

# High-Fidelity Mesh Improvement for MRI-Derived Anatomical Models: A Literature Review

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## 1 Introduction

Building precise three-dimensional (3D) surface meshes from medical images is a fundamental problem on the interface of geometric modeling and computational medicine. Their accuracy is critical because such patient-specific "digital twins" serve as a foundation for computer-aided surgical planning, simulation, and biomechanical analysis. This review considers the art of the state in mesh reconstruction, quality improvement, and evaluation techniques for building anatomically accurate models from Magnetic Resonance Imaging (MRI) data. It combines landmark and recent work in isosurface extraction, mesh smoothing, simplification, and quality metrics to build the foundation for a strong geometric processing pipeline, with specific emphasis on the processing of brain tumor models from the BraTS dataset.

## 2 Isosurface Extraction from Volumetric Medical Data

The core issue in 3D medical modeling is projecting discrete, volumetric data (voxels) of an MRI or CT scan into a continuous polygonal surface (a mesh).

The **Marching Cubes (MC)** algorithm introduced by Lorensen and Cline in their iconic 1987 paper established the definitive foundation for this end [1]. The algorithm breaks the 3D data into a discrete grid of voxels and processes each "cube" independently. Based on whether or not the 8 corner vertices are within or outside a given threshold (isosurface), a case table determines the appropriate triangle topology to use to model the surface through that cube.

At a deeper level, the algorithm considers the 8 corners of a voxel, assigning a binary 1 (inside) or 0 (outside) based on the isosurface threshold. This creates an 8-bit index ( $2^8 = 256$  possible configurations). This index is used to look up a pre-calculated set of triangle edges from a case table. By exploiting rotational and complementary symmetries, these 256 cases reduce to 15 unique topological patterns. The precise location of the triangle vertices along the cube's edges is then determined via linear interpolation of the scalar values at the edge's two endpoints.

While MC was de facto standardized due to its simplicity, efficiency, and robustness, it produces meshes with large geometric artifacts inherent in its local, discrete nature.

Dietrich et al. examined these quality issues in a systematic manner and concluded that "one of the key shortcomings... is the quality of the resulting meshes, which tend to have many poorly shaped and degenerate triangles" [2]. This periodical sampling topology generates huge "staircase" effects and ill-conditioned features with large aspect ratios, which are not good candidates for downstream numerical computation.

Furthermore, the original MC algorithm contained topological ambiguities. Certain configurations of vertex values (specifically, those involving alternating "inside/outside" labels on a cube's face) could be triangulated in multiple ways, leading to algorithm-dependent holes and non-manifold surfaces that are physically incorrect. This ambiguity required subsequent research to develop disambiguation tests and extended lookup tables (e.g., Marching Cubes 33) to ensure a topologically consistent and "watertight" manifold surface is generated.

Although other methods like **Marching Cubes with Edge Transformations (Macet)** [2] or adaptive octree-based methods [3] have been presented to improve initial mesh quality, the consensus opinion is that post-processing is indispensable in order to achieve clinically acceptable geometric accuracy.

### 3 Mesh Smoothing: From Isotropic to Feature-Preserving Methods

The "staircase" artefacts created by Marching Cubes manifest as high-frequency noise on the mesh surface. Mesh smoothing (or "fairing") methods are designed to remove this noise.

#### 3.1 Historical Smoothing and Volume Conservation

Early and straightforward techniques, such as **Laplacian smoothing**, individually move each vertex to the mean of the neighbors. This operation is analogous to a single step of an explicit integration of the heat equation, where "heat" (geometry) flows from high-curvature areas to low-curvature areas, effectively smoothing the surface. While effective at noise reduction, the operation suffers a grave, well-characterized flaw: **severe volume shrinking** [4, 5]. As the mesh is iteratively smoothed, it contracts in on itself like a deflating balloon. In a medical environment, where volumetric measurement directly informs practice, the shrinking is unacceptable.

The field was revolutionized by **Taubin's seminal 1995 paper** [6, 7], in which he introduced a signal processing-inspired non-shrinking smoothing operator. Taubin's algorithm alternates between a shrinking positive and expanding negative smoothing step, which is carefully tuned to yield a low-pass filter that removes high-frequency noise but maintains the model's overall volume rigorously.

This method is often described as a  $\lambda/\mu$  filter. The first step is a standard Laplacian smooth (the "shrinking" step) weighted by a positive scale factor  $\lambda$ . The second step is a "reverse" Laplacian smooth (the "expanding" step) weighted by a negative scale factor  $\mu$ , where  $0 < \lambda < -\mu$ . This two-step process effectively designs a filter that dampens high-frequency noise (smoothing) while preserving the low-frequency "signal" (the overall shape and volume). This is an entirely essential feature for medical imaging applications.

Further work by Desbrun et al. [8] suggested an **implicit fairing** method, where smoothing is an implicit solution of a diffusion equation. This formulates smoothing as solving a large linear system. This allows the use of larger time steps and a more stable and computationally less expensive smoothing process that also preserves volume, as it avoids the instability of explicit integration schemes.

#### 3.2 Anisotropic and Feature-Preserving Techniques

One of the significant shortcomings of isotropic algorithms (like trivial Laplacian and Taubin) is that they smooth *everything*, including important, sharp anatomical features. To address this, anisotropic (feature-preserving) algorithms were developed.

- **Bilateral Filtering:** Based on 2D image filtering by Fleishman et al. [9], this operation filters vertices along normals. It smooths vertex positions not only in the spatial sense but also in terms of **normal**

**similarity.** This is achieved by using two weighting kernels: a spatial kernel (Gaussian) that weights neighbors by their Euclidean distance, and a range kernel (also Gaussian) that weights them by the difference in their vertex normals. This two-stage weighting smooths plane regions nicely (where neighbors are close and have similar normals) while preserving dramatic detail at places where normals abruptly change (where the range kernel's weight drops to near-zero).

- **Robust Statistics:** Jones, Durand, and Desbrun [10] introduced a quite novel, non-iterative scheme that formulates feature preservation as an outlier detection problem. Sharp features are identified as "outliers" and are not accounted for in the local smoothing computation, resulting in excellent preservation of fine detail.
- **Anisotropic Diffusion:** Bajaj and Xu [11] developed PDE-based methods using diffusion tensors that guide the smoothing. Diffusion is encouraged perpendicular to sudden edges (smoothing *along* the feature) but restricted parallel to them (preventing the loss of sharpness of the feature).

While these newer more advanced techniques offer increased feature preservation, they introduce high algorithmic complexity and a more sensitive parameter-tuning process. Taubin's method is nonetheless still a solid foundation and robust baseline that tackles the primary artifact (noise) and essential constraint (preservation of volume) of medical meshes, making it an ideal candidate for a robust, reproducible pipeline.

## 4 Mesh Simplification and Level-of-Detail Representations

Marching Cubes meshes are not only noisy, but also ridiculously dense, typically composed of millions of triangles. Such so-called "triangle soup" is computationally unfeasible for real-time simulation, surgical planning, or visualization. Mesh simplification (or "decimation") algorithms eliminate such complexity in an intelligent way.

### 4.1 Quadric Error Metrics (QEM)

The mesh simplification technology was fundamentally transformed with **Garland and Heckbert's 1997 breakthrough in Quadric Error Metrics (QEM)** [12, 13]. QEM provides a fast, accurate, and memory-dynamic geometric approximation technique.

The algorithm repeatedly applies **edge contractions**. For each edge, it calculates the "cost" of contracting into a new vertex. This error is expressed as the sum of squared distances from the new vertex to the collection of planes given by the triangles that originally enclose the edge. This "quadric error" metric elegantly quantifies the local surface shape.

Mathematically, each vertex  $v$  stores a  $4 \times 4$  symmetric matrix  $K_v$  that represents the sum of the fundamental error quadrics for its incident faces. Each face's quadric is derived from its plane equation  $ax + by + cz + d = 0$ , and the matrix  $K_v$  stores the coefficients of this squared distance formula. The brilliance of this method is that when an edge  $(v_i, v_j)$  is contracted to a new vertex  $v_{new}$ , the error quadric for the new vertex is simply  $K_{new} = K_i + K_j$ . The algorithm then solves for the position of  $v_{new}$  that minimizes this new quadric error. This matrix-based approach makes calculating the cost of a collapse and the position of the new vertex computationally trivial.

The algorithm greedily collapses the lowest-error edges first, eliminating triangles judiciously in flat, low-detail areas while carefully preserving high-curvature detail. Later extensions further expanded QEM to accommodate other vertex attributes like texture coordinates and color [14].

## 4.2 Progressive Mesh Representations

As a result of this, **Hoppe developed the Progressive Mesh (PM) representation** [15, 16]. A PM has a coarse base mesh and a series of "vertex split" operations (the opposite of edge contractions) that progressively add detail. It is an "efficient, lossless, continuous-resolution representation" that is more than a static reduced mesh; it can handle smooth geomorphing between levels of detail and selective refinement, which is ideal for progressive network transmission and interactive visualization.

The PM data structure stores  $M_0$ , the simplest possible base mesh, and a sequence of  $n$  'vsplit' records. Each 'vsplit' record stores all the information needed to reverse one edge collapse, effectively splitting one vertex back into two. This continuous-resolution model allows a user to, for example, transmit the tiny  $M_0$  first for a fast preview, and then stream the 'vsplit' records to progressively refine the model as more data arrives. It also enables view-dependent rendering, where parts of the mesh far from the camera are kept at a low level of detail, while parts close to the camera are selectively refined.

## 5 Mesh Quality Measures and Geometric Analysis

In order to confirm the "improvement" in a mesh, there needs to be a strict quantitative basis. The literature presents a consensus for a number of fundamental metrics.

- **Element Quality:** It is a description of the "goodness" of one triangle. The most common measure is **Triangle Aspect Ratio** [17], the longest side over the shortest altitude. An ideal equilateral triangle will have an aspect ratio of 1, while high-ratio sliver triangles are thin and long and computationally unstable. These poorly-conditioned elements are a major source of numerical instability in finite element analysis (FEM) and can cause visual artifacts in rendering due to poor normal vector approximation [18]. The higher-quality meshes will have a low mean aspect ratio and minimal degenerate elements.
- **Geometric Fidelity:** This measures to what extent the resulting (processed) mesh has diverged from the original. The standard is the **Hausdorff Distance** [19], which is defined as the greatest distance of a point on one surface to the closest point on the other. More formally, the symmetric Hausdorff distance  $d_H(A, B)$  is  $\max(d(A, B), d(B, A))$ , where  $d(A, B)$  is the one-sided distance  $\sup_{a \in A} \inf_{b \in B} \|a - b\|$ . Using the symmetric distance ensures that the metric is not skewed by an outlier on only one of the meshes. This provides a strict, bounded measure of geometric error.
- **Feature Preservation:** In an effort to preserve anatomical features, **Mean Curvature Error** is used. "Bend" is a term that curvature measures. Mean curvature at a point is the average of the two principal curvatures ( $k_1, k_2$ ), providing a scalar value that describes how "pointy" or "saddle-like" a surface is. Relating the original mesh's curvature map to the simplified/smoothed mesh, one can qualitatively quantify whether high-curvature features (such as sulcal folds) have been blurred or preserved [20, 21].
- **Volumetric Accuracy:** As already noted, **Volume Change (%)** is an extremely significant quantity for medical models. For a graphical model, a 5% volume change might be visually imperceptible. For a clinical model of a brain tumor, a 5% change in volume could be the difference between recommending radiotherapy or surgery. This metric ensures the "digital twin" remains a valid tool for quantitative measurement.

## 6 Medical Applications: Brain Surface Reconstruction

Geometric processing problems are particularly acute in neuro-imaging.

- **FreeSurfer:** The work of Dale, Fischl, and colleagues on the **FreeSurfer** pipeline [22, 23] is the yardstick to which all other reconstruction of cortical surfaces is measured. Their pipeline includes sophisticated steps for tissue segmentation, **topology correction** (a step needed to remove single-voxel "handles" that incorrectly connect adjacent sulci) [24], and surface deformation to create geometrically accurate and topologically consistent models of the cerebral cortex.

This topology correction, or "manifold surgery," is essential because a single voxel misclassification in the MRI segmentation can create an erroneous bridge (a topological "handle") between two gyri that should be separate. Fischl et al. [24] developed automated methods to "cut" these handles and "fill" the resulting holes, ensuring the final mesh is topologically equivalent to a sphere (i.e., genus 0), which is the correct topology for a cerebral hemisphere.

- **BraTS Dataset:** The **Brain Tumor Segmentation (BraTS) challenge** [25, 26] provides a large, standardized, multi-institutional MRI dataset annotated by experts with tumor sub-regions. This benchmark is essential for algorithm development and verification, in that it is the real-world situation of clinical data, with noise, artifacts, and anatomy variability.

Specifically for this project, the BraTS dataset provides multi-label segmentation masks (e.g., in '.nii.gz' format). These masks typically contain multiple labels: Label 1 for the necrotic and non-enhancing tumor core, Label 2 for the peritumoral edema, and Label 4 for the enhancing tumor. A key step in the project's pipeline will be to process this mask, for example by combining all tumor components (labels 1, 2, and 4) into a single binary volume, from which the Marching Cubes algorithm can then extract the single isosurface representing the entire tumor mass.

## 7 Synthesis and Gaps Filled by This Project

The literature proposes an unequivocal multi-step mesh enhancement process: (1) Isosurface extraction, (2) Feature-preserving smoothing, and (3) Quality-aware simplification. Consensus is attained that classic smoothing reduces volume (solved by **Taubin**) and classic simplification erases details (solved by **QEM**). Adequate validation requires a set of measures (aspect ratio, Hausdorff distance, curvature, volume).

This review, however, also calls for a number of existing major shortcomings which will be addressed by this project:

1. **Limited Comparative Work on Challenging Data:** Each algorithm is well-documented, but systematic, "apples-to-apples" comparative studies are limited. Most calibration experiments are done on clean CAD models or healthy-brain data. Performance on noisy, artifact-mixed, and geometrically challenging **brain tumor data** is not well characterized.
2. **Tuning of Pipeline and Parameters:** There is little advice in the literature on how to parameterize and optimize a *pipeline*. How many Taubin iterations should be done before simplification? What is the impact of aggressive smoothing on the final QEM error? This project will define a "best-practices" model for this interaction.
3. **Validation on Modern Challenge Datasets:** This research will robustly evaluate this "classic" geometric pipeline (Marching Cubes → Taubin → QEM) on the modern, clinically-applicable **BraTS 2023 dataset**, providing an informative and reproducible benchmark for upcoming studies.

## 8 Conclusion

This literature review contends that there is a need for a high-fidelity mesh processing pipeline in order to transform raw, artifact-corrupted MRI data into usable digital models in a clinical setting. It has developed robust, fundamental algorithms to tackle the principal challenges: **Taubin smoothing** in noise removal without volume shrinking and **Quadric Error Metrics** for simplification with high fidelity.

This project’s novelty lies in the **novel synthesis and stringent quantitative evaluation** of these specific techniques on a particularly challenging collection of medical data: 3D brain tumor models. By developing this pipeline, running it on the public BraTS dataset, and validating it against a comprehensive set of quality measures (Triangle Aspect Ratio, Hausdorff Distance, Mean Curvature Error, and Volume Change), this project will provide an empirically-benchmarked "best-practices" paradigm. It will advance the discipline of computational medicine by offering a clear, reproducible procedure for creating the high-fidelity anatomical models necessary to facilitate precision neurosurgical planning.

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