

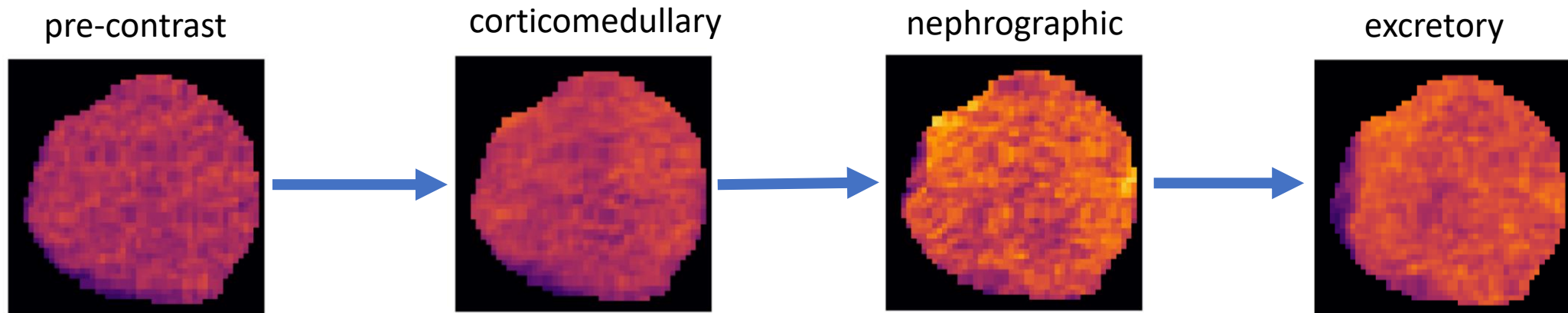
Probabilistic Recovery of Missing Images in Contrast-Enhanced CT

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Contrast-enhanced Computed Tomography

- Most effective and preferred imaging technique for detection and diagnosis of renal cancer.
- Intravenous contrast agent is injected into the subject and then CT images are taken during four distinct time points - resulting in four images:



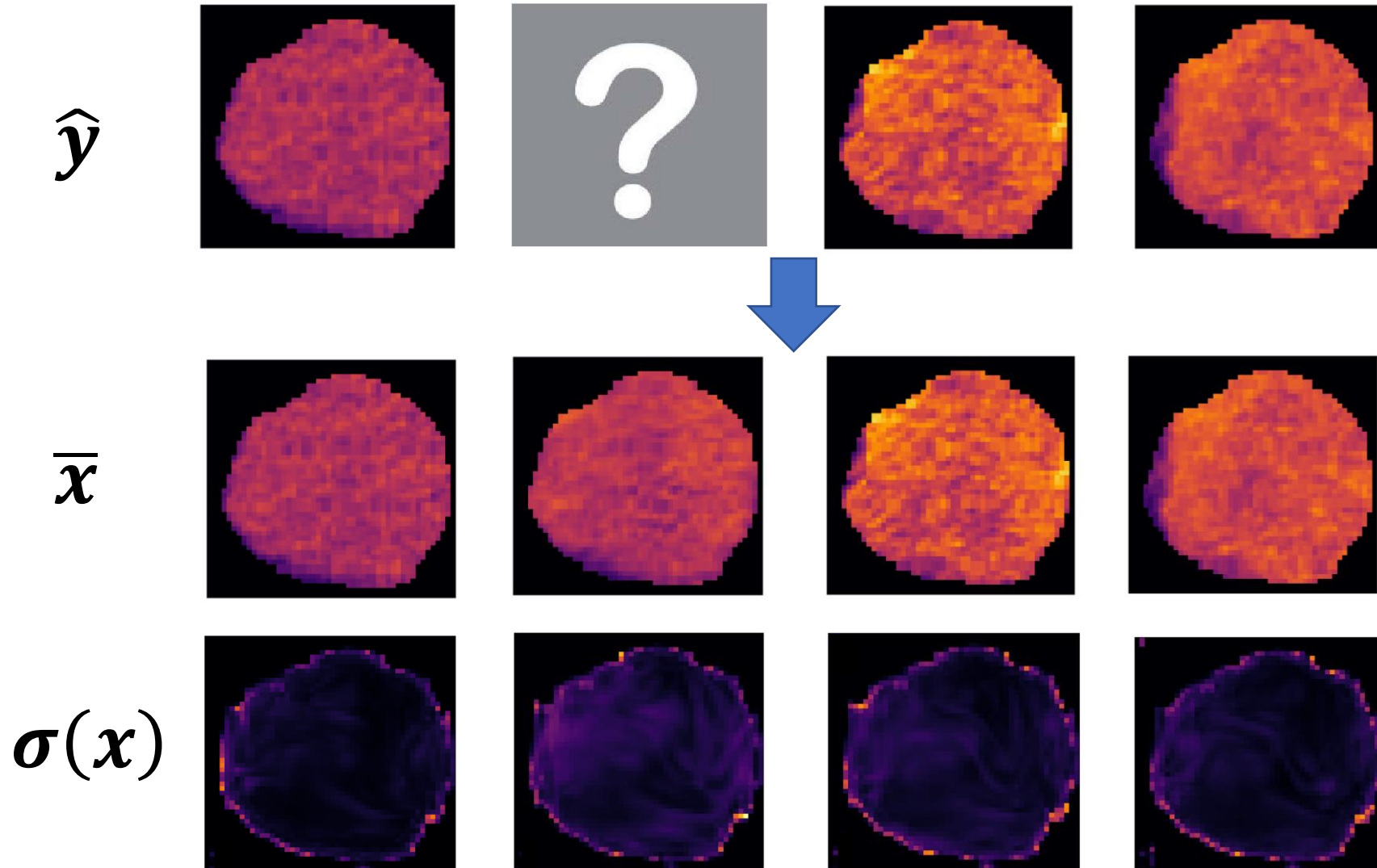
- Pattern of enhancement is an important indicator of malignancy of tumor.

Practical challenges with CECT

- Access to all four images crucial for diagnosis and treatment planning.
- Missing data
 - change in imaging equipment and/or related protocols.
 - deteriorating patient health
 - data management and logistic issues
- Corrupt data
 - low resolution imaging
 - inaccurate imaging technique
 - image-post processing

Goal: Recover missing or corrupt image(s) in a CECT sequence and also quantify corresponding uncertainty.

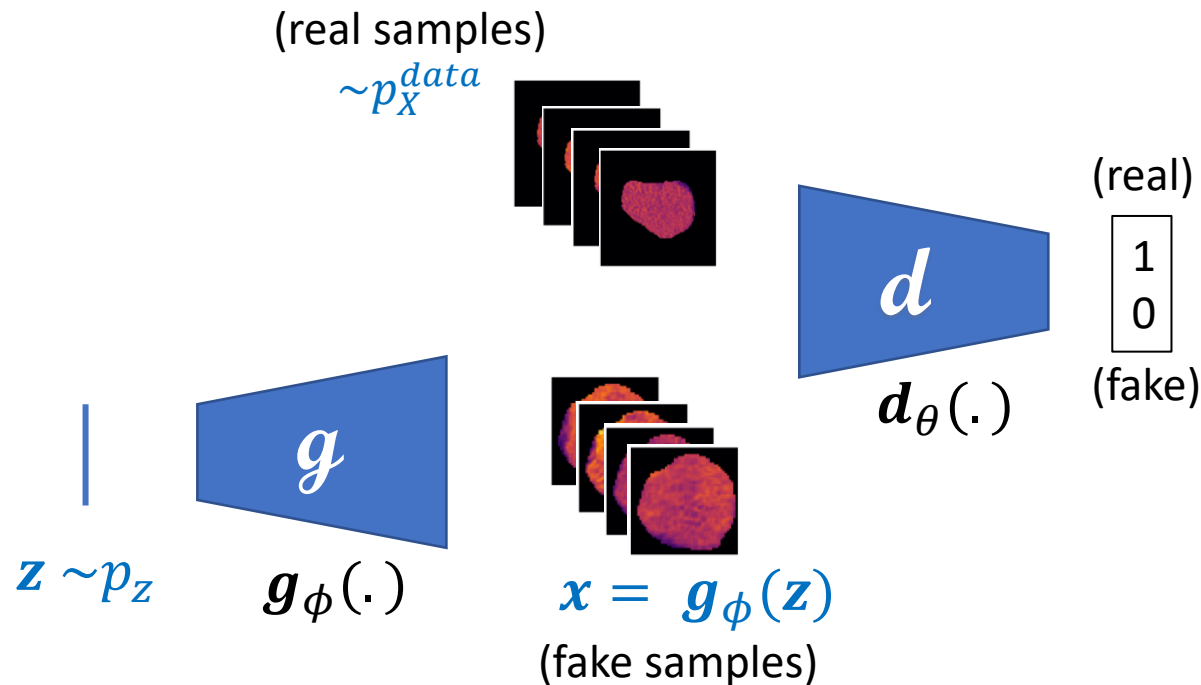
Image recovery



- Complex and High dimensional data
- Presence of fine-scale feature

Probabilistic image imputation

Key idea: Use the distribution learned by GAN as a prior in Bayesian inference and reformulate the posterior inference problem in the low-dimensional latent space of the GAN.



Step 1: Train a GAN using a set \mathcal{S} containing 4-phased CECT images:

$$\mathcal{S} := \{\mathbf{x}_i\}_{i=1}^N$$

where $\mathbf{x}_i \in \mathbb{R}^{n_x \times n_y \times 4}$

$$p^{prior}(\mathbf{x}) = p(\mathbf{g}(\mathbf{z})) \approx p^{data}(\mathbf{x}).$$

Probabilistic image imputation

Step 2: Given a CECT sequence with missing/corrupt image(s), $\hat{\mathbf{y}}$
compute the required statistics w.r.t. posterior $p^{post}(x|\hat{\mathbf{y}})$.



➤ From the weak convergence of GAN¹...

$$\mathbb{E}_{\mathbf{x} \sim p_X^{post}(\mathbf{x}|\hat{\mathbf{y}})} [s(\mathbf{x})] = \mathbb{E}_{\mathbf{z} \sim p_Z^{post}(\mathbf{z}|\hat{\mathbf{y}})} [s(\mathbf{g}(\mathbf{z}))]$$

Probe the posterior (using MCMC) to get desired quantity of interest.

1: Patel et al. (2020): GAN-based priors for quantifying uncertainty.

Learning CECT specific fine-scale features

Adversarial loss alone will not ensure capturing fine-scale features unique to CECT imaging.

$$\begin{aligned} L &= L_{adv} + L_{style} \\ &= \underbrace{\min_{\phi} \max_{\theta} \mathbb{E}_{\mathbf{x} \sim p_X} [d(\mathbf{x}; \theta)] + \mathbb{E}_{\mathbf{z} \sim p_Z} [1 - d(\mathbf{g}(\mathbf{z}; \phi); \theta)]}_{L_{adv}} \\ &+ \underbrace{\sum_{l=1}^{n_{layers}} \|\mathcal{G}^l(\mathbf{x}_{real}) - \mathcal{G}(\mathbf{x}_{fake})\|^2}_{L_{style}} \end{aligned}$$

where, $\mathcal{G}^l(\mathbf{x}) = \mathbf{F}^T(\mathbf{x}; \theta)\mathbf{F}(\mathbf{x}; \theta)$

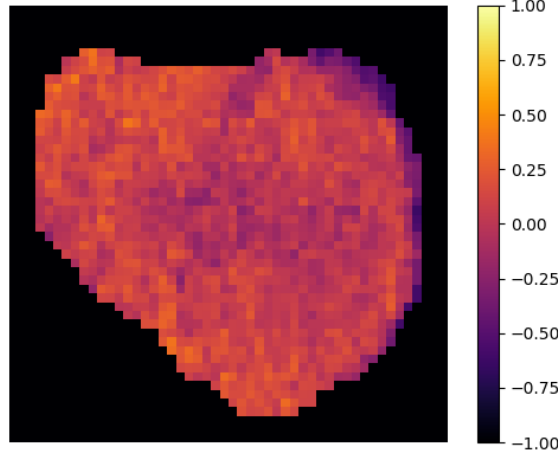
Discriminator performs the dual role of classifier and feature extractor.

Results on patient data

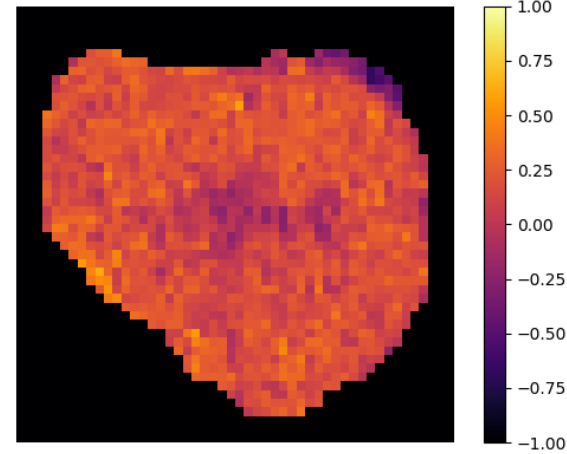
Phase 1



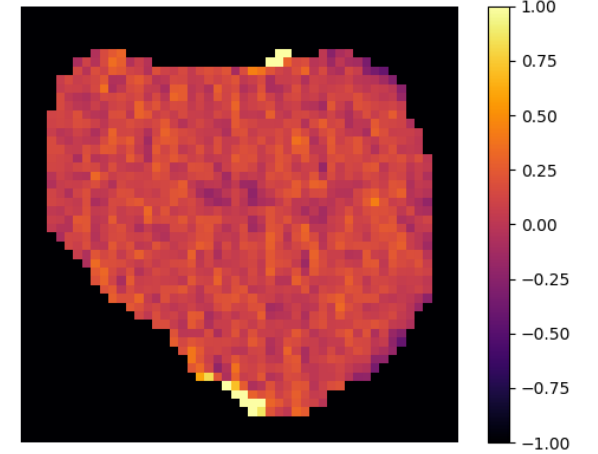
Phase 2



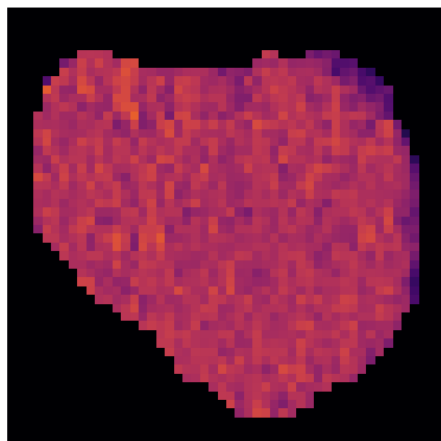
Phase 3



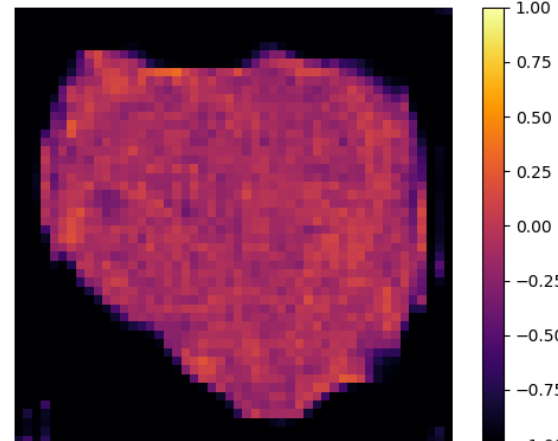
Phase 4



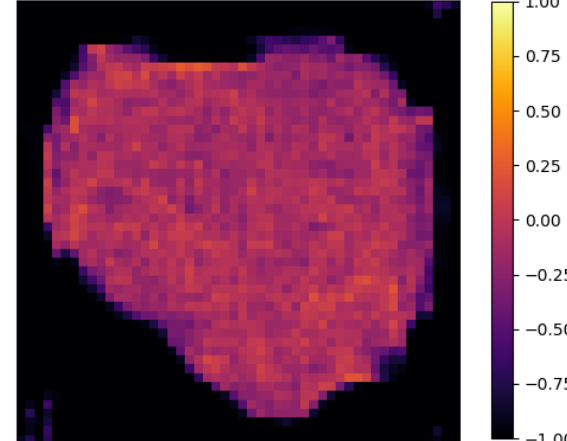
x^{true}



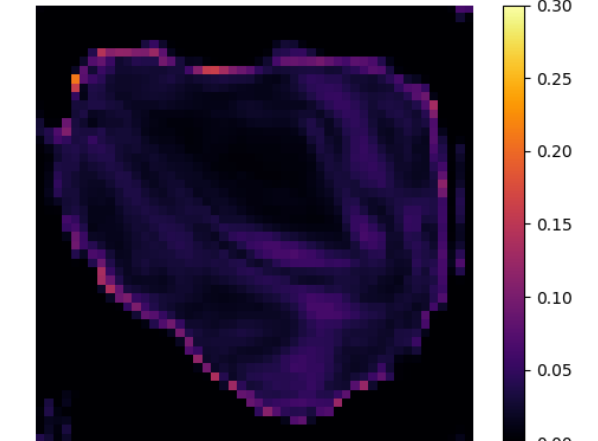
x^{map}



\bar{x}



$\sigma(x)$



Summary

- Algorithm for recovering missing images in CECT sequence with quantified uncertainty estimates;
- Discriminator-driven style loss helps capture fine-scale structure;
- The proposed GAN prior framework can flexibly be extended to variety of medical imaging applications.

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Ming Hsieh Institute - USC and ARO grant W911NF2010050.



THANK
YOU!

