



Ultrasound shear wave elastography, shear wave dispersion and attenuation imaging in pediatric liver disease with histological correlation

A prospective feasibility study

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No disclosures

Background

Chronic liver disease in children is an increasing health issue

There is a need for improved non invasive liver characterization to detect and monitor liver disease

Background

Ultrasound

Shear Wave Elastography (SWE) - differentiate between no/mild and moderate/severe fibrosis

Attenuation Imaging (ATI) - enables a surrogate estimation of liver steatosis in adults

Shear Wave Dispersion (SWD) – estimated to represent inflammation

Studies comparing all these new markers with histological correlation in pediatric population are lacking

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Purpose

To evaluate the feasibility of multiple ultrasound markers for the noninvasive liver characterization of fibrosis, inflammation and steatosis in the pediatric patient



Material & Methods

During 6 months period 35 patients

15 controls



SWE, SWD and ATI (with Toshiba Aplio i800) In awake and sedated state Biopsy from corresponding area

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Results

32 patients, median age of 12.1 years (range 0.1–17.9)

15 controls, median age of 11.8 years (range: 2.6–16.6)

Image based markers	B Patients	Controls	
SWE (kPa)	6.2 (2.9; 39.3)	4.6 (3.3; 7.5)	<0.002
SWD (m/s/kHz)	14.4 (8.4; 24.2)	11.7 (9.4; 13.7	<0.005
ATI (dB/cm/MHz)	0.56 (0.4; 0.94)	0.54 (0.45; 0.85)	0.87

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Results SWE



Results SWD



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Results ATI

In 30 patients with no steatosis, ATI showed median value of 0.56 dB/cm/MHz

Median value of ATI for our control group was 0.54 dB/cm/Mhz

No significant difference in any ultrasound based markers in awake compared to sedated state



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Conclusion

Ultrasound using SWE, SWD and ATI was feasible in children

Potential to reflect the various components of liver affection non-invasively

These US markers could likely be used clinically to rule out significant fibrosis, inflammation and steatosis in children











Thank you for your attention!



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