



Blockwise Classification of Lung Patterns in Unsegmented CT Images

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Summary

- Introduction
- Related Work
- Materials and Methods
 - Dataset
 - Completed Local Binary Pattern (CLBP)
- Experimental Results
- Discussion
- Conclusion and Future Work



Introduction

- Diagnosis of lung diseases
 - Abnormal characteristics in CT scans
 - Information extracted from visual patterns
 - Techniques of image processing can increase the confidence and consistency of diagnosis
- Image classification
 - Image acquisition
 - Feature extraction
 - Classification



Introduction

- Main goal
 - To execute an analysis and quantification of lung disease patterns in High-Resolution CT images
 - To perform a coarse lung segmentation by also classifying body areas outside the lungs
- Initial results
 - Classification of image blocks of: non-lung (e.g. bone, tissue and fat), normal lung tissue, emphysema, ground-glass opacity, fibrosis and micronodules.
 - Completed Local Binary Patterns (CLBP) descriptor
 - Support Vector Machine classifier



Pulmonary patterns



Normal tissue



Emphysema



Ground-glass opacity



Fibrosis

Micronodules



Computed Tomography





Radiography





- Provided by Depeursinge *et al.*¹
- Multimedia collection of cases with interstitial lung diseases (ILDs)
- High-Resolution CT images in DICOM format
- Ground truth
 - Lung masks
 - Annotated ROIs (Regions of Interest) of 17 tissue patterns
 - Normal
 - Emphysema
 - Ground-glass
 - Fibrosis
 - Micronodules



Blue: emphysema Red: fibrosis

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- Extraction of lung tissue blocks
 - Half-overlapping blocks at *x*, *y* of 32x32 pixels
 - At least 75% of the pixels need to belong the ROI



Example of block extraction from annotated ROI (Song et al.²)

² Song, Y., Cai, W., Zhou, Y., and Feng, D. D. (2013). Feature-Based Image Patch Approximation for Lung Tissue Classification. IEEE Trans. Med. Imaging, 32(4):797-808.



- Extraction of non-lung blocks
 - Morphology dilation applied in the lung mask
 - The non-lung ROI is the dilated area which does not belong to the lung mask
 - Non-overlapping blocks at *x*, *y* of 32x32 pixels
 - At least 75% of the pixels need to belong the ROI



Original image

Lung mask

Dilated lung mask

The gray area is the non-lung ROI



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Pattern	Number of blocks		
Non-lung	3000		
Normal tissue	5733		
Emphysema	1017		
Ground-glass	1942		
Fibrosis	2736		
Micronodules	6112		

Summary of the dataset

Examples of the extracted blocks















Micronodules



- Proposed by Guo *et al*.³
- It represents a local region by its center pixel g_c and a local difference sign-magnitude transform d_p .
- This difference is decomposed into sign s_p and magnitude m_p : $s_p = sign(d_p)$ and $m_p = |d_p|$
- The original image is represented by its center gray level, sign and magnitude
- The combination of these operators forms the CLBP feature map

³ Z. Guo, D. Zhang, and D. Zhang, "A completed modeling of local binary pattern operator for texture classification," Image Processing, IEEE Transactions on, vol. 19, no. 6, pp. 1657–1663, June 2010.



Experimental Results

- Testing four configurations for CLBP descriptor
 - $CLBP_{(8,1)}^{u2}$
 - $CLBP_{(8,2)}^{u2}$
 - $CLBP_{(8,1)}^{riu2}$
 - $CLBP_{(8,2)}^{riu2}$
 - where u2 is the uniform pattern and riu2 is the rotation invariant uniform pattern
- Five-fold cross validation method
 - Splitting folds based on patients
- SVM classifier
 - Gaussian kernel and one-vs-one approach



Experimental Results

• Measures:

• sensitivity =
$$\frac{TP}{TP+FN}$$

• precision =
$$\frac{TP}{TP+FP}$$

• specificity =
$$\frac{TN}{TN+FP}$$

•
$$accuracy = \frac{TP+TN}{TP+FP+FN+TN}$$

- TP true positive
- FP false positive
- FN false negative
- TN true negative



Experimental Results

	Sensitivity	Precision	Specificity	Accuracy
$CLBP^{riu2}_{(8,2)}$	78.99	75.95	93	95.55
$CLBP^{riu2}_{(8,1)}$	75.29	70.84	91.76	94.82
$CLBP^{u2}_{(8,2)}$	74.18	70.76	91.39	94.51
<i>CLBP</i> ^{<i>u</i>2} _(8,1)	72.06	67.89	90.69	94.12

Overall results for the blockwise classification (in %)

Confusion matrix for the best CLBP configuration (in %)

	Non-lung	Normal	Emphysema	Ground-glass	Fibrosis	Micronodules
Non-lung	97.5	0.7	0.17	1.37	0.23	0.03
Normal	0.68	79.98	0.78	7.01	0.72	10.83
Emphysema	2.46	19.96	57.13	5.51	10.91	4.03
Ground-glass	3.5	24.46	0.26	39.8	23.43	8.55
Fibrosis	0.58	1.1	1.86	15.1	77.6	3.76
Micronodules	0.02	9.62	0.44	1.42	2.81	85.68



Discussion

- Major confusions:
 - Emphysema and normal
 - Ground-glass and normal
 - Ground glass and fibrosis
- Problems:
 - Small inter-class variation between emphysema and normal, and groundglass and fibrosis
 - Large intra-class variation for emphysema and fibrosis
 - Healthy tissue does not possess a single uniform texture
- Normal tissue, fibrosis and micronodules achieved similar results to the literature
- Non-lung pattern obtained a high sensitivity



Conclusion and Future Work

- Initial results in classification of texture patterns from HRCT of the lung using the CLBP descriptor with a SVM classifier
- Also classifying body areas outside the lungs
- $CLBP_{(8,2)}^{riu2}$ was shown to be the best CLBP configuration
 - Good classification results for non-lung, normal lung, fibrosis and micronodules
 - Multiple misclassifications involving emphysema and ground-glass
- Future work
 - Analysis and quantification of lung diseases patterns
 - Combination of multiple classifiers using *a posteriori* probabilities
 - Lung segmentation based on non-lung pattern



- A. Depeursinge, A. Vargas, A. Platon, A. Geissbuhler, P.-A. Poletti, and H. Mller, "Building a reference multimedia database for interstitial lung diseases," Computerized Medical Imaging and Graphics, vol. 36, no. 3, p. 227238, 2011.
- Z. Guo, D. Zhang, and D. Zhang, "A completed modeling of local binary pattern operator for texture classification," Image Processing, IEEE Transactions on, vol. 19, no. 6, pp. 1657–1663, June 2010.





Thank you!

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