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Joint Tumor Segmentation and Dense Deformable Registration of Brain MR Images

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1. Center for Visual Computing, Ecole Centrale Paris

2. Equipe GALEN, INRIA Saclay-Ile de France

3. Intrasense SAS, Montpellier

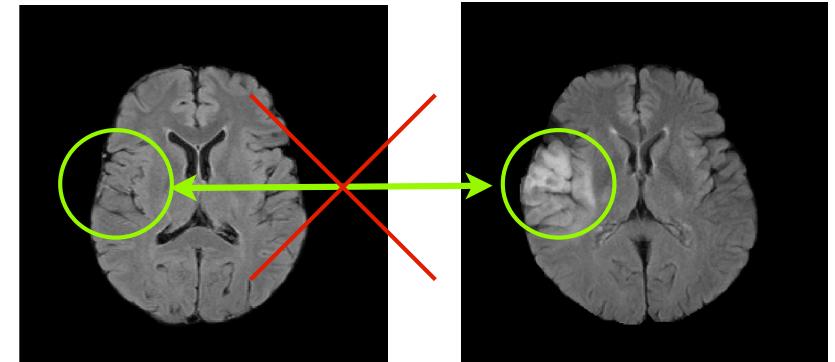
4. Département de Neurochirurgie, Hôpital Gui de Chauliac, Montpellier

Introduction

Brain Tumor Segmentation and Registration from healthy to pathological subject treated separately



- Fuzzy boundaries
- inhomogeneous appearances
- Various shapes
- intensity overlap with healthy tissue



- No correspondences in the tumor area: use of common methods impossible

Methods

- Classification techniques + pairwise smoothing

Lee et al. MICCAI 2008

- Atlas based segmentation:
dependent on registration quality

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Methods

- Growth models: computationally expensive/user interaction

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- Masking the pathology:
dependent on segmentation quality

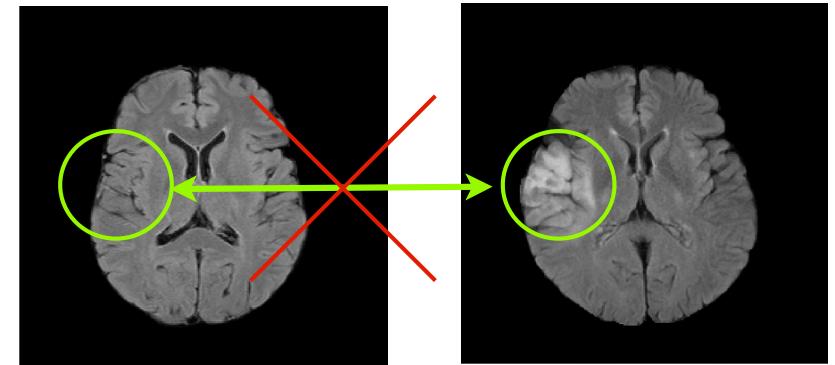
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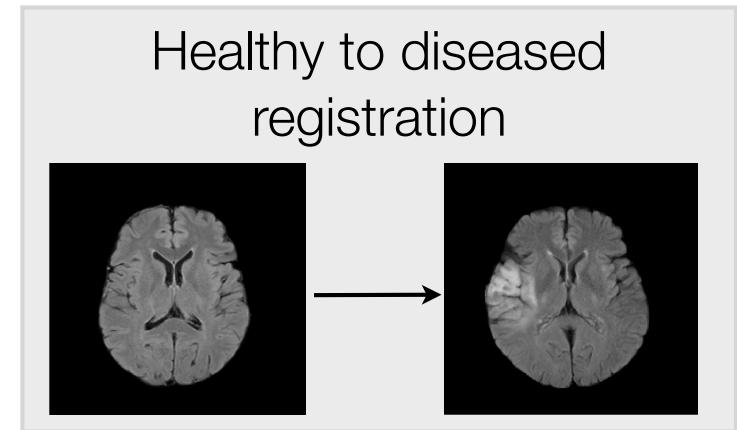
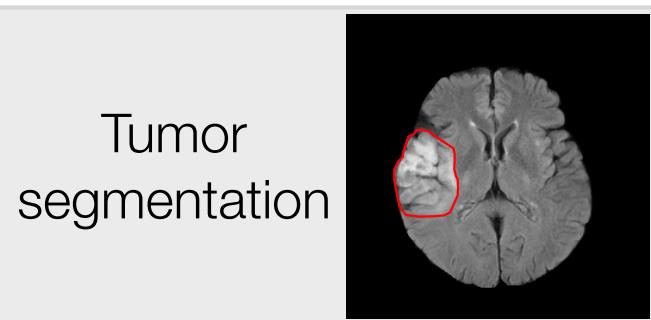
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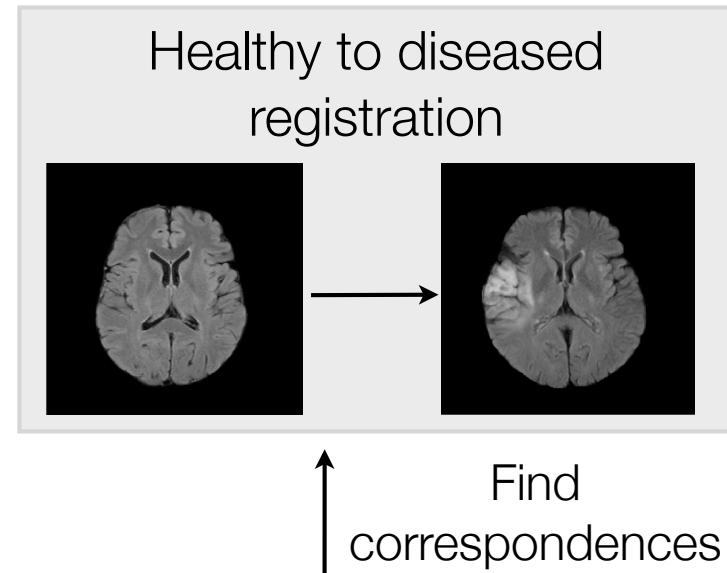
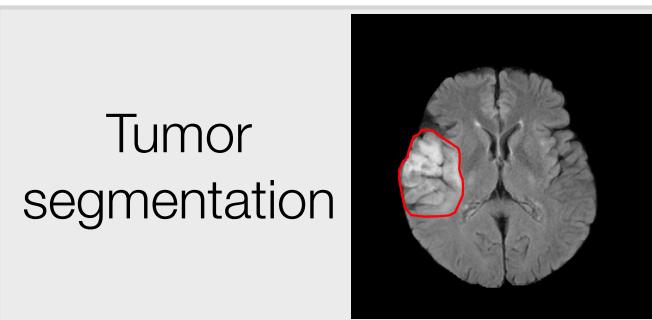
Method Overview

Simultaneously register a healthy subject to a diseased subject and find the tumor's segmentation map



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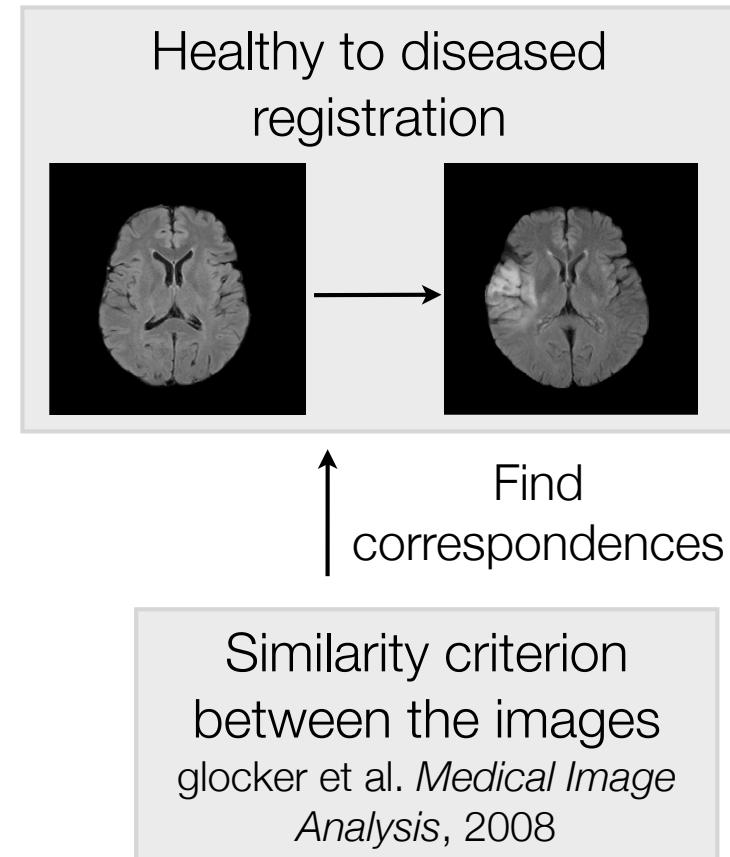
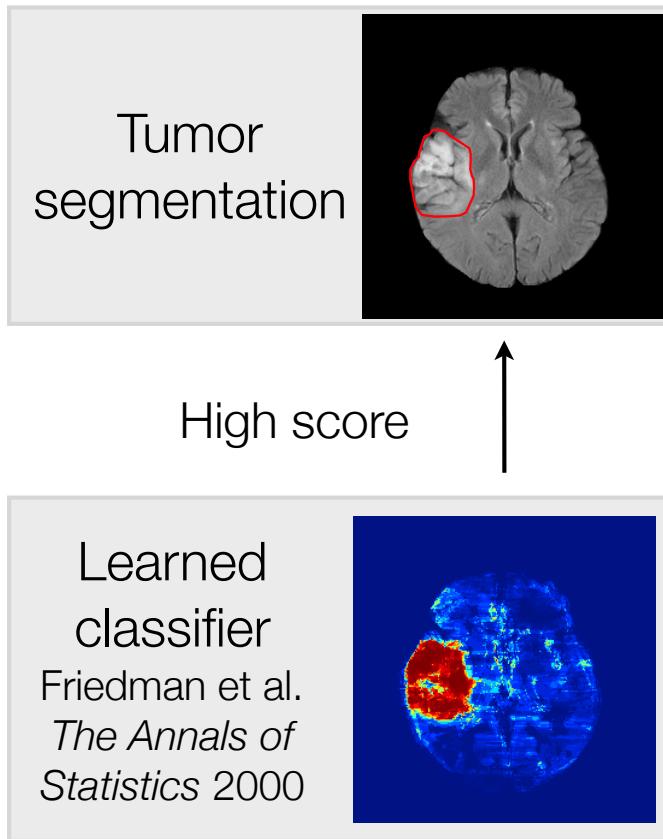


↑ Find correspondences

Similarity criterion
between the images
glocker et al. *Medical Image Analysis*, 2008

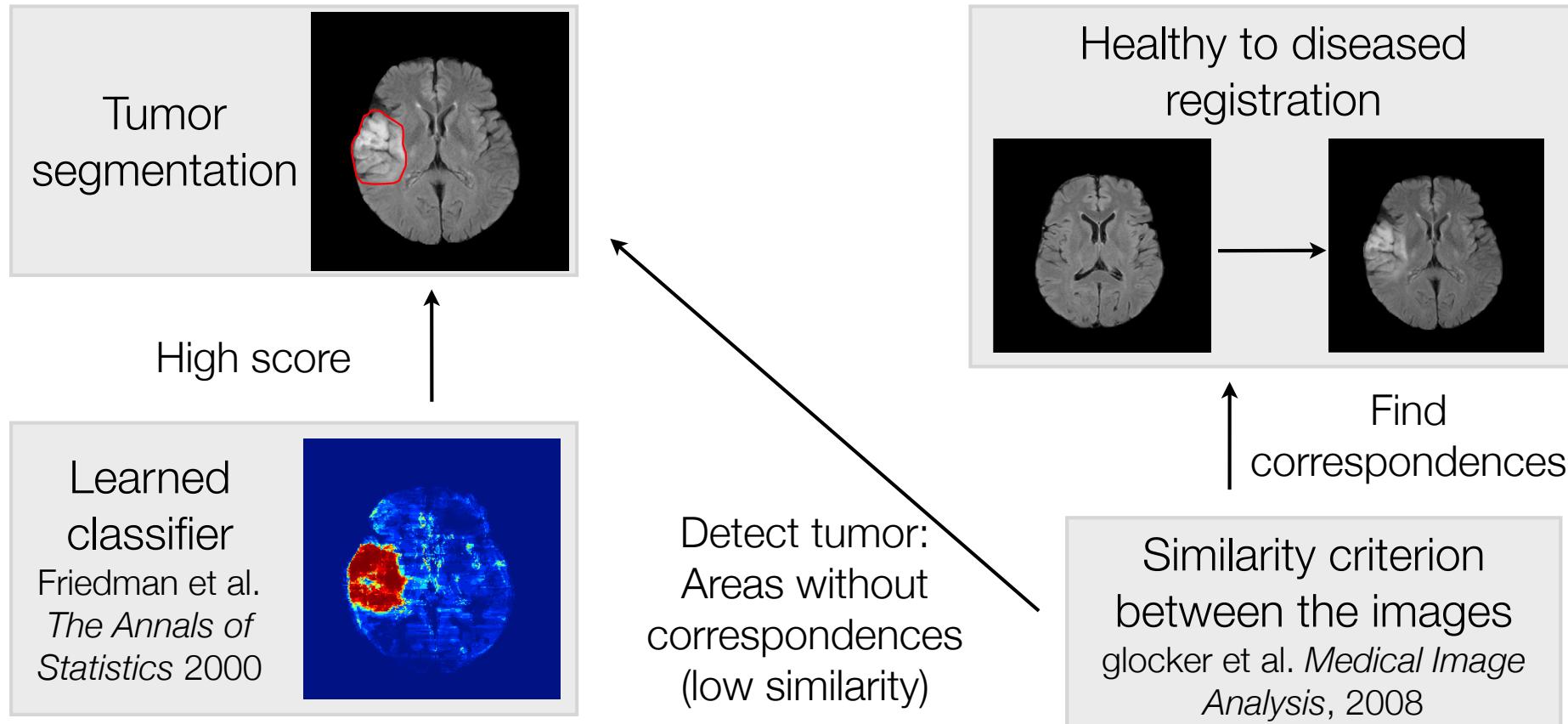
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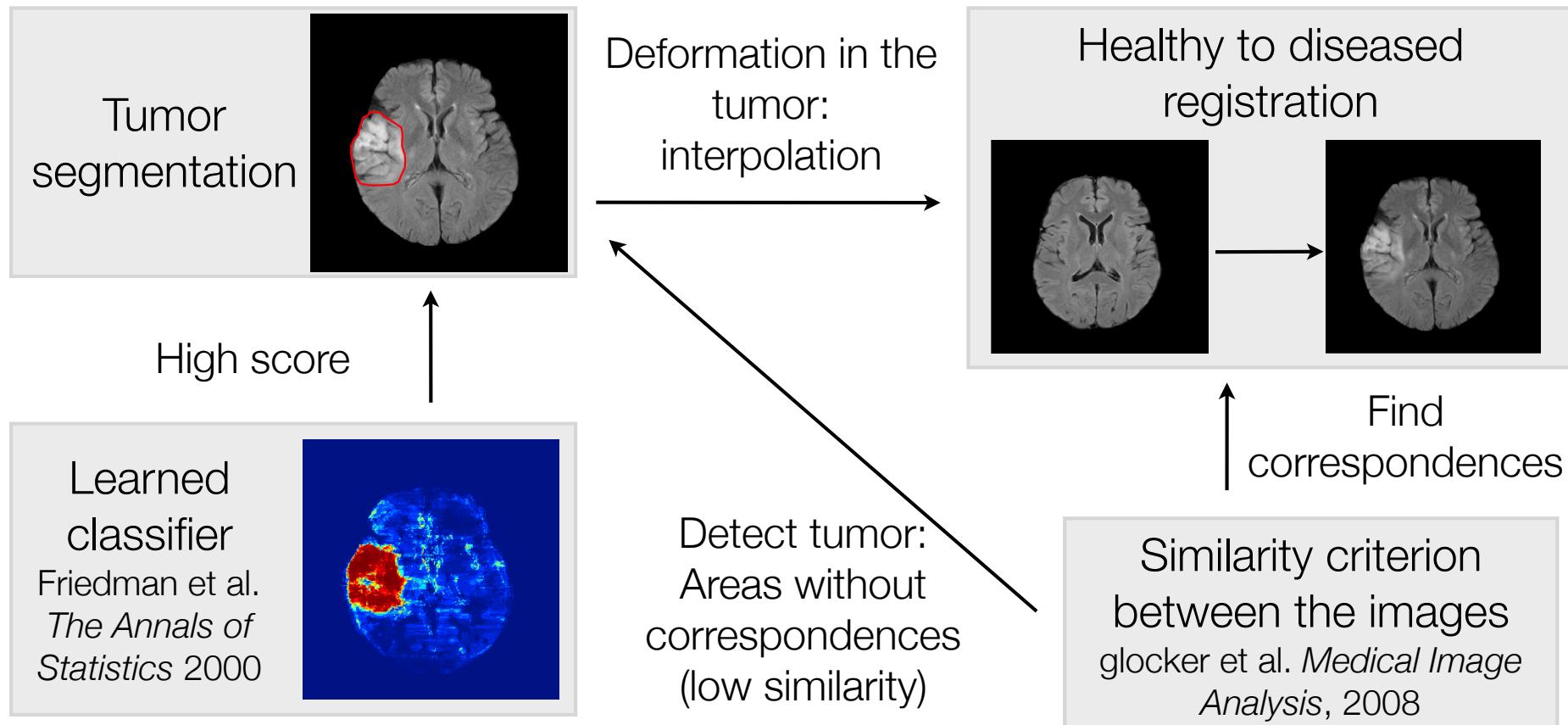
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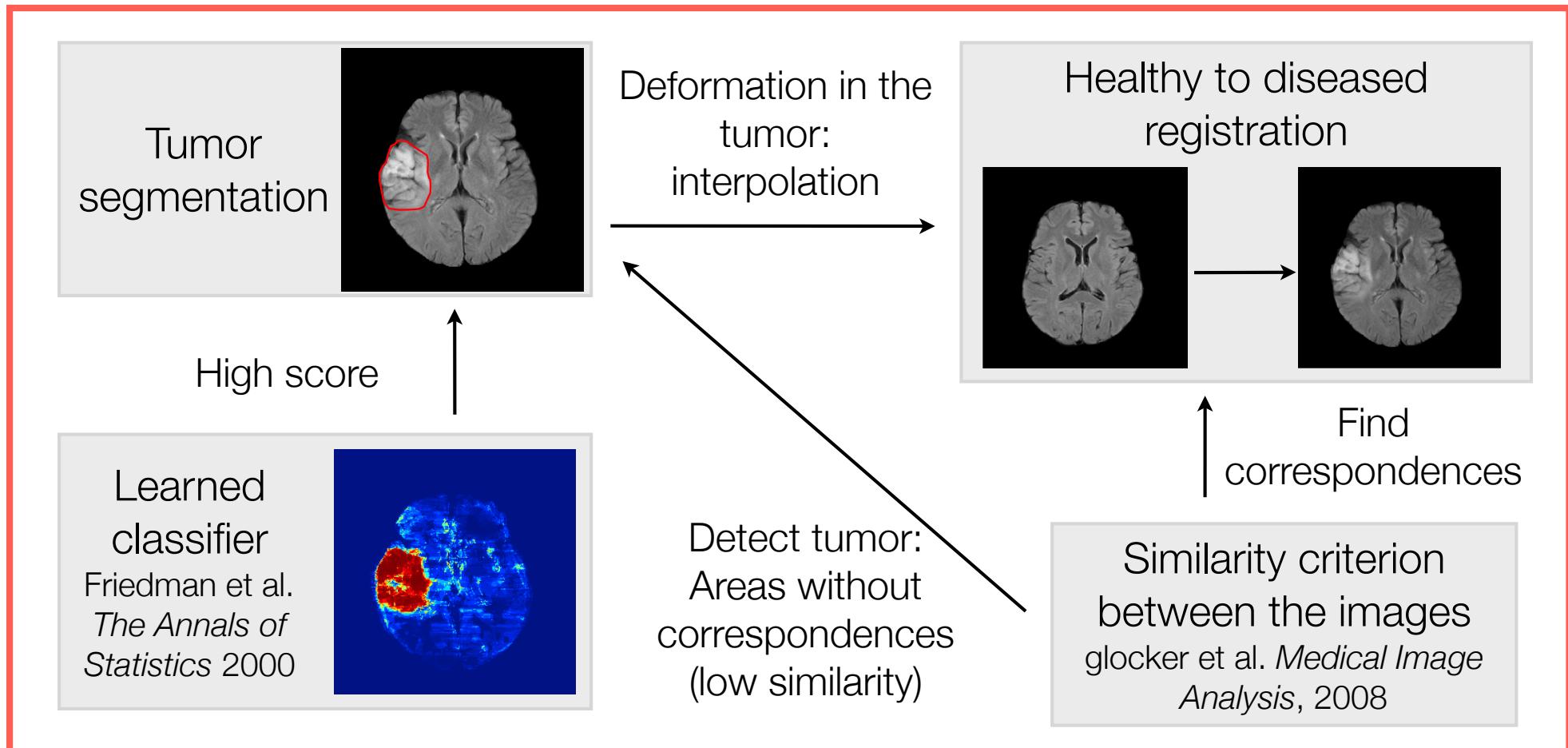
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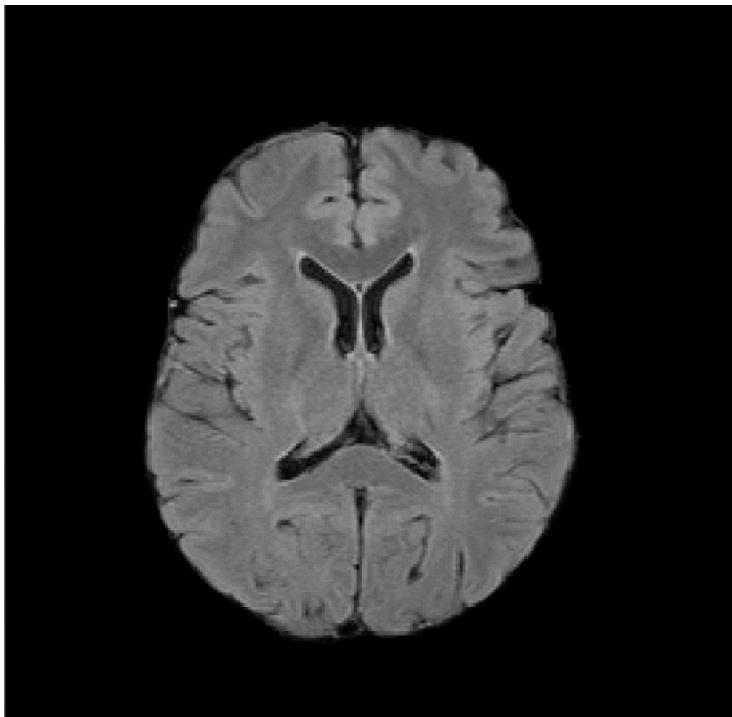
Simultaneously register a healthy subject to a diseased subject and find the tumor's segmentation map



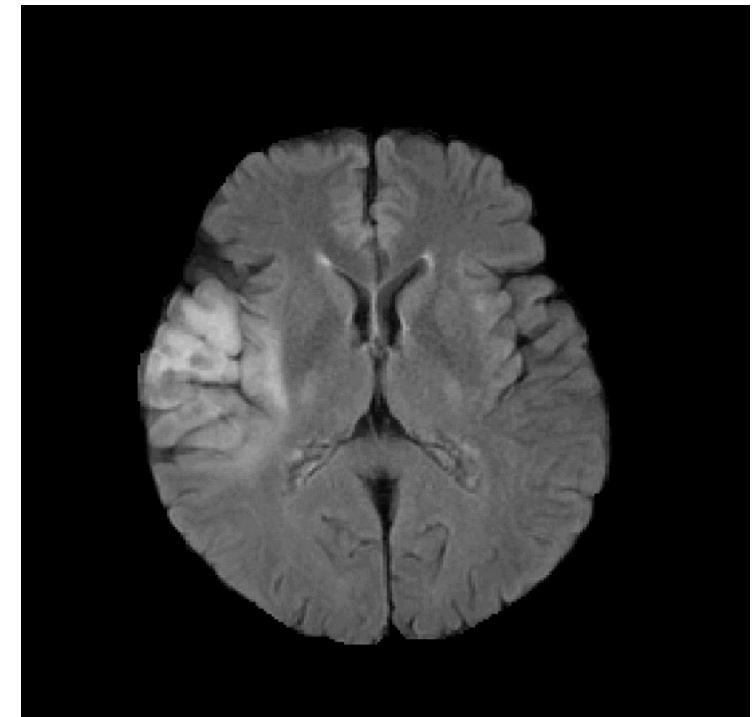
Discrete Markov Random Field Formulation

Parametrization

A

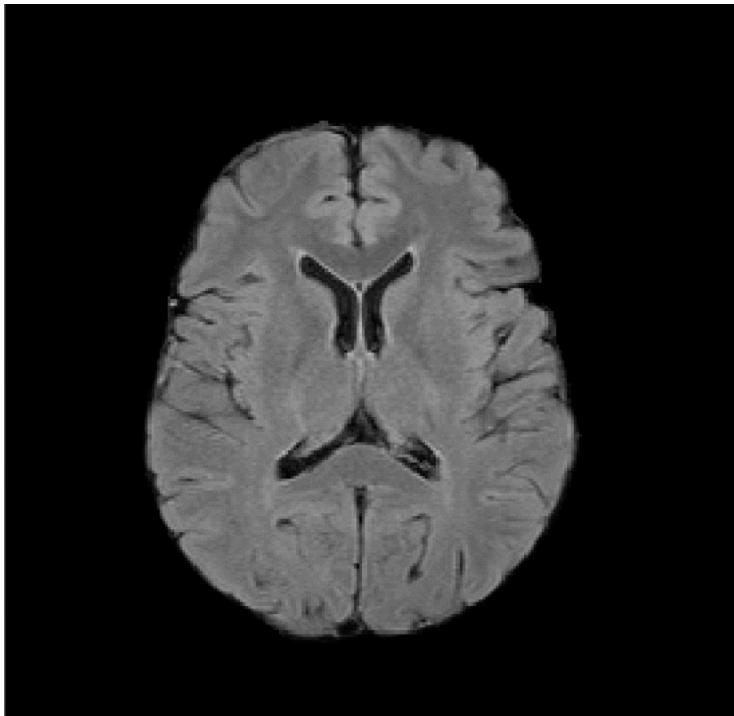


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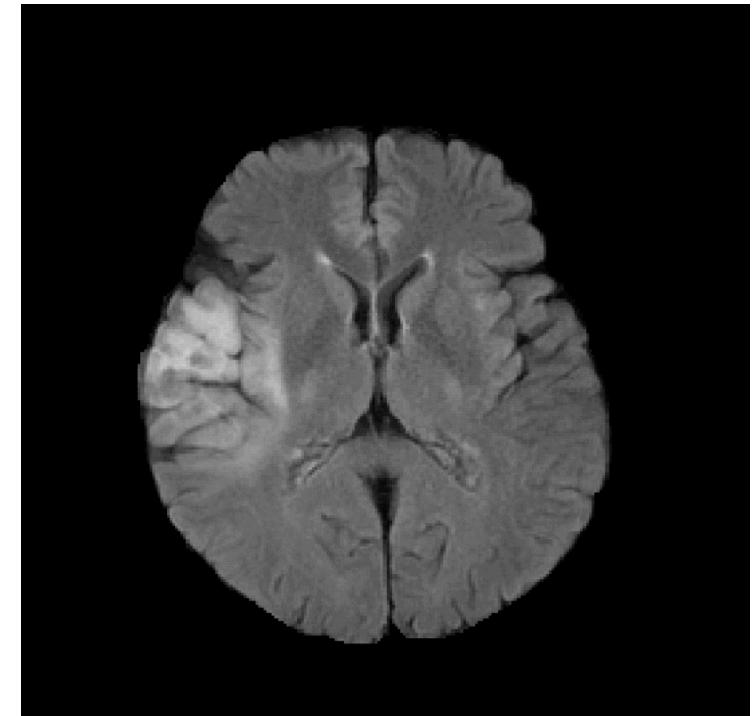


Parametrization

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Deformation field

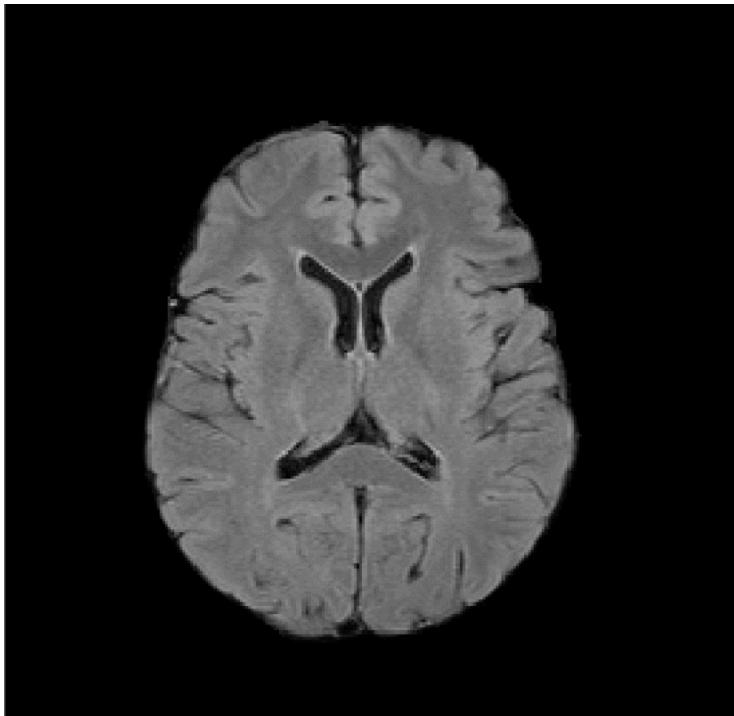
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$$A \circ \mathcal{T}(\mathbf{x}) = I(\mathbf{x})$$

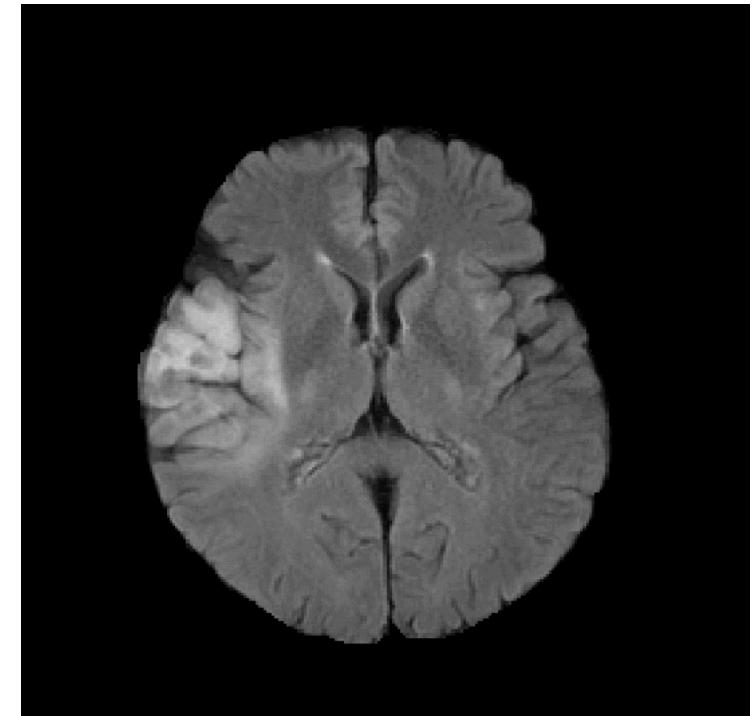


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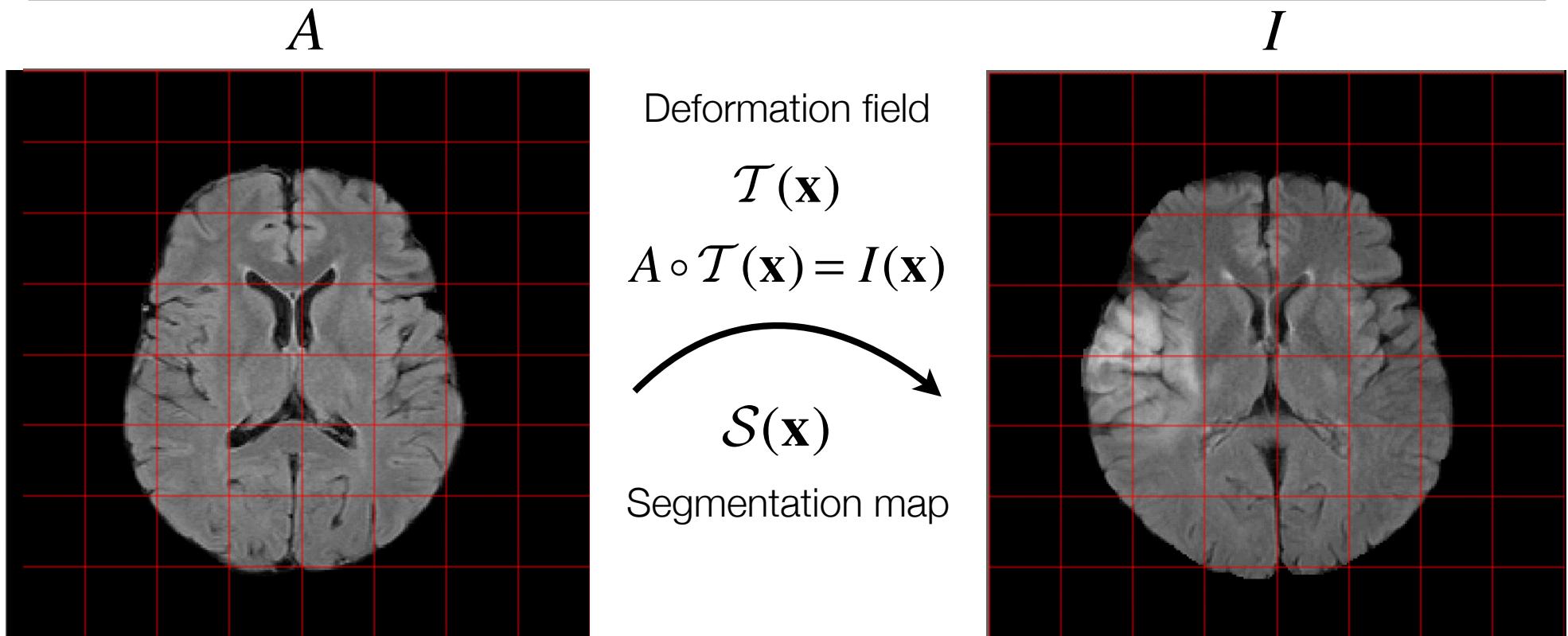
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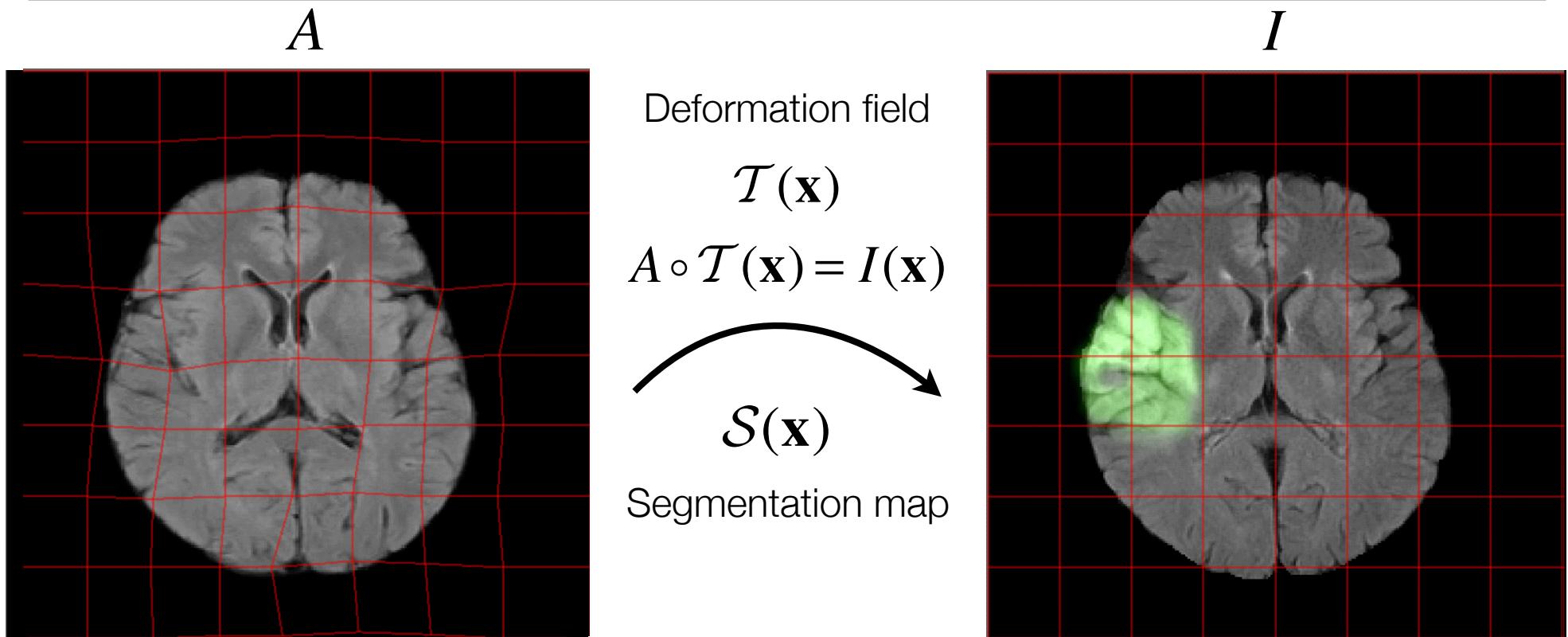
Segmentation map

Parametrization



- *Free form deformation* approach:
 - Deformation and Segmentation estimated on a grid \mathcal{G} superimposed to the images
 - Evaluation on the whole image by interpolation

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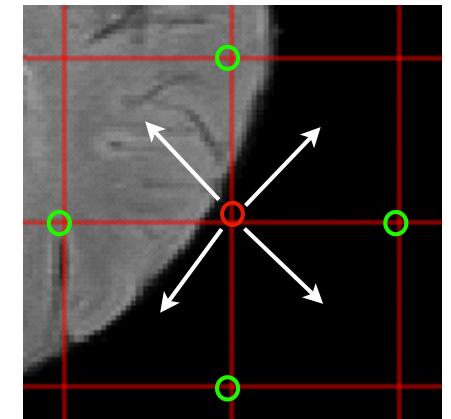


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Markov Random Field Model

- Assign to each grid node p a label l_p corresponding to a pair segmentation (s^l) / displacement (\mathbf{d}^l)

$$l_p = \{s^{l_p}, \mathbf{d}^{l_p}\} \in \{0,1\} \times \{\mathbf{d}^1, \dots, \mathbf{d}^k\}$$

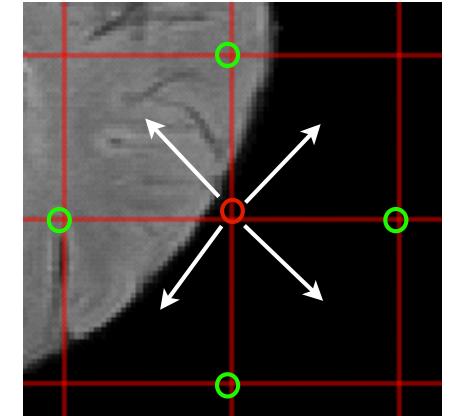


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Discrete displacement set



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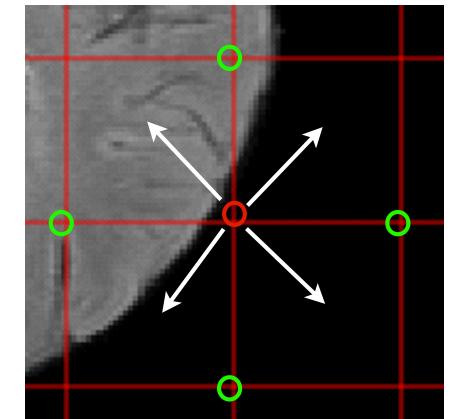
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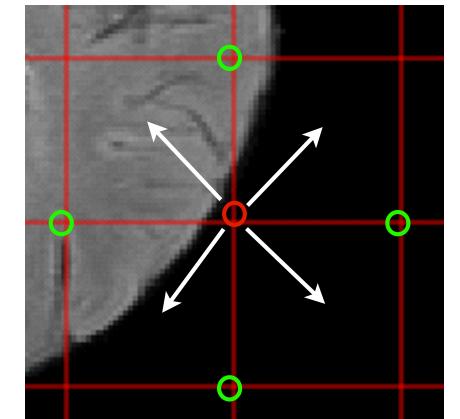
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$$E_{def,seg}(l) = \frac{1}{|\mathcal{G}|} \sum_{p \in \mathcal{G}} V_p(l_p) + \sum_{p \in \mathcal{G}} \sum_{q \in \mathcal{N}(p)} V_{pq}(l_p, l_q)$$



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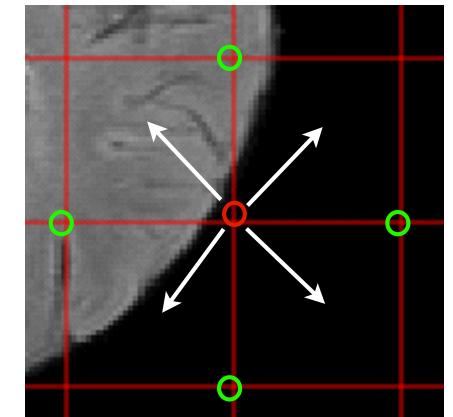
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- Pairwise term with **neighbor** nodes

Local consistency of the segmentation

Registration regularization



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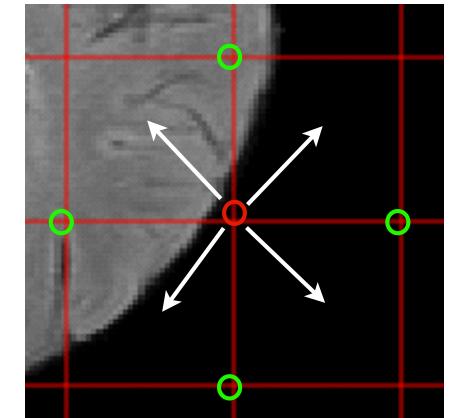
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- Unary term

$$V_p(l_p) = \alpha V_{def}(l_p) + (1 - \alpha) V_{seg}(l_p)$$

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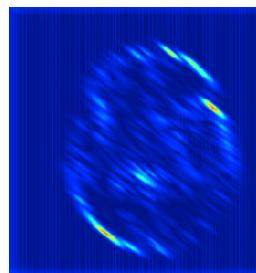
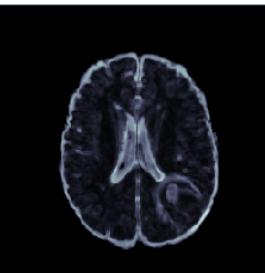
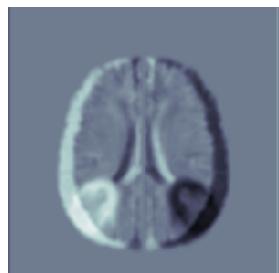


Unary Term: Segmentation

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- Learning of a tumor vs background classifier

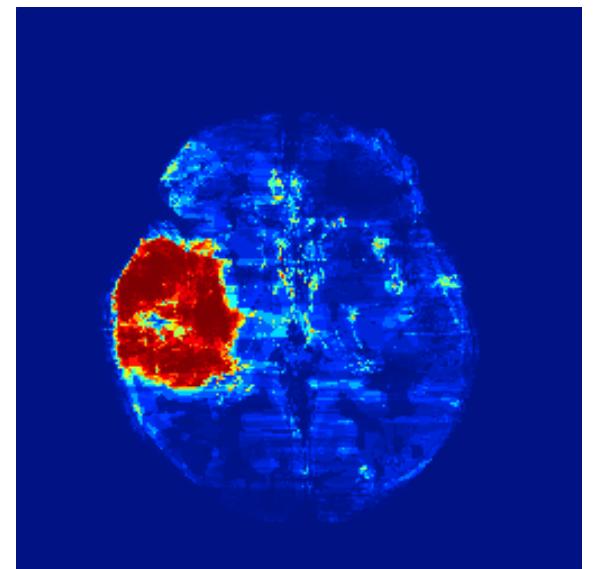
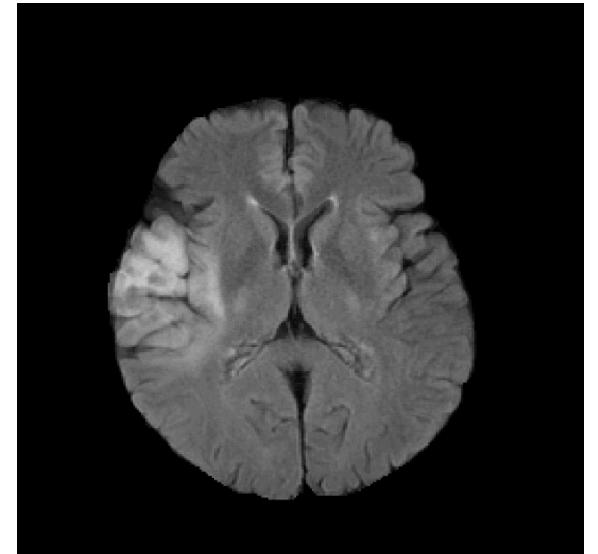
- Features extracted from images



- Gentle Adaboost algorithm

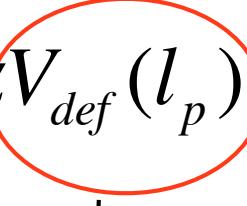
Construction of a strong classifier as a combination of weak classifiers (decision stumps)

- Any classification technique can be used
- Nodes with high classification probability of being tumor should be labeled accordingly



Boosting probability map

Unary Term: Registration

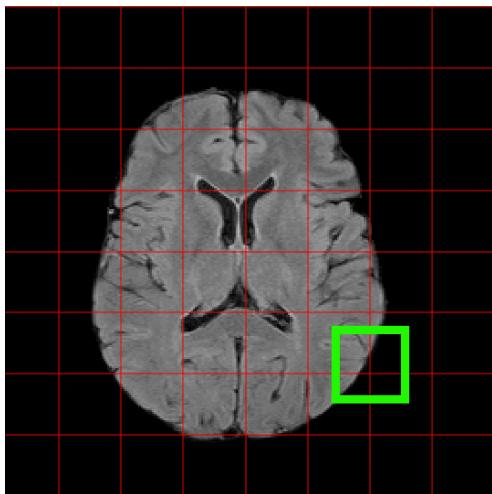
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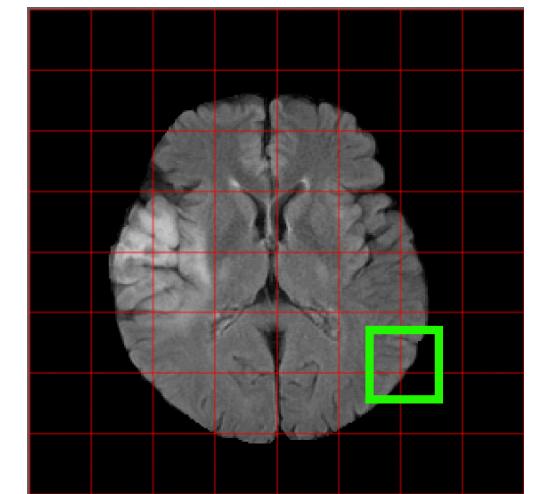
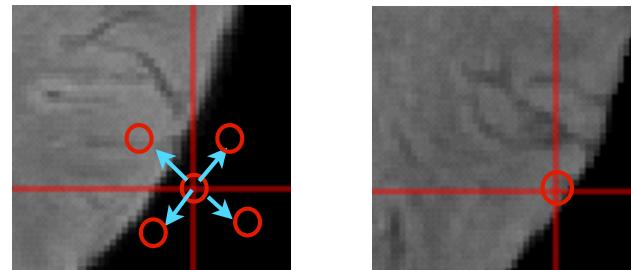
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- Outside the tumor area: Find correspondences

Compute the **similarity measure** for all possible displacements



A



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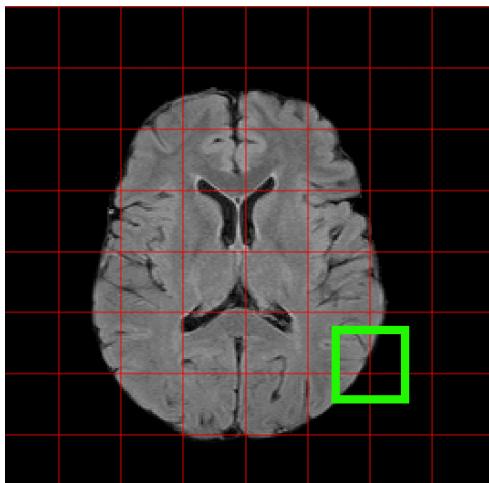
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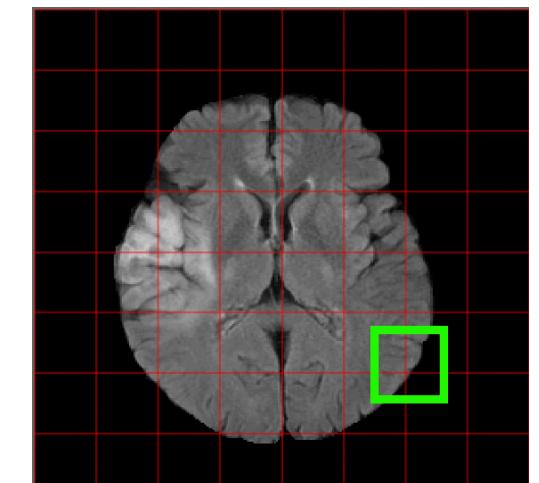
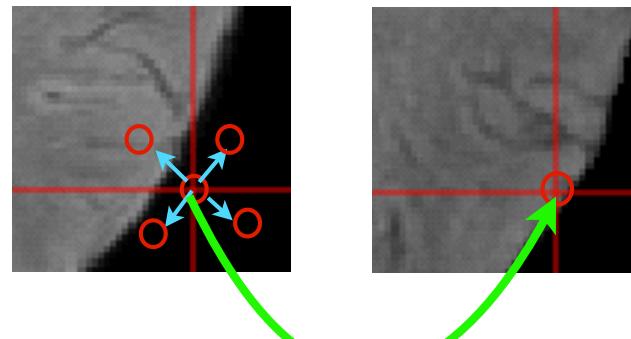
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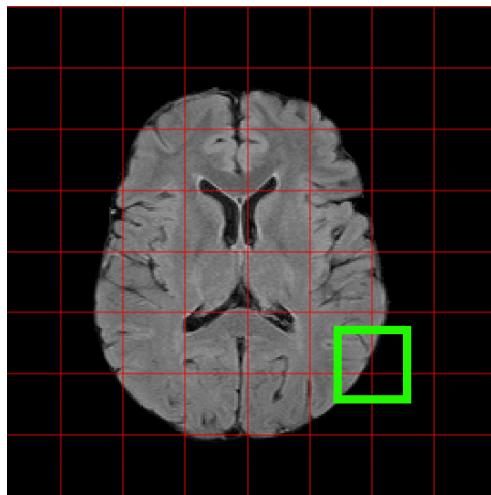
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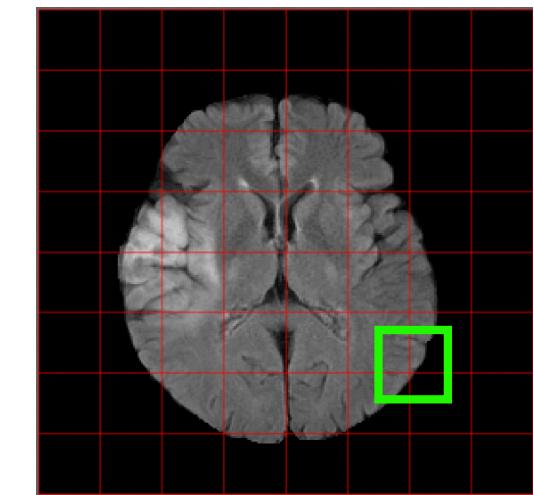
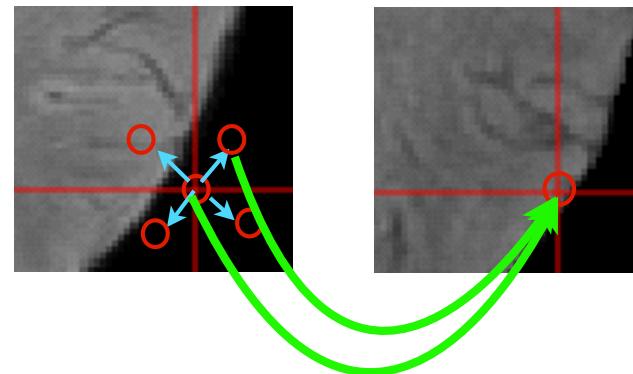
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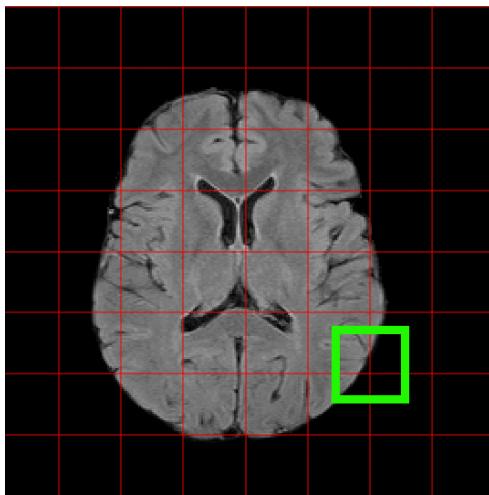
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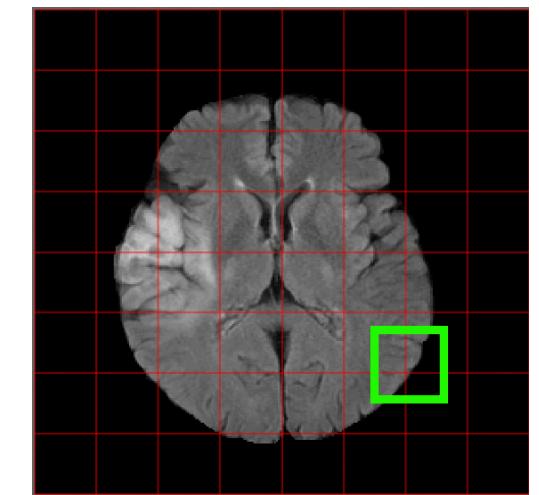
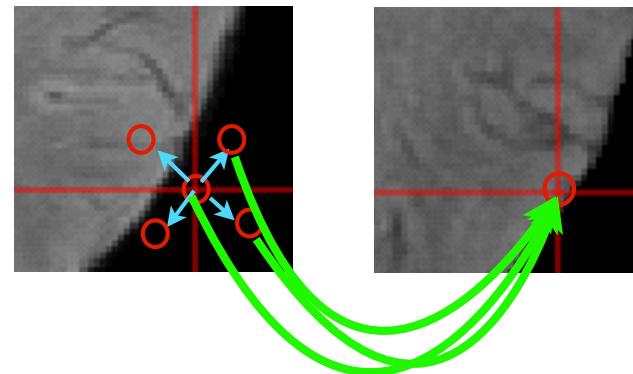
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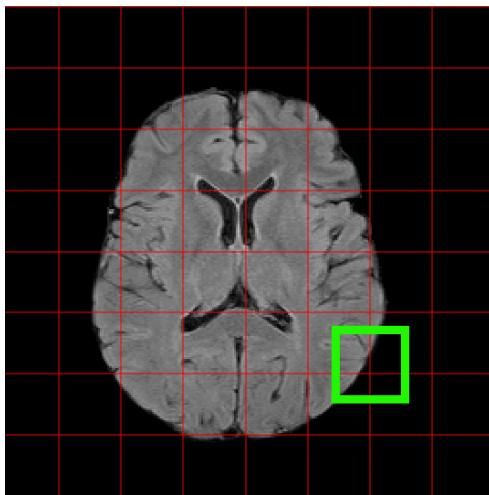
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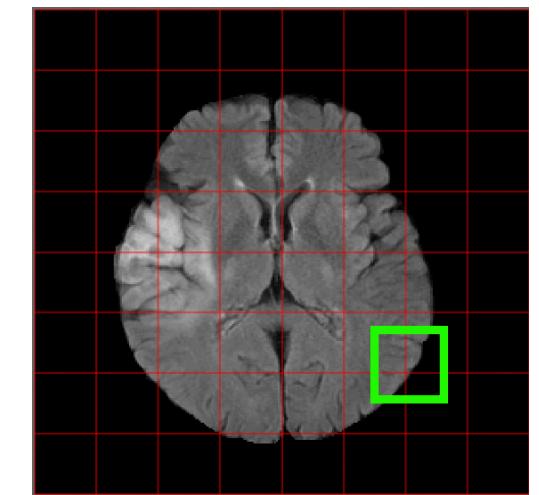
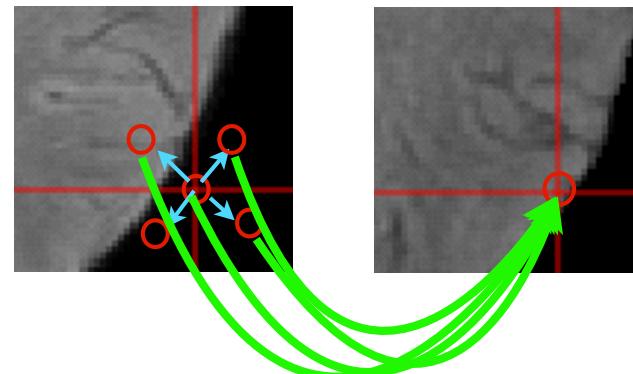
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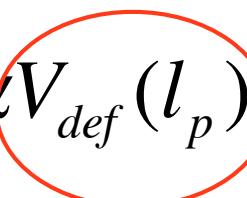
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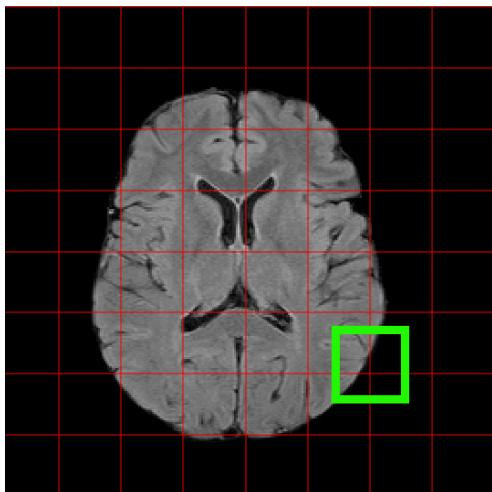
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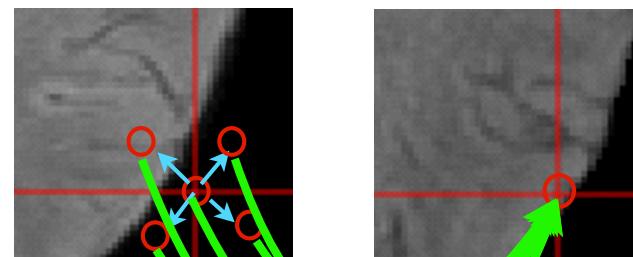
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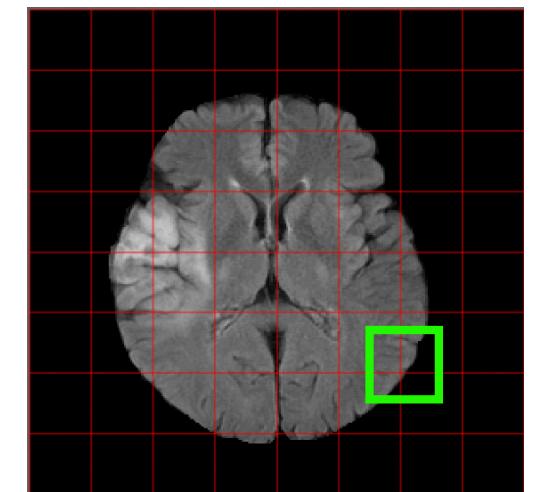
Compute the **similarity measure** for all possible displacements



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Similarity measure $Sim(I(x), A(\mathcal{T}(x)))$



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Unary Term: Registration

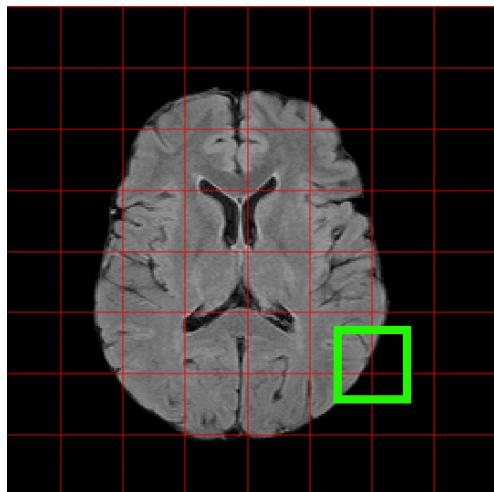
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Any kind of similarity criterion

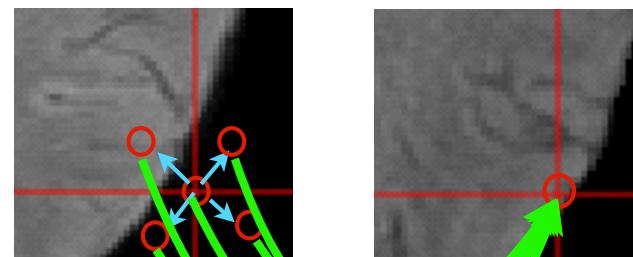
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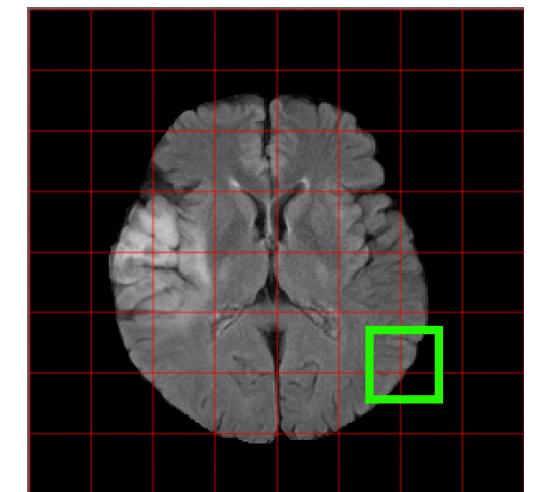
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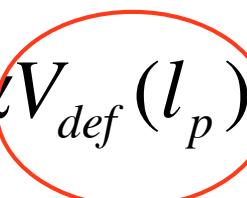
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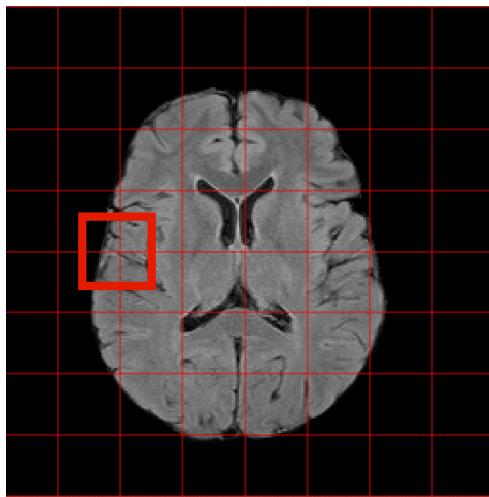
$$V_p(l_p) = \alpha V_{def}(l_p) + (1 - \alpha)V_{seg}(l_p)$$



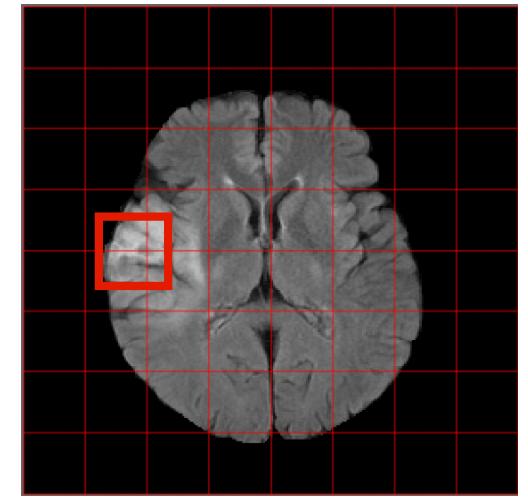
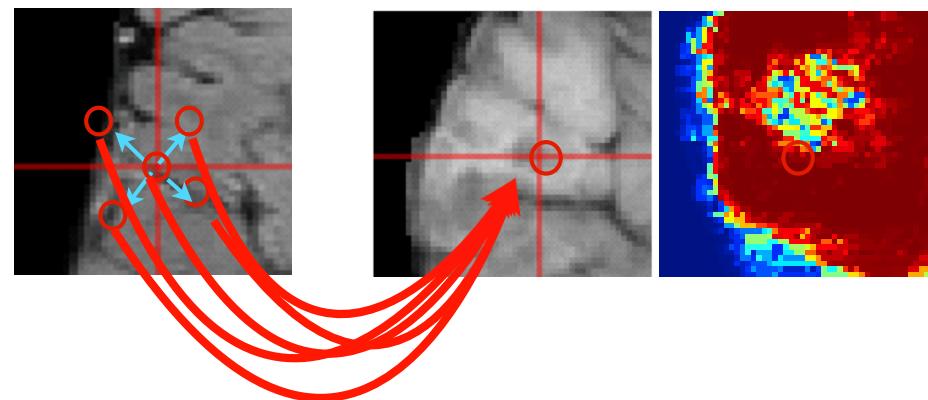
$$\begin{cases} Sim(I(\mathbf{x}), A(\mathbf{x} + \mathbf{d}^{l_p})) & \text{if } s^{l_p} = 0, \text{ Background} \\ C_{tm} & \text{if } s^{l_p} = 1, \text{Tumor} \end{cases}$$

- In the tumor area: No correspondences

Constant cost independent of the displacement



A

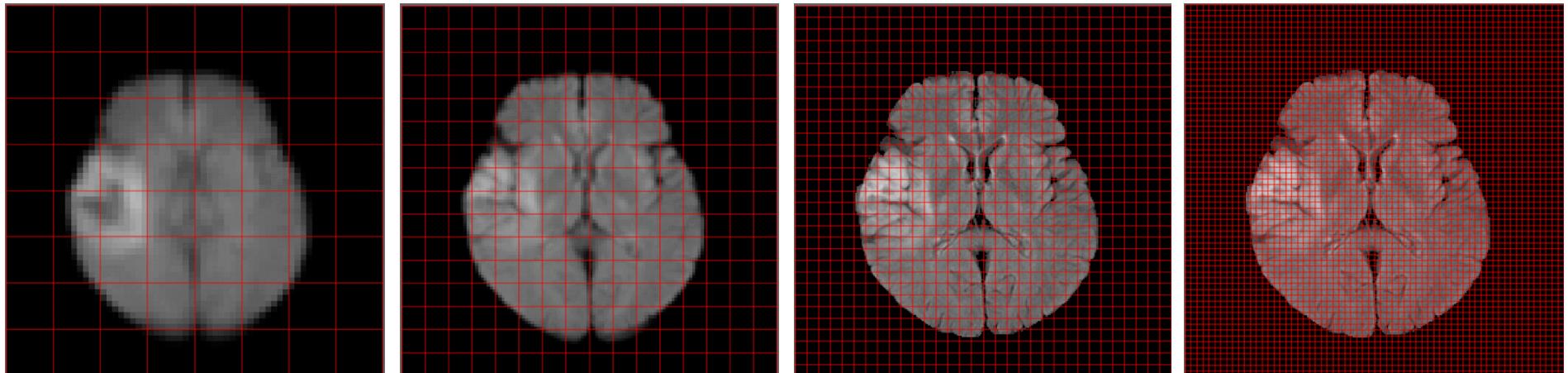


I

Implementation

- Incremental Approach

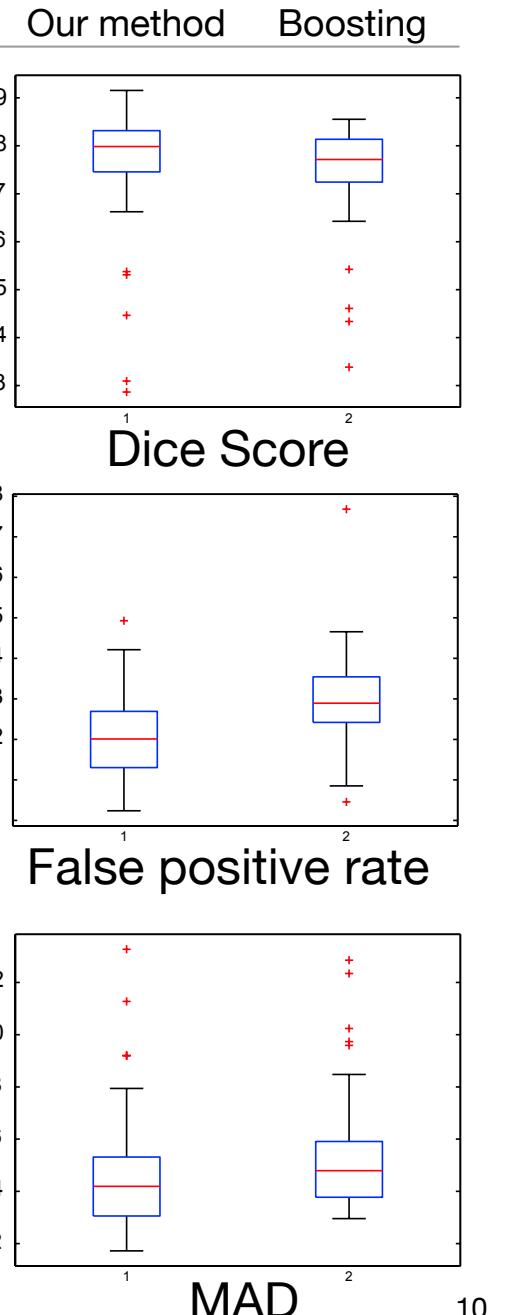
- 3 image levels, 4 grid resolutions



- Increasing influence of the segmentation (progressive diminution of α value)
- Optimization
 - Linear programming (Komodakis et al. CVIU, 2008)
- Overall run time: 6 min (matlab implementation)

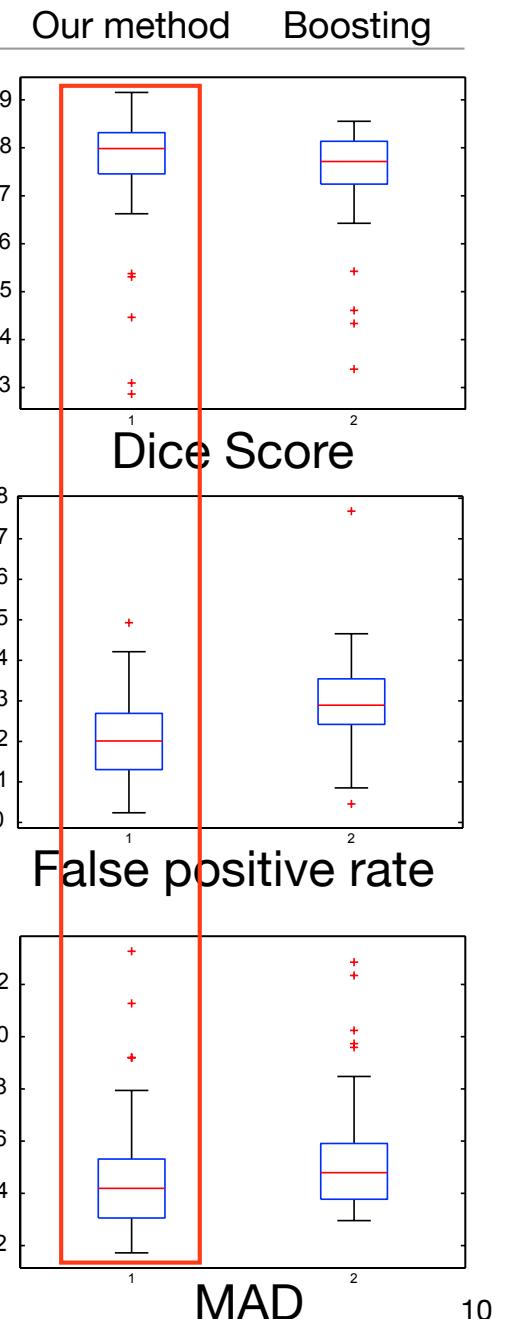
Experimental Validation

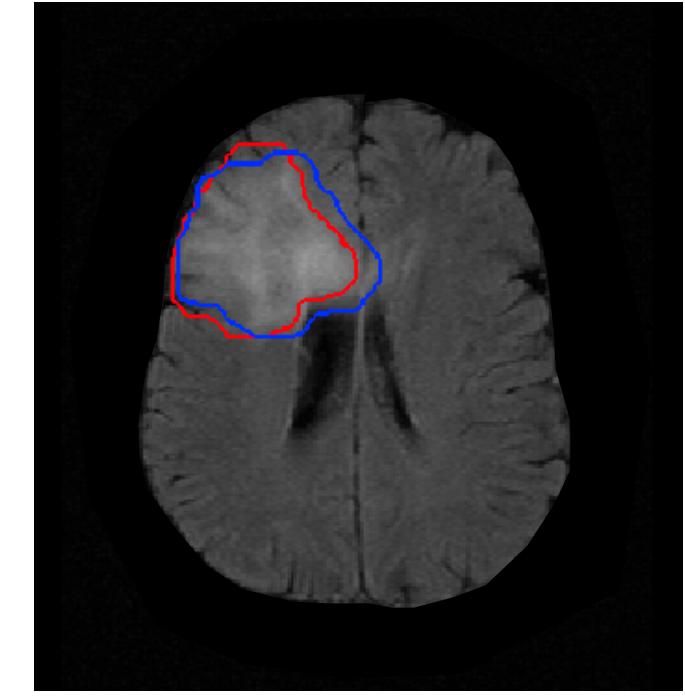
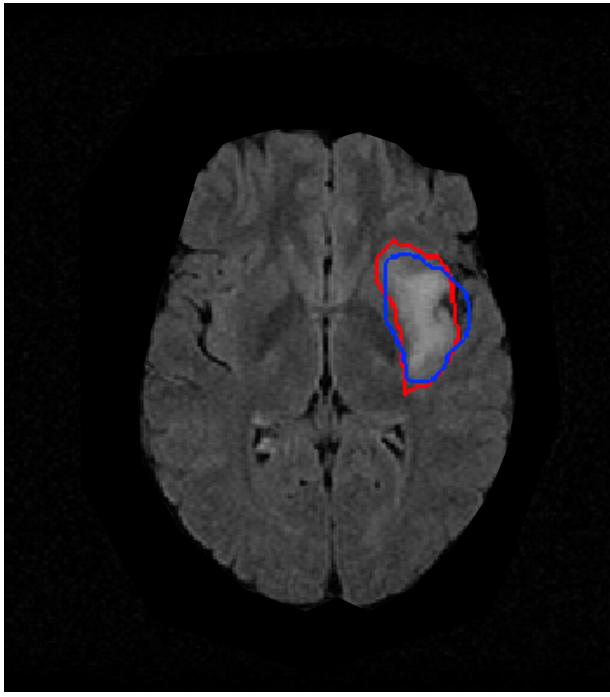
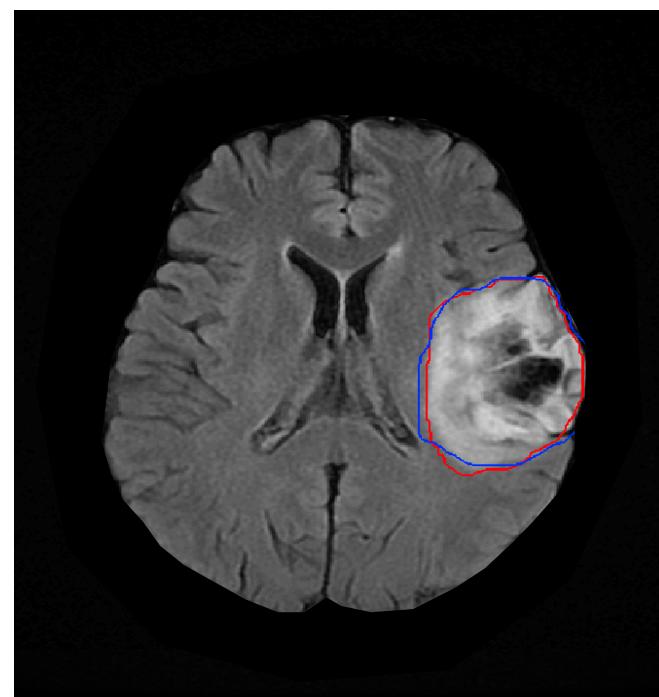
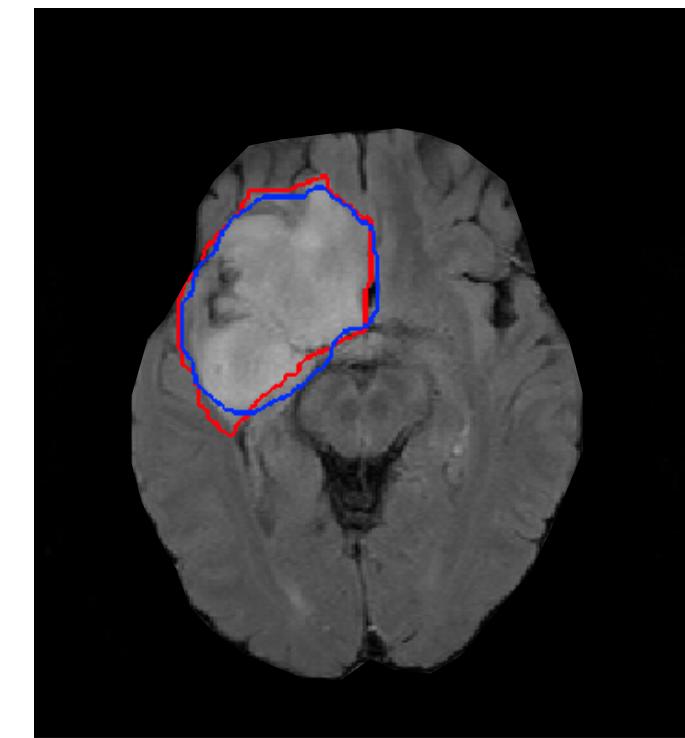
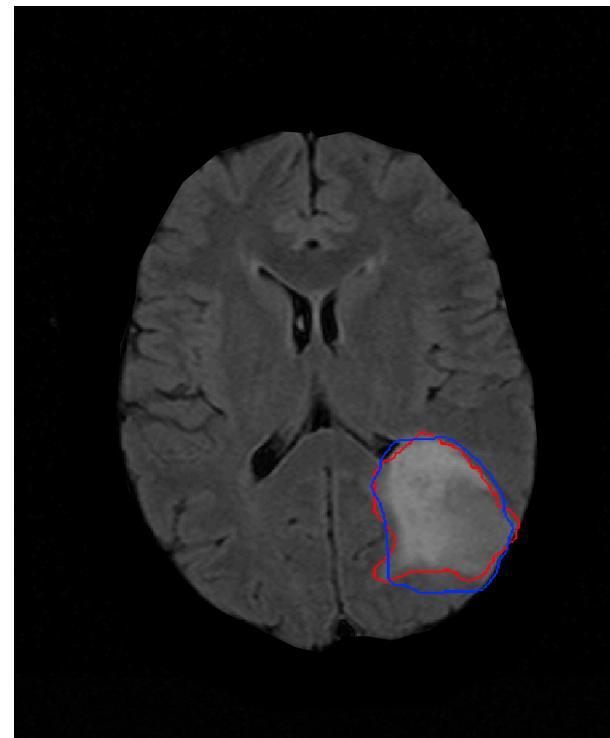
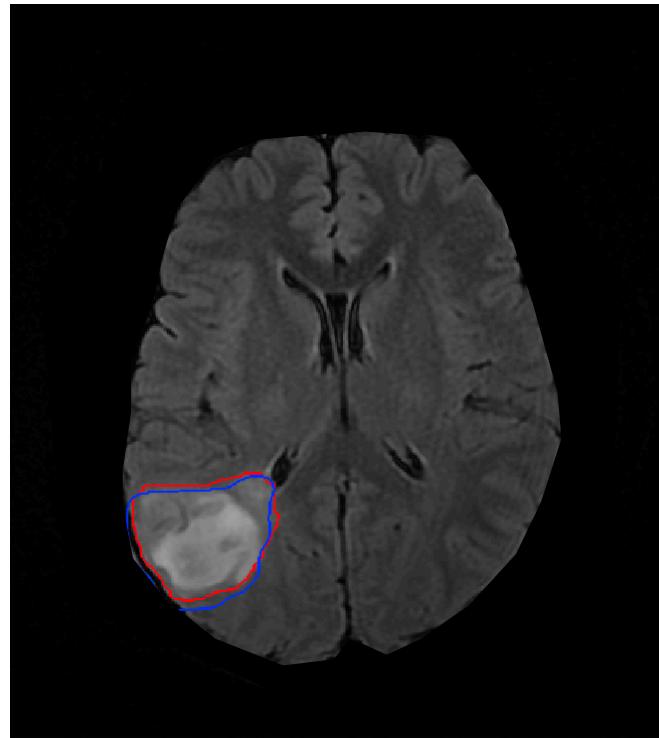
- Database: 97 T2 FLAIR volumes
 - Data likelihood learned on 40 volumes
 - Evaluation on 57 volumes
- Segmentation
 - Evaluated w.r.t manual segmentations
 - Compared with boosting classification with added pairwise smoothing (right on boxplots)
 - Median Dice: 77 to 80%, False positives: 30 to 20%, Mean Absolute Distance (MAD): 4.8 to 4.2mm
- Registration
 - Qualitative evaluation
 - Compared with Glockner et al. 2008, with masked pathology



Experimental Validation

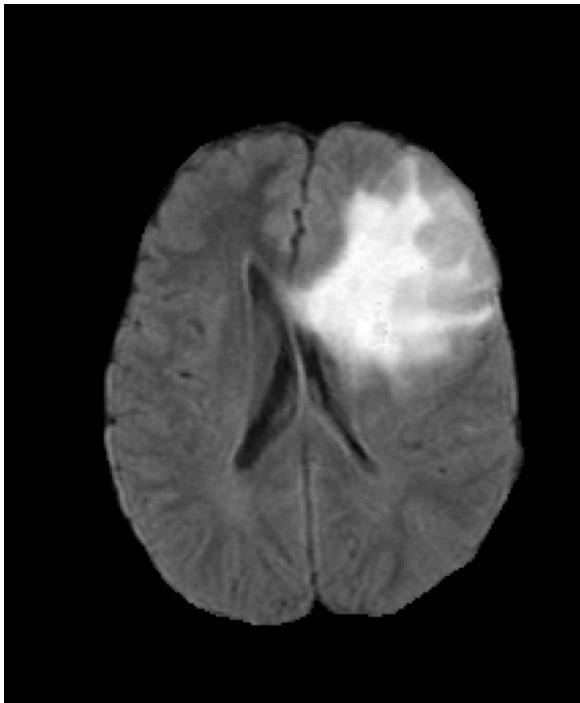
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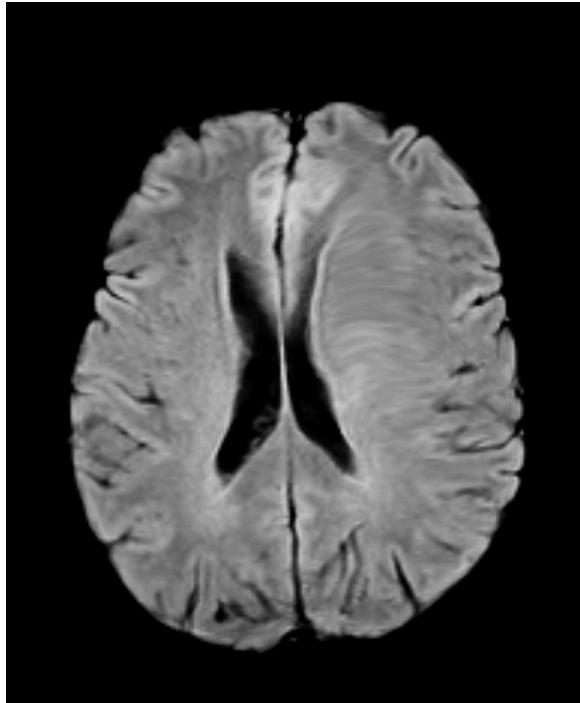


Red: Ground truth

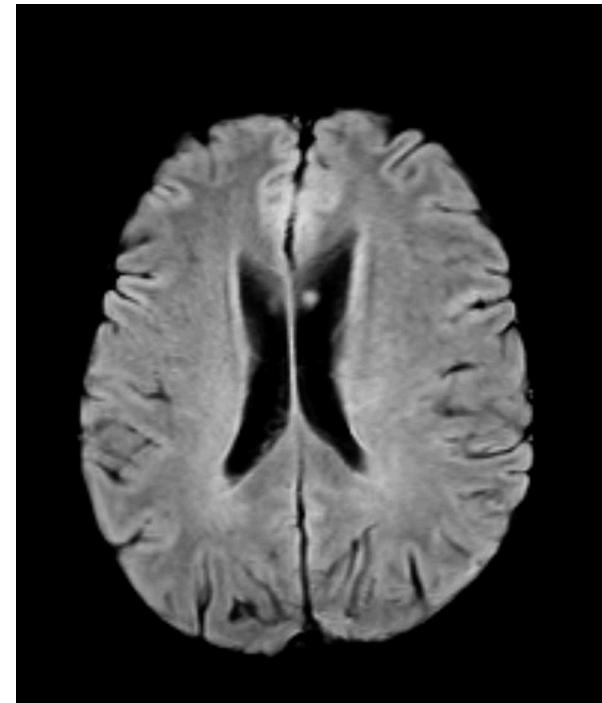
Blue: Automatic segmentation



Original image



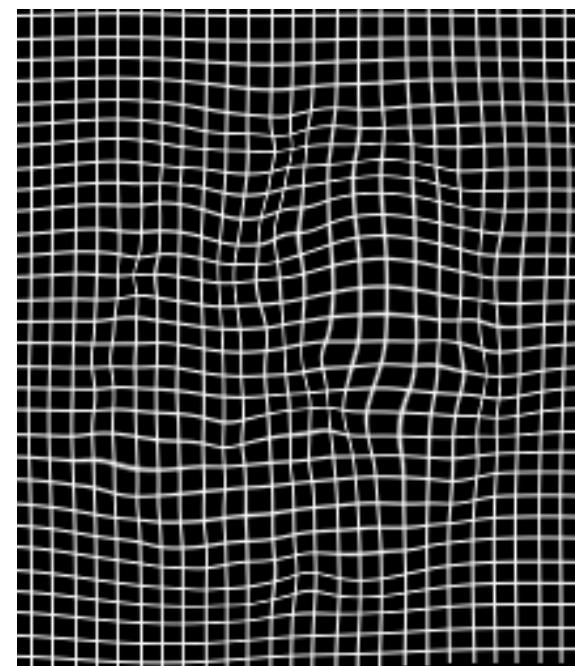
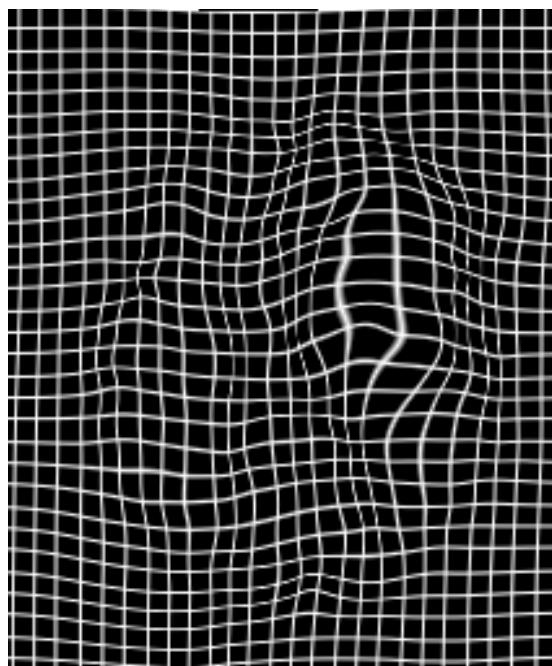
Glocker et al. 2008
Deformed image



Our method
Deformed image

Left:
Glocker 08
Deformation field

Right
Our method
Deformation field



Conclusion

- Simultaneous registration and segmentation method
- Modular w.r.t image modality, similarity criterion and classification technique
- Can be adapted to any clinical context
- Fast and efficient optimization (ongoing work to reduce the run time to a few seconds)
- State of the art results
- Future work
 - Local spatial position prior information
 - Registration uncertainties
 - Adaptation to registration/segmentation before and during surgery with tumor resection

Poster Th-1-AG-14

Thursday 13:30-15:00

Thank you for your attention

Questions?