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# Comparative Efficacy of Acoustic Radiation Force Impulse Imaging in Assessing Liver Fibrosis and Cirrhosis

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## Description

Liver diseases, particularly chronic liver disease and cirrhosis, have become global health concerns due to their prevalence and association with other serious health conditions. Early diagnosis and effective management are important to improve patient outcomes, which calls for precise, non-invasive diagnostic tools. Acoustic Radiation Force Impulse (ARFI) imaging is a potential ultrasound-based technology for assessing liver stiffness, offering advantages over conventional liver biopsy. This article describes ARFI imaging's efficacy in liver disease assessment, compares it with other imaging modalities, and discusses its potential for broader clinical application. Liver diseases, including cirrhosis, fibrosis and hepatitis, affect millions of people worldwide, contributing to significant morbidity and mortality. Accurate staging of liver fibrosis is essential for managing these diseases, but traditional liver biopsy has several limitations. It is invasive, carries the risk of complications and may not represent the entire liver due to sampling variability. This has led to a search for non-invasive methods for evaluating liver stiffness as an indicator of liver fibrosis. ARFI imaging has emerged as a valuable non-invasive modality, utilizing focused ultrasound pulses to generate small, localized displacements in tissue, which are then detected to estimate tissue stiffness. In recent years, ARFI has gained traction in liver disease assessment due to its reliability, safety and ability to provide real-time results.

#### Force impulse imaging

ARFI imaging works on the principle of creating mechanical "pushes" within tissues using focused ultrasound energy. These pushes generate shear waves in the tissue, which are then monitored and measured by ultrasound equipment. The speed at which these waves propagate is directly correlated to tissue stiffness: Faster shear waves indicate stiffer tissue, which is characteristic of fibrosis and other liver pathologies.

**Transient Elastography (TE):** Most commonly represented by FibroScan, is a widely used method for assessing liver stiffness. Ituses mechanical pulses rather than ultrasound-induced force to generate shear waves. TE is fast, widely available and easy to

operate. However, it has limitations in obese patients and those with ascites, as the mechanical pulses may not penetrate adequately. Compared to TE, ARFI has an advantage in these populations, as it can better penetrate fatty and edematous tissues. Moreover, ARFI allows operators to select specific areas within the liver to measure, which may provide a more targeted assessment of liver stiffness.

Magnetic resonance elastography: MRE is considered the gold standard for non-invasive liver stiffness measurement, boasting high accuracy in detecting and staging liver fibrosis. MRE applies Magnetic Resonance Imaging (MRI) principles with a vibrational wave generator to measure tissue stiffness. While highly accurate, MRE is costly and requires specialized equipment and expertise, limiting its accessibility. Patients may also find MRE uncomfortable due to the closed MRI setting, which can cause claustrophobia.

Conventional ultrasound: Traditional ultrasound imaging is an essential tool in liver disease diagnosis, used to detect structural abnormalities like nodules, masses, or changes in liver size. However, it lacks the capability to measure tissue stiffness, which is critical in assessing fibrosis and cirrhosis stages. ARFI imaging, an advanced form of ultrasound, adds the capability of measuring tissue stiffness, making it more effective for evaluating fibrosis progression compared to conventional ultrasound. While conventional ultrasound is limited to visual assessment, ARFI provides both visual and quantitative data, enhancing diagnostic accuracy.

#### Clinical applications of ARFI in liver disease

**Fibrosis and cirrhosis:** Liver fibrosis and cirrhosis progress through stages, each associated with increasing liver stiffness. ARFI imaging enables the early detection of fibrosis by measuring changes in liver stiffness, even in patients without symptoms. This early diagnosis can lead to timely intervention, slowing disease progression and improving prognosis. Studies have shown that ARFI can reliably detect moderate to severe fibrosis, with accuracy comparable to liver biopsy. This makes it an ideal tool for screening patients at risk of chronic liver

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disease, such as those with hepatitis B or C, fatty liver disease, or a history of alcohol abuse.

Monitoring treatment response: For patients undergoing treatment for liver disease, monitoring changes in liver stiffness can indicate treatment efficacy. ARFI imaging allows for repeated, non-invasive measurements, providing real-time feedback on liver stiffness. This enables physicians to adjust treatment plans as needed and ensures that patients receive the most effective care.

Assessment in special popula ions: ARFI imaging is valuable for assessing liver stiffness in patients who are poor candidates for liver biopsy, such as those with bleeding disorders or coagulopathies. It is also helpful in obese patients, where other imaging methods may be less effective. The ability of ARFI to provide accurate stiffness measurements in these populations makes it a versatile diagnostic tool.

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