













next\_AIM workshop on XAI techniques for medical data analysis

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Study of the robustness of radiomic features and of its potential impact on Al-based CAD systems

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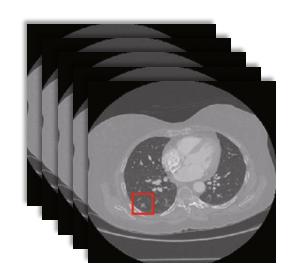


Lung cancer is the leading cause of cancer death worldwide and one of the most aggressive tumors.

Lung nodules are the early radiological signs.

**Chest CT** is the best imaging modality to detect them.





5-year survival of 10–15%



10-years survival of **75%** if diagnosed at first stage

The National Lung Screening Trial (NLST) usefulness of a screening program on the at-risk population using CT:



relative **reduction in mortality rate** in the LDCT group compared with the X-ray group by **20**%\*;



High radiation dose and high false positives rate.



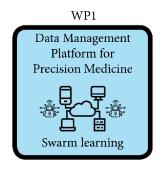


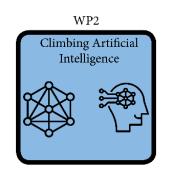


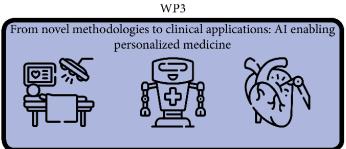


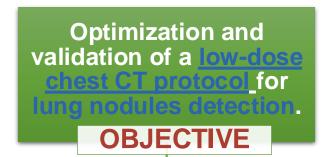


SPOKE 2
Intelligent Health
WP3 - TASK 3.3









Reducing the radiation dose without degrading the imaging properties.

Image analysis and classification systems based on and radiomics.

IR algorithms
to reduce the
dose while
preserving
image quality

Image denoising

CAD to retrieve low contrast details

Radiomics
and DL for
nodules
segmentation
and
classification.









The <u>CAD</u> must be robust so the significant features on which it is built must also be robust.



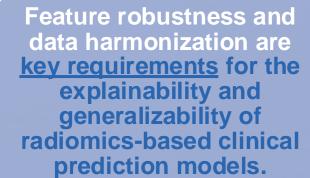
Multicentric datasets are fundamental for creating reliable models that can adapt to changes in the dataset.



Standardized procedures for data harmonization do not exist yet.



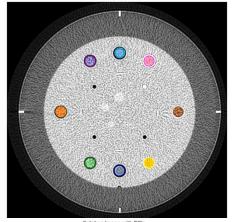
In this study repeatability and robustness of radiomics features extracted from CT images of phantoms are investigated using an a priori image harmonization strategy based on image quality matching to increase the robustness of radiomic features and perform multi-centric studies with <a href="low-dose acquisition">low-dose acquisition</a> protocols.

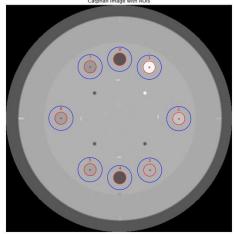






## **Image quality evaluation**





Detectability index with Non-prewhitening matched filter with eye filter (NPWE) model observer

$$d_{NPWE}^{\prime 2} = \frac{\left[\int\int |W(u,v)|^2 TTF^2(u,v) E^2(u,v) du dv\right]^2}{\int\int |W(u,v)|^2 TTF^2(u,v) NPS(u,v) E^4(u,v) du dv}$$
 
$$noise \ characteristics$$
 
$$E(\rho) = \left|\eta \rho^{1.5} \cdot e^{-0.98 \cdot \rho^{0.68}}\right|^2 \ \text{Eye filter*}$$

Evaluated with imQuest software (Duke University, Durham) and script written in house and currently under development.

\*Solomon, Justin, Joshua Wilson, and Ehsan Samei. "Characteristic image quality of a third generation dual-source MDCT scanner: noise, resolution, and detectability." Medical physics 42.8 (2015): 4941-4953.

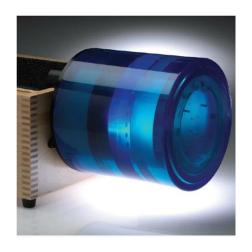


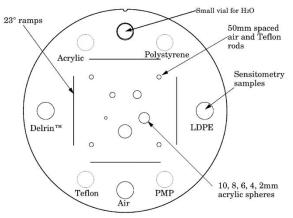






# Catphan phantom CT acquisitions





## 96 CT scans:

Institutional clinical CT protocols

2 CT systems

4 dose levels

4 reconstruction methods

**3** repetitions

	Revolution GE	Aquilon Toshiba
CTDI <sub>vol</sub> [mGy] (Tube current [mA])		
High	13.52 (160)	16.50 (300)
Standard	6.76 (80)	8.30 (150)
Reduced	4.06 (50)	5.00 (90)
Low	2.03 (25)	2.49 (45)
Data acquisition		
Tube potential (kVp)	120	120
Pitch	0.984	0.938
Image Reconstruction		
Display field of view (mm)	210	219
Pixel Spacing (mm)	0.406	0.427
Slice thickness (mm)	1.25	1.00
Kernel	LUNG	FC56
Reconstruction algorithm	FBP, ASIR	FBP, AIDR 3D
Iterative level	0%, 10%, 40%, 70%	0%, mild, standard, strong

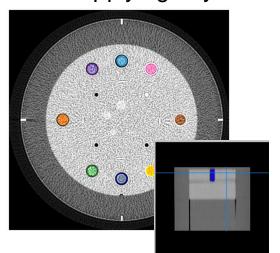






# Preparatory radiomics study with Catphan

- \* 86 radiomic features extracted with Pyradiomics from each ROI in each CT series:
  - → first-order statistics features;
  - > second-order statistics features.
- ♦ BW=25 HU.
- Features extracted from original images, without applying any filters.



#### **Intraclass Correlation Coefficient:**

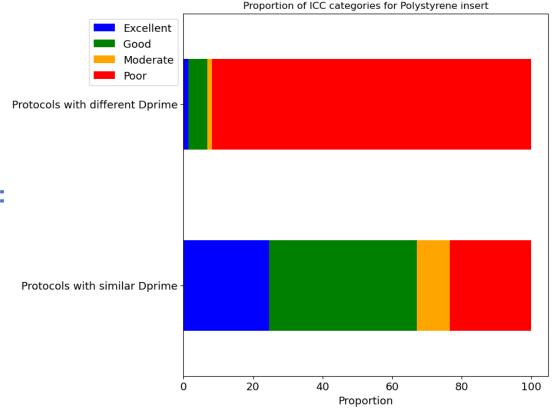
$$ICC = \frac{MS_R - MS_E}{MS_R + \frac{1}{n} \left( MS_C - MS_E \right)}$$

Excellent:  $ICC \ge 0.9$ 

Good:  $0.75 \le ICC < 0.9$ 

Moderate:  $0.5 \le ICC < 0.75$ 

Poor: ICC < 0.5









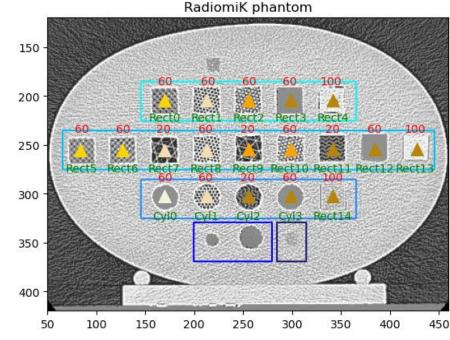


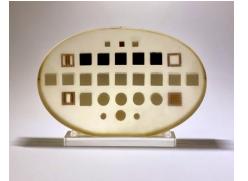
# Preliminary radiomics study with RadiomiK phantom

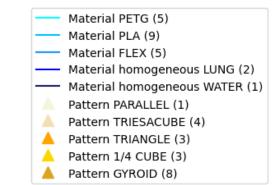
Custom phantom designed to test repeatability and reproducibility of CT radiomic features.

- 25 inserts (~15mm) with different materials, textures, shapes and sizes:
  - 6 inserts with homogeneous materials;
  - 19 inserts with different textures:
    - 3 materials, 3 filling percentages, 2 shapes and 5 textures.

\*Pallotta et al. PO-1536: RadiomiK: a phantom to test repeatability and reproducibility of CT-derived Radiomic Features.















## **Acquisition Protocols and features extraction**

- Two CT scanners: Revolution Evo 64 Slice (GE Healthcare) and Aquilon CX 128 Slice CT (Toshiba).
- 10 acquisition protocols and 3 repetitions for a total of 30 CT scans.
- 3 dose levels and 4 Iterative reconstruction blending levels (ASIR and AIDR3D).
- Sharp reconstruction kernel.





## Features extraction with Pyradiomics:

- Bin Width: 25 HU and 50HU.
- 86 features: first and second order.
- Original images.

RadiomiK Protocol	Scanner	$CTDI_{vol} [mGy]$	Iterative level
1	GE	7	FBP
2	GE	7	ASIR $10\%$
3	GE	7	ASIR $70\%$
4	Toshiba	2	AIDR3D MILD
5	Toshiba	2	AIDR3D STD
6	Toshiba	2	AIDR3D STRONG
7	Toshiba	4	FBP
8	Toshiba	4	AIDR3D MILD
9	Toshiba	4	AIDR3D STD
10	Toshiba	4	AIDR3D STRONG

Table 3.4: Set of acquisition/reconstruction parameters corresponding to the protocols used to obtain the Radiomik CT images.









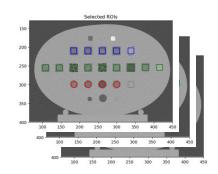
# Repeatability

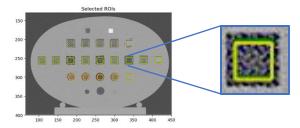
Closeness of agreement between measured features values obtained by means of replicate measurements.

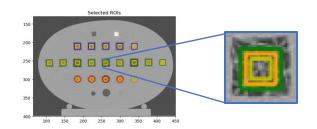
## Coeff. of Variation

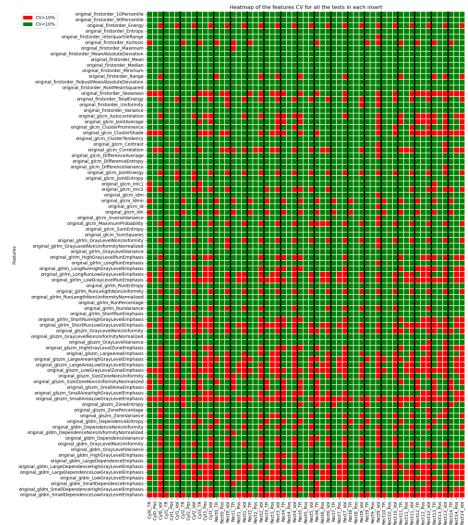
$$CV = \frac{\sigma}{\mu}$$

- Test-Retest: 3 repetitions
- ROI (Region of Interest)
  - **Positioning:** 10 ROI positions
- ROI volume: 3 ROI volumes

















## Robustness

Invariance of feature values in the acquisition of the same subject across different settings.

Non-repeatable features discarded from the robustness analysis

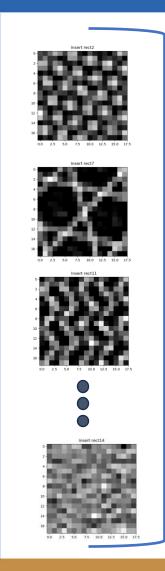
### Intraclass correlation coeff.

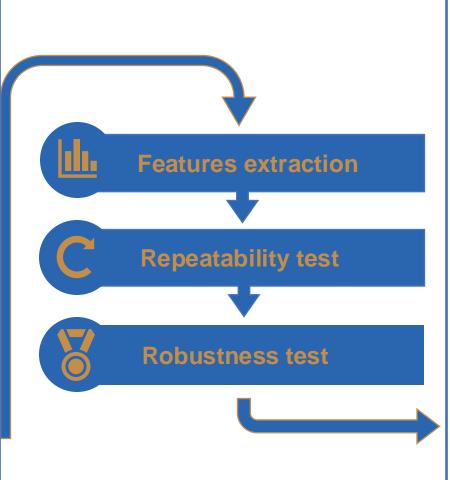
$$ICC = \frac{MS_R - MS_E}{MS_R + \frac{1}{n}(MS_c - MS_E)}$$

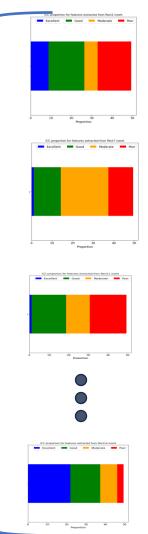
Excellent: ICC  $\geq$  0.9

Good:  $0.75 \le ICC < 0.9$ Moderate:  $0.5 \le ICC < 0.75$ 

Poor: ICC < 0.5







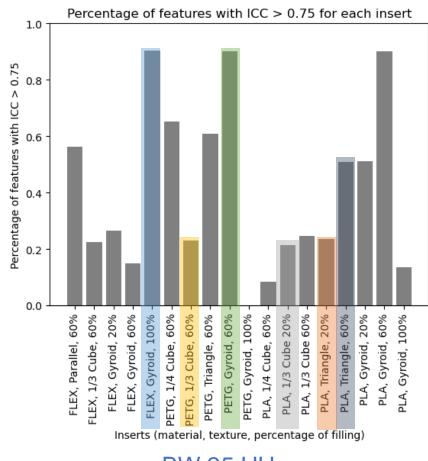




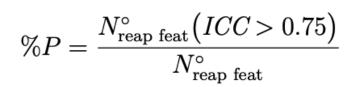


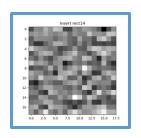


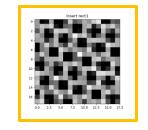
# Results

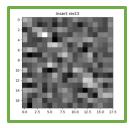


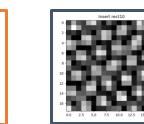
**BW 25 HU** 

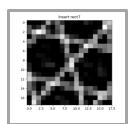


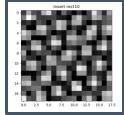


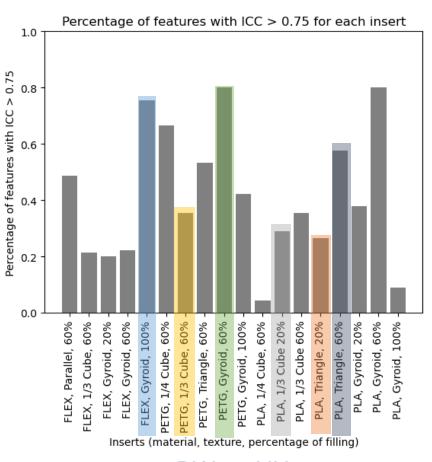












**BW 50 HU** 









# **Conclusions and Future developments**



#### Radiation dose reduction:

- high IR algorithms blending level to design ultra-low dose acquisition protocols;
- image denoising using Al.



#### Ai models to support radiologist:

- multi-centric studies with harmonization strategy based on image quality matching and standardized process for image acquisition and features extraction;
- XAI on segmentation of Lung nodules using Grad-CAM.



Expand this study to more clinical facilities using a data sharing platform\*.

\*Scapicchio, Camilla, et al. "Integration and Optimization of XNAT-Based Platforms for the Management of Heterogeneous and Multicenter Data in Biomedical Research."



Further investigate how radiomics could be integrated with **Al-based CAD systems** (hybrid models).

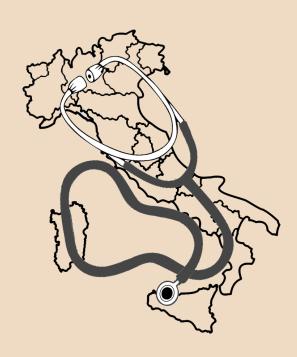








Thank you for the attention













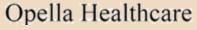


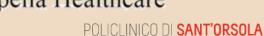






























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# Radiomics in CT imaging



Predictive models combining AI with radiomic features.

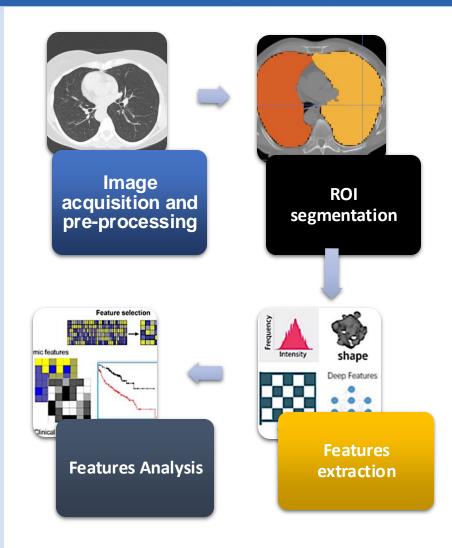


**Instability** of the features with respect to the **acquisition** parameters.



Evaluation of repeatability and robustness acquiring CT scans of a commercial phantom and a custom phantom using different acquisition protocols with an a-priori harmonization strategy based on image quality matching\*.

\*Scapicchio, Camilla, et al. "Investigation of a potential upstream harmonization based on image appearance matching to improve radiomics features robustness: a phantom study." Biomedical Physics & Engineering Express 10.4 (2024): 045006.

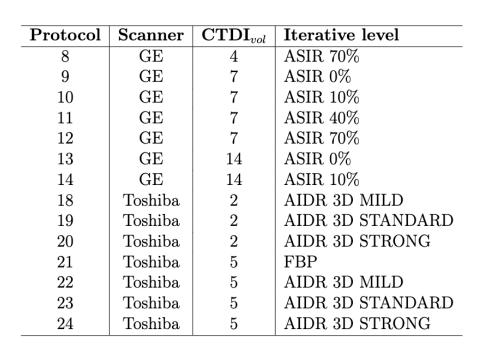


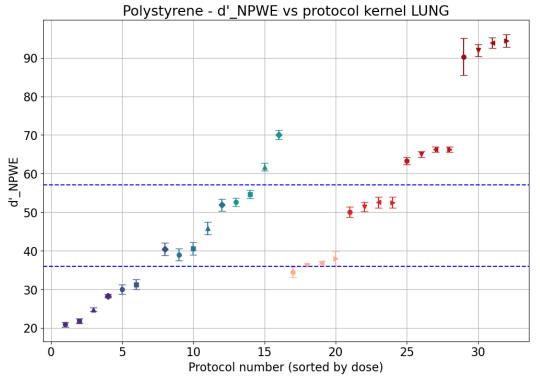












GE protocols

- Identification of the 14 equivalent protocols providing similar image quality.
- Potential harmonization strategy based on image quality matching to improve radiomics features robustness.

- IR Level & CTDIvol
- IR Level: FBP CTDIvol: 2
- IR Level: ASIR10 CTDIvol: 2
- IR Level: ASIR40 CTDIvol: 2
- IR Level: ASIR70 CTDIvol: 2
- IR Level: FBP CTDIvol: 4
- IR Level: ASIR10 CTDIvol: 4 IR Level: ASIR40 - CTDIvol: 4
- IR Level: ASIR70 CTDIvol: 4
- IR Level: FBP CTDIvol: 7
- IR Level: ASIR10 CTDIvol: 7
- ▲ IR Level: ASIR40 CTDIvol: 7
- ◆ IR Level: ASIR70 CTDIvol: 7
- IR Level: FBP CTDIvol: 14
- IR Level: ASIR10 CTDIvol: 14
- ▲ IR Level: ASIR40 CTDIvol: 14
- IR Level: ASIR70 CTDIvol: 14
- ▼ IR Level: MILD CTDIvol: 2
- ID Level: STD CTDIvel:
- IR Level: STD CTDIvol: 2
- IR Level: STRONG CTDIvol: 2
- IR Level: FBP CTDIvol: 5
- ▼ IR Level: MILD CTDIvol: 5
- IR Level: STD CTDIvol: 5
- ▶ IR Level: STRONG CTDIvol: 5
- IR Level: STRONG CTDIVOI:
- IR Level: FBP CTDIvol: 8

Toshiba protocols

- ▼ IR Level: MILD CTDIvol: 8
- IR Level: STD CTDIvol: 8
- IR Level: STRONG CTDIvol: 8
  - IR Level: FBP CTDIvol: 16
- ▼ IR Level: MILD CTDIvol: 16
- IR Level: STD CTDIvol: 16
- IR Level: STRONG CTDIvol: 16