BMI260 2019 Problem Set 3

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1 BIOMEDIN 260/RAD260: Problem Set 3 - Mammogram Project

- 1.1 Spring 2020
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1.4 Introduction

Breast cancer has the highest incidence and second highest mortality rate for women in the US.

Your task is to utilize machine learning to study mammograms in any way you want (e.g. classification, segmentation) as long as you justify why it is useful to do whatever it is you want to do. Turning in a deep dream assignment using mammograms might be amusing, for example, but not so useful to patients. That being said, choose something that interests you. As the adage goes, "do what you love, and you'll never have to work another day in your life, at least in BMI 260."

Treat this as a mini-project. We highly encourage working with 1 other person, possibly someone in your main project team.

In addition to the mammograms themselves, the dataset includes "ground-truth" segmentations and mass_case_description_train_set.csv, which contains metadata information about mass shapes, mass margins, assessment numbers, pathology diagnoses, and subtlety in the data. Take some time to research what all of these different fields mean and how you might utilize them in your work. You dont need to use all of what is provided to you.

Some ideas:

1. Use the ROI's or segmentations to extract features, and then train a classifier based on those features using the algorithms presented to you in the machine learning lectures (doesn't need to use deep learning).

2. Use convolutional neural networks. Feel free to use any of the code we went over in class or use your own (custom code, sklearn, keras, Tensorflow etc.). If you dont want to place helper functions and classes into this notebook, place them in a .py file in the same folder called helperfunctions.py and import them into this notebook.

1.5 Data

The data is here:

https://wiki.cancerimagingarchive.net/display/Public/CBIS-DDSM

1.6 Grading and Submission

This assignment has 3 components: code, figures (outputs/analyses of your code), and a write-up detailing your mini-project. You will be graded on these categories.

If you're OK with Python or R, please place all three parts into this notebook/.Rmd file that we have provided where indicated. We have written template sections for you to follow for simplicity/completeness. When you're done, save as a .pdf (please knit to .pdf if you are using .Rmd, or knit to .html and use a browser's "Print" function to convert to .pdf).

If you don't like Python OR R, we will allow you to use a different language, but please turn your assignment in with: 1) a folder with all your code, 2) a folder with all your figures, and 3) a .tex/.doc/.pdf file with a write-up.

1.7 Differentiating between Malignant and Benign Masses in Mammograms using Transfer Learning

1. Describe what you are doing and why it matters to patients using at least one citation.

We will use the VGG-16 CNN to diagnose benign and malignant tumors in mammograms. In doing so, we could help doctors diagnose cancer at earlier stages through discovering malignant tumors that may otherwise be missed. CNNs have been shown to classify mammogram images with an overall sensitivity of 96% and a 0.99 AUC [1]. In contrast, doctors accurately diagnose breast cancer through mammography in about 78% of their patients, with diagnostic accuracy rising to about 83% when female patients are older than 50 [2].

The difference between these scores suggests both a significant need for technological aid as well as the CNN's capacity to effectively improve diagnosis. The chance that a woman will die from breast cancer is about 1 in 38, so reducing this risk could save many women's lives [3]. Early diagnosis gives women the opportunity to receive proper medical care when fighting cancer.

- 1. https://pubmed.ncbi.nlm.nih.gov/31838610/
- 2. https://www.uchealth.org/today/how-accurate-are-mammograms/
- 3. https://www.cancer.org/cancer/breast-cancer/about/how-common-is-breast-cancer.html

2. Describe the relevant statistics of the data. How were the images taken? How were they labeled? What is the class balance and majority classifier accuracy? How will you divide the data into testing, training and validation sets?

The images are taken using low-dose X-ray mammography as the imaging technique. These images were collected from a variety of sources including Massachusetts General Hopsital and Washington University of St. Louis School of Medicine. The images are labeled with diverse information including ROIs for calcifications and masses as well as BI-RADS information about the mass shape, mass margin, breast density, and other data. There also exists other metadata that include the patient age, date of study, scanner used to digitize, and resolution of the image along other data. Cases with abnormalities also contain extra information including the type of abnormality. We will be focusing upon the masses. There is a training set of 653 benign abnormalities and 621 malignant abnormalities. There also exists a testing set with 189 benign abnormalities and 156 malignant abnormalities. As such, the majority classifer accuracy on the test set is .5478. We will keep the groups sorted as given and will not perform any hyperparameter tuning so a validation set will not be neccessary.

3. Describe your data pipeline (how is the data scrubbed, normalized, stored, and fed to the model for training?).

The data pipeline that we developed first used the csv files to link individual patient ID's with the associated diagnosis of whether the mass was benign or malignant. We then looped through all of the individual ROI images in the "data_fixed_crop_w_mask" folder to assign them into either the training malignant folder or the training benign folder. We also cut the images down in size to 224×224 pixels as this is the required input for our version of VGG-16. We chose to cut the images down by taking the center 224×224 pixels and cutting off the border around each image. We then performed the same data preprocessing with all of the individual ROI images in the "test" folder to assign them either to the test malignant folder or the test benign folder and cut them down in size as well to 224×224 pixels.

4. Explain how the model you chose works alongside the code for it. Add at least one technical citation to give credit where credit is due.

```
[21]: import os
      import numpy as np
      import pydicom as dicom
      import matplotlib.pyplot as plt
      import os
      import skimage
      import h5py
      import csv
      %matplotlib inline
      import keras
      import PIL
      from PIL import Image
      from keras.models import Model
      from keras.layers import Dense
      from keras import optimizers
      from keras.preprocessing.image import ImageDataGenerator
```

```
from keras.preprocessing import image
from keras.applications.vgg16 import VGG16
from keras.callbacks import ModelCheckpoint, EarlyStopping
```

```
[22]: #Create a dictionary that links patient id to outcome
dictionary = {};
with open('mass_case_description_train_set-1.csv', 'r') as file:
    reader = csv.reader(file)
    for row in reader:
        key = row[0]

        dictionary[key] = row[9]
with open('mass_case_description_test_set-1.csv', 'r') as file:
    reader = csv.reader(file)
    for row in reader:
        key = row[0]
        dictionary[key] = row[9]
```

```
[26]: #Create the training data set
      directory = "data_fixed_crop_w_mask"
      for folder in os.listdir(directory):
          path = directory + "/" + folder;
          sum = 0
          for filename in os.listdir(path):
              sum += 1
              fullFilePath = directory + "/" + folder + "/" + filename;
              f = h5py.File(fullFilePath, "r")
              datasetNames = [n for n in f.keys()]
              a_group = f['data']
              second = a_group[:,:,1]
              finalImage = second[16:240,16:240]
              patient_ID = "P_" + folder;
              if patient_ID in dictionary:
                  for row in range (0,224):
                      for col in range(0,224):
                          if finalImage[row,col] < .5:</pre>
                              finalImage[row,col] = 0
                          else:
                              finalImage[row,col] = 255
                  im = Image.fromarray(finalImage)
                  im = im.convert("L")
                  if dictionary[patient_ID] == "MALIGNANT":
                      im.save('trainSorted/malignant/'+patient ID+' '+str(sum)+'.
       →png', 'png')
                  else:
```

```
[27]: #Create the testing dataset
      directory = "test"
      for folder in os.listdir(directory):
          path = directory + "/" + folder;
          if path != 'test/.DS_Store':
              sum = 0
              for filename in os.listdir(path):
                  sum += 1
                  fullFilePath = directory + "/" + folder + "/" + filename;
                  f = h5py.File(fullFilePath, "r")
                  datasetNames = [n for n in f.keys()]
                  a_group = f['data']
                  second = a_group[:,:,1]
                  finalImage = second[16:240,16:240]
                  patient_ID = "P_" + folder;
                  if patient_ID in dictionary:
                      for row in range (0,224):
                          for col in range(0,224):
                               if finalImage[row,col] < .5:</pre>
                                   finalImage[row,col] = 0
                              else:
                                   finalImage[row,col] = 255
                      im = Image.fromarray(finalImage)
                      im = im.convert("L")
                      if dictionary[patient_ID] == "MALIGNANT":
                          im.save('testSorted/malignant/'+patient_ID+'_'+str(sum)+'.
       →png', 'png')
                      else:
                          im.save('testSorted/benign/'+patient_ID+'_'+str(sum)+'.
       →png', 'png')
```

Found 1274 images belonging to 2 classes. Found 345 images belonging to 2 classes.

WARNING:tensorflow:From

/Users/ryancrowley/opt/anaconda3/envs/bmi2602/lib/python3.6/site-packages/tensorflow/python/ops/resource_variable_ops.py:435: colocate_with (from tensorflow.python.framework.ops) is deprecated and will be removed in a future version.

Instructions for updating:

Colocations handled automatically by placer.

Model: "model_1"

Layer (type)	Output Shape	Param #
input_1 (InputLayer)	(None, 224, 224, 3)	0
block1_conv1 (Conv2D)	(None, 224, 224, 64)	1792
block1_conv2 (Conv2D)	(None, 224, 224, 64)	36928
block1_pool (MaxPooling2D)	(None, 112, 112, 64)	0
block2_conv1 (Conv2D)	(None, 112, 112, 128)	73856
block2_conv2 (Conv2D)	(None, 112, 112, 128)	147584
block2_pool (MaxPooling2D)	(None, 56, 56, 128)	0
block3_conv1 (Conv2D)	(None, 56, 56, 256)	295168
block3_conv2 (Conv2D)	(None, 56, 56, 256)	590080
block3_conv3 (Conv2D)	(None, 56, 56, 256)	590080
block3_pool (MaxPooling2D)	(None, 28, 28, 256)	0
block4_conv1 (Conv2D)	(None, 28, 28, 512)	1180160
block4_conv2 (Conv2D)	(None, 28, 28, 512)	2359808

block4_conv3 (Conv2D)	(None, 28, 28, 512)	2359808
block4_pool (MaxPooling2D)	(None, 14, 14, 512)	0
block5_conv1 (Conv2D)	(None, 14, 14, 512)	2359808
block5_conv2 (Conv2D)	(None, 14, 14, 512)	2359808
block5_conv3 (Conv2D)	(None, 14, 14, 512)	2359808
block5_pool (MaxPooling2D)	(None, 7, 7, 512)	0
flatten (Flatten)	(None, 25088)	0
fc1 (Dense)	(None, 4096)	102764544
fc2 (Dense)	(None, 4096)	16781312
dense_1 (Dense)	(None, 2)	8194 ========

Total params: 134,268,738
Trainable params: 119,554,050
Non-trainable params: 14,714,688

/Users/ryancrowley/opt/anaconda3/envs/bmi2602/lib/python3.6/site-packages/ipykernel_launcher.py:6: UserWarning: Update your `Model` call to the Keras 2 API: `Model(inputs=Tensor("in..., outputs=Tensor("de...)`

WARNING:tensorflow:From

/Users/ryancrowley/opt/anaconda3/envs/bmi2602/lib/python3.6/site-packages/tensorflow/python/ops/math_ops.py:3066: to_int32 (from tensorflow.python.ops.math_ops) is deprecated and will be removed in a future version.

Instructions for updating:

Use tf.cast instead.

```
Epoch 1/100
0.5469 - val_loss: 1.1089 - val_accuracy: 0.3750
Epoch 2/100
/Users/ryancrowley/opt/anaconda3/envs/bmi2602/lib/python3.6/site-
packages/keras/callbacks/callbacks.py:707: RuntimeWarning: Can save best model
only with val_acc available, skipping.
 'skipping.' % (self.monitor), RuntimeWarning)
/Users/ryancrowley/opt/anaconda3/envs/bmi2602/lib/python3.6/site-
packages/keras/callbacks/callbacks.py:846: RuntimeWarning: Early stopping
conditioned on metric `val_acc` which is not available. Available metrics are:
val_loss,val_accuracy,loss,accuracy
 (self.monitor, ','.join(list(logs.keys()))), RuntimeWarning
0.5156 - val_loss: 0.6396 - val_accuracy: 0.5625
Epoch 3/100
0.5312 - val_loss: 0.9555 - val_accuracy: 0.6250
Epoch 4/100
0.5000 - val_loss: 1.0931 - val_accuracy: 0.4375
Epoch 5/100
0.5156 - val_loss: 0.8782 - val_accuracy: 0.6250
Epoch 6/100
0.5625 - val_loss: 1.3707 - val_accuracy: 0.4688
0.5156 - val_loss: 0.7215 - val_accuracy: 0.5000
Epoch 8/100
0.4531 - val_loss: 1.1456 - val_accuracy: 0.3125
Epoch 9/100
0.5000 - val loss: 0.8169 - val accuracy: 0.4688
Epoch 10/100
0.5312 - val_loss: 0.6293 - val_accuracy: 0.7188
Epoch 11/100
0.5312 - val_loss: 0.9188 - val_accuracy: 0.3200
Epoch 12/100
0.5172 - val_loss: 0.6479 - val_accuracy: 0.6562
Epoch 13/100
```

```
0.5469 - val_loss: 0.6431 - val_accuracy: 0.7188
Epoch 14/100
0.4844 - val_loss: 0.5815 - val_accuracy: 0.6250
Epoch 15/100
0.5781 - val_loss: 0.6333 - val_accuracy: 0.6875
Epoch 16/100
0.5000 - val_loss: 0.7076 - val_accuracy: 0.5938
Epoch 17/100
0.6094 - val_loss: 0.7003 - val_accuracy: 0.6250
Epoch 18/100
0.4844 - val_loss: 0.7134 - val_accuracy: 0.5312
Epoch 19/100
0.4688 - val_loss: 0.7529 - val_accuracy: 0.6250
Epoch 20/100
0.4531 - val_loss: 0.6320 - val_accuracy: 0.7812
Epoch 21/100
0.5781 - val_loss: 0.7100 - val_accuracy: 0.5938
Epoch 22/100
0.5156 - val_loss: 1.0915 - val_accuracy: 0.4400
0.5781 - val_loss: 1.1303 - val_accuracy: 0.5312
Epoch 24/100
0.5938 - val_loss: 0.8501 - val_accuracy: 0.5938
Epoch 25/100
0.5156 - val loss: 0.7272 - val accuracy: 0.5312
Epoch 26/100
0.6562 - val_loss: 0.9167 - val_accuracy: 0.5625
Epoch 27/100
0.4688 - val_loss: 0.6698 - val_accuracy: 0.6250
Epoch 28/100
0.5469 - val_loss: 0.7890 - val_accuracy: 0.4688
Epoch 29/100
```

```
0.4688 - val_loss: 0.6969 - val_accuracy: 0.5938
Epoch 30/100
0.5625 - val_loss: 0.6588 - val_accuracy: 0.6250
Epoch 31/100
0.5469 - val_loss: 0.7104 - val_accuracy: 0.4688
Epoch 32/100
0.5312 - val_loss: 0.7863 - val_accuracy: 0.5625
Epoch 33/100
0.6406 - val_loss: 0.6828 - val_accuracy: 0.5600
Epoch 34/100
0.5781 - val_loss: 0.5340 - val_accuracy: 0.7812
Epoch 35/100
0.5625 - val_loss: 0.6491 - val_accuracy: 0.5938
Epoch 36/100
0.4844 - val_loss: 1.0024 - val_accuracy: 0.4062
Epoch 37/100
0.5312 - val_loss: 0.6312 - val_accuracy: 0.6562
Epoch 38/100
0.5312 - val_loss: 0.6390 - val_accuracy: 0.6562
0.5862 - val_loss: 0.6466 - val_accuracy: 0.5938
Epoch 40/100
0.6406 - val_loss: 0.4824 - val_accuracy: 0.8125
Epoch 41/100
0.5312 - val loss: 0.4995 - val accuracy: 0.6875
Epoch 42/100
0.6719 - val_loss: 0.8575 - val_accuracy: 0.6250
Epoch 43/100
0.6562 - val_loss: 1.0343 - val_accuracy: 0.5625
Epoch 44/100
0.6406 - val_loss: 0.6494 - val_accuracy: 0.7200
Epoch 45/100
```

```
0.6406 - val_loss: 0.7640 - val_accuracy: 0.5938
Epoch 46/100
0.5781 - val_loss: 0.6595 - val_accuracy: 0.5938
Epoch 47/100
0.6875 - val_loss: 0.9666 - val_accuracy: 0.5625
Epoch 48/100
0.5312 - val_loss: 0.7211 - val_accuracy: 0.5625
Epoch 49/100
0.6250 - val_loss: 0.6212 - val_accuracy: 0.5938
Epoch 50/100
0.6406 - val_loss: 0.5563 - val_accuracy: 0.7500
Epoch 51/100
0.7031 - val_loss: 0.4763 - val_accuracy: 0.8750
Epoch 52/100
0.5690 - val_loss: 0.6543 - val_accuracy: 0.6250
Epoch 53/100
0.6250 - val_loss: 0.6946 - val_accuracy: 0.5625
Epoch 54/100
0.5469 - val_loss: 0.6040 - val_accuracy: 0.6875
0.7656 - val_loss: 0.4797 - val_accuracy: 0.7200
Epoch 56/100
0.4688 - val_loss: 0.6656 - val_accuracy: 0.5938
Epoch 57/100
0.6562 - val loss: 0.7704 - val accuracy: 0.5312
Epoch 58/100
0.6094 - val_loss: 0.5655 - val_accuracy: 0.6875
Epoch 59/100
2/2 [============ ] - 57s 28s/step - loss: 0.6500 - accuracy:
0.5781 - val_loss: 0.7270 - val_accuracy: 0.5625
Epoch 60/100
0.5781 - val_loss: 0.6462 - val_accuracy: 0.6562
Epoch 61/100
```

```
0.6562 - val_loss: 0.5686 - val_accuracy: 0.8438
Epoch 62/100
0.6406 - val_loss: 0.6336 - val_accuracy: 0.5312
Epoch 63/100
0.5469 - val_loss: 0.5114 - val_accuracy: 0.7500
Epoch 64/100
0.7188 - val_loss: 0.6305 - val_accuracy: 0.6875
Epoch 65/100
0.6250 - val_loss: 0.8560 - val_accuracy: 0.5938
Epoch 66/100
0.6562 - val_loss: 0.6577 - val_accuracy: 0.6400
Epoch 67/100
0.6094 - val_loss: 0.5147 - val_accuracy: 0.6562
Epoch 68/100
0.7031 - val_loss: 0.5319 - val_accuracy: 0.6562
Epoch 69/100
0.5938 - val_loss: 0.6693 - val_accuracy: 0.6562
Epoch 70/100
0.4844 - val_loss: 0.6290 - val_accuracy: 0.6250
0.5938 - val_loss: 0.6544 - val_accuracy: 0.5938
Epoch 72/100
0.5000 - val_loss: 0.6496 - val_accuracy: 0.5938
Epoch 73/100
0.6875 - val loss: 0.8400 - val accuracy: 0.6250
Epoch 74/100
0.5862 - val_loss: 0.6970 - val_accuracy: 0.6250
Epoch 75/100
0.6094 - val_loss: 0.5657 - val_accuracy: 0.6875
Epoch 76/100
0.6562 - val_loss: 0.6535 - val_accuracy: 0.7188
Epoch 77/100
```

```
0.5938 - val_loss: 0.8955 - val_accuracy: 0.5200
Epoch 78/100
0.7656 - val_loss: 0.5952 - val_accuracy: 0.6875
Epoch 79/100
0.5938 - val_loss: 0.7398 - val_accuracy: 0.5312
Epoch 80/100
0.8281 - val_loss: 0.4768 - val_accuracy: 0.7812
Epoch 81/100
0.6250 - val_loss: 0.5220 - val_accuracy: 0.7188
Epoch 82/100
0.8281 - val_loss: 0.4631 - val_accuracy: 0.7188
Epoch 83/100
0.8125 - val_loss: 0.8964 - val_accuracy: 0.5625
Epoch 84/100
0.7969 - val_loss: 0.9050 - val_accuracy: 0.5938
Epoch 85/100
0.7031 - val_loss: 0.6994 - val_accuracy: 0.7188
Epoch 86/100
0.6562 - val_loss: 0.5831 - val_accuracy: 0.7812
0.5938 - val_loss: 0.5834 - val_accuracy: 0.6875
Epoch 88/100
0.6875 - val_loss: 0.5542 - val_accuracy: 0.7200
Epoch 89/100
0.6562 - val loss: 0.6192 - val accuracy: 0.6875
Epoch 90/100
0.7344 - val_loss: 0.5900 - val_accuracy: 0.6875
Epoch 91/100
0.7241 - val_loss: 0.5826 - val_accuracy: 0.6875
Epoch 92/100
0.6719 - val_loss: 0.4501 - val_accuracy: 0.8125
Epoch 93/100
```

```
0.7188 - val_loss: 0.4050 - val_accuracy: 0.8438
Epoch 94/100
0.7188 - val_loss: 0.7907 - val_accuracy: 0.6875
Epoch 95/100
0.6250 - val_loss: 0.6001 - val_accuracy: 0.6875
Epoch 96/100
0.7031 - val_loss: 0.6046 - val_accuracy: 0.6562
Epoch 97/100
0.7031 - val_loss: 0.5363 - val_accuracy: 0.7188
Epoch 98/100
0.6406 - val_loss: 0.6785 - val_accuracy: 0.5625
Epoch 99/100
0.6562 - val_loss: 0.6503 - val_accuracy: 0.7200
Epoch 100/100
0.6406 - val_loss: 0.5149 - val_accuracy: 0.7500
```

After the data preprocessing steps, we then loaded the data into the correct format by using ImageDataGenerator. From here, we then imported the VGG-16 model that was pretrained on the ImageNet dataset. We then altered the structure of the network such that it only outputs malignant or benign instead of the 1000 different categories it would output in the past. We also altered the network such that the first 19 layers were frozen as part of the transfer learning approach. This approach is overall similar to a transfer learning approach using previously to differentiate between COVID-19 and viral pneumonia with a great deal of success [1].

1.https://arxiv.org/abs/2003.13145

5. There are many ways to do training. Take us through how you do it (e.g. "We used early stopping and stopped when validation loss increased twice in a row.").

We used an early stopping criteria where we would stop if the validation accuracy did not change over the course of two consecutive epochs. Additionally, we trained using a total of 100 epochs with 2 steps per epoch. Our learning rate was eta = 0.0001, and we used Stochastic Gradient Descent with momentum = .9

6. Make a figure displaying your results.

```
[32]: height = [.50939,.61637,.55651,.60192,.62513,.65012,.66319,.63638,.68764,.71263] bars = ('1-10', '11-20', '21-30', '31-40', \( \to '41-50', '51-60', '61-70', '71-80', '81-90', '91-100') \)

y_pos = np.arange(len(bars))

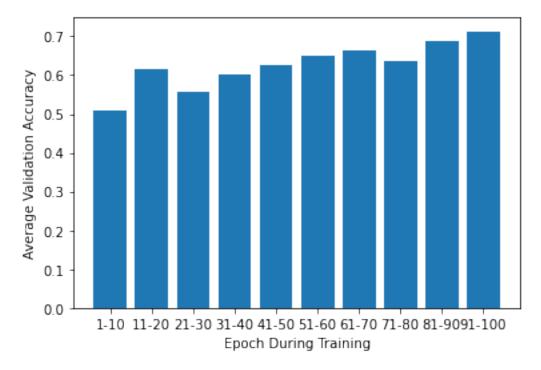
# Create bars
plt.bar(y_pos, height)
```

```
# Create names on the x-axis
plt.xticks(y_pos, bars)

plt.xlabel("Epoch During Training")

plt.ylabel("Average Validation Accuracy")

# Show graphic
plt.show()
```



Here, we assessed the average validation accuracy over 10 different intervals during the training process. Overall, we found that the validation accuracy appeared to increase over the course of the training indicating that the model was working as intended. Of note, the model outperforms the majority classifier accuracy of .5478

7. Discuss pros and cons of your method and what you might have done differently now that you've tried or would try if you had more time.

Of note, this method achieved a moderate level of success with our final 10 iterations of the model averaging a validation accuracy of .71263 Our model appeared to show some success in differentiating between benign and malignant tumors. This is likely largely due to the fact that CNNs are powerful for image analysis and transfer learning can be an effective method for quickly and efficiently training a model. Some possible limitations of our approach included our relatively small amount of data, the fact that no textural features could be calculated due to the fact that our input images were segmentations, and a relatively short training period. Additionally, accuracy

appeared to fluctuate significantly indicating that the model was quite variable. Finally, the model that we developed may not easily fit into clinical workflows due to the need to determine the boundaries of the ROI. If we had had more time and more computational power, we could have tried to use more images to train the dataset and trained the model over the course of more epochs. Of course, there would then exist the possibility of overfitting so if we chose to train for more epochs we would also include additional methods to regularize the model. Overall, our approach shows some promise but also leaves significant room for improvement.

You will not be graded on the performance of your model. You'll only be graded on the scientific soundness of your claims, methodology, evaluation (i.e. fair but insightful statistics), and discussion of the strengths and shortcomings of what you tried. Feel free to reuse some of the code you are/will be using for your projects. The write-up doesn't need to be long (~1 page will suffice), but please cite at least one clinical paper and one technical paper (1 each in questions 1 and 4 at least, and more if needed).

[]: