# MIA - Crowd-assisted Medical Image Annotation

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Lung Cancer

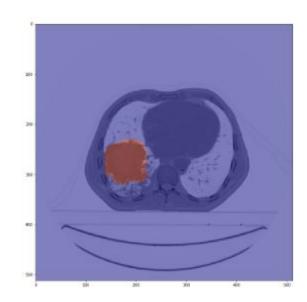
Claims
2.5 Million
lives
yearly

### Problem — Personalized treatment

- For cases in which surgery is not an option, chemoradiotherapy is the standard treatment modality.
- However, numerous other treatment options exist, such as immunotherapy and a variety of systemic anti-cancer therapies.
- In order to **personalize treatment**, we <u>extract quantitative imaging features</u> from the tumor of the patient.

### Problem — Annotating images

- <u>Extract quantitative imaging features</u> is done by domain experts i.e. doctors
  - Time consuming
  - Not scalable
  - Expensive
- Automated methods such as machine-learning require large amounts of input data to perform accurately
- Non-experts
  - Fast
  - Scalable
  - Inexpensive



### Research Question(s)

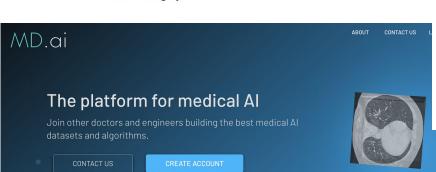
Can we use non-experts via crowdsourcing to curate open clinical imaging data?

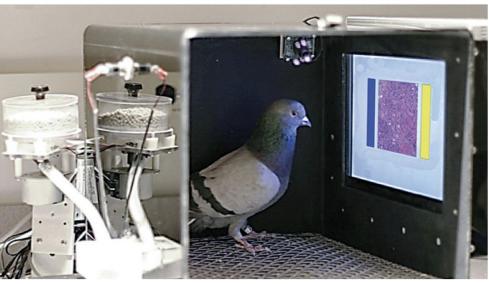
Can we assist non-experts to carry out a mission-critical labeling task?

# Related Work - Image Annotation



Figure 1: An example of bounding box annotations for the "bottle" category.





A flock of pigeons was able to correctly spot cancer in breast tissue biopsy images with 99% accuracy, on par with human experts. R. M. LEVENSON *ET AL.*, *PLOS ONE* (18 NOVEMBER 2015)

#### Pigeons spot cancer as well as human experts

By John Bohannon | Nov. 18, 2015, 2:00 PM

### Methodology — Dataset



- medical images of cancer, available for public download and re-use
- data is organized as "Collections", typically of patients related by a common disease
   e.g. lung cancer
- images are available in a DICOM format
- 422 non-small cell lung cancer (NSCLC) patients\*
  - pretreatment CT scans, manual delineation by a radiation oncologist of the 3D volume of the gross tumor volume and clinical outcome data are available
- of these 422, 360 images have been contoured by experts (doctors).
- the remaining 62 require precise contouring, which will be our dataset for the crowdsourcing experiment.

<sup>\*</sup>https://wiki.cancerimagingarchive.net/display/Public/NSCLC-Radiomics

### Preliminary Experiment on Figure Eight

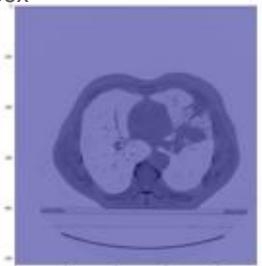
figure eight

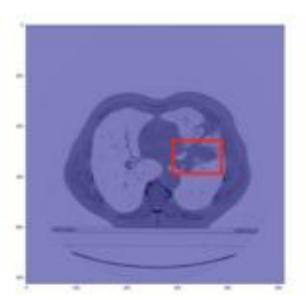
No. of Tasks: 15

• No. of Workers: 3 per task

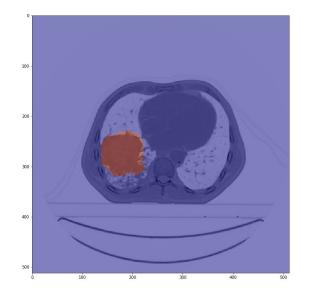
Task Design: bounding box

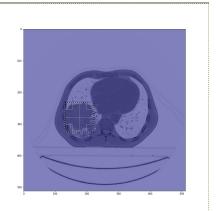
Payment: 5 cents/task



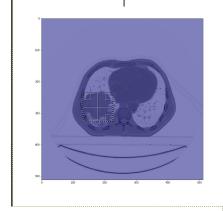


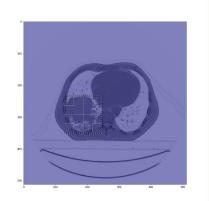
### **Preliminary Results**



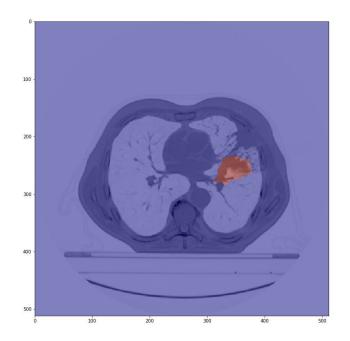


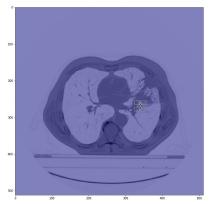


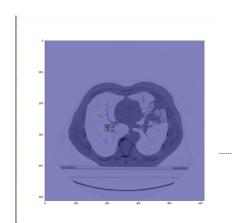




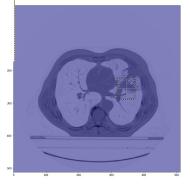
### **Preliminary Results**







## figure eight



### Figure Eight Results & Issues

- 6/15 correctly identified
- Difficult to measure precision in the interface
- Only allow bounding boxes, we require precise contours
- No support for interactive training

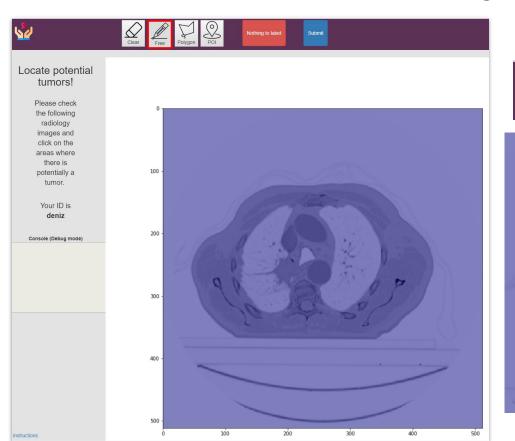
To overcome these issues we need a custom crowdsourcing image annotation software.

#### Interactive Interface

- Interactive training
- In-built quality control measures
- Allow the workers to choose different methods for contouring
  - Free hand
  - Polygon
  - Point of interest
- Each HIT consists of 4 microtasks (with 4 different methods)
  - Randomized across HITs
  - Multiple workers per microtask (optimal number determined via CrowdED\*)

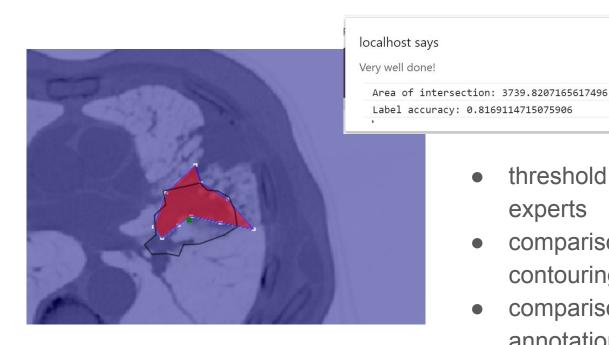
<sup>\*</sup>CrowdED: Guideline for Optimal Crowdsourcing Experimental Design
A Zaveri, PH Serrano, M Desai, M Dumontier. Companion of the The Web Conference 2018 on The Web
Conference 2018, 1109-1116

### Interactive Interface - Design





### Quality Assurance & Evaluation



 threshold of contour overlap with experts

OK

- comparison of different methods of contouring
- comparison of cost and time of annotation between experts and non-experts

### **Expected Results**

- Determine the **feasibility** of using non-experts for contouring clinical images
- Learn how non-experts compare with respect to expert annotated images in the precise contouring of images along with costs and time involved by each group.
- Complete annotated dataset of the Cancer Imaging Archive collection on lung cancer
- A scalable and reproducible methodology that can be re-used in other use cases by researchers with similar research questions
- Feed data into an existing Machine Learning image recognition software developed at BISS

### **Impact**

- Annotated data can be fed into machine learning algorithms\* to increase precision of automated contouring
- Identify the best treatment (in terms of survival and quality of life) for the patients
- Enable patients to be properly informed about each treatment option and has the potential to save lives and increase quality of life for cancer patients

\*Bradley J. Erickson, Panagiotis Korfiatis, Zeynettin Akkus, Timothy L. Kline. Machine Learning for Medical Imaging. Radiographics. 2017

### Questions?

http://bit.ly/medical-image-annotation

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### BE the crowd!

Your chance to contribute!

### Instructions

- Go to <a href="http://out5.net/workshop/">http://out5.net/workshop/</a>
  - a) Find your name on the list and click on it. You will be redirected to the annotation platform.
- 2) Check the instructions, and positive and negative examples.
- 3) Start the interactive **training session** 
  - a) Interact with the platform,
  - b) Annotate and check the accuracy your annotations,
  - c) Keep an eye on the Normal CT Scan of the Chest (upper-right corner)
  - d) Complete the 11 step training. **Begin annotating!**
- 4) Complete the annotation tasks (50 in total)
  - a) **Submit** your annotation or mark **Nothing to label** if you do not see a tumor.
  - b) Check the overall progress
  - c) You can take the training again using the link on the bottom-left corner



