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鼻咽癌是我国华南地区最常见的头颈恶性肿瘤之一。尽管鼻咽癌对于放化疗非常敏感,病死率呈现逐年下降的趋势,但是仍有高达20%的患者由于对放化疗敏感性的个体差异出现了治疗失败的情况,因此,如何早期精准地预测治疗失败的患者并进行相应的干预是延长局部进展期鼻咽癌患者生存时间的关键。磁共振检查不仅有多种结构成像可以对病灶形态、范围等进行清晰地显示,而且有多种磁共振功能成像序列从不同功能角度提供反映肿瘤的生物学行为、血流动力学、组织微结构、肿瘤代谢等的多种功能信息。因此磁共振成像是头颈部病变,尤其是鼻咽病变影像检查的重要方式之一。

酰胺质子转移(amide proton transfer,APT)作为一种可以进行肿瘤代谢的磁共振分子影像技术受到广泛关注,APT成像可以通过无创定量组织内的酰胺质子从代谢角度间接地反映不同组织和病灶细胞增殖和蛋白质代谢情况,有望在多种疾病,尤其是肿瘤领域得到广泛应用。目前,APT技术已经在颅脑、乳腺、子宫等部位疾病的诊断和疗效评价各方面进行了广泛的研究,其临床价值也得到多项研究的证实。但目前鲜有APT技术应用于头颈部的报道,原因是头颈部组织结构复杂,易造成磁敏感伪影,易出现呼吸、吞咽等生理运动伪影,且APT成像对于磁场均匀性要求比较高,对运动特别敏感。因此,在技术上将APT成像应用于头颈部充满挑战。

该研究中,作者使用临床应用的3.0 T磁共振扫描仪对鼻咽癌患者进行APT扫描,初步探索其在鼻咽部应用的可行性。详见内文第6~10页。

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About the cover

Nasopharyngeal carcinoma, is one of the most common head and neck malignancies in southern China. Although nasopharyngeal carcinoma is highly sensitive to radiotherapy and chemotherapy and its mortality rate is gradually decreasing year by year, up to 20% of patients still suffer from treatment failure due to individual differences in sensitivity to radiotherapy and chemotherapy. Magnetic resonance imaging not only has a variety of structural imaging techniques that can clearly depict the morphology and scope of the lesion, but also has a variety of functional imaging sequences that could reflect multiple functional information such as tumor biological behavior, hemodynamics, tissue microstructure, tumor microstructure and tumor metabolism. Hence, MRI becomes one of the most important imaging modalities for examining lesions in head and neck, especially for nasopharyngeal lesions.

Amide proton transfer (APT) imaging has attracted wide attention as a new type of magnetic resonance molecular imaging technologies that can be carried out to reflect tumor metabolism. APT imaging can indirectly reflect the proliferation and protein metabolism of different tissues and lesions from a metabolic perspective by non-invasively quantifying the amide protons in the tissue. It is expected to be widely used in a variety of diseases, especially in the field of tumors. At present, APT technology has been extensively studied in the diagnosis and treatment response evaluation of brain tumor, breast cancer, uterus cancer etc, and its clinical value has also been confirmed by a number of studies. However, there are few reports of applying APT imaging in the head and neck, which might be due to the complicated structure composition of the head and neck susceptible to artifacts, physiological movement artifacts caused by breathing and swallowing. In addition, APT imaging is sensitive to inhomogeneity of magnetic field and movement. Therefore, it is technically challenging to apply APT imaging in the head and neck.

In this pilot study, on a clinically 3.0 T magnetic resonance scanner, we intend to preliminarily explore the feasibility of applying APT imaging on patients with nasopharyngeal carcinoma. See text page 6-10.