

**Ultrafast three-dimensional microbubble imaging *in vivo* predicts tissue damage volume distributions during nonthermal brain ablation**

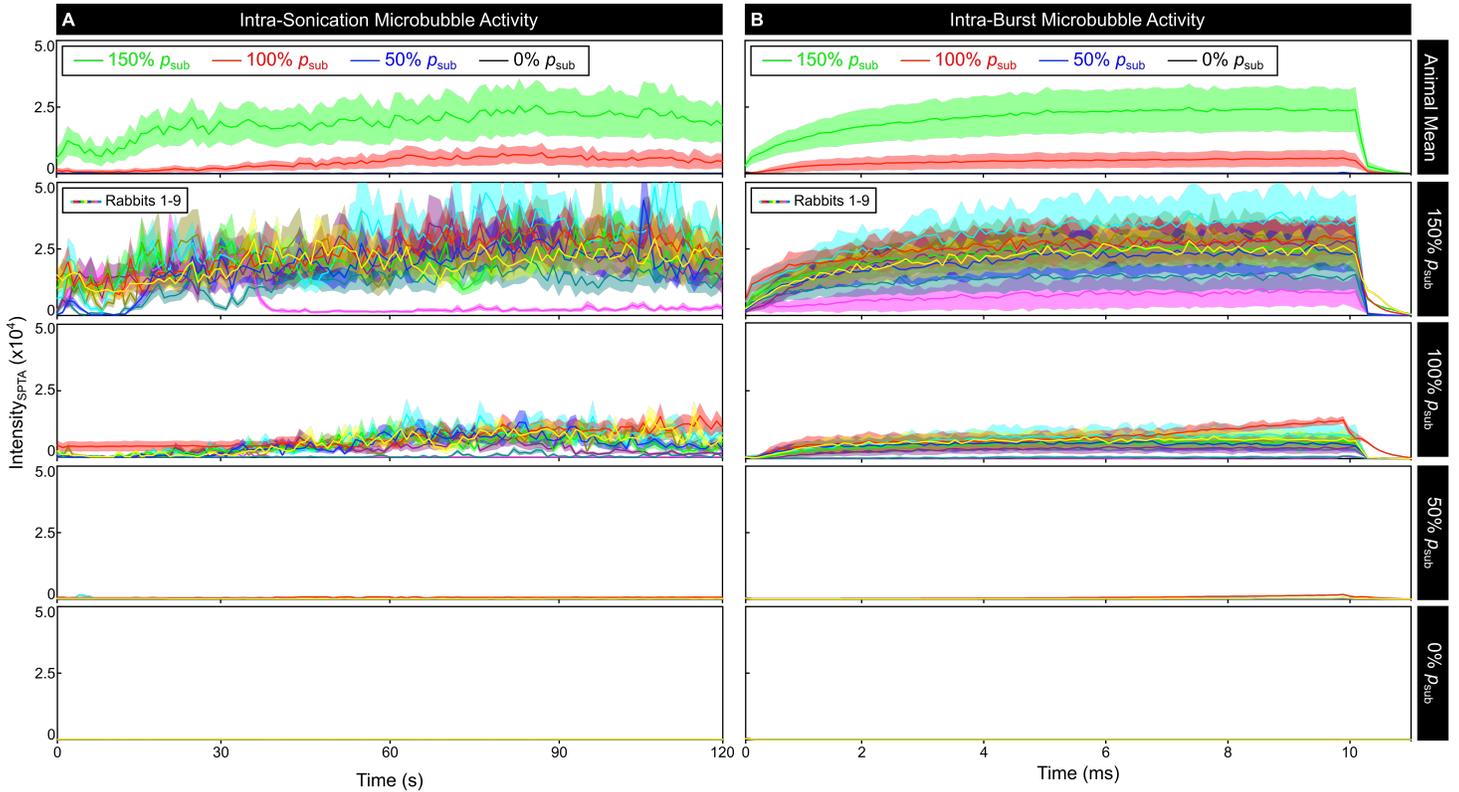
Ryan M. Jones<sup>1</sup>, Dallan McMahon<sup>1,2</sup>, and Kullervo Hynynen<sup>1,2,3</sup>

<sup>1</sup>*Physical Sciences Platform, Sunnybrook Research Institute, Toronto, Ontario, Canada*

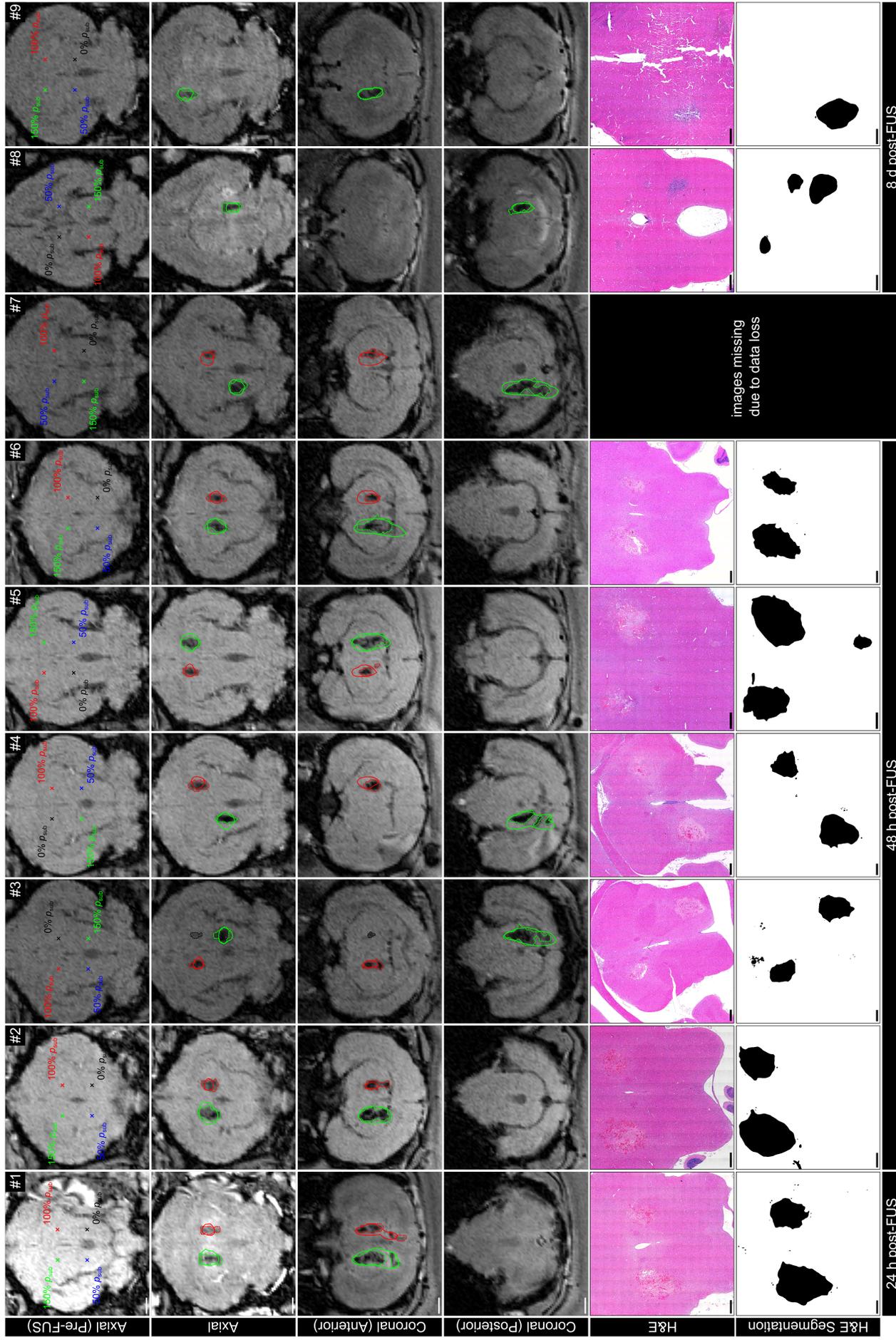
<sup>2</sup>*Department of Medical Biophysics, University of Toronto, Toronto, Ontario, Canada*

<sup>3</sup>*Institute of Biomaterials and Biomedical Engineering, University of Toronto, Toronto, Ontario, Canada*

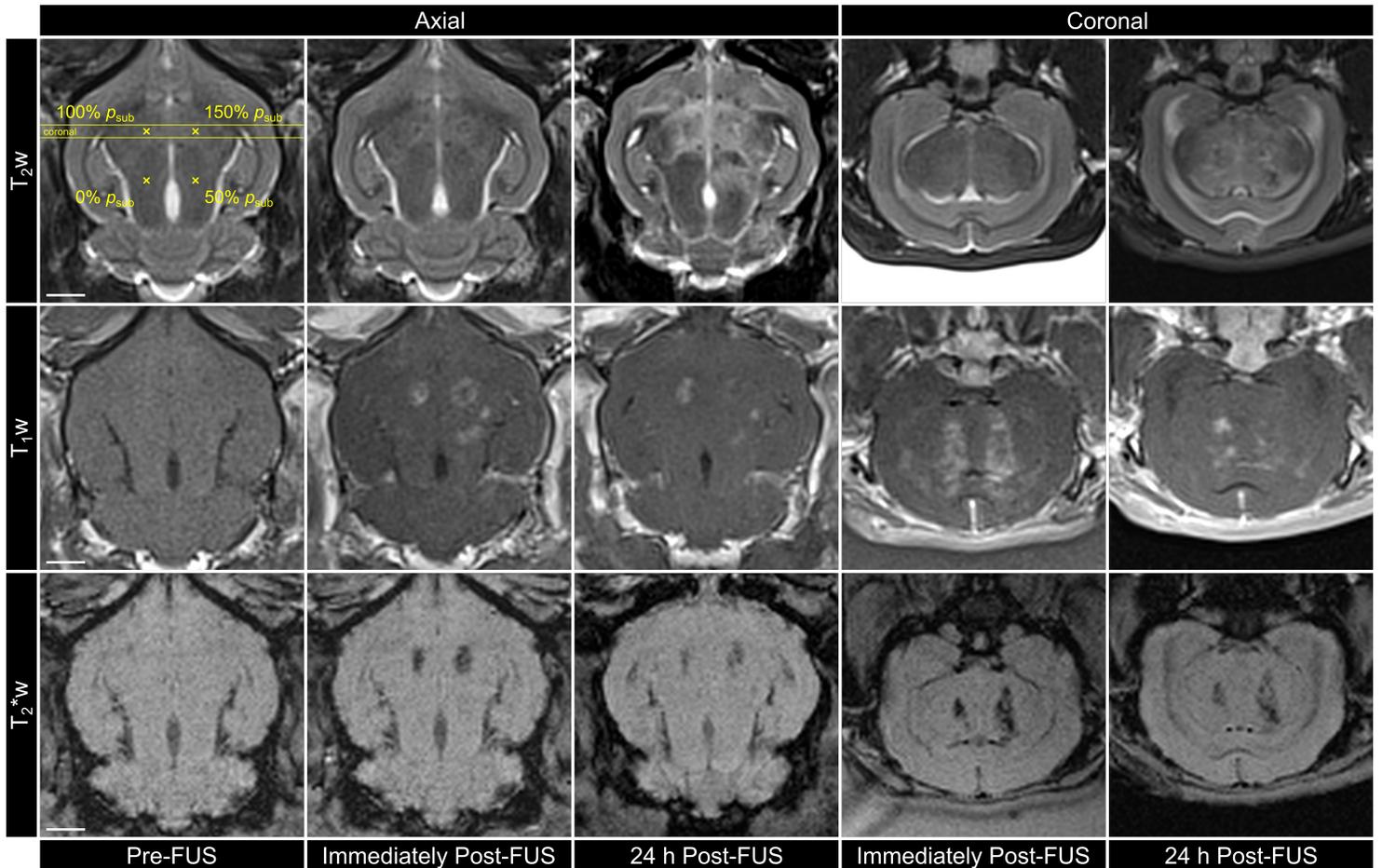
## Supplementary Material



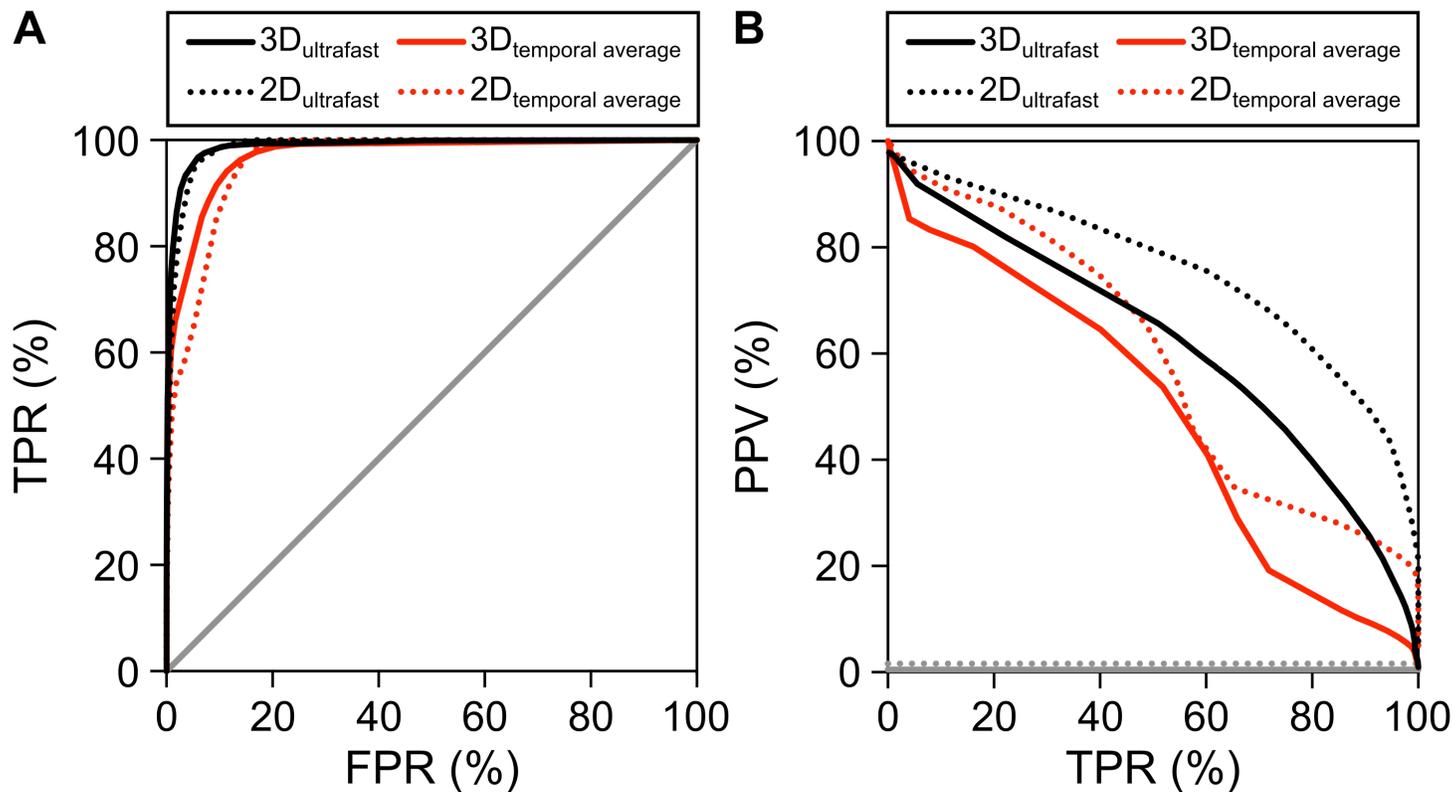
**Figure S1. Animal-wise intra-sonication and intra-burst microbubble activity.** (A) SPTA source field intensity as a function of time throughout the 120 s fixed-pressure sonication stage for each target level (0%, 50%, 100%, and 150%  $p_{\text{sub}}$ ) of each animal in cohort #1, along with an animal-wise mean per target level. The shaded regions denote  $\pm 0.5$  SDs from the mean, calculated throughout each 10 ms burst length ( $\tau = 100 \mu\text{s}$ ). (B) SPTA source field intensity as a function of time throughout the 10 ms burst length ( $\tau = 100 \mu\text{s}$ ) for each target level (0%, 50%, 100%, and 150%  $p_{\text{sub}}$ ) of each animal in cohort #1, along with an animal-wise mean per target level. The shaded regions denote  $\pm 0.5$  SDs from the mean, calculated throughout each 120 s exposure. In (A,B), error bars of  $\pm 0.5$  SDs from the mean were chosen for data visualization purposes.



**Figure S2. Animal-wise MRI, PCI, and H&E data.**  $T_2^*w$  MRI data (axial and coronal planes) acquired pre- and immediately post-sonication for each animal in cohort #1 (rabbits #1-9). Color-coded target locations and their corresponding target levels are overlaid on the pre-sonication axial  $T_2^*w$  scans (green = 150%  $p_{sub}$ , red = 100%  $p_{sub}$ , blue = 50%  $p_{sub}$ , black = 0%  $p_{sub}$ ). Segmented regions of  $T_2^*w$  MRI signal hypointensity induced by the exposures (dashed lines) and corresponding sonication-aggregate ultrafast PCI contour data at the operating threshold that maximizes the  $F_1$ -score of the global PR curve of the  $MRI_{3D}$  dataset (solid lines) are overlaid and are both color-coded by target level. Axial H&E stained tissue sections and binary segmented regions of damage are provided for the planes corresponding to the axial MRI data. The sacrifice time points associated with the H&E data are provided for each rabbit. Scale bars on the MRI (H&E) data indicate 5 mm (1 mm).



**Figure S3. Multi-sequence MRI-based assessment of acute treatment response during microbubble-mediated nonthermal brain ablation.** MRI data (axial and coronal planes) from three different sequence types ( $T_2^*w$ ,  $T_1w$ , and  $T_2w$ ) acquired pre-sonication, immediately post-sonication, and 24 h post-sonication of rabbit #5. Post-sonication  $T_1w$  scans were acquired immediately following administration of a gadolinium-based MRI contrast agent (0.1 ml/kg Gadovist™). Target locations, their corresponding target levels, and the coronal slice volume are overlaid on the pre-sonication axial  $T_2w$  scan in yellow. Scale bars indicate 5 mm.



**Figure S4. Comparison of ultrafast and temporal-average processing methods for predicting FUS-induced brain tissue damage distributions.** Global (A) ROC and (B) PR curves for MRI-based classification of tissue damage ( $MRI_{2D}$  and  $MRI_{3D}$  datasets) via sonication-aggregate 3D PCI data generated using both ultrafast processing (10 kHz imaging volume rate) and conventional whole-burst temporal averaging. (A,B) Gray lines denote the ROC/PR curves for classifiers with random performance for a specific dataset (solid = 3D, dotted = 2D). TPR = True Positive Rate, FPR = False Positive Rate, PPV = Positive Predictive Value.

**Movie S1. Megahertz-rate 3D microbubble imaging in vivo.** (Left Column) Axial (XY-plane) and coronal (XZ-plane) views of -3 dB source field intensity isosurfaces at a 1 MHz volume rate ( $\tau = 1 \mu\text{s}$ ) over the course of the ultrasound burst of the calibration sonication during which subharmonic microbubble activity was first detected intraoperatively (rabbit #11, in-situ SPTPN pressure  $\sim 0.66$  MPa). 3D PCI data were computed for every  $10^{\text{th}}$  frame ( $10 \mu\text{s}$  separation between frames) and displayed only during integration windows with a peak sidelobe ratio  $\leq -3$  dB. (Right Column) Whole-burst temporal-average -3 dB source field intensity isosurface ( $\tau = 10$  ms) corresponding to the same ultrasound burst.