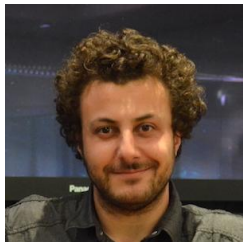


Deep learning approaches to medical applications



Joseph Paul Cohen

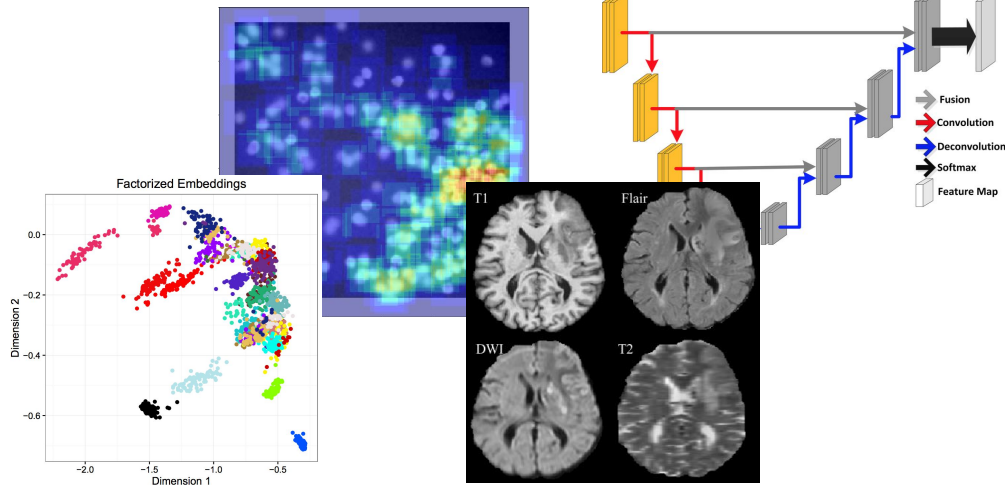
Postdoctoral Fellow at Montreal Institute for Learning Algorithms

Friend of the Farlow Fellow at Harvard University

U.S. National Science Foundation Graduate Fellow



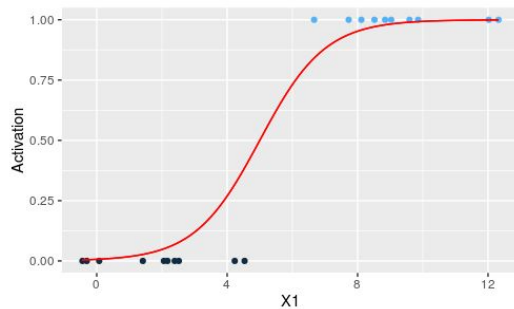
1. What is Deep Learning?
2. Image and Volume
 - a. Segmentation
 - b. Counting
 - c. Interpreting
3. Genomics
 - a. Representation



What is Deep Learning?

Logistic Regression

[200, 45, -4, 80]

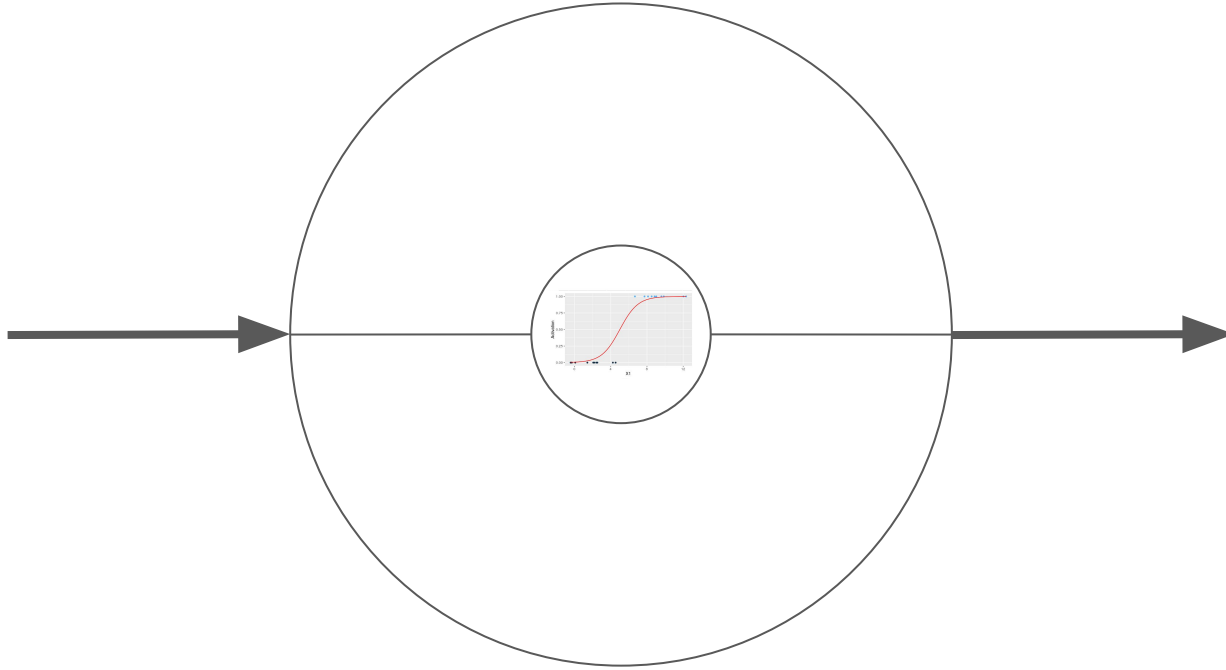


[1, 1, 0, 1]



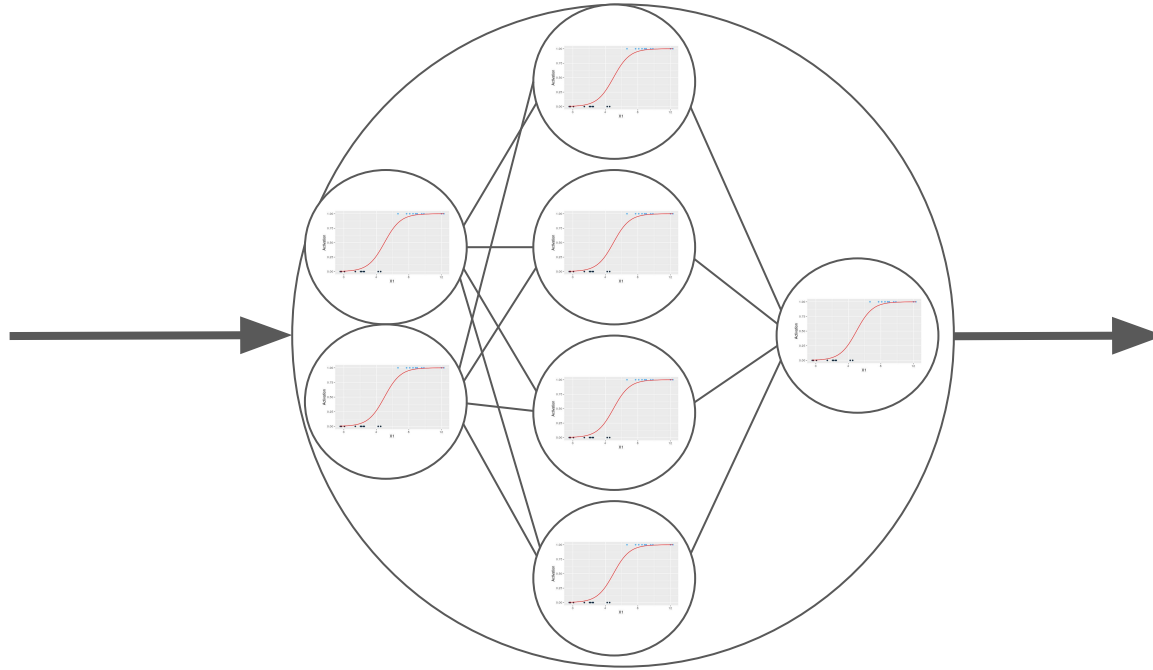
What is Deep Learning?

Logistic Regression

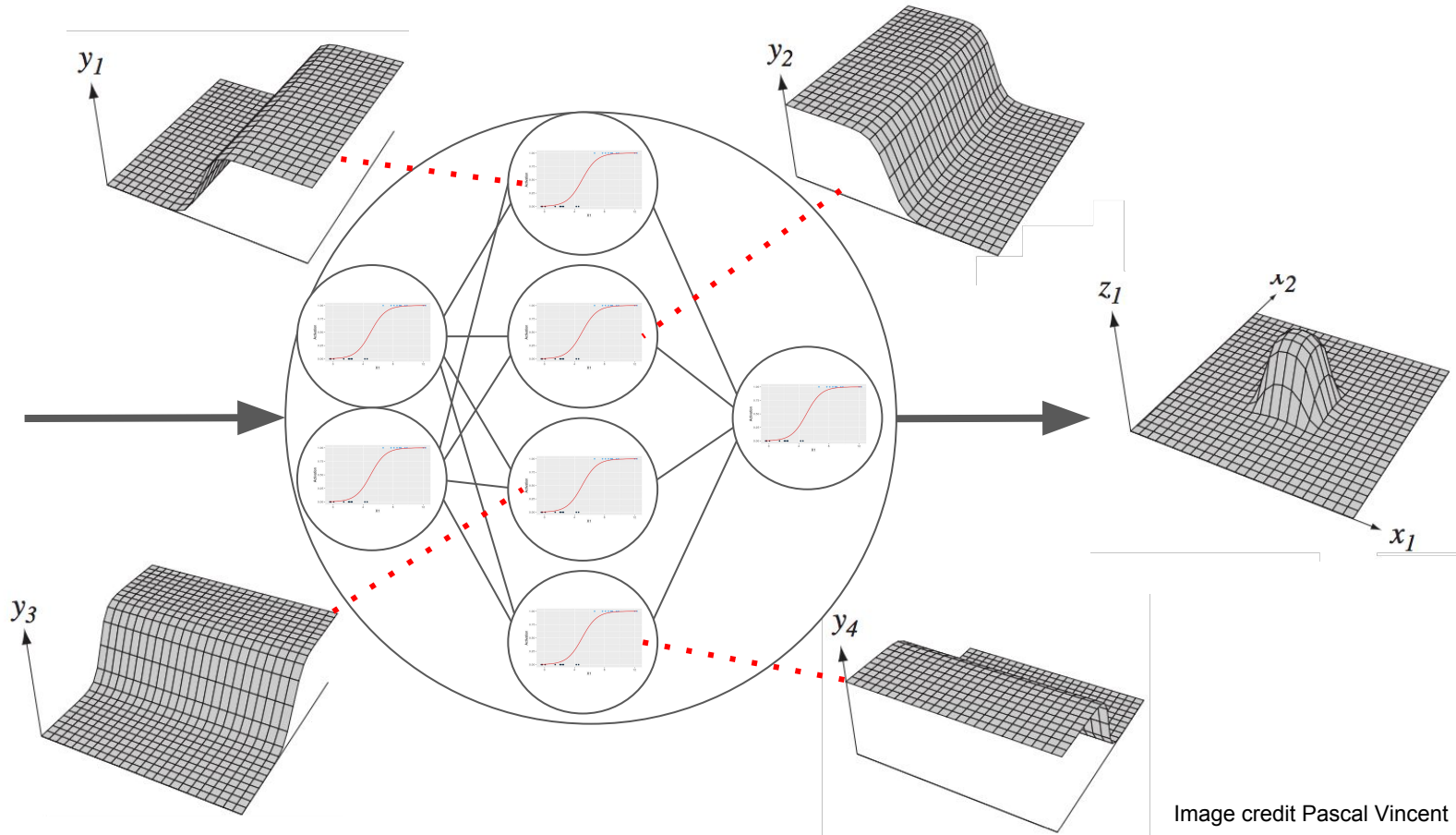


What is Deep Learning?

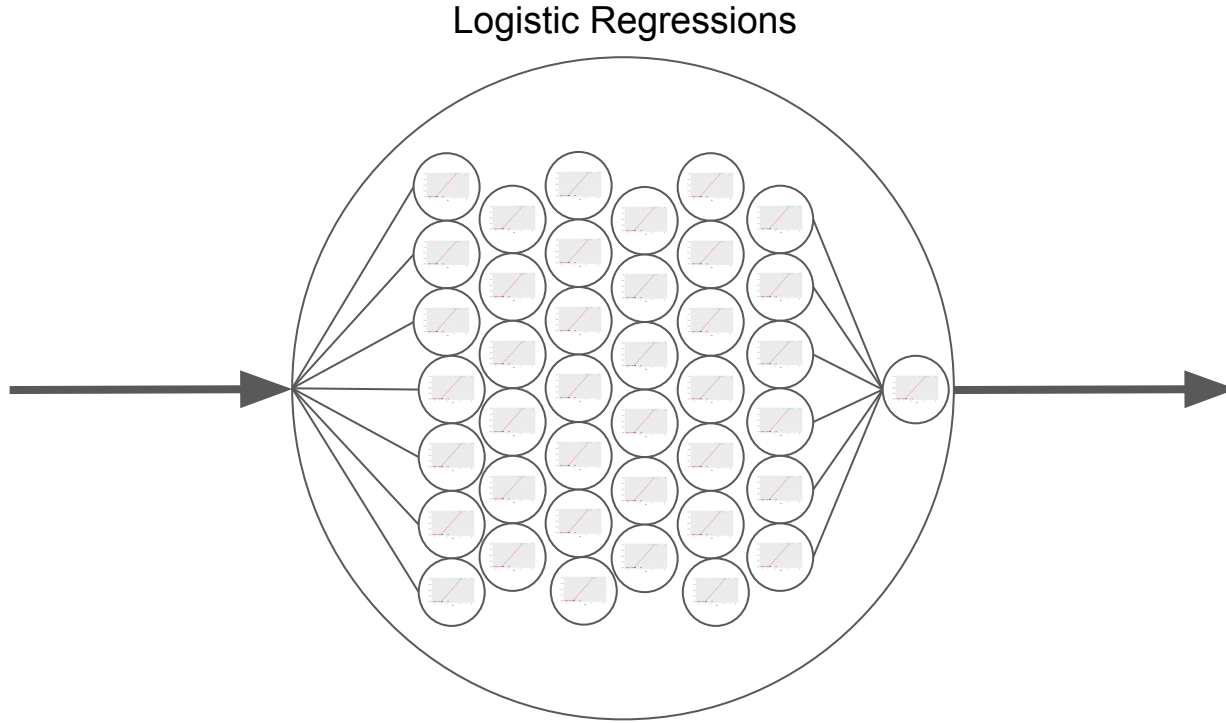
Logistic Regressions



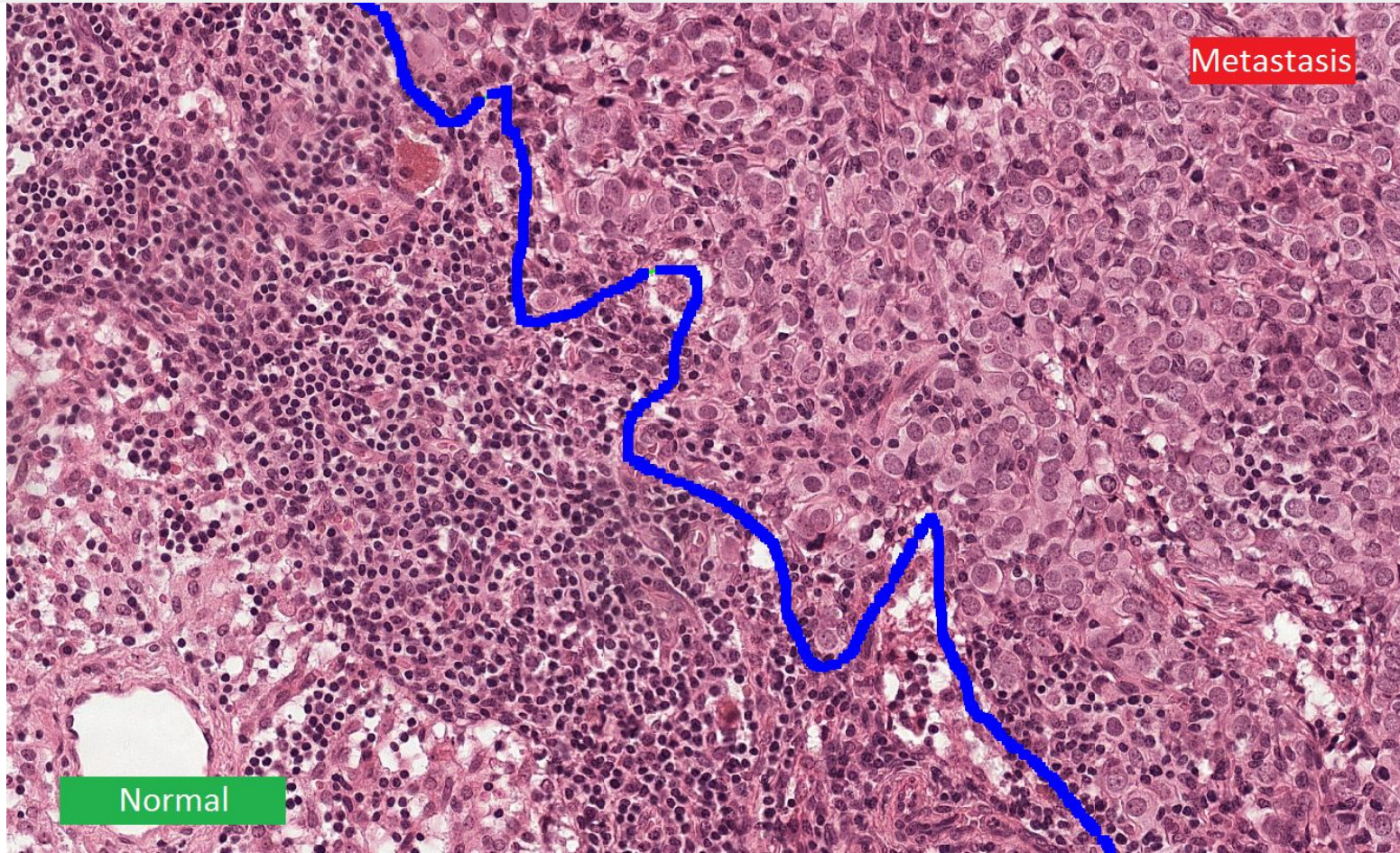
What is Deep Learning?



What is Deep Learning?



Automated pathology

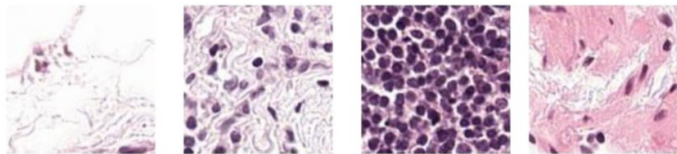


Tumor Segmentation

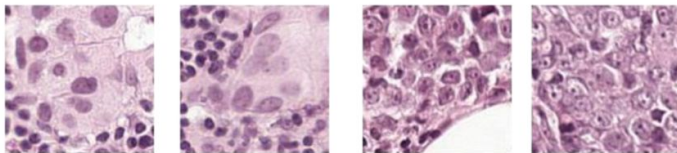
Automated detection of metastases in hematoxylin and eosin (H&E) stained whole-slide images of lymph node sections.

Reduce the workload of the pathologists and the subjectivity in diagnosis!

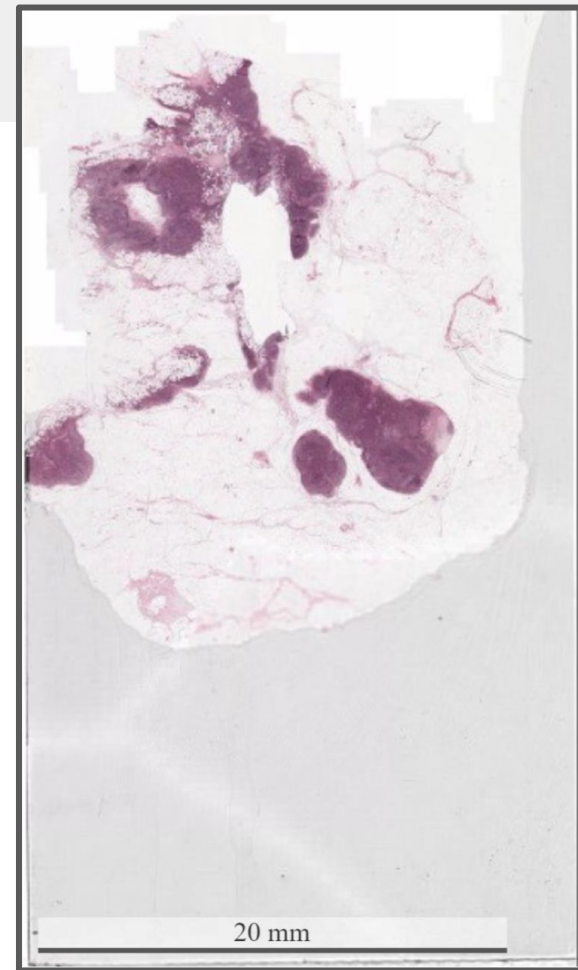
Normal Patches

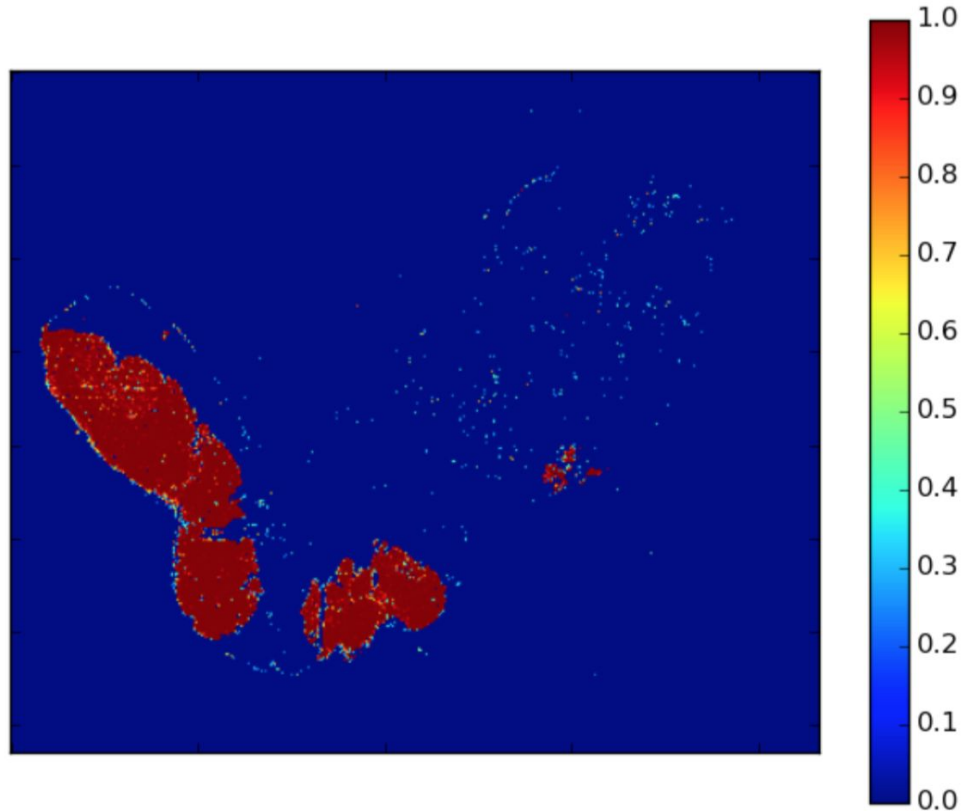
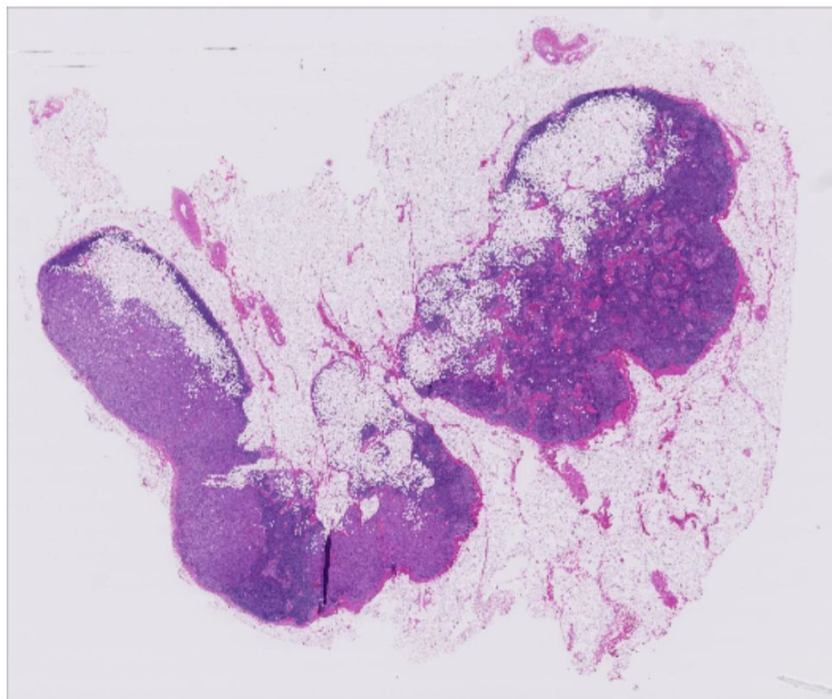


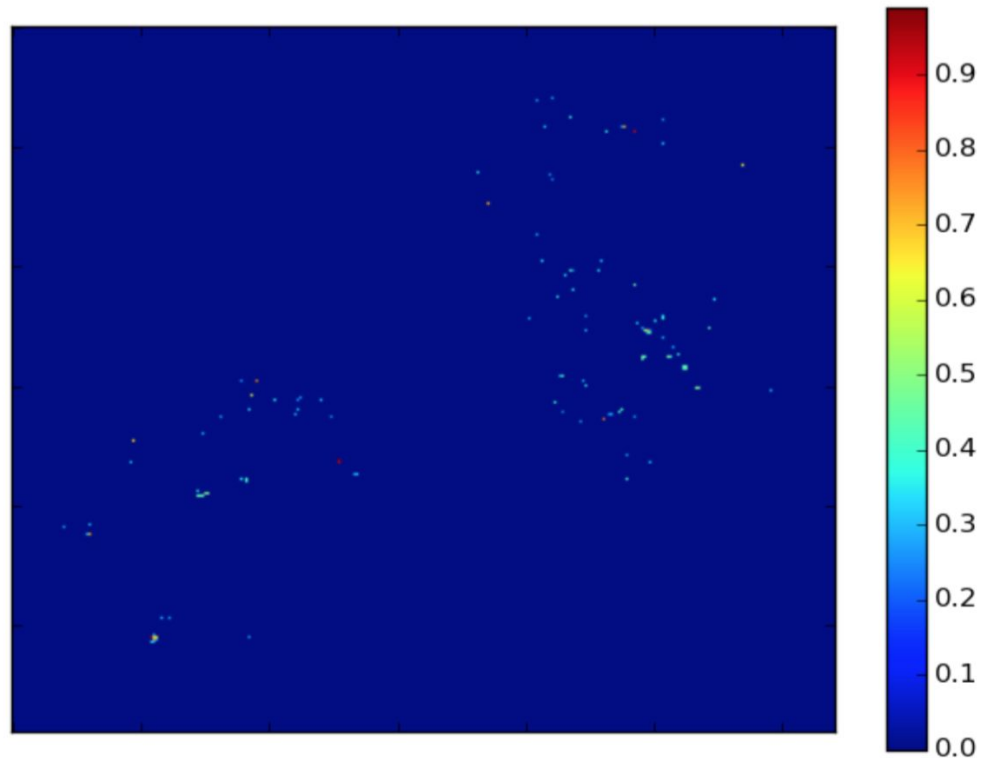
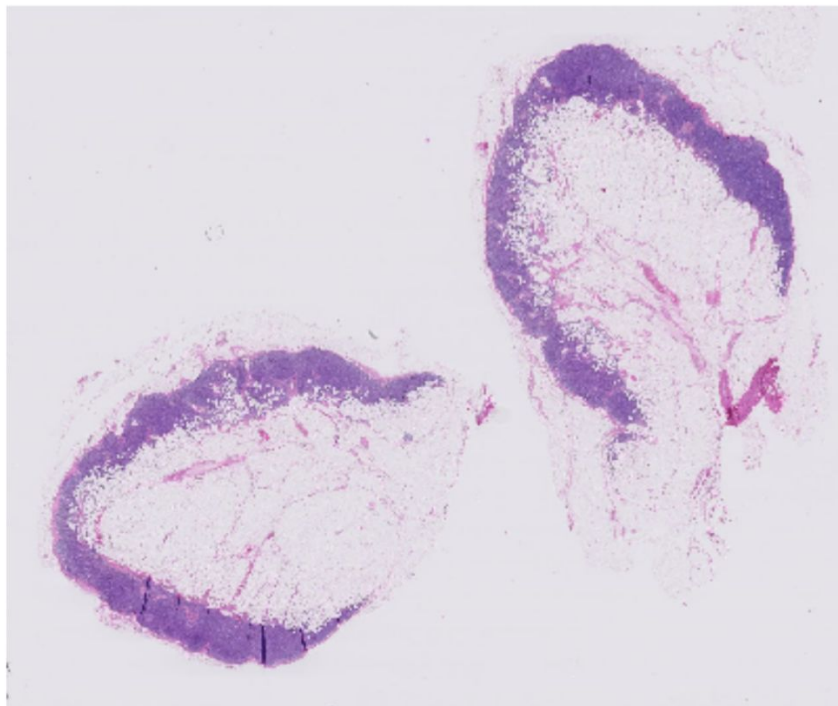
Tumour Patches



Determining the probability that an image patch is a tumour can be solved using deep learning models.



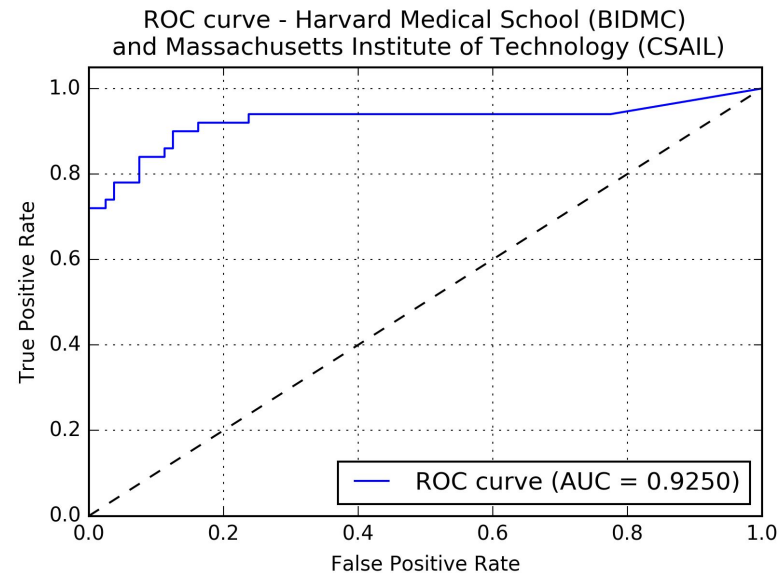




<https://camelyon16.grand-challenge.org/>
Image credit: Harvard Medical School, MIT, and EXB Research

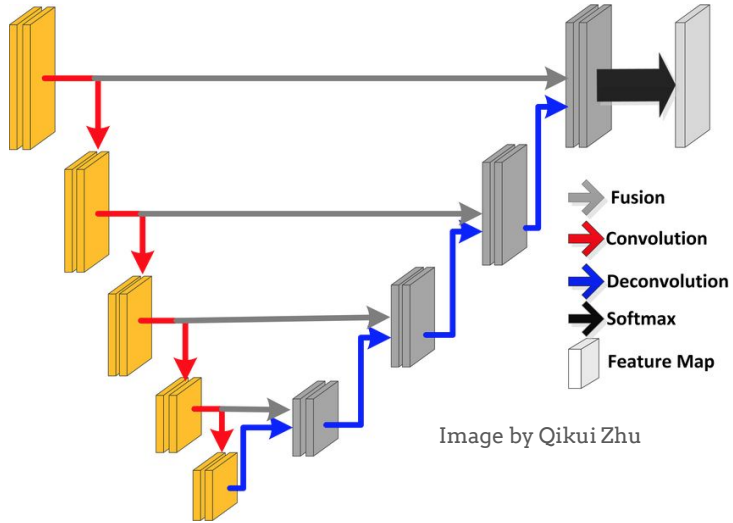
High accuracy screening and very reproducible!

Team	AUC
Harvard Medical School and MIT, Method 1	0.9234
EXB Research and Development co., Germany	0.9156
Independent participant, Germany	0.8654
Middle East Technical University, Departments of EEE, NSNT and HS, Turkey	0.8642
NLP LOGIX co., USA	0.8298



How does it work?

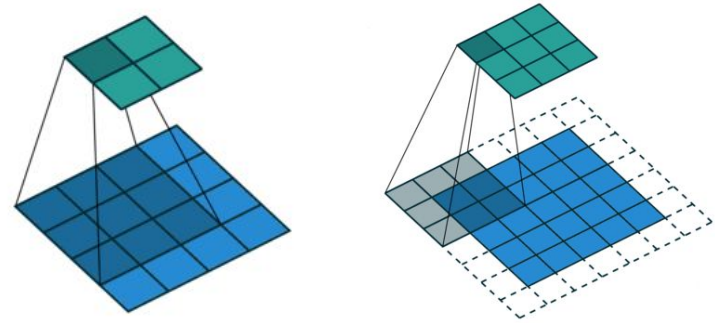
Segmentation with Deep Learning



[Ronneberger et al., U-Net: Convolutional Networks for Biomedical Image Segmentation 2015]

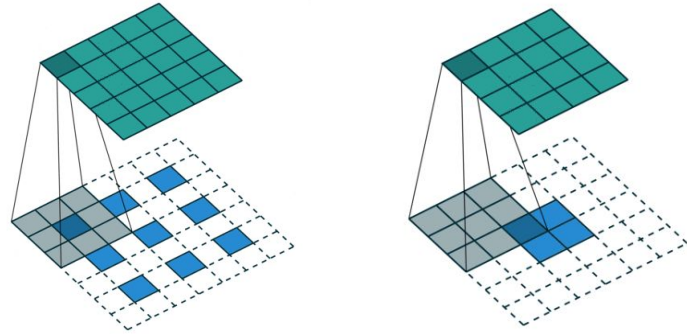
[Honari et al., Recombinator Networks: Learning Coarse-to-Fine Feature Aggregation 2015]

Downsample



Images by Vincent Dumoulin (UdeM)

Upsample

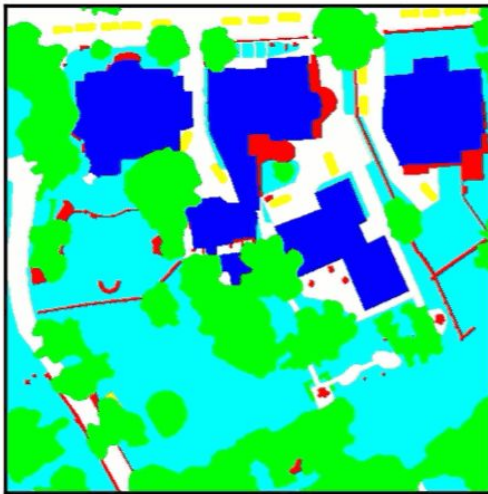


Segmentation training in progress

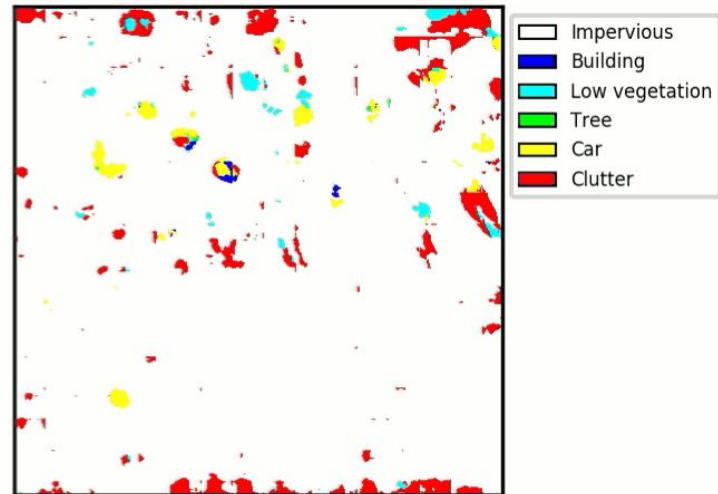
RGB



Ground Truth

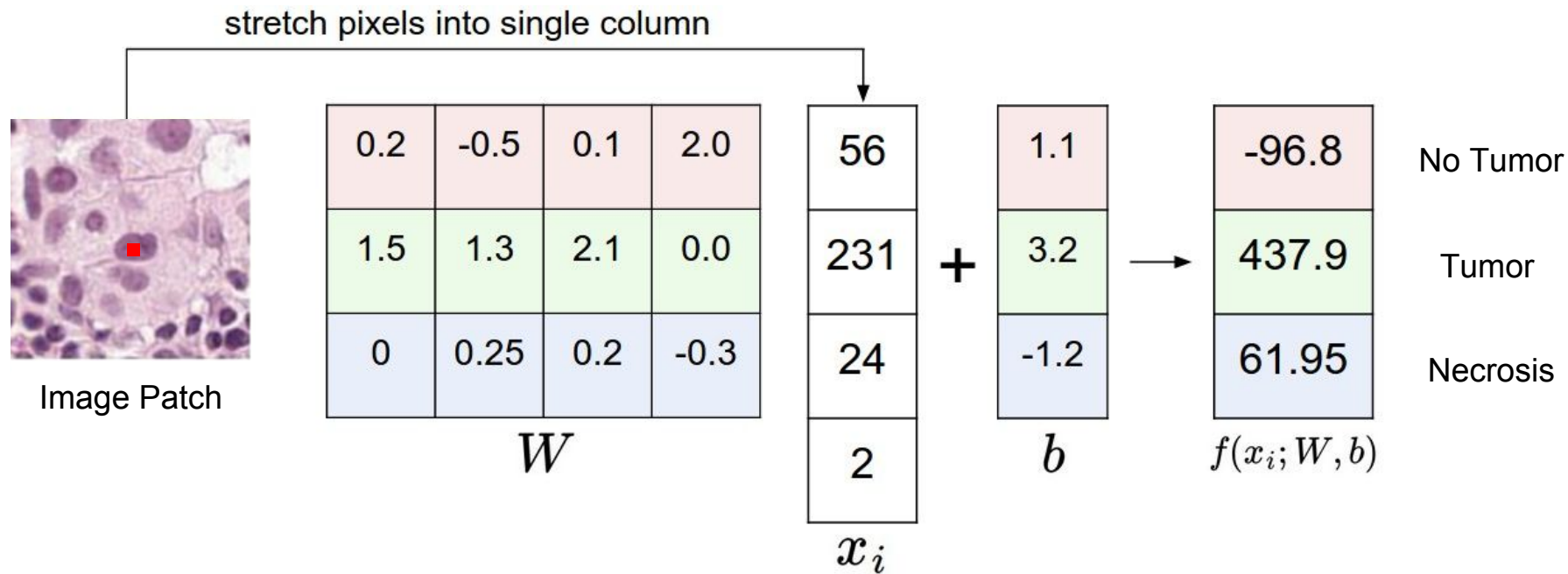


Prediction



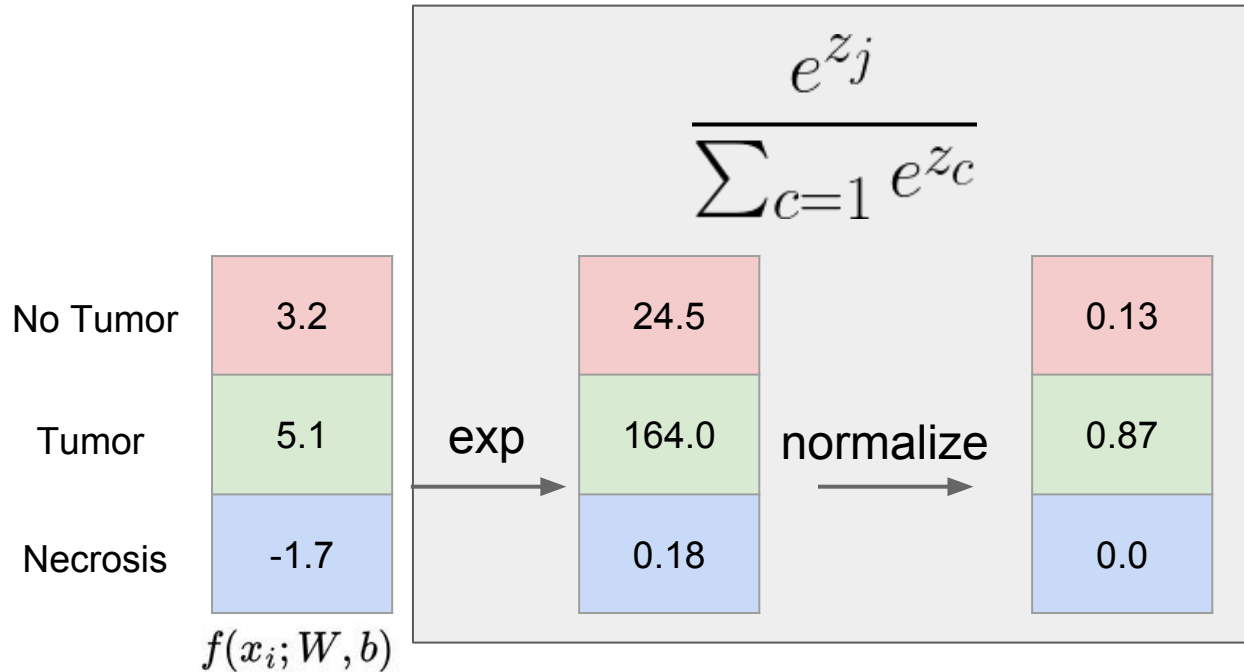
How can the network learn?

Example



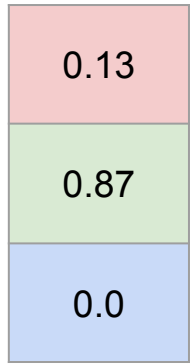
Given a patch predict the class of the center pixel

Softmax



To predict multiple classes we project to a probability distribution

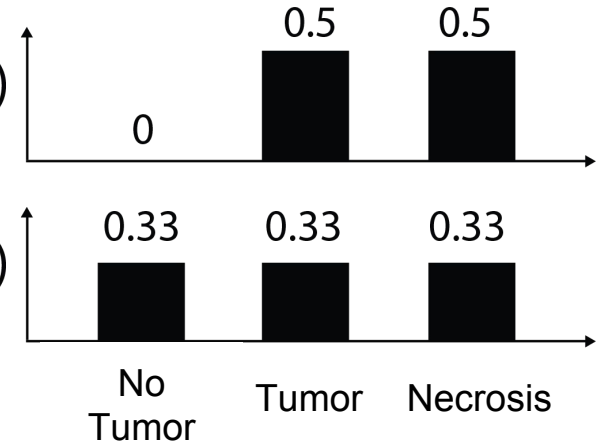
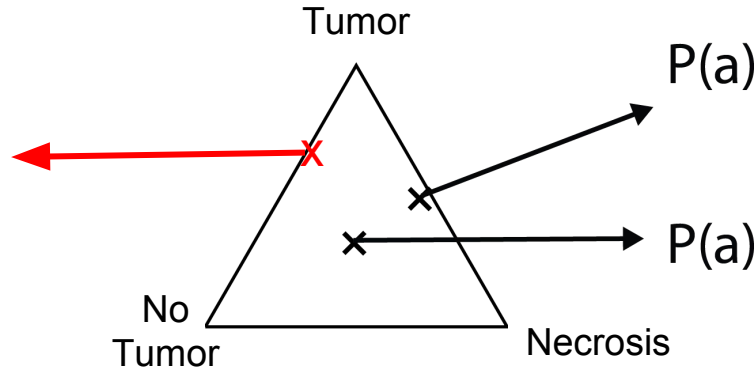
Simplex



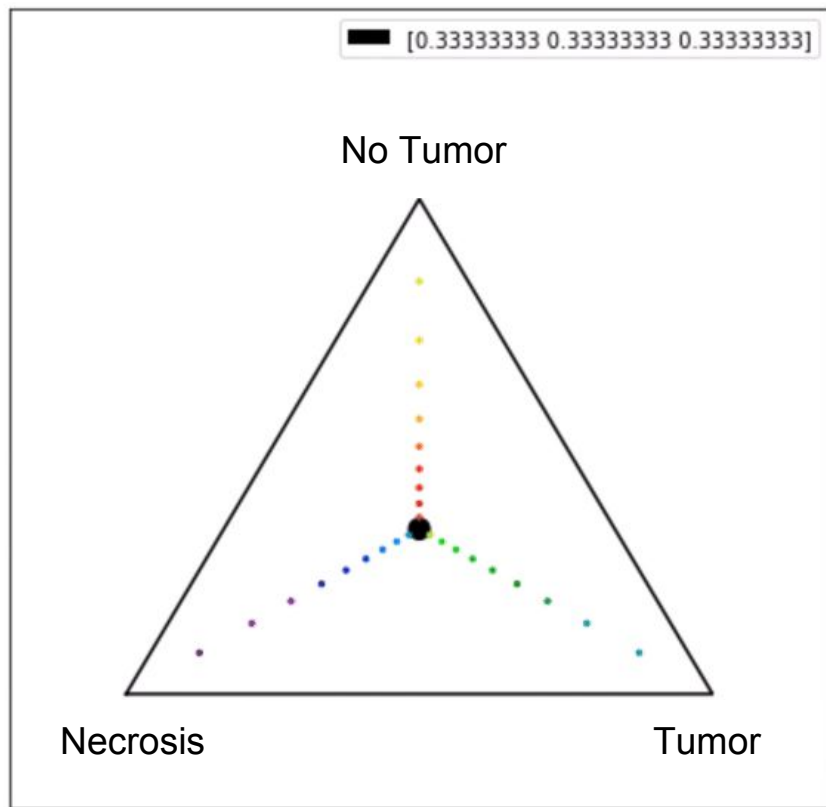
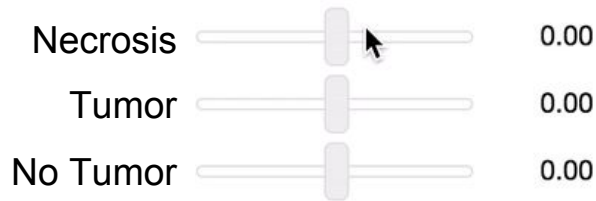
No Tumor

Tumor

Necrosis



Because it is on a simplex; the correction of one term impacts all

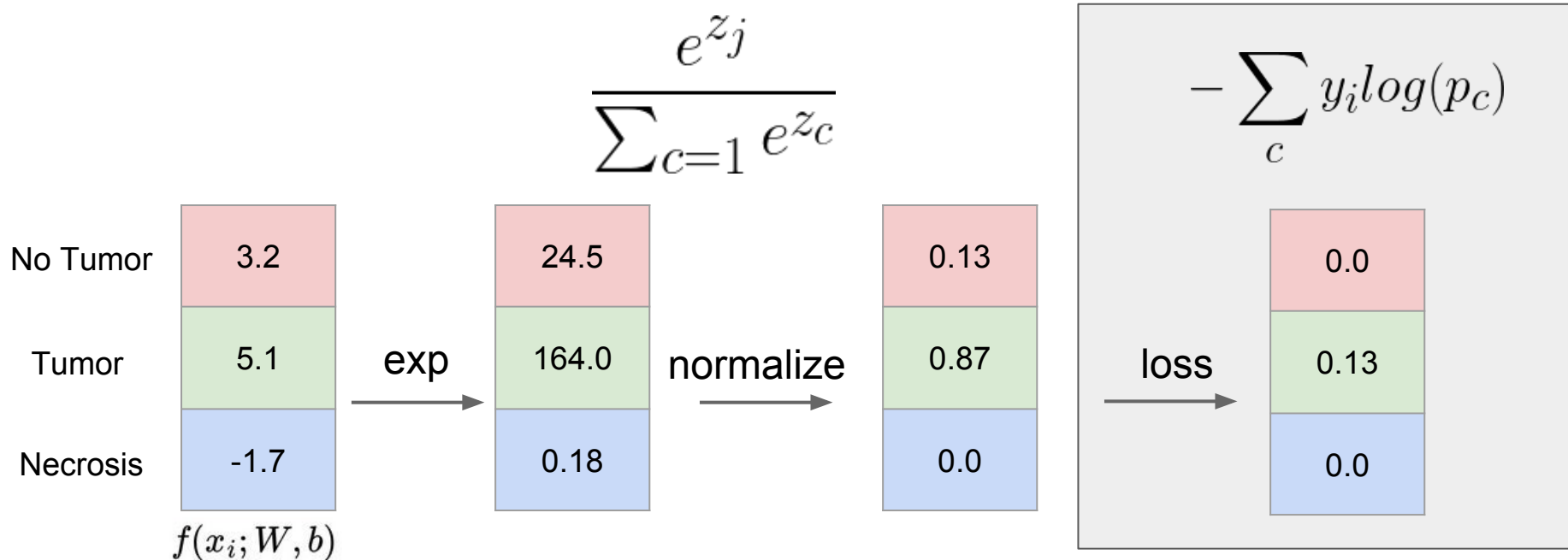


Infinite ways to generate the same output.

A correction of one sends gradients to others

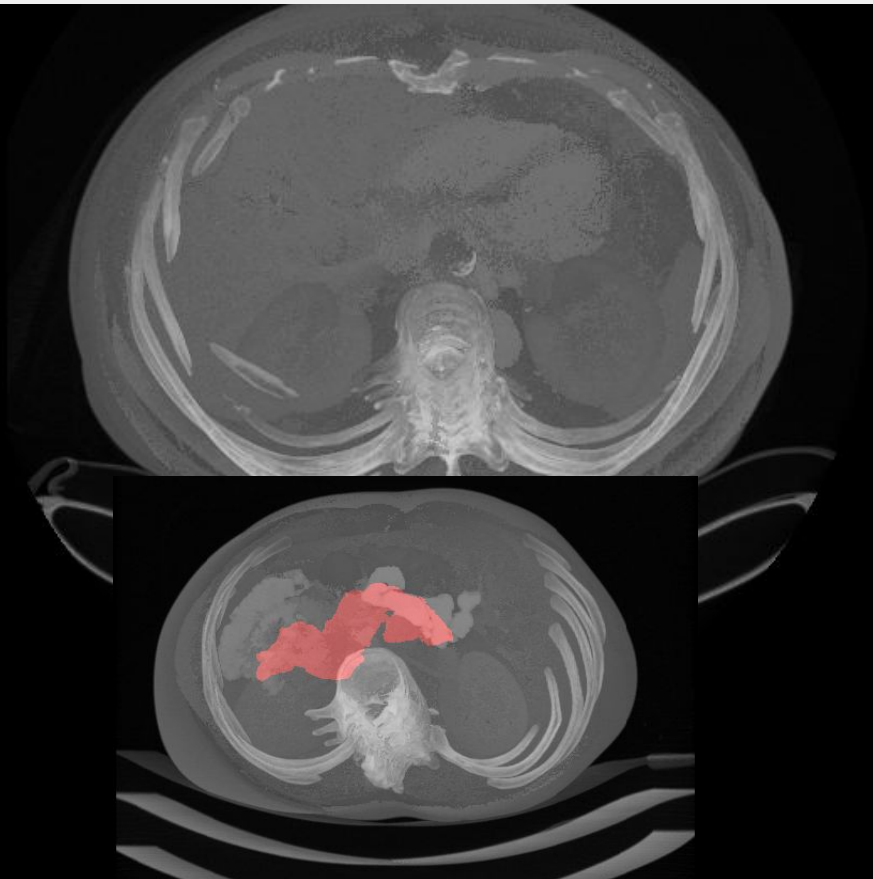
We can learn unseen classes through a process of elimination.

Softmax and Cross-entropy loss

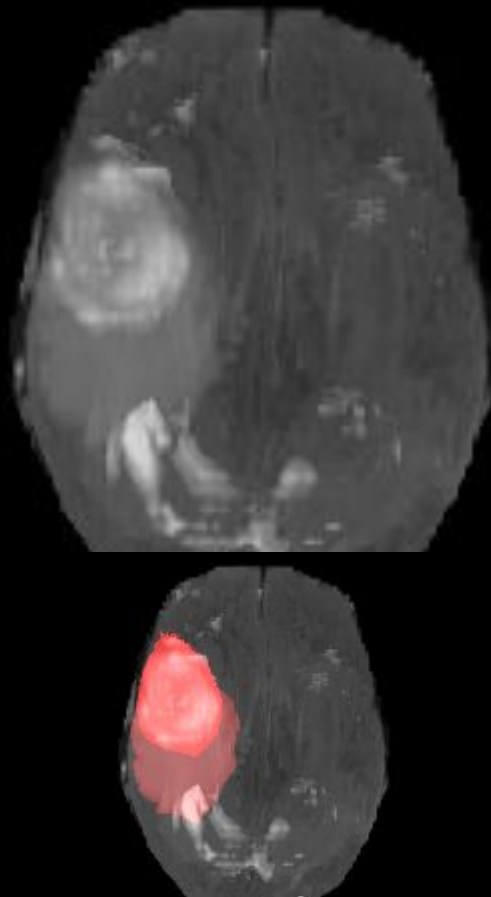


To predict multiple class we can project the output onto a simplex and compute the loss there.

More segmentation tasks!

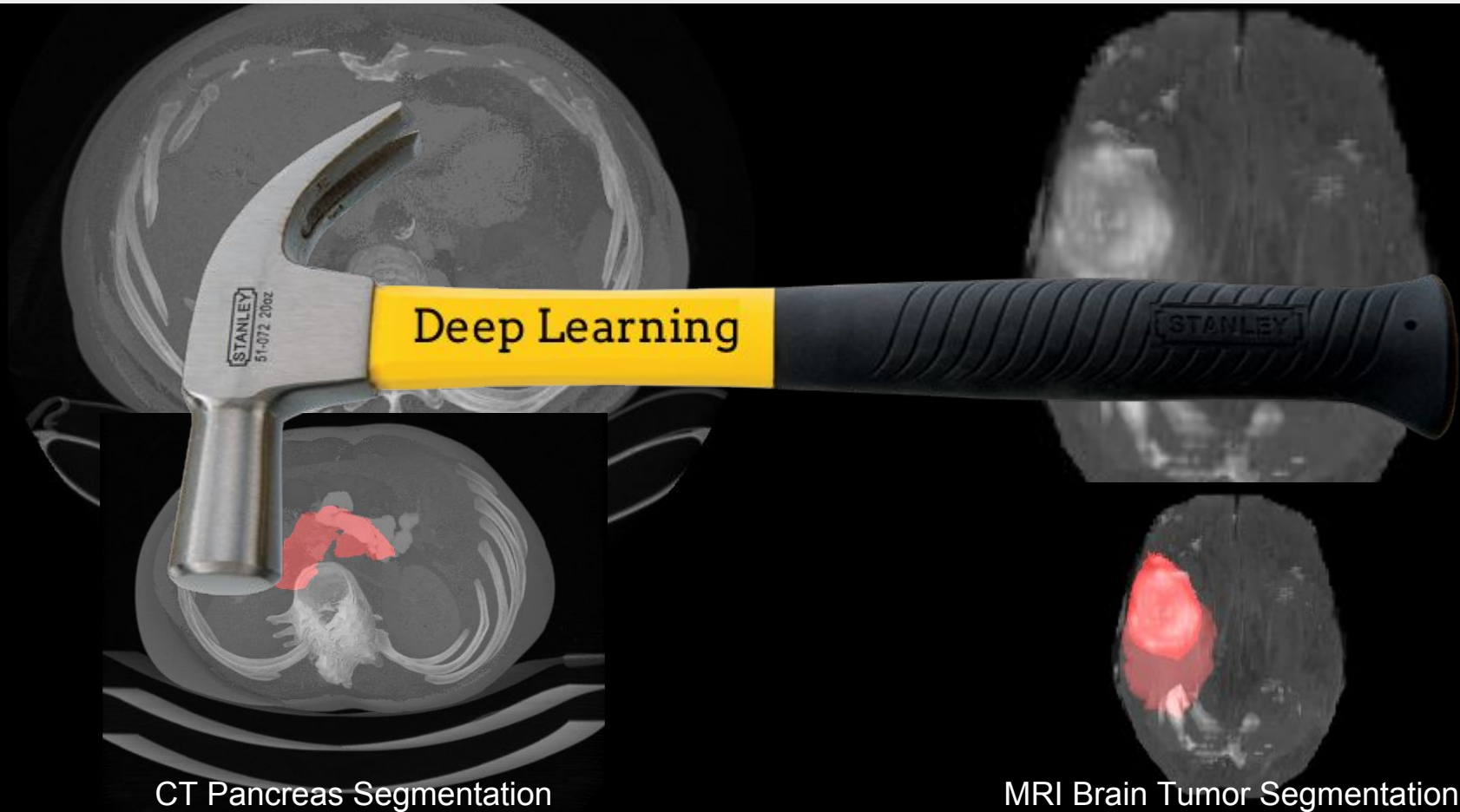


CT Pancreas Segmentation

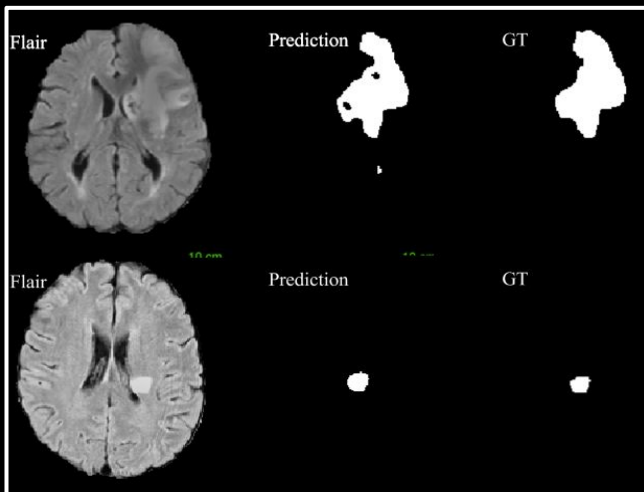


MRI Brain Tumor Segmentation

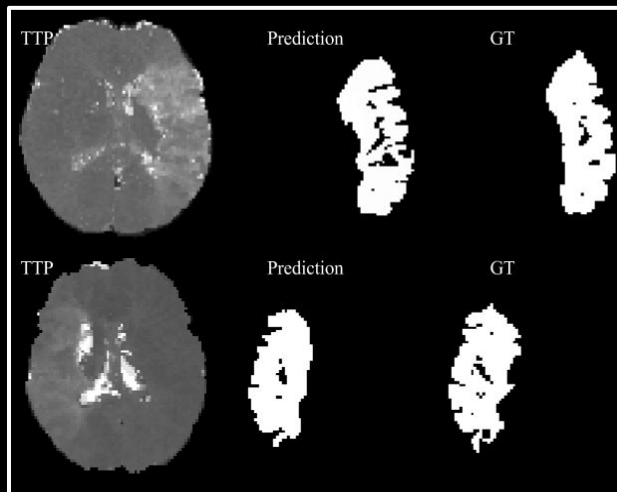
More segmentation tasks!



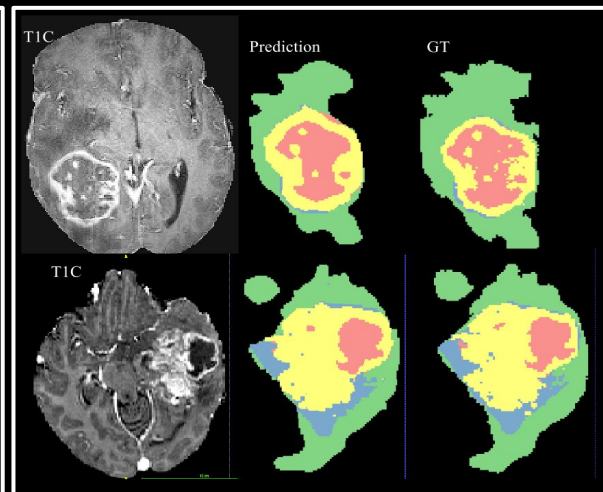
More segmentation tasks!



Sub-acute ischemic stroke
lesion segmentation

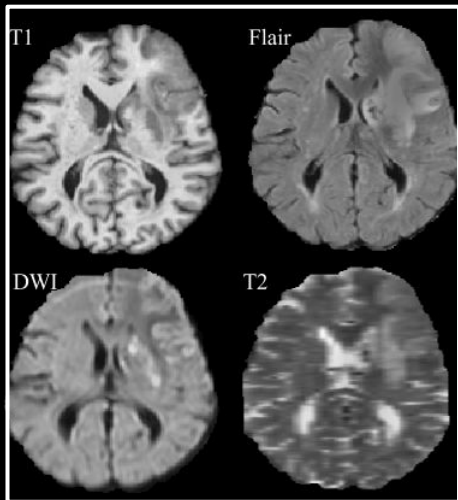


Stroke Perfusion
Estimation

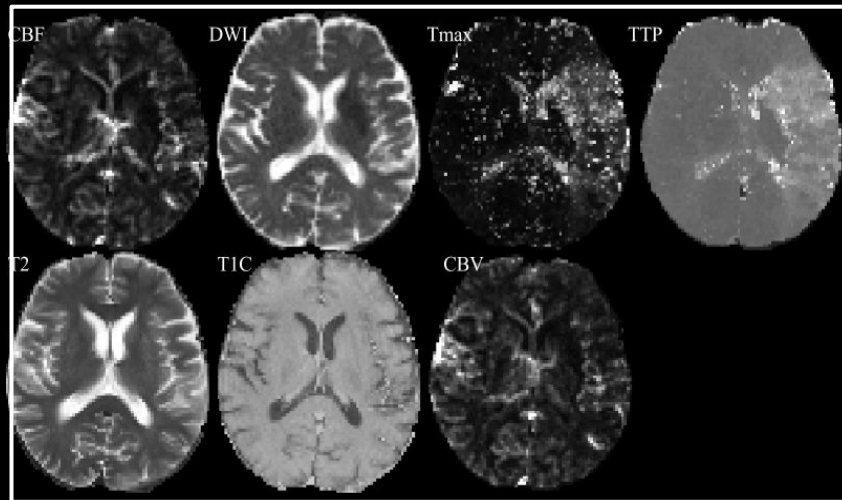


Brain tumor
segmentation

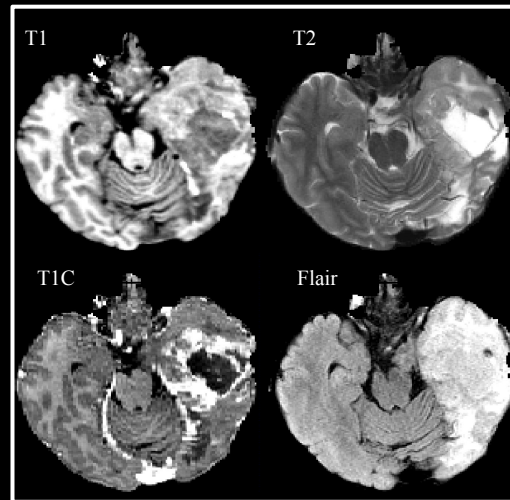
Multi-modal MRI acquisition



Sub-acute ischemic stroke
lesion segmentation

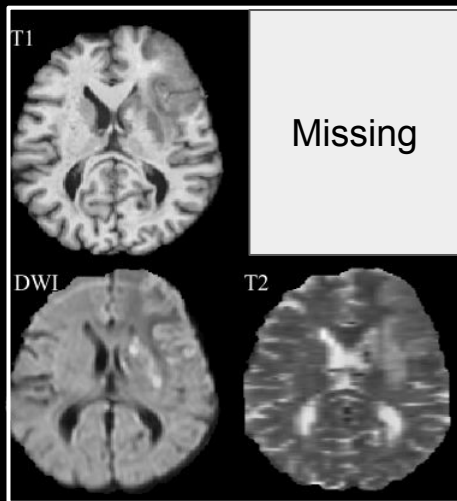


Stroke Perfusion
Estimation

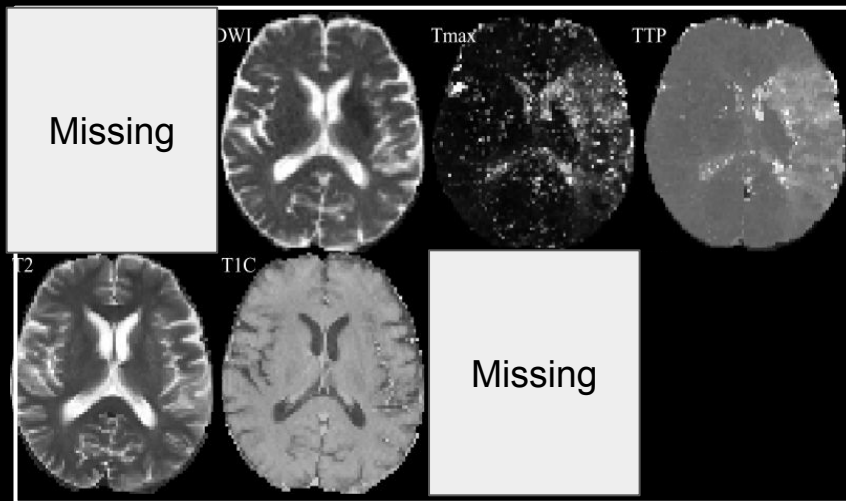


Brain tumor
segmentation

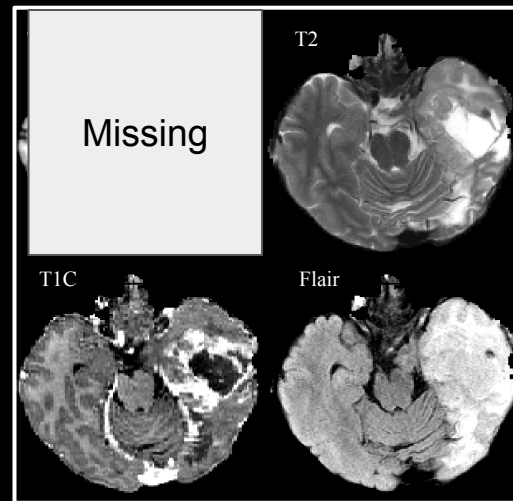
Multi-modal MRI acquisition



Sub-acute ischemic stroke
lesion segmentation

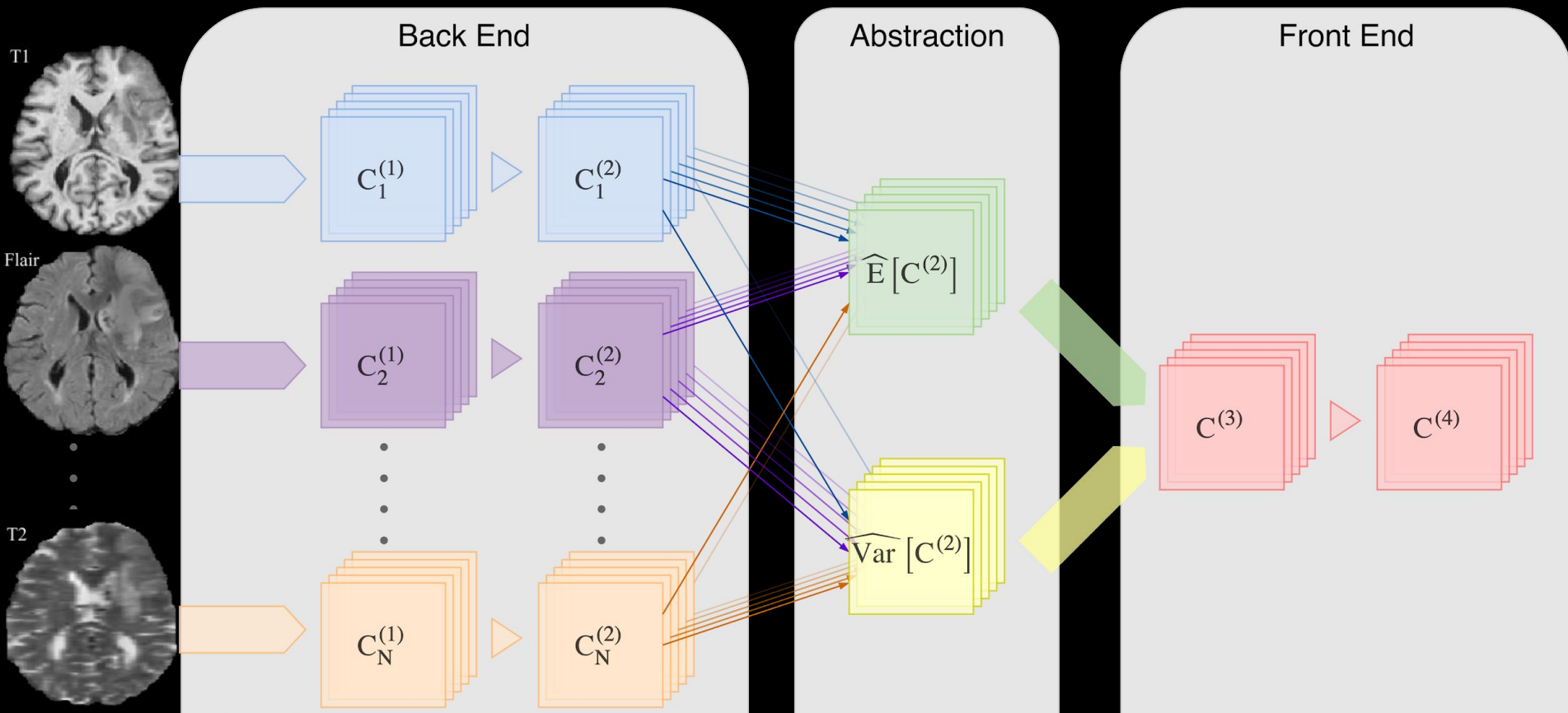


Stroke Perfusion
Estimation

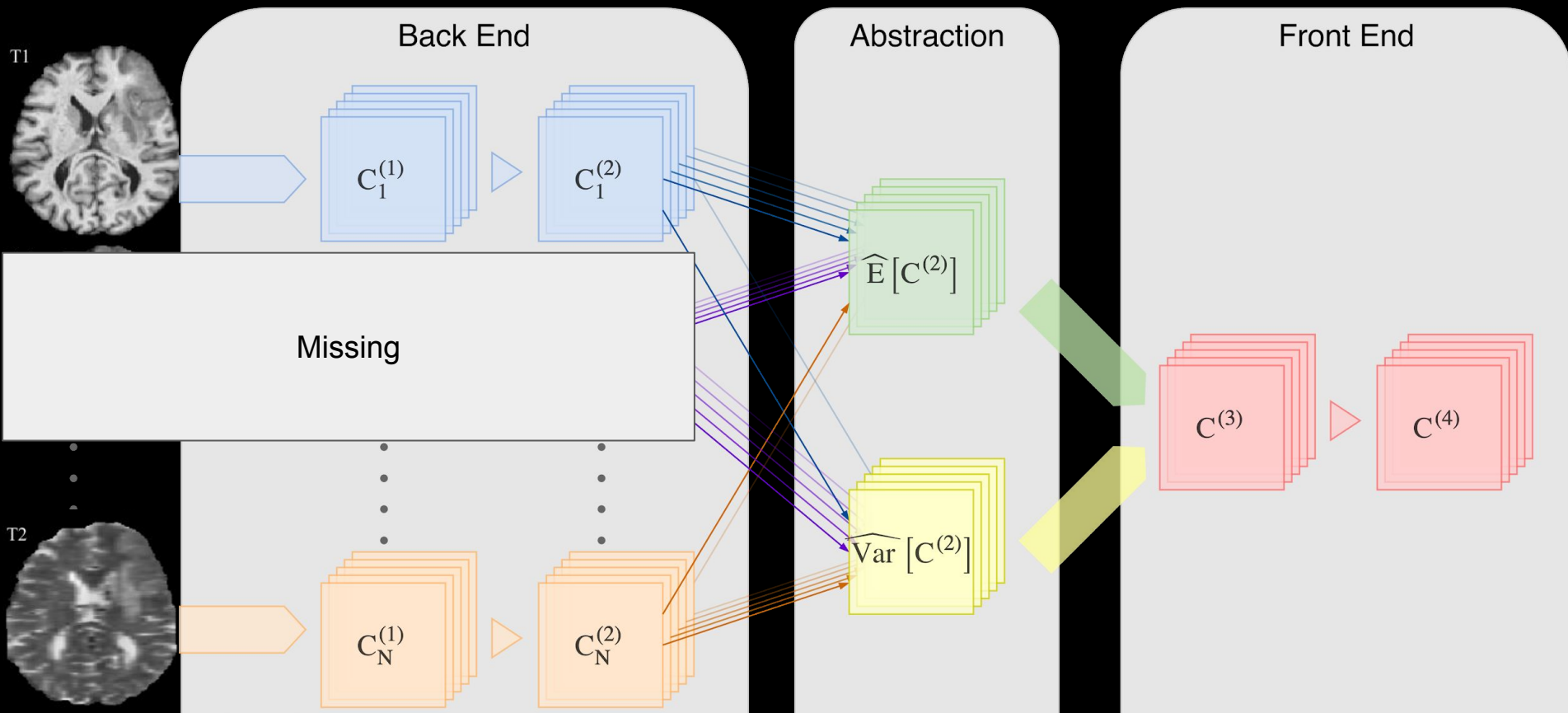


Brain tumor
segmentation

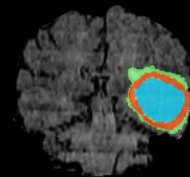
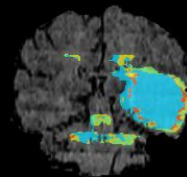
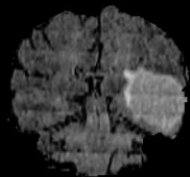
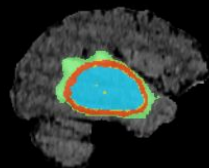
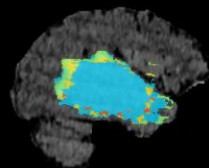
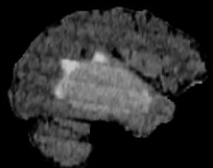
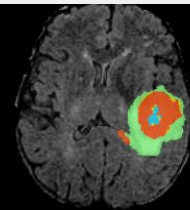
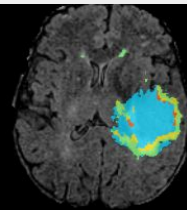
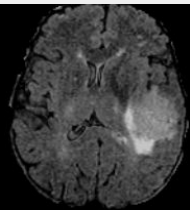
HeMIS: Hetero-Modal Image Segmentation



HeMIS: Hetero-Modal Image Segmentation



Results (BRATS)



FLAIR

T2W

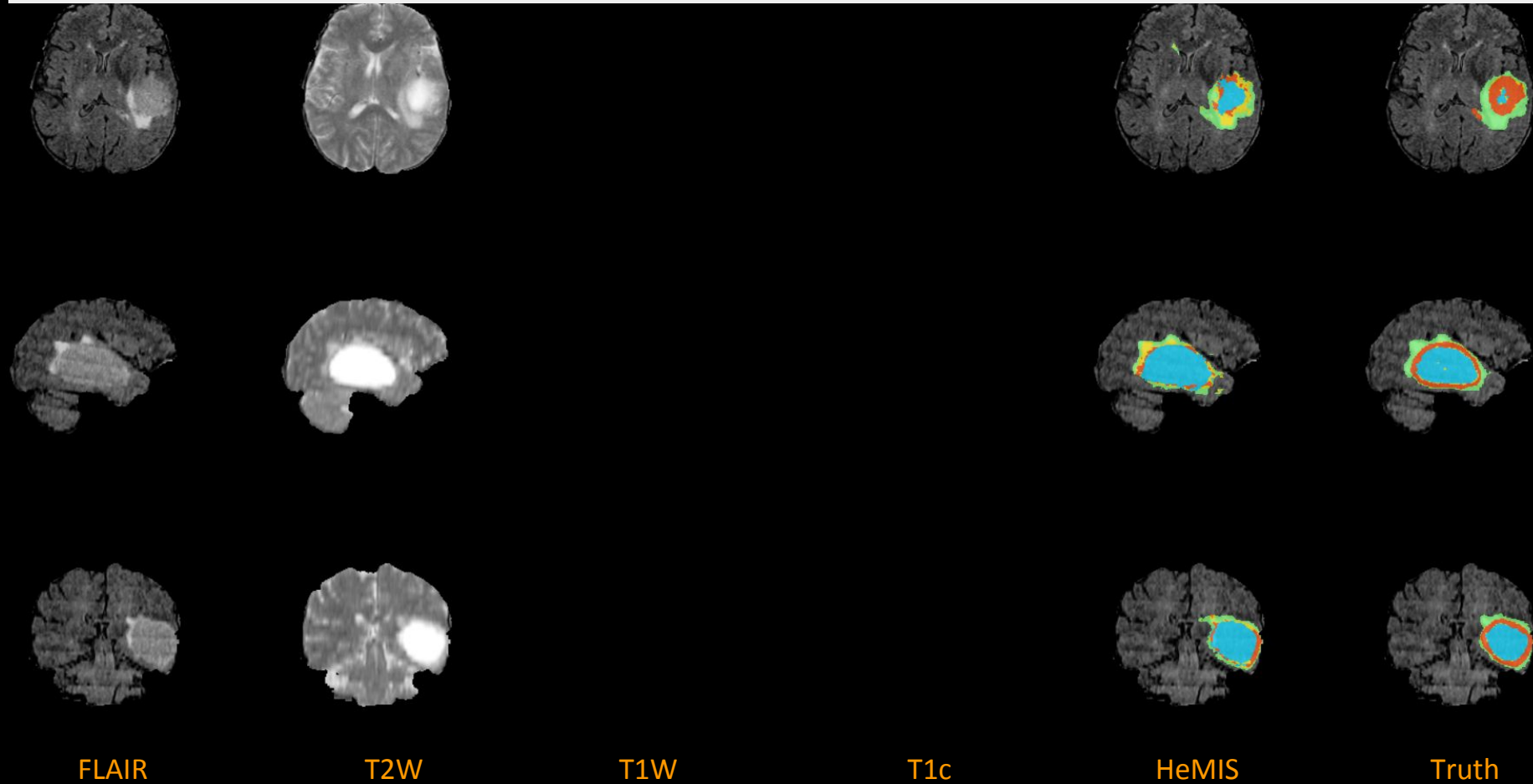
T1W

T1c

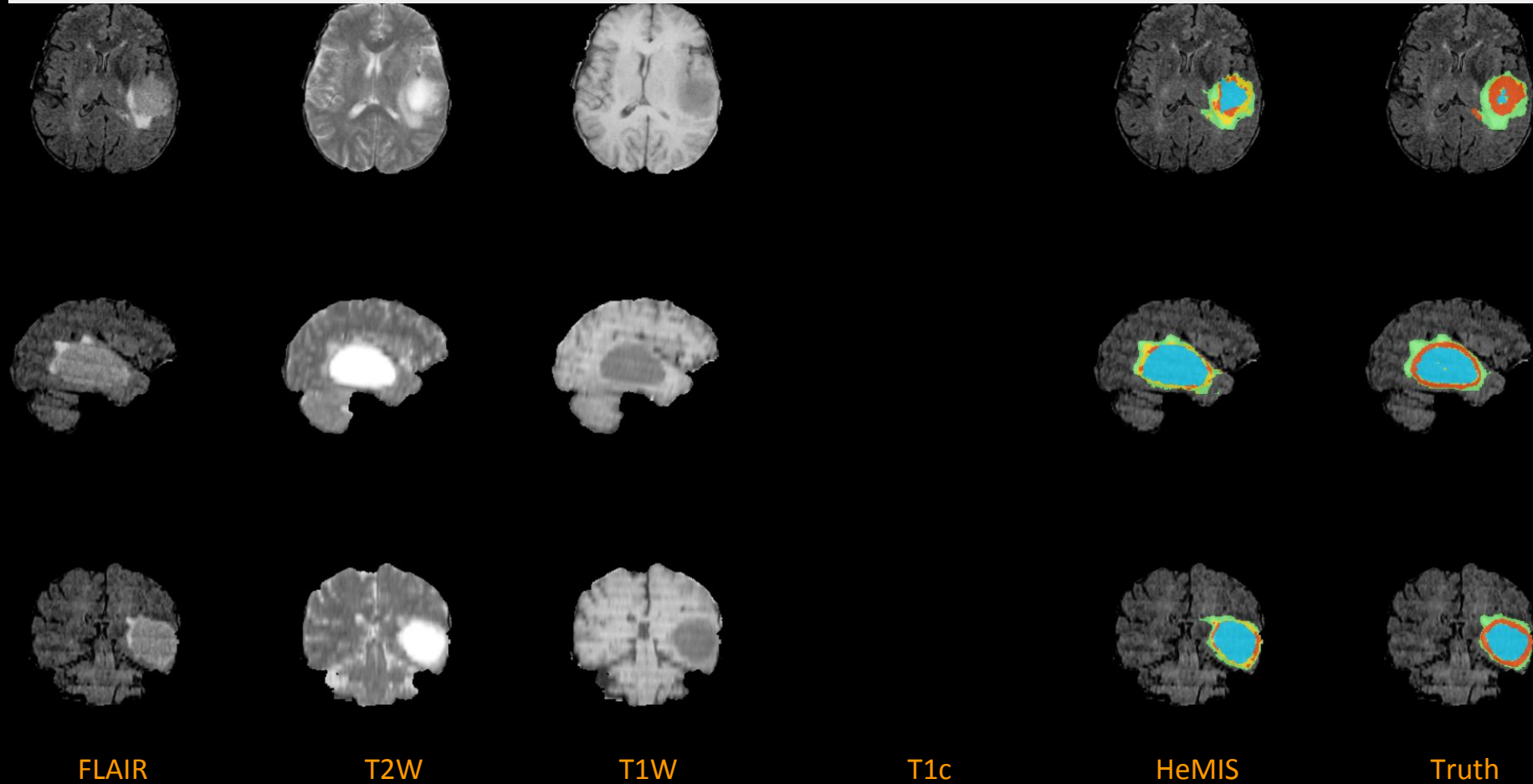
HeMIS

Truth

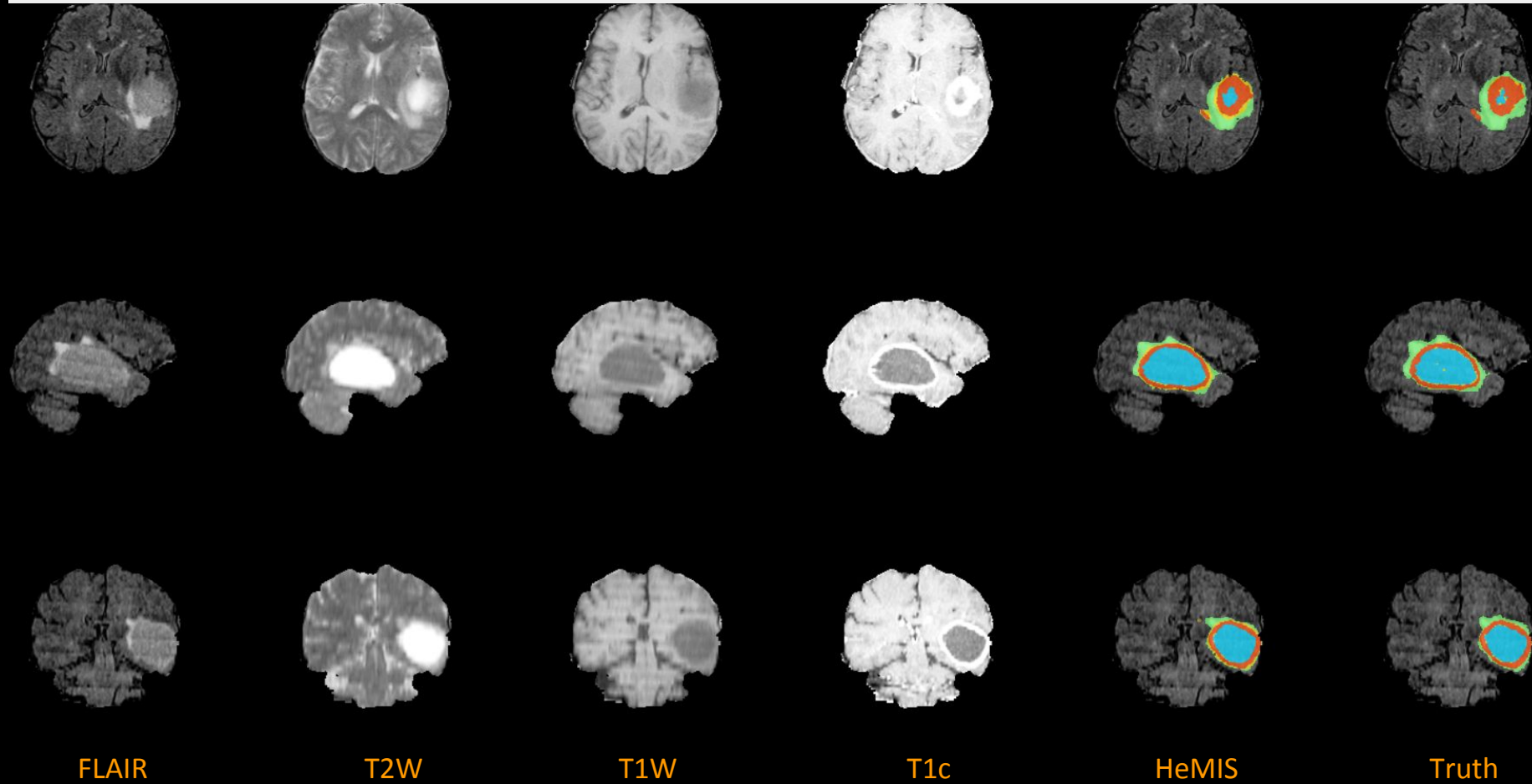
Results (BRATS)



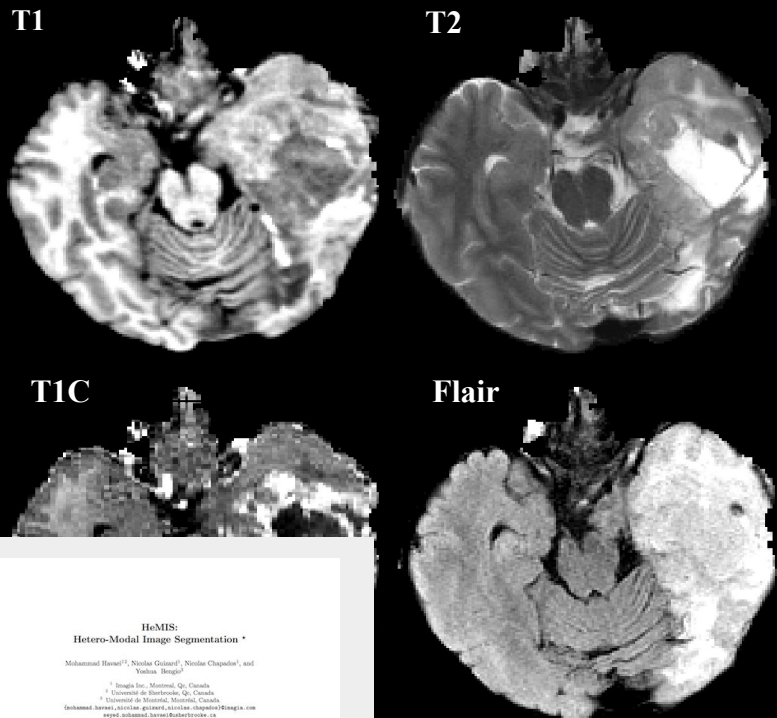
Results (BRATS)



Results (BRATS)



Brain tumor segmentation (BRATS2013 dataset)



- Edema
- Necrosis
- Non-enhanced
- Enhanced

Training data:
220 subjects with high grade and
54 subjects with low grade tumors

	Dice Similarity			Challenge		
	Leaderboard					
Method	Complete	Core	Enhancing	Complete	Core	Enhancing
Tustison	79	65	53	87	78	74
Zhao	79	59	47	84	70	65
Meier	72	60	53	82	73	69
HeMIS	83	67	57	88	75	74

HeMIS:
Hetero-Modal Image Segmentation *

Mohammad Havaei¹, Nicolas Guérin², Nicolas Chapado³, and
Yoshua Bengio¹

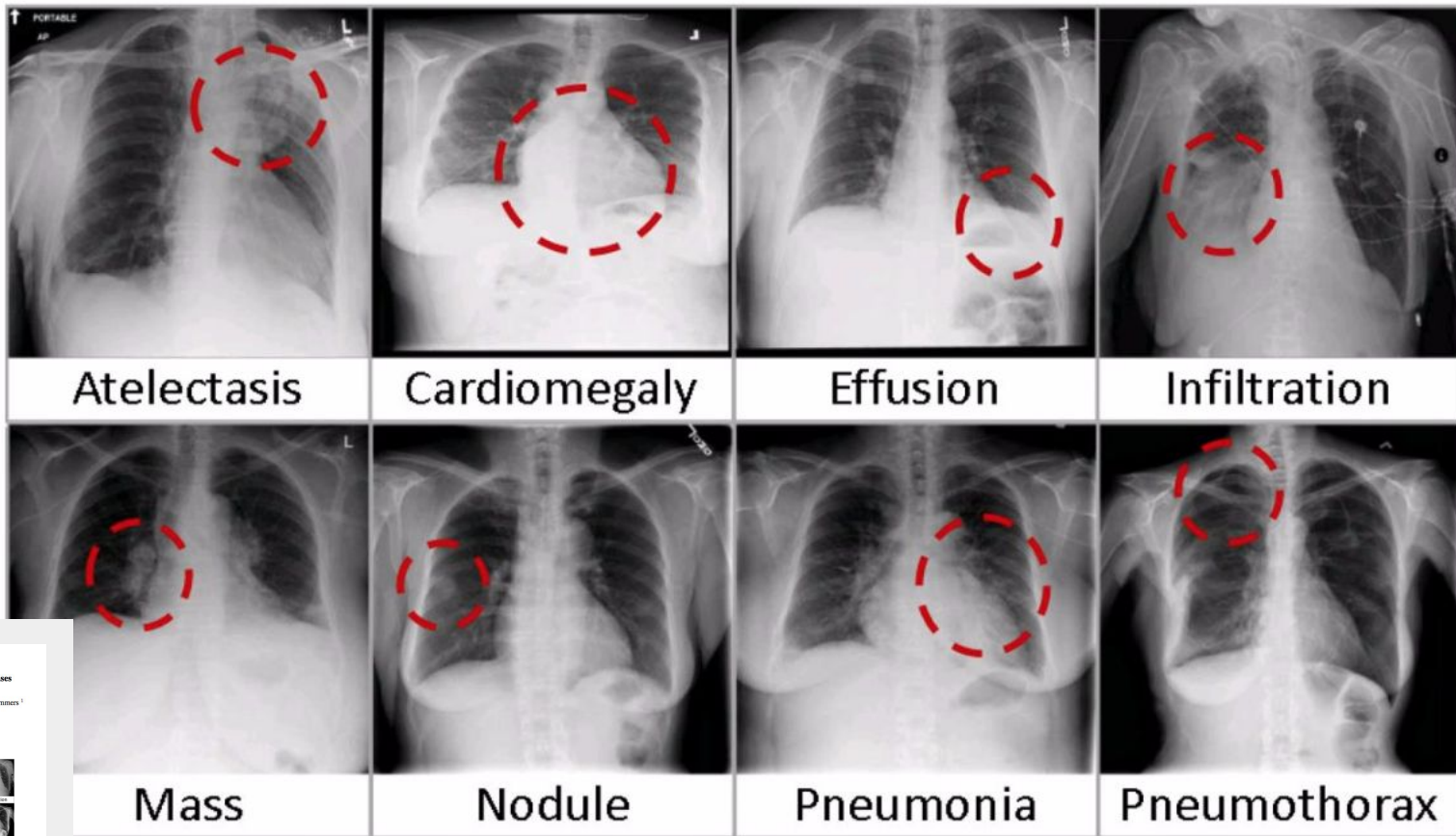
¹ Imagia Inc., Montreal, QC, Canada
² Université de Sherbrooke, QC, Canada
³ Université de Montreal, Montreal, Canada

{mohammad.havaei, nicolas.guerin, nicolas.chapado}@imagia.ca
yves.bengio@umontreal.ca
http://www.imagia.com

Abstract. We introduce a deep learning image segmentation framework that is extremely robust to missing imaging modalities. Instead of attempting to impute or synthesize missing data, the proposed approach learns, for each modality, an embedding of the input image into a single latent vector space for which arbitrary operations (such as taking the mean) are well defined. Priors in that space, which are averaged over modalities available at inference time, are then further processed to yield the desired segmentation. As such, any combination of modalities available at inference time can be processed as input, without having to learn a combinatorial number of separate models. Evaluated on two cross-modal MRI datasets, this is possible as input, without having to learn a combinatorial number of separate models. Evaluated on two cross-modal MRI datasets, this is possible as input, without having to learn a combinatorial number of separate models. Evaluated on two cross-modal MRI datasets, this is possible as input, without having to learn a combinatorial number of separate models.



Interpreting Chest X-Rays



ChestX-ray8: Hospital-scale Chest X-ray Database and Benchmarks on Weakly-Supervised Classification and Localization of Common Thorax Diseases

Xiaowang Wang¹, Yifan Peng², Le Lu¹, Zhiyong Lu¹, Muhammadali Bagheri¹, Ronald M. Summers¹
¹Department of Radiology and Imaging Sciences, Clinical Center,
²National Center for Biotechnology Information, National Library of Medicine,
 National Institutes of Health, Bethesda, MD 20892
 {xiaowang.wang, yifan.peng, lu-le, lu-zhiyong, muhammadali.bagheri, ronald.summers}@nih.gov

Abstract

The chest X-ray is one of the most commonly accessible radiological examinations for screening and diagnosis of many lung diseases. A tremendous number of X-ray imaging studies accompanied by radiological reports are accumulated and stored in many modern hospitals. Private Archiving and Communication Systems (PACS). On the other side, it is still an open question how the type of hospital-size knowledge database consisting invaluable imaging information (i.e., lesion's location) can be used to utilize the data hungry deep learning paradigm in building early large-scale high precision computer-aided diagnosis (CAD) systems.

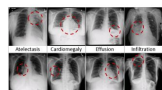


Figure 1. Eight common thoracic diseases observed in chest X-ray images. The diseases are: Atelectasis, Cardiomegaly, Effusion, Infiltration, Mass, Nodule, Pneumonia, and Pneumothorax. Each disease is shown with a representative chest X-ray image and a red dashed circle highlighting the affected area.

Wang, ChestX-ray8: Hospital-scale Chest X-ray Database and Benchmarks on Weakly-Supervised Classification and Localization of Common Thorax Diseases. 2017

Convolutional Neural Net Predictions

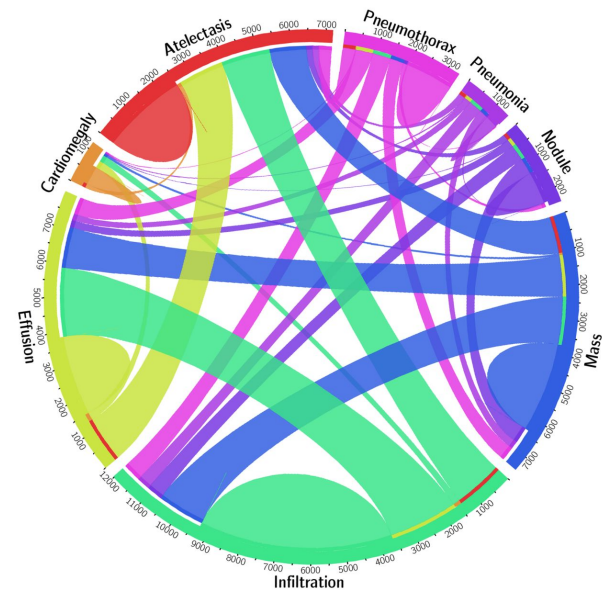
Setting	Atelectasis	Cardiomegaly	Effusion	Infiltration	Mass	Nodule	Pneumonia	Pneumothorax
AlexNet	0.6458	0.6925	0.6642	0.6041	0.5644	0.6487	0.5493	0.7425
GoogLeNet	0.6307	0.7056	0.6876	0.6088	0.5363	0.5579	0.5990	0.7824
VGGNet-16	0.6281	0.7084	0.6502	0.5896	0.5103	0.6556	0.5100	0.7516
ResNet-50	0.7069	0.8141	0.7362	0.6128	0.5609	0.7164	0.6333	0.7891

AUCs for each class of a multi-target model

32,717 patients

108,948 X-Rays

Text extracted using NLP from
doctors notes



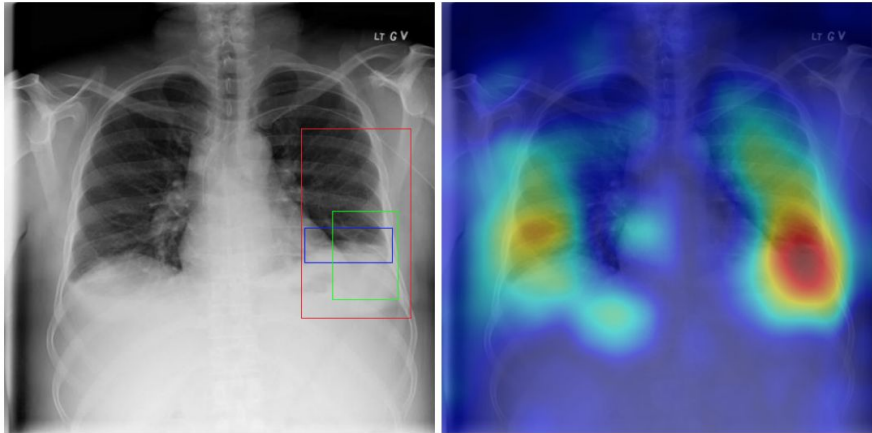
Radiology report	Keyword	Localization Result
findings include: 1. left basilar atelectasis/consolidation. 2. prominent hilum (mediastinal adenopathy). 3. left pic catheter (tip in atriocaval junction). 4. stable, normal appearing cardiomeastinal silhouette. impression: small right pleural effusion otherwise stable abnormal study including left basilar infiltrate/atelectasis, prominent hilum, and position of left pic catheter (tip atriocaval junction).	Effusion; Infiltration; Atelectasis	

Table 8. A sample of chest x-ray radiology report, mined disease keywords and localization result from the “Atelectasis” Class. Correct bounding box (in green), false positives (in red) and the ground truth (in blue) are plotted over the original image.

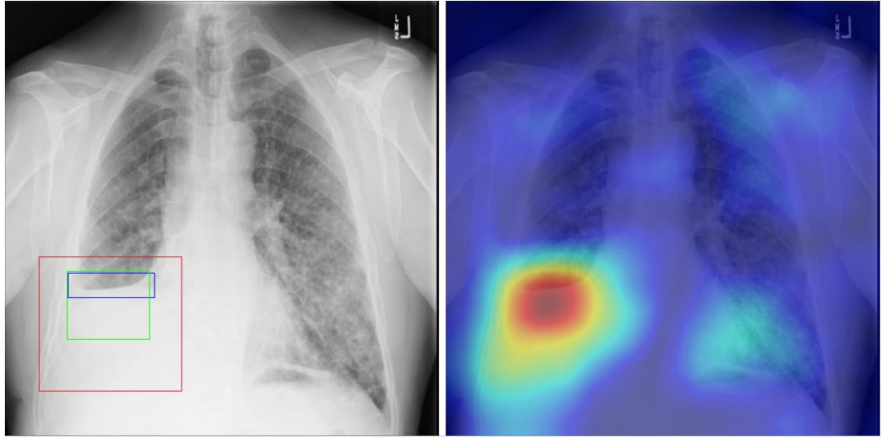
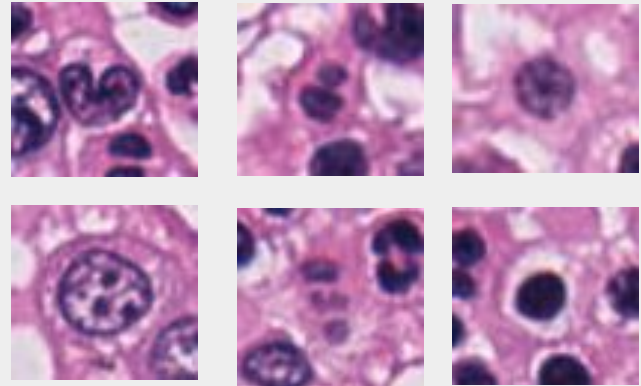
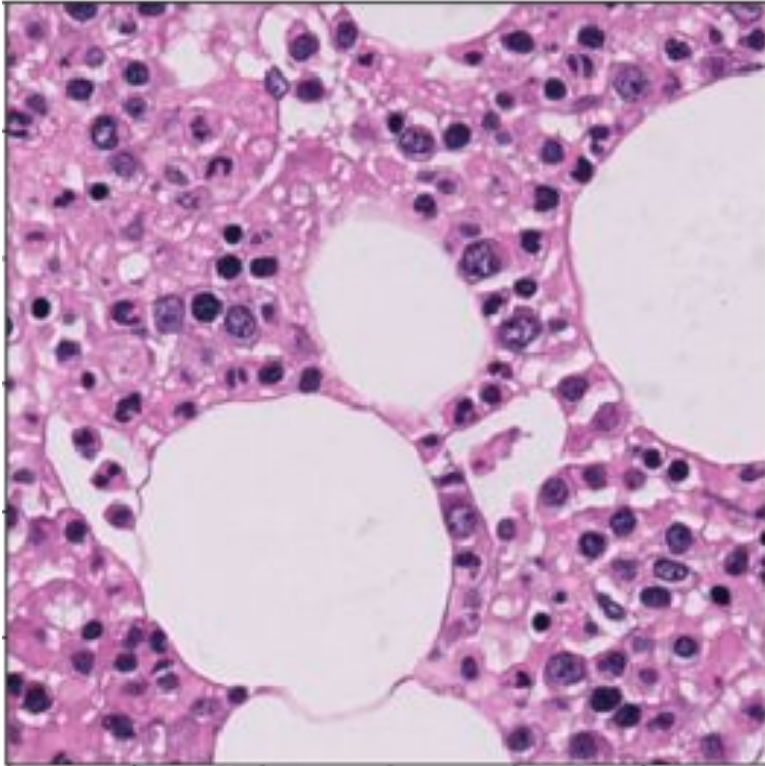
Radiology report	Keyword	Localization Result
findings: no appreciable change since XX/XX/XX. small right pleural effusion. elevation right hemidiaphragm. diffuse small nodules throughout the lungs, most numerous in the left mid and lower lung. impression: no change with bilateral small lung metastases.	Effusion; Nodule	 The localization result consists of two side-by-side images. The left image is a standard chest X-ray showing the lungs and heart. Three bounding boxes are overlaid: a green box (correct), a red box (false positive), and a blue box (ground truth). The green box is located in the lower right lung field, the red box is in the lower left lung field, and the blue box is in the upper right lung field. The right image is a heatmap corresponding to the X-ray, showing areas of high intensity (red/yellow) and low intensity (blue). The heatmap shows a strong red/yellow area in the lower right lung field, corresponding to the green bounding box, and a smaller red/yellow area in the lower left lung field, corresponding to the red bounding box. The blue bounding box is in a low-intensity blue area.

Table 10. A sample of chest x-ray radiology report, mined disease keywords and localization result from the “Effusion” Class. Correct bounding box (in green), false positives (in red) and the ground truth (in blue) are plotted over the original image.

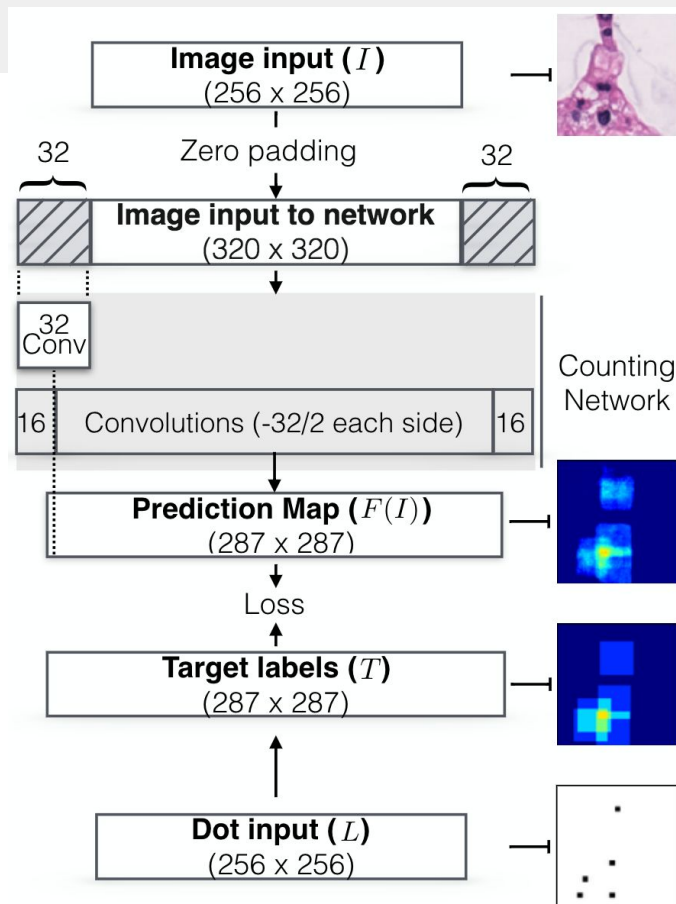
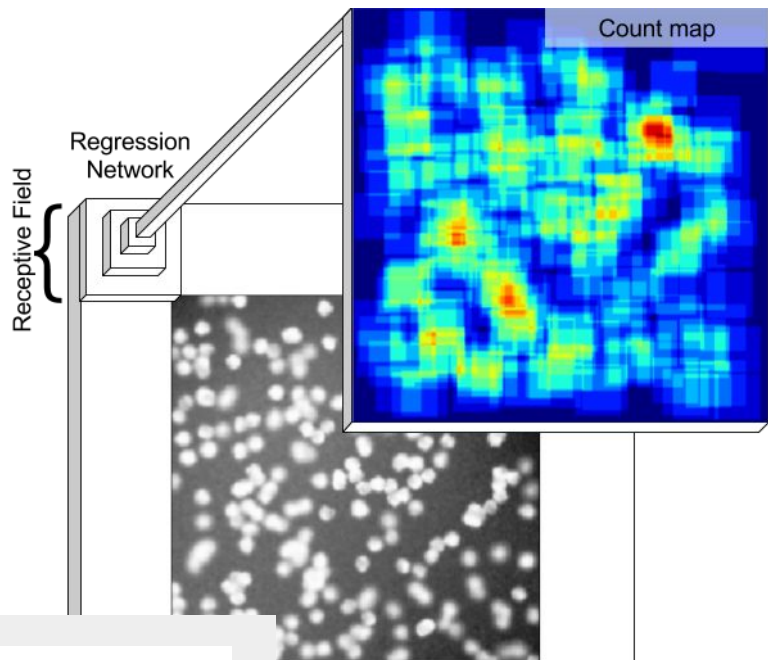


Cell counting from images



Complicated cell structure

Cell counting from images



Count-ception: Counting by Fully Convolutional Redundant Counting

Joseph Paul Cohen
Montreal Institute for Learning Algorithms
University of Montreal
Friends of the Parlow Fellow
Harvard University Institute
cohen.joseph@umontreal.ca

Genevieve Boucher
Institute for Research in Immunology and Cancer
University of Montreal
genevieve.boucher@umontreal.ca

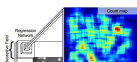
Chig A. Glasunov
Big Data Institute
University of Oxford
glasunov.c@big.ox.ac.uk

Henry Z. Lu
Department of Computer Science
University of Massachusetts Boston
henry.lu@umb.edu

Yoshua Bengio
CIFAR Senior Fellow
Montreal Institute for Learning Algorithms
University of Montreal
yoshua.bengio@umontreal.ca

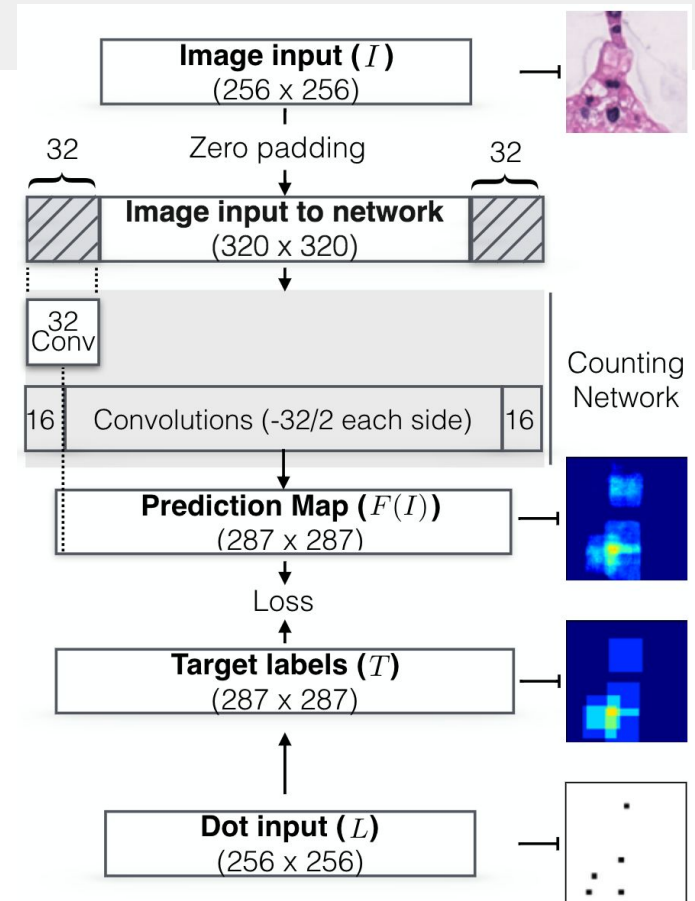
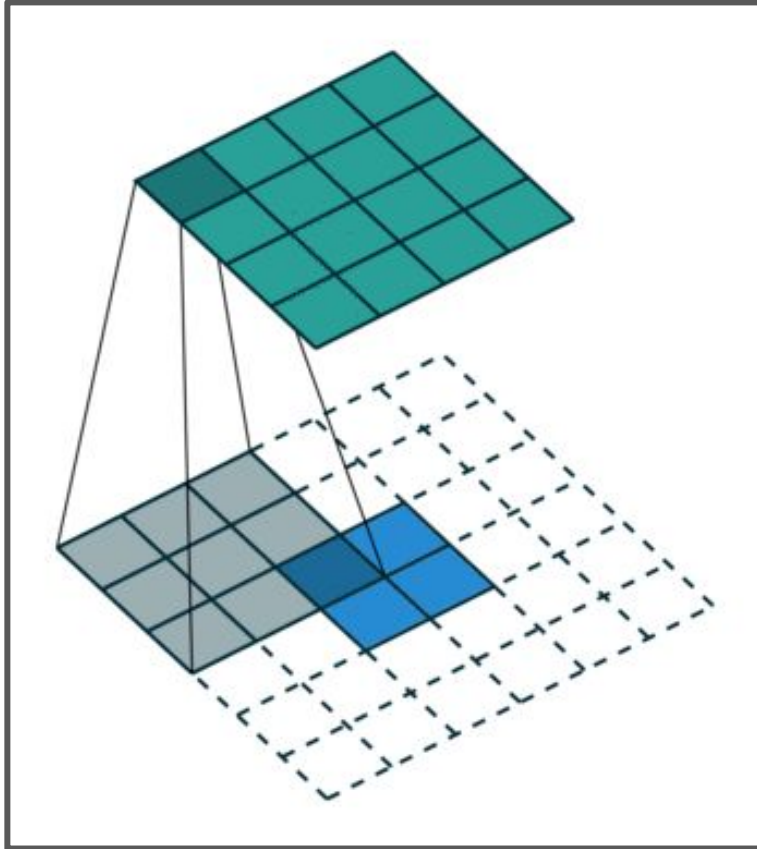
Abstract

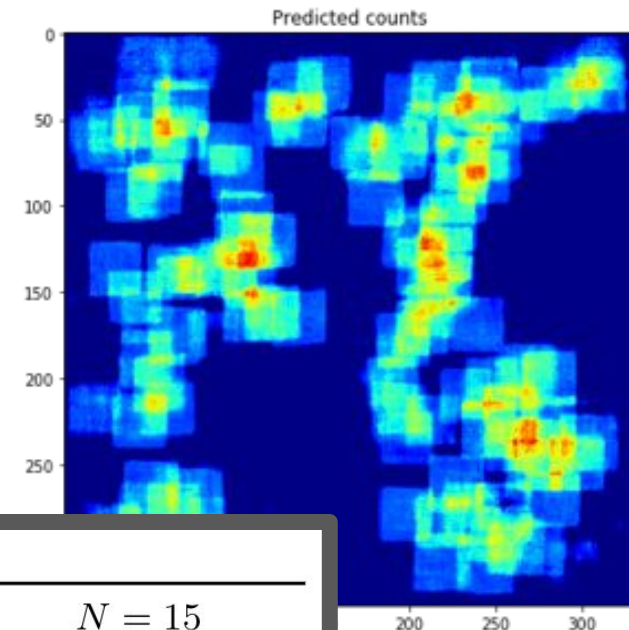
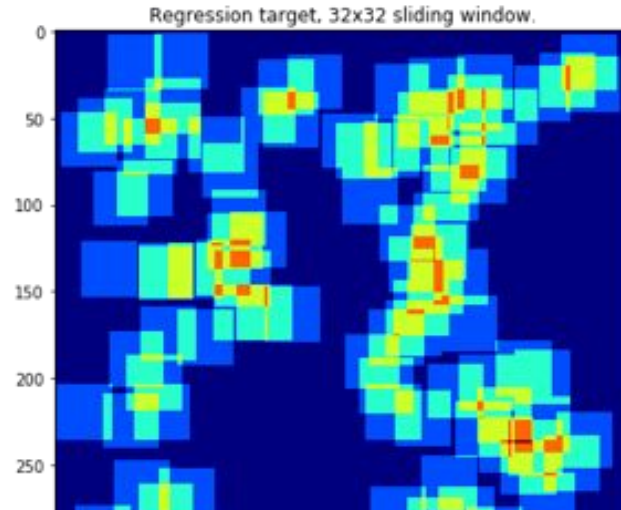
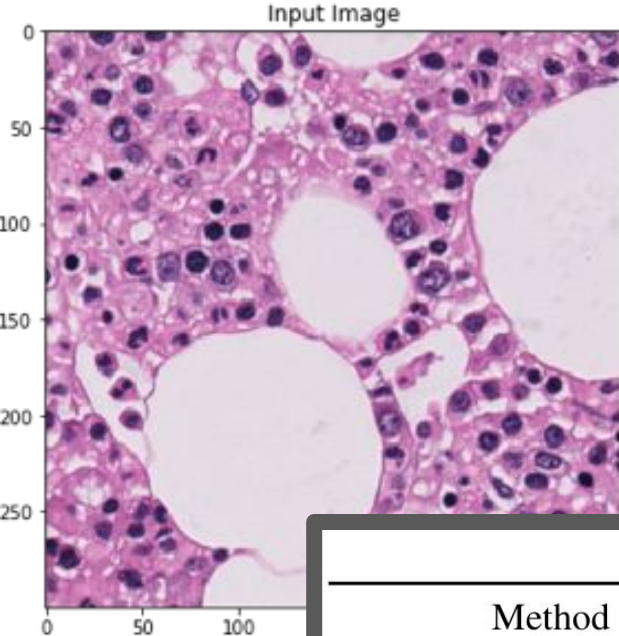
Counting objects in digital images is a process that should be automated by machines. This task is one of the most important and error-prone in the field of human-assisted image analysis. The goal is to have a system that takes as input an



Cohen et al., "Count-ception: Counting by Fully Convolutional Redundant Counting," 2017

Cell counting from images

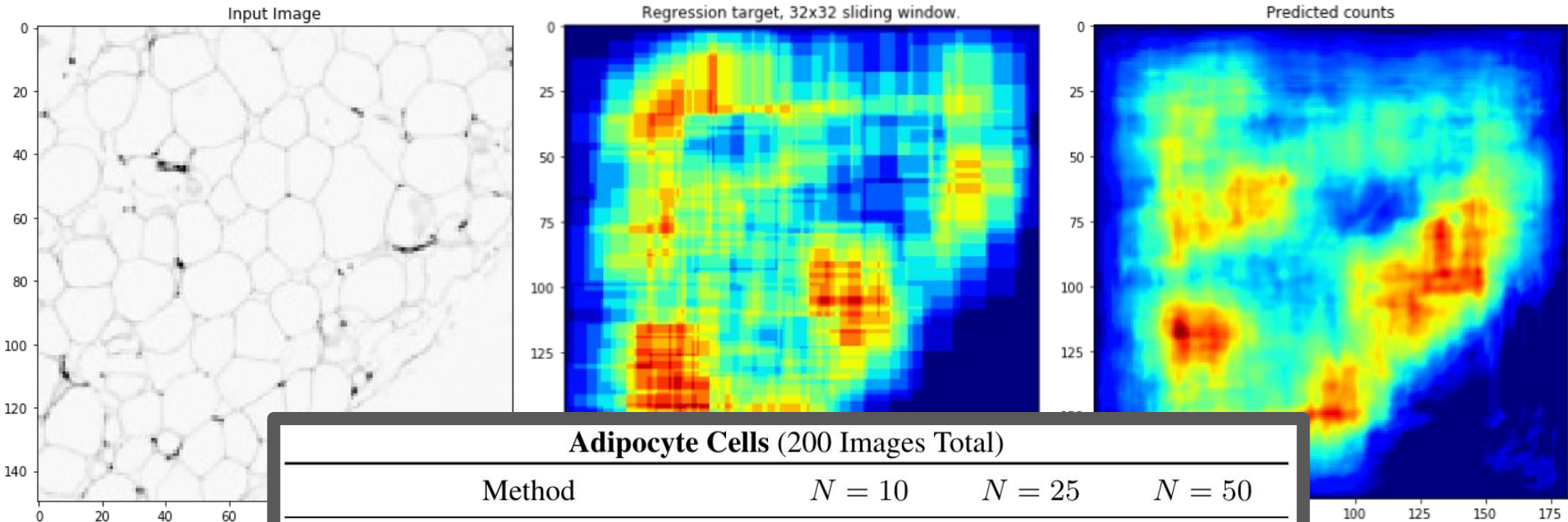




MBM Cells (44 Images Total)

Method	$N = 5$	$N = 10$	$N = 15$
Predict Average Count	29.4 ± 2.3	28.6 ± 1.6	28.2 ± 1.6
Cell Profiler -single		19.8 ± 4.2	
Cell Profiler -multiple**		12.8 ± 3.1	
FCRN-A, Xie (2016)	28.9 ± 22.6	22.2 ± 11.6	21.3 ± 9.4
Count-ception (Proposed)	12.6 ± 3.0	10.7 ± 2.5	8.8 ± 2.3

** Cell Profiler results were obtained using a single pipeline (single) and using three different pipelines (multiple) to account for color differences in two of the eleven images.



Adipocyte Cells (200 Images Total)

Method	$N = 10$	$N = 25$	$N = 50$
Predict Average Count	33.8 ± 3.1	33.6 ± 3.0	33.5 ± 2.9
Cell Profiler 150×150	— 40.0 ± 3.9 —		
Cell Profiler 299×299 [†]	— 25.06 ± 2.6 —		
Adiposoft (2012) 299×299 ^{†‡}	— 45.4 ± 25.47 —		
Adiposoft (2012) 1700×1700 ^{†‡}	— 14.8 ± 13.63 —		
Count-ception (Proposed) 150×150	25.1 ± 2.9	21.9 ± 2.8	19.4 ± 2.2

[†]This evaluation utilized larger resolution images than then Count-ception evaluation.

[‡]This analysis was computed on only 10 images because it must be manually processed.

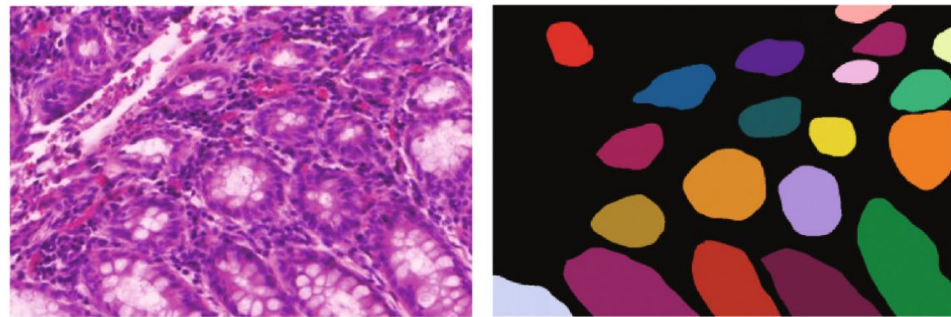
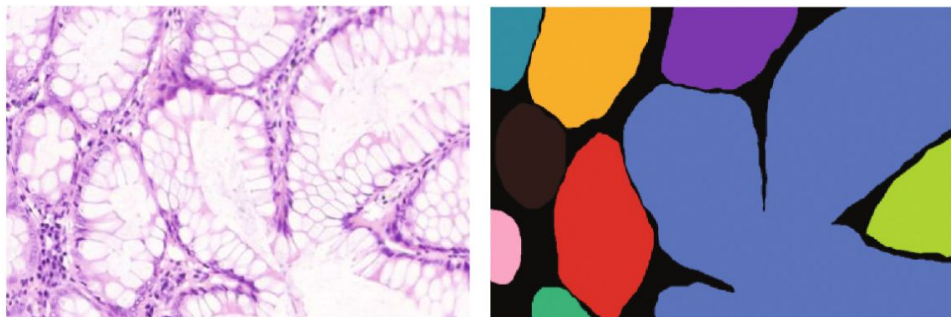


	prediction	target
adult_male		
subadult_male		
female		
juvenile		
pub		

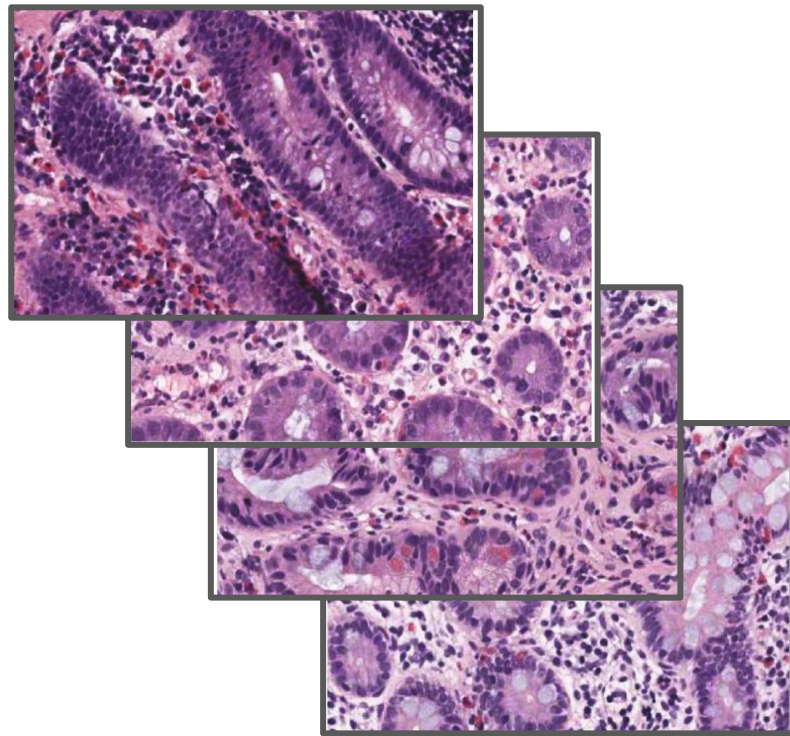
Kaggle sea lion challenge (37th/385 place)
Implemented by Robin Dinse (Universität Koblenz-Landau)



Semi-supervised Segmentation with GANs

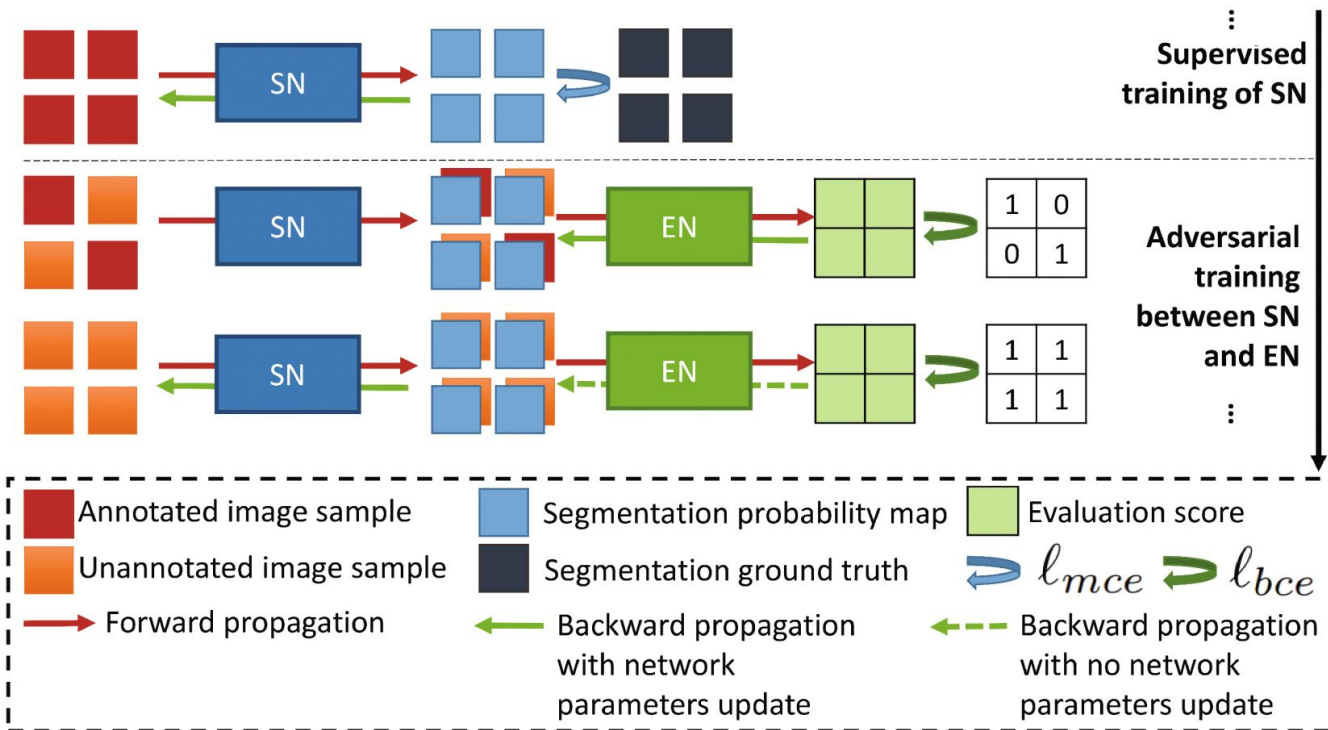


Images with segmentation labels



Images without segmentation labels

Semi-supervised Segmentation with GANs



Deep Adversarial Networks for Biomedical Image Segmentation Utilizing Unannotated Images

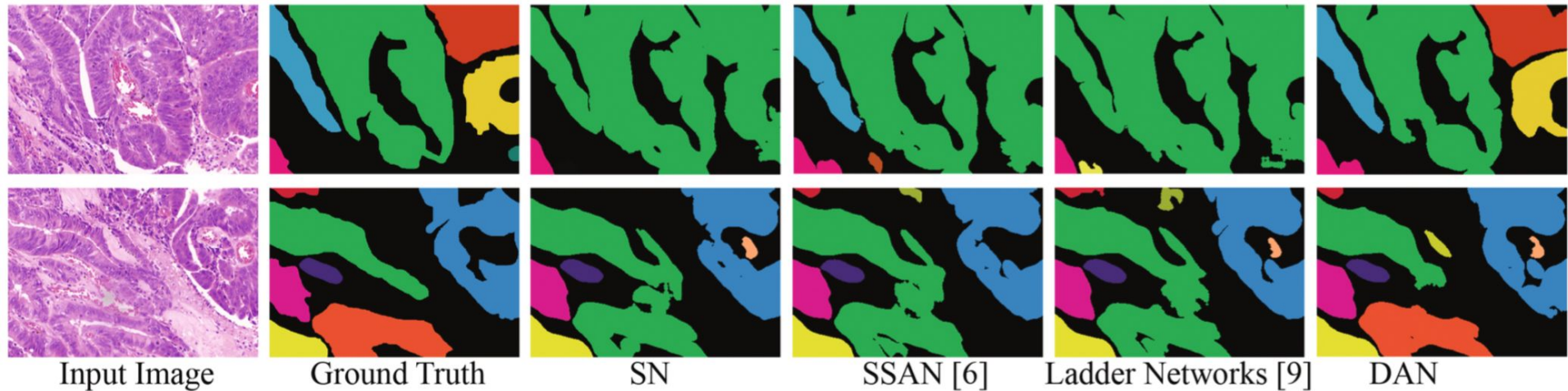
Yihe Zhang¹, Lin Yang¹, Jianxu Chen¹, Maridel Fredericksen², David P. Hughes², and Danny Z. Chen¹

¹ Department of Computer Science and Engineering, University of Notre Dame, Notre Dame, IN 46556, USA

² Department of Entomology and Department of Biology, Center for Infectious Disease Dynamics, Pennsylvania State University, University Park, PA 16802, USA

Abstract. Semantic segmentation is a fundamental problem in biomedical image analysis. In biomedical practice, it is often the case that only limited annotated data are available for model training. Unannotated

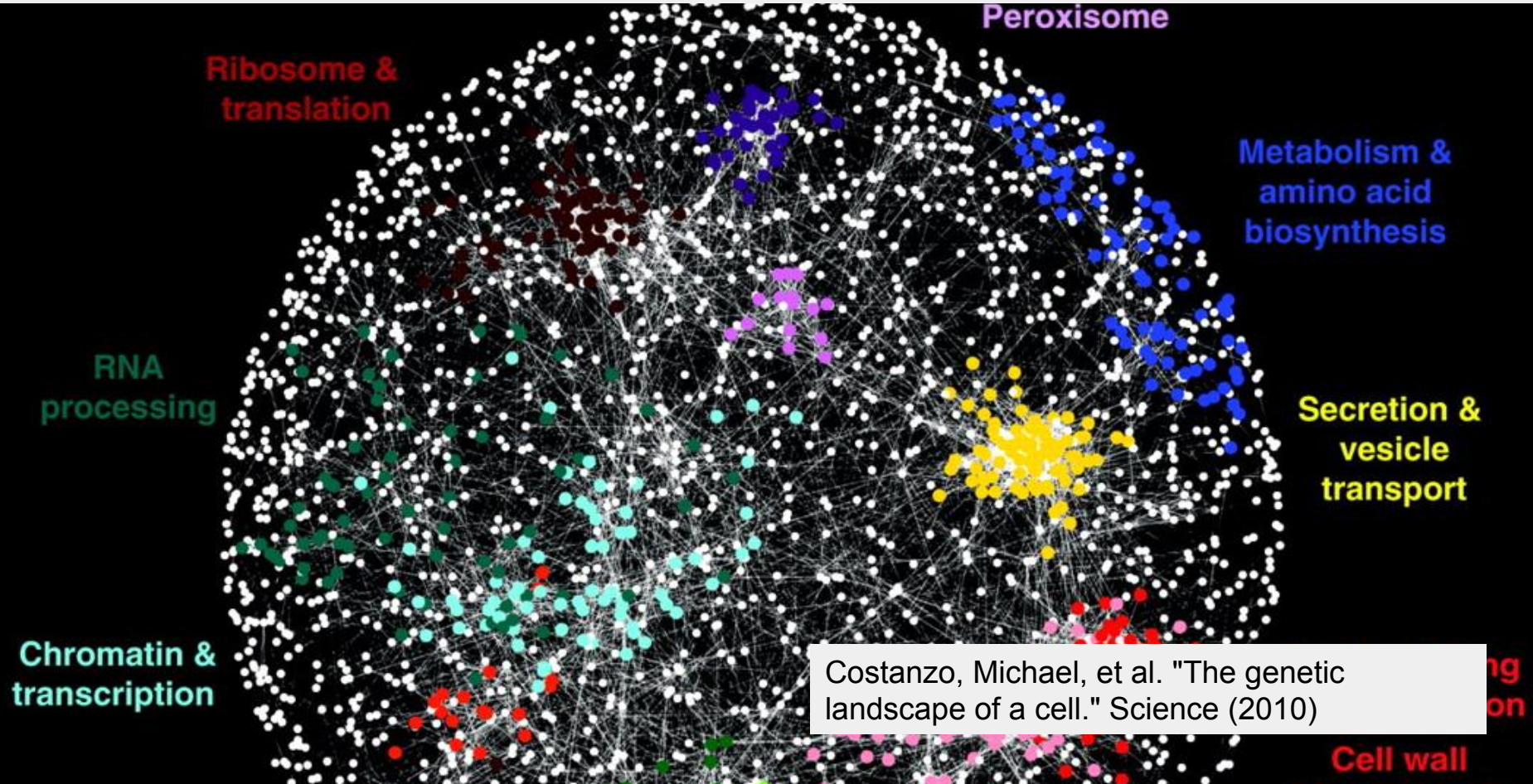
Zhang et al., "Deep Adversarial Networks for Biomedical Image Segmentation Utilizing Unannotated Images," 2017



Method	# images used		F_1 Socre		ObjectDice		ObjectHausdorff	
	Anno.	Unanno.	part A	part B	part A	part B	part A	part B
SN (base model)	85	0	0.9071	0.825	0.898	0.826	48.740	126.479
SSAN [6]	85	0	0.9060	0.836	0.886	0.818	53.393	128.385
Ladder networks [9]	85	100	0.9047	0.833	0.893	0.818	45.418	110.984
CUMedVision [2]	85	0	0.912	0.716	0.897	0.718	45.418	160.347
Multichannel1 [16]	85	0	0.858	0.771	0.888	0.815	54.202	129.930
Multichannel2 [15]	85	0	0.893	0.843	0.908	0.833	44.129	116.821
DAN	85	100	0.916	0.855	0.903	0.838	45.276	104.982

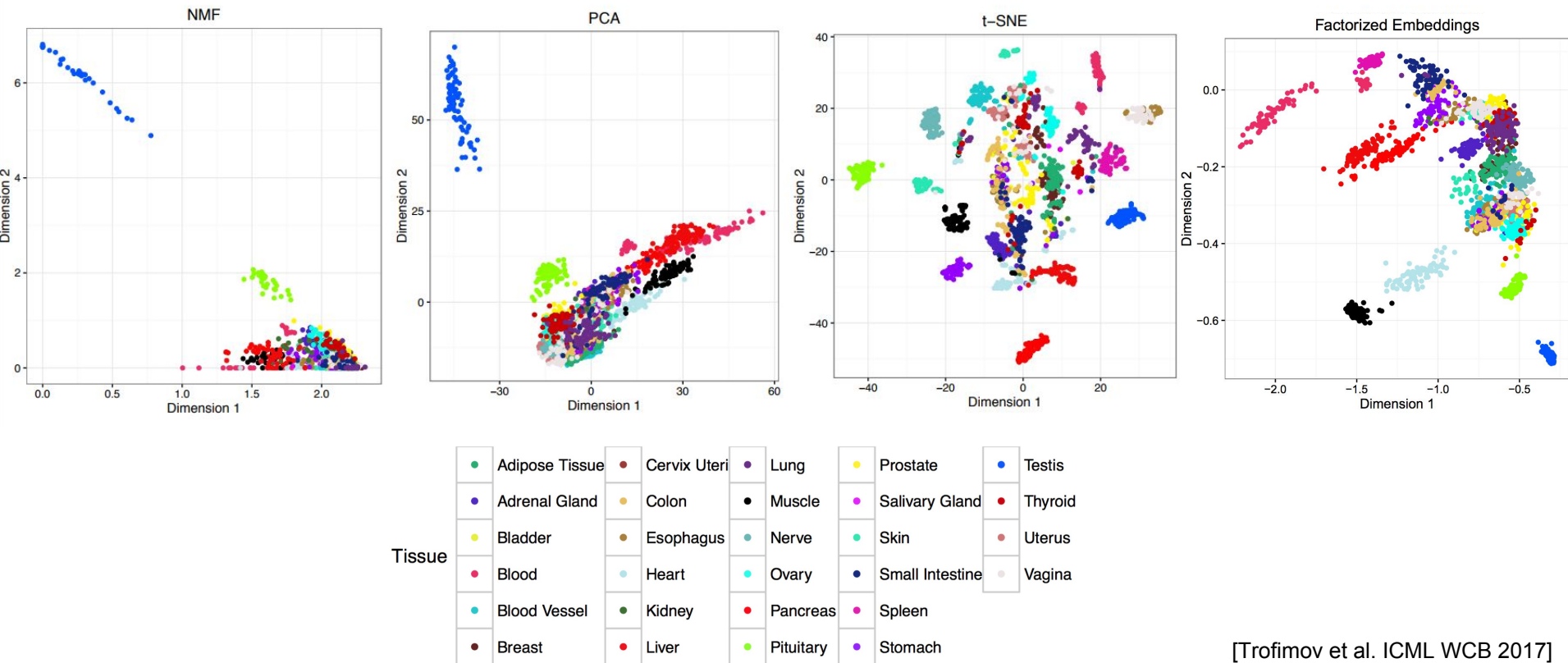


Genomics - Gene Understanding

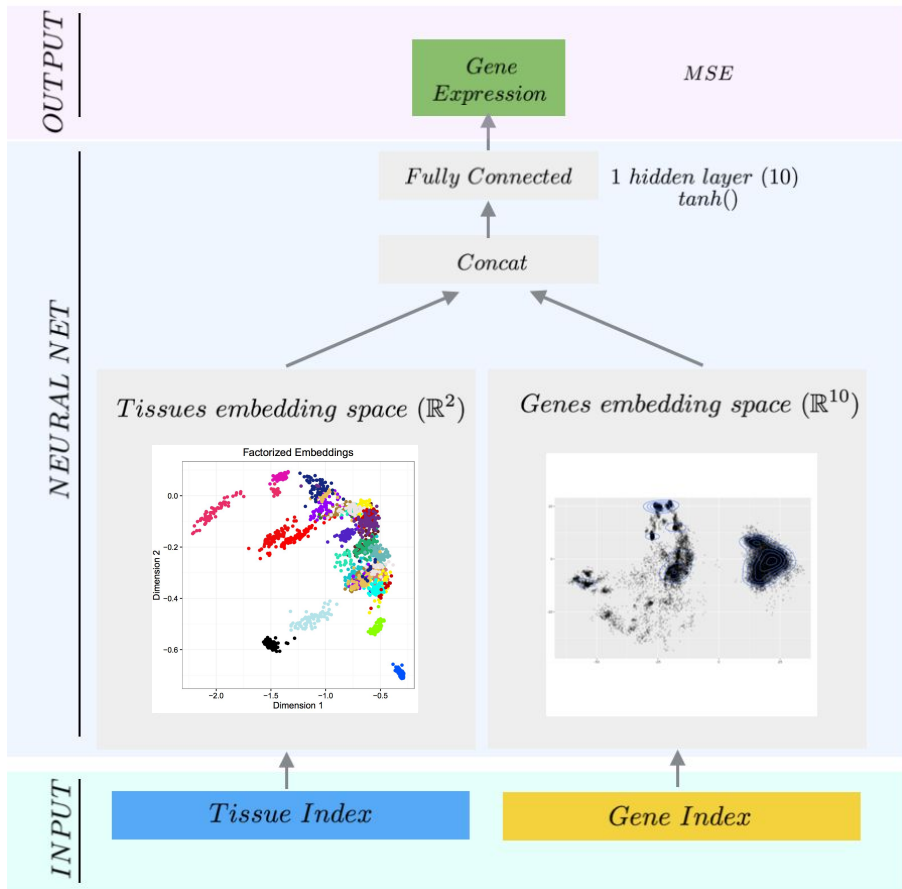


Gene understanding

How can we represent different tissue types?



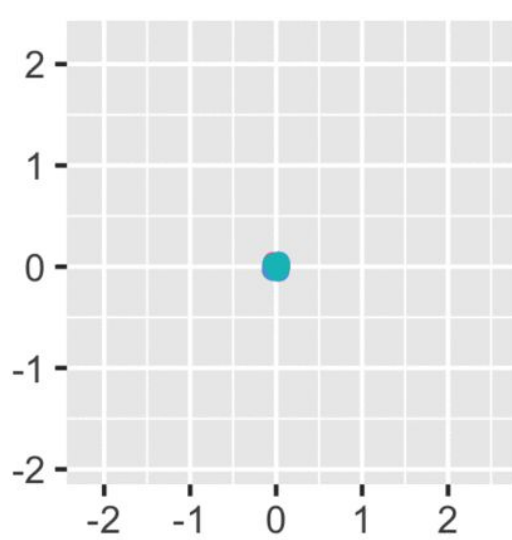
Factorized Embeddings



Gene expression is predicted given (Tissue, Gene) pair

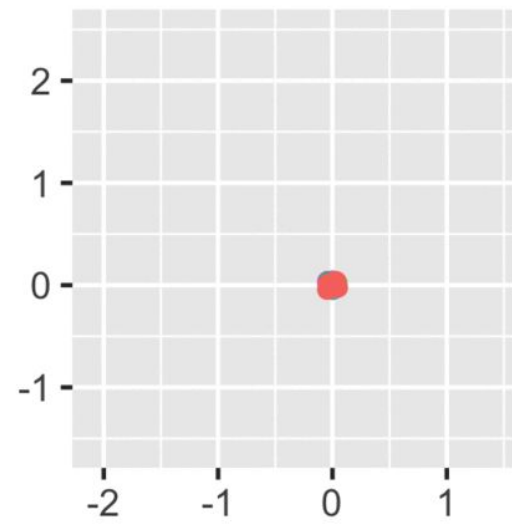
Genes condition Tissue Prediction
Tissues condition Gene Prediction

Embedding locations are updated based on function



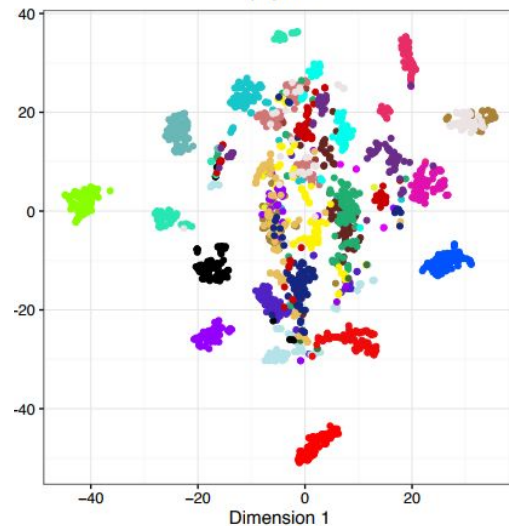
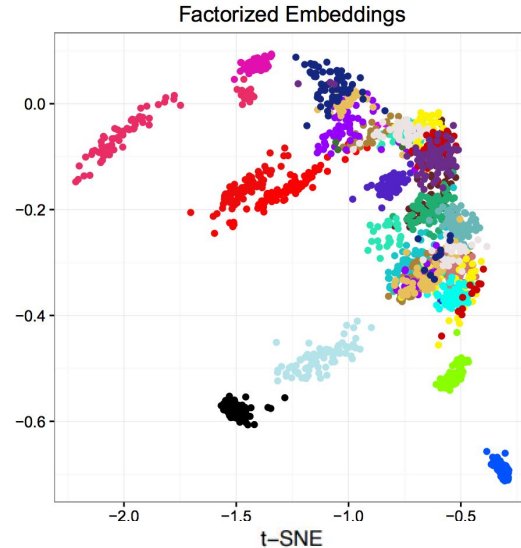
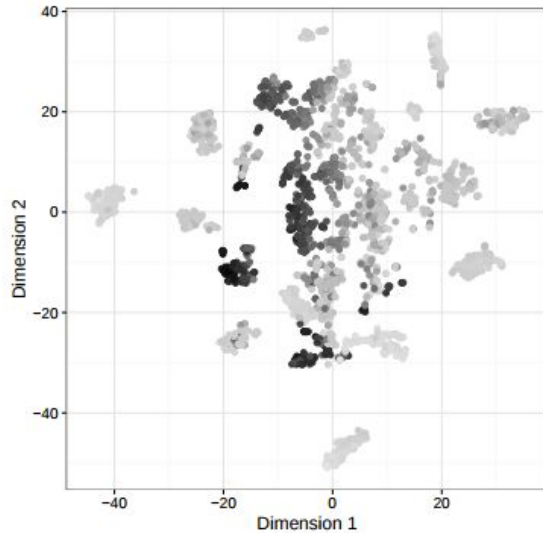
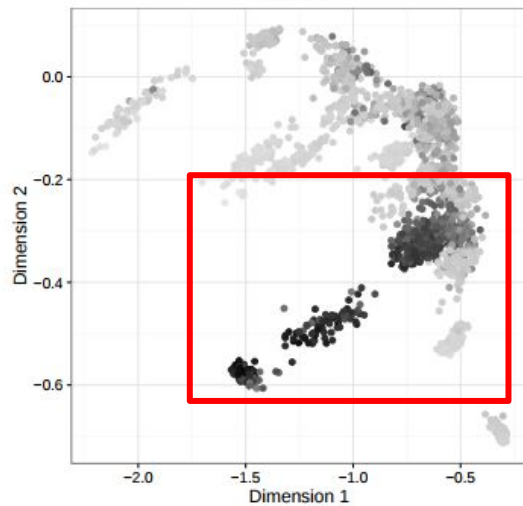
type

- Artery - Aorta
- Artery - Coronary
- Artery - Tibial
- Breast - Mammary Tissue
- Heart - Atrial Appendage
- Heart - Left Ventricle

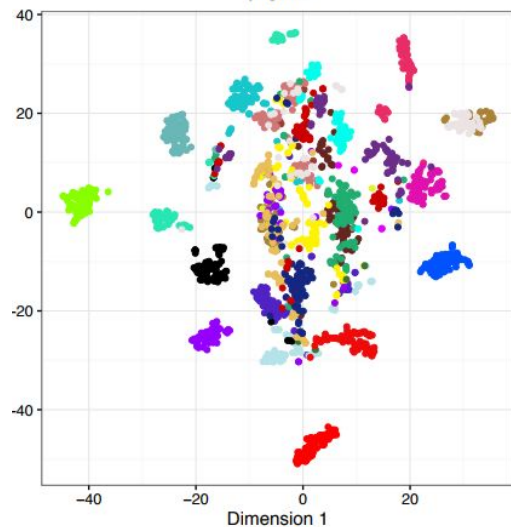
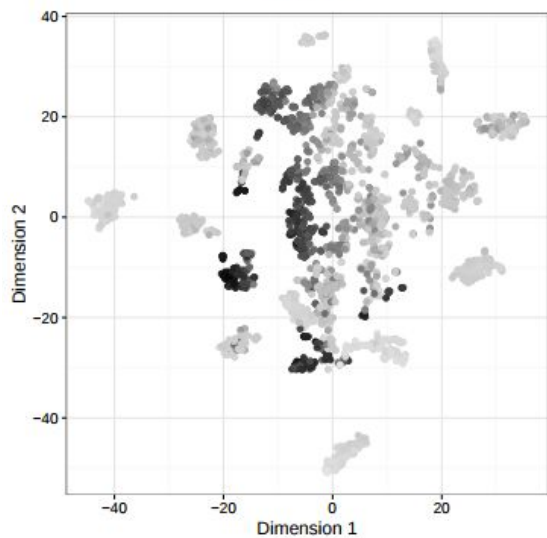
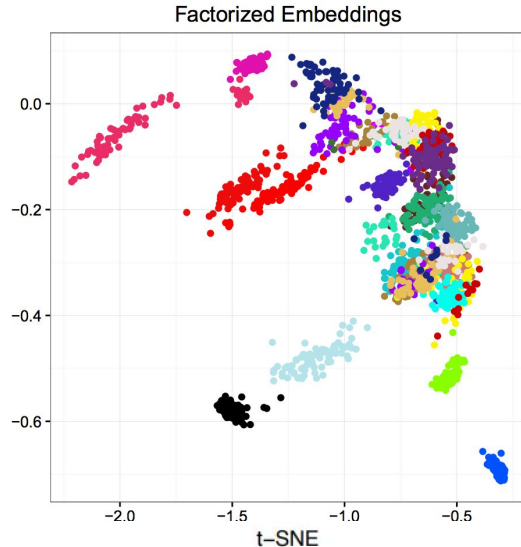
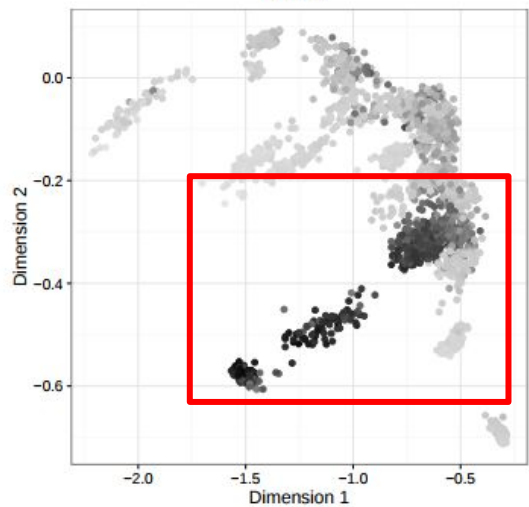


type

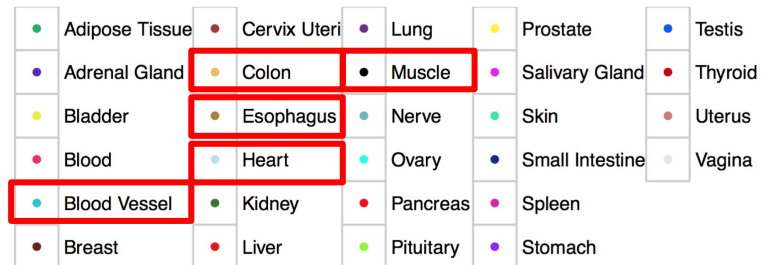
- Breast - Mammary Tissue
- Heart - Atrial Appendage
- Heart - Left Ventricle
- Uterus



We can visualize an
expression level for every
tissue embedding

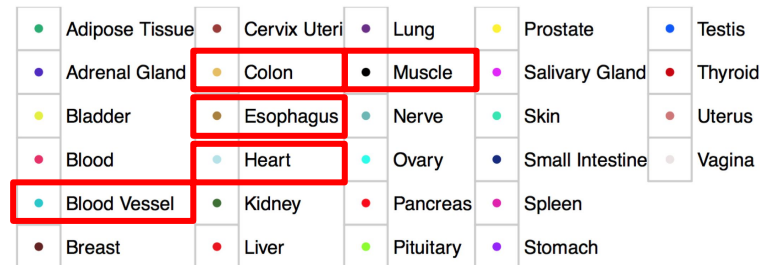
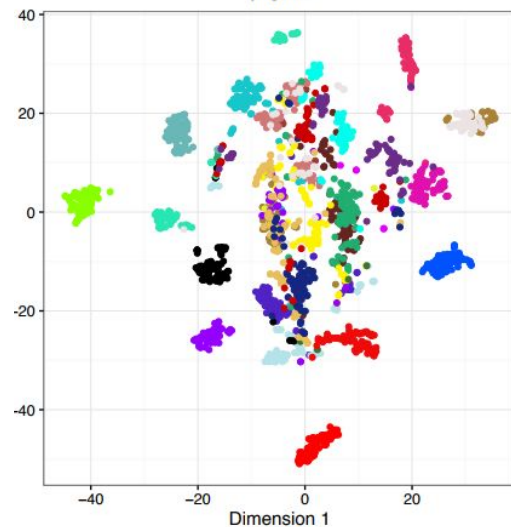
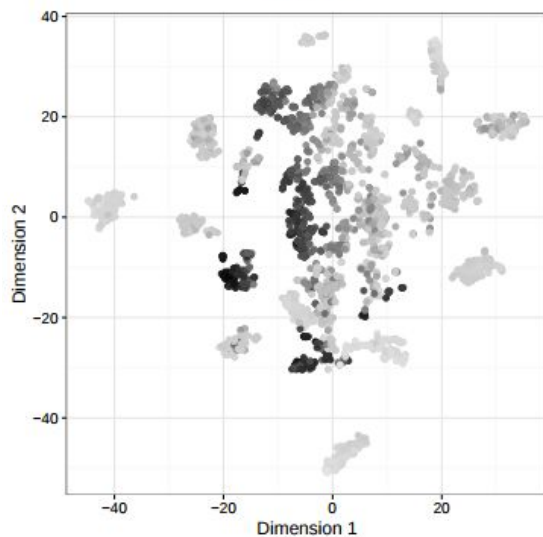
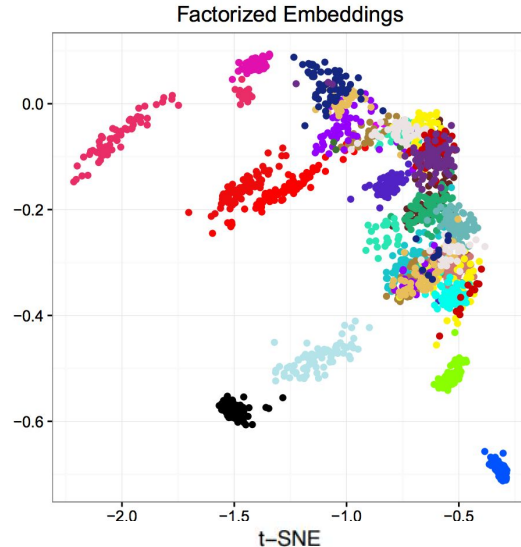
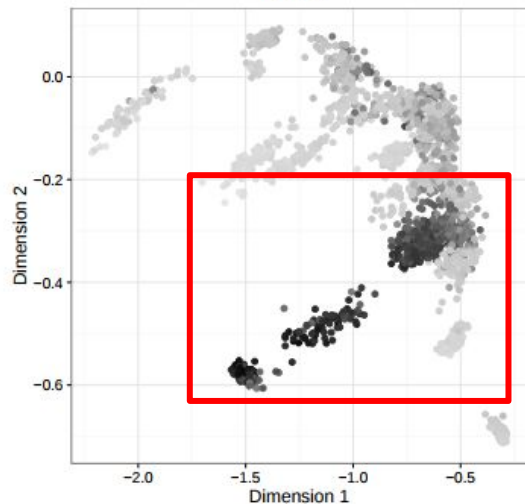


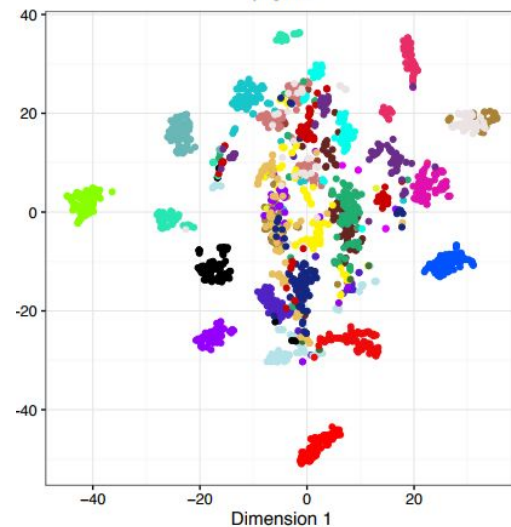
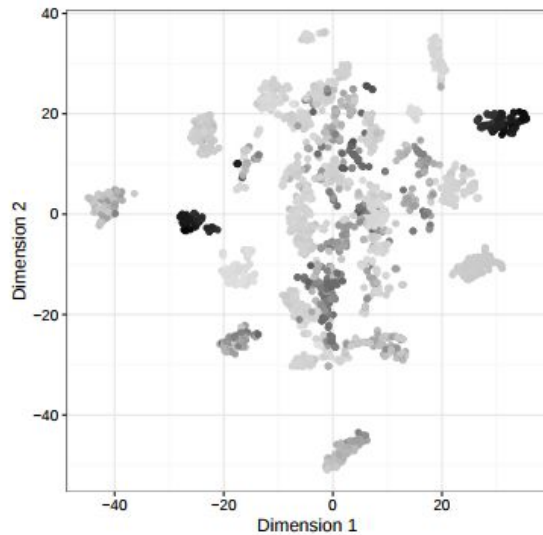
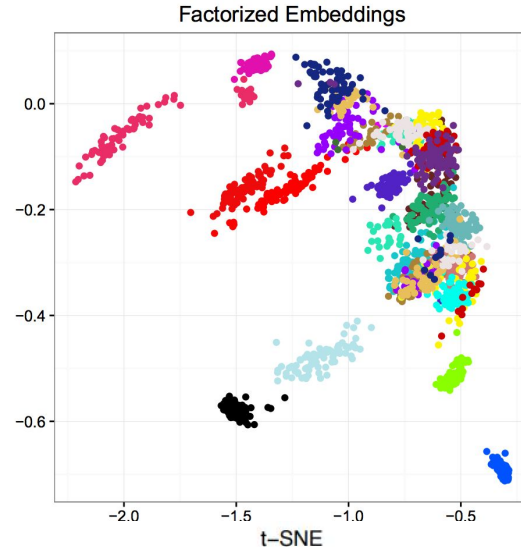
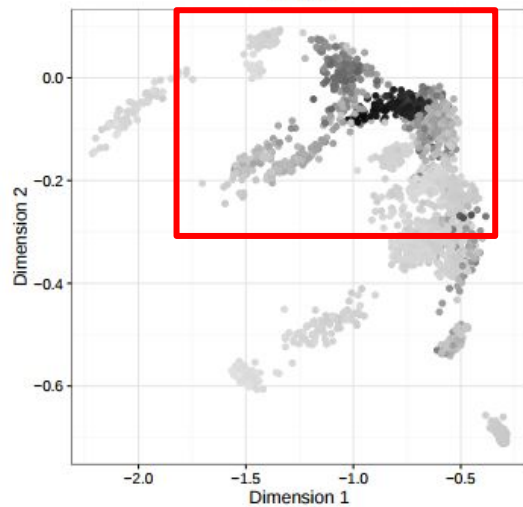
What is this gene involved in?



MYH6

"Muscle contraction"
[uniprot.org]



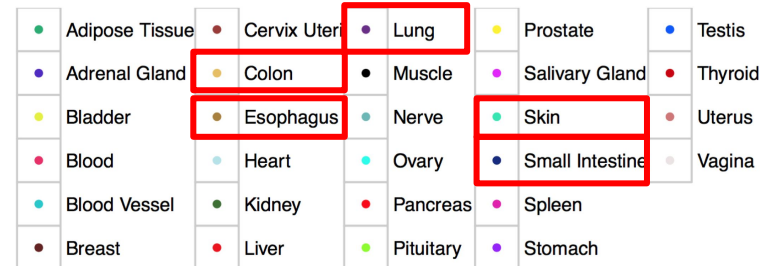
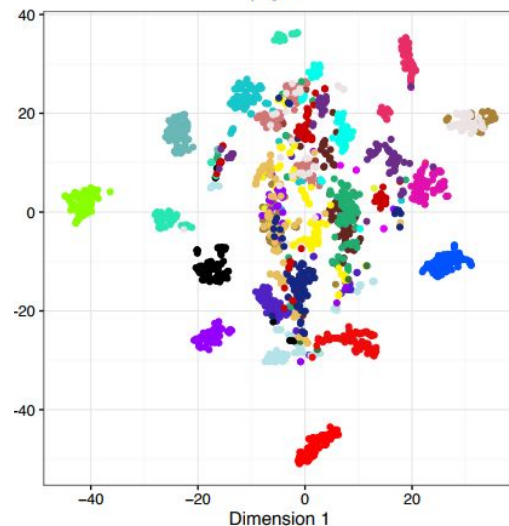
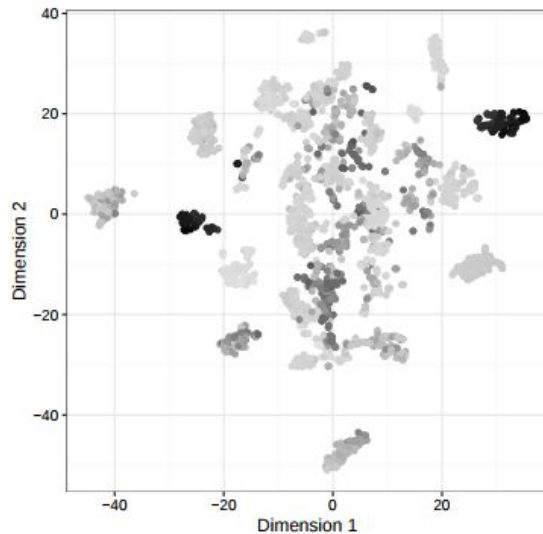
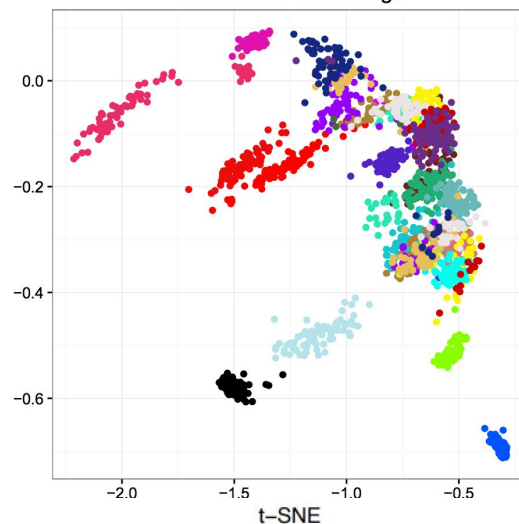
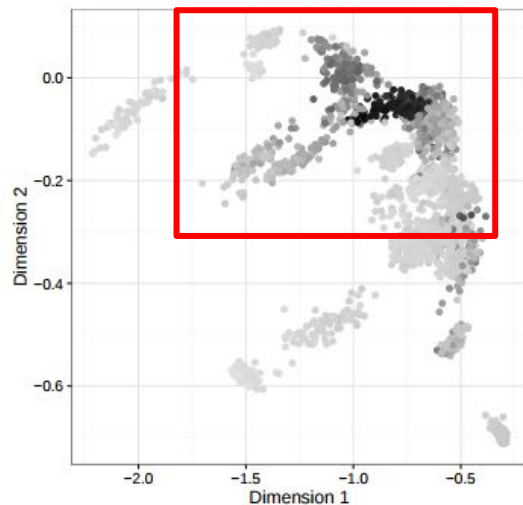


What is this gene involved in?

Adipose Tissue	Cervix Uteri	Lung	Prostate	Testis
Adrenal Gland	Colon	Muscle	Salivary Gland	Thyroid
Bladder	Esophagus	Nerve	Skin	Uterus
Blood	Heart	Ovary	Small Intestine	Vagina
Blood Vessel	Kidney	Pancreas	Spleen	
Breast	Liver	Pituitary	Stomach	

KRT (Keratin)

Keratin is the protein that protects epithelial cells from damage or stress



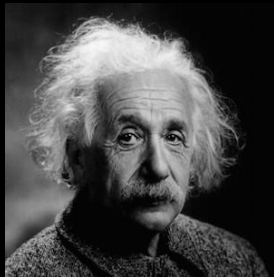
Thanks!



Conferences

arXiv

ShortScience.org



ShortScience.org