MSK Clinical and Research Applications of T1rho Imaging

Thomas M. Link, MD, PhD
Department of Radiology and Biomedical Imaging
University of California, San Francisco

The primary clinical and research applications for T1rho are focused on quantitative imaging of hyaline cartilage, meniscus and intervertebral disc. A number of clinical studies have been performed studying the role of T1rho in osteoarthritis and early degenerative disease of the knee, hip and spine (1-11).

T1rho of the hyaline cartilage

Measuring T1rho of the hyaline cartilage in knee joints differences were found between normal controls and patients with osteoarthritis. It could be demonstrated that in particular patients with early osteoarthritis had increased T1rho values compared to normal controls (4). Focal areas of increased T1rho were found in patients without morphological changes in standard MRI and were confirmed as abnormal cartilage on arthroscopy (5), suggesting that T1rho identifies focal cartilage degeneration earlier than conventional MRI. In an additional study physically active subjects without clinical symptoms were studied and increased T1rho was found of the global cartilage matrix if focal cartilage defects were present (10). The authors concluded that T1rho could be a parameter suited to identify active healthy subjects at higher risk for developing cartilage defects.

T1rho of the menisci

A small number of studies has focused on measuring T1rho of the meniscus (6, 11). It was found that meniscal T1rho correlated significantly (p<0.05) with clinical findings of osteoarthritis; T1rho in subjects with early findings of osteoarthritis was increased compared to normal controls. An additional study found an increase of T1rho in healthy subjects after running a marathon, which persisted for a period of 3 months suggesting changes of the cartilage matrix induced by marathon running.

T1rho of the intervertebral disc

Recent in vitro studies have reported correlations between T1rho and glycosaminoglycan content (12), and have demonstrated a relationship between T1rho and disc mechanical properties (13), suggesting that T1 rho may be sensitive to early biochemical changes in disc degeneration. In vivo studies have demonstrated differences in mean T1rho values between the nucleus and the annulus, and have shown a correlation between T1rho and degenerative grade in an asymptomatic population at 1.5 Tesla (14), thus demonstrating the feasibility of quantifying T1rho in human subjects.

Conclusion

Findings of previous clinical studies suggest that T1rho is a promising biomarker to quantify early degenerative disease of spine and joints and may identify subjects at risk for osteoarthritis. T1rho can be implemented for imaging of knee and hip cartilage,

menisci and the intervertebral disc. To better understand the significance of T1rho, however, longitudinal studies are required and currently conducted.

References:

- 1. Bolbos R, Ma C, Lin, Link T, Majumdar S, Li X. In vivo T1rho quantitative assessment of knee cartilage after anterior cruciate ligament injury using 3 Tesla magnetic resonance imaging. Invest Radiol 2008; 43:782-788.
- 2. Bolbos RI, Zuo J, Banerjee S, et al. Relationship between trabecular bone structure and articular cartilage morphology and relaxation times in early OA of the knee joint using parallel MRI at 3T. Osteoarthritis Cartilage 2009; 17:12-18.
- 3. Cheng J, Saadat E, Bolbos R, et al. Detection of Proteoglycan Content in Human Osteoarthritic Cartilage Samples with Magnetic Resonance T1rho Imaging. In:ISMRM. Toronto, 2008.
- 4. Li X, Benjamin Ma C, Link TM, et al. In vivoT(1rho) and T(2) mapping of articular cartilage in osteoarthritis of the knee using 3T MRI. Osteoarthritis Cartilage 2007; 15:789-797.
- 5. Lozano J, Li X, Link TM, Safran M, Majumdar S, Ma CB. Detection of posttraumatic cartilage injury using quantitative T1rho magnetic resonance imaging. A report of two cases with arthroscopic findings. J Bone Joint Surg Am 2006; 88:1349-1352.
- 6. Rauscher I, Stahl R, Cheng J, et al. Meniscal measurements of T1rho and T2 at MR imaging in healthy subjects and patients with osteoarthritis. Radiology 2008; 249:591-600.
- 7. Regatte RR, Akella SV, Borthakur A, Kneeland JB, Reddy R. Proteoglycan depletion-induced changes in transverse relaxation maps of cartilage: comparison of T2 and T1rho. Acad Radiol 2002; 9:1388-1394.
- 8. Regatte RR, Akella SV, Borthakur A, Kneeland JB, Reddy R. In vivo proton MR three-dimensional T1rho mapping of human articular cartilage: initial experience. Radiology 2003; 229:269-274.
- 9. Regatte RR, Akella SV, Lonner JH, Kneeland JB, Reddy R. T1rho relaxation mapping in human osteoarthritis (OA) cartilage: comparison of T1rho with T2. J Magn Reson Imaging 2006; 23:547-553.
- 10. Stahl R, Luke A, Li X, et al. T1rho, T(2) and focal knee cartilage abnormalities in physically active and sedentary healthy subjects versus early OA patients-a 3.0-Tesla MRI study. Eur Radiol 2009; 19:132-143.
- 11. Stehling C, Luke A, Stahl R, Baum T, Pan J, Link TM. Meniscal T1rho and T2 measured with 3.0T MRI increases after running a Marathon. Euro Radiol 2009; submitted.
- 12. Johannessen W, Auerbach JD, Wheaton AJ, et al. Assessment of human disc degeneration and proteoglycan content using T1rho-weighted magnetic resonance imaging. Spine (Phila Pa 1976) 2006; 31:1253-1257.
- 13. Nguyen AM, Johannessen W, Yoder JH, et al. Noninvasive quantification of human nucleus pulposus pressure with use of T1rho-weighted magnetic resonance imaging. J Bone Joint Surg Am 2008; 90:796-802.
- 14. Blumenkrantz G, Li X, Han ET, et al. A feasibility study of in vivo T1rho imaging of the intervertebral disc. Magn Reson Imaging 2006; 24:1001-1007.