Domain-Invariant Hyperbolic Distillation for Robust Medical Image Analysis

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Abstract

Robust generalization beyond training distributions remains a critical challenge for deep neural networks. This is especially pronounced in medical image analysis, where data is often scarce and covariate shifts arise from different hardware devices, imaging protocols, and heterogeneous patient populations. These factors collectively hinder reliable performance and slow down clinical adoption. Despite recent progress, existing learning paradigms primarily rely on the Euclidean manifold, whose flat geometry fails to capture the complex, hierarchical structures present in clinical data. In this work, we exploit the superiority of hyperbolic manifolds to model complex data characteristics. We present the first comprehensive validation of hyperbolic representation learning for medical image analysis and demonstrate statistically significant gains across eleven in-distribution datasets and three ViT backbones. We further propose an unsupervised, domain-invariant hyperbolic distillation strategy. Extensive experiments confirm that our hyperbolic distillation learns domain-invariant features and outperforms state-of-the-art Euclidean methods by an average of +2.1% AUC on three domain generalization benchmarks: Fitzpatrick17k, Camelyon17-Wilds, and a cross-dataset setup for retinal imaging. These datasets span different imaging modalities, data sizes, and label granularities, confirming generalization capabilities across severely different conditions. The code will be released upon acceptance.

1 Introduction

Deep learning models have achieved remarkable success over the past decade, yielding exceptional results in various computer vision tasks ranging from image classification to instance segmentation. However, ensuring that models generalize reliably across distribution shifts remains a fundamental challenge, especially in safety-critical applications. For instance, autonomous driving systems must generalize across varying scenery, lighting, and weather conditions at test time (Bijelic et al., 2020; Kumar & Muhammad, 2023). Similarly, medical imaging models face different domain-generalization challenges, e.g., shifts in patient populations, tissue-staining protocols, or scanner manufacturers (Ktena et al., 2024; Čevora et al., 2024). These may seem subtle compared to outdoor settings, yet they still strongly affect performance. Robustness to such subtle but consequential domain changes is therefore essential for safe deployment of AI in hospitals and clinics. Most domain-shift remedies in medical imaging span data augmentations (Zhang et al., 2018; Di Salvo et al., 2024) and Euclidean representation learning (Arjovsky et al., 2019; Sagawa et al., 2020; Krueger et al., 2021).

While effective in many settings, Euclidean embeddings offer a uniform, flat geometry that may not align with the hierarchical relationships often present in clinical data. On the other hand, the hyperbolic manifold has gained notable traction in recent years (Mettes et al., 2024). Indeed, it offers a natural remedy: its constant negative curvature mirrors hierarchical structures by allocating exponentially increasing space for finergrained distinctions, exhibiting notable performances in many vision tasks. However, end-to-end hyperbolic networks can be unstable on large datasets (Ayubcha et al., 2024) and remain underutilized in medical imaging. To overcome these stability challenges, we project Euclidean embeddings from a frozen foundation model into a lightweight hyperbolic manifold and demonstrate its clear advantages over Euclidean baselines across eleven medical datasets.

Subsequently, we introduce a two-branch training strategy with domain-invariant distillation, as illustrated in Figure 1. This approach learns both fine-grained and domain-agnostic representations, yielding consistent and substantial domain-generalization improvements on three datasets: Fitzpatrick17k (dermatology), Camelyon17-Wilds (histopathology), and a cross-dataset retinal imaging dataset (Karthik & Dane, 2019; Porwal et al., 2018; Decencière et al., 2014; Liu et al., 2022b).

To motivate and validate the learning dynamics of our two-branch strategy, we also report two targeted ablation studies. First, we vary the latent dimensionality of a single-branch model to quantify how its capacity influences domain invariance versus label discrimination. Second, we compare low-dimensional against high-dimensional distillation, demonstrating that the former yields significant robustness gains that cannot be explained by a mere increase of parameter count. In summary, our contributions are:

- We demonstrate that hyperbolic embeddings significantly outperform (p < 0.05) Euclidean ones in classification accuracy across eleven in-distribution (ID) medical imaging datasets. These span a diverse range of imaging modalities (9), sample sizes (10^2-10^5) , and label granularities (2-11).
- We introduce a novel hyperbolic two-branch training strategy with domain-invariant distillation. This approach significantly enhances domain generalization (DG) performance, measured by the area under the receiver operating curve (AUC), in dermatology, histopathology, and retinal imaging.
- Ablation studies on bottleneck dimension and manifold geometry reveal two key findings. First, a 2D low-dimensional branch effectively balances domain invariance with label discrimination. Second, hyperbolic distillation exhibits consistent robustness improvements, unlike its Euclidean counterpart.

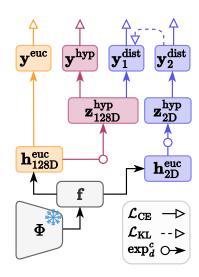


Figure 1: Given a frozen Euclidean feature extractor Φ that outputs \mathbf{f} , ERM applies a Euclidean linear probe over a 128D projection $\mathbf{h}_{128\mathrm{D}}$. HypERM additionally uses a fixed exponential map \exp^c_{128} to classify over hyperbolic embeddings $\mathbf{z}_{128\mathrm{D}}$. Our method, HypDIST introduces a second projection $\mathbf{h}_{2\mathrm{D}}$ followed by \exp^c_2 to yield $\mathbf{z}_{2\mathrm{D}}$. The logits of this low-dimensional branch are used as targets in the distillation loss, transferring domain-agnostic information into the high-dimensional branch.

2 Related works

2.1 Hyperbolic manifold

Hyperbolic spaces have emerged as a powerful tool for modeling hierarchical and tree-like data structures (Mettes et al., 2024). Recent work demonstrates their effectiveness across natural language processing (Dhingra et al., 2018), few-shot learning (Guo et al., 2022; Khrulkov et al., 2020), hierarchical classification (Dhall et al., 2020), metric learning (Ermolov et al., 2022; Bi et al., 2025), semantic segmentation (Atigh et al., 2022), out-of-distribution detection (Guo et al., 2022), category discovery (Liu et al., 2025), and anomaly detection (Li et al., 2024; Gonzalez-Jimenez et al., 2025). Despite these successes, hyperbolic representations remain underexplored in medical contexts. Existing efforts include fine-grained classification (Yu et al., 2022; Ramirez et al., 2025), multi-modal neuroimaging (Ayubcha et al., 2024), and anomaly detection (Gonzalez-Jimenez et al., 2025). However, fully hyperbolic networks often suffer from training instability on large datasets (Ayubcha et al., 2024).

To combine the strengths of hyperbolic embeddings with stable training, we follow the projection-based approach of (Ermolov et al., 2022), but unlike their end-to-end backbone fine-tuning, we freeze a pre-trained Euclidean backbone and append lightweight hyperbolic projection layers. We evaluate these representations for domain generalization, analyzing how embedding dimensionality influences the separation of domain-specific versus domain-agnostic features.

2.2 Domain Generalization

The community has developed a variety of domain-generalization methods, primarily representation-learning techniques such as adversarial learning (Ganin et al., 2016), invariant risk minimization (Arjovsky et al., 2019), and meta-learning (Li et al., 2018a), often relying on domain labels. To boost robustness, image and latent augmentation strategies like AugMix (Hendrycks et al., 2019), and MixStyle (Zhou et al., 2024) are also commonly utilized. Furthermore, recent works have shown that targeted augmentations offer greater gains than domain-agnostic ones (Gao et al., 2023; Di Salvo et al., 2024).

Our approach takes advantage of the hyperbolic manifold, whose constant negative curvature more accurately reflects the complexity of clinical data. Similar to Domain Adversarial Neural Networks (DANN) (Ganin et al., 2016), we introduce a second branch to promote domain invariance throughout the network. However, instead of relying on domain labels and an adversarial training strategy, our method achieves invariance in a fully unsupervised manner.

We accomplish this goal by employing a low-dimensional manifold, which has been empirically demonstrated not to discriminate between domains (cf. Section 5.1).

2.3 Information distillation

Knowledge distillation, originally proposed to compress large "teacher" networks into smaller "students", has also been adopted for domain generalization by transferring domain-invariant features. Empirical works suggest that early network layers often encode domain-specific information (Zhou et al., 2024).

To this extent, prior works exploit this property by distilling final-layer predictions into randomly selected intermediate classifiers to encourage invariance throughout the network (Sultana et al., 2022). Subsequent refinements introduce logit softening to further stabilize the distillation process (Galappaththige et al., 2024).

While Euclidean distillation is well studied in prior works, to the best of our knowledge, its application in hyperbolic space remains limited. Recently, Yang et al. (2025) focus on hyperbolic distillation for cross-domain few-shot learning, a task resembling domain adaptation, thereby relying on target data. In contrast, our goal is to improve robustness to unseen domains without any domain supervision.

To this end, we treat the low-dimensional (*i.e.*, domain-invariant) hyperbolic branch as the teacher for the high-dimensional one. This cross-branch distillation transfers compact, domain-agnostic knowledge and consistently outperforms Euclidean baselines in robustness to distribution shifts.

3 Method

3.1 Hyperbolic space

The *n*-dimensional hyperbolic space \mathbb{H}^n naturally offers a geometry suited for complex, hierarchical data structures, such as medical images. While Euclidean space has flat geometry, *i.e.*, with curvature c = 0, hyperbolic space has a *constant negative curvature*, which can effectively capture the inherent hierarchical feature relations of image data (Mettes et al., 2024).

Among the several isometric models with the Euclidean space, we use the widely adopted Poincaré ball model $(\mathbb{D}_c^n, g^{\mathbb{D}})$ to represent an *n*-dimensional hyperbolic space (Atigh et al., 2022; Ermolov et al., 2022; Guo et al., 2022; Khrulkov et al., 2020).

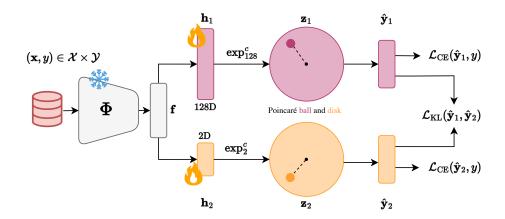


Figure 2: Given an input image-label pair $(\mathbf{x}, y) \in \mathcal{X} \times \mathcal{Y}$, we extract an image embedding $\mathbf{f} = \Phi(\mathbf{x}) \in \mathbb{R}^n$, where n depends on the chosen backbone. This is projected via two heads into Euclidean embeddings $\mathbf{h}_1 \in \mathbb{R}^{128}$ and $\mathbf{h}_2 \in \mathbb{R}^2$. Each is mapped into its respective Poincaré ball \mathbb{D}_c^d by \exp_d^c , yielding hyperbolic embeddings \mathbf{z}_1 and \mathbf{z}_2 . Both branches incur cross-entropy losses on their Multiclass Logistic Regression (MLR) logits $\hat{\mathbf{y}}_1$ and $\hat{\mathbf{y}}_2$. In addition, $\hat{\mathbf{y}}_2$ also supervises $\hat{\mathbf{y}}_1$ via a KL distillation term. The high-dimensional branch captures fine-grained, class-specific features for inference, and the low-dimensional branch enforces an information bottleneck that promotes domain-invariant representations.

Following the notation of Khrulkov et al. (2020), we define the manifold is defined as $\mathbb{D}_c^n = \{\mathbf{x} \in \mathbb{R}^n : c \|\mathbf{x}\|^2 < 1\}$, where c > 0 is a scaling factor controlling the magnitude of the negative curvature. The metric (i.e., rule for measuring distances) of this space is given by:

$$g^{\mathbb{D}}(\mathbf{x}) = (\lambda_{\mathbf{x}}^c)^2 g^E \quad \lambda_{\mathbf{x}}^c = \frac{2}{1 - c \|\mathbf{x}\|^2}$$
 (1)

where $g^E = I_n$ is the standard Euclidean metric. In simple terms, the conformal factor $\lambda_{\mathbf{x}}^c$ scales the usual Euclidean distances, adapting them to the curved geometry of the Poincaré ball. To perform vector operations similar to addition in Euclidean space, the gyrovector formalism (Ungar, 2009) is adopted, which defines the Möbius addition of two points $\mathbf{x}, \mathbf{y} \in \mathbb{D}_c^n$ as:

$$\mathbf{x} \oplus_{c} \mathbf{y} = \frac{(1 + 2c\langle \mathbf{x}, \mathbf{y} \rangle + c\|\mathbf{y}\|^{2})\mathbf{x} + (1 - c\|\mathbf{x}\|^{2})\mathbf{y}}{1 + 2c\langle \mathbf{x}, \mathbf{y} \rangle + c^{2}\|\mathbf{x}\|^{2}\|\mathbf{y}\|^{2}}$$
(2)

This operation generalizes the familiar concept of vector addition to our curved space. Based on Möbius addition, the geodesic (*i.e.*, shortest-path) distance between two points $\mathbf{x}, \mathbf{y} \in \mathbb{D}_c^n$ is given by:

$$D_{\text{hyp}}(\mathbf{x}, \mathbf{y}) = \frac{2}{\sqrt{c}} \operatorname{arctanh} \left(\sqrt{c} \| - \mathbf{x} \oplus_{c} \mathbf{y} \| \right)$$
(3)

Notably, as the curvature parameter c approaches 0, the hyperbolic distance converges to twice the Euclidean distance, i.e., $\lim_{c\to 0} D_{\text{hyp}}(\mathbf{x}, \mathbf{y}) = 2\|\mathbf{x} - \mathbf{y}\|$.

To fill the gap between conventional feature extractors (which operate in Euclidean space) and our hyperbolic representation, we employ the *exponential map*. This bijective mapping projects a Euclidean vector $\mathbf{v} \in \mathbb{R}^n$ onto the hyperbolic manifold at a chosen base point \mathbf{x}_B (usually set to $\mathbf{0}$). The exponential map is defined as:

$$\exp_{\mathbf{x}_B}^c(\mathbf{v}) = \mathbf{x}_B \oplus_c \left(\tanh\left(\frac{\sqrt{c}\lambda_{\mathbf{x}}^c \|\mathbf{v}\|}{2}\right) \frac{\mathbf{v}}{\sqrt{c}\|\mathbf{v}\|} \right)$$
(4)

This exponential mapping ensures that the features are faithfully transferred from the Euclidean to the hyperbolic manifold. Its inverse, i.e., the logarithmic map, allows points in the hyperbolic space to be projected back into the Euclidean space.

3.2 Multi-branch learning

To further exploit hyperbolic geometry for domain generalization, we draw inspiration from Domain-Adversarial Neural Networks (DANN) (Ganin et al., 2016) while eliminating the need for explicit domain labels and gradient reversal. As illustrated in Figure 2, given an image-label pair $(\mathbf{x}, y) \in \mathcal{X} \times \mathcal{Y}$, and a frozen Euclidean backbone Φ , we first extract an image embedding $\mathbf{f} = \Phi(\mathbf{x}) \in \mathbb{R}^n$, where n depends on the size of the chosen backbone. For "small", "base", and "large" ViT backbones, n is 384, 768, and 1024, respectively.

Two projection heads $h_i : \mathbb{R}^d \to \mathbb{R}^{d_i}$ reduce \mathbf{f} to Euclidean embeddings $\mathbf{h_i} = h_i(\mathbf{f})$, with $i \in \{1, 2\}$, $d_1 = 128$ and $d_2 = 2$. Subsequently, given a curvature scaler $c \in \mathbb{R}$, we apply the exponential map \exp^c to each projection to obtain a hyperbolic representation in the Poincaré ball $\mathbb{D}_c^{d_i}$.

$$\mathbf{z}_1 = \exp^c(\mathbf{h}_1) \in \mathbb{D}_c^{128} \qquad \mathbf{z}_2 = \exp^c(\mathbf{h}_2) \in \mathbb{D}_c^2$$
 (5)

The high-dimensional branch captures fine-grained, class- and domain-specific features, whereas the low-dimensional branch introduces an information bottleneck, encouraging domain-invariant features and also facilitates direct visualization of the embeddings.

3.2.1 Domain-invariant distillation

Each hyperbolic embedding \mathbf{z}_i is then passed through a Multiclass Logistic Regression (MLR) head to produce logits $\hat{\mathbf{y}}_i = \text{MLR}(\mathbf{z}_i)$, having a dimension equal to the number of classes for both branches i = 1, 2. During training, we apply the cross-entropy loss to both branches, but at inference time only the high-dimensional branch is used for inference. To transfer domain-agnostic knowledge from the bottleneck branch into the main branch, we introduce a cross-branch distillation loss:

$$\mathcal{L}_{KL}(\hat{\mathbf{y}}_1, \hat{\mathbf{y}}_2) = T^2 \cdot KL\left(\sigma(\hat{\mathbf{y}}_2; T) || \sigma(\hat{\mathbf{y}}_1; T)\right)$$
(6)

where KL is the Kullback–Leibler divergence, and $T \in \mathbb{R}$ is a temperature scaler. Notably, this distillation works at the class-logit level, allowing information transfer between branches despite their differing embedding dimensions.

3.2.2 Overall objective

The final training objective combines the cross-entropy losses from both branches and the distillation loss, weighted with $\lambda \in \mathbb{R}$:

$$\mathcal{L} = \mathcal{L}_{CE}(\hat{\mathbf{y}}_1, \mathbf{y}) + \mathcal{L}_{CE}(\hat{\mathbf{y}}_2, \mathbf{y}) + \lambda \mathcal{L}_{KL}(\hat{\mathbf{y}}_1, \hat{\mathbf{y}}_2)$$
(7)

By merging domain-sensitive high-dimensional features $\mathbf{z_1}$ with a low-dimensional, domain-agnostic representation $\mathbf{z_2}$, our method learns both global, domain-invariant features and local, domain-specific features, implicitly taking advantage of the structure of the hyperbolic manifold. During inference, we only use the logits from the high-dimensional branch $\hat{\mathbf{y}}_1$, as they capture more fine-grained details, thereby providing richer semantic information.

4 Experimental results

In this section, we empirically evaluate and compare the advantages of representing medical image data within a hyperbolic manifold to the traditional Euclidean one. Our experiments are designed to assess three key aspects: (1) in-distribution (ID) image classification, (2) robustness against distribution shifts, and (3) the influence of manifold geometry and latent bottleneck size on robustness.

Across our experiments, we utilize a frozen pre-trained foundation model as a feature extractor, followed by a linear layer of dimension $d_1 = 128$ (Ermolov et al., 2022). This head is instantiated in *three variants* that form the basis of our evaluation. First, a Euclidean ERM classifier implemented with a canonical softmax layer. Second, a hyperbolic counterpart (HypERM), which projects the linear layer onto the Poincaré ball and

applies multi-class logistic regression (MLR) (Ganea et al., 2018). Third, our proposed distillation approach (HypDIST) introduces an additional low-dimensional branch ($d_2=2$) and a distillation loss controlled by T=3 and $\lambda=0.2$. For hyperbolic models, we fix the curvature at c=1.0 and use a feature-clipping radius of r=1.0 to ensure numerical stability (Guo et al., 2022). All models are trained using the AdamW optimizer (Loshchilov & Hutter, 2019) with cross-entropy loss and a cosine-annealing learning-rate schedule. We use an initial learning rate of 1×10^{-4} with a batch size of 64, and apply early stopping after 10 epochs without improvement. The sensitivity to the hyperparameters of HypDIST is reported in Table 4.

4.1 Medical image classification

We first evaluate the accuracy performance achieved across eleven real-world medical datasets from the dataset collection of Yang et al. (2023), with default train-val-test splits and resolution 224×224 . These datasets, detailed in Table 1, span a diverse range of imaging modalities (9), sample sizes (10^2-10^5), and label granularities (2-11). Notably, we exclude *Chest* from our experiments because of its multi-label setup.

We further utilize three distinct ViT-based backbones: ViT-S (Dosovitskiy et al., 2021), DeiT3-S (Touvron et al., 2022), and DINOv2-S (Oquab et al., 2024). This allows us to assess whether the hyperbolic gains consistently transfer across architectures. For each backbone and dataset, we report the average classification accuracy (over five seed runs) for both single-branch Euclidean (ERM) and hyperbolic classifiers (HypERM).

Table 1: Dataset details including data source, imaging modality, type of classification task (with number of classes), and predefined data splits. ML: Multi-Label, MC: Multi-Class, BC: Binary-Class, OR: Ordinary Regression. Table adapted from Doerrich et al. (2025).

Dataset	Source	Imaging Modality	Task (# Classes)	Number of Samples Train / Val / Test		
Blood	Acevedo et al. (2020)	Blood Cell Microscope	MC (8)	11,959 / 1,712 / 3,421		
Breast	Al-Dhabyani et al. (2020)	Breast Ultrasound	BC (2)	546 / 78 / 156		
Chest	Wang et al. (2017)	Chest X-Ray	ML-BC(2)	78,468 / 11,219 / 22,433		
Derma	Tschandl et al. (2018) Codella et al. (2018)	Dermatoscope	MC (7)	7,007 / 1,003 / 2,005		
OCT	Kermany et al. (2018)	Retinal OCT	MC(4)	97,477 / 10,832 / 1,000		
OrganA	Bilic et al. (2023) Xu et al. (2019)	Abdominal CT	MC (11)	34,561 / 6,491 / 17,778		
OrganC	Bilic et al. (2023) Xu et al. (2019)	Abdominal CT	MC (11)	12,975 / 2,392 / 8,216		
OrganS	Bilic et al. (2023) Xu et al. (2019)	Abdominal CT	MC (11)	$13{,}932 \; / \; 2{,}452 \; / \; 8{,}827$		
Path	Kather et al. (2019)	Colon Pathology	MC (11)	89,996 / 10,004 / 7,180		
Pneumonia	Kermany et al. (2018)	Chest X-Ray	BC (2)	4,708 / 524 / 624		
Retina	Liu et al. (2022a)	Fundus Camera	OR(5)	1,080 / 120 / 400		
Tissue	Ljosa et al. (2012)	Kidney Cortex Microscope	MC (8)	165,466 / 23,640 / 47,280		

4.1.1 Results

The results reported in Table 2 demonstrate that, overall, hyperbolic representation learning consistently improves classification performance, although the magnitude of the gains varies depending on the specific dataset and backbone architecture. With the ViT backbone, hyperbolic embeddings outperform Euclidean on 8 of 11 tasks, with the largest gains on OCT (+1.32%), Tissue (+1.18%), and Pneumonia (+1.12%), a minor drop on Retina, and negligible changes on Blood and OrganA. With DeiT3, hyperbolic models score first on 10 of 11 datasets, most notably on Pneumonia, Derma, and Breast (gains from +1.41% to +1.89%). Using DINOv2, the best backbone overall, hyperbolic embeddings outperform Euclidean ones in 10 out of 11 tasks, with the biggest increases on OCT (+2.70%), Path (+1.48%), and Tissue (+1.36%). To summarize, across all backbones and datasets, hyperbolic classifiers offer statistically significant gains over Euclidean ones (Wilcoxon signed-rank test, p < 0.05).

Table 2: Accuracy (averaged over five runs) of Euclidean (ERM) and hyperbolic (HypERM) classifiers on eleven medical datasets, evaluated with three ViT-based backbones. We highlight in bold the **best manifold** across each backbone and dataset. Notably, the hyperbolic representation is significantly better than the Euclidean one across all experiments (Wilcoxon signed-rank test, p < 0.05).

	\mathbf{Br}	Pn	Re	De	Bl	OrC	OrS	OrA	Pa	Ti	OCT	Avg
$\overline{ ext{ViT}}$												
ERM	82.56	87.21	61.90	81.65	97.68	85.42	76.09	91.50	93.48	61.04	74.02	81.14
HypERM	83.08	88.33	61.45	82.19	97.61	85.72	77.07	91.45	93.54	62.22	75.34	81.64
DeiT3												
ERM	82.56	88.59	59.15	77.90	96.17	83.33	72.18	89.44	90.78	59.34	78.54	79.82
HypERM	83.97	90.48	59.65	79.44	96.50	83.61	72.03	89.48	91.23	60.61	78.90	$\boldsymbol{80.54}$
DINOv2												
ERM	85.77	89.94	64.65	82.77	97.90	88.04	76.98	92.82	92.46	61.95	83.60	83.35
HypERM	85.38	90.38	65.40	83.59	97.91	$\bf 88.32$	77.24	92.88	93.94	63.31	86.30	84.06

4.2 Domain Generalization

4.2.1 Datasets

We evaluate domain generalization performance under out-of-distribution (OOD) conditions on three established medical dataset collections.

Fitzpatrick17k (Groh et al., 2021) is a dermatological dataset including 16,577 samples labeled with three disease classes and skin-tone information according to the Fitzpatrick scale. The Fitzpatrick skin-type scale categorizes human skin tones from Type I (very light) to Type VI (deeply pigmented), providing a standardized measure of skin pigmentation from light to dark. We aggregate the skin tone information in three groups (i.e., domains), as in Daneshjou et al. (2022): {I-II, III-IV, V-VI}. Given the limited number of domains, we assess the performance on a leave-one-domain-out protocol (LODO).

Camelyon17-Wilds (Bandi et al., 2018; Koh et al., 2021) is a standard domain generalization (binary) benchmark for histopathology consisting of 422,394 images acquired from five hospitals. We follow the default splits, training on three hospitals, validating on one, and testing on one.

For *Retina*, a 5-class diabetic retinopathy classification task, we construct cross-dataset shifts using four widely adopted fundus imaging datasets (Che et al., 2023; Zhou et al., 2023). APTOS 2019 (Karthik & Dane, 2019) and DeepDR (Liu et al., 2022b) serve as the in-distribution training data, comprising a total of 4,608 labeled samples. IDRiD (Porwal et al., 2018) forms the validation domain with 1,744 samples, while Messidor-2 (Decencière et al., 2014) provides the test domain with 7,000 samples. These datasets differ in acquisition devices, grading protocols, and patient cohorts, thereby inducing realistic distribution shifts.

4.2.2 Methods

We compare HypDIST against standard empirical risk minimization (ERM) and its hyperbolic variant (HypERM). In addition, we evaluate Euclidean embeddings enhanced with data augmentations such as RandAugment (Cubuk et al., 2020), AugMix (Hendrycks et al., 2019)), and Med-C (Di Salvo et al., 2024). We also include established methods such as IRM (Arjovsky et al., 2019), GroupDRO (Sagawa et al., 2020), VREX (Krueger et al., 2021), DANN and CDANN (Ganin et al., 2016), CORAL (Sun & Saenko, 2016), MMD (Li et al., 2018b). All methods use DINOv2 image embeddings and the default hyperparameters defined in DomainBed (Gulrajani & Lopez-Paz, 2021). We report the area under the receiver operating curve (AUC), averaged over five seeds to accommodate varying class imbalance and the overall more challenging (OOD) conditions.

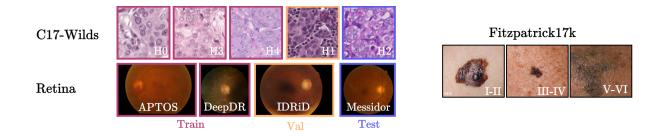


Figure 3: Overview of dataset domains. Top-Left: Camelyon17-Wilds, showing representative "tumor" patches from each contributing hospital (H0–H4). Bottom-Left: Retina, showing representative fundus images (y=4) from each dataset domain (APTOS 2019, DeepDR, IDRiD, Messidor-2). Colored frames indicate the train (pink), validation (orange), and test (purple) subsets. Right: Fitzpatrick17k, showing representative "malignant" skin-lesion images from each of the three skin-tone groups (I–II, III–IV, V–VI).

Table 3: AUC averaged over five runs. Fitzpatrick17k is evaluated using a LODO strategy. For Camelyon17-Wilds and Retina, both val and test set results are reported. We highlight in bold the **best two methods** and underline the **significantly best** (paired t-test, p < 0.05), if their difference is statistically significant. Across all datasets, HypDIST is the significantly best method (Wilcoxon signed-rank test, p < 0.05).

	F17k				C17-Wilds		Ret	OOD	
Method	I–II	III–IV	V-VI	Avg	Val	Test	Val	Test	\mathbf{Avg}
ERM	79.93±0.2	82.88±0.2	79.23±0.3	81.23	97.05±0.1	98.32±0.1	86.65±1.2	78.40±1.3	86.07
Med-C	80.15 ± 0.1	$82.80 {\pm} 0.4$	79.66 ± 0.2	81.38	97.14 ± 0.1	98.22 ± 0.0	$84.85{\pm}0.2$	77.13 ± 0.5	85.71
RandAug	80.04 ± 0.1	$82.86{\pm}0.5$	79.24 ± 0.2	81.28	96.74 ± 0.0	98.15 ± 0.1	$87.85 {\pm} 0.2$	$78.82 {\pm} 0.5$	86.24
AugMix	80.26 ± 0.1	$82.86{\pm}0.5$	$79.25 {\pm} 0.2$	81.34	96.50 ± 0.1	98.06 ± 0.1	86.73 ± 0.3	$79.80 {\pm} 0.4$	86.21
IRM	$76.57 {\pm} 0.7$	80.20 ± 0.4	$78.84 {\pm} 0.4$	78.87	96.98 ± 0.1	$98.17 {\pm} 0.2$	85.04 ± 0.4	$75.64 {\pm} 0.5$	84.11
GroupDRO	80.15 ± 0.2	$82.54 {\pm} 0.2$	78.60 ± 0.6	80.97	97.50 ± 0.1	98.22 ± 0.1	85.71 ± 1.1	77.46 ± 0.7	85.74
V-REX	79.16 ± 0.1	$82.35{\pm}0.6$	79.66 ± 0.3	80.99	97.36 ± 0.1	$98.35 {\pm} 0.1$	87.05 ± 0.3	$78.67 {\pm} 0.4$	86.09
DANN	79.90 ± 0.1	82.47 ± 0.3	79.69 ± 0.4	80.69	97.00 ± 0.1	98.22 ± 0.1	$86.54 {\pm} 0.7$	78.05 ± 0.4	85.98
CDANN	79.71 ± 0.1	$82.44 {\pm} 0.5$	80.02 ± 0.4	80.72	97.04 ± 0.0	98.23 ± 0.1	85.76 ± 0.9	76.92 ± 1.0	85.73
MMD	$78.82 {\pm} 0.1$	$82.15 {\pm} 0.4$	79.56 ± 0.3	80.78	97.02 ± 0.2	$98.27 {\pm} 0.1$	$87.42 {\pm} 0.2$	79.07 ± 0.4	86.05
CORAL	$78.83 {\pm} 0.1$	$82.40{\pm}0.3$	$79.52 {\pm} 0.4$	80.81	97.22 ± 0.1	$98.25 {\pm} 0.2$	87.36 ± 0.2	$79.28 {\pm} 0.4$	86.12
HypERM	$81.93 {\pm} 0.1$	84.31±1.0	$83.56 {\pm} 0.3$	83.96	97.95 ± 0.6	98.07±0.2	87.23±0.9	79.39 ± 0.7	87.49
HypDIST	82.34 ± 0.3	86.28 ± 0.2	84.27 ± 0.3	84.83	98.04 ± 0.3	98.33 ± 0.3	87.34 ± 0.7	80.48 ± 0.5	88.15

4.2.3 Results

As shown in Table 3, Euclidean methods achieve comparable performance overall. Among augmentation methods, Med-C leads on Fitzpatrick17k, while RandAugment and AugMix lead on Retina. Representation-learning methods, such as VREX and MMD, also yield notable benefits on Camelyon17-Wilds and Retina. Regarding the hyperbolic manifold, HypERM (single-branch) outperforms its Euclidean counterpart in all settings except Camelyon17-Wilds (test), where our proposed method, HypDIST, exhibits comparable results with the top-scoring VREX. Notably, while VREX utilizes domain labels during training, our method does not require such information. On the Retina test split, HypDIST outperforms the best Euclidean method, AugMix, by 0.68%. Furthermore, hyperbolic methods exhibit the largest improvements on Fitzpatrick17k. Specifically, HypERM alone significantly boosts AUC, and HypDIST achieves additional significant gains (paired t-test, p < 0.05). This pattern aligns with the magnitude of the shift in skin tone groups. Indeed, Fitzpatrick17k presents the most extreme shift (cf. Figure 3), while the ones observed in Camelyon17-Wilds and Retina are milder. Overall, HypERM delivers superior generalization across a broad range of real-world shifts, with an average improvement of +1.42% over Euclidean embeddings (ERM). Furthermore, our method yields a further statistically significant gain of +0.66% (Wilcoxon signed-rank test, p < 0.05).

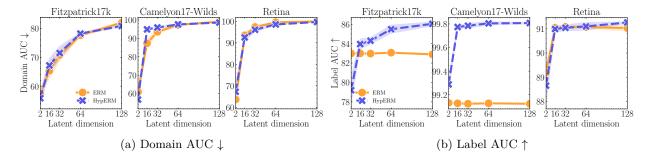


Figure 4: Figure 4a shows the domain AUC (\downarrow) vs. latent dimension d: lower is better (more domain-invariant), while Figure 4b plots the label AUC (\uparrow) vs. d: higher is better (more discriminative). The curves are shown for Euclidean (ERM) and hyperbolic embeddings (HypERM). Results are reported on indistribution splits where all domains appear in train/val/test, yielding 3, 5, and 4 domains for Fitzpatrick17k, Camelyon17-Wilds, and Retina, respectively.

5 Ablation studies

5.1 Latent dimension and generalization

To quantify how the size and manifold of the low-dimensional branch governs the trade-off between domain invariance and label discrimination, we train $single-branch\ classifiers\ (i.e.,\ no\ distillation)$ with embedding dimension $d\in\{2,16,32,64,128\}$ in both Euclidean and hyperbolic spaces. We evaluate on three benchmarks: Fitzpatrick17k (three skin-tone groups, standard ID split), Camelyon17-Wilds (five hospitals), and the Retina cross-dataset (four sources). For Camelyon17-Wilds and Retina, we merge the original train/validation/test splits and re-partition the data into a 70/10/20 stratified split, thereby increasing the number of distinct domain groups and ensuring more reliable invariance estimates. After training each model under identical hyperparameters as previous experiments, we freeze its projection head and fit two linear classifiers on the resulting embeddings: one to predict domain labels (domain-classification AUC, lower means more invariance) and one to predict disease labels (label-classification AUC, higher means more discriminative).

5.1.1 Results

As shown in Figure 4a, the domain-classification AUC is lowest at d=2 for both manifolds and steadily increases with d, confirming that a smaller bottleneck enforces stronger invariance. Crucially, Figure 4b demonstrates that even with a 2D bottleneck, label-classification AUC remains high (up to 99% on Camelyon17) and continues to improve with larger d. Notably, Euclidean embeddings plateau on Fitzpatrick17k and Camelyon17-Wilds, with no further increase on larger d. However, hyperbolic embeddings gain additional accuracy up to d=128, especially on Fitzpatrick17k, with a gap of approximately 3% AUC. Taken together, these results suggest that (1) a very low-dimensional bottleneck provides strong domain invariance with only a modest loss in discriminative power, and (2) hyperbolic embeddings achieve higher label AUC than their Euclidean counterparts, with the largest gains observed at higher dimensions.

5.2 Hyperbolic distillation

To isolate the contribution of our two-branch distillation, we fix the high-dimensional branch $d_1 = 128$ and vary the low-dimensional bottleneck $d_2 \in \{2, 8, 16, 128\}$. For each configuration, we measure the AUC gain of the two-branch model over its single-branch counterpart on the same three benchmarks: Camelyon17-Wilds (test hospital), Retina (test dataset), and Fitzpatrick17k (leave-one-domain-out). This is evaluated on both hyperbolic and Euclidean manifolds.

5.2.1 Results

Figure 5 shows that in hyperbolic space, the largest improvements occur at $d_2=2$ and decline steadily as the bottleneck size grows, confirming that performance gains arise from compact distillation rather than added capacity. Indeed, $d_2=128$ slightly degrades hyperbolic performance. On Camelyon17, Euclidean distillation (DIST) produces surprisingly negative AUC changes for all d_2 , while hyperbolic distillation (HypDIST) yields positive gains at every reasonable bottleneck size. On Retina, both manifolds benefit at $d_2=2$. Although Euclidean gains appear larger at this point, the hyperbolic single-branch baseline itself is already 0.99% higher than Euclidean (cf. Table 3). On Fitzpatrick17k, HypDIST consistently improves performance across all folds, achieving up to a 2% AUC boost on the III-IV split versus only 0.5% for Euclidean. Overall, hyperbolic distillation yields consistent, positive AUC gains across all datasets and bottleneck sizes, while Euclidean distillation produces uneven improvements.

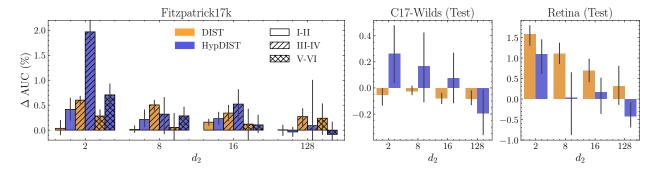


Figure 5: Improvement in AUC of two-branch distillation over single-branch baseline (Δ AUC) for Euclidean and hyperbolic manifolds, while varying bottleneck dimension d_2 . They are termed DIST and HypDIST, respectively. From left to right: (1) Fitzpatrick17k leave-one-domain-out folds (I-II, III-IV, V-VI), differentiated with bar hatches, (2) Camelyon17-Wilds (test), and (3) Retina (test). While Euclidean distillation gains vary by dataset, hyperbolic distillation provides positive Δ AUC across every task and reasonable (*i.e.*, < 128) bottleneck size.

5.3 Sensitivity analysis

Finally, we perform a sensitivity analysis over our two key hyperparameters: the distillation weight λ , and the temperature T. We sweep over values for $\lambda \in \{0.1, 0.2, 0.5, 1.0\}$ and $T \in \{1.0, 3.0, 5.0, 10.0\}$ on Fitzpatrick17k (I–II, III–IV, V–VI), Retina (test), and Camelyon17-Wilds (test), reporting the mean AUC and its deviation of across these settings (each averaged over five seeds).

5.3.1 Results

As indicated by the standard deviations reported in Table 4, performance varies only marginally with λ and T (i.e., $\sigma \in [0.1, 0.7]$). This empirically demonstrates the robustness of our proposed method with respect to the chosen hyperparameters, thereby confirming its superiority against Euclidean baselines.

Table 4: Average AUC and standard deviation across different combinations of λ and T, evaluated on Fitzpatrick17k, Camelyon17-Wilds, and Retina.

F17k(I-II)	F17k(III-IV)	F17k(V-VI)	${ m C17\text{-}Wilds}$	Retina
81.96 ± 0.4	$85.55 {\pm} 0.7$	$83.81 {\pm} 0.4$	98.30 ± 0.1	80.19 ± 0.2

6 Conclusion

6.1 Limitations

Our current implementation fixes the curvature parameter c and uses a frozen Euclidean backbone followed by lightweight hyperbolic MLR heads. While this design enables stable and efficient training, a static curvature may not be optimal across datasets or manifold dimensions. Allowing curvature to be learnable, or adopting data- or manifold-adaptive curvature schedules, could more effectively capture the geometric structure of each task. Moreover, although freezing the feature extractor offers substantial computational savings, fine-tuning the backbone or training a fully hyperbolic classifier may further amplify the benefits of the proposed approach.

6.2 Discussion

Our work presents a hyperbolic representation learning framework for medical imaging that leverages the inherent hierarchical structure of clinical data. Across diverse modalities and scales, replacing Euclidean embeddings with our hyperbolic projections consistently improves in-distribution accuracy. Our two-branch, domain-invariant distillation scheme further boosts out-of-distribution performance on three challenging benchmarks. Crucially, ablation studies confirm that these gains arise from the compact low-dimensional distillation, not merely from added capacity, and that hyperbolic distillation outperforms its Euclidean counterpart. Overall, hyperbolic embeddings offer a straightforward yet powerful alternative for building robust, generalizable medical AI systems.

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