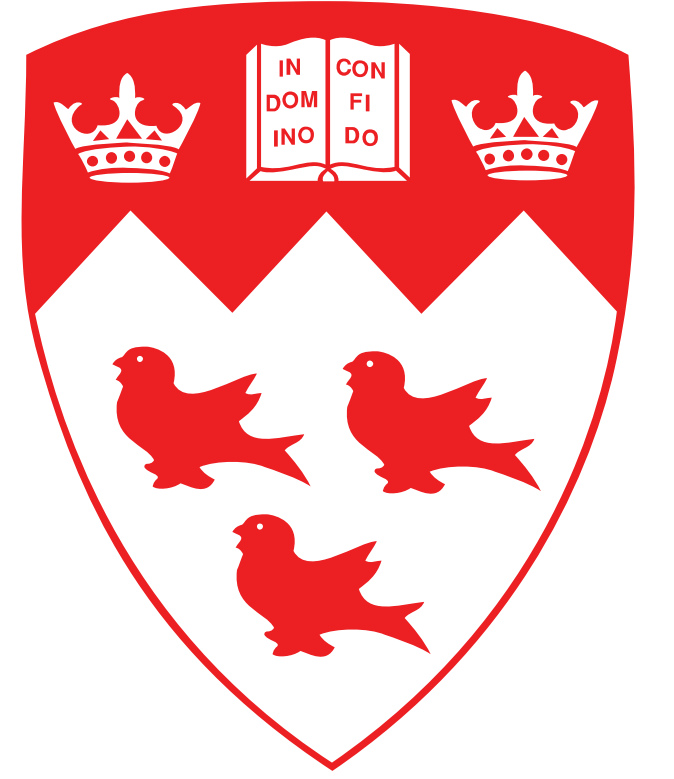




T₁ Mapping – Should We Agree to Disagree?

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Summary

- Our simulations predict a systematic bias between three T₁ mapping methods due to inaccurate B₁ mapping and/or spoiling.
- These same trends were previously observed in vivo¹ for the same protocols.
- As these effects can be site/scanner specific, we *strongly suggest comparing T₁ maps to a gold standard IR map for each subject*, to account for any sequence dependent T₁ bias.

Introduction

- It was recently reported¹ that three commonly used methods²⁻⁴ for quantitative T₁ produce similar T₁ values in phantoms, but exhibit significant disagreement in vivo (Fig. 1).
- Reported T₁ values in white matter are also inconsistent between methods and sites (Table 1).
- This work reports simulations demonstrating that inaccuracies in B₁ mapping and incomplete spoiling could explain some of the T₁ variations trend observed in vivo.

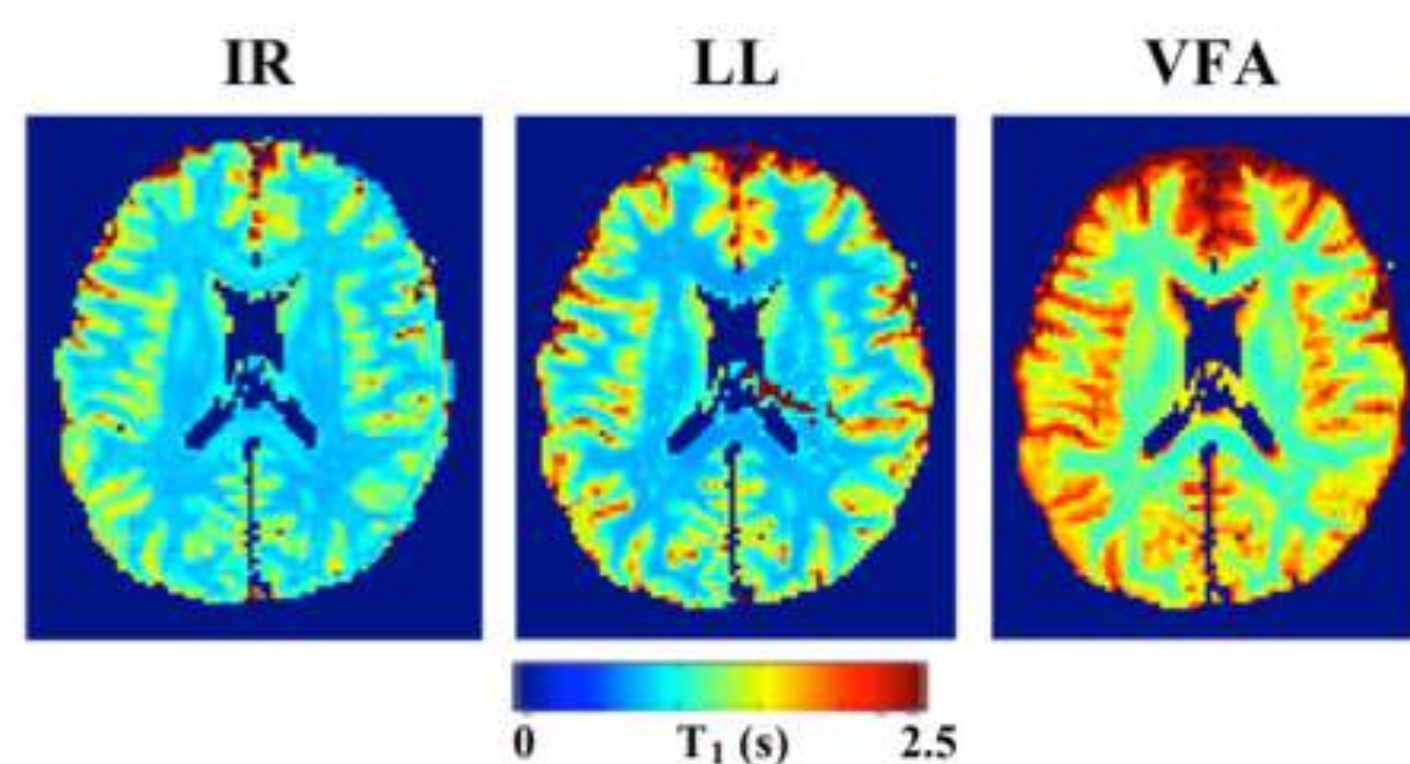


Figure 1. Single Slice T₁ maps (IR, LL, VFA) of a healthy volunteer in a single session. The mode T₁ value in white matter was 825.5 ms (IR), 734.9 ms (LL) and 1037.0 ms (VFA).

	Ref [4]	Ref [5]	Ref [6]	Ref [7]	Ref [8]	Ref [9]	Ref [10]
IR	1000-1100	1084 (45)	690-810		943 (57)	800-940	
LL					964 (116)		755 (10)
VFA	1000-1100			1084 (79)		900-1020	

Table 1. Overview of reported T₁ values in healthy white matter at 3 T.

Simulations

- Bloch simulations were implemented using Matlab and were based on 100 spin isochromats, with T₁ matched to in vivo IR measurements¹ (825.5 ms).
- The pulse sequence parameters (LL, IR, VFA) were identical to those used in vivo² (see abstract for details).
- Data was fitted using an estimated 0.89 flip angle correction (estimated from whole brain AF¹¹).
- Simulation investigating inaccurate flip angle correction on T₁
 - Fractional error in measured B₁ varied between 0.9 and 1.1.
- Simulation investigating imperfect gradient spoiling on T₁
 - Spins dephased 80-100% of a 2π dispersion (incoherent state).

Results

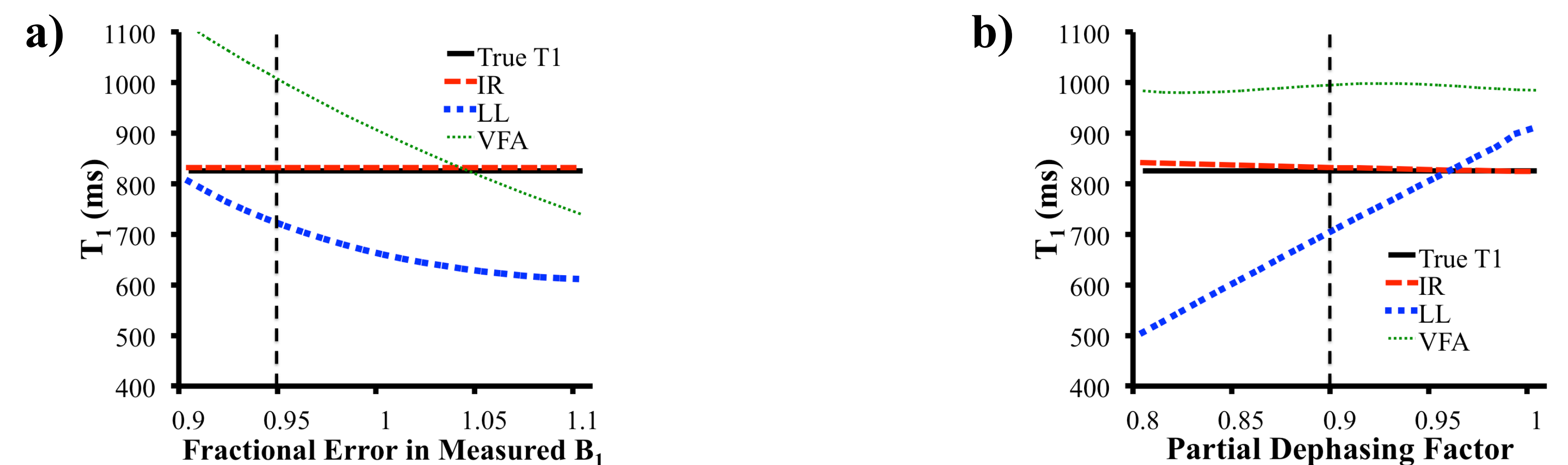


Figure 2. Shown in Fig. 2 a) is the simulated relationship between fitted T₁ and fractional error in measured B₁ for IR, LL and VFA using a partial dephasing factor of 0.9. Shown in Fig. 2 b) is the relationship between fitted T₁ and partial dephasing factor for IR, LL and VFA for a fractional error in measured B₁ of 0.95. The vertical line in both figures indicates the values for which the simulation parameters for Fig. 2 a) and b) are identical.

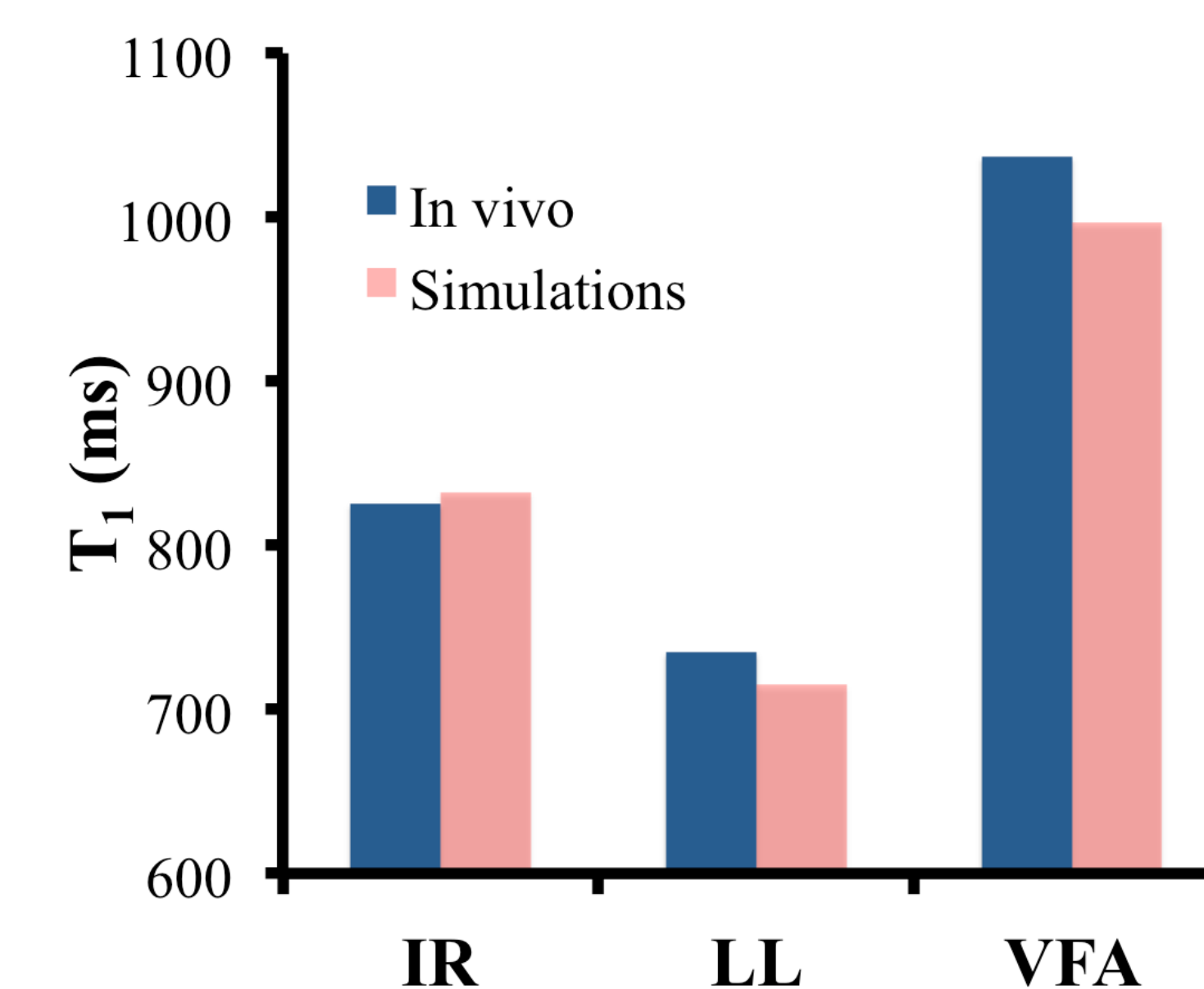


Figure 3. Comparison between the mode white matter T₁ measured in 10 healthy subjects¹, and simulations with similar parameters. The simulation values correspond to parameters represented by the vertical dashed line in Figs. 2 a) and b).

Discussion

The bar graph in Fig. 3 shows that the simulations follow a similar T₁ trend compared to the in vivo white matter T₁. Overall, these simulations suggests that for a typical set of protocols LL mostly underestimates T₁, and VFA overestimates it. For all the simulated parameters, T₁ measured with IR is very stable and only slightly deviates from the true T₁. Error in B₁ mapping has been shown¹² to be sensitive to factors such as RF pulse shape, slice-select gradients and B₀ inhomogeneities. Incomplete or variable dephasing could result from factors like diffusion anisotropy in white matter tracts¹³, which could explain the agreement between T₁ methods in phantoms but not in vivo¹. Our simulations did not account for magnetization transfer effects, which have also been shown to cause T₁ map inaccuracies in VFA¹⁴. Including magnetization transfer in VFA leads to an increase in fitted T₁ values, hence worsening the predicted disagreement between VFA and IR.

This work highlights the importance of accurate B₁ mapping, robust spoiling methods, and proper calibration with the IR gold standard.

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