

# Infusion-Based Manganese-Enhanced MRI: New Imaging Technique to Visualize the Mouse Brain

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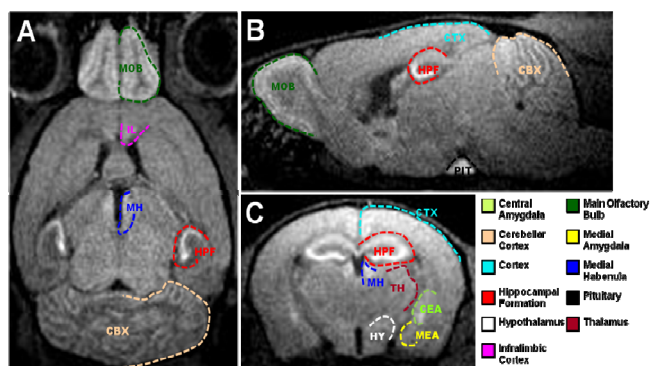
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**Introduction:** Manganese-enhanced Magnetic Resonance Imaging (MEMRI) is a technique that employs the divalent ion of the paramagnetic metal manganese ( $Mn^{2+}$ ) as an effective contrast agent to visualize, *in vivo*, the mammalian brain. As total achievable contrast is directly proportional to the net amount of  $Mn^{2+}$  accumulated in the brain, there has been great interest in optimizing administration protocols to increase the effective delivery of  $Mn^{2+}$  to the brain while avoiding the toxic effects of overexposure [1]. Recent work has proposed the use of an osmotic pump to achieve continuous slow release of  $Mn^{2+}$  in rats [2]. In this study, we employ this method of systemic  $Mn^{2+}$  delivery in the mouse brain and examine the effects of different rates of infusion on signal contrast.

**Sample:** Three cohorts of C57BL/6J adult (8 weeks of age) male mice (N=8 per cohort).

**Methods:** We performed slow systemic infusion of manganese chloride ( $MnCl_2$ ) into the mouse brain via mini-osmotic pumps implanted subcutaneously. Each cohort was assigned one of three  $MnCl_2 \cdot 4H_2O$  infusion periods: 3-day (1  $\mu L/hr$ ), 7-day (0.5  $\mu L/hr$ ), or 14-day (0.25  $\mu L/hr$ ). Each treatment provided a cumulative total dose of 180 mg/kg of  $MnCl_2 \cdot 4H_2O$  (~3.96-5.4 mg/mouse). All animals were individually housed and provided food and water *ad libitum*. We collected images at two timepoints: pre-infusion and post-infusion. Whole-brain 3D images (echo time=3.5 ms, repetition time=30 ms, isotropic resolution=100  $\mu m$ ) were acquired using T<sub>1</sub>-weighted gradient echo scans via a 7 Tesla 21 cm horizontal scanner (Bruker Avance, Billerica, MA). All animals were secured in a stereotaxic holder and mounted in a 72 mm volume (transmit) / 25 mm surface (receive) radio frequency coil ensemble.

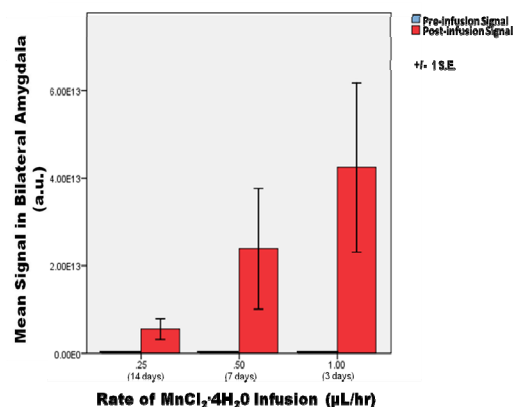
**Results:** We observed clear evidence of  $Mn^{2+}$  transport at all infusion rates into normally behaving mouse olfactory bulbs, cortex, striatum, cortex, hippocampus, amygdala, hypothalamus, thalamus, and cerebellum (Figure 1). Non-parametric tests conducted on data from ROI analysis of the bilateral amygdala found normalized mean signal in pre-infusion images to be significantly different from that of post-infusion images at the 0.1% confidence level ( $P < 0.001$ ). In addition, mean signal from each of the infusion treatments indicate a trend of increasing signal with higher rates of  $MnCl_2 \cdot 4H_2O$  infusion (equal cumulative dose) (Figure 3).



**Figure 1.** T<sub>1</sub>-weighted 3D whole-brain images of a C57BL/6J adult male mouse post- $MnCl_2 \cdot 4H_2O$  infusion. (A) horizontal, (B) sagittal, and (C) coronal views with regions of  $Mn^{2+}$  accumulation delineated.

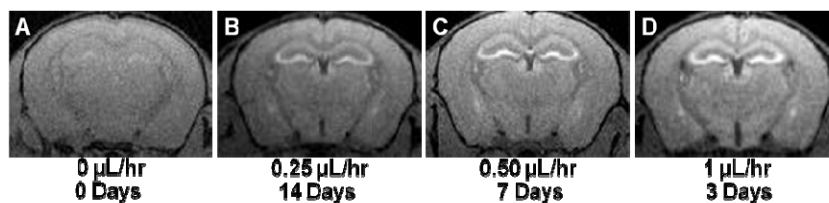
**Discussion:** This work demonstrates the successful application of slow systemic infusion to deliver  $Mn^{2+}$  to the mouse brain. Moreover, the observation of greater signal intensity with higher rates of  $MnCl_2 \cdot 4H_2O$  infusion parallels that of previous studies examining the effects of increasing  $Mn^{2+}$  fractionated-dose injections [1]. Importantly, the continuous yet slow release of  $Mn^{2+}$  via osmotic pump did not induce any observable toxic effects on animal physiology or behavior (in agreement with previous work examining  $Mn^{2+}$  infusion in rats [2]). In this current study, however, we achieved a significantly higher dose of  $Mn^{2+}$  (180 mg/kg), which may prove invaluable for future work employing MEMRI to examine behavioral manipulations on functional activity in the mouse brain.

**References:** [1] Bock et al., NMR Biomedicine. 2008 Jun; 21 (5) 473-8. [2] Eschenko et al., Magnetic Resonance Imaging, 2010 Oct; 28 (8): 1165-74.



**Figure 2.** Graph comparing mean signal from the bilateral amygdala (normalized to fiducial marker) in 14-day, 7-day, and 3-day  $MnCl_2 \cdot 4H_2O$  treatments (pre-infusion and post-infusion). Pre-infusion and post-infusion mean signal were significantly different at the 0.1% confidence level ( $P < 0.001$ ). Error bars indicate +/- 1 standard error, N=8.

## $MnCl_2 \cdot 4H_2O$ Infusion (180 mg/kg)



**Figure 3.** Demonstration of MR signal enhancement with increasing rates of  $MnCl_2 \cdot 4H_2O$  systemic infusion. Cumulative dose in all treatments was 180 mg/kg (or approximately 3.96-5.40 mg per adult male mouse). T<sub>1</sub>-weighted coronal slice images of (A) pre-contrast and post-contrast (B) 14-day, (C) 7-day, and (D) 3-day infusion treatments.