

Ultrasound imaging is commonly used clinically to identify abnormalities in tendon geometry, fibrillar pattern and echogenicity. It can be challenging, however, to use these structural features to detect localized pathologies, such as partial tendon tears. Therefore, the measurement of tendon deformation could enhance the sensitivity of ultrasound by allowing for the direct evaluation of the intrinsic relationship between tendon structure and function.

We are investigating the use of ultrasound elastography to map tendon tissue deformation during functional loading. To adapt traditional elastography techniques for this purpose, there are four specific challenges that must be addressed. First, it is necessary to perform two-dimensional motion tracking to account for the substantial tendon motion and deformation that occurs with movement. Secondly, cumulative tissue deformations over time should be computed to characterize the nonlinear behavior of collagen tissue. Thirdly, it is imperative to use collection procedures that minimize motion into and out of the imaging plane. Finally, the simultaneous measurement of external loading and motion data is important to relate tissue deformation to the overall biomechanical loading of the muscle-tendon unit.

We have addressed these challenges by: a) collecting cine RF (radiofrequency) data from tendons during well-controlled repeatable loading paradigms, and b) developing a mesh-based tracking algorithm for computing two-dimensional tissue deformation from the RF data. In our tracking algorithm, incremental pixel displacements are first computed using two-dimensional elastography techniques. A finite element mesh is then overlaid onto the visible tendon and nodal displacements are estimated by averaging nearby pixel displacements. Cumulative motion is obtained by integrating the incremental displacements in both forward and backward directions, with cyclic constraints imposed to offset errors that can occur with drift. The nodal displacement data are then spatially differentiated to estimate cumulative strain in the along-fiber and transverse directions.

To date, we have performed both *ex vivo* and *in vivo* experiments using these RF collection and analysis techniques. In the *ex vivo* tests, RF data were collected at 63 Hz during 4% cyclic loading of porcine flexor tendon. The results were encouraging, with the computed tissue motion and strain patterns closely mimicking the overall stretch and loading of the tendon. We have since constructed an inertial loading device that induces repeatable Achilles tendon loading in response to sagittal ankle motion. Our initial results suggest that systematic strain patterns exist across the tendon with greater tissue strain in the superficial regions. Interestingly, lower strain areas correspond to regions where partial tendon tears are often seen, raising interesting questions about the mechanisms of localized injuries. We conclude that the use of an elastographic technique to image tendon deformation may prove useful for both identifying tendon pathologies and investigating the underlying mechanisms of injury.

Learning Objectives:

1. Recognize the clinical relevance of assessing tendon mechanics

2. Understand the challenges and potential in using ultrasound elastography to measure tendon deformation