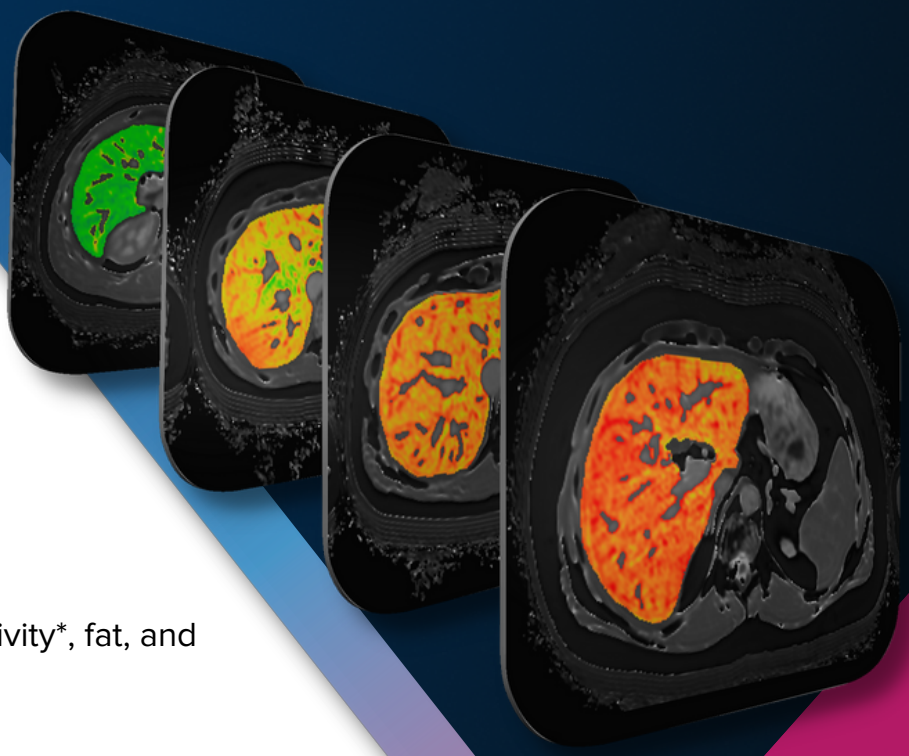
LiverMultiScan

Bringing clarity to the assessment and management of chronic liver disease



Key Features

- Precise measures of liver disease activity*, fat, and iron content across the whole liver.[1–6]
- Prognostic of clinical outcomes.[2]
- Sensitive to dynamic change in disease activity.[3,4]
- Noninvasive procedure with patient-friendly reports.[7]
- Recognized in clinical guidelines for NASH.[8–10]
- Service is reimbursed by CMS and covered by many commercial payers.
- Delivered through a cloud-based service, needing no additional MRI infrastructure.

Details

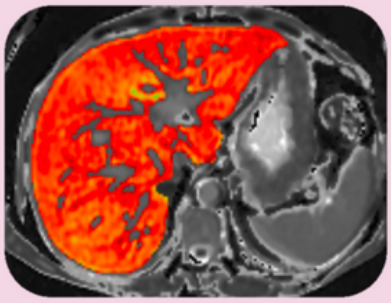
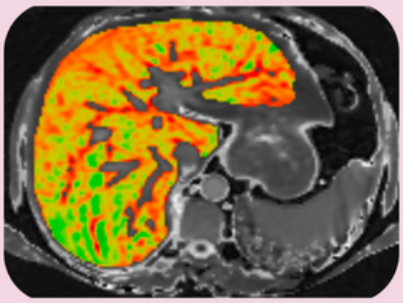
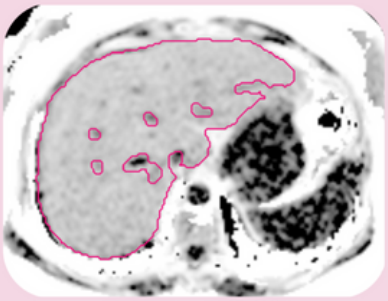
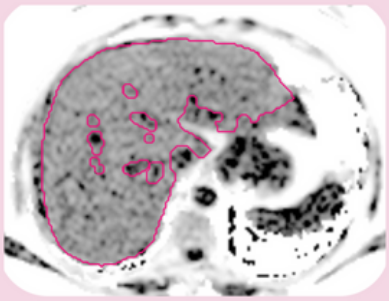
- FDA 510(k) cleared for commercial use in the U.S.
- Appropriate CPT Codes billed for this service: 0648T and +0649T.
- AIM's Guidelines deem LiverMultiScan medically appropriate for managing chronic liver disease.

Quantitative and visual measures of liver health using MRI and AI, to help physicians treat patients with chronic liver disease.

Perspectum

Case study: LiverMultiScan can detect a change in liver disease activity* within 12 weeks of initiating treatment for NASH

- A 48-year-old patient with at-risk NASH was treated with an investigational FXR agonist for 12 weeks as part of a clinical trial.
- LiverMultiScan at baseline indicated evidence of high liver disease activity* and elevated liver fat.
- Twelve weeks later, LiverMultiScan showed rapid and significant improvement in liver health, suggesting that the treatment was effective.

LiverMultiScan	Baseline	Week 12
Liver Disease Activity* Upper limit of normal[1] cT1 = 800 ms	 cT1 = 1028 ms	 cT1 = 826 ms
Liver Fat Fraction Upper limit of normal[6] PDFF = 5%	 PDFF = 20.8%	 PDFF = 8.3%
Liver Iron Content Upper limit of normal LIC = 1.8 mg Fe/g dry wt.	 LIC = 0.6 mg Fe/g dry wt.	 LIC = 0.6 mg Fe/g dry wt.

Abbreviations: cT1, corrected T1; PDFF, proton density fat fraction; LIC, liver iron concentration

**Correlates with liver inflammation, ballooning, and fibrosis.*

References

1. Andersson, A., et al. (2021). Clin Gastroenterol Hepatol. Advance online publication.; 2. Jayaswal, A., et al. (2020). Liver Int, 40(12), 3071-3082.; 3. Harrison, S. A., et al. (2020). J Hepatol, 71(4), 1198–1212. 4. Harrison, S. A., et al. (2021). Am J Gastroenterol, 116(12), 2399–2409.; 5. Imajo, K., et al. (2021). World J Gastroenterol, 27(7), 609–623.; 6. Beyer, C., et al. (2021). PloS One, 16(4), e0249491.; 7. McKay, A., et al. (2021). J Patient Rep Outcomes, 5(1), 89. 8. Cusi, K., et al. (2022). Endocr Pract, 28(5), 528–562.; 9. Long, M. T., et al. (2022). Gastroenterology. Advance online publication.; 10. Basu, R., et al. (2022). Mayo Clin Proc, 97(9), 1700–1716.

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