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Analysis of Whole Slide Images of Skin Biopsies

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What is Cancer?

Cancer is a disease in which some of the body's cells grow uncontrollably and spread to other parts of the body.





What is Melanoma?

- Melanoma is the most aggressive type of skin cancer.
- Pathologists look at a skin biopsy slide and determine if its overall structure is normal, abnormal, or malignant.
- Diagnostic errors are much more frequently than in other tissues and can lead to under- and over-diagnosis of cancer.
- Deep learning image analysis methods may improve and complement current diagnostic and prognostic capabilities.



An example of an Invasive Melanoma T1b in M-Path dataset.



Melanoma Diagnosis



Our Work

- > Cellular Level
 - Finding Mitotic Figures
 - Finding Melanocytes
- > Structural Level
 - Segmenting into Epidermis/Dermis and Various Nest Structures
- > Diagnosis Level
 - Diagnosing with a Multi-Resolution Transformer on Raw H&E (hematoxylin and eosin stained) images
 - Diagnosing with the Addition of Structures



Dataset

Our dataset comes from 240 H&E stained slides of skin biopsy images, acquired by the University of Washington School of Medicine in the MPATH study (R01 CA151306, PI Dr. Joann Elmore, now at UCLA).



| Diagnostic Category | #Cases |
|------------------------------------|--------|
| Mildly Dysplastic Nevus | 25 |
| Moderately Dysplastic Nevus | 36 |
| Melanoma in Situ | 60 |
| Invasive Melanoma Stage T1a | 58 |
| Invasive Melanoma Stage \geq T1b | 61 |
| Total | 240 |



Machine learning techniques for mitoses classification

Shima Nofallah et al Computerized Medical Imaging and Graphics 2021

Dataset for Mitosis Detection

Positive samples – class Mitosis

- About 600 mitoses marked by an expert pathologist (Dr. Stevan Knezevich).
- → We cropped each mitosis in a 101*101 patch centered on the dot placing on the mitotic figure.



Example of expert pathologist markings of mitoses (Left) and sampled mitoses (Right)

Dataset

Negative samples – class NonMitosis

Distinguishing mitoses from normal nuclei is a challenge.

Mitosis





Nuclei





Dataset

Negative samples – class NonMitosis

- >We used a feature-based nuclei detector to find nuclei.
- \succ We sampled them as negative cases for our dataset.



Examples of applying the nuclei segmentation on a crop of skin biopsy image (a) original crop (b) nuclei segmentation result. Two mitoses that are present in the original crop are marked with red dots for Visualization.



Method and Model

- We ran two separate experiments on two well-designed CNNs and compared their results:
 - Efficient Spatial Pyramid of Dilated Convolutions (ESPNet) [13]
 - A light model developed and published by a member of our group.
 - Densely Connected Convolutional Networks (DenseNet161) [14]
 - One of the well-known model in Deep Learning literature.

Results

Evaluation results of ESPNet and DenseNet161 on Melanoma

| Metrics | ESPNet | DenseNet |
|---------------|----------|------------|
| Accuracy | 0.984 | 0.988 |
| Precision | 0.961 | 0.984 |
| Recall | 0.976 | 0.968 |
| F1 Score | 0.968 | 0.976 |
| Sensitivity | 0.976 | 0.968 |
| Specificity | 0.987 | 0.995 |
| FP, FN | 5,3 | 2, 4 |
| TP, TN | 122, 370 | 121,373 |
| Training time | 35m & 6s | 106m & 32s |

VSGD-Net: Virtual Staining Guided Melanocyte Detection on Histopathological Images

Kechun Liu et al Submitted to WACV 2023

How to Detect Melanocytes

> Sox10 staining can highlight melanocytes, but it's not a routine procedure due to its high cost.



(a) H&E Staining



(b) Sox10 Staining – melanocytes are red

(c) Crop from Sox10



> Can we automatically **detect melanocytes** on **H&E** images?



- 1. Address the limitations:
 - -- Visual similarity of melanocytes to other cells in H&E images
 - -- High cost of Sox10 staining
- 2. Reduce the burden on pathologists
- 3. Aid in melanoma diagnosis in the future

Dataset for Melanocyte Detection, including both H&E and Sox10 Staining

- > Our dataset consists of skin tissues of 15 cases from a private dermatopathology lab, including 3 cases for each MPATH diagnostic category¹ [8].
- > We stain each glass slide with H&E first, then de-stain and re-stain the same glass slide in Sox10.
- > Each skin tissue is cut into multiple (4-6) thin slices for microscopic examination, resulting in **75 slices** at 20x magnification.



¹ Class 1-5: Benign mildly atypical nevi, Moderate dysplastic nevi, Melanoma in situ, Invasive melanoma T1a, and Invasive melanoma T1b.

Dataset - Preprocessing



- First, we register raw Sox10 images (b) into aligned Sox10 images (c) using template
 H&E images (a) with the Histokat software [1].
- Then, we apply a Random Forest classifier to classify pixels into melanocyte or non-melanocyte.
- At last, the pretrained NuSeT [2] separates touching nuclei and refine the masks.
- 1. Lotz, J., Weiss, N., van der Laak, J., StefanHeldmann: High-resolution Image Registration of Consecutive and Re-stained Sections in Histopathology. arXiv:2106.13150 [cs, eess] (Jun 2021)
- Yang, L., Ghosh, R.P., Franklin, J.M., Chen, S., You, C., Narayan, R.R., Melcher, M.L., Liphardt, J.T.: NuSeT: A deep learning tool for reliably separating and analyzing crowded cells. PLOS Computational Biology 16(9), e1008193 (Sep 2020), publisher: Public Library of Science

Dataset

> To fit images into memory as well as keep adequate information, we crop the registered paired images into 256x256 patches with 10x magnification and exclude the background patches, leaving 25,314 patches to use.

| Sub-dataset | From ? cases | # Patches |
|-------------|--------------|-----------|
| Train | 10 cases | 14,630 |
| Validation | | 1,032 |
| Test | 5 cases | 9,652 |





Main Results

| Method | Precision | Recall | F_1 | Jaccard |
|-----------------------------------|-----------|--------|-------|---------|
| RLS $\boxed{16}$ | 0.443 | 0.570 | 0.499 | 0.332 |
| Nuclei Classification | 0.693 | 0.506 | 0.585 | 0.413 |
| Mask R-CNN [7] (w/o image resize) | 0.698 | 0.500 | 0.583 | 0.411 |
| Mask R-CNN [7] (w image resize) | 0.735 | 0.514 | 0.605 | 0.434 |
| U-Net [21] | 0.630 | 0.639 | 0.635 | 0.465 |
| StarDist[22] | 0.745 | 0.426 | 0.542 | 0.372 |
| HoverNet 6 | 0.729 | 0.499 | 0.592 | 0.421 |
| CHR-Net 3 | 0.607 | 0.688 | 0.645 | 0.476 |
| Ours (w Pix2PixHD [27] generator) | 0.663 | 0.645 | 0.654 | 0.486 |
| Ours | 0.623 | 0.733 | 0.674 | 0.508 |

Table 1: Results of different methods.



Segmenting Skin Biopsy Images with Coarse and Sparse Annotations using U-Net

Shima Nofallah et al. Journal of Digital Imaging 2022

Dataset for Structure Detection (Rough Semantic Segmentation)

- We obtained coarse and sparse annotations only on the ROI (region of interest) images by an expert pathologist (Dr. Mojgan Mokhtari).
- Not only are the annotations not on the full WSI, but they are also sparse within the annotated ROI.
- Moreover, the annotations are coarse, i.e., they are not pixellevel accurate.











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Method and Model

Two stage method: first big tissue structures, then smaller tissue structures.

BG=Background, COR=Stratum Corneum, DE=Dermis, EP=Epidermis, UL=Unlabeled, DMN=Dermal Nests, EPN= Epidermal Nests.



Results

> Evaluation of the segmentation model on **ROI** testing set.

| Segmentation stage | Dice score | IoU |
|--------------------------------|------------|-------|
| Stage 1 (all tissues) | 0.942 | 0.906 |
| Stage 2-Dermis (DMN) | 0.558 | 0.638 |
| Stage 2-Epidermis (EPN) | 0.332 | 0.558 |

$$Dice = \frac{2 \times TP}{(TP + FP) + (TP + FN)} \qquad IoU = \frac{TP}{TP + FN + FP}$$



Some Results - ROI testing set





UNIVERSITY of WASHINGTON

Results - Generating WSI Segmentation Masks









Subjective Assessment with Pathologists

Qualitatively evaluation the WSI segmentation, with these questions:

- Q1: How much of the tissue/area that is present in the corresponding WSI has been correctly identified by the model? Rate Low, Medium, or High.
- Q2: How much of the label identified by the model is the correct tissue/area? Rate Low, Medium, or High.



Scale-Aware Transformers for Diagnosing Melanocytic Lesions

Wenjun Wu et al. IEEE Access 2021

Diagnosing Whole Slide Images with Transformers



Difficulties in diagnosis

Mixed normal and cancerous tissue



Difficulties in learning to diagnose

Mixed normal and cancerous tissue

Feature is dependent on resolution



Dataset Problems

Invasive T1a Skin Biopsy Image (or Class 3)



Key Ideas

- Self-attention-based framework for classifying WSIs at multiple input scales
- A soft label assignment method to reduce ambiguities



Scale-Aware Transformers for Diagnosing Melanocytic Lesions



Soft labels

Tissues in each class C are represented by a mean singular value vector for that class obtained from tissue slices WITH ROIs.

For slices with no ROI, the dot product of its SVD vector is taken with the mean vector from each class.



Soft labels

Invasive T1a Skin Biopsy Image (or Class 3)



| Hard Label (one-hot encoding) | | | | | | |
|-------------------------------|---|---|---|---|--|--|
| TS 1 | 0 | 0 | 1 | 0 | | |
| TS 2 | 0 | 0 | 1 | 0 | | |
| TS 3 | 0 | 0 | 1 | 0 | | |

| Со | Constrained label smoothing | | | | | | | |
|------|-----------------------------|-----|---|---|--|--|--|--|
| TS 1 | 0.5 | 0.5 | 0 | 0 | | | | |
| TS 2 | 0 | 0 | 1 | 0 | | | | |
| TS 3 | 0.5 | 0.5 | 0 | 0 | | | | |

| Label smoothing (smoothing=0.1) | | | | | | |
|---------------------------------|-------|-------|-----|-------|--|--|
| TS 1 | 0.033 | 0.033 | 0.9 | 0.033 | | |
| TS 2 | 0.033 | 0.033 | 0.9 | 0.033 | | |
| TS 3 | 0.033 | 0.033 | 0.9 | 0.033 | | |

| Soft labels (ours) | | | | | | | |
|--------------------|------|------|---|---|--|--|--|
| TS 1 | 0.54 | 0.46 | 0 | 0 | | | |
| TS 2 | 0 | 0 0 | | 0 | | | |
| TS 3 | 0.28 | 0.72 | 0 | 0 | | | |

Experimental Result: baseline methods

| Row # | Method | Accuracy | F1 | Sensitivity | Specificity | AUC |
|------------|----------------------------|----------|------|-------------|-------------|------|
| R 1 | Patch-based (SSC) | 0.35 | 0.35 | 0.35 | 0.79 | 0.67 |
| R2 | Patch-based (MSC) | 0.40 | 0.40 | 0.40 | 0.80 | 0.68 |
| R3 | Penultimate-weighted (SSC) | 0.44 | 0.44 | 0.44 | 0.81 | 0.67 |
| R4 | Hypercolumn-weighted (SSC) | 0.43 | 0.43 | 0.43 | 0.43 | 0.67 |
| R5 | Streaming CNN (SSC) | 0.32 | 0.32 | 0.32 | 0.77 | 0.58 |
| R 6 | ChikonMIL (SSC) | 0.56 | 0.56 | 0.56 | 0.85 | 0.74 |
| R 7 | MS-DA-MIL (SSC) | 0.49 | 0.49 | 0.49 | 0.83 | 0.68 |
| R 8 | MS-DA-MIL (MSC*) | 0.58 | 0.58 | 0.58 | 0.86 | 0.75 |
| R9 | ScAtNet (SSC) | 0.60 | 0.60 | 0.60 | 0.87 | 0.77 |
| R10 | ScAtNet (MSC) | 0.64 | 0.64 | 0.64 | 0.88 | 0.79 |

TABLE 2: Comparison of overall performance with state-of-the-art WSI classification methods across different metrics on the test set. Here, SSC denotes single input scale ($10\times$). MSC denotes multiple input scales ($7.5\times$, $10\times$, $12.5\times$). MSC* denotes multiple input scales ($10\times$, $20\times$)

Experimental Result: soft label

| Method | Accuracy | Specificity | AUC |
|-----------------------------------|----------|-------------|------|
| Hard labels | 0.50 | 0.83 | 0.73 |
| Label smoothing | 0.50 | 0.83 | 0.71 |
| Constrained label smoothing | 0.56 | 0.85 | 0.77 |
| Soft labels (Ours; Section III-C) | 0.60 | 0.87 | 0.77 |

Comparison of the performance of different labeling methods.

Experimental Result: pathologists performance Comparisonto 187 practicing pathologists in a study

| Diagnostic | Accu | uracy | F1 | | Sens | Sensitivity | | Specificity | | |
|----------------------------|------------------------------|------------------------------|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|------------------------------|--|
| Category | PG | Ours | PG | Ours | PG | Ours | | PG | Ours | |
| MMD MIS pT1a pT1b | 0.92 0.46 0.51 0.72 | 0.79 0.40 0.65 0.77 | 0.71 0.49 0.62 0.72 | 0.75 0.44 0.63 0.74 | 0.92 0.46 0.51 0.78 | 0.79 0.40 0.65 0.77 | | 0.76 0.85 0.95 0.97 | 0.89 0.84 0.84 0.92 | |
| Overall | 0.65 | 0.64 | 0.65 | 0.64 | 0.65 | 0.64 | | 0.88 | 0.88 | |

Comparison of ScAtNet with pathologists' (PG) performance.

Current Work

- Using the segmentation labels to boost the performance of the transformer classifiers to perform diagnosis
- Using the size and shape pattern of the melanocytes to improve diagnosis
- Teaching transformers which patches are most important due to their content

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