

# Detecting Presence of Brain Aneurysms- A Deep Learning Approach



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## Problem / Question

- Intracranial aneurysms are small (~3 mm) and often missed in manual detection.
- Early detection is critical due to high mortality after rupture.
- Can deep learning improve aneurysm detection and spatial localization to support radiologists?**

## Objective

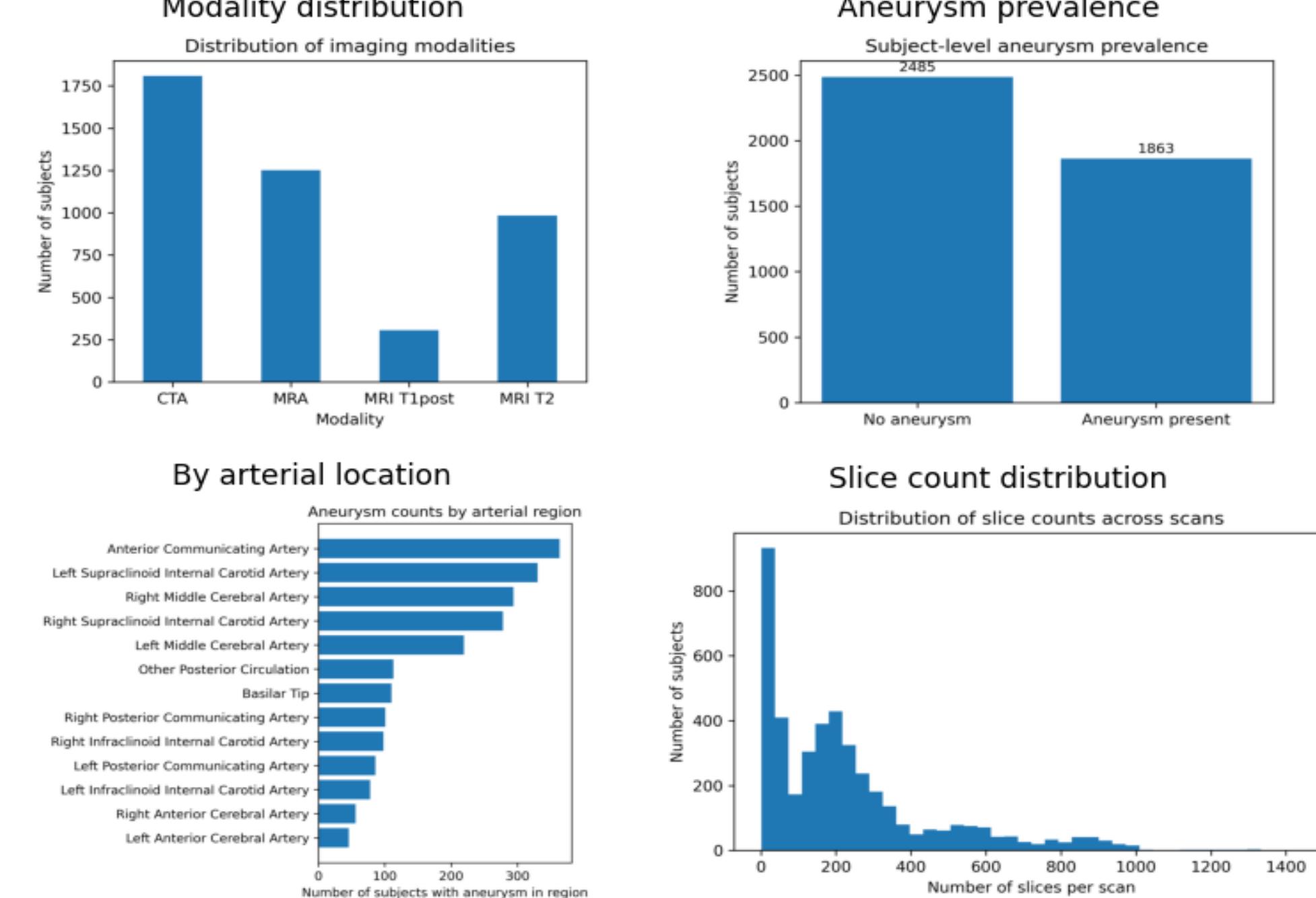
Develop a deep learning pipeline using 3D brain imaging to:

1. Detect whether an aneurysm is present.
2. Localize aneurysms across key intracranial arterial regions.

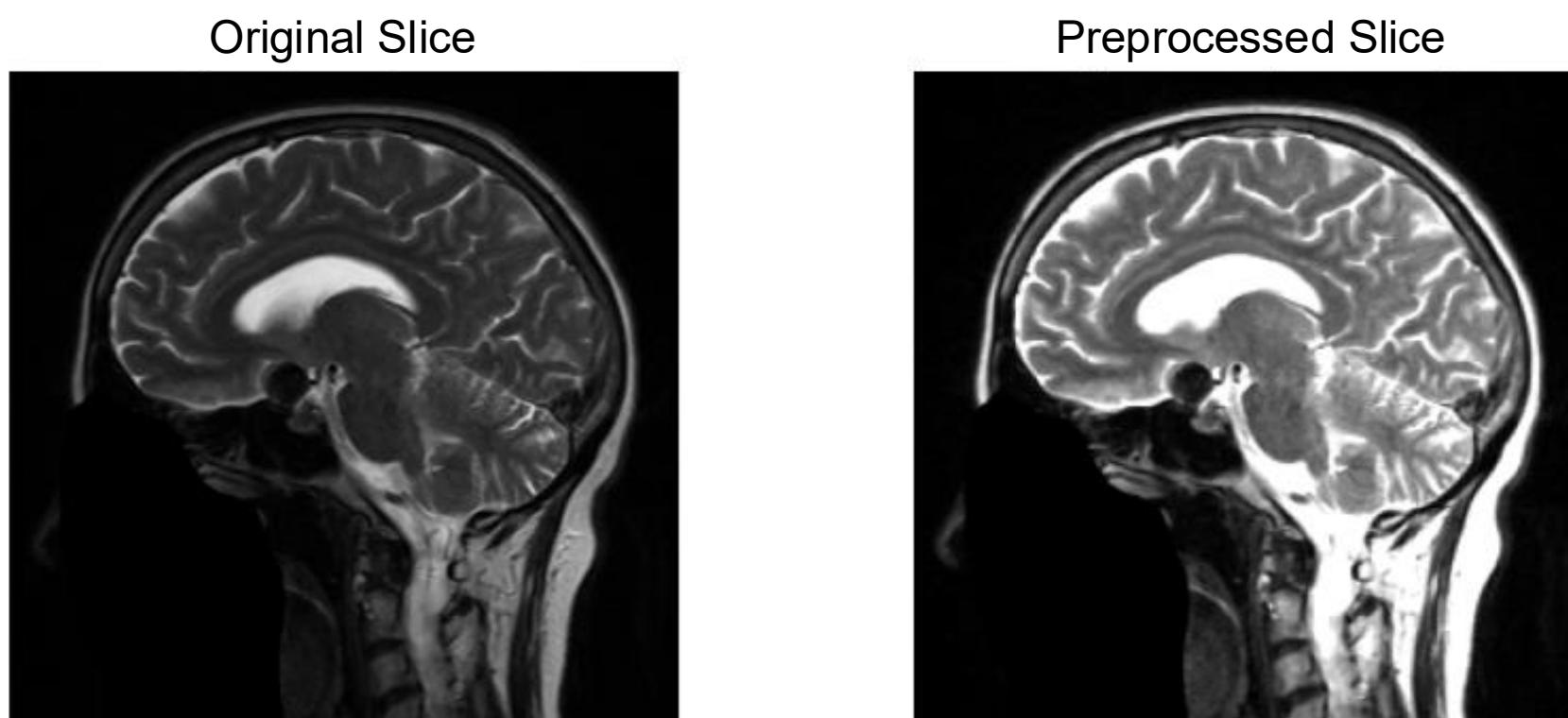
We compare a **one-step** (joint) model and a **two-step** (decoupled) model to assess accuracy and interpretability.

## Exploratory Data Analysis

The following figures show an overview of the dataset, including imaging modalities, aneurysm prevalence, arterial distribution, and scan characteristics.



## Preprocessing



Slice Level

Slices are ordered using DICOM geometry metadata, resized to a uniform grid, and intensity-normalized across modalities. CTA slices are converted to Hounsfield units; MRI slices remain in native units. All slices undergo modality-appropriate windowing, clipping, grayscale correction, and normalization. Final inputs are downsampled to 128 x 128 to meet memory constraints.

We use 3,726 subjects, selected to create a balanced sample with respect to aneurysm presence, not by localization category.

## One-Step Approach

- 3D Convolutional Neural Network:**
  - 3 blocks of 2 3x3x3 convolutional layers with LeakyReLU activation and max-pooling layers.
  - Classifying head: 3 feedforward layers and 1 dropout layer.
  - Softmax generates probabilities over 14x1 output.
  - Loss: multi-label classification cross entropy weighted to emphasize detection over localization.

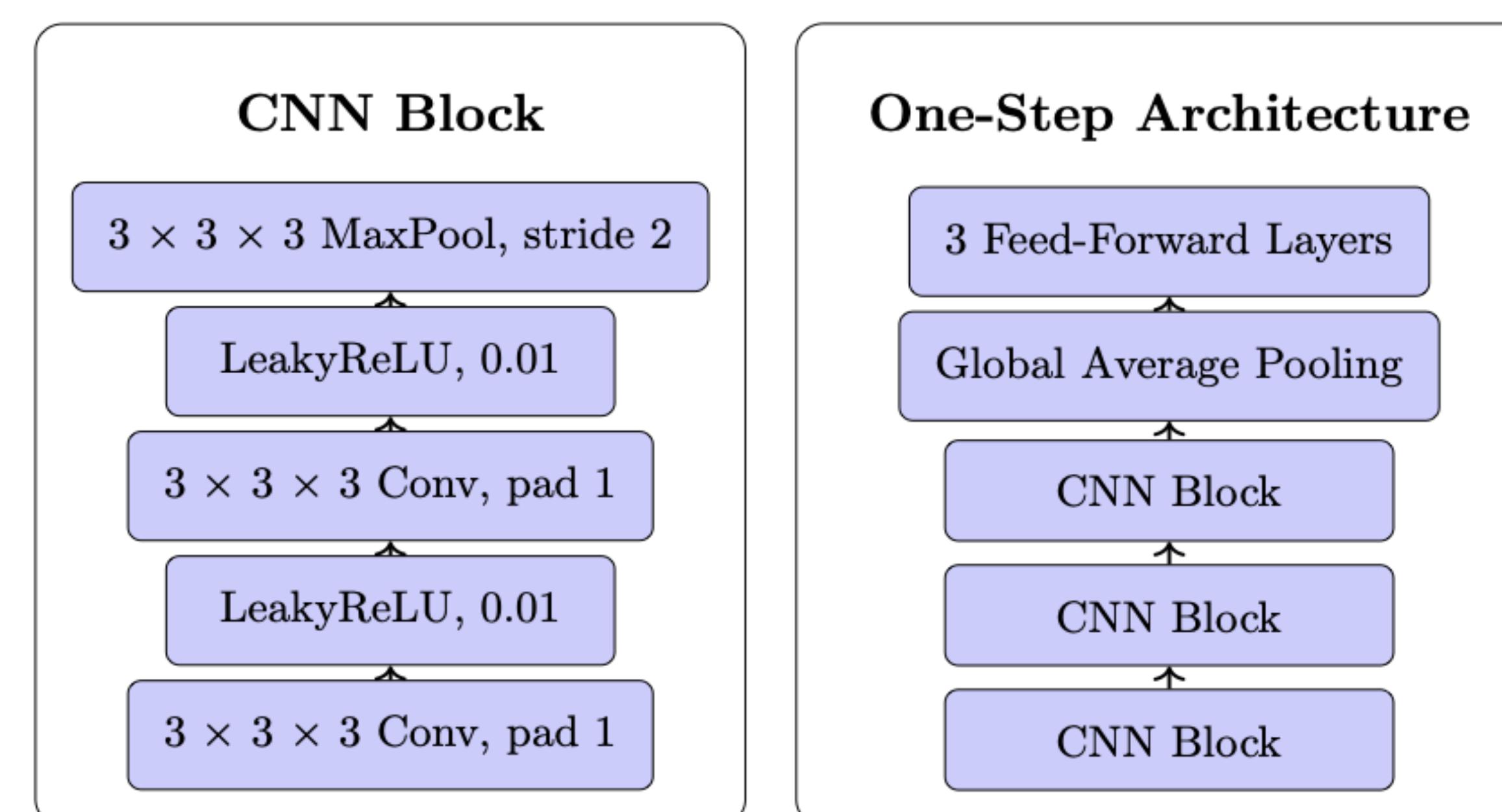


Figure 1: One-Step Approach Architecture

## Two-Step Approach

- Divide aneurysm identification and localization into 2 3D CNN.
- Step 1: 3D CNN with single output targeting presence of aneurysm**
  - Similar convolutional structure to One-Step Approach; BCE Loss
- Step 2: 3D CNN with 13x1 output**
  - Use weights of step 1, with new feed-forward head; cross entropy loss

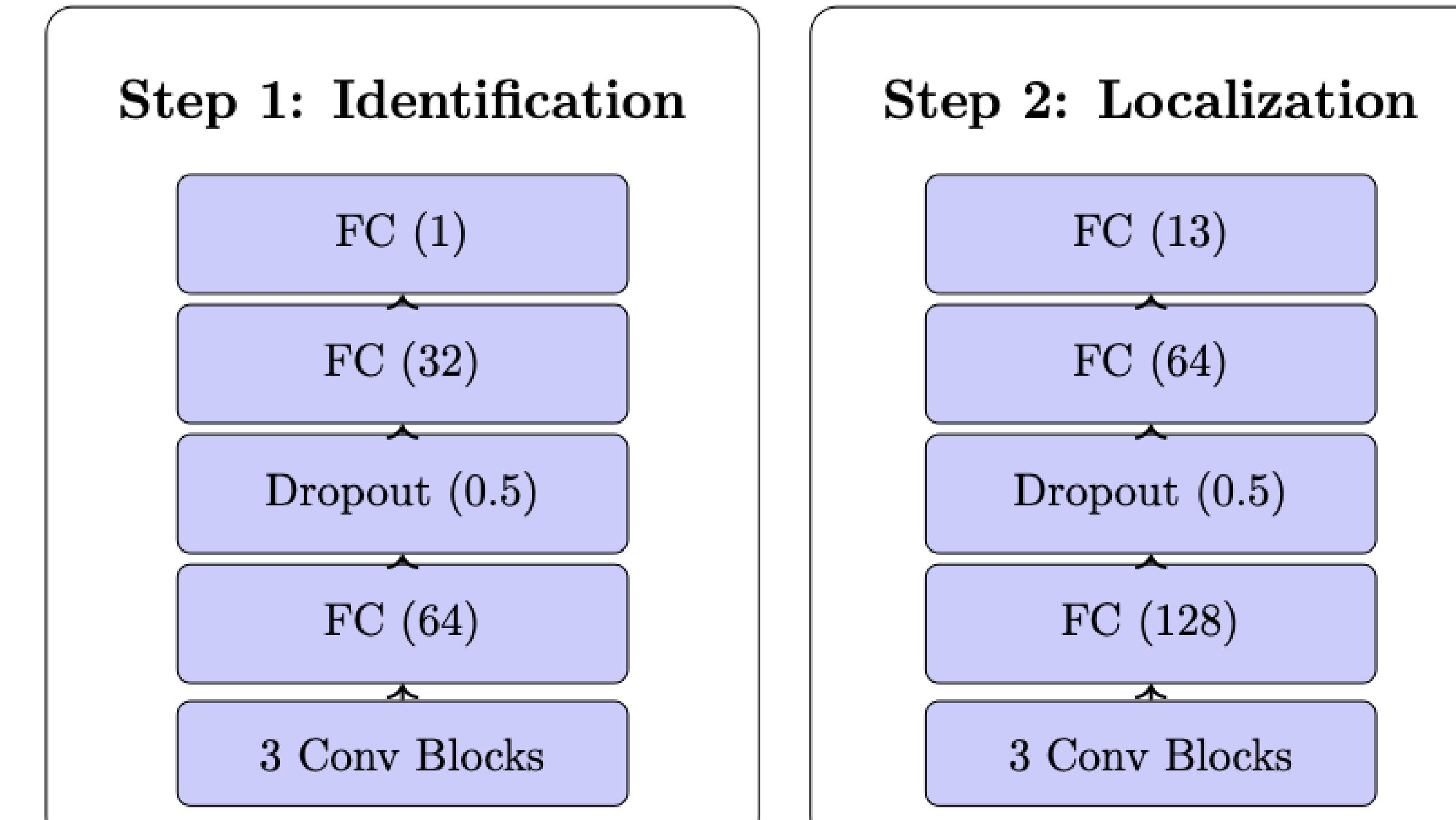


Figure 2: Two-Step Approach Architecture

## Results

### Training

- Perform 70-10-20 train, validation, test split across subjects.

#### One Step

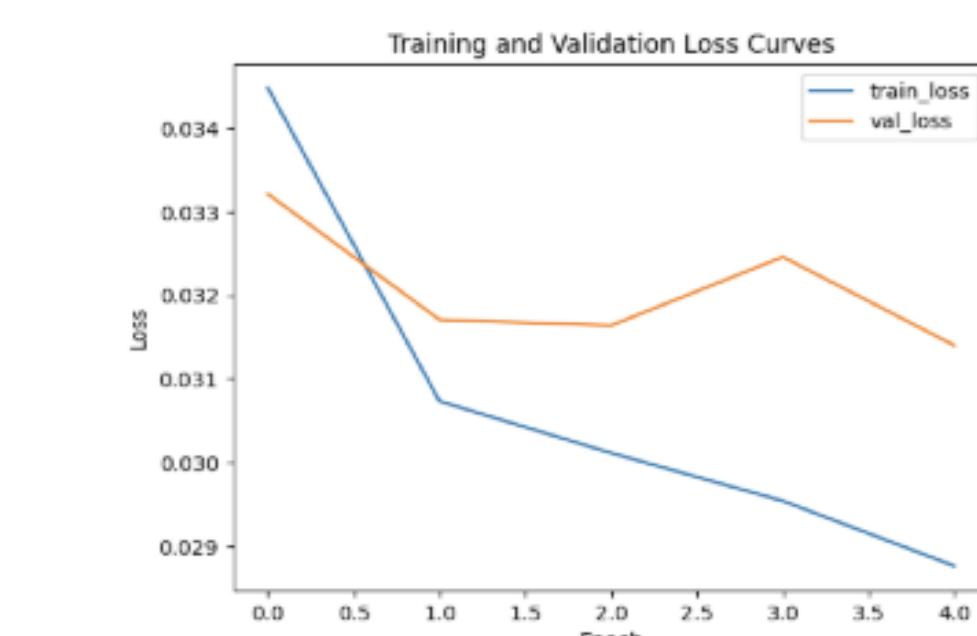


Figure 1: One-Step Approach: Training-Validation Loss Curves  
The training and validation loss over 5 epochs with learning rate of  $1 \times 10^{-4}$  and weight decay of  $1 \times 10^{-5}$ .

#### Two Step

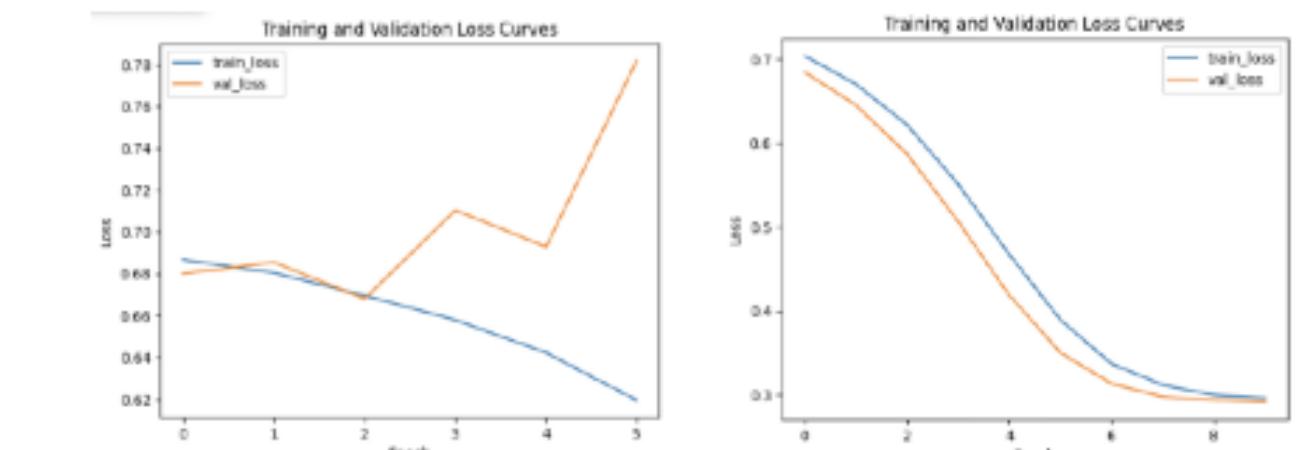


Figure 2: Two-Step Approach: Training-Validation Loss Curves  
The training and validation loss over 6 and 10 epochs, respectively, with learning rate of  $1 \times 10^{-4}$  and weight decay of  $1 \times 10^{-5}$ .

### Out-of-Sample Evaluation

#### One Step

For each test subject, aggregate predictions for all mini-volumes. We create a design rule to catch signal even if the aneurysm is not present in all mini-volumes.

| Output   | Support | Precision | Recall | F1-Score |
|----------|---------|-----------|--------|----------|
| Presence | 276     | 0.64      | 0.88   | 0.74     |
| Loc - 1  | 13      | 0.00      | 0.00   | 0.00     |
| Loc - 2  | 21      | 0.00      | 0.00   | 0.00     |
| Loc - 3  | 59      | 0.00      | 0.00   | 0.00     |
| Loc - 4  | 18      | 0.00      | 0.00   | 0.00     |
| Loc - 5  | 37      | 0.00      | 0.00   | 0.00     |
| Loc - 6  | 41      | 0.00      | 0.00   | 0.00     |
| Loc - 7  | 71      | 0.00      | 0.00   | 0.00     |
| Loc - 8  | 9       | 0.00      | 0.00   | 0.00     |
| Loc - 9  | 9       | 0.00      | 0.00   | 0.00     |
| Loc - 10 | 13      | 0.00      | 0.00   | 0.00     |
| Loc - 11 | 24      | 0.00      | 0.00   | 0.00     |
| Loc - 12 | 15      | 0.00      | 0.00   | 0.00     |
| Loc - 13 | 15      | 0.00      | 0.00   | 0.00     |

Table 2: One-Step Approach Evaluation  
We report the precision, recall, and F1-Score for all fourteen output categories.

#### Two Step

First, apply step 1 to the out-of-sample test set. Conditional on the presence of an aneurysm, apply step 2.

| Output   | Support | Precision | Recall | F1-Score |
|----------|---------|-----------|--------|----------|
| Presence | 288     | 0.72      | 0.64   | 0.68     |
| Loc - 1  | 27      | 0.00      | 0.00   | 0.00     |
| Loc - 2  | 15      | 0.00      | 0.00   | 0.00     |
| Loc - 3  | 18      | 0.00      | 0.00   | 0.00     |
| Loc - 4  | 11      | 0.00      | 0.00   | 0.00     |
| Loc - 5  | 20      | 0.00      | 0.00   | 0.00     |
| Loc - 6  | 12      | 0.00      | 0.00   | 0.00     |
| Loc - 7  | 41      | 0.00      | 0.00   | 0.00     |
| Loc - 8  | 54      | 0.00      | 0.00   | 0.00     |
| Loc - 9  | 43      | 0.00      | 0.00   | 0.00     |
| Loc - 10 | 28      | 0.00      | 0.00   | 0.00     |
| Loc - 11 | 9       | 0.00      | 0.00   | 0.00     |
| Loc - 12 | 3       | 0.00      | 0.00   | 0.00     |
| Loc - 13 | 73      | 0.00      | 0.00   | 0.00     |

Table 3: Two-Step Approach Evaluation  
We report the precision, recall, and F1-Score for all fourteen output categories.

• Weighted AUC: **0.6317** and **0.6224**, respectively.

## Conclusion

- Models successfully **detected aneurysms**; struggled to locate them.
- Limited by computational and memory constraints.
- Move to **Vision Transformers** and increased model size could improve localization.

## Works Cited

- David Atkinson. Geometry in medical imaging: DICOM and NIfTI formats. Technical report, University College London, 2022.
- MD Anderson Cancer Center. CT scan vs. MRI: What is the difference?, 2022.
- G. Hinton, N. Srivastava, A. Krizhevsky, I. Sutskever, and R. Salakhutdinov. Improving neural networks by preventing co-adaptation of feature detectors, 2012.
- S. Ioffe and C. Szegedy. Batch normalization: accelerating deep network training by reducing internal covariate shift. arXiv, 2015.
- Alexander Keedy. An overview of intracranial aneurysms. McGill Journal of Medicine, 2006.
- Taewoo Kim, Jin-Woo Jeon, Jiyoung Kim, Jeong-Ho Kim, Jun-Young Chung.
- Jeong-Hoon Ahn, Jae-Min Park, and Sang-Won Suh. Prevalence of unruptured intracranial aneurysms in healthy asymptomatic adults: magnetic resonance angiography study. Neurointervention, 2021.
- A. Maas, A. Hannun, and A. Ng. Rectifier nonlinearities improve neural network acoustic models. 2013.
- Lenhard Pfeiffer, Ulrike C. I. Hoyer, Alexandra Krauskopf, Rahil Shahzad, Stephanie T. Junger, Frank Thiele, Kai R. Laukamp, Jan-Peter Grunz, Michael Perkhan, Marc Schlambach, Christoph Kabbasch, Jan Borggreve, and Lukas Goertz. Deep learning assistance increases the detection sensitivity of radiologists for secondary intracranial aneurysms in subarachnoid hemorrhage. Neuroradiology, 2021.
- Filippo Pesapane, Giulia Gnocchi, Cettina Quarrelli, Adriana Sorice, Luca Nicisio, Luciano Mariano, Anna Carla Bozzini, Irene Marinucci, Francesca Priolo, Francesca Abbate, Gianpaolo Carrariello, and Enrico Cassano. Errors in radiology: A standard review. Journal of Clinical Medicine, 2024.
- Jeff Rudie, Evan Calabrese, Robyn Ball, Peter Chang, Rennie Chen, Errol Colak, Maria Correia de Verdier, Luciano Prevedello, Tyler Richards, Rachit Saluja, Greg Zaharchuk, Jason Sho, and Maryam Vazirabad. Rsna intracranial aneurysm detection, 2025. Kaggle.
- K. Simonyan and A. Zisserman. Very deep convolutional networks for large-scale image recognition. arXiv, 2014.
- Lindsay N. Williams and Robert D. Brown. Management of unruptured intracranial aneurysms. Neurology: Clinical Practice, 2013.