



# MRI Metal Artifact Reduction

PD Dr. med. Reto Sutter

University Hospital Balgrist Zurich

University of Zurich



University of  
Zurich <sup>UZH</sup>

*uniklinik*  
EXPERTISE IN MOTION *balgrist*

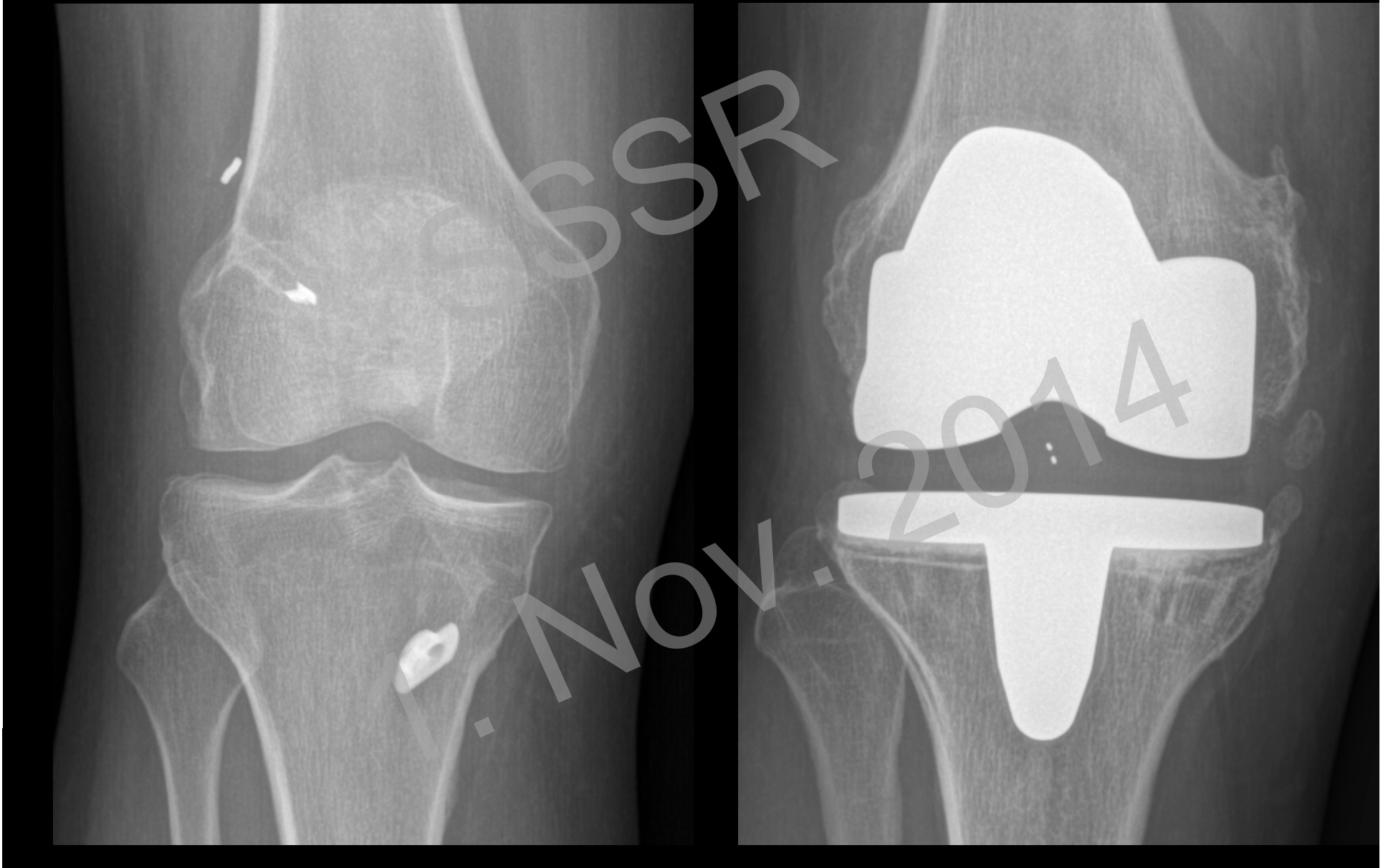
SSSR  
1. Nov. 2014

# OUTLINE

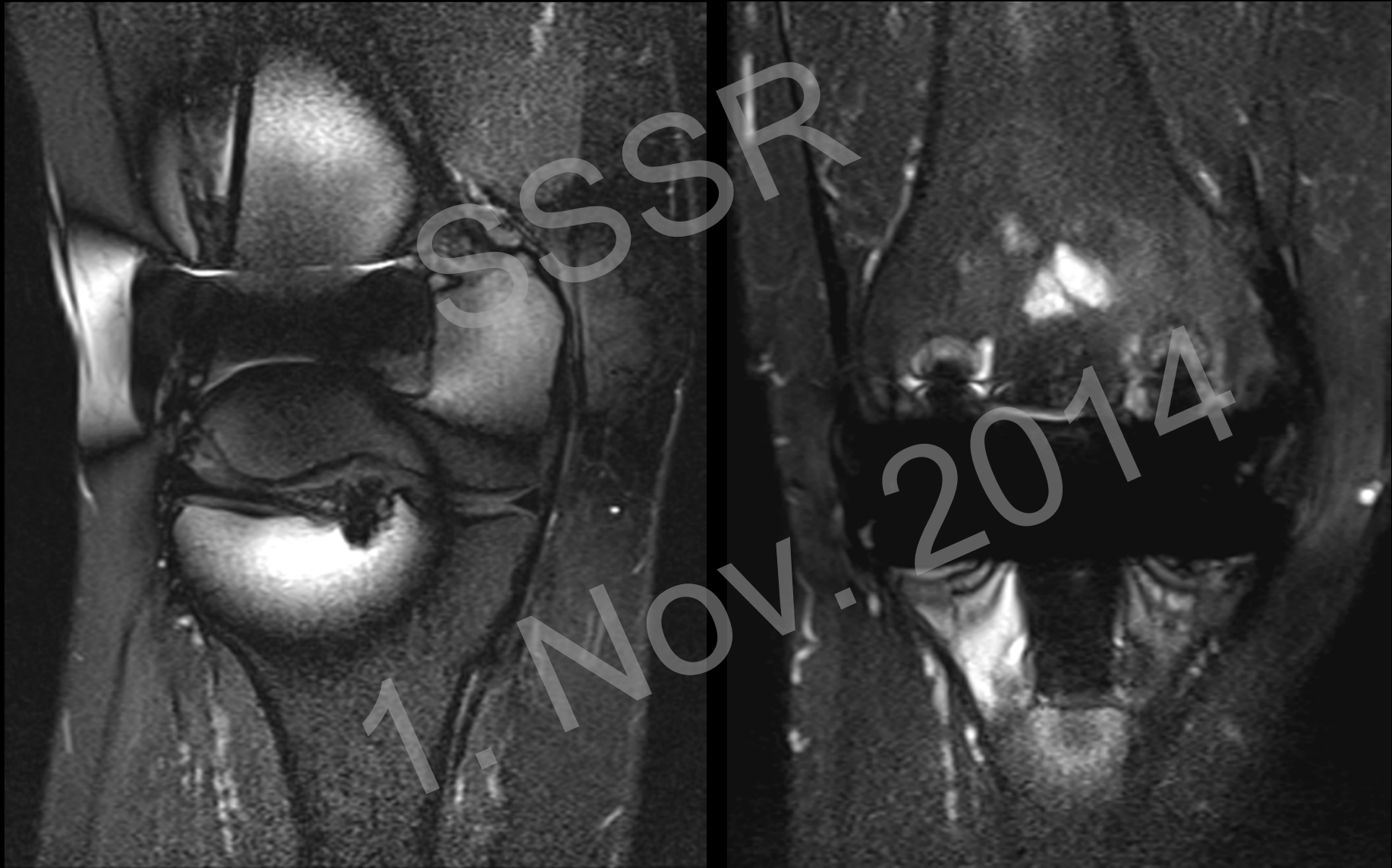
## Metal Artifact Reduction Basics and Protocol Optimization

1. Nov. 2014

# Metal artifact reduction



Is this Patient suitable for MR Imaging?





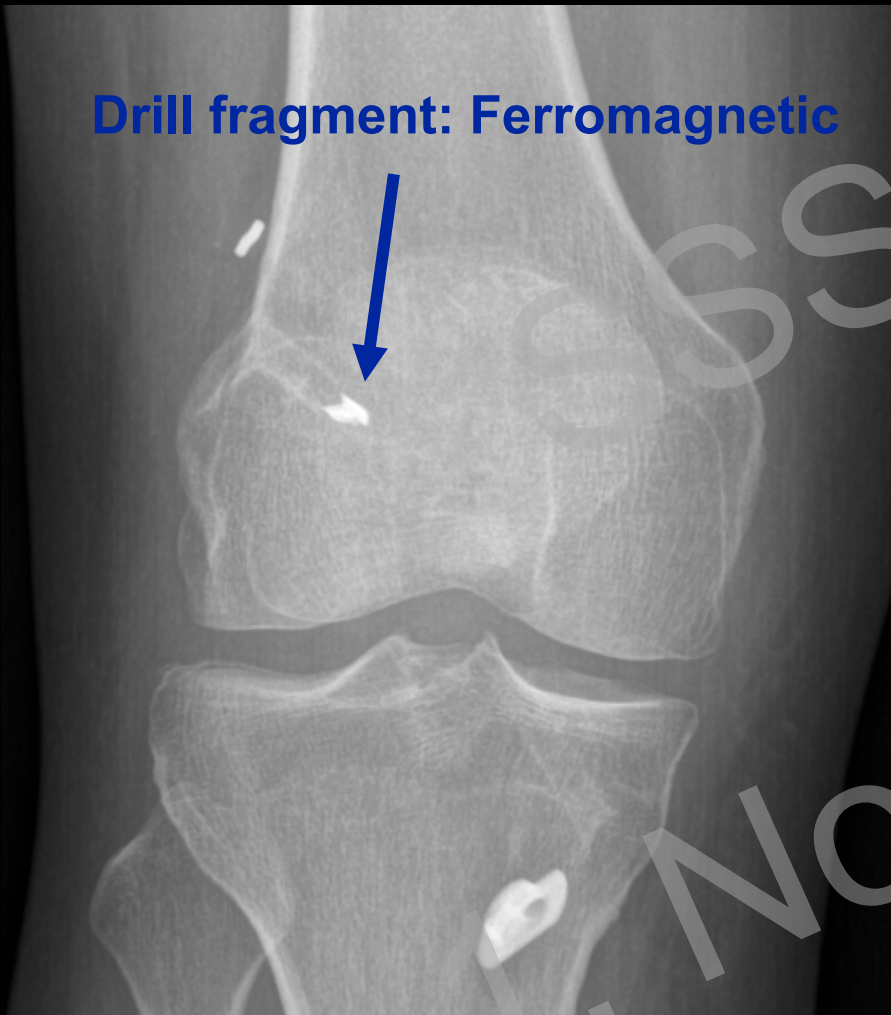
# Magnetic Susceptibility

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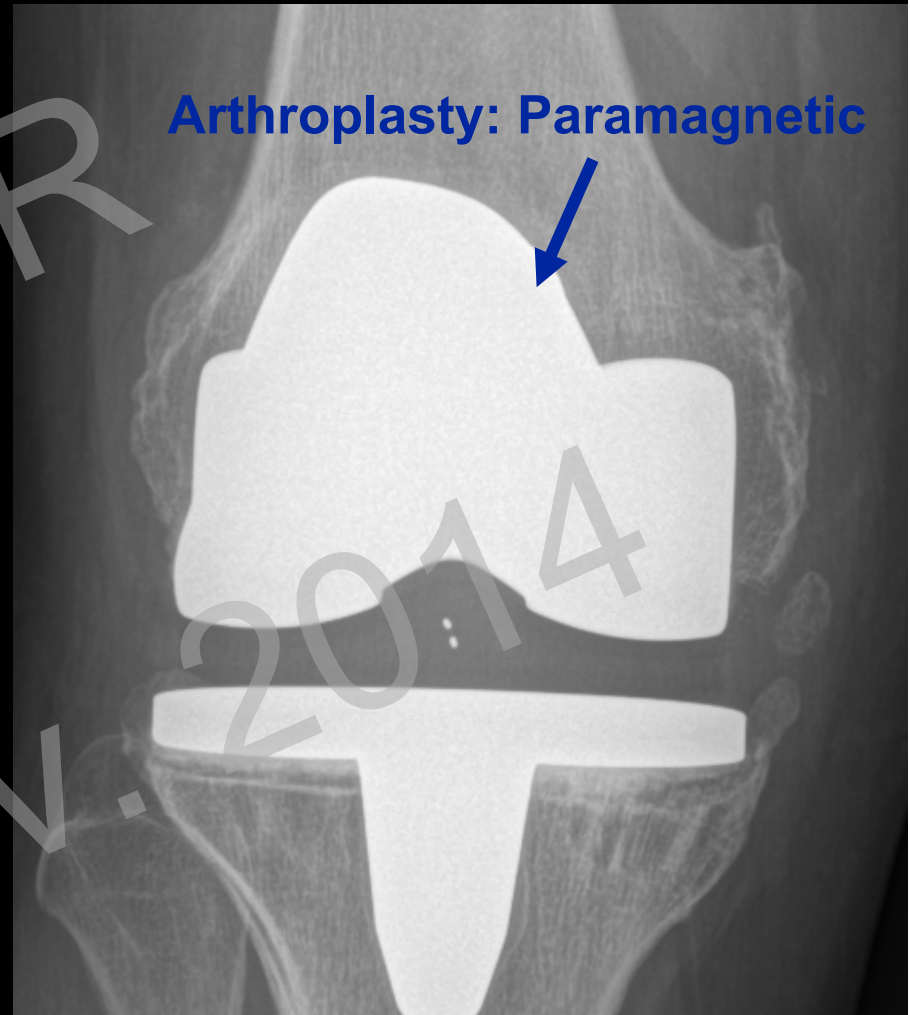
- **Diamagnetic materials** slightly oppose the applied magnetic field
  - Calcium, water, and most organic materials
- **Paramagnetic materials** slightly enhance the local magnetic field
  - Titanium, some blood degradation products, gadolinium contrast
- **Ferromagnetic materials** substantially augment the external magnetic field
  - Iron, cobalt, and nickel

# Is this Patient suitable for MR Imaging?

**Drill fragment: Ferromagnetic**



**Arthroplasty: Paramagnetic**



# Metal artifacts at MRI

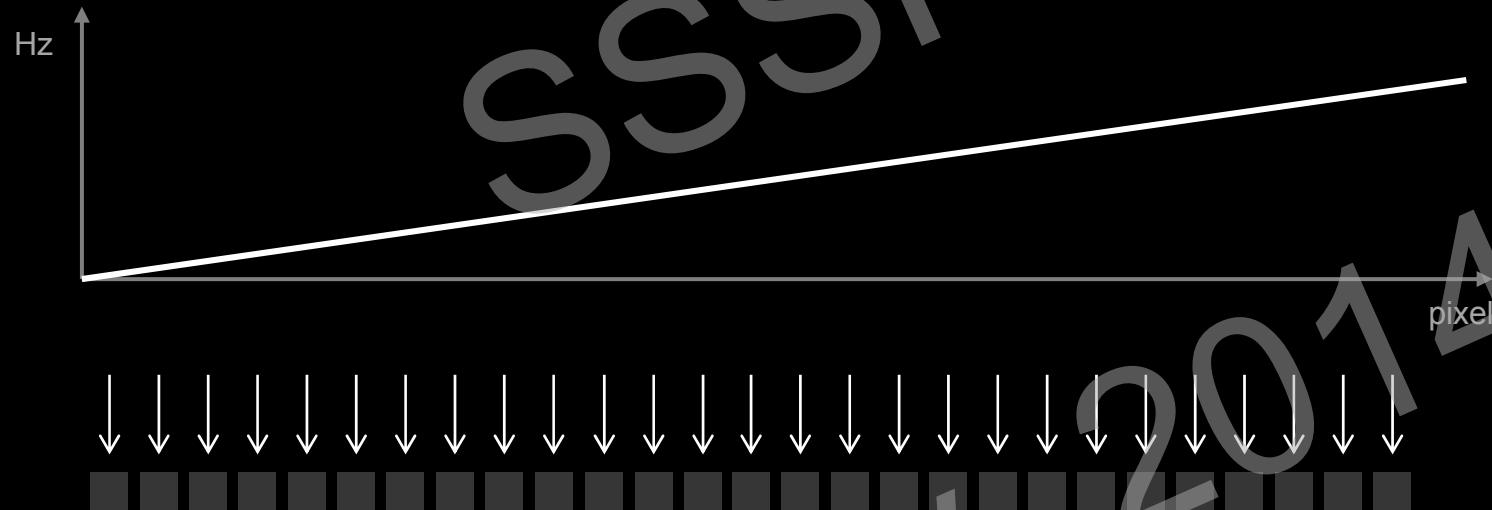
## Predominant types of artifacts

- **Signal loss** (due to spin dephasing)
- **Geometric distortion and Displacement artifacts** (due to frequency variations; can induce signal loss and pile-up)
- **Insufficient fat suppression** (due to frequency variations)



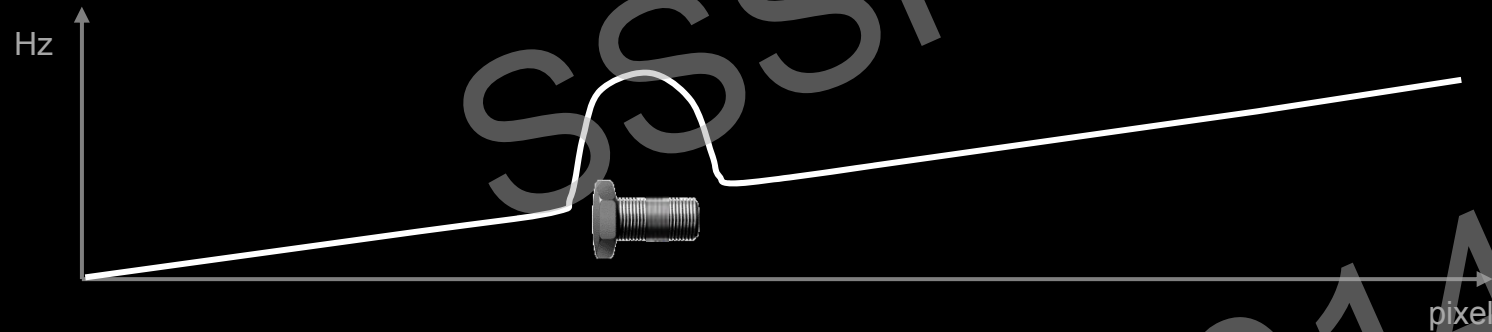
# Metal artifacts at MRI

## Signal displacement



# Metal artifacts at MRI

## Signal displacement

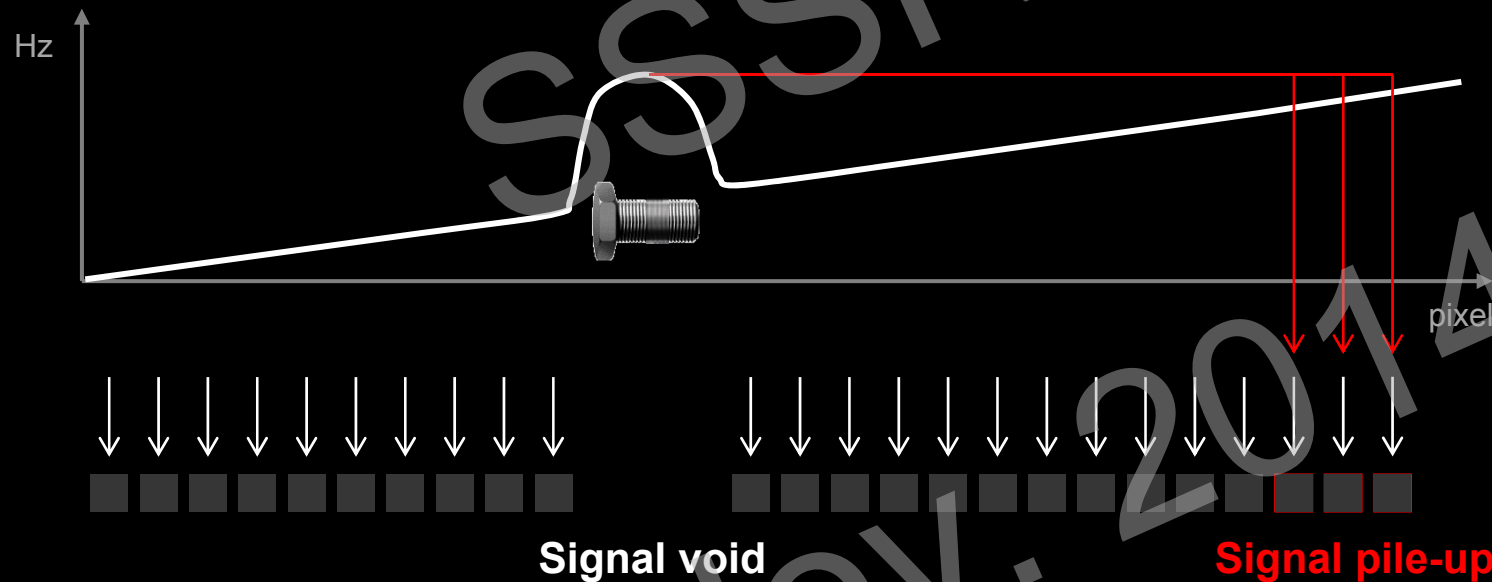


Signal void

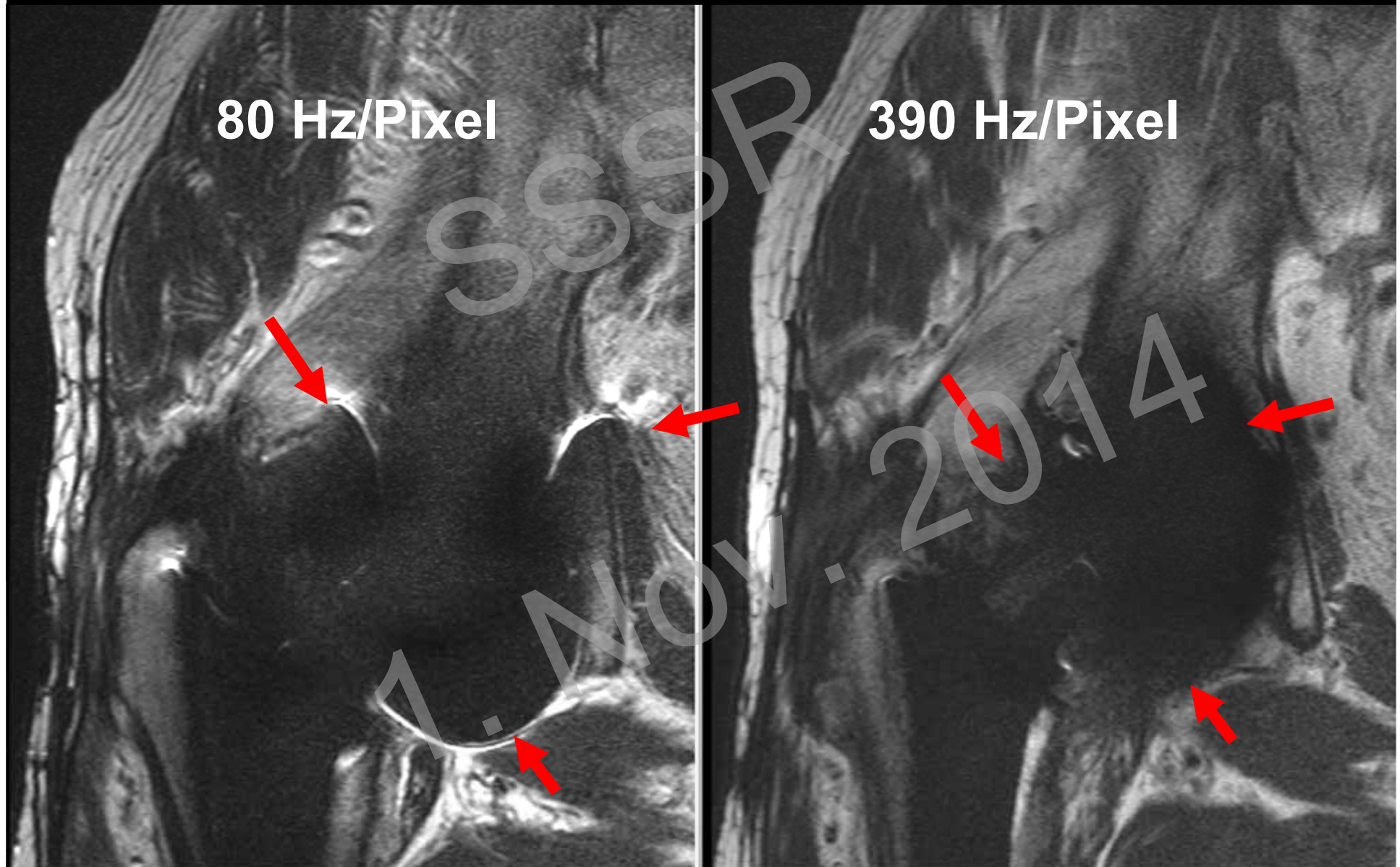


# Metal artifacts at MRI

## Signal displacement

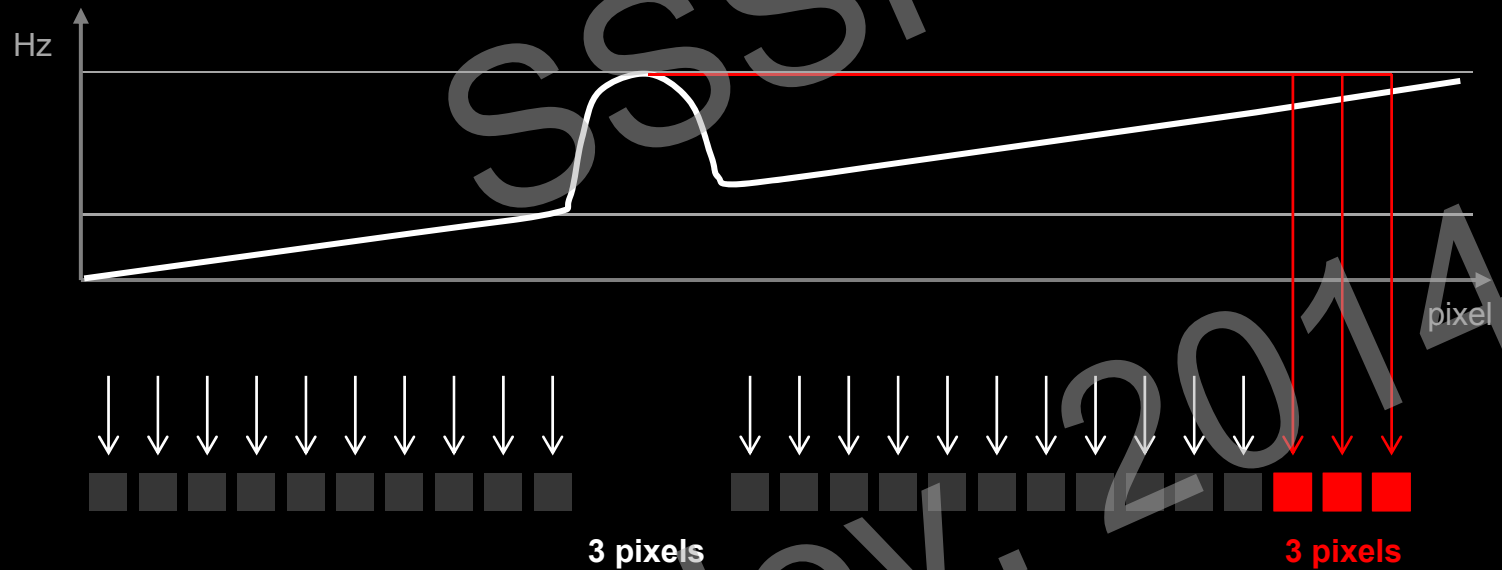


# Increased bandwidth



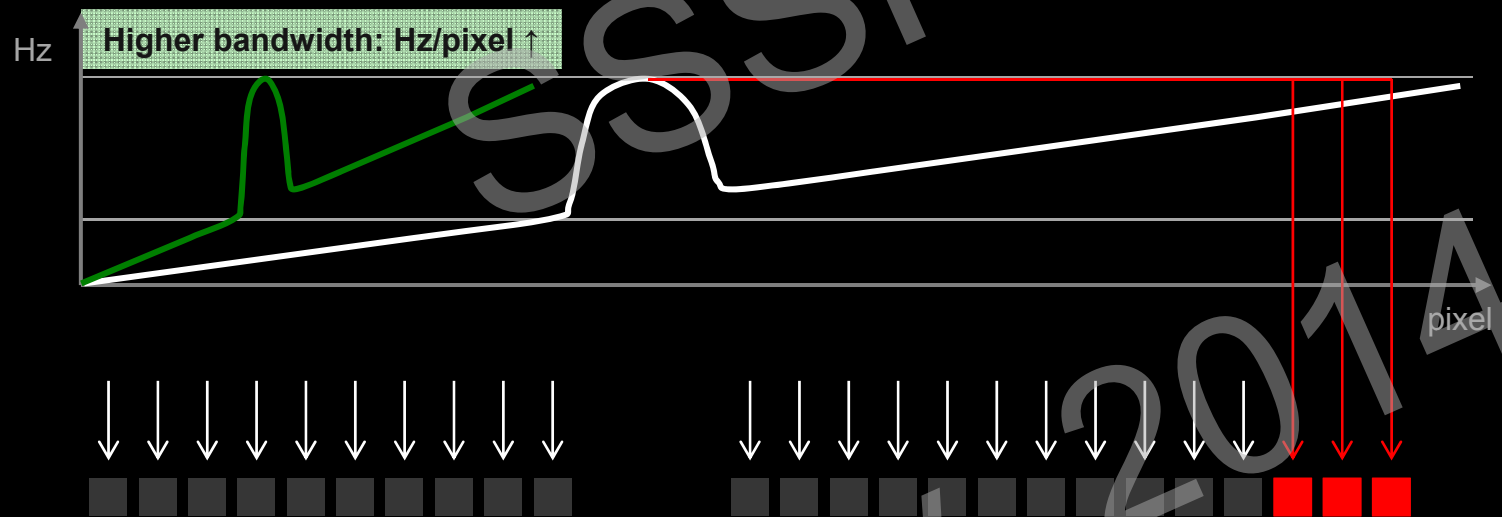
# Protocol optimization

Higher bandwidth decreases signal displacement



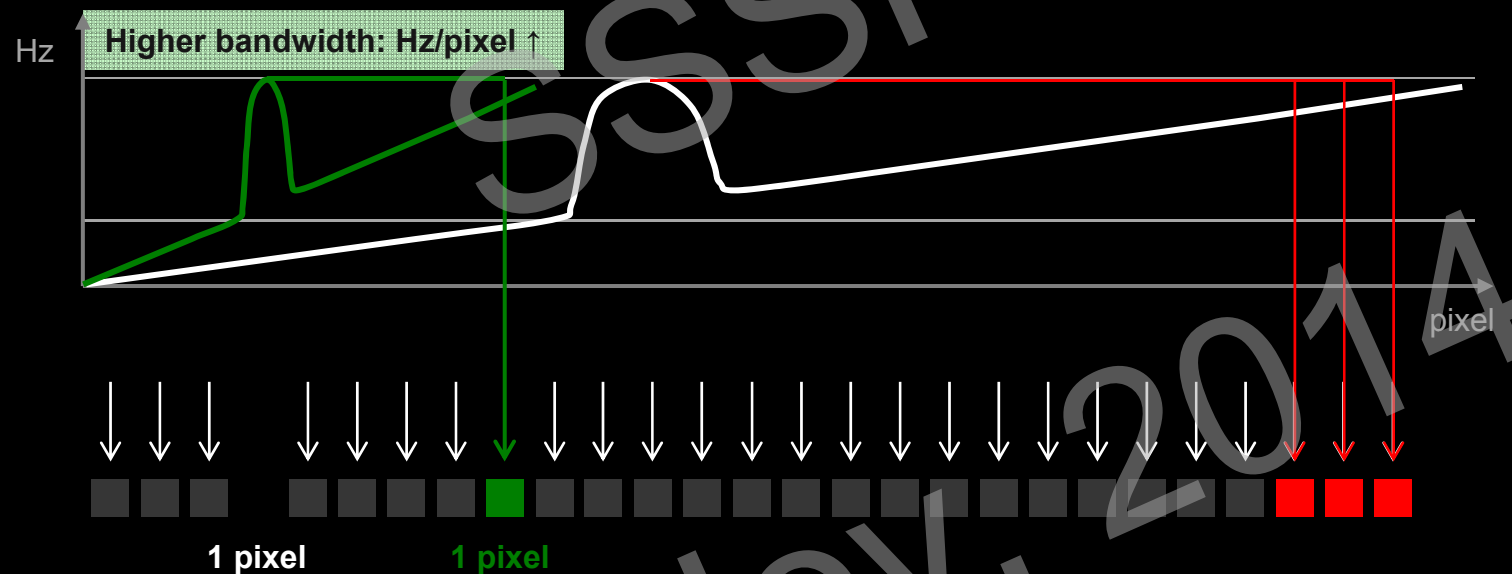
# Protocol optimization

Higher bandwidth decreases signal displacement



# Protocol optimization

Higher bandwidth decreases signal displacement



Disadvantage: SAR ↑ (excitation bandwidth)  
SNR ↓ (readout bandwidth)

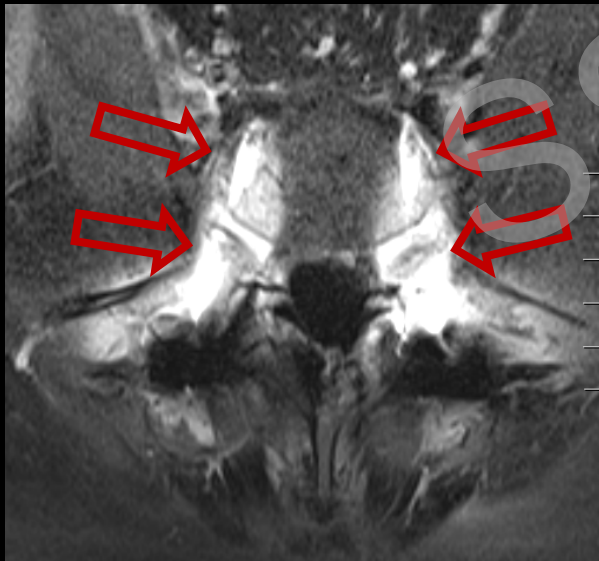


# Protocol optimization

## Optimization for Clinical Use:

- Increase excitation and readout bandwidth
- Thin sections, small voxel size, small FOV
- 1.5T much better than 3T
- Fast spin echo  
(no gradient-echo sequence or 3D-sequence)
- Long Echo-train-length
- Frequency encoding gradient parallel to long axis of prosthesis/implant
- Fat saturation?

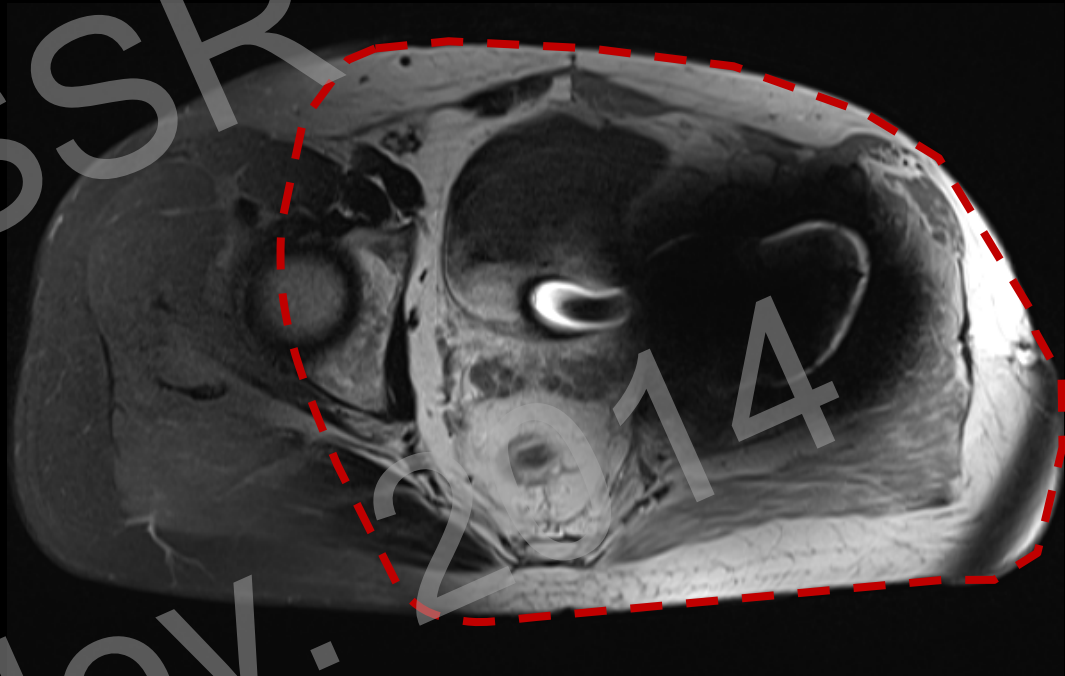
# Insufficient fat saturation



Spondylodiscitis

T1 fat sat

✘ failed fat saturation



Total hip arthroplasty

T1 fat sat

✘ failed fat saturation

# Fat saturation techniques

## Spectral Fat Saturation

based on different  
resonance frequency of water and fat



### Advantage:

- Good soft tissue contrast (Ligaments, tendons)
- Several image contrasts available

### Disadvantage:

- Susceptible to  $B_0$  and  $B_1$  inhomogeneities

## STIR (Short Tau Inversion Recovery)

based on different  
relaxation time of water and fat



### Advantage:

- Stable for  $B_0$  inhomogeneities

### Disadvantage:

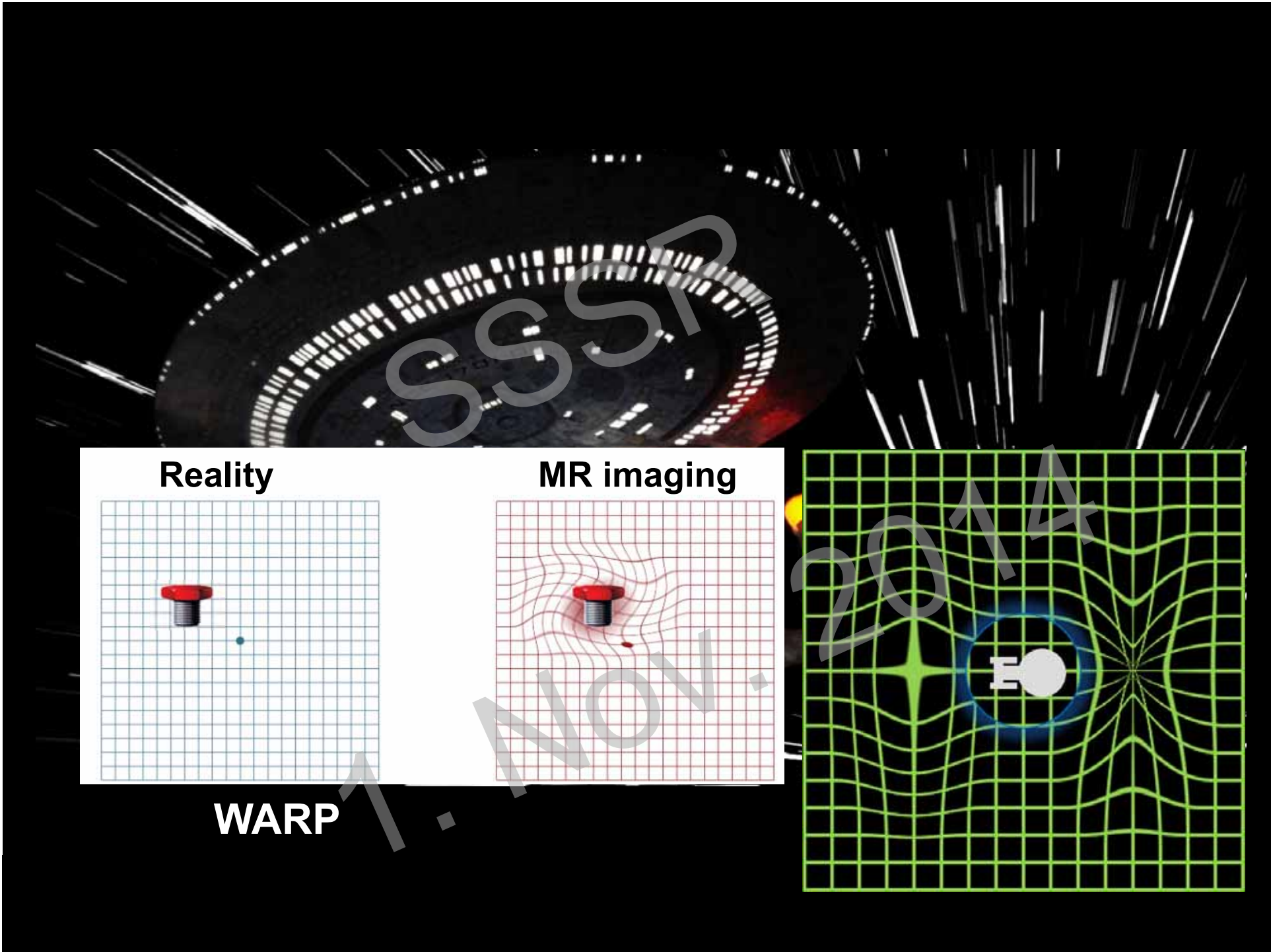
- Low SNR
- Not usable for contrast enhancement
- Susceptible to  $B_1$  inhomogeneities



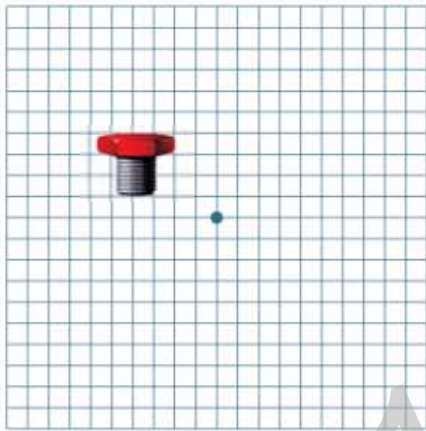
**MARS**

**Metal Artifact Reduction Sequence**

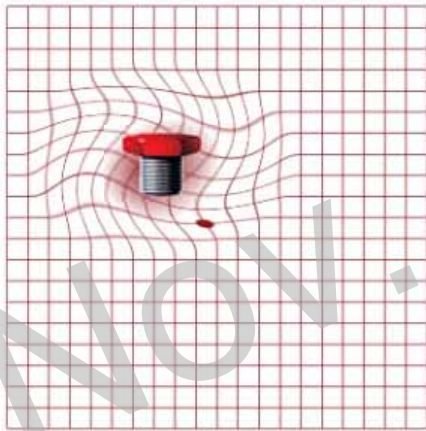




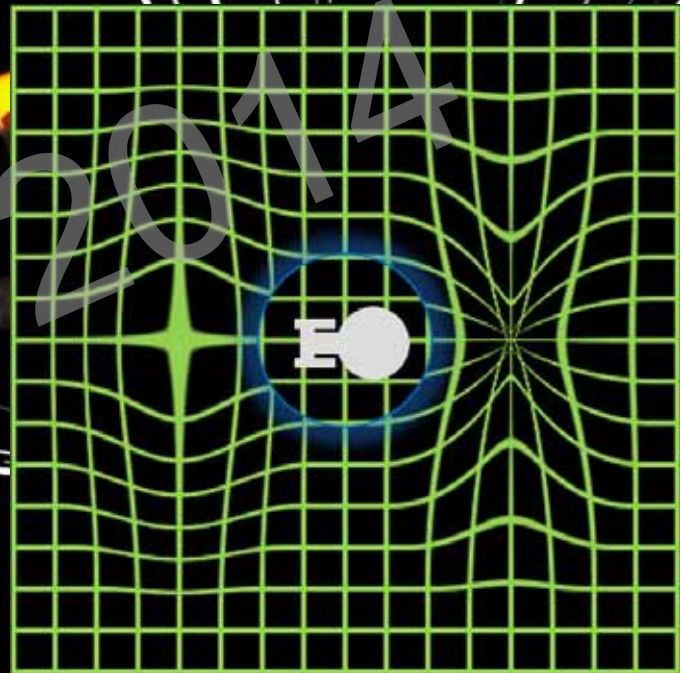
**Reality**



**MR imaging**



**WARP**





# OUTLINE

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**New MRI techniques**

1. Nov. 2014

# New MRI techniques

STIR with optimized inversion RF pulse (STIR WARP)

Dixon technique

View-angle tilting (VAT)

Through-plane distortion correction (SEMAC, MAVRIC)

# 1. STIR WARP

## Standard STIR sequence

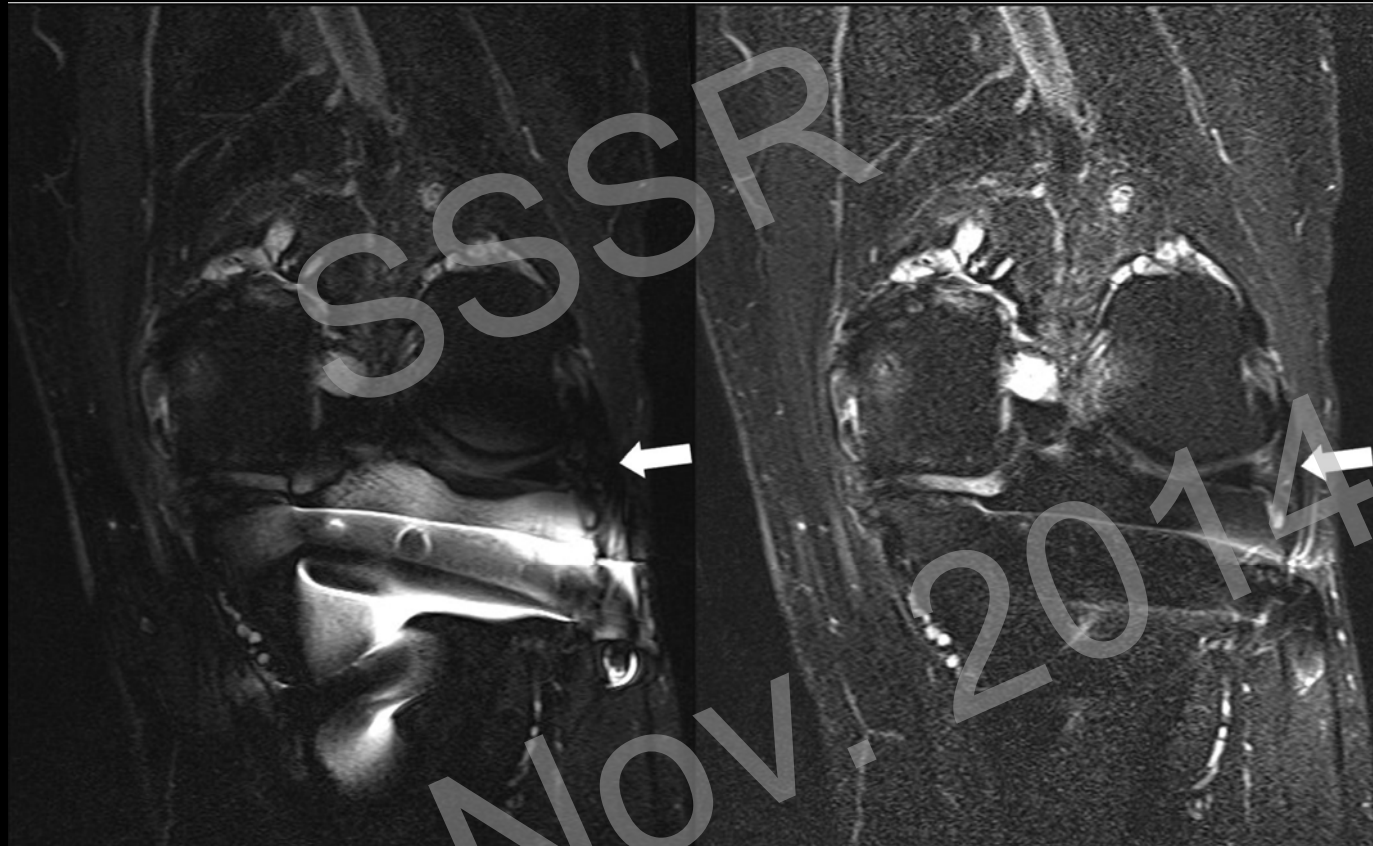
Inversion RF pulse with reduced bandwidth → lower SAR

## STIR with Optimized Inversion Pulse = STIR WARP

increased bandwidth of inversion RF pulse, matches  
increased bandwidth of excitation RF pulse

→ robust STIR contrast around metal implants

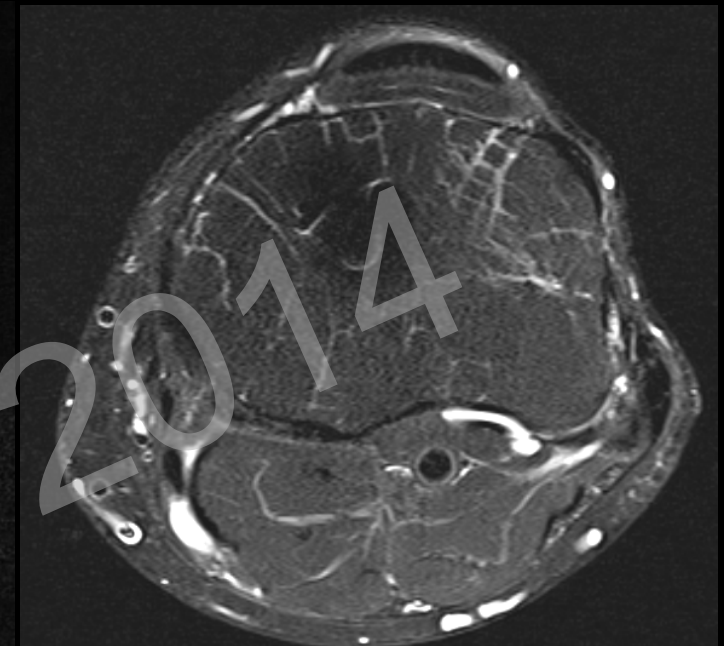
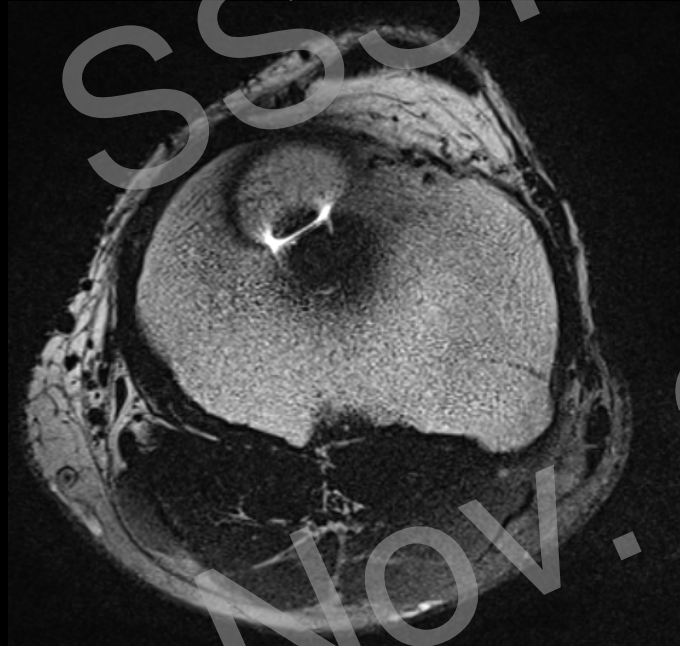
# STIR WARP



STIR highBW

STIR WARP  
(optimized inversion pulse)

# STIR WARP



PD fs high BW

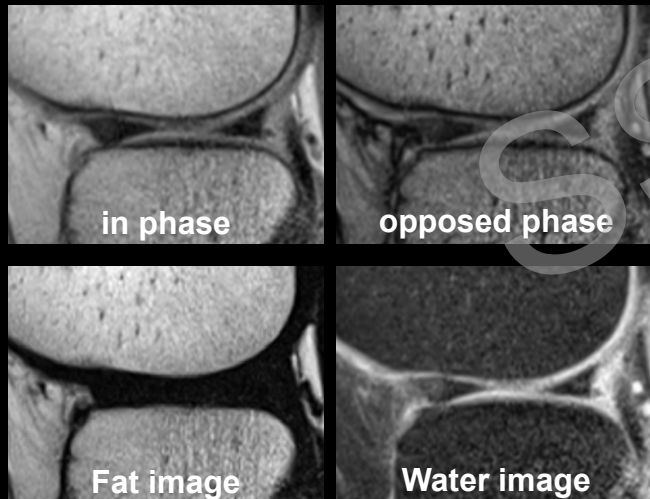
✘ failed fat saturation

STIR WARP



## 2. Dixon technique

Based on different resonance frequency of water and fat



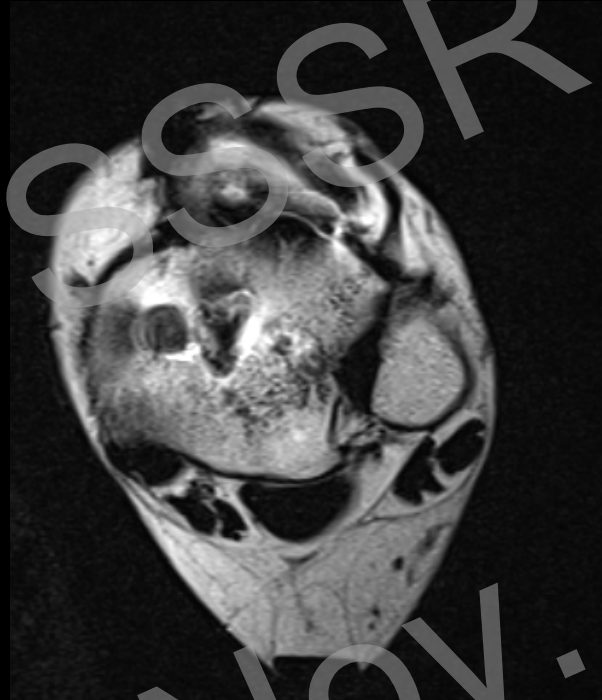
Advantage :

- Stable for  $B_0$  and  $B_1$  inhomogeneities
- Extensive anatomic coverage feasible
- 4 image contrasts in a single sequence

Disadvantage :

- Residual artifacts at bone-metal interface
- Prolonged acquisition and image reconstruction

# Dixon technique



tra T1 fat sat highBW  
after iv gadolinium

Dixon (water image)  
after iv gadolinium

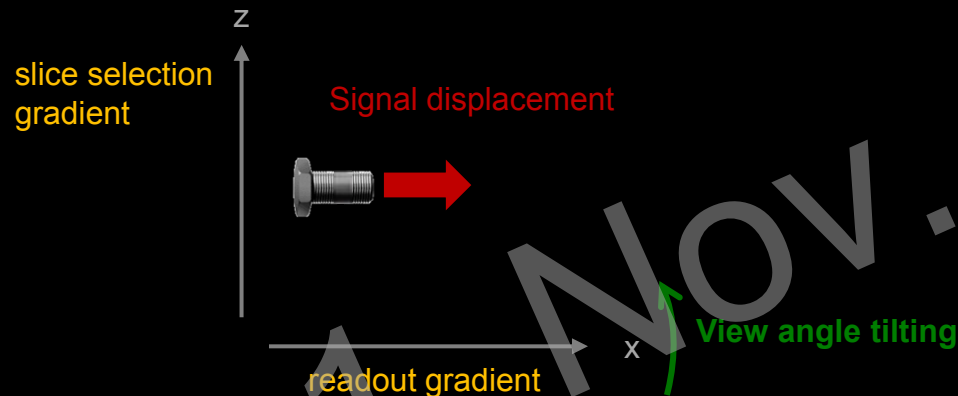
✘ failed fat saturation

# 3. View-Angle Tilting

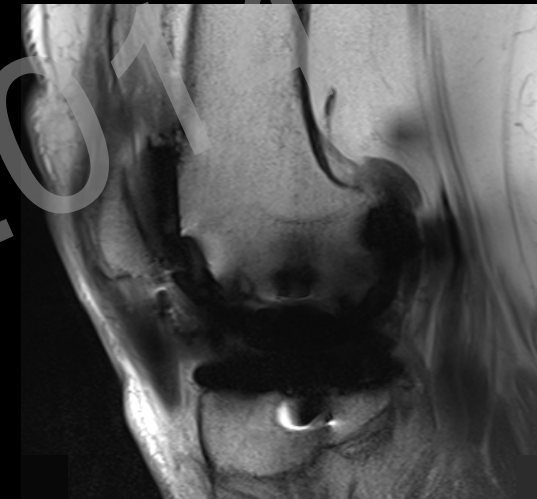
## View-angle tilting (VAT)

Additional compensation gradient shifts the view-angle during readout

→ View-angle displacement cancels in-plane displacement



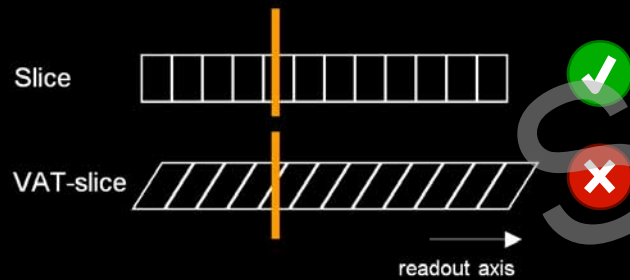
# View-Angle Tilting



# View-Angle Tilting

## Slice shearing effect

Blurring of some anatomic structures

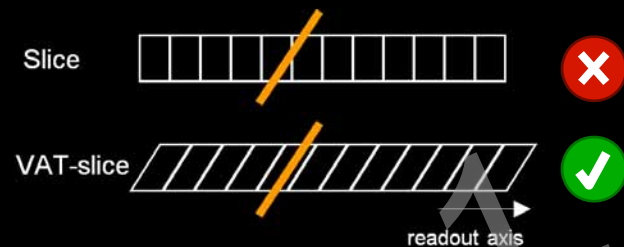


no VAT



with VAT

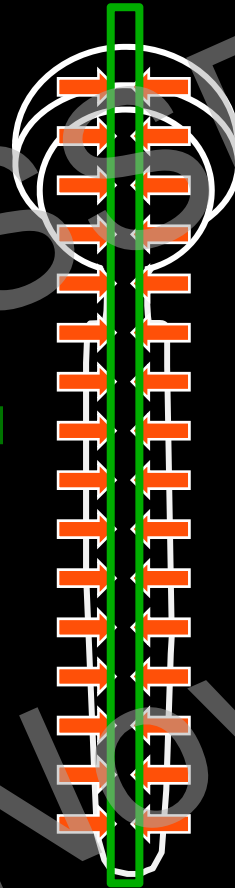
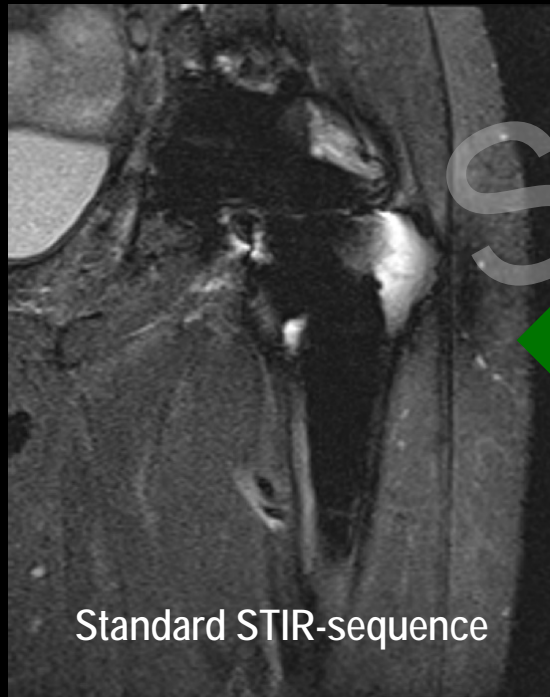
Opposite effect for other structures





# 4. Through-plane artifacts

Only in-plane artifact reduction

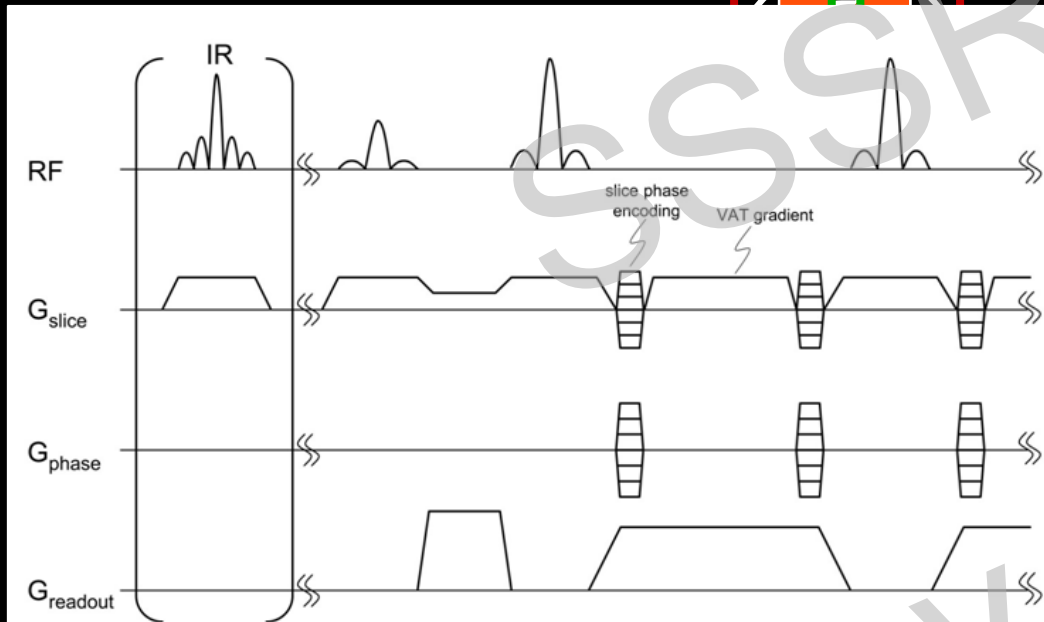


# Through-plane artifacts

Only in-plane artifact reduction



Additional through-plane artifact reduction



**Additional gradients applied:**

- Slice phase encoding (SEMAC)
- View-angle tilting (VAT)



STIR-SEMAC sequence

**Slice Encoding for Metal Artifact Correction (SEMAC)**



# SEMAC for Total Hip Arthroplasty

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transverse T1-hiBW



transverse T1-SEMAC

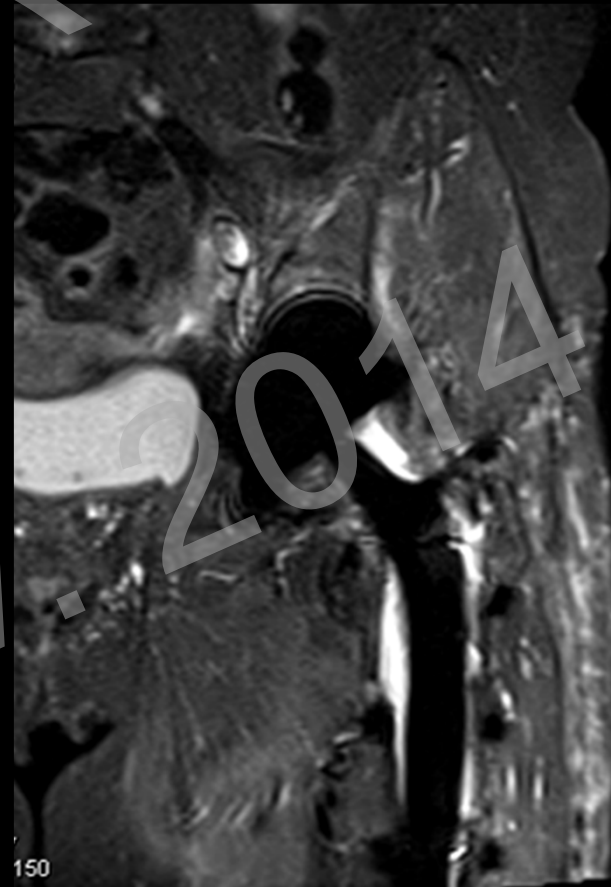
# SEMAC for Total Hip Arthroplasty

conventional STIR

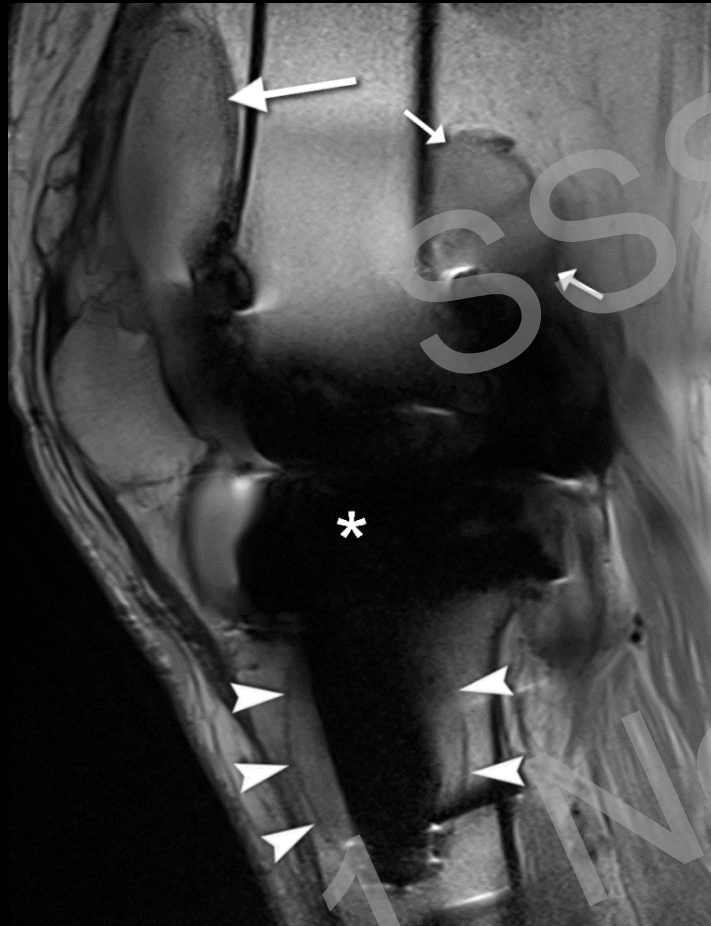
(high bandwidth)



STIR SEMAC TSE



# SEMAC for Total Knee Arthroplasty



sag PD-hiBW



sag PD-SEMAC



# SEMAC for Total Knee Arthroplasty

Periprosthetic osteolysis better seen at SEMAC



cor STIR-hiBW

cor STIR-SEMAC

CT

# MAVRIC

## MAVRIC

(multi-acquisition variable-resonance  
image combination)

## MAVRIC-SL

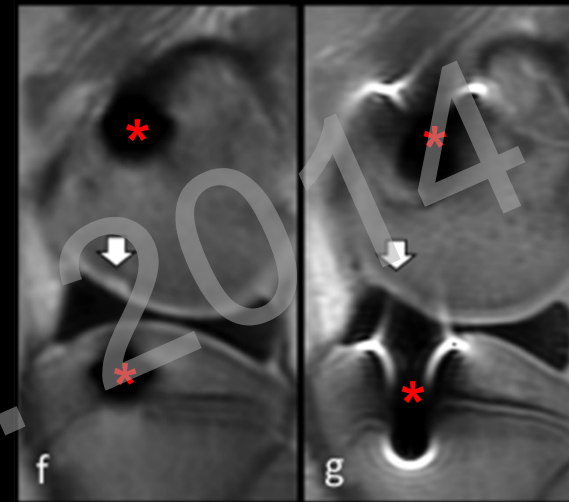
Combined MAVRIC-SEMAC

### MAVRIC-STIR



### MAVRIC-SL PD

### PD (FSE)



Pig model with screws (\*)

# OUTLINE

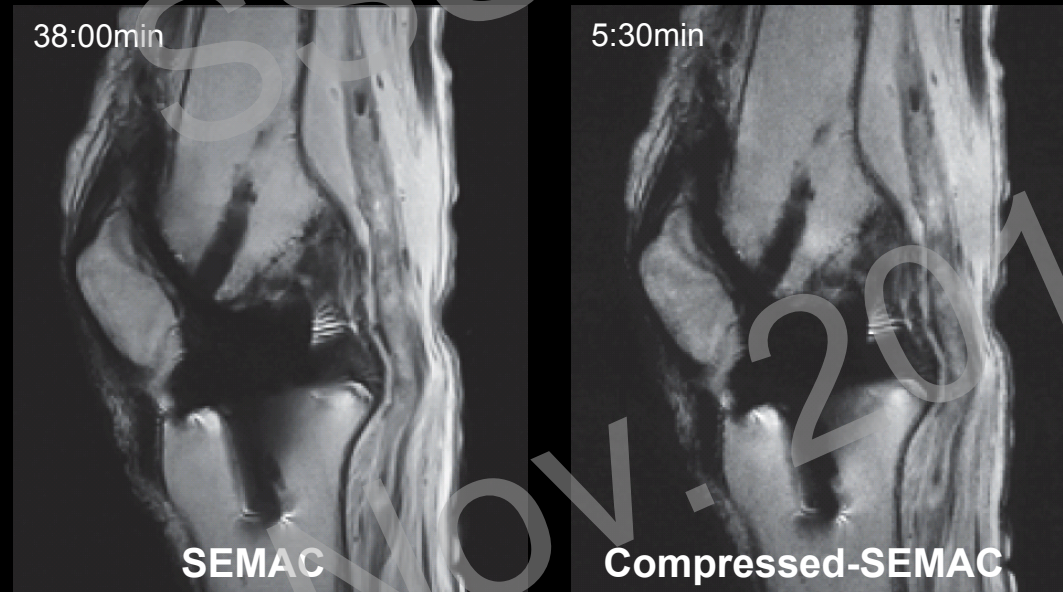
SSSR

Next steps

1. Nov. 2014

# Compressed sensing

Mathematical concept that creates high-resolution data sets from low-resolution samples

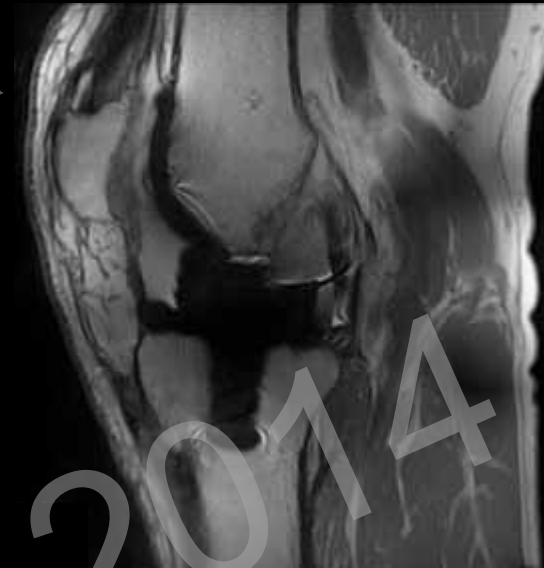




# MRI with knee prosthesis at 3T



PD sag



**Standard sequence**  
high-bandwidth

**Ultra high bandwidth RF-pulse+SEMAC**  
RF-pulse with 4000 Hz  
local transmit coil with high  $B_1$  amplitude

# TAKE HOME MESSAGE

- MR imaging of metal implants is feasible
- New MRI techniques have clinically relevant advantage and will become even faster in the next 5 years
- MRI is part of diagnostic algorithm for patients with total hip / knee arthroplasty at Balgrist

# Thank you



*Reto.Sutter@balgrist.ch*