

# Learning to Correct Axial Motion in OCT for 3D Retinal Imaging

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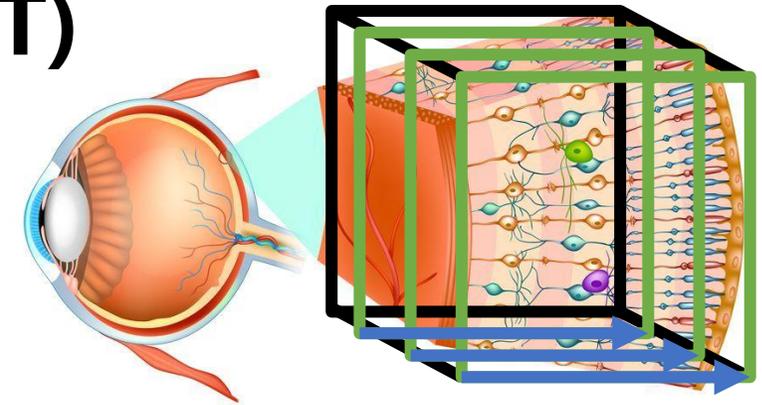
# Outline

- Introduction
- Related works
- **OCT axial motion correction network**
  - Problem formulation
  - Network architecture
  - Loss functions
  - Ground truth and data augmentation
  - Experiment setting
  - Experimental results
- Conclusion

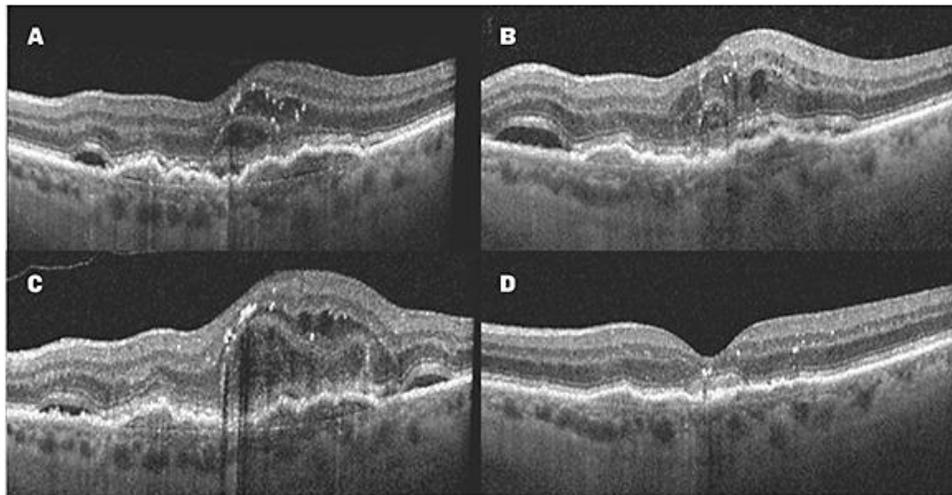


# Optical coherence tomography (OCT)

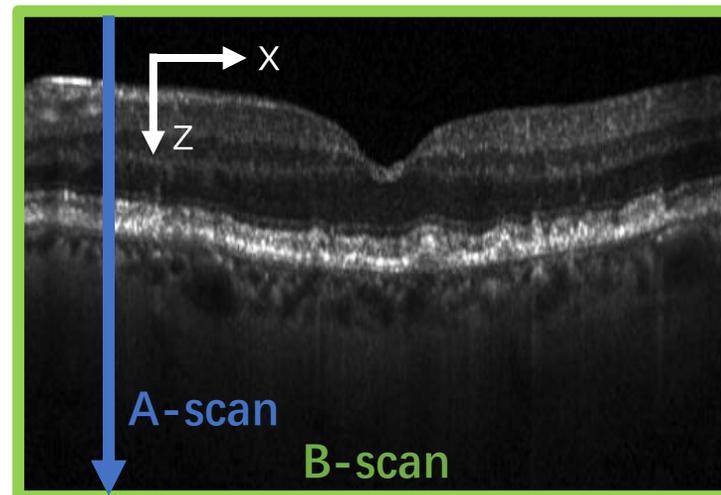
- Non-invasive 3D imaging at  $\mu\text{m}$  resolution
- One of the most important imaging modality in ophthalmology
- Imaging based on interference with low coherent infrared beam
- **A-scan**: (Z axis) magnitude of backscattered light from different depths
- **B-scan**: (XZ plane) 2D cross-sectional image;
- **Z axis**: axial direction, fastest; **X axis**: fast scanning axis; **Y axis**: slow scanning axis



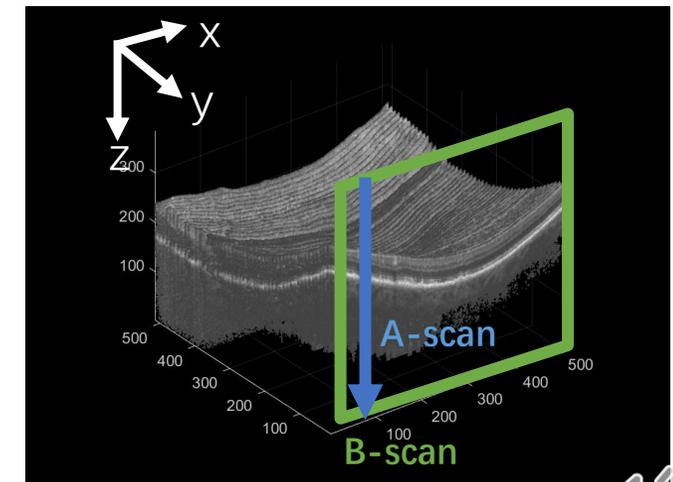
OCT imaging of the retina<sup>[1]</sup>



Cross-section view of retinal diseases using OCT<sup>[2]</sup>



OCT A-scan (blue) and B-scan (green)



3D-OCT volume



# Motion artifacts

Motion artifacts in OCT compromise 3D visualization and subsequent processing

## Sources of involuntary motion

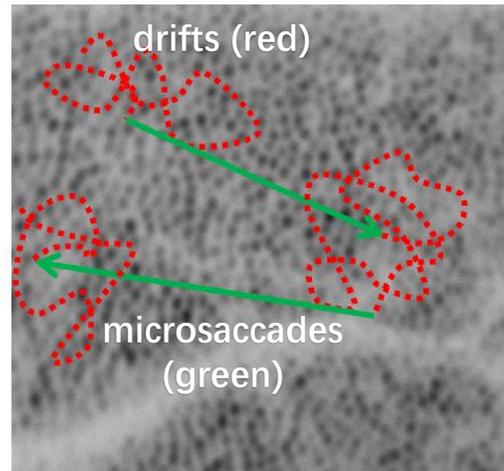
- Tremors: 25–90 Hz, amplitude 8.5" (6  $\mu\text{m}$ )
- Drifts: 6'/s to 30'/s, amplitude 0.8' -31.4'
- Microsaccades: fastest and largest
- Pulsing and Respiration: amplitude of  $81 \pm 3.5 \mu\text{m}$

## Axial motion artifacts in OCT

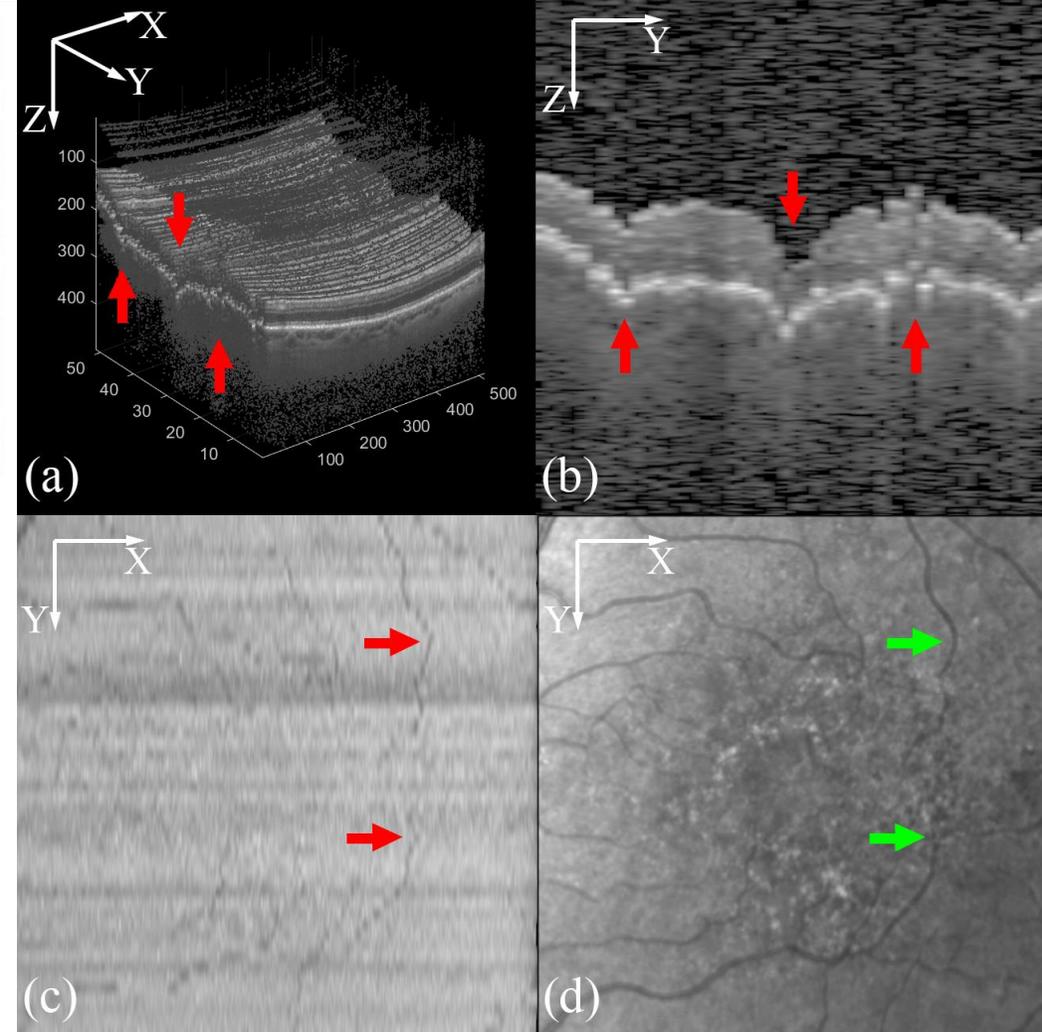
- Cause discontinuities of neighboring B-scans in the slow scanning axis

## Coronal motion artifacts in OCT

- Cause distortion of vessels in the en-face image (XY plane)
- Smaller range compared with axial motion



Schematic of eye motion<sup>[3]</sup>



Motion artifacts in OCT

- (a) Axial motion in 3D, (b) axial motion in cross-sectional B-scan
- (c) coronal motion in en-face C-scan, (d) reference infrared image

[3] Brea et al. "Review on Retrospective Procedures to Correct Retinal Motion Artefacts in OCT Imaging", Appl. Sci, 2019

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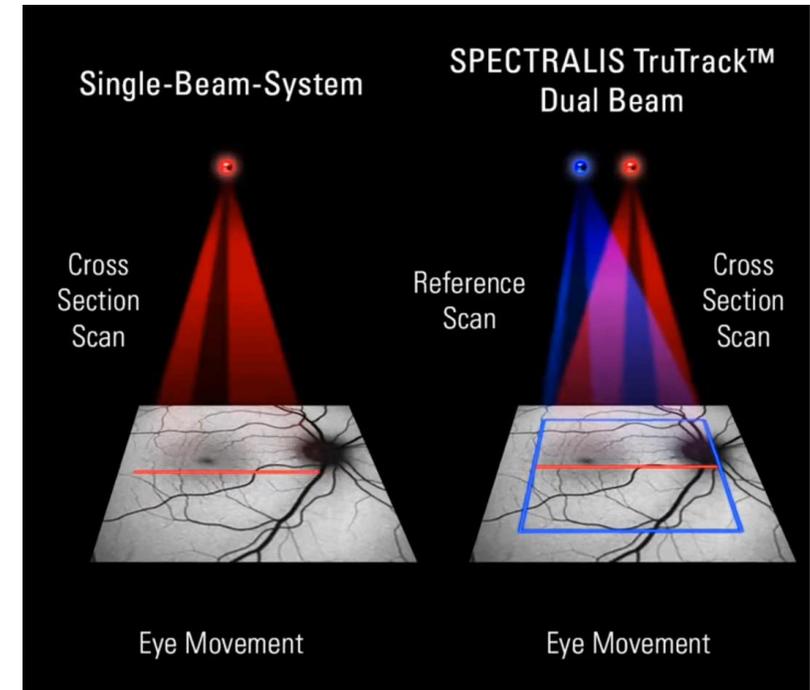
# Related works in OCT motion correction

## Prospective (hardware-based) methods

- Additional hardware mounted onto the OCT scanner
- Eye tracking hardware to track motion during OCT data acquisition
- Depend on special scanning patterns (e.g. dual beam)
- Require special signal acquisition techniques

## Retrospective (software-based) methods

- Post-processing after OCT acquisition
- The only option for imaging systems without eye tracking hardware
- Estimate eye motion from a single or multiple OCT volumes
- Apply inter-frame image registration techniques



Heidelberg Spectralis TruTrack eye tracking system [4]

[4] Heidelberg Engineering, <https://business-lounge.heidelbergengineering.com/gb/en/products/spectralis/>



# Related works – retrospective approaches

Scope	Multiple OCT volumes	Single OCT volume
Axial motion only	<b>Potsaid et al. 2008</b> [5] Orthogonal reference scans to the slow axis + Effectively corrects axial motion, recover curvature - Time consuming to capture multiple scans	<b>Antony et al. 2011</b> [6] Retinal layer segmentation, TPS fitting - Prone to segmentation error - Flattens RPE surface, bad for observing diseases
		<b>Proposed</b> axial motion correction network
Axial + coronal motion	<b>Kraus et al. 2012</b> [7] and <b>2014</b> [8] Corrects motion via registration of orthogonal volumes + Standard tool for OCT-A preprocessing - Time consuming to capture multiple scans + Works well for dense OCT scans (496×512×512) - Not desirable for sparse OCT scans (496×512×49)	<b>Montuoro et al. 2014</b> [9] Retinal layer segmentation, local symmetry - Prone to segmentation error - Assumption does not hold for retinal diseases
		<b>Fu et al. 2016</b> [10] Based on saliency and correlation - Overly smoothed retina

Full references at the end of presentation



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# Problem formulation

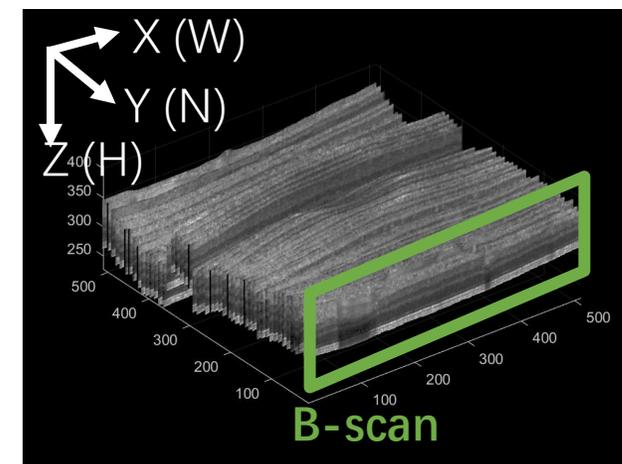
**Input:** OCT volume  $\mathbf{V}$ ,  $H \times W \times N$

- $H$ : Height of B-scans,  $Z$  axis, axial direction
- $W$ : Width of B-scans,  $X$  axis, fast-scanning direction
- $N$ : Number of B-scans,  $Y$  axis, slow-scanning direction

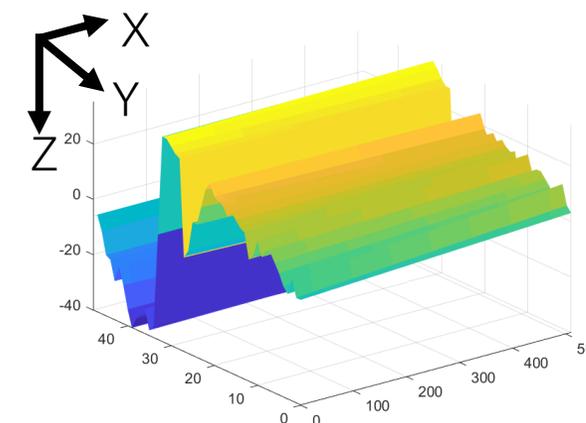
**Output:** 2D displacement map  $\mathbf{D}$ ,  $W \times N$

- Negative: Shifts column upwards
- Positive: Shifts column downwards
- Magnitude: Number of pixels divided by a normalization factor  $Z_{\text{norm}}$ .

**Final corrected OCT volume:**  $\mathbf{V}_{\text{out}}(z, x, y) = \mathbf{V}(z - Z_{\text{norm}}\mathbf{D}(x, y), x, y)$



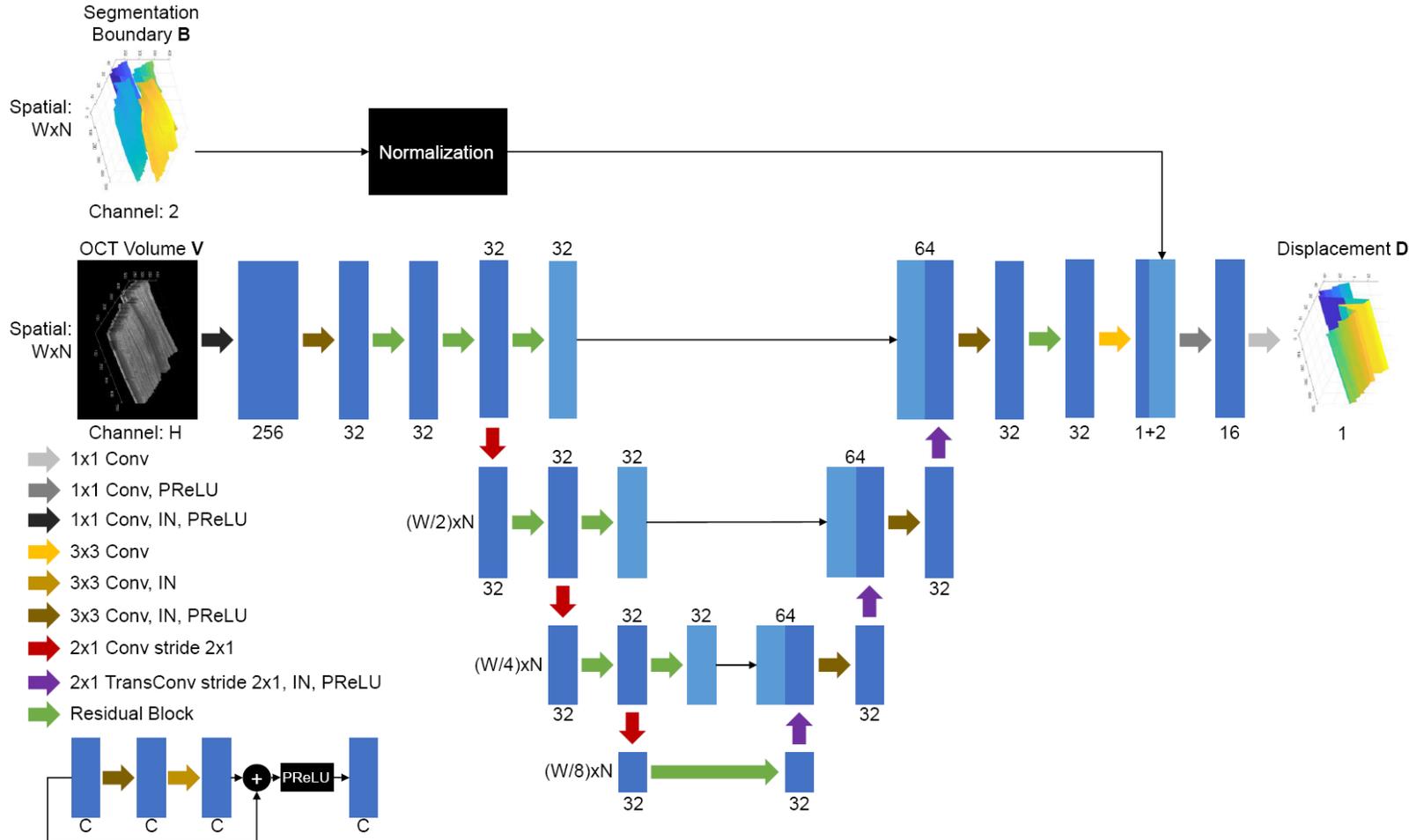
Input OCT volume



2D axial displacement map



## Network architecture



The OCT axial motion correction network

### Architecture:

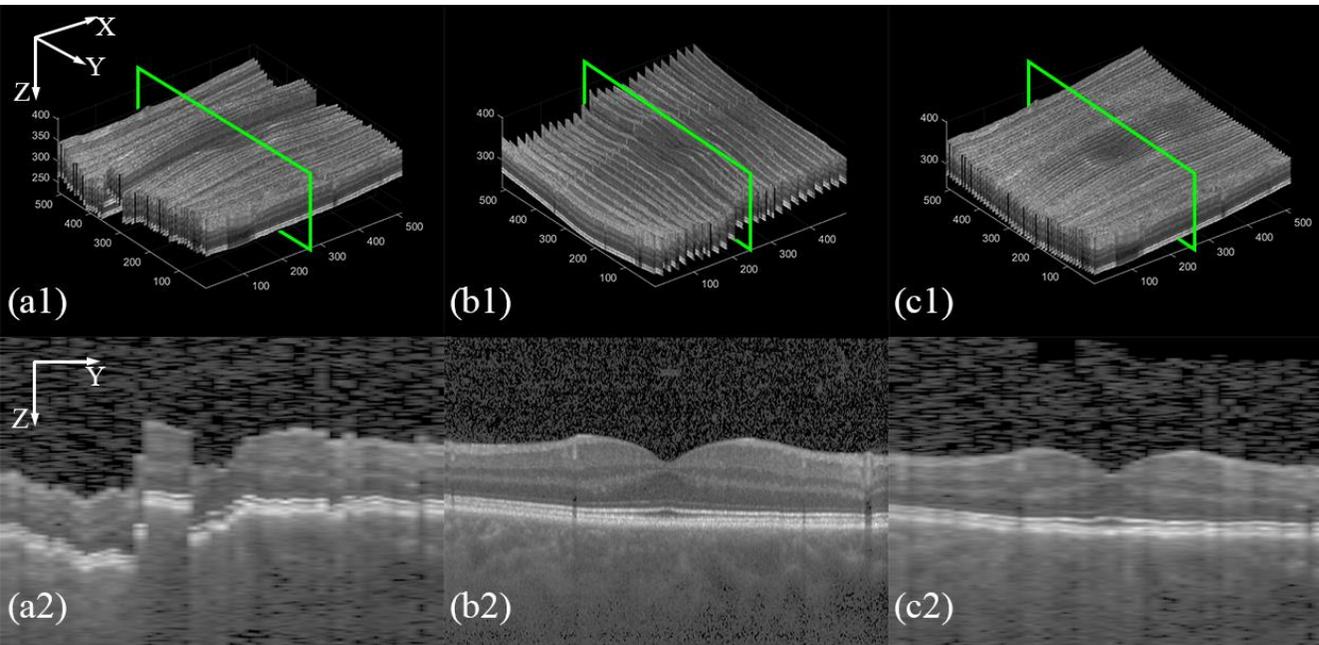
- Modified U-Net with residual blocks
- $1 \times 1$  convolution at the first layer to compress the number of channels
- Instance normalization (IN) applied after convolutions
- $2 \times 1$  convolution with stride  $2 \times 1$  for multiresolution analysis
- Includes segmentation boundaries of the ILM and RPE layer of the retina

### Advantages:

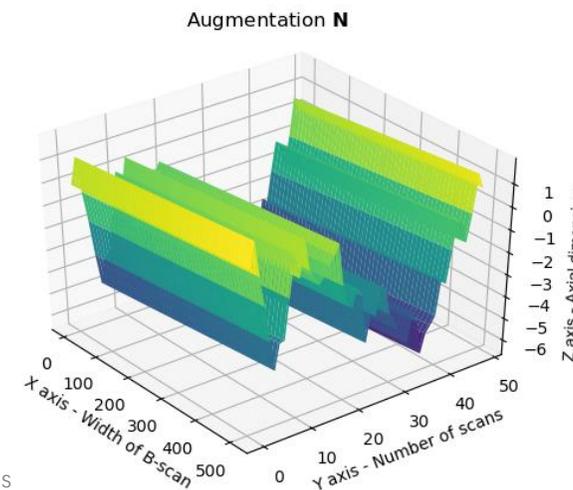
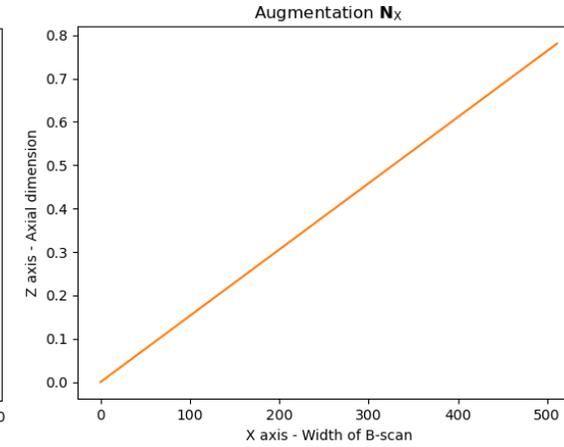
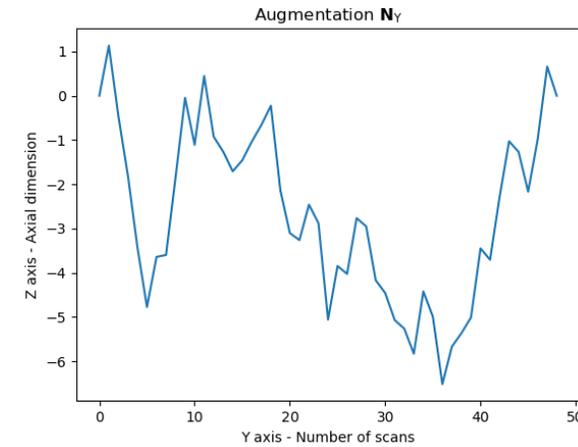
- Fully convolutional architecture
- Arbitrary number of stacked B-scans



# Ground truth and data augmentation



The orthogonal approach [5] for ground truth acquisition



Data augmentation by adding random displacement to the Y axis, and random tilt to the X axis

[5] B. Potsaid, et al., "Ultrahigh speed spectral/fourier domain oct ophthalmic imaging at 70,000 to 312,500 axial scans per second," Optics express, 2008.



# Loss functions

## L1 displacement Loss

$$\mathcal{L}_{\text{disp}}(\mathbf{D}; \mathbf{D}_{\text{GT}}) = \text{mean}_{x,y}(\mathbf{M}(x,y)|\mathbf{D}(x,y) - \mathbf{D}_{\text{GT}}(x,y)|)$$

- Absolute difference between predicted and GT displacement
- Mask  $\mathbf{M}$  to assign higher weight at the center

## Smoothness loss

$$\mathcal{L}_{\text{smooth}}(\mathbf{D}) = \sum_{s=1,2} \text{mean}_{x,y}(|\mathbf{D}^s(x+1,y) - \mathbf{D}^s(x,y)|)$$

- Where  $\mathbf{D}^1$  denotes the displacement at original resolution
- $\mathbf{D}^2$  denotes the displacement downsampled by 2 to the X axis.

## Total loss

- Weighted combination of two loss terms:  $\mathcal{L} = \mathcal{L}_{\text{disp}}(\mathbf{D}; \mathbf{D}_{\text{GT}}) + \lambda_{\text{smooth}}\mathcal{L}_{\text{smooth}}(\mathbf{D})$



Mask applied to the L1 displacement loss



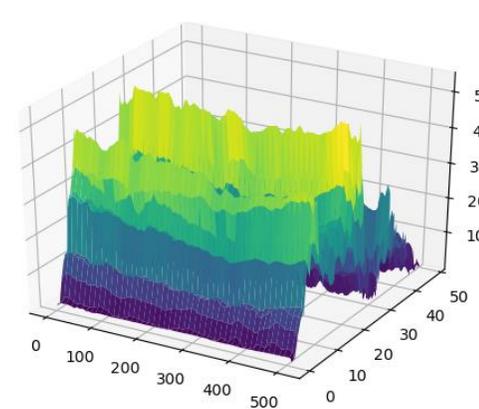
# Experiment setting

## Dataset

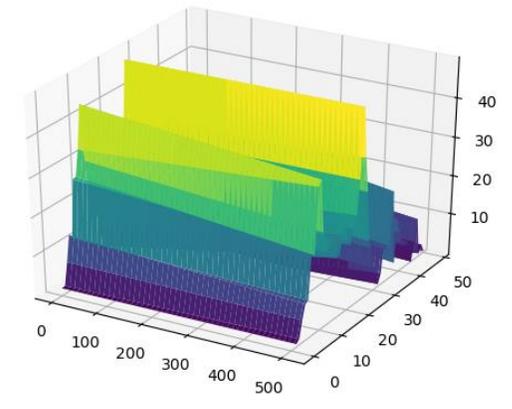
- 110 (55 pairs of horizontal and vertical) OCT volumes
- Training, validation, test: 75, 10, 25 volumes
- Heidelberg Spectralis, imaging volume  $1.9 \times 5.8 \times 5.8 \text{ mm}^3$
- Resolution  $496 \times 512 \times 49$  or  $496 \times 512 \times 25$
- Instrument segmentation boundaries of ILM, RPE

## Post processing

- Least squares line fitting to the X axis
- Guarantees no distortion except shearing of fast B-scans



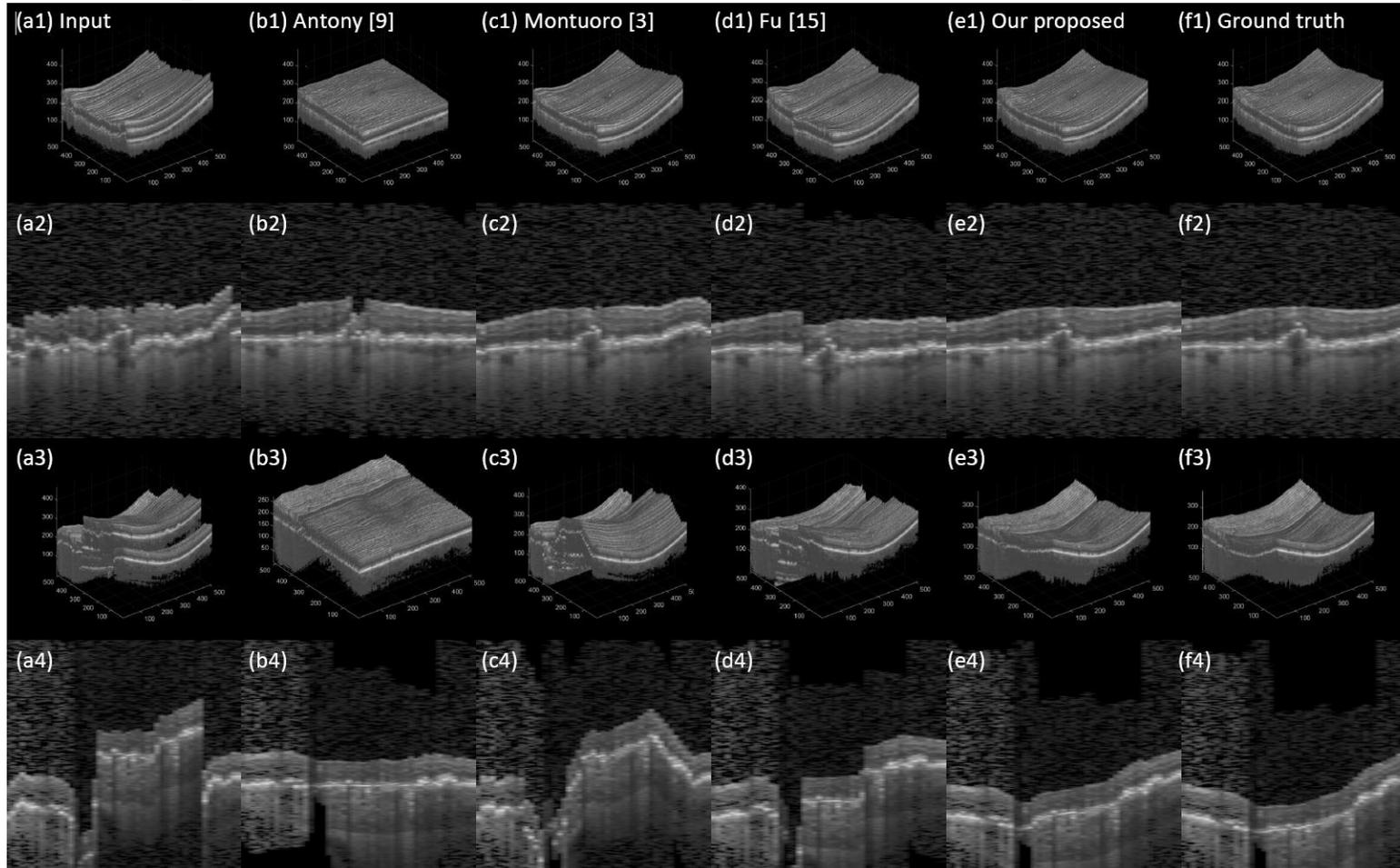
Predicted displacement map



Displacement map after post processing



# Experimental results



Qualitative result of different axial motion correction methods

Table 1: Quantitative result of axial motion correction

Method	MNMI	MAE
Before correction	0.5811 ( $\pm 0.0219$ )	22.39 ( $\pm 17.52$ )
Ground truth	0.5901 ( $\pm 0.0200$ )	–
Antony et al	<b>0.5927 (<math>\pm 0.0190</math>)</b>	28.28 ( $\pm 10.63$ )
Montuoro et al	0.5831 ( $\pm 0.0215$ )	20.28 ( $\pm 16.35$ )
Fu et al	0.5922 ( $\pm 0.0223$ )	26.94 ( $\pm 14.49$ )
Our proposed	0.5898 ( $\pm 0.0196$ )	<b>7.86 (<math>\pm 5.75</math>)</b>

### Evaluation metrics:

- **Smoothness:** mean normalized mutual information (MNMI, higher is smoother)
- **Overall error:** mean absolute error of displacement (MAE, smaller is better)

### Discussion:

- Our method achieves the lowest MAE at 7.86 pixels, and the MNMI is close to the ground truth



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# Conclusion

- OCT motion artifacts severely compromise 3D visualization and analysis
- We proposed a fully convolutional neural network for OCT axial motion correction based on a single volume input
- The proposed method can correct large motion, while recovering the true curvature of retina
- Achieved significant improvements compared to conventional methods in normal and disease cases

## Significance:

- Better display and visualization of 3D OCT volumes
- Benefit subsequent analysis including retinal layer segmentation and OCT-A imaging

## Future work:

- Extend proposed network to support coronal motion correction besides axial motion



# Thank you!

“Learning to Correct Axial Motion in OCT for 3D Retinal Imaging”

Yiqian Wang

06/01/2021



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- [3] L. Sanchez Brea, D. Andrade De Jesus, M. F. Shirazi, M. Pircher, T. van Walsum, and S. Klein, "Review on retrospective procedures to correct retinal motion artefacts in oct imaging," *Applied Sciences*, vol. 9, no. 13, p. 2700, 2019.
- [4] Heidelberg Engineering, "Spectralis", <https://business-lounge.heidelbergengineering.com/gb/en/products/spectralis/>, July 12, 2021
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