

Learning the latent spaces dedicated to the segmentation of medical imaging

Application to cardiac imaging

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What is the interest of generative models ?

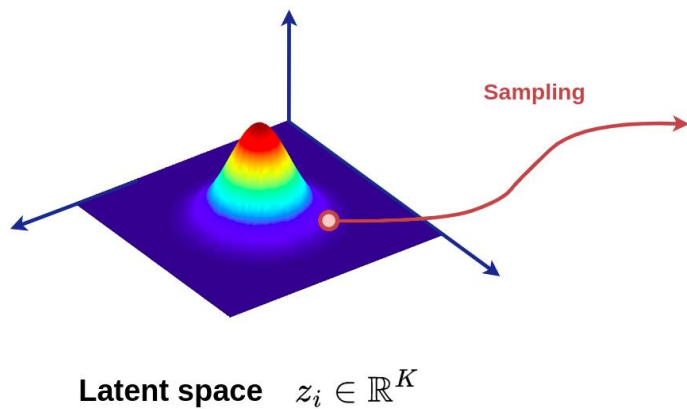
► How to generate synthetic faces ?



By modeling the corresponding
distribution $p_{\theta}(\cdot)$!

What are the interest of generative models ?

► How to model complex distributions ?

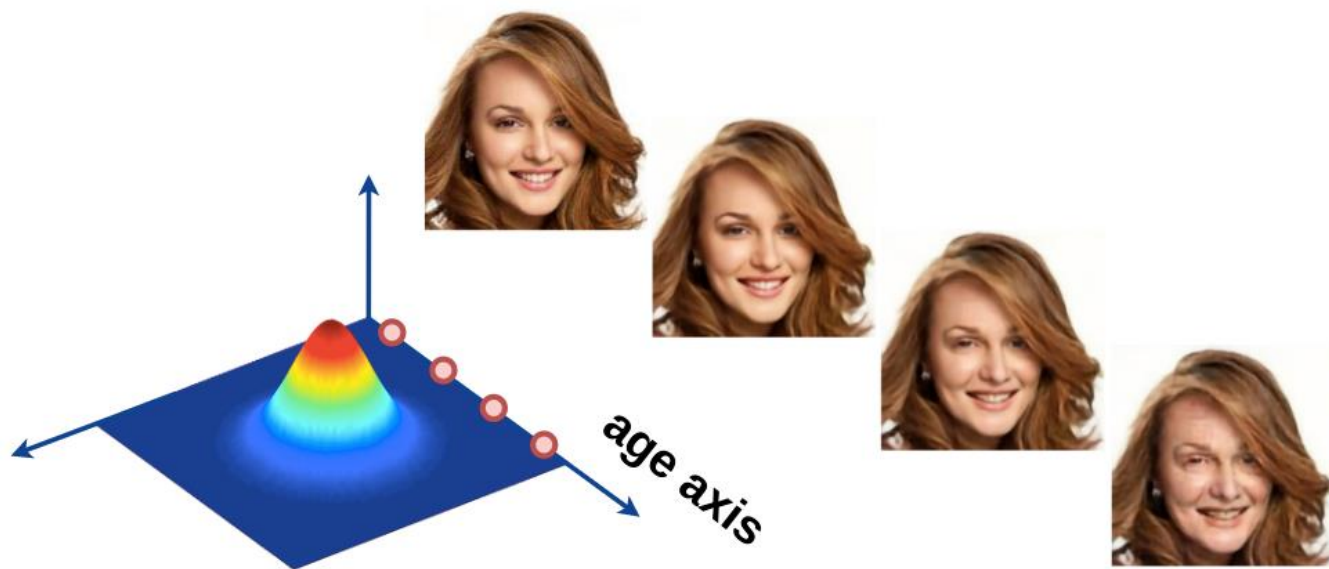


Face distribution

What are the interest of generative models ?

► What for ?

One obsession is to master the latent space !!!

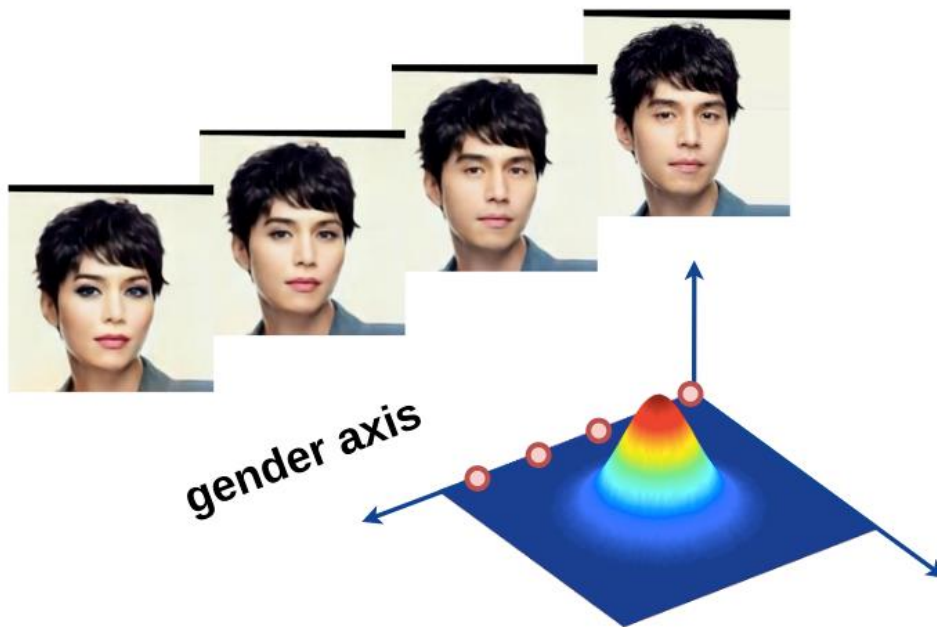


Latent space $z_i \in \mathbb{R}^K$

What are the interest of generative models ?

► What for ?

One obsession is to master the latent space !!!



Latent space $z_i \in \mathbb{R}^K$

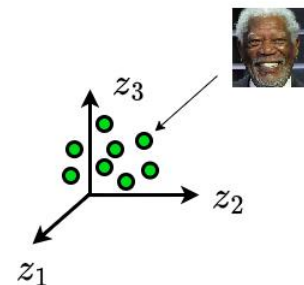
Auto-encoders

How to learn a distribution ?

► Projection into a simpler, lower-dimensional representation space



Projection

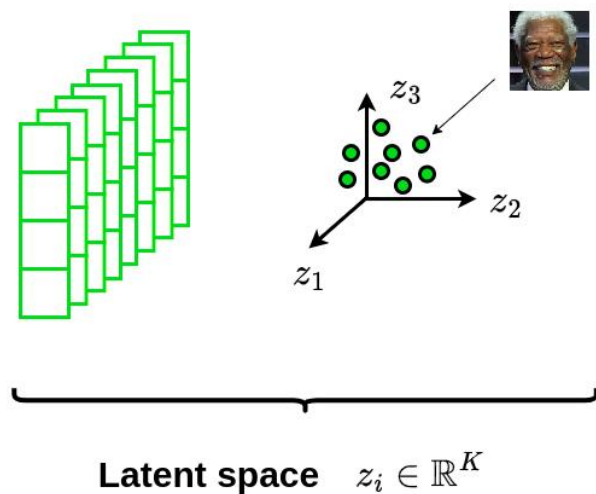


Latent space $z_i \in \mathbb{R}^K$

Input space $x_i \in \mathbb{R}^{N \times M}$

How to learn a complex distribution ?

► How to have a relevant representation space ?



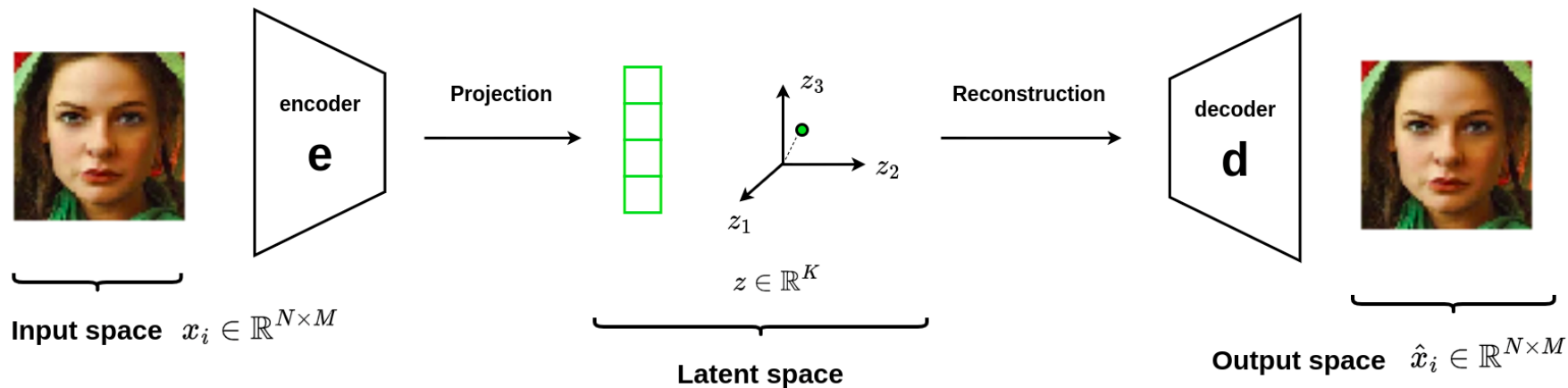
Reconstruction



Output space $\hat{x}_i \in \mathbb{R}^{N \times M}$

Auto-encoder framework

► Standard architecture

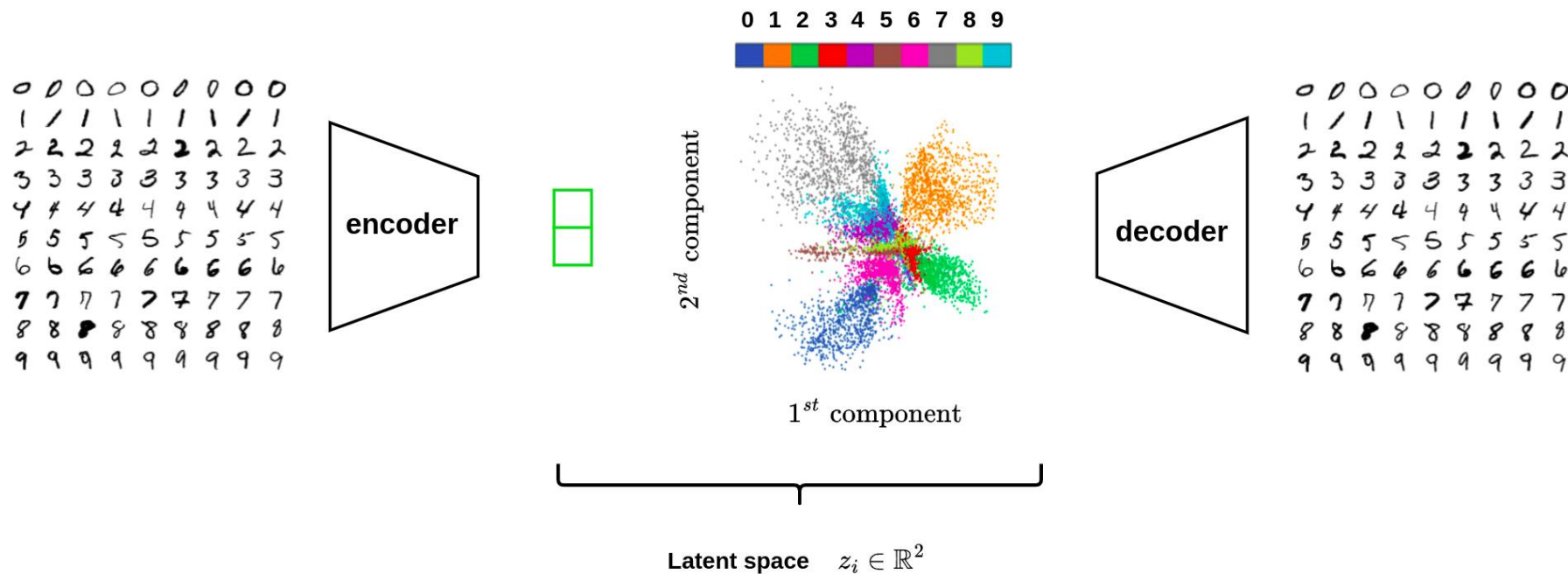


► Deep learning loss function

$$\text{loss} = \|x - \hat{x}\|^2$$

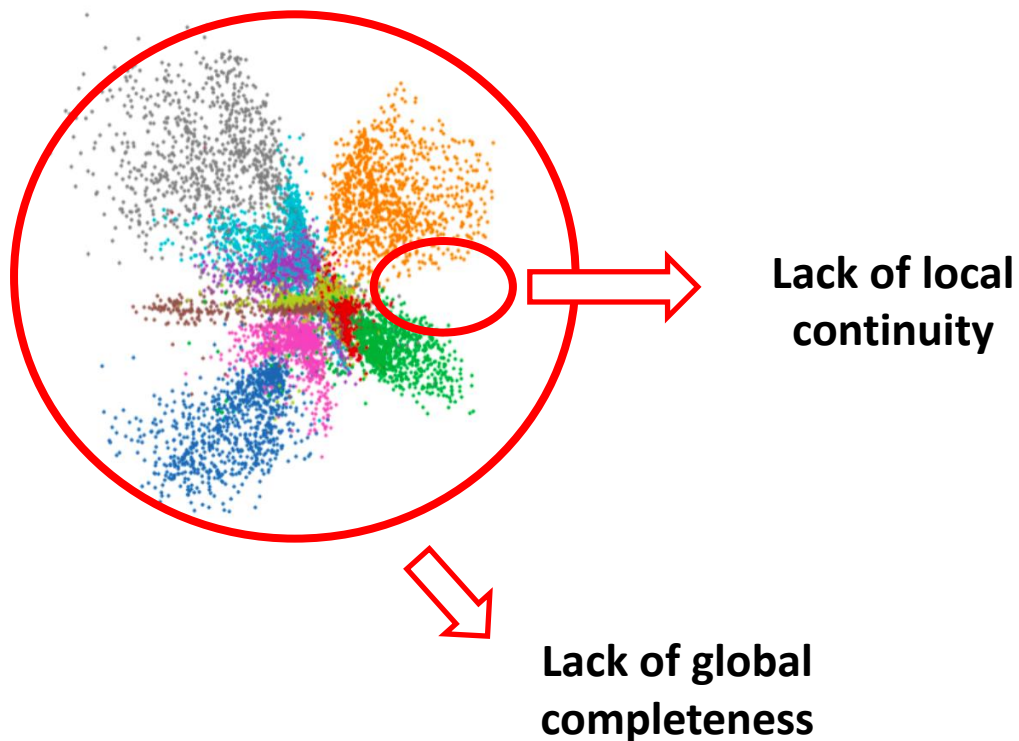
Interest of auto-encoders

► Generative model



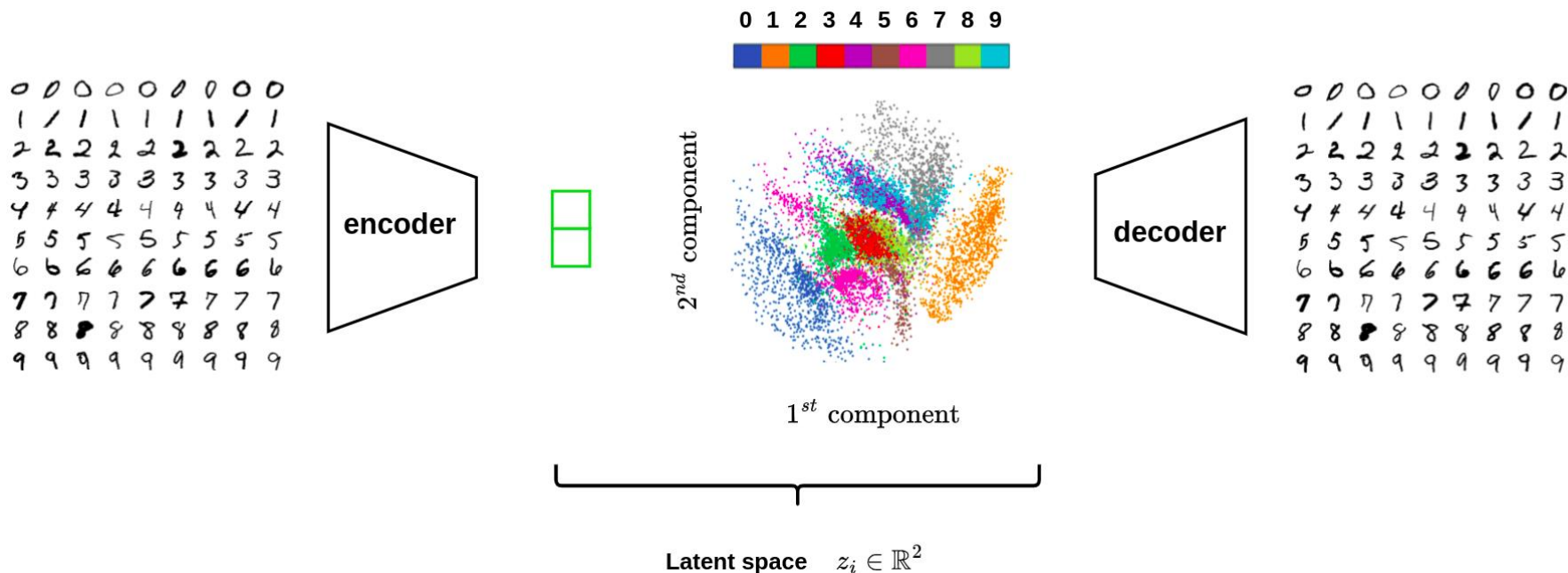
Limitations

- Needs to better control the structure of the latent space

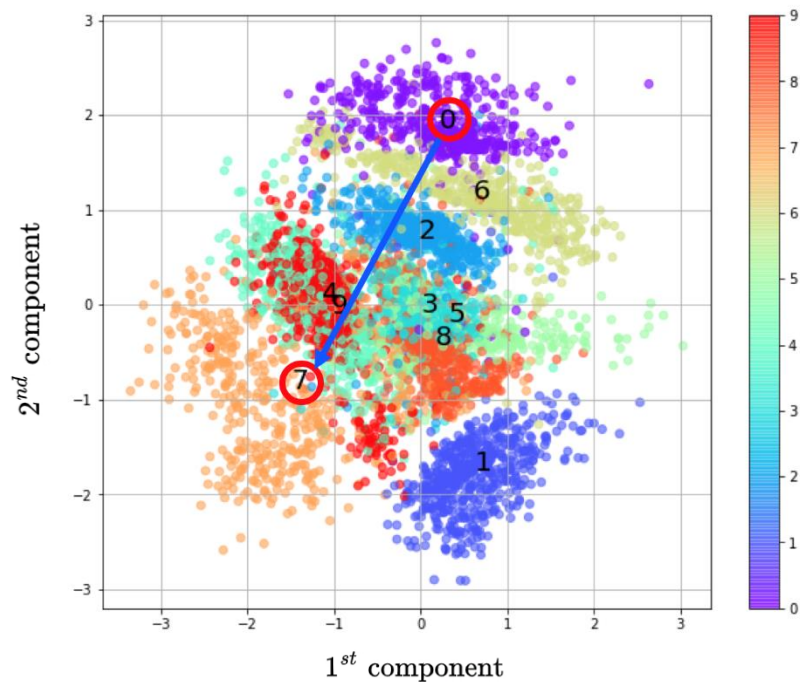


Interest of auto-encoders

- Generative model with better properties thanks to *variational framework*

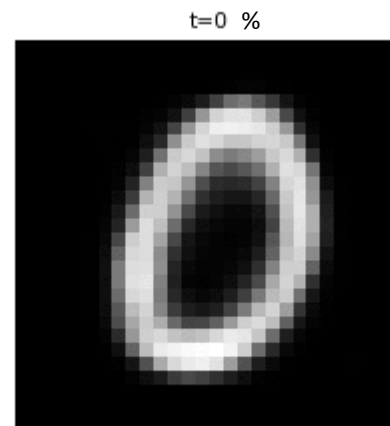


► Generative model with variational framework



Linear interpolation into the latent space

$$t \cdot z_0 + (1 - t) \cdot z_7, \quad 0 \leq t \leq 1$$



Variational autoencoders

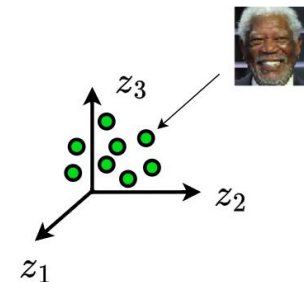
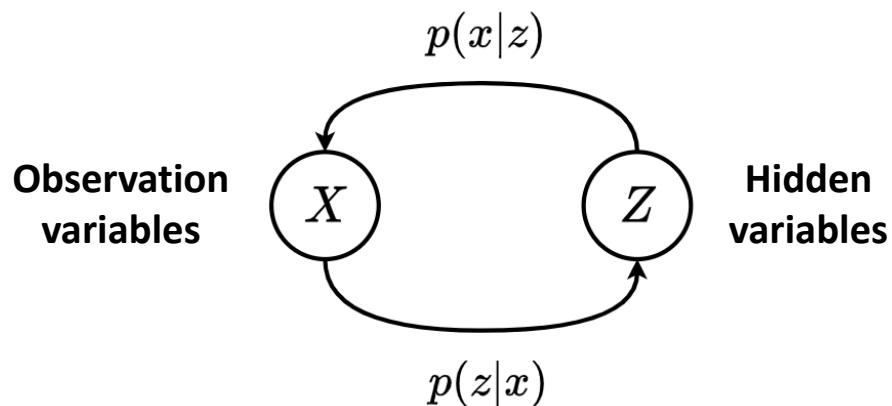
All the mathematical details are given there !

<https://creatis-myriad.github.io/tutorials/2022-09-12-tutorial-vae.html>

Key concepts

- ▶ **Enforcing a structured latent space**
 - ➔ **Through a probabilistic framework**
 - ➔ **By imposing continuity**
 - ➔ **By imposing completeness**

► Mathematical formulation



Approximation of $p(z|x)$ through a variational inference technique

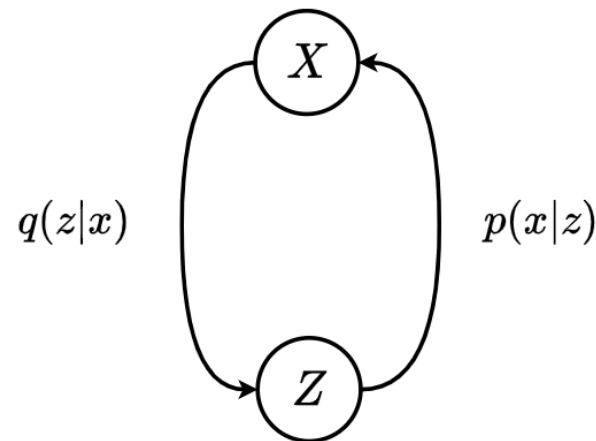
► Hypotheses

→ $q(z|x)$ is modeled by an axis-aligned Gaussian distribution

→ $q(z|x) = \mathcal{N}(\mu_x, \sigma_x) = \mathcal{N}(g(x), \text{diag}(h(x)))$

$$(g^*, h^*) = \arg \min_{(g, h)} D_{KL}(q(z|x) \parallel p(z|x))$$

$D_{KL}(\cdot \parallel \cdot)$ Kullback-Liebler divergence function



► Optimization process

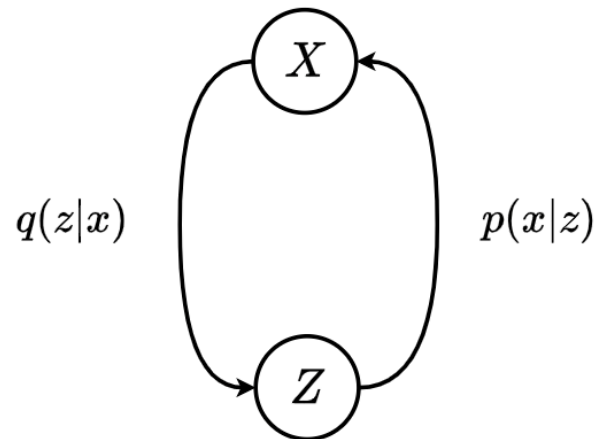
→ Maximization of the Evidence Lower Bound (ELBO)

$$\mathcal{L} = \mathbb{E}_{z \sim q_x} [\log(p(x|z))] - D_{KL}(q(z|x) \parallel p(z))$$

→ By exploiting gaussian assumption

$$p(x|z) = \mathcal{N}(f(z), cI)$$

$$\mathcal{L} \propto \mathbb{E}_{z \sim q_x} [-\alpha \|x - f(z)\|^2] - D_{KL}(q(z|x) \parallel p(z))$$



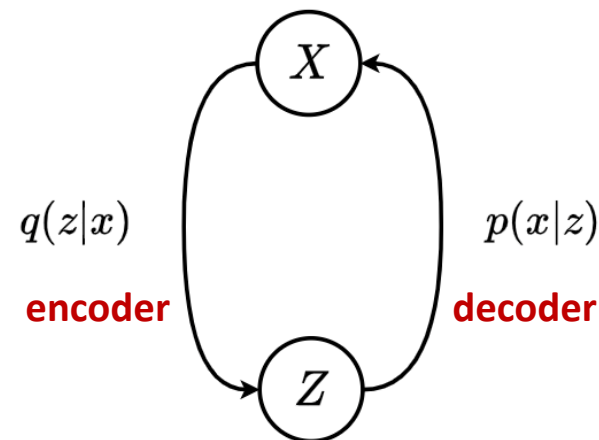
Probabilistic framework

► Optimization process

$$(f^*, g^*, h^*) = \arg \min_{(f, g, h)} \left(\mathbb{E}_{z \sim q_x} [\alpha \|x - f(z)\|^2] + D_{KL}(q(z|x) \parallel p(z)) \right)$$

► Deep learning loss function

$$\text{loss} = \alpha \|x - f(z)\|^2 + D_{KL}(\mathcal{N}(g(x), \text{diag}(h(x))), \mathcal{N}(0, I))$$

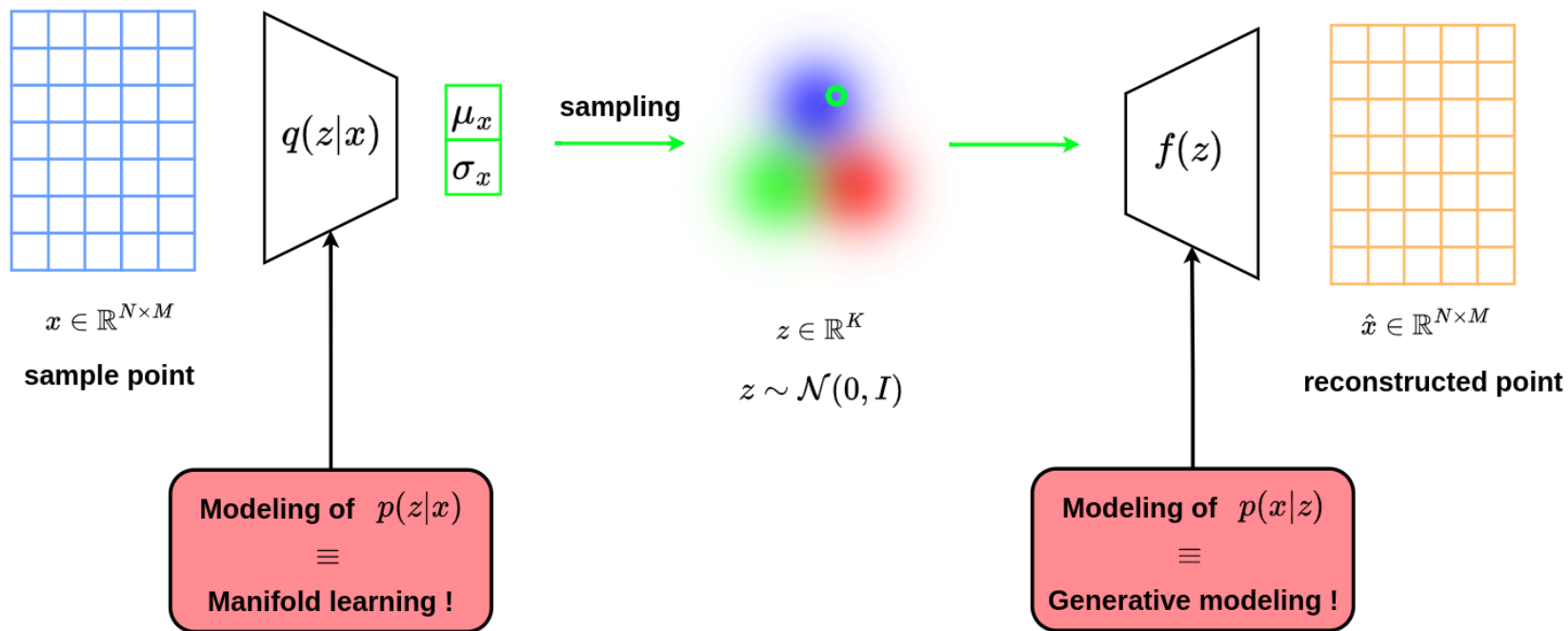


→ $g(\cdot)$ and $h(\cdot)$ are modeled through an encoder

→ $f(\cdot)$ is modeled through a decoder

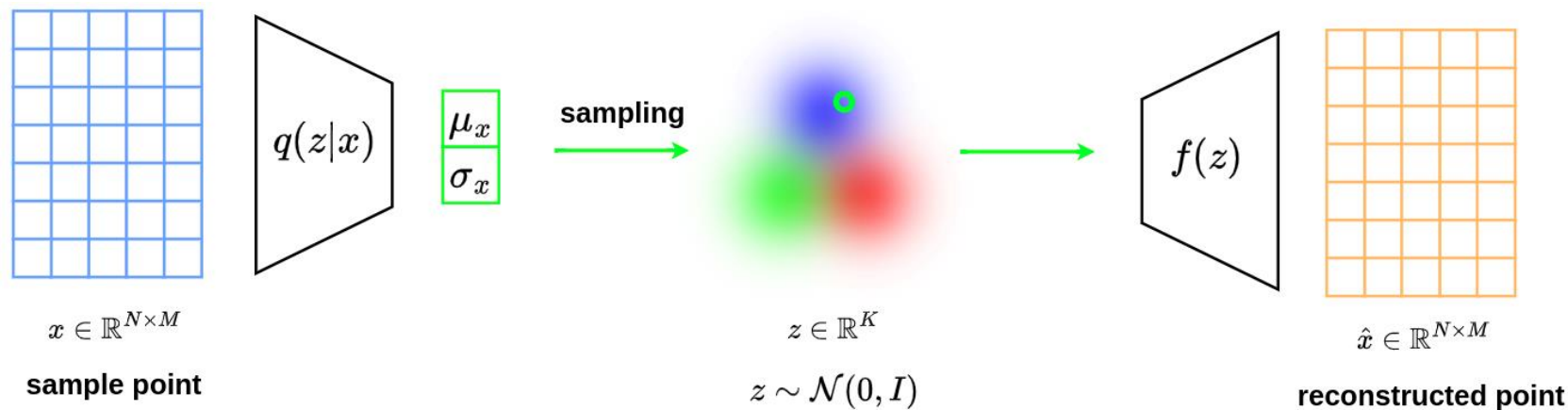
► Loss interpretation

$$\text{loss} = D_{KL}(\mathcal{N}(g(x), \text{diag}(h(x))), \mathcal{N}(0, I)) + \alpha \|x - f(z)\|^2$$



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$$\text{loss} = D_{KL}(\mathcal{N}(g(x), \text{diag}(h(x))), \mathcal{N}(0, I)) + \alpha \|x - f(z)\|^2$$



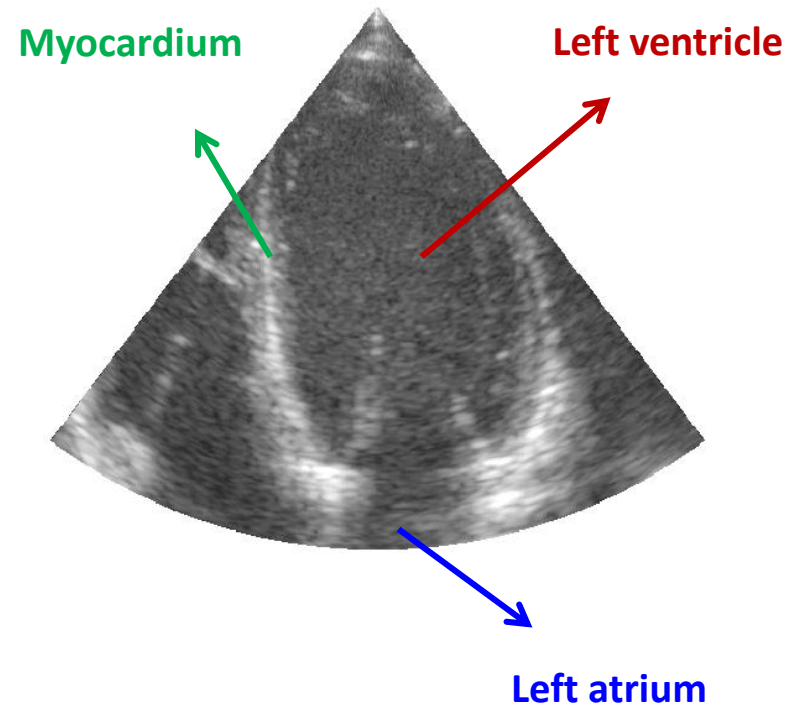
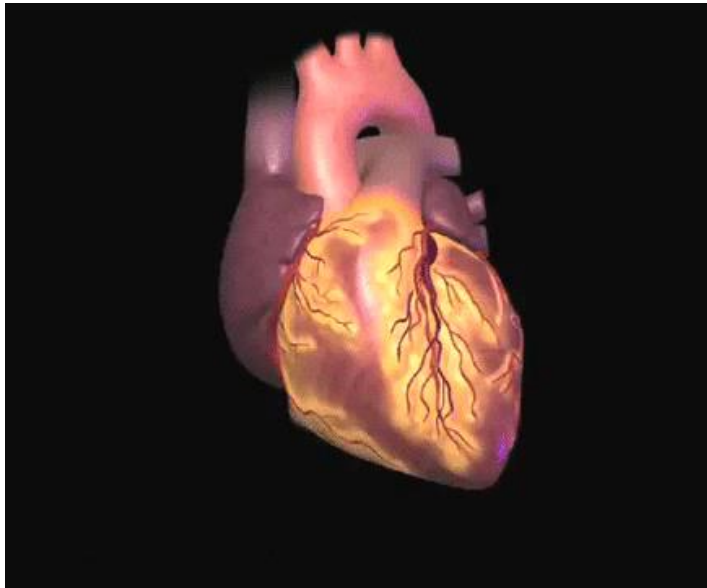
- $\mathcal{N}(g(x), h(x))$ imposes local **continuity**
- $\mathcal{N}(\cdot, \mathcal{N}(0, I))$ imposes global **completeness**

Practical applications

The obsession is to master the latent space !!!

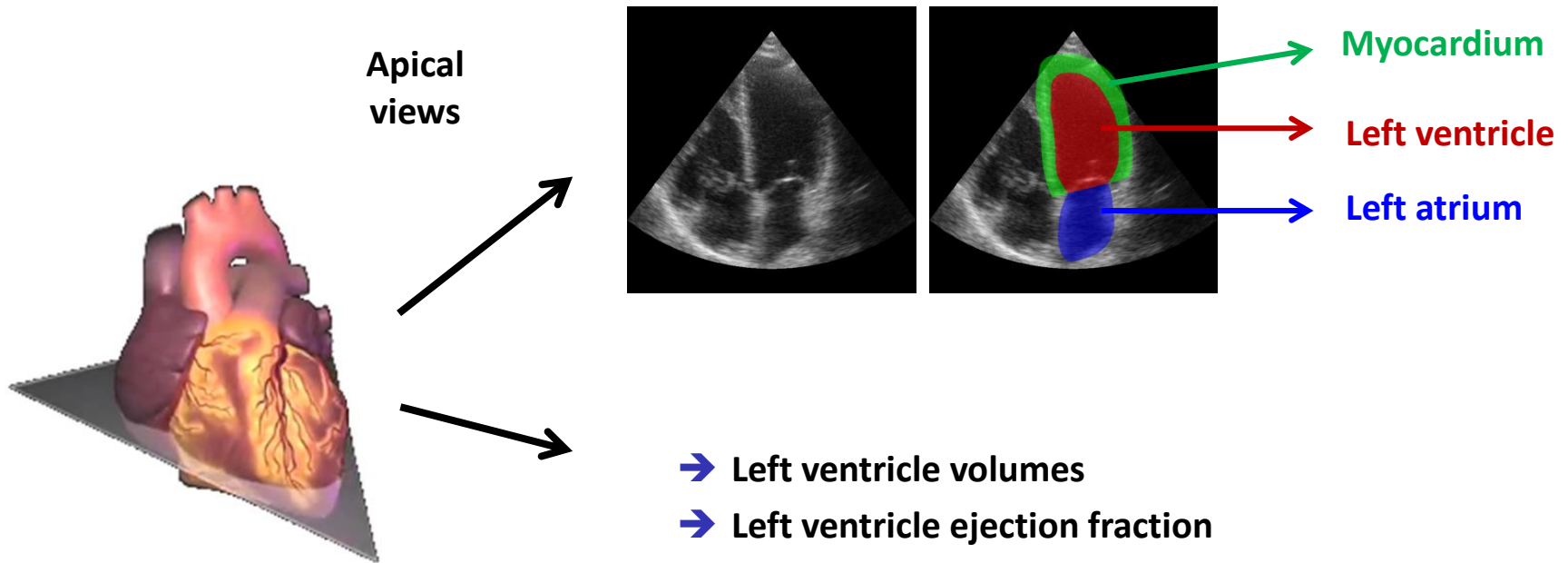
Needs for accurate and robust segmentation of cardiac structures

- Quantification of clinical indices from echocardiographic images



Needs for accurate and robust segmentation of cardiac structures

► Anatomical clinical indices

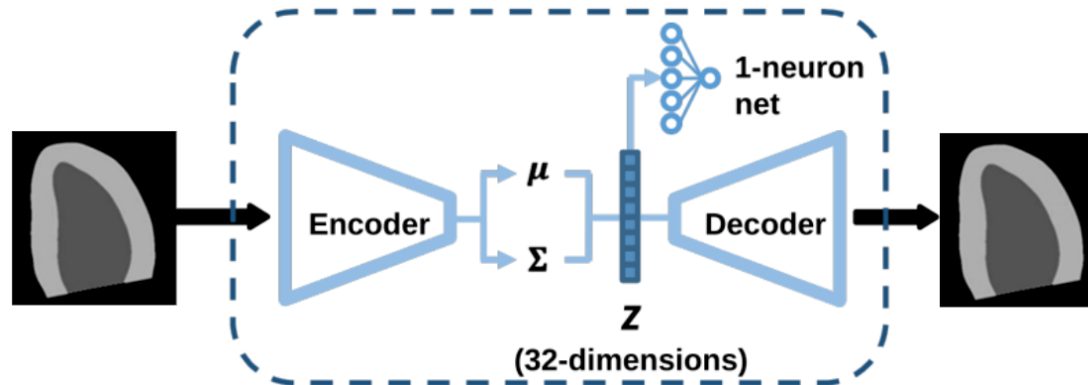


How to guarantee the anatomical coherence ?

► Constrained Variational Auto Encoder

- Approximation of a latent space with local linear properties

Use of a 1-neuron net to reinforce the linearity of the latent space

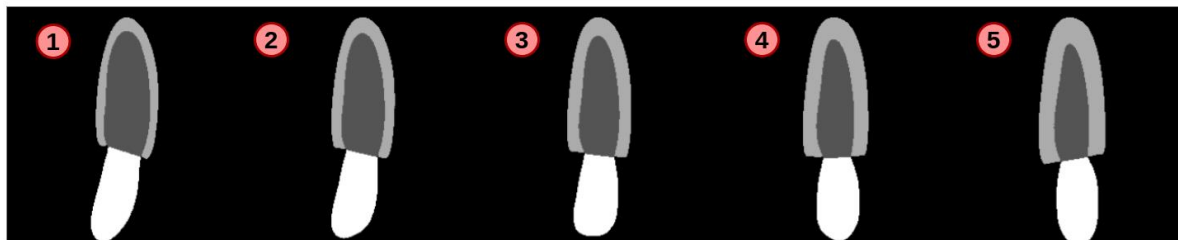
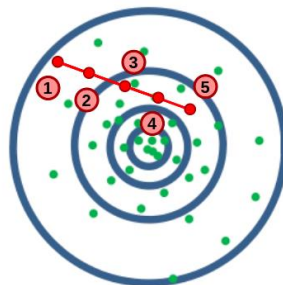


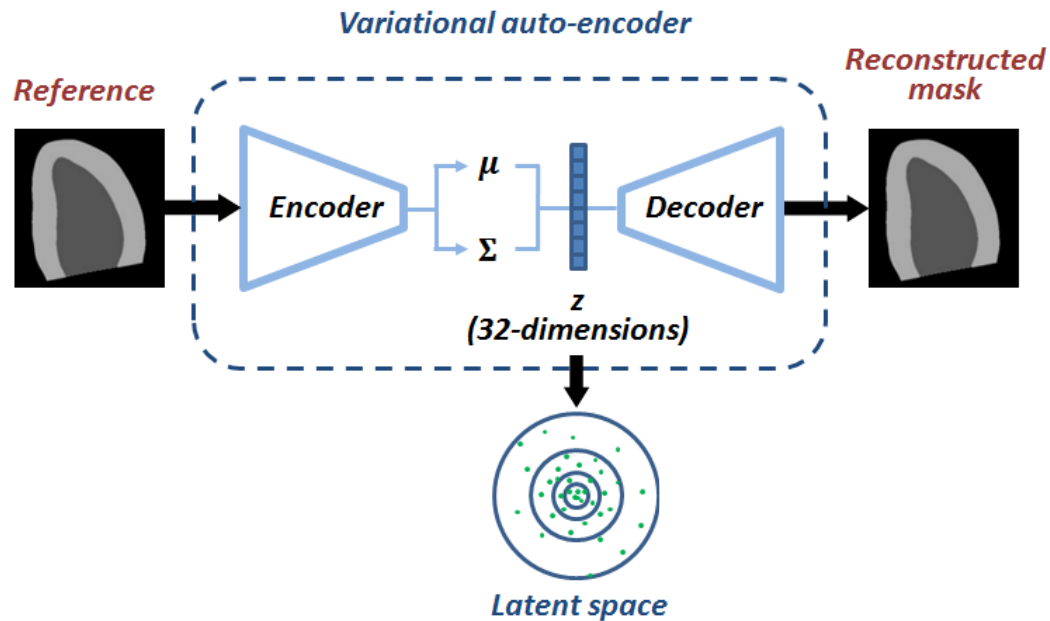
► Constrained Variational Auto Encoder

- Approximation of a latent space with local linear properties

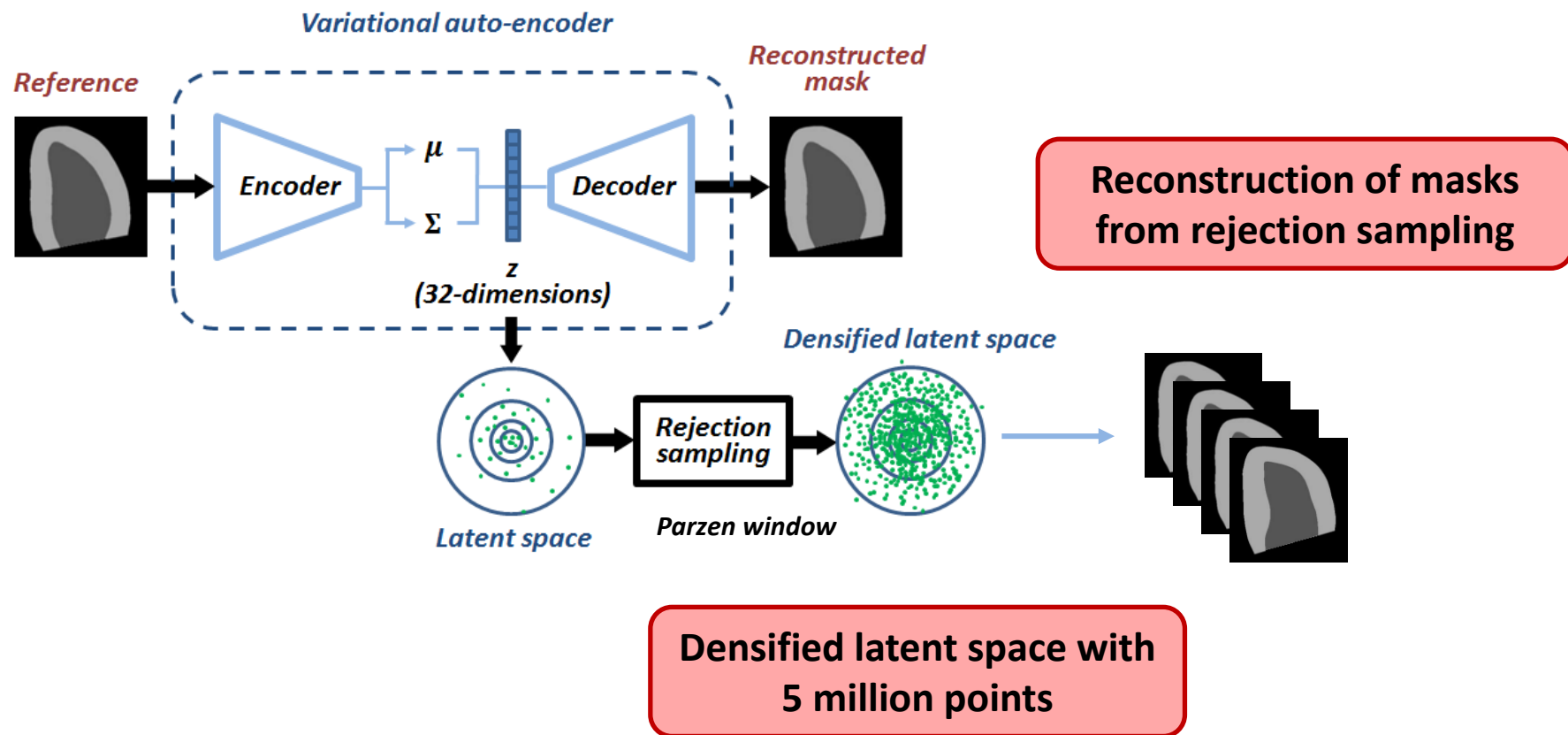
→ Linear interpolation in the latent space makes sense

*Constrained
latent space*



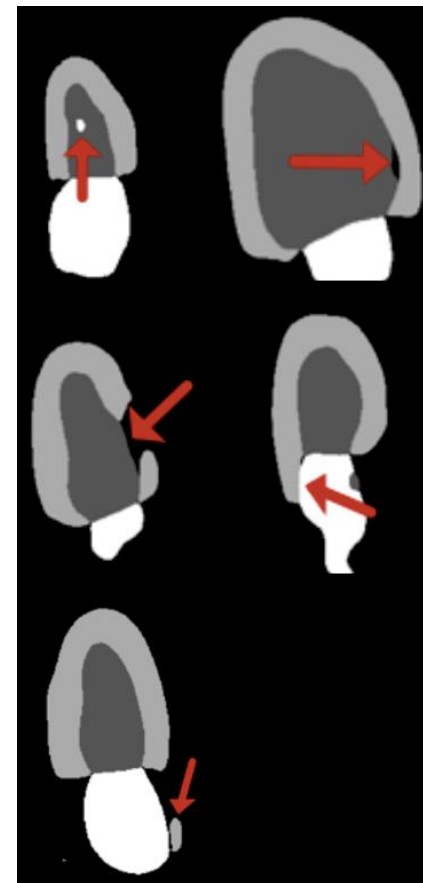


Efficient encoding of anatomical shapes in a latent space

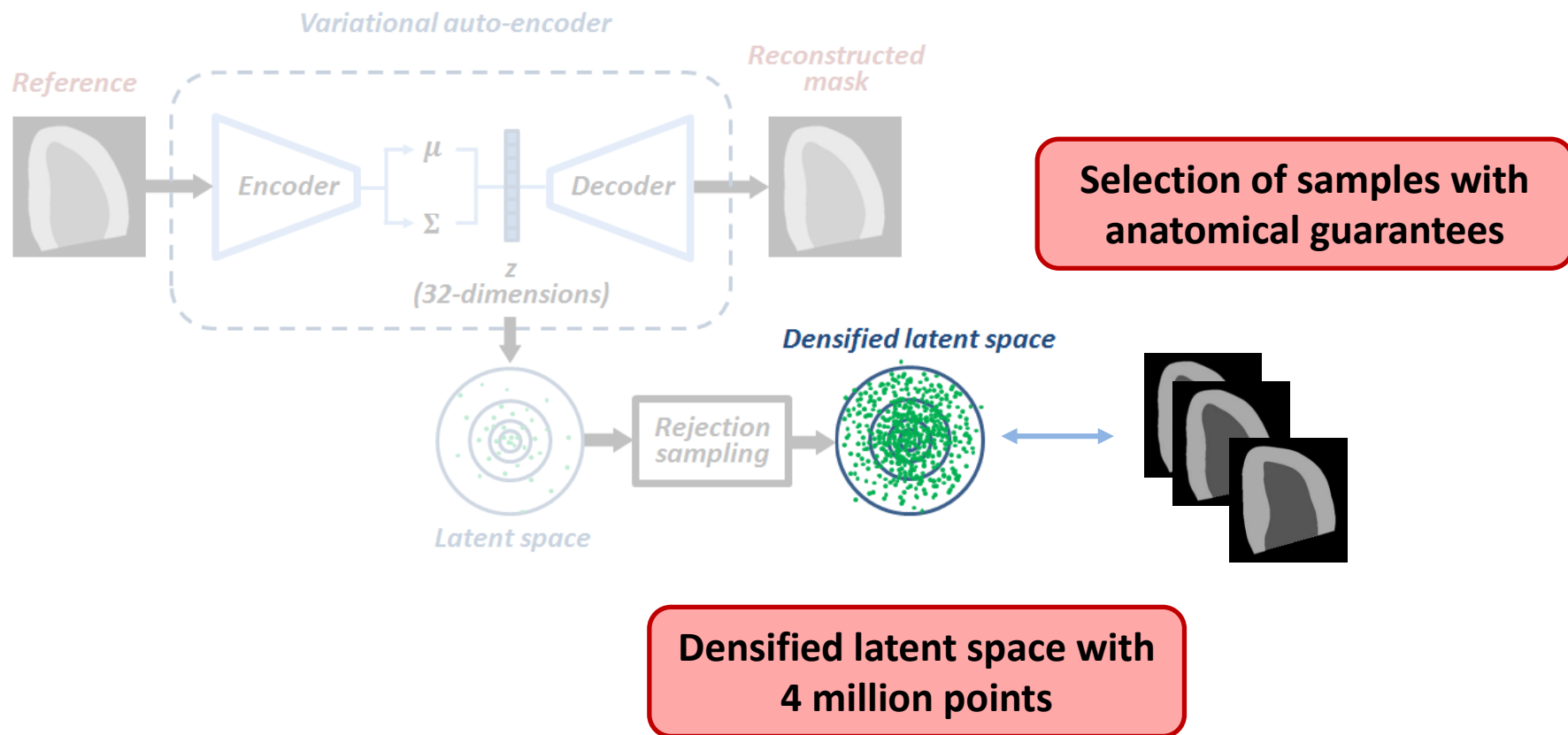


► Definition of 12 anatomical metrics

- (3 criteria) hole(s) in the LV, RV or LA
- (2 criteria) hole(s) between LV and MYO or between LV and LA
- (3 criteria) presence of more than one LV, MYO or LA
- (2 criteria) size of the area by which the LV touches the background or the MYO touches the LA
- (1 criterion) ratio between the minimal and maximal thickness of the MYO
- (1 criterion) ratio between the width of the LV and the average thickness of the MYO



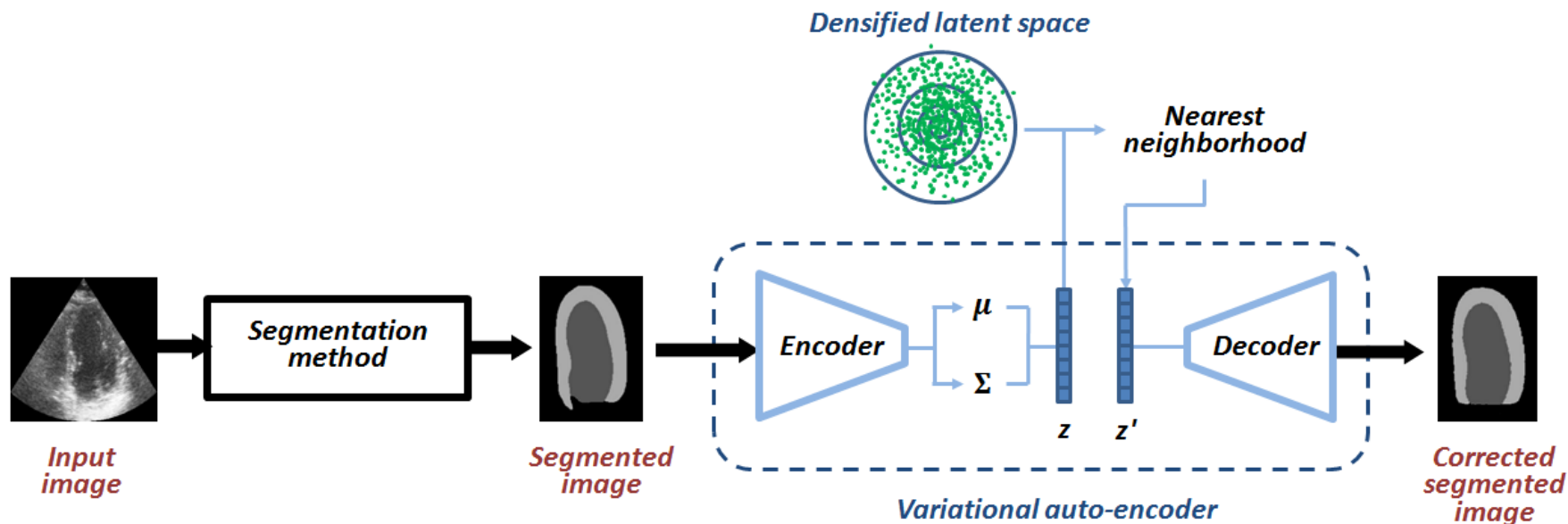
Cardiac segmentation with strong anatomical guarantees *[Painchaud, IEEE TMI, 2020]*



Correction of segmentation to
guarantee the plausibility of
anatomical shapes



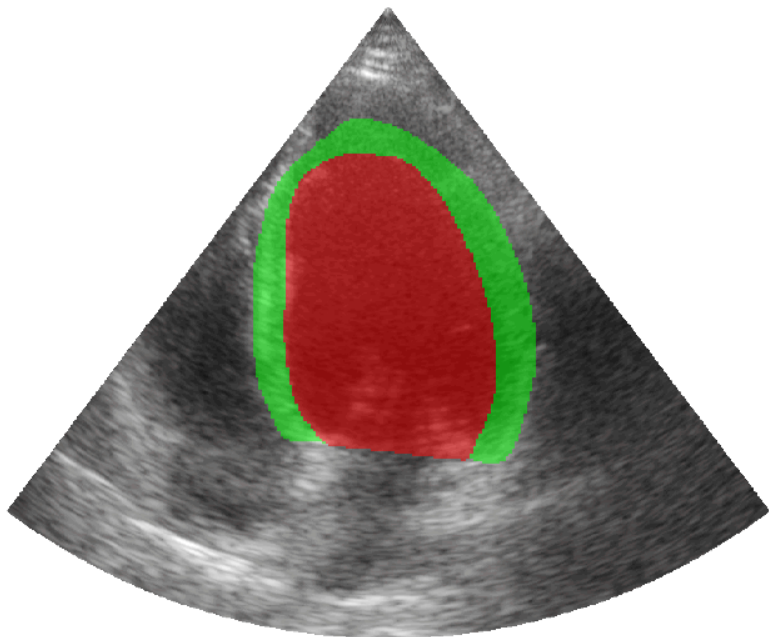
Almost same accuracy as the original
methods but with correct anatomical
shapes



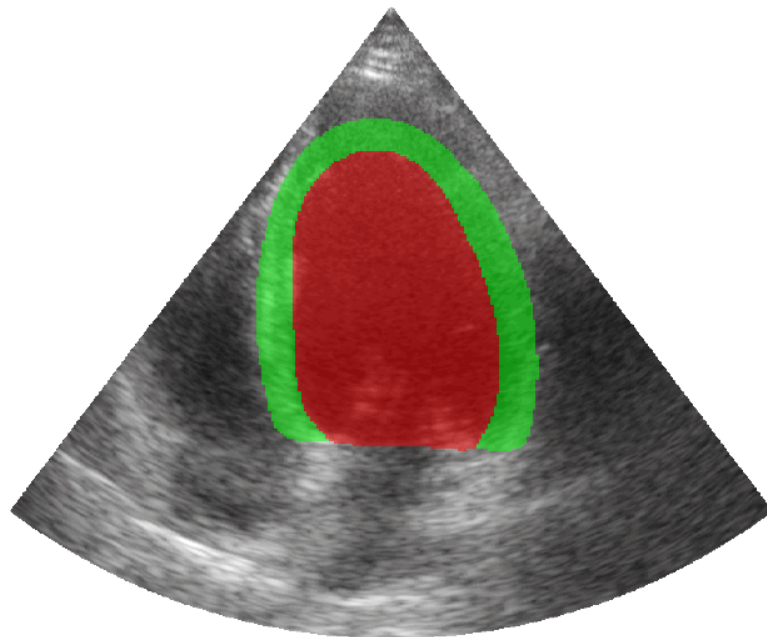
How to guarantee temporal consistency ?

- Quantification of clinical indices from echocardiographic images

What we have with a 2D U-Net



What we want



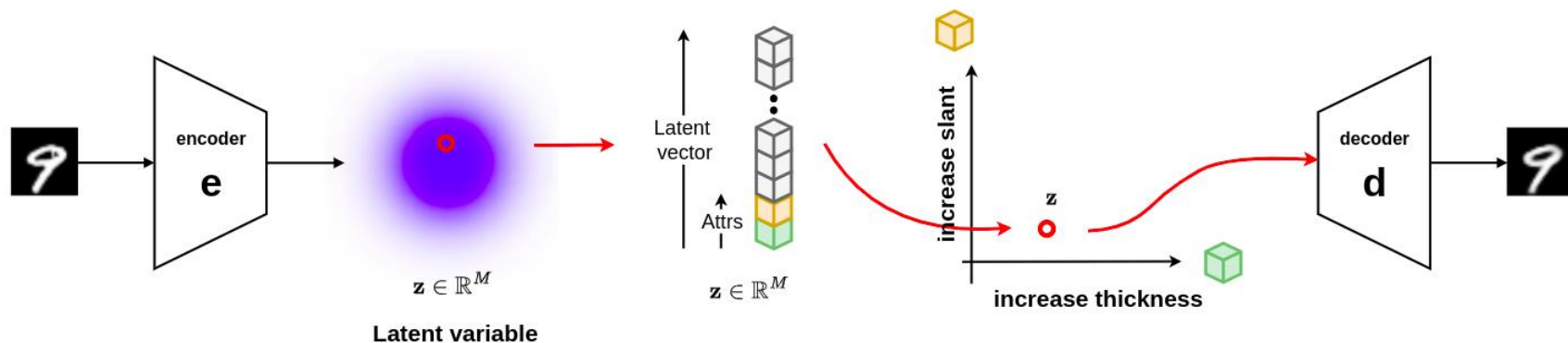
► AR-VAE: attribute-based regularization of VAE latent space

[Pati, Neural Comp. Appli., 2021]

- Generation of structured latent space

- ➔ Specific continuous-valued attributes forced to be encoded along specific dimensions

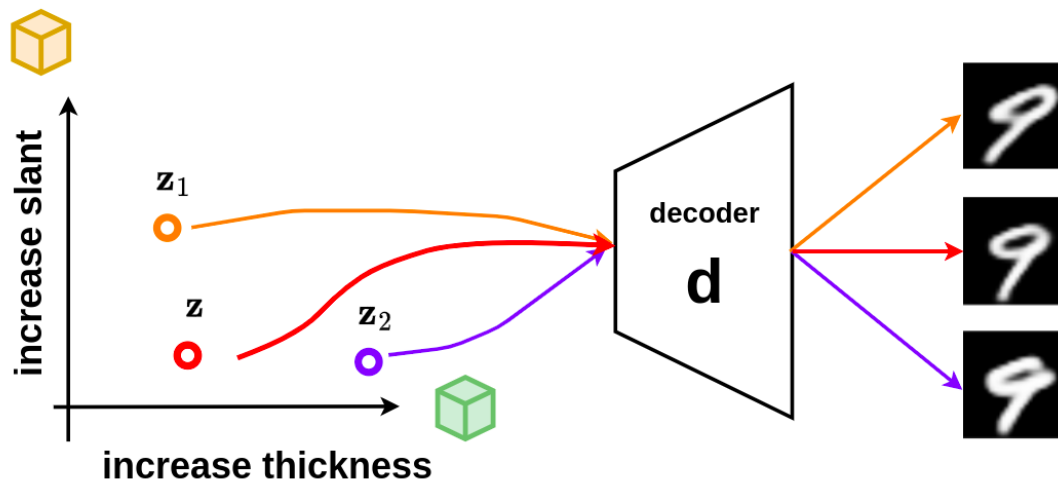
- ➔ $Loss = VAE\ loss + Attribute\ Regularisation\ Loss$



► AR-VAE: attribute-based regularization of VAE latent space

[Pati, Neural Comp. Appli., 2021]

- Sampling of the structured latent space



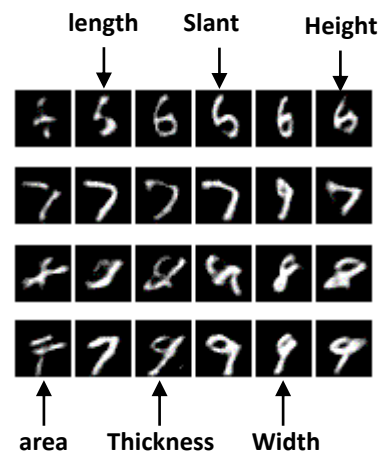
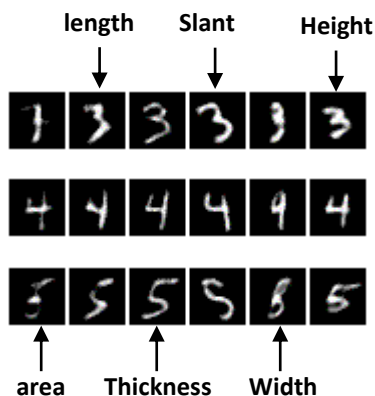
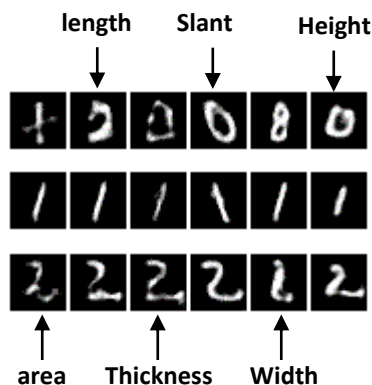
► AR-VAE: attribute-based regularization of VAE latent space

[Pati, Neural Comp. Appli., 2021]

- Sampling of the structured latent space

- ➔ Specific attribute (from left to right): area, length, thickness, slant, width, height

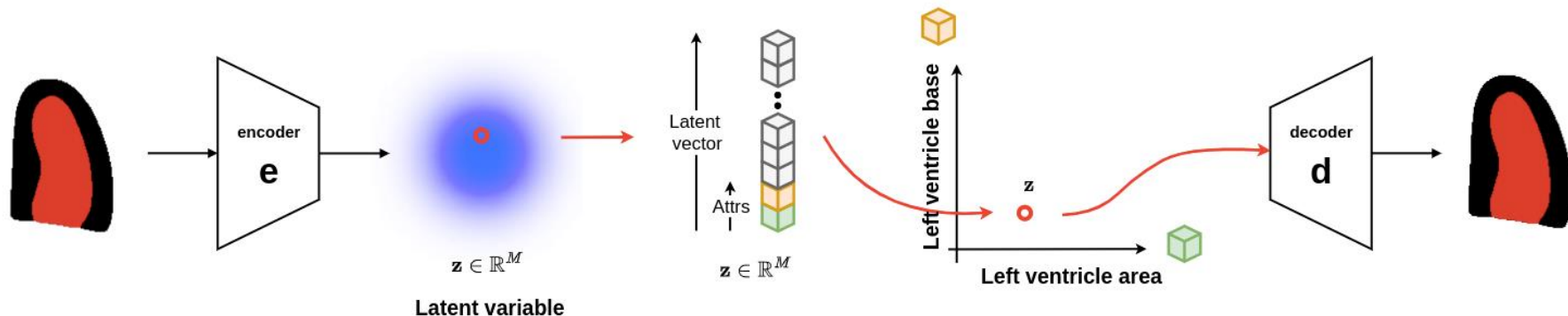
- ➔ Each column corresponds to traversal along a regularized dimension

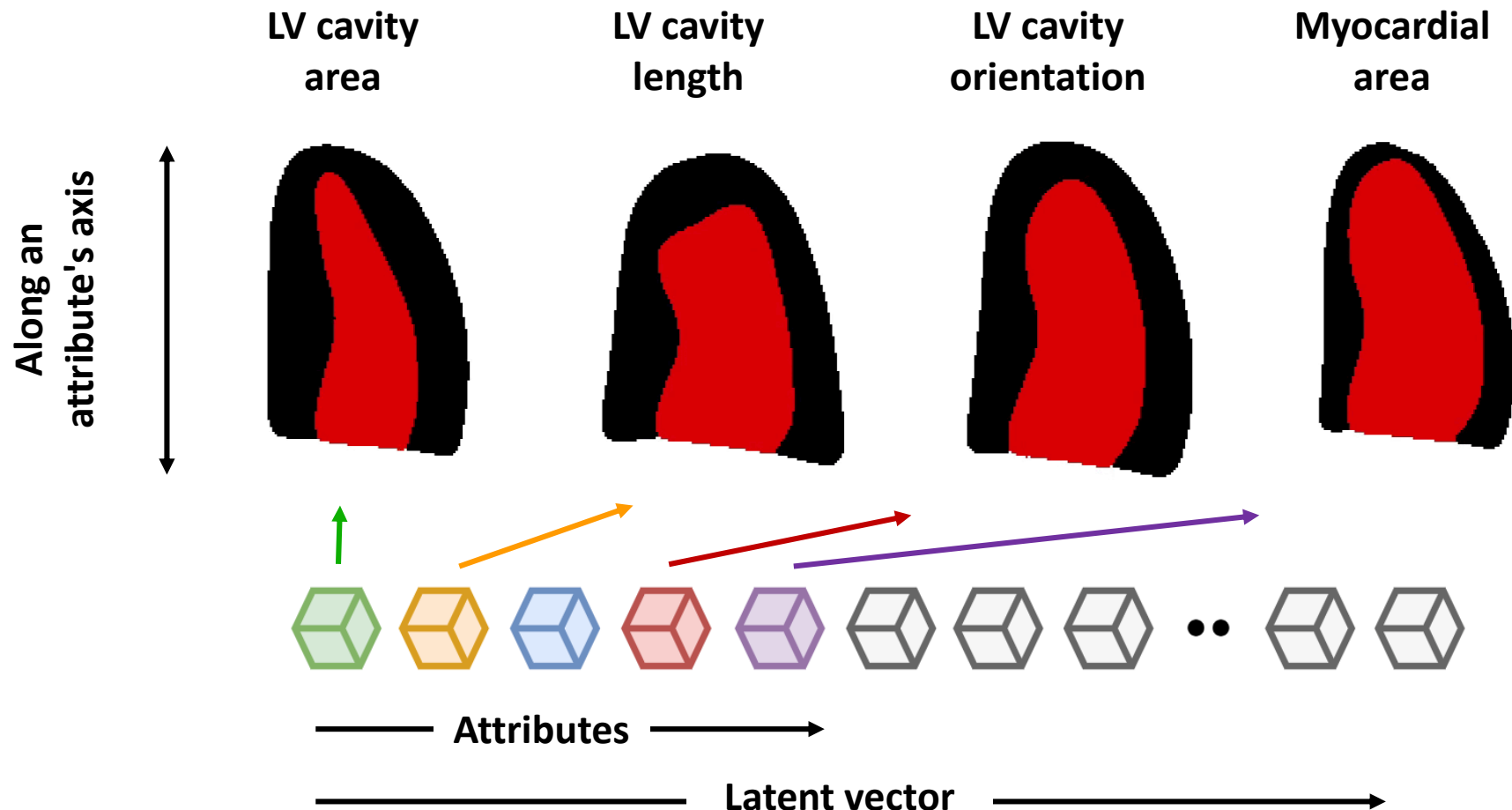


► Application to the description of the cardiac shapes

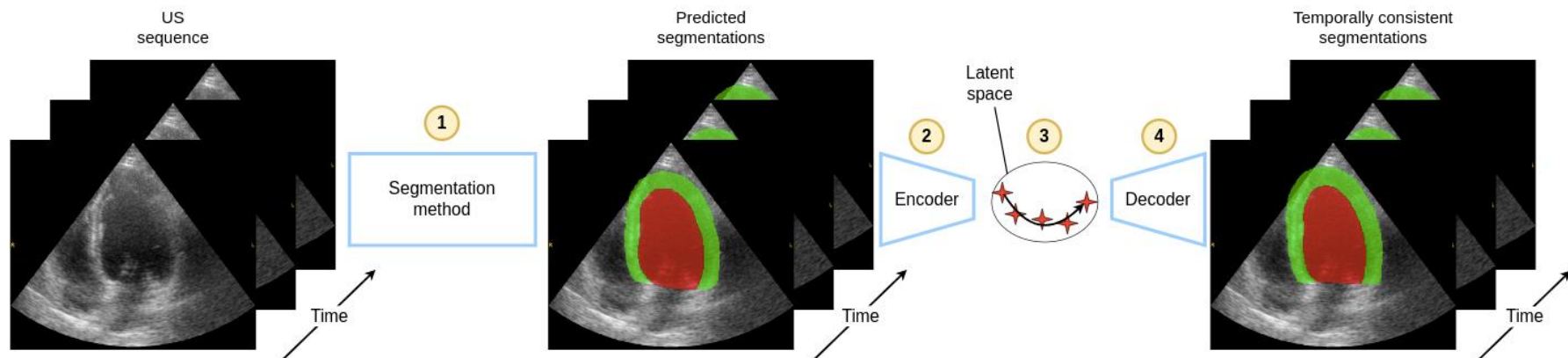
- Generation of structured latent space according to the following attributes

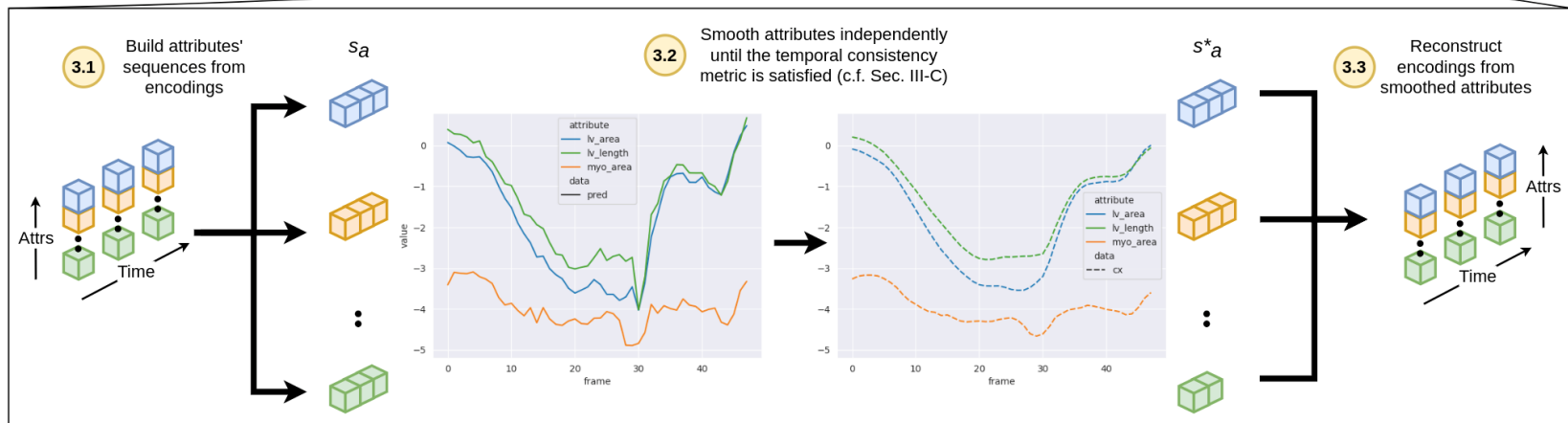
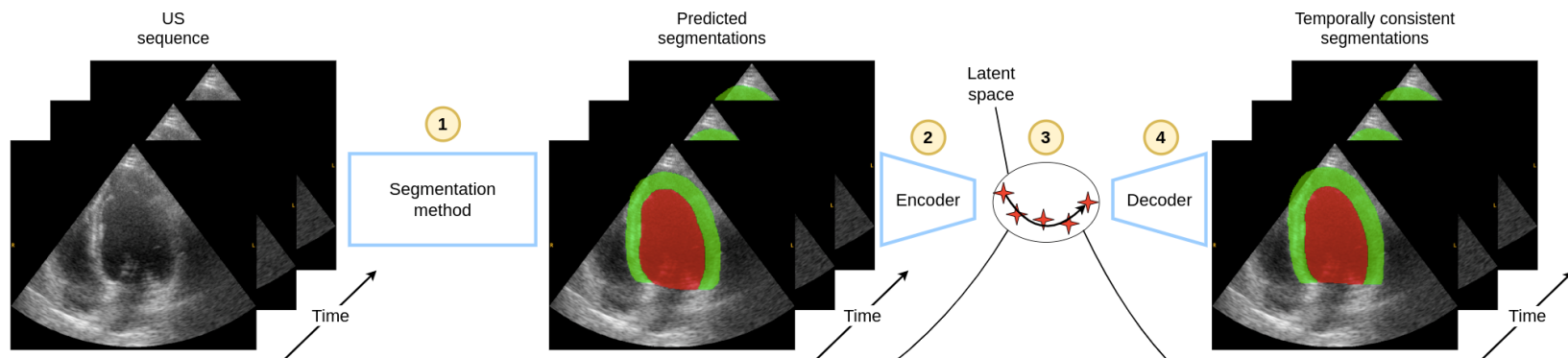
- ➔ Left ventricle (LV) cavity: area, length, basal width, orientation
- ➔ Myocardial area
- ➔ Epicardial center





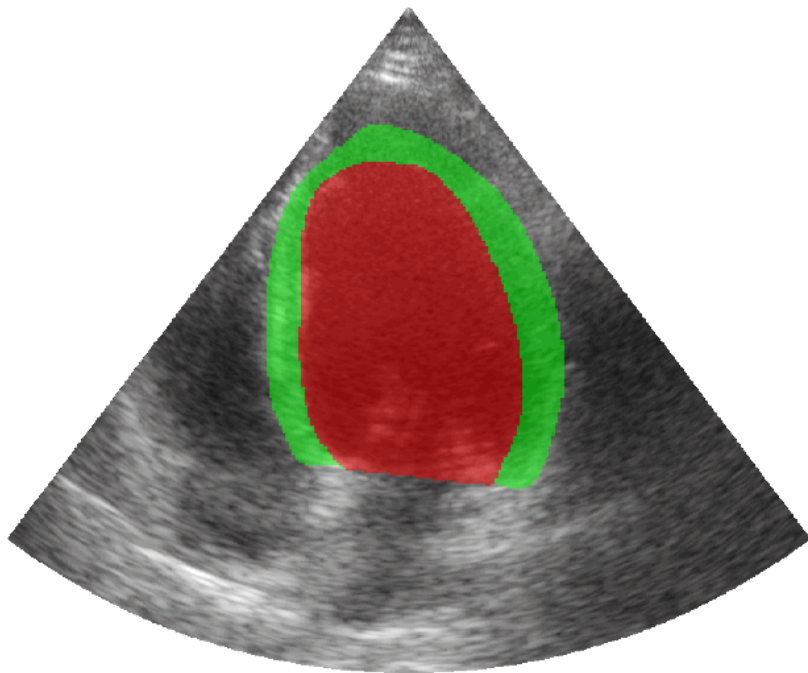
► Proposed temporal pipeline



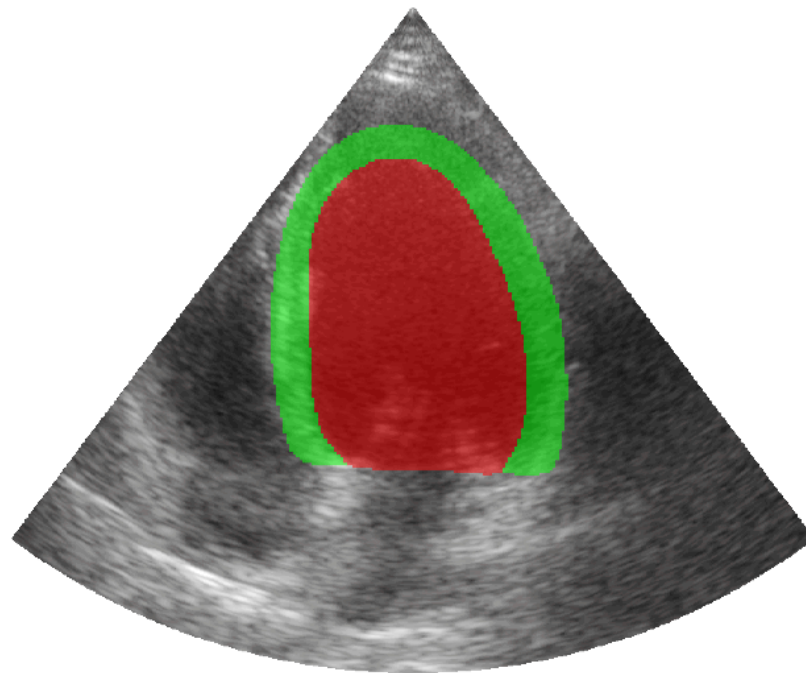


► Some post-processing examples

Original U-Net

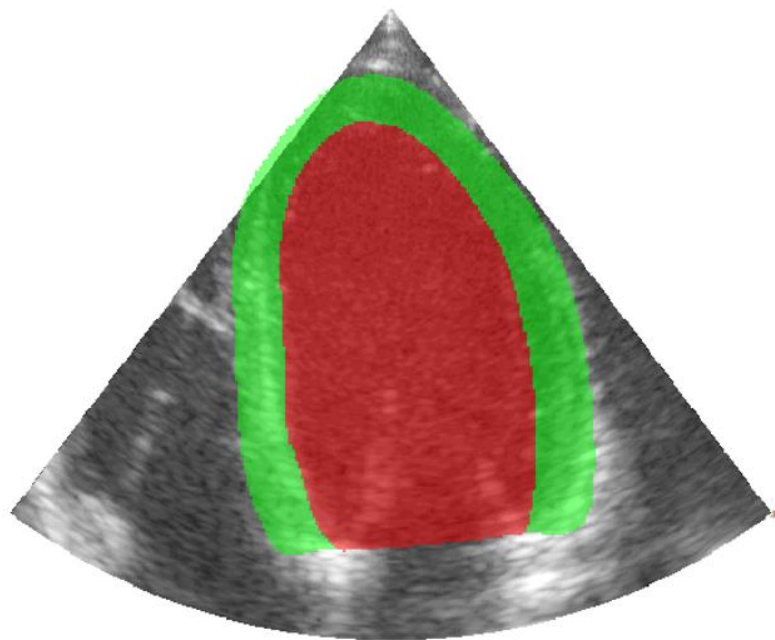


Post-processed U-Net

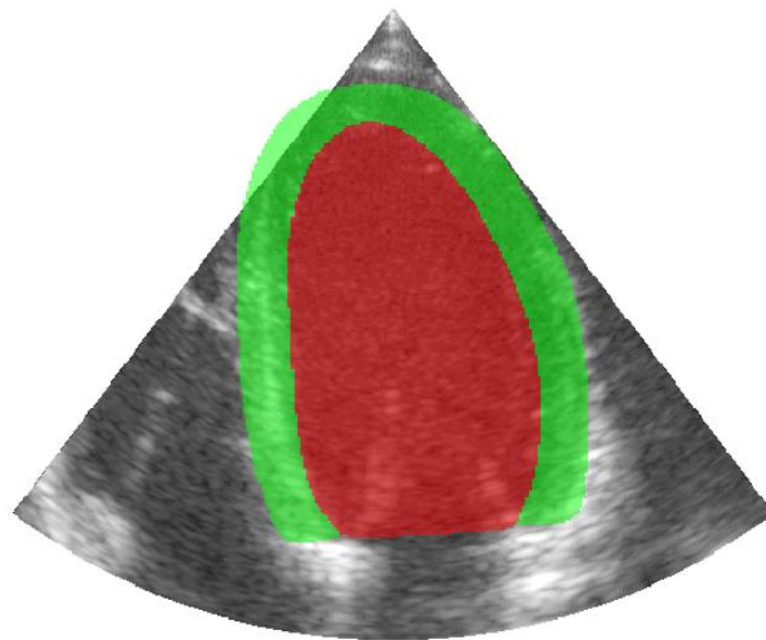


► Some post-processing examples

Original U-Net

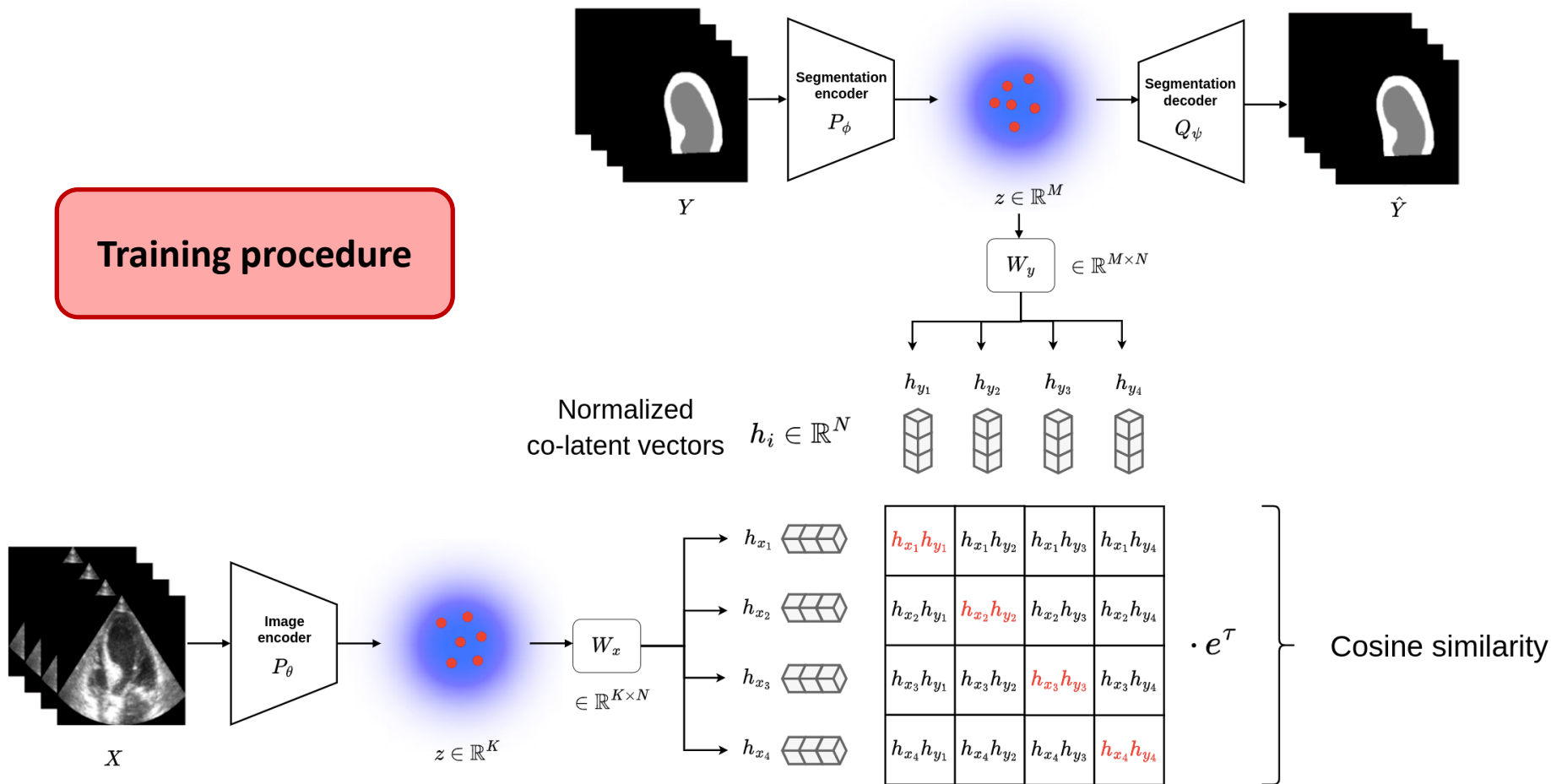


Post-processed U-Net

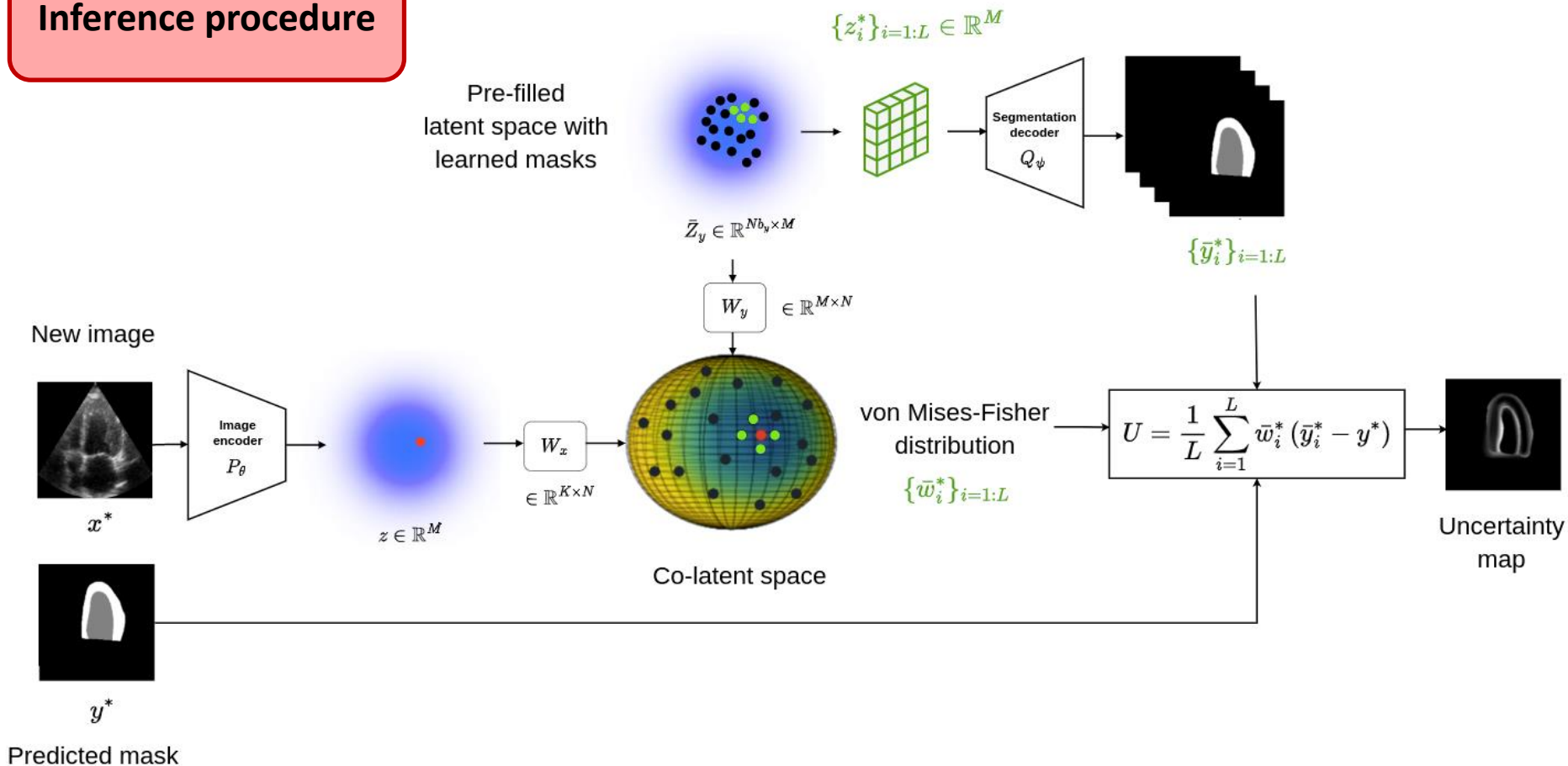


Uncertainty estimation for cardiac image segmentation

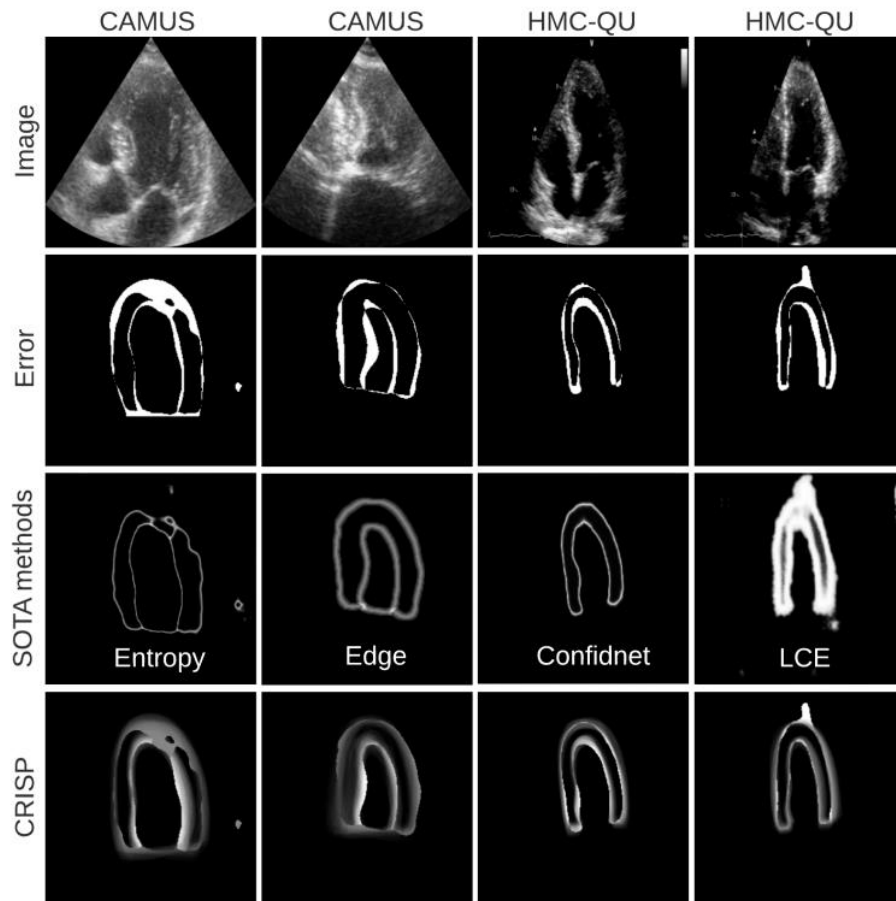
Training procedure



Inference procedure



► Uncertainty results



To conclude

To conclude

► **VAEs can be used effectively in medical imaging**

- **Guarantee anatomical coherence**
- **Guarantee temporal consistency**
- **Estimation uncertainty for image segmentation**
- **Generative interest limited to simple distribution**



► **Useful tool for characterizing populations**

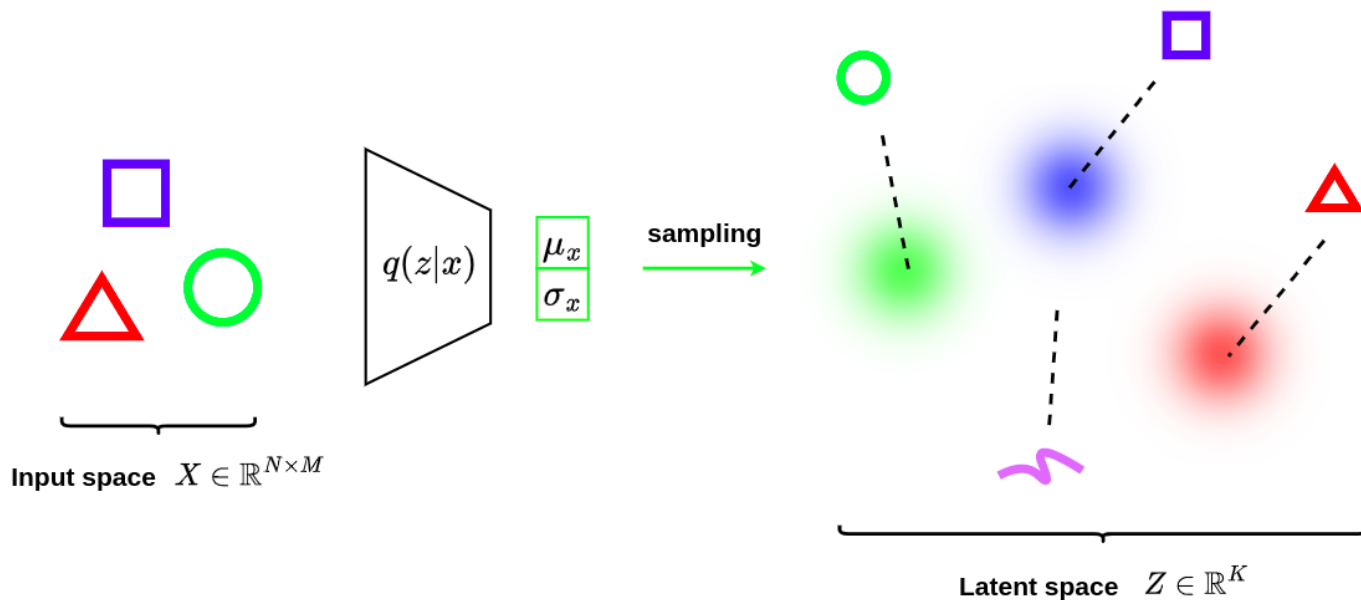
- **Need to properly structure the learned latent space**
- **Need to work on relatively large cohorts**

Appendix

Probabilistic framework

► Continuity

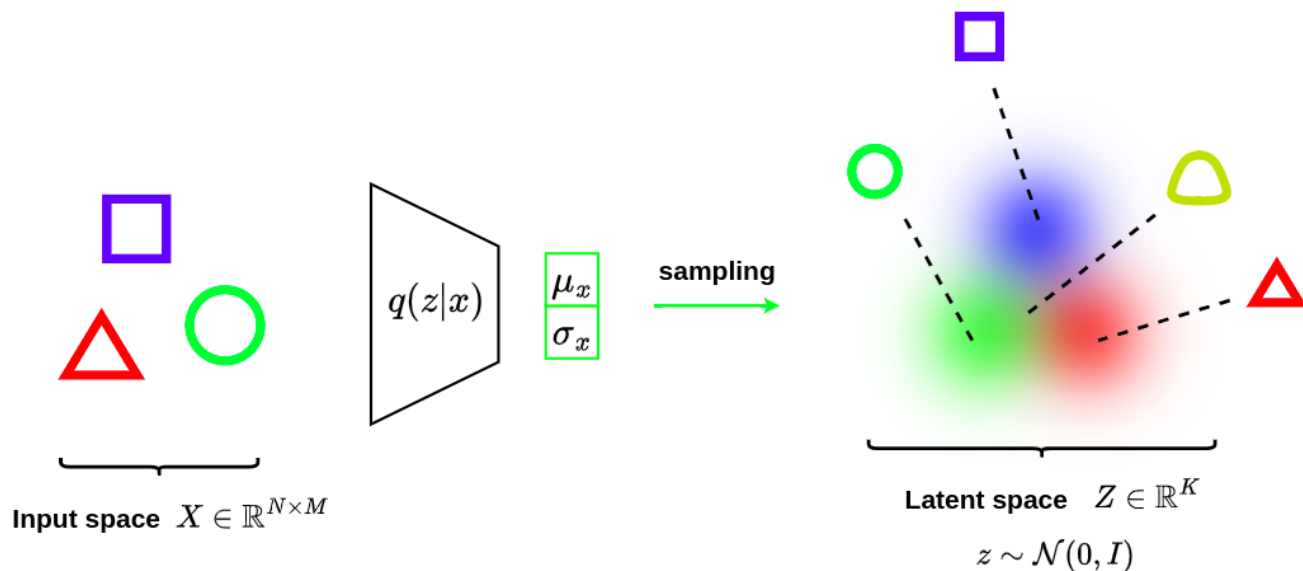
$$\mathcal{N}(g(x), h(x))$$



Probabilistic framework

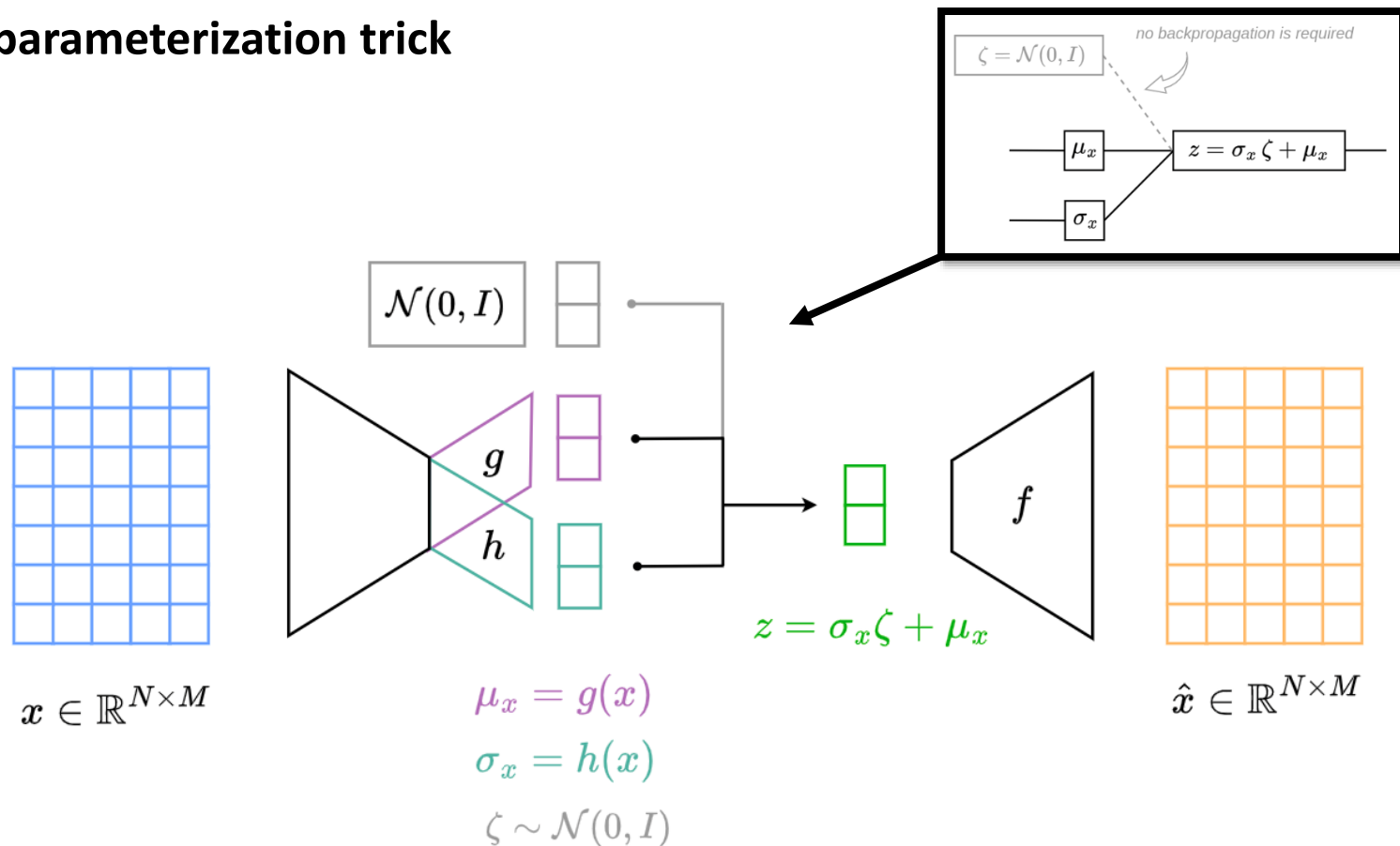
► Completeness

$$\mathcal{N}(\cdot, \mathcal{N}(0, I))$$



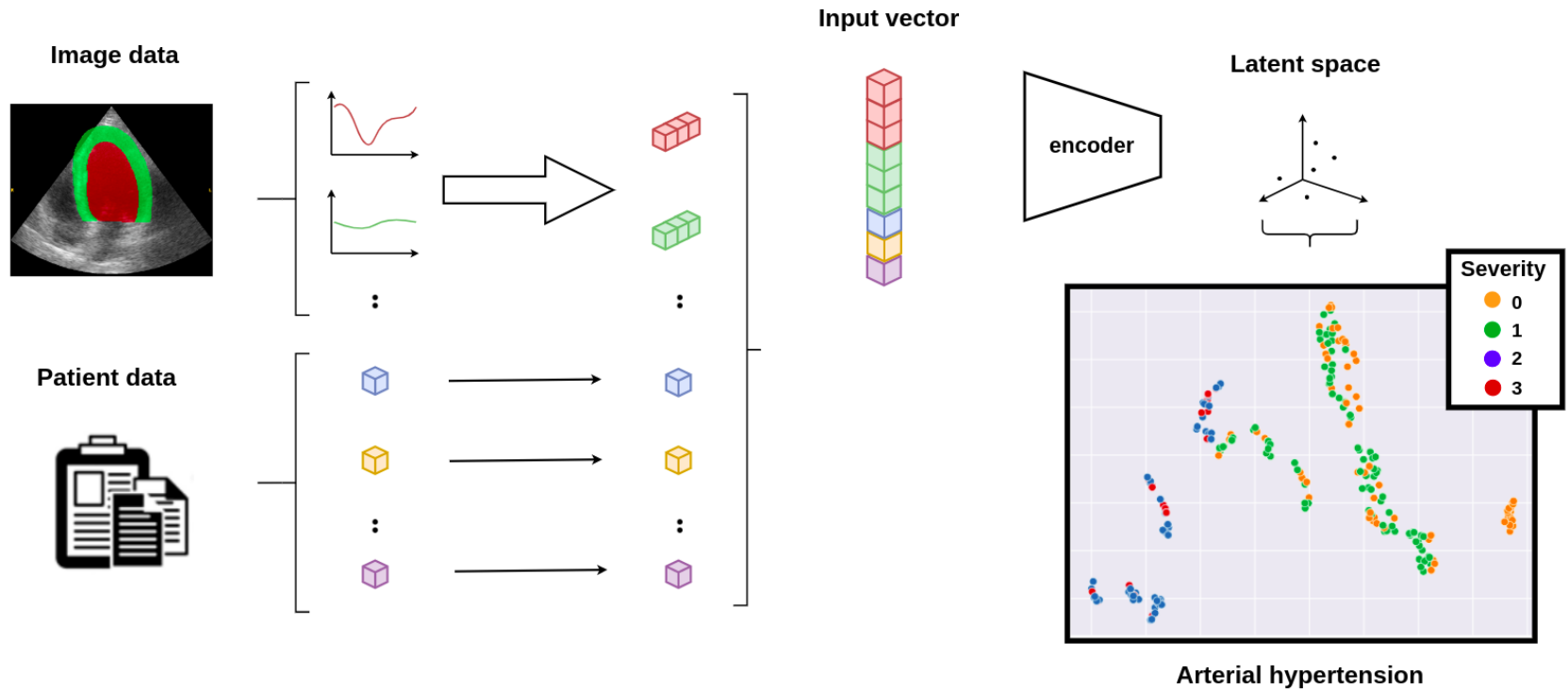
Deep learning implementation

► Reparameterization trick

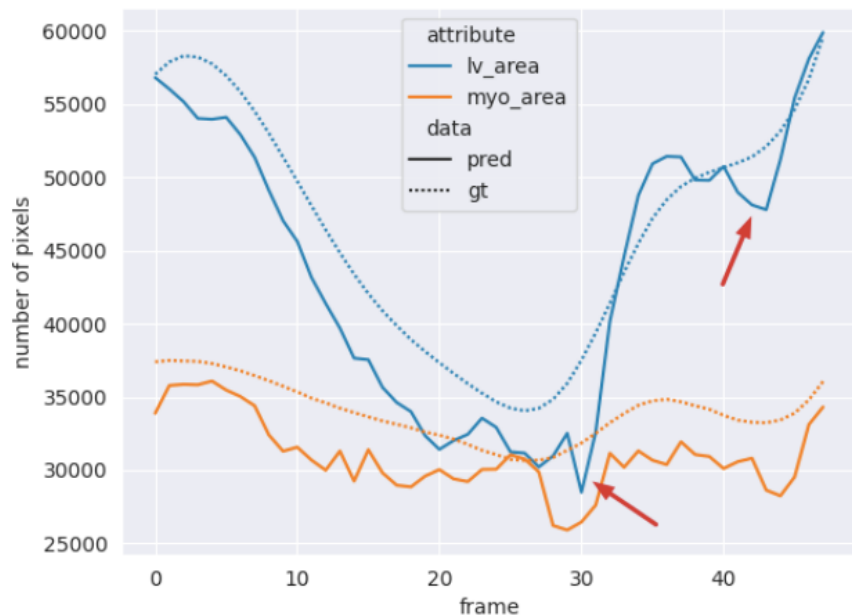


Interest of auto-encoders

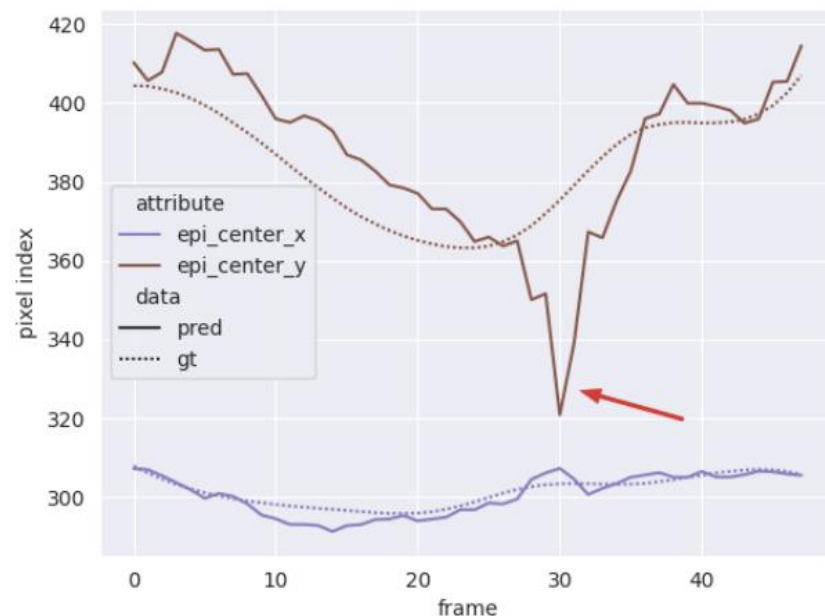
► Data representation



► Temporal inconsistency detection from the latent space



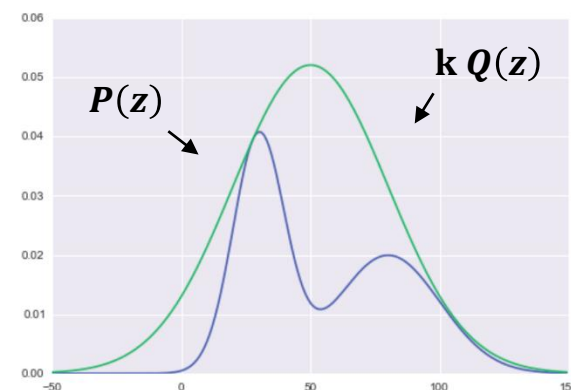
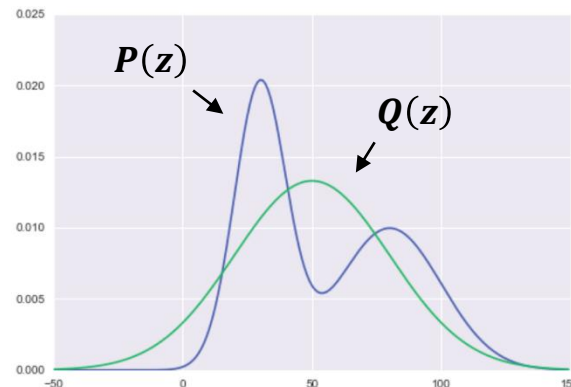
Choppy contraction/dilation of the LV cavity



Abrupt vertical shifts of the cardiac shape

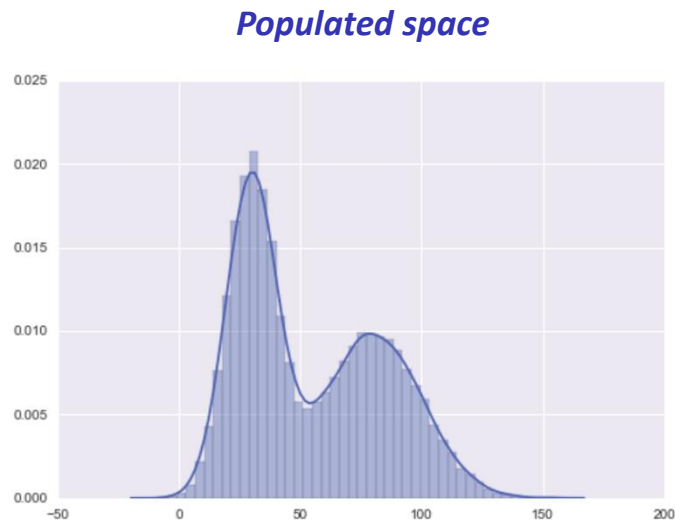
► Rejection sampling

- Targeted distribution $P(z)$
 - ➔ Parzen window technique
- Proposed distribution $Q(z)$
- Constrain $kQ(z) > P(z)$
 - ➔ Automatic choice of k



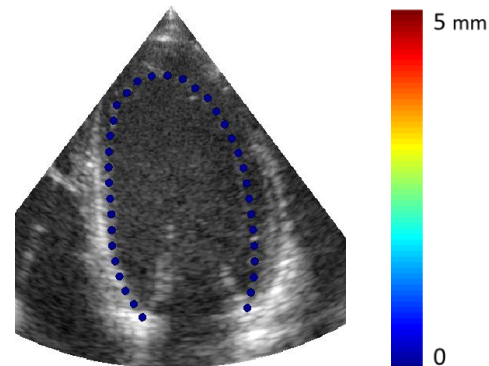
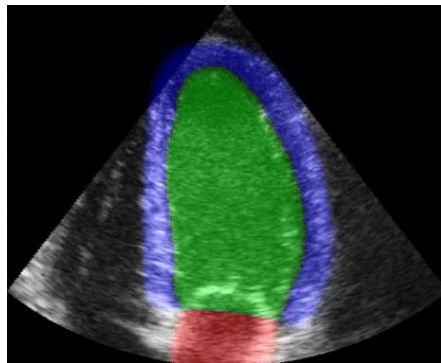
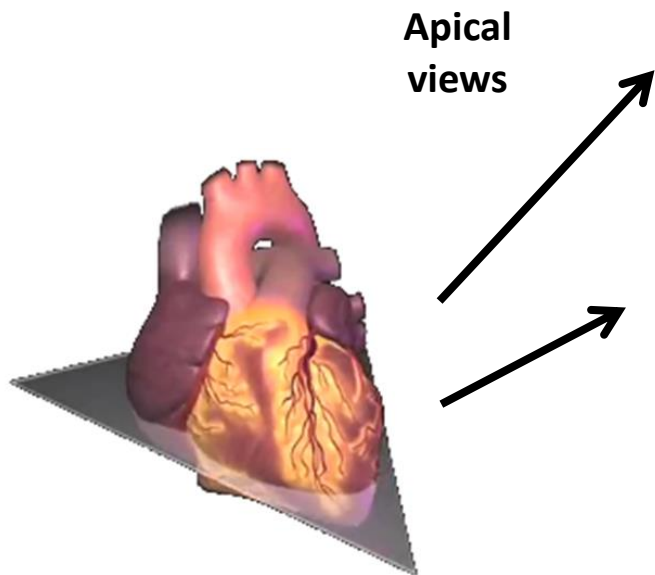
► Rejection sampling

- $z \sim Q(z)$
- $u \sim \text{Unif}(0, kQ(z))$
- Computation of $P(z)$
 - If $u \leq P(z)$ then keep z
 - If $u > P(z)$ then reject z

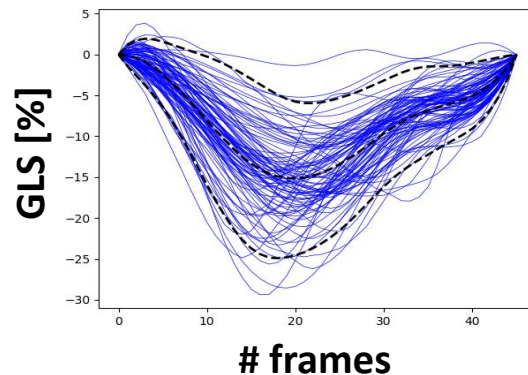


Needs for accurate and robust segmentation of cardiac structures

► Functional clinical indices



- Volume dynamic of the cavities over the cardiac cycle
- Global longitudinal strain of the heart muscle

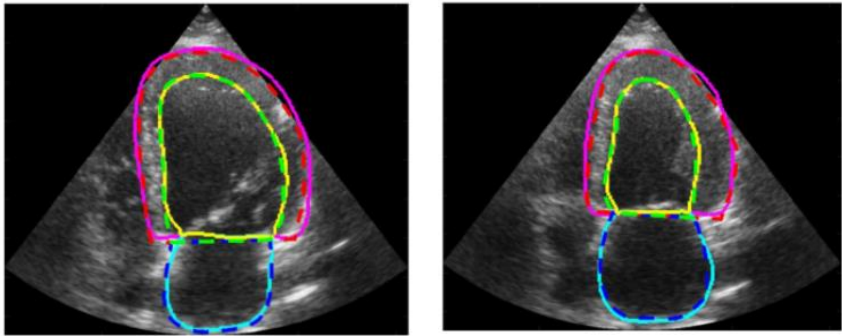


► Quantitative evaluation

• CAMUS dataset

- ➔ 500 patients x 2 probe orientation x 2 key frames
- ➔ 2000 images with reference contours
- ➔ Metrics: Dice / Hausdorff dist.

Example of a segmentation result



Methods	Original	VAE		Nearest Neighbors	
		-	Robust	w/o RS	w/ RS
U-Net [5], [8]	.921 / 6.0	.923 / 5.7	.923 / 5.7	.922 / 5.7	.922 / 5.7
LUNet [14]	.922 / 5.9	.921 / 5.9	.922 / 5.9	.921 / 5.9	.921 / 6.0
ENet [31]	.923 / 5.8	.921 / 5.9	.921 / 5.9	.920 / 5.9	.920 / 5.9
SHG [32]	.915 / 6.2	.915 / 6.2	.916 / 6.2	.915 / 6.2	.915 / 6.2
SRF [33]	.879 / 13.1	.877 / 13.2	.878 / 13.2	.879 / 13.0	.879 / 13.0
BEASM-auto [34], [35]	.868 / 10.5	.868 / 10.5	.867 / 10.5	.868 / 10.5	.868 / 10.5
BEASM-semi [5], [34]	.899 / 7.8	.899 / 7.8	.899 / 7.8	.899 / 7.8	.899 / 7.8

► Quantitative evaluation

- Corr: Correlation between the sum of the uncertainty values (foreground) and Dice score
- MI: Mutual Information between the uncertainty map and the error map

Training data Testing data	CAMUS		CAMUS HMC-QU		Shenzen JSRT	
Method	Corr. ↑	MI ↑	Corr. ↑	MI ↑	Corr. ↑	MI ↑
Entropy	0.66	0.02	0.34	0.02	0.89	0.02
ConfidNet [1]	0.34	0.04	0.36	0.04	0.69	0.01
<i>CRISP</i>	0.71	0.20	0.41	0.06	0.83	0.11
McDropout [3]	0.67	0.03	0.26	0.02	0.82	0.03
<i>CRISP</i> -MC	0.78	0.26	0.29	0.06	0.82	0.08
LCE [2]	0.58	0.44	0.35	0.37	0.87	0.06
<i>CRISP</i> -LCE	0.59	0.08	0.34	0.13	0.85	0.11