

# Computer Vision Project Prediction of Covid-19 infections with x-ray images

David Budgenhagen, Leonidas Devetzidis, Alexandru Barsan



# Agenda

- 1. Motivation
- 2. Why use Deep Learning for Medical Image Analysis?
- 3. The project
- 4. Dataset
- 5. Regularization
- 6. Architecture
- 7. Evaluation

# 1. Motivation



- Idea: Medical Image Analysis with Deep Learning
  - Help doctors to analyze, model and make sense of complex clinical data
  - Aim: Assign the patient to one of a small set of classes (Amato et al. 2013)
  - Not new: Medical Image Analysis exists since the 60s (edge and line detector filters) (Litjens et al. 2017)
- Today: sources from various medical procedures, such as CT, MRI, PET, and X-ray
- Typical applications:
  - Detections of structures (organs, body parts) (Lo et al., 1995)
  - Segmentation (cardiac and brain analyses, U-Net) (Ronneberger et al. 2015)
  - Image classification (disease is present or not with x-ray images) (Antony et al., 2016)

# 2. Why use Deep Learning for Medical Image Analysis?

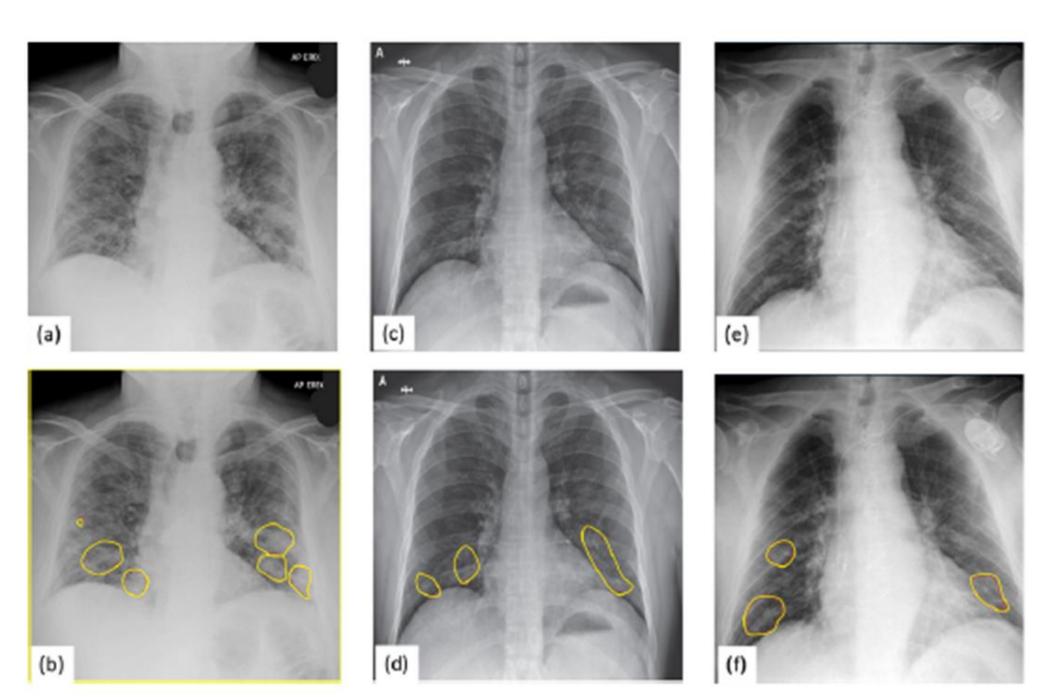


- Papers show that deep learning approaches exceed the accuracy of trained doctors:
  - Skin cancer detection, dermatologist with **66**% accuracy versus CNN with **72**% accuracy... (Esteva et al., 2017)
  - Once the neural networks are trained, debugged and fine tuned, the classification of images is a fast and easy to implement process.
  - During the COVID-19 outbreak real-time polymerase chain reaction was the standard method.
  - Problem: For ten thousands of people such an analysis cannot be carried out in a short time. Especially in countries without a good laboratory infrastructure (Zhang et al., 2020).
  - Chest X-ray is the most commonly used technique for diagnosing patients with thorax abnormalities, because it offers a fast and cheap imaging with low radiation (Self et al., 2013).

# 3. The Project



- Detect COVID-19 patients by classifying radiographic lung images
  - Clustering of viral pneumonia can often suggest a potential outbreak of COVID-19 infection
  - Very challenging for doctors to interpret correctly (Joarder & Crundwell, 2009) -> distinguish between different types of pneumonia
- There are approaches that have shown that the recognition of COVID-19 by X-ray images is possible and useful (Minaee et al., 2020 ;Zhang et al., 2020 )



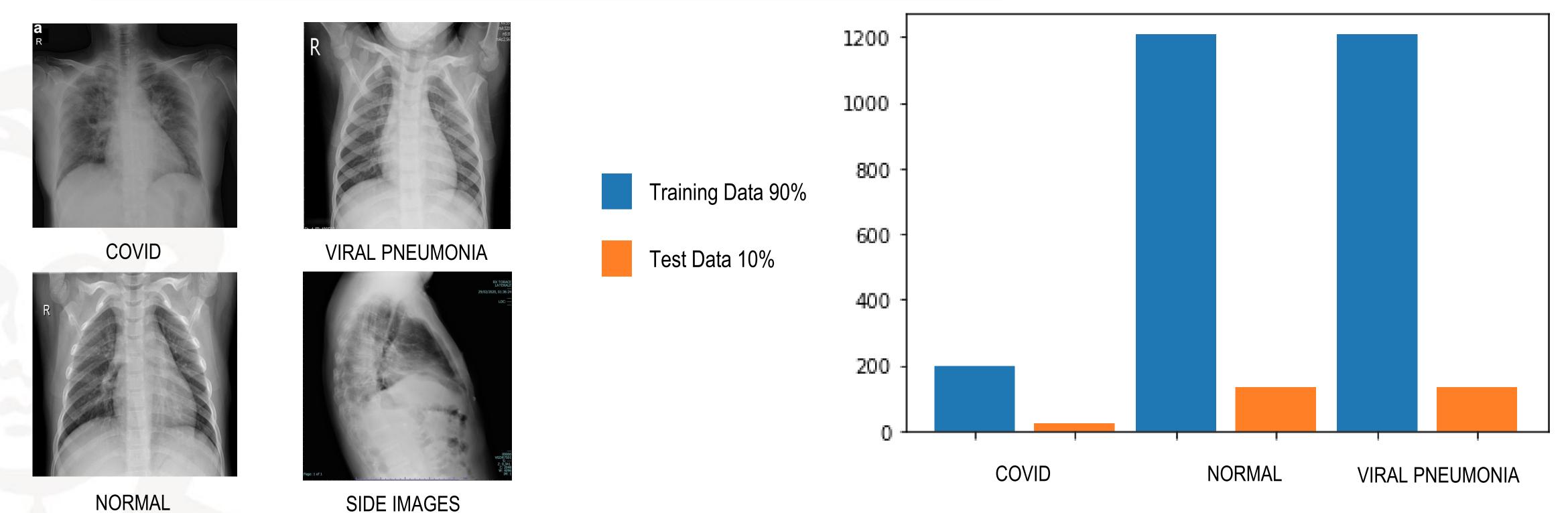
COVID-19 images and the corresponding marked areas by radiologist (Minaee et al., 2020)

https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7372265/

# 4. Dataset



- Initial Dataset:
  - https://www.kaggle.com/tawsifurrahman/covid19-radiography-database (version 1)
  - 219 COVID-19 positive images, 1341 normal images and 1345 viral pneumonia images
  - Cons: Low amount of covid images. Highly unbalanced dataset.



https://www.kaggle.com/tawsifurrahman/covid19-radiography-database

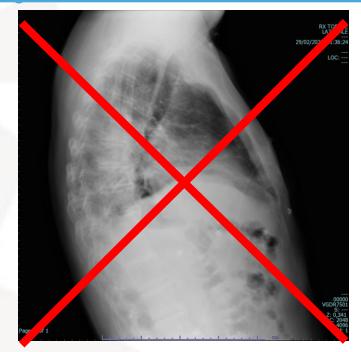
## 4. Dataset



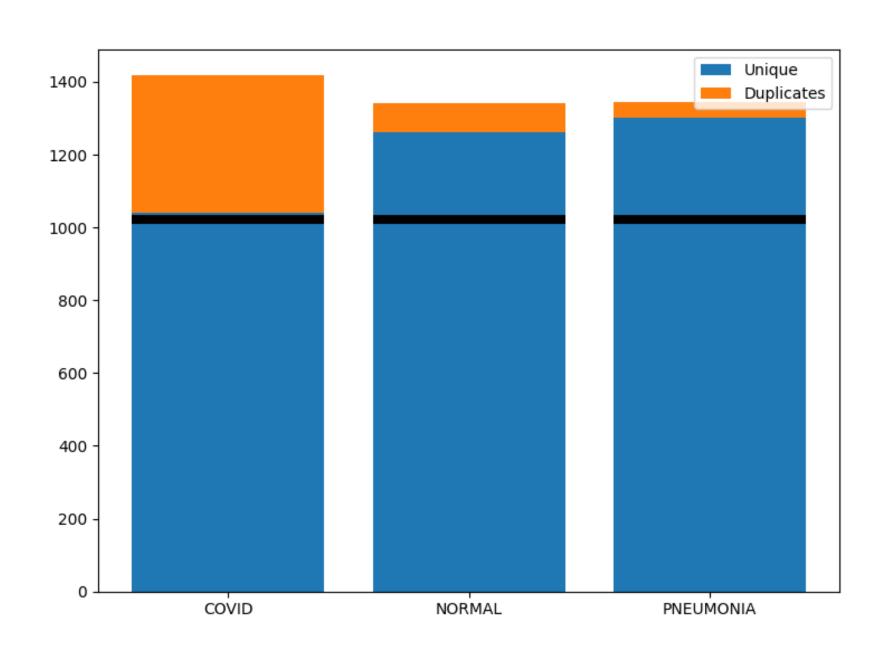
- Current Dataset:
  - <a href="https://www.kaggle.com/tawsifurrahman/covid19-radiography-database">https://www.kaggle.com/tawsifurrahman/covid19-radiography-database</a> (version 3)
  - 1200 COVID-19 positive images, 1341 normal images and 1345 viral pneumonia images
  - removed duplicates: image-hash comparison
  - removed side photos
  - balanced the dataset: uniform distribution -> 1028 images from each category



1. Input Image2. Hashing Function3. Image Fingerprinthttps://www.pyimagesearch.com/2017/11/27/image-hashing-opency-python/



SIDE IMAGES



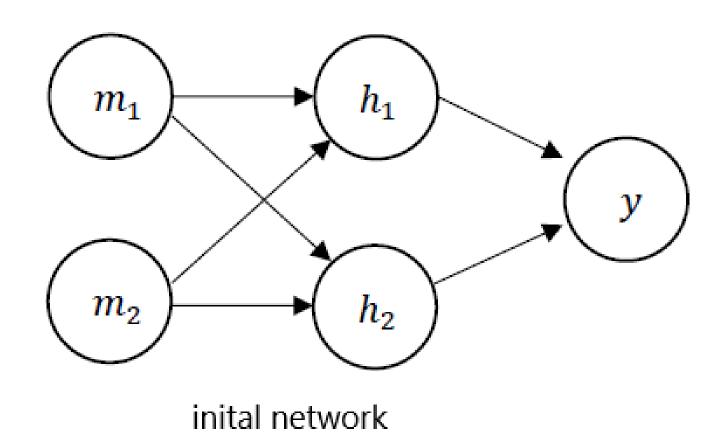
https://www.kaggle.com/tawsifurrahman/covid19-radiography-database

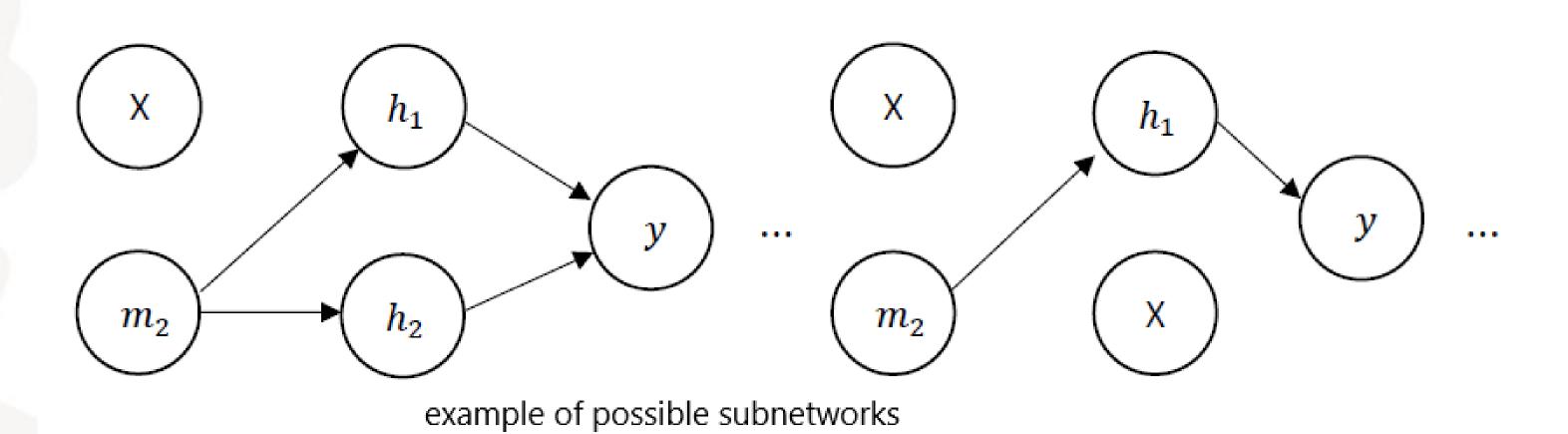




# 5. Regularization: Dropout



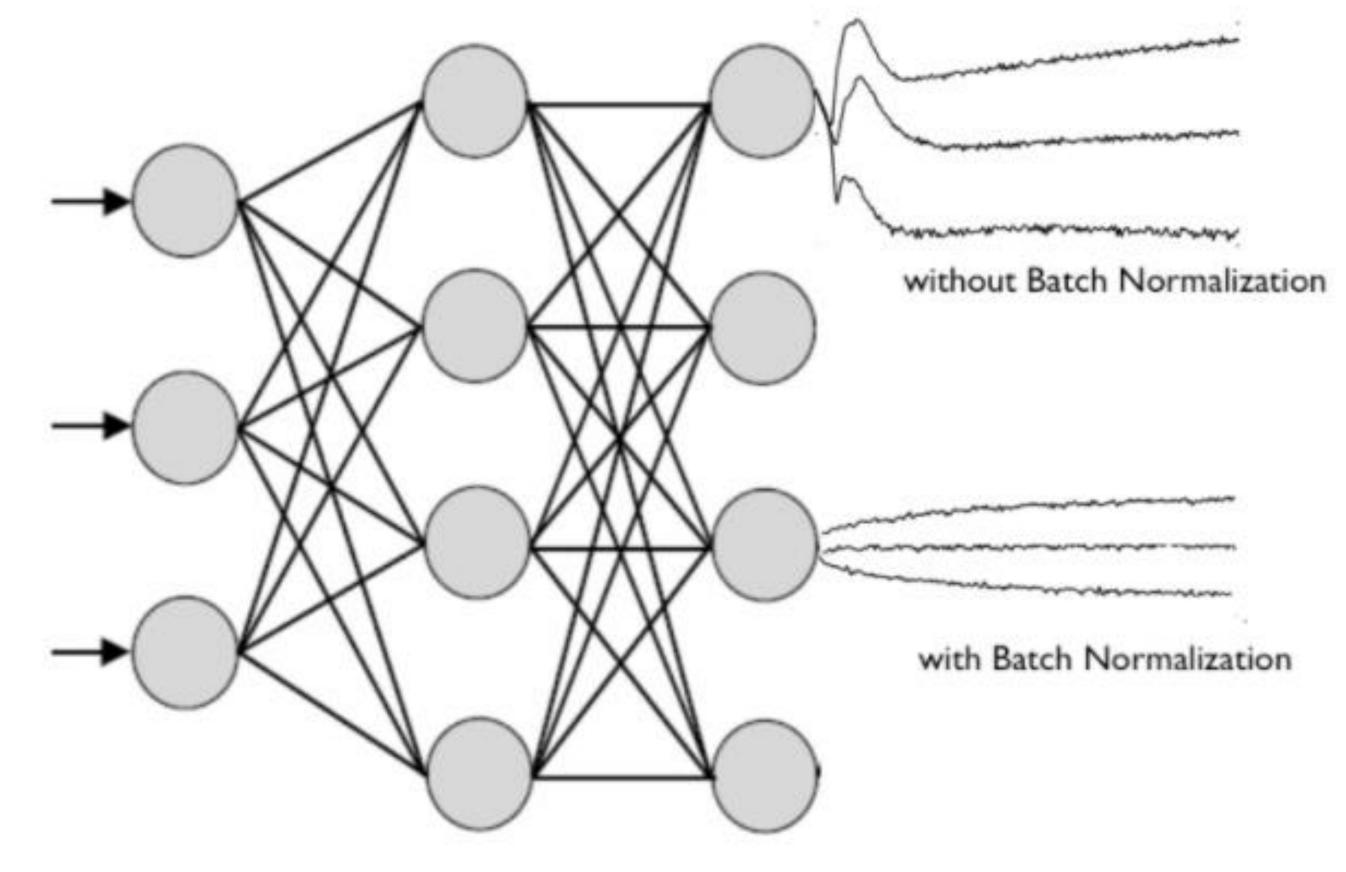




11. March 2021

## 5. Regularization: Batch Normalization





calculatedcontent.com





Augmentation operations and their probability of being applied to the image

Operation	Probability
Random Brightness	25%
Flip Vertical	25%
Random Rotation	25%
Random Shear	25%
Random Erasing	25%

## 5. Regularization: Data Augmentation





(a) Original image



(b) Random brightness



(c) Flip vertical



(d) Random rotation and crop



(e) Random shear and crop



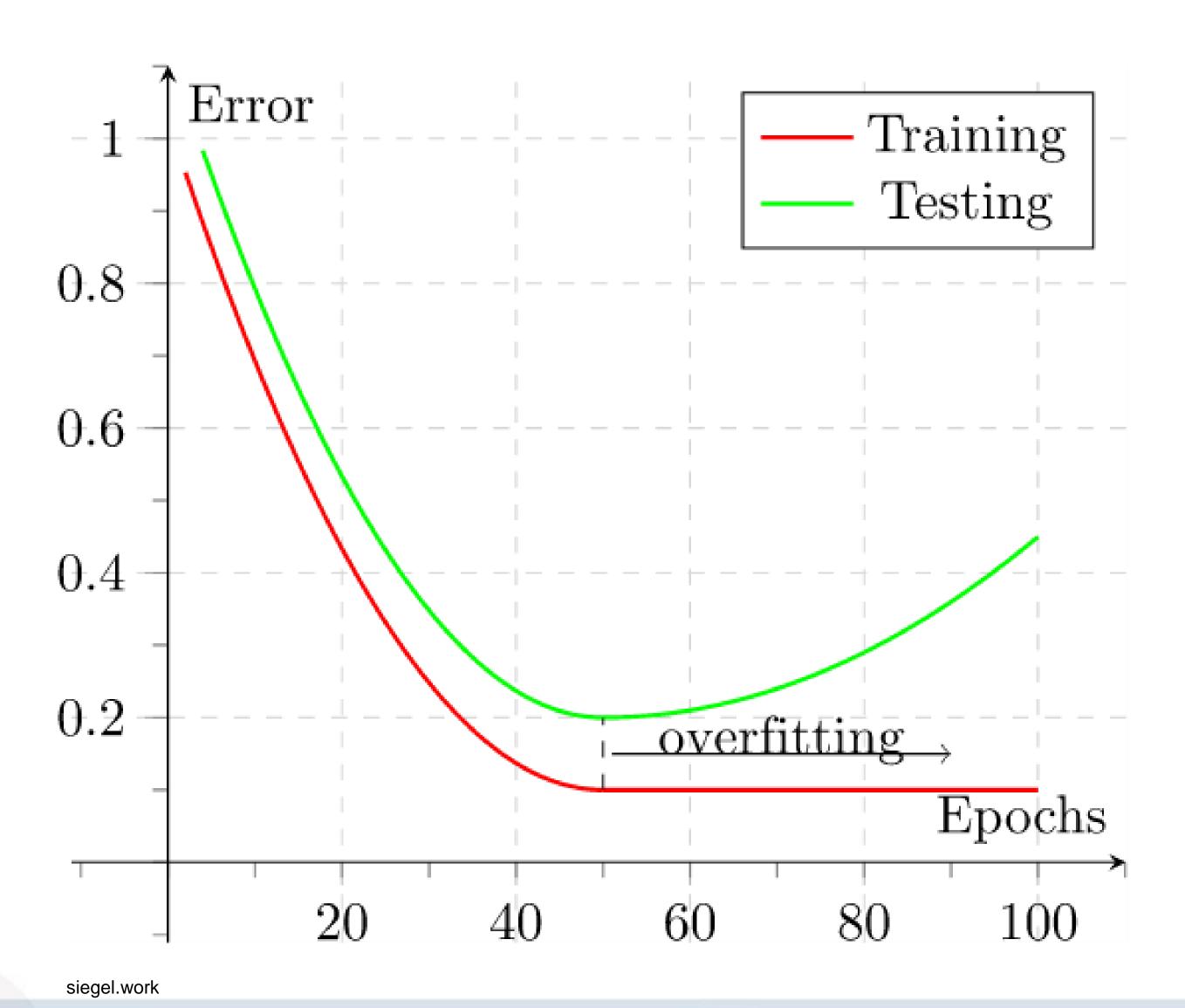
(f) Random erasing



(g) Chaining multiple operations

### 5. Regularization: Early stopping





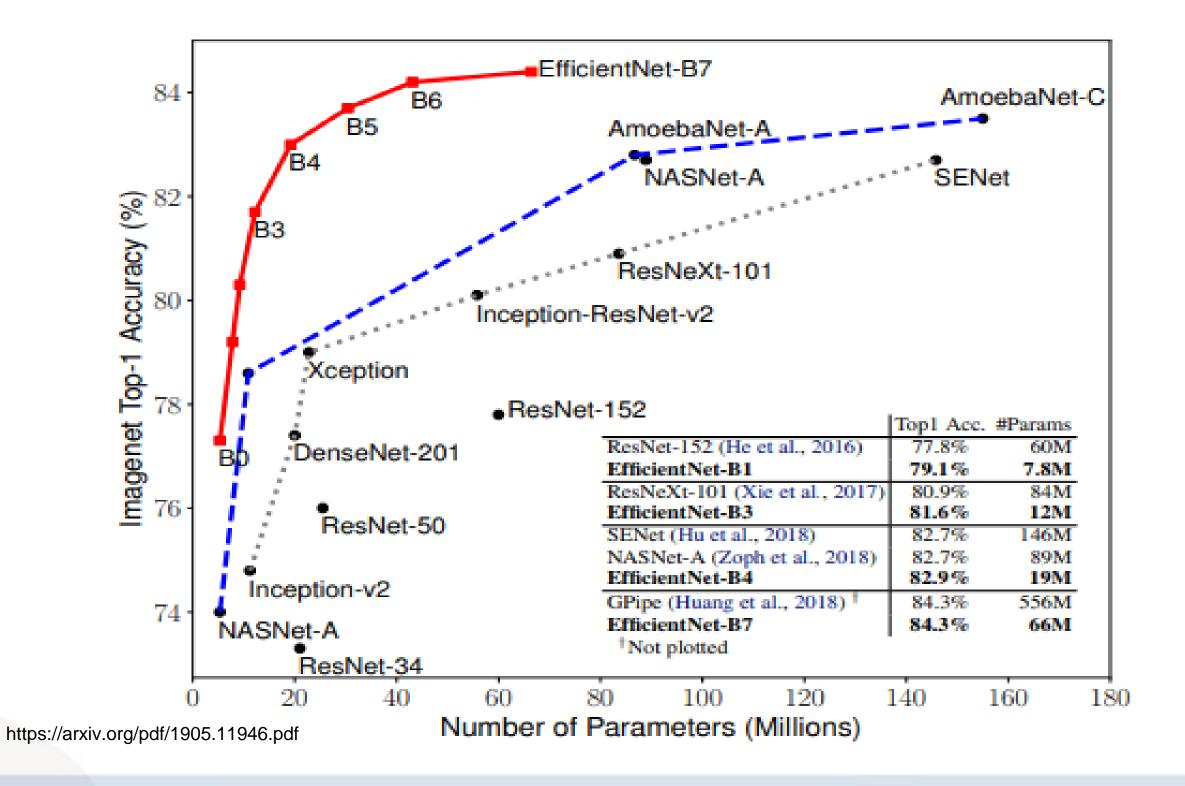




#### 6. Architecture: EfficientNet



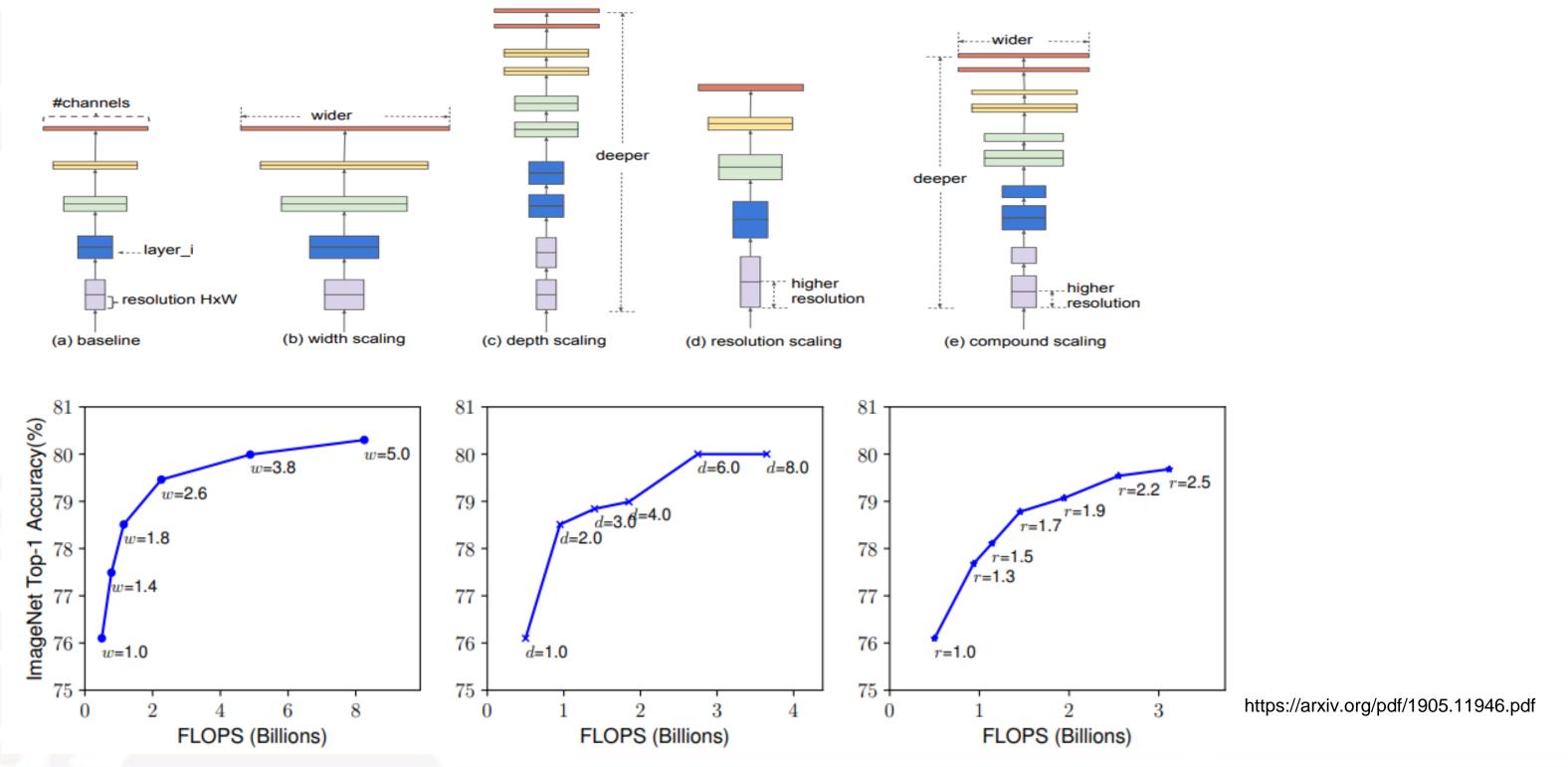
- Presented by Tan and Le in 2019
- Their study comprises compound scaling method that efficiently scales network to achieve better performance
- Model resulted in state-of-the-art 84.4% top-1 accuracy on ImageNet while being 8.4x smaller and 6x times faster on inference than the best existing convolutional model.



#### 6. Architecture: EfficientNet



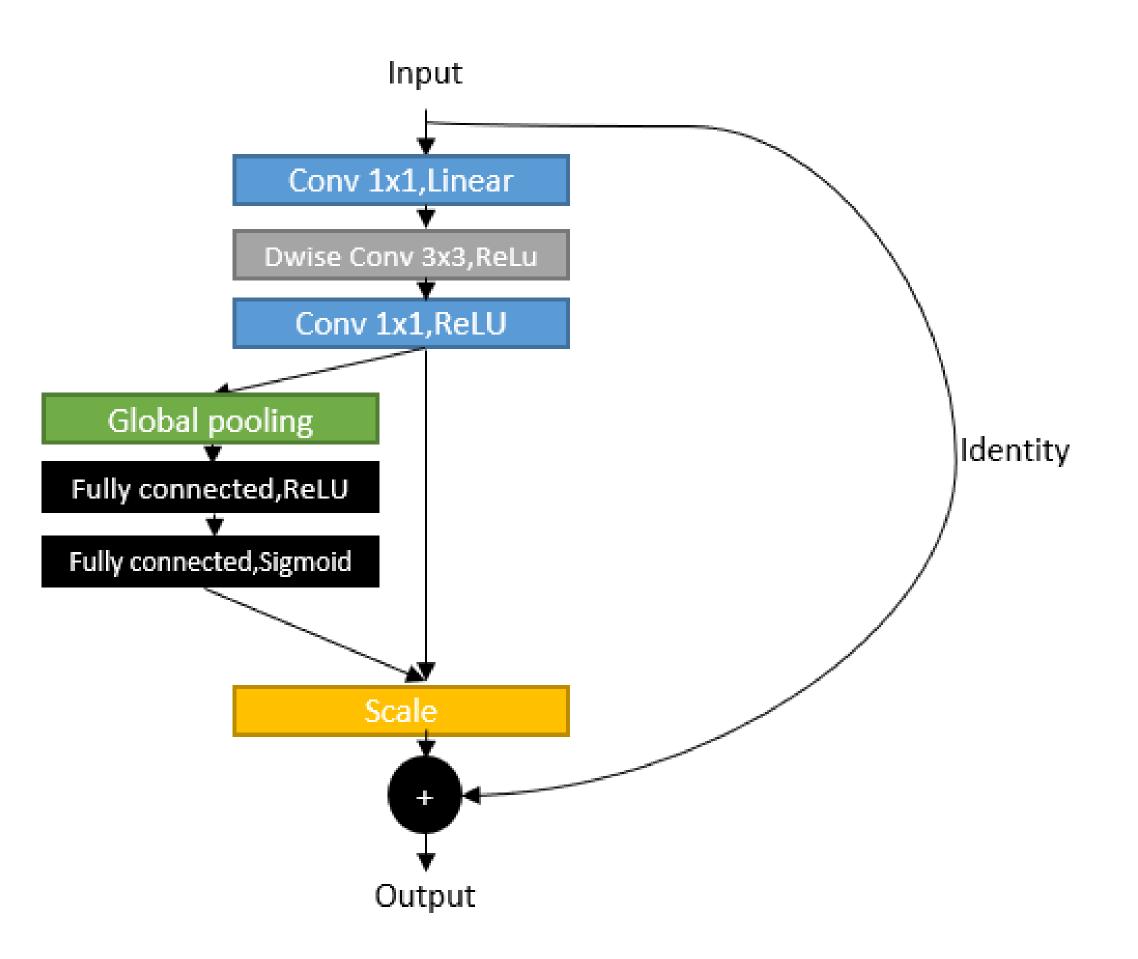
- Conventional methods arbitrary scale either the width, depth or the resolution
- In contrast, EfficientNets scale all the factors uniformly with a set of fixed scaling coefficients
- Authors observed: scaling up any dimension of the network separately improved accuracy, but the accuracy-gain diminished as the model increased



#### 6. Architecture: EfficientNet



#### **MBConv block**









#### 7. Evaluation: Model Summary



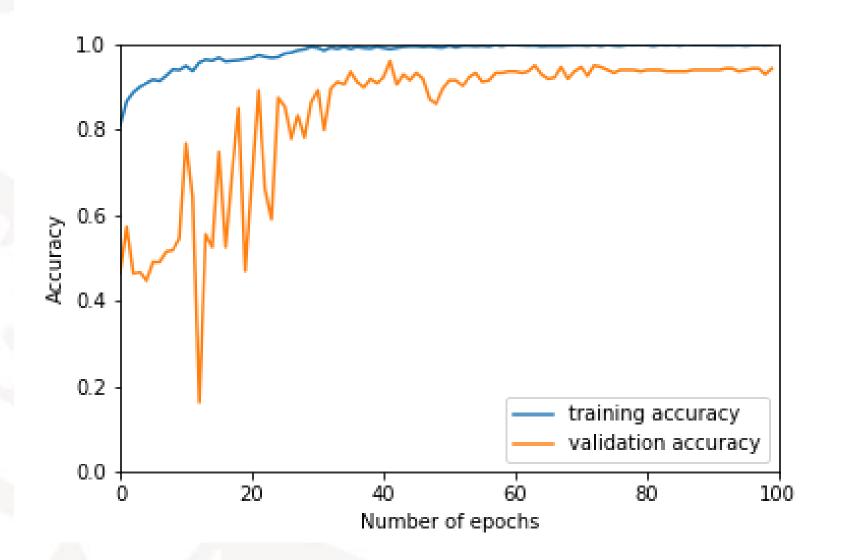
- For the experiments we trained several models for 100 epochs and measured their performance.
- All models trained with Adam optimizer and inital learning rate of 0.001.
- Varying batch-sizes & image resolutions

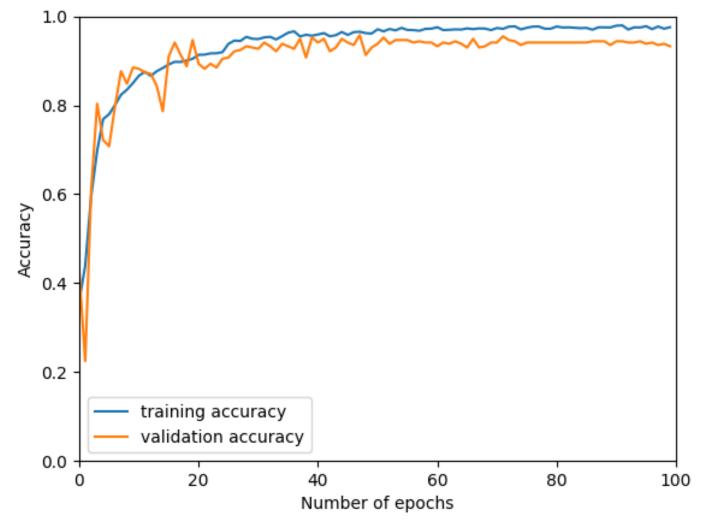
Model	Input resolution	Batch size	Regularization
Naive CNN with 5 layers	300x300	64	X
EfficientNetB7	600x600	4	<b>✓</b>
EfficientNetB7	360x360	16	<b>√</b>
EfficientNetB7	475x475	8	<b>√</b>

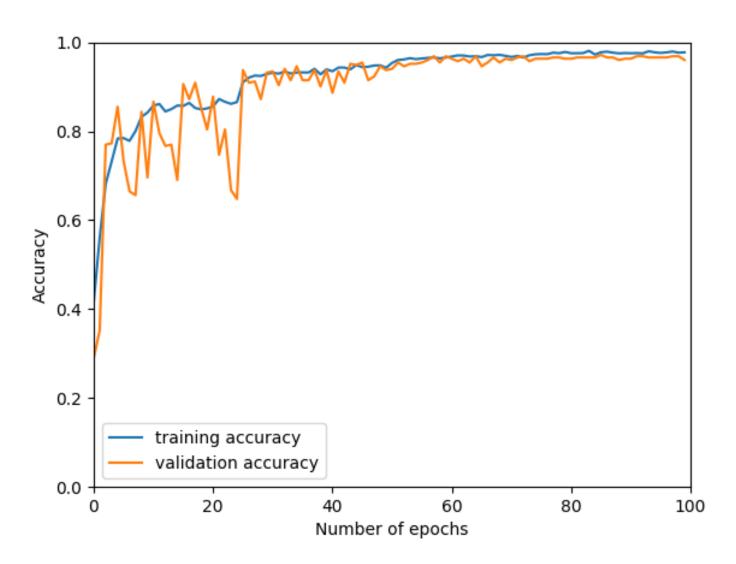




Model	Input size	Batch size	Validation Accuracy
Naive CNN with 5 layers (left)	300x300	64	91.43% (epoch 42)
EfficientNetB7 (middle)	600x600	4	95.79% (epoch 47)
EfficientNetB7	360x360	16	96.88% (epoch 46)
EfficientNetB7 (right)	475x475	8	97.16% (epoch 80)







#### 7. Evaluation: Metrics



EfficientNetB7 600x600 Batch size 4	Precision	Recall	F1-Score	Support
Normal	0.99	0.98	0.99	103
Corona	0.86	1.00	0.92	126
Pneumonia	0.98	0.83	0.90	130

EfficientNetB7 360x360 Batch size 16	Precision	Recall	F1-Score	Support
Normal	0.99	0.98	0.99	103
Corona	0.86	1.00	0.92	126
Pneumonia	0.98	0.83	0.90	130

EfficientNetB7 475x475 Batch size 8	Precision	Recall	F1-Score	Support
Normal	0.99	0.96	0.98	103
Corona	0.92	1.00	0.96	126
Pneumonia	0.98	0.92	0.94	130

#### **COVIDNet-CXR4-A (100 Test images)**

Sensitivity (%) (=Recall)				
Normal	Pneumonia	COVID-19		
94.0	94.0	95.0		

Positive Predictive Value (%) (=Preci					
Normal	Pneumonia	COVID-19			

99.0

https://github.com/lindawangg/COVID-Net

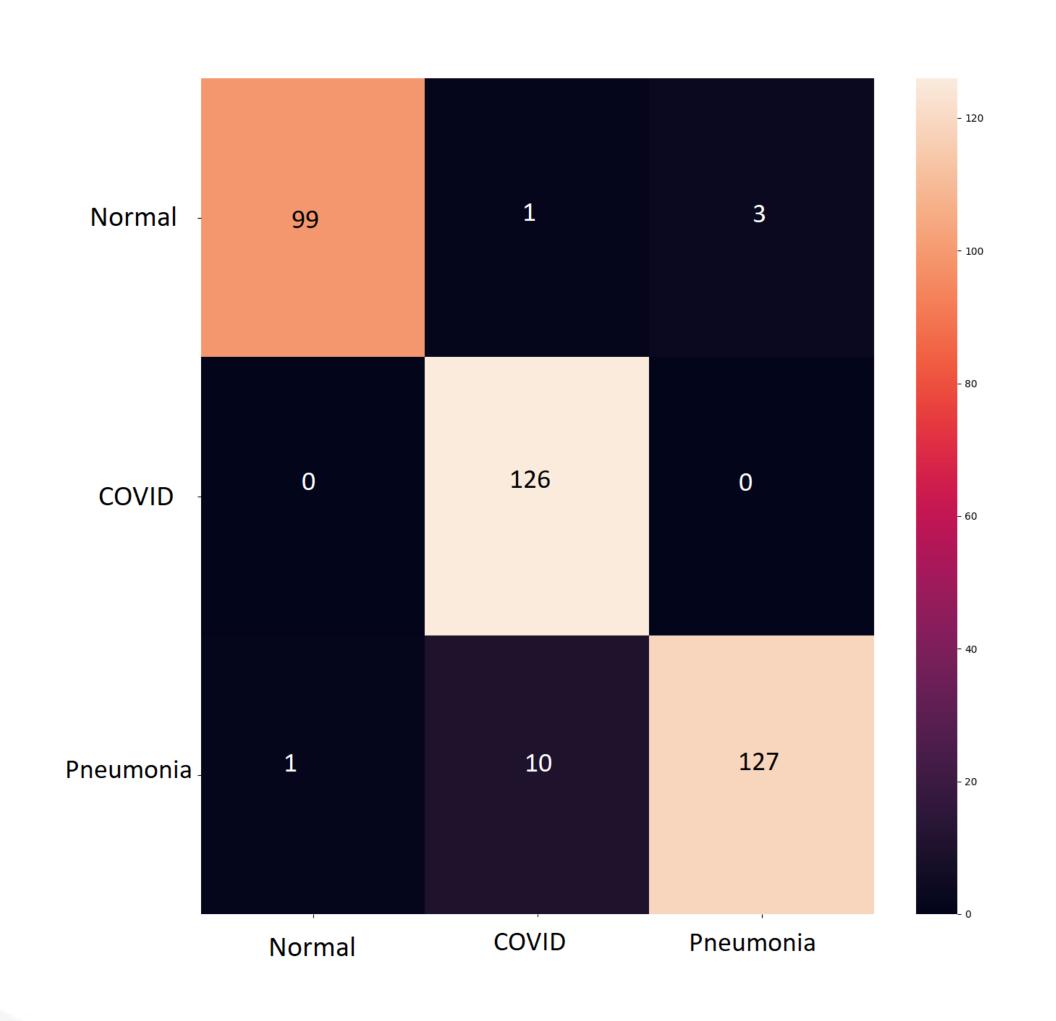
93.1

91.3

#### 7. Evaluation: Confusion Matrix



EfficientNetB7 Input size 475x475 Batch size 8



#### Literature I



Amato, F., López, A., Peña-Méndez, E. M., Vaňhara, P., Hampl, A., & Havel, J. (2013). Artificial neural networks in medical diagnosis.

Litjens, G., Kooi, T., Bejnordi, B. E., Setio, A. A. A., Ciompi, F., Ghafoorian, M., ... & Sánchez, C. I. (2017). A survey on deep learning in medical image analysis. Medical image analysis, 42, 60-88.

Ronneberger, O., Fischer, P., Brox, T., 2015. U-net: convolutional networks for biomedical image segmentation. In: Proceedings of the Medical Image Comput- ing and Computer-Assisted Intervention. In: Lecture Notes in Computer Science, 9351, pp. 234–241. doi: 10.1007/978- 3- 319- 24574- 4 \_ 28.

Antony, J., McGuinness, K., O'Connor, N. E., & Moran, K. (2016, December). Quantifying radiographic knee osteoarthritis severity using deep convolutional neural networks. In 2016 23rd International Conference on Pattern Recognition (ICPR) (pp. 1195-1200). IEEE.

Lo, S. C. B., Chan, H. P., Lin, J. S., Li, H., Freedman, M. T., & Mun, S. K. (1995). Artificial convolution neural network for medical image pattern recognition. Neural networks, 8(7-8), 1201-1214.

Esteva, A., Kuprel, B., Novoa, R. A., Ko, J., Swetter, S. M., Blau, H. M., & Thrun, S. (2017). Dermatologist-level classification of skin cancer with deep neural networks. nature, 542(7639), 115-118.

Zhang, J., Xie, Y., Pang, G., Liao, Z., Verjans, J., Li, W., ... & Xia, Y. Viral Pneumonia Screening on Chest X-rays Using Confidence-Aware Anomaly Detection. IEEE transactions on medical imaging.

Self, W. H., Courtney, D. M., McNaughton, C. D., Wunderink, R. G., & Kline, J. A. (2013). High discordance of chest x-ray and computed tomography for detection of pulmonary opacities in ED patients: implications for diagnosing pneumonia. The American journal of emergency medicine, 31(2), 401-405.

#### Literature II



Joarder, R., & Crundwell, N. (2009). Chest X-ray in clinical practice. Springer Science & Business Media.

Minaee, S., Kafieh, R., Sonka, M., Yazdani, S., & Soufi, G. J. (2020). Deep-covid: Predicting covid-19 from chest x-ray images using deep transfer learning. arXiv preprint arXiv:2004.09363

Zhang, J., Xie, Y., Pang, G., Liao, Z., Verjans, J., Li, W., ... & Xia, Y. Viral Pneumonia Screening on Chest X-rays Using Confidence-Aware Anomaly Detection. *IEEE transactions on medical imaging*.

Selvaraju, R. R., Cogswell, M., Das, A., Vedantam, R., Parikh, D., & Batra, D. (2017). Grad-cam: Visual explanations from deep networks via gradient-based localization. In Proceedings of the IEEE international conference on computer vision (pp. 618-626).

Wang, L., Lin, Z. Q., & Wong, A. (2020). Covid-net: A tailored deep convolutional neural network design for detection of covid-19 cases from chest x-ray images. Scientific Reports, 10(1), 1-12.