

vertispine

<https://vertispine.vercel.app/>



British
Orthopaedic
Association

x

stryker

AI in Orthopaedics Hackathon 2024 submission

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overview

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3. Project structure
4. Environment setup
5. Two target classification
6. Three target classification
7. Implementation in orthopaedic outpatient clinical setting
8. Conclusions
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objectives



Using the Vertebral Column dataset:

1

Create a machine learning algorithm using 6 features to classify patients into 2 targets (normal or abnormal).

2

Create a machine learning algorithm using 6 features to classify patients into 3 targets (normal, hernia or spondilolysthesis).

code availability



GitHub repository available at:

<https://github.com/jdrmota/vertispine-jupyter>

Clone with URL in command line:

```
git clone https://github.com/jdrmota/vertispine-jupyter.git
```

Or clone with password-protected SSH key from command line:

```
git clone git@github.com:jdrmota/vertispine-jupyter.git
```

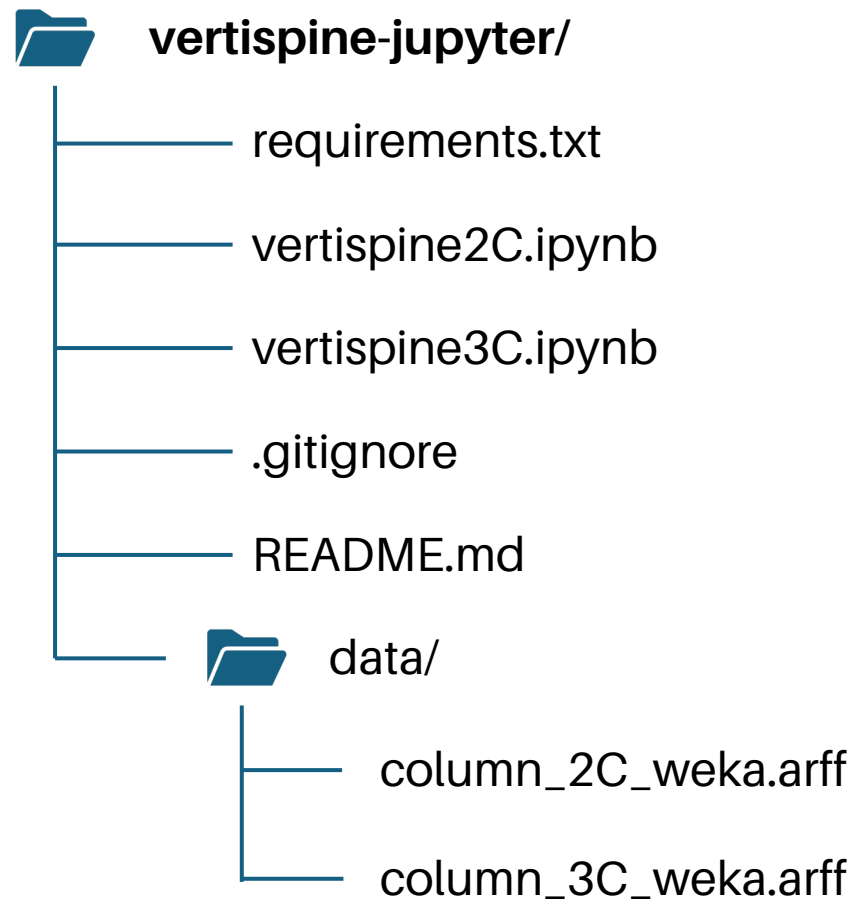
If you don't have
git or a GitHub
account



Alternatively download .zip and unzip from: <https://github.com/jdrmota/vertispine-jupyter/archive/refs/heads/main.zip>

Attached .zip file to submission email as well!

project structure



root directory

list of required libraries

Jupyter library for 2 target classification

Jupyter library for 3 target classification

file ignores for git

instructions

data folder

data file for 2 target classification

data file for 3 target classification

environment setup: libraries

The list of necessary libraries are in the file `requirements.txt`

```
scikit-learn==1.5.1
```

```
matplotlib
```

```
numpy
```

```
pandas
```

```
scipy
```

```
joblib
```

Next slide explains installation process.

If those fail, manually install them with: `pip install scikit-learn==1.5.1 matplotlib numpy pandas scipy joblib`

environment setup: prerequisites



Python must be installed, I used Python3.

Jupyter notebooks are easiest to view using Anaconda Navigator, can be found at:
<https://www.anaconda.com/download>



environment setup: running code

1. Jupyter via Anaconda navigator (recommended)



The necessary libraries will be installed with the code in the Jupyter notebook.
Select Run > Run All Cells. You may need to restart the kernel and re-run all cells after installation.
No further manual installation is required.

2. Command line with: `jupyter nbconvert --to script --execute --stdout vertispine2C.ipynb | python`

If you are running the code from the command line, you will need to install the required libraries with the following command (in the root directory), ensure pip is installed (comes with Python 3.4 or later), else install from: <https://pip.pypa.io/en/stable/installation/>

pip: `pip install -r requirements.txt`

pip3: `pip3 install -r requirements.txt`

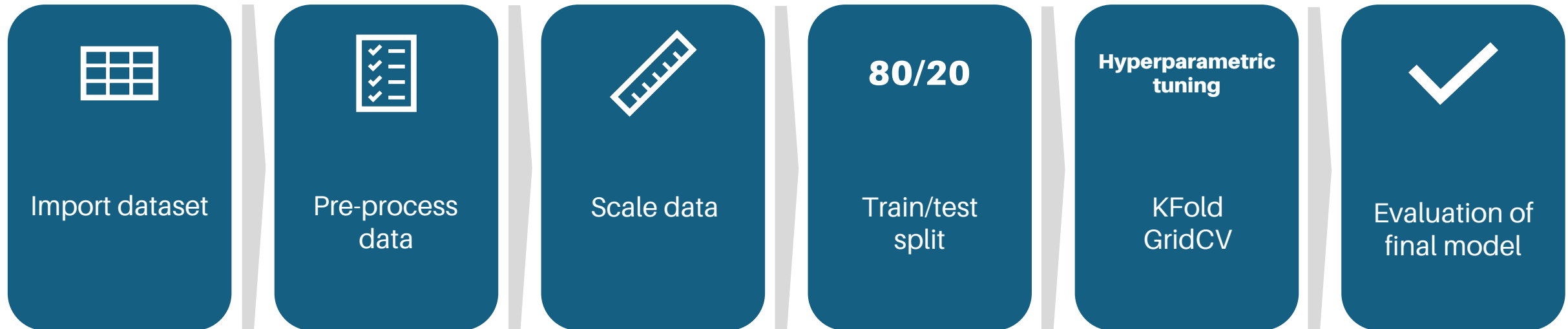
This only gives outputs and the markdown analysis will be missed.

two target classification

vertispine2C.ipynb

Extensive analysis is done in Jupyter notebook. Please see Markdown provided.

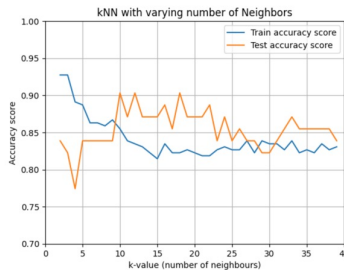
Code flow:



two target: analysis

vertispine2C.ipynb

test/train split



Please see
Jupyter
notebook

Iterations of the kNN with different number of neighbours was tested for the best performing option. This gave the following three best options:

90% test accuracy with number of neighbours =
= 10
= 12
= 18

Hyperparametric tuning

Best Parameters: {'algorithm': 'auto', 'metric': 'euclidean', 'n_neighbors': 2, 'weights': 'distance'}

Hyperparametric tuning with k-fold split and cross-validation scoring both accuracy and f1-score gave us the above best parameters with a final accuracy of 82.26%.

two target: evaluation

vertispine2C.ipynb

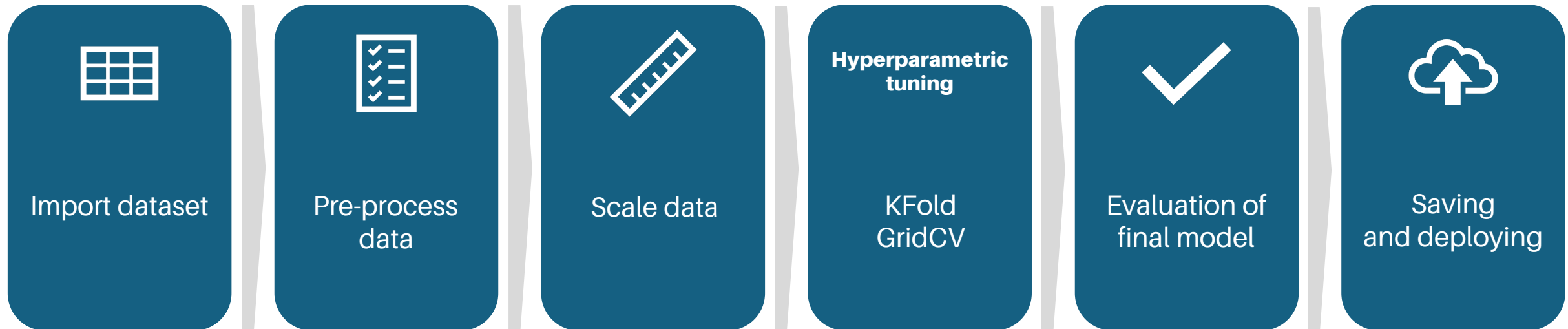
- Simple train/test split had an accuracy of ~90%
 - However, this is only from one run that may cause overfitting/underfitting
- Hyperparametric tuning with cross-validation (scoring both accuracy and f1-scores) was therefore done to ensure the algorithm performs the best, free from dataset biases. This achieved an 82.26% accuracy which is still considered good.
- Further improvements could include:
 - Trialing different machine learning algorithm (e.g. Random Forest Classifier, Support Vector Machine, etc.)
 - Increasing dataset size
 - Further parameter tuning and testing

three target classification

vertispine3C.ipynb

Extensive analysis is done in Jupyter notebook. Please see Markdown provided.

Code flow:



three target: analysis

vertispine3C.ipynb

Hyperparametric tuning

```
Best Parameters: {'algorithm': 'auto', 'metric': 'euclidean', 'n_neighbors': 13, 'weights': 'distance'}
```

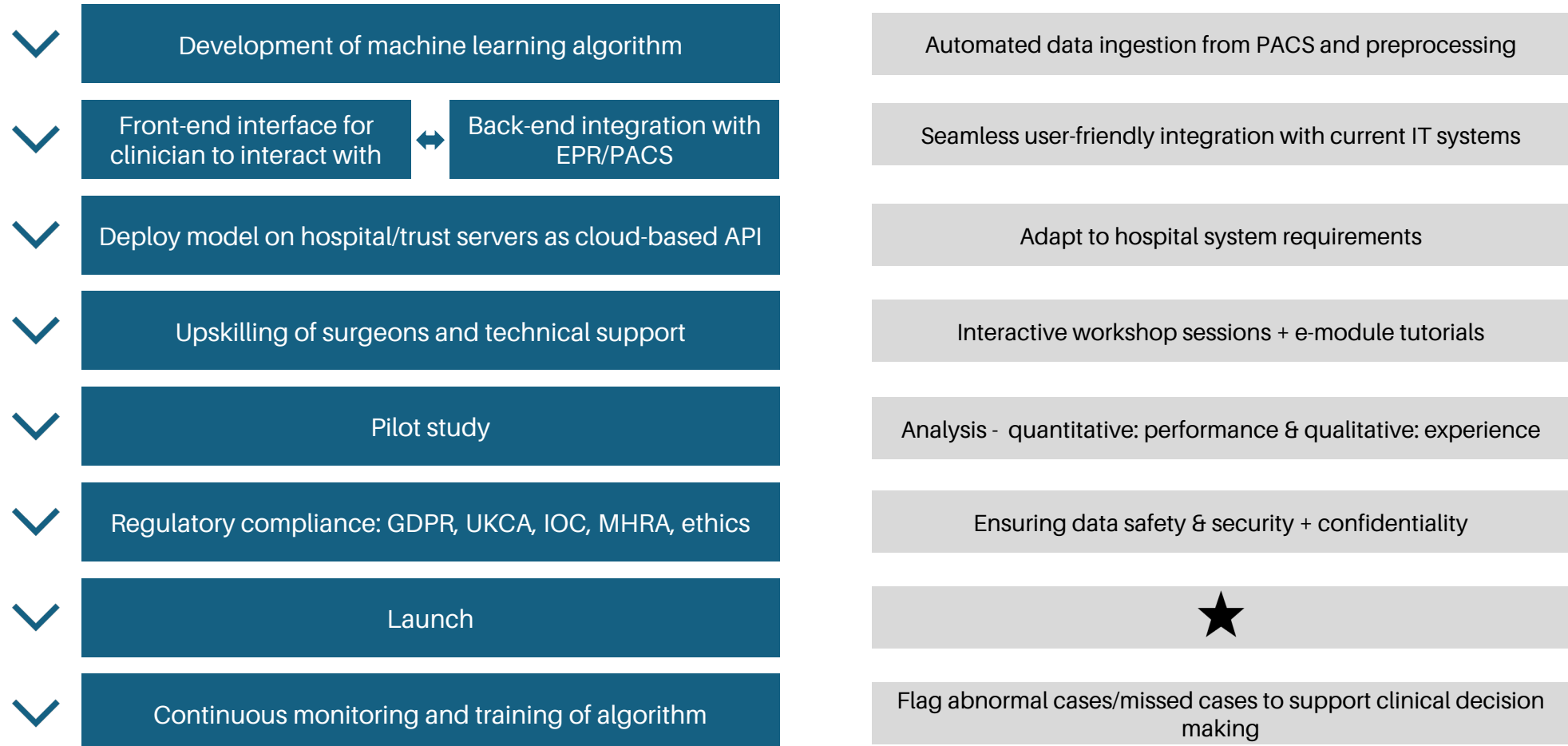
Hyperparametric tuning with k-fold split and cross-validation scoring both accuracy gave us the above best parameters with a final accuracy of 79.03%.

three target: evaluation

vertispine3C.ipynb

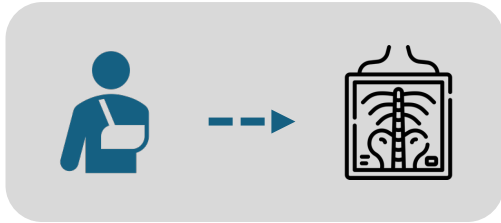
- Hyperparametric tuning with cross-validation (scoring accuracy) achieved an 79.03% accuracy which is considered good.
- Further improvements could include:
 - Trialing different machine learning algorithm (e.g. Random Forest Classifier, Support Vector Machine, etc.)
 - Increasing dataset size
 - Further parameter tuning and testing
 - Using further scoring parameters for evaluation (e.g. f1-score, etc.)

implementation: steps to implement



implementation: outpatient setting

1. Patient has X-ray images taken



2. Images uploaded to EPR/PACS



3. Web-app interacts with images, collecting parameters

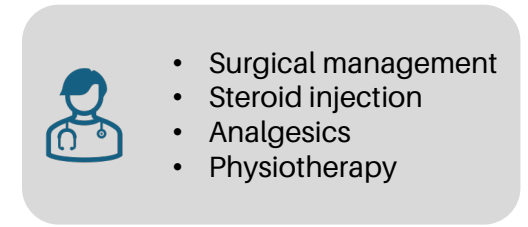


Machine learning model
classifying patients based on
radiological findings

- Reducing clinic time
- Ensuring diagnosis verification
- Guiding clinical decision making

4. Clinical decision making

Initially acting as a support tool flagging missed abnormalities/confirming clinician's diagnosis. Once algorithm accuracy exceed surgeon accuracy can be considered as first-line diagnostic tool.



implementation: simulation

<https://vertispine.vercel.app/>

The screenshot shows the 'vertispine' web application interface. It features a header with the logo and 'by: Jan Ormota'. A disclaimer states: 'This is a simulated application illustrating the use of a 3 class machine learning classification algorithm in the orthopaedics outpatient clinical setting, submitted to the BOA x Stryker AI in Orthopaedics Hackathon 2024.' Below this is a 'Download full detail PDF' button. The main content area is divided into three steps: 1. 'Selecting patient' with input fields for 'Patient name' (John Doe ✓) and 'Patient ID' (1234567 ✓), and a note 'This would be connected to EPR system.' 2. 'Retrieving data from images' with two image thumbnails and a 'Select images' button, and a note 'This would allow selection of images from PACS and an image processing algorithm would retrieve the data with clinician correction if necessary.' 3. 'Analysing data' with a note 'For the simulation, please input data you want the machine learning algorithm to predict. This would be auto-populated from the above.' Below this are input fields for 'Pelvic incidence', 'Pelvic tilt', 'Lumbar lordosis angle', 'Sacral slope', 'Pelvic radius', and 'Degree spondylolisthesis', each with a 'Predict' button at the bottom.

Web application available at: <https://vertispine.vercel.app/>

Patient selected from
connected EPR (simulated)

Patient images retrieved and
data collected (simulated)

Input real-world patient
parameters (currently
manual)

Predict with 3 target machine
learning algorithm

To be automated in the future from
measurements made on PACS or from machine
learning algorithm that can calculate from images.

Expected output from back-end API:

Spondylolisthesis

For input values:
Pelvic incidence: 84.585607
Pelvic tilt: 30.361685
Lumbar lordosis: 65.479486
Sacral slope: 54.223922
Pelvic radius: 108.010218
Degree spondylolisthesis: 25.118478

implementation: web-based app

<https://vertispine.vercel.app/>

Check it out!

<https://vertispine.vercel.app/>

Front-end

NEXT.js

Tailwind CSS

React-based web application with Tailwind styling that would be connected to EPR and PACS to collect data from radiological images. Currently data has to be inputted manually.

Hosted with:

Vercel

GitHub

Next.js web application served with Vercel with automatic builds from GitHub branch pushes.

REST API: HTTP GET request

https://vertispine.me/?pelvic_incidence=63.027817&pelvic_tilt=22.552586&lumbar_lor_dosis_angle=39.609117&sacral_slope=40.475232&pelvic_radius=98.672917°ree_spondylolisthesis=-0.254400

JSON return

{"prediction":["Hernia"]}

Back-end

Flask

NGINX

Python Flask micro web framework predicting target with the trained kNN machine learning algorithm loaded from sklearn.pipeline file from Jupyter output served with Nginx web server returning JSON prediction.

ubuntu

DigitalOcean

Ubuntu droplet on DigitalOcean via domain <https://vertispine.me> hosting server.

conclusions

Drawn from analysis done in Jupyter notebooks

- kNN is a feasible algorithm choice for this task with high accuracy results
- The main limitation currently is relatively small dataset size
- The computational speed with a larger dataset may require an alternative to kNN
- Implementation in orthopaedic outpatient setting is realistically possible
 - Further evaluation studies of algorithm performance vs. clinician performance are necessary to establish clinical relevance
- Currently, algorithm can assist clinical decision making by flagging missed abnormalities

team

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