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## Fast 3D Magnetic Resonance Fingerprinting (MRF) For a Whole Brain Coverage

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### Abstract

**Purpose**—The purpose of this study was to accelerate the acquisition and reconstruction time of 3D Magnetic Resonance Fingerprinting (MRF) scans.

**Methods**—A 3D MRF scan was accelerated by using a single shot spiral trajectory with an undersampling factor of 48 in the x-y plane, and an interleaved sampling pattern with an undersampling factor of 3 through plane. Further acceleration came from reducing the waiting time between neighboring partitions. The reconstruction time was accelerated by applying SVD compression in k-space. Finally, a 3D pre-measured  $B_1$  map was used to correct for the  $B_1$  inhomogeneity.

**Results**—The  $T_1$  and  $T_2$  values of the ISMRM/NIST MRI phantom showed a good agreement with the standard values, with an average concordance correlation coefficient of 0.99 and coefficient of variation of 7% in the repeatability scans. The results from in vivo scans also showed high image quality in both transverse and coronal views.

**Conclusion**—This study applied a fast acquisition scheme for a fully quantitative 3D MRF scan with a total acceleration factor of 144 as compared to the Nyquist rate, such that 3D  $T_1$ ,  $T_2$  and  $M_0$  maps can be acquired with whole brain coverage at clinical resolution in less than 5 minutes.

### Keywords

MR Fingerprinting; 3D;  $T_1$ ;  $T_2$ ; Relaxometry

### Introduction

Magnetic Resonance Fingerprinting (MRF)(1) is an acquisition and processing framework that utilizes a variable acquisition scheme to enable simultaneous quantification of multiple tissue properties, such as  $T_1$  and  $T_2$ . Currently, most MRF implementations and in vivo applications utilize two dimensional (2D) (2–10) and multi-slice acquisitions(11–13). However, in order to achieve higher through plane resolution, and better tissue characterization, extension to a 3D acquisition is desirable.

In general, the two main concerns of a 3D MRF scan are 1) long acquisition time due to the increased number of excitations necessary to acquire the data and 2) signal intensity inhomogeneity across the 3D volume due to excitation profile imperfections and local changes in the  $B_1$  field. Since 3D acquisitions potentially allow a higher acceleration factor and more flexible undersampling schemes as compared to 2D acquisitions, several fast 3D methods have been proposed previously by using non-Cartesian trajectories(14–19), fast sampling schemes(20–22), and incorporating parallel imaging and compressed sensing methods(23–25). Any inhomogeneity in the flip angle can cause errors, which lead to inaccurate  $T_1$  and  $T_2$  results for many quantitative measurements including MRF scans(26–28). The two common ways to correct for the flip angle error are to premeasure the  $B_1$  or flip angle map(3,29,30), or to quantify  $B_1$  at the same time as tissue parameters(28,31,32).

The purpose of this study was to accelerate the 3D MRF scan and to correct for the flip angle error, in order to provide accurate  $T_1$  and  $T_2$  maps of a whole brain scan in a clinically acceptable time. Specifically, this study applied a simple accelerated acquisition scheme similar to k-t BLAST(21) for the 3D MRF scan to allow a total factor of 144 acceleration as compared to the Nyquist rate, so that 3D  $T_1$ ,  $T_2$  and proton density ( $M_0$ ) maps can be acquired from a whole brain with a resolution of  $1.2 \times 1.2 \times 3 \text{ mm}^3$  in less than 5 minutes. In addition, since the 3D MRF scan acquired over 1000 undersampled volumes, a singular value decomposition (SVD) compression(7) was applied in k-space prior to reconstruction to substantially reduce the computing memory and accelerate the post-processing time. To correct for the flip angle error, a 3D slab-selective RF pulse with an optimized excitation profile was used to minimize the excitation profile variation across partitions (or slices in a 3D volume) and a 3D  $B_1$  map that was premeasured using the Bloch-Siegert method(3,29) was used to measure the  $B_1$  inhomogeneity. The  $B_1$  values were then simulated into the dictionary to correct for inaccurate flip angles and improve the accuracy of the resulting  $T_1$  and  $T_2$  values.

## Method

### 3D Acceleration Scheme

The 3D slab-selective MRF with the FISP-based readout(2) was implemented by adding phase encoding lines along  $k_z$  direction from the 2D MRF. As a quick summary of the 2D MRF sequence(1,2), the MRF sequence was designed based on a TrueFISP or FISP sequence, but with randomized flip angles (FA) and repetition times (TR). To capture sufficient temporal information for multi-parametric quantification, 1000 to 3000 time points (or TRs) were acquired and one image was reconstructed at each time point. The resulting signal evolution in each pixel as a function of time was matched to a pre-defined dictionary to obtain multiple tissue properties (such as  $T_1$ ,  $T_2$  and proton density) simultaneously. In this study, the 3D acquisition acquired data along time points in the x-y plane first. After acquired all the time points at a certain phase encoding line in  $k_z$ , the  $k_z$  increased and the same acquisition pattern (FA, TR and spiral trajectories) was repeated. For each time point at each  $k_z$ , a variable density spiral trajectory was used to sample the kx-ky data (note that spiral trajectory was designed to require 48 arms to fully sample the k-space) (2,33). After all sampling was complete, the spiral trajectory in kx-ky (in-plane) and Cartesian phase

encoding in  $k_z$  (through-plane) constitute a stack-of-spiral sampling pattern at each time point. However, in order to preserve the temporal fidelity of the rapidly changing MRF signals, the sampling order of this stack-of-spiral MRF acquisition is different from other time-resolved three-dimensional acquisitions that acquire all  $k_z$  lines for a time point before proceeding to the next time point.

If this data were acquired at the Nyquist rate, the scan duration would be prohibitively long. As shown in previous MRF studies, individual time point can be greatly undersampled to reduce imaging times. Here, the acceleration scheme including both in-plane and through-plane acceleration is proposed. In-plane acceleration was achieved by using a single spiral arm in each time point (or TR) and for each  $k_z$ . To improve spatial-temporal incoherence, a  $7.5^\circ$  ( $360/48$ ) rotation of the trajectory was applied from one time point to the next, such that aliasing artifacts from neighboring time points are different. This yielded an in-plane acceleration factor of 48. Through-plane acceleration was achieved by uniformly undersampling the  $k_z$  lines in an interleaved fashion by a factor of three.

An example of this undersampled 3D MRF acquisition is shown in Figure 1 for a scan using nine  $k_z$  lines. These nine  $k_z$  lines were divided into groups based on the through-plane acceleration factor (in this case there are three groups for the undersampling factor of three). Specifically, in the first repetition, the first  $k_z$  line was acquired at the first time point, then the second  $k_z$  line was acquired at the second time point, then the third  $k_z$  line at third time point, followed by the first  $k_z$  line at the fourth time point, and so on. Additionally, because the rotational angle of the spiral trajectory was repeated in every 48th time point, at the 49<sup>th</sup> time point, instead of acquiring the first  $k_z$  line, the second  $k_z$  line was acquired in group 1. Thus, in addition to shifting the  $k_z$  line by one for each time point, the index of the  $k_z$  line was shifted by one at each multiple of 48 time points. After the  $k_z$  lines at all time points were acquired in the first group, a waiting time with no excitation was applied to allow for the signal recovery, followed by the acquisition of the second group of  $k_z$  lines, starting with the first  $k_z$  line at the first time point again. After all undersampled 3D MRF data were acquired, this resulted in an undersampled, interleaved, stack-of-spirals sampling. This sampling pattern is similar to k-t BLAST and k-t SENSE(21), which was used to shift the aliasing artifacts. The additional benefit of this sampling scheme was that the sampling density of each  $k_z$  line as well as the sampling times of each rotational angle of the spiral trajectory were the same after the entire acquisition.

The scan time is further reduced by shortening the waiting time between neighboring groups. Although traditional relaxometry methods require spins to be fully relaxed before sampling each  $k_z$ , MRF can account for partial relaxation of the spins by simulating the known waiting time between neighboring  $k_z$  lines in the dictionary. This property of MRF provides some inherent acceleration as it allows the minimization of the waiting time between neighboring groups.

## Data Acquisition

All scans were performed in a 3T scanner system (Skyra, Siemens). For both phantom and in vivo studies, a field of view (FOV) of  $300 \times 300 \times 144$  mm<sup>3</sup> with a matrix of  $256 \times 256 \times 48$  and an image resolution of  $1.2 \times 1.2 \times 3$  mm<sup>3</sup> was acquired. Under an acceleration factor of

three, 16 acquisition groups (or repetitions) were acquired. For each group, 1440 time points (30 repetitions of 48 rotation angles) were acquired with an acquisition time of 14 seconds, followed by a 3 second waiting time before the next group, in order to allow for relaxation and to improve signal to noise ratio (SNR). The flip angle and TR patterns are shown in Figure 1(b). An asymmetric 3D slab selective RF pulse with a duration of 2048  $\mu$ s was used for excitation. Adiabatic inversion pulses were added at the first and the 1201<sup>th</sup> time points at each repetition in order to improve sensitivity to  $T_1$ . The total acquisition time was 4.6 minutes.

A 3D  $B_1$  map was acquired separately using the Bloch-Siegert method before each MRF scan(3,29). To accelerate the scan, a  $B_1$  map with a spatial resolution of  $2.3 \times 2.3 \times 3$  mm<sup>3</sup> was first acquired. The  $B_1$  map in each partition was then interpolated to a spatial resolution of  $1.2 \times 1.2$  mm<sup>2</sup> to match the spatial resolution of the tissue maps. The total acquisition time was 1.6 minutes.

The accuracy and repeatability of the 3D MRF scan were first validated using the ISMRM/NIST MRI phantom which has  $T_1$  and  $T_2$  layers, each containing 14 spheres, with  $T_1$  values ranging from 20 ms to 2 seconds and  $T_2$  values ranging from 8 ms to 600 ms(34,35). The phantom was scanned in five consecutive days by both  $B_1$  and 3D MRF scans. The mean and standard deviations of the  $T_1$  values in the  $T_1$  layer as well as  $T_2$  values from the  $T_2$  layer were compared to those values measured by NMR experiment from the physical measurement laboratory at the National Institute of Standards and Technology(34).

The in vivo experiments were performed in five asymptomatic volunteers in an IRB-approved study, including written informed consent before each scan.  $B_1$  measurement and MRF scans were performed at the same 3D location. In the  $T_1$  and  $T_2$  maps from each volunteer, six regions including caudate nucleus, centrum semiovale, middle cerebellar peduncle, putamen, frontal white matter and parietal white matter were selected. The  $T_1$  and  $T_2$  values in each tissue type were first averaged for each volunteer, and then the mean and standard deviation of  $T_1$  and  $T_2$  values among five volunteers were calculated.

### Dictionary Simulation

The dictionary used in the matching algorithm was simulated using the Bloch equations in MATLAB (MathWorks, Natick, MA) and was introduced previously(1). In each TR, signal evolutions due to RF excitation with nominal flip angles, relaxation during TE and TR times, and a  $2\pi$  dephasing at the end of the TR from 200 isochromats was simulated. Since a 3D slab-selective RF pulse with an optimized excitation profile was applied, the RF profile was not simulated in the dictionary. In order to simulate the waiting time, the entire acquisition was simulated twice. At the end of first repetition, relaxation during the waiting time was simulated. The resulting magnetization became the starting magnetization of the second repetition, where the whole acquisition was simulated again. Based on the simulation from a wide range of  $T_1$  and  $T_2$  combinations, the starting magnetization was stable after the second repetition. Each isochromat was simulated independently for the whole sequence before summing over the voxel.

The  $B_1$  values were simulated as an additional dimension of the dictionary, with a range between 0.7 to 1.5 in steps of 0.02. The actual flip angles were calculated as nominal flip angles multiplied by  $B_1$ . For each  $B_1$  value, a total of 12001 signal evolutions, each with 1440 time points, were simulated for a range of possible  $T_1$  values (2 to 100 ms in steps of 2, 120 to 2000 ms in steps of 20, and 2000 to 3000 ms in steps of 40ms) and  $T_2$  values (2 to 130 ms in steps of 2 ms, 140 to 200 ms in steps of 10 ms, 200 to 1000 ms in steps of 20 ms, and 1040 to 2000 in steps of 40 ms). The simulation time was 5.7 minutes for each  $B_1$  value and 3.4 hours for the whole dictionary on a standalone PC.

### Accelerated Post-Processing

Since 1440 undersampled 3D volumes were acquired, which could lead to a large memory requirement and long computing time for both reconstruction and template matching, a singular value decomposition (SVD) compression method(7) was applied to the k-space data prior to the reconstruction. Specifically, the SVD of the full dictionary was first computed, which takes four minutes.

$$D=U\sum V^* \quad [1]$$

The first  $k=25$  of the singular vectors were used to project the raw data and the full dictionary to the SVD space.

$$D \approx U_k \sum_k V_k^* \quad [2]$$

$$Y_k=U_k^*Y \quad [3]$$

$$X_k=G^*Y_k \quad [4]$$

$$D_k=U_k^*D \quad [5]$$

where in equation [2],  $U_k \in \mathbb{C}^{t \times N_k}$  is the first  $N_k$  of the left singular vector of the dictionary,  $t$  is the number of TRs. In equation [3],  $Y \in \mathbb{C}^{t \times M}$  is the sampled k-space data, where  $M = N_{coils} \times N_{samples\_per\_spiral} \times N_{spirals} \times N_{kz}$  and  $Y_k \in \mathbb{C}^{N_k \times M}$  is the compressed k-space data in the SVD space. After projecting the raw data to the SVD space, instead of reconstructing 1440 undersampled 3D volumes, only 25 3D volumes with the compressed k-space data were reconstructed, which substantially reduced the computational effort. Each 3D volume was reconstructed using the GPU-NUFFT toolbox(36) with separately measured spiral

trajectories(37). In equation [4],  $X_k$  is the reconstructed images, with the size of  $25 \times 256 \times 256 \times 48$ , and  $G$  is the NUFFT operator. To correct for  $B_1$  inhomogeneity, the same  $U_k$  as to compress the raw data was also used to project the full dictionary with different  $B_1$  values to the SVD space. In equation [5],  $D \in \mathbb{C}^{N_k \times N_{fl} \times 2 \times N_{B1}}$  is the full dictionary and  $D_k \in \mathbb{C}^{N_k \times N_{fl} \times 2 \times N_{B1}}$  is the compressed dictionary. In this way, pattern recognition could be performed between  $X_k$  and  $D_k$ , which are much smaller than the original full matrix  $X$  and  $D$ . Based on the measured  $B_1$  map, the compressed signal evolution in each pixel was matched to those entries in the compressed dictionary that have the closest  $B_1$  values as measured. The maximum inner-product value from the match gave rise to  $T_1$ ,  $T_2$  and  $M_0$  values. The post-processing time of generating  $B_1$  corrected  $T_1$ ,  $T_2$  and  $M_0$  maps for a matrix size of  $256 \times 256 \times 48$  was 48 minutes in MATLAB (The MathWorks, Inc. Natick, MA).

## Results

Figure 2 shows the accuracy and repeatability results of the 3D MRF scan before and after the  $B_1$  correction, with bi-directional error bars representing the standard deviation of five measurements. Figure 2(a, b) shows the results from all 14 spheres of each layer and Figure 2(c, d) shows the same results but with a reduced  $T_1$  range between 181 to 2038 ms and a reduced  $T_2$  range between 26 to 143 ms, which correspond to the main physiological range of the brain tissues. The linear regression and  $R^2$  of the results before and after the  $B_1$  correction are also listed in each plot. As shown in the figure, although the  $B_1$  correction has little impact on the  $T_1$  results, it greatly improves the accuracy of the  $T_2$  results. After the  $B_1$  correction, MRF results in general are in good agreement with the results from the reference values, with a concordance correlation coefficient (CCC)(38) of 0.99 for both  $T_1$  and  $T_2$ . The MRF scans also demonstrate high repeatability, with an average coefficient of variation (CV) of 6.9% for  $T_1$  and 6.6% for  $T_2$ .

Figure 3 and 4 illustrate the  $T_1$  and  $T_2$  maps in the axial view and coronal view, respectively, from one of the volunteer scans. To illustrate the  $B_1$  effects, Figure 3 shows the  $B_1$  maps, as well as  $T_1$  and  $T_2$  maps before and after  $B_1$  correction. Similar to the phantom results, the  $B_1$  effects are more visible from  $T_2$  maps. Table 1 summarizes the  $T_1$  and  $T_2$  values from six regions of the brain maps. The  $T_1$  and  $T_2$  values along with the size of the regions of interest, as well as the mean  $\pm$  std of the  $T_1$  and  $T_2$  values among the five volunteers are listed. Based on Table 1, the  $T_1$  and  $T_2$  values from each region are relatively consistent among these five healthy volunteers.

## Discussion

In this study, a fast acquisition scheme was applied for a fully quantitative 3D MRF scan in less than 5 minutes of acquisition time, demonstrating  $T_1$ ,  $T_2$  and  $M_0$  maps with  $1.2 \times 1.2 \times 3$  mm<sup>3</sup> resolution and a whole brain coverage. A separate 1.6 minute  $B_1$  measurement scan was performed before the 3D scan. The resulting  $B_1$  map was used to correct for  $B_1$  inhomogeneity effects and improve the accuracy of  $T_1$  and  $T_2$  estimates. In fact, both  $B_1$  and 3D MRF scans can be further accelerated. A fast Bloch-Siegert scan has been proposed to measure the 3D  $B_1$  maps in only 32 seconds(39,40). By incorporating advanced reconstruction methods, substantial reduction of the scan time or/and further improvement of

the spatial resolution can be achieved for 3D MRF scans. For example, by using low rank reconstruction methods(41,42), the scan time of the 3D MRF scan with the same spatial resolution and tissue coverage can be reduced to only 2.7 minutes(43). Optimization of the MRF scan could also lead to a reduction of the scan time(44,45). In addition, method has been proposed to simultaneously quantifying  $B_1$  as well as tissue properties without compromising the scan time(46).

The acceleration of the acquisition was achieved in 3 steps: intrinsic acceleration using short waiting times between neighboring phase encoding lines, in-plane acceleration factor of 48 and through-plane acceleration factor of 3. The in-plane acceleration has been demonstrated previously in 2D MRF scans, which took the advantage of the variable density spiral sampling pattern in order to generate incoherent aliasing artifacts both in each image and through time. The through-plane acceleration was achieved using a uniform undersampling pattern similar to the k-t sampling pattern. This pattern shifted the aliasing artifacts from one time point to the next, in order to create incoherent artifacts through time. This pattern also guaranteed that all 48 rotational angles of the spiral trajectory were used at the same rate (30 times for each spiral angle) and all kz lines were sampled at the same density. For this reason, no density compensation was needed along kz, although density compensation was still needed in the kx-ky plane for the image reconstruction.. In this study, all maps were generated by direct reconstruction and template matching. Advanced reconstruction methods that have been recently proposed for the 2D MRF could be applied in 3D MRF in order to further reduce the acquisition time or improve the image quality(47,48). Other sampling schemes such as variable density sampling can also be applied to the partition direction to potentially improve the sampling efficiency and increase the undersampling factor(49,50).

For a 3D scan with large volume coverage,  $B_1$  variation and its effect on the resulting  $T_1$  and  $T_2$  estimation are not negligible. In this study, the Bloch-Siegert  $B_1$  mapping method was performed separately before each MRF scan, and the resulting  $B_1$  map was used to correct for the  $B_1$  effect. Other approaches to correct for the  $B_1$  effect, such as quantifying  $B_1$  at the same time as  $T_1$  and  $T_2$ , can also be applied(28,31). However, none of these methods has been effectively applied to 3D scans with such a high undersampling ratio. Although a separate scan to measure  $B_1$  takes an additional time, it reduces the sensitivity to potential tissue or system parameters, and thus reduces the amount of information and acquisition time required for the MRF scan. In addition, a prior knowledge of the  $B_1$  map reduces the dimensionality of the dictionary in pattern matching to estimate the tissue properties, which can lower the risk of mismatch and error propagation, especially in the present of strong aliasing artifacts and with low SNR from accelerated scans.

Based on the results obtained from the ISMRM/NIST MRI phantom, the 3D MRF scan shows high accuracy and repeatability as compared to the reference measurement. As described in our previous 2D study(51), we've consistently seen  $T_2$  difference between our results after  $B_1$  correction and literature reported values acquired using fast spin echo methods(2,52,53). Many groups have shown similar  $T_2$  reduction by correcting for stimulated echoes(54), slice profile(27,51), magnetization transfer(55) and finite RF pulse effects(56). The lower  $T_2$  values may also be related to tissue microstructure, intra voxel dephasing(57), and diffusion effect from the spoiling gradients used in the FISP

sequence(58). These effects may also cause the  $T_2$  variation between frontal and parietal white matter regions as shown in Table 1. An exact analysis of this phenomenon is the subject of a future investigation.

In this study, a 3D MRF scheme with the FISP readout was used, which is less sensitive to the  $B_0$  inhomogeneity for large volume coverage. Therefore, this 3D MRF scheme has the potential to be used in other parts of the body. In addition, with a large flexibility on the MRF sequence design, navigation and magnetization preparation can be added to the sequence to make the 3D MRF scan robust to different applications.

## Conclusions

A fast acquisition scheme for a 3D MRF scan with a whole brain coverage was presented. 3D  $T_1$ ,  $T_2$  and  $M_0$  maps with a spatial resolution of  $1.2 \times 1.2 \times 3 \text{ mm}^3$  can be generated in 4.6 minutes. An additional 1.6 minute  $B_1$  scan was used to reduce the system and subject related variations, and thus improve the accuracy of quantitative estimates. Given that this FISP-based sequence is also insensitive to the  $B_0$  inhomogeneity, the proposed MRF scan could have wide and robust clinical applications.

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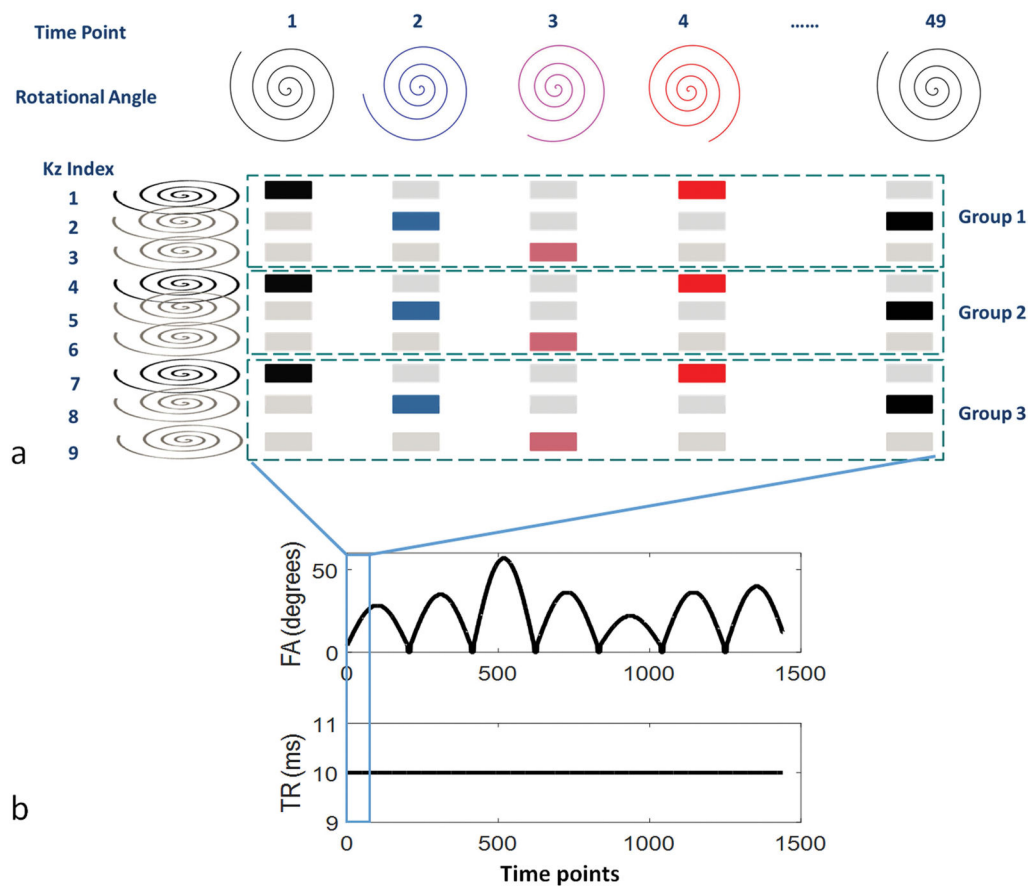
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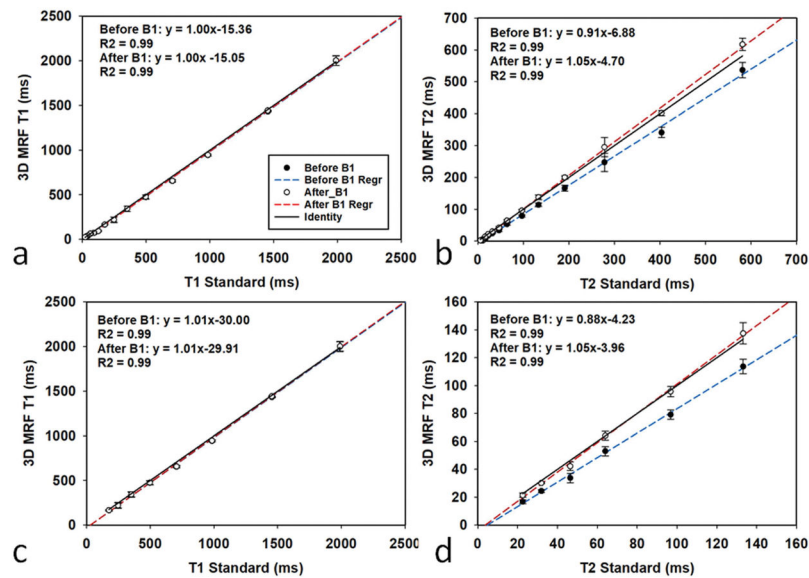
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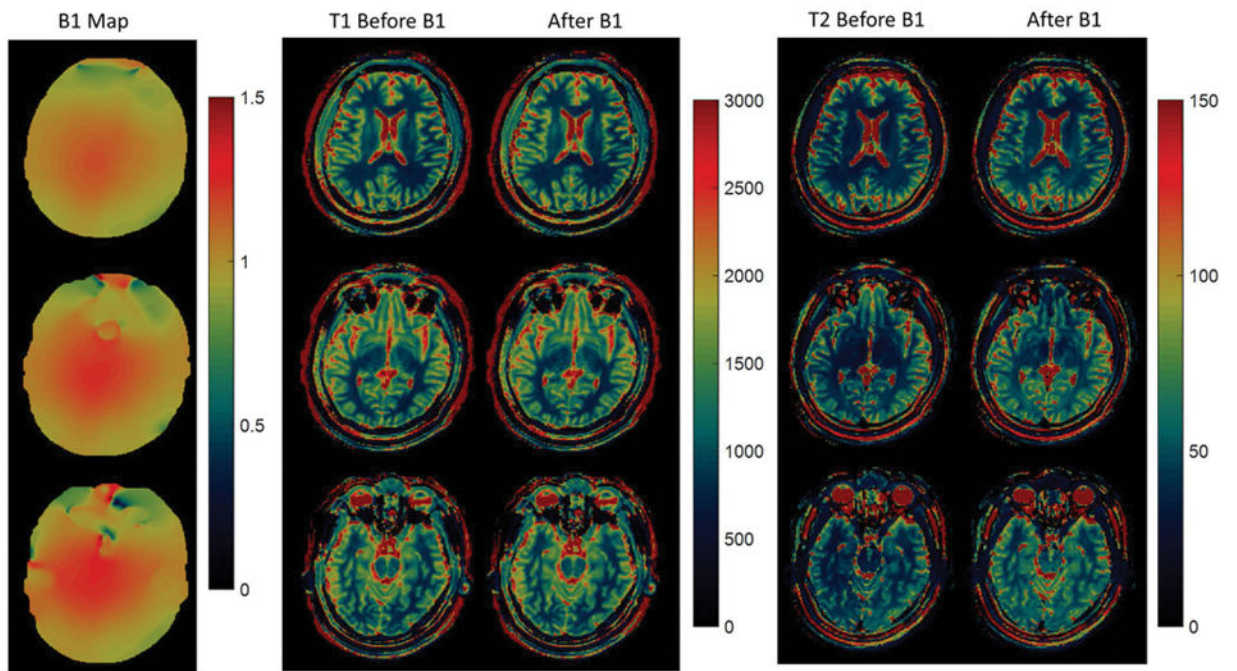


**Figure 1.** Undersampling scheme (a), flip angle pattern and TR pattern (b) of the 3D MRF scan. In (a), the sampling scheme of a 3D MRF scan with nine partitions is illustrated. The acquisition starts with the time domain first. Along the time points, the rotational angles of the spiral trajectories are changed with a step of 7.5 degrees. With an acceleration factor of three, nine partitions are divided into three groups or repetitions. The colored k<sub>z</sub> lines are the ones that are acquired in the accelerated scan while the gray k<sub>z</sub> lines are the ones that are skipped.

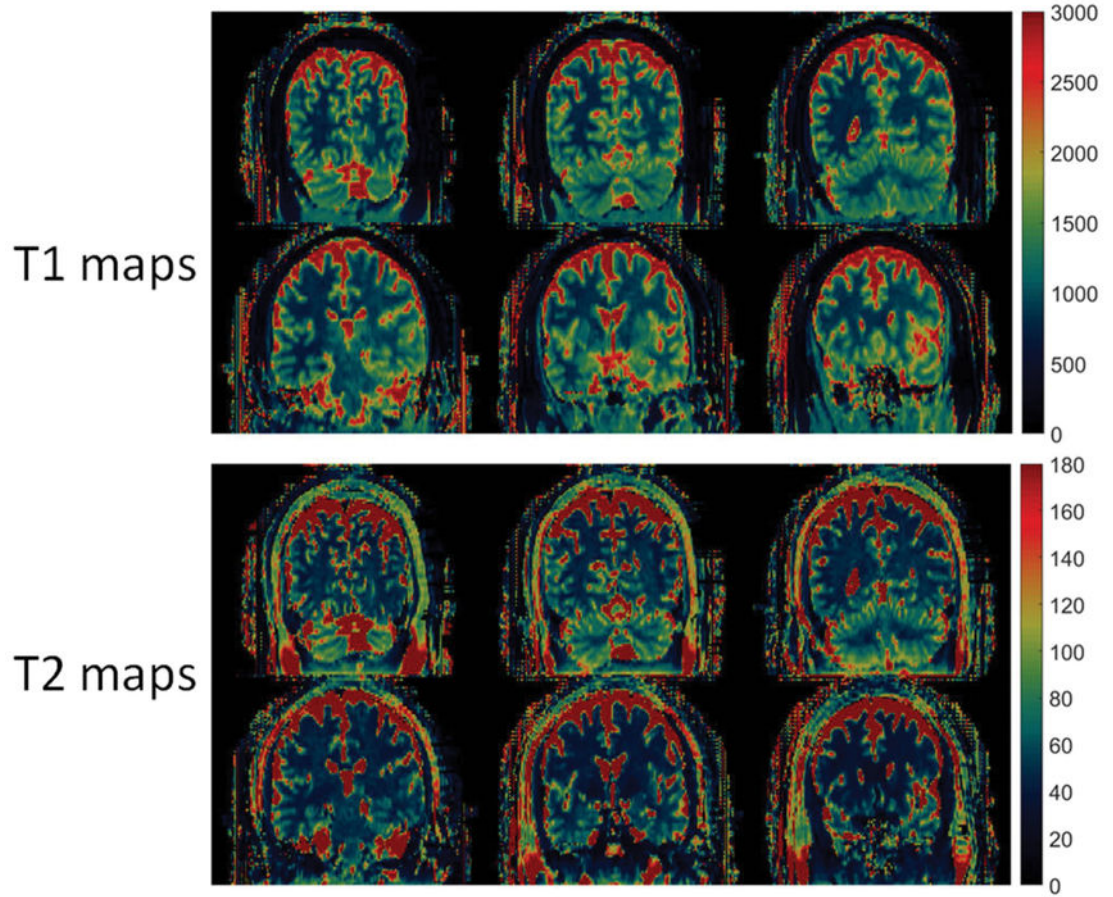


**Figure 2.**

The accuracy and repeatability of the qMRI phantom scan. (a, b) T1 values and T2 values from 14 spheres from the ISMRM/NIST phantom are compared to the values from the spin echo (SE) measurement. (c, d) The same results but with a reduced T1 range between 181 to 2038 ms and a reduced T2 range between 26 to 143 ms. The blue line and red line in each plot are the linear regression results before and after B1 correction, respectively.



**Figure 3.**  
B1, T1 and T2 maps from a 3D in vivo scan in axial view.



**Figure 4.** 3D T1 (ms) and T2 (ms) maps from an *in vivo* scan in Coronal view.

In vivo T1 and T2 values along with the size of the regions of interest from five volunteers scanned from a 3T scanner. (units: ms)

**Table 1**

		v1	v2	v3	v4	v5	mean±std
Caudate Nucleus	T1	1397.2	1493.5	1293.5	1397.9	1368.9	1390.2±71.7
	T2	42.1	38.9	53.4	40.9	44.7	44.0±5.6
	ROI	38	27	17	23	24	
Centrum semiovale	T1	875.9	866.6	823.1	863.1	866.4	859.0±20.6
	T2	39.7	33.6	40.3	34.4	41.2	37.8±3.5
	ROI	108	102	145	149	207	
Middle Cerebellar Peduncle	T1	874.7	942.5	906.1	918.9	881.5	904.7±27.7
	T2	52.7	38.7	25.7	37.8	49.0	40.8
	ROI	72	54	47	75	87	
Putamen	T1	1285.9	1314.0	1169.5	1238.4	1234.3	1248.5±55.3
	T2	40.7	36.9	43.0	38.6	39.1	39.7±2.3
	ROI	37	52	24	32	55	
Frontal_wm	T1	843.1	854.3	794.8	809.1	818.1	823.9±24.5
	T2	30.8	29.1	42.6	35.1	35.6	34.6±5.3
	ROI	51	68	61	78	85	
Parietal_wm	T1	783.3	817.9	904.5	793.7	781.2	816.1±51.5
	T2	46.8	37.7	36.8	36.1	43.1	40.1±4.6
	ROI	79	85	45	31	100	