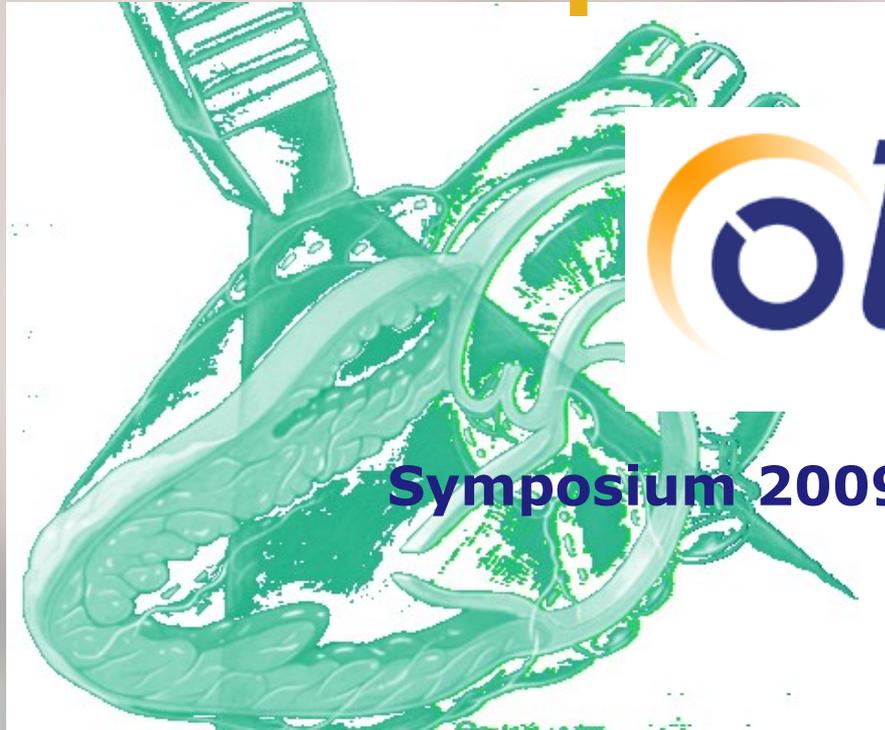


New modalities in clinical cardiac imaging

Speckle Tracking



Symposium 2009 Hartcentrum OLVG



L. Spallanzani (1729 – 1799)

Demonstrates in 1793 the use of echo-reflection by bats

The *supersonic* reflectoscope

FIG. 4. Type A sweeping and timing system. This is the pattern which appears on the screen when the crystal is not being energized. It consists essentially of a time scale which is formed by the green spot of the oscilloscope traveling along the zigzag path *A, B, C, D, etc.* Each microsecond the spot is deflected slightly upward so as to notch the line and thereby form a timing scale. Every eighth notch is made higher in order to assist in counting. There are eight of these higher marks per zigzag so that it requires 64 microseconds to traverse one zigzag.

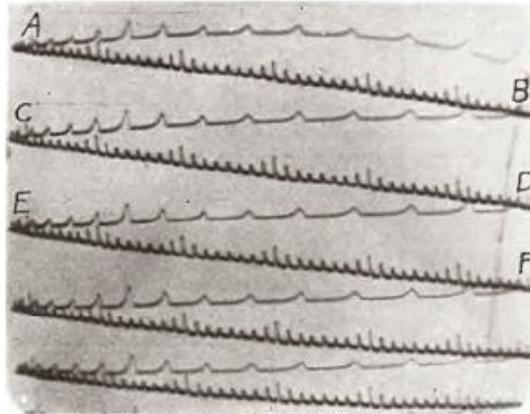


FIG. 2a. Type A supersonic reflectoscope.



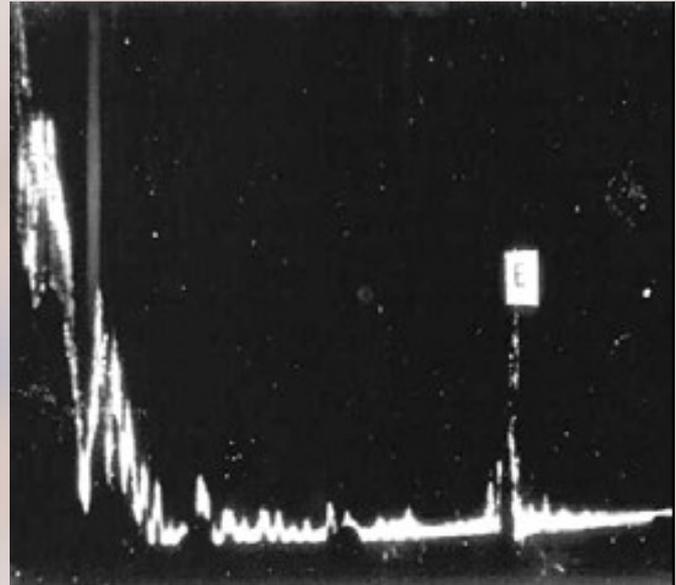
Malmö, May 1953

Kockum's Shipbuilding Cie

Malmö, May 1953

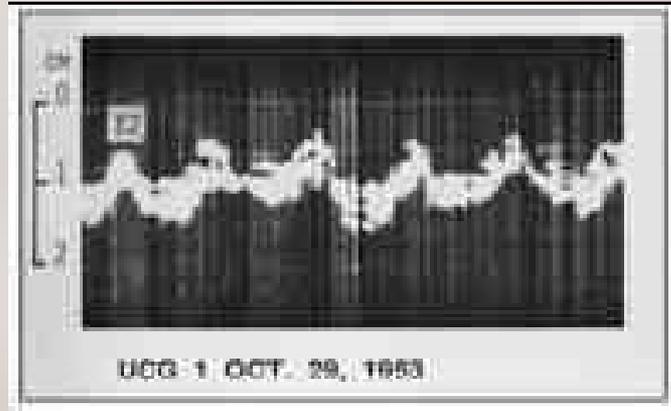


C.H. Hertz (1920– 1990)

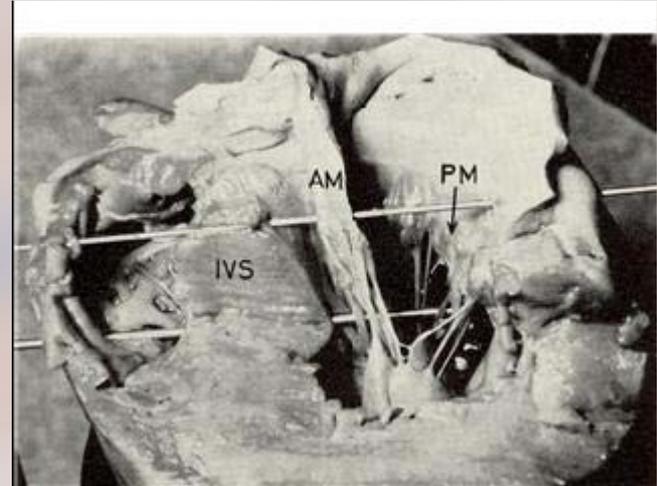


First steps in cardiac evaluation

First M-mode cardiogram



Structure identification



I. Edler, H. Hertz

Dynamic two-dimensional echocardiography (1971)



New modalities

- ▶ 2D Strain imaging
 - Speckle tracking

- ▶ 3D echocardiography
 - 3D EF
 - Valve pathology
 - 3D TEE



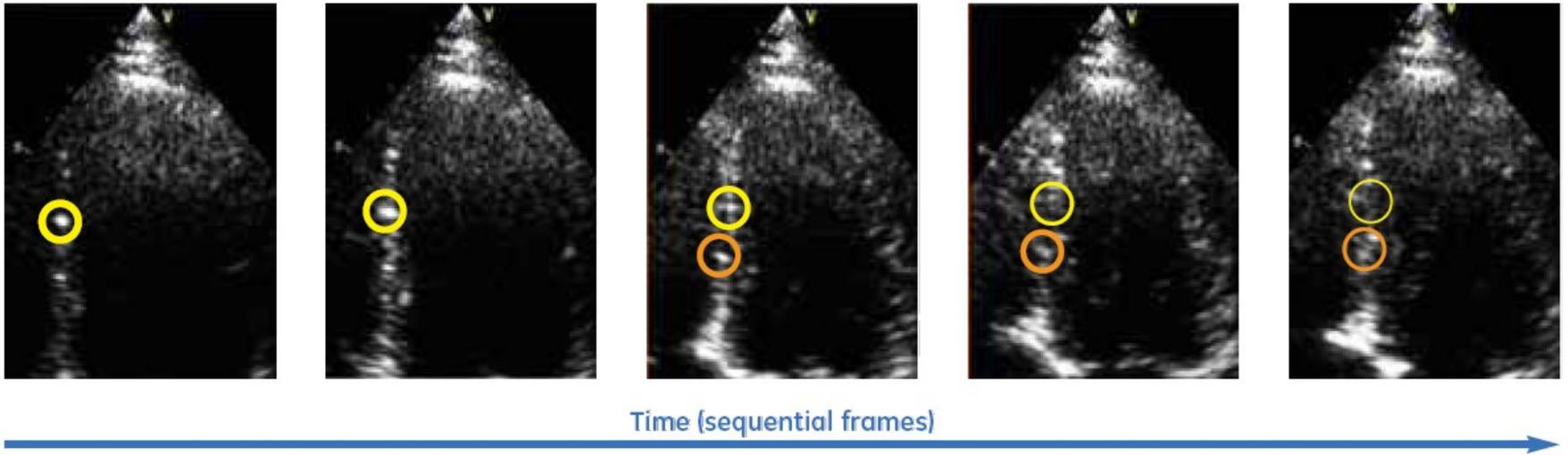
Constellations



Speckle Tracking

2D strain
Non-doppler strain
Tissue deformation

“natural acoustic tagging”
Speckle tracking pattern recognition algorithm



Peter Lysyansky and Zvi Friedman

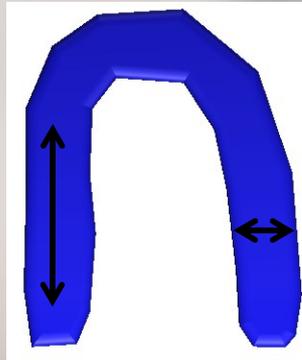
2D Strain

$$\varepsilon = \frac{L - L_0}{L_0} = \frac{\Delta L}{L_0}$$

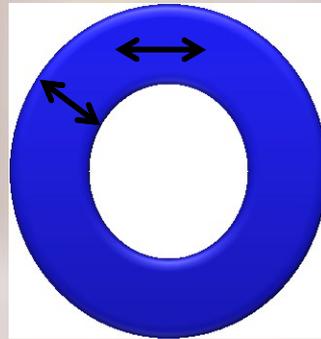


Strain can be evaluated as

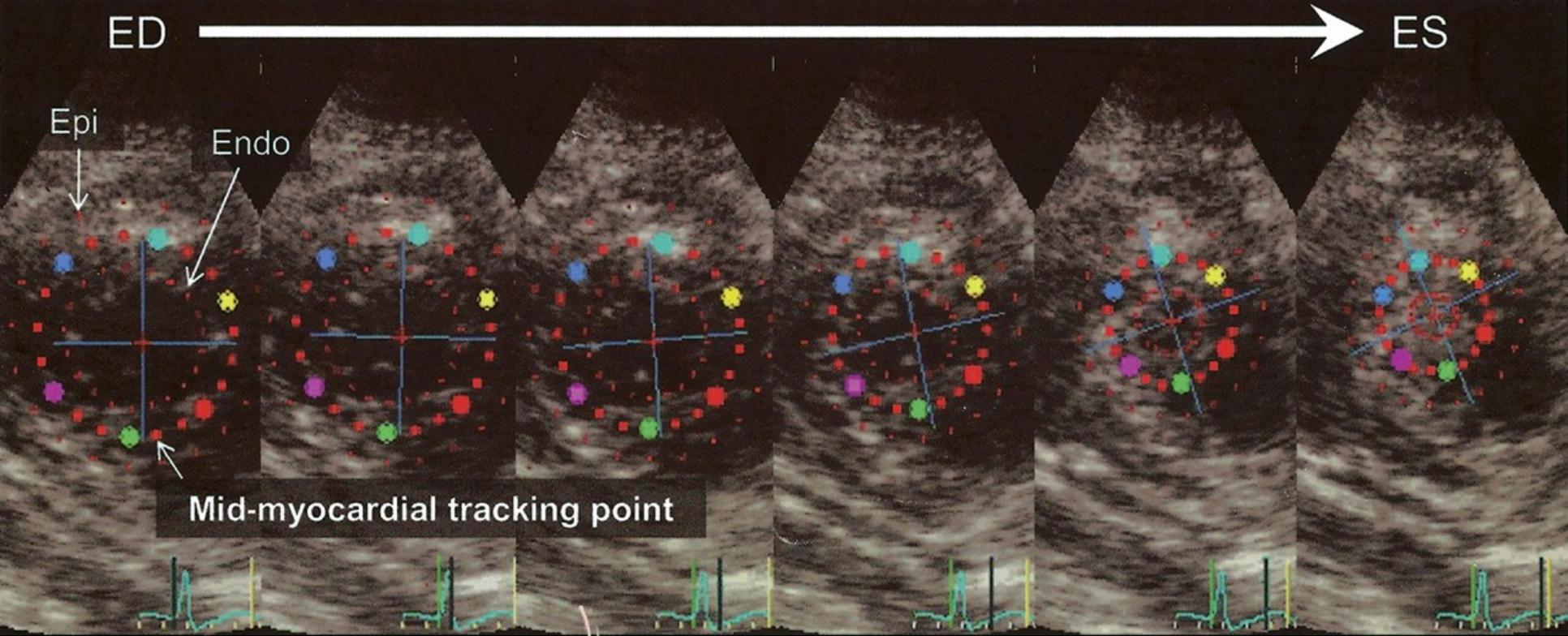
- Longitudinal
- Transversal
- Radial
- Circumferential



Apical

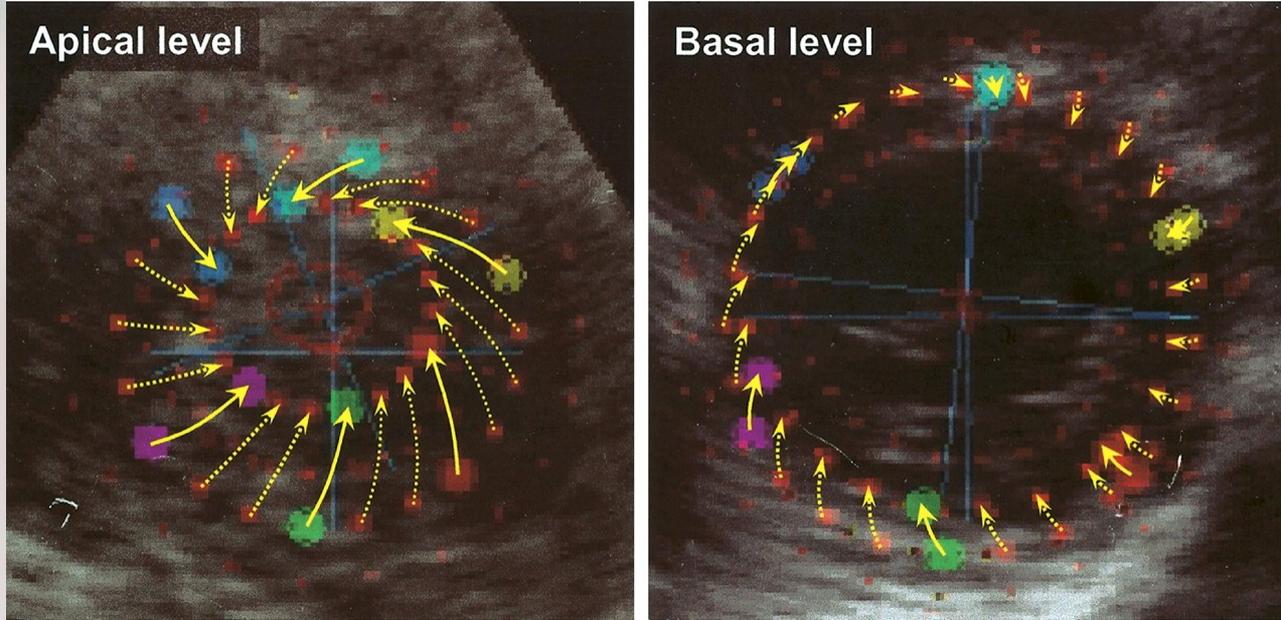


PSSAX



Speckle tracking of successive two-dimensional images

Notomi, Y. et al. J Am Coll Cardiol 2005;4:2034-2041

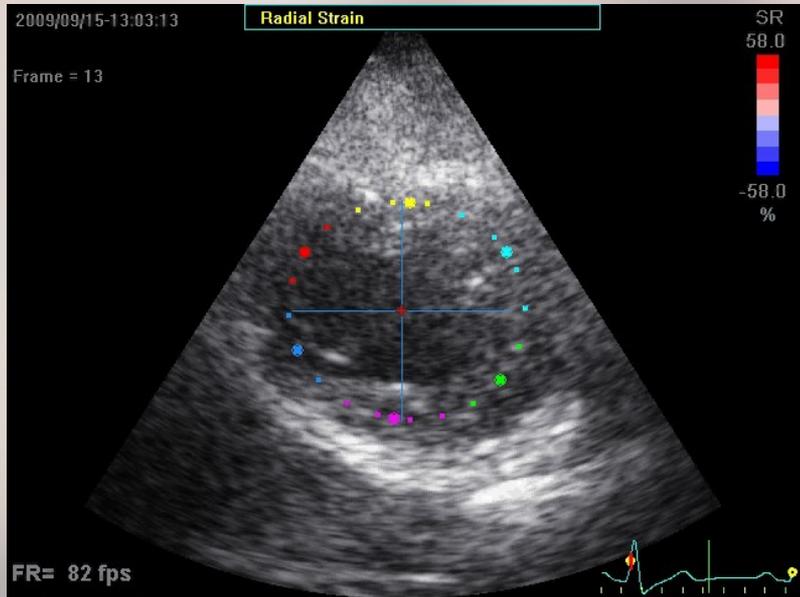


Left ventricular rotation (LVrot) at apical and basal levels during systole

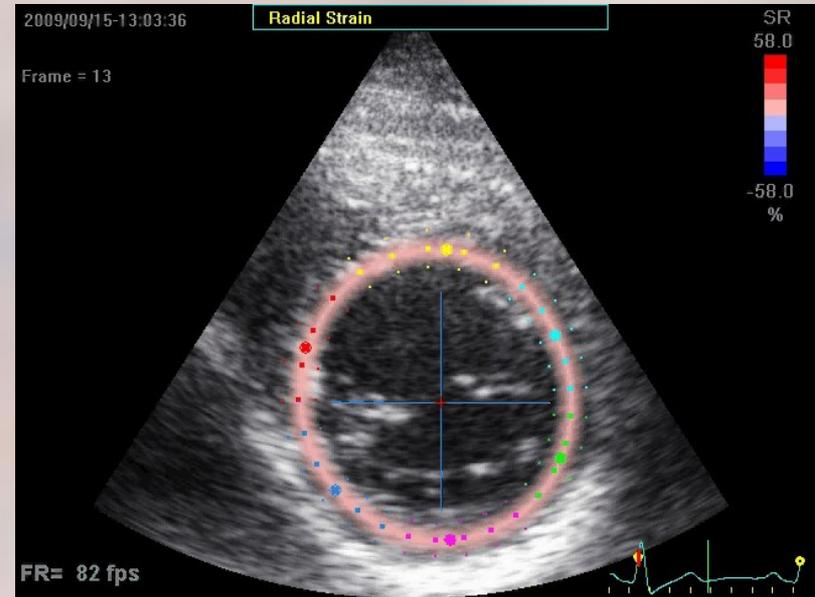
Notomi, Y. et al. J Am Coll Cardiol 2005;45:2034-2041

In practice

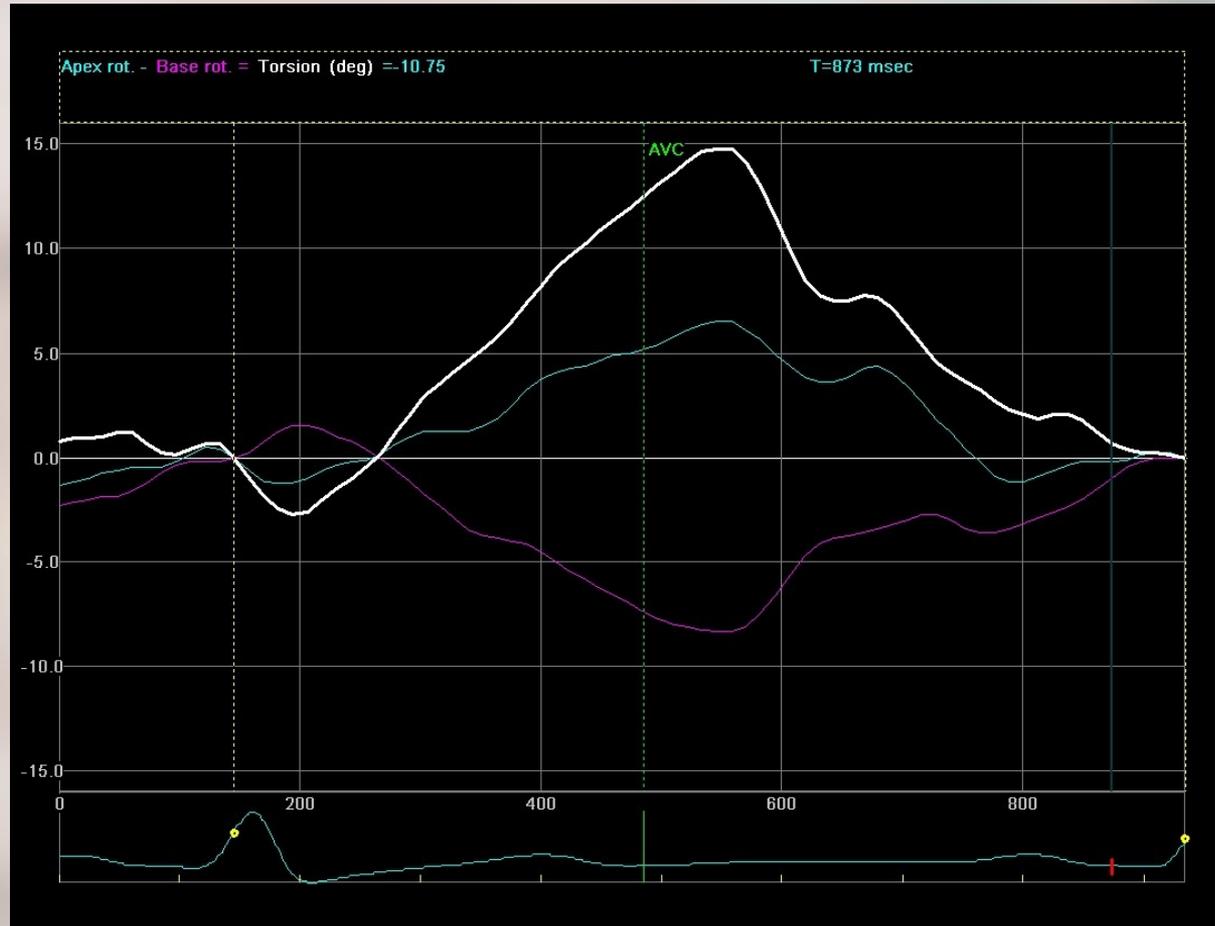
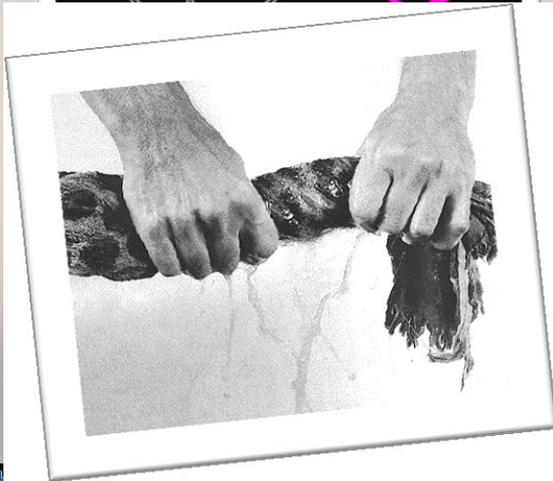
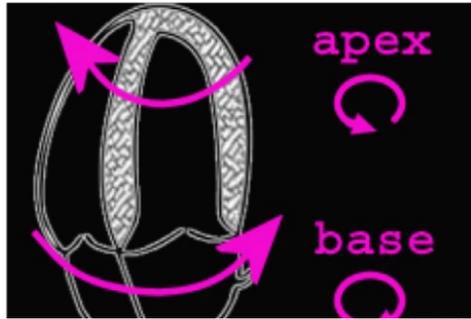
Apical level



Basal Level



Torsion



Clinical applications of 2D Strain

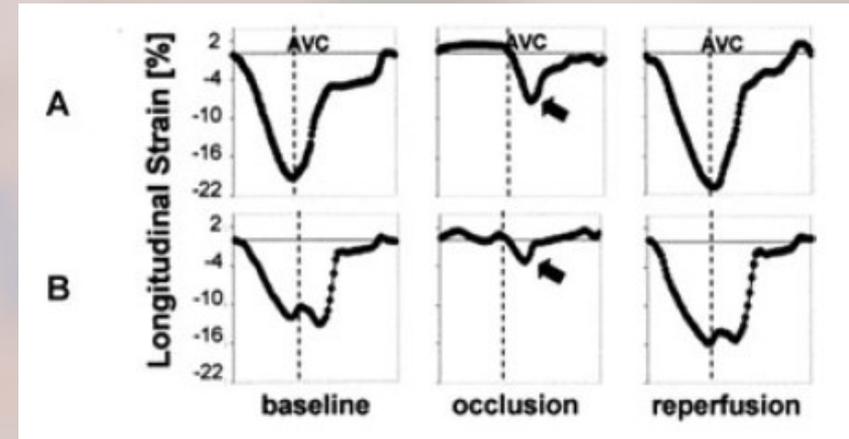
- Coronary artery disease
- Stress testing
- Left ventricular dyssynchrony
- Cardiomyopathy

Evaluation of coronary artery disease

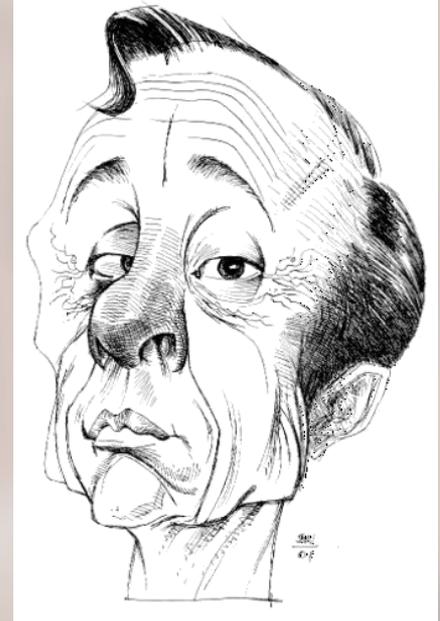
2D Strain

- Accuraat & reproduceerbaar
- Subtiële WBS
 - Kwantificatie
- Ontrafelen van complexe myocardiale contractie patronen:
 - Akinesie <6%
 - Hypokinesie 6-18%
 - Normokinesie >18%
 - Hyperkinesie >24%
 - Dyskinesie stretching
 - Dyssynchronie regional timing

Ischemic response

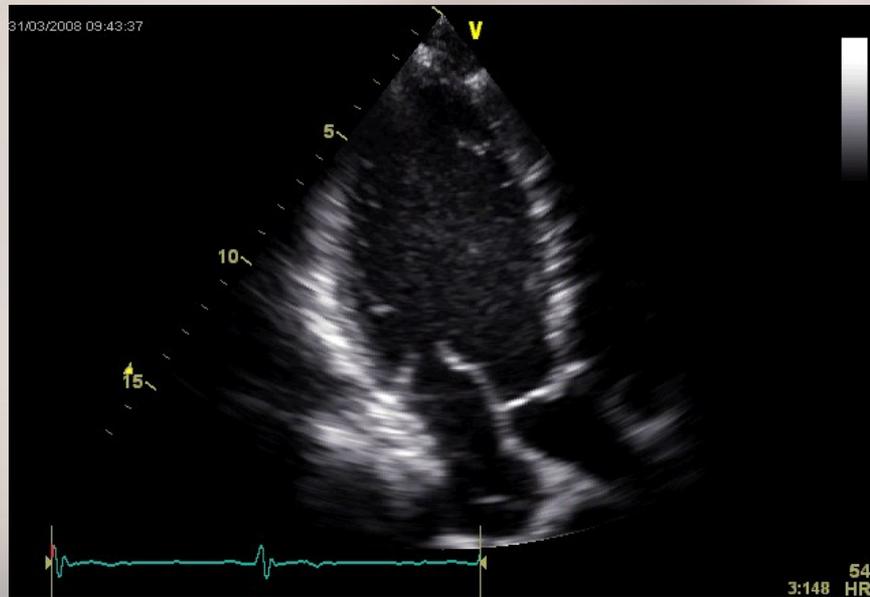


Ontrafelen van complexe contractie patronen

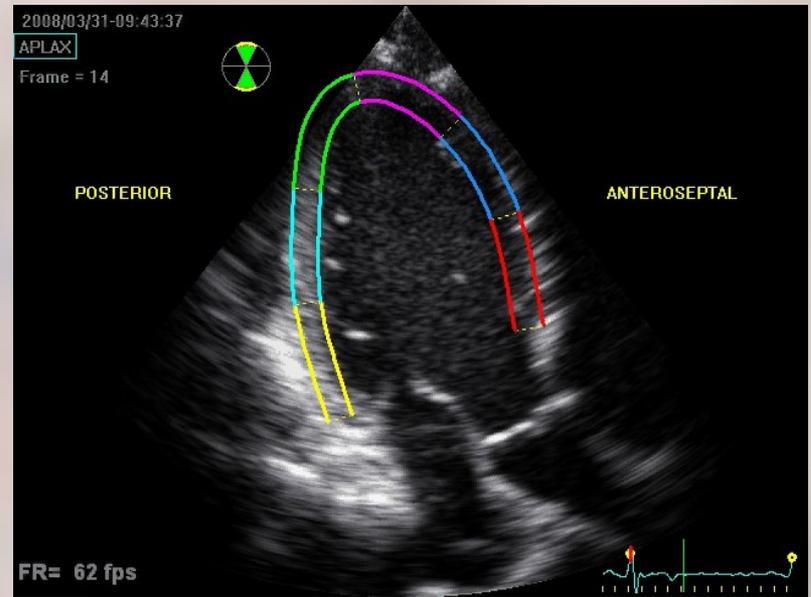


2D Strain in practice

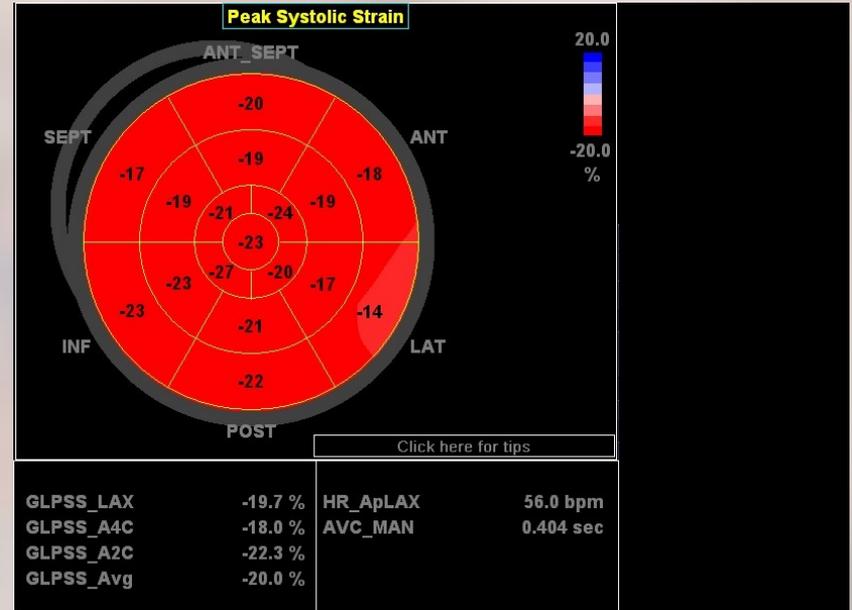
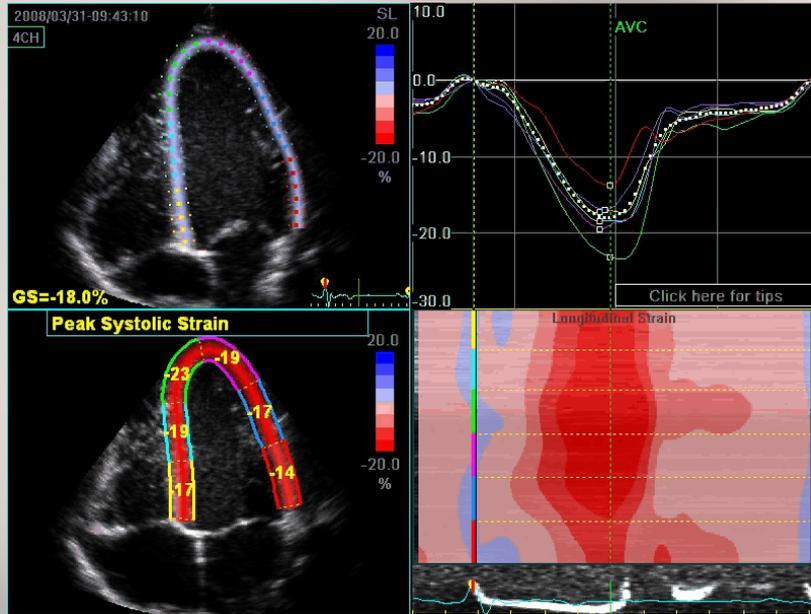
Plain 2D APLAX



APLAX using 2D strain imaging

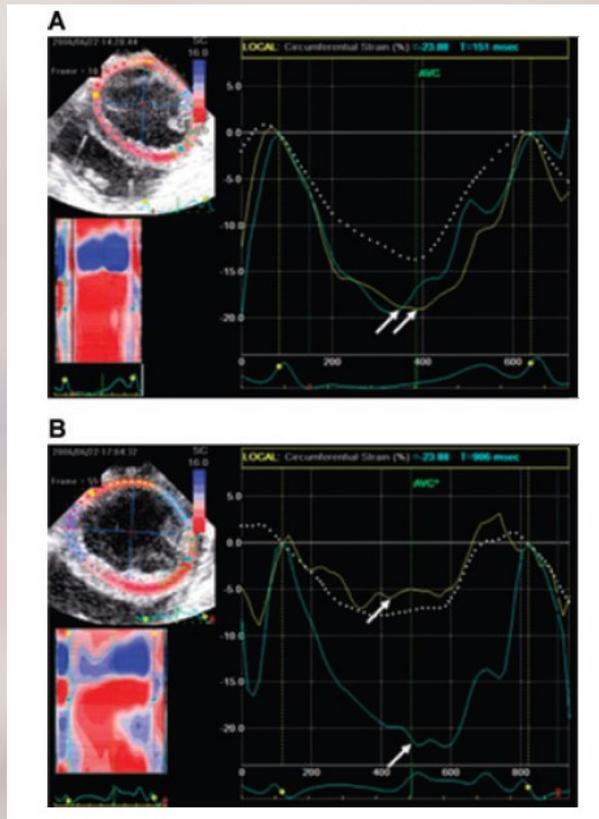


2D strain results



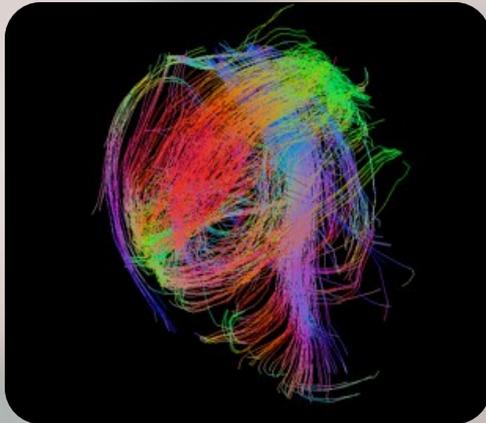
Stress testing

- Limitations stress echo:
 - Subjective interpretation
 - High level of expertise
 - Moderate reproducibility
- 2D strain:
 - Post processing
 - Longitudinal strain
 - Reliable measurements

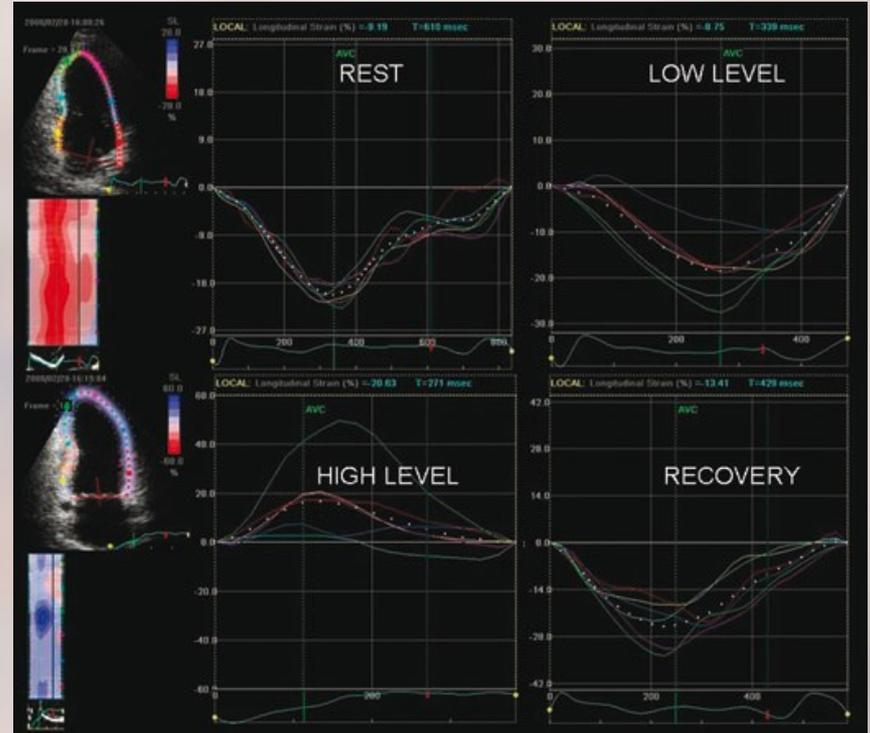


Stress testing

- Ischemic response
 - Longitudinal
 - Before radial
- Subendocardial fibers are oriented longitudinally

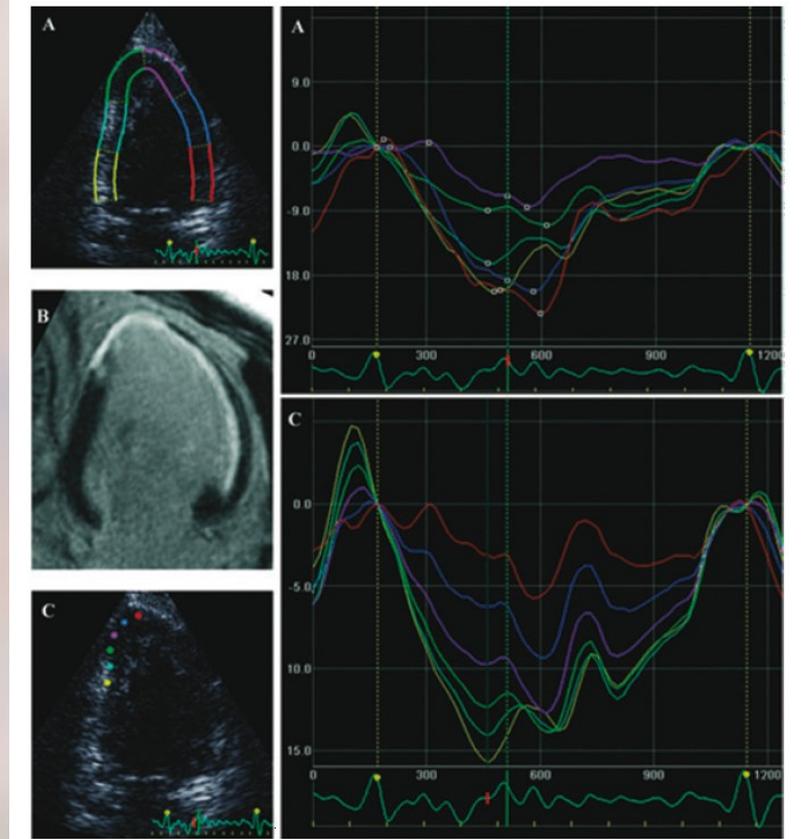


Diffusion Tensor Imaging (DTI)



Viability assessment

- Gradual decrease in strain with increasing transmurality of MI
- 2D strain:
 - Excellent prognostic value for functional recovery after revascularization
- OLVG: confirmation study
 - 2D strain vs MRI

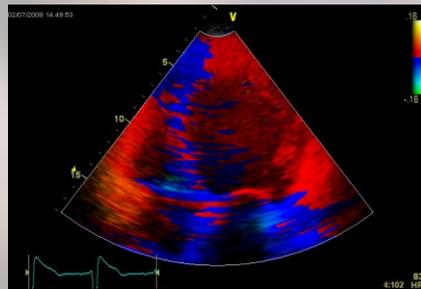
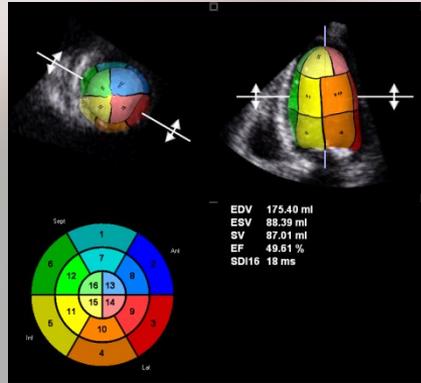


Left ventricular dyssynchrony

Methods

➤ RT3DE

➤ TDI



Disadvantages

- Limited availability
- Low spatial resolution
- Angle dependent
- Active vs passive
- High framerate (>130FPS)

Left ventricular dyssynchrony

Method

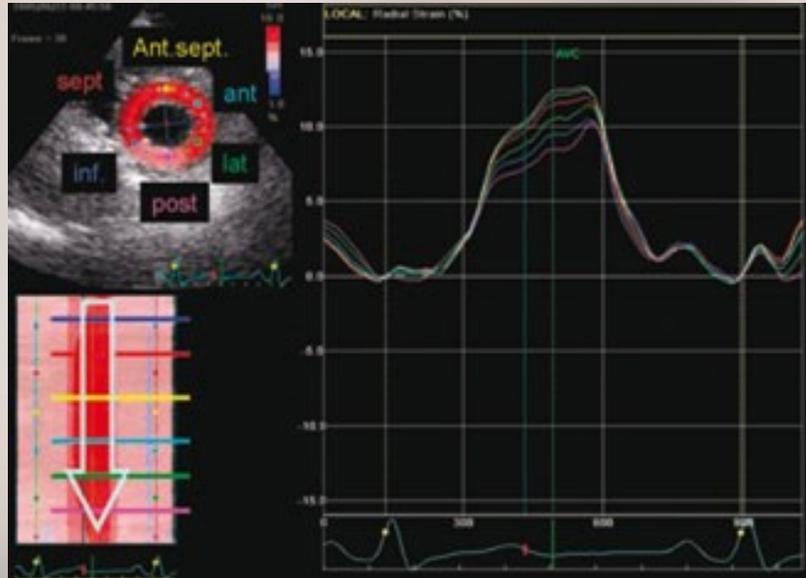
- 2D Strain

Advantages

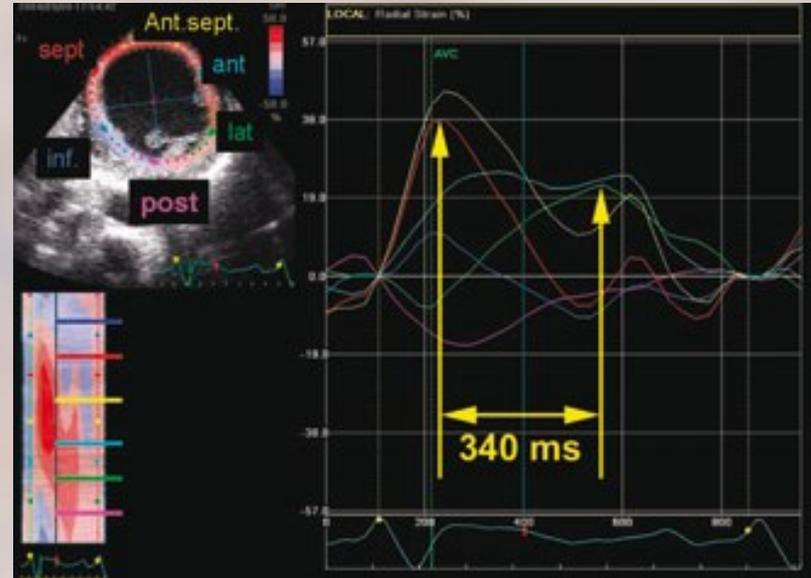
- Operator independent
- Less artifacts
- Not angle dependent
- Proper quantification
- Higher sensitivity and specificity regarding CRT responders

Example of dyssynchrony

Synchron

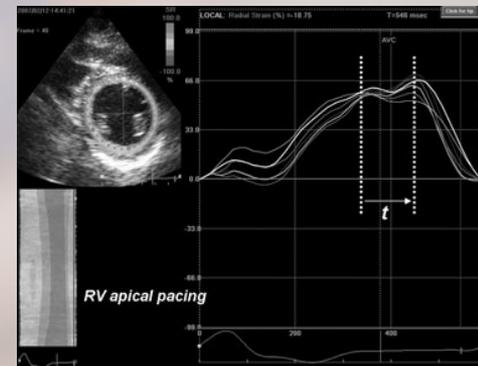
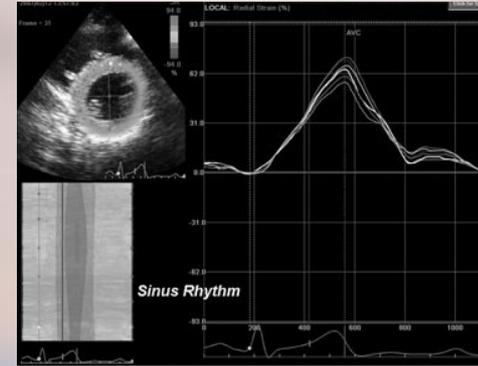


Dyssynchron



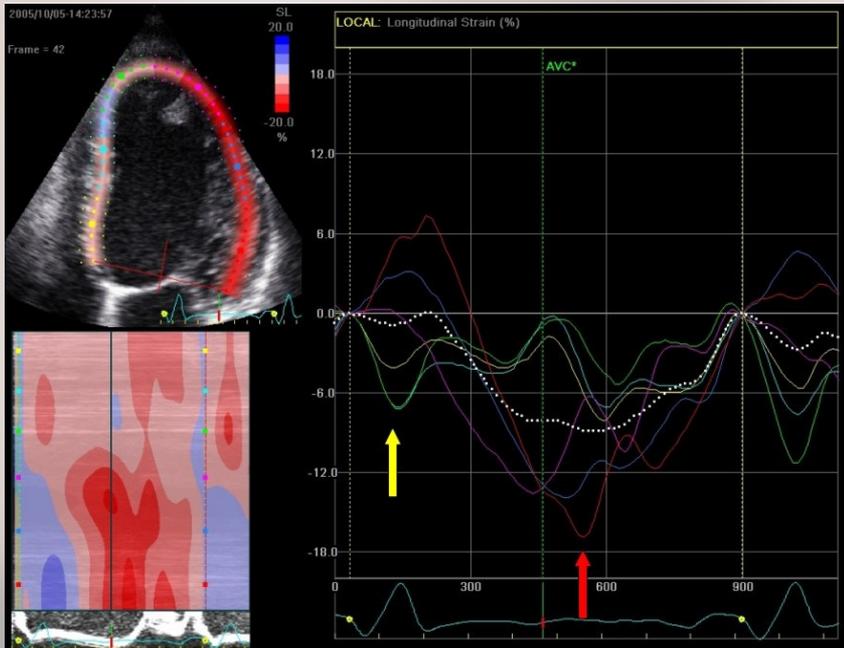
Left ventricular dyssynchrony

- Assessing dyssynchrony with 2D strain
 - Time-to-peak radial strain of 2 segments
 - $\geq 130\text{ms}$
 - SD of time-to-peak longitudinal strain of 12 segments
 - $\geq 35\text{ms}$

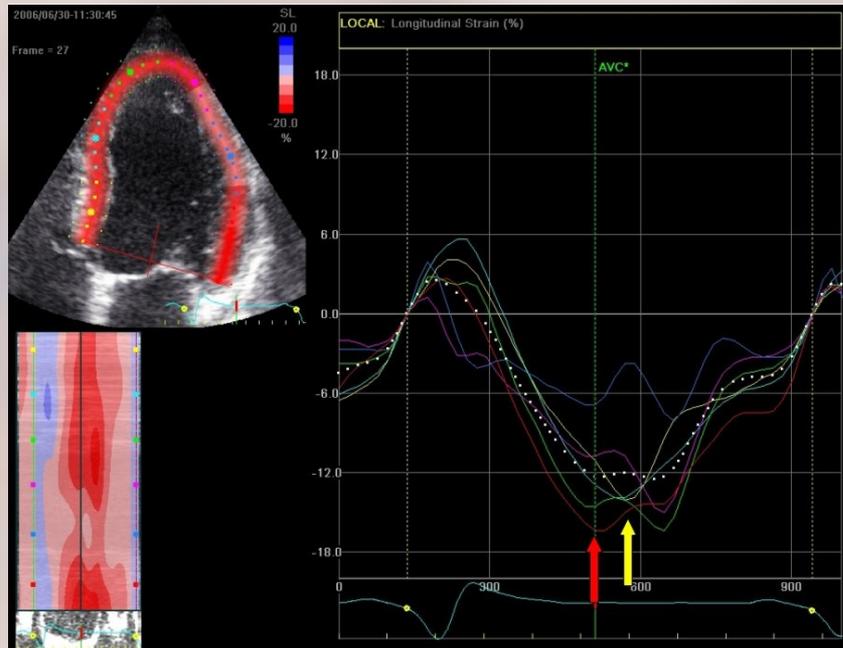


CRT optimization

Voor CRT

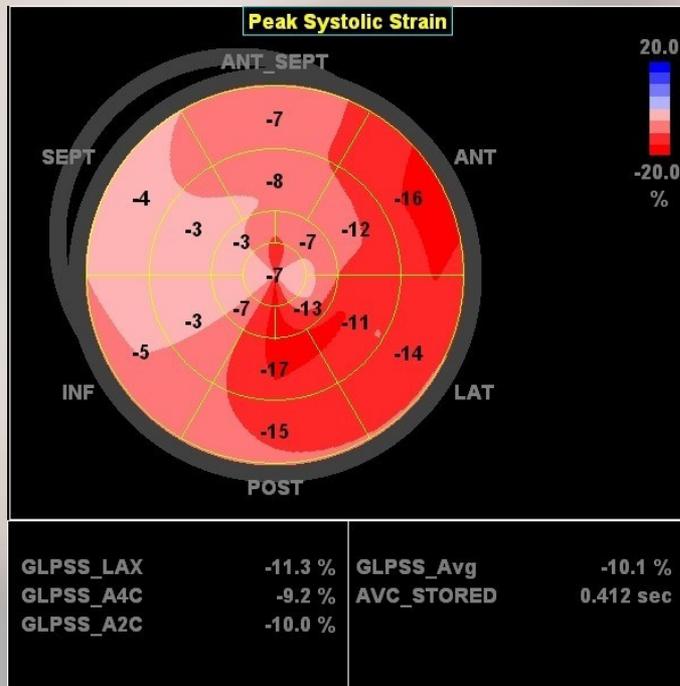


Na CRT

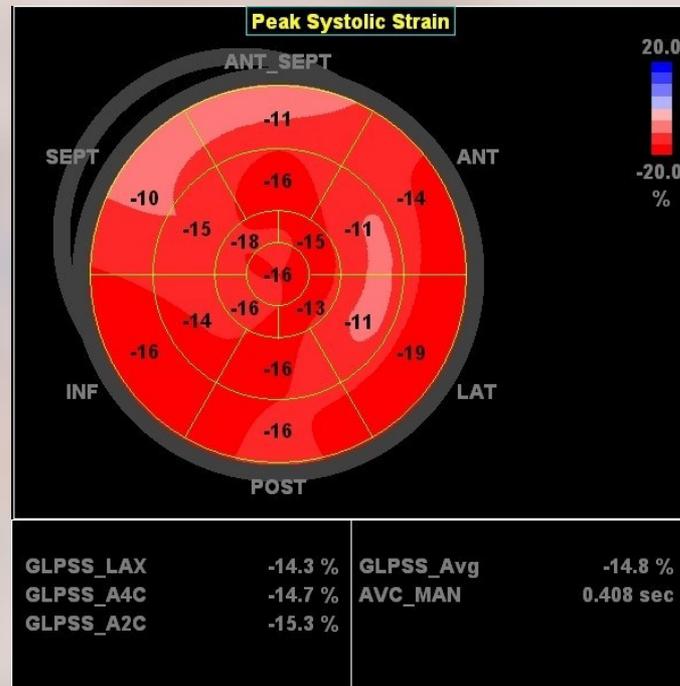


CRT optimization

Voor CRT

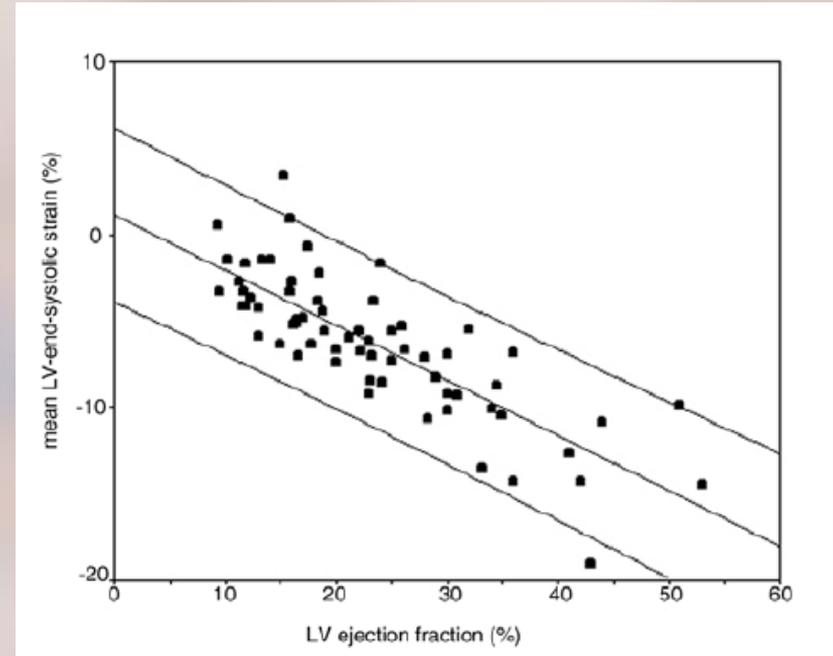


Na CRT

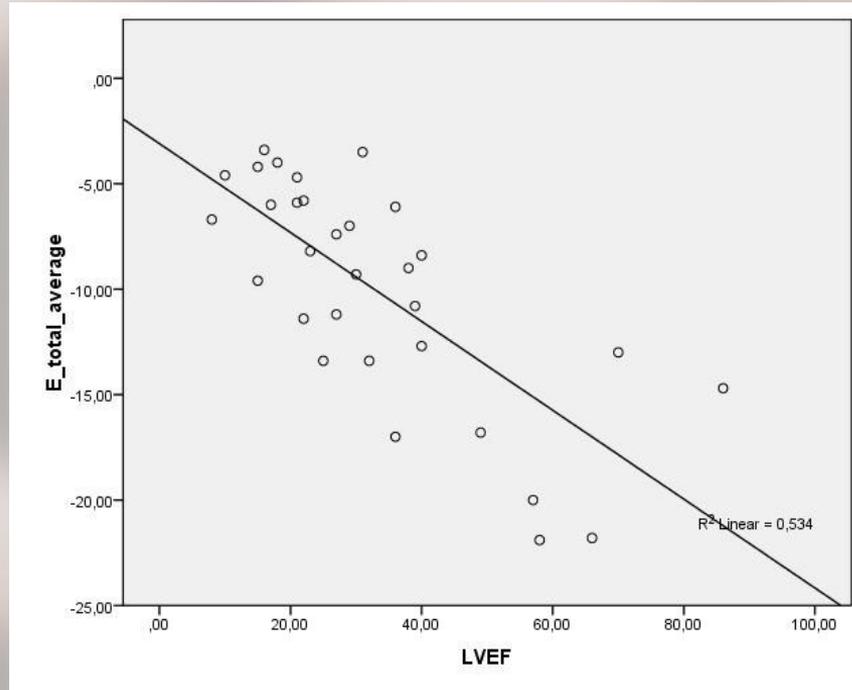


Cardiomyopathy

- LVEF
 - Simplistic approach
- 2D strain
 - Subtle dysfunction
 - Global vs. regional
 - Early identification



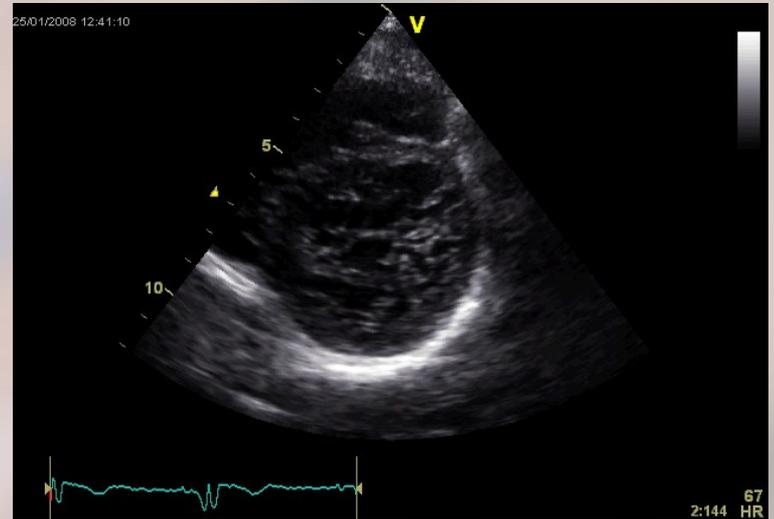
Confirmatie OLVG data



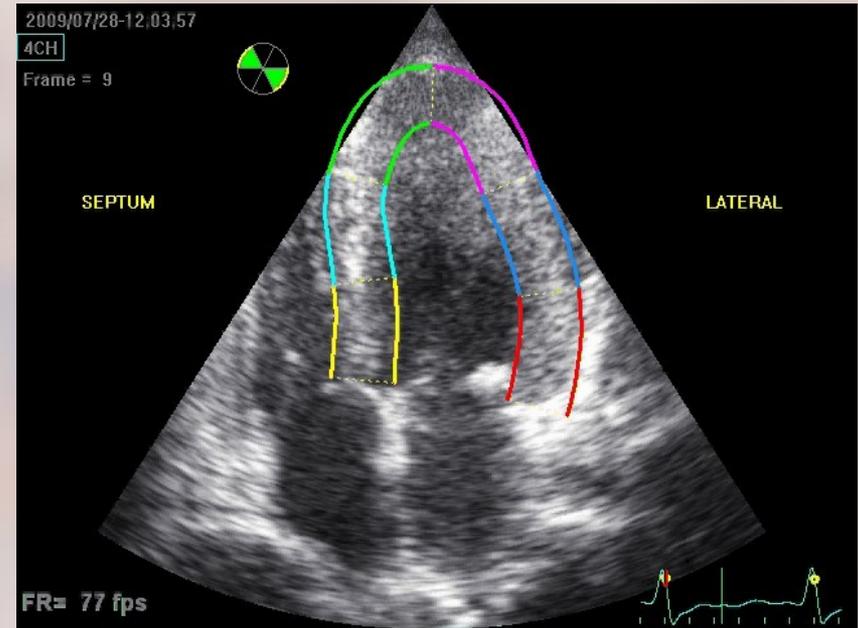
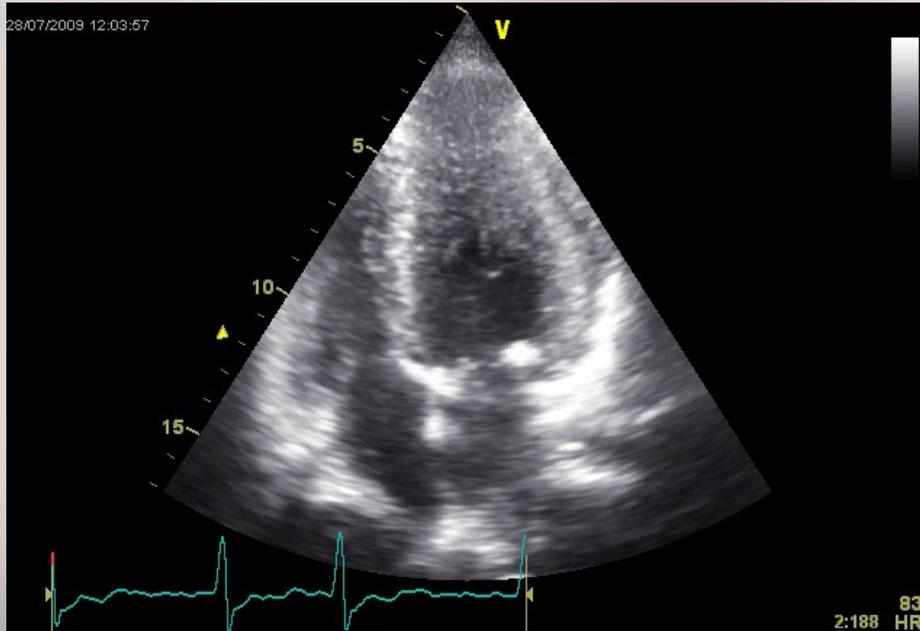
Subtiele afwijkingen

➤ Impaired longitudinal motion before ↓ EF.

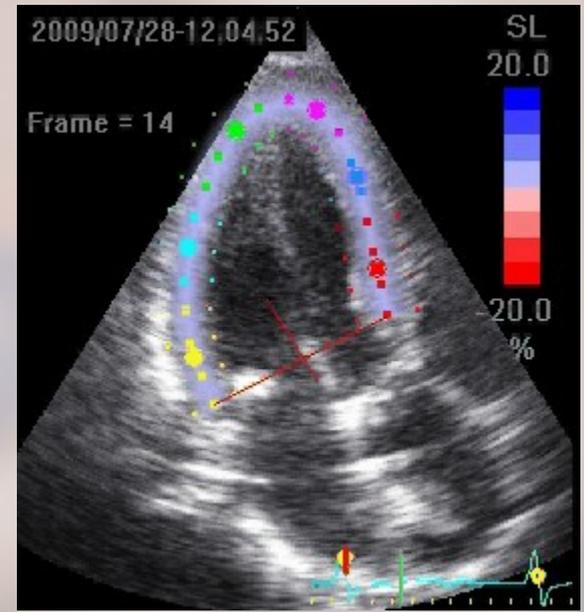
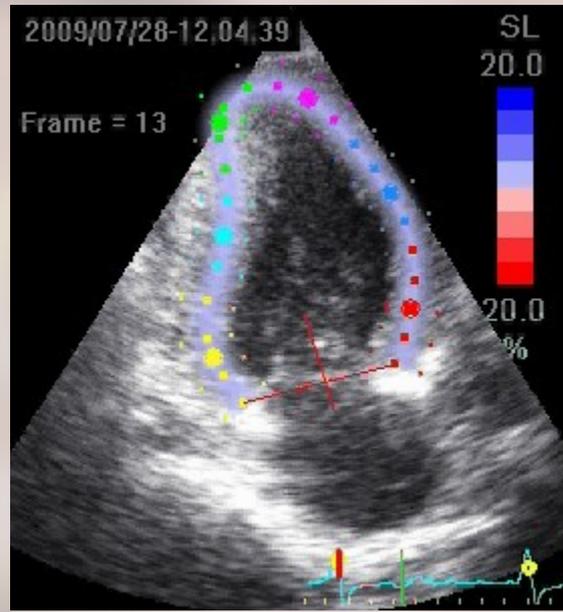
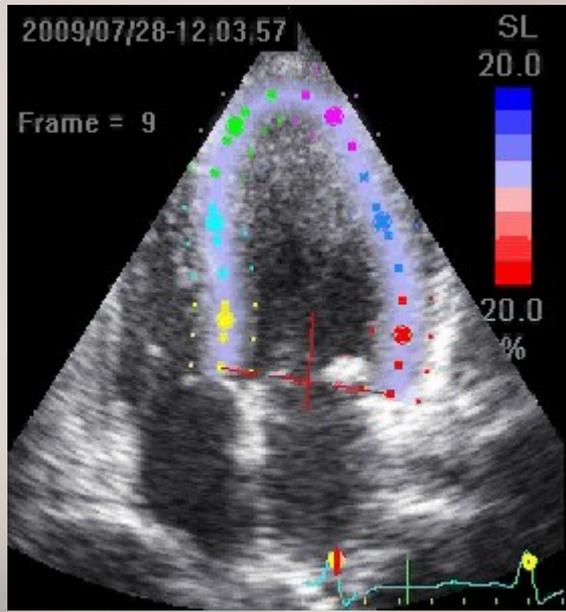
- Infiltratieve CM
- NC CMP
- HCM
- HT CMP
- ARVC



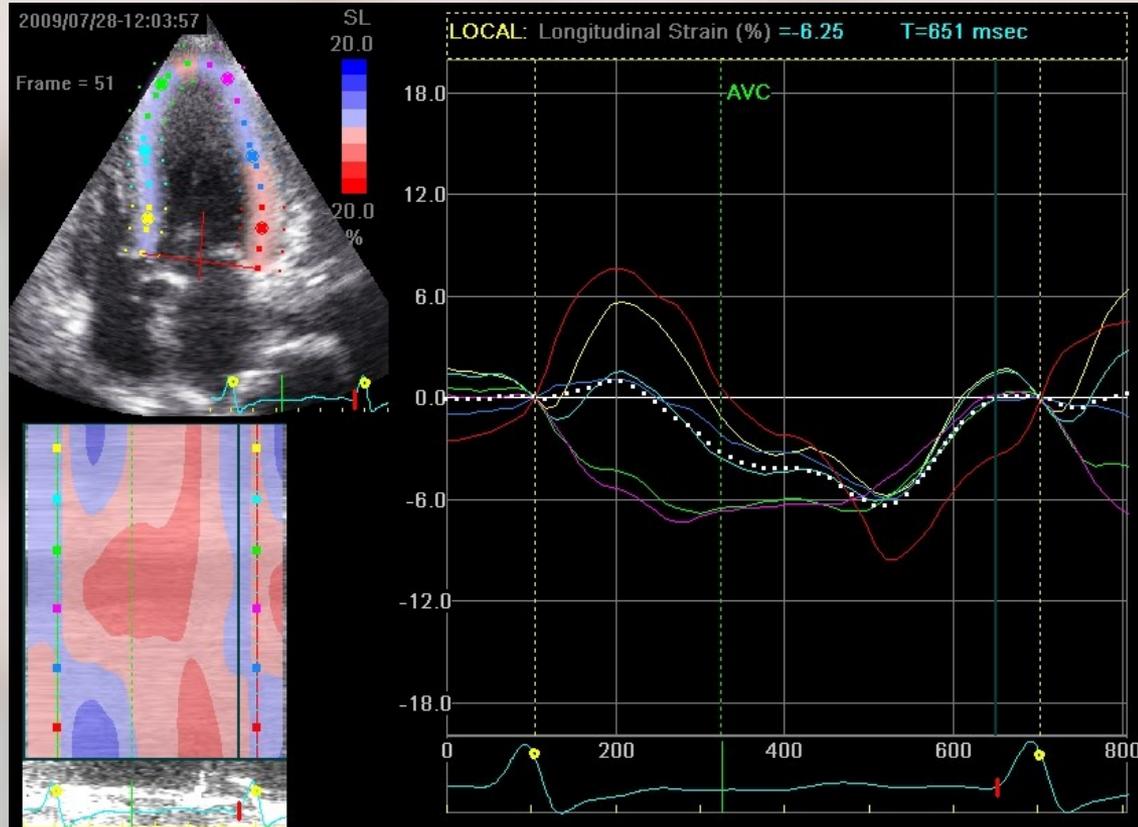
2D strain in cardiomyopathy



Offline 2D strain analysis

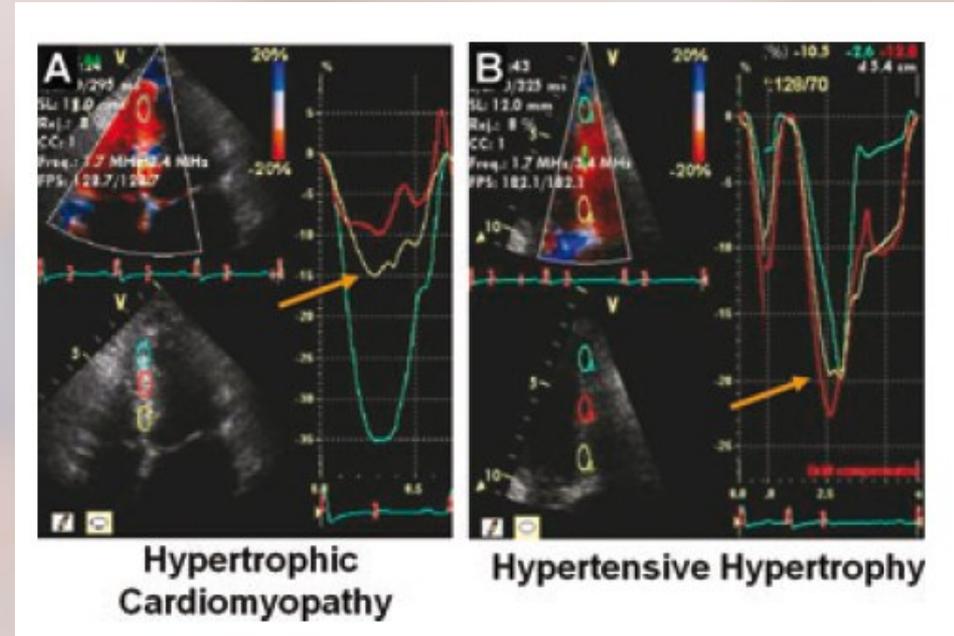


Morbus Fabry

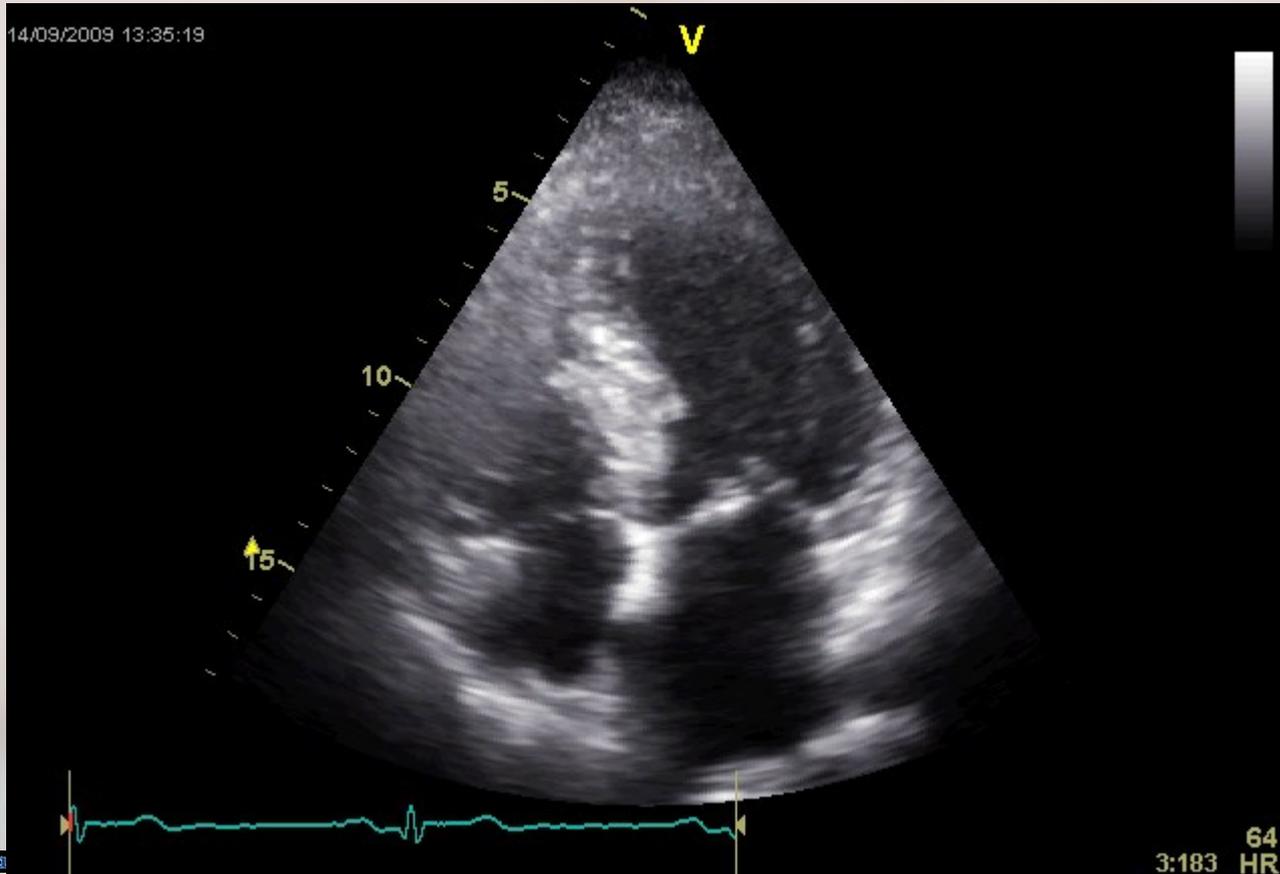


HCM vs LVH due to hypertension

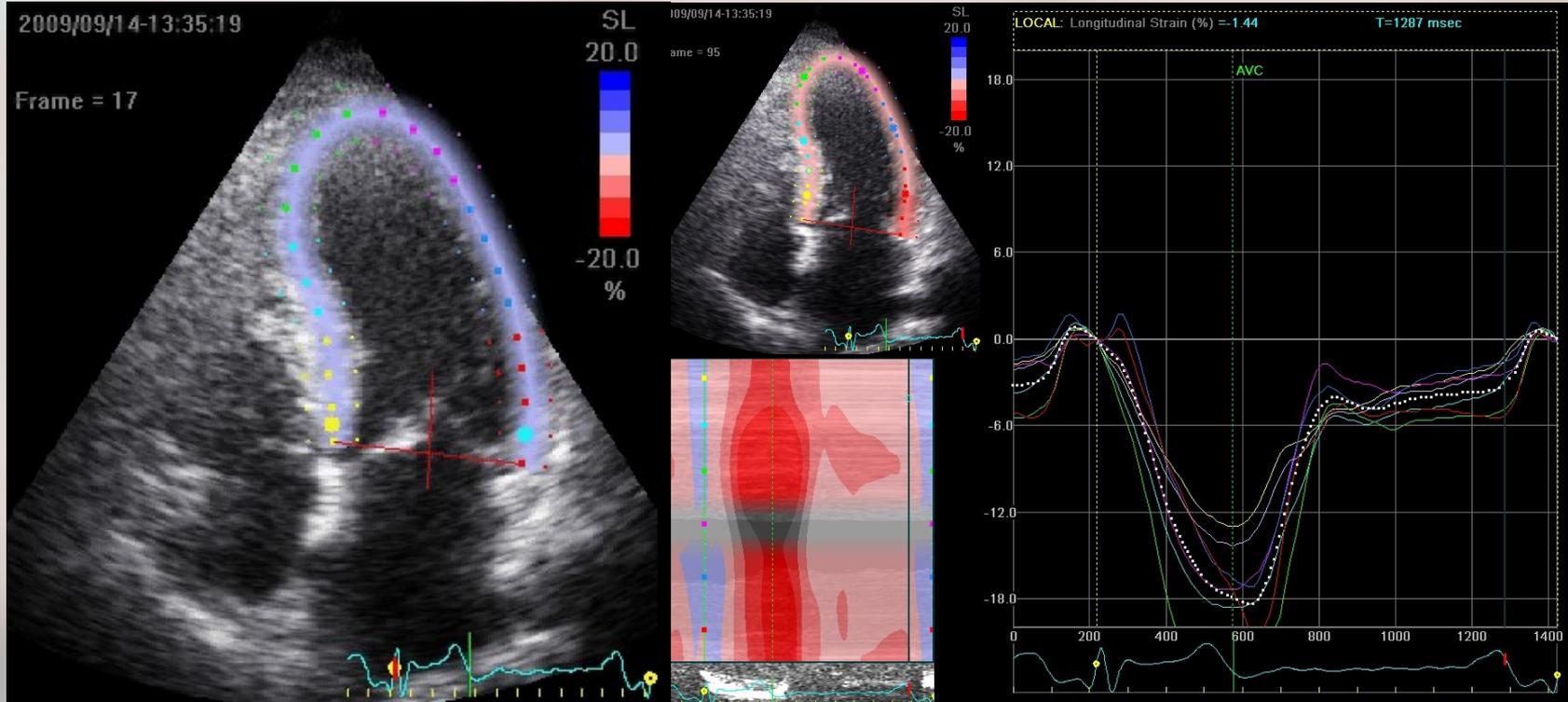
- Differentiation by strain analysis
- HCM
 - Segmental abnormalities
 - Hypokinesie
 - Prestretching
 - Post-systolic shortening



HCM

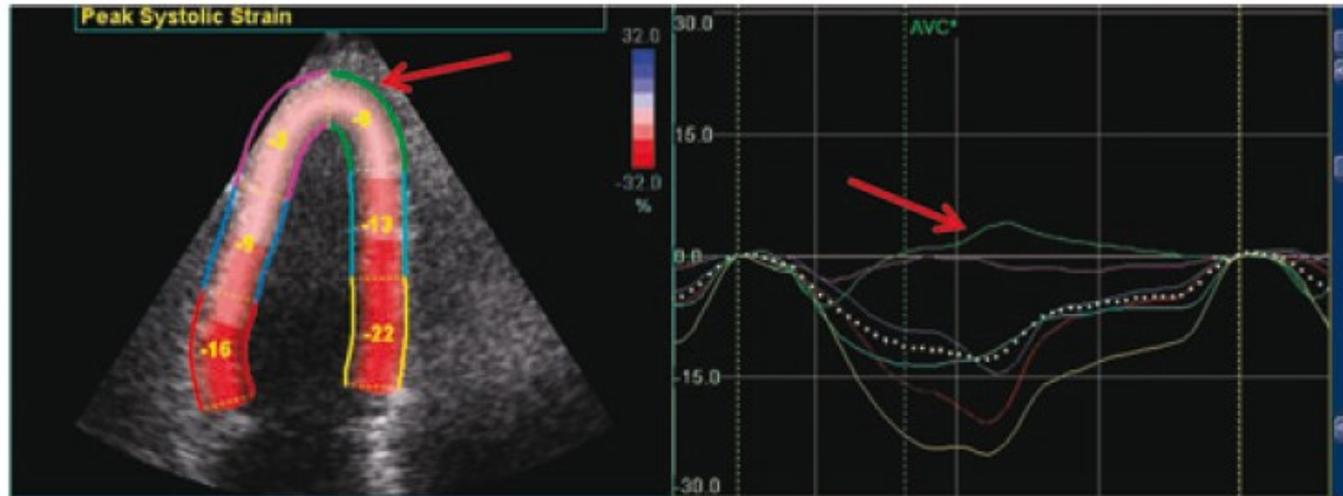


WMA's bij HCM

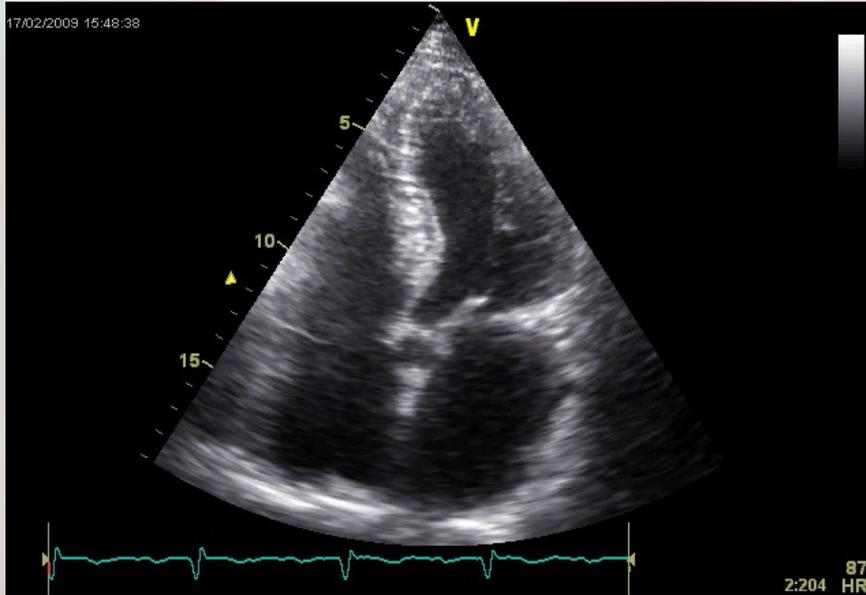


HCM

- Apical HCM; EF preserved
- Strain highlights the link between abnormality and systolic mechanics

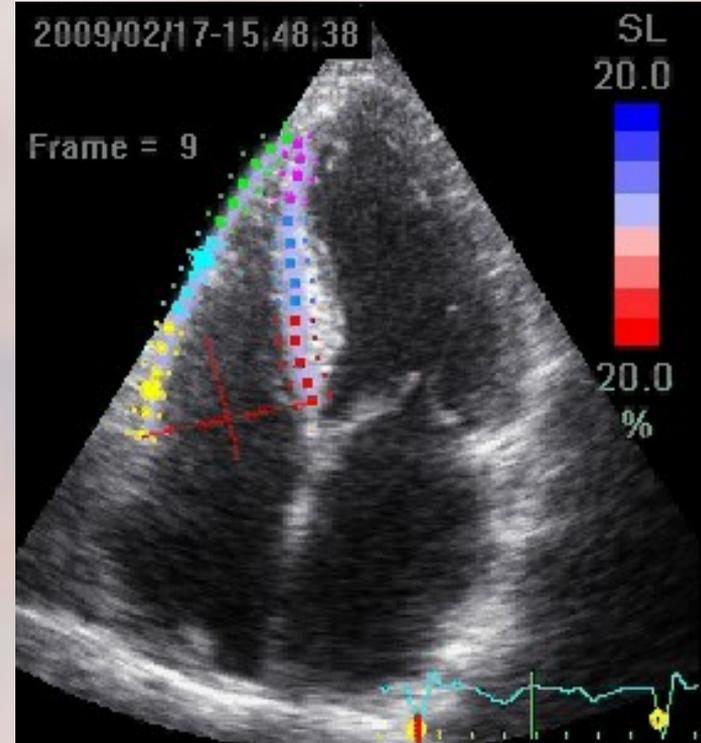


Rechter ventrikel functie



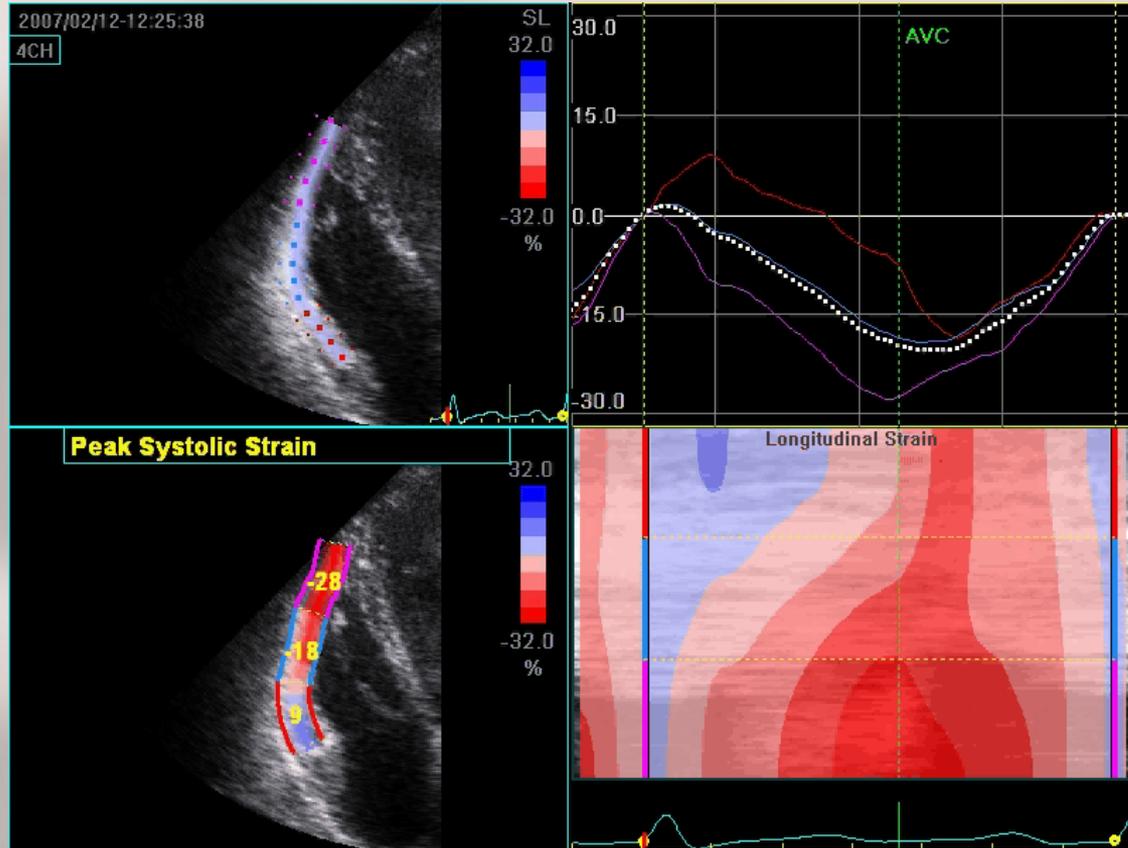
Evaluatie RV

Motion independent deformation parameters (S, SR) appear superior in the accurate description of regional RV function.

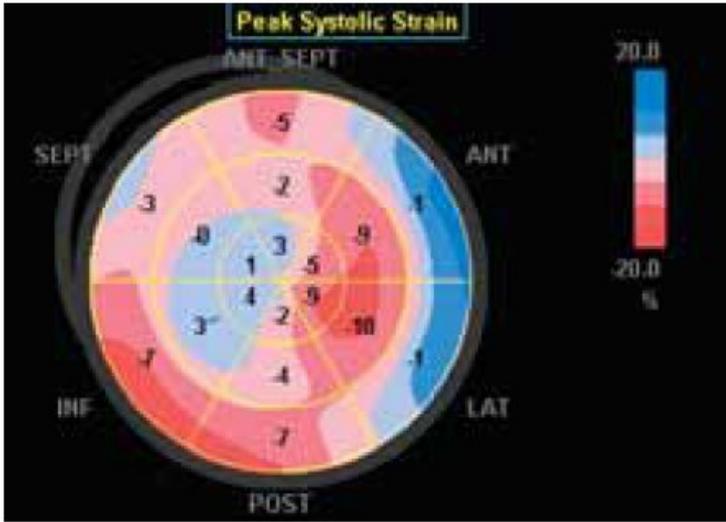


ARCV

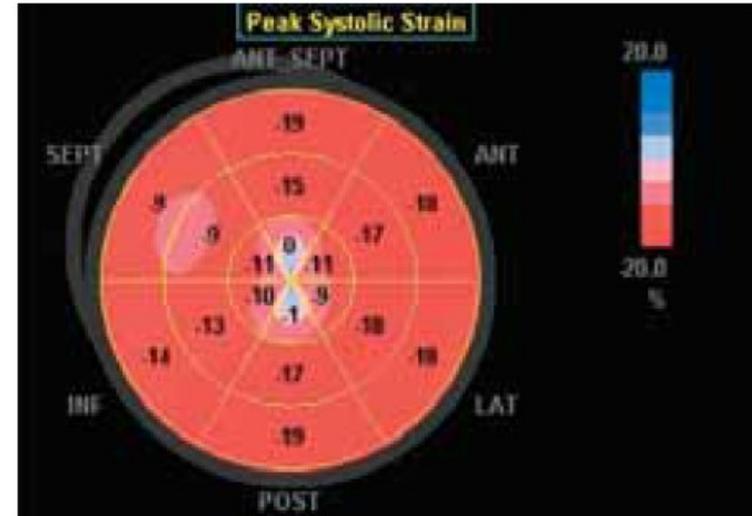
2D strain superior
aan TAPSE



Use 2D Strain for follow up



Myocarditis

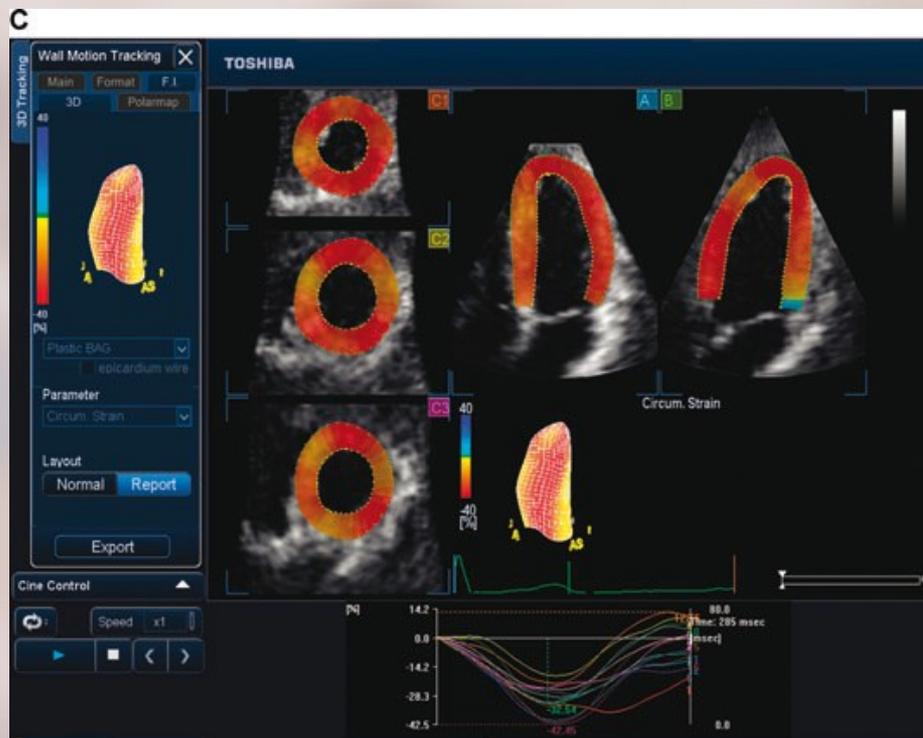
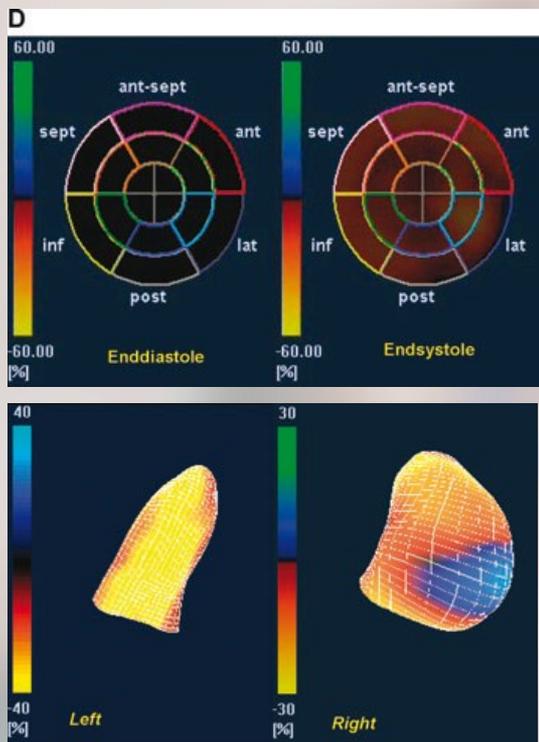


Recovery

Tips and Tricks

- Image quality: noise & near field clutter
- Frame rate (40-90 Hz)
- Region of interest (ROI): dikte vh myocard
- Endocardiac border tracing: Visual confirmation
- Check AVC settings

Future developments: 3D Strain



**Keep watching the speckles
There is more to come!**