

# T1-rho dispersion in human OA cartilage specimens using HRMAS Spectroscopy at 11.7T

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## Introduction

Osteoarthritis (OA) is a disease characterized by articular cartilage degeneration. Proteoglycan loss and alteration in cartilage has been considered an important marker for understanding OA and monitoring the disease. NMR spectroscopy is useful to providing direct measurement of biochemical changes in tissues. Furthermore, High-resolution magic angle spinning (HR-MAS) NMR spectroscopy provides attenuation of the dipolar coupling and chemical shift anisotropy effects in intact tissues, such as cartilage, that result in broad resonances. T<sub>1</sub>-rho is the longitudinal relaxation time T<sub>1</sub> measured in the rotating frame under the influence of a low RF field (B<sub>1</sub>) which translates to an on-resonance spin locking frequency in the low frequency range (500 Hz for example) according to  $\omega = \gamma B_1$ . As a result the T<sub>1</sub>-rho parameter is sensitive to relaxation mechanisms in the low frequency range corresponding to inverse correlation times of macromolecular processes in cartilage. T<sub>1</sub>-rho dispersion which is the variation of the T<sub>1</sub>-rho with increase in B<sub>1</sub> RF field has shown to be sensitive to macromolecular changes in cartilage matrix and may serve as a differentiating parameter between control and OA cartilage [1,2]. The goal of this study was to use HRMAS NMR spectroscopy to quantify T<sub>1</sub>-rho and T<sub>2</sub> relaxation times and examine the T<sub>1</sub>-rho dispersion characteristics of human OA cartilage specimens.

## Materials and methods

Three OA cartilage samples were harvested from 3 patients who underwent Total Knee Arthroplasty (TKA) surgeries due to severe OA; and 3 healthy (control) samples were extracted from NDRI cadaver knees using 3.5 mm biopsy punches from the lateral inferior femoral condyle. The samples were flash-frozen at -80°C for storage. The samples were scanned in a 500MHz Varian INOVA spectrometer in a 30µL zirconium rotor which was spun at a rate of 2.25 kHz. T<sub>2</sub> measurements were measured using a rotor synchronized CPMG pulse sequence where TE ranged from (5 - 300) ms with an increment of 6.7 ms. The T<sub>1</sub>-rho pulse sequence was developed in house. All spectra were acquired at a temperature of 1°C. The T<sub>1</sub>-rho measurement was repeated for increasing spin-locking frequencies namely 50, 150, 250, 340, 500, 1500, 3500, 8000 Hz. Time of spin-lock ranged from 5 ms to 353 ms, with an increment of 12 ms. A spectral bandwidth of 20 kHz was used in the above experiments. The NMR spectra were processed using the Varian software on the console computer. A two-tailed t-test was performed to determine whether there was a statistically significant difference between the relaxation parameters of OA and healthy cartilage.

## Result and Discussion

T<sub>2</sub> of water in cartilage showed a bi-exponential decay as shown in Figure 1. The shorter component was found to be significantly higher in OA cartilage when compared to control healthy cartilage (p<0.05). An ultra short component (approximately 2.3ms) associated with the water molecules in contact with collagen [3] was not observed in this study as it was outside the T<sub>2</sub> measurement range. A mono-exponential decay was a better fit to T<sub>1</sub>-rho of control cartilage as against a bi-exponential decay for OA cartilage. The longer T<sub>1</sub>-rho component of OA cartilage was found to be significantly higher than the T<sub>1</sub>-rho of healthy cartilage (Figure 2). The mono-exponential decay of control cartilage can be due to a well organized and intact collagen and proteoglycan framework in healthy cartilage. Whereas, a breakdown of collagen and proteoglycan molecules in OA may lead to the existence of water molecules in multiple compartments and hence the bi-exponential nature of the T<sub>1</sub>-rho decay in OA specimens. HRMAS NMR spectrometer can be a powerful tool to investigate relaxation mechanisms associated with cartilage matrix degeneration, and to identify useful diagnostic imaging markers for OA that can be translated into in vivo imaging for clinical applications.

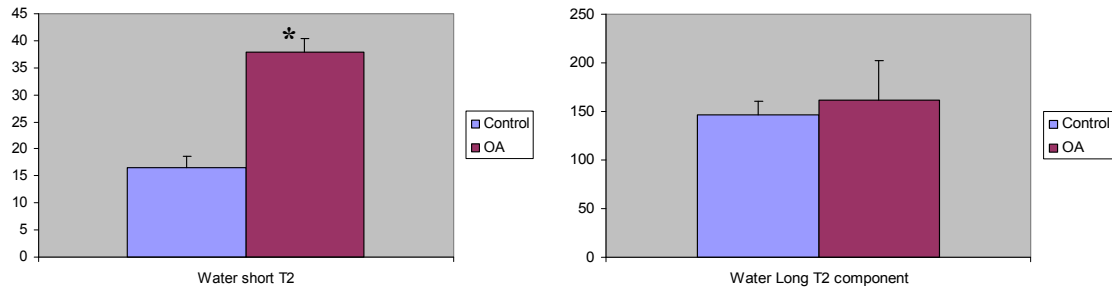


Figure 1. Short (left) and long (right) T<sub>2</sub> relaxation components (in ms) of cartilage water (\* p<0.05)

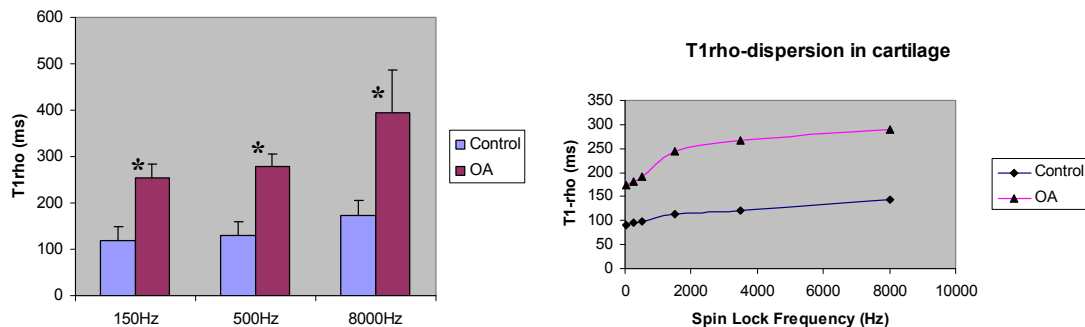


Figure 2. T<sub>1</sub>-rho at 150, 500 and 8000 Hz (left) and T<sub>1</sub>-rho dispersion characteristics of OA and control cartilage (right) (\* p<0.05)

## References:

1. Mlynarik V et al, J of Magn Reson 169 (2004) 300–307;
2. Akella SV et al, Magn Reson Med 52:1103–1109 (2004)
3. Reiter DA., et al. Magn. Reson. Med (2009) 61 (4):803-9.

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