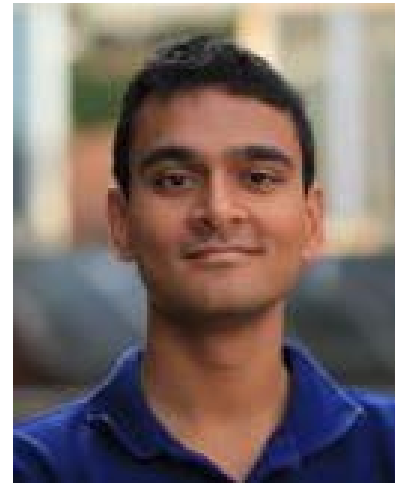


Segmentation and Analysis of Stroke Images

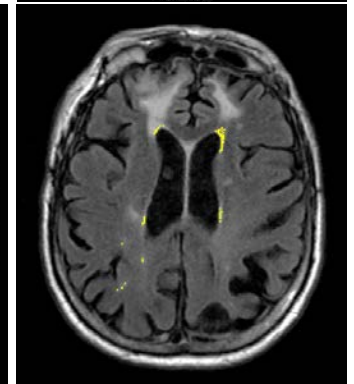
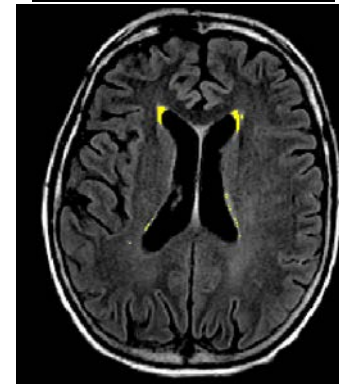
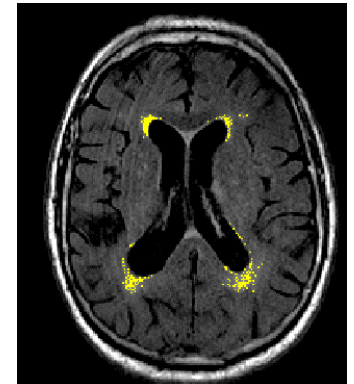
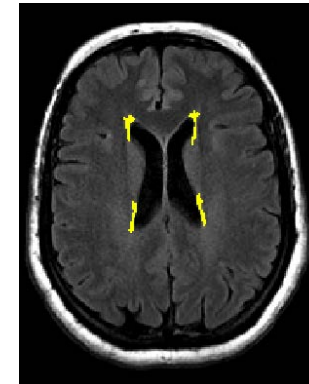
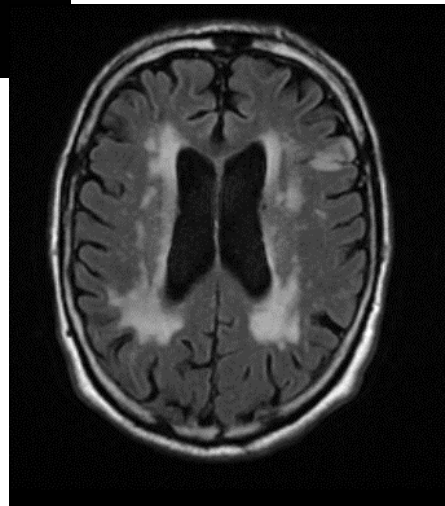
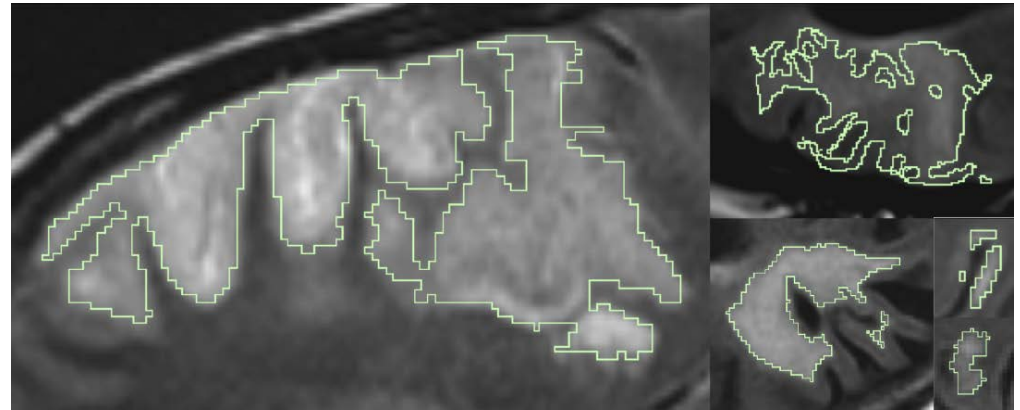
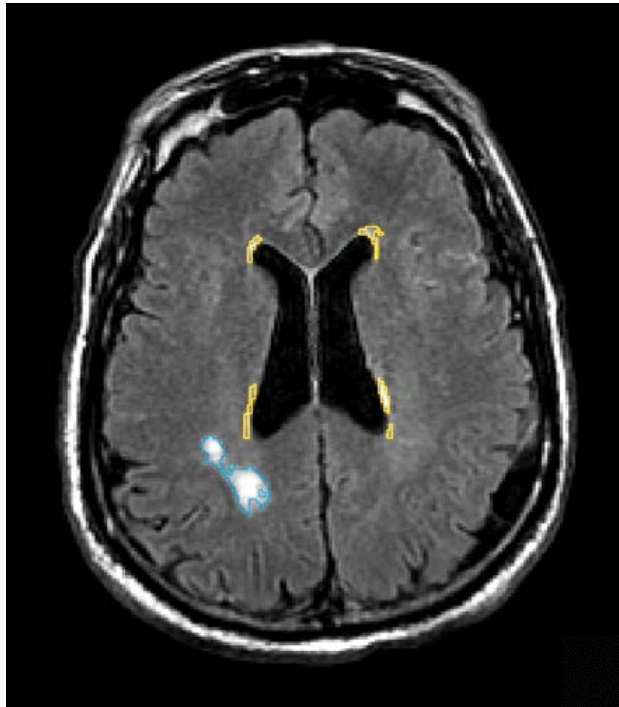
Polina Golland

MIT Computer Science and Artificial Intelligence Laboratory

Joint work with
Adrian Dalca
Ramesh Sridharan
Natalia Rost, MGH



Stroke and Leukoaraiosis



Problem

- Segment white matter hyperintensity in T2-FLAIR MRI
 - Leukoaraiosis vs. chronic stroke
 - Analyze with clinical and genetic information
- What we know
 - Leukoaraiosis occurs roughly symmetrically
 - Both leukoaraiosis and chronic stroke appear hyperintense

Outline

- Our approach
 - Generative model
 - Algorithm
- Results
- Population analysis teaser

Our Approach

- Similar to EM-segmentation
- PCA model on leukoaraiosis segmentation maps
 - Learn from a training set
- If not leukoaraiosis – either stroke or white matter
 - Estimate from the input image

Our Model

- Three tissue classes: **L**eukoaraiosis, **S**troke, **H**ealthy

C_x is a 3-vector with only one 1

- Given the tissue class, intensity is Gaussian:

$$I_x | C_x(c)=1 \sim \mathcal{N}(\mu_c, \sigma_c) \text{ where } c \text{ is one of } \{L, S, H\}$$

- Generative process:

- Sample leukoaraiosis from a prior model
- If not leukoaraiosis, either stroke or healthy
- Make sure it's all “smooth”

Spatial Priors

- Tissue priors

$$\pi_x = [M_x(\alpha) \quad (1 - M_x(\alpha))\beta_x \quad (1 - M_x(\alpha))(1 - \beta_x)]$$

- Spatial prior model on M_x and β_x :

- Leukoaraiosis prior: PCA

$$M_x = M_0 + \sum_k \alpha_k M_k \quad \text{where } \alpha \sim \mathcal{N}(\mu_{shape}, \Sigma_{shape})$$

- Tissue smoothness: Markov Random Field

$$P(C|\alpha, \beta) \sim \prod_c \pi_x^{C(c)} \prod_y \exp(C_x' A C_y)$$

Optimization

- Approximate EM
 - Replace integration over shape parameters α with a weighted projection onto the space of the eigenvectors
- Output:
 - In each voxel, posterior probability for each tissue class
 - Parameters of the model:
 - » shape parameters α
 - » intensity parameters for each class μ, σ
- Iterative algorithm
 - Given the current guess (posterior probabilities)
 - » project onto the PCA space => estimate α
 - » estimate image intensity parameters μ, σ
 - Run mean-field on the MRFs
 - » estimate posterior probabilities

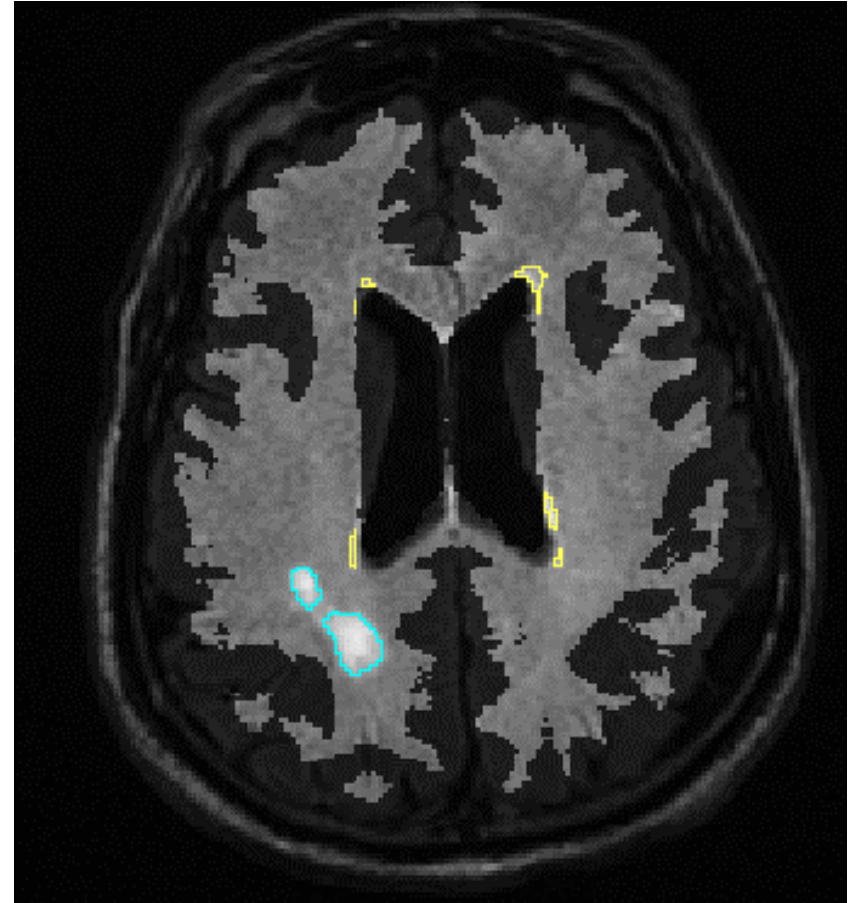
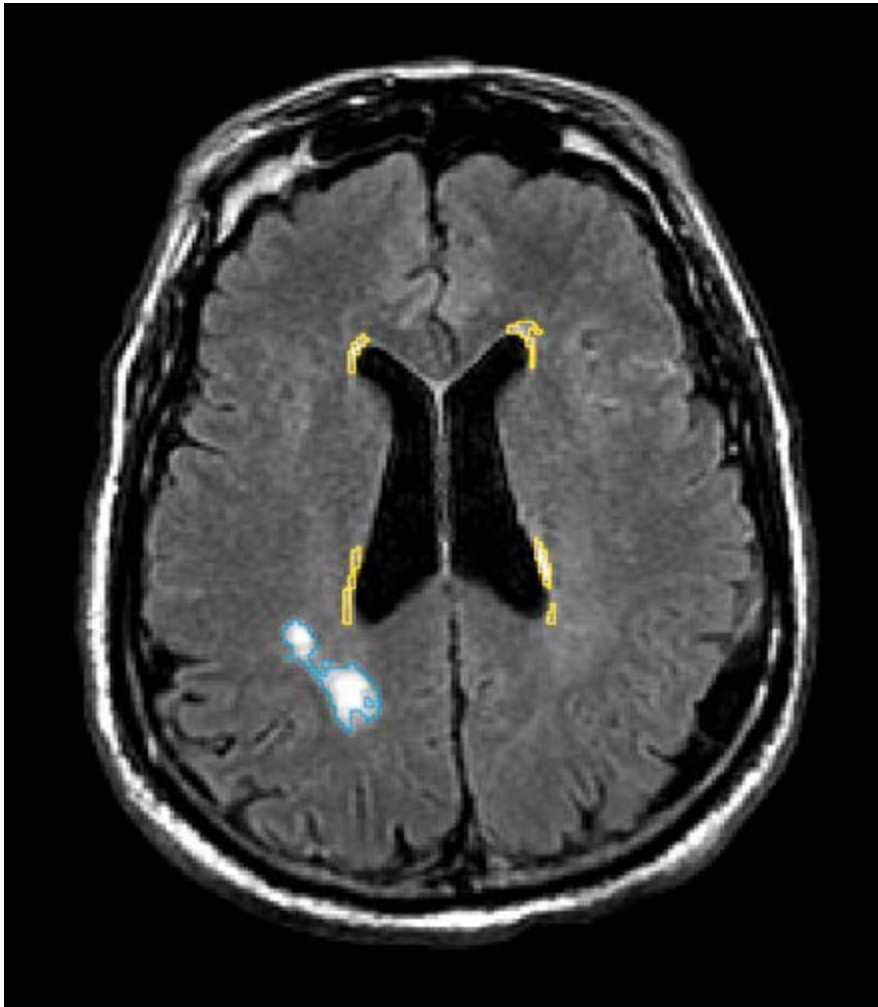
Registration

- Original version:
 - Register T2-FLAIR to T1 anatomical
 - Register T1 to the atlas
- Current version:
 - Make a T2-FLAIR atlas
 - Register T2-FLAIR to T2-FLAIR atlas
- Current and future work:
 - Super-resolution to help registration

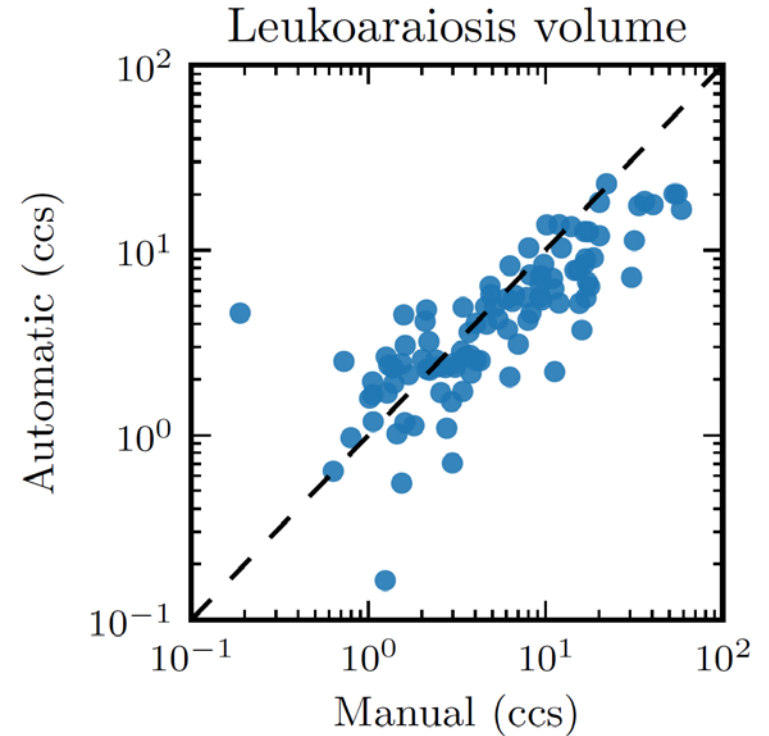
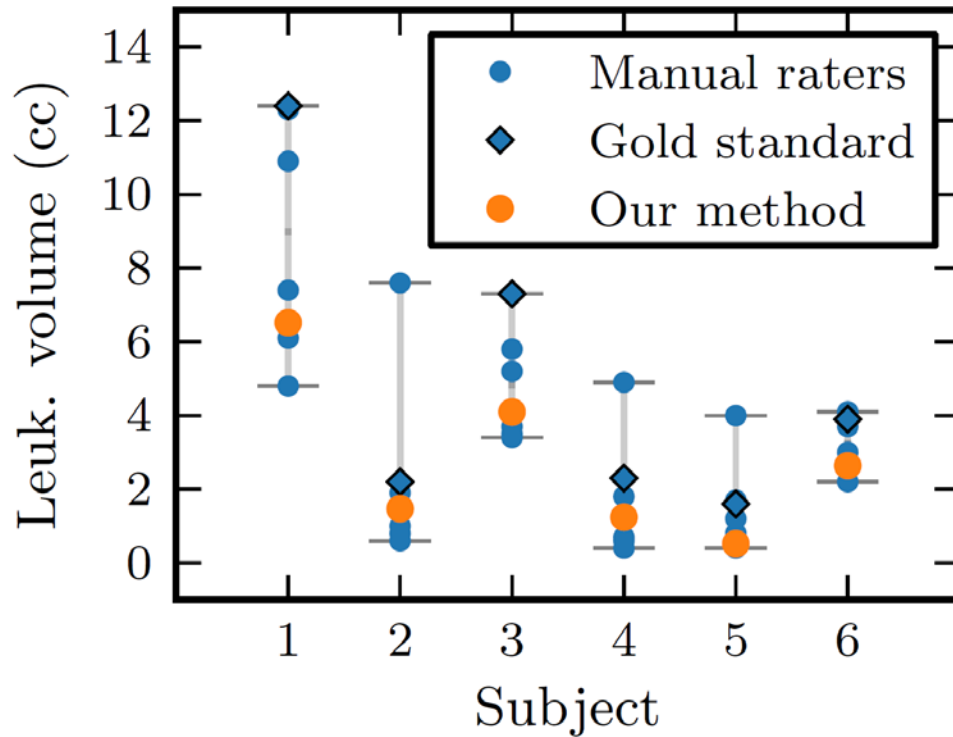
Data

- Close to 1,000 scans of stroke patients
- Training set: 40 of the patients whose scans registered well with the atlas
- Test set: 200 different patients from this data set
- For each patient, we obtain
 - Sagittal T1 scan 1mx1mx7m
 - Axial T2 FLAIR scan 1mx1mx7m
 - Leukoaraiosis was manually segmented in these images, enabling training and validation

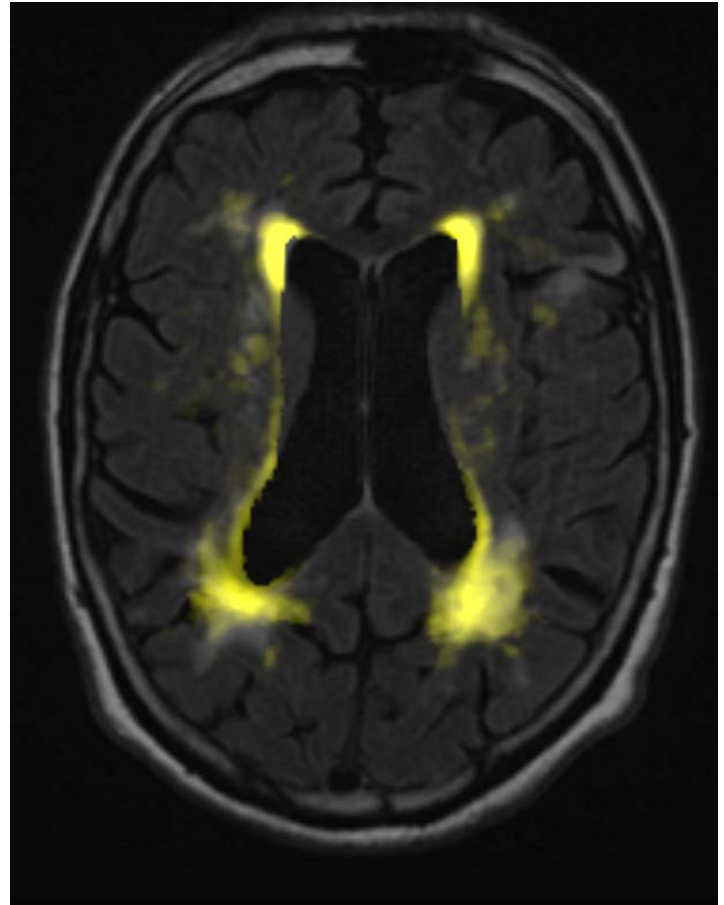
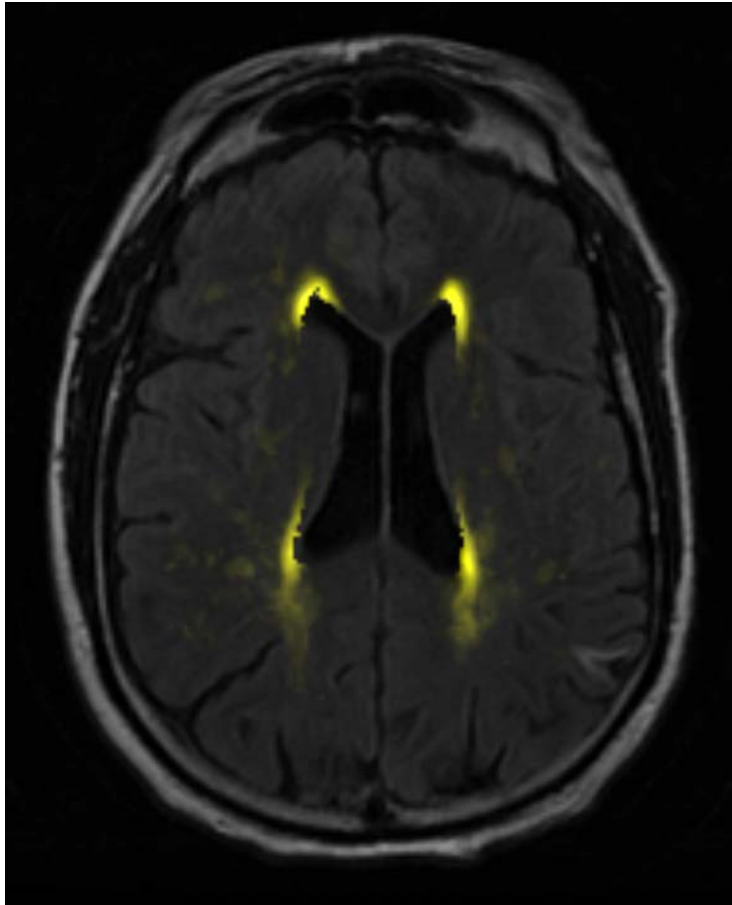
Example Segmentations



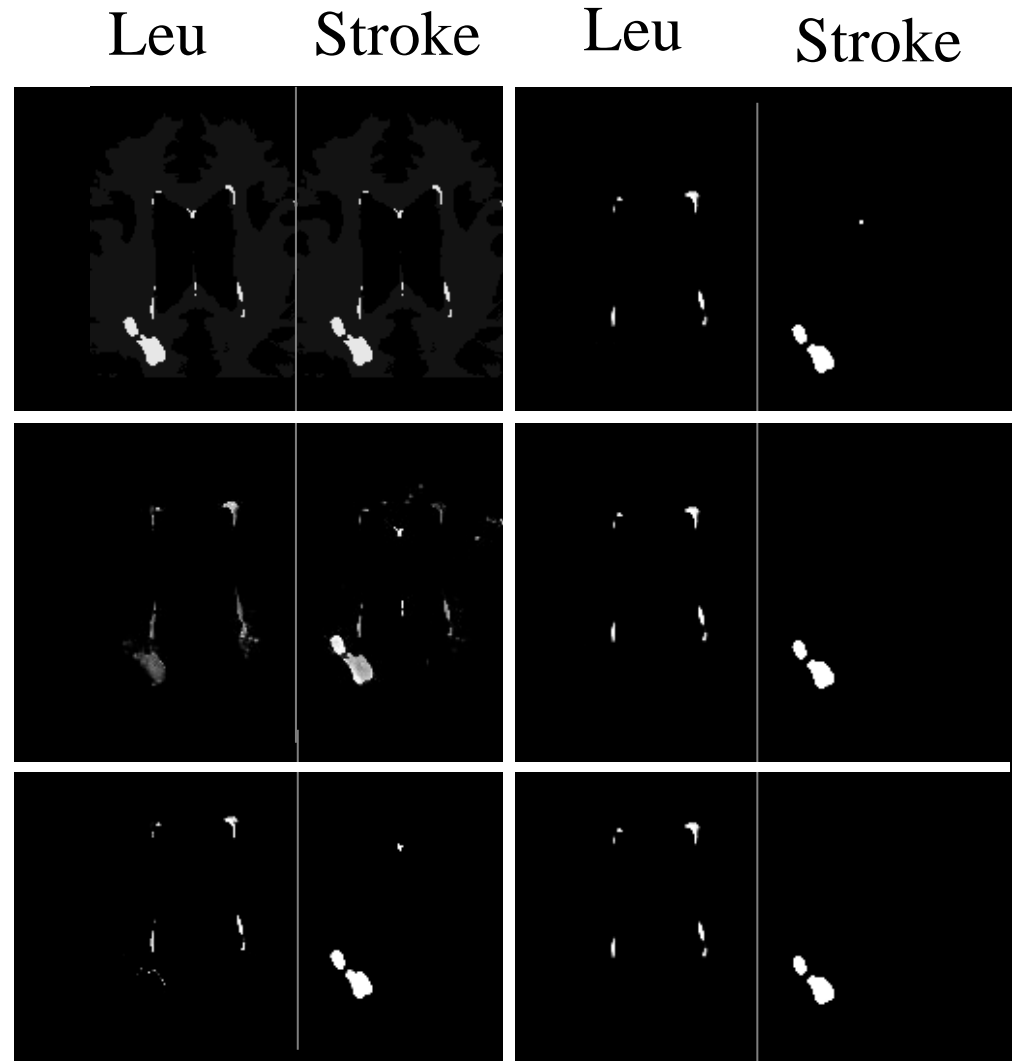
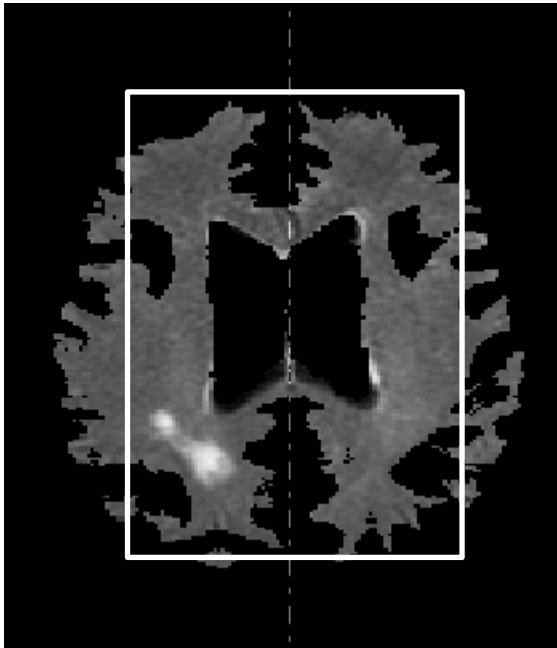
Quantitative Evaluation



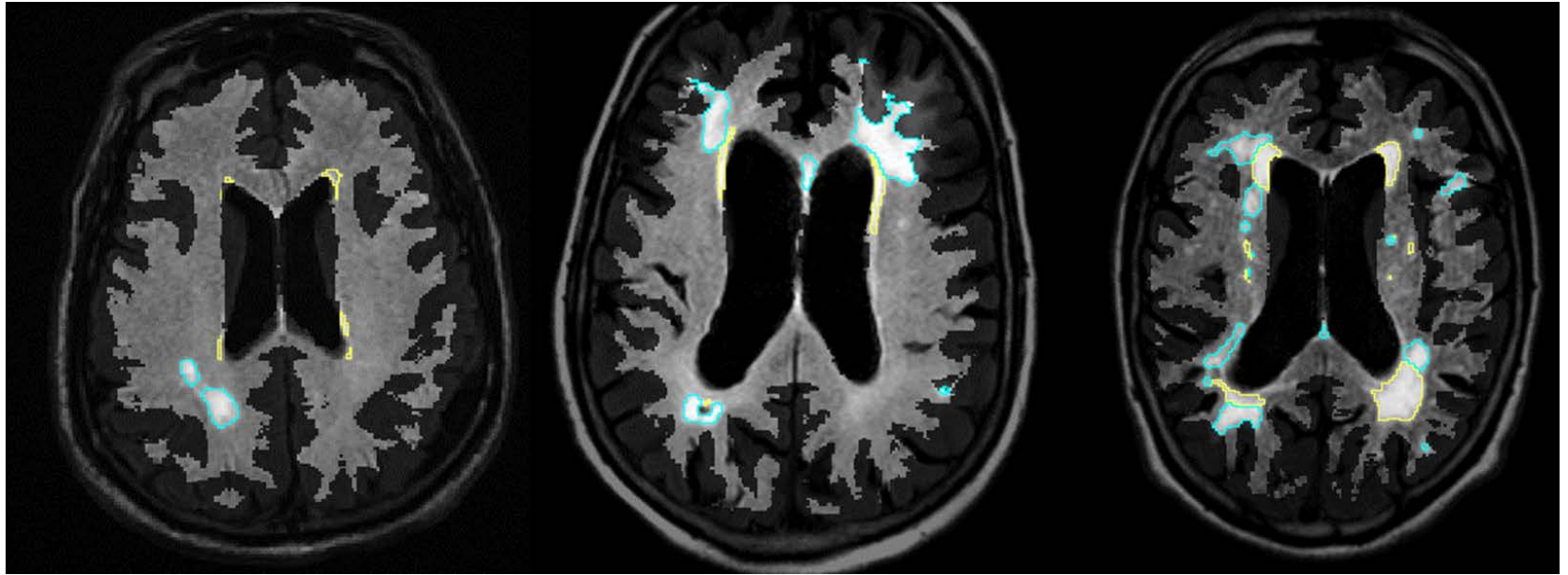
Projections



Iterations

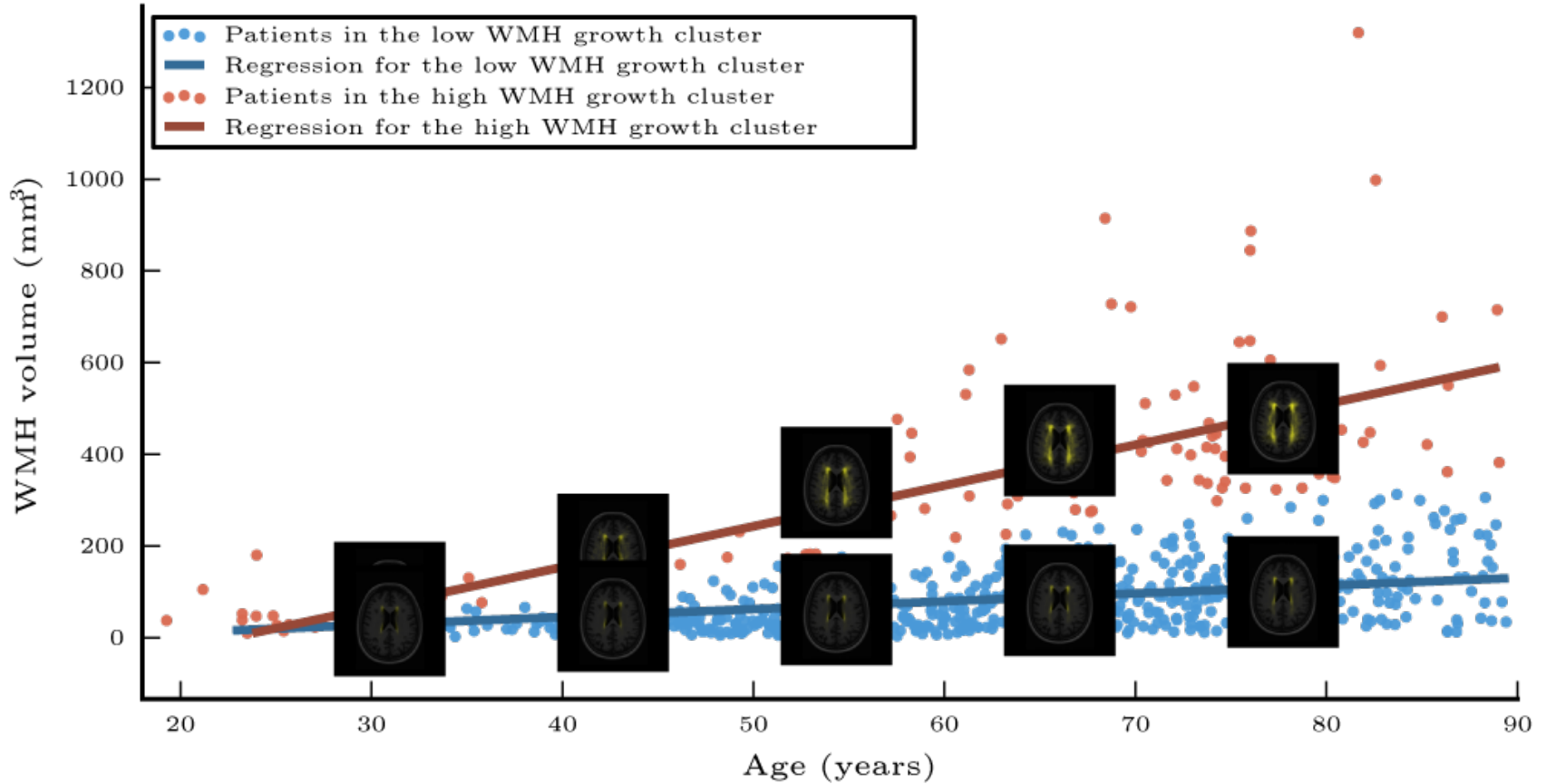


Failure Cases

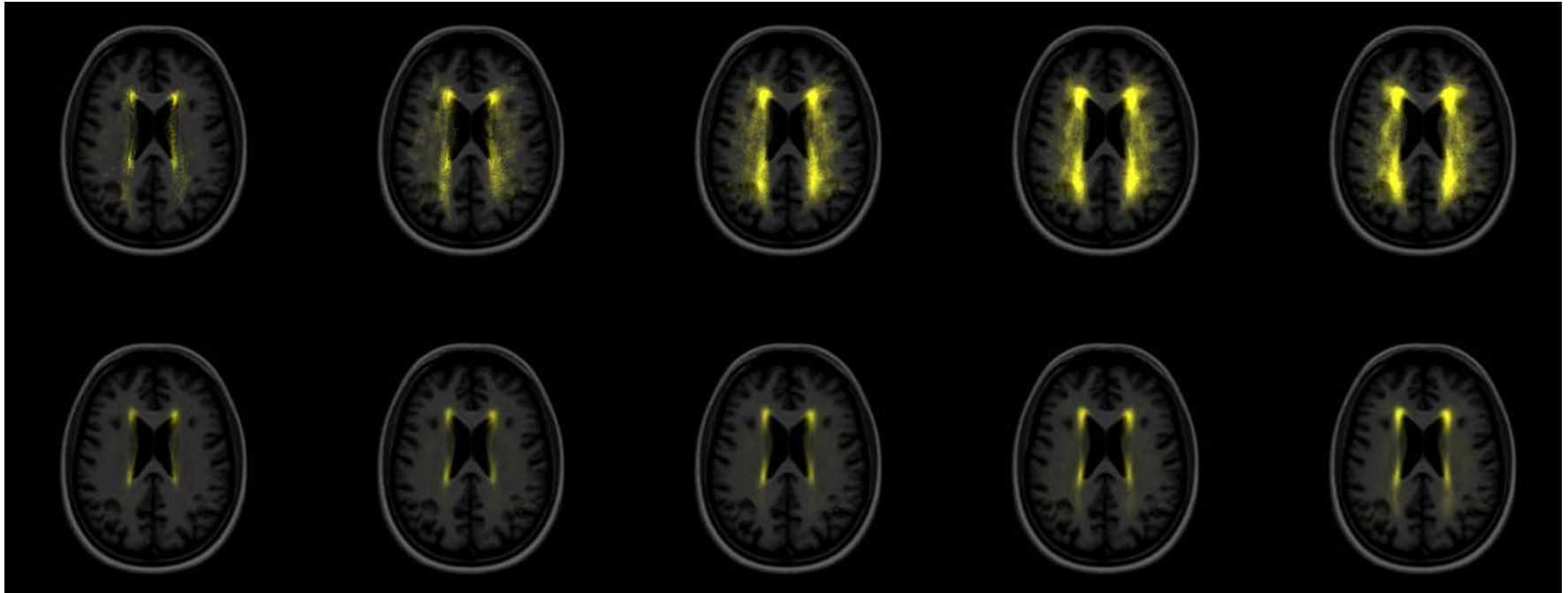


- Problems with registration
- A lot of white matter hyperintensity

Population Analysis



Population Analysis (cont'd)



31y

42.5y

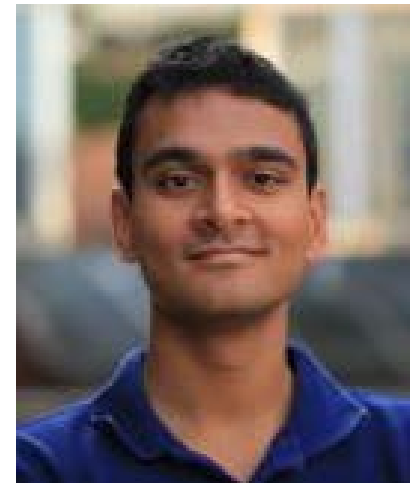
54y

65.5y

77y

Thanks

- Adrian Dalca, Ramesh Sridharan
- Our clinical collaborators at MGH: Natalia Rost
- Support:
 - NAMIC: National Alliance for Medical Image Analysis
 - NAC: Neuroimaging Analysis Center



Conclusions

- Accurate model-based segmentation of white matter hyperintensities
 - PCA model captures leukoariosis distribution properties
 - MRF regularizes stroke shape
 - Intensity model for each class
- Many clinical applications: stroke, MS, aging, etc.
- Current and future research
 - Registration
 - Multi-site analysis
 - Joint analysis with genetics and clinical information