

## Multinuclear ( $^{19}\text{F} + ^1\text{H}$ ) high-resolution intravascular MRI of perfluorooctyl bromide (PFOB) microcapsules at 3T

Shashank Sathyanarayana Hegde<sup>1</sup>, Li Pan<sup>2</sup>, Guan Wang<sup>1,3</sup>, Yingli Fu<sup>1</sup>, and Dara Kraitchman<sup>1</sup>

<sup>1</sup>Radiology, Johns Hopkins University, Baltimore, Maryland, United States, <sup>2</sup>Siemens Corporation, Baltimore, Maryland, United States, <sup>3</sup>Electrical and Computer Engineering, Johns Hopkins University, Baltimore, Maryland, United States

**Audience:** MR Interventionalists interested in cellular therapeutic delivery or vulnerable plaque detection.

**Purpose:** One of the challenges in the development of transplanted cellular therapeutic strategies is effective *in vivo* tracking of cells post-delivery. Fluorine ( $^{19}\text{F}$ ) MRI combined with anatomic proton ( $^1\text{H}$ ) MRI provides an effective method for tracking labeled cells<sup>1</sup>. Conventionally, surface and/or body radiofrequency coils have been utilized for the MRI component of such multimodal imaging. Recently, 3T intravascular MRI (IVMRI) probes have been shown to provide high-resolution *in vivo* trans-luminal imaging with local signal-to-noise ratios superior to surface coils<sup>2</sup>. Here, for the first time, using an IVMRI probe designed for both  $^1\text{H}$  and  $^{19}\text{F}$  MRI, we show high-resolution localization of perfluorooctyl bromide (PFOB) microcapsules in a porcine heart *ex vivo*. Localization is confirmed by computed tomography (CT) imaging of the microcapsules.

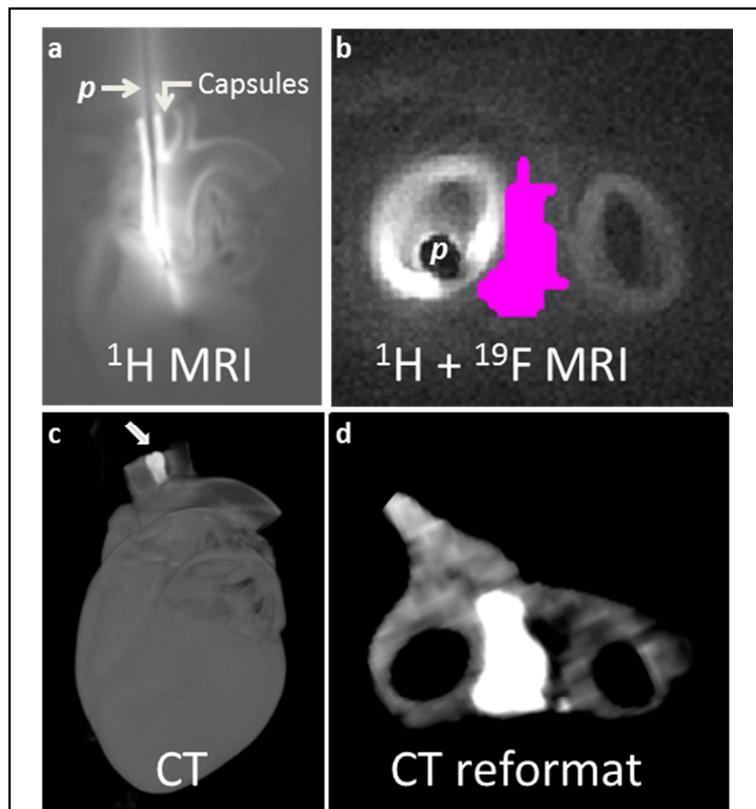
**Methods:** A multinuclear IVMRI probe was designed using a 2mm outer-diameter 3T loopless antenna with a 40mm resonant whip. The whip length was essentially the same at the proton and fluorine Larmor frequencies (128,116MHz)<sup>3</sup>, thereby allowing interchangeable operation for both nuclei. A switchable interface afforded either transmit/receive or receive-only operation<sup>2</sup>. The probe was inserted into an *ex vivo* porcine heart immersed in body-equivalent ( $3\text{gL}^{-1}$ ) saline and the ventricle was accessed via the brachiocephalic artery. PFOB microcapsules were produced using a modified alginate microencapsulation method with the addition of 12% (v/v) PFOB allowing for multimodality (MRI + CT) detection. Approximately 0.8cc of PFOB capsules was injected into the tissue between the brachiocephalic and subclavian arteries (Fig. 1a). The same IVMRI probe was used as: (1) a receiver with body-coil transmission for  $^1\text{H}$  MRI on a Philips 3T (Achieva); and (2) in the transmit/receive mode for  $^{19}\text{F}$  MRI on a Siemens 3T (Tim Trio). The proton and fluorine images were co-registered and overlaid to form a composite image. MRI was followed by c-arm CT imaging (Artis Zee, Siemens) to confirm the deposition of the radio-opaque microcapsules.

**Results:** Insertion of the probe into the heart can be seen under  $^1\text{H}$  MRI (bright line, Fig. 1a). PFOB capsules are identified under  $^{19}\text{F}$  MRI at 0.8mm in-plane resolution (Fig. 1b, magenta).  $^1\text{H}$  IVMRI at 0.2mm resolution clearly delineates the vessel wall (around *p*, Fig. 1b). The composite image (Fig. 1b) shows good correlation with a CT cross-sectional reformat at the same location (Figs. 1c, 1d).

**Conclusions:** We show, for the first time, that 3T IV MRI detectors are ideally suited to high-resolution (sub-mm) detection of both fluorine and hydrogen. Multinuclear IVMRI probes provide an effective method to image and monitor potential cardiovascular labeled cellular therapies *in vivo*.

**Refs:** (1) Barnett BP, et al. Radiology. 2011;258(1):182-91 (2) Sathyanarayana S, et. al., JACC Card Im. 2010; 3:1158-1165. (3) El-Sharkawy AM et al. Med Phys 2008; 35:1995-2006.

**Support:** 2011-MSCRFII-0043, Siemens Corporation



**Figure 1:** (a) Proton MRI from an intravascular probe *p* inserted into a porcine heart *ex vivo* showing location of PFOB capsules injection. (b) Composite image showing Fluorine MRI from the same probe at the injection site overlaid (magenta) on a proton MRI of the vessel. ( $^1\text{H}$  MRI: 3D TSE, TR/TE=298/14ms, FA=90°, voxel = $0.2 \times 0.2 \times 4\text{mm}^3$ , TSE fact. 6;  $^{19}\text{F}$  MRI: 3D TruFISP, TR/TE=4/2ms, FA=12°, voxel = $0.8 \times 0.8 \times 5\text{mm}^3$ , 32 avg.) (c) CT of the whole organ (70kV, 20sDCT) confirms location of the radio-opaque capsules (arrow) and (d) reformatted CT images at the injection location shows high correlation with (b).