Innovations in Vascular Imaging: Enhancing Diagnosis and Treatment of Carotid Artery Disease

Nurul Aminah Anwar

Taylor's University, Malaysia.

Abstract

Many vascular ultrasonography methods can be helpful in difficult diagnostic circumstances. Directional power Doppler ultrasound, contrast-enhanced ultrasound, B-flow imaging, microfluidic imaging, 3-dimensional vascular ultrasound, intravascular ultrasound, photoacoustic imaging, and vascular elastography are examples of new vascular ultrasound applications. Together with Doppler ultrasonography, these methods offer improved imaging of tiny arteries, increased sensitivity for detecting sluggish flow, and improved evaluation of the vascular wall and lumen while getting beyond Doppler's limits. Making ultrasound competitive with computed tomography and magnetic resonance imaging for vascular imaging is the ultimate objective of these technologies. We are now able to identify the fundamental processes of vascular disorders both in vivo and ex vivo due to recent developments in vascular imaging. In addition to biomarkers and clinical manifestations, efforts have been undertaken in the last ten years to develop a variety of approaches for assessing the evolution of atherosclerotic plaque and vascular inflammatory alterations. The vital roles of in vivo and ex vivo vascular imaging, such as computed tomography, positron emission tomography/scintigraphy, magnetic resonance imaging, intravascular ultrasound, computed tomography, and most recently, optical coherence tomography, were highlighted in a number of recent publications in Arteriosclerosis, Thrombosis, and Vascular Biology. These techniques can all be used with relative ease in bench and clinical studies. In the near future, these clinically accessible imaging modalities will be employed due to innovative techniques that have been proposed in multiple landmark research. Furthermore, it is expected that future advancements in intravascular imaging modalities, including polarized-sensitive optical coherence tomography, motical coherence tomography—near-infrared autofluorescence, will improve the care of patients with cardiovascular disease. In this review paper,

Keywords

Innovation (II), Vascular Imaging (VI), Diagnosis (DD), Treatment of Carotid Artery Disease (TCA)

Disclosure: The authors have no conflicts of interest to declare.

Received: 24 May 2024 Accepted: 21 October 2024 Citation: Vascular & Endovascular Review 2024;7: e04. DOI: https://doi.org/10.15420/ver.2024.07.02.04 Correspondence: Nurul Aminah Anwar, Taylor's University, Malaysia. Email: nurulaminahanwar@protonmail.com

Open Access: This work is open access under the CC-BY-NC 4.0 License which allows users to copy, redistribute and make derivative works for non-commercial purposes, provided the original work is cited correctly.

Innovative vascular ultrasound technologies are those in which advancement is observed in the visual nature of vessels, the sight of vessels that are very small in size, and the response to the flow of fluid that even flows very slowly. One of the most advanced techniques in the field of imaging is magnetic resonance imaging. In magnetic resonance imaging, mighty magnets and radio waves are the important components. The body's internal structure is properly scanned using magnetic resonance imaging, enabling healthcare professionals to observe internal conditions deeply. In vascular imaging, blood vessels are observed. However, this method does not observe coronary arteries as another technique is applied for this purpose: CT scan¹. Diagnosing all those conditions, representing the irregular blood flow inside the blood vessels, proves very helpful. The images taken as a result of magnetic resonance imaging prove helpful in planning surgery-related processes. These images have a great role in determining if surgery becomes successful as they provide clues about the regularity and irregularity of blood flow inside the blood vessels. For all those cases that are all about the beginning, all the details that are all about the location of the tumor, its boundary, trespassing, and conditions of metastasis work as a guide for the whole period of prognosis and during the time of survival². Like the catheter, which is DSA, a bolus, a contrast in nature, is delivered through the vessels. Then, its image is taken at the right time, as it is the right time to observe the flow of blood inside the vessels as it moves according to its interest. Three unique techniques seem very useful as they are about image acquisition. In these techniques, things like volume mode, toggling table mode, and scanning of shuttle mode are involved. Diagnostic imaging is ubiquitous and commonly utilized, called X-rays

(radiographs). In clinical practices, there are many techniques which are considered as functional analyses³. Here are some examples of this, such as diffusion-weighed MRI and perfusion imaging (DCE-MRI). There are many other techniques, like metabolic imaging with MRI, that are still under experimentation, as they are also techniques that can prove helpful for magnetic resonance imaging. The treatment level completely depends on the degree of blockage of the carotid artery. Sometimes, the symptoms of blockage of arteries also appear, and many times, they appear. Many other things like illness appear; I'm the person who suffers from blocking an artery. Certain treatments associated with mild to moderate stress include lifestyle changes and building fatty deposits inside the blood vessels⁴. Most people who undergo surgery face the narrowing or constriction of the arteries. The risk of happening of strokes will be reduced after the application of surgery. The symptoms of happening of stroke include TIA or minor stroke. The treatment of the condition of carotid artery stenosis is only possible with surgery like carotid endarterectomy (CEA). To analyze the situation of carotid artery stenosis along with your health circumstances overall, one can do blood tests in which tests of blood, sugar, cholesterol, and triglycerides are involved⁵. There is also the chance that the Doctor can instruct you on the cholesterol and triglycerides involved. There are also chances that the Doctor can instruct you to do imaging tests as it is the best way of examining blood vessels that are found in the brain and neck. The prevention of the risk of carotid artery disease is also essential, but it can only be possible by following certain steps like avoiding smoking; after a few years of quitting, a smoker person will become susceptible to stroke, just like a nonsmoker person. The maintenance of weight also proves helpful in this phenomenon. Intake of a healthy diet is also a good sign. Avoid the overuse of salt. Doing exercise regularly. Avoiding the use of alcohol. Controlling the appearance of any disease. The cerebral angiogram is one of the best methods to diagnose carotid stenosis. This procedure is only performed by an expert surgeon⁶. If we compare trans carotid artery revascularization and endarterectomy, the former is less invasive and the most recent addition for the treatment of CAS. Sometimes, surgeons direct the flow of blood toward the filter to avoid the presence of any plaque that can hinder the movement of blood toward the brain. Disease of the Carotid artery can be diagnosed by applying noninvasive duplex ultrasound. This test gives us information about the infrastructure and framework of blood vessels along with the blood flow level inside the blood vessels⁷. Certain exercises can also prove helpful in avoiding the disease of the carotid artery. These exercises include walking, swimming, biking, and using Nustep. The main objective should be repetition along with light weights, which should be repeated after 2-3 days of the week. The beginning should be done so that 1 set should consist of 15 repetitions per group of muscles. Enhance this exercise to such an extent that it should be done in 3 sets, which are based on 15 repetitions when one becomes able to tolerate thistle exercise⁸. The major vascular beds are three in which coronary cerebrovascular and peripheral are involved. But it is the wrong thing that peripheral vascular disease is always ignored, although it is increasing day by day globally. The aging issue in the population is increasing the risk of PVD; therefore, it can be seen in the range of different diagnostic centers and treatment modalities⁹. During the past years, a lot of research and development brought innovations that play a significant role in the management of PVD. Many advancements can be seen in imaging, molecular technology, medical devices, and surgical techniques, which have lessened the level of morbidity and mortality of PVD^{10, 11}.

Research Objective

The main aim of this research is to know the advancements in the medical field and see the type of modifications and level of advancements that can resolve the diagnosis issue along with the advanced treatment of diseases like carotid artery disease.

LITERATURE REVIEW

Researchers claim that aging brings with it a lot of health problems. cardiovascular disorders are prevalent in aged people, the onset of cardiovascular disease increases the risk of other disorders that result in the death of a person, the common disease condition that is onset because of cardiovascular disease is atherosclerosis. To treat several correlated diseases new innovative technology has been designed .imaging based therapies along with pharmacotherapy are used in clinical practices⁹.studies explain that the treatment process for peripheral arterial disease is done through a pre-operative strategy. effective strategic planning is the basis for surgical operations. Imagining technology is employed to make preoperative strategies for peripheral arterial disease¹². Studies reveal that stroke conditions are resistant due to the formation of plaque in the carotid artery, precisely assessing the disease condition increases the chances of patient survival Color-Doppler ultrasound is an innovative imaging technology used for assessing plaque in arteries ¹³. Studies show that symptoms for CS vary from mild to severe. The chances of stroke and paralysis increase in CS patients having severe symptoms. early diagnosis of CS helps in reducing the disease severity in patients. modifying the living habits of patients also minimizes the risk of CS¹⁴. Studies suggest that using Al for detecting arterial disease is an emerging approach. duplex ultrasound is a technique that uses AI for generating images of carotid arteries These images help in differentiating normal arteries from the carotid arteries. DUS machines are potentially useful and thus are adopted in clinical procedures for getting images of carotid arteries¹⁵ Studies claim that a great proportion of pollution is affected by CCVD. The disease related to the heart is a serious health problem and is often life-threatening due the pollution. The complexity in blood vessels is associated with the onset of CCVDs. The diagnostic technology used for CCVD detection is MRA¹⁶. Scholars claim that the death rate in countries with having large number of stroke and hemorrhage patients is higher. Cerebrovascular disease gives rise to stroke conditions in a large number of patients. A possible way to detect arterial problems is to use a neuroimaging technique. MRI is the first imaging technique used for cardiovascular disease diagnosis. other techniques include CT as well as DTI. All these techniques are regarded as novel

techniques for early detection of arterial disorders ¹⁷. Studies predict that noninvasive technology is acceptable for cardiovascular diseases. CCTA is among the noninvasive techniques for evaluating the complexity of CAD. In early disease diagnostic procedures CCTA technology is employed as it plays the role of risk assessment¹⁸. Scholars explain that ESCR is a society of the European state that works to determine the complexity behind various cardiovascular diseases. this society is renowned for its standardized and unique imaging technologies. To predict the onset of stroke conditions in cartoid arterial disease affected patients the use of imaging-derived biomarkers is preferable for use in clinical processes¹⁹. Studies claim that despite the development of great medicine for cardiovascular disease this disease is still a major life-threatening problem for people, the ineffectiveness of Nano-medication to reach the exact target makes their use ineffective. To solve this problem nanoparticles are used for drug development. nanomedicines along with Nano devices are used in health sectors to treat the cardiovascular health problems of patients²⁰.studies conclude that the advancement of the first century has resulted in a great revolution in medicine field. vascular medicines have been developed to treat various types of vascular disease. atherosclerosis is a vascular disease that causes the narrowing of blood vessels carrying blood. plaque formation results when atherosclerosis becomes severe. To treat atherosclerosis vascular medication has been designed using technology based systems²¹. Studies predict that ischemic heart diseases problem that become difficult to treat with medicine when become severe. The complexity of ischemic disease makes its treatment a difficult task. development of a novel strategic approach for heart-related problems is the only solution, stem cells are developed using the biotechnological approach to replace the abnormal stem cells of the heart with the normal one²². To understand the formation of plaque in atherosclerosis the use of imaging technology is adopted, images about the plague provide information about its size²³. Studies elaborate that two technologies are used for plaque identification in carotid arteries. These technologies are SMI and CEUS. The use of these technologies and their effectiveness are studied using different approaches, the results of studies concluded that detection of neovascularization in vessels is effectively detected through SMI The diagnostic values provided by SMI and CEUS are used for the plaque assessment process²⁴. Scholar reveals that PDA is a rapidly increasing disease affecting millions of people worldwide and therefore burdening the health sectors. Studies made on PDA patients reveal that the probability of such patients suffering from CLI is higher to understand the pathology behind PDA the use of clinical technologies is preferred. the clinical technology approach helps in tackling the problems related to the PDA²⁵. Also, by identifying the primary cause of the disease it becomes easier to tackle the disease-related complexities. various guidelines have been provided by health sectors for assessing the risks associated with cardiovascular disease. for risk assessment, a technology-based system employs the imagining technique²⁶. Imaging techniques are preferable as they detect the site of plaques and also determine possible risk onsets. The arterial problems associated with the brain result in cerebrovascular disorder. these arteries in the brain are scanned using CT SCANS or MR angioplasty technology²⁷. Scholars' studies conclude that some arterial diseases require minimum surgical procedure for their treatment like arterial stenosis requires the automated detection of arteries to carry out surgical procedures. computed tomography is the term used for detecting arterial disease with minimum background knowledge about the disease to obtain data about the whole vessel systems of the body the skeletonization process is performed which involves the visualization of the whole skeleton using imaging technology²⁸. Studies suggest that when a vascular disease becomes prevalent in the body then it results in the inflammation of blood vessels. inflammation at the site of disease is an indication of disease severity. inflammation related to vascular disease is detected using the CT based imagining technology. This technology scans the body and detects the site of inflammation trough imagery information²⁹. Studies suggest that the computed tomography technique is limited to providing information about the vessel's blockage whereas the 3D fusion ultrasound technology has the potential to determine the diameter of plaque along with its volume.in most surgical operative procedures 3D ultrasound technology is preferred by health professionals in comparison to CT³⁰.

METHODS

The research determines that innovation in vascular imaging enhancing diagnosis and treatment of carotid artery disease. The research based on primary data analysis for determine the data used SPSS software. According to the research Vascular Imaging is a special laboratory technique designed to visualize and diagnose different types of vascular diseases. Vascular diseases are those diseases which are related to blood vessels or lymphatic vessels. Vascular Imaging has been considered the most important laboratory technique for the identification of vascular diseases. In recent years, there have been many innovations in Vascular Imaging aimed at enhancing the diagnosis and treatment of Carotid Artery Disease. Thus, the disease is related to the blood vessels which provide blood to the brain. Following are the important implications of innovations in Vascular Imaging for enhancing the diagnosis and treatment of Carotid Artery Disease:

High-Resolution Ultrasound, Contrast-Enhanced Ultrasound, Computerized Tomography Angiography, and Improved Plaque Characterization

The most important application of vascular Imaging in carotid artery disease is the aspect of high-resolution ultrasound, which is far better than ordinary ultrasound. High-resolution ultrasound has many advantages, such as it is highly spatial Up To the extent of 0.1mm. The other advantage is that it is useful for real-time imaging, providing real-time information about carotid artery disease. The other important advantage of high-resolution ultrasound is that it is totally non-invasive. As we know other radiations may cause some harm to the body if they exceed the normal dose, but high-resolution ultrasound is safe for diagnosing Carotid Artery Disease. The other important advantage of high-resolution ultrasound is that it is cost-effective

and portable. It can be used for the diagnosis of Carotid Artery Disease in a Better way. The other important implication of vascular Imaging for enhancing the diagnosis and treatment of Carotid Artery Disease is the aspect of contrast-enhanced ultrasound. It is the most advanced ultrasound technique in the laboratory in which microbubble contrast agents are used to visualize images more clearly. This ultrasound can be used to visualize blood Flow, vascularity of tissues and other characteristics. The basic principle of this ultrasound consists of a few important steps. The first important step is the injection of microbubbles into the body through veins. In the second step, these microbubbles are used to enhance image clarity and visualization. The third step is assessing blood flow or vascularity of tissues in the body. Various contrasting agents are used in contrastenhanced ultrasound, such as Sulphur hexafluoride, coated lipid microspheres and others. It is mostly used in carotid artery disease diagnosis because of its sensitivity and specificity. The other important implication of innovations in Vascular Imaging for enhancing the diagnosis and treatment of Carotid Artery Disease is computerized tomography angiography. It is related to contrast-enhanced ultrasound because it also uses contrasting agents. It is a special medical technique in which computerized tomography scans and contrasting agents visualize blood flow inside arteries and veins. In this type of ultrasound, there is the use of a beam of x-rays as well, which is rotated around the body. After this step, contrasting agents are injected into the body. In the third step, there is a complete visualization of specific arteries in the body. It is mostly useful in the medical field because there is less imaging time and no need for other interventions. The other important implication of vascular Imaging in carotid artery disease diagnosis is the aspect of improved plague characterization. Most arterial problems are related to plaque formations inside the artery, which will block or narrow the artery. To cure such Diseases, it is important to diagnose and characterize them carefully. The important innovations in Vascular Imaging will help us know about different aspects of plaque characterization such as plaque thickness, area and volume of plaque, calcium scoring and others. When these characteristics are studied carefully, they can also be useful for treating Carotid Artery Diseases. These vascular Imaging techniques are also beneficial because they help in early

Table 1: Results of ANOVA

detection and accurate diagnosis of Carotid Artery Disease. These important implications of innovations in Vascular Imaging convince us about different imaging techniques in the laboratory.

Accurate Stenosis Measurements, Improved Detection of Vulnerable Plaque, And Assessment of Cerebral Blood Flow

The word stenosis measurement is related to the reduction of the diameter of the blood vessel due to plaque formation or narrowing of the Artery. In other words, this is the quantitative analysis of abnormality in the structure of the Artery. It is very important in diagnosing Carotid Artery Disease because it is the accurate idea of blood flow through the carotid artery in the brain. The most important implication of innovations in Vascular Imaging is that it provides information about stenosis measurement and suggests the type of treatment that that patient should opt for carotid artery disease. Stenosis measurements can easily gain all the important information related to damaged arteries by using vascular Imaging. The other important implication of innovations in Vascular Imaging is the aspect of improved detection of vulnerable plaques. In many cases, there is plaque formation in the artery, but all types of plaques do not cause carotid artery disease in humans. Some plagues can be removed by medications easily, so there is no need for any other treatment. But some plagues are guite vulnerable and threatening in the body, which can cause carotid artery disease. The difference between vulnerable and non-vulnerable plaques can easily be done with the help of using vascular Imaging in the laboratory. The other important implication of innovations in Vascular Imaging for enhancing the diagnosis and treatment of Carotid Artery Disease is the aspect of assessment of blood flow to the brain. As it has been mentioned earlier, the carotid artery is the particular artery that provides blood to the Brain. When plague formation or narrowing of this artery, there will be less blood flow to the brain. This low blood flow can prove dangerous for human beings, so there is a need to assess blood flow in this artery from time to time. This aspect of brain blood flow assessment can easily be done with the help of vascular Imaging techniques in medical science. These important implications of vascular Imaging are very useful these days in healthcare sectors.

		Sum of Squares	Df	Mean Square	F	Sig.
Innovations	Between Groups	1.772	2	.886	2.492	.094
	Within Groups	16.708	47	.355		
	Total	18.480	49			
Vascular Imaging	Between Groups	1.995	2	.998	2.872	.067
	Within Groups	16.325	47	.347		
	Total	18.320	49			

The above results of table 1 demonstrate that ANOVA test analysis result represent that sum of square values, the mean square values, the F statistic also that significant value of each variable included dependent and independent. The innovation shows that its sum of square rate is 1.772 the mean square value is 0.886 its shows 88% average square value the F

statistic value of innovation is 2.492 also that its significant rate is 0.094 its shows that 9% significant rate between them. the vascular imaging represent that F statistic value is 2.872 the significant rate is 0.067 its shows positive and 6% significant level between them. the result also describes within the group and between the group level of each variable.

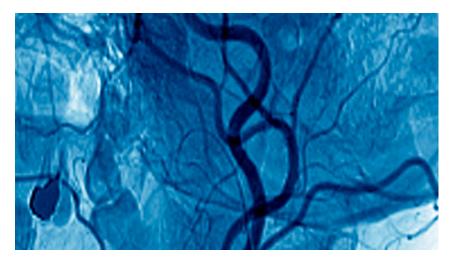


Figure 1: Vascular Imaging

Vascular Imaging

Vascular imaging has become more significant when extending results from the bench to the bedside as a result of clinical investigations that highlighted its critical functions. Basic research is always the first step in the difficult task of creating a novel imaging technique so that it may be thoroughly verified for use in clinical settings in the future. Here, we summaries a few seminal foundational studies that illustrate the value of traditional or innovative vascular imaging techniques (Figure 1).

Vasculature

The lack of predictive capacity in the current MRI techniques for the cardiovascular area hinders their ability to advise the demands of each unique patient. Leenders et al.6 investigated the effects of statin pleiotropic effects on modulating vascular permeability due to endothelial dysfunction following myocardial infarction (MI) in C57BL/6, atherosclerotic ApoE-/-, and statin-treated ApoE-/- mice using albumin-based dynamic contrast-enhanced (DCE) cardiac MRI. When the permeability surface area product or slope of the concentration curve was normalized to blood concentration per minute, the albumin-based MRI approach made it possible to examine the healing processes following MI in mice in vivo and evaluate vascular permeability. After MI, ApoE-/- mice had significantly higher vascular permeability, as measured by permeability surface area product, on day 3 (inflammatory phase) compared to C57BL/6 mice. This was linked to left ventricular dilatation as determined by MRI volumetric analysis on day 21

(reparative phase). On the other hand, ApoE-/- mice treated with statins showed less hyperpermeability.

According to tissue research, ApoE-/-mice increased vascular permeability allowed leukocytes and inflammatory monocytes to infiltrate; this effect was equally abolished by statin therapy. These findings suggest that DCE-MRI for permeability mapping may aid in the early detection of heart failure in high-risk MI patients. Research that examined the functions of tissue TG2 (two transglutaminase isoenzymes) and Factor XIII, which are crucial in controlling vascular permeability and maternal angiogenesis in mice during the early stages of pregnancy, also selected the DCE-MRI method. In mice containing transgenic embryonic trophoblast cells with overexpression of TG2 or FXIII, DCE-MRI was useful for measuring vascular permeability as measured by permeability surface area and vessel densities, which are defined as the volume fraction inside the capillary bed (fraction blood volume)8. Curaj et al.9 presented JAM-A (junctional adhesion molecule A) as a target for molecular ultrasound imaging of early endothelium dysregulation under acute blood flow fluctuations as an alternate technique for evaluating endothelial function. When utilized as a contrast agent for ultrasound imaging, JAM-A-targeted poly (n-butyl cyanoacrylate) microbubbles were discovered to have a particular binding affinity for JAM-A on activated endothelium. Thus, poly (n-butyl cyanoacrylate) microbubbles targeted by JAM-A were helpful in locating the vascular region where endothelial dysfunction was present.

Table 2: Results of Test Statistics

	Innovations	Vascular Imaging	Treatment of Carotid Artery Disease	
Chi-Square	20.440ª	17.080ª	10.720ª	
Df	2	2	2	
Asymp. Sig.	.000	.000	.005	

The above results of table 2 represent the chi square analysis result demonstrate that chi square value also that significant value of each variable. the chi square rate of innovation is 20.440, the vascular imaging

value is 17.080 the treatment of carotid artery disease is 10.720 respectively. Overall significant value is 0.000 shows that 100% significant level between them. The big arteries on either side of the neck narrow in carotid artery

stenosis. The brain, face, and head are supplied with blood via these arteries.

Atherosclerosis, or a buildup of plaque on the interior of the arteries, is typically the cause of the constriction. Stenosis can progress to total arterial blockage over time. Age, smoking, high blood pressure, diabetes, obesity, and a sedentary lifestyle are risk factors for carotid artery stenosis. Blurred vision, dizziness, and fainting are possible symptoms for some patients with carotid artery stenosis. These might indicate insufficient blood flow to the brain. A transient ischaemic attack (TIA) or stroke is frequently the initial symptom. A little blood clot may develop in the atherosclerosis-narrowed artery. It is possible for the clot to come loose and enter the brain. Once there, it has the potential to block a smaller artery that is essential to the brain's survival and operation.

The symptoms of a stroke and a TIA are similar: headache, impaired vision, difficulty speaking, difficulty responding to others, and paralysis or numbness on one side of the body. A TIA typically lasts for a short time and causes no permanent harm. It results from a brief blockage of a tiny artery. This is frequently a red flag. Because of the interruption of blood flow, a stroke is frequently linked to irreversible damage to a portion of the brain. Death or mild to severe impairment may follow from this.

Table 3: Result of NOVA^a

3	2 1.424	1 3.4	.039 ^b
		5.4	01 .039
2	409 .409		
30 4	19		
	0 d Disease		

The above results of table 3 demonstrate that regression model and residual model of each variable result describe sum of square value, the mean square value the F rate and significant rate of each model. The sum of square related to the regression is 2.848 the mean square value is 1.424 the significant rate is 0.039 its shows that 3% positive significant level between them. the residual model shows that 40% mean square rate of each factor. The primary blood vessels that provide blood and oxygen to the brain are the carotid arteries. The condition known as carotid artery stenosis occurs when these arteries narrow. Another name for it is carotid artery stenosis. Atherosclerosis is the cause of the narrowing. This is the

accumulation of waste products, calcium, and fatty materials inside the arterial walls. Carotid artery stenosis is comparable to coronary artery disease, which is characterized by accumulation in the heart's arteries and can result in a heart attack. The brain receives less oxygen when there is carotid artery stenosis. To function, the brain needs a steady flow of oxygen. Problems might arise with even a short interruption in the blood flow. After only a few minutes without blood or oxygen, brain cells begin to die. A stroke may result from carotid artery constriction that is severe enough to obstruct blood flow. Blood flow to the brain may also be obstructed if a fragment of plaque breaks off.

Tale 4: Result of Coefficients^a

Model		Unstandardized	Coefficients	Standardized Coefficients	T	Sig.
		В	Std. Error	Beta		
1	(Constant)	1.692	.356		4.751	.000
	Innovations	.277	.150	.254	1.846	.071
	Vascular Imaging	245	.151	223	-1.623	.111

The above results of table 4 represent that linear regression analysis related to the innovation, vascular imaging and treatment of carotid artery disease. The result demonstrates that unstandardized coefficient values and standardized coefficient value of each independent factor. The result also describes that t statistic value and significant value of each variable. The innovation is amin independent variable result demonstrate that its beta value is 0.277 the standard error rate is 0.150 the t statistic value is 1.846 the significant value is 0.071 its shows that positive and 7% significant value between them. the vascular imaging represent that its t statistic value is -1.623 the significant rate is 0.111 shows that negative but its 11% significant level between them.

CONCLUSION

We discussed about the latest advancements in tissue engineering applications of vascular imaging techniques. Despite being costly and large, CT and MRI are still used in clinical settings because of their ability to provide high-resolution structural and functional vascular imaging with contrast agents. Although the USI can be used for clinical research, its limited uses for microvascular imaging are due to its low spatial resolution ("30 μ m) and lack of functional information. Only total hemoglobin concentration (HbT) can be measured by OPSI; inadequate SNR makes Hb oxygen saturation (SO2) difficult for both 2PFM and OPSI to measure. Due to its distinct advantages and disadvantages, SV- and PV-OCT are both

beneficial in many preclinical and clinical settings. However, in order to obtain high resolution imaging in a large volume, both need to be improved to reduce the artefacts caused by bulk tissue motion and vessel shadowing. PAT has the potential to become a widely used tool for microvascular characterization and imaging. Nevertheless, there are a number of obstacles and urgent tasks to make it an even better tool for clinical applications: agents or effective imaging methods are required to further enhance it; and (c) the PA signal is dependent on the optical absorption coefficient and local fluence. Accurate compensation of the local fluence is necessary to make it a reliable quantitative measuring instrument.

After an overview of these aspects of the important implications of innovations in vascular imaging for enhancing the diagnosis and treatment of Carotid Artery Disease, we can say that vascular Imaging has made an important place in the diagnostic department of healthcare sectors in a very short period of time.

(a) creating a portable, miniature PAI system; (b) even though deep-vascular imaging was made possible by NRI wavelengths, (b) exogenous contrast

REFERENCES

- M. J. Suter *et al.*, "Intravascular optical imaging technology for investigating the coronary artery," *JACC: Cardiovascular Imaging*, vol. 4, no. 9, pp. 1022-1039, 2011.
- B. Godin, J. H. Sakamoto, R. E. Serda, A. Grattoni, A. Bouamrani, and M. Ferrari, "Emerging applications of nanomedicine for the diagnosis and treatment of cardiovascular diseases," *Trends in pharmacological sciences*, vol. 31, no. 5, pp. 199-205, 2010.
- B. K. Courtney *et al.*, "Innovations in imaging for chronic total occlusions: a glimpse into the future of angiography's blindspot," *European heart journal*, vol. 29, no. 5, pp. 583-593, 2008.
- G. Zhu *et al.*, "Carotid plaque imaging and the risk of atherosclerotic cardiovascular disease," *Cardiovascular diagnosis and therapy*, vol. 10, no. 4, p. 1048, 2020.
- N. Nighoghossian, L. Derex, and P. Douek, "The vulnerable carotid artery plaque: current imaging methods and new perspectives," *Stroke*, vol. 36, no. 12, pp. 2764-2772, 2005.
- S. B. Feinstein, "Contrast ultrasound imaging of the carotid artery vasa vasorum and atherosclerotic plaque neovascularization," *Journal of the American College of Cardiology*, vol. 48, no. 2, pp. 236-243, 2006.
- V. L. Rowe and S. W. Tucker, "Advances in vascular imaging," Surgical Clinics, vol. 84, no. 5, pp. 1189-1202, 2004.
- L. M. Gettle and M. V. Revzin, "Innovations in vascular ultrasound," *Radiologic Clinics*, vol. 58, no. 4, pp. 653-669, 2020.
- I. Alradwan *et al.*, "Emerging Trends and Innovations in the Treatment and Diagnosis of Atherosclerosis and Cardiovascular Disease: A Comprehensive Review towards Healthier Aging," *Pharmaceutics*, vol. 16, no. 8, p. 1037, 2024.
- R. Shi and S. Babu, "Modern approaches and innovations in the diagnosis and treatment of peripheral vascular diseases," *Frontiers in Bioscience-Scholar*, vol. 13, no. 2, pp. 173-180, 2021.
- R. Frantz, C. Nischwitz, T. Compton, and L. Gordillo, "Modeling the Spread of Curly Top Disease in Tomatoes," *Letters in Biomathematics*, vol. 10, no. 1, pp. 53–61, 2023.

- J. Csore, M. Drake, and T. L. Roy, "Peripheral arterial disease treatment planning using noninvasive and invasive imaging methods," *Journal of Vascular Surgery Cases, Innovations* and *Techniques*, vol. 9, no. 4, p. 101263, 2023.
- E. David *et al.*, "New technologies in the assessment of carotid stenosis: Beyond the color-Doppler ultrasound—High frame rate vector-flow and 3D arterial analysis ultrasound," *Diagnostics*, vol. 13, no. 8, p. 1478, 2023.
- A. Ismail *et al.*, "Carotid artery stenosis: a look into the diagnostic and management strategies, and related complications," *Cureus*, vol. 15, no. 5, 2023.
- A. Kordzadeh, A. Askari, O. A. Abbassi, N. Sanoudos, V. Mohaghegh, and H. Shirvani, "Artificial intelligence and duplex ultrasound for detection of carotid artery disease," *Vascular*, vol. 31, no. 6, pp. 1187-1193, 2023.
- W. Li *et al.*, "Precise diagnosis of cardiac-cerebral vascular diseases with magnetic resonance imaging-based nanoprobes," *iRADIOLOGY*, 2024.
- F. Liu, Y. Yao, B. Zhu, Y. Yu, R. Ren, and Y. Hu, "The novel imaging methods in diagnosis and assessment of cerebrovascular diseases: an overview," *Frontiers in Medicine*, vol. 11, p. 1269742, 2024.
- V. S. Manubolu, K. Ichikawa, and M. J. Budoff, "Innovations in cardiac computed tomography: Imaging in coronary artery disease," *Progress in Cardiovascular Diseases*, 2024.
- L. Saba *et al.*, "State-of-the-art CT and MR imaging and assessment of atherosclerotic carotid artery disease: standardization of scanning protocols and measurements a consensus document by the European Society of Cardiovascular Radiology (ESCR)," *European radiology*, vol. 33, no. 2, pp. 1063-1087, 2023.
- L. Shariati *et al.*, "Nanobased platform advances in cardiovascular diseases: Early diagnosis, imaging, treatment, and tissue engineering," *Environmental Research*, p. 116933, 2023.
- 21. Y. Chaiter, D. L. Fink, and Y. Machluf, "Vascular medicine in the 21st century: Embracing comprehensive vasculature

evaluation and multidisciplinary treatment," *World Journal of Clinical Cases*, vol. 12, no. 27, pp. 6032-6044, 2024.

- M. de Oliveira Laterza Ribeiro, V. M. Correia, L. L. Herling de Oliveira, P. R. Soares, and T. L. Scudeler, "Evolving diagnostic and management advances in coronary heart disease," *Life*, vol. 13, no. 4, p. 951, 2023.
- J. Guimarães, J. de Almeida, P. L. Mendes, M. J. Ferreira, and L. Gonçalves, "Advancements in non-invasive imaging of atherosclerosis: future perspectives," *Journal of Clinical Lipidology*, 2023.
- Y. Guo et al., "The value of superb microvascular imaging and contrast-enhanced Ultrasound for the evaluation of neovascularization in carotid artery plaques," *Academic Radiology*, vol. 30, no. 3, pp. 403-411, 2023.
- J. Hedhli *et al.*, "Facing the Challenges of Peripheral Arterial Disease in the Era of Emerging Technologies," *JVS-Vascular Insights*, p. 100095, 2024.
- F. Perone *et al.*, "Role of cardiovascular imaging in risk assessment: recent advances, gaps in evidence, and future directions," *Journal of Clinical Medicine*, vol. 12, no. 17, p. 5563, 2023.
- J. M. Romero and M. Mossa-Basha, *Imaging of Cerebrovascular Disease, An Issue of Radiologic Clinics of North America, E-Book* (no. 3). Elsevier Health Sciences, 2023.
- A. Simoni *et al.*, "Innovative tool for automatic detection of arterial stenosis on cone beam computed tomography," *Applied Sciences*, vol. 13, no. 2, p. 805, 2023.
- H. W. West, K. Dangas, and C. Antoniades, "Advances in Clinical Imaging of Vascular Inflammation: A State-of-the-Art Review," *Basic to Translational Science*, vol. 9, no. 5, pp. 710-732, 2024.
- K. Yeung et al., "3-D Contrast-enhanced fusion ultrasound for accurate volume assessment of vessel lumen and plaque in carotid artery disease as compared with computed tomography angiography," *Ultrasound in Medicine & Biology*, vol. 50, no. 3, pp. 399-406, 2024.