

MRI in the Diagnoses and Stratification of Acute Stroke and TBI

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July 22, 2016

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National Institutes of Neurological Diseases and Stroke, Bethesda, MD

Acute Studies Core
Center for Neuroscience and Regenerative Medicine



Serendipity

*Dans les champs de l'observation le hasard
ne favorise que les esprits prepares*

-Louis Pasteur

In the fields of observation chance favors
only the prepared mind.

Hypothesis Driven Research

Diffusion tensor imaging of acute mild traumatic brain injury in adolescents

EA Wilde, SR McCauley, JV Hunter, ED Bigler, Z Chu... - *Neurology*, 2008 - AAN Enterprises

Background: Despite normal CT imaging and neurologic functioning, many individuals report postconcussion symptoms following mild traumatic brain injury (MTBI). This dissociation has been enigmatic for clinicians and investigators. Methods: Diffusion tensor ...

Cited by 334 Related articles All 4 versions Web of Science: 213 Cite Save

Figure 1 Diffusion tensor imaging (DTI) tractography illustrating the commissural fibers coursing through the corpus callosum in an uninjured control subject

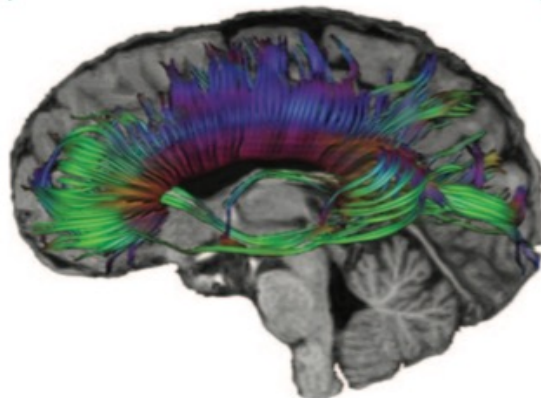
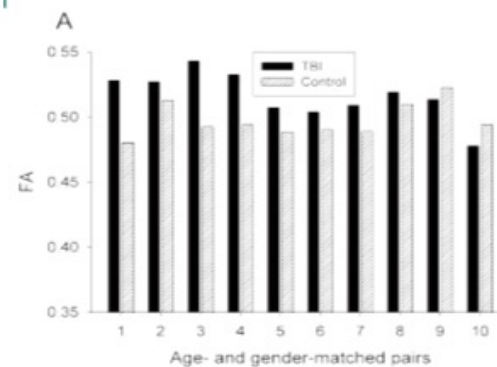
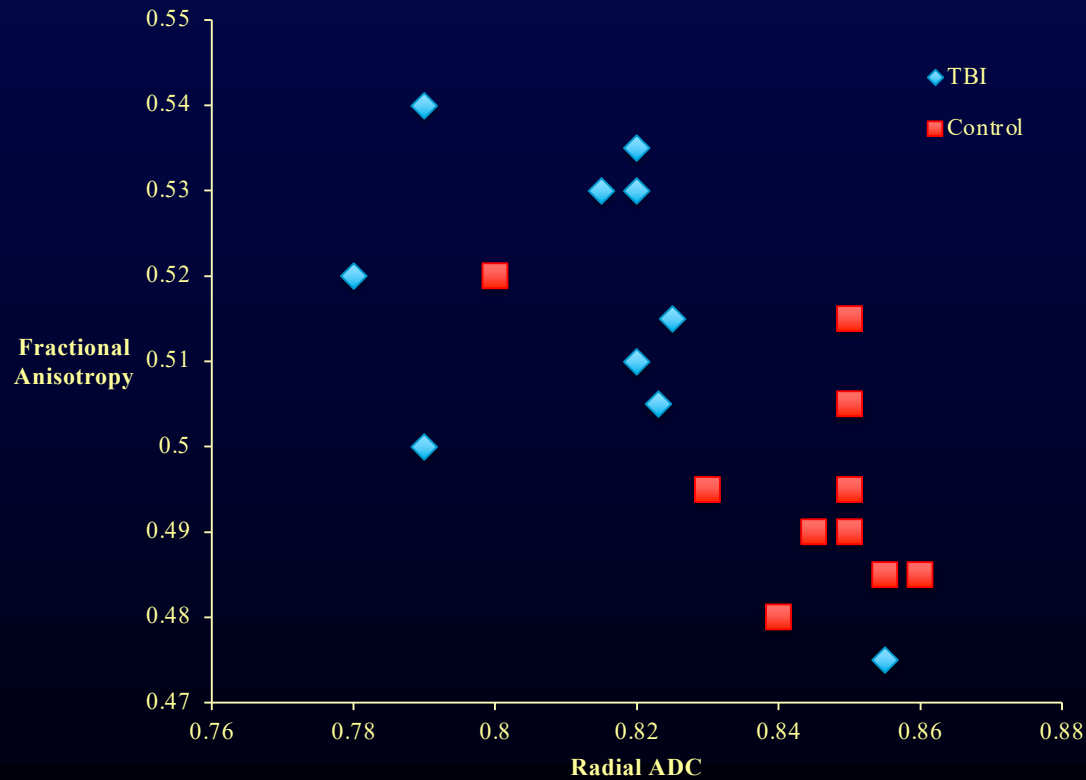


Figure 2 Bar graphs illustrating the relation of diffusion tensor imaging indices fractional anisotropy (FA) and apparent diffusion coefficient (ADC) in the corpus callosum for each subject with mild traumatic brain injury (TBI) relative to an age- and gender-matched control subject



Disease vs Control



mTBI
 $FA = 0.516$

Control
 $FA = 0.496$

“Contrast”
 $E = 0.020$

“Noise”
 $S = 0.016$

$N_o = N_1 = 14$

Summary

- FA and/or ADC can be used to Dx mTBI...
- We can all go home now...Right?

Summary

- FA and/or ADC can be used to Dx mTBI...
- We can all go home now...Right?

Wrong.

1. Diagnosis already exists, why is imaging needed?
2. Do all Dx of mTBI actually have TBI?
3. Are all mTBI the same...one phenomena?
4. Is it reasonable to expect the imaging biomarker is valid?

Stroke Team

Suburban Hospital



2015-16 Vascular Neurology Fellows



*Washington Hospital
Center*



24 hours, 365 days

17:17 Code one paged by Blue team for 31F with Sz disorder presented with LUE weakness, L Facial droop and dysarthria started 45min prior to arrival. Proceeded to MRI -> RMCA stroke with large perfusion mismatch -> IVtPA given DTN 44min -> IR suite: TIC1 2B, first visualization showed R M1 and distal vessels re-canalized with tPA alone by the time they were able to do the angio, microcatheter wire and IA tPA were given to try to recanalize M3/4 frontal branch. Patient intubated for the procedure. No NOK was available by phone or in person or NH consent. Only person at bedside of fiancée'. Admitted to ICU. Patient intubated or procedure. Blood in freezer.

- Alexis Simpkins

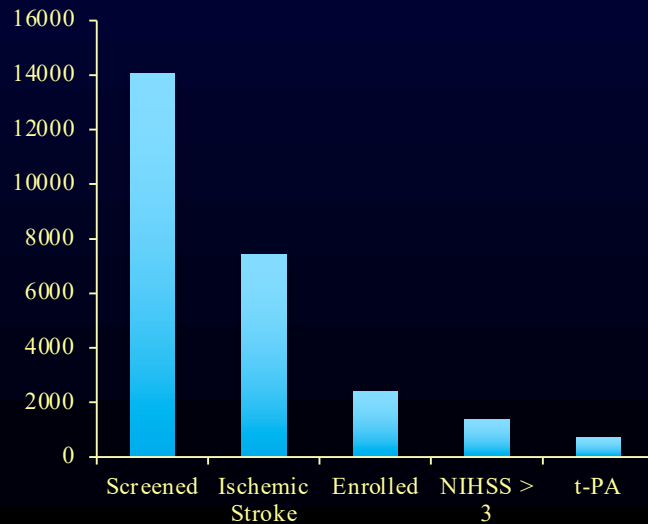
Program – Stroke and TBI

- Attending Neurologists
- Clinical Coordinators
- MRI Technologists
- Neurology Fellows
- Neurology Residents
- Nurse Responders
- Physician Assistant
- Post-Docs
- Program Managers
- Research Nurses
- Research Assistants
- Scientists

Natural History Studies

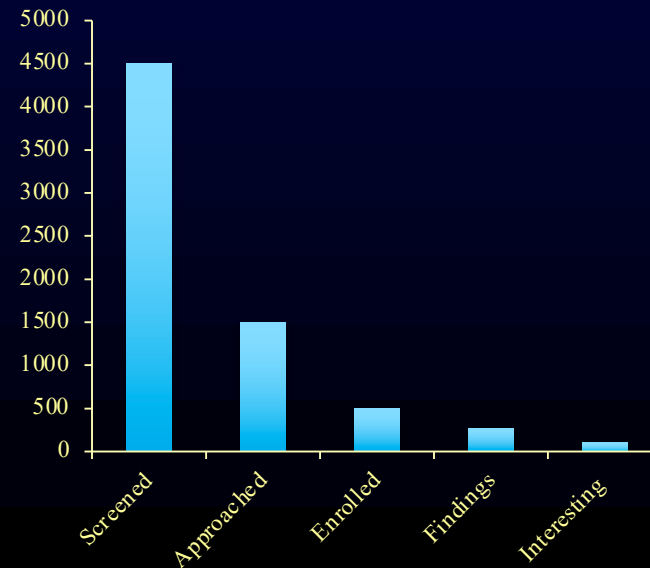
Stroke

- Registry
- 01-N-0007 Protocol



TBI

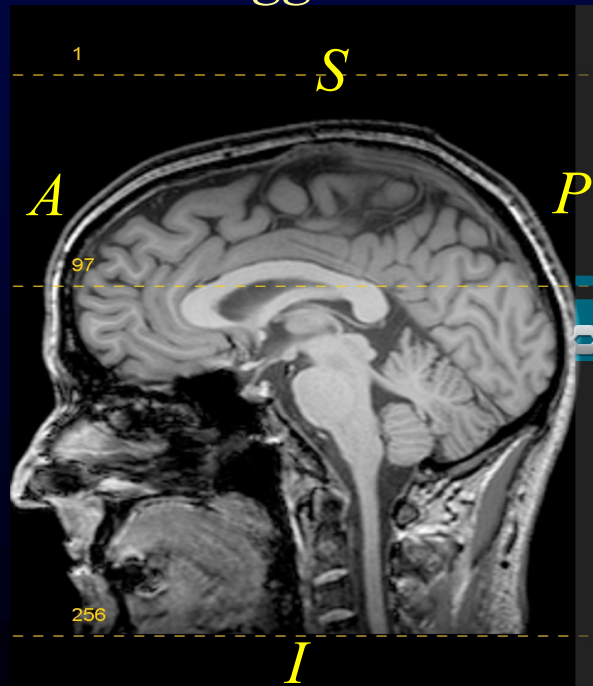
- 11-N-0084 “Screening”
- 10-N-0122 “THINC”



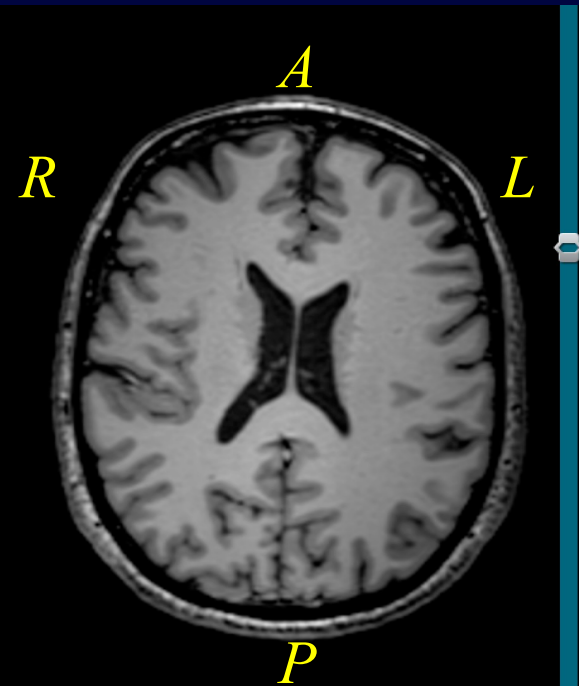
BASIC IMAGING PRIMER

Basic Image Orientation

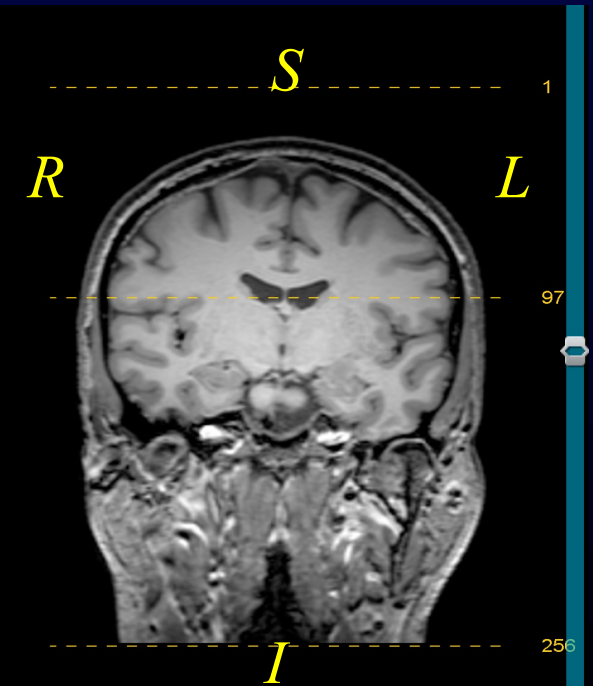
Saggital



Axial



Coronal



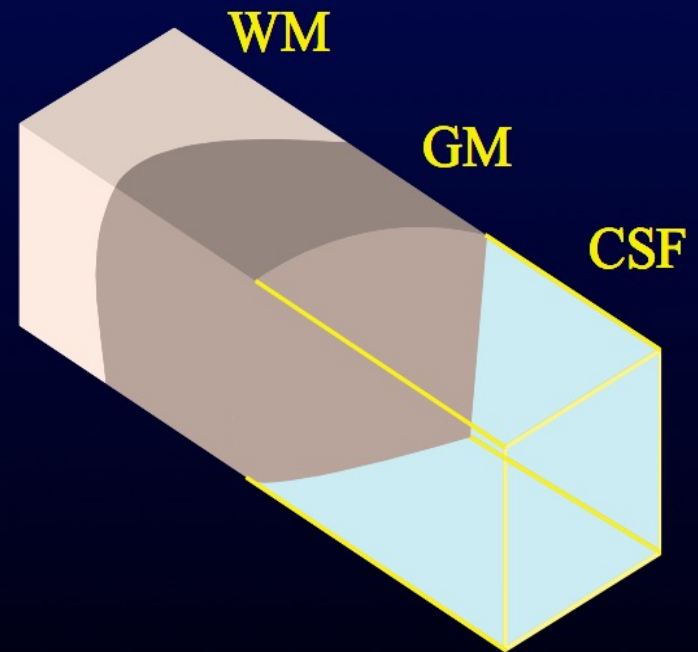
...predementia reminder #1 ... CT then Endo 1 baseline

Partial Volume Averaging

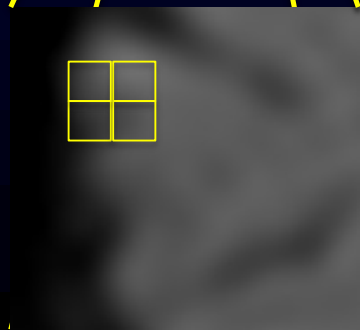
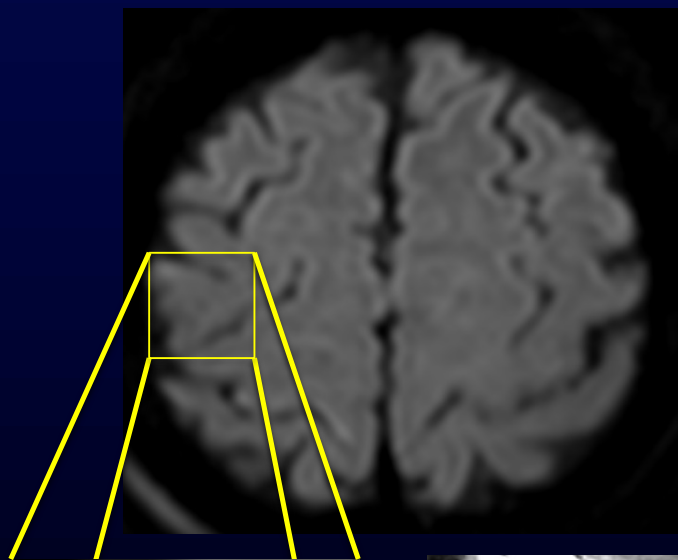
Slices



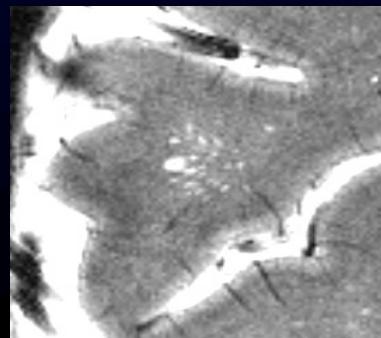
One voxel, many tissues



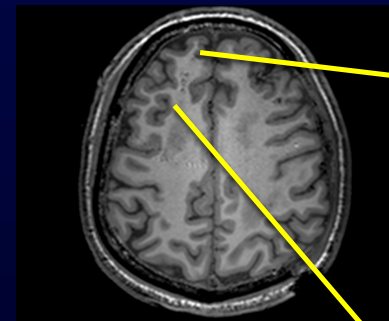
Resolution vs Sensitivity



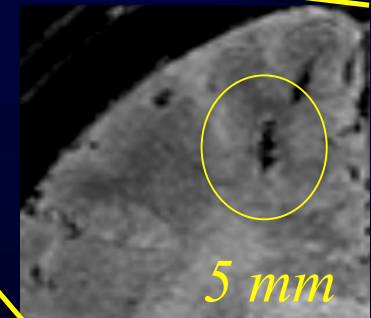
~ 3 mm Voxel



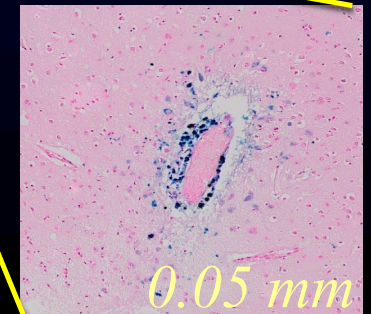
~ 0.3 mm Voxel



MRI



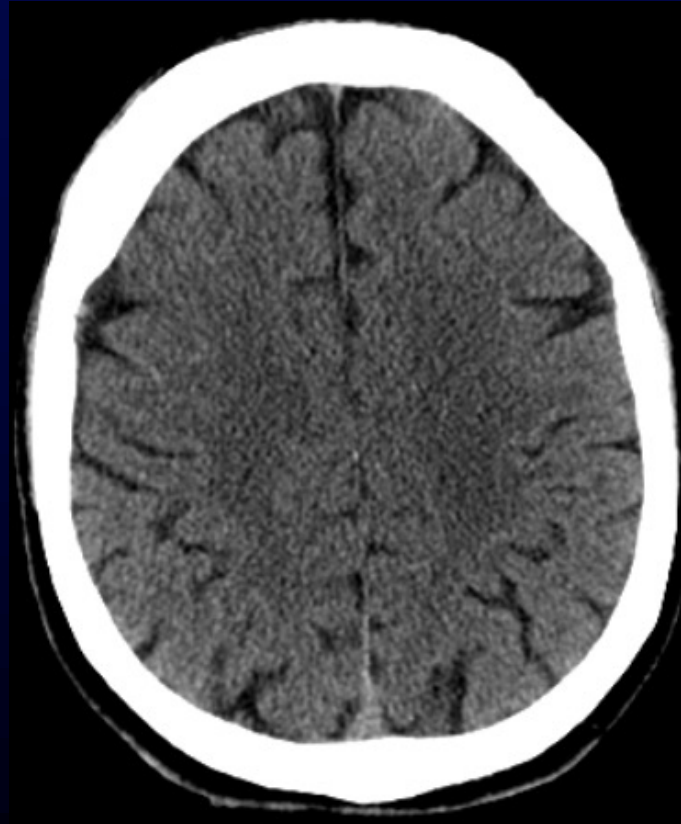
Histology



0.05 mm

CT Negative = Invisible Injury

In a patient with post concussion syndrome



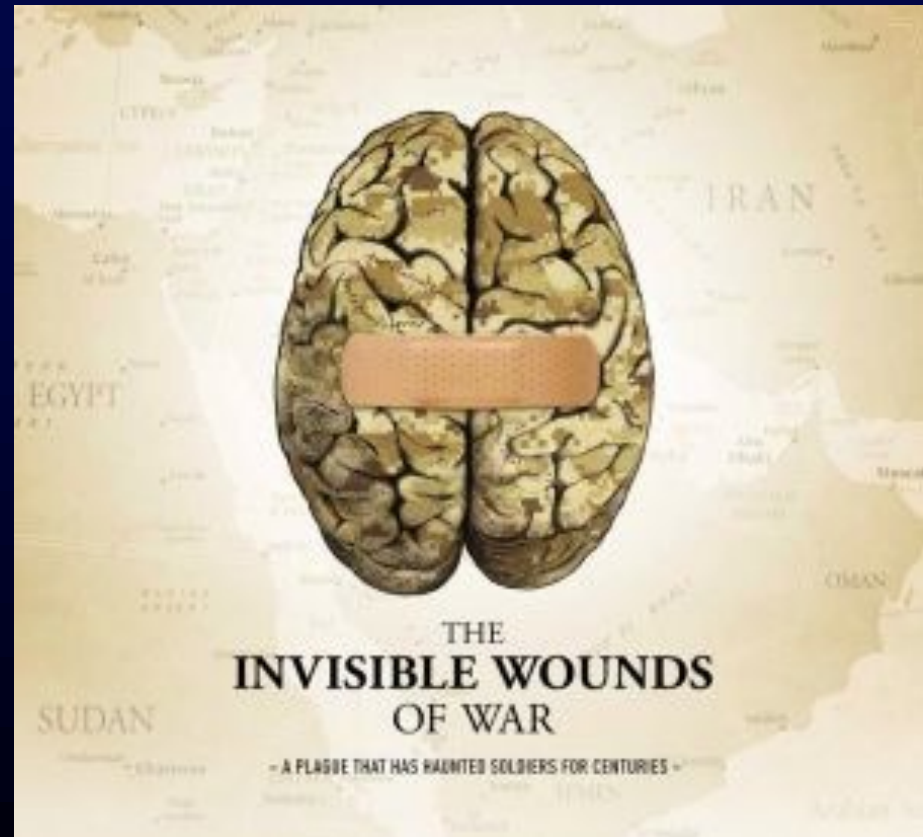
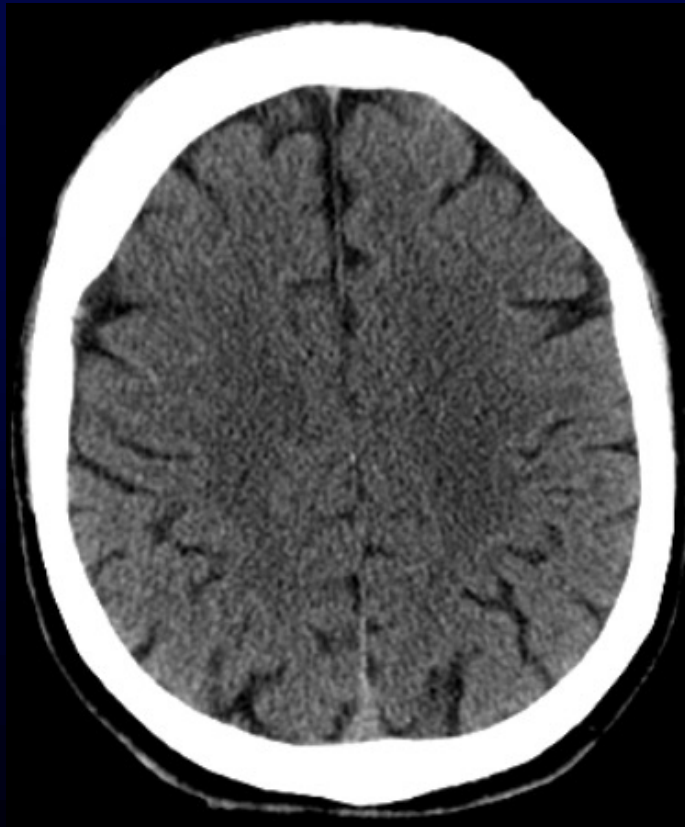
SYMPTOM OR BIOLOGY?

...not just with TBI or Stroke

FUNDAMENTAL PROBLEM

CT Negative = Invisible Injury

In a patient with post concussion syndrome





Chinese artist Huang Guofu

“No longer Gage”

His mind was radically changed, so decidedly that his friends and acquaintances said he was ‘no longer Gage.’





*Graham Gordon Ramsay
Phineas Gage's skull and life mask, 2001 Color print
Francis A. Countway Library of Medicine, Warren Anatomical Museum*

2011 NHL Playoffs



Legislation

Bill addressing student concussions advances

Some pro athletes push for passage



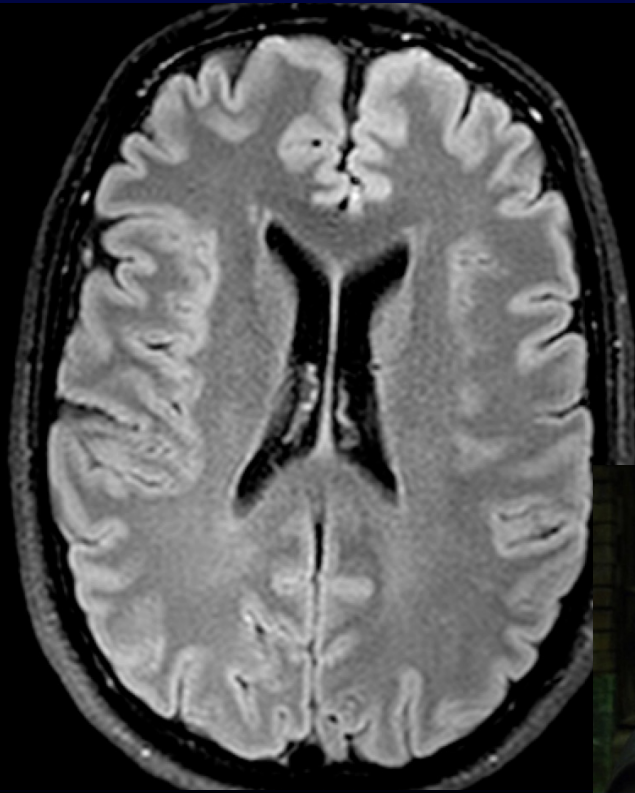
Ted Johnson, former New England Patriots linebacker, spoke at a State House rally yesterday in favor of a bill that would limit how soon a student athlete can return to play after suffering a concussion. Johnson called concussions "the invisible injury." (Essdras M Suarez/ Globe Staff)

Zack Lystedt

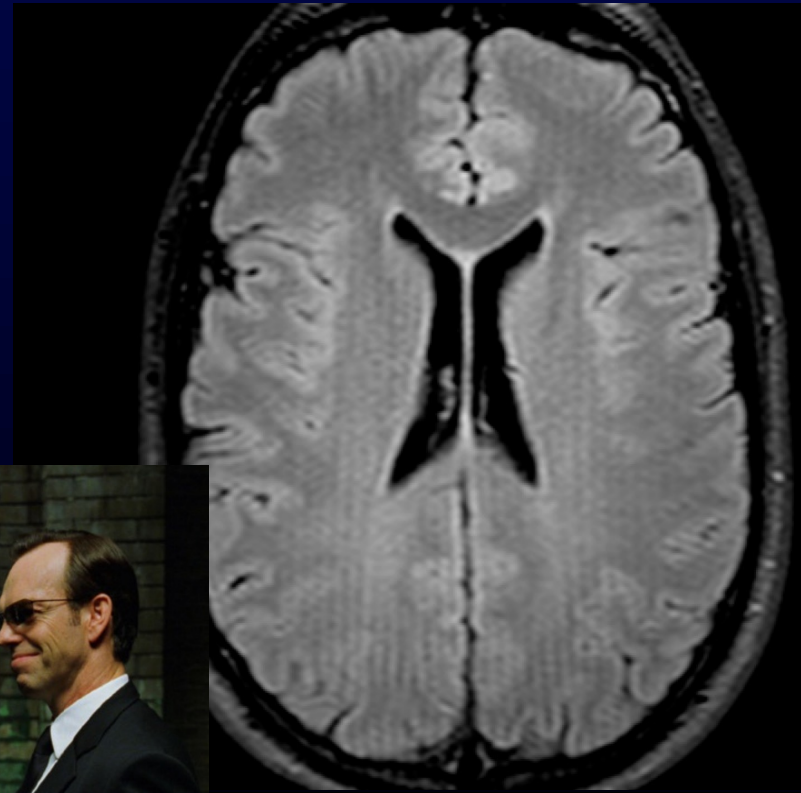


How do we diagnose disease

- Control



- Schizophrenia



Mental Health

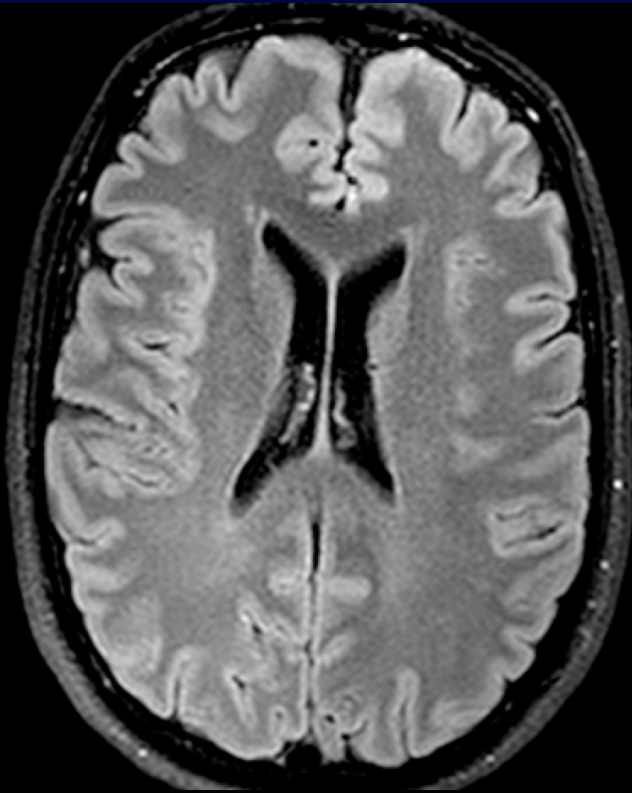
Dr. Insel, NIMH

“The weakness is its lack of validity. Unlike our definitions of ischemic heart disease, lymphoma, or AIDS, the DSM diagnoses are based on a consensus about clusters of clinical symptoms, not any objective laboratory measure. In the rest of medicine, this would be equivalent to creating diagnostic systems based on the nature of chest pain or the quality of fever. Indeed, symptom-based diagnosis, once common in other areas of medicine, has been largely replaced in the past half century as we have understood that symptoms alone rarely indicate the best choice of treatment. Patients with mental disorders deserve better...NIMH will be re-orienting its research away from DSM categories.”...

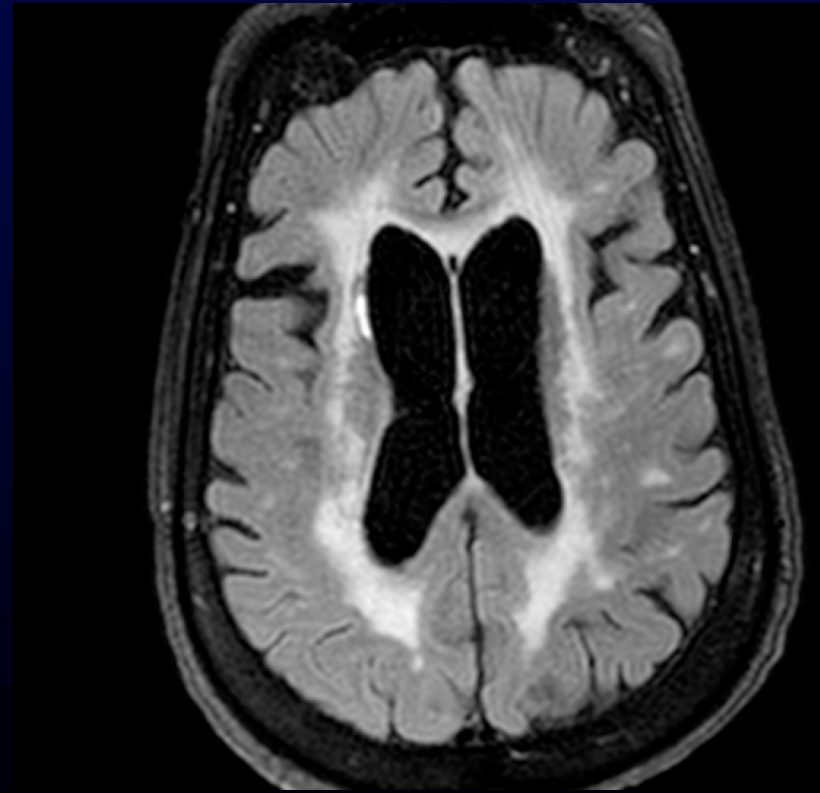
<http://www.nimh.nih.gov/about/director/2013/transforming-diagnosis.shtml>

Imaging “Signature”

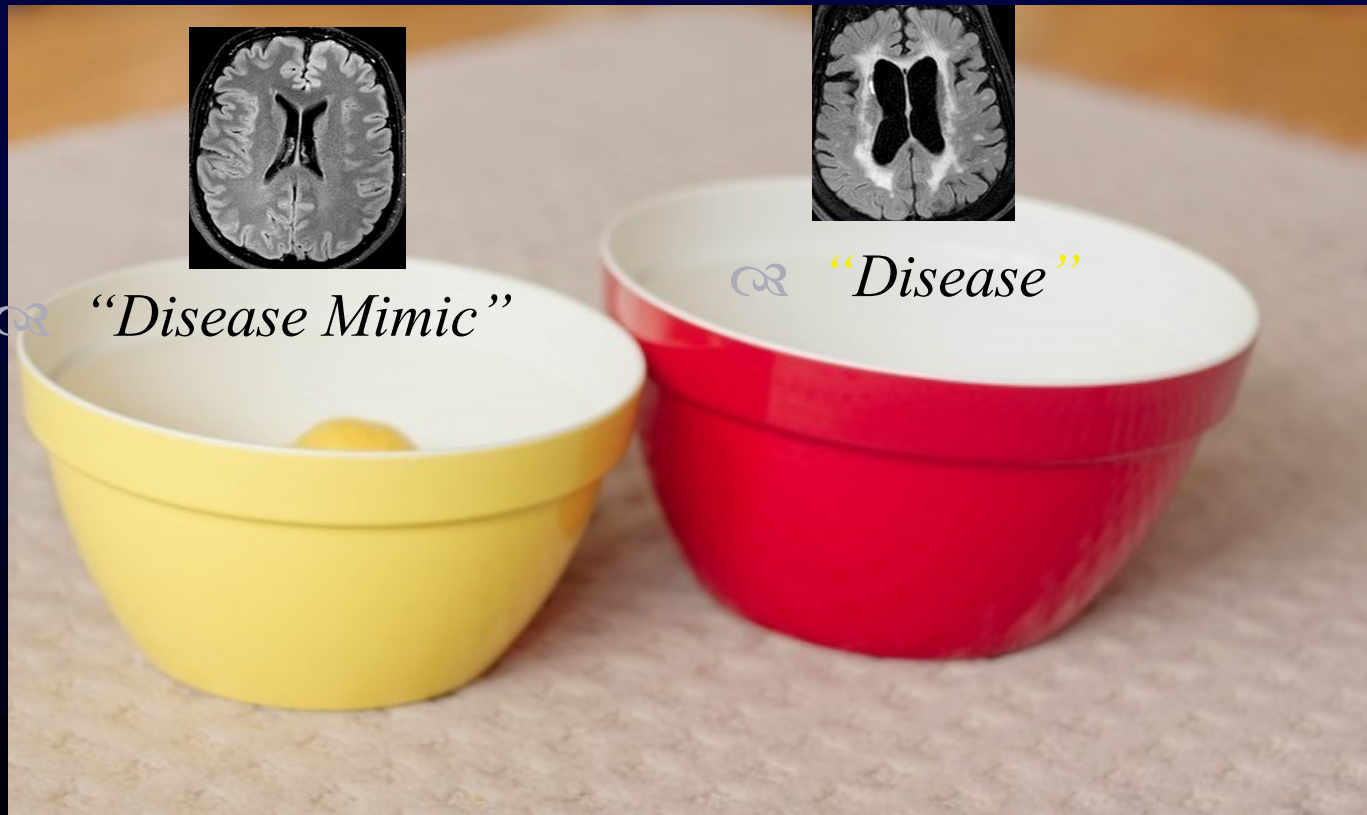
- Control “Mimic”



- Disease

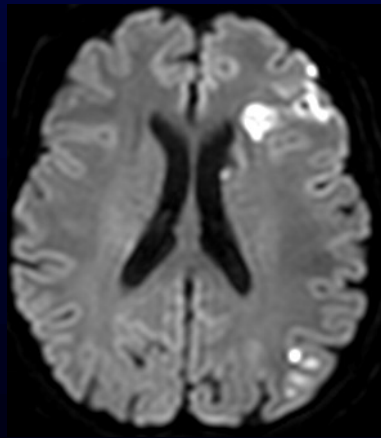


Sorting into Containers

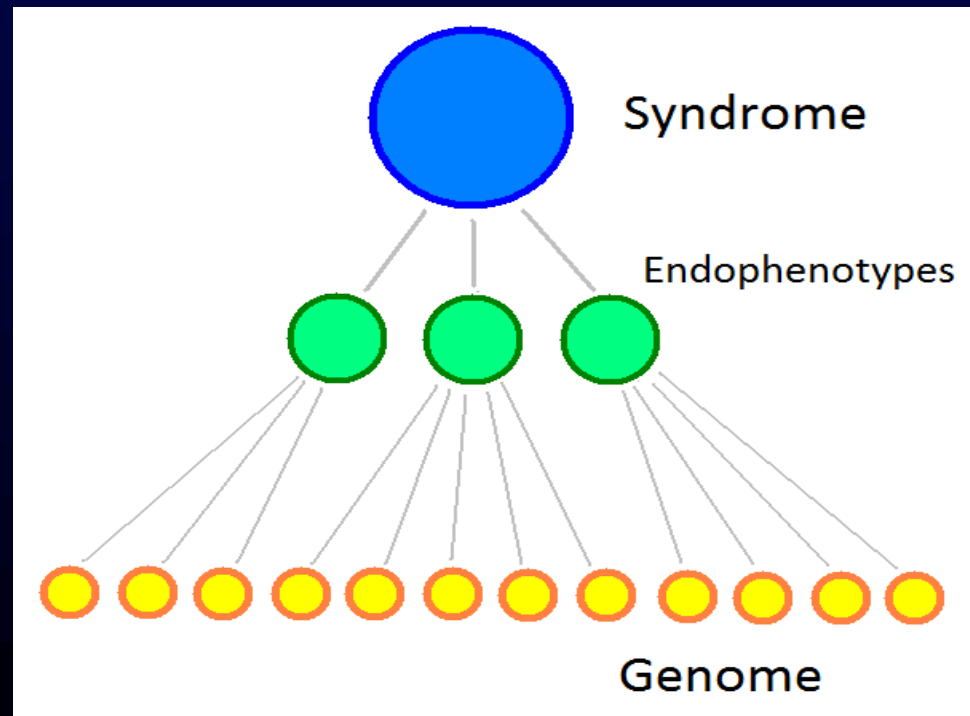
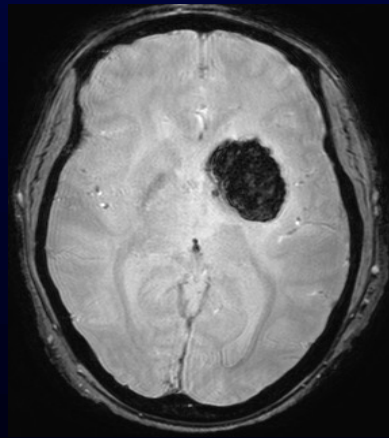


Symptom Based Classification

Aphasia

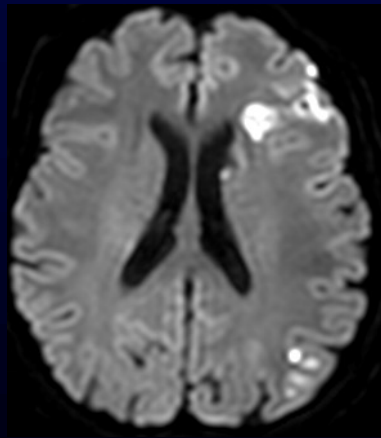


Nausea

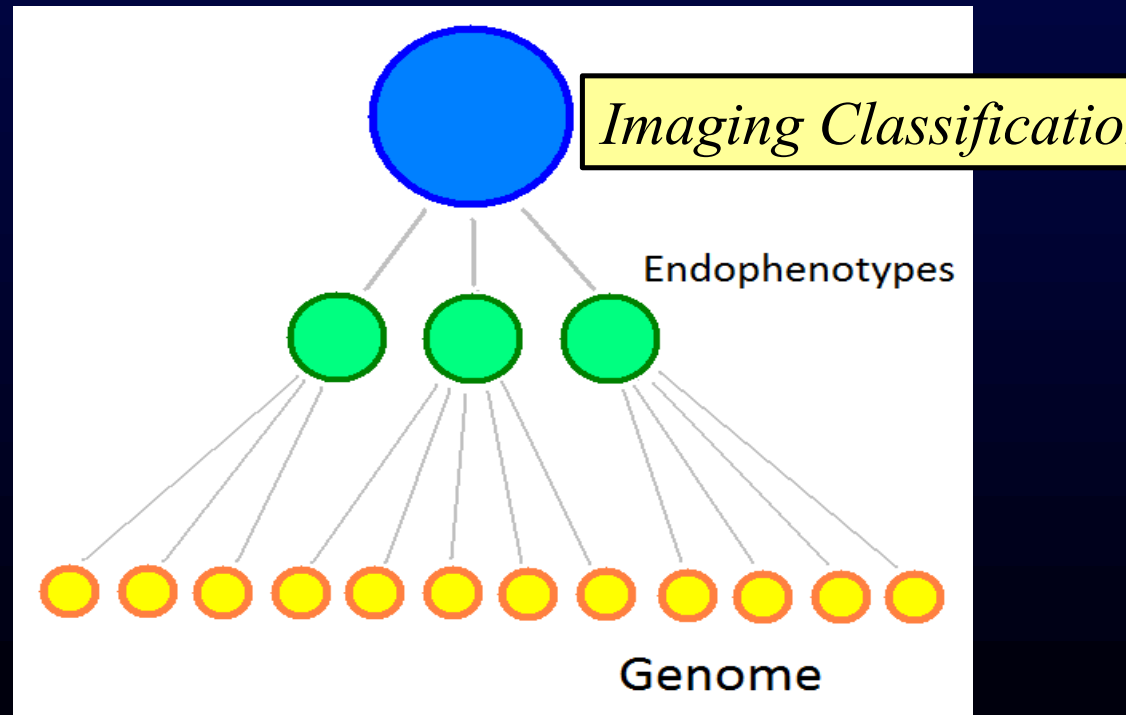
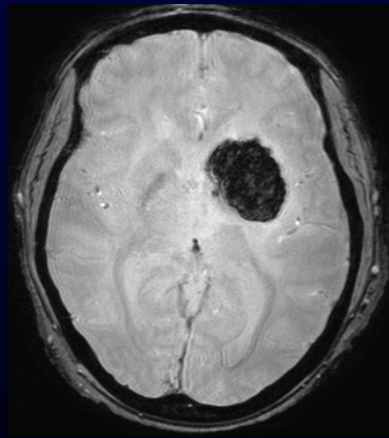


Imaging Based Classification

Ischemic



Hemorrhagic



Stroke Dx...Guiding Premise:

- Image contrast mechanisms directly attributable to pathophysiology (biology of stroke) will provide a more precise diagnosis and stratification of stroke, and thereby lead to better therapy and improved outcome.

1992

ANATOMIA DO "GRUNGE"

A aparente calma do grunge deriva da erva que fuma (dai os olhos constantemente semi-cerrados)

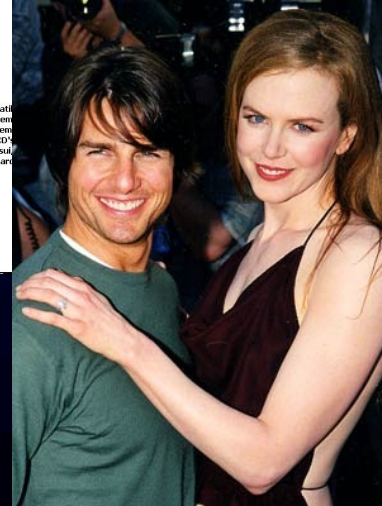
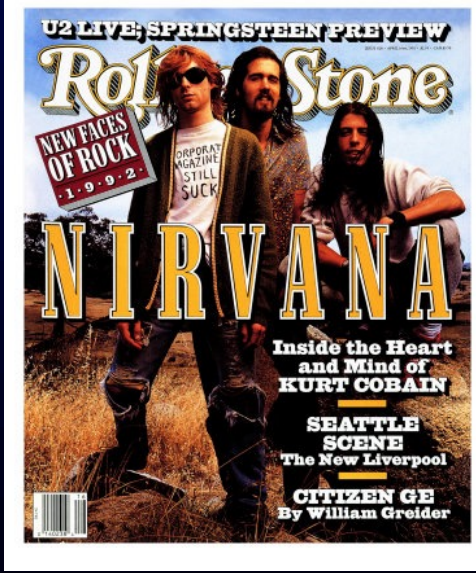


Cabelo longo e descolado estilo anão muçulmano.

Cara de serenidade, o grunge atinge o seu nirvano constantemente.

Camisa decadente. Há que parecer naturalmente envelhecida, com buracos e um cor esbatida. No entanto, para alcançar o efeito mais rapidamente, o grunge pis-a, passa-a com o carro por cima, queima-a, atira-a aos porcos, etc. Por baixo sempre uma t-shirt da primeira tournée dos Pearl Jam, assinada pelos membros da banda.

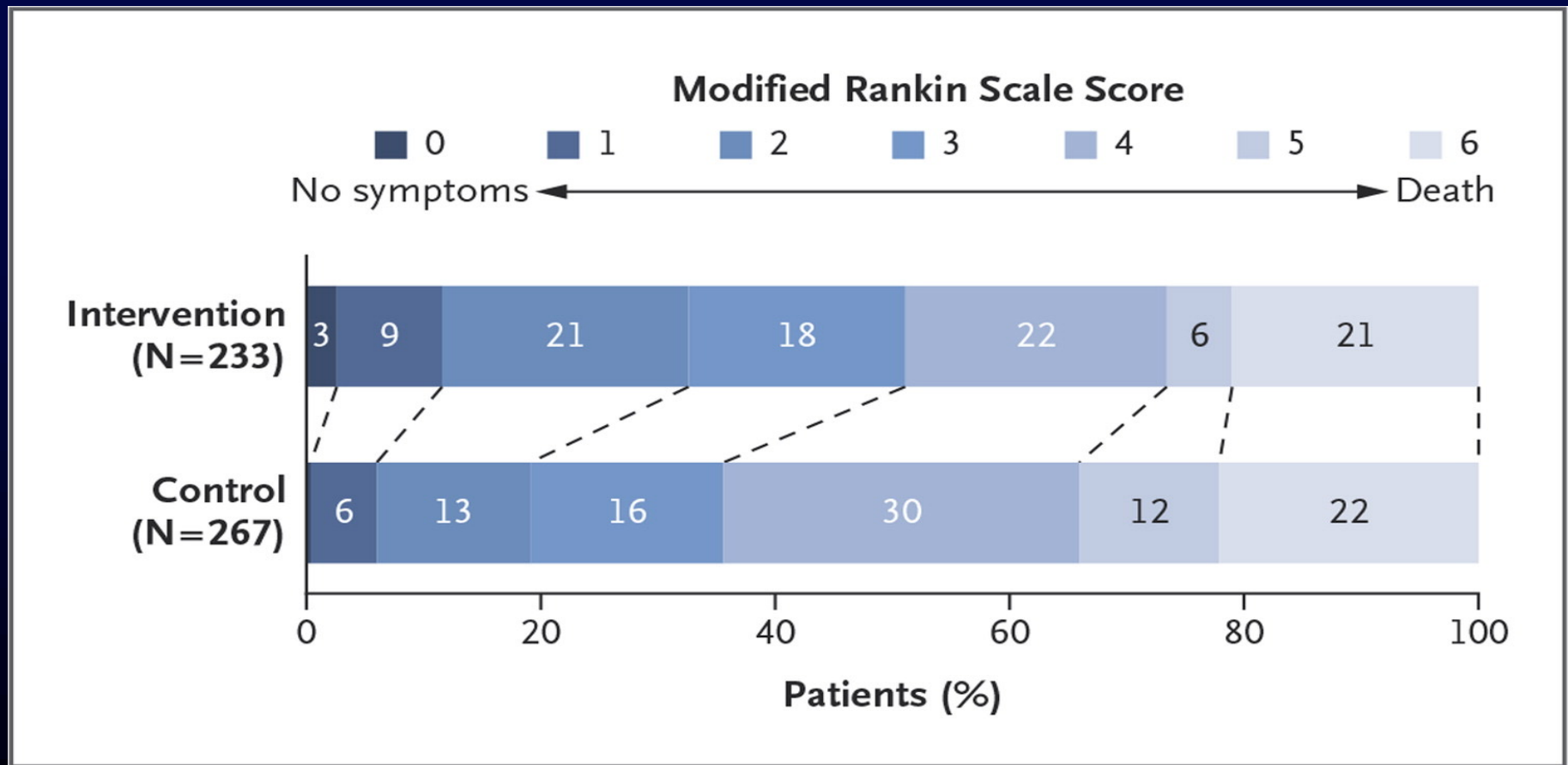
Sapatilhas de veludo. Devenem os CD's possuídos Hierar...



Why doesn't anyone care?



Modified Rankin Scale Scores at 90 Days in the Intention-to-Treat Population.



Berkhemer OA et al. *N Engl J Med* 2015;372:11-20.



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JOURNAL of MEDICINE

Failure of Trials in Stroke

- Neuroprotective agents tested 49
- RCTs performed 114
- Patients enrolled 21,445
- **Neuroprotective agents approved 0**

- Kidwell, Liebeskind, Starkman, Saver, Stroke 2001

- Drug didn't reach brain =
\$100 million (US)

Failed Clinical Trials in TBI



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ORIGINAL ARTICLE

Very Early Administration of Progesterone for Acute Traumatic Brain Injury

David W. Wright, M.D., Sharon D. Yeatts, Ph.D., Robert Silbergleit, M.D., Yuko Y. Palesch, Ph.D., Vicki S. Hertzberg, Ph.D., Michael Frankel, M.D., Felicia C. Goldstein, Ph.D., Angela F. Caveney, Ph.D., Harriet Howlett-Smith, R.N., Erin M. Bengelink, M.A., Geoffrey T. Manley, M.D., Ph.D., Lisa H. Merck, M.D., M.P.H., L. Scott Janis, Ph.D., and William G. Barsan, M.D. for the NETT Investigators
N Engl J Med 2014; 371:2457-2466 | December 25, 2014 | DOI: 10.1056/NEJMoa1404304

THE NIH HAS AWARDED **\$18.8 million**
over 5 years to U.S. researchers in an international collaboration.

MORE THAN **63**

Institutions worldwide are participating in the international consortium to fight TBI.

INTERNATIONALLY
more than
8,000 patients
will be enrolled in studies as part of the consortium research.



Effect of Citicoline on Functional and Cognitive Status Among Patients With Traumatic Brain Injury Citicoline Brain Injury Treatment Trial (COBRIT) **FREE**

Ross D. Zafonte, DO; Emilia Bagiella, PhD; Beth M. Ansel, PhD; Thomas A. Novack, PhD; William T. Friedewald, MD; Dale C. Hesdorffer, PhD; Shelly D. Timmons, MD; Jack Jallo, MD, PhD; Howard Eisenberg, MD; Tessa Hart, PhD; Joseph H. Ricker, PhD; Ramon Diaz-Arrastia, MD, PhD; Randall E. Merchant, PhD; Nancy R. Temkin, PhD; Sherry Melton, MD; Sureyya S. Dikmen, PhD

[\[+\] Author Affiliations](#)

JAMA. 2012;308(19):1993-2000. doi:10.1001/jama.2012.13256.

Text Size: **A** **A** **A**

Stroke - Last Two Years



The NEW ENGLAND
JOURNAL of MEDICINE

2013

ORIGINAL ARTICLE

Endovascular Treatment for Acute Ischemic Stroke

Alfonso Ciccone, M.D., Luca Valvassori, M.D., Michele Nichelatti, Ph.D., Annalisa Sgoifo, Psy.D., Michela Ponzio, Ph.D., Roberto Sterzi, M.D., and Edoardo Boccardi, M.D. for the SYNTHESIS Expansion Investigators
N Engl J Med 2013; 368:904-913 | March 7, 2013 | DOI: 10.1056/NEJMoa1213701

ORIGINAL ARTICLE

[A Correction Has Been Published >](#)

Endovascular Therapy after Intravenous t-PA versus t-PA Alone for Stroke

ORIGINAL ARTICLE

A Trial of Imaging Selection and Endovascular Treatment for Ischemic Stroke

2015

ESTABLISHED IN 1812

JANUARY 1, 2015

VOL. 372 NO. 1

A Randomized Trial of Intraarterial Treatment for Acute Ischemic Stroke

ORIGINAL ARTICLE

Endovascular Therapy for Ischemic Stroke with Perfusion-Imaging Selection

ORIGINAL ARTICLE

Randomized Assessment of Rapid Endovascular Treatment of Ischemic Stroke

SWIFT PRIME: 'Dramatic' Benefit of Stent Retriever in Stroke

Sue Hughes

February 11, 2015

NNT ~ 3

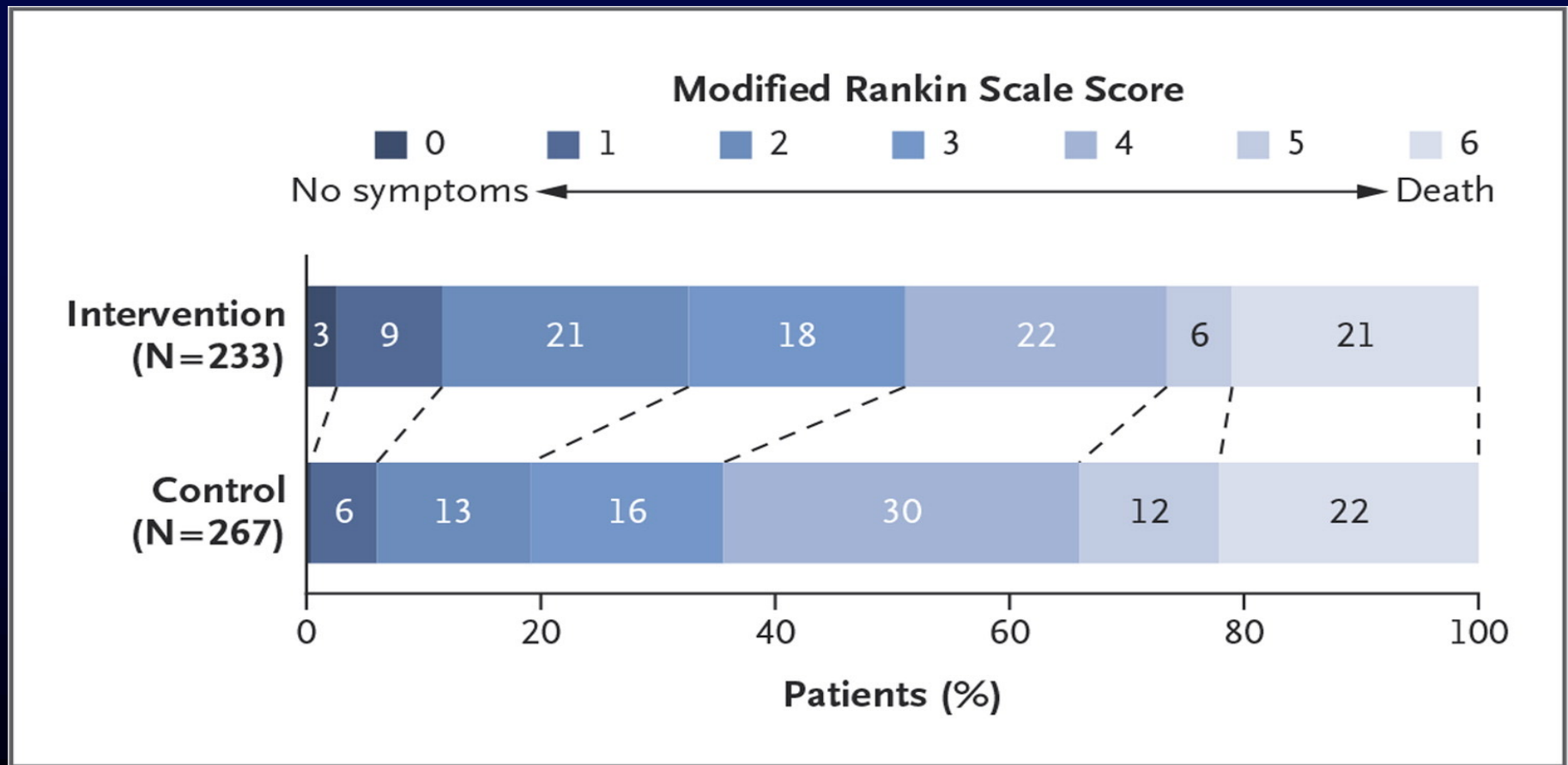
Defibrillation NNT = 2.5

Screening Mammogram NNT ~ inf

Screening Mammogram NNH = 5

www.thennt.com

Modified Rankin Scale Scores at 90 Days in the Intention-to-Treat Population.



Berkhemer OA et al. *N Engl J Med* 2015;372:11-20.



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JOURNAL of MEDICINE

What is best in life?

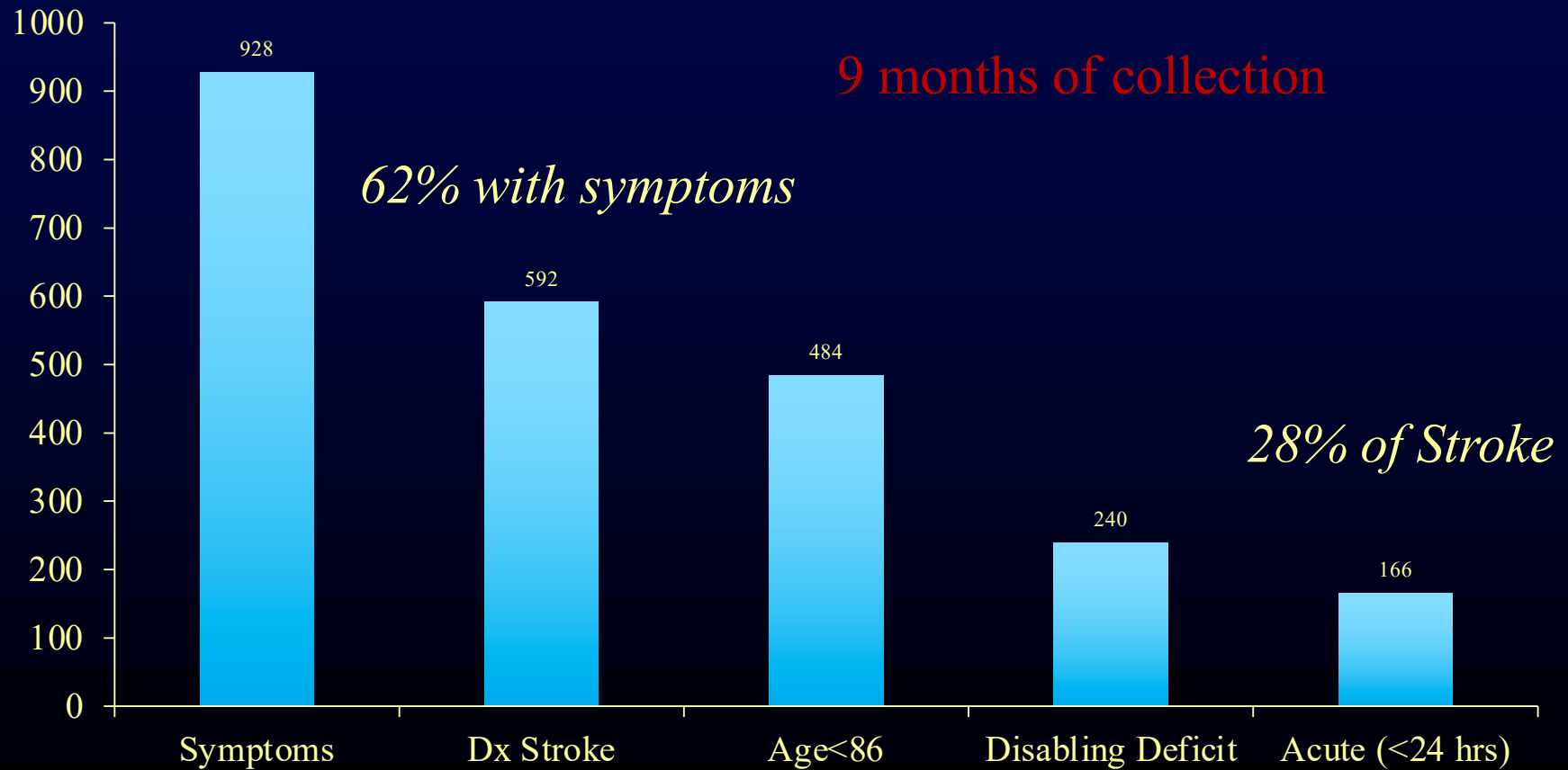
Symptoms

Biological



Symptoms Target

L. Davis et al, NINDS 2011



What is best in life?

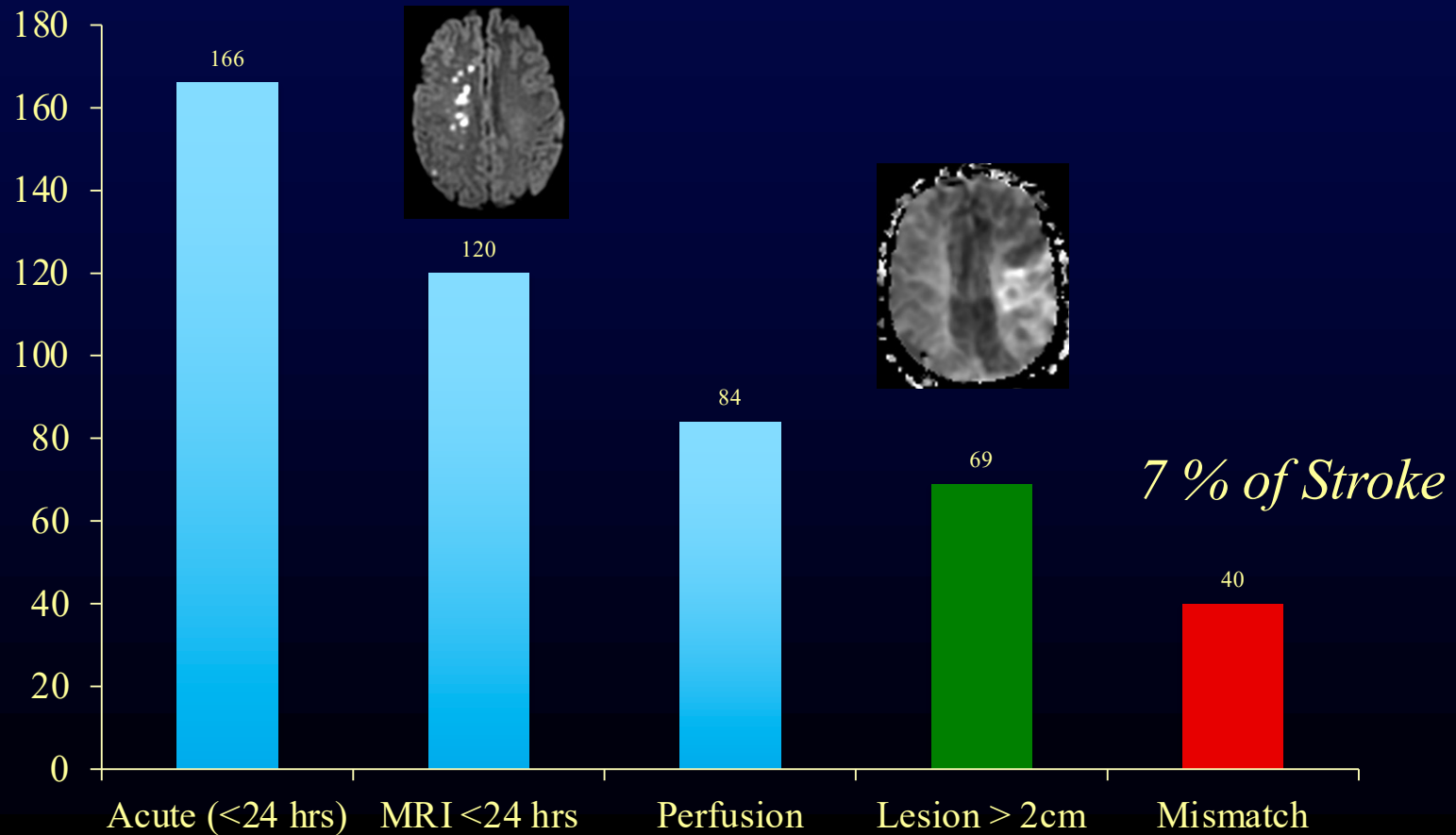
Symptoms

Biological

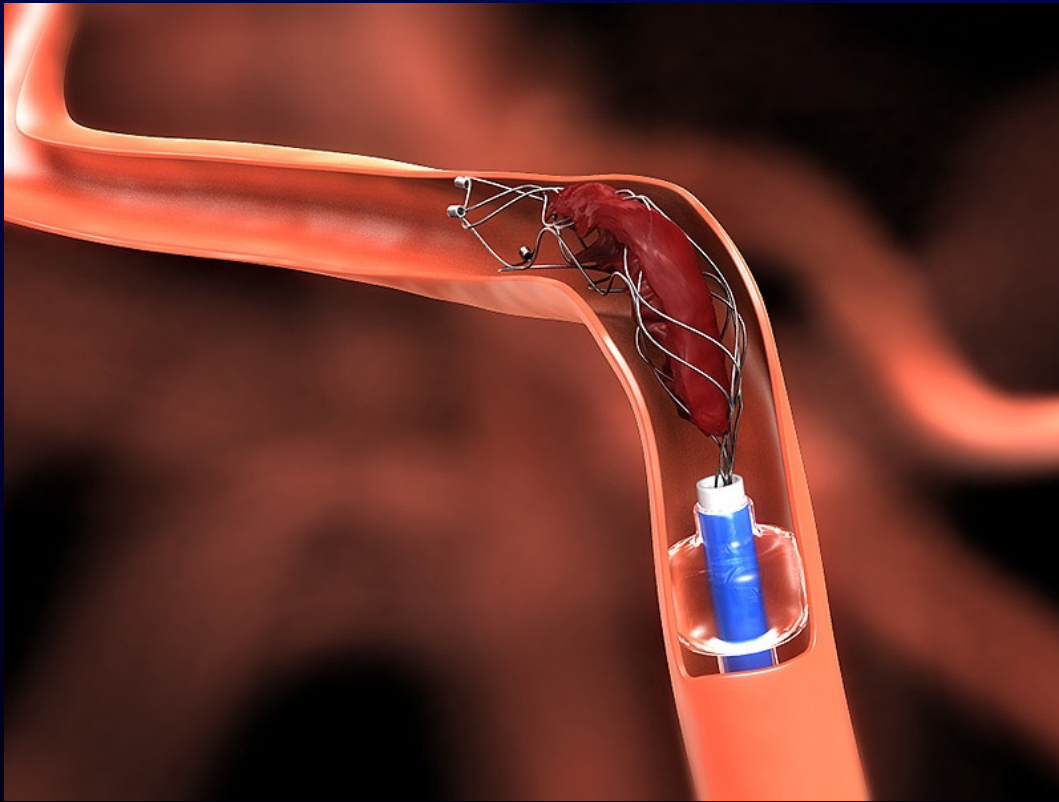


Biological Target

L. Davis et al, NINDS 2011



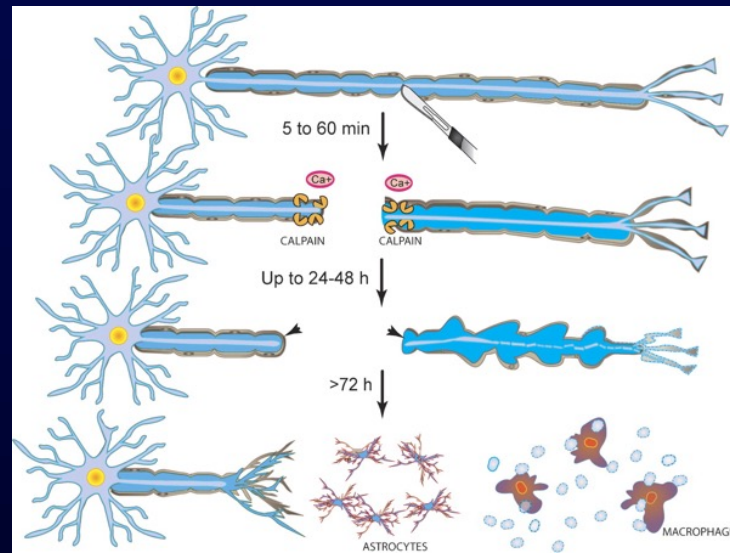
Stent Retriever



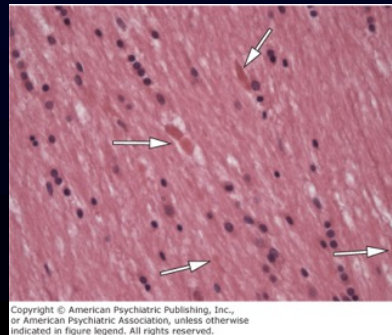
...predementia reminder #2 ...
Endo 1 IR then Outcome
Endo 2



mTBI



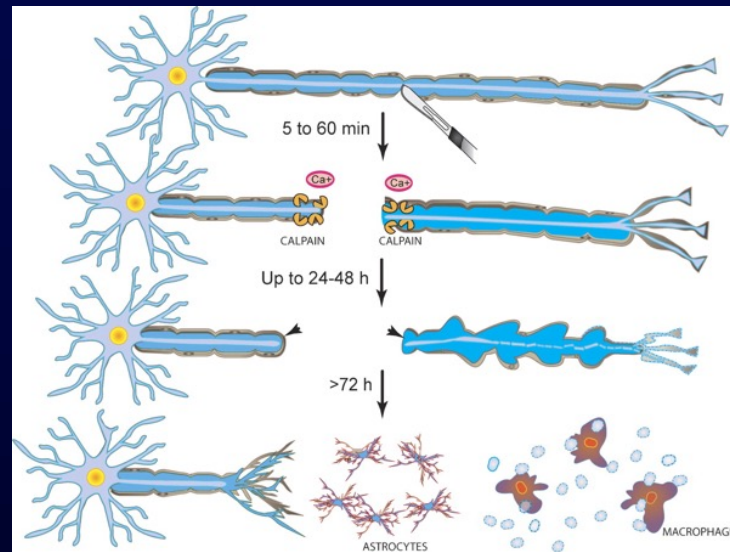
J Wang et al, JCB vol. 196 no. 1 7-18



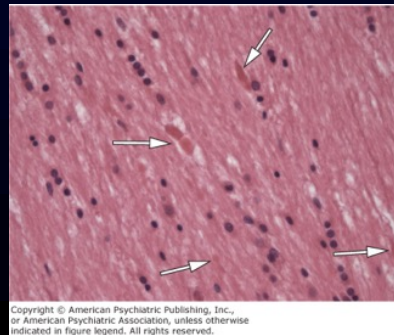
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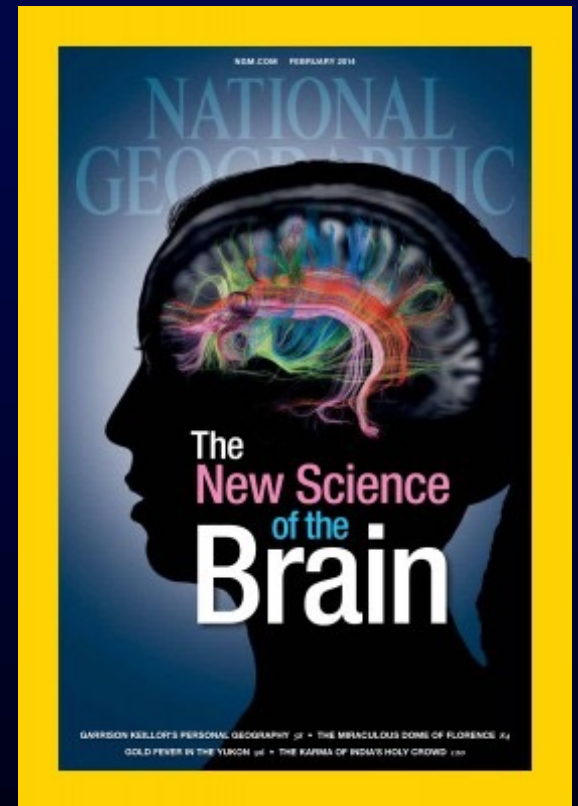
Dominant Paradigm



J Wang et al, JCB vol. 196 no. 1 7-18



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Axonal injury

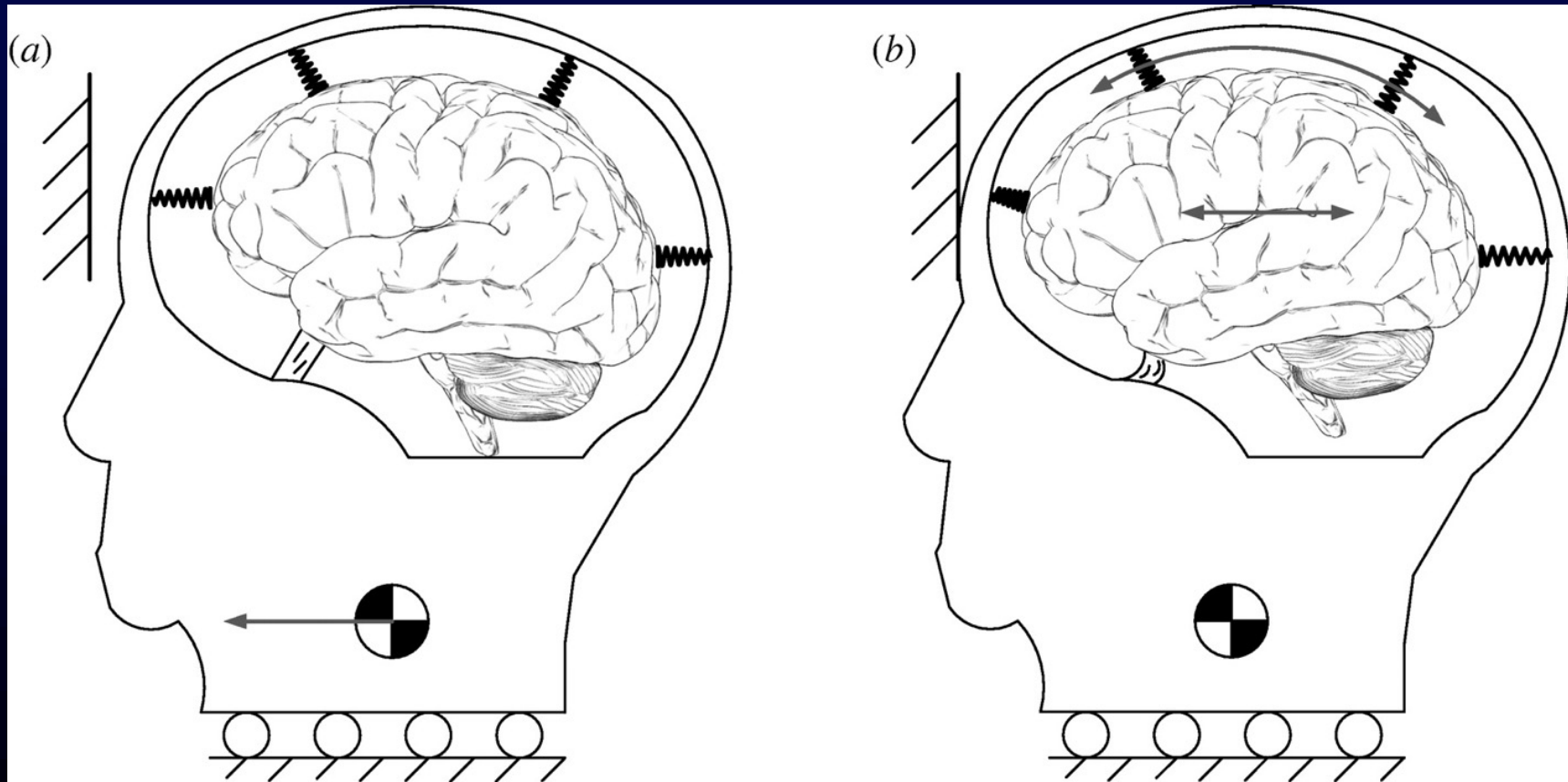
- Assumed to be the problem in mTBI
- ...ergo DTI the solution
- “Ask impertinent questions...get pertinent answers”

Mild Traumatic Brain Injury

Postulate:

Following head trauma, brain injury is mediate by damage to the meninges and related vasculature.

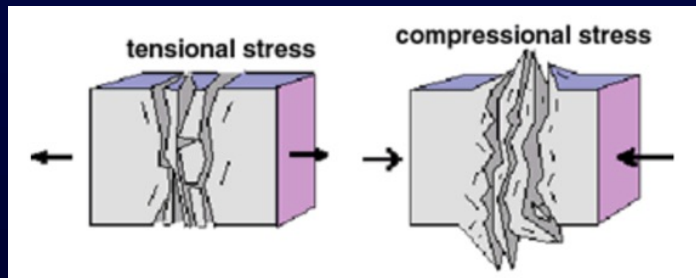
Simplified Model for Displacement



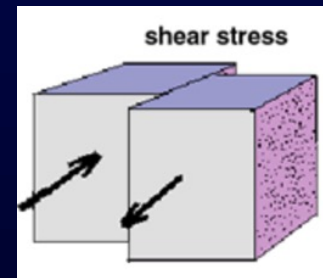
Y. Feng et al, J R Soc Interface. Dec 6, 2010; 7(53): 1677–1688

Compression and Shear Forces

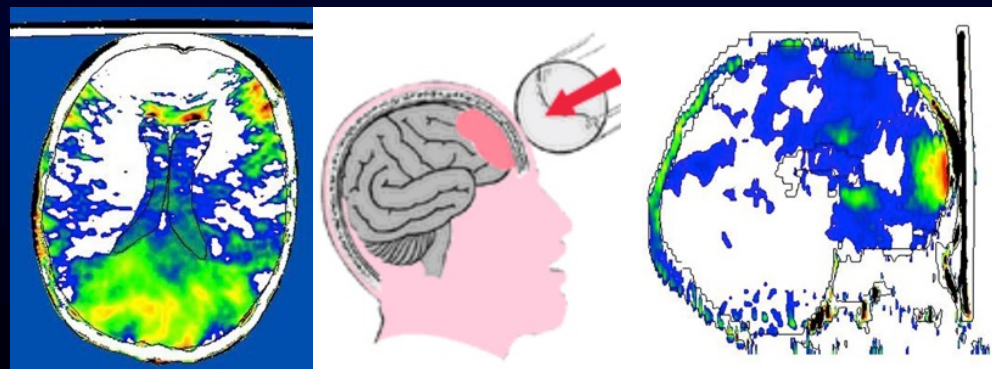
- Compression/dilatation



- Shear



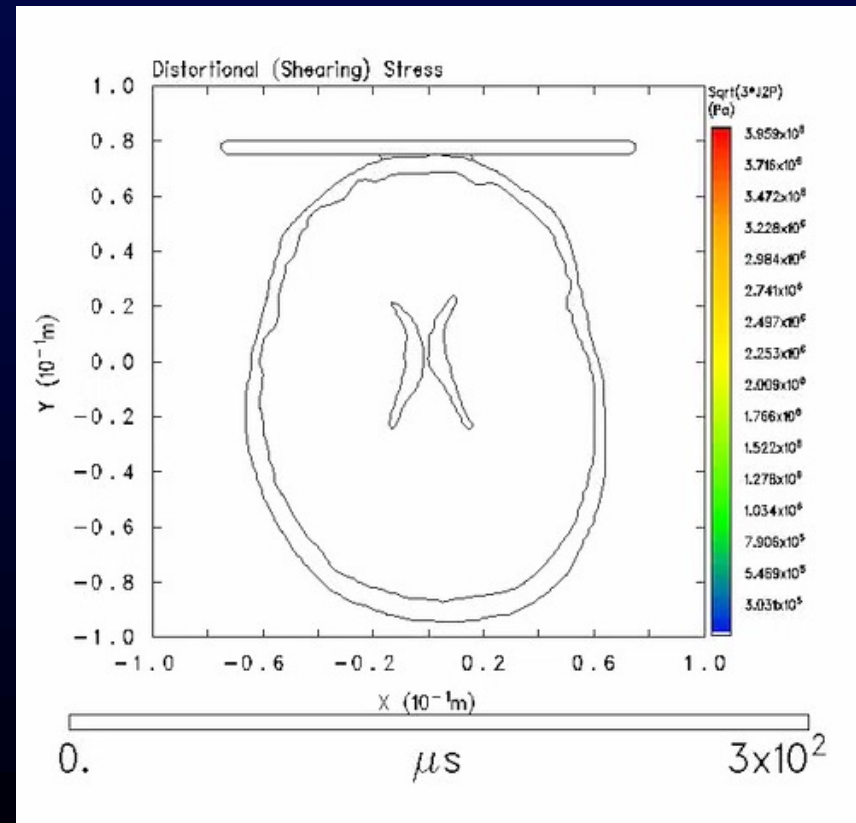
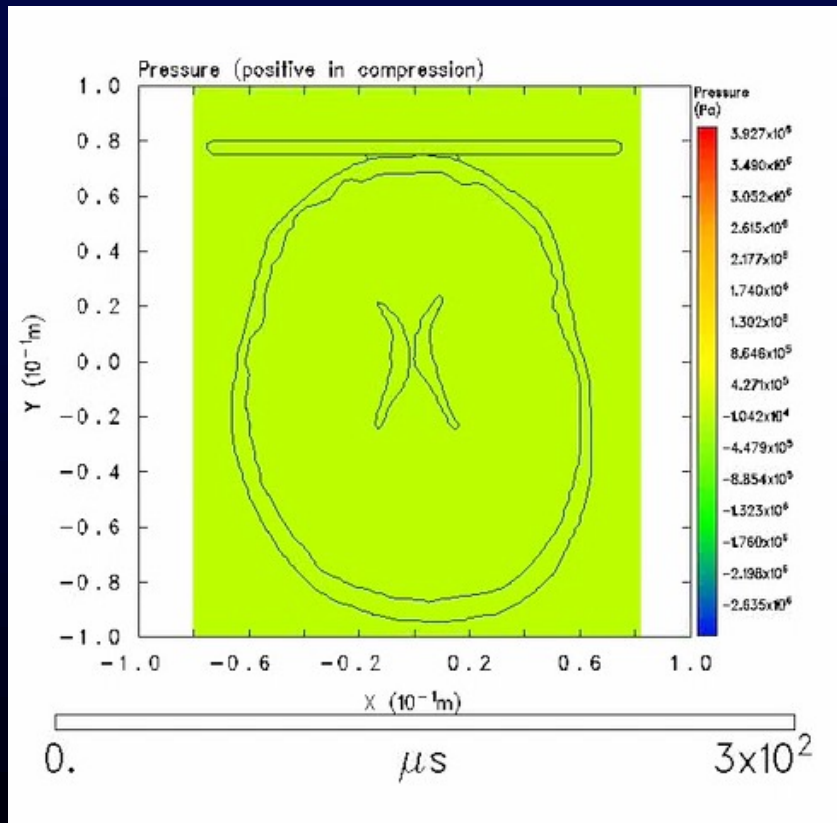
M. Kimberly, North Carolina State Univ.



P.A. Taylor et al., Sandia National Laboratories, 2007

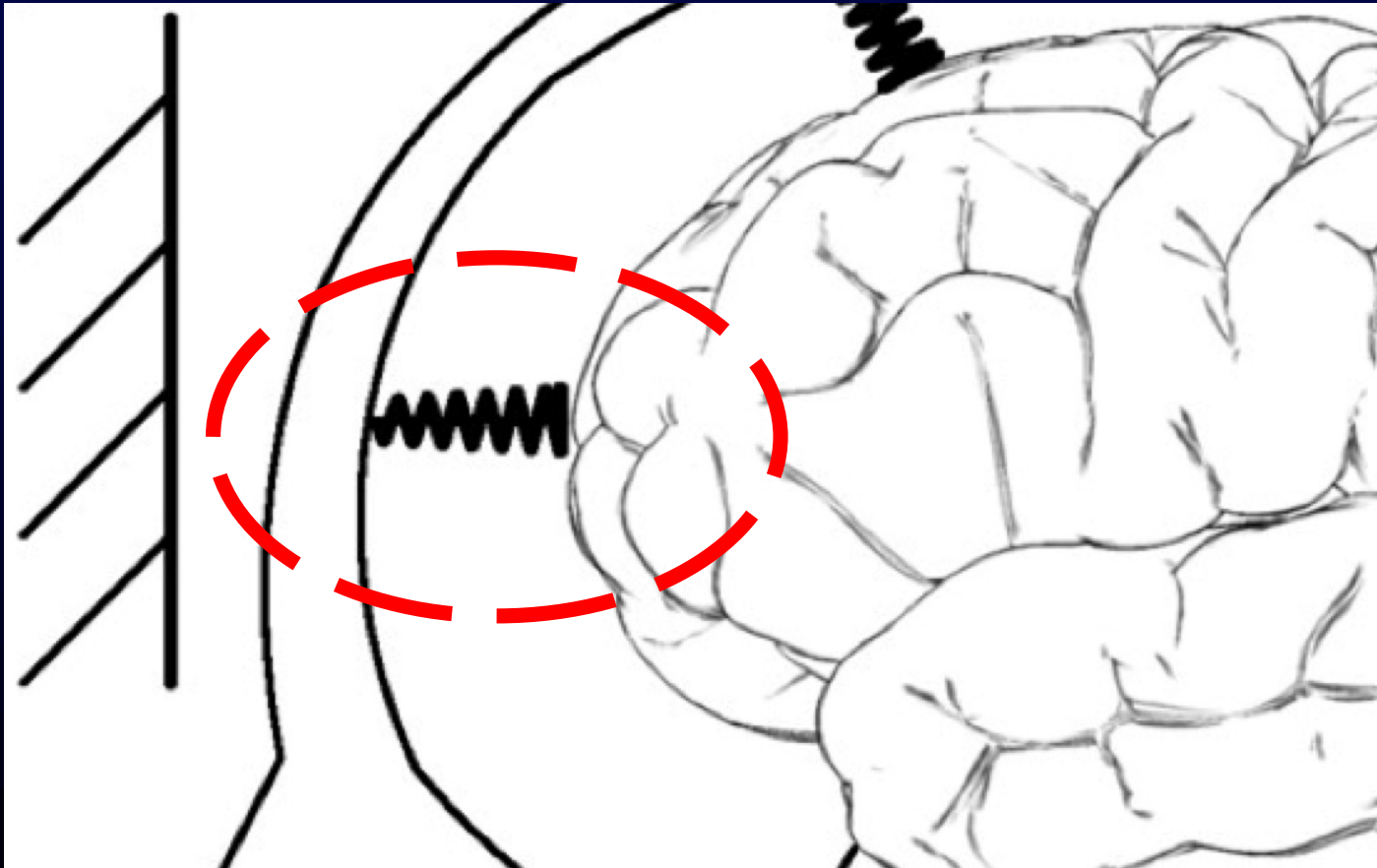
Acoustic Elastic-plastic Deformation

Its all over in under 1 second.

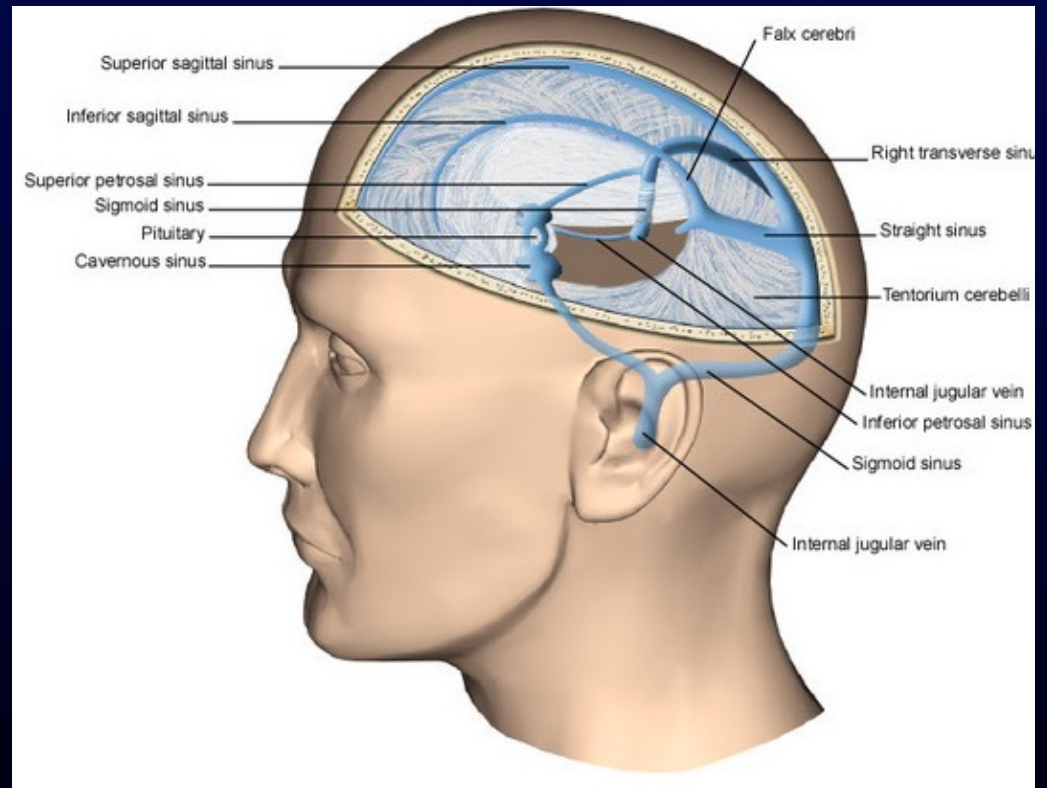


P.A. Taylor et al., Sandia National Laboratories, 2007

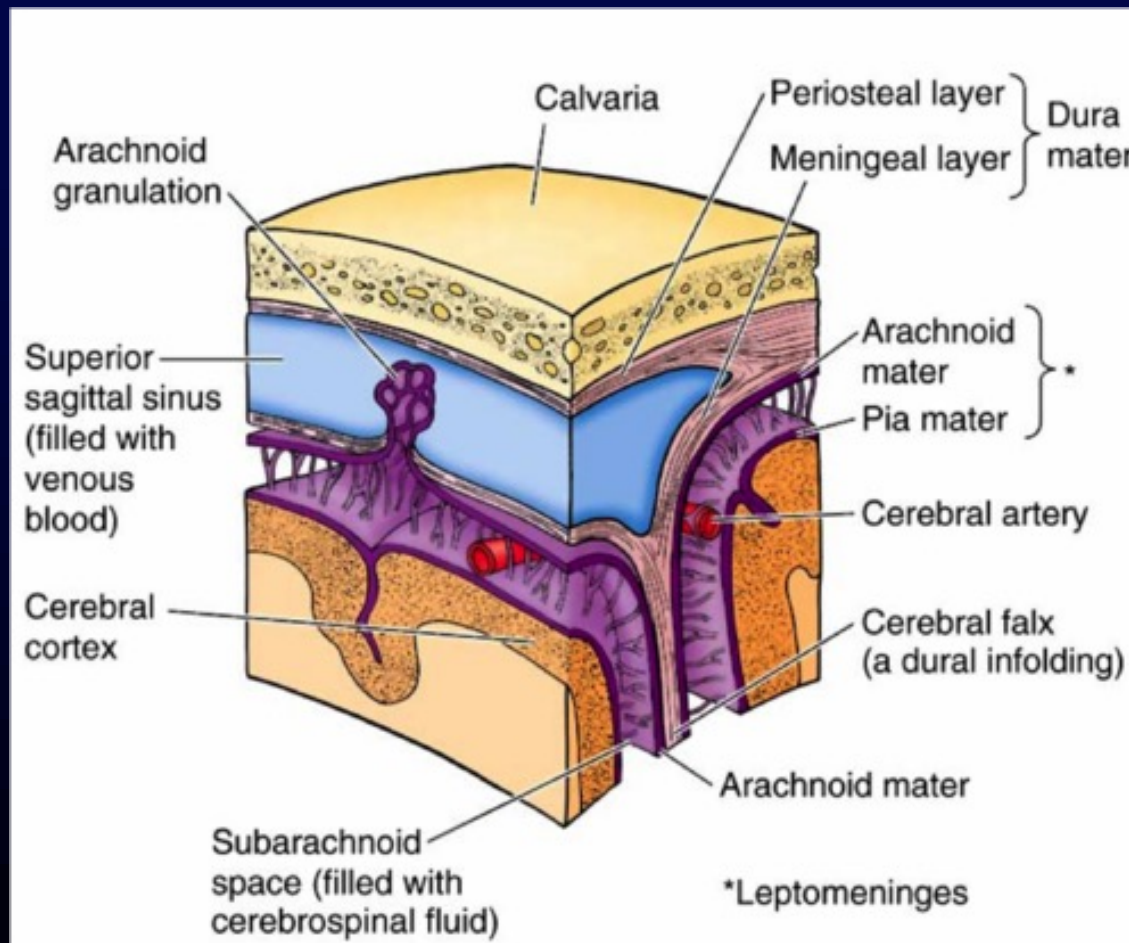
Lets look a bit more carefully...



Sinus, Falx and Tent



Components of Meninges

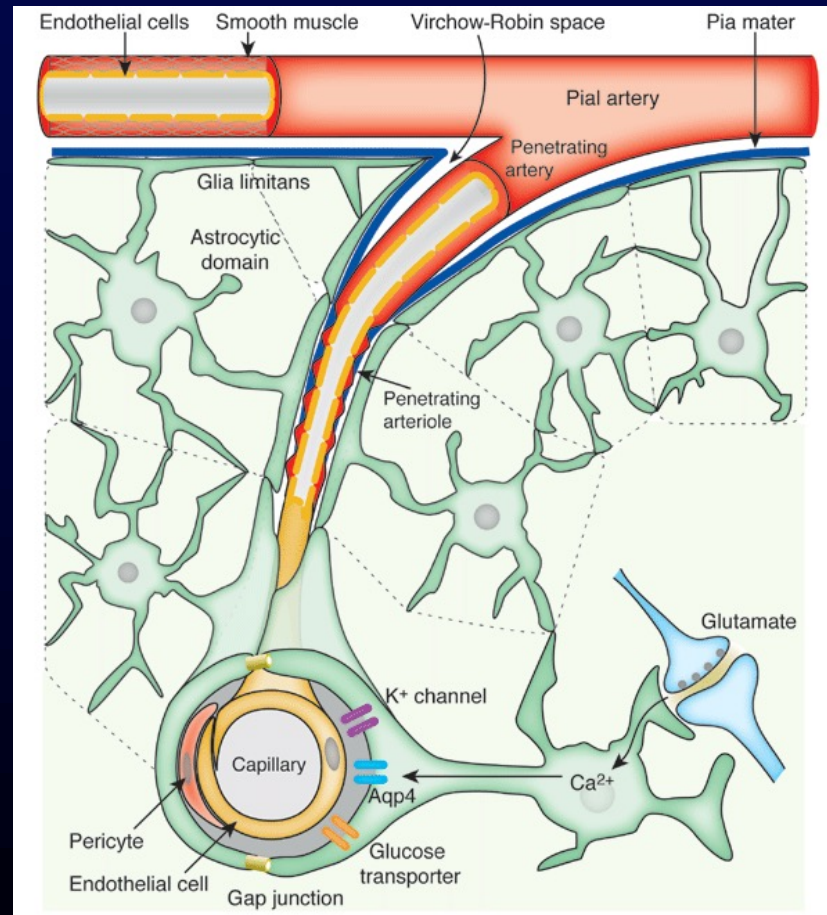


Vessels in the Meninges

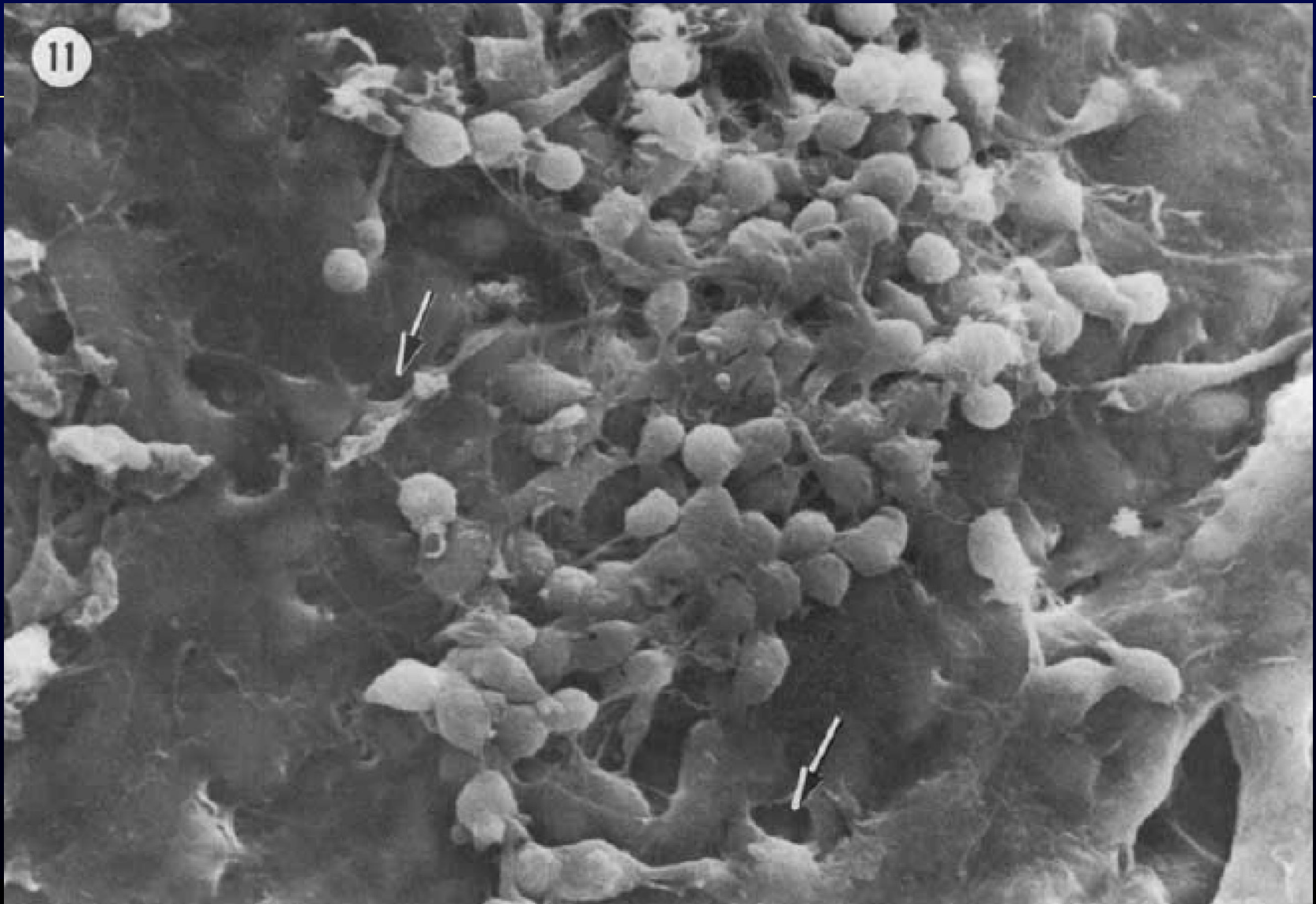




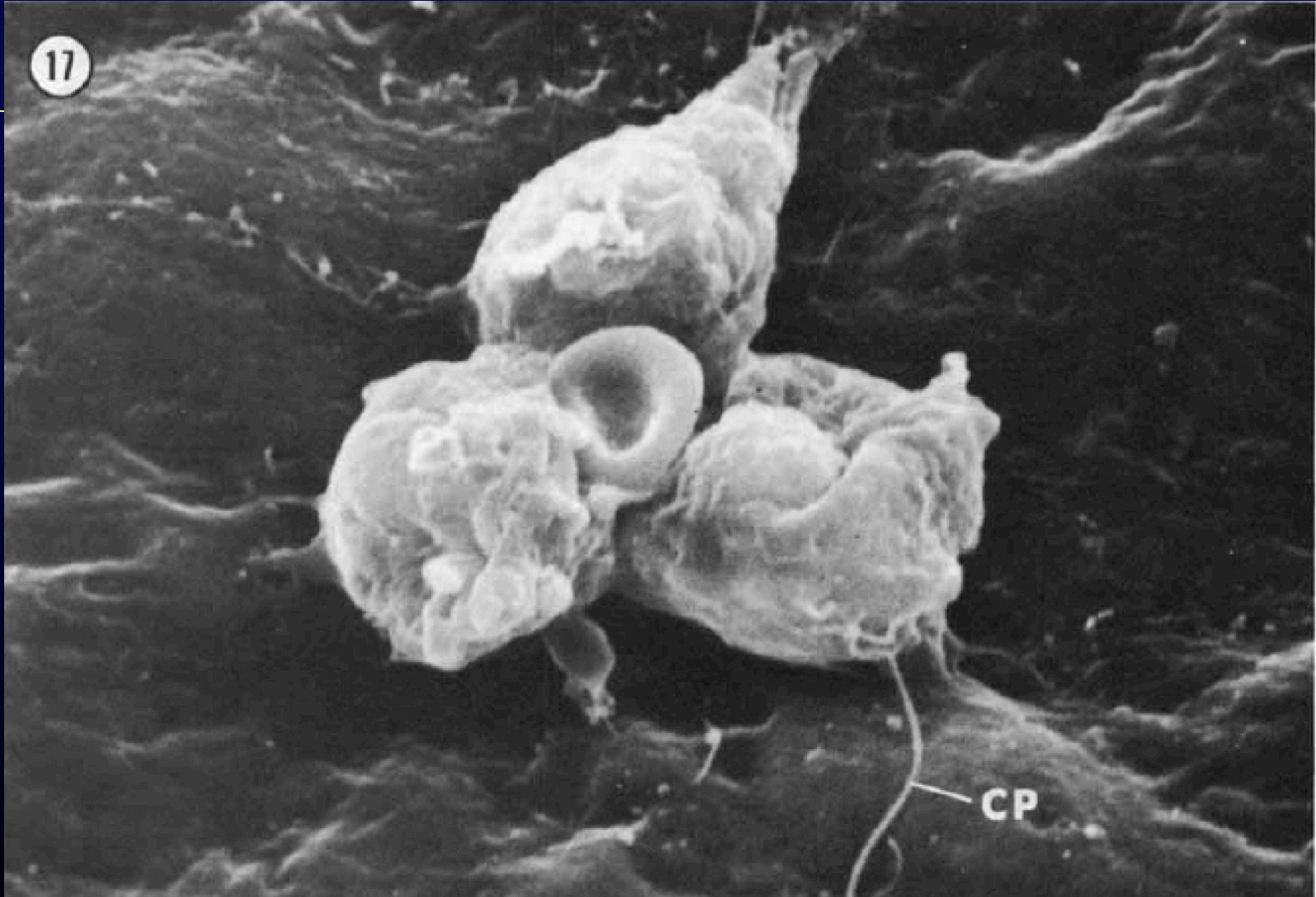
Glial Limitans and the BBB



Iadecola and Nedergaard, Nature Neuroscience **10**, 1369 - 1376 (2007)

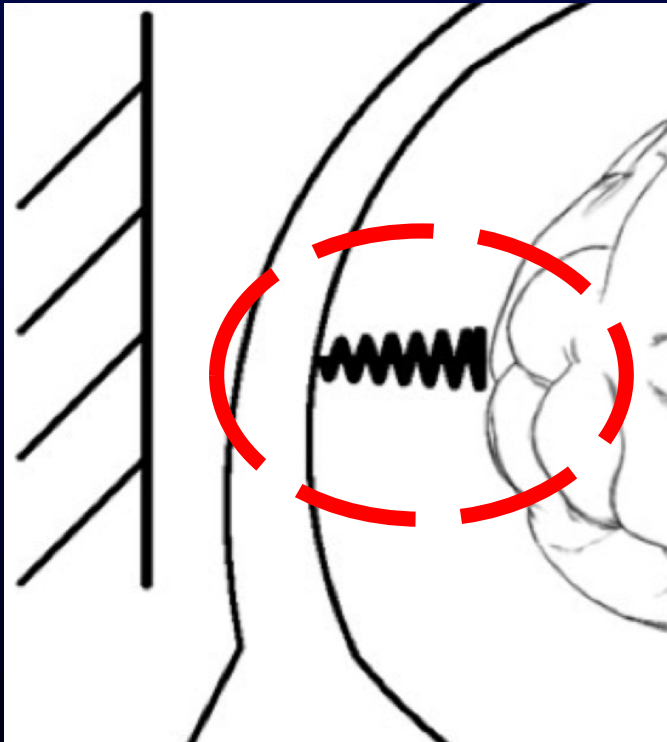


Allen and Low, J Comp Neurol. 1975 Jun 15;161(4):515-39



Allen and Low, J Comp Neurol. 1975 Jun 15;161(4):515-39

Simple Spring? ...nope



- Layers

- Glial Limitans
- Pia
- Arachnoid
- Meningeal Dura
- Periosteal Dura

- Spaces

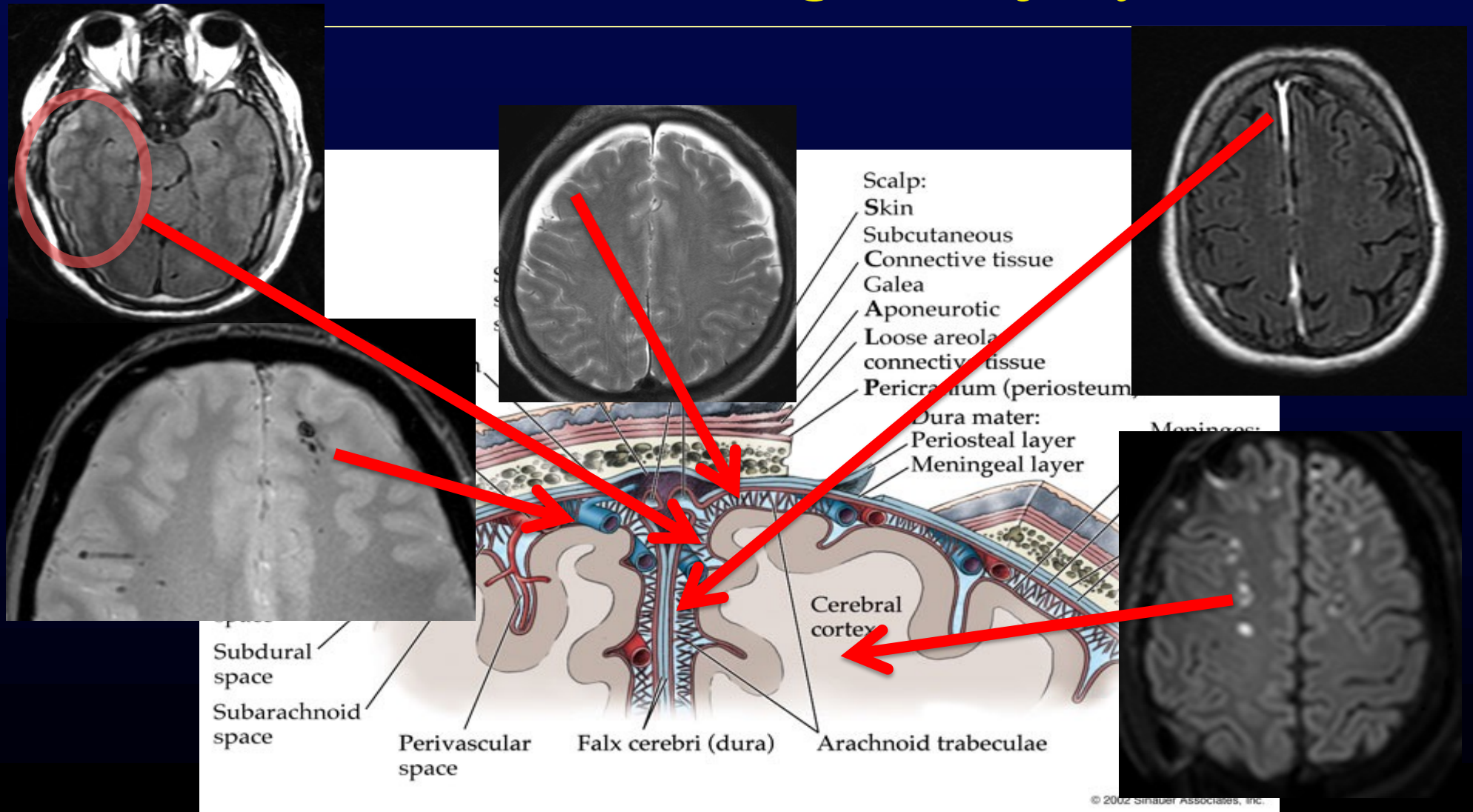
- Basement
- Perivascular
- Subarachnoid
- Subdural (potential)
- Venous lacuna
- Epidural (potential)

- Structures

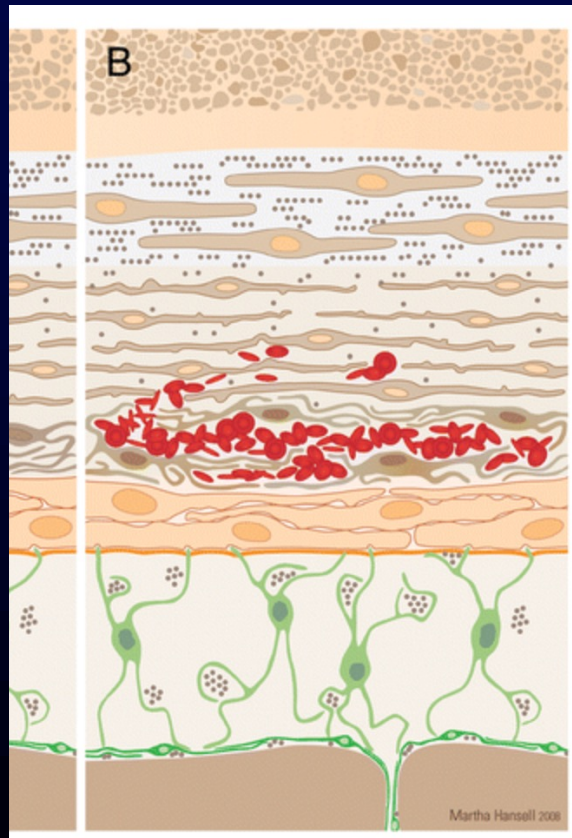
- Superficial vessels
- Bridging veins
- Arachnoid trabeculae
- Arachnoid villi
- Inervation
- Falx and tentorium

Is there evidence of damage to these structures following head injury?

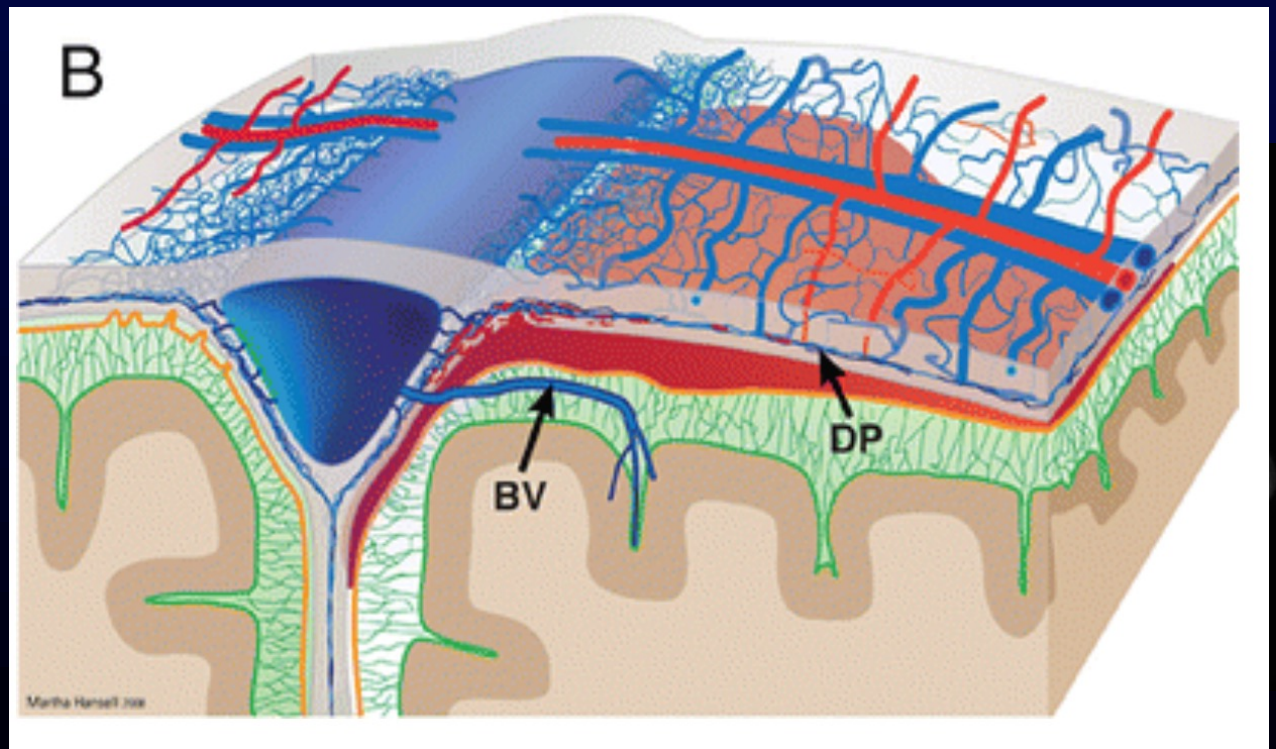
Thesis: Meningeal Injury



Bleeding at the Dural Border



Subdural

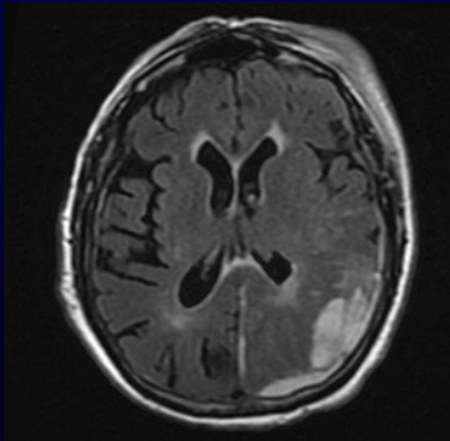


J. Mack, Pediatr Radiol. 2009 Mar;39(3):200-10

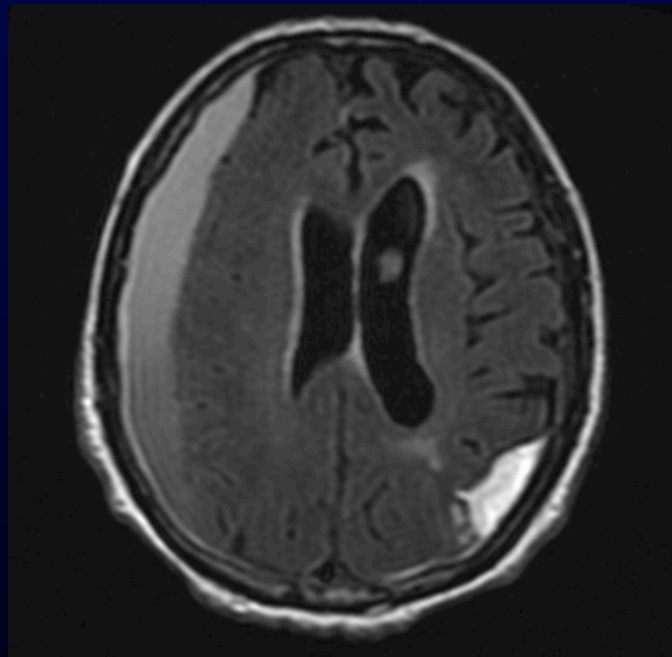
Subdural Effusion

90 Day Follow-up

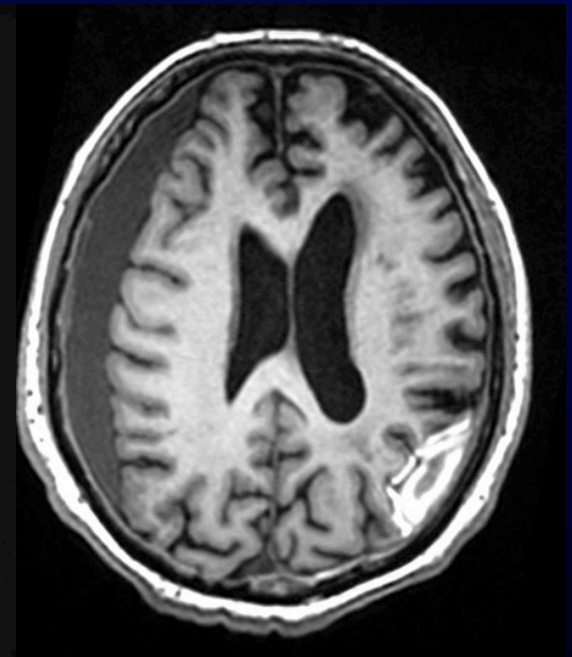
Acute



FLAIR



FLAIR



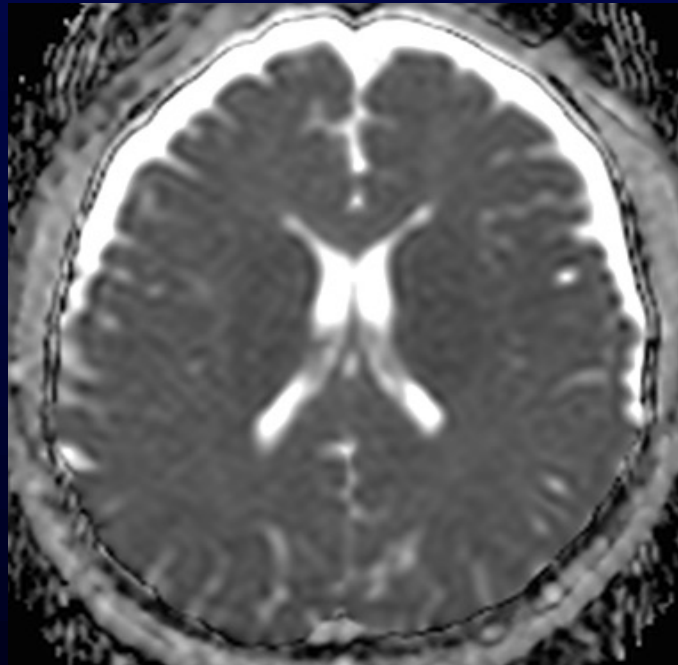
3D T1

Shaken Baby Syndrome – SDH?

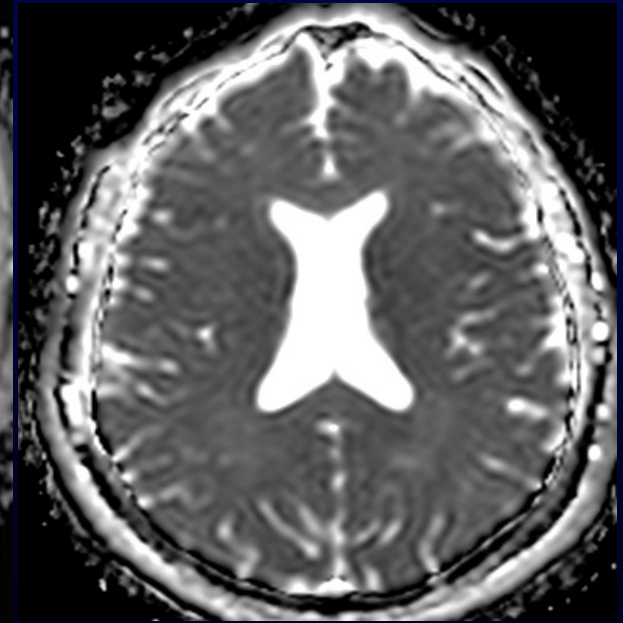
6-mo old



TBI



Stroke



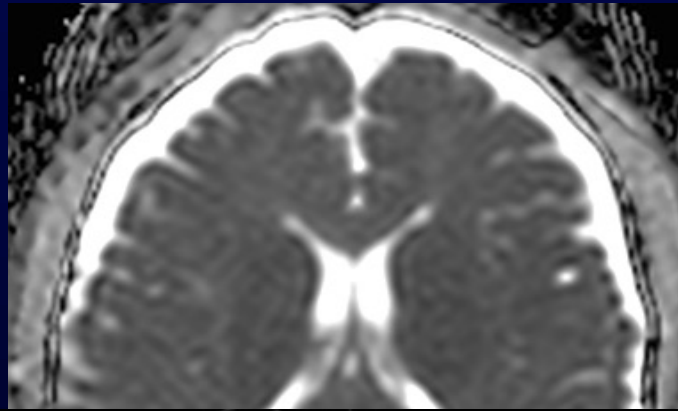
[http://www.asnr.org/
neurographics/2/1/1/
/3.shtml](http://www.asnr.org/neurographics/2/1/1/3.shtml)

Injury to the SAS

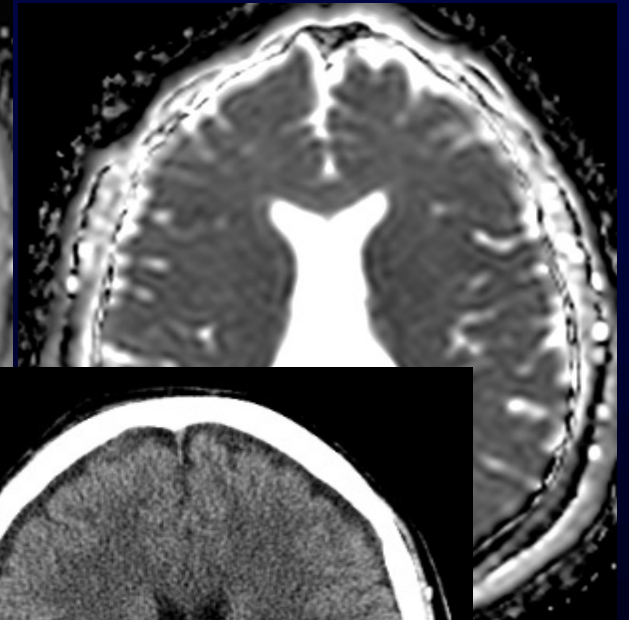
6-mo old



TBI



Stroke



First



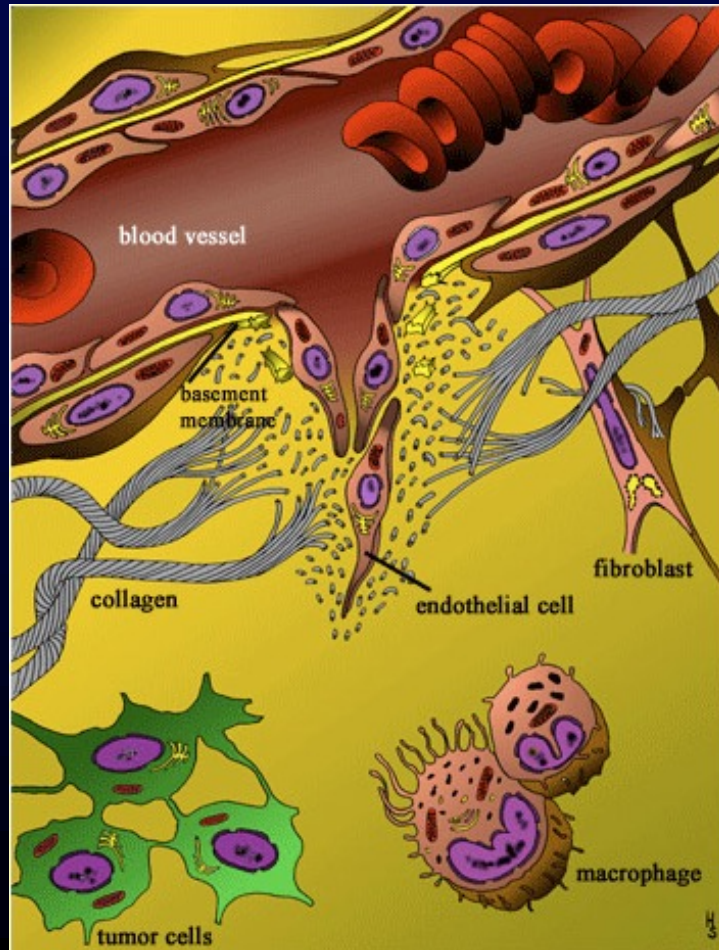
Second



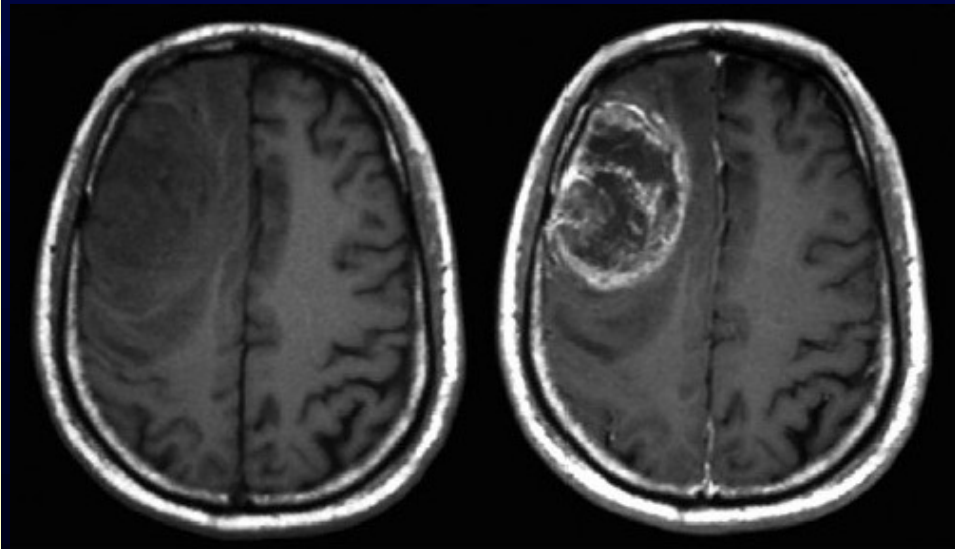
Third

TMI (Traumatic Meningeal Injury)

Angiogenesis and Fenestrations



Tumor
T1-weighted

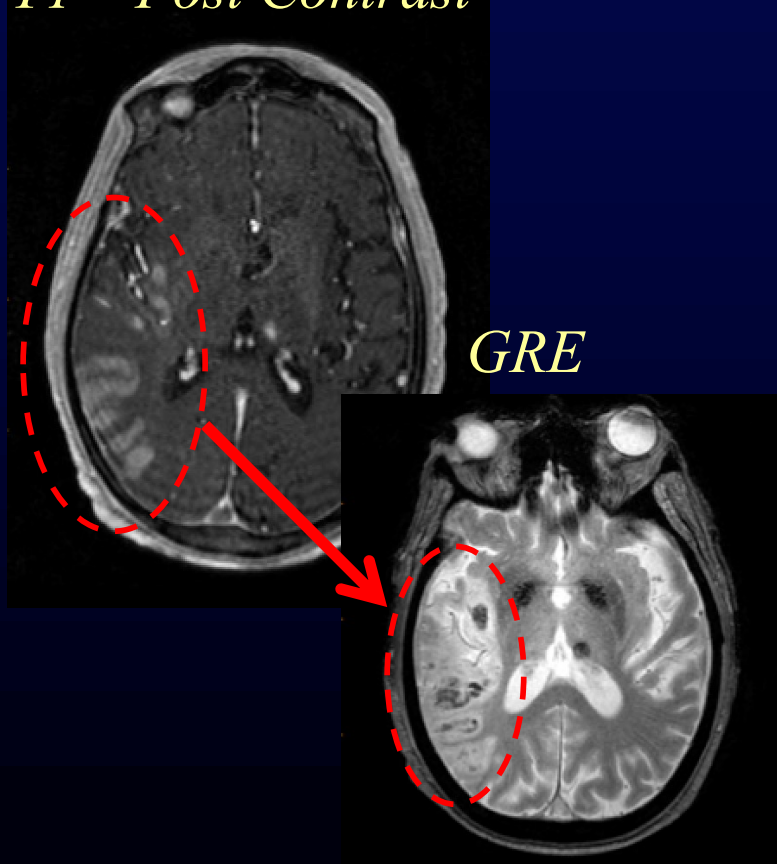


Pre-contrast

Post-contrast

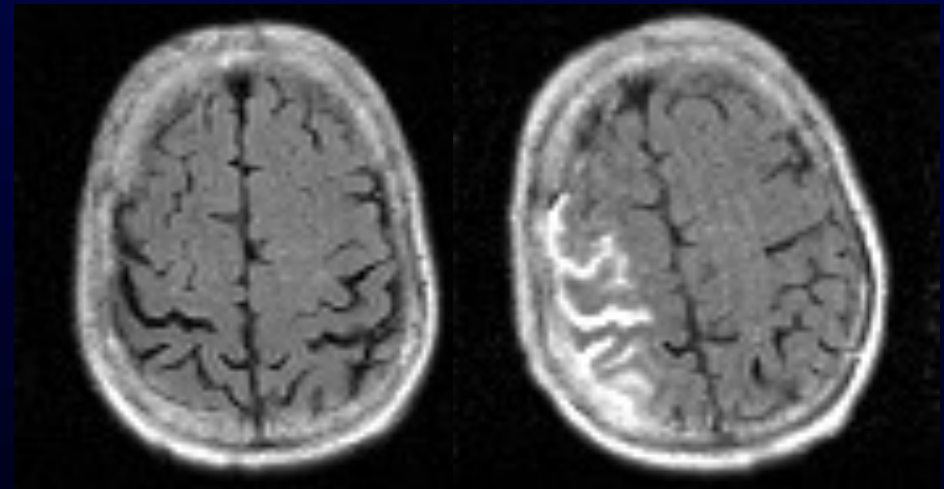
BBB Disruption - Stroke

T1 – Post Contrast



FLAIR

HARM



Nothing!

Nothing on T1 – Post, and no HARM
No BBB disruption

Acute Dural Enhancement in mTBI

FLAIR

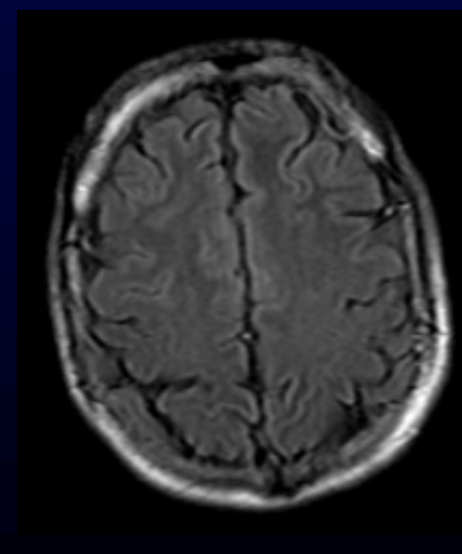
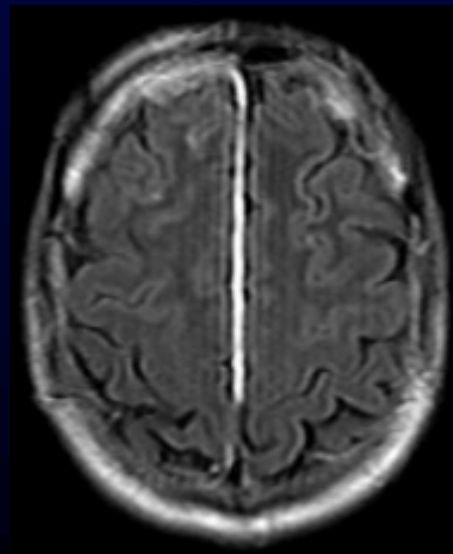
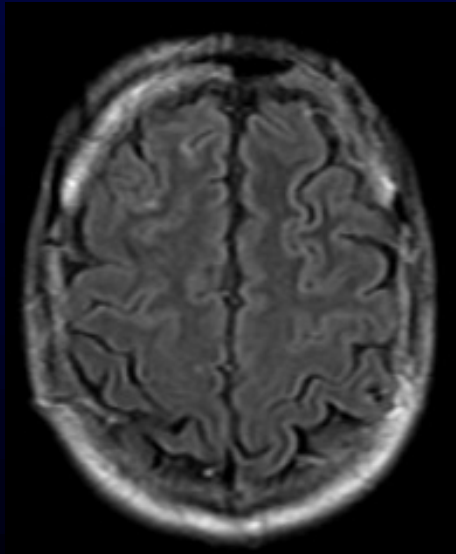
Acute

Follow-up

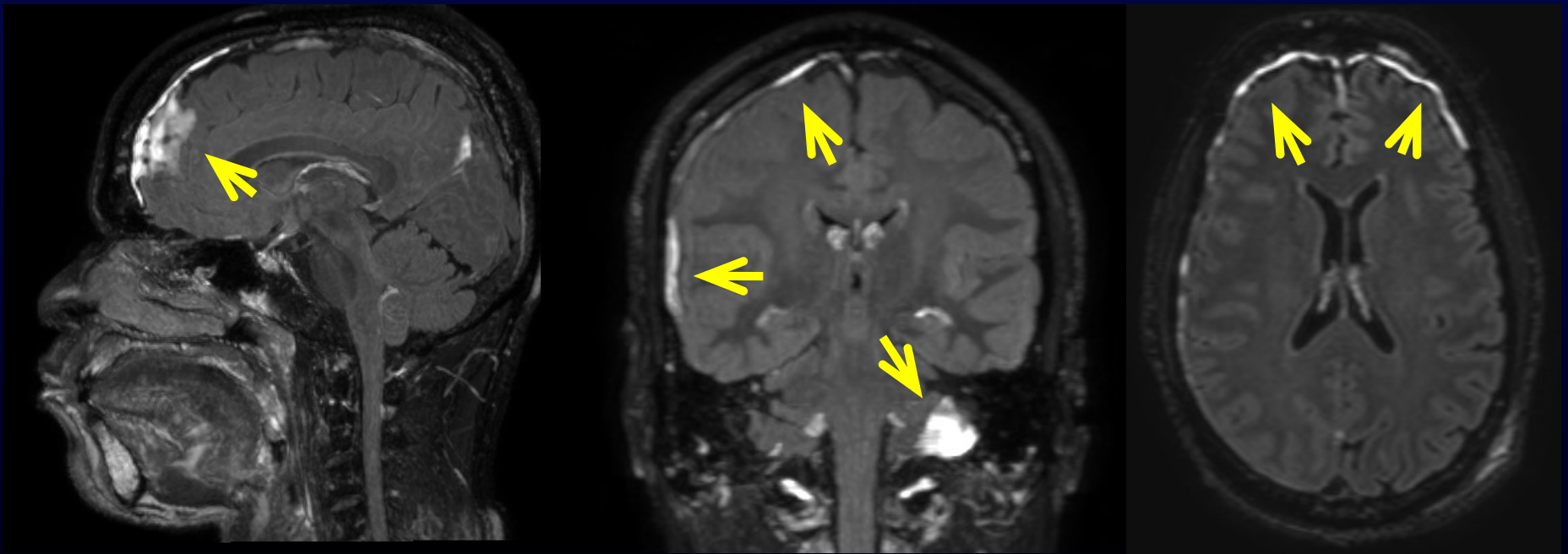
Pre-

Post-contrast

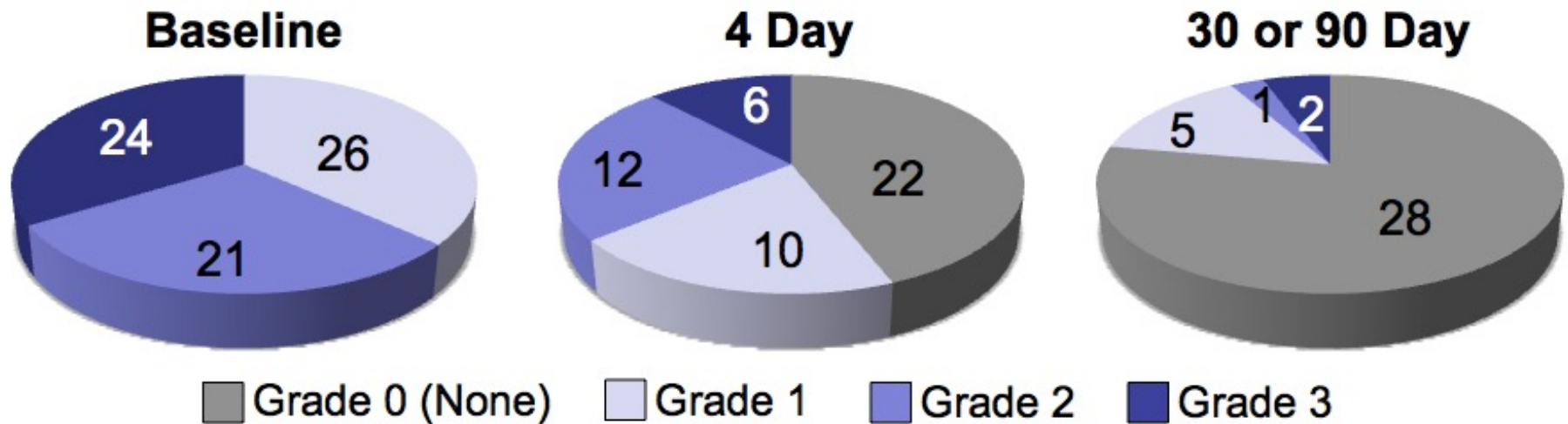
Post-contrast



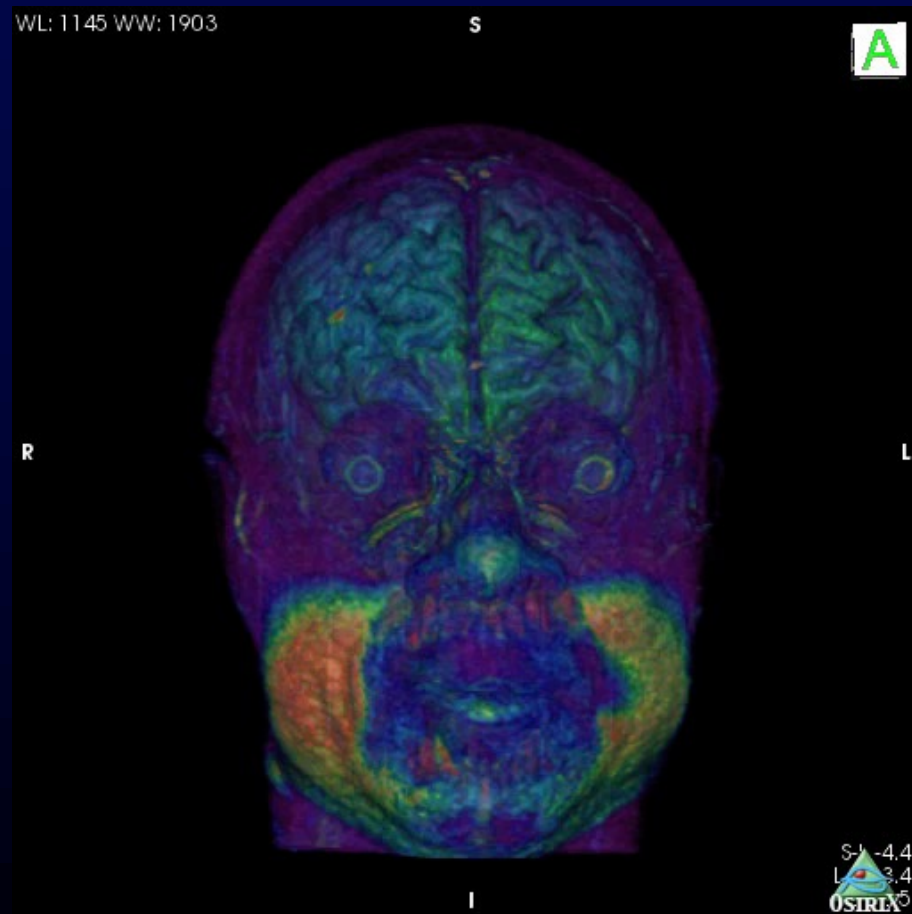
Traumatic Meningeal Injury (TMI)



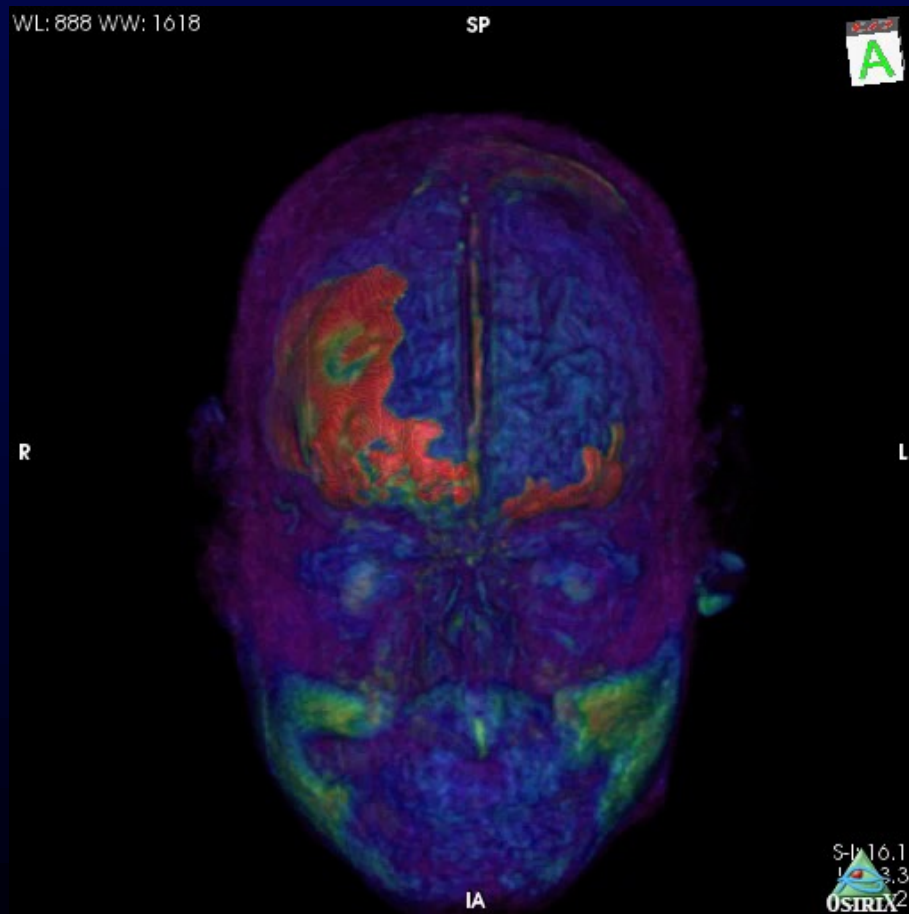
Resolution of TMI

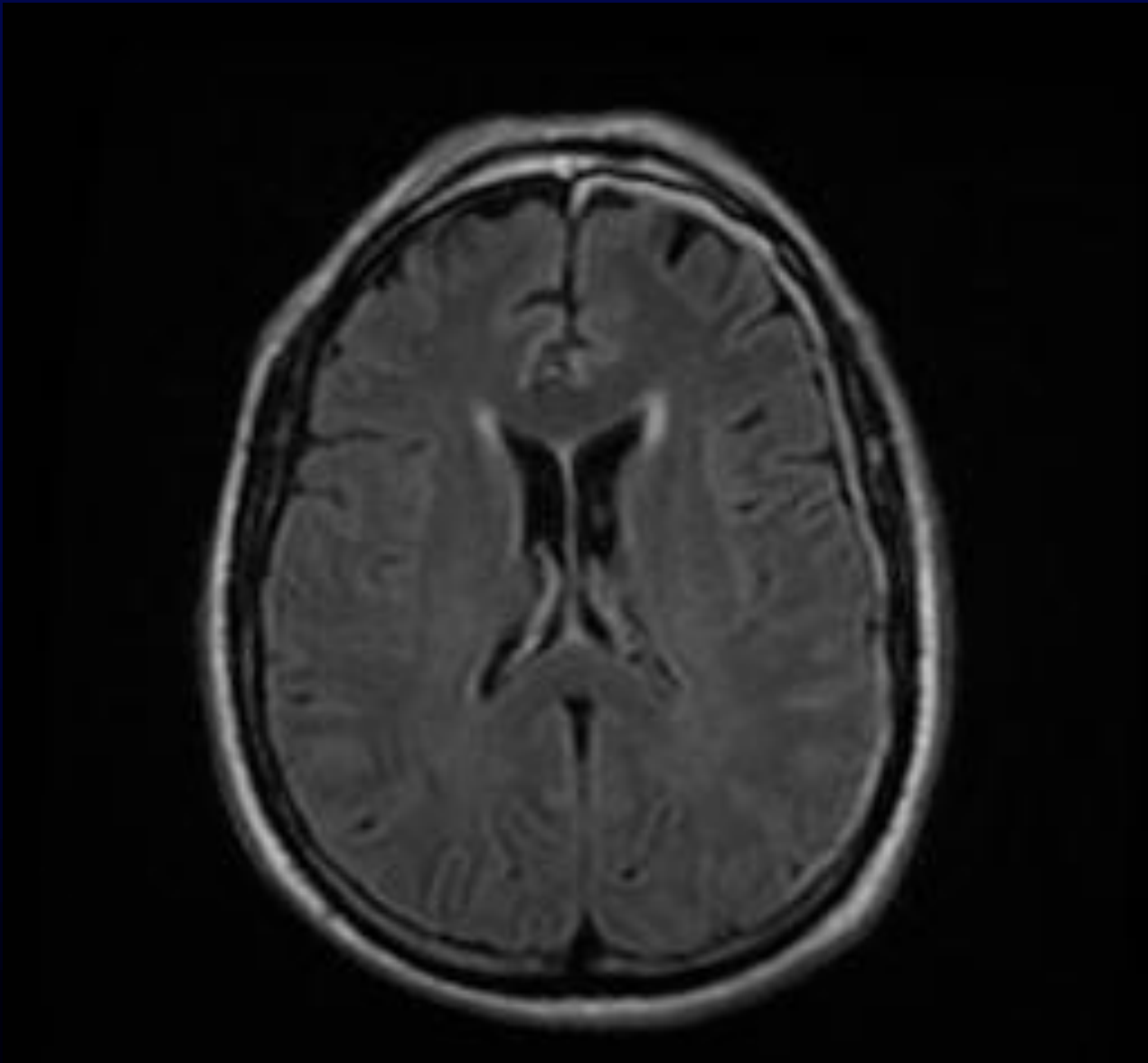


3D FLAIR - Normal



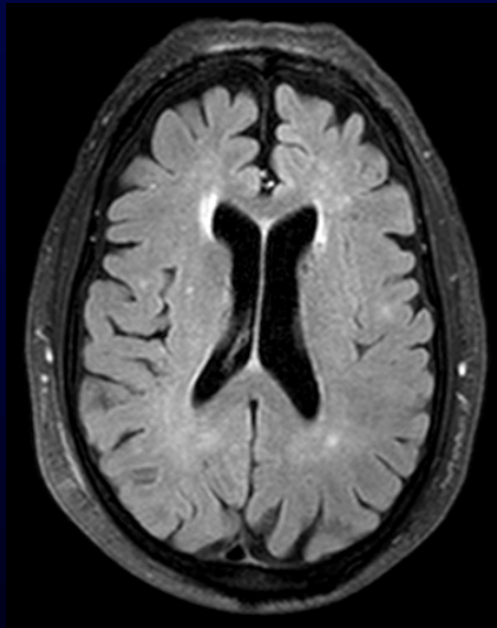
Acute TMI



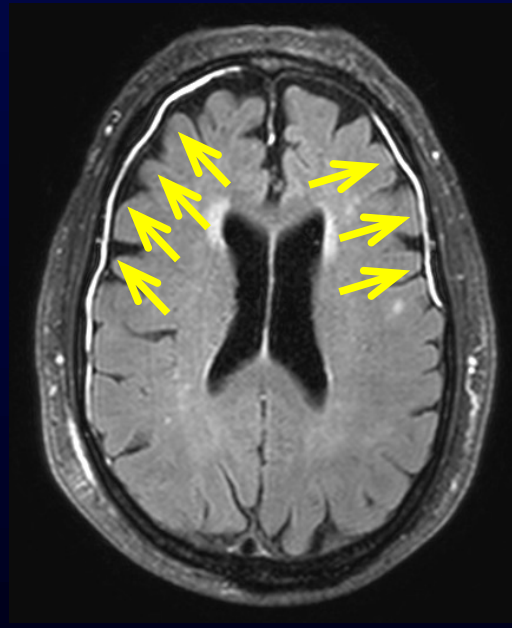


Potential Progression

Acute TMI

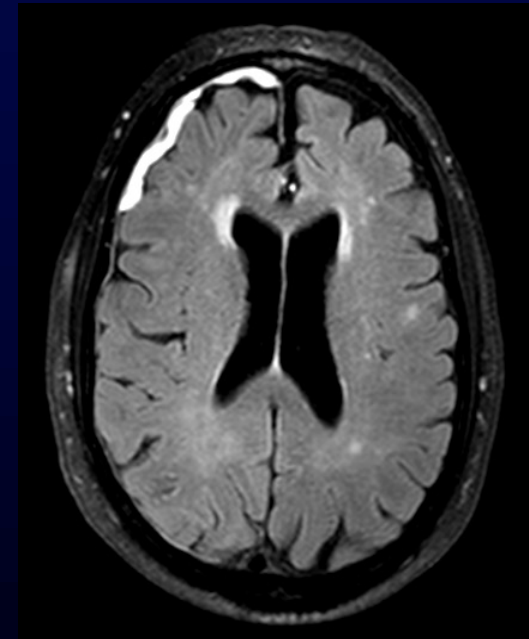


FLAIR-pre



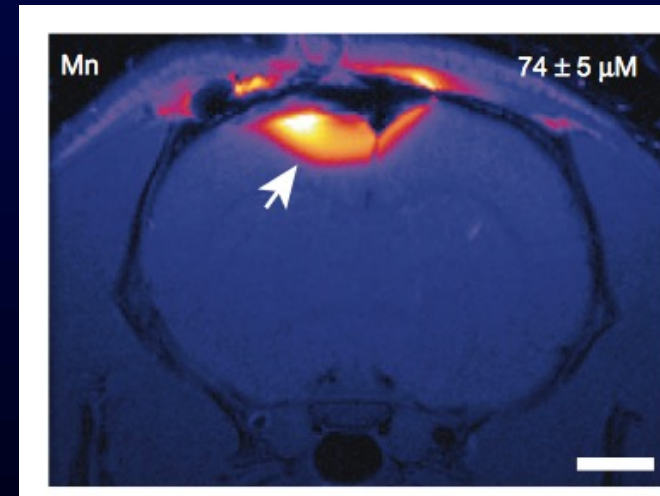
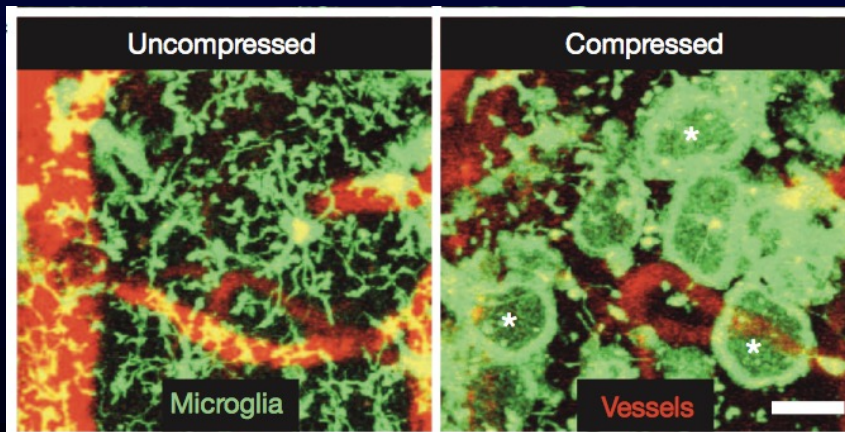
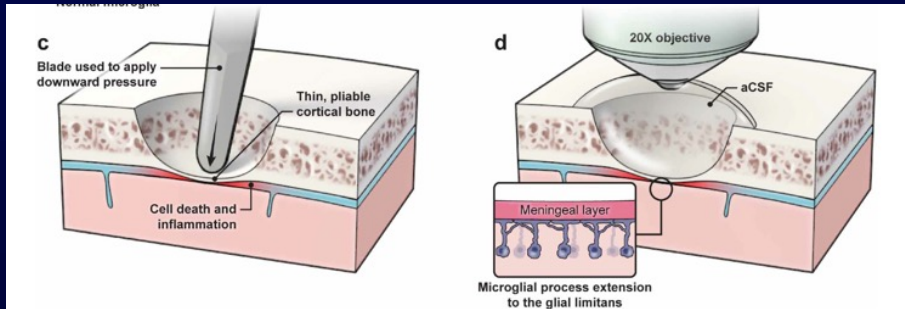
FLAIR-post

Chronic SDH



FLAIR-pre

Dorian McGavern



[Nature](#). 2014 Jan 9;505(7482):223-8. doi: 10.1038/nature12808. Epub 2013 Dec 8.

Transcranial amelioration of inflammation and cell death after brain injury.

Roth TL, Nayak D, Atanasijevic T, Koretsky AP, Latour LL, McGavern DB.

TVI (Traumatic Vascular Injury)

Brainwashing

Evidence for a 'Paravascular' Fluid Circulation in the Mammalian Central Nervous System, Provided by the Rapid Distribution of Tracer Protein Throughout the Brain from the Subarachnoid Space

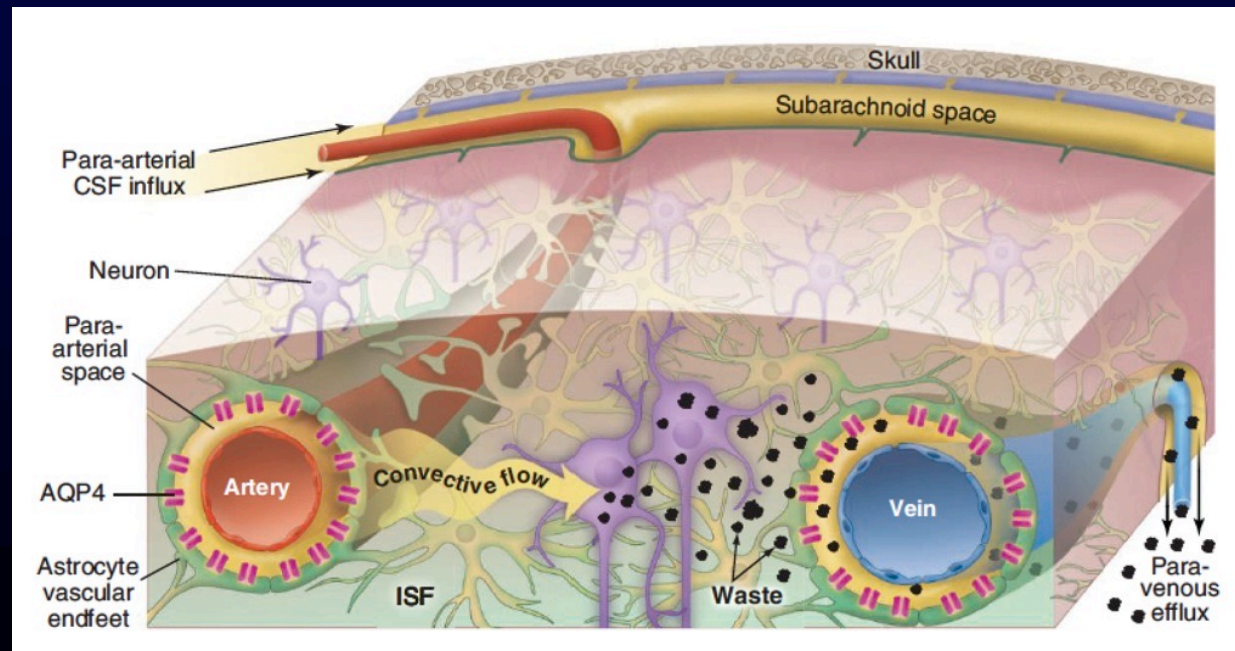
MARSHALL L. RENNELS, THOMAS F. GREGORY, OTIS R. BLAUMANIS,
KATSUKUNI FUJIMOTO and PATRICIA A. GRADY

Departments of Anatomy and Neurology, The University of Maryland School of Medicine, Baltimore, MD (U.S.A.)

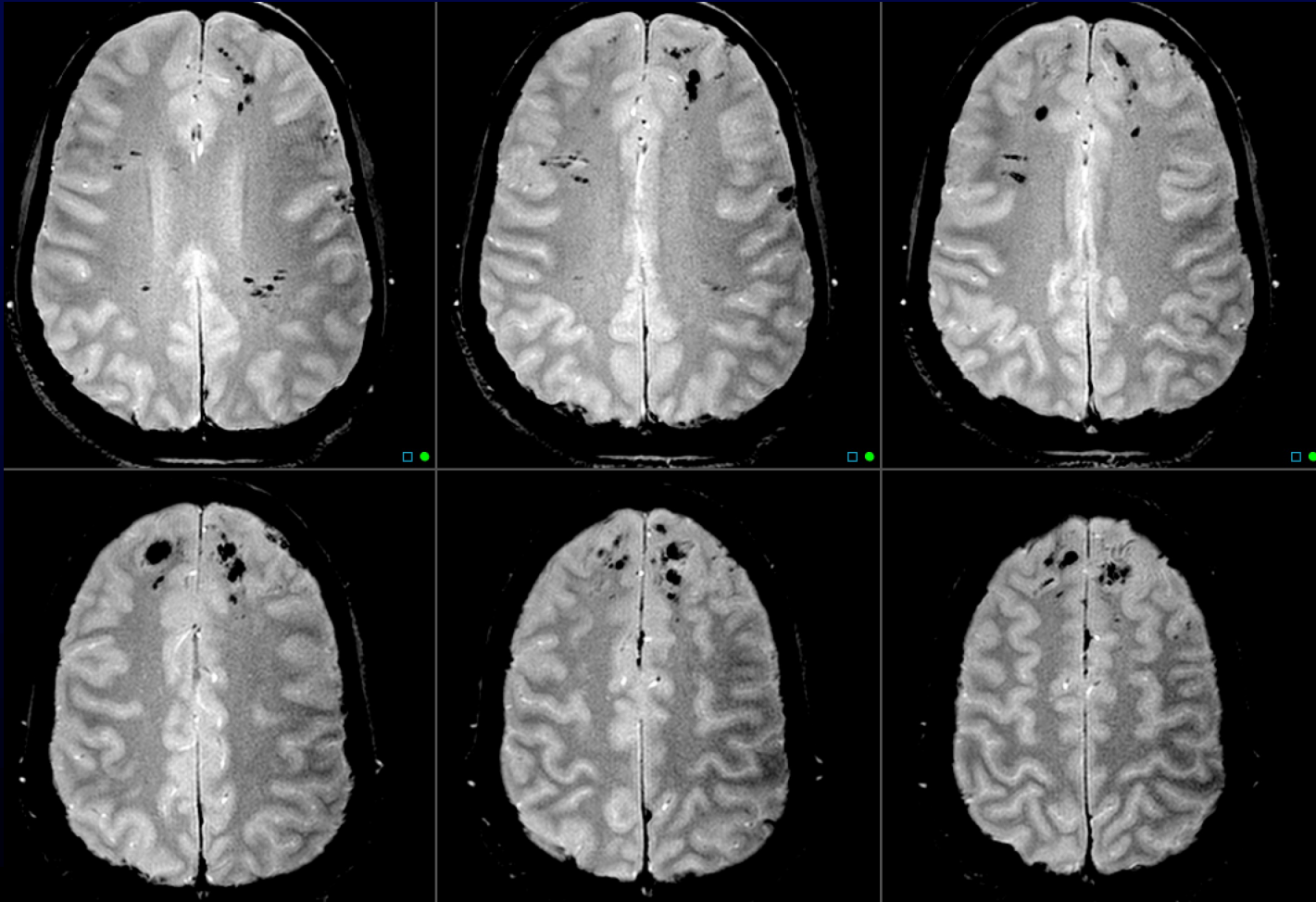
(Accepted May 1st, 1984)

Garbage Truck of the Brain

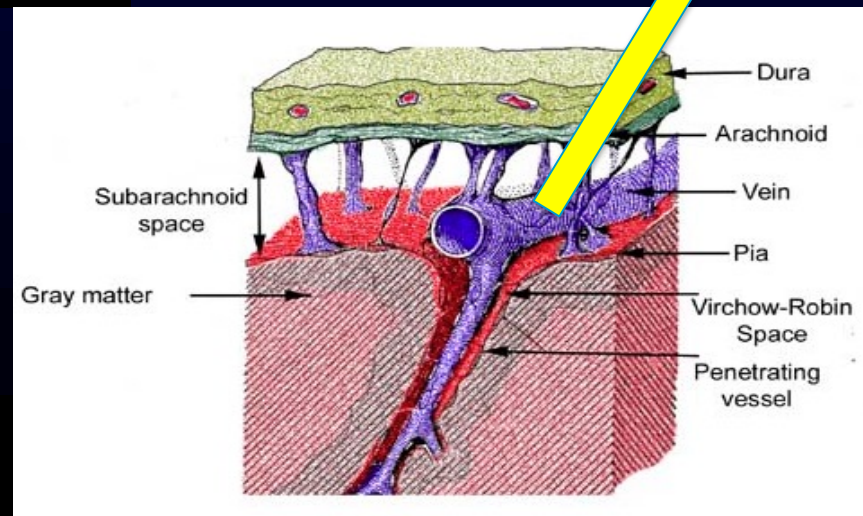
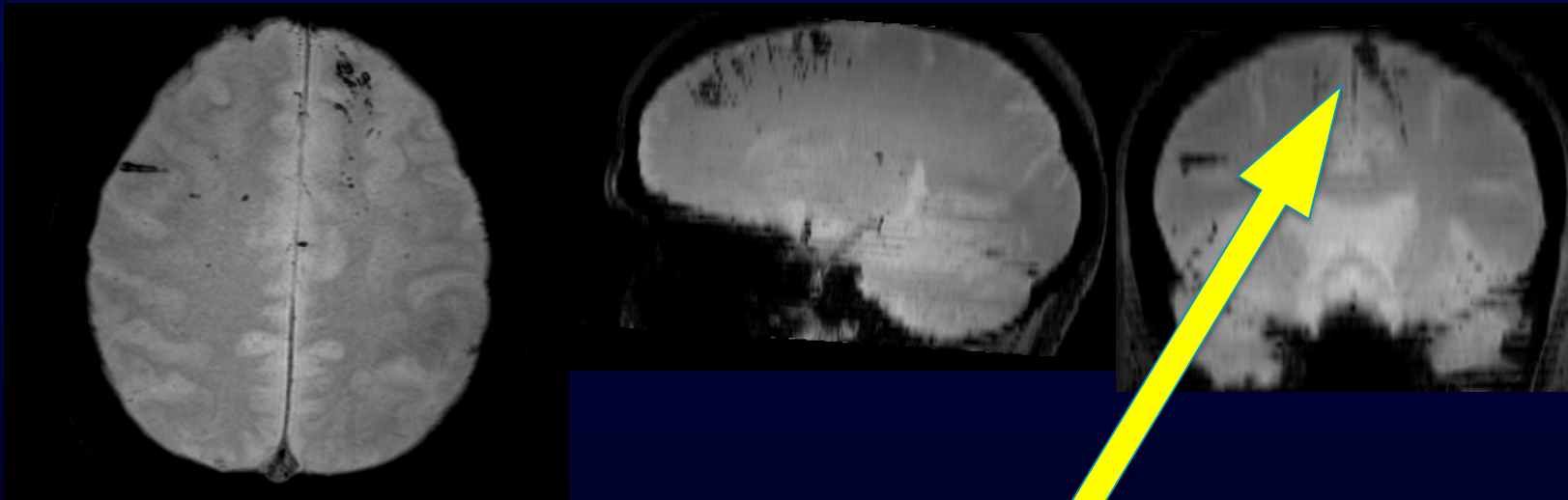
Maiken Nedergaard



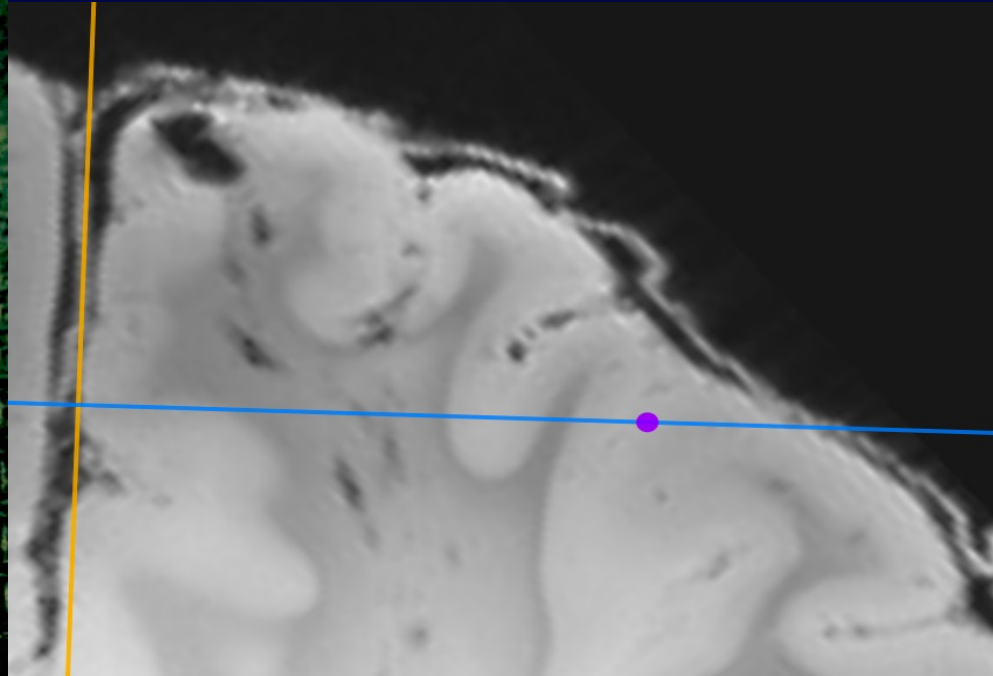
So Called Traumatic Microbleeds

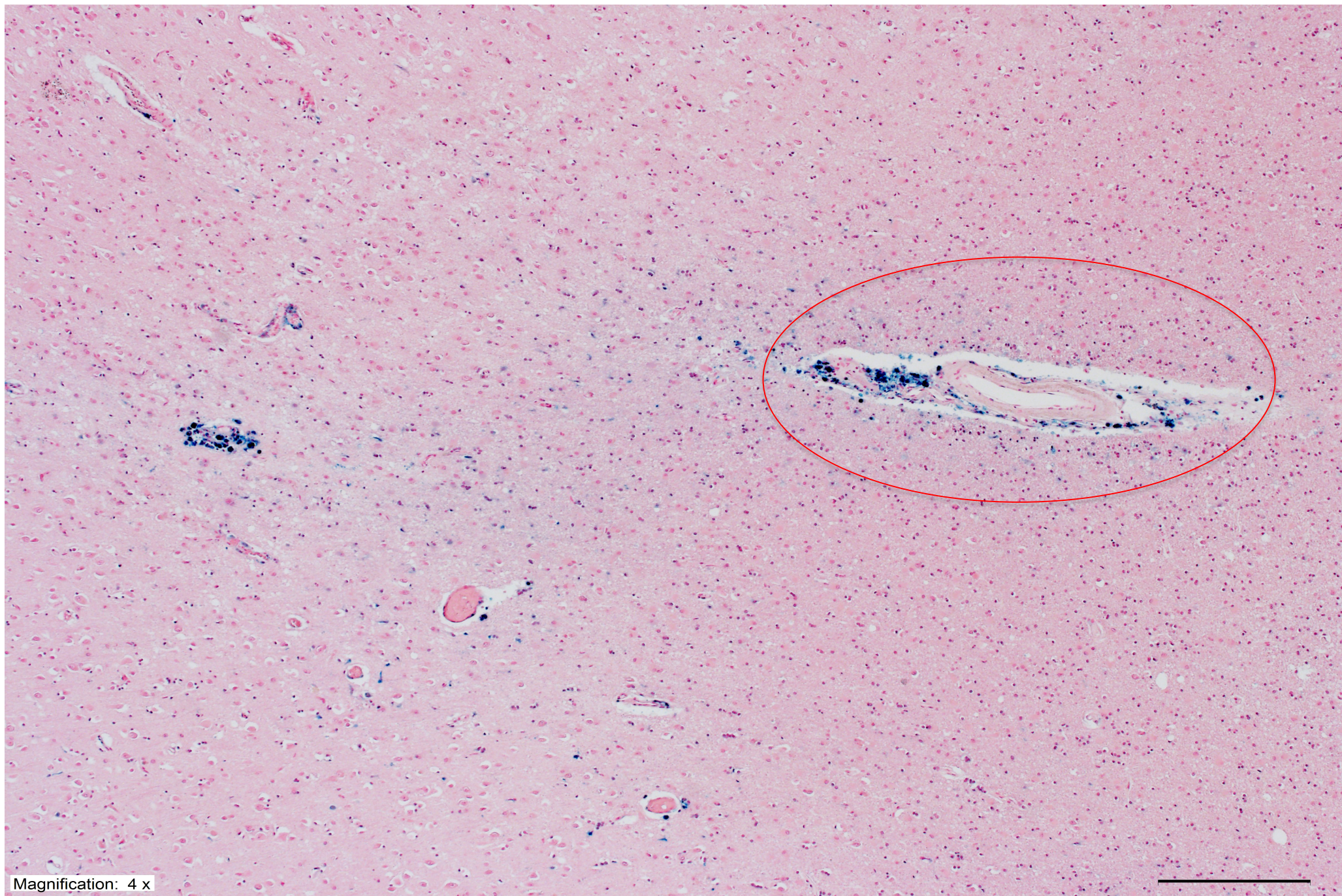


Traumatic Vascular Injury (TVI)



Vascular Injury

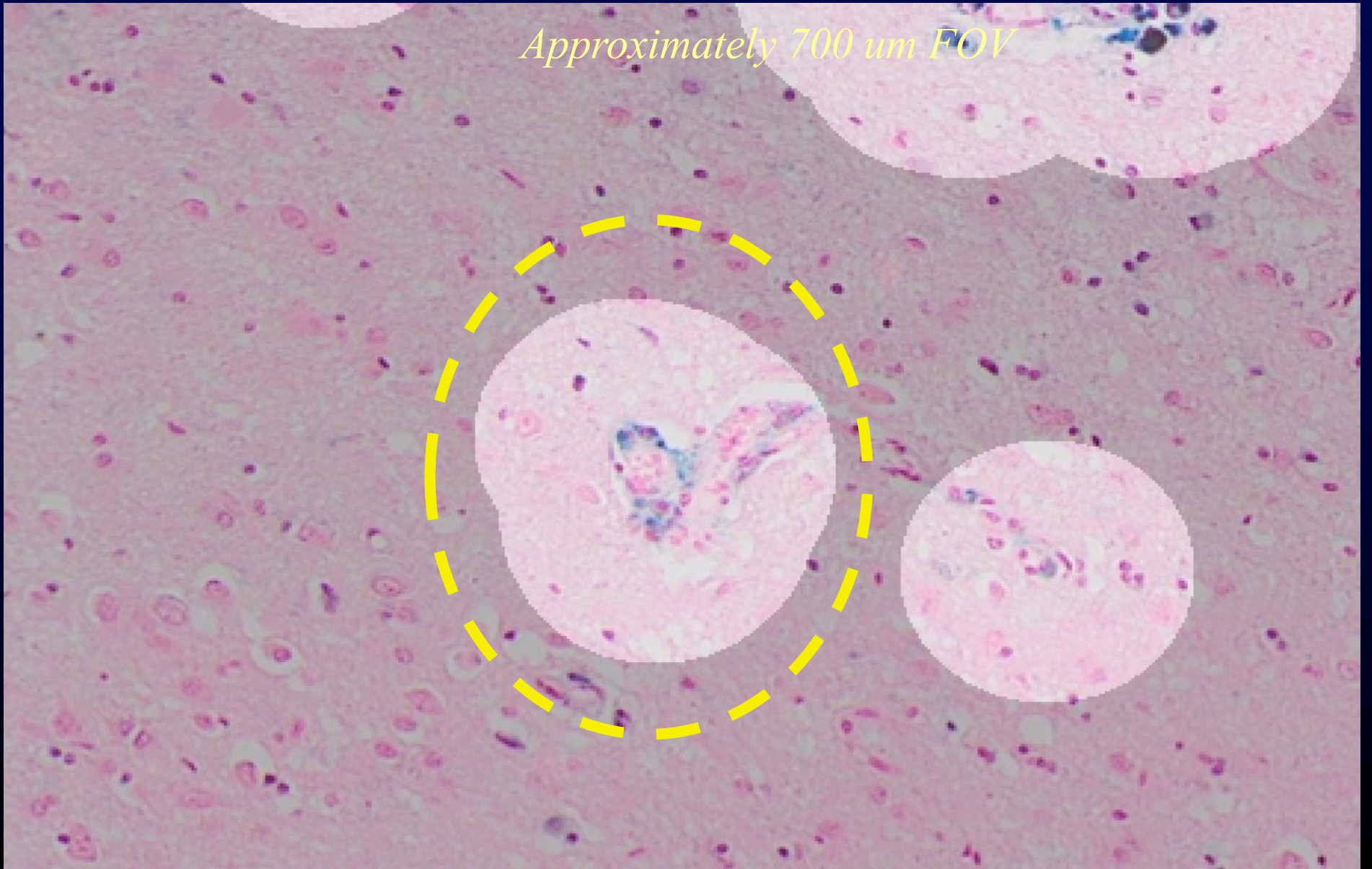




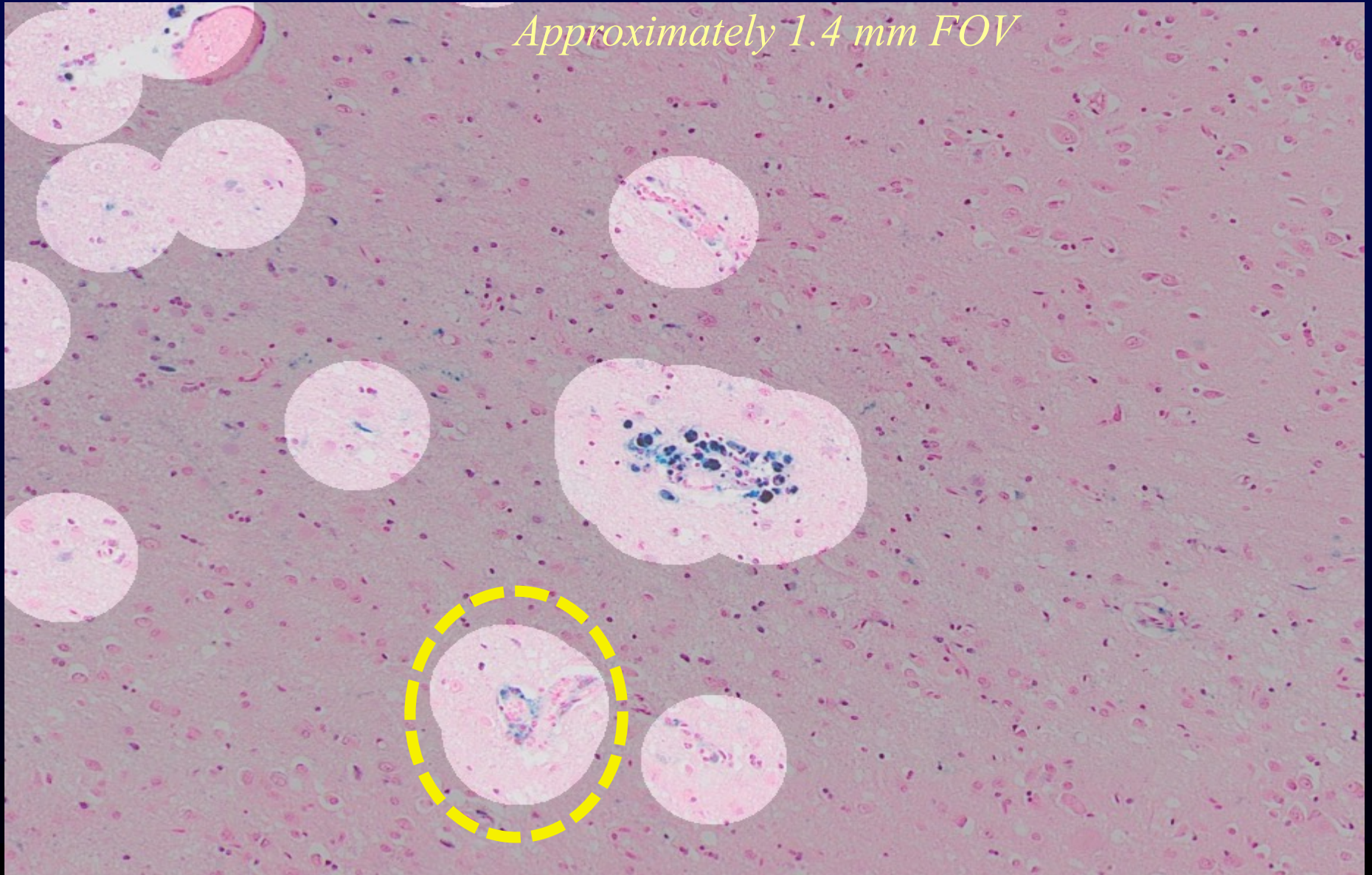
Magnification: 4 x



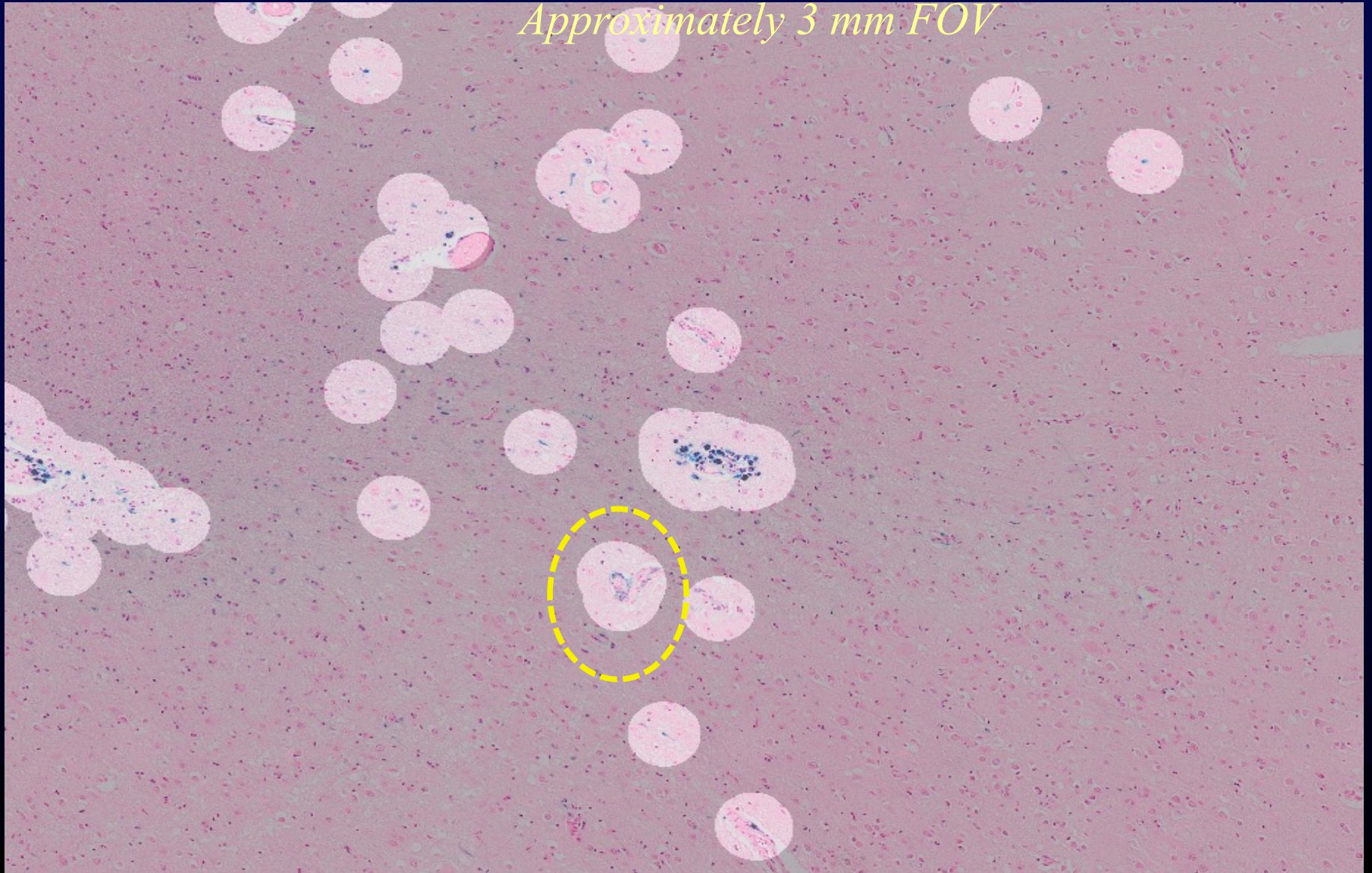
Approximately 700 μ m FOV



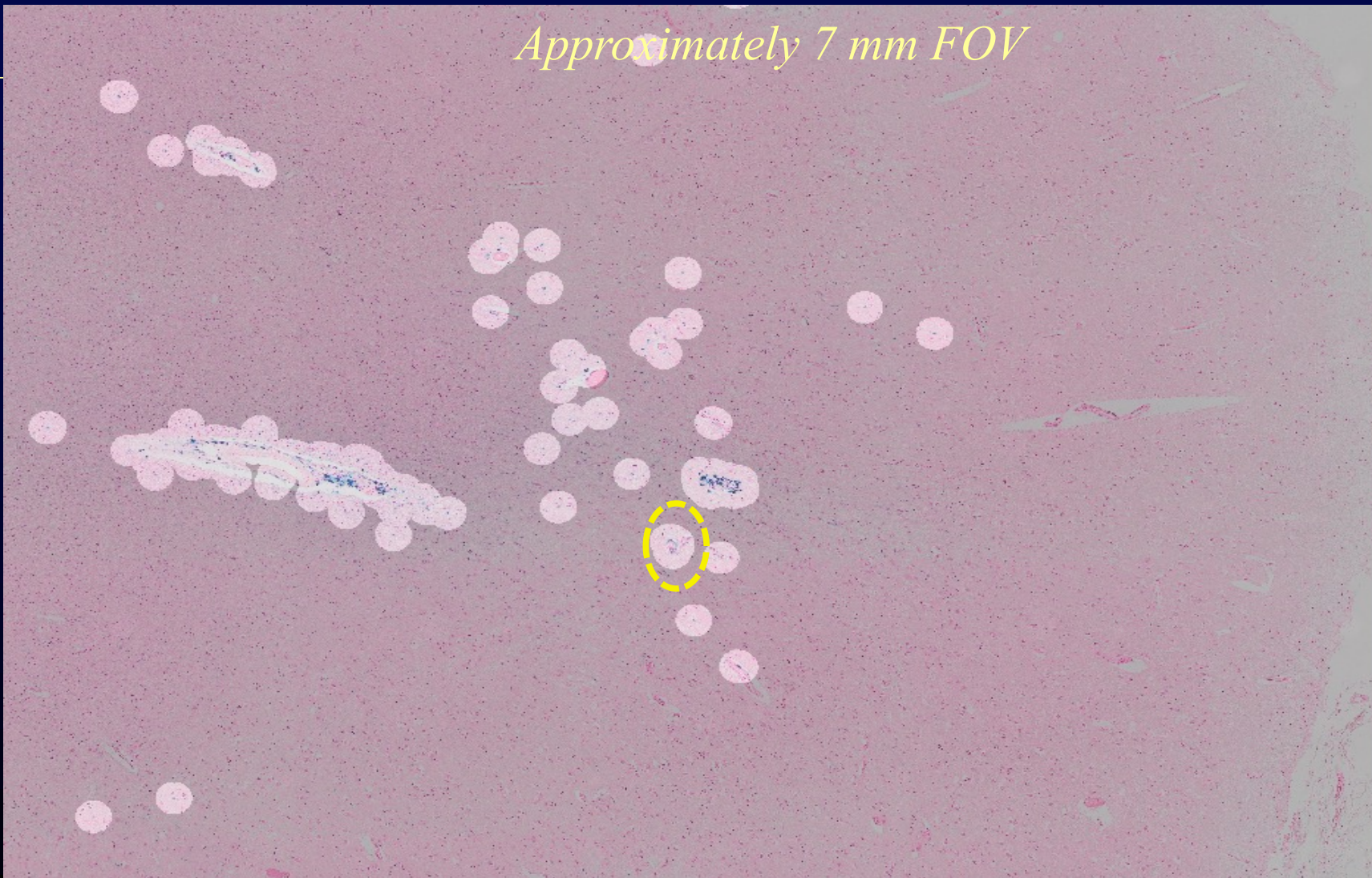
Approximately 1.4 mm FOV



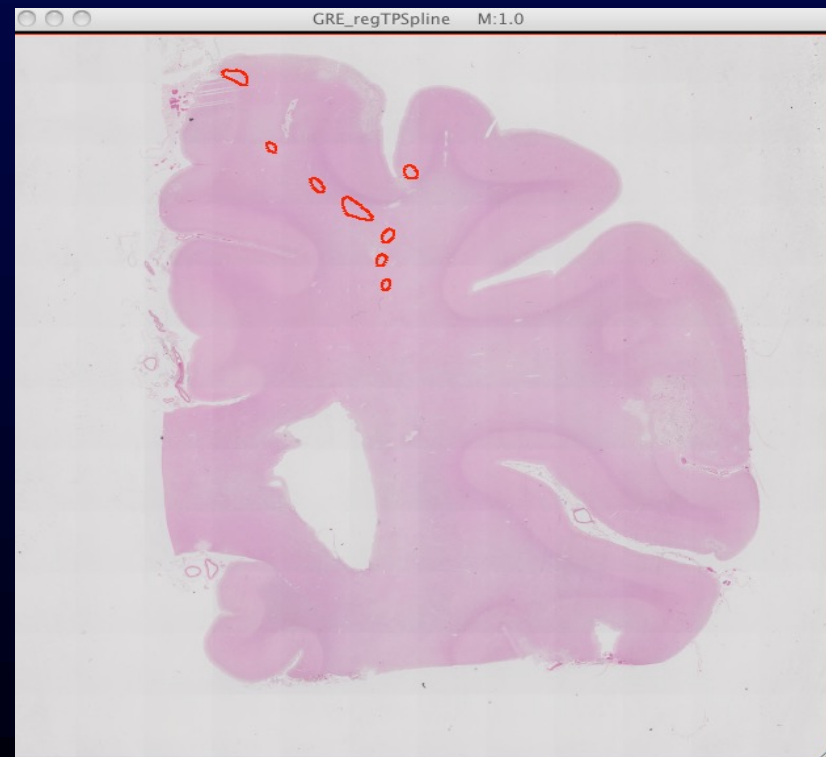
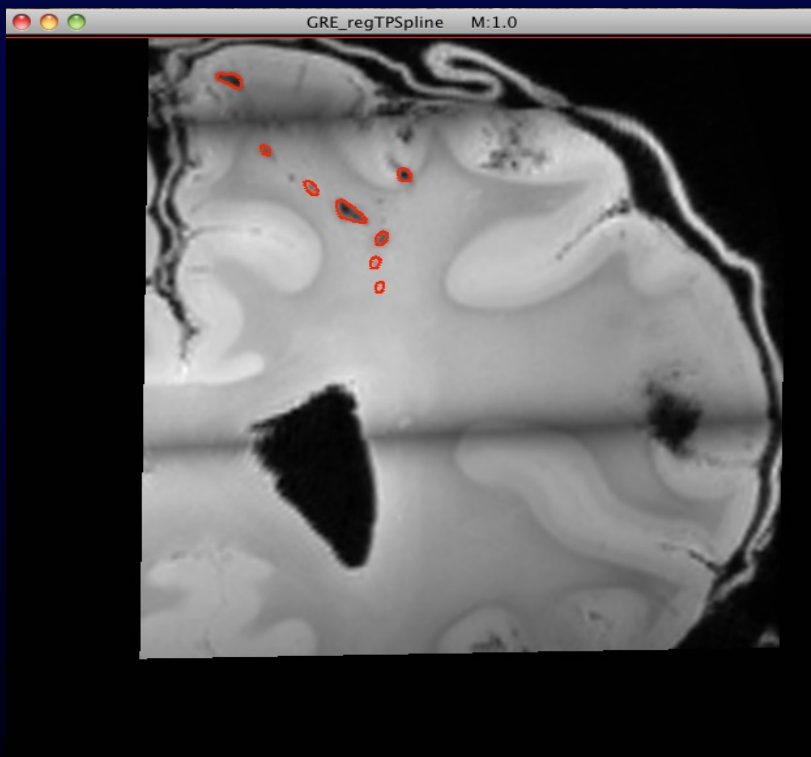
Approximately 3 mm FOV



Approximately 7 mm FOV

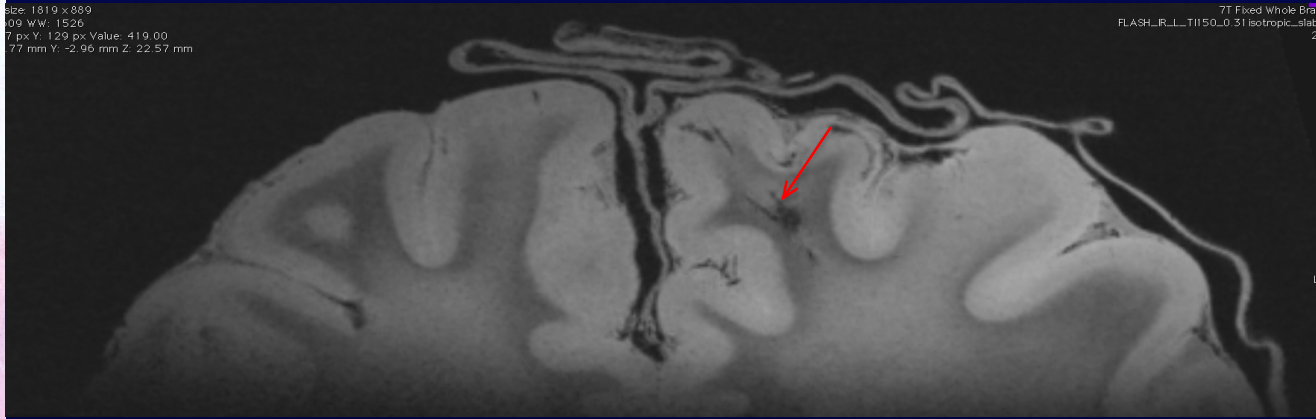


Segmentation of Lesions on MRI



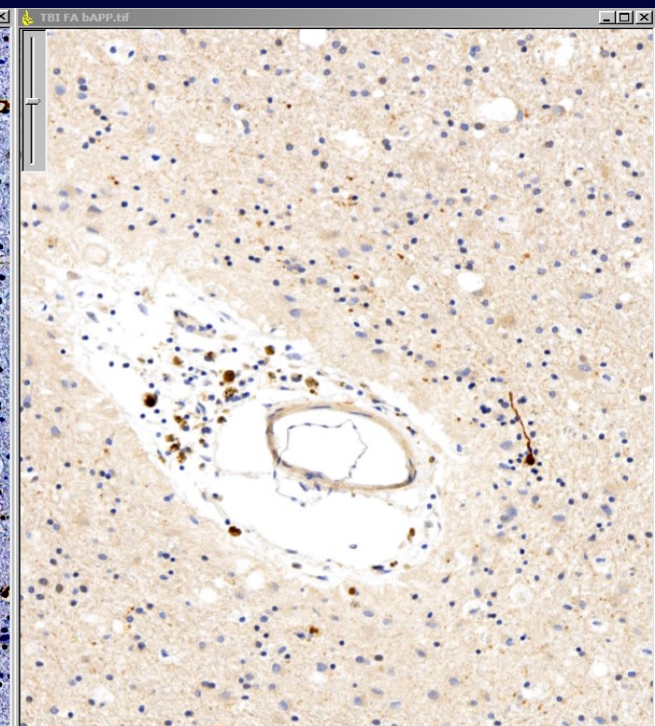
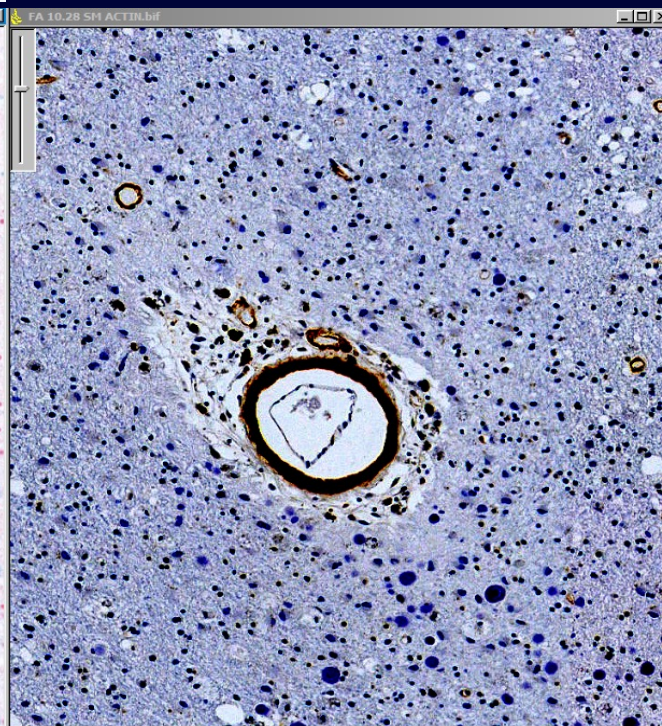
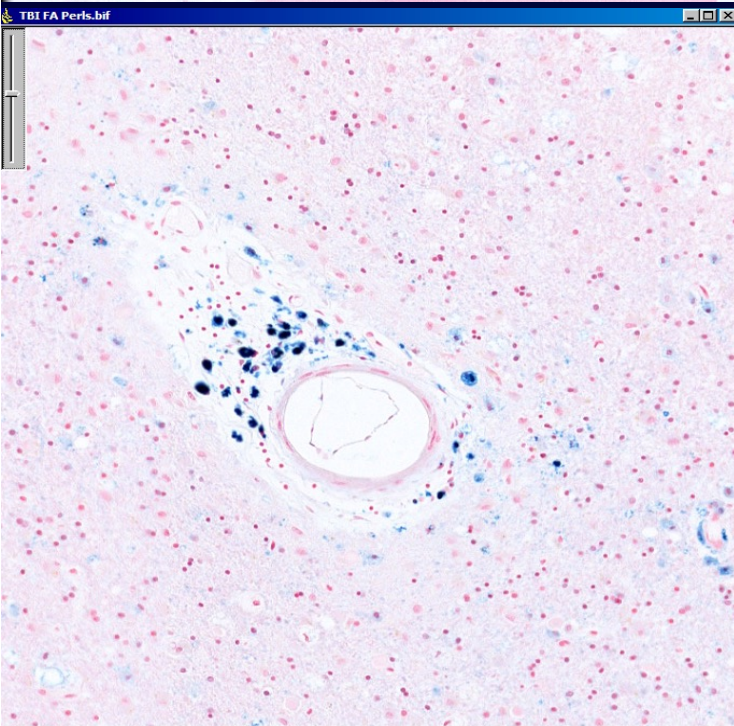


Size: 1619 x 889
09.WW: 1526
7 px Y: 120 px Value: 419.00
77 mm Y: -2.96 mm Z: 22.57 mm

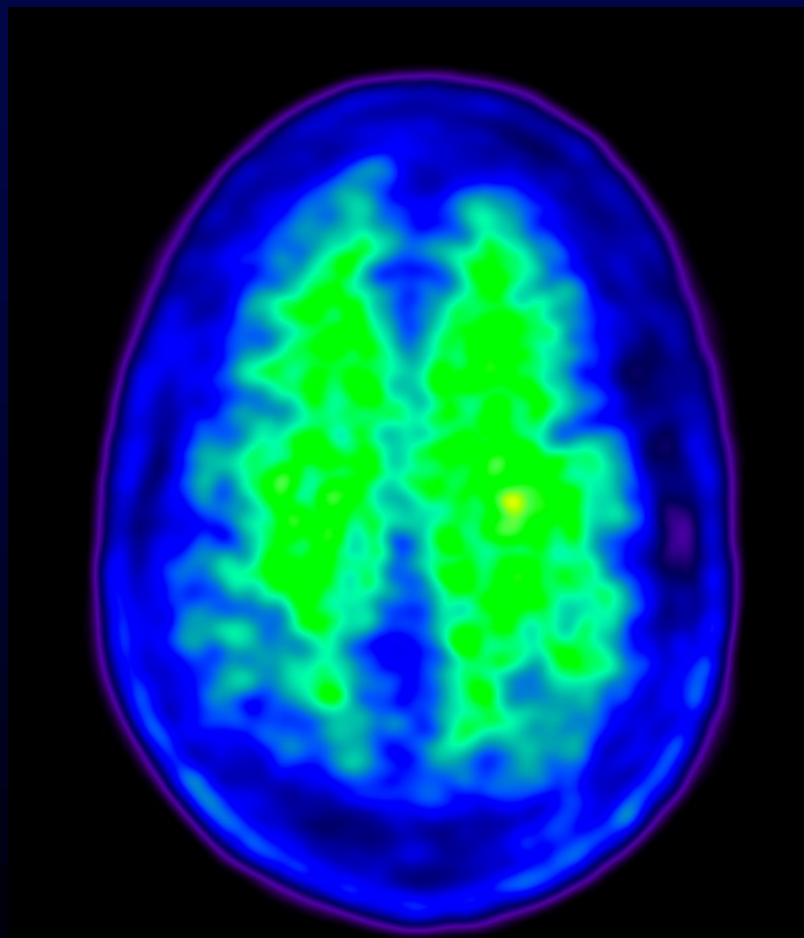


7T Fixed Whole 8.6
FLASH_IR_L_T1150_0 31 isotropic_slat

Parikh et al



Amyloid Beta PET



NINDS

