

# Question 1: Determining What Data an RTSTRUCT Stores (Boundary Points vs. Interior Points)

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## 1. Objective

Before further processing anatomical contours in medical images (e.g., contour simplification, similarity evaluation, point density analysis), we must first clarify:

**Does an RTSTRUCT store all points inside a region, or only the boundary (contour) points?**

This decision directly affects whether we need preprocessing steps such as explicit “boundary extraction”.

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## 2. Background

The study object is a DICOM RTSTRUCT file. RTSTRUCT is the standard format used in radiotherapy planning to store organ contours delineated manually or semi-automatically.

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## 3. Method

We read the RTSTRUCT using Python with `pydicom` and inspect key fields that define contours, including:

- `ContourGeometricType`
  - `NumberOfContourPoints`
  - the structure and length of `ContourData`
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## 4. Implementation Code

```
from pathlib import Path
import pydicom

# Find an RTSTRUCT file
rtstruct_path = next(Path(r'd:\point_plotting_research').rglob('*.RTSTRUCT*.dcm'))

# Read DICOM
ds = pydicom.dcmread(str(rtstruct_path))

# Print ROI list
print("ROIs in this RTSTRUCT:")
for r in ds.StructureSetROISequence:
    print(f"  ROINumber={r.ROINumber}, ROIName={r.ROIName}")

# Read the first contour of the first ROI
contour = ds.ROIContourSequence[0].ContourSequence[0]

# Print key fields
print("\nContour information:")
```

```
print("ContourGeometricType:", contour.ContourGeometricType)
print("NumberOfContourPoints:", contour.NumberOfContourPoints)
print("len(ContourData):", len(contour.ContourData))
```

## 5. Output

```
(.venv) PS D:\point_plotting_research\src> python check_edge_points.py
ROIs in this RTSTRUCT:
  ROINumber=1, ROIName=Prostate
  ROINumber=2, ROIName=Lesion 1

Contour information:
  ContourGeometricType: CLOSED_PLANAR
  NumberOfContourPoints: 308
  len(ContourData): 924
```

Because `len(ContourData)` is exactly three times `NumberOfContourPoints` (each point has x, y, z), this confirms the file stores only contour (boundary) points.

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# Question 2: Determining the Minimal Number of Boundary Points

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## (Contour Simplification and Similarity Evaluation)

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### 1. Objective

After confirming that the RTSTRUCT stores organ **boundary points**, the next question is:

**How many boundary points are minimally required to keep the simplified contour highly consistent with the original contour geometry?**

Identifying the minimal effective point count helps:

- reduce contour data size
- improve efficiency of geometric computations and downstream analysis
- provide a standardized contour representation for multi-case statistics

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## 2. Method Overview

### 2.1 Original Contour

- **Source:** DICOM RTSTRUCT
- **ROI:** Prostate
- **Original number of points:** 308

- **Contour type:** **CLOSED\_PLANAR** (closed planar contour)

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## 2.2 Simplification Strategy

We treat the original contour as a **closed polyline** and perform **uniform resampling along arc length** to generate simplified contours with different target point counts.

The tested target point counts are:

16  
32  
48  
64  
128  
256

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## 2.3 Similarity Metrics

To quantitatively compare simplified contours with the original, we use two complementary metrics:

### (1) Area Relative Error

$$\text{Area Error} = \frac{|\text{Area}_{\text{simplified}} - \text{Area}_{\text{original}}|}{\text{Area}_{\text{original}}}$$

This measures how well the simplified contour preserves the **global shape and scale**.

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### (2) Hausdorff Distance

Hausdorff distance measures the **maximum local deviation** between two curves:

$$d_H(A, B) = \max \left( \sup_{a \in A} \inf_{b \in B} |a - b|, \sup_{b \in B} \inf_{a \in A} |b - a| \right)$$

This metric is highly sensitive to local geometric error, with units of **millimeters (mm)**.

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## 2.4 Acceptable Error Thresholds

Based on practical geometric accuracy needs in medical imaging, we use the following thresholds:

Metric	Threshold
Area relative error	$\leq 1.0 \%$
Hausdorff distance	$\leq 0.5 \text{ mm}$

If a simplified contour satisfies both thresholds, we consider it geometrically equivalent to the original.

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### 3. Experimental Results

Program output:

pts	area_err(%)	hausdorff(mm)
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16	2.417	1.199
32	1.314	0.991
48	0.767	0.464
64	0.214	0.367
128	0.234	0.256
256	0.022	0.129

Automatic decision:

Minimal acceptable points = 48  
(area\_err ≤ 1.0%, Hausdorff ≤ 0.5 mm)

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### 4. Analysis

When the number of points is small (16, 32)

- Both the area error and the Hausdorff distance exceed the thresholds
- Significant distortion appears globally and locally

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When the number of points reaches 48

- Area relative error first drops below **1%**
- Hausdorff distance first drops below **0.5 mm**

This indicates strong agreement with the original contour in both global and local geometry.

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When increasing points further (64, 128, 256)

- Geometric error continues to decrease
- The reduction rate becomes smaller
- Clear diminishing returns appear

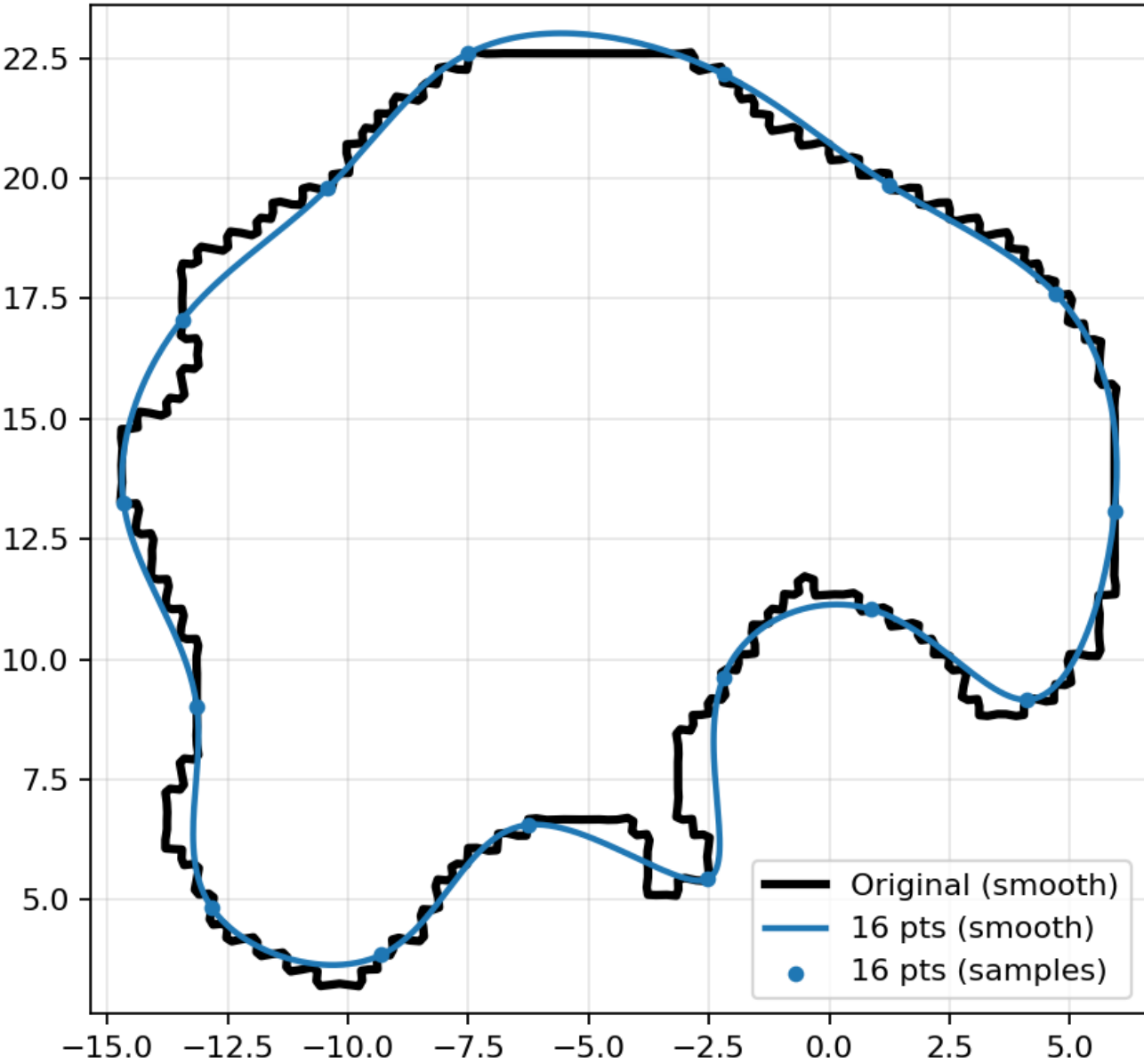
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### 5. Visualization Results

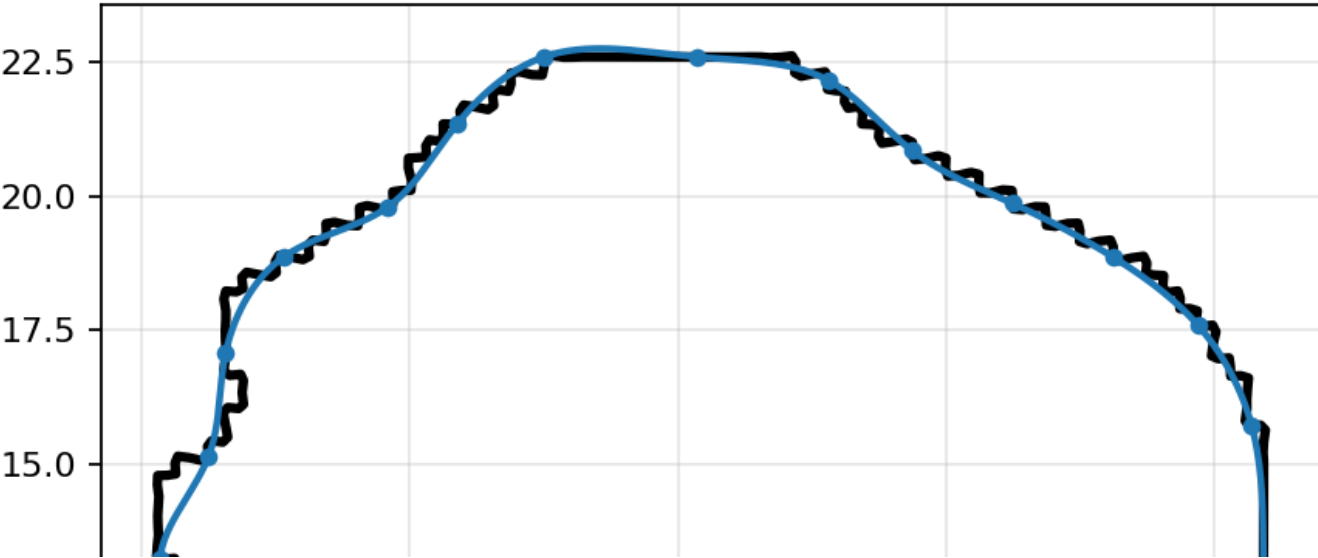
The following figures compare the original contour to simplified contours with different point counts:

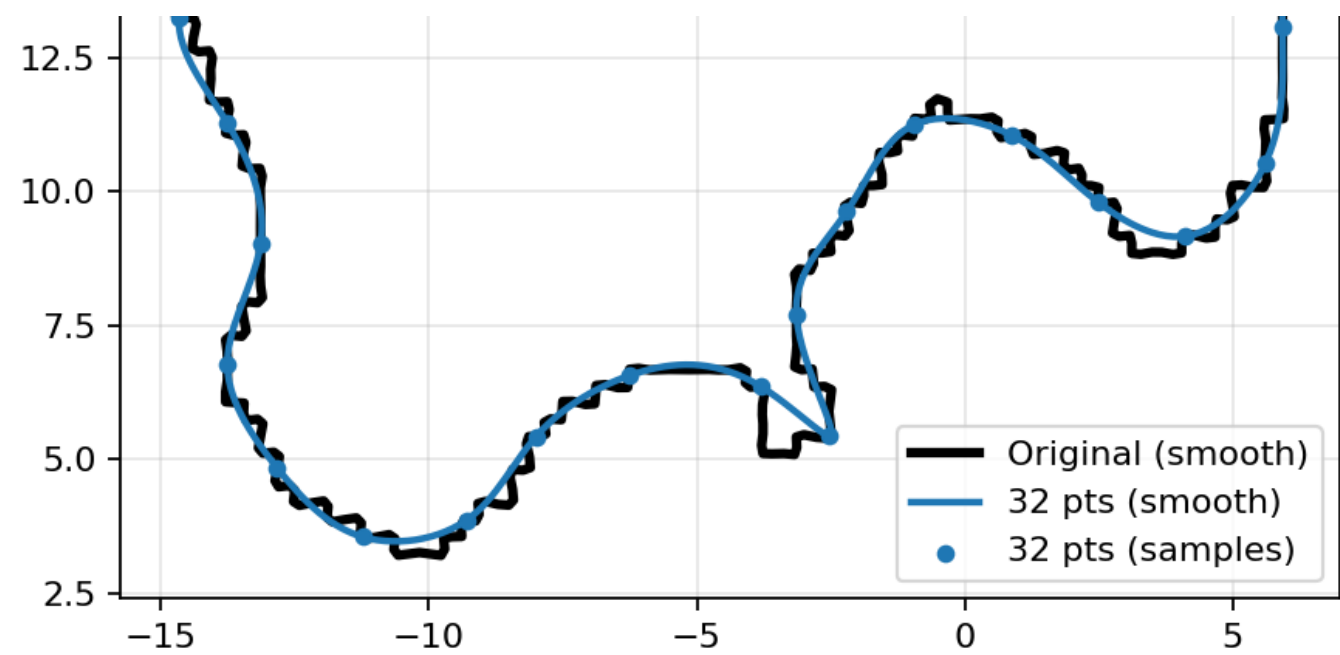


Prostate - 16 pts  
area\_err=2.42%, Hausdorff=1.20 mm

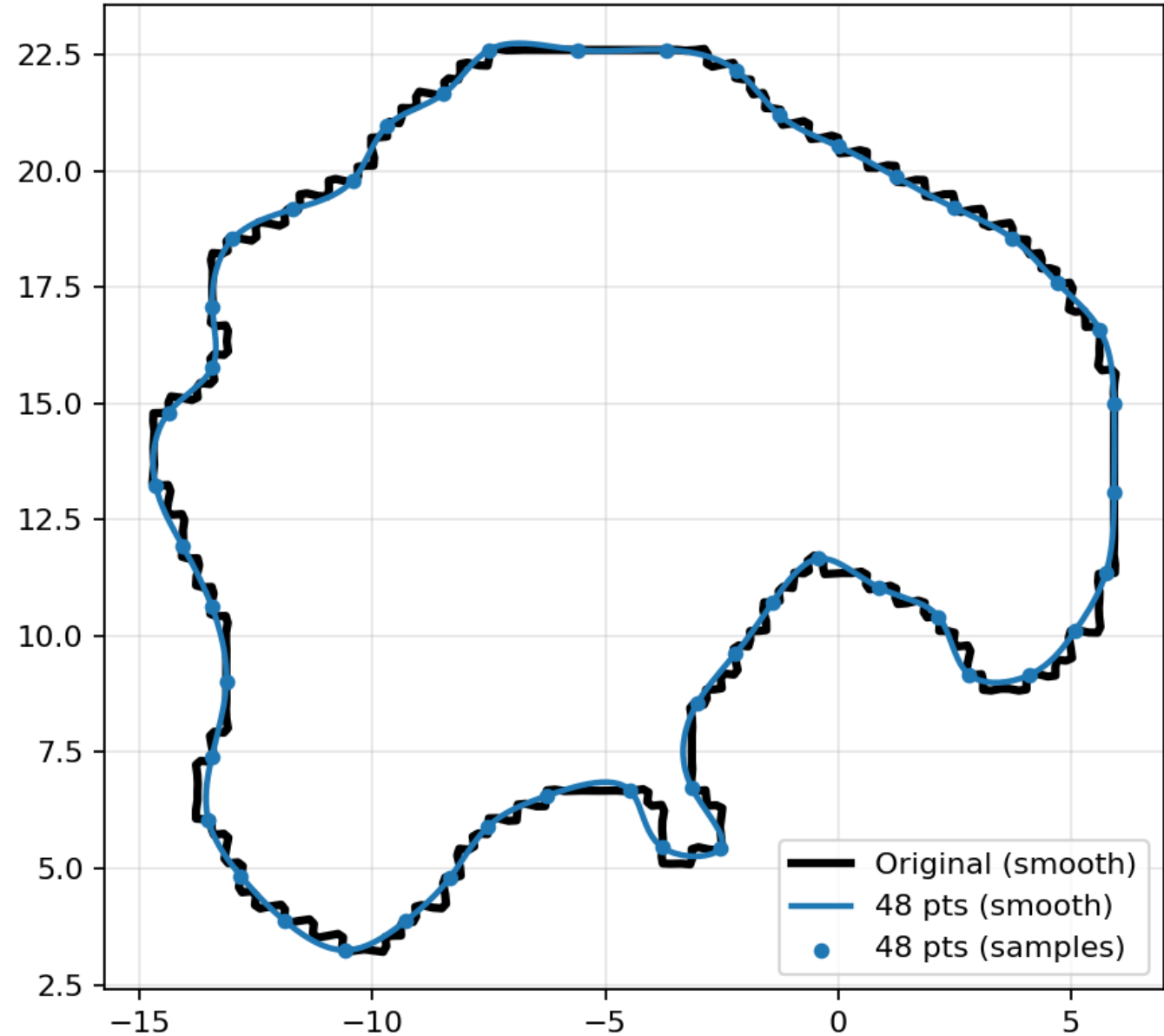


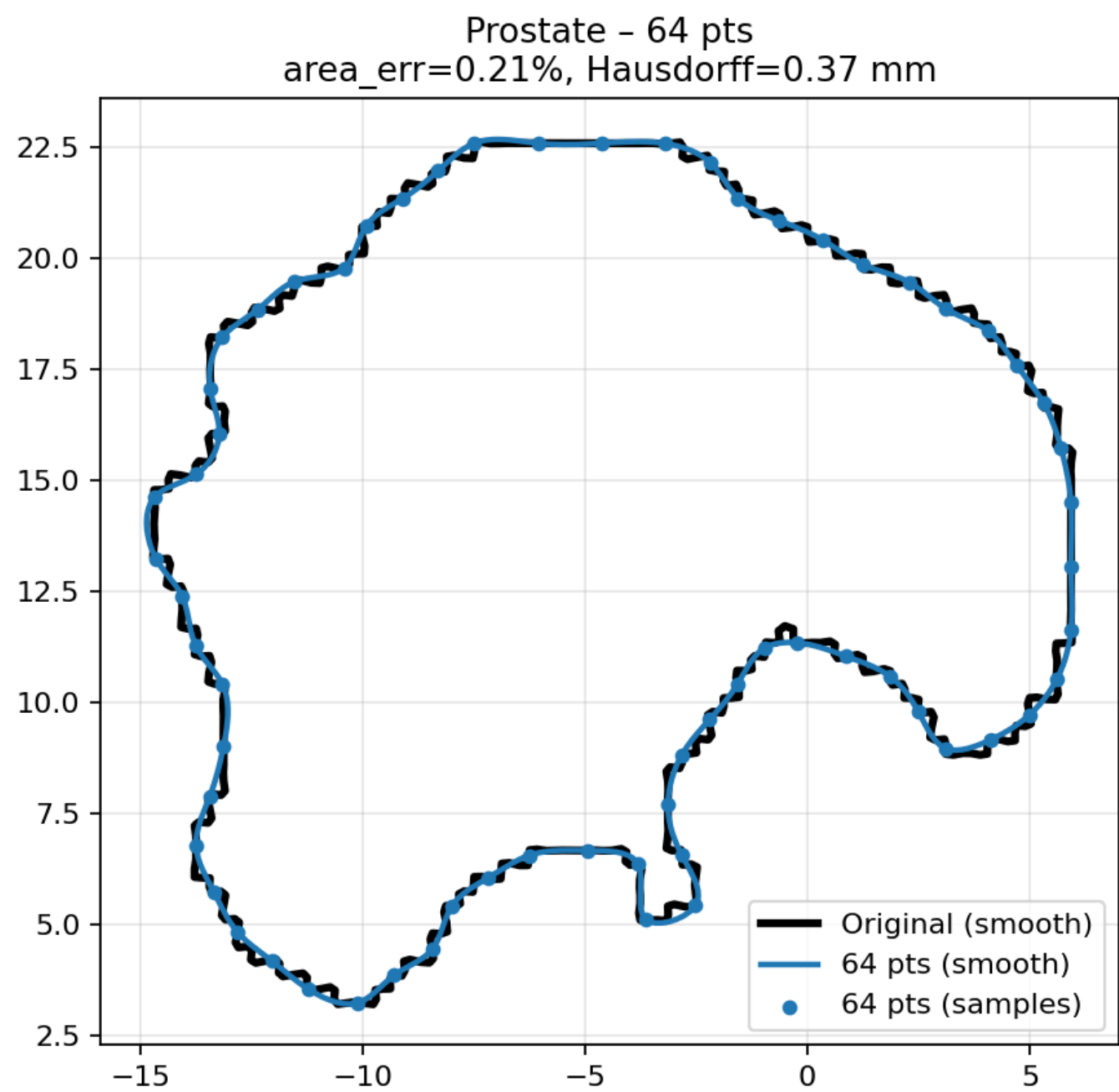
Prostate - 32 pts  
area\_err=1.31%, Hausdorff=0.99 mm



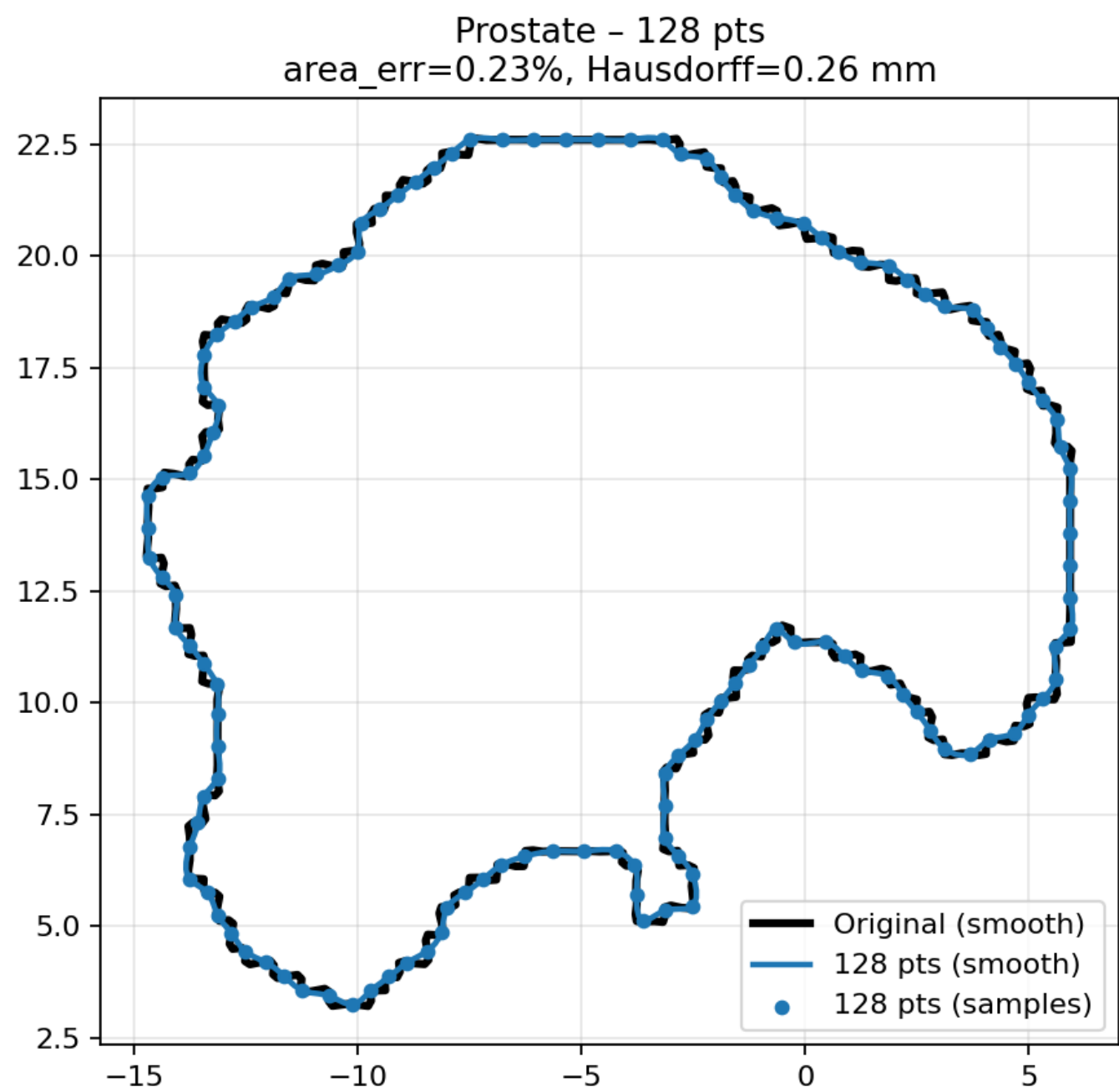


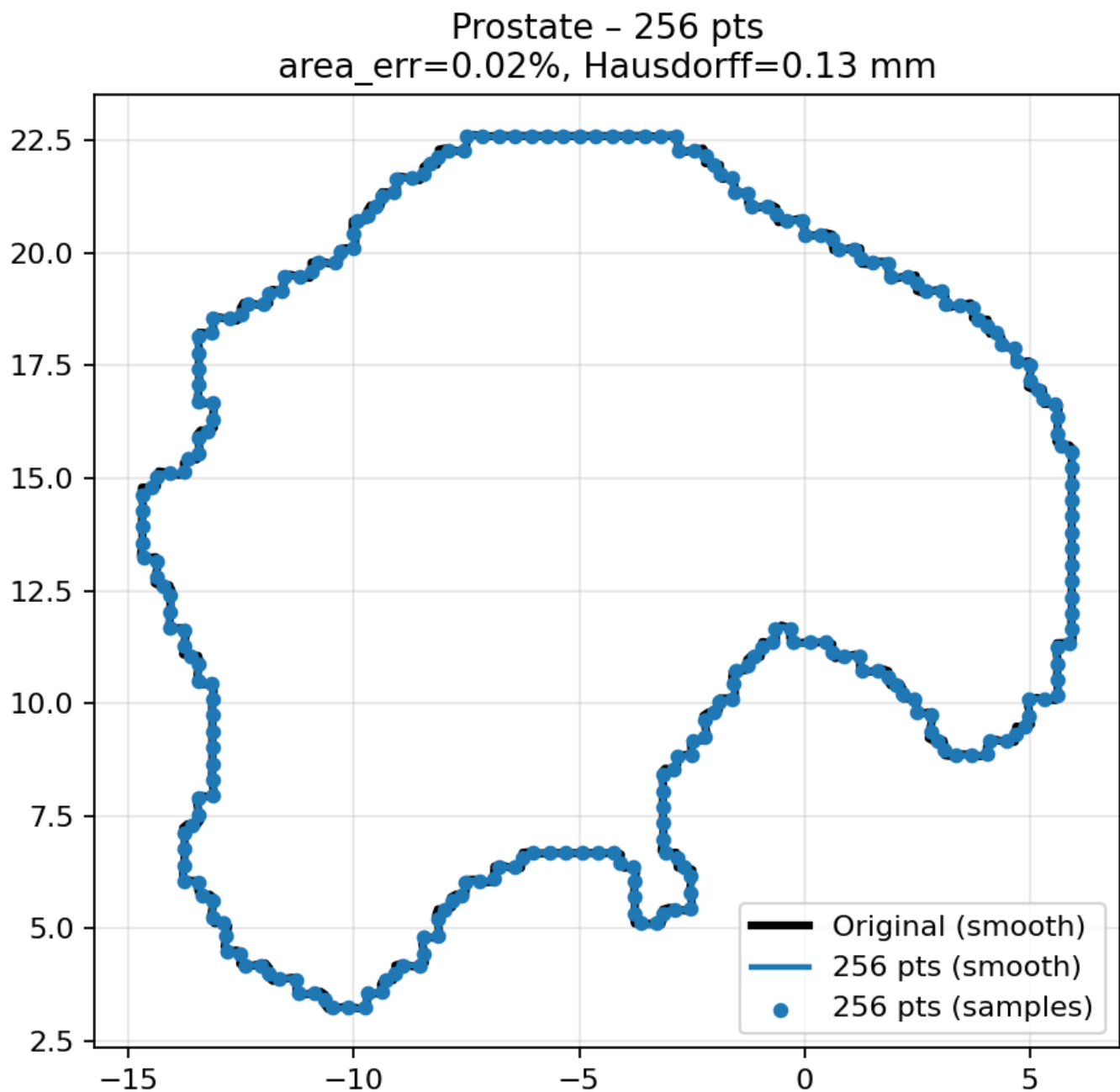
Prostate - 48 pts  
area\_err=0.77%, Hausdorff=0.46 mm









**Notes:**

- All geometric errors are computed on the true polyline points
- The smoothed curve is only for visualization and is not used in error computation

## 6. Conclusion

- Geometric error decreases monotonically as point count increases
- Under the thresholds defined above:

**48 boundary points are the minimal acceptable number to preserve geometric similarity**

# Question 3: Adaptive Sampling Based on Boundary Geometric Complexity

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(Analysis of Boundary Point Density and Contour Reconstruction Quality)

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## 1. Motivation

The previous experiments confirmed:

- The RTSTRUCT stores only organ **boundary points**
- For the prostate contour, **48 uniformly resampled boundary points** can be geometrically equivalent to the original contour in terms of **area error** and **Hausdorff distance**

However, **uniform arc-length resampling** makes a key assumption:

**Geometric complexity is uniform everywhere along the contour**

This assumption is not true for real anatomical shapes. Organ contours typically contain both:

- **high-curvature regions**: sharp turns
- **low-curvature regions**: nearly straight or slowly varying segments

Uniformly distributing points can cause:

- wasted points in smooth regions
- insufficient points in complex regions, causing local shape distortion

Therefore, the core question of this section is:

**Can a non-uniform boundary point distribution reconstruct the contour better under the same total point budget?**

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## 2. Method Overview

### 2.1 Key Idea

We treat the original contour as a **closed boundary curve** and allocate sampling points adaptively according to **local geometric complexity** (e.g., turning strength / curvature):

- higher complexity → **denser points**
- lower complexity → **sparser points**

With a fixed total number of points, the goals are:

- preserve local geometric features as much as possible
  - reduce the maximum boundary deviation (Hausdorff distance)
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### 2.2 Adaptive Sampling Strategy

Implementation steps:

- 1. represent the original boundary with a high-resolution parameterization
- 2. estimate local geometric variation (e.g., turning strength)
- 3. build a non-uniform cumulative distribution function along the curve
- 4. sample uniformly in that distribution to obtain the target number of points

In essence:

$$\text{\text{point density}} \propto \text{\text{local geometric complexity}}$$

### 3. Notes on Smoothing for Visualization (Technical Details)

To avoid jagged edges or unnatural straight-line connections after simplification, we apply smoothing on the adaptively sampled points.

Two smoothing approaches were tried:

- global spline smoothing
- local Chaikin subdivision smoothing

Important note:

**Smoothing is not the core focus here; it is only used to visualize the effect of point distribution on reconstruction quality.**

### 4. Experimental Results

With the same adaptive sampling point counts, we compute:

- area relative error
- Hausdorff distance

#### 4.1 Results with Global Spline Smoothing

pts	area_err (%)	Hausdorff (mm)
16	4.020	4.063
32	0.912	3.112
48	0.501	2.534
64	0.372	2.500
128	0.026	2.202
256	0.027	2.154

#### 4.2 Results with Local Chaikin Smoothing

pts	area_err (%)	Hausdorff (mm)
16	3.546	3.797
32	1.163	2.825
48	0.268	2.401
64	0.531	2.193
128	0.141	1.508
256	0.043	0.987

## 5. Analysis: Point Distribution Matters More Than Curve Form

### 5.1 Main Observations

Despite using different smoothing methods, the overall trend is consistent:

- at the same point count,
- adaptive sampling achieves:
  - consistently low area error
  - steadily decreasing Hausdorff distance as the point count increases

### 5.2 Why Hausdorff Improves

Hausdorff distance measures:

the **maximum local deviation** between two contours

With uniform arc-length sampling:

- low-curvature regions are oversampled
- high-curvature regions are undersampled
- causing local boundary expansion/contraction

With adaptive sampling:

- high-curvature regions are sampled densely
- the maximum boundary deviation is better constrained
- leading to a lower Hausdorff distance

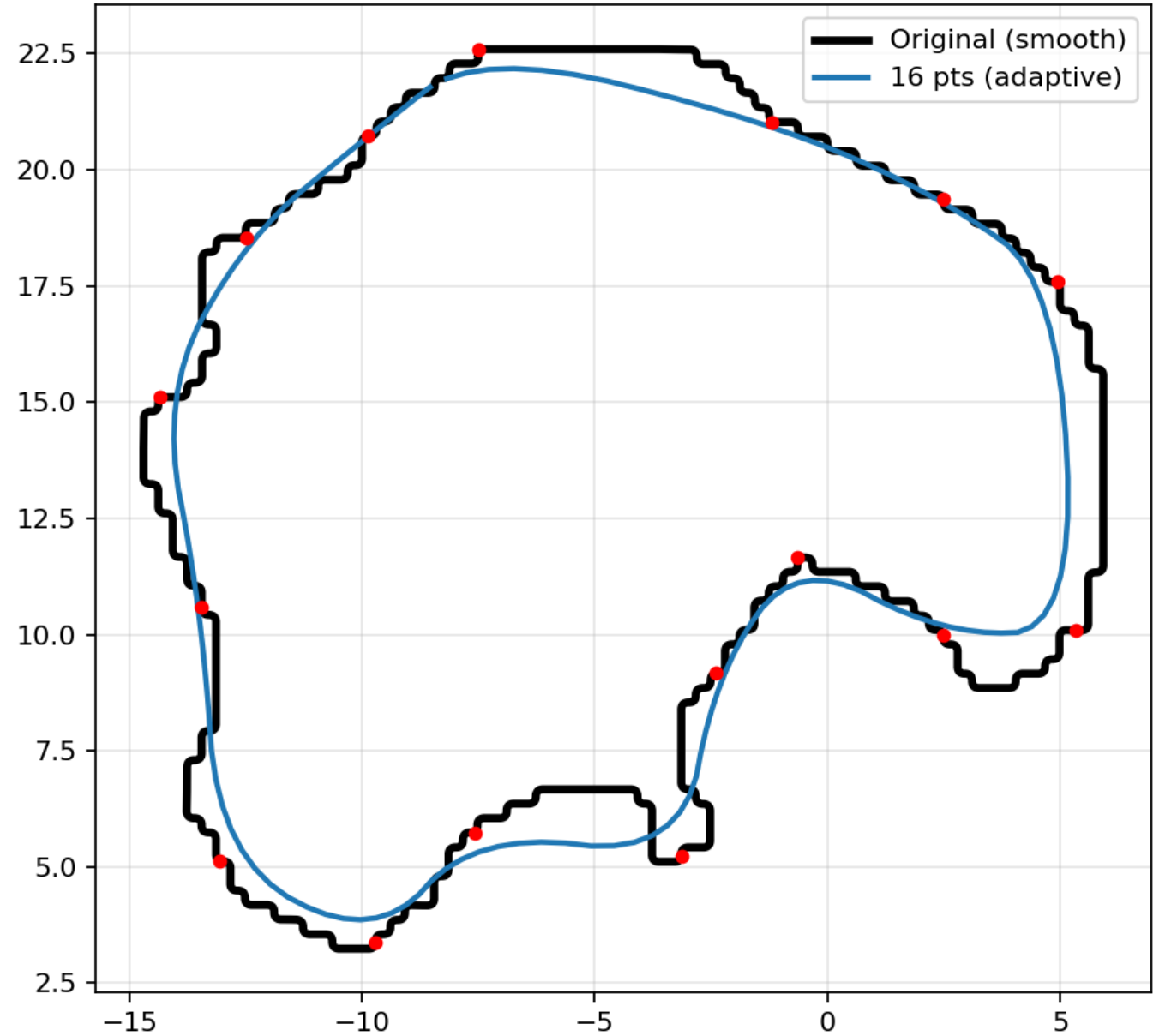
## 6. Visualization

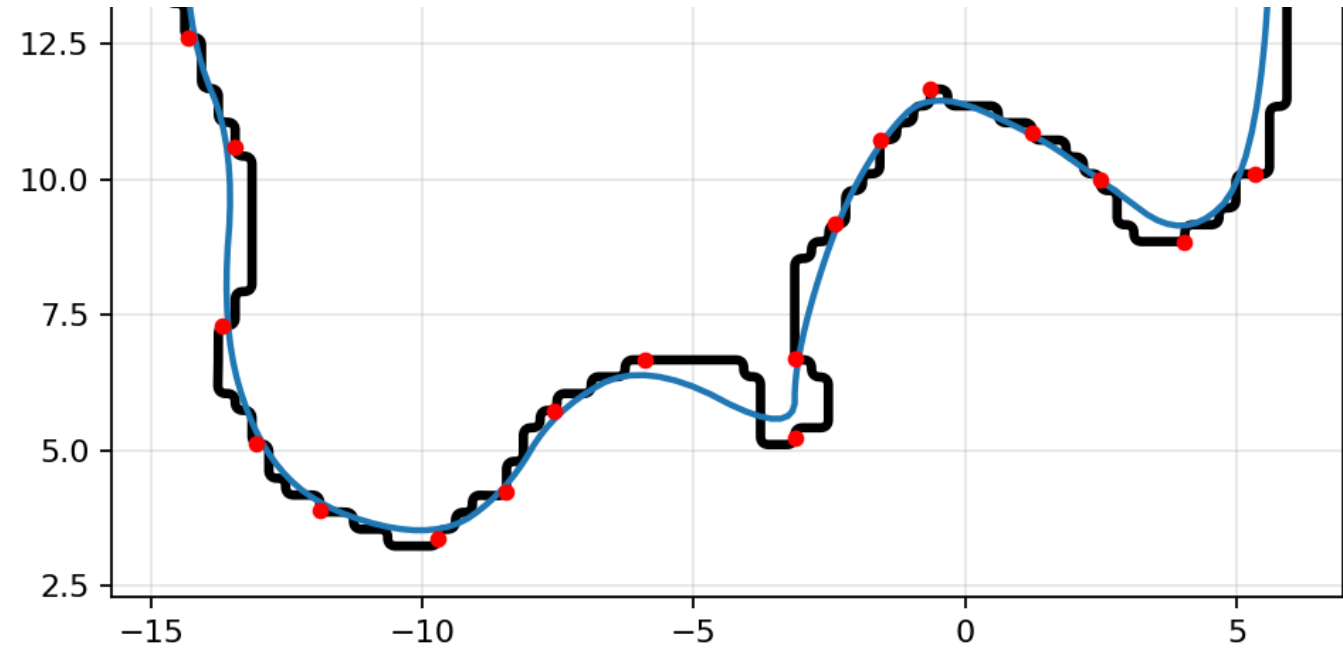
The following figures show point distribution under adaptive sampling at different point counts:

- high-turn regions: visibly denser points
- straight regions: visibly sparser points
- overall contour shape: highly consistent with the original boundary

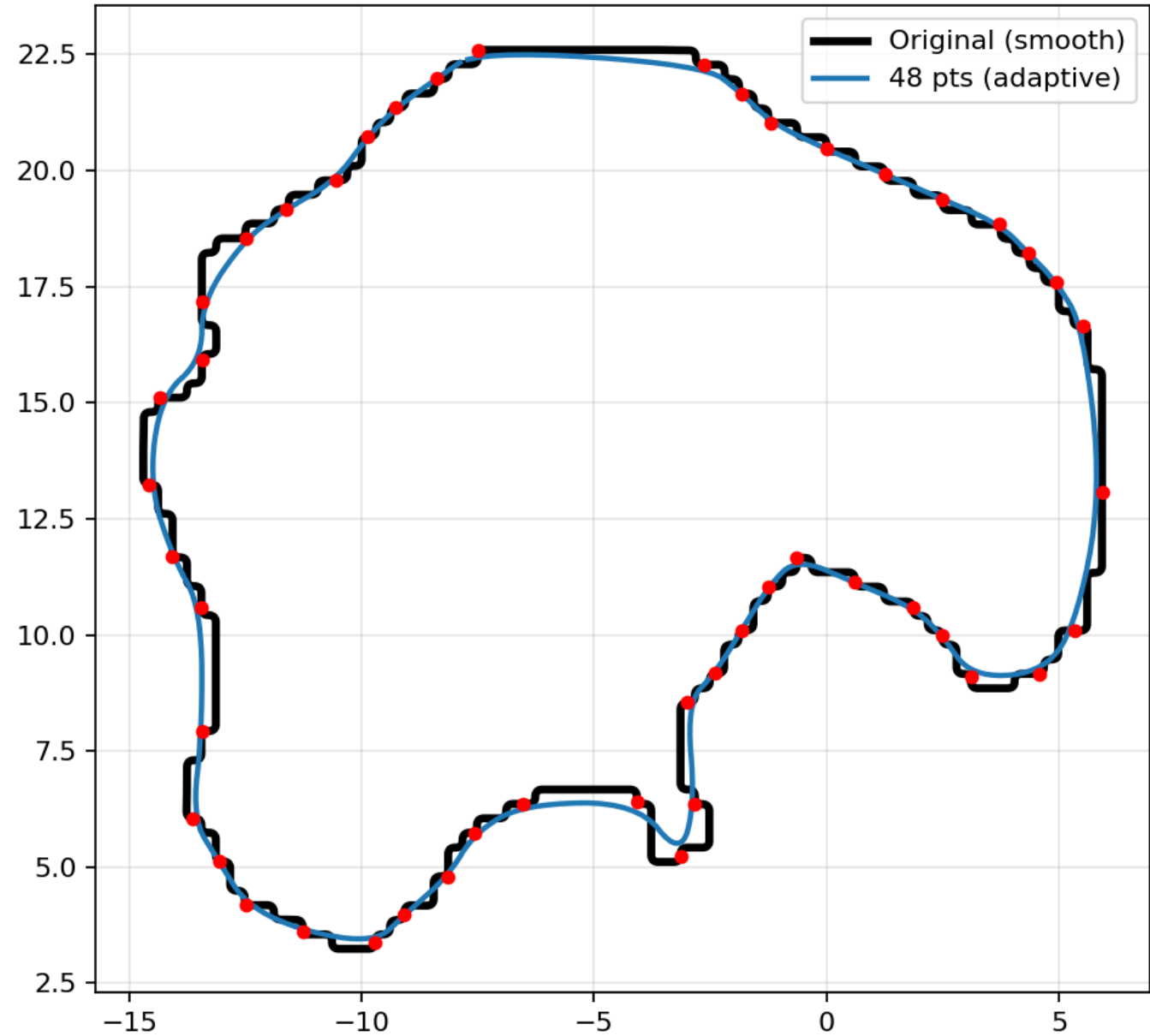


16 pts  
Area err=3.55%, Hausdorff=3.80 mm

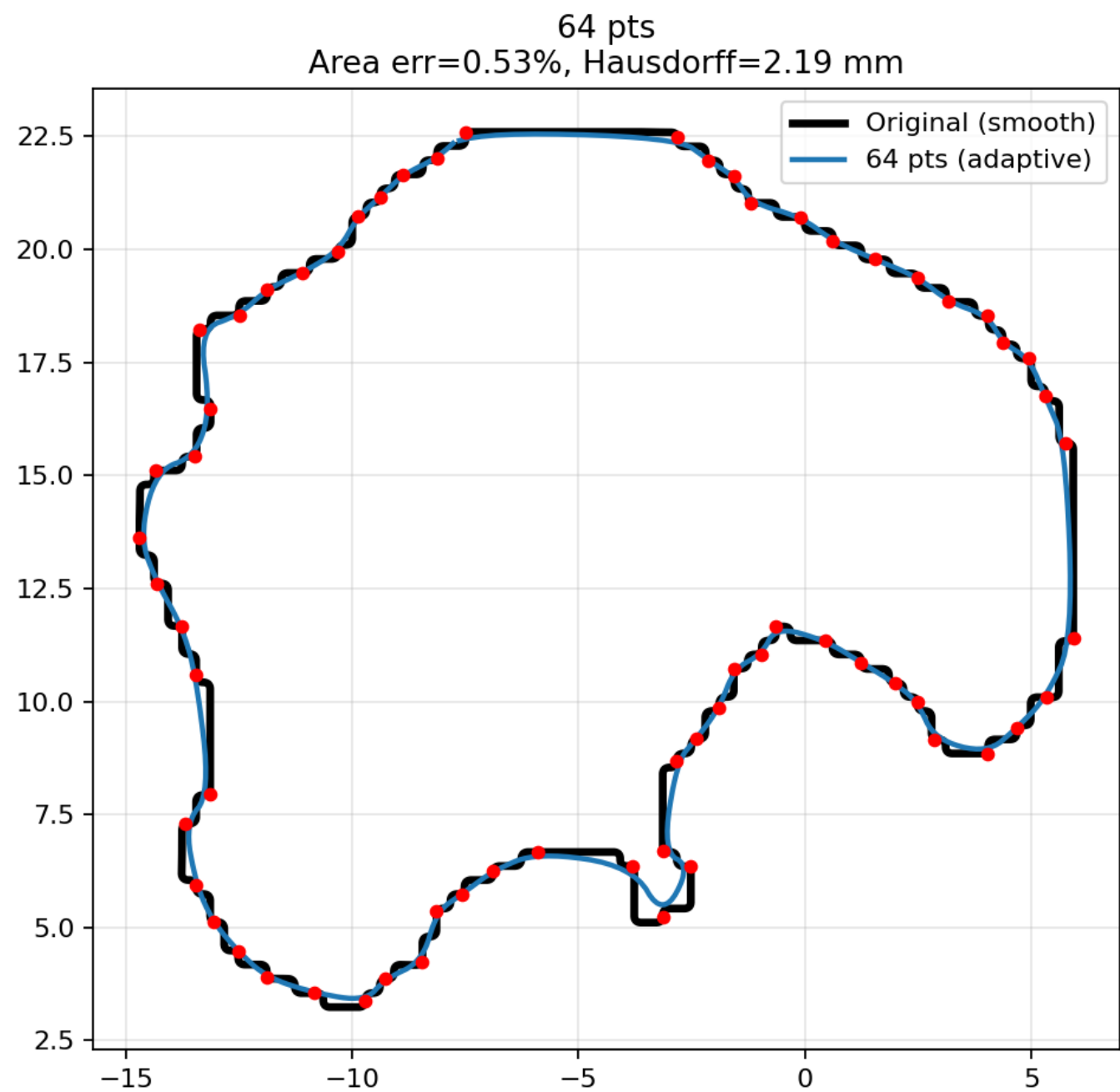


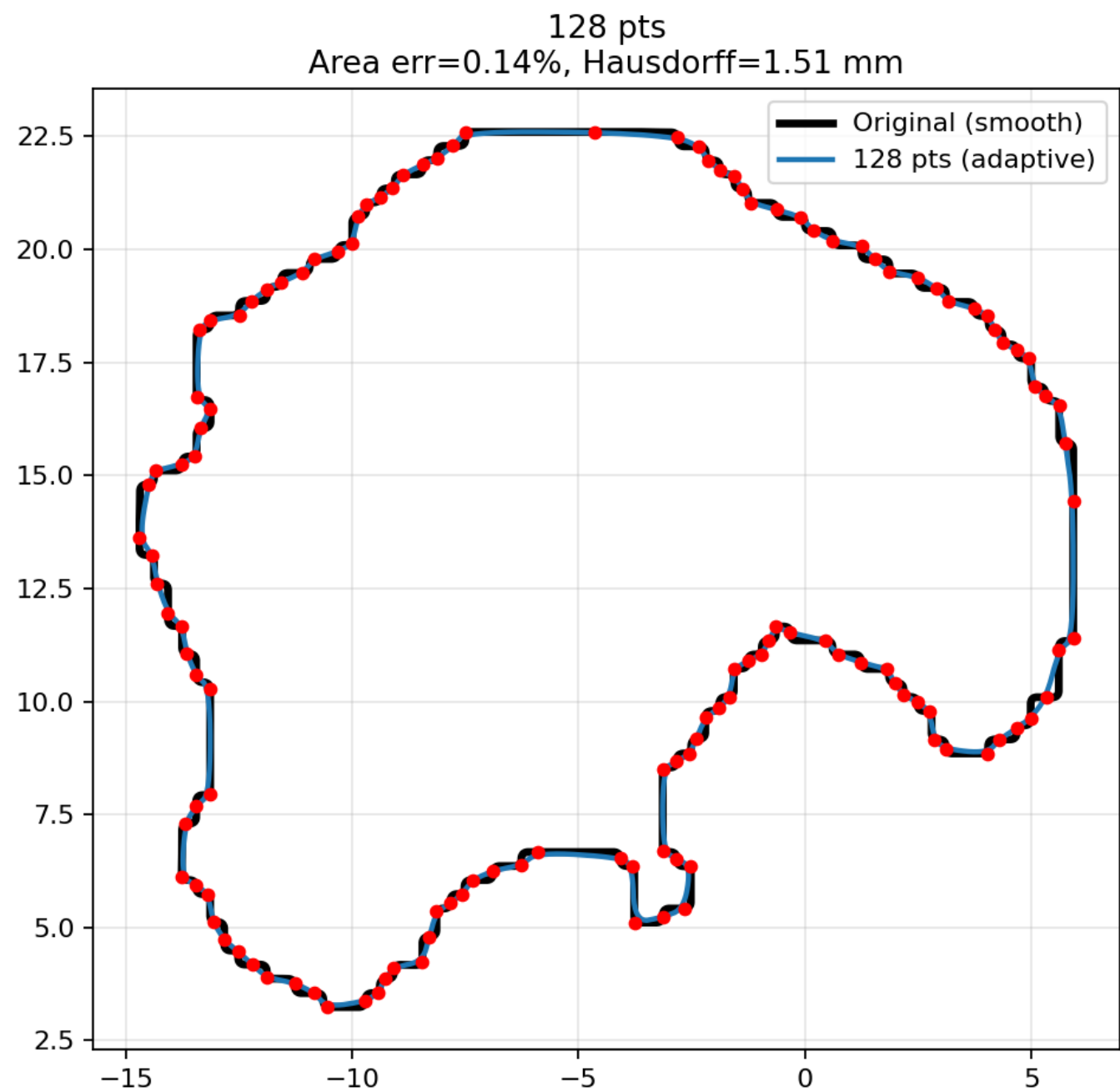


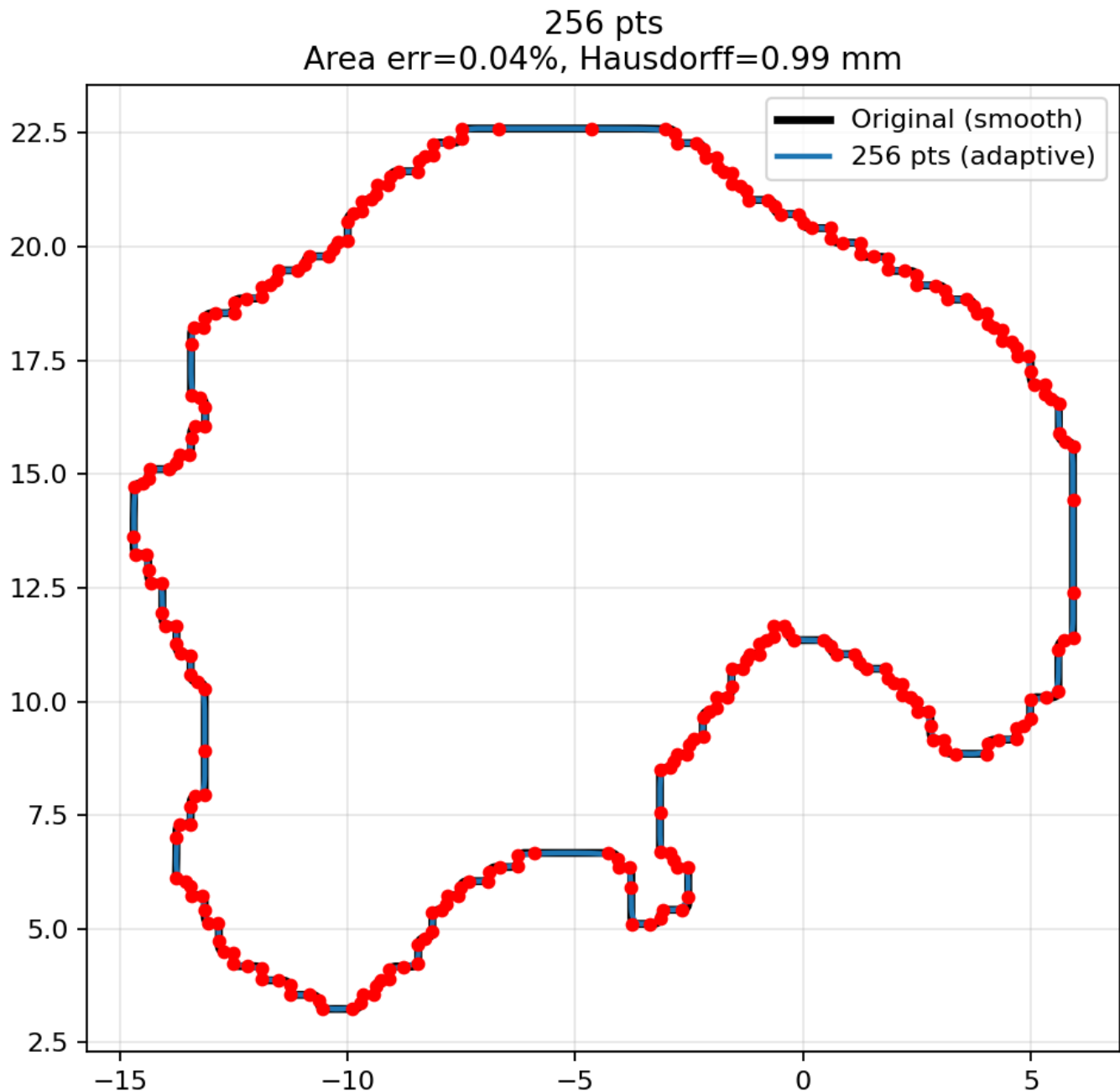
48 pts  
Area err=0.27%, Hausdorff=2.40 mm











## 7. Conclusion

- RTSTRUCT boundary points show clear non-uniform geometric complexity
- Adaptive sampling based on geometric complexity:
  - outperforms uniform sampling at the same point count
  - reduces the maximum local geometric error (Hausdorff distance)
- Smoothing primarily affects visualization, not the core geometric consistency

## Question 4: Comparison Across Slices With Different Areas (small / medium / large)

This section complements the question: whether simplification behaves consistently across slices with different contour areas. Because the prostate cross-sectional area varies significantly across z-slices (small near the apex/base and larger in the middle), the same point budget may yield different error behavior.

## 1. Slice Selection (Consistent With Code)

Using `select_examples_by_area()` in `src/area_diff.py`:

- compute contour area for each slice and sort slices by `area`
- pick representative slices by area quantiles:
  - small: 10% quantile ( $q=0.1$ )
  - medium: 60% quantile ( $q=0.6$ )
  - large: 80% quantile ( $q=0.8$ )

This avoids bias from selecting only the maximum-area slice and better reflects the true distribution.

## 2. Metrics (Consistent With Code)

- Area relative error (%):

$$\text{AreaErr}(\%) = \frac{|A_{\text{simp}} - A_{\text{orig}}|}{A_{\text{orig}}} \times 100\%$$

- Hausdorff distance (mm): we use a **point-to-segment** Hausdorff distance to avoid inflated results caused by different sampling densities.

Note: the black/colored curves use Chaikin smoothing only for visualization; error metrics are computed on the simplified polyline points.

## 3. Results (N11780398, ROI=Prostate)

The script reports errors for `POINT_LIST = [16, 32, 48, 64, 128, 256]` for each representative slice.

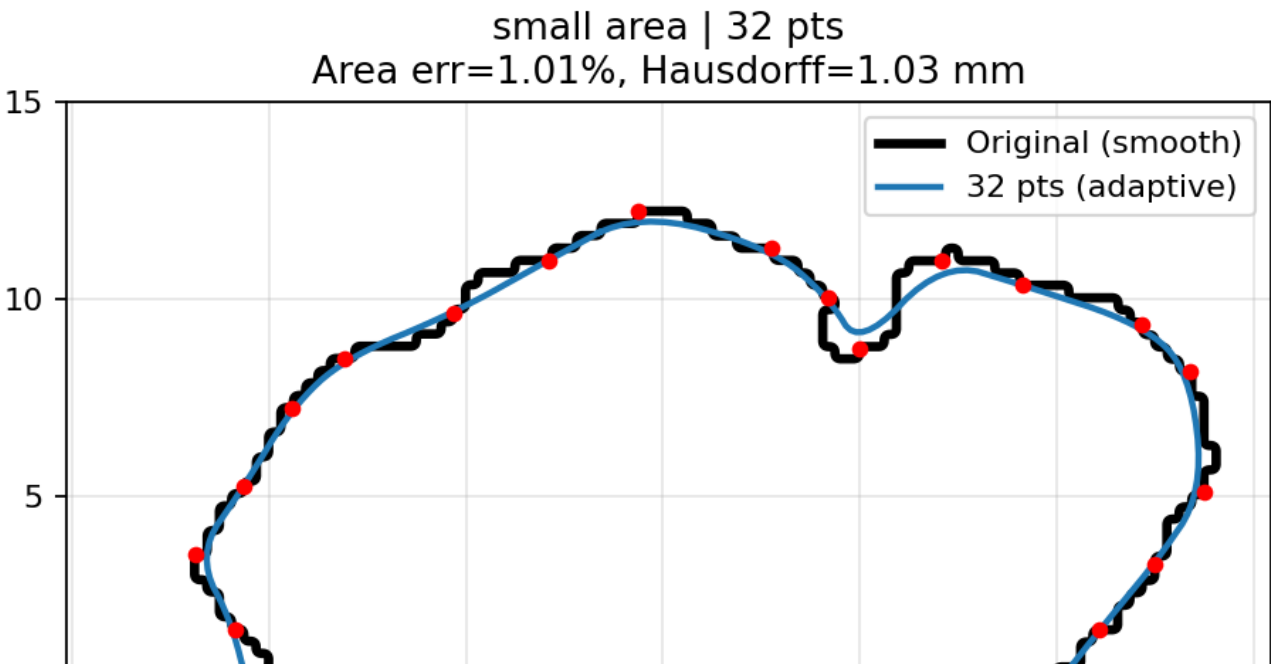
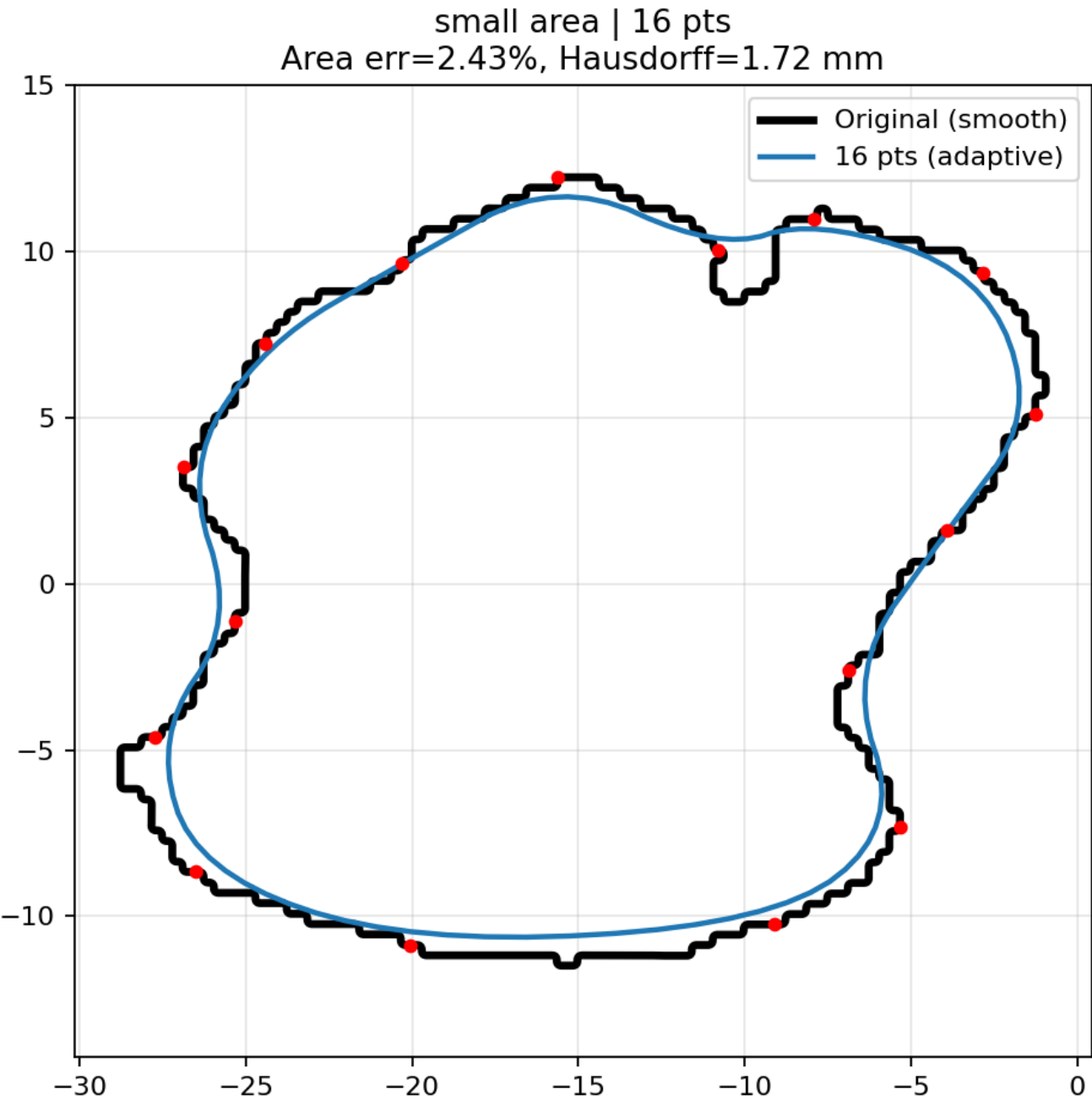
### 3.1 small example

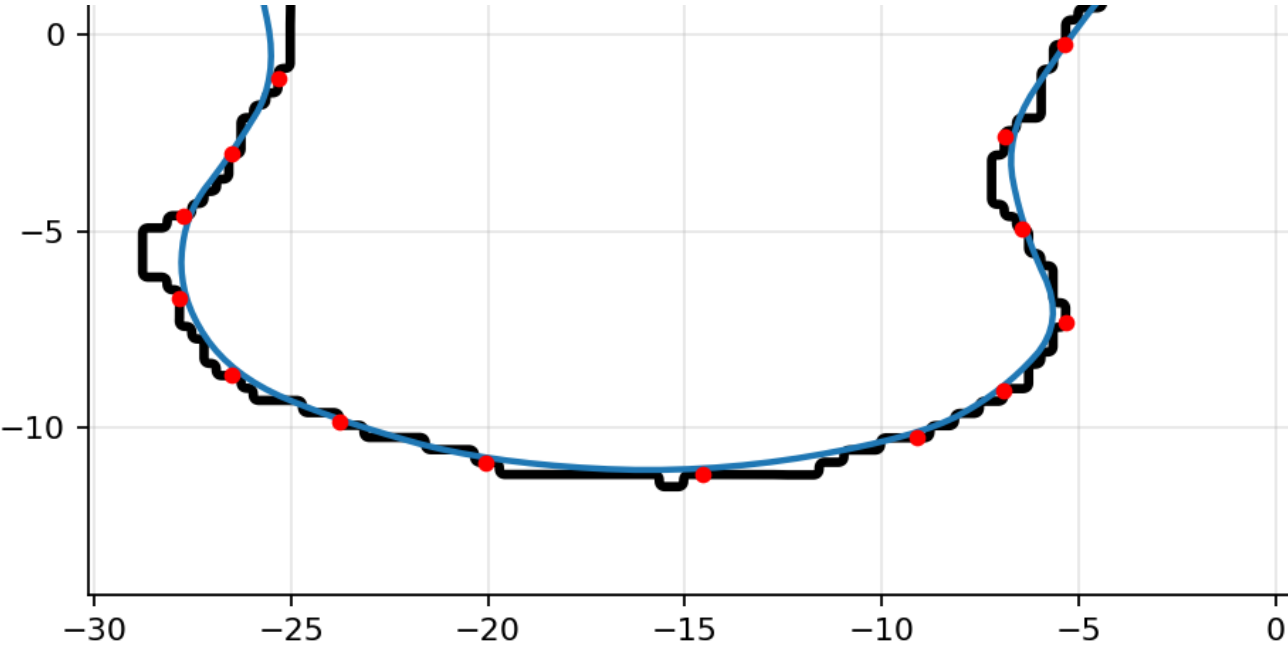
Representative small slice: `area ≈ 453.42, z ≈ 0.66`

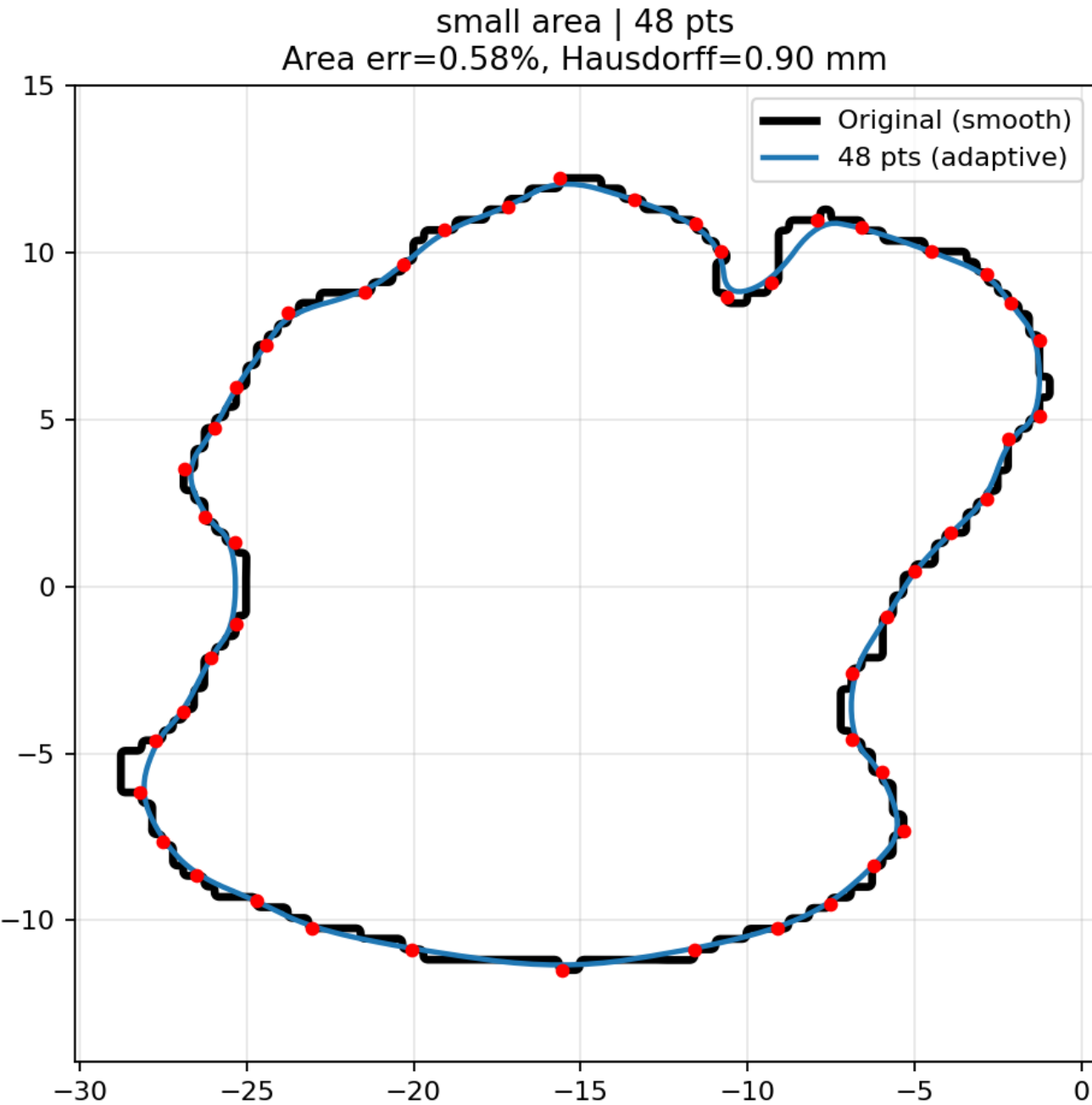
pts	area_err (%)	Hausdorff (mm)
16	2.428	1.724
32	1.011	1.027
48	0.581	0.902
64	0.376	0.691
128	0.038	0.449
256	0.011	0.191

Visualization:

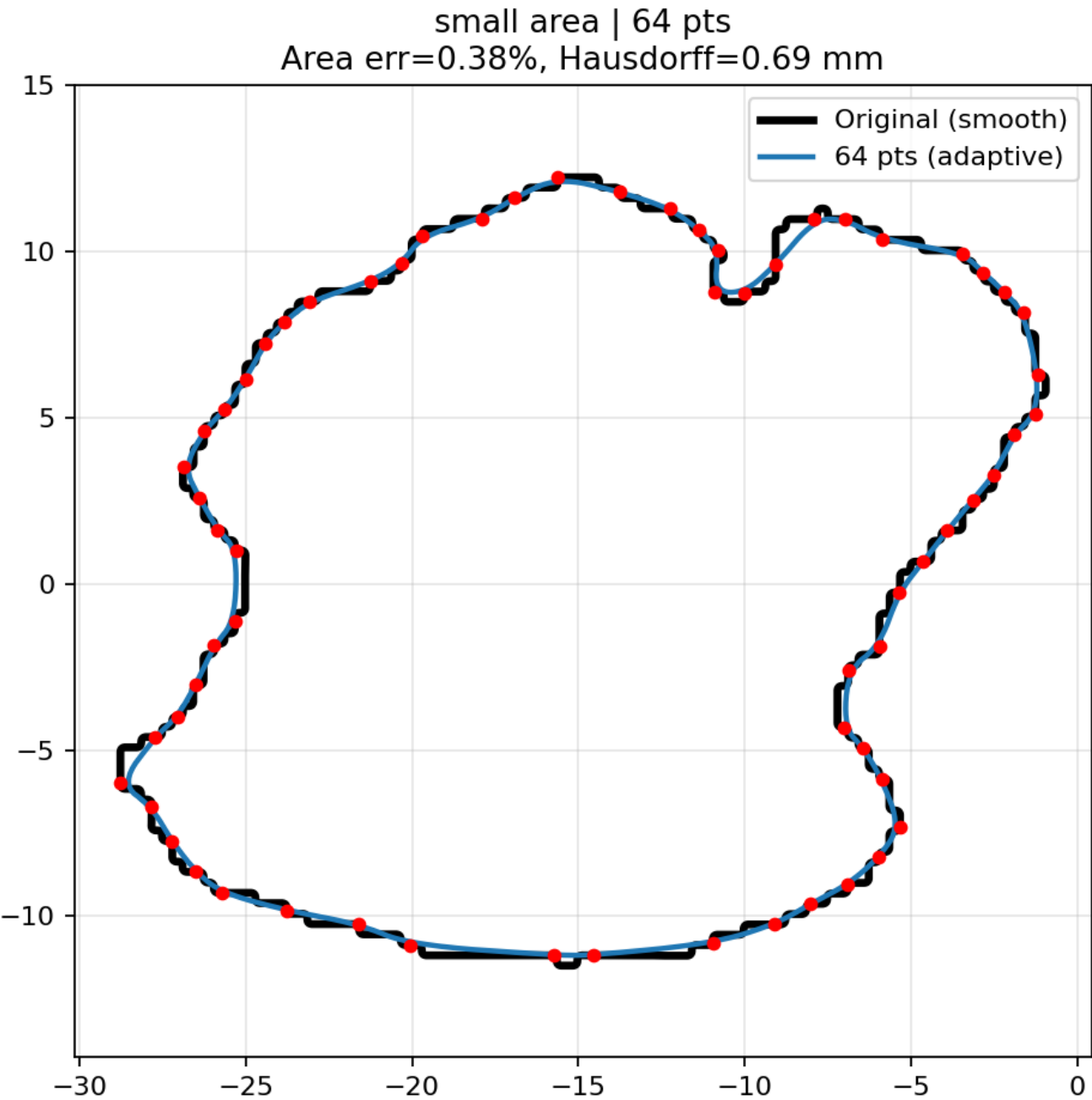












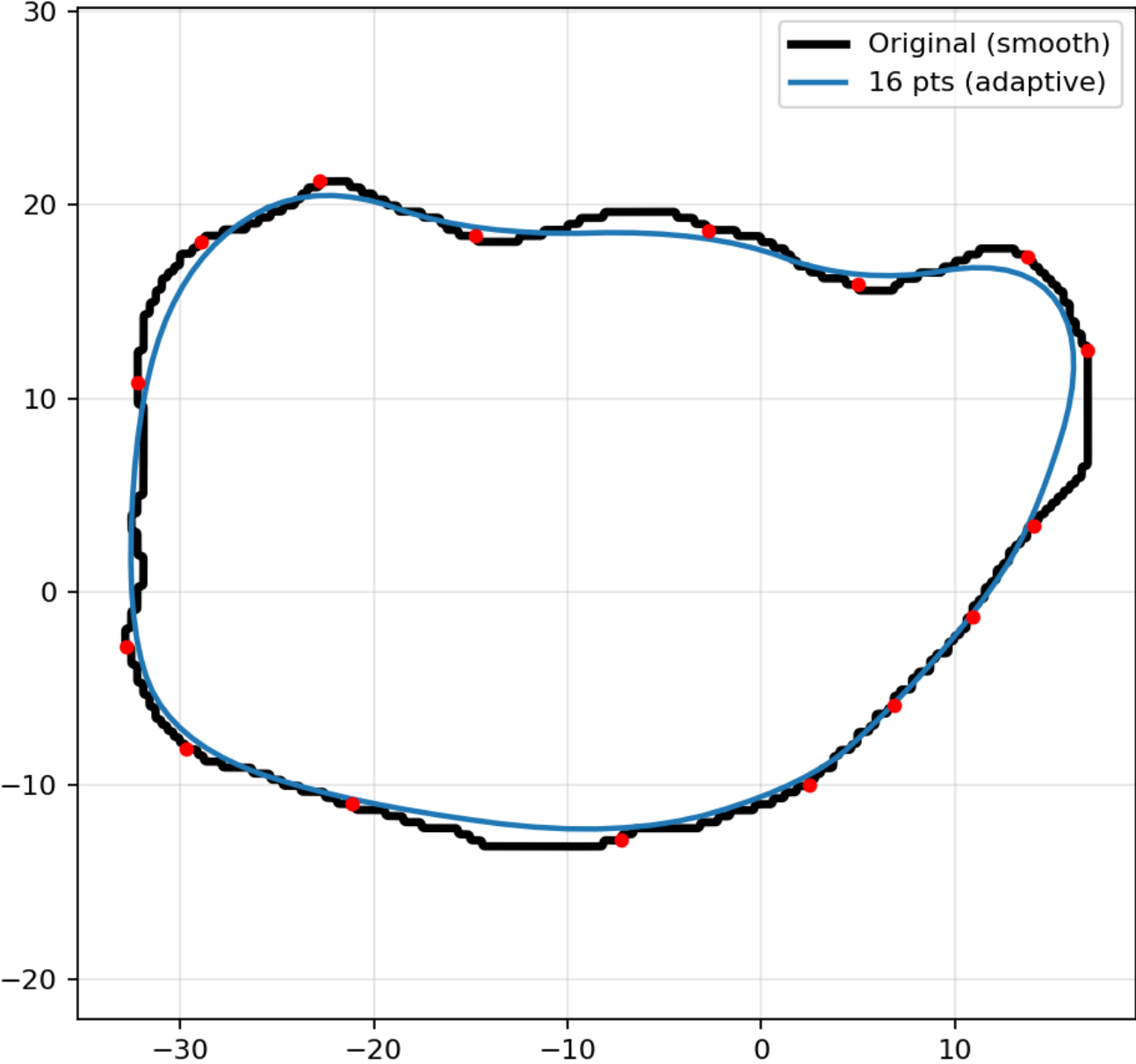
3.2 medium example

Representative medium slice: area  $\approx 1303.78$ ,  $z \approx -5.02$

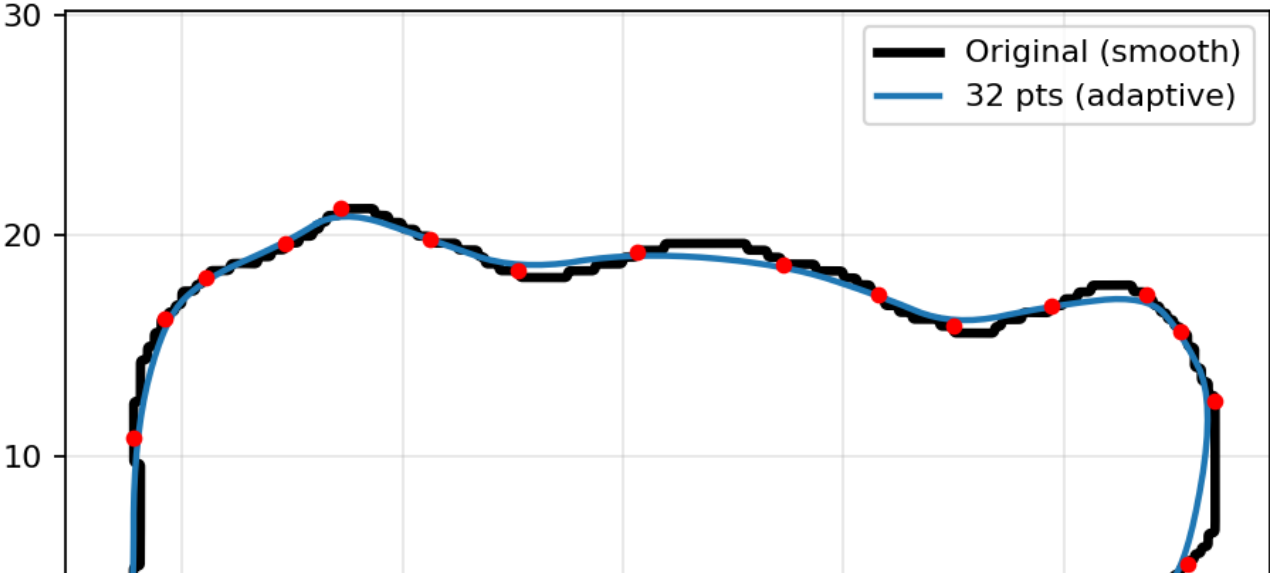
pts	area_err (%)	Hausdorff (mm)
16	2.203	1.766
32	0.695	0.996
48	0.431	0.566
64	0.196	0.497
128	0.068	0.398
256	0.009	0.254

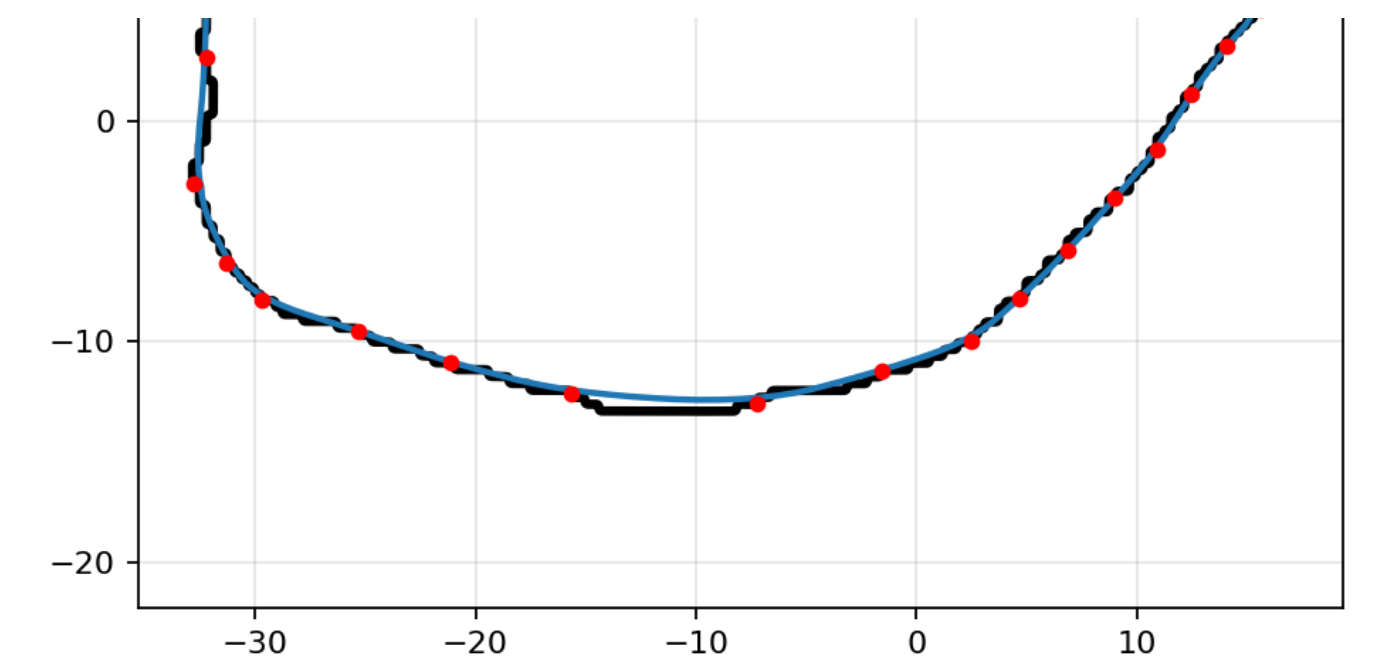
Visualization:

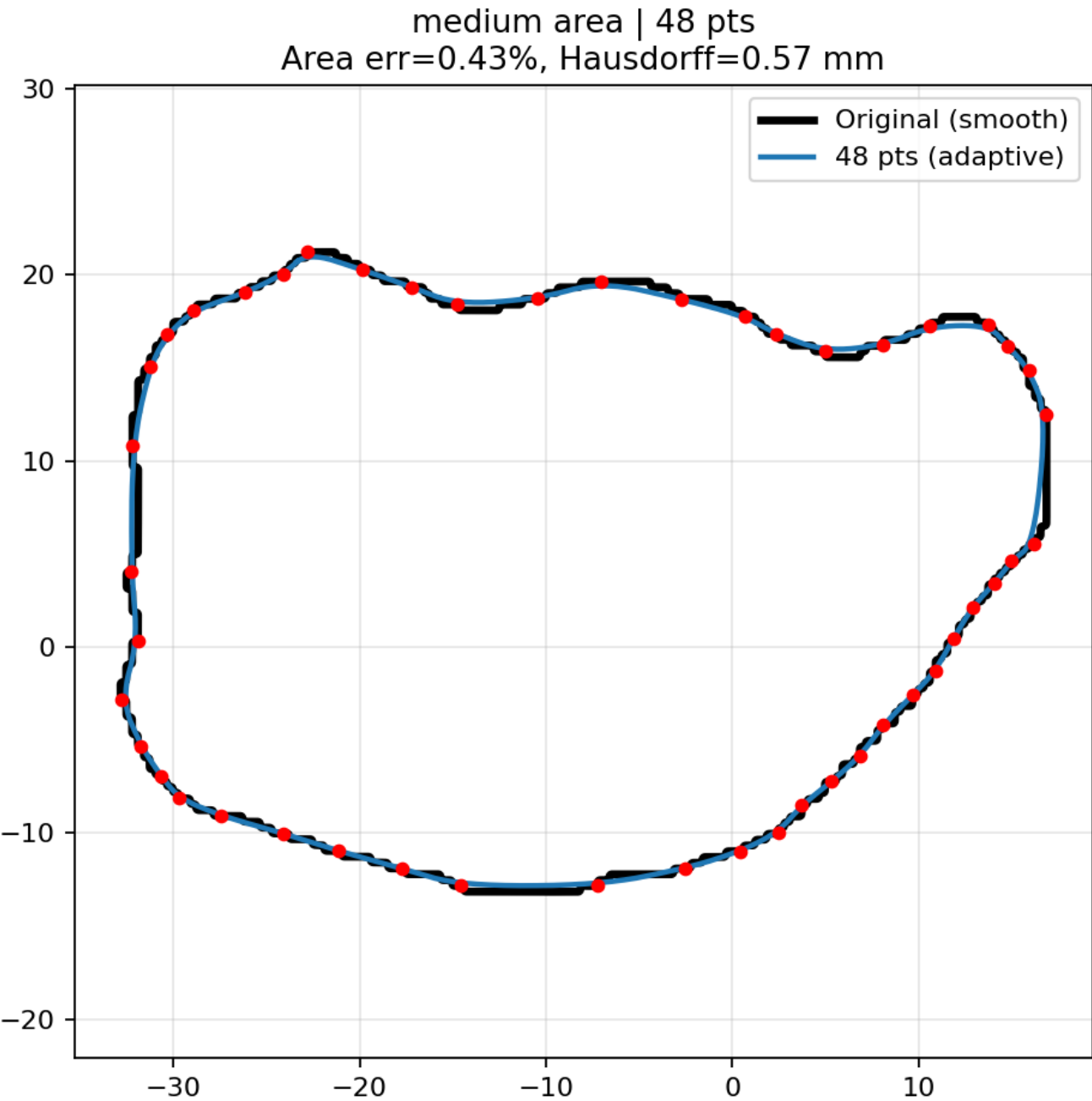
medium area | 16 pts  
Area err=2.20%, Hausdorff=1.77 mm

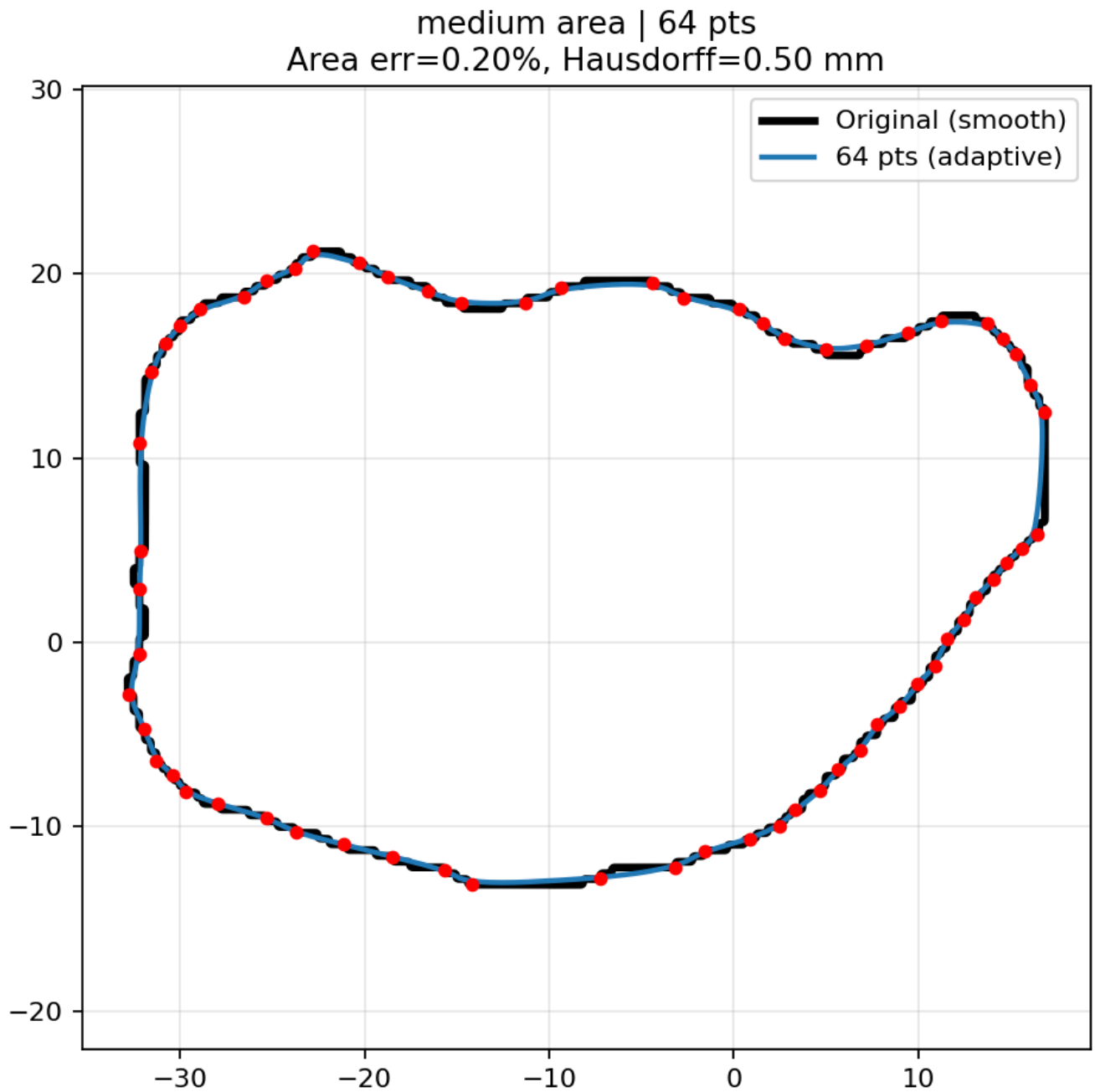


medium area | 32 pts  
Area err=0.70%, Hausdorff=1.00 mm









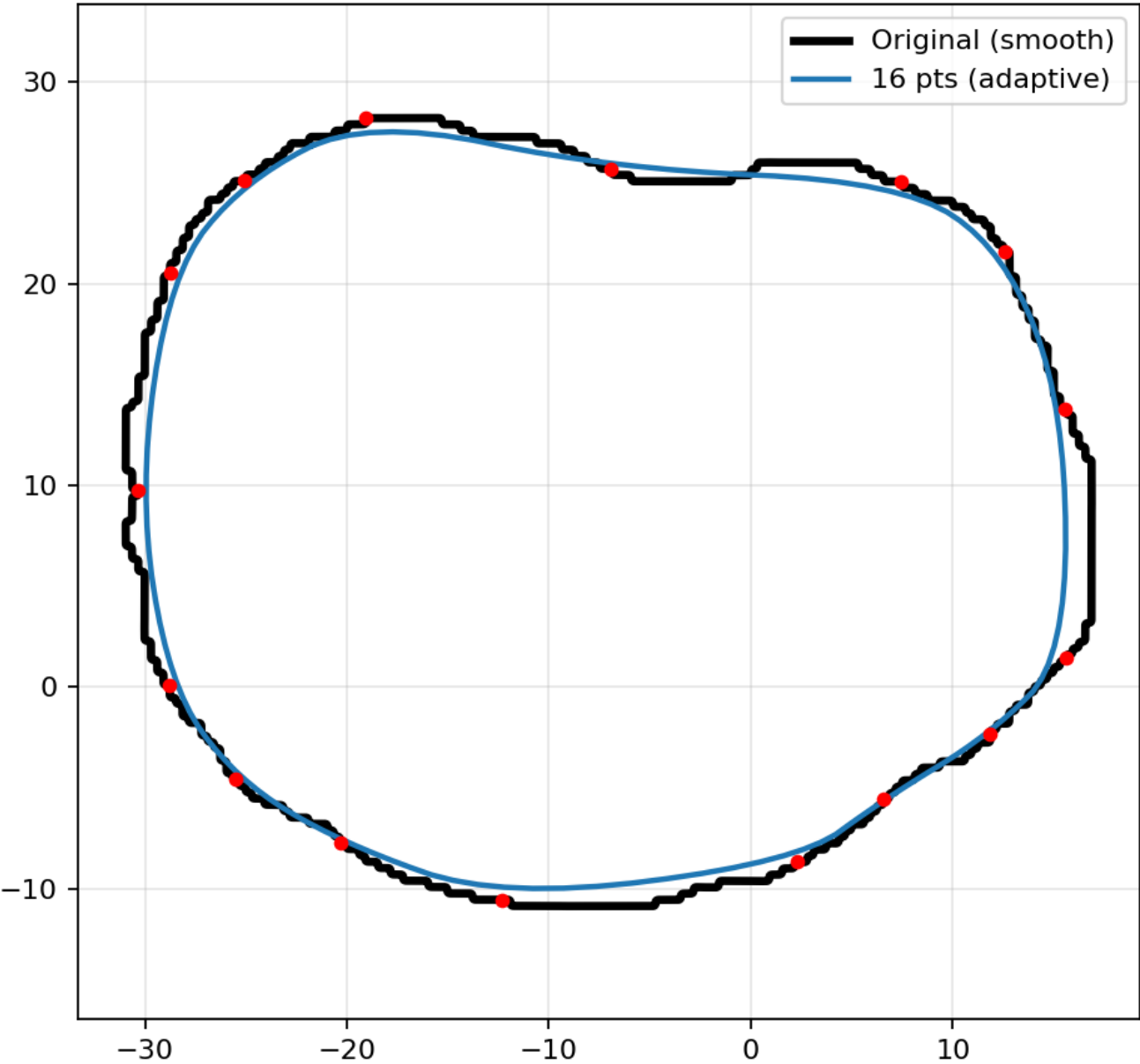
3.3 large example

Representative large slice: area  $\approx 1483.18$ ,  $z \approx -16.77$

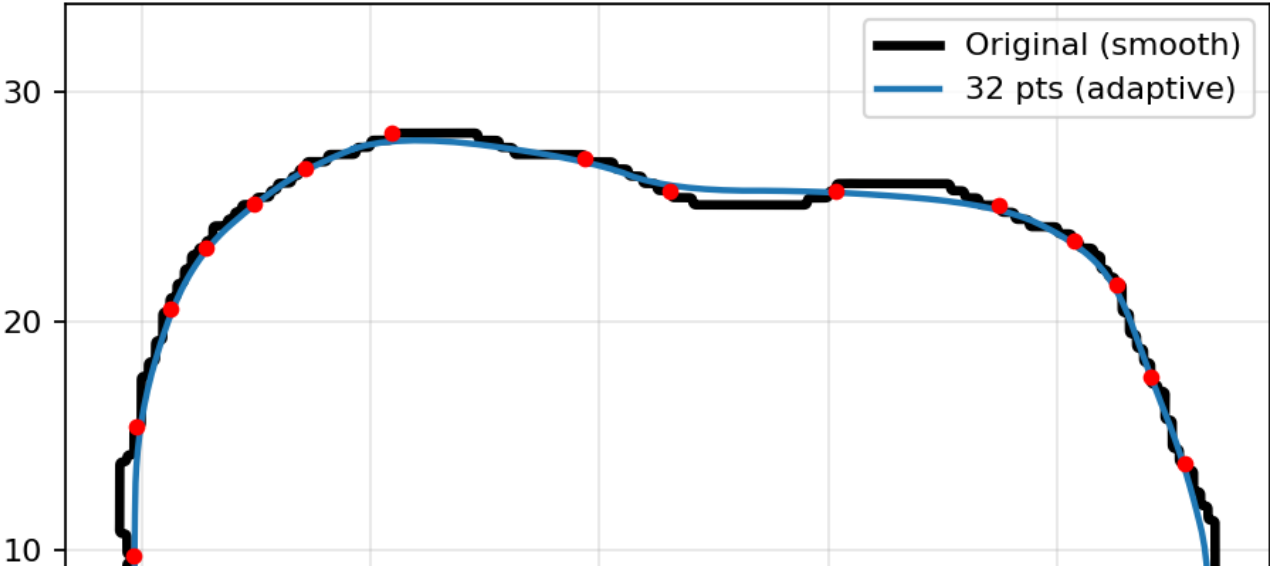
pts	area_err (%)	Hausdorff (mm)
16	3.551	1.310
32	1.401	0.927
48	0.464	0.556
64	0.428	0.482
128	0.133	0.368
256	0.029	0.252

Visualization:

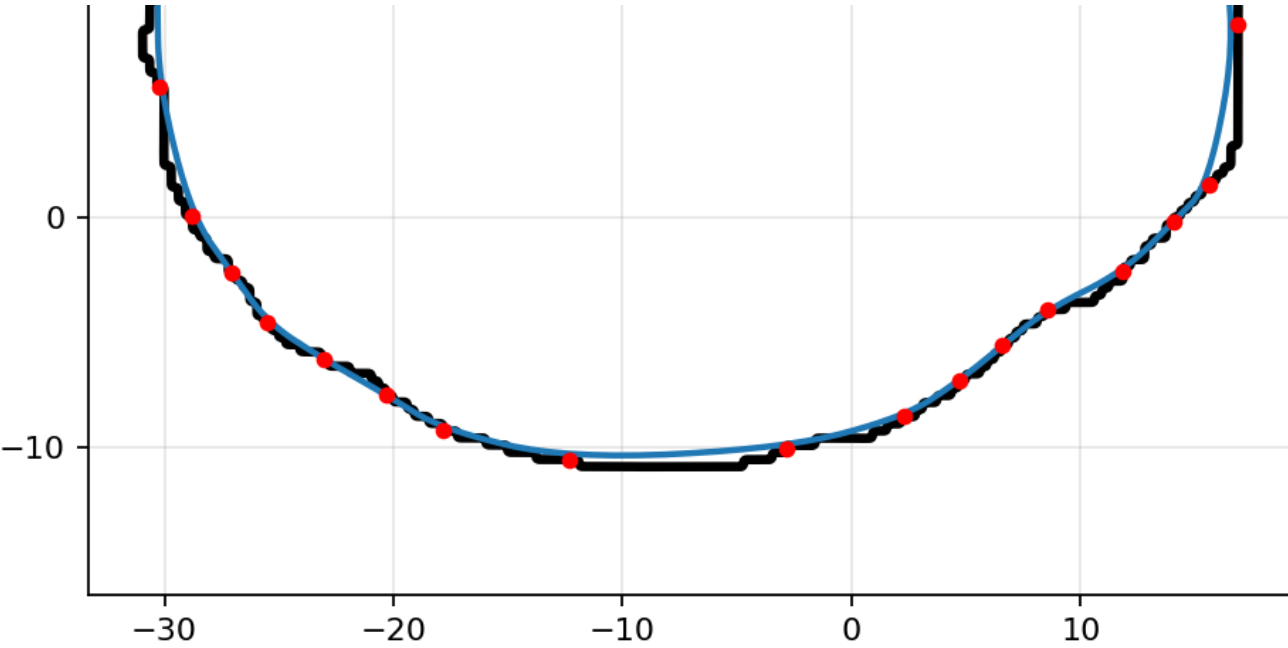
large area | 16 pts  
Area err=3.55%, Hausdorff=1.31 mm



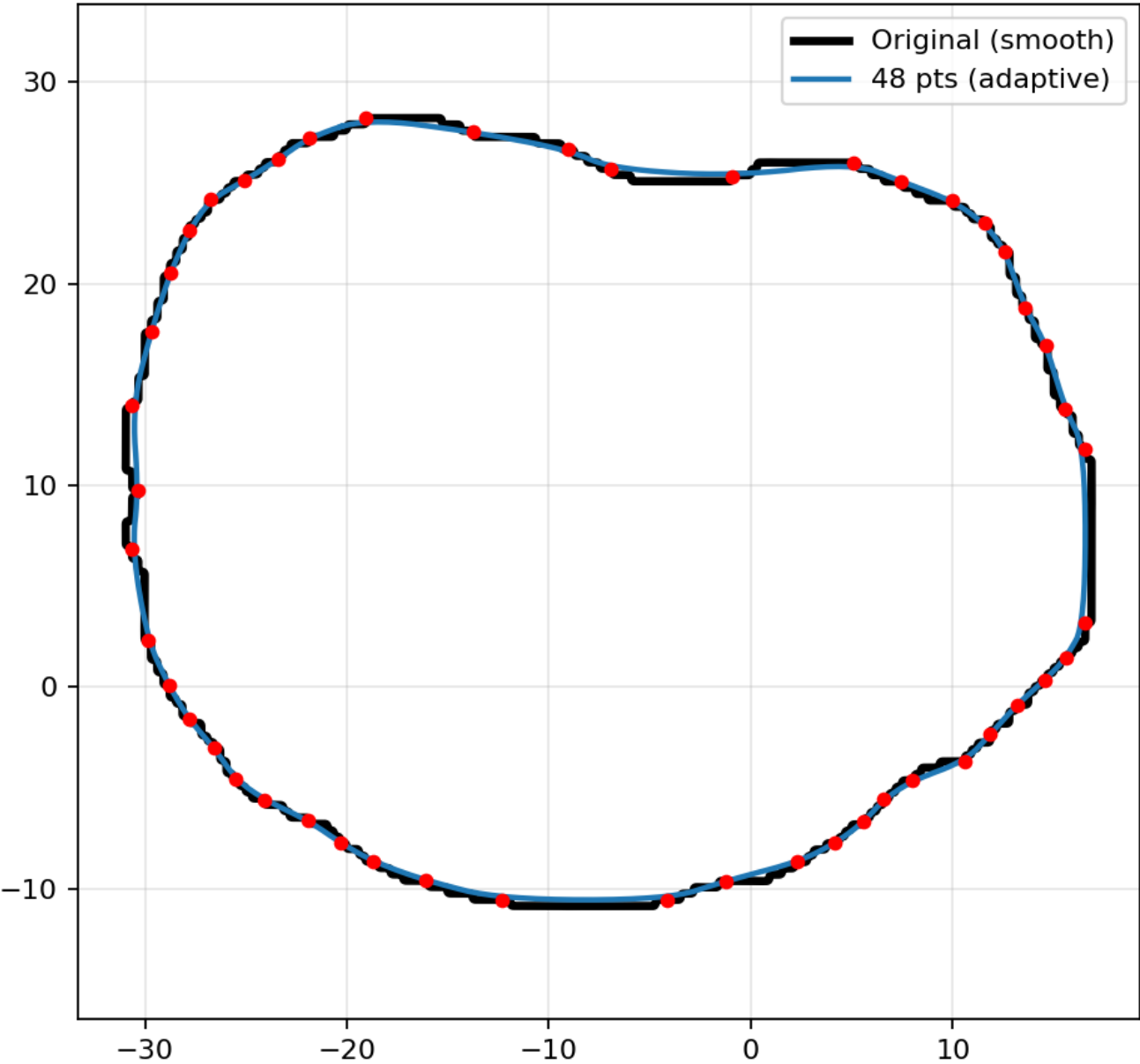
large area | 32 pts  
Area err=1.40%, Hausdorff=0.93 mm

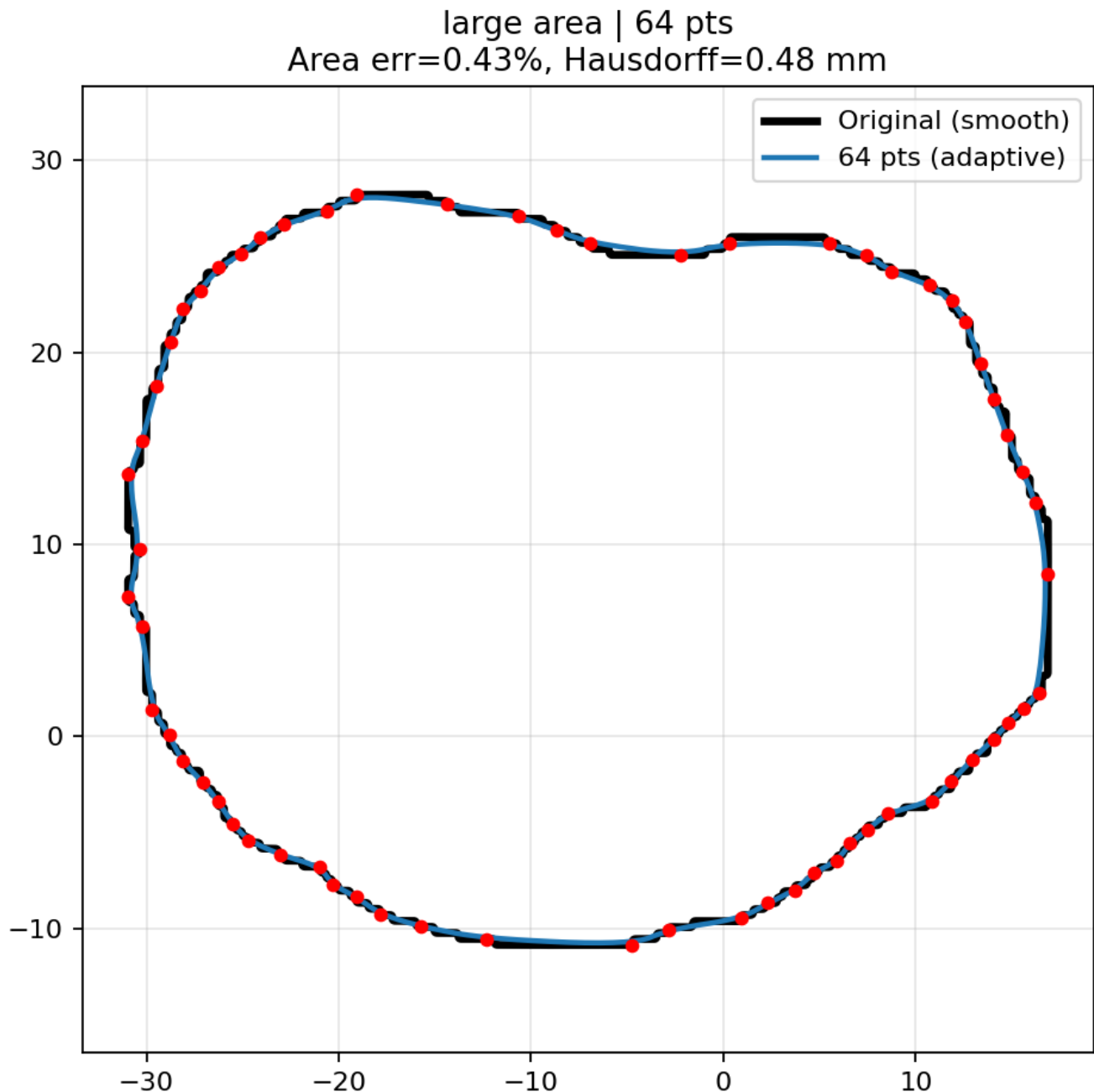






large area | 48 pts  
Area err=0.46%, Hausdorff=0.56 mm





## 4. Conclusion: Error Differences Across Slice Areas

Two takeaways from comparing small / medium / large:

1. **Area error does not uniquely determine shape error:** for example, in the small slice at 64 points, the area error is only **0.376%**, but the Hausdorff distance is still **0.691 mm**. This means the global area is already close, while some local boundary regions can still deviate noticeably.
2. **The minimal acceptable point count depends on thresholds and slice type:**
  - With Hausdorff  $\leq 0.5$  mm, medium/large are largely acceptable at 64 points, while the small slice often needs a higher point count (e.g., 128) to reliably fall below 0.5 mm.

Therefore, if a single unified point count is required, it should be chosen based on the study goal:

- for global quantities (area/volume) stability: a smaller point count may suffice (e.g., 48–64)
- for sensitivity to maximum boundary deviation (dosimetry / geometry-sensitive use cases): a more conservative point count (e.g.,  $\geq 128$ ), or an adaptive policy that allocates more points to small slices

