



Multimodal Medical Imaging Optimization Lab  
Department of Biomedical Engineering  
National Taiwan University

# Medical Image Analysis *DBME5030*

*Term Project Report*

*Brain Tumor Segmentation from MRI images using  
Patch-Based Attention U-Net for Data-Efficient Learning*

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# Introduction

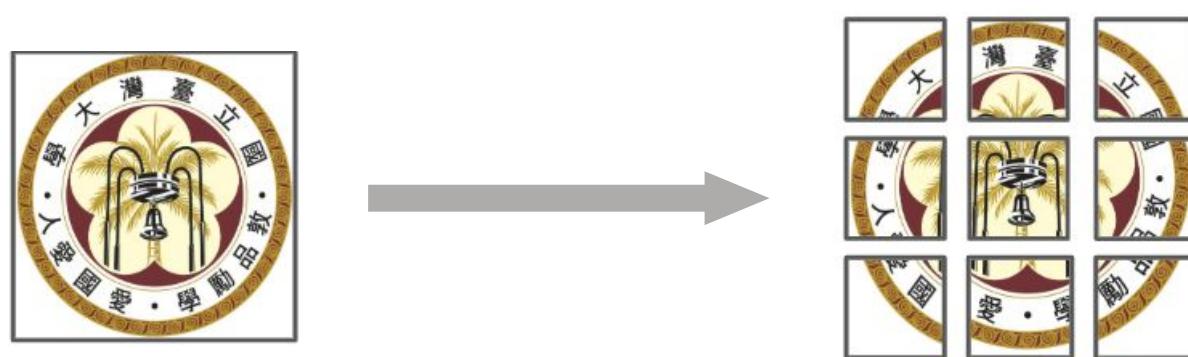
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- **Problem Statement**
  - Brain tumor segmentation and survival prediction in glioma, using multimodal MRI scans with Deep Learning Based Methods and an ensemble model comprising of three different convolutional neural network architectures.
- ❖ **Accurate Segmentation of Brain Tumor:**
  - Early diagnosis
  - Treatment planning
  - Survival rate prediction
  - Reduces workload and subjectivity in radiologist interpretation

# Previous Results from HW1

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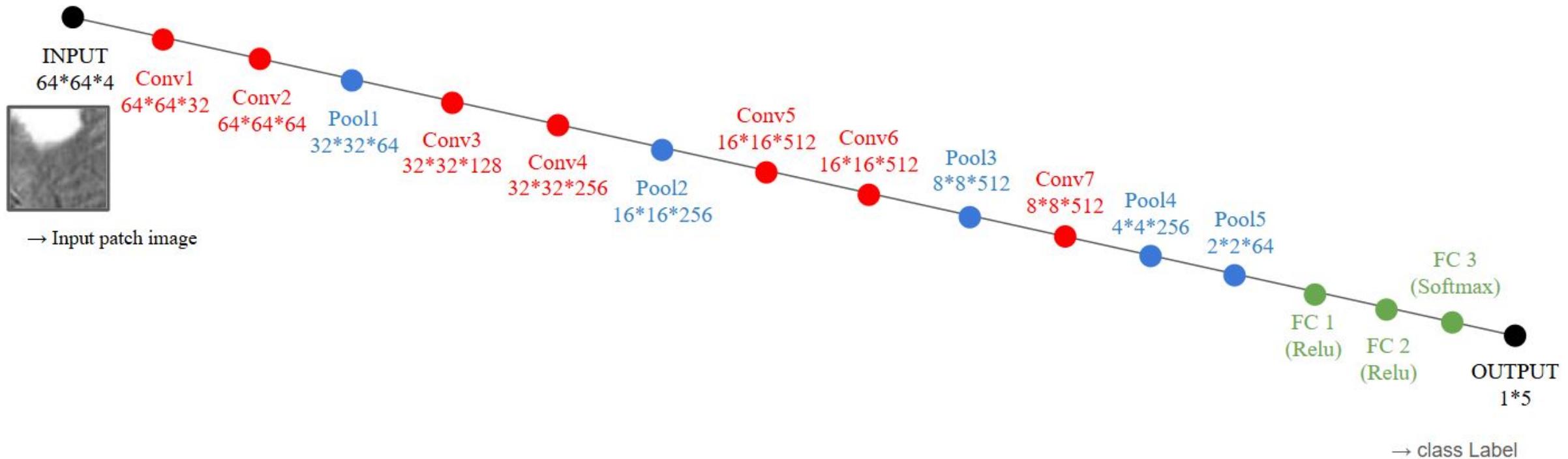
- Patch-Based Convolutional Neural Network (PBCNN) :
  - Train models using “patches” of the original image.
- Big Data Analysis Approach:
  - Data Cleansing, Data Transformation & Enrichment Patch Standardization



# Previous Results from HW1

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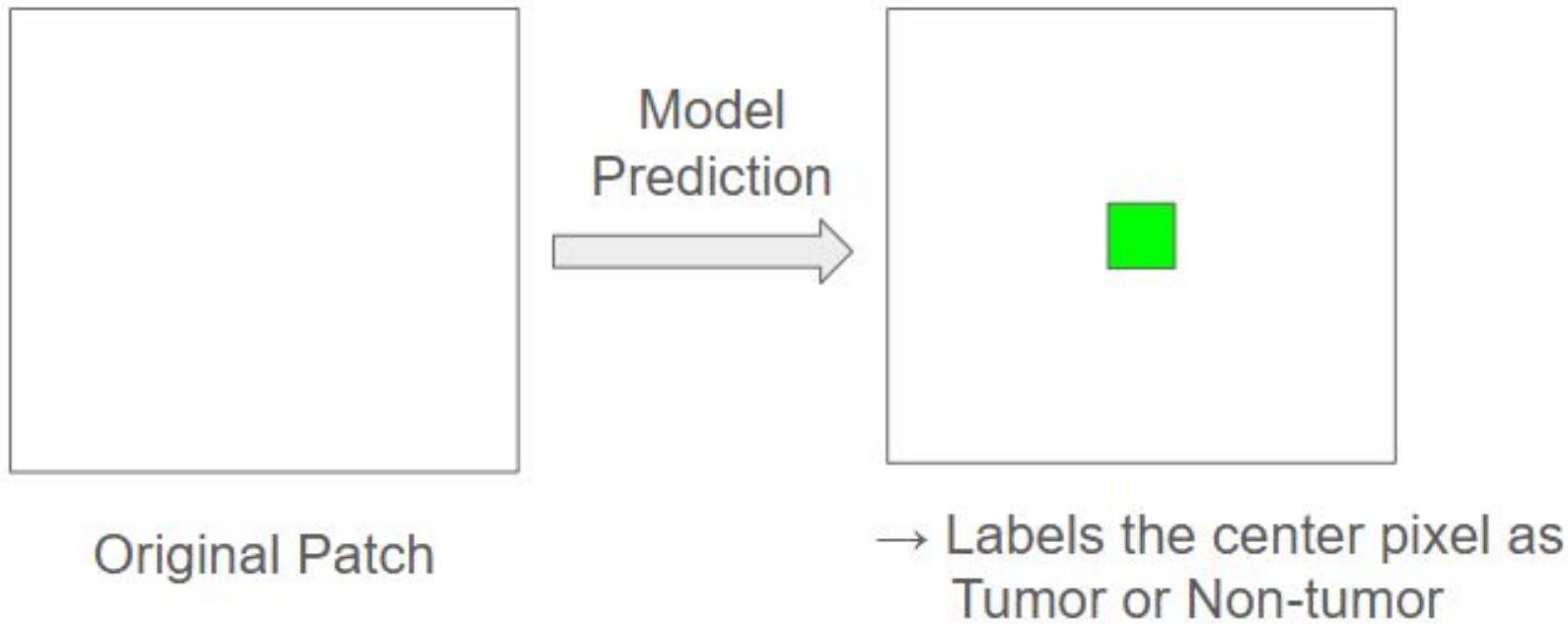
- PBCNN Model Architecture:



# Previous Results from HW1

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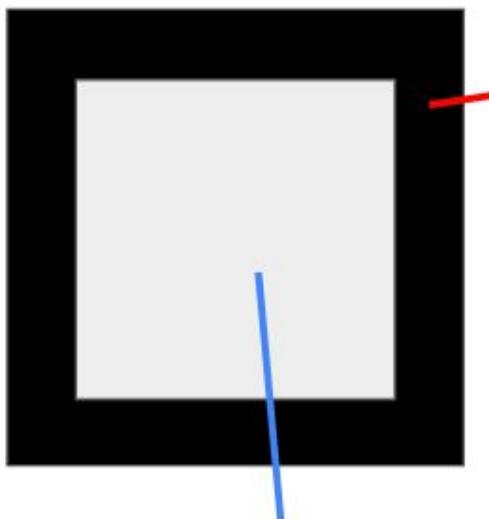
- Mask Generation:



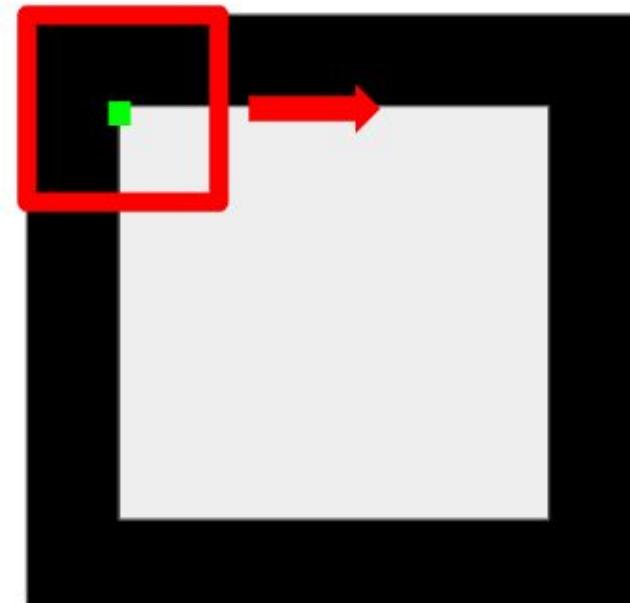
# Previous Results from HW1

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- Mask Generation:



Original Image



→ Sliding Window Technique:  
(Repeat until all original pixels has been  
the center pixel once)

→ TOO SLOW!!!

# Previous Results from HW1

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- PBCNN implementation on BraTS 2020:
  - ❖ Dataset: 60 patients from MICCAI\_BraTS2020\_TrainingData

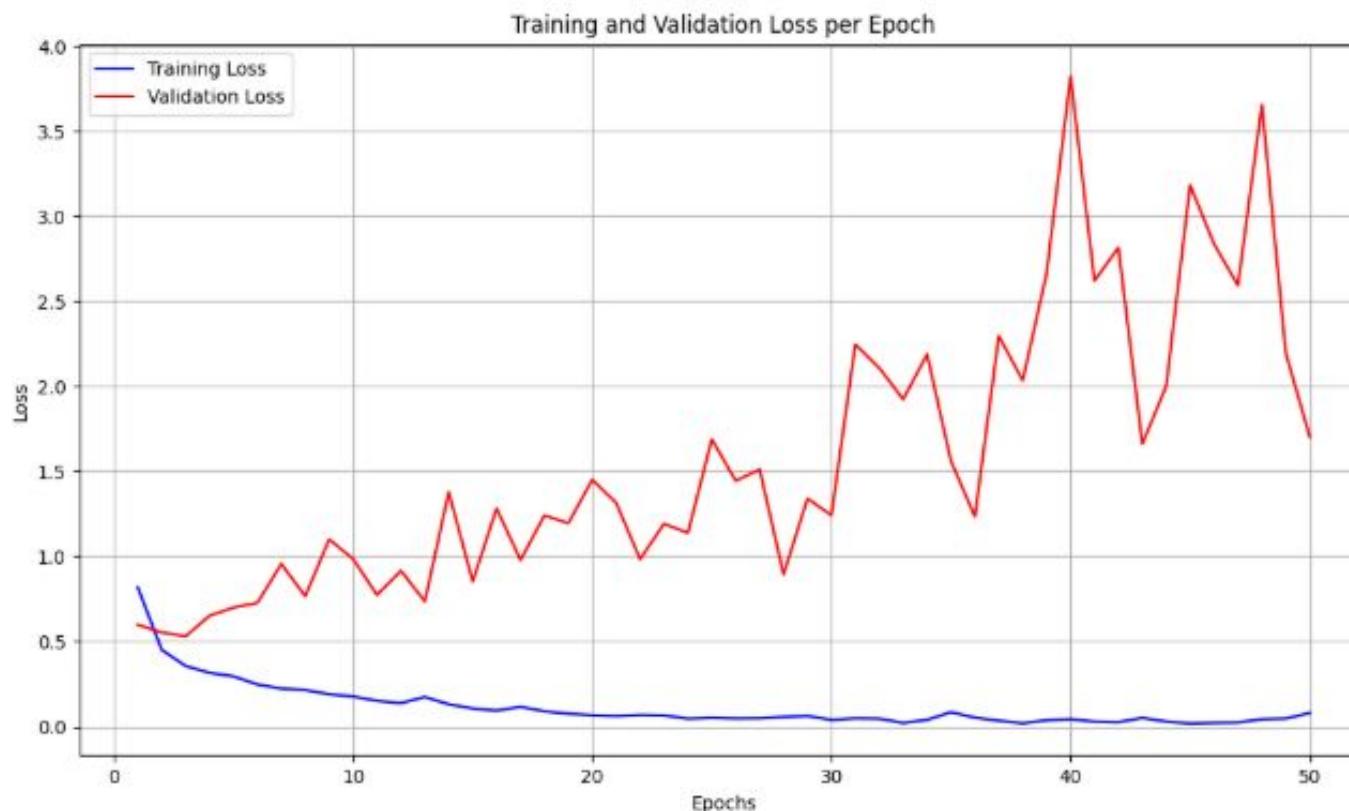
	Training set	Validation set	Test set
Total Patient number	40	10	10

- ❖ Model: Propose PBCNN, epoch=50, learning rate =0.001, Adam Optimizer

# Previous Results from HW1

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- PBCNN implementation on BraTS 2020:



Overfitted

- Class imbalance
- learns well in training
- poor generalization

# Previous Results from HW1

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- Pros and Cons:

PROS	CONS
<ul style="list-style-type: none"><li>• Local Detail Capture (PBCNN Advantage)</li><li>• Efficiency &amp; Low computational cost</li><li>• Combines <b>data quality control</b> and <b>model efficiency</b></li><li>• Big Data Pipeline (More Uniform Input (Patches))</li></ul>	<ul style="list-style-type: none"><li>• Loses global context</li><li>• Susceptible to class imbalance<ul style="list-style-type: none"><li>□ Requires patch selection</li></ul></li><li>• Susceptible to training data quantity and quality</li><li>• Slow segmentation mask generation speed</li></ul>

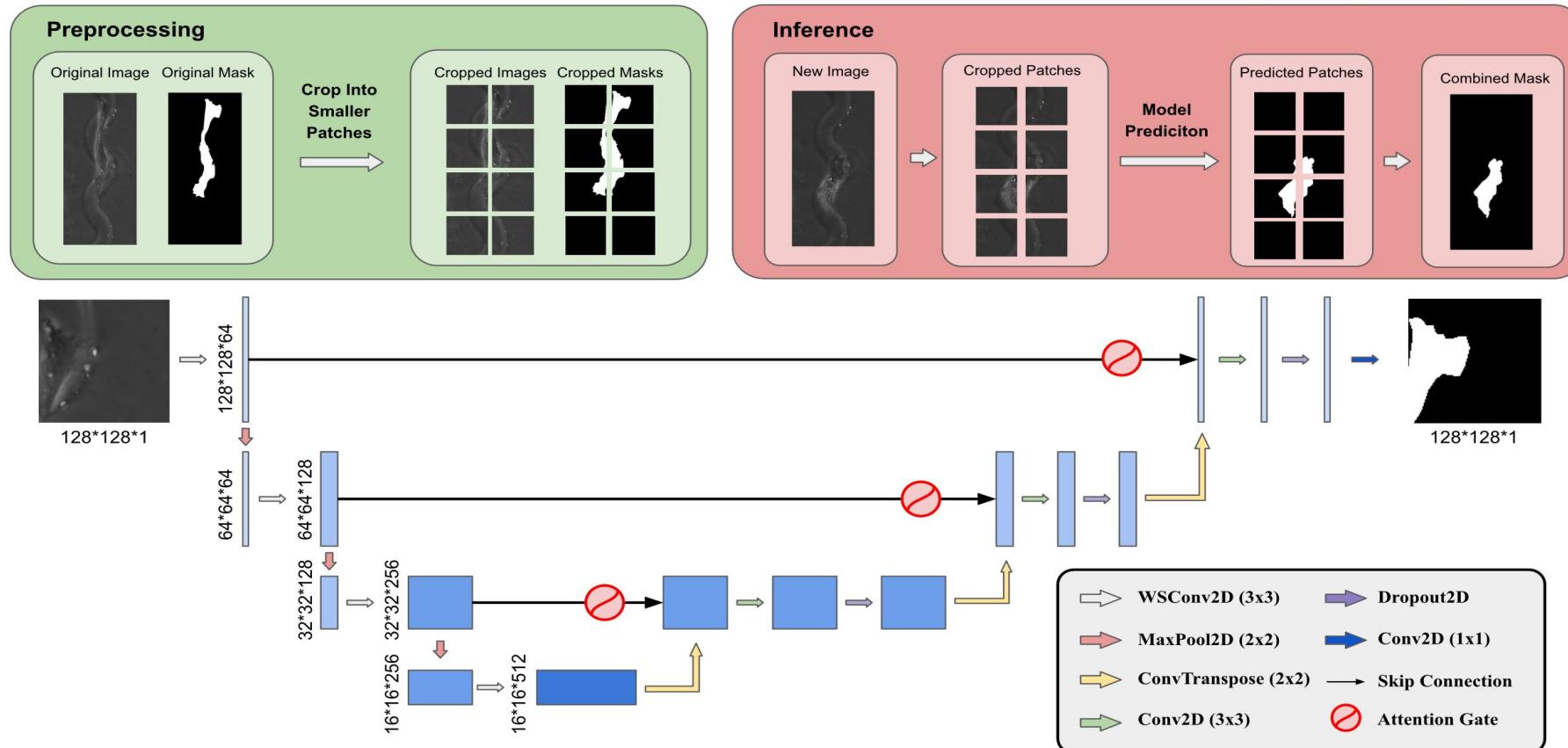
# Project Goals

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- Retain “Pixel-wise” segmentation (finer details) from Patch-Based method
- Less susceptible to class imbalance
- Fully utilize the cropped dataset without selecting patches

# Materials and Methods

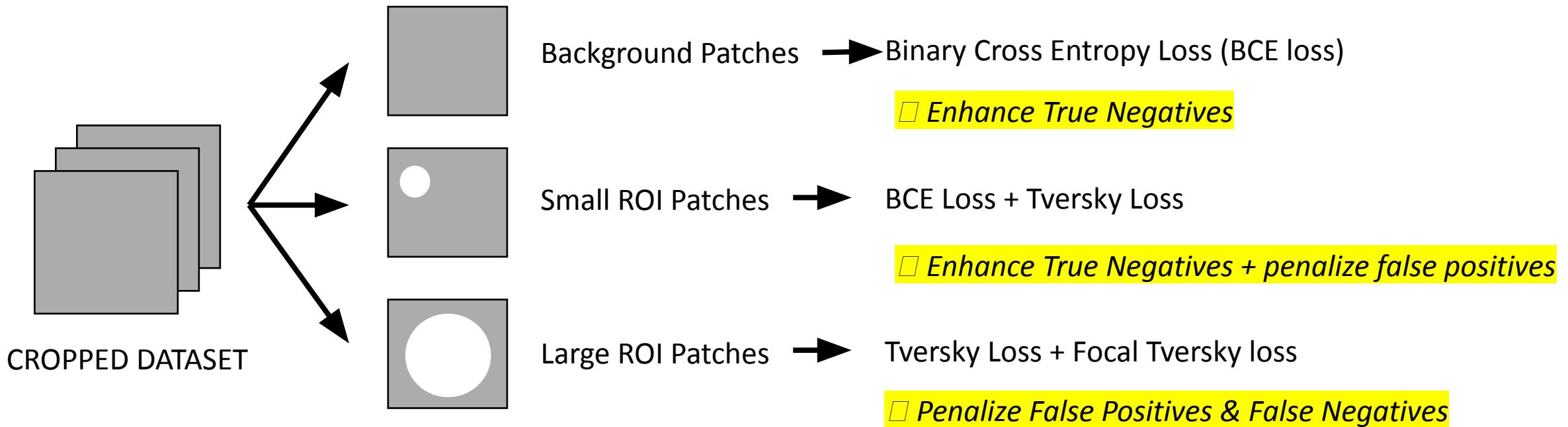
- Patch-Based Attention U-Net model architecture



# Materials and Methods

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- Patch-Based Attention U-Net: Dynamic Loss function Selection
  - Switch loss function based on predicted mask



# Materials and Methods

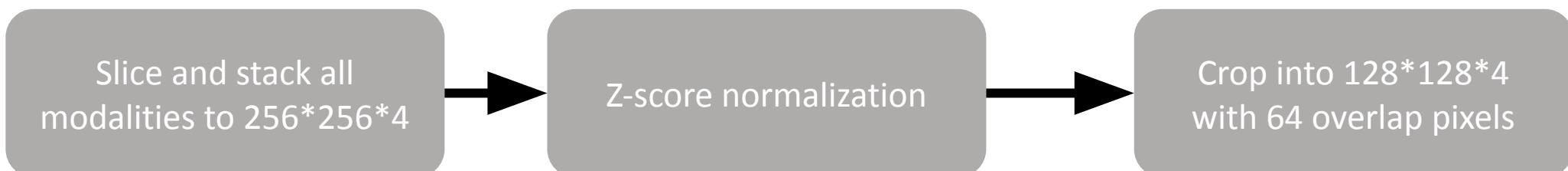
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- Patch-Based Attention U-Net
  - ✓ Able to train a model using minimal Dataset
  - ✓ Proposed a dynamic loss function selection method to fully utilize cropped dataset while stabilize training without the need to select training data.
  - ✓ Adaptable to dataset morphology (for diverse brain tumor morphology)

# Materials and Methods

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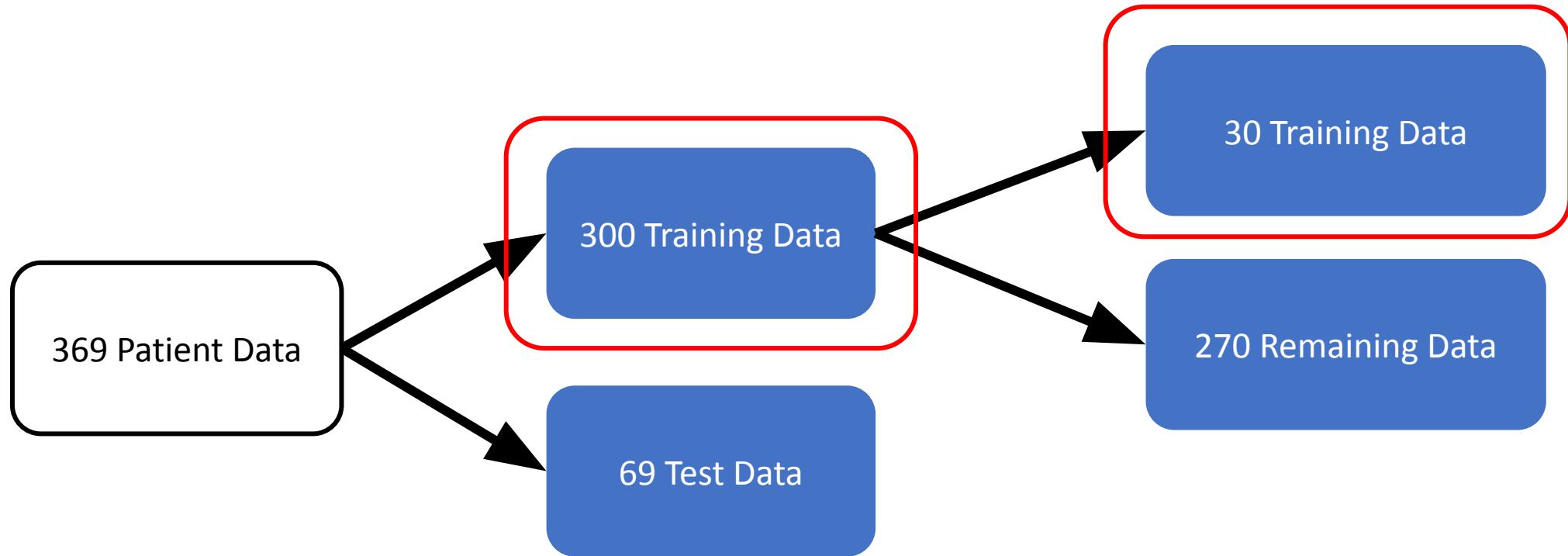
- BraTS dataset:
  - 369 patients
  - t1, t1ce, t2, FLAIR
- Preprocessing Pipeline:



$$z = \frac{x - \mu}{\sigma}$$

# Materials and Methods

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- Train brain tumor segmentation models based using normal training data (300 patients) v.s. low training data (30 patients)
- Compare model performances of two scenarios Patch-based Attention U-Net v.s. U-Net v.s. nnU-Net

# Materials and Methods

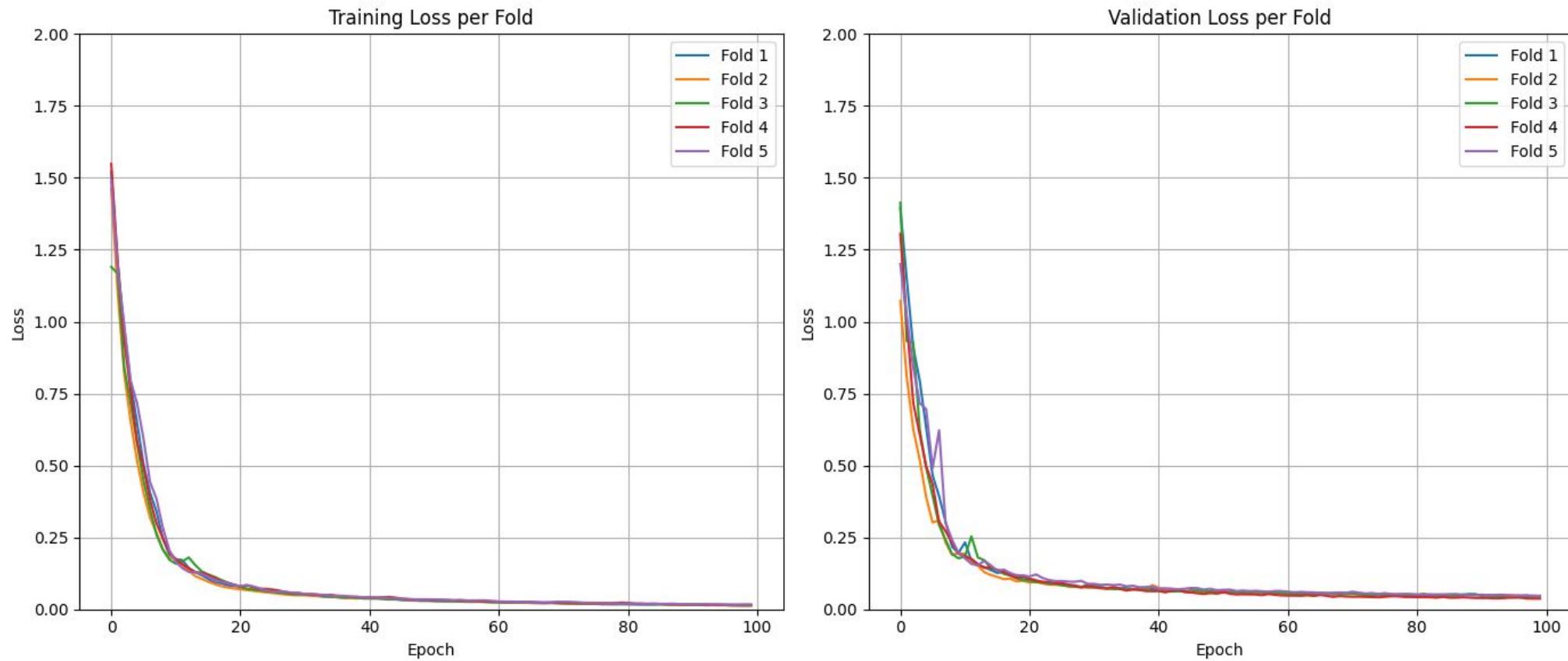
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- Training Settings:
  - ✓ 5 layer for every model
  - ✓ batch size = 64 , learning rate = 0.0001,
  - ✓ 5-fold cross validation
  - ✓ Optimizer = Adam optimizer
  - ✓ Loss function = Dynamic loss function

# Results

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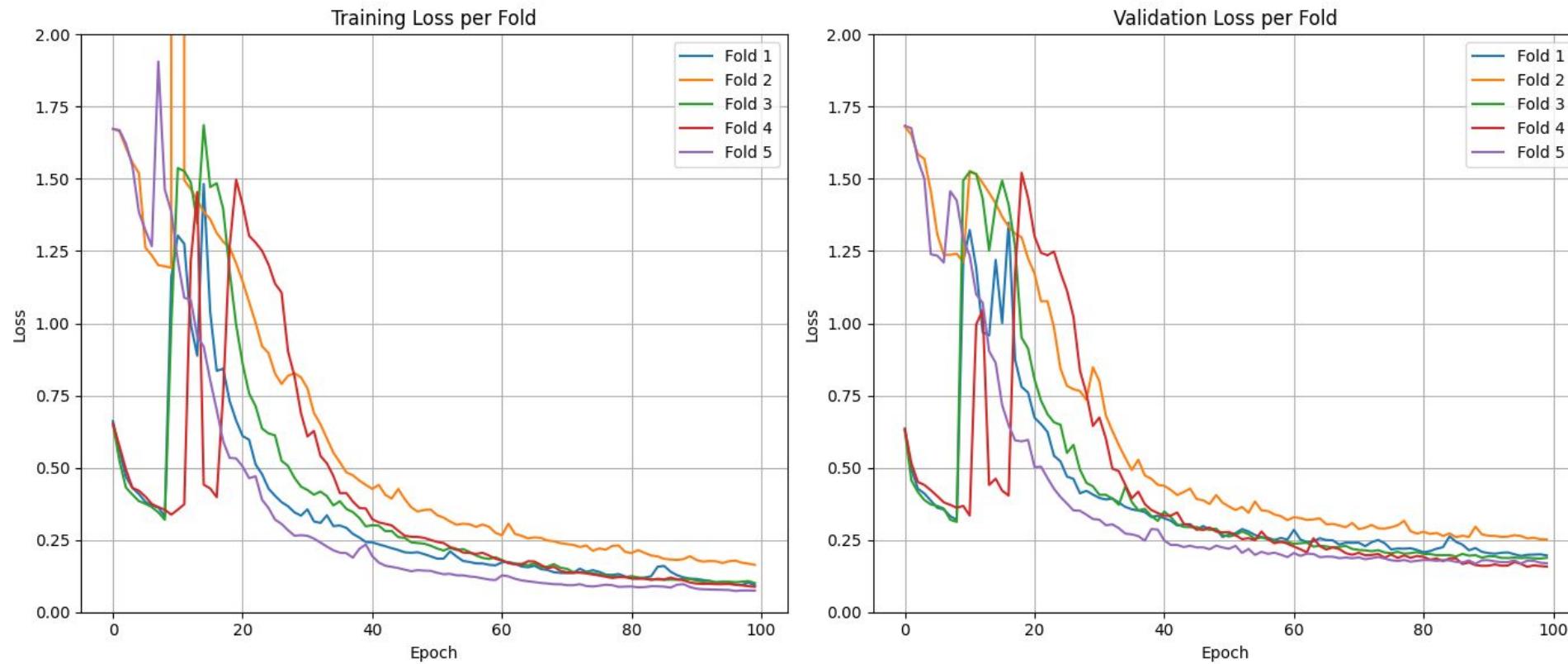
- Patch-Based Attention U-Net loss curve on normal (300) training dataset



# Results

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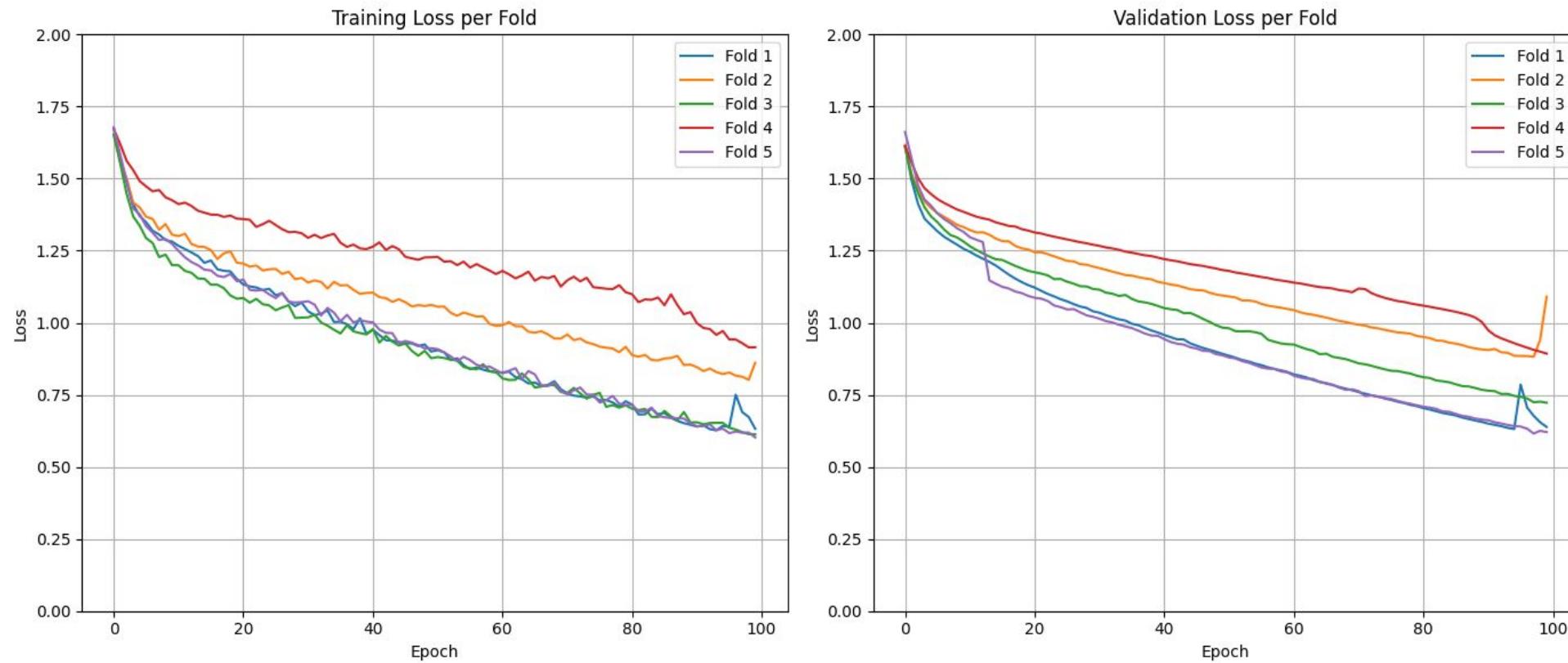
- U-Net loss curve on normal (300) training dataset



# Results

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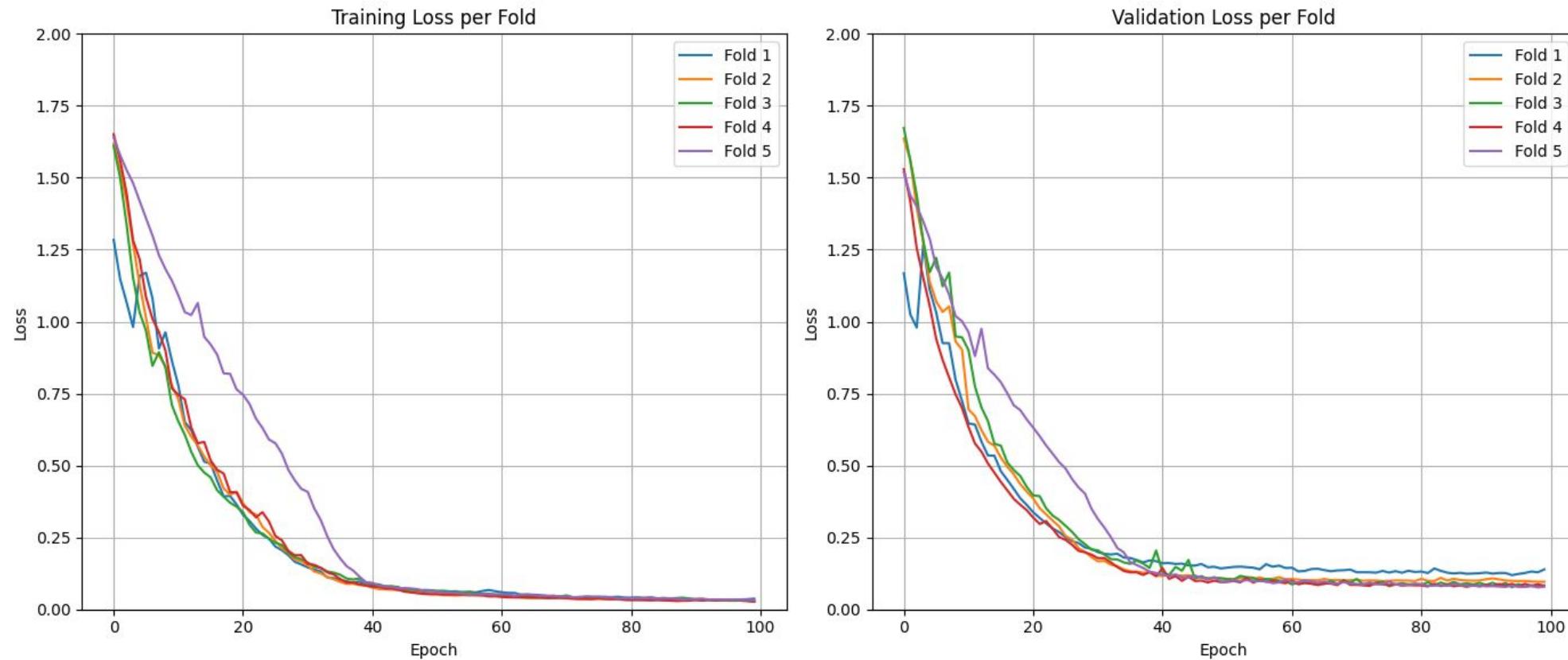
- nnU-Net loss curve on normal (300) training dataset



# Results

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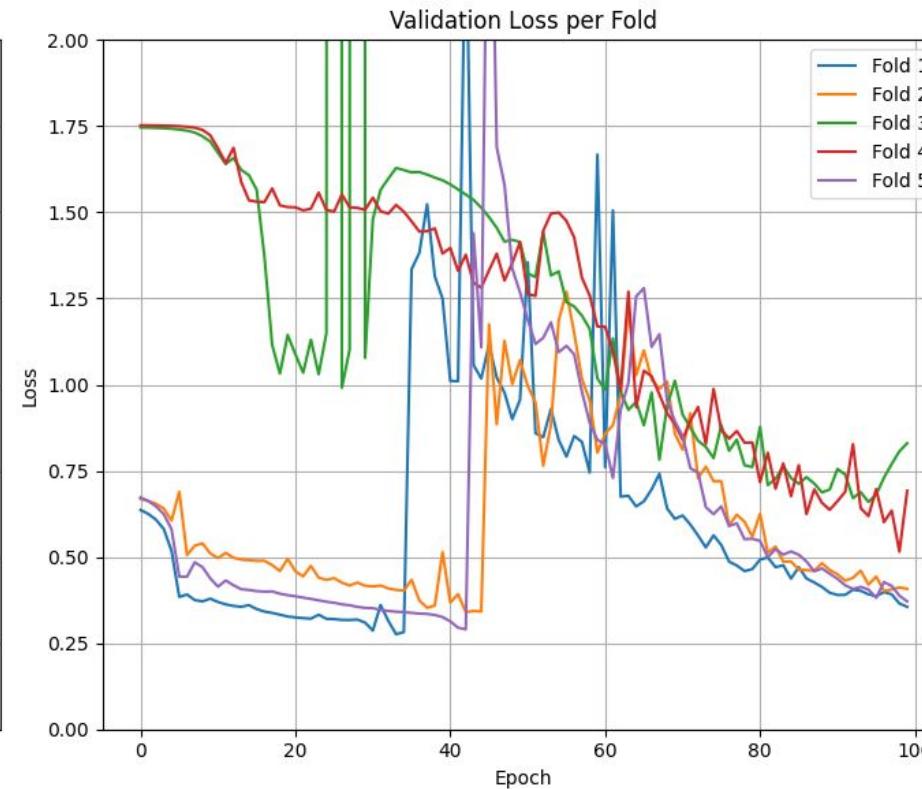
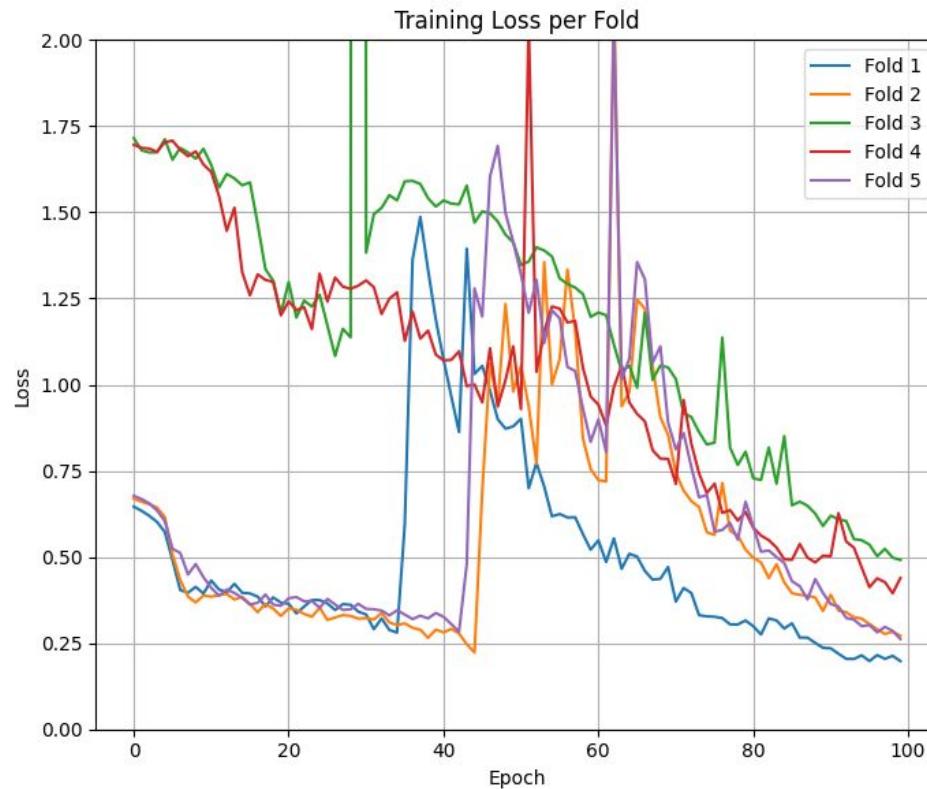
- Patch-based Attention U-Net loss curve on Low (30) training dataset



# Results

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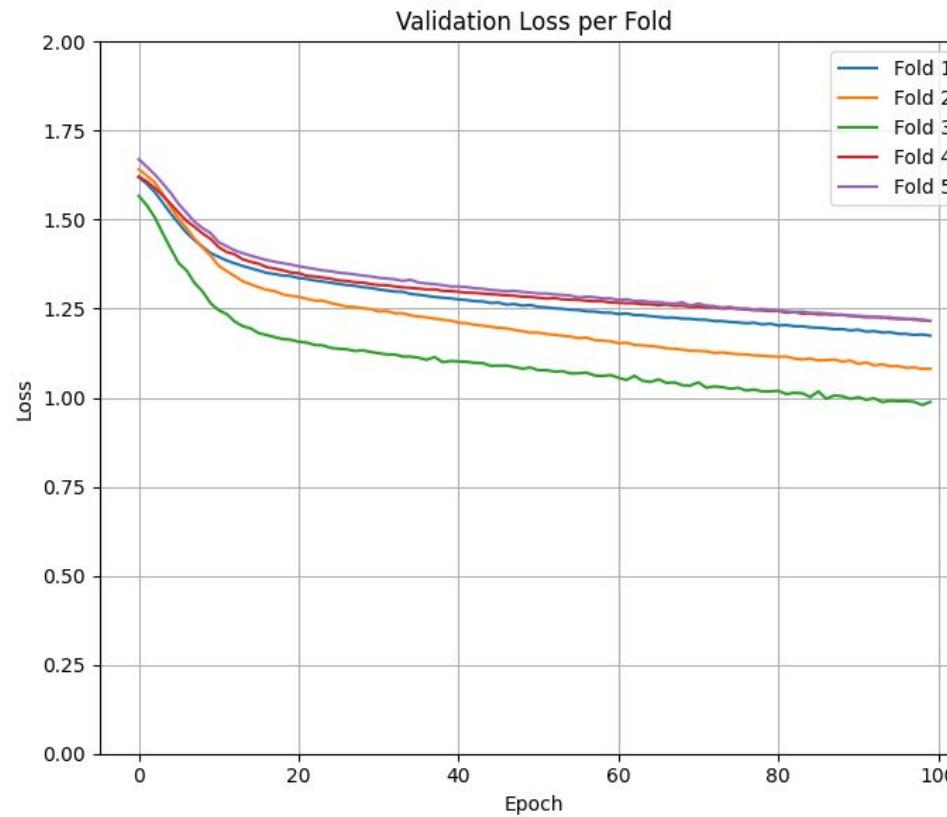
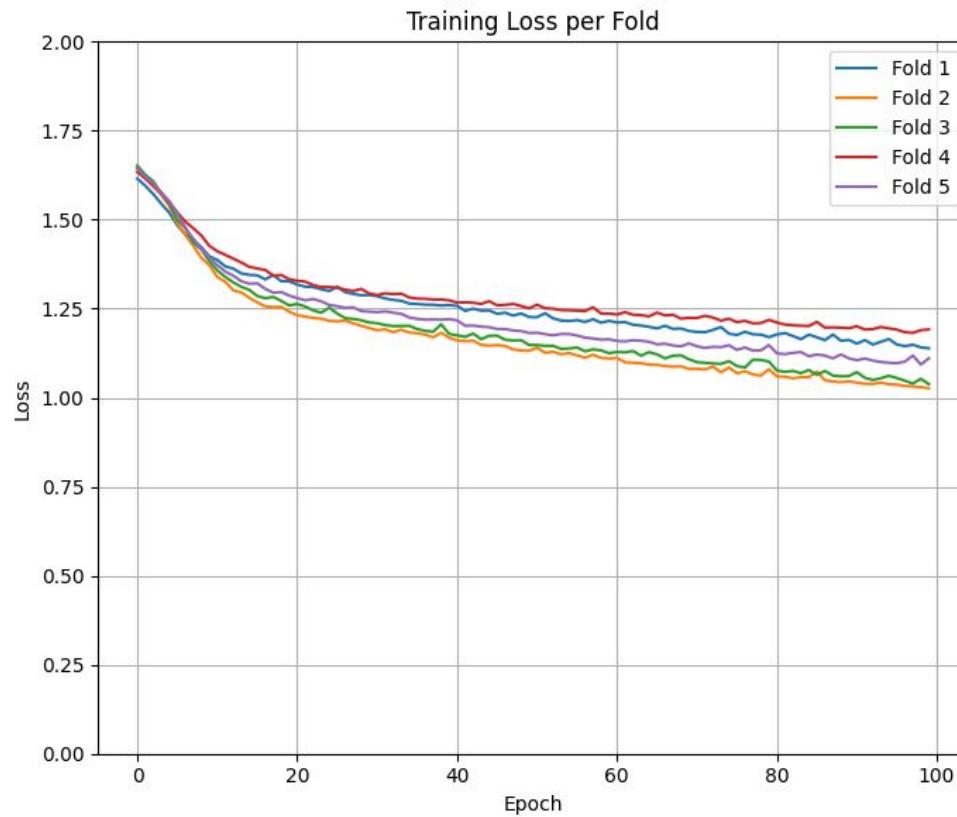
- U-Net loss curve on Low (30) training dataset



# Results

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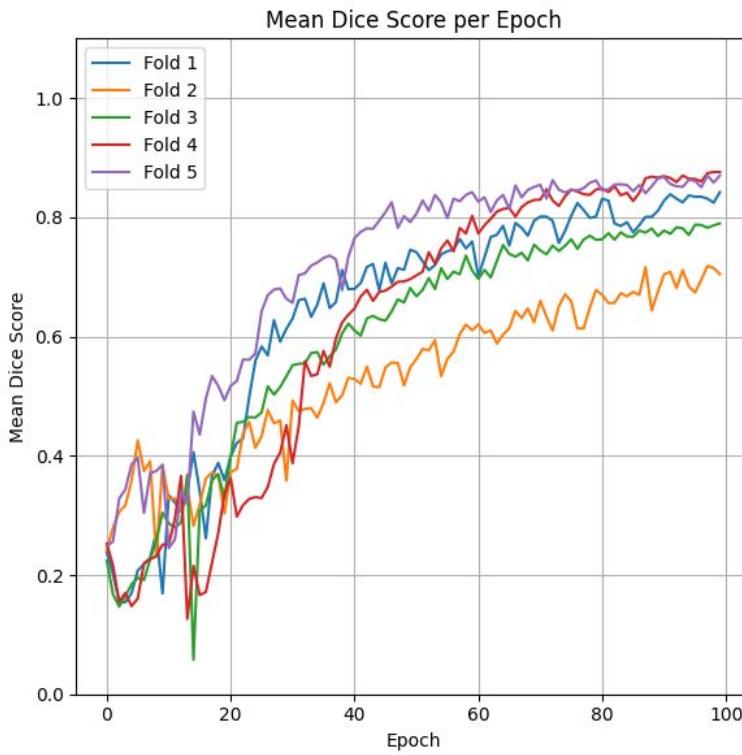
- nnU-Net loss curve on Low (30) training dataset



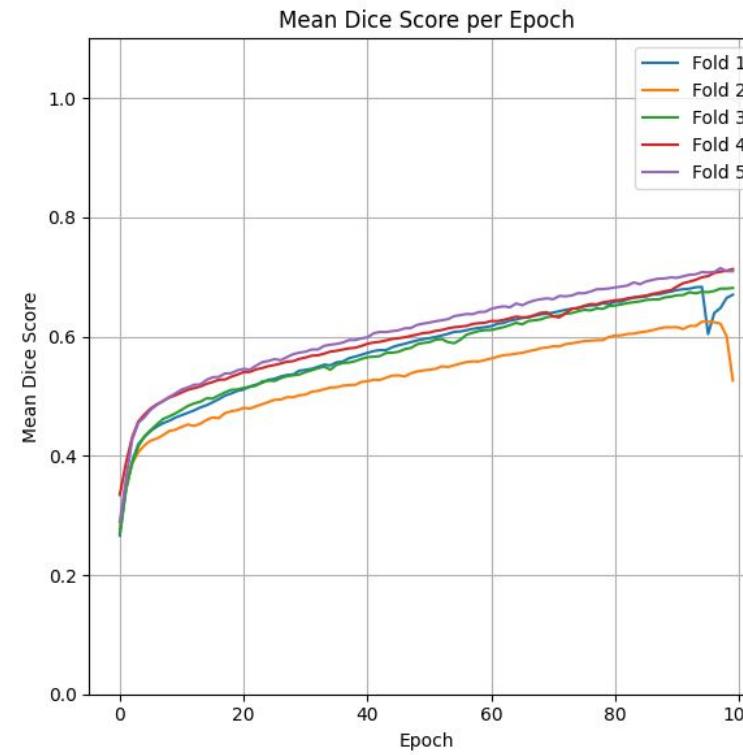
# Results

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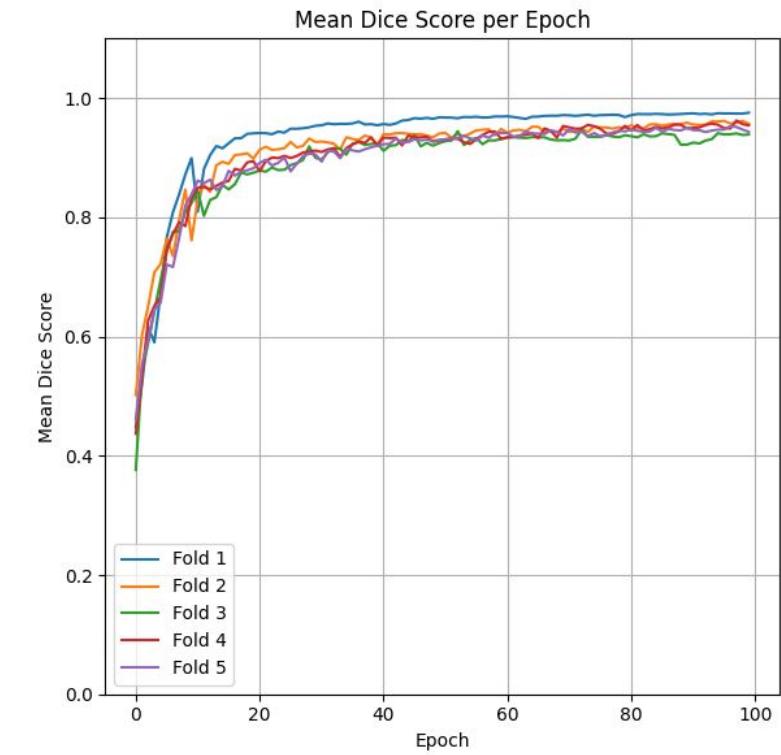
- Mean Dice score on normal (300) training dataset



U-Net



nnU-Net

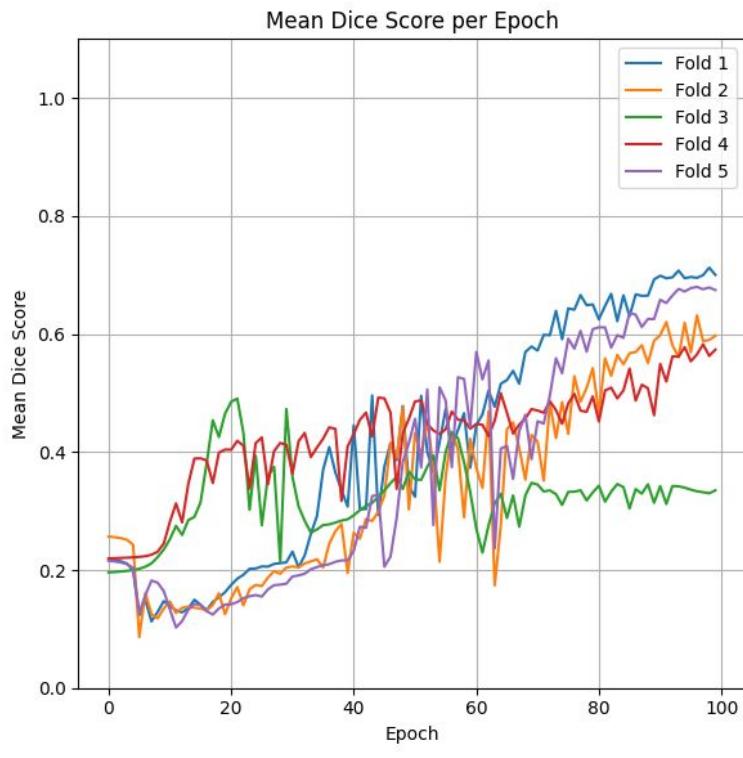


Patch-Based Attention U-Net

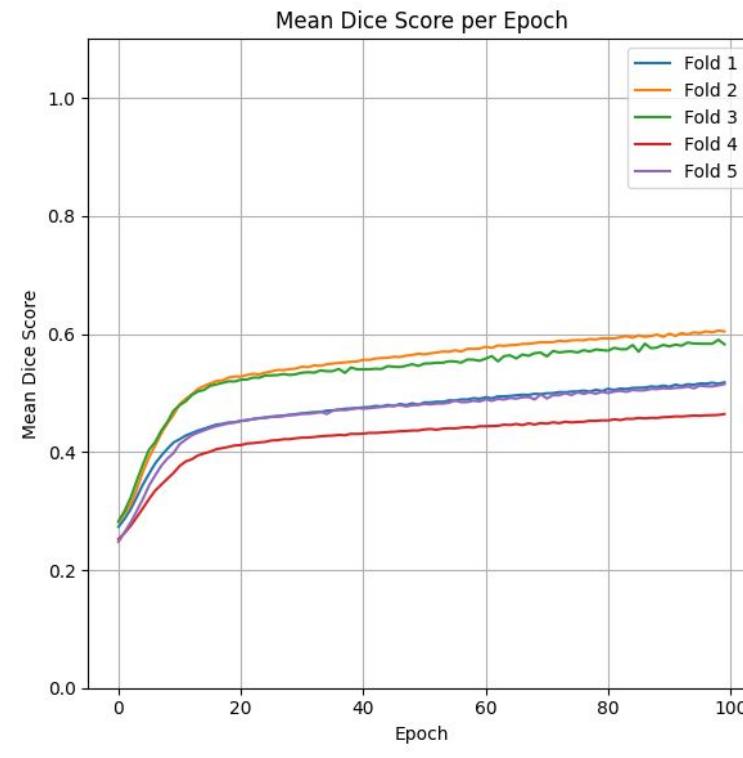
# Results

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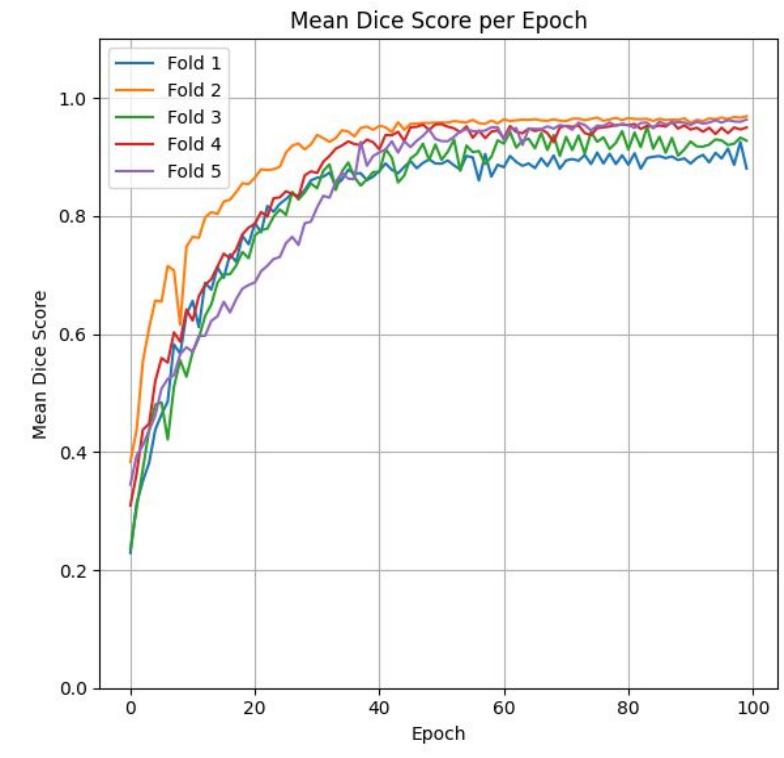
- Mean Dice score on low (30) training dataset



U-Net



nnU-Net



Patch-Based Attention U-Net

# Results

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- Mean Dice score on test Dataset using normal (300) training data

	<b>Mean Dice Score on test dataset</b>
U-Net	0.8383
nnU-Net	0.6968
Patch-Based Attention U-Net	0.8754

# Results

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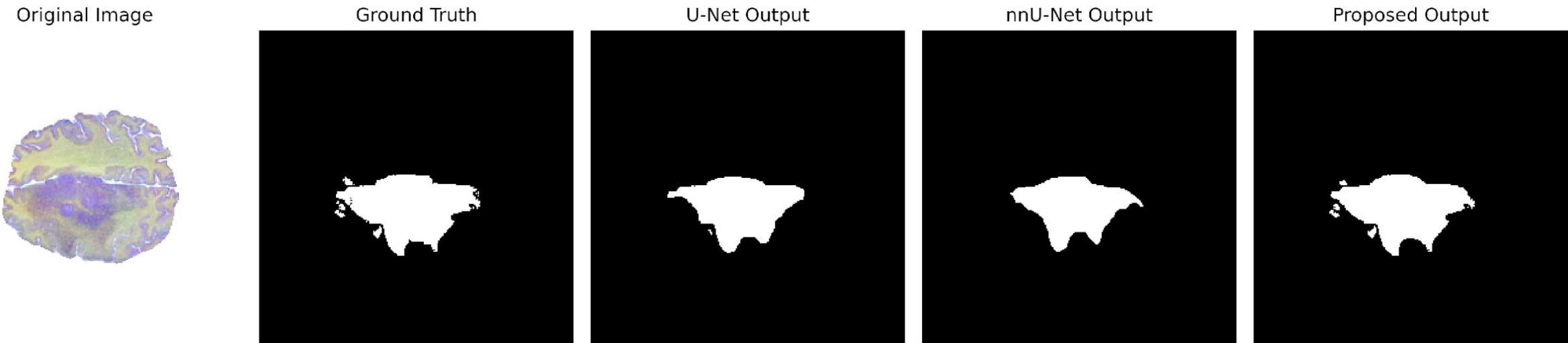
- Mean Dice score on test Dataset using Low (30) training data

	Mean Dice Score on test dataset	Mean Dice Score on remaining Dataset
U-Net	0.5650	0.4871
nnU-Net	0.5369	0.4589
Patch-Based Attention U-Net	0.7560	0.7270

# Results

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- Segmentation Output comparison using normal (300) training dataset

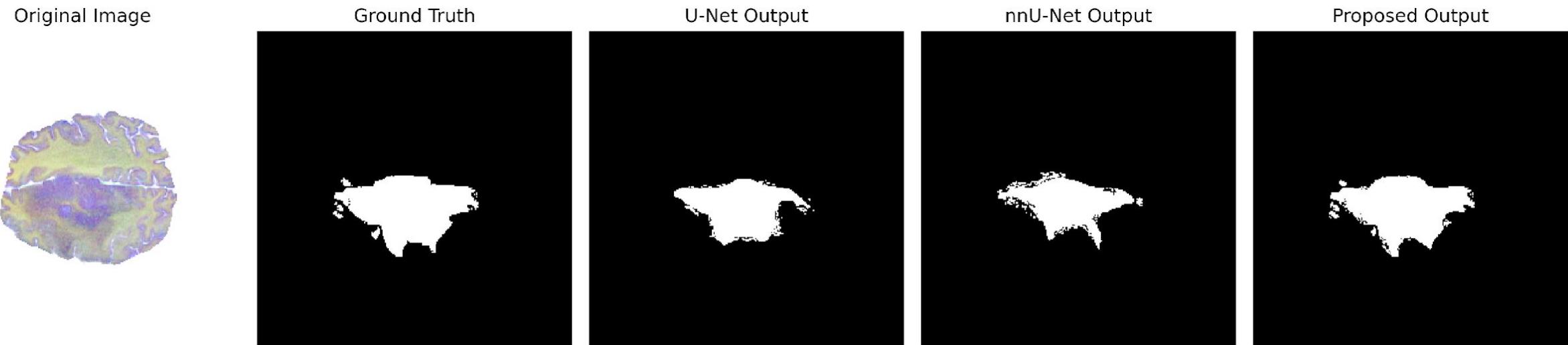


- Patch-Based Attention U-Net segments finer details of the tumor

# Results

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- Segmentation Output comparison using low (30) training dataset



- Patch-Based Attention U-Net's is more accurate when using limited training data

# Conclusion

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- U-Net structures achieve faster mask generation than Convolutional Neural Networks
- Patch-Based Attention U-Net achieves more accurate segmentation outputs
- Patch-Based Attention U-Net can converge when using low training data
- Dynamic loss function selection can mitigate class imbalance issues

# Future works

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- Explore mamba-based or transformer-based light weight models for better segmentation outputs using low training data
- Test model performance across BraTS challenge in other year (2012 ~ 2025)
- Repeat experiment using different random seeds to ensure robustness of the method
- Explore multiclass segmentation for whole tumor (WT), Tumor core (TC), Enhanced tumor (ET) to provide extra information



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# Thank you for Listening!