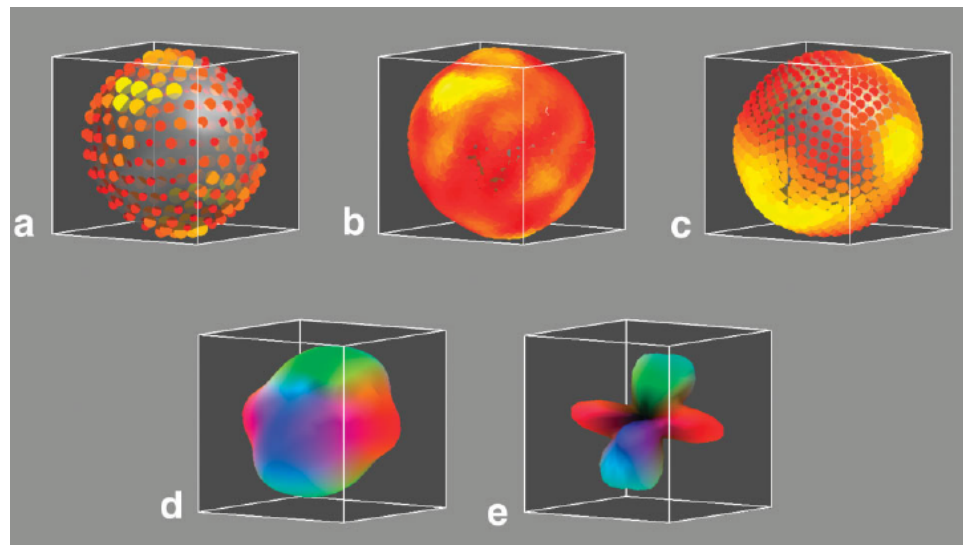


Advanced diffusion methods – acquisition and analysis

Multiple compartment models and multiple fiber reconstruction algorithms

High b values, Diffusion spectrum imaging, QBall imaging....etc



Clinical Applications:

Diffuse axonal injury

Neuro-degenerative disease

Demyelination disorders

Pre-surgical mapping - Neurosurgery

Brain development and developmental disorders

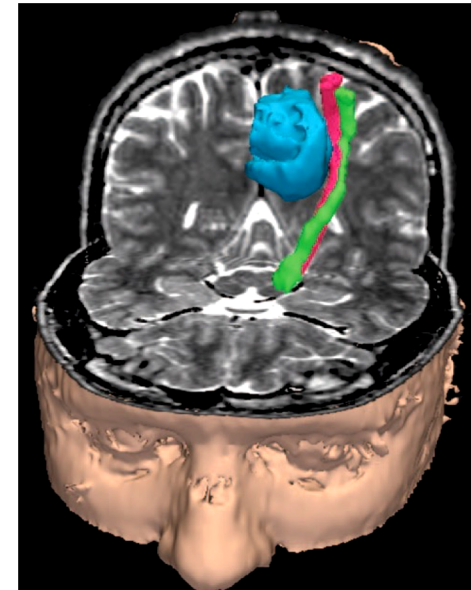
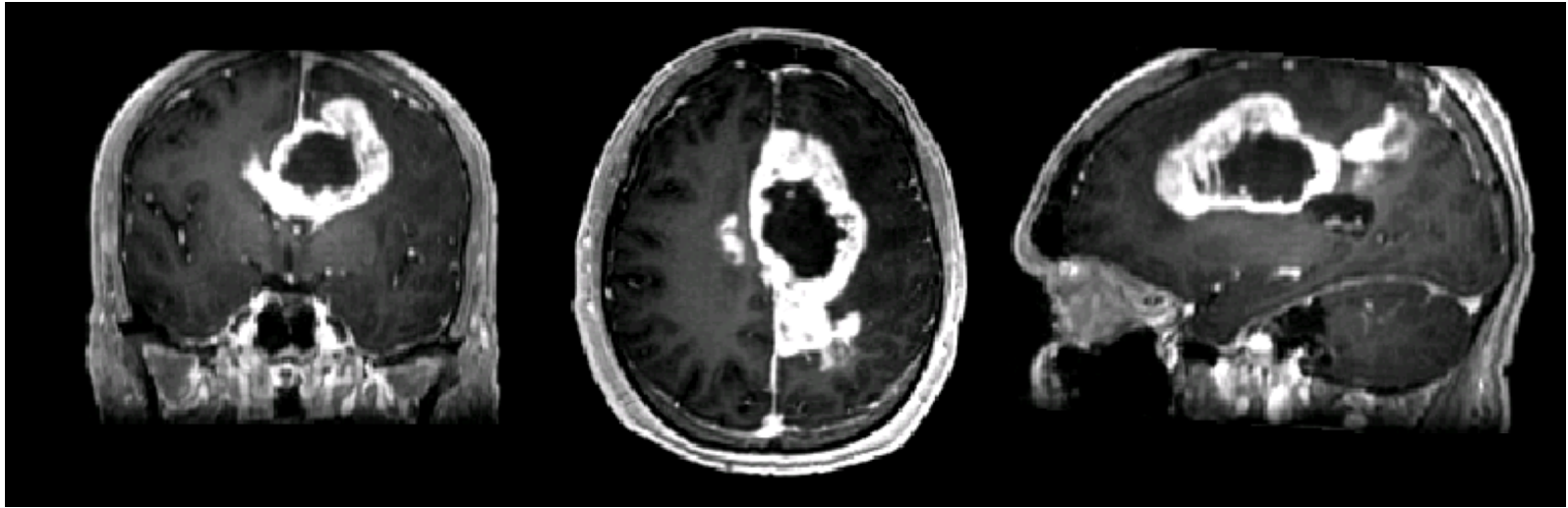
Diagnosis and assessment of severity of injury

Neuroplasticity

Applications in:

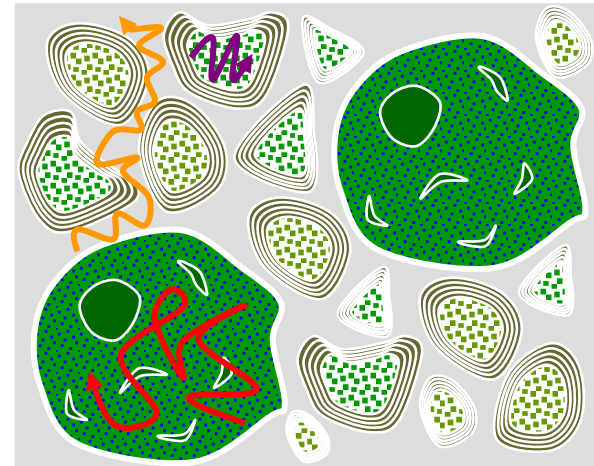
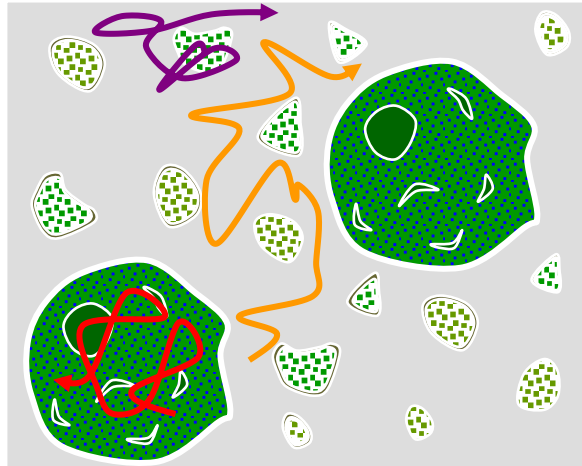
Glaucoma, Blindness, Multiple Sclerosis, Alzheimer's Disease,
Stroke, Trauma, Tumor, Epilepsy, Language & reading,
Movement disorders

Pre-surgical mapping

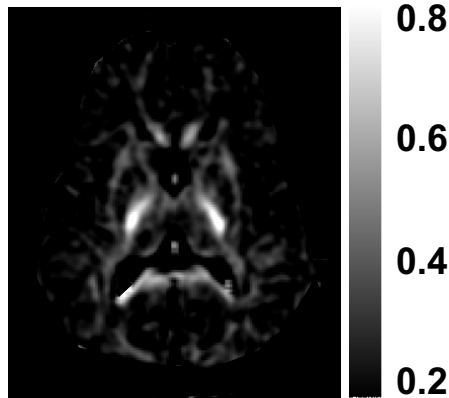


Clinical applications- Examples

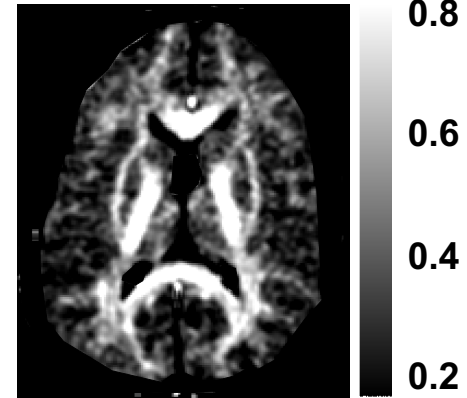
Brain development



11months



11years



Normal development – developmental disorders

6m

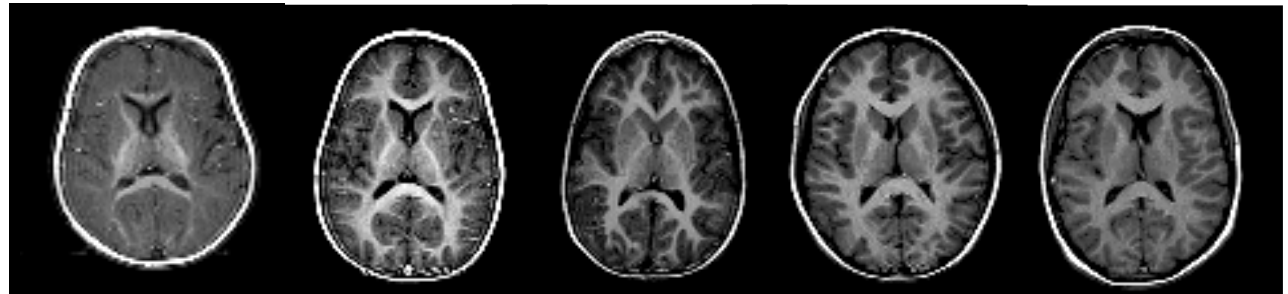
2y

7y

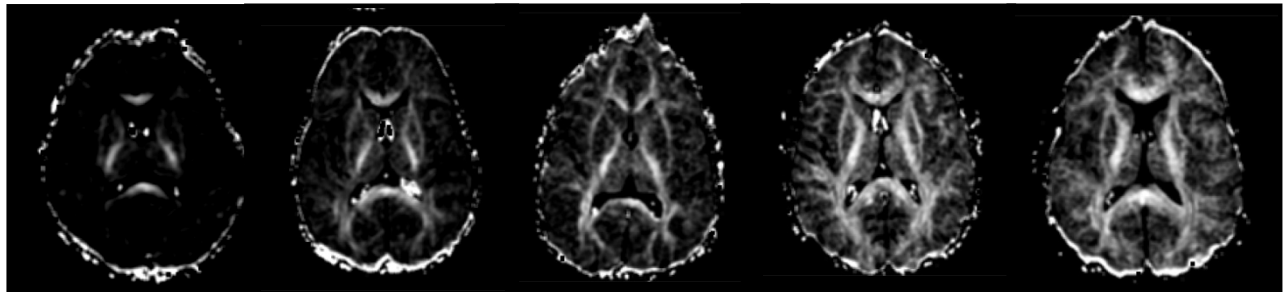
12y

22y

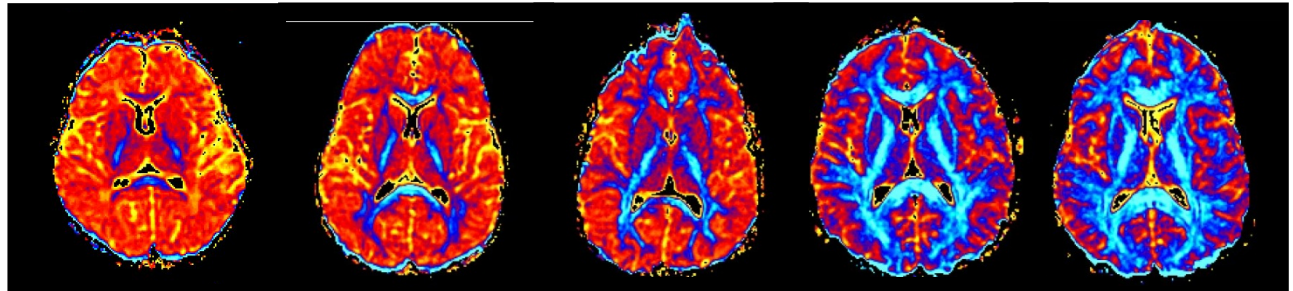
T_1 weighted images
Anatomy



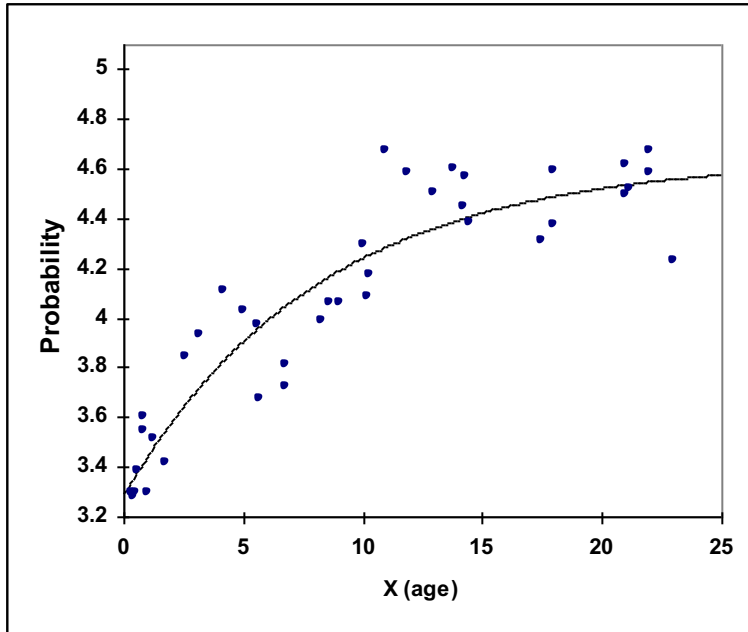
DTI –
Fractional Anisotropy
WM Organization



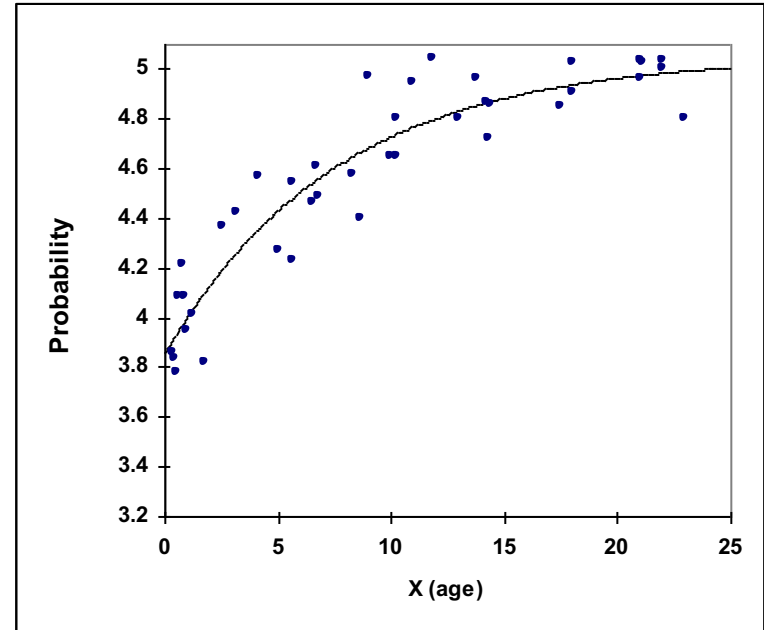
High-b_Q-space
Probability image
WM Integrity



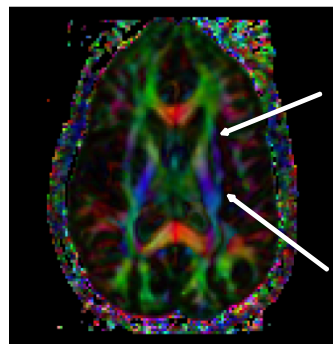
Early Diagnosis – Normal development



Anterior limb internal capsule - Left



Posterior limb internal capsule - Left

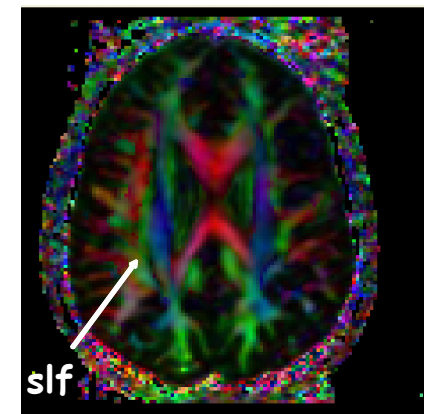
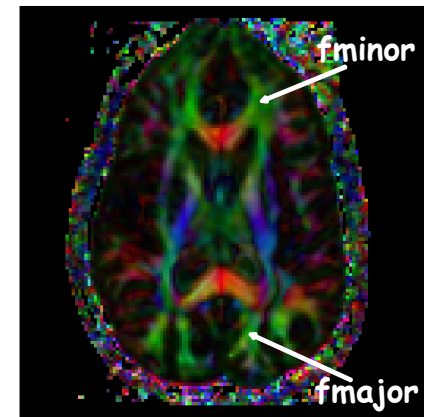
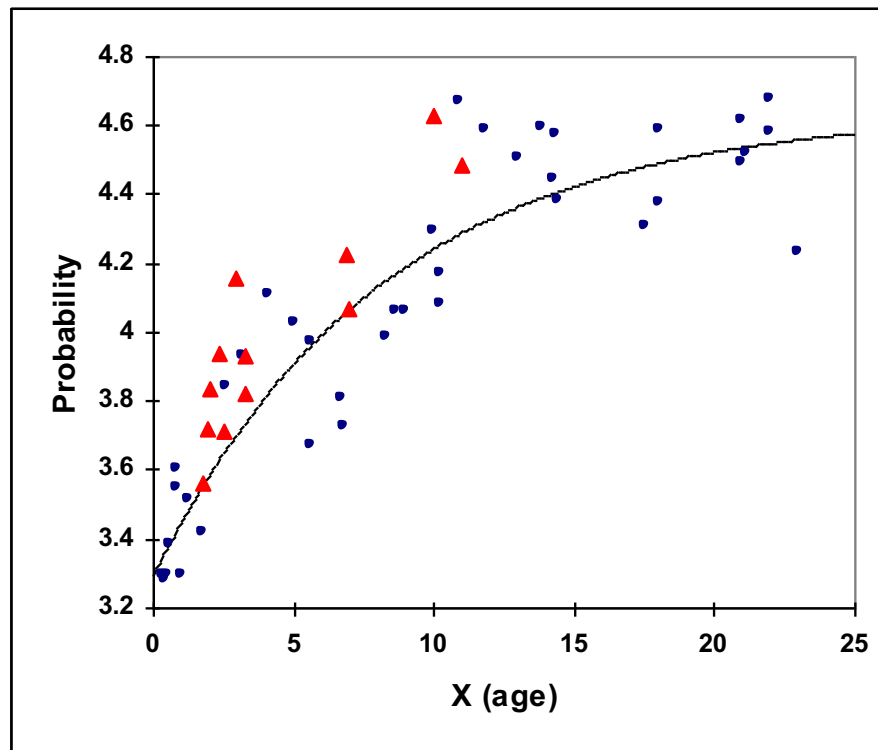


aIC

pIC

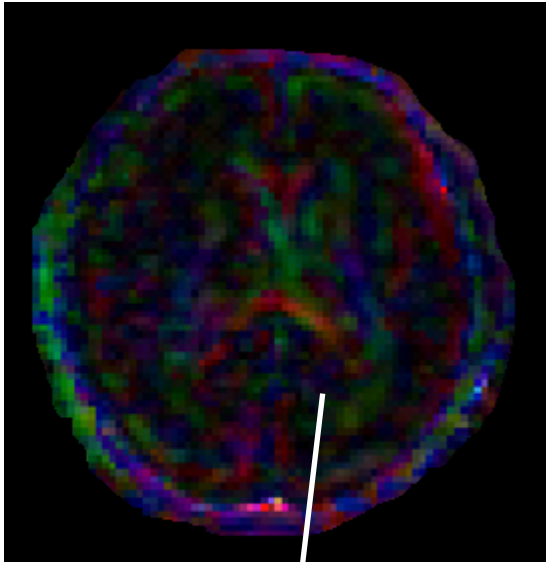
Early Diagnosis – Autism

Increased restriction in some areas in the brain correlating with increased brain volume during the first two years of life

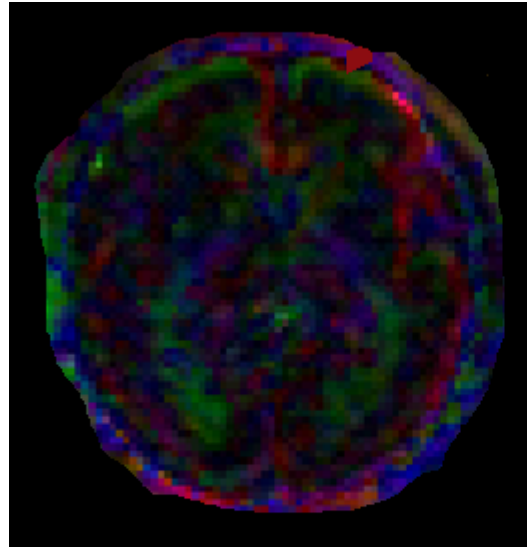
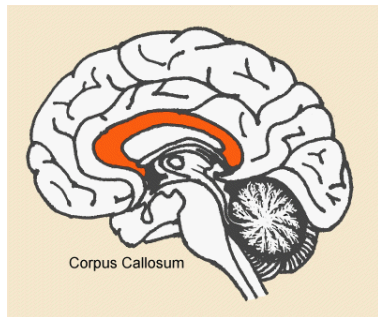


Ben Bashat et al., NeuroImage, 2007
Weinstein et al., HumanBrain Mapping, 2011

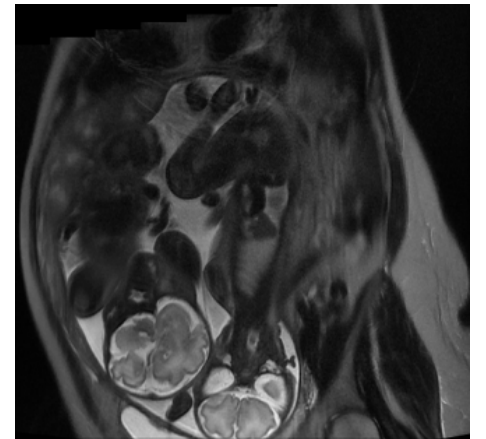
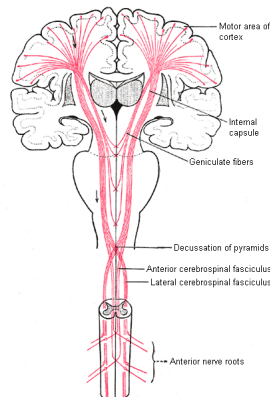
Fetal - MRI



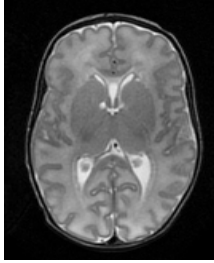
Corpus callosum



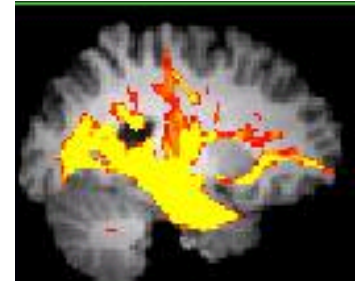
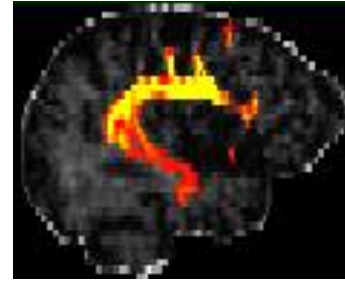
Corticospinal tract



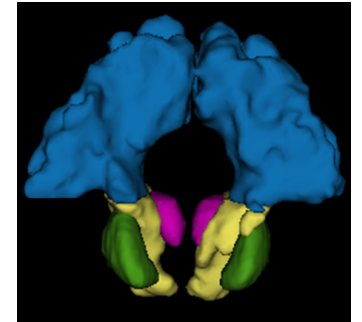
Preterm & term infants



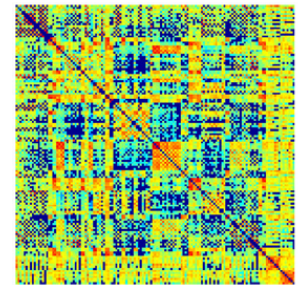
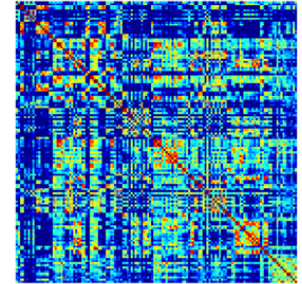
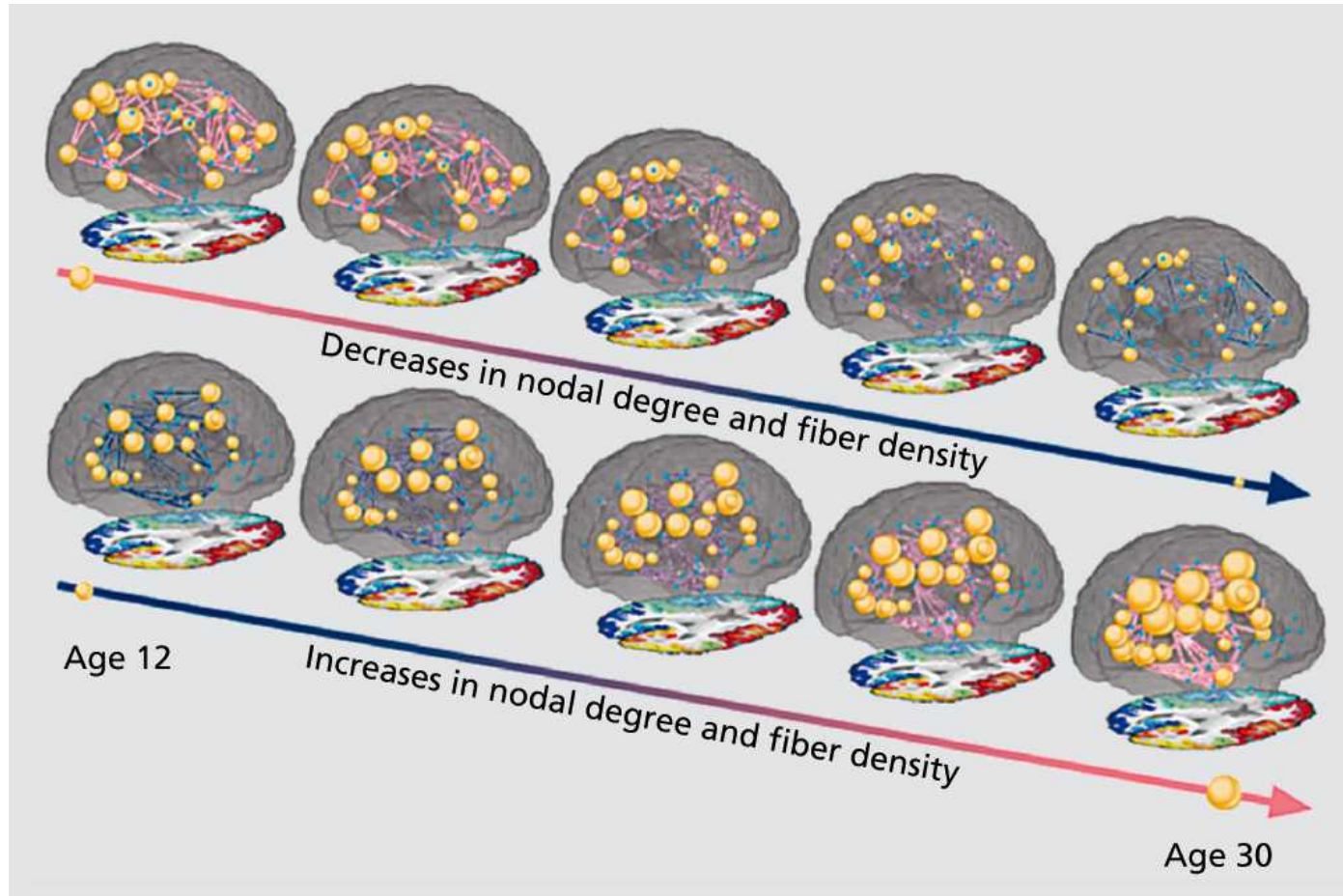
➤ To study integrity in premature infants in order to predict neurological outcome



➤ To assess brain diffusivity in term infants with hypoxic ischemic encephalitis:

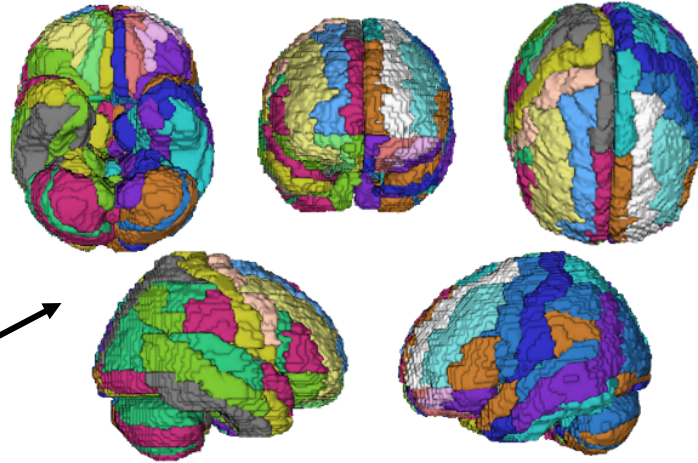


Structural connectivity – brain development

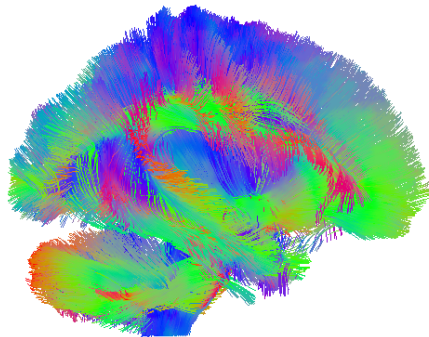


Structural connectivity – Parkinson Disease (PD)

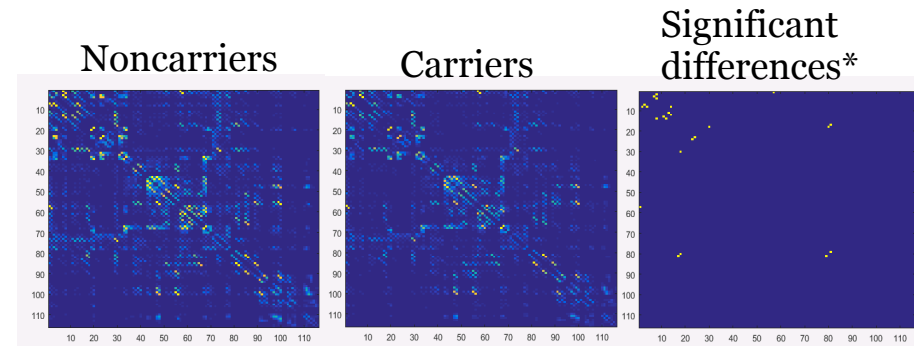
Connectivity analysis based on
AAL=Automated Anatomical Labeling



Whole brain deterministic
fiber tracking

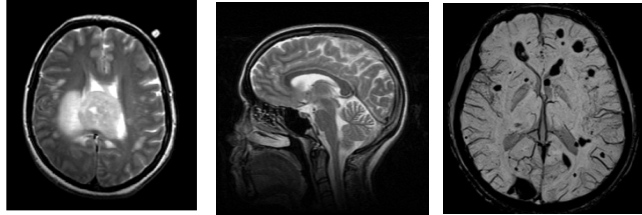


Connectivity matrixes



Structural information

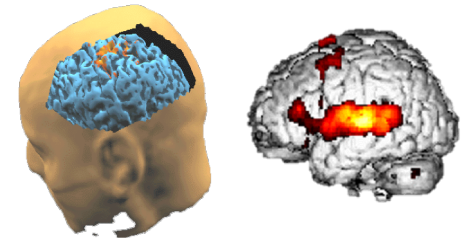
Conventional methods



MRI

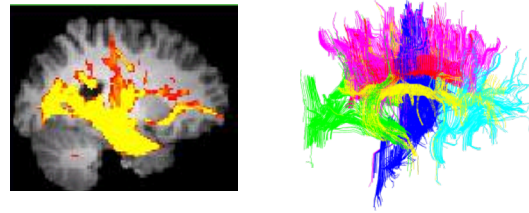
Functional MRI

1990 – BOLD
Functional
Imaging (fMRI)



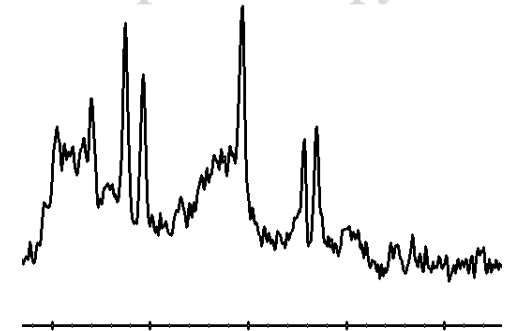
Structural and connectivity information

1994- Diffusion Tensor
Imaging (DTI)



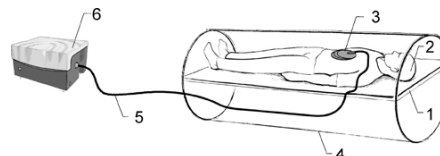
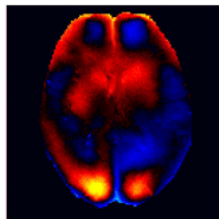
Metabolic information

Spectroscopy



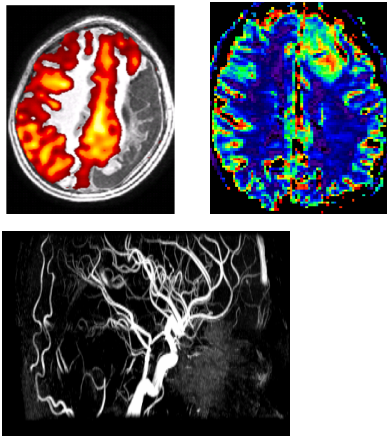
Structural information

MR Electrography



Vascular imaging

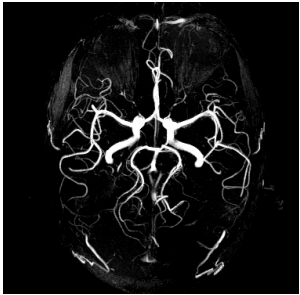
DSC / DCE / ALS
MRA / MRV



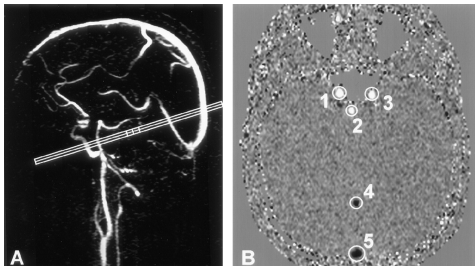
MR Vascular Imaging

Large blood vessels

Time of flight



Phase contrast (PC)



MR Vascular Imaging

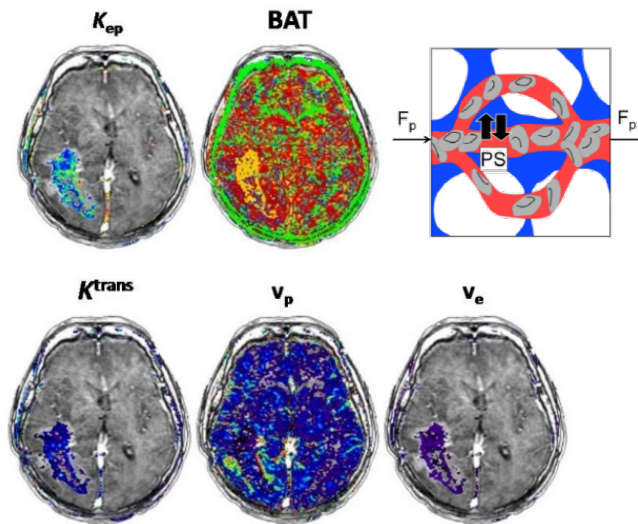
Large blood vessels

Tissue perfusion

Time of flight

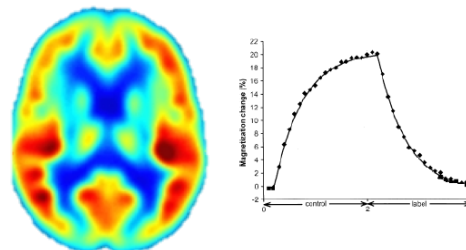
Dynamic Contrast Enhancement (DCE)

Dynamic Susceptibility Contrast (DSC)



Phase contrast (PC)

Arterial Spin Labeling (ASL)

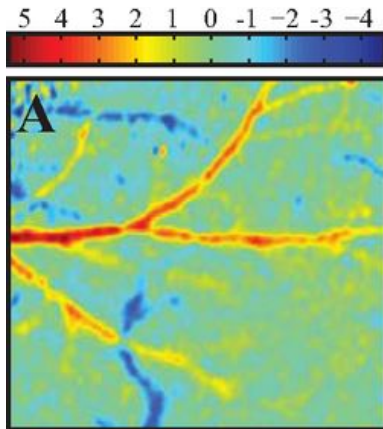
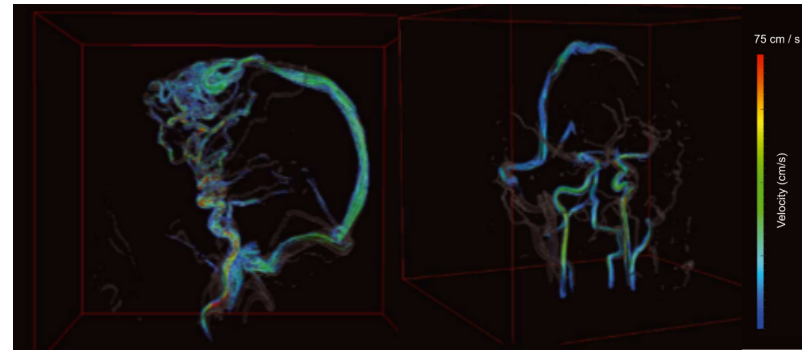


MR Vascular Parameters



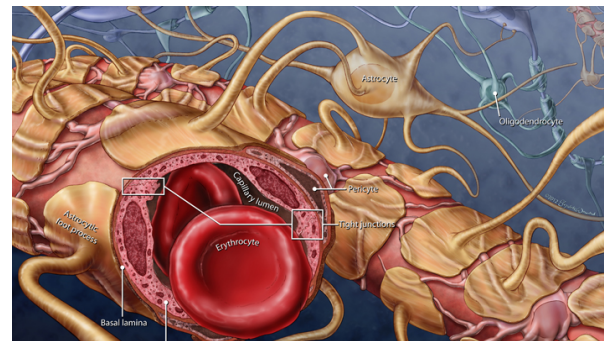
Cerebral blood volume (CBV)
Plasma volume (V_p)

Cerebral blood flow (CBF)



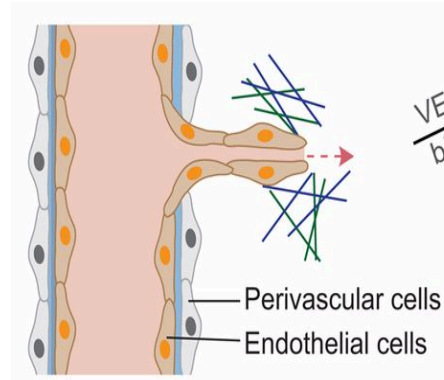
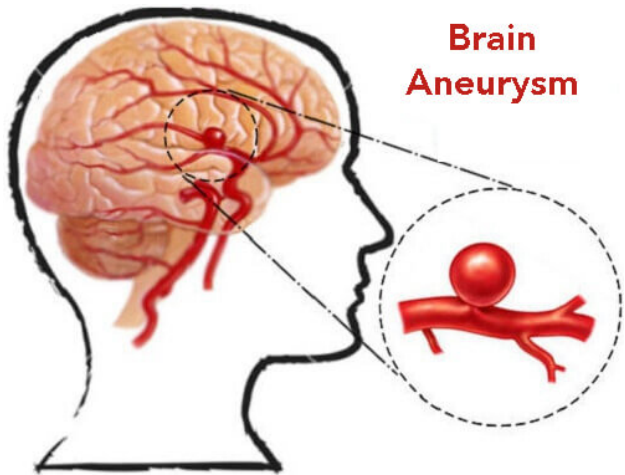
Mean transient time (MTT)
Bolus arrival time (BAT)

Blood brain barrier (BBB) integrity



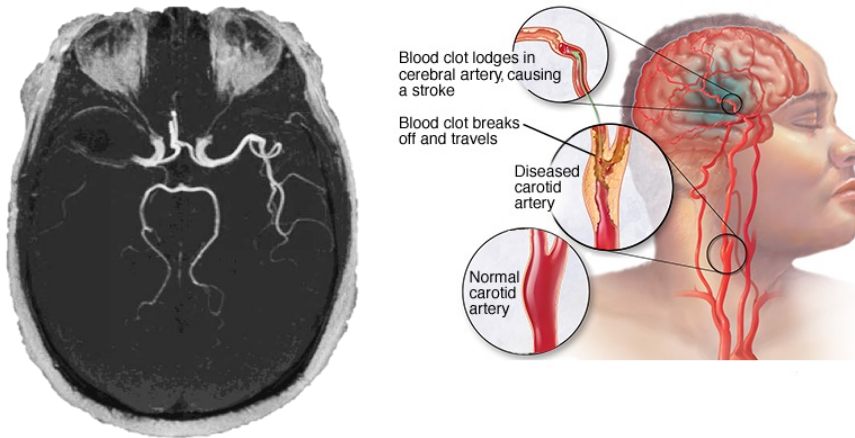
K^{trans} =volume transfer constant
 K_{ep} =interstitium-to-plasma rate constant

Clinical applications

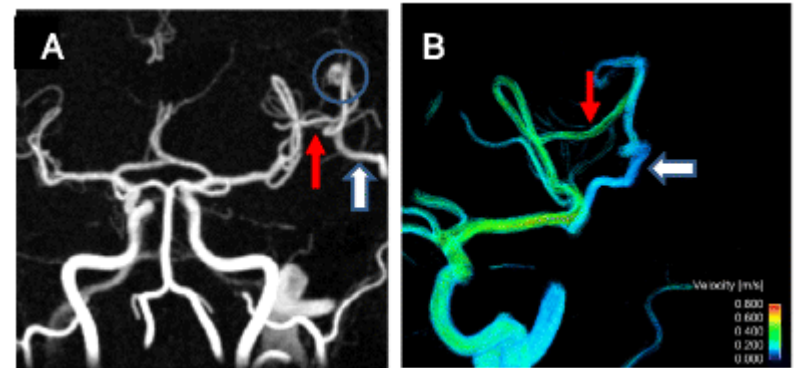


Angiogenesis

Abnormal flow



Stenosis and occlusion



Patrick Turski, Neurovascular Imaging 2016

Clinical applications

Stroke

Vascular disorders

Carotid stenosis

Aneurism

Vascular occlusion – stenosis

Brain tumors

Pre-surgical mapping - Neurosurgery

Bleeding

Hypoxic ischemic injury

Moya-moya

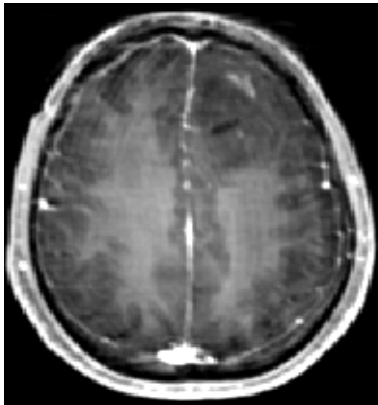
Epilepsy

Neuro Vascular coupling

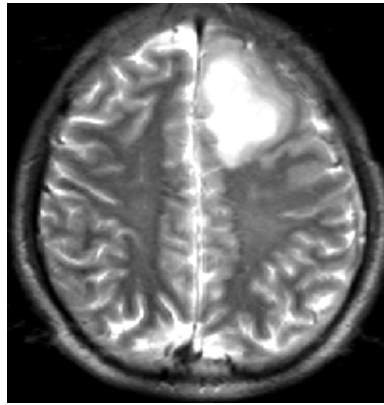
Brain tumors

Non enhancing lesion

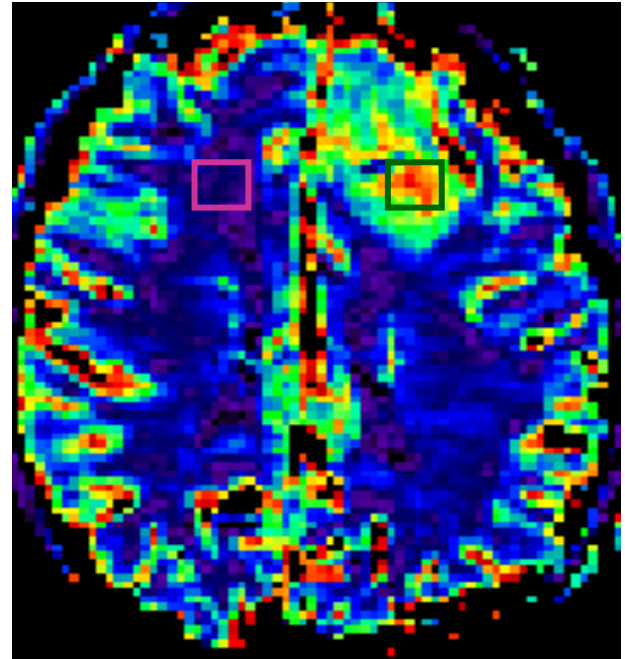
T1 +Gd



T2W



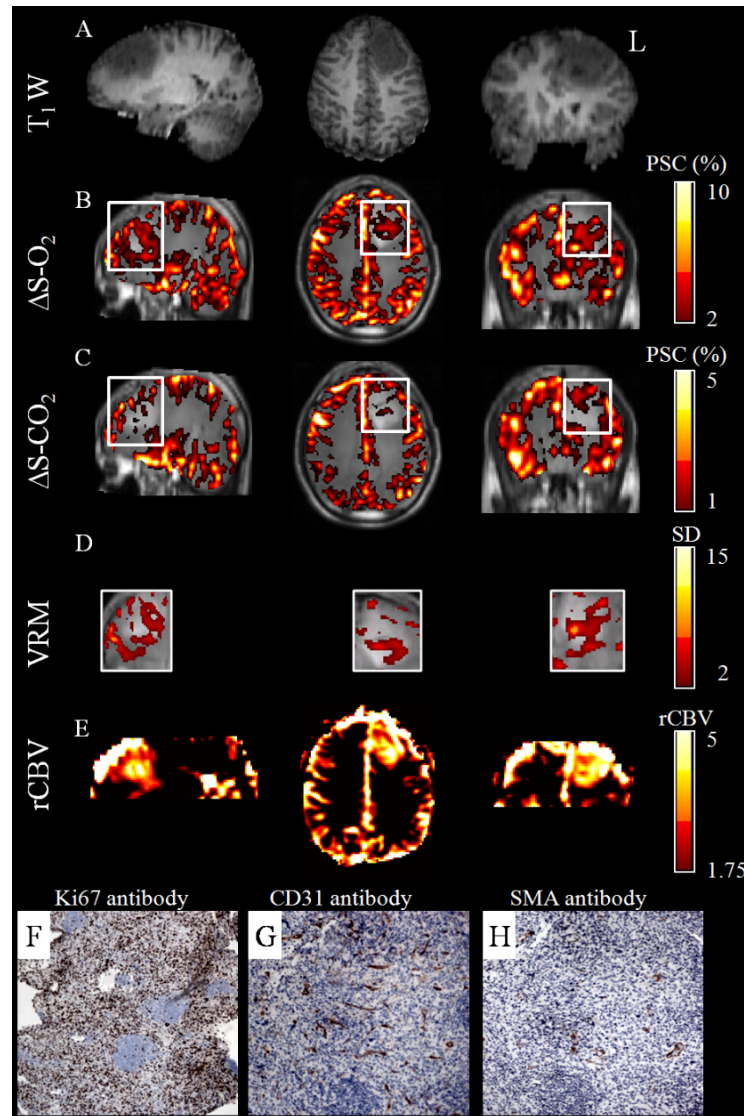
CBV map



$rCBV=5.17$

$rCBV > 1.75$ high grade
tumor

Angiogenesis in high grade brain tumors

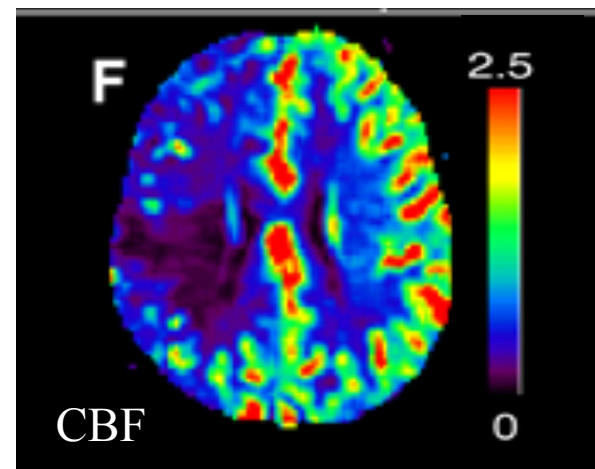
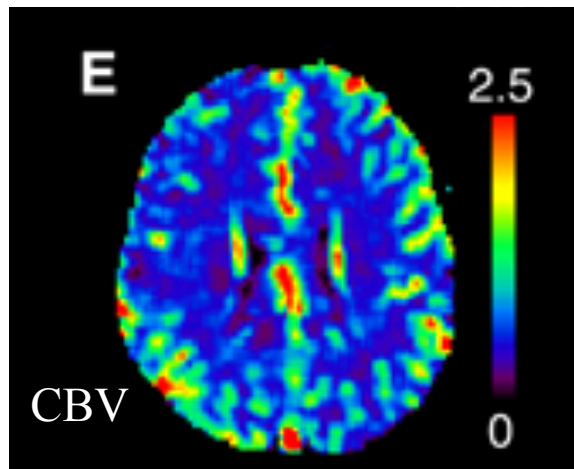
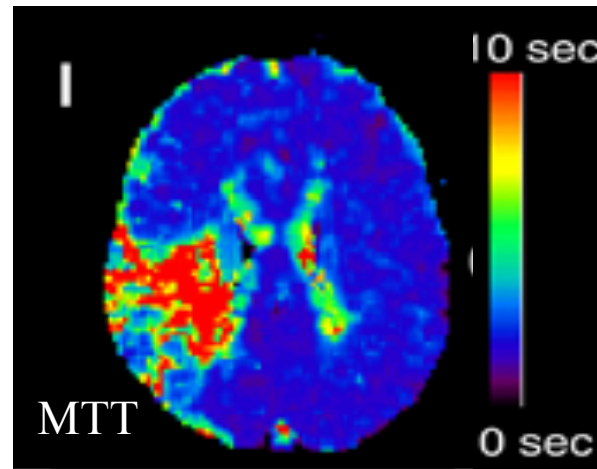
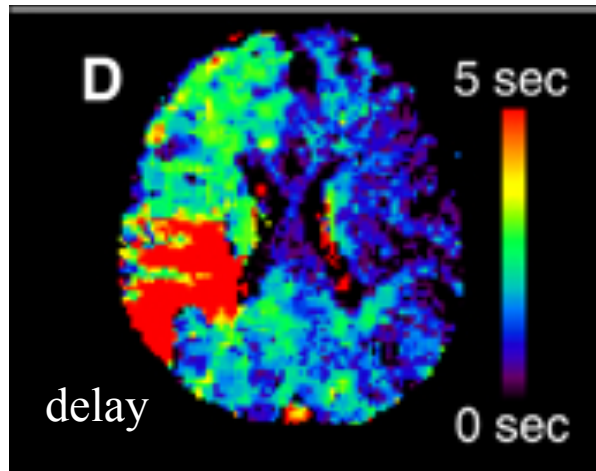
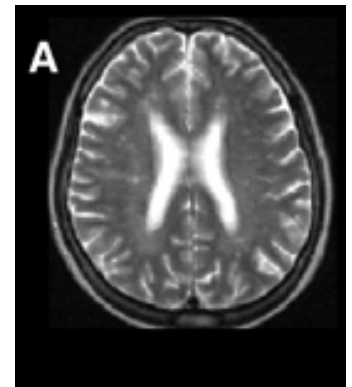


Routinely used in clinical practice



Stroke

65 y.o. woman with acute ischemic stroke



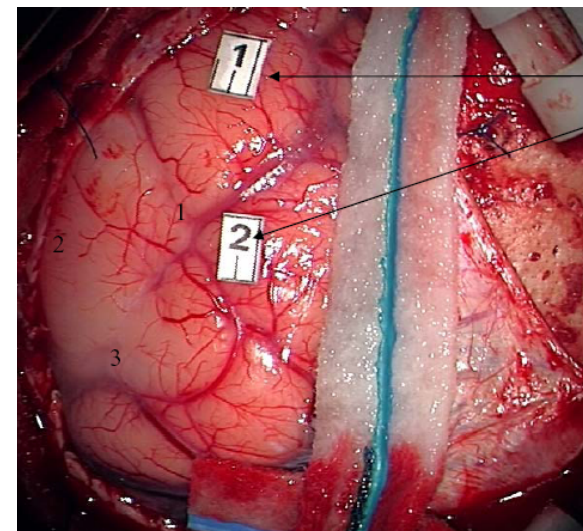
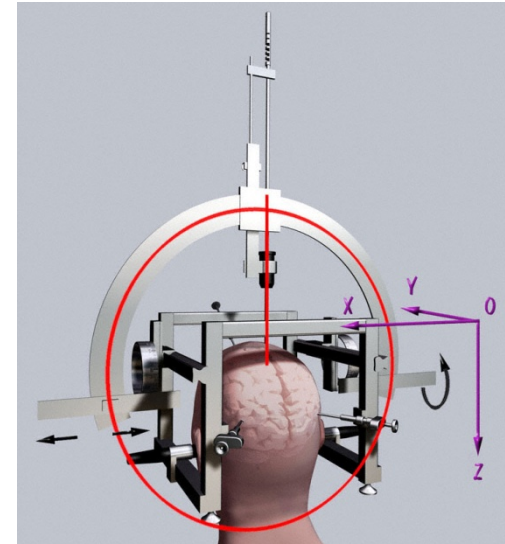
Pre-surgical mapping – stereotactic guided

Stereotactic biopsy:
Correlations between MR and
histopathology findings



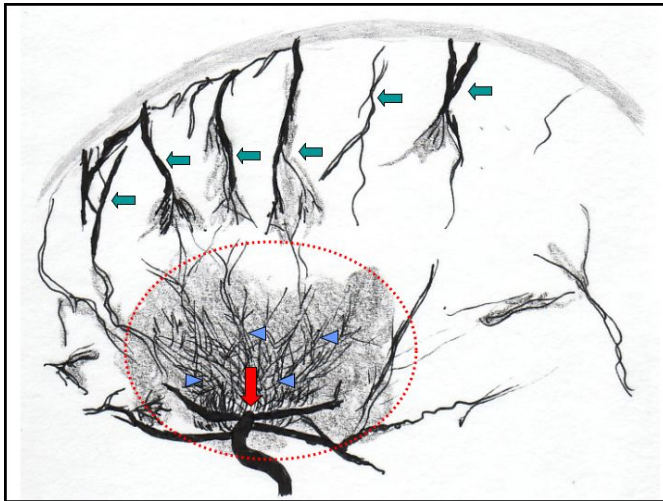
Hyper perfused

Hypo perfused



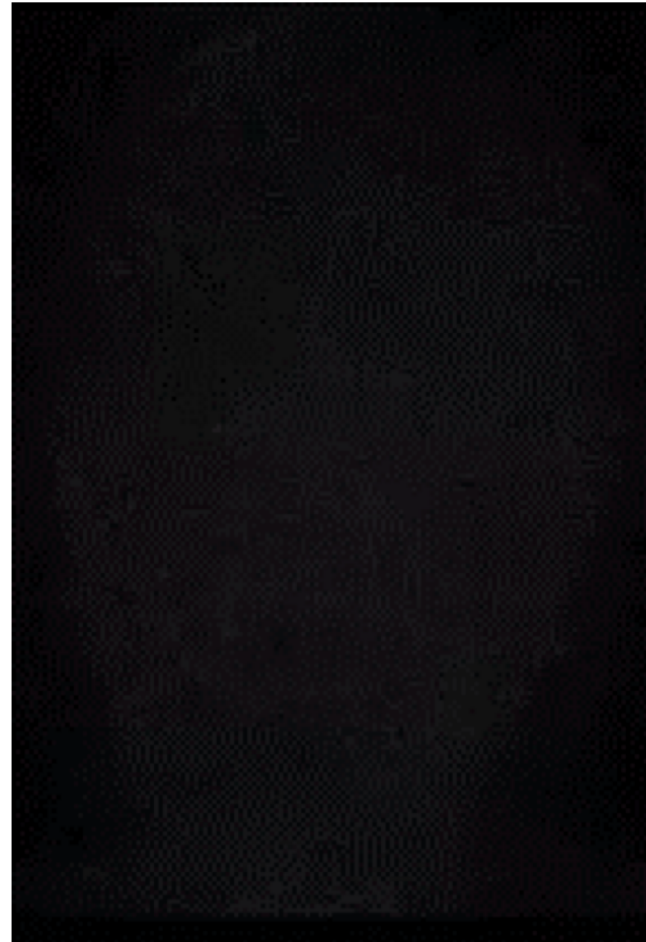
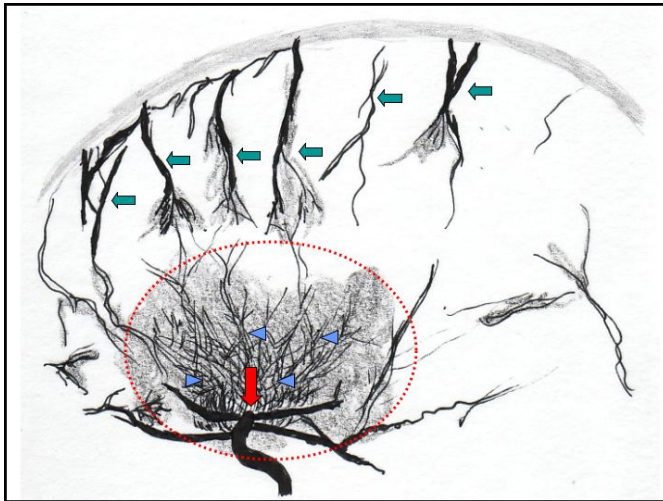
Moya Moya syndrome

Puff of smoke - もやもや (moyamoya) in Japanese

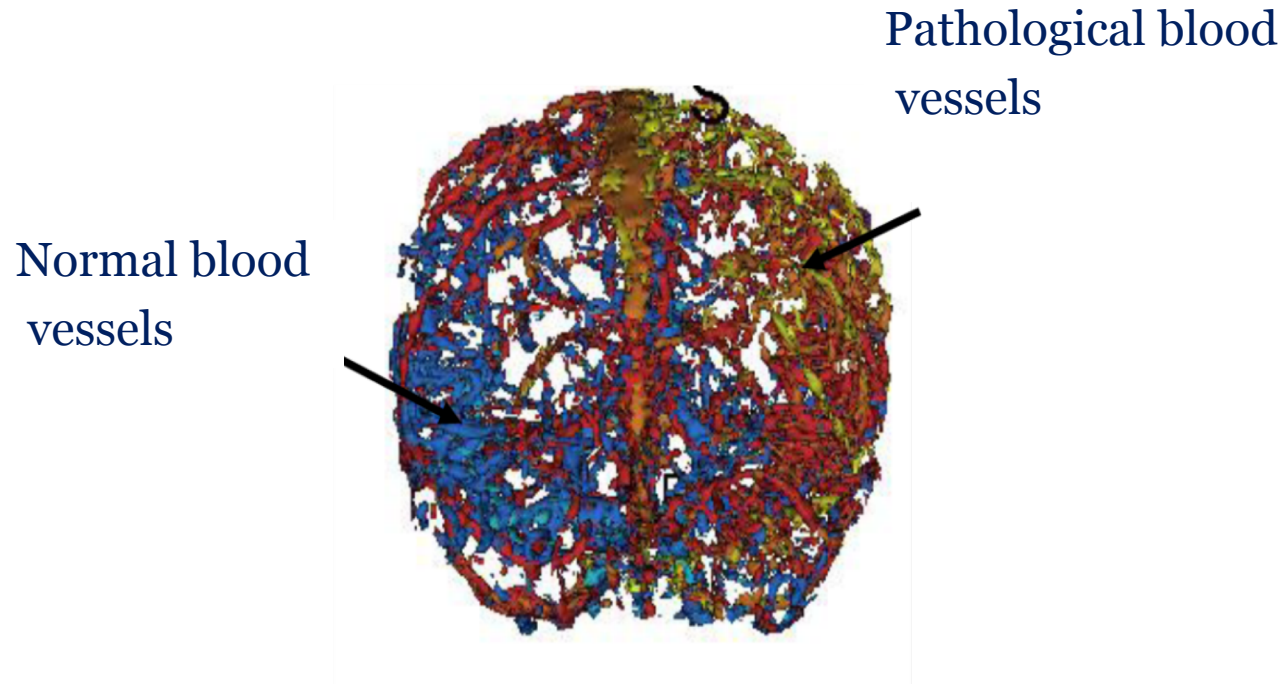


Moya Moya syndrome

Puff of smoke - もやもや (moyamoya) in Japanese

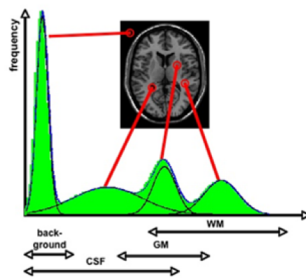


Moya Moya – quantitative imaging

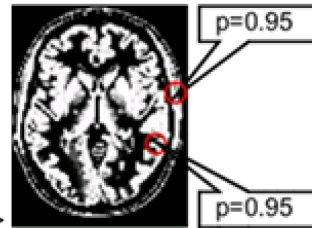


Quantitative imaging: segmentation methods

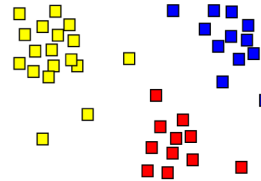
Thresholding



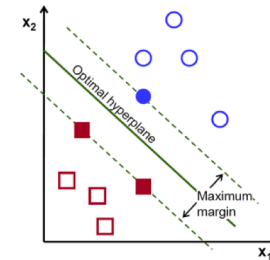
Probabilistic based



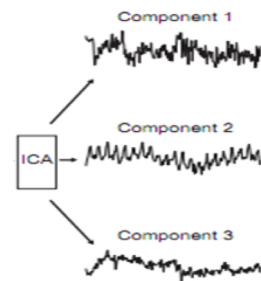
K-means



SVM



ICA

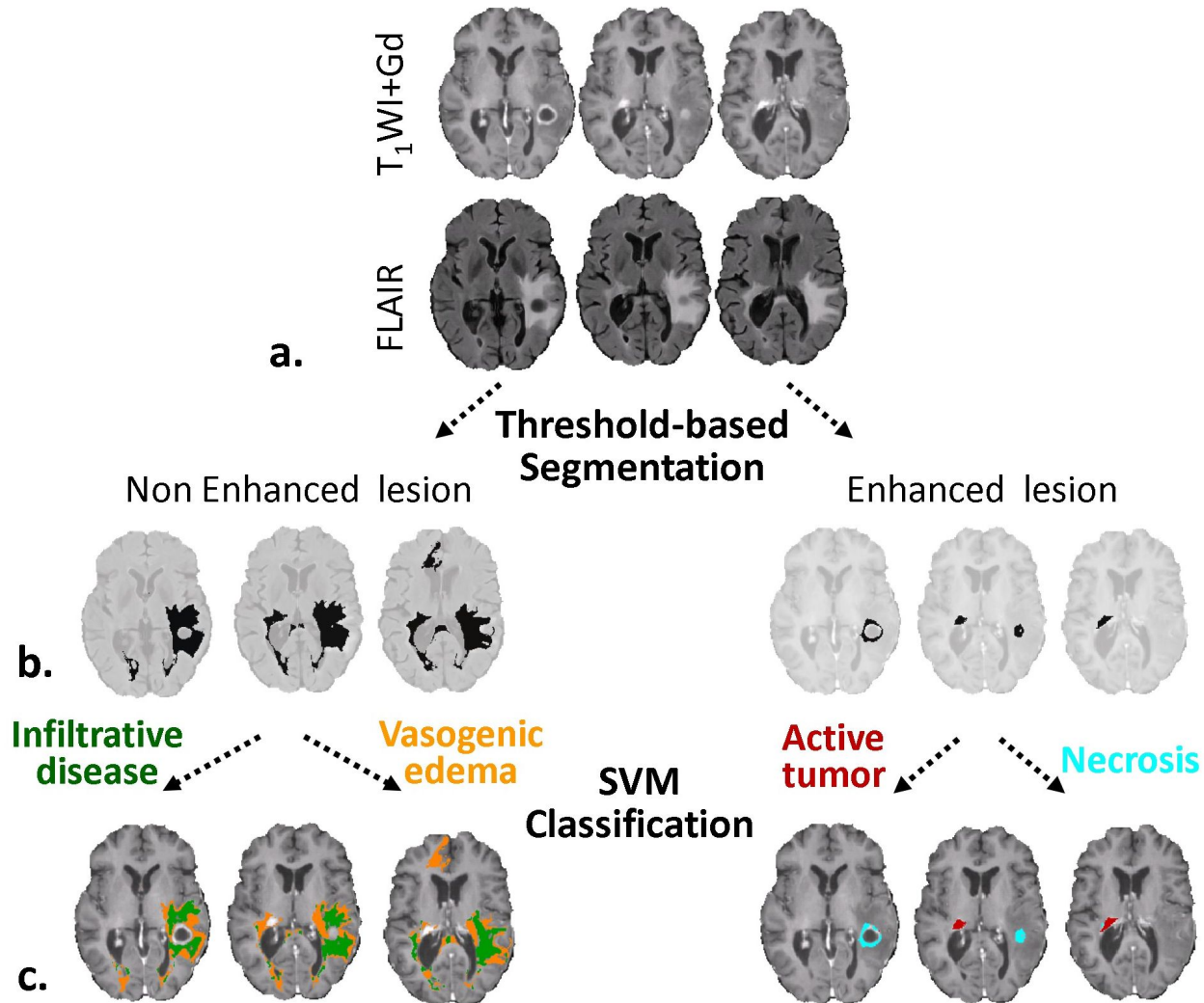


Supervised /
Unsupervised

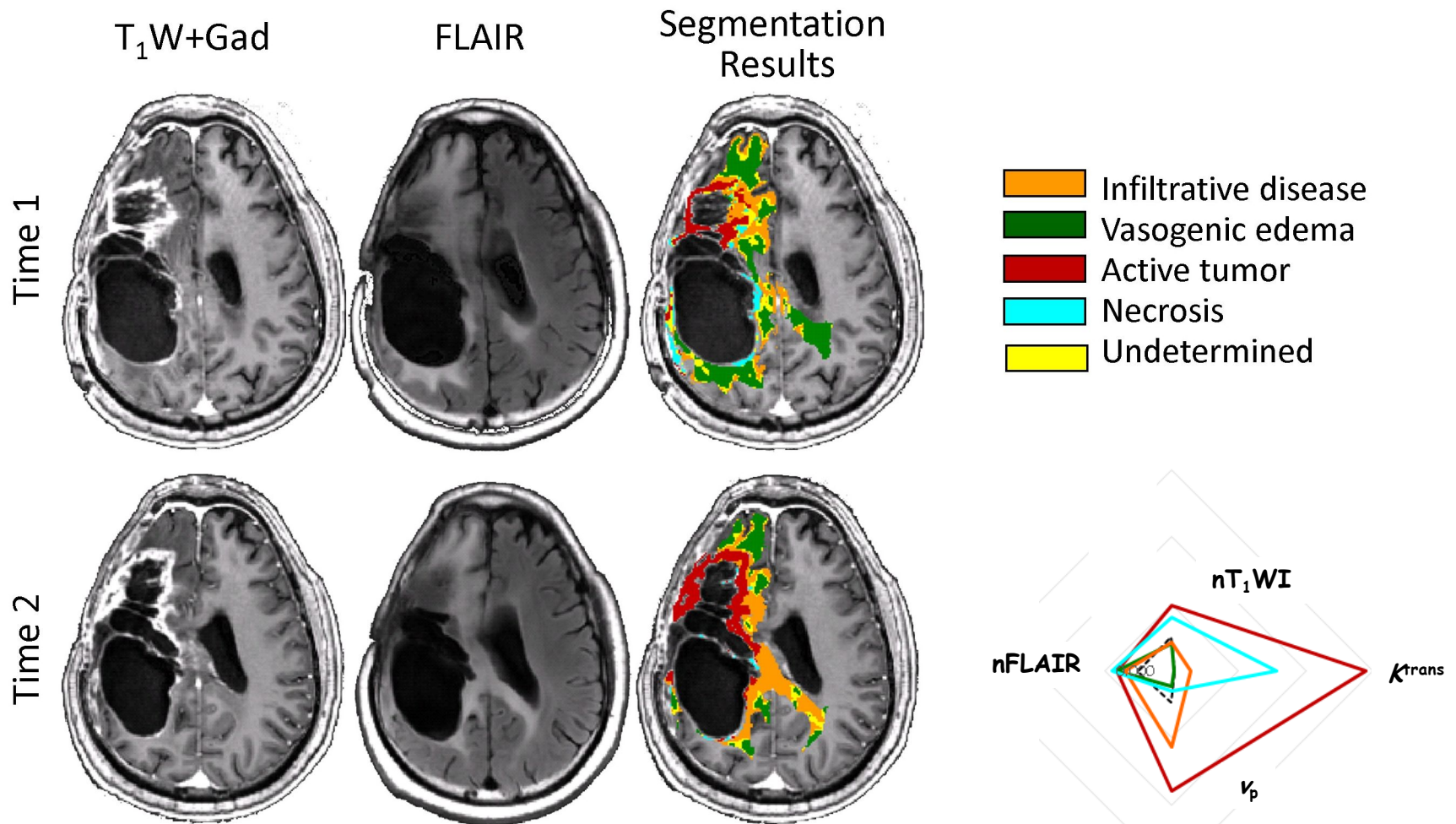
Single / Multi
Parameters

Subject /
Group level

Segmentation and classification



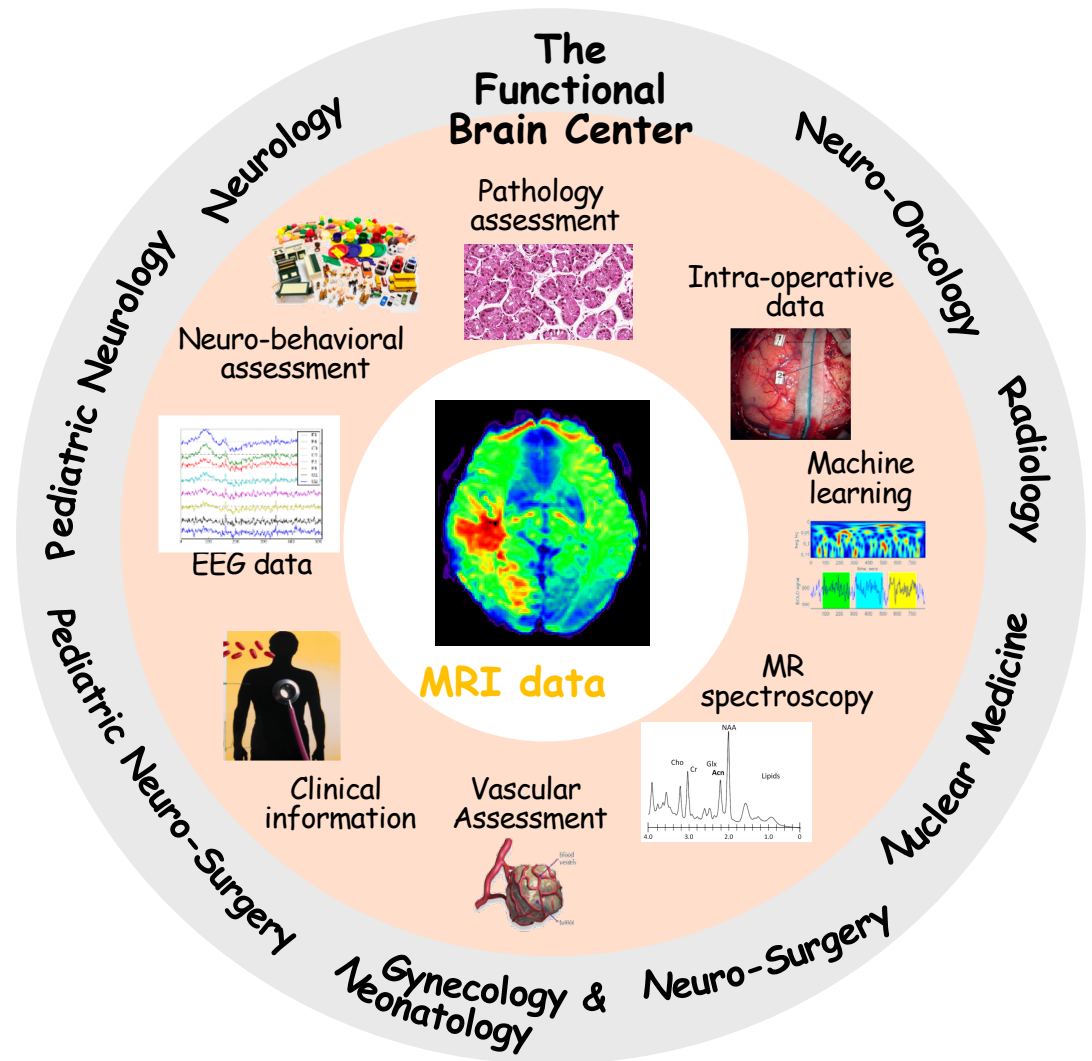
Segmentation and classification



Differentiation between treatment related changes
and progressive disease

Summary

MRI always within the context of clinical and imaging parameters



Summary

>> Various parameters -
microstructural properties of
the tissue

>> MRI –Multi parametric
(acquisition and analysis)

>> A gap between what
can be done and what is
actually used in clinical
setting



Summary

- >> A specific and tailored protocol
- >> A need for Computer Aided Diagnostic (CAD) tools
- >> Interdisciplinary - collaboration between physicians, physicists, computer science
- >> A shift toward quantitative MRI