

# Artifacts in MRI

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PHILIPS APAC

# Definition

**Artifact:** Any irregularity noted in an MR image which is related to the imaging process rather than to an anatomical or physiological abnormality.



- Clinical artifacts
- Technical artifacts

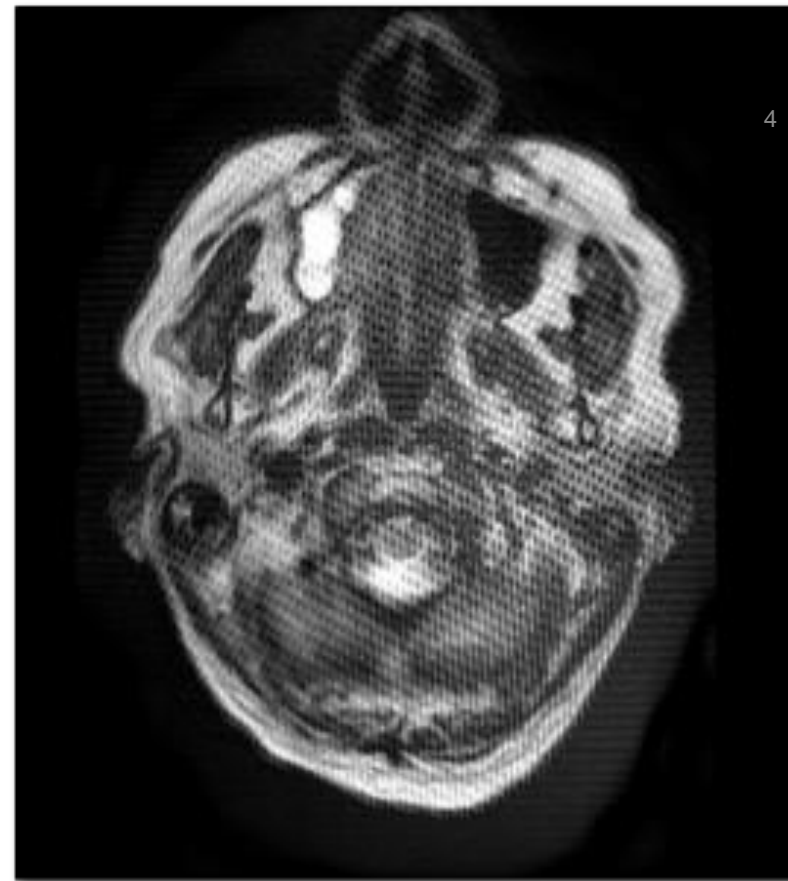
# Clinical artifacts

- Patient related
  - Motion : voluntary and involuntary (breathing, cardiac motion...)
  - Inherent to the patient
- Operator related
  - Bad settings of scan parameters
  - Related to setup and preparation of the patient

# Technical artifacts

- Hardware
  - Components and configuration
  - Degradation and malfunction
- Software
  - Release level
- Environment
  - Hospital equipment (spurious RF sources)
  - Moving cars, elevator next to MR room (B0 disturbances)
  - Temperature and humidity

- Physics phenomenoms  $f(x) = a_0 + \sum_{n=1}^{\infty} \left( a_n \cos \frac{n\pi x}{L} + b_n \sin \frac{n\pi x}{L} \right)$





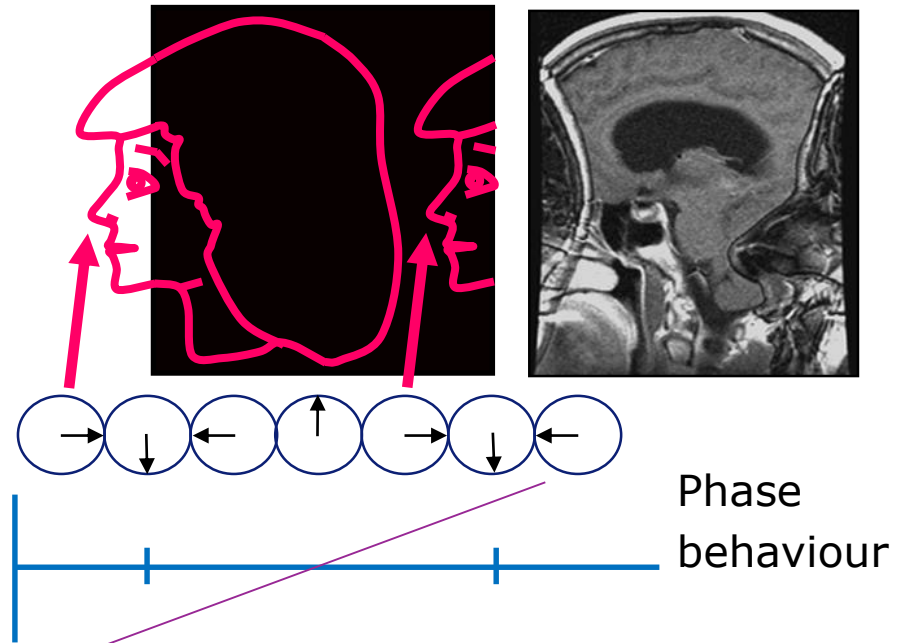
# Aliasing Artifact

Causes of the aliasing artifact:

- Tissue is outside FOV in phase direction

Recommendations :

- Increase FOV in phase direction
- Change Fold-over direction
- Oversampling



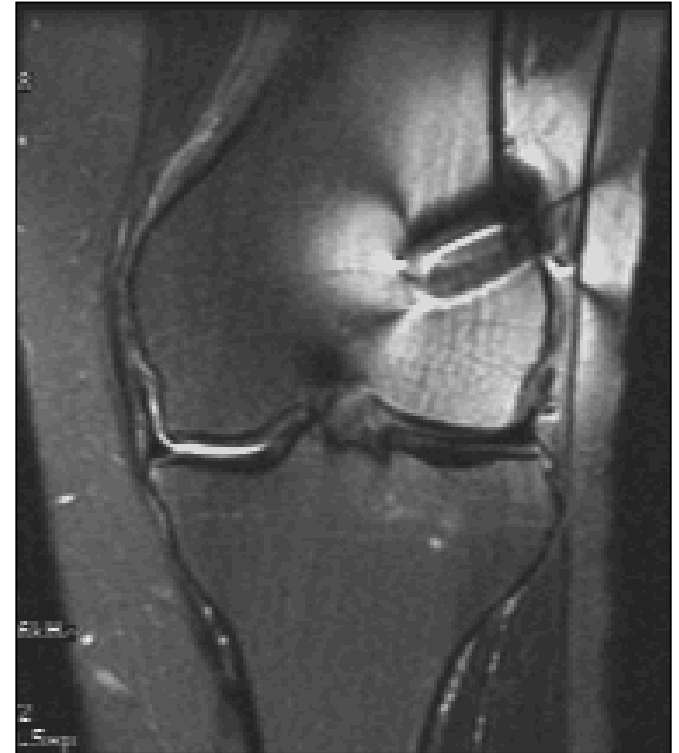


# Magnetic Material Artifact

Is caused by ferromagnetic implants

Recommendations :

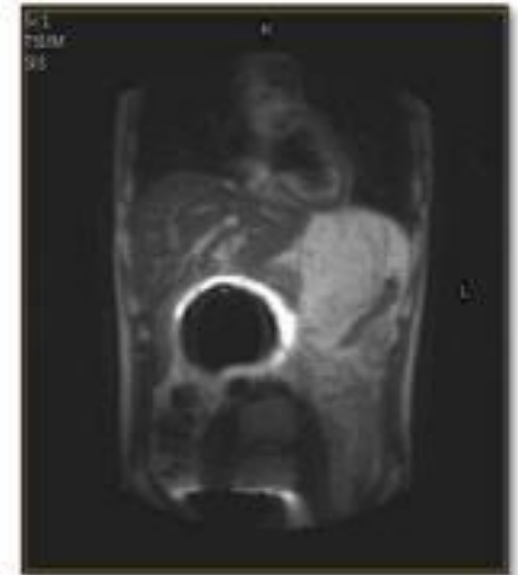
- Reduce water-fat shift
- Adapt fold-over direction
- Volume of shim outside of the metallic area
- Use sequence less susceptible for magnetic material influence
- Reduce voxel size
- Reduce TE
- O-Mar



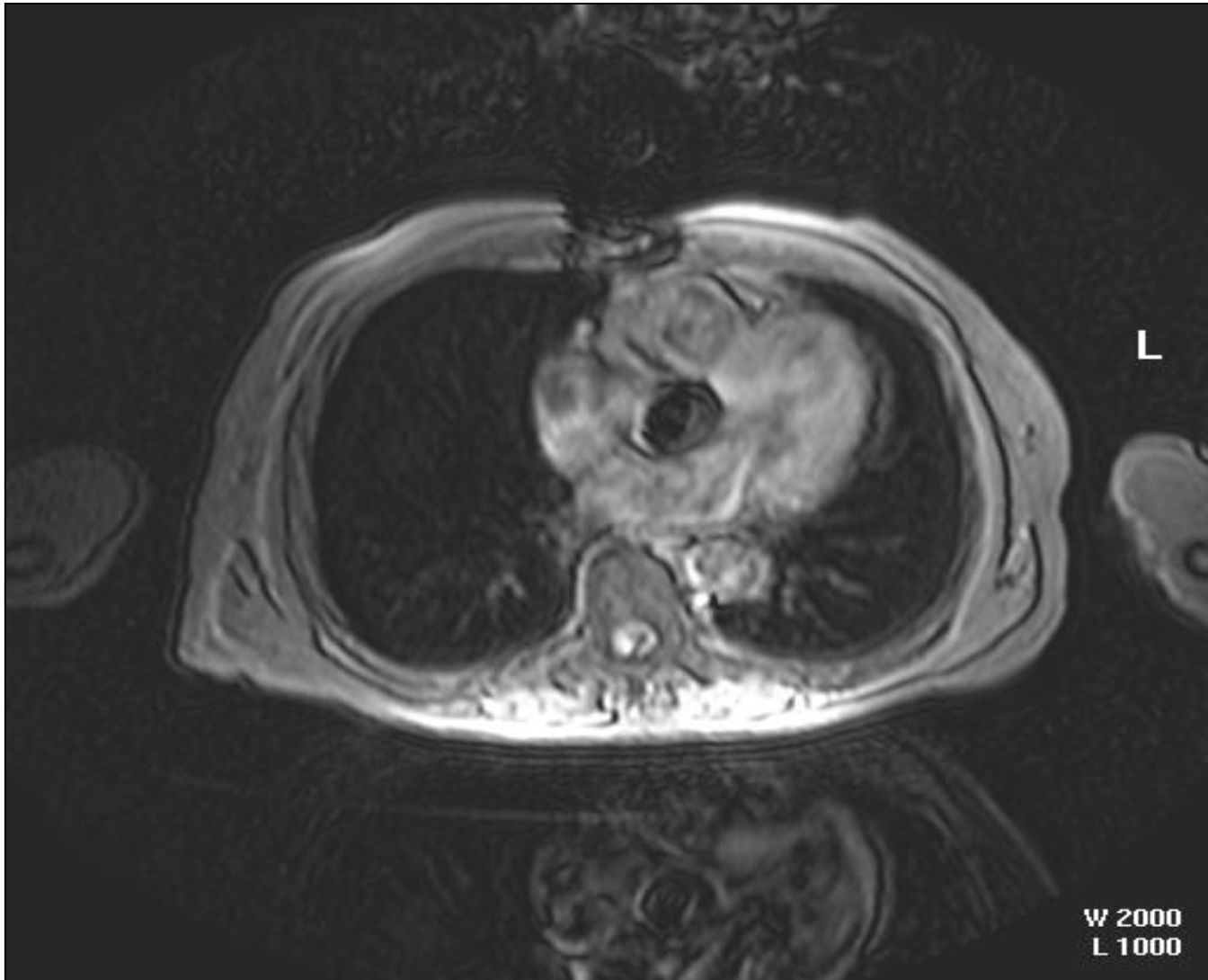


# Examples of metallic artifacts origins

- Internal
  - Surgical clips, staples, shunts
  - Dental implants and appliances
- External
  - Jewelry, buckles
  - Piercings
  - Metallic stitching in clothing
  - Hairpins, some hairpieces, wigs
  - Make-up, tattoo

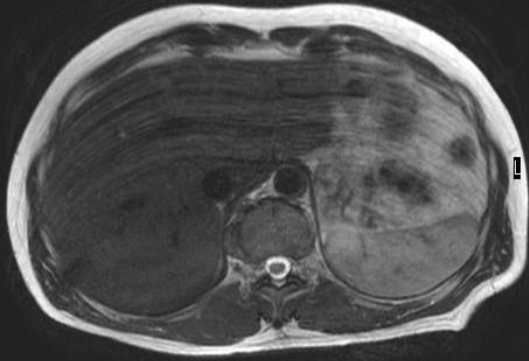


Warning: these items may also cause a burn risk



Sc 6  
TSE/M  
SI 23

A



Sc 6  
TSE/M  
SI 24

A



Sc 6  
TSE/M  
SI 25

A



Sc 6  
TSE/M  
SI 26

A



# Motion Artifacts

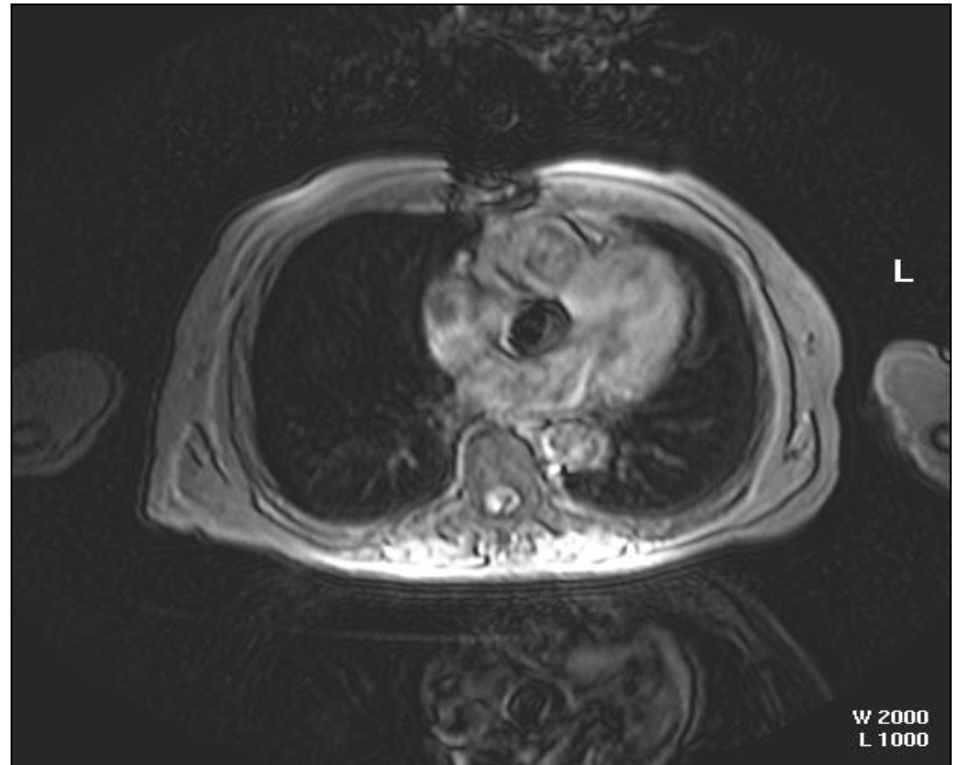
## Causes of the motion artifact:

- Involuntary patient movement during acquisition
  - Cardiac motion
  - Respiratory motion
  - Blood flow
  - CSF pulsation
- Patient movement during acquisition

# Cardiac Motion Artifacts

Solution for Cardiac motion artifacts:

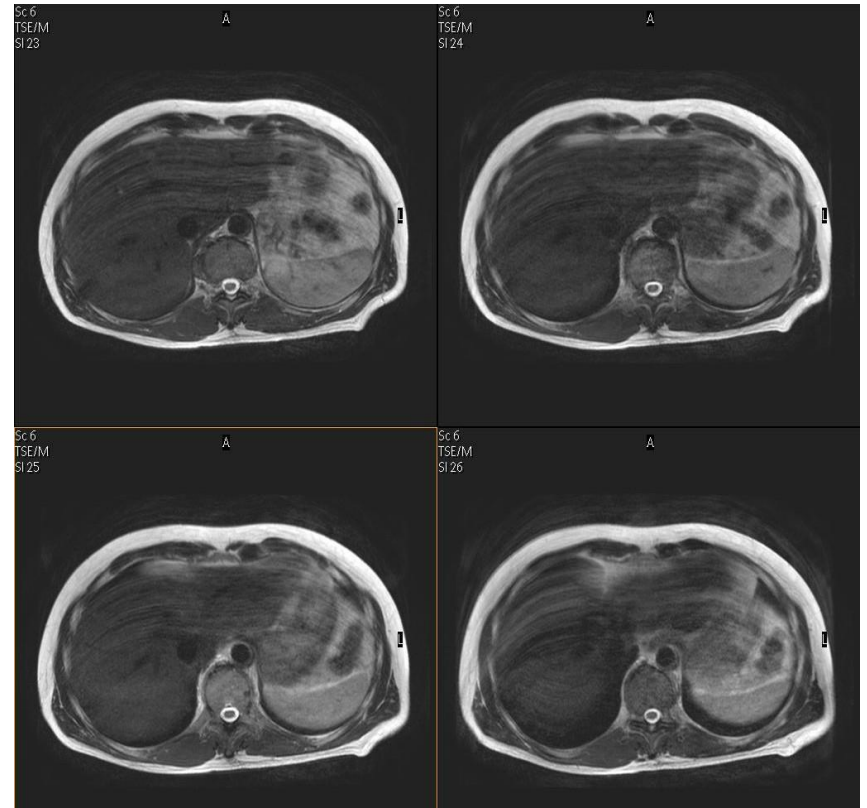
- Cardiac synchronization
- Flow compensation
- Choose appropriate phase direction



# Respiratory Motion Artifacts

Solution for Respiratory motion artifacts:

- Respiratory triggering
- Breath hold
- Navigator





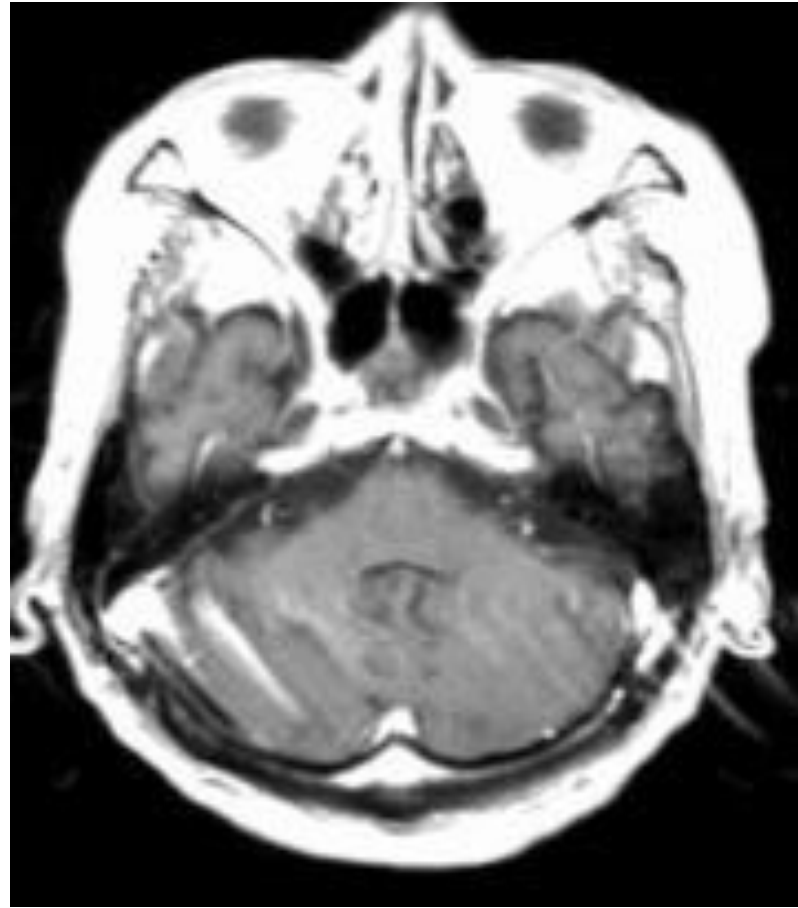
# Peristalsis Motion Artifacts

Solution for Peristalsis motion artifacts:

- Give an Anti-peristaltic drug (prescribed by referring physician)
- Patient preparation (NPO, Nothing Per Orem)
- Strap the patient tight
- MultiVane





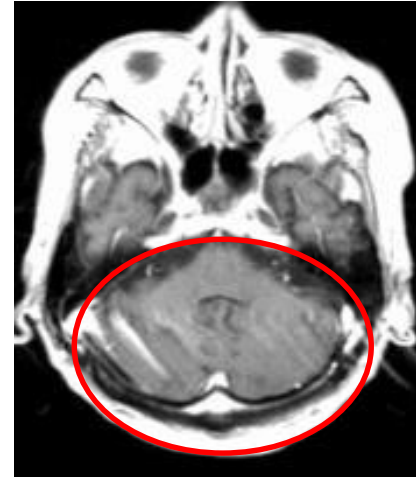


# Blood Flow Motion Artifacts

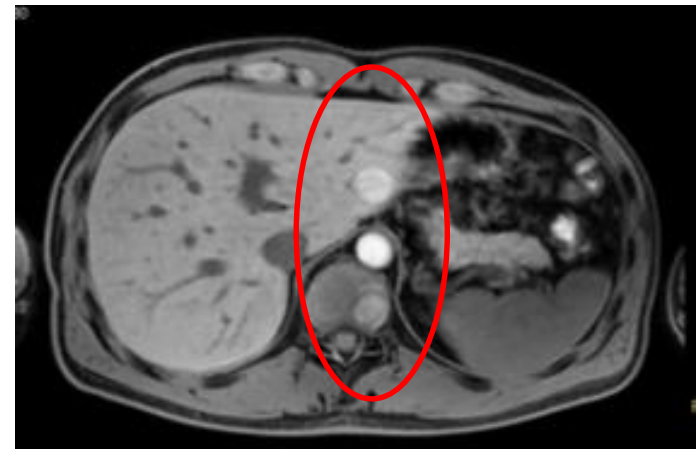
Solution for Blood flow motion artifacts:

- REST
- Flow compensation
- Cardiac synchronization
- Black blood sequences

flow com : no



flow com : yes





# CSF Pulsation Motion Artifacts

Solution for CSF pulsation motion artifacts:

- Flow compensation
- Cardiac synchronization
- b-FFE

flow com : no



flow com : yes





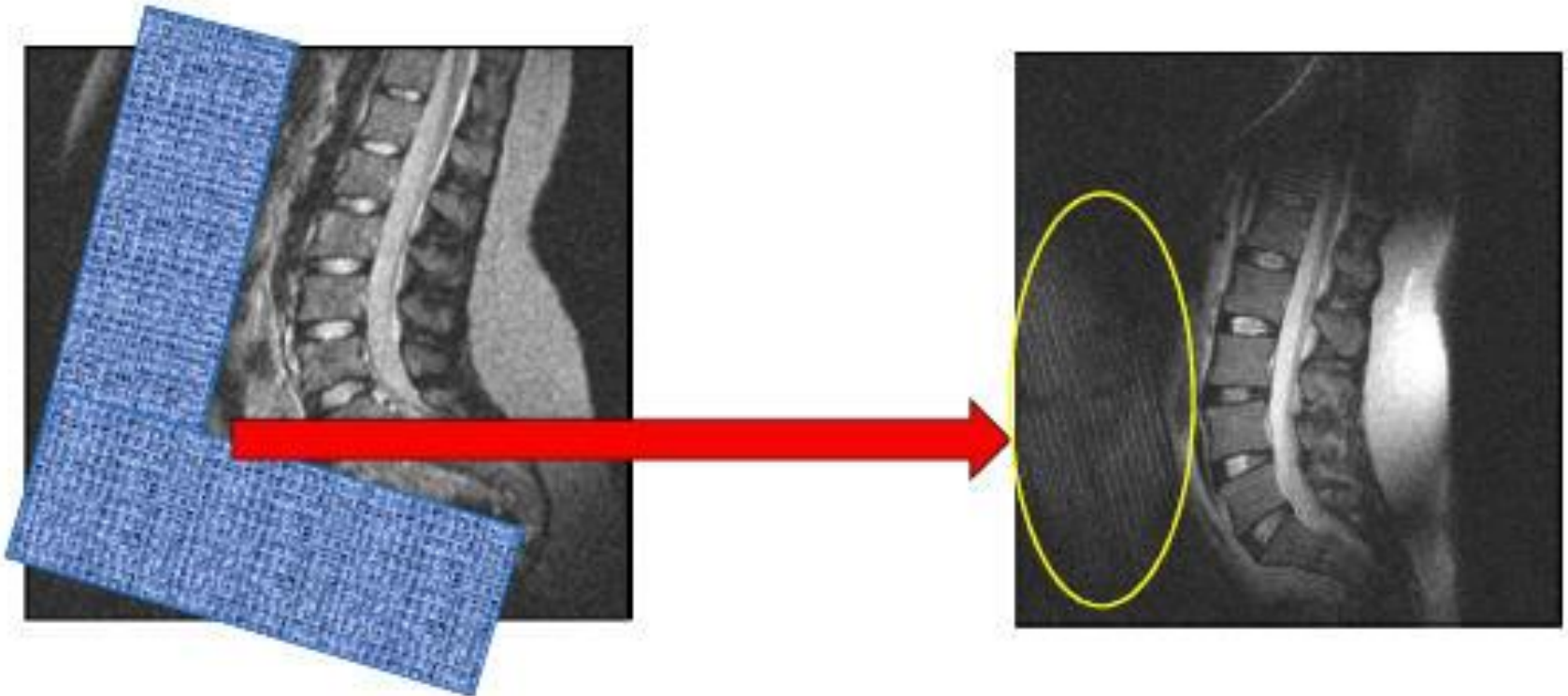
# REST Artifact

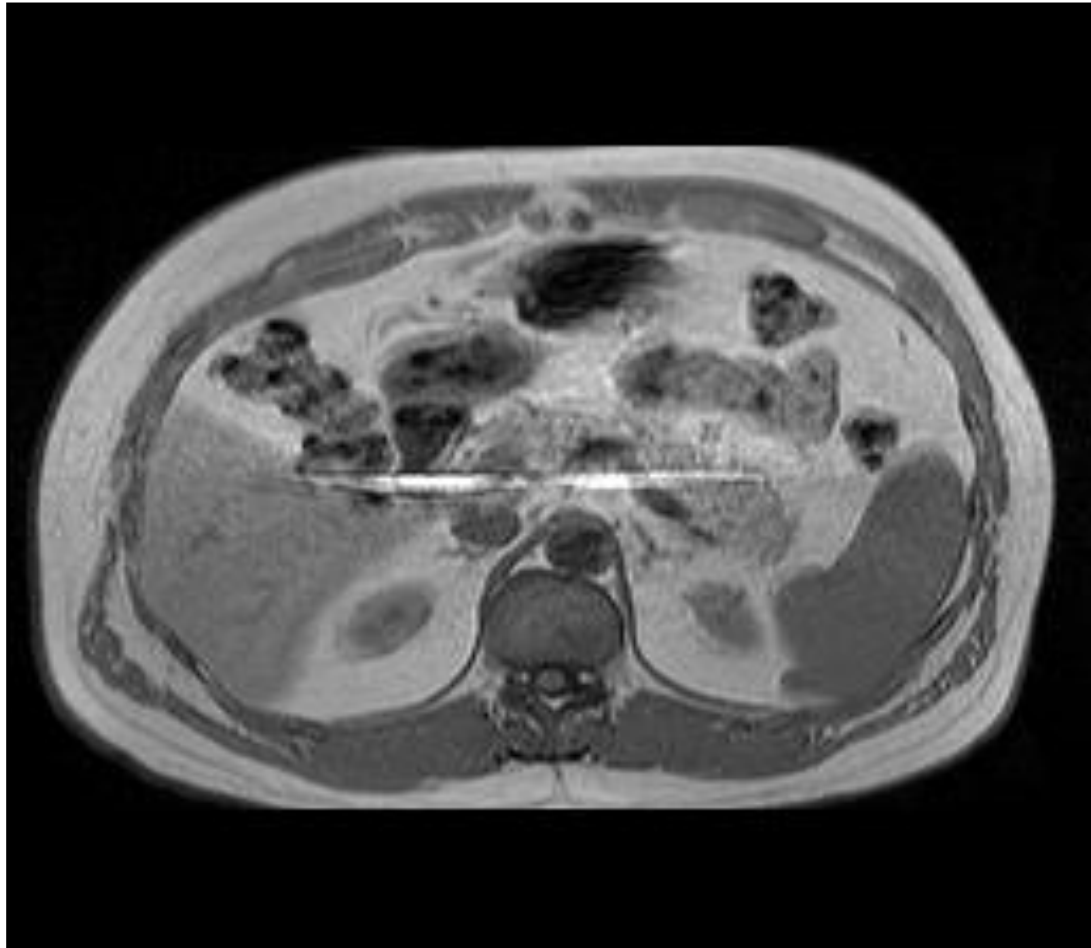
Causes of the REST artifact:

- Two or more REST slabs intersect each other.

Recommendations :

- Apply REST slabs so that they do not overlap.

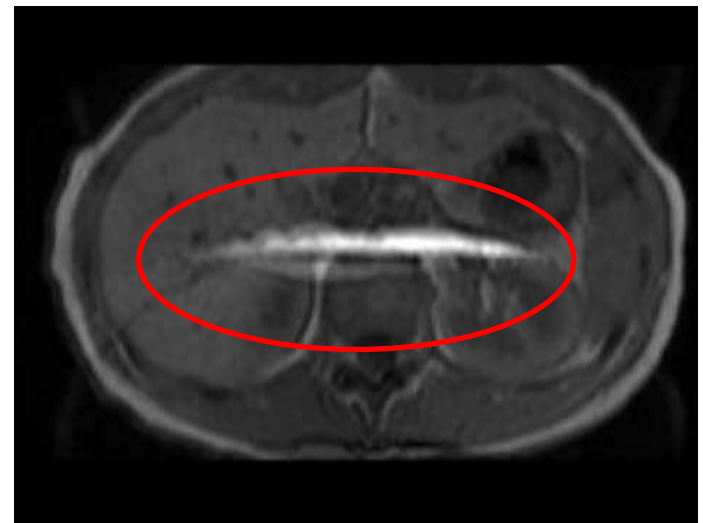
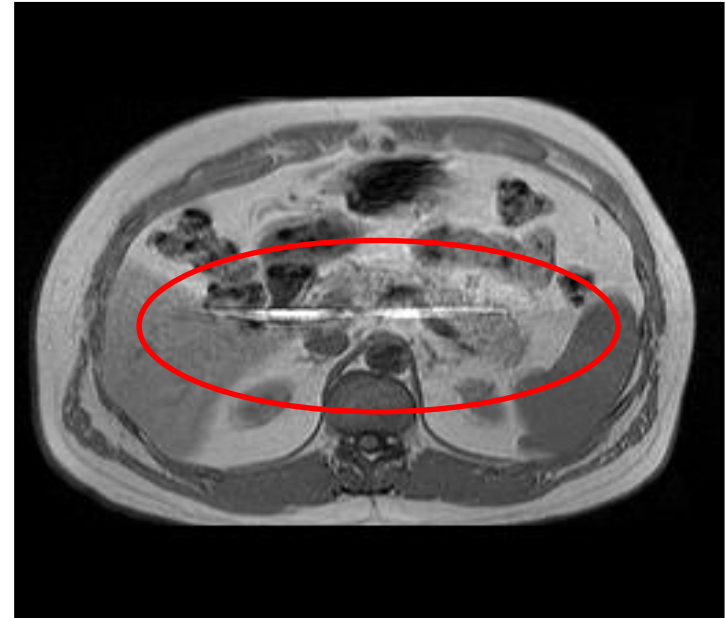




# SENSE Artifacts

Causes of SENSE artifact:

- FOV, RFOV or 3D volume planned too small on the anatomy

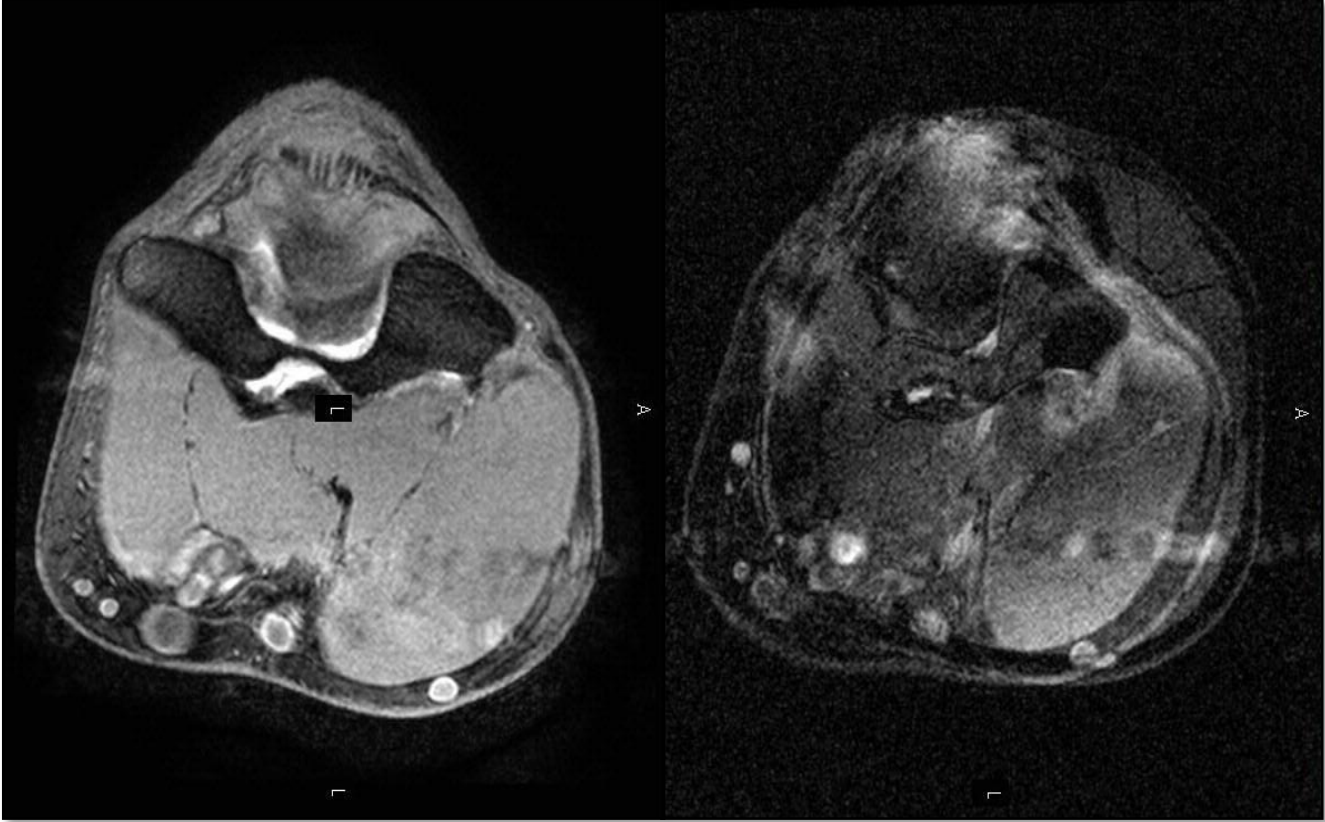




# SENSE Artifact

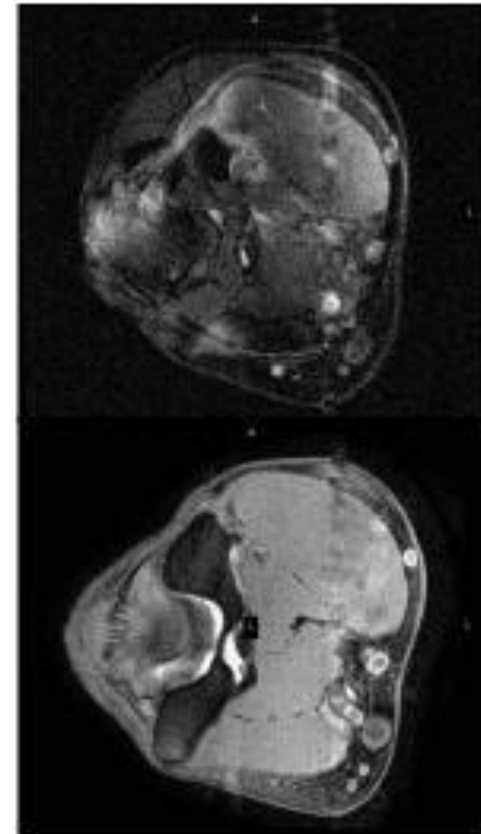
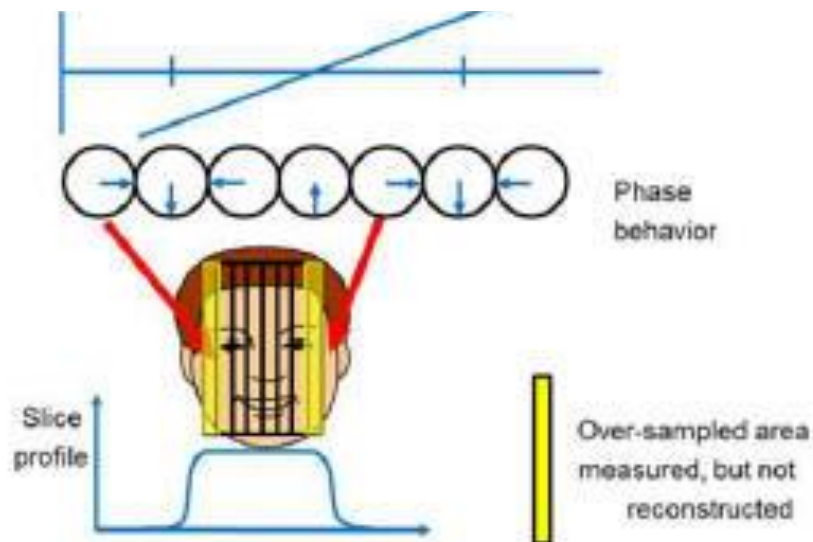
## Recommendations :

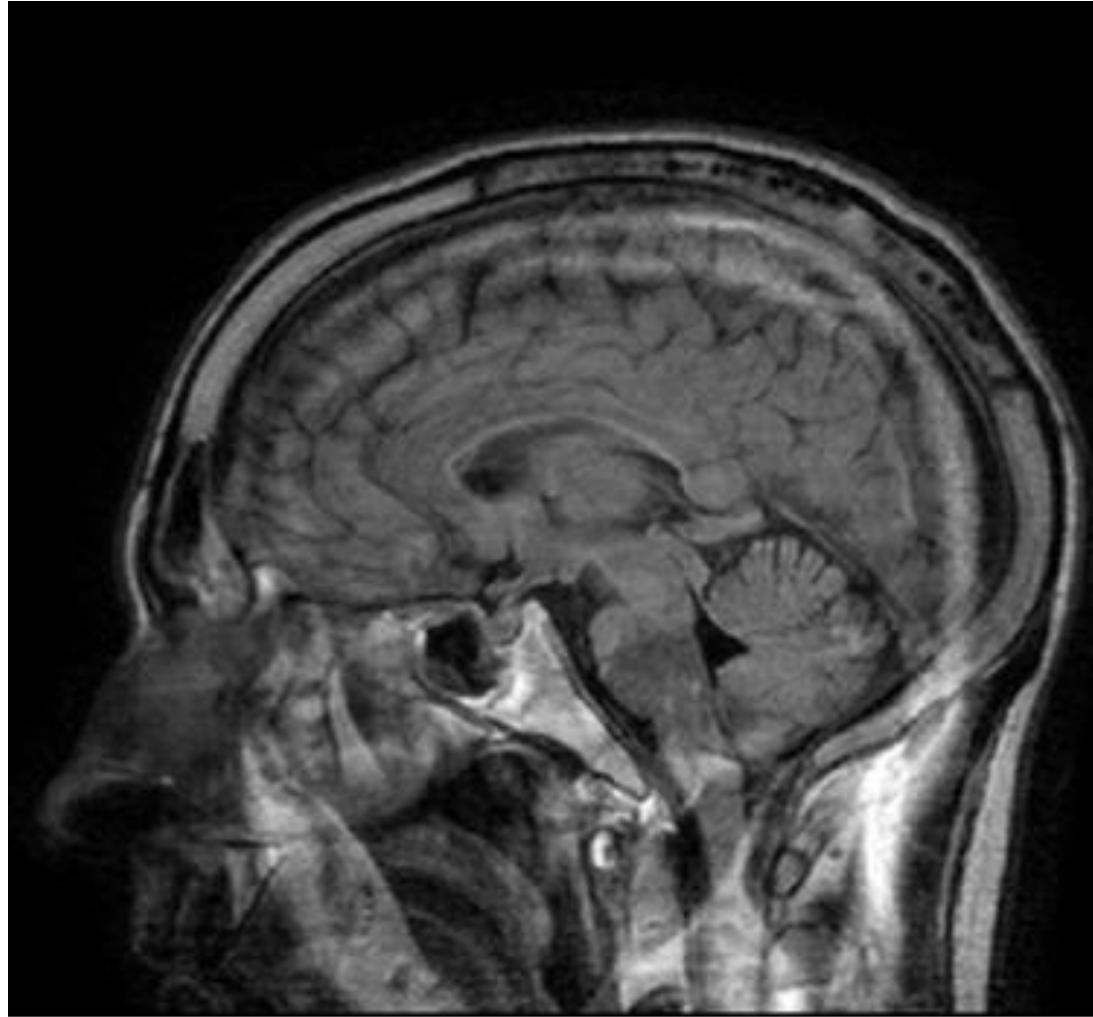
- Enlarge the FOV, RFOV or 3D
- Increase inplane oversampling
- Increase slice oversampling or increase slice coverage
- Reduce SENSE factor
- Make sure the pre scans are repeated if:
  - The coil or patient moved.
  - If plugs are removed and plugged in again.



# Foldover in Slice Selection direction (3D)

- Slice direction acts as additional phase encoding direction.
- Can be controlled by use of Slice Oversample factor



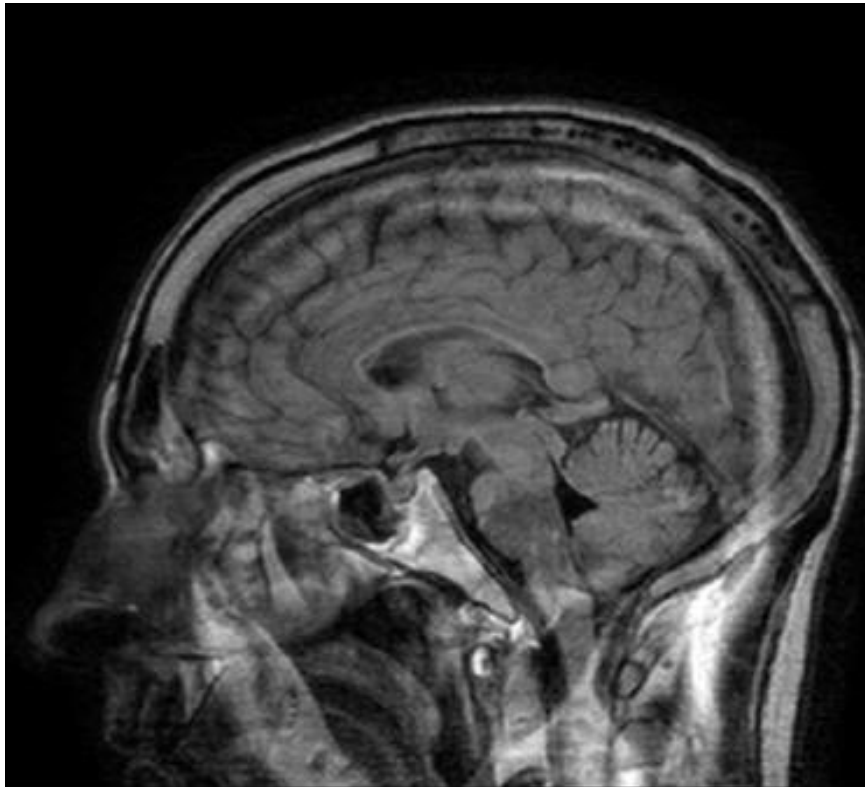


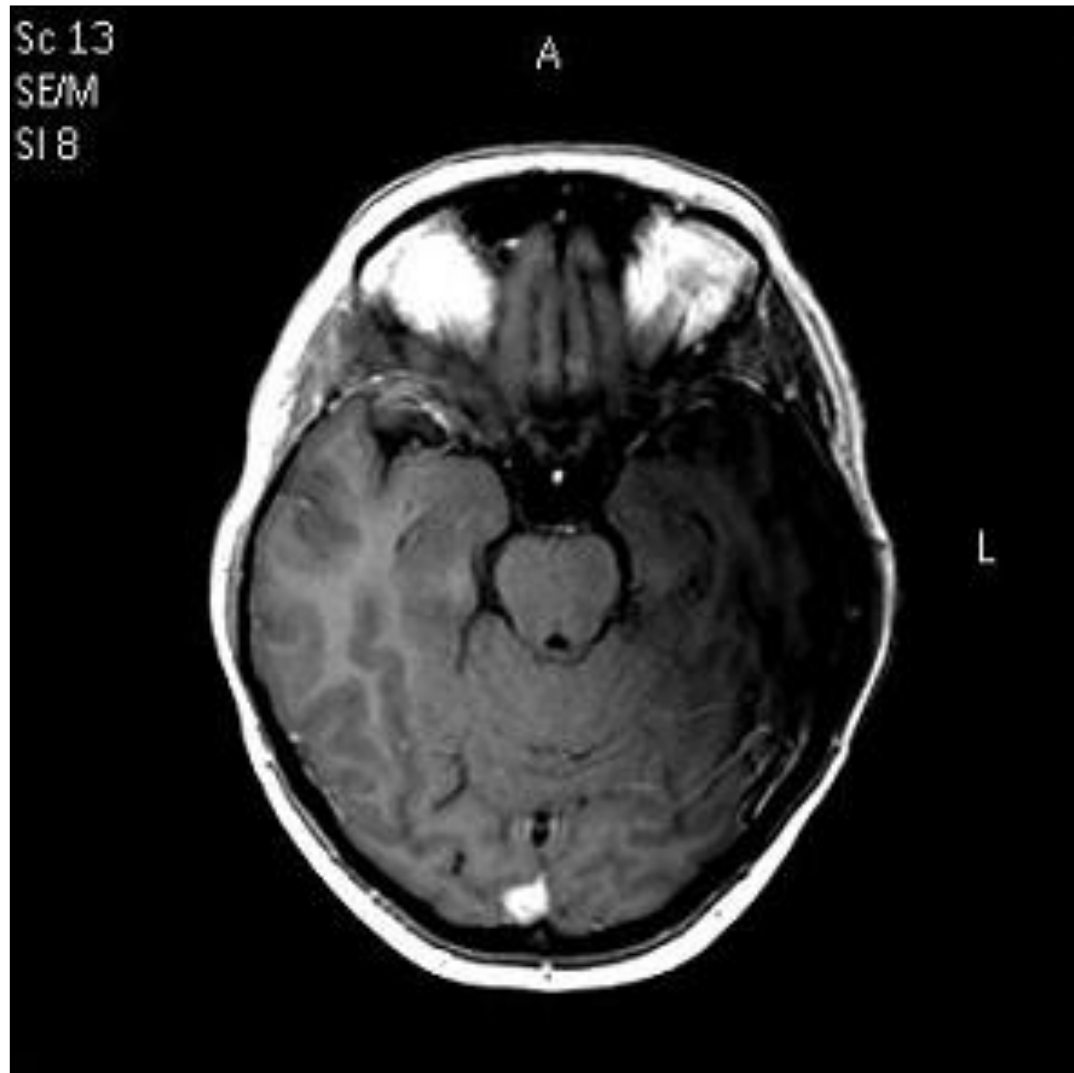
# SENSE foldover in slice selection direction

SENSE applied in SS direction → foldover occurs in central slices of the 3D volume.

Recommendations :

- Decrease SENSE factor
- Increase oversampling
- Increase SS coverage (increase slice thickness, increase number of slices)

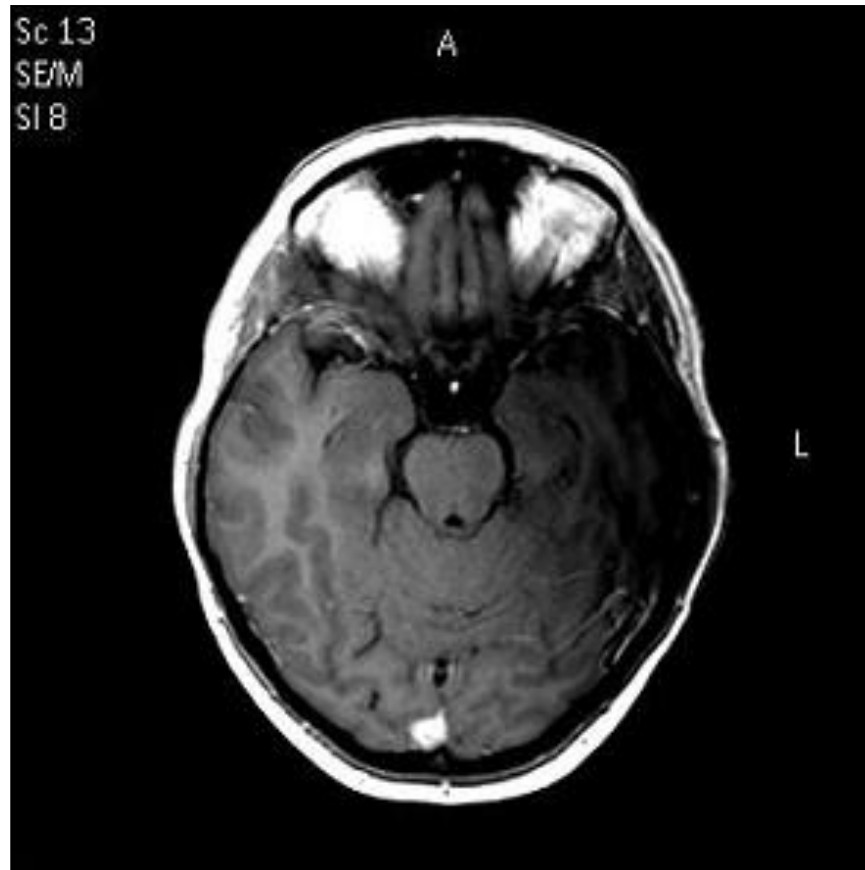




# Coil signal decrease

Recommendations :

- Reposition the coil/patient.
- Make sure coil parts are latched and coil is correctly plugged in.





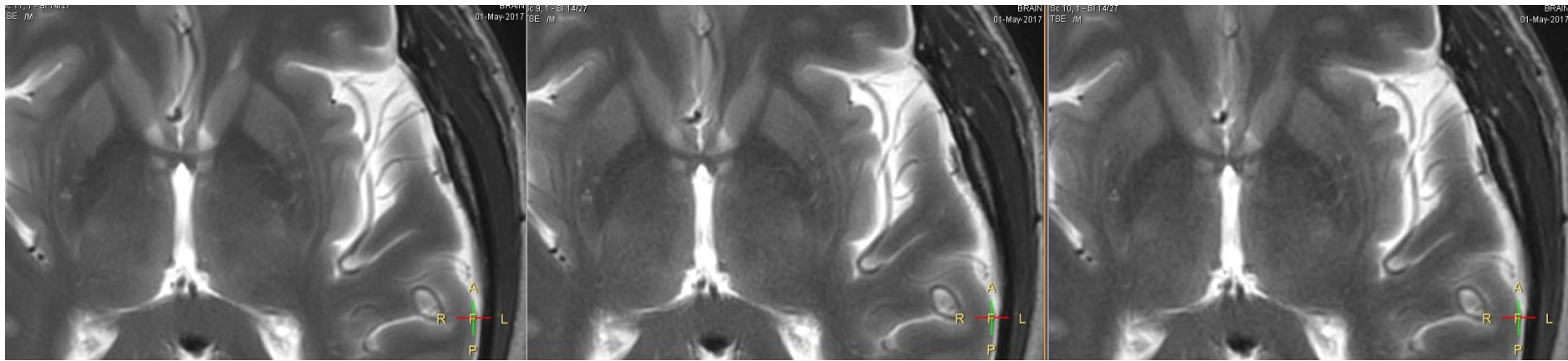


# Low MultiVane percentage

- Causes streaking artifacts



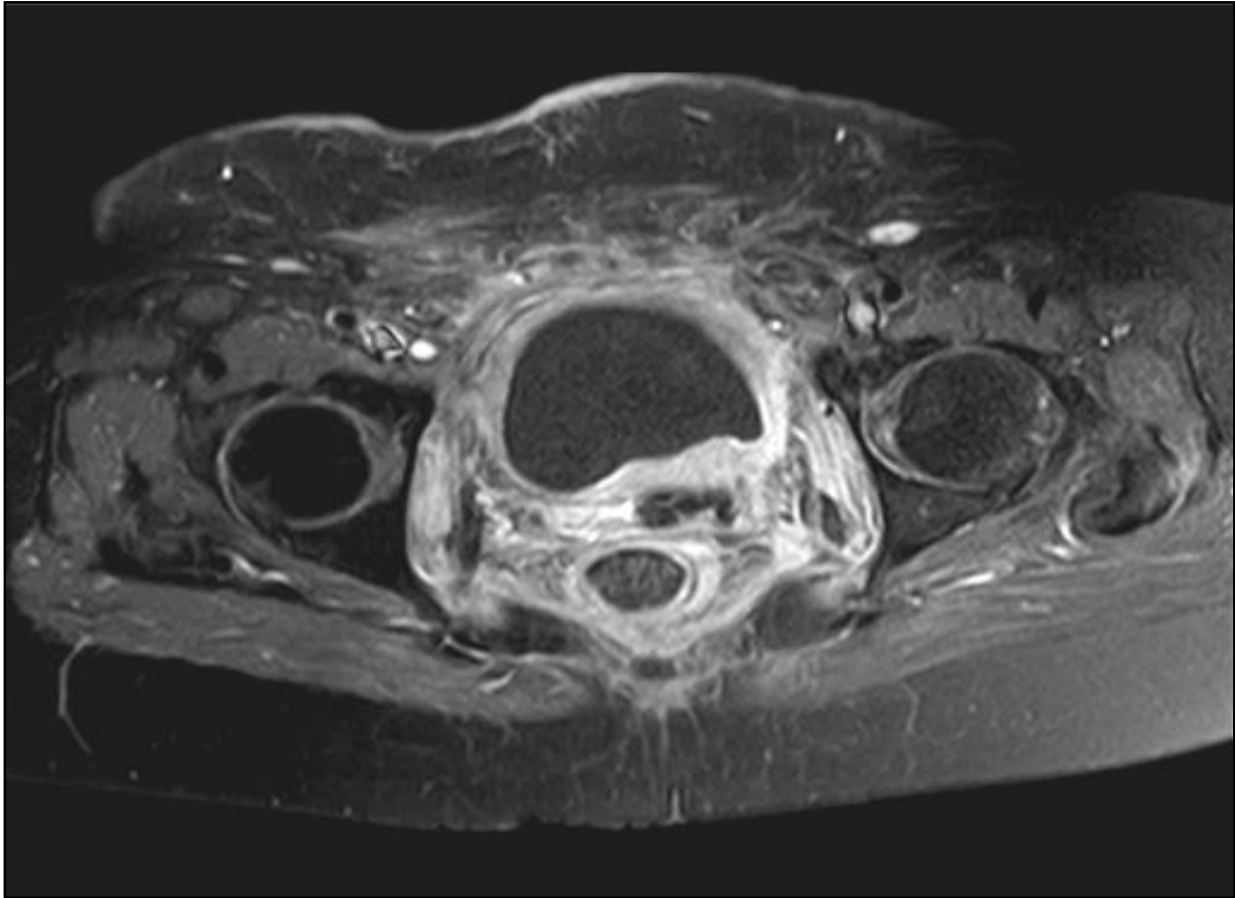
# MultiVane percentage increases SNR



300%

160%

100%



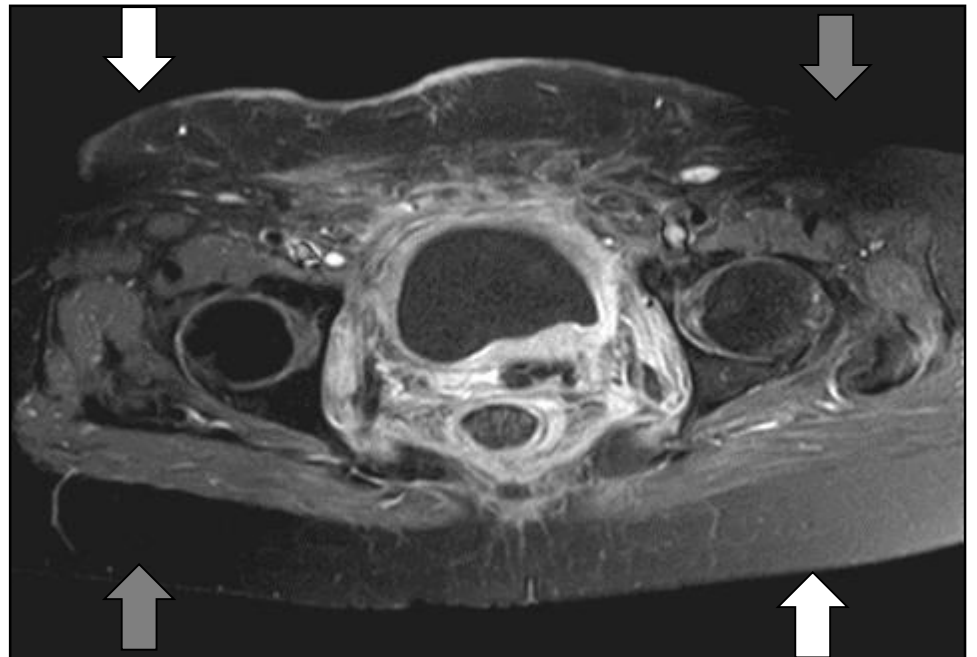
# Quadrupole Effect

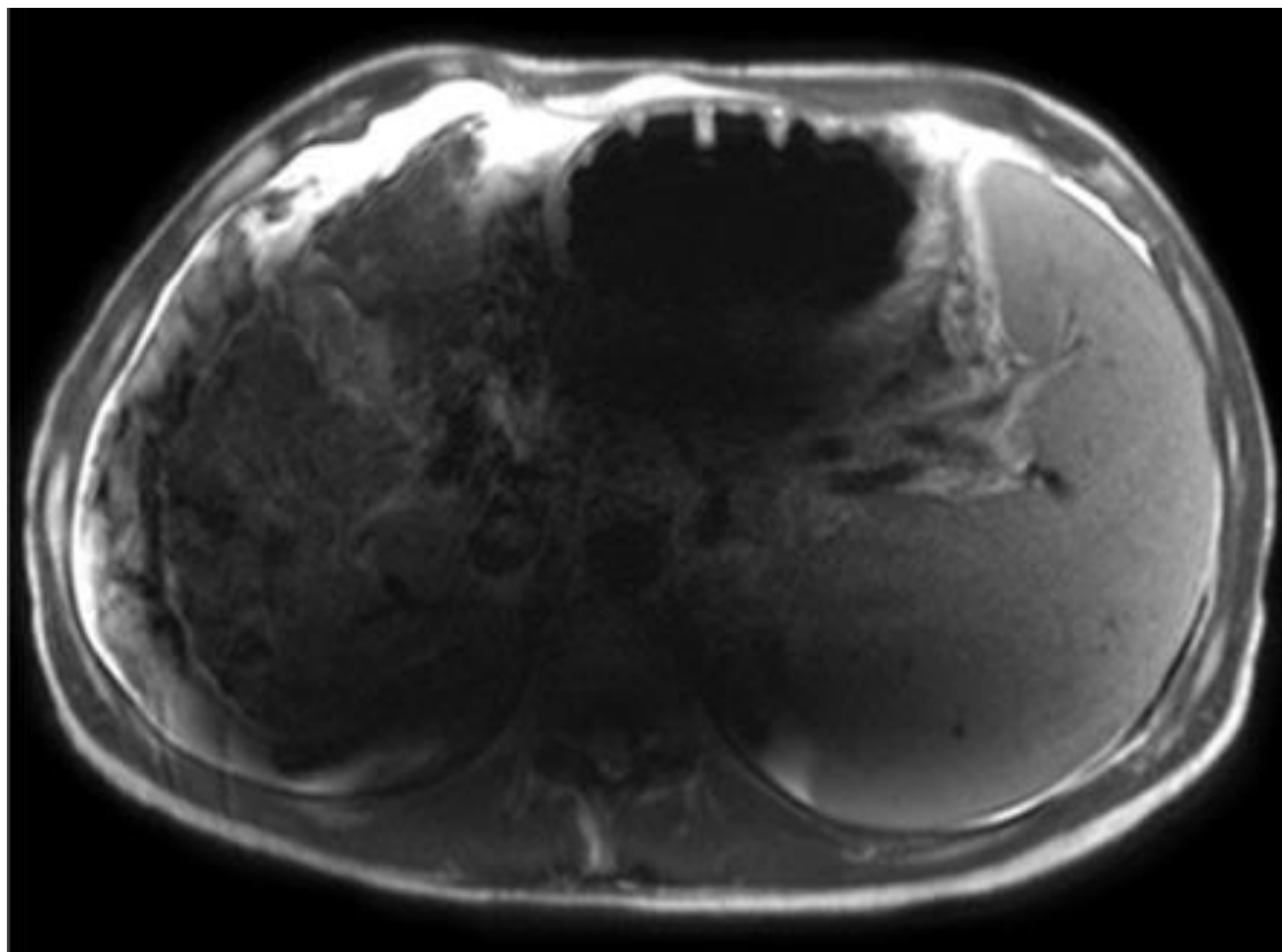
Causes of Quadrupole:

- B1 disturbance from L to R and A to P caused by standing RF waves in the patient.

Recommendations :

- Select STIR or SPAIR instead of SPIR.

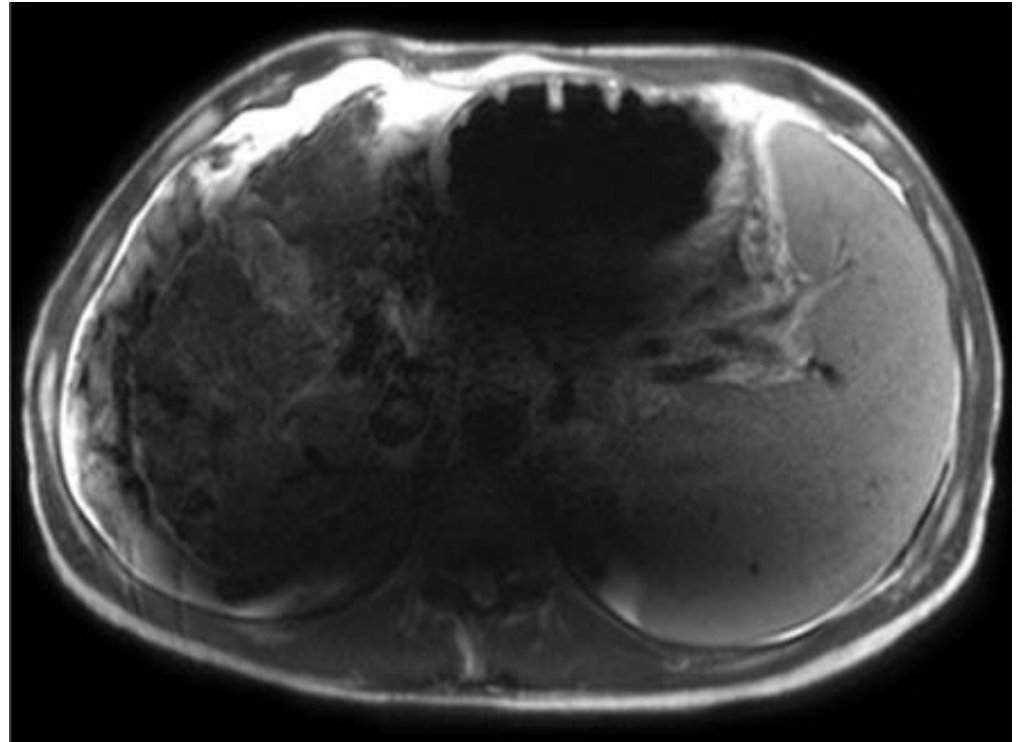


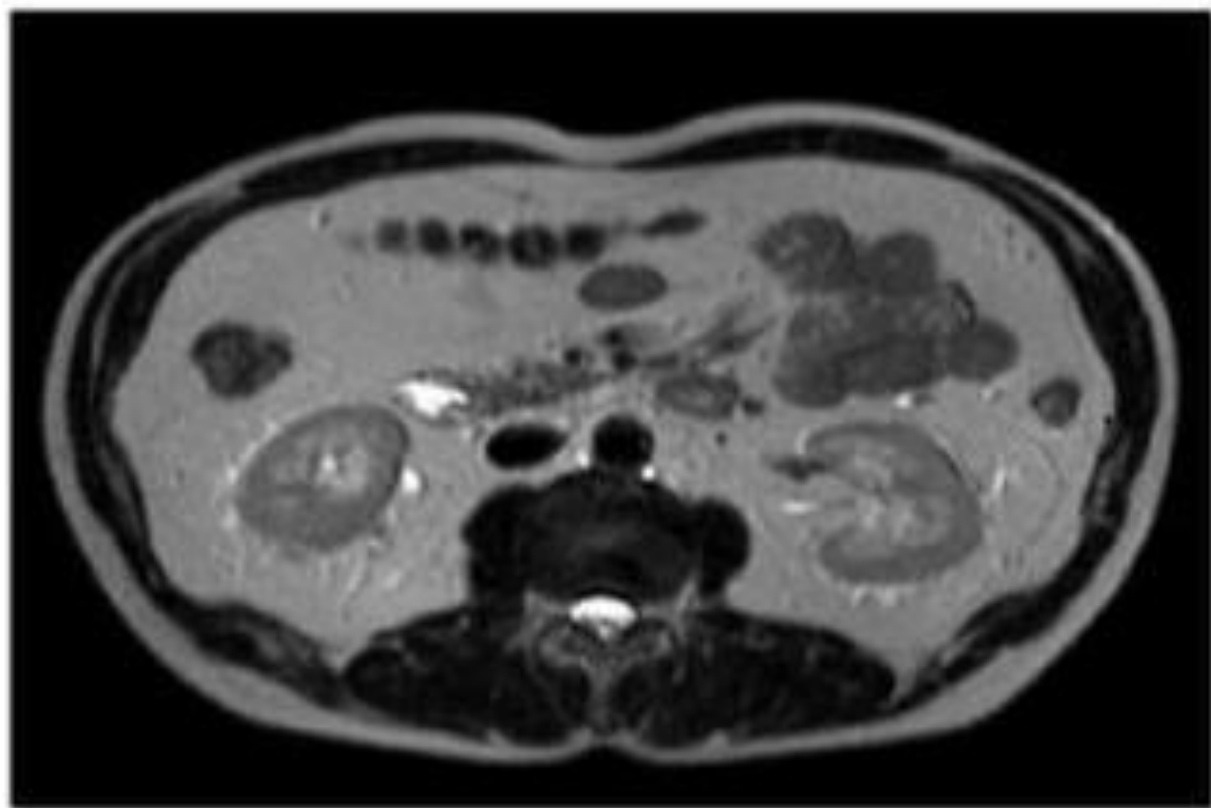


# B1 Inhomogeneity

Recommendations to get a more homogeneous image:

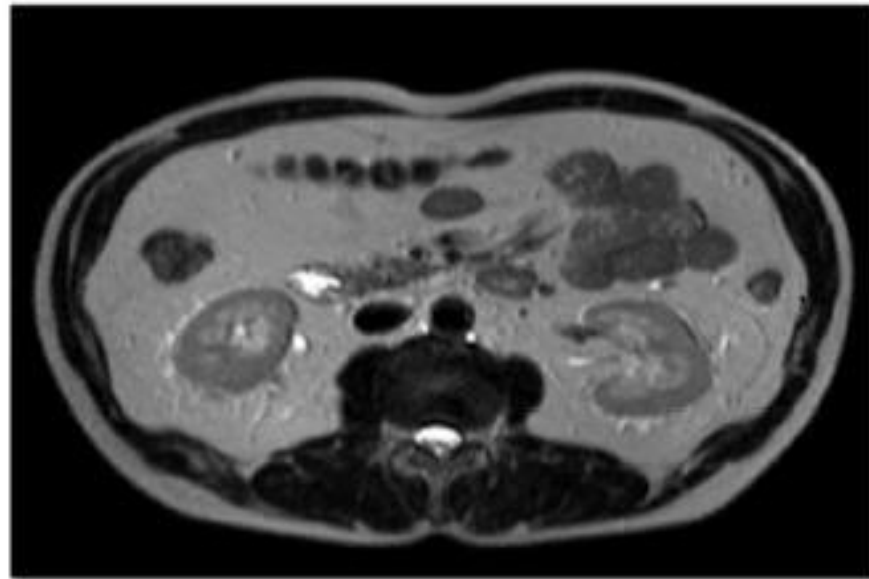
- CLEAR algorithm
- Body tuned CLEAR algorithm





## Blur artifact (high turbo factor)

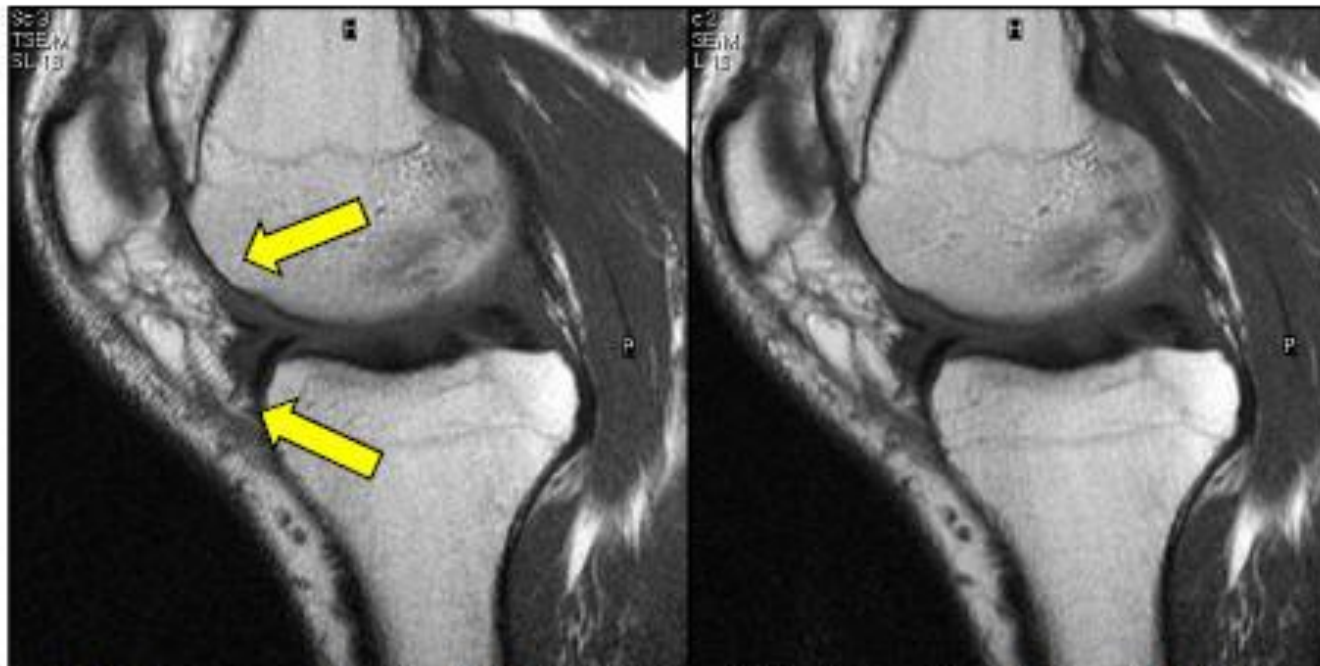
- Tends to happen when an operator attempts to increase the spatial resolution of a single shot scan.







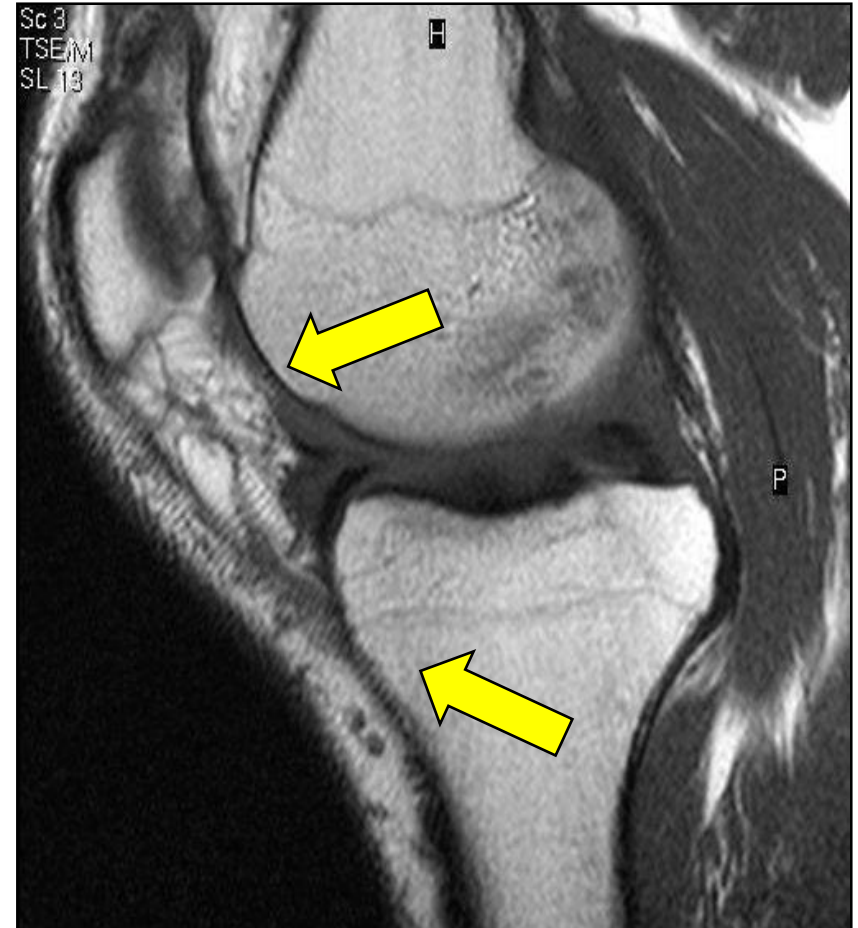
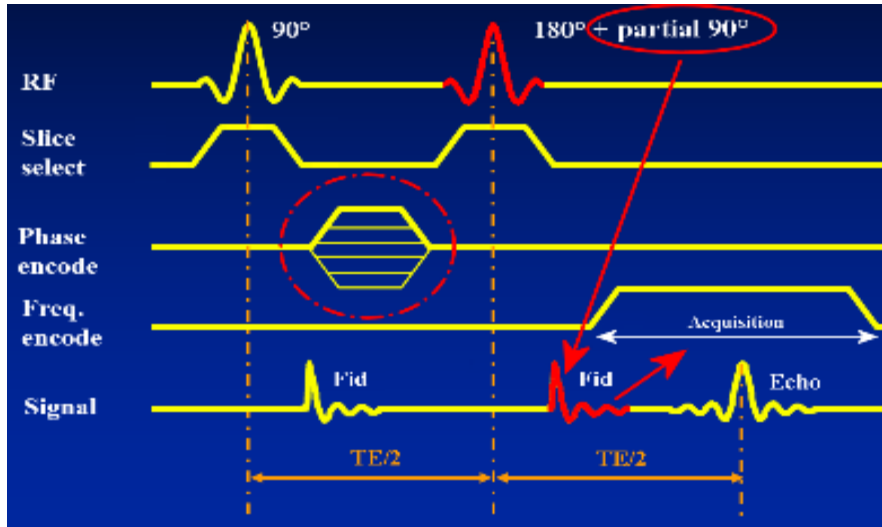
# FID artifact (or stimulated echoes)



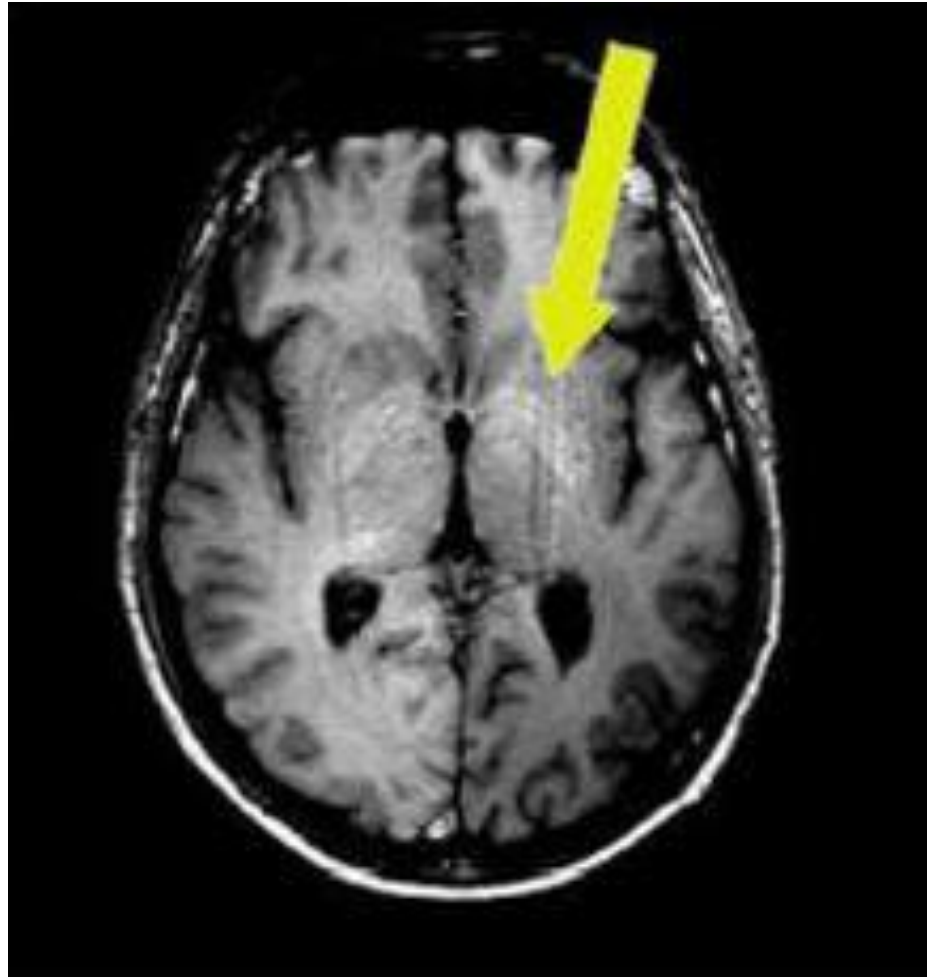
Most apparent with T1/PD TSE      Solution: Use 2 "real" NSA's

## FID artifact (or stimulated echoes):

- Can be reduced by:
  - **NSA** minimum of **2**
  - **Flow compensation** is set to **yes**
  - **FID reduction** (gradient crusher) set to **strong**



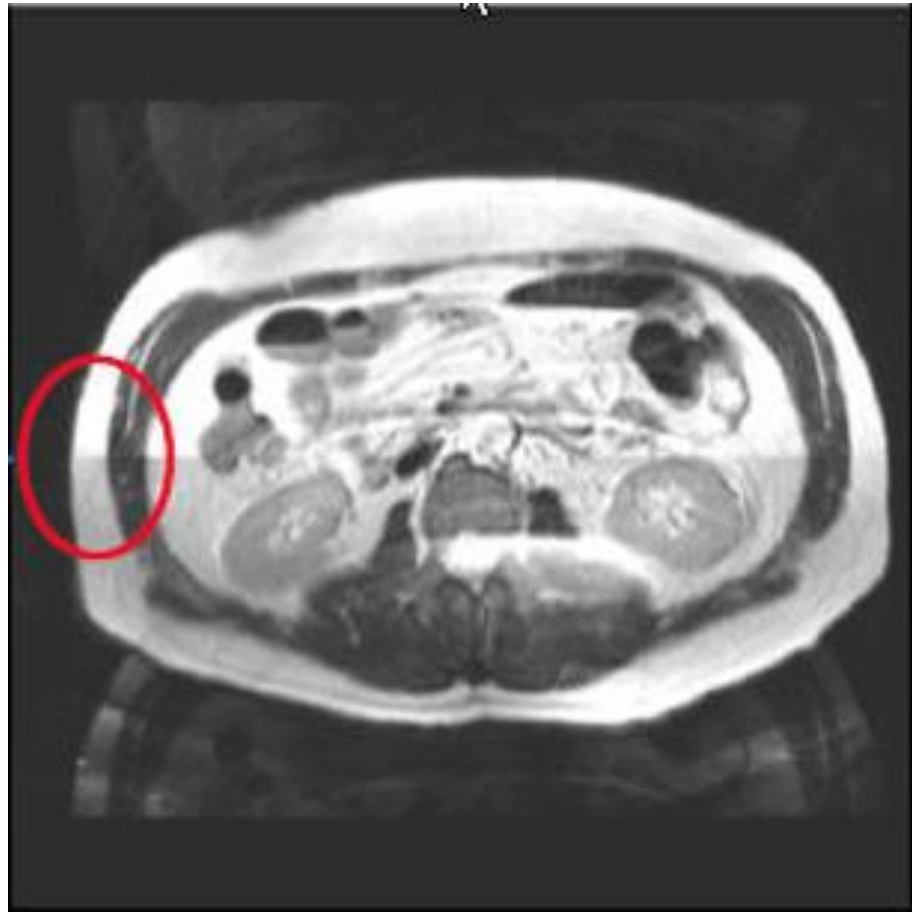
Do not combine flow compensation and FID reduction.  
Only use flow compensation if FID reduction parameter is not available.  
(Because flow compensation will reduce SNR)



# Proton signal in passive headset

- Advice has always been to use only the patient headset that connects to system.
- Can fold into brain when SENSE is applied.

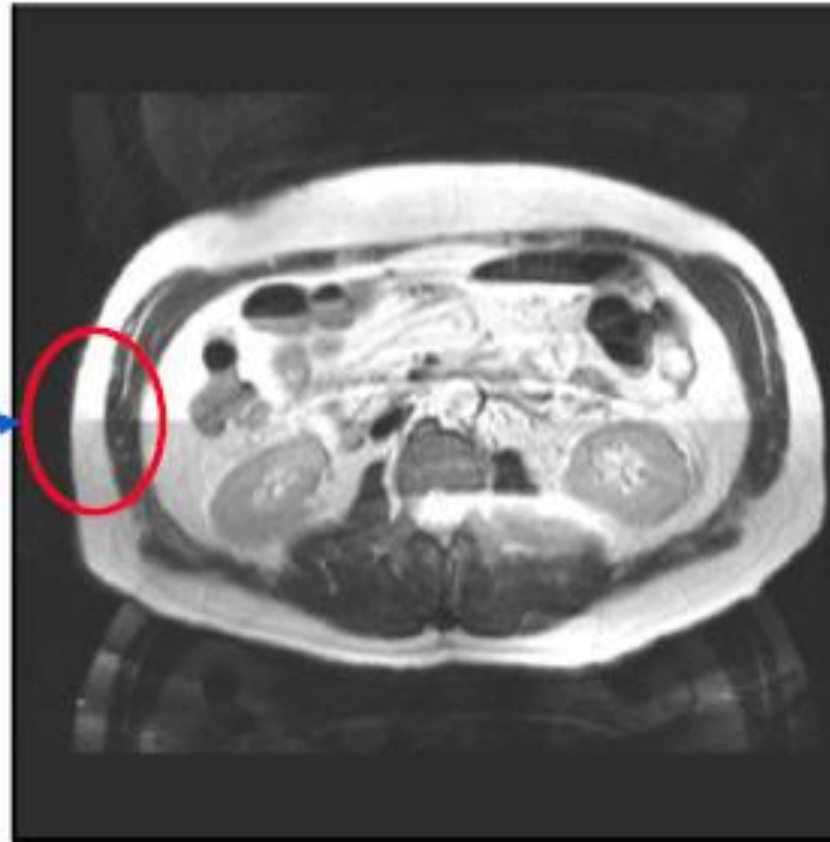


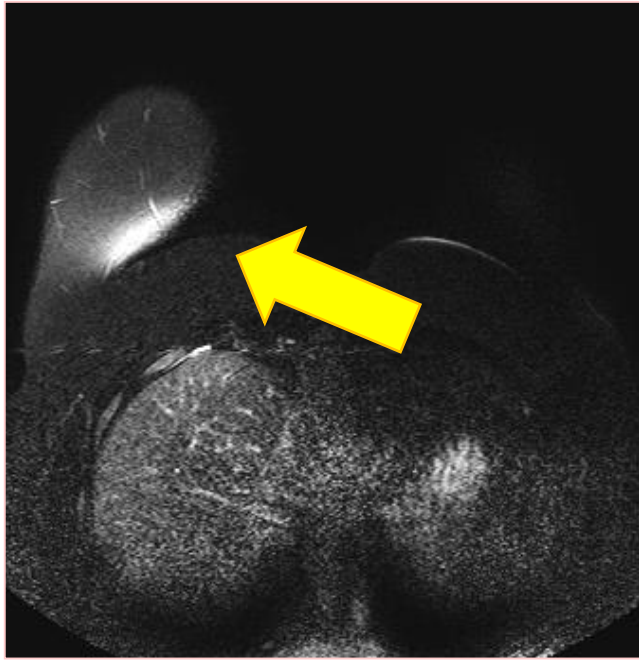


# Coil movement

The reference-scan provides coil sensitivities if the coils have not moved between the ref and clinical scans.

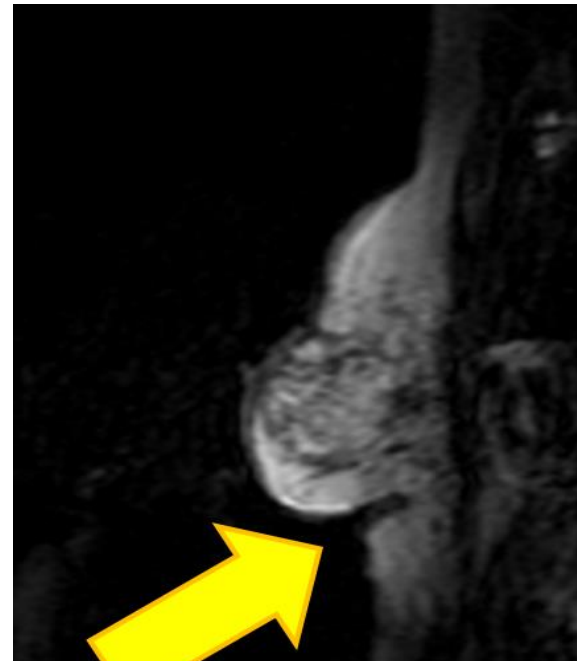
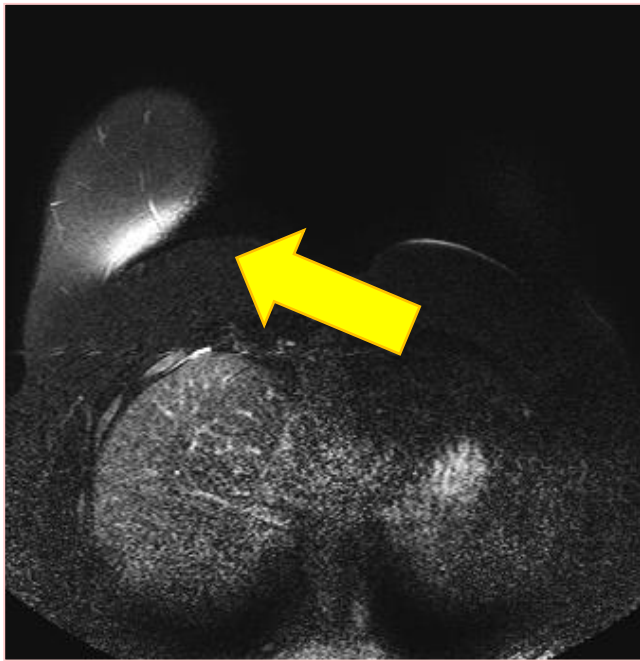
Split-line artifact

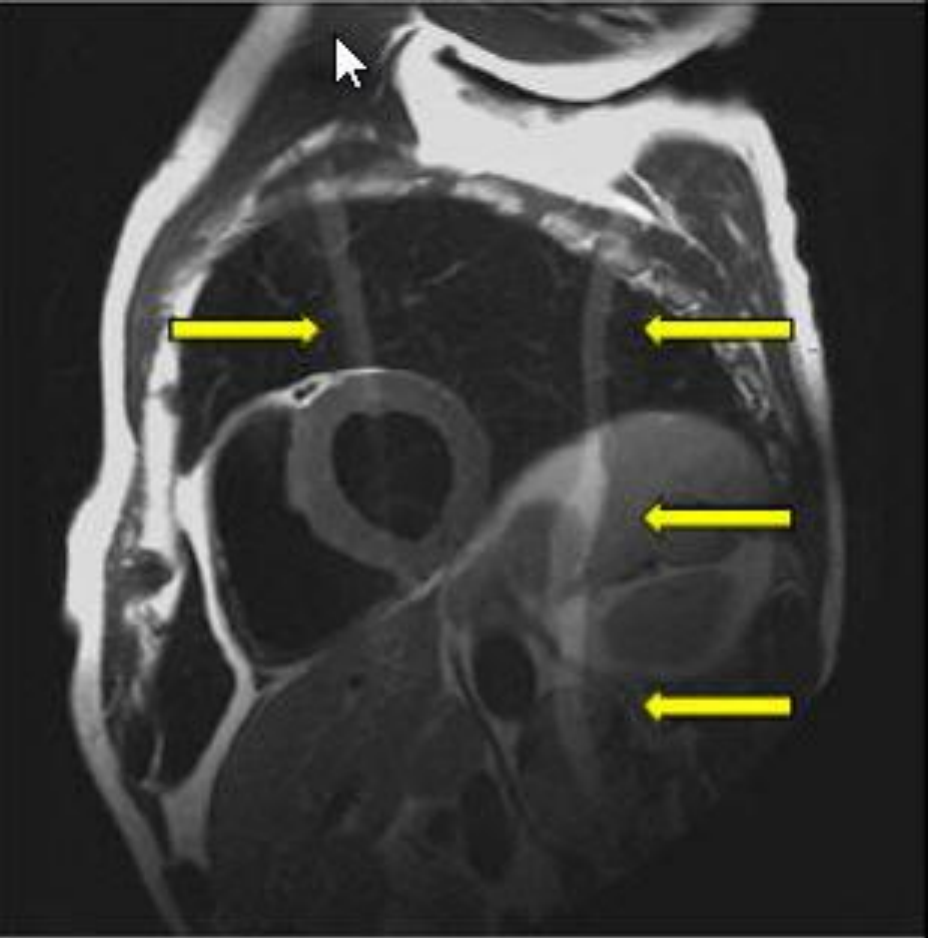




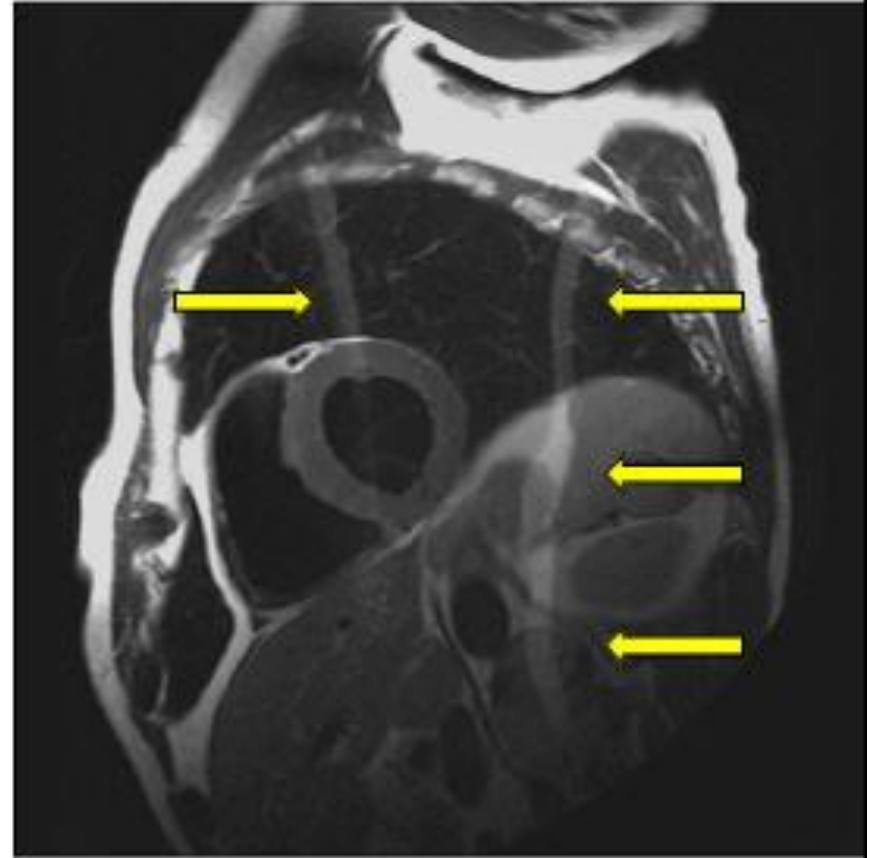


# Breast positioned with a fold



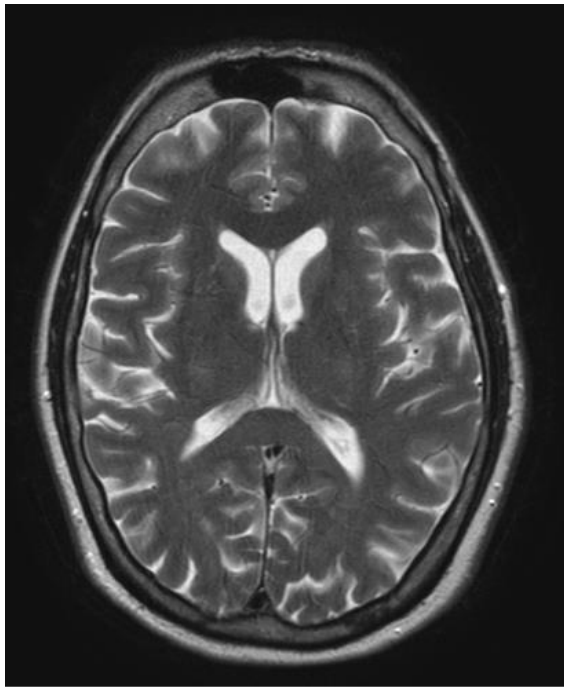


# SENSE artifact

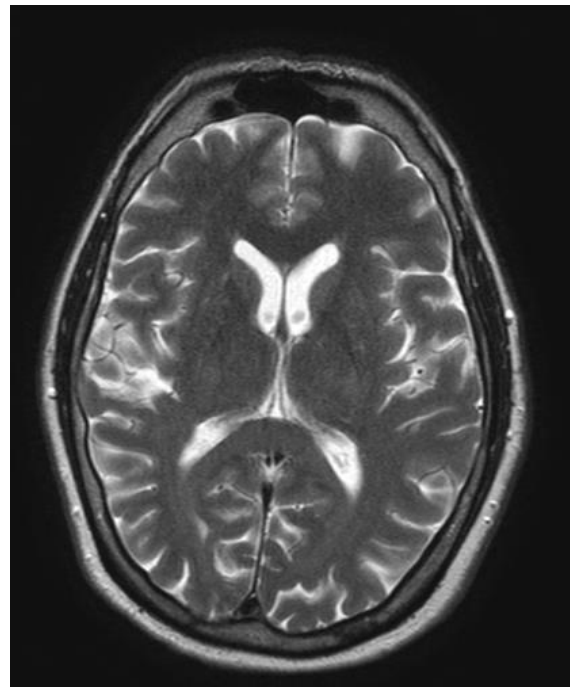


# SENSE adjustment

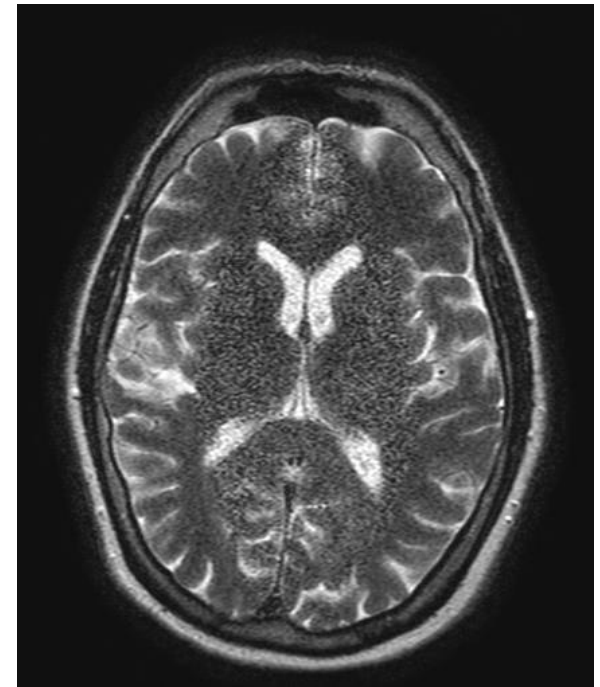
If SENSE increases  $\rightarrow$  SNR decreases  $\rightarrow$  a central noise band appears in the image



SENSE = 1



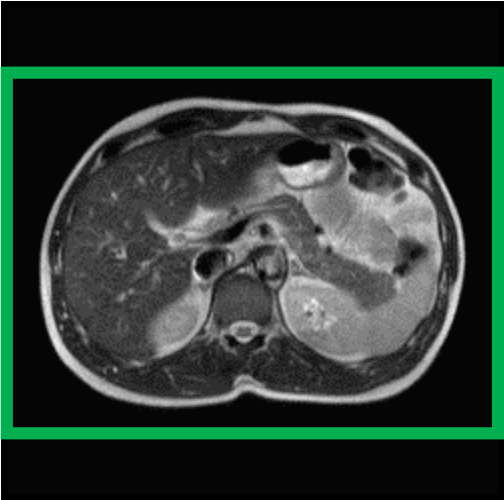
SENSE = 2



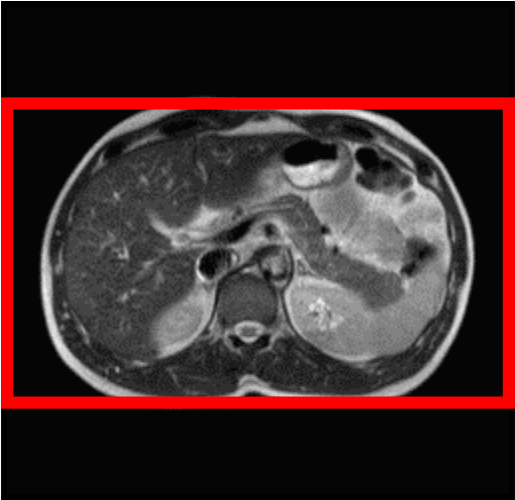
SENSE = 4

# Slices positioning with SENSE

- All anatomy needs to be in the FOV if SENSE is applied

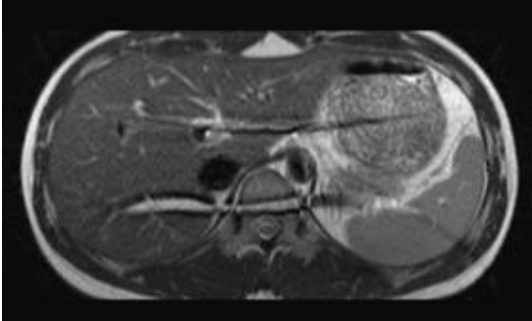


Correct planning

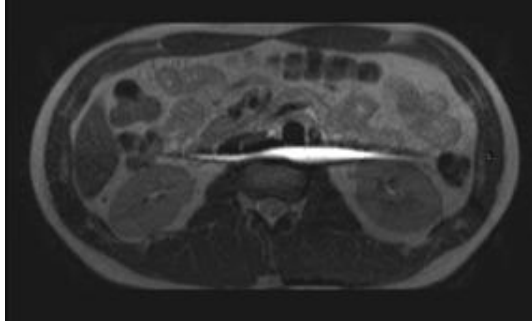


Planning too tight

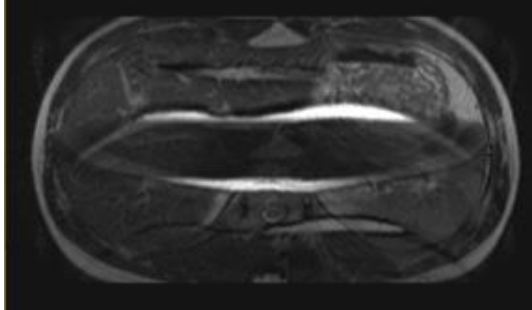
SENSE 1.5



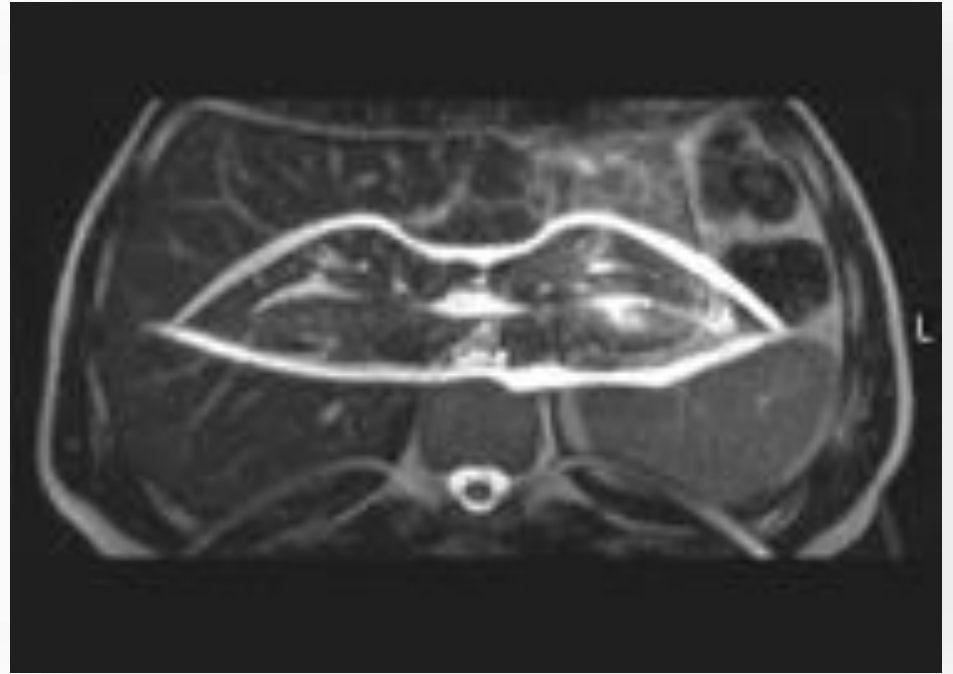
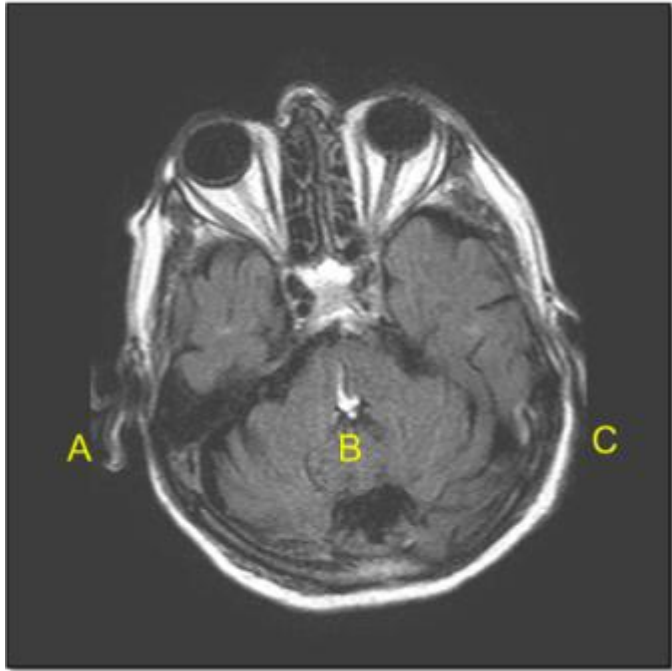
SENSE 2.0



SENSE 2.5



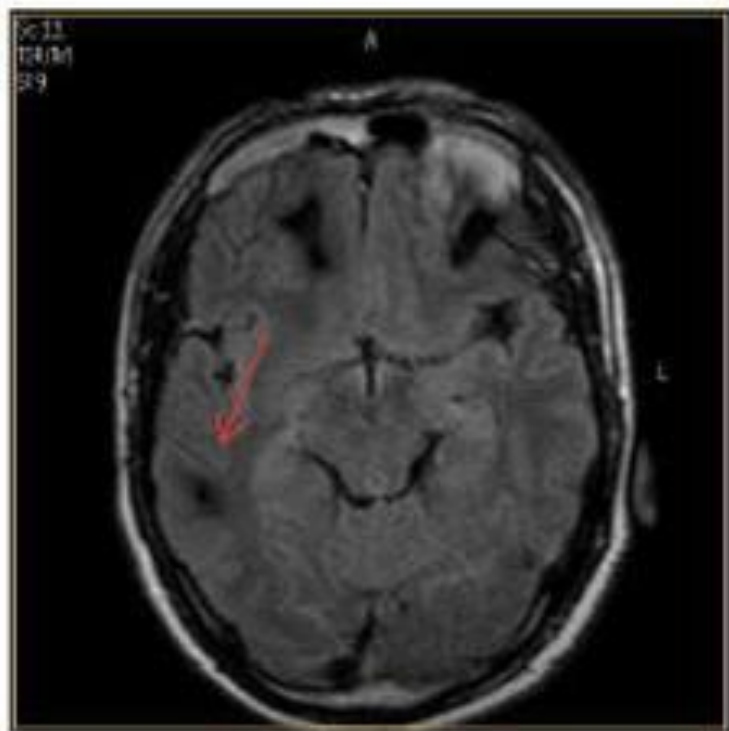
## Other examples of FOV too tight



A,B and C signals at the same location

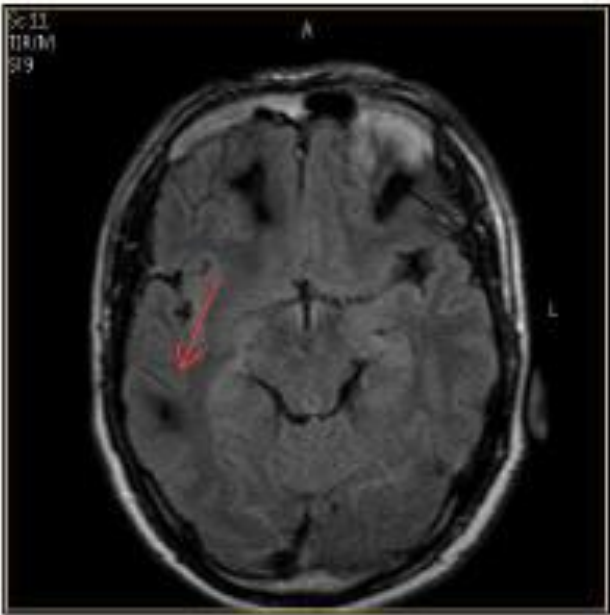
To prevent SENSE artifacts:

- SENSE reduction factor  $\leq$  the number of elements
- Avoid patient movement between reference scan and imaging
- Avoid coil displacement between reference scan and imaging
- Cover the anatomy in phase direction
- In 3D, cover the anatomy in slice direction





# Movement during acquisition of the Refscan

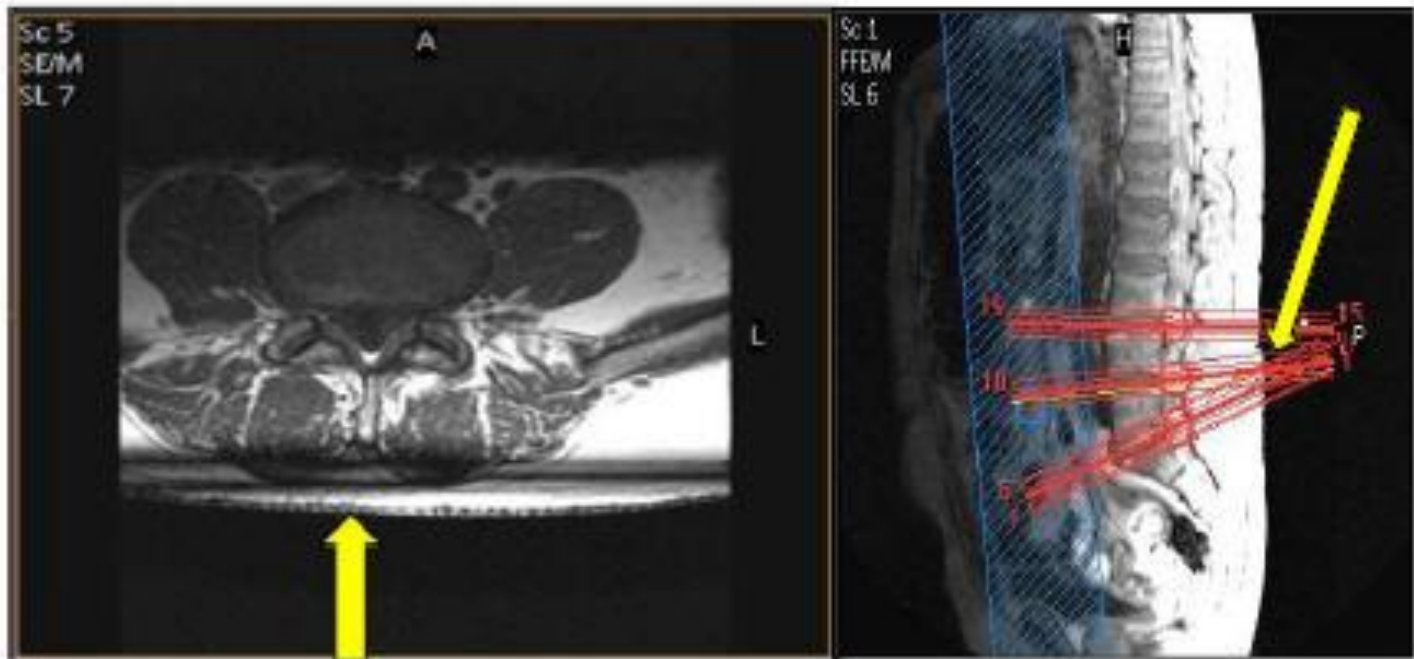




# Cross-talk artifact (multi-stack sequences)

Can be prevented by setting scan parameter stacks as packages to yes.

Note: This will increase scan time



# Hardware

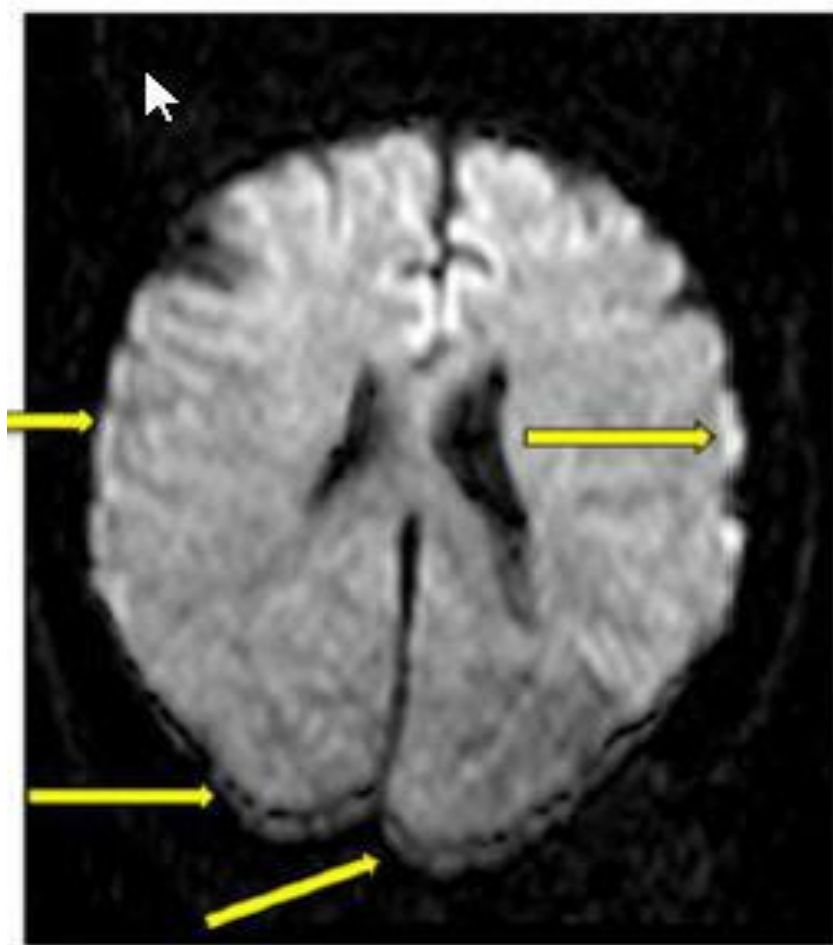
Hardware issues can show up in many ways:

- Dots
- Lines
- Distortions
- Blurring
- Ghosting
- Bands
- Noise (localized or general)
- Patterns (for example "corduroy")
- Dark spots

If the artifact:

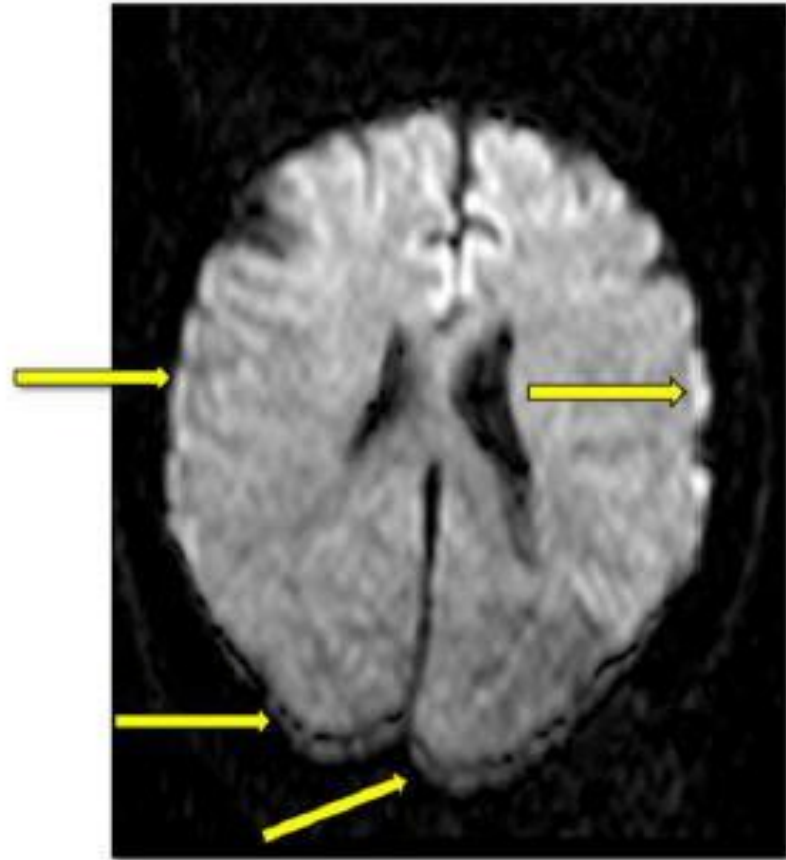
- Shows as straight lines
- Is spaced with mechanical precision

Then the artifact is most likely hardware related.



# Eddy Currents

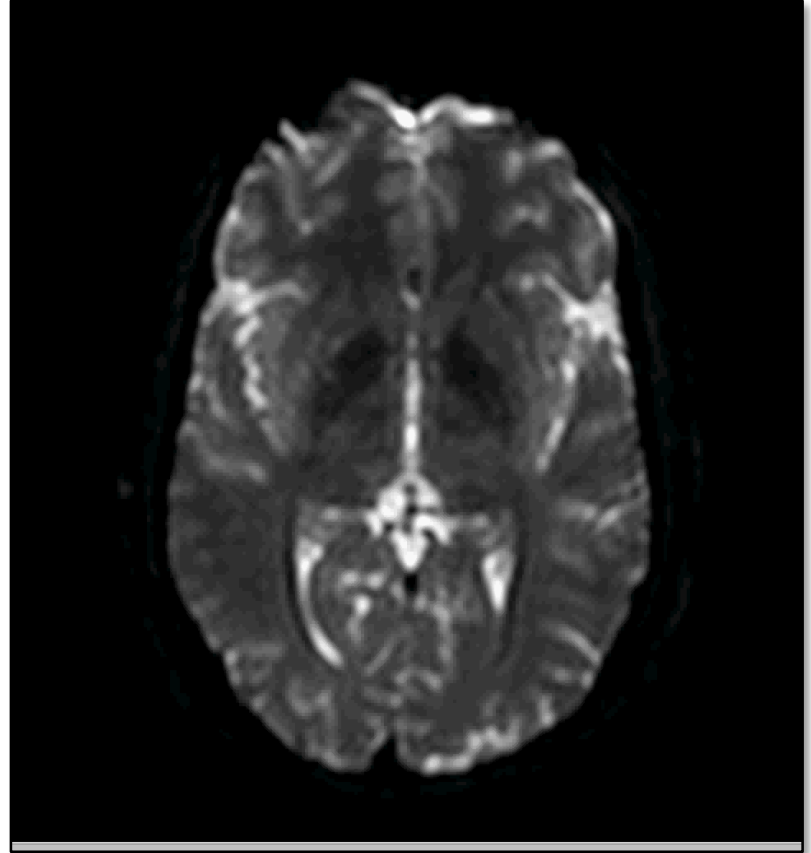
The double contour artifact is visible with SSh-DWI



## Eddy Currents:

- Appear as if the brain is moving in the FOV.
- Especially visible in the phase direction.
- To view this problem:
  1. Run a DWI scan with single direction (set the **gradient overplus** to no)
  2. Play 1 slice in movie mode.

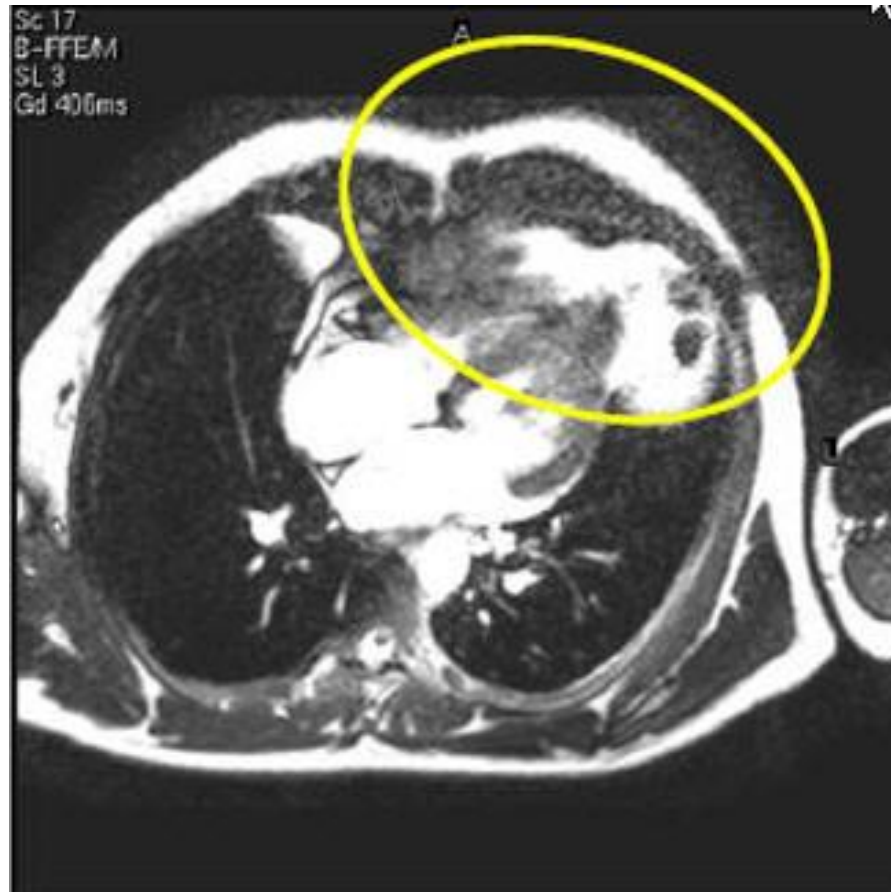
Eddy current compensation needs to be adjusted by the service engineer.

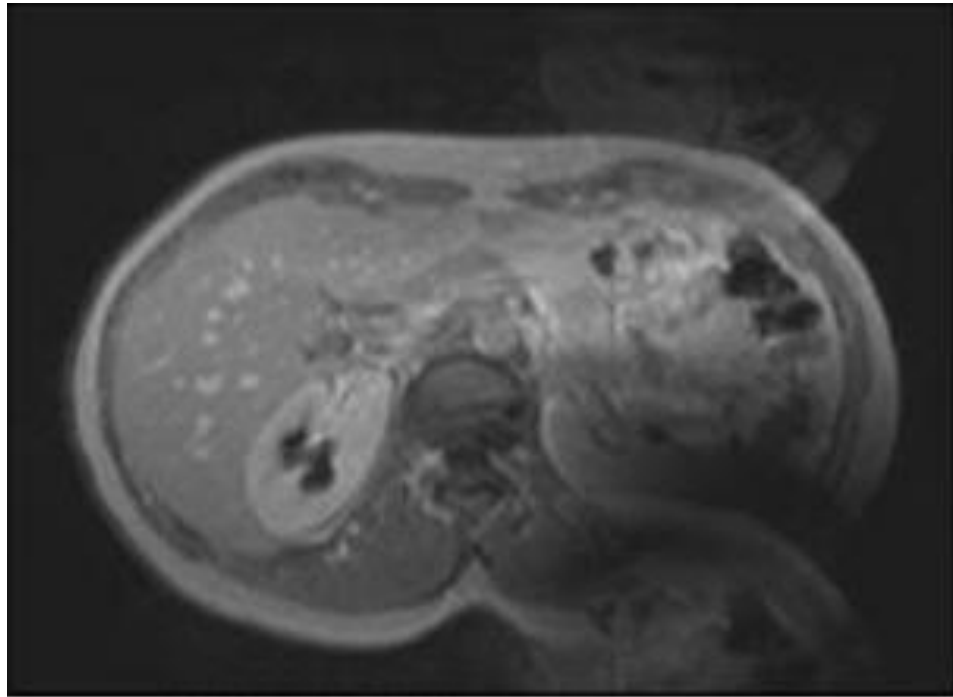




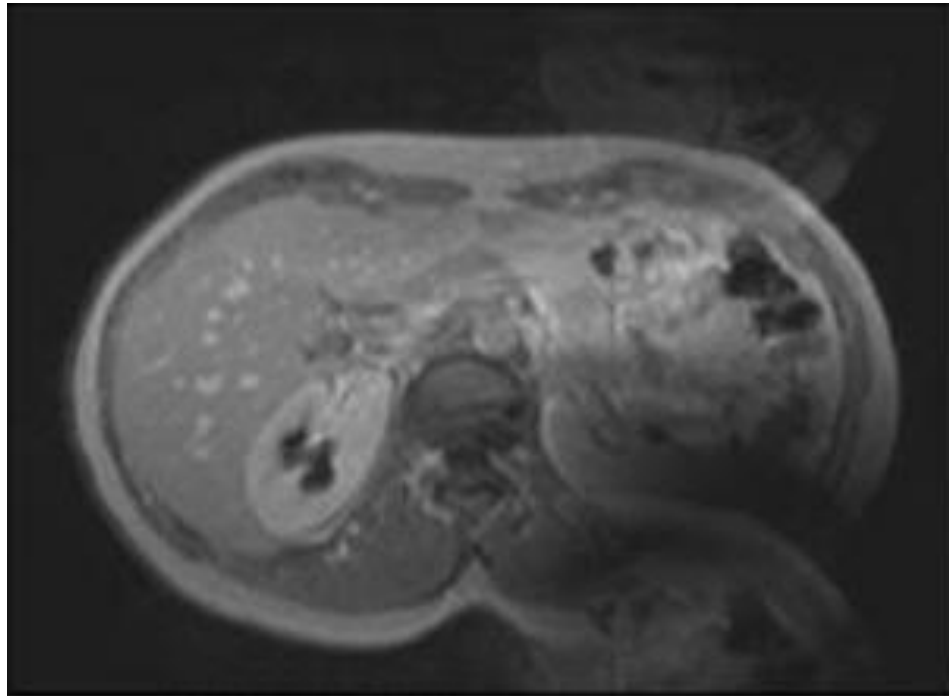


## Coil Element Failure





## Coil Element Failure when using Sense





# Spikes

Many sources possible

In this case, caused by a loose pin in coil.



Spikes are caused by a 'bad' data point in k-space, due to hardware or environmental influences, leading to:

- Zebra stripes
- Noise
- Data point artifact

In this example, spikes from gradient coil →

Other potential sources :

Loose components

Loose screws

Loose cabling

Mechanical vibration

Low humidity in scan room

Protocol related (high gradient demand)





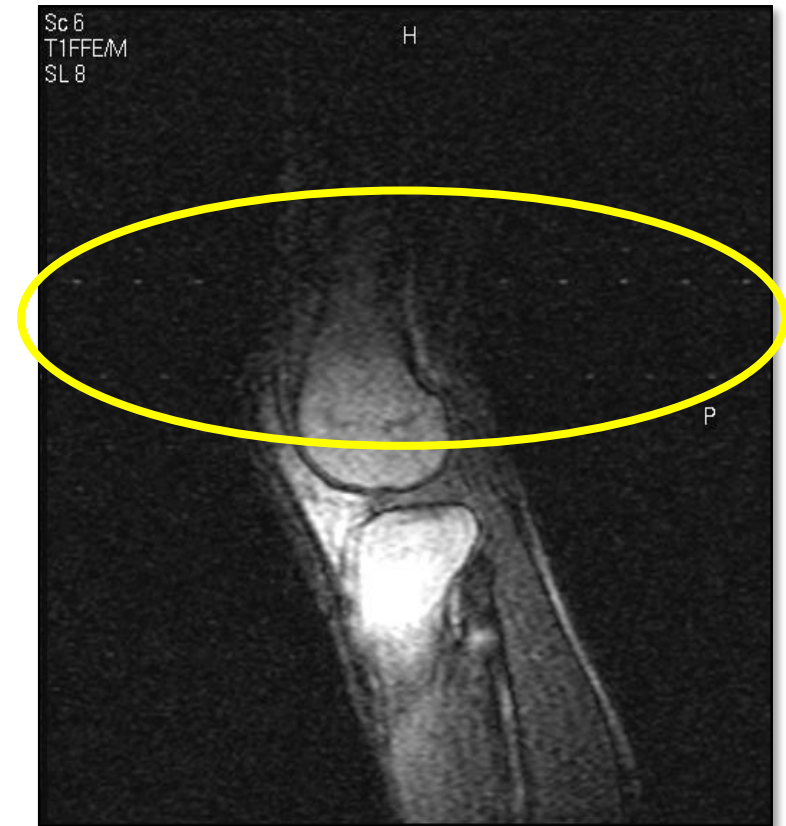


# RF Interference

- RF disturbance in the scan room can cause:
  - Single dots
  - Line artifacts

## Common causes:

- RF door open
- Poor integrity of RF room
- 3<sup>rd</sup> party equipment
- Broken light bulb



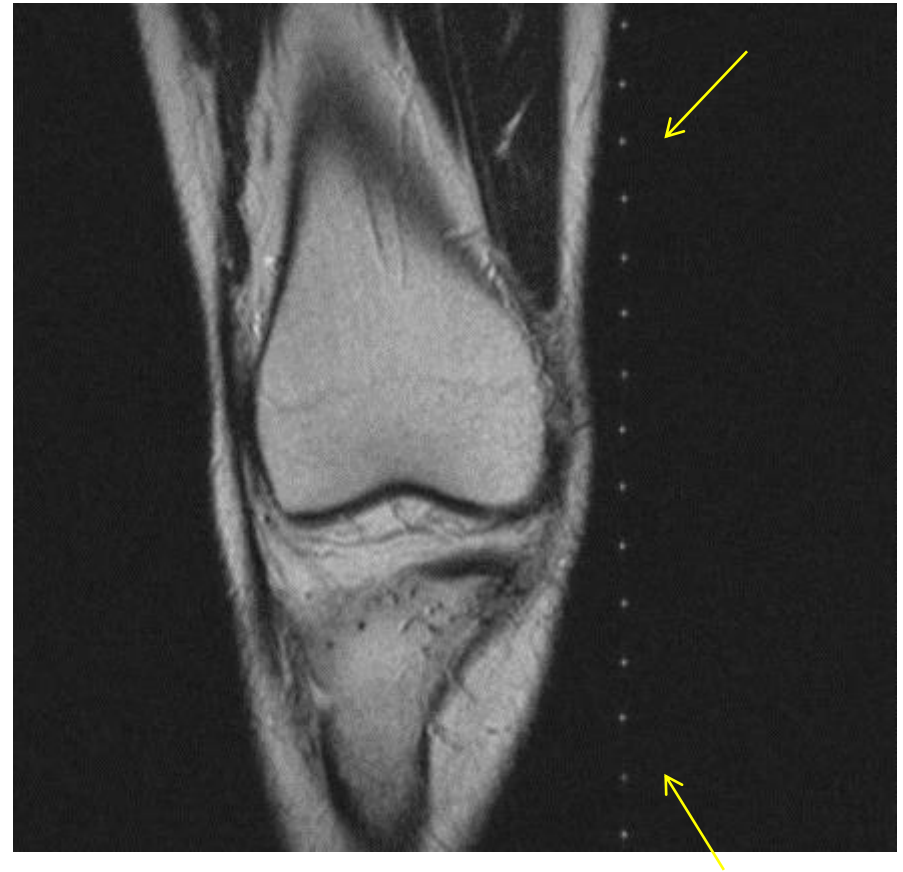


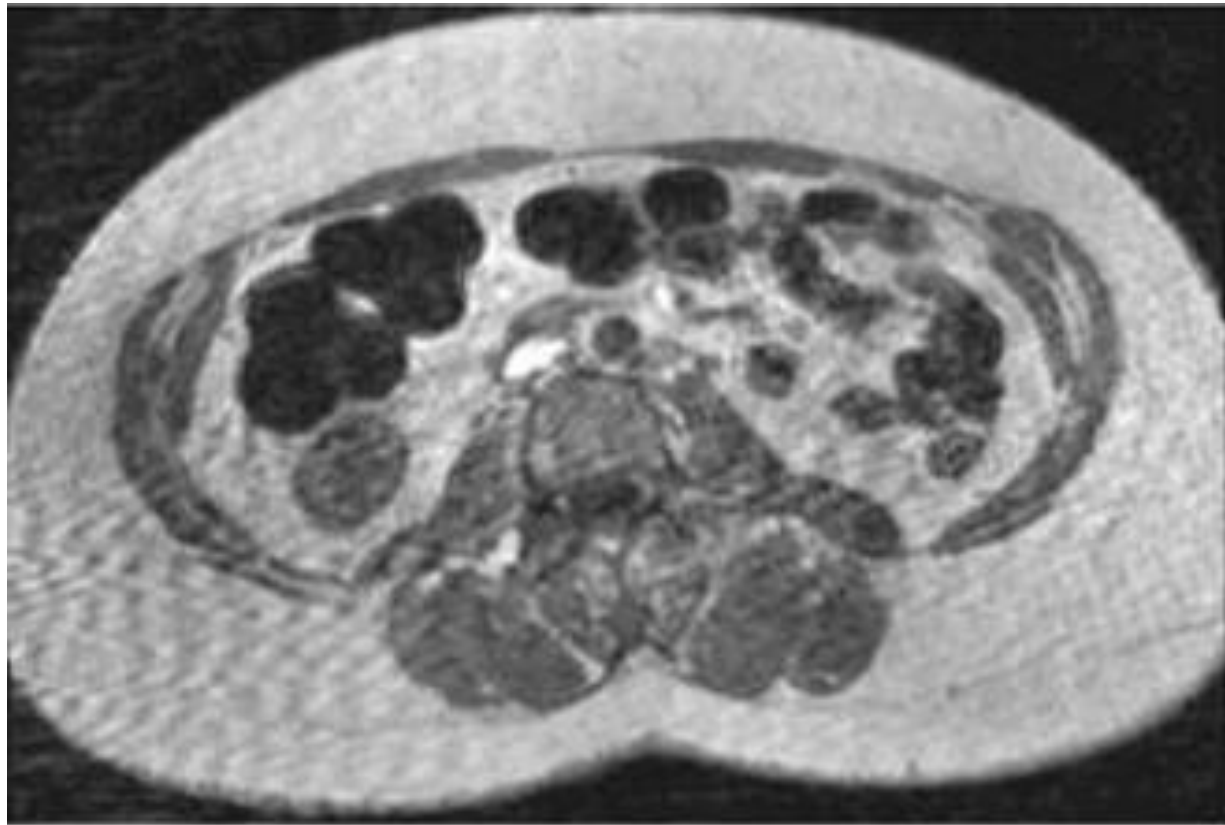
# RF Interference

- Dots (zipper)

Cause:

- In this case, customer installed a mobile respiration device in the MR room.
- The power cable was routed into the RF cage through the wave guides and not through the RF cage filters.

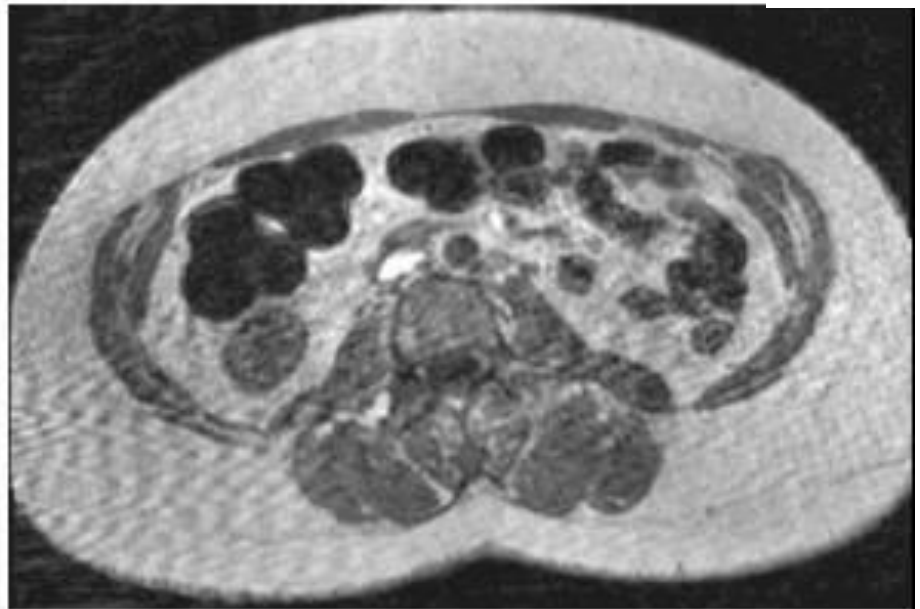
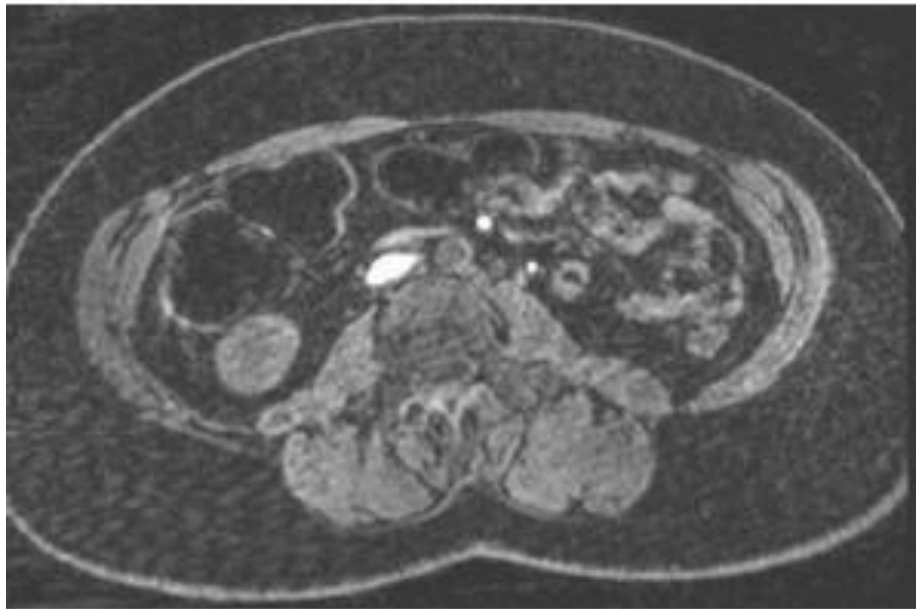




# Spikes

Humidity in the scan room too low.

- Leads to arcing and sparking across components.
- Can appear as low signal to noise, linear artifacts, and grids.



- Appeared as line artefact
- Occurred with all coils
- Affected one slice
- Intermittent occurrence



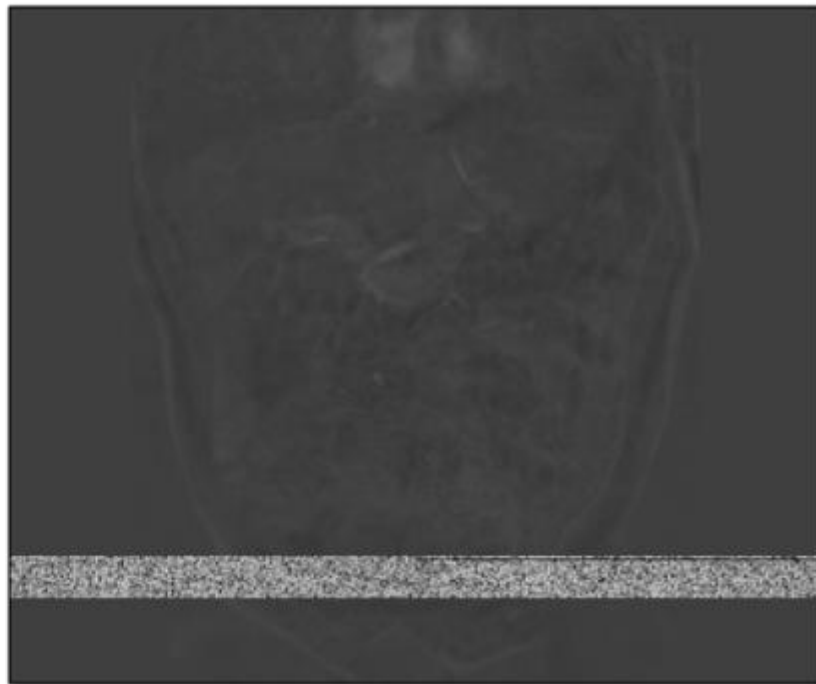
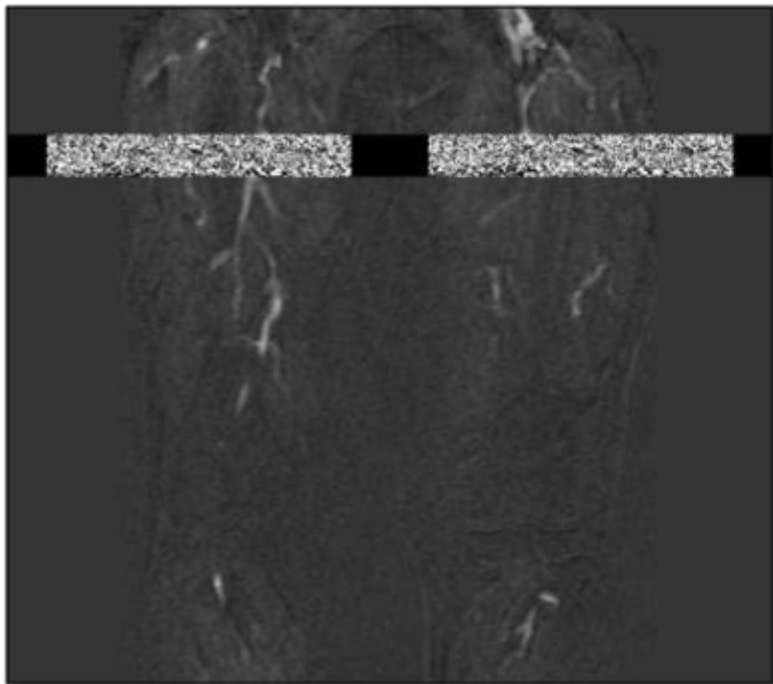
# RF Interference

Cause:

- Defective filter in gradient cables



# Band Artifact

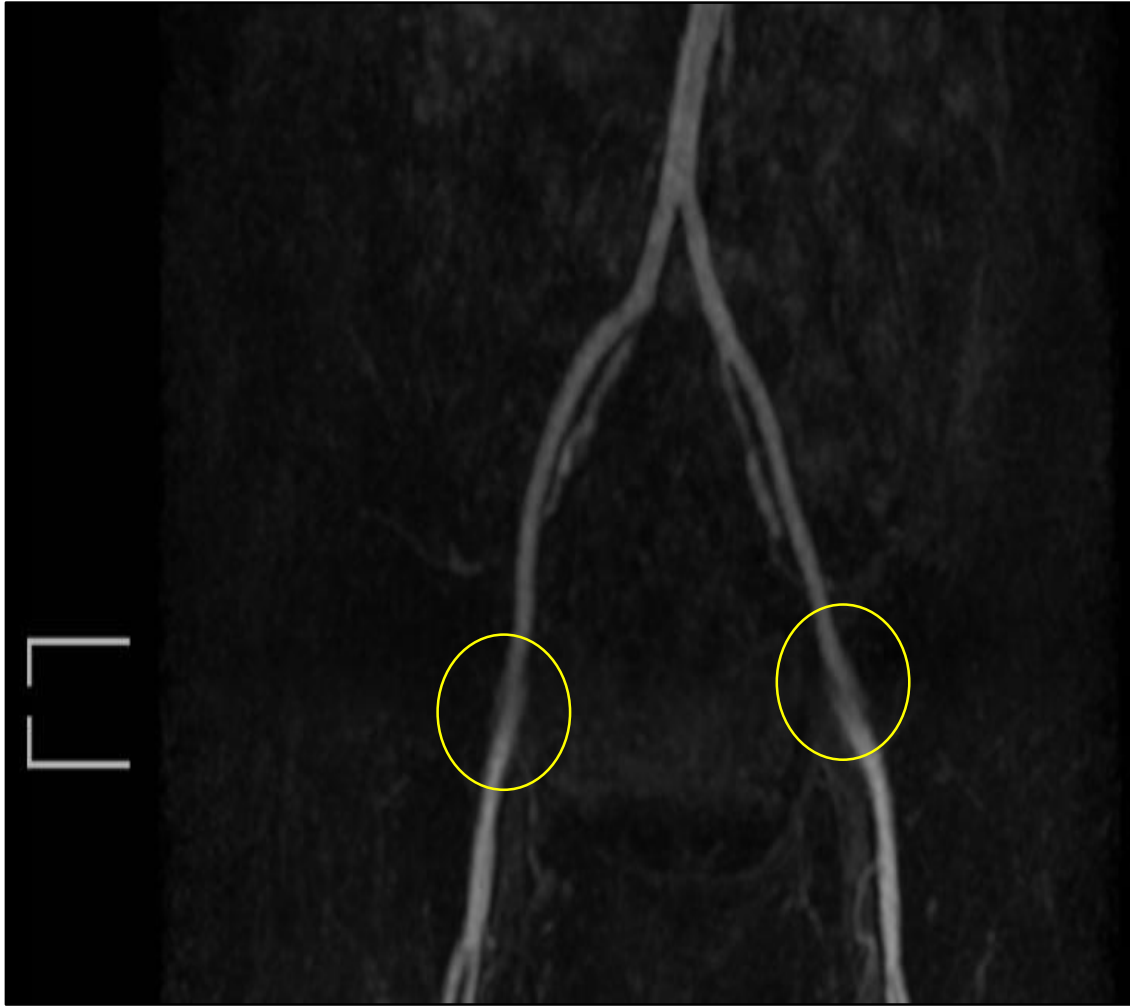




## Software cause

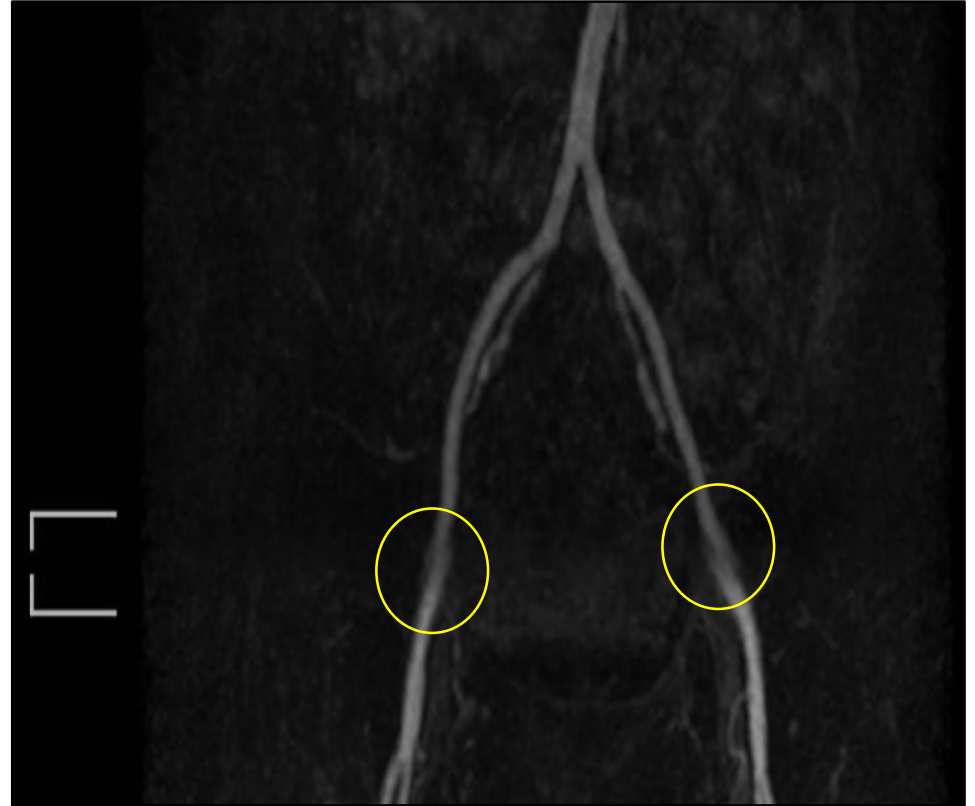
In this case, problem was resolved when the host computer was replaced.

Software defects are corrected by Service Packs or new software release



# MobiView overlapping area

(multistack merging)



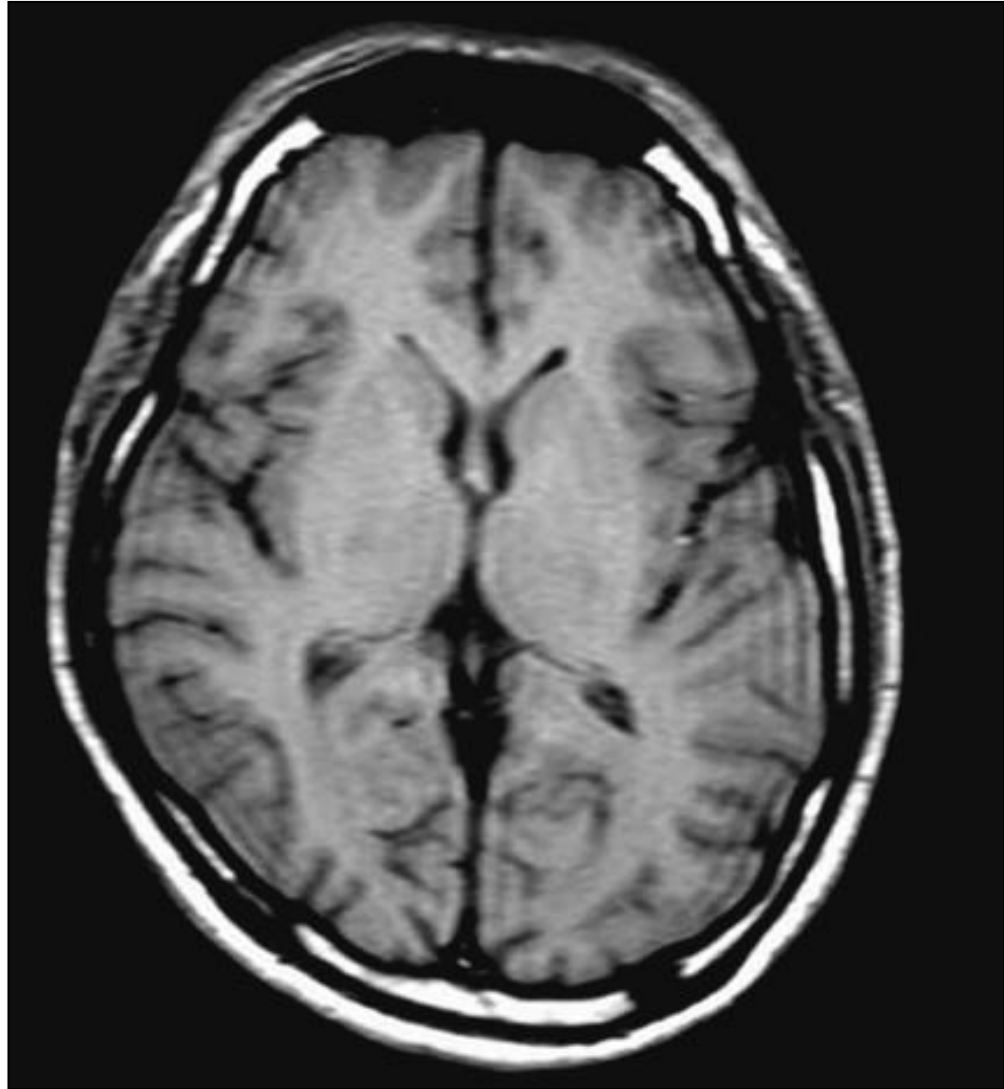


# Reconstruction artifact



Swap artifact in mDIXON-FFE caused by incorrect calculation of Water and Fat reconstructions

- mDIXON\_XD solve this problem, using 7 point fat modeling for better fat determination



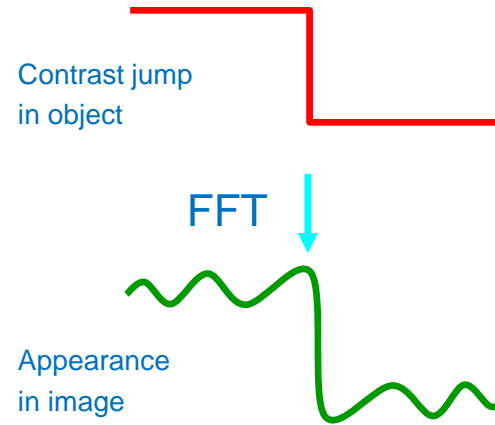
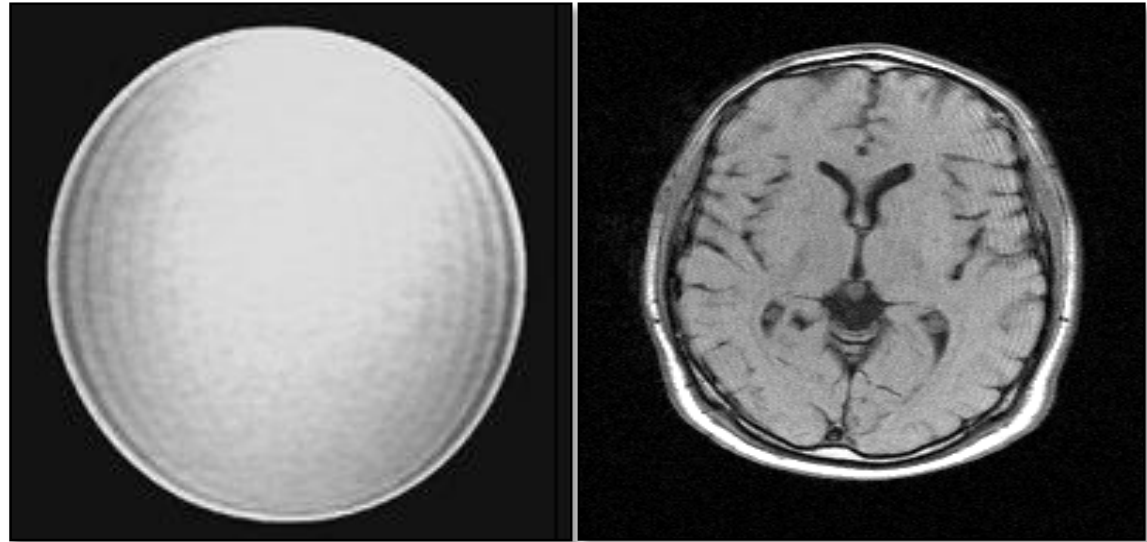
# Physics

## Reconstruction artifact

### Truncation

- Other names:
  - Gibb's artifact
  - Ringing artifact
  - Spectral leakage

Seen with low matrix  
Phase matrix  $\ll 100\%$

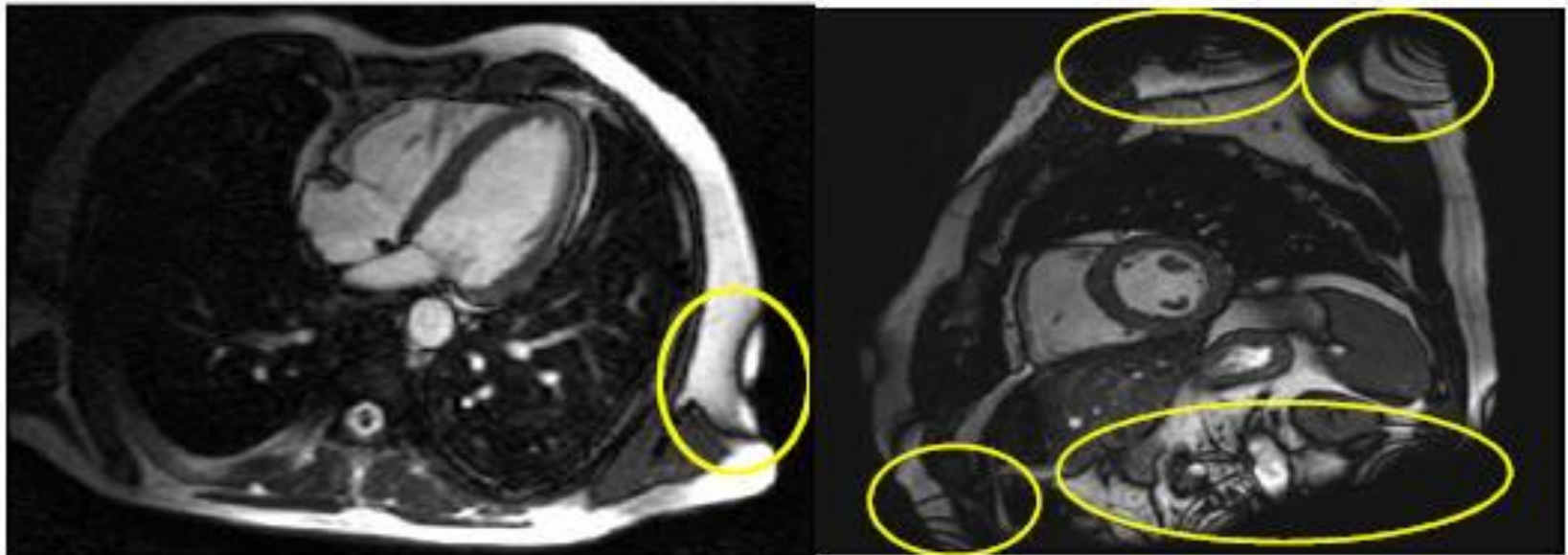


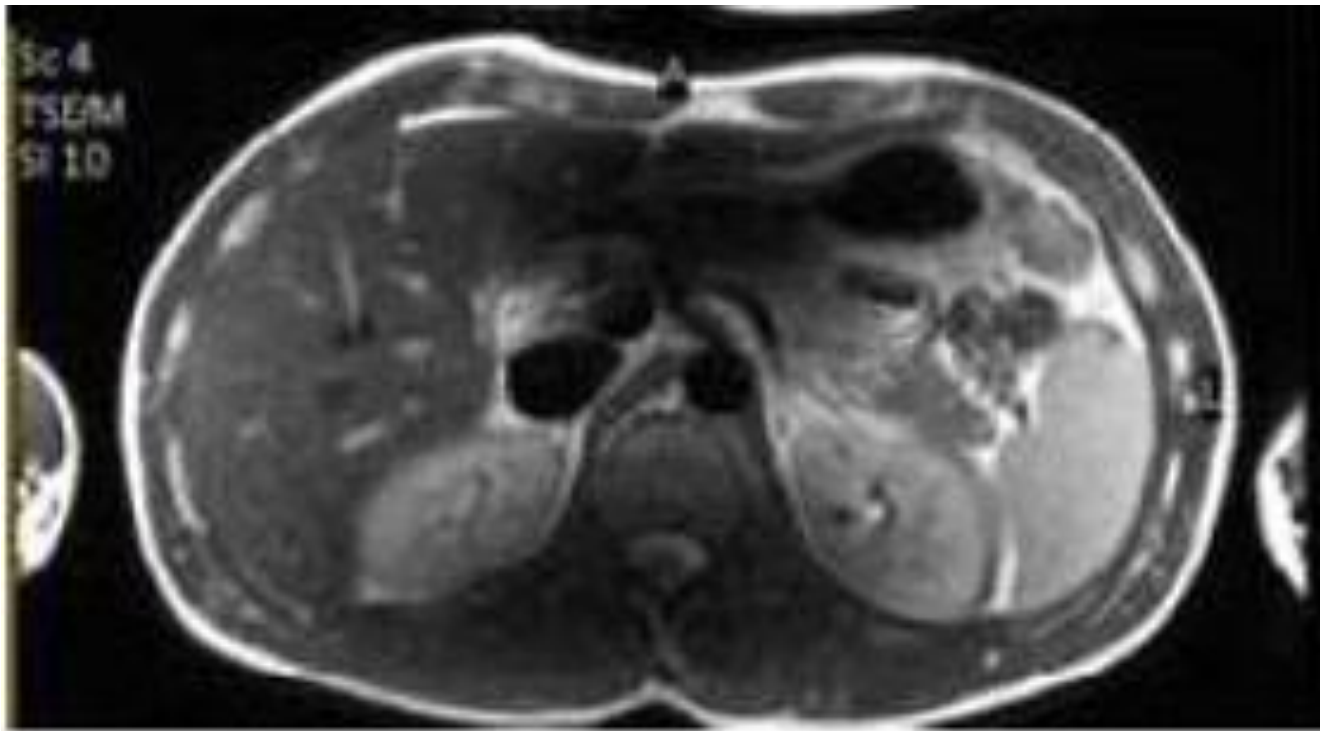




# Off resonance banding in B-FFE

- Related to B0 Inhomogeneity
- Also related to contrast parameters
  - As TR increases, more bands appear.
  - As TE increases, bands move closer to image center.

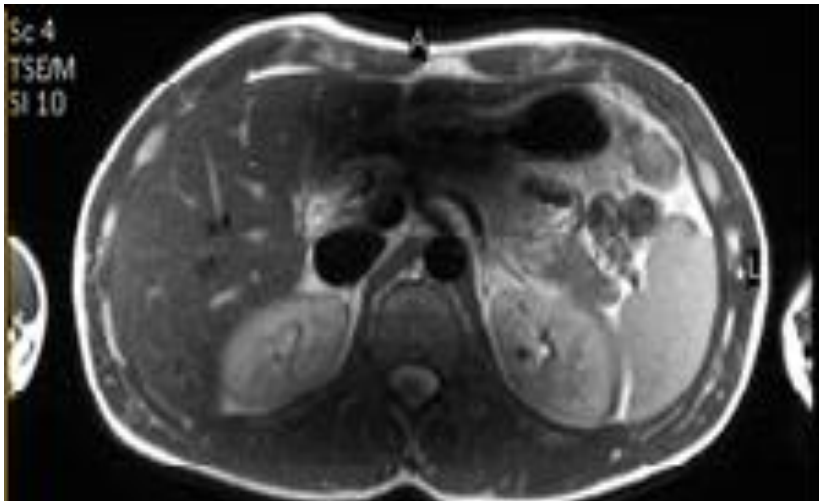
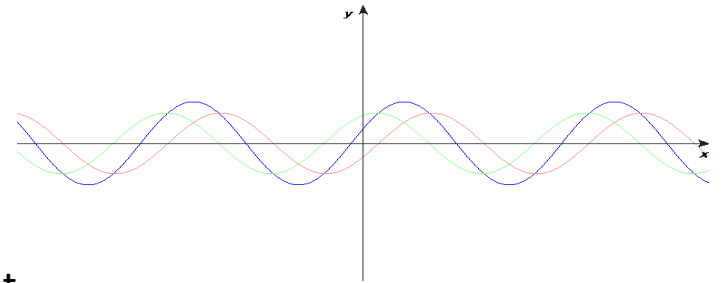




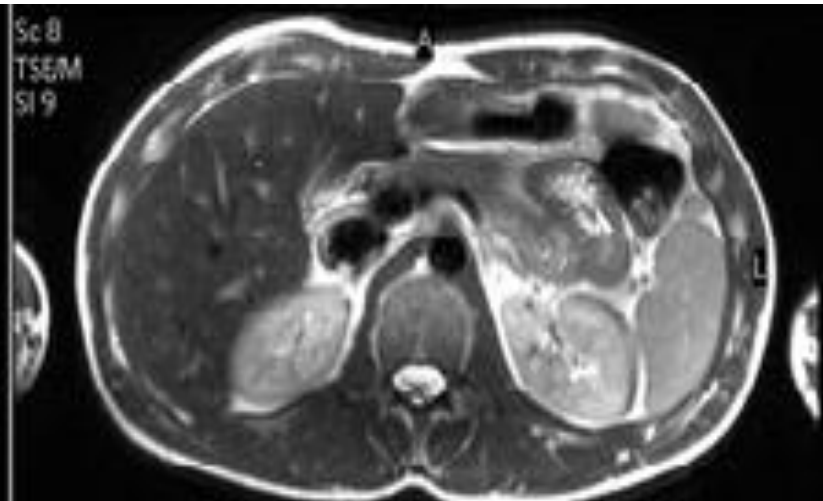
# Physics

## Dielectric Effect (B1 Shading)

- Seen at high field strengths (3T and higher) due to:
  - Short RF transmitted wavelengths
  - Electrical conductivity of the tissue
- Leads to B1 disturbance → standing RF waves on the patient
- Resolved by multi-transmit (use simultaneously 2 different RF transmit sources)

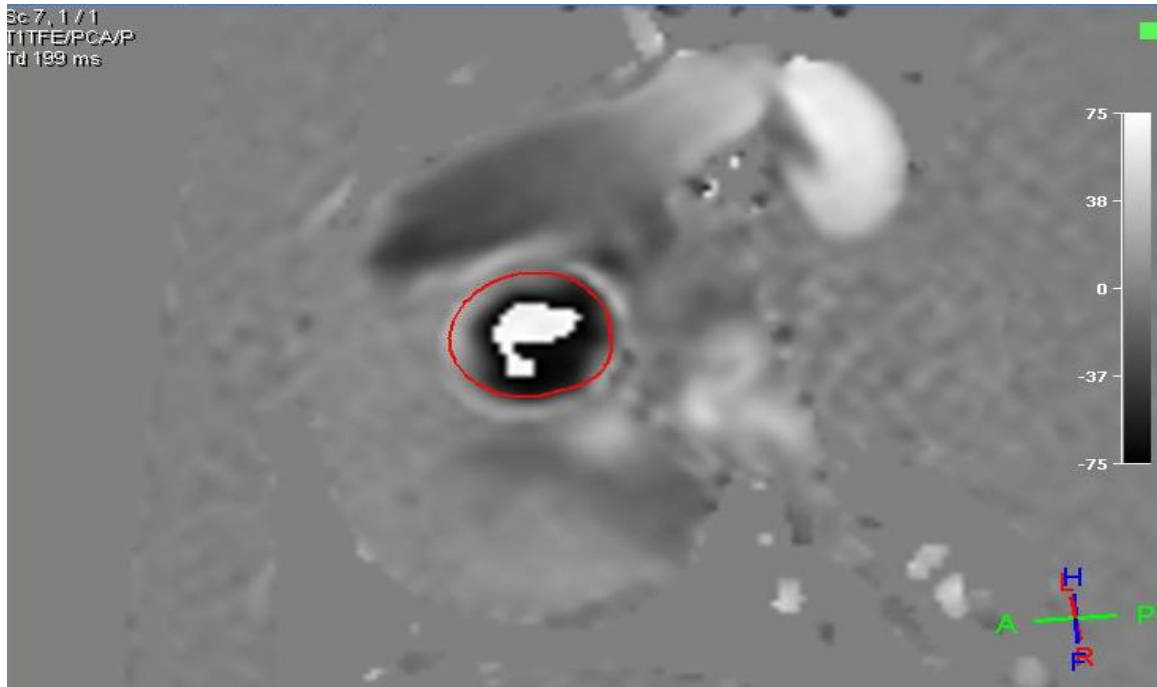


Standard



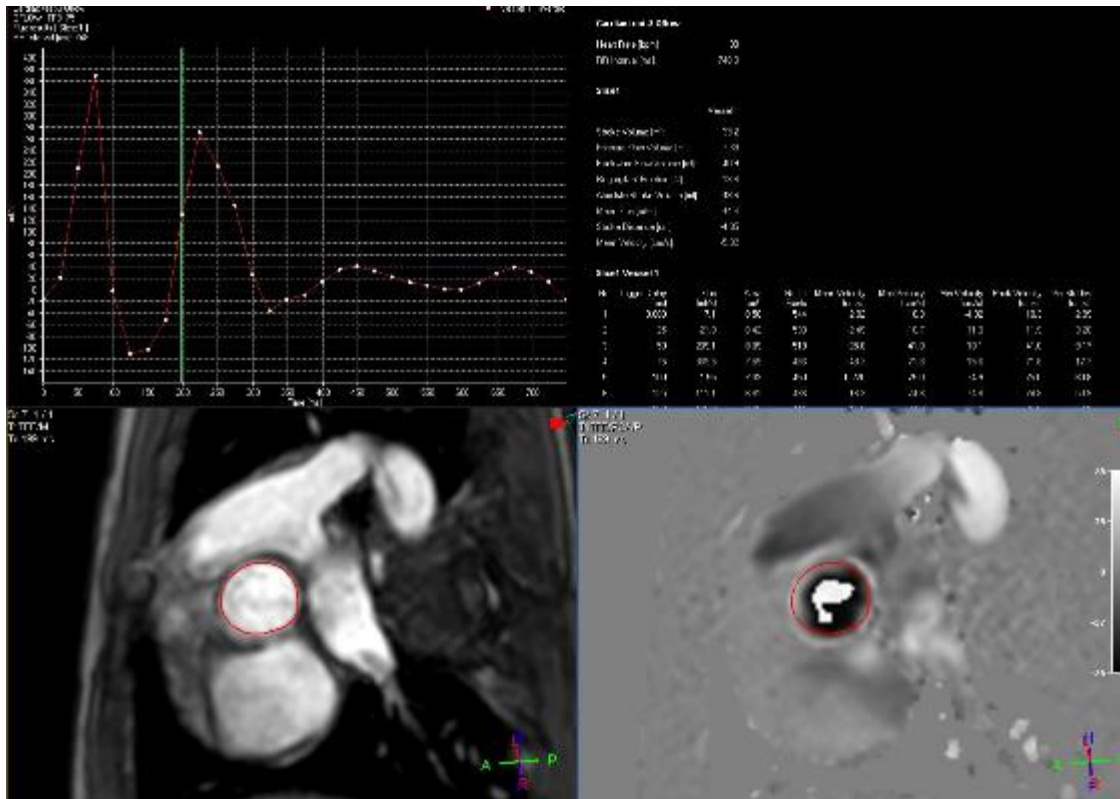
Multi-Transmit

Sc 7, 1 / 1  
TITRE/PCA/P  
Td 199 ms



# Aliasing of velocity in Q-flow

- Velocity in the vessel > Venc



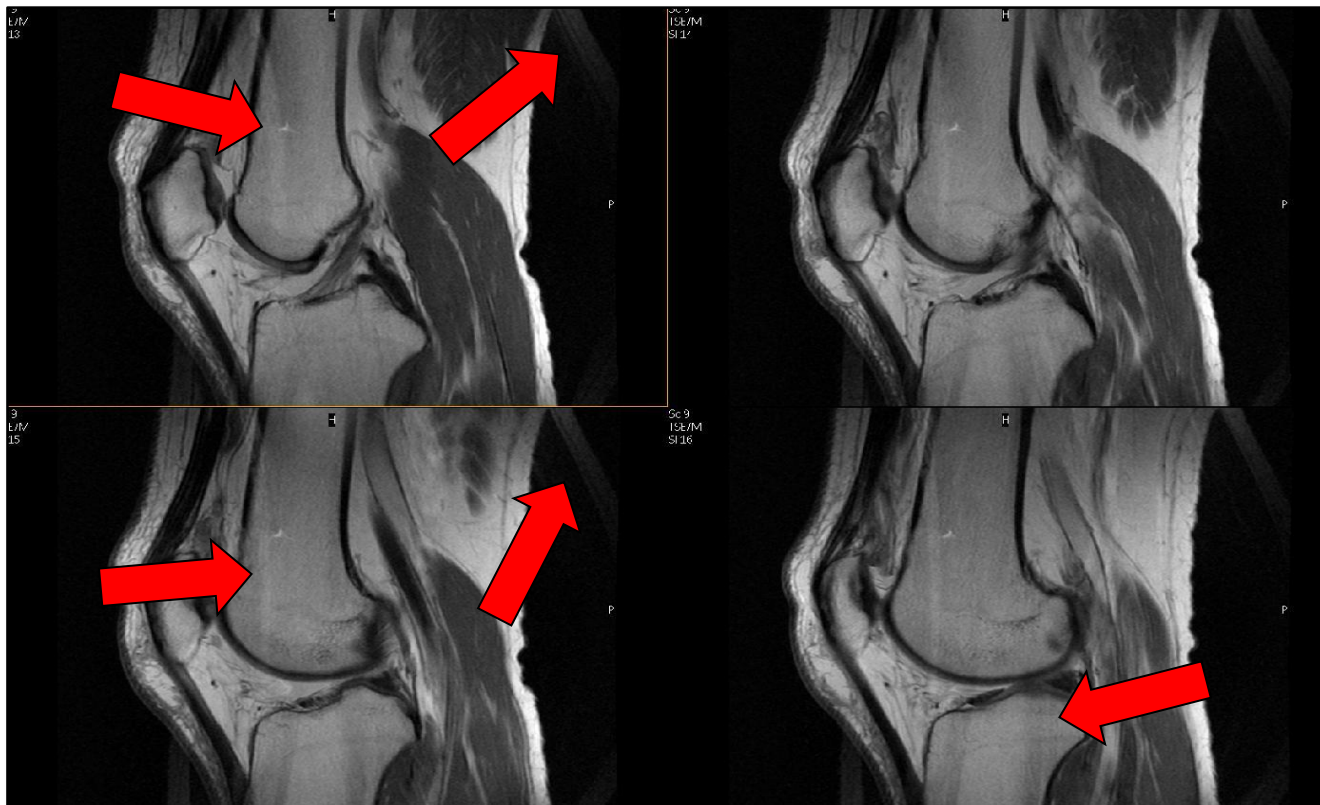
- Recommendation: Increase Venc of the sequence

|                       |                |
|-----------------------|----------------|
| Angio / Contrast enh. | phase contrast |
| Quantitative flow     | yes            |
| PC flow directions    | FH             |
| PC velocity (cm/s)    | 200            |

# Name the Artifact(s)

Back folding

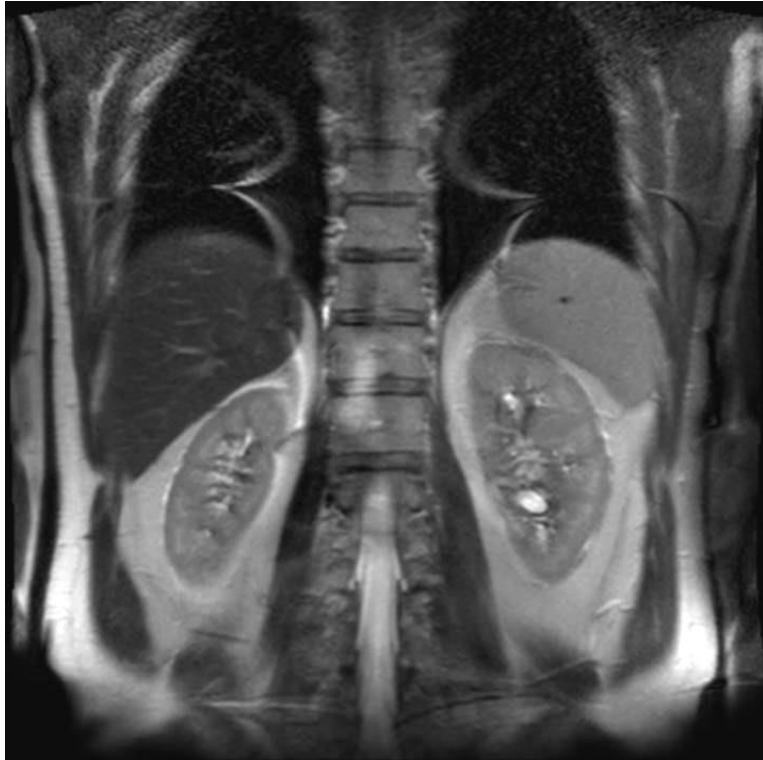
Back folding



Back folding

Back folding

Blood flow (popliteal artery)

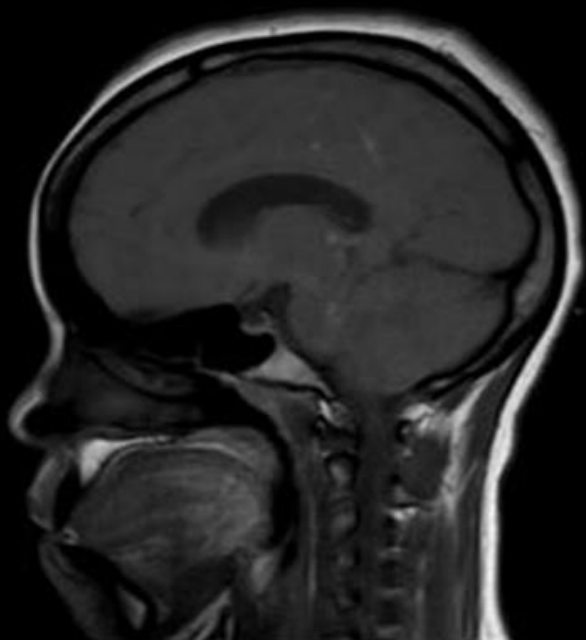


# Aliasing of the arms with high sense factor

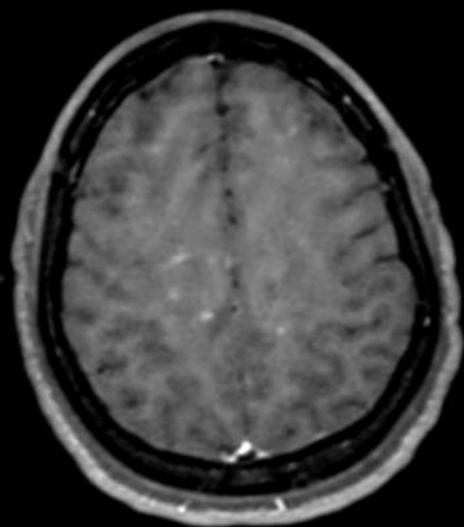




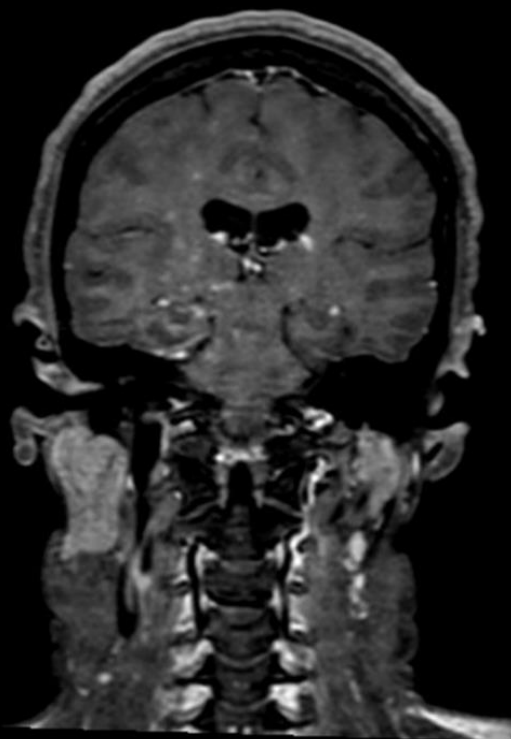
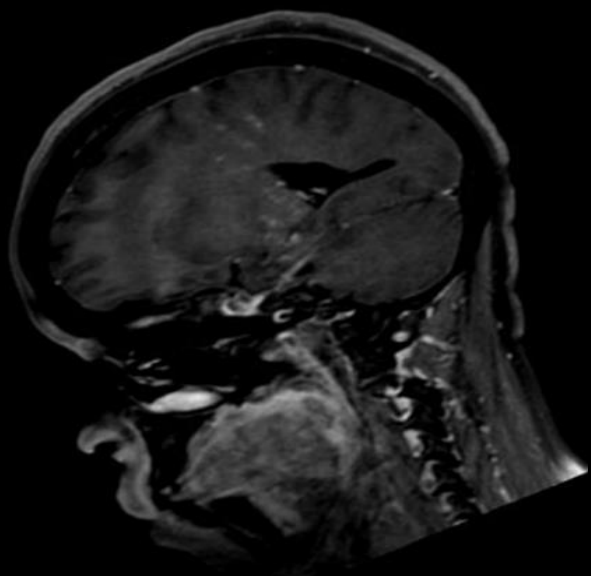
A



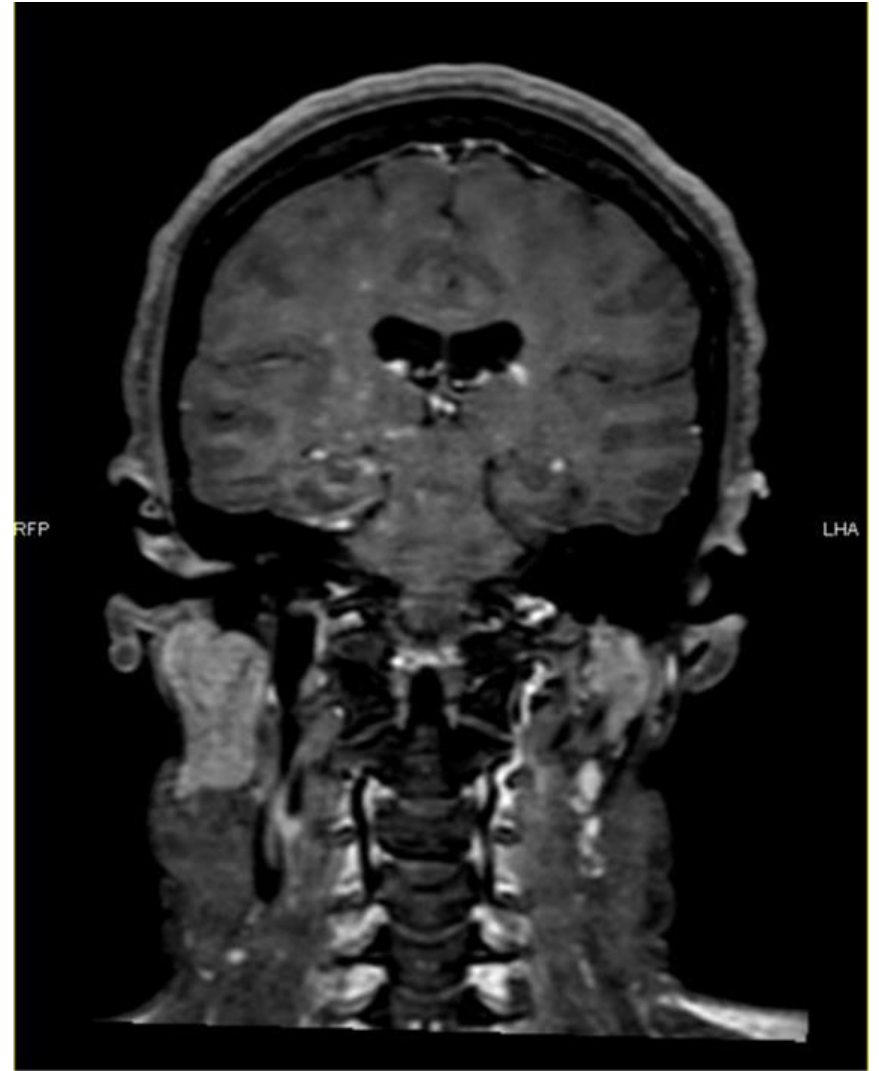
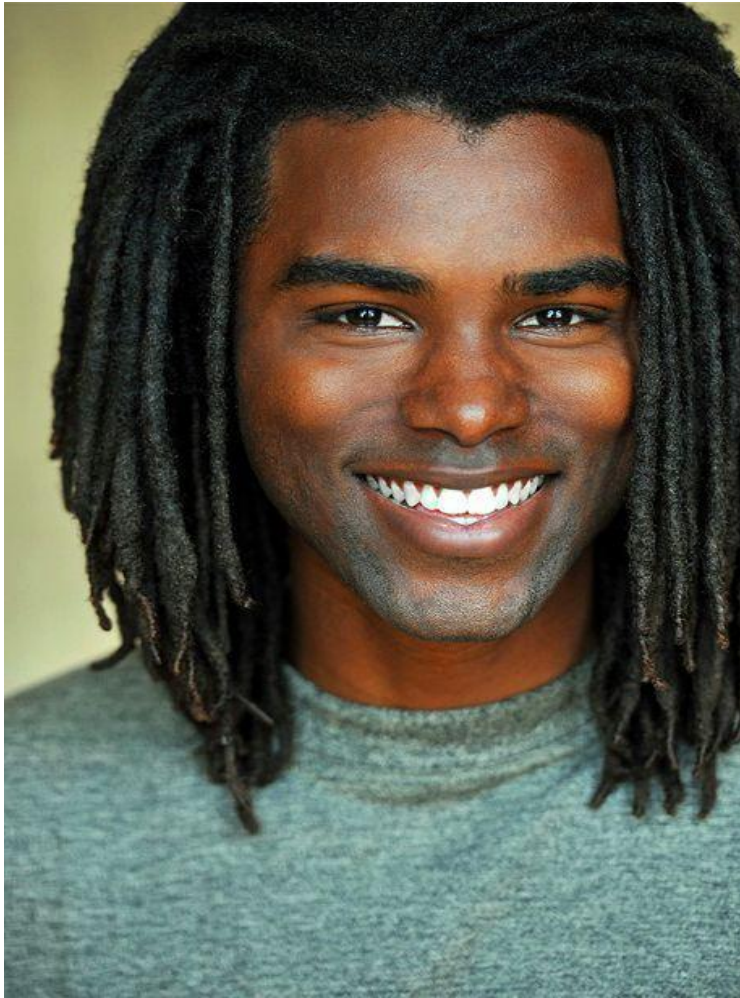
P



LH



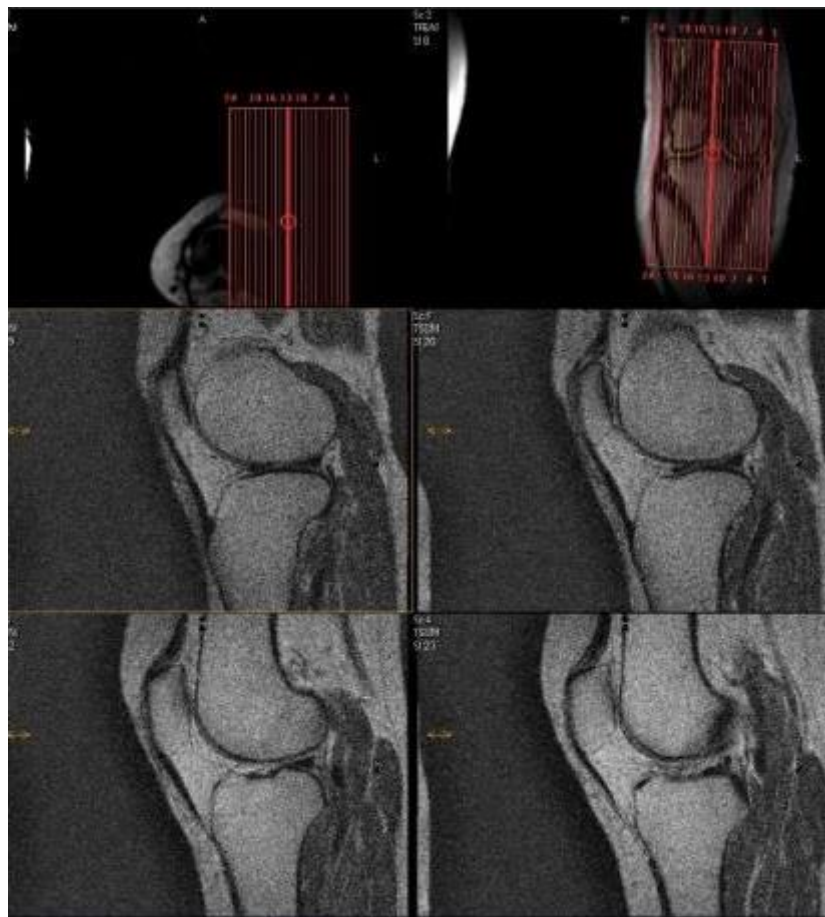
**Dreadlocks are made with black beeswax**  
(black beeswax contains iron oxide particles)



Technical or application?



Technical or application? Radiographer 😊



They scanned the wrong knee 😊  
The coil is on the other knee



**THANK YOU!**