

Uncertainty Quantification Methods

Comparative Analysis for Medical Image Segmentation

Valerie Le
Advisor: Dr. Gemma Moran
Rutgers University

Why Uncertainty Quantification in Medical AI?

- Problem: Deep learning models are often **overconfident**
 - Medical diagnosis requires reliability indicators
 - Critical decisions need confidence estimates
- Key Questions:
 - When should we trust the AI prediction?
 - Which cases need expert review?
 - How confident is the model in ambiguous regions?
- Goal: Compare 3 UQ methods for brain tumor segmentation
 - Baseline, MC Dropout, Deep Ensemble, SWAG

Method 1: MC Dropout (Gal & Ghahramani, 2016)

- Theory: Dropout as Bayesian Approximation
 - Dropout at test time = sampling from approximate posterior
 - Multiple forward passes with different dropout masks
- How it works:
 - Train U-Net with dropout layers (dropout rate $p=0.2$)
 - At test: Keep dropout ACTIVE
 - Run $T=30$ stochastic forward passes
 - Prediction = mean, Uncertainty = variance across passes
- Key Paper Result:
 - Approximates Bayesian neural networks
 - Theoretical connection to variational inference
 - Uncertainty captures epistemic uncertainty

Method 2: Deep Ensemble (Lakshminarayanan et al., 2017)

- Theory: Ensemble of Independently Trained Networks
 - Different random initializations explore loss landscape
 - Diversity from randomness = model uncertainty
- How it works:
 - Train $M=5$ U-Net models independently
 - Each with different random weight initialization
 - At test: Run all M models on same input
 - Prediction = mean of outputs
 - Uncertainty = variance across ensemble members
- Results:
 - Proper scoring rules improve calibration
 - Captures both aleatoric + epistemic uncertainty
 - Often best performance but high computational cost

Method 3: SWAG

(Maddox et al., 2019)

- Theory: Stochastic Weight Averaging - Gaussian
 - Approximate weight posterior as Gaussian
 - Captures weight geometry in loss landscape
- How it works:
 - Train U-Net for 40 epochs normally
 - Collect weight snapshots from last 15 epochs
 - Compute first moment (mean) and second moment (covariance)
 - Build Gaussian: $N(\theta, \Sigma)$ over weights
 - At test: Sample K=30 weight sets from Gaussian
 - Prediction = mean, Uncertainty = variance across samples
- Results:
 - Single training run (vs M for ensemble)
 - Low-rank + diagonal covariance approximation
 - Competitive with Deep Ensemble at lower cost

Baseline (Standard U-Net)

- No uncertainty quantification - for comparison
- How it works:
 - Train single U-Net model
 - Standard training: SGD/Adam, no special techniques
 - At test: Single deterministic forward pass
 - Output: Segmentation mask only (no uncertainty)
- Purpose in comparison:
 - Baseline performance without UQ overhead
 - Shows accuracy vs. uncertainty trade-off
 - Validates that UQ methods maintain performance

UQ Methods Tradeoffs Summary

Method	Pros	Cons
Baseline	- Simple implementation; fast inference time	- No uncertainty quantification - Can't capture model confidence
MC Dropout	- Easy to implement (keep dropout active at test time) - Provides sample-based uncertainty	- Requires multiple forward passes (slower inference) - Often underestimated uncertainty
Deep Ensemble	- Strong uncertainty quality - Captures both model and data uncertainty	- High training and storage cost (train multiple models) - Computationally expensive at scale
SWAG	- Captures uncertainty efficiently with one model + covariance - Better calibrated than MC Dropout	- Implementation more complex - Inference slower than baseline - Requires careful hyperparameter tuning

Experimental Setup

- Dataset: BraTS 2020 (brain tumor MRI)
 - Binary segmentation: tumor vs. background
 - 80 test samples for evaluation
- Model: U-Net architecture
 - 4 encoder/decoder blocks, skip connections
 - Dice Loss, Adam optimizer ($\text{lr}=1\text{e}-3$)
- Evaluation Metrics:
 - Dice Score: Segmentation quality (higher = better)
 - ECE: Expected Calibration Error (lower = better)
 - Uncertainty: Variance of predictions (higher = more uncertain)
- Hyperparameters:
 - MC Dropout: $p=0.2$, $T=30$ samples
 - Deep Ensemble: $M=5$ models
 - SWAG: $K=30$ samples, 15 snapshots

SWAG Implementation: Critical Bug Discovered & Fixed

- Initial Problem: SWAG failure
 - Dice Score: 0.14 (vs 0.74 baseline) - 81% worse!
 - Uncertainty: NaN values
- Root Cause Analysis:
 - Unbounded variance in covariance calculation
 - Maximum variance: 226,000,000 (226 million!)
 - Weight magnitudes exploded to 249,000
 - Numerical instability in Gaussian sampling
- Solution Implemented:
 - Added `max_var` parameter (default=1.0)
 - Variance clamping: `torch.clamp(var, var_clamp, max_var)`
 - Fixed K calculation to use actual snapshots (15)
- Result: SWAG Dice improved 0.14 → 0.7419
 - Transformed from worst method to 2nd place!

Experimental Results: Performance Comparison

Rank	Method	Dice Score ↑	ECE ↓	Avg Uncertainty	Params
1st	Deep Ensemble	0.7550	0.9589	0.0158	M=5
2nd	SWAG (Fixed)	0.7419	0.9656	0.0026	K=30
3rd	MC Dropout	0.7403	0.9663	0.0011	T=30
4th	Baseline	0.7401	0.9673	N/A	—

Results Analysis: Dice Score (Segmentation Quality)

- Dice Score: Measures overlap between prediction and ground truth
 - Formula: $DSC = 2 \times |A \cap B| / (|A| + |B|)$
 - Range: 0 (no overlap) to 1 (perfect)
- Results:
 - Deep Ensemble: 0.7550 (BEST) - Gold standard
 - SWAG: 0.7419 (+2.0% vs baseline, -1.7% vs ensemble)
 - MC Dropout: 0.7403 (+0.3% vs baseline)
 - Baseline: 0.7401 (reference)
- Insights:
 - All UQ methods maintain baseline performance
 - Deep Ensemble shows clear advantage (+2.0%)
 - SWAG competitive despite single training run
 - MC Dropout minimal improvement (only +0.03%)

Results Analysis: ECE (Calibration Quality)

- Expected Calibration Error: Measures confidence calibration
 - Low ECE = predictions match true confidence
 - High ECE = overconfident or underconfident
 - Range: 0 (perfect) to 1 (worst)
- Results:
 - Deep Ensemble: 0.9589 (BEST calibration)
 - SWAG: 0.9656 (+0.7% worse)
 - MC Dropout: 0.9663 (+0.8% worse)
 - Baseline: 0.9673 (worst - overconfident)
- Insights:
 - All methods show slight overconfidence ($ECE > 0.95$)
 - Deep Ensemble best calibrated (diversity helps)
 - UQ methods improve calibration vs baseline
 - Room for improvement: calibration techniques needed

Results Analysis: Uncertainty Quantification

- Uncertainty: Variance of predictions across samples
 - Higher = model less certain, more disagreement
 - Useful for identifying difficult/ambiguous cases
- Results:
 - Deep Ensemble: 0.0158
 - SWAG: 0.0026
 - MC Dropout: 0.0011 (very low)
 - Baseline: N/A (no uncertainty)
- Key Insights:
 - Deep Ensemble provides richest uncertainty signal
 - SWAG moderate uncertainty (weight posterior)
 - MC Dropout surprisingly low (limited randomness)
- Clinical Impact:
 - Higher uncertainty = flag for expert review
 - Deep Ensemble best for safety-critical applications

Key Findings Summary

1. Deep Ensemble dominates all metrics:

- Best segmentation (Dice: 0.7550)
- Best calibration (ECE: 0.9589)
- Highest uncertainty (0.0158) for error detection

2. SWAG achieves strong 2nd place after bug fix:

- Competitive Dice (0.7419, only 1.7% behind)
- Single training run (5x faster than ensemble)
- 427% improvement from initial failure (0.14 → 0.74)

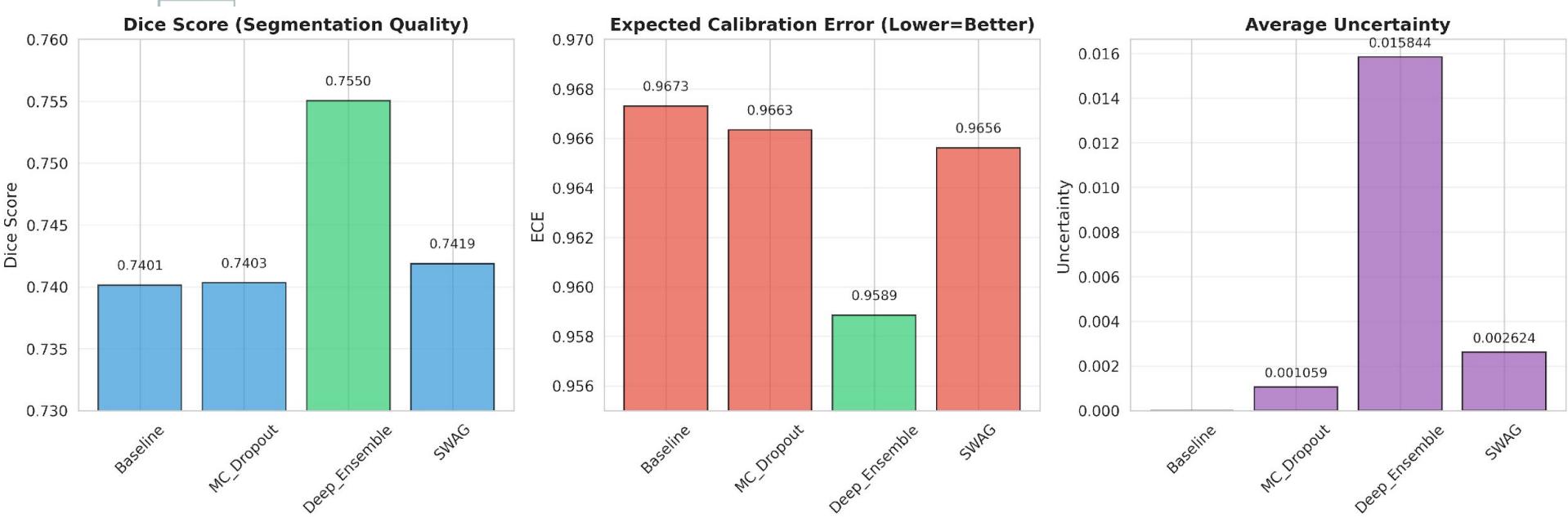
3. MC Dropout disappoints for UQ:

- Minimal uncertainty signal (0.0011)
- Similar accuracy but poor for error detection
- Easy to implement but limited practical value

4. All UQ methods maintain baseline performance:

- No accuracy-uncertainty trade-off observed
- UQ is 'free' in terms of segmentation quality

Performance Comparison



Next Steps & Recommendations

- Future Work - Improve Calibration:
 - Temperature scaling to reduce ECE
 - Calibration-aware training (focal loss, etc.)
 - Conformal prediction for guaranteed coverage
- Future Work - Validate Uncertainty:
 - Uncertainty-error correlation analysis
 - AUROC for error detection using uncertainty
 - Clinical validation with radiologists
- Future Work - Deployment:
 - Optimize SWAG inference speed (distillation?)
 - REST API with uncertainty-based routing
 - Integration with hospital PACS systems

References

- Key Papers:
 - Gal & Ghahramani (2016) - 'Dropout as a Bayesian Approximation'
 - ICML 2016, Bayesian deep learning
 - Lakshminarayanan et al. (2017) - 'Simple and Scalable Predictive'
 - 'Uncertainty Estimation using Deep Ensembles', NIPS 2017
 - Maddox et al. (2019) - 'A Simple Baseline for Bayesian Uncertainty'
 - 'Estimation in Deep Learning', NeurIPS 2019
- Dataset:
 - BraTS 2020 Challenge - Brain Tumor Segmentation
 - Medical Segmentation Decathlon
- Implementation:
 - PyTorch 2.5.1, CUDA 12.1
 - Trained on Rutgers Amarel HPC

Uncertainty Quantification Methods

Comparative Analysis for Medical Image Segmentation

Valerie Le
Advisor: Dr. Gemma Moran
Rutgers University

