



Intracranial aneurysm detection using deep learning

Presentation D1

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July 11, 2022

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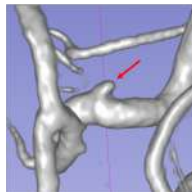
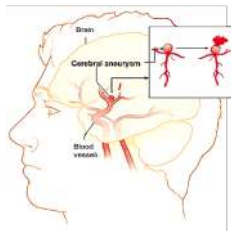
Overview

1. Context
2. Previous work
3. Recent works
4. Conclusion

Introduction

Intracranial aneurysm

- An abnormal localized bulge at the blood vessel surface (1-30mm, avg 6mm).
- **Prevalence:** 3 to 7% of the general population.
- **Reason:** weakness in the wall of the blood vessel.
- **Risk:** rupture → hemorrhage → high morbidity/mortality.



Introduction

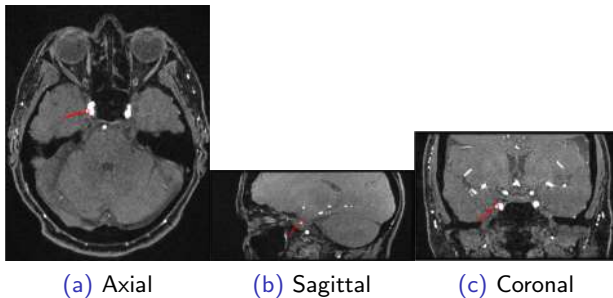


Figure: Slice axes

Introduction

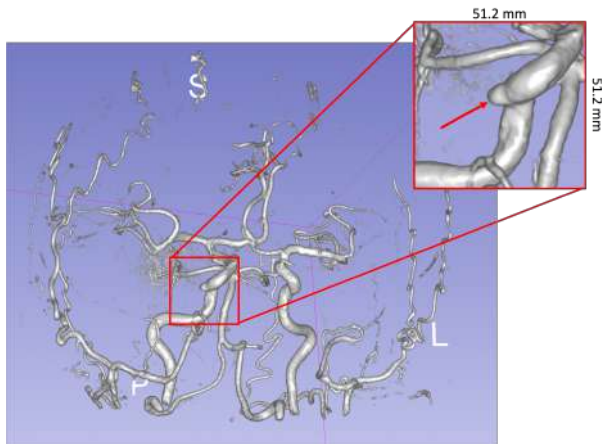


Figure: MRA¹ volume rendering (Aneurysm = 10^{-6} global volume)

¹Magnetic Resonance Angiography

Introduction

Challenges

- **Data scarcity**
 - Small and private data sets (patient privacy).
 - 1-2 aneurysms per patient.
- **Data annotation**
 - Labeling medical imaging is difficult and requires experts.
 - Time consuming.
- **Class imbalance**
 - Aneurysms are small structures in MRA data ($\approx 10/1\text{m}$ voxels).
- More computational power to process 3D volumes.

Previous work

Data annotation

Voxel-wise annotation

- Labeling each voxel of the aneurysm.
- Tedious and tainted with intra- and inter-rater variability.
- Hard and time consuming.



Our proposed annotation

- Approximate each aneurysm by a sphere defined by two points, the center of the neck and the dome.
- Rough but fast annotation.



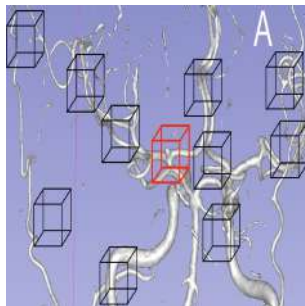
Previous work

Data selection

How to select patches ?

Vessel signal is also scarce: risk of detecting vessels vs background

- **Positive patches:** centered on each aneurysm.
- **Negative patches:** centered half on blood vessels and half on parenchyma.



Previous work

Data synthesis

Data synthesis

Class imbalance: few positive patches vs many negative patches.

- **Positive patches** are duplicated and deformed by a random distortion (3D cubic spline transform).

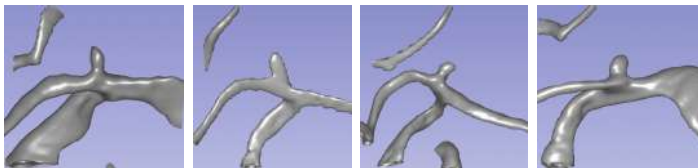
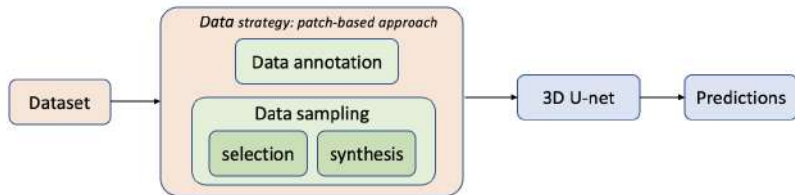


Figure: Generation of diverse aneurysm shapes

Previous work

Main idea: focus on data

- Simpler (and faster) data annotation: larger database.
- Small patch approach: less memory consumption.
- Guided patch selection: manage scarcity.
- Positive patch synthesis: handle class imbalance.



Previous work

5-fold cross-validation

- Sensitivity 0.82@0.61 FPs/case.
- ADAM top list:
 - abc: 0.68@0.40
 - mibaumgartner: 0.67@0.13
- FROC analysis: 0.80@0.40, 0.72@0.13 ($\text{AUC}^2=85.24\%$).

Recent works

Dataset

Data Quantity: 111 $\rightarrow$ 471 patients

- CHRU Nancy: +21 patients
- CHUV Lausanne³ 2021: +269 (/350) patients
- ADAM Challenge⁴ 2020: +70 (/113) patients

Improved annotation

- Refined annotations: Otsu thresholding



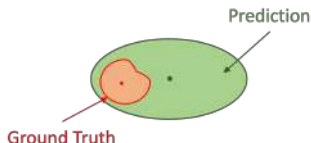
³Weak labels and anatomical knowledge: making deep learning practical for intracranial aneurysm detection in TOF-MRA, 2021

⁴<https://adam.isi.uu.nl>

Recent works

Evaluation - Metrics

- **Dice metric**
 - Adapted for segmentation tasks.
- **ADAM challenge**
 - Positive detection: if the candidate location coordinate is within the radius distance of the ground truth centre of mass location of the aneurysm.
- **Object detection tasks (computer vision papers)**
 - The Average Precision (AP) value for recall values.
 - Based on Intersection over Union (IoU).



Recent works

Network Architectures - Small aneurysm detection

Deep Supervised U-Net

- Small aneurysm signals are missed during the down-sampling operations.
- Forcing the decoder blocks outputs to yield a meaningful segmentation map according to the target image.

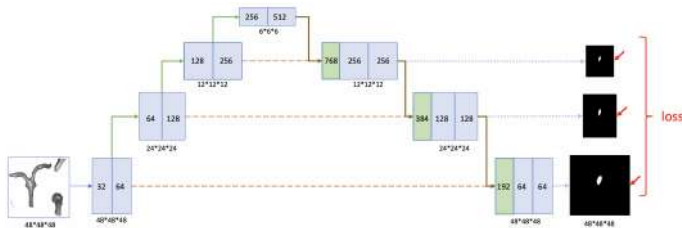


Figure: Deep Supervised U-Net ($\text{loss} = \sum_{i=1}^3 \text{loss}_i$)

Recent works

Network Architectures - Small aneurysm detection

Self-Attention mechanism U-Net

- Focus and place more "Attention" on the relevant parts of the high-level feature maps.

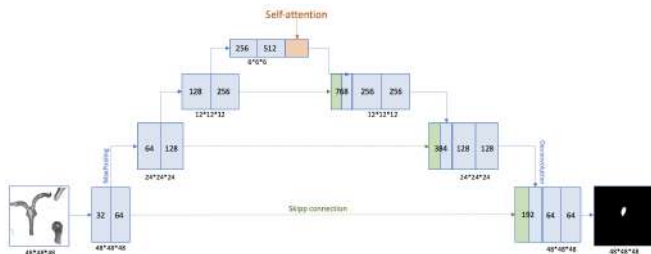


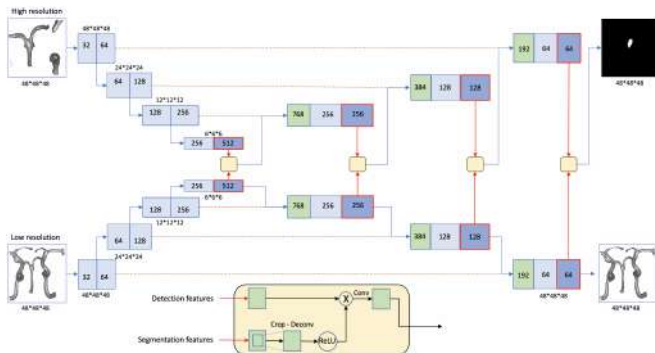
Figure: Self-attention U-Net

Recent works

Network Architectures - Contextual information

Dual U-Net with Attention mechanism

- Integrate information about the surface of the vessels surrounding the aneurysms.



Recent works

Results

- Network architecture: small impact on performance → Keep U-Net architecture.
- Equivalent results with nnU-Net⁵: AP = 80.24%.
- Less memory consumption & training time (20h vs 7days for nnU-Net).

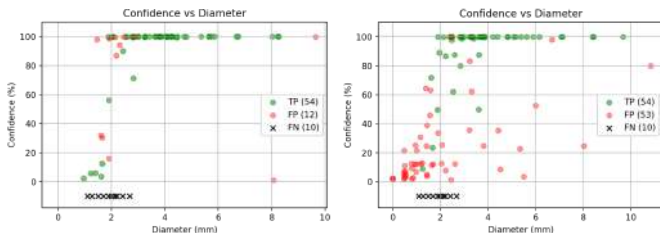


Figure: Performance of our method U-Net (left) vs nnU-Net (right)

⁵nnU-Net: a self-configuring method for deep learning-based biomedical image segmentation, Nature Methods, 1-9

Conclusion

- Approach that focuses only on data and achieves competitive results compared to state-of-the-art methods.
- Models explainability.
- Regression problems:
 - Predict bounding spheres with confidence score (e.g. YOLO).
 - Predict the associated main axis of each detected aneurysm.



Figure: Visualization of Patch Embeddings using UMAP⁶

⁶Uniform Manifold Approximation and Projection for Dimension Reduction, 2020