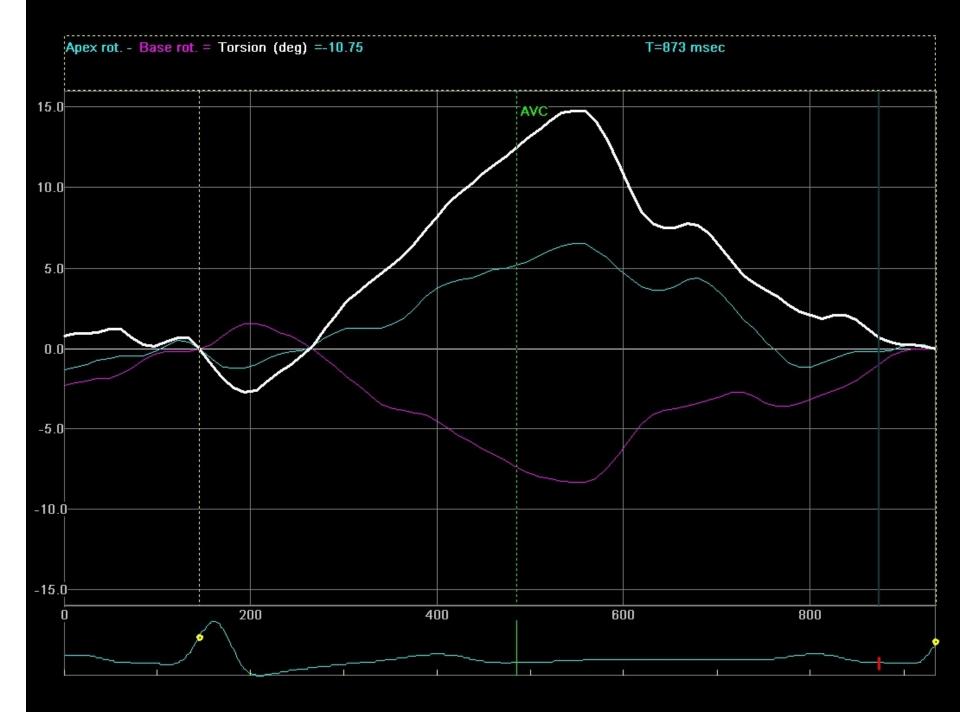
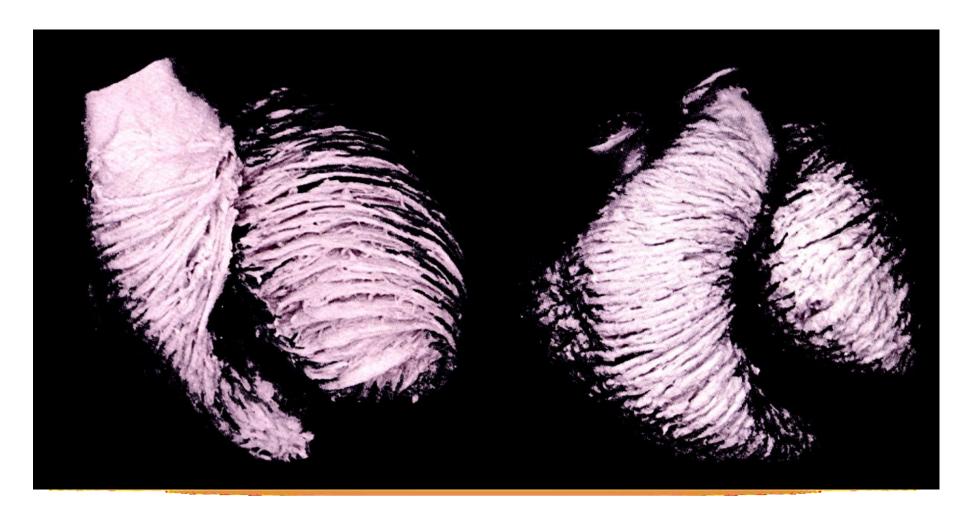


Left ventricular rotation (LVrot) at apical and basal levels during systole





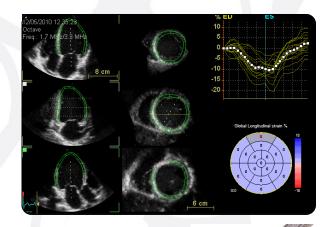
# 2D & 4D Quantification

#### **Quantification Outlook**





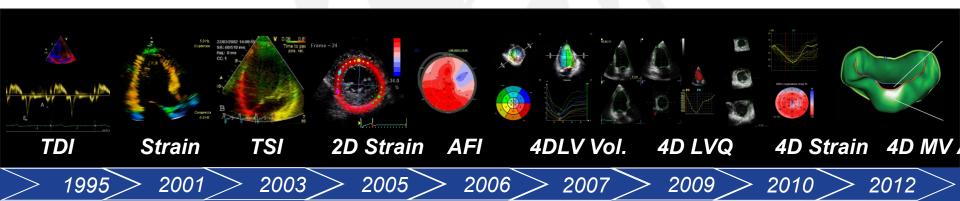
**Eye-balling** 



Quantification

Early quantitative detection is key!

Raw Data is enabler for development of quantitative tools.



### 2D AutoEF

#### **AutoEF**

#### Automatic EF Quantification

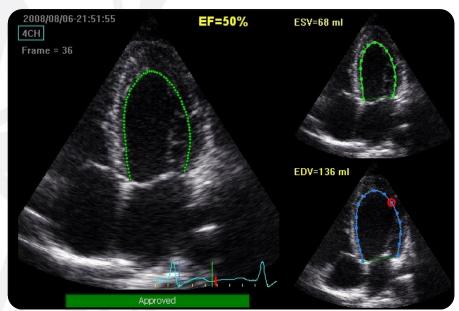
- Based on 2D Speckle tracking algorithm
- Easy to use
- Quick

#### **Potential Benefits:**

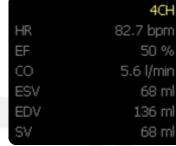
- Higher Reproducibility
- Lower Inter-observer variability

#### **Confidence in the AutoEF algorithm:**

- Based on (biplane) Simpson
- Has several inherent quality checks
- Is clinically used since > 3 years
- Last responsibility is on the user"



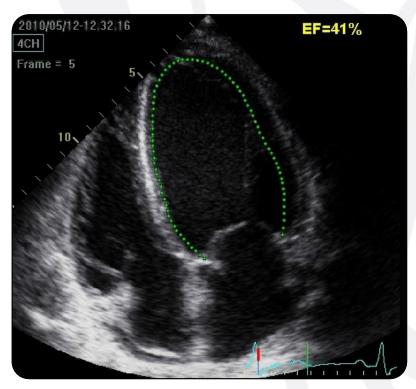
Volumes, EF Hemodynamic values CO, SV, HR



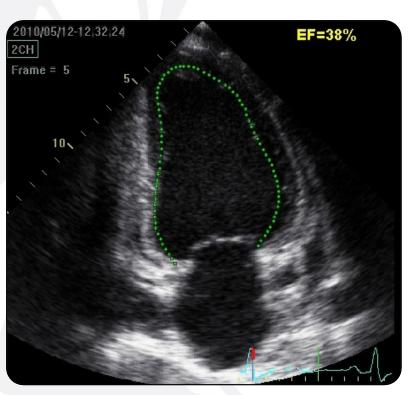


#### **AutoEF**

#### Automatic EF Quantification



DCM A4CH

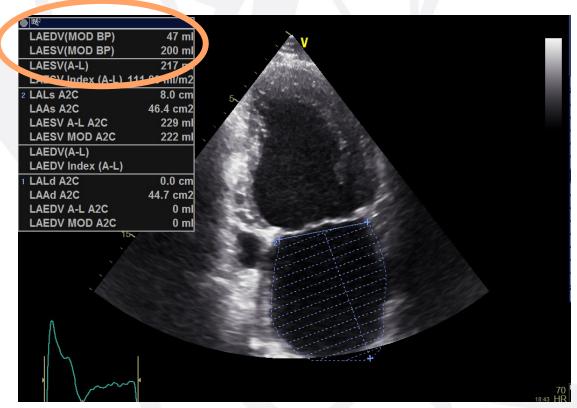


DCM A2CH



#### Left Atrial Volume quantification

Meeting increasing requests for more accurate LA volume quantification by supporting Biplane Simpson MOD forLA EDV and LA ESV



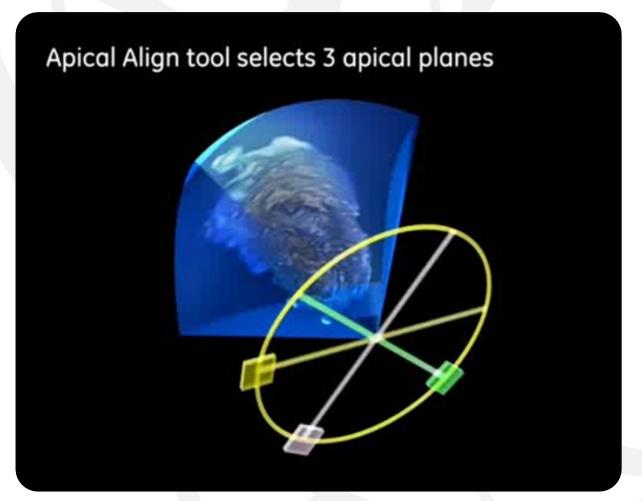
Note: Both ES and ED must be traced to obtain the biplane volumes.



# 4D Auto LVQ with Auto Alignment

#### **Apical Alignment**

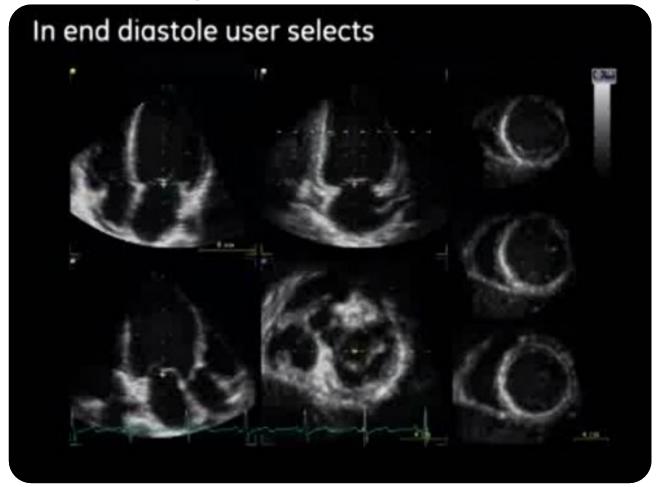
Ensure accuracy for 4D LVQ, 4D LV mass & 4D Strain





#### **4D Auto LVQ**

Mesh based surface tracking Pure 4D utilizes temporal data for EF





#### Sphericity Index (SpI)

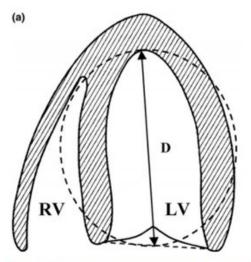
#### New measurement at ED

- Index for how dilated (round) the ventricle is
- Uses automatic diameter detection to make the measurement more reproducible (pat. pend.).
- Higher values are worse.

Early identification of left ventricular remodelling after myocardial infarction, assessed by transthoracic 3D echocardiography

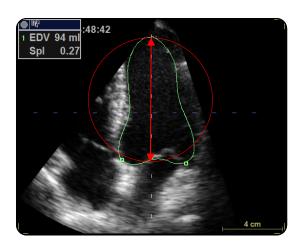
Herman F.J. Mannaerts\*, Johannes A. van der Heide, Otto Kamp, Martin G. Stoel, Jos Twisk, Cees A. Visser

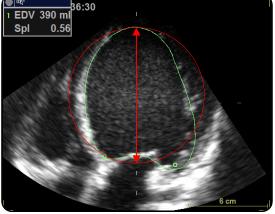
Department of Cardiology, VU University Medical Center, P.O. Box 7057, 1007 MB Amsterdam, The Netherlands



Cut off 0.25

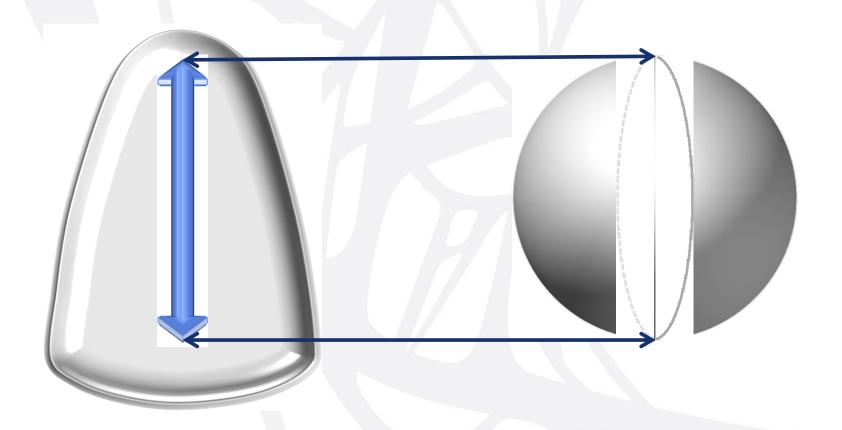






#### **Sphericity Index (SpI) Calculation**

Creating a sphere based on the LV length





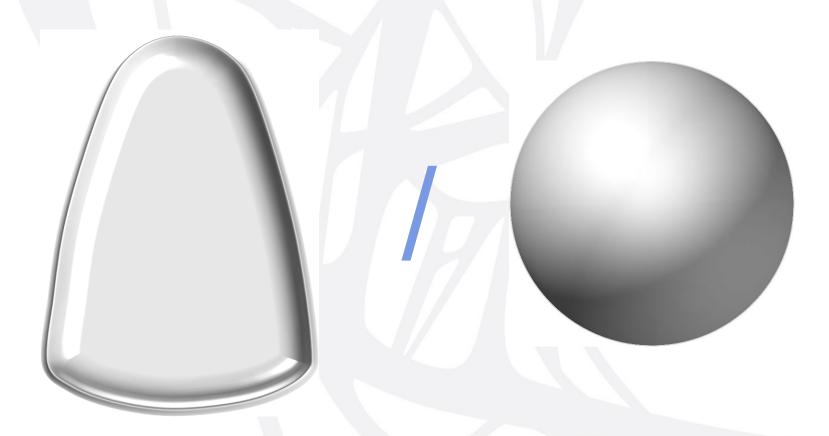




#### **Sphericity Index (SpI) Calculation**

LV end diastolic volume

Volume of the sphere



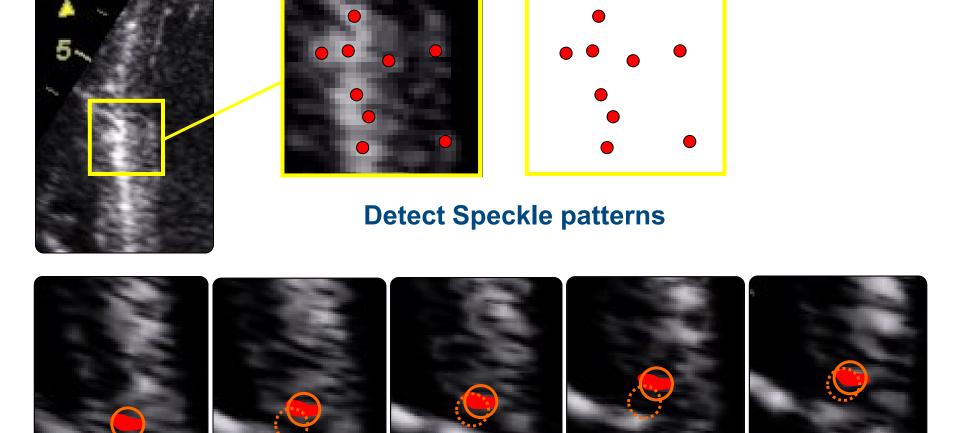
Volume of the LV derived from the 4D dataset in end- diastole

Calculating the volume of the sphere:

Volume =  $(4/3 * pi * (D/2)^3)$ HOMULE APRIL 2012

# AFI Automated Function Imaging Tri-Plane AFI

#### Principle of Speckle Tracking 2D Strain

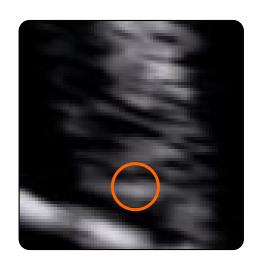


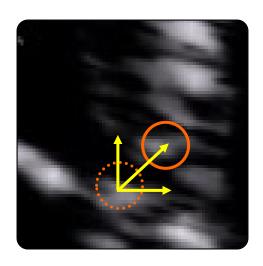
Detecting Speckle Pattern of consecutive 2D frames

Myocardial Motion Characterization by Natural Acoustic "Tagging"

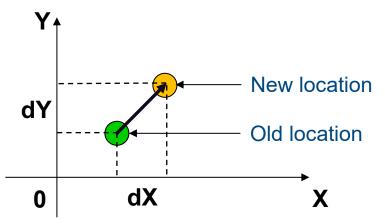
Frame 1

#### Principle of Speckle Tracking 2D Strain





at e.g. 50 Fps; Time from Frame 1 to 2 = 20ms For each "tracked" feature velocity data is calculated.



2D velocity vector: (Vx, Vy) = (dX, dY) / FrameTime

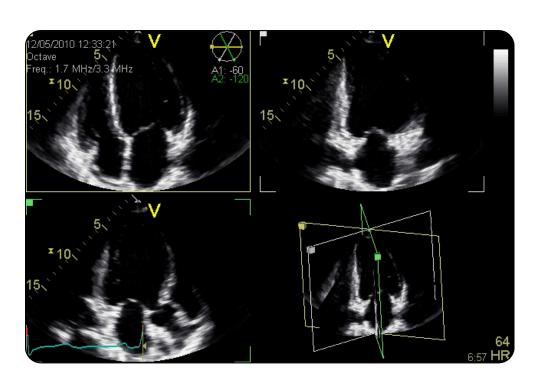
The local tissue velocity is estimated as a shift of correspondent feature divided by time between successive frames

#### AFI – Automated Function Imaging

To Detect Peak Systolic Longitudinal Strain on Tri-Plane Imaging

AFI is giving information about the global LV function and indicating regional contraction differences.

To Detect Peak Systolic Longitudinal Strain based on 2D Strain Data





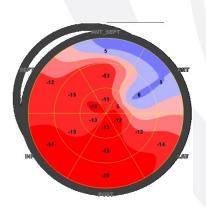


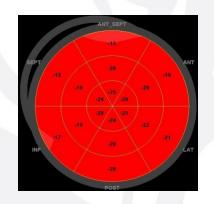


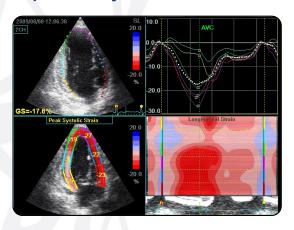
#### **AFI – Automated Function Imaging**

#### Now available on Tri-Plane Imaging

Bulls-Eye View for regional longitudinal peak systolic Strain







Values for global longitudinal peak Systolic Strain

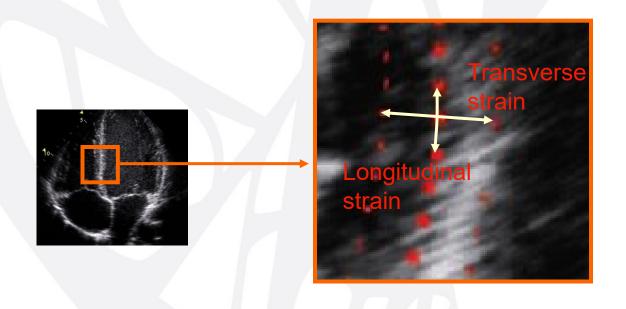
```
GLPSS_LAX -11.9 %
GLPSS_A4C -12.0 %
GLPSS_A2C -11.0 %
GLPSS_Avg -11.6 %
```

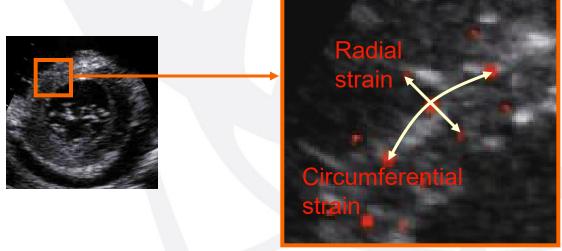


- 4D Strain is based on speckle tracking
- Deformation from 4D Data sets
- Automated ROI, Dynamic Bulls Eyes, Traces, parameters
- Tracks all points from endocardium to epicardium
- Display of APLAX, A4CH, A2CH, 3 SAX's
- Quality Check
- Ability to accept and reject segments
- Integrated with LV Mass



#### **Deformation Vectors in 2D Strain**

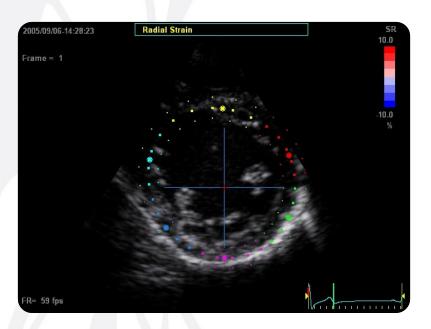




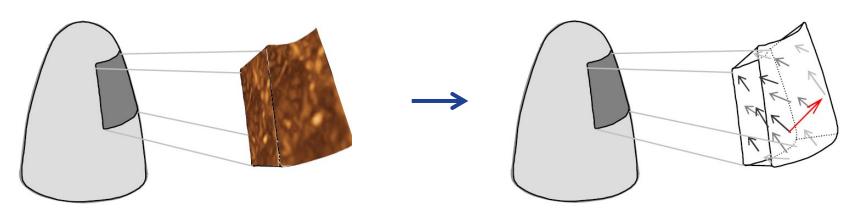


## 2D Strain Cutplane in a moving ventricle



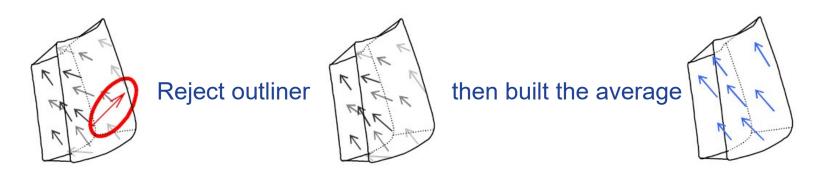






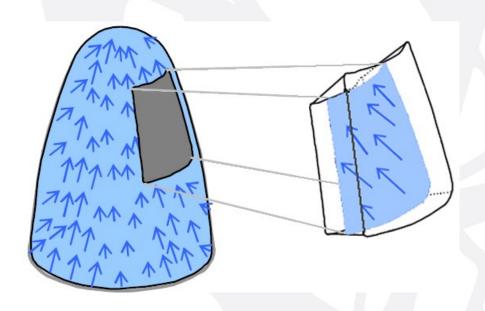
#### The Tracking

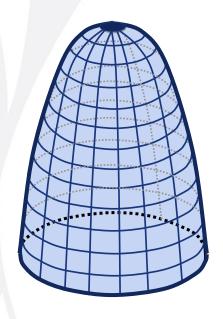
The system detects all speckles inside the myocardium and tracks them frame-by-frame. In this way the movement over time of all speckles is known. According to the movement the vector of each speckle can be calculated.



#### **Smart averaging**

To get more robustness into the analysis, the system reject the outliner from the dataset and averages the data in a smart way.



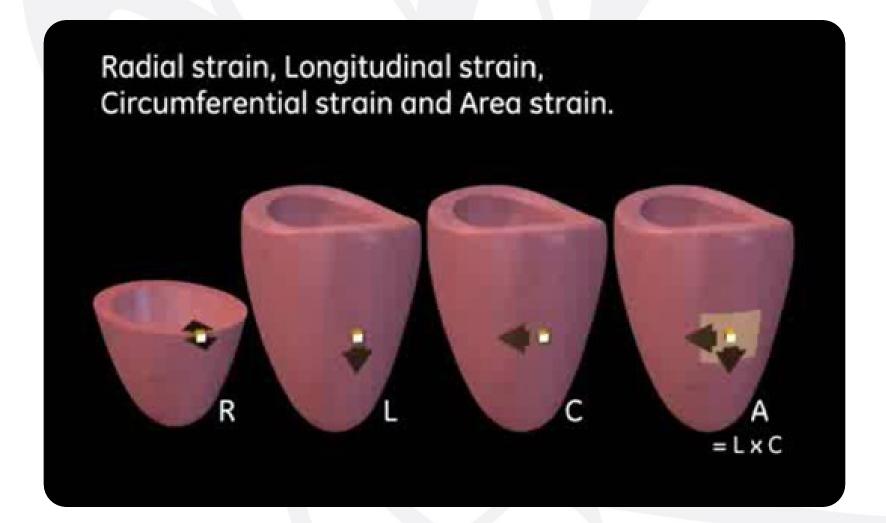


#### Mesh model

The values will be averaged onto a mesh model to "display" the myocardial motion.

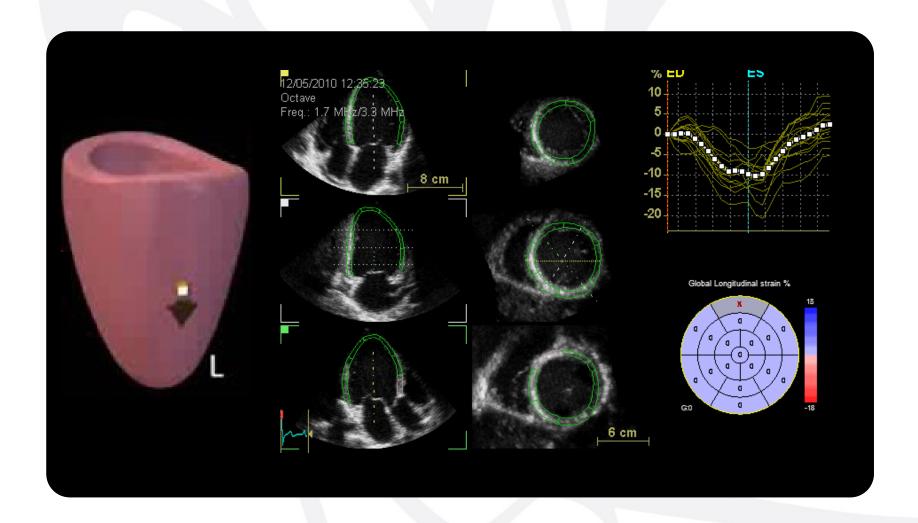
This mesh model will be placed in the mid myocardium of the 4D dataset.





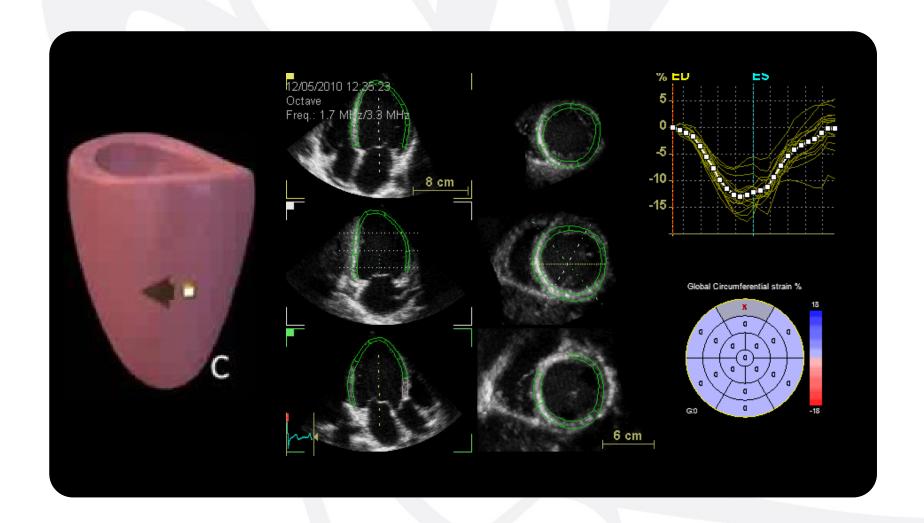


#### **4D Longitudinal Strain**



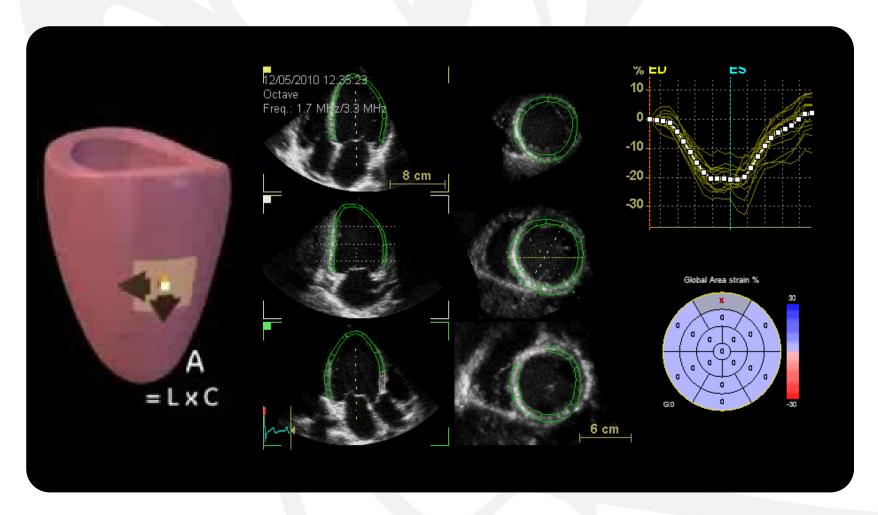


#### **4D Circumferential Strain**





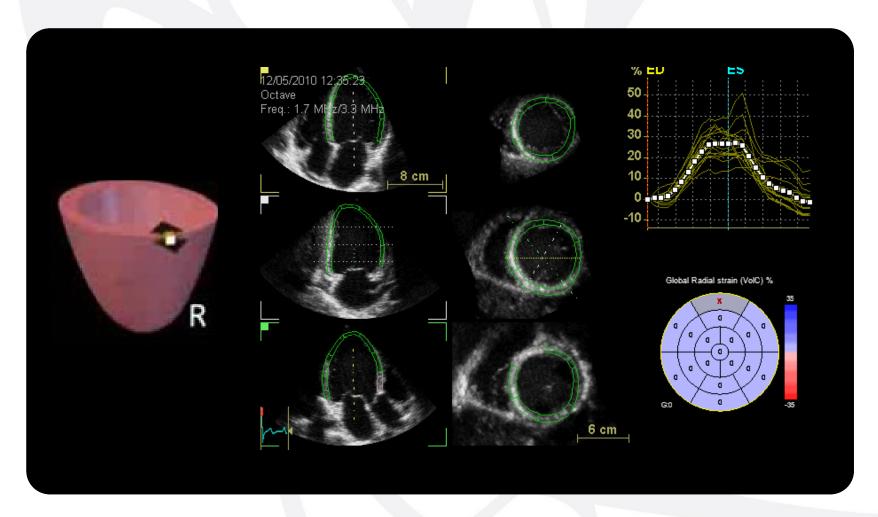
#### **4D Area Strain**



Area strain shows % of change of an area from a mid-myocardial layer. It reflects a combination of longitudinal and circumferential strain.



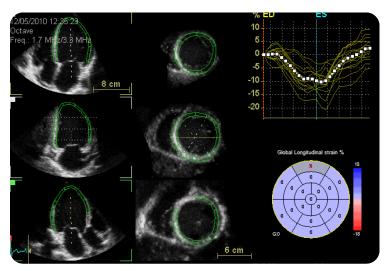
#### **4D Radial Strain**



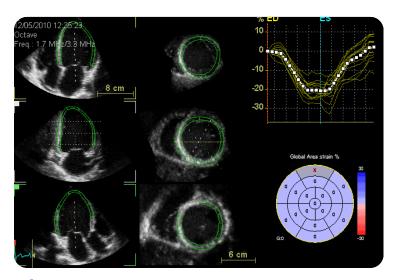
4D Radial Strain is estimated from the area strain using an assumption of volume conservation. The parameter is therefore called "Radial Strain".



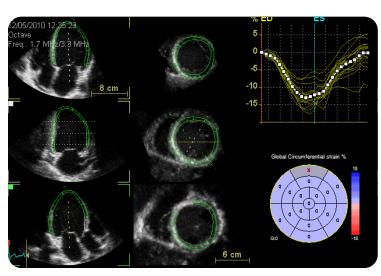
#### **4D Strain Results**



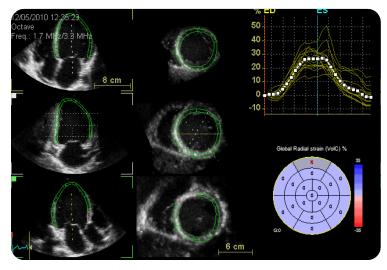
Longitudinal



Area

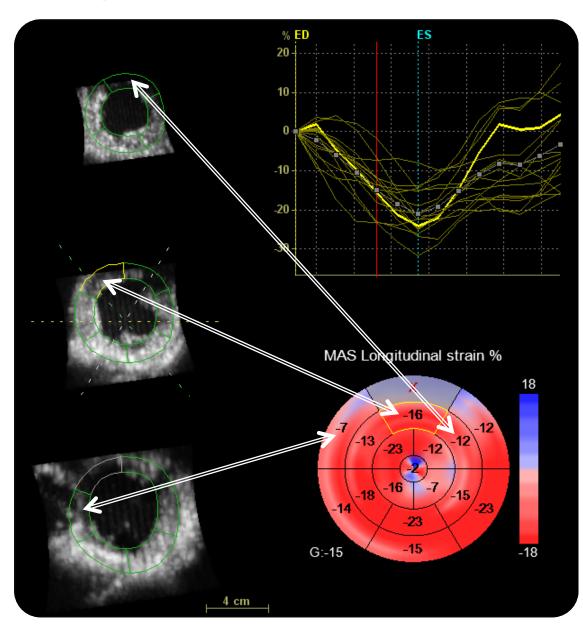


Circumferential



Radial

#### **4D Strain Results**

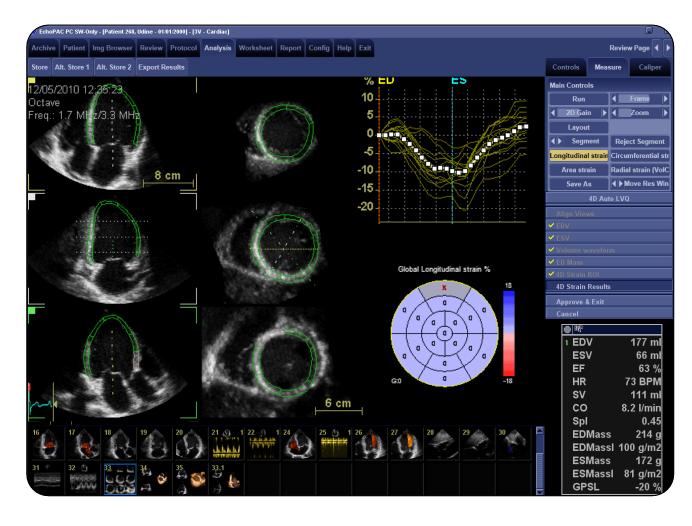


Outer ring of BE correlates with basal SAX view

Middle ring of BE correlates with middle SAX view

Inner ring of BE correlates with apical SAX view

#### **4D Strain Results**



You have the ability to accept or reject any segments manually.

Only accepted segments will contribute to GSPL

Global strain value in results box GPSL= Global Peak Strain Longitudinal