Ain Shams University
Faculty of Computer
& Information Sciences
Computer Science Department



Developing Advanced Algorithms for Medical Image Analysis

A thesis submitted to the Department of Computer Science, Faculty of Computer and Information Sciences, Ain Shams University, in partial fulfillment of the requirements for the degree of Doctor of Philosophy in Computer Science

By:

Salsabil Amin El-Regaily

MSc. in Computer Science,
Faculty of Computer and Information Sciences,
Ain Shams University.
Cairo, Egypt

Supervised By:

Prof. Dr. Mohamed Ismail Roushdy

Dr. Mohamed Hassan Abd El-Aziz

Computer Science Department, Faculty of Computer and Information Sciences,

Ain Shams University

Basic Sciences Department, Faculty of Computer and Information Sciences, Ain Shams University

Dr. Mohammed Abdel-Megeed Salem

Scientific Computing Department, Faculty of Computer and Information Sciences, Ain Shams University. Faculty of Media Engineering & Technology, German University in Cairo (GUC)

Acknowledgments

It is a pleasure to express my deepest gratitude and great appreciation to:

Prof. Dr. Mohamed Ismail Roushdy

Dr. Mohamed Hassan Abd El-Aziz

Dr. Mohammed Abdel-Megeed Salem

For the time and effort they devoted to the supervision of the present work. Their fruitful support, invaluable instructions, continuous guidance, criticism, and encouragement have made the accomplishment of this work possible.

Publications

The work presented in this thesis has been published in:

- El-Regaily, S.A., Salem, M.A., Abdel Aziz, M.H. and Roushdy, M.I. Lung Nodule Segmentation and Detection in Computed Tomography. Eighth International Conference on Intelligent Computing and Information Systems (ICICIS), 2017 Dec 5 (pp. 72-78). IEEE.
- El-Regaily, S.A., Salem, M.A., Abdel Aziz, M.H. and Roushdy, M.I. Survey of Computer-Aided Detection Systems for Lung Cancer in Computed Tomography. Current Medical Imaging Reviews. 2018 Feb 1;14(1):3-18.
- El-Regaily, S.A., Salem, M.A., Abdel Aziz, M.H. and Roushdy, M.I. Multiview Convolutional Neural Network for Lung Nodule False Positive Reduction. Under Review in Expert Systems with Applications, Elsevier
- El-Regaily, S.A., Salem, M.A., Abdel Aziz, M.H. and Roushdy, M.I. Computer-Aided Detection for Lung Cancer using Convolutional Neural Networks.
 Artificial Intelligence Paradigms in Smart Health Informatics Systems. Book
 Chapter Under Review by IGI-Global Publications.

Abstract

Lung cancer represents the leading cause of death for malignancy in the world. Pulmonary nodules are caused by the uncontrollable irregular growth of cells in the lung parenchyma. Detecting these nodules in the lung tissue in an early phase increases the chances of survival for the patient and improves the efficiency of the treatment. Computed Tomography (CT) is one of the most sensitive methods for detecting pulmonary nodules. A thin-section CT scan of the whole thorax generates a large data set and requires radiologists to spend a considerable amount of time interpreting the images. As a means to reduce radiologists' workload, Computer-Aided Detection (CAD) systems may be used. CAD systems help scan digital and highlight conspicuous sections, such as possible diseases, and provide a second opinion to the radiologists.

This thesis proposes a CAD algorithm for detecting lung nodules in CT scans through five main steps: image acquisition, preprocessing, lung segmentation, nodule detection, and false-positive reduction. Preprocessing is implemented using contrast stretching and enhancing. Lung segmentation and nodule detection stages are performed using a combination of region growing, thresholding and morphological operations. Each 3D structure is then subjected to tabular structure elimination to provide nodule candidates. In the false positive reduction stage, some of the basic nodule features are extracted from the training data to set thresholds for a simple rule-based classifier. The final classification is done using a multi-view 2D Convolutional Neural Networks (CNNs) as a powerful tool in the deep learning field. The CNN is built specifically to handle the provided inputs and is customized to provide the best possible outputs without the extra computational complexity that is required when compared to a 3D network Extensive experiments are done on a wide labeled dataset downloaded from the Lung Image Database Consortium (LIDC). The CAD achieved a sensitivity of 85.25%, a specificity of 90.66% and accuracy 89.89 % with an average of 1.57 fps/scan. The results show that the proposed multi-view 2D network is a simple, yet effective algorithm for the false positive reduction problem.

Table of Contents

Publications	III
Abstract	IV
List of Figures	VII
List of Tables	X
List of Algorithms	XI
List of Abbreviations	XII
Chapter 1 Introduction	1
1.1 MOTIVATION	
1.2 BACKGROUND	
1.2.1 Lung Nodules	
1.2.2 Computed Tomography	
1.2.3 Computer-Aided Detection Systems	
1.3 PROBLEM STATEMENT	4
1.4 THESIS OBJECTIVES	
1.5 THESIS CONTRIBUTION	5
1.6 THESIS OUTLINES	5
Chapter 2 Computer-Aided Detection Systems for Lung Cancer in C	. 0 . 0
2.1 INTRODUCTION	
2.2 IMAGE ACQUISITION AND AVAILABLE DATASETS	
2.3 PRE-PROCESSING	
2.4 LUNG SEGMENTATION	
2.4.1 Thresholding	
2.4.2 Region Growing	
2.4.3 Active Shape Models	
2.4.4. Other Techniques	
2.5 NODULE DETECTION	
2.6 FALSE POSITIVE REDUCTION	
2.7 DISCUSSION	
Chapter 3 Deep Learning	39
and Convolutional Neural Networks	30

3.1 INTRODUCTION	39
3.2 DEEP LEARNING VS. MACHINE LEARNING MODELS	
3.2.1 Recurrent Neural Networks (RNNs)	40
3.2.2 Restricted Boltzmann Machines (RBMs)	40
3.2.3 Deep Belief Networks (DBNs)	40
3.2.4 Convolutional Neural Networks (CNNs)	41
3.3 RELATED WORK IN CNNS	45
3.4 DISCUSSION	
Chapter 4 The proposed Computer-Aided Detection System for Lung Nodules in Co	mputed
Tomography	48
4.1 INTRODUCTION	
4.2 METHODOLOGY	
4.2.2 Preprocessing	
4.2.3 Lung Segmentation	
4.2.4 2D and 3D Lung Reconstruction	
4.2.5 Nodule Detection	
4.2.6 False Positive Reduction	
4.3 RESULTS	
4.4 DISCUSSION	58
5.1 INTRODUCTION	60
5.2 DATA	
5.3 CNN MODELS	
5.3.1 MexConv3D	
5.3.2 Caffe	
5.3.3 GoogleNet	
5.4 THE PROPOSED MULTI-VIEW NETWORK	
5.4.1 The Proposed Architecture	
5.4.2 Number and size of kernels	
5.4.3 Output fusion	
5.4.4 Number of views:	
5.4.5 Training, Testing and Validation	
5.5 OF THE MULTI-VIEW CNN WITH THE PROPOSED CAD SYSTEM	
5.6 RESULTS AND DISCUSSION	
5.7 DISCUSSION	
Chapter 6 Conclusion and Future Work	84
6.1 CONCLUSION	
6.2 FUTURE WORK	86
References	97

List of Figures

Figure 1: Lung area imaging techniques: (a) X-Ray chest radiograph, (b) computed tomography	
scan and (c) Positron emission tomography.	2
Figure 2: Example of a nodule detected in a CT scan.	3
Figure 3: Simplified diagram of a typical CAD system for lung nodules	9
Figure 4 : Preprocessing techniques (a) and (e) are the original and the preprocessed images from [26]. (b) and (f) are the original and the preprocessed images from [30]. (c) and (g) are the original and preprocessed images from [32]. (d) and (h) are the original and preprocessed 3D block images from [33].	. 11
Figure 5 : Lung Segmentation based on thresholding and contour correction from [43]. (a) Original CT image, (b) Lung region extracted using thresholding, (c) Final segmented lung mask after hole filling and contour correction.	. 14
Figure 6 : Region growing with a technique similar to [48]. (a) Original CT lung image. (b) Thorax extraction (c) Lung region extraction. (d) Final segmented lung mask	. 16
Figure 7 : RASM approach from [49] (a) Original CT lung image. (b) Conventional lung segmentation approach. Errors are indicated by arrows. (c) Segmentation using RASM	. 17
Figure 8: Lung segmentation methods in CT scans.	. 18
Figure 9 : Example images for each nodule type from [57]: (a) well-circumscribed; (b) juxta-vascular; (c) juxta-pleural; and (d) pleural-tail.	. 19
Figure 10: An overview of nodule detection techniques.	. 21
Figure 11: Ground-glass opacity (GGO)-type lung cancer examples from [67].	. 24
Figure 12 : Support vector machine classification scheme for a simple 2 class problem, where W is the normal vector to the classification hyper-plane.	. 28
Figure 13 : An overview of nodule classification and false positive reduction methods	. 32

Figure 14: Typical architecture of a CNN. 42
Figure 15: Transfer learning in MATLAB from [92]
Figure 16 : Diagram of the proposed CAD system
Figure 17 : The sequence of the proposed CAD system (a) Original slice (b) Result of preprocessing (c) Thorax extraction (d) Lung extraction (e) Reconstructed lungs (f) 2D internal structure (g) 3D Structure extraction (h) Tabular structure elimination. The actual nodule is colored in orange in the bottom right corner of the image
Figure 18 : Example of a CT slice histogram, with threshold value calculated as the average of intensity values of peak 1 and peak2
Figure 19 :Edge artifacts of the structure extraction step after thresholding
Figure 20 :Depth map calculated with Euclidean distance transform in the tabular structure elimination step
Figure 21 :Example for nodule candidates provided by the Rule-based Classifier. (a) The output of the tabular structure elimination step. Notice the actual only nodule in (d). (b), (c) and (e) are false positives
Figure 22 : Examples from the 3D database. Left: a true nodule, Right: a false positive
Figure 23 : Samples from the multi-view training dataset. The first two rows are for actual nodules and the last two rows are for false positives. First column represents the 3D views, second, third and fourth columns display axial, coronal and sagittal views, respectively
Figure 24 : The effect of changing the number of convolutional layers on accuracy, sensitivity and specificity
Figure 25: The effect of changing the number of training epochs on accuracy, sensitivity and specificity
Figure 26: The effect of changing the learning rate value on accuracy, sensitivity and specificity 69
Figure 27 : Different possible views for a 3D nodule. a,b and c represent the three basic 3D views: axial, coronal and sagittal views respectively. (d) to (i) represent the other six possible views for a 3D cube
Figure 28 : The effect of increasing the number of views on accuracy, sensitivity and specificity 72

Figure 29: The effect of increasing the number of views on the running time	72
Figure 30 : The proposed multi-view CNN. The upper stream is for the mid-slice inputs and the lower stream is for the cross-sectional inputs. Outputs are fused together to produce the final decision	73
Figure 31: Time elapsed, loss and accuracy for each mini-batch in network 1 of the axial-view slices inputs with the selected learning parameter.	75
Figure 32 : Time elapsed, loss and accuracy for each mini-batch in network 2 of the coronal-view slices inputs with the selected learning parameter.	75
Figure 33 : Time elapsed, loss and accuracy for each mini-batch in network 3 of the sagittal-view slices inputs with the selected learning parameter.	75
Figure 34: Training progress of network 1 that takes the axial-view slices as inputs. The upper curve represents accuracy vs. number of iterations and the lower curve represents loss vs. the number of iterations.	76
Figure 35 : Training progress of network 2 that takes the coronal-view slices as inputs. The upper curve represents accuracy vs. number of iterations and the lower curve represents loss vs. the number of iterations.	76
Figure 36 : Training progress of network 2 that takes the sagittal-view slices as inputs. The upper curve represents accuracy vs. number of iterations and the lower curve represents loss vs. the number of iterations.	77
Figure 37: ROC curve for the proposed CNN.	82
Figure 38: A comparison between the proposed algorithm and other algorithms in terms of accuracy	82
Figure 39: A comparison between the proposed algorithm and other algorithms in terms of sensitivity	83

List of Tables

Table 1 : Summary of the most five popular datasets for lung cancer CT scans	10
Table 2 : Performance comparison of various methods proposed for nodule detection.	
Studies are ordered by no. of citations and publication year	25
Table 3 : Performance comparison of classification component in CAD systems. Studies	
are ordered by no. of citations and publication year	33
Table 4 :Thresholds of the Rule-based classifier	58
Table 5 : The effect of changing the size of filters in each convolutional layer on	
accuracy, sensitivity and specificity	68
Table 6 : Sensitivity, specificity, accuracy and running time corresponding to the	
network with the highest sensitivity for different number of views in the proposed multi-	
view CNN	71
Table 7: Comparison with other algorithms	79