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## CEST imaging of creatine, phosphocreatine, and protein arginine residue in tissues

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### Abstract

Chemical exchange saturation transfer (CEST) MRI has become a promising technique to assay target proteins and metabolites through their exchangeable protons, noninvasively. The ubiquity of Creatine (Cr) and Phosphocreatine (PCr) due to their pivotal roles in energy homeostasis through the creatine phosphate pathway has made them prime targets for CEST in the diagnosis and monitoring of disease pathologies particularly in tissues heavily dependent on the maintenance of rich energy reserves. Guanidinium CEST from protein arginine residues, i.e. arginine CEST, can also provide information about the protein profile in tissue. However, numerous obfuscating factors stand as obstacles to the specificity of Arginine, Creatine and Phosphocreatine imaging through CEST such as semi-solid magnetization transfer (MT), fast chemical exchanges such as primary amines, and the effects of nuclear Overhauser enhancement (NOE) from aromatic and amide protons.

In this review, the specific exchange properties of protein Arginine residues, Cr and PCr along with their validation are discussed including the considerations necessary to target and tune their signal effects through CEST imaging. Additionally, strategies that have been employed to enhance the specificity of these exchanges in CEST imaging are described along with how they have opened up possible applications of protein Arginine residues, Cr and PCr CEST imaging in the study and diagnosis of pathology. A clear understanding of the capabilities and caveats of using CEST to image these vital metabolites and mitigation strategies is crucial to expanding the possibilities of this promising technology.

### Keywords

Chemical Exchange Saturation Transfer (CEST); Creatine (Cr); Phosphocreatine (PCr); Arginine (Arg); Guanidinium (Guan); Magnetization Transfer

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## Introduction

Chemical exchange saturation transfer (CEST) MRI is a versatile technique that can significantly enhance the sensitivity of detecting low concentrations of proteins and metabolites through their exchangeable protons (1–8). Since the first discovery of the CEST phenomenon about two decades ago (9), this technique has been successfully applied to detect pathological chemical changes in many neurological and oncological diseases (10–21), as well as various metabolites in tissues (22–26). However, tissue contains many types of exchangeable protons with a diversity of exchanging rates on both sides of the Z-spectrum, such as the amide proton (10,27) in mobile proteins, amine protons from glutamate (Glu) at 3 ppm (14,24,25,28), amine protons from the lysine residues of proteins at 2.7–2.8 ppm, (24,29–32), guanidinium (Guan) protons from protein and creatine at 2 ppm, (16,33–38) the hydroxyl groups from proteins and myoinositol around 1 ppm (38–40), and the relayed nuclear Overhauser effect (NOE) signals from aliphatic protons in proteins and lipids between –4 and 0 ppm (23,39,41,42). The diversity of exchanging protons provides great opportunities for in vivo CEST applications, but also poses great challenges in extracting specific proton information. Among many endogenous CEST contrasts, amide protons (APT or amideCEST) (10,27) in mobile proteins with slow exchange rates of  $<100 \text{ s}^{-1}$  (43,44) have been intensively studied due to their favorable properties, including high concentrations and large chemical shifts (3.5 ppm). These properties make the extraction of the amide proton group possible from the in vivo Z-spectrum by making use of its line-shapes. (37,45) Here, amideCEST indicates the CEST peak at 3.5 ppm to distinguish from APT which is usually obtained by asymmetry analysis at 3.5 ppm. Recently, guanidinium CEST from mobile protein and Creatine (Cr) were discovered and have drawn much attention (33–35,46). GuanCEST was initially studied in Cr molecules by Phillip Sun et. al. (47,48) and Mohammad Haris et. al.(46) In the initial Cr CEST study, the phantom pH was adjusted to slow down the exchange rate for use in amideCEST optimization (47,48). Recently, it was discovered that GuanCEST is also widely available in many kinds of proteins and brain Z-spectra at 2 ppm, which overlap with CrCEST and phosphocreatine (PCr) CEST signals.(33–37) In order to distinguish GuanCEST between proteins and Cr, the CEST peak at 2 ppm from Cr is referred to as CrCEST, while ArgCEST is used for protein GuanCEST since only Arg residues contain Guan groups in proteins. Although free Arg amino acids can contribute to the GuanCEST, this contribution is usually negligible due to the extremely low concentration of free Arg amino acids in tissues ( $<1 \text{ mM}$ ) compared to the Arg residues in the mobile proteins.(49) In PCr, the Guan group is phosphorylated and is separated to two peaks, i.e. PCrCEST (2.5 ppm) and PCrCEST(2 ppm). Similar to AmideCEST, PCrCEST also have relatively large chemical shifts (2 ppm and 2.5 ppm) and slow exchange rates ( $<200 \text{ s}^{-1}$ ), which leads to two distinguishable peaks at 2 or 2.5 ppm at high magnetic fields. Therefore, ArgCEST, CrCEST together with PCrCEST are the few CEST contrasts that can be extracted with high confidence from the crowded in vivo Z-spectrum. At 2 ppm, there are other CEST and NOE contrasts such as aromaticNOE, amineCEST and even hydroxylCEST. In the current review, we aim to summarize the components that include Guan or phosphorylated Guan groups comprising ArgCEST, CrCEST and PCrCEST. Other CEST/NOE components at 2 ppm are difficult to extract due to their broad line-shape and are not the topic of the current review. We will summarize the

validation of the ArgCEST, CrCEST and PCrCEST signals, as well as their acquisition and quantification. Finally, we will show some applications of ArgCEST, CrCEST and PCrCEST in assessing tumors, monitoring pH changes and Cr/PCr concentrations.

## CrCEST, PCrCEST and ArgCEST signal validation

### Phantom validation

As the first step of CEST experiments, the validation of CEST signals with phantoms can provide information about the chemical shifts and exchange rates of exchanging protons. CrCEST in phantoms was initially used for APT optimization at 3T. (47,48) Then, the feasibility of detecting PCr and Cr with CEST experiments was demonstrated on phantoms at both 9.4 T and 3 T. (46) In this study, it was confirmed that the Guan protons in Cr result in one single peak centered at 1.8 ppm with an exchange rate of  $950 \text{ s}^{-1}$ . The two amine groups in Guan are symmetric due to delocalization of the electron bonds due to resonance. As a result, the labile protons have the same chemical shift and are indistinguishable meaning they are modeled as a single exchange rate. The CrCEST at 3T MRI are plotted in Fig. 1a together with its molecular structure. CrCEST is in the intermediate exchange rate region at physical temperature  $37^\circ\text{C}$  for 3T and convalesce with water to form one broad peak. Therefore, it is very challenging to extract clean CrCEST signals at 3T for in vivo application. However, the CrCEST is a distinct single peak at high MRI fields as shown in Fig. 1d. A more detailed Cr exchange rate measurement was performed with water-exchange (WEX)-filtered  $^1\text{H}$  NMR spectroscopy and found to be  $1190 \text{ s}^{-1}$  at  $37^\circ\text{C}$  and pH 7.0. (50) The Cr exchange rates are strongly pH dependent. When pH decreased by 0.3 to 6.7, the exchange rate of Cr changes to  $597 \text{ s}^{-1}$ . In the same study, the deprotonation of the guanidinium group is also examined and found to be nearly zero, i.e. the average number  $n = (3.92 \pm 0.33)$  is close to 4 for the exchanging guanidinium protons per Cr molecule that contribute to the exchange process.

PCr contains two peaks resonating at 2.5 ppm and 1.8 ppm at 3T as shown in Fig. 1b. The exchange rates were found to be  $140 \pm 60 \text{ s}^{-1}$  (2.5 ppm) and  $120 \pm 50 \text{ s}^{-1}$  (1.8 ppm) at  $37^\circ\text{C}$  and pH 7.0 in the original paper. (46) In one recent paper, the exchange rates were determined with a selective saturation recovery method and found to be  $120 \pm 20 \text{ s}^{-1}$  (2.5 ppm) and  $78.7 \pm 10 \text{ s}^{-1}$  (1.8 ppm) at  $37^\circ\text{C}$  and pH 7.0. (51) Similar to CrCEST, the exchange rates of PCrCEST are also strongly pH dependent. The exchange rates decreased to  $67 \text{ s}^{-1}$  (2.5 ppm) and  $46 \text{ s}^{-1}$  (1.8 ppm) at pH 6.7. The sensitivity of CrCEST is far higher than the amide protons of PCrCEST due to the higher proton number (4:2) and exchange rates ( $950 \text{ s}^{-1} : 120 \text{ s}^{-1}$ ). In one comparison study on muscle at 11.7T MRI, the SNR gain using CEST is about 14.8 times higher than the proton MRS method for Cr, whereas for PCr it is about 2.4 times higher.(52) Therefore, many in vivo studies following the discovery of PCr and Cr CEST mainly focused on CrCEST.(53,54) However, CrCEST convalesces with water at 3T, which makes the extraction and quantification of CrCEST at low field very challenging. Recently, it was discovered that PCrCEST(2.5 ppm) is still individually distinguishable at 3T, which may be able to provide reliable quantitation of PCr. (51) In vivo PCr/Cr CEST will be further discussed in the following sections.

Proteins and peptides contain a diversity of exchanging protons in their side chains beside the backbone amide protons. Particularly Arg side chains have one guanidinium group, which overlap with Cr and PCr CEST signals. This is clearly demonstrated with the arginine-rich protein protamine (Fig. 1c).(33,55) A strong ArgCEST peak can be found at 2 ppm for the protamine Z-spectrum. When a saturation power of  $<1 \mu\text{T}$  is used, relatively faster exchanges like CrCEST signal will be inversely proportional to pH value, (56,57) which is different from slower exchange CEST contrasts. This type of inverse pH dependence has also been found in CEST imaging parameters targeting GluCEST (24) and mobile proteins (14), in which the range of exchange rates of interest (such as from  $1200 \text{ s}^{-1}$  to  $500 \text{ s}^{-1}$ ) is faster than the Rabi frequency of the saturation pulses used (e.g.,  $400 \text{ rad/s}$  for a  $1.5 \mu\text{T}$  pulse).(33) ArgCEST is also commonly observable in many other proteins such as egg white (Figs. 1d and e). (34,37) In some early studies, GuanCEST sometime was considered CEST from amine protons, similar to the primary amine of glutamine and protein lysine residues, i.e. AmineCEST.(16,58) However, the center of AmineCEST of protein lysine residues is located at 2.7 ppm as revealed by the study on ischemic stroke (29,30) and egg white phantoms (57), while GluCEST is around 3 ppm. Also, because the linewidth of a CEST peak is approximately  $\sqrt{\omega_1^2 + k_{ex}^2}$  (59), amineCEST has a broad lineshape and is only visible as one broad disguisable peak at low pH values at high fields.(14,60) Therefore, the sharp 2 ppm peak in the tissue Z-spectrum collected at high MRI fields is mainly a mixture of ArgCEST from protein and CrCEST as confirmed by the validation study on guanidinoacetate methyltransferase deficient ( $\text{GAMT}^{-/-}$ ) mouse brain (35) and an *ex vivo* study using homogenous rat brain tissue (34). Beside the ArgCEST at 2 ppm, there are also strong amideNOE and aromaticNOE as demonstrated by the deuterium-hydrogen exchanging studies on model proteins (Fig. 1f). (37,61). In these studies, despite all chemical exchanging protons being replaced by deuterium atoms, strong amide and aromatic NOE signal was preserved at the positive offsets.

### Validation of Cr, PCr and ArgCEST signal in tissue

Validation and optimization of the metabolic CEST signal in tissue Z-spectra is critical for its technique development. In the CEST field, however, few validation studies had been performed due to the challenge of varying the concentrations of the metabolite of interest while maintaining physiological conditions and other metabolic concentrations. PCr and Cr concentrations in tissues are stable and cannot be simply altered by intramuscular injection or intravenous infusion due to the Cr regulation by the creatine transporter. Since the discovery of CrCEST, the first *in vivo* validation was performed using different tumor models with different Cr concentrations.(17) The study suggests that the CEST peak at 2 ppm is correlated with Cr concentration, but there is still strong CEST from other components. However, the disadvantage of the method is that many other metabolites and proteins are altered with different tumor models. It is a challenge to quantify the exact contribution of CrCEST at 2 ppm. One *ex vivo* validation method has been proposed using dialysis to remove small molecules from tissue homogenates. (34) The study found there was still a strong signal (34 %) at 2 ppm in the dialyzed rat brain homogenates, i.e. Cr and PCr CEST contribute about 66 % signal at 2 ppm, with a saturation power of  $1 \mu\text{T}$  as shown in Fig. 2a. Caution must be taken since *in vitro* MRI parameters such as  $T_1$  and  $T_2$  relativities are still significantly different from *in vivo* tissue, which may affect

the accuracy of the above conclusion. Recently, one creatine-deficient GAMT knockout ( $\text{GAMT}^{-/-}$ ) mouse model was generated. (35,52,62–64) GAMT is a key enzyme in the biosynthesis of Cr in the pancreas and liver. Without this enzyme, the biosynthesis of Cr will be terminated after the first step, i.e., transfer of the amidino group of arginine to glycine, to yield ornithine and guanidinoacetate (65). Then, the only source of Cr in the tissue of  $\text{GAMT}^{-/-}$  mouse is through food. A creatine free diet was used to insure very low tissue total Cr and PCr concentrations (tCr).(35,52,62–64) Therefore, it is a perfect animal model to validate the specificity and sensitivity of Cr and PCr CEST. (35,52,66) It was found that the tCr contributed about 47% of the total signal at 2 ppm in mouse brain with 1  $\mu\text{T}$  (2s) saturation power (Fig. 2b), which is close to the validation with in vitro rat brain homogenates (66%).(35) The tCr contribution increases as a function of saturation power, such that the tCr is about 80% with 2  $\mu\text{T}$  (2s) saturation power. The same animal model can be also used to validate the PCr and Cr in the muscle and the results are presented in Fig. 2c. (52) Different from the brain, muscles contain a high concentration of PCr (~30 mM) and Cr (~10 mM). (67,68), where CrCEST is mostly observed at ~2 ppm and PCrCEST has been detected at 2 ppm and ~2.5–2.6 ppm. (69–71) Fig. 2c shows the comparison between the Z-spectra of the  $\text{GAMT}^{-/-}$  and wild type (WT) mice with a saturation power of 1  $\mu\text{T}$ . The Z-spectrum of the WT mice showed two clear peaks around 2 ppm and 2.5 ppm, while there was only one sharp peak around 2.2 ppm in the Z-spectrum of the  $\text{GAMT}^{-/-}$  mice due to the high concentration of phosphate guanidinoacetate is present in  $\text{GAMT}^{-/-}$  (62). Different from the brain, there was no visible protein ArgCEST peak in the skeletal muscle Z-spectrum (Fig. 2d), which allowed us to extract clean PCr and Cr CEST signals. PCrCEST was further investigated in animals after euthanasia because rapid dephosphorylation occurs postmortem, i.e. PCr converts to Cr rapidly as demonstrated by porcine (72) and mouse (73) postmortem studies. The Z-spectra of the mouse hindlimb are plotted in Fig. 2e. The PCr peak decreased significantly postmortem, exhibiting an 82.3 % drop (from 2.98 % to 0.52 %), and Cr exhibited a significant increase of approximately 90.6 % postmortem (from 3.86 % to 7.37 %). However, caution must be taken since postmortem studies suffer from the effects of concomitant physiological changes in pH, which affects exchange rates and thus CEST contrast, as well as from changes in concentration of other metabolites (e.g. lactate).

The validation of the ArgCEST signal in the brain Z-spectrum cannot be easily achieved by removing the mobile proteins in tissue similar to PCr/Cr CEST validation. However, we can exploit the property that CEST signals from arginine protons have strongly inverse pH-dependence at low saturation powers, whereas relayed NOEs have weak pH dependence and magnetization transfer contrast (MTC) is insensitive to pH (45,74) in the physiological range. As demonstrated by protein (Figs. 1c and e), the ArgCEST signal is visible with a peak around 2 ppm. However, there is still a large residual signal at 2 ppm that is not pH-dependent over the physiological range of pH 6.0 –7.5 (Fig. 1e). This conclusion is consistent with previous studies with animal stroke models at both high (29,33,45) (Fig. 2f) and low MRI fields (36) (Fig. 2g). Similar to the ArgCEST signal observed in protein phantoms (Figs. 1c and e), the ArgCEST signal was also found to be inversely dependent upon pH in the mouse brain. In addition to this, the background has contributions from NOEs, e.g. amideNOE and aromaticNOE. In order to show all the contributions between 2–2.5ppm in the Z-spectrum, the simulated brain Z-spectrum with GuanCEST, PCrCEST,

amideCEST, hydroxylCEST, amineCEST, amideNOE and aromaticNOE components are plotted in Fig. 3. The parameters used for simulating the Z-spectrum is listed in the Supplemental Materials. In summary, ArgCEST, PCrCEST and Cr CEST only contribute to the two peaks at 2 and 2.5–2.6 ppm in the tissue Z-spectrum. The large portion of this broad background signal between 2 and 2.5 ppm attributes faster exchanging protons from amine and hydroxyl groups, signals of which are partially merged with water due to being in the intermediate to fast exchange regime. Under typical saturation parameters used for slower exchanges (i.e., 0.5 to 2  $\mu\text{T}$ ), this portion of the CEST signal has low sensitivity and weak pH dependence in the physiological range (6–7.5).<sup>(57)</sup> In addition to this, the background between 2–2.5 ppm has contributions from nonCEST saturation transfer components including MTC, amideNOE and aromaticNOE. The NOE signals between 2–2.5 ppm were validated by hydrogen/deuterium (H/D) exchange studies (Fig. 1f).<sup>(37,61)</sup>, and are attributable to aromatic protons, non-exchanging amide protons or amide protons with extremely slow exchange rates, which are still able to transfer magnetization to water following a two-step relayed NOE process with faster exchanging neighboring protons<sup>(42)</sup>.

### Acquisition of in vivo PCr/Cr/Arg CEST

Since the discovery of Cr/PCr CEST, it is generally recognized that Cr/PCr CEST was challenging to separate from other CEST components practically at low MRI fields such as 3T. Hence, acquisition parameters were optimized on phantoms in early CEST studies. However, in tissue CEST, it is known that the MTC effect from macromolecules can significantly alter optimal saturation power and length.<sup>(66)</sup> Recently, the polynomial fitting method was developed to extract Cr/PCr CEST signal from tissue Z-spectrum based on in vivo validation results. It allowed us to optimize the Cr/PCr acquisition parameters on tissue directly. In the following, we will discuss proper selection of saturation power and length for in vivo Arg/Cr/PCr CEST studies:

#### Saturation power selection

For CEST with intermediate and fast exchanging rates, the CEST signal is usually higher with stronger saturation power without MTC components as demonstrated in a phantom with Cr in solution (Figs. 4a). When strong MTC is present, such as *in vivo* CEST applications, the saturation power dependent CrCEST signal is totally different from those in solution. This can be illustrated by a phantom study with Cr in cross-linked bovine serum albumin (BSA) (Figs. 4b and 4c). CrCEST increases with saturation power initially (5 s saturation length), but drops rapidly when higher than 1  $\mu\text{T}$ . Similar power dependent patterns were observed in some in vivo studies such as the muscle (Fig. 4d)<sup>(52)</sup> and brain (Fig. 4e)<sup>(35)</sup>. The exchange rate of Cr in the brain is suggested to be lower than  $<1000\text{ s}^{-1}$  by a hypercapnia study on the animal brain.<sup>(75)</sup> The optimal saturation power (1  $\mu\text{T}$ ) for CrCEST was found to be 1–1.2  $\mu\text{T}$  in both mouse brain and muscle indicating that Cr in cross-linked BSA phantoms can mimic the *in vivo* Cr situation well. The rapid CEST signal decay with high saturation powers when strong MTC present can be well explained by the scaling effect of the direct saturation (DS) and MTC effects following<sup>(35)</sup>:

$$\Delta Z_{obs} = Z_{back}^{ss} (1 - Z_{clean}) \quad (1)$$

where  $(1 - Z_{clean})$  is the clean CEST signal without MTC and DS, and  $Z_{obs}$  is the observed CEST signal. For Arg/Cr/PCr CEST signals, with increasing power, saturation efficiency is proportional to the square of saturation power initially, and then levels off slowly until reaching a maximum saturation of one. However, MTC and DS keep increasing with increasing saturation powers, leading to an increase in  $Z_{back}^{ss}$ . As a result, the observed CEST signal will drop quickly at higher saturation power, as predicted in Eq. 1 and observations at both high (Figs. 4d and e) and low fields (Fig. 4h). Similar power and duration dependence has been reported in a previous study of amine-proton exchange.(14) The optimum saturation power for ArgCEST is around 0.8  $\mu$ T at high field as measured by  $GAMT^{-/-}$  mice without Cr/PCr in brain as shown in Fig. 4e (Green square). At lower MRI fields, DS causes a stronger scaling effect and leads to a slightly lower optimum saturation power (around 0.6  $\mu$ T for PCrCEST) (Fig. 4h). Both CrCEST and ArgCEST do not show clearly distinguishable peaks at 3T and optimum saturation powers have not yet determined due to the difficulty of extracting a clean signal.

### Saturation length selection

Conventionally, extremely long saturation lengths (> 3s) were chosen to reach steady-state saturation and to produce maximal CEST signal, particularly for preclinical scanners. Due to the hardware limitations of clinical MRI scanners, a relatively short saturation time (< 1s) is often used for human studies (76,77). The steady-state strategy is valid for CEST contrast without MTC, such as Cr solutions in Fig. 4b. However, this principle does not necessarily work for in vivo CEST when strong MTC and DS are present. With lower saturation powers (<1  $\mu$ T), the CEST effect with respect to the saturation time is still approximated as a single exponential function.(78). On the contrary, CEST is a buildup and decay function for high saturation powers (>1  $\mu$ T) as demonstrated by a Cr phantom mixed with cross linked BSA in Fig. 4f. When increasing saturation length, both the MTC background and the CEST saturation efficiency buildup exponentially, but the observed CEST signal is modulated by the scale-down effect following Eq. 1 due to MTC competition. Then, maximum observed CEST signal is reached at a saturation time slightly longer than  $T_{1\rho}$ , the rotation frame relaxation time at this saturation power, which is much shorter than the steady-state time, i.e.,  $5 \cdot T_{1\rho}$ . This optimum saturation length that is much shorter than steady-state length has also been observed in amine proton studies using the chemical exchange-sensitive spin-lock (CESL) method with strong saturation powers (14,79).

### In vivo CEST experiments

As we discussed above, it is common to see several exchanging protons at the same frequency offset for in vivo CEST, such as the ArgCEST and CrCEST at 2 ppm. The previous comparison study on the  $GAMT^{-/-}$  and WT mice demonstrated that the ratio between ArgCEST and CrCEST is strongly power dependent.(66) Saturation power can be tuned to suppress contributions from unwanted exchanging protons, such that high powers can selectively enhance fast-exchanging components, while slow-exchanging CEST will be dominant with low saturation powers. Therefore, a saturation power of 2–3  $\mu$ T was commonly used for CrCEST at both high and low fields instead of the optimum 0.6–1  $\mu$ T.(29,53,54,66,80) However, high saturation power also causes severe scale-down effects due to MTC and DS (Eq.1), thus leading to much reduced Arg/Cr/PCr CEST signals. It is

necessary to point out that the above discussion focuses on conventional continuous wave or steady-state pulsed CEST methods. Arg, PCr and Cr CEST can be acquired with special editing techniques such as chemical exchange rotation transfer imaging (70). Considering Cr/PCr CEST signal is relatively low in tissue (<3%), the special editing further reduces CEST signal and will not be discussed in the current review.

## Quantification of PCr/Cr/Arg Signal

In the early days of CEST development, most CEST signal was extracted using asymmetry analysis, i.e. CEST contrast was computed by subtracting the normalized magnetization signal at the frequency of interest, such as APT at 3.5 ppm and CrCEST at 1.8–2 ppm (3T) from the magnetization at the corresponding reference frequency symmetrically at the opposite side of the water resonance. (10,27,53,54) This method is demonstrated in the CrCEST maps on muscle in Figs. 5a and b. The MTC and DS were assumed to be symmetric around water resonance which would make them removable by this strategy. However, many studies showed that MTC is asymmetric around water resonance meaning background MTC would not be removed by asymmetry analysis.(81) There is also much evidence to suggest that many CEST signals from protein contribute to the resonance between 1–4 ppm such as amine and hydroxyl CEST from protein, (31) amideCEST and amideNOE (Fig. 3).(37) Furthermore, there are strong AliphaticNOE resonances that are centered at the opposite side of the water frequency and can contribute when performing asymmetry analyses (43,82–85). Therefore, the MTRasym at 1.8 ppm is a mixture of many CEST and NOE components. (Fig. 5b) With the recent validation studies in animal muscle, the maximum CrCEST signal in muscle is less than 3% with an optimum saturation power of 1  $\mu$ T at high fields.(52,69) Although the MTRasym method can be used to study the Cr change relatively in tissue, the interference from other MRI parameters such as  $T_1$ ,  $T_2$  and pH variations due to the high signal from other CEST components must still be carefully considered.

In order to solve these issues faced by the MTRasym method, another strategy was developed in the CEST field named Lorentzian line-shape fitting. In this method as demonstrated in Figs. 5c and d, a full Z-spectrum was acquired with low saturation field strength  $B_1$  and fit by assuming a Lorentzian line-shape for each contributing signal, such as DS, MTC, GuanCEST, amideCEST, amineCEST, and NOE peaks (16,17,86–88). This method can minimize the semi-solid macromolecule and DS components. However, it remains challenging to extract Arg/Cr/PCr CEST signal due to the difficulty of removing interference from amideNOE, aromaticNOE, amineCEST and hydroxylCEST that overlap with Arg/PCr/Cr CEST resonances as shown in Fig. 3. The CEST signal at 2 ppm extracted by Lorentzian fitting is still as high as 8% which includes CrCEST, ArgCEST, amineCEST, hydroxylCEST and aromaticNOE signals (Figs. 3 and 5d). The specificity of this method may be improved compared to MTRasym, but CrCEST is still less than 25% of the extracted CEST signal at 2 ppm.

From a previous validation study in animal muscle, it was found that Cr and PCr CEST have two discernible peaks at 2 or 2.5–2.6 ppm at high MRI fields. Therefore, Cr and PCr CEST can be extracted with localized Lorentzian fitting methods (Figs. 5e and f).(35,52,69)



In order to distinguish the method from the conventional Lorentzian fitting methods, this method is named the polynomial and Lorentzian line-shape Fitting (PLOF) approach and the procedure of the method is plotted in Figs. 5g–j. (35,52,66) PLOF fitting can be achieved by fitting the Z-spectrum directly. Another way is to convert the normalized Z-spectral intensity  $Z^{SS}$  to the longitudinal relaxation rate in the rotating frame,  $R_{1\rho}$ , i.e., the rotating-frame relaxation spectrum ( $R$ -spectrum) following (89–92)

$$Z(R_{1\rho}) = \left(1 - \frac{\cos^2\theta R_1}{R_{1\rho}}\right) e^{-R_{1\rho} t_{sat}} + \frac{\cos^2\theta R_1}{R_{1\rho}} \quad (2)$$

$R_1 = 1/T_1$  is the longitudinal relaxation rate of water,  $t_{sat}$  is the saturation time and  $\theta$  is the tilt angle of the effective magnetization with respect to the Z-axis.  $R_{1\rho}$  is the water relaxation rate in the rotating frame during saturation, which includes contributions from the effective water relaxation rate  $R_{eff}$ , the rotating frame rate from the CEST signal of interest ( $R_{exch}$ ), and a term  $R_{back}$  that accounts for the rotating frame rates of all other magnetization/exchange transfer processes in tissue (91):

$$R_{1\rho} = R_{eff} + R_{back} + R_{exch} \quad (3)$$

where  $R_{eff}$  is the longitudinal relaxation rate of water in the rotating frame without additional solution components. The reason to convert the Z-spectrum to the rotating frame spectrum is that in the rotating frame all exchanging components including water direct saturation can be simply superimposed with respect to  $R_{1\rho}$ , while this is not feasible using a simple Z-spectrum. Therefore, the R spectrum can correct the scaling effect due to magnetization transfer and  $T_1$  inhomogeneities in tissue (48,49). The observed CEST signal  $Z$  is extracted by the following:

$$\Delta Z = Z(R_{eff} + R_{back}) - Z(R_{eff} + R_{back} + R_{exch}) \quad (4)$$

The CEST peak ( $R$ ) and broad background ( $R_{back}$ ) in the  $R$ -spectrum can be represented by a Lorentzian function and a mixed polynomial and Lorentzian function, respectively:

$$R = R_{exch} \frac{(w/2)^2}{(w/2)^2 + (\Delta\omega - \Delta\omega_{exch})^2} \quad (5)$$

$$R_{back} = \frac{C_0(C_1/2)^2}{(C_1/2)^2 + \Delta\omega^2} + C_2 + C_3 \cdot \Delta\omega \quad (6)$$

where  $w$  is the peak full-width-at-half-maximum (FWHM) of the Lorentzian line-shape.

$\omega$  is the offset relative to the water proton resonance.  $R_{exch}$  is the intensity of the CEST peak in the  $R$ -spectrum.  $\omega_{exch}$  is the chemical shift offset of the CEST peak relative to the water signal, that is, 2.5 ppm for PCrCEST and 2 ppm for Cr/ArgCEST; The background function was modified from the original polynomial function (35,52,66) to improve PLOF background fitting for peaks close to the water resonance, i.e. Arg/PCr/Cr peaks. For amideCEST which is far from water resonant frequency, a simple polynomial function

can be used in Eq.6. (35,52,66) Lastly, the extracted CEST peaks expressed in  $R_{exch}$  are calibrated with metabolic or protein concentrations measured by  $^{31}\text{P}$  or  $^1\text{H}$  MRS and give the final Arg/PCr/Cr maps. In some special applications where the temporal resolution is critical, then the three-point method can be used. (69) The three-point method can be treated as a simplified PLOF method with the assumption that the background function Eq.6 is a linear function. Hence, it must be noted that this method only works for high fields with CEST offsets far away from water and low saturation powers. The three-point method also has high requirements on  $B_0$  homogeneity.

Artificial neural networks (ANNs) as a power pattern recognition tool are increasingly being used at many MRI fields (93–95) to extract relevant features from extremely large, annotated data sets. Once trained, ANNs can apply the learned knowledge to analyses of other data and/or solve task-specific problems. The ANN based CEST method was first demonstrated for mapping CEST contrasts between different fields (58) and extracting amideCEST and aliphaticNOE contrasts (96), i.e. deep learning CEST (deepCEST). In order to extract protein or metabolite concentrations directly from the Z-spectra recorded with CEST MRI, one ANNCEST method was developed and was demonstrated on phosphocreatine mapping in human muscle. (51) The ANNCEST will bypass the complicated conventional extraction and quantitation steps and link the concentration to the final Z-spectrum directly (Fig. 6a). Furthermore, ANNCEST can correct many errors introduced by  $B_0/B_1$  inhomogeneity without performing  $B_1$  and  $B_0$  mapping. (Fig. 6b–f) The ANN is inherently suitable for CEST quantification: trained neural networks can efficiently and simultaneously predict multiple important properties, including metabolite concentration, the exchange rate of exchangeable protons, and  $B_1/B_0$  related information, with just a simple input of a Z-spectrum for each voxel (Fig. 6b). The encoding process of CEST MRI can be well described by the Bloch-McConnell equations and a training Z-spectrum can be easily generated with known parameters. However, due to the complexity of the Bloch-McConnell equations, an accurate solution is hard to derive especially with the presence of possible  $B_0$  and  $B_1$  effects, which means decoding quantitative concentrations and exchange rates from Z-spectra can be challenging. Here, ANNCEST provides a new dimension for CEST quantification by directly linking the Z-spectrum with the quantitative parameters with an ANN network. However, the application of the ANNCEST method to extract Arg/Cr/PCr CEST in brain is far more complicated than in muscle. There are several components within brain tissue with significantly different MRI parameters such as white matter (WM), gray matter (GM) and cerebrospinal fluid (CSF). The advantages, disadvantages, and typical applications of the CEST quantification methods mentioned above are summarized in Tab. 1.

## Applications of Arg/Cr/PCr CEST

### Arg and Cr CEST for tumor assessment

ArgCEST detects the arginine rich protein content in tissue, while CrCEST reflects the creatine kinase reaction-based bioenergy status. Therefore, both can be used to assess the cellular chemistry and pathologic alterations in tumors. (16,17) Usually, the two signals are difficult to separate and were referred to collectively as a summed signal, GuanCEST. The first application of GuanCEST on tumor was demonstrated on the invasive murine cell-line

Lewis lung carcinoma (LLC) implanted in the mouse hind limb (Fig. 7a). The CEST(2 ppm) maps were extracted following the Lorentzian fitting method demonstrated in Figs. 4c and d. (16) Although, it was referred to as amineCEST at the time of the study, the signal at 2 ppm extracted with Lorentzian fitting is a mixed signal resulting from GuanCEST, amineCEST, hydroxylCEST, amideNOE and aromaticNOE signals as discussed above (Fig.3). Here, we refer to it as CEST(2 ppm) to represent the signal at 2 ppm extracted with Lorentzian fitting. It can be seen that the CEST(2 ppm) trends towards higher amplitudes as the tumor grows. The same method was further demonstrated in the rat brain implanted with tumor cells (9L gliosarcoma) (Fig. 7b&c). (17,97) Different from the LLC tumor, the CEST(2 ppm) for the 9L tumor decreases as the tumor grows. The difference may be due to the slightly higher saturation power ( $1\mu\text{T}$ ), which introduced higher CrCEST contributions. CEST(2 ppm) was also demonstrated on human tumor patients at 9.4T (Fig. 7d) together with CEST(3.5 ppm) and aliphaticNOE. (58) The signal was also extracted with the Lorentzian fitting approach from the Z-spectrum acquired with  $0.6\mu\text{T}$  saturation power. Here, CEST(3.5ppm) is a mixture of amideCEST, amideNOE and amineCEST (Fig. 3), and also is different from APT which is obtained by asymmetry analysis. The CEST(3.5 ppm) shows hyperintensity in the tumor while aliphaticNOE maps show a clear decrease in the tumor area as well as a strong drop in the necrotic cyst. The CEST(2 ppm) signal shows less contrast than CEST(3.5 ppm), yet reveals similar hyperintensities in the tumor area. Note that  $T_1$  and MTC often change in tumors which would affect the CEST contrast. This effect was not removed in some of the previous studies, therefore, some of the contrast may be due to these confounding effects. An  $R_{1\rho}$ -based analysis method such as AREX would improve the specificity of CrCEST and ArgCEST, as we discussed above. For tumor assessment, we do not need to separate particular CEST contrasts. The protein profiling provided by the MTasym or Lorentzian fitting at 2 ppm can provide information about tumor grading or differentiation between glioma and radiation necrosis similar to APT (27,98). However, if we aim to detect the microenvironment, such as pH and PCr/Cr energy metabolism, it is better to extract the particular contrast since it is difficult to determine the components obtained with MTasym or Lorentzian fitting. Since the protein content also changes in the tumor, it is more reliable to determine the microenvironment by extracting several CEST contrasts simultaneously such as AmideCEST, ArgCEST and CrCEST. Recent studies revealed that mitochondria in cancer cells show active function of oxidative phosphorylation (99). PCr/Cr mapping has great potential in being a non-invasive technique capable of providing additional information about tumor grading, treatment response and even advancing basic cancer biochemistry research.

### pH mapping by Guan and PCrCEST

The homeostasis of tissue pH is essential for normal cellular functions and plays a vital role in cell physiology. Transient fluctuation of local brain pH has been observed during neuronal activation, seizure and spreading depression. Many pathophysiological processes, such as ischemic stroke, epilepsy, and traumatic brain injury can also introduce pH alterations. Thus, a non-invasive pH-sensitive imaging tool that can provide unique insight into the brain function and neurological disorders is desirable. (33,100) Most intracerebral pH probing techniques are highly invasive such as electrochemical (101), photoelectrochemical (102), optical imaging (103) and implantable pH micro sensors. On the other hand,

magnetic resonance spectroscopy (MRS) and its branches, such as  $^{31}\text{P}$  MRS (104–106) or  $^1\text{H}$  MRS after administration of agents (107–110), are well-established methods for non-invasively detecting pH changes in tissue. However, additional hardware requirements and limited accessibility hamper  $^{31}\text{P}$ -wide clinical applications, while administration of agents is expensive and always comes with a risk. In addition, compared to MRI, MRS-based methods suffer from reduced detection sensitivity and a consequently lower spatial resolution.

CEST contrast is sensitive to both pH and metabolite/protein concentration. Therefore, both ArgCEST and CrCEST can be used for pH mapping. The pH change in most pathophysiological processes are very small on the order of  $<0.5$  pH. Therefore, the pH sensitivity should be high enough to detect at least a 0.2 level of pH variation. The most important consideration in pH mapping with CEST is to suppress the NOE or MTC component that is not sensitive to pH change. This can be achieved by MTasym, three-point or PLOF fitting methods detailed in the sections above. However, the CEST components extracted with Lorentzian fitting still contains a large portion of NOE signals, which leads to compromise in pH sensitivity as demonstrated by recent comparison studies. (56,111) Considering that Cr concentrations are highly stable in the brain, around 5 mM in both mouse and rat (35,66), CrCEST is very suitable for pH mapping in the brain. In practice, the two contrasts are difficult to separate completely. Hence, the pH mapping on the brain was usually achieved with GuanCEST, i.e. the combined CEST contrasts from both ArgCEST and CrCEST. Also, it is not necessary to separate them for in vivo pH mapping since both contrasts are strongly dependent on pH. RF power-based ratiometric CEST imaging has been proposed for pH imaging. With these methods ratios of CEST effects obtained under different RF power levels have been compared with their pH dependence in CrCEST phantom studies.(112) This pH mapping method can be applied to in vivo tissue if the MTC and DS effects can be effectively removed by other quantitative methods such as multi-Lorentzian fitting.

In the CEST field, amideCEST or APT was the first CEST contrast used for pH mapping in the brain.(10,12) Here, APT is used for the CEST contrast at 3.5–3.6 ppm extracted with conventional MTRasym method, which is a mixed signal comprising amideCEST, amideNOE, amineCEST and aliphaticNOE.(37) Although it is in and of itself a mixed signal, it also works well in delineating ischemic regions by suppressing the majority of NOE and MTC components (111). Up to now, APT or amideCEST is still the most popular CEST contrast for pH mapping due to the abundance of amide protons in tissue. Although, amideCEST/APT MRI has been successful in measuring the pH change in acute ischemia and other diseases (18,29,46,50,53,113), the relatively slow exchange rate of amide protons ( $<100\text{ s}^{-1}$ ) at physiological temperature and pH limits its sensitivity in detecting subtle pH changes. GuanCEST can be a useful supplemental contrast for the commonly used APT in pH mapping.(29,56) When saturation power lies between the optimal powers for amides and creatine ( $<1\text{ }\mu\text{T}$ ), CrCEST signal increases with respect to the lower pH values.(56) Then, one strategy to enhance the sensitivity of pH mapping with CEST is using the two contrasts simultaneously, amideCEST and GuanCEST. The new contrast has been named  $\text{pH}_{\text{enh}}$  by acquiring both amide- and GuanCEST images, and subtracting them as

$$pH_{enh} = [S_{sat}(\alpha \times B_1, 3.6 \text{ ppm}) - S_{sat}(B_1, 2.0 \text{ ppm})] \quad (7)$$

where  $\alpha$  is the ratio of radio frequency powers for saturation at offsets 3.6 ppm and 2.0 ppm. The sensitivity of the  $pH_{enh}$  and APTw maps were demonstrated in stroke rats (Figs. 8a–d).  $pH_{enh}$  was obtained from GuanCEST at 2.0 ppm acquired with 30 Hz (0.7  $\mu$ T) and amideCEST at 3.6 ppm with 54 Hz (1.26  $\mu$ T). Both  $pH_{enh}$  and APTw map show a negative baseline due to NOE and asymmetric MTC effects. Tissue acidification appears hyperintense in  $pH_{enh}$  maps, while the same regions appear hypointense on APTw maps. The ischemic lesion can be well identified by  $pH_{enh}$  maps and is closely match with the ADC deficit. The contrast to noise ratio of  $pH_{enh}$  is about  $2.9 \pm 0.4$  times higher than APTw (Fig. 8d).

Different from low saturation powers for GuanCEST, (33,36,56,57) GuanCEST for pH mapping can be achieved with high saturation powers, in which the GuanCEST signal is reduced with lower pH values. (29,75) The reason for the totally different pH dependence of GuanCEST with low and high saturation powers is still not fully understood. The high sensitivity of GuanCEST for pH mapping with high powers was first demonstrated on the mouse brain with an ischemic stroke model. (29) Hypercapnia will cause a reduction in cerebral intracellular pH (114). To evaluate the sensitivity of GuanCEST in detecting pH change, CEST Z-spectra on wild type (WT) mouse brains pre- and post-20%  $CO_2$  inhalation were recorded. There is need to be aware that while the signal was denoted CrCEST in the original study, (29,75) as we discussed above, the signal contains both Arg and CrCEST and should be named collectively as GuanCEST. GuanCEST showed better detection sensitivity than amideCEST (Figs. 8e–i). (75) One recent study showed a discovery that cerebral pH detected by GuanCEST is reduced in AD mice versus wild type (WT) mice. The typical GuanCEST Z-spectra and maps for the WT, Tau and APP<sup>swc</sup>:PS1 E9 (APP) mouse brain are plotted in Figs. 8k&l. In this study, the apparent relaxation rate of Guan ( $R_{Guan}$ ) was calculated with the PLOF method to correct for interference of the semi-solid magnetization transfer effect and  $T_1$ . Compared to WT GuanCEST maps, reduced GuanCEST intensities were observed in the Tau and APP mouse brains, especially in the cortical regions (WT:  $0.105 \pm 0.017 \text{ s}^{-1}$ ; Tau:  $0.084 \pm 0.083 \text{ s}^{-1}$ ; APP:  $0.074 \pm 0.019 \text{ s}^{-1}$ ). A significant difference was obtained between WT and the Tau and APP GuanCEST in the cortex and corpus callosum regions ( $p < 0.01$ ) from regional values. Because the concentrations of Cr are the same in these mice models as validated by the  $^1H$  and  $^{31}P$  in the same study, these findings show potential to allow the measurement of pH change in the brain and to detect the presence of neurodegenerative disease. In skeletal muscle, the abundance of PCr and Cr makes pH mapping possible by combining measurement of PCrCEST and CrCEST. A recent study by Chen et al (71) measured PCrCEST at 2.6 ppm and CrCEST at 2 ppm by multi-Lorentzian fitting at 7 T. A ratiometric analysis was used to remove the  $T_1$  effect and determined a quantitative pH value using phantom calibration. Note that the application of this pH-mapping method in disease study would assume that there is negligible change in the relative concentration of PCr and Cr. If this assumption is not valid, it may be necessary to acquire data with multiple saturation powers to mitigate this problem.

**Creatine kinase reaction measurement**—Cr and PCr are two primary components of the creatine kinase reaction (CK) (115,116), whereby Cr is phosphorylated to PCr to form

an easy to mobilize reserve of high-energy phosphates (117). Therefore, quantification of the concentrations and tissue distribution of Cr and PCr are important for understanding cellular chemistry and assessing pathologic alterations.  $^1\text{H}$  and  $^{31}\text{P}$  magnetic resonance spectroscopy (MRS) are two major techniques to quantify tissue Cr and PCr concentrations.  $^1\text{H}$  MRS can measure the total Cr (tCr), which is composed of Cr and PCr (118,119). In contrast,  $^{31}\text{P}$  MRS is only capable of detecting PCr since Cr does not contain phosphorus (120,121). Similar to pH mapping, MRS quantification is limited by relatively low signal-to-noise ratio and spatial resolution. Here the Cr and PCr CEST methods enable us to measure Cr and PCr concentrations in tissues and hence CK function by performing plantar flexion exercise in the MRI scanner. The first CK measurement was performed by Reddy's group with CrCEST that extracted CEST signals with asymmetry analysis. (53,54,122) Plantar flexion exercise led to an increase in the CrCEST in all subjects. Fig. 9a shows CrCEST maps for the same subject before and after mild plantar flexion exercise with a temporal resolution of 24 s. The time dependence of the mean CrCEST for each segmented muscle group is plotted in Fig. 9b. The principal muscles involved in plantar flexion are located in the posterior compartment of the leg and include the soleus muscle as well as the medial (MG) and lateral (LG) heads of the gastrocnemius muscles. The CrCEST maps appeared fairly uniform at baseline while the first postexercise map showed a 6.7% and 7.2% increase in CrCEST in the LG and MG, respectively, following exercise. The CrCEST in all the muscles was seen to recover exponentially back to baseline after roughly three time points or about 2 min.

PCr shows one distinguishable peak with signal of about 0.8–1% of water signal in the Z-spectrum at 3T due to its much lower exchange rate ( $260 \pm 40 \text{ s}^{-1}$ ), which provides a great opportunity to extract PCr concentrations with PLOF or ANNCEST. (51) The CK measurement with ANNCEST based PCr mapping was validated through measurement during in-magnet plantar flexion exercise (Figs. 9c–e). Shortly after exercise, the PCr depletion in the gastrocnemius muscles recovered to basal values on the PCr maps obtained by PCr ANNCEST as shown by the representative results in Figs. 9d. The spatially resolved map of the PCr recovery rate constant using ANNCEST is shown in Fig. 9e and a recovery time constant of  $70.7 \pm 55.4 \text{ s}$  was obtained, which is consistent with that reported in a previous study ( $63.1 \pm 25.9 \text{ s}$ )(123). The PCr depletion observed in the muscle regions is in good agreement with those reported previously in healthy volunteers using  $^{31}\text{P}$  MRS, in which the gastrocnemius muscle showed significantly greater PCr depletion than other muscle groups during plantar flexion exercise (124–126).

CrCEST maps obtained by MTasym work well in determining relative Cr concentration changes. The high temporal resolution provided by MTasym is also helpful in revealing CK function, which usually occurs in a few minutes (123). Consideration must be taken for the fact that pH,  $T_1$  and  $T_2$  also change in the muscle during exercise (127–129). These effects can not be easily separated and accounted for by the MTasym method. A more reliable way to study the CK process would be to obtain the PCr and Cr CEST contrasts simultaneously to monitor the conversion from PCr to Cr. However, this extends the total experimental time significantly. Rapid MRI acquisition development is needed to properly implement this strategy. Similar to  $^{31}\text{P}$  MRS, Cr/PCr CEST can be used for the noninvasive assessment of mitochondrial impairment in heart failure(130) and ischemic-induced reductions in skeletal muscle energetics in patients with PAD.(121,127,131–136) PCr re-synthesis

following ischemia/exercise is only possible through the CK system and requires adenosine triphosphate, produced predominantly by mitochondrial oxidative phosphorylation. Hence, PCr/Cr CEST detection of PCr re-synthesis can be an approach for detecting and quantifying defects in mitochondrial oxidative phosphorylation as demonstrated on the patients with Friedreich's ataxia (137).

**Clinical Translation of PCr, Cr and ArgCEST**—Clinical translation of CEST methods on human scanners is challenging mainly due to the relatively low signal (<2%) that is susceptible to interference by many artifacts. CrCEST has already been demonstrated on both 3T and 7T clinical MRI scanners,(54,122) while PCrCEST has been demonstrated on 3T MRI scanners (51). Human studies on PCr/Cr CEST were still limited to the muscle due to the requirement of high PCr and Cr concentration for adequate sensitivity. The first two major factors to consider for the clinical translation is  $B_0$  and  $B_1$  inhomogeneity.  $B_0$  inhomogeneity is about  $\pm 0.5$  ppm for the human brain (37,88,96) and  $\pm 0.4$  ppm for the leg at 3T (51,54).  $B_0$  compensation can be achieved by acquiring a wider range of the Z-spectrum and an extra  $B_0$  map. The standard deviation of the  $B_1$  maps is about 10% for the human brain (37,88,96) and 20% for the leg at 3T (51,54). The correction of  $B_1$  inhomogeneity can be achieved by  $B_1$  insensitive saturation schemes, such as pulsed saturation with long mixing times (37), or by acquiring multiple Z-spectra with different  $B_1$  values (138). In most cases, both  $B_0$  and  $B_1$  compensation will extend the total scan time significantly. Patient movement is another issue when performing human studies, particularly during plantar flexion exercise. This can be solved by image post-processing such as image registration or using motion insensitive MRI readout schemes such as steady-state radial CEST (starCEST). (37)

Specificity is also a major issue in clinical translation. PCr shows one well defined peak at 3T and can be extended and quantified with the PLOF or ANNCEST methods. Although CrCEST was used in human CK measurements,(54,80) it is difficult to derive concentrations from Cr CEST due to the broad and indiscernible CEST peak induced by the fast exchange rate of Cr guanidinium protons in tissue ( $950 \pm 100 \text{ s}^{-1}$ ). (46)There are limited options for quantifying CrCEST in human studies. Up to now, it was mainly achieved with MTasym, which has a high temporal resolution but is susceptible to interference by  $T_1/T_2$  changes (54). Therefore, there is still need for further development before the standardization of CrCEST acquisition and quantification for clinical application. ArgCEST is clearly visible in the human brain Z-spectrum on 9.4T MRI (38,138,139), hence, can be extracted with the PLOF method. On the contrary, the ArgCEST peak is too low to be visible at 3T (37,88,96). Although, the CEST maps at 2 ppm has been reported (58), specific ArgCEST maps of human brain have yet to be achieved at 3T and high MRI fields.

## Conclusion

In recognition of the value of imaging Arg, Cr and PCr through CEST, much work has been done to understanding and validating the signal sources behind what is observed when attempting to image these molecular targets. In this review, we have seen initial works demonstrating the potential of monitoring energy metabolism through imaging the Cr/PCr metabolite components of the creatine phosphate pathway as well as other possibilities such

as protein imaging using ArgCEST. The enhanced pH mapping with ArgCEST, CrCEST and PCrCEST are also possible due in part to their ubiquitous presence in various tissues. Although the potential contamination from resonances with close or redundant frequencies may still raise questions of precise quantification, both advances in separating out non-specific signals as well as redefining goals to meet specific diagnostic needs, such as focusing on dynamic changes over definitive quantification, bring workable solutions closer to realization. Moving forward, the future of CEST imaging of Arg, Cr and PCr will depend on the advancement of technical know-how in obtaining increasingly specific signals as well as the identification of potential clinical needs and understanding the key parameters to meet them.

## Supplementary Material

Refer to Web version on PubMed Central for supplementary material.

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## Abbreviations used:

<b>CEST</b>	chemical exchange saturation transfer
<b>MTC</b>	magnetization transfer contrast
<b>PLOF</b>	Polynomial and Lorentzian Line-shape Fitting
<b>Cr</b>	creatine
<b>PCr</b>	Phosphocreatine
<b>NOE</b>	nuclear Overhauser enhancement
<b>ppm</b>	parts per million
<b>RF</b>	radiofrequenc
<b>DS</b>	direct water saturation
<b>FOV</b>	field of view
<b>BSA</b>	bovine serum albumin
<b>ROI</b>	region of interest
<b>WT</b>	wild type mouse
<b>PBS</b>	phosphate buffered saline
<b>Glu</b>	glutamate
<b>Guan</b>	Guanidinium



<b>GAMT</b>	guanidinoacetate methyltransferase
<b>ANN</b>	artificial neural networks
<b>CK</b>	creatine kinase reaction

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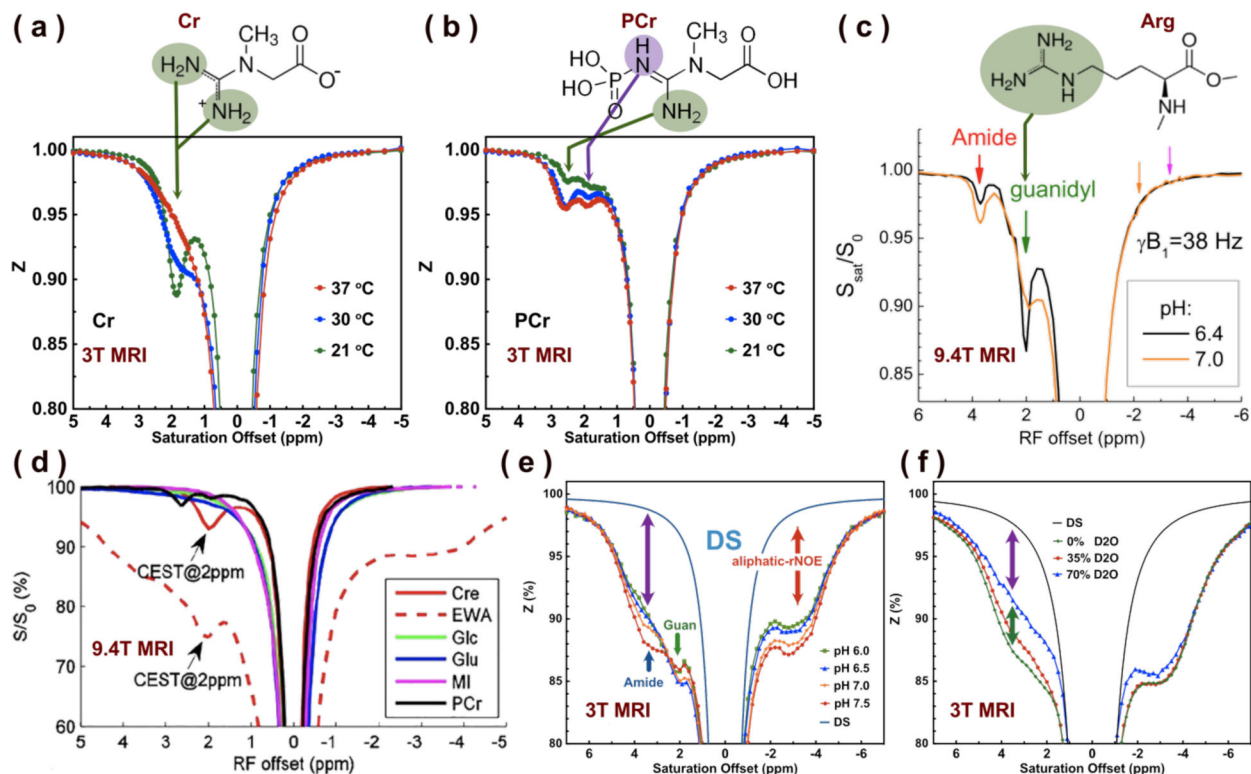
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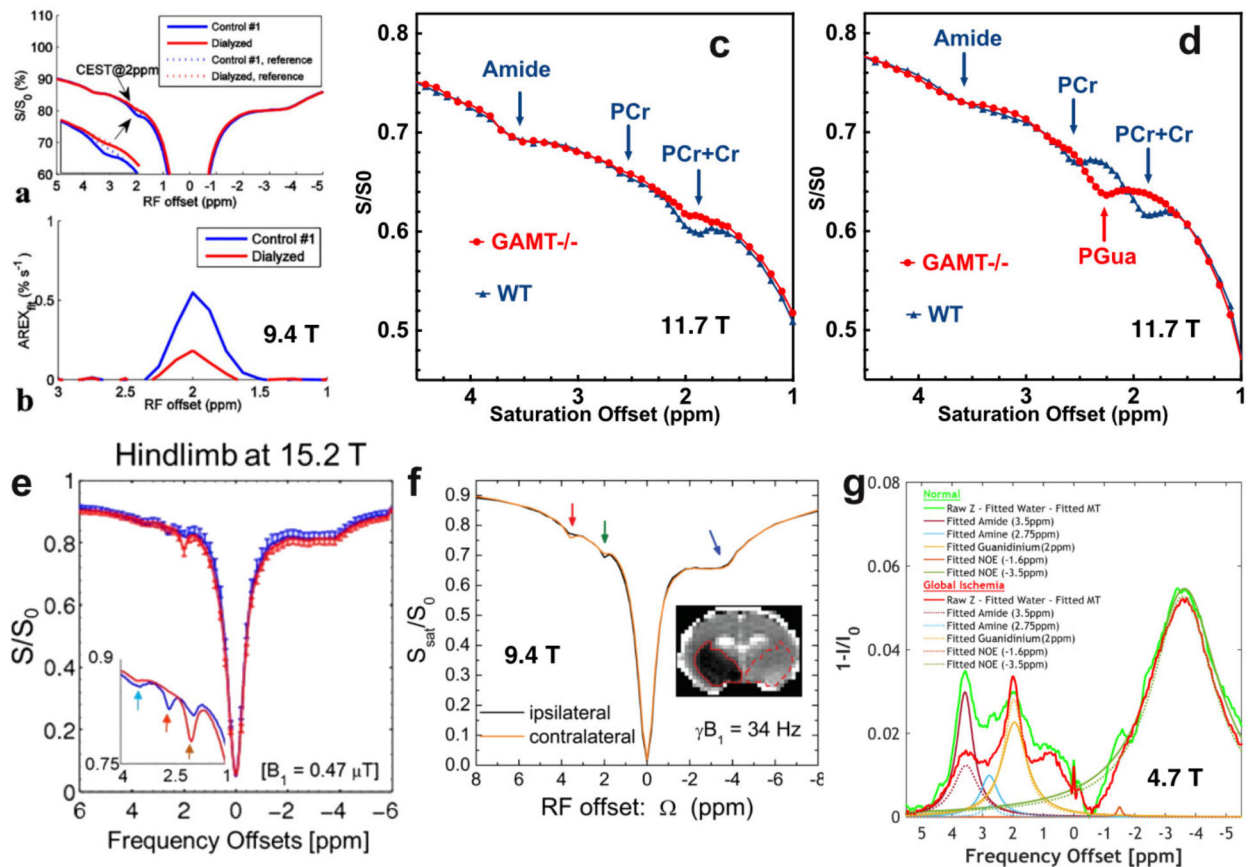
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**Figure 1.**

Full Z-spectra of (a) creatine (Cr) and (b) phosphocreatine (PCr) phantoms with pH of 7.3 were measured with continuous wave (cw) CEST sequences and  $B_1 = 0.6 \mu\text{T}$  at three different temperatures using 3T MRI. The corresponding PCr and Cr molecular structures are plotted at the top of each figure together with the CEST peak assignments. Fig. a and b are modified from Chen L et. al., Nat Commun 2020; 11:1072. (c) Full Z-spectra of protamine phantoms with pH of 6.4 and 7.0 were measured with a cwCEST sequence and  $B_1 = 0.9 \mu\text{T}$  at 37 °C. The CEST signal from amide (red arrow) and arginine (Arg, green arrow) protons has opposite changes between the two pH phantoms. The molecular structure of the Arg residue in the proteins and peptides is depicted at the top of the figure. This figure is modified from Jin T et. al., NeuroImage 2017; 157: 341–350. (d) Full Z-spectra of Cr, egg white albumin, glutamate, glucose, myoinositol, and PCr were measured with a cwCEST sequence and  $B_1 = 1.0 \mu\text{T}$  at pH of 7.0 and 37 °C using 9.4T MRI. This figure is reprinted from Zhang XY et. al., Magn Reson Med 2017; 78: 881–887. (e) Z-spectrum of egg white as a function of pH with peak  $B_1 = 0.8 \mu\text{T}$  using a UTE-CEST sequence. The exchangeable protons downfield, amide and Arg, and AliphaticNOE signals are indicated. The simulated DS spectrum is also plotted. (f) The Z-spectra of egg white solution with 0% (green), 35% (red), and 70% (blue) D<sub>2</sub>O acquired with ultrashort TE CEST with peak  $B_1 = 0.8 \mu\text{T}$ . A residual signal is still observable in the exchangeable proton range for 70% D<sub>2</sub>O (purple arrow). Figures e and f are reprinted from Sui R et. al., Magn. Reson. Med. 2021; 86: 893–906.



**Figure 2.**

(a) Full Z-spectra of rate brain homogenates (blue) and dialyzed brain homogenates (red), respectively with continuous wave CEST sequence and  $B_1 = 1 \mu\text{T}$  using 9.4T MRI. (b) The extracted CrCEST signal represented in apparent exchange dependent relaxation from rat brain homogenates with and without dialysis. Figs. a and b are preprinted from Zhang XY et. al., Magn Reson Med 2017; 78: 881. The averaged Z-spectra of (c) brain and (d) muscle for wild type and GAMT deficient mice at 11.7 T MRI. Figs. c and d were reprinted from Chen L et. al., NMR Biomed 2017; 30: e3834 and Chen L et. al., Magn Reson Med 2019; 81: 69, respectively. (e) The averaged Z-spectra ( $n = 6$ ) of the mouse hindlimb before and after euthanasia with continuous wave CEST sequence and  $B_1 = 0.47 \mu\text{T}$  using 15.2T MRI. Fig.e was reprinted from Chung JJ et. al., Magn Reson Med 2019; 81: 3476. (f) Z-spectra with a saturation power of  $0.8 \mu\text{T}$  were obtained from rat brains in the normal and ischemic region ( $n = 4$ ) at 9.4 T MRI. The ipsilateral (solid) and contralateral (dashed) ROIs were selected based on the apparent diffusion coefficient (ADC) map (Inset). This figure was reprinted from Jin T et. al., NeuroImage 2017; 157:341. (g) A multipool Lorentzian fitting of the Z-spectra ( $B_1 = 0.75 \mu\text{T}$ ) before (solid lines) and after global ischemia (dotted lines) show the contributions from different pools, including amideCEST (3.5 ppm), amineCEST (2.75 ppm), GuanCEST (2.0 ppm), NOE (-1.6 ppm), NOE (-3.5 ppm), as well as DS and MTC at 4.7 T. The fitted water and MTC effects were subtracted from the raw Z-spectra, showing apparent CEST contrasts between normal and ischemic tissues at amide (3.5 ppm),

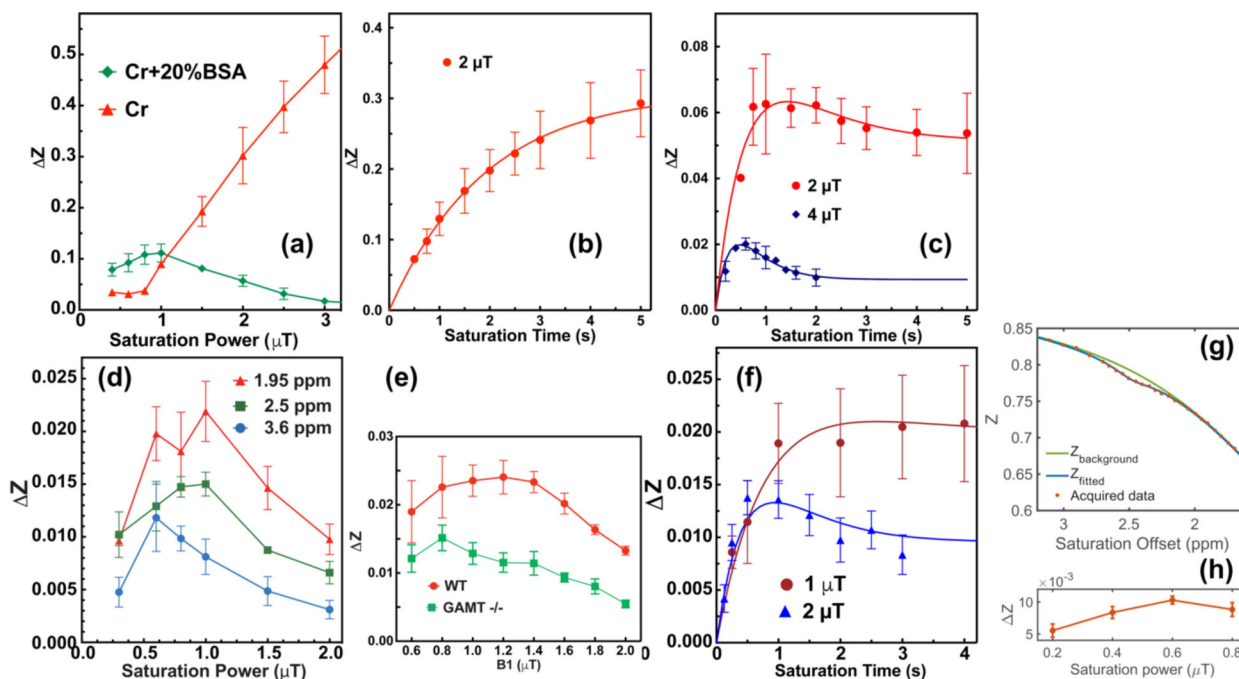
amine (2.75 ppm), and guanidinium (2.0 ppm) offsets. This figure was reprinted from Zhou IY et. al., *Magn Reson Med* 2019; 81: 645.

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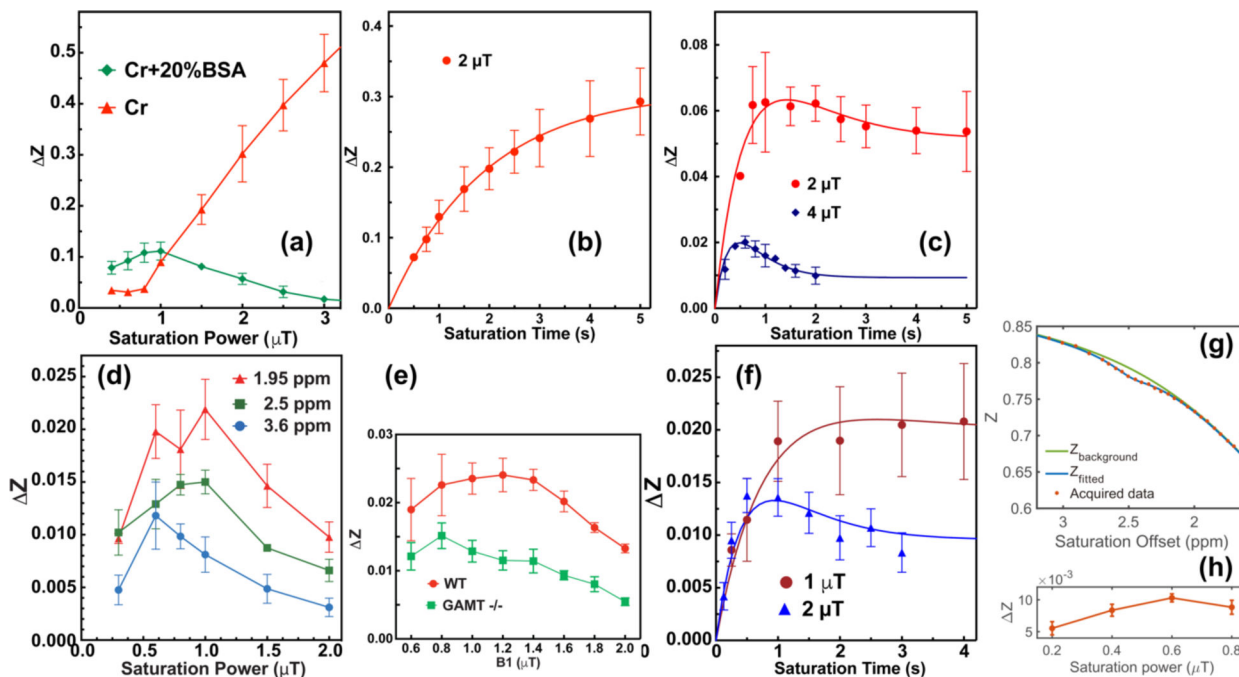
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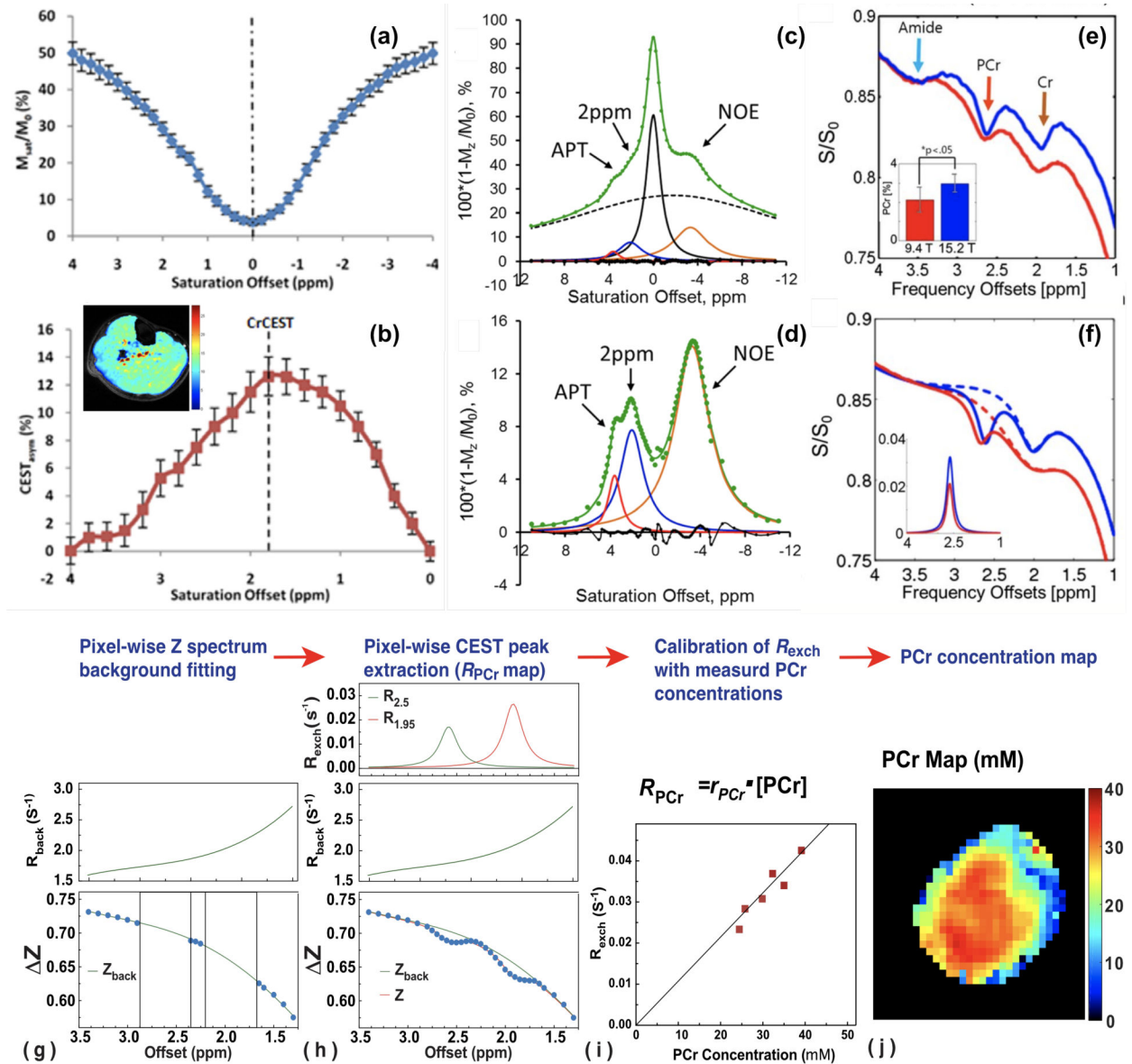
**Figure 3.**

(a) A schematic representation of brain Z-spectrum with typical contributions including DS, MTC, amideNOE, aromaticNOE, aliphaticNOE, amideCEST, CrCEST, PCrCEST, hydroxylCEST and amineCEST. The DS component is also included in the amineCEST and hydroxylCEST lineshapes. Here, the DS is plotted for reference only. The zoomed CEST contributions are plotted in the Figs. b-e. (b) The nonCEST saturation transfer processes that contribute to the brain Z-spectrum, e.g. amideNOE, aromaticNOE, aliphaticNOE and MTC. MTC is a strong and broad signal with center at around  $-3.5$  to  $-3$  ppm. Amide and aromatic NOE peaks distribute between 2 to 5 ppm, while aliphaticNOE centers at  $-3.5$  to  $-3$  ppm. (c) The CEST signals from the protons with slow to intermediate exchange rates, e.g. ArgCEST and CrCEST at 2 ppm, amideCEST at 3.5 ppm and PCrCEST at both 2 ppm and 2.5–2.6 ppm. Here amideCEST is used to distinguish from APT that is usually obtained by asymmetry analysis. (d) The peak locations of the amine protons from glutamate (3 ppm) and protein (2.7 ppm), as well as hydroxyl protons (1 ppm) from both protein and metabolites (e.g. myoinositol, glucose and glucogen). (e) The amine and hydroxyl CEST signal that coalescence with water peak due to higher exchange rates ( $>1000\text{ s}^{-1}$ ). The water peak (DS) is also plotted in both Figs. d and e for comparison.



**Figure 4.**

(a) The CrCEST signal of Cr solution (50 mM) and Cr (50 mM) mixed with 20% cross-linked BSA as a function of saturation power with a fixed saturation length of 5s at 11.7T. The CrCEST was extracted by the polynomial and Lorentzian line-shape fitting (PLOF) method. (b) The saturation length dependent CrCEST signal of the Cr phantom (50 mM) for a saturation power of 2  $\mu$ T. (c) The saturation length dependent CrCEST signal of the Cr (50 mM) mixed 20% cross-linked BSA phantom for saturation powers of 2  $\mu$ T and 4  $\mu$ T, respectively. (d) Observed CEST signals ( $\Delta Z$ ) at 3.6 ppm, 2.5 ppm, and 2 ppm as a function of saturation power for the mouse hindleg at 11.7T with a fixed saturation time of 2 s. Fig. d was reprinted from Chen L et. al., Magn Reson Med 2019; 81:69. (e) The observed CEST at 2 ppm with respect to the saturation power for the mouse brain of wild type and guanidinoacetate N-methyltransferase-deficient mice. Fig. e was reprinted from Chen L et. al., NMR Biomed 2017; 30: e3834. (f) The observed CEST signal at 2 ppm as a function of saturation time over the whole mouse brain for saturation powers of 1  $\mu$ T and 2  $\mu$ T, respectively. In all the above figures, the CEST signals were extracted with the PLOF method. Figs. g and h were reprinted from Chen L et. al., Nat Commun 2020;11(1):1072. Figs. a, b, c and f were reprinted from Chen L et. al., NMR Biomed 2019; 32: e4168.

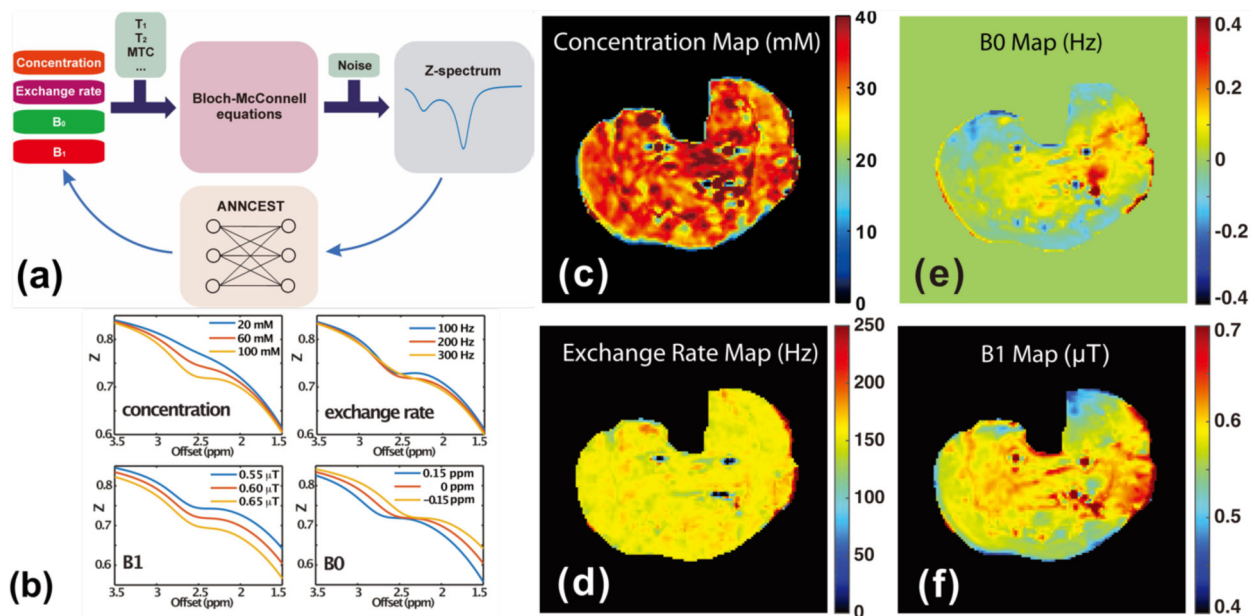


**Figure 5.**

(a) The z-spectra and (b) corresponding asymmetry plots for the soleus muscle at baseline at 7T. Insert figure is a CrCEST asymmetry map. Here the signal  $(S(1.8)-S(-1.8))$  was divided by  $S(-1.8)$  instead of  $S_0$ . Figs. a and b were reprinted from Kogan F et al., Magn Reson Med 2014; 71:164. (c) Z-spectra of a wild type mouse brain fitted with Lorentzian functions using five pools. (d) Water DS and MTC were subtracted from the Z-spectra to extract amideCEST, GuanCEST and aliphaticNOE. Figs. c and d were reprinted from Cai K et al., NMR Biomed 2015; 28: 1. (e) Averaged Z-spectra of the mouse hindlimb collected at two different MRI fields (9.4T and 15.2T). The statistical comparison of PCrCEST from local Lorentzian fitting for the two fields are compared. (blue bar: 15.2T; red bar: 9.4 T) (f) Local Lorentzian fit to extract PCrCEST for two fields (blue line: 15.2T; red line: 9.4 T). The background lines for the fitting are plotted in dashed lines. Figs. e and f were reprinted from Chung JJ et al., Magn Reson Med 2019; 81:3476. (g-j) Flowchart of the polynomial

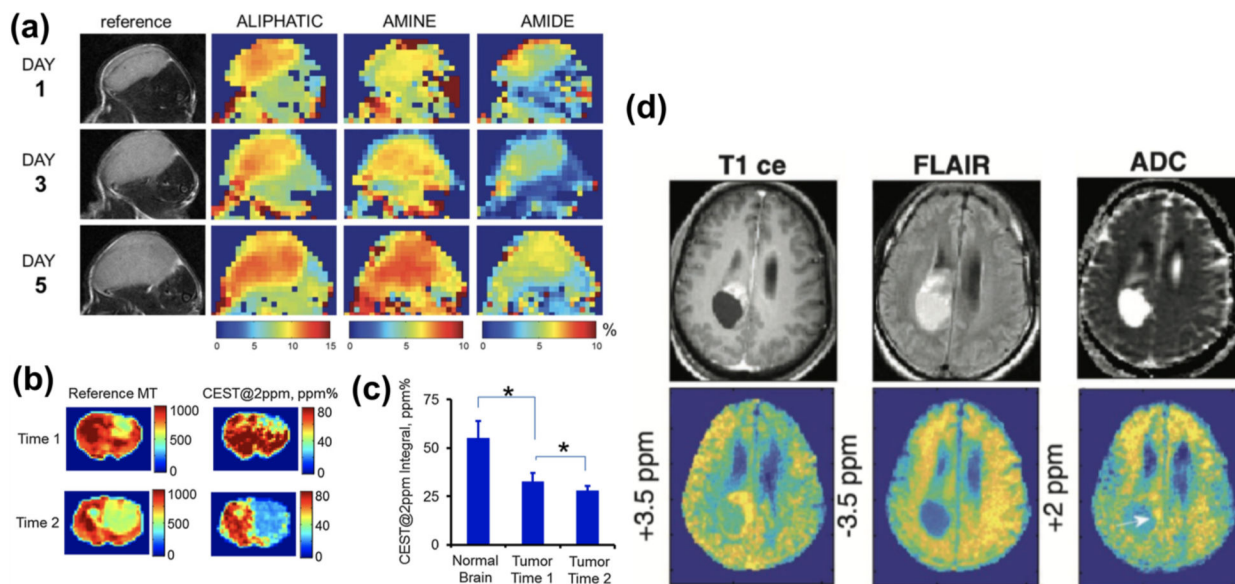
and Lorentzian line-shape fitting (PLOF) method for PCr mapping. (g) First, pixel-wise background Z-spectrum  $Z(R_{back})$  is fitted using data points from outside the range of the CEST peaks using Eqs.2, 3 and 6. (h) Pixel-wise  $R_{exch}$  values are obtained by fitting the full Z-spectrum  $Z(R_{back} + R_{exch})$  with fixed  $R_{back}$  according to Eqs.2–4. (i)  $R_{exch}$  is calibrated using the metabolic concentrations measured by  $^{31}\text{P}/^1\text{H}$  MRS. (j) The PCr concentration map of the mouse hind leg is calculated from the  $R_{exch}$  map after calibration.





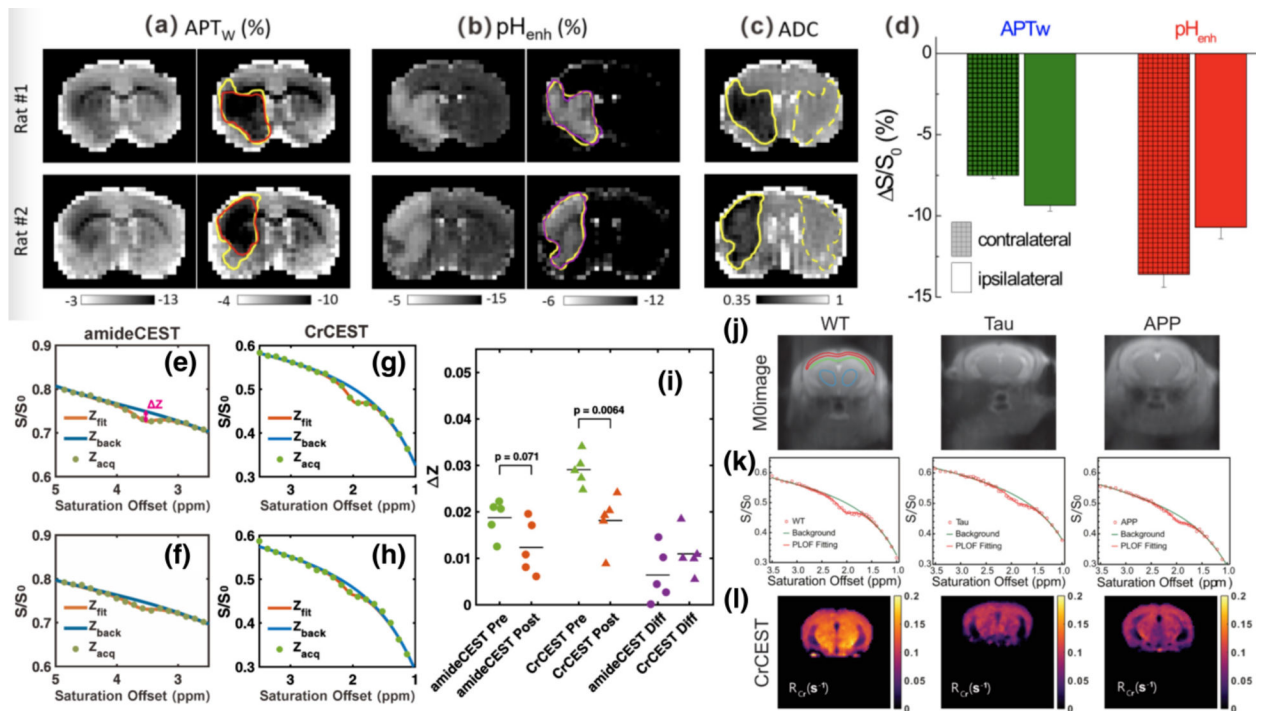
**Figure 6.**

(a) Schematic flowchart of ANNCEST. The annotated Z-spectra are simulated by Bloch-McConnell equations to mimic realistic tissue conditions by selecting proper parameters such as  $T_1$ ,  $T_2$ , MTC, and noise. ANNCEST is trained to extract relevant features between the Z-spectrum and quantifiable parameters. (b) The simulated *in vivo* Z-spectra with one single peak (2.5 ppm) and one MTC background as a function of different concentrations, exchange rates, saturation powers and  $B_0$  values. The typical PCr concentration (c) and exchange rate (d) maps together with the  $B_0$  (e) and  $B_1$  (f) maps obtained by the ANNCEST method on human skeletal muscle using the CEST images acquired with 0.6  $\mu\text{T}$  saturation power and 0.8 s saturation length. All figures are reprinted from Chen L et. al., Nat Commun 2020; 11:1072.



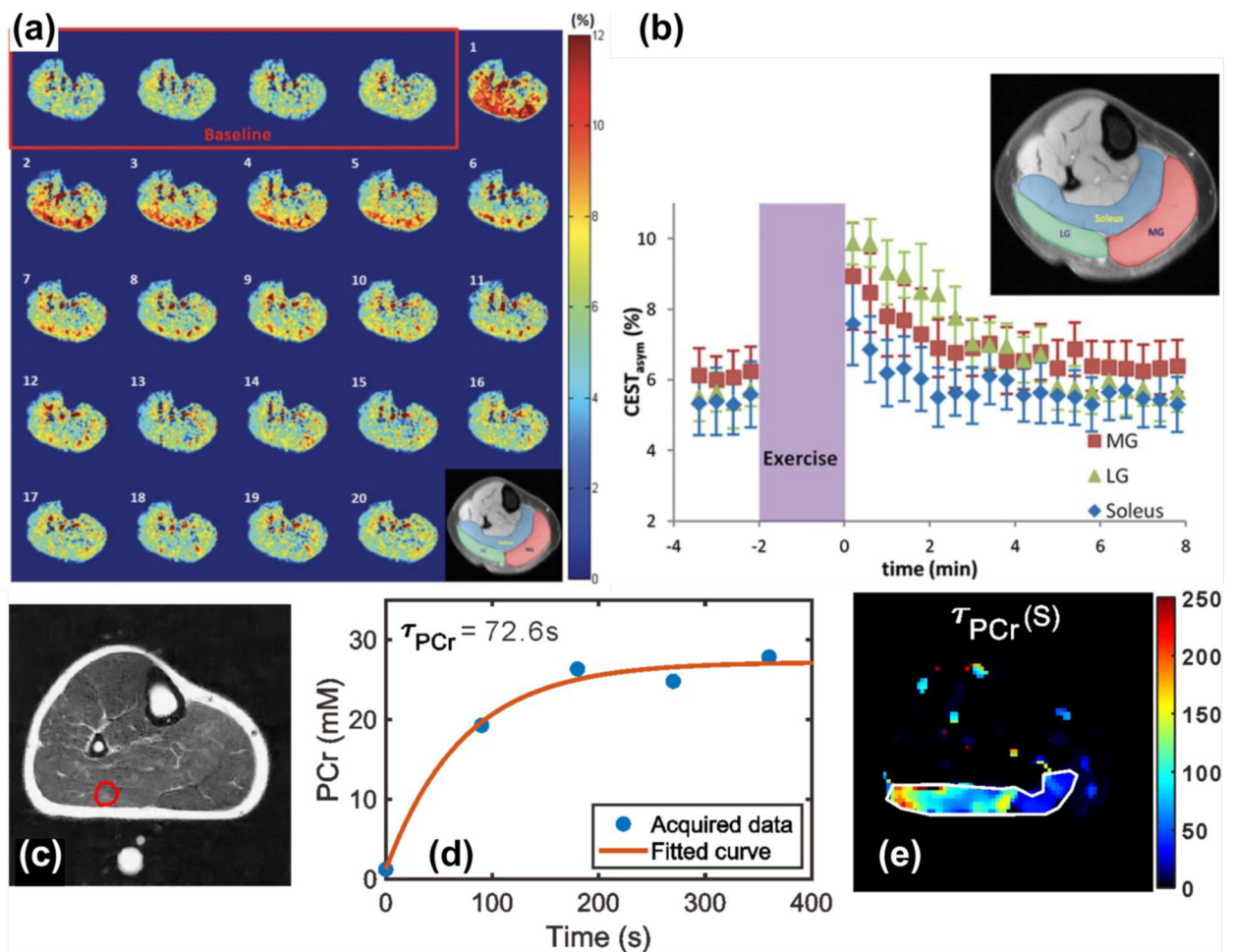
**Figure 7.**

(a) Lewis lung carcinoma tumor progression revealed by the AliphaticNOE, CEST(2 ppm) (denoted as amine in the paper), and CEST(3.5) (denoted as amide in the paper) maps on the hind leg of a typical animal followed over a 5-day period. Maps were produced from the Lorentzian fitting algorithm. This figure was reprinted from Desmond KL et. al., *Magn Reson Med* 2014; 71: 1841. (b-c) The CEST integral signal at 2 ppm decreased in tumor compared with normal brain tissue and further reduced with tumor progression. This figure was reprinted from Cai K et. al., *NMR Biomed* 2015; 28: 1. (d) Application of CEST at  $\pm 3.5$  ppm and 2 ppm to a human patient with brain tumor at 9.4 T. The enhancement at the edge of the cyst is visible in the 3.5 ppm CEST map, while the CEST at 2 ppm show different contrast from both contrast at  $\pm 3.5$  ppm. This figure was reprinted from Zaiss M et. al., *Magn Reson Med* 2019; 81: 3901.



**Figure 8.**

(a) Comparison of in vivo APT weighted image (APT<sub>w</sub>) and pH enhance (pH<sub>enh</sub>) maps on rat brain with stroke model. (a-b) APT<sub>w</sub> and pH<sub>enh</sub> maps for two typical rat brains measured at 2 h post stroke are plotted with two different scale bars (10% and 6%). (c) Respective apparent diffusion coefficient maps showed the ischemic core region. (d) The magnitude of contrast between ipsilateral and contralateral ROIs, respectively. The pH<sub>enh</sub> contrasts are higher than those for APT<sub>w</sub>. Figures a-d were reprinted from Jin T et. al., *Neuroimage* 2017; 157: 341. (e-i) Sensitivity of amideCEST and CrCEST MRI for detecting pH changes in mouse brain during CO<sub>2</sub> inhalation. Representative Z-spectra for amideCEST (e,f) and CrCEST (g,h) experiments (e,g) pre-CO<sub>2</sub> and (f,g) during CO<sub>2</sub> inhalation for the cortex region. Solid lines are the background fitted using the polynomial and Lorentzian line-shape fitting (PLOF) method. (i) Scatter plots showing the difference for amideCEST and CrCEST experiments extracted by PLOF (n= 5). (j-l) Typical S<sub>0</sub> images (j) cortical CrCEST Z-spectra (k), CrCEST maps (l) for wild type, Tau and APP AD mouse models. Both CrCEST Z-spectra and CrCEST maps of Tau and APP mice show a clear signal reduction compared to WT mice. Figures e-i were reprinted from Chen L et. al., *NeuroImage* 2021; 236: 118071.



**Figure 9.**

(a) CrCEST maps of a human calf muscle extracted by asymmetry analysis are shown. Figs. a and b before and every 24 seconds after 2 minutes of mild plantar flexion exercise. The segmented anatomical image is displayed in the insert image. (b) The averaged CrCEST signal as a function of time in three different muscles of the calf from Fig. a. Figures a-b were reprinted from Kogan F et. al., *J Magn Reson Imaging* 2014; 40: 596. (c-e) Calculation of the PCr recovery time constant  $\tau_{PCr}$  from the Cr maps measured with PCrCEST. (c) T<sub>2</sub> weighted anatomical image and selected ROI (red circle) for the following PCr measurement. (d) The PCr concentration as a function of recovery time and the fitting curve with a single exponential recovery function. (e) The typical  $\tau_{PCr}$  map from the pixel-wise PCr fitting curve. The fitted  $\tau_{PCr}$  values within the regions circumscribed by the white line are  $70.7 \pm 55.4$  s (mean  $\pm$  s.d.). Figures c-e were reprinted from Chen L et. al., *Nat Commun* 2020;11:1072.

**Table 1:**

Comparison of difference CEST quantification methods.

Quantification methods	Advantages	Disadvantages	Applications
MTasym	Easy to implement. Short scan time.	Many sources of contamination from MTC, other CEST/NOE contrasts and $T_1/T_2$ .	Relative CEST signal change in tumor assessment, contrast agent injection and pH alternation. Glutamate and CrCEST change during challenging.
Lorentzian fitting	<u>Suppressing MTC, DS and <math>T_1/T_2</math> contamination.</u> <u>Achieving multiple CEST contrasts in one scan.</u>	Long scan time. Still has contamination from other CEST/NOE contrasts.	Protein profiling in tumor assessment and neurodegenerative diseases.
PLOF	<u>Highly specific.</u>	Only works for CEST contrasts with distinguishable peaks. Scan time is longer than MTasym but shorter than Lorentzian fitting	Quantification of amideCEST, CrCEST, PCrCEST and ArgCEST.
Three-point Method	<u>Highly specific.</u> <u>Short scan time</u>	Only works for CEST contrasts with distinguishable peaks and the peaks must be far away from water. Requires perfect shimming.	Relative CEST signal change in amideCEST and CrCEST at high fields.
ANNCEST	<u>Highly specific.</u> <u>Short processing time once ANN is well trained.</u>	ANN network training is challenging. Scan time is longer than MTasym but shorter than Lorentzian fitting	Quantification of amideCEST, CrCEST, PCrCEST and ArgCEST.

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