

Semi-automatic liver tumor segmentation in DCE-CT scans using random forests and supervoxels

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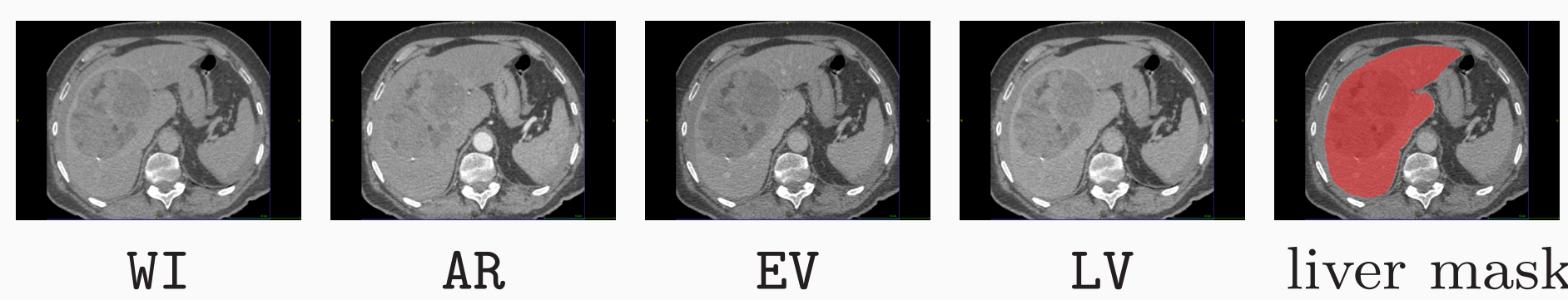
Context

Evaluation of pre-operative locoregional treatments (PLT) response for *hepato-cellular carcinoma* (HCC):

- PLT downstage HCC tumors by necrosis
- standard scores (RECIST, EASL or WHO) do not provide satisfactory results
- **tumor necrosis (TN) rate** provides more significant correlation with survival rates

To overcome inter-expert variability induced by visual assessment, we propose a semi-automatic method to estimate **TN rate** from dynamic contrast-enhanced (DCE) CT scans:

- requires the segmentation of **healthy liver**, tumoral **active** and **necrotic** areas
- DCE images provide discriminative information: HCC is characterized by arterial enhancement followed by venous washout in response to contrast agent injection



State-of-the-art

Unsupervised multi-phase methods

- liver tumor segmentation through level sets, k-means or graph cut
- multi-phase voxel-wise features: capture the dynamic in response to agent injection

User interaction appears necessary since arterial enhancement and venous washout depend on contrast agent kinetic and injection protocol.

Supervised single-phase methods

- tumor extraction relying on supervised ensemble learning
- spatial features with limited context
- voxel-wise: requires a significant amount of user interaction

Contributions

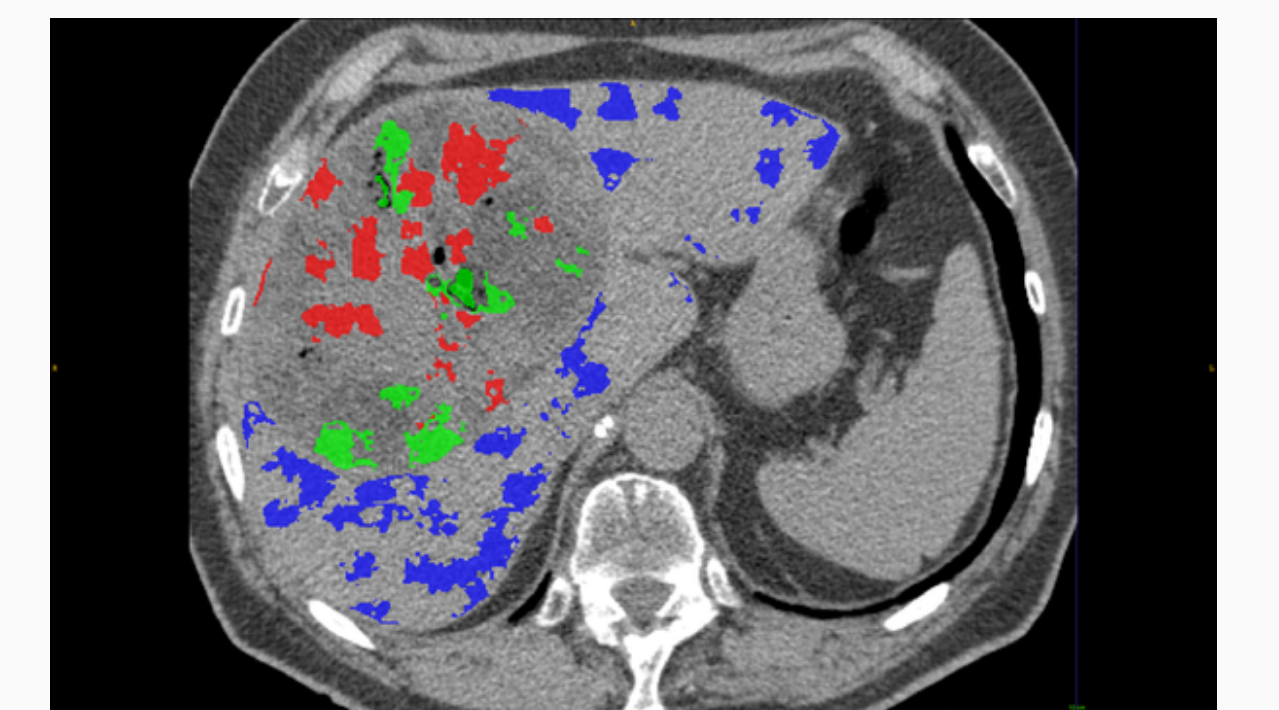
Proposed framework: multi-phase cluster-wise random forest

① Over-segmentation



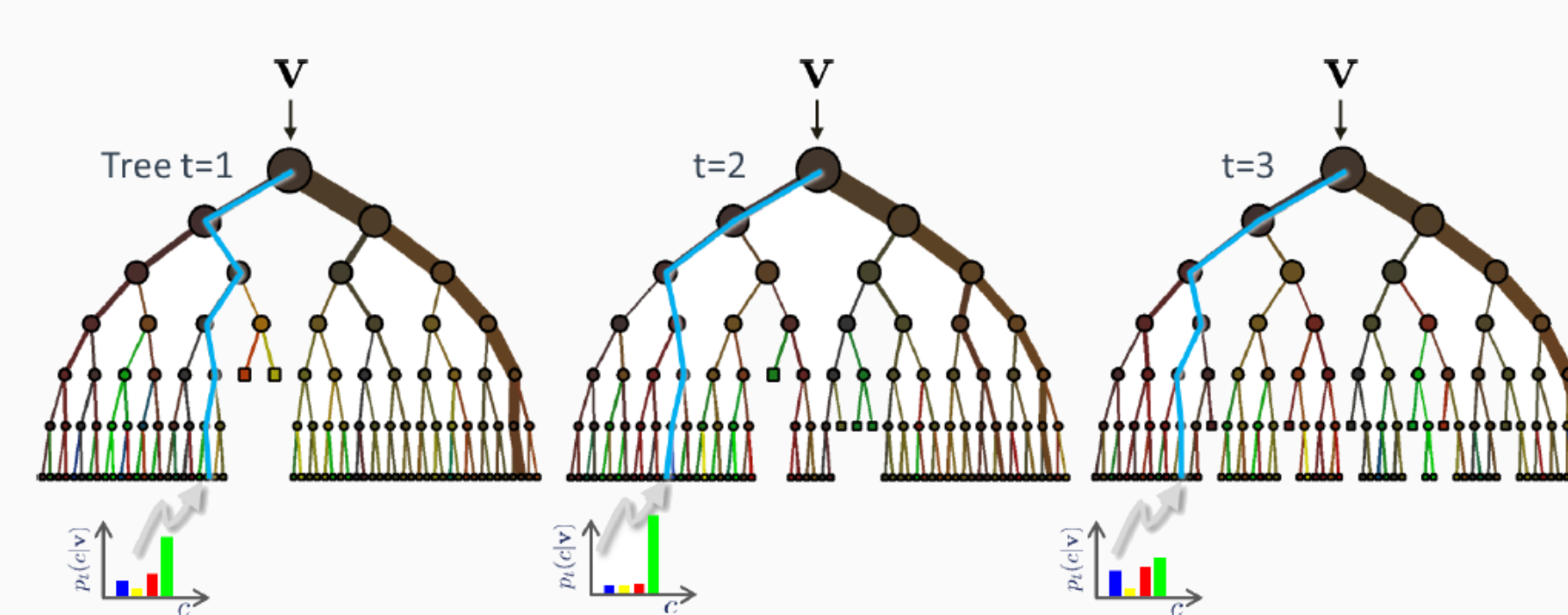
Liver volume decomposed into a set of K_R 3D SLIC supervoxels $\mathbf{R} = \{r_i\}_{i \in \{1, \dots, K_R\}}$

② Interaction



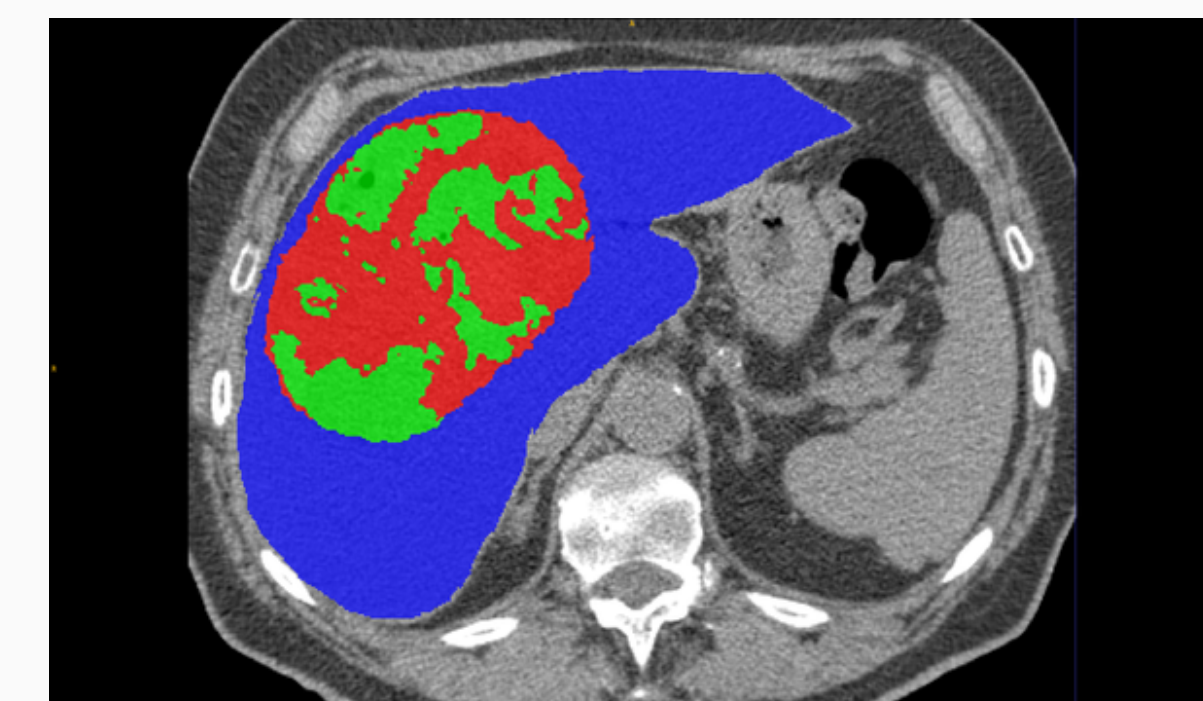
Training 3D supervoxel selection $\mathbf{S} = \{r_j, c(r_j)\}_{j \in \{1, \dots, K_R\}}$

③ Training



Random forest [2] optimized using \mathbf{S} to obtain a voxel/label mapping model

④ Prediction

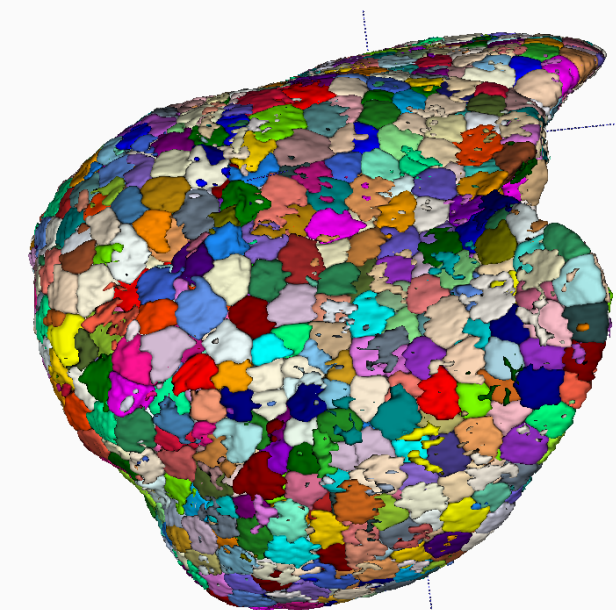


Prediction of label $c(r)$ assigned to each 3D supervoxel $r \in \mathbf{R} \setminus \mathbf{S}$

⑤ TN rate estimation

$$\tau = \frac{\sum_{r_i \in \text{necro}} |r_i|}{\sum_{r_i \in \text{tumor}} |r_i|}$$

From voxels to semantic regions



Random forest performed on 3D supervoxels obtained with SLIC [1]:

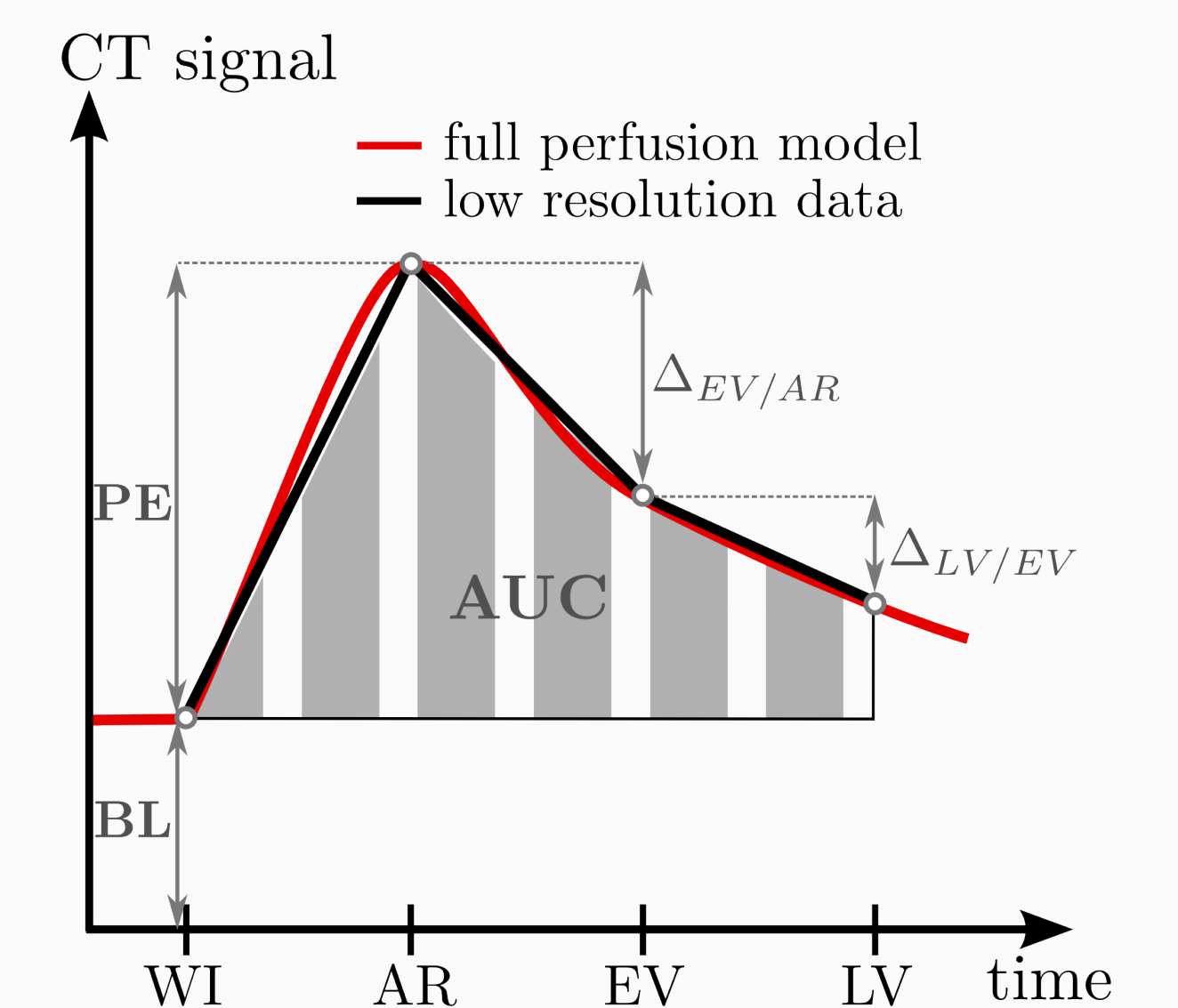
- introduces spatial consistency at a large spatial extent
- reduces interaction efforts: the practitioner has only to label a subset of \mathbf{R} instead of brushing strokes on many voxels

Exploiting multi-phase input data

Multi-phase cluster-wise features assigned to supervoxels:

Related to	Features	Nb
Intensity	mean intensity including BL + std dev.	4 + 4
Gradient	mean gradient magnitude + std dev.	4 + 4
Multi-phase	peak enhancement (PE)	1
	inter-phase diff. $\Delta_{EV/AR}$, $\Delta_{LV/EV}$	2
	area under enhancement curve (AUC)	1

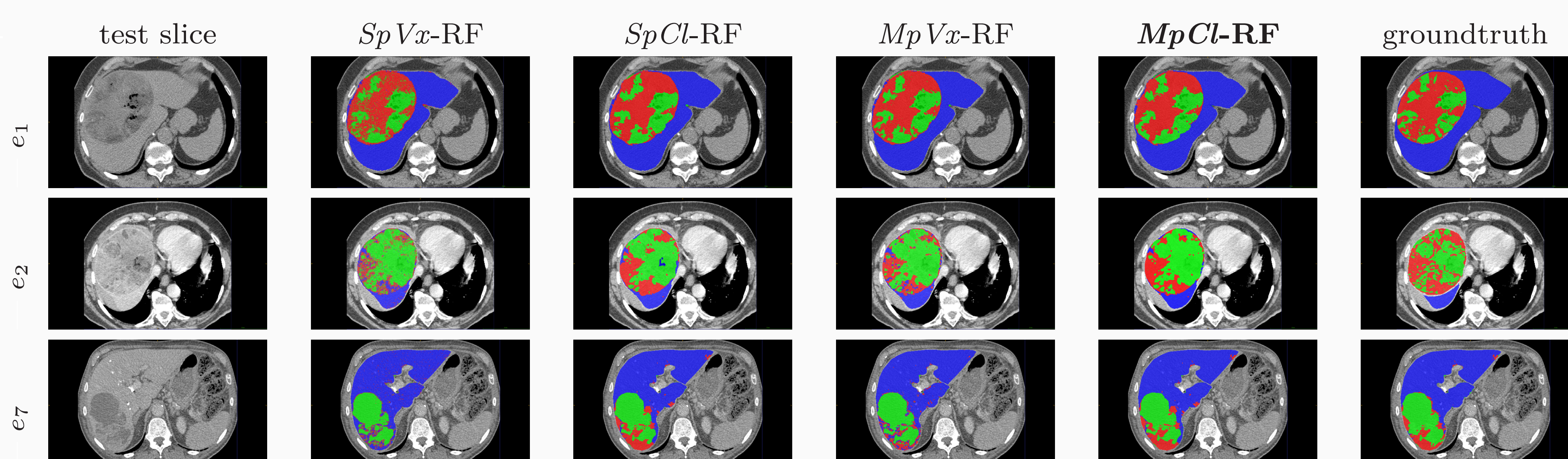
Multi-phase features discriminate supervoxels based on their own arterial enhancement and venous washout



Results

7 examinations with 6 equally reparted 2D axial slices labeled by 4 experts in hepato-digestive surgery whose annotations are fused using STAPLE [3]. We comparatively assess *single-phase voxel-wise* ($SpVx$), *single-phase cluster-wise* ($SpCl$), *multi-phase voxel-wise* ($MpVx$) and the proposed *multi-phase cluster-wise* ($MpCl$) random forest (RF).

methods	$SpVx$ -RF	$SpCl$ -RF	$MpVx$ -RF	$MpCl$ -RF
TN rate error	6.40 ± 2.85	9.13 ± 4.78	6.60 ± 3.32	5.26 ± 3.90
DICE _{activ}	54.3 ± 17.2	65.8 ± 15.3	65.5 ± 12.4	74.4 ± 12.6
DICE _{necro}	65.0 ± 21.6	63.8 ± 25.8	71.8 ± 17.6	71.9 ± 19.5
DICE _{prcm}	80.5 ± 13.1	89.7 ± 4.90	87.4 ± 9.00	93.3 ± 3.08



Results confirm the benefits of exploiting dynamic information at a cluster spatial extent

Further work

- multi-examination learning to make our strategy becoming fully automatic
- longitudinal liver tumor study
- extension to other tumor types, organs and modalities

Acknowledgements

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References

- [1] Radhakrishna A. *et al.*, SLIC superpixels compared to state-of-the-art superpixel methods. *IEEE Transactions on Pattern Analysis and Machine Intelligence*, 34(11):2274–2282, 2012.
- [2] Breiman L. Random Forests. *Machine learning*, 45(1):5–32, 2001.
- [3] Simon K.W. *et al.*, Simultaneous truth and performance level estimation (STAPLE). *IEEE Transactions on Medical Imaging*, 23(7):903–921, 2004.