A Joint Multi-scale Convolutional Network for Fully Automatic Segmentation of the Left Ventricle



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Abstract

We utilize different scales of the input To obtain variable receptive field sizes Left ventricle (LV) segmentation is crucial for quantitative analysis of the cardiac contractile function. In this paper, we propose a joint multi-scale image to train S networks in parallel. S and improve the ability to tackle the is the scale number in total. We refer to segmentation task of different sizes, we convolutional neural network to fully automatically segment the LV. Our the S CNNs as P_{1} , P_{1} , P_{2} ,..., utilize the feature maps emanating from method adopts two kinds of multi-scale features of cardiac magnetic P CNN_{S} . To improve the robustness of intermediate layers of the trunk network resonance (CMR) images, including multi-scale features directly extracted the entire network, we do not train the to accomplish multi-scale representation. from CMR images with different scales and multi-scale features constructed by intermediate layers of standard CNN architecture. We take advan-tage of CNNs separately, but train them Different branches are referred to as assembly and simultaneously. In the B CNN_1 , B CNN_2 ,, B CNN_D . these two strategies and fuse their prediction results to produce more stage of back propagation, we update $B \ CNN_1$ denotes the trunk network and accurate segmentation results. Qualitative results demonstrate the weights of each P_CNN separately. D is the numbers of branches. effectiveness and robustness of our method, and quantitative evaluation indicates our method achieves LV segmen-tation with higher accuracy.

P_CNN and B_CNN both accomplish multi-scale representation of input image I. We LV can be accurately segmen-Our Method fuse the predicted results of P_CNN and B_CNN for each pixel. The predicted mask ted even its size is very small. We firstly employ ConvNets to coarsely detect the region of interest (ROI) of B_{mask} of the input ROI image is calculated as follows. $I_P(i, j)$ and $I_B(i, j)$ are the We compare the segme predicted results of P_CNN and B_CNN. $[m_1, n_1]$ is the size of B_{mask} . $\Gamma(\cdot)$ denotes to performance between (JMS CNN) to accurately segment the LV. JMS CNN utilizes two kinds of match the binary results to the input ROI image to obtain the contour of the LV. multi-scale features, which are from CMR images of different scales and from different layers of a standard CNN trunk, respectively.

1. ROI Detection

The raw CMR imaging datasets usually include the heart and surrounding organs. we firstly detect ROI containing the LV from raw input images using CNN, which has 7 layers with weights: three convolutional layers, three pooling layers and a fully connected (FC).



2. P CNN

4. JMS CNN Architecture



3. B CNN

Segmentation results

We assess the performance of our method by comparing its segmentation contours (red line) with that of manual annotation by experts (green line), and yellow indicates better matching. JMS CNN can overcome the difficulties of gray level inhomogeneity, presence of papillary muscles and influence of surrounding areas. The

JMS CNN and other learning methods. percentage of good (GC) is 96.80, which higher than Avendi et a

Conclusion

This paper proposes a joint multi-scale convolutional neural network for accurate segmentation of the LV. The method can cover different LV sizes by utilizing multi-scale representation not only from images of different scales but also that from multiple intermediate layers of a standard CNN architecture. We will try to accomplish multi-scale representation on other networks such as fully convolutional networks and evaluate our method on larger data sets.





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en our	Method	GC(%)	APD	DM	CC
machine	[3]	88.46	2.90	0.89	0.77
S. Our	S_CNN	94.92	2.16	0.91	0.80
contours	P_CNN	94.98	2.15	0.91	0.80
	B_CNN	95.53	2.13	0.91	0.81
1 is much	Proposed	96.80	2.08	0.91	0.81
t al. [3].					

([3] MR Avendi et al, "A combined deep-learning and deformable-model approach to fully automatic segmentation of the left ventricle in cardiac mri," Medical image analysis, vol. 30, pp. 108–119, 2016.)