

Effect of Background Velocity Error on Measured Time of End-systole in Patients with Aortic Regurgitation by Phase Contrast MRI

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Background: To quantify the severity of aortic valvular regurgitation, the regurgitant volume V_{reg} or regurgitant fraction RF, where $RF = V_{\text{reg}} / V_{\text{for}}$, with V_{for} the forward stroke volume, is often measured. Phase-contrast MRI (PC-MRI) is frequently used for this purpose. However, PC-MRI is well known to suffer from stationary offsets due to nonzero background velocity v_{BG} . Methods to correct for v_{BG} have been developed but are not perfect. It is therefore impossible to know the true deviation of the measured velocity from the actual flow velocity. The magnitude of v_{BG} is dependent on several factors, including the scan plane and spatial position; they may arise from a variety of effects, including eddy currents and concomitant gradients. The errors v_{BG} are commonly at least $\pm 2 \text{ cm/s}$ in magnitude (Lloyd, 2005). Even a small error v_{BG} of the order of ± 1 to 2 cm/s has a large impact on the calculation of V_{reg} or RF (Gatehouse, 2005). It will also affect the interpolated time the measured velocity crosses the zero line, corresponding to the end of systole T_s . An accurate measurement of T_s is critical, as this determines the beginning time for the diastolic integration of velocities that leads to the calculation of V_{reg} . The impact of the velocity error offset v_{BG} on T_s , and hence on its contribution to errors in the measurement of V_{reg} or RF, has not been investigated. Therefore, we performed a theoretical error analysis of the impact of v_{BG} on T_s .

Methods and calculations: Phase contrast flow data in aortic regurgitation data can be approximated as a quadratic function in time near the minimum (which occurs in early diastole, shortly after the curve crosses the zero velocity value at t_0 , taken as the graphically determined T_s); this is written as

$$v(t) = a(t - t_{\min})^2 - |v_{\min}| \quad (1)$$

Introducing an offset error velocity, (1) becomes

$$v(t) = a(t - t_{\min})^2 - |v_{\min}| \pm v_{\text{BG}} \quad (2)$$

Setting equation (2) equal to zero and solving for its roots yields the error contributed by the introduction of the unknown v_{BG} on the experimentally determined T_s . The “left” or lesser root is the meaningful value, resulting in

$$t_{\pm} = t_{\min} - \left[\frac{|v_{\min}| \pm v_{\text{BG}}}{a} \right]^{1/2} \quad (3)$$

And this is the total error in the measurement of T_s due to the contribution of v_{BG} .

Results: As an example, the mean flow velocity as measured by phase contrast MRI in the proximal ascending aorta in a typical patient with moderate aortic regurgitation is shown in the Figure, using ECG gating triggered on the R wave. A curve fit based on equation (1) was performed to the velocity data. Fit values were $a = 2.1 \times 10^{-3} \text{ cm/s}^2$, $t_{\min} = 380 \text{ ms}$, and $|v_{\min}| = 7.1 \text{ cm/s}$ in this case; the fit is shown in the dashed line in panel B. The raw data yield $T_s = 323 \text{ ms}$ after onset of the R wave trigger; incorporating the effect of an arbitrarily chosen v_{BG} of $\pm 2 \text{ cm/s}$ (for illustration purposes), T_s is found to range between 315 and 331 ms. This small range is smaller than the cine frame duration (typically 30 to 40 ms in PC-MRI scans).

Conclusions: Small offset errors occur in PC-MRI measurement of velocity. However, though this error may have a large effect on V_{reg} and RF, it has little impact T_s and need not be considered during its measurement.

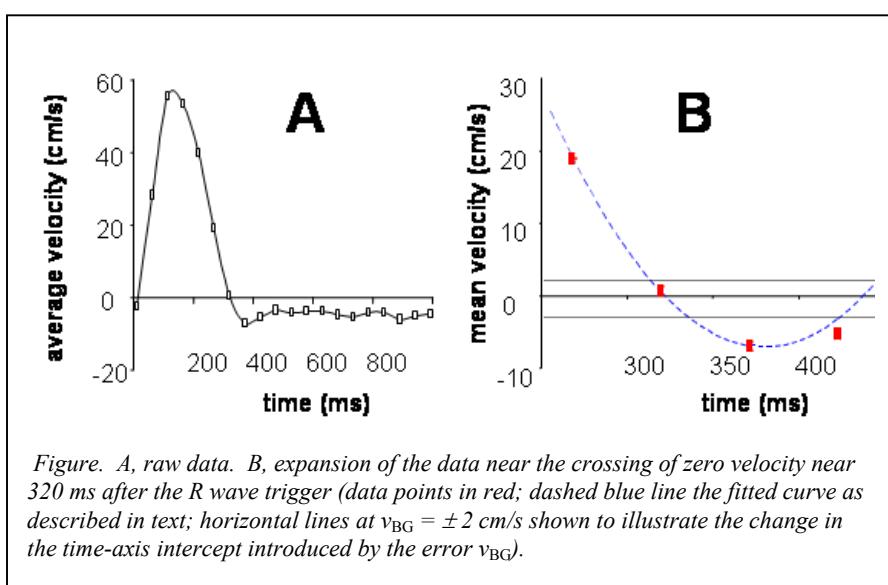


Figure. A, raw data. B, expansion of the data near the crossing of zero velocity near 320 ms after the R wave trigger (data points in red; dashed blue line the fitted curve as described in text; horizontal lines at $v_{\text{BG}} = \pm 2 \text{ cm/s}$ shown to illustrate the change in the time-axis intercept introduced by the error v_{BG}).

References:

- (1) Lloyd SG, et al. (2005) Proc Int Soc Mag Reson Med. 3:1729.
- (2) Gatehouse PD, et al. (2005). Eur Radiol. 15 :2172-2184.