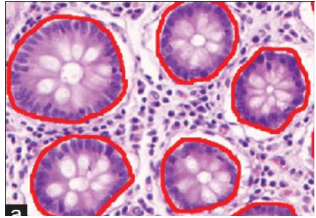


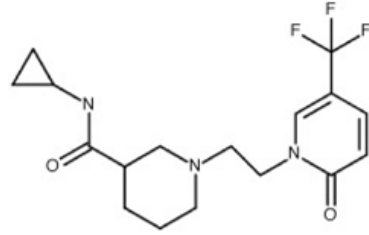
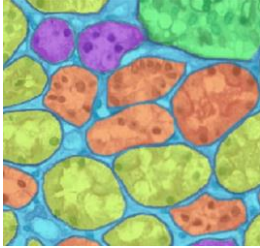
Deep learning for AI-based diagnosis and treatment planning in medicine

A Tack, K Zeigeler, G Armbrrecht, K-G Hermann, S Zachow

AI-based diagnosis and treatment planning



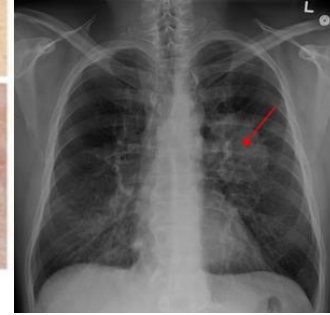
Pathology



Drug discovery



Oncology



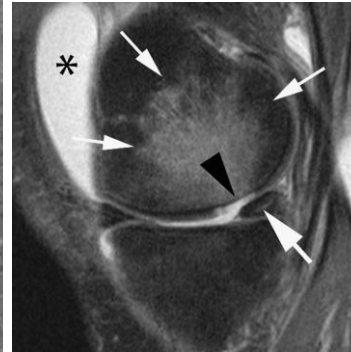
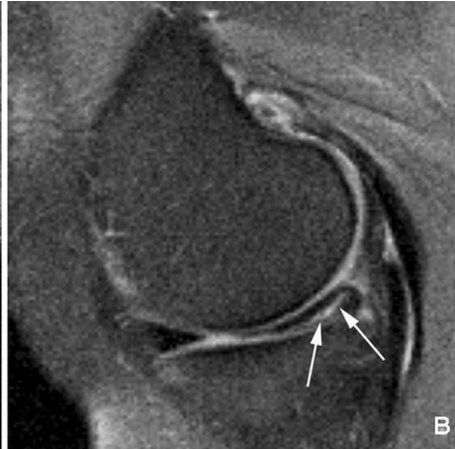
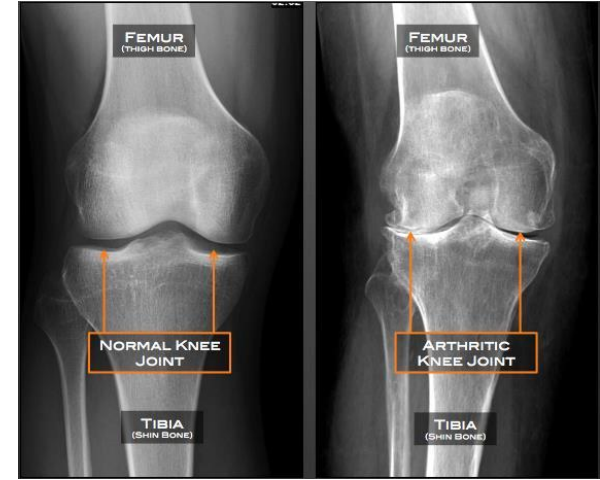
Omics



AI-based diagnosis and treatment planning



Our field of research:
**Computer-aided
diagnosis and treatment
planning for
Knee Osteoarthritis (OA)**





Cohort Studies for Investigation of Osteoarthritis



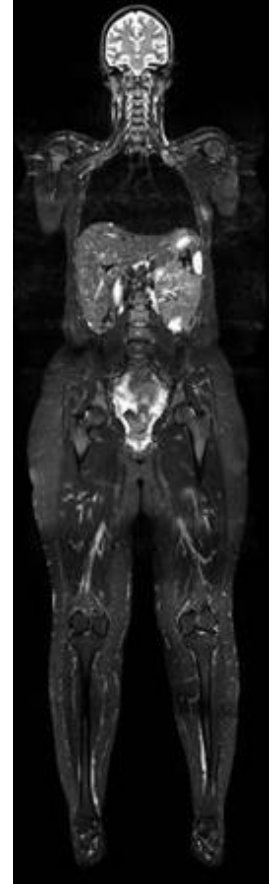
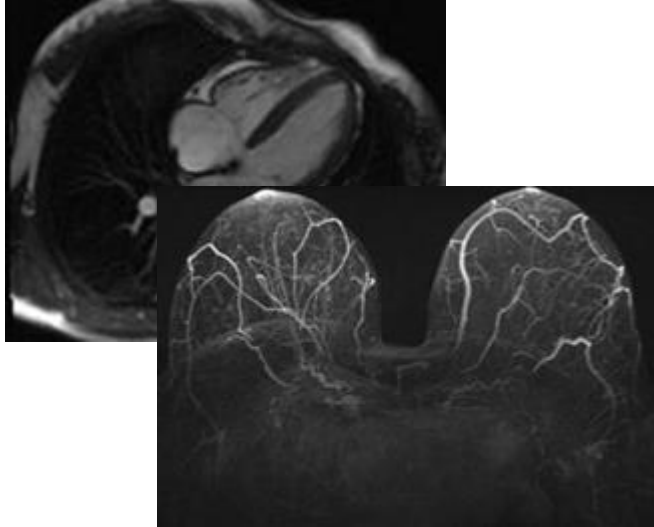


Study of Health in Pomerania (SHIP)

From 1997-today
≈ 2,000 subjects,
2 time points,

Multiple MRI sequences,
serum/urine data, a lot of additional
information

Anatomies: whole body, head, neck,
thorax, pelvis, spine, ...

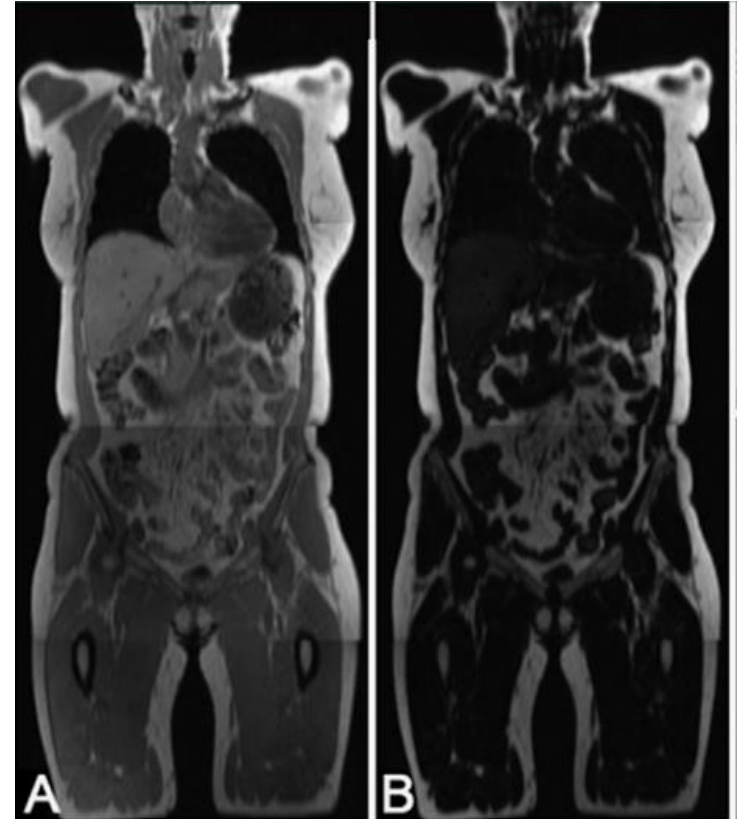
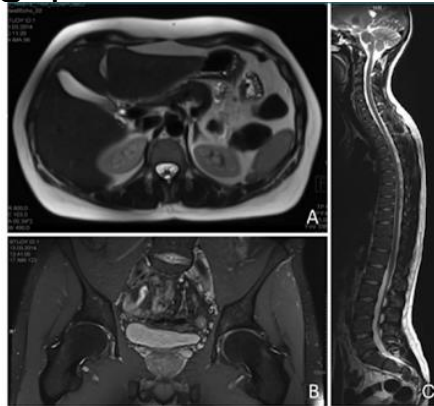


The German National Cohort (GNC)



From 2014-today
 $\leq 30,000$ subjects,
2 time points,
Several 3T MRI
sequences

Anatomies: brain, spine,
lung, pelvis, ...



Large databases

Multicenter Osteoarthritis Study (MOST)

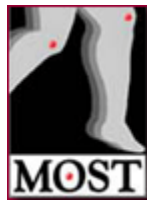
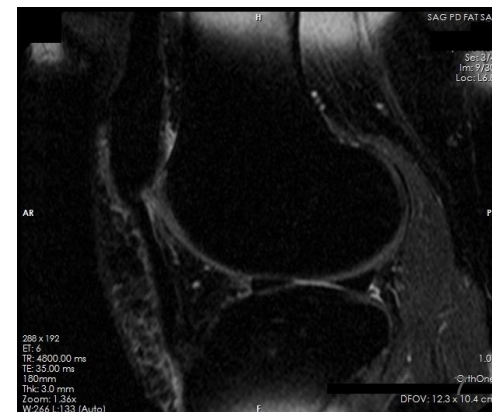
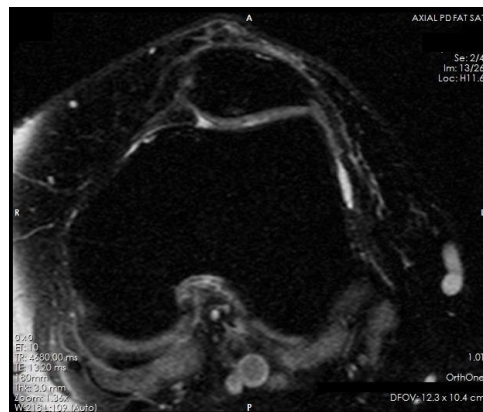
From 2003-2010

≈ 3,000 subjects,

6 time points,

Multiple **1T** MRI sequences, X-ray
images, serum/urine data, image
assessment studies, a lot of
additional information

Anatomies: hip, knee



MULTICENTER OSTEOARTHRITIS STUDY
PUBLIC DATA SHARING

The Osteoarthritis Initiative (OAI)

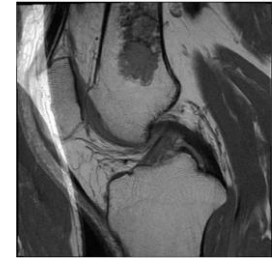
From 2004-today
≈ 5,000 subjects,
7 time points,

Multiple **3T** MRI sequences, X-ray
images, serum/urine data, image
assessment studies, a lot of
additional information

Anatomies: hand, hip, knee



X-rays



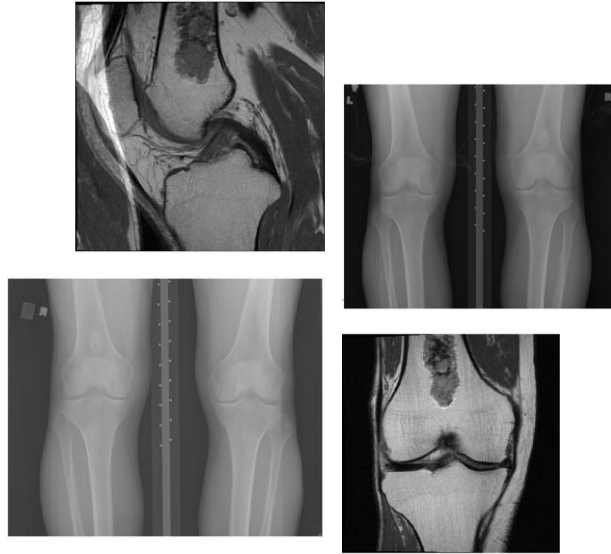
MRIs



Deep Learning from Large Databases



Deep learning for 3D medical image data



ROTTERDAM
STUDY

biobank^{uk}
Improving the health of future generations

SHIP
Study of Health in Pomerania

OAI osteoarthritis
initiative
a knee health study

NA
KO
GESUNDHEITS-
STUDIE

MULTICENTER OSTEOARTHRITIS STUDY
PUBLIC DATA SHARING
MOST

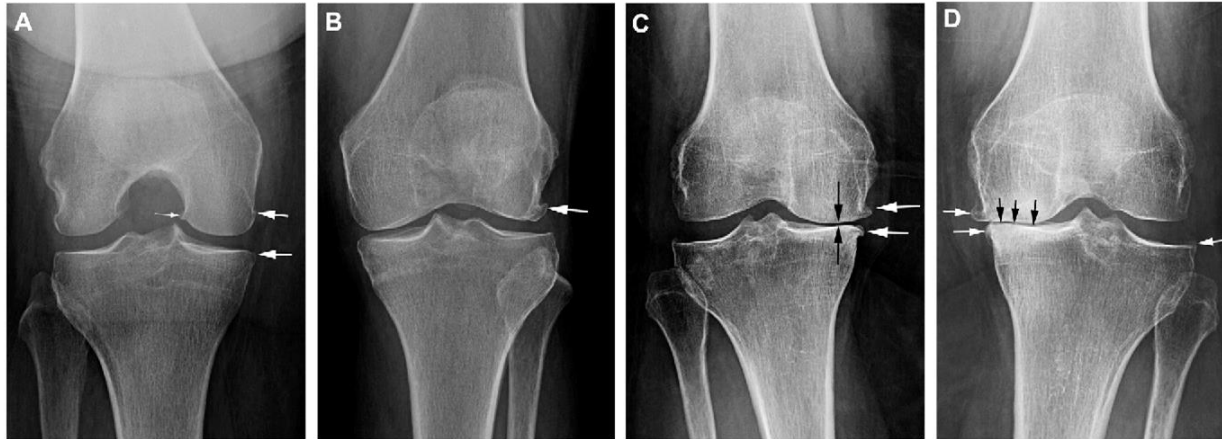
How can we use large cohorts for deep learning-based diagnosis and treatment planning?

What has been done so far?

What are the challenges?

What is the outlook?

Examples: findings in X-ray data

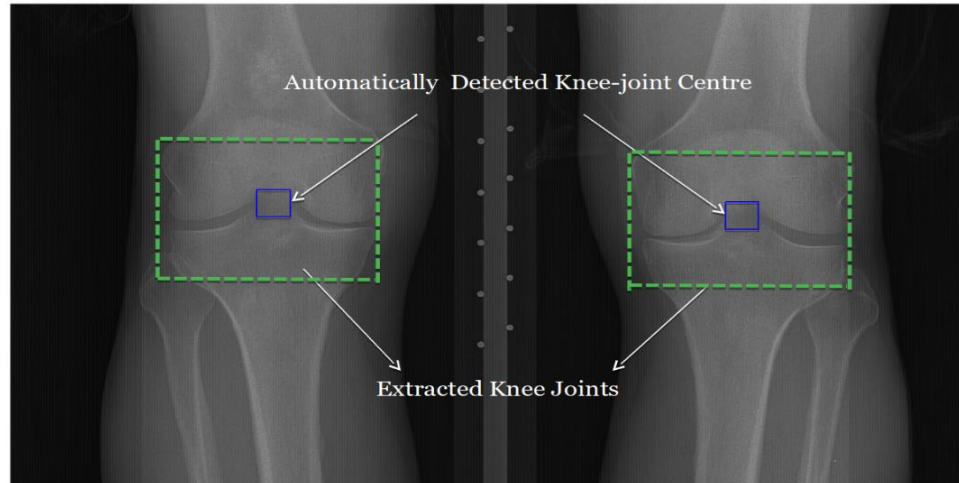


- Osteophytes
- Joint Space Narrowing
- Sclerosis
- Deformation of the bones

→ **Kellgren-Lawrence Grade (KLG)**

Deep learning for 3D medical image data

Diagnosing knee osteoarthritis from X-Ray



Antony et al. *Quantifying Radiographic Knee Osteoarthritis Severity using Deep Convolutional Neural Networks*. (2016)
→ VGG16

Suresha et al. *Automated Staging of Knee Osteoarthritis Severity using Deep Neural Networks*. (2018)
→ ImageNet

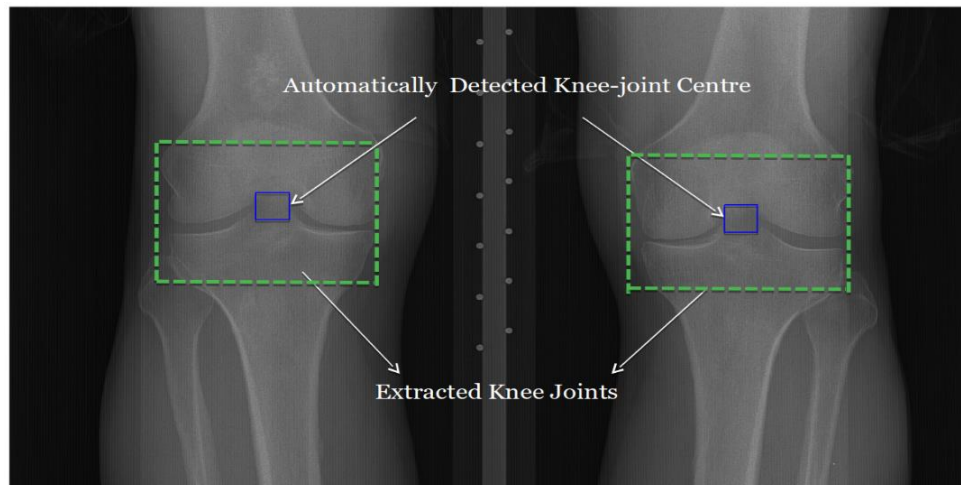
Tiulpin et al. *Automatic Knee Osteoarthritis Diagnosis from Plain Radiographs: A Deep Learning-Based Approach*. (2018)
→ Siamese CNN

... and many more ...

Deep learning for 3D medical image data

Diagnosing knee osteoarthritis from X-Ray

- + 2D image data
- + Annotations often routinely available
- + Small “Region of Interest”
- + Clearly defined pathological changes



— X-rays are just a 2D projection

— No soft tissue visible

— Low accuracy in multi-class settings

— Low sensitivity to progression

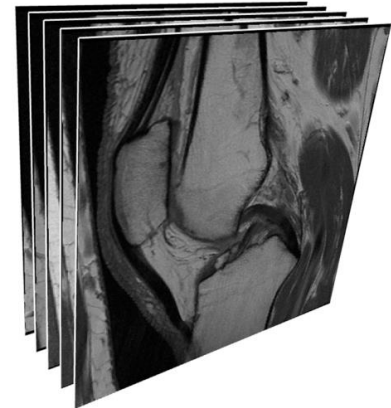
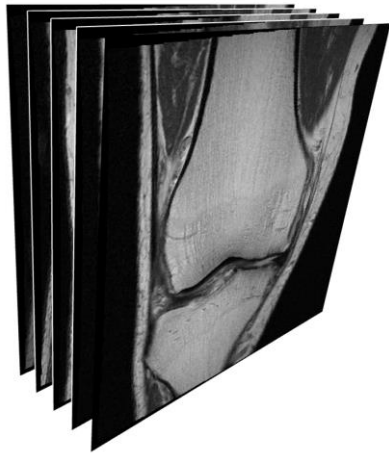
— Limited explanation of knee pain

Deep learning for 3D medical image data

Our aims for knee OA:

Efficient handling of 3D MRI data to...

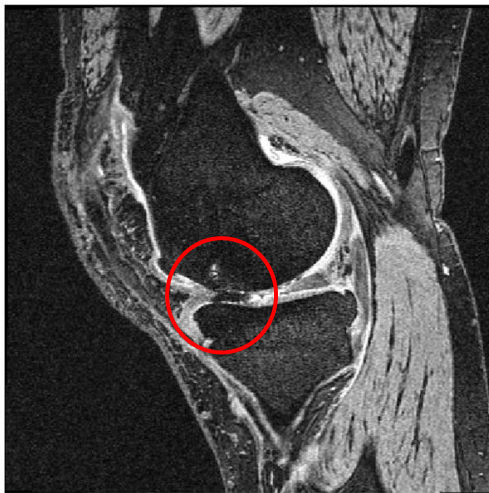
- ... diagnose the OA grade**
- ... predict incident OA**
- ... predict OA progression**
- ... understand pain**
- ... understand and identify phenotypes**
- ... evaluate treatment programmes**



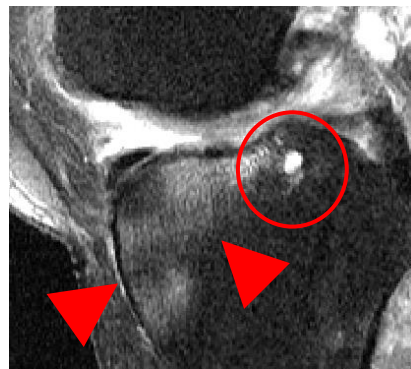
Examples: findings in MRI data



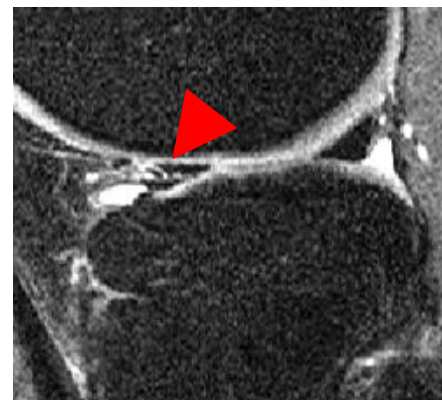
Meniscal
extrusion



Cartilage
defects



Bone marrow lesions
and cysts

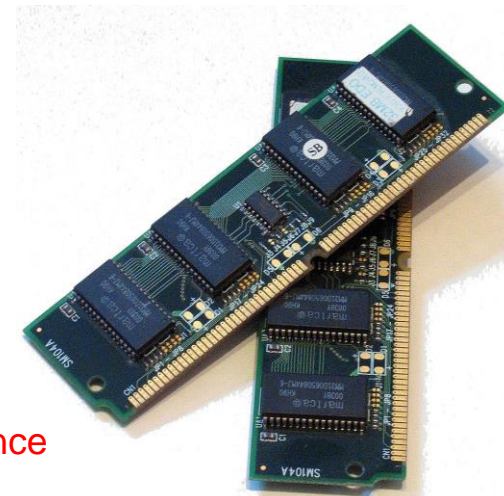
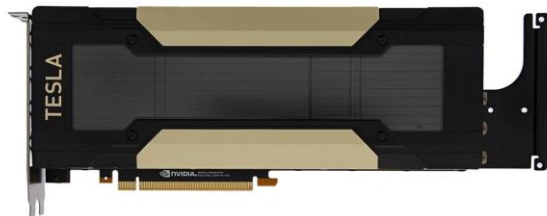
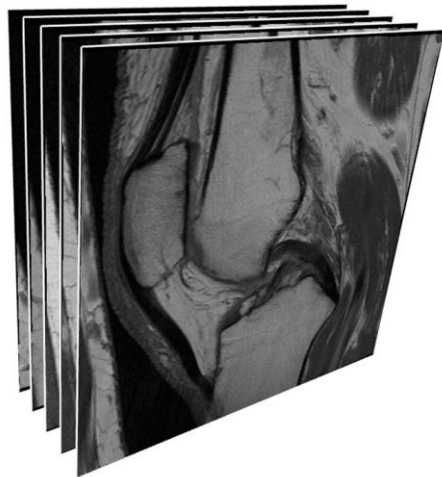


Meniscal tears

Deep learning for 3D medical image data

Challenges of handling 3D image data

- Small pathological changes
- Weak annotations
- Large volumes
- High run time of training and inference
- GPU memory
- Main memory
- Storage capacity



Deep learning for 3D medical image data

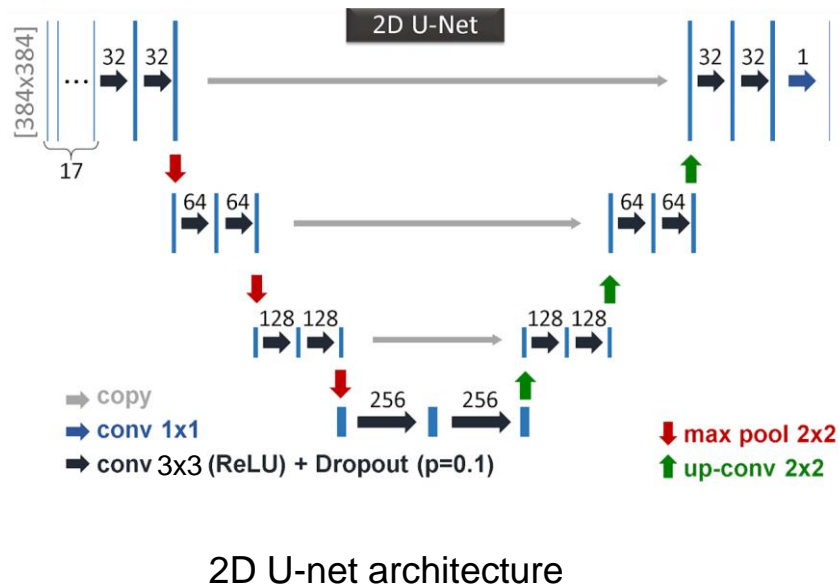
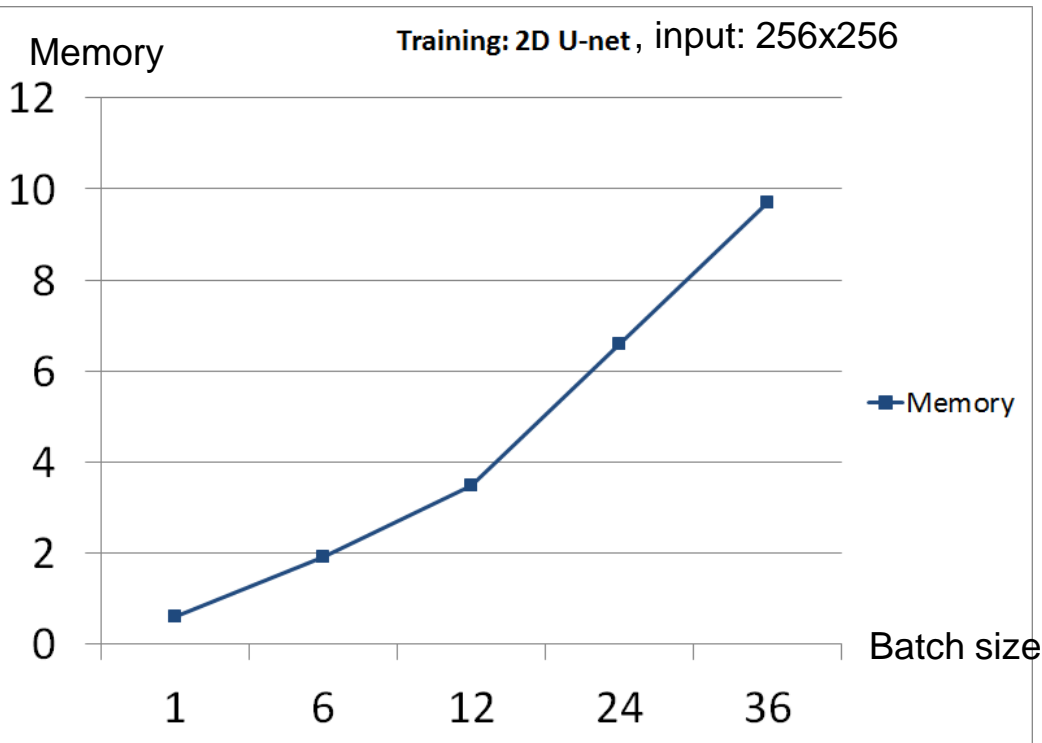
Challenge: **GPU memory**

The amount of memory needed for training a CNN is mostly influenced by:

- The number of neurons
- The activations and gradients for each neuron
- The size of the batches used for training
- The size of the input images

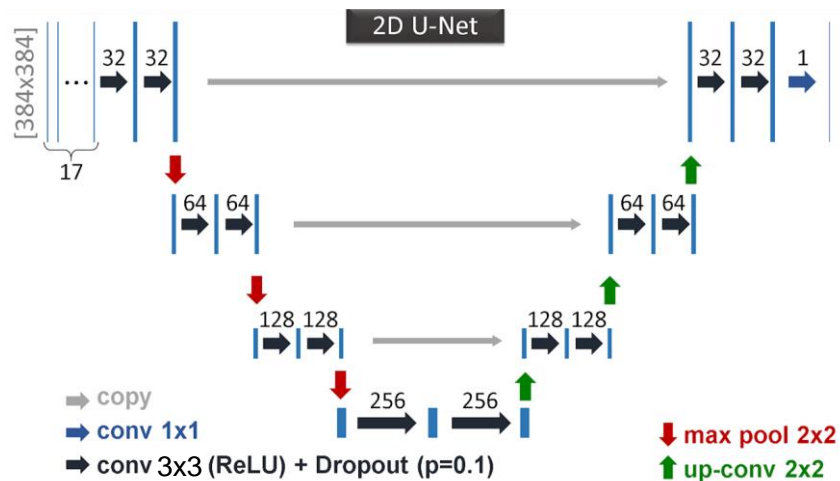
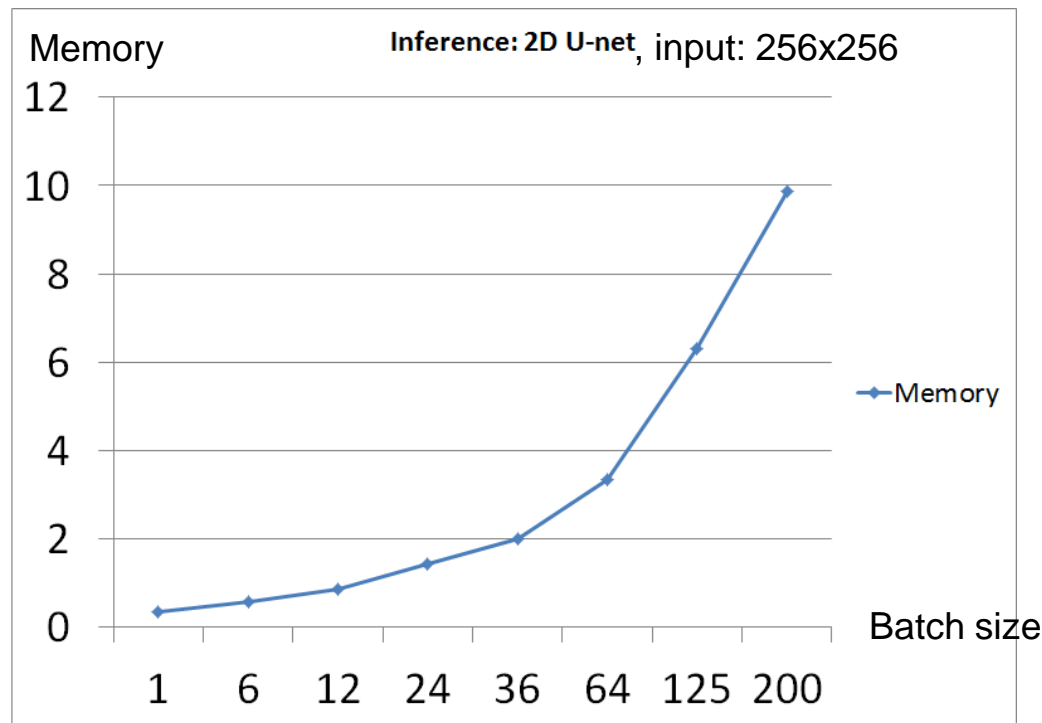
Deep learning for 3D medical image data

Example: Training a 2D U-net for segmentation of 2D data



Deep learning for 3D medical image data

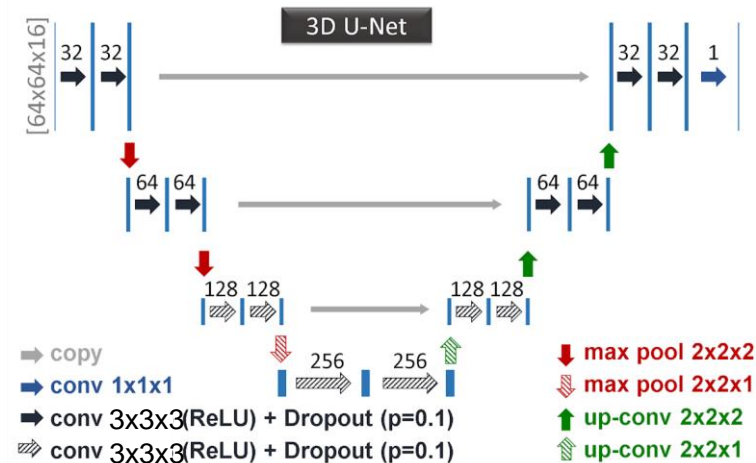
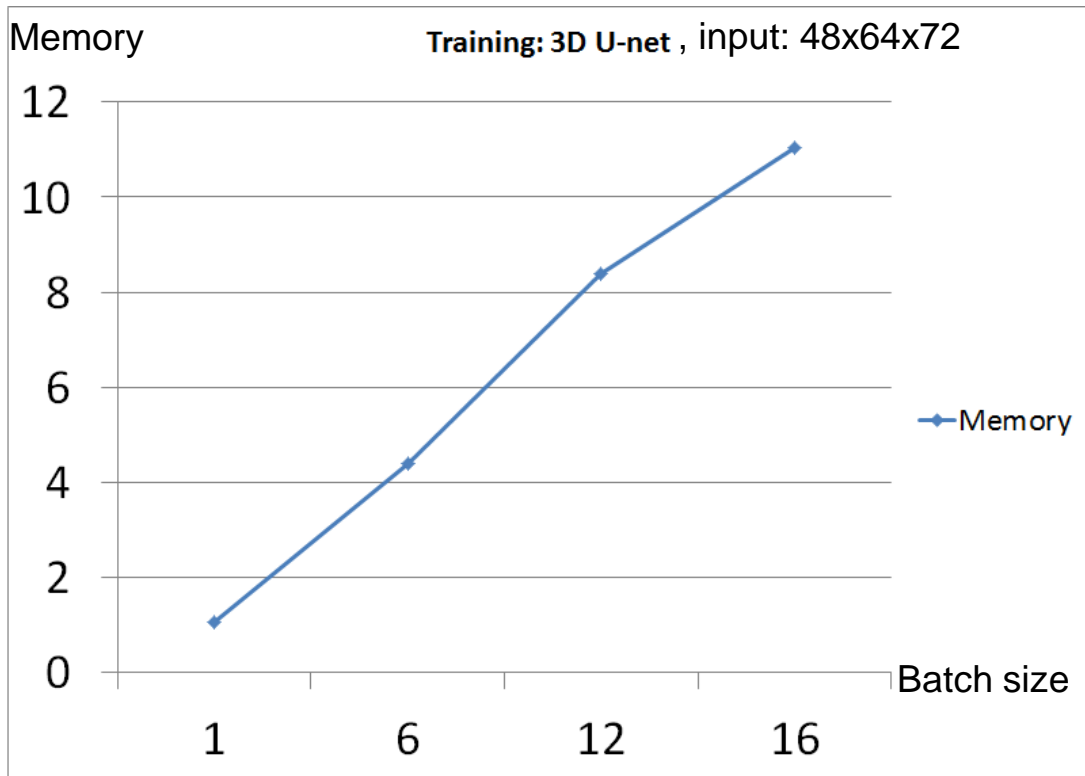
Example: Inference using a 2D U-net for segmentation of 2D data



2D U-net architecture

Deep learning for 3D medical image data

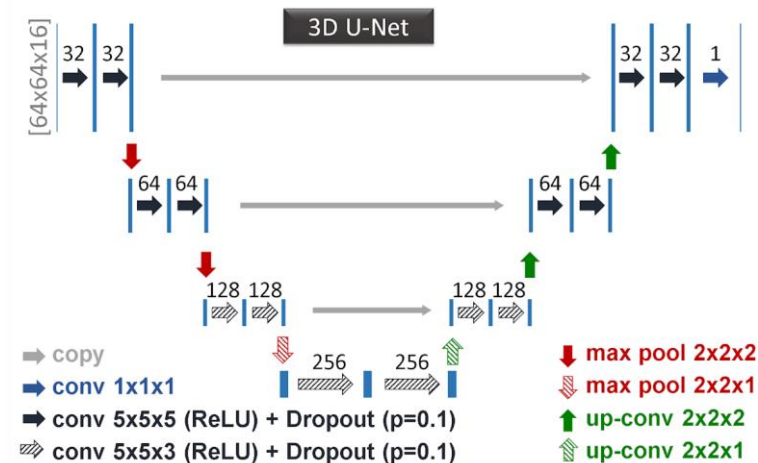
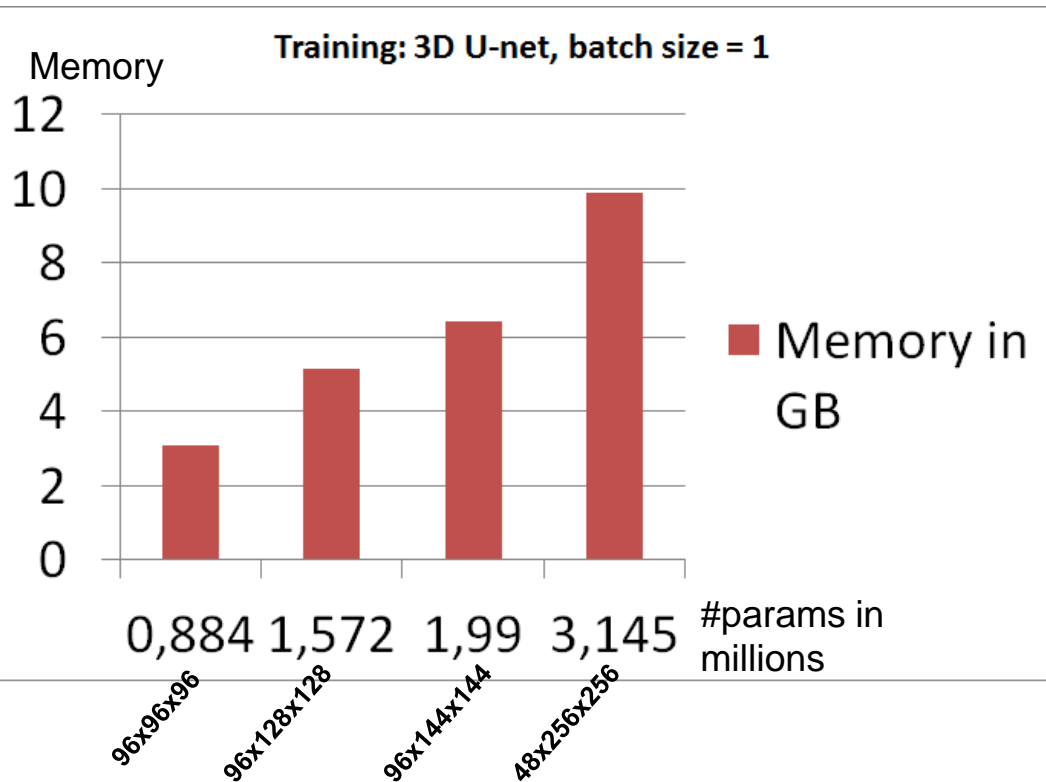
Example: Training a 3D U-net for segmentation of 3D data



3D U-net architecture

Deep learning for 3D medical image data

Example: Training a 3D U-net for segmentation of 3D data,
Which ROI can we choose with batch size fixed to 1?



3D U-net architecture

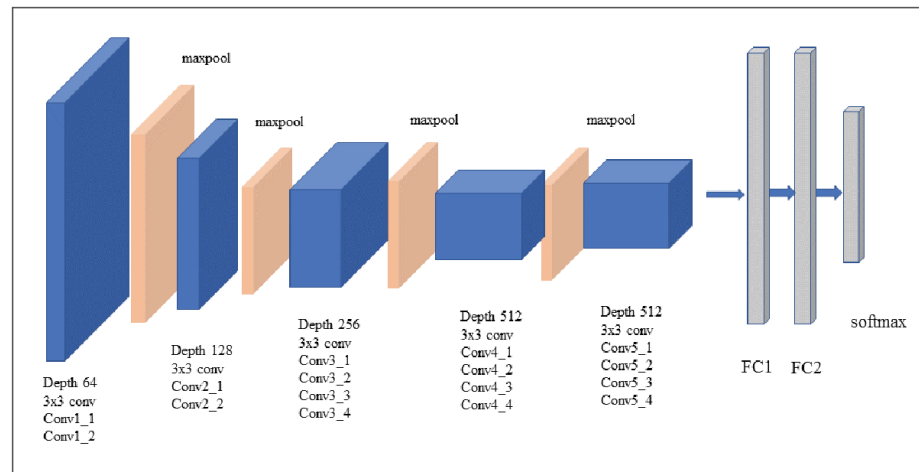
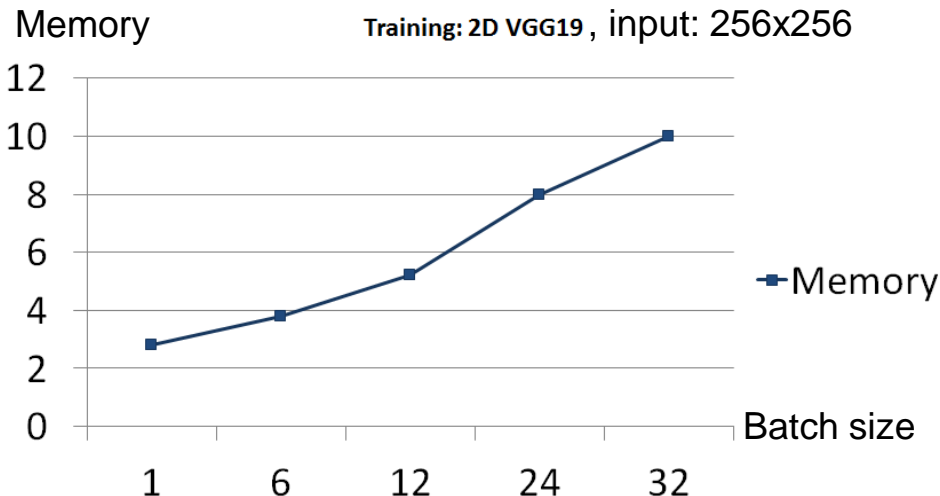
Input size of **48x256x256** and comparable is possible.

We want: **160x384x384**

→ **23,592,960 parameters** → **≈ 40 GB!**

Deep learning for 3D medical image data

Example: training a VGG19-like CNN for classification of 2D data

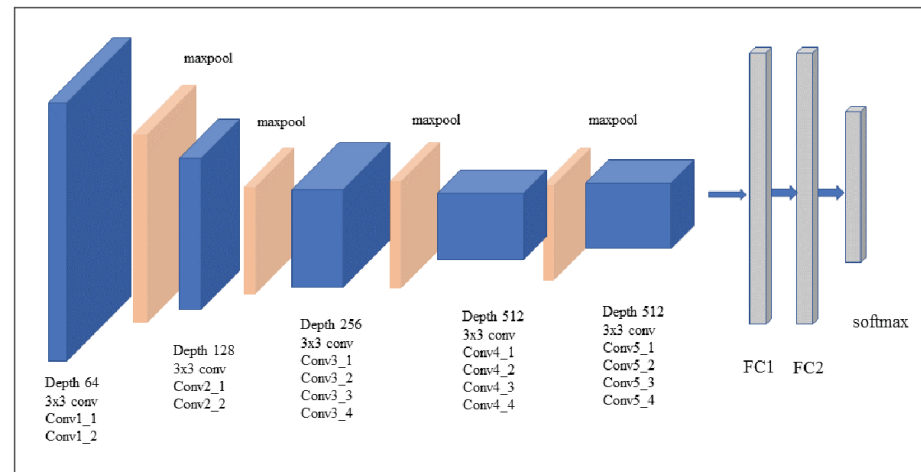


VGG19 architecture

Deep learning for 3D medical image data

Example: training a VGG19-like CNN for classification of 2D data

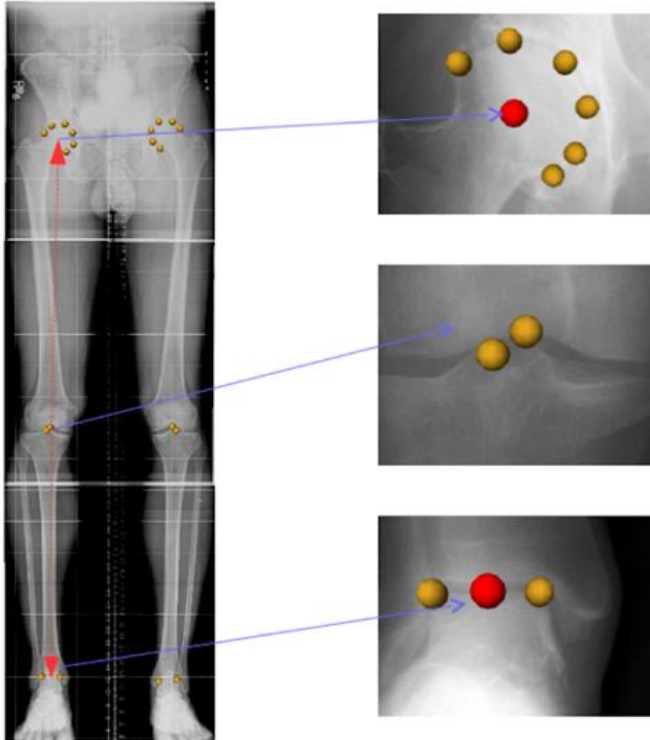
Example input image	Input-size [in thousands]	#parameters [in millions]	Memory [in GB]
224x224	50	139	2.3
256x256	65	171	2.8
320x320	102	246	4.0
384x384	147	338	5.4
512x512	265	573	9.1



VGG19 architecture

Deep learning for 3D medical image data

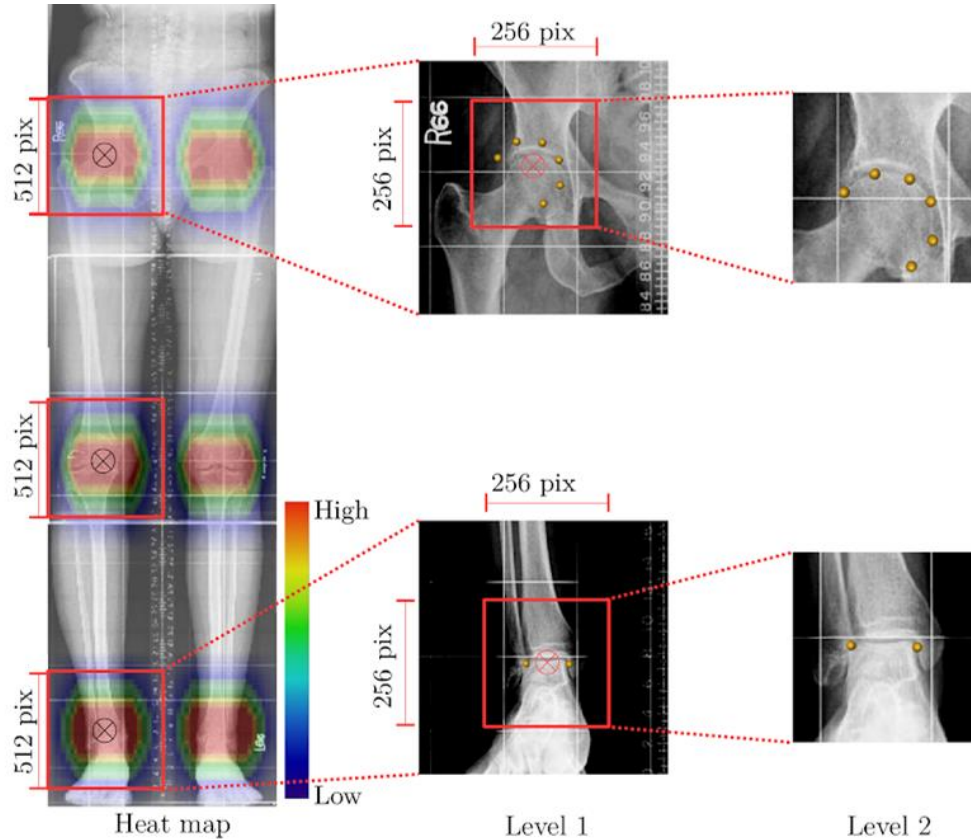
Computer-aided diagnosis of leg alignment using full-leg X-ray images



1000 x 4000 image size!

Deep learning for 3D medical image data

Computer-aided diagnosis of leg alignment using full-leg X-ray images



→ cascaded approach to account for the large image size

Deep learning for 3D medical image data

Example: Training a VGG19-like 3D CNN for classification of 3D data

Batch size = 1

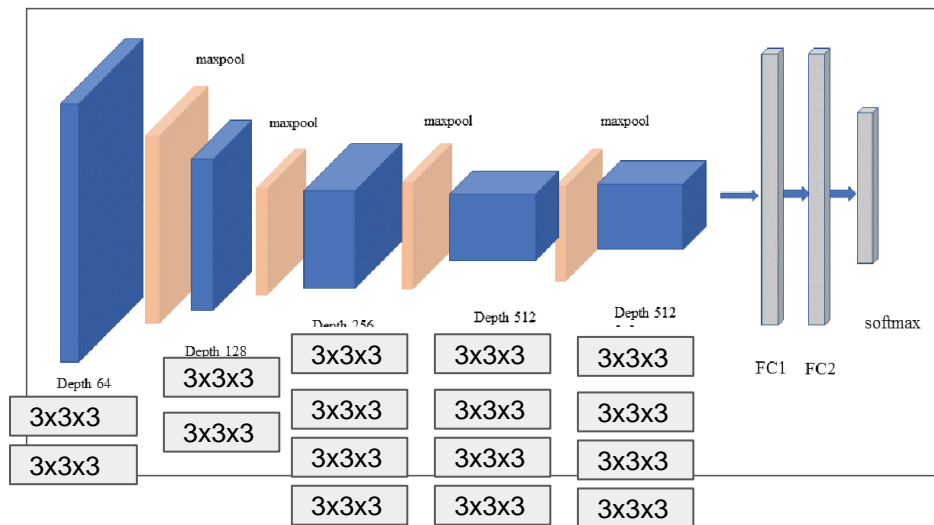
Example input image	Input-size [in thousands]	#parameters [in millions]	Memory [in GB]
80x80x80	512	93	2.5
96x96x96	884	133	4.1
128x128x128	2,097	211	8
128x144x144	2,654	211	8.6

We want: 160x384x384!

Input-size: 23,592,000

#parameters: 1,586,000,000

Memory: ≈ 80 GB



3D VGG19 architecture

Deep learning for 3D medical image data

Conclusions

- 2D segmentation easy, but not very good results for 3D data
- 3D segmentation can't be done for the whole image, but for smaller sub-regions
- 2D classification has limits wrt. image size
- 3D classification not really possible

How to handle...

large 2D or 3D images?

4D data (3D+t)?

multiple MRI sequences?

What about the run time?





Deep Learning applied to the OAI database



The Osteoarthritis Initiative (OAI)

7 time points
≈ 5.000 subjects
two knees per subject
Multiple MRI sequences

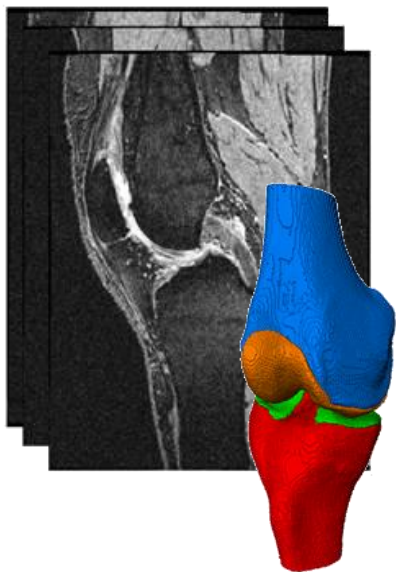


→ using just one MRI sequence: **approx. 50.000 datasets in total**

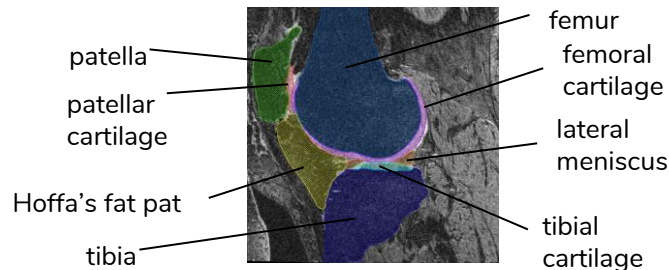
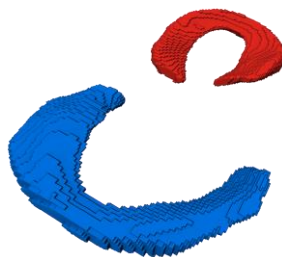
High performance training and inference



1x NVIDIA GeForce 1080 Ti



Segmentation of 50.000 MRI datasets would take 12 months!²³



²A Tack, A Mukhopadhyay, S Zachow: *Knee Menisci Segmentation using Convolutional Neural Networks: Data from the Osteoarthritis Initiative* (2018)

³F Ambellan, A Tack, M Ehlike, S Zachow: *Automated Segmentation of Knee Bone and Cartilage combining Statistical Shape Knowledge and Convolutional Neural Networks: Data from the Osteoarthritis Initiative* (2019)

High performance training and inference

HLRN-III system “Konrad”

Nodes: 1872

CPUs: 3744

Main memory: 129 TByte

Storage capacity: 4.2 PByte



Inference using 1000 nodes:

5,000 MRIs → ≈30 hours

50,000 MRIs → ≈300 hours

→ segmentation of the whole OAI database would take ≈13 days.

High performance training and inference

HLRN-III system “Konrad” Challenges for deep learning

Memory per Node:

64 GB main memory for 24 cores



Each CNN-based process for inference needs $\approx 11\text{GB}$ main memory.

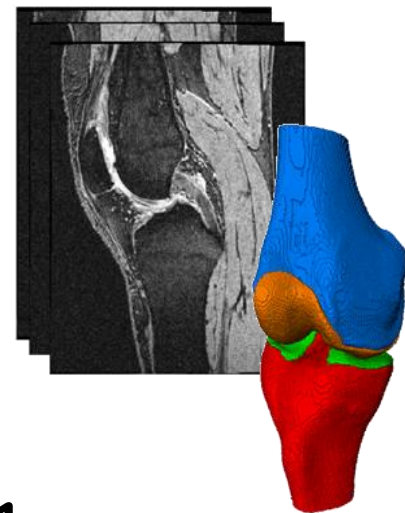
In a “trivial parallel”-setting 5 single threaded individual processes can be started on one node. Each process on one core of the node.

→ **Effectively: Only 5/24 cores are used per node!**

High performance training and inference



NVIDIA
DGX-1



**Segmentation of the whole database
took 8 days using 8 GPUs of the DGX-1.**

Many thanks to:

MDC

MAX-DELBRÜCK-CENTRUM
FÜR MOLEKULARE MEDIZIN
IN DER HELMHOLTZ-GEMEINSCHAFT

High performance training and inference



NVIDIA DGX-1

→ Image data of the OAI database: 11 TB !

DGX-1 storage capacity: 7 TB.

... supported by a AI200 system by DDN,
which increased the hard disk memory of the
DGX-1 to 26 TB!



AI200



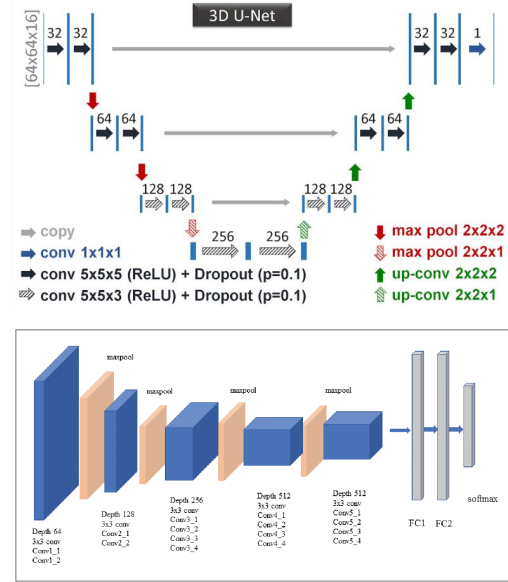
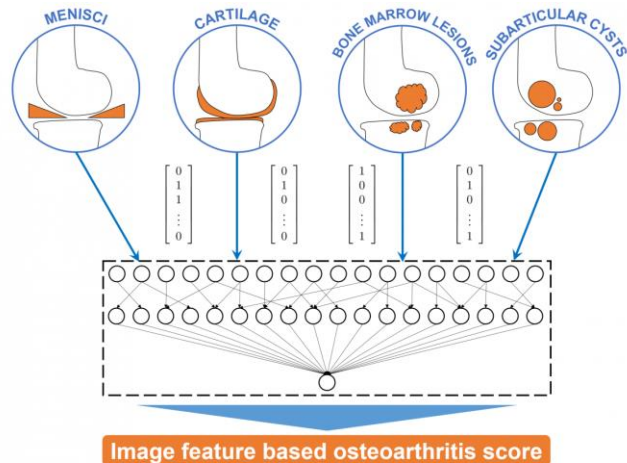
Vision: Deep Learning for Diagnosis and Treatment Planning



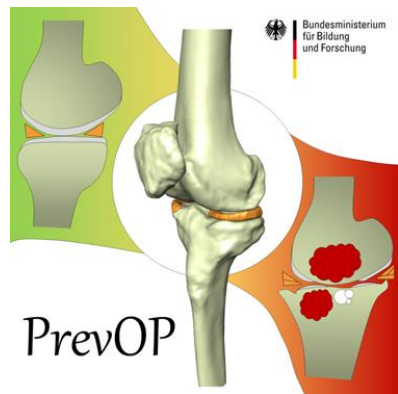
Vision: Deep learning to diagnose OA

Use OAI database segmentations for

- Training new 3D segmentation methods
- Deep learning-based diagnosis of images (classification)
- Computation of image-based biomarkers
→ Combination to a holistic score



Vision: Deep learning for treatment planning



Use deep learning-based OA score to evaluate treatment success after 2 years.

≈ 240 subjects,
4 time points,
Multiple MRI sequence



Thank you!

Questions & Discussion

High performance training and inference

HLRN-III system “Konrad” Challenges for deep learning

Training of CNNs

- Split the CNN to multiple nodes/cores?
- Duplicate the CNN to multiple nodes/cores?
 - Efficiency?

→ We will soon perform further investigations using the HLRN IV

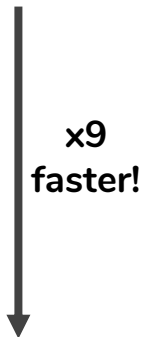


High performance training and inference

Training and Inference using GPUs: NVIDIA 1080 Ti vs. NVIDIA DGX-1

Training

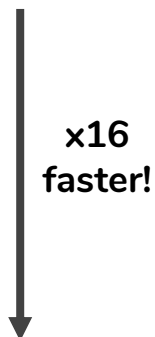
13 hours



1.5 hours

Inference

8 hours



0.5 hours



NVIDIA GeForce
1080 Ti



NVIDIA
DGX-1