

Apport et intérêt de l'élastrographie dans l'étude des cardiopathies congénitales Interest of elastography in CHD

Olivier Villemain

Necker-Enfants Malades, Paris, France

Congrès FCPC, Lille, 2018





Apport et intérêt de l'élastrographie dans l'étude des cardiopathies congénitales Interest of elastography in CHD

Olivier Villemain

Necker-Enfants Malades, Paris, France

Congrès FCPC, Lille, 2018





élastographie



Apport et intérêt de l'élastrographie dans l'étude des cardiopathies congénitales Interest of elastography in CHD

Olivier Villemain

Necker-Enfants Malades, Paris, France

Congrès FCPC, Lille, 2018





Use of ultrasound in medicine

1938: First ultrasound medical exploration (Dr Dussik, psychiatrist)

1952: Using the Doppler effect (Howry, Wild et Reid; USA)

1967: First medical images performed by an ultrasound system

1970-80: Mechanical sweeping with motorized movement of a ultrasound probe → first imagery of a moving tissue

1980-90: Improved digital memory→ real-time multilocalization

1990-2000: Hardware optimization, miniaturization, appearance of matrix array probes...

1999: 1st GPU accessible to the public (Nvidia GeForce FX)

1971: 1st

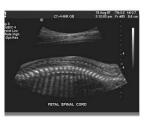
microprocessor

2000-2010: Technological opportunity (GPU) to process more information in a short time. Appearance of the very high frame rate in real time









1980

1990

1995

2010



Use of ultrasound in medicine

1938: First ultrasound medical exploration (Dr Dussik, psychiatrist)

1952: Using the Doppler effect (Howry, Wild et Reid; USA)

1967: First medical images performed by an ultrasound system

1970-80: Mechanical sweeping with motorized movement of a ultrasound probe → first imagery of a moving tissue

1980-90: Improved digital memory→ real-time multilocalization

1990-2000: Hardware optimization, miniaturization, appearance of matrix array probes...

1999: 1st GPU accessible to the public (Nvidia GeForce FX)

1971: 1st

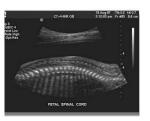
microprocessor

2000-2010: Technological opportunity (GPU) to process more information in a short time. Appearance of the very high frame rate in real time









1980 1990

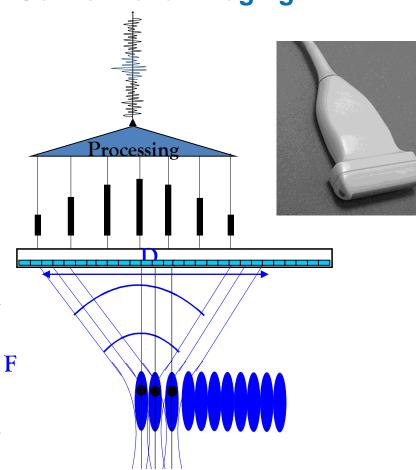
1995

2010

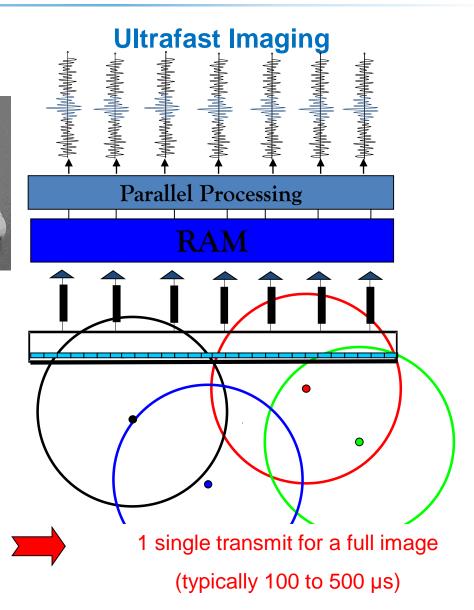


Ultrafast Imaging

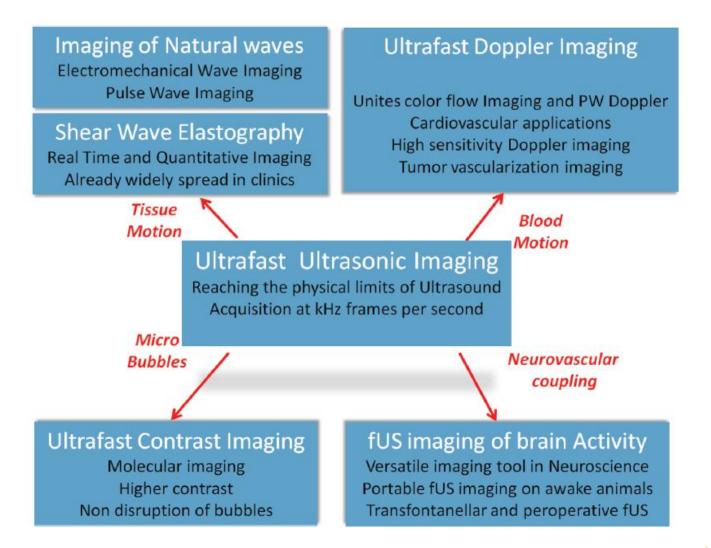
Conventional Imaging



128 to 512 transmits for a full image (typically 10 to 50 ms)

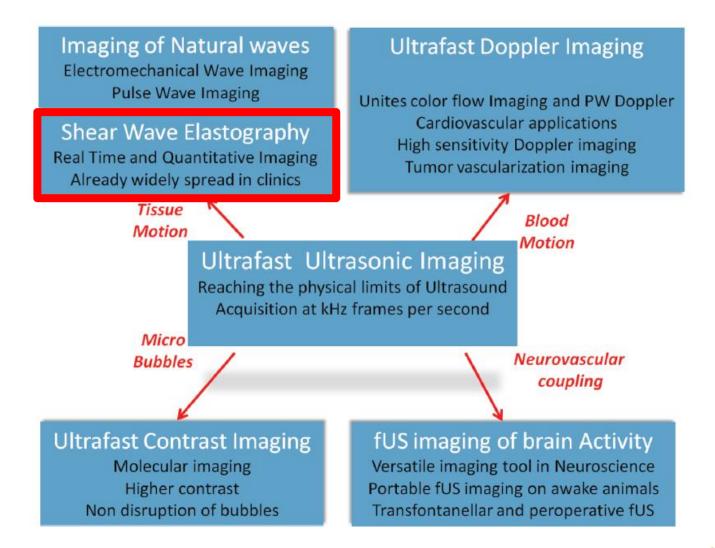


















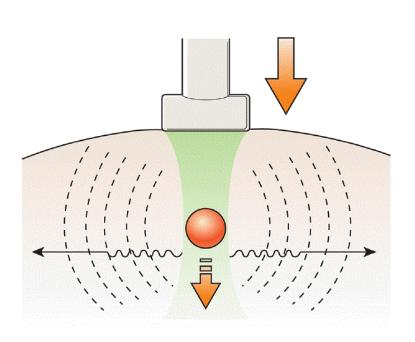


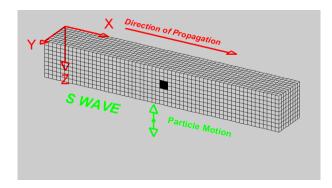


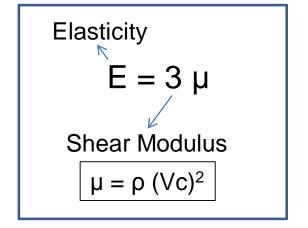


Elastography

Elastography: medical imaging technique (ultrasound or MRI) to measure the elasticity of biological tissue in an organ







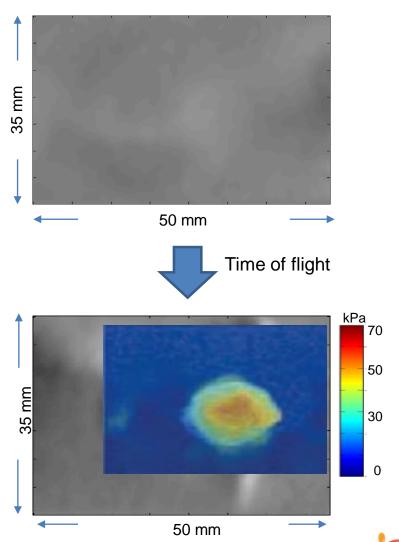




Some µm displacements

« Shear wave imaging »

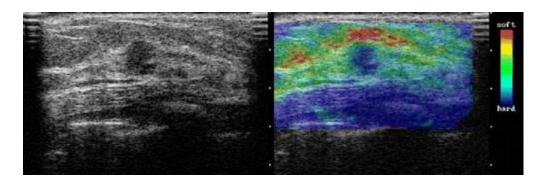
- Operator free
 - Real time
 - Freehand
 - Quantitative





Elastography Applications

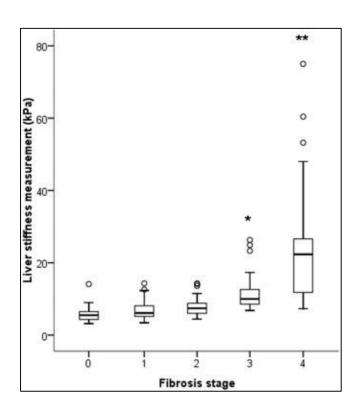
Breast



Prostate



Liver

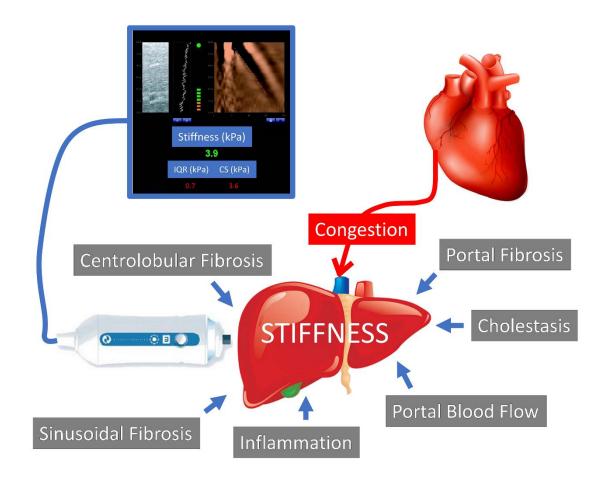


- Evans et Al., Radiology, 2012
- Wong et al, Hepatology, 2009
- Correas et al., Diagnostic and Interventional Imaging, 2013





Elastography & Cardiology







Elastography & Cardiology

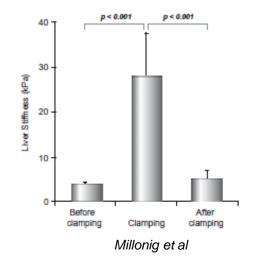
Is there a link between liver stiffness & right heart preload (= central venous pressure)?

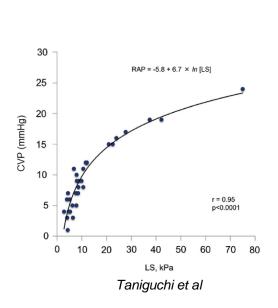
→ only few, recent (but very interesting) papers...

Millonig et al.1

Taniguchi et al.²

Jalal et al.3







¹ Journ of Hepatology. 2010

² Am Journ Cardiology. 2014

³ Heart. 2015



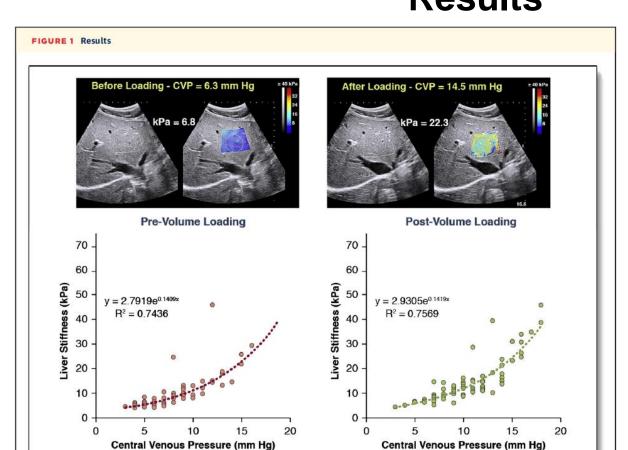
Institut Langevin Clinical study – Liver stiffness

OBJECTIVE: Evaluation of the variation impact of central venous pressure (CVP) on liver stiffness (LS) in real time by shear wave elastography (SWE) in a cohort of children with heart disease.





Liver stiffness & CVP Results

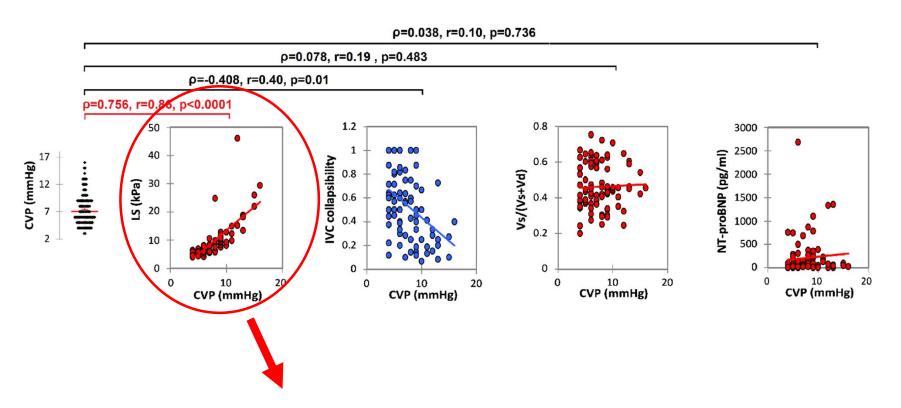


Correlation between liver stiffness and central venous pressure (CVP), pre- and post-volume loading, with an example of evaluation of liver stiffness by shear wave elastography (kPa).





Liver stiffness & CVP Results



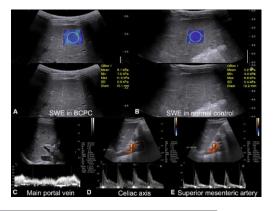
Liver Stiffness > classical clinical parameters



Institut Langevin ONDES ET IMAGES

Liver stiffness & CVP

Next?



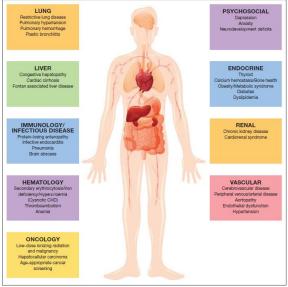


Figure 1. Noncardiac complications in adults with congenital heart disease (CHD).

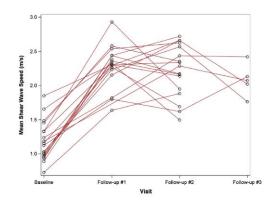


Table 1. Types of Heart Disease That May Be Associated With Liver Disease

Right-sided heart disease
Fontan physiology
TOF with residual pulmonary regurgitation
Complete transposition of the great arteries after atrial switch surgery
Pulmonary valve disease
Ebstein anomaly and other tricuspid valve disease
Eisenmenger syndrome
Pulmonary hypertension
Pericardial disease
Left-sided heart disease
Left ventricular outflow obstruction
Mitral valve disease
Ischemic and nonischemic cardiomyopathy
Cor triatriatum

TOF indicates tetralogy of Fallot.

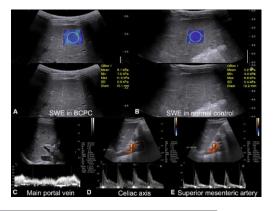
Di Paola et al. *Eur Radiol.* 2017 Kutty et al. *JTCVS*. 2016 Burchill et al. *Circ Res*. 2017 Lui et al. *Circulation*. 2017 Mebus et al. *Int J Cardiol*. 2017



Institut Langevin ONDES ET IMAGES

Liver stiffness & CVP

Next?



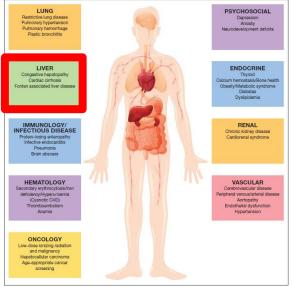


Figure 1. Noncardiac complications in adults with congenital heart disease (CHD).

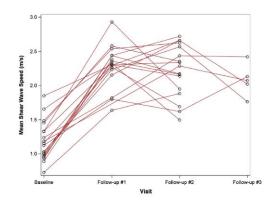


Table 1. Types of Heart Disease That May Be Associated With Liver Disease

Right-sided heart disease
Fontan physiology
TOF with residual pulmonary regurgitation
Complete transposition of the great arteries after atrial switch surgery
Pulmonary valve disease
Ebstein anomaly and other tricuspid valve disease
Eisenmenger syndrome
Pulmonary hypertension
Pericardial disease
Left-sided heart disease
Left ventricular outflow obstruction
Mitral valve disease
Ischemic and nonischemic cardiomyopathy
Cor triatriatum

TOF indicates tetralogy of Fallot.

Di Paola et al. *Eur Radiol.* 2017 Kutty et al. *JTCVS*. 2016 Burchill et al. *Circ Res*. 2017 Lui et al. *Circulation*. 2017 Mebus et al. *Int J Cardiol*. 2017

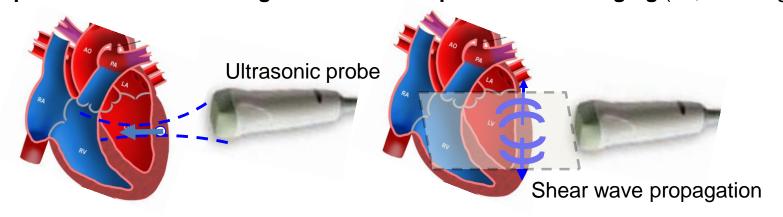


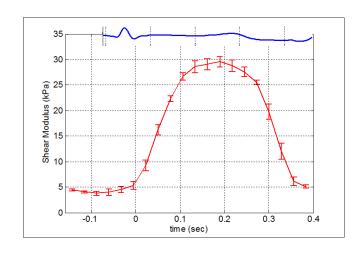


Myocardial Elastography

Step 1: Shear wave remote generation

Step 2: Ultrafast imaging (10,000 images/s)









Human studies objective

The goal of our human studies was to investigate the potential of Myocardial Elastography, to quantify noninvasively the passive diastolic myocardial stiffness in healthy populations (children and adults) and its variation vs. hypertrophic cardiomyopathy with heart failure with preserved ejection fraction (HCM-HFpEF) population.

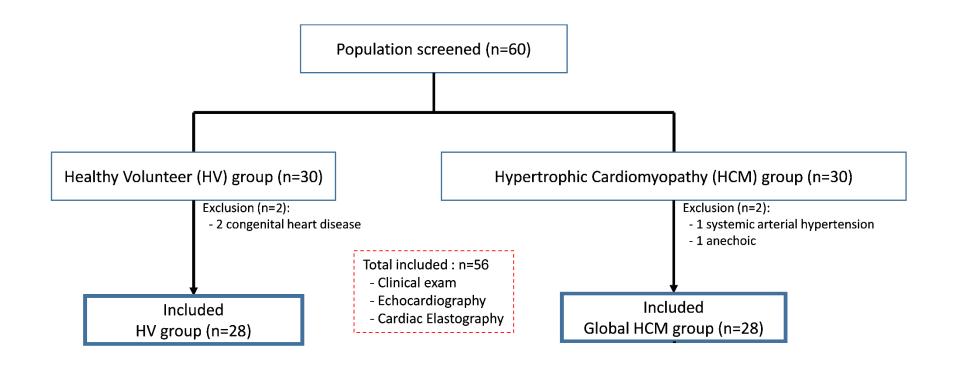
What is normal?

Could we make a difference between a normal and a pathologic case?





Pediatric Study



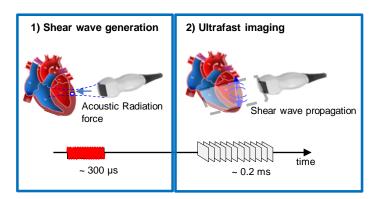
ClinicalTrial.gov: NCT02619825 (Non-Invasive Evaluation of Myocardial Stiffness by Elastography in Pediatric Cardiology)

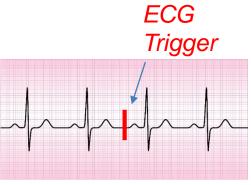


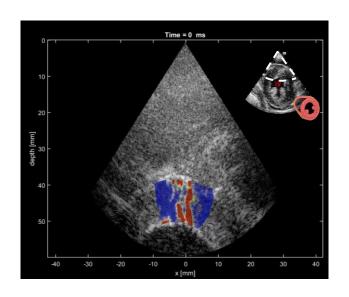


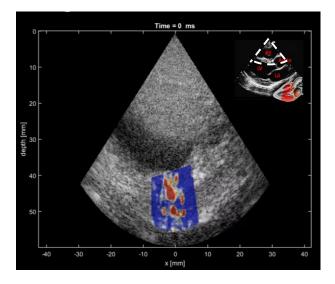
Institut Langevin

ONDES ET IMAGES





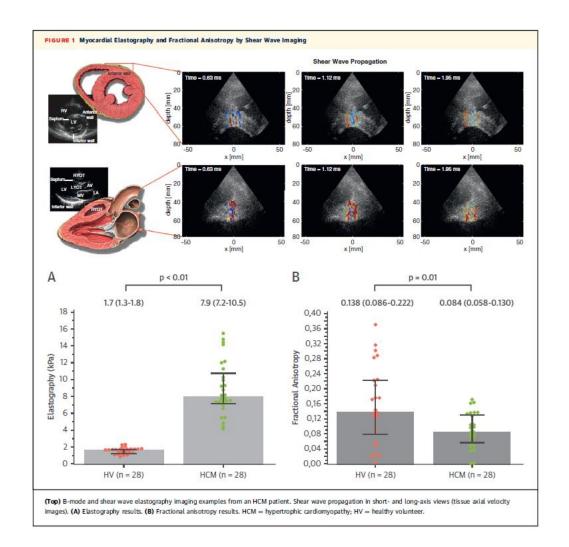








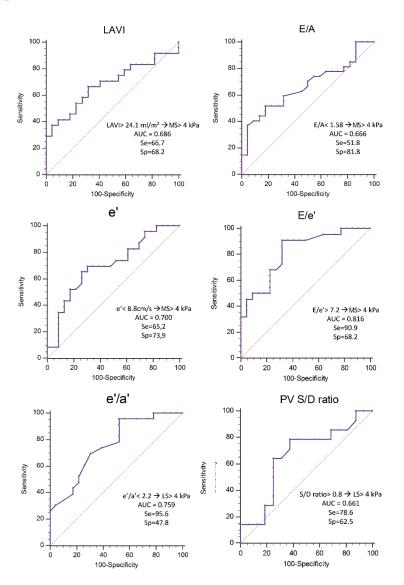
Results







SWI & Echocardiography



No unique echocardiographic parameter used to estimate the diastolic function of the left ventricle could predict MS up to 4 kPa with high specificity and sensitivity.

Characteristics of patients with MS > Cl95% (>10.5 kPa)

7/28 HCM patients had MS >10.5 kPa.

Among the seven HCM patients who had MS > CI95% (>10.5 kPa), six had an echocardiographic **restrictive profile** assessed by LAVI >48 ml/m², E/A >2, E-wave DT <150 ms, and e' medial <6 cm/s.



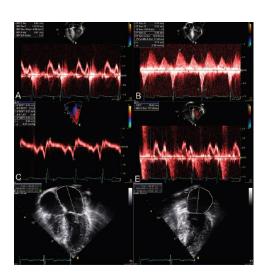


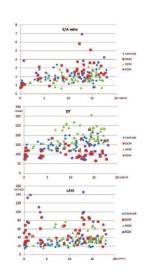


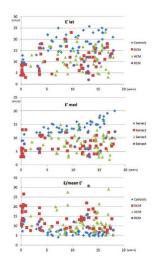


Interpretation of Left Ventricular Diastolic Dysfunction in Children With Cardiomyopathy by Echocardiography: Problems and Limitations Andreea Dragulescu, Luc Mertens and Mark K. Friedberg

Circ Cardiovasc Imaging. 2013;6:254-261; originally published online January 23, 2013;







Conclusions—Assessment of DD in childhood CM seems inadequate using current guidelines. The large range of normal pediatric reference values allows diagnosis of DD in only a small proportion of patients. Key echo parameters to assess DF are not sufficiently discriminatory in this population, and discrepancies between criteria within individuals prevent further classification and result in poor interobserver agreement. (Circ Cardiovasc Imaging. 2013;6:254-261.)





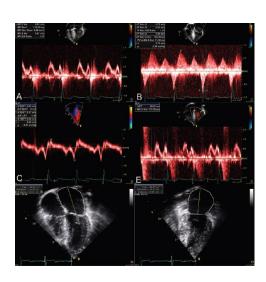


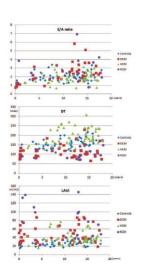


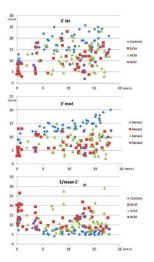
Interpretation of Left Ventricular Diastolic Dyefo, distribution With Cardiomyopathy by Echocardiograph Problems and Limitations

Andreea Dragulescu, Luc Mertens and Mana M. Ericiloris

Circ Cardiovasc Imaging. 2013;6:254-261; originally published online January 23, 2013;





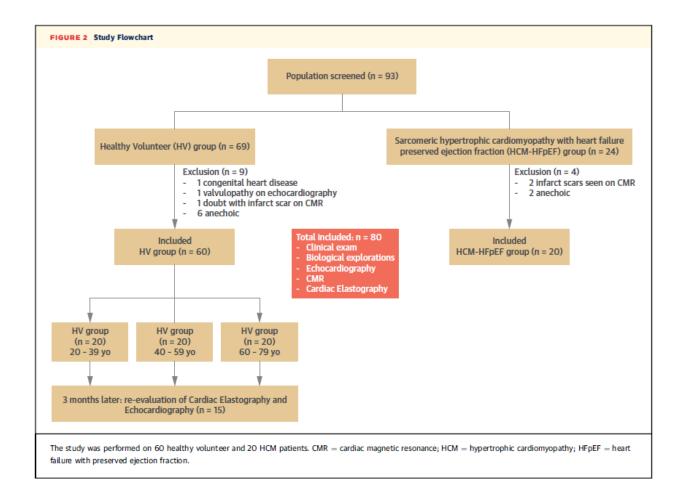


Conclusions—Assessment of DD in childhood CM seems inadequate using current guidelines. The large range of normal pediatric reference values allows diagnosis of DD in only a small proportion of patients. Key echo parameters to assess DF are not sufficiently discriminatory in this population, and discrepancies between criteria within individuals prevent further classification and result in poor interobserver agreement. (Circ Cardiovasc Imaging. 2013;6:254-261.)





Adult study

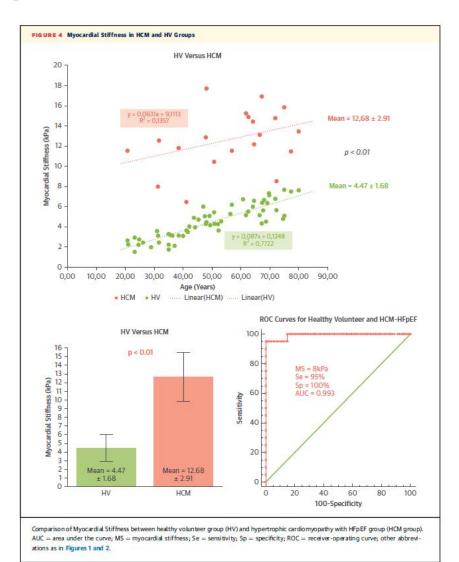


ClinicalTrial.gov Identifer: NCT02537041 (Non-Invasive Evaluation of Myocardial Stiffness by Elastography)





Results



Aging, with linear increase of myocardial stiffness depending on the age

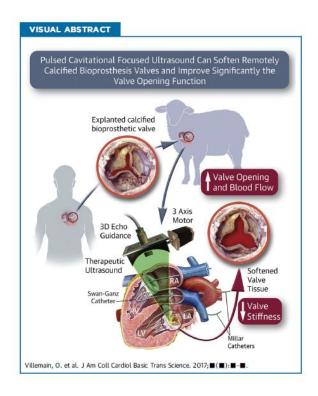
Significant difference between each age group

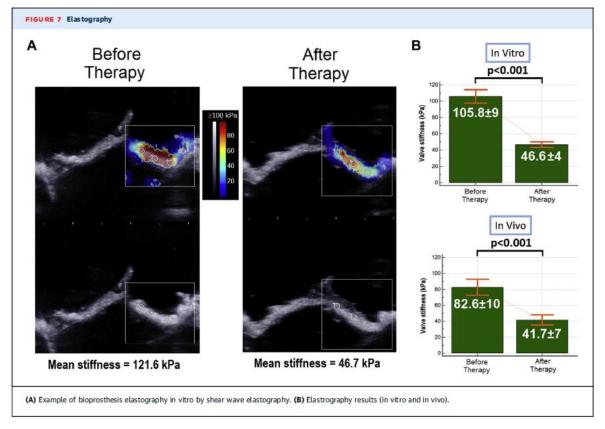
For the HCM-HFpEFgroup (mean MS=12.68±2.91 kPa), the MS was significantly higher than in the healthy volunteer (p<10⁻⁴), with a cutoff identified at 8 kPa (AUC=0.993, Se=95%, Sp=100%).





Valve & Elastography

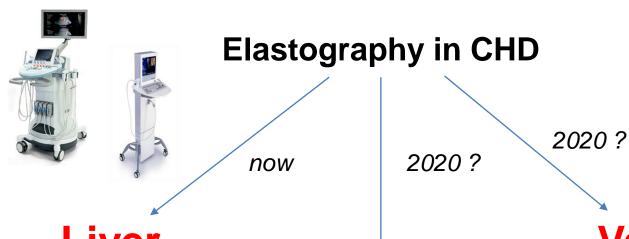




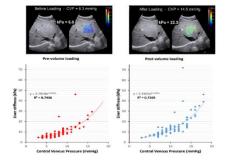




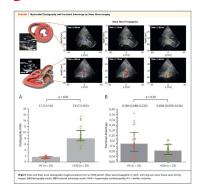
Conclusion



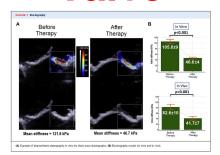
Liver



Myocardium



Valve





Thank you for your attention

