

Oral presentation

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## Clinical CMR at 3.0 Tesla using parallel RF transmission with patient-adaptive B1 shimming: initial experience

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### Introduction

The clinical implementation of high-field CMR systems has introduced new challenges for cardiac imaging due to B0 and B1 field inhomogeneities. TSE Black-Blood sequences (BB) are compromised by dielectric artifacts, whereas SSFP cine-sequences are known to suffer from dark-band artifacts. The flip-angle non-uniformity across the field of view affects image homogeneity of both sequences. The use of a multi-source RF transmission system may help reduce dielectric effects, improve flip-angle uniformity and avoid local SAR peaks, thus allowing a shorter minimum TR/TE in SSFP-sequences.

### Purpose

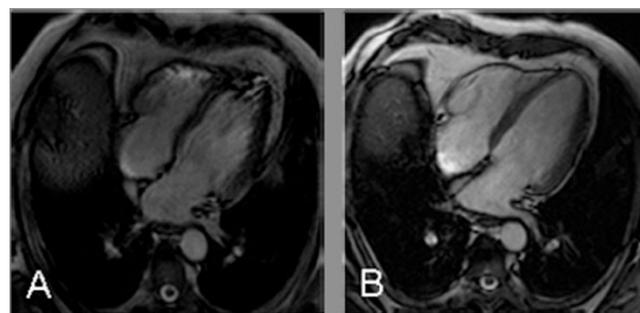
In this study we investigated the benefit of a novel multi-source RF transmission system with patient-adaptive RF shimming for cardiac imaging at 3.0 Tesla.

### Methods

A clinical 3.0 T MRI system (Philips Achieva TX, Healthcare, Best), equipped with flexible dual-source RF transmission, was used. With this setup it is possible to independently control phase, amplitude and shape of the RF waveforms. A standard 6 element cardiac phased-array coil was used for signal reception.

The effect of single-source (SingleTransmit) vs. multi-source (MultiTransmit) RF-transmission with B1-shim-

ming on SSFP cine-sequences and Black-Blood (BB) sequences was evaluated. Images were analyzed independently by two readers for homogeneity and off-resonance artifacts. Both were rated on a 4-point grading-scale: (4) uniform signal/no off-resonance artifacts, (3) mild signal inhomogeneity/off-resonance artifacts, (2) moderate signal inhomogeneity/off-resonance artifacts, (1) strong signal inhomogeneity/off-resonance artifacts.



**Figure 1**  
HLA view of a SSFP cine sequence with (A) Single Transmit and with (B) MultiTransmit of a 39 year old male patient with suspected coronary artery disease. Multi Transmit clearly eliminates the strong off-resonance artifacts seen at the apex of left and right ventricle and markedly improves image quality and interpretation.

**Table 1: Mean ratings of both reviewers 2 for SSFP images.**

Mode	Image inhomogeneity		Off-Resonance artifacts		Diagnostic confidence	
	Single Transmit	Multi Transmit	Single Transmit	Multi Transmit	Single Transmit	Multi Transmit
Left ventricle	2,1 ± 0,7*	3,4 ± 0,7 *	2,4 ± 1 *	3,8 ± 0,4 *	2,8 ± 0,8 *	3,6 ± 0,5 *
Right ventricle	2,0 ± 0,6*	3,2 ± 0,7*	1,9 ± 1 *	3,4 ± 0,5 *	2,4 ± 0,9 *	3,5 ± 0,5 *

\* = p < 0.0001

In addition diagnostic confidence was rated on a 4-point grading-scale: (4) very high confidence in diagnostic content, (3) good confidence in diagnostic content, (2) reservations about diagnostic content, (1) non-diagnostic. P-values were calculated using the Wilcoxon signed-ranks test. Percentage of overall interobserver agreement (Po) was calculated.

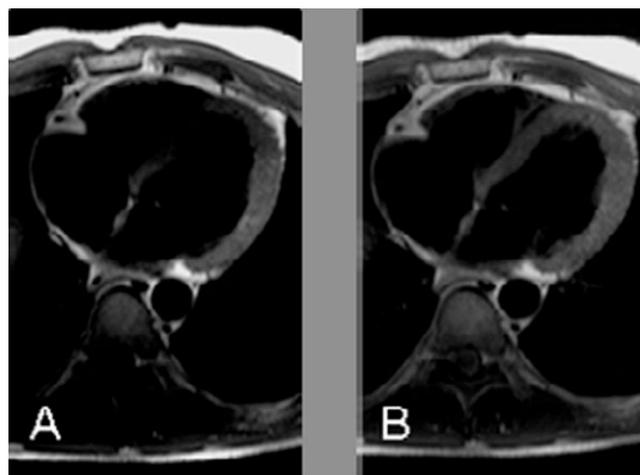
**Results**

A total of 14 SSFP- and 7 BB-sequences were analyzed (patients = 7). For the SSFP-sequence the left and the right ventricle showed significant improvements with respect to homogeneity, off-resonance artifacts and diagnostic confidence (see Table 1 and Fig. 1).

In the BB-sequence homogeneity and diagnostic confidence significantly improved for the right ventricle (see Table 2 and Figure 2). Percentage of overall interobserver agreement for all ratings was good to excellent (0.66 < Po < 0.95).

**Conclusion**

Parallel multi RF-transmission with B1-shimming significantly improves the image homogeneity and contrast of cardiac SSFP and BB sequences and thus represents a major step forward in clinical CMR at 3.0 T.



**Figure 2**  
**Axial BB sequence with (A) Single Transmit and with (B) MultiTransmit of a 39 year old male patient with suspected arrhythmogenic rightventricular dysplasia.**  
 Note the markedly improved signal homogeneity of the image acquired with MultiTransmit, which allows the clear delineation of the interventricular septum and the anterior wall of the right ventricle.

**Table 2: Mean ratings of both reviewers for BB images.**

Mode	Image inhomogeneity		Diagnostic confidence	
	Single Transmit	Multi Transmit	Single Transmit	Multi Transmit
Left ventricle	2,3 ± 1 *	3,3 ± 0,7 *	2,417 ± 1,1 *	3,2 ± 0,7
Right ventricle	1,6 ± 0,8 *	3,0 ± 0,9 *	2,0 ± 1,1 *	2,8 ± 0,7 *

\* = p < 0.005