The assessment of gadolinium in post mortem tissue and special considerations in pediatrics

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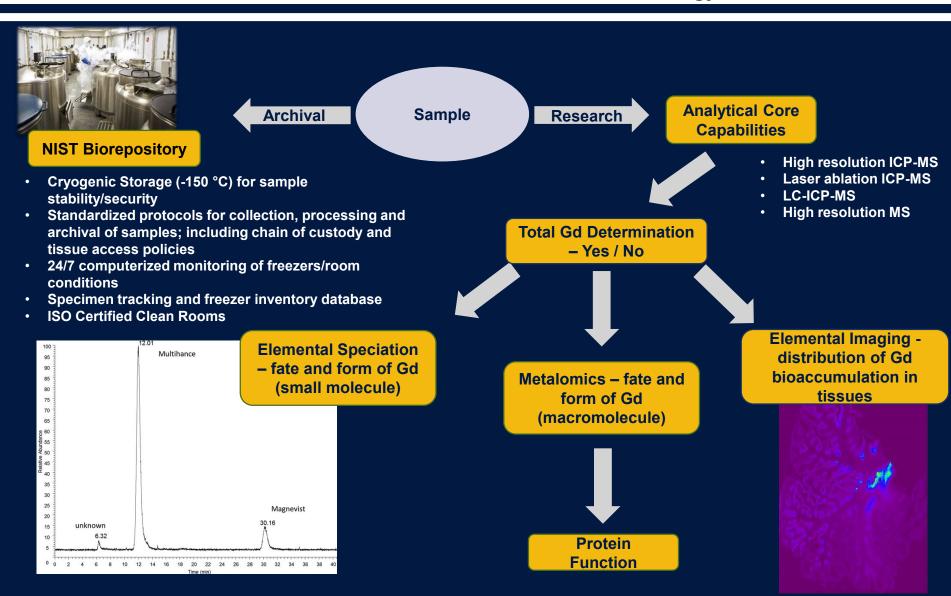


Conflicts of Interest

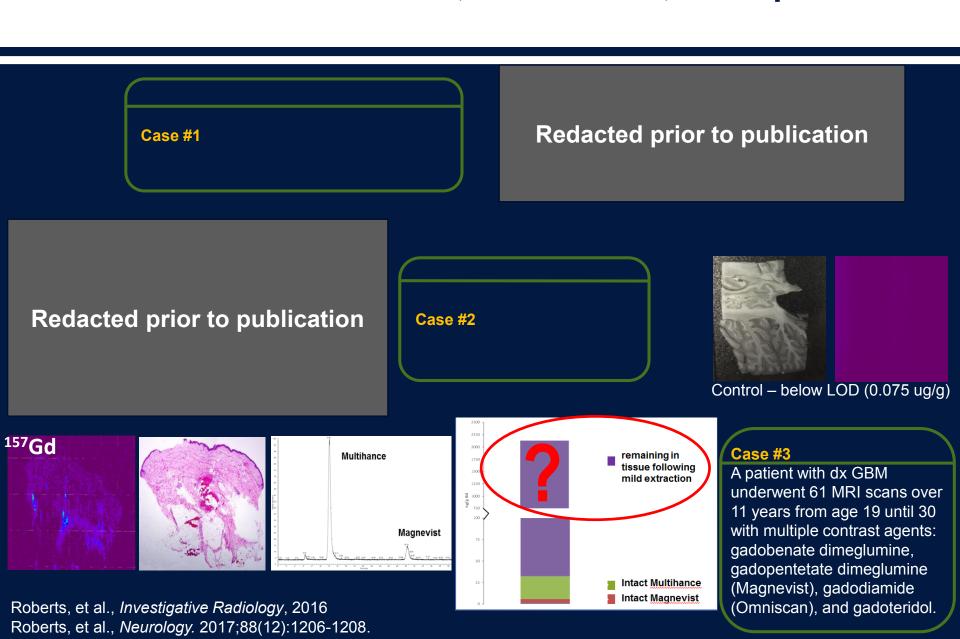
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1. Knowledge Gap: Comprehensive Tissue Databank (all agents, timing, dose, tissue types, human and animal)

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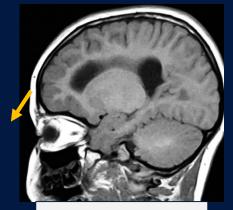


Gadolinium Quantification, Distribution, and Speciation



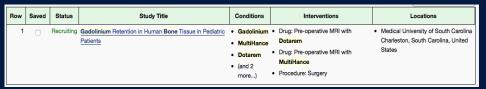
2. Knowledge Gap: Vulnerability of Pediatric Patients

- Vulnerability of the Pediatric Brain
 - The developing pediatric brain is known to be sensitive to metals and other man-made chemicals in very small amounts (lead toxic threshold of 10 μg/dL)¹
- Active skeletal formation
 - Fusion of secondary ossification centers of the human femur 11-18 years females; 14-19 years males²
 - 23 X higher levels in bone than brain³



Age 6 after 22 doses of GBCA





- Neonatal Renal Function Immaturity
 - Normal term newborn mean GFR = 39 mL/min/1.73 m² (range 11-15)⁴
- Gadolinium MRI at any time during pregnancy is associated with an increased risk of rheumatological, inflammatory, or infiltrative skin conditions and for stillbirth or neonatal death.⁵

- ¹Stein J, et al. *J Dev Behav Pediatr*. 2002;23:S13-22.
- ²Zoetis T, et al. *Birth Defects Research (Part B)*. 2003;68:86-110.
- ³Murata, et al. *Invest Radiol.* 2016;51(7):447-453
- ⁴Cooper, S., "The Harriet Lane Handbook, Chapter 19 Nephrology"; 2012, p484.
- ⁵Ray JG, et al. *JAMA*. 2016;316(9):952-961.