







IS DYNAMIC SUSCEPTIBILITY CONTRAST PERFUSION IMAGING POSSIBLE FOR BRAIN IMAGING IN CHILDREN

ESPR 2022 Marseille - France

CHU Angers - Service de radiologie pédiatrique LEIBER Louis-Marie

Nothing to disclose

Ethics commettee agreament, University hospital of Angers

Introduction

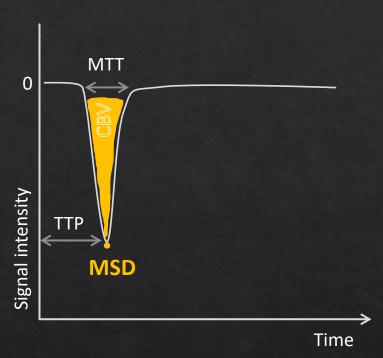
♦ Perfusion is verry usefull in brain MRI: tumor caracterisation...

♦ Dynamic susceptibility contrast : MTT, TTP, CBV, CBF

♦ In pediatrics : often impossible to achieve the theoretically compulsory perfusion flow rate (3 ml/s)

Introduction





maximum signal drop



cerebral blood volume

MSD: Easy to mesure, less affected by noise than CBV

Objective

Usual flow rate

Children maximum signal drop

=

Reference adulte population maximum signal drop

Material and methods

Prospective, monocentric study

♦ 1,5 tesla Siemens Magnetom Aera MRI

Automatic injecton device, dotarem

Material and methods

Inclusion criteria

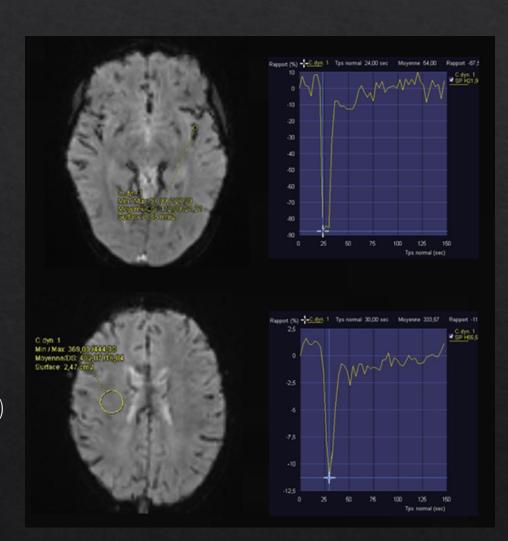
- \diamond 0 to 18 years old, > 18 for control group.
- ♦ MRI study which requires a contrast agent injection.
- Child and parents consent

Non inclusion -Exclusion criteria

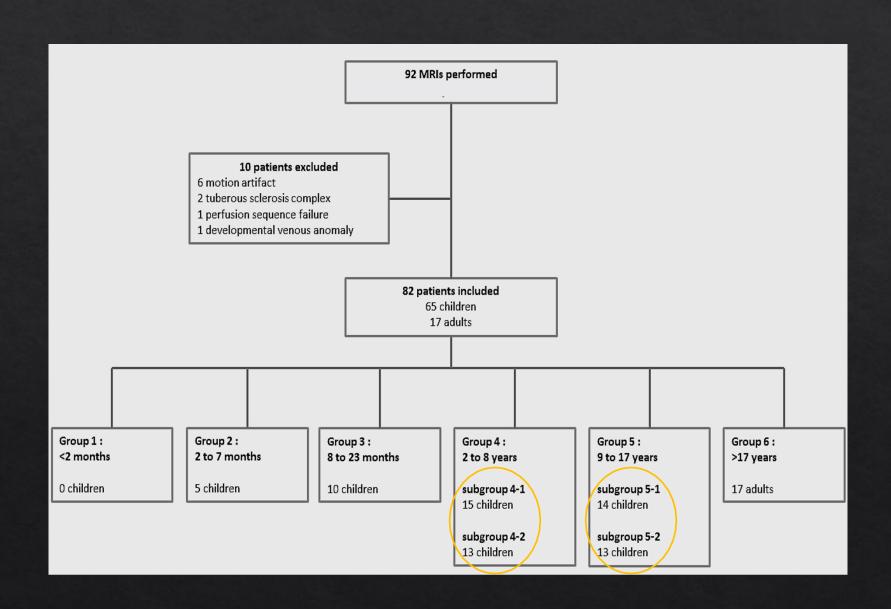
- ♦ Material causing artifacts, movements artefacts.
- ♦ Discovery of a condition which may potentially alter cerebral haemodynamics
- ⋄ Tumour not in remission
- Known vascular disease.
- ♦ Failure or complications of the injection.

Material and methods

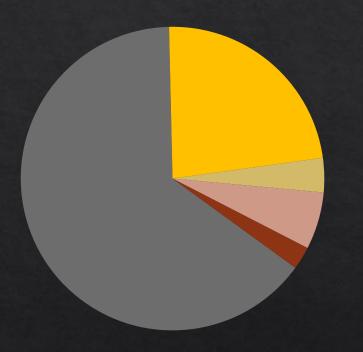
- ♦ 2 radiologists
- Mesure MSD
- ♦ Blind
- ♦ 11 ROIs
 - ♦ Vascular (M2, basillar)
 - ♦ Parenchymal (4 grey and 4 white)



Material and methods - Results



Results



- Elbow crease 53 64,60%
- Hand 19 23,20%
- Foot 3 3,70%
- Port 5 6,10%
- Missing data 2 2,40%

Results

Group	Mean age (min-max)	Mean flow rate
1 (< 2 month)		
2 (2 – 7 month)	0.47 (0.42-0.50)	0.96
3 (8 – 23 month)	1.23 (0.67-1.92)	1.00
4-1 (2 – 9 years)	4.13 (2-8)	1.00
4-2 (2 – 9 years)	6.50 (3-8)	2.06
5-1 (9 – 17 years)	11.43 (9-16)	1.68
5-2 (9 – 17 years)	12.46 (9-17)	3.35
6 (+18 years)	51.59 (18-70)	4.59

- ♦ Inter-observer concordance was excellent : intraclass correlation coefficient for all measurements = 0.983 (95% CI: 0.98-0.985).
- Basilar artery results uninterpretable

Dunnett's test	p RM2CA	p LM2CA	p RCAUD	p LCAUD	p RTHAL	p LTHAL	p ROVAL	p LOVAL	p RPEDON	p LPEDON
Group 2 vs 6	0.013	<0.01	<0.01	<0.01	<0.01	<0.01	0.039	<0.01	<0.01	<0.01
Group 3 vs 6	0.133	0.097	<0.01	<0.01	<0.01	<0.01	0.981	0.828	0.278	0.759
Group 4-1 vs 6	0.017	0.033	<0.01	<0.01	<0.01	<0.01	0.451	0.525	<0.01	<0.01
Group 4-2 vs 6	0.629	0.501	<0.01	<0.01	<0.01	<0.01	0.297	0.222	<0.01	<0.01
Group 5-1 vs 6	0.021	0.014	0.073	0.02	<0.01	<0.01	0.578	0.328	<0.01	0.054
Group 5-2 vs 6	0.983	0.989	0.696	0.551	0.162	0.375	0.999	0.744	0.093	0.105

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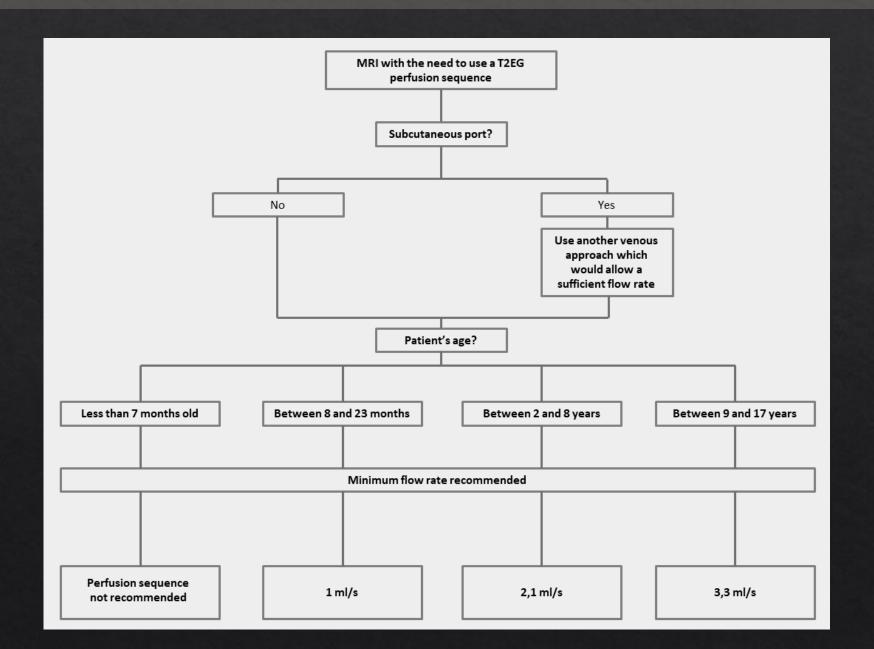
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♦ 5 patients injected in the central venous port

◆ Low injetion flow rate (1 ml/s) for their age (4-1 and 5-1)

Insufficient for Dynamic susceptibility contrast

Proposition of minimal flow rates



Conclusion

- Injection of gadolinium contrast agent only when if necessary (metastasis, characterization)
- ◆ If possible use ASL
- If a perfusion is needed:
 - ♦ Injection at maximal flow rate possible and not below :
 - ♦ 1 ml/s before 2 years
 - ♦ 2.1 ml/s between 2 and 8 years
 - ♦ 3.3 ml/s after 9 years
- ♦ Avoid central venous port

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♦ Ratios MSD grey matter / MSD white matter

Mann-Whitney U test	p MSD grey/ MSD white
4-1 vs 4-2	0.259
5-1 vs 5-2	0.429

 Concordance of vascular density between white matter and grey matter in children of the same age

MRI indication

Indications	Results	N=82	%
Monitoring of malignant tumour	Stable remnant	12	15%
	Remission	19	23%
	Progression	1	1%
Epilepsy	Normal	14	17%
	1 DNET, 1 haematoma sequelae	2	2%
Monitoring/initial assessment of benign tumours	Stable	13	16%
Isolated neurological symptom	Normal	10	12%
Control of infectious lesions	Normal	4	5%
Atypical headaches, migraine with aura	Normal	4	5%
Deformity assessment	Arachnoid cyst, scaphocephaly, sinus pericranii	3	4%