

## Imaging $T_1$ , $T_2$ and proton density with minimum possible acquisitions

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**TARGET AUDIENCE.** MRI clinicians and scientists interested in efficient, complete  $T_1$ ,  $T_2$ , proton density (PD) characterization.

**PURPOSE.** The  $T_1$  and  $T_2$  relaxation times, and proton density (PD) contain almost all of the  $^1\text{H}$  MRI information routinely used in clinical diagnosis and research, but are seldom imaged directly. In addition, their accuracy depends critically on  $B_1$ -field homogeneity, making field mapping essential, especially at higher field strengths. Here we propose a novel ‘Tri-FA’ method to measure and image  $T_1$ ,  $T_2$ , PD and  $B_1$  with only 4 acquisitions—the minimum possible. This ‘Tri-FA’ method encodes  $T_1$  with 3 varied flip-angles (FA), and  $T_2$  via long  $0^\circ$  BIR-4 pre-pulses instead of spin-echoes. 2D and 3D ‘Tri-FA’ MRI is demonstrated *in vitro* and *in vivo* at 3 Tesla.

**METHODS.** It was recently noted (1) that self-refocusing  $B_1$ -independent rotation (BIR-4) adiabatic pulses are prone to intra-pulse  $T_2$  decay that depends on the BIR-4 pulse duration ( $\tau$ ),  $B_1$  amplitude, sweep frequency, but is independent of BIR-4 FA. Using four spoiled gradient-echo sequence (SPGR) acquisitions, the ‘Tri-FA’ measures signals  $S_{1-3}$  acquired with the same TR (eg, 600ms) but varied excitation FAs ( $\theta_{1-3}=30^\circ, 80^\circ, 140^\circ$ ), and a 4<sup>th</sup> signal,  $S_4$  acquired with a  $\tau=20\text{ms}$   $0^\circ$  BIR-4 prepulse (excitation FA= $\theta_1$ , TR'=1036ms). It can be shown that:  $S_{1-3}=M_0(1-E_1)\sin(q.\theta_{1-3})/(1-E_1.\cos(q.\theta_{1-3}))$ , and  $S_4=M_0(1-E_1')\sin(q.\theta_1)E_p/(1-E_1'.\cos(q.\theta_1).E_p)$ , where  $q$  reflects the  $B_1$  field inhomogeneity.  $T_1$ ,  $T_2$ ,  $M_0$ , and  $q$  are solved from  $S_{1-4}$ .

Tri-FA was validated in 2D and 3D MRI studies on a clinical Philips 3T scanner. *In vitro* validation was performed on 11 CuSO<sub>4</sub> doped agarose phantoms with  $186 \leq T_1 \leq 1332\text{ms}$ ,  $13.2 \leq T_2 \leq 227\text{ms}$ . *In vivo* brain studies were performed on healthy consenting adult volunteers (3D matrix =  $224 \times 224 \times 5$ , FOV =  $200 \times 200 \times 25\text{mm}^3$ ; 2D matrix =  $224 \times 224$ , FOV =  $200 \times 200 \times 5\text{mm}^3$ ). Tri-FA measurements were compared with the central slices of standard 3D spin-echo (SE)  $T_2$ , partial saturation (PS)  $T_1$ , PD maps and  $B_1$  maps acquired by actual flip-angle imaging (AFI)(2). 2D Tri-FA measurements were corrected for slice profile distortions.

**RESULTS.** The measured  $T_1$ ,  $T_2$ , PD and  $B_1$  of the phantoms are plotted vs. the standard values in Fig.1(a-d). The  $T_1$ ,  $T_2$ ,  $B_1$ , and PD errors(%) vs the standard values is  $2.5\% \pm 14\%$ ,  $3.6\% \pm 9\%$ ,  $0.9\% \pm 8\%$ , and  $3.6\% \pm 4\%$ , respectively. *In vivo* 3D results from a volunteer are shown in Fig.1(e-h). Mean ( $\pm$ SD) errors are  $-4.8(\pm 10.4)\%$  for  $T_1$ , and  $1.1(\pm 12.5)\%$  for  $T_2$ , measured in the boxes annotated in Fig.1(e). For 2D Tri-FA brain MRI, errors are  $-3.6(\pm 6)\%$  for  $T_1$ , and  $-8.5(\pm 3.6)\%$  for  $T_2$  after slice profile correction. Analysis shows Tri-FA provides considerably higher accuracy/unit time vs other parameter mapping methods (DESPO1/2, etc; not shown).

**Conclusion.** The novel Tri-FA method offers a minimum-acquisition option for imaging single-component  $T_1$ ,  $T_2$ , and PD, with  $B_1$ -inhomogeneity self-correction. Tri-FA was validated in 3D applications at 3T, as well as 2D MRI where standard methods can fail.

**References.** 1. Wang G et al. J Magn Reson 214(2012): 273 – 280. 2. Yarnykh VL. Magn Reson Med 57(1):192 – 200 (2007)

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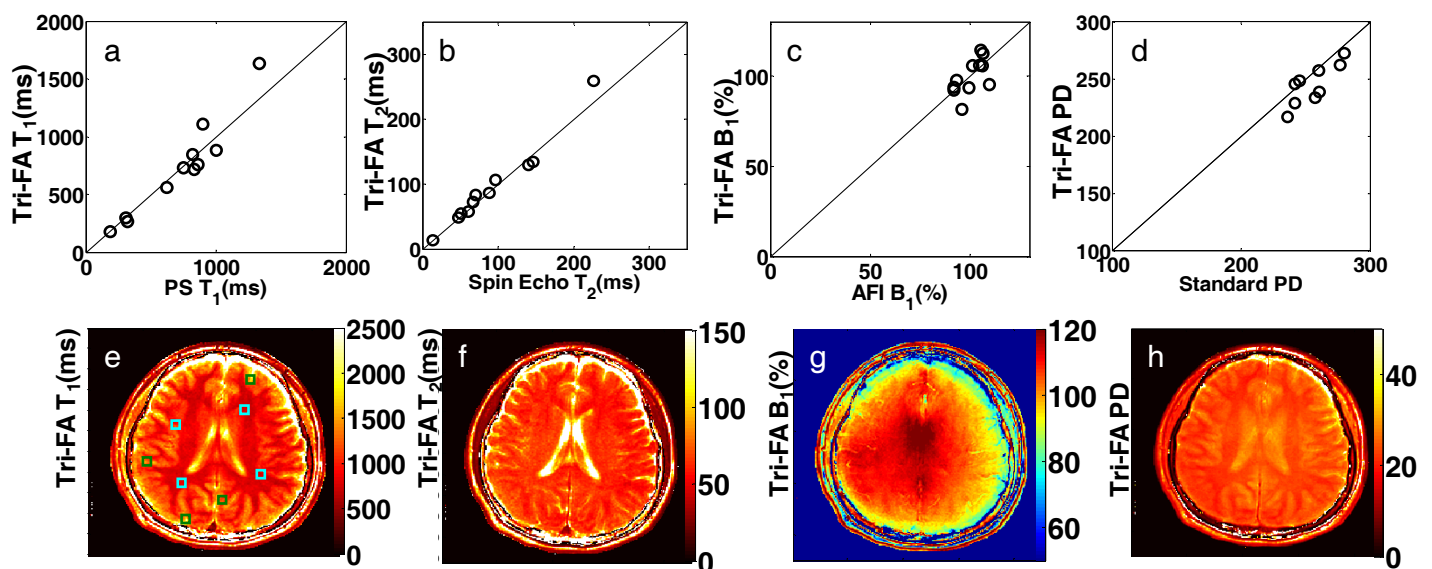


Fig 1. (a-d) *In vitro* Tri-FA results vs. standard values in 11 phantoms. (e-h) Color coded *in vivo* 3D Tri-FA maps for a volunteer.