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Medical Image Captioning

INTRODUCCIÓN

I. INTRODUCTION

Image captioning is the task of automatically generating an accurate text description based on an image. Among its

multiple uses, generating medical diagnosis using images has become one of the most important nowadays. Medical images are essential tools for clinical diagnosis since they allow doctors to diagnose various medical conditions; however, because of the complexity of these images, it requires experienced professionals to deliver a correct diagnosis and it's a very time consuming task. X-ray imaging is one of the most used methods because of its affordable and accessible nature and it is used to diagnose not only broken bones but a wide variety of lung diseases, making it hard to generalize exactly what to look for at first, since different diseases may have similar effects with very subtle differentiators, and this problem is common among medical imagery. Thus, there is a current need for a tool that reliably guides doctors in the areas of images they should focus on, as well as in interpreting and summarizing possible disease symptoms based on images; so, by fighting the world's growing shortage of medical doctors, the process could become more efficient and effective, more people could be diagnosed, and ultimately more illnesses could be treated. Because of the importance of this problem, there has been a lot of studies and approaches to develop tools

that help professionals with this task. From simple image segmentation to detect anomalous sections of an image to deep learning models to predict illnesses based on images; the specific application covered in this paper is automatic caption generation for medical images, which is a core technology for

relevant and coherent descriptions of the images using medical terminology to provide doctors valuable information in a quickly manner. In general, these systems work by extracting features from images with a specific method so they can be later used to generate captions with a text generating technique. This is a big challenge because of the nature of this

automated diagnosis where the goal is to generate accurate,

area, since we are diagnosing people, the terminology needs to be very precise and the description coherent so it does not confuse the user or cause an incorrect diagnosis. Nowadays due to the success of deep learning in image detection and text generation it is being researched as a solution to this problem.

 Exploration of two different feature extraction approaches to compare their results against their demand of training resources.

participating approach in the image captioning task of the 2023

ImageCLEF campaign. And the contributions are:

This paper is intended to be a

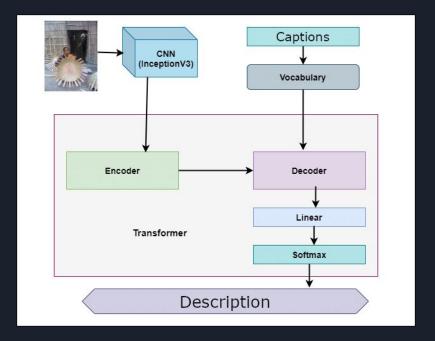
 Train an existing model with a different dataset to see how it behaves with medical imagery.

ESTADO DEL ARTE

II. RELATED WORK

Recently, multiple encoder-decoder systems have been implemented. Usually, convolutional neural networks (CNN) perform encoder tasks to extract visual information as features, and recurrent neural networks (RNN) are used as decoders to generate the final text. Other works use RNNs to transform extracted features into shape-related information and then use long short term memory (LSTM) to get the final description [1]. Currently this is the basis for medical image captioning, but there are many works that by introducing different modifications achieve better results in specific areas, for example, Yuxuan Xiong et al. [5] in "Reinforced Transformer for Medical image Captioning" proposes a hierarchical transformer based model consisting on an image encoder that extracts heuristic visual features by a bottom-up attention mechanism and a non-recurrent captioning decoder that improves computational efficiency by parallel computing and achieving a BLEU-1 performance increase of 50% compared contemporary methods. Other state-of-the-art methods use attention and transformer models [2, 3], like "Medical image captioning via generative pretrained transformers" by

Alexander Selivanov et al. [3] where they use the Show-Attend-Tell model and the GPT-3 model to generate a textual summary of radiology records containing essential information about the pathologies found, the location and 2Dheatmaps that localize each pathology and with that combination of language models they outperformed other models, introducing a new preprocessing pipeline that allows the obtention of higher metrics.



METODOLOGIA

Vocabulary cleaning

```
def remove punctuation(text original):
   text_no_punctuation = text_original.translate(string.punctuation)
   return(text no punctuation)
def remove single character(text):
   text len more than1 = ""
   for word in text.split():
       if len(word) > 1:
           text len more than1 += " " + word
   return(text len more than1)
def remove numeric(text):
   text no numeric = ""
   for word in text.split():
      isalpha = word.isalpha()
      if isalpha:
           text no numeric += " " + word
   return(text_no_numeric)
def text clean(text original):
   text = remove punctuation(text original)
   text = remove single character(text)
   text = remove numeric(text)
   return(text)
for i, caption in enumerate(train df.caption.values):
   newcaption = text clean(caption)
   train df["caption"].iloc[i] = newcaption
```

Clean Vocabulary Size: 26595

Dataset



Postop 22-month CT scan (sagittal): Posteriorly the graft seated in a sound bone



Enhanced magnetic resonance imaging of head revealed bilateral cerebral and cerebellar hemispheres abnormal meningeal enhancement.



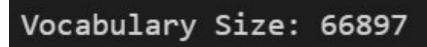
Enhanced magnetic resonance imaging of spinal cord delineated multiple enhancement nodules in spinal cord, cauda equina, and cristae membrane (arrow).



Sagittal T2-SPAIR image illustrating the "fluid sign (arrow)" in the acute osteoporotic compression fracture.



CT demonstrating partially obstructed airway.CT: computed tomography.



FOLLOW UP Data Loader

```
class ImageCaptionDataset(Dataset):
    def init (self, csv file, root dir, transform=None):
        self.annotations = pd.read csv(csv file, sep = "\t")
        self.root dir = root dir
        self.transform = transform
    def len (self):
        return len(self.annotations)
    def getitem (self, index):
        img id = self.annotations.iloc[index, 0]
        img name = img id + ".jpg"
        img path = os.path.join(self.root dir, img name)
        image = plt.imread(img path)
        if self.transform is not None:
           image = self.transform(image)
        caption = self.annotations.iloc[index, 1]
        return image, caption
```

```
# Create train, validation and test datasets
train_dataset = ImageCaptionDataset(csv_file='data/dataset/train_labels.csv',
root dir='data/dataset/train images/train', transform=transform)
val_dataset = ImageCaptionDataset(csv_file='data/dataset/valid_labels.csv',
root_dir='data/dataset/valid_images/valid', transform=transform)

# Create data loaders for each dataset
train loader = DataLoader(train dataset, batch size=16, shuffle=True)
val loader = DataLoader(val dataset, batch size=16, shuffle=True)
```



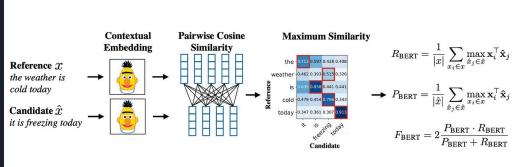
Feature extraction

Inception 3 (CNN)

```
def load image(image path):
    img = Image.open(image path)
    transform = transforms.Compose([
        transforms.Resize(299),
        transforms.CenterCrop(299),
        transforms.ToTensor(),
        transforms.Normalize(mean=[0.485, 0.456, 0.406],
                             std=[0.229, 0.224, 0.225])])
    img = transform(img).unsqueeze(0)
    return img, image path
# Load the inception v3 model
image_model = models.inception_v3(pretrained=True)
# We're not training so the gradients are turned off for the model
for param in image_model.parameters():
    param.requires grad (False)
# Move the model to the GPU
image model = image model.to(device)
image model.fc = torch.nn.Identity()
image features extract model = image model.eval()
```

Metrics

Introducing **BERTScore**



Source: Bertscore: Evaluating text generation with bert

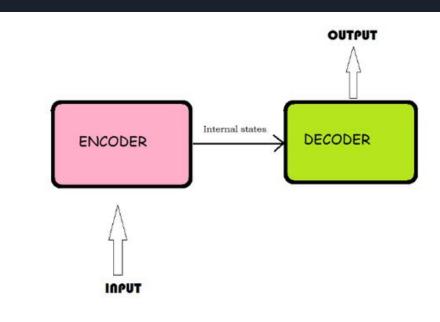
BERTScore

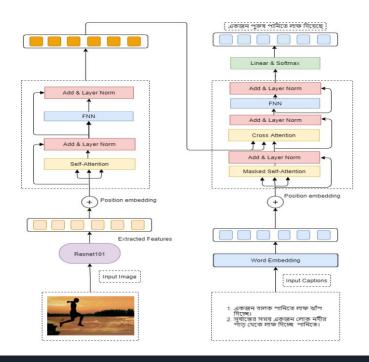
Code for Bertscore is available at https://github.com/Tiiiger/bert score

- Contextual embedding
- More robust
- Longer memory
- Rescaling

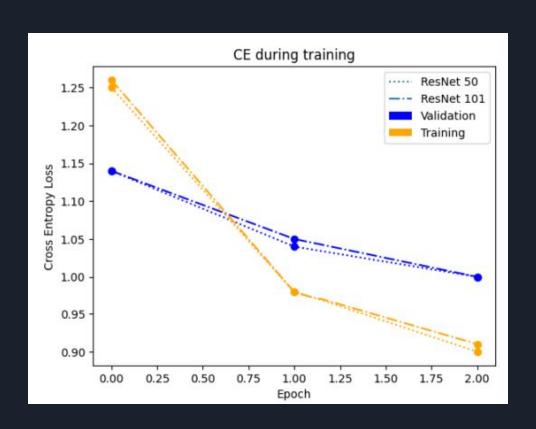
Model type: microsoft/deberta-xlarge-mnli

Encoder-Decoder





Experiments-Performance



Experiments-Metrics

Encoder Model	Minutes per epoch	# of parameters	BERT F1
ResNet-50 @ 3	197	120M	0.5949
ResNet-101 @ 3	244	138M	0.6111
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TABLE I

FOLLOW UP Metrics



Postoperative chest radiograph showing normal left clavicle

FOLLOW UP	Similarity Matrix											
Metrics	chest	0.893	0.685	0.805	0.815	0.895	0.885	0.828	0.814	0.824	0.723	0.769
	radi	0.755	0.678	0.742	0.955	0.808	0.747	0.737	0.712	0.753	0.692	0.701
Reference	ograph	0.826	0.710	0.785	0.874	0.964	0.842	0.796	0.787	0.809	0.717	0.801
postoperative chest radiograph	showing	0.807	0.668	0.786	0.789	0.871	0.980	0.844	0.816	0.807	0.708	0.762
showing normal left clavicle	normal	0.823	0.674	0.797	0.805	0.835	0.874	0.974	0.838	0.848	0.729	0.800
Candidate	cl	0.826	0.697	0.855	0.817	0.832	0.851	0.843	0.885	0.968	0.822	0.866
chest radiograph showing normal clavicles	av	0.742	0.643	0.807	0.747	0.745	0.754	0.744	0.815	0.850	0.984	0.847
	icles	0.782	0.668	0.828	0.768	0.823	0.811	0.819	0.850	0.886	0.835	0.961
		Post	operative	chest	radi	diaph	showing.	normal	LEFT	٥	84	.t/e

	Similarity Matrix (after Rescaling)											
FOLLOW UP Metrics	chest	0.365	-0.864	-0.155	-0.094	0.375	0.317	-0.019	-0.101	-0.045	-0.642	-0.370
	radi	-0.452	-0.910	-0.527	0.733	-0.139	-0.496	-0.559	-0.705	-0.465	-0.827	-0.773
Reference	ograph	-0.031	-0.718	-0.275	0.256	0.786	0.064	-0.211	-0.261	-0.131	-0.678	-0.177
postoperative chest radiograph	showing	-0.141	-0.967	-0.266	-0.251	0.239	0.882	0.076	-0.092	-0.146	-0.730	-0.409
showing normal left clavicle	normal	-0.051	-0.929	-0.204	-0.155	0.021	0.256	0.848	0.041	0.100	-0.607	-0.183
Candidate	cl	-0.030	-0.793	0.143	-0.084	0.006	0.116	0.072	0.321	0.813	-0.057	0.204
chest radiograph	av	-0.529	-1.113	-0.145	-0.499	-0.511	-0.460	-0.520	-0.095	0.109	0.906	0.096
showing normal clavicles	icles	-0.291	-0.966	-0.021	-0.376	-0.049	-0.120	-0.071	0.109	0.325	0.024	0.769
		Post	operative	thest	(adi	diaph	Showing	normal	left.	δ	84	.Lle

FUTURE TESTS

We are testing Multihead Attention model, we will try different models

$$\begin{aligned} \text{MultiHead}\left(Q,K,V\right) &= \text{Concate}\left(\text{head}_{1},\ldots,\text{head}_{h}\right)W^{O},\\ \text{wherehead}_{i} &= \text{Attention}\left(QW_{i}^{Q},KW_{i}^{K},VW_{i}^{V}\right). \end{aligned}$$

Different feature extraction models

Fine tuning Generative Pre-trained Transformer (GPT) models

Conclusión

An AP radiograph showing the healed osteotomy showing radioluce	edicted
An AP radiograph showing the healed osteotomy showing radioluce	scan of the abdomen owing a large mass in eright kidney.
TABLE III	- ray of the left knee owing a well - defined diolucent lesion in the it femur.

- Hardware consumption

- backbone not the main problem