

## Spatially-variant $B_0$ field gradients in the liver: implications for $R_2^*$ mapping for iron quantification

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**Introduction:**  $R_2^*$  relaxometry is a promising technique for liver iron quantification<sup>1</sup>. However, measured  $R_2^*$  values are affected by several confounding factors, including the presence of macroscopic  $B_0$  field inhomogeneities due to susceptibility effects, e.g., near the dome of the liver (Fig. 1). Susceptibility effects introduce errors in the apparent  $R_2^*$ , and these errors can be highly protocol-dependent. The purpose of this work is to characterize the  $B_0$  distribution in the liver in order to optimize acquisition strategies.

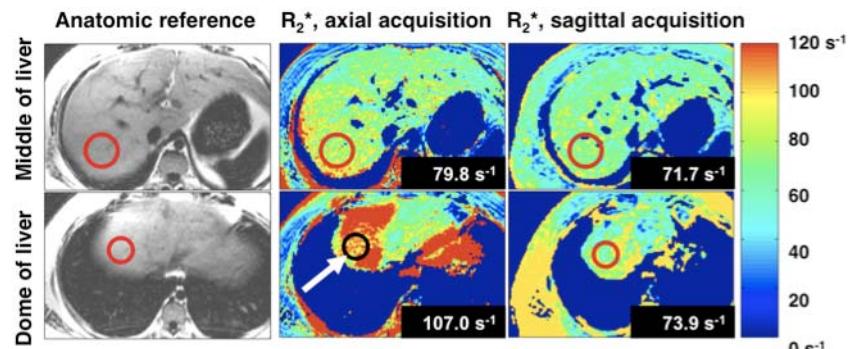
**Methods:** After IRB approval, 6 patients with no known iron overload underwent chemical shift-based MR imaging of the liver acquired at 3T using an investigational multi-echo 3D spoiled gradient echo, with two protocols with different image parameters. **Protocol 1:** sagittal slab, TR=9.0 ms, 6 echoes/TR (1 shot), TE<sub>1</sub>=0.8 ms, ΔTE=1.2 ms, with slice thickness = 3.0 mm. **Protocol 2:** axial slab, TR=8.0 ms, 3 echoes/TR (2 shots), TE<sub>1</sub>=1.2 ms, ΔTE=1.0 ms, with slice thickness = 8.0 mm. Separated water and fat images, an  $R_2^*$  map, and a  $B_0$  field map were obtained using a chemical shift-based water-fat separation algorithm<sup>2</sup>. The spatial gradient of the  $B_0$  field map (in  $\hat{x}$ ,  $\hat{y}$ ,  $\hat{z}$ ) was computed from the sagittal data. ROIs were placed in the 9 Couinaud segments of the liver by a radiologist with >5 years experience in liver imaging, in order to measure the 3 components of the gradient. Theoretical  $B_0$  field maps were calculated<sup>3</sup> for each subject based on known susceptibility values of water/fat/air<sup>4</sup>, and an anatomically specific susceptibility distribution (derived from the fat-water separation described above), in order to characterize the source of  $B_0$  field inhomogeneities. Finally, theoretical  $B_0$  gradients were obtained from the calculated  $B_0$  field for each segment in each subject, and compared with the measured  $B_0$  field gradients.

**Results:** Segment 2 has the highest gradients with an average of 22.0 Hz/cm for the measured gradients, and also the highest standard deviation at an average of  $\pm 13.6$  Hz/cm (Fig. 3). Segments 4A, 7, and 8 also have large gradients in the  $\hat{z}$  direction (all above 15 Hz/cm). The measured and simulated average gradients have correlations of 0.79 for  $\hat{x}$ , 0.91 for  $\hat{y}$ , and 0.83 for  $\hat{z}$ , demonstrating good agreement. In contrast to the agreement between theoretical and measured average gradients in Fig. 3, Fig. 4 demonstrates that the simulated gradients do not predict the measured gradients well for an individual segment of a particular liver.

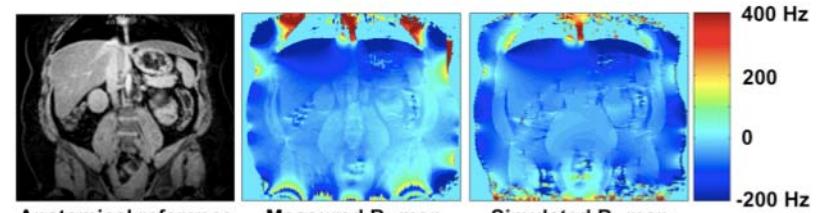
**Discussion and Conclusion:** The difference in the behavior between the average gradients in Fig. 3 and the individual gradients in Fig. 4 may be explained by the relative simplicity of the susceptibility model used in the simulation. Rapid field variations along  $\hat{z}$  near the liver dome (segments 4A, 7, 8) result in an increase in the apparent  $R_2^*$ , as often observed in scans acquired axially with thick slices. **Thus, sagittal or coronal acquisitions, rather than axial, may be preferable if localized  $R_2^*$  measures near the liver dome are required.** The methods presented in this work may be used to optimize acquisition parameters to minimize the field variation within a voxel to avoid susceptibility-related errors in  $R_2^*$  measurement for liver iron quantification.

**References:** 1. Wood J et al. Blood. 106(4):1460-5. 2. Yu H et al. MRM. 26(4):1153-61. 3. Koch KM et al. Phys Med Biol. 51(24):6381-402. 4. Collins CM et al. MRI. 20(5):413-24.

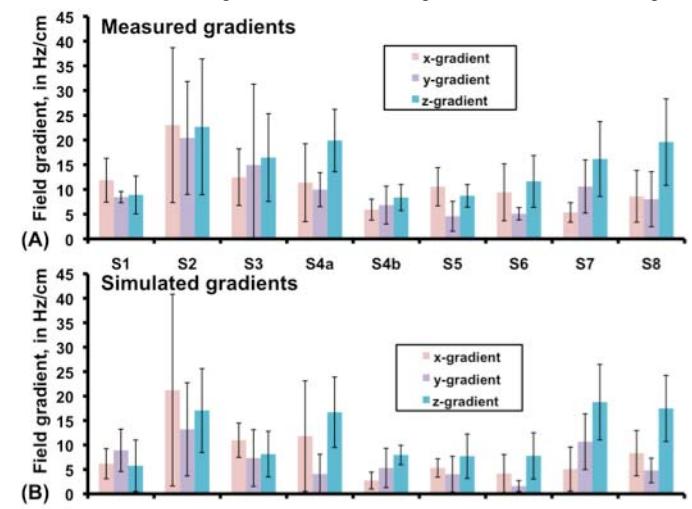
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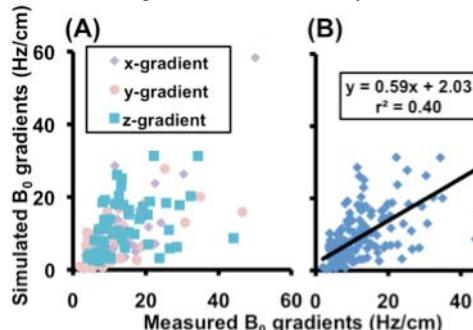
**Figure 1.** Apparent  $R_2^*$  values are protocol-dependent. Axial acquisition at the dome (white arrow) shows increased  $R_2^*$  ( $107.0\text{ s}^{-1}$ ,  $\sigma=12.4\text{ s}^{-1}$ ) relative to sagittal at the dome ( $73.9\text{ s}^{-1}$ ,  $\sigma=15.5\text{ s}^{-1}$ ).  $R_2^*$  in the sagittal acquisition at the dome is closer to both the axial at the middle ( $79.8\text{ s}^{-1}$ ,  $\sigma=12.4\text{ s}^{-1}$ ) and the sagittal acquisition at the middle ( $71.7\text{ s}^{-1}$ ,  $\sigma=10.4\text{ s}^{-1}$ ).



**Figure 2.** Coronal views of a water image, the measured  $B_0$  map, and the simulated  $B_0$  map.



**Figure 3.** On average, the behavior of the measured and simulated  $B_0$  gradients appears very similar. Gradients are measured (a) and simulated (b) for each segment of the liver, for  $\hat{x}$ ,  $\hat{y}$ , and  $\hat{z}$ .



**Figure 4.** Individual simulated gradients have limited ability to predict individual gradients. The simulated gradients are plotted against measured gradients in  $\hat{x}$ ,  $\hat{y}$ , and  $\hat{z}$  (a), and the magnitudes are plotted in (b).