

# Parameters which can be “optimized”

- **Functional Contrast** • **3/1 to 5/1**
- **Image signal to noise** • **100/ to 500/1**
- **Hemodynamic Specificity**
- **Image quality** (warping, dropout)
- **Speed**
- **Resolution** • **1mm to 5 mm**
- **Functional image quality** (minimally sensitive to motion, etc.)
- **Brain coverage** • **15 to 30 slices depending on orientation**

# Parameters that can be varied

- **Bo** Hardware
- **RF coils** Pulse sequence parameters
- **Gradient strength and slew rate** Image readout strategy
- **Pulse sequence (GE, SE, IR/ASL...)** Pre-sequence preparation
- **TR (0.5 to 5 sec)**
- **TE (20 to 60 ms)**
- **TI (for ASL techniques: 900 to 1400 ms)**
- **Flip angle (90 if TR  $\rightarrow$  2 sec, otherwise less)**
- **Voxel volume (3 x 3 x 5 mm)**
- **Receiver bandwidth (64 MHz to 500 MHz)**
- **Diffusion weighting (  $b = 50$  to 200)**
- **Multi-shot imaging (1 to 10 shots)**
- **Spiral**
- **EPI**
- **Outer volume saturation**
- **Shimming techniques (linear to higher order) and (manual and auto - localized and whole brain)**

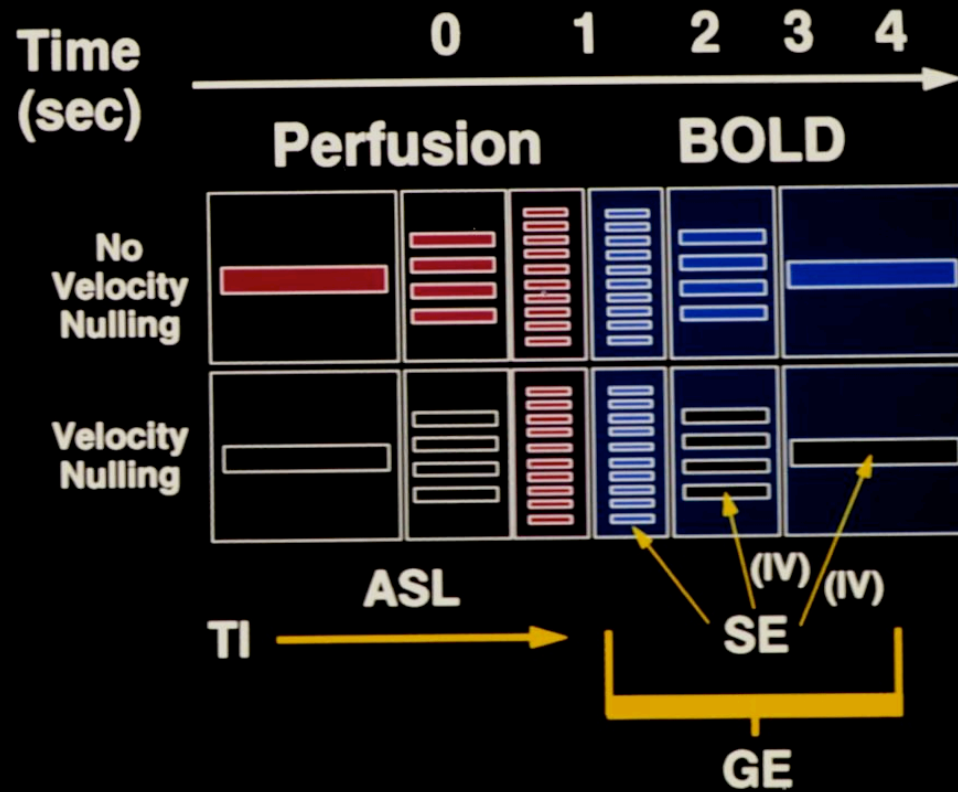
## Functional Contrast to Noise

- Gradient-echo,  $TE \approx T2^*$
- Averaging  $\approx \text{Sqrt}(n)$ 
  - (at least 200 images)
- Local rf coils
- Higher  $B_0$
- Voxel size  $\approx$  functional unit size
  - (1.5 mm to 4 mm)

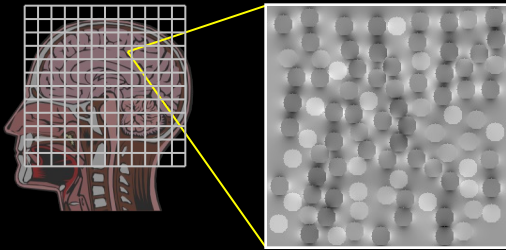
## **Image signal to noise**

- **Averaging  $\approx \text{Sqrt}(n)$**
- **Local rf coils**
- **Higher Bo**
- **Larger voxels**

# Hemodynamic Specificity



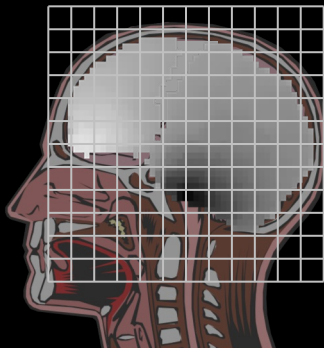
# Image quality (warping, dropout)



Microscopic:

T1, T2, T2\*

BOLD



Macroscopic:

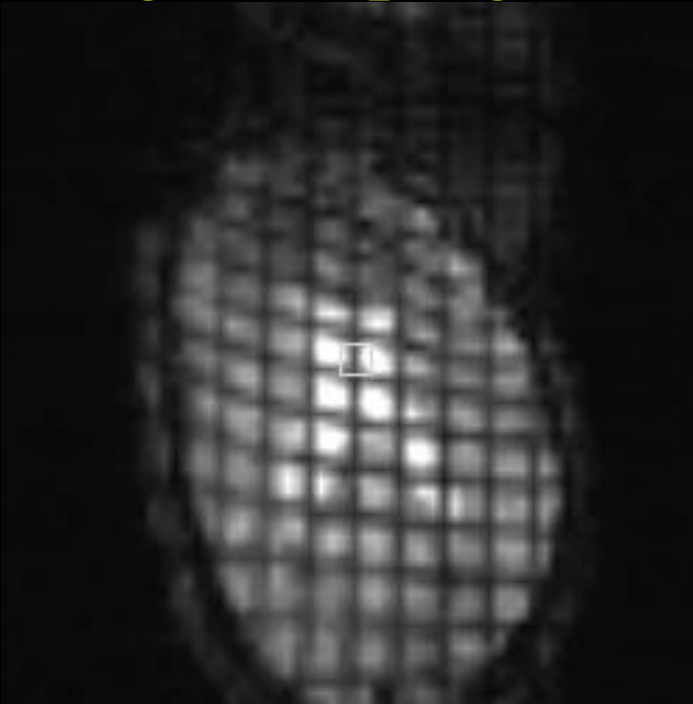
Image warping

Image blurring

**Image quality**

# Effect of $\Delta B$ on EPI images

- Image Warping



Long readout time



More time for  
phase errors  
to accumulate

$$\phi(k) \sim \text{shift}(x)$$

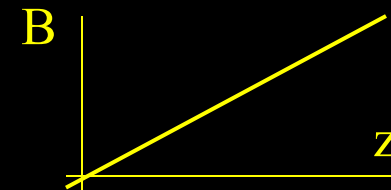
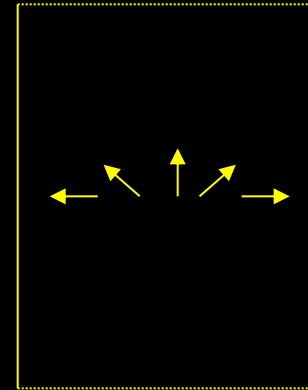
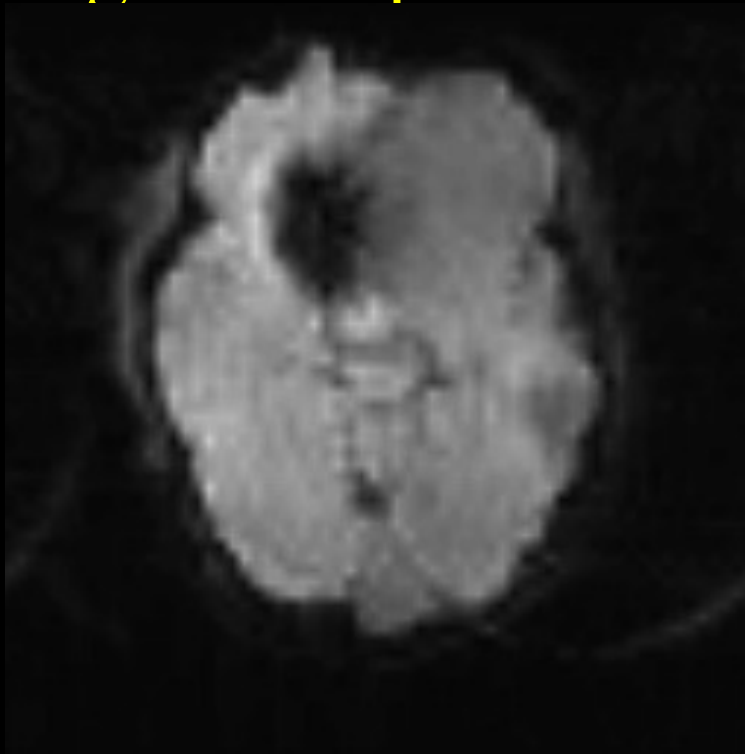
Typical EPI:

22 Hz  $\rightarrow$  1 pixel shift



# Effect of $\Delta B$ on EPI images

- Signal Dropout



Typical EPI:

210 Hz through slice → Complete signal loss

# Image quality

## Warping:

- Shorter readout window  
(bandwidth, gradients, multi-shot)
- Spiral scan
- Shimming
- Bo correction

## Dropout:

- Small voxels  
(bandwidth, gradients, multi-shot)
- Short TE (spiral)
- Spin-echo
- Slice orientation
- Shimming
- Lower Bo

# Speed

- **Single-shot**
- **Gradient-echo**
- **Decreased brain coverage**
- **...gained by increase contrast to noise..**

# Resolution

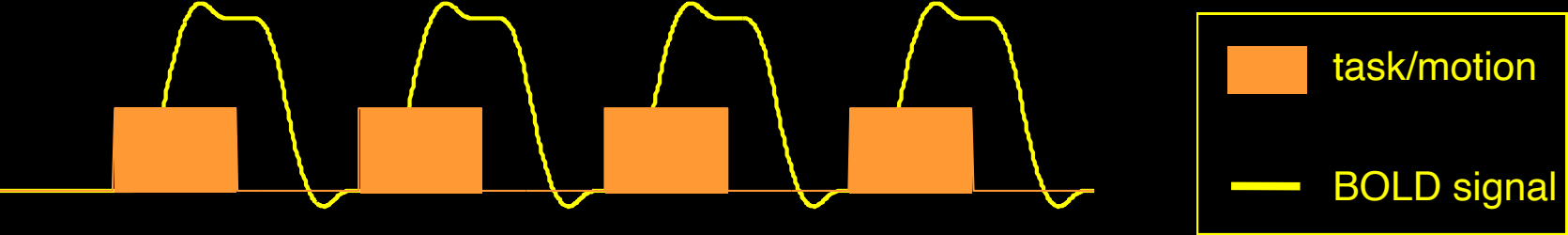
- **Higher Signal/Noise and Contrast/Noise**  
**Averaging  $\approx \text{Sqrt}(n)$**   
**Local rf coils**  
**Higher Bo**
- **Multi-shot imaging**
- **Longer readout window..(to a point)**

# Functional image quality

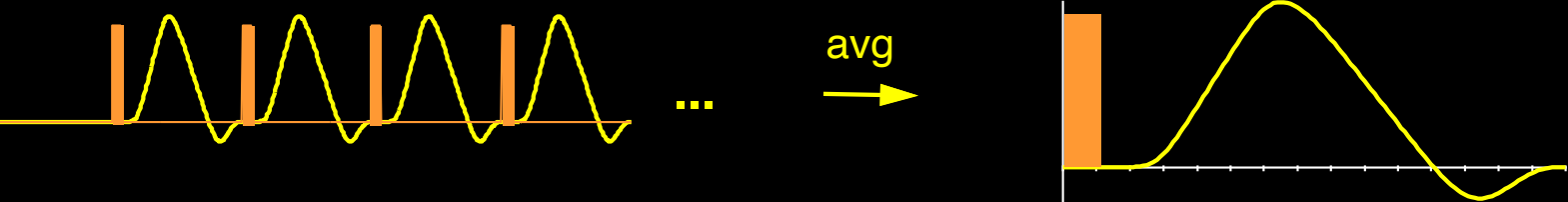
(minimally sensitive to motion, etc..)

- **With multi-shot..**
  - Navigator echo**
  - Spiral**
- **Bo mapping (unwarping)**
- **Flat image contrast**
- **Paradigm timing**
  - (multiple on/off cycles, event-related)**

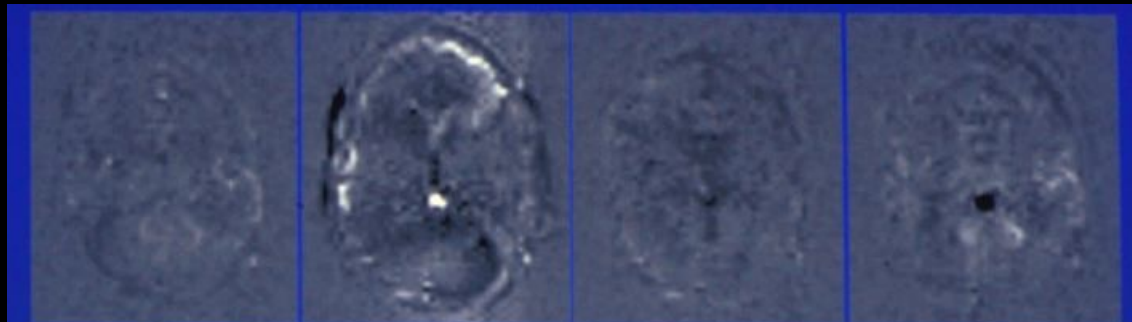
Block-trial



Single-trial (brief stimulus)



# Overt Word Production



2

3

4

5



6

7

8

9



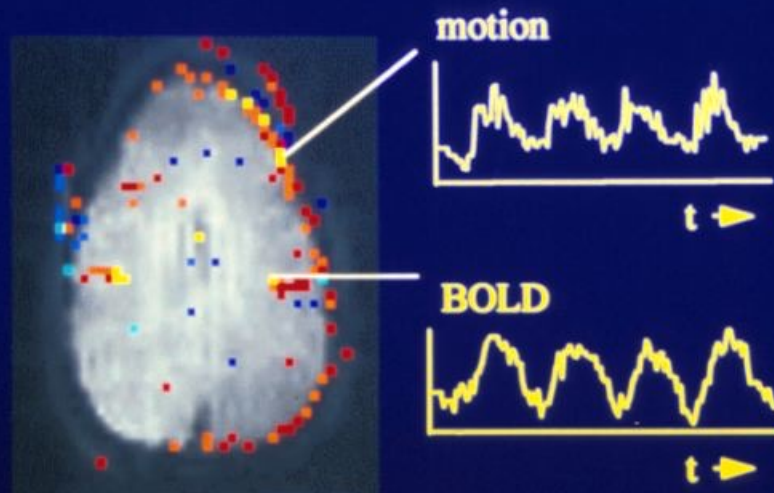
10

11

12

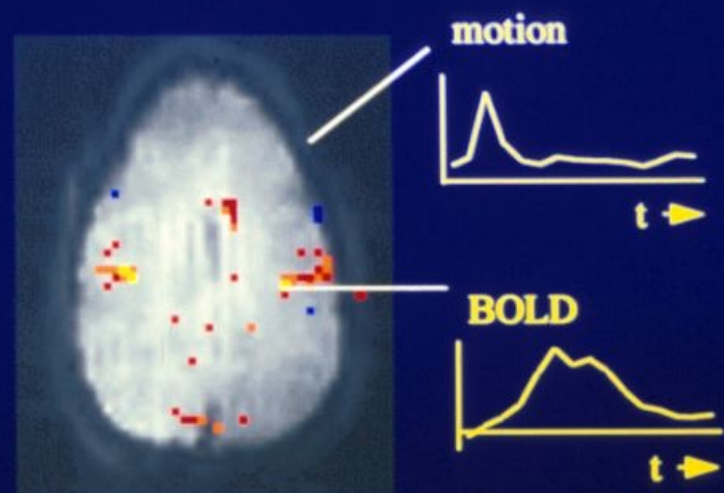
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## Motion-Decoupled fMRI: Functional MRI during of overt word production



### “block-trial” paradigm

Motion induced signal changes resemble functional (BOLD) signal changes



### “single-trial” paradigm

Motion induced and BOLD signal changes are separated in time

*R.M. Birn, et al.*



# Brain coverage

- **BOLD contrast**
- **Single shot**
- **Whole brain rf coil**
- **Minimal dropout at base of brain**
  - **Small voxels**  
(bandwidth, gradients, multi-shot)
  - **Short TE (spiral)**
  - **Spin-echo**
  - **Slice orientation**
  - **Shimming**
  - **Lower Bo**

# example 1

## Whole Brain Imaging

**$\approx 16$  images/sec**

**$\approx 20$  slices per volume**

**$\approx 200$  images per time course**

**$\approx 8$  time courses**

## example 2

### **Imaging Orbital Frontal Activation**

**Smallest voxel dimension in S/I direction  
saggital or coronal slices**

## example 3

### Ocular Dominance Column Mapping

**Multishot imaging**

**Needs one or more:**

**spiral sequence**

**navigator pulses**

**Imaging time per slice increased x #interleaves**

**usually translates into less slices**

**(ie focus is on one area)**

# example 4

## Event - related fMRI

Need to have enough points to sample hemodynamic response function:  
TR at most should be 2 sec.

If  $TR \leq 2$  sec. Is not possible (I.e. whole brain coverage or multishot), then need to make stimulus timing different Multiple of TR. I.e  $TR = 4$  sec,  $ISI = 16.2$  sec. This way, the “effective TR” is 0.2 sec. If  $ISI = 17$  sec, effective  $TR = 1$  sec. When doing this, the overall time course duration needs to be increased.