

# Interactive Contouring Through Contextual Deep Learning

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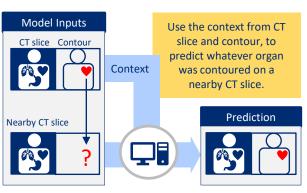
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**QUANTITATIVE RESULTS** 

#### **OBJECTIVE**

We investigate whether an interactive contouring approach

automatic solutions exist, or assist when editing contours.



### Multi organ model 💚 🗥 🔎 📢 Single organ model Initial iteration Final model Initial iteration Final model Dice Score 0.6 0.6 0.6 0.4 0.2 0.2 0.2 0.2 ■ Oesophagus ■ Heart ■ Lung (left) □ Lung (right) □ Spinal cord

## QUALITATIVE RESULTS (spinal cord) Prediction Expert contour Multi organ model 💙 🗥 🐚 Single organ model Spinal cord Predicting Incorrectly predicts heart! Prediction and expert contour aggree well

Single organ model performs well only on the organ it was trained on despite given context.

Multi organ model performs well on all organs. It can accurately predict from context, which organ should be contoured.

Performance at the first iteration is attributed to simple copying of input contours.

#### CONCLUSIONS

User provided context can be incorporated into deep learning contouring to facilitate semi-automatic segmentation

An appropriate training set must be selected to ensure that the approach generalises to use context rather than learning organspecific segmentation.

In the future, this approach may enable faster de-novo contouring in clinical practice.

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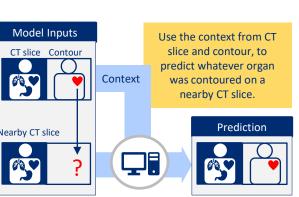
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can leverage contextual information using deep learning to assist clinicians in manual contouring tasks.

This can decrease time spent contouring where no fully



### **MATERIAL AND METHODS**



2 machine learning models with identical architecture, either using a single organ (the heart) or all 5 OARs (multi-organ model) in their training set.



12082 contoured slices in training **4647** contoured slices in testing



**5** Different organs at risk (OARs) are investigated: oesophagus, heart, left lung, right lung and spinal cord