

# Assessment of Mechanical Properties of Common Carotid Artery in Takayasu's Arteritis Using Velocity Vector Imaging

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# Background (I)

- **Alteration of arterial elastic properties is known to occur in patients with arteritis.**
- **Widespread thickening of the walls of elastic arteries is one of the characteristics of TA.**

*Circulation 1994;90:1855-60*

- **However, mechanical properties of the involved arteries are not well known.**

# Background (II)

- **Recently, velocity vector imaging (VVI), a novel method based on speckle tracking, has been suggested to be useful to assess multi-dimensional regional mechanics such as velocity, strain, strain rate and displacement.**
- **Thereby it enables rapid and accurate quantitative measurement of myocardial velocities, strain, and strain rate.**

*JASE 2008;21:813-7*

# Purpose

- To investigate the mechanical properties of the common carotid artery using VVI in TA.

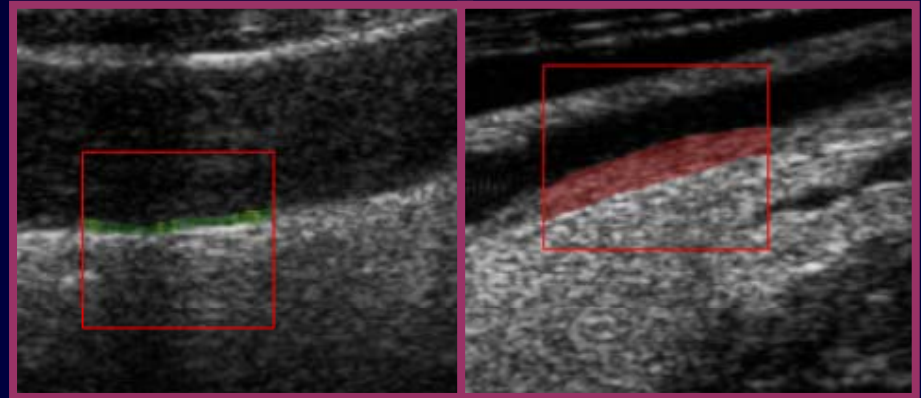
# Methods

- 12 patients with Takayasu's arteritis
- 12 age-, gender-matched healthy controls

- Carotid IMT
- Carotid strain
- Carotid VVI

# Carotid IMT

- Semi-automatically measured with the *Syngo Arterial Health Package* (Siemens Medical Solutions USA, Inc., CA, USA)
- All the frames within a single region of interest (1 cm length) selected by the user 1 cm distal to the bulbs

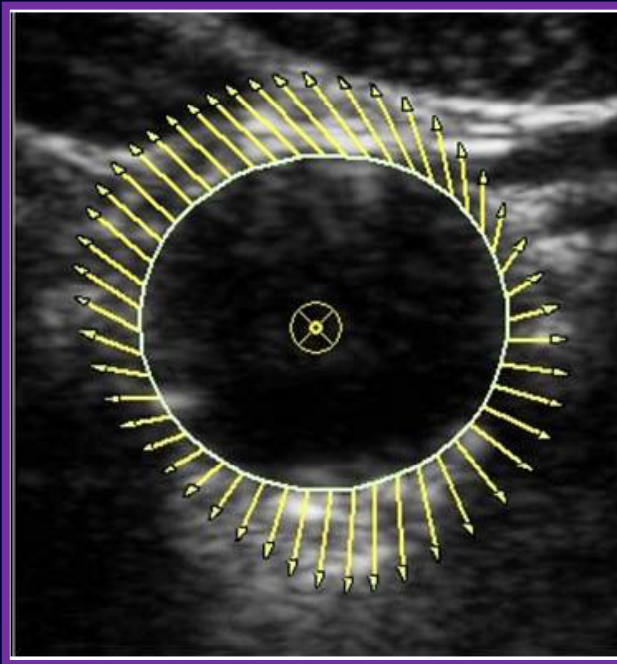


# Carotid Strain

- **Carotid luminal strain, the percent systolic expansion of the arterial lumen, was calculated as; luminal strain = ([internal diameter at peak systole – internal diameter at peak diastole]/internal diameter at peak diastole) × 100**

# Carotid VVI

- ***Syngo Velocity Vector Imaging technology***  
**(Siemens Medical Solution USA, Inc.)**



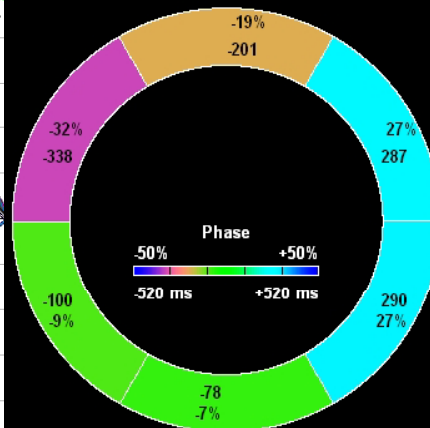
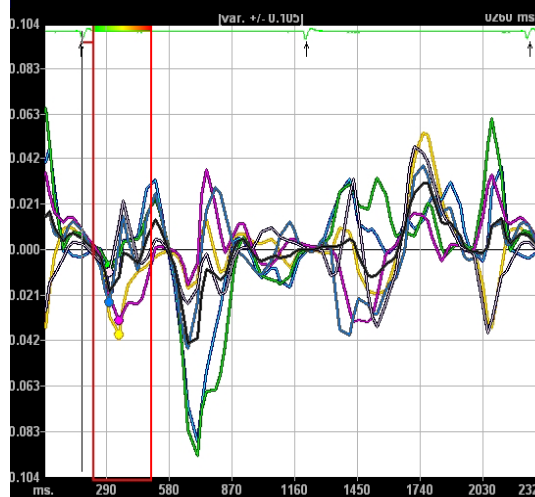
- **Transverse plane of a common carotid artery about 1.5 cm from the bifurcation to the aortic arch**



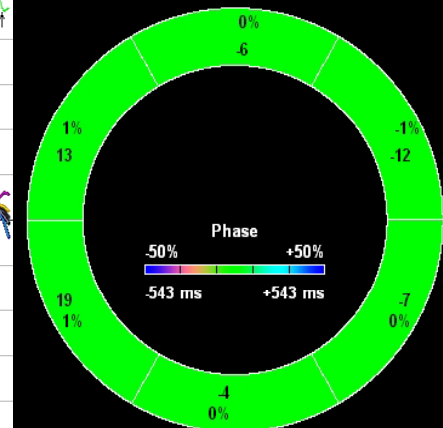
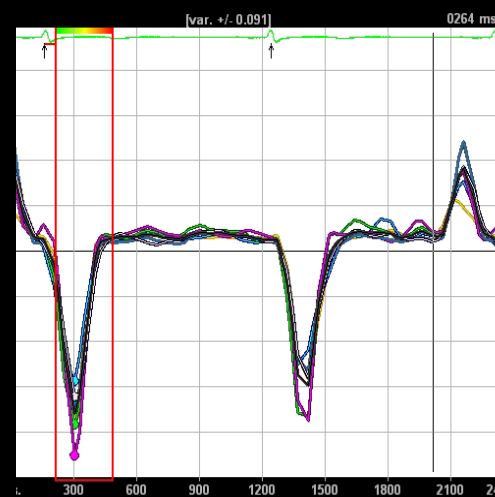
# Regional Mechanics by VVI

- The software divides arterial wall into 6 segments automatically

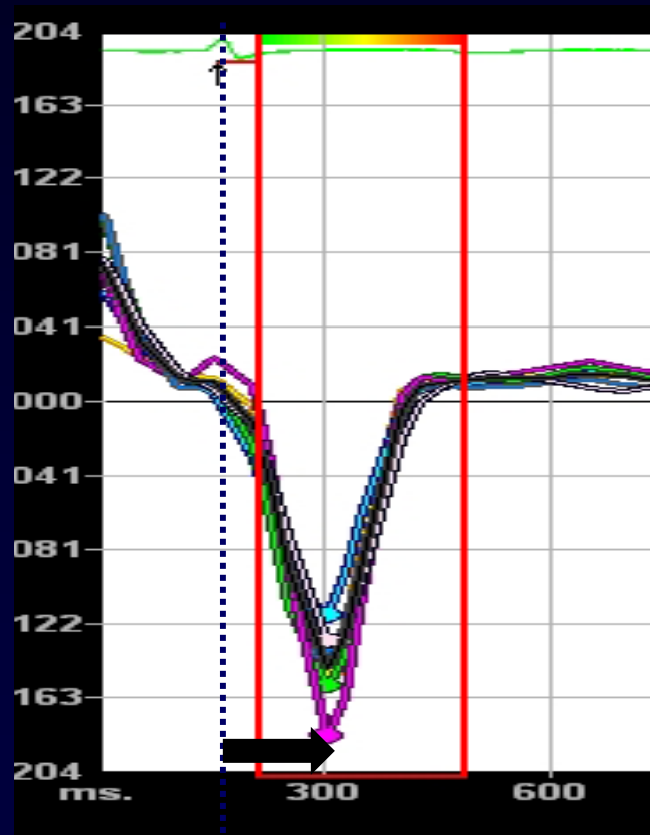
## Takayasu's arteritis



## Healthy control



# Parameters Assessed by VVI

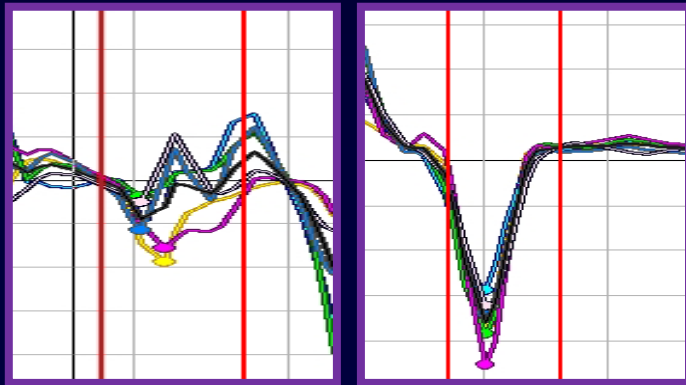


Time to peak radial velocity

- Pv : peak radial velocity
- Ps : peak circ. strain
- Psr : peak circ. strain rate
- Pd : peak radial displacement
- Tv : time to Pv
- Ts : time to Ps
- Tsr : time to Psr
- Tv : time to Pd

# Dyssynchronous Motion

- **Tv-SD** : standard deviation of Tv
- **Ts-SD** : standard deviation of Ts
- **Tsr-SD** : standard deviation of Tsr
- **Td-SD** : standard deviation of Td



# Clinical Characteristics

	TA (n=12)	Controls (n=12)	P value
Age (year)	38±10	38±10	0.977
Female (%)	11(91.7)	11(91.7)	0.999
SBP (mm Hg)	120±17	118±11	0.315
DBP (mm Hg)	73±9	74±8	0.606
HR (/min)	73±8	71±9	0.898
BMI (kg/m <sup>2</sup> )	22.0±2.7	20.7±1.7	0.590

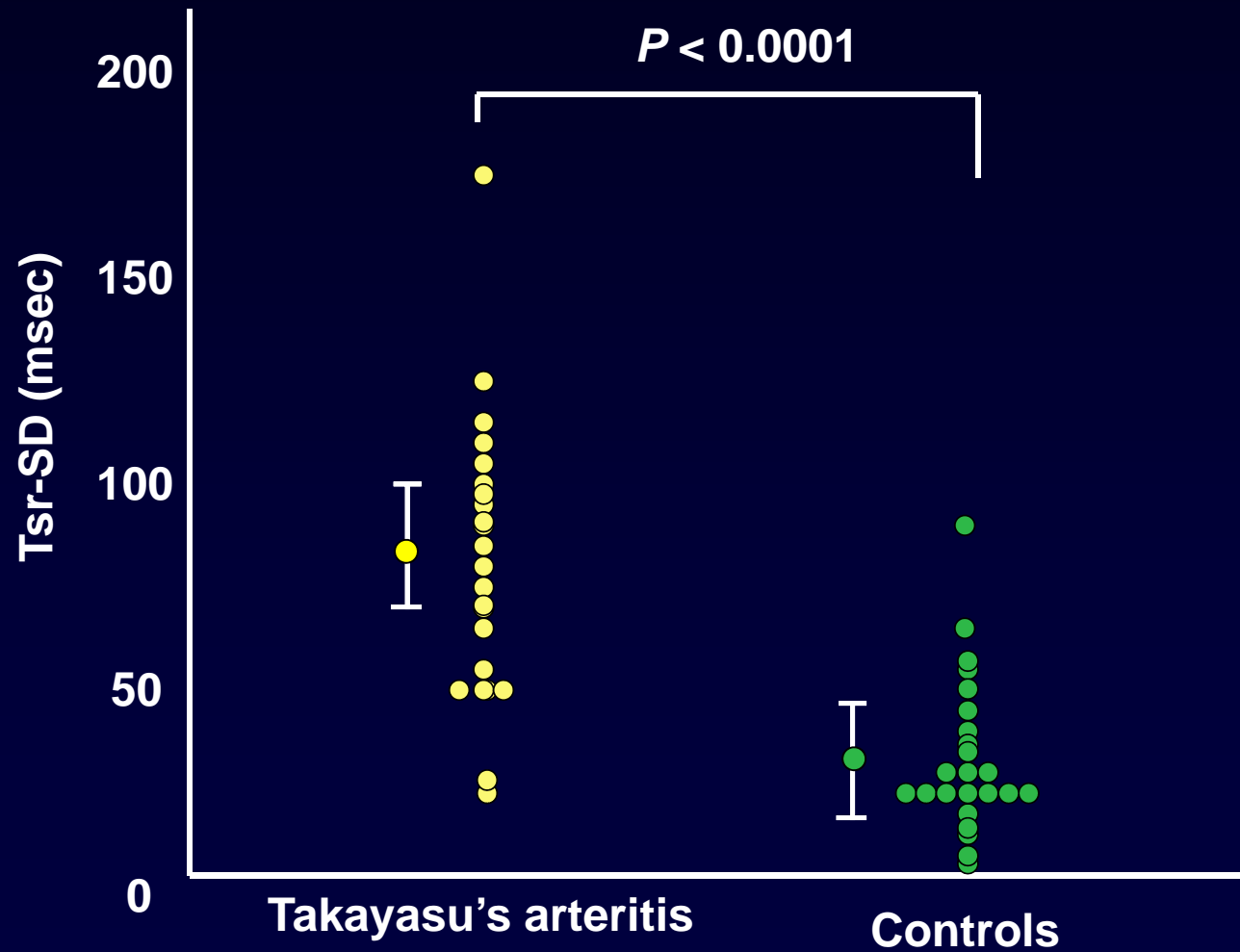
# Carotid IMT, Diameter & Strain

	TA	Controls	P value
Number of examined carotid arteries	23	24	
IMT(mm)	1.16±0.48	0.46±0.07	< 0.0001
Internal diameter (mm)	4.24±2.07	5.93±0.64	0.001
External diameter (mm)	6.41±1.55	6.70±0.72	0.415
Luminal stenosis (%)	37±22	12±2	< 0.0001
Luminal strain (%)	4.16±4.15	8.66±3.34	< 0.0001

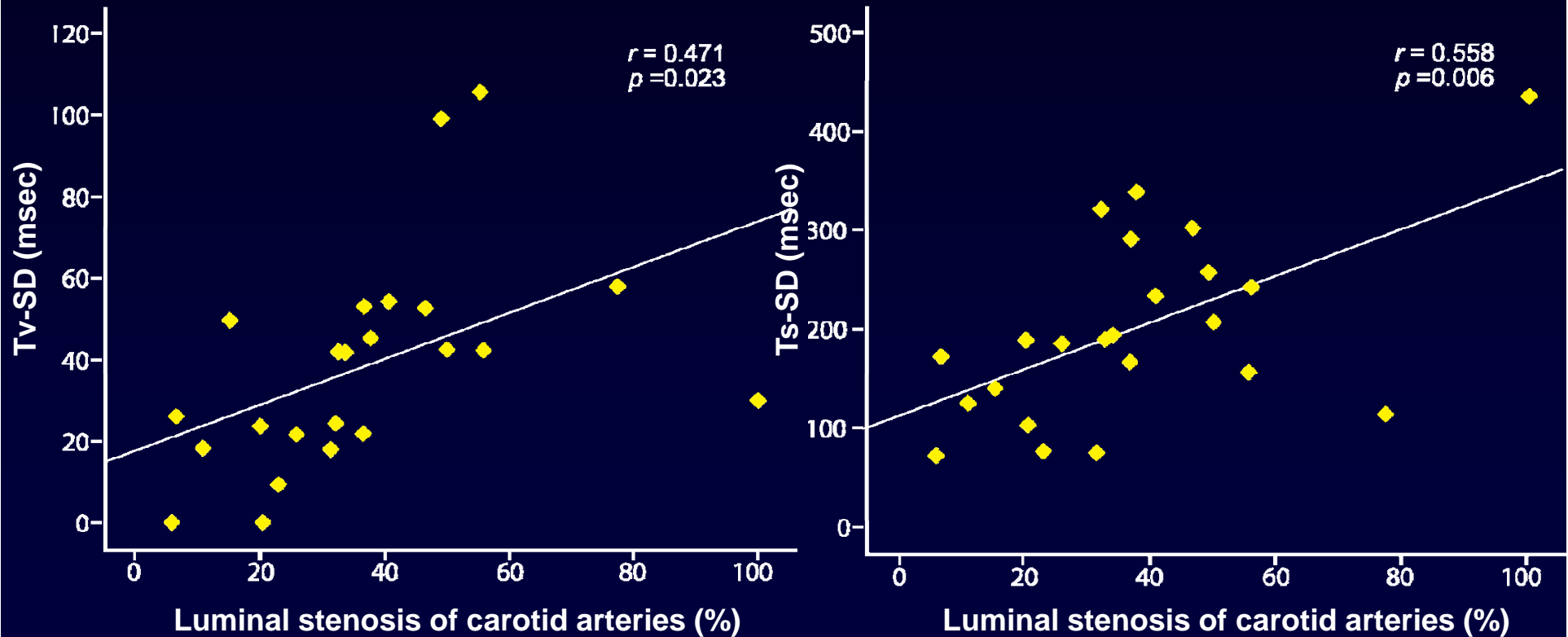
# VVI Parameters

	TA	Controls	P value
<b>Pv (mm/s)</b>	<b>1.17±1.36</b>	<b>1.42±0.59</b>	<b>0.032</b>
<b>Ps (%)</b>	<b>3.58±2.99</b>	<b>4.99±2.05</b>	<b>0.015</b>
<b>Psr (/s)</b>	<b>0.23±0.18</b>	<b>0.39±0.18</b>	<b>0.004</b>
<b>Pd (mm)</b>	<b>0.15±0.06</b>	<b>0.31±0.20</b>	<b>0.007</b>
<b>Tv-SD (msec)</b>	<b>38.2±26.4</b>	<b>13.3±10.0</b>	<b>&lt; 0.0001</b>
<b>Ts-SD (msec)</b>	<b>199.3±93.7</b>	<b>87.1±58.4</b>	<b>&lt; 0.0001</b>
<b>Tsr-SD (msec)</b>	<b>74.9±34.8</b>	<b>28.7±19.4</b>	<b>&lt; 0.0001</b>
<b>Td-SD (msec)</b>	<b>125.4±93.1</b>	<b>41.9±36.4</b>	<b>&lt; 0.0001</b>

# Standard Deviation of Tsr

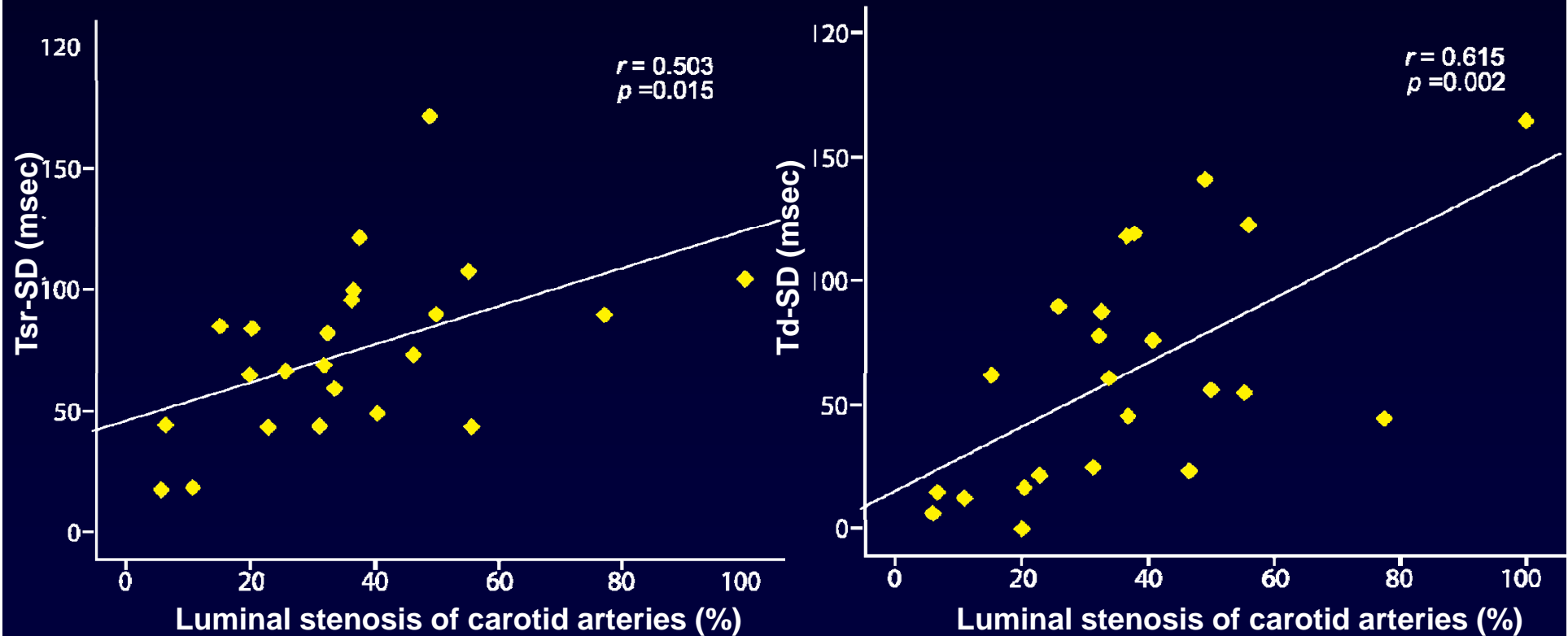


# Dyssynchronous Motion & Stenosis





# Dyssynchronous Motion & Stenosis



# Summary

- **Velocity, strain, strain rate and displacement were decreased significantly in TA.**
- **SDs of Tv, Ts, Tsr and Td of multiple arterial wall segments were higher in TA, suggesting disturbance of symmetric arterial expansion during systole.**
- **The severity of carotid stenosis was positively correlated with SDs of Tv, Ts, Tsr and Td.**

# Limitations

- **Small number of the patient population, reflecting the rarity of TA**
- **Two-dimensional speckle tracking algorithms used in VVI are dependent on image quality and intima-media complex border definition**
- **Application of VVI for arterial wall has not been validated**

# Conclusion

- In patients with TA, carotid artery showed dyssynchronous arterial expansion during systole when compared with healthy controls.
- Arterial assessment using VVI may represent a new noninvasive method for quantifying vascular alteration associated with arteritis.

**Thank you for your attention.**

