

# Plausibility of Using [<sup>18</sup>F]NOS as a PET Radiotracer for Imaging Smoking-Induced Inflammation in the Aorta

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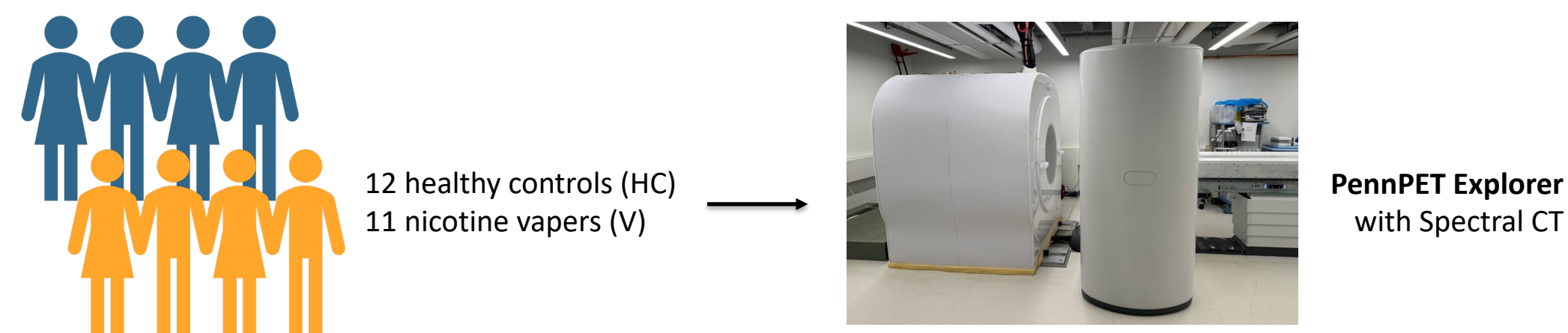


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## Introduction

- Smoking: strongest risk factor for the development of Aortic Abdominal Aneurysms (AAAs).
- Atherosclerosis: inflammatory vascular disease, known precursor of AAAs. Also correlated with smoking.
- Electronic Nicotine Delivery Systems (ENDS): may generate **similar** adverse effects to those caused by combustible cigarettes (American Heart Association, 2022)
- Inducible Nitric Oxide Synthase (iNOS): plays a key role in mediating the body's inflammatory response, increased iNOS expression is associated with inflammatory disease
- [<sup>18</sup>F]NOS: iNOS analog, may be well suited for imaging vascular inflammation.

## Methodology

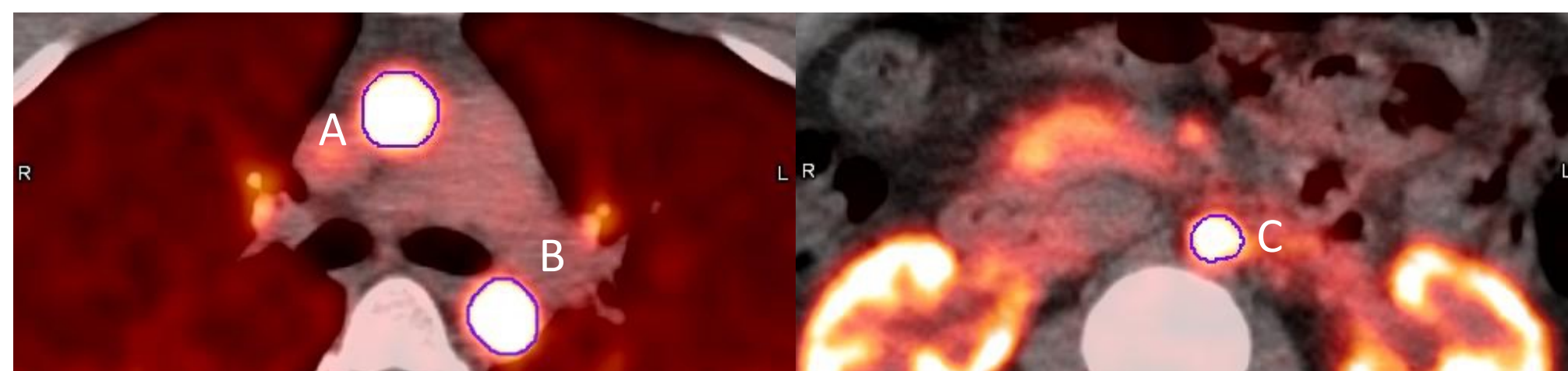


**Figure 1.** 23 subjects were initially included in the study; they underwent an (approximately) one-hour, dynamic PET scan.

- 3 HCs and 2 Vs excluded due to irregularities in the blood corrections.

### Volumes of Interest (VOIs):

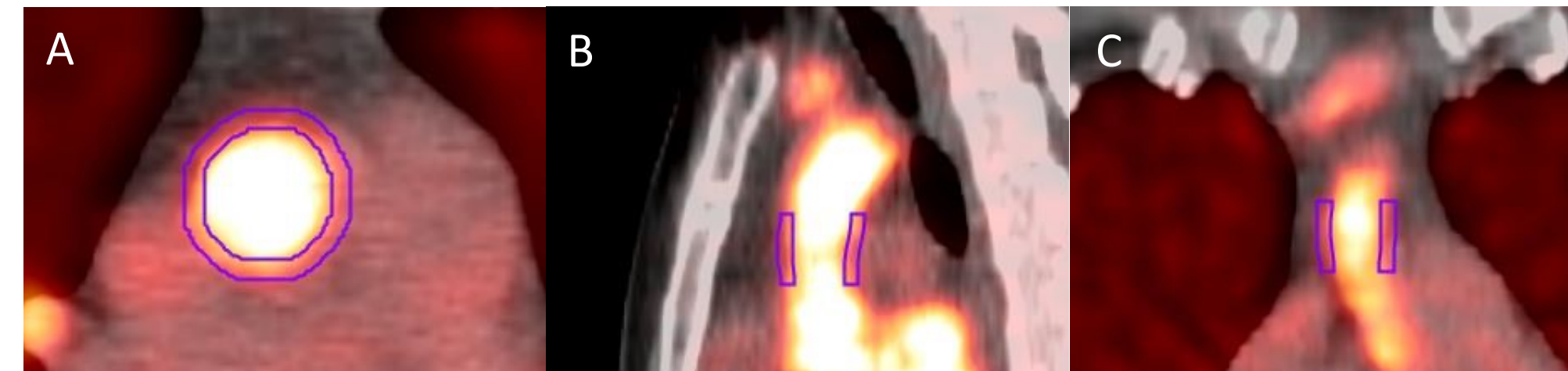
- Vessel walls of the Ascending Aorta (Asc. Aorta) and the Descending Aorta (Desc. Aorta) were segmented at the level of the carina.
- Vessel wall of the Abdominal Aorta (AA) was segmented between L1 and L3.



**Figure 2.** Sample segmentation of VOIs for IDIFs. A: ascending aorta. B: descending aorta. C: abdominal aorta.

The vessel walls were segmented on MIM; the difference between the inner and outer diameter was set between 2.0 mm and 3.0 mm in accordance with the normal width of the aortic wall.

## Methodology



**Figure 3.** Sample segmentation of the vessel wall in the ascending aorta. A: axial view. B: sagittal view. C: coronal view.

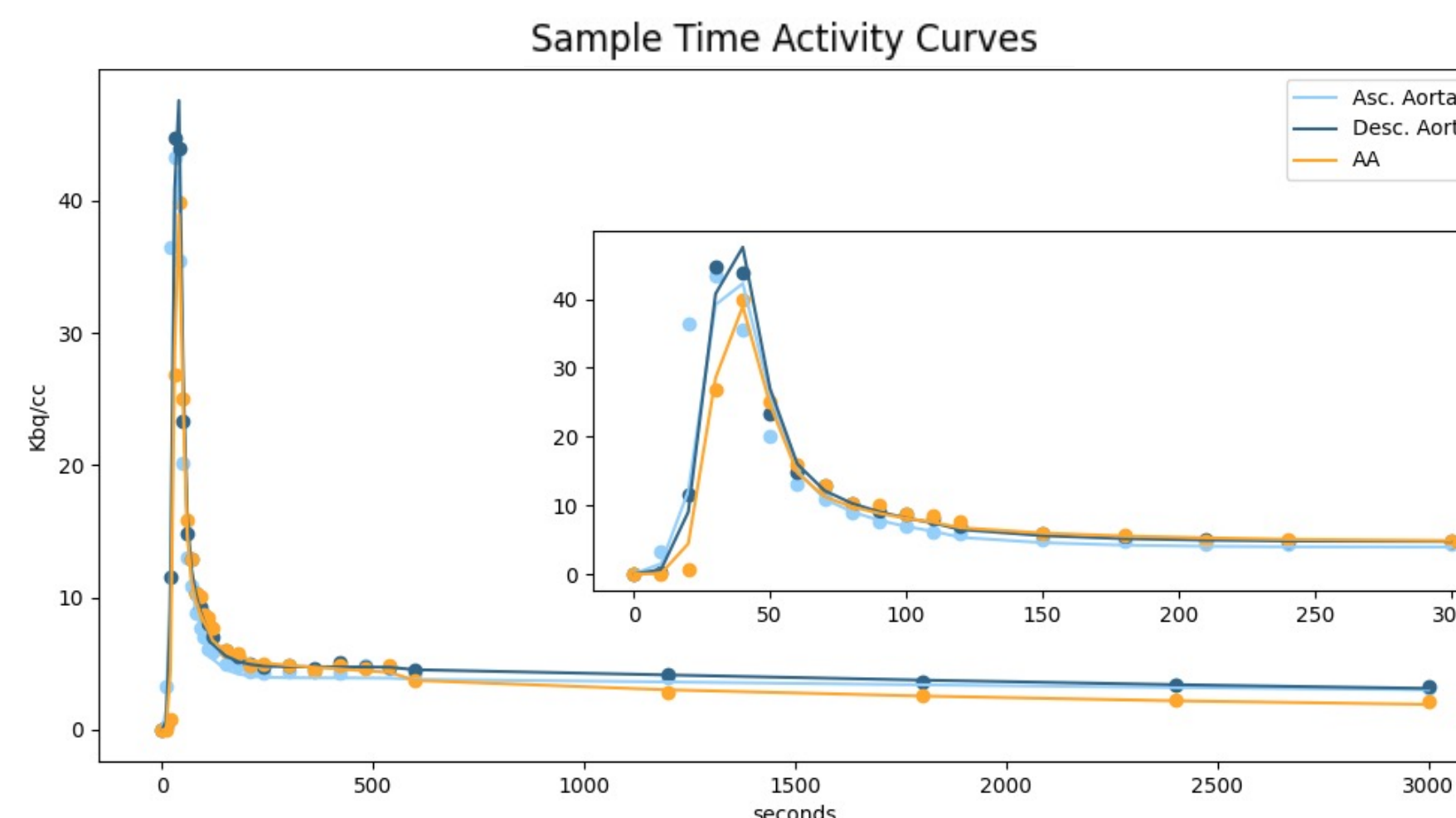
### Kinetic Modeling:

- One-Tissue Compartment (1TC) and Two-Tissue Compartment (2TC) models as well as a Logan Plots were fit on PMOD.
- Image Derived Input Functions (IDIFs) were used for the kinetic modeling.

### Metrics:

- Volume of Distribution ( $V_T$ ), 2TC Binding Potential ( $BP_{nd}$ ), Area Under the Curve (AUC)
- Akaike Information Criterion (AIC) for model selection.
- P-values were computed using a Mann-Whitney U Test ( $\alpha = 0.05$ )

## Results



**Figure 4.** Sample TACs after kinetic modeling. Curves shown for Asc. and Desc. Aorta are 1TC models; curve shown for AA is a 2TC model. Inset shows first 300 seconds of TACs.

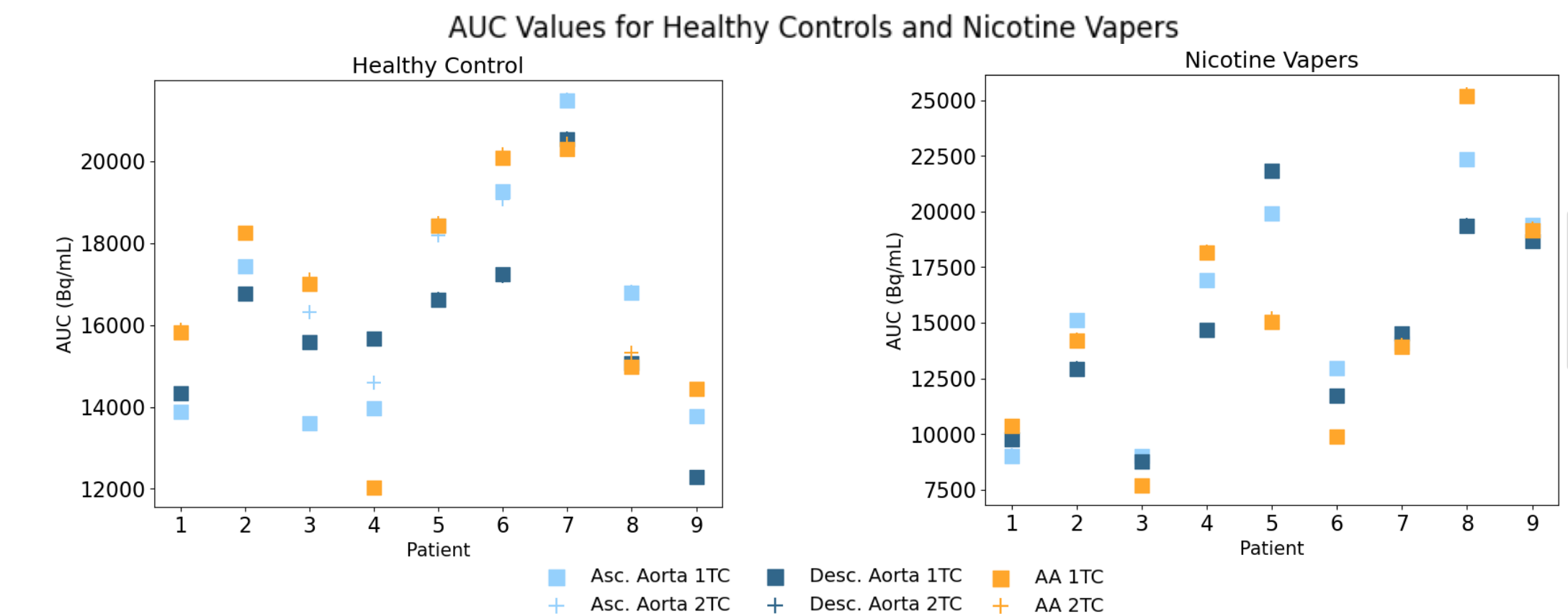
	Asc. Aorta		Desc. Aorta		AA	
	HC	V	HC	V	HC	V
1TC	1.41 ± 0.51	1.38 ± 0.58	0.96 ± 0.23	1.08 ± 0.49	1.91 ± 0.47	1.70 ± 0.97
2TC	3.16 ± 4.33	1.76 ± 0.85	1.48 ± 0.35	1.64 ± 0.67	3.08 ± 0.63	2.70 ± 0.97
Logan Plot	2.42 ± 0.29	2.35 ± 0.44	2.26 ± 0.23	2.28 ± 0.55	2.53 ± 0.40	2.41 ± 0.62

**Table 1.** Mean ± SD  $V_T$  values for 1TC, 2TC and Logan Plot.

	Healthy Control			Nicotine Vaper		
	1TC	2TC	Logan Plot	1TC	2TC	Logan Plot
Asc. Aorta vs. Desc. Aorta	0.022*	0.724	0.185	0.112	1.000	0.791
Asc. Aorta vs. AA	0.078	0.022*	0.427	0.158	0.034*	0.930
Desc. Aorta vs. AA	0.001**	0.001**	0.042*	0.034*	0.027*	0.659

**Table 2.** p-values from Mann-Whitney U Test of  $V_T$  across regions of interest; \* =  $p < 0.05$ , \*\* =  $p < 0.01$ .

## Results



**Figure 5.** AUC for control and experimental groups. Squares and plus signs are 1TC and 2TC models, respectively.

Asc. Aorta		
HC*	V	p
1.32 ± 1.74	2.05 ± 2.88	0.93

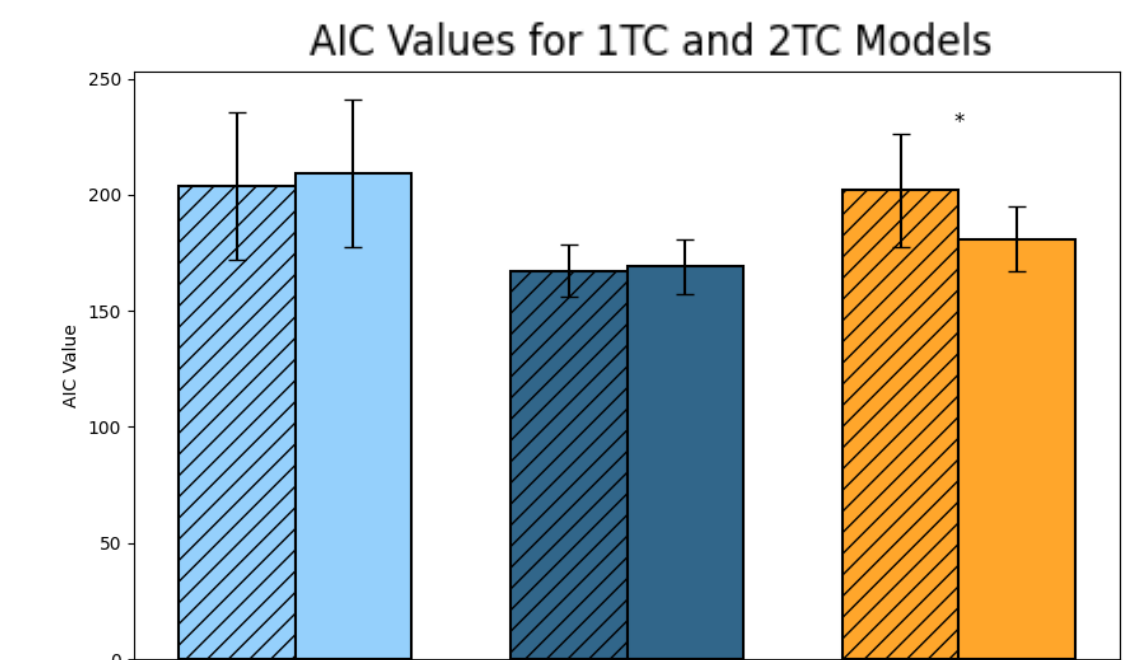
  

Desc. Aorta		
HC**	V	p
1.45 ± 1.04	2.68 ± 2.35	0.19

AA		
HC***	V	p
4.74 ± 2.27	3.16 ± 1.32	0.13

**Table 3.** Mean ± SD  $BP_{nd}$  values. Significant differences were found between Asc. Aorta and AA ( $p < 0.05$ ) and Desc. Aorta and AA ( $p < 0.01$ ) in HCs.



**Figure 6.** AIC values for 1TC (stripes) and 2TC (solid) models. Asc. Aorta in light blue, Desc. Aorta in teal, AA in yellow.

## Conclusions and Future Directions

- $V_T$  trend across regions: AA > Asc. Aorta > Desc. Aorta (for 1TC, 2TC and Logan Plot)
- $BP_{nd}$  trend across regions: AA > Desc. Aorta > Asc. Aorta.
- Validation of segmentation methodology using FDG scans.
- Kinetic modeling of left ventricle (LV) to use as a reference tissue.
- Repeat kinetic modelling using an IDIF from LV or eroding the edges of the corresponding IDIFs to account for differences in spillover between models.

## Acknowledgements

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## References

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