

POSTER PRESENTATION

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High temporal-resolution phase-contrast MRI demonstrates impaired left-ventricular diastolic relaxation in mice fed a high-fat high-sucrose diet

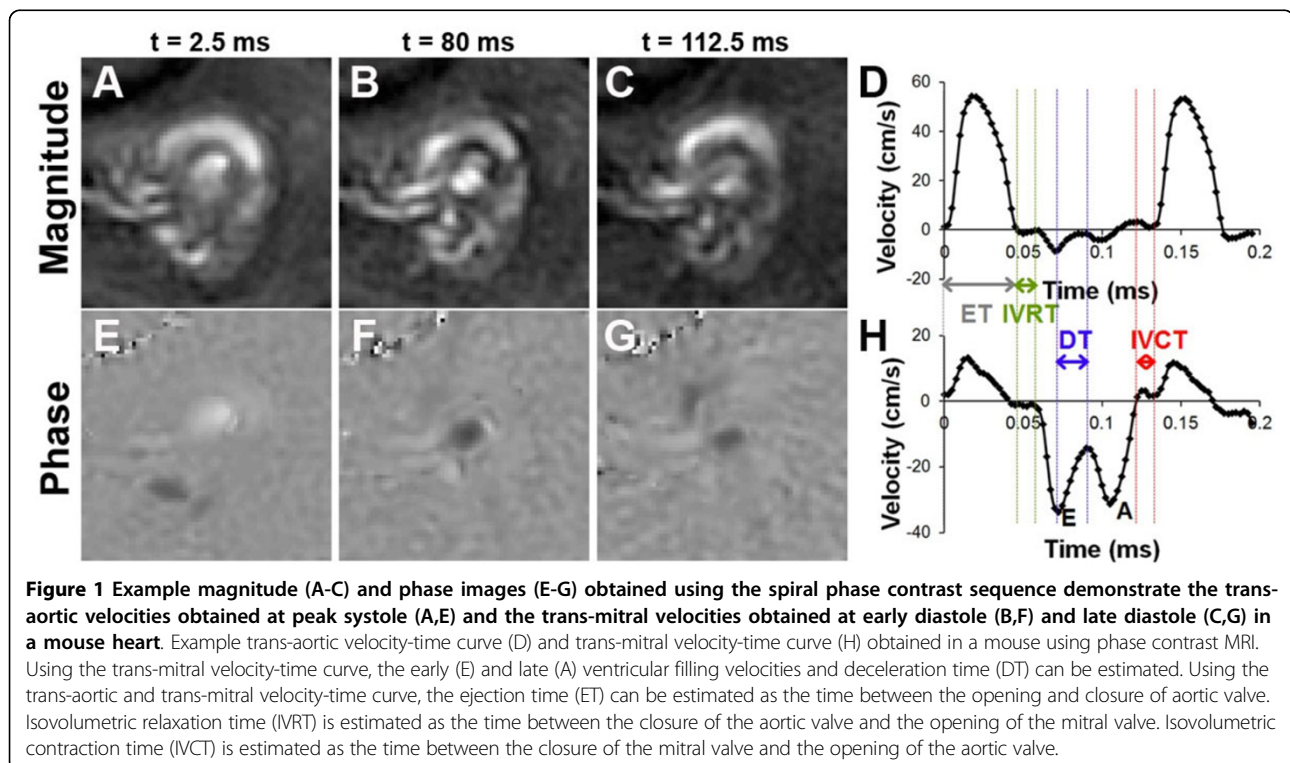
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Background

More than one-third of U.S. adults are obese, incurring an increased risk of heart failure¹. Increased body mass index is associated with left-ventricular (LV) diastolic dysfunction,

which may be one of the pathophysiological links between obesity and heart failure². Mouse models can elucidate molecular mechanisms that underlie cardiovascular disease. In this study we used high temporal-resolution



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Table 1 Parameters estimated for the control and HFHSD mice

	Control	HFHSD
Body weight (g)	30 ± 4	40 ± 4*
E wave velocity (cm/s)	37 ± 3	43 ± 7
A wave velocity (cm/s)	34 ± 4	34 ± 5
E/A	1.08 ± 0.08	1.28 ± 0.25
DT (ms)	16 ± 3	19 ± 7
IVRT (ms)	10 ± 2	15 ± 5*
ET (ms)	49 ± 4	51 ± 5
IVCT (ms)	10 ± 3	7 ± 2
(IVRT+IVCT)/ET	0.40 ± 0.12	0.45 ± 0.09
R-R (ms)	132 ± 6	136 ± 16

*p < 0.05 vs. Control

phase-contrast MRI to test the hypothesis that mice fed a high-fat high-sucrose diet (HFHSD) have diastolic dysfunction.

Methods

C57Bl/6 mice fed a regular chow diet (n = 5) or a HFHSD (Research Diets D12327, n = 8) for 22 weeks were imaged on a 7T system. Mice were anesthetized with 1.25% isoflurane and maintained at 36 ± 1°C during MRI. During imaging, physiological monitoring and gating of the ECG and respiration were performed using an MRI-compatible system (SAII, Stony Brook, NY). Localizer and long-axis imaging were performed to select an imaging plane containing both the mitral and aortic valves. High temporal-resolution 2D spiral phase-contrast MRI was performed to assess diastolic function. Imaging parameters included: TE/TR = 0.91-0.93 ms/2.5-3.3 ms, slice thickness = 1-1.25 mm, flip angle=20°, number of spiral interleaves = 198-350, field of view = 25 × 25 mm², maximum velocity encoding = 100 cm/s in the through-plane direction, acquisition window = 200 ms and scan time=1.2 min. For all mice, the trans-mitral and trans-aortic velocity-time curves were used to quantify the maximal E and A wave velocities, E/A ratio, deceleration time (DT), ejection time (ET), isovolumetric relaxation time (IVRT) and isovolumetric contraction time (IVCT). The Tei index, which is an index of LV stiffness was also estimated as (IVRT +IVCT)/ET. The MRI protocol also included cine and DENSE MRI to quantify ejection fraction (EF) and peak circumferential strain (E_{cc}).

Results

Figure 1 shows example magnitude (A-C) and phase (E-G) images obtained using phase-contrast MRI. Figure 1 also shows example trans-aortic (D) and trans-mitral (H) velocity-time curves and the definitions of the various parameters estimated from these curves. Table 1 summarizes the various parameters that were estimated

for the two groups of mice. Body weight was increased by 33% (p < 0.05 vs. Control) and IVRT was increased by 50% in the HFHSD mice (p < 0.05 vs. Control). No significant differences were detected between the remaining parameters. EF and E_{cc} were normal in HFHSD mice.

Conclusions

High temporal-resolution phase-contrast MRI can be used to assess diastolic function in mice, with a total scan time of 1.2 minutes. The finding of increased IVRT but normal E/A ratio after 22 weeks on diet suggests that the HFHSD mice have impaired diastolic relaxation, but do not have impaired LV compliance. Future studies using cardiac MR in gene-modified mice fed a HFHS diet may shed light on molecular mechanisms underlying diastolic dysfunction in obesity related cardiomyopathy.

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