

Classification and Feature Selection for Craniosynostosis

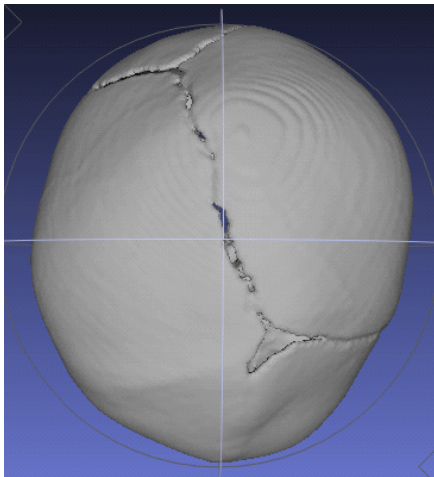
Shulin Yang, Linda G. Shapiro, Michael L.
Cunningham, Matthew Speltz, Su-In Lee

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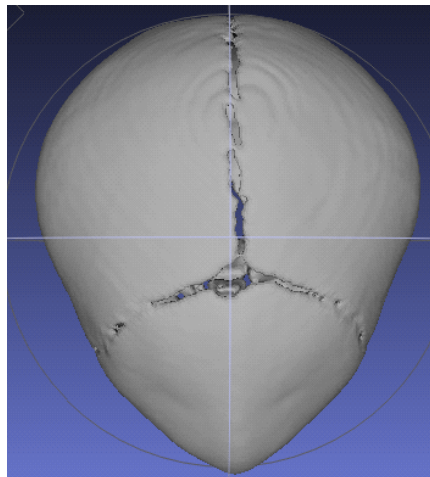
Craniosynostosis

- Craniosynostosis is a common congenital condition in which one or more of the fibrous sutures in an infant's calvaria fuse prematurely.

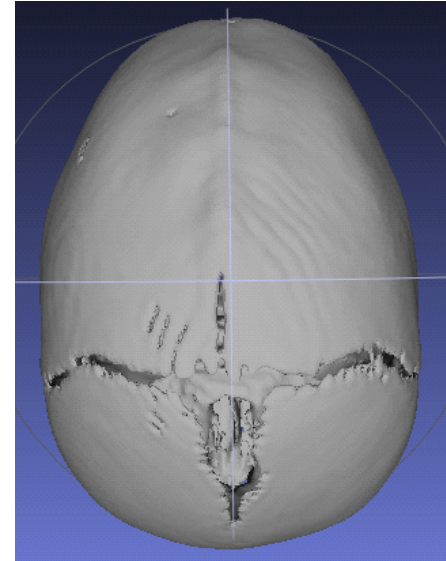
Coronal



Metopic



Sagittal



Goal of our Work

- To analyze 3D skull shapes for the purpose of medical research
 - Classification: which type of craniosynostosis
 - Region selection: which regions contribute most toward classification
 - Quantification: what is the degree of severity of the deformity

Related Work

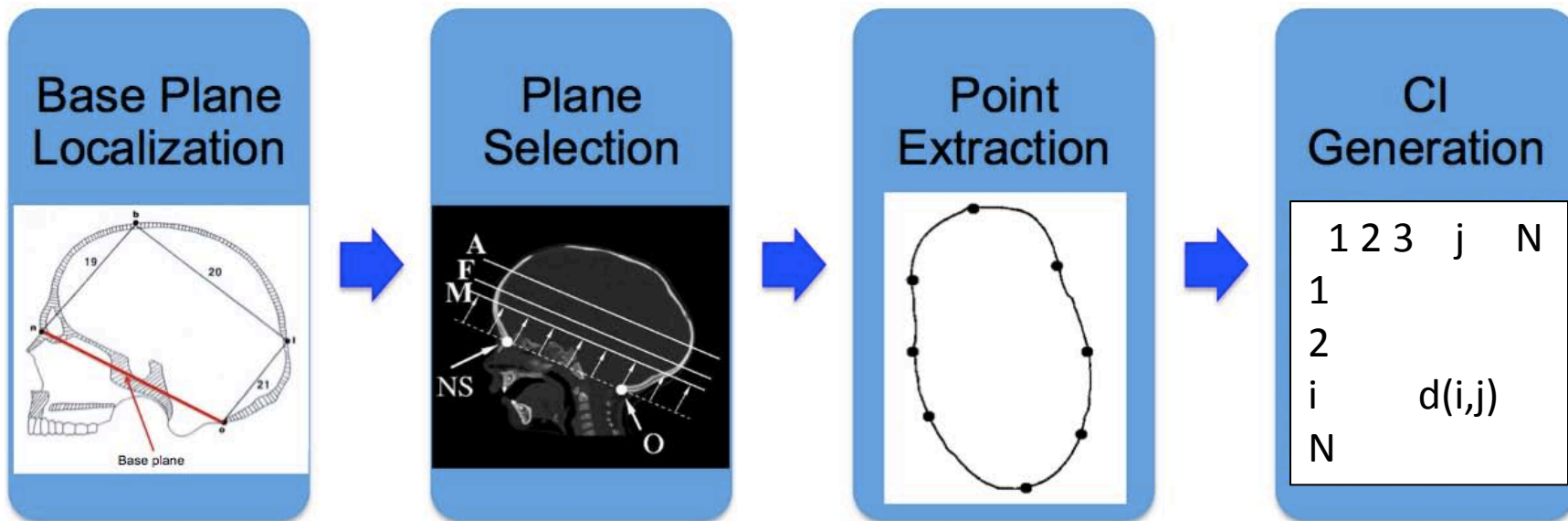
- Previous work
 - Craniofacial descriptors that analyzed the shape of the mid-face and back of the head [ICIAP09]
 - Classification of two synostoses vs. normal using symbolic shape descriptors [ICCV05, CPCJournal06]
- Difference from ours
 - not fully automatic
 - doctors may not understand the methodology
 - focus on the whole skull

Overview of our Approach

- Two step approach to shape analysis
 - Cranial image (CI) generation
 - A shape representation for 3D images
 - Shape analysis using CI
 - Classification
 - Localization of interest areas on skulls
 - Quantification of craniofacial abnormalities

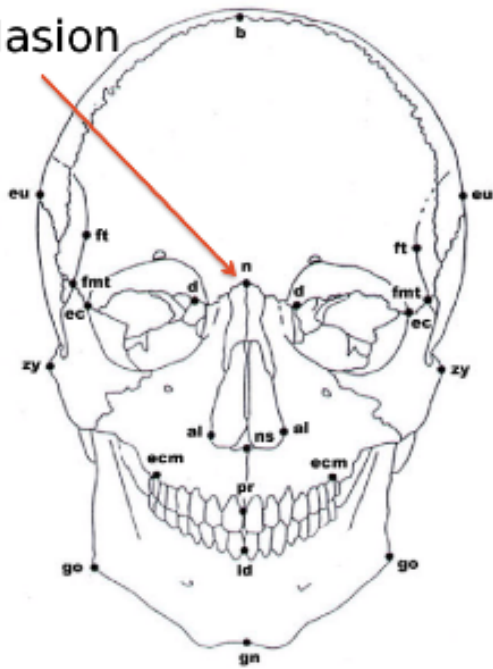
Cranial Image (CI) Generation

- Automatic system: process 3D CT images
 - Input: CT skull images
 - Output: a distance matrix – Cranial Image

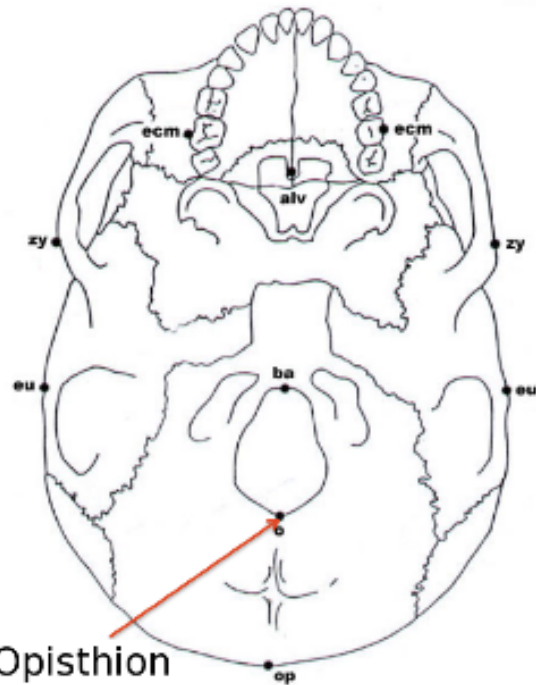


Landmarks

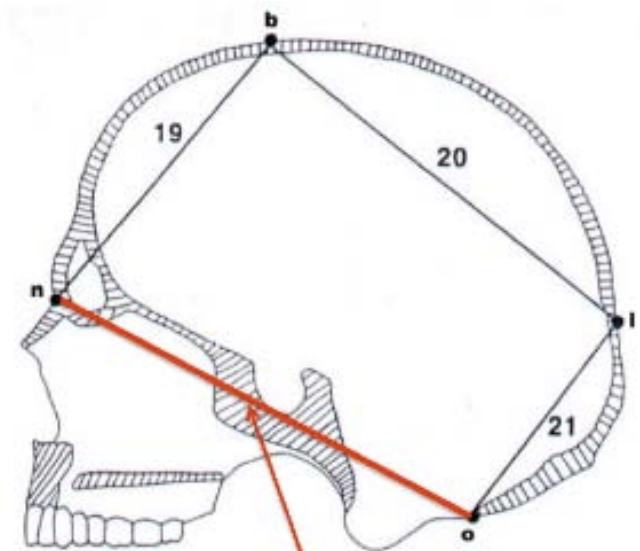
Nasion



Opisthion

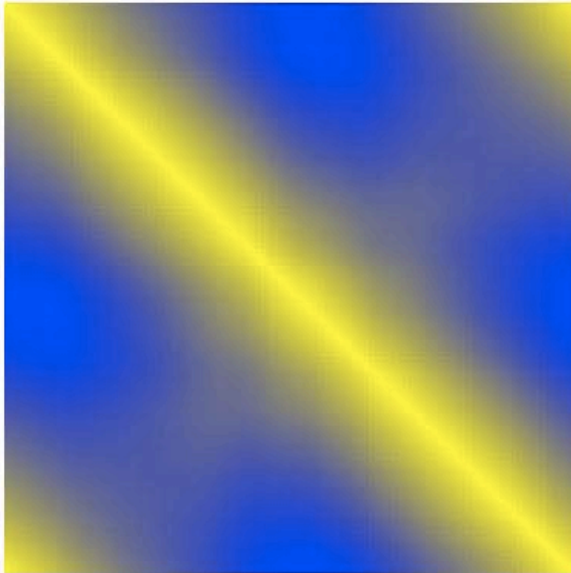


Base plane

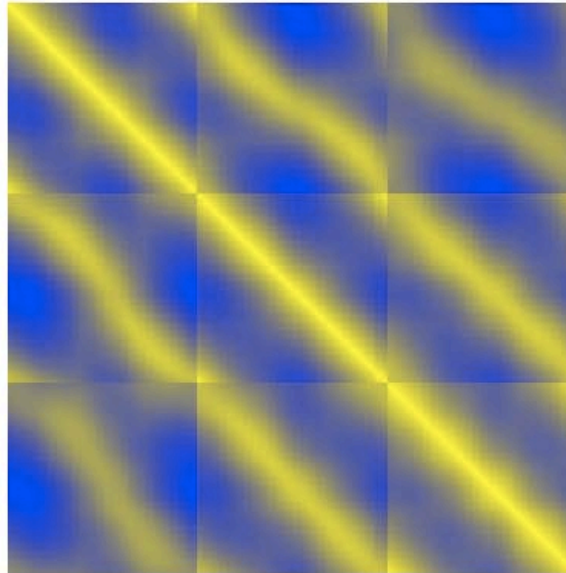


Visualization of Cranial Image

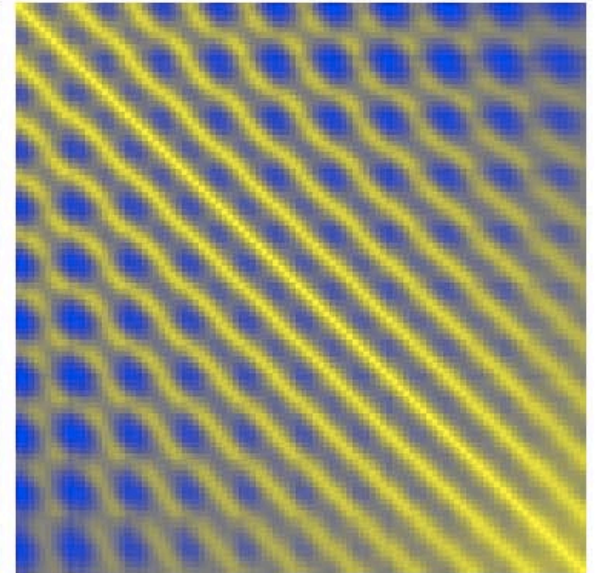
- Yellow represents 0 in the matrix;
- Blue represents 1 in the matrix



1 plane



3 planes



10 planes

Shape Analysis using CI

- Goal: classification and feature selection on CI
- Methodology: logistic regression model
 - x : features in a Cranial Image
 - y : classification result for a Cranial Image
 - w : weight assigned to each feature in a Cranial Image

$$p(y|\mathbf{x}, \mathbf{w}) = \frac{1}{1 + \exp(-y(\mathbf{w}^T \mathbf{x} + w_0))}$$

Logistic Regression

- Find the “w” that minimize the loss function

$$l(w_0, \mathbf{w}) = \sum_{i=1}^n \log(1 + \exp(-y_i(\mathbf{w}^T \mathbf{x}_i + w_0)))$$

$$\{w_0, \mathbf{w}\} = \min_{w_0, \mathbf{w}} l(w_0, \mathbf{w})$$

Regularized Logistic Regression Models

- L_1 regularized logistic regression

$$l(w_0, \mathbf{w}) = \sum_{i=1}^n \log(1 + \exp(-y_i(\mathbf{w}^T \mathbf{x}_i + w_0))) + \lambda \sum_{i=1}^m |w_i|$$

suppress the number
of selected features

- Fused lasso

$$l(w_0, \mathbf{w}) = \sum_{i=1}^n \log(1 + \exp(-y_i(\mathbf{w}^T \mathbf{x}_i + w_0))) + \lambda \sum_{i=1}^m |w_i| + \mu \sum_{\{w_i, w_j\} \in M} |w_i - w_j|$$

suppress the number
of selected features

suppress weight differences
for pairs of neighboring features

A New Form of Regularized Logistic Regression Models: **cLasso**

- cLasso – forming feature clusters
 - w^c : weights of the cluster centers of CI features
 - w : residual weights of the features

$$p(y|\mathbf{x}, \mathbf{w}, \mathbf{w}^c) = \frac{1}{1 + \exp(-y(\mathbf{w}^T \mathbf{x} + \mathbf{w}^{cT} + w_0))}$$

$$l(w_0, \mathbf{w}, \mathbf{w}^c) = \sum_{i=1}^n \log(1 + \exp(-y_i(\mathbf{w}^T \mathbf{x}_i + \mathbf{w}^{cT} \mathbf{c}_i + w_0))) + \lambda \sum_{i=1}^m |w_i| + \nu \sum_{i=1}^k |w_i^c|$$

suppress the number
of selected features

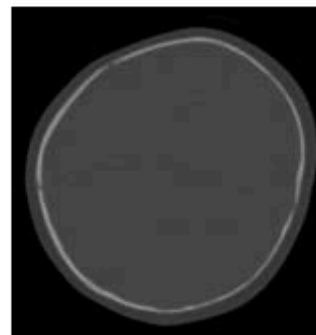
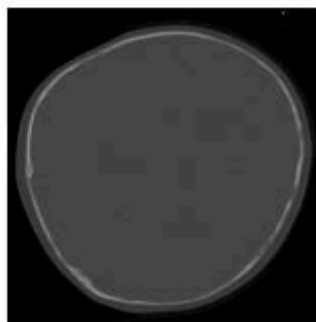
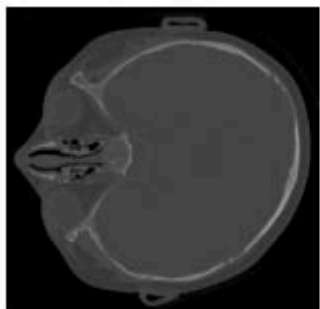
suppress the number
of feature clusters

Experiments

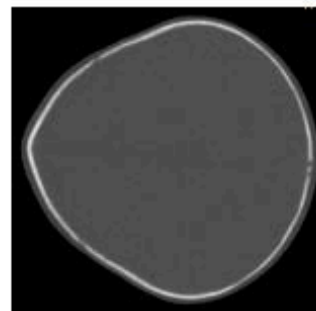
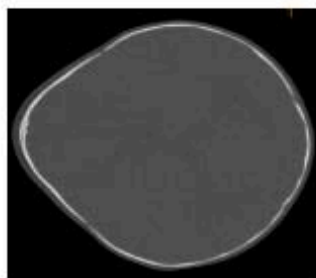
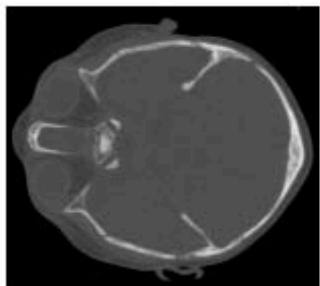
- Medical data: 3D CT images of children's heads from hospitals in four different cities in the US; 70 images in total; 3 types of craniosynostosis
- Parameter selection: the regularization parameters were found using 10-fold cross validation on the training set

CT data

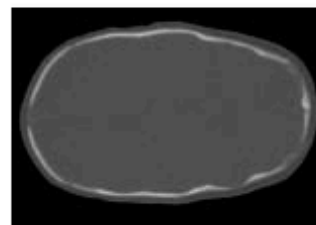
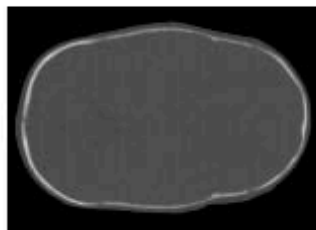
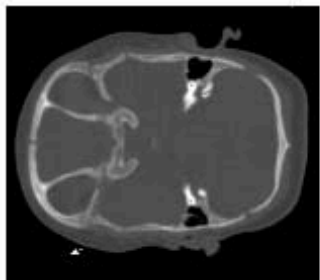
Coronal



Metopic



Sagittal



Classification Results: Error Rates

Results using logistic regression only

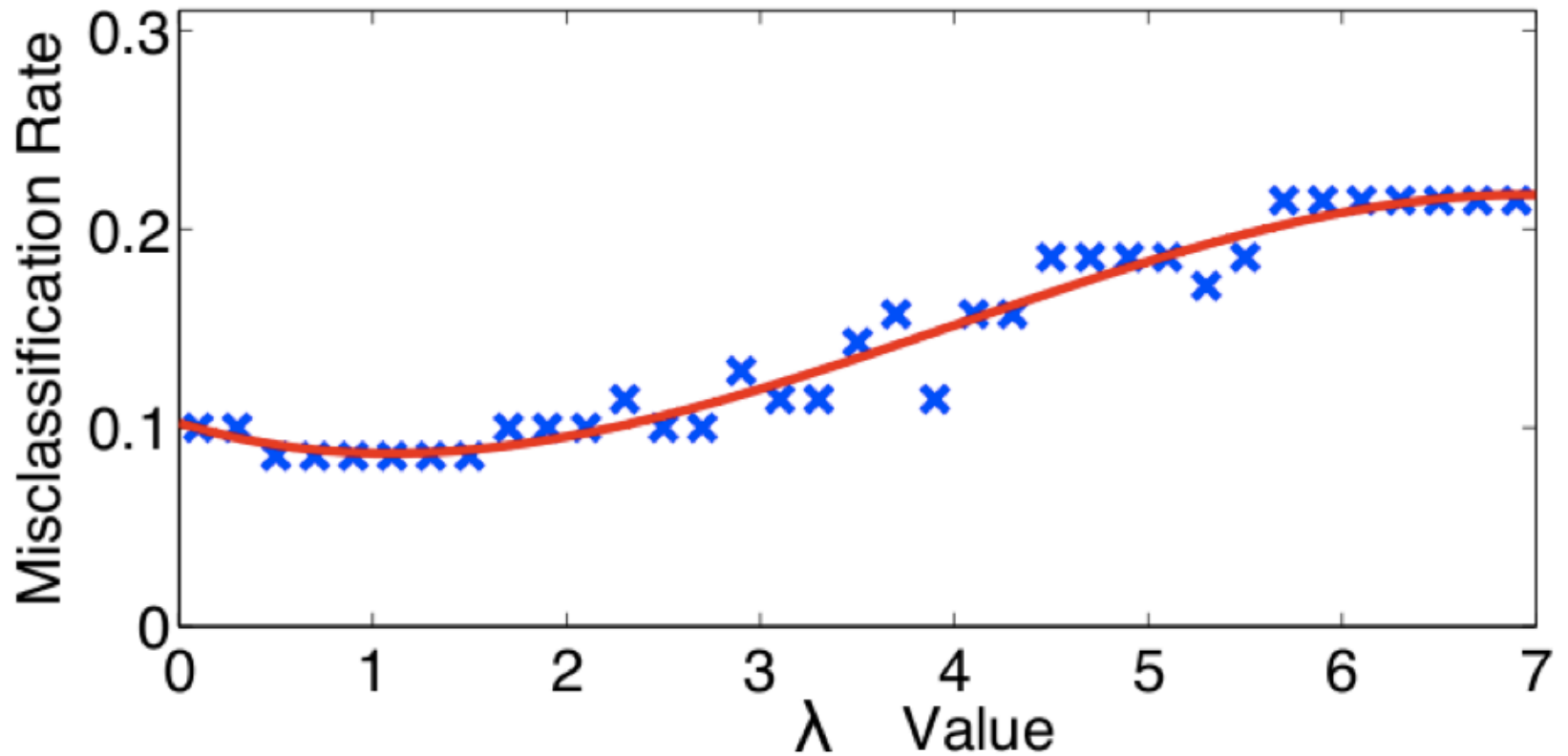
One Plane	C vs M	M vs S	S vs C	3-Classes
A-Plane	3.29%	12.67%	26.29%	10%
F-Plane	4.39%	17.57%	25.57%	10%
M-Plane	6.29%	17.14%	27.14%	10%

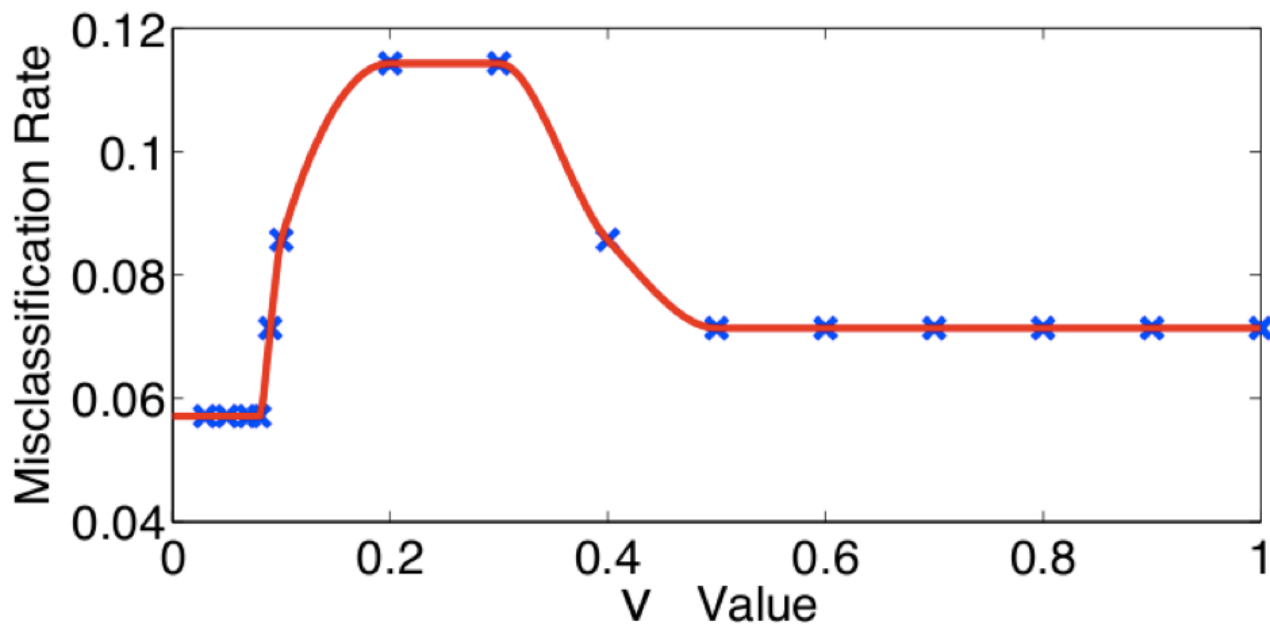
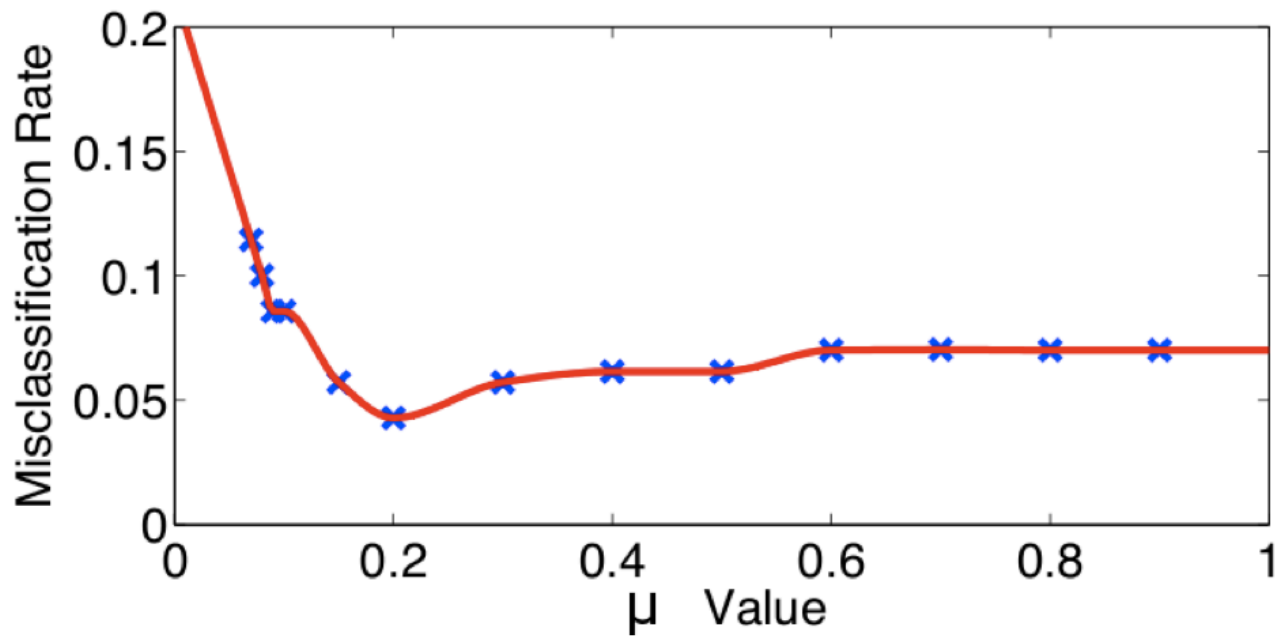
Results using four regression models

Multiple Planes	C vs M	M vs S	S vs C	3-Classes
Logistic regression	13.57%	13.57%	23.93%	10%
L_1 regression	7.14%	5%	6.43%	8.57%
Fused lasso	5.71%	5.71%	4.29%	18.57%
Clustering lasso	4.29%	4.29%	5.71%	7.14%

Parameter selection

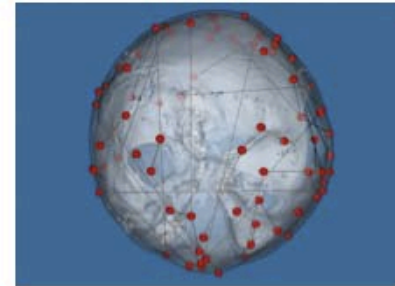
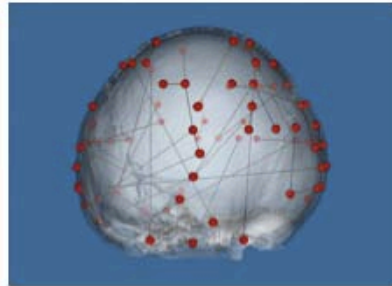
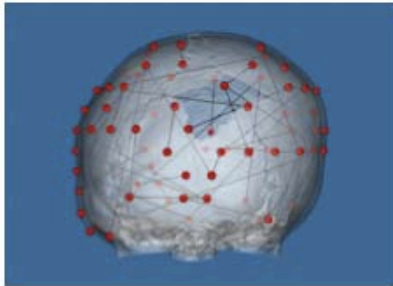
Misclassification rate v.s. lamda value



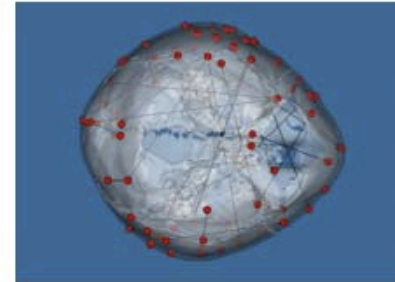
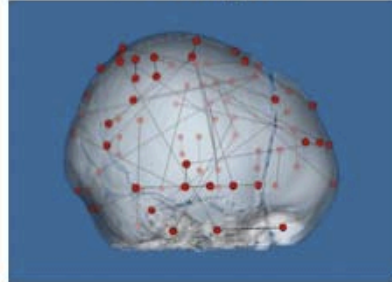
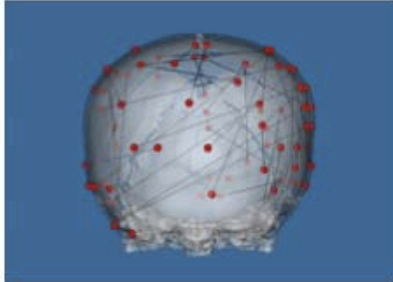


Visualization of Feature Selection using L_1 Regression

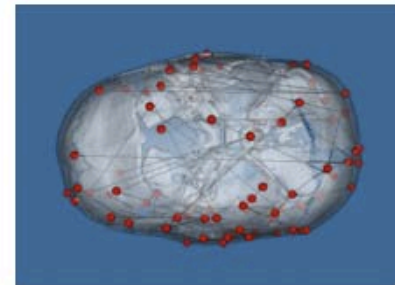
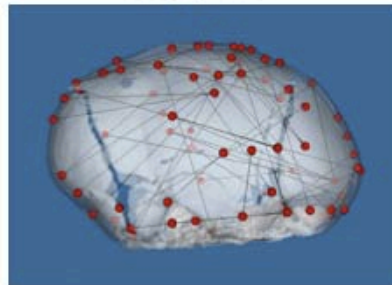
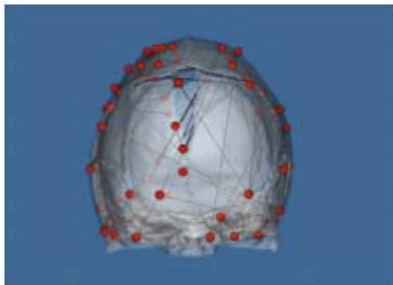
Coronal



Metopic



Sagittal



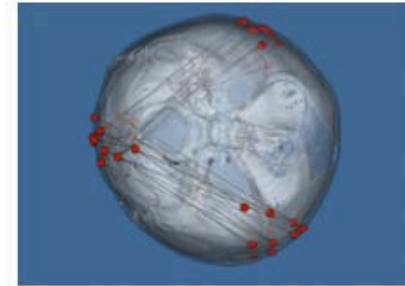
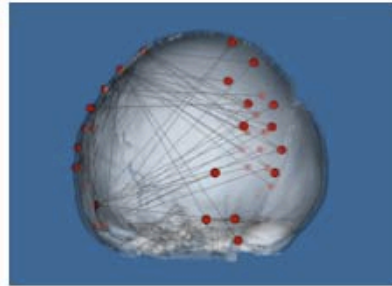
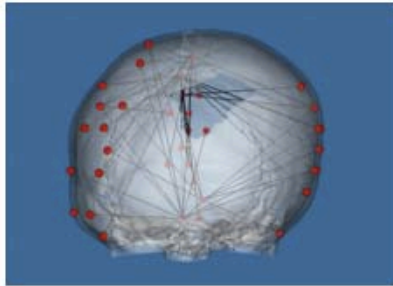
posterior view

lateral view

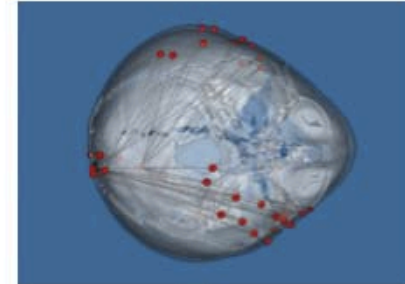
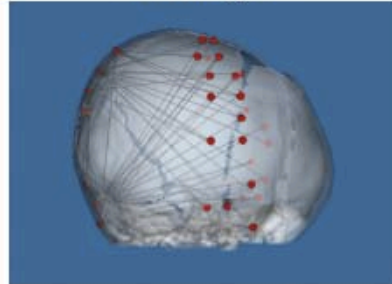
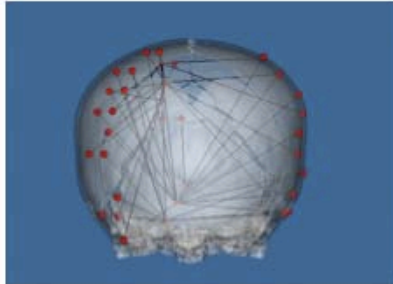
superior view

Visualization of Feature Selection using Fused Lasso

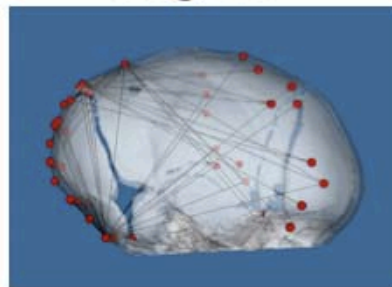
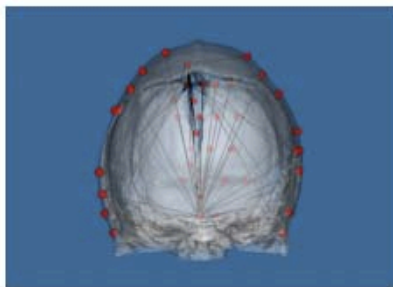
Coronal



Metopic



Sagittal



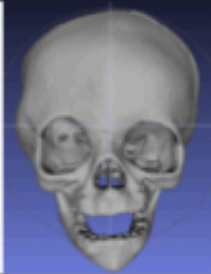
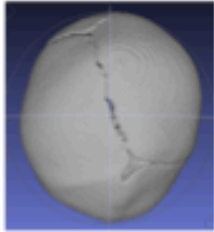
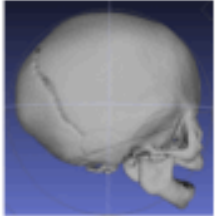
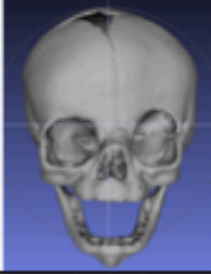
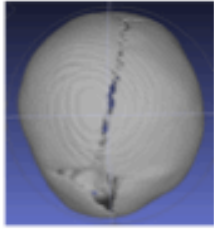
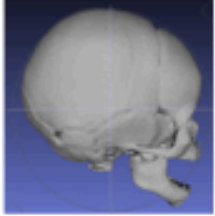

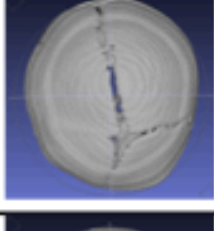

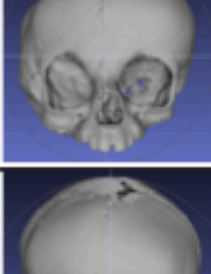
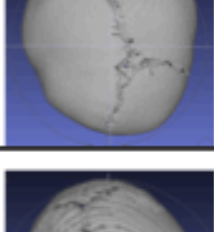
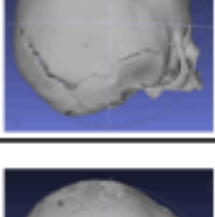
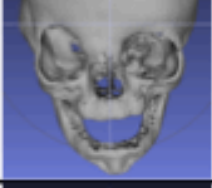
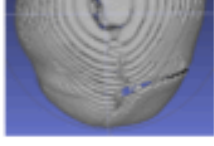

posterior view

lateral view

superior view

Quantification

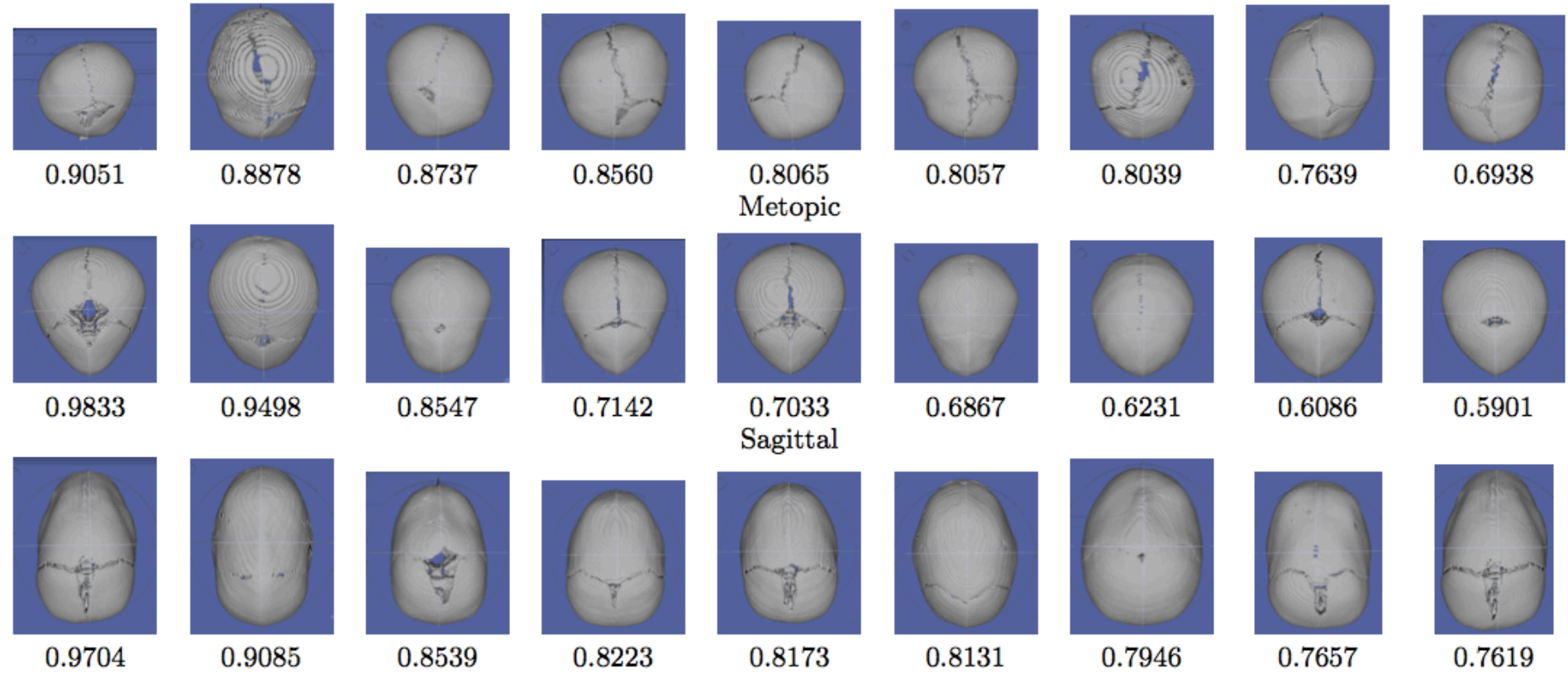
- Use the same methodology as classification
 - Use the same training process
 - Replace the decision function: from sigmoid function to the linear combination before taking sigmoid
 - Function response: the severity of craniosynostosis
- Use different training data for each of the three craniosynostosis (coronal, metopic, sagittal)

ID	Type	M rank	O rank	O score	Front	Top	Side view
2086	c	1	1	0.9976			
3014	c	5	2	0.9971			
3026	c	4	3	0.9952			
1087	c	6	4	0.9909			
3003	c	3	5	0.9870			

Coronal

Metopic

Sagittal



Summary and Future Work

- Contributions
 - A fully automatic system for skull shape analysis
 - New form of logistic regression for feature selection and interest region localization
- Future work
 - Extension to other 3D shapes, such as facial surfaces
 - Landmark detection on 3D surfaces
 - Run studies of controls vs abnormal for each class and use results to quantify the degree of abnormality