# Simultaneous Monitoring of Temperature and R<sub>1</sub>: Methods and Preliminary Results of Application to Heating of Thermosensitive Paramagnetic Liposomes

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### Introduction

Magnetic resonance imaging can provide tomographic temperature maps non-invasively. Therefore, MR thermometry can have utility for controlling hyperthermia aimed at liberating drugs from thermosensitive liposomes (1). The lipid bilayer of these liposomes switches to a permeable state when temperature increases above its transition temperature. Incorporating an MR contrast agent in the liposome will increase the  $R_1$  ( $\equiv 1/T_1$ ) when the liposomes become permeable, which would permit a radiological control of the drug being released using MR-imaging (2,3). This approach to local drug delivery may benefit from a method to simultaneously monitor temperature and  $R_1$ .

To this end, we use the complex nature of the MR signal. With the proton resonance frequency (PRF) method (4), temperature changes are accessible through the phase of the signal.  $R_1$  is encoded in the magnitude of the signal (5). The feasibility of fast combined  $R_1$  and temperature mapping using a Look-Locker EPI sequence will be demonstrated *in vitro* for a preparation of thermally sensitive liposomes that is heated using an RF system.

### Materials and Methods

*MR Imaging:* Experiments were performed on a 1.5-T scanner (Gyroscan Intera, Philips, Best). Serial segmented Look-Locker EPI (LL-EPI) images were aquired in 4 shots (slice thickness 8-mm, field of view  $256 \times 192 \text{ mm}^2$ , matrix  $128 \times 92$ ). A shot consisted of a non-selective inversion followed by 20 excitation pulses of  $12^\circ$ , 40.4 ms apart, to sample the recovery curve and a delay of 1200 ms, leading to an acquisition time of 8 seconds. Echo time was 18 ms. Inversion recovery spin echo experiments with different inversion delays (50,100,150,200,300,500,800,1250 and 1800 ms) provided  $R_1$  reference values. A quadrature neck coil was used for signal reception. *Image analysis:* Scripts for on the fly evaluation of temperature and  $R_1$  from real and imaginary data were written in IDL. Real and imaginary images for all 20 timepoints on the recovery curve were available for evaluation directly after acquisition.

 $R_1$  was calculated using the well-described Look-Locker method (5). For analysis, complex data were converted to signed magnitude data by using the available phase information. A least-squares fit of the form *a-b* Exp[-*c*] provided  $R_1^*$ , from which  $R_1$  was obtained after correction for the excitation pulses.



Figure 1: Data from the cooling experiment ( $\Delta T = -9.7^{\circ}C$ ). A prependicular fit (line) to the correlations C<sub>n</sub> provides  $\Delta \phi$ , and allows temperature calculation.

The PRF method for MR-thermometry allows to calculate temperature changes  $\Delta T$  from changes in signal phase  $\Delta \phi$ , using the relation  $\Delta T = \Delta \phi/c \gamma TE B_0$  with  $\gamma$  the gyromagnetic ratio, TE the echo time,  $B_0$  the magnetic field, and *c* the temperature dependent chemical shift of approximately -0.01 ppm/°C. For evaluation of  $\Delta \phi$ , phase information from all timepoints along the recovery curve is used. To this end, we make a scatterplot in the complex plane of the correlations  $C_{n,t}$  (Fig. 1)

$$C_{n,t} = \frac{S_{n,t} S^*_{n,t_0}}{\sqrt{S_{n,t} S^*_{n,t} + S_{n,t_0} S^*_{n,t_0}}}$$

for all *n*, where "*t*" and "*t*<sub>0</sub>" refer to the dataset under evaluation and the reference dataset, respectively. *S*<sup>\*</sup> denotes the complex conjugate; the phase of *SS*<sup>\*</sup> is equal to the phase difference between *S* and *S*<sup>\*</sup>. Then,  $\Delta \phi$  is obtained from a *perpendicular* least-squares fit through the origin y = bx, where  $x_n = \operatorname{Re}(C_{n,t})$  and  $y_n = \operatorname{Im}(C_{n,t})$ .

*Experiments:* Accuracy of  $R_1$  and precision of  $R_1$  and  $\Delta \varphi$  of the LL-EPI technique were assessed in tubes with different Gd-DTPA concentrations. Phase precision obtained by integrating the information of the whole recovery curve was compared to phase precision obtained from the data point with maximum absolute value. Accuracy of MR-thermometry using the LL-EPI method was tested by monitoring cooling of warm agar gel. Thermocouple readouts served as the gold-standard. Finally, an agar

gel (1 % w/w) doped with 0.5 mM Gd-DTPA and NaCl (1 % w/w) was prepared containing liposomes with a transition temperature of 57°C encapsulating 174 mM Gd-DTPA-BMA (gift of Nycomed Amersham). In the gel, effective concentration of Gd-DTPA-BMA contained in liposomes was 1.2 mM. The sample was heated by RFneedles 3 cm apart applying 25 W RF-power, while temperature was monitored using MRI.

## Results

 $R_1$  measurements were accurate within 5% or better and had a precision of 7% or better for  $R_1 > 1.5$  /s. Precision of the temperature measurement was 0.13°C or better for the tubes with  $R_1 > 1.5$  /s. The tubes with lower  $R_1$  had a lower precision of 0.22°C. Integrating the phase infrormation of all points on the recovery curve led (in this case) to a gain of a factor 2.5 (range 2.2-3.8, P=0.0002, paired t-test). The cooling experiment showed a good correspondence between thermocouple readouts and MR-thermometry using the LL-EPI sequence.  $R_1$  of the gel depended linearly on temperature:  $dR_1/dT = -0.11$  /s/°C,  $r^2 = 0.92$ . RF-heating of a gel with thermosensitive liposomes showed at low temperatures a linear decrease of  $R_1$ , and then at temperatures above 50°C, a strong, reversible increase of  $R_1$  with temperature, cf. Ref 2 (Fig.3). Near the needles a permanent  $R_1$  increase was observed.

#### Discussion

These experiments demonstrated the feasibility of simultaneous mapping of temperature and  $R_1$  in near-real-time. Combining both measurements in the same sequence implies a trade-off of acquisition time, and  $R_1$  and temperature precision, but in general an effective temperature precision (<0.5°C) is easier to obtain than an effective  $R_1$  precision (<<5%). Preliminary results indicate that monitoring of liposome permeability during MR-controlled heating is feasible. **References** 

[1] Yatvin MB *et al.*, Science 1978; **202**:1290. [2] Fossheim SL *et al.*, Acad Radiol 2000; **7**:1107. [3] De Zwart JA *et al.*, ISMRM 2000, p 43. [4] De Poorter J *et al.*, Magn Reson Med 1995; **33**:74. [5] Look DC, Locker DR, Rev Sci Instrum 1970; **41**:250.



Figure 2: Temperature rise with respect to room temperature ( $22^{\circ}$ C) (left) and  $R_1$  (middle) in a heated point in the tube containing liposomes (black), and in a control tube without liposomes (red). Two cycles of heating were applied. Temperature rise (°C) and corresponding  $R_1$  change (s<sup>-1</sup>). (right) Arrows indicate RF-needle positions. During the previous heating session,  $R_1$  in the region at the lower needle had already permanently changed.