

# Colloquium @ Department of Physics, NTU

## Application of diffusion MRI to cancer, heart and brain connectome imaging

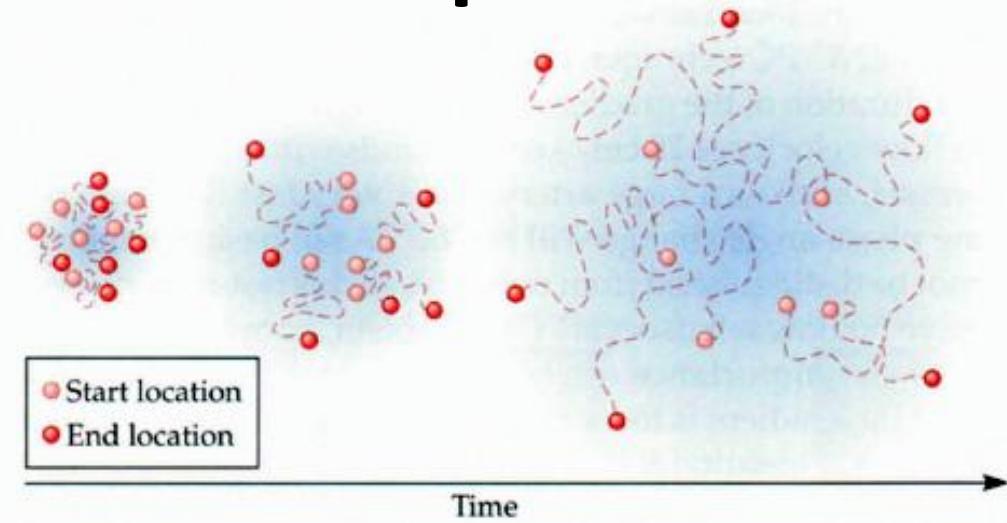
*March 11, 2014*

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Center for Optoelectronic Medicine  
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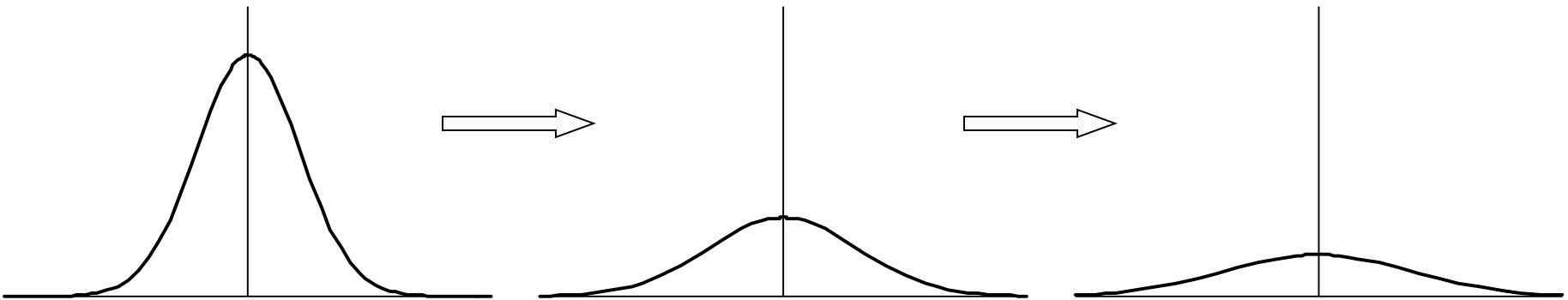
# Diffusion phenomenon



$\rho(r, \Delta t)$

$\rho(r, 2\Delta t)$

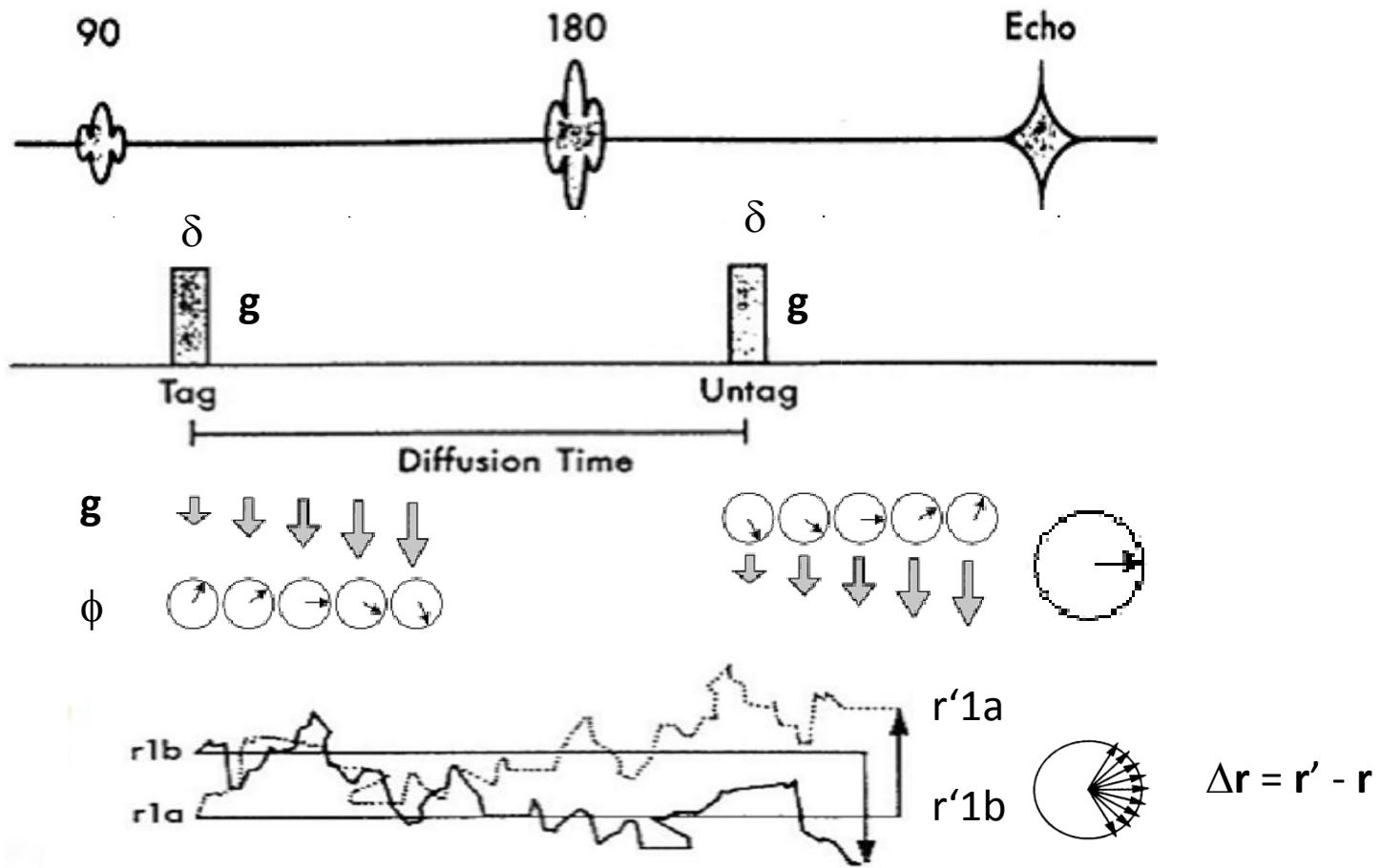
$\rho(r, 3\Delta t)$



$$\rho(r', \Delta) = \rho(r, 0) * P(r | r', \Delta)$$

where  $P(r | r', \Delta)$  = probability density function

# Encoding diffusion with MR



The spin of each proton is endowed by a phase term  $\text{Exp}(i\Delta\phi)$   
where  $\Delta\phi = 2\pi\mathbf{q} \cdot (\mathbf{r}' - \mathbf{r})$  and  $\mathbf{q} = \gamma\mathbf{g}\delta/2\pi$

# Diffusion signal and PDF

Paul T. Callaghan

*Principle of nuclear magnetic resonance microscopy* 1991

$$\text{Given } \rho(\mathbf{r}', \Delta) = \rho(\mathbf{r}, 0) * P(\mathbf{r} | \mathbf{r}', \Delta)$$

where the phase term for each spin  $\exp(i\Delta\phi) = \exp(i2\pi\mathbf{q} \cdot (\mathbf{r}' - \mathbf{r}))$

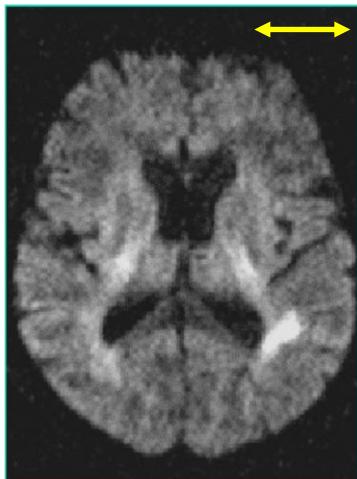
$$S(g) = \iint_{\mathbf{r} \mathbf{r}'} \rho(\mathbf{r}) P(\mathbf{r} | \mathbf{r}', \Delta) \exp(i\gamma\delta\mathbf{g} \cdot (\mathbf{r}' - \mathbf{r})) d\mathbf{r}' d\mathbf{r}$$

$$S(\mathbf{q}) = \iint_{\mathbf{r} \mathbf{r}'} \rho(\mathbf{r}) P(\mathbf{r} | \mathbf{r}', \Delta) \exp(i2\pi\mathbf{q} \cdot (\mathbf{r}' - \mathbf{r})) d\mathbf{r}' d\mathbf{r}$$

$$S(\mathbf{q}) = \int_{\mathbf{r}} \rho(\mathbf{r}) d\mathbf{r} \int_{\mathbf{R}} P(\mathbf{R}, \Delta) \exp(i\Delta\phi) d\mathbf{R} = S_0 \exp(-\langle \Delta\phi^2 \rangle)$$

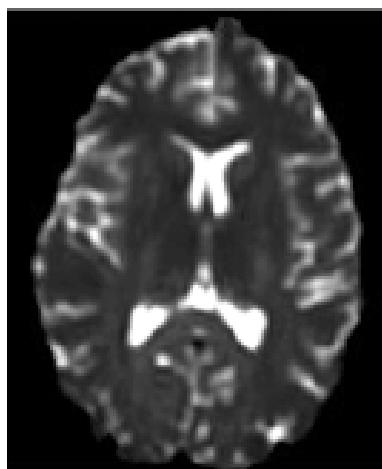
# Diffusion-weighted EPI sequence

Diffusion-weighted

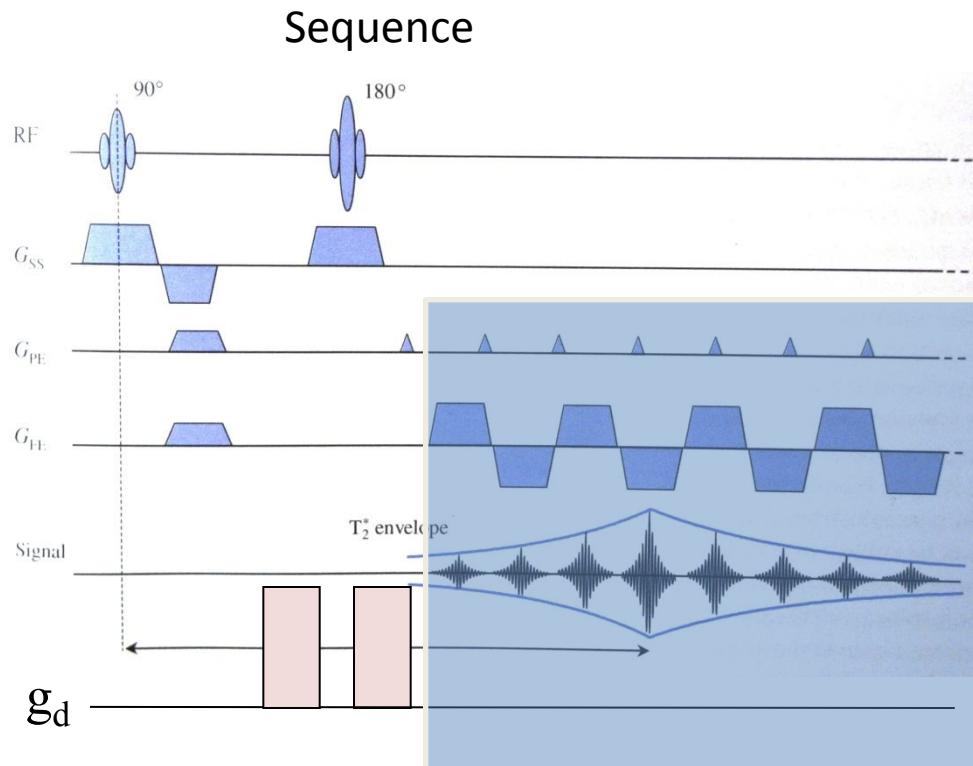


$S$

T2



$S_0$



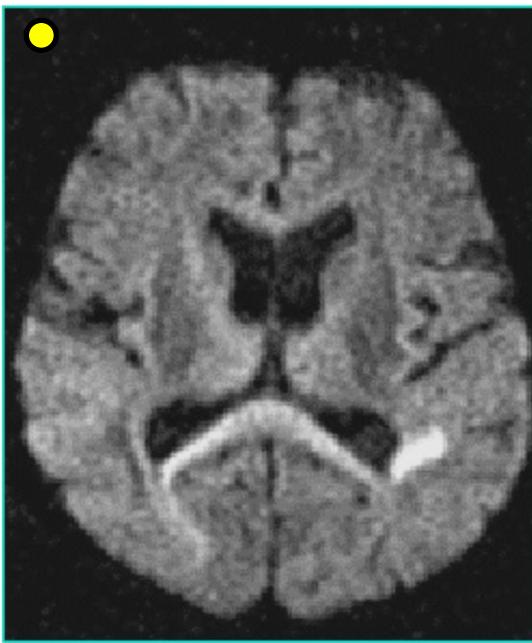
Diffusion  
Module ( $q$ )

Imaging  
Module ( $k$ )

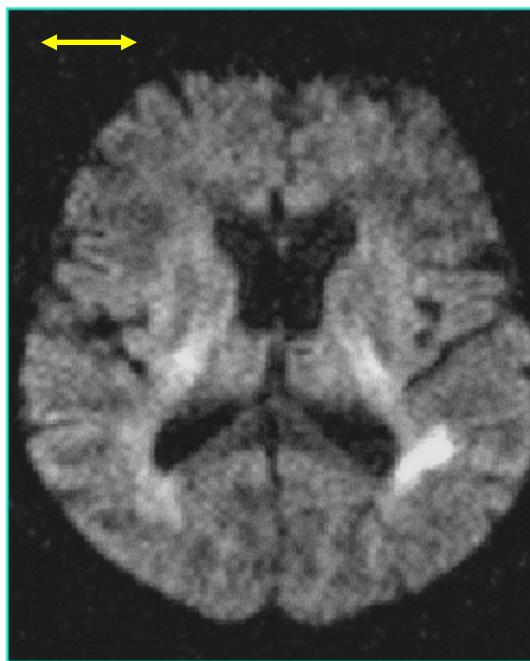
$$S = S_0 \exp^{(-(\gamma g \delta)^2 (\Delta - \frac{\delta}{3}) D)} = S_0 \exp^{(-b D)}$$

# Diffusion contrast varies with gradient directions

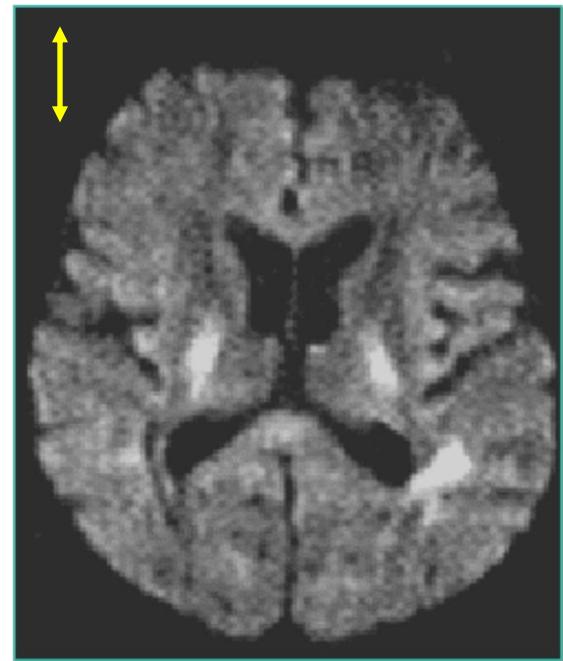
$G_{zz}$



$G_{xx}$



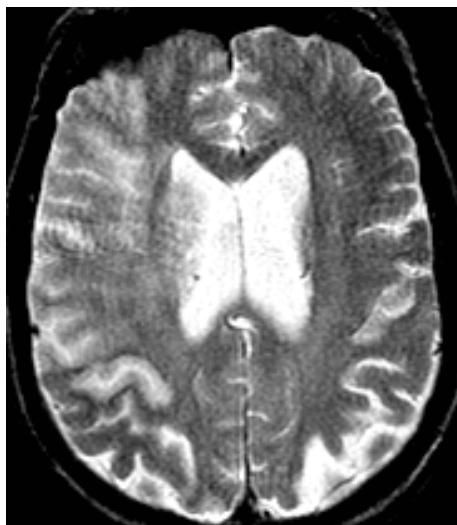
$G_{yy}$



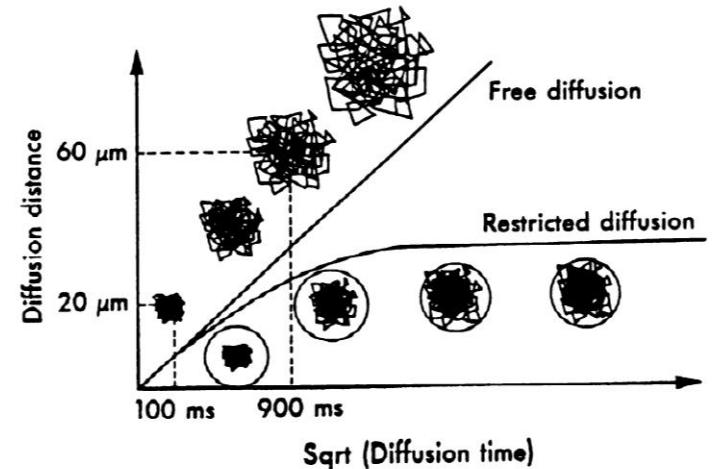
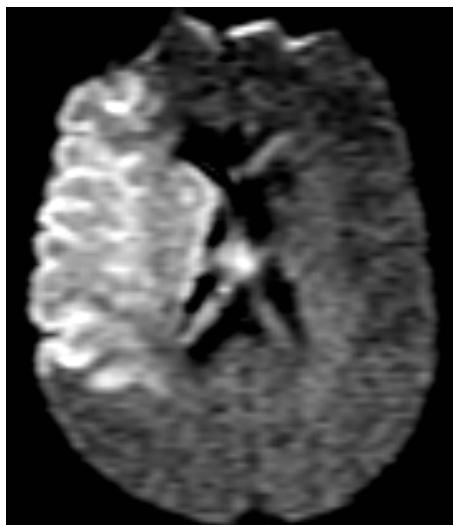
# Diffusion-weighted imaging

- In 1990, Moseley et al demonstrated in an animal stroke model that the ADC decreased by approximately 30%-50% within 30 minutes after onset of focal ischemia.
- Sodium ion pumps fail - water goes in cells and can not diffuse – DW image gets bright (note – much later cells burst and stroke area gets very dark).

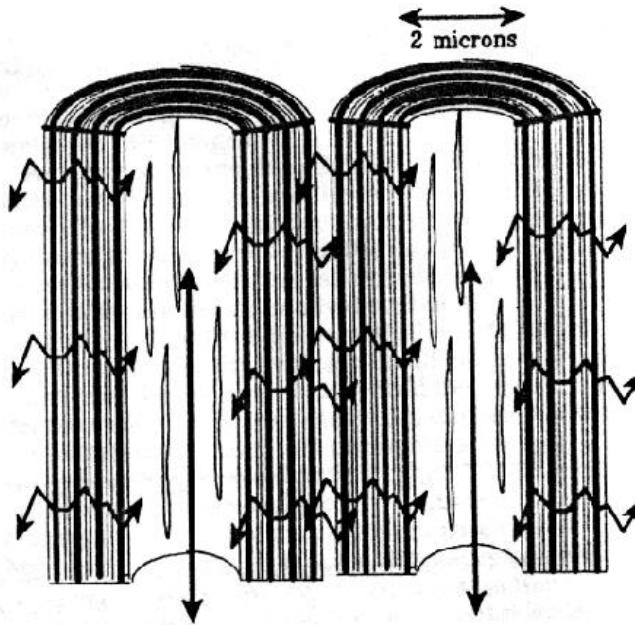
Conventional T2WI



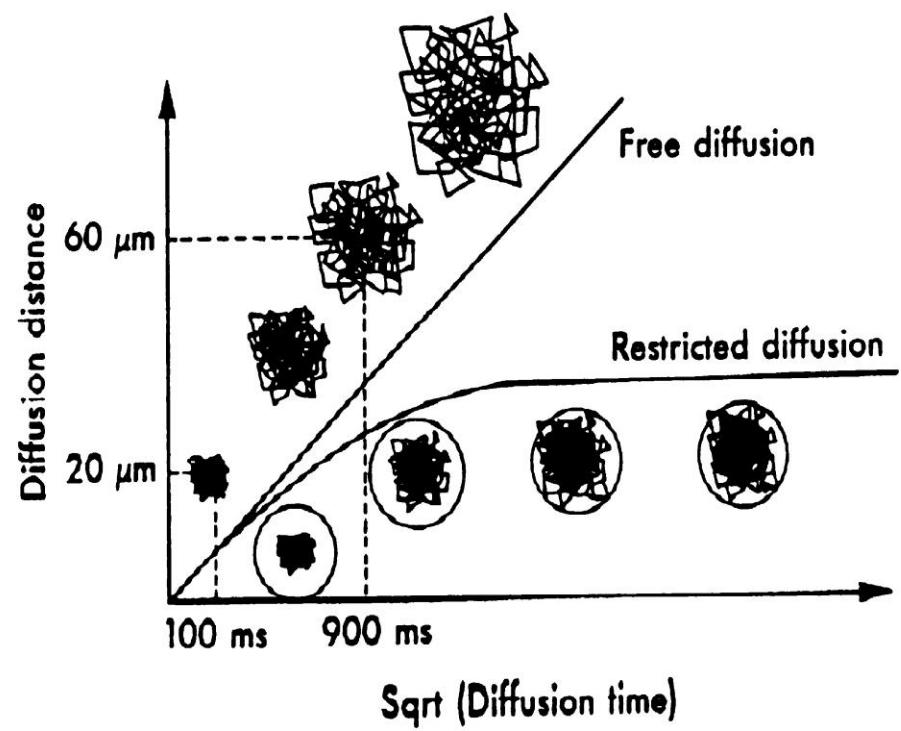
DW-EPI



# Diffusion anisotropy



$$D_{\parallel} = 1.2 \times 10^{-3} \text{ mm}^2/\text{s}$$
$$D_{\perp} = 0.4 \times 10^{-3} \text{ mm}^2/\text{s}$$

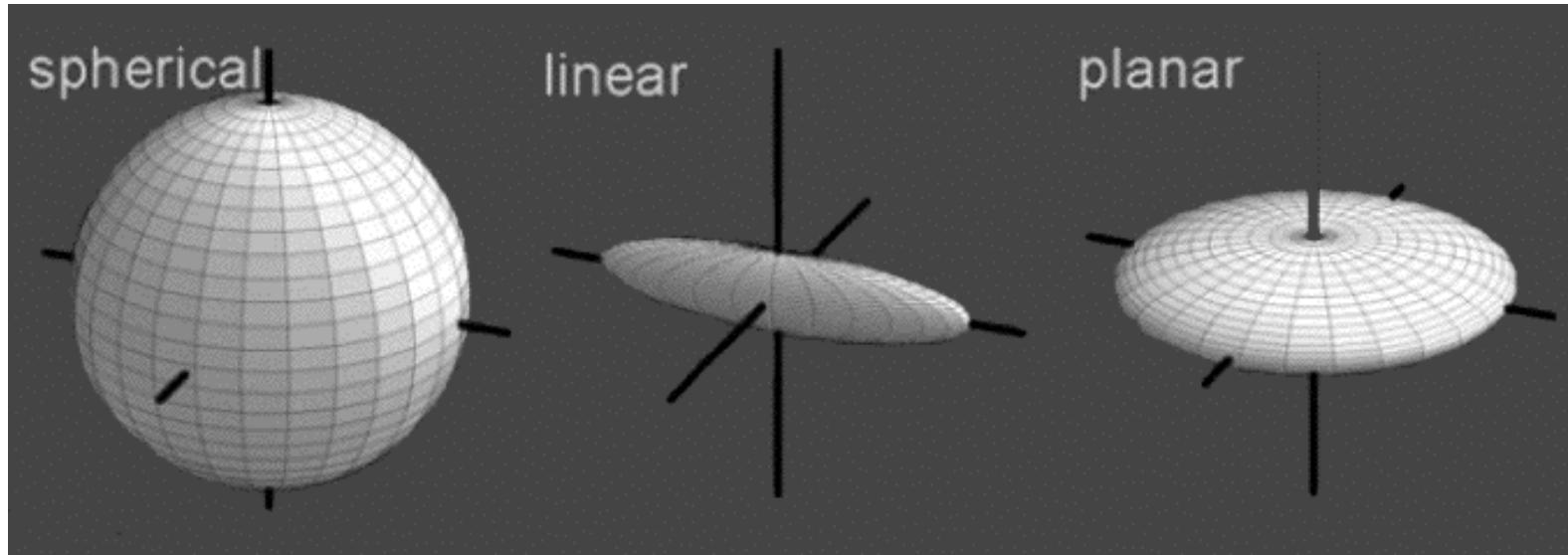


- Douek et al., JCAT 1991

# Tensor model for diffusion

isotropic

anisotropic



Courtesy: G. Kindlmann

$$\lambda_1 = \lambda_2 = \lambda_3$$

$$\lambda_1 > \lambda_2 \approx \lambda_3$$

$$\lambda_1 \approx \lambda_2 > \lambda_3$$

Eigenvectors define alignment of axes

# Diffusion tensor imaging (DTI)

Garrido et al. (Circ Res 1994) and Basser et al. (Biophys J 1994)

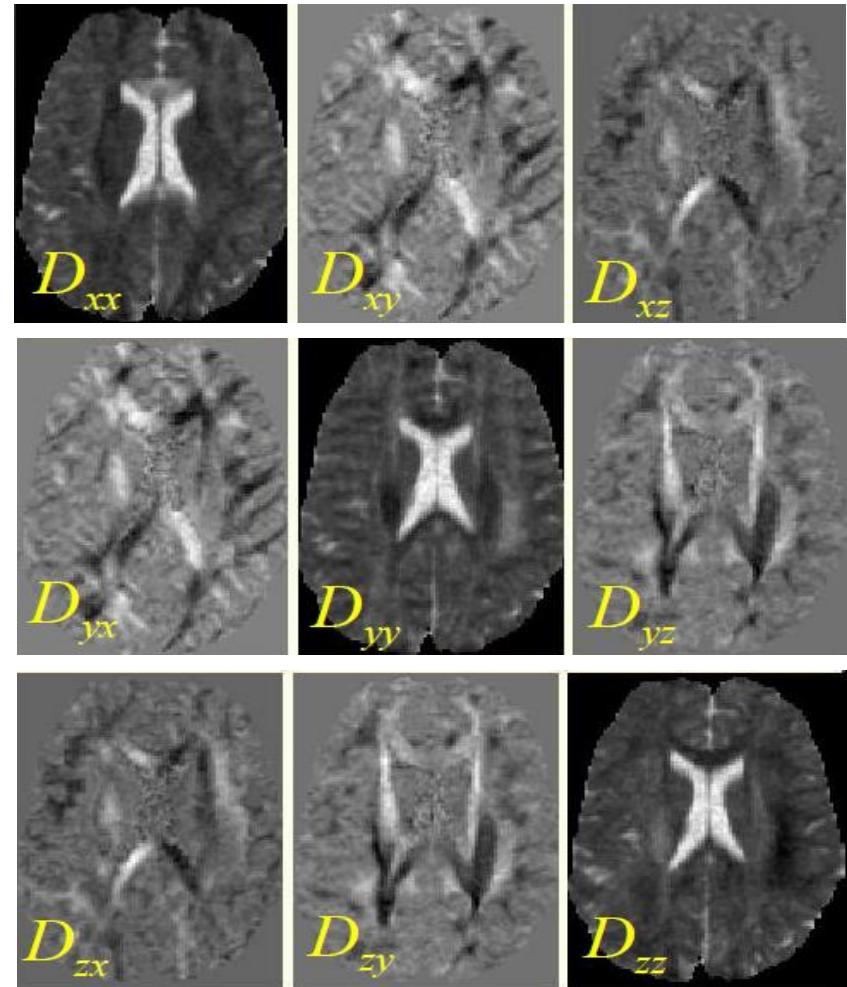
Diffusion-sensitive gradients

[1 1 0] [1 -1 0] [0 1 1] [0 -1 1]

[1 0 1] [-1 0 1]

$$\ln\left(\frac{S(\mathbf{q})}{S_0}\right) = - \int_0^{TE} \mathbf{q}(t')^T \tilde{\mathbf{D}} \mathbf{q}(t') dt' = -\mathbf{b} \tilde{\mathbf{D}}$$

$$\tilde{\mathbf{D}} = \begin{bmatrix} D_{xx} & D_{xy} & D_{xz} \\ D_{yx} & D_{yy} & D_{yz} \\ D_{zx} & D_{zy} & D_{zz} \end{bmatrix}$$

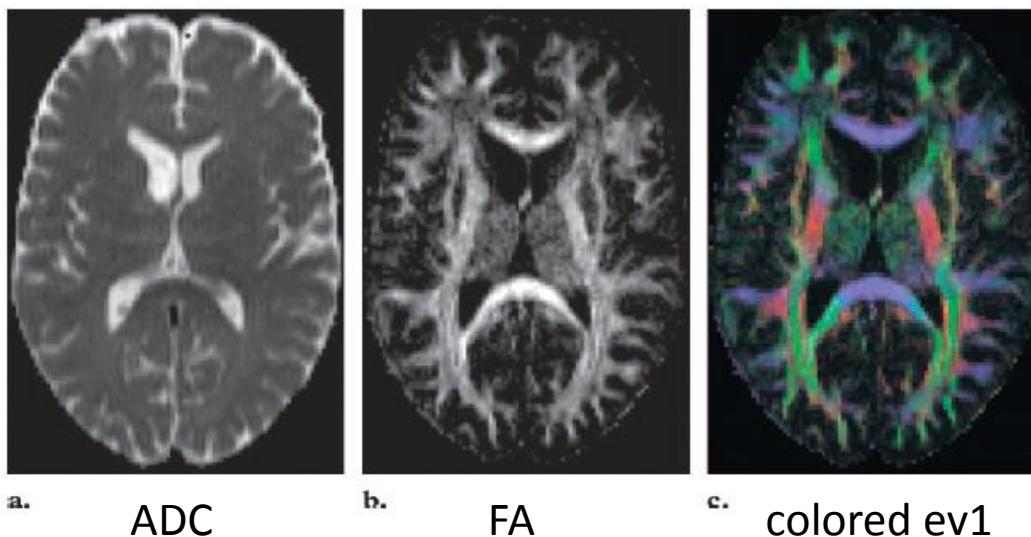


# Tensor invariants

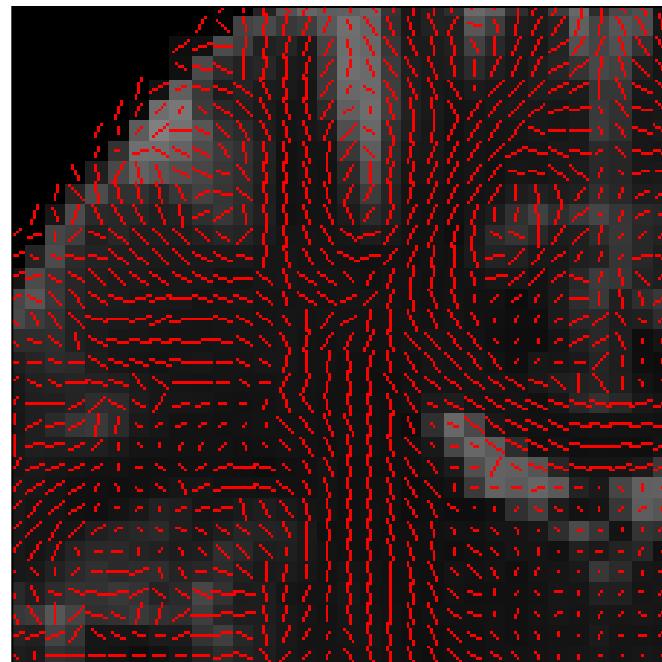
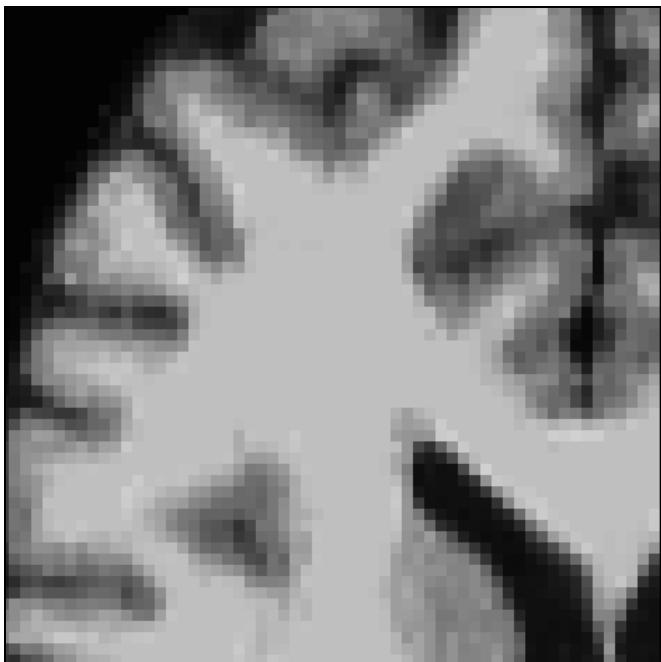
- Apparent diffusion coefficient (ADC)  $ADC = \frac{\lambda_1 + \lambda_2 + \lambda_3}{3}$
- Fractional anisotropy (FA)

$$FA = \sqrt{\frac{3}{2}} \times \sqrt{\frac{(\lambda_1 - trace)^2 + (\lambda_2 - trace)^2 + (\lambda_3 - trace)^2}{\lambda_1^2 + \lambda_2^2 + \lambda_3^2}}$$

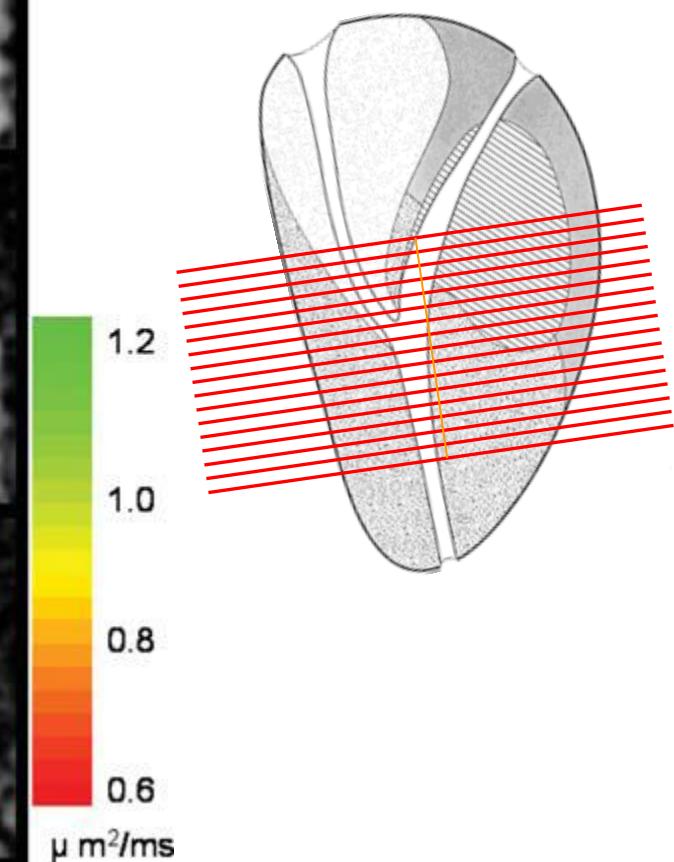
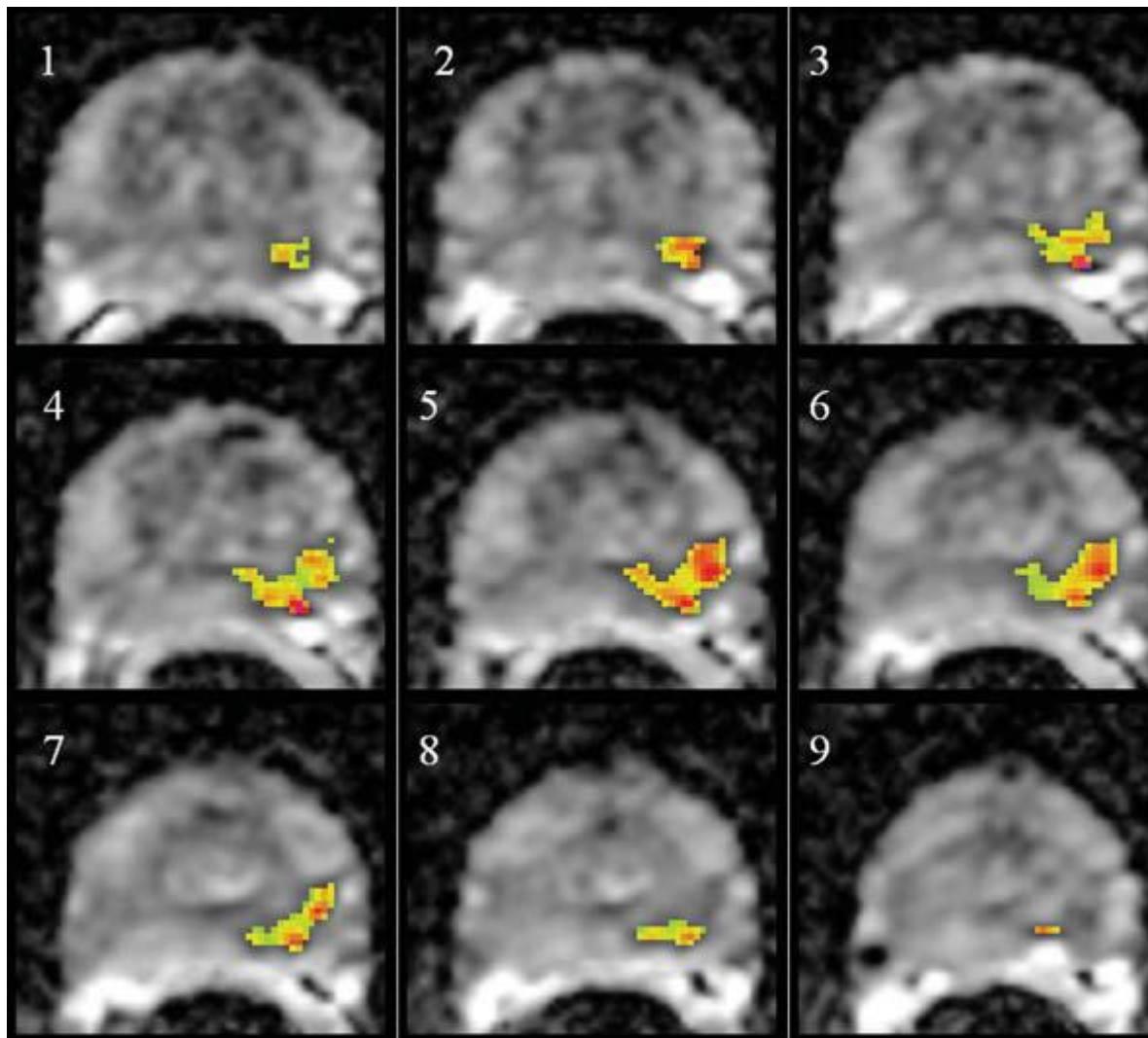
- Principal direction of diffusion tensor *1<sup>st</sup> eigenvector (ev1)*



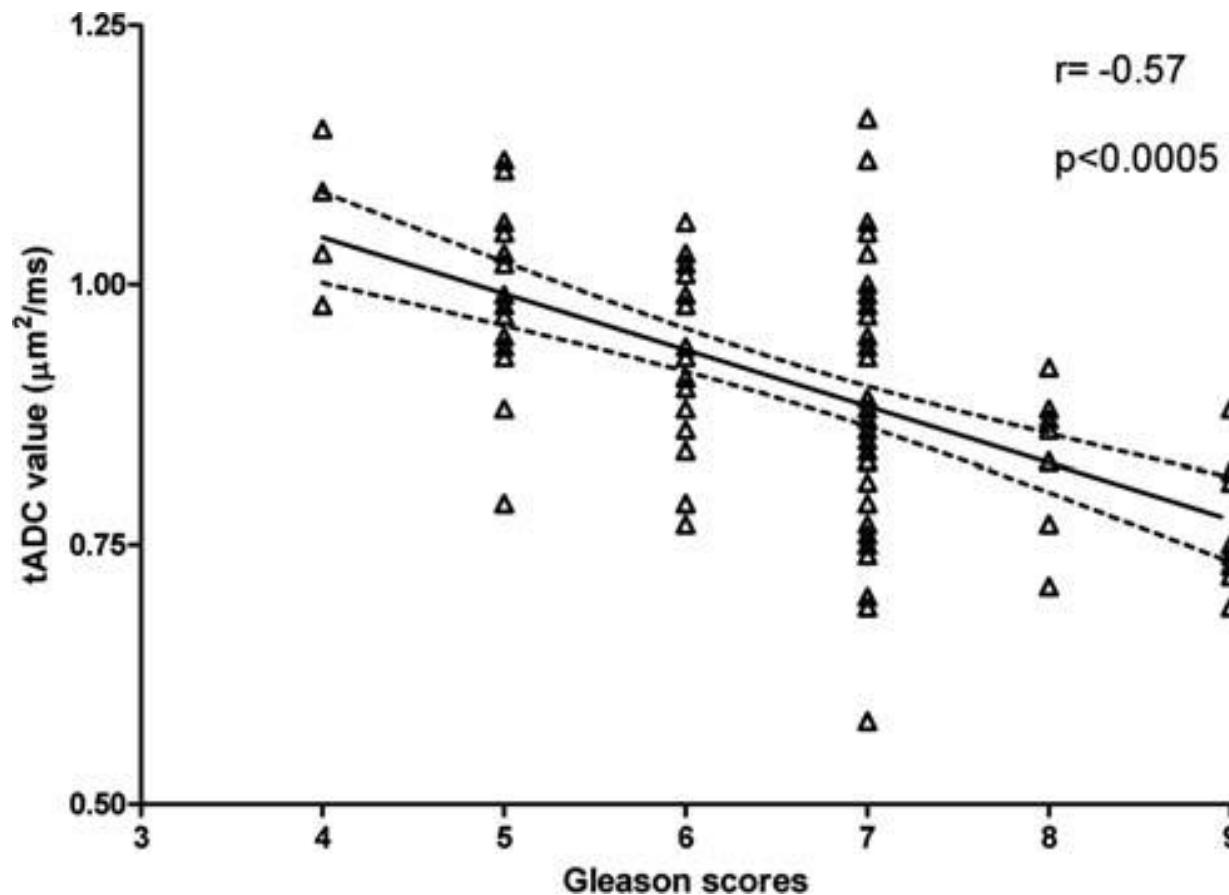
# First engenvector map



# Detection of prostate cancer by ADC

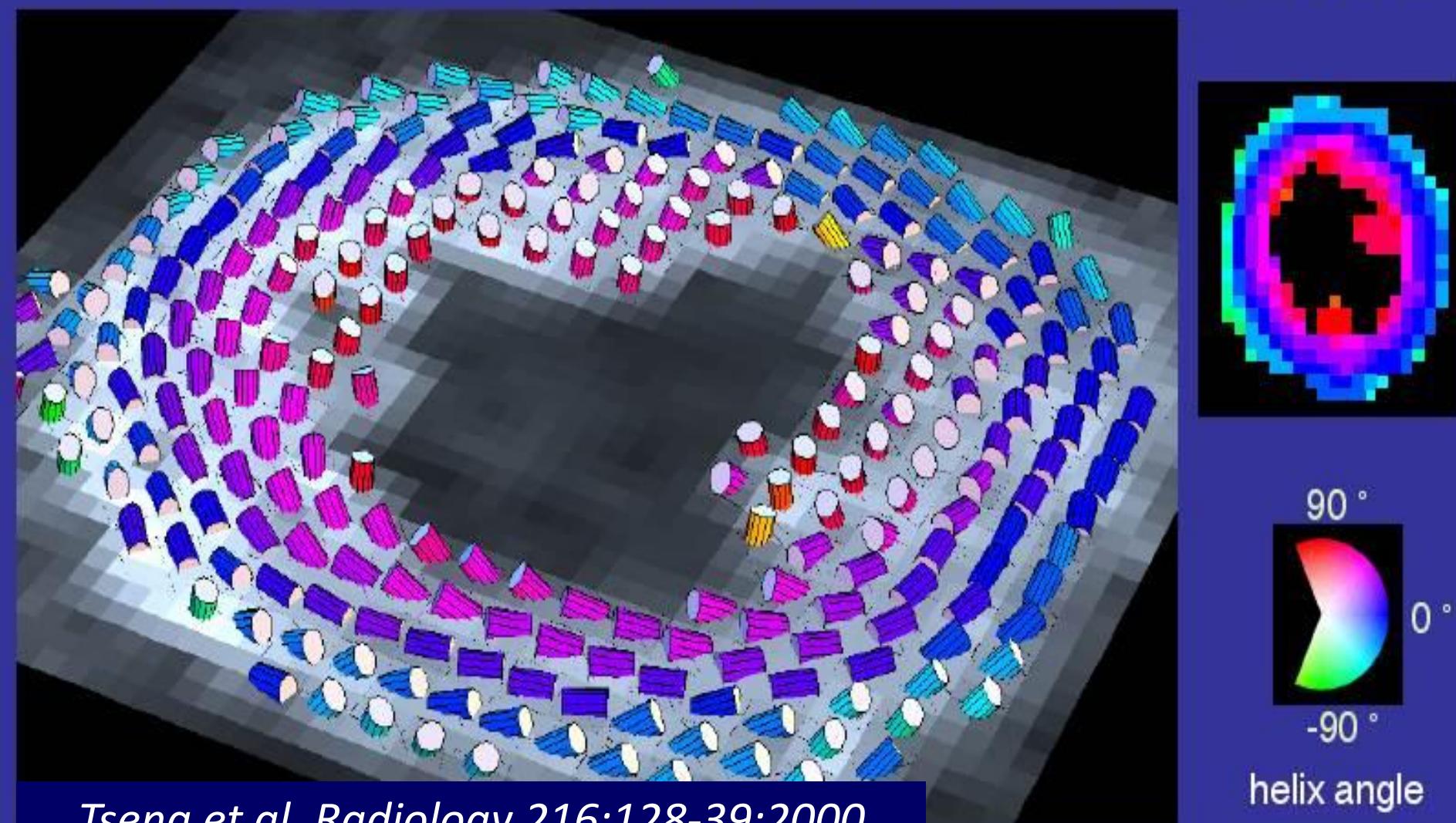


# ADC correlates with Gleason scores



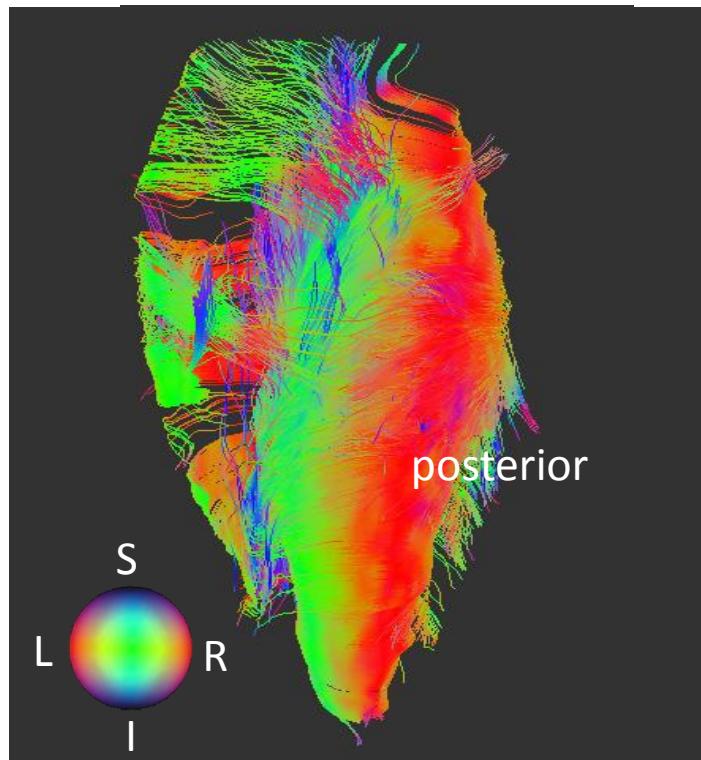
# Diffusion tensor MRI of normal myocardial fiber architecture

Fiber helix angles (color-code) increase smoothly from epi- to endocardium

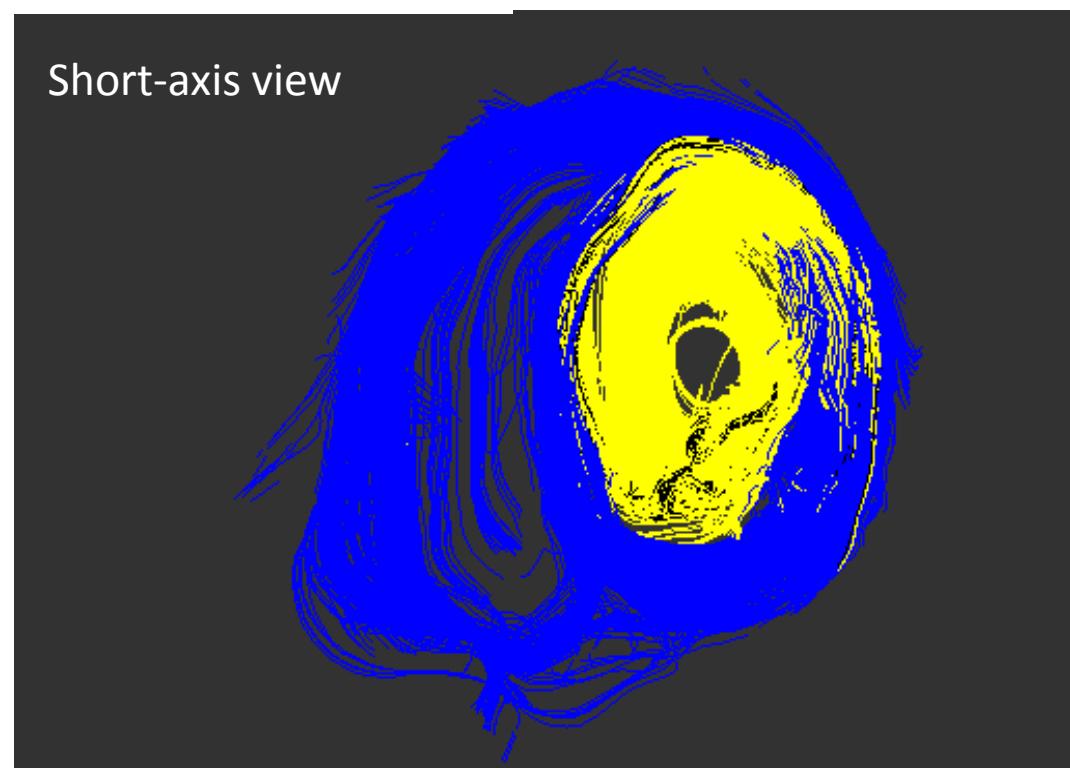


# Myocardial fiber architecture

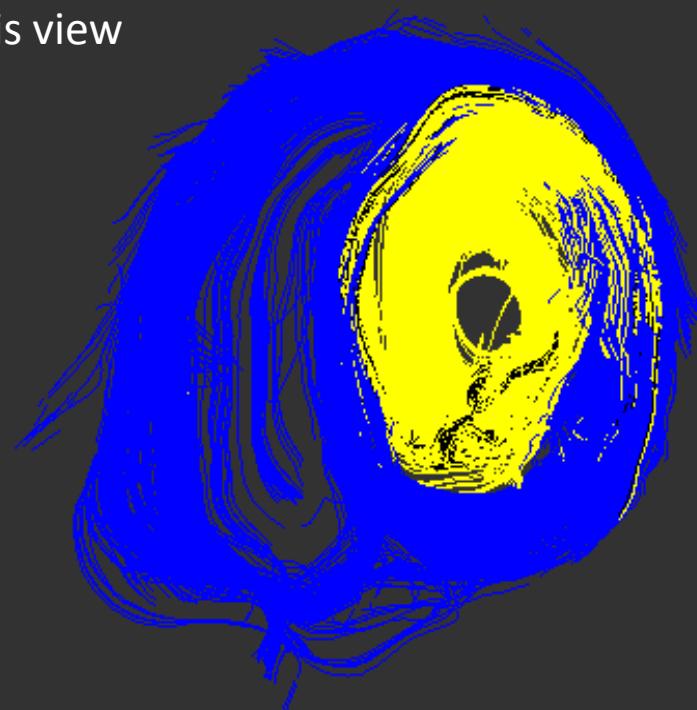
whole ventricle fibers



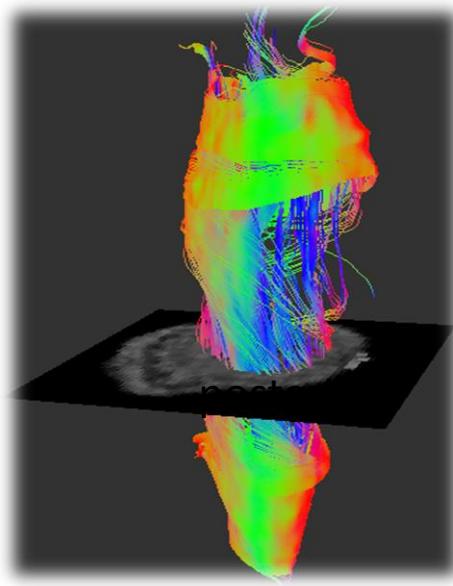
Inner heart



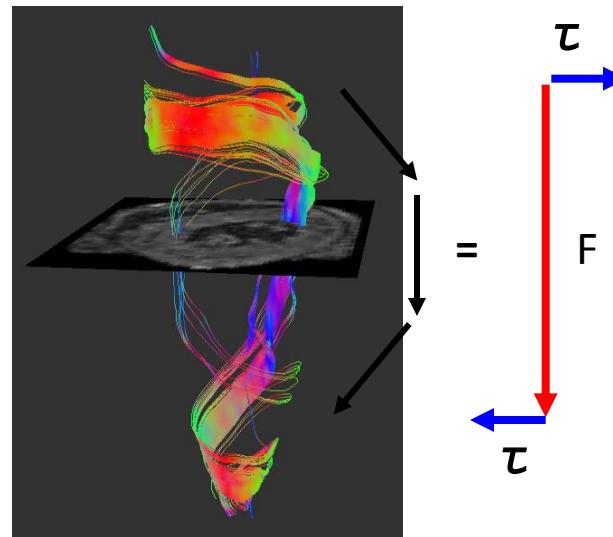
outer heart



# Motion of inner heart system



partial fibers of  
inner heart

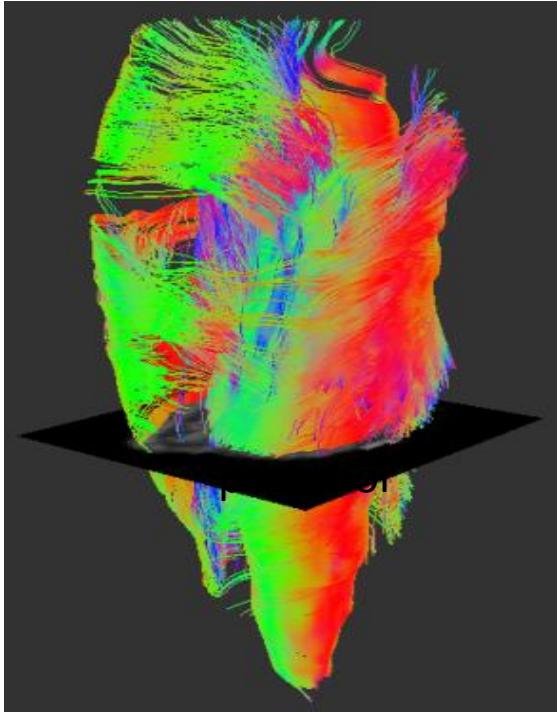


view from base

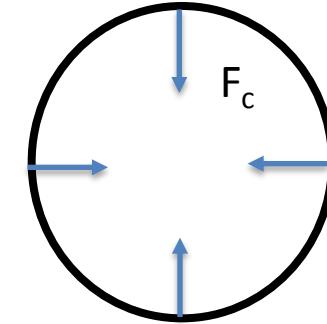
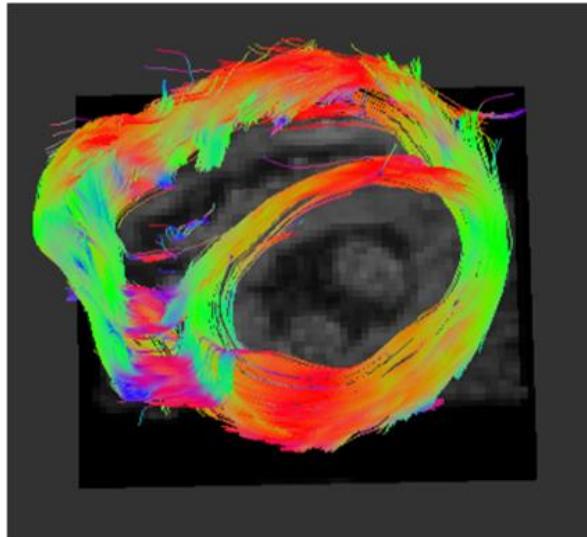


- Spiral fibers at Apex and Base might contribute to LV torsion  $\tau$
- Longitudinal fibers in the LV inner wall might contribute to longitudinal shortening  $F$

# Motion of outer heart system



view from base



Force of contraction  $F_c$

- Circumferential fibers connecting LV and RV might contribute to **radial contraction** of LV wall  $F_c$

strum is still present. Of the temporal areas, the superior temporal gyrus, 22, in itself a complex area, has a more conventional capsular connection, the stria fibers passing far back (D.J.) to enter the retroentorhinal capsule. The more caudal are markedly capsular and the more rostral ones have strong orbitofrontal connections (C, E). The inferior temporal gyrus, 20, has but few connections of any kind, while the middle gyrus, 21, is intermediate in character, but does cross-connect through the anterior commissure. The lenticular nucleus has dwindled but the thalamus has expanded, and the somesthetic nuclei are now in evidence. Ventralis posterior lateralis (VPL), the somesthetic nucleus, receives medial lemniscus fibers from the body and relays to the somesthetic receptive cortex, 3 and 1. A The ventralis posterior medialis (VPM), or arcuate nucleus, fits into

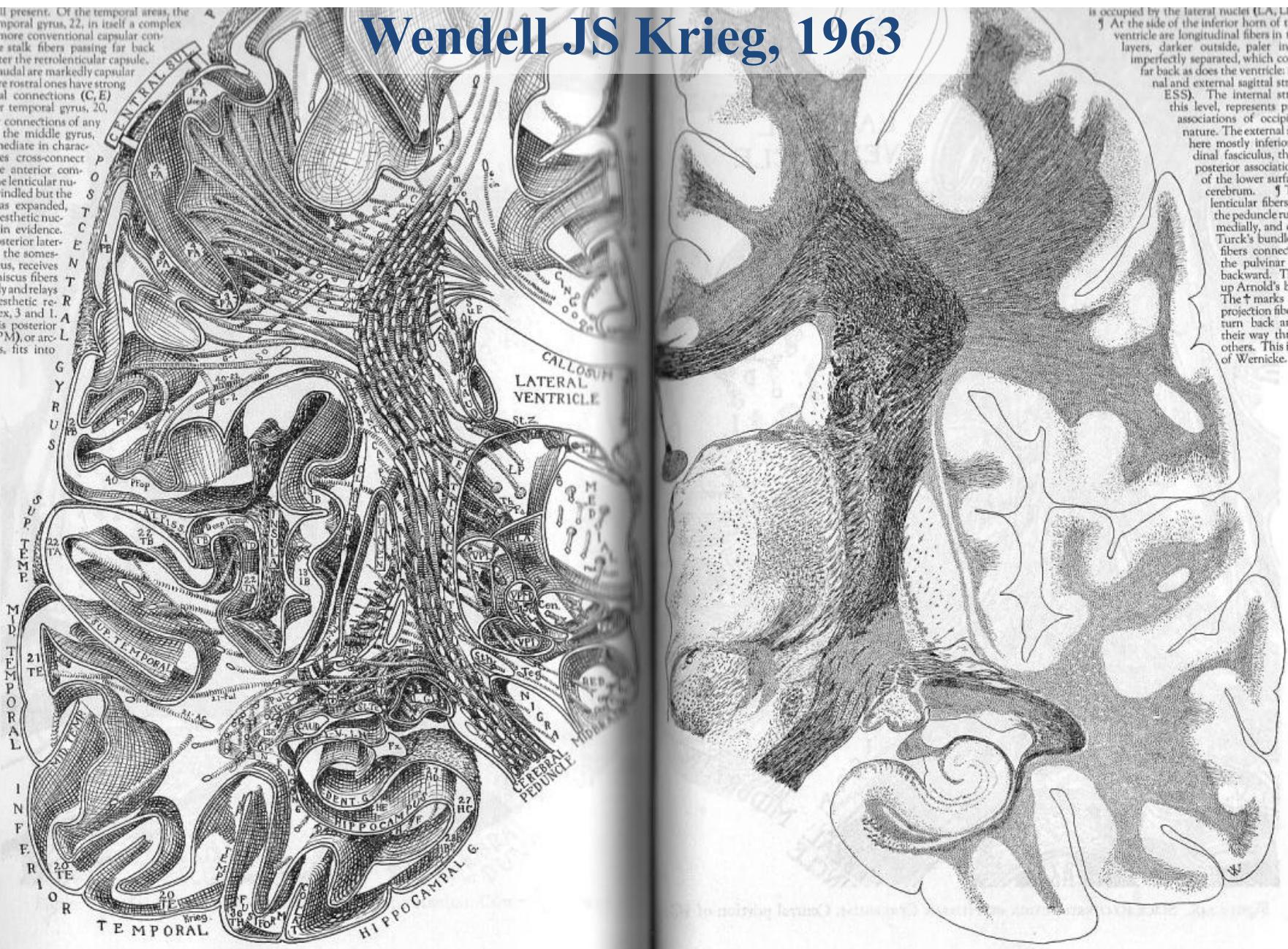
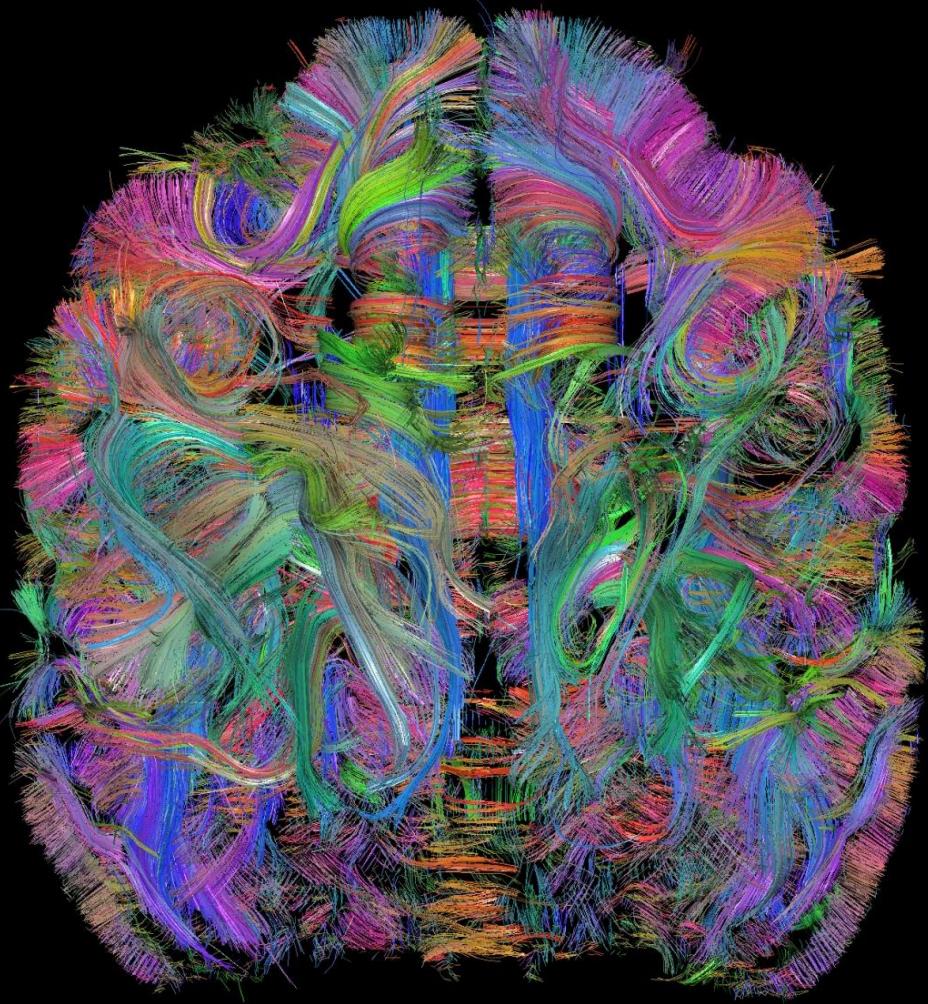


Figure 247. SLICE RECONSTRUCTION OF HUMAN CEREBRUM. §G.

is occupied by the lateral nucleus (L.A, LP, LD). At the side of the inferior horn of the lateral ventricle are longitudinal fibers in two layers, darker outside, paler inside, but imperfectly separated, which continue far back as does the ventricle; the internal and external sagittal strata (I.S. and E.S.). The internal stratum, at this level, represents principally associations of occipitofrontal nature. The external stratum, here mostly inferior longitudinal fasciculus, the antero-posterior associational layer of the lower surface of the cerebrum. The internal lenticular fibers that run the peduncle run straight medially, and constitute Turck's bundle (T). Fibers connecting ventrally the pulvinar continue backward. They make up Arnold's bundle. The T marks the optic projection fibers as they turn back and wind their way through others. This is the zone of Wernicke.

# Diffusion MRI



# Conventional MRI



Wedge, MGH-NMR

# Diffusion spectrum imaging

## 6D (q and k) Space Imaging

$$S(\mathbf{k}, \mathbf{q}) = \int \rho(\mathbf{r}) \exp(i 2\pi \mathbf{k} \cdot \mathbf{r}) \int P(\mathbf{r}, \mathbf{R}) \exp(i 2\pi \mathbf{q} \cdot \mathbf{R}) d\mathbf{R} d\mathbf{r}$$

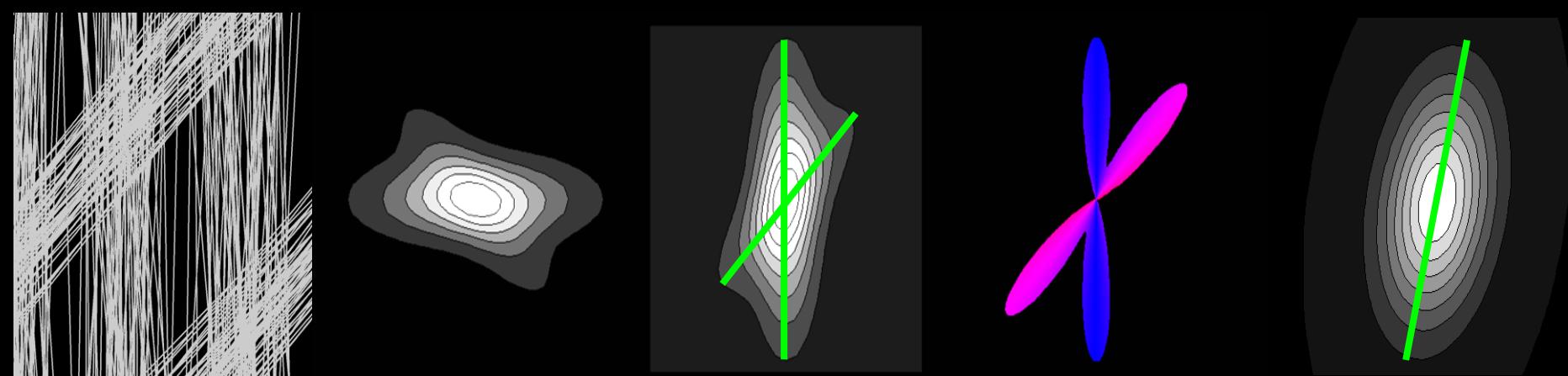
tissue  $I(x)$

$E(q)$

$P(r) = FT(E)$

$ODF(u) = \int r^2 P dr$

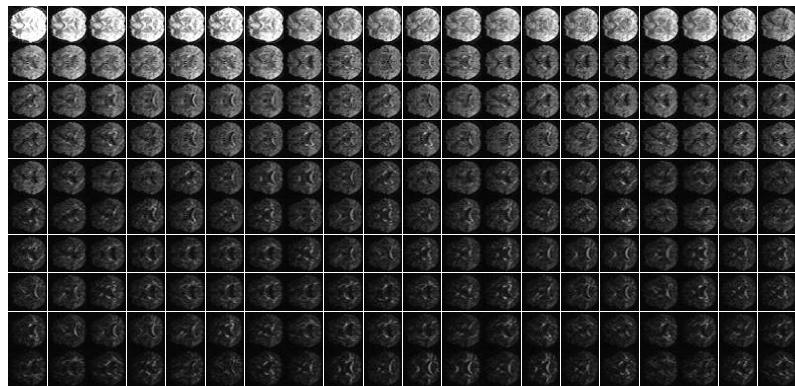
tensor



Probability  
density function

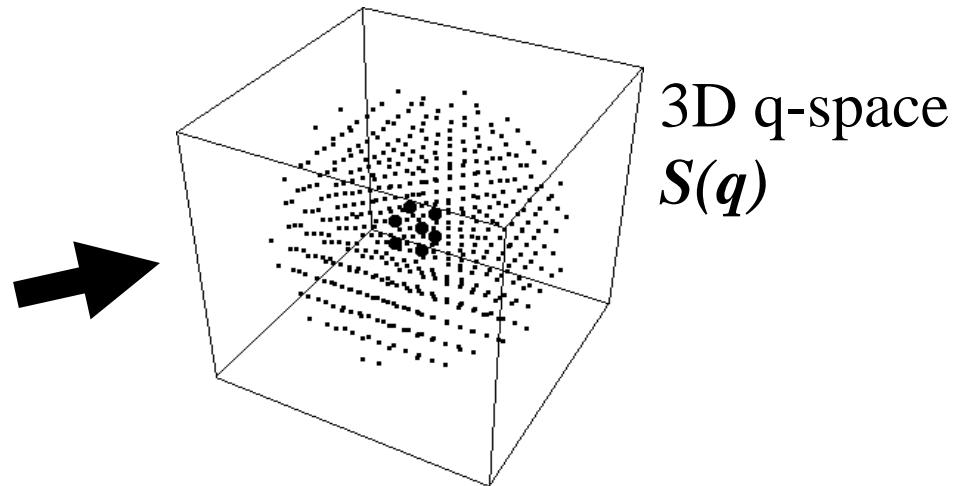
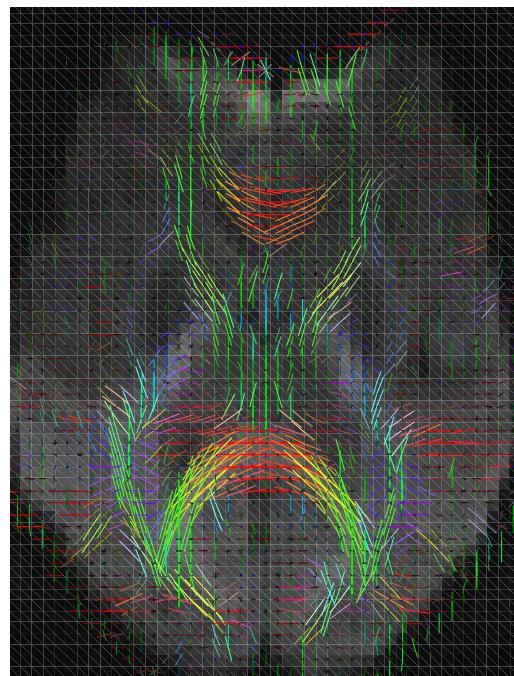
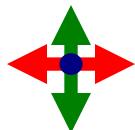
Orientation  
distribution function

# DSI acquisition scheme

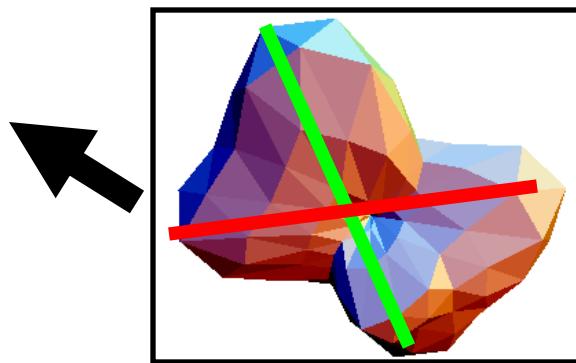
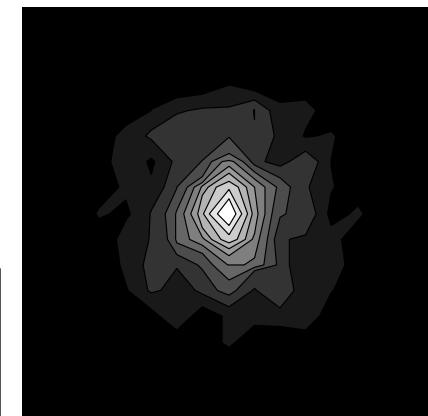


*Diffusion weighted image*

**DSI**

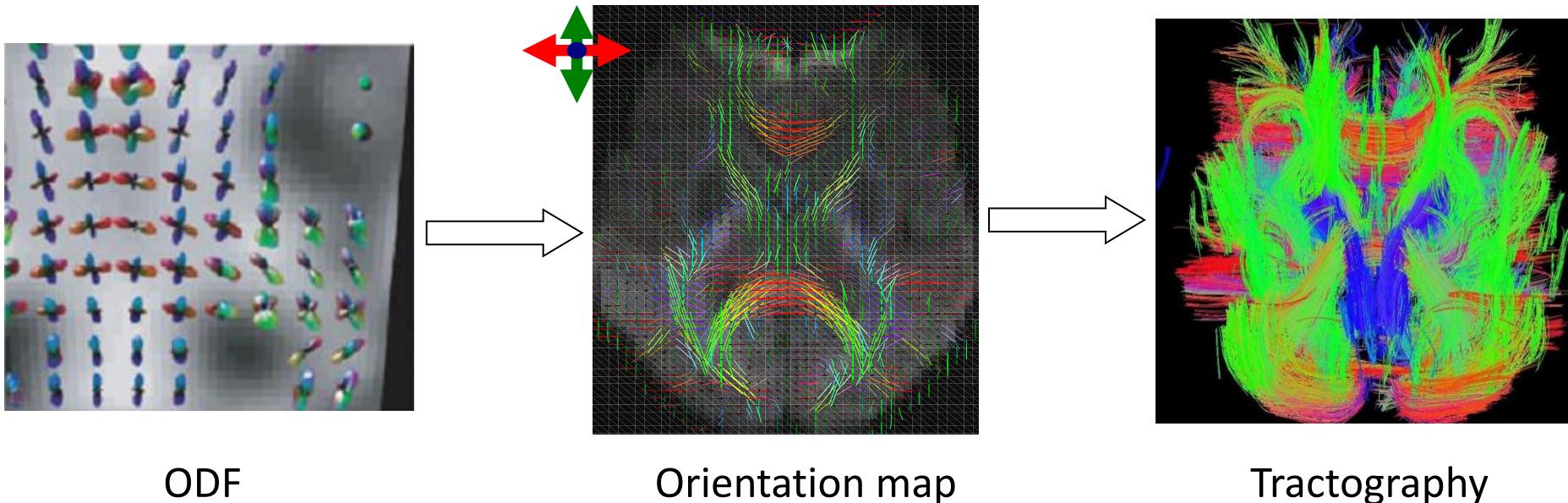


*Fourier  
Transform*



*Orientational Distribution Function (ODF)*

# How can we assess white matter integrity from local diffusion information?

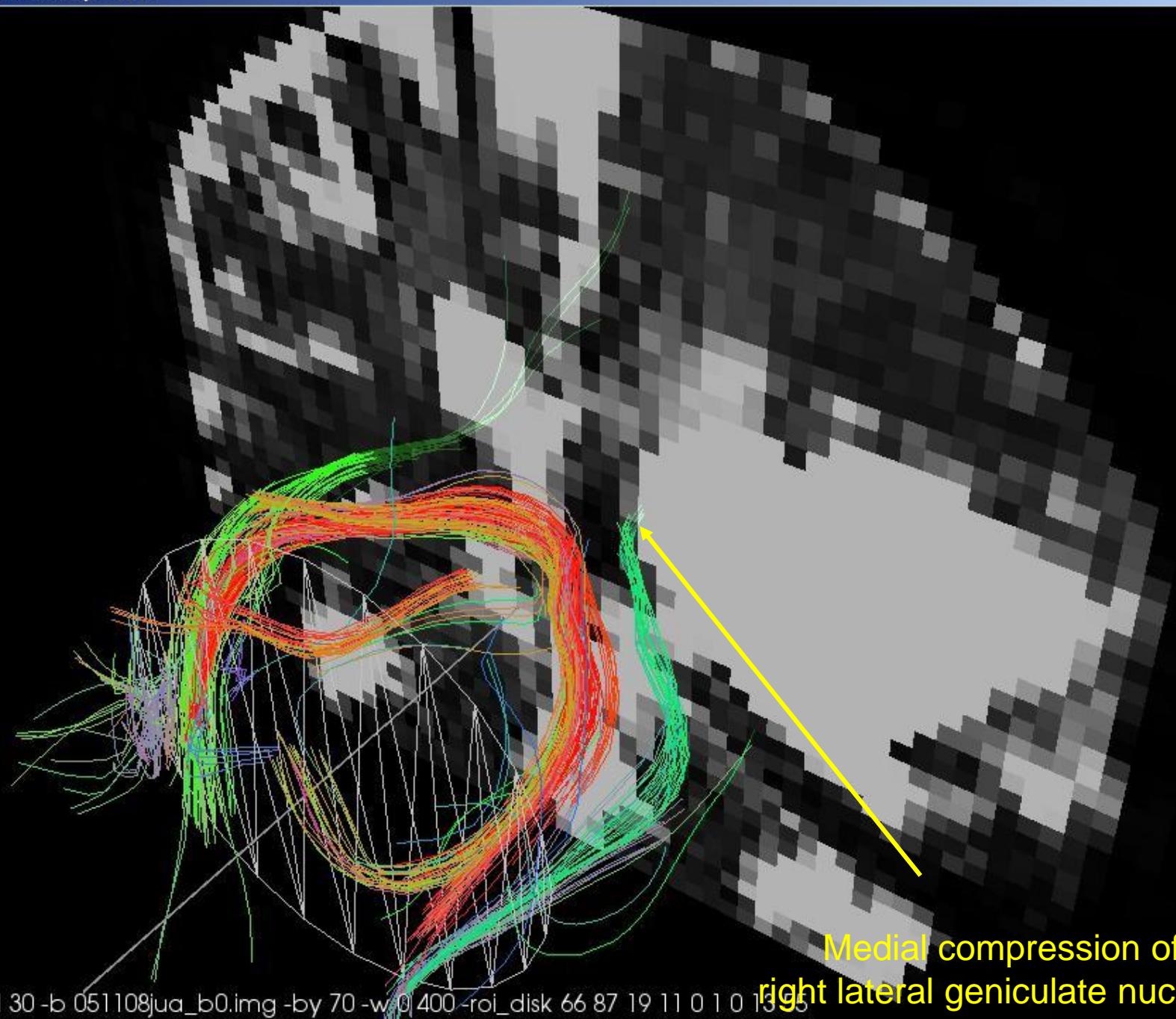


ODF

Orientation map

Tractography

Tractography was used to generate connection paths between points in the brain based on local diffusion direction

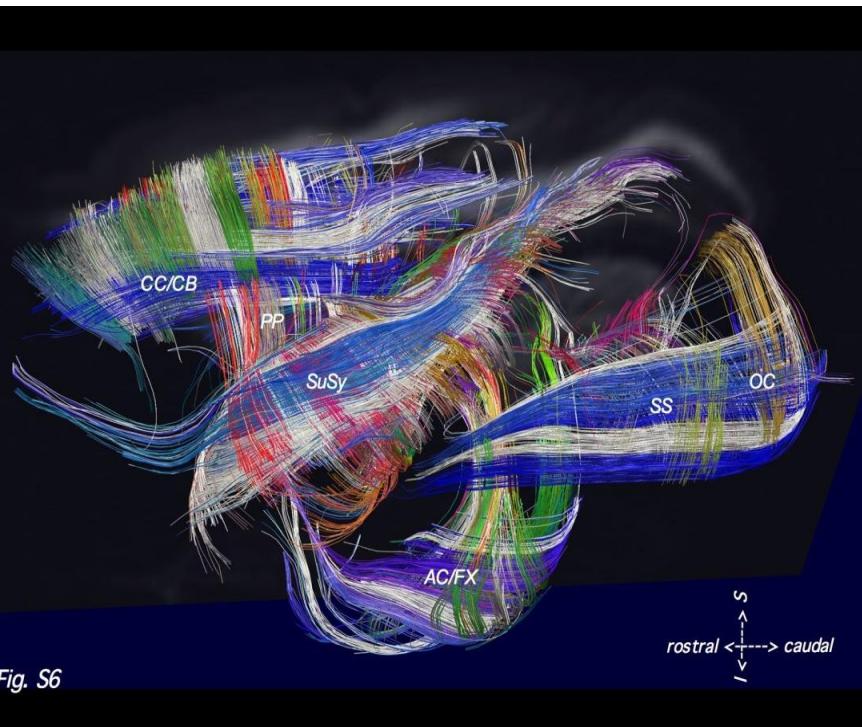


Medial compression of the  
right lateral geniculate nucleus

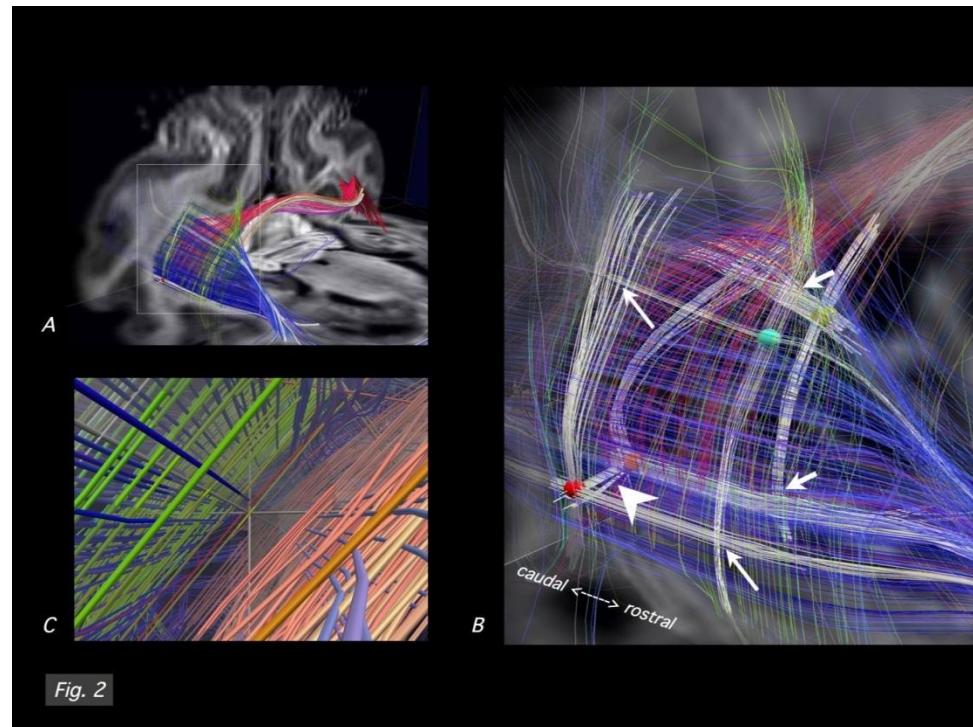
051108ua.trk -l 30 -b 051108ua\_b0.img -by 70 -w 0 400 -roi\_disk 66 87 19 11 0 10 13 5

# The Geometric Structure of the Brain Fiber Pathways

Wedgeen et al. *Science* 2012;335:1628-34

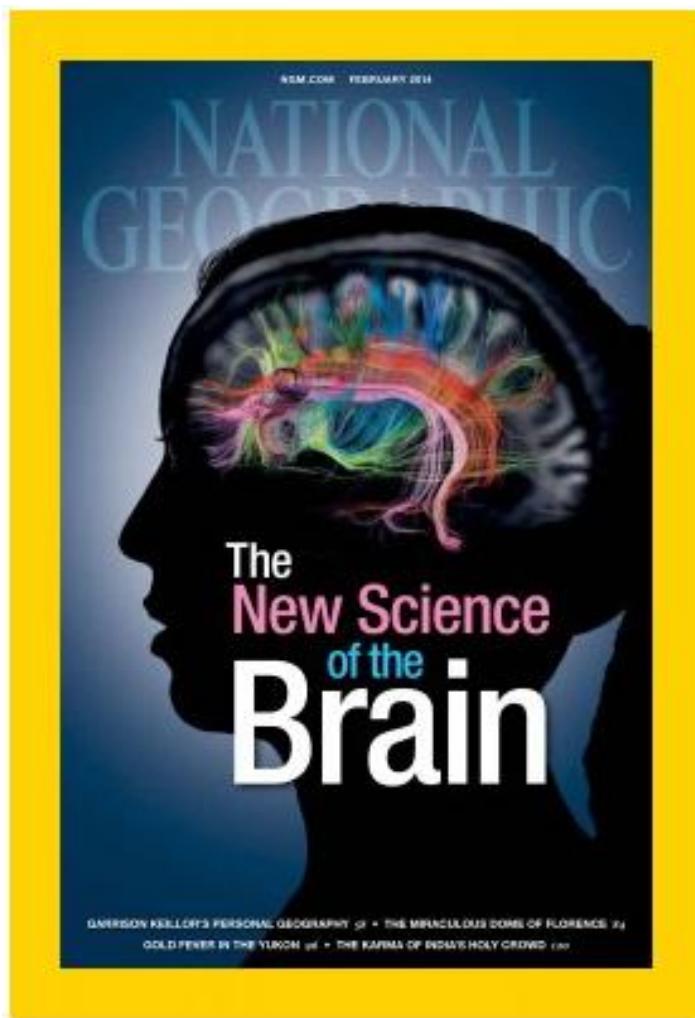
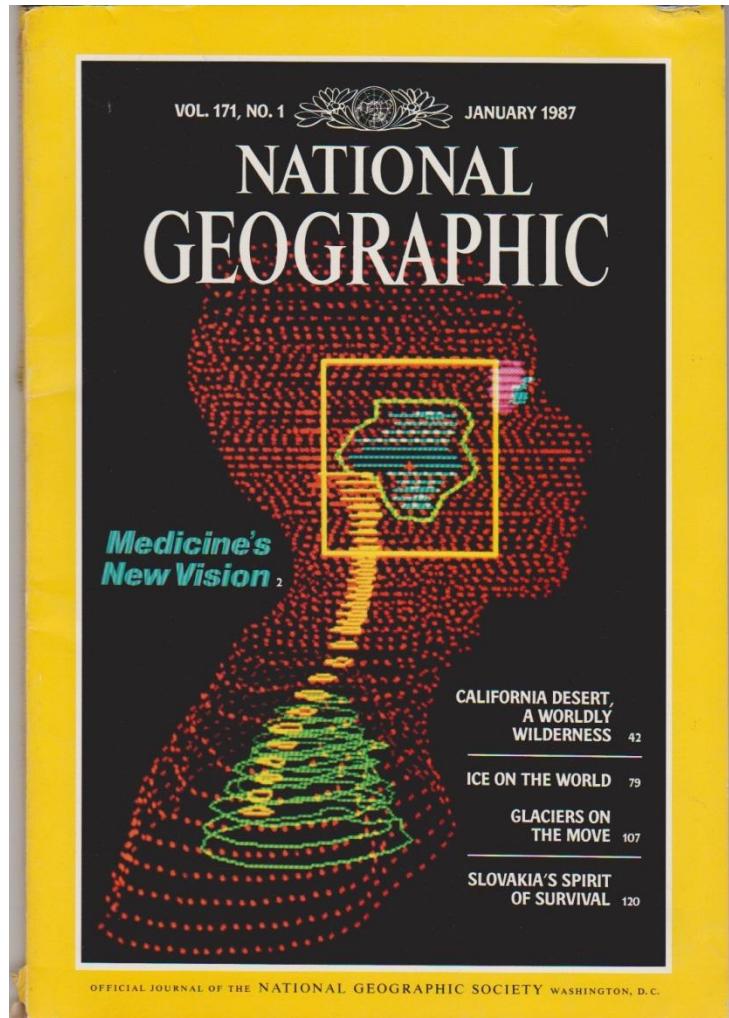


The 3D grid structure in an owl monkey brain

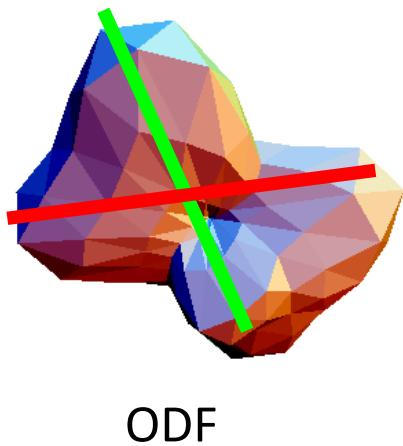


Close-up view of the grid structure in the caudal brain

# Fiber grid pattern: also found in human brain



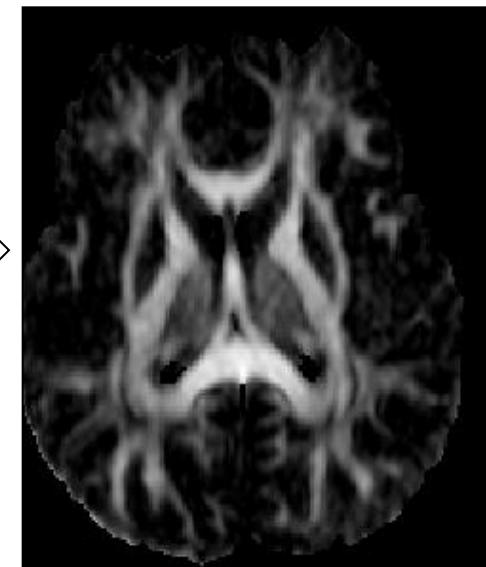
# Quantify fiber integrity



$$\longrightarrow \text{GFA} = \text{SD (ODF)}/\text{RMS (ODF)} \longrightarrow$$

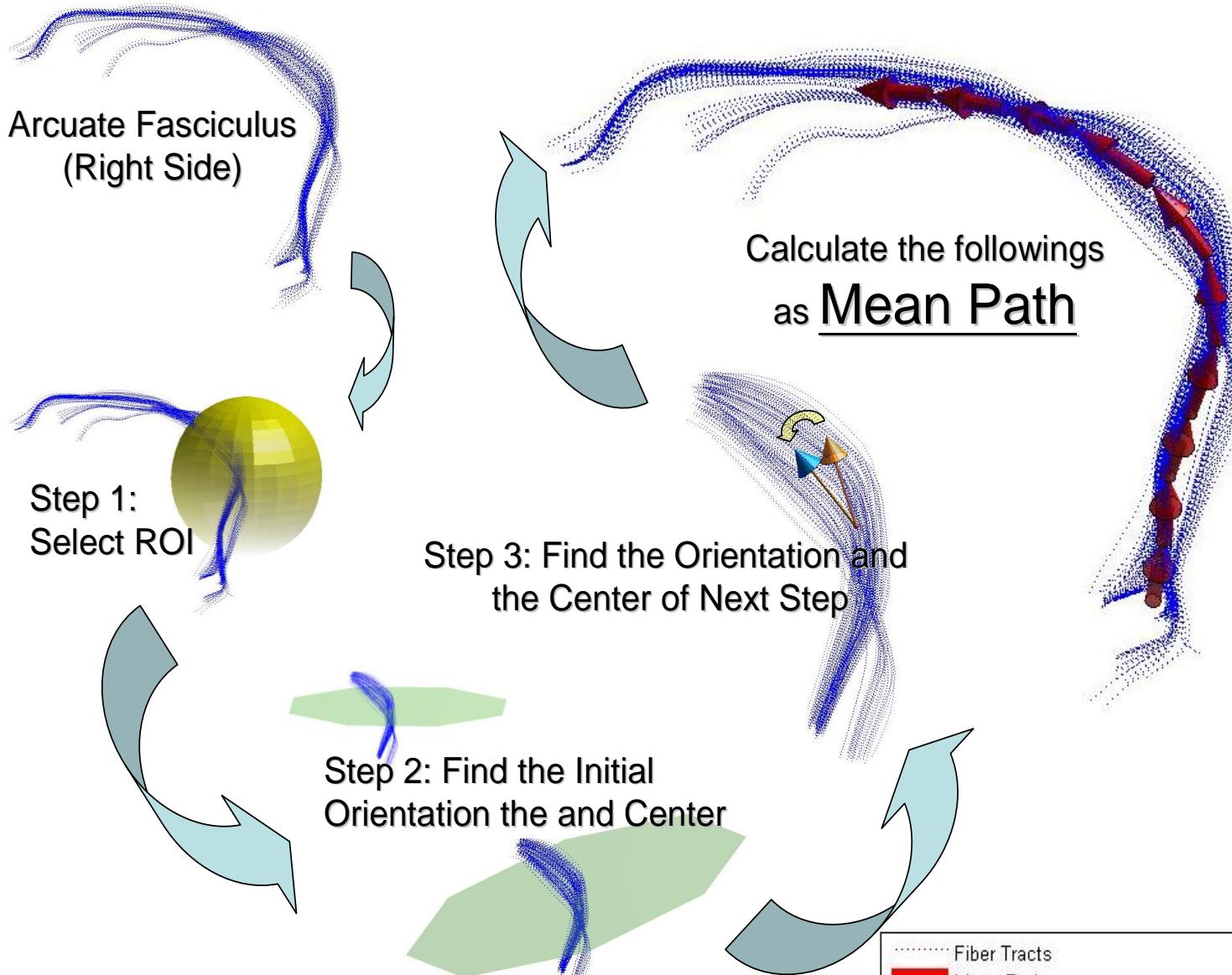
Generalized fractional anisotropy  
Calculated from the ODF

- Degree of myelination
- Directional coherence
- Axonal diameter and density



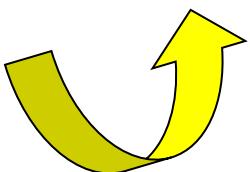
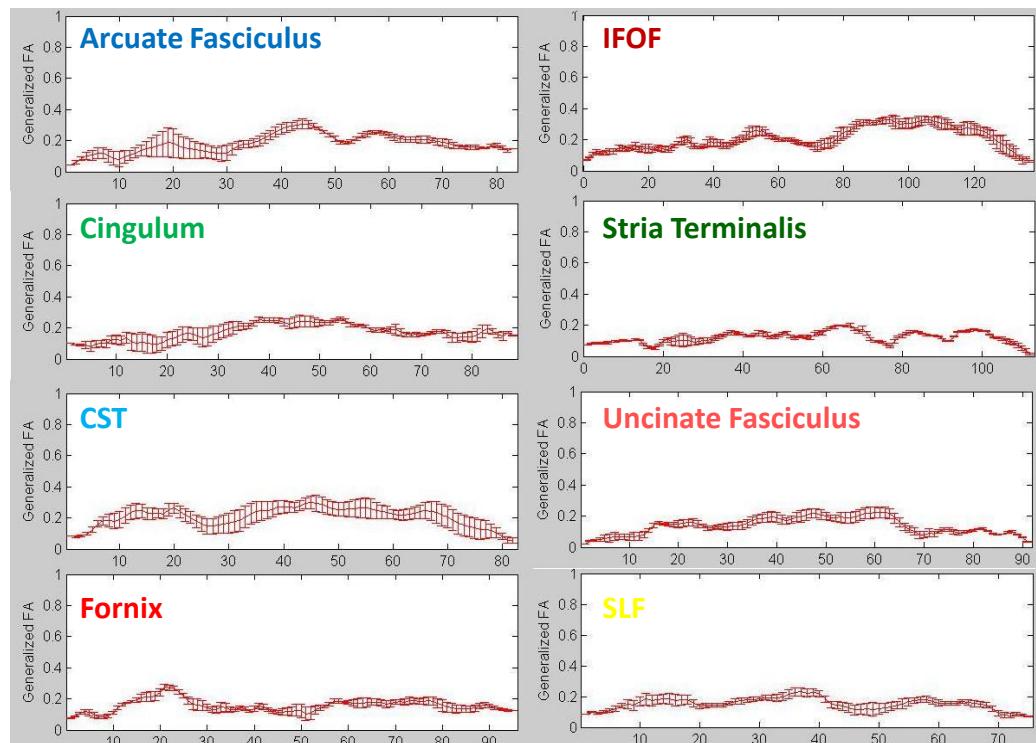
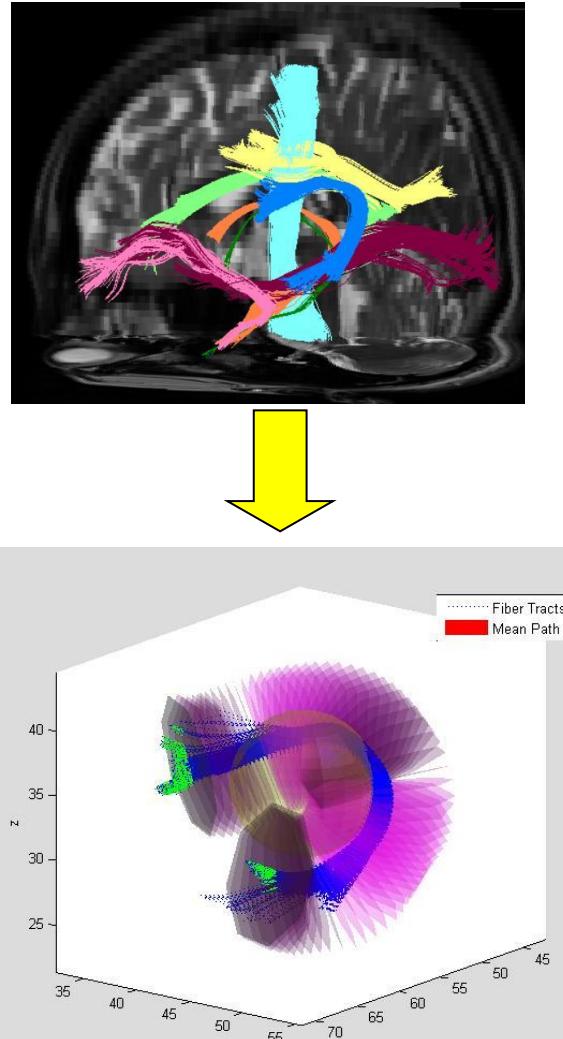
GFA mapping

# Mean Path Algorithm



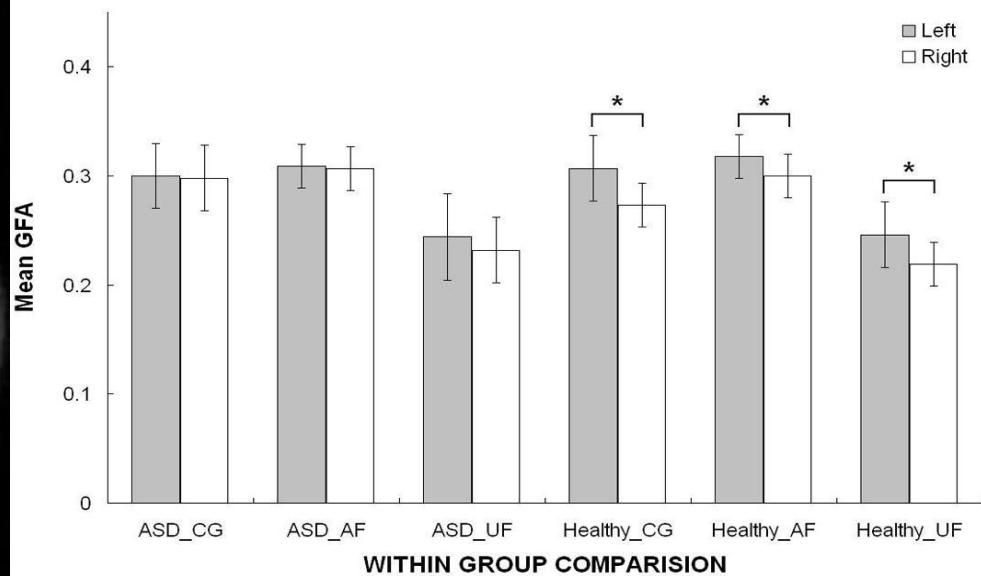
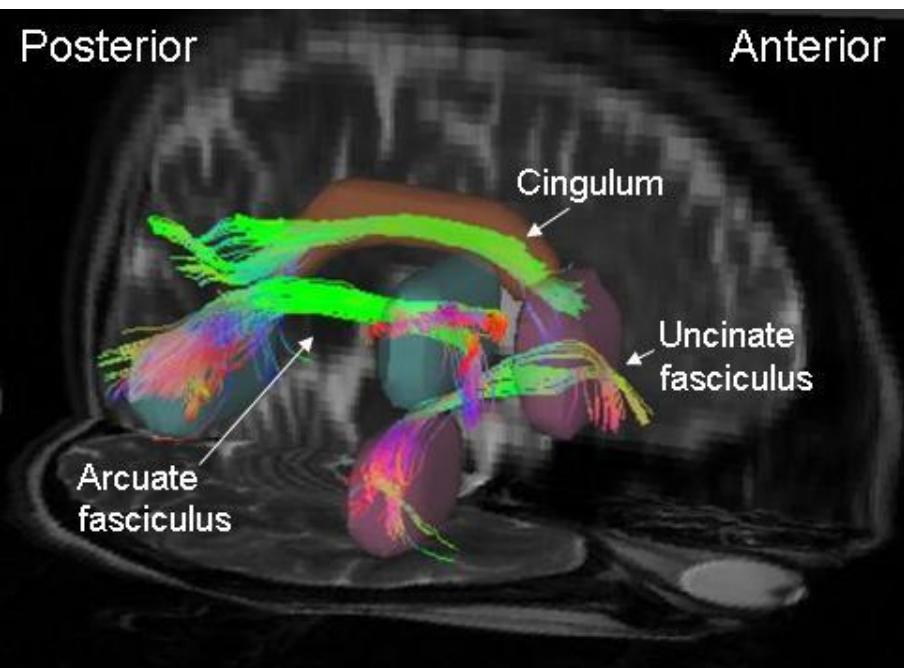
# Tract-specific analysis

A

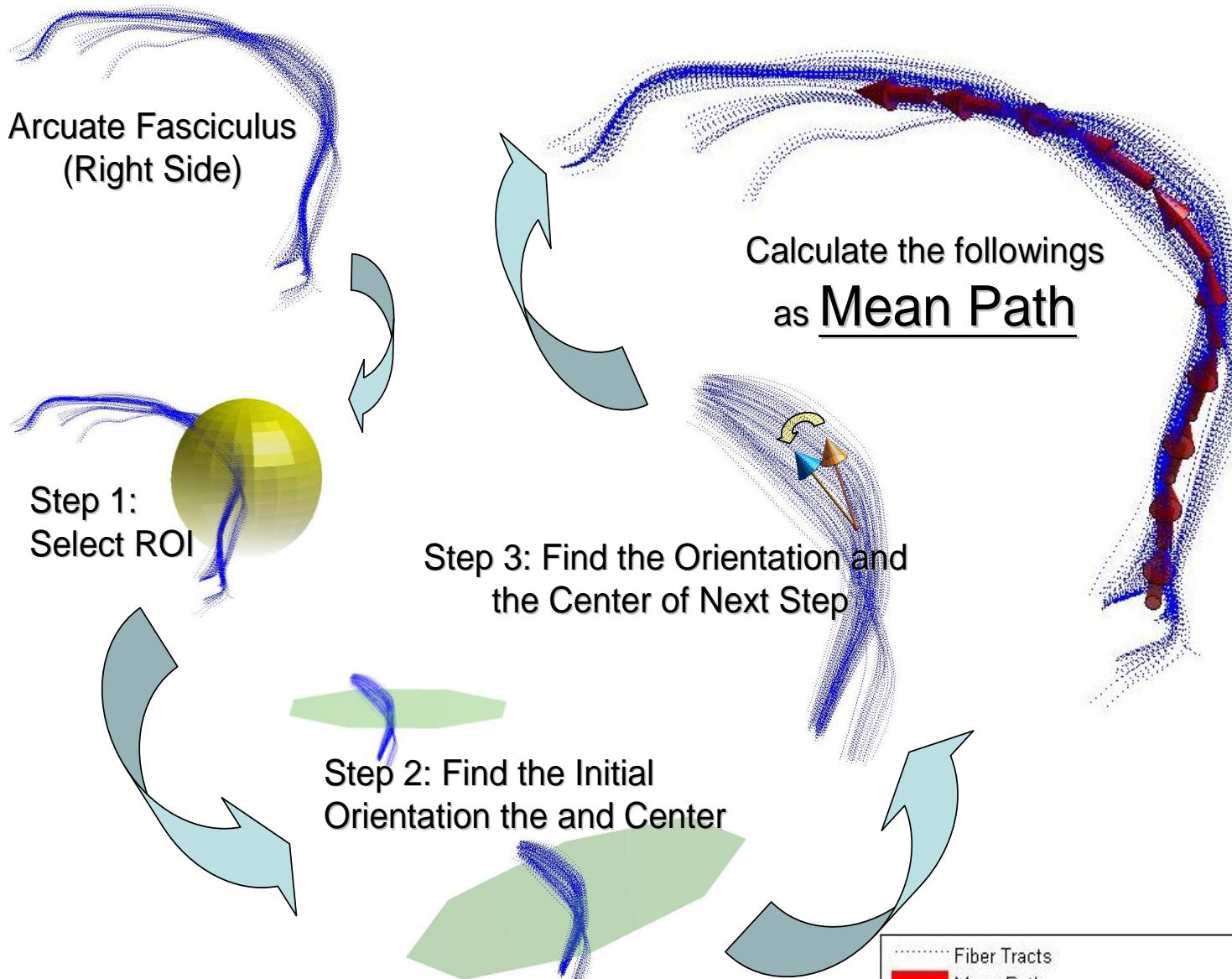


GFA profiles for each fiber tract

# Loss of left-greater-than-right asymmetry in autism

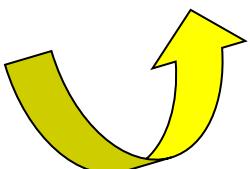
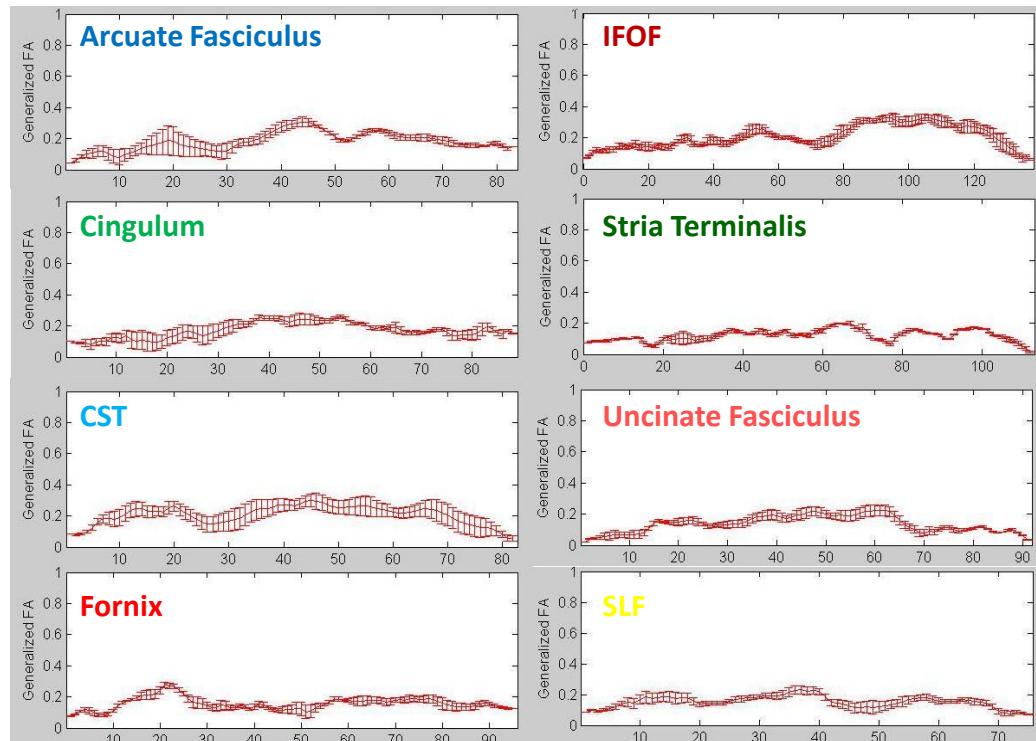
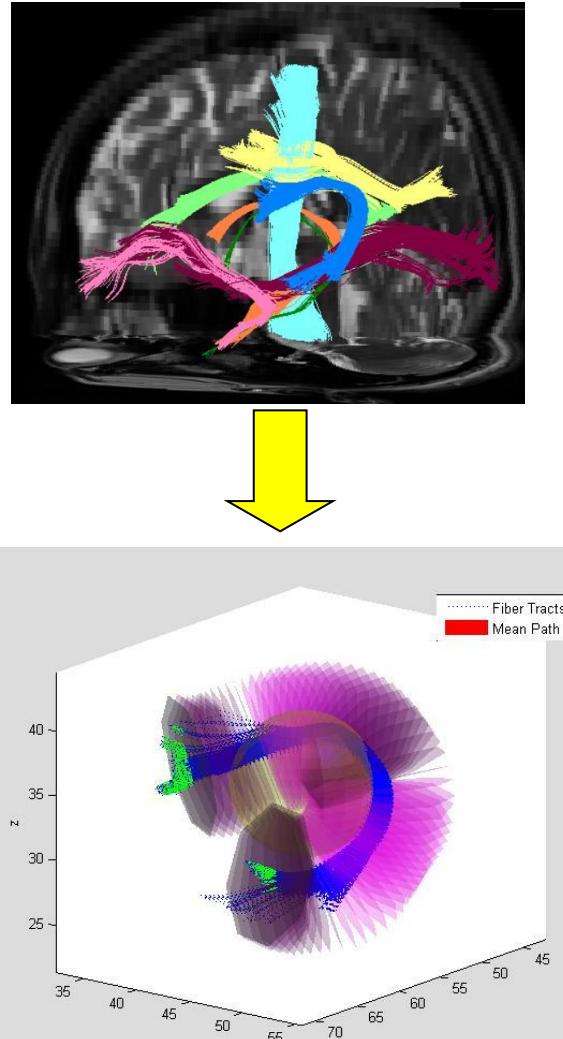


# Mean Path Algorithm



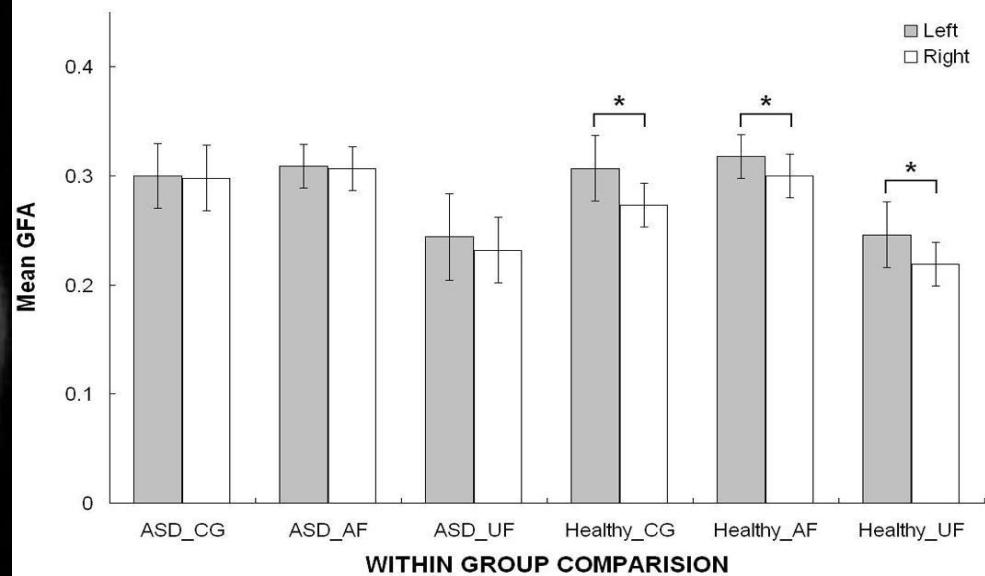
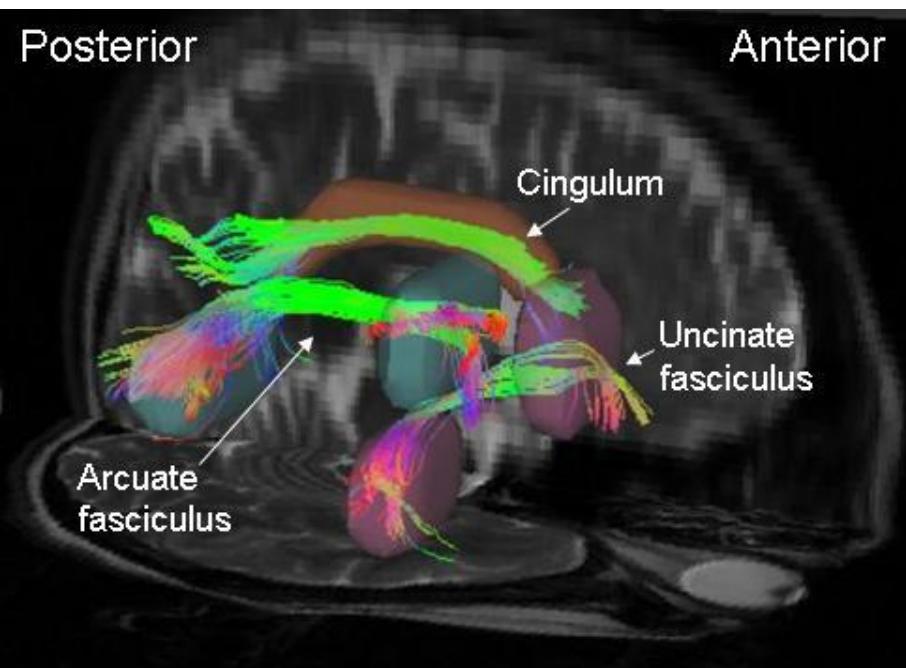
# Tract-specific analysis

A



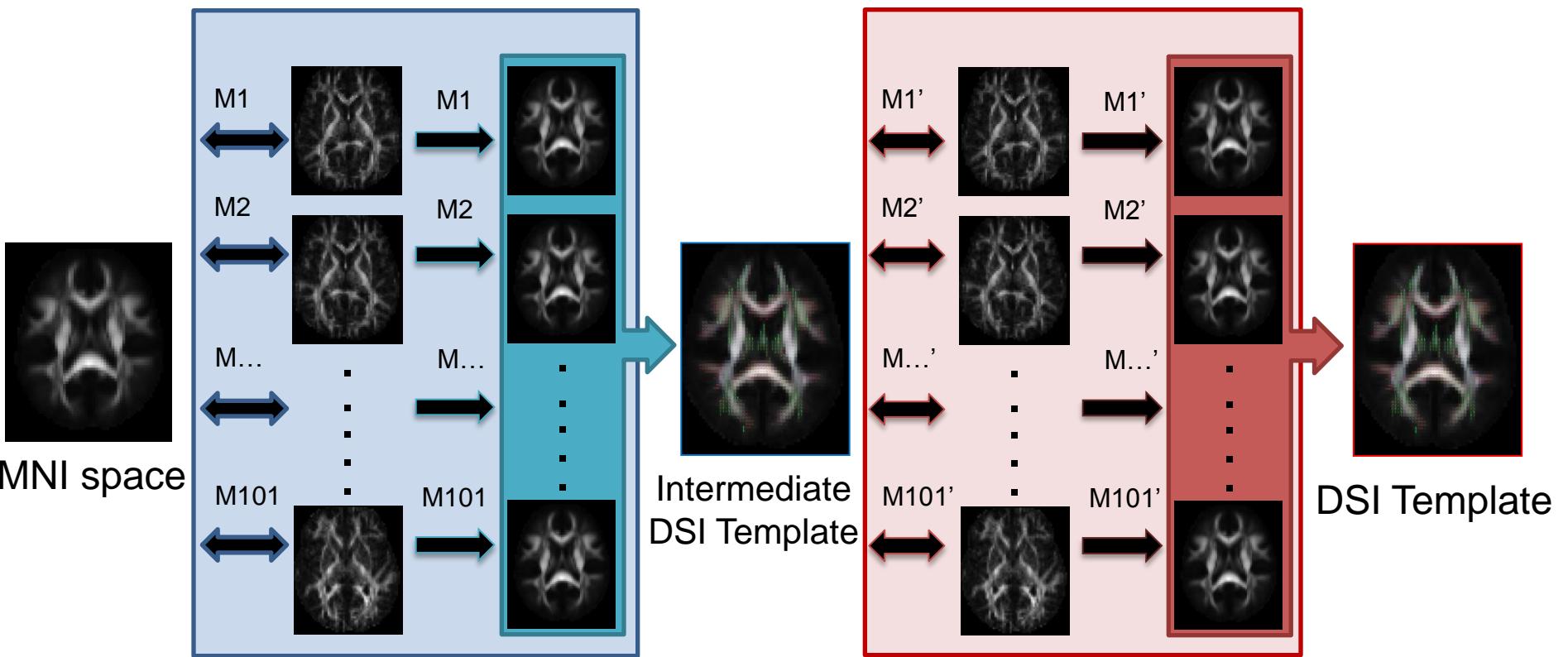
GFA profiles for each fiber tract

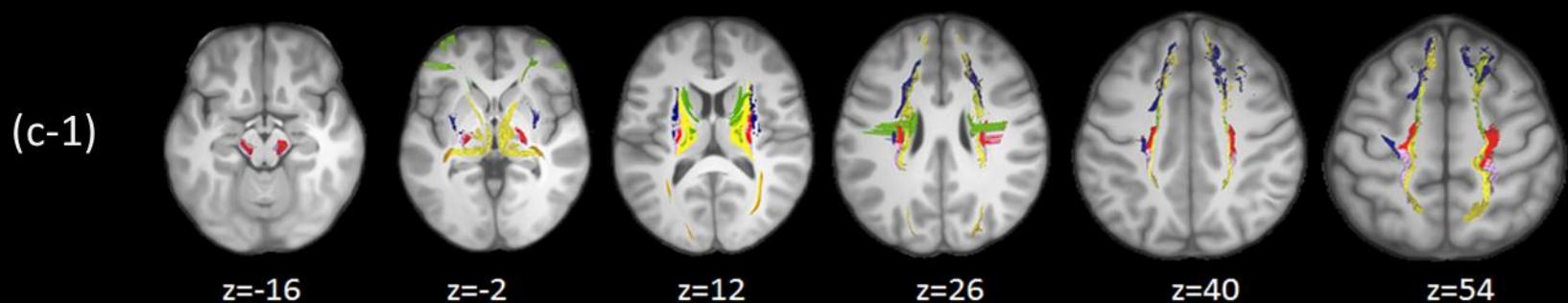
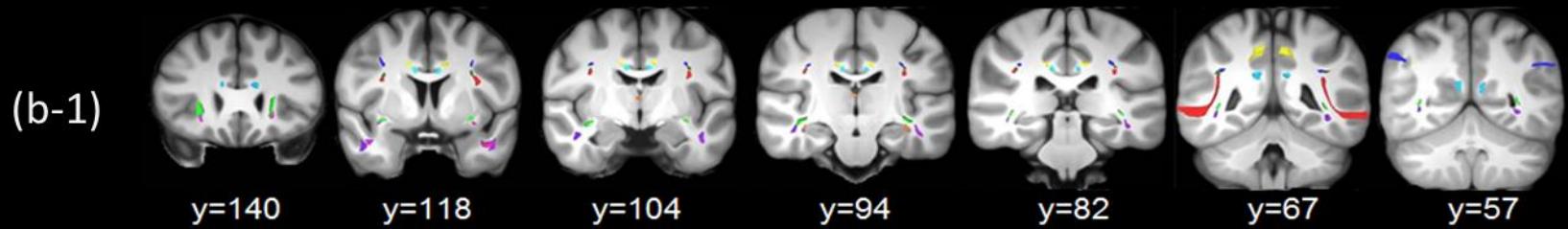
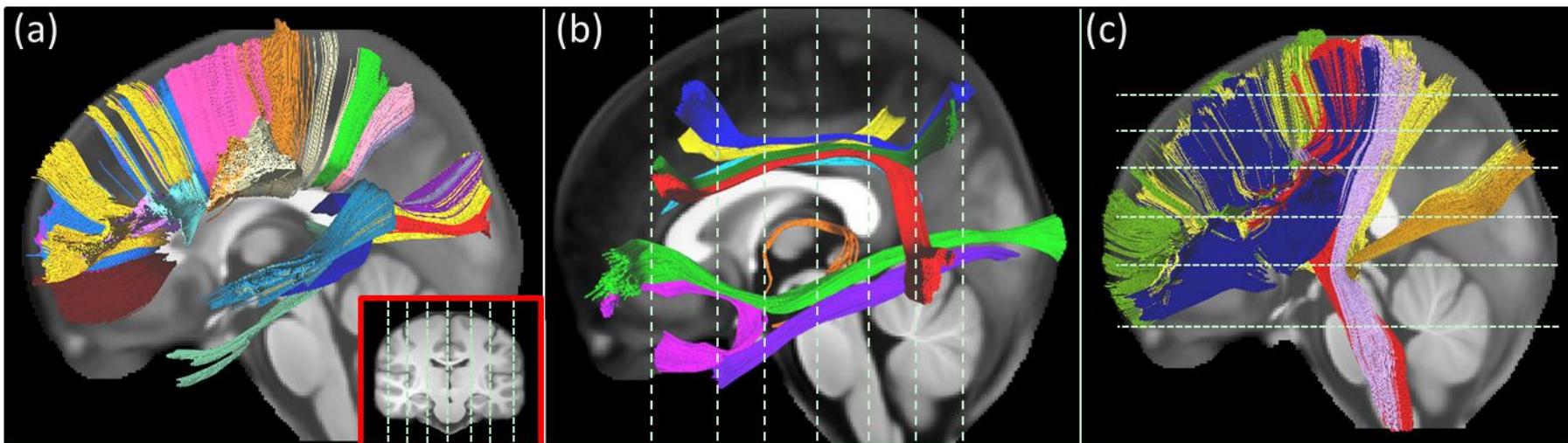
# Loss of left-greater-than-right asymmetry in autism



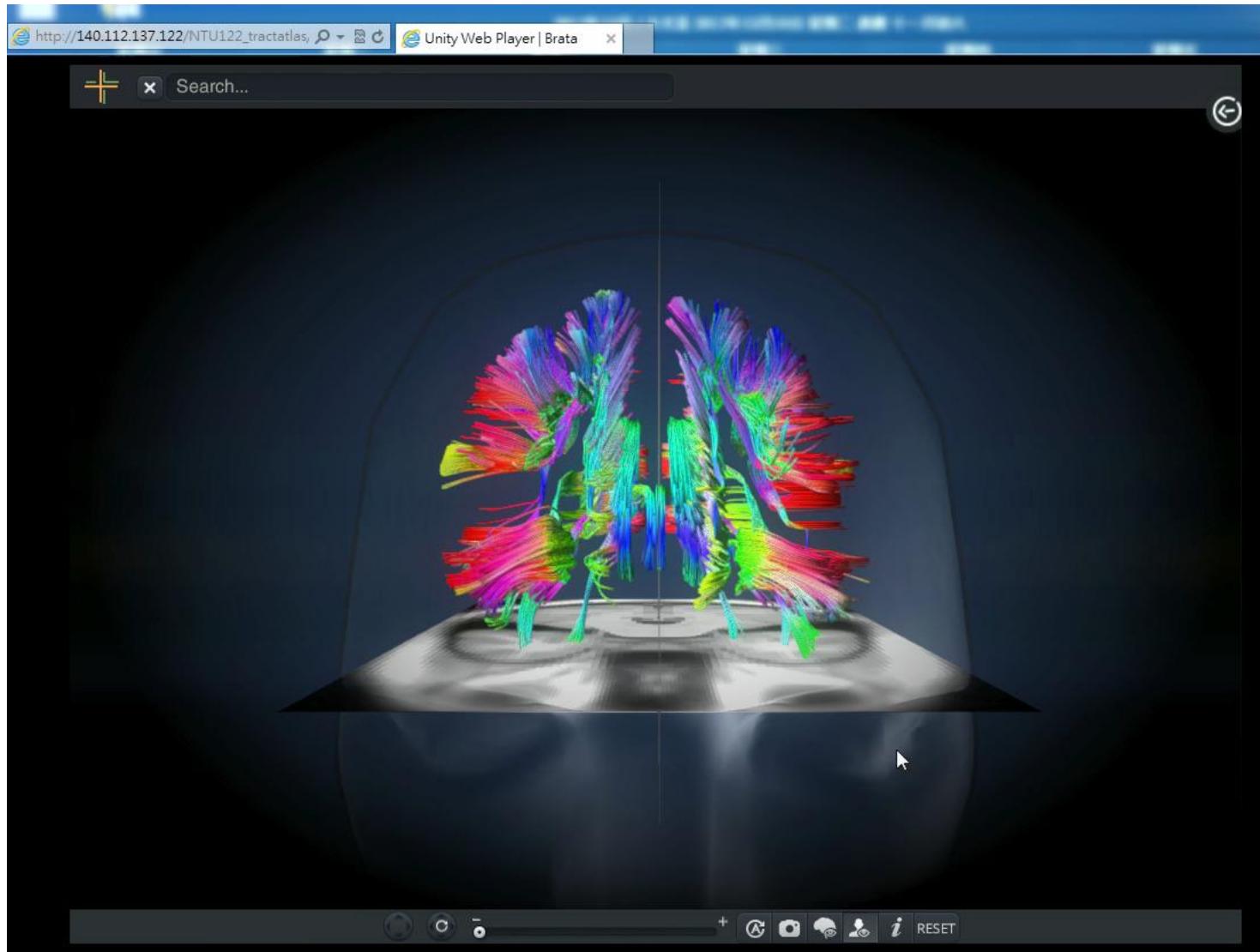
# DSI template of 122 normal subjects

SPM

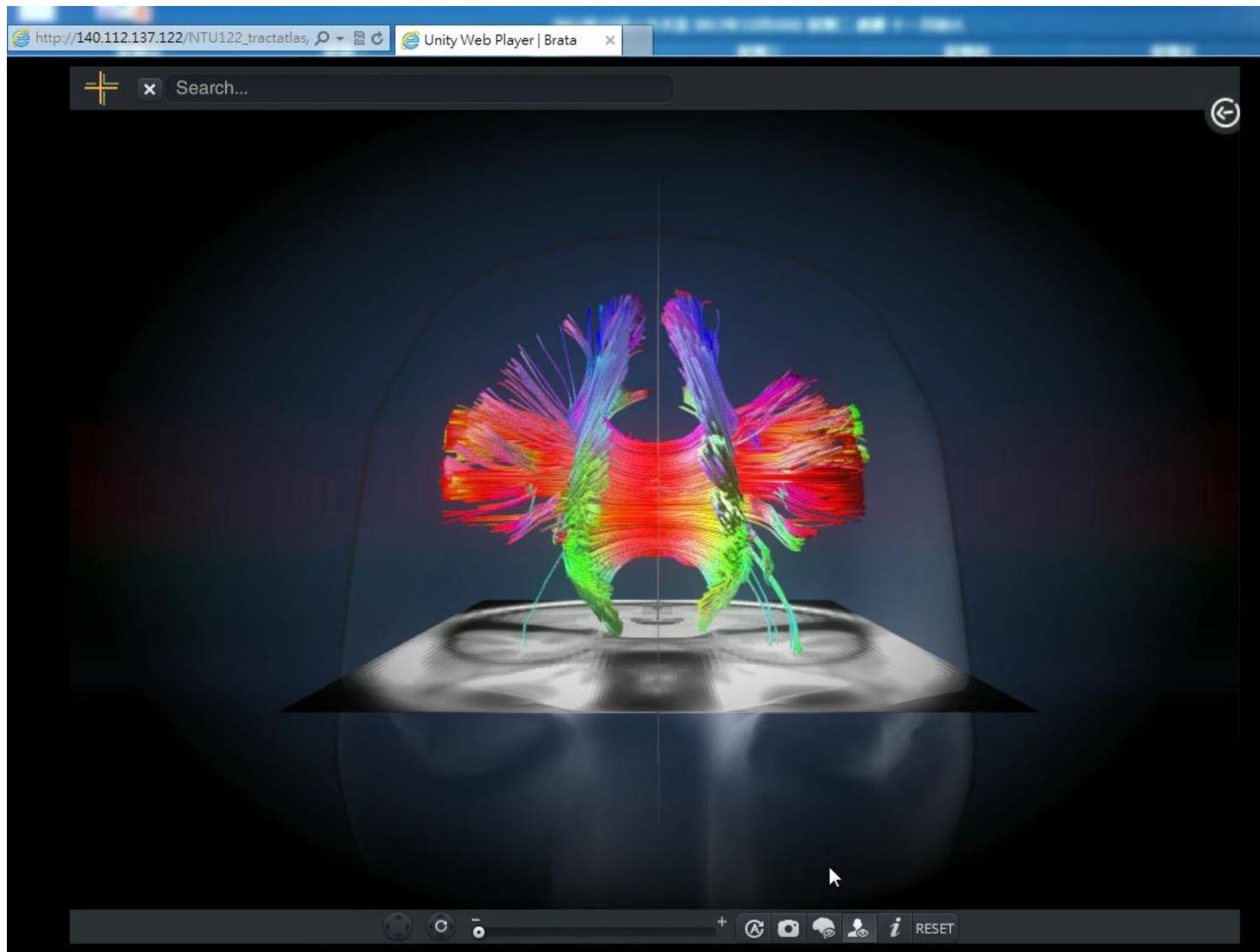




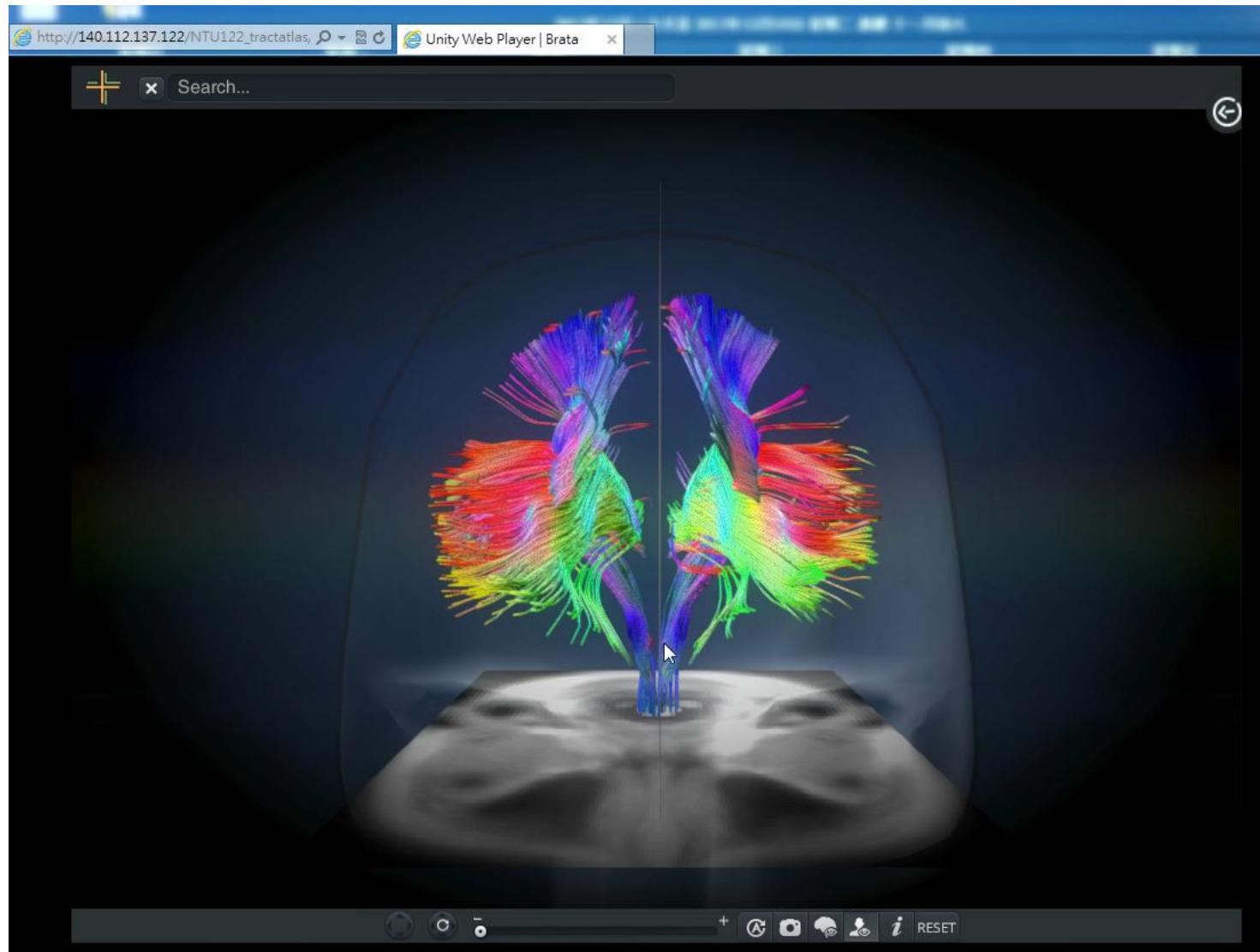
# Association fibers

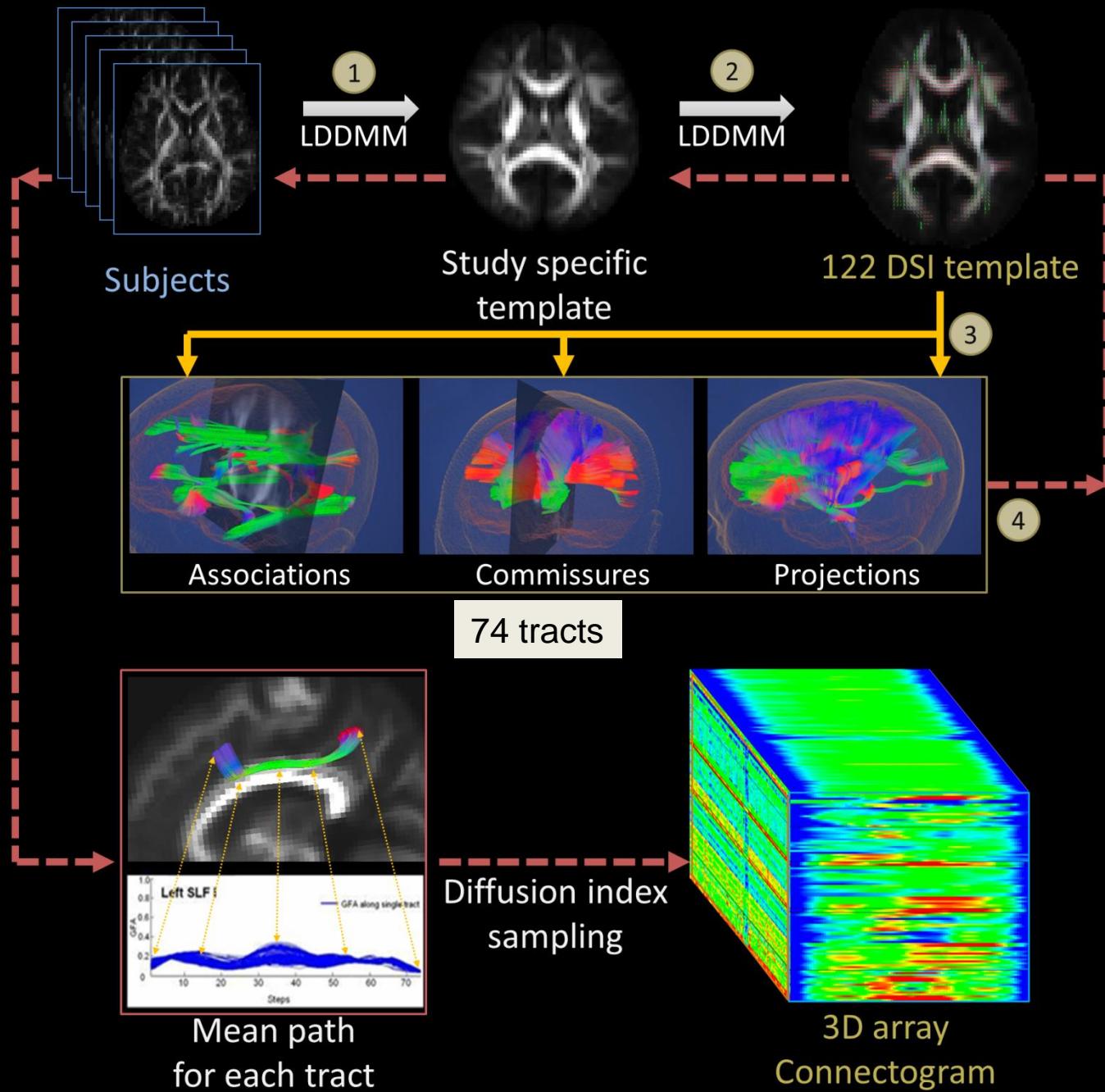


# Commissural fibers

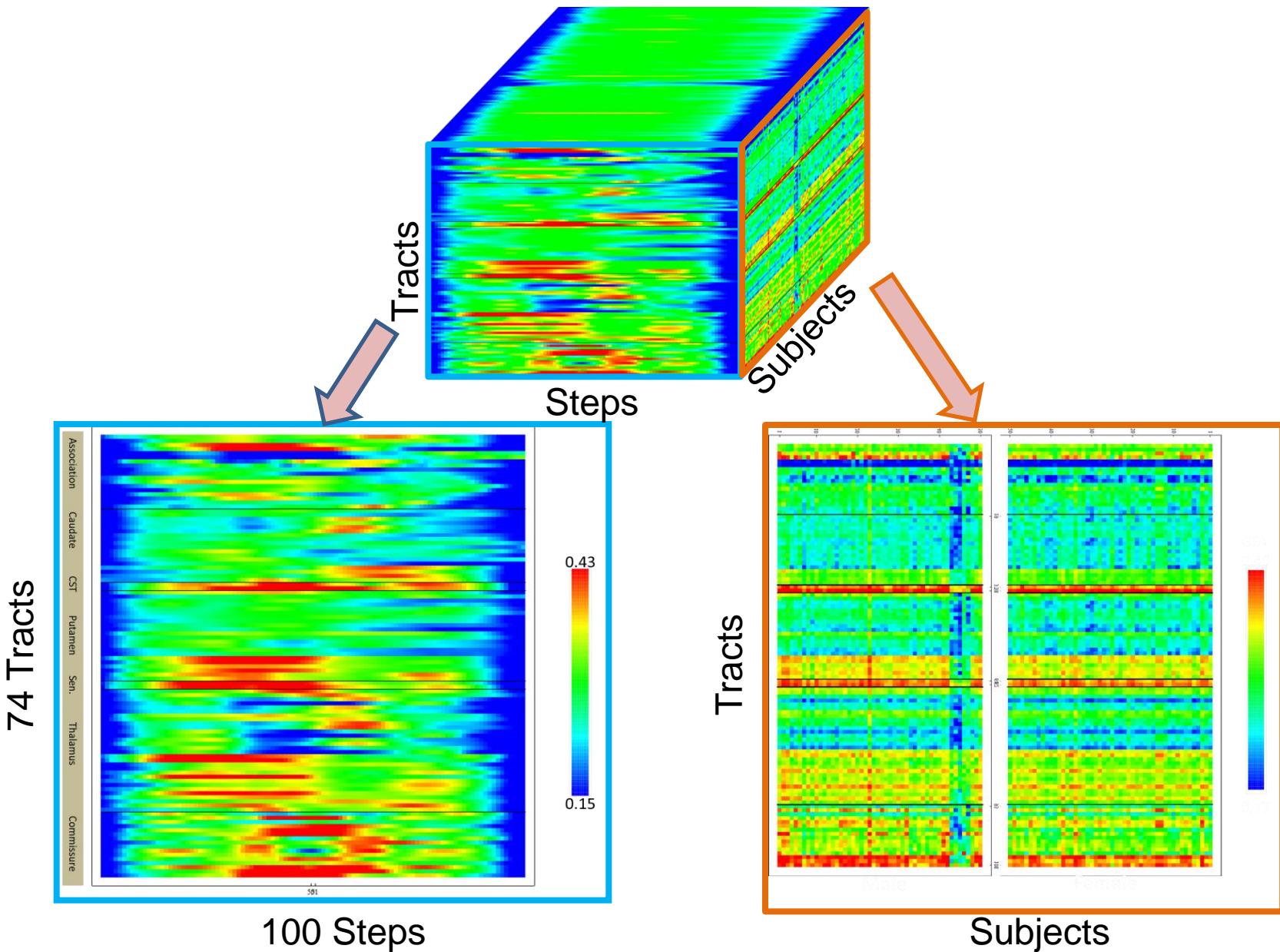


# Projection fibers





# An array-based brain connectome



# Conclusion

- Diffusion MRI allows us to probe tissue microstructure at microscopic level
  - It detects cancerous tissue
  - It reveals ingenious design of fiber architecture of the myocardium
  - It allows us to visualize and analysis connectivity of the wired brain
- Therefore, diffusion MRI is a potentially power tool in clinical cancer, cardiac and brain imaging



# Thank you for your attention

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