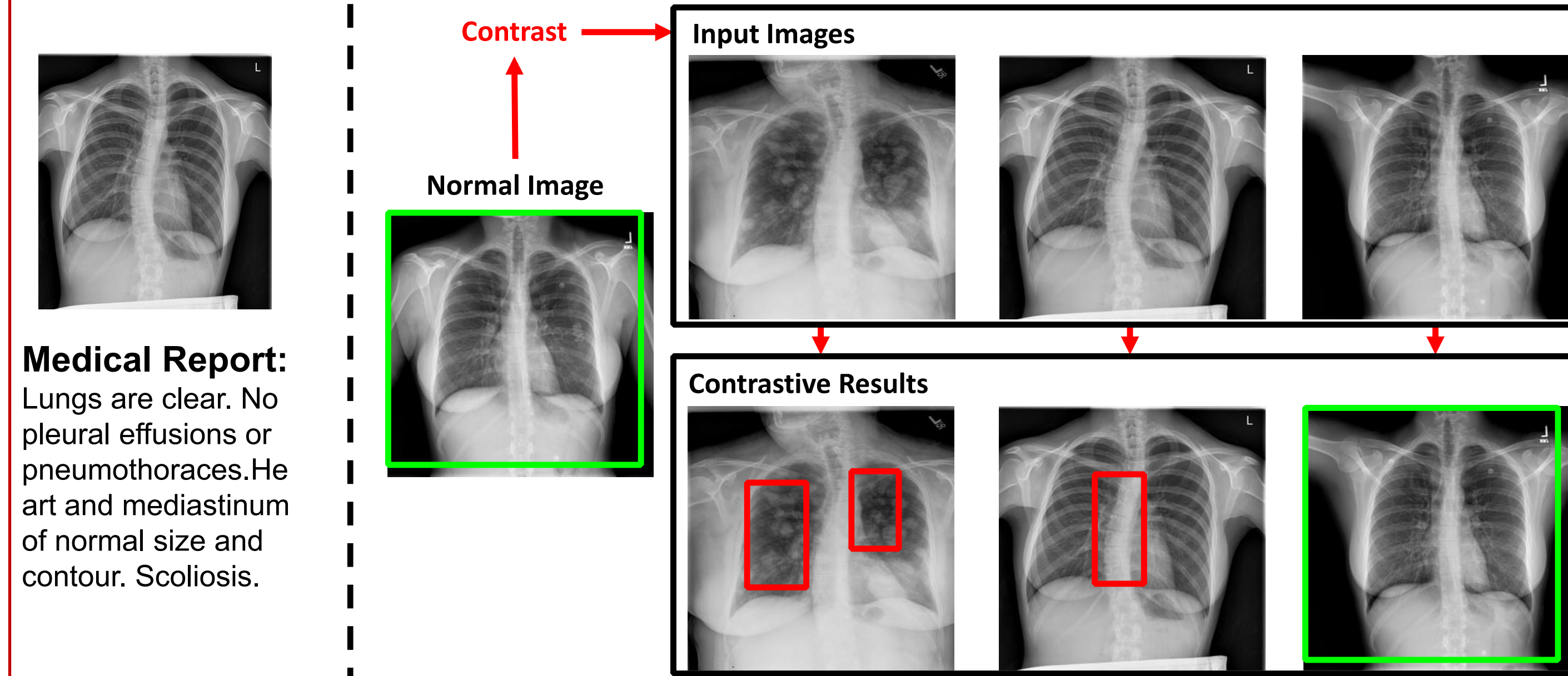


## Introduction



**Figure 1.** By contrasting current input images and known normal images, it could be easier to capture the suspicious abnormal regions (Red bounding boxes). The images with Green boxes are normal.

## Task Objectives:

It aims to generate a **long paragraph** describing both the **normal** and **abnormal** regions, which can assist radiologists in clinical decision-making.

- cover **key medical findings**: e.g., heart size and lung opacity.
- correctly describe **any abnormalities and its details**: e.g., the location and shape of the abnormality.
- correctly describe **potential diseases**: e.g., effusion and consolidation.

**Urgent goal/core value:** to correctly **capture** and **describe** abnormalities.

## Task Challenges:

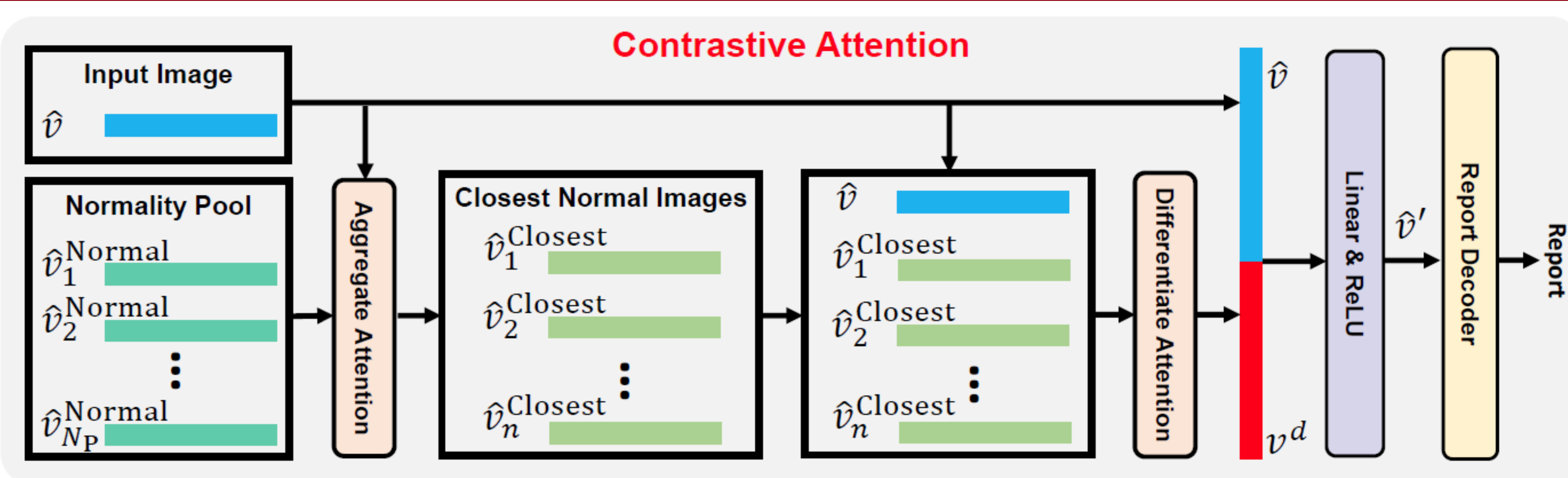
There are **serious data deviation problems** in the medical report corpus.

- the **normal** images **dominate** the dataset over the abnormal ones [1].
- given an input image, the **normal regions** usually **dominate** the image and their **descriptions dominate** the medical report [2,3].

## Solution:

- To capture the **abnormal regions** of given chest X-ray image, a natural intuition is to **compare** it with **normal images** and **identify the differences**. Therefore, we propose the Contrastive Attention to enable existing methods to **better capture** and **describe** the abnormalities.

## Approach



**Figure 2.** Illustration of our proposed **Contrastive Attention**, which consists of the **Aggregate Attention** and **Differentiate Attention**. In particular, the Aggregate Attention devotes to **finding the normal images that are closest to the current input image** in the normality pool. The Differentiate Attention devotes to **summarizing the common information** between the input image and the closest normal images and **subtract** it from the input image to capture the **differentiating properties** between the input image and the normal images.

Our approach includes of the **Aggregate Attention** and **Differentiate Attention**.

### Aggregate Attention

Given the input image  $\hat{v} \in \mathbb{R}^{1 \times d}$  and the normality pool  $P$ , the aggregate attention is defined as:

$$\hat{v}^{\text{Closest}} = \text{Att}(\hat{v}, P) \quad \text{Att}(x, y) = \text{softmax}(M)y \quad \text{where } M = \frac{xW^x(yW^y)^T}{\sqrt{d}}$$

$$P' = \text{Aggregate-Attention}(\hat{v}, P) = [\text{Att}_1(\hat{v}, P); \text{Att}_2(\hat{v}, P); \dots; \text{Att}_n(\hat{v}, P)] \\ = \{\hat{v}_1^{\text{Closest}}, \hat{v}_2^{\text{Closest}}, \dots, \hat{v}_n^{\text{Closest}}\} \in \mathbb{R}^{n \times d}$$

### Differentiate Attention

The first step is learning to summarize the common information  $v^c \in \mathbb{R}^{1 \times d}$  between the current input image  $\hat{v} \in \mathbb{R}^{1 \times d}$  and the closest normal images  $P' \in \mathbb{R}^{n \times d}$ :

$$v^c = \text{AveragePooling}(\text{Att}([\hat{v}; P'], [\hat{v}; P']))$$

Next, we remove (i.e., subtract) the common information  $v^c \in \mathbb{R}^{1 \times d}$  from the input image  $\hat{v} \in \mathbb{R}^{1 \times d}$  to obtain the contrastive information  $v^d \in \mathbb{R}^{1 \times d}$ :

$$v^d = \hat{v} - v^c$$

## Experiments

➤ We evaluate our contrastive attention on **ten** baselines.

Settings	Methods	Dataset: MIMIC-CXR (Johnson et al., 2019)					Dataset: IU-X-ray (Demner-Fushman et al., 2016)				
		B-1	B-2	B-3	B-4	M	B-1	B-2	B-3	B-4	R-L
(a)	NIC (Vinyals et al., 2015) <sup>†</sup>	0.290	0.182	0.119	0.081	0.112	0.249	0.352	0.227	0.154	0.109
	w/ Contrastive Attention	<b>0.317</b>	<b>0.200</b>	<b>0.127</b>	<b>0.089</b>	<b>0.120</b>	<b>0.262</b>	<b>0.368</b>	<b>0.232</b>	<b>0.166</b>	<b>0.118</b>
(b)	Visual-Attention (Xu et al., 2015) <sup>†</sup>	0.318	0.186	0.122	0.085	0.119	0.267	0.371	0.233	0.159	0.118
	w/ Contrastive Attention	0.309	<b>0.202</b>	<b>0.129</b>	<b>0.093</b>	<b>0.122</b>	0.265	<b>0.384</b>	<b>0.245</b>	<b>0.172</b>	<b>0.125</b>
(c)	Spatial-Attention (Lu et al., 2017) <sup>†</sup>	0.302	0.189	0.122	0.082	0.120	0.259	0.374	0.235	0.158	0.120
	w/ Contrastive Attention	<b>0.320</b>	<b>0.204</b>	<b>0.129</b>	<b>0.091</b>	<b>0.122</b>	<b>0.266</b>	<b>0.378</b>	<b>0.236</b>	<b>0.161</b>	<b>0.116</b>
(d)	Att2in (Rennie et al., 2017) <sup>†</sup>	0.314	0.199	0.126	0.087	<b>0.125</b>	0.265	0.410	0.257	0.173	0.131
	w/ Contrastive Attention	<b>0.327</b>	<b>0.205</b>	<b>0.132</b>	<b>0.095</b>	0.124	<b>0.271</b>	<b>0.442</b>	<b>0.281</b>	<b>0.200</b>	<b>0.150</b>
(e)	Adaptive-Attention (Lu et al., 2017) <sup>†</sup>	0.307	0.192	0.124	0.084	0.119	0.262	<b>0.433</b>	<b>0.285</b>	0.194	0.137
	w/ Contrastive Attention	<b>0.330</b>	<b>0.208</b>	<b>0.134</b>	<b>0.095</b>	<b>0.126</b>	<b>0.270</b>	<b>0.425</b>	<b>0.279</b>	<b>0.198</b>	<b>0.142</b>
(f)	Up-Down (Anderson et al., 2018) <sup>†</sup>	0.318	0.203	0.128	0.089	0.123	0.266	<b>0.389</b>	<b>0.251</b>	<b>0.170</b>	<b>0.126</b>
	w/ Contrastive Attention	<b>0.336</b>	<b>0.209</b>	<b>0.134</b>	<b>0.097</b>	<b>0.128</b>	<b>0.273</b>	<b>0.378</b>	<b>0.246</b>	<b>0.169</b>	<b>0.129</b>
(g)	HLSTM (Krause et al., 2017) <sup>†</sup>	0.321	0.203	0.129	0.092	0.125	0.270	0.435	0.280	0.187	0.131
	w/ Contrastive Attention	<b>0.352</b>	<b>0.216</b>	<b>0.145</b>	<b>0.105</b>	<b>0.139</b>	<b>0.276</b>	<b>0.453</b>	<b>0.290</b>	<b>0.203</b>	<b>0.153</b>
(h)	HLSTM+att+Dual (Harzig et al., 2019) <sup>†</sup>	<b>0.328</b>	<b>0.204</b>	0.127	0.090	0.122	0.267	0.447	0.292	0.192	0.144
	w/ Contrastive Attention	0.323	0.202	<b>0.130</b>	<b>0.102</b>	<b>0.138</b>	<b>0.277</b>	<b>0.464</b>	<b>0.289</b>	<b>0.205</b>	<b>0.149</b>
(i)	Co-Attention (Jing et al., 2018) <sup>†</sup>	0.329	0.206	0.133	0.095	0.129	0.273	0.463	0.293	0.207	0.155
	w/ Contrastive Attention	<b>0.351</b>	<b>0.213</b>	<b>0.148</b>	<b>0.106</b>	<b>0.147</b>	<b>0.270</b>	<b>0.486</b>	<b>0.311</b>	<b>0.223</b>	<b>0.178</b>
(j)	Multi-Attention (Huang et al., 2019) <sup>†</sup>	0.337	0.211	0.136	0.097	0.130	0.274	0.468	0.299	0.211	0.155
	w/ Contrastive Attention	<b>0.350</b>	<b>0.219</b>	<b>0.152</b>	<b>0.109</b>	<b>0.151</b>	<b>0.283</b>	<b>0.492</b>	<b>0.314</b>	<b>0.222</b>	<b>0.169</b>

**Table 1.** Results on the MIMIC-CXR [4] and IU-X-ray [5]. B-n, M and R-L are short for BLEU-n, METEOR and ROUGE-L, respectively. Higher is better in all columns. Existing methods equipped with our Contrastive Attention consistently **outperform** baselines.

➤ As we can see, these baseline models enjoy a comfortable improvement with our method on most metrics.

Methods	Dataset: MIMIC-CXR (Johnson et al., 2019)					Dataset: IU-X-ray (Demner-Fushman et al., 2016)				
	B-1	B-2	B-3	B-4	M	B-1	B-2	B-3	B-4	R-L
HRGR-Agent (Li et al., 2018)	-	-	-	-	-	0.438	0.298	0.208	0.151	-
CMAS-RL (Jing et al., 2019)	-	-	-	-	-	0.464	0.301	0.210	0.154	-
SentSAT + KG (Zhang et al., 2020a)	-	-	-	-	-	0.441	0.291	0.203	0.147	-
Transformer (Chen et al., 2020c)	0.314	0.192	0.127	0.090	0.125	0.265	0.396	0.254	0.179	0.135
R2Gen (Chen et al., 2020c)	<b>0.353</b>	0.218	0.145	0.103	0.142	0.277	0.470	0.304	0.219	0.165
Contrastive Attention (Ours)	<b>0.350</b>	<b>0.219</b>	<b>0.152</b>	<b>0.109</b>	<b>0.151</b>	<b>0.283</b>	<b>0.492</b>	<b>0.314</b>	<b>0.222</b>	<b>0.169</b>

**Table 2.** Comparison with existing state-of-the-art methods on the test set of the MIMIC-CXR dataset [4] and the IU-X-ray dataset [5].

➤ We achieve the state-of-the-art results on the two datasets.

## References

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- [5] Preparing a collection of radiology examinations for distribution and retrieval. *J. Am. Medical Informatics Assoc.*, 23(2):304–310.