# Feasibility of ultra high field 7.0. Tesla MR Spectroscopy for breast cancer detection and monitoring of neoadjuvant chemotherapy efficacy

Published: 02-03-2011 Last updated: 27-04-2024

Validation of 7T breast MRS for monitoring of neo-adjuvant chemotherapy in patients with breast cancer.

Ethical reviewNot approvedStatusWill not startHealth condition typeBreast neoplasms benign (incl nipple)Study typeObservational non invasive

# **Summary**

# ID

NL-OMON35742

**Source** ToetsingOnline

**Brief title** 7T MRS breast cancer study

# Condition

• Breast neoplasms benign (incl nipple)

Synonym breast cancer, breast neoplasm

**Research involving** Human

# **Sponsors and support**

**Primary sponsor:** Universitair Medisch Centrum Utrecht **Source(s) of monetary or material Support:** VENI-DK

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### Intervention

Keyword: 7.0 Tesla MRS, breast cancer, breast neoplasm, Ultra high field MRS

### **Outcome measures**

#### **Primary outcome**

1. Sensitivity of 7T MRS detection of histological proven breast cancer. The in

vivo 7T MRS data will be compared to ex vivo measurements with HR-MAS and LC-MS.

2. Sensitivity of 7T MRS to monitor neo-adjuvant chemotherapy effects in

membrane metabolism

#### Secondary outcome

# **Study description**

#### **Background summary**

Every year over 12.000 Dutch women are diagnosed with invasive breast cancer. This makes breast cancer the cancer type with the highest incidence in Dutch women.

When a breast lesion is detected, conventional triple diagnosis, which consists of palpation, mammography and fine-needle cytology, currently with the addition of ultrasound imaging, is performed to establish the diagnosis. Before treatment can be initiated accurate staging needs to be conducted to develop an individualized treatment plan. Staging requires precise knowledge of the size of the Index Lesion as well as of the presence or absence of lesions in other quadrants of the breast.

Magnetic resonance imaging has an additional value in the staging of breast cancer due to its capability to depict multicentric and multifocal disease, to assess the tumor in a three-dimensional way and to detect lesions in dense breast tissue. In recent years there has been an increasing interest in MRI as a non-invasive diagnostic modality for the work-up of suspicious breast lesions. The sensitivity of MRI for diagnosing breast cancer is over 90% with specificity around 70%

Recently ultra-high field 7.0 Tesla MRI has become clinically available. The availability of ultra-high field 7T MRI offers new diagnostic possibilities: due to the very high magnetic field strength of the scanner, images can be

acquired at a higher spatial resolution allowing smaller structural detail to be depicted. For breast cancer this means not just the possibility of detection of smaller lesions, but possibly also better morphologic classification of detected lesions and better delineation of lesion extent. In addition, 7 Tesla MRS offers the possibility to monitor therapy of lesions by means of the detection of phospholipid metabolites that have shown clinical potential as biomarkers for oncological disease in preclinical studies.

#### **Study objective**

Validation of 7T breast MRS for monitoring of neo-adjuvant chemotherapy in patients with breast cancer.

#### Study design

prospective cohort study

#### Study burden and risks

The patient/volunteer will have to fill out an MRI examination form before entering the 7T MRI area. The patient /volunteer will undergo 1 (group 2 and 3) or 3 MRI / MRS exams.

As far as is known there are no short- or long term risks involved in having an MRS examination. Some patient will experience light flashes or tingling due to the very high magnetic field of the 7 Tesla MRI. This will immediately disappear as soon as leaving the scanning area. Participants are not requested to take any precautions or actions following to or prior to the MRS exam.

# Contacts

#### Public

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# **Trial sites**

# **Listed location countries**

Netherlands

# **Eligibility criteria**

#### Age

Adults (18-64 years) Elderly (65 years and older)

### **Inclusion criteria**

- 18 years or older
- Females
- Group 1: patients selected for neo-adjuvant chemotherapy

- Group 2: patients with BIRADS 4c or 5 classification on mammography, US or lower field MRI, selected for surgery

- Group 3: healthy volunteers

### **Exclusion criteria**

- Any prior surgery or radiotherapy to the ipsilateral breast
- Karnofsky score <= 70
- Pregnant or lactating women
- Contra-indications to MRI scanning according to the 7T screening list of the UMCU

# Study design

### Design

Study type:	Observational non invasive
Intervention model:	Other
Allocation:	Non-randomized controlled trial
Masking:	Open (masking not used)

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Control:	Active
Primary purpose:	Diagnostic

### Recruitment

NL	
Recruitment status:	Will not start
Enrollment:	30
Туре:	Anticipated

# **Ethics review**

Not approved	
Date:	02-03-2011
Application type:	First submission
Review commission:	METC Universitair Medisch Centrum Utrecht (Utrecht)

# **Study registrations**

# Followed up by the following (possibly more current) registration

No registrations found.

# Other (possibly less up-to-date) registrations in this register

No registrations found.

# In other registers

Register CCMO **ID** NL35649.041.11

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