

# A fast method for T1 and T2 mapping of cerebrospinal fluid at 7T

Jolanda M Spijkerman<sup>1</sup>, Esben T Petersen<sup>1,2</sup>, Peter Luijten<sup>1</sup>, Jeroen Hendrikse<sup>1</sup>, and Jaco J Zwanenburg<sup>1</sup>

<sup>1</sup>Radiology, University Medical Center Utrecht, Utrecht, Utrecht, Netherlands, <sup>2</sup>Radiotherapy, University Medical Center Utrecht, Utrecht, Utrecht, Netherlands

**Purpose:** In previous studies it has been shown that brain perfusion decreases in Alzheimer's Disease (AD) patients <sup>[1]</sup>, which could affect the oxygen content of cerebrospinal fluid (CSF) and perivascular fluids (PVF). Since both T<sub>1</sub> and T<sub>2</sub> of CSF (and PVF) depend on its oxygen level <sup>[2]</sup>, T<sub>1</sub>/T<sub>2</sub> mapping of CSF could potentially give important information on its oxygen content. However, at this point there is no fast, reliable method available to perform T<sub>1</sub>/T<sub>2</sub> mapping in the brain specifically for CSF and PVF at higher field strengths. The purpose of this study was to develop a method for T<sub>1</sub>/T<sub>2</sub> mapping of CSF and PVF for 7T MRI.

**Methods:** In Qin (2011) <sup>[3]</sup> the use of an MLEV pulse sequence for CSF imaging is described for mapping of the CSF volume fraction. We extended this method to perform T<sub>1</sub> and T<sub>2</sub> mapping, by varying the delay time (T<sub>delay</sub>, for T<sub>1</sub>) or the effective echo time (TE<sub>prep</sub>, for T<sub>2</sub>), which depends on the MLEV-spacing  $\tau$  and the number of MLEV pulses. Table 1 summarizes the used variables. The readouts after the MLEV preparation consisted of a single shot 2D SE-EPI (4x4 mm<sup>2</sup>, slice thickness 6 mm, SENSE 2.3). Both B<sub>0</sub> and B<sub>1</sub> dependency of the method were characterized by applying the method to a water phantom and using an extra linear shim gradient to induce +/- 250 Hz B<sub>0</sub> variation in the background. Reference T<sub>1</sub> and T<sub>2</sub> maps were made with a Look-Locker and a Spin Echo sequence, respectively (without the extra shim gradient). Four volunteers (1 male, aged 24-33) were scanned with the MLEV pulse sequence. All experiments were performed on a 7T MR scanner (Philips), using a volume transmit, and 32 channel receive coil (Nova Medical).

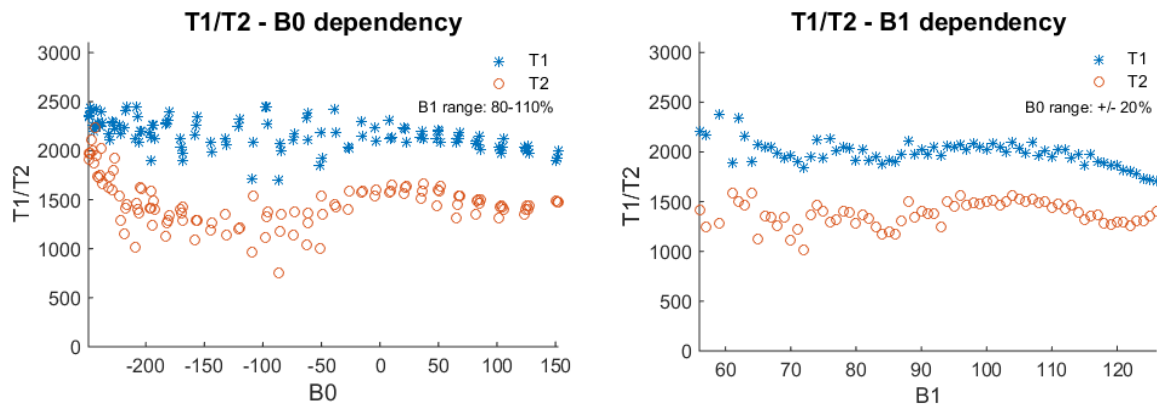
**Results:** For the water phantom the reference T<sub>1</sub> and T<sub>2</sub> were (mean±sd) 2510±15ms and 1581±11ms, respectively. The T<sub>1</sub> and T<sub>2</sub> resulting from the MLEV scans were 1972±186ms and 1382±197ms. The results of the B<sub>0</sub>/B<sub>1</sub> characterization are shown in Figure 1. For the volunteers the mean T<sub>1</sub> and T<sub>2</sub> resulting from the MLEV scans were 4261±270ms and 918±34ms in the ventricles, and 3470±89ms and 754±32ms in the peripheral subarachnoid spaces. The T<sub>1</sub> and T<sub>2</sub> were homogeneous in both the ventricles and the subarachnoid spaces, for all volunteers.  $\Delta B_0/B_1$  was approximately 0Hz/110% in the ventricles and 20Hz/70% in the subarachnoid spaces.

**Discussion:** The results show that the proposed method is relatively insensitive to B<sub>1</sub> variations, but T<sub>2</sub> scans in particular show sensitivity for B<sub>0</sub> variations; the method can be applied at 7T for B<sub>0</sub> +/-50%. Compared to the reference values, both T<sub>1</sub> and T<sub>2</sub> of the phantom were underestimated. The in vivo results were comparable to previous studies <sup>[3,4]</sup>. A possible T<sub>1</sub>/T<sub>2</sub> underestimation may not be a problem for comparison between groups of subjects or between regions within a subject. As B<sub>0</sub> and B<sub>1</sub> were within the range in which the method performs well, the results may suggest that the oxygen level in the peripheral CSF is different from that in the ventricles <sup>[2]</sup>. However, partial volume effects from the parenchyma in combination with the lower B<sub>1</sub> may play a role as well in the lower T<sub>1</sub> and T<sub>2</sub> in the peripheral CSF. Future work is needed to assess reproducibility and to gauge the effects of partial volume and oxygen dependence and/or protein content, and the effect of partial volume effects between tissue and CSF in the presence of reduced B<sub>1</sub> needs to be studied by simulations.

**Conclusions:** The MLEV method is suitable for T<sub>1</sub>/T<sub>2</sub> mapping of CSF, also at high field strengths. This method is relatively insensitive to B<sub>0</sub> and B<sub>1</sub> variations.

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**References:** <sup>[1]</sup> Binnewijzend MA, et al., Eur Radiol, 2014; <sup>[2]</sup> Zaharchuk G, et al., Magn Reson Med, 2005; <sup>[3]</sup> Qin Q, Magnetic Resonance in Medicine, 2011; <sup>[4]</sup> Rooney WD, et al., Magn Reson Med, 2007



**Figure 1:** T<sub>1</sub>/T<sub>2</sub> measurements in the water phantom showed that the method yielded consistent values for B<sub>1</sub> in the range of 80-110% of its nominal value, and for B<sub>0</sub> ≤ 20 Hz off-resonance. Each point in the B<sub>0</sub>-dependency graph represents the mean T<sub>1</sub> or T<sub>2</sub> over 1Hz bins for B<sub>0</sub>, taking only pixels with 80-110% B<sub>1</sub>. Each point in the B<sub>1</sub>-dependency graph represents the mean T<sub>1</sub> or T<sub>2</sub> over 1% bins for B<sub>1</sub>, taking only pixels with B<sub>0</sub> ≤ 20 Hz off-resonance.

**Table 1:** The parameters used to perform T<sub>1</sub>/T<sub>2</sub> mapping with the MLEV method

	T <sub>delay</sub> [ms]	nr MLEV-pulses	$\tau$ [ms]	Scan time (single slice)
T <sub>1</sub> mapping	30000, 15000, 7500, 3750, 1875, 900, 450, 225, 100, 30	8	75	1:34 min
T <sub>2</sub> mapping	15000	0, 4, 8, 16, 32	75	1:45 min