



novation and Research

Seeing is Believing: Ultra-high field MRI in Vascular and Neurodegeneration Research

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Outline

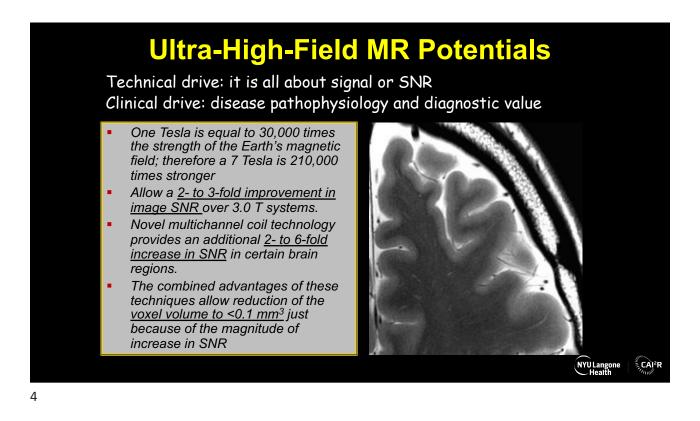
Ultra-high-field MR potentials & challenges

Susceptibility-sensitive imaging on 7T

Seeing is believing & what we can see

The role of ultra-high field MRI in aging and dementia

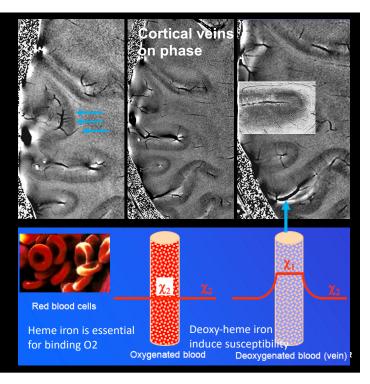




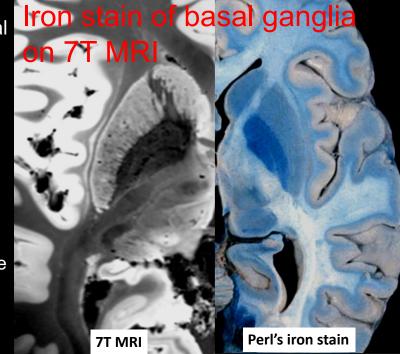
Char	acte	ristics of high	er field MRI
Characteristics	↑ or ↓	Strength	Challenges
SNR	ተተ	Benefit in all aspects in image quality especially in high resolution imaging	None noted
Т1	Ŷ	Benefit in Artery Spin Labeling Technique, TOF MR angiography. ↓ doses of Gd.	\uparrow TR to keep the same tissue contrast.
т2	\checkmark	Allow shorter TE	T2 signal drop
SAR	Ŷ	None noted	Due to RF energy deposition, limit the optimization in many protocols such as slice number, flip angle etc
Susceptibility	$\uparrow\uparrow$	Benefit in susceptibility-sensitive imaging	Reduced image quality by susceptibility artifacts
Dielectric effect	Ŷ	None noted	↑ image heterogeneities. Can be improved with optimization and parallel RF transmission.
Chemical shift	Ŷ	Benefit in MRS for ↑ differences in resonance frequency	↑ chemical shift artifacts
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Susceptibility-sensitive Imaging

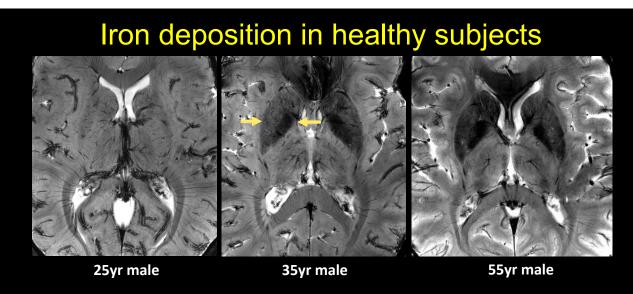
- Susceptibility-sensitive imaging
 - ✓ 2D or 3D gradient echo imaging
 - ✓ SWI
 - ✓ Hypointensity or signal drop
- Higher field MRI has unique susceptibility contrast
 - ✓ BOLD-fMRI
 - ✓ Deoxyhemoglobin
 - ✓ Iron content (heme, non-heme)
 - ✓ Anisotropic fiber



Iron plays a paradoxical role in aging Vital role to normal neuronal functions Strong oxidizer that promotes neurodegeneration Non-heme iron on MRI may be a biomarker of neurodegenerative diseases for metabolic dysfunction and oxidative stress



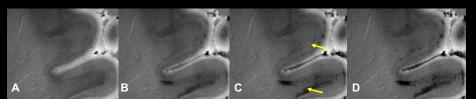
Daugherty AM, 2015



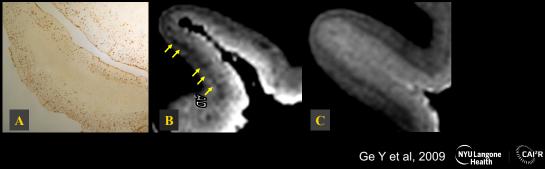
- Clear evidence shows age-related iron increase in basal ganglia (not hippocampus in AD*)
- UHF MRI has advantage for early iron accumulation to predict cognitive impairment



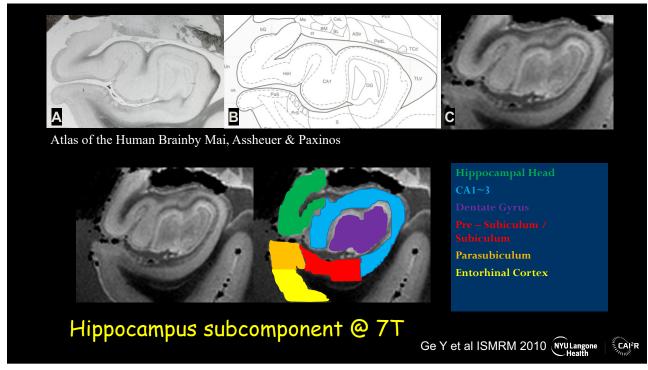
Amyloid iron (postmortem) on 7T

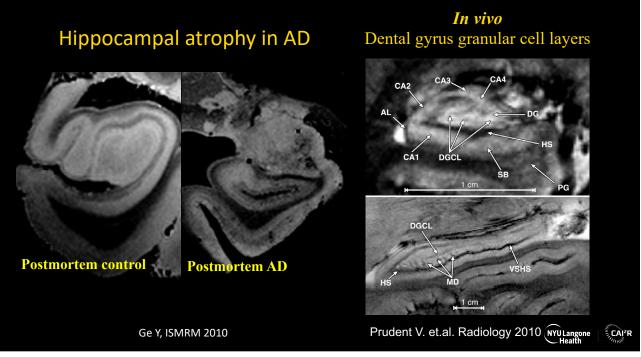


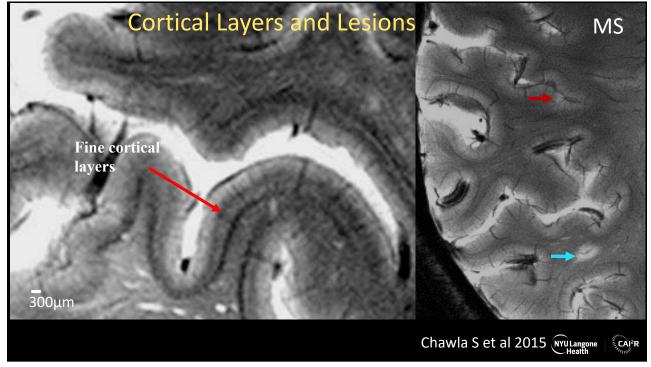
SWI images with phase multiplication factors of 0 (A), 4 (B), 6 (C), and 8 (D) in AD showing the detection of the iron deposition in the cortex

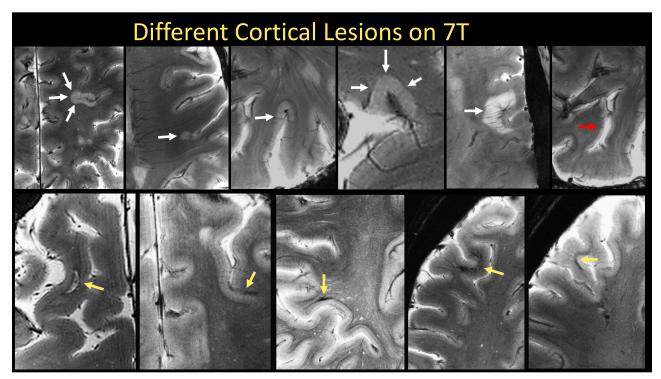


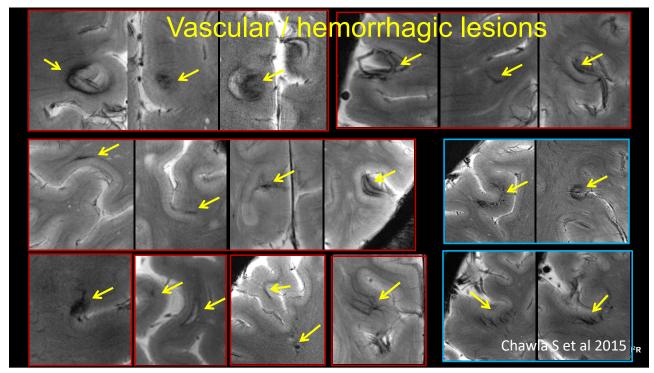
Ge Y et al, 2009







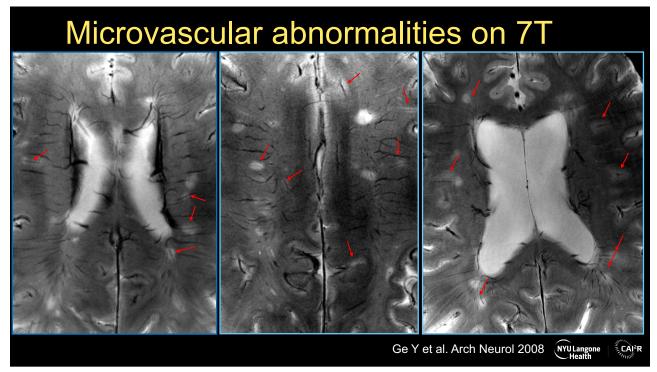




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Seeing the unseen on ultra-high field MRI

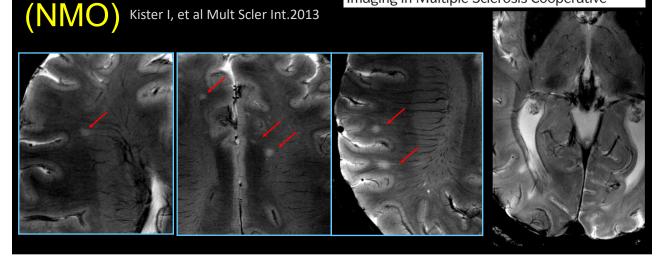
- Technical question
 - How 240µm resolution can see 100µm structure?
 - ✓ Susceptibility blooming effect with largely increased SNR
 - Can they be quantitative?
 - ✓ Yes, but not quite there yet
- Clinical question
 - Are they clinically useful (e.g. diagnosis)?
 - ✓ Yes (especially with FDA approved 7T MRI)



Neuromyelitis optica

OPEN EXPERT CONSENSUS DOCUMENT Sati P et al Nature Reviews 2016

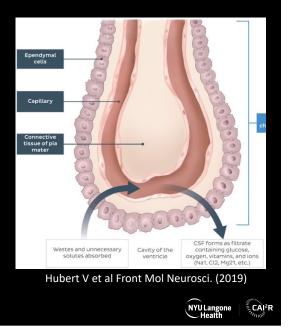
The central vein sign and its clinical evaluation for the diagnosis of multiple sclerosis: a consensus statement from the North American Imaging in Multiple Sclerosis Cooperative

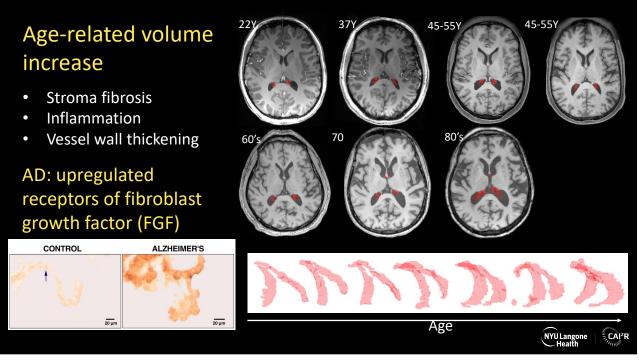


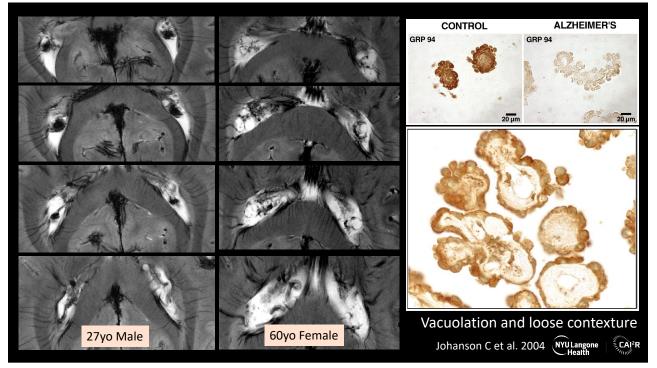
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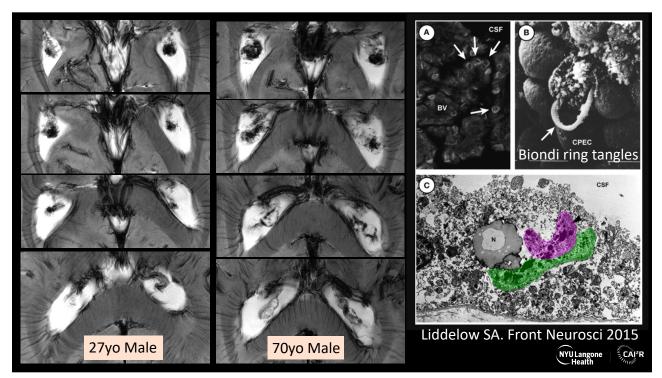
Choroid Plexus

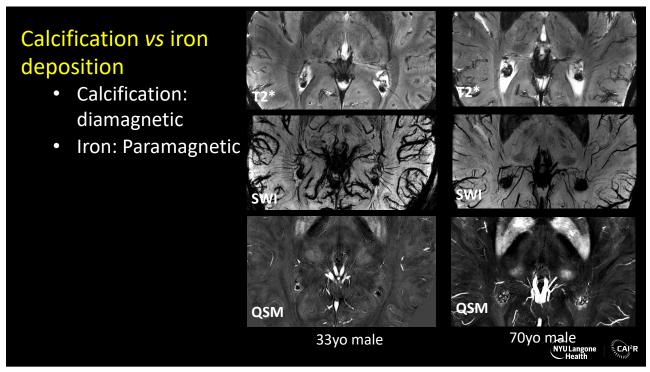
- An epithelial tissue mass highly vascularized with fenestrated blood vessels
 - ✓ Waste absorption
 - ✓ CSF production
 - ✓ Ion exchange
- Blood-CSF barrier
 - Allows substances (e.g., Amino acids, peptide hormones, immune cells to pass through into CSF

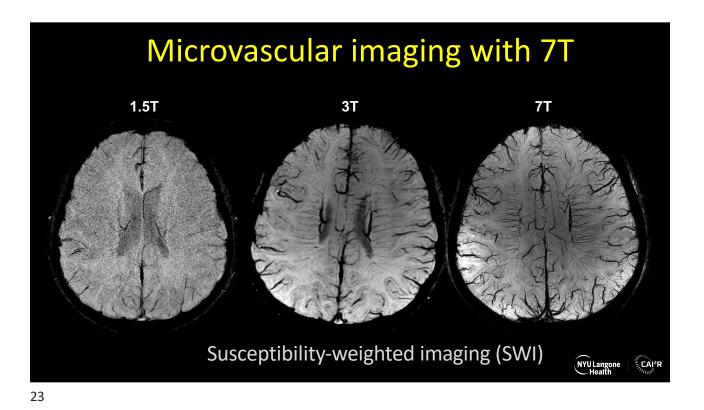


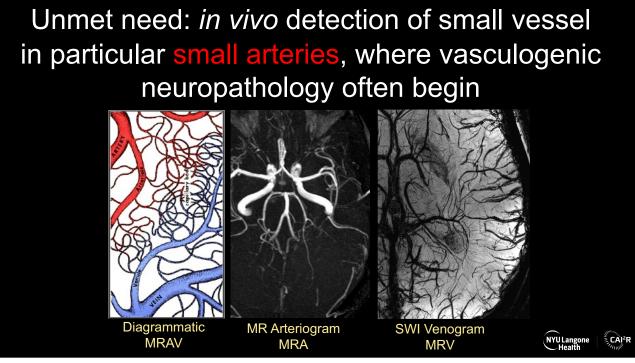


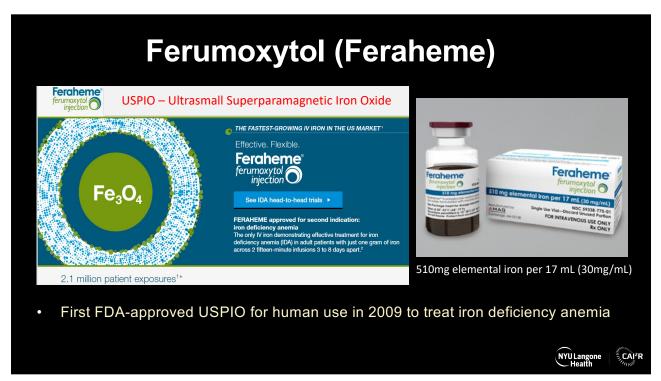




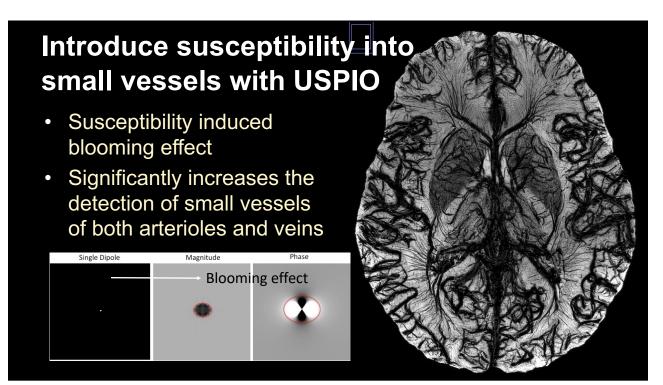


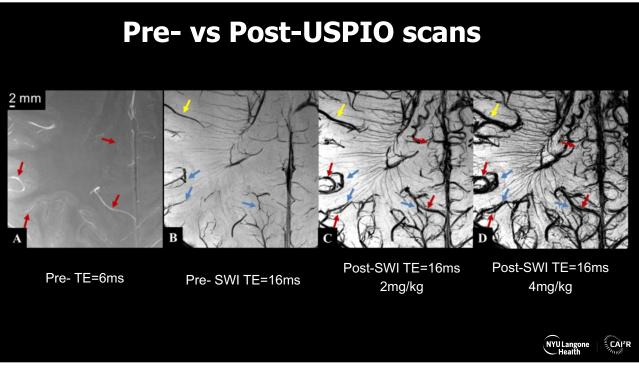


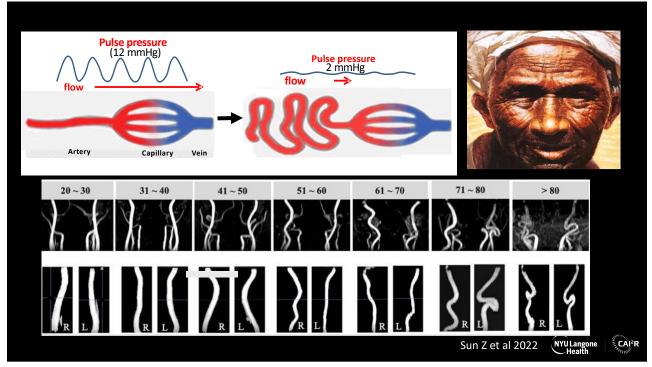


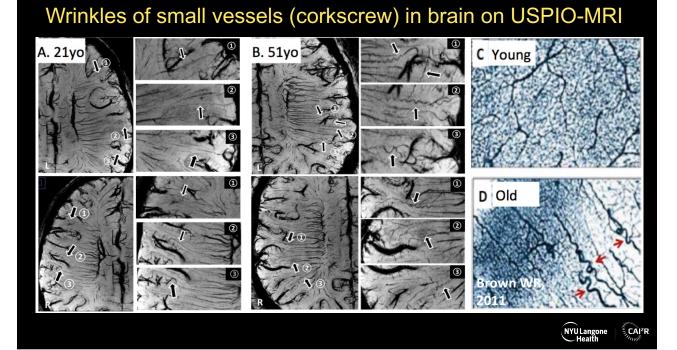


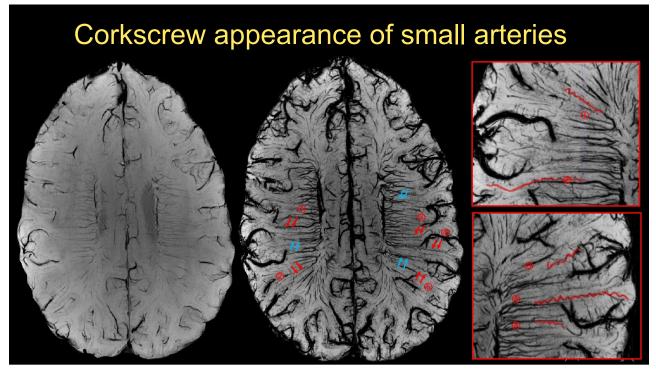


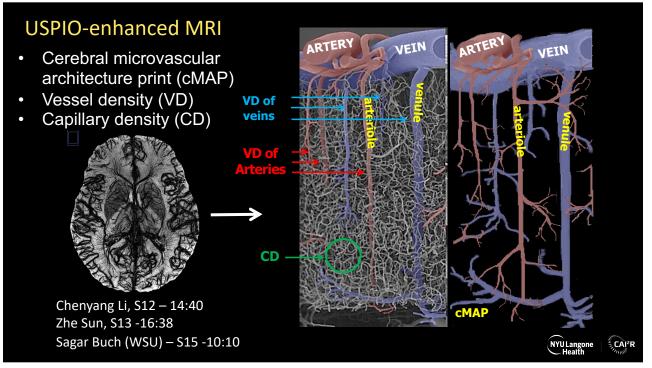










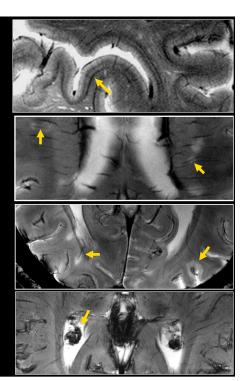


Summary

Seeing is believing: Being an imager or radiologist, we always tend to only believe what we actually see.

Ultra-high field MRI allows

- Macro- to micro-scope lesions (<50µm) that are not see on conventional imaging.
- Discovery of new *in vivo* pathology (iron, inflammation, microbleeds, cell edema, etc)
- Early changes to make early diagnosis and early treatment with better outcome.



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