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Nuove frontiere del Next Generation Sequencing nella diagnostica oncologica ed ematologica

04 Novembre 2022

Centro Congressi FEDERICO II Napoli

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Istituto Romagnolo per lo Studio dei Tumori - Dino Amadori

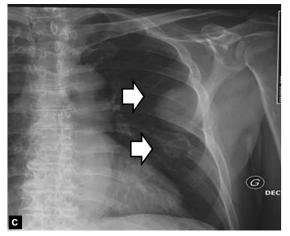
Imaging quantitativo e Radiomica nella Whole body MRI nel Mieloma Multiplo

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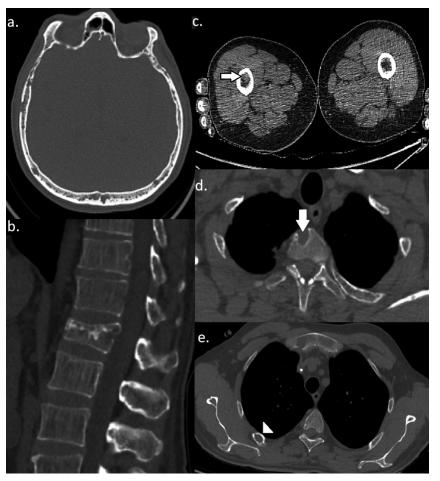
Background: The radiologist's point of view

 a conventional radiographic skeletal survey was historically used for the assessment of bone lesions in patients with MM replaced by whole body low dose CT



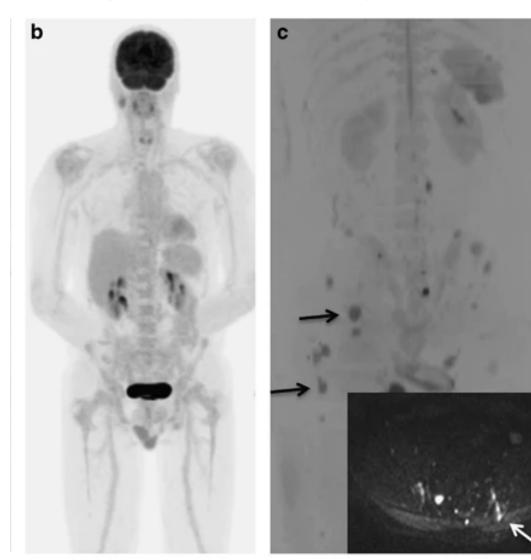






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Background: The radiologist's point of view



PET/CT, WB-MRI provide different and complementary information about disease activity and tumor burden

IMWG recommends

- WB-MRI for patients with a suspected diagnosis of SMM or MM or solitary bone plasmacytoma and in case of suspected relapse because of its superior sensitivity in identifying myeloma-defining events,
- FDG PET/CT is recommended as the modality of choice for assessing treatment response

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Objectives:

1. Improving differential diagnosis of MM and SMM at staging

HOW?

Quantitative MRI (qMRI) and Radiomics

Radiomics: Decoding tumor phenotypes by exctracting high thoughput information from imaging data that capture tumor microenvironment

2. Understanding the differences between WB-qMRI and PET/CT

HOW?

Imaging Fusion techniques and Quantitative Imaging

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Patients:

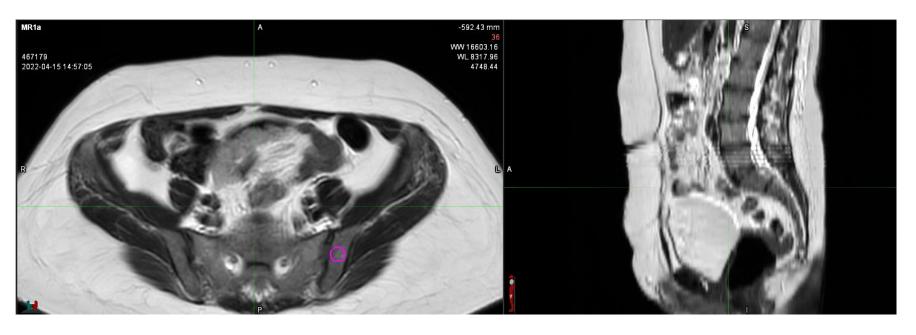
2020 – Ongoing: ~47 newly diagnosed patients

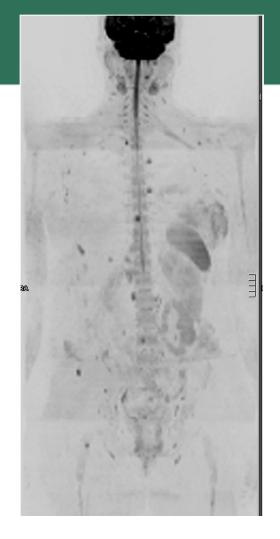
- 1. Patients affected by MM (34) will be enrolled and undergo imaging assessment as follows:
 - Baseline (within 1 months before starting therapy): WB-MRI and PET-CT
 - Follow-up (within 3 months after the end of therapy): WB-MRI and PET-CT
 - Yearly follow-up until progression: WB-MRI alone or in association to PET-CT.
- 2. Patients affected by SMM **(13)** will be enrolled and undergo WB-MRI alone or in association to PET-CT in yearly follow-up

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WB - qMRI

- Whole body Magnetic Resonance Imaging (WB-qMRI) with Diffusion Weighted Imaging (DWI) is a *radiation-free and contrast administration-free*, imaging method combining:
- high quality morphological images with

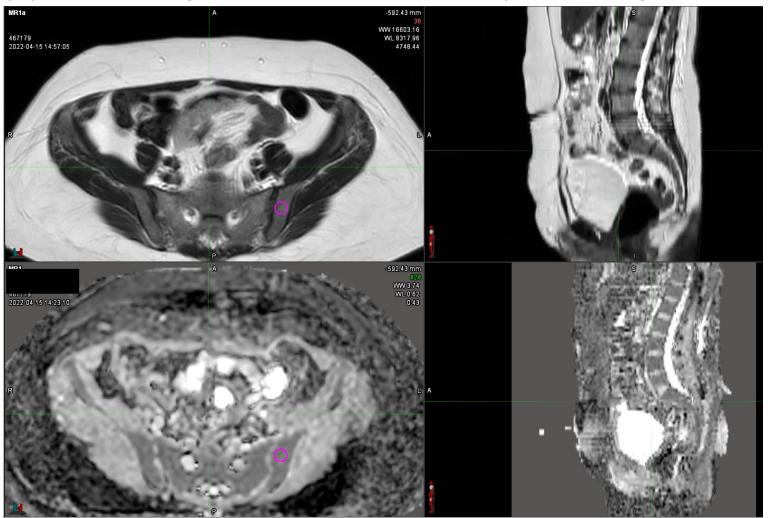




Dalili D et al Clinicl Oncolgical Imaging 2017 Donners R et al; Magn Reson Imaging Clin N Am 2018 Petralia G et al Magn Reson Imaging Clin N Am 2018 Tunariu N et al; Br J Radiol 2020 QIBA recommendations 2019 Koutoulidis V et al Radiology 2022

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• "functional" information on diffusivity of water molecules (DWI) that mainly depends on tissue cellularity and cell viability (lesion-to-background contrast of about 5mm) for detecting bone and soft tissue pathology.



T2 weighted imaging

ADC – mm/sec

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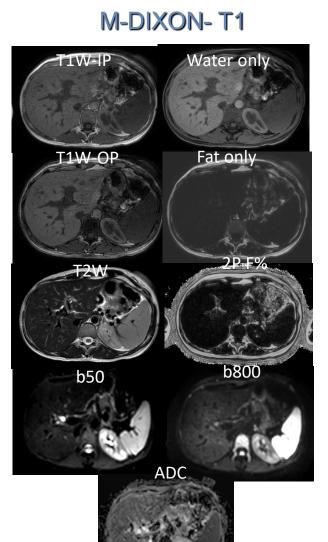
WB-MRI protocol

60 mins for basic adult protocol; 4000 images

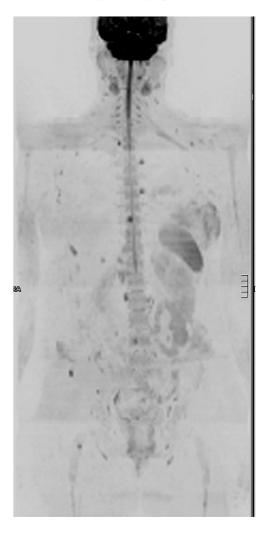
FOV:







DWIBS

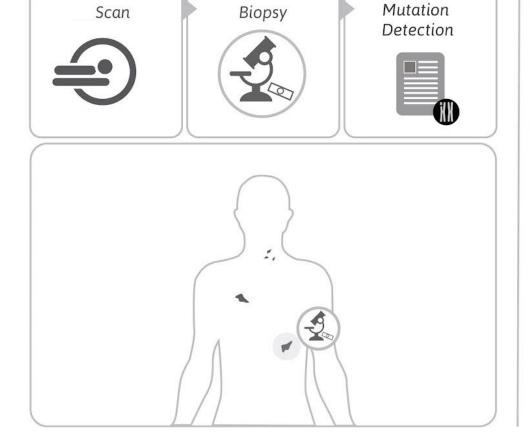


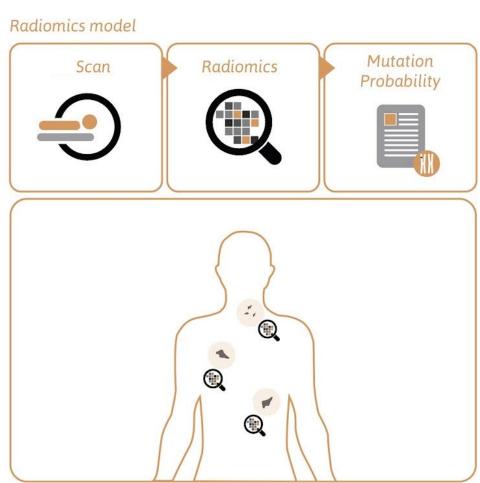
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Quantitative imaging and Radiomics



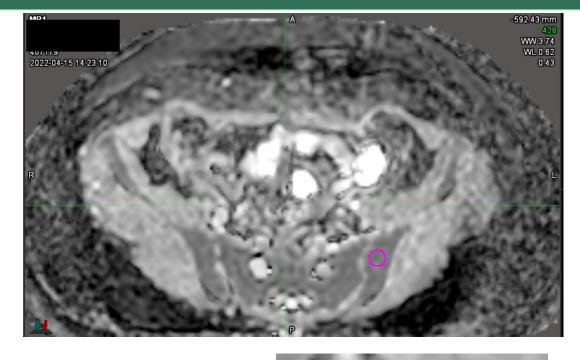
Current model



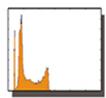


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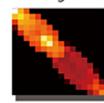
Biopsy – Genomics







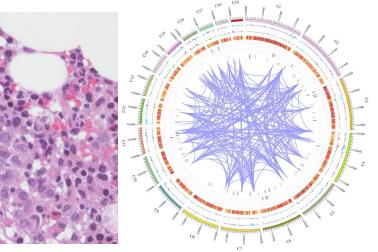
First order histogram features (n=42)



High order texture features (n=334)



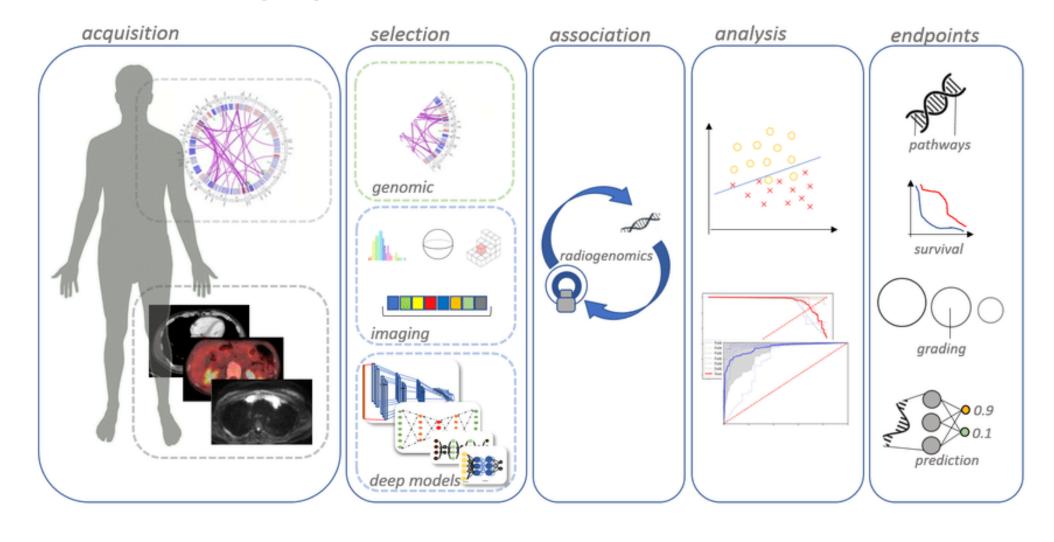
Form factor and GLZSM features (n=20)





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Quantitative imaging and Radiomics

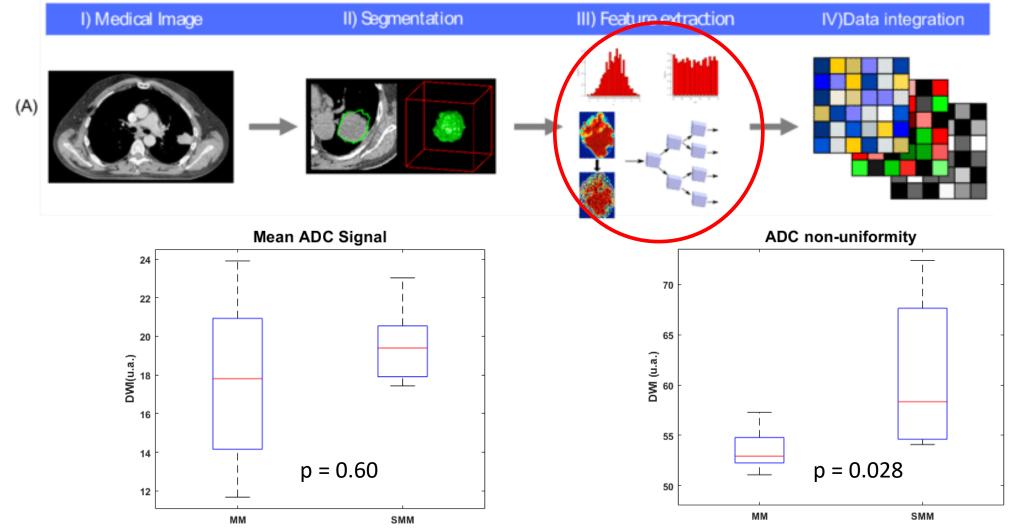


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Preliminary results

10 patients

- 5 Multiple Myeloma
- 5 Smoldering





Conclusions

- Quantitative imaging and radiomics can help to better diagnose MM from SMM
- Radiomics can capture also variation during therapy at various timestep
- Radiomics data can be integrated with clinical and genomics data to create more comprehensive diagnostics and prognostic models

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