CMR-based T1-mapping offers superior diagnostic value compared to longitudinal strain-based assessment of relative apical sparing in cardiac amyloidosis

^{1*}Dennis Korthals, ^{1*}Grigorios Chatzantonis, ¹Michael Bietenbeck, ¹Claudia Meier, ¹Philipp Stalling and ¹Ali Yilmaz

¹Department of Cardiology I; University Hospital Münster; Münster, Germany

*: Both authors contributed equally to this work.

Like almost every other cvi42 circle user, we perform T1-/ECV-mapping according to the following steps. Further information can be found in the cvi42 manual or in the manual of the respective software provider.

- 1. Load native (T1n) and post-contrast series (T1e) in the respective module.
- 2. Draw endo- (green) and epicardial (red) contours as well as a blood (orange) contour and a marker for RV-Insertion (blue dot).





- 3. Forward the contours to all single images in T1n and T1e sequences.
- 4. Check for coarsely mismatched contours/myocardium and correct manually.



- 5. Register T1n- and T1e-images.
- 6. Generate T1n- and T1e-maps copy contours.



- 7. Enter recent hematocrit.
- 8. Calculate ECV-maps.





T1n-map ECV map

Global: T1n: 1298 ms T1e: 280 ms ECV: 81 %

T1e-map