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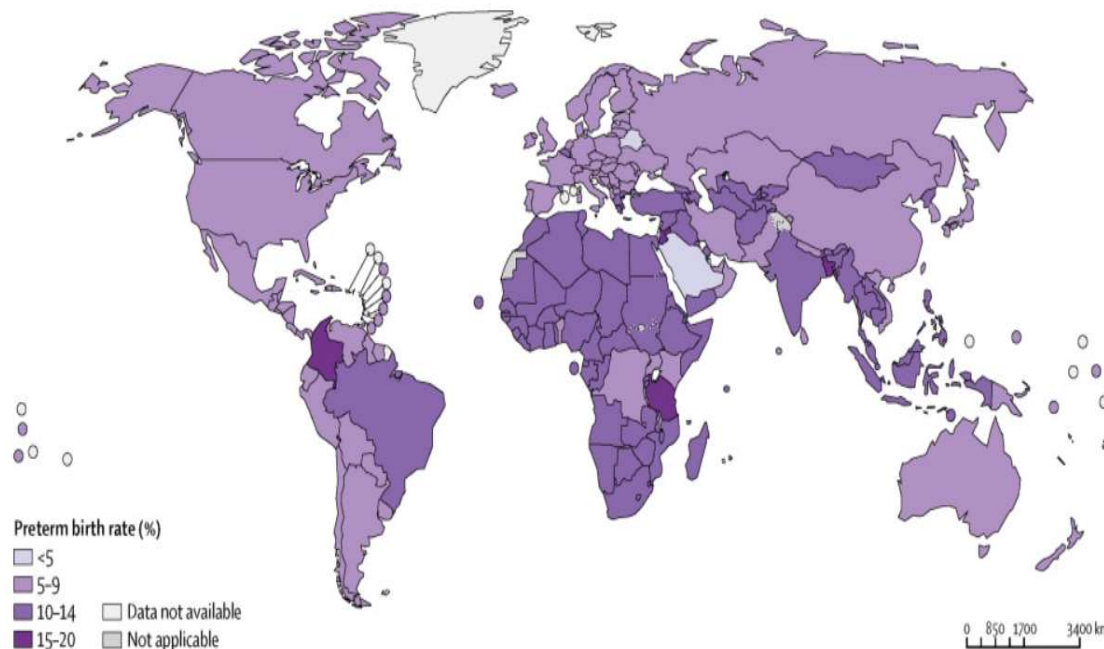
# Priority U-Net: Detection of Punctuate White Matter Lesions in Preterm Neonate in 3D Cranial Ultrasonography

Pierre Erbacher<sup>1</sup>  
Carole Lartizien<sup>1</sup>  
Matthieu Martin<sup>1</sup>  
Pedro Foletto-Pimenta<sup>1</sup>  
Philippe Quetin<sup>2</sup>  
Philippe Delachartre<sup>1</sup>

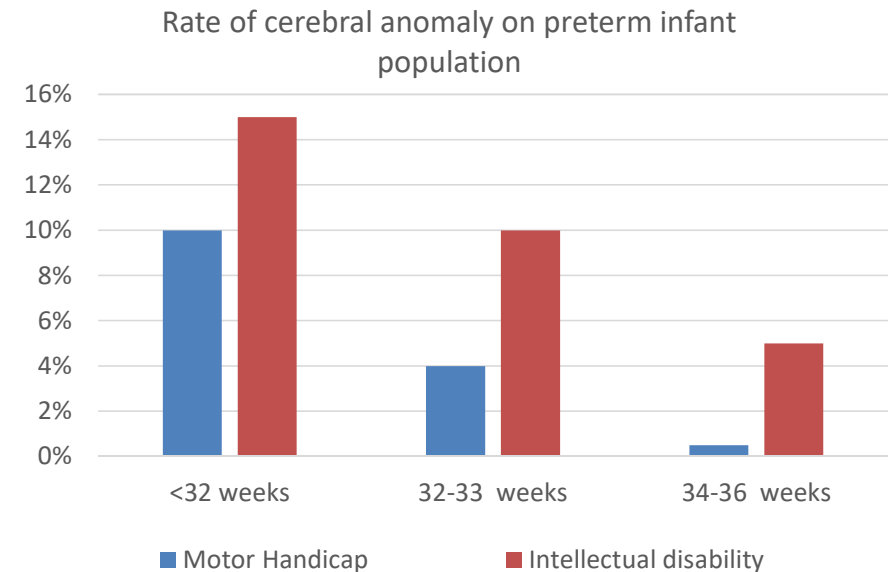
<sup>1</sup> Univ Lyon, INSA-Lyon, Université Claude Bernard Lyon 1, UJM-Saint Etienne, CNRS, Inserm, CREATIS UMR5220, U1206, F69621 LYON, France

<sup>2</sup> CH Avignon, France

# Preterm Birth and Punctuate White Matter Lesions (PWML)

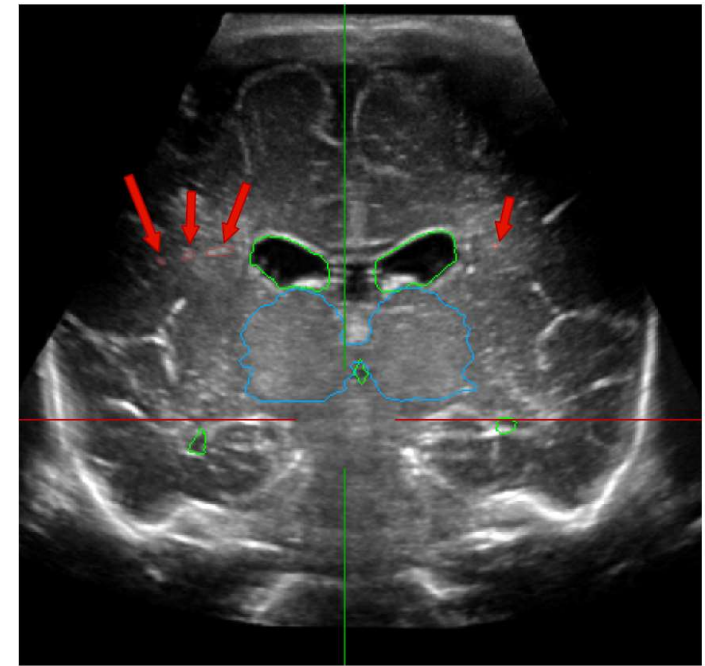


Estimated preterm birth rate, The Lancet 2014



## Diagnostic of PWML

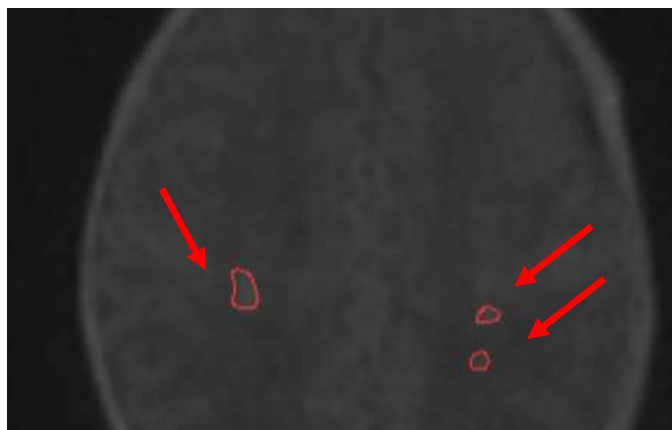
- Anomalies of the cerebral development in preterm infants include
  - **PWML** : Punctuate lesions in the surrounding white matter.
- Volume and position of PWM lesions are good indicators of the severity of sequelae
- **MRI** is the gold standard for assessing volume and position of PWML, but its access is limited
- **Cranial ultrasonography (cUS)** has shown promising performance in detecting PWML



Coronal slice of cUS. PWML in Red, Thalamus in blue. Ventricular system in green.

## Diagnostic of PWML

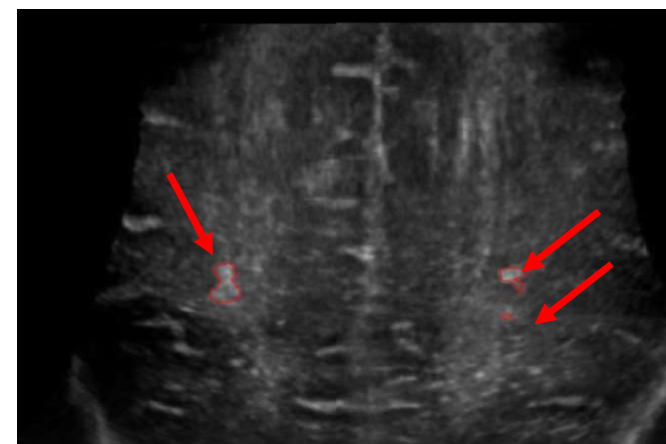
*Axial slice of MRI*



*PWML segmented by Liu's algorithm*

Same  
patient

*Axial slice of 3D cUS*



*PWML segmented by an expert*

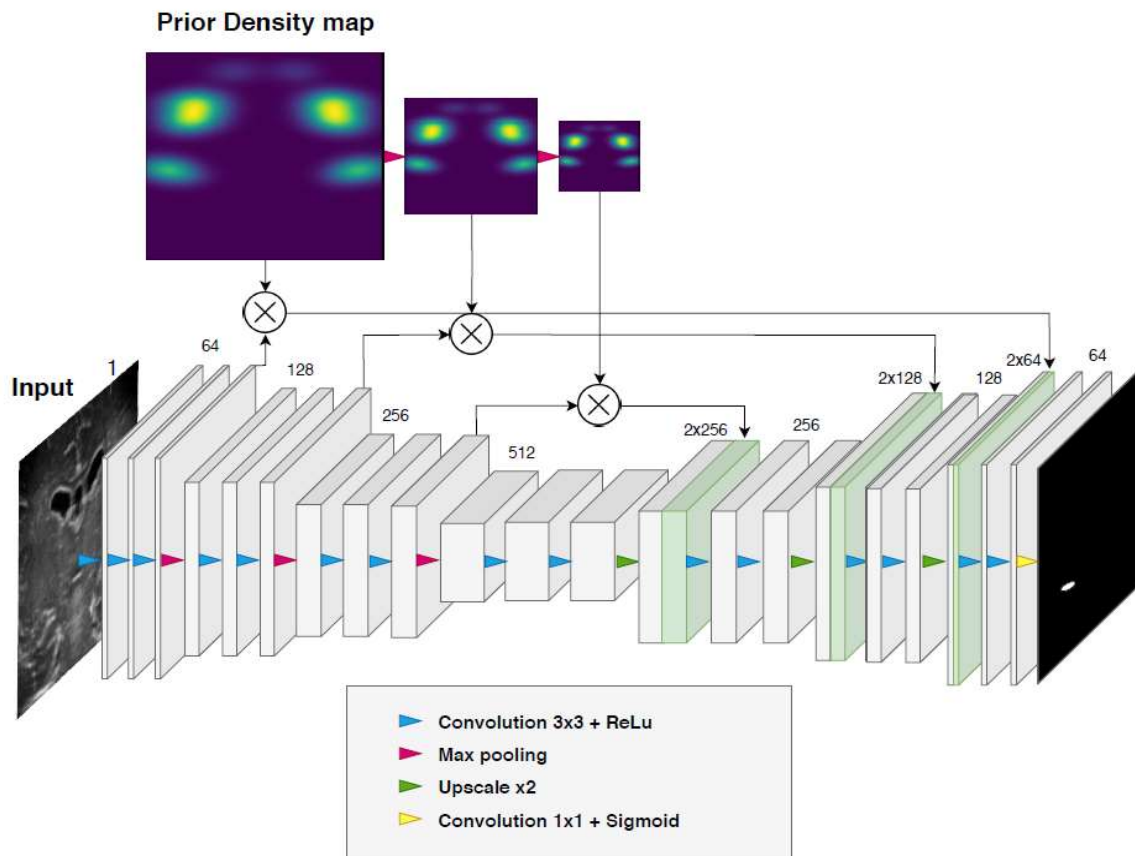
- First attempts to automatically detect PMWL on MRI

[Mukherjee et al, 2019] : no learning

[Liu et al, 2020] : first DL approach

- No paper on automatic segmentation of PWML using cUS

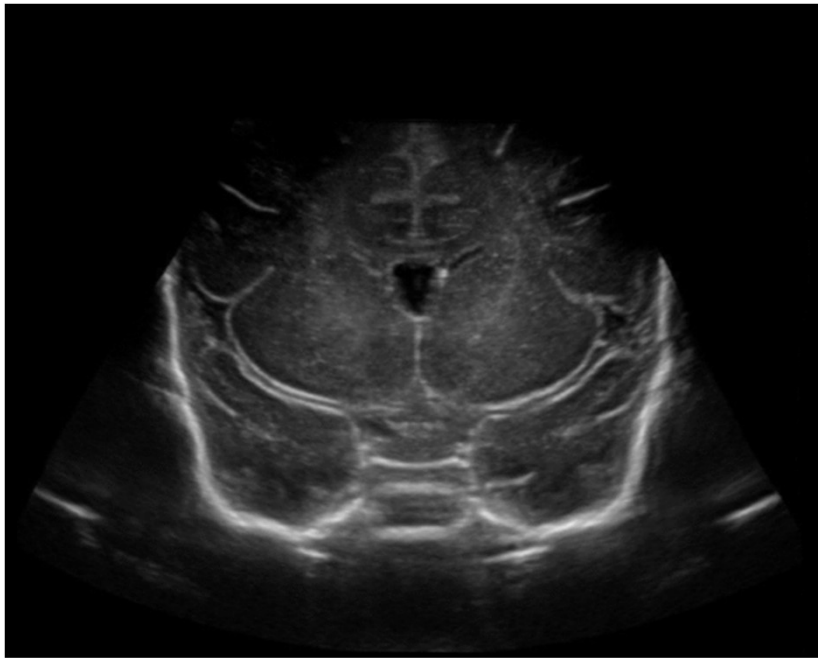
## Our contribution: **Priority UNET**



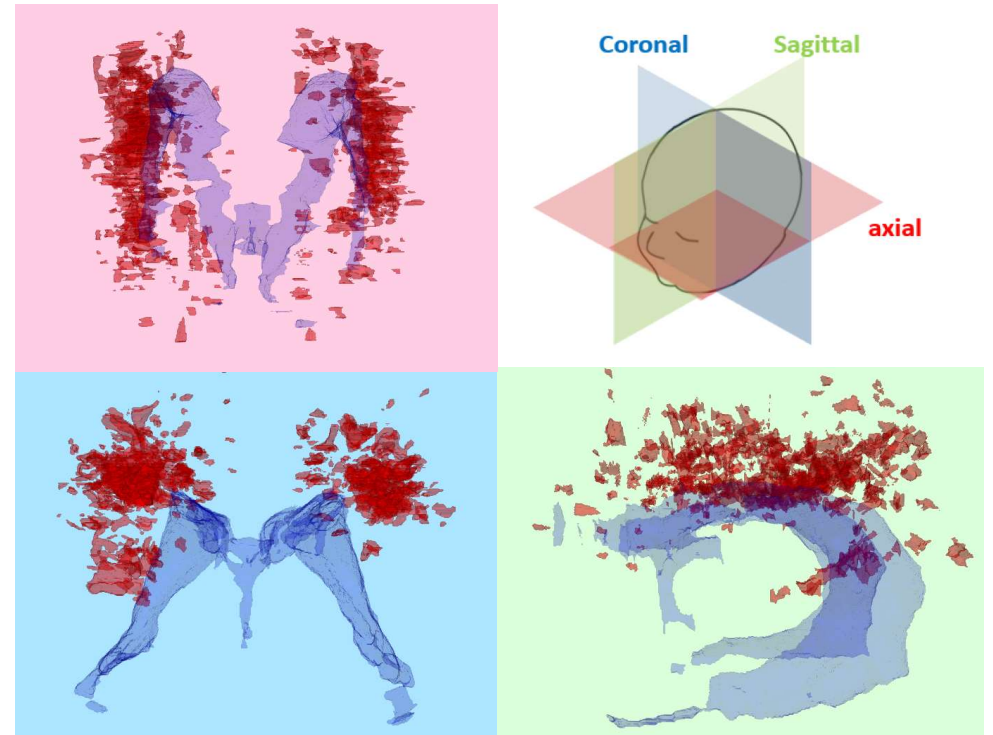
A novel end-to-end supervised architecture

- that performs detection and semantic segmentation of PWM lesions in 3D cUS images
- based on a **2D U-NET** segmentation network combined with
  - a **soft attention model** on PWM lesion localisation
  - a **self-balanced focal loss (SBFL)**

## Estimation of the PWML density map



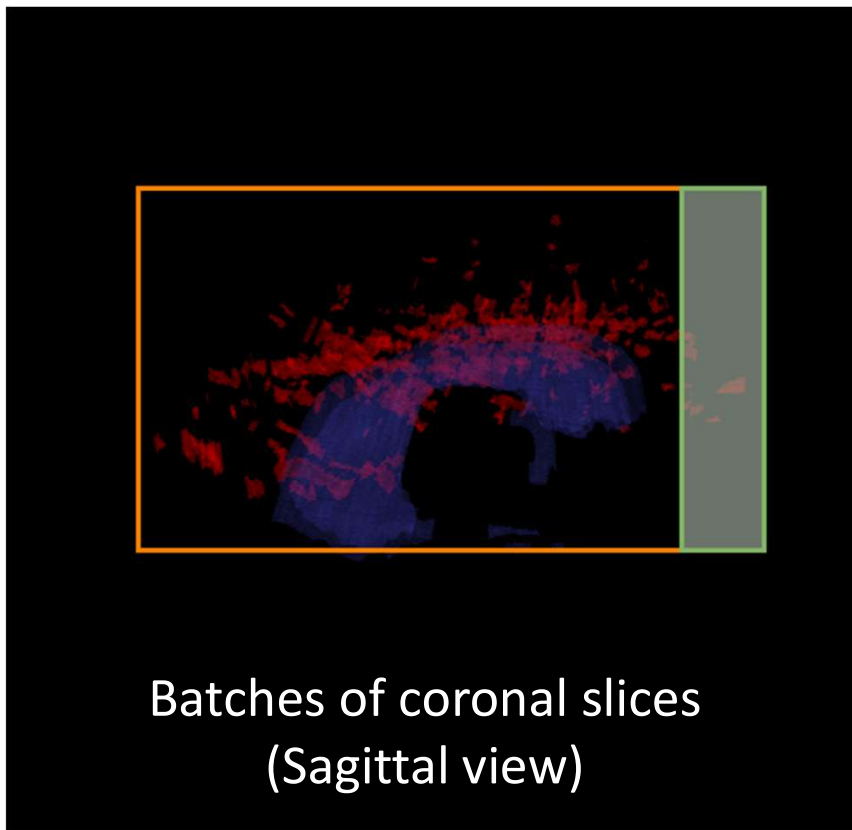
*3D reconstructed cUS volume  
centered on the corpus callosum  
splenium*



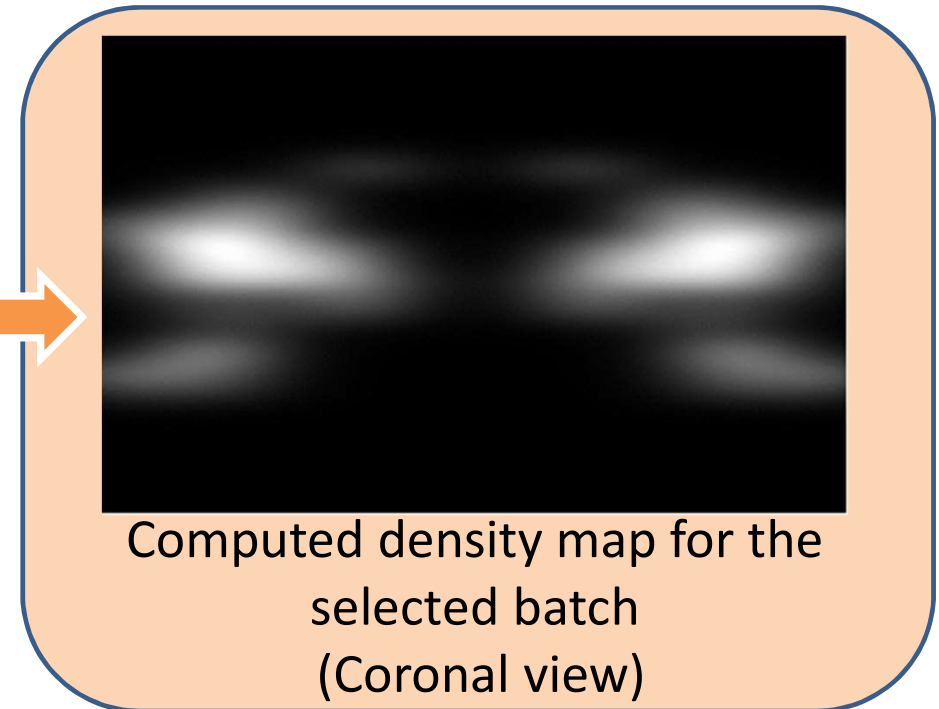
*Localization of PWML concatenated  
from our 3D cUS dataset*



## Estimation of the PWML density map



**Parzen-  
Rosenblatt  
estimator**



# Loss terms

Two different loss terms are considered

- **LOSS(DICE+BCE)** Combination of Dice and Binary cross entropy (BCE)
- **LOSS(DICE+SBFL)** Combination of Dice and self-balanced focal loss (SBFL)

$$DICE(p, \hat{p}) = 1 - \frac{2p\hat{p}}{p+\hat{p}}$$

$$BCE(p, \hat{p}) = -(p \log(\hat{p}) + (1 - p) \log(1 - \hat{p}))$$

$\hat{p}$  output probability of the model

$p$  ground truth probability of belonging to class lesion

## Self-balanced focal loss

$$SBFL(p, \hat{p}) = \beta \times FL_1 + (1 - \beta) \times FL_0$$

$$\beta = \frac{0.4 \times \sum(FL_0)}{\sum(FL_0) + \sum(FL_1)} + 0.5$$

$$FL_0(p, \hat{p}) = -\hat{p}^\gamma \times (1 - p) \times \log(1 - \hat{p} + \epsilon)$$

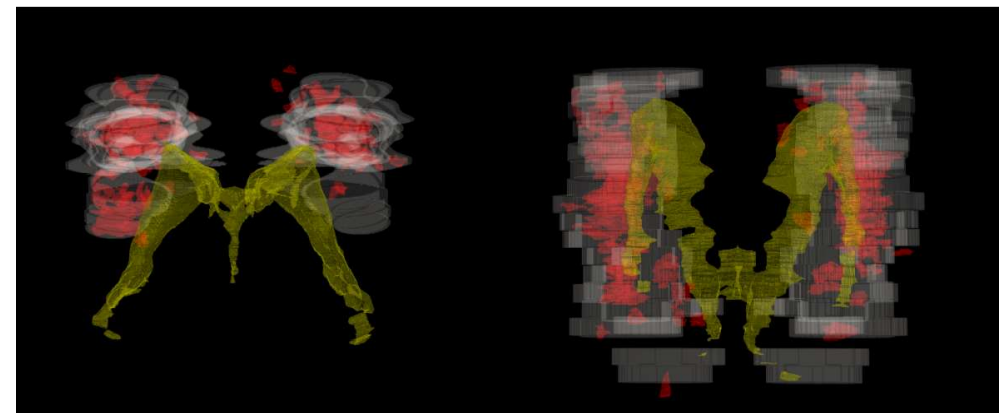
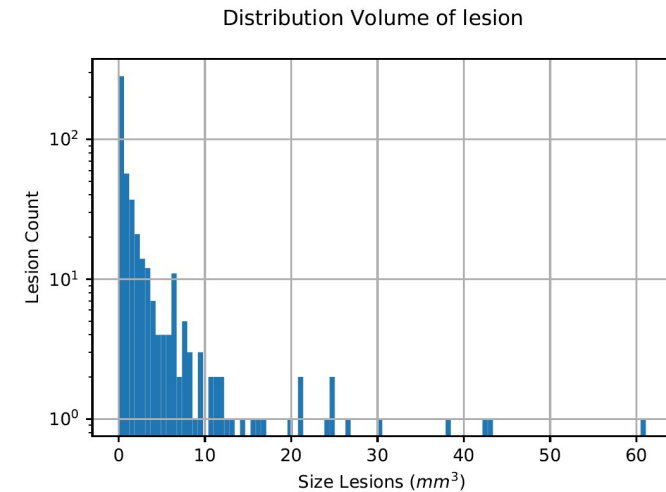
$$FL_1(p, \hat{p}) = -(1 - \hat{p})^\gamma \times p \times \log(\hat{p} + \epsilon)$$

$\gamma$  reduces the loss contribution for 'easy' examples



## Dataset description

- **21 neonate patients** with mean age at birth of  $31.6 \pm 2.5$  weeks
- 3D cUS reconstructed volumes (360x400x380)
- Isotropic spatial resolution : 0.15 mm
- 547 3D lesions annotated by an expert pediatrician
- **131 lesions with a volume > 1.7 mm<sup>3</sup>**
- 3000 coronal slices with lesions



Coronal view (left) and Axial view (Right). Ventricular system in yellow, the Pool of PWML in red and the thresholded density map in white.

# Experiments

- Evaluate performance of **Priority-UNET**
  - **Ablation study** to evaluate the impact of
    - the **loss** term :  $Loss_{(DICE+BCE)}$  and  $Loss_{(DICE+SBFL)}$
    - the **soft attention model**
- 10-fold cross-validation
- Performance metrics for
  - **detection tasks** : recall, precision at the **lesion level**
  - **segmentation tasks**: **volumetric** recall  $R_V$  and precision  $P_V$ , **DICE** index

$$P_V = \sum_{i=1}^N a_i P_V^i$$

$P_V^i$  **fraction of predicted lesional volume** over the total lesional volume for patient  $i$

$a_i$  fraction of true lesional volume for patient  $i$  over the total lesional volume in the database

# Results

## Detection task

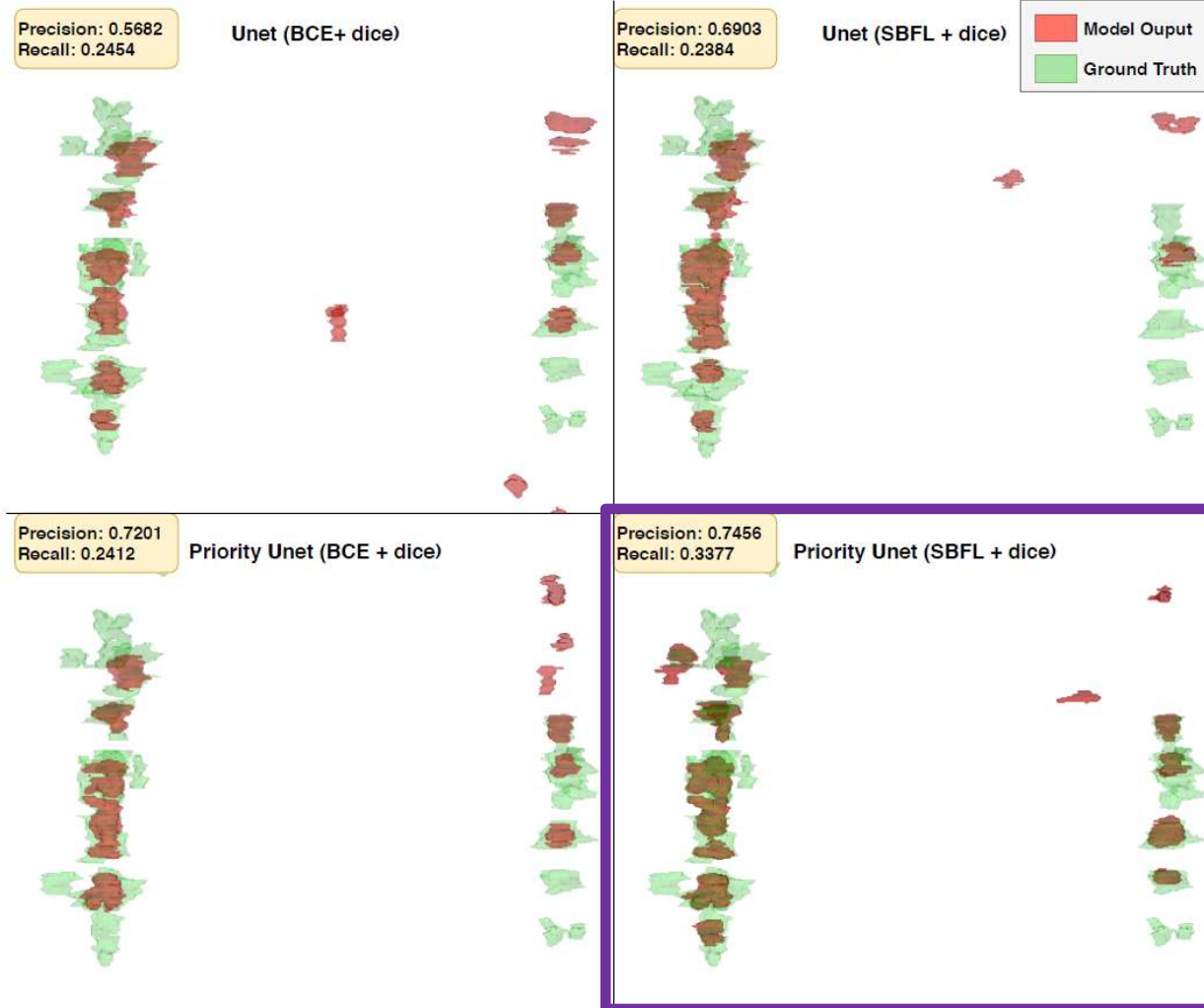
| Model                               | Precision     | Recall        |
|-------------------------------------|---------------|---------------|
| U-net (BCE + Dice)                  | 0.4404        | 0.3217        |
| U-net (SBFL + Dice)                 | 0.2347        | <b>0.5510</b> |
| Priority U-net (BCE + Dice)         | <b>0.4464</b> | 0.4347        |
| <b>Priority U-net (SBFL + Dice)</b> | <b>0.5370</b> | <b>0.5043</b> |

## Segmentation task

| Model                               | $P_V$         | $P_V$         | Dice          |
|-------------------------------------|---------------|---------------|---------------|
| U-net (BCE + Dice)                  | 0.5004        | 0.2419        | 0.3040        |
| U-net (SBFL + Dice)                 | <b>0.6043</b> | 0.1806        | 0.2611        |
| Priority U-net (BCE + Dice)         | <b>0.5455</b> | <b>0.2789</b> | <b>0.3565</b> |
| <b>Priority U-net (SBFL + Dice)</b> | 0.5289        | <b>0.3206</b> | <b>0.3839</b> |

Legend :  
**Ranked first**  
**Ranked 2nd**

# Results



Example 3D visualization of *PWML segmentation* overlaid on *reference lesions*

## Conclusion

- **First detection/segmentation of PWML in Preterm Neonate in 3D cUS**
- New deep architecture, called **Priority U-Net**, based on the 2D U-Net backbone combined with
  - the self balancing focal loss and a **soft attention model focusing on the PWML localisation**
- Performance of Priority-UNET Compared to the U-Net. Detection task:
  - Recall from 0.4404 to 0.5370 and precision from 0.3217 to 0.5043.
- Performance of cUS vs MRI for segmentation task:
  - Dice score 21.5% better in MRI in Liu et al
  - Spatial resolution, less than 0.04 mm<sup>3</sup> for cUS vs around 0.8 mm<sup>3</sup> for MRI