

Artificial Intelligence Prediction of Cholecystectomy Operative Course from Automated Identification of Gallbladder Inflammation

SAGES Annual Meeting

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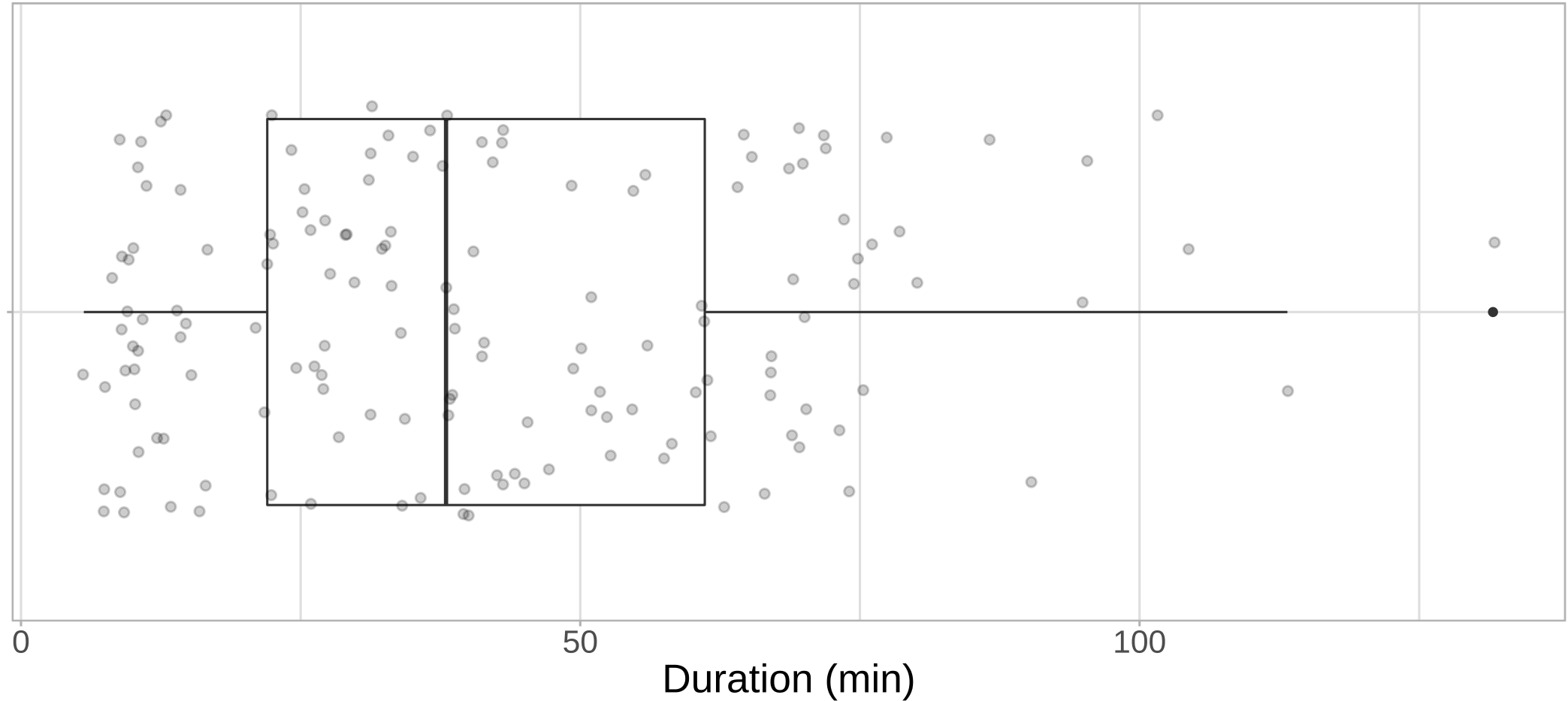
Massachusetts General Hospital

September 2, 2021

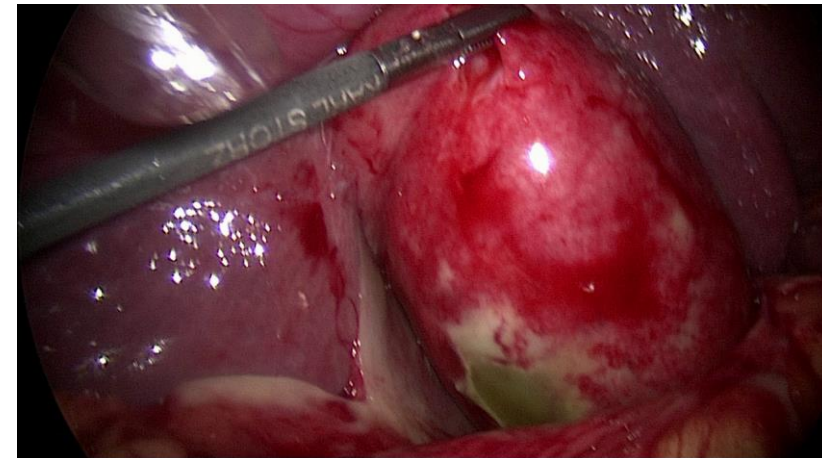
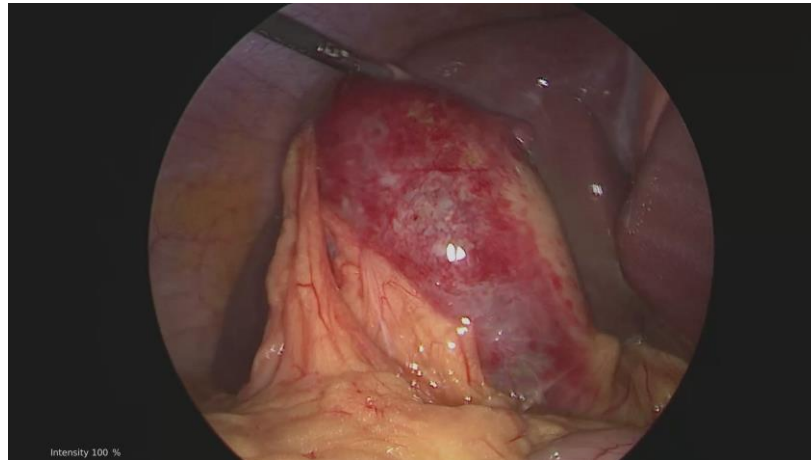
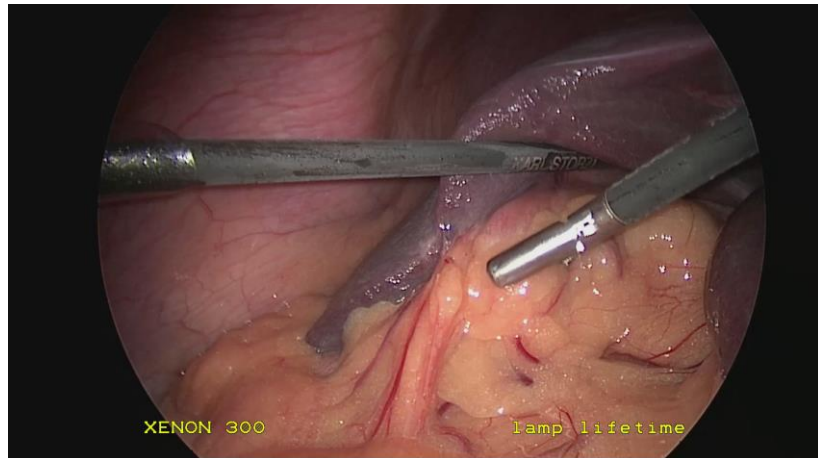
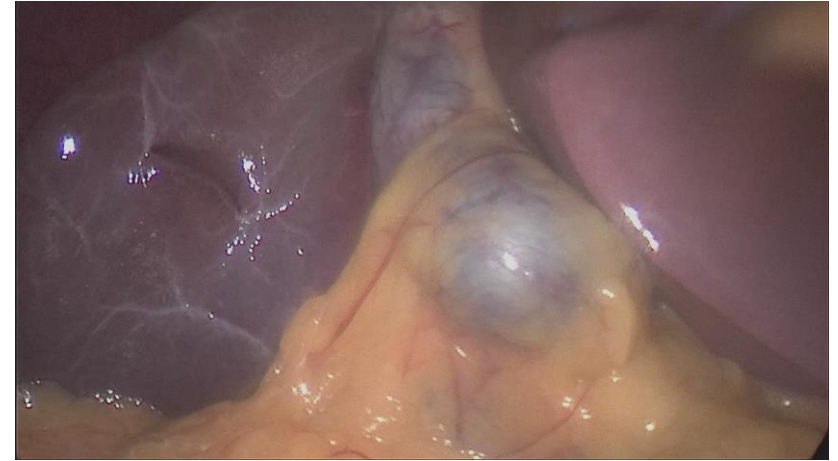
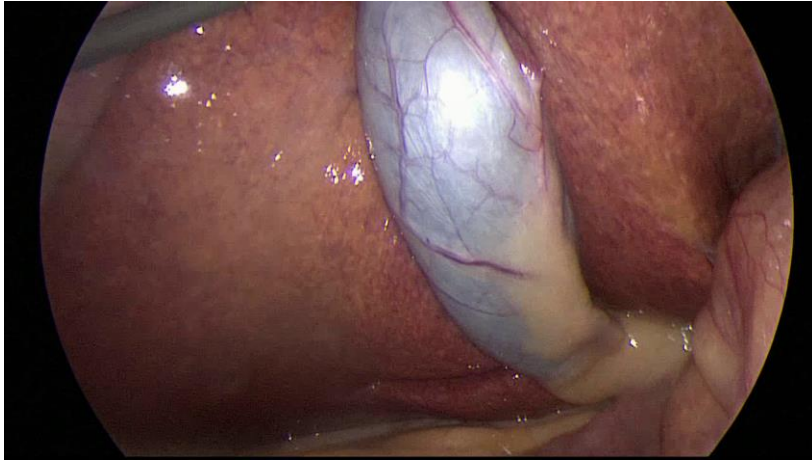
Disclosures

Research support from the Olympus Corporation

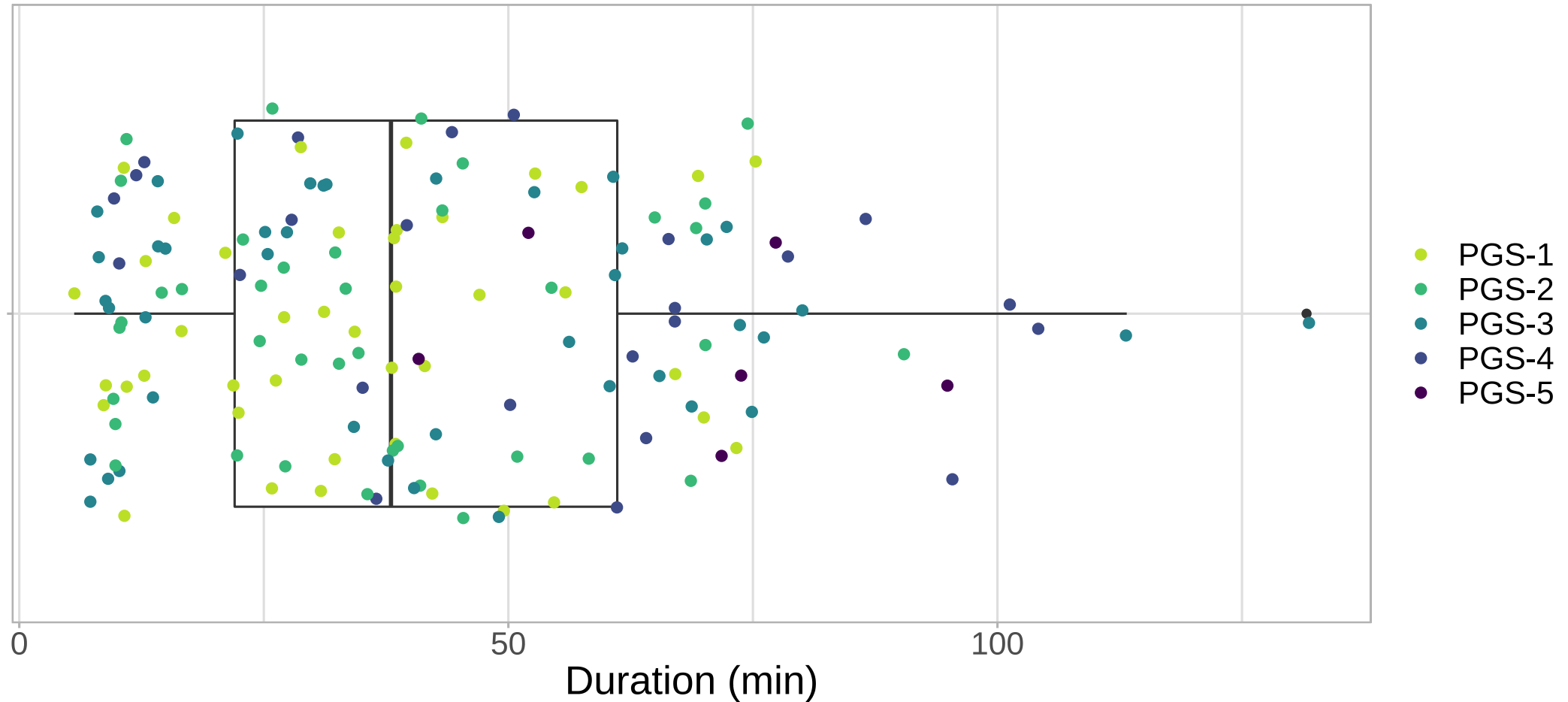
Operative Courses of Cholecystectomy



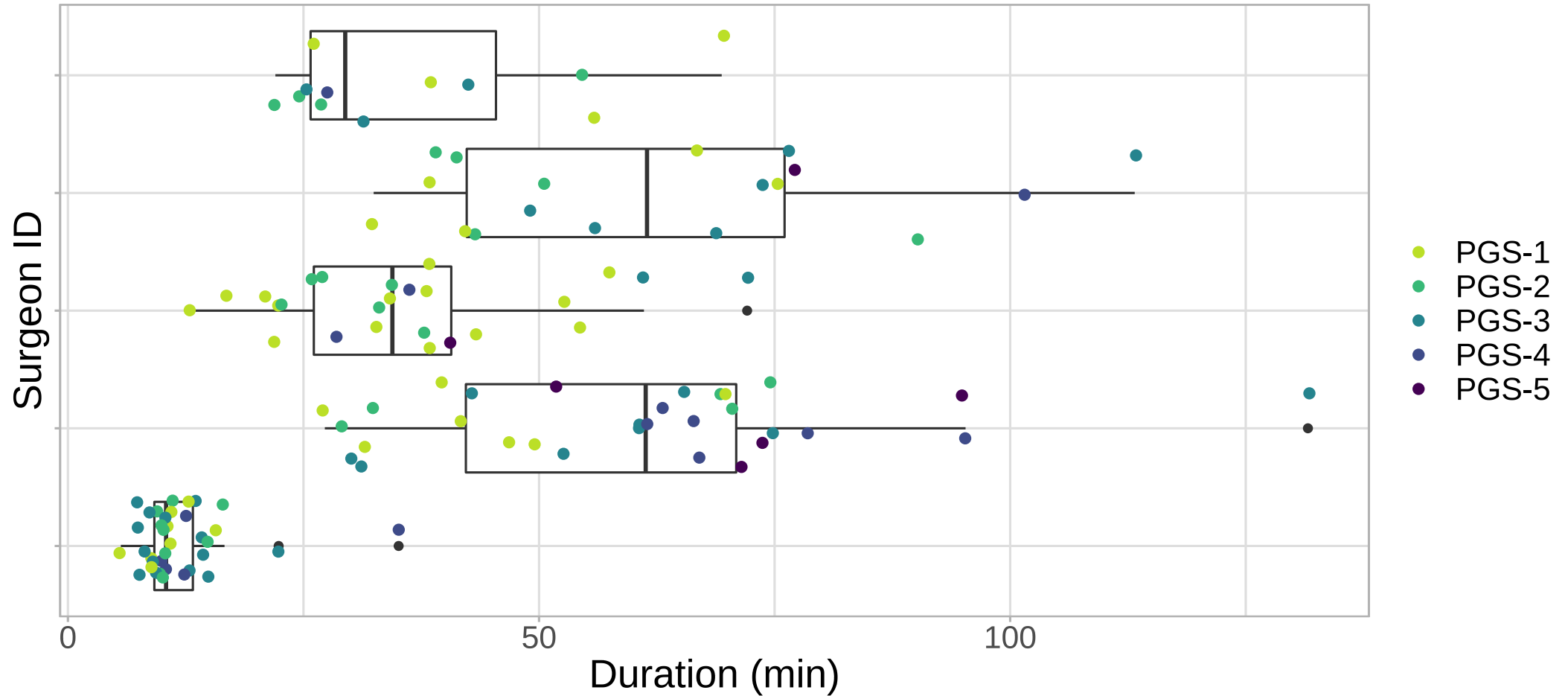
Parkland Grading Scale (PGS)



Operative Courses of Cholecystectomy



Surgeon and PGS



Bayesian Inference using Hamiltonian Monte Carlo Sampling

$$\log(\textit{Duration}_i) \sim \text{Normal}(\mu_i, \sigma)$$

$$\mu_i = \alpha_{\text{sid}[i]} + \beta_{\text{sid}[i]} * \sum_{j=0}^{PGS_i-1} \delta_j$$

$$\begin{bmatrix} \alpha_{\text{sid}} \\ \beta_{\text{sid}} \end{bmatrix} \sim \text{MVNormal} \left(\begin{bmatrix} \alpha \\ \beta \end{bmatrix}, \mathbf{S} \right)$$

$$\alpha \sim \text{Normal}(0,1)$$

$$\beta \sim \text{Normal}(0,1.2)$$

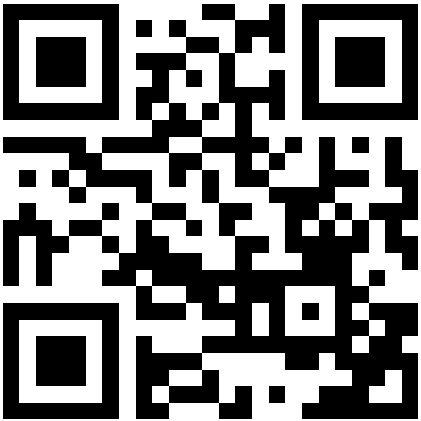
$$\delta \sim \text{Dirichlet}(2)$$

$$\mathbf{S} = \begin{pmatrix} \sigma_a & 0 \\ 0 & \sigma_\beta \end{pmatrix} \mathbf{R} \begin{pmatrix} \sigma_a & 0 \\ 0 & \sigma_\beta \end{pmatrix}$$

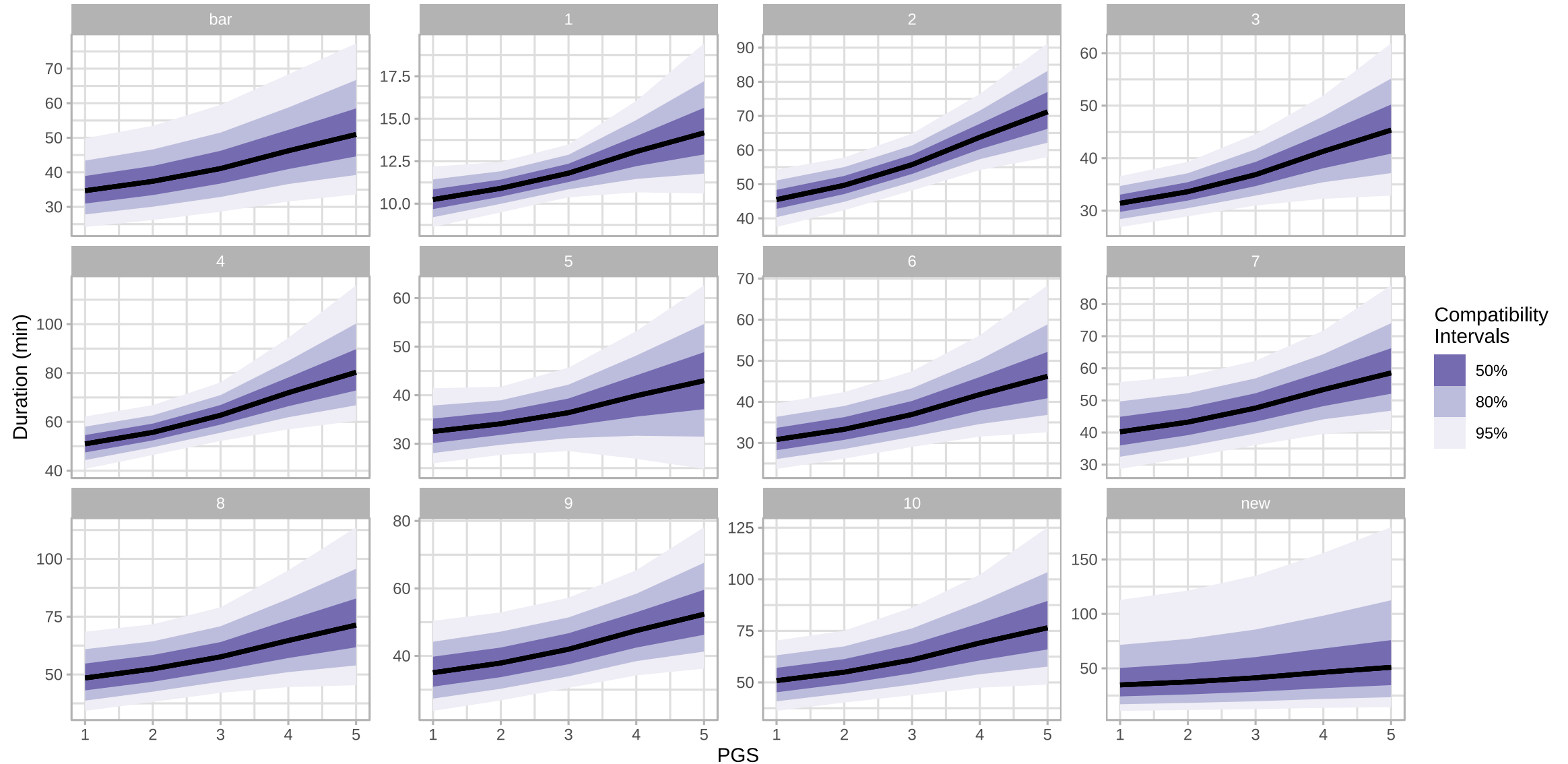
$$\mathbf{R} = \begin{pmatrix} 1 & \rho \\ \rho & 1 \end{pmatrix}$$

$$\mathbf{R} \sim \text{LKJCorr}(4)$$

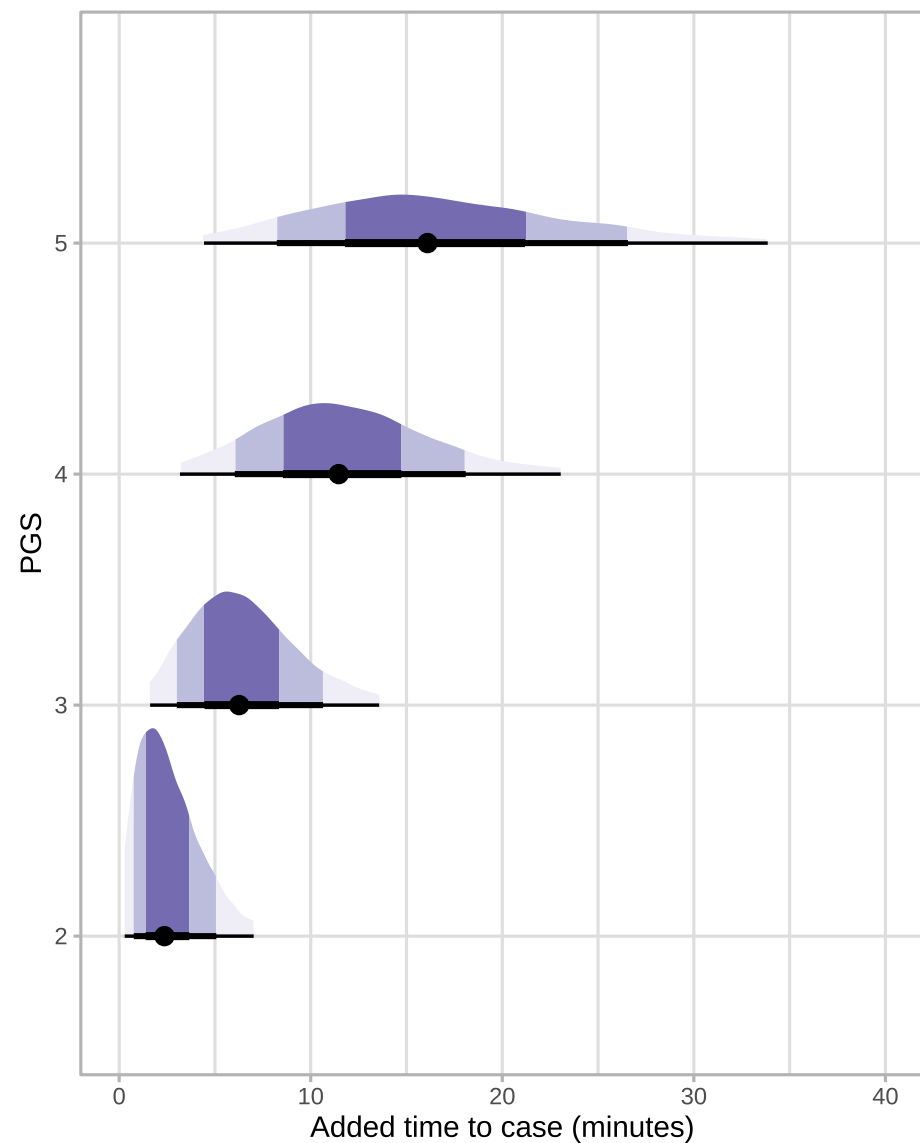
$$\sigma, \sigma_\alpha, \sigma_\beta \sim \text{Exponential}(1)$$



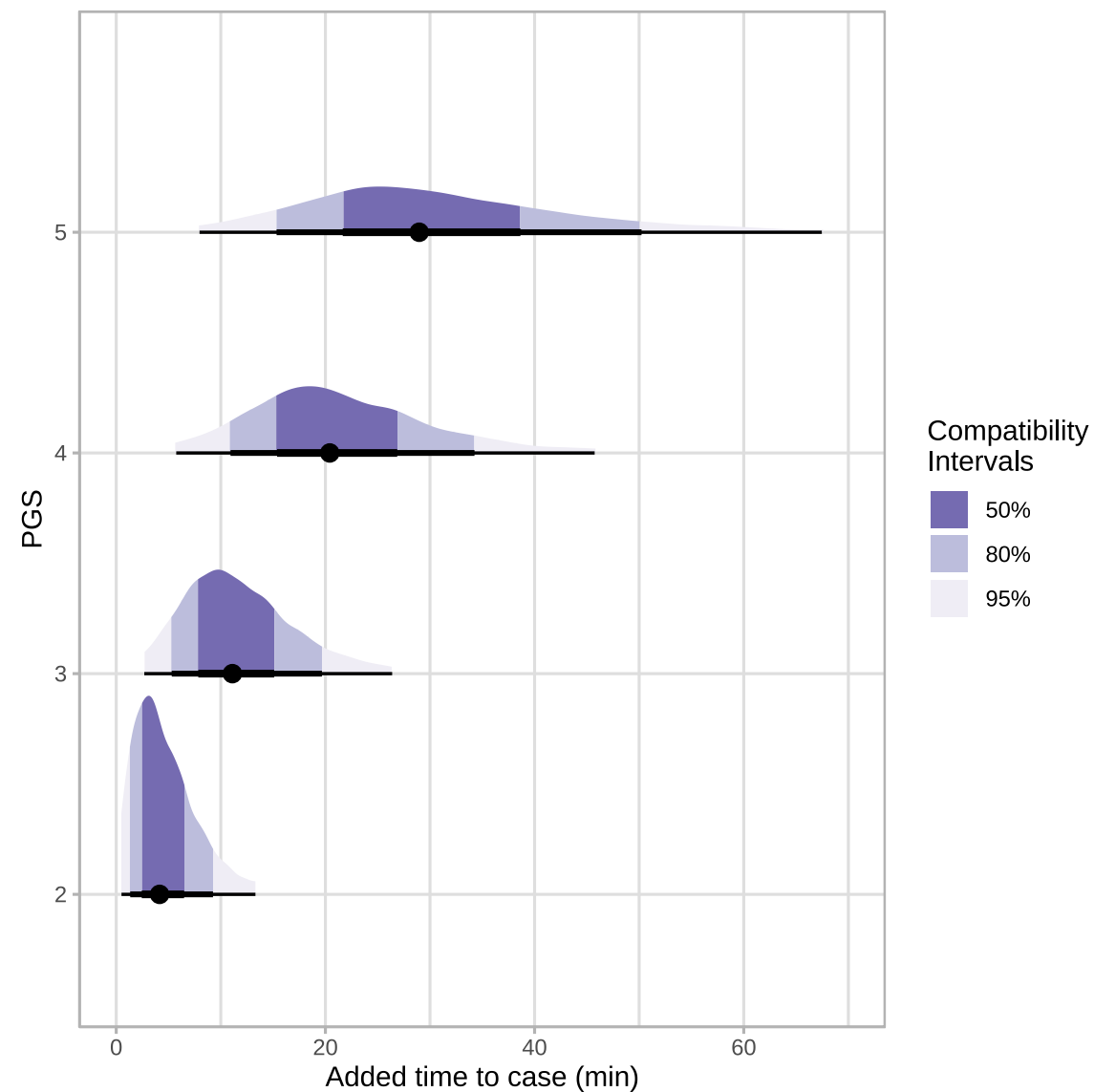
Operative Duration



Average



Most affected



Inadvertent Gallbladder Hole

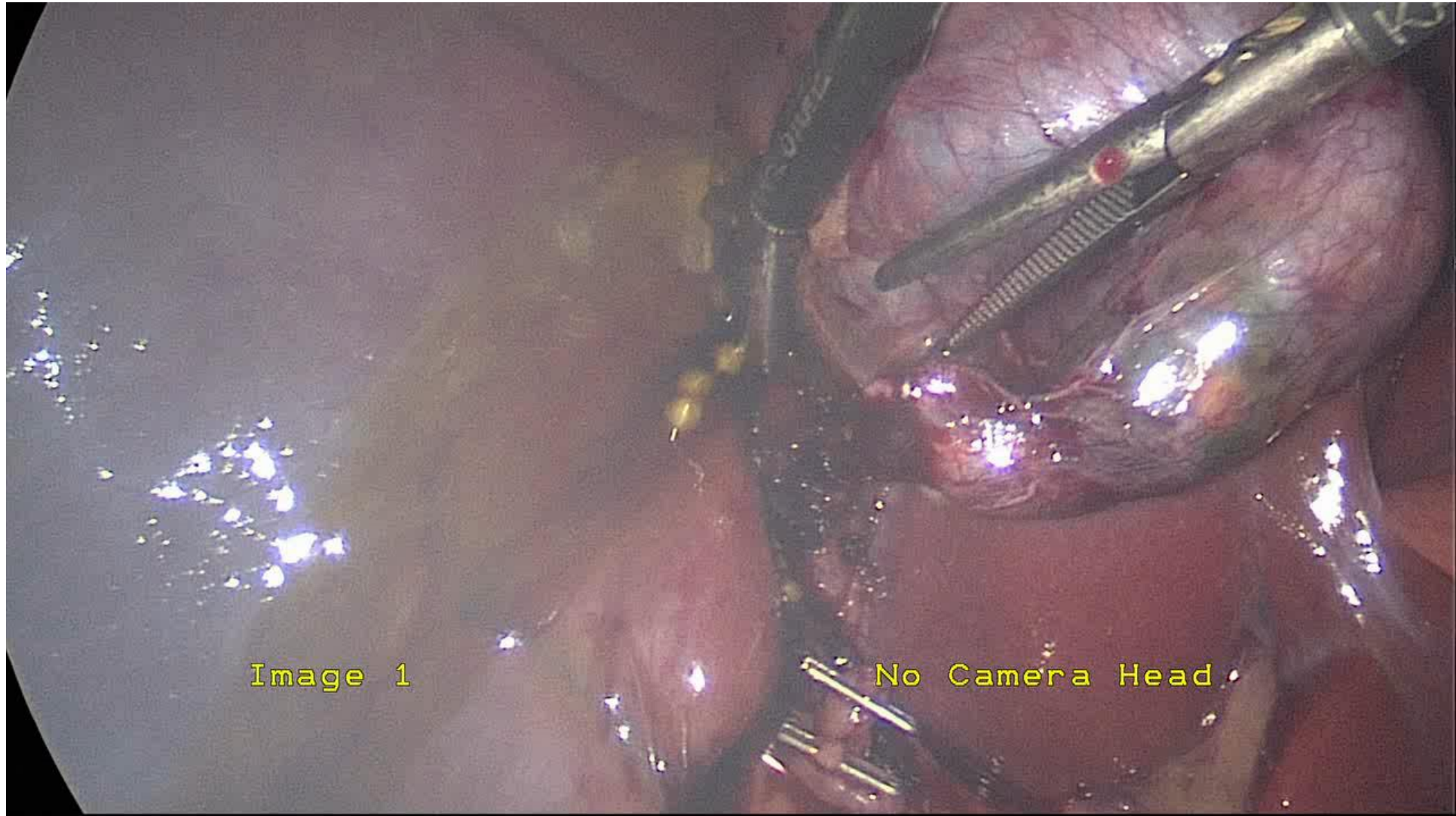
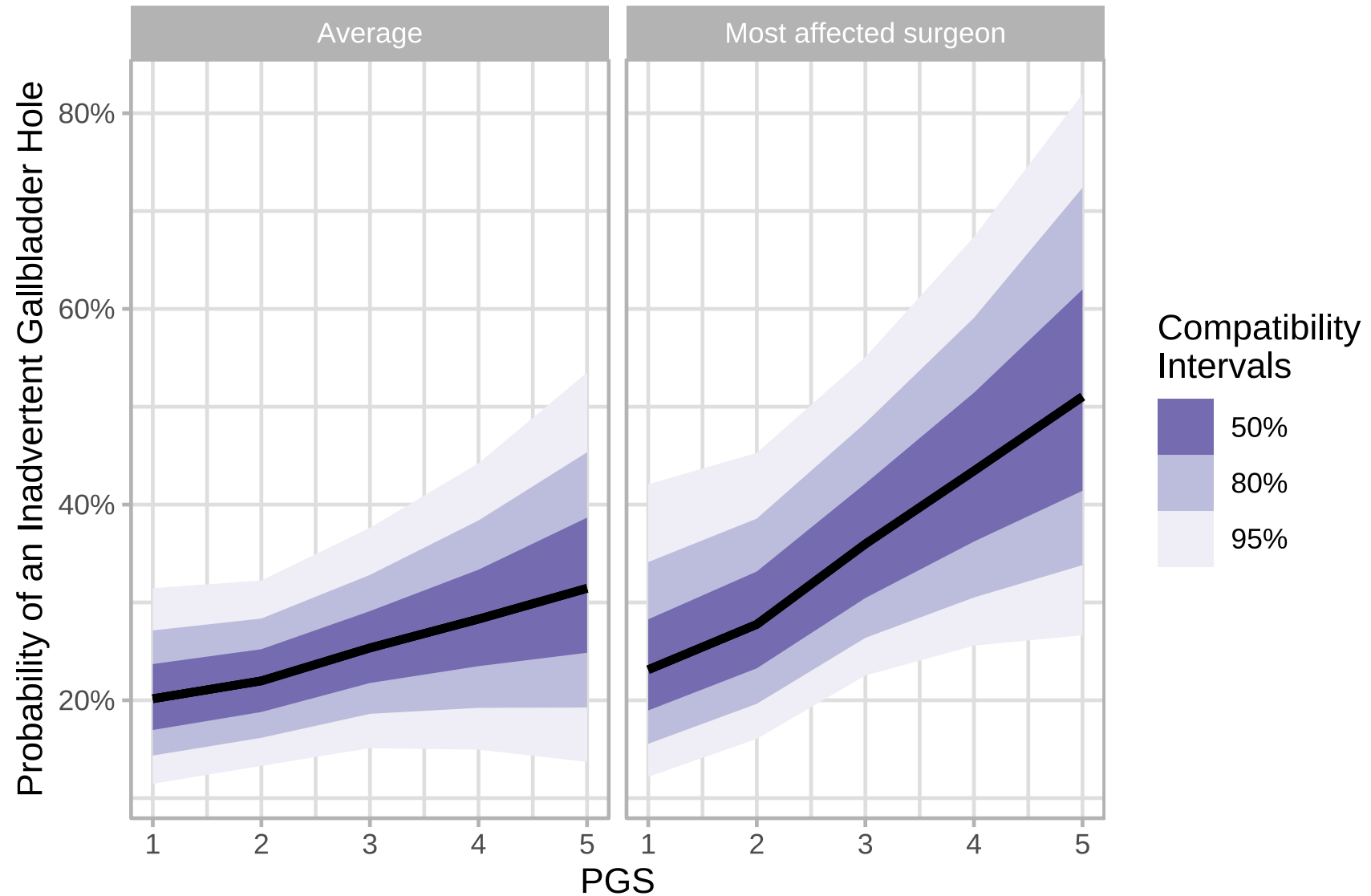


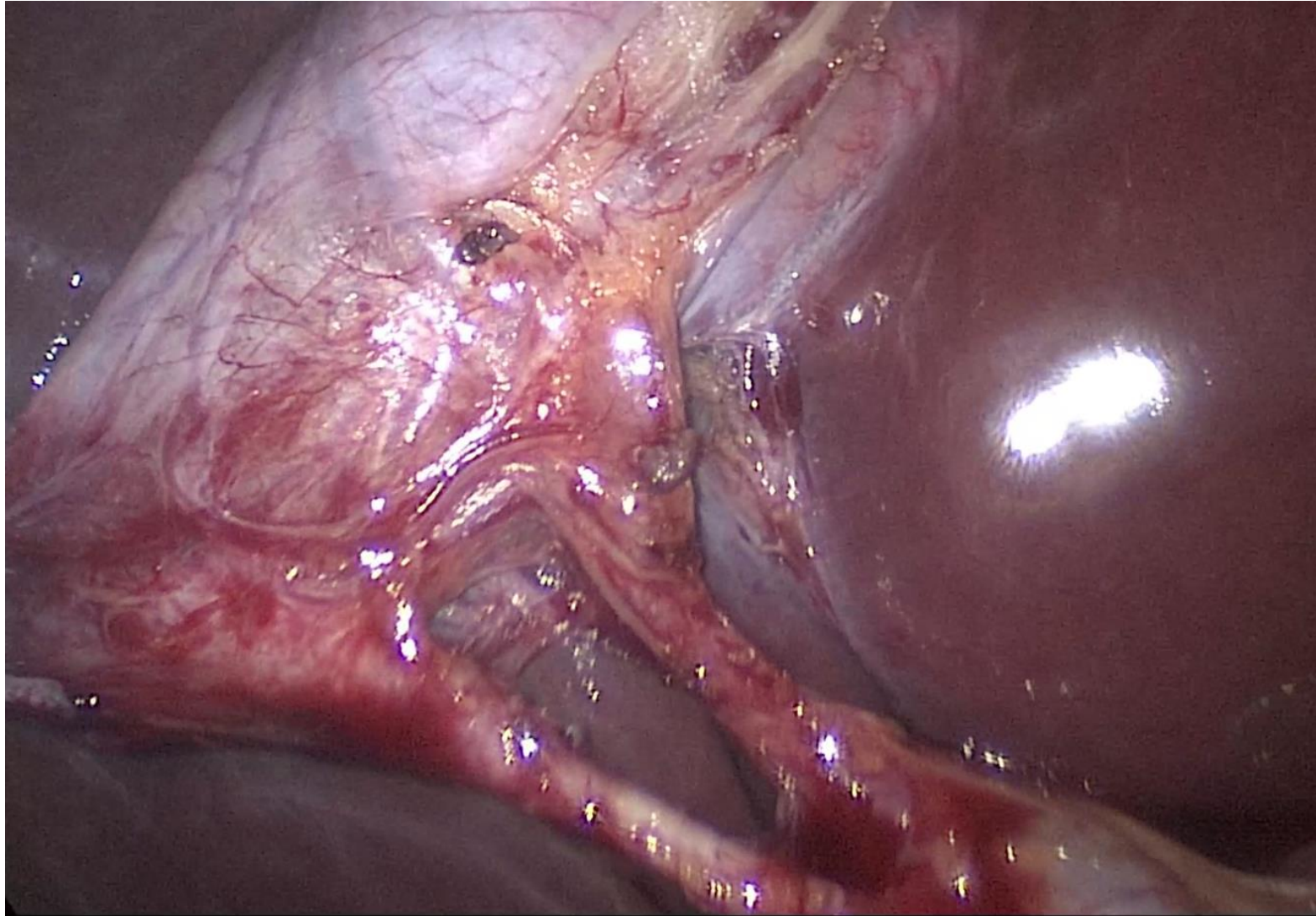
Image 1

No Camera Head

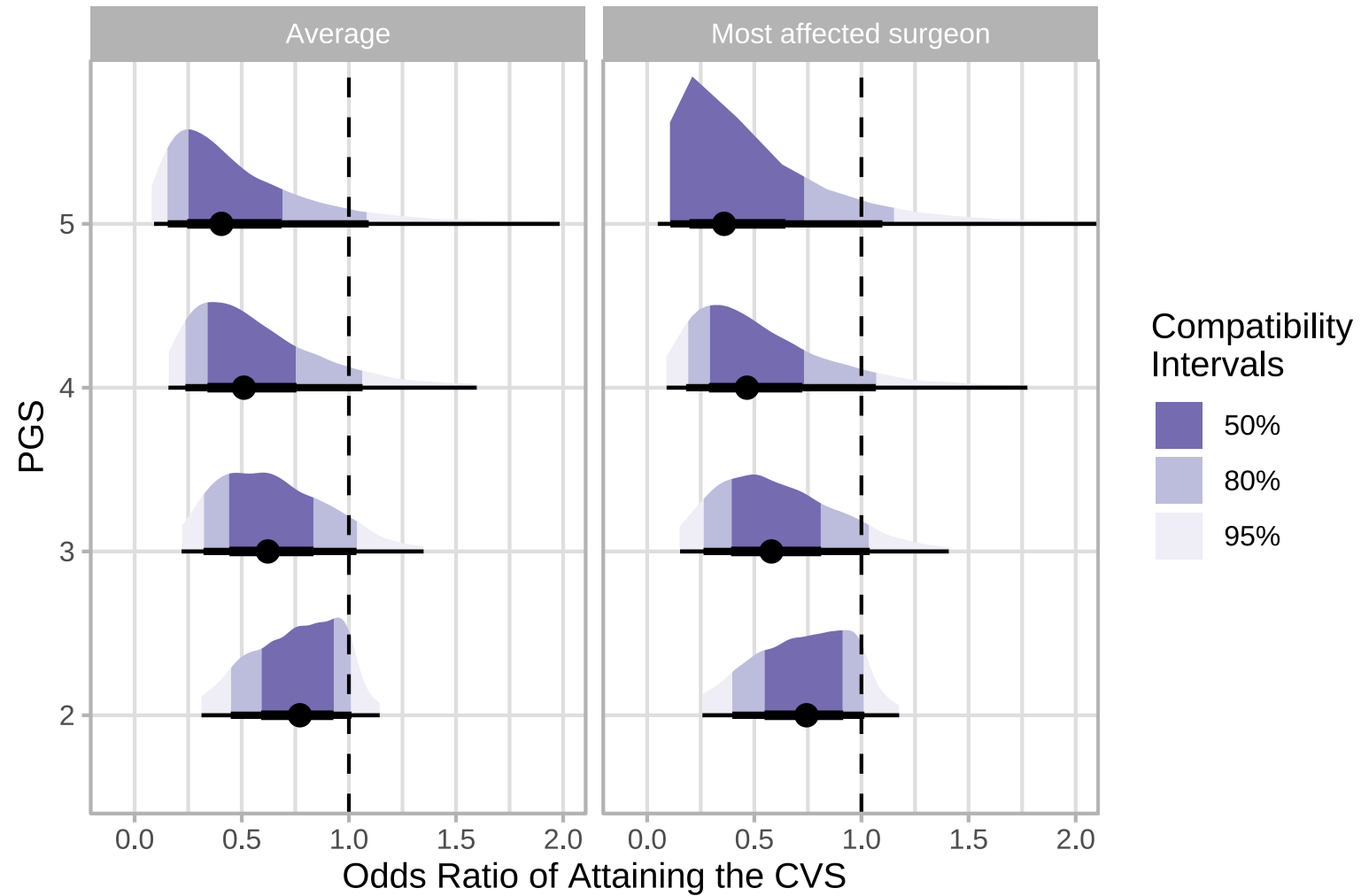
Inadvertent Gallbladder Hole



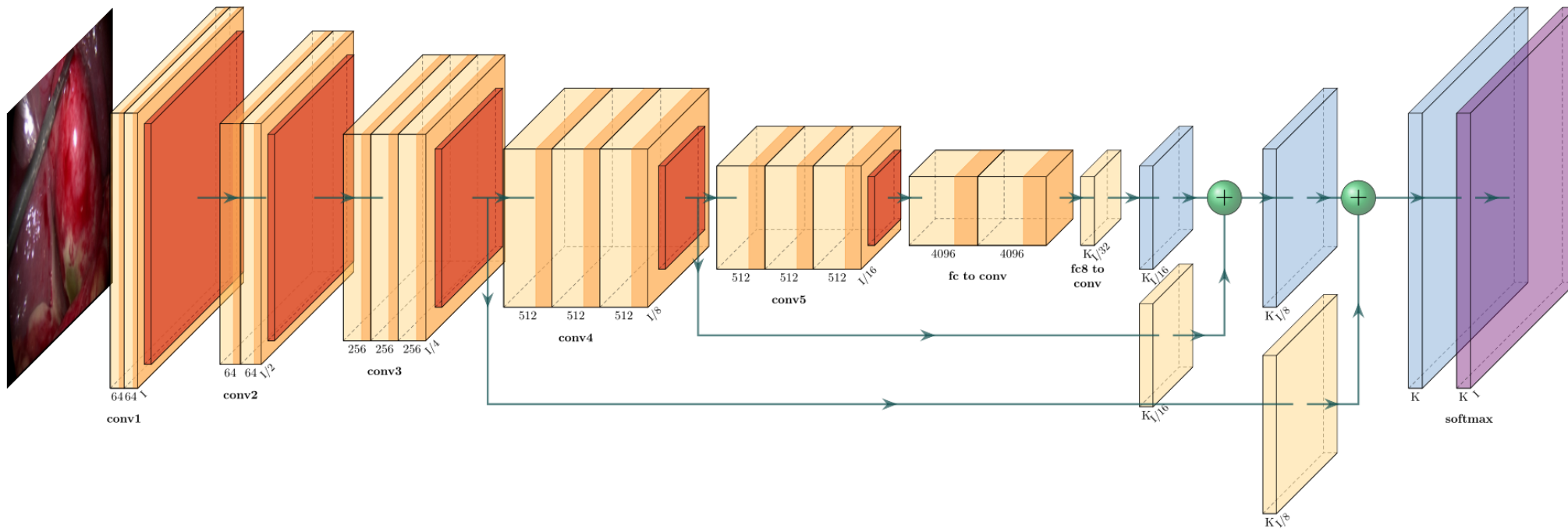
Critical View of Safety



Critical View of Safety

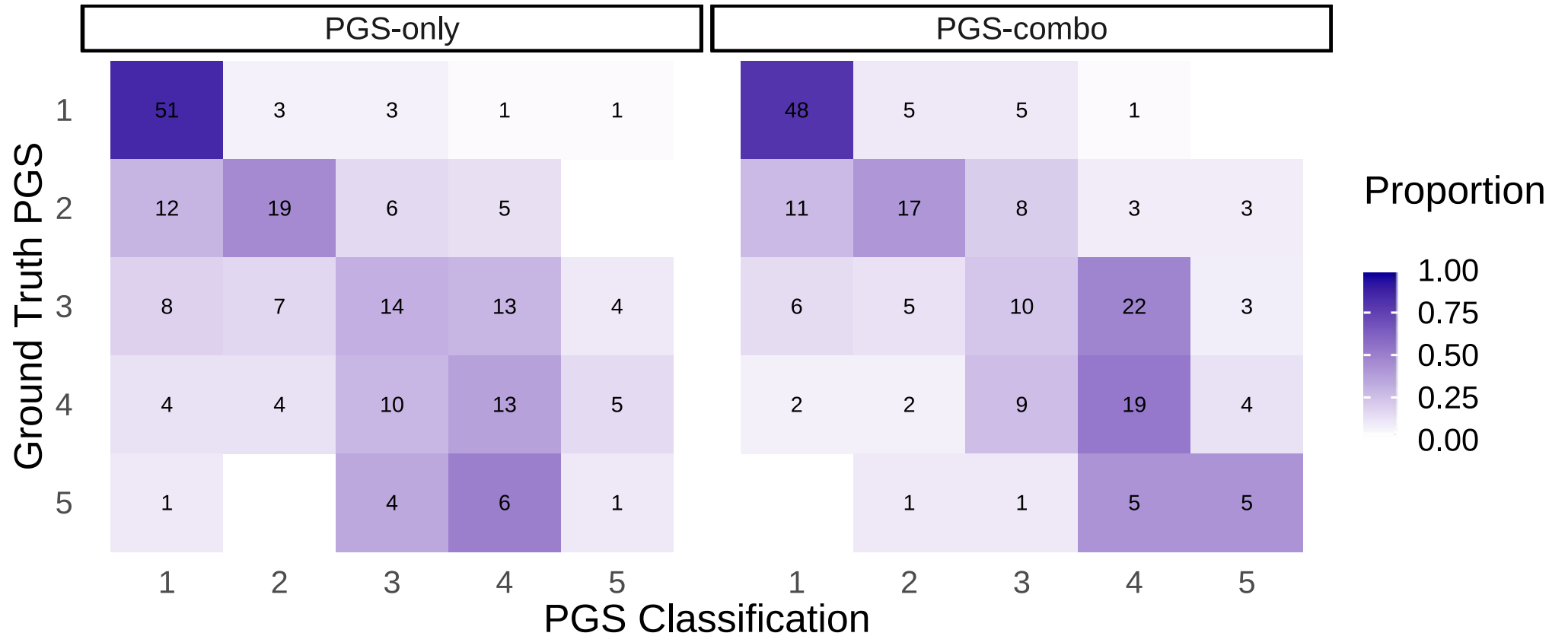


Artificial Intelligence Computer Vision Model



PGS-?

Artificial Intelligence Computer Vision Model



Conclusions

- Gallbladder inflammation is predictive of intra-operative course
- AI computer vision model can reliably identify the degree of gallbladder inflammation
- Applications:
 - Operating room workflow optimization
 - Targeted per-surgeon and per-resident feedback