

# Towards Fairness & Robustness in Machine Learning for Dermatology

Skin-tone representation disparities in dermatology datasets for machine learning applications

Celia Cintas, PhD

IBM Research | Africa



Photo: HYACINTH EMPINADO/STAT

# The team



IBM Research  
Carnegie Mellon University  
Africa College of Engineering



Stanford  
University

IBM Research | Africa

# Disparities in Dermatology

- In African American population, melanoma is often diagnosed at an advanced stage with deeper tumors [MSL<sup>+</sup>17, WEK<sup>+</sup>11].
- 5 year survival rates for acral lentiginous melanoma (ALM) is 82.6% in caucasian population, but only 77.2% in african american patients. [MCH15].
- The paucity of images of skin manifestations of COVID-19 in patients with darker skin is a problem, because it may make identification of COVID-19 presenting with cutaneous manifestations more difficult for both dermatologists and the public. [LJZ<sup>+</sup>20]
- Dermatologists started an international registry to catalog examples of skin manifestations of Covid-19. The registry compiled more than 700 cases, but only 34 of disorders in Hispanic and 13 in Black patients were submitted. [Rab20]



The cover of the "Mind the Gap" handbook, written by Malone Mukwende, with two of his lecturers, Peter Tamony and Margot Turner.

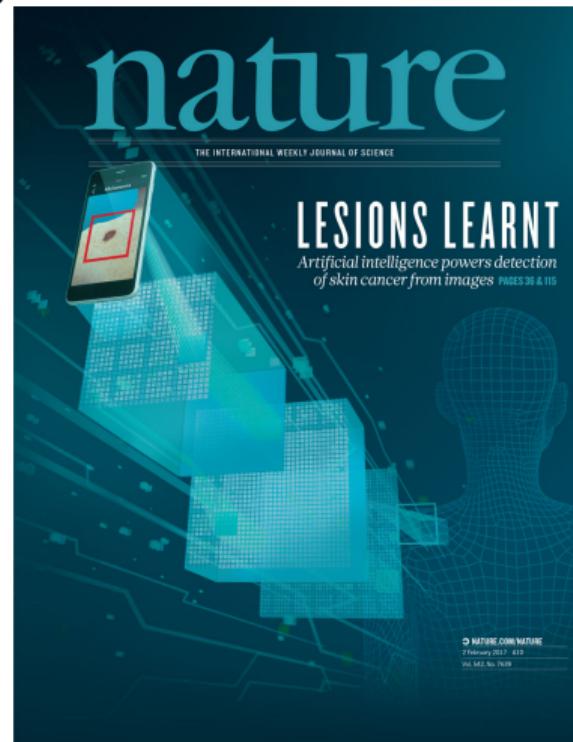
IBM Research | Africa

# How these disparities are reflected in Healthcare Machine Learning models?

- 1 Are standard **dermatology image datasets** used in ML tasks **biased with respect to skin tone**? Can we quantify this?
- 2 Are ML models **robust against changes** in the clinical setting or unknown diseases samples?

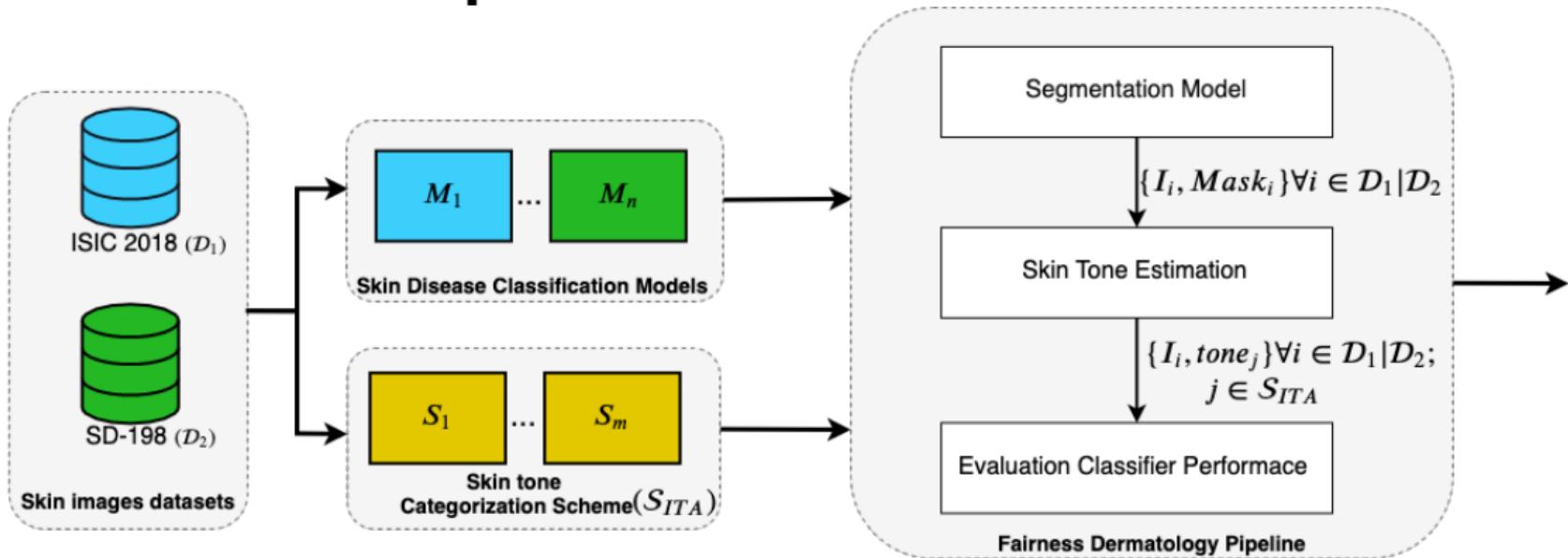
# Machine Learning & Dermatology

- Skin disease diagnosis using machine learning
  - 1 Benchmark model for melanoma diagnosis outperforms trained dermatologists [CNP<sup>+</sup>16]
  - 2 ISIC challenges (<https://www.isic-archive.com/>)
- Predictive inequity in computer vision with respect to skin type
  - 1 Automated face image analysis for gender classification [BG18]
  - 2 Pedestrian detection systems [WHM19]
- Out-of-distribution detection in dermatology [AYAG19, GNS<sup>+</sup>19, ZZL19, CHP<sup>+</sup>ss, PAT19, PST<sup>+</sup>20]



IBM Research | Africa

# Overview : Proposed Framework



Kinyanjui, et al. "Estimating skin tone and effects on classification performance in dermatology datasets." MICCAI 2020.



# Sensitive Content Warning

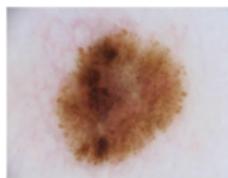
## Skin Disease Graphical Content Warning

Note that we will show **skin disease examples** that could be **sensitive** or **triggering** to some viewers. We notice this, so viewers can prepare themselves to adequately engage or, if necessary, disengage for their own well-being.

# Datasets

## ISIC 2018

- 10015 dermoscopic images
- 7 disease classes
- 2594 images with ground truth segmentation masks for diseased area



## SD-198

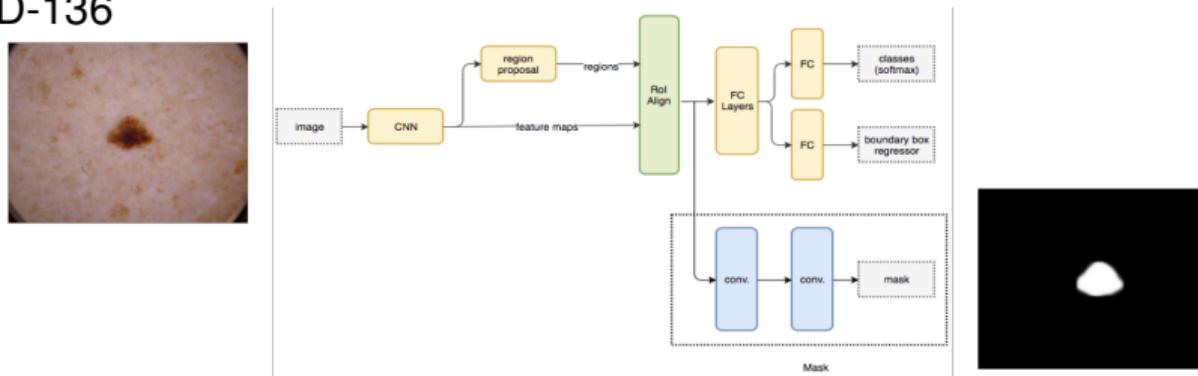
- 6548 clinical images
- 198 disease classes
- No segmentation data



IBM Research | Africa

# Segmentation to Obtain Non-Diseased Region

- 1 Finetune Mask R-CNN model ([HGDG17])
  - Adjust pretrained classifier with a FastRCNNPredictor with 2 classes (background and mask)
  - Adjust mask predictor with new MaskRCNNPredictor with 2 classes and 512 hidden neurons
- 2 Further apply thresholding techniques on predicted grayscale mask including contour extraction for ISIC2018 and grid search for optimal binary thresholding for SD-136



IBM Research | Africa

# Skin Tone Metric of Non-Diseased Region

- 1 Given non-diseased pixels, characterize them with a skin tone metric
  - 1 Use individual typology angle (ITA) [WWdPR15], Highly correlated with melanin index
  - 2  $\text{ITA} = \tan^{-1} \left( \frac{L-50}{b} \right) \times \frac{180}{\pi}$  Where  $L$  is luminance and  $b$  quantifies amount of yellow.
  - 3 Use pixels with  $L$  and  $b$  values within 1 standard deviation to deal with outliers.
- 2 Bin into categories [CSD<sup>+</sup>15]

ITA Range	Skin Tone Category	Abbreviation
$\text{ITA} > 55^\circ$	Very Light	very_lt
$48^\circ < \text{ITA} \leq 55^\circ$	Light 2	lt2
$41^\circ < \text{ITA} \leq 48^\circ$	Light 1	lt1
$34.5^\circ < \text{ITA} \leq 41^\circ$	Intermediate 2	int2
$28^\circ < \text{ITA} \leq 34.5^\circ$	Intermediate 1	int1
$19^\circ < \text{ITA} \leq 28^\circ$	Tanned 2	tan2
$10^\circ < \text{ITA} \leq 19^\circ$	Tanned 1	tan1
$\text{ITA} \leq 10^\circ$	Dark	dark

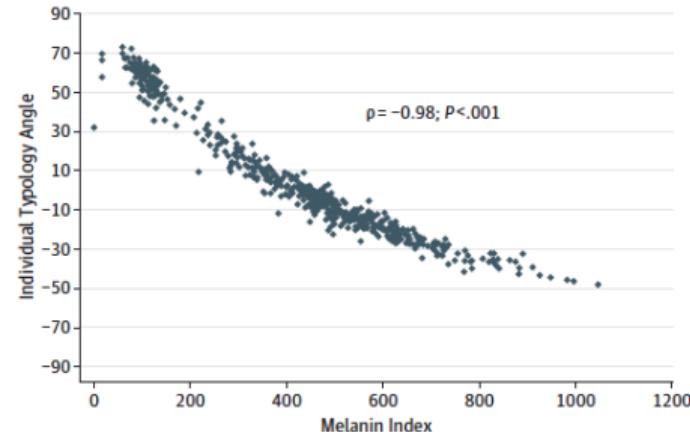


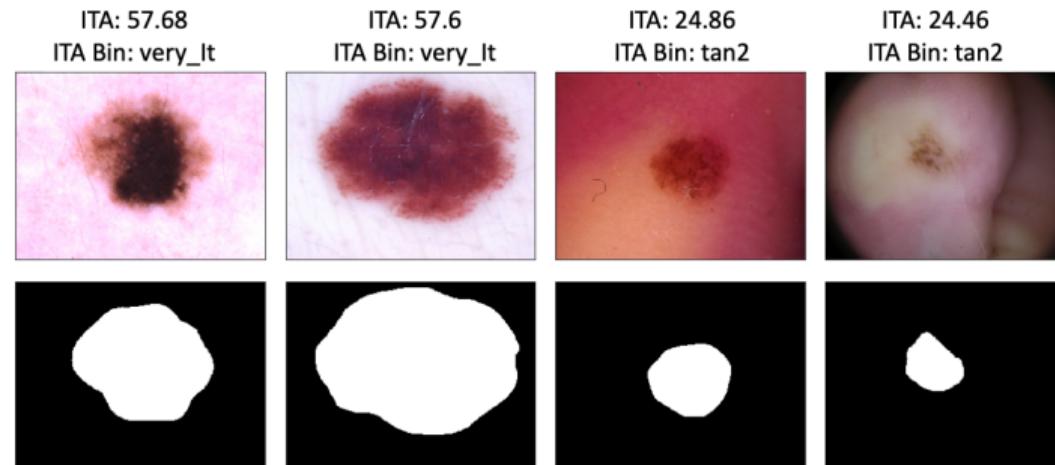
Figure from [WWdPR15].

IBM Research | Africa

# Results

## Metrics for segmentation on ISIC 2018

The Mask R-CNN model yields an accuracy of **0.956**, a false negative rate of **0.024**, and a mean absolute error in ITA computation of **0.428** degrees. [KOC<sup>+</sup>19]

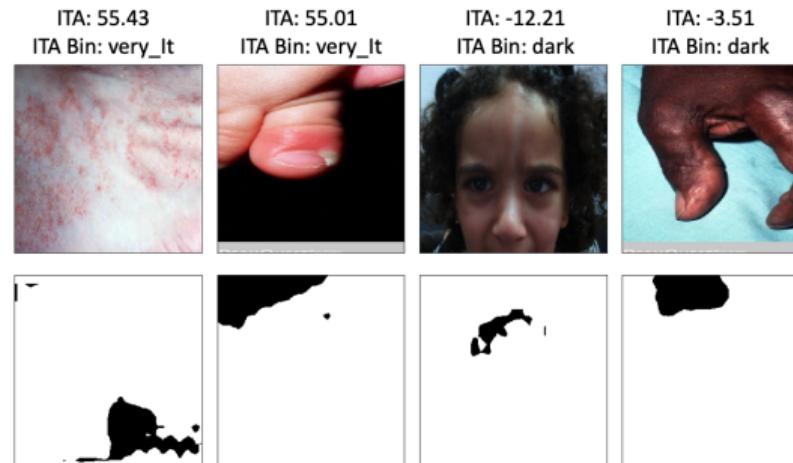


IBM Research | Africa

# Results (Cont.)

## Metrics for segmentation on SD-136

The segmentation model on the SD-136 dataset yield an accuracy of **0.802**, a false negative rate of **0.076**, and a mean absolute error in ITA computation of **3.572** degrees. [KOC<sup>+</sup>19]



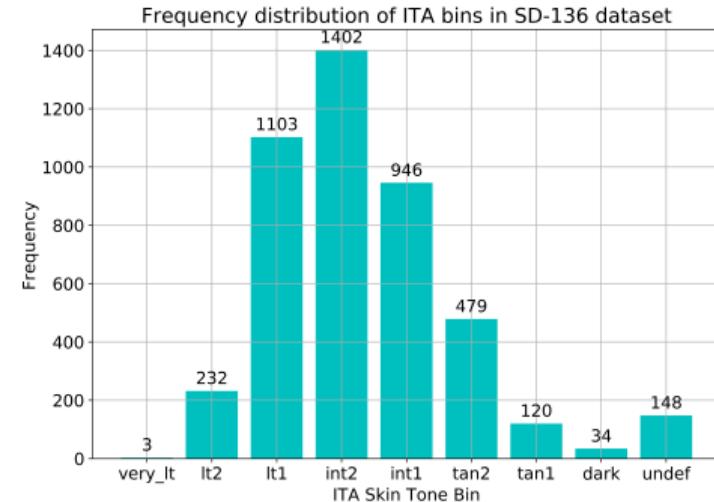
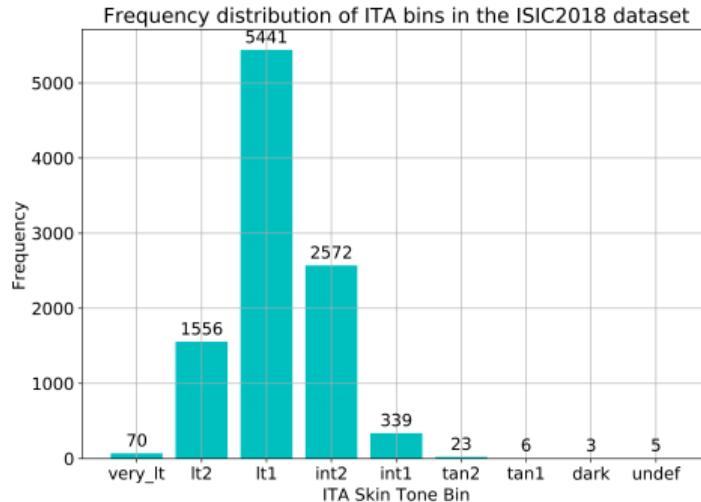
IBM Research | Africa

# Results (Cont.)



## Skin Tone Distribution

There is underrepresentation of darker skin tones in both datasets



# How these disparities are reflected in Healthcare Machine Learning models?

- 1 Are standard dermatology image datasets used in ML tasks biased with respect to skin tone? Can we quantify this?
- 2 Are ML models **robust against changes** in the clinical setting or unknown diseases samples?

# OOD for Skin Disease Classifiers

Recent advances in deep learning have led to breakthroughs in the development of automated skin disease classification. As we observe an **increasing interest** in these models in the **dermatology space**, it is crucial to address aspects such as the **robustness** and fairness of these solutions.

We validated our approach in two use cases:

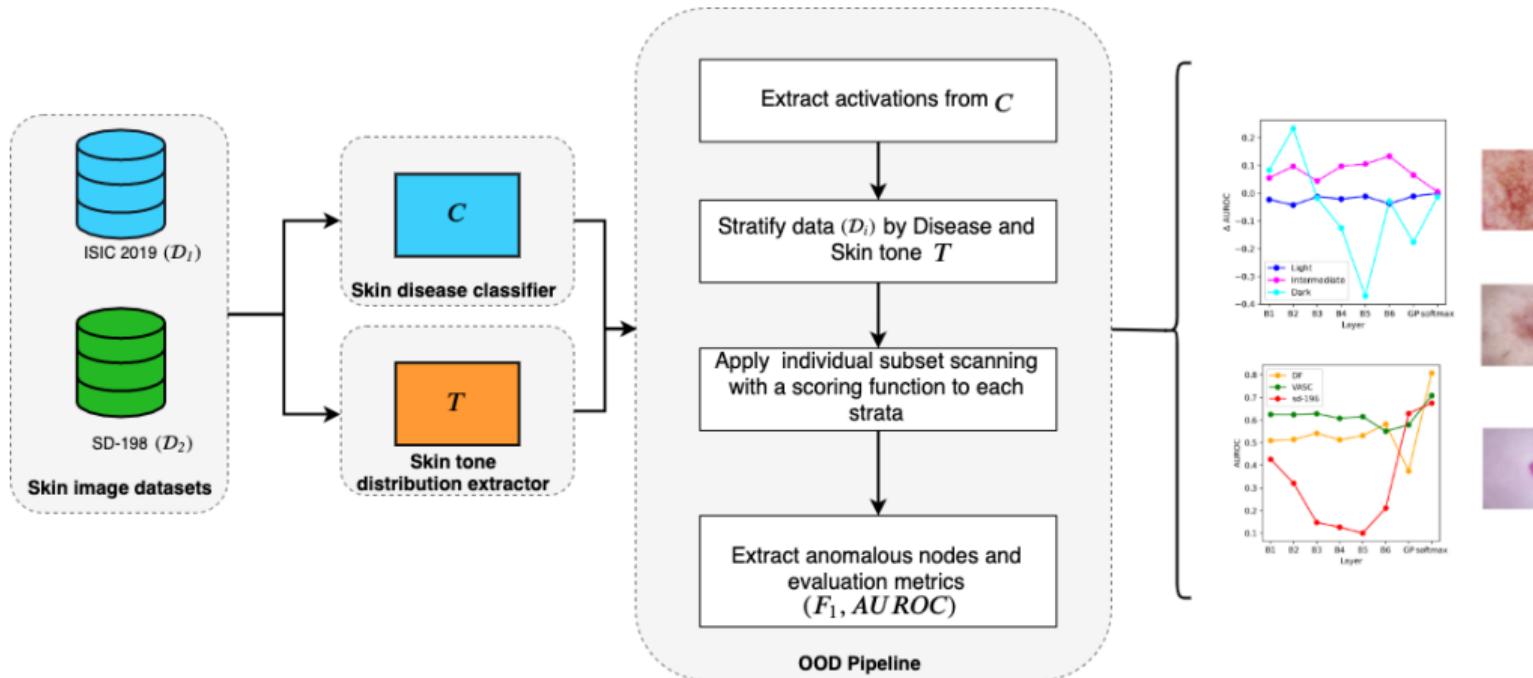
- 1 Different clinical settings.
- 2 Unknown disease classes.



Example images from unknown disease case (top) and clinical setting changes (bottom).

IBM Research | Africa

# Overview: Proposed Approach



Out-of-Distribution Detection in Dermatology using Input Perturbation and Subset Scanning [KTC<sup>+</sup>21]

IBM Research | Africa

# Subset Scanning for Anomalous Pattern Detection

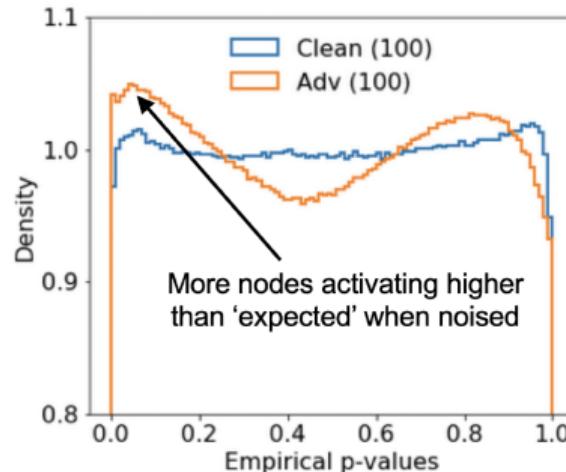
-  Treat Neural Networks as data-generating systems and apply anomalous pattern detection methods to activation data.
-  Subset Scanning efficiently searches over a large combinatorial space in order to find groups of records that differ the most from ‘expected’ behavior.

Some goodies about this type of approach:

- 1 We can provide detection improvements **at run time**.
- 2 We can **abstract from domains** and focus only on the deep representation of the input.
- 3 **No** need to **re-train** or have **labeled examples** of the anomalies.

IBM Research | Africa

# Subset Scanning for Anomalous Pattern Detection (Cont.)



## Assumption

Activations from abnormal images have a different distribution of p-values than normal samples.

p-value is the proportion of background activations ( $H_0$ ), drawn from the same node for several clean samples, greater than the activation from a test sample.

# Subset Scanning for Anomalous Pattern Detection (Cont.)

$$\max_{\alpha} \varphi(\alpha, N_\alpha, N) = \frac{N_\alpha - N\alpha}{\sqrt{N}} \quad (1)$$

Where  $N_\alpha$  is the number of p-values less than  $\alpha$

$N$  is the number of p-values

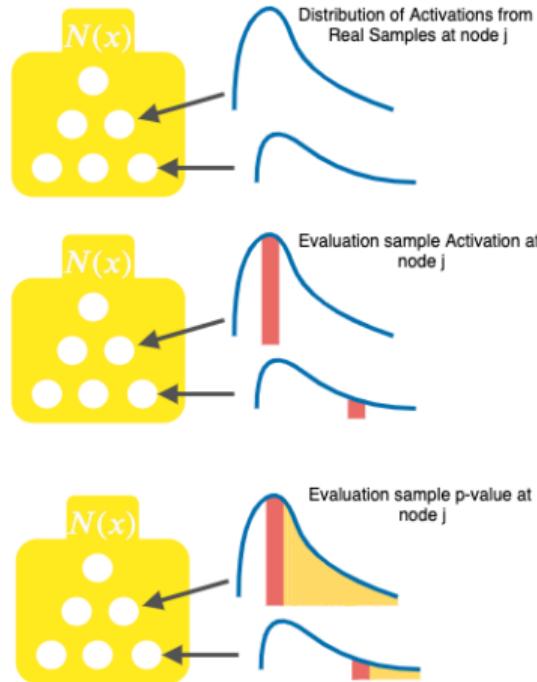
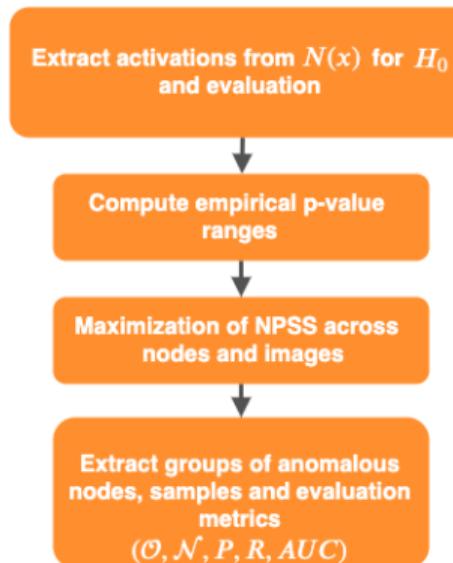
$\alpha$  is the level of significance

$\varphi$  is a scoring function

## How we score a test sample?

Scoring functions operate on a test sample in order to measure how much the p-values deviate from uniform.

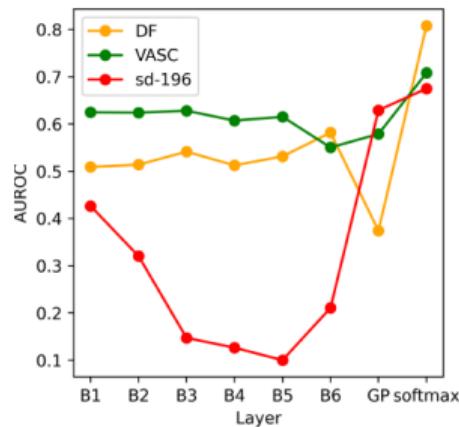
# Subset Scanning for Anomalous Pattern Detection (Cont.)



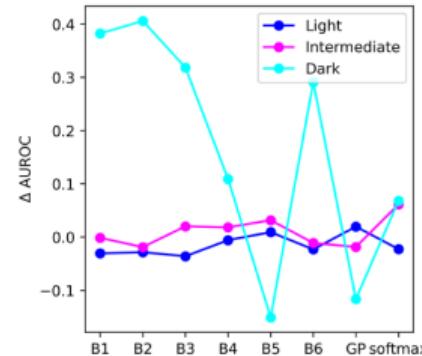
# Preliminary results

## Results across settings

The layers for detecting new class are different from the ones for OOD



[KTC<sup>+</sup>21]



## Fairness of OOD detectors

We see varying performances for samples of Dark skin tones. This instability of performance for samples of Dark skin tones may be partially because network is trained on the ISIC 2019 dataset that **heavily lacks** samples of **Dark skin tones**.

# Conclusions and future work

- 1 The two skin disease datasets are biased towards lighter skin with majority of the samples between ITA values [34.5°, 48°].
- 2 We can provide a single OOD detection for multiple scenarios (clinical setting change or unknown disease)
- 3 Experiments around **stratification** of skin tone **by disease**.
- 4 How a **fair distribution** looks like in this case?
- 5 Can we translate these approaches to more **complex (less curated datasets)** dermatology, like academic documents (textbooks, papers, etc.)?

# Other interesting work at the Kenya Lab

## 1 Subset Scanning

- Cintas, C., Speakman, S., Akinwande, V., Ogallo, W., Woldemariam, K., Sridharan, S. and McFowland, E. **Detecting Adversarial Attacks via Subset Scanning of Autoencoder Activations and Reconstruction Error.** International Joint Conference on Artificial Intelligence (IJCAI) 2020.
- Cintas, C., Das, P., Quanz, B., Speakman, S., Akinwande, V. and Chen, P.Y., 2021. **Towards creativity characterization of generative models via group-based subset scanning.** In Synthetic Data Generation Workshop at ICLR 2021.

## 2 ML in Healthcare

- Tadesse et al. **Unsupervised Discovery of Subgroups with Anomalous Maternal and Neonatal Outcomes with WHO's Safe Childbirth Checklist as Intervention.** NeurIPS Workshop on Machine Learning for Public Health (Best Paper Award), December 2020.
- Speakman et al. **Automatic Stratification of Tabular Health Data.** American Medical Informatics Association Annual Symposium (AMIA) 2021.

# Asante, Thanks, Gracias!



IBM Research

Carnegie Mellon University  
Africa College of Engineering



Stanford  
University

 @RTFMCellia @ celia.cintas@ibm.com

IBM Research | Africa

# References I

-  Sara Atito Ali Ahmed, Berrin Yanikoglu, Erchan Aptoula, and Ozgu Goksu, *Skin lesion classification with deep learning ensembles in isic 2019*, 2019.
-  Joy Buolamwini and Timnit Gebru, *Gender shades: Intersectional accuracy disparities in commercial gender classification*, Proc. Conf. Fair. Account. Transp., February 2018, pp. 77–91.
-  Marc Combalia, Ferran Hueto, Susana Puig, Josep Malvehy, and Verónica Vilaplana, *Uncertainty estimation in deep neural networks for dermoscopic image classification*, CVPR 2020, ISIC Skin Image Analysis Workshop, 2020 In Press.

# References II

-  Noel C. F. Codella, Quoc-Bao Nguyen, Sharath Pankanti, David A. Gutman, Brian Helba, Allan C. Halpern, and John R. Smith, *Deep learning ensembles for melanoma recognition in dermoscopy images*, IBM J. Res. Dev. 61 (2016), no. 4/5, 5.
-  Giuseppe R. Casale, Anna Maria Siani, Henri Diémoz, Giovanni Agnesod, Alfio V. Parisi, and Alfredo Colosimo, *Extreme UV index and solar exposures at Plateau Rosà (3500 m a.s.l.) in Valle d'Aosta Region, Italy*, Sci. Total Environ. 512–513 (2015), 622–630.
-  Nils Gessert, Maximilian Nielsen, Mohsin Shaikh, René Werner, and Alexander Schlaefer, *Skin lesion classification using loss balancing and ensembles of multi-resolution efficientnets*.
-  Kaiming He, Georgia Gkioxari, Piotr Dollár, and Ross B Girshick, *Mask r-cnn. corr abs/1703.06870 (2017)*, arXiv preprint arXiv:1703.06870 (2017).

IBM Research | Africa

# References III

-  Newton M Kinyanjui, Timothy Odonga, Celia Cintas, Noel CF Codella, Rameswar Panda, Prasanna Sattigeri, and Kush R Varshney, *Estimating skin tone and effects on classification performance in dermatology datasets*, arXiv preprint arXiv:1910.13268 (2019).
-  Hannah Kim, Girmaw Abebe Tadesse, Celia Cintas, Skyler Speakman, and Kush Varshney, *Out-of-distribution detection in dermatology using input perturbation and subset scanning*, arXiv preprint arXiv:2105.11160 (2021).
-  JC Lester, JL Jia, L Zhang, GA Okoye, and E Linos, *Absence of skin of colour images in publications of covid-19 skin manifestations*, British Journal of Dermatology (2020).

# References IV

-  Michael A. Marchetti, Esther Chung, and Allan C. Halpern, *Screening for acral lentiginous melanoma in dark-skinned individuals*, JAMA Dermatol. 151 (2015), no. 10, 1055–1056.
-  Krishnaraj Mahendararaj, Komal Sidhu, Christine S. M. Lau, Georgia J. McRoy, Ronald S. Chamberlain, and Franz O. Smith, *Malignant melanoma in African–Americans: A population-based clinical outcomes study involving 1106 African–American patients from the surveillance, epidemiology, and end result (SEER) database (1988–2011)*, Medicine 96 (2017), no. 15, e6258.
-  Andre G. C. Pacheco, Abder-Rahman Ali, and Thomas Trappenberg, *Skin cancer detection based on deep learning and entropy to detect outlier samples*, 2019.

# References V

-  Andre G. C. Pacheco, Chandramouli S. Sastry, Thomas Trappenberg, Sageev Oore, and Renato A. Krohling, *On out-of-distribution detection algorithms with deep neural skin cancer classifiers*, CVPR Workshops, June 2020.
-  Roni Caryn Rabin, *Dermatology has a problem with skin color*, Aug 2020.
-  Xiao-Cheng Wu, Melody J. Eide, Jessica King, Mona Saraiya, Youjie Huang, Charles Wiggins, Jill S. Barnholtz-Sloan, Nicolle Martin, Vilma Cokkinides, Jacqueline Miller, Pragna Patel, Donatus U. Ekwueme, and Julian Kim, *Racial and ethnic variations in incidence and survival of cutaneous melanoma in the United States, 1999-2006*, J. Am. Acad. Dermatol. 65 (2011), no. 5, S26.e1–S26.e13.
-  Benjamin Wilson, Judy Hoffman, and Jamie Morgenstern, *Predictive inequity in object detection*, arXiv:1902.11097, February 2019.

# References VI

-  Marcus Wilkes, Caradee Y. Wright, Johan L. du Plessis, and Anthony Reeder, *Fitzpatrick skin type, individual typology angle, and melanin index in an African population*, JAMA Dermatol. 151 (2015), no. 8, 902–903.
-  Pengyi Zhang, Yunxin Zhong, and Xiaoqiong Li, *Melanet: A deep dense attention network for melanoma detection in dermoscopy images*.