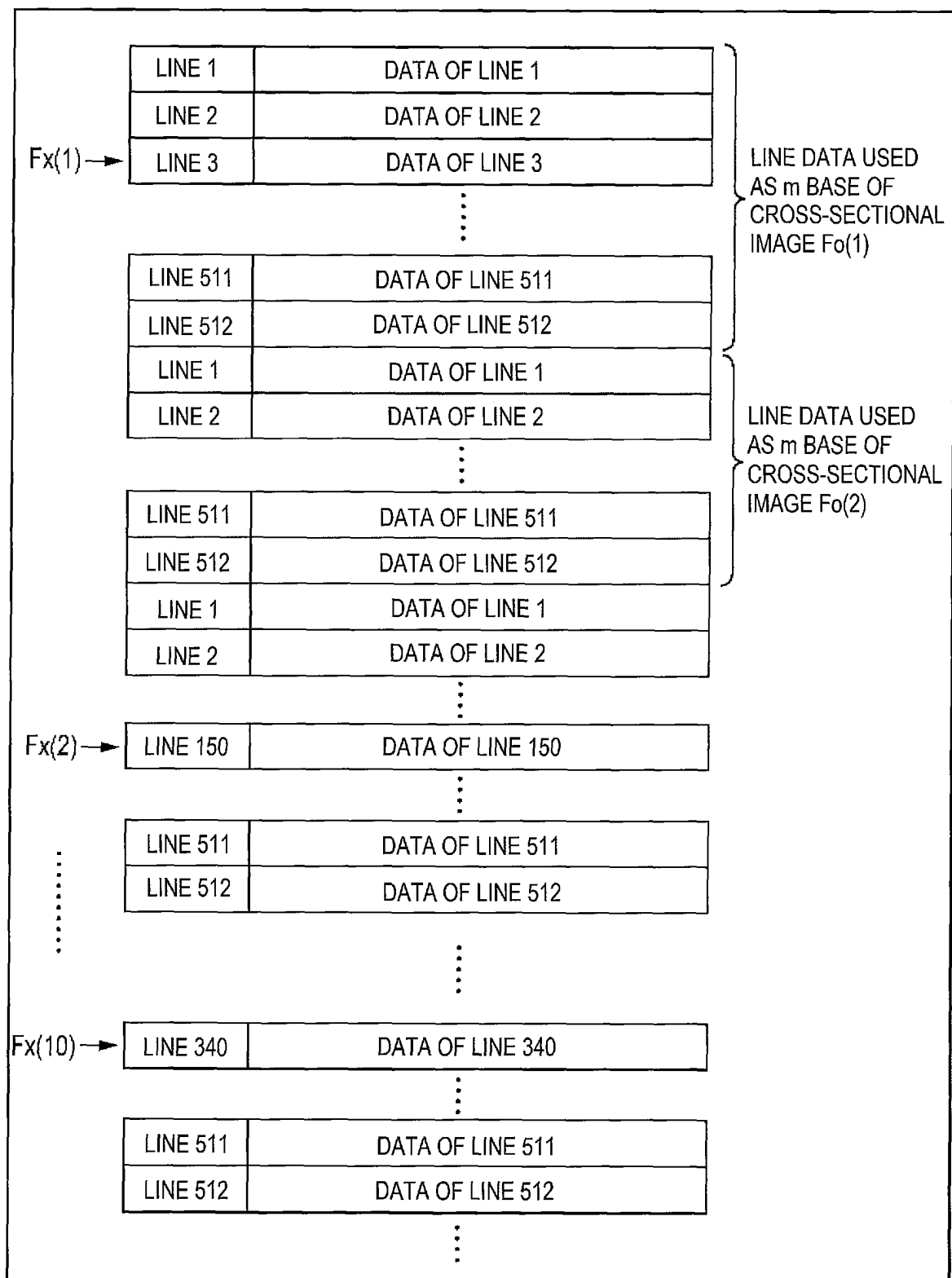
[FIG. 5]



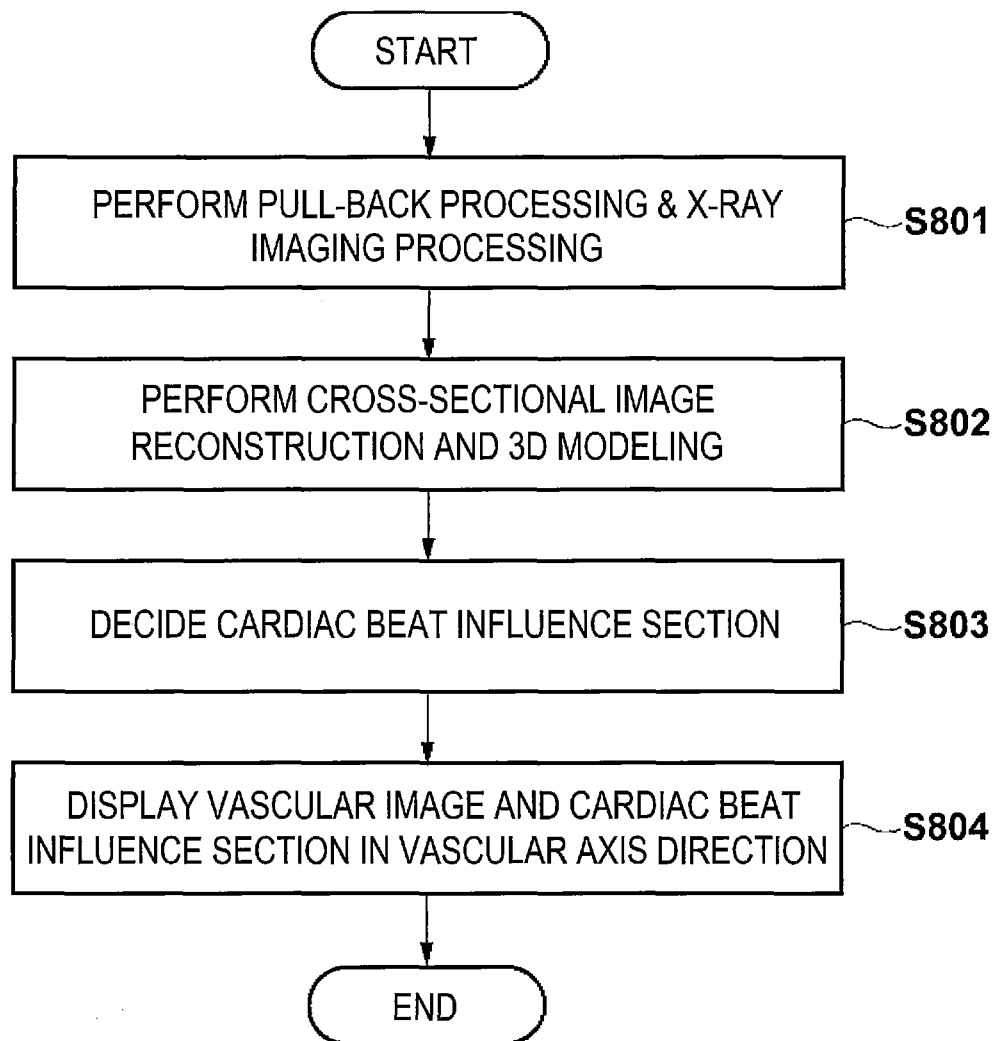
[FIG. 6]



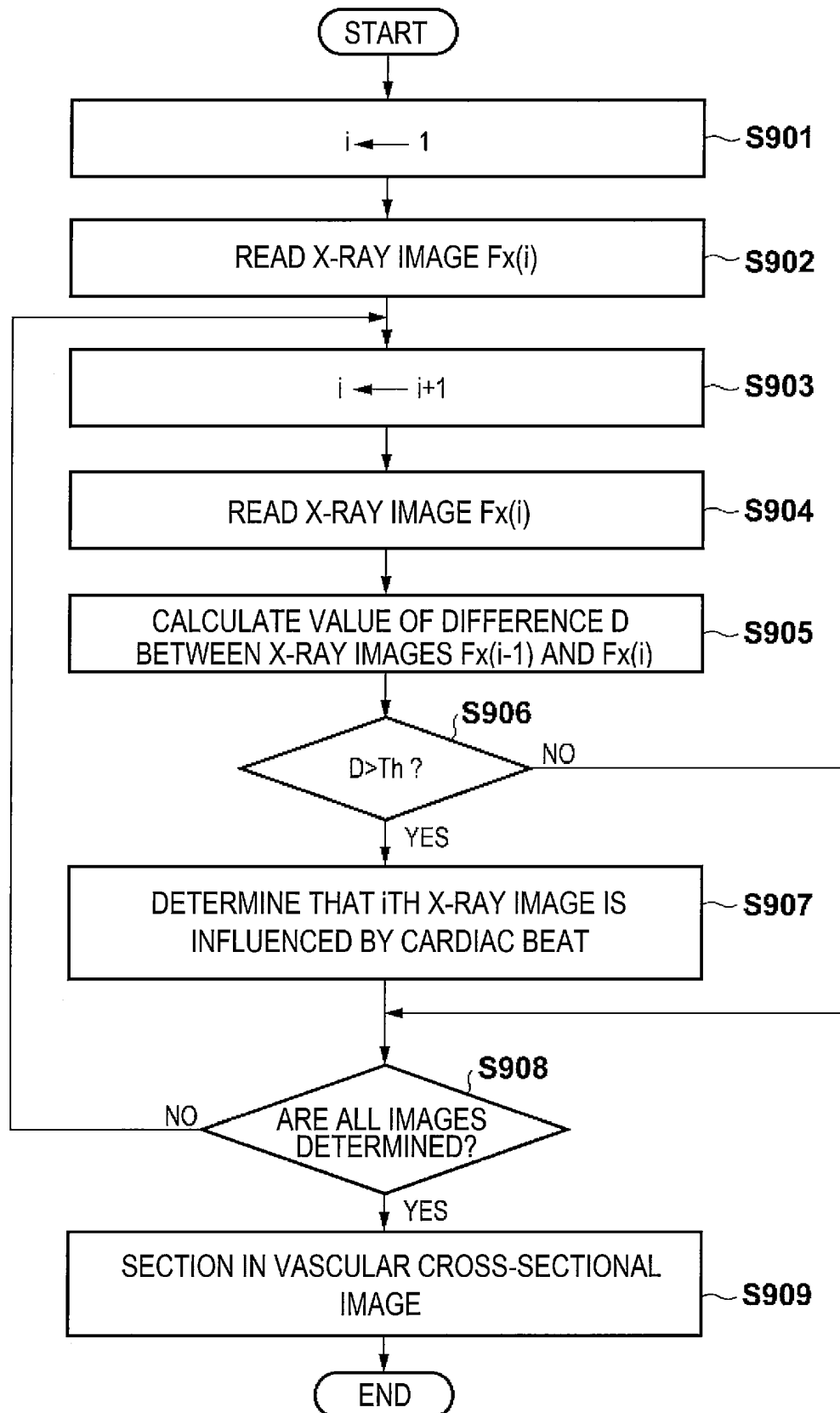
[FIG. 7]



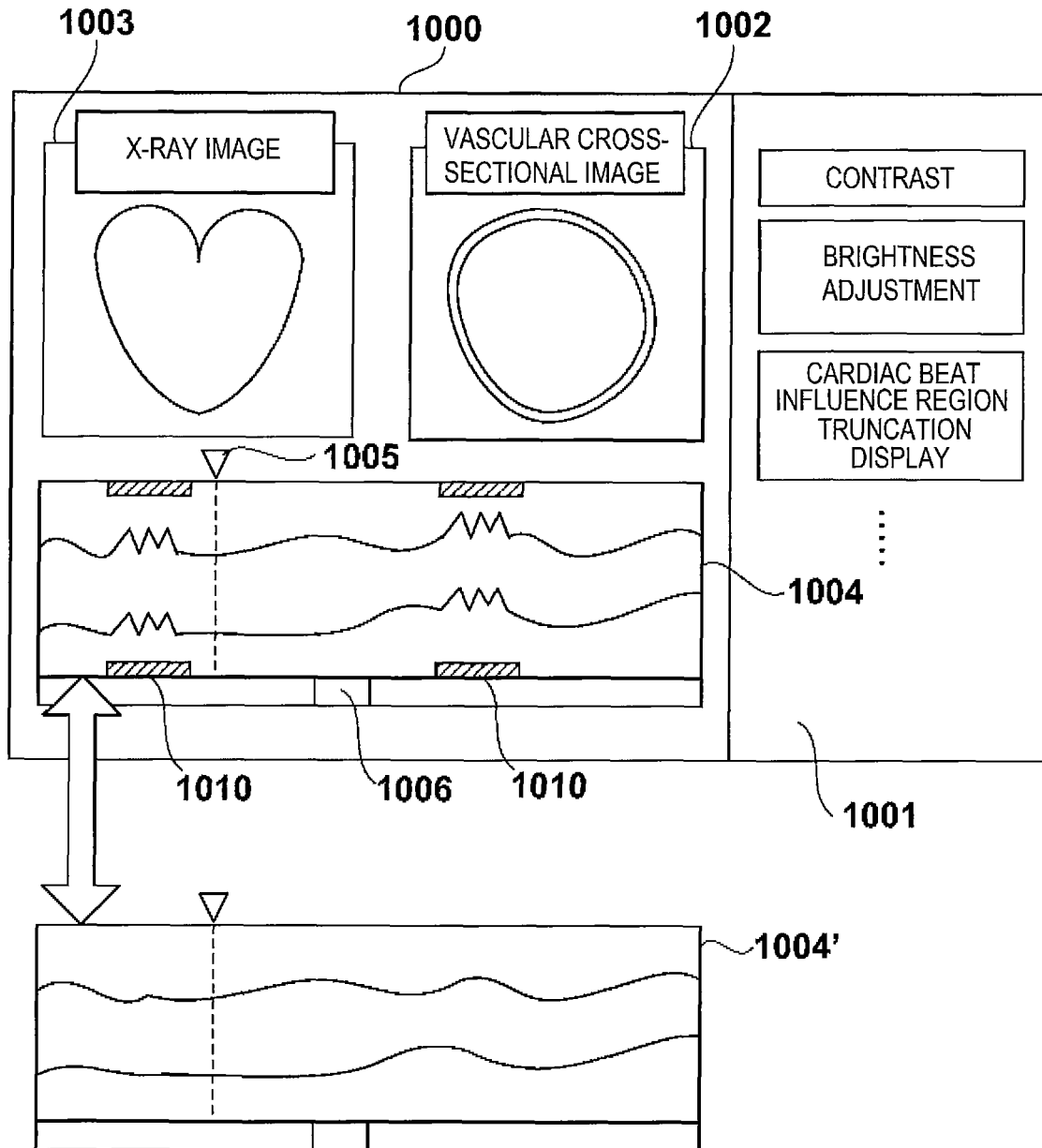
[FIG. 8]



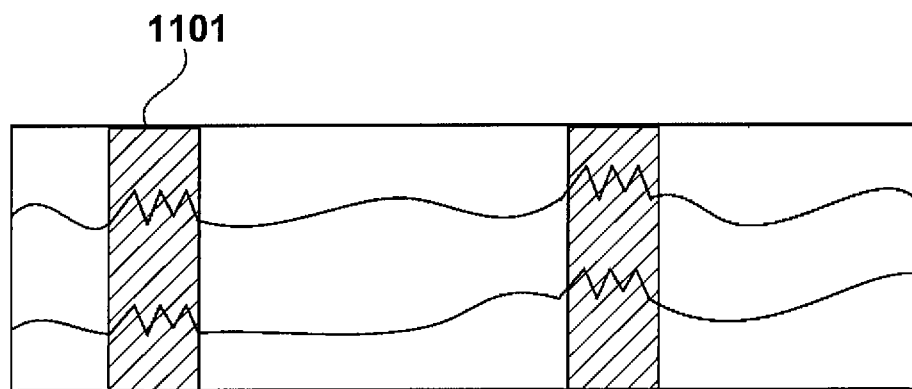
[FIG. 9]



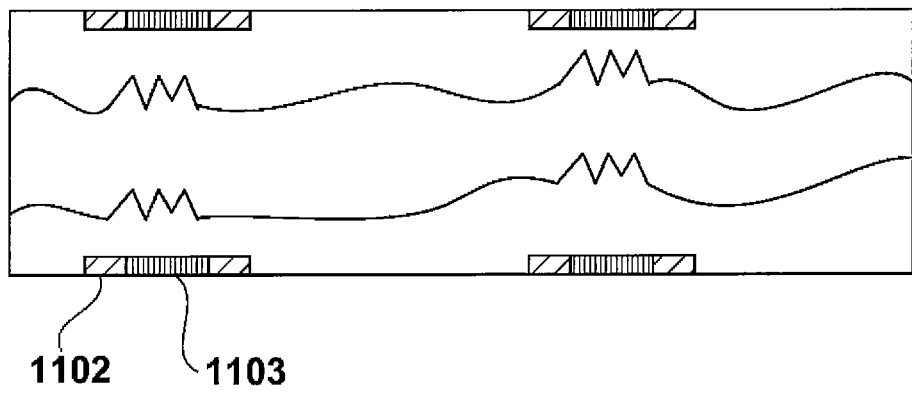
[FIG. 10]



[FIG. 11A]



[FIG. 11B]



INTERNATIONAL SEARCH REPORT

International application No.

PCT/JP2013/002382

A. CLASSIFICATION OF SUBJECT MATTER

A61B1/04(2006.01) i, A61B1/00(2006.01) i, A61B6/00(2006.01) i, A61B8/12(2006.01) i

According to International Patent Classification (IPC) or to both national classification and IPC

B. FIELDS SEARCHED

Minimum documentation searched (classification system followed by classification symbols)

A61B1/04, A61B1/00, A61B6/00, A61B8/12

Documentation searched other than minimum documentation to the extent that such documents are included in the fields searched

Jitsuyo Shinan Koho	1922-1996	Jitsuyo Shinan Toroku Koho	1996-2013
Kokai Jitsuyo Shinan Koho	1971-2013	Toroku Jitsuyo Shinan Koho	1994-2013

Electronic data base consulted during the international search (name of data base and, where practicable, search terms used)

C. DOCUMENTS CONSIDERED TO BE RELEVANT

Category*	Citation of document, with indication, where appropriate, of the relevant passages	Relevant to claim No.
A	JP 2007-503906 A (Koninklijke Philips Electronics N.V.), 01 March 2007 (01.03.2007), paragraphs [0020], [0035] to [0037]; fig. 1 & US 2007/0038081 A1 & US 2010/0049034 A1 & EP 1665168 A & WO 2005/024729 A1	1-9, 11-13
A	JP 2010-158288 A (Konica Minolta Holdings, Inc.), 22 July 2010 (22.07.2010), paragraphs [0082], [0083] (Family: none)	1-9, 11-13

☒ Further documents are listed in the continuation of Box C.

☐ See patent family annex.

* Special categories of cited documents:

"A" document defining the general state of the art which is not considered to be of particular relevance

"E" earlier application or patent but published on or after the international filing date

"L" document which may throw doubts on priority claim(s) or which is cited to establish the publication date of another citation or other special reason (as specified)

"O" document referring to an oral disclosure, use, exhibition or other means

"P" document published prior to the international filing date but later than the priority date claimed

"T" later document published after the international filing date or priority date and not in conflict with the application but cited to understand the principle or theory underlying the invention

"X" document of particular relevance; the claimed invention cannot be considered novel or cannot be considered to involve an inventive step when the document is taken alone

"Y" document of particular relevance; the claimed invention cannot be considered to involve an inventive step when the document is combined with one or more other such documents, such combination being obvious to a person skilled in the art

"&" document member of the same patent family

Date of the actual completion of the international search
02 July, 2013 (02.07.13)

Date of mailing of the international search report
16 July, 2013 (16.07.13)

Name and mailing address of the ISA/
Japanese Patent Office

Authorized officer

Facsimile No.

Telephone No.

INTERNATIONAL SEARCH REPORT

International application No.

PCT/JP2013/002382

C (Continuation). DOCUMENTS CONSIDERED TO BE RELEVANT

Category*	Citation of document, with indication, where appropriate, of the relevant passages	Relevant to claim No.
A	JP 2010-253017 A (Toshiba Corp.), 11 November 2010 (11.11.2010), paragraphs [0034] to [0040], [0080] to [0083]; fig. 3, 13, 16B (Family: none)	1-9, 11-13

Form PCT/ISA/210 (continuation of second sheet) (July 2009)

INTERNATIONAL SEARCH REPORT

International application No.

PCT/JP2013/002382

Box No. II Observations where certain claims were found unsearchable (Continuation of item 2 of first sheet)

This international search report has not been established in respect of certain claims under Article 17(2)(a) for the following reasons:

1. ☒ Claims Nos.: 10

because they relate to subject matter not required to be searched by this Authority, namely:
(See extra sheet)

2. ☐ Claims Nos.:

because they relate to parts of the international application that do not comply with the prescribed requirements to such an extent that no meaningful international search can be carried out, specifically:

3. ☐ Claims Nos.:

because they are dependent claims and are not drafted in accordance with the second and third sentences of Rule 6.4(a).

Box No. III Observations where unity of invention is lacking (Continuation of item 3 of first sheet)

This International Searching Authority found multiple inventions in this international application, as follows:

1. ☐ As all required additional search fees were timely paid by the applicant, this international search report covers all searchable claims.

2. ☐ As all searchable claims could be searched without effort justifying additional fees, this Authority did not invite payment of additional fees.

3. ☐ As only some of the required additional search fees were timely paid by the applicant, this international search report covers only those claims for which fees were paid, specifically claims Nos.:

4. ☐ No required additional search fees were timely paid by the applicant. Consequently, this international search report is restricted to the invention first mentioned in the claims; it is covered by claims Nos.:

Remark on Protest

☐ The additional search fees were accompanied by the applicant's protest and, where applicable, the payment of a protest fee.

☐ The additional search fees were accompanied by the applicant's protest but the applicable protest fee was not paid within the time limit specified in the invitation.

☐ No protest accompanied the payment of additional search fees.

Form PCT/ISA/210 (continuation of first sheet (2)) (July 2009)

INTERNATIONAL SEARCH REPORT

International application No.

PCT/JP2013/002382

Continuation of Box No.II-1 of continuation of first sheet (2)

Claim 10 can include a method for controlling a diagnostic imaging device during the use of a device (a probe) in the human body by a physician, and therefore pertains to a method for surgery or diagnosis of a human body. Thus, the invention of this claim relates to a subject matter which this international searching authority is not required, under the provisions of PCT Article 17(2) (a) (i) and PCT Rule 39.1(iv), to search.

REFERENCES CITED IN THE DESCRIPTION

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Patent documents cited in the description

- JP 11056752 A [0008]
- JP 2006204430 A [0008]
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专利名称(译)	图像诊断设备，用于控制它的方法，程序和计算机可读存储介质		
公开(公告)号	EP2982291A1	公开(公告)日	2016-02-10
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[标]申请(专利权)人(译)	泰尔茂株式会社		
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其他公开文献	EP2982291A4 EP2982291B1		
外部链接	Espacenet		

摘要(译)

根据本发明，当通过旋转位置和成像核心的移动获取数据时，在固定视点位置处的X射线图像被同步以便沿时间轴连续输入。然后，基于X射线图像确定发生诸如心跳等血管活动的定时。获取在通过成像芯的旋转和移动获得的与血管轴正交的平面上的多个血管横截面图像。然后，从血管横截面图像或血管横截面图像中串联产生沿血管轴的血管图像，并且当进行显示时，以可辨别的方式显示具有血管活动的部位。

[FIG. 10]

