

[1]李鹏,吕发金,彭聪,等.IDEAL与3D FSE-Cube序列正常臂丛节后神经成像对比研究[J].第三军医大学学报,2013,35(06):553-557.

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IDEAL与3D FSE-Cube序列正常臂丛节后神经成像对比研究:

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Title: Comparison of IDEAL and 3D FSE-Cube sequences for normal postganglionic brachial plexus

作者: 李鹏; 吕发金; 彭聪; 张丹; 王筱璇; 刘丹
重庆医科大学附属第一医院放射科

Author(s): Li Peng; Lu Fajin; Peng Cong; Zhang Dan; Wang Xiaoxuan; Liu Dan
Department of Radiology, First Affiliated Hospital, Chongqing Medical University, Chongqing, 400016, China

关键词: 臂丛神经; 磁共振成像; 磁化率伪影

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摘要: 目的 比较IDEAL序列及3D FSE-Cube序列臂丛节后神经成像图像质量。 方法 利用3.0T磁共振对30名志愿者采用IDEAL序列及3D FSE-Cube序列进行臂丛节后神经成像,每名志愿者在进行3D FSE-Cube序列扫描时均进行两次扫描,第2次使用了自制匀场辅助装置。将所得图像进行MIP、CPR等后处理,计算两种序列臂丛神经各水平显示率,进行神经成像质量评分,测量神经、肌肉、背景噪声信号,并计算神经信噪比(SNR)及对比噪声比(CNR)。 结果 使用辅助装置前3D FSE-Cube序列臂丛神经神经节、锁骨上区神经、锁骨下区神经显示率分别为73.33%、56.67%、40.00%,使用辅助装置后为100.00%、97.67%、93.33%,两组间差异有统计学意义($P<0.05$); IDEAL与3D FSE-Cube序列神经节显示率分别为96.67%、100.00%,锁骨上区神经显示率分别为86.67%、96.67%,差异均无统计学意义($P>0.05$),锁骨下区神经显示率分别为70.00%及93.33%,3D FSE-Cube序列显著高于IDEAL序列($P<0.05$);两序列神经节水平成像质量无显著差异($P>0.05$),斜角肌水平、胸锁关节水平、腋动脉水平3D FSE-Cube序列神经成像质量优于IDEAL序列($P<0.05$); IDEAL序列神经节水平神经信号高于3D FSE-Cube序列($P<0.05$),斜角肌水平、胸锁关节水平、腋动脉水平两组间差异无统计学意义($P>0.05$); IDEAL序列信噪比及对比噪声比均高于3D FSE-Cube序列($P<0.01$)。 结论 IDEAL序列和3D FSE-Cube序列均能清晰的显示节后臂丛神经,3D FSE-Cube序列结合使用匀场辅助装置具有更高的神经成像质量。

Abstract: Objective To compare the sequences of iterative decomposition of water and

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fat with echo asymmetrical and least-squares estimation (IDEAL) and 3D FSE-Cube imaging of brachial plexus. **Methods** Brachial plexus of 30 health volunteers were imaged on 3.0T MR system with sequences of 3D FSE-Cube and IDEAL respectively. All of the volunteers underwent the same MR scanning for 2 times with 3D FSE-Cube sequence with the assistive device was used in the second time. Images were post-processed with MIP and CPR, and then the display rate was calculated, and image quality was assessed, signal noise ratio (SNR) and contrast-to-noise ratio (CNR) were calculated. **Results** The display rates of the ganglion, supra clavicular nerve, and infra clavicular nerve on 3D FSE-Cube sequence were 73.33%, 56.67% and 40.00% respectively, while the rates were 100.00%, 97.67% and 93.33% respectively after use of the assistive device, with statistically difference between them ($P<0.05$). The display rate of ganglion were 96.67% and 100.00% on IDEAL and 3D FSE-Cube respectively, and that of supra clavicular nerve was 86.67% and 96.67%, respectively, but there was no significantly difference in both of them ($P>0.05$). The infra clavicular nerve was shown better on 3D FSE-Cube than IDEAL (93.33% vs 70.00%, $P<0.05$). In levels of ganglion, the imaging quality on IDEAL and 3D FSE-Cube had no significant difference ($P>0.05$). In the levels of interscalene area, costoclavicular space, and axillary, the quality of 3D FSE-Cube was better than IDEAL ($P<0.05$). In the level of ganglion, the signals of IDEAL were higher than those of 3D FSE-Cube ($P<0.05$). There was no significant difference in other level of brachial plexus between the 2 sequences ($P>0.05$). SNR and CNR were both higher in IDEAL than in 3D FSE-Cube ($P<0.01$). **Conclusion** The sequences of IDEAL and 3D FSE-Cube both have the capacity of clearly displaying postganglionic brachial plexus, But the imaging quality of 3D FSE-Cube is better when combined with assistive device.

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