

A Robust Medical Image Recognition System Employing Edge-Based Feature Vector Representation

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Abstract. The medical image recognition system based on a robust edge-based feature vector representation, called Projected Principal-Edge Distribution (PPED), has been developed. The robust nature of the PPED vector representation has been demonstrated in the cephalometric landmark identification, expert dentists' practice. In contradistinction with the previous works for the optimization of the PPED, the feasibility of the system has been demonstrated by applying to 26 cephalometric landmarks with 250 head films and the ones with the degradation. The system has been successfully applied to not only the cephalometric landmarks on the hard tissue but also the ones on the soft tissue without tuning the algorithm. The robust nature of the system against the degradation in the X-ray films has also been demonstrated.

1 Introduction

There has been considerable interest in the development of human-like expert systems that can assist professionals or replace a certain part of the professionals' work, especially in the medical area. In the cephalometric landmark identification which is one of the most important expert procedures in diagnosis, a dentist is requested to identify a number of predefined anatomical points as shown in Fig. 1. For this, the edge tracing technique [1], the spatial spectroscopy technique [2], and the neural network with genetic algorithm [3] were developed. The recognition performance by the edge tracing technique is very sensitive to the quality of head films and easily degraded by X-ray exposure conditions. And the other two techniques utilized probability distribution information, paying high computational costs. In addition, the recognition performances were not very satisfactory.

Our approach is based on the template matching technique. Although it is computationally very expensive and takes a lot of time on general-purpose MPUs, very powerful maximum-likelihood search VLSI hardware systems, called *associative processors*, have been developed in our laboratory in both digital [4] and analog technologies [5].

2 Projected Principal-Edge Distribution (PPED)

In this section, one of the most important techniques in the image recognition system, edge-based feature vector generation algorithm, is discussed. Figure 2 (a) illustrates the outline of the Projected Principal-Edge Distribution (PPED) vector representation procedure (formerly called Principal Axis Projection (PAP)) by taking the landmark L1 (the toe of the lower anterior tooth) as an example. The input image (64x64 pels) is firstly subjected to pixel-by-pixel 5x5 spatial filtering with threshold operation to determine whether an edge really exists or not. The median value of intensity variance distribution is utilized as the threshold value to normalize the contrast of an image and eliminate local intensity variation. Feature maps containing edge presence information as binary flags are generated for principal directions: horizontal (H); vertical (V); +45-degree (+45); and -45-degree (-45). The two-dimensional bit array in the feature map is reduced to a 1D array of numerals by projection in the edge direction, for instance, horizontal edge information is projected onto the vertical axis and edge information in other directions are operated in the same way. Then the projected data sets of numerals are subsequently connected as a series and smoothed to form a feature vector. The details of the PPED processing are described in Ref. [11].

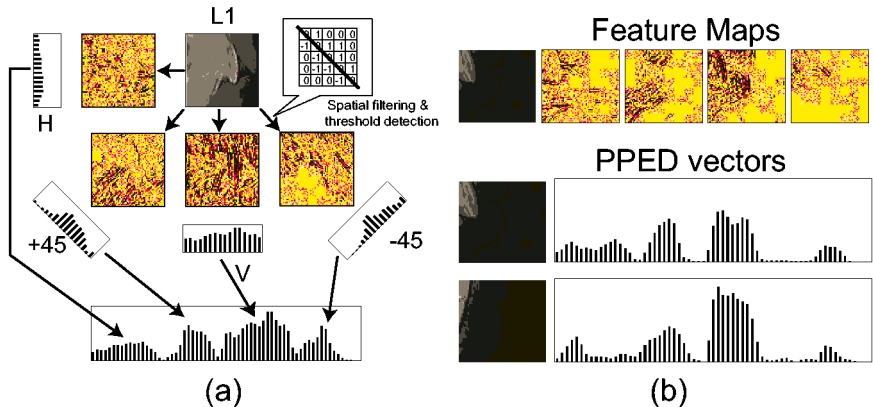


Fig. 2. (a) PPED image representation algorithm (b) Feature maps and PPED vectors for L1 (the most anterior point of the lower lip).

The feature maps and PPED vectors for the landmark L1 (the most anterior point of the lower lip) patterns on the soft tissue are presented in Fig. 2 (b). In the feature maps, it is seen that very faint edge information is successfully detected. While generally cephalometric landmark images vary a lot from patient to patient, they are pretty close to each other in the PPED vector space. This feature of PPED image representation is very suitable for the template matching processing on the associative processors.

3 Experimental

Two hundred and fifty X-rays (800x600 pels) were taken from the retention files at the Department of Orthodontics, Osaka University and utilized for experiments. 100 films were used for template generation and other 150 films were used for recognition tests. Fifteen template vectors were generated from the 100 head films by the Generalized Lloyd learning algorithm, as shown in the results in Ref. [8]. Twenty-six cephalometric landmarks including the cephalometric landmarks on the soft tissue were employed as recognition targets. A 64x64 pels area was taken from a head film as an input image, and was transformed to a PPED vector. The input image was then matched with the template vectors in the PPED vector space. The template having the minimum dissimilarity (the Manhattan distance was utilized as the measure.) was selected as a winner pattern and the dissimilarity value was recorded. By pixel-by-pixel scanning the input image in a test head film, cephalometric landmarks were identified as the minima of dissimilarity. In addition, macro vision search [9] was also applied to some cephalometric landmarks. In this technique, the recognition processing was carried out in the low resolution in order to utilize more surrounding information and locate the correct position roughly before the high-resolution search. All the recognition results were confirmed by an expert dentist to verify the feasibility of the image recognition system.

4 Results and Discussion

The performances of all cephalometric landmark identifications are demonstrated in Fig. 3. While the same image recognition algorithm was applied to many kinds of cephalometric landmarks, not only the landmarks on the hard tissue but also the very faint landmarks on the soft tissue (pn, ls, em, li) were successfully identified. However, there are some landmarks for which the system did not show the good performances (MPo, Ba, Gn, Go, Ar, and Cd).

The result of applying macro vision search to the recognition of the landmark Gn (the most posterior inferior point at the angle of the mandible) is shown in Fig. 4 (a). While a false result is demonstrated in the simple search, the correct point is identified in the macro vision search. This result is achieved through eliminating local details and utilizing more surrounding information in the macro vision search. The recognition performances for the landmarks (MPo, Ba, Gn, Go, Ar, and Cd) are also shown in Fig. 4 (b). All the recognition performances except MPo have been improved by introducing the macro vision search technique.

As for MPo (the most superior surface of the ear rod), by increasing the number of head films for template generation from 100 to 150 including 50 additional head films, it is seen that the recognition performance was improved to 72%. It is because MPo has much more variations from patient to patient than the other landmarks and a lot of samples for template generation were needed.

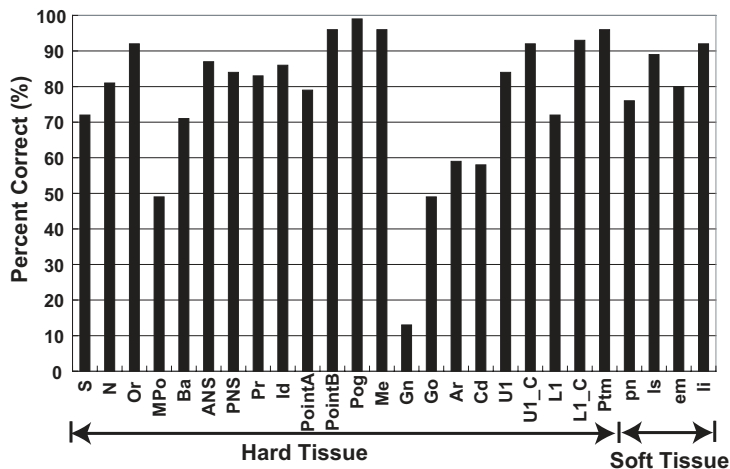


Fig. 3. Overall recognition performances.

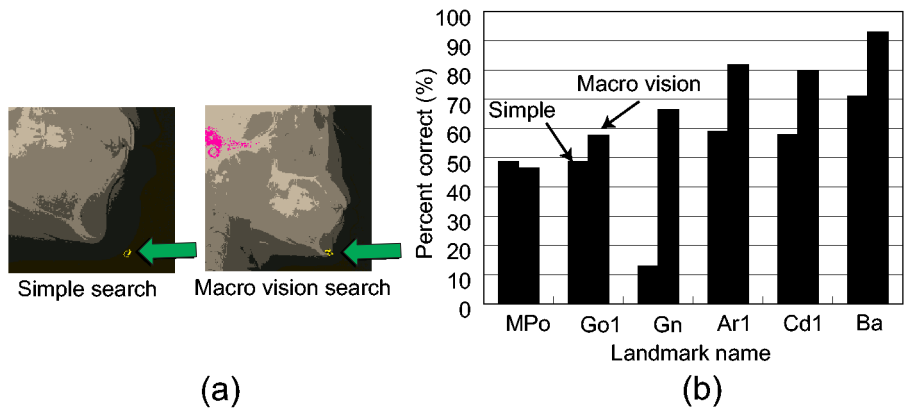


Fig. 4. (a) Recognition results of Gn and (b) recognition performances for several landmarks by macro vision search.

The same algorithm was also applied to the X-ray images showing degradation, as displayed in Fig. 5 (a). The degraded image has a lot of vertical line noise generated by taking X-ray picture in an improper condition. However, the robust recognition performance for the landmark Me has been demonstrated in Fig. 5 (b) against the degradation in head film images.

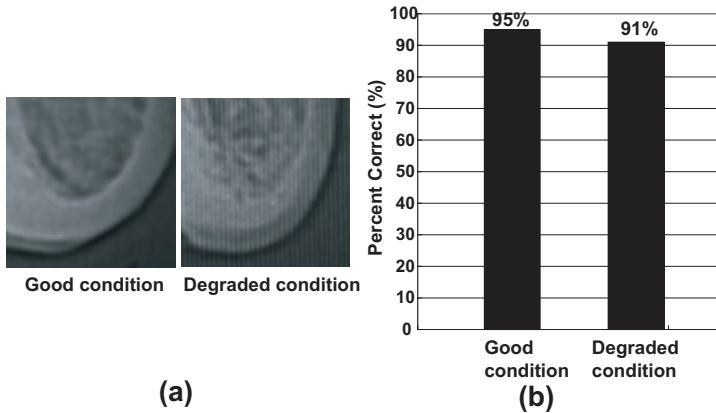


Fig. 5. (a) X-ray images (Good and Degraded) and (b) recognition performances of Me against the degradation in the quality of head film images.

5 Conclusion

The feasibility of the medical image recognition system based on PPED vector representation has been demonstrated by applying to 26 cephalometric landmarks with 250 head films and the ones showing the degradation. The same algorithm has been successfully applied to not only the cephalometric landmarks on the hard tissue but also the ones on the soft tissue without tuning the algorithm.

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