# Gastrointestinal Lesion Classifiers

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## Motivations for classification

- Colorectal cancer is one of the most commonly diagnosed malignant tumor (10% of cases)
- Standard course of diagnosis is: colonoscopy, biopsy, endoscopic resection.
- Speed = more comfort for patients with benign 'Hyperplasic' conditions
- Want to maintain detection of malignant types '(serrated) adenoma'
- Will improve patient comfort, and quicken learning curve for med students

## Structure and origin of data

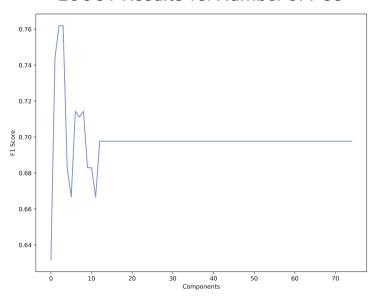
- Data was extracted from 76 patients, videos using NBI (narrow band imaging) and white light.
- 698 features were extracted from the videos
  - 422 were 2D texture
  - o 76 were 2D color
  - o 200 were 3D shape
    - Created from structure-from-motion computer-vision algorithms



## Using PLS to classify data

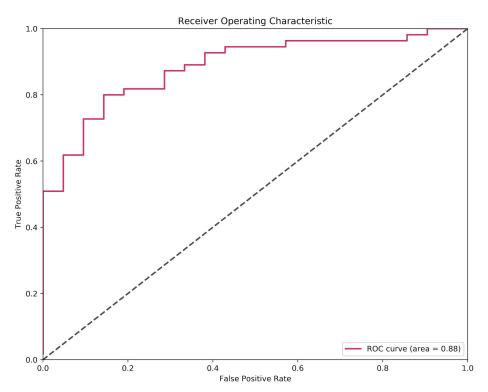
#### Loadings Plot for 27 Components 0.08 0.06 0.04 0.02 -0.02-0.04-0.06-0.08-0.020.02 0.06 0.08

#### LOOCV Results vs. Number of PCs



Brereton, R. G. and Lloyd, G. R. (2014), Partial least squares discriminant analysis: taking the magic away. J. Chemometrics, 28: 213–225. doi:10.1002/cem.2609

# PLS-DA binary classification results

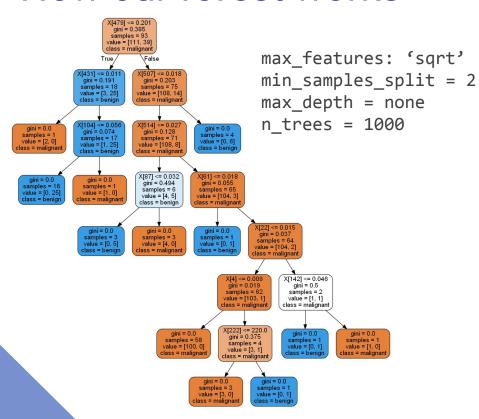


Accuracy: 82.89% Specificity: 87.27%

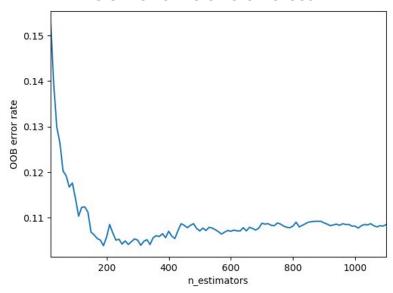
Sensitivity: 71.43% F1 Score: 0.7

Ground Truth	Predicted		
	Malignant	Benign	
Malignant	48	7	
Benign	6	15	

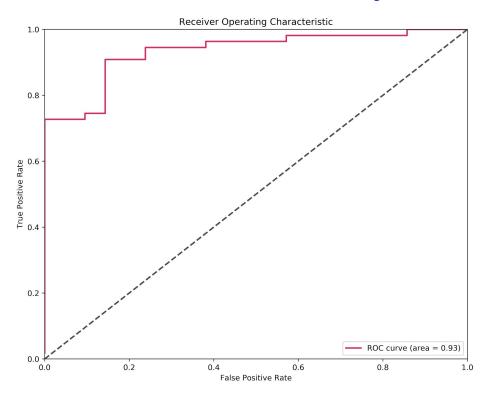
### How our forest works



#### OOB error vs size of forest



# Random Forest binary classification results



Accuracy: 89.47% Specificity: 94.55% Sensitivity: 76.19% F1-Score = 0.8

Ground Truth	Predicted		
	Malignant	Benign	
Malignant	52	3	
Benign	5	16	

### Conclusion

- PLS-DA performed worse than random-forest, as expected
- Average Expert Accuracy: 79.6%
- Average Novice Accuracy: 79.4%
- Multi-class classification is possible, but more difficult

Ground Truth	Predicted		
	Malignant	Benign	
Malignant	52	3	
Benign	5	16	
	Hyperplasic	Serrated	Adenoma
Hyperplasic	Hyperplasic	Serrated 0	Adenoma 3
Hyperplasic Serrated			

P. Mesejo et al., 'Computer-Aided Classification of Gastrointestinal Lesions in Regular Colonoscopy,' in IEEE Transactions on Medical Imaging, vol. 35, no. 9, pp. 2051-2063, Sept. 2016.