

# Signal Detection Theory in Radiology

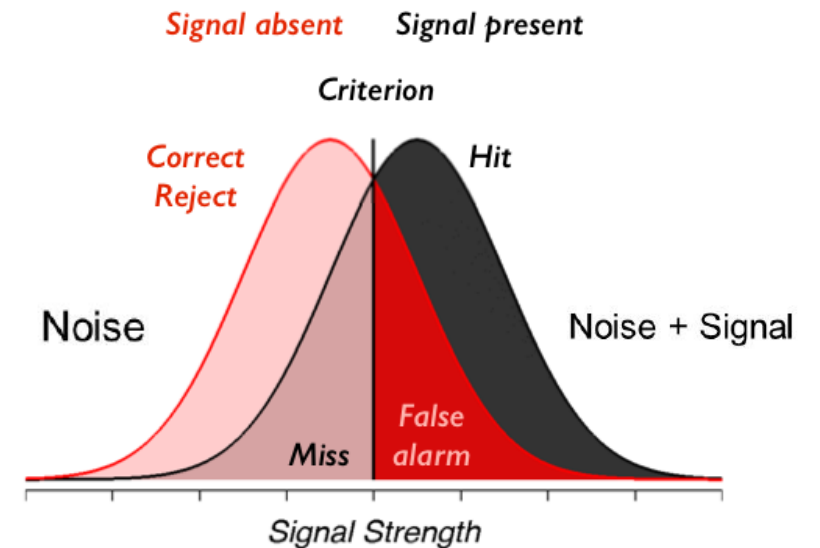
By: Jenna Kleinow



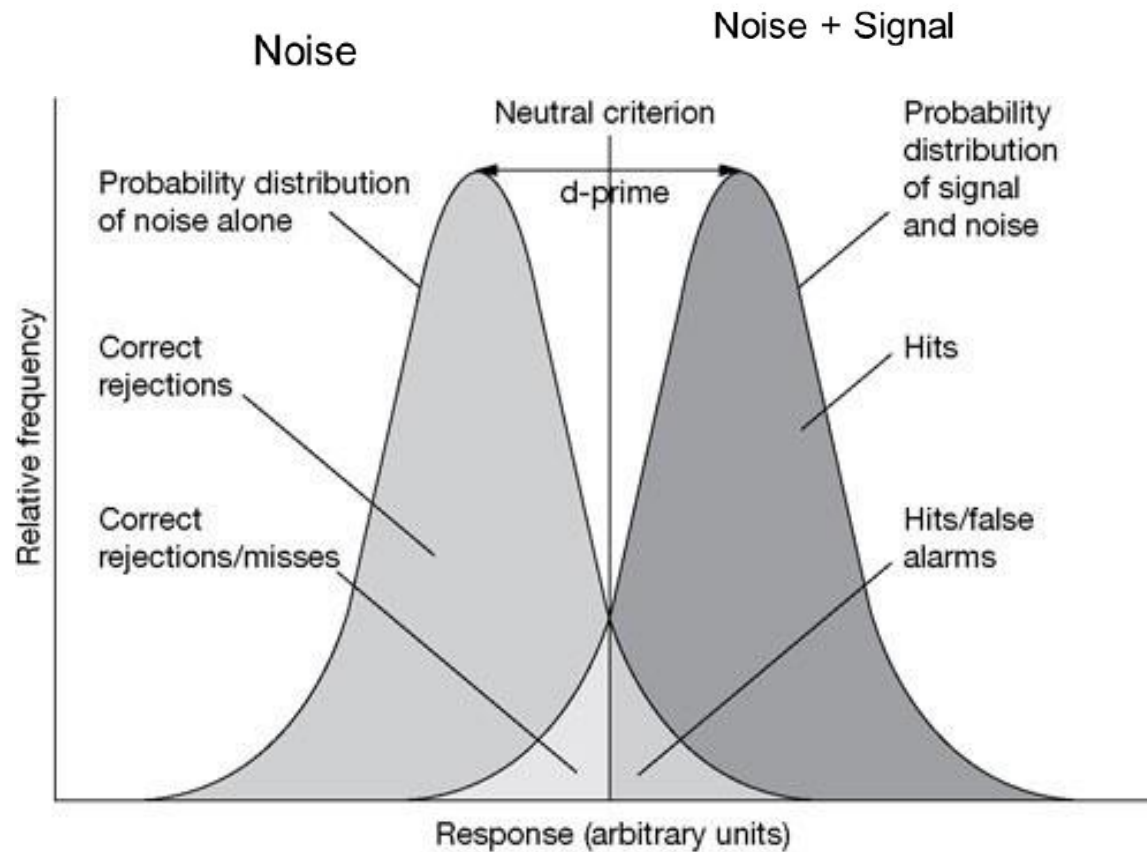
# Decision Making

- Analyzing decision making in the presence of uncertainty

		State of the World	
		Signal Present	Signal Absent
Observer Response	"Present"	Hit	False Alarm
	"Absent"	Miss	Correct Rejection



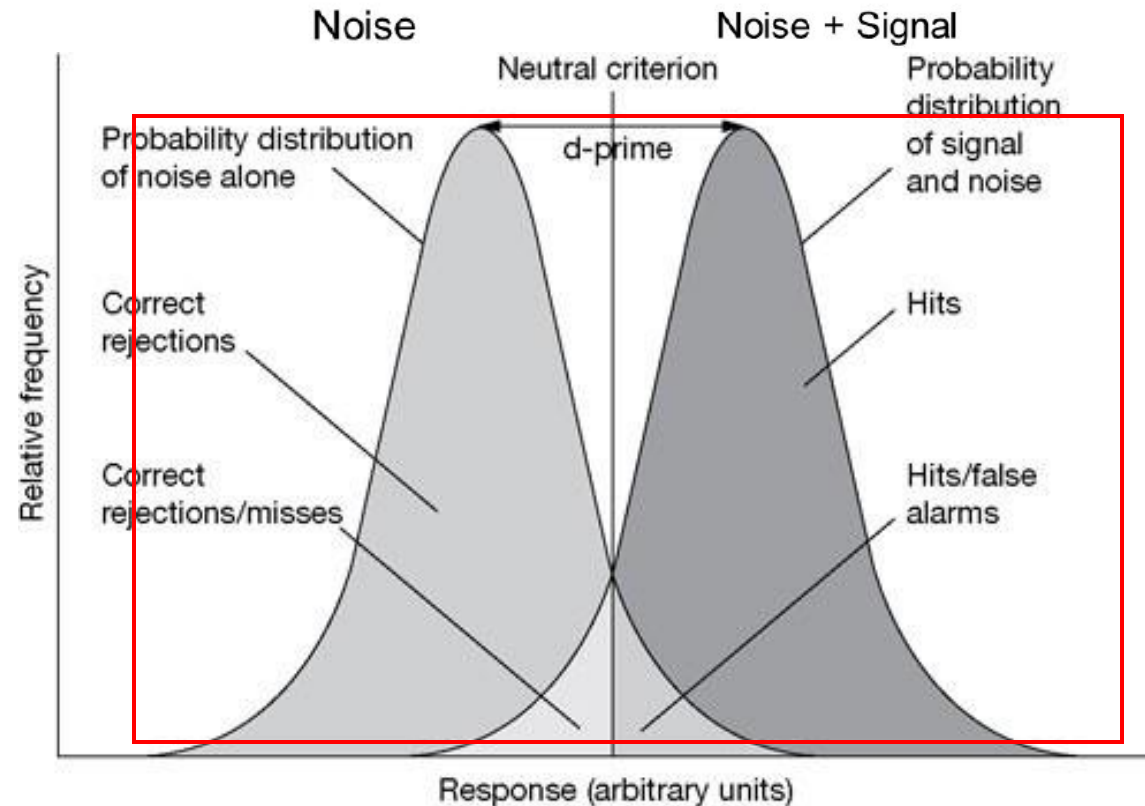
# Components of the distributions



# Bias ( $\beta$ )

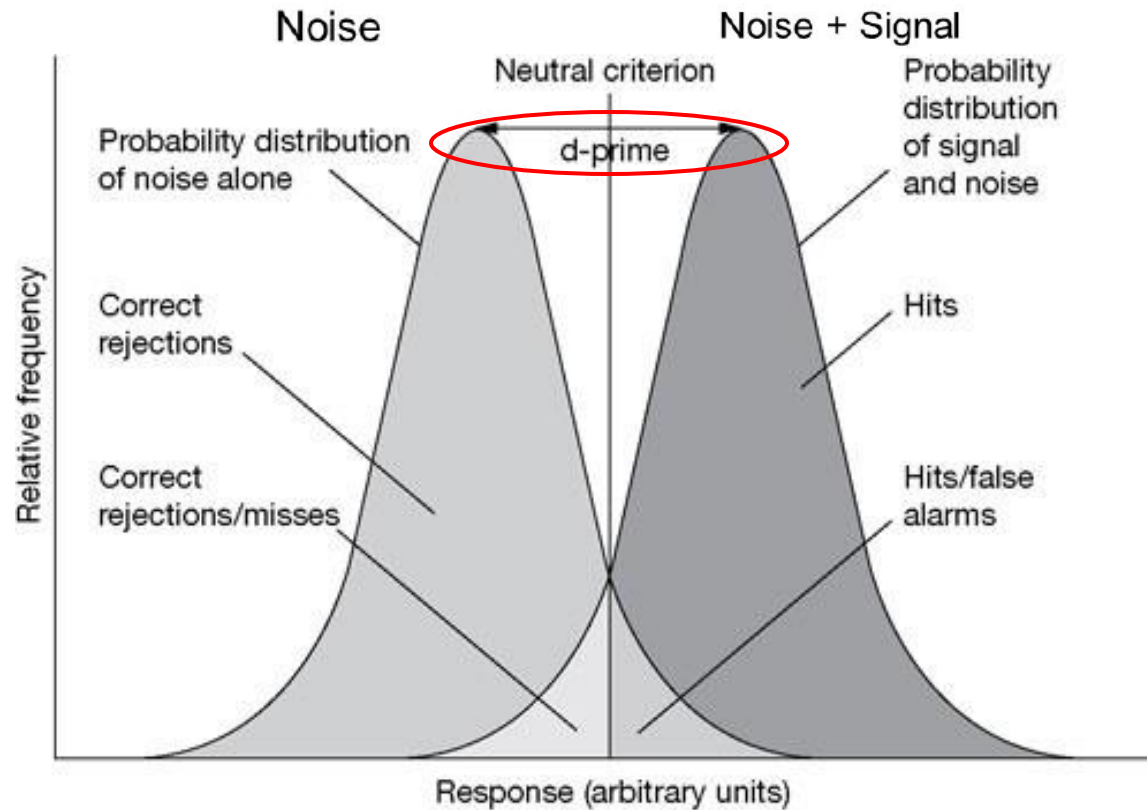
- Bias is calculated relative to the two distributions

Misses : False Alarms  
Hits : Correct Rejections



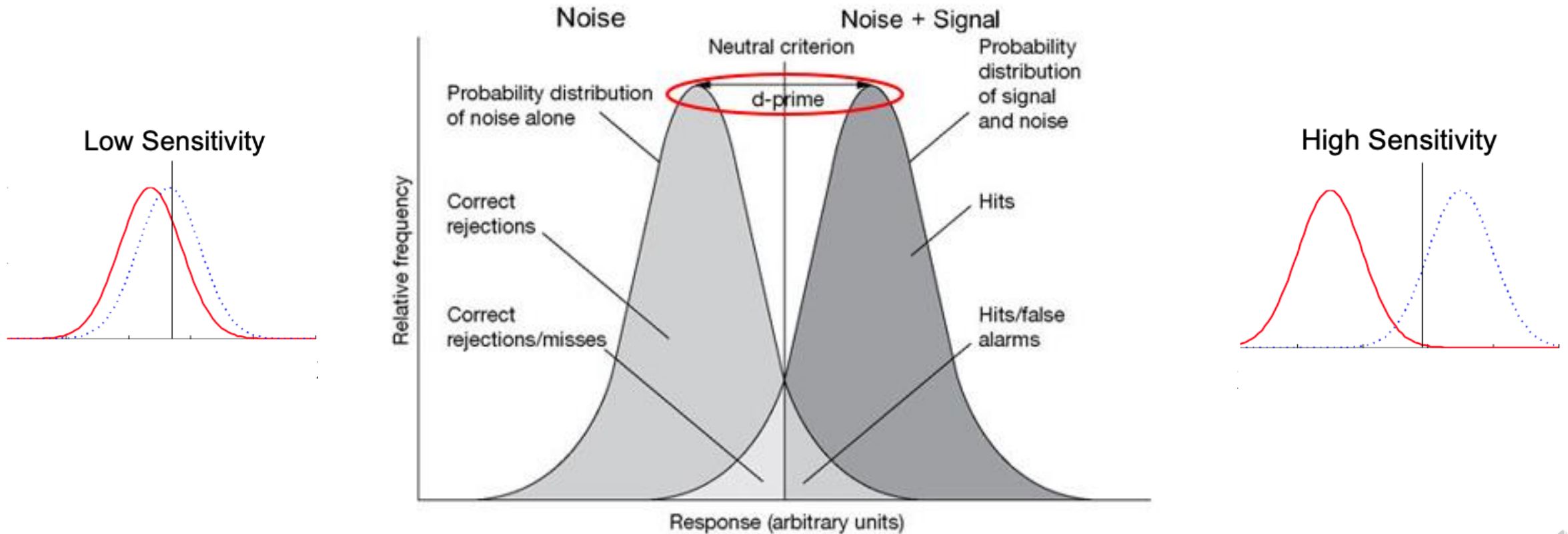
# Sensitivity ( $d'$ )

- The distance between the distributions



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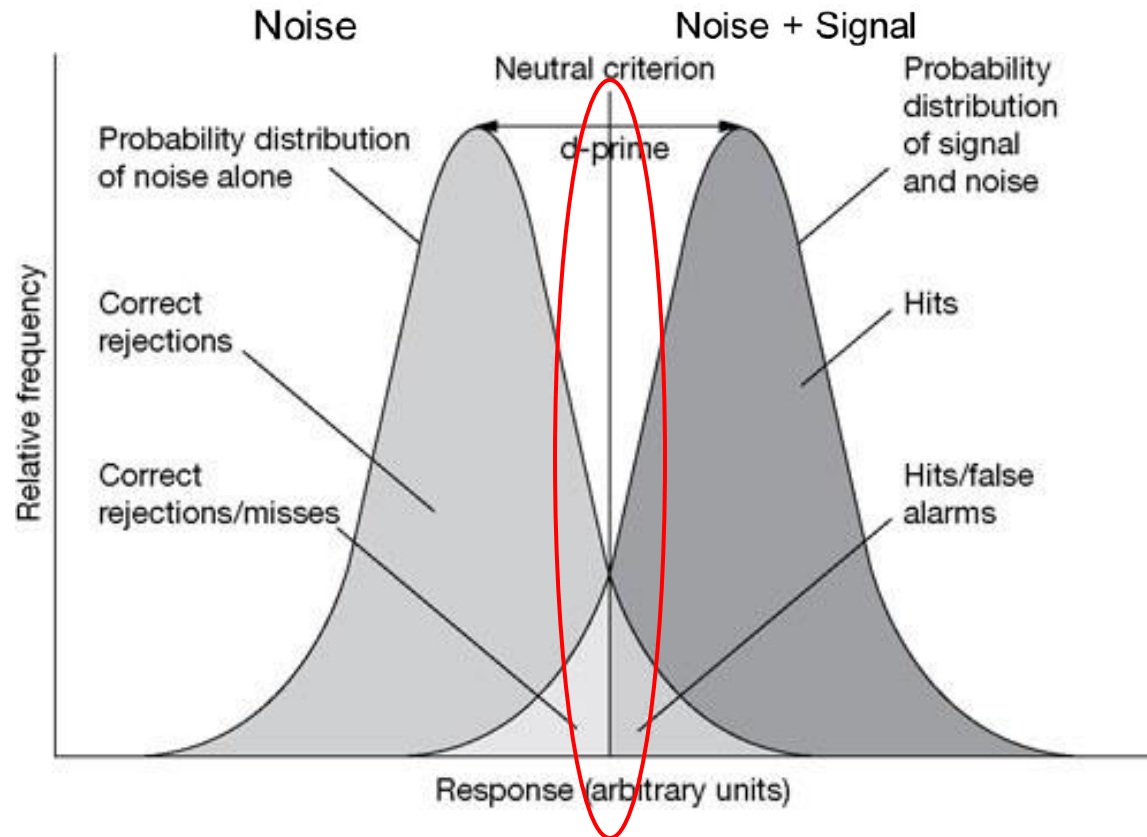
- The distance between the distributions





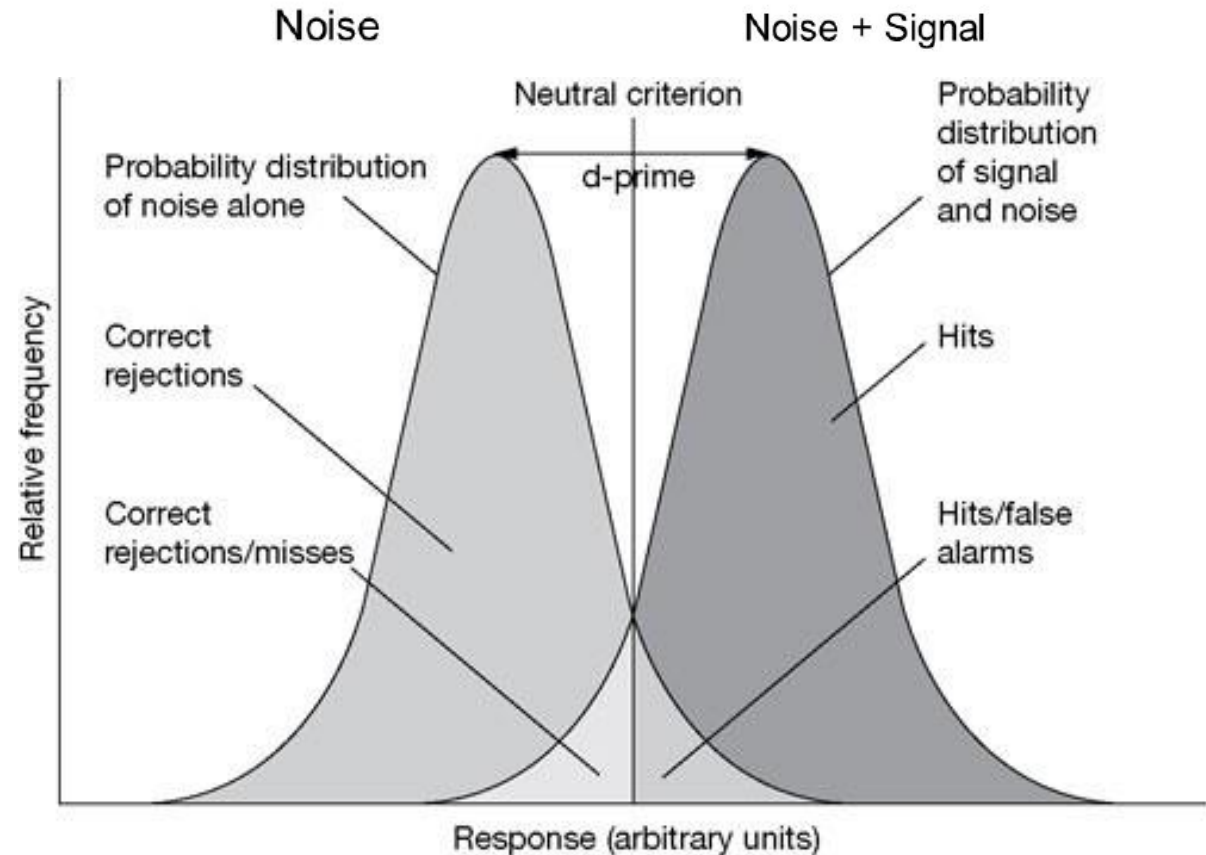
# Criterion ( $X_c$ ) $\lambda$

- Criterion is what separates bias from sensitivity



# Neutral/no bias criterion

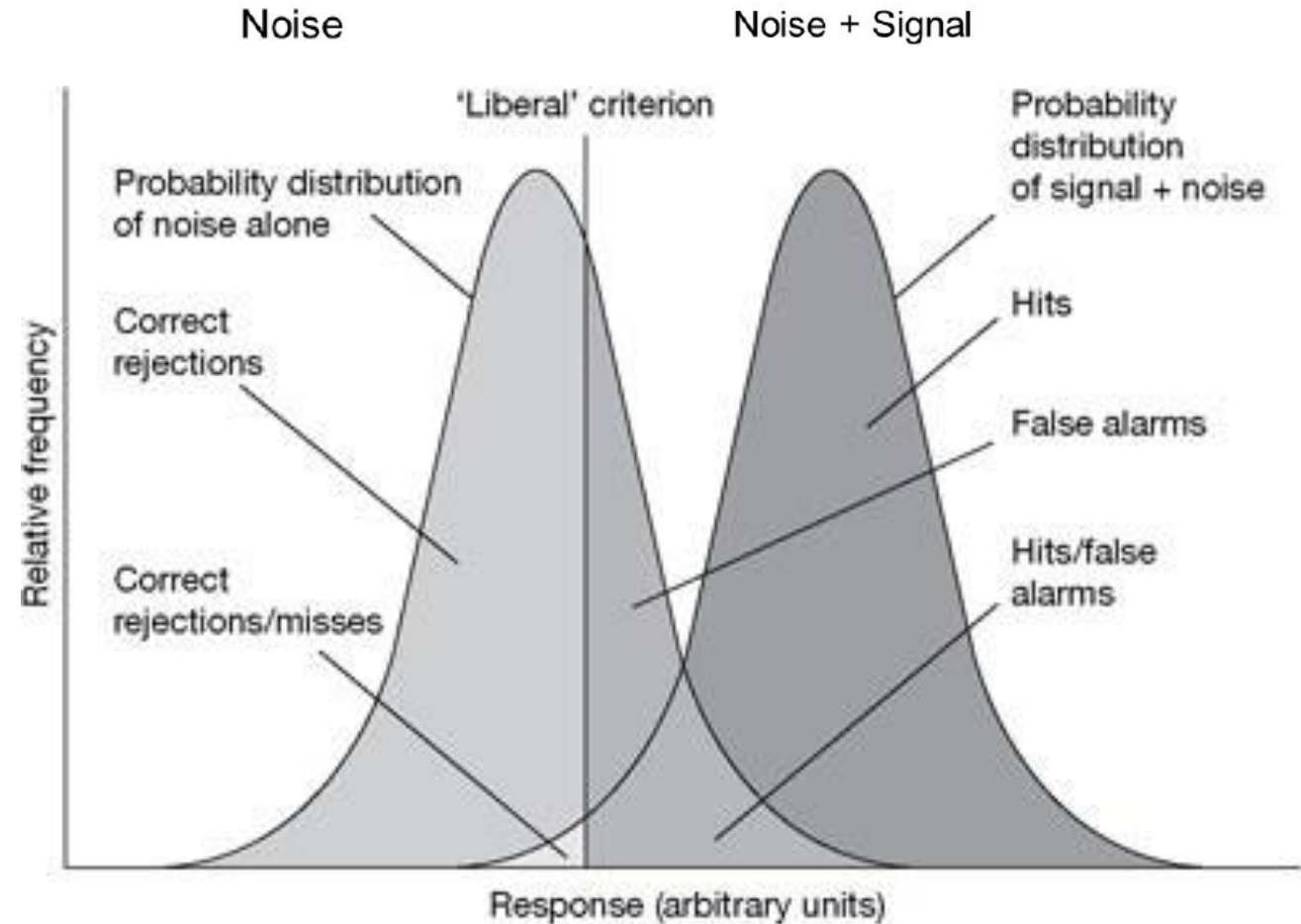
- Gains and costs are equal ( $\beta = 1$ )
  - Misses=False Alarms
  - Hits=Correct Rejections





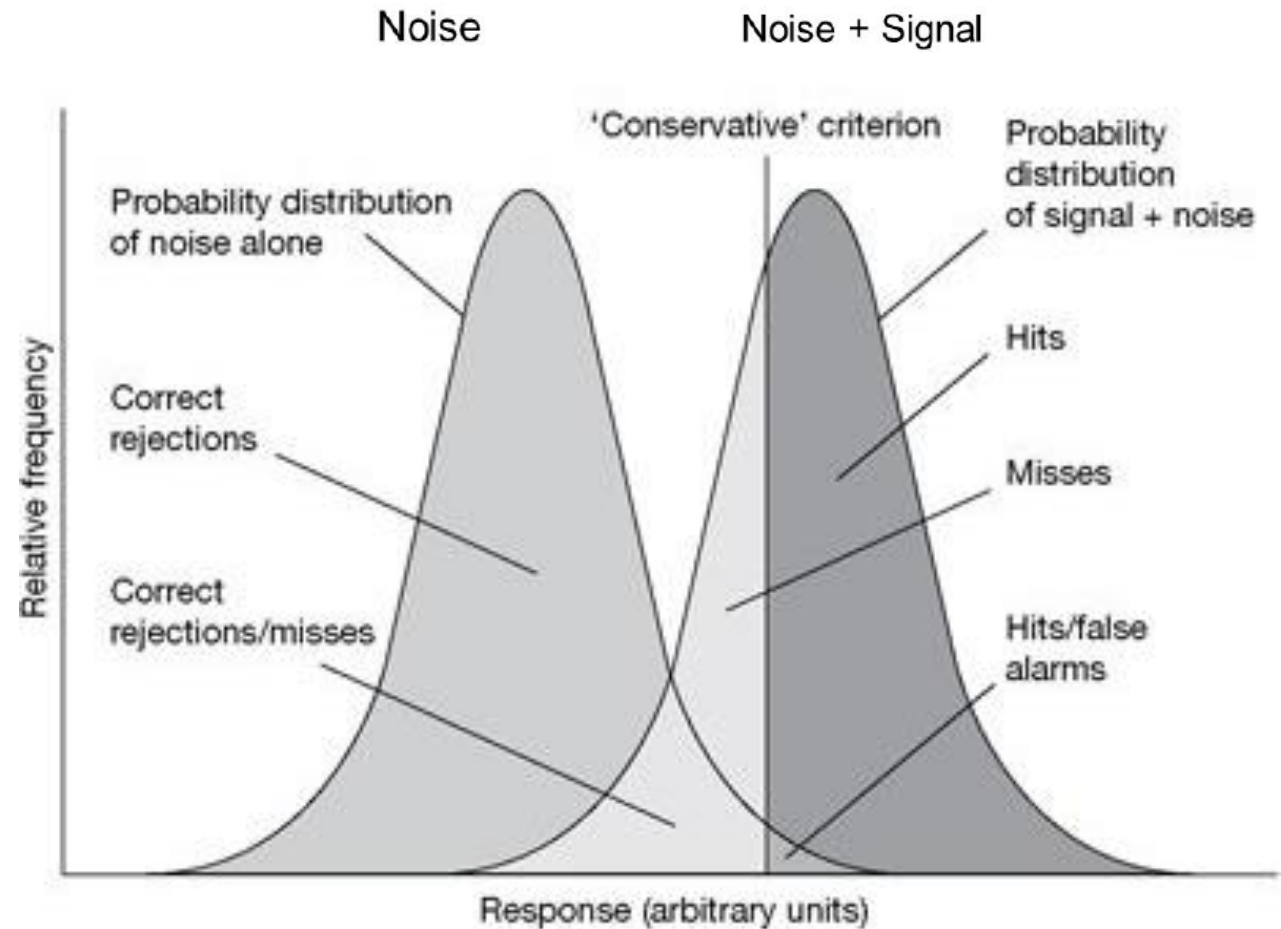
# Risky/liberal bias

- Left shift
- Avoiding misses
- $\beta < 1$



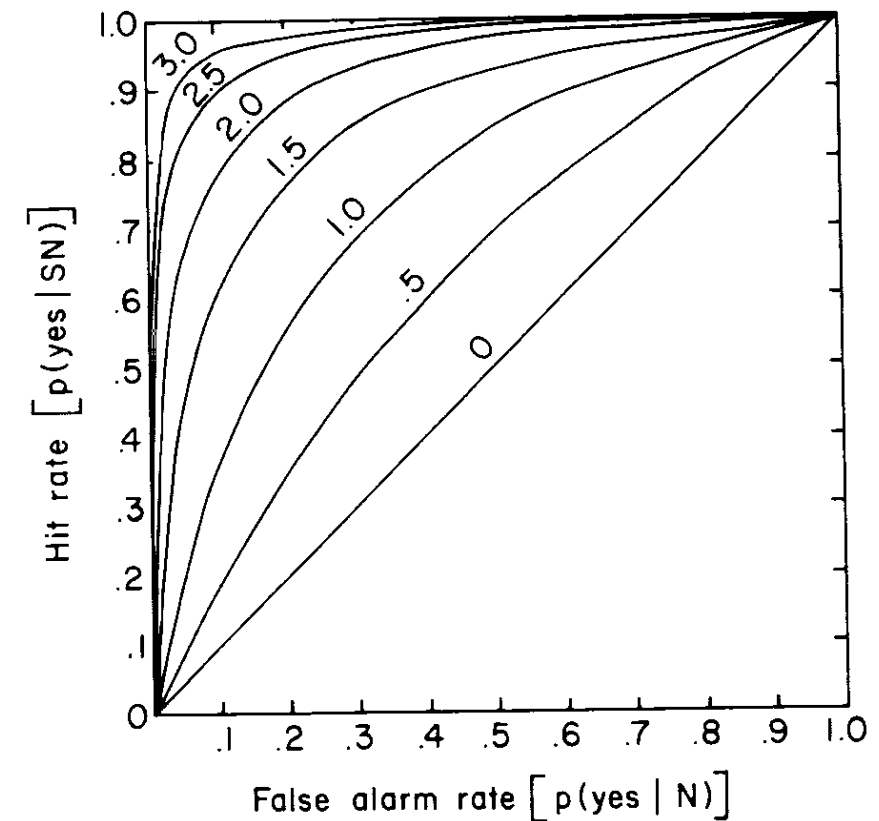
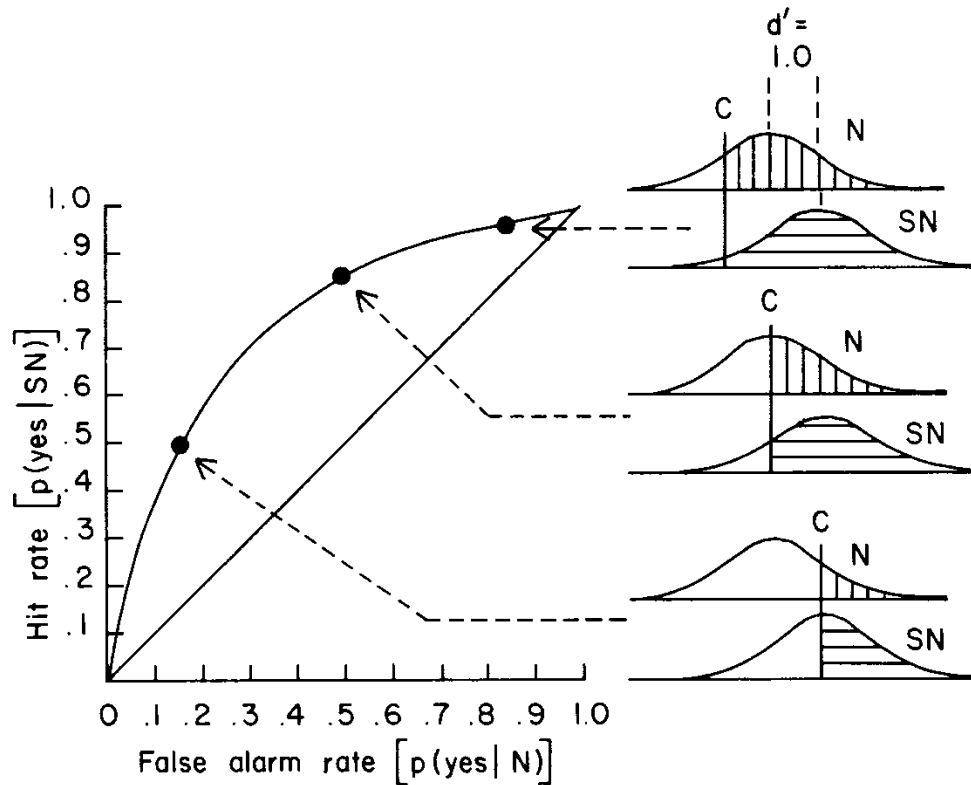
# Conservative bias

- Right shift
- Avoiding false alarms
- $\beta > 1$



# Receiver Operating Characteristic (ROC) Curve

- Illustrating sensitivity and bias



# Literature Review

Using signal detection theory to model changes in serial learning of radiological image interpretation

K. Boutis, M. Pecaric, B. Seeto, M. Pusic (2010)



# Introduction

- Not just about pattern recognition....
  - Discern a signal amongst the noise
- Apply SDT to serial learning task of interpreting radiological images
- Development of expertise
  - Quantify signal detection over time
- Track sensitivity and bias as experience is gained



# Methods

- Participants: *46 total*
  - 20 medical students
  - 6 residents
  - 12 fellows
  - 5 staff pediatric emergency physicians
  - 3 staff radiologists





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- Participants: *46 total*

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- 6 residents

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- 3 staff radiologists

} Low experience group  $n=26$

} High experience group  $n=20$



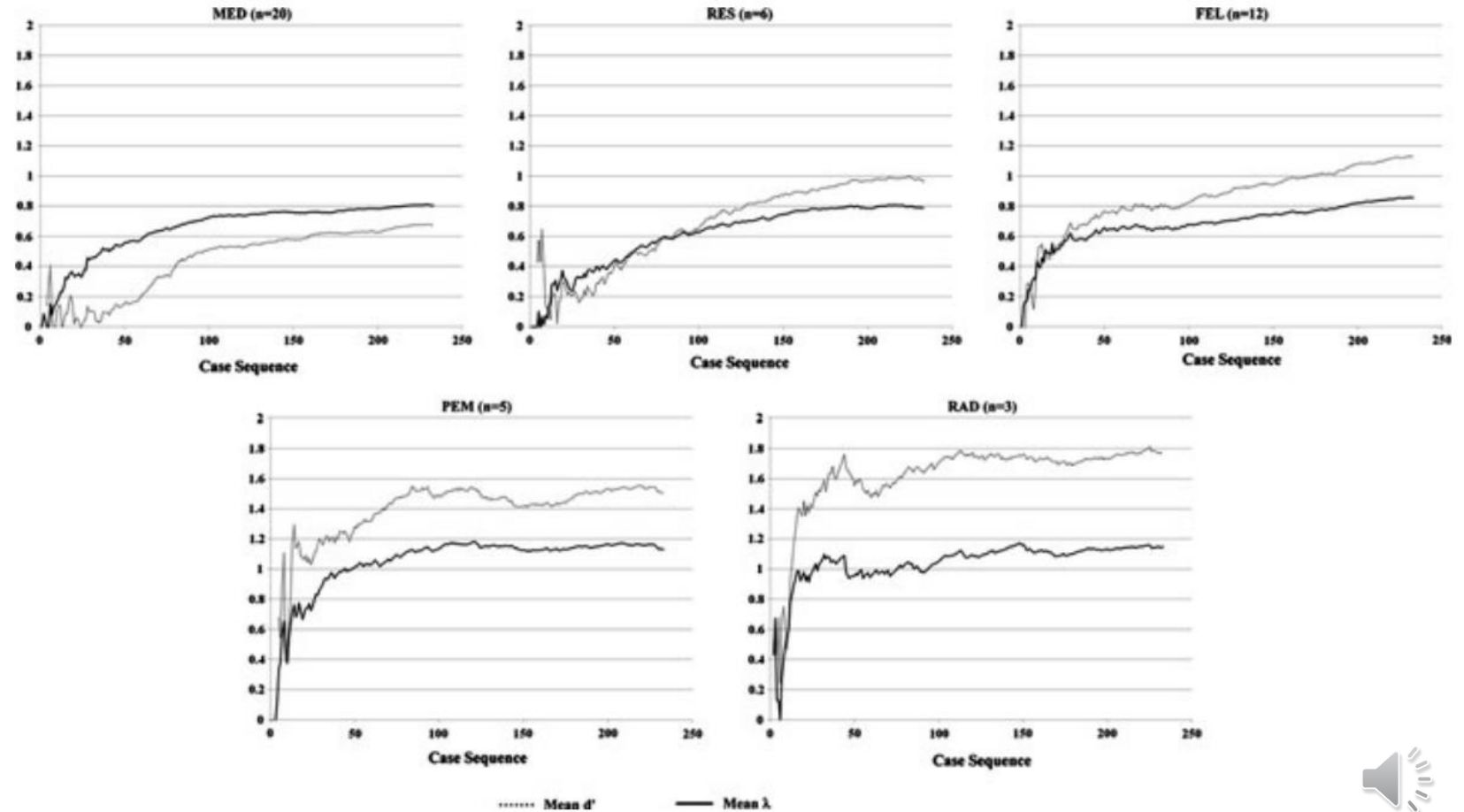
# Methods

- Task
  - Interpret 234 pediatric ankle films as normal or abnormal. If abnormal, indicate where.
  - Given immediate feedback



# Results: sensitivity

- $d'$  was higher for high experience group
  - $d'$  improved with each case for the low experience group
  - $d'$  initially improved for the high experience group, then leveled off

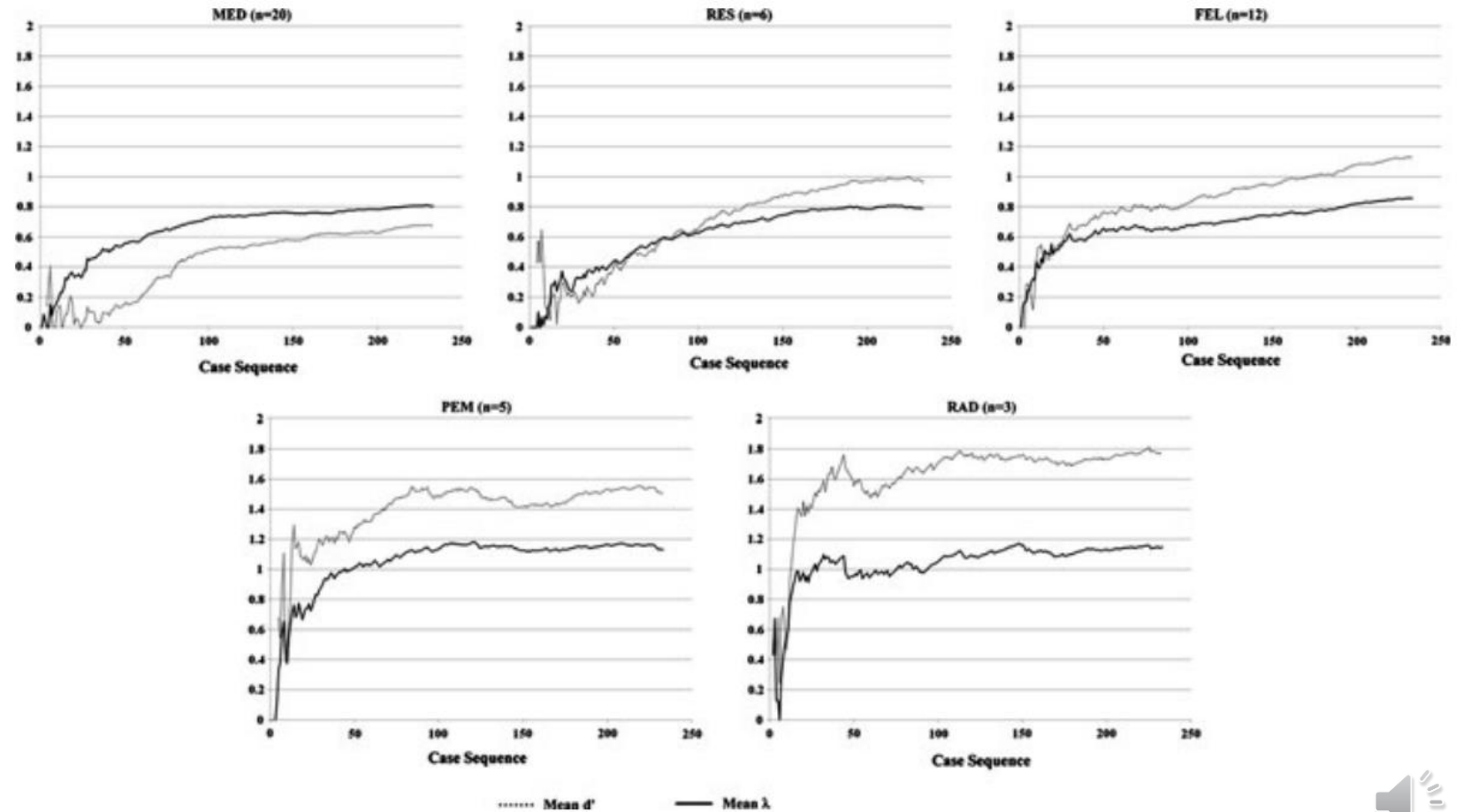


Note:  $\lambda$  is denoted as the criterion



# Results: criterion

- $\lambda$  was stable after ~75-100 reviewed cases for high experience group
  - Maintained a balance between  $d'$  and  $\lambda$
- $\lambda$  was a developmental pattern for low experience group



Note:  $\lambda$  is denoted as the criterion



# Discussion

- With serial exposure to many cases,  $d'$  improved for all groups
  - As expertise level increased,  $d'$  increased
- Low experience groups set a high criterion relative to their discrimination ability
- High experience groups set a low criterion
- Different perceptions of the cost of false positives vs the cost of false negatives





# Limitations

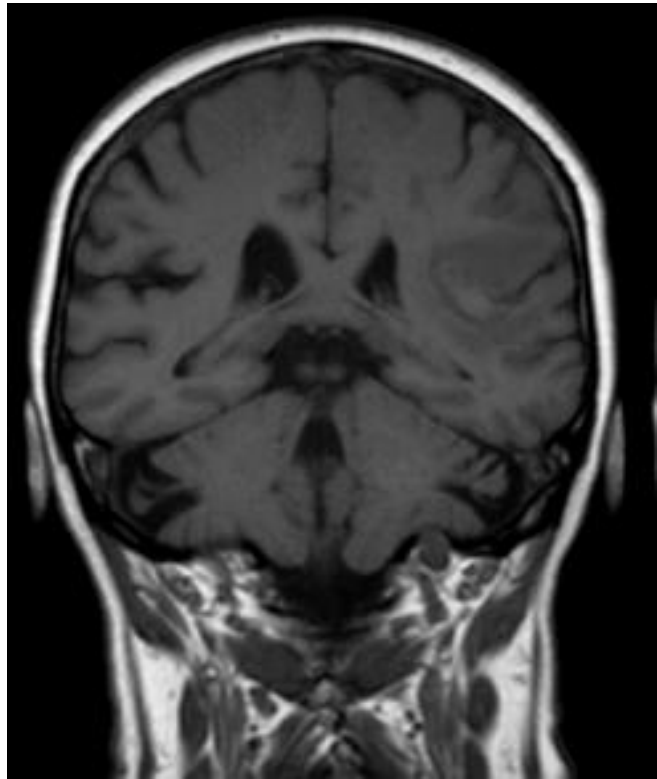
- Knowledge gained from assessing one case is immediately applicable to the next one
- Dichotomous nature: either a fracture is or is not present
- Responder bias
- Small sample sizes in each group



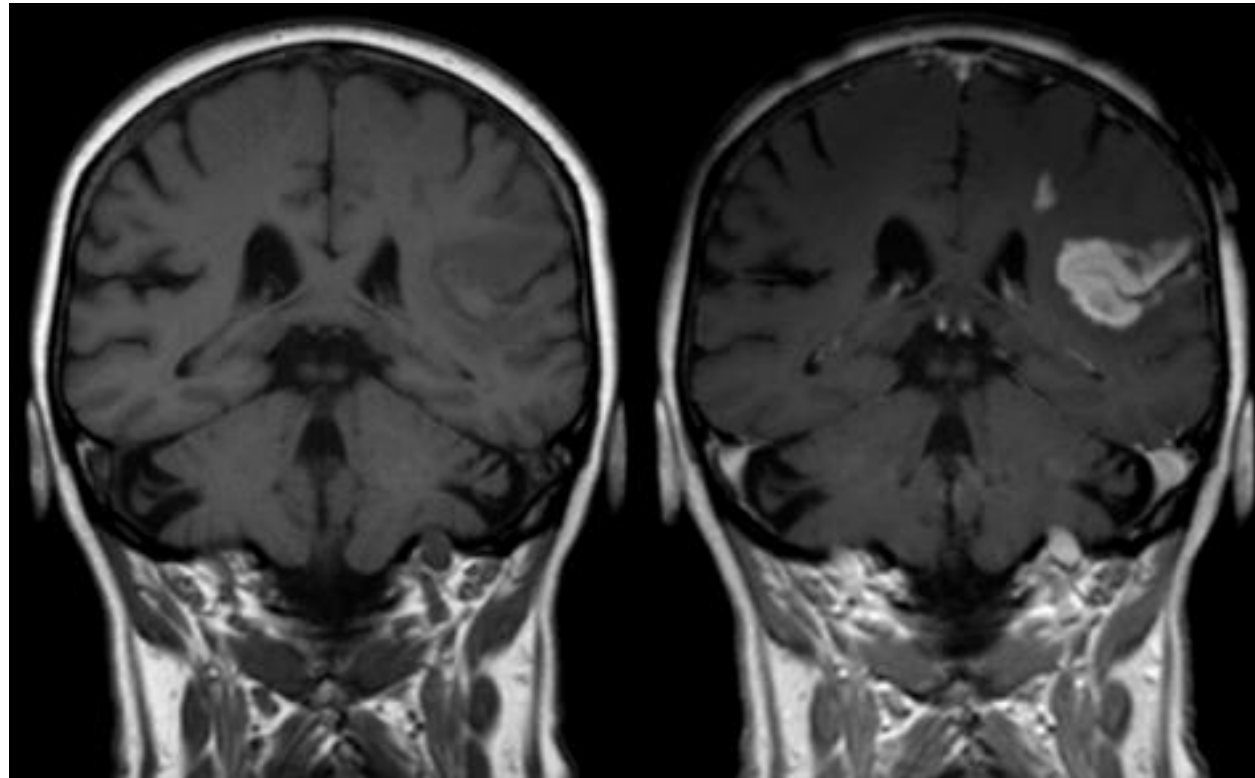
# Examples



# Can you spot the low contrast lesion?

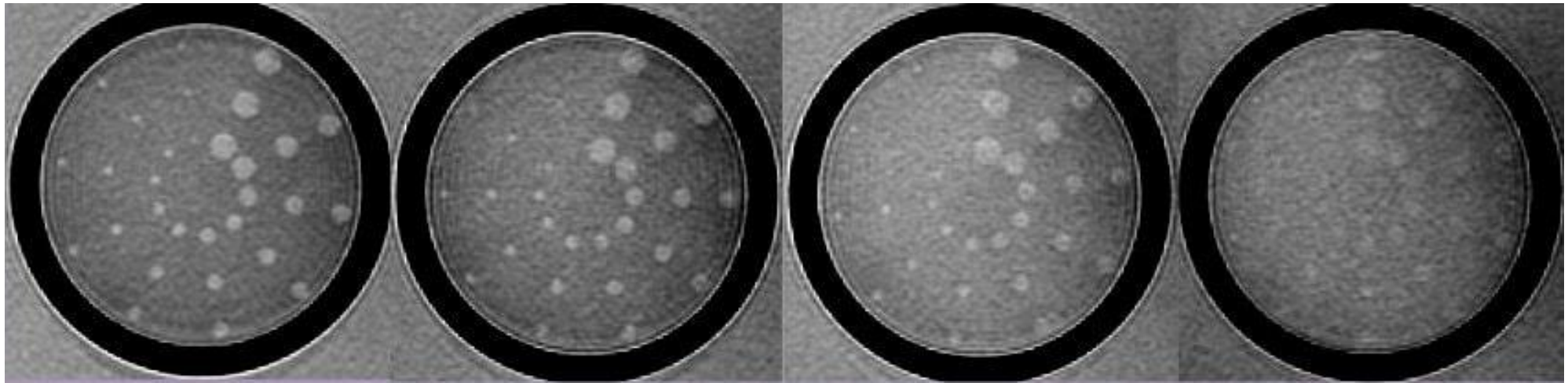


Add IV contrast to increase visibility and differentiate pathology



# MRI Quality Assurance: Low contrast detectability

- Discern spokes within noise
- Tests the capability of the MRI system



# Signal to Noise Ratio (SNR)

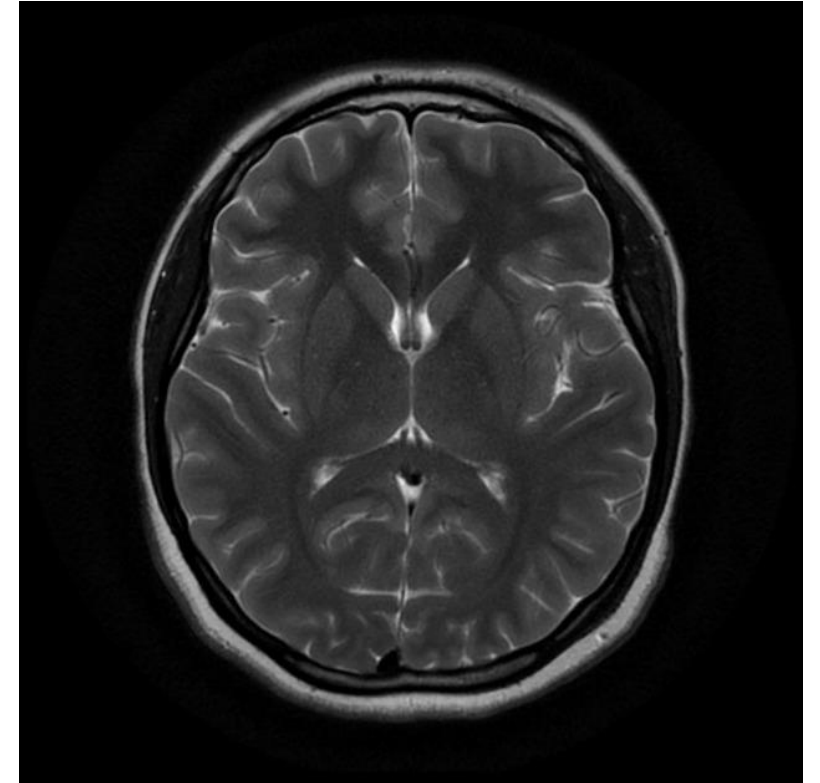
- Poor SNR
  - Noise too high
  - Signal too low





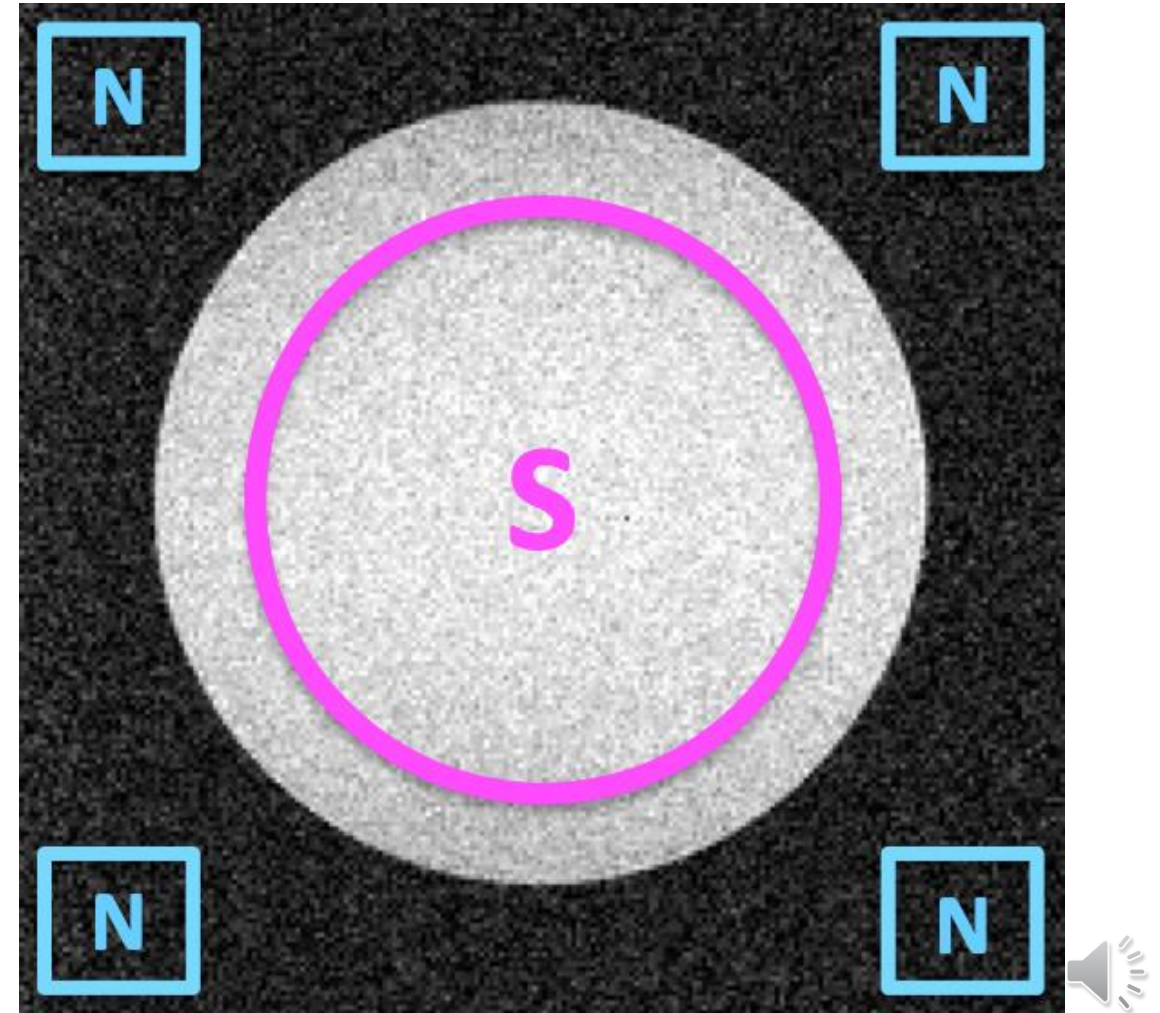
# Signal to Noise Ratio (SNR)

- Optimal SNR
  - Noise decreased
  - Signal increased
- There is still some noise!



# Signal to Noise Ratio (SNR)

- Maintaining a certain amount of signal to the noise
- Monitor trends of SNR to ensure discernability between the two



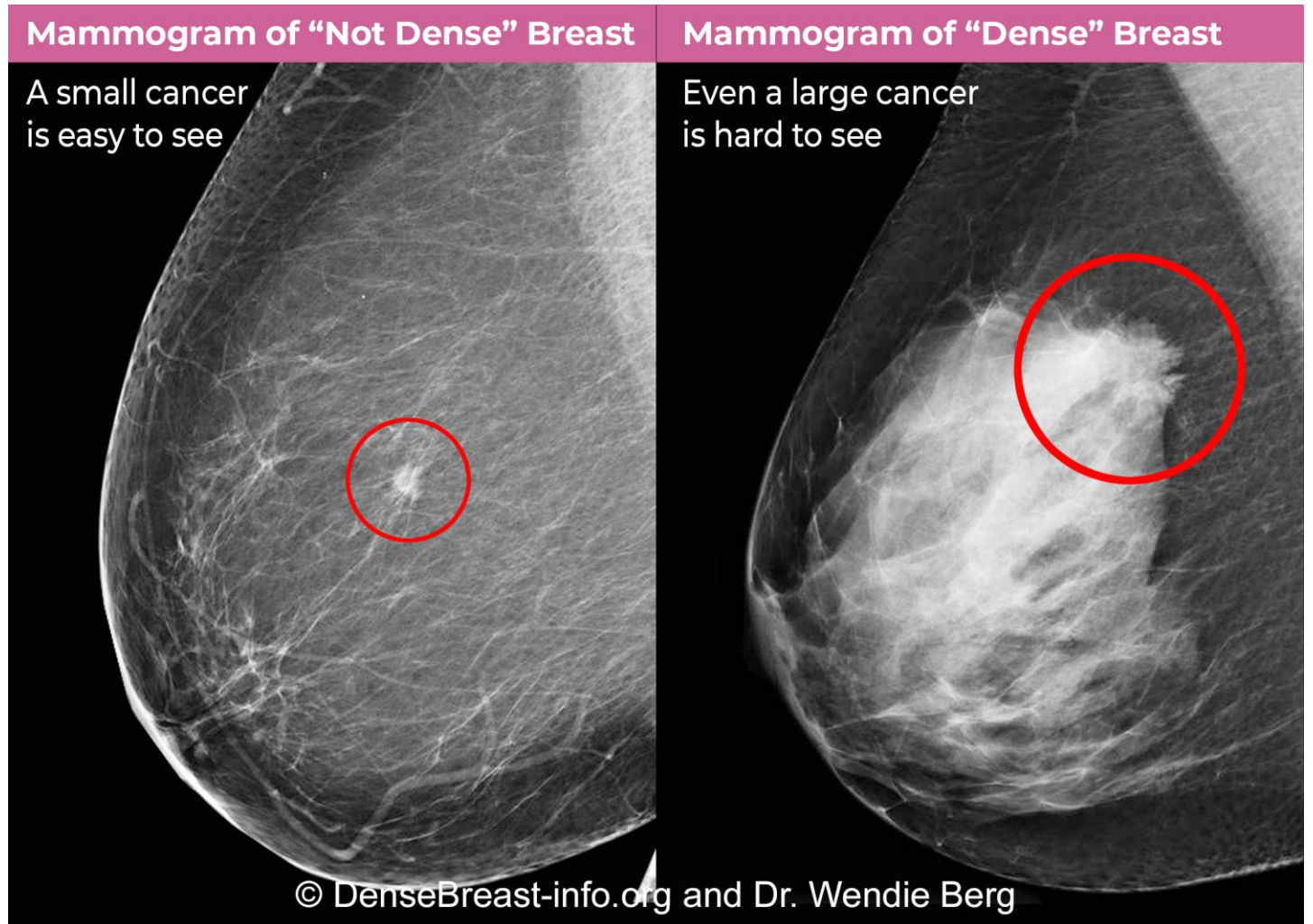
# Artifact or Pathology?

- Artifact : Noise
- Pathology : Signal



# Breast cancer detection

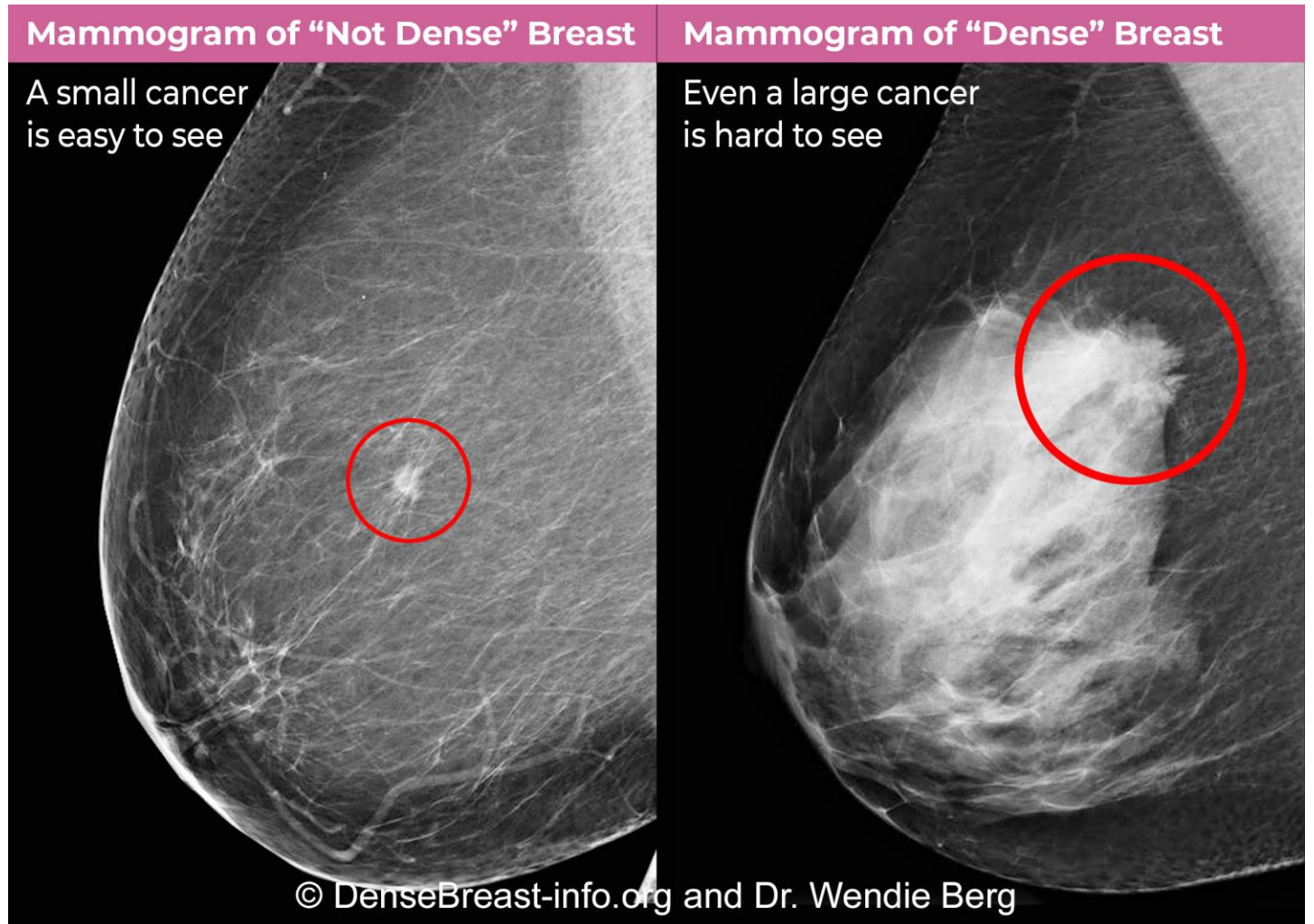
- Breast cancer is harder to detect in dense breast tissue vs not dense tissue
- Patients with dense breast tissue may require a test with a higher sensitivity, such as an ultrasound or MRI





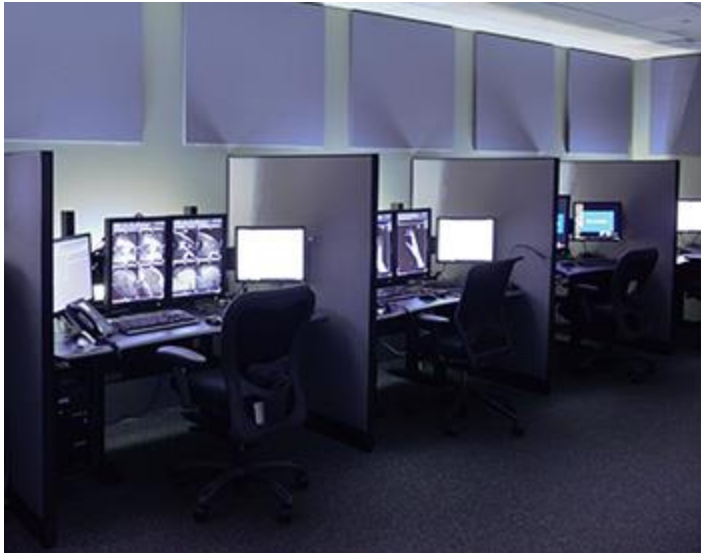
# Breast cancer detection

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# Environmental Noise

- Acoustics
- Lighting
- Interruptions





Thank you!

