Medical Image Captioning

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Abstract

Medical Image Captioning (**MIC**) and **Diagnostic Captioning (DC)** aims to describe medical images and generate **radiology-style reports autometically**. These systems integrate **deep learning**, **computer vision**, and **natural language processing** techniques to interpret medical images—particularly **chest X-rays**—and produce accurate descriptive or diagnostic text.

This review paper examines the progression from **Natural Image Captioning (NIC)** to **MIC** and **DC**, highlighting the differences in domain complexity and clinical requirements. It provides an overview of major benchmark datasets, including **IU X-Ray** and **MIMIC-CXR**, and analyzes current state-of-the-art models such as **encoder–decoder architectures**, **attention mechanisms**, and **Transformer-based frameworks**.

The paper also summarizes key challenges faced by MIC systems, including the **limited availability of annotated datasets**, and the need for **clinical correctness** and reliability. Additionally, it reviews widely used evaluation metrics, ranging from standard language metrics like **BLEU** and **CIDEr** to clinically oriented metrics such as **CheXpert** and **RadGraph**.

Objectives

To study the evolution of image captioning from **Natural Image Captioning (NIC)** to **Medical Image Captioning (MIC)** and **Diagnostic Captioning (DC)**.

- **To analyze various deep learning approaches** used for generating **medical image descriptions** and **radiology-style diagnostic reports**.
- **To review major large-scale medical datasets** employed for training **medical captioning models**.
- **To examine evaluation metrics** that assess both **linguistic quality** and **clinical correctness**.
- **To summarize key challenges, limitations, and potential improvements** for the **real-world deployment** of MIC and DC systems.

Significance

- **Medical imaging volume is increasing rapidly**, leading to **high workload** for radiologists and **reporting delays**.
- **Automated captioning systems** can enable **faster** and **more consistent interpretation** of medical images.
- **Early AI-generated descriptions** can support **clinical decision-making**, especially in **resource-limited hospitals**.
- **Understanding existing methods** helps identify **gaps** and guides the development of **safer, more reliable diagnostic AI models**.
- This study aims to improve the **quality**, **accuracy**, and **clinical applicability** of **AI-generated medical reports**.

Research Methodology

- **Relevant studies from 20010–2023** were collected from **WoS**, **Scopus**, **Google Scholar**, **ArXiv**, and other related academic sources.
- Using defined **NIC**, **MIC**, and **DC keywords**, publications were systematically searched (**Fig 2**) and screened using **inclusion–exclusion criteria** (**Fig 1**)
- .A total of **114 studies were selected**, with **most publications appearing in 2018**, showing a peak in research activity.
- Each selected study was classified based on **model type**, **dataset**, and **evaluation metrics**.
- This process enabled a **structured comparison of methods**, **research progress**, and **emerging trends** in **medical image captioning**.

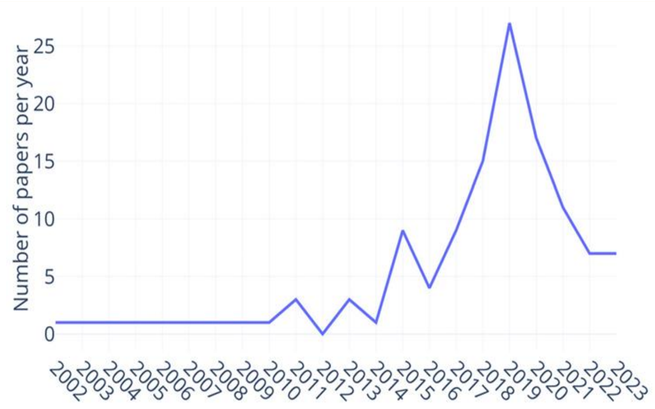

Figure1. Yearly Distribution

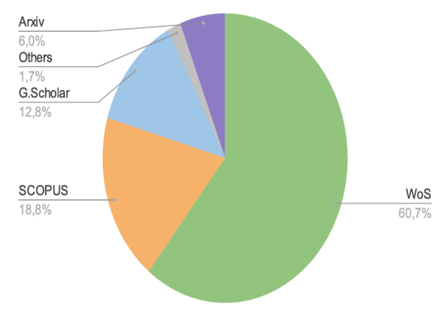

Figure2. Database Distribution

Methods and Materials

- **Datasets Used:** The paper reviews major medical captioning datasets such as **IU X-Ray**, **MIMIC-CXR**, **PadChest**, and **ROCO**. These datasets provide **paired radiographs and reports** essential for training captioning models.
- **Model Approaches:** The study highlights multiple architectures, including **CNN–RNN encoder–decoder models**, **attention mechanisms**, **hierarchical LSTMs** for generating long radiology reports, and **Transformer-based captioning models**. It also covers **dense captioning models** designed to detect and describe **multiple abnormalities**.
- **Preprocessing:** Medical images undergo **normalization**, **cleaning**, and **resizing**. Reports are processed through **tokenization**, **label extraction**, and **vocabulary construction**.
- **Training Pipeline:** Models are trained using **supervised learning** with **cross-entropy loss**, along with **reinforcement learning** techniques such as **CIDEr optimization** to improve clinical-text alignment.

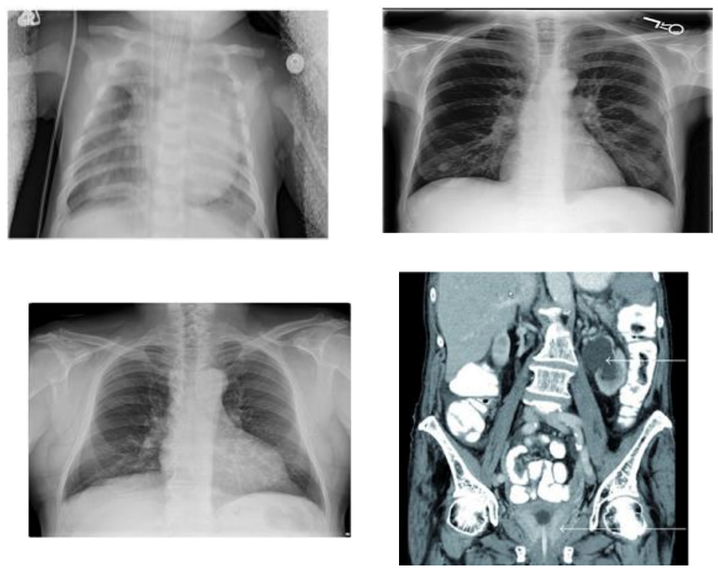

Figure3. Samples of (a) The Indiana University Chest X-ray Collection (IU X-ray), (b) Pathology Detection in Chest Radiographs (PadChest dataset), (c) Medical Information Mart for Intensive Care-Chest X-ray (MIMIC-CXR), (d) Radiology Objects in COntext (ROCO)

Contribution(Natural Image Captioning):

- **Reviewed core image captioning architectures** that form the foundation of **Medical Image Captioning (MIC)** and **Diagnostic Captioning (DC)**.
- **Analyzed encoder–decoder models** using **CNN + LSTM**, which serve as the **baseline captioning approach**.
- **Studied the evolution of attention mechanisms** and examined their role in **enhancing caption quality** and improving focus on important image regions.
- **Compared traditional NIC approaches**, including **retrieval-based** and **template-based systems**, to understand their limitations in medical contexts.
- **Investigated Transformer-based models**, highlighting their improvements in **global context understanding** and long-range dependency modeling.
- **Summarized how NIC techniques are adapted** and extended to meet the **unique requirements of medical imaging**.

Results

- **Transformer-based models** demonstrated **higher caption accuracy** compared to **CNN–RNN** and **attention-only** architectures.
- **Dense captioning models** improved the ability to detect and describe **multiple abnormalities** across different regions of the image.
- **Natural language evaluation scores** (e.g., **BLEU**, **ROUGE**, **CIDEr**) increased as **model complexity** and representational power improved.
- **Clinical metrics**, including **CheXpert F1** and **RadGraph accuracy**, confirmed **more consistent and disease-specific outputs**.
- **Retrieval-based systems** generated **stable but less detailed reports**, while **generative models** produced **richer descriptions** but sometimes introduced **hallucinations**.
- Overall, **Transformer models** provided the **best balance of fluency, accuracy, and clinical correctness** in medical image captioning.

Reference

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2. *Demner-Fushman, D., et al.* (2016). IU Chest X-ray Dataset: A collection of X-rays with paired radiology reports.
3. *Johnson, A., et al.* (2019). MIMIC-CXR**:** A large publicly available chest X-ray dataset with structured labels.
4. *Bustos, A.*, et al. (2020). PadChest Dataset**:** Large-scale labeled chest X-ray database for pathology detection.