

BRIGHAM HEALTH



BRIGHAM AND
WOMEN'S HOSPITAL

How imaging can shape the treatment of lung disease

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Division of Pulmonary and Critical Care Medicine

Brigham and Women's Hospital

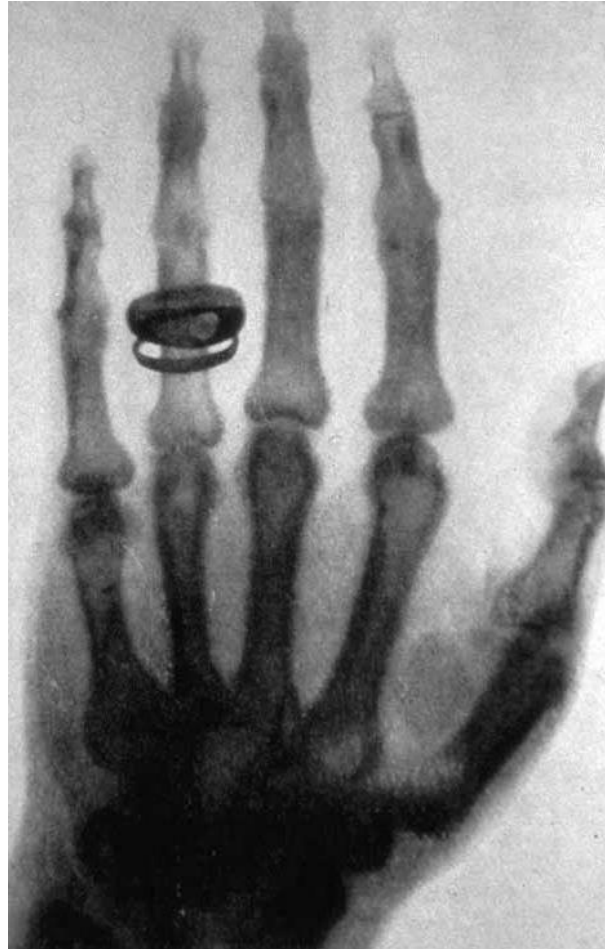


Applied Chest Imaging Laboratory
Brigham and Women's Hospital – The Lung Center

Disclosures

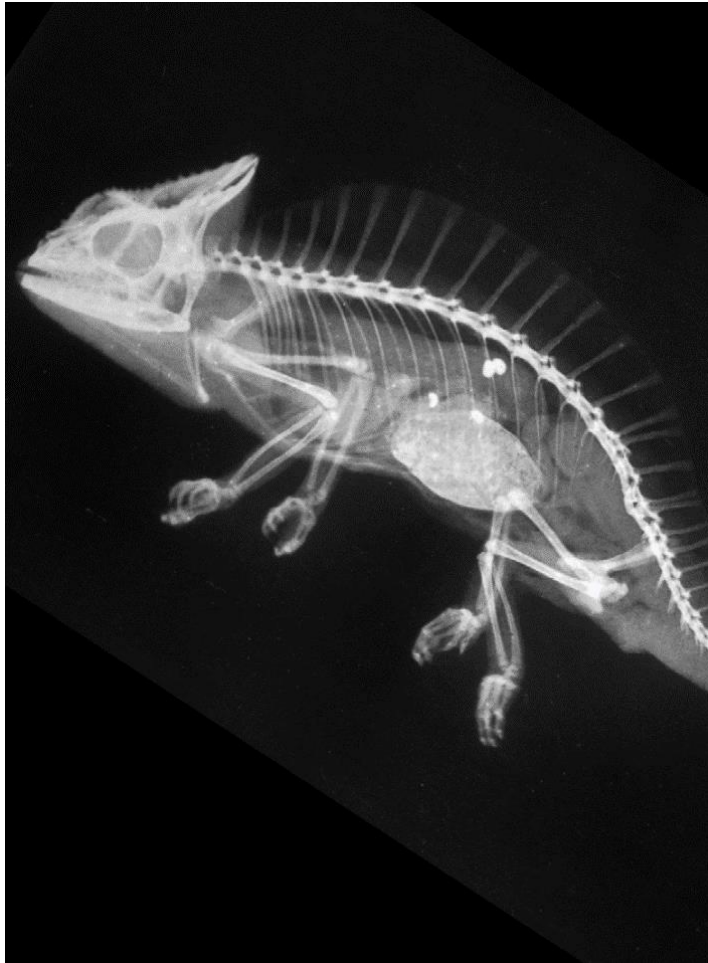
- Consultancies: Apogee, Astra Zeneca, Avalyn, Intellia Therapeutics, Pieris Pharmaceuticals, Regeneron, Sanofi, Verona Pharma, Vertex
- Quantitative Imaging Solutions: Co-founder of a consulting group and software development LLC for image analytics and data management
- Sponsors: Boehringer Ingelheim, DoD, Lung Biotechnology, NIH/NHLBI
- My wife works for Biogen

Wilhelm Rontgen: Nov 8 1895



Major John Hall Edwards

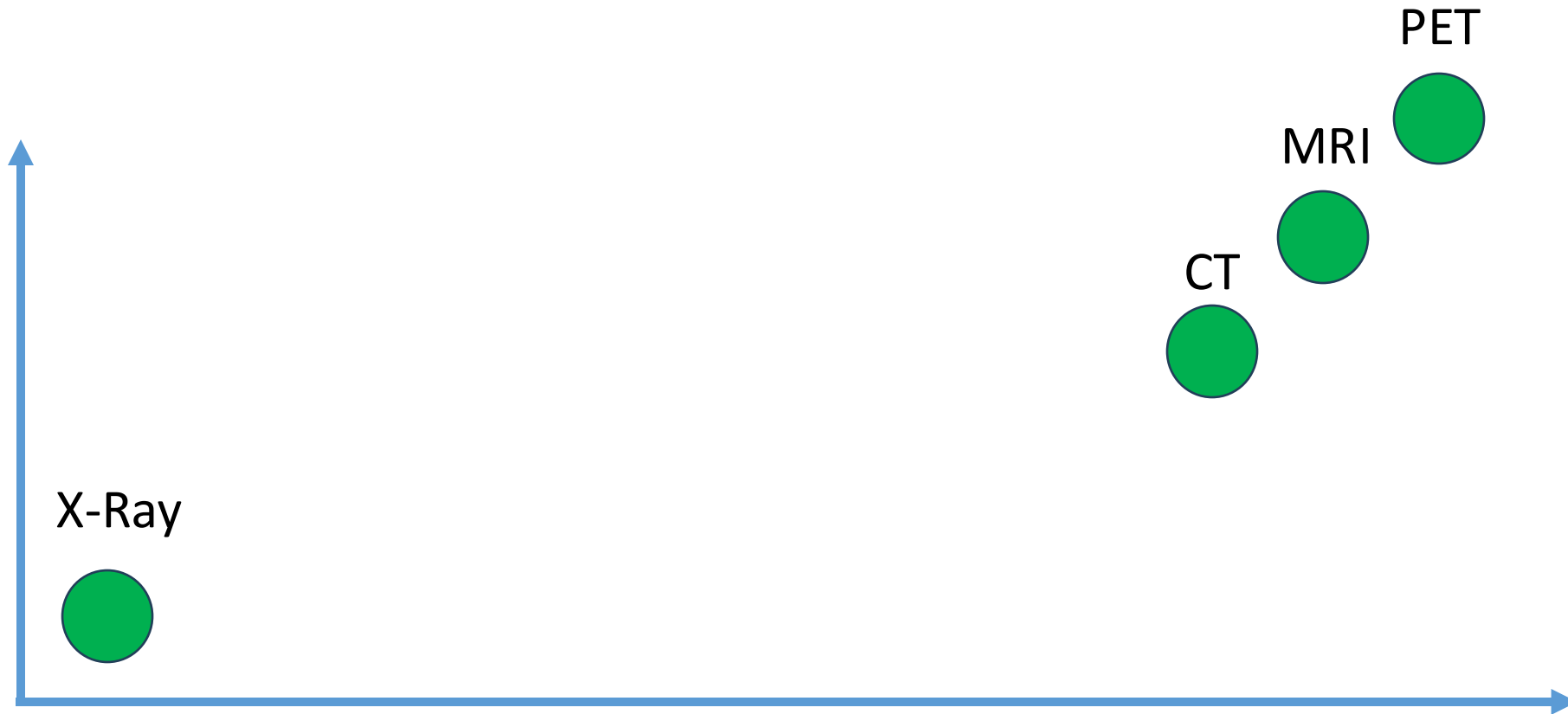


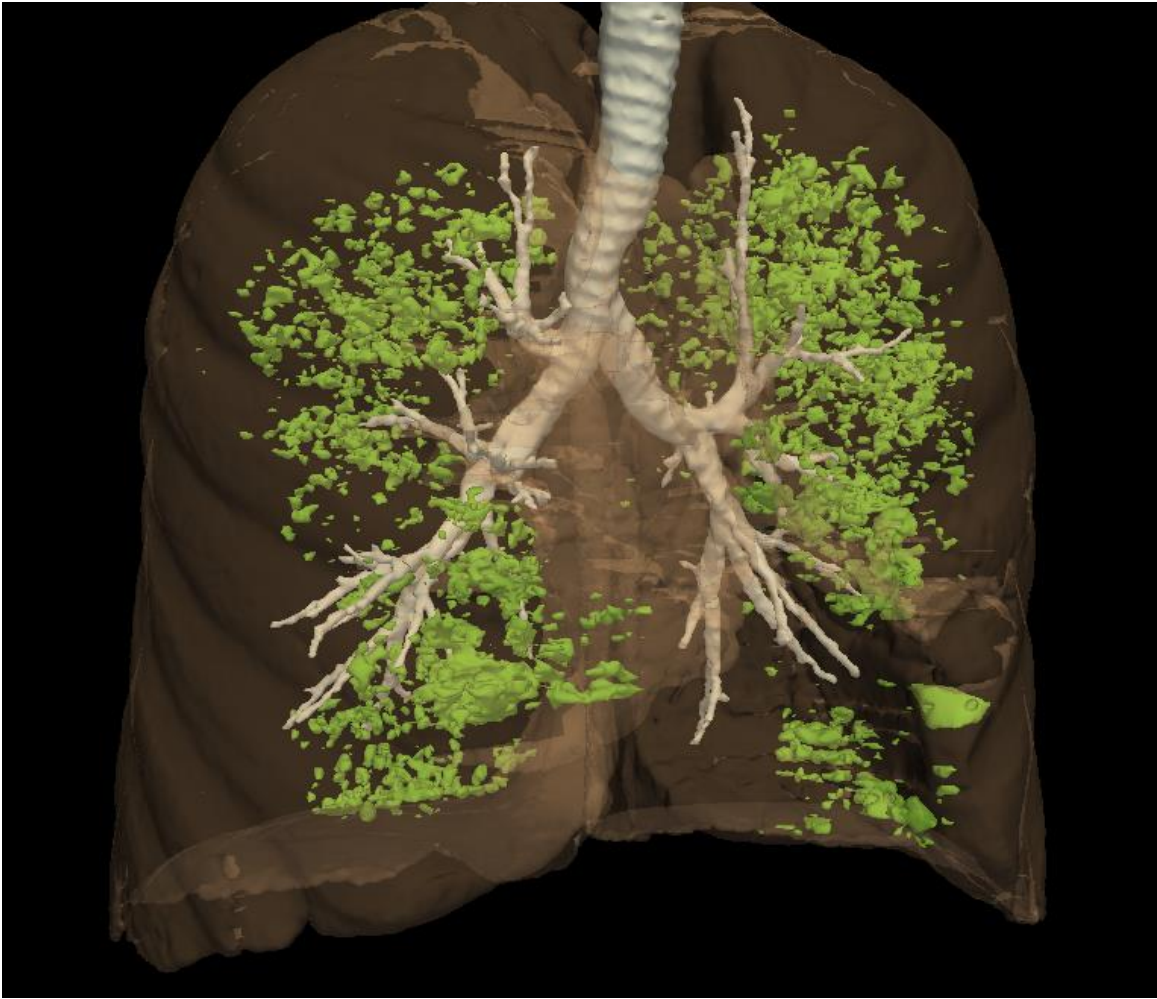


The Story of Radiology, Volume 2.
European Society of Radiology



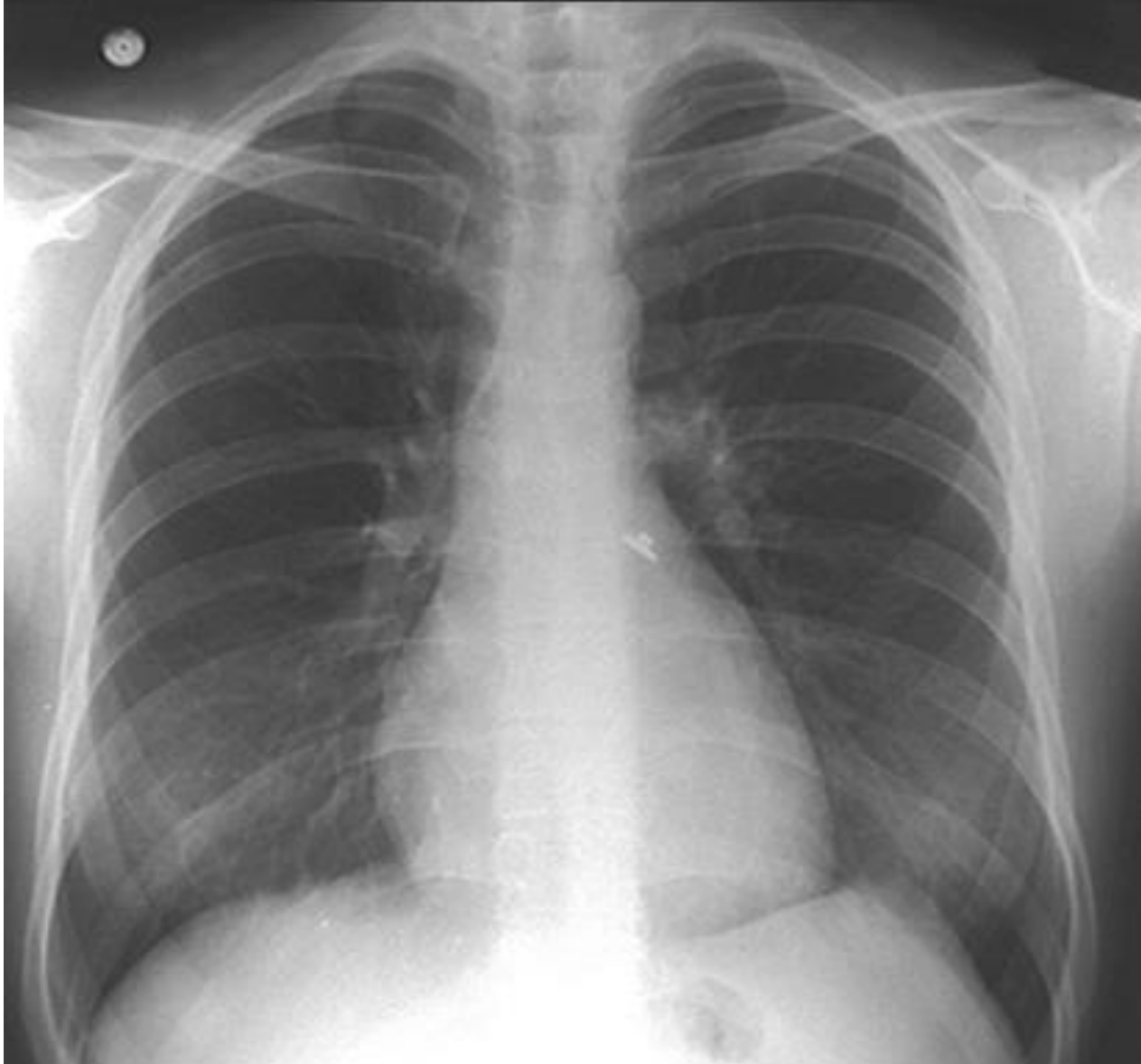
The exponential of imaging....





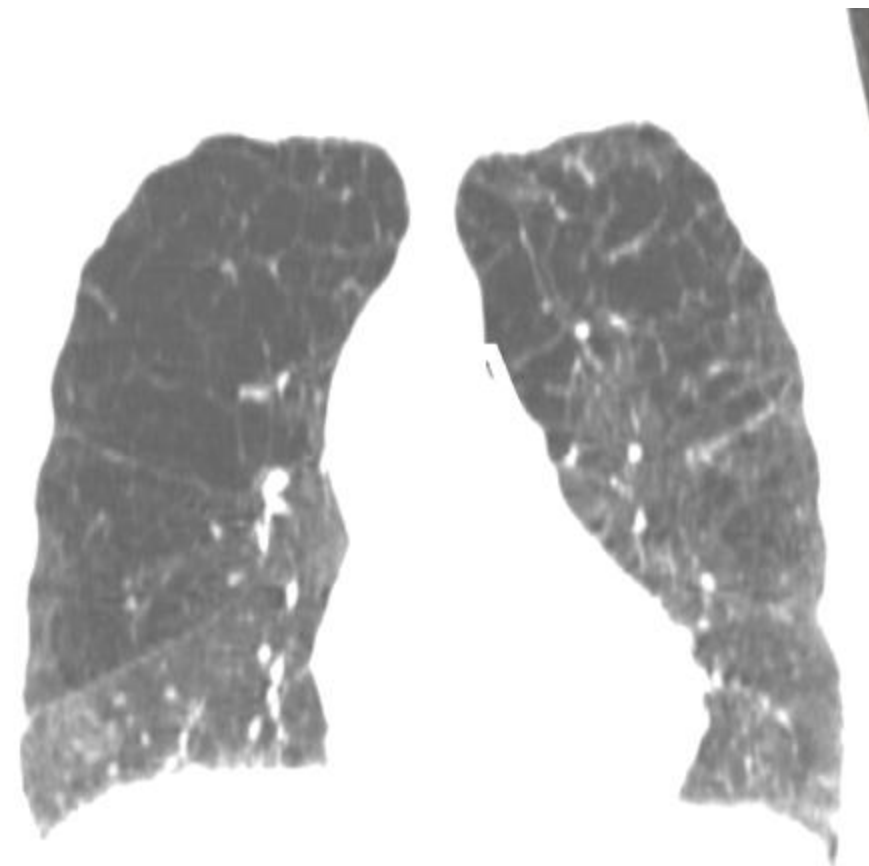
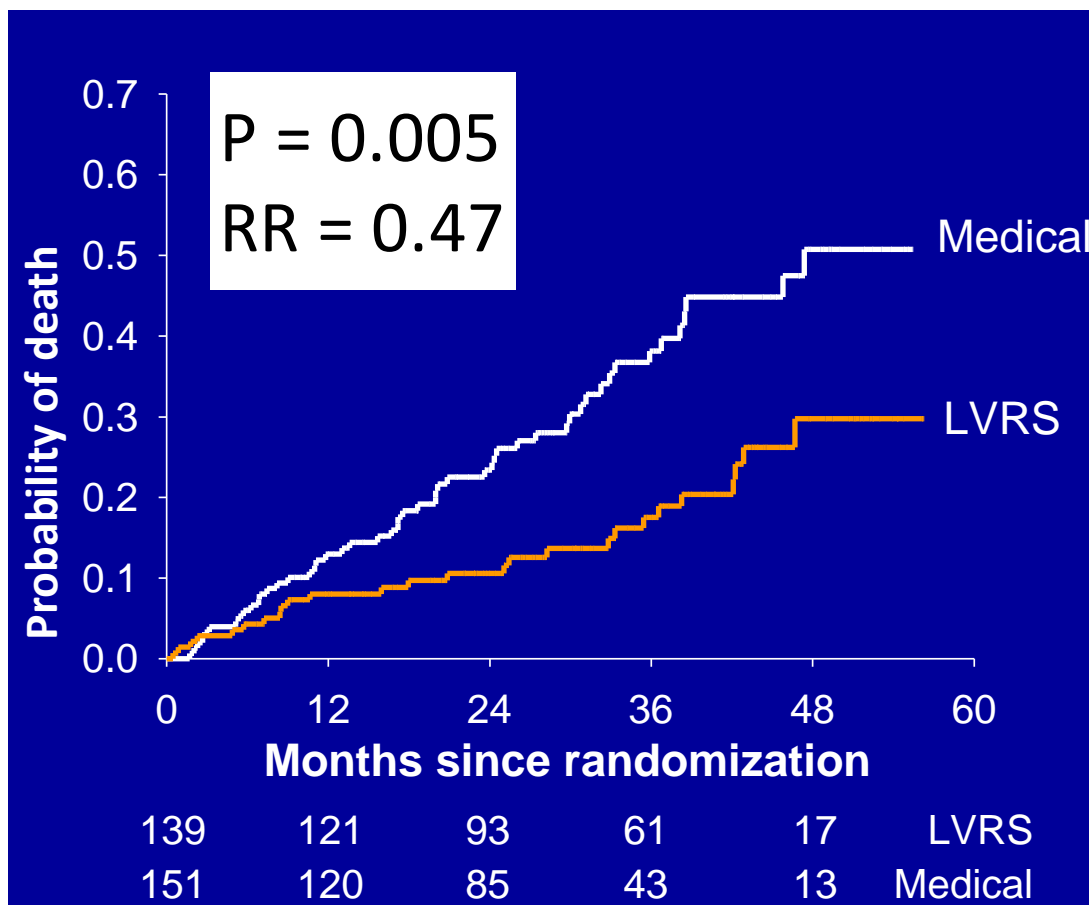
- Parenchyma
 - Emphysema
 - ILD
- Vasculature
 - Pulmonary embolism
 - Vasculopathy
- Airways
 - Mucus Plugs
 - Bronchiectasis
- Lung Cancer
- Body Composition
- Intrinsic Susceptibility

Emphysema



NETT Results: Mortality

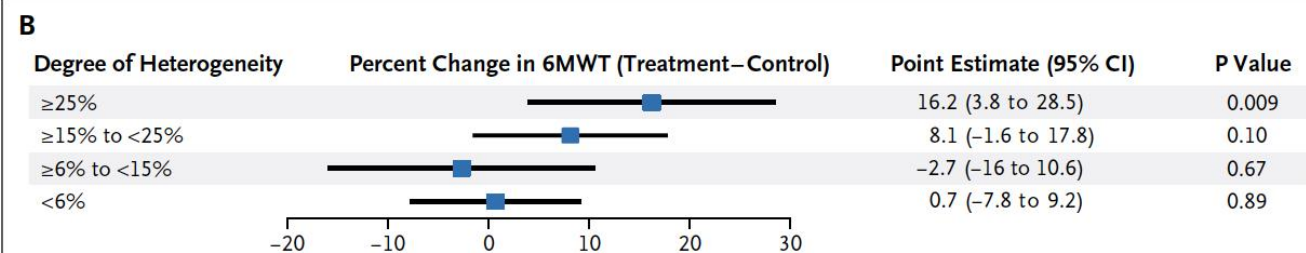
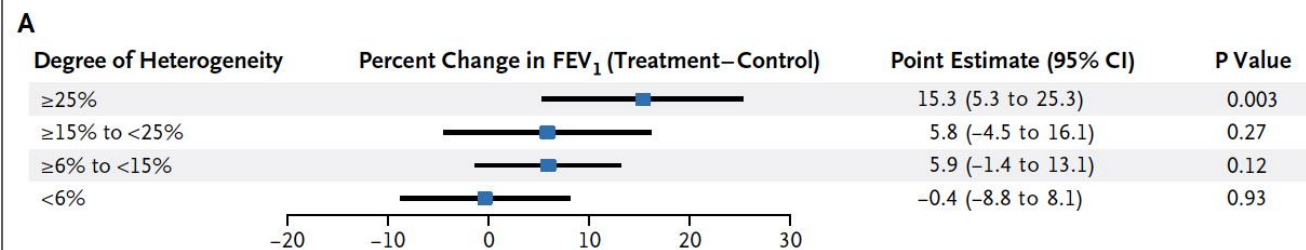
Upper-lobe disease and low exercise capacity



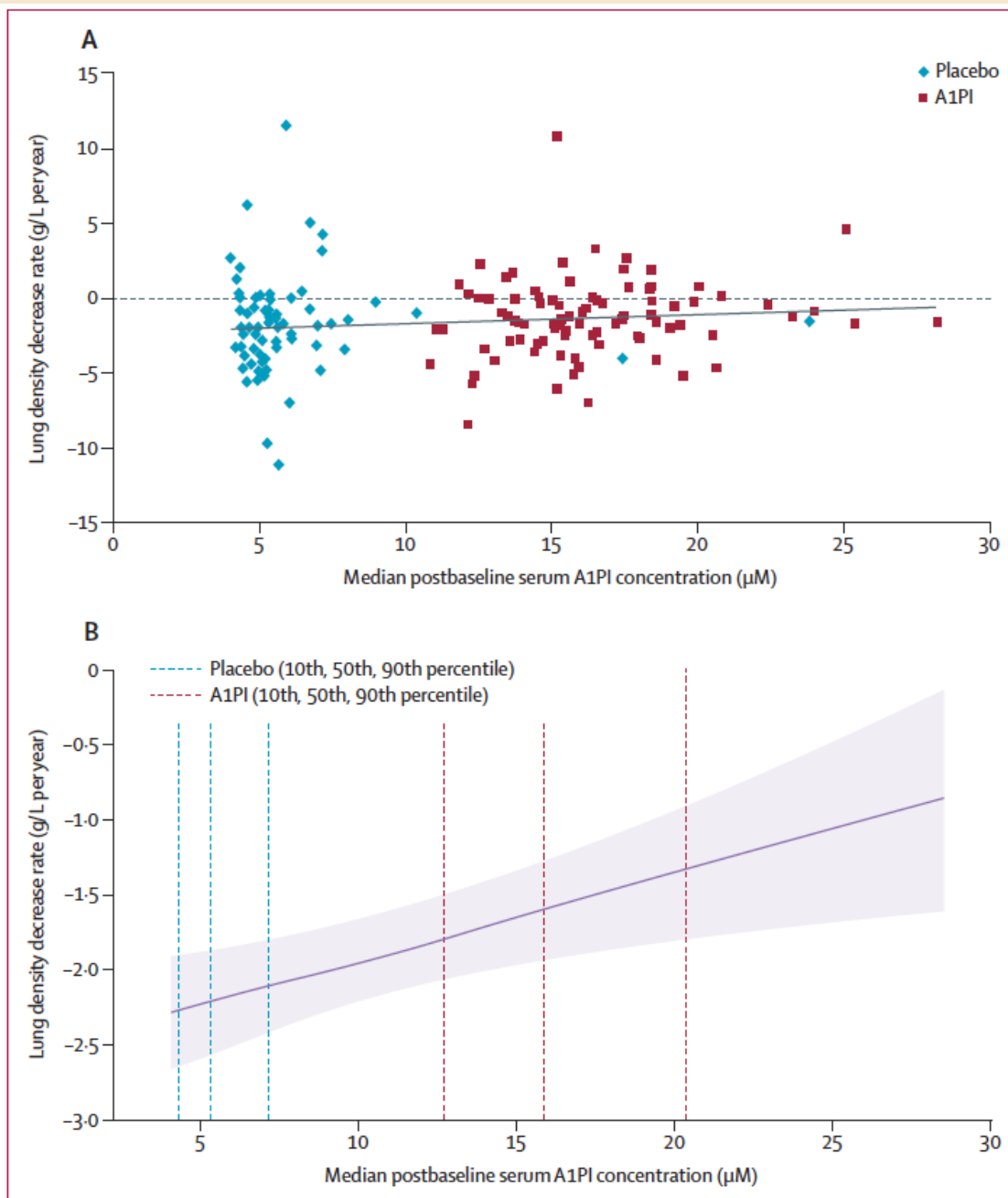
High-risk patients excluded

NEJM 2003;348:2059-73.

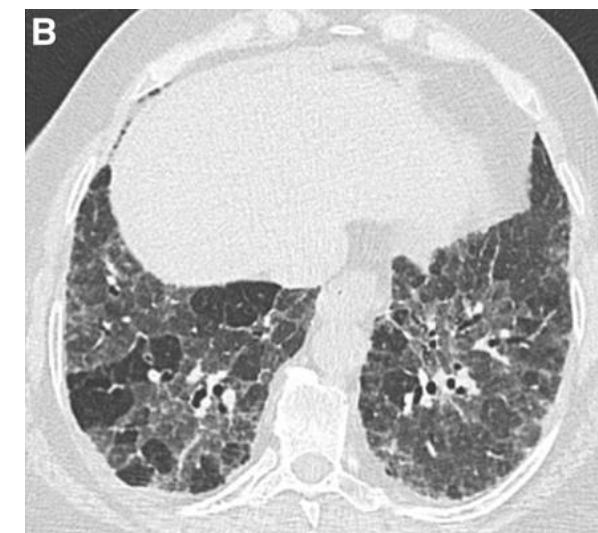
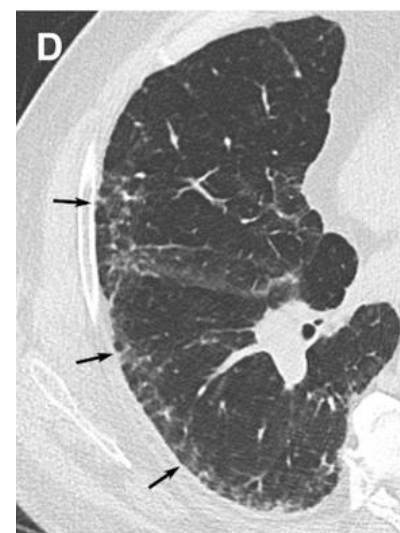
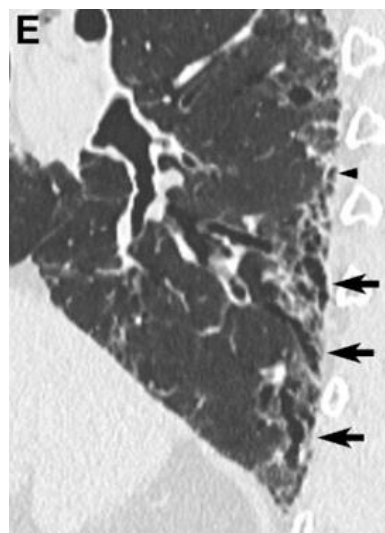
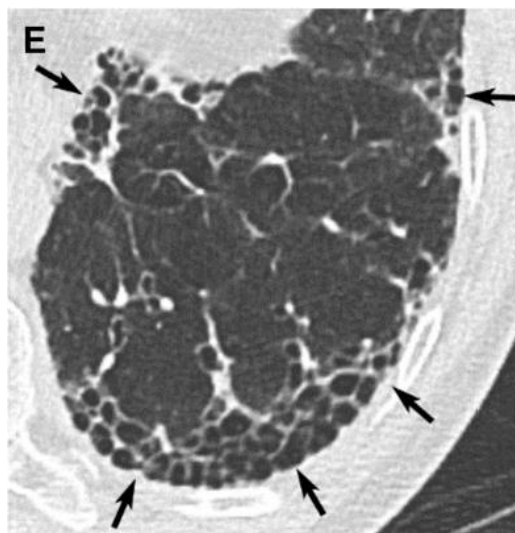
Endobronchial Valves



Response to Therapy



Interstitial Lung Disease



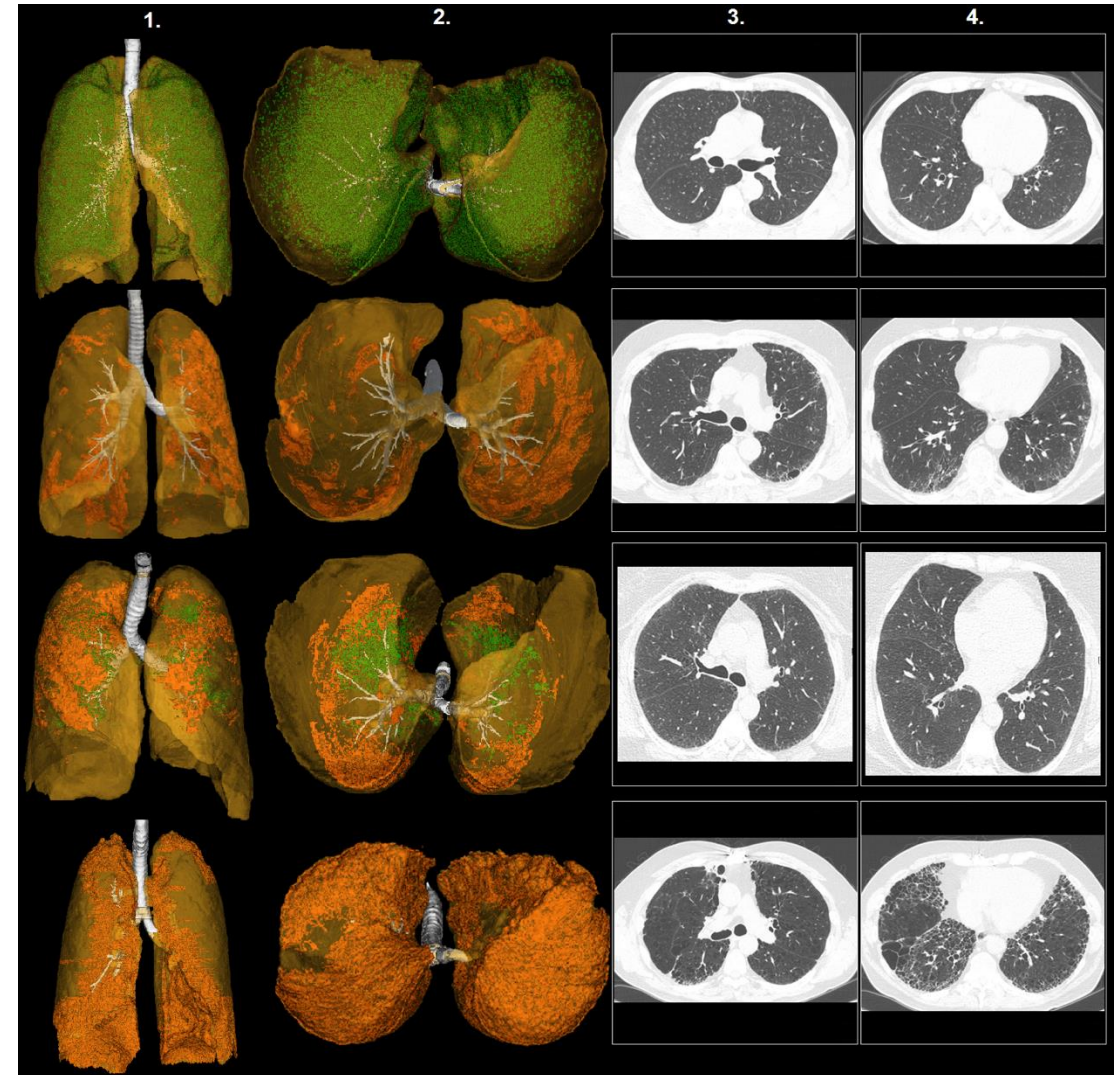
IPF suspected*		Histopathology pattern			
		UIP	Probable UIP	Indeterminate for UIP	Alternative diagnosis
HRCT pattern	UIP	IPF	IPF	IPF	Non-IPF dx
	Probable UIP	IPF	IPF	IPF (Likely)**	Non-IPF dx
	Indeterminate for UIP	IPF	IPF (Likely)**	Indeterminate for IPF***	Non-IPF dx
	Alternative diagnosis	IPF (Likely)** /non-IPF dx	Non-IPF dx	Non-IPF dx	Non-IPF dx

Interstitial Lung Abnormalities (ILA)

- 3-7% of adults over 50
- Subtypes are progressive
- Associated with MUC5B
- Associated with adverse outcomes
 - All cause and respiratory mortality

NEJM 2013;368:2192-2200.

JAMA 2016;315:672-681.



NEJM 2011;364:897-906.

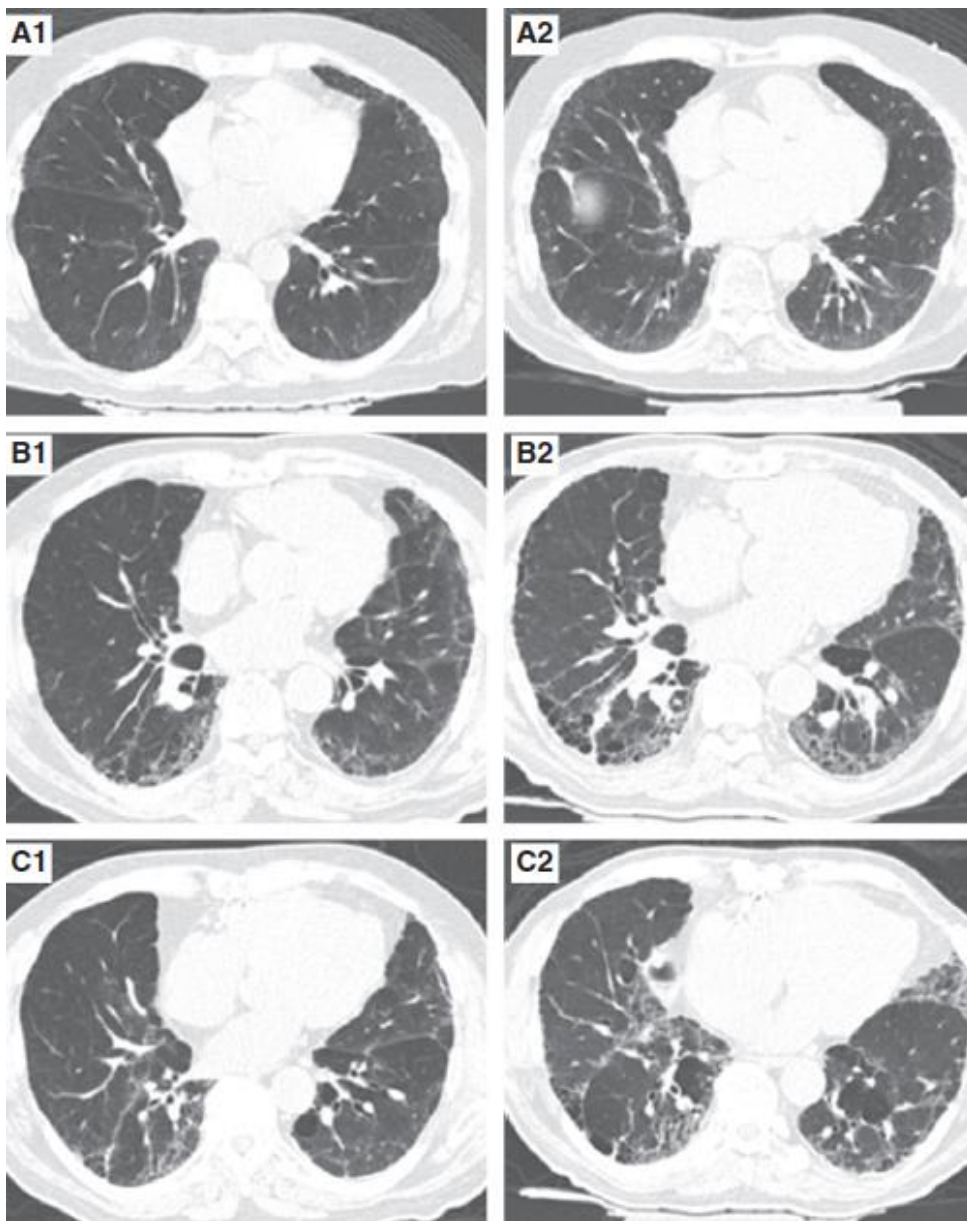


Table 3. Association between Imaging Features and ILA Progression

	Unadjusted Analysis		Adjusted Analysis*	
	OR (95% CI)	P Value	OR (95% CI)	P Value
Centrilobular nodules	0.2 (0.1–0.4)	<0.0001	0.2 (0.1–0.5)	0.0002
Ground glass [†]	—	—	—	—
Subpleural reticular markings	5.9 (2.3–15)	0.0002	6.6 (2.3–19)	0.0004
Nonemphysematous cysts	3.1 (1.6–5.9)	0.0005	2.5 (1.3–5.1)	0.009
Lower lobe predominant changes	5.2 (1.8–15)	0.002	6.7 (1.8–25)	0.004
Traction bronchiectasis	5.9 (2.3–14.9)	0.0002	6.6 (2.3–19)	0.0004
Honeycombing [‡]	—	—	—	—

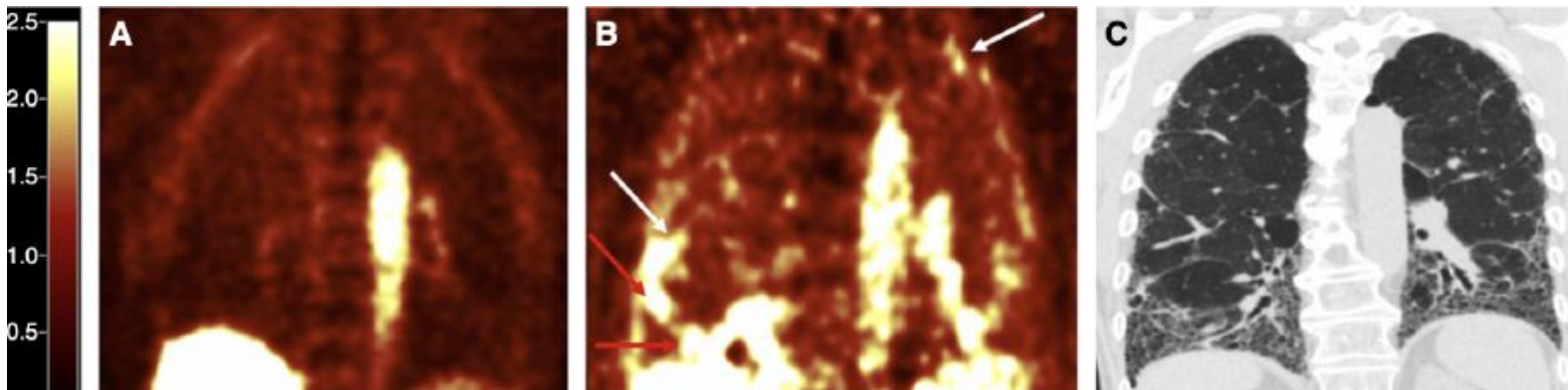
For definition of abbreviations, see Table 2.

*Adjusted for age, sex, body mass index, pack-years smoking, current smoking status, and *MUC5B* genotype.

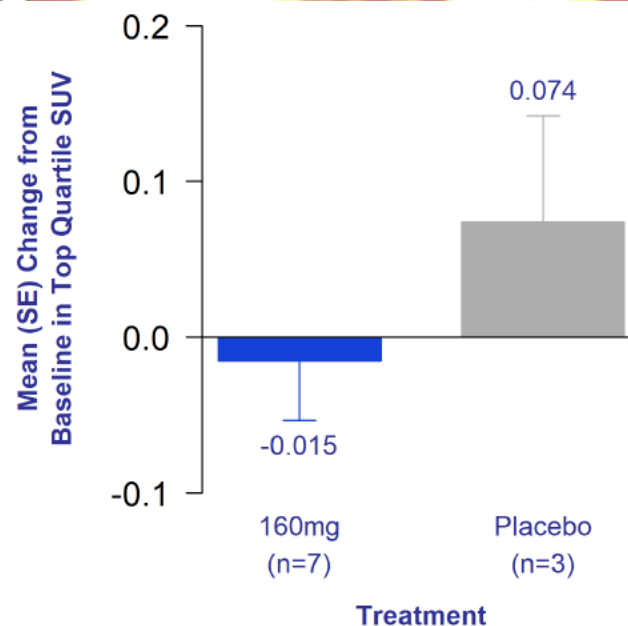
[†]Odds of progression cannot be calculated for ground glass because all participants with ILA had ground glass on computed tomography scan.

[‡]Odds of progression cannot be calculated because all participants with honeycombing had evidence of imaging progression.

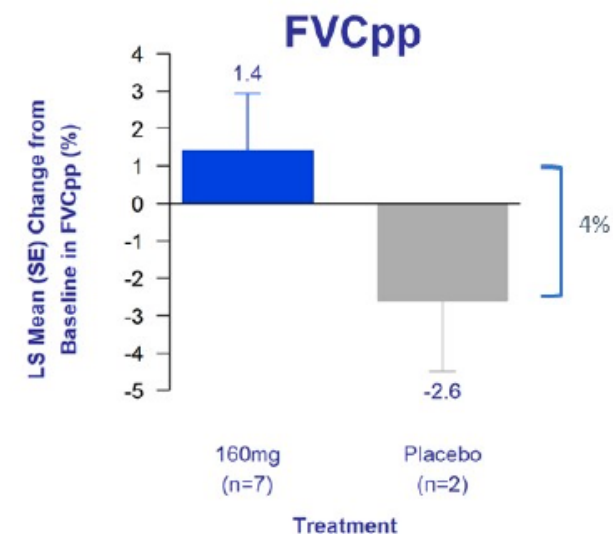
Collagen-Targeted PET



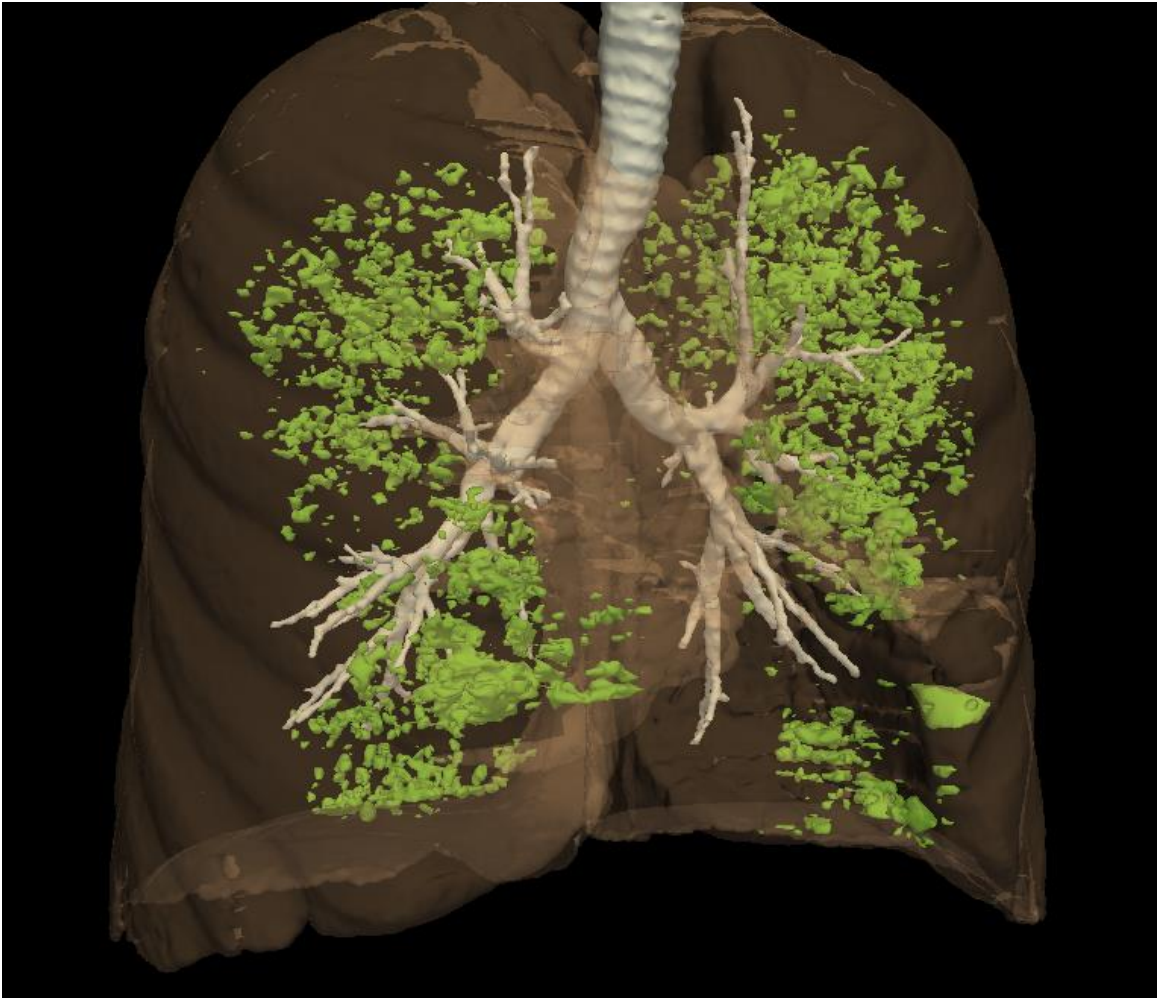
AJRCCM 2019;200(2):28-261.



Mean Change from Baseline in Uptake of Collagen PET Tracer After 12 Weeks

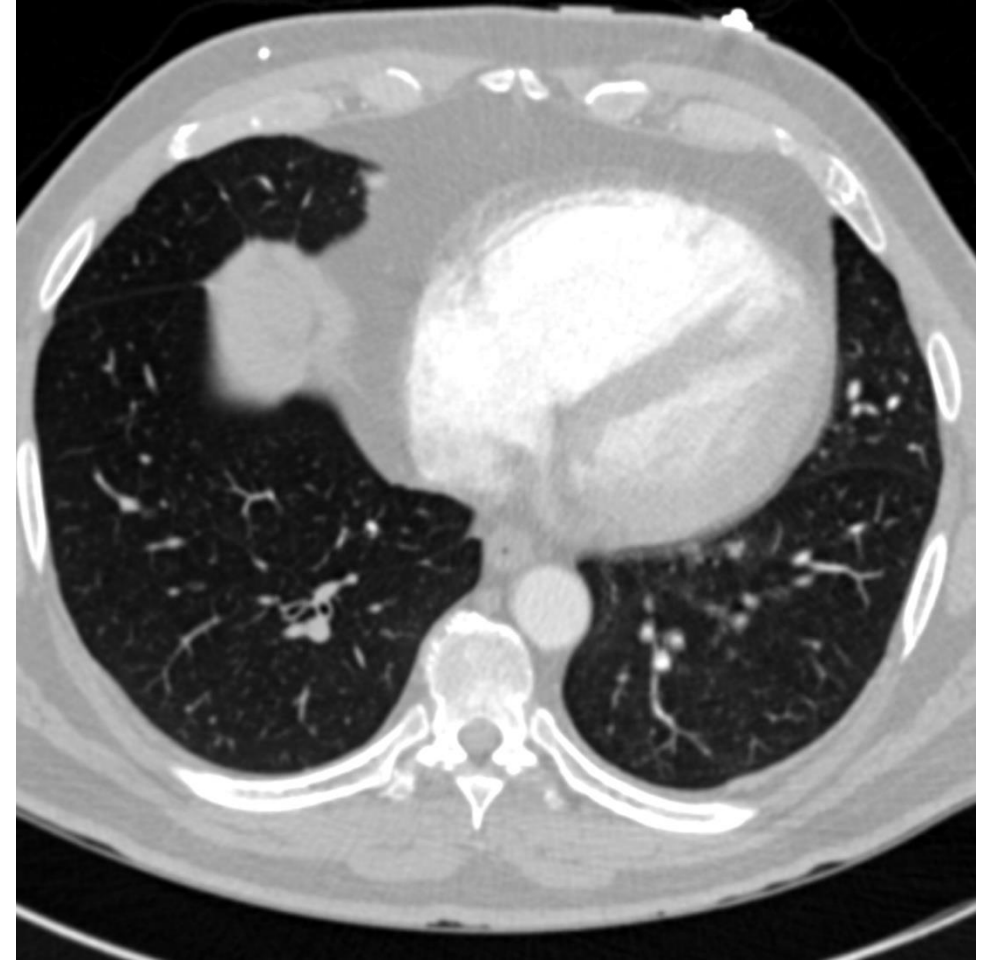
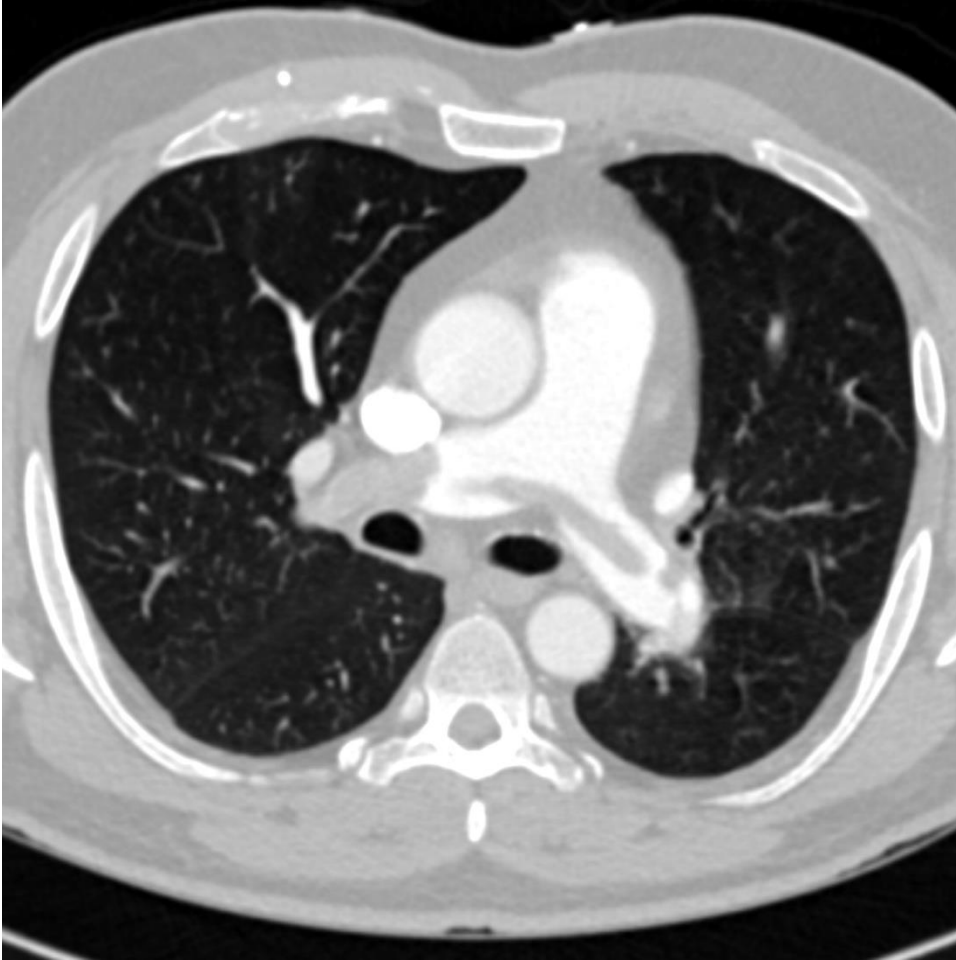


Pliant Press Release, May 2024

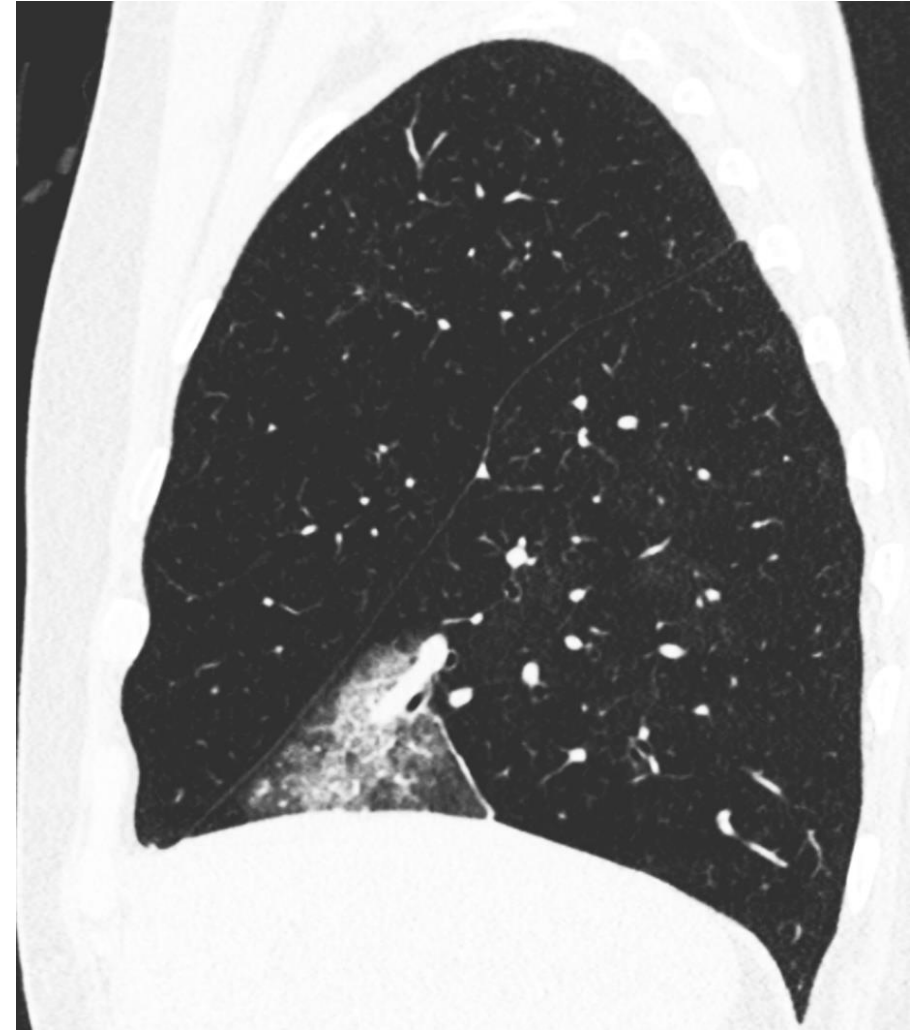
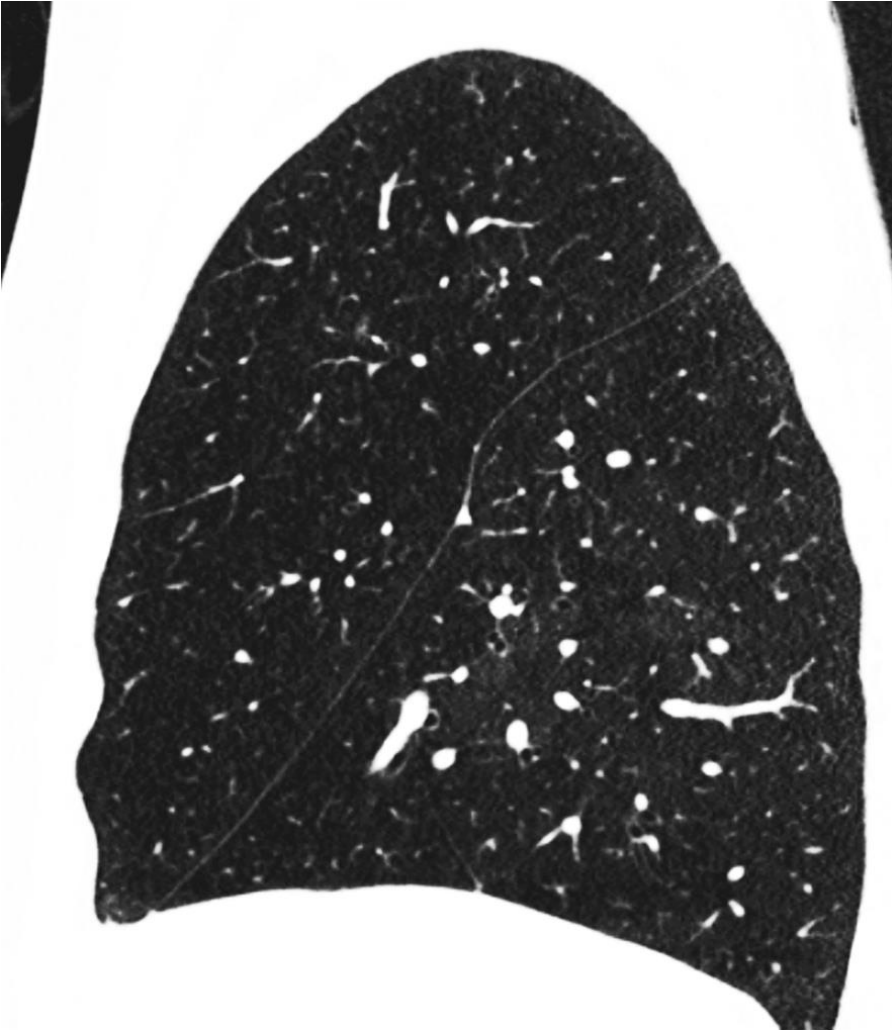


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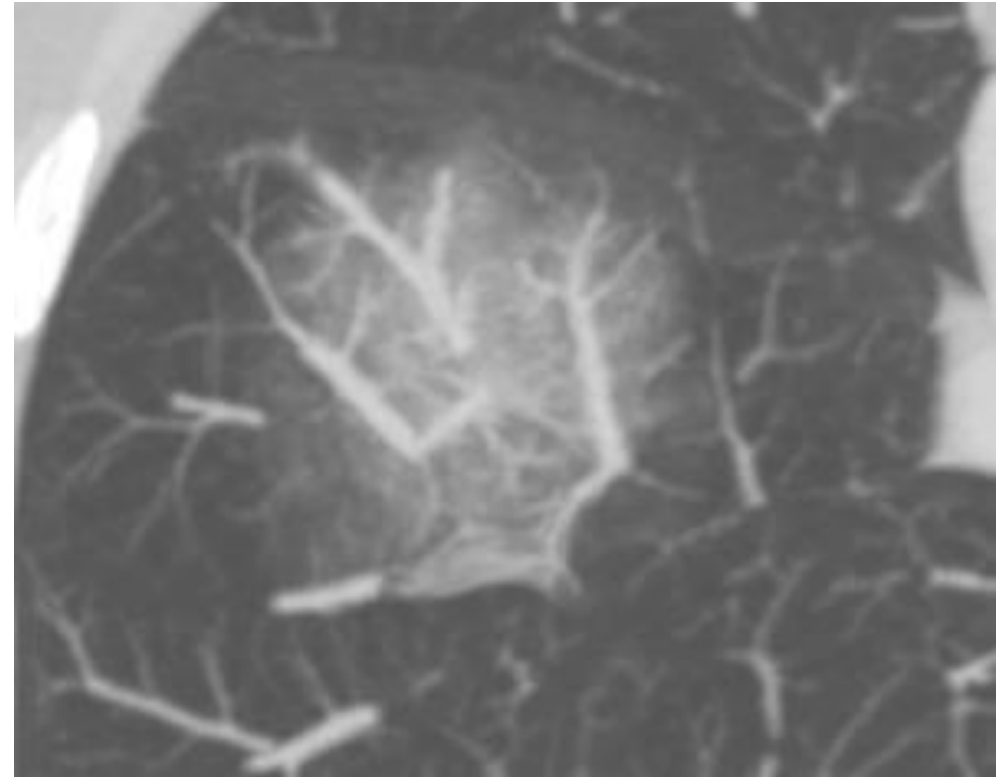
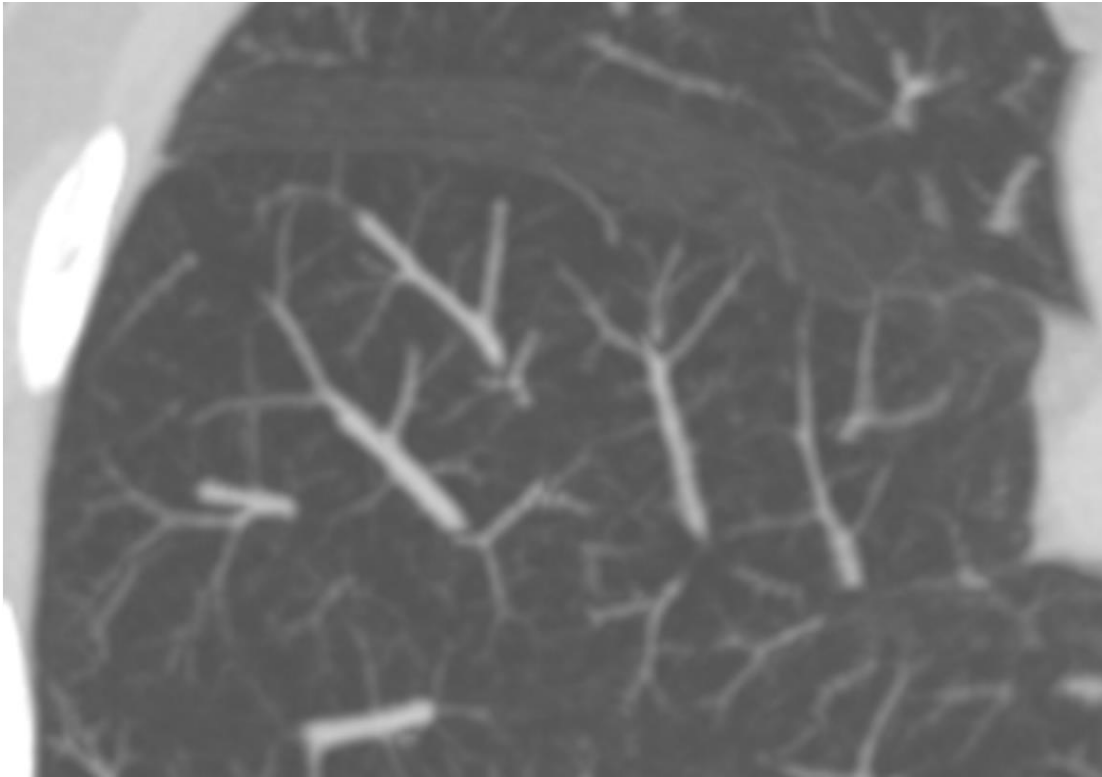
Pulmonary Embolism



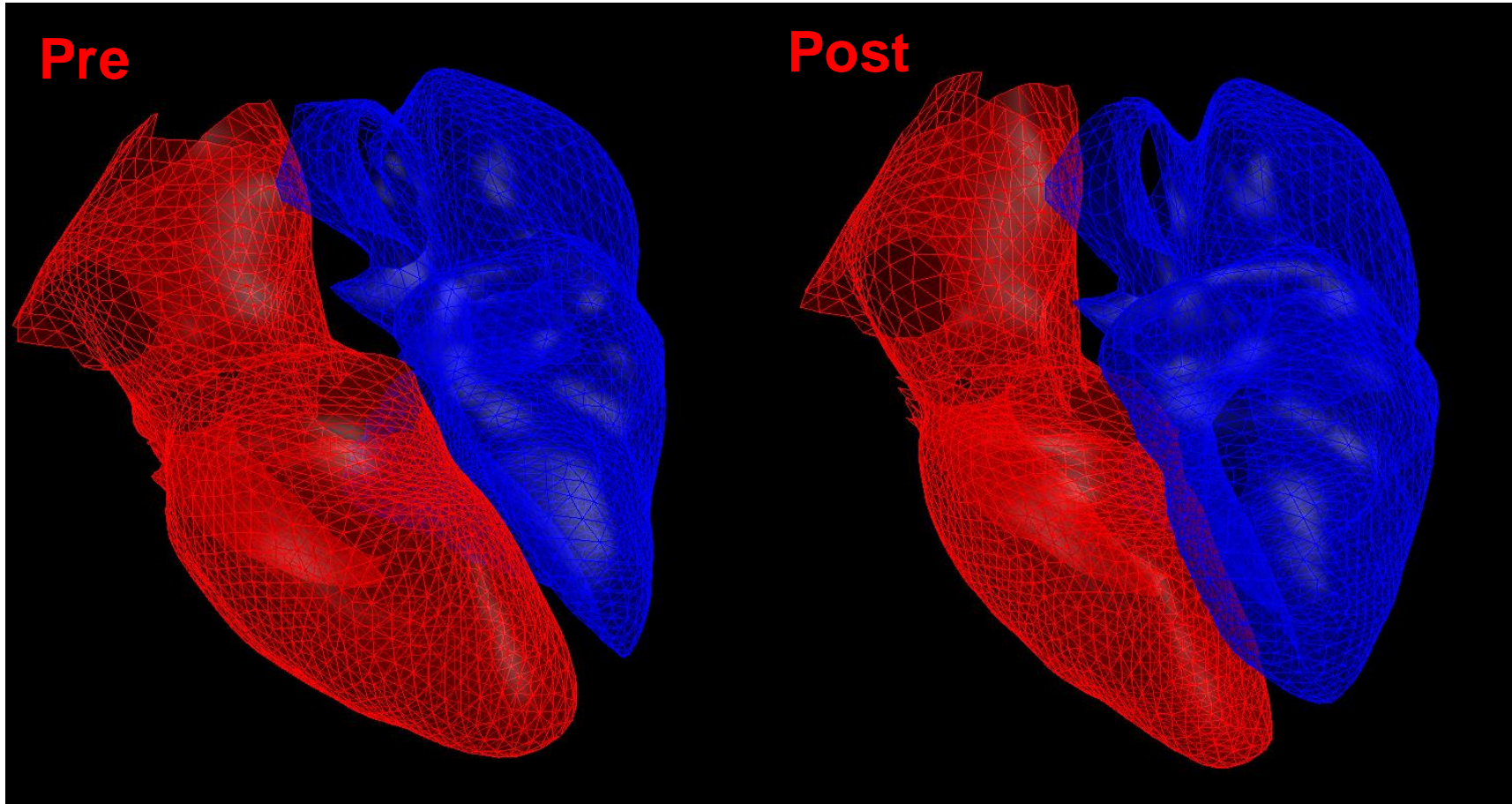
CTEPH – Balloon Therapy



CTEPH – Balloon Therapy



Response to Ultrasound Assisted Catheter Based PE Therapy (EKOS) SEATTLE II

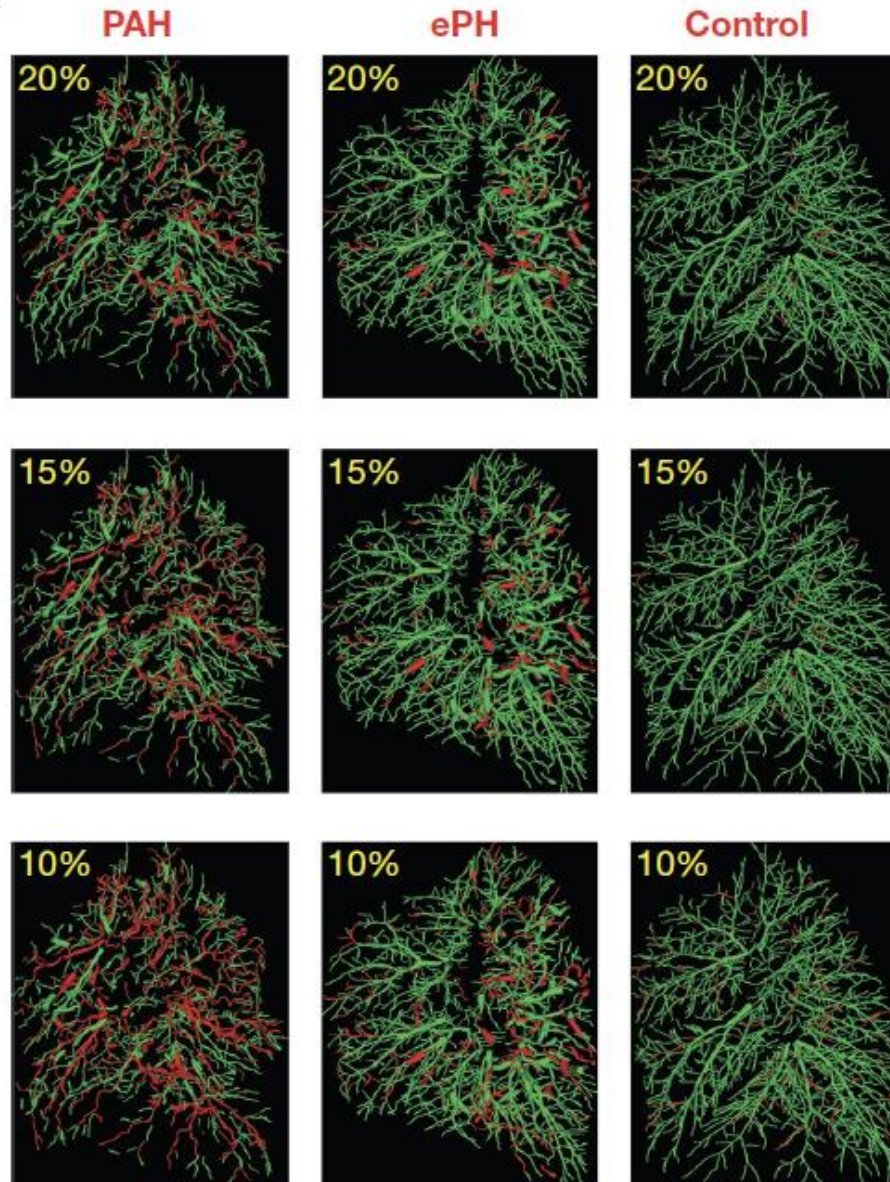


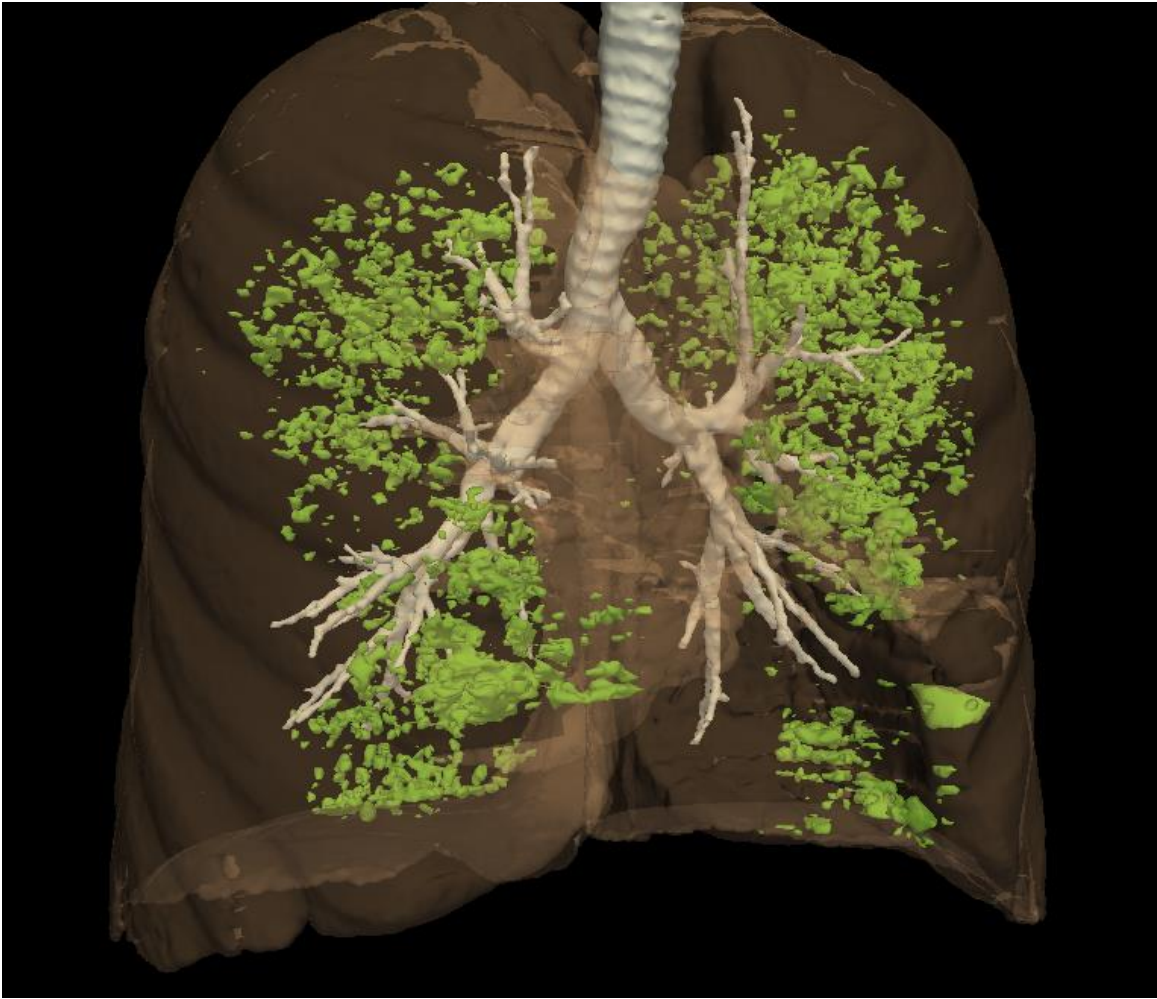
RV: 167ml
LV: 119ml

RV: 134ml
LV: 165ml

At Risk for PAH?

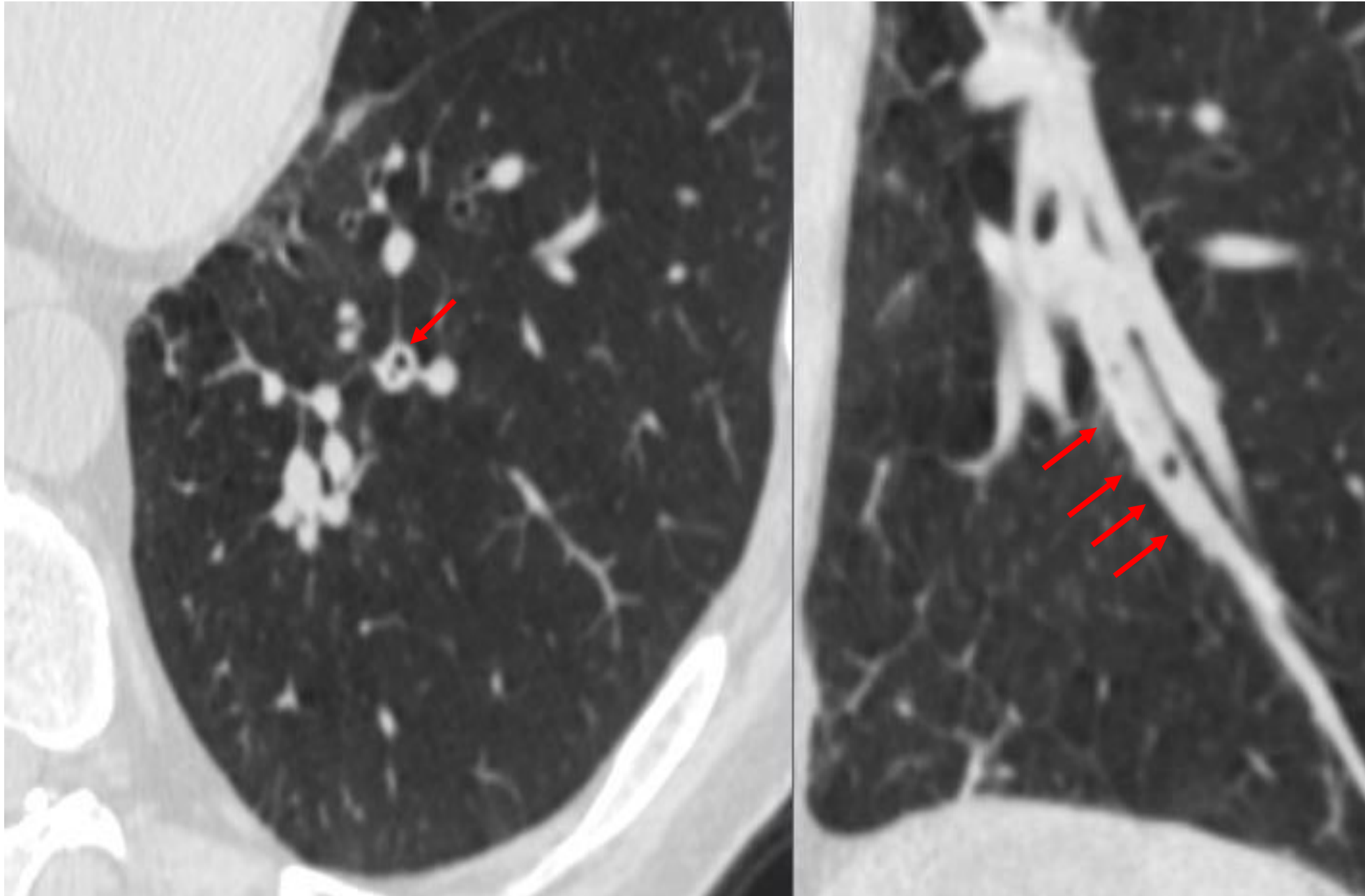
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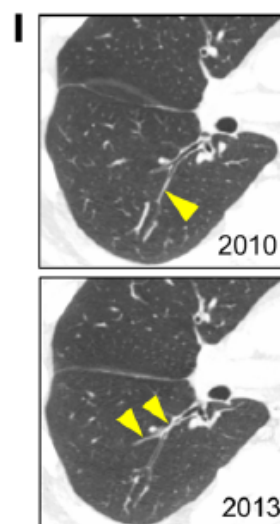
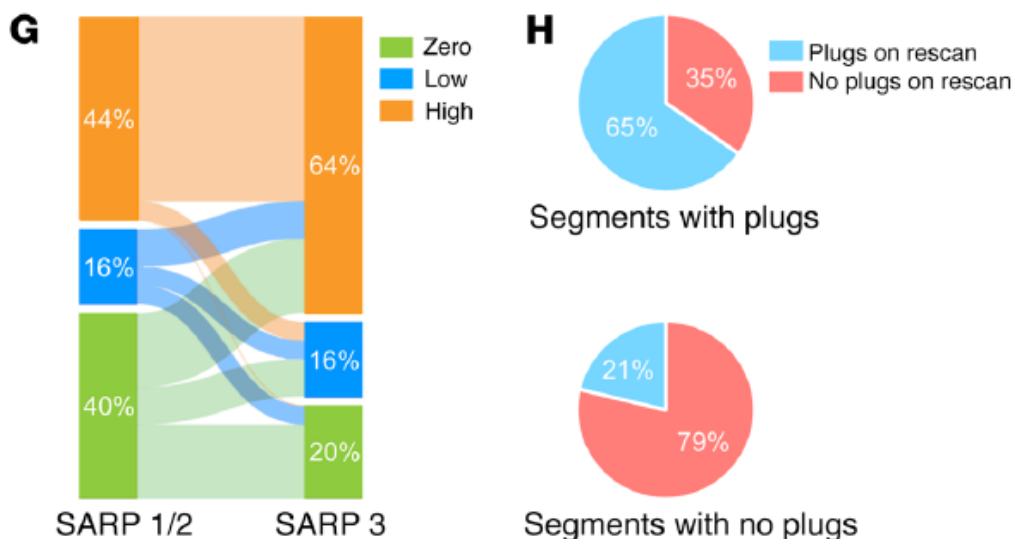
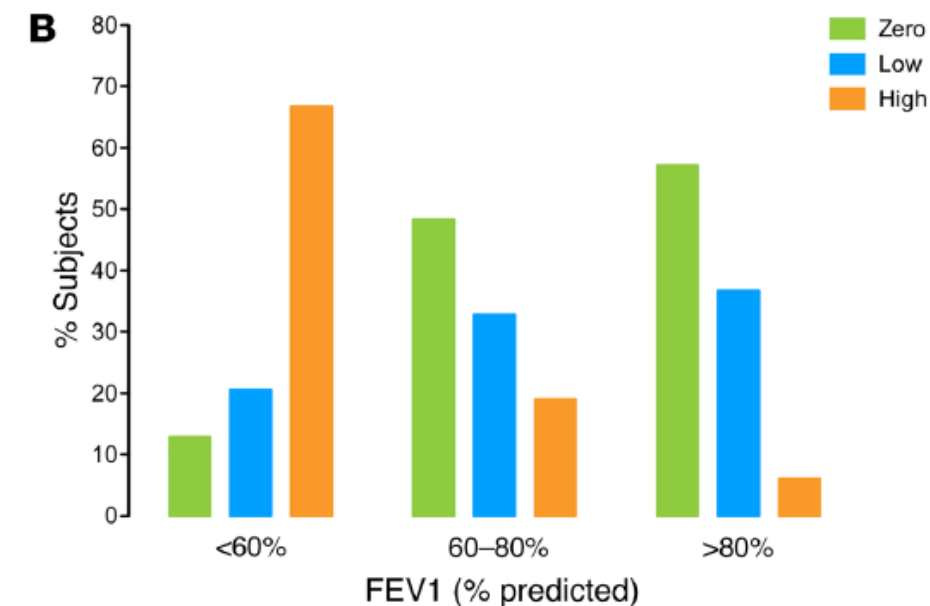
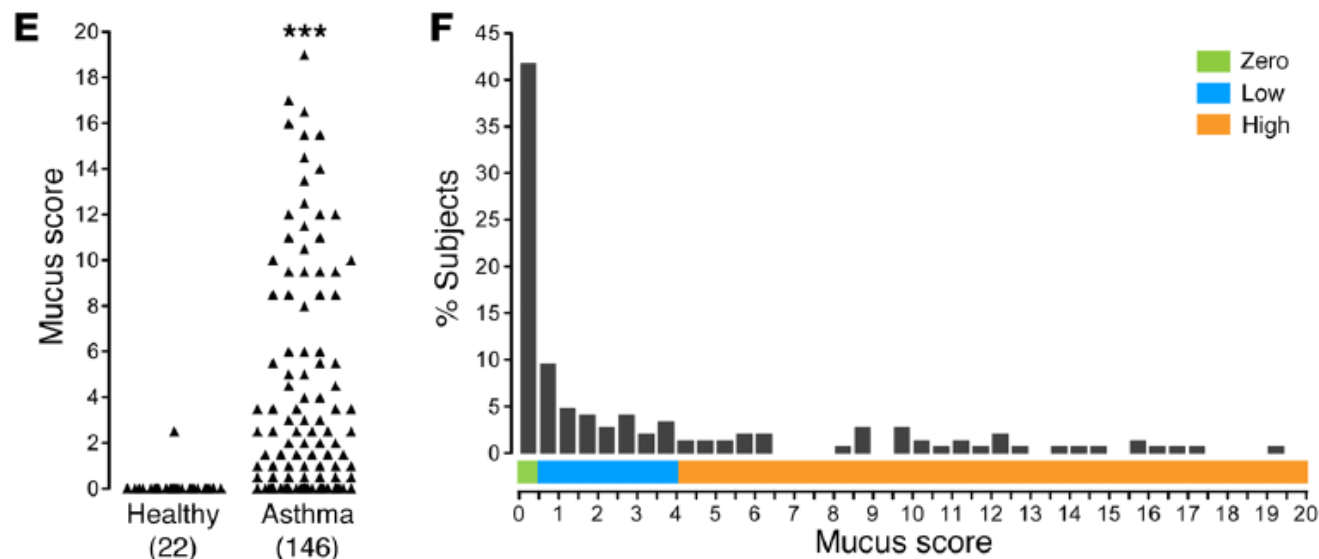


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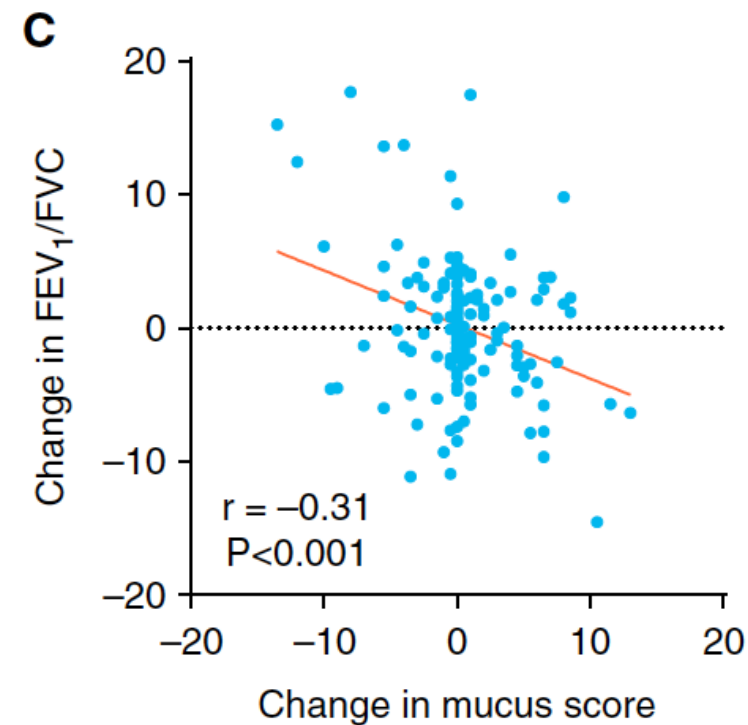
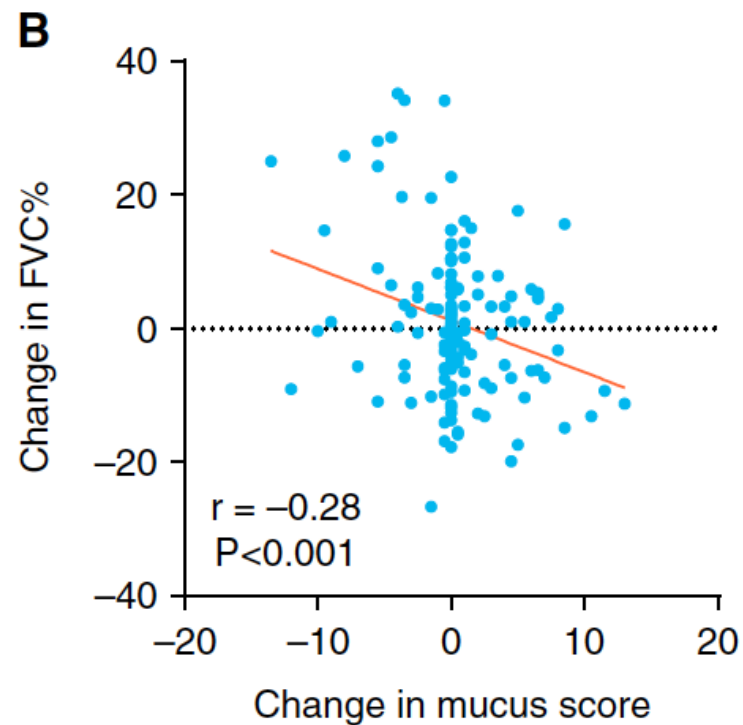
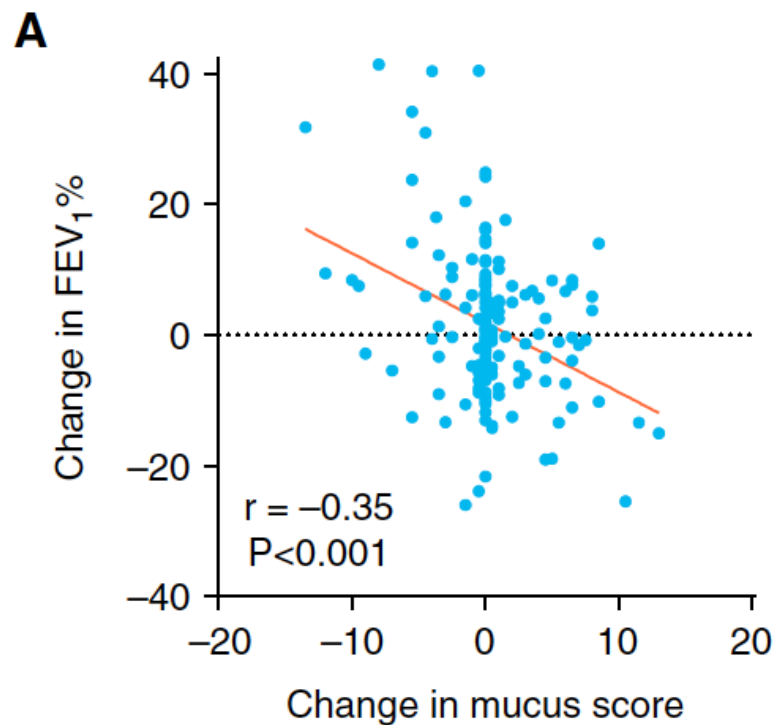
Mucus Dysfunction



Mucus Plugs - Asthma



Mucus Plugs - Asthma

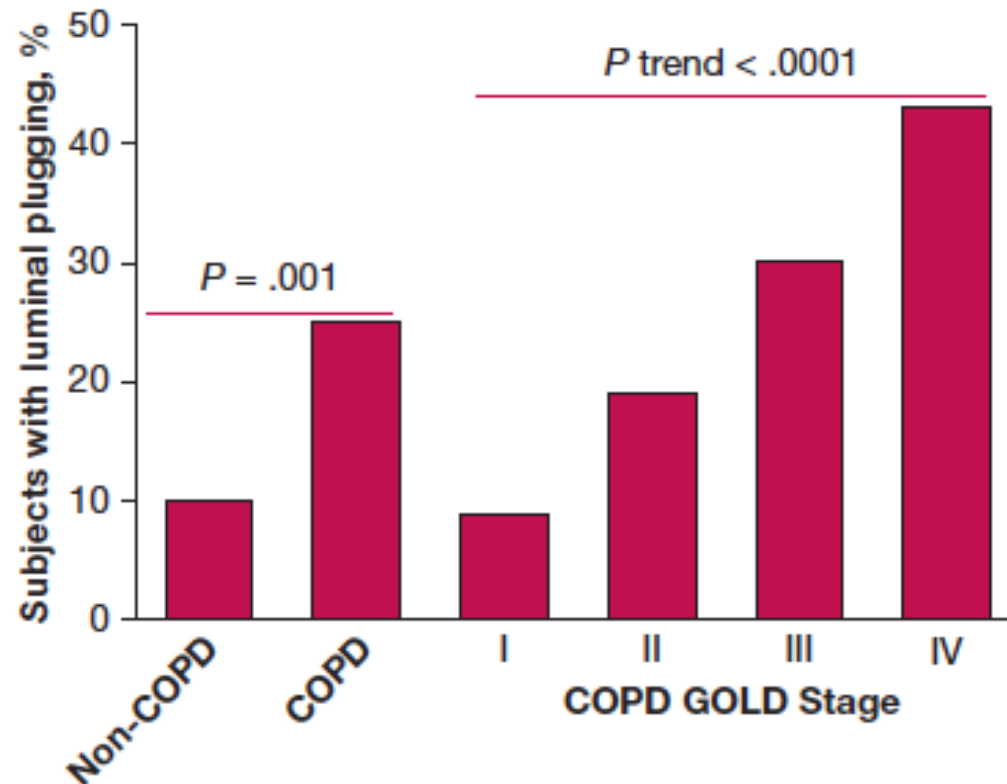


Luminal Plugging on Chest CT Scan

Association With Lung Function, Quality of Life, and COPD Clinical Phenotypes



Yuka Okajima, MD, MPH; Carolyn E. Come, MD, MPH; Pietro Nardelli, PhD; Sushil K. Sonavane, MD; Andrew Yen, MD; Hrudaya P. Nath, MD; Nina Terry, MD; Scott A. Grumley, MD; Asmaa Ahmed, MD; Seth Kligerman, MD; Kathleen Jacobs, MD; David A. Lynch, MD; Barry J. Make, MD; Edwin K. Silverman, MD, PhD; George R. Washko, MD; Raúl San José Estépar, PhD; and Alejandro A. Diaz, MD, MPH



Prevalence of
mucus plugging in COPD
25%-67%

Clinical Impact

↓ FEV1 % pred (-6%)

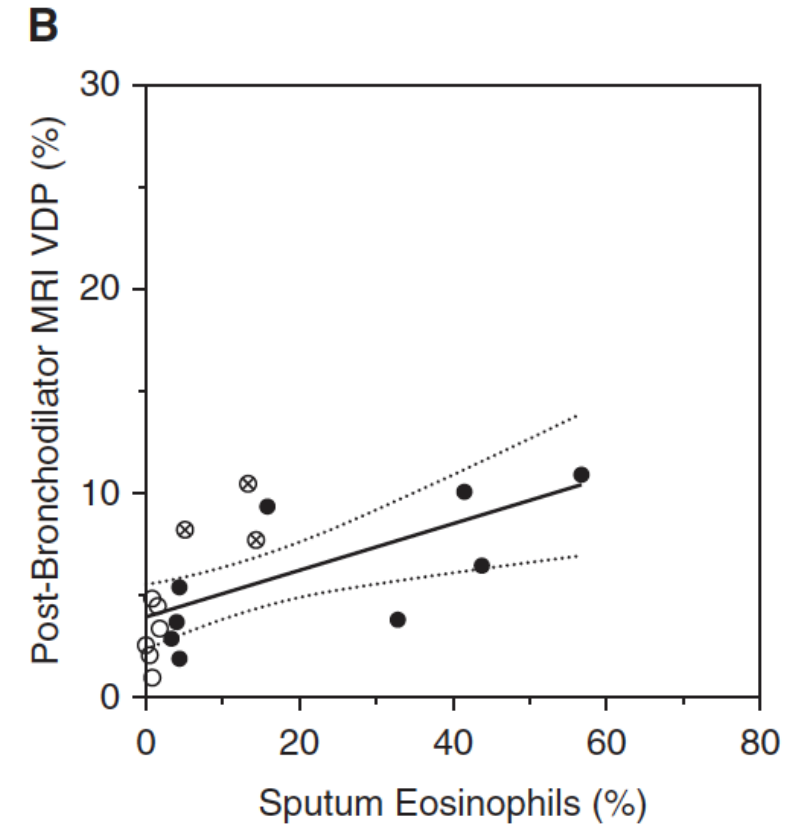
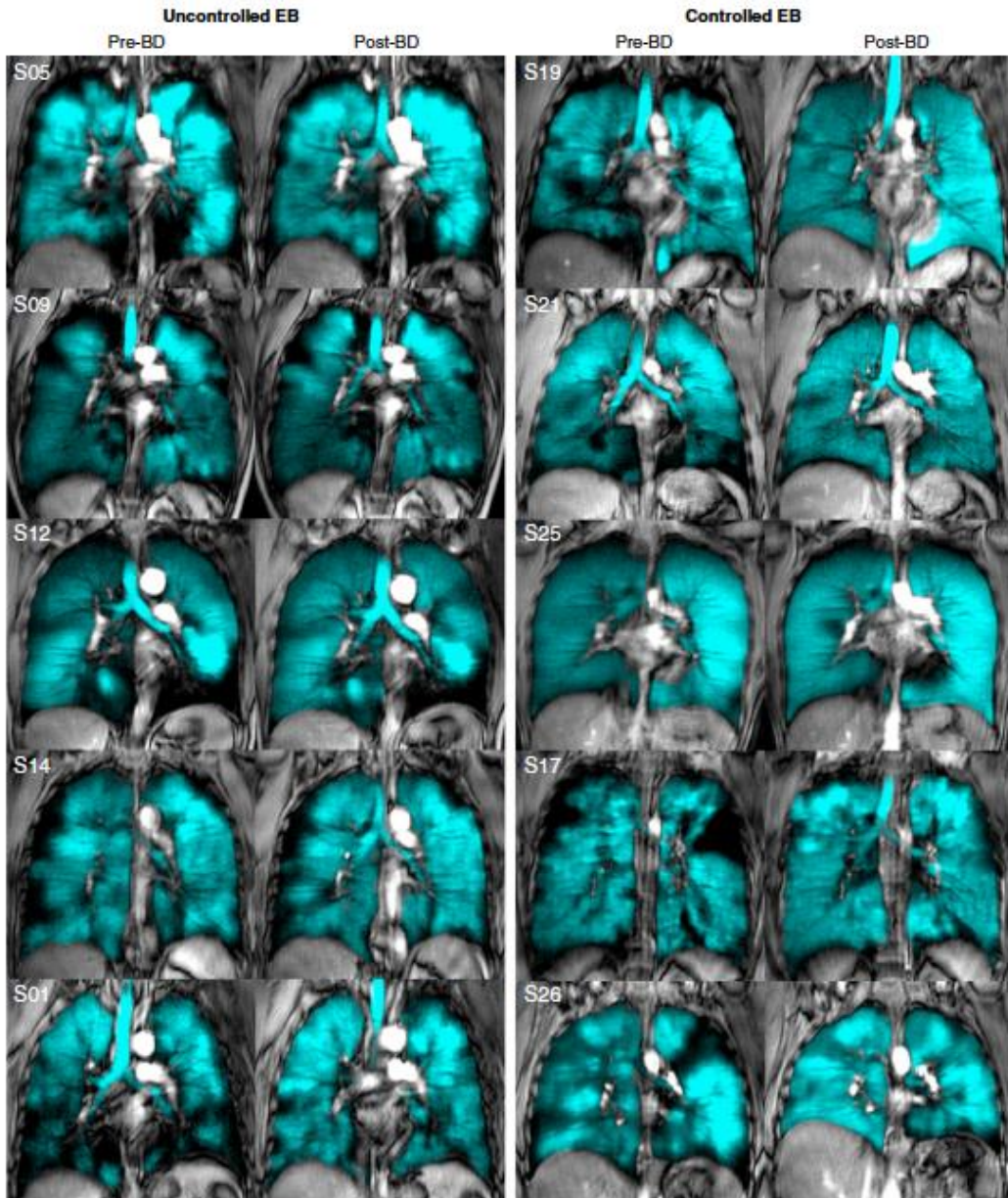
↓ HRQL (-4.9)

↑ Emphysema (OR=2.6)

Persistence of mucus plugs

-67% at 1 year

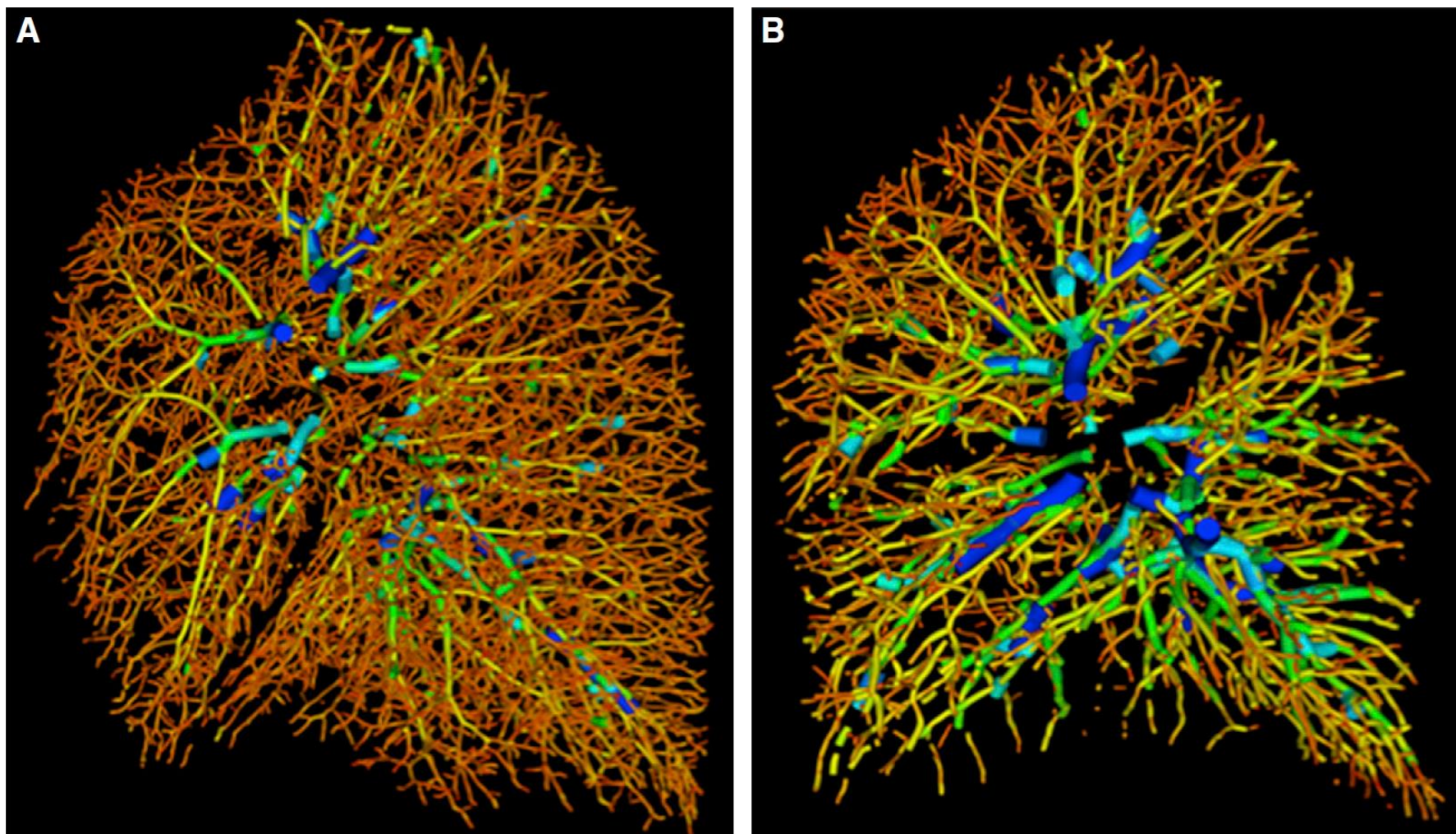
Airway Disease - Asthma



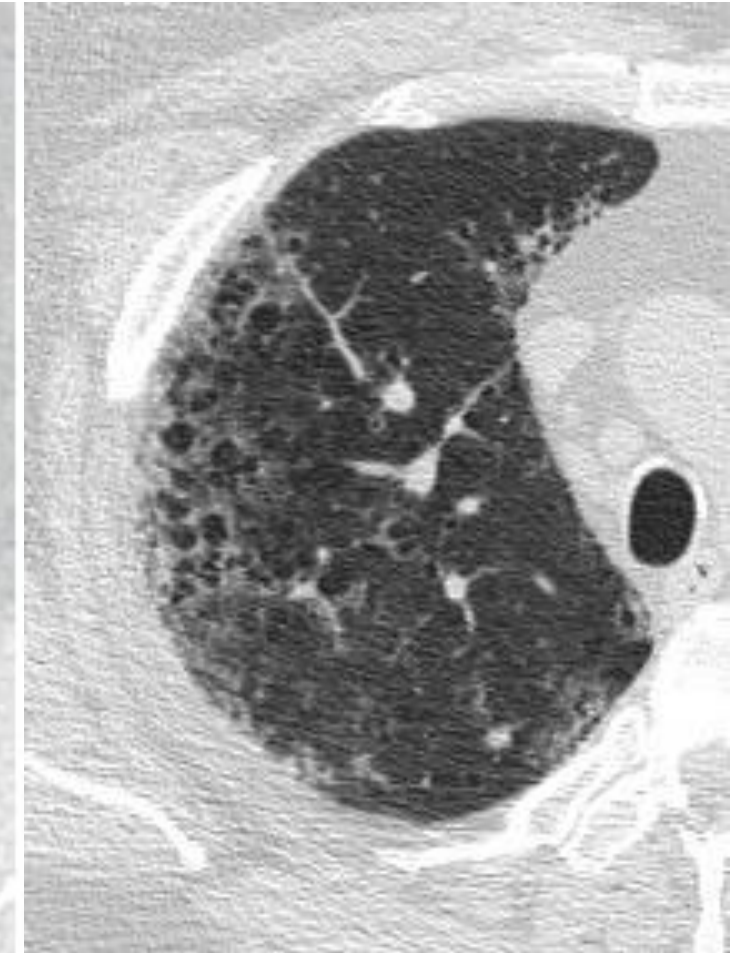
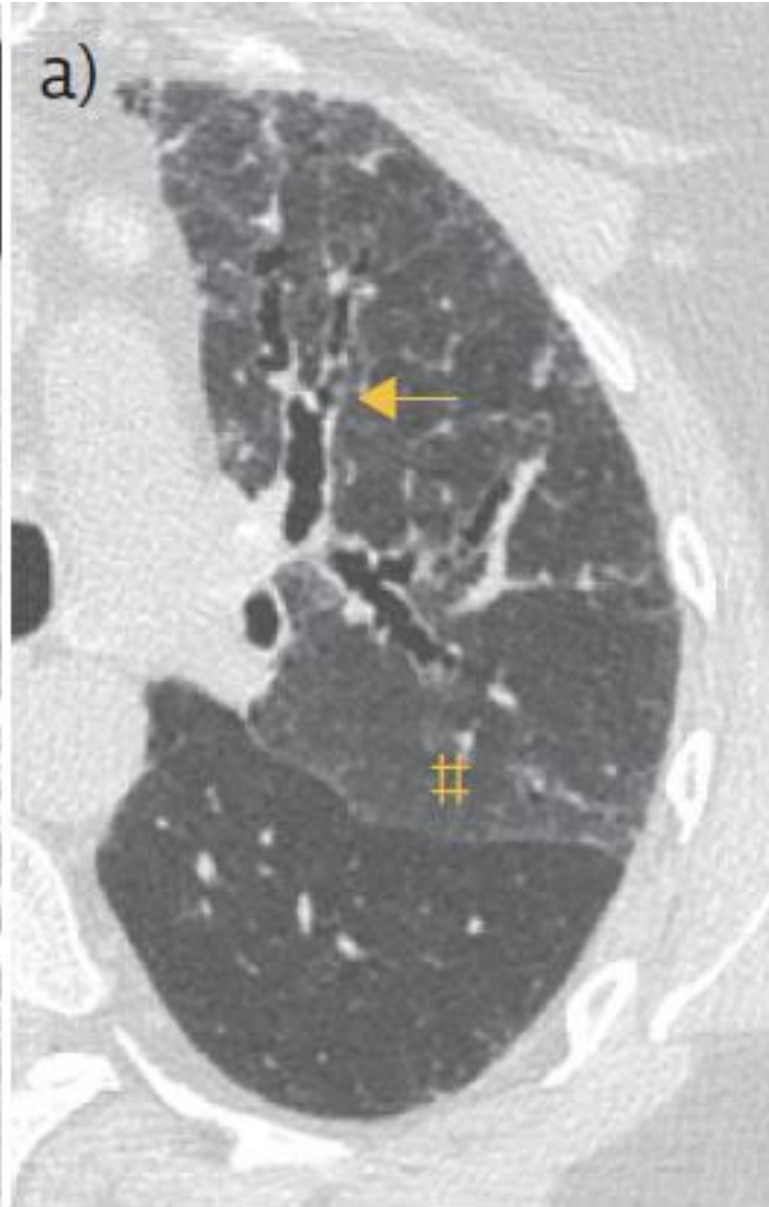
Pruning of the Pulmonary Vasculature in Asthma

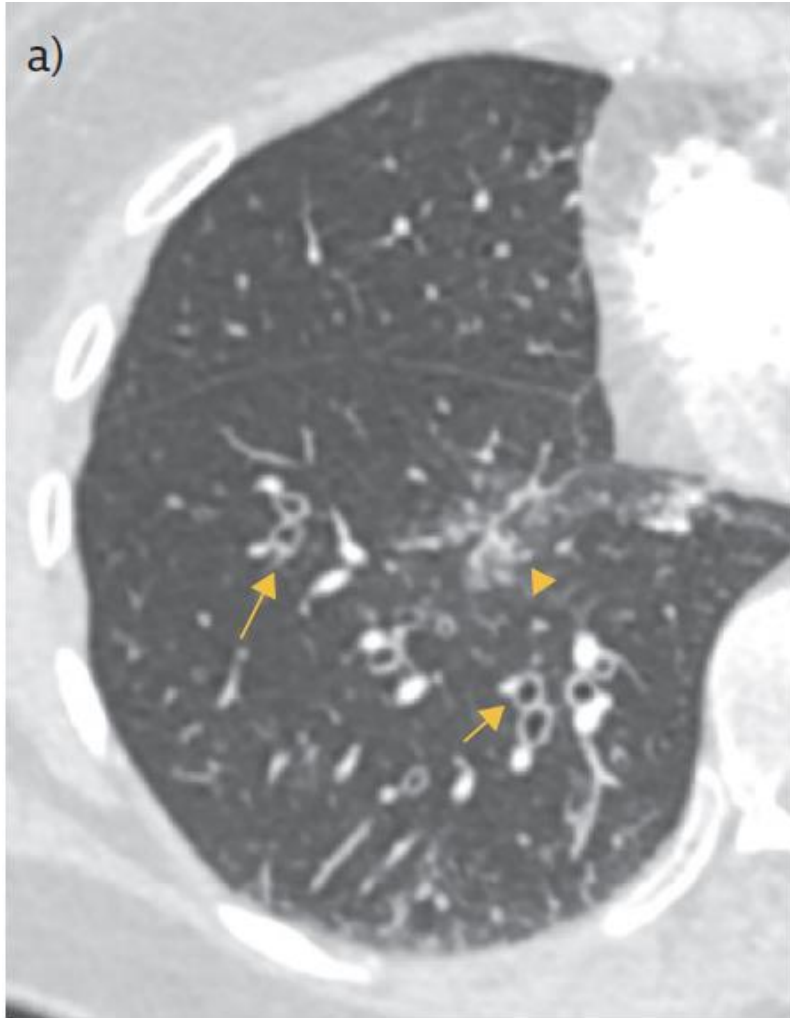
The Severe Asthma Research Program (SARP) Cohort

Samuel Y. Ash^{1,2*}, Farbod N. Rahaghi^{1,2*}, Carolyn E. Come^{1,2}, James C. Ross², Alysha G. Colon³, Juan Carlos Cardet-Guisasola⁴, Eleanor M. Dunican⁵, Eugene R. Bleecker⁶, Mario Castro⁷, John V. Fahy⁸, Sean B. Fain^{9,10,11}, Benjamin M. Gaston^{12,13}, Eric A. Hoffman^{14,15,16}, Nizar N. Jarjour¹⁷, David T. Mauger¹⁸, Sally E. Wenzel¹⁹, Bruce D. Levy¹, Raul San Jose Estepar², Elliot Israel^{1,‡}, and George R. Washko^{1,2‡}; for the SARP Investigators

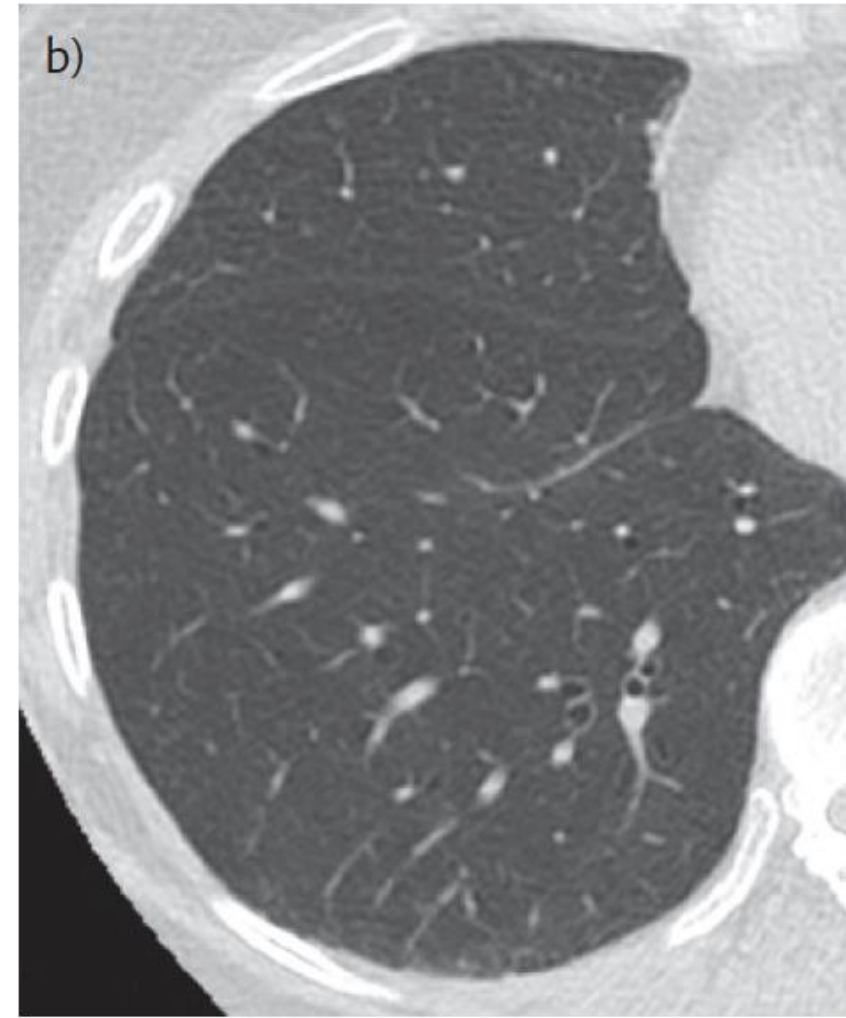
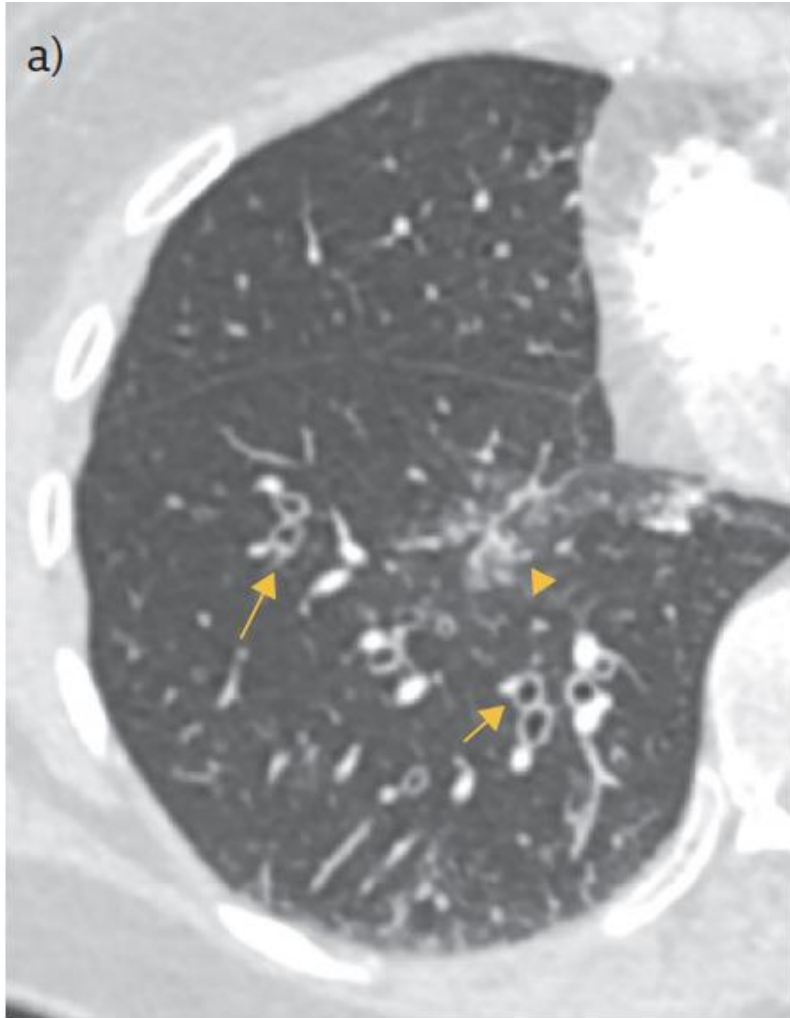


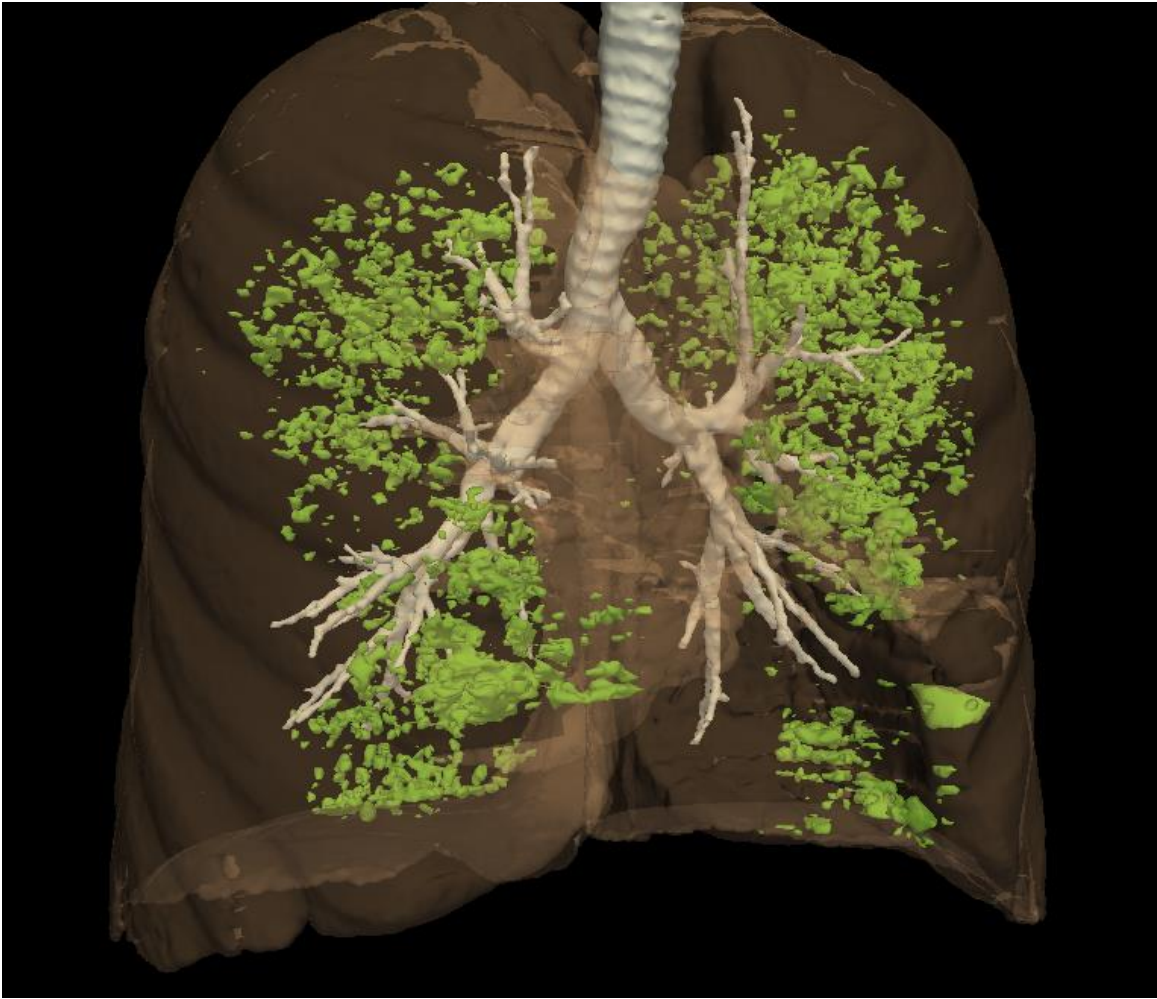
Bronchiectasis



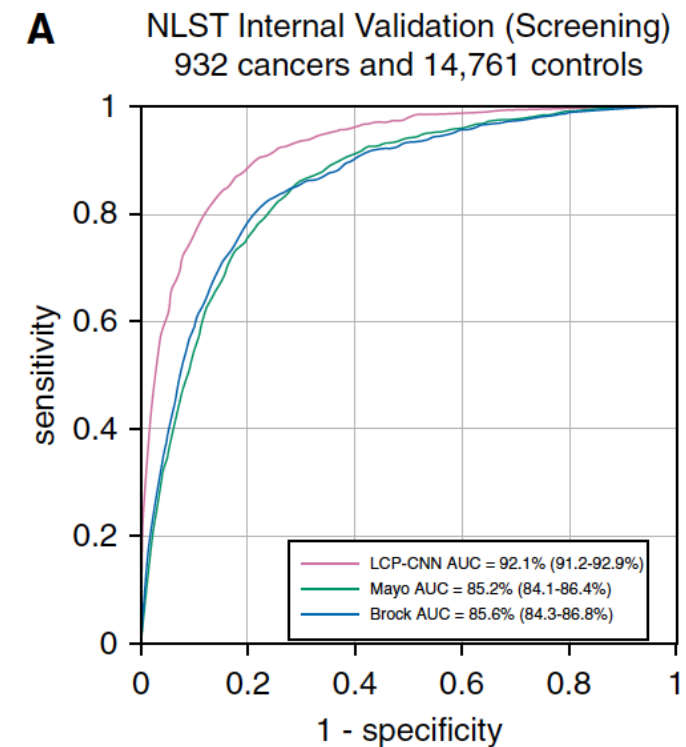
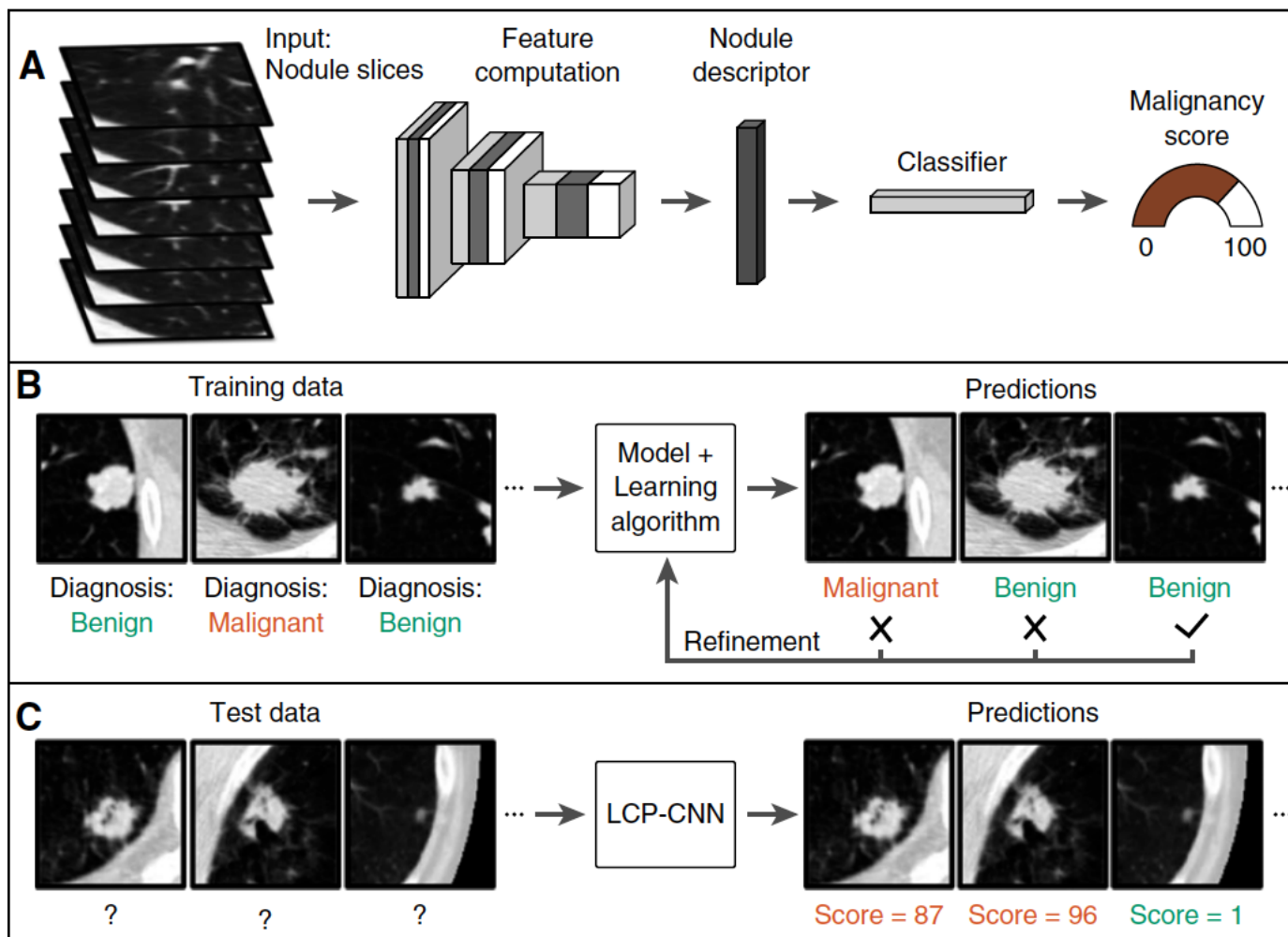


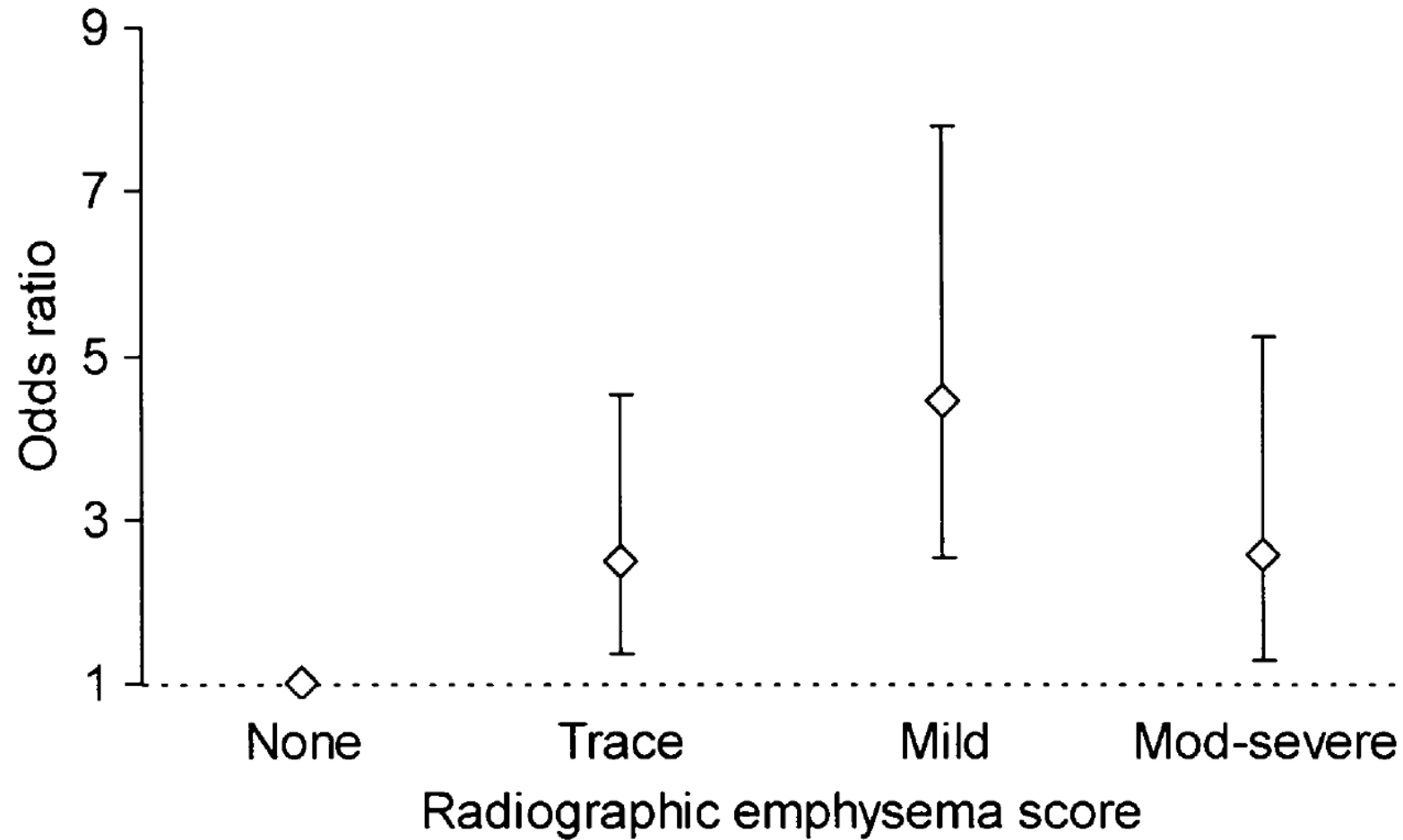
Bronchiectasis

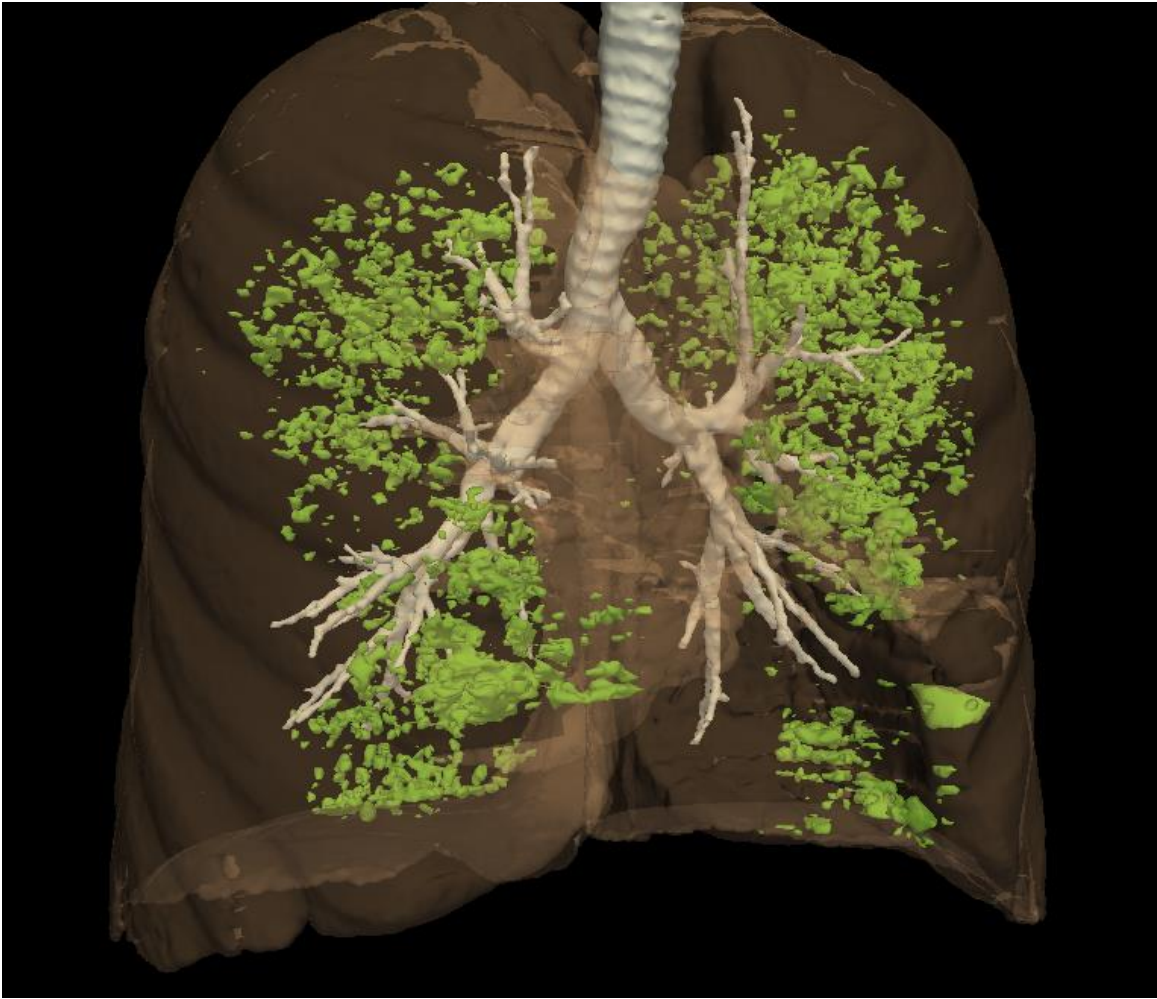




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Bone Mineral Density

N=3321 current and ex-smokers in
COPDGene

Low volumetric bone mineral
density (vBMD)

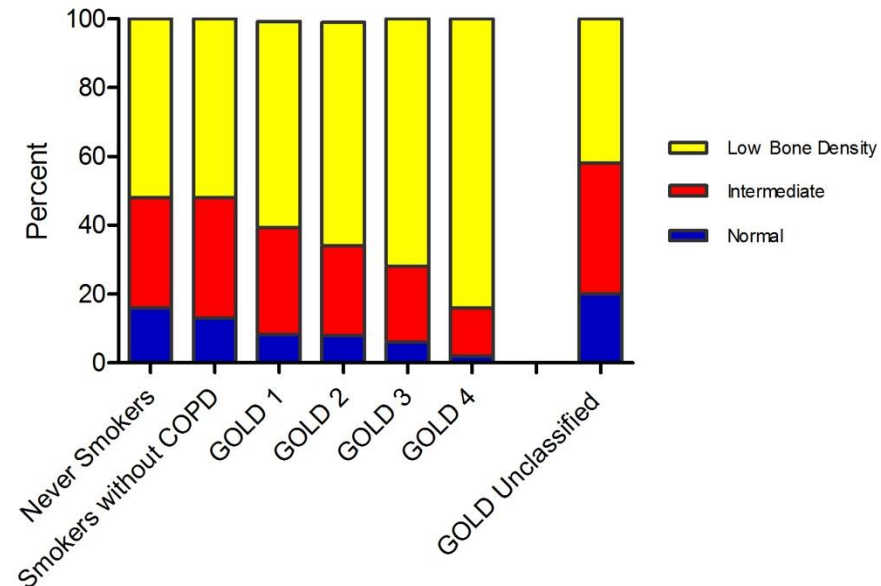
58% of all subjects

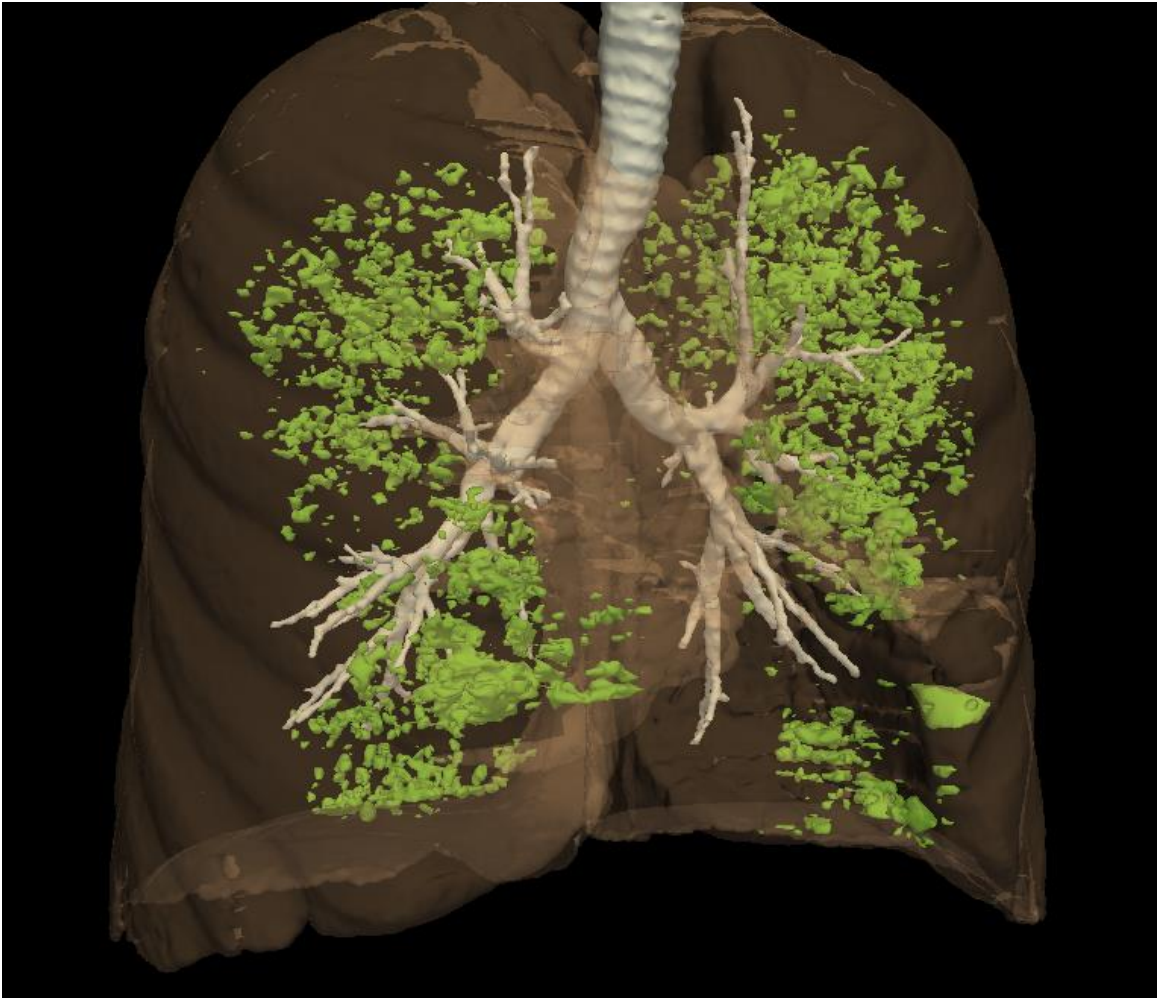
84% of subjects with very
severe COPD

Males had greater risk of low
vBMD (-2.5 SD below young
adult mean by QCT)

Males with more vertebral
fractures

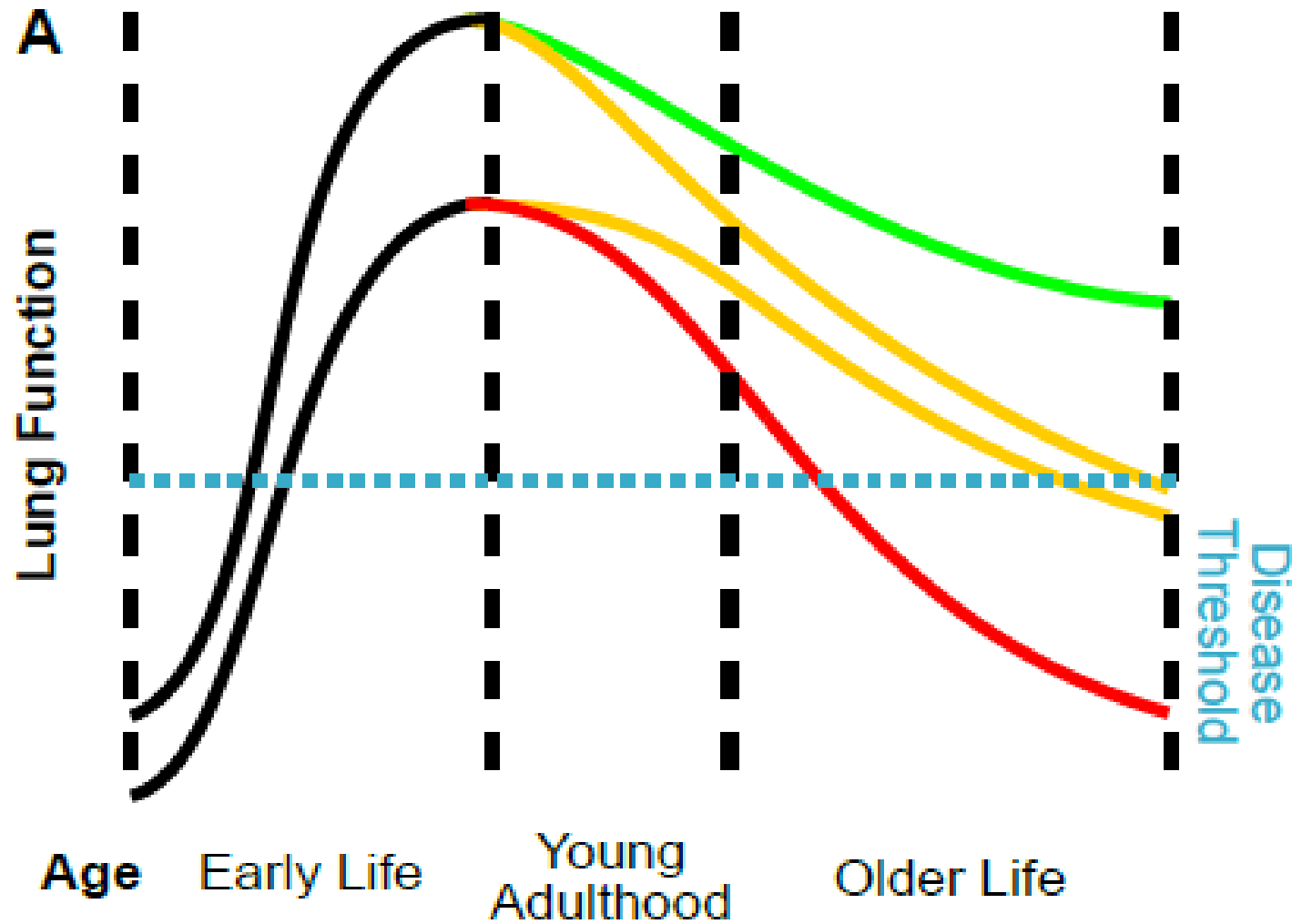
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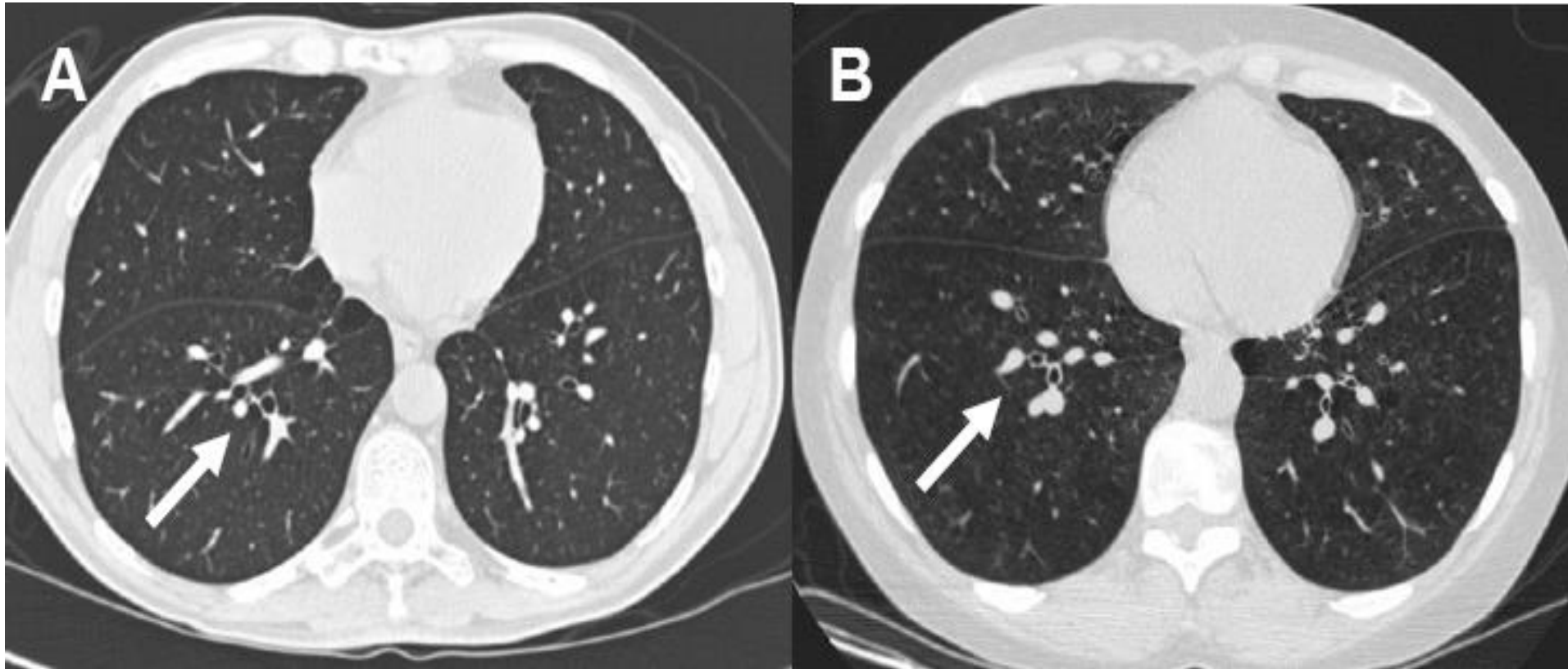


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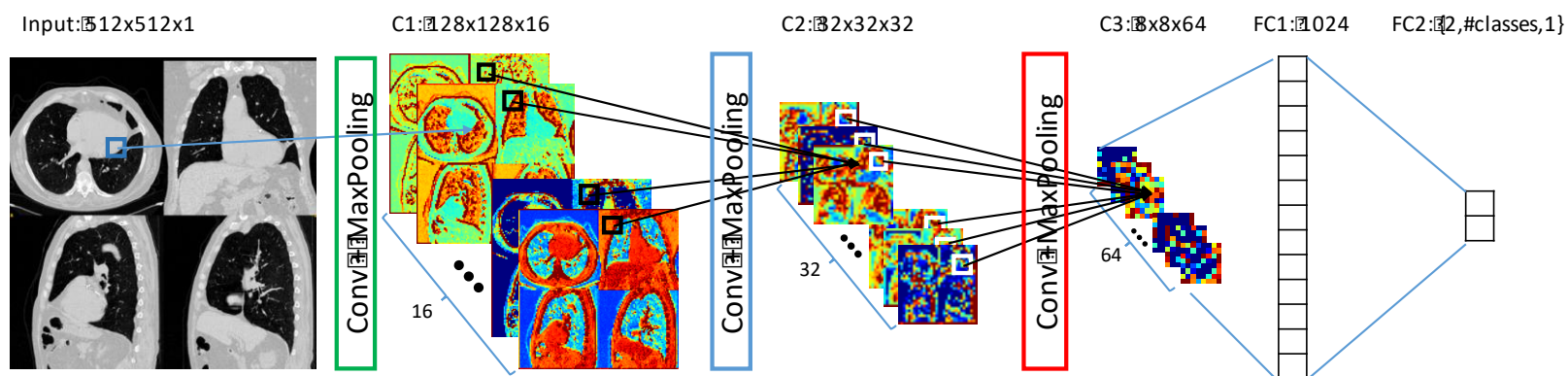
Trajectories of Lung Function



Innate Lung Structure?



“Featureless” Image Analysis





Thank you!