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# **XRAI PIPELINE – THE CREATION OF A CONDITIONALLY ADAPTIVE LOSS FUNCTION FOR MEDICAL SEGMENTATION TASKS**

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## **GROUP-1**



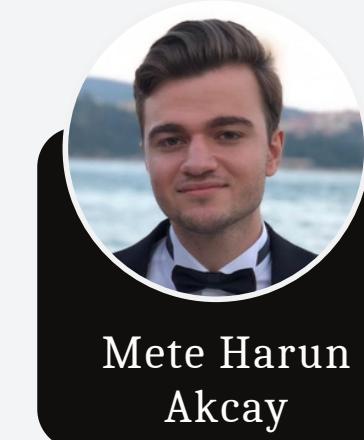
Masa  
Cirkovic



Bashir  
Alam



Md Kaf  
Shahrier



Mete Harun  
Akcay

# AGENDA

01

Introduction

02

Loss Functions Overview

03

Our approach

04

Datasets

05

Future Work

06

Limitations

07

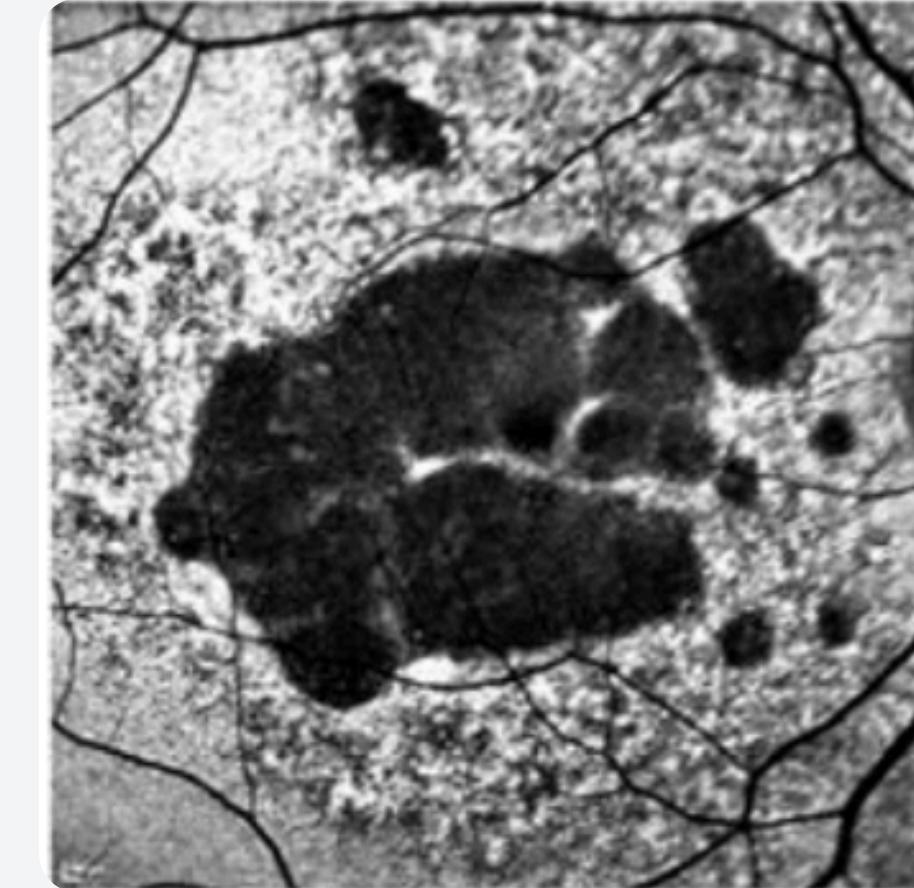
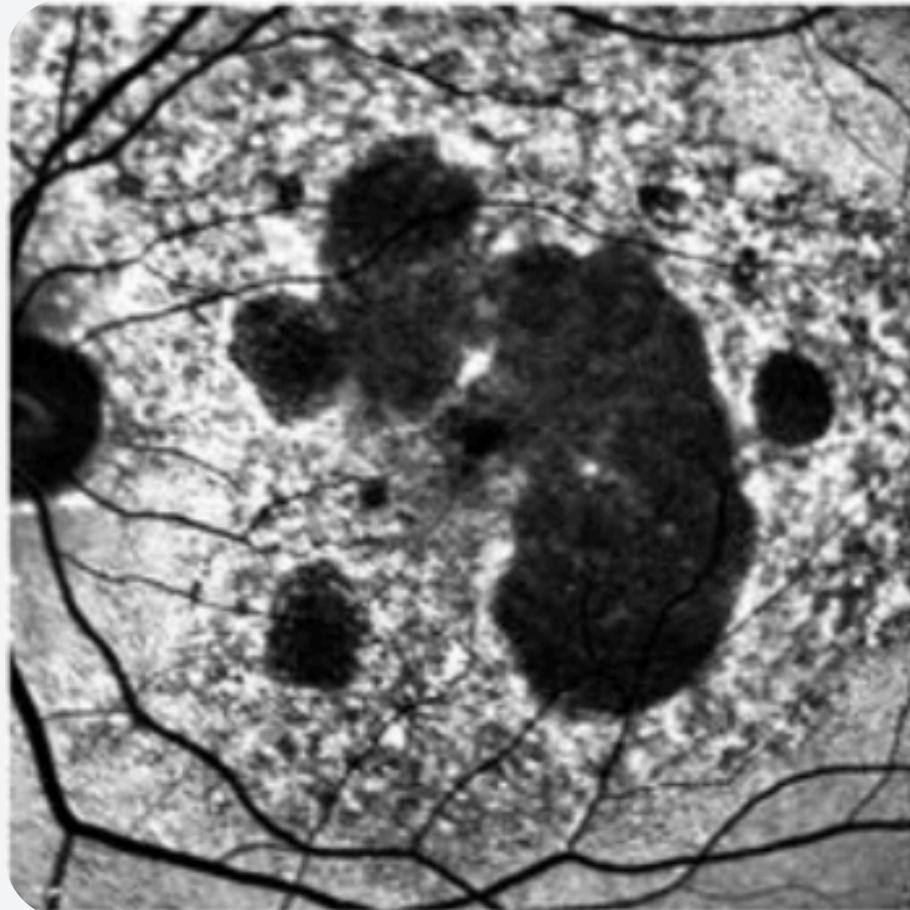
Roadmap



# INTRODUCTION

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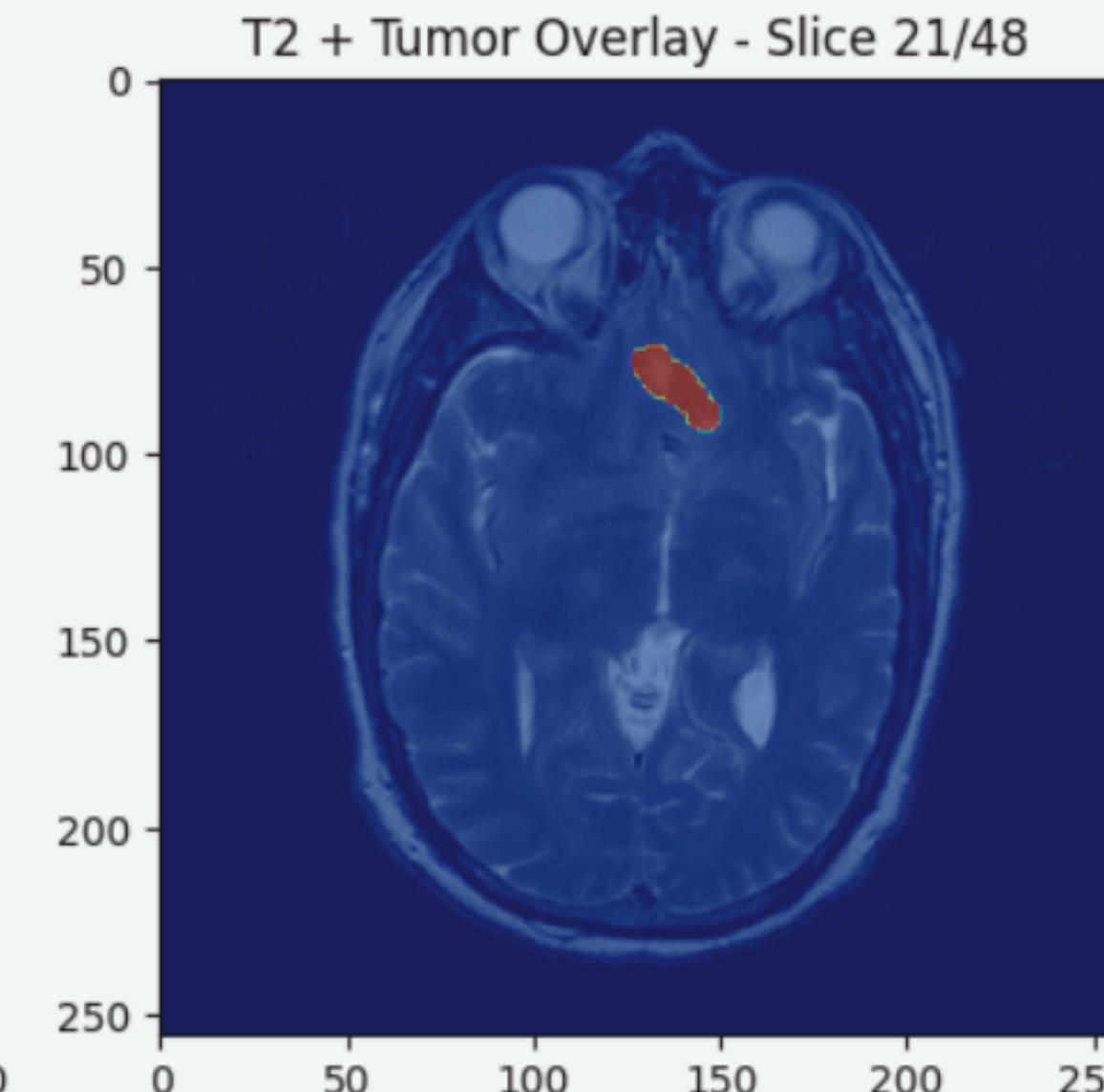
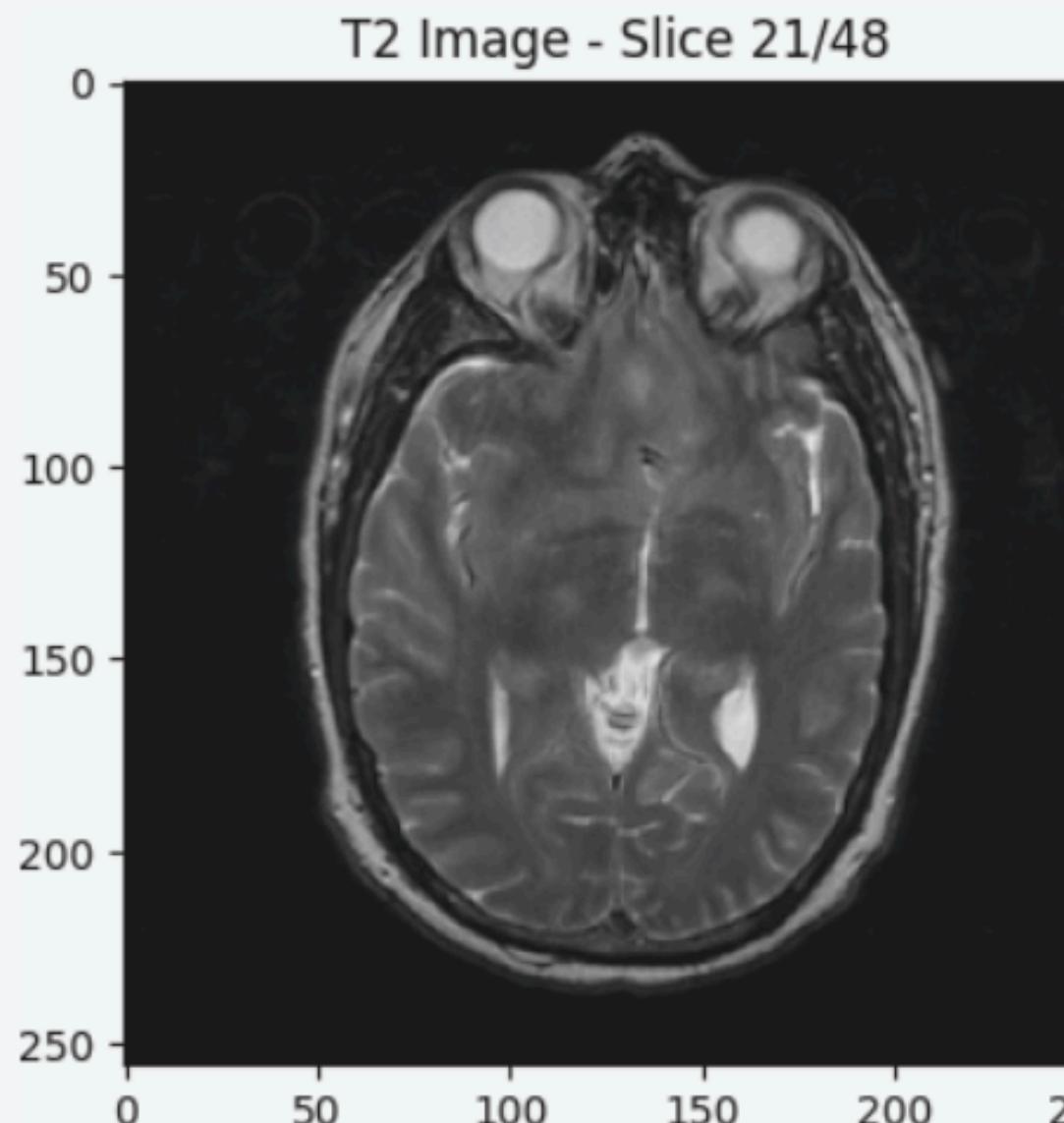
- ARTIFICIAL INTELLIGENCE (AI) AND DEEP LEARNING (DL) METHODS - TRANSFORMING THE HIGH-RISK AND HIGH-STAKE WORLD OF MEDICAL APPLICATIONS
- INCREASING INTEREST IN THE EXPLORATION OF MEDICAL IMAGES
- IDENTIFYING DISEASE-RELEVANT BIOMARKERS FOR INFORMATION DISCOVERY AND PREDICTIVE ANALYTICS



# INTRODUCTION

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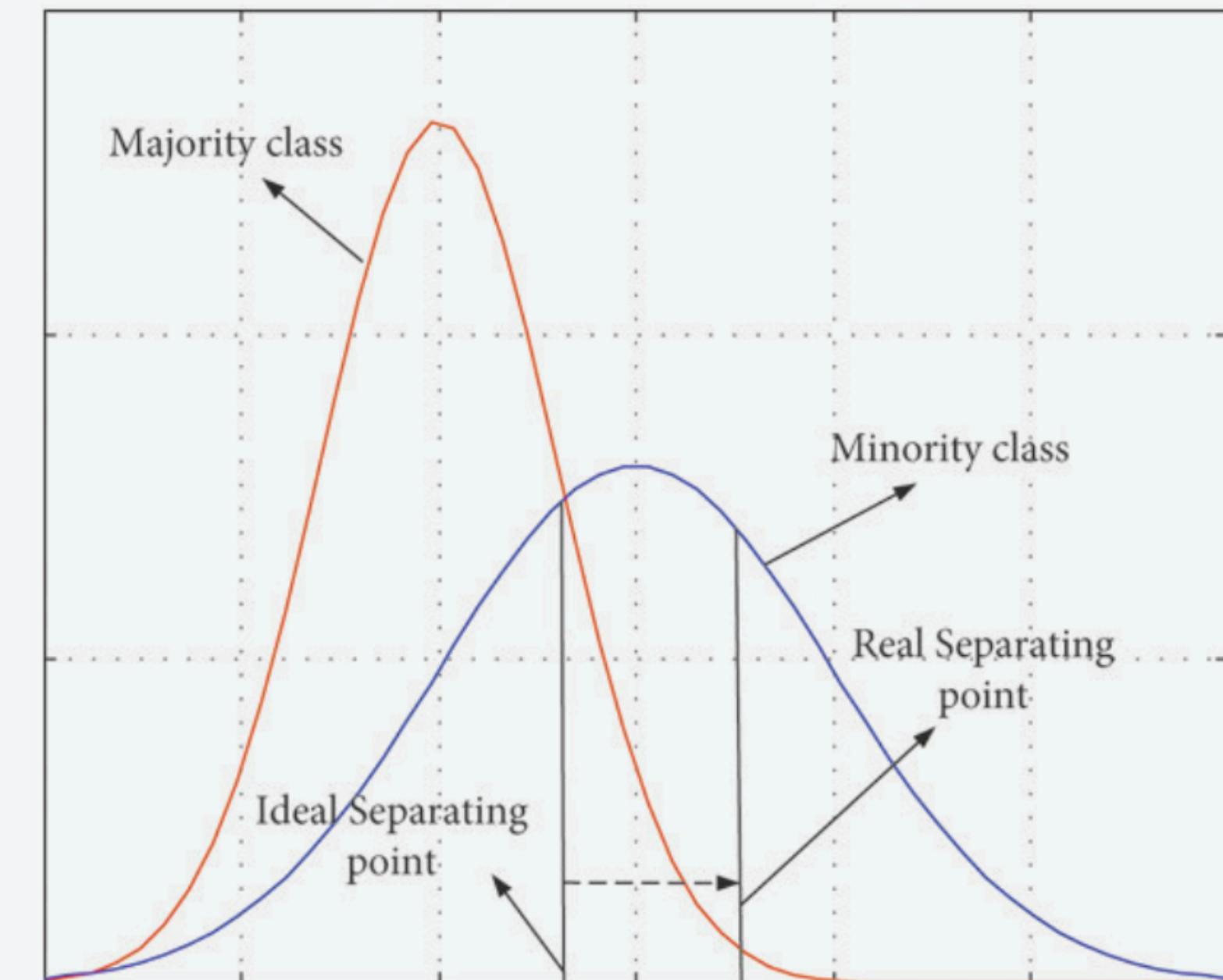
- **MANUAL SEGMENTATION FOR MEDICAL IMAGES IS TIME-CONSUMING**
- **AUTOMATED TOOLS RELY ON TRAINING DATA IN ORDER TO GENERATE CORRECT ANNOTATIONS**
- **TRAINING DATA IS OFTEN IMBALANCED, WITH ANNOTATIONS NOT BEING VERY PRECISE**
- **DIFFERENT WAYS EXIST TO TRY AND ACCOUNT FOR THESE IMBALANCES**



# INTRODUCTION

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- USE OF LOSS FUNCTIONS TO BETTER IMPROVE DL PARAMETER ESTIMATION
- DIFFERENT LOSS FUNCTIONS DO DIFFERENT THINGS TO OVERCOME IMBALANCED DATASETS:
  - ASSIGN HIGHER WEIGHTS TO MINORITY CLASSES (*WBCE*)
  - FOCUS ON HARD-TO-CLASSIFY EXAMPLES, REDUCE THE WEIGHT FOR WELL-CLASSIFIED EXAMPLES (*FOCAL LOSS*)
  - USE OVERLAPPING METRICS SUCH AS DICE SIMILARITY COEFFICIENT (*DICE LOSS*)
  - USE ADJUSTABLE PARAMETERS TO CONTROL THE BALANCE BETWEEN FALSE POSITIVES VS FALSE NEGATIVES (*TVERSKY LOSS*)



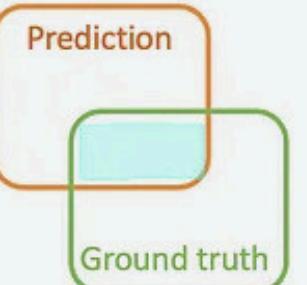
# STATE-OF-THE-ART ~ LOSS FUNCTIONS

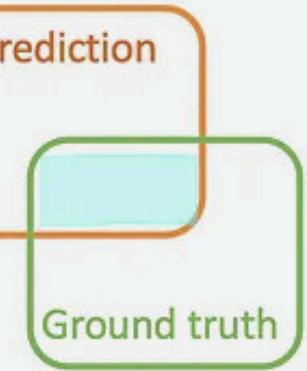
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**DEFINITION:** A MATHEMATICAL MEASURE THAT EVALUATES THE DIFFERENCE BETWEEN A MODEL'S PREDICTED SEGMENTATION AND THE TRUE SEGMENTATION LABELS IN AN IMAGE

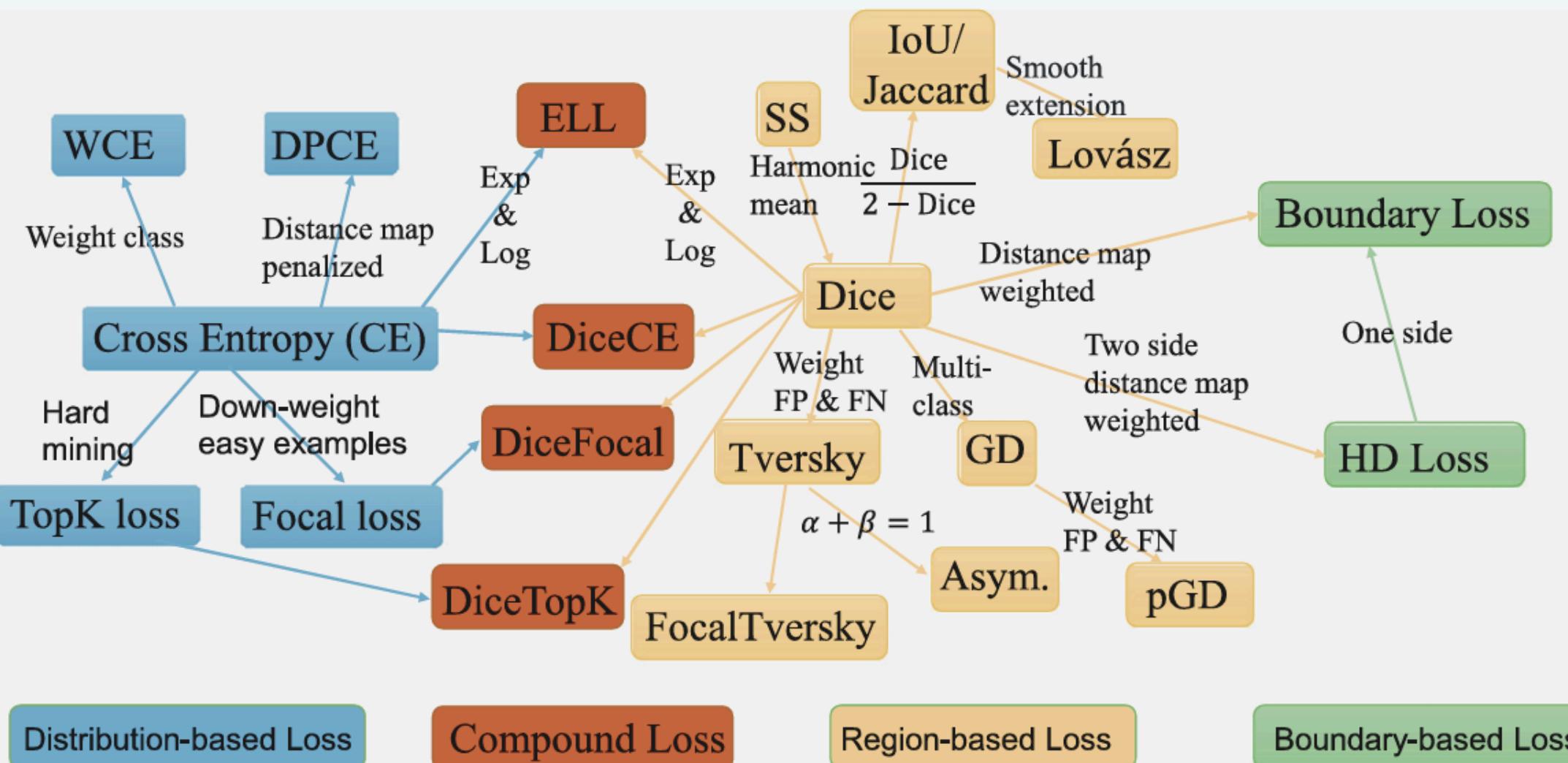
*OUR CONTEXT:* IT QUANTIFIES HOW ACCURATELY THE MODEL IDENTIFIES TUMORS FROM THE BACKGROUND IN A MEDICAL IMAGE

**PURPOSE:** DURING TRAINING, THE MODEL TRIES TO MINIMIZE THE LOSS BY ADJUSTING ITS PARAMETERS, WITH THE GOAL OF IMPROVING ITS PREDICTIVE ACCURACY

$$\text{Dice} = \frac{2 \times \frac{\text{Prediction} \cap \text{Ground truth}}{\text{Prediction} \cup \text{Ground truth}}}{\frac{\text{Prediction}}{\text{Ground truth}} + \frac{\text{Ground truth}}{\text{Prediction}}}$$


$$\text{IoU} = \frac{\frac{\text{Prediction} \cap \text{Ground truth}}{\text{Prediction} \cup \text{Ground truth}}}{\frac{\text{Prediction}}{\text{Ground truth}} + \frac{\text{Ground truth}}{\text{Prediction}}}$$


# STATE-OF-THE-ART ~ LOSS FUNCTIONS



- HANDLING CLASS IMBALANCE
- IMPROVING BOUNDARY PRECISION
- CAPTURING SMALL STRUCTURES
- MINIMIZING FALSE NEGATIVES
- MINIMIZING FALSE POSITIVES
- HANDLING MULTI-CLASS DATA

# POPULAR LOSS FUNCTIONS

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TOP 5 LOSS FUNCTION BY COMBINED POPULARITY SCORE



# POPULAR LOSS FUNCTIONS

## DICE SIMILARITY COEFFICIENT

- SMALL REGION OF INTERSET ✓
- WELL CALIBRATED ✗

## CROSS ENTROPY

- WELL CALIBRATED ✓
- IMBALANCED DATA ✗

## FOCAL LOSS

- IMBALANCED DATA ✓
- SENSITIVITY TO MISLABELED OR NOISY DATA ✓

Calibrating the Dice loss to handle neural network overconfidence for biomedical image segmentation

October 2021

DOI: [10.48550/arXiv.2111.00528](https://arxiv.org/abs/2111.00528)



Medical Image Analysis  
Volume 71, July 2021, 102035



Loss odyssey in medical image segmentation

A Comprehensive Survey of Loss Functions in Machine Learning

April 2022 · Annals of Data Science · 9(5500)

DOI: [10.1007/s40745-020-00253-5](https://doi.org/10.1007/s40745-020-00253-5)

# OUR APPROACH

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- PROPOSED APPROACH - ADAPTIVE LOSS FUNCTION DERIVES ITS FORM BASED ON THE DATA DISTRIBUTION
- SKEWNESS AND KURTOSIS ARE EXPLORED
- TRANSFORMATIONS LIKE ARCSIN, LN, LOG10 ARE USED TO NORMALIZE THE DATA DISTRIBUTION

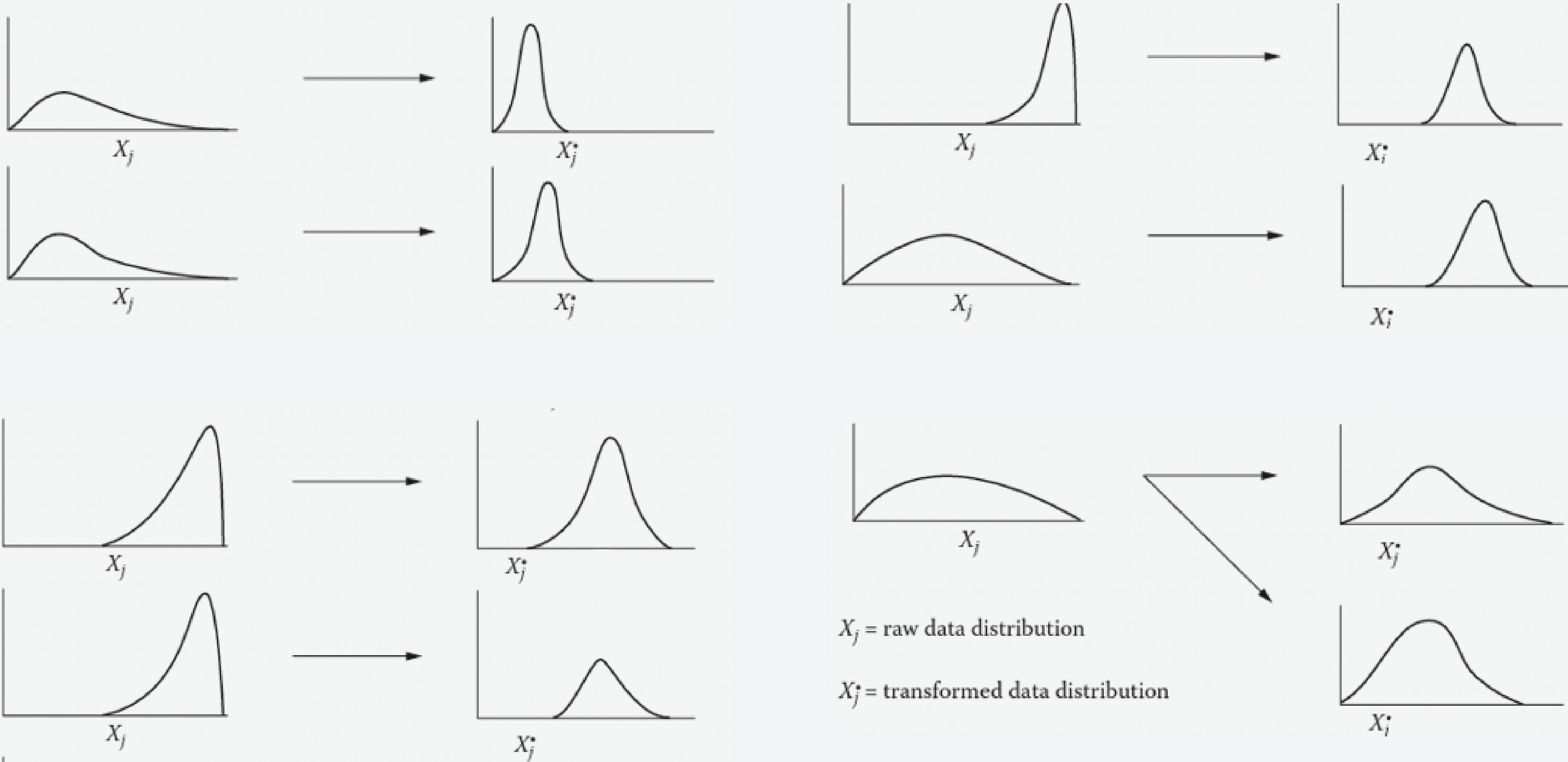
## BENEFITS

- STABILIZING VARIANCE
- MAKING THE DISTRIBUTION MORE GAUSSIAN
- HANDLING OUTLIERS
- IMPROVING CONVERGENCE FOR GRADIENT-BASED ALGORITHMS



# OUR APPROACH

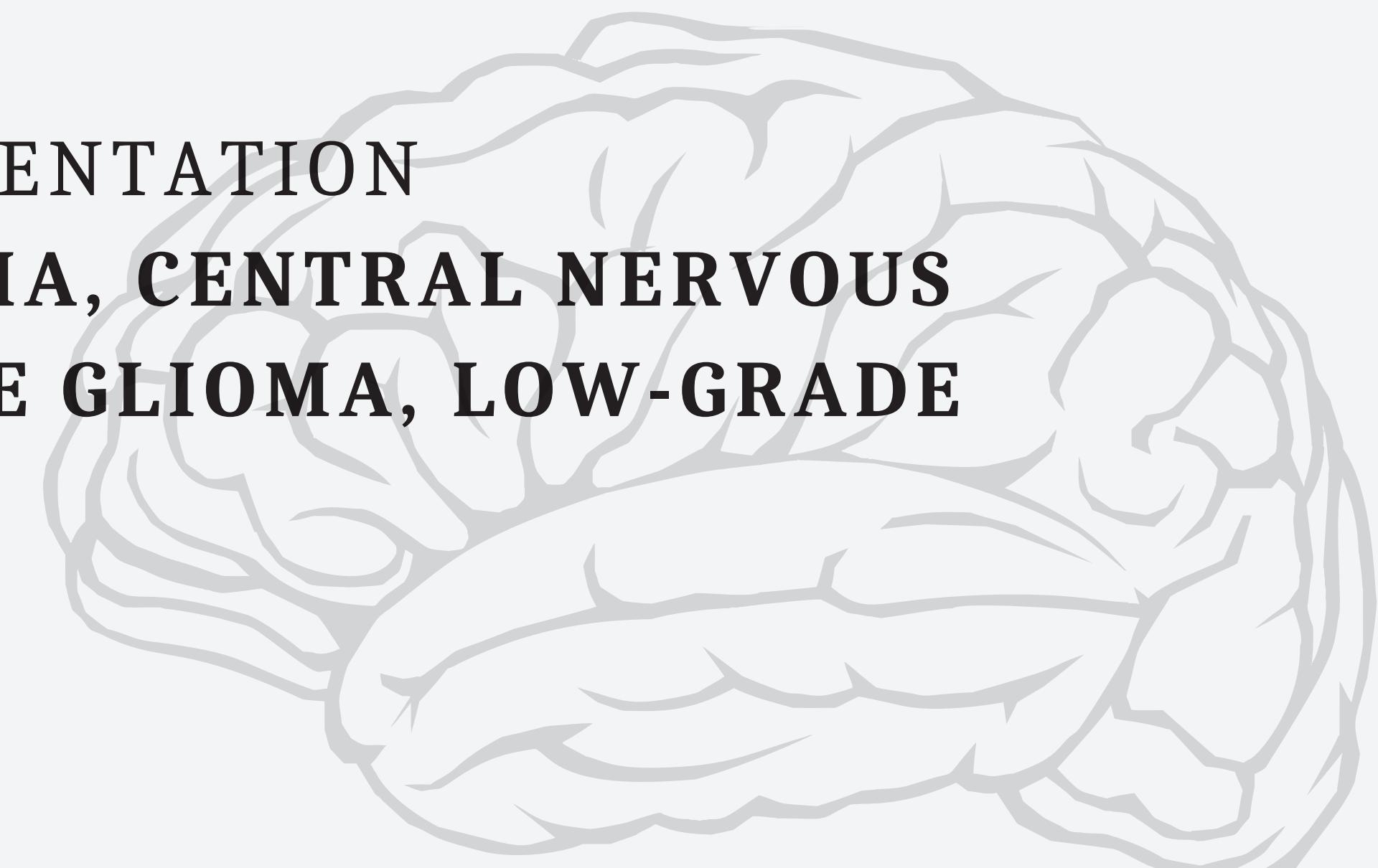
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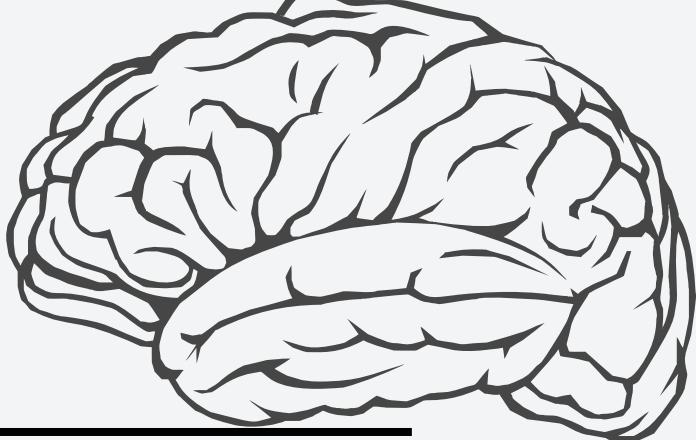
# DATASETS

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- 5 DATASETS FROM THE CANCER IMAGING ARCHIVE
- 4 PUBLIC AND 1 PRIVATE
- 1531 PATIENTS IN TOTAL
- MR IMAGES
- BINARY OR GRayscale SEGMENTATION
- CANCER TYPES: GLIOBLASTOMA, CENTRAL NERVOUS SYSTEM NEOPLASMS, DIFFUSE GLIOMA, LOW-GRADE GLIOMA



# DATASET - 1



The Cancer Imaging Archive

## LGG-1p19qDeletion | LGG-1p19qDeletion

DOI: 10.7937/K9/TCIA.2017.DWEHTZ9V | Data Citation Required | IMAGE COLLECTION

Location	Species	Subjects	Data Types	Cancer Types	Size	Supporting Data	Status	Updated
Brain	Human	159	SEG, MR, Molecular Test, Diagnosis	Low Grade Glioma	2.8GB	Genomics, Segmentations	Limited, Complete	2020/06/26

### Data Type

- MR

### Cancer Type

- LOW GRADE GLIOMA

### Patients

- 159

### Public

- NO

### Image Size

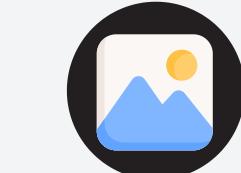
- 256, 256, N

### Tumor Size

- N, 256, 256

# LGG-1P19QDELETION | LGG-1P19QDELETION

MRI Images



T2

Planes



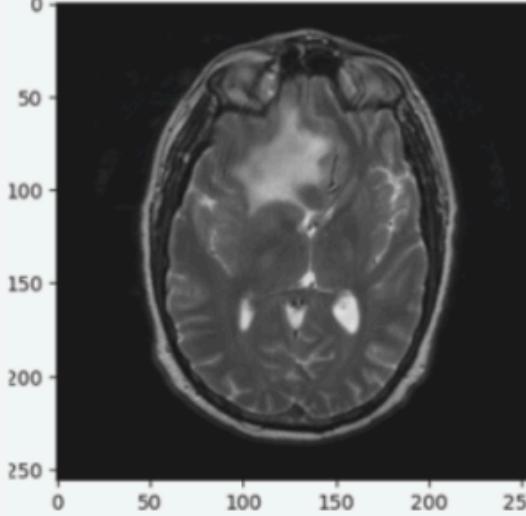
Axial

Distribution

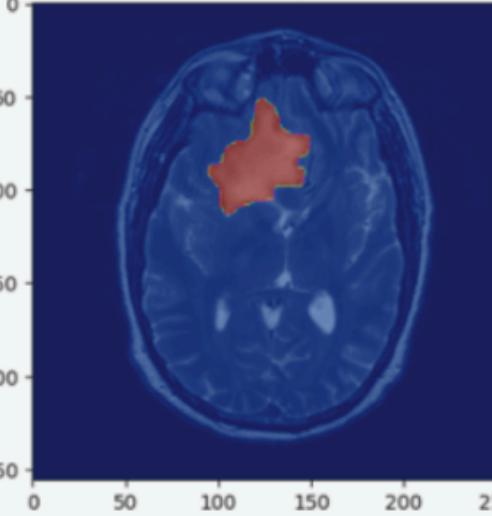


Right  
Skewed

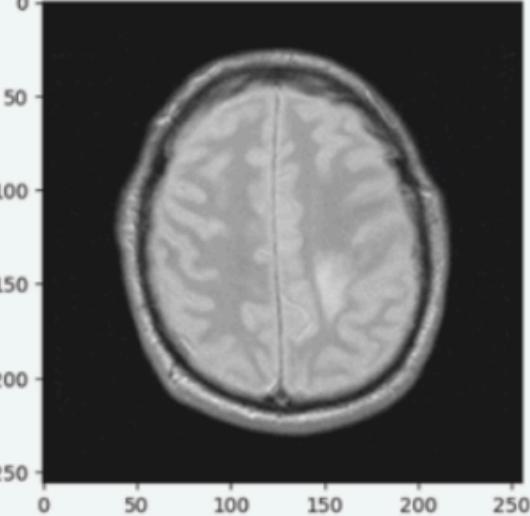
T2 Image - Slice 23/48



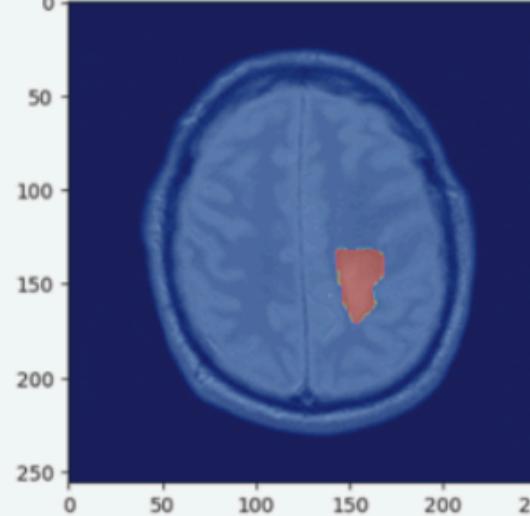
T2 + Tumor Overlay - Slice 23/48



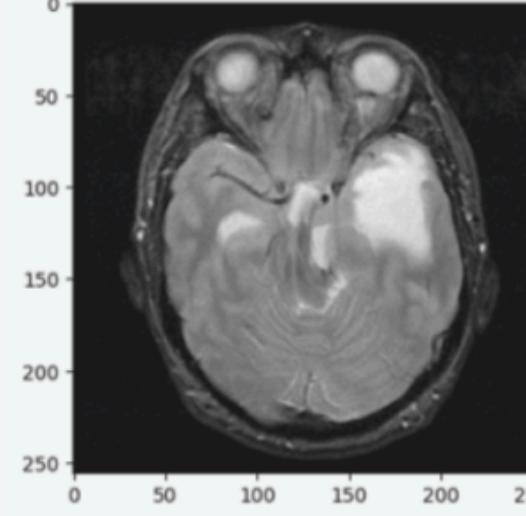
T2 Image - Slice 16/20



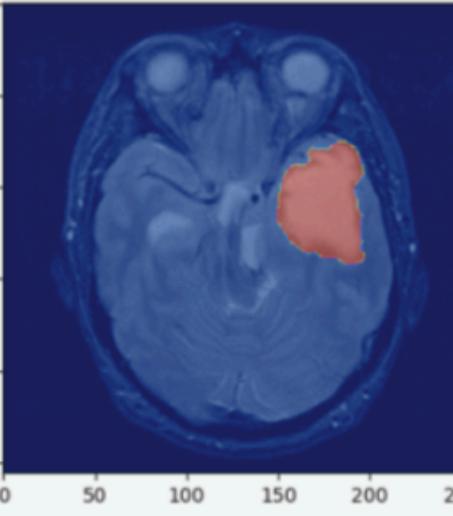
T2 + Tumor Overlay - Slice 16/20



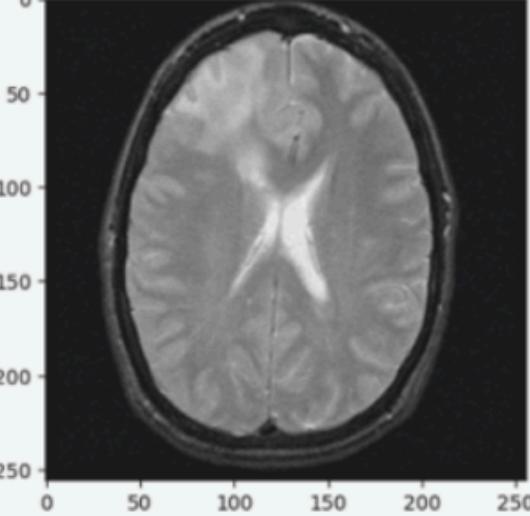
T2 Image - Slice 7/20



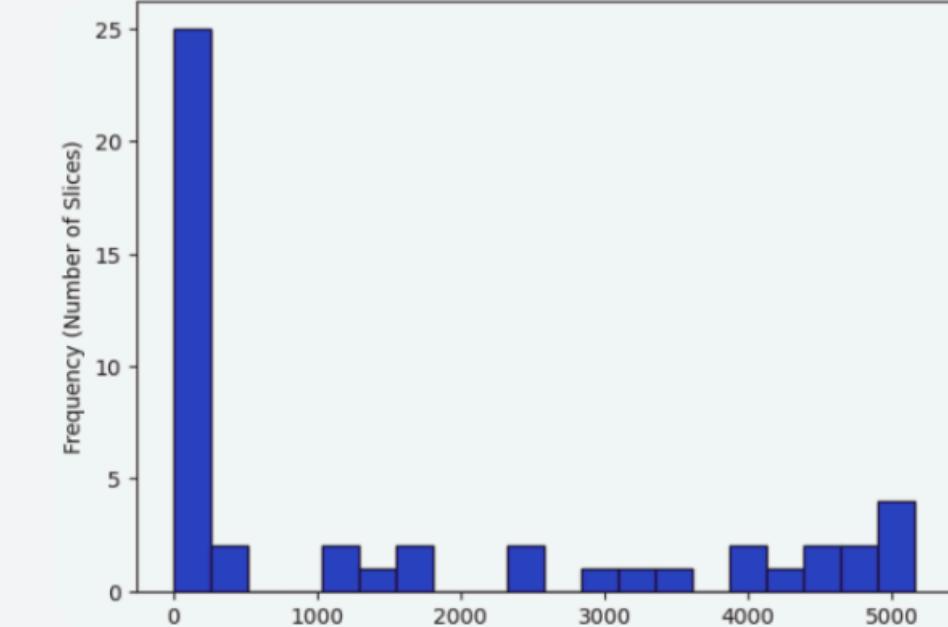
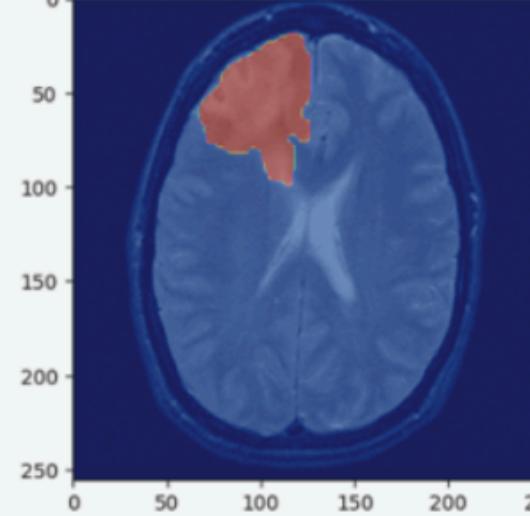
T2 + Tumor Overlay - Slice 7/20



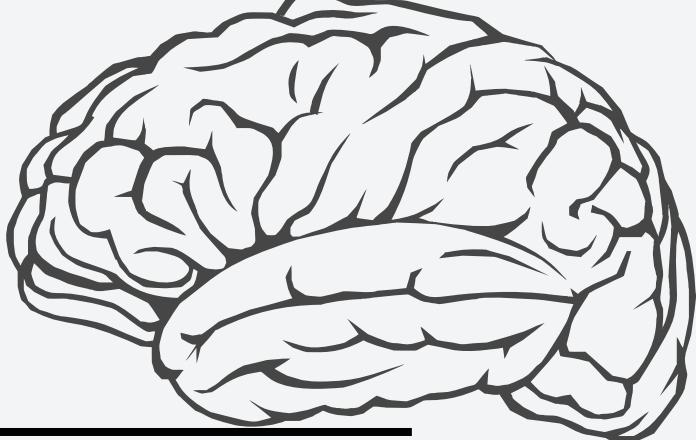
T2 Image - Slice 12/20



T2 + Tumor Overlay - Slice 12/20



# DATASET - 2



Submit Your Data Access The Data Help

THE CANCER IMAGING ARCHIVE

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The Cancer Imaging Archive

## UPENN-GBM | Multi-parametric magnetic resonance imaging (mpMRI) scans for de novo Glioblastoma (GBM) patients from the University of Pennsylvania Health System

DOI: 10.7937/TCIA.709X-DN49 | Data Citation Required | IMAGE COLLECTION

Location	Species	Subjects	Data Types	Cancer Types	Size	Supporting Data	Status	Updated
Brain	Human	630	MR, Molecular Test, Demographic, Radiomic Feature, Other, Histopathology, Segmentation	Glioblastoma	357.42GB	Clinical, Image Analyses	Public, Complete	2022/10/24

### Data Type

- MR
- HISTOPATHOLOGY (NOT SEGMENTED)

### Cancer Type

- GLIOBLASTOMA

### Patients

- 630

### Public

- YES

### Image Size

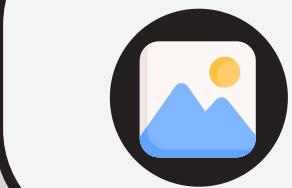
- 240, 240, 155

### Tumor Size

- 240, 240, 155

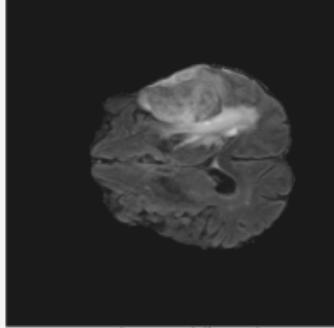
# UPENN-GBM | MULTI-PARAMETRIC MAGNETIC RESONANCE IMAGING (MPMRI) SCANS FOR DE NOVO GLIOBLASTOMA (GBM) PATIENTS FROM THE UNIVERSITY OF PENNSYLVANIA HEALTH SYSTEM

MRI Images

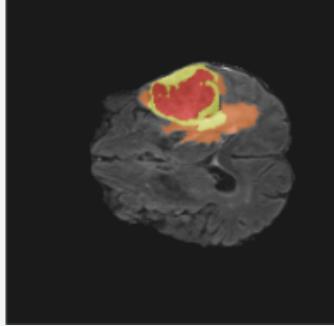


Flair, T1,  
T1GD, T2

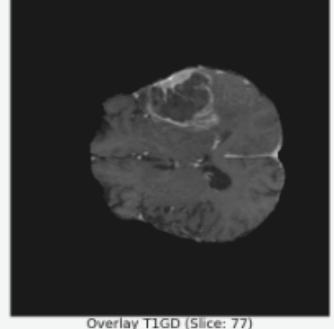
Original FLAIR Ori: ('L', 'P', 'S')



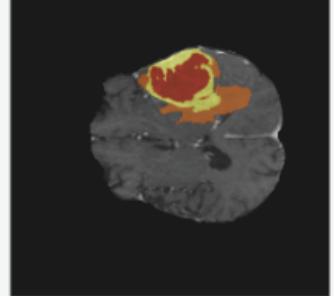
Overlay FLAIR (Slice: 77)



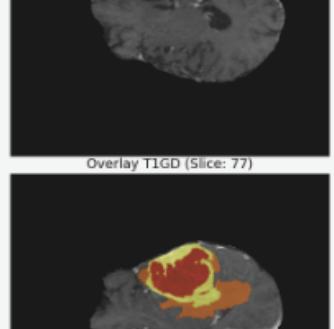
Original T1 Ori: ('L', 'P', 'S')



Overlay T1 (Slice: 77)



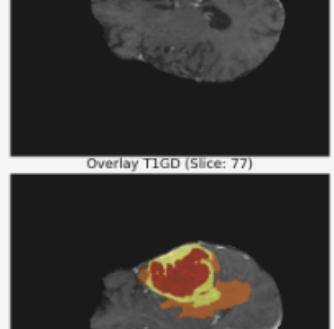
Original T1GD Ori: ('L', 'P', 'S')



Overlay T1GD (Slice: 77)



Original T2 Ori: ('L', 'P', 'S')



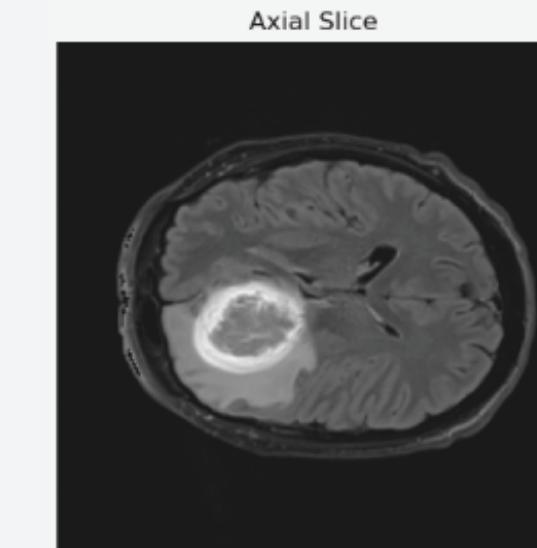
Overlay T2 (Slice: 77)



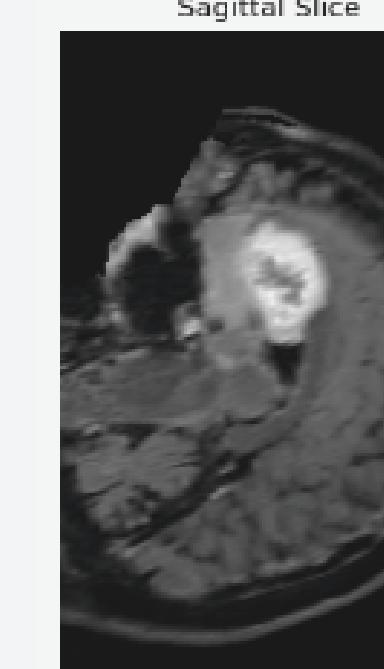
Planes



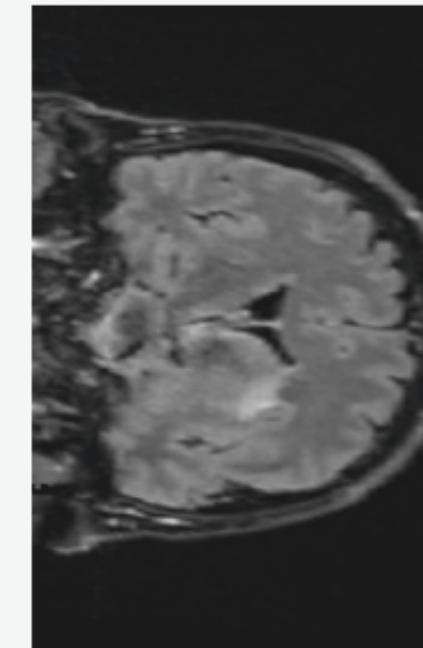
Axial,  
Coronal,  
Sagittal



Axial Slice



Coronal Slice

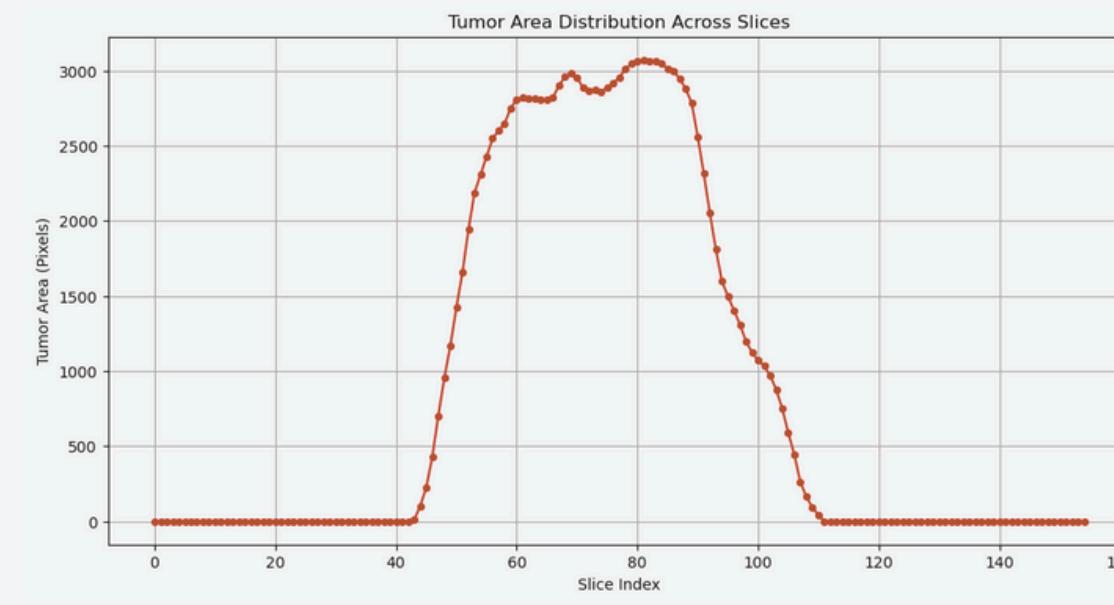
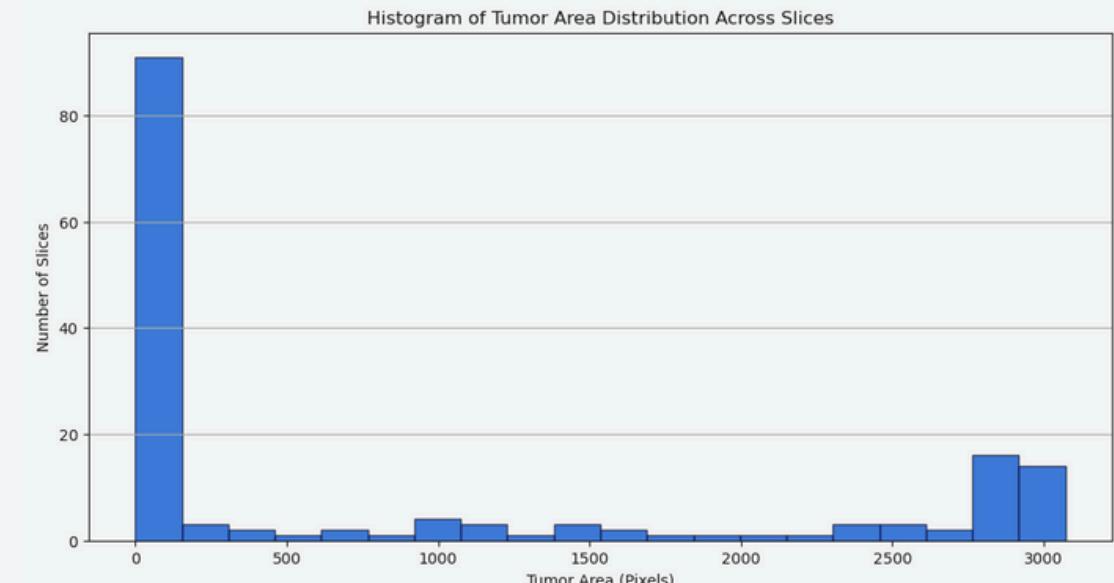


Sagittal Slice

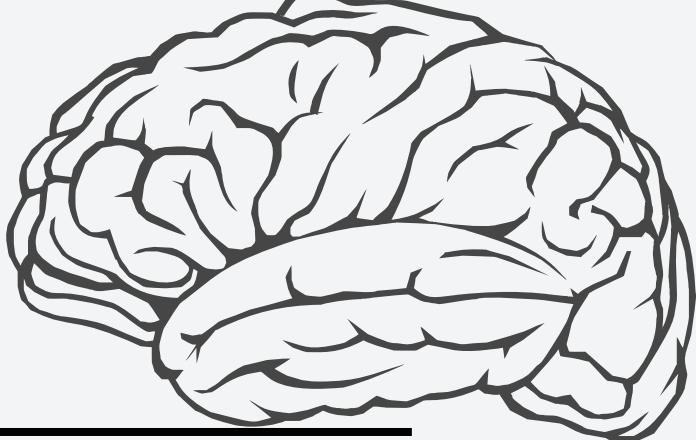
Distribution



Right  
Skewed



# DATASET - 3



The Cancer Imaging Archive

## UCSF-PDGM | The University of California San Francisco Preoperative Diffuse Glioma MRI

DOI: 10.7937/tcia.bdgf-8v37 | Data Citation Required | IMAGE COLLECTION

Location	Species	Subjects	Data Types	Cancer Types	Size	Supporting Data	Status	Updated
Brain	Human	495	MR, Measurement	Diffuse Glioma	156GB	Clinical, Genomics, Image Analyses, Software/Source Code	Public, Complete	2023/04/07

### Data Type

- MR
- MEASUREMENT

### Cancer Type

- DIFFUSE GLIOMA

### Patients

- 501

### Public

- YES

### Image Size

- 240, 240, 155

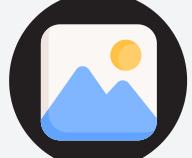
### Tumor Size

- 240, 240, 155

# UCSF-PDGM | THE UNIVERSITY OF CALIFORNIA SAN FRANCISCO

## PREOPERATIVE DIFFUSE GLIOMA MR

MRI Images



T1, T2, FLAIR,  
HARDI (FA), ADC,  
ASL, DWI, SWI

Planes



Axial

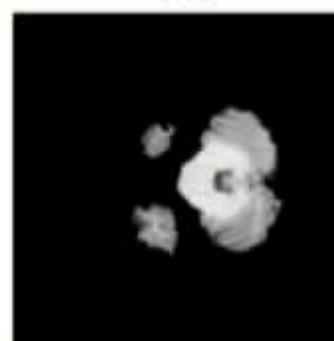
Distribution



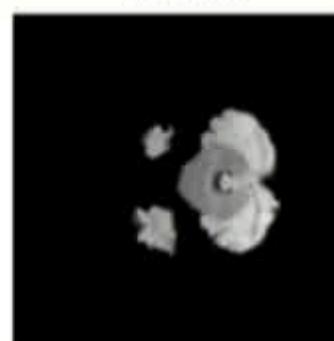
Right  
Skewed

Slice Number: 48 / 155

T1



FLAIR



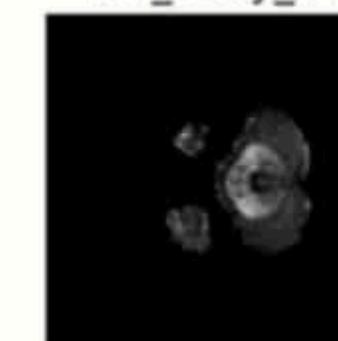
DWI



T1c



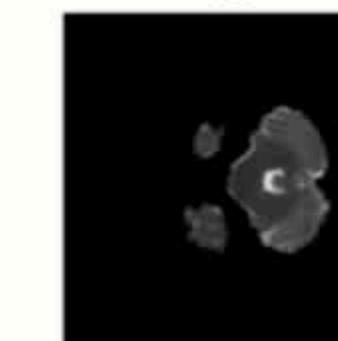
DTI\_eddy\_FA



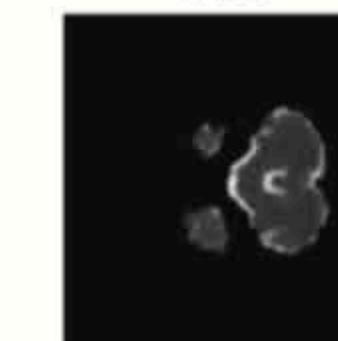
SWI



T2



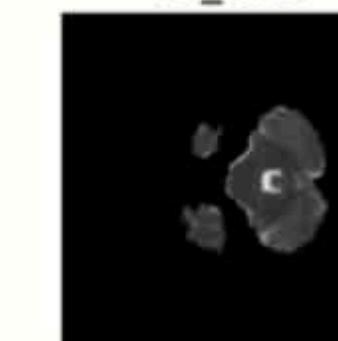
ADC



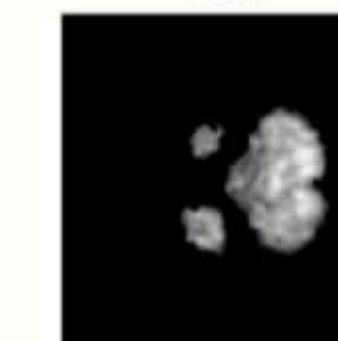
tumor\_segmentation



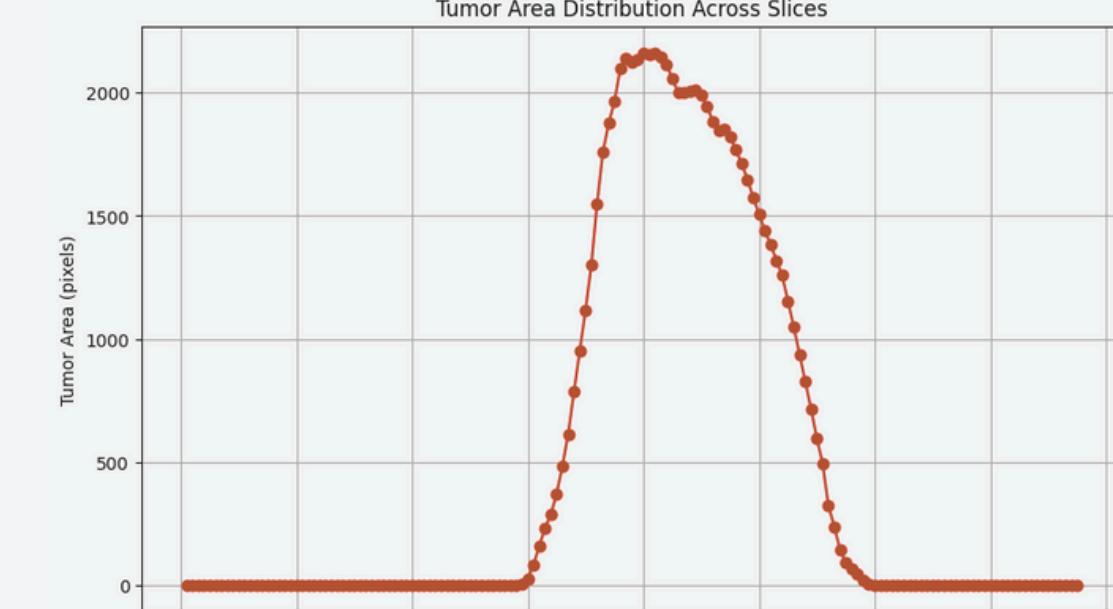
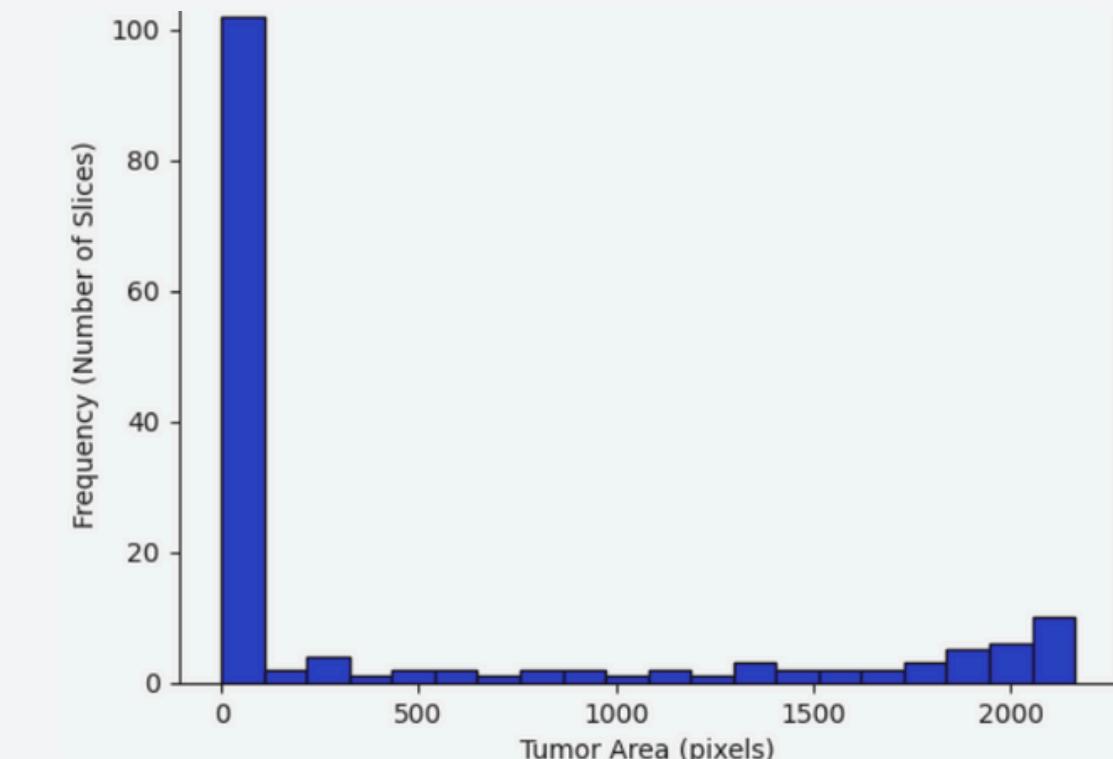
T2\_bias



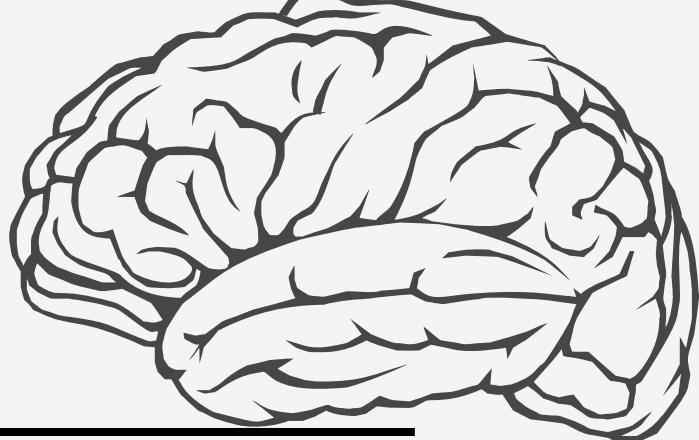
ASL



Tumor Seg. + T1 Base



# DATASET - 4



Submit Your Data Access The Data Help

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## BraTS-Africa | Expanding the Brain Tumor Segmentation (BraTS) data to include African Populations

DOI: 10.7937/v8h6-8x67 | Data Citation Required | IMAGE COLLECTION

Location	Species	Subjects	Data Types	Cancer Types	Size	Status	Updated
Brain	Human	146	MR, Segmentation, Diagnosis, Other	Brain Cancer	3.7GB	Public, Complete	2024/09/04

### Data Type

- MR
- DIAGNOSIS

### Cancer Type

- CNS NEOPLASMS
- DIFFUSE GLIOMA
- LOW GLIOMA
- GLIOBLASTOMA

### Patients

- 146

### Public

- YES

### Image Size

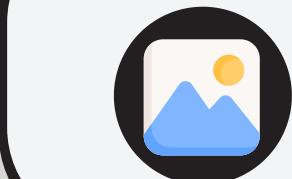
- 240, 240, 155

### Tumor Size

- 240, 240, 155

# BRATS-AFRICA | EXPANDING THE BRAIN TUMOR SEGMENTATION (BRATS) DATA TO INCLUDE AFRICAN POPULATIONS

MRI Images



T1, T1-C,  
T2, FLAIR

Planes



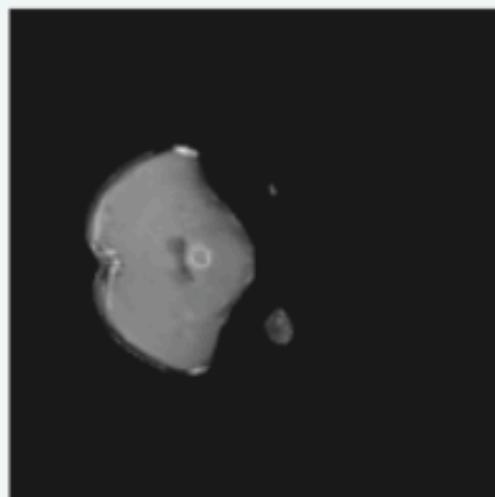
Axial

Distribution

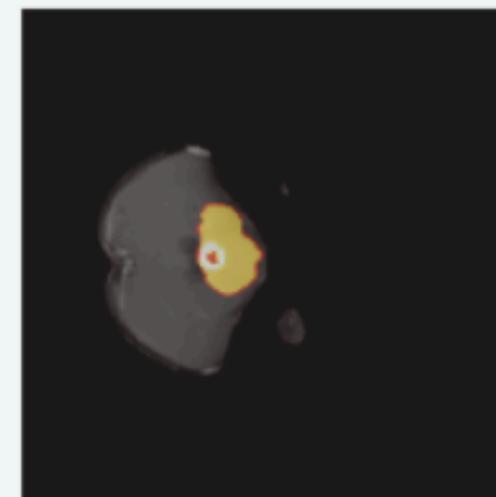


Right  
Skewed

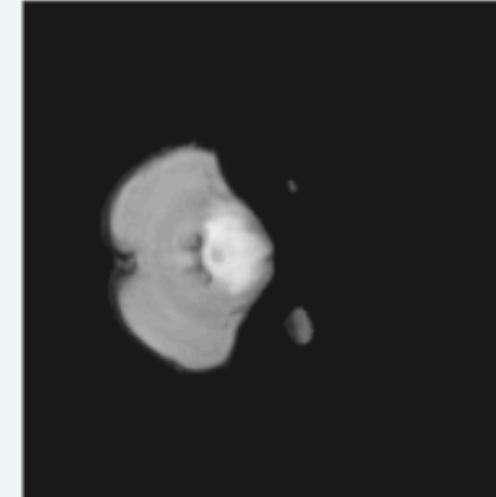
t1c



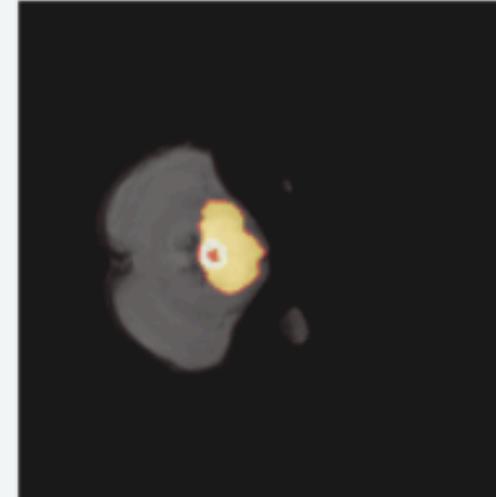
Tumor + t1c



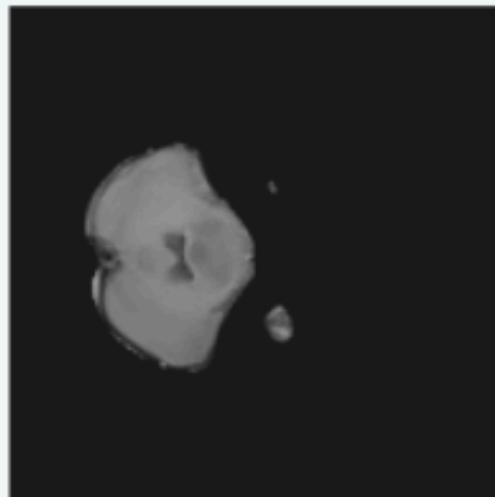
t2f



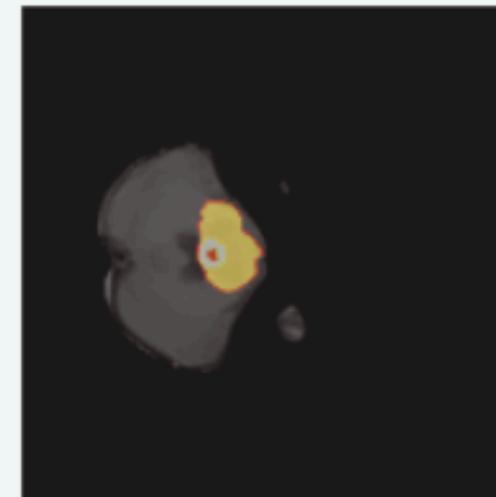
Tumor + t2f



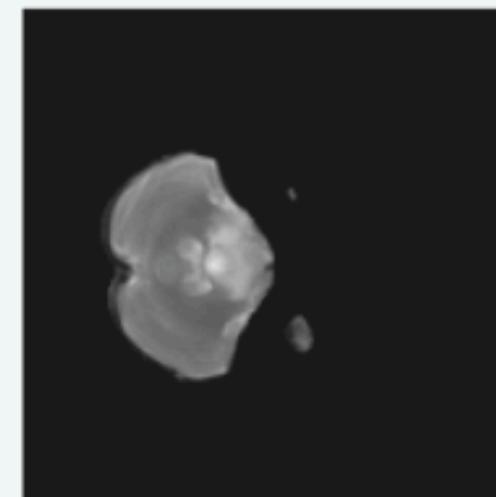
t1n



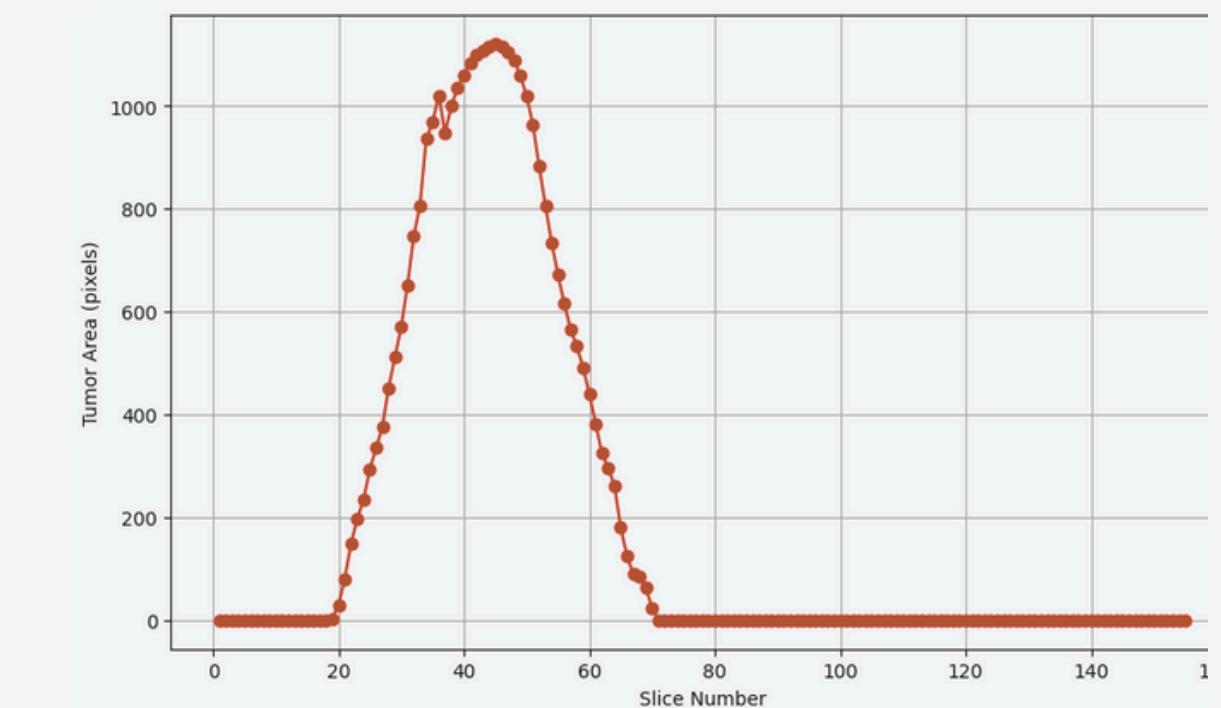
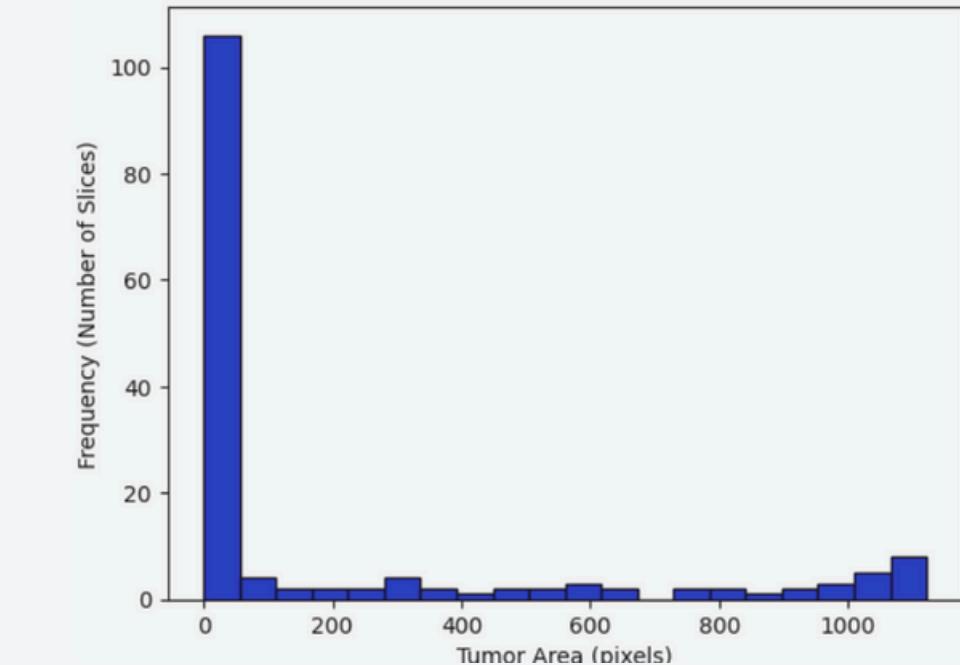
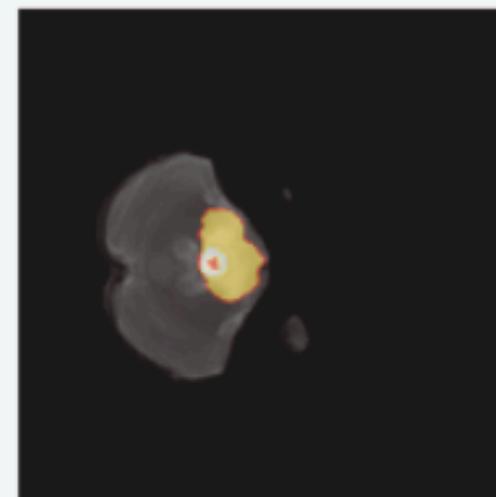
Tumor + t1n



t2w

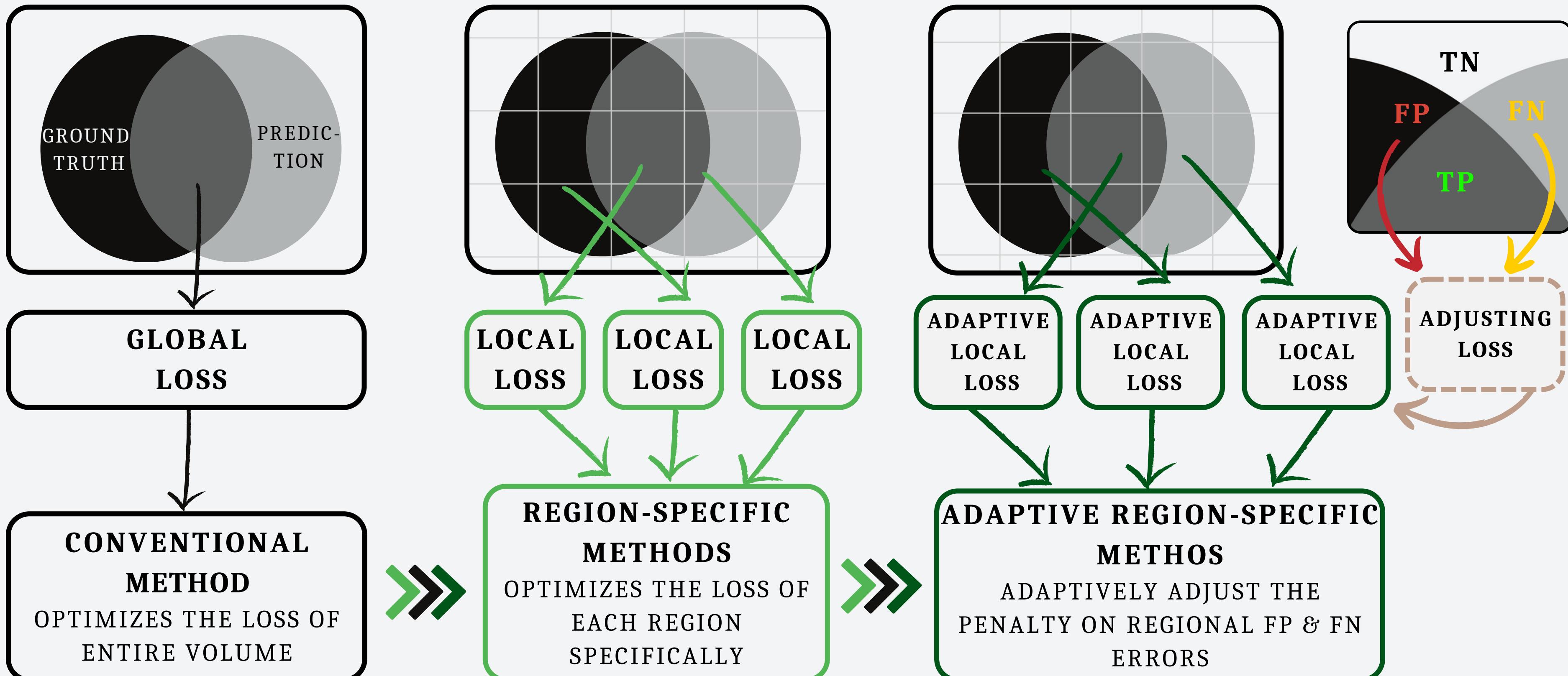


Tumor + t2w



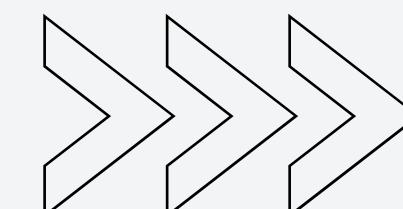
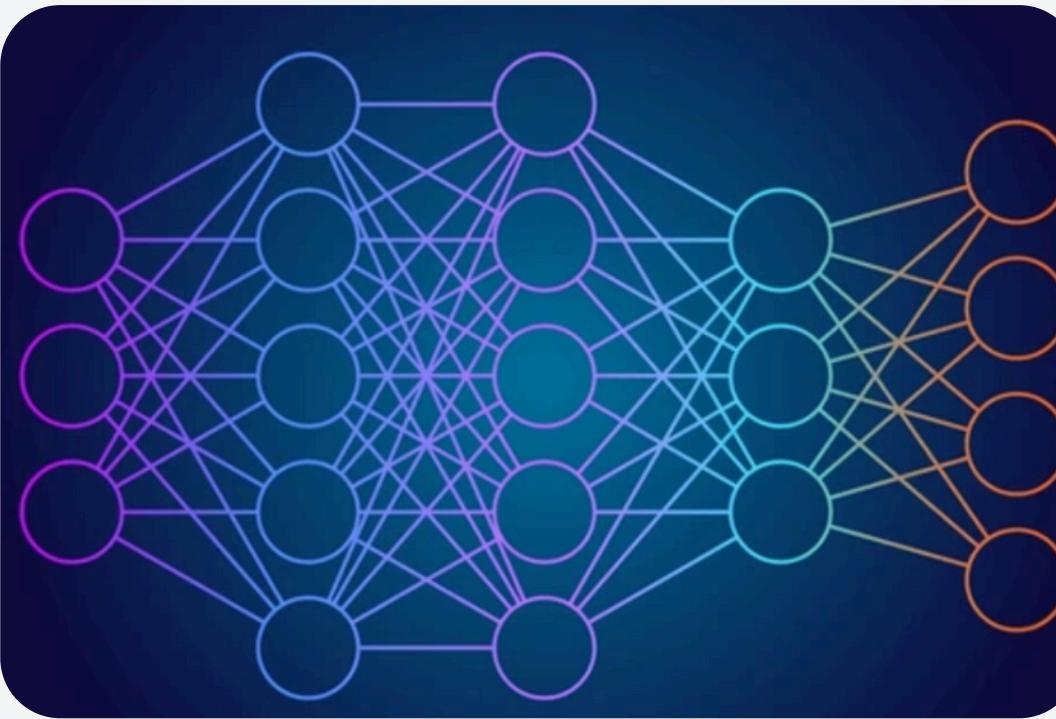
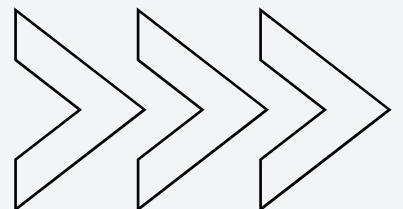
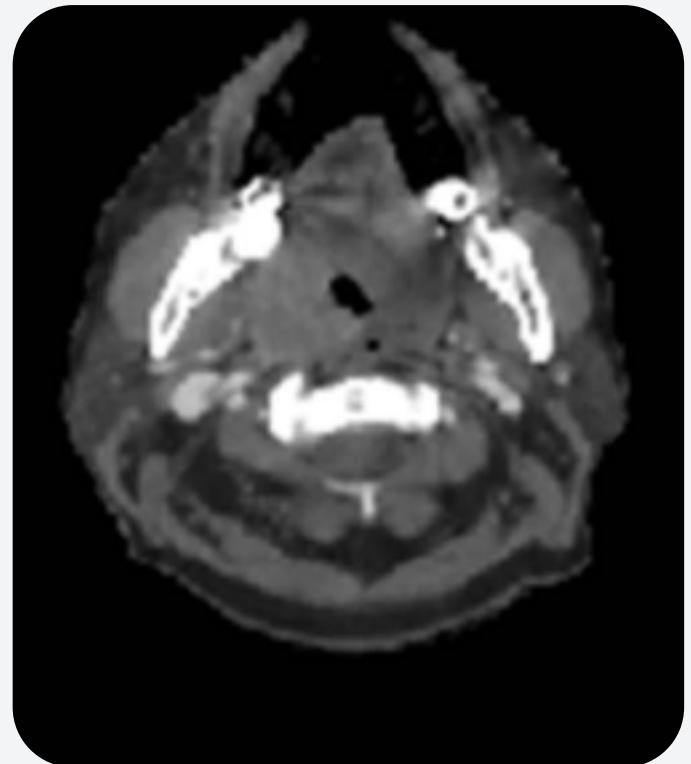
# FUTURE WORK

## REGION SPECIFIC ADAPTIVE LOSS FUNCTION



# FUTURE WORK

## REGION SPECIFIC ADAPTIVE LOSS FUNCTION



INPUT IMAGE

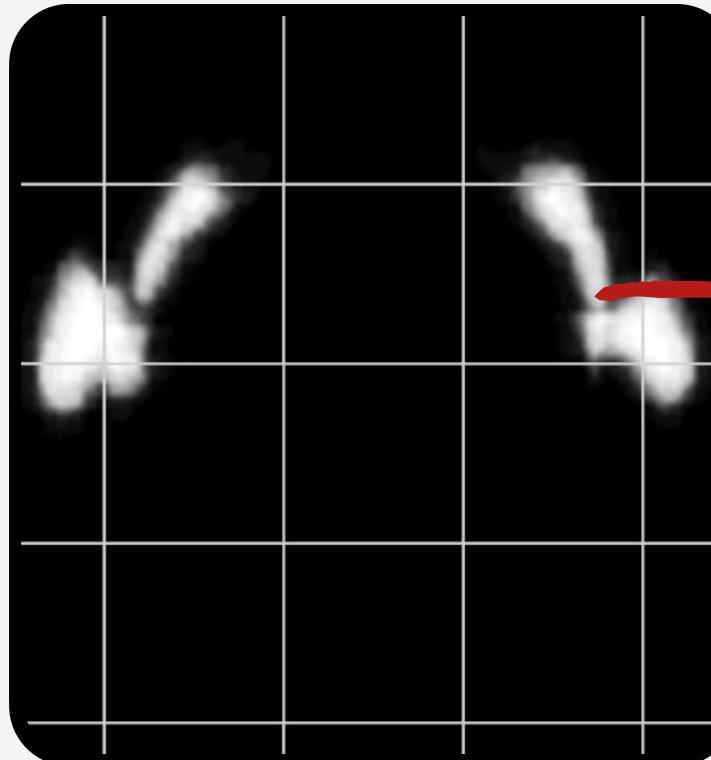
NETWORK

OUTPUT MASK

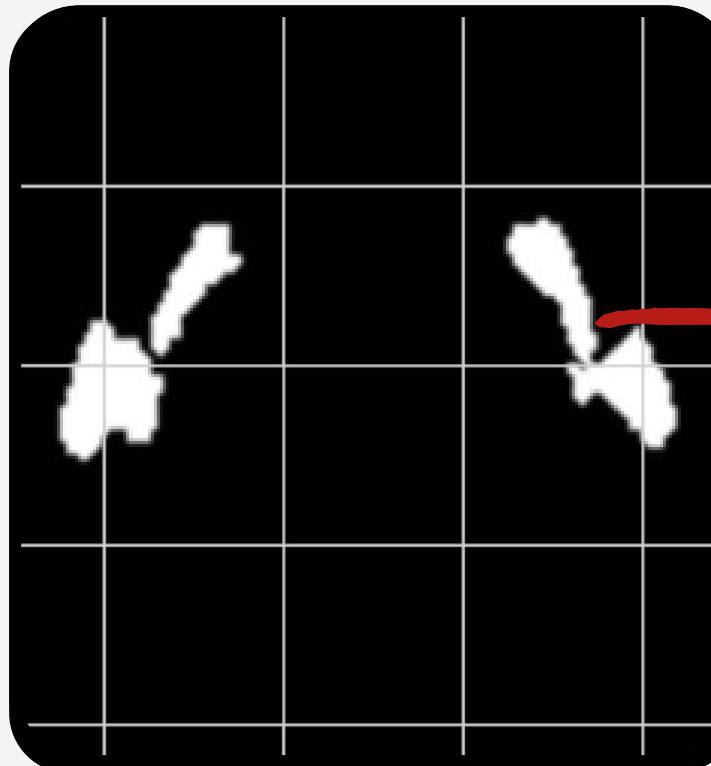
# FUTURE WORK

## REGION SPECIFIC ADAPTIVE LOSS FUNCTION

OUTPUT  
MASK

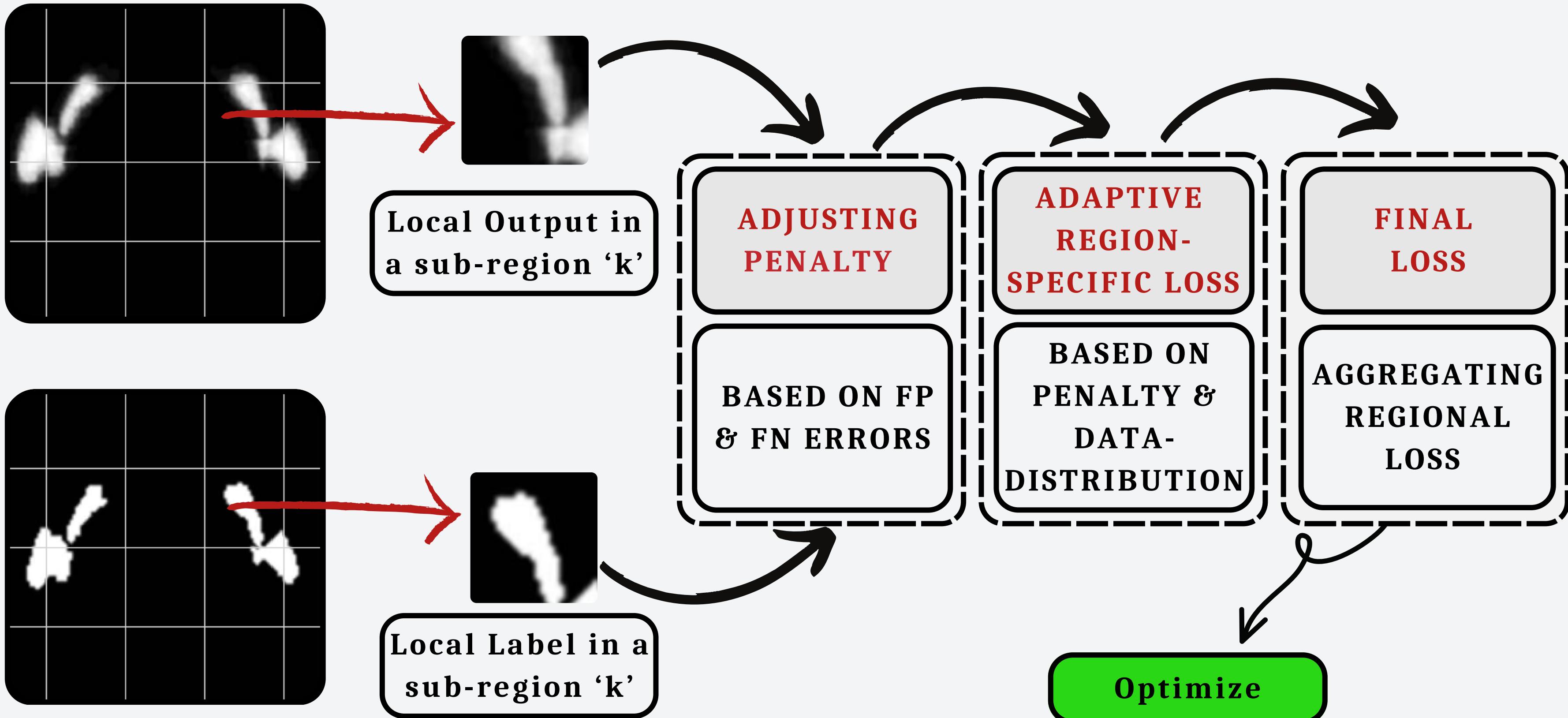


GROUND  
TRUTH  
LABEL



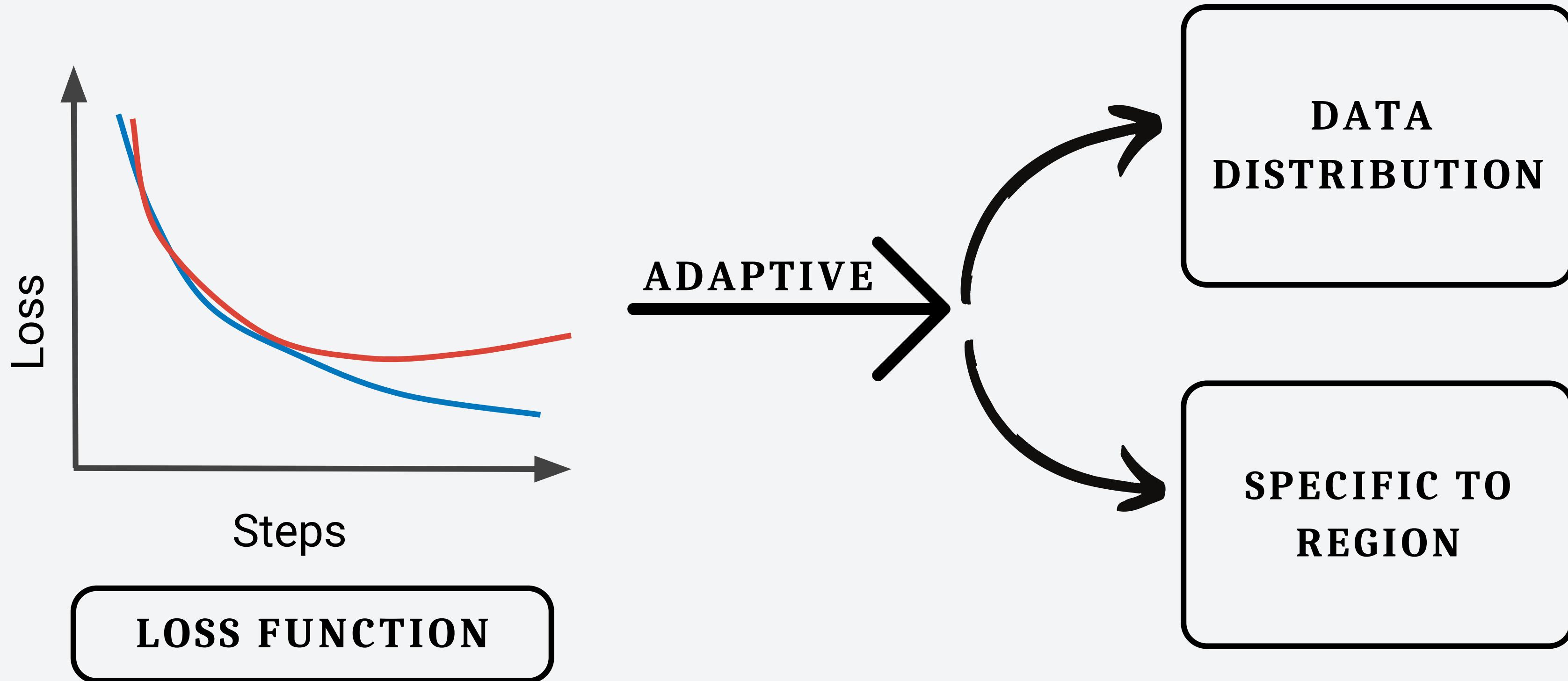
# FUTURE WORK

## REGION SPECIFIC ADAPTIVE LOSS FUNCTION



# FUTURE WORK

## REGION SPECIFIC ADAPTIVE LOSS FUNCTION

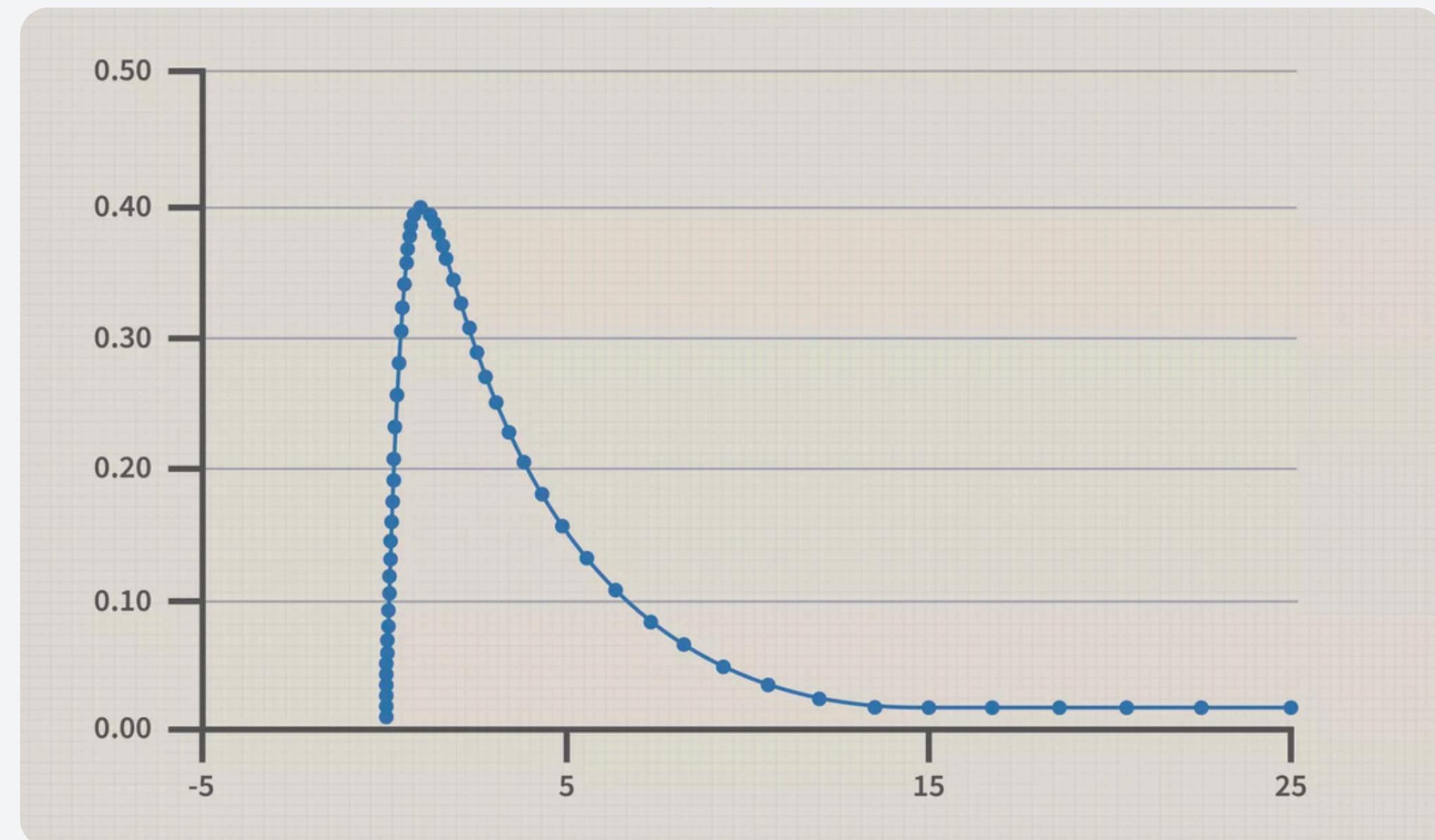
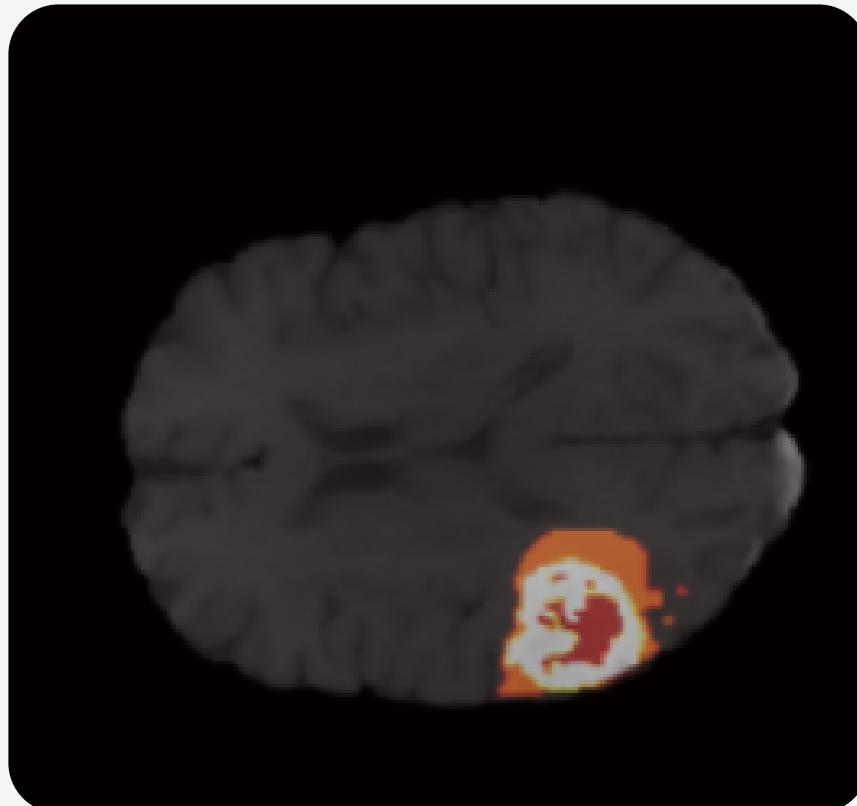


# LIMITATIONS

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## RIGHT SKEWED DATA

- When the region of interest is much smaller than the background

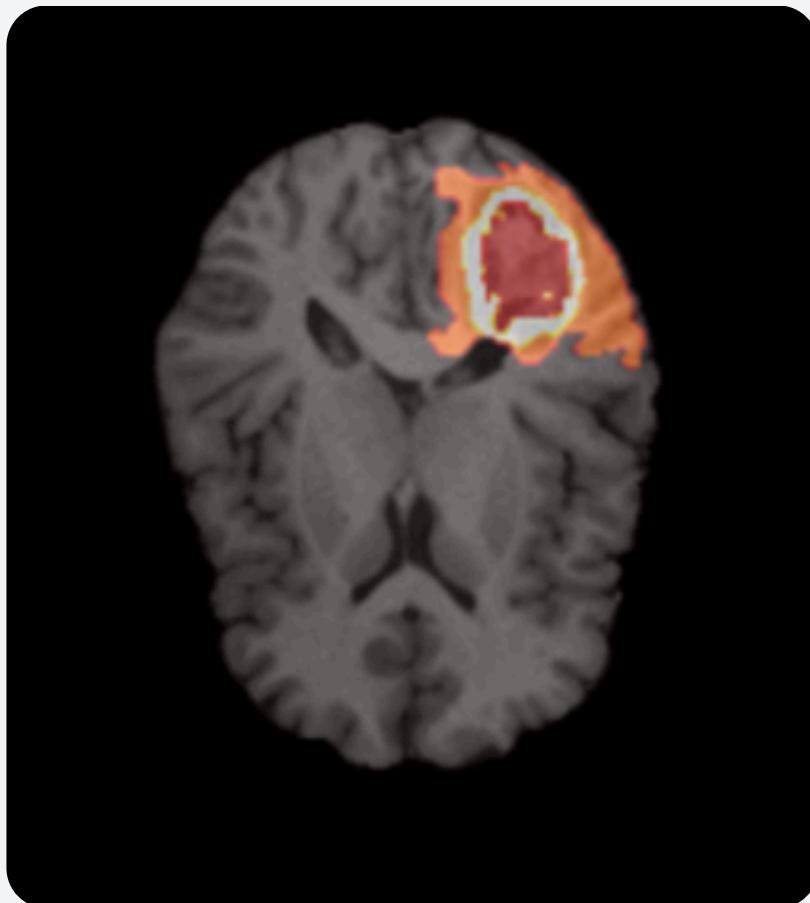


# LIMITATIONS

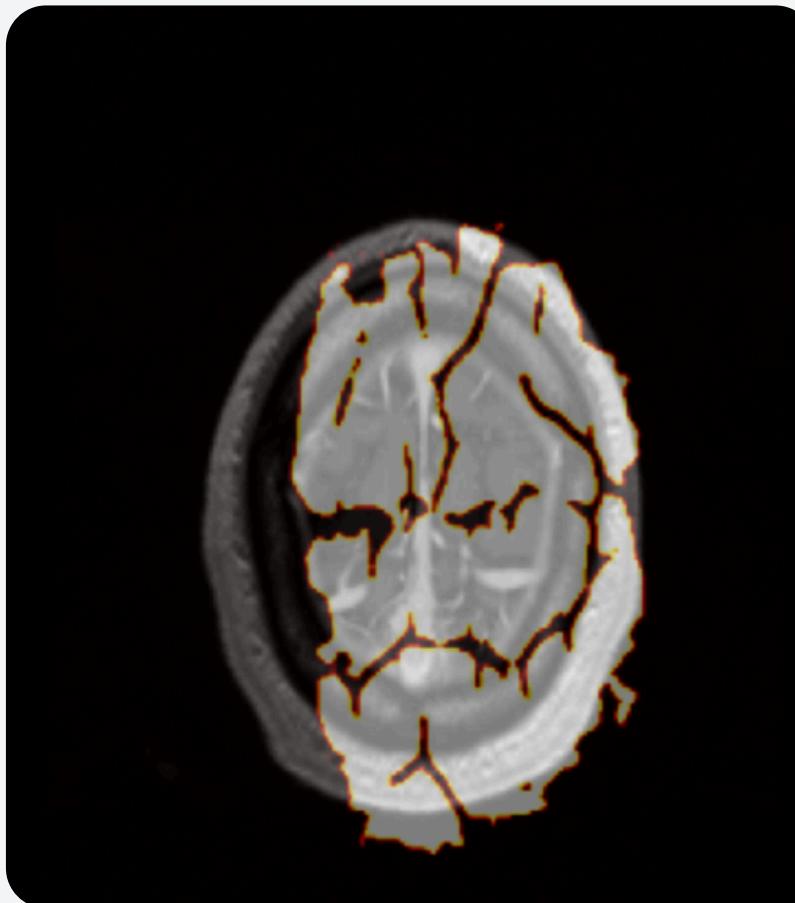
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## NON-STANDARDIZED DATA

- The segmentation image appears larger than it should be



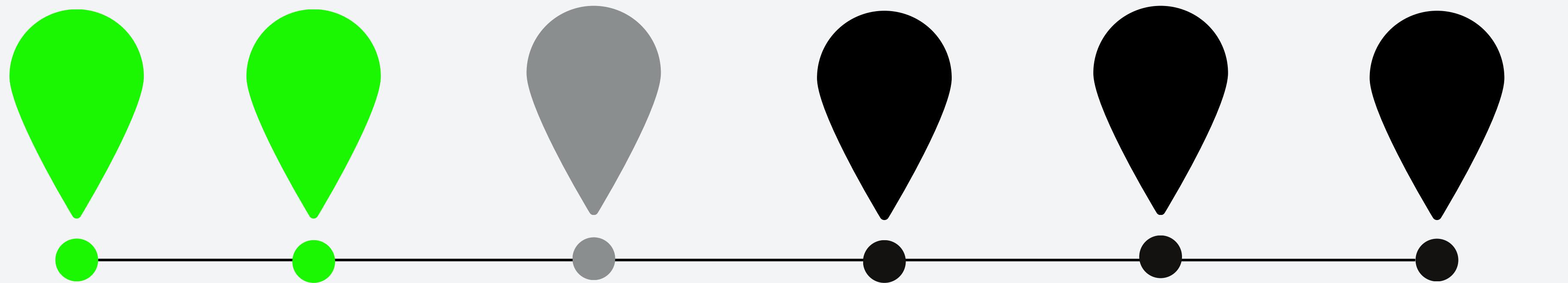
STANDARDIZED



NON-STANDARDIZED

# MILESTONES

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BACKGROUND  
REVIEW

DATA  
COLLECTION

LOSS FUNCTION  
REVIEW PAPER

ADAPTIVE  
LOSS  
FUNCTION

TRAIN  
MODELS

VALIDATE THE  
LOSS FUNCTION

# REFERENCES

A GENERAL AND ADAPTIVE LOSS FUNCTION - CVPR 2019

ADAPTIVE REGION-SPECIFIC LOSS FOR IMPROVED MEDICAL IMAGE SEGMENTATION - IEEE  
2023

LGG-1P19QDELETION | LGG-1P19QDELETION

UCSF-PDGM | THE UNIVERSITY OF CALIFORNIA SAN FRANCISCO PREOPERATIVE DIFFUSE  
GLIOMA MRI

BRATS-AFRICA | EXPANDING THE BRAIN TUMOR SEGMENTATION (BRATS) DATA TO INCLUDE  
AFRICAN POPULATIONS

UPENN-GBM | MULTI-PARAMETRIC MAGNETIC RESONANCE IMAGING (MPMRI) SCANS FOR DE  
NOVO GLIOBLASTOMA (GBM) PATIENTS FROM THE UNIVERSITY OF PENNSYLVANIA HEALTH  
SYSTEM

REMIND | THE BRAIN RESECTION MULTIMODAL IMAGING DATABASE

# **THANK YOU!**



# QUESTIONS



# LOSS FUNCTIONS TABLE

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Name	Class	Year	Citations to Original Paper	Publications	Citations in total	Purpose	Use Cases - Pros/Cons
CE	Distribution	2015	94542	477	100000	Minimize cross entropy $H(P, Q)$	works best in equal data distribution among classes
WCE	Distribution	2015	94542	66	96000	Minimize CE, penalize majority weights	widely used in skewed datasets
TopK	Distribution	2016	187	4	343	Force networks to focus on hard samples during training	used in imbalanced data
Focal	Distribution	2017	199	336	5000	Adapts the standard cross entropy to focus on hard examples	works best with highly imbalanced datasets, down-weight the contribution of easy examples, enabling model to learn hard examples
DPCE	Distribution	2019	104	22	215	Guide the network's focus towards hard-to-segment boundary regions	used for hard-to-segment boundaries
Sensitivity-specificity	Region	2015	52	26	164	Addresses the class imbalance problem by weighting specificity higher	used when there is more focus on True Positives
Dice	Region	2016	10882	557	22000	Optimize the Dice Similarity Coefficient (DSC)	does not require class re-weighting for imbalanced segmentation tasks
IoU (Jaccard)	Region	2016	1033	183	3000	Optimize the object category segmentation metric	highly effective for tasks where boundary precision is crucial
Lovász	Region	2018	613	37	1000	Optimize the Jaccard index	Optimizing with cross entropy first is needed
Tversky	Region	2017	1056	154	3000	achieve a better trade-off between precision and recall	used where the cost of false positives and false negatives differs significantly and it is wanted to adjust the model's behavior accordingly.
Generalized Dice	Region	2017	2688	37	5000	Multi-class extension of Dice loss	used in multi-class segmentation
Focal Tversky	Region	2018	930	46	2000	Focus on hard cases with low probabilities	focus on hard examples
Asymmetric similarity	Region	2018	206	10	463	Make a better adjustment of the weights of FPs and FNs	used in imbalanced data
Penalty	Region	2019	37	4	67	Penalize the FNs and the FPs in generalized Dice	used in multi-class segmentation, focused on false negatives / positives
Boundary Loss	Boundary	2018	558	63	1000	Use integral framework to compute distance between two boundaries	time-consuming, Should be coupled with region-based loss
Hausdorff Distance Loss	Boundary	2019	503	6	845	Avoid unstable training	time-consuming, Should be coupled with region-based loss
Combo	Compound	2018	388	6	701	handle input and output imbalance in multi-organ segmentation	used for lightly class imbalanced
ELL	Compound	2018	251	3	441	Address the issues of highly unbalanced object sizes	focuses on less accurately predicted cases
Dice - Focal	Compound	2018	514	18	566	learn from poorly segmented voxels better	good in multi-class segmentation
Dice - TopK	Compound	2020	29	4	89	Used for automated volumetric assessment of multiple sclerosis	good in multi-class segmentation
G. Wasserstein Dice loss	Tailored	2018	184	4	296	To improve multi-class segmentation	used in multi-class segmentation, tackles hierarchical classes and can take advantage of known relationships between classes

## **THEORY**

### **SKEWNESS**

DATA WITH EITHER A +1 OR MORE, OR -1 OR LESS, IS SAID TO BE HIGHLY POSITIVELY/NEGATIVELY SKEWED

A MORE MODERATE POSITIVE OR NEGATIVE SKEWNESS LIES BETWEEN +0.5 AND +1, OR -0.5 AND -1 RESPECTIVELY

### **KURTOSIS**

NORMAL DISTRIBUTION HAS KURTOSIS 3 BUT IN THE CODE FISHER ALGORITHM IS USED TO MOVE IT TO 0

A DISTRIBUTION WITH A KURTOSIS OF APPROXIMATELY 0 WOULD BE SAID TO BE MESOKURTIC.

A DISTRIBUTION WITH A KURTOSIS OF LESS THAN 0 (AND THEREFORE A NEGATIVE EXCESS KURTOSIS) IS PLATYKURTIC.

A DISTRIBUTION WITH A KURTOSIS GREATER THAN 0 (AND THEREFORE A POSITIVE EXCESS KURTOSIS) IS LEPTOKURTIC. THESE KINDS OF DISTRIBUTIONS ARE MORE PRONE TO THE PRESENCE OF OUTLIERS BECAUSE THE MAJORITY OF POINTS CLOSE TO THE MEAN RESULT IN A SMALLER STANDARD DEVIATION.

## *GUIDE TO PLANES*

### **1. AXIAL (AX) MRI**

REFERS TO A SCAN TAKEN IN THE AXIAL PLANE, WHICH SLICES THE BODY HORIZONTALLY, FROM TOP TO BOTTOM (PARALLEL TO THE GROUND). THIS PLANE DIVIDES THE BODY INTO SUPERIOR (UPPER) AND INFERIOR (LOWER) PARTS.

### **2. CORONAL (COR) MRI**

SLICES THE BODY FROM FRONT TO BACK (LIKE A HEADBAND), DIVIDING IT INTO ANTERIOR (FRONT) AND POSTERIOR (BACK) SECTIONS.

### **3. SAGITTAL (SAG) MRI**

SLICES THE BODY FROM SIDE TO SIDE, DIVIDING IT INTO LEFT AND RIGHT PARTS.

### **4. OBLIQUE MRI**

SCAN IS TAKEN IN AN ANGLED PLANE

# GUIDE TO MRI SCAN TYPES

## T1-WEIGHTED IMAGING (T1WI)

DESCRIPTION: PROVIDES HIGH CONTRAST BETWEEN DIFFERENT SOFT TISSUES.

USE CASES:

ANATOMICAL DETAIL: GREAT FOR VISUALIZING THE BRAIN'S ANATOMY, FAT TISSUES, AND NORMAL STRUCTURAL DETAIL.

POST-CONTRAST ENHANCEMENT: T1WI IS OFTEN USED AFTER ADMINISTERING GADOLINIUM CONTRAST AGENTS TO VISUALIZE ENHANCED AREAS LIKE TUMORS OR INFLAMMATION.

## 2. T2-WEIGHTED IMAGING (T2WI)

DESCRIPTION: FLUIDS APPEAR BRIGHT, WHILE TISSUES LIKE FAT APPEAR DARKER COMPARED TO T1WI.

USE CASES:

DETECTING EDEMA, INFLAMMATION, AND PATHOLOGICAL CHANGES.

IDENTIFYING BRAIN LESIONS, TUMORS, OR ABNORMALITIES INVOLVING INCREASED WATER CONTENT.

DIFFERENTIATING BETWEEN VARIOUS TYPES OF TISSUES BASED ON WATER CONTENT.

## 3. FLAIR (FLUID-ATTENUATED INVERSION RECOVERY)

DESCRIPTION: SIMILAR TO T2-WEIGHTED IMAGING, BUT SUPPRESSES SIGNALS FROM FLUIDS LIKE CEREBROSPINAL FLUID (CSF), MAKING LESIONS NEAR FLUID-FILLED AREAS MORE VISIBLE.

USE CASES:

DETECTING LESIONS IN CONDITIONS LIKE MULTIPLE SCLEROSIS OR BRAIN INJURIES.

VISUALIZING BRAIN ABNORMALITIES NEAR VENTRICLES AND SULCI.

# FUTURE WORK

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## A GENERAL AND ROBUST LOSS FUNCTION

- A SINGLE LOSS FUNCTION THAT IS A SUPERSET OF MANY COMMON ROBUST LOSS FUNCTIONS
- A SINGLE CONTINUOUS-VALUED PARAMETER IN THE GENERAL LOSS FUNCTION CAN BE SET SUCH THAT IT IS EQUAL TO SEVERAL TRADITIONAL LOSSES, AND CAN BE ADJUSTED TO MODEL A WIDER FAMILY OF FUNCTIONS
- OUR CURRENT LOSS FUNCTION HAS NO HYPERPARAMETERS
- ROBUSTNESS PARAMETER IS A LEARNABLE PARAMETER - NO MANUAL TUNING
- TWO-PARAMETER LOSS FUNCTION THAT GENERALIZES MANY EXISTING ONE-PARAMETER ROBUST LOSS FUNCTIONS

# FUTURE WORK

## A GENERAL AND ROBUST LOSS FUNCTION

$$f(x, \alpha, c) = \frac{|\alpha - 2|}{\alpha} \left( \left( \frac{(x/c)^2}{|\alpha - 2|} + 1 \right)^{\alpha/2} - 1 \right)$$

- $\alpha \in \mathbb{R}$  IS A **SHAPE PARAMETER** THAT CONTROLS THE **ROBUSTNESS** OF THE LOSS
- $c > 0$  IS A **SCALE PARAMETER** THAT CONTROLS THE SIZE OF THE LOSS'S QUADRATIC BOWL NEAR  $X = 0$
- $\alpha$  IS USUALLY IN  $(0, 3)$ , WHICH ALLOWS FUNCTION DISTRIBUTION TO GENERALIZE **CAUCHY** ( $\alpha = 0$ ) AND **NORMAL** ( $\alpha = 2$ ) DISTRIBUTIONS AND ANYTHING IN BETWEEN, ALSO FOR **NUMERICAL STABILITY**
- $c$  IS FIXED TO MATCH THE FIXED SCALE ASSUMPTION OF THE BASELINE MODELS AND ROUGHLY MATCHES THE SHAPE OF ITS L1 LOSS

# FUTURE WORK

## A GENERAL AND ROBUST LOSS FUNCTION

$$\lim_{\alpha \rightarrow 2} f(x, \alpha, c) = \frac{1}{2} (x/c)^2$$

**A -> 2 = L2 LOSS**

$$f(x, 1, c) = \sqrt{(x/c)^2 + 1} - 1$$

**A = 1 = SMOOTHED  
L1 LOSS**

$$f(x, -2, c) = \frac{2(x/c)^2}{(x/c)^2 + 4}$$

**A = -2 = GEMAN-  
MCCLURE LOSS**

$$\lim_{\alpha \rightarrow 0} f(x, \alpha, c) = \log \left( \frac{1}{2} (x/c)^2 + 1 \right)$$

**A -> 0 = CAUCHY (AKA  
LORENTZIAN) LOSS**

$$\lim_{\alpha \rightarrow -\infty} f(x, \alpha, c) = 1 - \exp \left( -\frac{1}{2} (x/c)^2 \right)$$

**A -> -INF = WELSCH  
(AKA LECLERC) LOSS**

# FUTURE WORK

## A GENERAL AND ROBUST LOSS FUNCTION

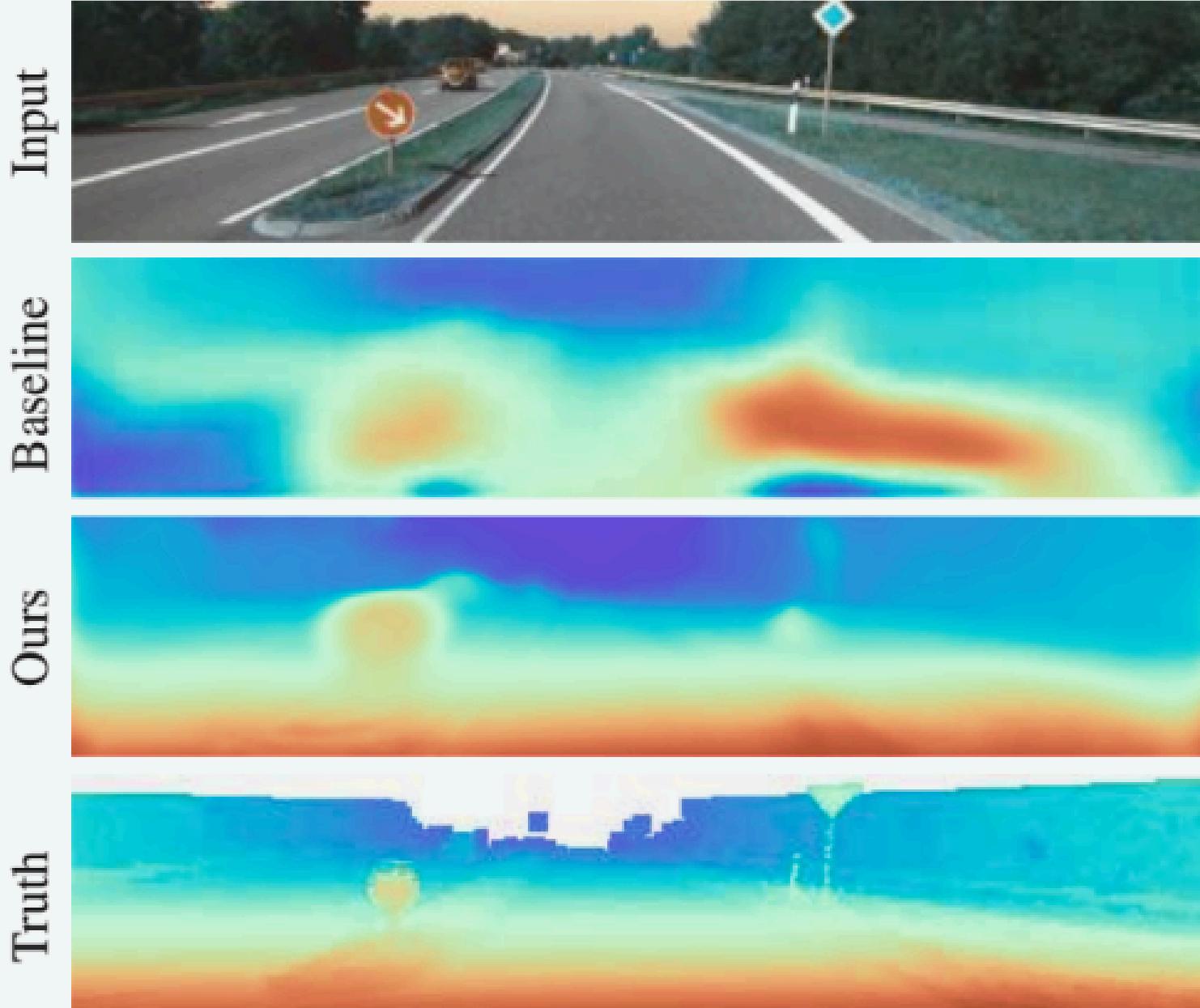
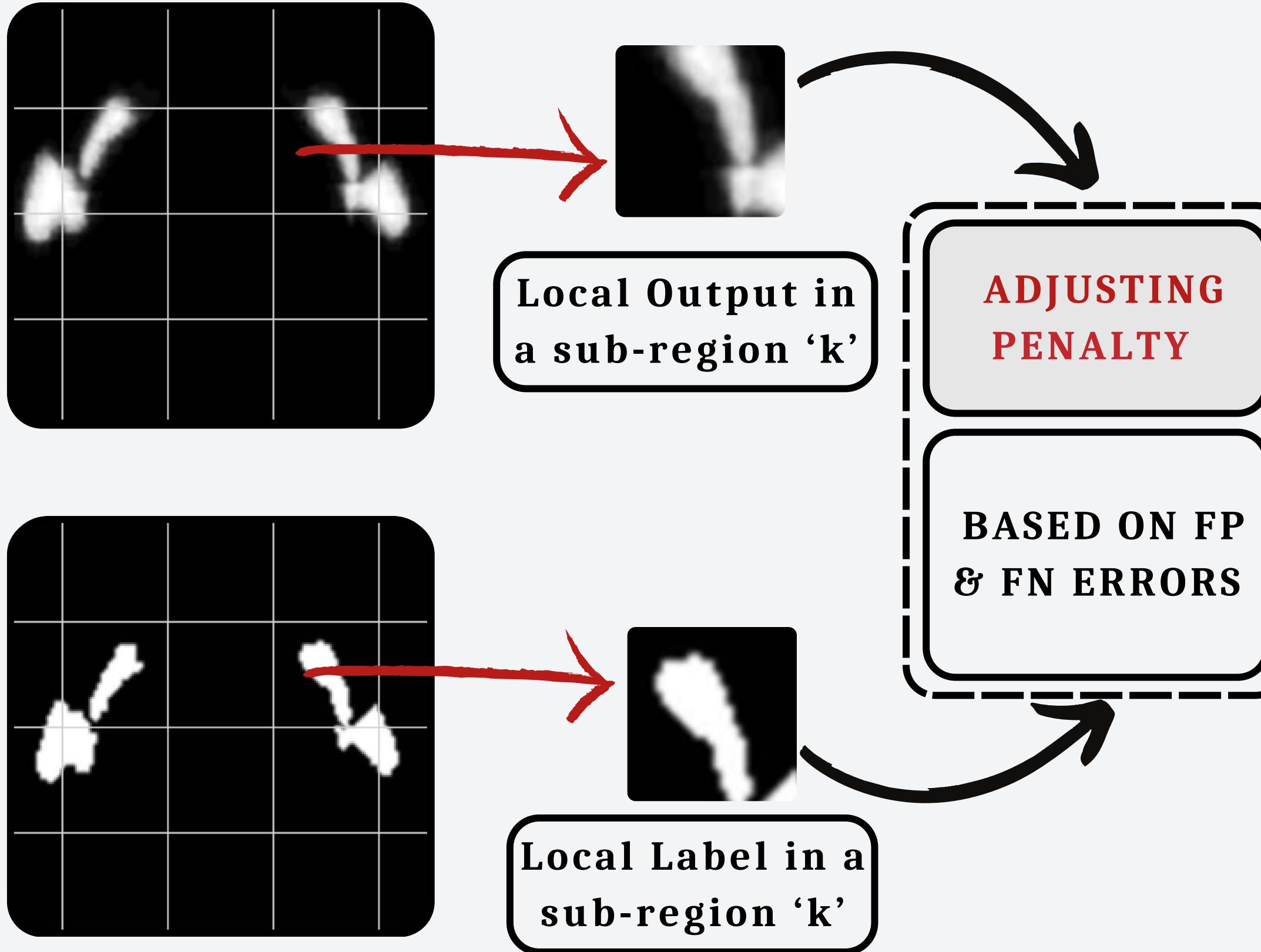


Figure 4. Monocular depth estimation results on the KITTI benchmark using the “Baseline” network of [41]. Replacing only the network’s loss function with our “adaptive” loss over wavelet coefficients results in significantly improved depth estimates.

- IN THE ADAPTIVE  $A \in (0, 2)$  MODEL THEY ASSIGN EACH WAVELET COEFFICIENT ITS OWN SHAPE PARAMETER AS A FREE VARIABLE, WHICH ARE OPTIMIZED ALONGSIDE THEIR NETWORK WEIGHTS DURING TRAINING
- NO SINGLE SETTING OF  $A$  IS OPTIMAL FOR ALL WAVELET COEFFICIENTS. OVERALL, JUST REPLACING THE LOSS FUNCTION OF BASELINE MODEL WITH THIS ADAPTIVE LOSS ON WAVELET COEFFICIENTS REDUCES AVERAGE ERROR BY 17%.

# FUTURE WORK

## REGION SPECIFIC ADAPTIVE LOSS FUNCTION



$$\alpha_{\text{Adaptive}} = A + B \cdot \frac{FP}{FP + FN}$$

$$\beta_{\text{Adaptive}} = A + B \cdot \frac{FN}{FP + FN}$$

