

ORAL PRESENTATION

Open Access

# Fast three-dimensional black-blood MR imaging for carotid artery intra-plaque haemorrhage using DANTE-prepared FLASH (3D-DASH)

Linqing Li<sup>1</sup>, Luca Biasioli<sup>2,3\*</sup>, Joshua T Chai<sup>3</sup>, Matthew D Robson<sup>2</sup>, Robin P Choudhury<sup>3</sup>, Ashok Handa<sup>4</sup>, Peter Jezzard<sup>1</sup>

From 17th Annual SCMR Scientific Sessions  
New Orleans, LA, USA. 16-19 January 2014

## Background

DANTE (Delays Alternating with Nutation for Tailored Excitation) pulse trains are a rapid series of low flip angle RF pulses interspersed with gradients. We have previously demonstrated that when using DANTE pulse trains as a preparation module prior to imaging readout, the longitudinal magnetization of flowing spins is substantially attenuated, whereas the longitudinal magnetization of static tissue/fluid is mostly preserved [1]. In this study we introduce a new DANTE-prepared 3D FLASH T1 weighted (T1w) sequence (denoted '3D-DASH') [2] that is able to generate 0.6 mm isotropic resolution images with an average imaging speed better than 2 sec/slice.

## Methods

6 healthy volunteers (males, 24 to 35 years) underwent (i) DIR (double inversion recovery)-prepared 2D-TSE, (ii) 3D-DASH and (iii) comparison MSDE prepared FLASH, 3D-MERGE, imaging[3]. 4 symptomatic patients (age range, 54-86) scheduled for carotid endarterectomy (> 70% stenosis measured by ultrasound) underwent the same vessel wall imaging protocol. Written informed consent was obtained from all subjects. All scans were acquired using a 3T Siemens Verio scanner. A pair of dual-channel surface coils (Machnet, The Netherlands) were used. Cardiac gating was used for comparison DIR-prepared black blood scans. Protocol: axial imaging acquisition, identical 3D FLASH readout sequences for 3D-DASH and 3D-MERGE, FOV = 150 × 150 mm, matrix size 256 × 252, interpolated to 512 × 512,

partition thickness = 0.6 mm, Number of averages = 2, iPAT = 2, slices = 128, FLASH flip angle  $\alpha = 10^\circ$ , slice resolution = 63%, phase and slice partial FT = 6/8, Fat suppression = water excitation-fast, TR<sub>internal</sub> = 10 ms, BW = 130 Hz/pixel, resolution = 0.6 mm isotropic. Parameters for the DANTE module: flip angle (FA)  $\alpha = 15^\circ$ ; Number of pulses N<sub>p</sub> = 150; time duration between DANTE pulses, t<sub>D</sub> = 1 ms; G<sub>x</sub>, y, z = 20 mT/m; gradient duration ≈ 1 ms.

## Results

Examples of the T1w image quality for the 3D-DASH sequence with 0.6 mm isotropic resolution versus the gold standard single-slice DIR-TSE sequence with slice thickness 2 mm are shown in Figure 1. The 3D-DASH scan acquisition time was 198 seconds, with > 6 cm coverage (128 slices). The hyper-intense signal on the T1w images indicates the presence of fresh intra-plaque haemorrhage (IPH) confirmed by histological examination shown in Figure 2. Compared with the current best 3D black blood (BB) technique (results were not shown), 3D-MERGE, 3D-DASH allows 75%-100% improvement in contrast-to-noise efficiency, CNReff.

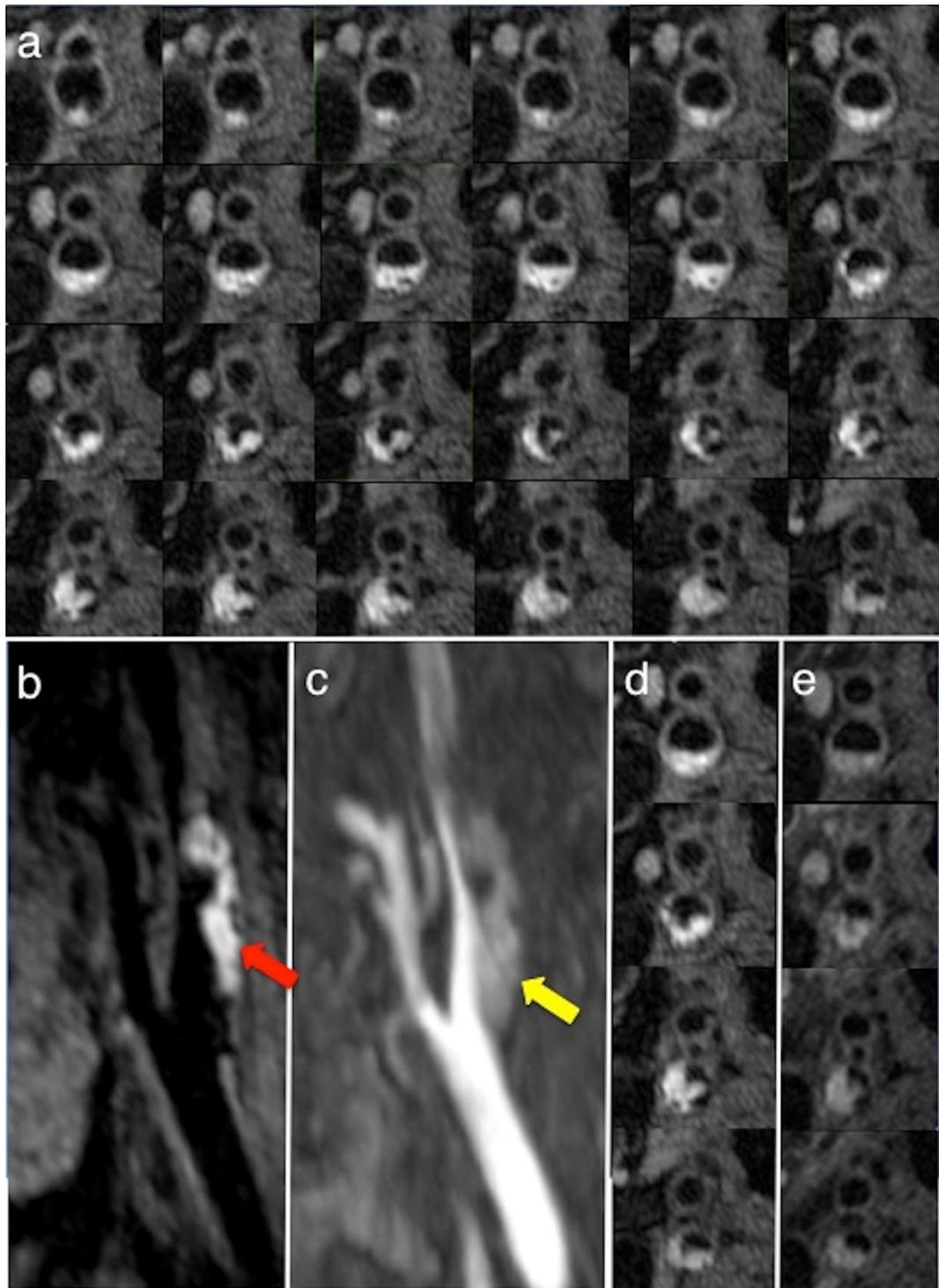
## Conclusions

3D-DASH is a promising new sequence for 3D isotropic (0.6 mm) fast black-blood T1 weighted imaging of the carotid arteries with high sensitivity to intra-plaque haemorrhage.

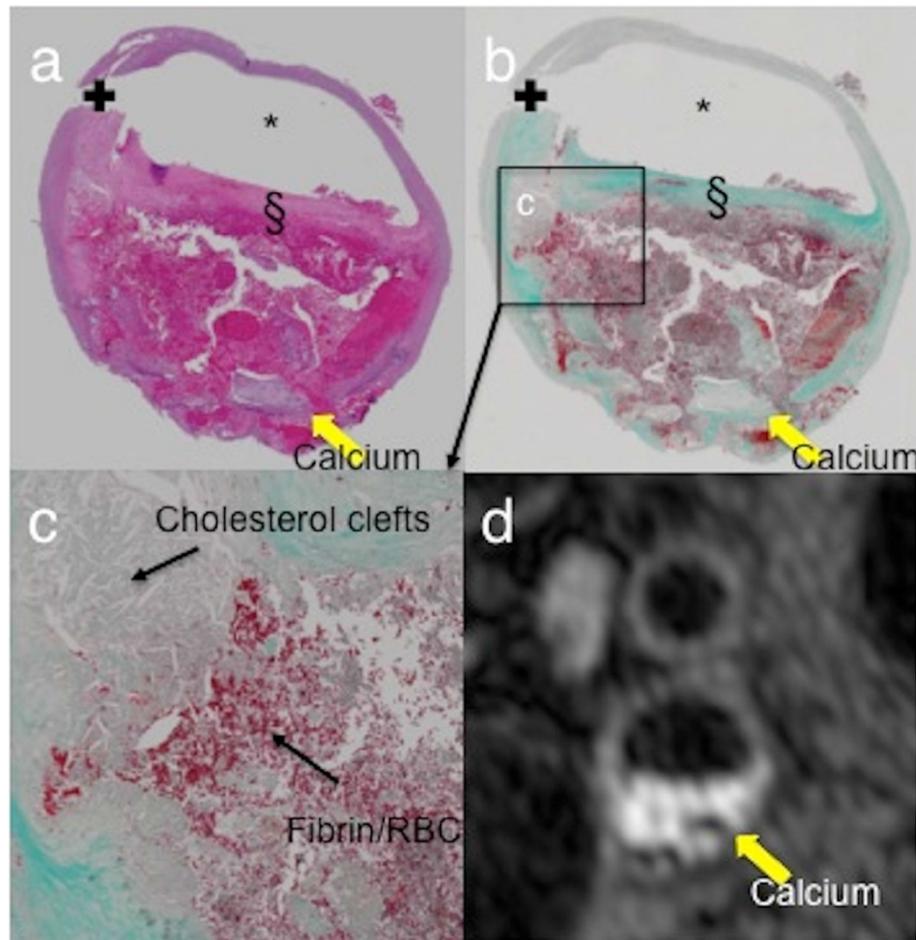
## Funding

We thank the NIHR Oxford Biomedical Research Centre, BHF, and Dunhill Medical Trust for grant funding.

<sup>2</sup>Department of Medicine, University of Oxford, Oxford, UK  
Full list of author information is available at the end of the article



**Figure 1 T1w 3D-DASH images obtained from a patient with intra-plaque haemorrhage.** a) 24 contiguous-slice whole plaque coverage from 3D-DASH images with isotropic 0.6 mm resolution. b) 3D-MPR sagittal view of the left carotid arteries reconstructed from the full 128-slice 3D-DASH dataset. c) 3D-MPR sagittal view reconstructed from the 3D-TOF data for comparison. d) Axial view slices of 3D-DASH and e) DIR-prepared 2D-TSE images taken from the same slice positions for direct comparison.



**Figure 2** This histology figure confirms the presence of intra-plaque haemorrhage of the patient plaque in Fig. 4. a) Hematoxylin and eosin stain(H&E). \* lumen; § fibrous cap; +surgical artefacts. b) Maissou's trichrome staining of serial 5 µm plaque sections. These images show a large lipid-rich necrotic core (LRNC) within an eccentric carotid atherosclerotic plaque with recent intra-plaque haemorrhage (IPH). c) Fibrin (in blood) stained bright pink in H&E and bright red in trichrome. Background lipid core seen as cholesterol clefts. Collagen stained green in trichrome. Calcification stained blue by haematoxylin and remained pale/unstained in trichrome. d) Image taken from section location 6 mm above bifurcation.

#### Authors' details

<sup>1</sup>Department of Clinical Neurosciences, University of Oxford, Oxford, UK. <sup>2</sup>Department of Medicine, University of Oxford, Oxford, UK. <sup>3</sup>Acute Vascular Imaging Centre, University of Oxford, Oxford, UK. <sup>4</sup>Department of Surgery, University of Oxford, Oxford, UK.

Published: 16 January 2014

doi:10.1186/1532-429X-16-S1-O75

**Cite this article as:** Li *et al.*: Fast three-dimensional black-blood MR imaging for carotid artery intra-plaque haemorrhage using DANTE-prepared FLASH (3D-DASH). *Journal of Cardiovascular Magnetic Resonance* 2014 **16**(Suppl 1):O75.

**Submit your next manuscript to BioMed Central and take full advantage of:**

- Convenient online submission
- Thorough peer review
- No space constraints or color figure charges
- Immediate publication on acceptance
- Inclusion in PubMed, CAS, Scopus and Google Scholar
- Research which is freely available for redistribution

Submit your manuscript at  
www.biomedcentral.com/submit

