

Appendix 1

1.5T MR imaging was performed with a Philips scanner (Achieva, Philips Healthcare, Best, Netherlands). The intravoxel incoherent motion (IVIM) diffusion imaging was based on a single-shot spin-echo type echo-planar sequence, with 15 b -values of 2, 0, 1, 15, 20, 30, 45, 50, 60, 80, 100, 200, 300, 600, and 800 s/mm^2 . Number-of-excitation (NEX) was 2 for all image acquisition. Spectral pre-saturation with inversion-recovery (SPIR) technique was used for fat suppression. Respiratory-gating was applied in all scan participants and resulted in an average repetition time (TR) of 1,600 ms, and the echo time (TE) was 63 ms. Other parameters included slice thickness =7 mm and inter-slice gap 1 mm, matrix =124×97, field of view (FOV) = 375 mm × 302 mm, number of slices =6.

3.0T MR imaging was performed with a Philips scanner (Ingenia, Philips Healthcare, Best, Netherlands). The IVIM diffusion imaging was based on a single-shot spin-echo type echo-planar sequence, with 16 b -values of 0 (NEX =5), 2 (NEX =5), 4 (NEX =1), 7 (NEX =1), 10 (NEX =1), 15 (NEX =1), 20 (NEX =1), 30 (NEX =1), 46 (NEX =1), 60 (NEX =3), 72 (NEX =1), 100 (NEX =1), 150 (NEX =1), 200 (NEX =1), 400 (NEX =2), and 600 (NEX =2) s/mm^2 . The default SPIR technique was used for fat suppression. The TR was 1,600 ms and the TE was 59 ms. Data was acquired with free breathing. Other parameters included slice thickness =7 mm and inter-slice gap =1.5 mm, matrix =123×124, FOV = 372 mm × 341 mm, number of slices =20.