

## Self-Gated Tissue Phase Mapping using Golden Angle Radial Sparse SENSE

Jan Paul<sup>1</sup>, Stefan Wundrak<sup>1</sup>, Peter Bernhardt<sup>1</sup>, Wolfgang Rottbauer<sup>1</sup>, Heiko Neumann<sup>2</sup>, and Volker Rasche<sup>1</sup>

<sup>1</sup>Internal Medicine II, University Hospital Ulm, Ulm, Germany, <sup>2</sup>Institute of Neural Information Processing, University of Ulm, Ulm, Germany

**Introduction:** Tissue Phase Mapping (TPM) allows analysis of global and regional LV motion and calculation of motion quantification parameters [1]. Due to the long scan time of high-resolution or volumetric TPM acquisitions, respiratory motion has to be considered. In this study, image-based self-gating (SG) [2] is compared to conventional pencil beam (RNAV) gating for TPM acquisitions. Additionally, the influence of the regularization strength  $\lambda$  in the radial SPARSE SENSE reconstruction [3] on the velocities is investigated.

### Methods:

**Acquisition:** Two radial TPM acquisitions were compared in 10 healthy volunteers in 3 short axis slices: a prospectively triggered and conventionally RNAV gated acquisition (TPM<sub>ref</sub>), and a retrospectively ECG-triggered self-gated golden angle TPM sequence (TPM<sub>SG</sub>).

**Reconstruction:** For TPM<sub>SG</sub>, image-based self-gating was performed. Data were reconstructed iteratively by k-t SPARSE SENSE [3], using regularization strengths of  $\lambda=0.1, 0.2, 0.3,$  and  $0.4$ . The low undersampling of  $R=2$  in TPM<sub>ref</sub> allowed reconstruction by gridding without iteration.

**Analysis:** Performance of TPM<sub>SG</sub> was compared to TPM<sub>ref</sub> regarding image quality by expert score and quantitative measures, and peak velocities as well as correlation of velocities, RMSE, and residual displacement  $\Delta r$  of velocities from 24 segments were analyzed.

**Results and Discussion:** Self-gating was successful in all cases. An exemplary SG signal is shown in Figure 1. Black-blood contrast was superior in TPM<sub>SG</sub> (see Figure 2), since saturation slabs could be applied with full width without risk of interference with the RNAV measurement. Segmental velocities of TPM<sub>SG</sub> are comparable to TPM<sub>ref</sub> (Figure 3), and show full coverage of the cardiac cycle. Quantitatively, image sharpness of TPM<sub>SG</sub> was comparable, contrast improved, and SNR comparable or improved for  $\lambda>0.1$ . Velocity-to-noise ratio (VNR) was comparable to TPM<sub>ref</sub>. Peak velocities were reduced for strong regularization ( $\lambda>0.2$ ), but comparable for moderate values of  $\lambda$ . Velocity correlation with TPM<sub>ref</sub> was  $> 0.81$  and RMSE  $< 0.11$  cm/s in all cases. The integral  $\Delta r$  over velocities over the cardiac cycle was significantly reduced due to the full coverage of the cardiac cycle in TPM<sub>SG</sub>.

**Conclusion:** The combination of k-t SPARSE SENSE with image-based self-gating allows measurement of velocities of the myocardium with full coverage of the cardiac cycle. The temporal regularization strength of  $\lambda=0.2$  yields good artifact suppression while at the same time being low enough to avoid significant reduction of peak velocities.

**References:** [1] Lutz et al.: JCMR 2012;14(1):1–13. [2] Paul et al.: doi:10.1002/mrm.25102. [3] Wundrak et al.: ISMRM 2014, #4384.

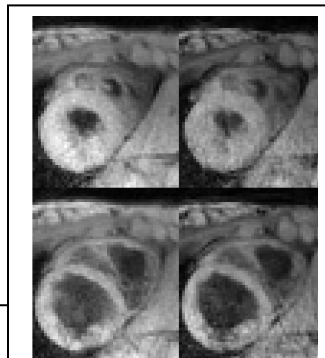


Figure 2: Images from TPM<sub>Ref</sub> (left) and TPM<sub>SG</sub> (right) in systole (top) and diastole (bottom).

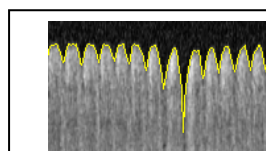


Figure 1: SG signal.

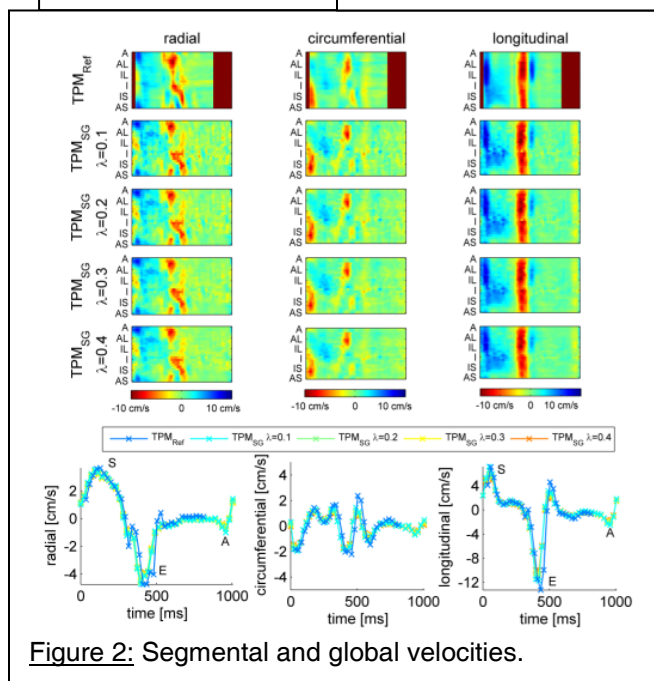


Figure 2: Segmental and global velocities.