



UMC Utrecht

Vascular imaging – the renal arteries

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Clinical rationale

renovascular hypertension

renal denervation

renal transplantation



Clinical rationale

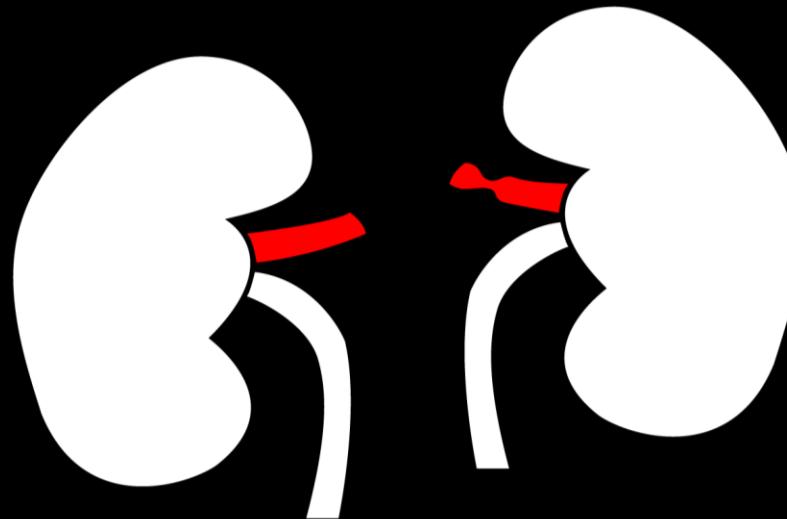
renovascular hypertension

renal denervation

renal transplantation



Goldblatt phenomenon

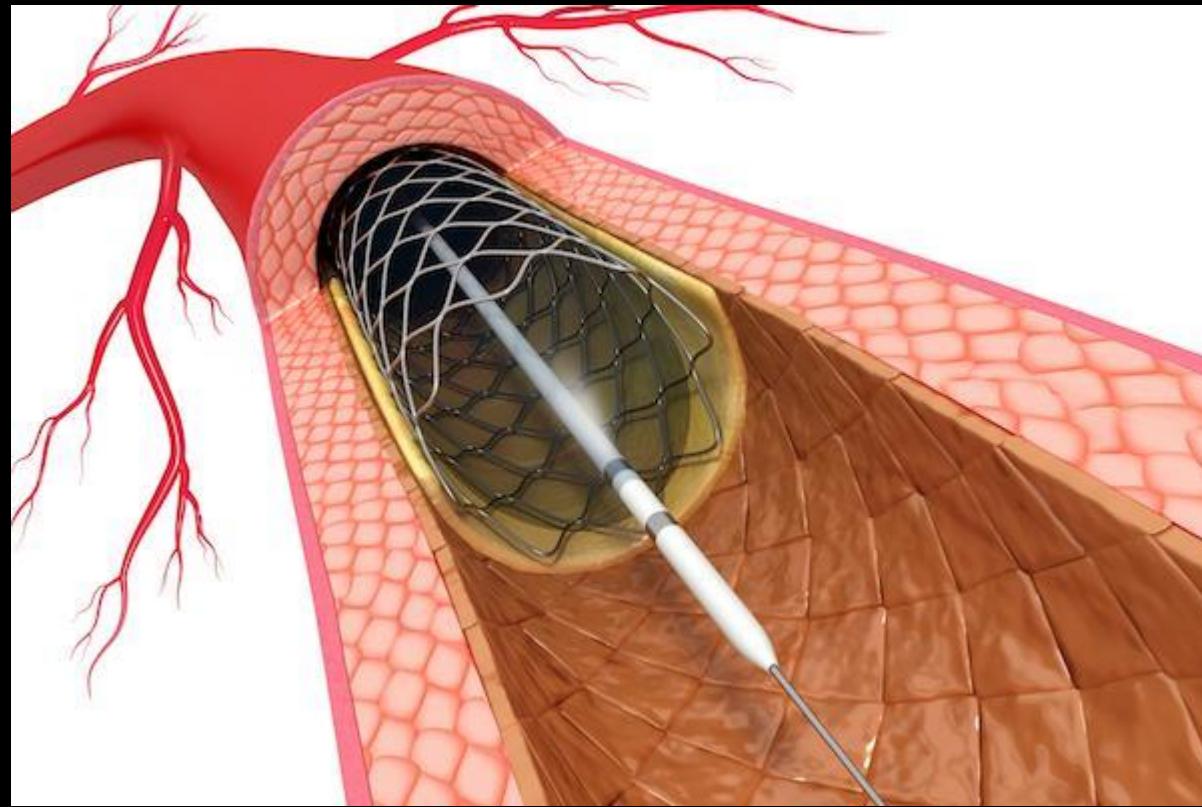


renal blood flow ↑
GFR (\uparrow)



sodium retention
blood pressure ↑





Fibromuscular dysplasia



Fabrega-Foster KE, et al. J Magn Reson Imaging. 2018 Feb;47(2):572-581.

ARTICLE**Annals of Internal Medicine**

Stent Placement in Patients With Atherosclerotic Renal Artery Stenosis and Impaired Renal Function

A Randomized Trial

Liesbeth Bax, MD, PhD; Arend-Jan J. Woittiez, MD, PhD; Hans J. Kouwenberg, MD; Willem P.T.M. Mali, MD, PhD; Erik Buskens, MD, PhD; Frederik J.A. Beek, MD, PhD; Branko Braam, MD, PhD; Frans T.M. Huysmans, MD, PhD; Leo J. Schultze Kool, MD, PhD; Matthieu J.C.M. Rutten, MD; Cornelius J. Doorenbos, MD, PhD; Johannes C.N.M. Aarts, MD; Ton J. Rabelink, MD, PhD; Pierre-François Plouin, MD; Alain Raynaud, MD; Gert A. van Montfrans, MD, PhD; Jim A. Reekers, MD, PhD; Anton H. van den Meiracker, MD, PhD; Peter M.T. Pattynama, MD, PhD; Peter J.G. van de Ven, MD, PhD; Dammis Vroegeindewelj, MD, PhD; Abraham A. Kroon, MD, PhD; Michiel W. de Haan, MD, PhD; Cornelis T. Postma, MD, PhD; and Jaap J. Beutler, MD, PhD*

The NEW ENGLAND JOURNAL of MEDICINE

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JANUARY 2, 2014

VOL. 370 NO. 1

Stenting and Medical Therapy for Atherosclerotic Renal-Artery Stenosis

Christopher J. Cooper, M.D., Timothy P. Murphy, M.D., Donald E. Cutlip, M.D., Kenneth Jamerson, M.D., William Henrich, M.D., Diane M. Reid, M.D., David J. Cohen, M.D., Alan H. Matsumoto, M.D., Michael Steffes, M.D., Michael R. Jaff, D.O., Martin R. Prince, M.D., Ph.D., Eldrin F. Lewis, M.D., Katherine R. Tuttle, M.D., Joseph I. Shapiro, M.D., M.P.H., John H. Rundback, M.D., Joseph M. Massaro, Ph.D., Ralph B. D'Agostino, Sr., Ph.D., and Lance D. Dworkin, M.D., for the CORAL Investigators*

The NEW ENGLAND JOURNAL of MEDICINE

ORIGINAL ARTICLE

Revascularization versus Medical Therapy for Renal-Artery Stenosis

The ASTRAL Investigators*

- References: Bax L et al. Ann Intern Med 2009;150:840–848; W150-841.
Wheatley K et al. N Engl J Med 2009; 361:1953–1962.
Cooper CJ et al. N Engl J Med 2014; 370:13–22.



Future

treat earlier?*

identify “salvageable” kidneys[†]
only treatment for functional
relevant stenosis

treat microvasculature[‡]

References: *: de Leeuw PW et al. Curr Hypertens Rep. 2018 Apr 10;20(4):35.

[†]: Abumoaawad A et al. Kidney Int. 2019 Apr;95(4):948-957.

[‡]: Chen XJ et al. J Hypertens. 2019 Oct;37(10):2074-2082.



Why imaging the renal arteries?

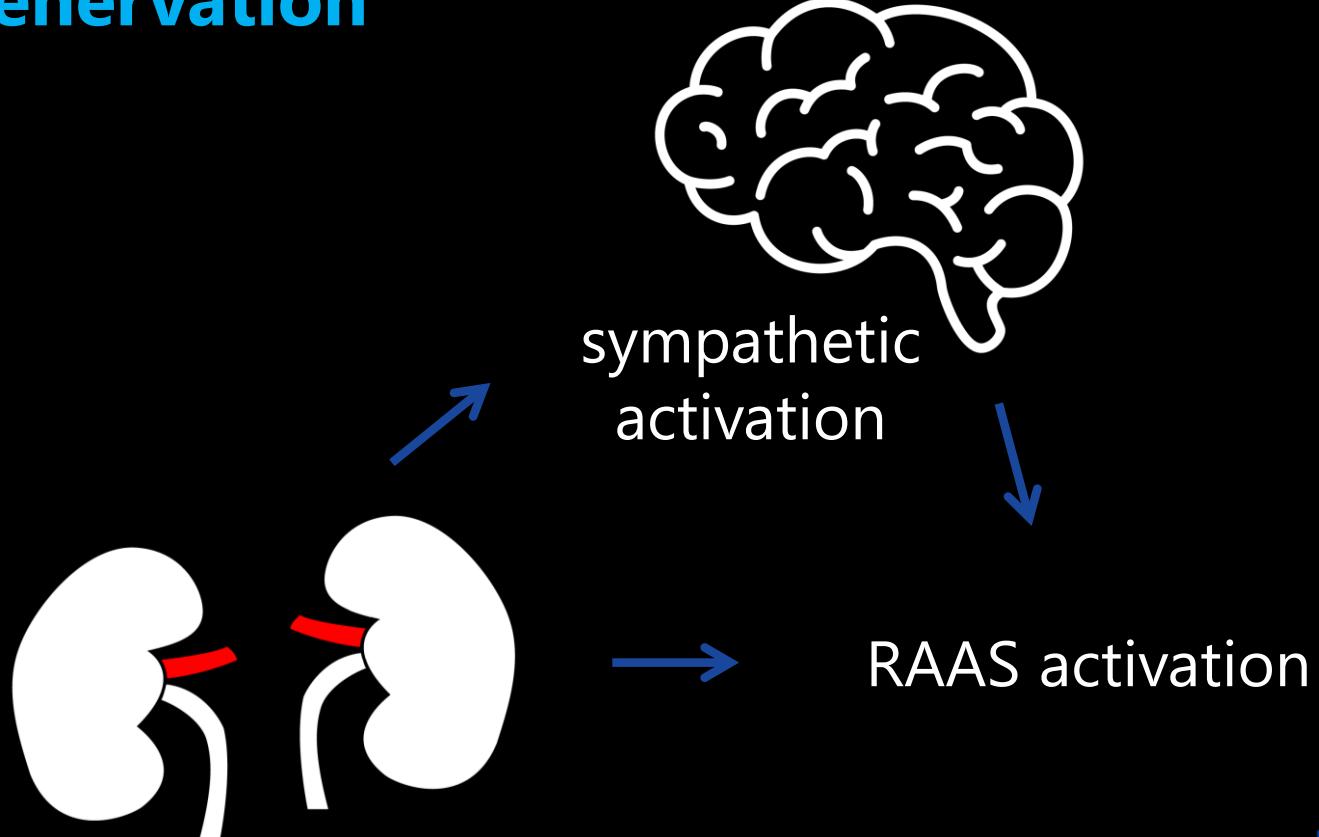
renovascular hypertension

renal denervation

renal transplantation



Renal denervation



Why imaging the renal arteries?

renovascular hypertension

renal denervation

renal transplantation



US



CT



TOF MRA



Image: Blankholm AD et al. Acta Radiol. 2015 Dec;56(12):1527-33.

preoperative planning
receiver^{*}
donor[†]

postoperative evaluation[‡]

- References: *: Blankholm AD et al. Acta Radiol. 2015 Dec;56(12):1527-33.
†: Blankholm AD et al. Acad Radiol. 2015 Nov;22(11):1368-75.
‡: Gondalia R et al. Abdom Radiol (NY). 2018 Oct;43(10):2589-2596.



Imaging techniques

MRA vs other techniques

contrast enhanced MRA

non-contrast enhanced MRA



Imaging techniques

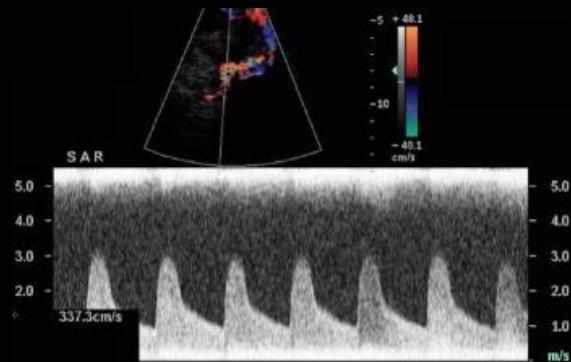
MRA vs other techniques

contrast enhanced MRA

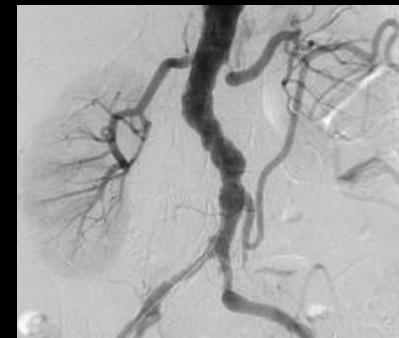
non-contrast enhanced MRA



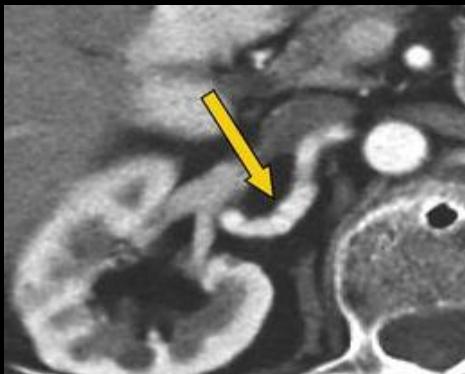
hand-held ultrasound



digital subtraction angiography



computed tomography angiography



magnetic resonance angiography



How to image the renal arteries?

MRA vs CT vs DSA vs ultrasound

contrast enhanced MRA

non-contrast enhanced MRA



CE MRA vs CTA in native kidneys

atherosclerotic stenosis

fibromuscular dysplasia



CE MRA

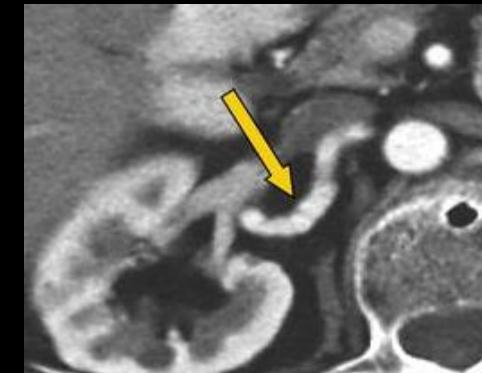


DSA



CE MRA

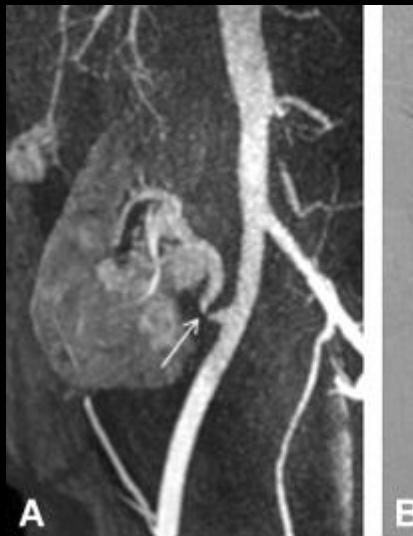
CTA



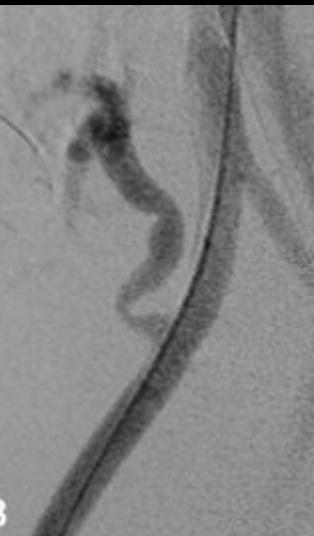
Images: Glockner JF, Vrtiska TJ. Abdom Imaging. 2007 May-Jun;32(3):407-20.

CE MRA vs CTA in renal transplants

CE MRA



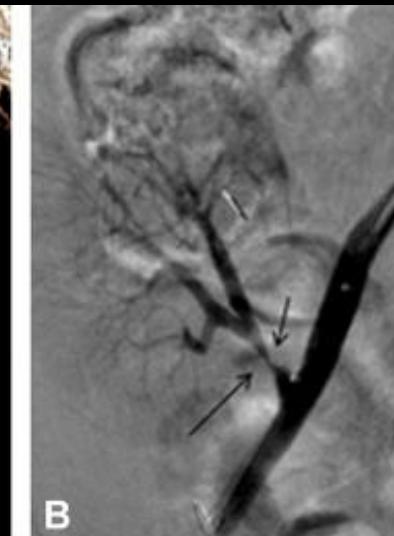
DSA



CTA



DSA



Images: Gaddikeri S et al. Curr Probl Diagn Radiol. 2014 Jul-Aug;43(4):162-8.

Ferumoxytol as MR contrast agent

Fananapazir G et al. J
Magn Reson Imaging.
2017 Mar;45(3):779-785.



Ferumoxytol as MR contrast agent

www.kidney-international.org

review

Current and potential imaging applications of ferumoxytol for magnetic resonance imaging



CrossMark

Gerda B. Toth^{1,21}, Csanad G. Varallyay^{2,21}, Andrea Horvath^{1,21}, Mustafa R. Bashir^{3,4}, Peter L. Choyke⁵, Heike E. Daldrup-Link⁶, Edit Dosa⁷, John Paul Finn⁸, Seymour Gahramanov⁹, Mukesh Harisinghani¹⁰, Iain Macdougall¹¹, Alexander Neuwelt¹², Shreyas S. Vasanawala¹³, Prakash Ambady¹, Ramon Barajas², Justin S. Cetas¹⁴, Jeremy Ciporen¹⁴, Thomas J. DeLoughery¹⁵, Nancy D. Doolittle¹, Rongwei Fu^{16,17}, John Grinstead¹⁸, Alexander R. Guimaraes², Bronwyn E. Hamilton², Xin Li¹⁹, Heather L. McConnell¹, Leslie L. Muldoon¹, Gary Nesbit², Joao P. Netto^{1,2}, David Petterson², William D. Rooney¹⁹, Daniel Schwartz^{1,19}, Laszlo Szidonya¹ and Edward A. Neuwelt^{1,14,20}



How to image the renal arteries?

MRA vs CT vs DSA vs ultrasound

contrast enhanced MRA

non-contrast enhanced MRA

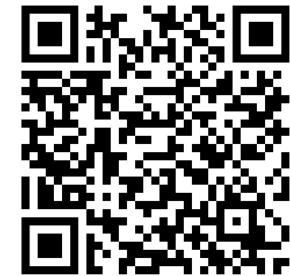


Why non-contrast?

REVIEW ARTICLE

Noncontrast MR Angiography: An Update

Robert R. Edelman, MD,^{1,2*}  and Ioannis Koktzoglou, PhD^{1,3}



Why non-contrast MRA?

no risk of NSF or gadolinium retention

reduce risk of mistiming

no background contamination

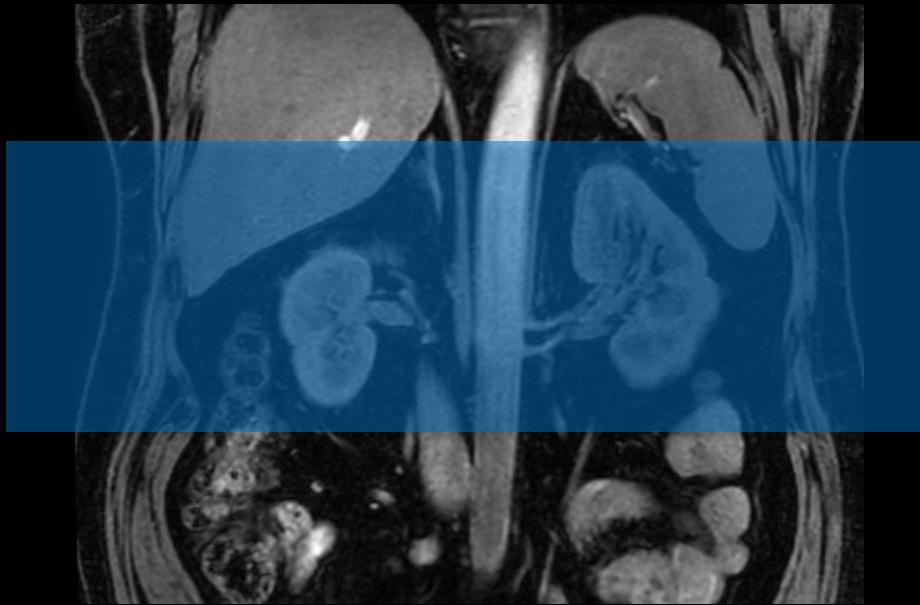
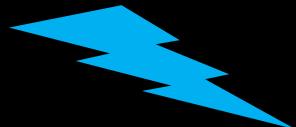
shorter patient preparation

avoid added costs of GBCA administration



Time-of-flight MRA

repeated RF
pulses



tissue within slab
becomes
saturated

tissue outside
slab remains fully
magnetized



Time-of-flight MRA

CTA

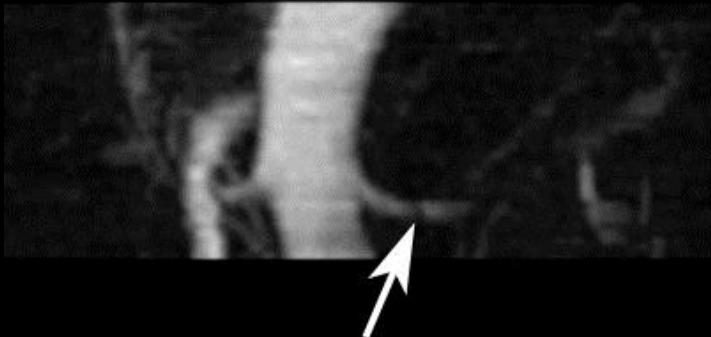


A

TOF MRA



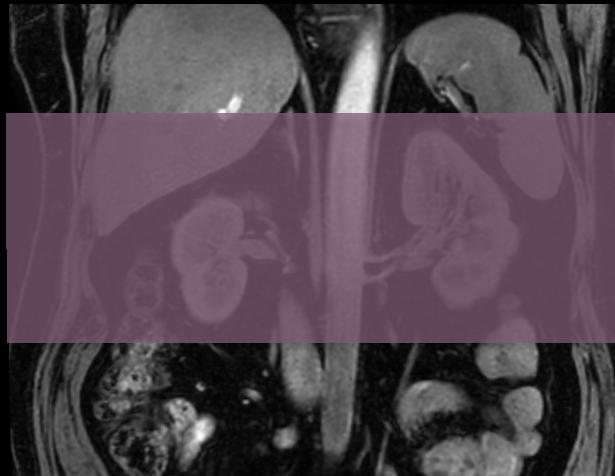
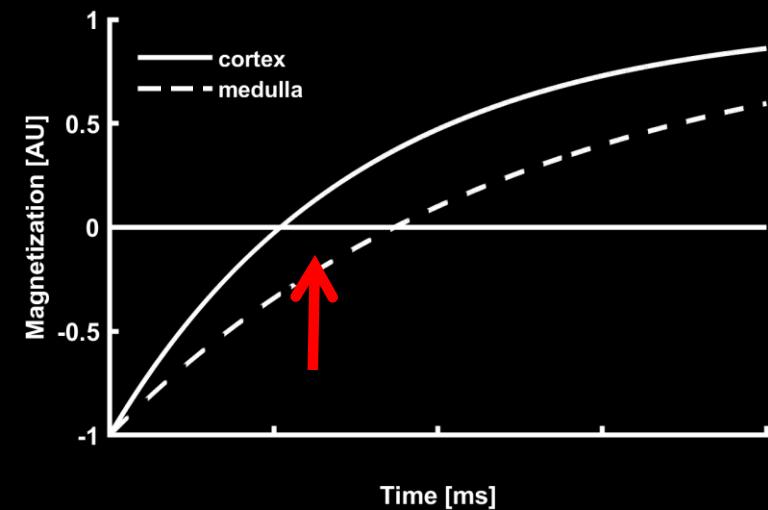
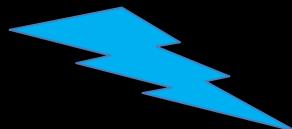
B



Images: Fabrega-Foster KE et al. J Magn Reson Imaging. 2018 Feb;47(2):572-581.

Inflow dependent inversion recovery

180° inversion pulse



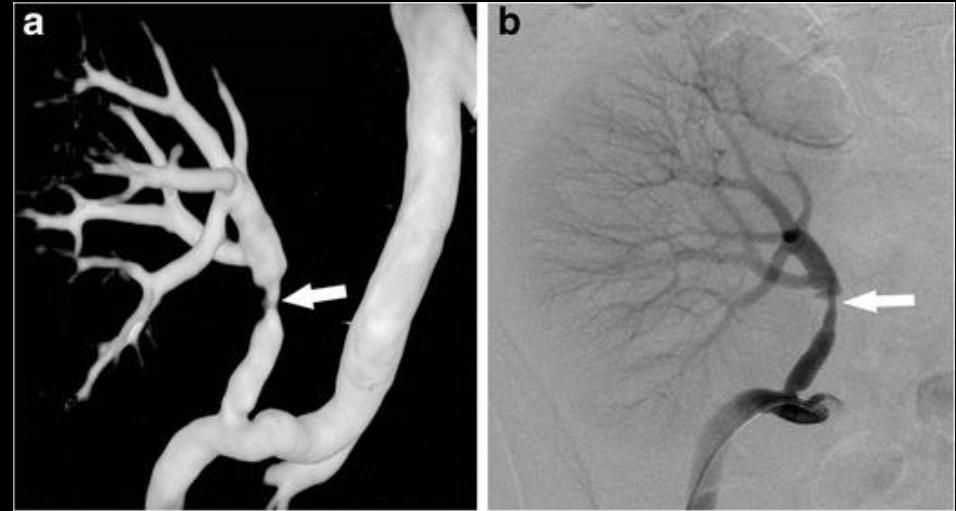
invert
magnetization
within slab

tissue outside slab
remains fully
magnetized

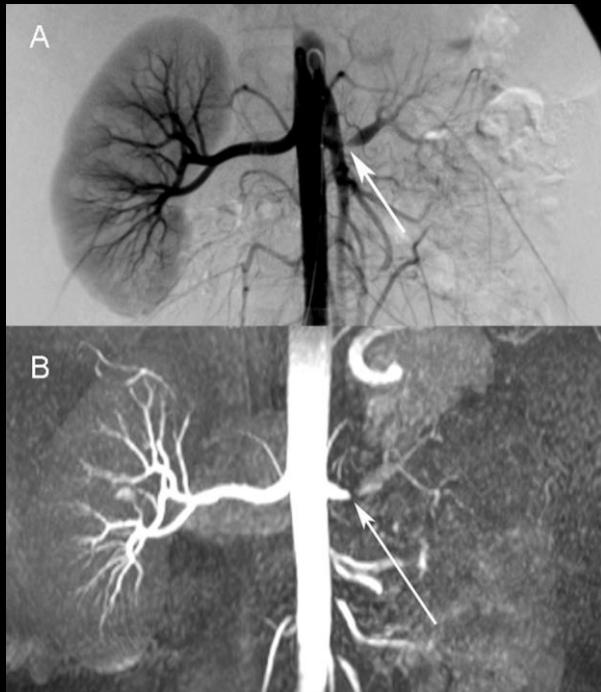


Inflow dependent inversion recovery

Zhang LJ et al. Eur Radiol.
2018 Oct;28(10):4195-4204.



Inflow dependent inversion recovery

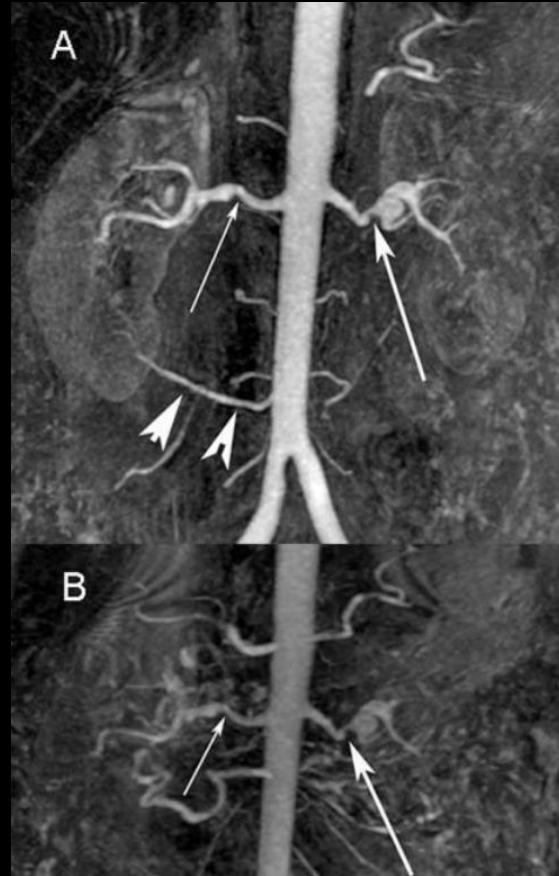


DSA

IFDIR

CE MRA

IFDIR



Images: Sebastià C et al. Eur J Radiol Open. 2016 Aug 4;3:200-6.

Inflow dependent inversion recovery

compared to DSA
sensitivity 93-100%*
specificity 86-94%*

less accurate in fibromuscular dysplasia†

References: *: Coenegrachts KL et al. Radiology. 2004 Apr;231(1):237-42.

*: Parienty I et al. Radiology 2011;259:592–601.

*: Liang KW et al. J Comput Assist Tomogr. 2017 Jul/Aug;41(4):619-627.

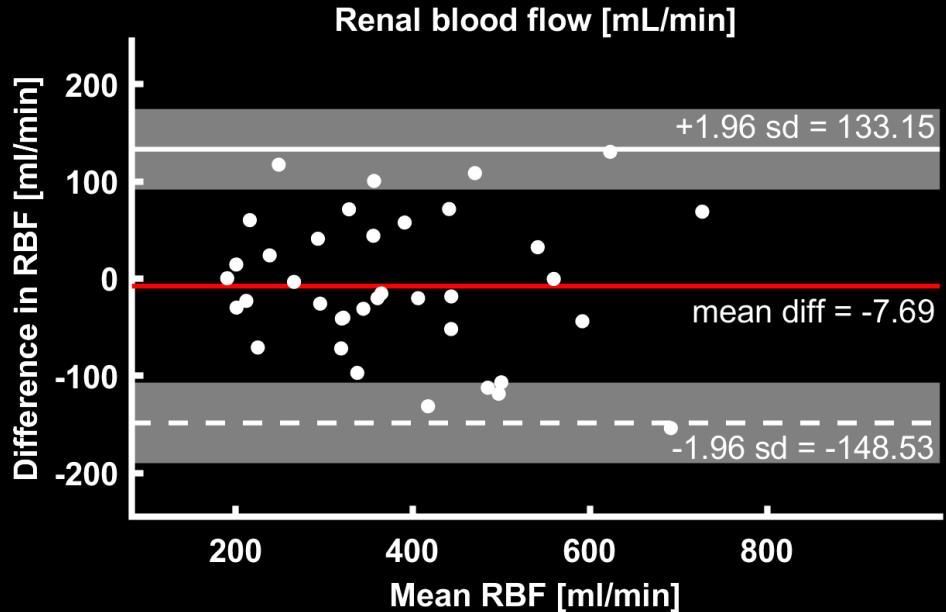
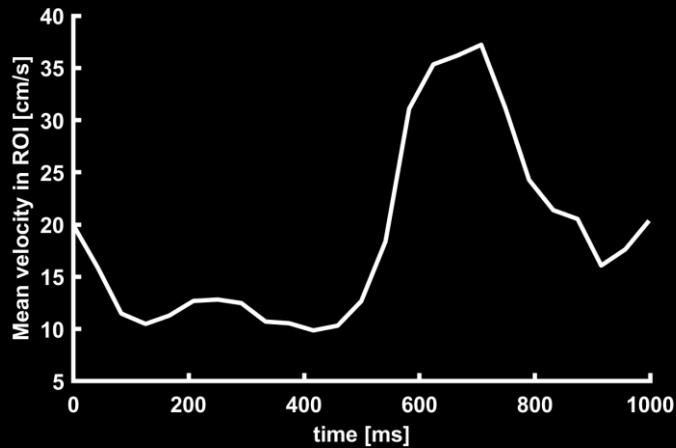
*: Zhang LJ et al. Eur Radiol. 2018 Oct;28(10):4195-4204.

†: Sebastià C et al. Eur J Radiol Open. 2016 Aug 4;3:200-6.



2D phase contrast

Coefficient of variation 13%



References: Unpublished data, de Boer et al.



4D flow MRI

ORIGINAL RESEARCH

Four-Dimensional Phase-Contrast Vastly Undersampled Isotropic Projection Reconstruction (4D PC-VIPR) MR Evaluation of the Renal Arteries in Transplant Recipients: Preliminary Results



Daisuke Motoyama, MD,¹ Yasuo Ishii, MD, PhD,² Yasuo Takehara, MD, DMSc,^{3*}

Masataka Sugiyama, MD,⁴ Wang Yang, MD,⁴ Hatsuko Nasu, MD, PhD,⁴

Takasuke Ushio, MD,⁴ Yuko Hirose, MD,⁴ Naoki Ohishi, RT,⁵

Tetsuya Wakayama, PhD,⁶ Hiroyuki Kabasawa, BS,⁷ Kevin Johnson, PhD,⁷

Oliver Wieben, PhD,⁷ Harumi Sakahara, MD, PhD,⁴ and Seiichiro Ozono, MD, PhD¹



4D flow MRI

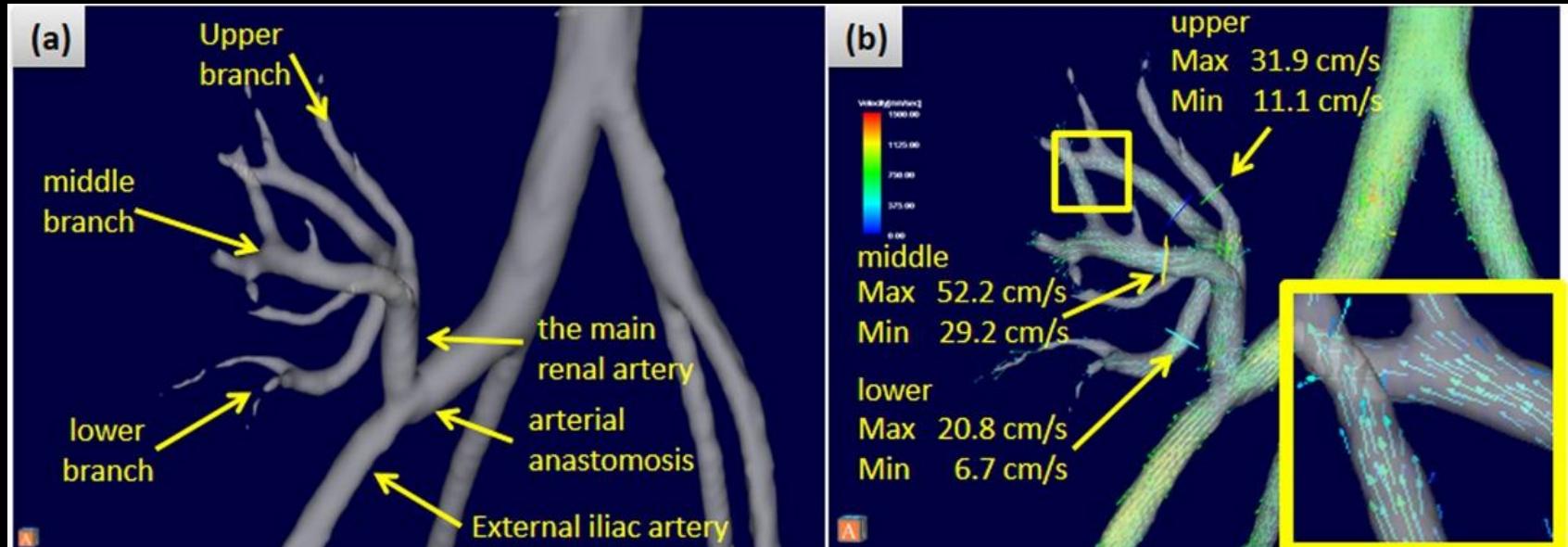


Image: Motoyama D et al. J Magn Reson Imaging. 2017 Aug;46(2):595-603.



Conclusion

contrast free MRA can provide the same information as contrast-enhanced alternatives

exciting new techniques offer improved anatomical but also functional evaluation of renal artery pathologies



Acknowledgments

Tim Leiner, Peter Blankestijn
Hans Hoogduin, Jaap Joles,
Marianne Verhaar
And all colleagues of the 7T group

