

Vision Transformers in Medical Imaging: A Review

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KEYWORD

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ABSTRACT

Transformer, a model comprising attention-based encoder-decoder architecture, have gained prevalence in the field of natural language processing (NLP) and recently influenced the computer vision (CV) space. Because of the similarities between computer vision and medical imaging, one question researchers are asking is can the impact of transformers on computer vision be translated to medical imaging? In this paper, we provide a comprehensive and recent review on the application of transformers in medical imaging by; describing the transformer model and comparing it with a diversity of convolutional neural networks (CNNs), detailing the transformer based approaches for medical image classification, segmentation, registration and reconstruction with a focus on the image modality, comparing the performance of state-of-the-art transformer architectures to best performing CNNs on standard medical datasets.

1 Introduction

The transformer (Vaswani et al., 2017), identified by its attention mechanism, has become the dominant deep learning architecture in the field of natural language processing (NLP) due to its success in text to speech translation (N. Li et al., 2019), natural language generation (Topal et al., 2021), text synthesis (N. Li et al., 2019) and speech recognition (C.-M. Feng et al., 2022). The success of transformers in the NLP field can be attributed to their ability to capture long range dependencies that aids in the retention of contextual information (Vaswani et al., 2017) as opposed to recurrent neural networks (RNNs) (Graves et al., 2013; Sak et al., 2014). RNNs utilize a sequential inference process and cannot efficiently capture long range dependencies. A plethora of transformer architectures for natural language processing have been proposed since 2017, a few of the popular architectures are; Bidirectional Encoder Representation from Transformer (BERT) and its variants (Devlin et al., 2019; Lan et al., 2019; Y. Liu et al., 2019), Generative Pre-Trained Transformer

(GPT) and its variants (Hoppe & Toussaint, 2020; Radford et al., 2018; Winata et al., 2021).

In the computer vision field, convolutional neural networks (CNNs) have achieved efficient performance mainly due to the structure of their architectures (K. He et al., 2016; Louis, 2013; C. Peng et al., 2021; Z. Yang et al., 2022; Y. Zhang et al., 2020). It was later discovered that CNNs exploits the locality of pixels aiding them capture vision semantics and yield acceptable performance even on small datasets (d'Ascoli et al., 2021), they are also known to possess progressively enlarge receptive field that aids in the representation of image hierarchical structure in form of semantics. However, the advent of transformers apprised researchers of CNNs lack of capturing long range dependencies such as the extraction of contextual information and the non-local correlation of objects (Y. Zhang et al., 2020). This led researchers to attempt to incorporate self-attention either spatially (Cao et al., 2019; Z. Huang et al., 2019; Xiaolong Wang et al., 2018) or channel-wise (Hu et al., 2020; Q. Wang et al., 2020; Woo et al., 2018), into the conventional CNN architecture. Eventually,

the first pure transformer for computer vision application named the vision transformer (ViT) was proposed (Dosovitskiy et al., 2020), in which they demonstrated the equivalence between multi-head self-attention attached to a multi-layer perceptron to CNN by considering image classification as a sequence prediction task hence utilizing patch down-sampling and quadratic positional encoding in order to capture long-range dependencies between image tokens (patches). In most recent literatures, these pure or hybrid vision transformers (ViTs) have achieved state-of-the-art performance over the previous CNN benchmarks. This is the case in a variety of computer vision tasks, such as image classification (Dosovitskiy et al., 2020), image reconstruction (Jiang et al., 2021), pixel segmentation (S. Zheng et al., 2021), image captioning (Cheng et al., 2021), three-dimensional imaging (H.-Y. Zhou et al., 2021) and video applications (L. Zhou et al., 2018).

CNNs have substantially influenced the field of medical imaging because of the pertinent need for classification, segmentation and detection required in a variety of imaging modalities including ultrasound, X-ray radiography, magnetic resonance imaging (MRI), computed tomography (CT), whole-slide-images (WSIs) etc. (Darby et al., 2012). Surprisingly, about 90% of all healthcare data are compiled instances of the various medical imaging modalities; this is according to a report published by the EMC. This means that there is an outlay of data available to foster efficient modelling for clinical diagnosis and decision-making. These CNNs (K. He et al., 2016; Hu et al., 2020; Weng & Zhu, 2021) have excelled because of their ability to learn spatio-temporal dependencies within an image and utilize this in the extraction of distinguishable representation (C. Li et al., 2020; Susanti et al., 2017; Yu & Helwig, 2022). However, their convolutional layers have stationary weights that do not adapt for a specific input image, and their models have a limited effective receptive field that limits their ability to capture long-range dependencies between pixels.

After the success of transformers on natural images, researchers began queries on applying self-

attention in medical imaging in order to effect long-range dependencies between pixels. Recently transformers have achieved comparable performance to state-of-the-art CNNs on medical image classification (Xie, Zhang, Xia, et al., 2021), detection (Ghaderzadeh & Asadi, 2021), segmentation (Tragakis et al., 2022) and reconstruction (B. Zhou et al., 2022). And since 2021, literatures have recorded transformers of better performance than state-of-the-art CNNs however the performance of transformers over CNNs is still ambiguous and newer modifications to the transformer architecture emerge every day in an attempt to mitigate transformer related problems.

The goal of this paper is to provide a detailed review on the application of transformers in medical imaging and to compare their performance with state-of-the-art CNNs, to this end; we have reviewed over 150 articles on the application of transformers in medical imaging and about 50 articles on the application of CNNs. We have obtained our publications from a few publishers; Springer, IEEE, Nature and Elsevier. We also included various conferences and Arxiv pre-prints.

The main contributions of this paper is to provide a detailed and recent review (considering works published September 2022) of transformer state-of-the-art in medical imaging and to provide a detailed comparison between CNN and transformer benchmarks; we do this in the discussion section. To aid in visual identification and comprehension we have included a taxonomy articulating the disparate application of transformers in medical imaging and their papers.

Our paper is outlined as follows: in section 2, we introduce the preliminaries of the original transformer, we also look into CNNs by detailing the various ways in which they are combined with transformers as can be found in literature. In section 3, we review current progress of the transformer state-of-the-art in medical image classification, segmentation, registration and reconstruction. In section 4, we identify all known positives and negatives of the transformer, and provide a detailed comparison between present state-of-the-art transformer approaches and that of CNNs.

2 TRANSFORMERS

2.1 Attention in Transformers

The fundamental transformer architecture as proposed by Vaswani *et al.* (Vaswani et al., 2017) is a sequence-to-sequence model that comprises self-attention and point-wise feed-forward network (FFN) that extracts global dependencies between tokens (words). The complete architecture includes layer normalization after each attention block, a linear transformation function and a softmax function. This architecture has formed the basis for more complex and efficient, supervised or self-supervised models today, a part of this success can be attributed to the concept of Attention.

Attention mechanism is the primary way in which humans sort relevant from irrelevant data by unintentionally paying attention to some part of a data and discarding other parts. Few scientists have attempted to build neural networks that model this behavior, initially for use in language processing tasks (Bahdanau et al., 2015; J. Dai et al., 2017; K. Xu et al., 2015). A typical attention, regarded as the “Bahdanau attention” computes a weighted sum of each feature thereby highlighting the most relevant features from a feature matrix.

Self-attention was designed to emphasize relationships between data regardless of their position in the sequence. It is mathematically expressed by a map function of queries, keys and values such that for each input $X \in \mathbb{R}^c$, $i = 1, \dots, n$ there exist a query $Q \in \mathbb{R}^{n \times d}$, a key $K \in \mathbb{R}^{n \times d}$, and a value $V \in \mathbb{R}^{n \times d}$, which are utilized in generating learning parameters W^q, W^k, W^v respectively.

$$\begin{aligned} Q &= X \times W^q, & W^q &\in \mathbb{R}^{c \times d}, \\ K &= X \times W^k, & W^k &\in \mathbb{R}^{c \times d}, \\ V &= X \times W^v, & W^v &\in \mathbb{R}^{c \times d}, \end{aligned} \quad (1)$$

The output is a probability this requires normalization, which is usually achieved by a softmax function to attain an output distribution represented by the equation (2).

$$Atten(Q, K, V) = softmax\left(\frac{QK^T}{\sqrt{D_K}}\right)V = AV \quad (2)$$

The output of a self-attention block is the sum of element V and the matrix A equipping this attention block with the ability of capturing global dependencies with a data.

Multi-head self-attention can be applied to better capture hierarchical features. They are computed in parallel after which the final output is obtained by concatenating each individual attention block. This operation is similar to the use of multiple kernels within convolution operations, mathematically expressed by:

$$\begin{aligned} Z_i &= Attention(Q \times W_i^q, K \times W_i^k, V \times W_i^v), \\ MSA(Q, K, V) &= concat[Z_1, \dots, Z_h] \times W^o \end{aligned} \quad (3)$$

Here h represents the total number of heads and W^o represents an output matrix of the concatenated projection of all self-attention W_i^q, W_i^k, W_i^v of the i^{th} attention.

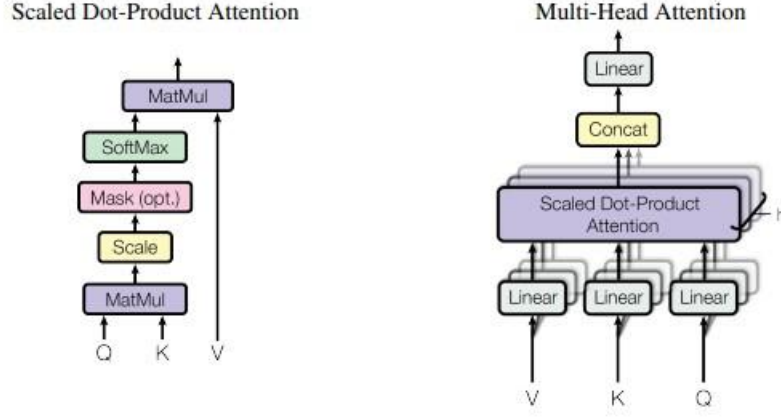


Figure 1: (left) Self-Attention. (Right) Multi-Head Self-Attention: multiple attention layers arranged in parallel (Vaswani et al., 2017).

2.2 Point-Wise Feed-Forward Network

The output from the multi-head self-attention block is fed into a feed-forward network comprising two linear activation function and a rectified linear unit (RELU) activation, as expressed in equation (4).

$$FFN(X) = ReLU(XW_a + B_a)W_b + B_b \quad (4)$$

Here X represents the output from the previous layer and W_a, W_b, B_a, B_b are trainable parameters of dimensions D^c and D^n , represented as $W_i \in \mathbb{R}^{D^c \times D^n}$ and $B_i \in \mathbb{R}^{D^c \times D^n}$ where $i = a, b$. It is to be noted that n should always be larger than c .

2.3 Positional Encoding

Learnable parameters are typically employed to aid the network retain positional information, this could

be achieved by recurrence or convolutions however, in the transformer architecture this is achieved by inputting information about the position of tokens (words or patches) into the sequence. Vaswani *et al.* (Vaswani et al., 2017) experimentally utilized sine and cosine functions of varying frequencies

$$PE_{(pos,i)} = \begin{cases} \sin(pos \times w_n) & \text{if } i = 2n \\ \cos(pos \times w_n) & \text{if } i = 2n + 1 \end{cases} \quad (5)$$

$$w_n = \frac{1}{10000^{2n/k}}, \quad n = 1, \dots, k/2$$

Here pos represents the initial position of the vector while n represents the length of the vector, i represents the particular instance. In the first pure vision transformer by (Dosovitskiy et al., 2020) the learned position is outputted as a vector and serves as input into the encoder. This vector is a sequence of n -dimension patches where $n = 1, \dots, k$ while a lower n -value will store better positional information; it will also be computationally expensive.

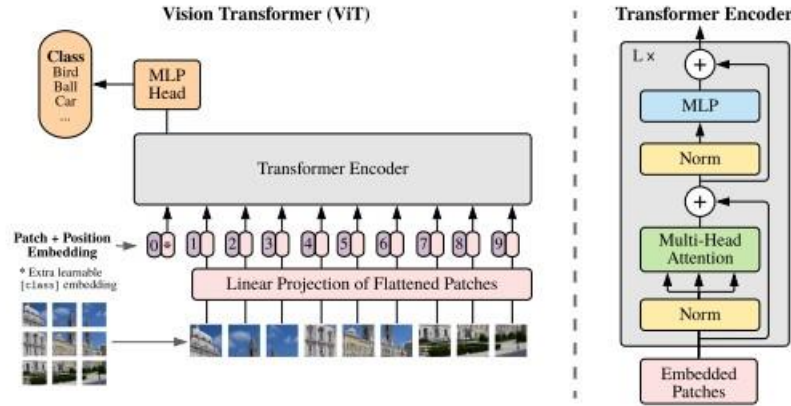


Figure 2: Vision Transformer model overview: Based on original transformer architecture (Dosovitskiy et al., 2020).

2.4 Vision Transformers

A variety of transformer based vision models exists, a few of the prominent ones are; Vision Transformer (ViT) (Dosovitskiy et al., 2020), Detection Transformer (DETR) (Carion et al., 2020), data-efficient image transformer (DeiT) (Touvron et al., 2020) and Swin-Transformer (Ze Liu et al., 2021). The ViT was the first pure adaptation of the vanilla transformer in the field of computer vision. It entails an encoder and a task specific decoder structure where input images are broken into a sequence of non-overlapping patches of size $(C \times P \times P)$. Here C represents the number of channel of the image and P represents its length and width. The information about the position of patches in the image is converted into a vector. This positional information, along with the sequence of non-overlapping patches are fed into the encoder block of the transformer containing multi-head self-attention, layer normalization and a multi-layer perceptron (FFN), this is depicted in Figure 2.

DETR is a hybrid that attaches a transformer encoder to a CNN architecture; it was the first attempt at partially conveying attention from the vanilla transformer to a vision task of object detection. The swin-transformer was designed to reduce the computational cost of the ViT and was tested majorly on segmentation tasks. (Ze Liu et al., 2021) attempted varying patch sizes so as to reduce the requirement of full attention due to the input sequence of non-overlapping patches; they introduced the shifted window attention that

creates patches of various sizes in a hierarchical order, and further assists in preserving spatial information.

The efficiency of the ViT could only be observed during large scale training as it performs poorly on small datasets, Touvron et al. (Touvron et al., 2020) proposed the DeiT in an attempt at solving this problem. DeiT adopts a CNNs teacher and a transformer student structure in a knowledge distillation framework in which a distillation token is added for the purpose of learning from the teacher model. This knowledge is then inherited by the student model thereby imparting inductive bias.

2.5 Hybrids

We have considered a few hybrids already (DETR, DeiT etc.) however in this section, we aim to provide a detailed classification of the various hybrid architectures. We have grouped them into three categories, according to the work of Jun et al. (Jun Li et al., 2022) these categories are; *ConvNet-like-Transformer*, *Transformer-like-ConvNets* and *Transformer-ConvNet hybrids*.

ConvNet-like-Transformers are vision transformers that inherit the properties of conventional CNNs with the aim of improving the efficiency of the transformer. The DeiT (Touvron et al., 2020) is an example of this. It attempts to develop transformers that inherit the inductive bias present in convolutional neural networks. Other examples include; Swin Transformer (Ze Liu et al., 2021), HaloNets (Vaswani et al., 2021), DAT (Z. Xia et al.,

2022) and PVT (W. Wang et al., 2021). *Transformer-like-ConvNets* are convolutional neural networks that inherit some of the properties of transformers by sparing or partial integration of transformers into their architecture, the most prominent properties researchers try to integrate to CNNs is self-attention from transformers. Few example include; CoT (Yehao Li et al., 2022), BoTNet (Srinivas et al., 2021) and ConvNext (Zhuang Liu et al., 2022). *Transformer-ConvNet hybrids* try to form architectures that consist of convolutions, multi-layer perceptrons and multi-head self-attention blocks in an attempt to fully leverage the strength of both architectures and form models that are more efficient. A few examples are CvT (Wu et al., 2021), Mobile-former (Y. Chen et al., 2021), Conformer (Z. Peng et al., 2021), CoAtNet (Z. Dai et al., 2021) and ConViT (d'Ascoli et al., 2021).

3 TRANSFORMER IN MEDICAL IMAGING

3.1 Datasets

Transformers are generally known to perform better in large training than small sized training due

to the absence of inductive bias that bolsters few shot learning. In an attempt to solve this problem, researchers have proposed several hybrid architectures that attempts to incorporate strengths of the convolutional neural network into the transformer. The availability of public medical datasets of diverse modalities has been a major deterrent to the training and re-training of state-of-the-art CNN architectures like ResNet (K. He et al., 2016) and EfficientNet (Tan & Le, 2019) for the development of domain specific weights to serve as a feature extractor layer in transfer learning for both CNNs and Transformers. A few researchers have proven that transformers benefit more from transfer learning than CNNs (Caron et al., 2021; Raghu et al., 2019, 2021). However, standard weights like ImageNet do not serve as efficient feature extractors for medical imaging tasks across architectures (Hosseinzadeh Taher et al., 2021) hence the need for a detailed outline of publicly available medical datasets. We provide a detailed compilation of most of the publicly available datasets of various medical image modalities with their description; their download link is provided within their publication (Parvaiz et al., 2022).

			DETECTION
Modality	Dataset		Description
Histopathology Images	Cancer	Genome Atlas (Weinstein et al., 2013)	The dataset represents heat maps of 33 tumor types, and 3 distinct expressions; reverse-phase protein array, gene expression and miRNA.
CT-scans	COVID-19 CT-2A (Gunraj et al., 2022)		A benchmark dataset containing 3 classes, COV19 pneumonia, non-COV19 pneumonia and normal. Comprises data collated from 15 countries and contains about 4,500 samples.
	COVID-19 CT-DB (Kollias et al., 2021)		Contains annotated data that indicates the existence of COVID-19
X-rays	COVIDx (Gunraj et al., 2022)		A dataset of 3 classes: COVID positive, viral pneumonia and normal images.
	COVIDGR-E (Tabik et al., 2020)		Contains about 430 images of COVID-19 pneumonia
Fundus Images	IDRiD (Saeed et al., 2021)		A dataset comprising 81 images for Micro-aneurysm detection.

CLASSIFICATION			
Modality	Dataset	Description	
Histopathological Images	Cancer Histology Dataset (Kather et al., 2016)	These is a dataset comprising whole-slide-images of colorectal cancer cells.	
CT-scan	COVID-CT-set (Rahimzadeh et al., 2020)	A database contain a large number of lung scans for covid-19 classification.	
	Sars-CoV-2 (Soares & Angelov, 2020)	A dataset containing multiple lung scans for classifying COVID-19 SARS-variant.	
	COVID-19-CTDB (Kollias et al., 2021)	An annotated dataset of chest scans.	
	COVID-CT (X. Yang et al., 2020)	A dataset containing a number of chest scans complied from a number of literature.	
	CT-emphysema-DB (Sørensen et al., 2010)	A dataset of 115 high-resolution scans and 168 manually annotated square patches.	
	LUNA16 (Setio et al., 2017)	A dataset containing lung scans for normal and lung nodule classification.	
	LIDC-IDRI (Armato et al., 2011)	A large dataset containing lung scan for the diagnosis and screening of thoracic cancer.	
MRI-scan	MRNet (Soares & Angelov, 2020)	A dataset collated at the Stanford medical center, containing about 1400 knee MRIs.	
X-ray	Shenzen dataset (Jaeger et al., 2014)	A dataset collated in Shenzen China on tuberculosis.	
	COV19 chest x-ray (Maguolo & Nanni, 2019)	A dataset contain chest x-rays for classifying covid-19 from bacterial pneumonia.	
	Montgomery chest x-ray (Jaeger et al., 2014)	A dataset collated in the Montgomery county.	
	CXR Images (Kermany, Daniel; Zhang, Kang; Goldbaum, n.d.)	A dataset containing OCT and chest X-rays.	
	COVIDx (Linda Wang et al., 2020)	A 3-class dataset for normal, viral pneumonia and covid-19.	
	BIMCV-COV19+ (Vayá et al., 2020)	This is a database of chest x-rays and CT images.	
	Extensive-XR-CT (X. Yang et al., 2020)	A dataset of CT and X-rays for patients with and without covid.	
	Posterior-Anterior Chest Radiography COV19 (Haghanifar et al., 2022)	This is a combination dataset of about 15 smaller chest X-ray datasets.	
Fundus Images	Color Fundus (Hajeb Mohammad Alipour et al., 2012)	This Dataset contains fundus images in DR-grading.	

SEGMENTATION		
Modality	Dataset	Description
CT-scans	IMDTD-18 (Kermany et al., 2018)	A dataset containing about 9000 OCT scans.
	Kits19 (Heller et al., 2022)	A dataset annotated for the segmentation of renal tumor.
MRI-scans	M&MS-21 (Campello et al., 2021)	A dataset containing 375 annotated cardiac magnetic resonance images.
	MR-Brain-S (Mendrik et al., 2015)	A dataset containing 20 annotated multi sequence brain MRI.
	ERI (Stirrat et al., 2017)	A dataset containing 375 cardiac MRIs.
	CHAOS (Kavur et al., 2021)	An MRI annotated dataset for abdominal organ segmentation: kidney and liver.
	UKBB (Sudlow et al., 2015)	A dataset for identifying the causes of a wide range of complex diseases.
	BrATS-20 (Bakas et al., 2017)	A dataset for brain tissue segmentation, with about 2000 images.
	Iseg-17 (Li Wang et al., 2019)	A dataset for brain tissue segmentation consisting of 20 images.
X-ray	OAC (Peterfy et al., 2008)	A dataset containing annotated knee images.
	DICRLN (Shiraishi et al., 2000)	A database of annotated chest images for detecting lung nodule.
	IN-breast (Moreira et al., 2012)	A database containing annotated breast mammograms.

3.2 Classification and Segmentation

Classification of medical images is a vital task in healthcare because of the increasing need for diagnosis, identification and distinction of healthcare images. Varieties of transformer architectures have been employed in modelling with the aim of achieving higher efficiency than previously obtained. Researchers have employed pure vision transformers and hybrid models of disparate architectures for classification of medical

images in literature. In this section, we provide an extensive review of the various transformer based methods developed for the classification of medical images, with a focus on the image modality.

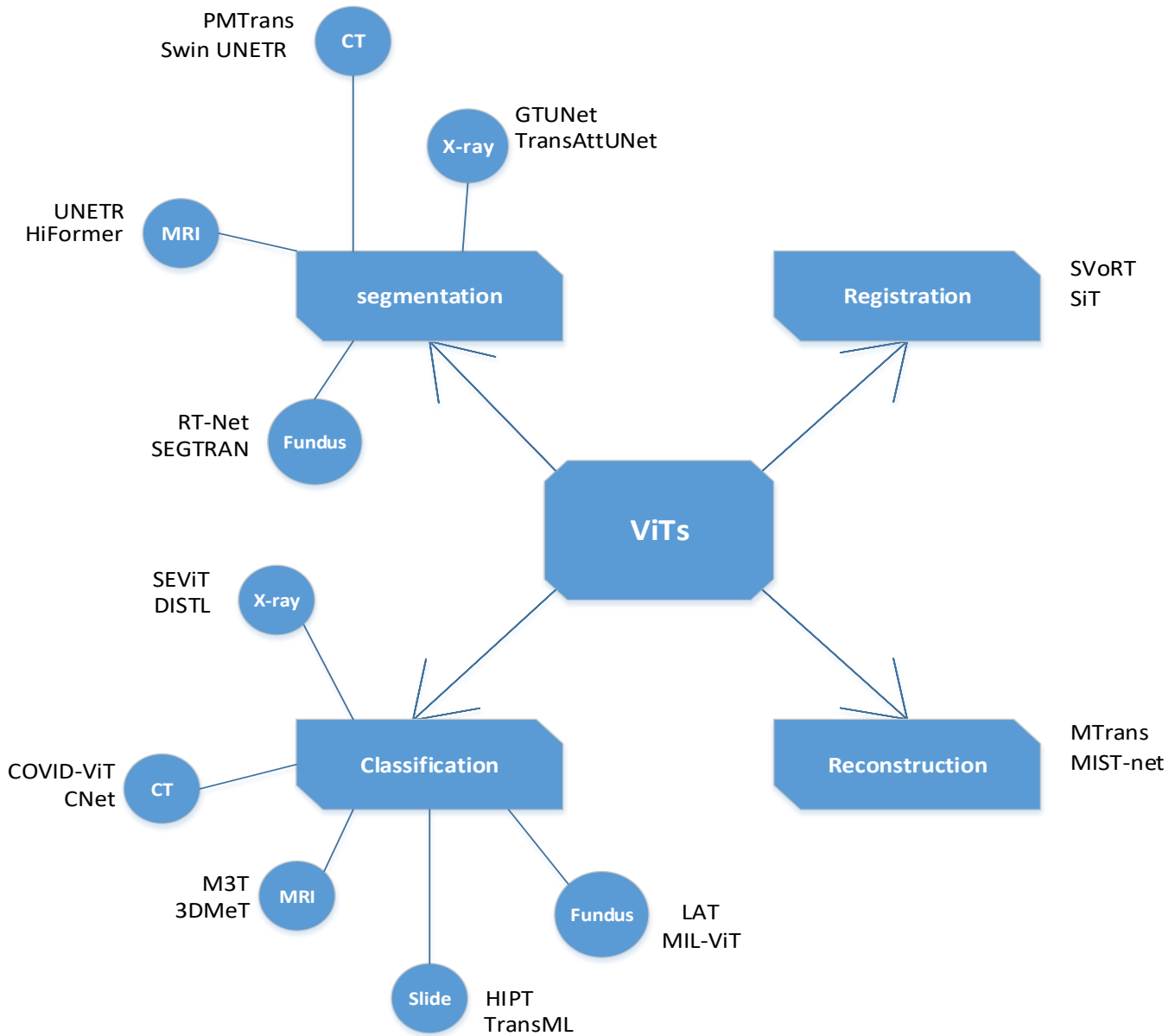


Figure 3: A taxonomy on the application of vision transformers in medical imaging detailing prominent models of varying modalities and disparate tasks.

3.2.1 Histopathological Images

Various staining substances and methods have aided the diagnosis, detection and classification of tumors and carcinomas in pathology. These slide images, in digital form, serves as a resource bank for the development of computational models to perform automatic diagnosis in order for efficient and faster diagnosis. The earliest known ViT utilized for histopathological image classification, as found

from our literature survey, TransMIL (Shao et al., 2021) integrates transformers to a multiple instance learning (MIL) framework, in order to introduce correlation between various instances. In this work, MIL is achieved by pooling operations performed on learning instances extracted by a pre-trained CNN (K. He et al., 2016). These instances, after squaring, are passed into a block containing multi-head self-attention (MSA), positional encoding and an MLP for weakly supervised classification.

Classification

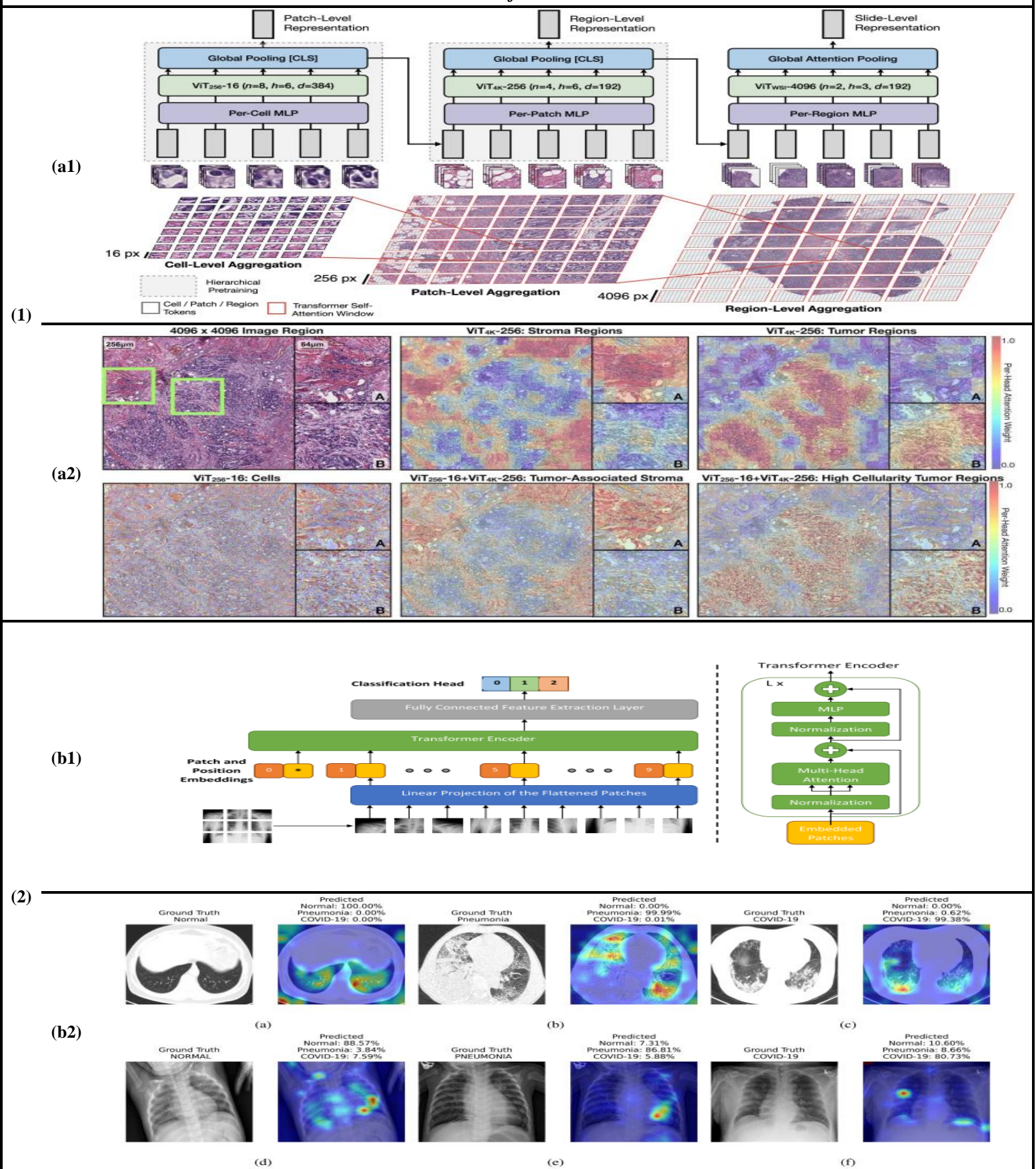


Figure 4: (1) Hierarchical Image Pyramid Transformer designed to exploit the hierarchical nature of WSIs while utilizing DINO self-supervised pre-training (R. J. Chen et al., 2022): HIPT architecture (a1), a colorectal cancer attention map from HIPT (a2). (2) xViTOS utilizing the pure ViT architecture for chest X-ray classification (Mondal et al., 2022): (b1) is the ViT architecture, (b2) is the detection output and score.

They achieved AUC scores of 93.09% and 96.03% in classifying binary tumors and cancer subtypes respectively. Wang *et al.* (Xiyue Wang *et al.*, 2022) introduced a contrastive learning strategy based on self-supervised learning (SSL). In general, SSL is known to ameliorate the annotation of large-scale data by utilizing an unlabeled dataset in the extraction of useful representations that generalizes well to multiple downstream tasks. Semantically relevant contrastive learning (SRCL), unlike traditional contrastive learning, seeks to acquire more representations that are informative by aligning closely related positive pairs. This is achieved by pre-training CTransPath (an integration of CNNs and multiple swin transformers) with a plethora of unlabeled data, to serve as a feature extractor for the downstream task performed by SRCL. GasHis-Transformer (H. Chen *et al.*, 2022) introduces an approach for gastric histopathological image classification based on global and local information capture. Local information capture is realized by a CNN architecture while global information capture is accomplished by attention blocks coupled to CNNs. Richard Chen, a proponent of self-supervised ViTs in histopathology (R. J. Chen & Krishnan, 2022) proposed a novel vision transformer based on the Hierarchical nature of WSIs. Hierarchical image pyramid transformer (HIPT) (R. J. Chen *et al.*, 2022), employs a two-level self-supervised learning framework to exploit both the hierarchical nature of WSIs and the large sequence length of WSI tokens as a result of their pixel nature. This is done by aggregating visual tokens at three levels (cell, patch and region) in order to form the slide representation, and utilizing self-attention as a permutation-equivariant aggregation layer. It is found that HIPT with hierarchical pre-training yields better performance than SOTA methods for survival prediction and cancer subtyping.

3.2.2 Computed Tomography Scans

CT-scans can create detailed cross-sections of bones, soft tissues, organs and blood vessels, these sections can also be formatted to multiple frames that aid in the generation of three-dimensional

images. The application of ViTs in computational tomography has largely been focused on thoracic diseases because of the contrast between gas and tissue. These ViTs are designed for two-dimensional, as well as three-dimensional CT images. CTNet as proposed by Liang *et al.* (Liang *et al.*, 2021) is a hybrid model comprising a CNN feature extractor and ViT for the detection of COVID-19 from three-dimensional chest scans. After training on the COV19-CT dataset, it achieved 88% in F1 evaluation. Barhoumi *et al.* (Barhoumi & Ghulam, 2021) proposed scopeformer, a hybrid model for the classification of intracranial hemorrhage from CT images. Their work demonstrates that by stacking several Xception CNN blocks and aggregating their feature maps, a feature-rich map can be developed to serve as the input to a ViT in order to improve model performance. Their model achieved a test accuracy of 98.04% on the corresponding classification task. The effective diagnosis of pancreatic cancer from two-dimensional CT images was demonstrated by Xia *et al.* (Y. Xia *et al.*, 2021). In this work, a region-of-interest (ROI) feature map is developed from annotated training data based on the U-net segmentation algorithm. This pancreas ROI feature map is fed as input to a transformer that is built upon the U-net algorithm for segmentation. The model is trained on a 3-class labeled data for classification, after training on a dataset of 1321 patients, they achieved specificity and sensitivity of 95.2% and 95.8% respectively. Swin UNETR (Tang *et al.*, 2021) is a prominent model for the classification of 3 dimensional CT images. It implements a hierarchical encoder for self-supervised pre-training, it was fine-tuned for classification and segmentation tasks at the Beyond the Cranial Vault (BTCV) challenge. Their model outperformed all other models submitted for the challenge.

Reference	Archi	Modality	Organ	Type	Evaluation	Highlights
Ikromjanov (Al., 2022)	Hybrid	Pathology	Prostate	2D	Accuracy	The classification task is performed according a grading system regarded as 'Gleason'
Chen <i>et al.</i> (H. Chen et al., 2022)	Hybrid	Pathology	Stomach	2D	Precision, F1	Classification based on the parallel structure of LIM and GIM modules.
Zhao <i>et al.</i> (C. Zhao et al., 2022)	Hybrid	Pathology	Cell	2D	SP, H-mean, F1	Utilizes transfer learning and an attention based decoder in classifying cervical cells.
TransPath (Xiyue Wang et al., 2022)	Hybrid	Pathology	Multiple	2D	Accuracy, AUC, F1	Introduces a TAE module that aid the ViT in aggregating tokens, which are passed into an FFN.
TransML (Shao et al., 2021)	Hybrid	Pathology	Multiple	2D	Accuracy AUC	A CNN encoder attached to a ViT decoder for the extraction of spatial information from WSIs
i-ViT (Z. Gao et al., 2021)	Hybrid	Pathology	Multiple	2D	Accuracy, Precision, recall	A CNN, transformer encoder to capture high level features for classification.
R. J. Chen <i>et al.</i> (R. J. Chen & Krishnan, 2022)	Hybrid	Pathology	Multiple	2D	MSE	Combining self-supervised learning and transfer learning in extracting morphological features from WSIs.
R. J. Chen <i>et al.</i> (R. J. Chen et al., 2022)	Pure ViT	Pathology	Multiple	2D	AUC	Developed a novel Hierarchical transformer that leverages self-supervised learning for classifying cancer and survival prediction.
GTN (Y. Zheng et al., 2022)	Hybrid	Pathology	Lung	2D	ACC, PRE, SE, SP, RE.	Consisting of a CNN feature extractor and a feed forward network for classifying WSIs.
COVID-ViT (X. Gao., 2021)	Pure ViT	CT	Chest	3D	Accuracy, F1	Defined a new ViT architecture that was implemented for covid-19 classification.
Zhang <i>et al.</i> (L. Zhang & Wen, 2021)	Hybrid	CT	Chest	3D	F1	Proposed a two-stage process of segmentation using U-net then classification using swin-transformer.
Hsu <i>et al.</i> (Hsu et al., 2021)	Hybrid	CT	Chest	3D	Accuracy, Precision, Recall, F1	The implementation of Wilcoxon signed-rank test for preserving CT slices after which spatial features are extracted by a transformer that contains convolutions.
Xia <i>et al.</i> (Y. Xia et al., 2021)	Hybrid	CT	Pancreas	3D	Sensitivity, Specificity, AUC	Localization is achieved by U-net and then passed to a transformer.
Li <i>et al.</i> (Jingxing Li et al., 2021)	Pure ViT	CT	Lung	2D	F1	Utilized a teacher student framework to aid knowledge distillation.
Scopeformer (Barhoumi & Ghulam, 2021)	Hybrid	CT	Brain	2D	-	The stacked several feature maps produced by a CNN into a ViT to improve classification accuracy.
CNet (Liang et al., 2021)	Hybrid	CT	Lung	3D	F1	Combines convolution and attention in the classification of 3D chest images.
xViTCOS (Mondal et al., 2022)	Pure ViT	CT	Chest	2D	Precision, Recall, F1, Specificity	Introduces a transfer learning approach of multiple stages where ViT performs the upstream task.
Tang <i>et al.</i> (Tang et al., 2021)	Pure ViT	CT	Multiple	3D	specificity	Introduced a new 3D transformer that has a hierarchical encoder for SSL.
Matsokus <i>et al.</i> (Y. Dai et al., 2021)	Pure ViT	MRI	Ear	3D	Accuracy, Precision	This work contains the first transformer model for multi-modal image classification performed on ear MRI.
mfTrans-Net (J. Zhao et al., 2021)	Hybrid	MRI	Hepatic	2D	MAE	This work utilizes 3 parallel CNN encoders for feature extraction and a transformer decoder for classification of hepatocellular carcinoma.

3DMeT (Sheng Wang, 2021)	Hybrid	MRI	knee	3D	-	They introduced 3D convolutional block encoding to reduce cost of computation and utilized a teacher student approach to train ViT.
He <i>et al.</i> (S. He et al., 2022)	Hybrid	MRI	Brain	2D	MAE, PC	Utilizes two parallel CNNs; one extracts features from the whole image, the other from patches. A transformer acts as the decoder.
M3T (Jang & Hwang, n.d.)	Hybrid	MRI	Alzheimer	3D	Accuracy, AUC	This work proposes an architecture that combines a 2D and 3D CNN for classification, with a transformer encoder.
Tummala <i>et al.</i> (Tummala, 2022)	Pure ViT	MRI	Brain	2D	Accuracy	The work pre-trains a ViT on ImageNet and fine-tunes it for brain tumor classification.
Dahan <i>et al.</i> (Dahan et al., 2022)	Pure ViT	MRI	Brain	3D	AUC, PC	Proposes an attention based encoder requiring patch meshes, for classification tasks.
Jun <i>et al.</i> (Jun et al., 2021)	Hybrid	MRI	Brain	3D	AUC, MAE	Pre-trains a hybrid model in a self-supervised manner for 3D brain disease diagnostic etc.
Shen <i>et al.</i> (Shen et al., 2022)	Hybrid	MRI	Brain	2D	R2, MAE, CC	This work presents an end-to-end attention guided deep learning approach for gestational age predication utilizing an attention based intermission.
Sun <i>et al.</i> (Sun & Pang, n.d.)	Hybrid	X-ray	Lung	2D	Accuracy	Develops a hybrid model consisting of CNNs for image processing and a multiple swin-transformers in sequence for classification.
H. Xu <i>et al.</i> (H. Xu et al., 2022)	Hybrid	X-ray	Lung	2D	-	Utilizes a CNN encoder and incorporates average pooling to the attention block MLP.
p-FESTA (S. Park & Ye, 2022)	Pure ViT	X-ray	Lung	2D	AUC	Introduces a ViT with random patch distribution for multi-task learning.
SEViT (Almalik et al., 2022)	Pure ViT	X-ray	Lung	2D	AUC	This work introduces a self-ensemble ViT architecture to improve ViT robustness.
Park <i>et al.</i> (S. Park et al., 2021)	Pure ViT	X-ray	Lung	2D	AUC	Demonstrated split performance without adulterations to performance.
DISTL (S. Park et al., 2022)	Hybrid	X-ray	Lung	2D	AUC	Proposes an approach of diagnosis through knowledge distillation.
MIL-ViT (Shuang Yu, 2021)	Pure ViT	Fundus	Eye	2D	Accuracy, F1, Recall, Precision	Involves a transformer pre-training on a large amount of fundus dataset then fine-tune to classification task.
LAT (Rui Sun, 2021)	Hybrid	Fundus	Eye	2D	AUC, Kappa	Investigates lesions as a localization problem of a weakly supervised nature, for classifying diabetic retinopathy grades and diagnosing lesions.
Matsoukas <i>et al.</i> (Matsoukas et al., 2021)	Pure ViT	Fundus	Eye	2D	AUC	Investigates the performance of DEiT compared to SOTA CNN for classification tasks.

Table 1: A summary of the reviewed transformer based approach for medical image classification.

The segmentation of CT-scans is important in the diagnosis, evaluation and monitoring of various phenomena in healthcare. Swin UNETR (Tang et al., 2021) also performs 3D segmentation primarily for computed tomography images. It attaches self-supervised heads, aggregated by contrastive learning strategy to a swin transformer encoder. It achieved state-of-the-art performance in segmentation as well. Similarly Y. Xia et al. (Y. Xia et al., 2021) hybrid model that was trained by classification supervision can be utilized for CT segmentation tasks as well, and for CT classification task as discussed above. Because of the computational cost involved in modelling global representation on full resolution images (Zhuangzhuang Zhang, 2021) proposed PMTrans, a hybrid model that incorporates multi-scale attention to a CNN feature extractor with the aim of capturing diverse range relationships from multi-resolution images. This method is recorded to have outperformed other CNN and Transformer based models at the time of publication. UNETR (Hatamizadeh, Tang, et al., 2022) was designed for semantic segmentation of 3D brain MRI and spleen CT scans. It attaches a transformer encoder to a Unet-like CNN decoder for semantic segmentation.

3.2.3 Magnetic Resonance Imaging

MRI provide very detailed anatomical images due to its powerful and effective non-invasive imaging technology: it also produces two-dimensional as well as three-dimensional images. It is therefore of important to consider the dimensionality of the image instance that the modelling method is suited to. M3T (Jang & Hwang, n.d.) is a three-dimensional image processing technique for the classification of Alzheimer's disease. It proposes two and three dimensional representation learning achieved by a pre-trained 2D CNN, and 3D CNNs respectively. These CNNs are designed to append inductive bias to the modelling technique while global sequential information from multiple planes are captured by the ViT attached sequentially to the 2D-3D CNNs structure. Their model was trained on the Alzheimer's Disease Neuroimaging Initiative (ADNI) dataset and was validated on the Australian

Imaging, Biomarker and Lifestyle Flagship Study of Ageing (AIBL) dataset. It was found to outperform all other models in Area under Curve (AUC) evaluation. Tummala (Tummala, 2022) employs an ensemble of ViT models pre-trained and fine-tuned on ImageNet for brain tumor classification, demonstrating the efficiency of disparate domain information transfer. They achieved a test accuracy of 98%. Works on age prediction based on MRI were performed by He et al. (S. He et al., 2022) and Shen et al. (Shen et al., 2022). On the one hand, the former attempts at estimating brain age by a global-pathway-local-pathway transformer network that aids the simultaneous capture of global and local representations from images. Their model was trained on a collective of six publicly available dataset. After being evaluated on two additional datasets, it exhibited state-of-the-art performance in age prediction. On the other hand, the latter attempted at extracting age-specific morphological information from Fetal MRI to promote age-based classification. They also demonstrate the inferiority of traditional CNN approaches to that of attention-guided CNN methods: achieved by incorporating attention-guided mask inference to a traditional ResNet-50 architecture. Their method resulted in R^2 score of 0.945 and MAE of 6.7 days.

The fully convolutional transformer (Tragakis et al., 2022) leverages the success of U-net algorithm in development of a fully-convolutional, depth-wise transformer that replaces the convolution blocks in U-net architecture with fully convolutional transformers. This method aids efficient segmentation that considers the fine-grained nature of medical images. Their model extracts global information as well as capturing hierarchical attributes from features. UNetFormer (Hatamizadeh, Xu, et al., 2022) attempts to adapt the dubbed UNetFormer architecture by redefining each encoder block with swin transformers and each decoder block with CNNs; they also included skip connections at different data resolutions. For encoder pre-training, they incorporated a self-supervised learning with the aim of letting the model randomly predict masked volumetric tokens.

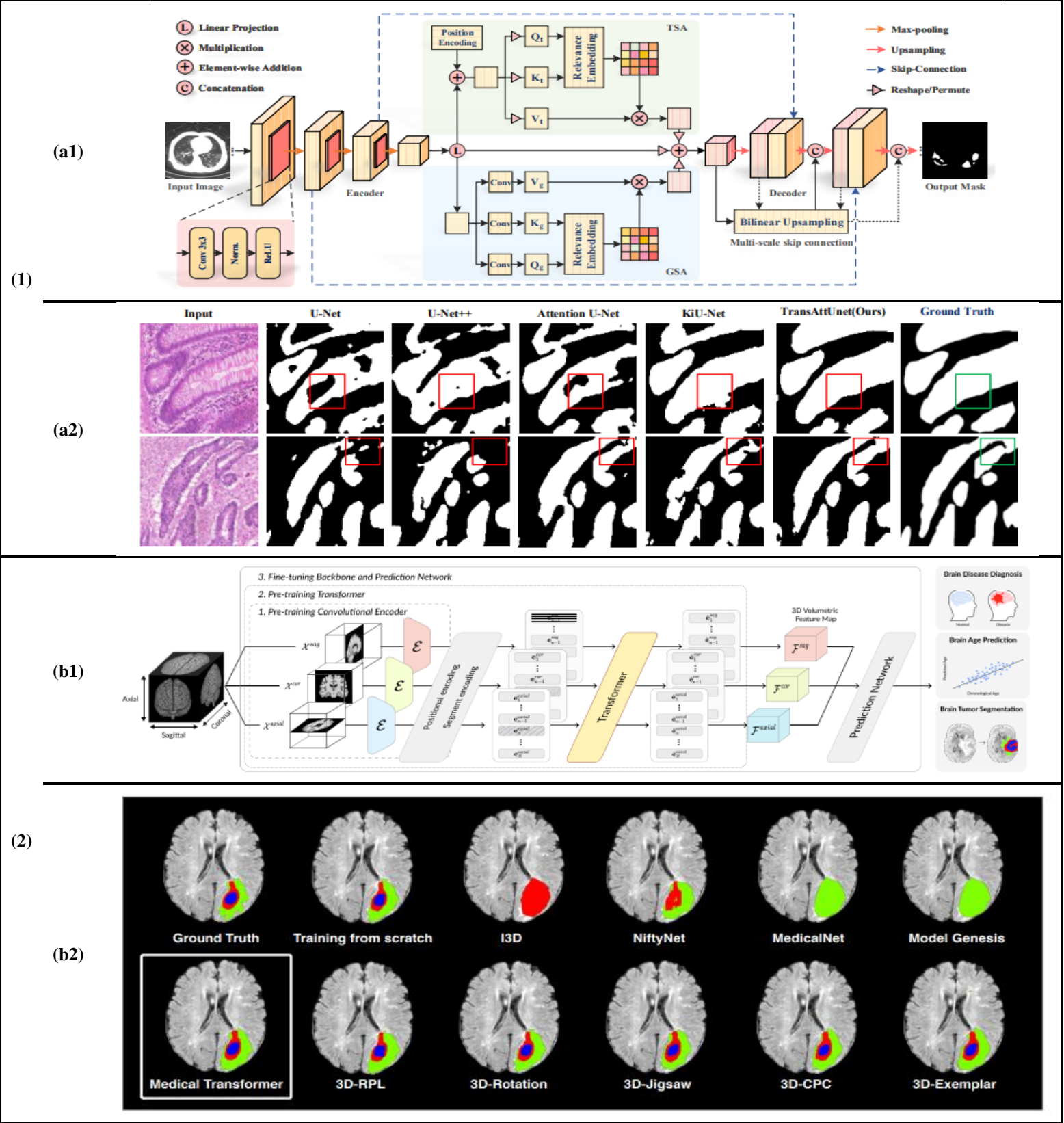


Table 2: (1) TransAttUnet (B. Chen et al., 2021) is an attention guided u-net with transformers for segmentation: its architecture (a1) utilizes TSA and GSA mechanism, (a2) is a comparative gland segmentation result. (2) medical transformer (Jun et al., 2021) is utilized for 3D MRI analysis: (b1) is its architecture that shows that slices are processed in 2D before being combined to form the output, (b2) is a comparative between medical transformer and other approaches.

An alternative modelling method that proposes a deformable bottleneck transformer module to aid the capture of shape; TransBTSV2 (Jiangyun Li et al., 2022) retains a CNN encoder decoder structure with only major changes to the bottleneck region, it requires no pre-training and stores local information through its CNN encoder while also capturing global sequential representations. This architecture was tested on four publicly available datasets and outputted results that are comparable with state-of-the-art classification techniques. Another variation of this approach is the nnFormer (H.-Y. Zhou et al., 2021), it attempts to aid the capture of volumetric information by defining a local and volume based bottleneck on a conventional CNN encoder-decoder structure. It achieved significant reduction of both the dice score and Hausdorff distance metric.

Not a lot of researchers make major changes to their transformer structure. However, in an attempt to reduce the dimensional and computational complexity of the vanilla transformer Xie et al. (Xie, Zhang, Shen, et al., 2021) developed CoTr. Their deformable transformer pays unequal attention to the image patches unlike the vanilla transformer that pays equal attention to all image positions. Utilizing their deformable transformer coupled to a CNN encoder-decoder, they efficiently process multi-scale and high-resolution feature maps while capturing local image representations. Another modelling approach is to convert three-dimensional images to two-dimensional slices (Jun et al., 2021), utilizing only two-dimensional convolutions. This network is pre-trained using DINO self-supervision, after which the two-dimensional slices are re-combined for the purpose of prediction. This method has been successfully applied for regression and classification, as well as segmentation tasks.

3.2.4 X-ray

The passage of X-rays through a body can aid the generation of informative images of tissues and the internal structure of the body. X-rays are inexpensive and convenient and have a wide range of application in medical imaging such as cancers, fractures and various pneumonia (including COVID-19) etc. Thus, they are an important source of medical data capture to clinicians and researchers.

SEViT (Almalik et al., 2022) attempts to model self-ensemble transformers based on experiment that proved that the features representations learned by the initial ViT blocks are generally unaffected by adversarial perturbations. In order to model resilience to adversarial attacks, they proposed learning multiple classifiers that aggregate feature representations learned from initial ViT blocks to those learned from final ViT blocks. This method leverages the details presented from final ViT representation as well as the robustness of intermediate ViTs. Mondal et al (Mondal et al., 2022) employed a pure transformer for the detection and classification of COVID-19 from X-ray images. In their work, a multi-stage transfer learning strategy based on ViT is adopted where a ViT is pre-trained on domain specific data for the extraction of domain relevant information. This feature extractor is attached to a conventional transformer that performs classifications based on its fully connected multi-layer perceptron (MLP). Chest X-ray data and other X-ray forms required for adequate modelling are scarce but are constantly increasing. With an increase in the available data comes increasing demand for annotation. S. Park tries to provide solutions to these issues in his works p-FESTA (S. Park & Ye, 2022) and DISTL (S. Park et al., 2022). For scarcity of training samples, they proposed p-FESTA that employs multi-task distributed learning that is based on federation and shared learning. They achieved this by exchanging the CNN in the original Federated Split Task Agnostic (FESTA) with random patch permutation with an aim of improving performance of the multi-task learning while maintaining privacy. For the problem of annotating newer datasets, they proposed DISTL that incorporates self-supervision and self-training to ViTs with the aim of developing a model that can learn useful representations from un-annotated data. DISTL was evaluated on data from three hospitals and was found to improve in performance with increase in the size of unlabeled training data.

Reference	Archi	Modality	Organ	ViT Enco inter deco	Type	Evaluation	Highlights
Swin UNETR (Tang et al., 2021)	Hybrid	CT	Multiple	1 0 0	3D	Dice, HD	Introduced a new 3D transformer that has a hierarchical encoder for SSL.
Y. Xia et al. (Y. Xia et al., 2021)	Hybrid	CT	Pancreas	0 0 1	3D	Sensitivity, Specificity, AUC	A model comprising u-net and transformer is trained based on classification and segmentation supervision.
PMTrans (Zhuangzhuang Zhang, 2021)	Hybrid	CT	Multiple	0 0 1	2D	Dice	Aimed at reducing the computational cost of current ViTs by limiting learning to the capture of multi-range relationship between varying resolutions.
UNETR (Hatamizadeh, Tang, et al., 2022)	Hybrid	CT, MRI	Brain, Spleen	1 0 0	3D	Dice, HD	A hybrid transformer comprising a transformer encoder and a CNN decoder for brain and spleen classification.
HiFormer (Heidari et al., 2022)	Hybrid	MRI, CT,	Multiple	1 1 1	3D	sensitivity	A U-net shaped, depth wise, fully convolutional transformer designed for medical image segmentation.
UNetFormer (Hatamizadeh, Xu, et al., 2022)	Hybrid	MRI, CT	Liver	1 1 1	3D	Dice, HD	Comprising convolution and transformer in each block of the depth-wise architecture.
MedFormer (Y. Gao et al., 2022)	Hybrid	MRI, CT	Multiple	1 0 1	3D	Dice	Incorporates bidirectional multi-head attention to a depth-wise U-net structure.
TransBTSV2 (Jiangyun Li et al., 2022)	Hybrid	MRI, CT	Multiple	0 1 0	3D	Dice, HD	Utilizes a CNN encoder-decoder structure with a transformer bottleneck.
nnFormer (H.-Y. Zhou et al., 2021)	Hybrid	MRI, CT	Multiple	0 1 0	3D	Dice, HD	Introduces a local and volume type of attention mechanism that aids in learning global representations.
CoTr (Xie, Zhang, Shen, et al., 2021)	Hybrid	CT, MRI	Multiple	0 1 0	3D	Dice	Introduces deformable self-attention to aid in processing multi-scale, high-resolution images.
Medical Transformer (Jun et al., 2021)	Hybrid	MRI	Brain	0 0 1	3D	Dice	Converts a 3D image into two-dimensional slices, processes image in 2D then recombines as output.
Sun et al. (Sun & Pang, n.d.)	Pure ViT	X-ray, CT	Lung	1 1 1	2D	IoU, Accuracy	Utilizes several swin transformers with patch and positional encoding to achieve classification and segmentation training.
Park et al. (S. Park & Ye, 2022)	Hybrid	X-ray	Lung	0 0 1	2D	Dice	Introduces a ViT with random patch distribution for multi-task learning.
GTUNet (Yunxiang Li et al., 2021)	Hybrid	X-ray	teeth	1 0 0	2D	Dice	Utilizes a Fourier descriptor based loss function to aid in integrating the shape after which it is passed to grouped transformer blocks.
TransAttUNet (B. Chen et al., 2021)	Hybrid	CT, X-ray	Multiple	-	2D	Dice	Aims at solving the information recession issue by attempting multi-level attention.
RT-Net (S. Huang et al., 2022)	Hybrid	Fundus	Eye	0 1 0	2D	Precision, Recall, AUC	Defined two kinds of transformer blocks: global and relation transformers in order to aid the detection of minute sizes and blurred borders.
Segtran (S. Li et al., 2021)	Hybrid	Fundus	Multiple	-	2D, 3D	Dice	Utilizes squeeze and expansion blocks that serves to regularize the self-attention module as well as learn diversified representations.

Table 3: A summary of the reviewed transformer based approach for medical image segmentation.

A lot of the research on the X-ray modality is performed for classification however, there are a few works that attempt the segmentation of chest x-rays. Sun *et al.* (Sun & Pang, n.d.) Developed a model for the classification and segmentation of chest X-rays based solely on the swin transformer. So far, very few models employ just the transformer architecture in performing segmentation tasks. They achieved a segmentation accuracy of 95% from three variations of their swin-transformer model. The p-FESTA method discussed above is also tested for segmentation of X-rays; inducing federation and shared learning towards the performance of segmentation tasks after self-supervised pre-training. TransAttUnet (B. Chen *et al.*, 2021) was developed for the accurate segmentation of organs and lesions from X-ray and CT imaging by defining an encoder-decoder network with multi-scale skip connection for processing higher resolution images and multi-level guided attention for mapping global relationships between multiple resolutions. These skip connections were also applied to the decoder part of the architecture to aggregate semantic-scale up-sampling features, alleviating information recession and developing a more detailed pixel map. To aid in root canal therapy assessment Li *et al.* developed GT U-Net (Yunxiang Li *et al.*, 2021) that retains the depth-wise nature of U-net but replaces the convolutions with group transformer hybrids. The idea behind implementing group transformers instead of individual vanilla-type transformer is to reduce computational cost. They also defined a shape-sensitive Fourier Descriptor loss function in order to aid model optimization.

3.2.5 Fundus

Fundus photography aids in the diagnosis of a variety of medical conditions. Due to its complex nature; comprising retina, macula, optic disc, fovea and blood vessels, it is expedient that computation be employed in more efficient and reproducible diagnostics. Rui *et al.* (Rui Sun, 2021) developed an encoder-decoder decoder structure with a pixel relation based encoder and a filter based decoder. This model employs weakly supervised training via their filter based transformer decoder, they also

included lesion region importance and lesion region diversity to enable the model learn filters well. Their model was tested for DR grading and lesion discovery, recording state-of-the-art performance.

With the aim of aiding ophthalmologist in the automatic segmentation of diabetic retinopathy lesions Huang *et al* developed RT-Net (S. Huang *et al.*, 2022) following a clinical approach: The investigated the pathogenic causes of diabetic retinopathy lesions and found that certain lesions present relative patterns with each other and appear close to specific vessels. This finding aided the proposition of a relation transformer block composed of self-attention for global relationship and cross-attention that enables interactions between lesion and vessel features. They also proposed a global transformer block to aid the capture the finer details of small lesion patterns. Their dual-transformer approach is capable of segmenting four kinds of DR lesions, archiving state-of-the-art performance. Segtran (S. Li *et al.*, 2021) was developed with the aim of capturing fine details as well as global features simultaneously. They successfully developed a transformer based approach that has unlimited effective receptive field at high and low resolutions by utilizing squeeze and expansion transformer networks, with each transformer block performing a unique function: the squeeze block attempts regularization of the attention block to aid global information capture, the expansion block learns a diverse array of representations. Their model was tested on the BraTS dataset (Bakas *et al.*, 2017) and achieved the highest segmentation accuracy.

Reference	Archi	Modality	Organ	Type	Evaluation
SVoRT (Junshen Xu et al., 2022)	Hybrid	MRI	Brain	3D	Proposed slice-to-volume registration that predicts the transformation of a slide based on information from other slides.
SiT (Dahan et al., 2022)	ViT	MRI	Brain	3D	Utilizes a pure transformer for the projection of surface data on a curved manifold
TransMorph (J. Chen et al., 2021)	Hybrid	MRI, CT	Multiple	3D	Presents a hybrid transformer for image registration along with 2 model variants.
Eformer (Luthra et al., 2021)	Hybrid	CT	Multiple	3D	An encoder-decoder architecture composed of transformer blocks for denoising medical images.
TED-net (D. Wang et al., 2021)	ViT	CT	Multiple	3D	Comprises a symmetrical encoder-decoder architecture solely based on transformers for denoising.
DSFormer (B. Zhou et al., 2022)	ViT	MRI	Multiple	2D	Cascading swin transformers forming a reconstruction network with a self-supervised learning strategy
T ² Net (C. M. Feng et al., 2021)	Hybrid	MRI	Multiple	2D	Proposed a CNN-Transformer for both super-resolution and MRI reconstruction
MTrans (C.-M. Feng et al., 2022)	ViT	MRI	Multiple	2D	A multi-modal transformer capable of transmitting features from the target modality to the auxiliary modality.
MIST-net (Pan et al., 2022)	Hybrid	CT	Multiple	2D	Introduces a flexible architecture for residual data and image capture, introduces enhancement filters for preserving edges, then a swin transformer to aid reconstruction.

Table 4: A summary of the reviewed transformer based approaches for medical image registration and reconstruction.

3.3 Registration and Reconstruction

Medical image registration becomes relevant when we intend to analyze the same image captured with different modalities or at different times. Registration aims at establishing relationships between static and moving images by finding dense per-voxel displacement. In recent times, transformers are seen as the architecture of choice for extracting relating features from multimodal images required in registration tasks because of their better understanding of spatial representations. SVoRT (Junshen Xu et al., 2022) attempts volume registration from slides based on an attention mechanism. Features extracted by a ResNet architecture, as well as the position of slices

in 2D and 3D are fed into the transformer to encode spatial and global representations. SVoRT was tested on real world data and achieved state-of-the-art performance. Dahan *et al* (Dahan et al., 2022) developed a transformer based technique for the projection of surface features to a curved surface by leveraging multi-head self-attention and spatial encodings.

The transformation of signals into an interpretable image that can serve as data for diagnosis is a task that is performed efficiently by transformers.

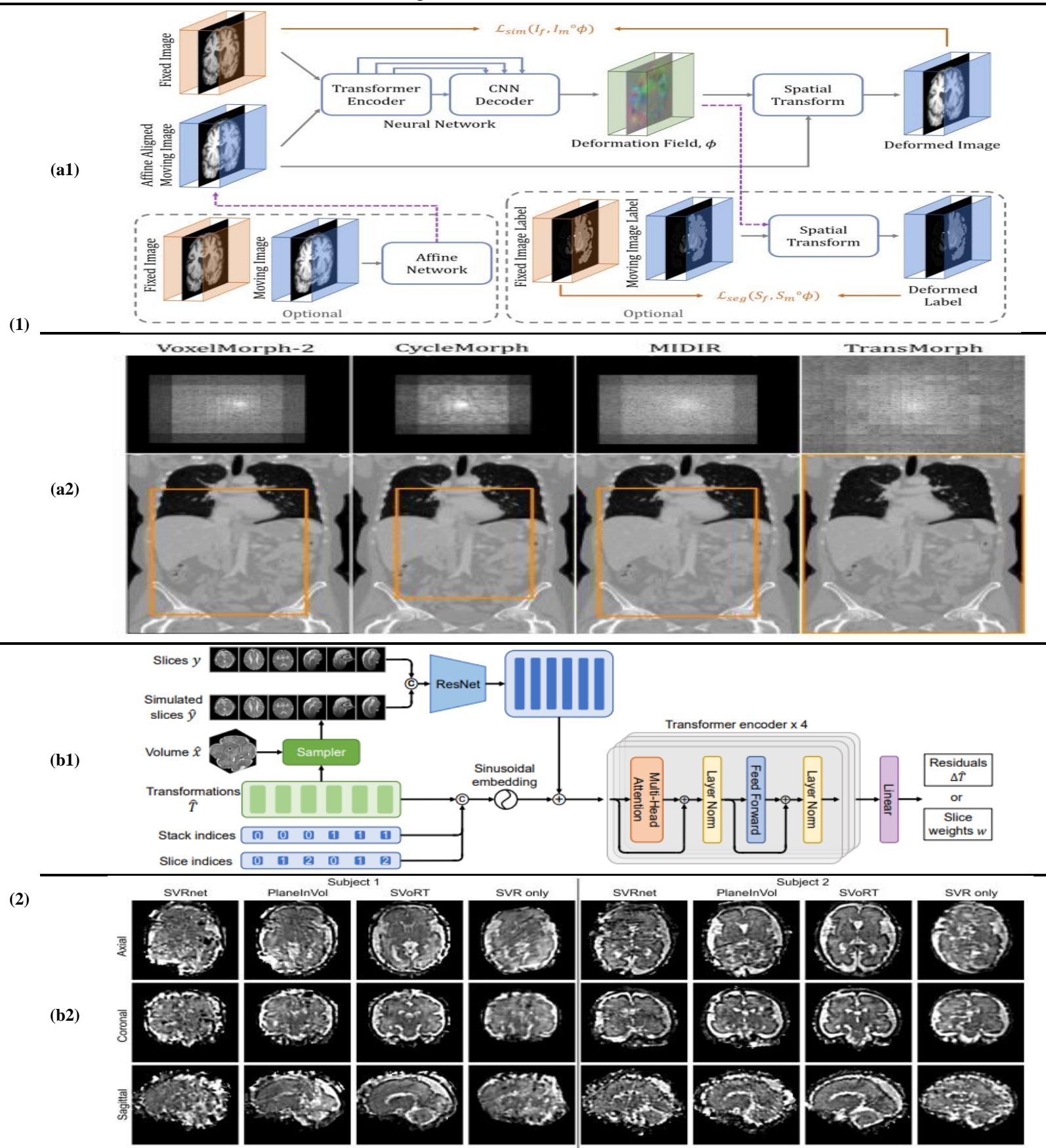


Figure 5: (1) TransMorph (J. Chen et al., 2021) is a model developed for unsupervised medical image registration, its architecture (a1) takes in two inputs and generates a nonlinear warping function. (a2) depicts the ERF of other methods compared to it. (2) SVoRT (Junshen Xu et al., 2022) is an iterative transformer for fetal MRI reconstruction: (b1) depicts its architecture, (b2) shows reconstructed volumes by the model.

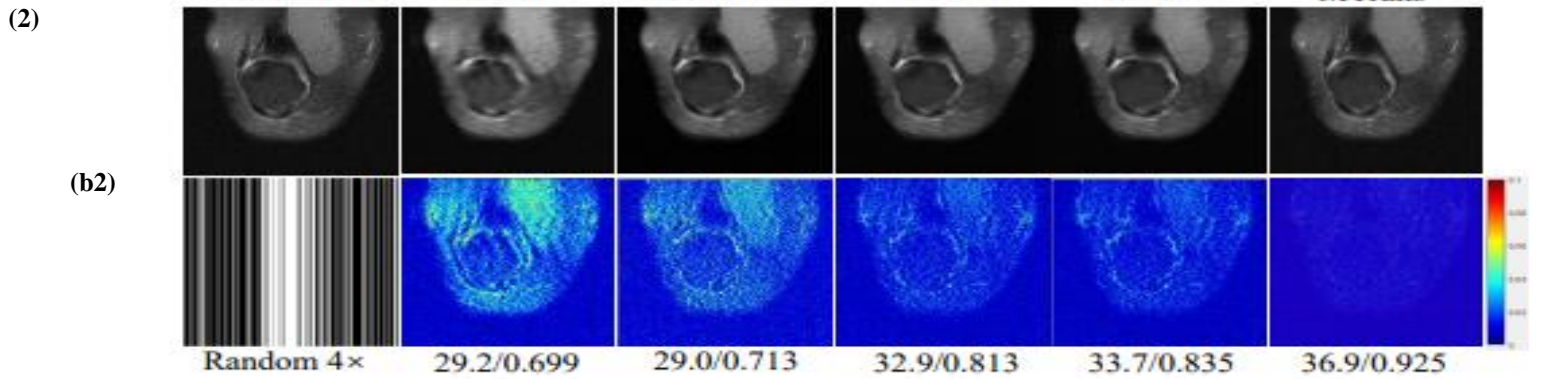
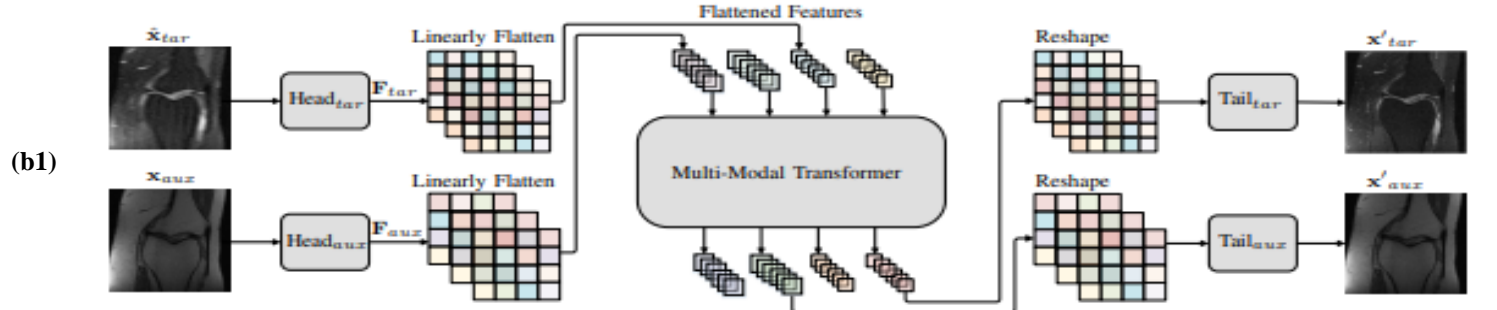
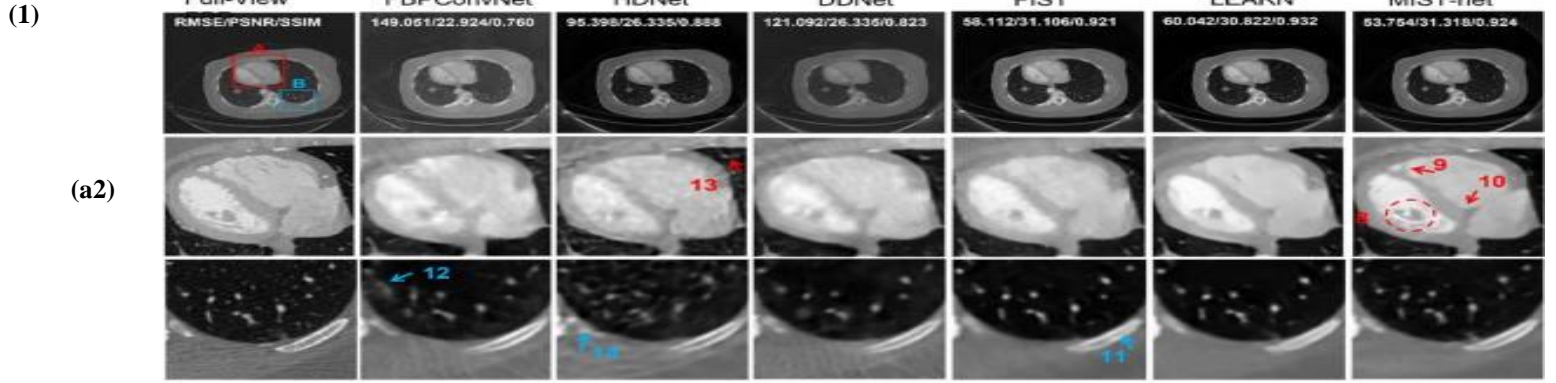
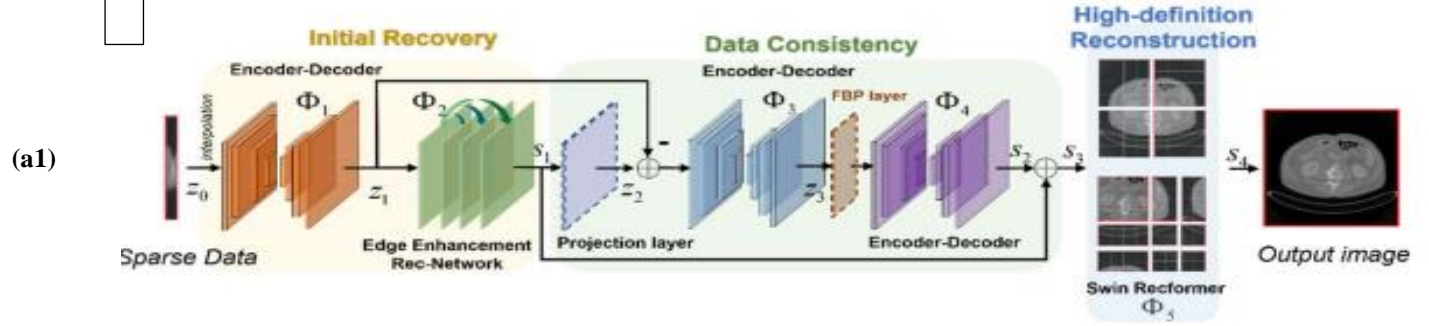


Figure 6: (1) MINST-net (Pan et al., 2022) is a model based on the swin transformer for sparse-view CT reconstruction; consists of an architecture with 3 stages (a1), (a2) is a comparative of the result of other methods alongside MINST-net. (2) MTrans (C.-M. Feng et al., 2022) is a multimodal transformer for MRI reconstruction. (b1) depicts its architecture while (b2) shows comparison between different multi-coil reconstruction methods.

This progress have led to; the reduction of the number of MRI measurements required to establish a scan, aid in reducing the radiation dose required in CT scans, ease of rebuilding surgical scenes. DSFormer (B. Zhou et al., 2022) presents a self-supervised learning approach based on the transformer and aids the acceleration of multi-contrast MRI reconstruction. It achieves this by developing deep conditional cascade transformer from swin transformers with two unique strategies to encourage information sharing. During evaluation, it was found that DSFormer achieves almost equivalence performance when train on full supervision and self-supervision. T² Net (C. M. Feng et al., 2021) developed a hybrid model of convolutions and transformer architecture for MRI reconstruction and super-resolution by situating task transformer networks after two parallel CNNs. Feng et al. (C.-M. Feng et al., 2022) presents a transformer (MTrans) that utilizes a transformer architecture for multi-modal MR imaging for the purpose of global information capture. They additionally defined a cross attention module to extract multi-scale information from the different modalities, and recorded state-of-the-art performance upon evaluation. MIST-net (Pan et al., 2022) was developed for sparse-view tomographic reconstruction. It entails a robust architecture of three modules; initial recovery based on a flexible network architecture comprising convolution and pooling layers arranged in an encoder-decoder structure, data consistency aimed at preserving edge information by utilizing an enhancement filter defined by convolution and concatenation operations, high-definition reconstruction via swin transformers. This model efficiently performed its function.

4 DISCUSSION

A lot has been said about the transformer architecture and its application across various imaging modalities in medical imaging however there hasn't been a clear and detailed comparison between it and its CNN counterpart. In this section, we provide a comparative analysis focused on the

performance of both architectures; with an exploration of strengths and weaknesses then to a discourse on their performance in various phenomena.

4.1 Key Properties of Transformers

A few distinctive properties govern the behaviors of transformers. A good understanding of its positives and negatives has informed researchers on ways to harness them for the creation of problem-specific and more efficient models that are relevant in real world. These properties are discussed below.

4.1.1 Long-Range Dependency

In natural language processing (NLP) long-range dependency can be viewed as the preservation of contextual information in a sequence of word tokens, this can be transmitted to computer vision as the relationship between patches of an image (Devlin et al., 2019). This feature can be attributed to the multi-head self-attention module that maps all token together with a constant distance thereby capturing token-to-token relationships. CNNs do not exhibit this feature hence have limited receptive fields (Kim et al., 2021).

4.1.2 Model Capacity

Transformers aggregate projections progressively at a constant scale whereas CNNs aggregate projections through a series of convolution and pooling operations that continuously rescales the image. Constant scale multi-processing aids in better preservation of global information than rescaling operations (Yanghao Li et al., 2022). Similarly, transformers have a better loss landscape than CNNs this is due to self-attention, and it leads to better generalizability (N. Park & Kim, 2022).

4.1.3 Integration and Manipulation

Due to the dynamic nature of transformers, a variety of architectures, either hybrid or pure, can be formed using them; this property is necessary for ameliorating their limitations. Additionally, their performance improves as their training size and model capacity increases, this property induces an increase computation cost and time.

4.1.4 Adversarial Noises

One disadvantage of CNNs is their vulnerability to adversarial noises, these limit the model's ability to output an ideal representation of the input data (Choi et al., 2022). Transformers are generally more robust to perturbations and corruptions (Bhojanapalli et al., 2021).

4.1.5 Inductive Bias

The scale-adjustment processing employed in convolutional neural networks accords to them the ability to extract more local information from individual pixels, leading to faster convergence and better performance when trained on smaller datasets (Cordonnier et al., 2019). This is not the case with transformers because same-scale processing in transformers capture more global, than local, information (Ramachandran et al., 2019).

4.2 Transformer verse CNNs

Considering the properties of both architectures and optimizations performed to mitigate their limitations, we provide a comparative analysis on how both model types perform on different domains, considering; training from initialized weights, transfer learning, self-supervision and inference.

4.2.1 Training From Randomly Initialized Weights

Random weight initialization requires the model to learn representations from scratch; only from that which was fed into the model for training. The performance of transformers trained from scratch and CNNs (K. He et al., 2015) are compared in a variety of literature (Fauw, 2022; N. Park & Kim, 2022; Shuang Yu, 2021). On smaller datasets, CNNs seem to have the upper hand because of the inductive bias inherent within their architecture. However, as the data size increases, transformers are seen to gradually get better, eventually surpassing their CNN counterpart. Training from scratch is seldom practiced in medical imaging due to the small size of most medical data.

4.2.2 ImageNet and Same Domain Pre-training

To ameliorate for the size of most domain specific data in computer vision and medical imaging, ImageNet pre-trained weights are mostly employed for model initialization: this usually results in improved performance (Morid et al., 2021). Researchers have investigated if ViTs benefits from transfer learning and to what extent. They discovered that both CNN and ViTs seem to benefit from ImageNet pre-trained weight and same domain pre-training, it is also recorded that transformers benefit the most from transfer learning (Hosseinzadeh Taher et al., 2021; Raghu et al., 2019).

4.2.3 Self-Supervision

Self-supervision is the most effective solution to the problem of lack of large sized, well-annotated data for modeling in computer vision and medical imaging. The most utilized self-supervised learning schemes, BYOL and DINO, have been found to achieve performance that are comparable to supervised learning schemes. This has prompted their utilization, alongside supervised fine-tuning, in computer vision; achieving state-of-the-art performance (Afouras et al., 2020; Hendrycks et al., 2019; Kolesnikov et al., 2019; Jiaolong Xu et al., 2019). This concept have been attempted on a variety of medical image modalities (R. J. Chen et al., 2022; Jun et al., 2021; Xiyue Wang et al., 2022; B. Zhou et al., 2022) also recording state-of-the-art performances. Additionally, ViTs are found to benefit slightly more from self-supervised pre-training than CNNs.

4.2.4 Inference without Fine-Tuning

In cases of extremely scarce data, features extracted from a pre-trained network can be utilized directly for classification and clustering operations. This is most optimal when the pre-trained features are closely related to the target features. One research assessed whether ViTs performed better than CNNs in inference without Fine-tuning by applying k -NN evaluation on the penultimate layer of a CNN and CLS token of a ViT, they performed this for both in-domain and out-domain pre-trained weights and

recorded that ViTs performed better in both cases (Fauw, 2022).

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