

Artificial Intelligence in Medical Imaging André M. Carrington, PhD, MMath, PEng

A diffusion spectral image of a brain's white matter fibers, from the Human Connectome Project.

Agenda

* Introduction

* Some examples of my work

*** Research interests**

Artificial intelligence (AI) and machine learning

- * Acquiring "structural descriptions from examples" [1][2]
- * "for prediction, explanation, and understanding." [2]
- * Away from rules and substantive (parametric) models,
 i.e. statistics, toward patterns and empirical models [3]

Tasks for AI in medical imaging

Segment Register Denoise Extract Features Measure Inpaint Reconstruct Create Atlas Remove Artifacts/Bias

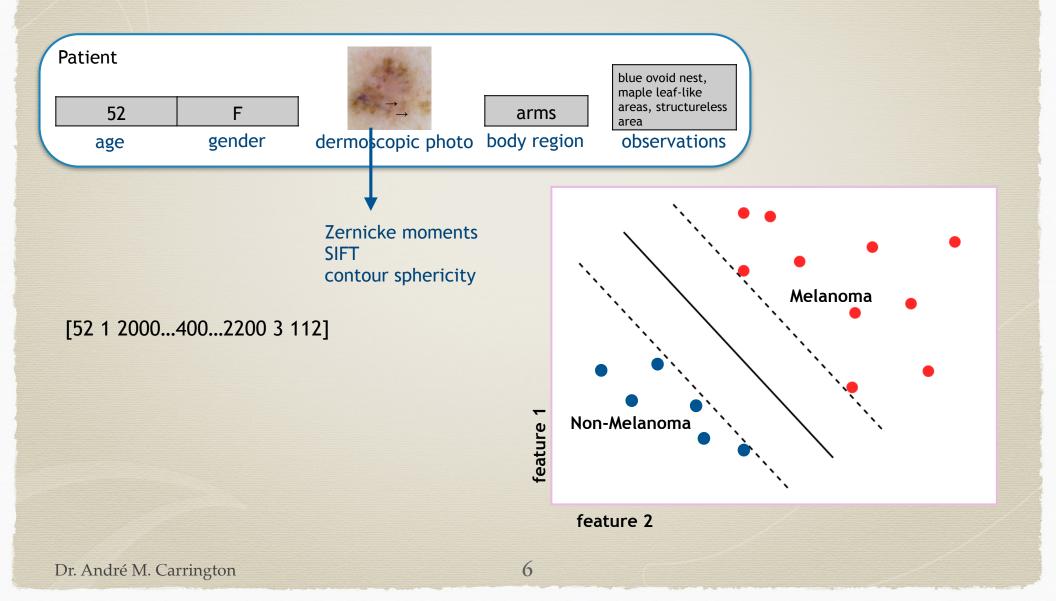
> Annotate Index Deidentify

Screen Detect Classify Identify ROIs and Slices Content Based Information Retrieval Detect Anomalies Estimate Prognostic Risk Identify Subgroups in Data Surgical Path Planning Assist Surgery (VR) Model Organs Generate Synthetic Data (deep fakes)

Some examples of my work

- * Melanoma classification
- * Lung tumor segmentation (CT)
- * Lung tumor features
- * Brain tissue classification (multimodal MRI)
- * Filtered back projection (CT)
- * Lung tissue simulation
- * Deep ROC analysis for screening and detection

Melanoma classification



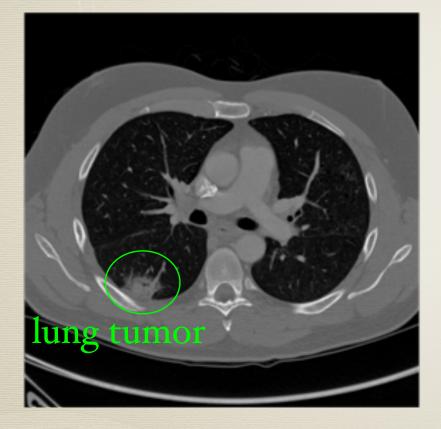
Melanoma classification accuracy[4]

Mean accuracy of support vector machines with various kernels

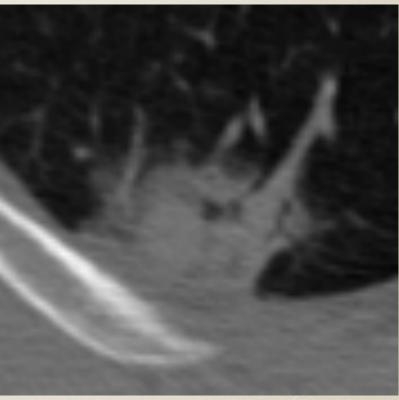
	Linear	Polynomial	Gaussian RBF	Sigmoid	Normalized Sigmoid	Mercer Sigmoid
Mean Accuracy	84.1	n/a	87.6	86.8	87.1	88.4
Standard Dev	0.42	n/a	0.52	0.76	1.0	0.66

29 experiments, 60 hyperparameter sets (random search) in 5 iterations of 10-fold cross-validation

Lung tumors in CT scans



Region of Interest



Computed Tomography images (from The Cancer Imaging Archive) are slices of 3-dimensional data reconstructed from radon transforms using filtered back projection. Dr. André M. Carrington 8

Segmentation with a Sobel edge filter yields broken contours





Dr. André M. Carrington

9

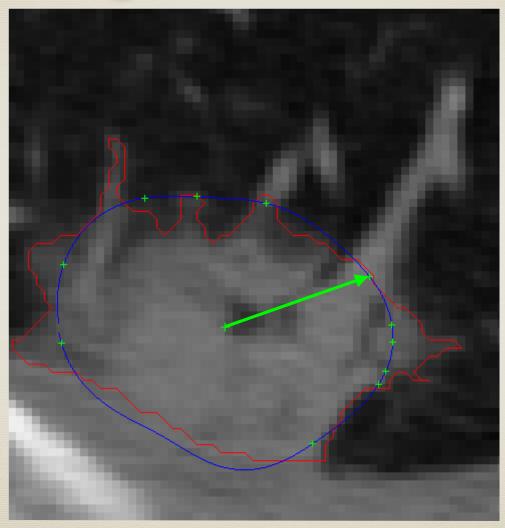
Chan and Vese's active contours without edges [5] using level sets

Contour at t=1.600 Contour at t=7.600 > >

Written from scratch in Matlab based on Chan and Vese's paper using level sets.

Dr. André M. Carrington

Lung tumor features

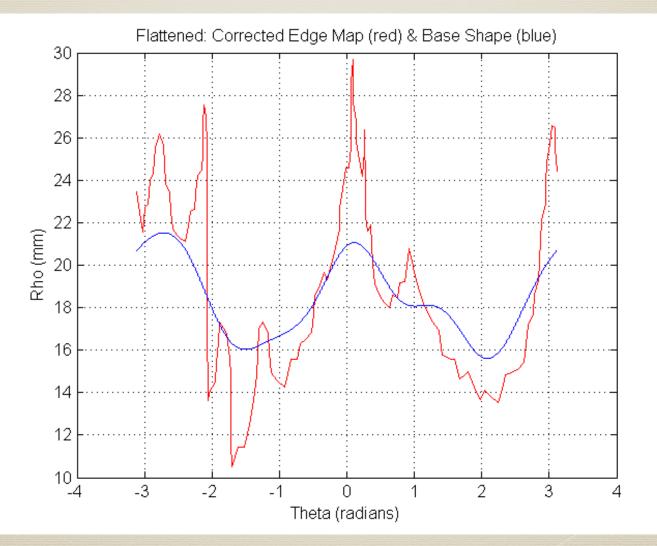


Red contour: radiologist

Blue contour: the extracted "base" (smooth) shape from the red contour

Uses my invention: polar Fourier descriptors

My invention unwraps the polar contour into a horizontal signal



Other lung tumor features

* Subjective measures from LIDC [6]:

- * lobulation, an ordinal
- * spiculation, an ordinal
- * radiographic solidity, a nominal
- * calcification, an ordinal

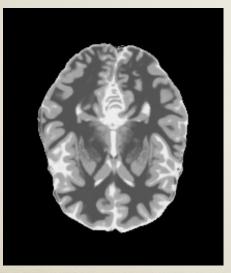
* Objective measures:

- * Sphericity [7]
- * Boyce-clarke shape index [8]
- * Spherical disproportion [9]
- * Spherical density [9]
- * Elongation [9]
- * Pondered radial distance [9]

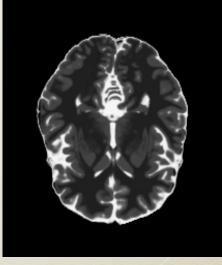
- * Volume [10]
- * Radius of equiv. sphere [10]
- * Max. Compactness [10]
- * Max. Circularity [10]
- * Max. Eccentricity [10]
- * Mean Gray Level [10]

MRI scans of a brain

* Find the white matter, gray matter, cerebrospinal fluid and fat from multimodal MRI data.







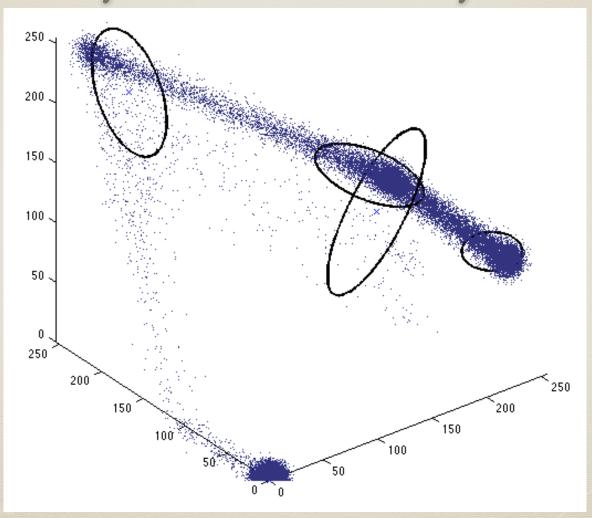
PD weighted

T1 weighted

T2 weighted

PD=proton density, T1=longitudinal relaxation time, T2=transverse relaxation time.

Plot the intensities from each modality then classify* tissues



*Wrote Gaussian mixture models with expectation maximization in Matlab (no built-ins)

Dr. André M. Carrington

Classification results



white matter

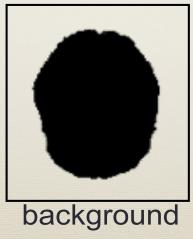


gray matter



cerebrospinal fluid



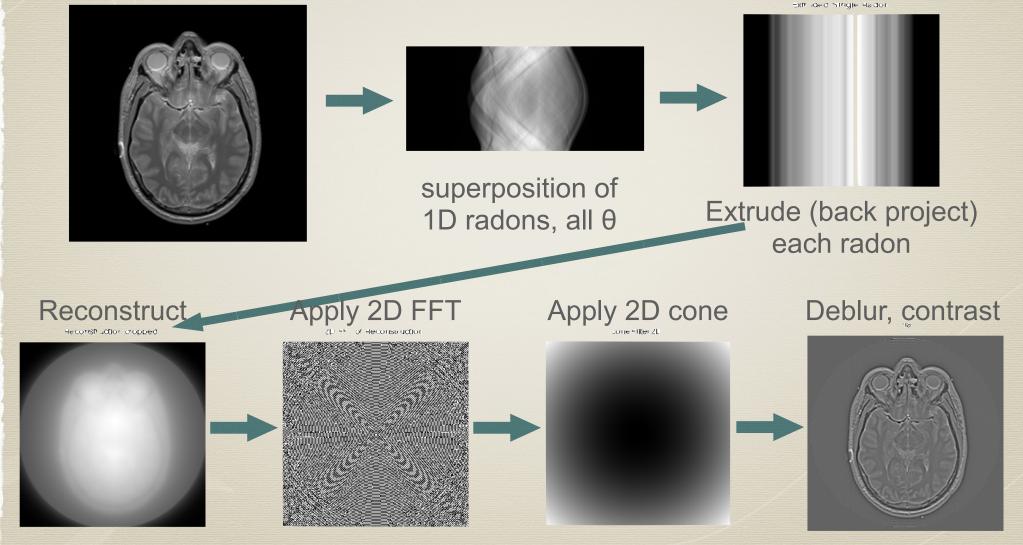


Filtered back-projection periments 2.5 × 10⁶ 0.5 1D radon, θ_1 1D Fourier, θ_1 superposition of superposition of 1D 1D radons, all θ Fouriers = 2D Fourier

Reconstruction #1: a simple back-projection sanity check



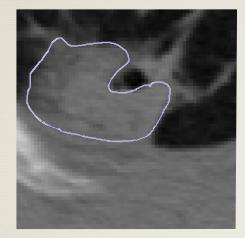
Reconstruction #2 with a 2D-cone filter: real back-projection

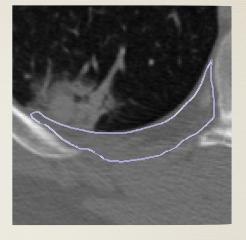


Dr. André M. Carrington

Skipping steps like padding and cropping.

Texture sampling of a tumor and the pleura (lung wall)

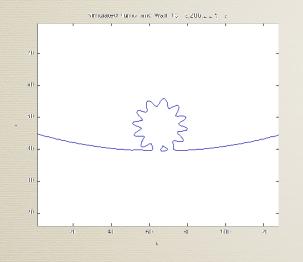


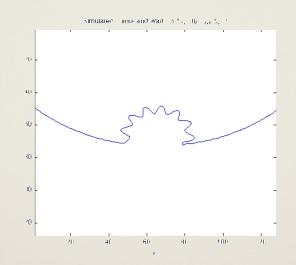


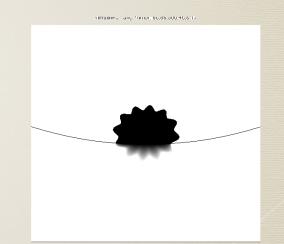




Simulated tumor, lung wall and gradient interaction

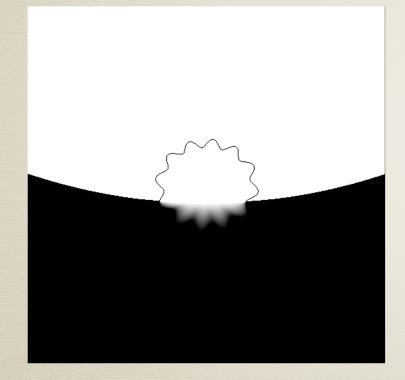






Application of texture to simulation

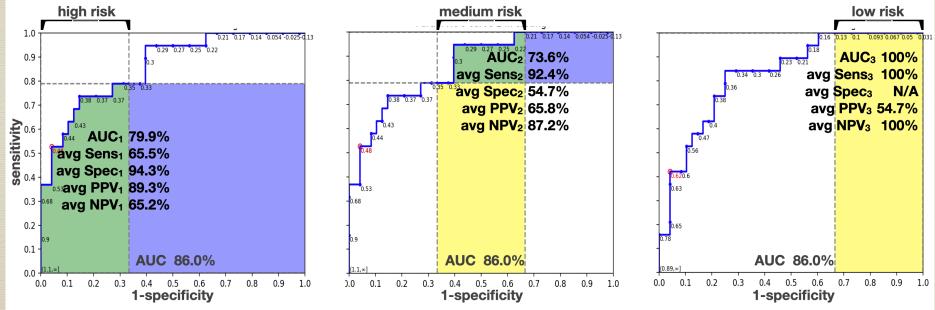
Strutated ing Wall 50,68,800,40,6



In ulated il is get

Deep ROC analysis to improve screening and detection

An ROC plot with three groups of predicted risk by specificity



http://www.deeproc.org

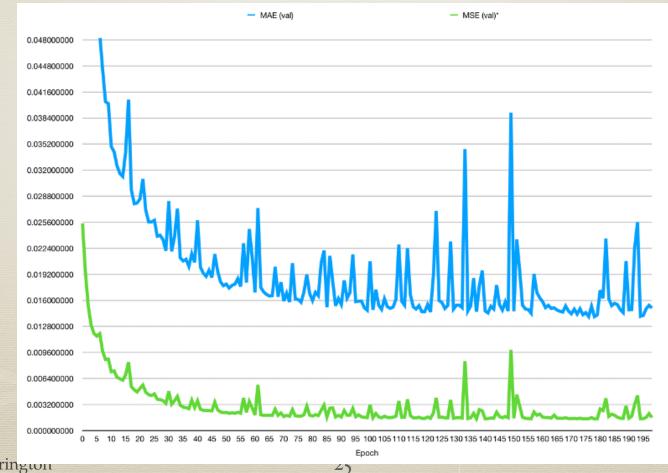
Unsupervised methods

* Practical experience with:

- * Maximum variance unfolding
- * Non-negative matrix factorization
- * Kernel supervised principal components analysis
- * Probabilistic latent components analysis
- * Principal components analysis

Deep autoencoders can help reduce the dimensionality of data

Using public use Canadian Community Health Survey data, 613 features for 130,880 patients were reduced to 60 features with 1.40% maximum absolute error using my own 8 layer denoising autoencoder with the Nadam optimizer.



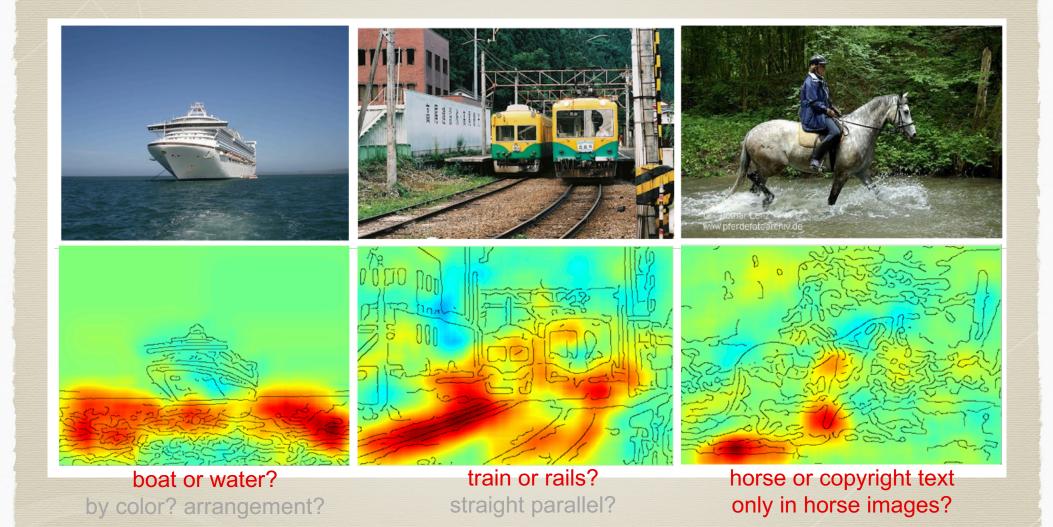
Research interests

- * Explainable AI
- * Data set quality
- * Performance measures and clinical utility
 * Recent applications of AI in medical imaging

eXplainable AI in imaging

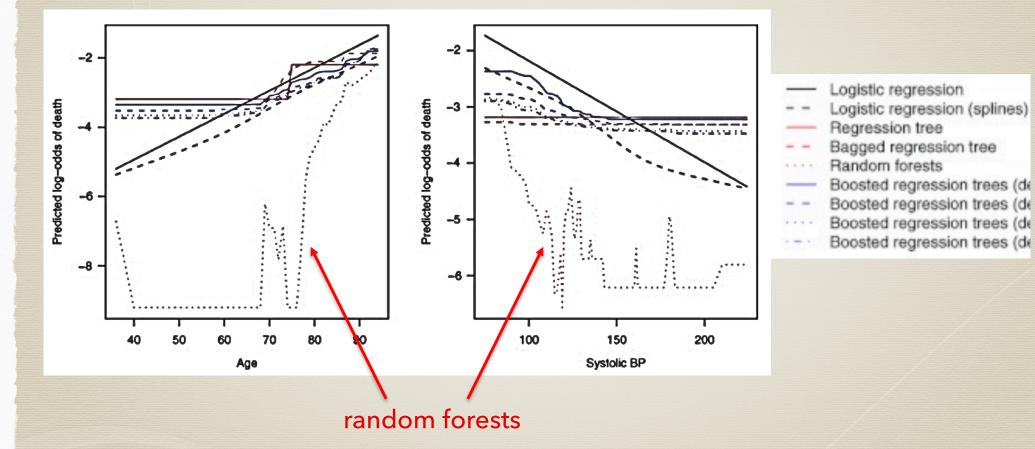
- Unsupervised learning extracts features that are sometimes intuitive
 - e.g. Maximum variance unfolding can extract or measure the amount of smiling on a face [11]
 - e.g. Local linear embedding can extract or measure the angle of a face [12,13]
- Saliency maps are sometimes intuitive explanations, but sometimes not (see next slide)

Unstable/improper features



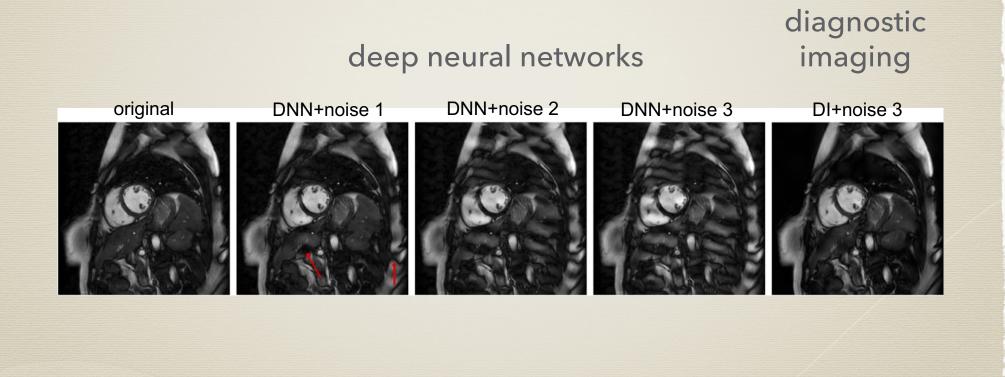
Lapuschkin et al. Unmasking Clever Hans Predictors and Assessing What Machines Really Learn. 2019

Unstable influence of a feature!



Austin et al. Regression trees for predicting mortality in patients with cardiovascular disease: What improvement...2012

Deep learning is often non-local: bad for image reconstruction [14]



References

- 1. McQueen, R. and Holmes, G. (1998) User perceptions of machine learning. AMCIS 1998 Proceedings, Paper 63.
- 2. Witten, Ian H and Frank, Eibe, Data Mining: Practical machine learning tools and techniques (Morgan Kaufmann, 2005).
- 3. Cox, David R. "Role of models in statistical analysis." Statistical Science 5, no. 2 (1990): 169-174.
- Carrington, A. M., Fieguth, P. W., & Chen, H. H. (2014). A new Mercer sigmoid kernel for clinical data classification. 2014 36th Annual International Conference of the IEEE Engineering in Medicine and Biology Society, EMBC 2014. <u>https://doi.org/10.1109/EMBC.2014.6945092</u>
- 5. Chan-Vese
- Armato III SG, McLennan G, Bidaut L, McNitt-Gray MF, Meyer CR, Reeves AP, Zhao B, Aberle DR, Henschke CI, Hoffman EA, Kazerooni EA. The lung image database consortium (LIDC) and image database resource initiative (IDRI): a completed reference database of lung nodules on CT scans. Medical physics. 2011 Feb;38(2):915-31.
- Wadell H. Volume, shape, and roundness of quartz particles. The Journal of Geology. 1935 Apr 1;43(3):250-80.
- 8. Boyce RR, Clark WA. The concept of shape in geography. Geographical review. 1964 Oct 1;54(4):561-72.

References

- da Silva Sousa JR, Silva AC, de Paiva AC, Nunes RA. Methodology for automatic detection of lung nodules in computerized tomography images. Computer methods and programs in biomedicine. 2010 Apr 1;98(1):1-4.
- Armato SG, Giger ML, Moran CJ, Blackburn JT, Doi K, MacMahon H. Computerized detection of pulmonary nodules on CT scans. Radiographics. 1999 Sep;19(5):1303-11.
- 11. Weinberger KQ, Saul LK. An introduction to nonlinear dimensionality reduction by maximum variance unfolding. InAAAI 2006 Jul 16 (Vol. 6, pp. 1683-1686).
- 12. Ghodsi A. Dimensionality reduction a short tutorial. Department of Statistics and Actuarial Science, Univ. of Waterloo, Ontario, Canada. 2006;37(38):2006.
- 13. Alipanahi B, Ghodsi A. Guided locally linear embedding. Pattern recognition letters. 2011 May 1;32(7):1029-35.
- 14. Antun V, Renna F, Poon C, Adcock B, Hansen AC. On instabilities of deep learning in image reconstruction and the potential costs of AI. Proceedings of the National Academy of Sciences. 2020 Dec 1;117(48):30088-95.

The End acarrington@toh.ca