## PARIS JOURNEES INTERNATIONALES 2014

### Les amplificateurs du signal échographique

The contrast enhanced ultrasound



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The use of **contrast enhanced ultrasound** (CEUS) has improved significantly the potentiality of standard duplex ultrasound (DUS) imaging in the last decade.

- At present, 3 commercial agents, OptisonTM (GE
- Healthcare, Milwaukee, WI, U.S.A.), Definity<sup>®</sup>
- (Lantheus Medical Imaging, Billerica, MA, U.S.A.),
- and SonoVue<sup>®</sup> (Bracco SpA, Milano, Italy) are
- licensed for US applications.
- **OptisonTM and Definity**<sup>®</sup> are available in both the United States and the European Union
- whereas **SonoVue**<sup>®</sup> is only available in the European Union.

Name	Manufacturer	Shell material	Gas	Mean size (µm)	Percentage less than 10 μm	Concentration (bubbles/mL)	Imaging time (minutes)
Optison™	GE Healthcare	Albumin	$C_3F_8$	2.0-4.5	95%	5.0-8.0 x 10 <sup>8</sup>	2.5-4.5
Definity® (Luminity® in the European Union)	Lantheus Medical Imaging	Phospholipid	C <sub>3</sub> F <sub>8</sub>	1.1–3.3	98%	1.2 x 10 <sup>10</sup>	2–10
SonoVue®	Bracco SpA	Phospholipid	$SF_6$	2-8	99% (< 11 μm)	0.9–6 x 109	3–6
Homemade Microbubbles	Yeh Group at National Tsing Hua University	Phospholipid/ Lipopolymer	$C_3F_8$	0.2–0.7	> 99.9%	1.4-3.0 x 1010	10-20

- Ultrasound contrast agents are highly echogenic microbubbles with many unique properties
  - SonoVue<sup>®</sup> microbubbles structure



Shell material Phospholipids, polymers





Ultrasound contrast agents are **blood-pool agents** 

After e.v. injection they remain intravascular without any diffusion to the tissue





Ultrasound contrast agents contrubute to high enhance the ultrasound blood signal



## After disruption by US



Microbubbles gas is removed through the lung

Microbubbles structures (phospholipids, membranes, etc) are metabolized by the liver and are removed by the kidney





Contrast-Enhanced Ultrasound Imaging of the Vasa Vasorum: From Early Atherosclerosis to the Identification of Unstable Plaques

J Am Coll Cardiol Img. 2010;3(7):761-771

**CEUS** is currently used in many different vascular fields; particularly as far as the evaluation of carotid plaques and the **follow-up** after aneurysm repair (EVAR).



Endoleak detection and classification after endovascular treatment of abdominal aortic aneurysm: value of CEUS over CTA Abdominal Imaging May 2008, Volume 33, Issue 3, pp 357-362

## **Evaluation of carotid plaques**

Many studies have shown a correlation between echolucency on standard DUS of the carotid artery and grade of **intraplaque neovascularization**.

More echolucent lesions had significantly higher degree of neovascularization compared with more echogenic ones

This is consistent with the pathophysiologic concept that neoangiogenesis is associated with **more rapidly progressive and unstable vascular disease**  Many stroke-related features of the carotid plaques can be assessed by:

## **Basic carotid duplex ultrasound (CDU)**

- •plaque echolucenty (>40% of area)
- •discrete white areas (DWAs) without acoustic shadowing
- •thin cap/ulceration
- stenosis degree wall shear stress cap disruption
- motion of intraplaque content

## CEUS

- intraplaque inflammation
- •vasa vasorum network within the plaque
- Falkowski A Med Scienc Mon 2007 Nicolaides An J Vasc Surg 2011 Makris GC Atherosclerosis 2011 Kashiwazaki D J Neurosurg 2112 Byrnes KR Int J Vasc Med 2012









#### **Contrast enhanced ultrasound – CEUS**

can be used to quantify plaque morphology by identifying intraplaque inflammation and or neovascularization that is directly related to the risk of cardiovascular events (myocardial infarction, TIA, stroke)

Radiology

Correlation of Carotid Plaque Neovascularization Detected by Using Contrast-enhanced US with Clinical Symptoms<sup>1</sup>

Li Xiong, MD You-Bin Deng, MD Ying Zhu, MD Ya-Ni Liu, MD Xiao-Jun Bi, MD Purpose: To determine the correlation between the degree of plaque enhancement with contrast agent microbubbles and clinical symptoms in patients with carotid atherosclerotic plaque.





Staub D. Stroke. 2010

Inflammation within Carotid Atherosclerotic Plaque: Assessment with Late-Phase

Contrast-enhanced US<sup>1</sup>

Radiology

Faggioli GL *Eur J Vascular and Endovascular Surgery*. 2011 Clevert DA *Eur J Radiology*. 2011

## **Evaluation of carotid plaques**

Plaque neovascularization highlighted with ultrasound contrast agents Contrast-enhanced, common carotid artery lumen



#### Plaque Neoangiogenesis



#### Plaque Neoangiogenesis

## Asymptomatic Patient Lower angiogenesis



A: colorDoppler – B; emorragic plaque - C: immuno-histochemical image VEGF (vascular endotelial growth factor) e MMP3 (Matrix Metallo Proteinasi) - D: Contrast cadense CPS - E: Contrast software of imaging analysis

Giannoni MF Eur J Vasc Endovasc Surg 2009;37(6);722-727

#### Plaque Neoangiogenesis

## Symptomatic Patient Higher angiogenesis



A: colorDoppler - B: emorragic plaque - C: immuno-histochemical image for VEGF (vascular endotelial growth factor) e MMP3 (Matrix Metallo Proteinasi) -D/E: Contrast cadense CPS - F: Contrast software of imaging analysis

Giannoni MF Eur J Vasc Endovasc Surg 2009;37(6);722-727

<u>Am J Cardiol.</u> 2013 Jul 15;112(2):292-8. Usefulness of contrast-enhanced ultrasound for detection of carotid plaque ulceration in patients with symptomatic carotid atherosclerosis.

The assessment of plaque vulnerability by CEUS is not routinely available and is not the current standard of practice

CDU may be considered the initial modality of choice to identify patients with suspicion of vulnerable plaques to be further studied with serum inflammatory and proteolytic markers



(PCR,II-6, MMP-2, MMP-9, Tissue inhibitors of MMP -1 e -2)

contrast-enhanced MRA





CTA



**Transcranial Doppler** 

## Follow-up after aneurysm repair EVAR

## **Types of endoleak**

- Type 1: perigraft or graft related
- Type 2: retrograde or non graft related
- Type 3: fabric tear or modular disconnections
- Type 4: graft porosity
- Undefyned origin
- Endopression or endotension



D.A. Clevert a, N. Minaifar a, S. Weckbach a, R. Koppb, G. Meimarakis b, D.A. Clevert c and M. Reiser

Color duplex ultrasound and contrast-enhanced ultrasound in comparison to MS-CT in the detection of endoleak following endovascular aneurysm repair

Clinical Hemorheology and Microcirculation 39 (2008) 121–132 121

In many studies the utility of CEUS in the follow up after Endovascular aortic aneurysm Repair is remarked

#### Kopp R, Zürn W, Weidenhagen R, Meimarakis G, Clevert DA.

First experience using intraoperative contrast-enhanced ultrasound during endovascular aneurysm repair for infrarenal aortic aneurysms.

<u>J Vasc Surg.</u> 2010 May;51(5):1103-10

#### <u>Giannoni MF, Citone M, Rossini M,</u> <u>Speziale F, David V</u>.

Role of contrast-enhanced ultrasound in the follow-up of endo-vascular aortic aneurysm repair: an effective and safe surveillance method.

Curr Pharm Des. 2012;18(15):2214-22.

#### Marijke Vroomen Durning, RN

Contrast-enhanced US Monitors Aortic Aneurysm Repair <u>Ultrasound</u> May 15, 2012



Type II endoleak detected by CDU (red arrow). The yellow arrows mark the stentgraft.



The type II endoleak is confirmed by CEUS (red arrow). The well-perfused stentgraft is delineated by the (yellow) arrows.



MS-CT demonstration of the type II endoleak (red arrow) and the contrast enhanced stentgraft (yellow arrows).



CDU does not show any presence of an endoleak. The bright (yellow) arrows mark the stentgraft.



CEUS demonstrates a type III endoleak (red arrow) and the perfused stentgraft (yellow arrows).



MS-CT confirms the finding of CEUS by showing a type III endoleak (red arrow). The stentgraft is marked by (yellow) arrows.



In CDU no endoleak is seen. There is perfusion of the stentgraft (yellow arrows).



CEUS demonstrates a type IA endoleak (red arrow) and the well-perfused stentgraft (yellow arrows).



MS-CT confirms the type IA endoleak (red arrow) in the follow-up. The stentgraft is indicated by the bright (yellow) arrows.

CEUS has a number of advantages to conventional color duplex ultrasound.



It has high spatial resolution It can simultaneously detect high and slow velocities It can assess blood flow and tissue It doesn't use X-ray

#### Nonetheless, CEUS has some limitations.

Obesity and bowel gas can interfere with US scanning, and **patient compliance is always required**. The equipment, including the contrast agent, is expensive, **highly specific and not yet widely available**. The examination is operator-dependent and requires **specific skills and training**.

Finally, CEUS may seem very sensitive in the depiction of per graft flow but is not appropriate for the evaluation of other factors such as graft anchorage and integrity and changes in aneurysm morphology, for which CTA is the modality of choice

#### **Other indications for CEUS**

#### Color-coded transcranial Doppler



Diagnostic value of contrast-enhanced intraoperative Doppler sonography for cerebral arteriovenous malformations compared with angiography. <u>Chinese Medical Journal 2010;123(20):2812-2815</u>

#### **Other indications for CEUS**

#### Kidney





#### Detection of kidney masses

Perfusion study of transplanted kidney

#### **Other indications for CEUS**

## Contrast enhanced ultrasound may be used also in oncology to identify neo-vascularized areas





## The future

## 3D Contrast enhanced ultrasound for a better definition of the structures in study

## The future

## Microbubbles have been proposed as a new vehicle for carrying drugs and genes

Shih-Tsung Kang, Chih-Kuang Yeh Ultrasound Microbubble Contrast Agents for Diagnostic and Therapeutic Applications: Current Status and Future Design Chang Gung Med J Vol. 35 No. 2 March-April 2012

**Lipophilic chemotherapeutic drugs** can be incorporated into the lipid layer of microbubbles.

**Genetic materials** (e.g., plasmid DNA) can be electrostatically attached to the surface of positively charged microbubbles

The payload of drugs or DNA can be locally released by the destruction of microbubbles within the ultrasound-treated region, with a simultaneous increase in the permeability of the tissues. This suggests the potential of microbubble technology in aiding drug or gene therapy, with reduced side effects to normal tissues.

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# Arrivederci

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