



CANCER PREVENTION & RESEARCH INSTITUTE OF TEXAS

Innovations in Cancer Imaging



Presenter





Katy Keenan, PhD

Project Leader Quantitative Magnetic Resonance Imaging National Institute of Standards and Technology

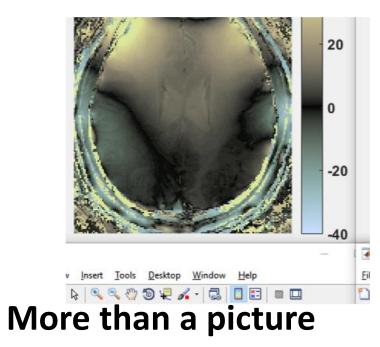
Innovations in Cancer Imaging

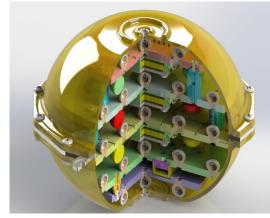
Kathryn Keenan, PhD Project Leader, Quantitative MRI





Innovations in Cancer Imaging





How to implement quantitative MRI?

Expanding the use of MRI

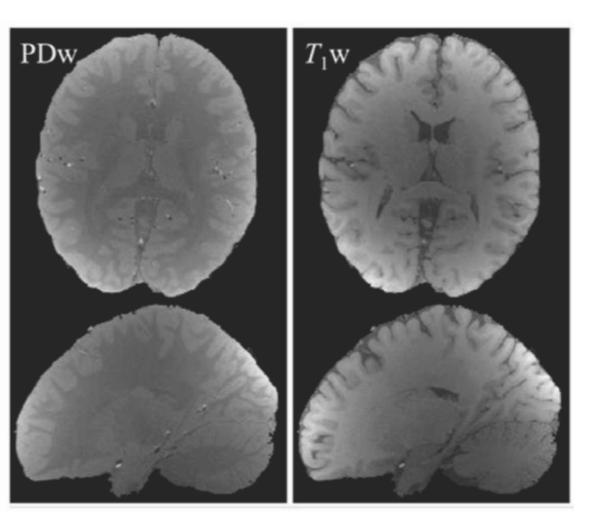
Innovations in Cancer Imaging Part 1: More than a picture

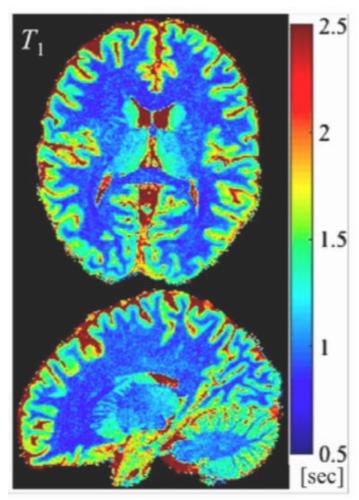
Kathryn Keenan, PhD Project Leader, Quantitative MRI





What is quantitative MRI?

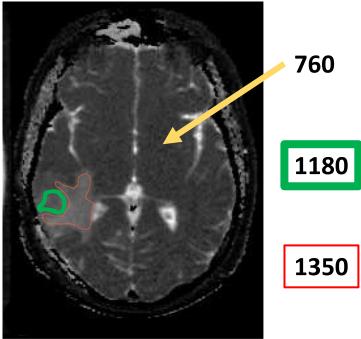




Lee et al, MRM 2019

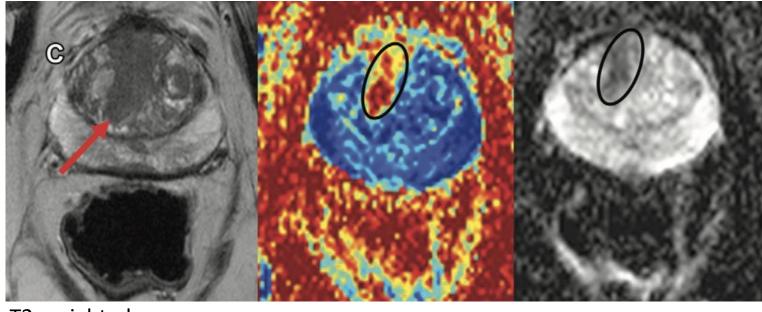
How are we using quantitative MRI?

Apparent Diffusion Coefficient (10⁻⁶ mm²/s)



Maier S et al, Diffusion Imaging of Brain Tumors NMR Biomed 2010

How are we using quantitative MRI?



T2-weighted

Fractional Intracellular volume (FIC) map

Apparent Diffusion Coefficient map

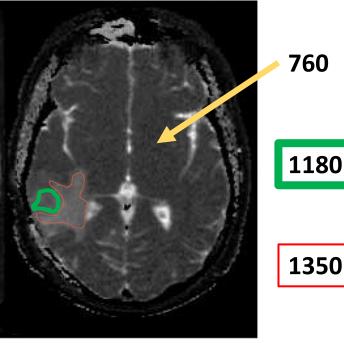
ORIGINAL RESEARCH • GENITOURIN

Radiology

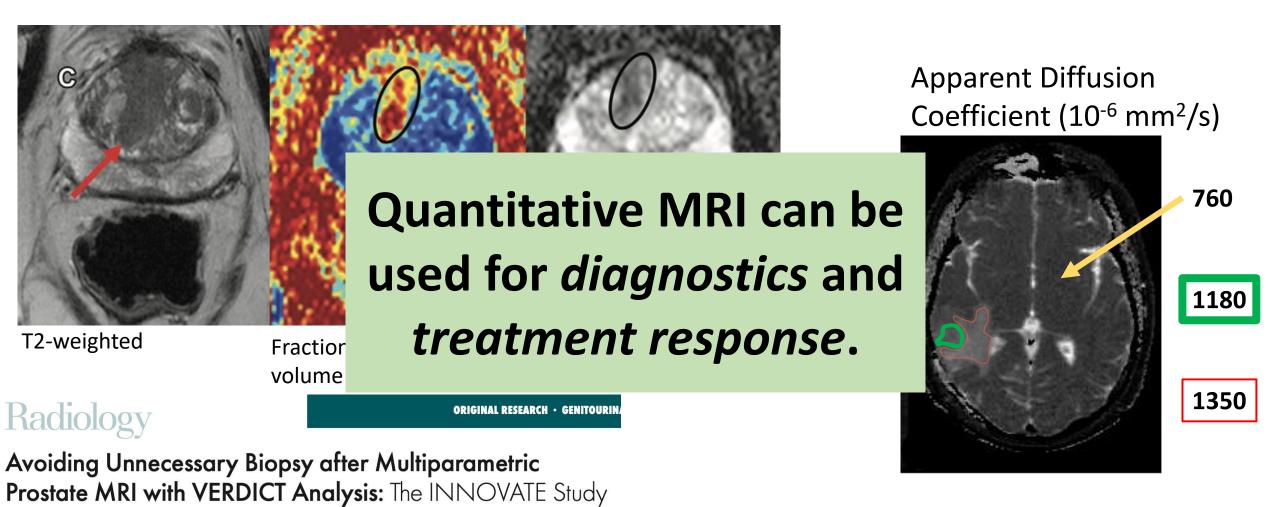
Avoiding Unnecessary Biopsy after Multiparametric Prostate MRI with VERDICT Analysis: The INNOVATE Study

Saurabh Singh, PhD, FRCR • Harriet Rogers, PhD • Baris Kanber, PhD • Joey Clemente, PhD • Hayley Pye, PhD • Edward W. Johnston, PhD, FRCR • Tom Parry, MSc • Alistair Grey, FRCS • Eoin Dinneen, MRCS • Greg Shaw, MD, FRCS • Susan Heavey, PhD • Urszula Stopka-Farooqui, MRes • Aiman Haider, FRCPath • Alex Freeman, FRCPath • Francesco Giganti, MD, PhD • David Atkinson, PhD • Caroline M. Moore, MD, FRCS • Hayley C. Whitaker, PhD • Daniel C. Alexander, PhD • Eleftheria Panagiotaki, PhD • Shonit Punwani, PhD, MRCP, FRCR

Maier S et al, Diffusion Imaging of Brain Tumors NMR Biomed 2010



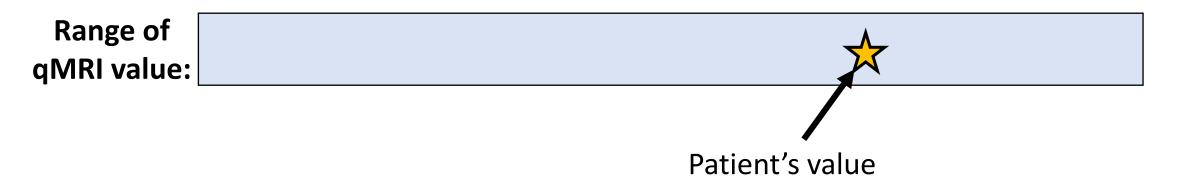
How are we using quantitative MRI?

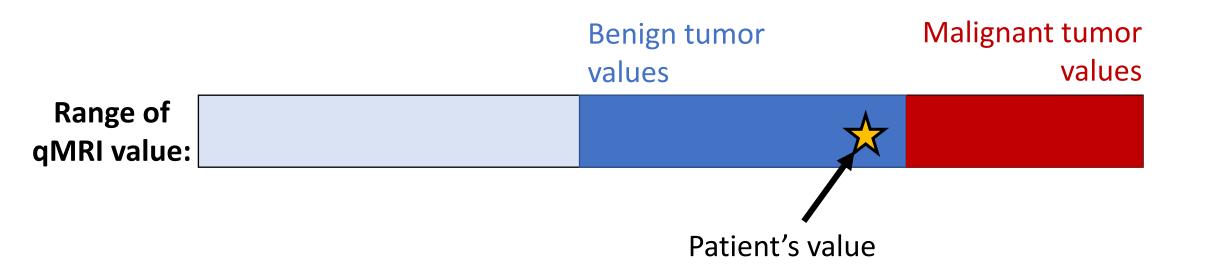


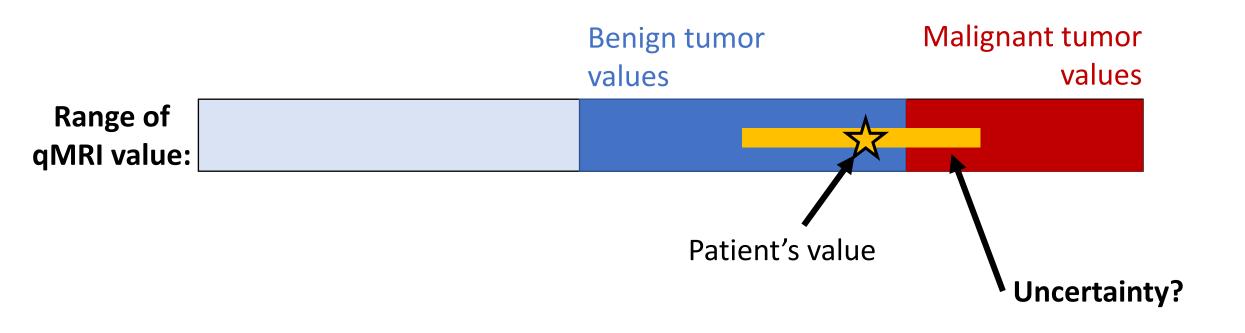
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Maier S et al, Diffusion Imaging of Brain Tumors NMR Biomed 2010

Range of
qMRI value:



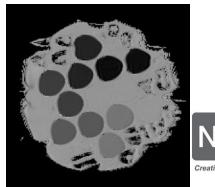




NIST's efforts in quantitative MRI

NIST's efforts in quantitative MRI



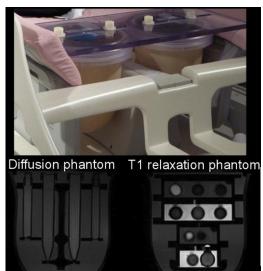


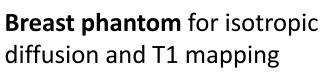
NATIONAL

CANCER INSTITUTE National Institute of Biomedical Imaging and Bioengineering Creating Biomedical Technologies to Improve Health

Isotropic diffusion phantom





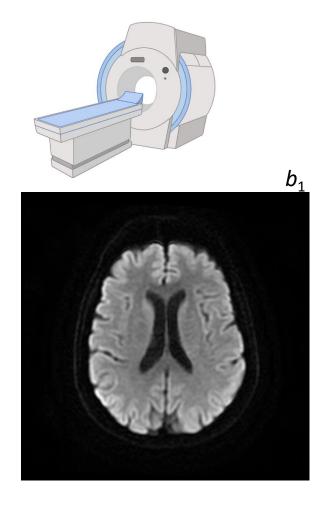


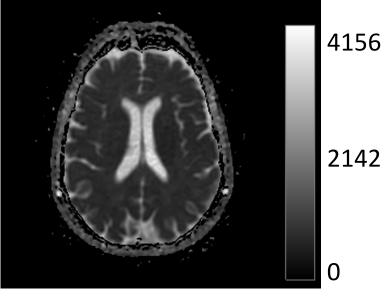


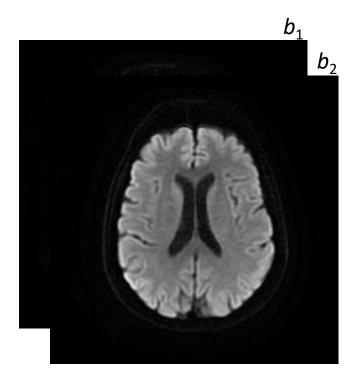
MRI System phantom

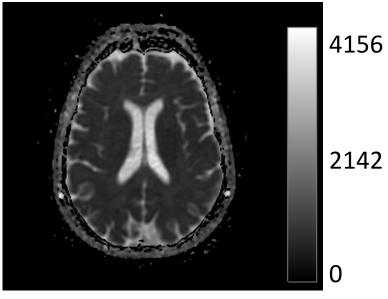


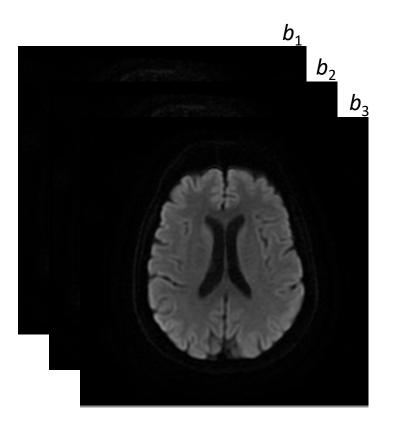


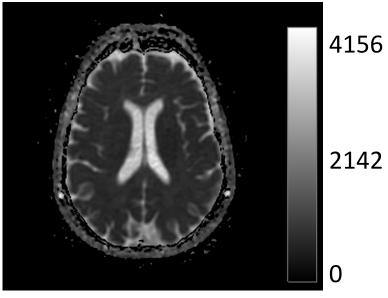


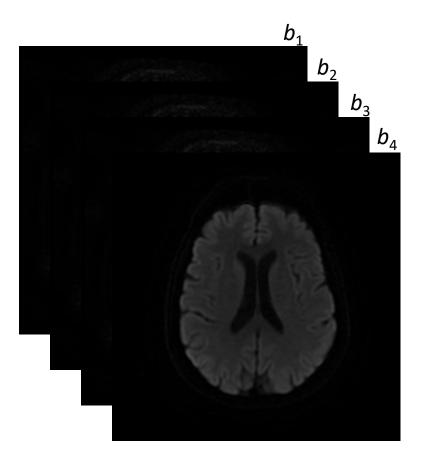


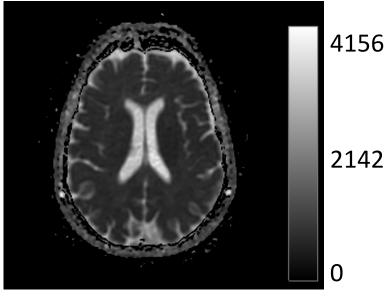


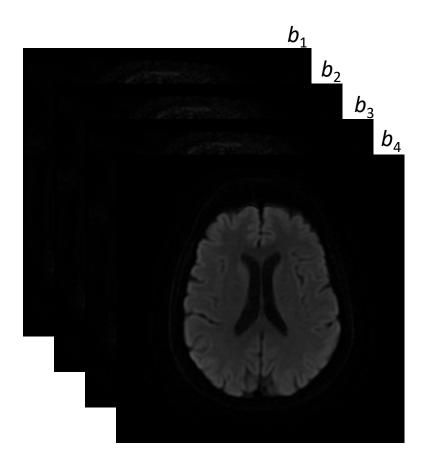




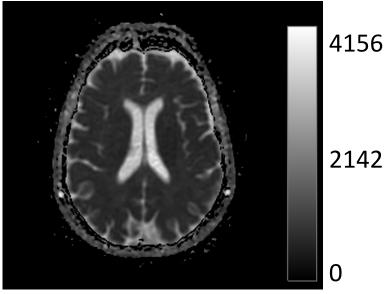


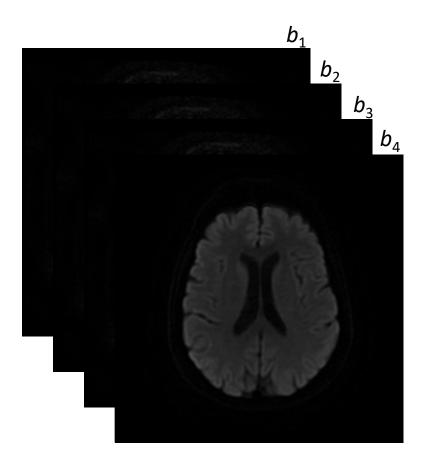




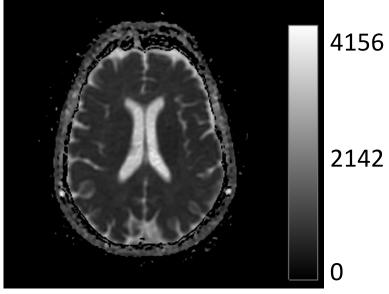


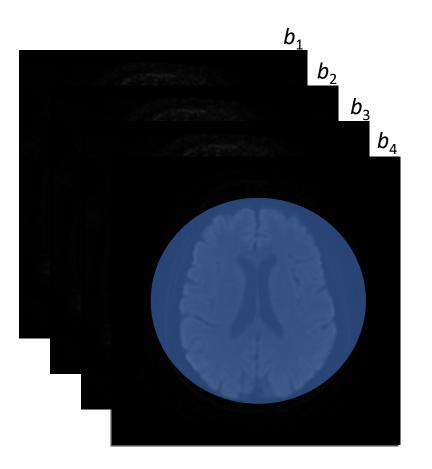
$$S = S_0 e^{-b * ADC}$$



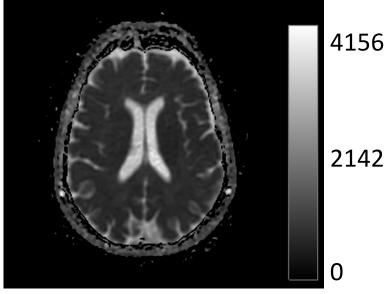


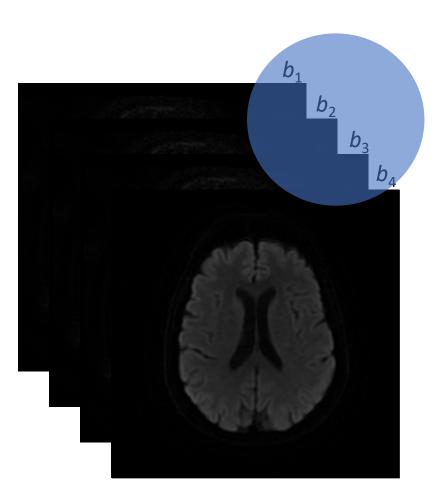
$$S = S_0 e^{-b * ADC}$$

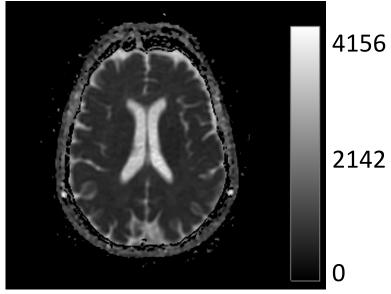




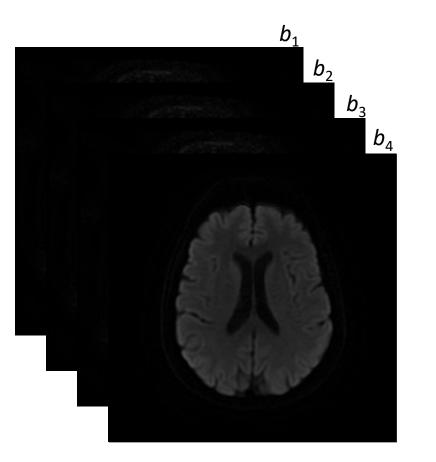
 $S = S_0 e^{-b * ADC}$







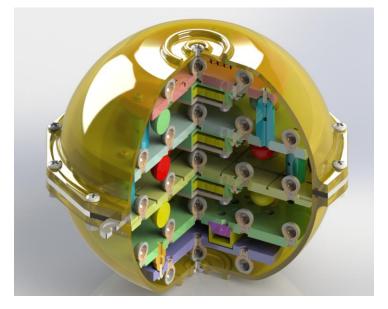
$$S = S_0 e^{-b*ADC}$$

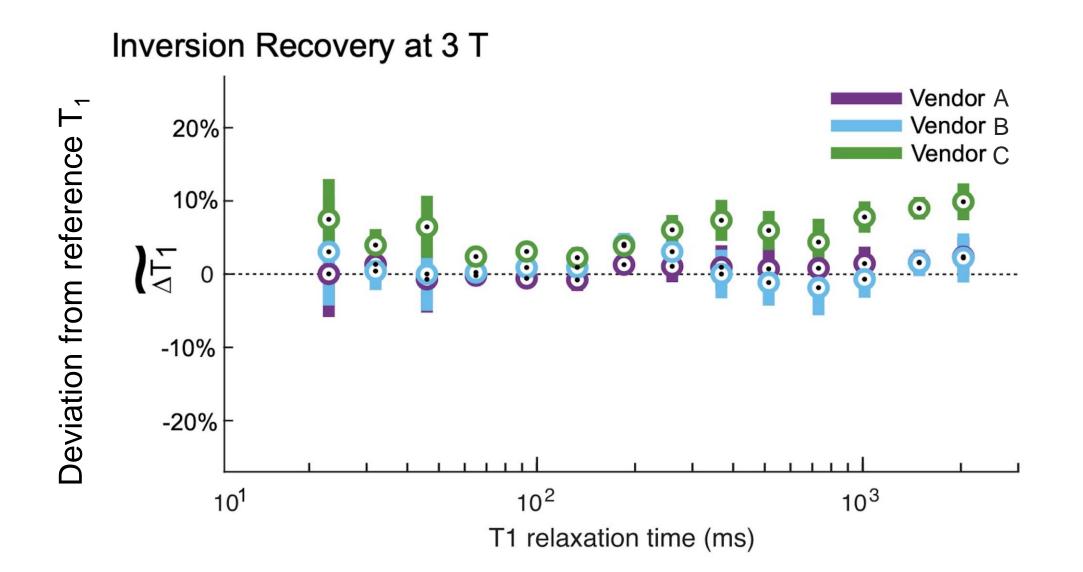


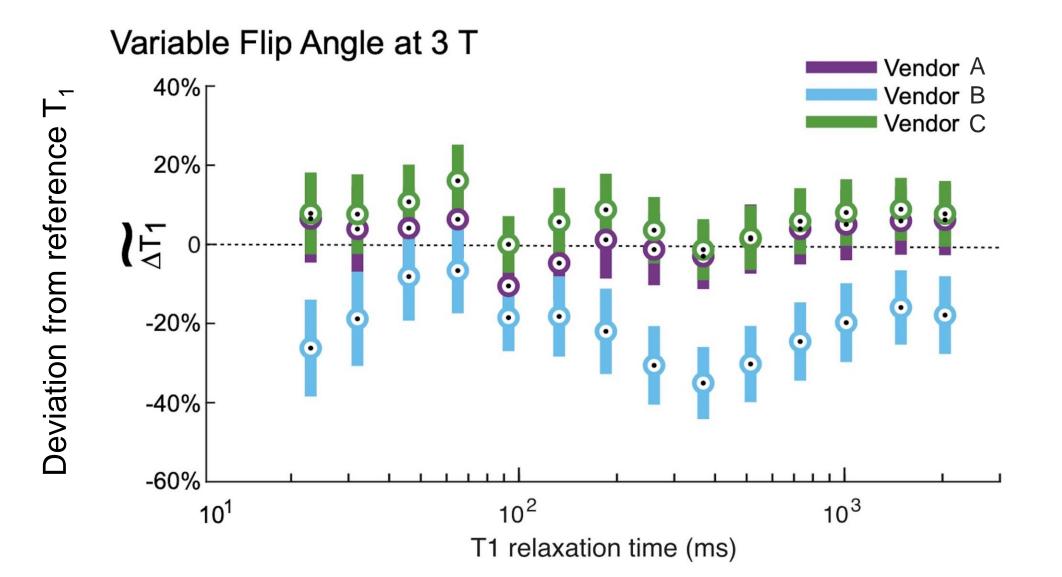
$$S = S_0 e^{-b*ADC}$$

Multi-site T1 variability









MRI system bias

Received: 9 March 2018 Revised: 28 May 2018 Accepted: 4 June 2018

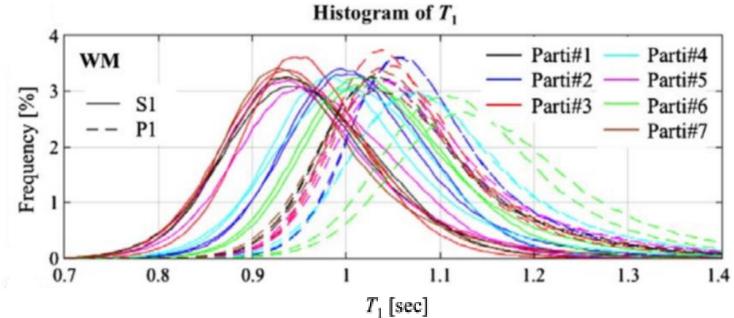
DOI: 10.1002/mrm.27421

FULL PAPER

Magnetic Resonance in Medicine

Establishing intra- and inter-vendor reproducibility of T_1 relaxation time measurements with 3T MRI

Yoojin Lee¹ | Martina F. Callaghan² | Julio Acosta-Cabronero² | Antoine Lutti³ | Zoltan Nagy¹



MRI system bias

Received: 9 March 2018 Revised: 28 May 2018 Accepted: 4 June 2018

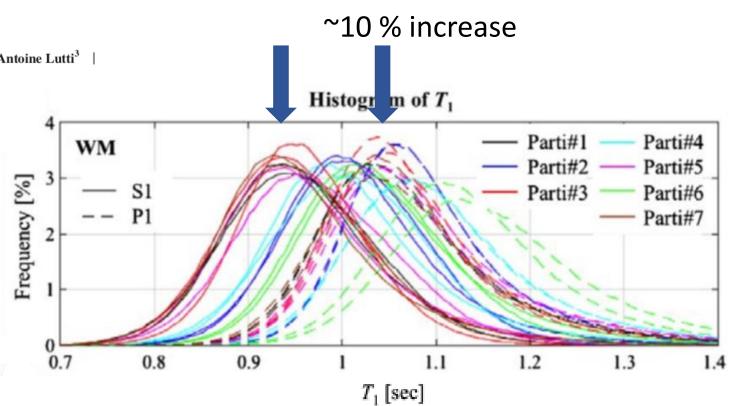
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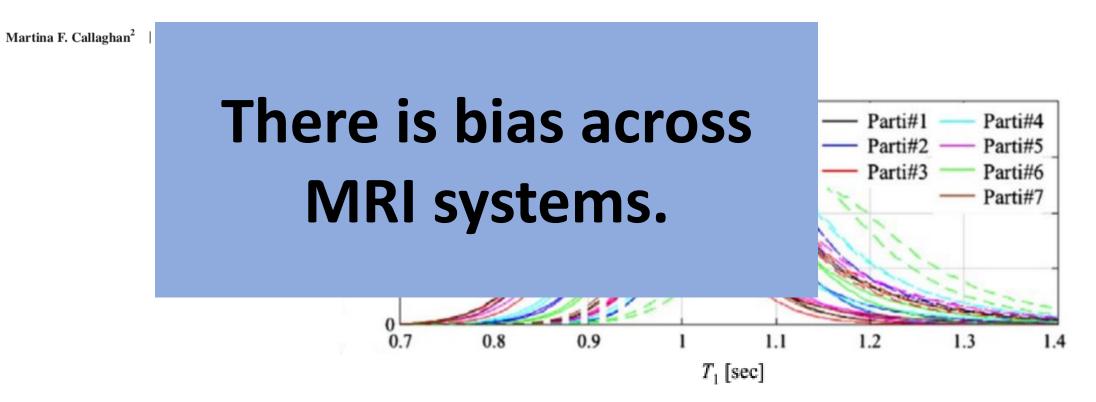
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FULL PAPER

Yoojin Lee¹ | Zoltan Nagy¹ Magnetic Resonance in Medicine

Establishing intra- and inter-vendor reproducibility of T_1 relaxation time measurements with 3T MRI



MRI system upgrades

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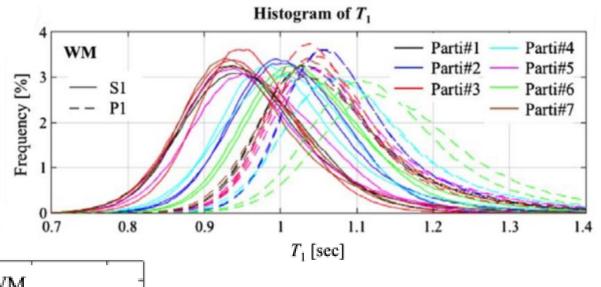
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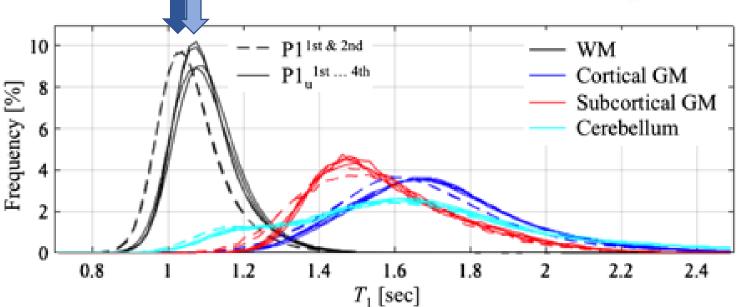
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Histogram of T_1 **Magnetic Resonance in Medicine** FULL PAPER Parti#1 Parti#4 WM Establishing intra- and inter-vendor reproducibility of T₁ Parti#2 Parti#5 [%] S1 Parti#3 Parti#6 relaxation time measurements with 3T MRI DI Parti#7 Martina F. Callaghan² | Julio Yoojin Lee¹ Zoltan Nagy¹ **MRI systems change** 1.2 1.3 10 over time. Frequency [%] 8 6 2 0 2.4 0.81.2 1.4 1.6 1.8 2 2.2 T_1 [sec]

1.4

What can you do?



Data acquisition
> Pulse sequences
> Hardware
> Software

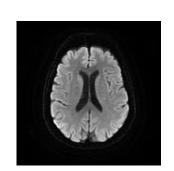
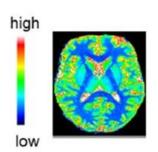


Image Reconstruction

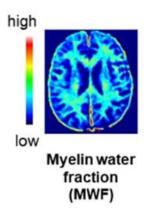
> Software
> Can be tied to
quantitative model
> Data storage



T1 relaxometry (qT1)

Quantitative Modeling

> Model selection> Software



Using the information

- > Clinical work
- > Biophysical model
- > Software

What can you do?



Data acquisition
> Pulse sequences
> Hardware
> Software

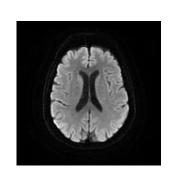
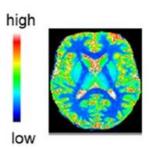


Image Reconstruction

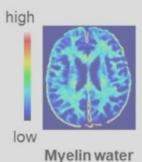
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Myelin wate fraction (MWF)

Using the information

- > Clinical work
- > Biophysical model
- > Software

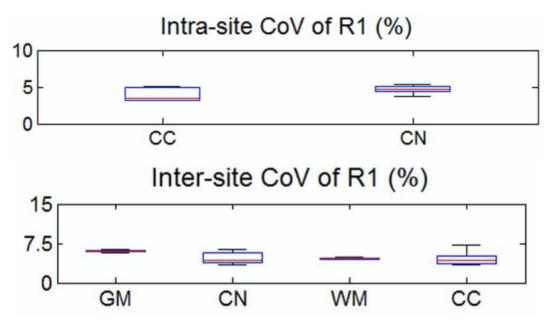
Controlling the acquisition

frontiers in **NEUROSCIENCE**



Quantitative multi-parameter mapping of R1, PD*, MT, and R2* at 3T: a multi-center validation

Nikolaus Weiskopf¹*, John Suckling^{2,3,4}, Guy Williams^{3,5}, Marta M. Correia⁶, Becky Inkster², Roger Tait³, Cinly Ooi^{2,3}, Edward T. Bullmore^{2,3,4,7} and Antoine Lutti^{1,8}



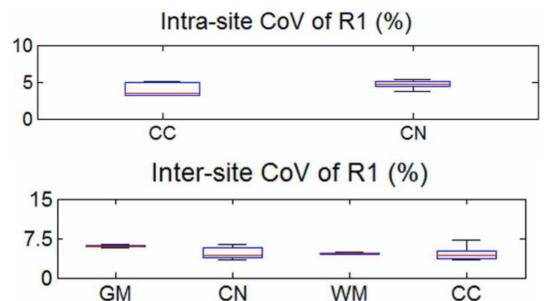
Controlling the acquisition

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ORIGINAL RESEARCH ARTICLE published: 10 June 2013 doi: 10.3389/fnins.2013.00095

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NeuroImage Volume 207, 15 February 2020, 116364



How stable is quantitative MRI? – Assessment of intra- and inter-scanner-model reproducibility using identical acquisition sequences and data analysis programs

René-Maxime Gracien ^{a, c} 各 四, Michelle Maiworm ^{a, b, c}, Nadine Brüche ^c, Manoj Shrestha ^c, Ulrike Nöth ^c, Elke Hattingen ^b, Marlies Wagner ^b, Ralf Deichmann ^c

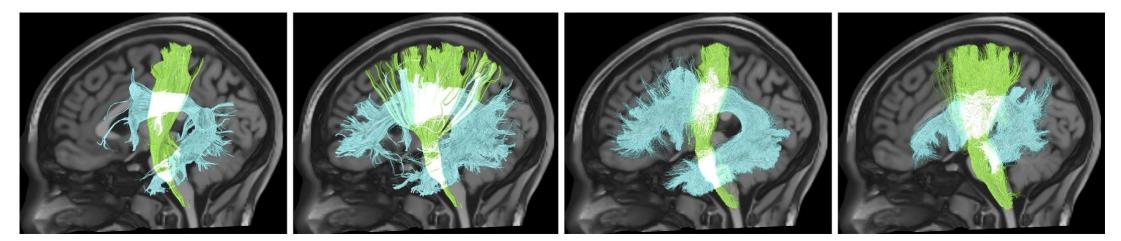
 Provided that identical acquisition sequences are used, discrepancies between qMRI data acquired with different scanner models are low.

Controlling the acquisition *isn't the whole solution*



Tractography dissection variability: What happens when 42 groups dissect 14 white matter bundles on the same dataset?

Kurt G. Schilling^{a,*}, François Rheault^b, Laurent Petit^c, Colin B. Hansen^d, Vishwesh Nath^d, Fang-Cheng Yeh^e, Gabriel Girard^f, Muhamed Barakovic^g, Jonathan Rafael-Patino^h, Thomas Yu^h, Elda Fischi-Gomez^h, Marco Pizzolatoⁱ, Mario Ocampo-Pineda^j, Simona Schiavi^j, Erick J. Canales-Rodríguez^h, Alessandro Daducci^j, Cristina Granziera^g, Giorgio Innocenti^k, Jean-Philippe Thiran^h, Laura Mancini¹, Stephen Wastling¹, Sirio Cocozza^m, Maria Petraccaⁿ, Ciuceppe Pontillo^m Matteo Mancini⁹, Sicerd B. Voc^p, Veiav N. Vakharia^g, John S. Duncan^f



Controlling the acquisition *isn't the whole solution*

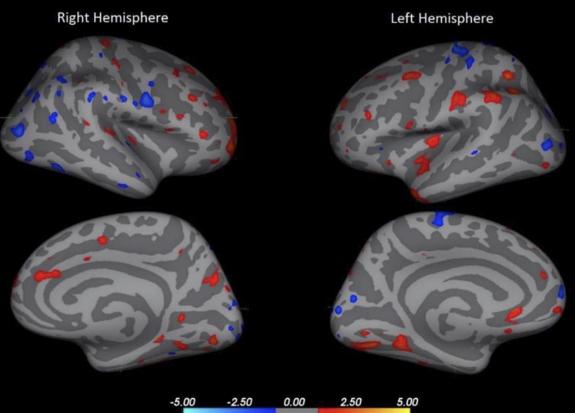
Brain Imaging and Behavior (2020) 14:1318–1327 https://doi.org/10.1007/s11682-018-9994-x

ORIGINAL RESEARCH



FreeSurfer 5.3 versus 6.0: are volumes comparable? A Chronic Effects of Neurotrauma Consortium study

Erin D. Bigler¹ · Marc Skiles¹ · Benjamin S. C. Wade^{2,3,4} · Tracy J. Abildskov¹ · Nick J. Tustis Mary R. Newsome⁶ · Andrew R. Mayer⁷ · James R. Stone⁵ · Brian A. Taylor⁸ · David F. Tate⁻ Harvey S. Levin⁶ · Elisabeth A. Wilde^{6,9}



What can you do?



Data acquisition
> Pulse sequences
> Hardware
> Software

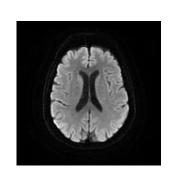
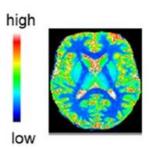


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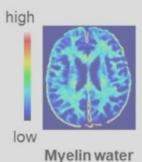
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T1 relaxometry (qT1)

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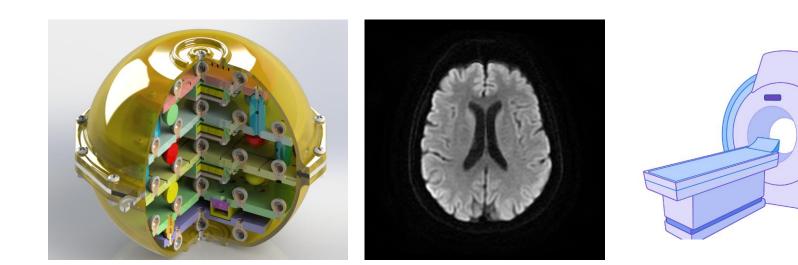
Myelin wate fraction (MWF)

Using the information

- > Clinical work
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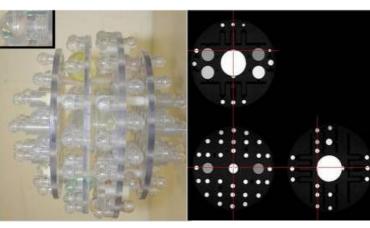
Use a phantom and a repeatable pipeline.



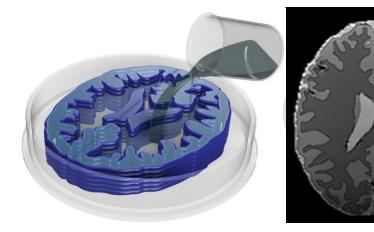


Use phantoms!





ADNI phantom Gunter JL et al., Med Phys 2009



3D Printed, Agarose-filled phantom K. Gopalan, J. I. Tamir, A. Arias, M. Lustig, MRM 2021

phantoms.martinos.org

Isotropic diffusion phantom



Proton Density Fat Fraction & R2* phantom Hernando D et al., MRM 2016

How can we use a phantom?

- Select a phantom for your application
- Test the pipeline that you plan to use for participants
- Site qualification for image acquisition
- Adds logistical complexity
- Doesn't always represent in vivo imaging





Medical Phantom Lending Library

https://www.nist.gov/programs-projects/ nistnibib-medical-imaging-phantom-lending-library

How the PLL works:

NIBIB

- Easy to use: go to web site, check availability calendar, submit request for review by NIST.
- 2-to-6-week loans recommended

National Institute of

Biomedical Imaging

and Bioengineering

- Sharing data to common database encouraged
- Currently only ship within North America

PROJECTS/PROGRAMS

NIST/NIBIB Medical Imaging Phantom Lending Library

Summary

As part of the MRI Biomarker Measurement Service, traceable magnetic resonance imaging (MRI) phantoms are available for loan at a minimal cost, plus shipping. Two copies each of the MRI system phantom developed by NIST and the International Society of Magnetic Resonance in Medicine (ISMRM) and the MRI diffusion phantom developed by NIST. the Radiological Society of North America (RSNA), and the National Institutes of Health (NIH) are available for check out. Contact MRIStandards@nist.gov= to schedule a loan. A two-week loan at each

site is suggested and during the initial startup there will be no charge for the loan. Analysis code, sample images, calibration data, and references can be found at https://github.com/MRIStandards/PhantomViewerd Additional phantoms will be added to the lending library as requested by customers, please email MRIStandards@nist.govm to submit requests for additional phantoms.

View Phantom Availability Calendard

Search NIST

CRGANIZATIONS

Physical Measurement Laboratory **Applied Physics Division Magnetic Imaging Group**

⊟ Menu

NIST STAFF

Stephen E. Russek Kathryn Keenan Karl Stupic

CONTACT

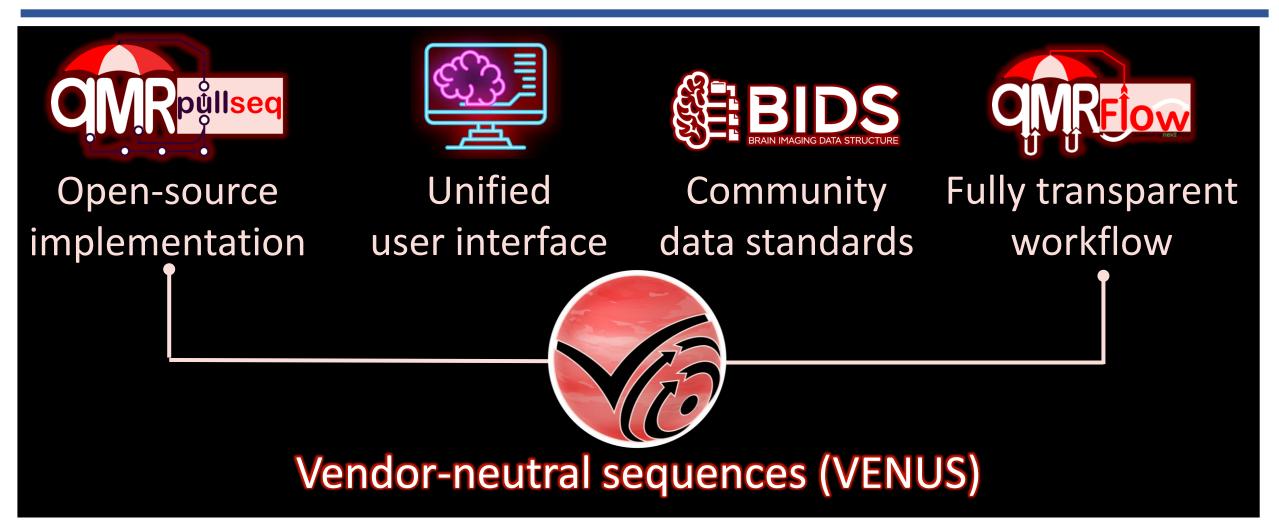
Contact: stephen.russek@nist.gov





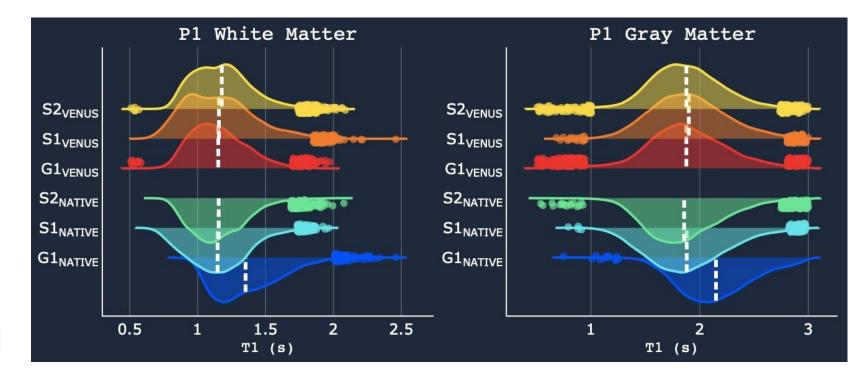
Control the entire pipeline

Control the entire pipeline



Karakuzu et al. <u>https://zenodo.org/record/6860878</u> VENUS: <u>https://onlinelibrary.wiley.com/doi/abs/10.1002/mrm.29292</u> qMRI-BIDS: <u>https://www.nature.com/articles/s41597-022-01571-4</u> qMRLab: <u>https://joss.theoj.org/papers/10.21105/joss.02343</u>

Control the entire pipeline

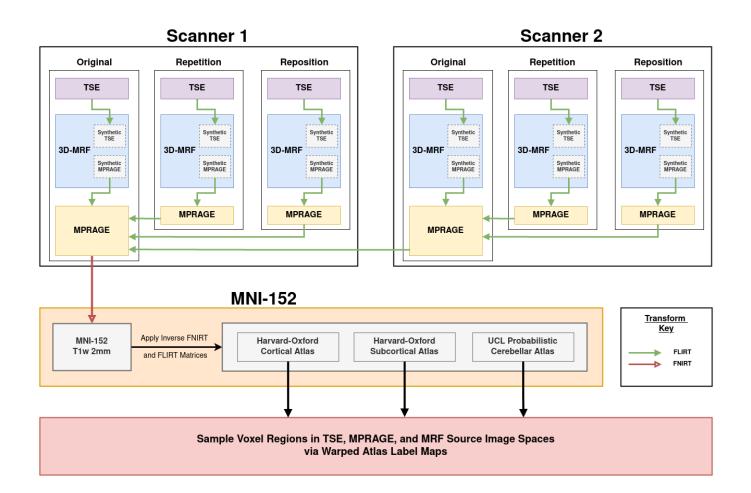




Vendor-neutral sequences (VENUS)

Karakuzu et al. <u>https://zenodo.org/record/6860878</u> VENUS: <u>https://onlinelibrary.wiley.com/doi/abs/10.1002/mrm.29292</u> qMRI-BIDS: <u>https://www.nature.com/articles/s41597-022-01571-4</u> qMRLab: <u>https://joss.theoj.org/papers/10.21105/joss.02343</u>

- Acquire TSE, MPRAGE, and MRF data for various scenarios on two scanners
- Linearly register scanners to each other via "original" MPRAGE images
- Nonlinearly register all images to MNI-152-2mm via scanner 1 "original" MPRAGE images



MRF is reproducible whether a scan is repeated:

- immediately
- after reposition on the same scanner
- repeated on a different scanner or day

Weighted Mean/StdDev by Region Size

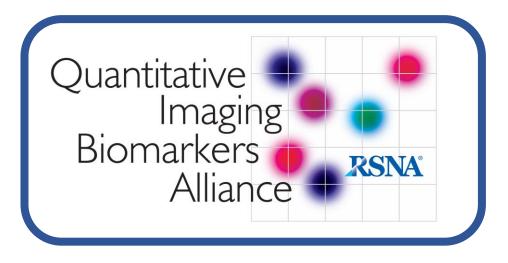
$mean \pm std dev$	Intrascanner		Interscanner
$(bias \pm agreement)$	Same-Session	Cross-Session	Cross-Session
T1 (%)	0.22 ± 2.83	-0.07 ± 2.22	-1.01 ± 2.62
T2 (%)	$1.06 \pm \textbf{4.38}$	$1.41 \pm \textbf{4.04}$	-3.51 ± 4.22
MPRAGE $(\%)$	-1.26 ± 6.00	-3.64 ± 6.38	-2.25 ± 7.91
TSE (%)	$-0.40 \pm \textbf{5.59}$	-1.70 ± 5.89	-0.39 ± 7.90

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Weighted Mean/StdDev by Region Size

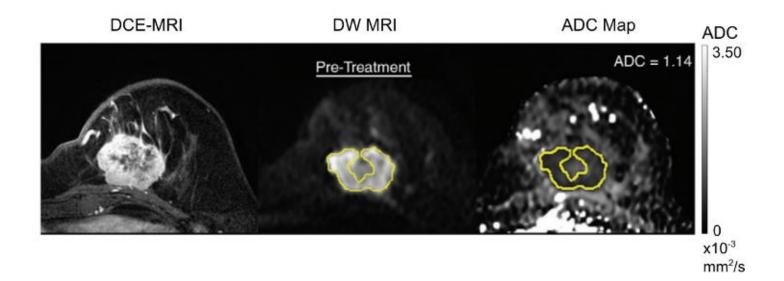
$mean \pm std dev$	Intrascanner		Interscanner
(bias \pm agreement)	Same-Session	Cross-Session	Cross-Session
T1 (%)	0.22 ± 2.83	-0.07 ± 2.22	-1.01 ± 2.62
T2 (%)	1.06 ± 4.38	$1.41 \pm \textbf{4.04}$	$-3.51\pm \textbf{4.22}$
MPRAGE $(\%)$	-1.26 ± 6.00	-3.64 ± 6.38	-2.25 ± 7.91
TSE (%)	-0.40 ± 5.59	-1.70 ± 5.89	-0.39 ± 7.90



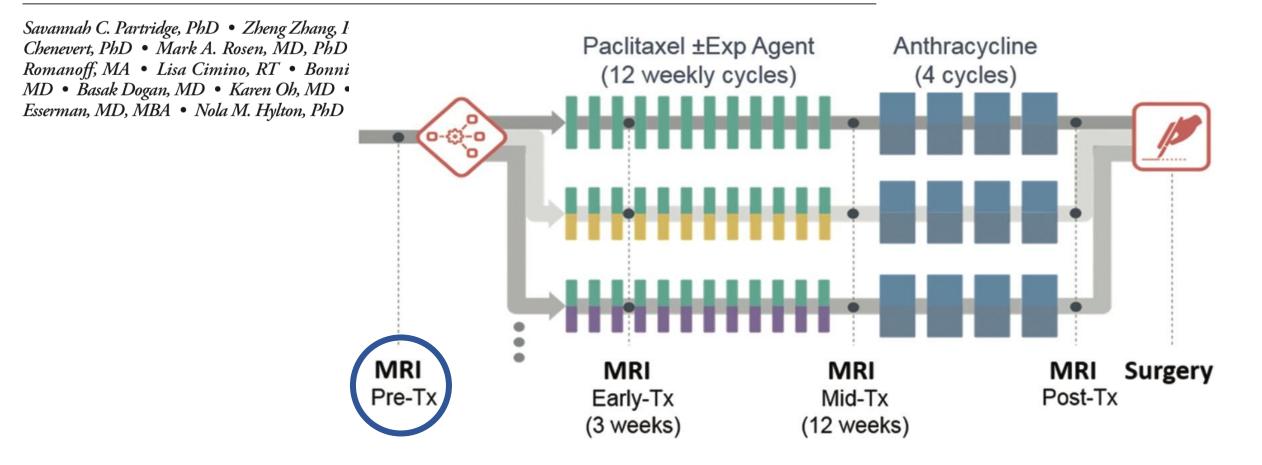
Andrew Dupuis, Yong Chen, Michael Hansen, Kelvin Chow, Dan Ma, Mark Griswold, Rasim Boyacioglu. Abstract 2182. ISMRM 2023

Diffusion-weighted MRI Findings Predict Pathologic Response in Neoadjuvant Treatment of Breast Cancer: The ACRIN 6698 Multicenter Trial

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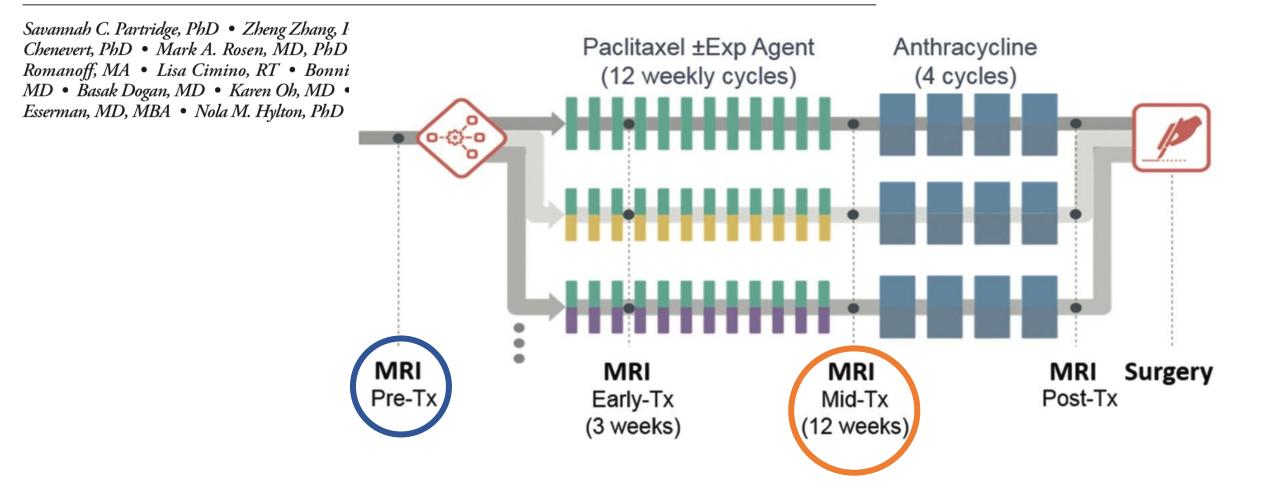
ADC response were evident during treatment (Fig 4a). Δ ADC was not predictive of pCR at early treatment/3 weeks (AUC = 0.53; 95% CI: 0.45, 0.61; *P* = .48). By midtreatment/12 weeks, mean Δ ADC was greater in patients with pCR than in patients without pCR (50% ± 49 and 36% ± 44, respectively) and was predictive of pCR, with AUC = 0.60 (95% CI: 0.52, 0.68; *P* = .017). Δ ADC at posttreatment was similarly predictive, with AUC = 0.61 (95% CI: 0.52, 0.69, *P* = .013) (Table 2), although neither Δ ADC at midtreatment nor Δ ADC at posttreatment was significant after multiple-comparison adjustment.

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Diffusion-weighted MRI Findings Predict Pathologic Response in Neoadjuvant Treatment of Breast Cancer: The ACRIN 6698 Multicenter Trial



Is this actually happening?

Is this actually happening?

YES

Is this actually happening?

YES

Clinical Research Organizations (CROs)

YES

Clinical Research Organizations (CROs)

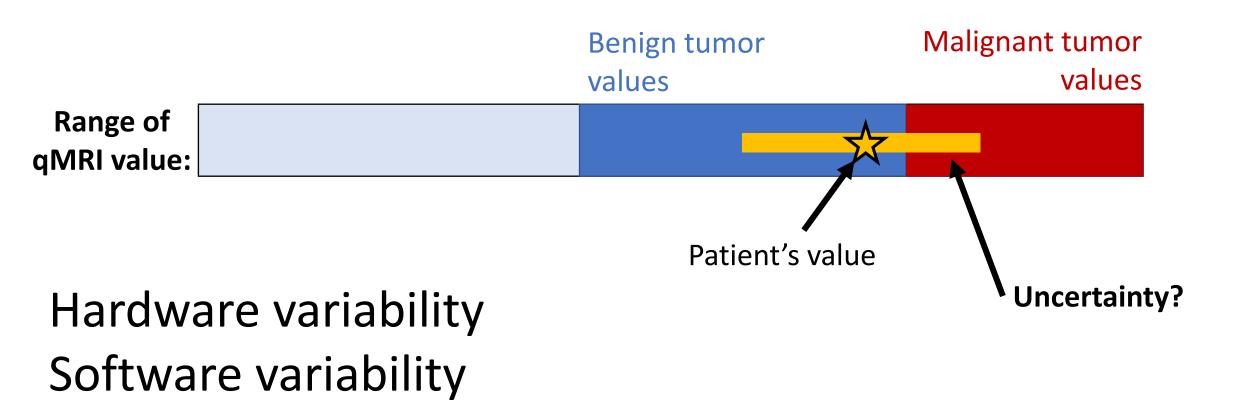
Eur Radiol (2017) 27:3662-3668 DOI 10.1007/s00330-017-4736-9

MUSCULOSKELETAL

Repeatability and response to therapy of dynamic contrast-enhanced magnetic resonance imaging biomarkers in rheumatoid arthritis in a large multicentre trial setting

John C. Waterton^{1,2} · Meilien Ho³ · Lars H. Nordenmark⁴ · Martin Jenkins⁵ · Julie DiCarlo⁶ · Gwenael Guillard⁷ · Caleb Roberts⁸ · Giovanni Buonaccorsi⁸ · Geoffrey J. M. Parker^{1,8} · Michael A. Bowes⁷ · Charles Peterfy⁶ · Herbert Kellner⁹ · Peter C. Taylor¹⁰ MRI biomarkers [13] pose different challenges to soluble biomarkers. Biomarker quality and validity depends on operation of an MRI device not primarily designed for quantitative work, perhaps in a manner unfamiliar to users in trial sites. Encouraging measures of repeatability and response to therapy in small studies in single expert centres may not translate to realworld multicentre trials. It is therefore necessary to evaluate [14] these biomarkers specifically in the multicentre setting.

Possibilities of diagnostic quantitative MRI



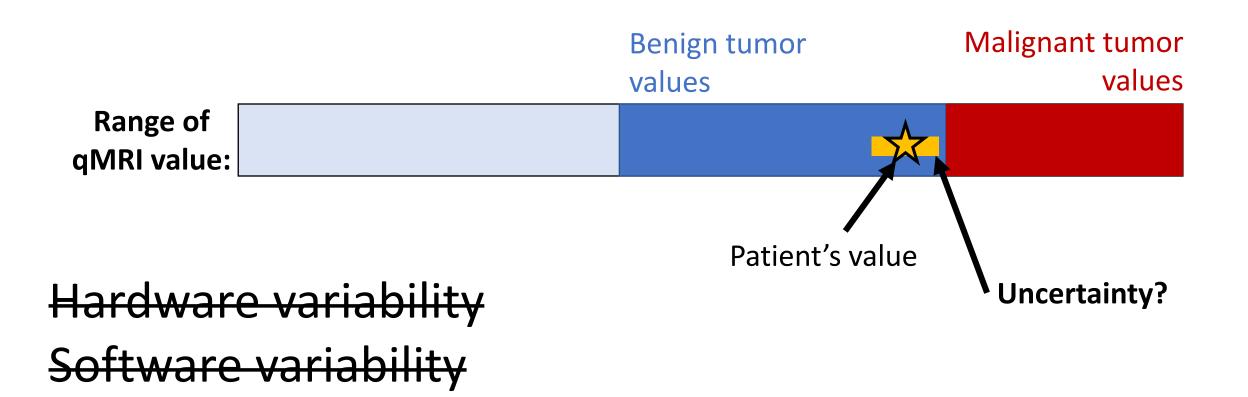
There is bias across MRI systems.

Use a phantom and a controlled pipeline.

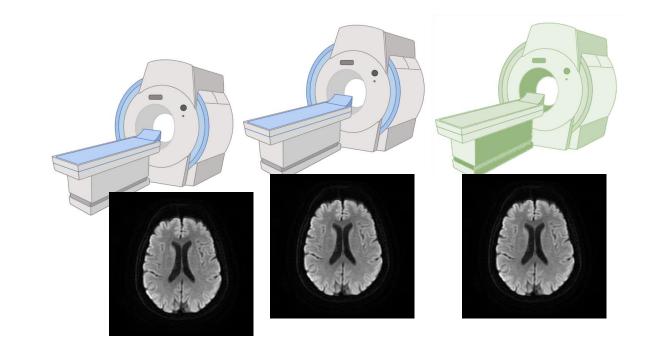
We can use repeatable & reproducible methods.

We can do regular QA on our MRI systems.

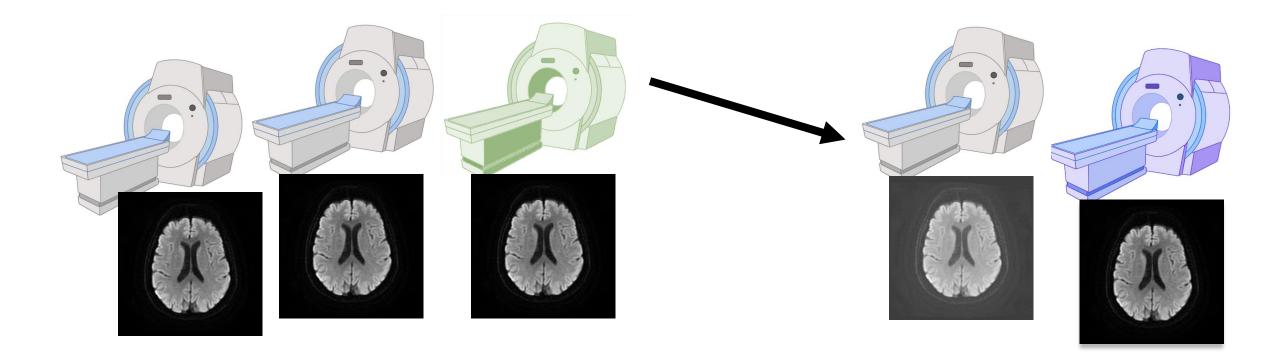
MRI systems change over time.



Implementing *clinical* quantitative MRI



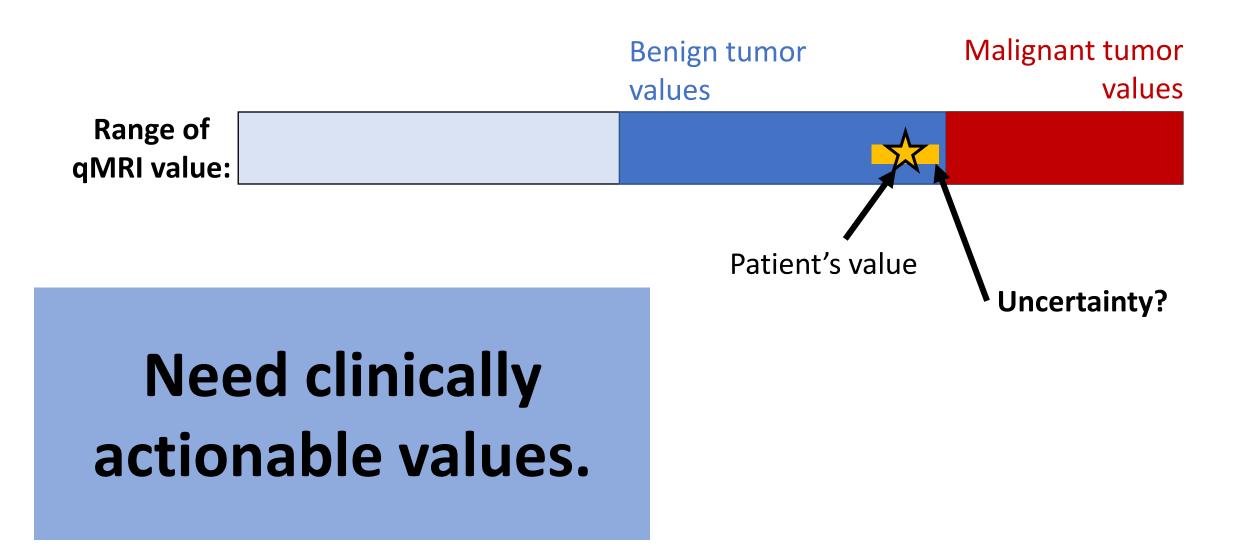
Implementing *clinical* quantitative MRI



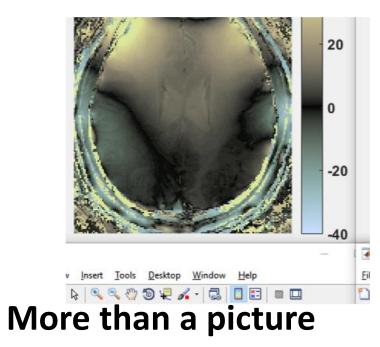
Implementing *clinical* quantitative MRI

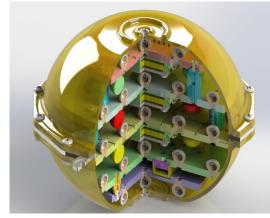


Moving quantitative MRI to the clinic



Innovations in Cancer Imaging





How to implement quantitative MRI?

Expanding the use of MRI

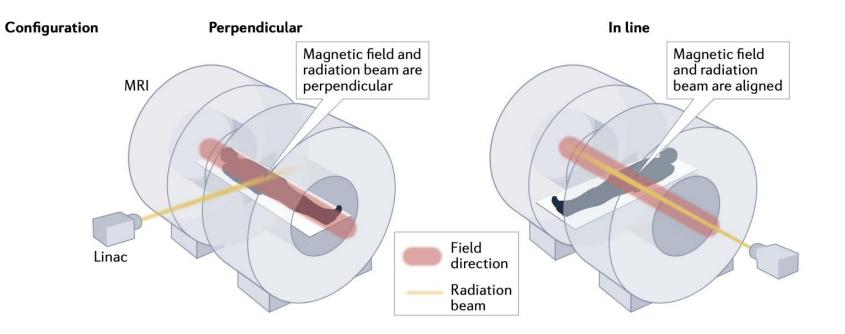
Innovations in Cancer Imaging Part 2: Expanding the use of MRI

Kathryn Keenan, PhD Project Leader, Quantitative MRI





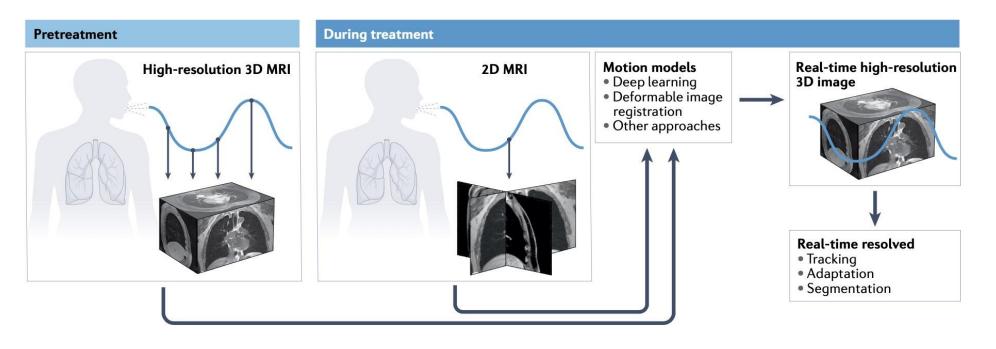
MRI-guided radiotherapy



Integrated MRI-guided radiotherapy — opportunities and challenges

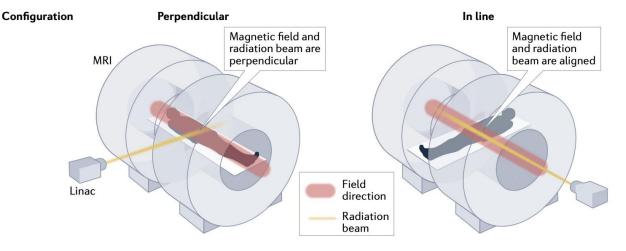
Paul J. Keall[™], Caterina Brighi¹, Carri Glide-Hurst², Gary Liney³, Paul Z. Y. Liu¹, Suzanne Lydiard¹, Chiara Paganelli⁴, Trang Pham[™], Shanshan Shan¹, Alison C. Tree[™], Uulke A. van der Heide⁷, David E. J. Waddington[™] and Brendan Whelan¹

MRI-guided radiotherapy



Integrated MRI-guided radiotherapy — opportunities and challenges

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Increasing Accessibility of MRI



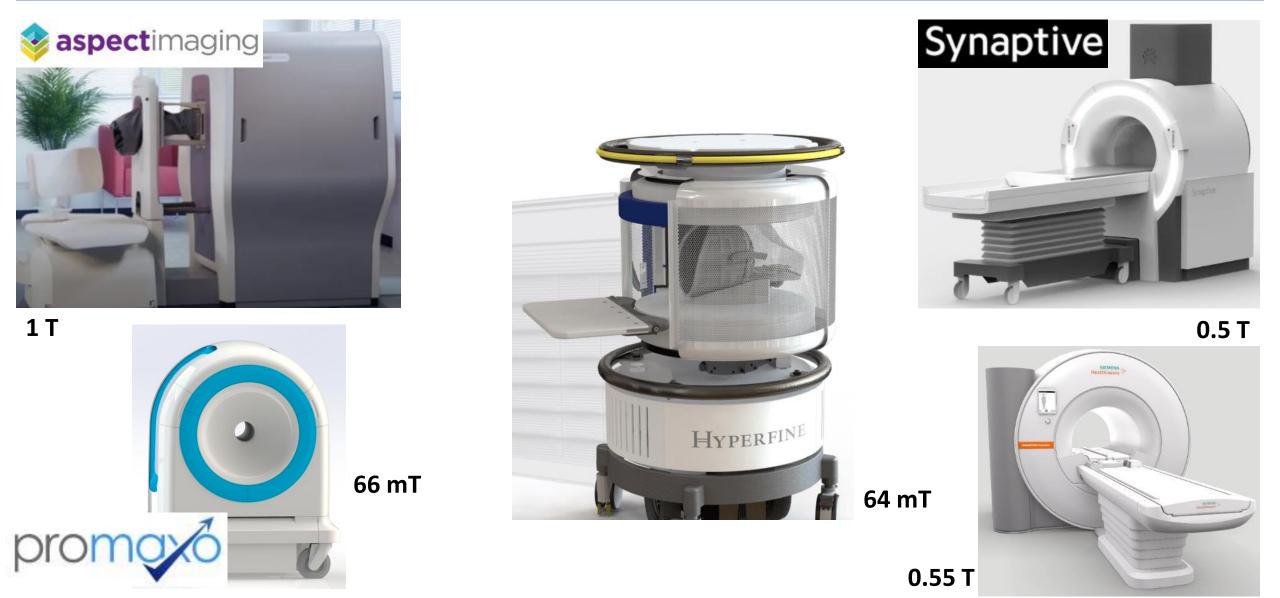
Increasing Accessibility of MRI





64 mT

Increasing Accessibility of MRI



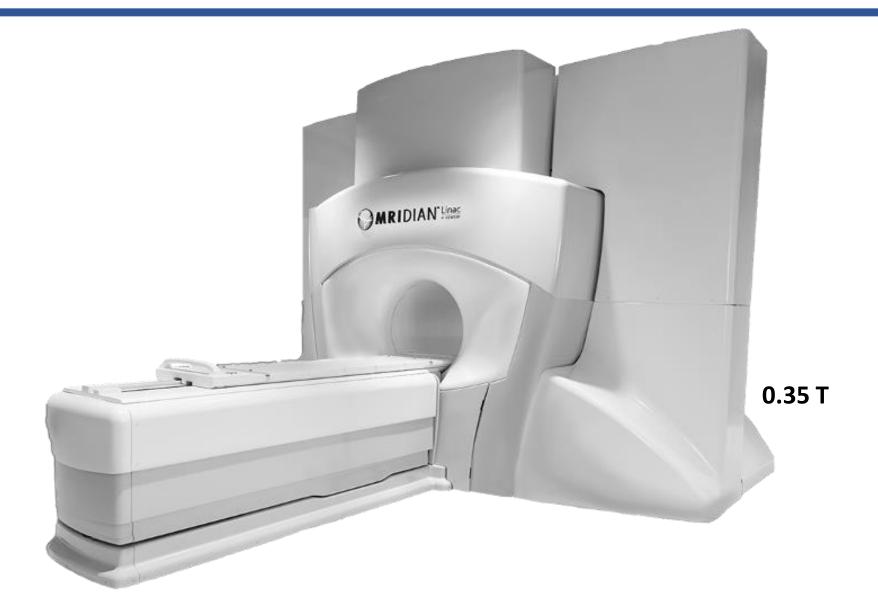
Innovative interventional MRI





0.55 T

Innovative use of MRI



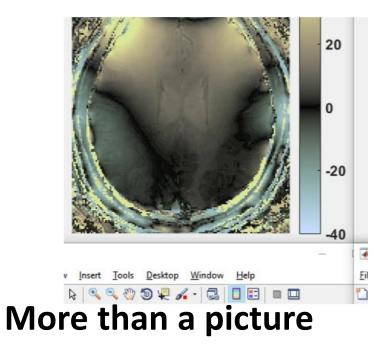
Innovative Use of MRI



MRI is being used in new places and new ways.



Innovations in Cancer Imaging



MRI systems change over time.

How to implement quantitative MRI?

Use a phantom and a controlled pipeline.

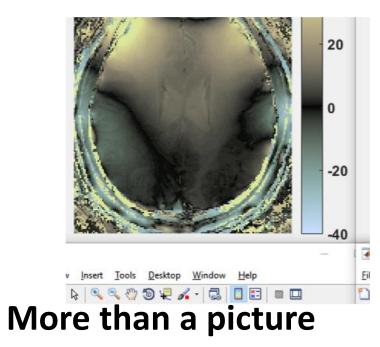
There is bias across MRI systems.

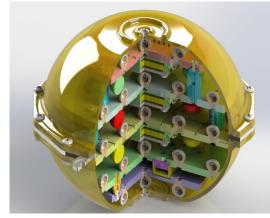
Perform regular QA on our MRI systems.

We can implement the same pipeline across sites.

Ma et al., Nature 495, 187-192, 013

Innovations in Cancer Imaging





How to implement quantitative MRI?

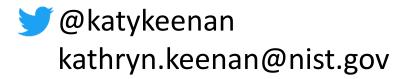
Expanding the use of MRI

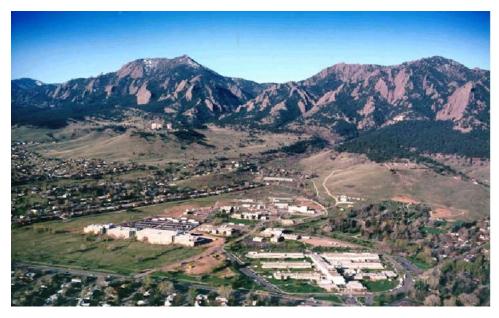
Thanks to all who contributed

NIST

Magnetic Imaging Group

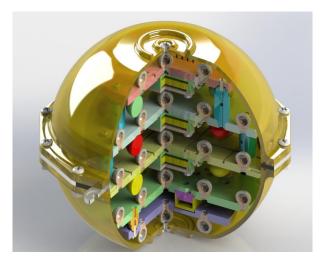
Dan Gruber Mark Ferris Kalina Jordanova Mikail Kraft John Lundstrom Michele Martin Sam Oberdick Stephen Ogier Stephen Russek Cassie Stoffer Karl Stupic Gary Zabow





NIST in Boulder, CO

NIST's efforts in quantitative MRI



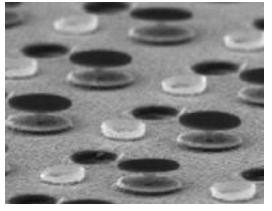
Quantitative

Imaging Biomarkers Alliance National Institute of Biomedical Imaging and Bioengineering Creating Biomedical Technologies to Improve Health











rosenlab.org

@katykeenan kathryn.keenan@nist.gov

nist.gov/pml/applied-physics-division/magnetic-imaging