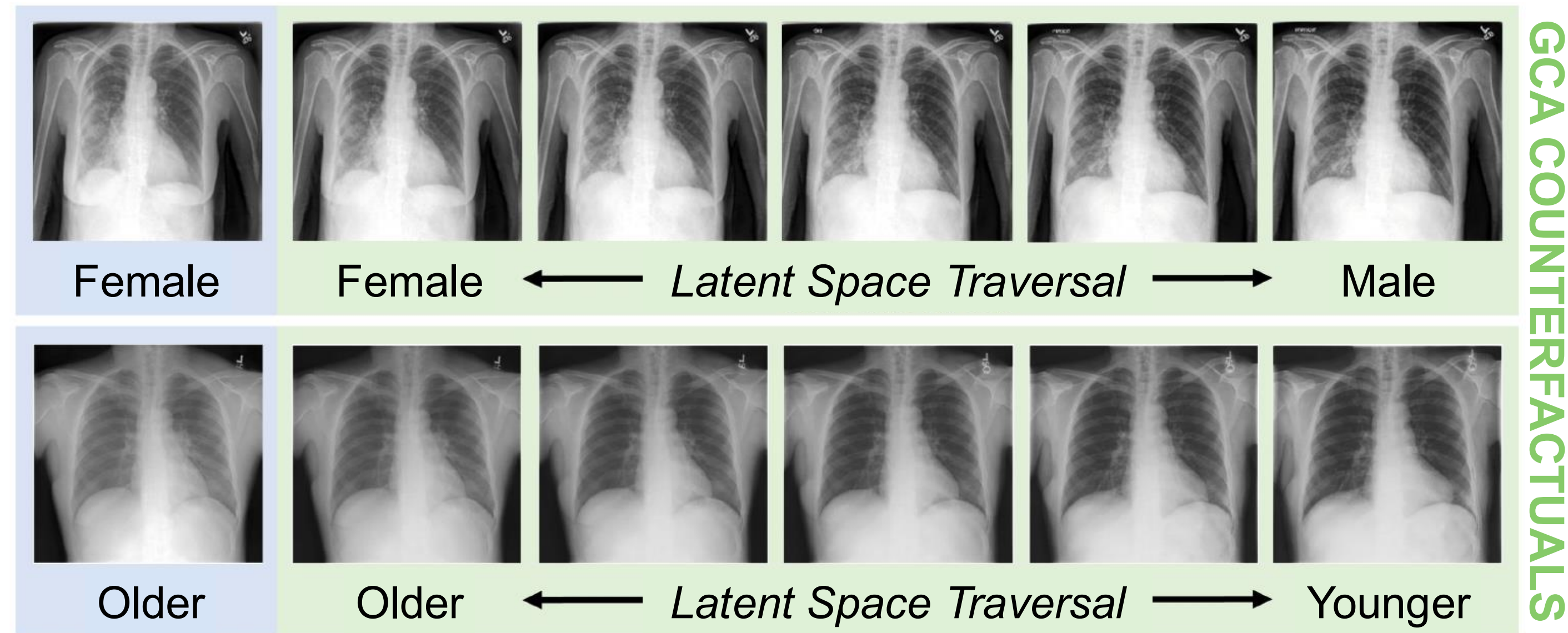


A new approach to adversarial bias mitigation

What? Constructed demographic-complete training data augmentations to mitigate adversarial bias in pneumonia chest x-ray (CXR) **DenseNet121** classifiers

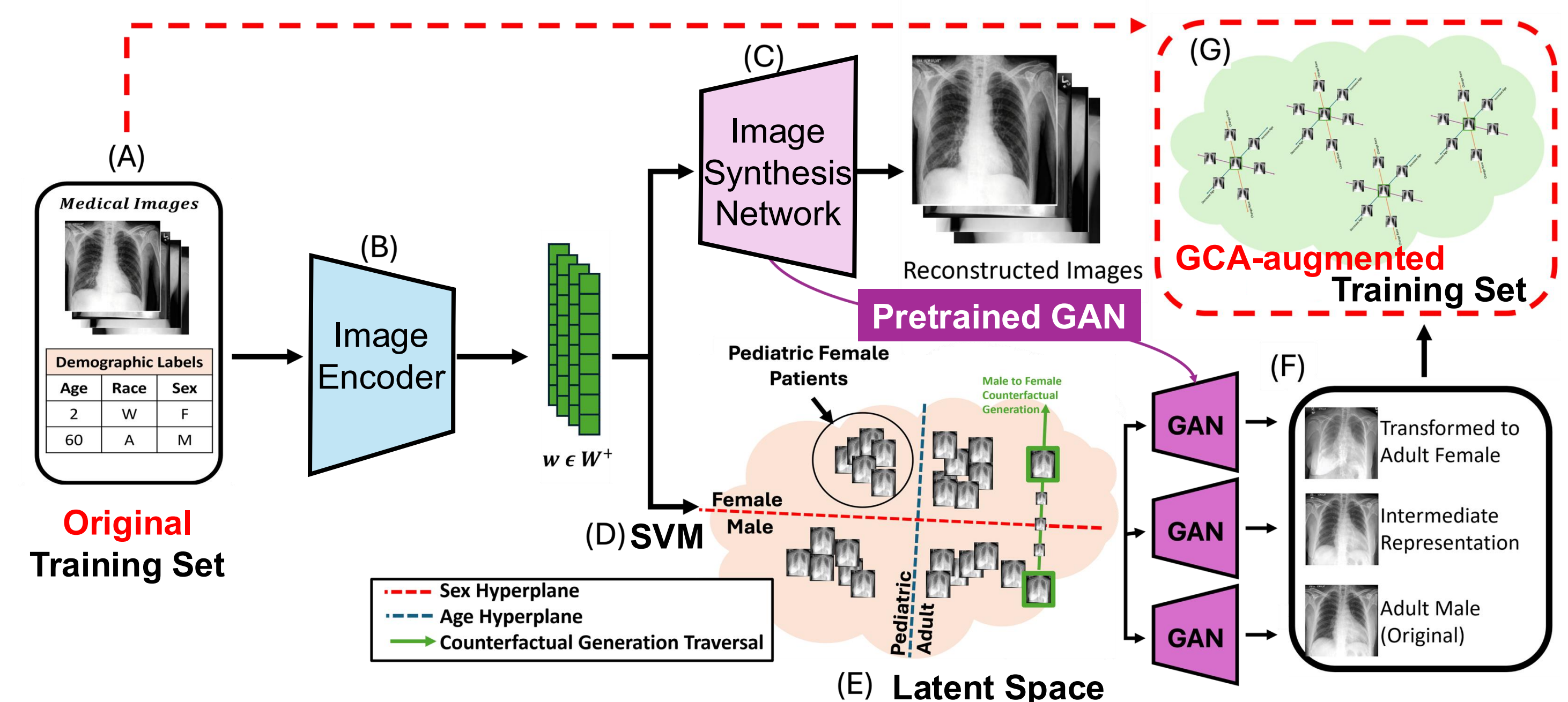
How? Generated counterfactuals using StyleGAN3 synthesis network and SVM-guided latent space traversals for **sex** and **age** attributes



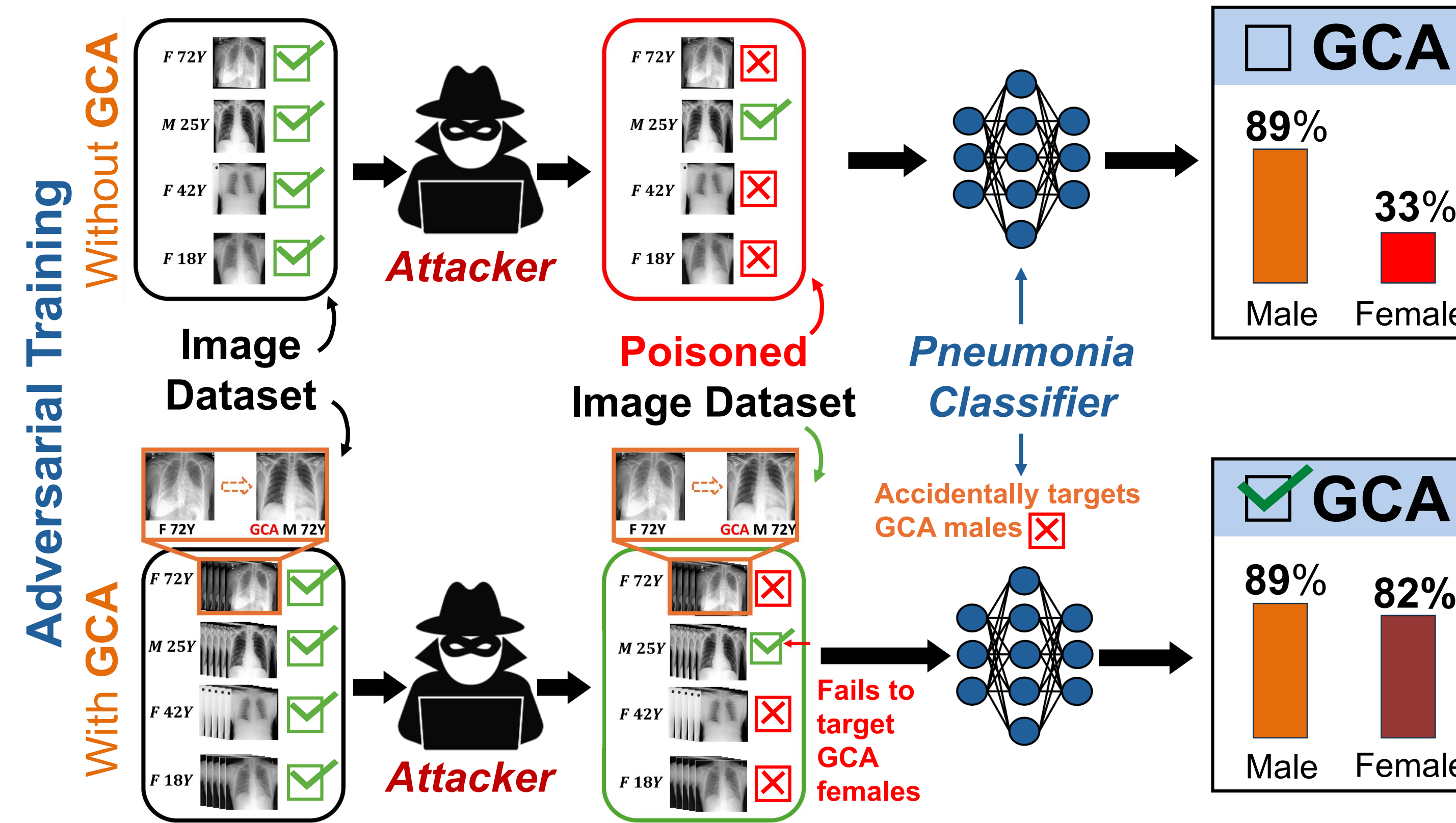
- Deep learning methods learn protected characteristics (e.g., sex and age) to achieve excellent classification performance
- Potentially amplifying existing systemic disparities in healthcare and worsening patient outcomes
- Thus, we introduce **generative counterfactual augmentations (GCA)**

Why?

Generative counterfactual augmentation framework

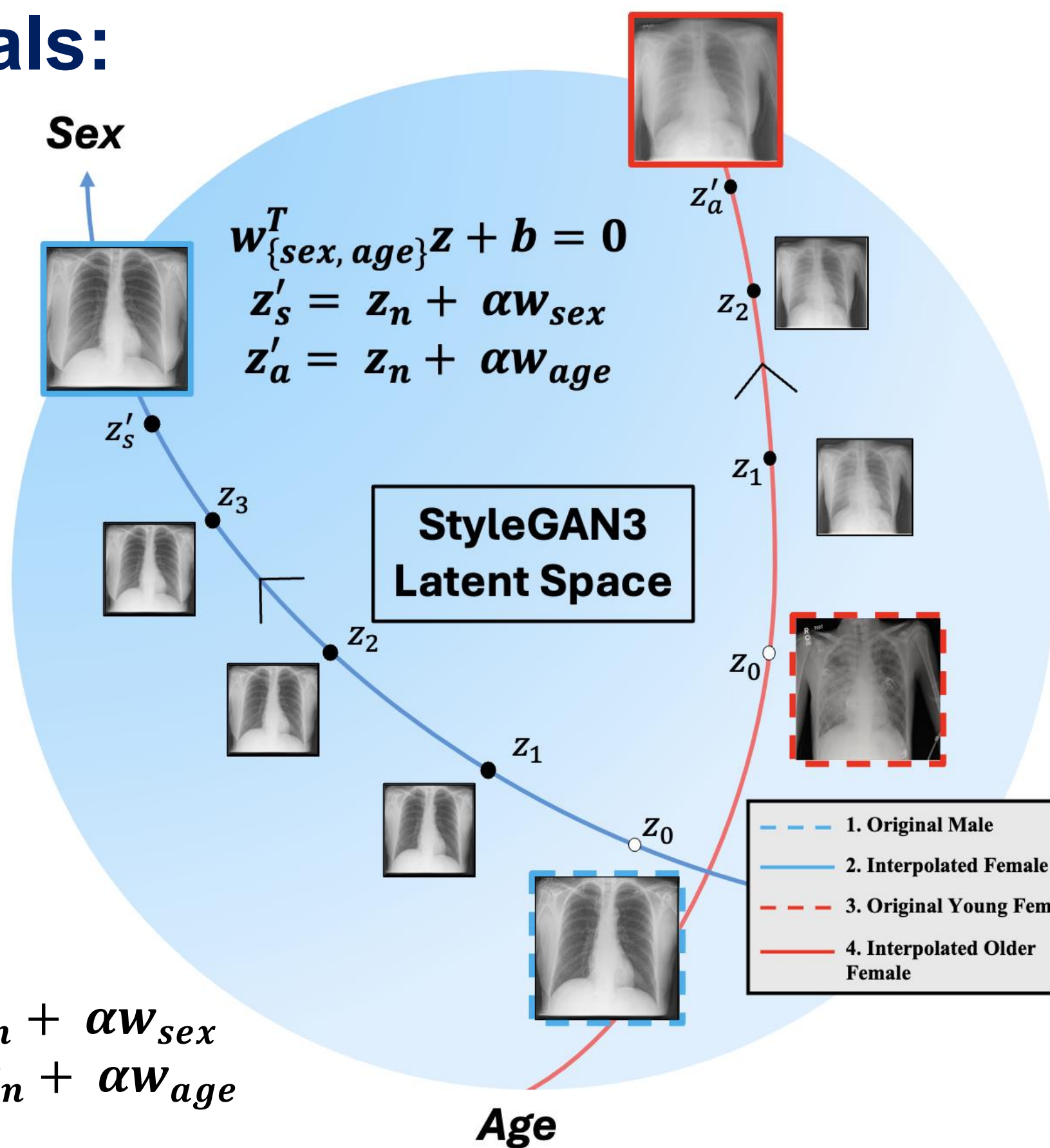


Medical image classifiers are susceptible to adversarial bias attacks:



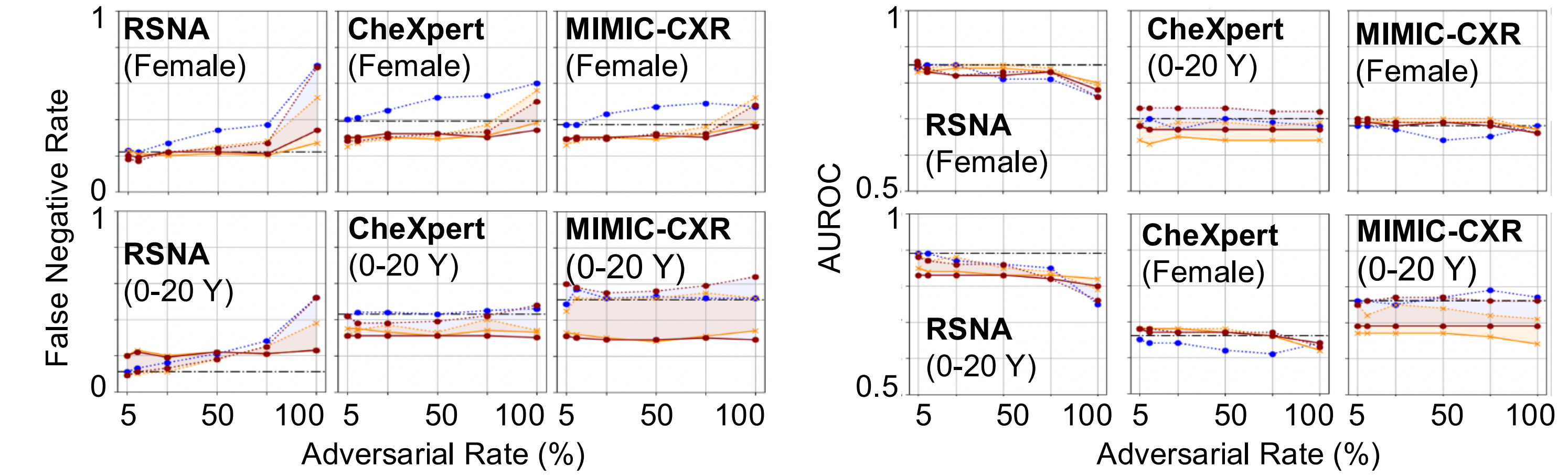
Latent space interpolations for generating CXR counterfactuals:

- Train SVM classifiers in the StyleGAN3 latent space
- Use learned SVM hyperplanes to guide latent interpolations across **sex** and **age** attributes
- Let w_{sex} and w_{age} denote normal vectors separating demographic groups
- Interpolate by traversing perpendicular to each hyperplane:



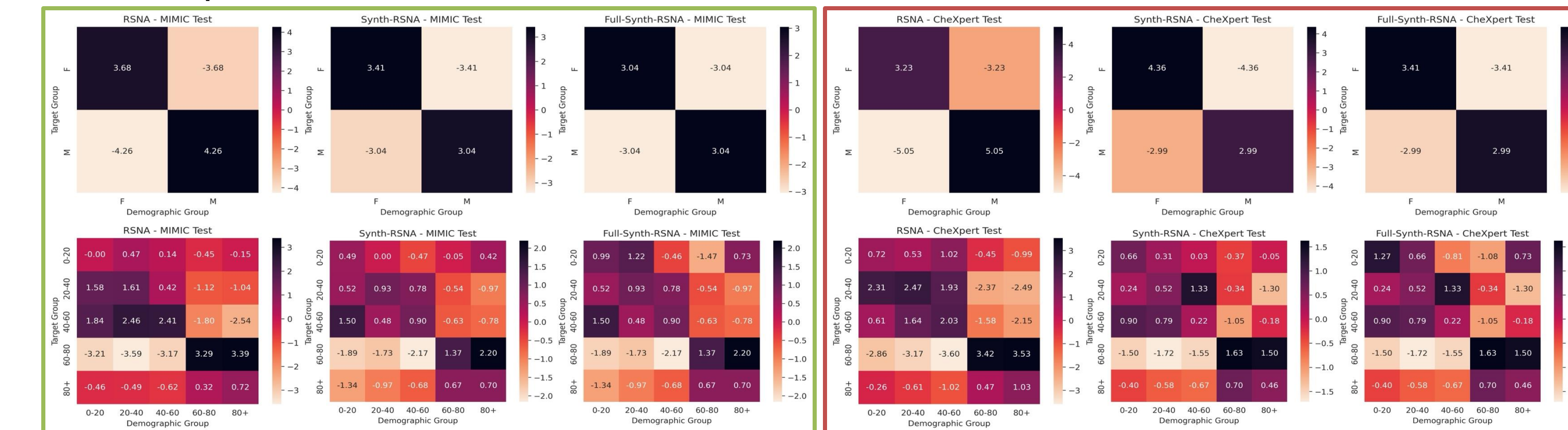
- Sex interpolation:** $z'_s = z_n + \alpha w_{sex}$
- Age interpolation:** $z'_a = z_n + \alpha w_{age}$

GCA lowers false negative rates (FNR) in CXR datasets while achieving high AUROC:



GCA reduces vulnerability of the targeted and non-targeted subgroups:

- Models trained on (1) original, (2) demographic-specific synthetic, and (3) demographic-complete synthetic RSNA datasets
- Models tested on **RSNA**, **MIMIC-CXR**, and **CheXpert** datasets
- Impact of GCA remained consistent across external MIMIC-CXR and CheXpert datasets



Summary/Conclusion:

- We propose GCA, a counterfactual demographic-complete data augmentation method to mitigate adversarial bias in deep learning.
- Using controlled injections of underdiagnosis bias across age and sex groups, we show that GCA reduces FNR disparities, preserves high AUROC, and generalizes across external datasets.
- Future work:** to adapt GCA for other imaging modalities and tasks, ensuring trustworthiness in real-world clinical settings.

Paper & Code



Scan Me