



KING THE MOST OF L FOR BR IMITED DATA WITH SELF-SUPERVISED L EAST CANCER SCREENING EA RZIZ

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Purpose

- The collection of high-quality, labeled images for medical classification remains a difficult and costly endeavor, making standard *Supervised Learning* (SL) medical classification tasks difficult. With *Self-Supervised Learning* (SSL), features can be learned from unlabeled data and fine-tuned on limited labeled samples.
- In this work, we compare SL methods with SSL methods at fractionations of 1, 50, and 100% of the labeled data.
- Further, we compare pretext SSL fine-tuning methods on our unlabeled data with using off-the-shelf ImageNet pretext pre-trained weights only.

Methods

- We are using two SSL training methods, knowledge DIstillation with NO labels (DINOv1) [1] and Masked AutoEncoder (MAE) [2], a contrastive and generative method, respectively.
- The DINOv1 method has as a backbone a CNN, ResNet50, and a Vision Transformer (ViT).
- The MAE uses a ViT, as well.

Experiments

- •Dataset: Images are black and white, three-channel digital mammography images We have 83,039 unlabeled images for the SSL pretext fine-tuning and 72,606 images for the downstream classification training task.
- •Metrics: Linearly-weighted κ
- ·Classes: Four classes indicating severity
- •Fractionations: 100% SSL unlabeled data with 1, 10, and 100% SL labeled data in the downstream classification task

Results

Comparison of Models at 1%, 50%, and 100% Labeled Data Fractionation with Linearly Weighted κ score (Lower, Upper)

Model	1%	50%	100%
SL ResNet50	0.32 (0.19, 0.46)	0.54 (0.54, 0.55)	0.56 (0.55, 0.57)
SL ViT	0.45 (0.43, 0.47)	0.58 (0.57, 0.58)	0.59 (0.59. 0.60)
SSL VITMAE	0.47 (0.46, 0.49)	0.58 (0.58, 0.59)	0.59 (0.59, 0.60)
SSL VITMAE	0.53 (0.52, 0.54)	0.59 (0.58, 0.59)	0.60 (0.60, 0.60)
Domain			
SSL DINO ResNet50	0.54 (0.53, 0.55)	0.57 (0.56, 0.58)	0.59 (0.58, 0.59)
SSL DINO ResNet50 Domain	0.55 (0.54, 0.56)	0.58 (0.58, 0.59)	0.59 (0.58, 0.60)
SSL DINO ViT	0.48 (0.46, 0.49)	0.56 (0.55, 0.57)	0.58 (0.58, 0.59)
SSL DINO ViT Domain	0.55 (0.54, 0.55)	0.58 (0.57, 0.58)	0.59 (0.59, 0.59)

Conclusion

- •With lower amounts of labeled data (1%), the best performing model is the SSL DINO ResNet50 and DINO ViT with in-domain pretext fine-tuning at 0.55.
 •Even at higher labeled data regimes (100%), all the models except the SL ResNet50 reach around 0.59/0.60, showing that, though the benefit of SSL diminishes with more labeled data, these models are still as competitive as SL approaches.
- •Comparing the in-domain vs ImageNet-only pretext fine-tuning, we see that at 1 and 50% labeled data, the in-domain versions of ResNet50 and ViT, both MAE and DINO SSL pretraining pipelines, outperform the ImageNet-only, and at 100%, they are very similar.

References

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ADDRESSING CONFORMA PREDICTI UNCERT YINI ON AND MONTE CARLO CERVICAL CANCER SO INFER ENCE REENING FOR

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Purpose

- deep learning cervical cancer screening tool for use in low domain, ·Background: and middle-income countries consequences. This where Uncertainty is important in the medical misdiagnoses project focuses on have important indevelopment
- Goal: Compare two methods of uncertainty quantification
- Coefficient of Variation of Monte-Carlo OV) [1] Inference
- performance determine the relationship between uncertainty and ongoing cervical cancer screening project P **Conformal Uncertainty** 2 Quantification (CUQ) VE to to an

Methods

dropout left on, giving us 5 •μ (σ): Average (standard d •CoV: Run 50 rounds of inferences per sample with expected value, then calculate the Coefficient of Variation giving us 50 unique prediction leviation) of each prediction's vectors

$$CoV = \sigma/\mu$$

- •CUQ: Extract the length of the conformal prediction set $\hat{C}(x)$ for sample xwith label y so that $\mathbb{P}[y]$ selected) $\left(\mathcal{S} \right)$
- $1-\alpha$, with α the error rate (to be manually seleast Ambiguous Set-Valued Classifier (LAC <u>()</u> [2]
- Adaptive Prediction Set (APS) results not shown

Experiments

- ·Dataset: studies across 17,013 cervical images Costa Rica, the US, from 9,462 women
- Netherlands
- ·classes: Normal, Gray-Zone, Precancer+
- Model: DenseNet121
- and type of prediction (correct, double-class Task 1: Relationship between conformal misclassification) incorrect, singleset length and
- ·Task 2: Correlation between (and CUQ

Task

Prediction	Set Length	P-value < .05	
Correct	1.78	(ref.)	
Incorrect	2.38	*	
Single-class	2.43	* (ref.)	
Double-class	1.93	*	

Res
esults:
Task
2

Normal

1.58

.54

*

Gray-Zone

2.39

—

90

Precancer 1.88

2

. ယ

Truth

Correct

Incorrect

.05

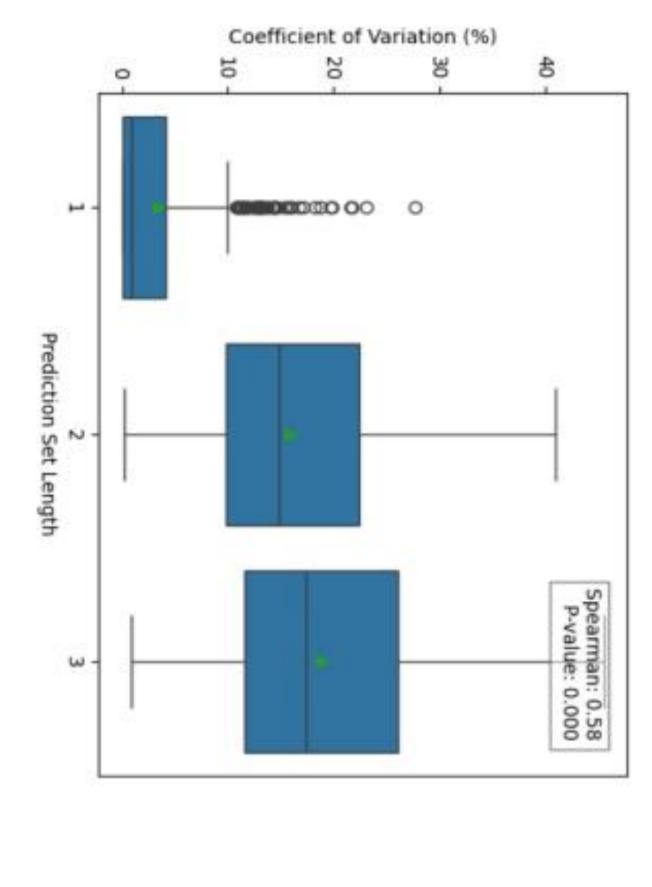
Ground

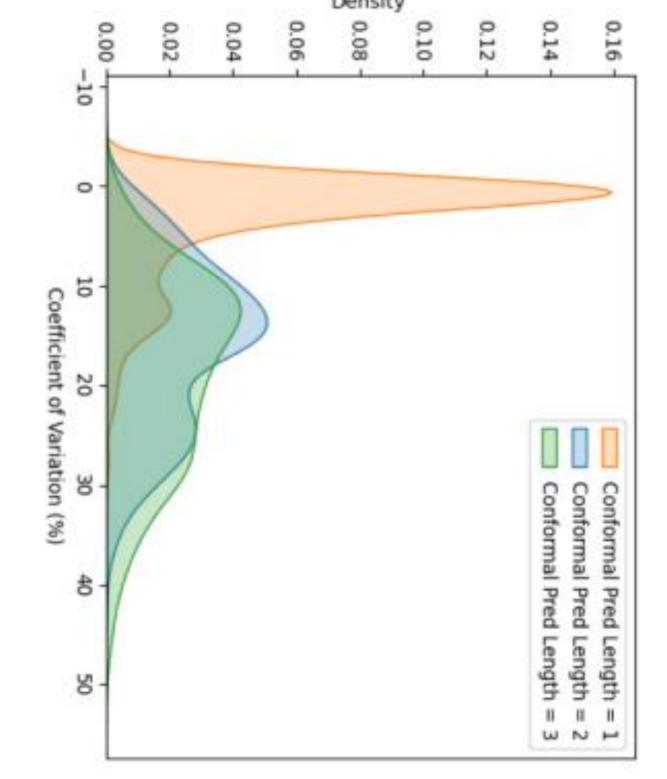
Set Length

Set L

ength

P-value





Task 1:

Conclusion

- •When the model is incorrect, more uncertain. We see this length of comparing average 1.78 and 2.38 prediction it is set
- more uncertainty when the correct, 2.38 vs 1.90 Gray-zone class associated with model is

Task <u>;</u>

between CoV prediction set lengths Statistically significant correlation and conformal with 0.58

References

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