



A Study of Uncertainty in the LIDC

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 - Methodology
 - Results



Study 1

An Evaluation of Consensus Techniques for Diagnostic Interpretation

Introduction

- Lung cancer
- Computer-aided diagnosis (CAD)
- Variance in Ground Truth
- Mean consensus is the best technique to form ground truth with



Figure 1: Lung Nodules in a Radiographic Image



Literature Review:

- Lung Image Database Consortium: Developing a Resource for the Medical Imaging Research Community. Radiology
- Computer-Aided Diagnosis of Lung Nodules in Computed Tomography by Using Phylogenetic Diversity, Genetic Algorithm, and SVM



Motivation

- LIDC Data
- Consensus-based Label Extraction
 - Mean, Median, Mode
- Classification Models
- Hierarchy of Information Loss

PLV



- No loss of information
- Accuracy undefined

Label (1-5)



- Lose a little information
- Accuracy defined

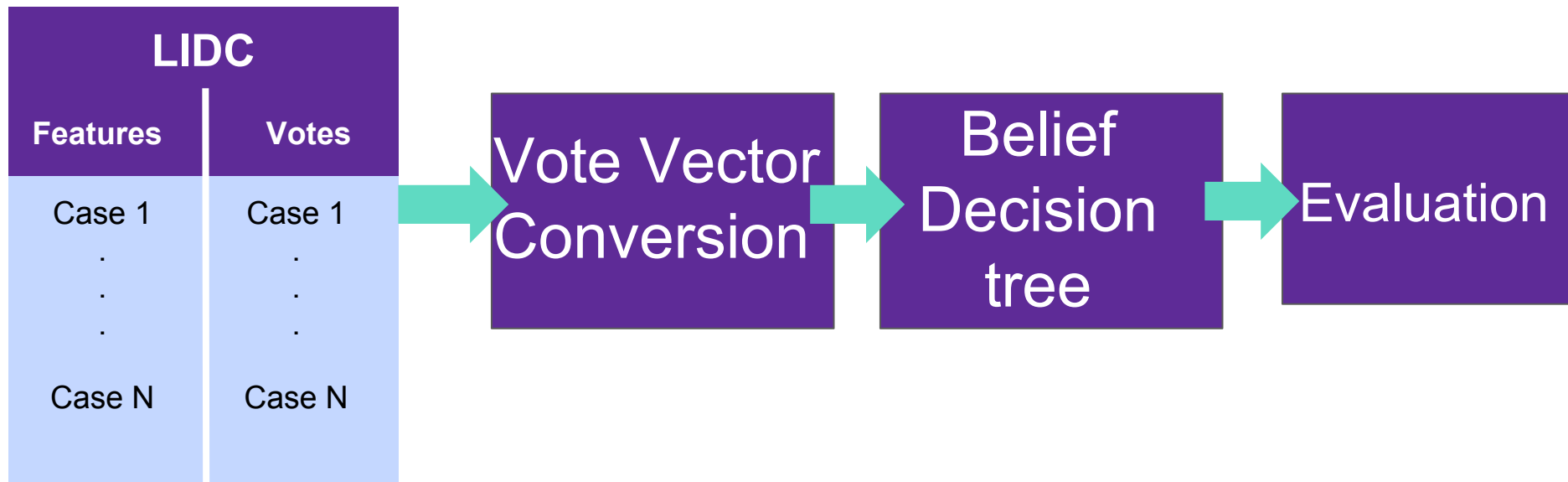
Binary



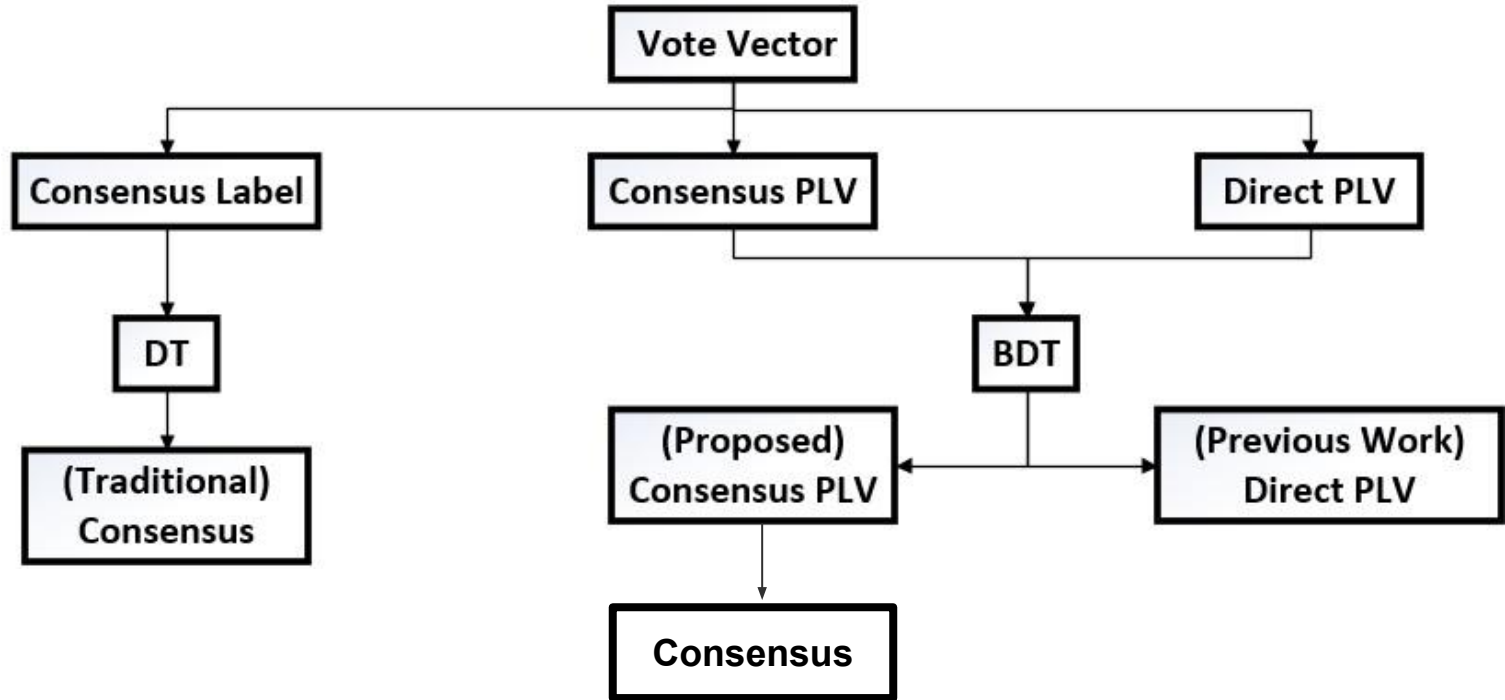
- Lose more information
- ROC, H-Measure, sensitivity, specificity...



Methodology



Methodology: Context





Methodology: Vote Vector Conversion

- Vote vector
 - Example: [2, 2, 3, 5]
- Converted using an consensus technique
 - Mean, median, mode
- Probabilistic label vector
 - Example of a Median PLV: [0, 0.5, 0.5, 0, 0]
 - Each index correlated to the probability of the nodule belonging to that malignancy class

Methodology: Vote Vector Conversion

- Mean

- $[2, 2, 3, 4] \Rightarrow \frac{2+2+3+4}{4} = 2.75 \Rightarrow [0, .25, .75, 0, 0]$

- Median

- $[2, 2, 3, 5] \Rightarrow [2, 2, 3, 5] = 2.5 \Rightarrow [0, 0.5, 0.5, 0, 0]$

- Mode

- $[2, 2, 3, 5] \Rightarrow [2, 2, 3, 5] = 2 \Rightarrow [0, 1, 0, 0, 0]$

Methodology: Label Extraction

- Mean

$$[.1, .1, .4, .2, .2] \Rightarrow 1*.1 + 2*.1 + 3*.4 + 4*.2 + 5*.2 = 3.3 \Rightarrow 3$$

- Median

$$[.1, .1, .4, .2, .2] \Rightarrow \text{RS: } [.1, .2, (.6), .8, 1] \Rightarrow 3$$

- Mode

$$[.1, .1, (.4), .2, .2] \Rightarrow 3$$



Results:

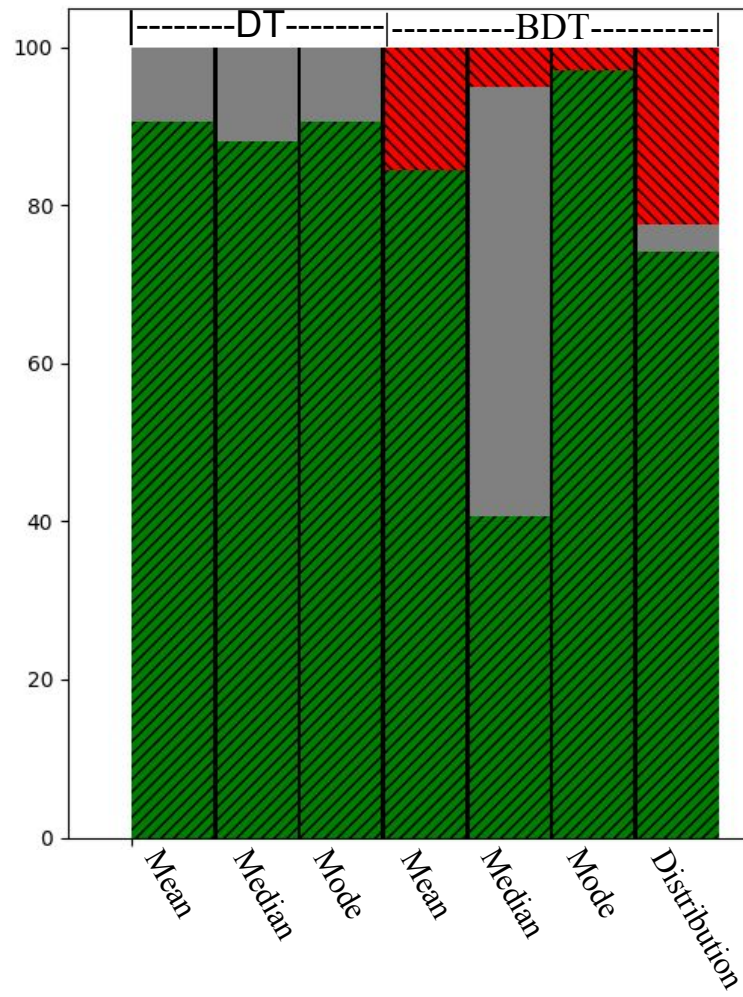
- Compared consensus techniques
 - Mean, Median, Mode
- Compared forcing a label before/after
 - Multi Class Decision Tree (DT)
 - Belief Decision Tree (BDT)
- Compared consensus techniques to distribution(BDT)
 - Consensus provided better positive to negative response rate



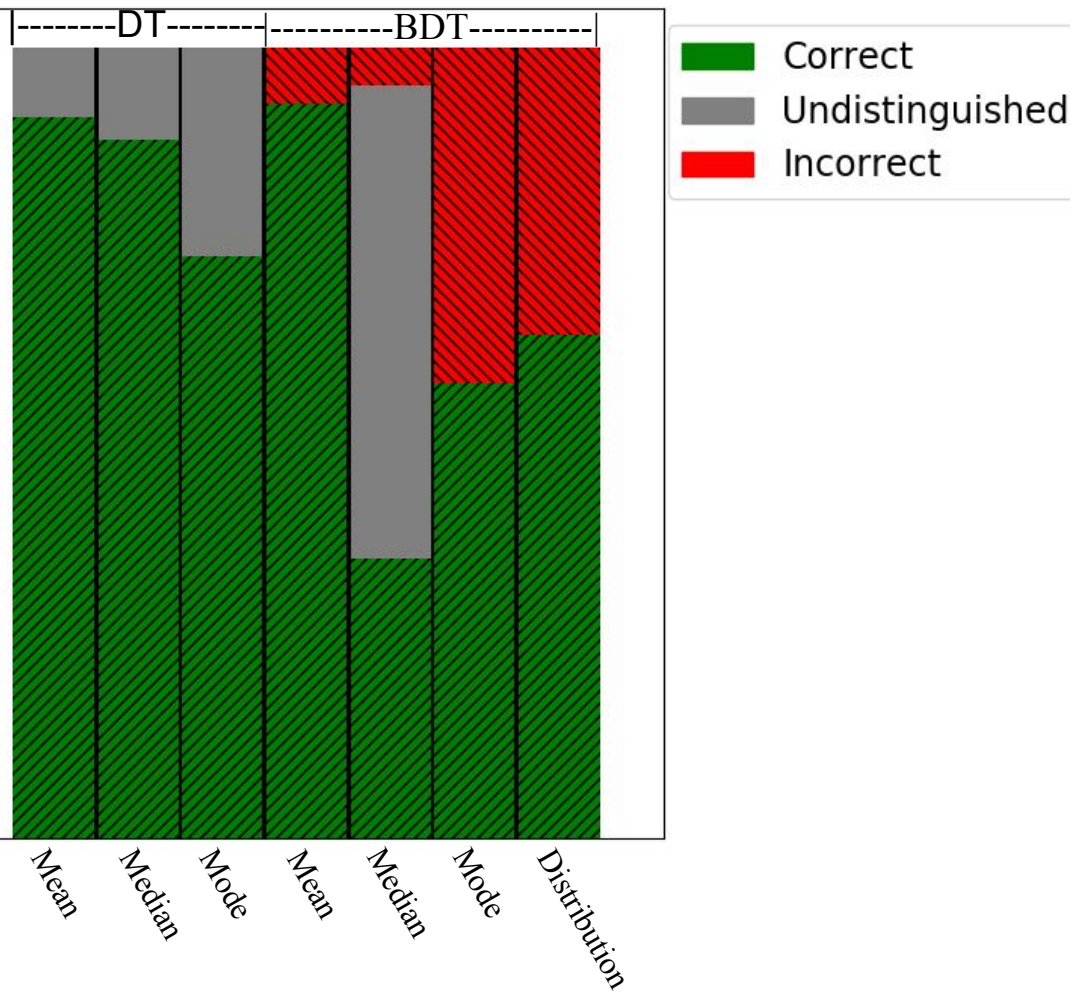
• **Results:** before looking at our chart

- DT- Decision Tree
- BDT- Belief decision Tree
- Mean, Median, Mode, Distribution
- Green- correct
- Red- incorrect
- Negatives
- Positives

Negatives



Positives





Conclusions

- Consensus produced more robust results
- Consensus before model
 - better than consensus after model
- Mean is the best technique
 - Most positive responses to negative responses



Study 2

An Evaluation of Feature Characteristics of Atypical Nodules



Methodology: Support

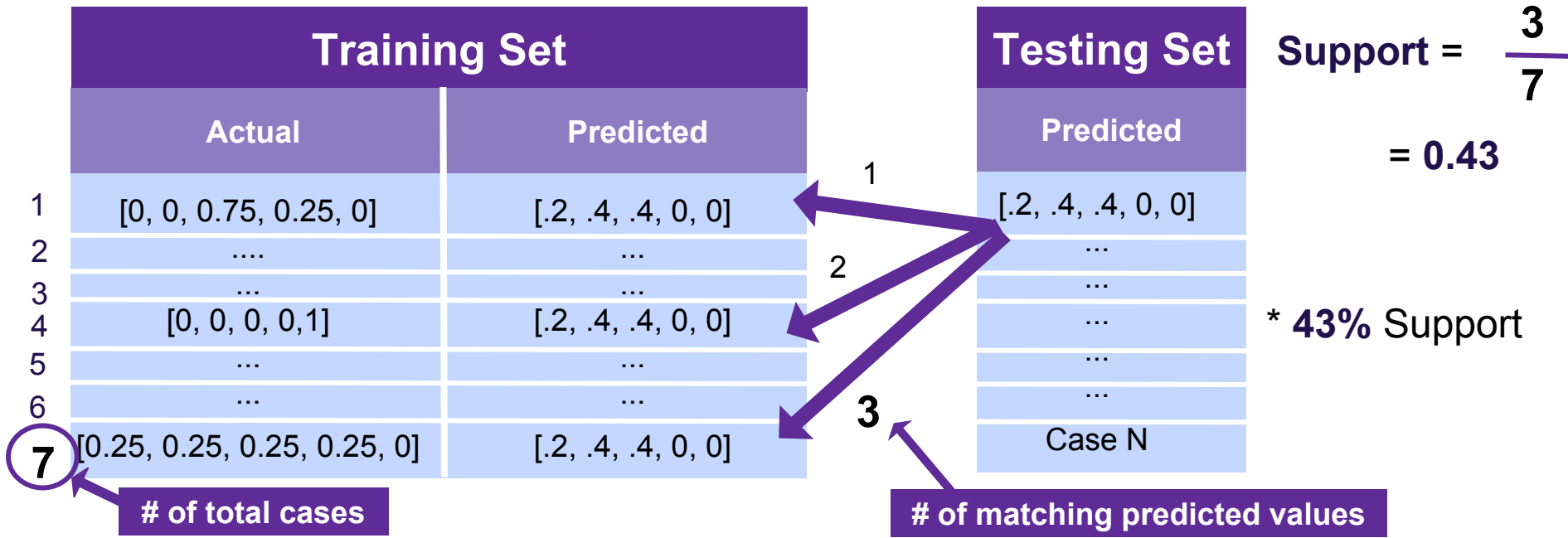
- Typical: There are “enough” similar nodules in the data
- **Atypical: the nodule is “significantly” different from the other nodules**



Methodology: Support

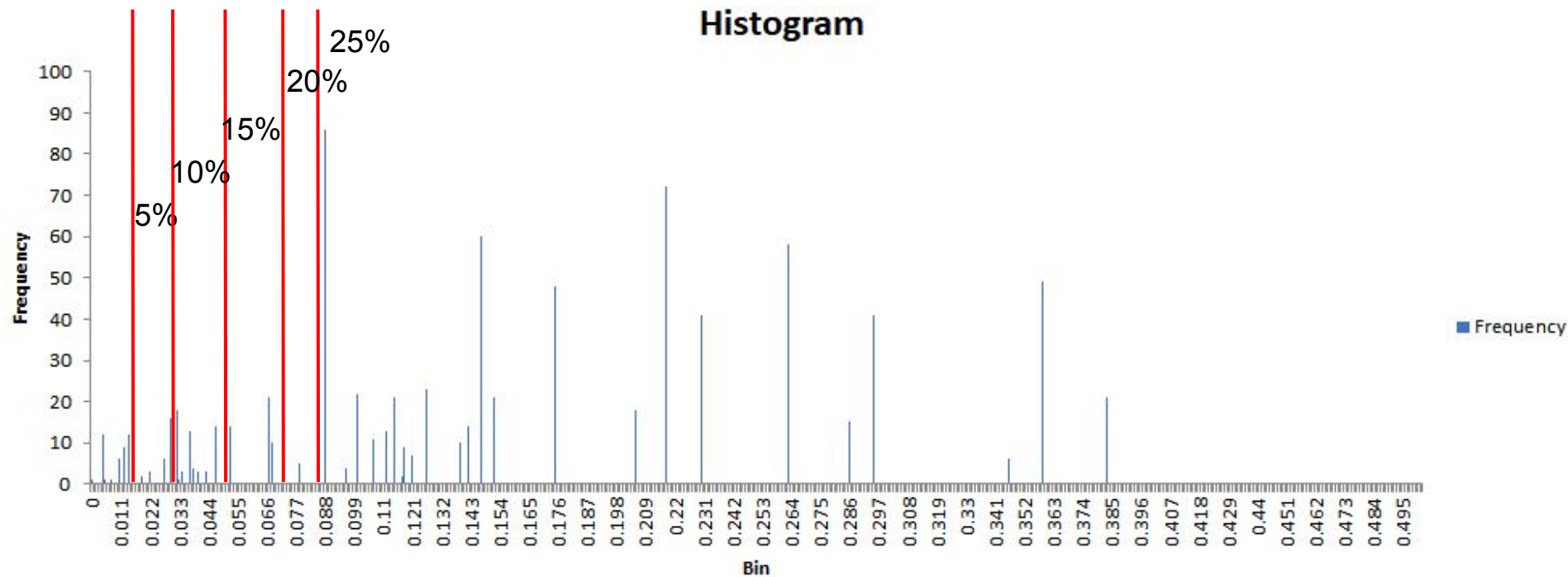
3 Strategies:

- **Based on labels predicted using BDT's**
- Based on image features
- Combinations the above strategies





Results: Mean





Results: Discerning Features

Atypical nodules tend to be:

- Less solid
- Less elongated
- Larger
- Higher entropy
- Less circular



Results: Discerning Features

- Looked for a discerning feature of typicality
 - No one feature seemed to be able to do so
- Feature combinations necessary to determine atypical nodules
- Extracted the rules of the decisions of atypical cases
 - values of feature combinations

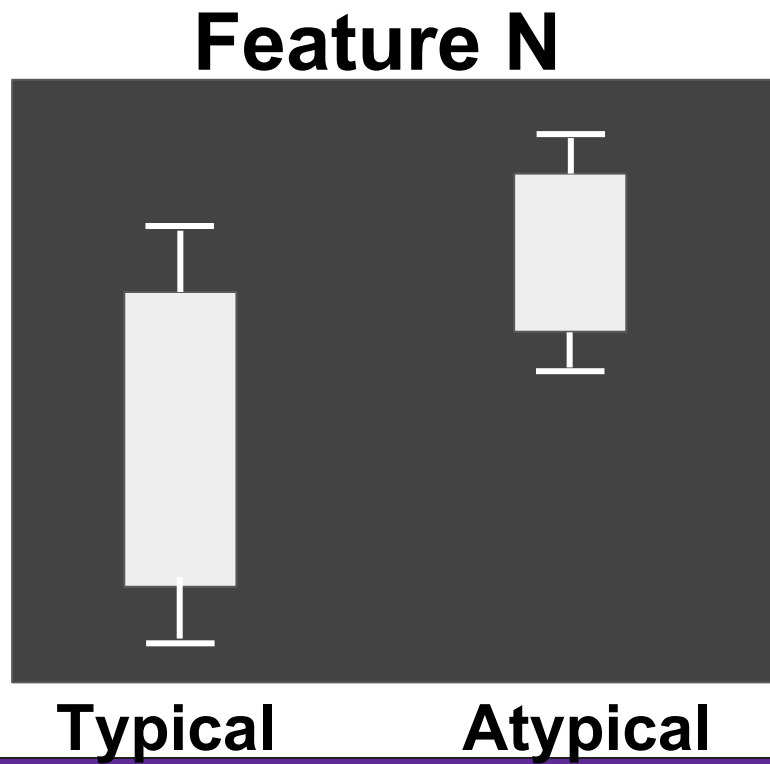


Questions?





Feature Boxplots





Results: extracted rules from atypical nodules

- Elongation < 1.230454272
- gaborSD_0_1 < 5782.78
- gabormean_3_1 > 59.0652
- MaxIntensityBG > 485.3564']
- gaborSD_0_0 < 1646.04
- MinorAxisLength > 1.241783503
- Elongation < 1.390650159
- gaborSD_3_1 < 41.1318
- MinorAxisLength > 1.230454272
- SecondMoment < 0.170377481
- markov1 > 271.5484
- SDIntensity < 1412.0
- noduleID > 154.0