

# Imaging biomarkers in oncologic liver disease

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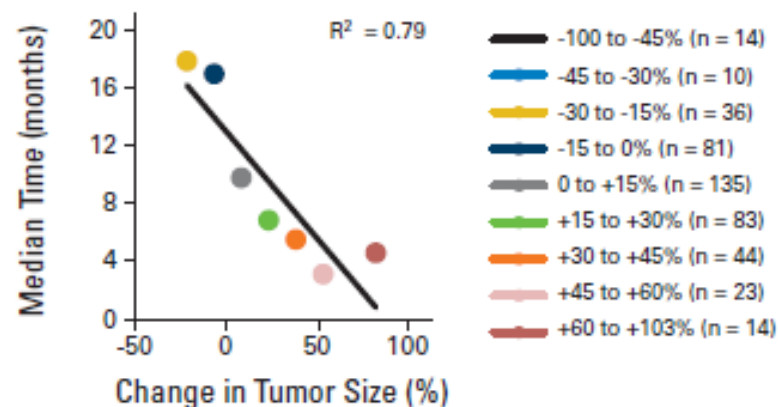


# Imaging biomarkers

- Imaging characteristics that are objectively measured as indicators of pathogenic processes or pharmacologic responses to therapeutic interventions: **quantitative imaging**
- Advantages of imaging biomarkers relative to serum or tissue biomarkers
  - Non invasive
  - Spatially and temporally resolved
- Diagnostic biomarkers: cross-sectional relationship between predictor and outcome
- Prognostic biomarkers: longitudinal relationship between predictor and outcome

# Imaging biomarkers: RECIST criteria

- RECIST: response evaluation criteria in solid tumors
- Measurement of tumor diameter at CT
  - Complete response: disappearance of the lesions
  - Objective response: decrease  $\geq 30\%$
  - Stable disease
  - Progressive disease: increase  $\geq 20\%$
- Used since more than 10 years to assess response to treatment in drug development studies

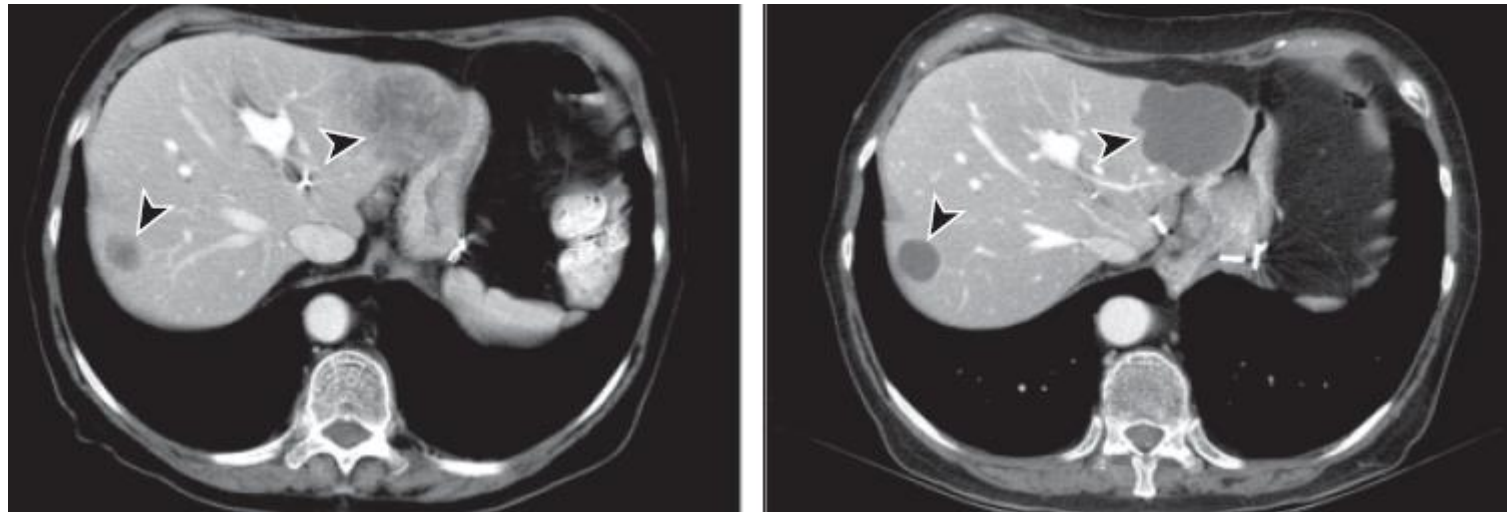


Therasse P et al. JNCI 2000; 92: 205-216

Jain RK et al. J Clin Oncol 2013; 266: 812-821

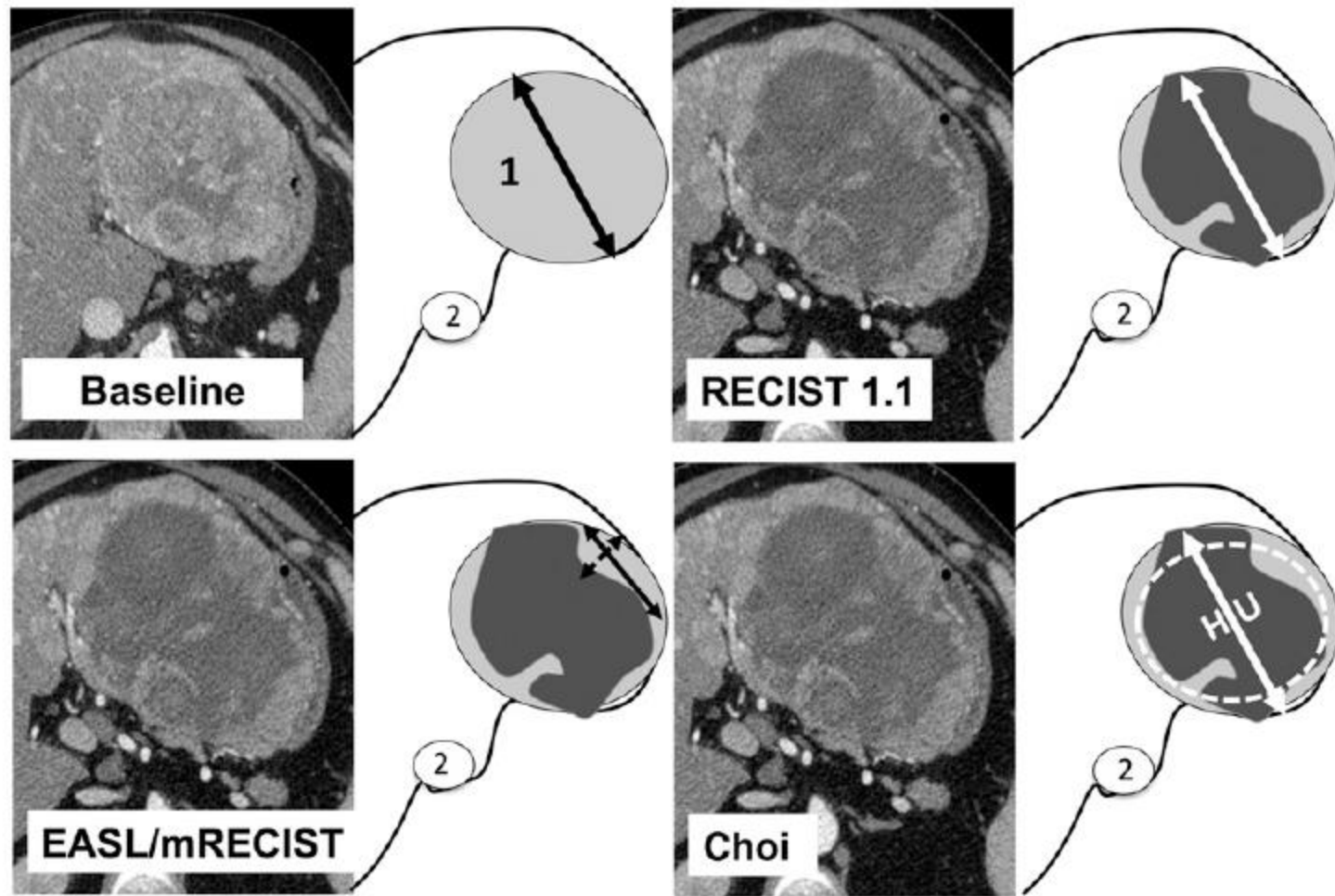
# Limitations of RECIST criteria

- RECIST : semi-quantitative score with arbitrary cutoffs
- Decrease in size is not always observed because tumor tissue may be completely replaced with necrosis or fibrosis, especially when targeted treatments are used



Colorectal liver metastases treated with chemotherapy and bevacizumab

# Size criteria in HCC treated with sorafenib



# Size criteria in HCC treated with sorafenib

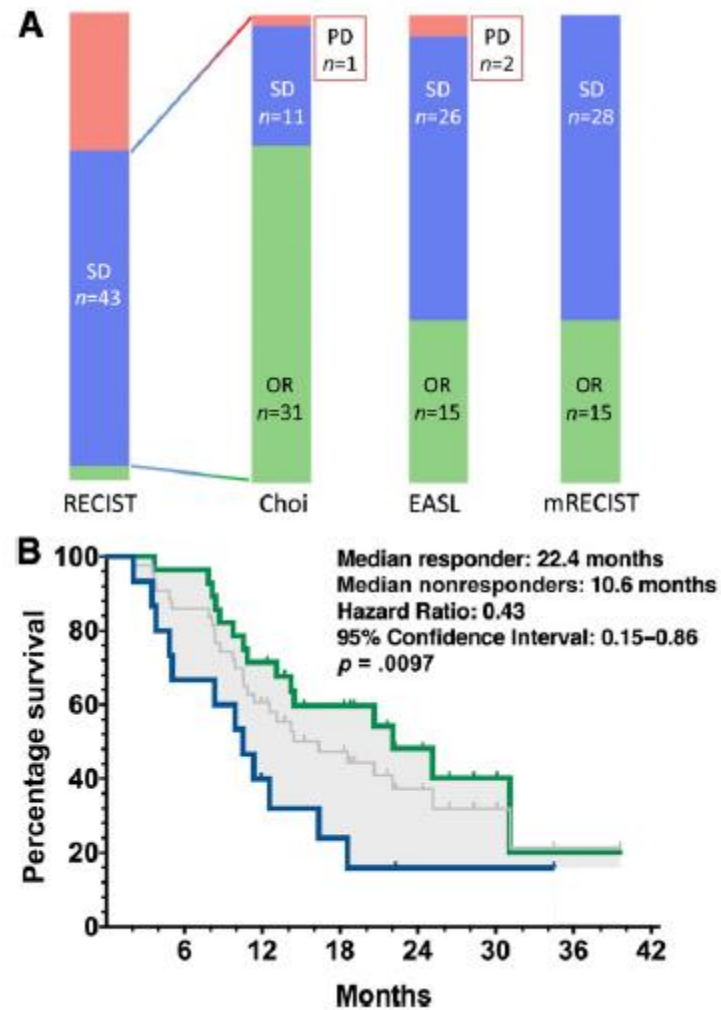
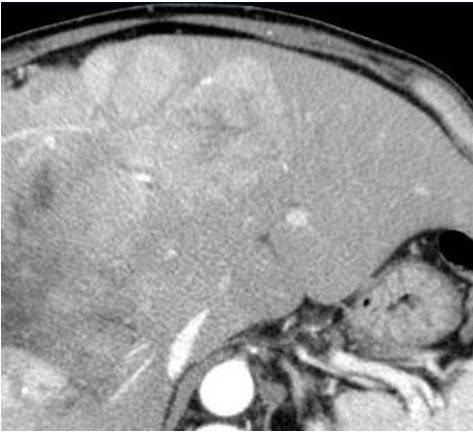


Figure 4. Evaluation of Choi criteria for patients with stable disease

# Limitations of mRECIST/EASL

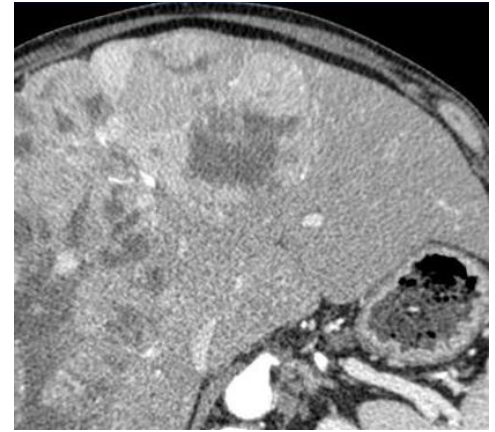
- 2D measurements in very heterogeneous tumors



March



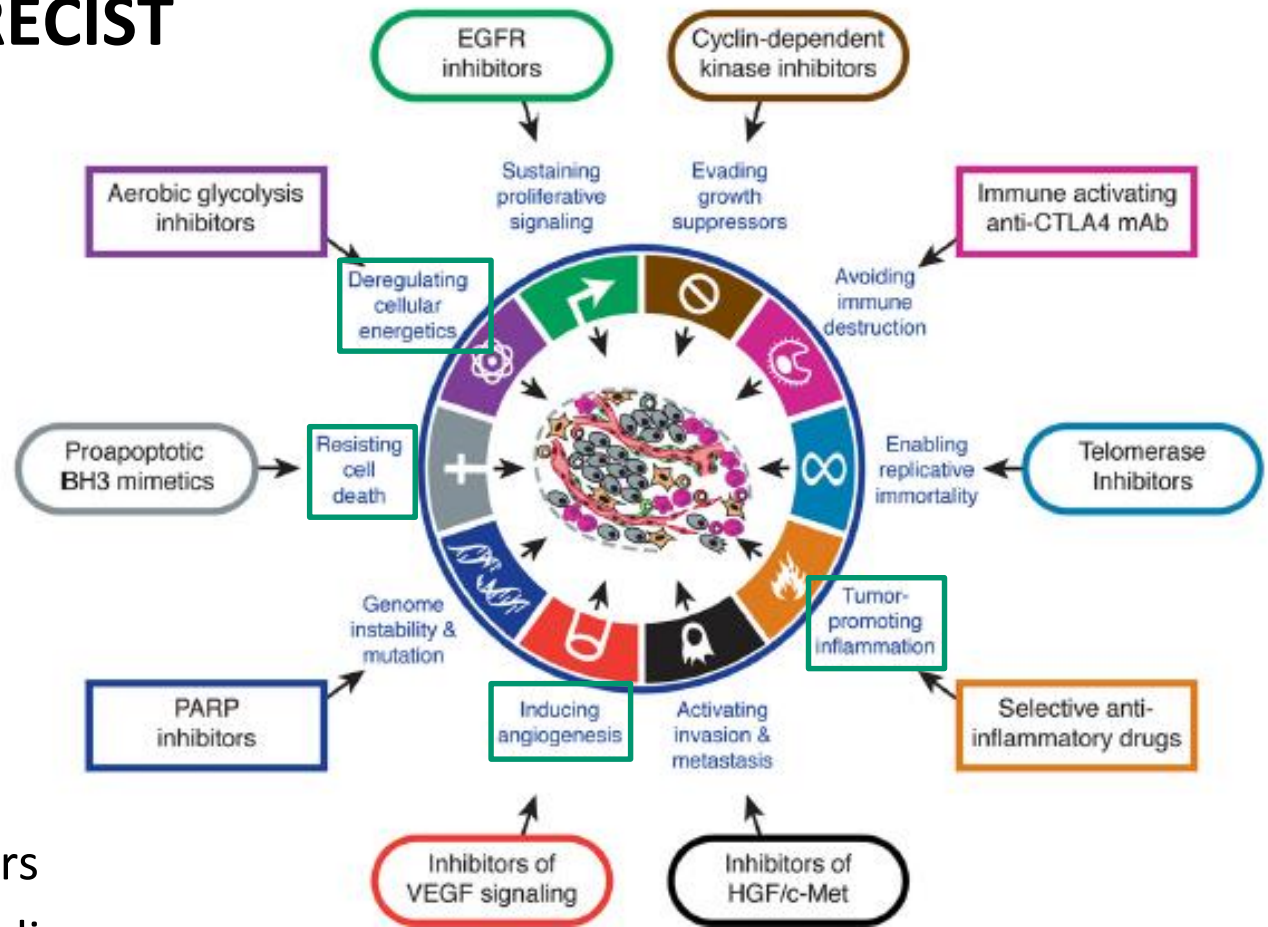
April



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# Beyond RECIST

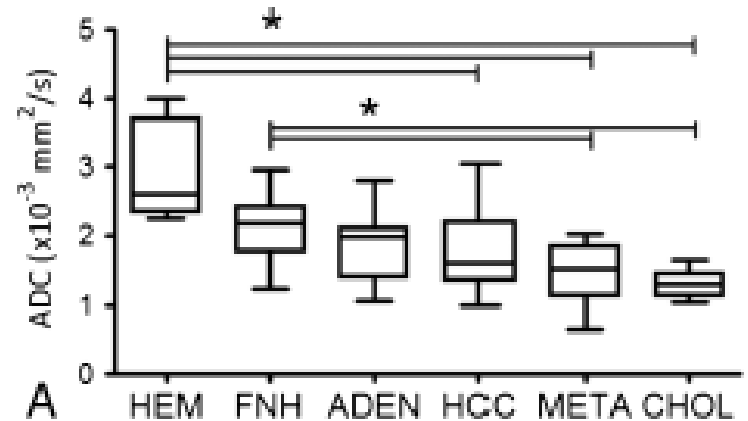


- Functional biomarkers
  - FDG PET: metabolism
  - Dynamic contrast-enhanced CT/MRI: angiogenesis
  - Diffusion MRI: cellularity
  - MR elastography: visco-elasticity

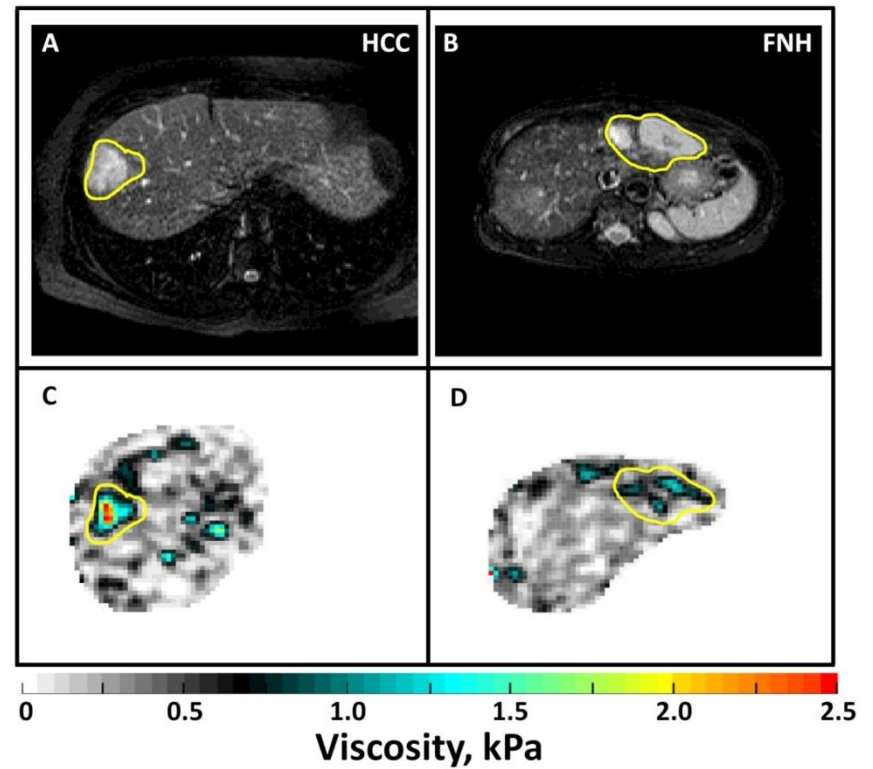
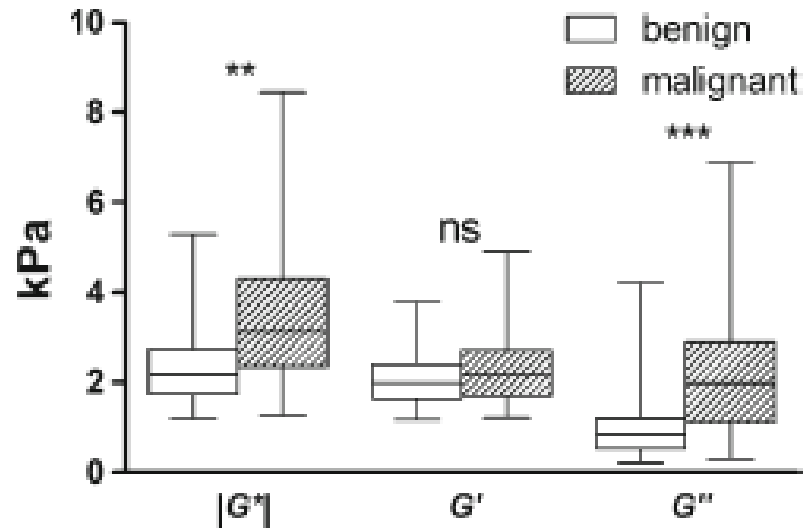


# ADC: distinction between benign and malignant lesions

- High ADC in benign lesions with high fluid content such as hemangiomas
- No significant difference in ADC between benign hepatocellular lesions and malignant tumors

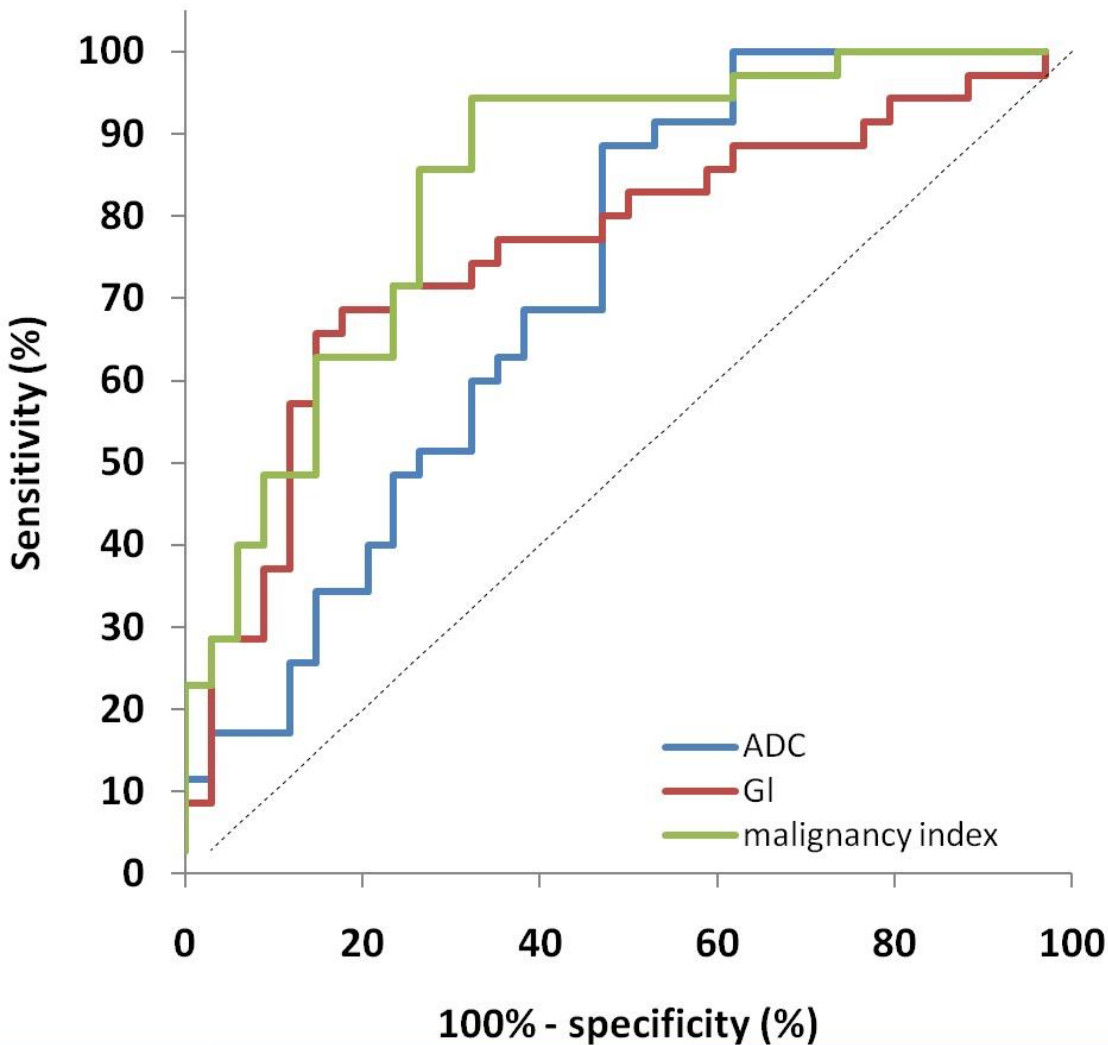


# Visco-elastic properties



Garteiser P. et al. Eur Radiol 2012; 22: 2169-2177

# Areas under ROC curves



$$\text{AUROC}_{\text{ADC}} = 0.71$$

$$\text{AUROC}_{\text{GI}} = 0.76$$

$$\text{AUROC}_{\text{malignancy index}} = 0.84$$

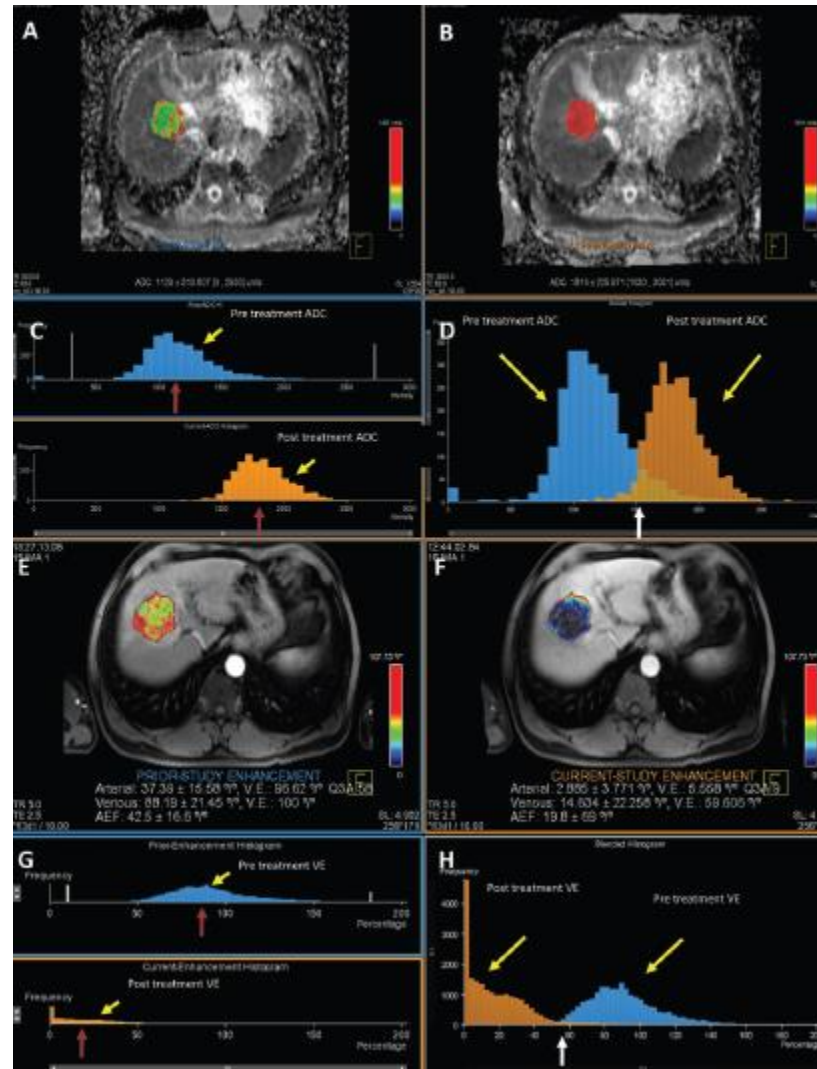
# FDG PET for tumor aggressiveness

- Meta-analysis: high pretreatment FDG PET activity is predictive of poor survival in colorectal liver metastases
- High  $SUV_{HCC/liver}$  is predictive of HCC aggressiveness (microvascular invasion, poor cellular differentiation)
- No correlation between SUV and ADC
- No correlation between SUV and  $K_{trans}$

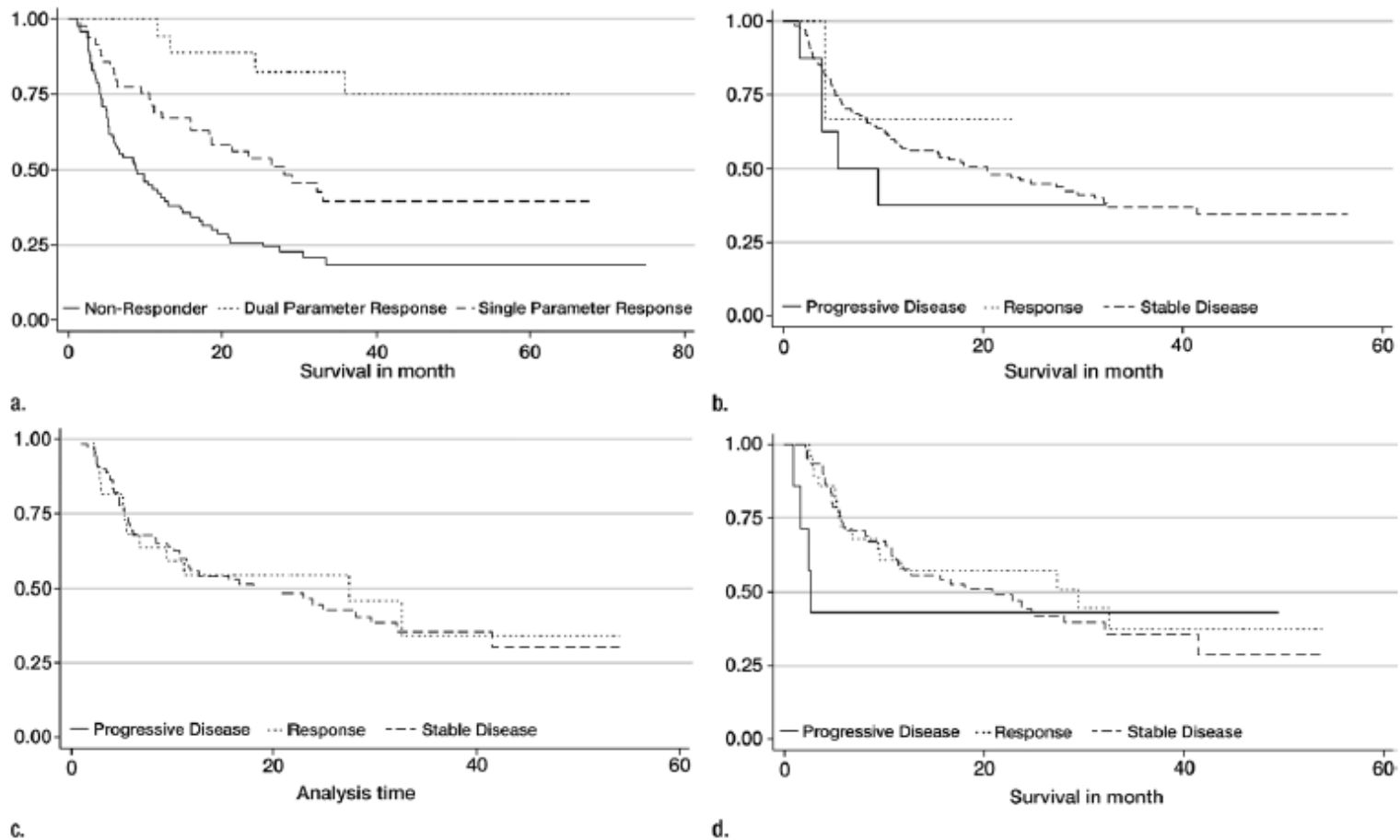
Xia Q et al. Cancer Imaging 2015

Boussouar S. et al. Cancer Imaging 2016

# Response to treatment: volumetric assessment of ADC and enhancement



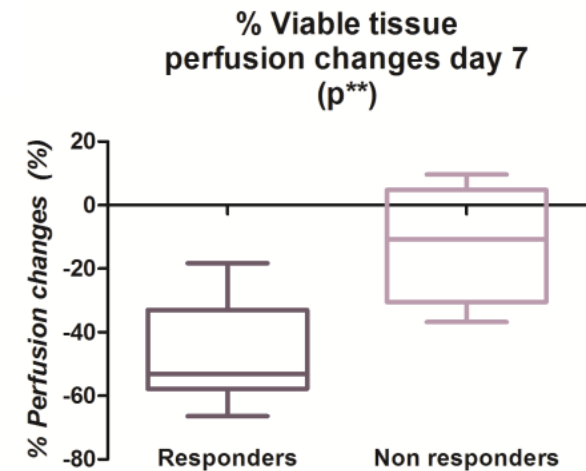
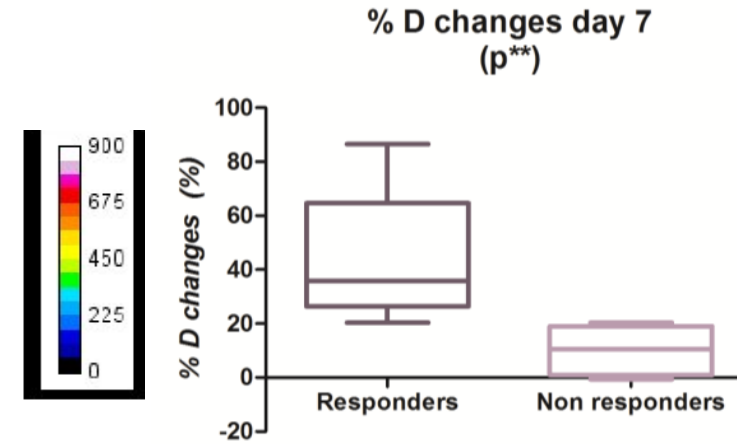
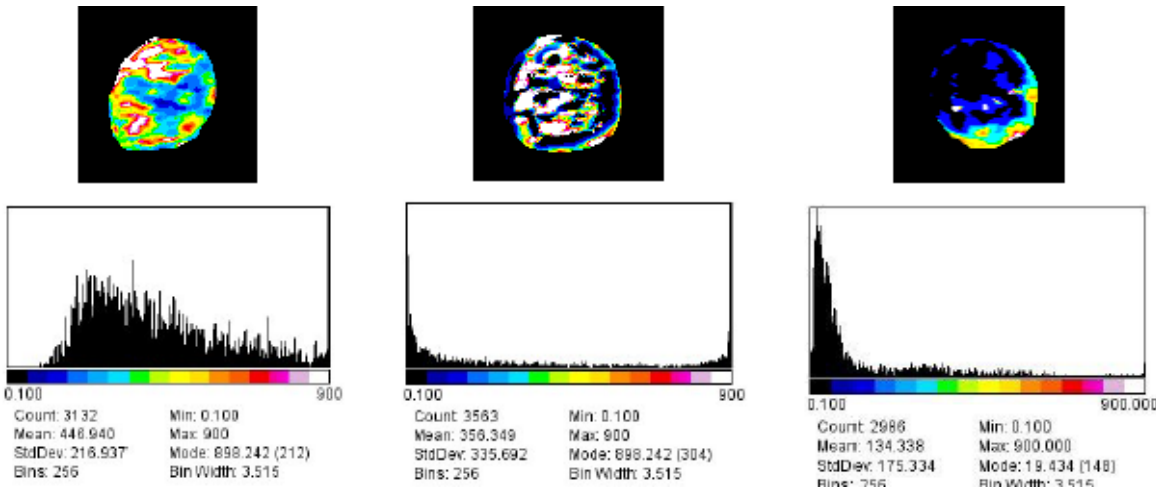
# HCC after TACE



Volumetric ADC increase  $\geq 25\%$  and portal venous enhancement increase  $\geq 65\%$  3 – 4 weeks after TACE are better predictors of survival than RECIST, mRECIST and EASL criteria

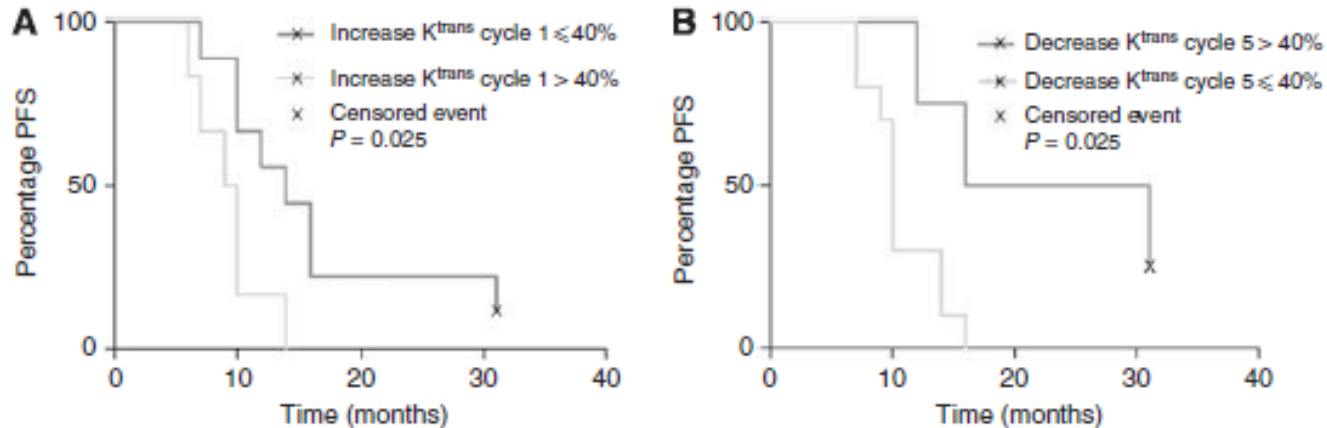


# Early diffusion and perfusion changes after TACE of HCC



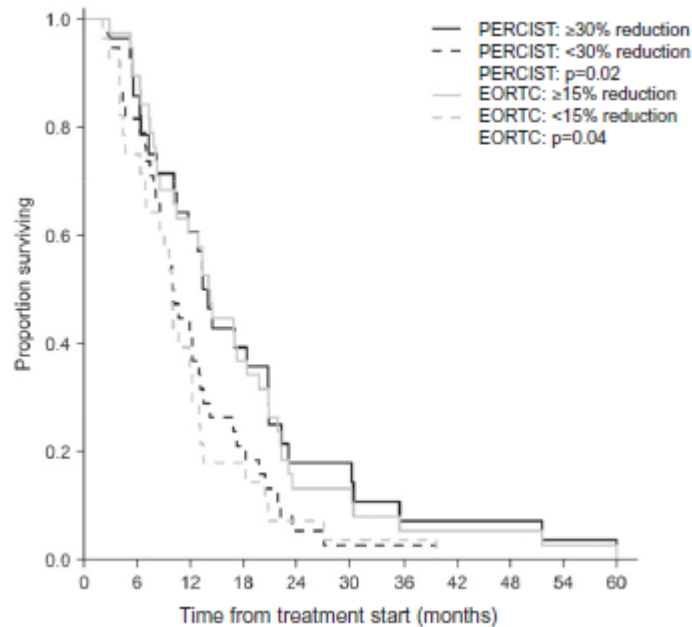
Diffusion and perfusion changes are already observed at MR imaging one week after TACE

# Perfusion MRI changes after treatment in liver metastases



Improvement of disease free survival in patients with liver colorectal metastases treated with chemotherapy and bevacuzimab when perfusion increase  $< 40\%$  after one week and perfusion decrease  $> 40\%$  after 10 weeks

# FDG PET as predictor of survival



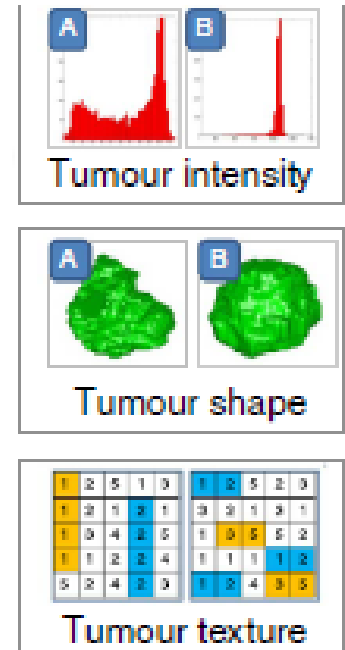
- Reduction of FDG uptake after one treatment (irinotecan and cetuximab) of metastatic colorectal cancer is predictive of survival
- However, diagnostic performance not strong enough to support implementation in daily practice

# Improvement of diagnostic performance with functional MRI relative to RECIST

- Shift from morphological to functional parameters
- Shift from manual one-dimensional to automatic three-dimensional approach
  - Tumor heterogeneity is better taken into account
  - Reproducibility is improved

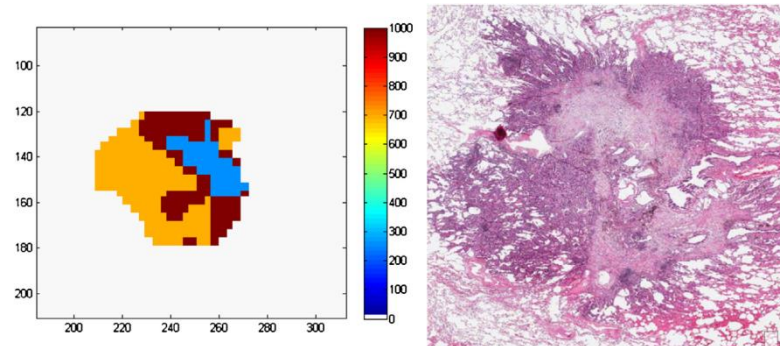
# Radiomics

- Radiomics is defined as the conversion of images to higher dimensional data and the subsequent mining of these data for improved decision support
- Three characteristics
  - Shape
  - Signal intensity
  - Texture: spatial variations of voxel intensity related to tumor heterogeneity



# Tumor heterogeneity

- Spatial and temporal tumor heterogeneity that creates local habitats
  - Random genetic mutations
  - Importance of microenvironment
- Genomic heterogeneity within tumors is a major cause of treatment failure
- Correlations between radiomics and histopathological phenotype
- Correlations between radiomics and genomics: radiogenomics

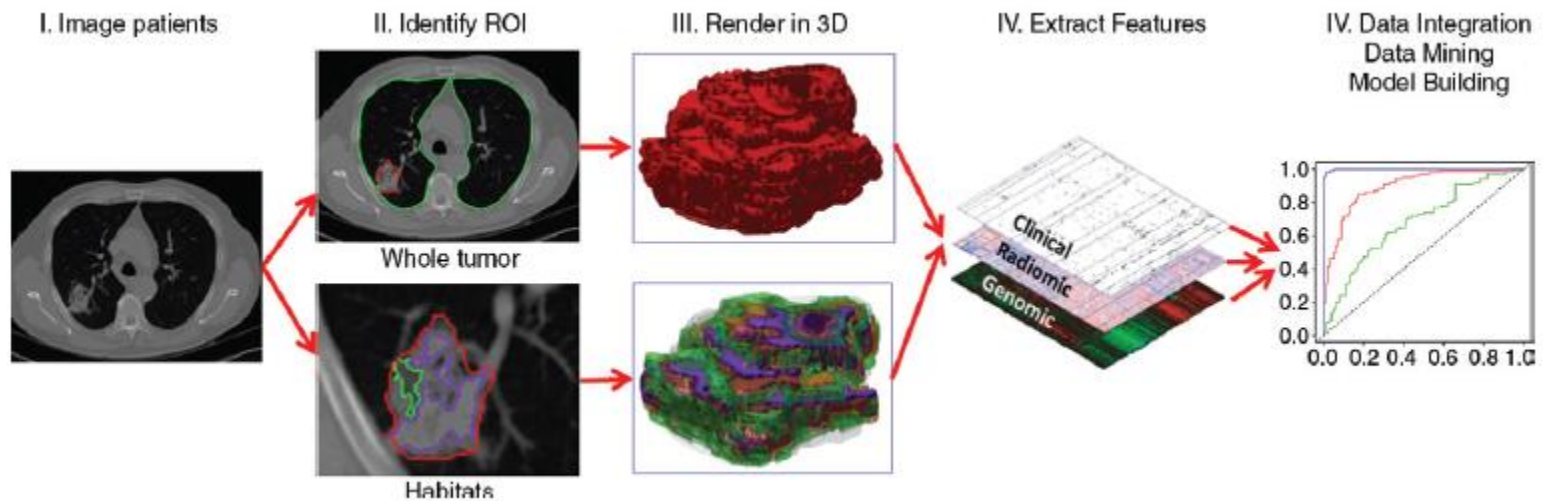


Gatenby RA et al. Radiology 2013  
Lee G et al. Eur J Radiol 2016

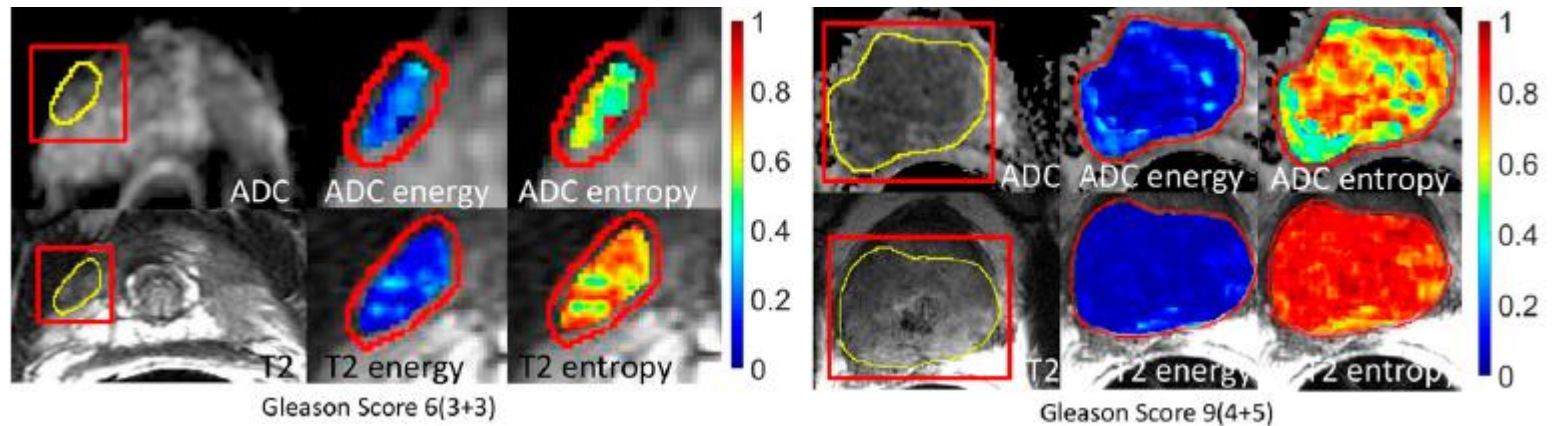


# Radiomics

- Standardized acquisition
- Segmentation
- Feature extraction
- Feature selection
- Data analysis: statistical (logistic regression) or machine learning methods



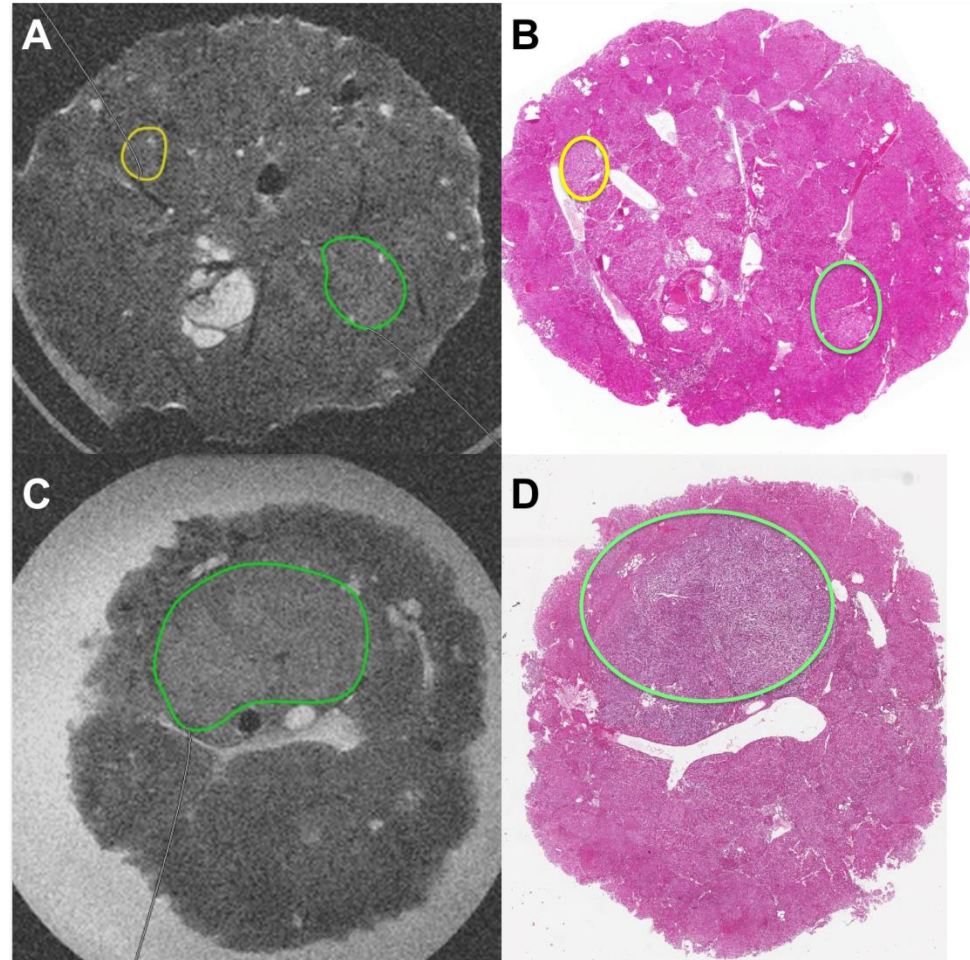
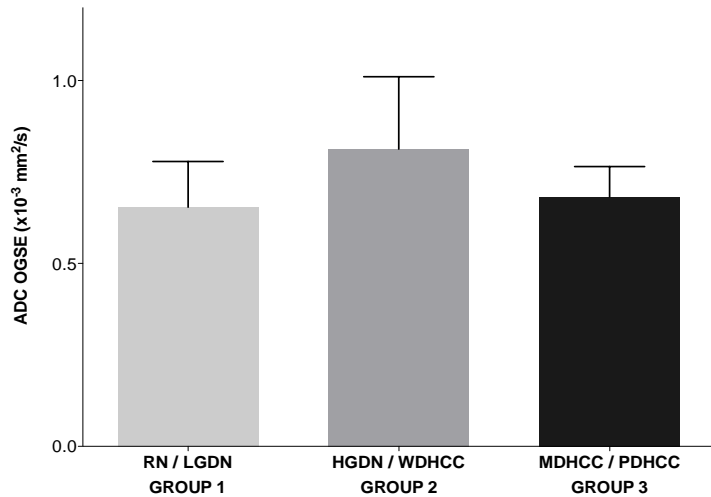
# Diagnostic value of radiomics



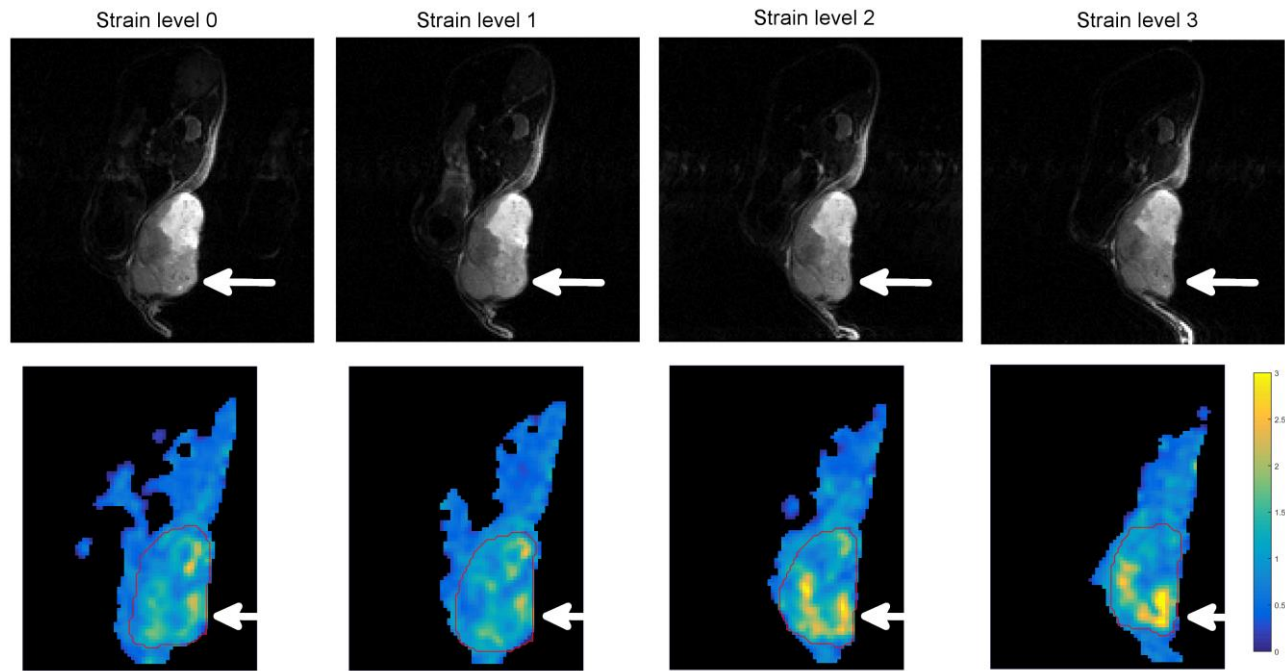
- In HCC, combinations of 28 imaging traits at CT can reconstruct 78% of the global gene expression profiles, revealing cell proliferation, liver synthetic function, and patient prognosis
- T2-weighted MRI and diffusion MRI in prostate cancer
  - Radiomics: accuracy of 93% for diagnosing Gleason 6 versus  $\geq 7$
  - $ADC_{mean}$ : 63%
- More validation studies are needed

# Advanced method: oscillating gradient DW imaging

- Very short diffusion times
- Sensitive to intracellular changes
- Characterization of high dysplastic nodules and early HCC



# Advanced method: MR force elastography



- MR elastography under increasing strain conditions
- Measurement of interstitial fluid pressure: marker of both prognosis and response to treatment

# Conclusions

- Imaging biomarkers, especially functional imaging biomarkers, help in liver tumor characterization and assessment of treatment response
- Integration of multiple predictors
  - Multiparametric MR imaging
    - DW MR imaging
    - Perfusion MR imaging
    - MR elastography
  - Multimodal approach
    - PET-MRI
  - Radiomics
    - Regional assessment of tumors
  - Data integration
    - Radiomics
    - Genomics, metabolomics
    - Clinical data
- Development of new biomarkers
- Need for validation (reproducibility, accuracy) and standardization
- Increasing need of biostatistics