

Advanced Medical Physics Improves Patient Outcomes

# *Academic research on Liver MRI*

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Liver MRI: Gd-EOB-DTPA

Image analysis

Workflow improvement

# Liver MRI: Contents



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Liver MRI: Gd-EOB-DTPA

Image analysis

Workflow improvement

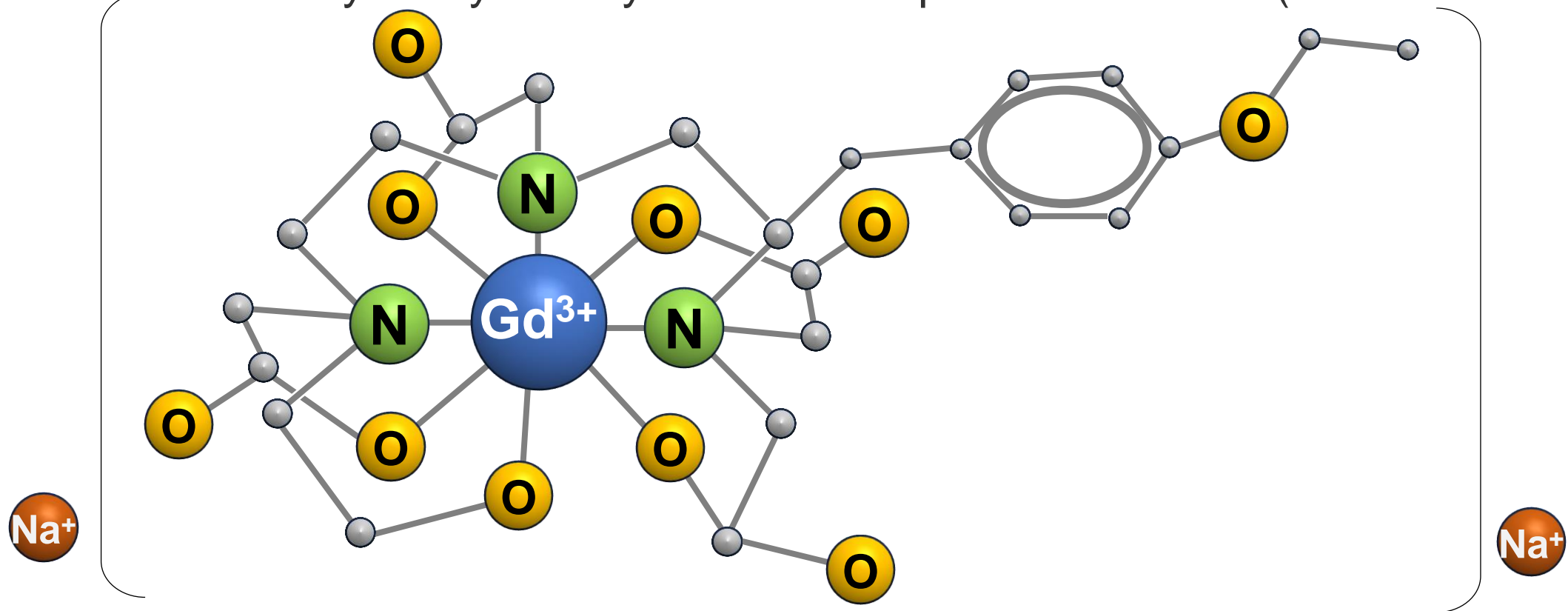
Contents

# Background: Liver MRI



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Gadolinium-ethoxybenzyl-diethylenetriamine pentaacetic acid (Gd-EOB-DTPA)



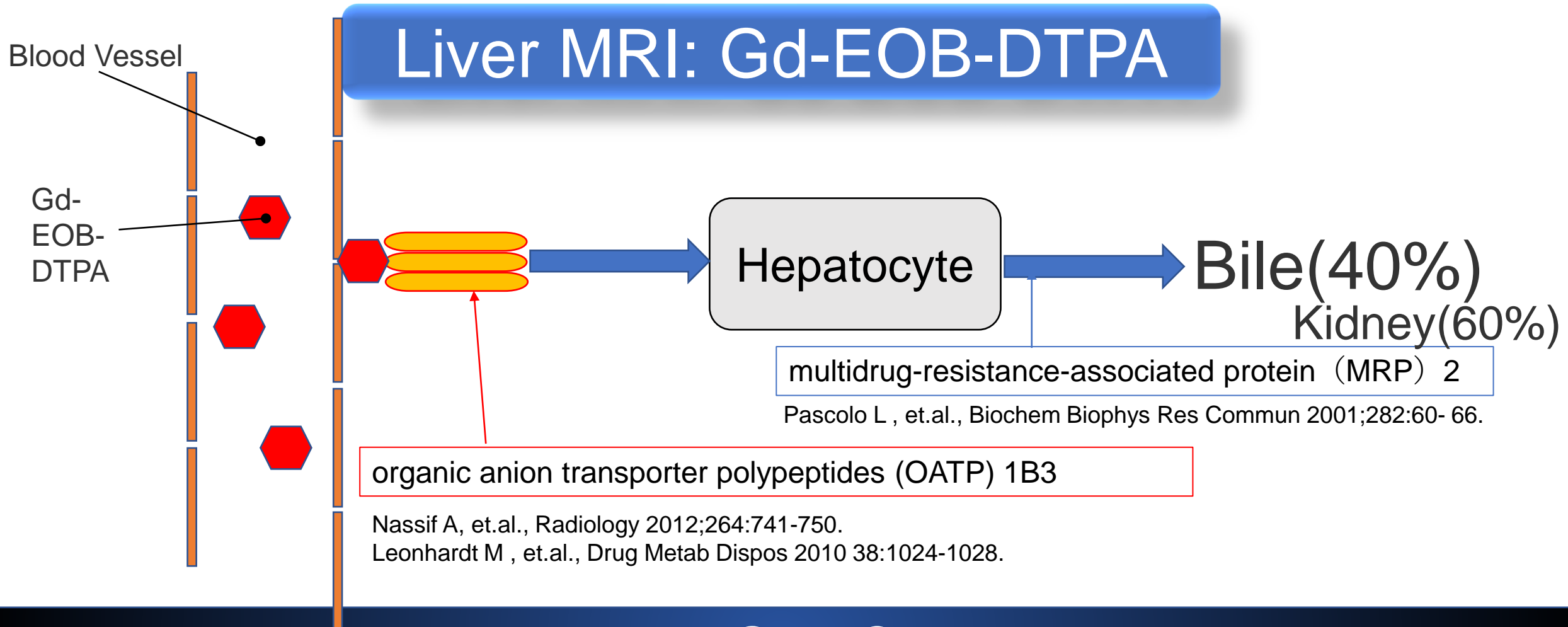
[https://pharma-navi.bayer.jp/sites/g/files/vrxlpx9646/files/2021-12/EOB\\_PRI\\_202112070.pdf](https://pharma-navi.bayer.jp/sites/g/files/vrxlpx9646/files/2021-12/EOB_PRI_202112070.pdf)

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# Background: Liver MRI



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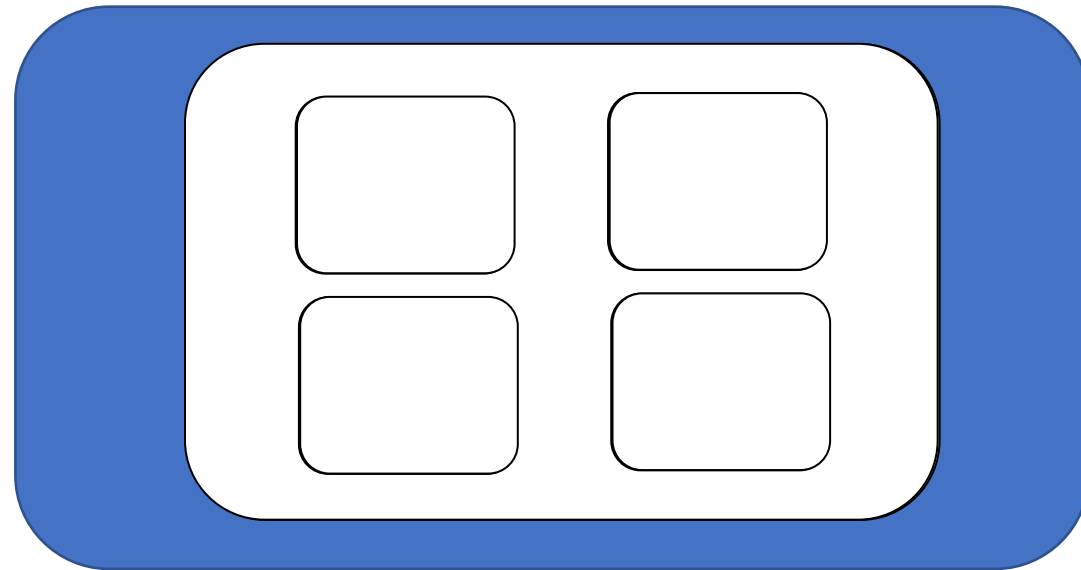
**Liver MRI: Gd-EOB-DTPA**

# Background: Liver MRI



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## Liver MRI: Gd-EOB-DTPA



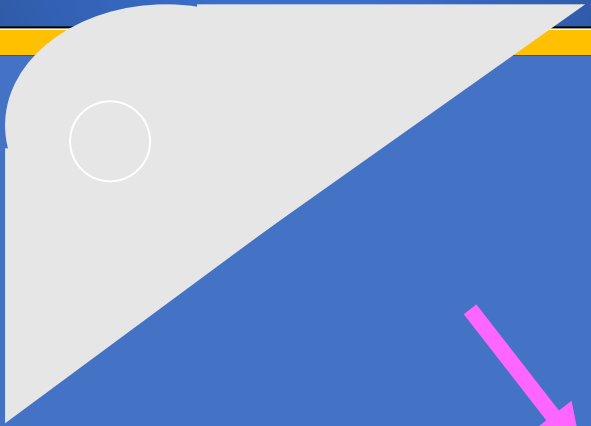
IV; Gd-EOB-DTPA accumulates in the liver over time.

Liver MRI: Gd-EOB-DTPA



# Background: Liver MRI

## Contrast Pattern



Tumor without hepatocytes

Tumors including hepatocytes



e.g., metastasis, cyst, necrosis  
HCC



e.g., AH, FNH, A-P shunt

Liver MRI: Gd-EOB-DTPA

# Background: Liver MRI



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## Liver MRI: Gd-EOB-DTPA

Gd-EOB-DTPA accumulates in the liver over time.

Dynamic images

Hepatobiliary phase  
(HBP)

**20 min delay**

Liver MRI: Gd-EOB-DTPA



# Background: Liver MRI



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HBP:  
tumors can be easily  
determined.

**20 min delay**



Liver MRI: Gd-EOB-DTPA

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Liver MRI: Gd-EOB-DTPA

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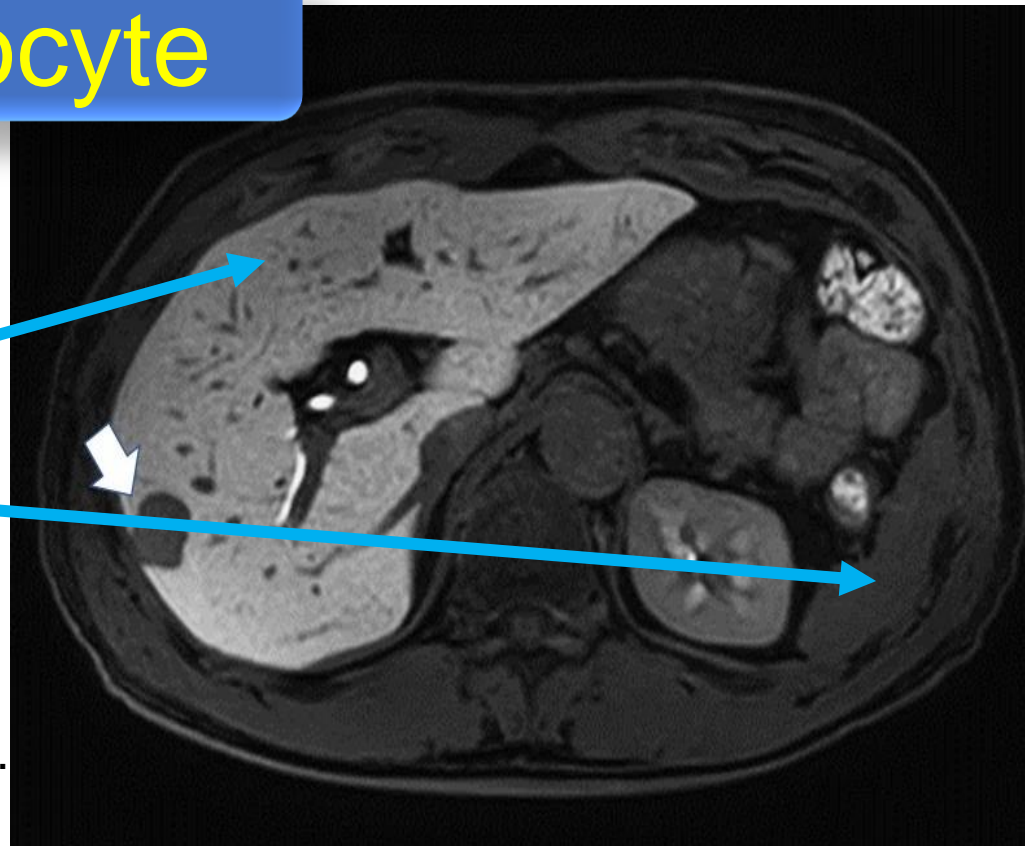
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## Uptake Analysis for Hepatocyte

Quantitative liver-spleen contrast ratio  
(Q-LSC)

$$Q-LSC = SI_L / SI_S$$

Cutoff = 1.5



The cutoff value at which tumors can be easily determined is 1.5.

Motosugi U , et.al., J Magn Reson Imaging 2009;30:1042- 1046.

## Analysis for the Liver Function

Child-Pugh score

ICG-R15

Albumin-Bilirubin (ALBI) grade

## Albumin-Bilirubin (ALBI) grade

$$\text{Linear predictor} = (\log_{10}\text{bilirubin [mol/L]} \times 0.66) \\ + (\text{albumin [g/L]} \times -0.085)$$

grade 1;  $\leq -2.60$ ,

grade 2;  $> -2.60$  to  $\leq -1.39$ ,

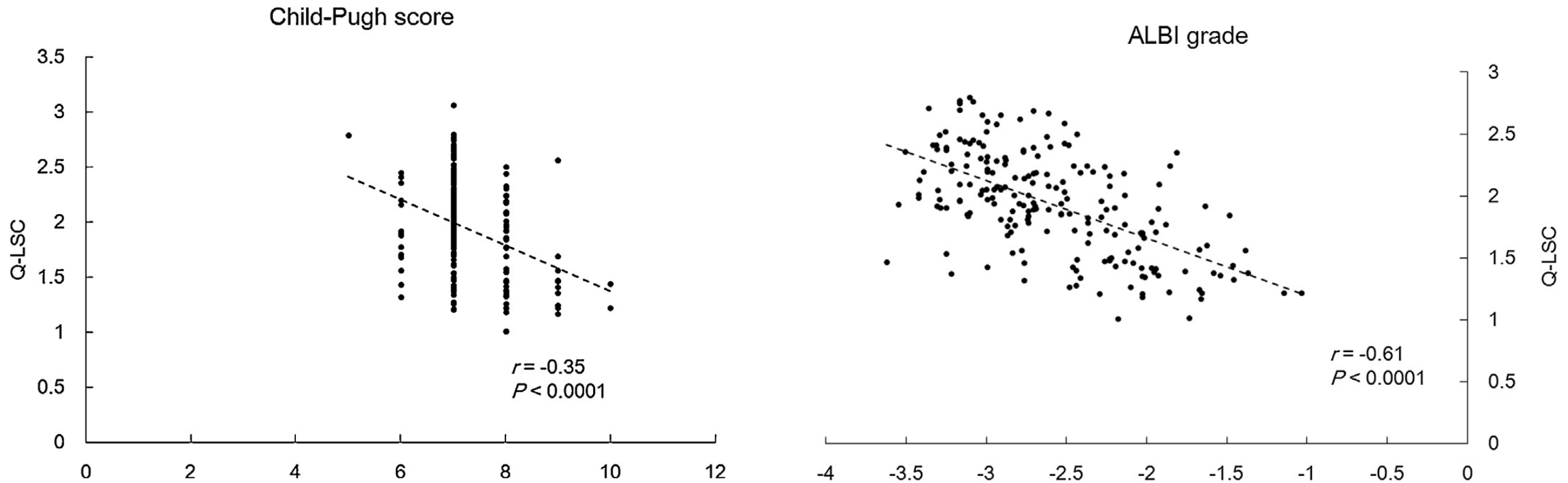
grade 3;  $> -1.39$ .

Johnson PJ , et.al., J Clin Oncol 2015;33:550- 558.

# Liver Function

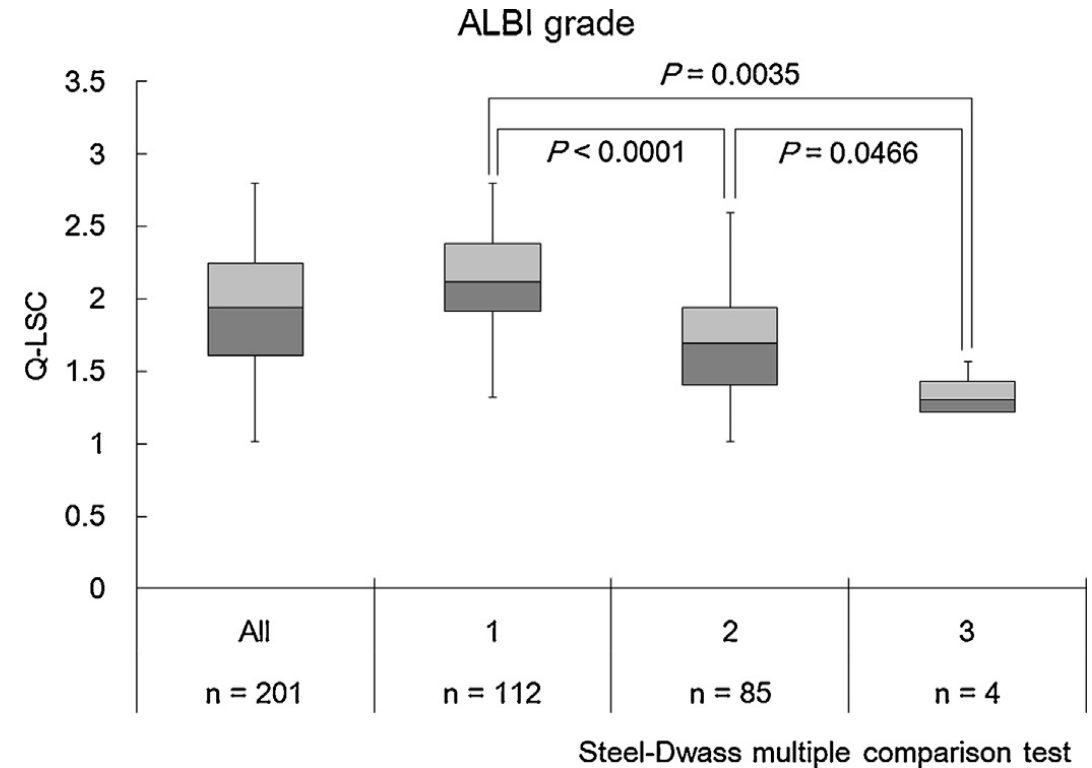
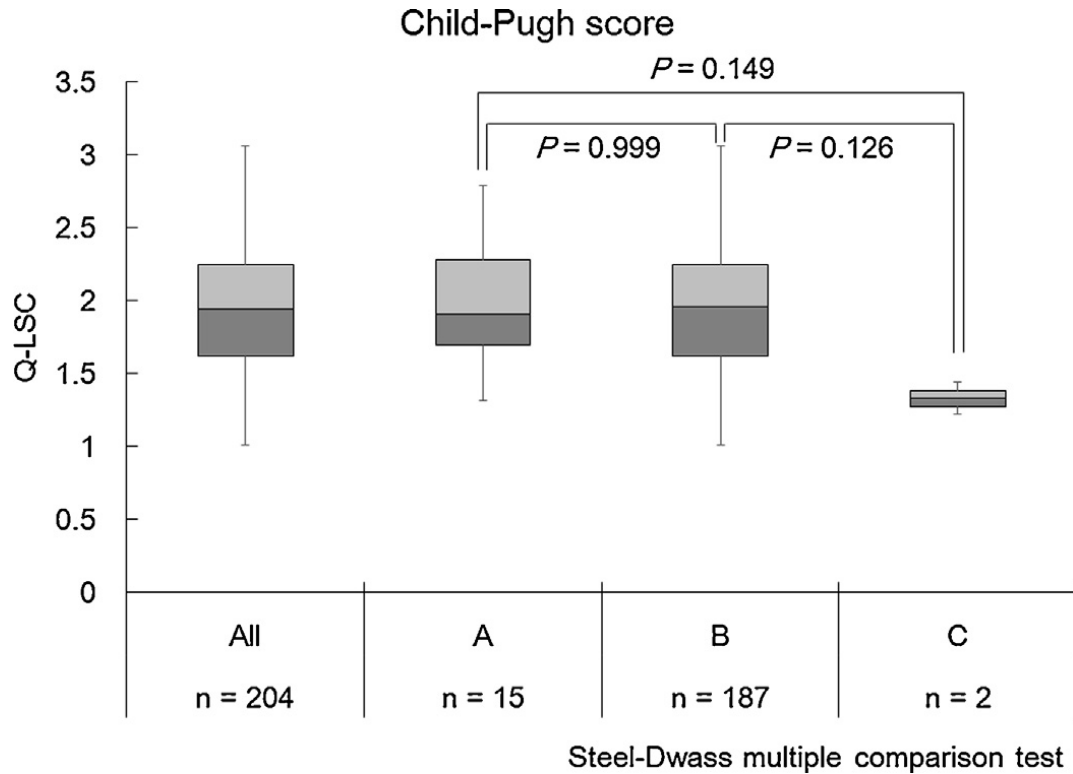


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Takatsu Y, et. al., Eur J Radiol 2016; 85:2206–2210.

# Liver Function



Takatsu Y, et. al., Eur J Radiol 2016; 85:2206–2210.



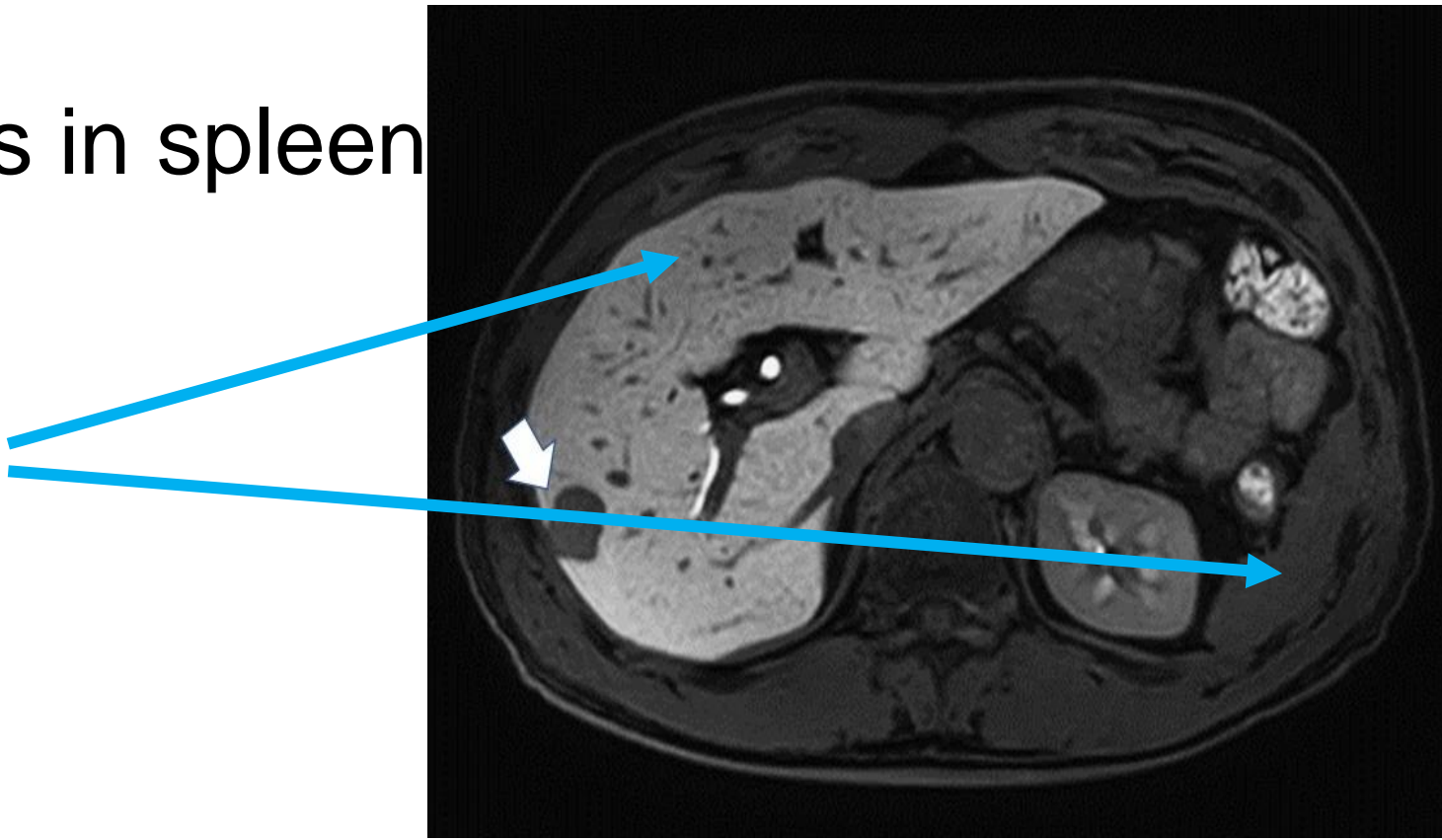
# Liver Function



- Splenectomy
- Gamma-Gandy Bodies in spleen



$Q-LSC = SI_L / S$





# Liver Function

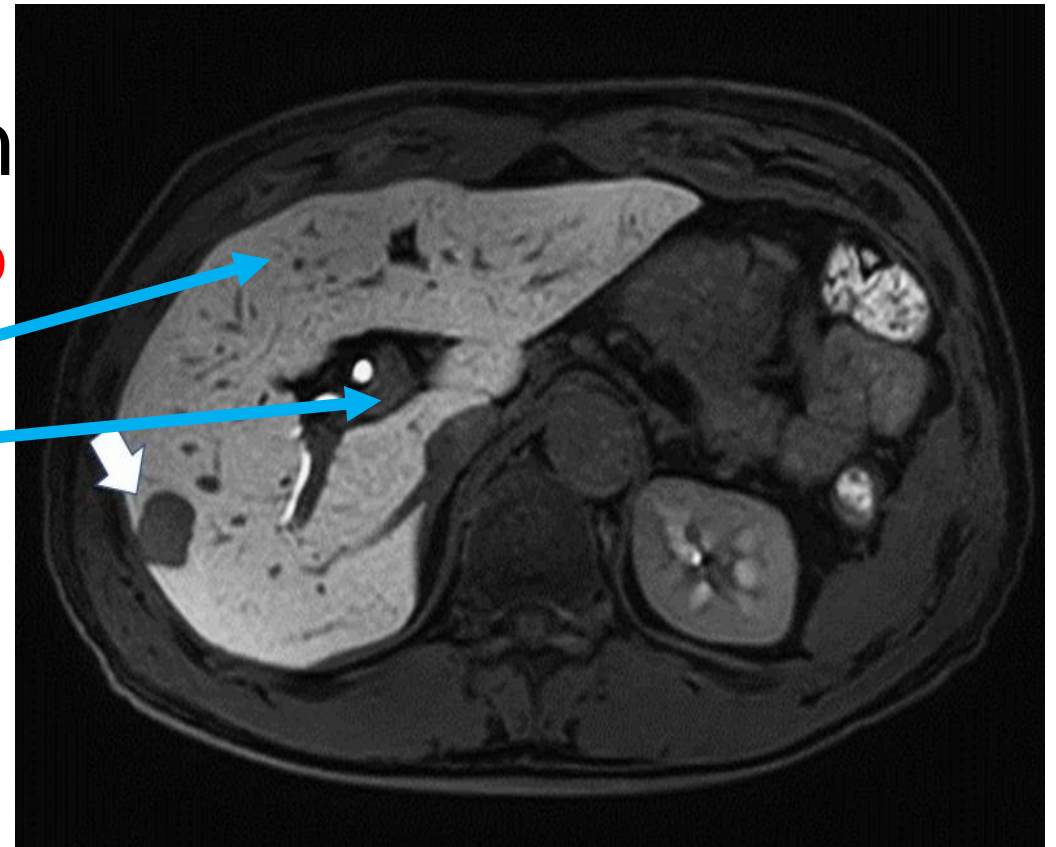


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- Splenectomy
- Gamma-Gandy Bodies in spleen

Quantitative liver-portal vein contrast ratio  
(Q-LPC)

$$Q-LPC = SI_L / SI_p$$



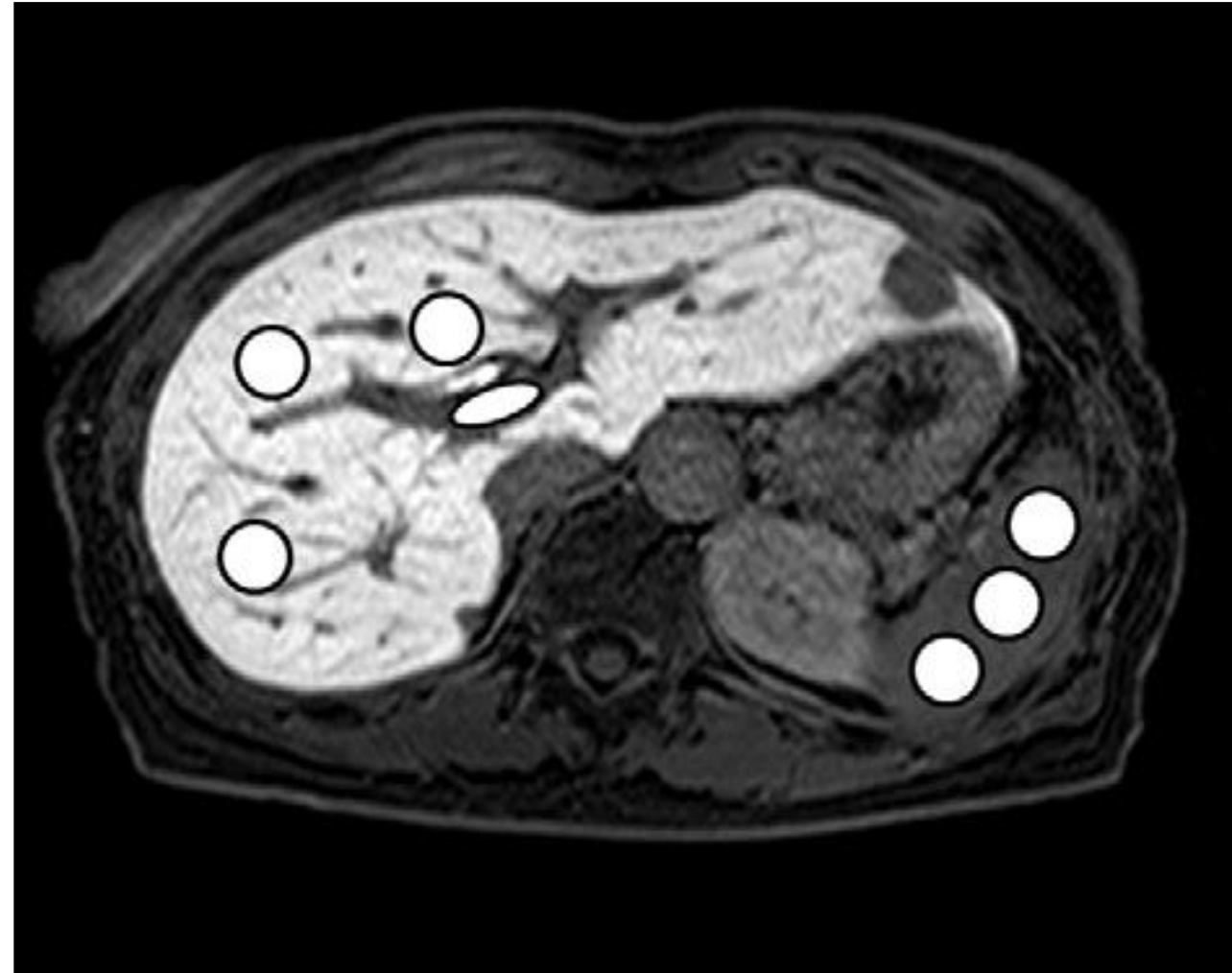
Takatsu Y, et. al., Clin Imaging; 2016;40:1112-7.

# Liver Function



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## Q-QSC vs Q-LPC



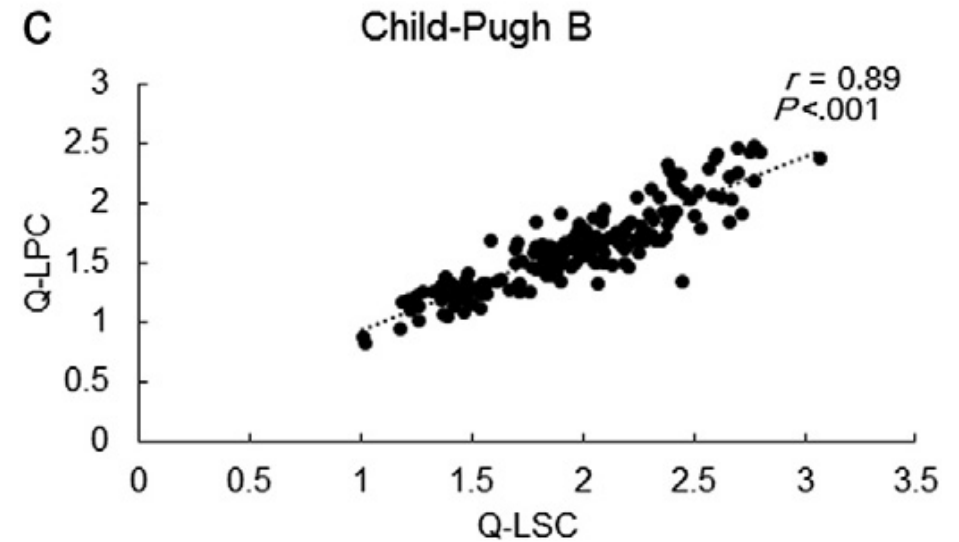
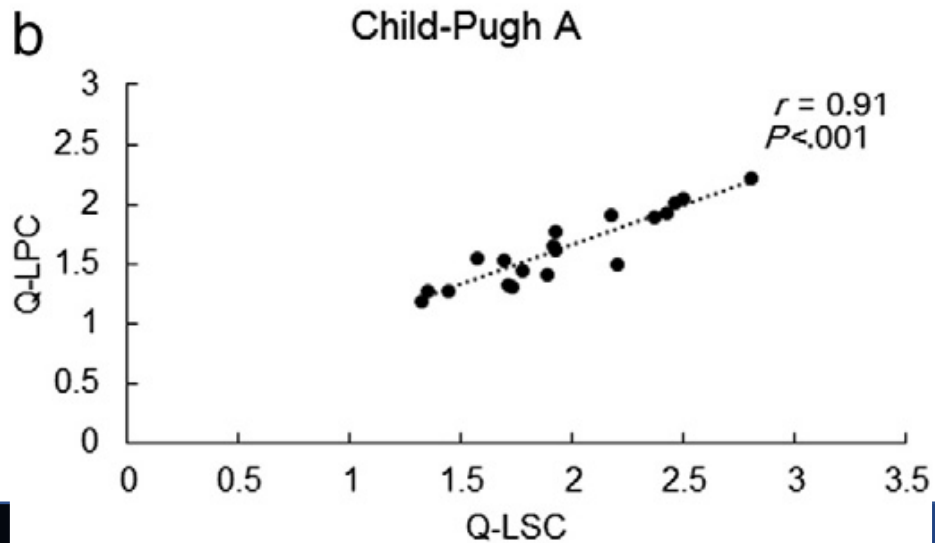
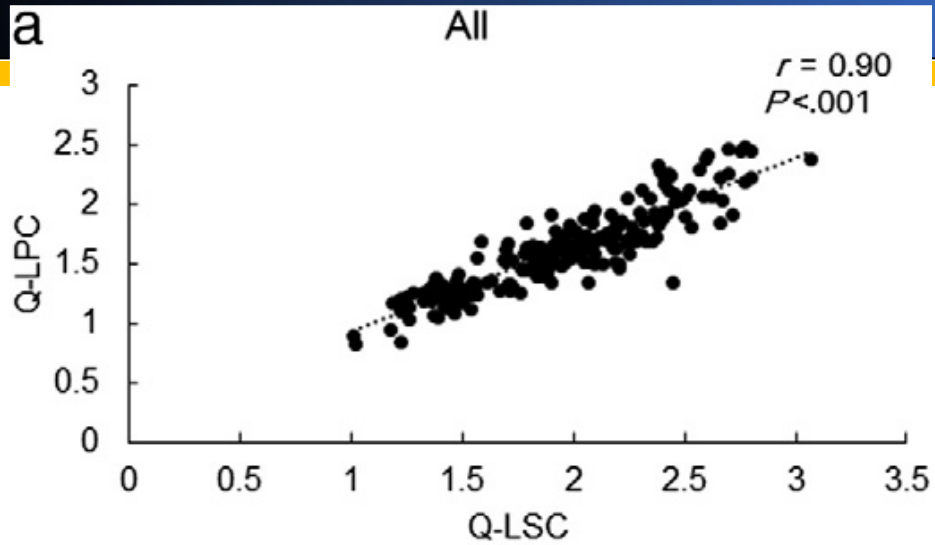
Takatsu Y, et. al., Clin Imaging; 2016;40:1112-7.

Image Analysis

# Liver Function



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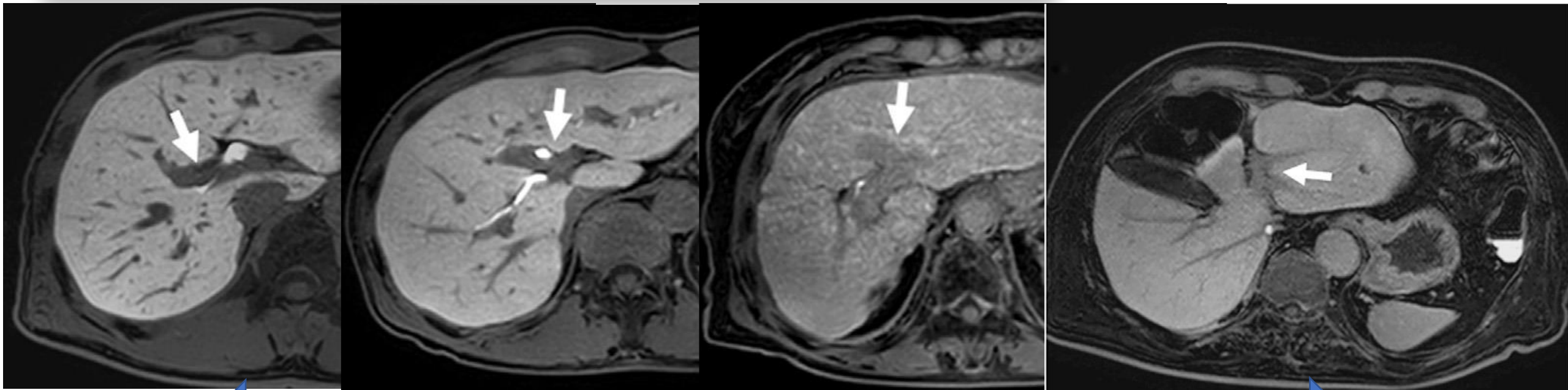
Takatsu Y, et. al., Clin Imaging; 2016;40:1112-7.

# Liver Function



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## Visual Assessment



Good

Liver Function

Poor

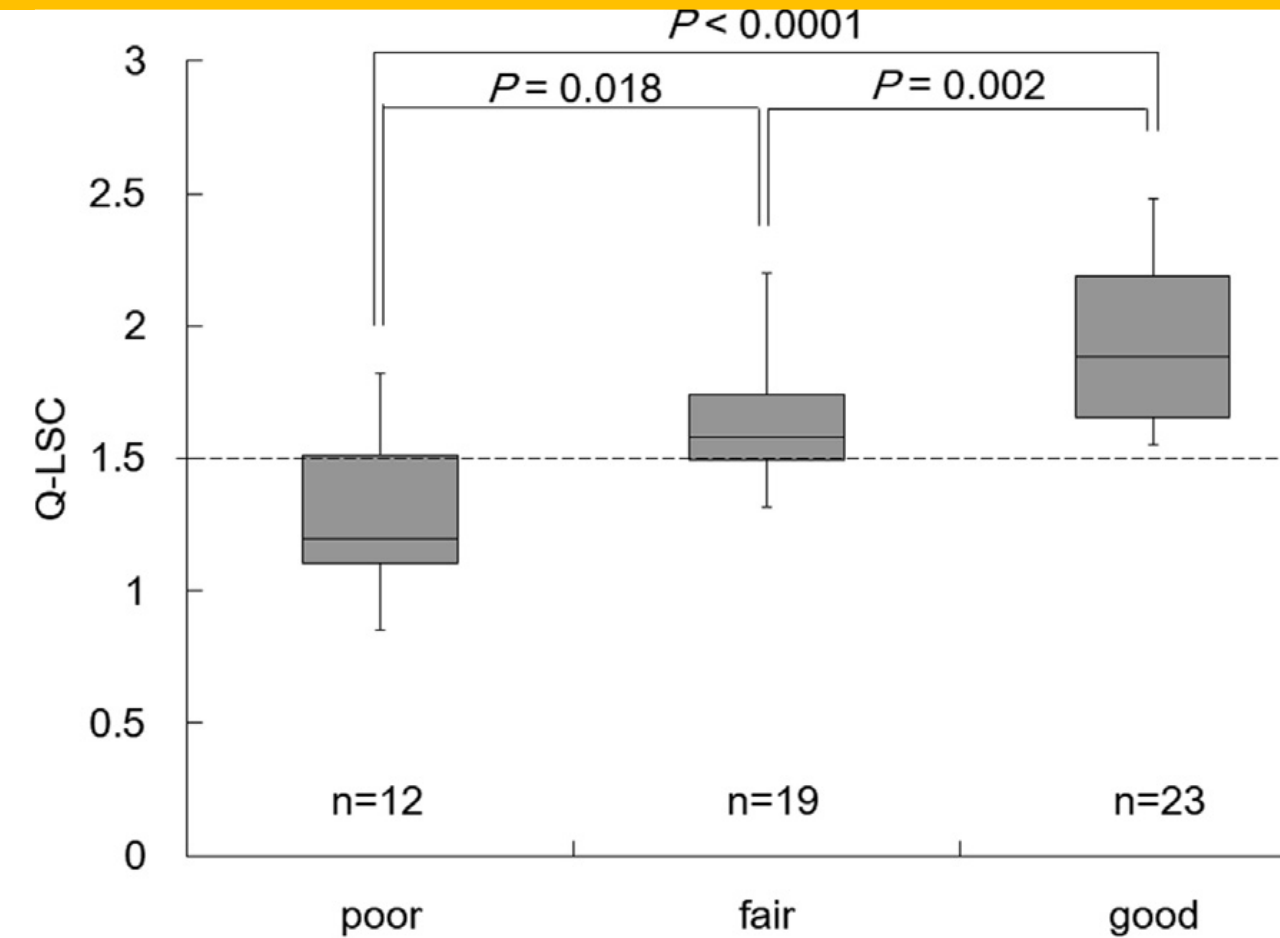
Takatsu Y, et. al., Clin Radiol; 2018;73:760e1-e6.

## Image Analysis

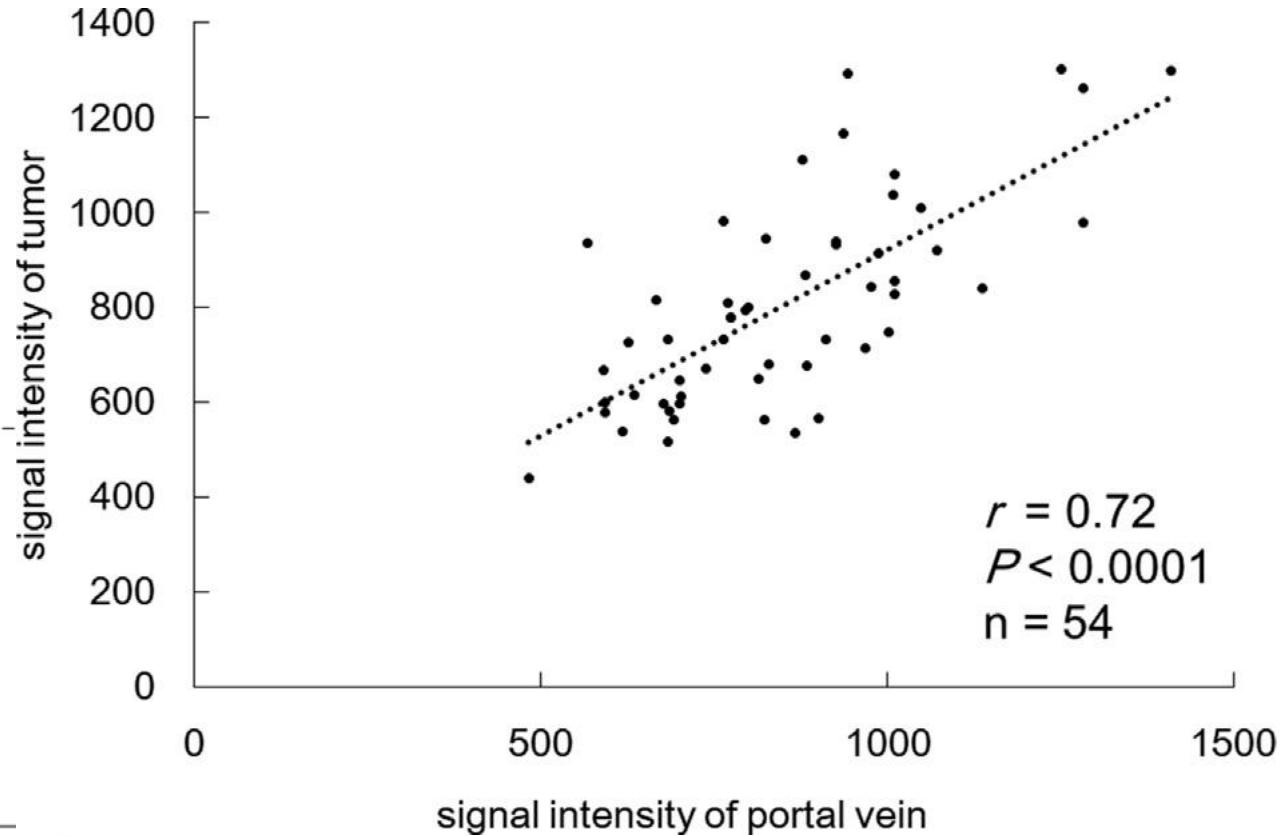
# Liver Function



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Steel-Dwass multiple comparison test



Takatsu Y, et. al., Clin Radiol; 2018;73:760e1-e6.



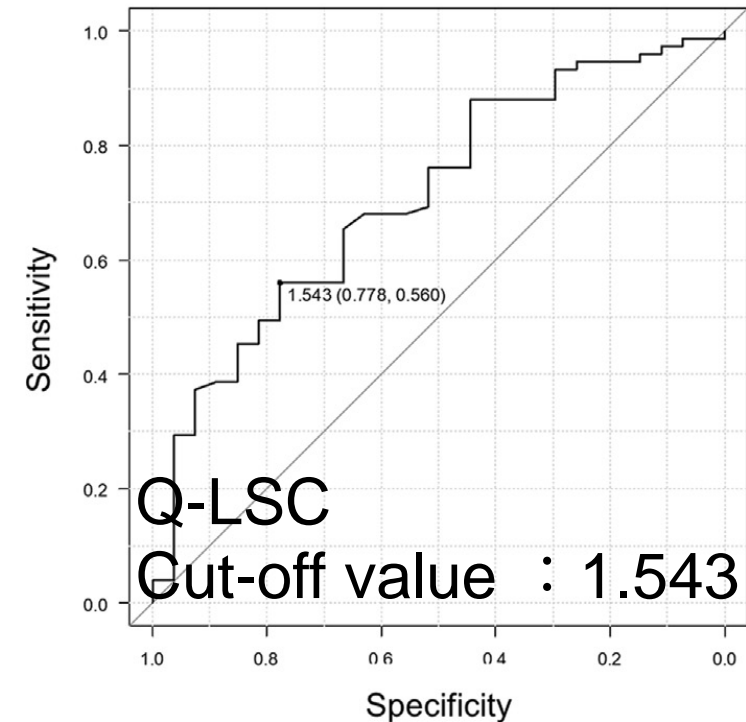
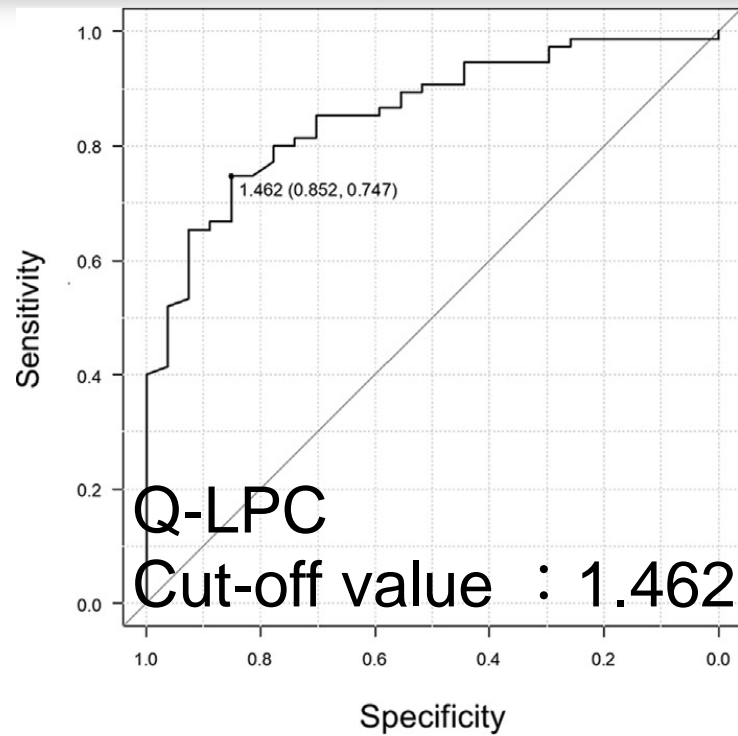
# Liver Function



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Cut-off value of Q-LPC

ROC



Takatsu Y, et. al., Clin Radiol; 2021;76:551e17-e24.

Image Analysis

# Liver Function



## Comparison between Q-LPC and Q-LSC

Compa  
PF  
Preva  
Sensi  
Speci  
PPV  
NPV  
Accu  
LR+  
LR-  
CI, cont  
Fractio

|                    | Q-LPC        | Q-LSC        |
|--------------------|--------------|--------------|
|                    | Estimate     | Estimate     |
| PF                 | 0.588        | 0.471        |
| Prevalence         | 0.735        | 0.735        |
| <u>Sensitivity</u> | <u>0.747</u> | <u>0.560</u> |
| <u>Specificity</u> | <u>0.852</u> | <u>0.778</u> |
| PPV                | 0.933        | 0.875        |
| NPV                | 0.548        | 0.389        |
| <u>Accuracy</u>    | <u>0.775</u> | <u>0.618</u> |
| LR+                | 5.040        | 2.520        |
| LR-                | 0.297        | 0.566        |

(Upper)  
PF, Positive

; 2021;76:551e17-e24.

# Liver MRI: Contents



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Liver MRI: Gd-EOB-DTPA

Image analysis

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# Workflow: Liver MRI



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## Liver MRI: Gd-EOB-DTPA: workflow

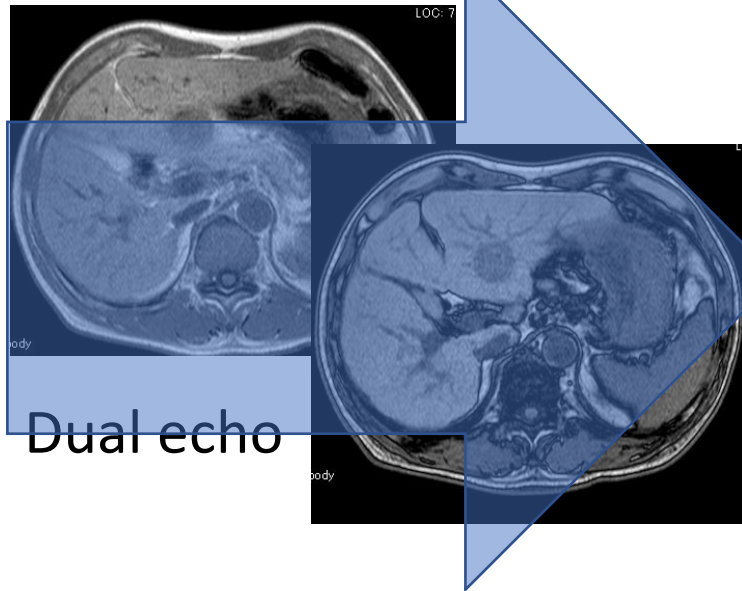
Survey

Plane

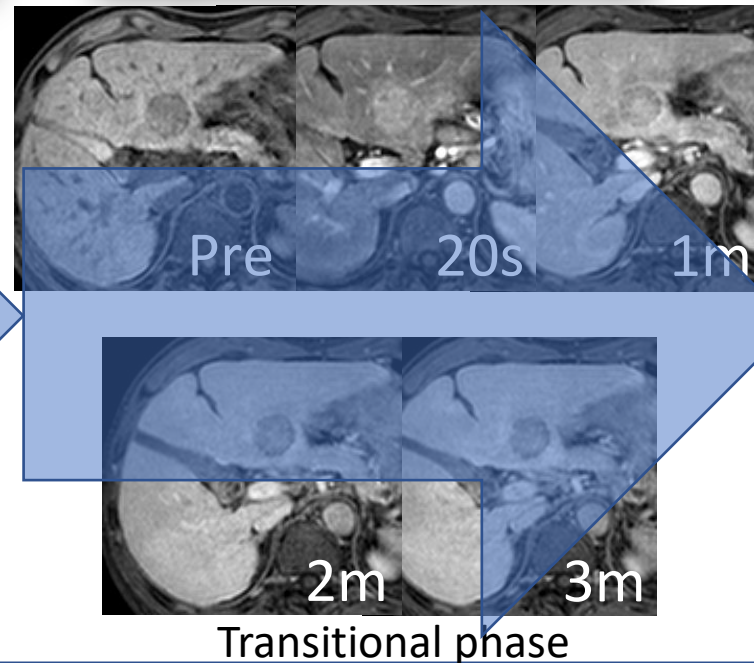
Dynamic (CE+)

T2w, DWI etc

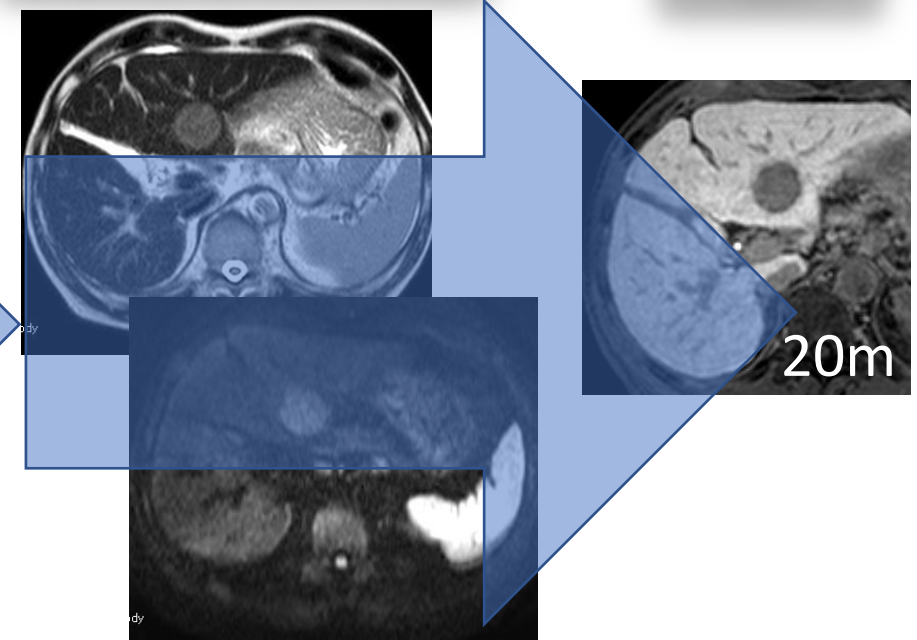
HBP



Dual echo



Transitional phase



20m

Workflow improvement

# Workflow: Liver MRI



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Liver MRI: Gd-EOB-DTPA: workflow

Survey

Plane

Dynamic (CE+)

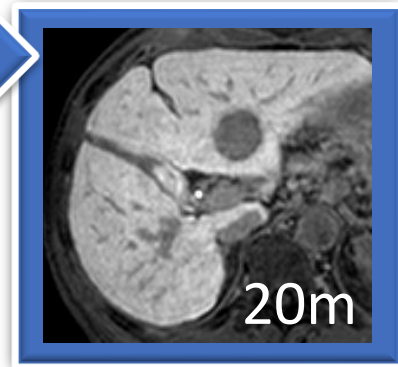
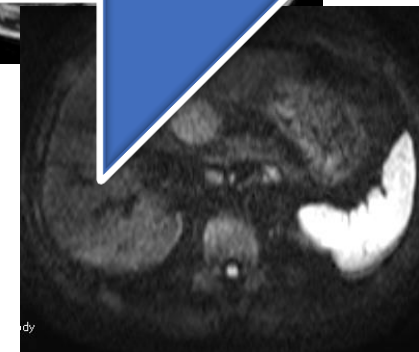
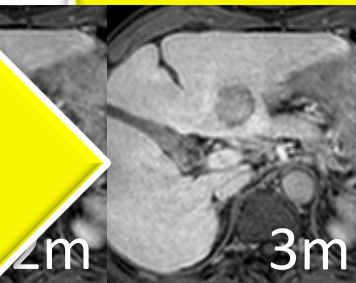
T2w, F

etc

HBP

How to take a suitable HBP?

Key image



Workflow improvement

# Workflow: Liver MRI



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## Liver MRI: Gd-EOB-DTPA: workflow

Survey

Plane

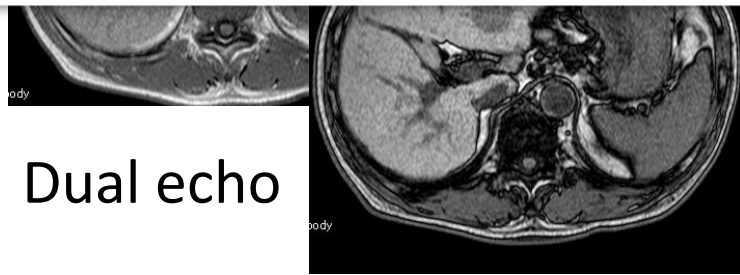
Dynamic (CE+)

T2w, DWI

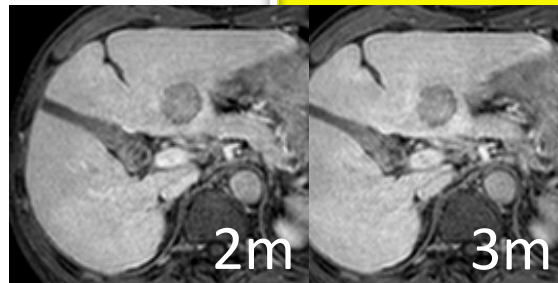
etc

HBP

To investigate whether the contrast enhancement effect in HBP images can be predicted using transitional phase (3-min delay) images based on Q-LSC and ALBI grades.

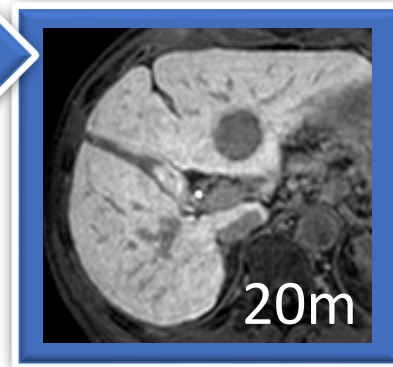
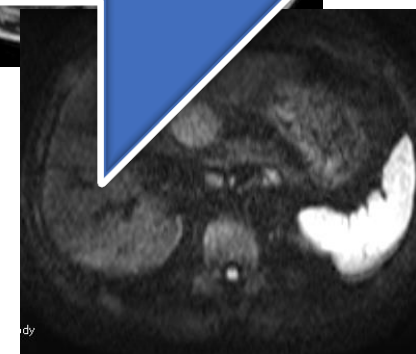


Dual echo



2m

3m



20m

Workflow improvement

# Workflow: Liver MRI



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## Data analysis

Q-LSC = Signal intensity of Liver / Signal intensity of Spleen

3, 10, and 15 min after Gd-EOB-DTPA injection

5 Q-LSC groups

More than 1.5?

<0.9

≥0.9, <1

≥1, <1.1

≥1.1, <1.2

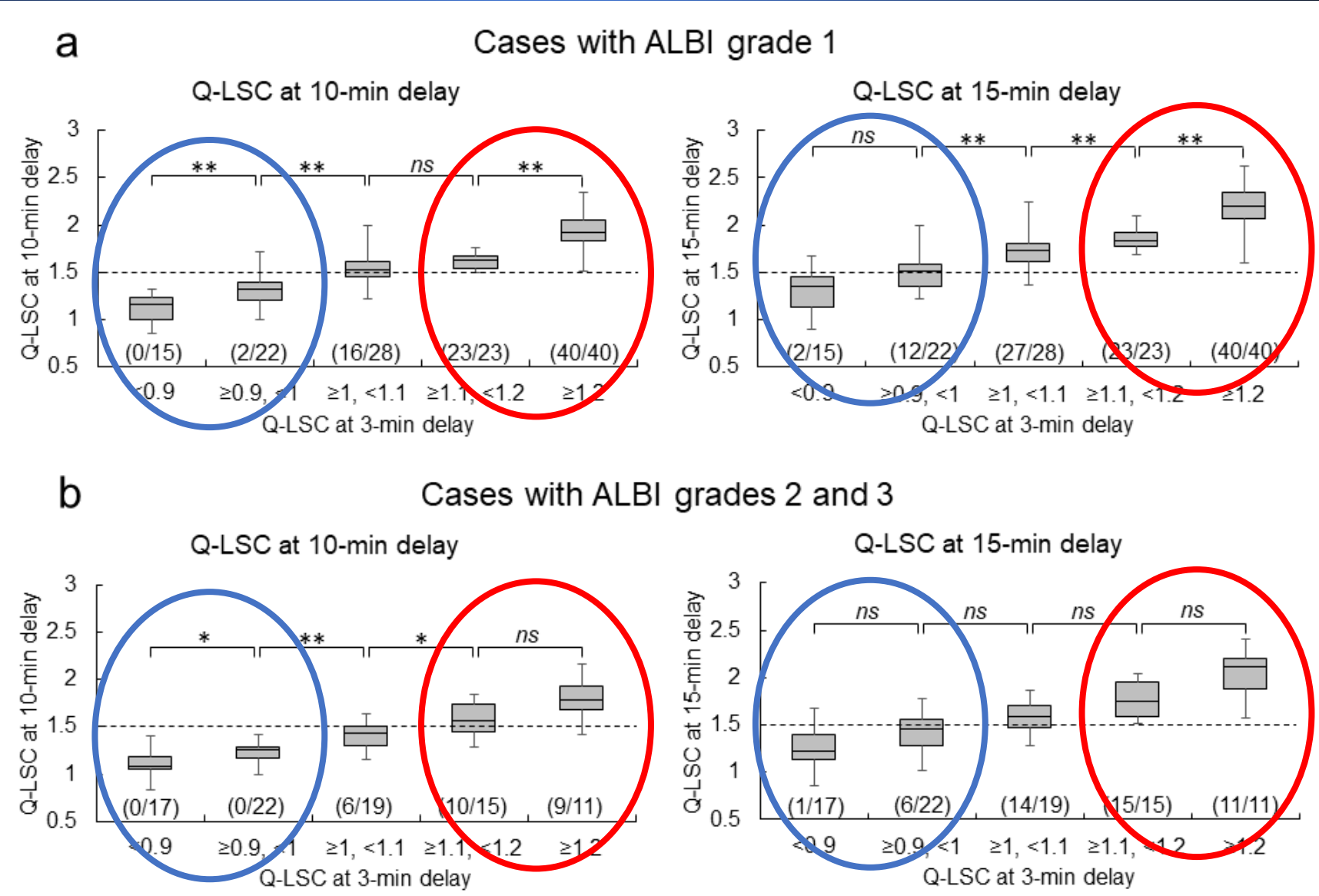
≥1.2

Workflow improvement

# Results



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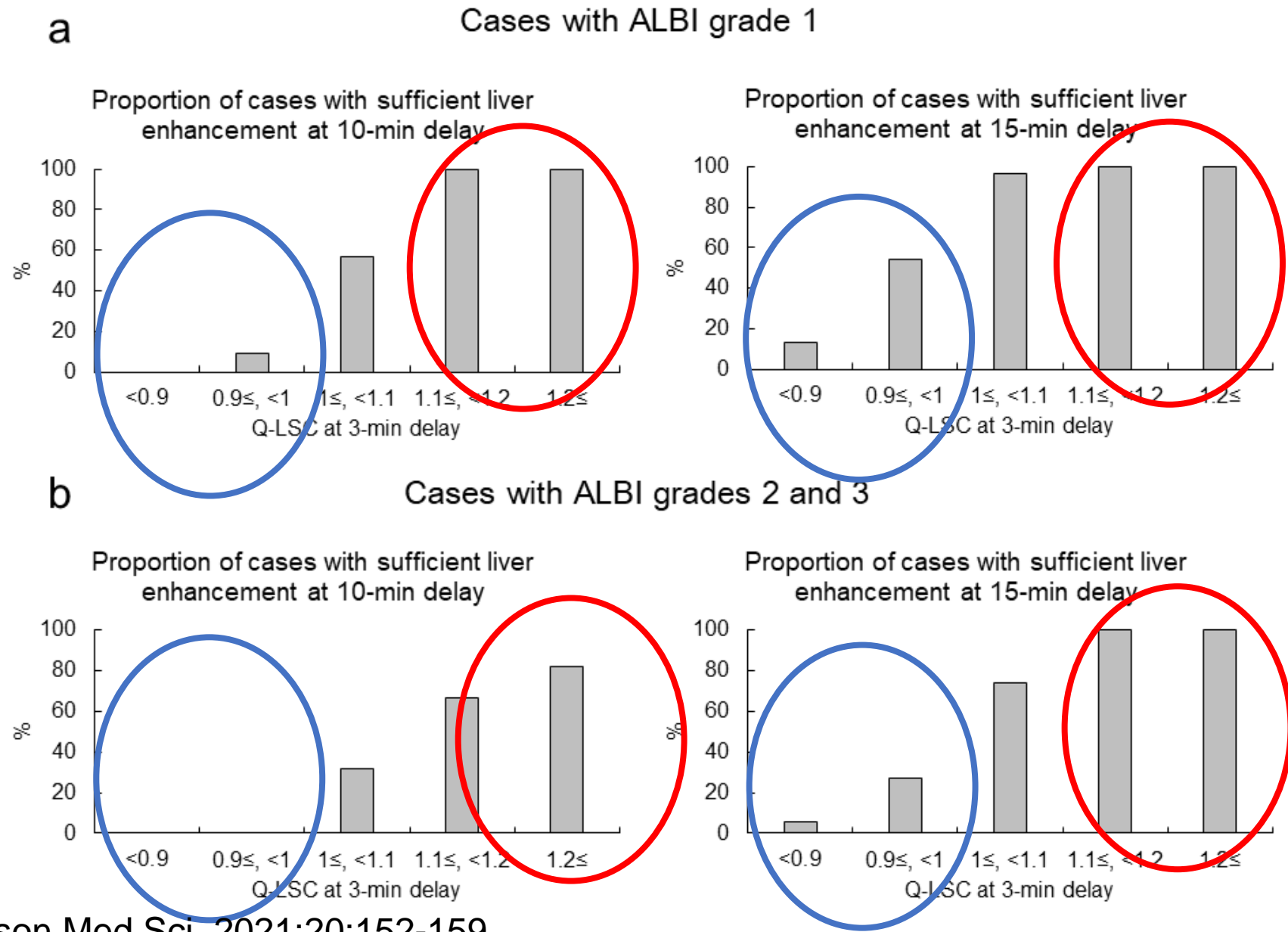
Kruskal-Wallis test:  $P < 0.01$   
 Steel-Dwass test: \*\*  $P < 0.01$ , \*  $P < 0.05$   
 : ns: no significant

Takatsu Y, et.al., Magn Reson Med Sci, 2021;20:152-159.

Workflow improvement



# Results



Takatsu Y, et.al., Magn Reson Med Sci, 2021;20:152-159.

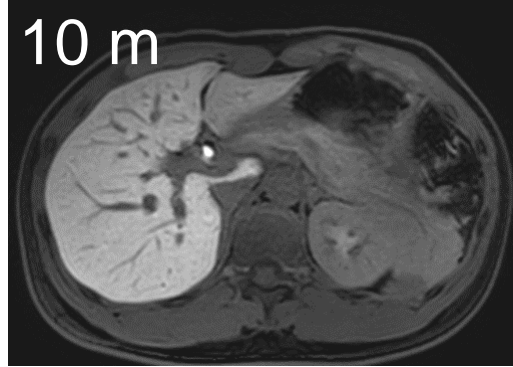
Workflow improvement

# Results/Discussion



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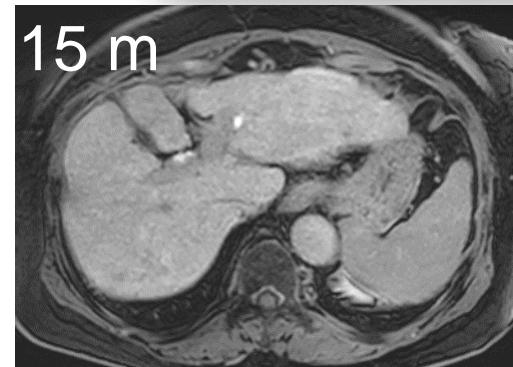
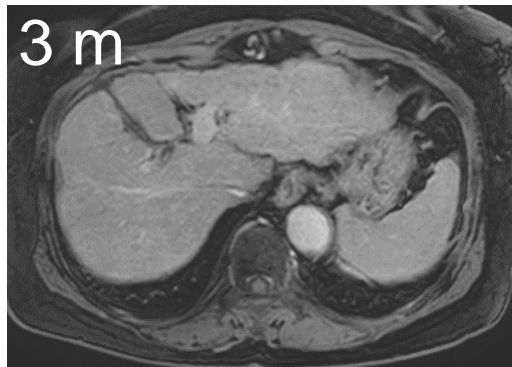
Q-LSC:



**Long examination**  
Patient's fatigue  
Insufficient breath hold  
Body movement  
Poor physical condition

ALBI grade 1  $\geq 1.1$   
ALBI grades 2 and 3  $\geq 1.2$

Q-LSC  $\geq 1.5$  100%  
81.8%



ALBI grade 1  $< 1$   
ALBI grades 2 and 3  $< 1$

Q-LSC  $\geq 1.5$  37.8%  
17.9%

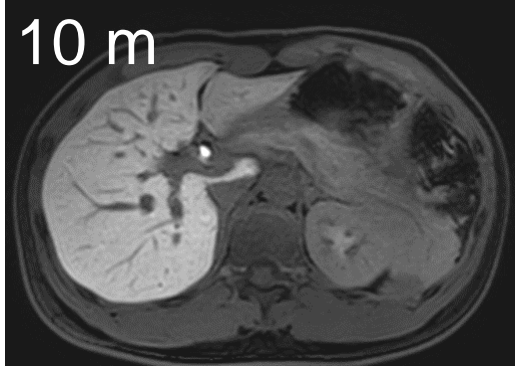
Workflow improvement

# Discussion



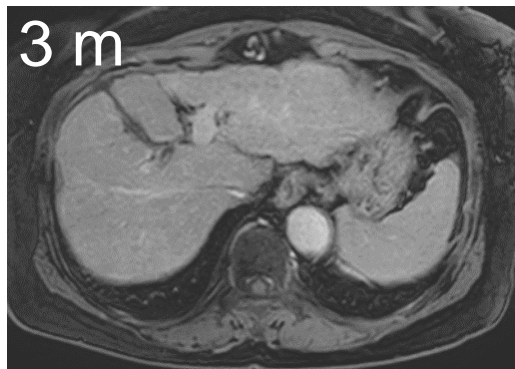
Q-LSC:

ALBI grade 1  $\geq 1.1$   
ALBI grades 2 and 3  $\geq 1.2$



Q-LSC  $\geq 1.5$  100%  
81.8%

End of  
the examination



ALBI grade 1  
ALBI grades 2 and 3  $< 1$

Stop  
temporally

Another patient can be  
performed instead of  
wasting time while  
waiting

Continued  
to HBP



# Conclusion



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Liver contrast enhancement effect in HBP image could be predicted using a **3-min delay** image based on Q-LSC and ALBI grades.

**Performing a smooth and well-managed study**

Workflow improvement

# Liver MRI: Contents



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# Thank you for your attention



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Liver MRI: Gd-EOB-DTPA

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ขอบคุณครับ

*Academic research on abdominal imaging*