Medical Vision Seminar

Jinyue Cai 2021.7.7

Outline:

 DARCNN: Domain Adaptive Region-based Convolutional Neural Network for Unsupervised Instance Segmentation in Biomedical Images (CVPR2021)

 Towards Unbiased COVID-19 Lesion Localisation and Segmentation via Weakly Supervised Learning (ISBI2021)

(CVPR2021)

DARCNN: Domain Adaptive Region-based Convolutional Neural Network for Unsupervised Instance Segmentation in Biomedical Images

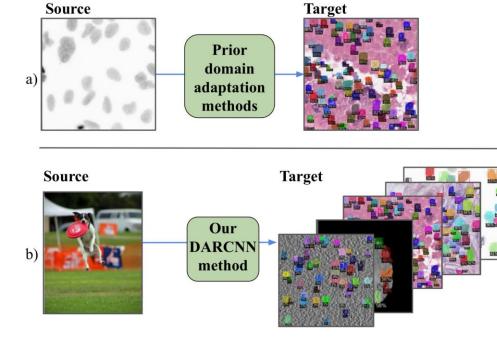
Joy Hsu, Wah Chiu, Serena Yeung

Stanford University

Introduction

Problem:

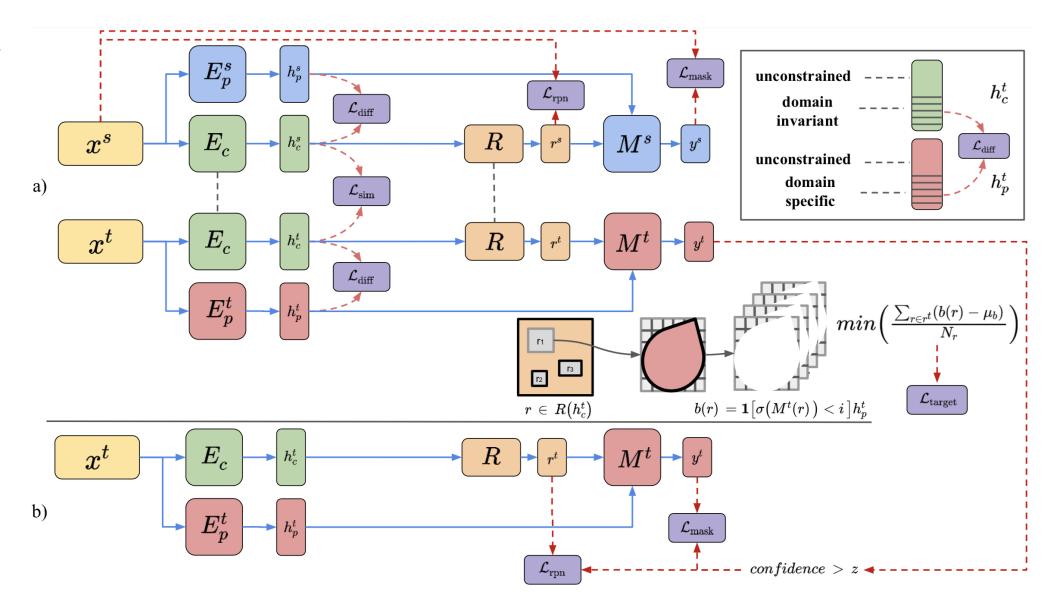
- 1. Labelled domain specific datasets are often expensive to obtain
- 2. It is not always feasible to find similar labelled biomedical datasets



Contribution

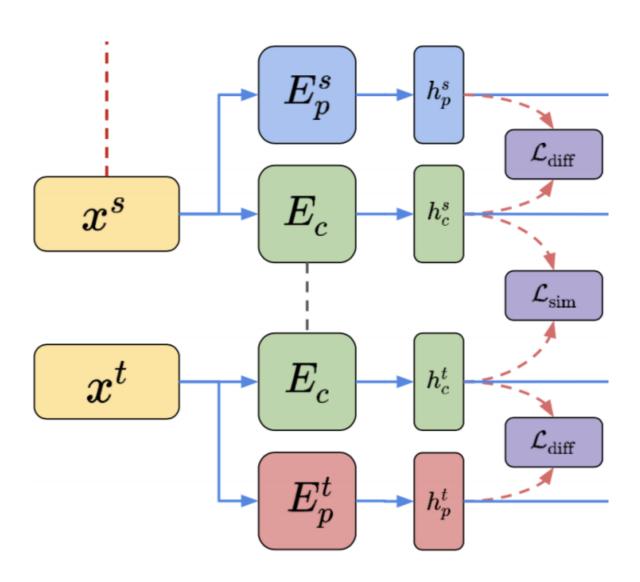
- 1. Unsupervised instance segmentation adapting from COCO to biomedical images
- 2. Introduce a domain separation module to learn domain invariant and domain specific features
- 3. Propose a self-supervised background consistency loss
- 4. Utilize pseudo-labelling with data augmentation

Overview



$$L_{\text{DARCNN}} = \alpha L_{\text{sim}} + \beta L_{\text{diff}} + \gamma L_{\text{target}} + L_{\text{source}}$$

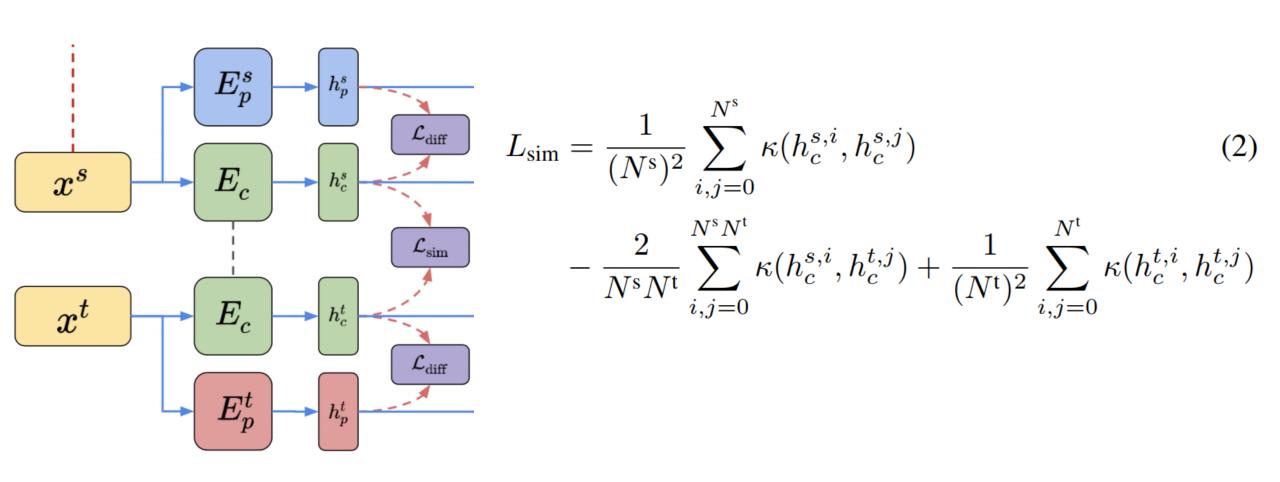
Domain Separation Module



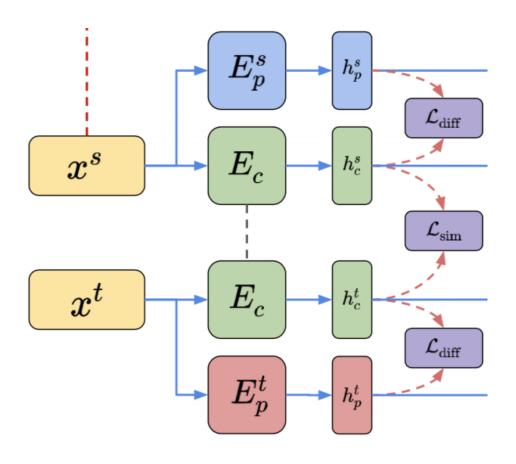
domain invariant features encode objectness of the source and target domain in a joint representational subspace

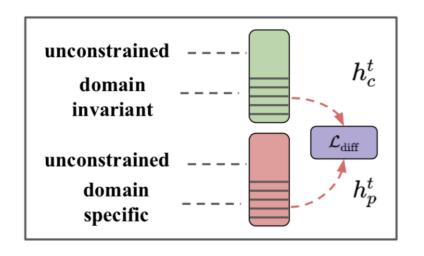
domain specific features capture discriminability of each domain as well as contain additional unconstrained embedding space

Domain Invariant Features



Domain Specific Features



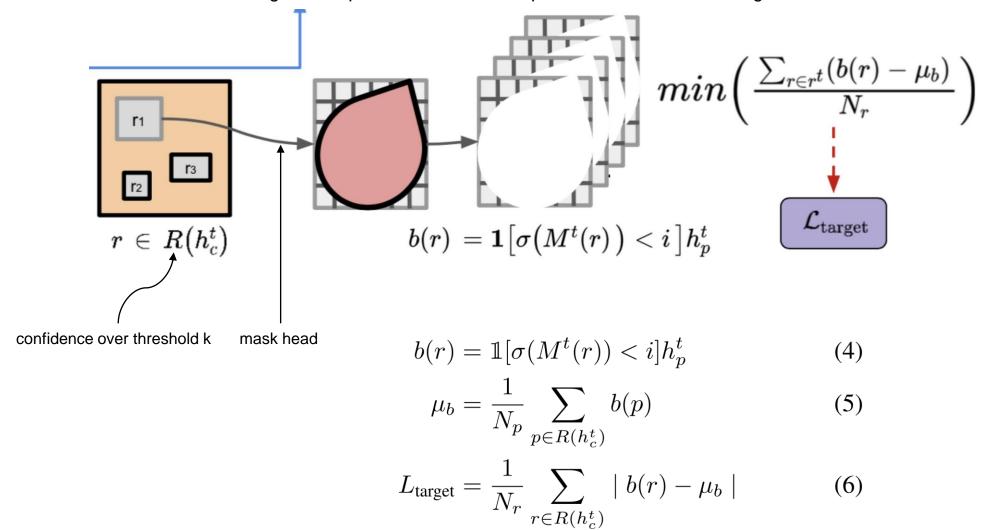


$$L_{\text{diff}} = ||H_c^{s\top} H_p^s||_F^2 + ||H_c^{t\top} H_p^t||_F^2$$

Self-supervised Background Consistency Loss

Assumption: the target images contain homogeneous backgrounds

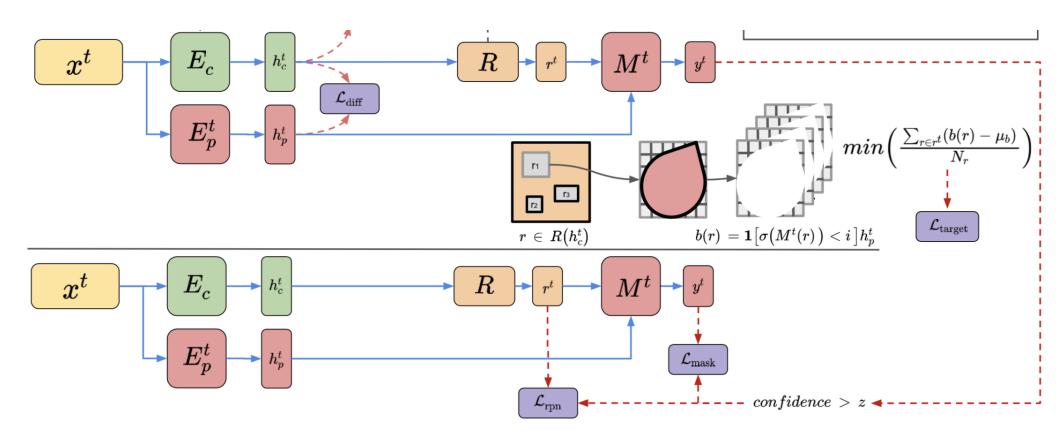
To minimize the differences between background representations of each predicted instance in a image



Augmented Pseudo-Labelling

Pseudo-labels: retrieve high confidence (threshold z) predictions from our first stage DARCNN

Data augmentations: lighting, contrast, and blur



Experiments

Adaptation from Microscopy or COCO to Histopathology

Source Dataset: BBBC (a fluorescence microscopy dataset) or COCO

Target Dataset: Kumar or TNCB (histopathology datasets)

Method	AJI	Pixel-F1	Object-F1
Chen et al. [7]	0.4407	0.6405	0.6289
DDMRL [17]	0.4642	0.7000	0.6872
SIFA [6]	0.4662	0.6994	0.6698
CyCADA [13]	0.4721	0.7048	0.6866
Hou et al. [14]	0.4775	0.7029	0.6779
Liu et al. [21]	0.5672	0.7593	0.7478
Ours from BBBC	0.5120	0.7175	0.6436
Ours from COCO	0.4906	0.6998	0.6396

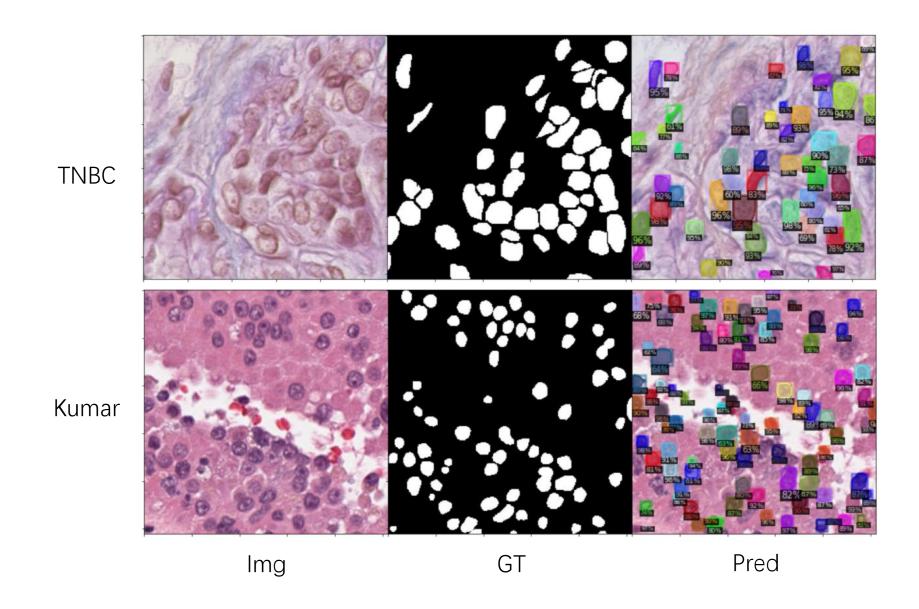
From BBBC or COCO to TNBC

Method	AJI	Pixel-F1	Object-F1
Chen et al. [7]	0.3756	0.6337	0.5737
SIFA [6]	0.3924	0.6880	0.6008
CyCADA [13]	0.4447	0.7220	0.6567
DDMRL [17]	0.4860	0.7109	0.6833
Hou et al. [14]	0.4980	0.7500	0.6890
Liu et al. [21]	0.5610	0.7882	0.7483
Ours from BBBC	0.4461	0.6619	0.5410
Ours from COCO	0.4421	0.6549	0.5104

From BBBC or COCO to Kumar

Experiments

Qualitative Results (from COCO to TNBC and Kumar)



Ablation Studies

Qualitative Results (from COCO to TNBC and Kumar)

Method	AJI	Pixel-F1	Object-F1		
Mask R-CNN					
w/ COCO pre-trained	0.0060	0.2769	0.0181		
w/ synthesized images	0.3332	0.5782	0.6061		
First stage DARCNN					
Domain sim. only	0.3687	0.6023	0.6099		
Bg. consistency only	0.3808	0.6120	0.5470		
Full 1st stage DARCNN	0.4071	0.6353	0.5986		
Second stage DARCNN					
Pseudo-label w/o aug	0.4463	0.6781	0.6339		
Full 2nd stage DARCNN	0.4906	0.6998	0.6396		

Table 3. Ablation study adapting from COCO as source to TNBC.

Method	AJI	Pixel-F1	Object-F1		
Mask R-CNN					
w/ COCO pre-trained	0.0315	0.3144	0.0818		
First stage DARCNN					
Domain sim. only	0.1414	0.4905	0.4295		
Bg. consistency only	0.3250	0.7128	0.5720		
Full 1st stage DARCNN	0.3371	0.6409	0.5904		
Second stage DARCNN					
Pseudo-label w/o aug	0.4349	0.6914	0.7151		
Full 2nd stage DARCNN	0.4725	0.6586	0.6733		

Table 4. Ablation study adapting from COCO as source to BBBC.

(ISBI2021)

Towards Unbiased COVID-19 Lesion Localisation and Segmentation via Weakly Supervised Learning

Yang Yang, Jiancong Chen, Ruixuan Wang, Ting Ma, Lingwei Wang, Jie Chen, Wei-Shi Zheng, Tong Zhang

Artificial Intelligence Research Center, Peng Cheng Laboratory, Shenzhen, China School of Computer Science and Engineering, Sun Yat-sen University, China School of Electronic and Information Engineering, Harbin Institute of Technology, Shenzhen, China Shenzhen People's Hospital, Shenzhen Institute of Respiratory Diseases, Shenzhen, China School of Electronic and Computer Engineering, Peking University Shenzhen Graduate School, China

Introduction

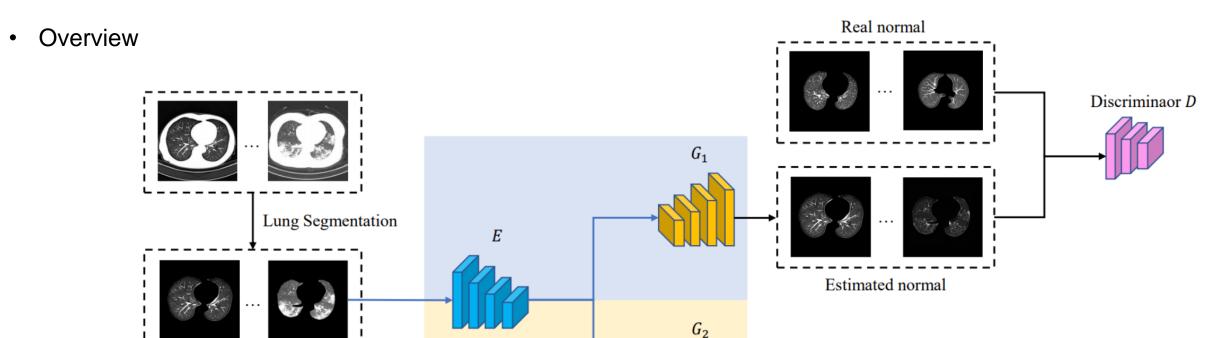
Problem:

1. Pixel-wise annotation of image dataset is expensive and time-consuming

Contribution

- 1. Propose a framework for localization and segmentation of COVID-19 pneumonia lesions only with imagelevel label supervision
- 2. Decompose biomedical image to normal version and lesion version

Input

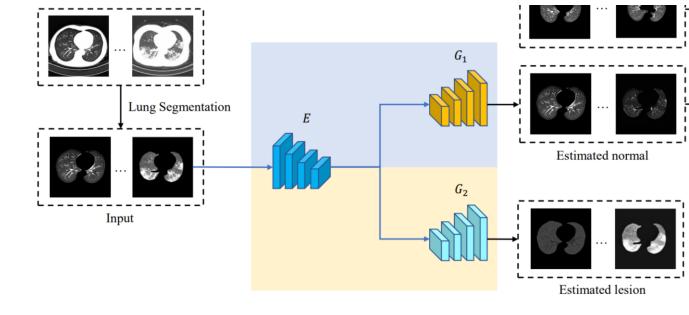


$$L_{g} = \alpha_{1}L_{a} + \alpha_{2}L_{r} + \alpha_{3}L_{n}$$

$$L_{c} = \frac{1}{N} \sum_{i=1}^{N} D(G_{1}(E(\mathbf{x}_{i}))) - \frac{1}{N_{1}} \sum_{j=1}^{N_{1}} D(\mathbf{x}_{j}) + \lambda \cdot GP$$
 (3)

Estimated lesion

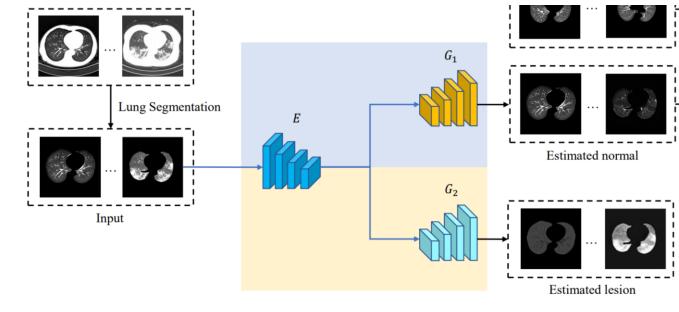
Reconstruction Loss



If the decomposition process works well, the recombination of the two decomposed components should be close to the original input

$$L_r = \frac{1}{N} \sum_{i=1}^{N} \|\mathbf{x}_i - G_1(E(\mathbf{x}_i)) - G_2(E(\mathbf{x}_i))\|$$
 (1)

Normal Fidelity Loss



Since normal images contain no lesion, if the decomposition works well, the normal version $G_1(E(xj))$ itself should be close to the original input for any normal input x_j

$$L_n = \frac{1}{N_1} \sum_{j=1}^{N_1} \|\mathbf{x}_j - G_1(E(\mathbf{x}_j))\|$$
 (2)

Critic Loss

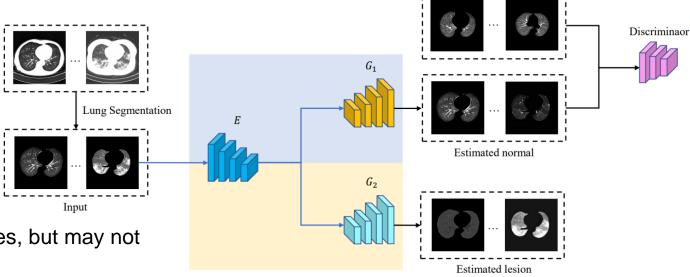
 ${\cal L}_r$ and ${\cal L}_n$ may help the model well reconstruct normal images, but may not enough to correctly estimate the lesion information.

An extreme case is that to minimize L_r , G_1 would always output the original input, no matter whether the input contains lesion or not.

To well separate lesion in lesioned images, the framework uses a discriminator to judge whether the decomposed normal versions are real normal images or not.

$$L_c = \frac{1}{N} \sum_{i=1}^{N} D(G_1(E(\mathbf{x}_i))) - \frac{1}{N_1} \sum_{j=1}^{N_1} D(\mathbf{x}_j) + \lambda \cdot GP \quad (3)$$

$$L_a = -\frac{1}{N} \sum_{i=1}^{N} D(G_1(E(\mathbf{x}_i)))$$
 (4)



$$L_r = \frac{1}{N} \sum_{i=1}^{N} \|\mathbf{x}_i - G_1(E(\mathbf{x}_i)) - G_2(E(\mathbf{x}_i))\|$$
 (1)

Real normal

Experiments

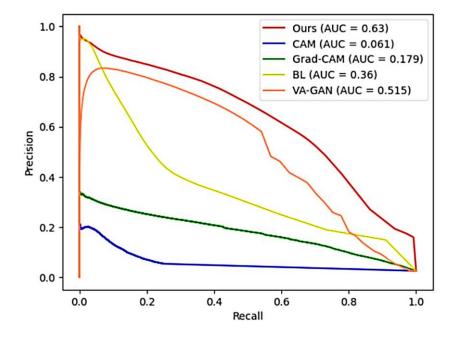
Dataset

Training set: 2007 normal lung CT slices and 870 lesioned slices randomly sampled from COVID-cell

Test set 1: 128 lesioned slices randomly sampled from COVID-cell

Test set 2: 493 lesioned slices from COVID-19 Image Data Collection

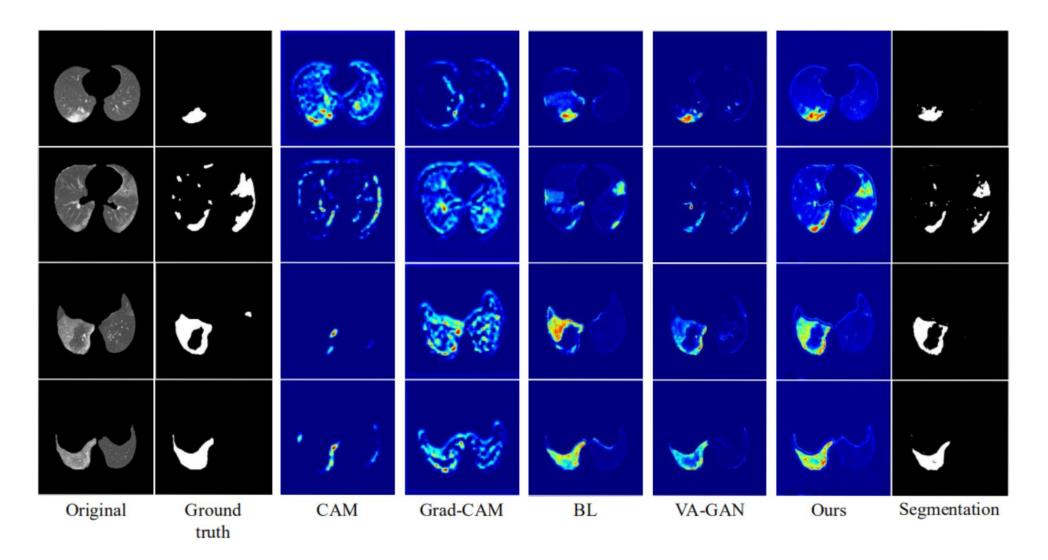
Quantitative Evaluation



PR curve for each method

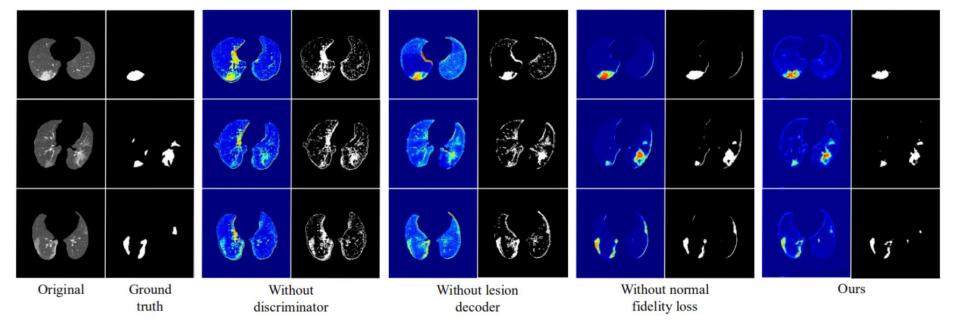
Experiments

Qualitative Evaluation



Ablation Study

Qualitative Evaluation



Quantitative Evaluation

