

Does T1 ρ Measure Proteoglycan Concentration in Cartilage?

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To the Editor:

In their recent review, Zibetti et al. provide a comprehensive and insightful overview of various quantitative MRI methods for cartilage assessment.¹ While we fully endorse the authors' perspective that T1 ρ mapping has proven its value as a noninvasive tool for assessing the structural integrity of the extracellular matrix, we wish to address a point of concern regarding the narrative of T1 ρ as an indirect measure of glycosaminoglycan (GAG) content in cartilage.

Despite acknowledging that T1 ρ is not exclusively specific to GAG, in Table 1 of the review, the authors refer to T1 ρ as a measure for GAG and explicitly state that an increase in T1 ρ should be interpreted as indicative of GAG loss. However, it is important to recognize that variations in T1 ρ values can also reflect changes in other tissue components, including anisotropy of the collagen structure. The GAG-specific interpretation derives from seminal studies

in which changes in T1 ρ were correlated to trypsin-induced GAG depletion.^{2,3} Nevertheless, trypsin is known to be nonspecific for GAG, and these studies neglected its potential impact on other biochemical components, such as alterations in content and structure of collagen, which led to an overemphasis of GAG-related changes.

T1 ρ is sensitive to low-frequency macromolecular interactions, of the order of the spin-lock amplitude, and it has been speculated that the exchange of protons between hydroxyl and amide groups of the GAG chains and interstitial water might be the primary relaxation mechanism affecting T1 ρ in cartilage. However, currently there is no evidence supporting exclusive attenuation of dipolar relaxation by spin-lock, while preserving the contribution of chemical exchange to the overall T1 ρ relaxation in cartilage. Indeed, there is substantial evidence supporting the correlation of T1 ρ with GAG loss. However, this correlation varies with the amplitude and type of spin-lock pulse, and T1 ρ relaxation is also influenced by changes in water content and collagen composition and structure.^{3–6} Some literature suggests a lack of correlation between T1 ρ and GAG,⁷ a study missing from the review in question.

The most commonly used T1 ρ measurements (low spin-lock amplitude and continuous-wave preparation) demonstrate significant collagen-related anisotropy in cartilage, even higher than 50%, as demonstrated both at 3T and 9.4T.^{6,8} T1 ρ maps reveal typical

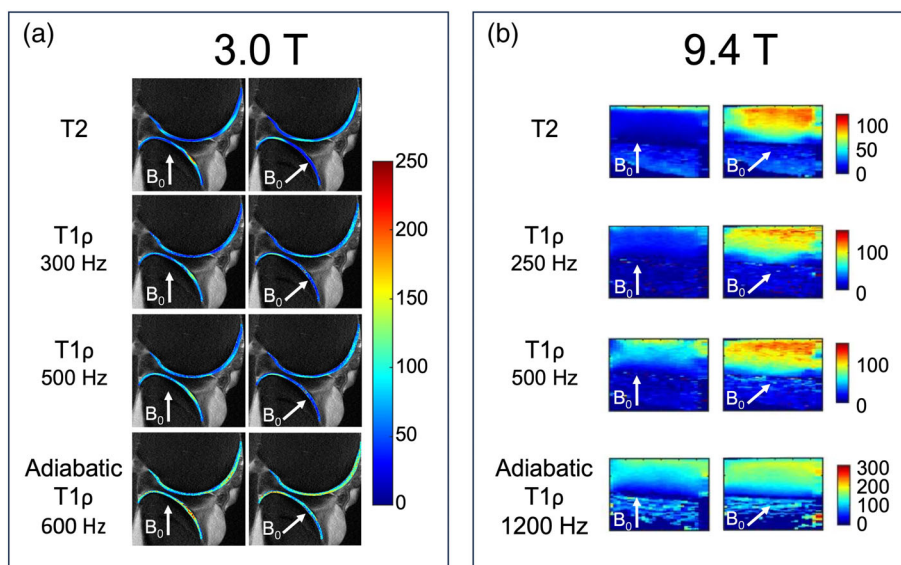


FIGURE 1: T2, T1 ρ , and Adiabatic T1 ρ maps for bovine knee cartilage measured ex vivo at 3.0 T (a), and a specimen measured at 9.4 T (b) at an orientation perpendicular to the main magnetic field and at the magic angle. Using continuous wave preparation and spin-lock amplitudes typically used in clinical studies (≤ 500 Hz), T1 ρ maps clearly display a strong orientation dependence, resembling T2 maps, although to a lesser extent. T1 ρ maps obtained with adiabatic preparation (trains of HS4 pulses) appear almost orientation independent. (a) Courtesy of Ville Kantola, University of Oulu⁸; (b) adapted under Creative Commons Attribution International License 4.0 from ⁶ <http://creativecommons.org/licenses/by/4.0/>.

laminar appearance and magic angle effect (Figure 1), and have been shown to correlate with T₂.⁹ Thus, the orientation-dependence observed in T_{1ρ} relaxation cannot be explained by chemical composition alone. Since T_{1ρ} approaches T₂ with decreasing spin-lock amplitude and anisotropy of T_{1ρ} decreases with increasing spin-lock amplitude, it is evident that contributions to T_{1ρ} from different relaxation mechanisms vary continuously and include dipolar relaxation.^{6,10}

Attributing T_{1ρ} changes solely to GAG alterations implies a level of specificity that has not been established and could potentially misguide researchers and clinicians. It is advised to include collagen structure and water content as factors influencing T_{1ρ} in Table 1. With this letter, we hope to encourage the community to examine the evidence and attain a more accurate view of the nuanced influences on T_{1ρ}.

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Level of Evidence: 5

Technical Efficacy: Stage 3