Quantitative MR imaging in the management of multiple sclerosis

ADVANCED QUANTITATIVE BRAIN MR MEASURES

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- WM lesion nature
- Extent and topography of NAWM damage
- Cortical lesions
- Subpial demyelination
- "Diffuse" GM damage
- Regional damage
- CNS functional reorganization
- Conclusions





MRI IN MS WM lesions

	Multiple sclerosis $(n = 3)$	Tuberculous meningitis (n = 3)	Alzheimer's disease (n = 3)	Controls (n = 3)
T cells	91 (55)	541 (860)	11 (9)	11 (24)
Microglia/macrophages	757 (596)	2301 (1449)	552 (218)	544 (252)
Extent of demyelination	41 (23)	1 (1)	0 (0)	0 (0)
Oligodendrocytes	23 (14)+/ 105 (52)	50 (32)	82 (23)	67 (107)
Neurons	154 (70) ⁺ / 221 (60)"	214 (24)	198 (43)	235 (15)
Axonal spheroids	8 (93) ⁺ / 6 (30) [#]	3 (7)	8 (26)	0 (2)

Neurol 2013

JAMA]



Perivascular: 92% MS vs 35% NMO lesions Hypointense rim: 23% MS vs 2% NMO lesions





Fischer et al, Brain 2013

MRI IN MS WM lesions

Persistent phase rim



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MRI IN MS NAWM damage

	EDSS Score			
Independent Variable	r Value	P Value		
T2 LV	0.55	<.001		
WBNAA	-0.49	<.001		
Mean lesion MD	0.50	<.001		
Mean lesion FA	-0.36	.005		
Mean NAWM FA	-0.52	.001		
NAWM FA peak height	0.42	.001		
Mean NAWM MD	0.26	.02		
NAWM MD peak height	-0.31	.007		

Pulizzi et al., Arch Neurol 2007





Filippi et al., JNNP 2000

MRI IN MS NAWM damage 37 CIS patients, 2 years FU



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Type I: mixed WM/GM 34%



Type II: intracortical 16 %





WM demyelination WM remyelination Deep grey matter lesion Cortical lesion







C C A A

Type III: subpial cortical



Geurts and Barkhof, Lancet Neurol 2008

50%

Haider et al., JNNP 2014

DIR



vs. SE = +538%; *vs*. FLAIR = +152%

Geurts et al., Radiology 2005



8.0 T

Kangarlu et al., AJNR 2007





	7-T MRI		RRMS (n = 9)		SPMS (n = 7)		Pathology	Pathology
	%	(n)	Mean ± SE	Range	Mean ± SE	Range	(study 1*), %	(study 2*), %
All types	100	(199)	9.4 ± 2.2	2-21	19 ± 6.9	8-53	100	100
Туре I	36.2	(72)	3.9 ± 1.6	1-16	$\textbf{6.2} \pm \textbf{4.0}$	0-26	34	38
Type II	13.6	(27)	1.1 ± 0.4	0-3	2.8 ± 1.5	0-10	16	18
Type III/IV	50.2	(100)	4.4 ± 1.3	0-11	10 ± 2.3	4-17'	50	44

Mainero et al., Neurology 2009

DIR in pediatric MS

D

DIR in CIS (evolution to CDMS)



CLs: 8% pediatric MS, 66% adult MS. Mean CL volume: 0.002 ml (SD=0.009) pediatric MS 0.2 ml (SD=0.3) adult MS (p=0.0003)

	Sensitivity	Specificity	Accuracy	OR
DIS Polman 2005	74 %	73%	74%	7.9
DIS Montalban 2010	86%	42%	61%	4.3
DIS Filippi 2010	77%	93%	86%	47.3

Filippi et al., Neurology 2010

CLs and cognitive impairment



Age, CL volume, and NCV independent predictors of the cognitive impairment index: R²=0.55, p<0.001

CLs and clinical disability accumulation

107 relapse-onset MS patients, 3 years FU

Baseline CL volume: entire group: B=0.511; p<0.001 RRMS: B=0.512; p<0.001 SPMS: B=0.495; p<0.001

Calabrese et al., Ann Neurol 2010

CLs and disease evolution

334 relapse-onset MS patients, 5 years FU

Age: OR 1.2, p =0.001 Baseline CL volume: OR 1.7, p <0.001 Baseline cerebellar cortical volume: OR 0.2, p <0.001

Calabrese et al., Ann Neurol 2013

48 PPMS patients, 2 years FU

Baseline CL volume: B: -0.525, p <0.001 **Baseline T2-WM-LV:** B: -0.448, p <0.001

Calabrese et al., Neurology 2009

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MRI IN MS Subpial demyelination

Inner cortical MTR



Outer cortical MTR



Samson et al., Mult Scler 2014





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MRI IN MS "Diffuse" GM damage

54 PPMS, 5-year FW & EDSS

Baseline EDSS: OR: 0.48, p = 0.03 GM MD: OR: 1.21, p = 0.005 Nagelkerke R²: 0.44

Rovaris et al., Brain 2006

73 relapse-onset MS, 8-year FW & EDSS GM MTR: OR 0.97, p=0.03 Lesion MTR % change: OR 0.88, p=0.02

Nagelkerke R²: 0.28

Agosta et al., Brain 2006

73 relapse-onset MS,13-year FW & EDSS

Baseline GMF: OR 0.79, p=0.01

C index: 69%

Evolution to SPMS:

Baseline T2 LV (OR=1.13, p=0.005) Baseline GMF (OR=0.71, p=0.04) C-index: 84% **Cognitive deterioration:**

Baseline average GM MTR (OR=0.87, p=0.03) Baseline disease duration (OR=1.50, p=0.08) C-index: 97%

Filippi et al., Neurology 2013

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MRI IN MS Regional damage / Thalamus

Thalamic fraction vs cognitive test

Thalamic connectivity defined regions (CDRs)

ectivityCortico-thalamic(CDRs)tractsCI (22) vs CP (30) MS





Frontal CDR Motor CDR Post-Central CDR Posterior Parietal CDR Temporal CDR Occipital CDR

Damage of specific cortico-thalamic tracts explained global cognitive dysfunction and impairment of selected cognitive domains better than all other MRI variables

Bisecco et al., Hum Brain Mapp 2015

MRI IN MS Regional damage / Hippocampus

Hippocampal atrophy

Hippocampal DG hypertrophy



Brain Struct Funct 2013

Hippocampal atrophy vs PASAT test





Rocca et al., Hum Brain Mapp 2015

MRI IN MS Regional damage / Spinal cord



Normalized distance along the cord



Atrophy vs EDSS Atrophy vs EDSS A C4 C4 C5 C5 C5 F P P

Radiology 2012

/alsasina et al.

42 MS patients Baseline crosssectional area and FA vs. EDSS at follow –up: r = -0.40; p = 0.01

Agosta et al., Brain 2007

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MRI IN MS CNS functional reorganization

DMN in progressive MS patients





Correlations between \downarrow **DMN fluctuations and:**

PASAT (r=0.42, p<0.001) CC FA and JD (r from 0.54 to 0.87, p<0.001) Cingulum FA (r=0.83, p<0.001)

Rocca et al., Neurology 2010

DMN in pediatric MS patients





CI explained by: • cingulum FA • CC MD

• R precuneus RS FC C-index=0.99

Rocca et al., Neurology 2014

MRI IN MS **CNS functional reorganization**



Small world network: high clustering coefficient, short characteristic path length



- **Shortest path length**
- **Highest degree**



Connecter hub



Highest clustering coefficient (its

neighbours are all neighbours of each other)

properties

Regiona

MRI IN MS CNS functional reorganization

Functional hubs 246 MS (34 % CI) *vs* 55 controls



Rocca et al., Brain Struct Funct 2014



Hippocampal structural connectivity Edge graphical properties



Llufriu et al., ECTRIMS 2015

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MRI IN MS Conclusions

