

# Artificial Intelligence in Radiation Oncology



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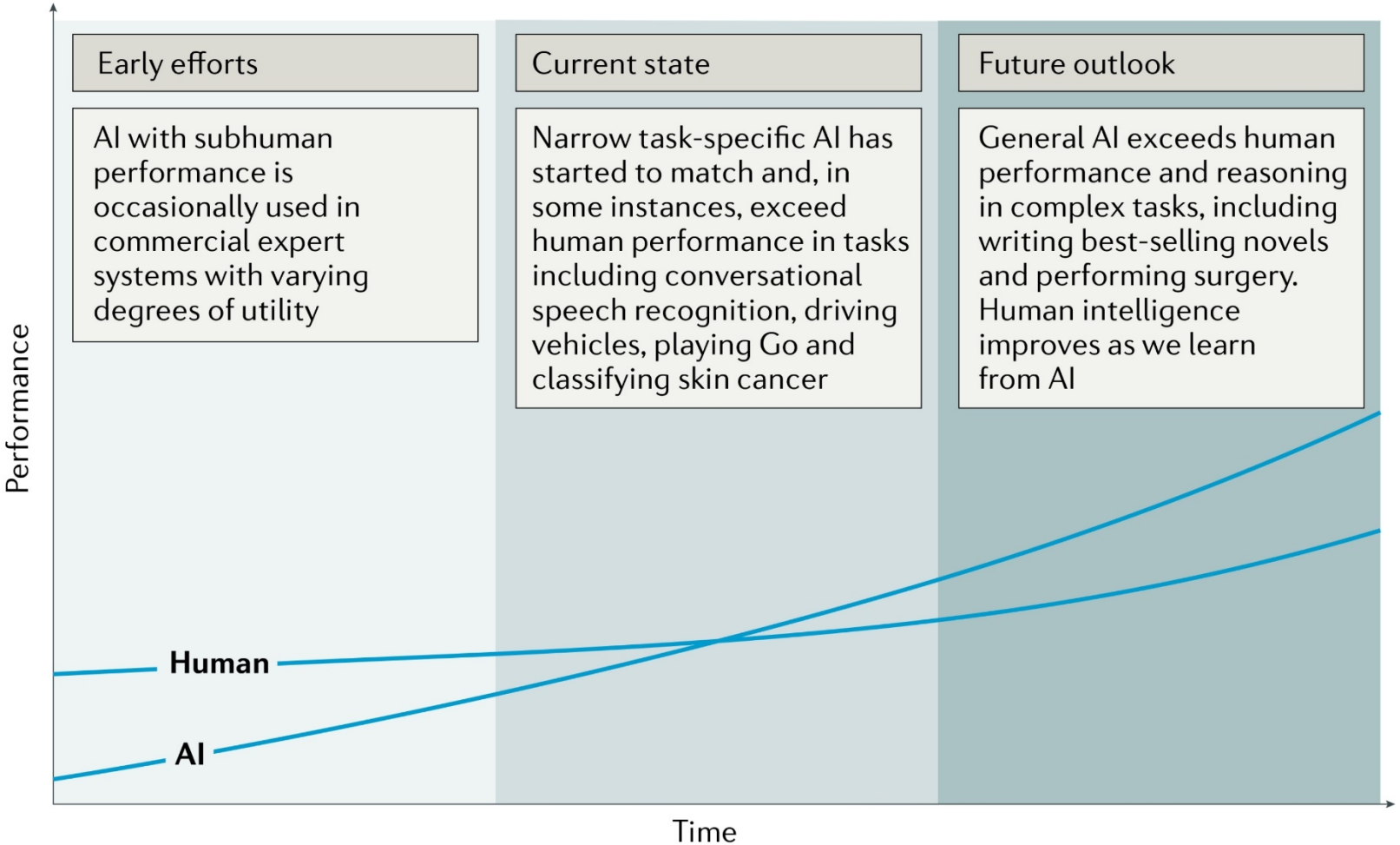
*Ahmed Hosny*

Research Lunch - Department of Radiation Oncology

Thursday, June 27<sup>th</sup> 2019



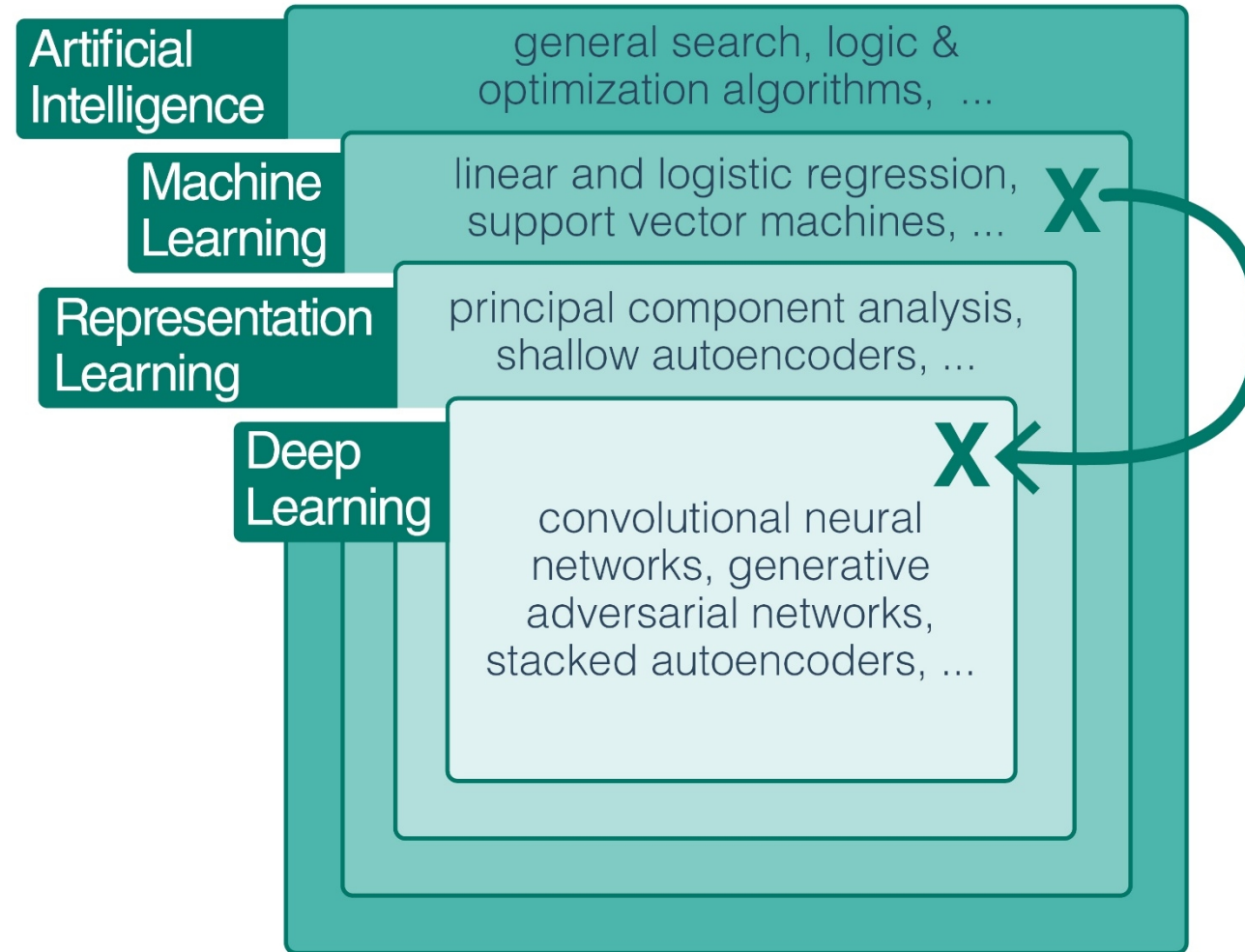
# Artificial vs Human Intelligence



Ahmed Hosny, Chintan Parmar, John Quackenbush, et al.

Artificial Intelligence in Radiology  
Nature Reviews Cancer - 2018

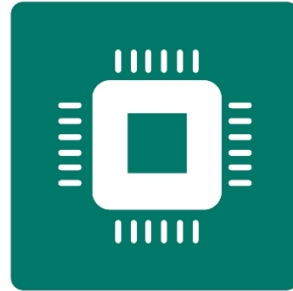
# Revival of Research in Neural Networks



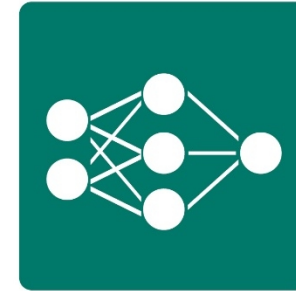
# Revival of Research in Neural Networks



**data**

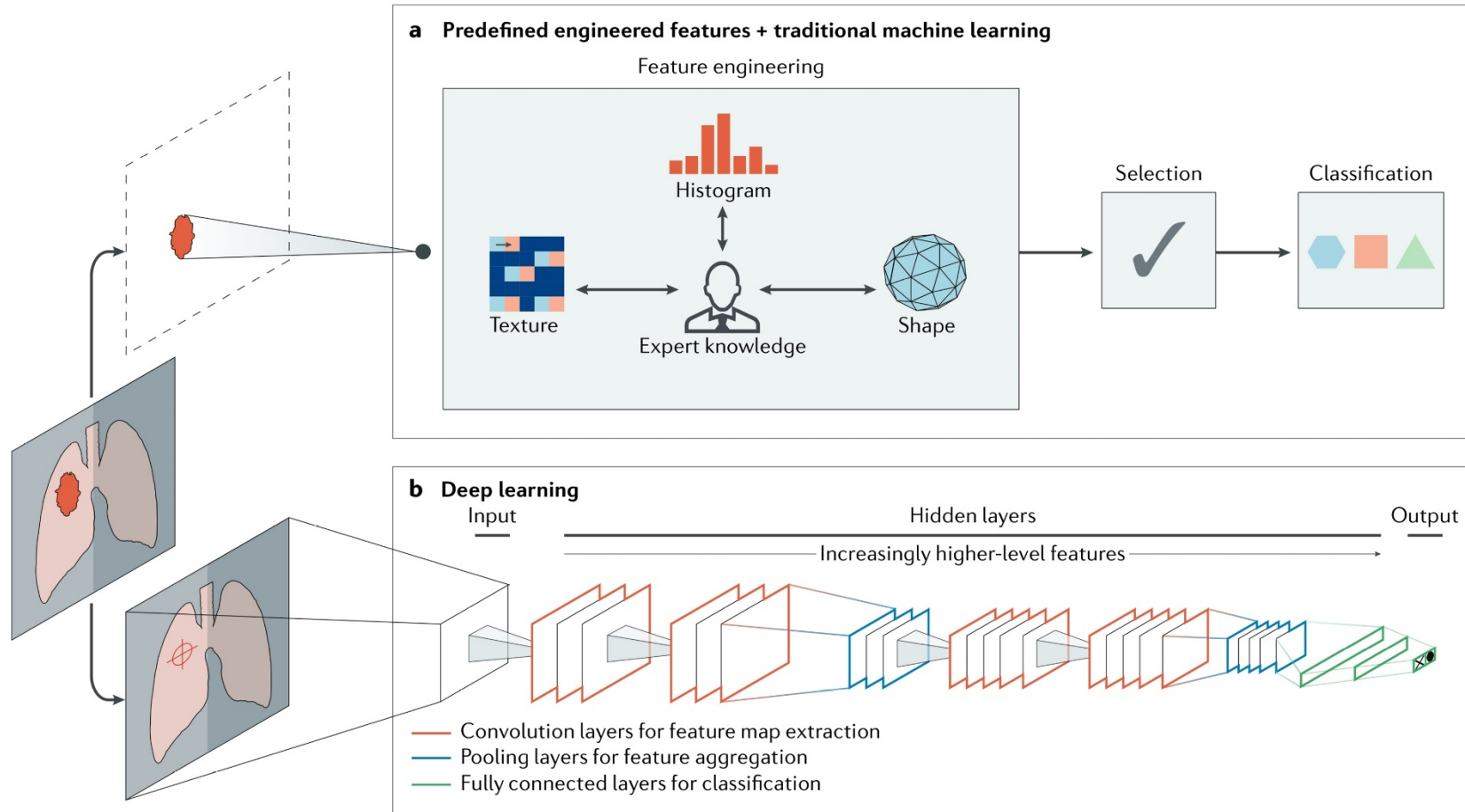


**processing**



**algorithms**

# Deep Learning



Ahmed Hosny, Chintan Parmar, John Quackenbush, et al.

Artificial Intelligence in Radiology  
Nature Reviews Cancer - 2018

# Deep Learning

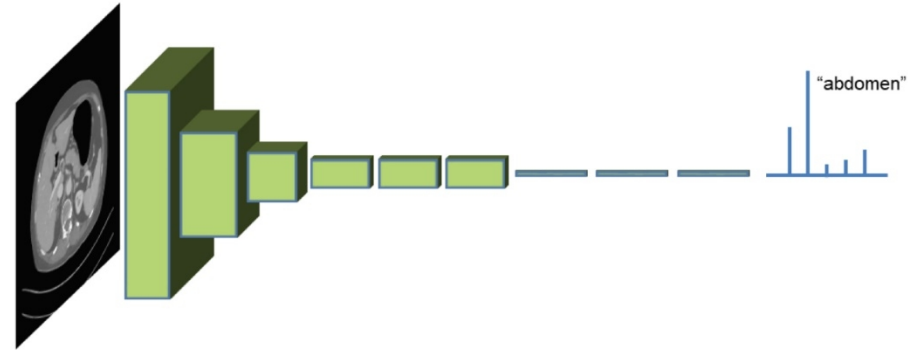


Fig. 1: Convolutional neural network (CNN). A straightforward application of CNNs for anatomy classification in whole body CT scans can be found in [10] (illustration after [2]).

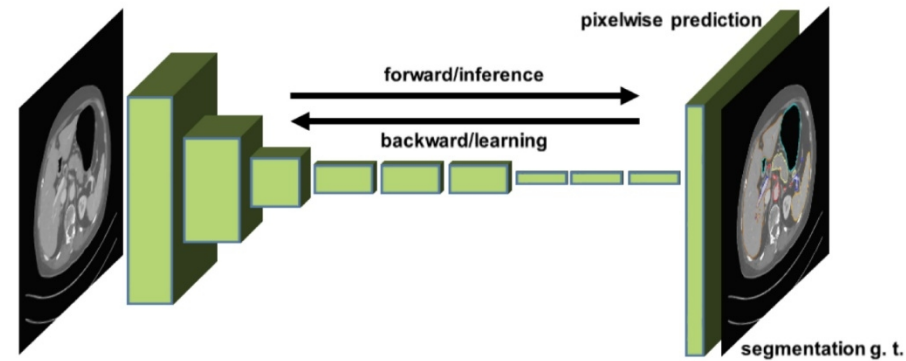


Fig. 2: Fully convolutional network (FCN). Examples of FCNs applied to semantic segmentation tasks in medical imaging can be found in [17]–[19], [25] (illustration after [2]).

# Problems (Features) in Radiation Oncology

**Labor- & time- intensive**

**Requires highly skilled specialists**

**Large variability**



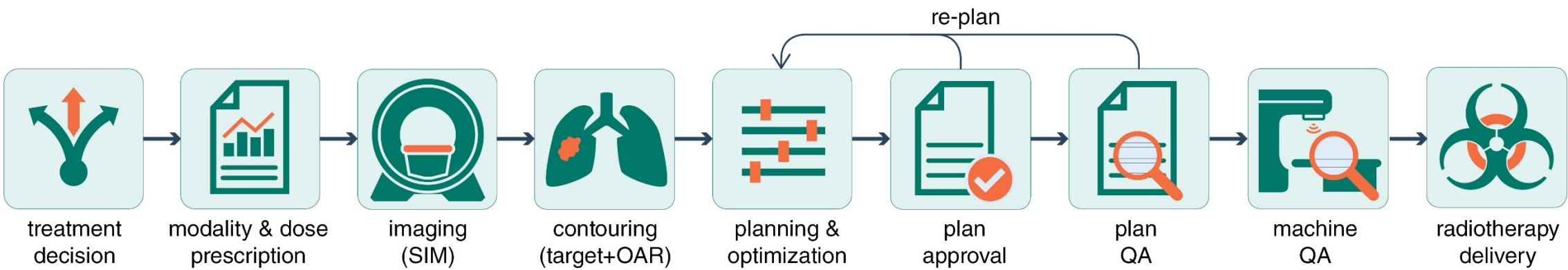
# Opportunities in Radiation Oncology

**Reliance on human-machine interaction**

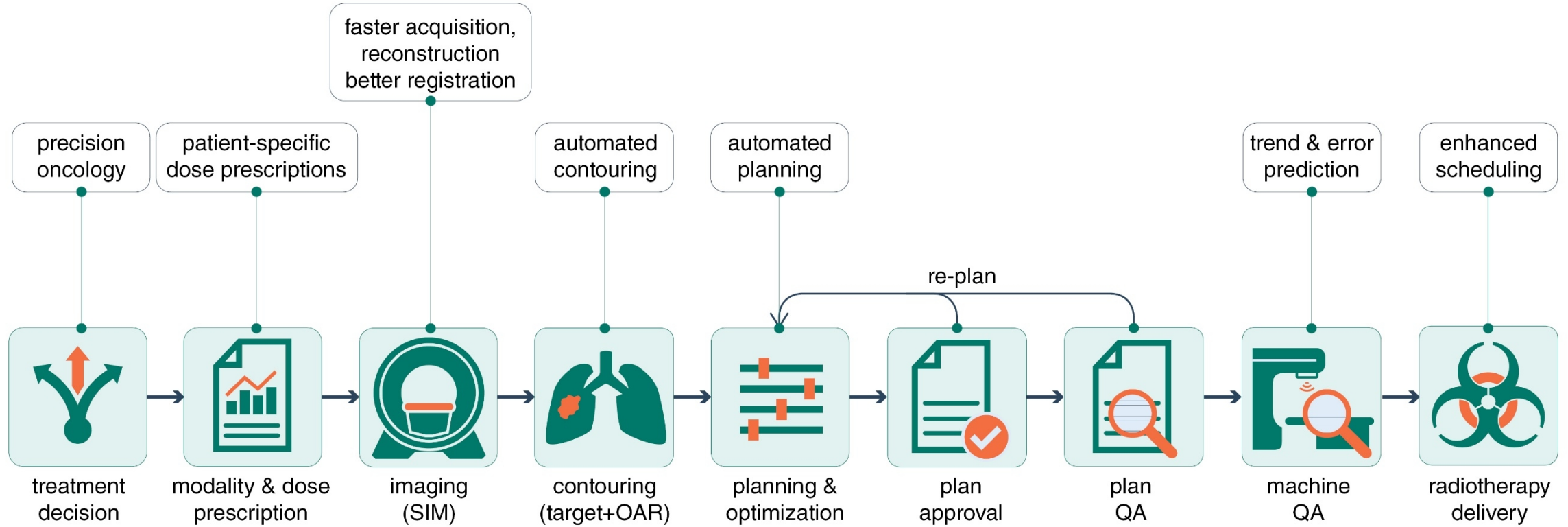
**Data-heavy**

**Knowledge and experience gap**

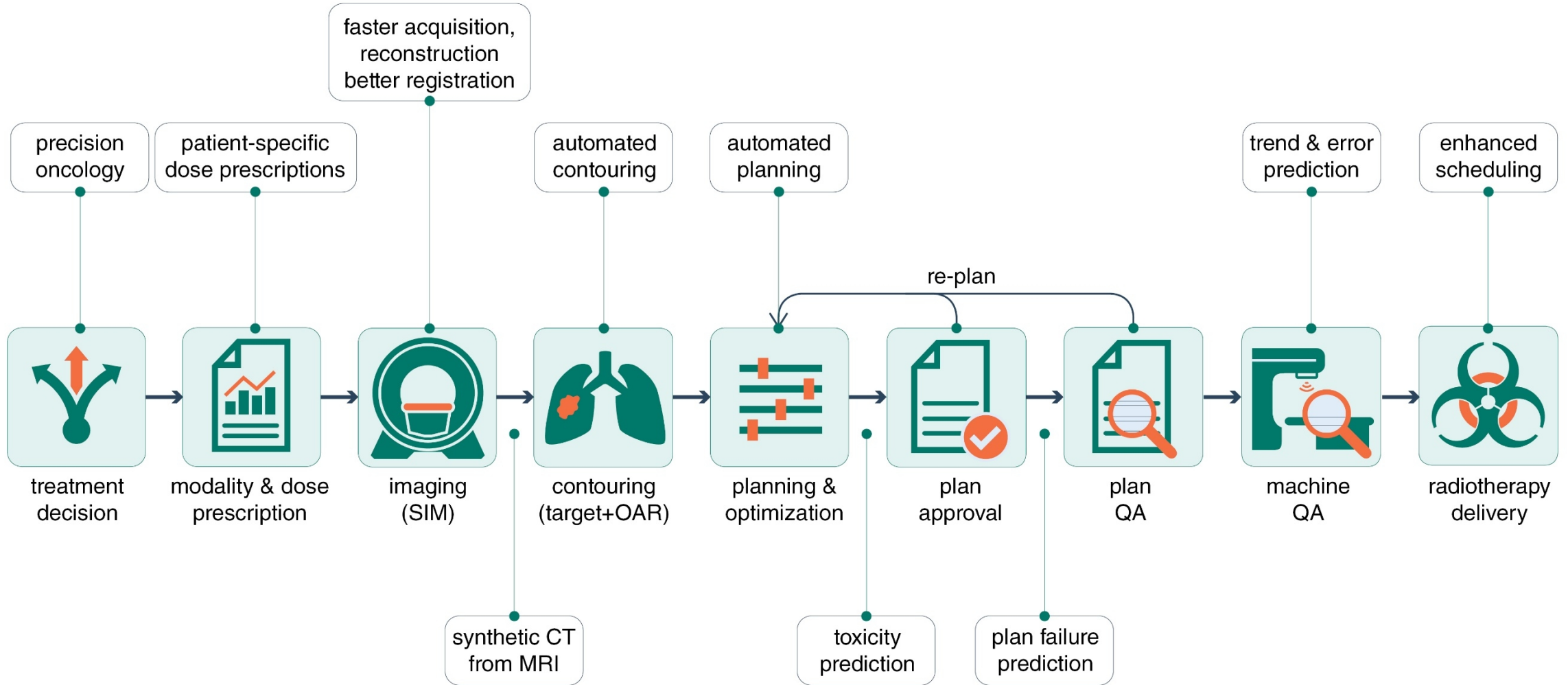
# Today's Radiotherapy Workflow



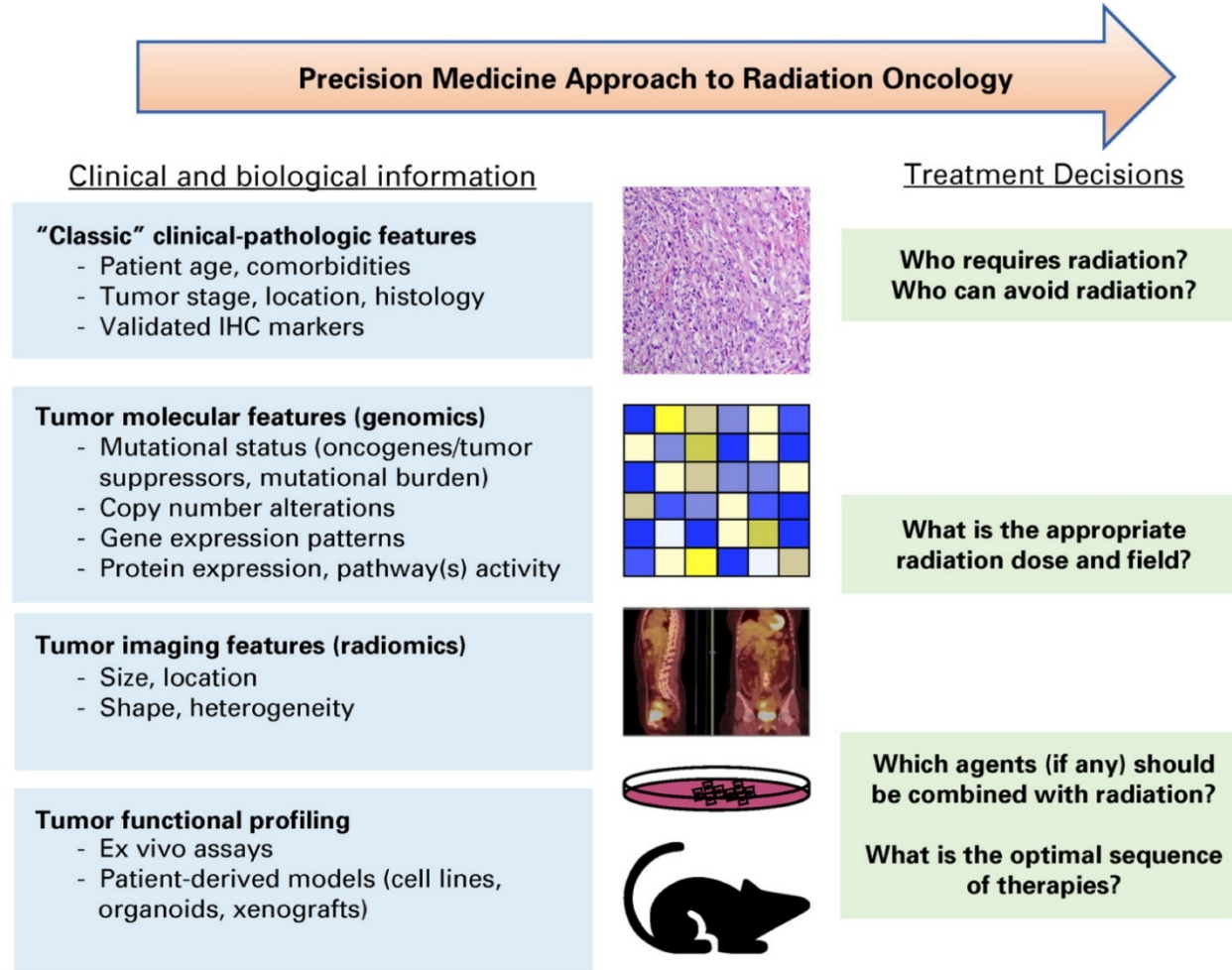
# Potential Improvements



# New Components

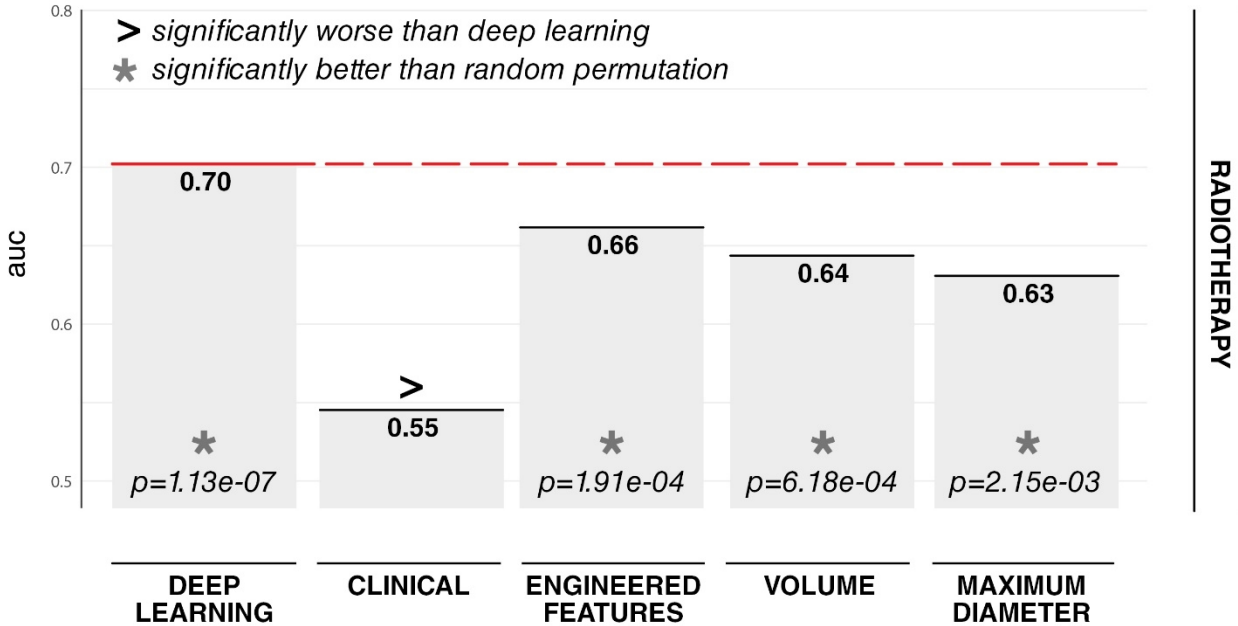
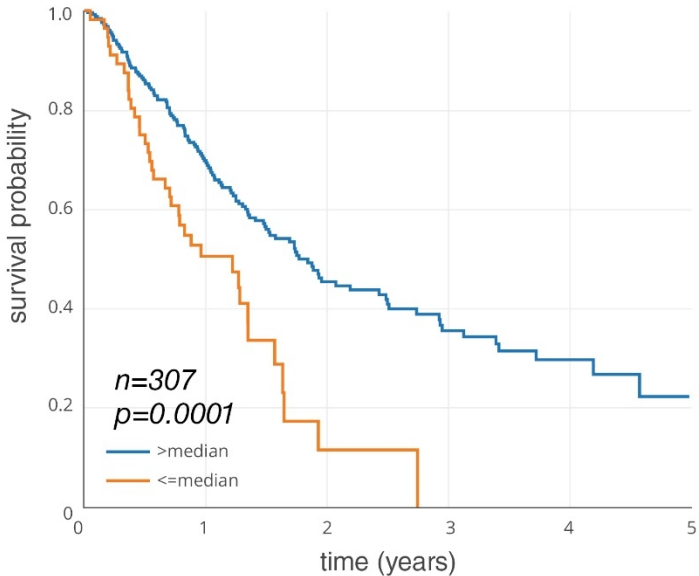


# Precision Radiation Oncology



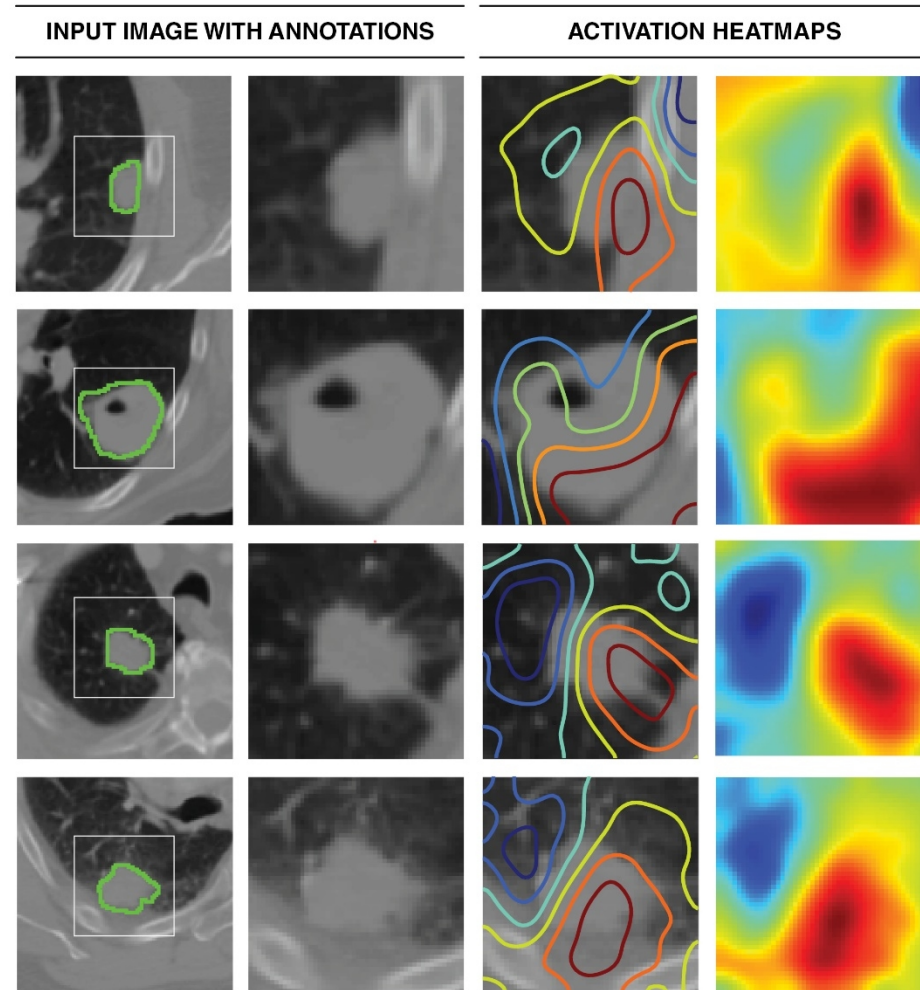
*Sophia C Kamran & Kent W Mouw*

# Tumor Characterization



Ahmed Hosny, Chintan Parmar, Thibaud Coroller, et al.

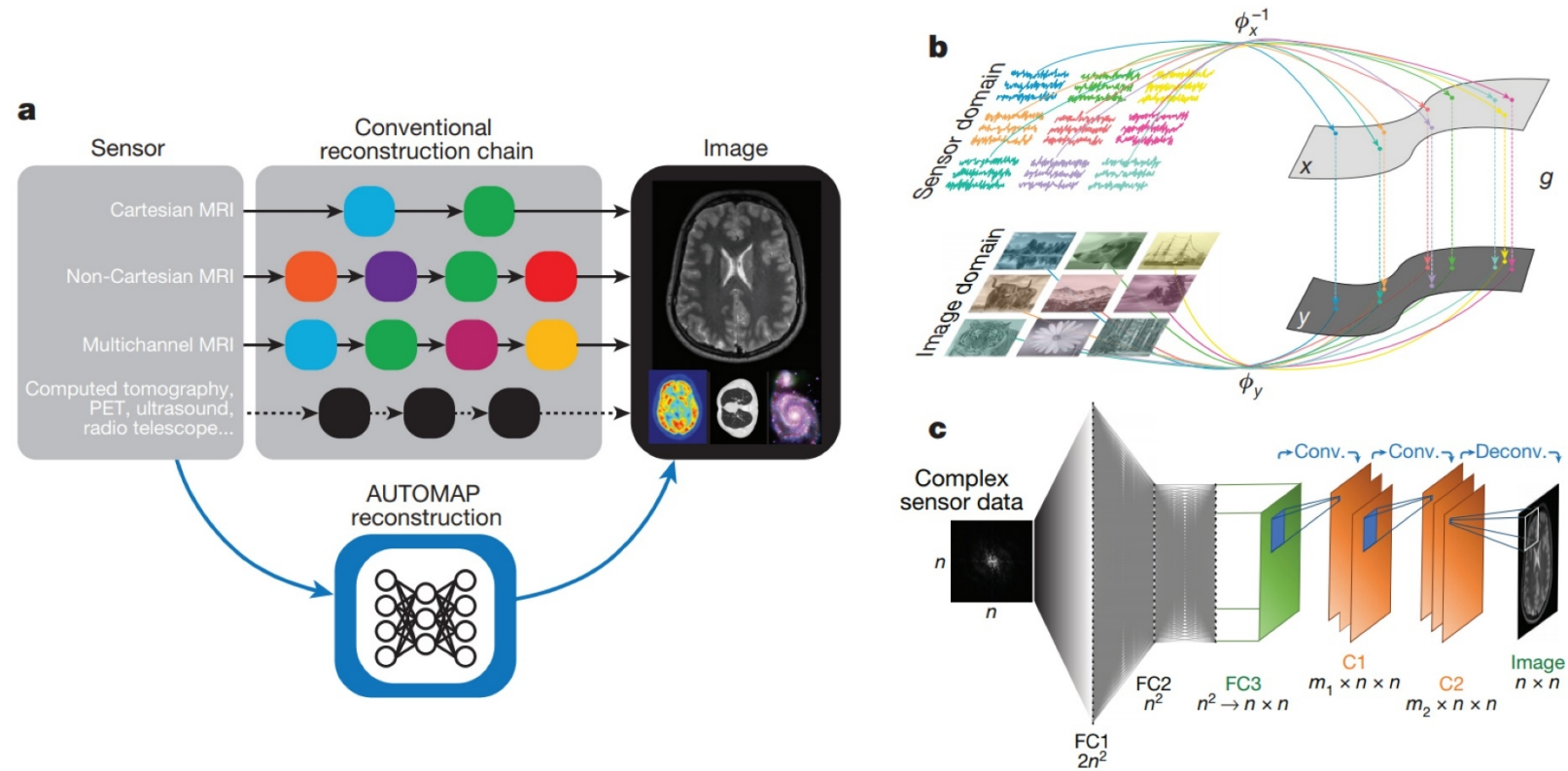
# Tumor Characterization



*Ahmed Hosny, Chintan Parmar, Thibaud Coroller, et al.*

Deep Learning for Lung Cancer Prognostication: A Retrospective Multi-Cohort Radiomics Study  
PLOS Medicine - 2018

# Reconstruction of Undersampled MRI

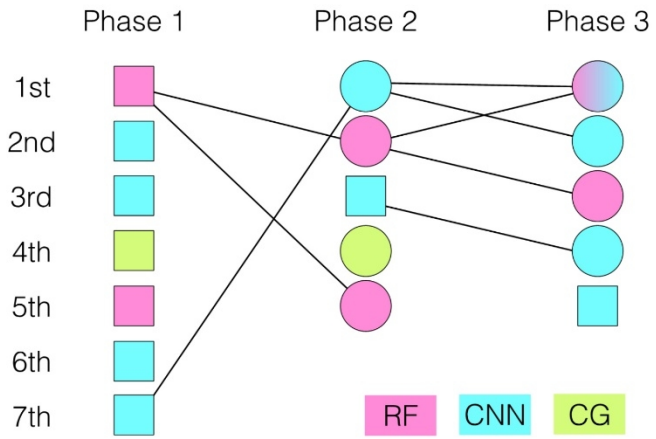
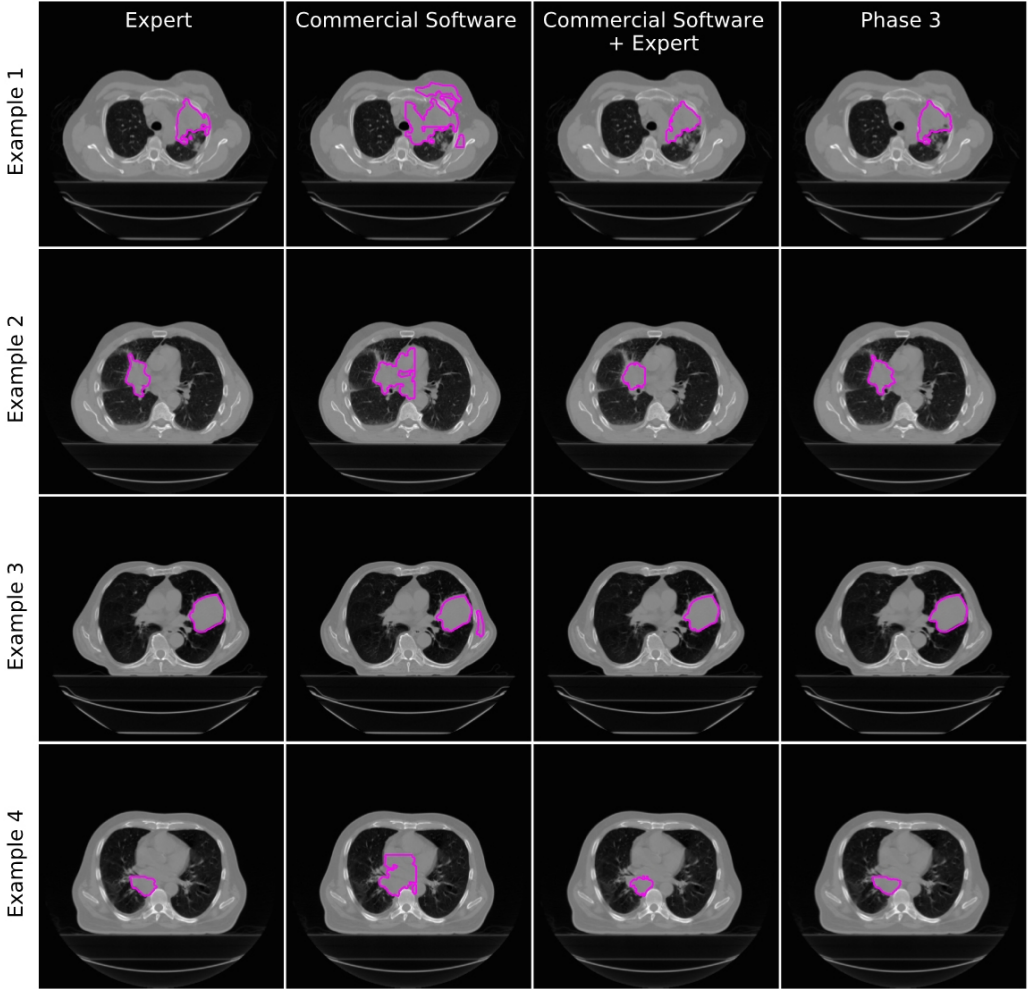


Bo Zhu, Jeremiah Z Liu, Stephen F Cauley, et al.

Image Reconstruction by Domain Transform Manifold Learning  
Nature - 2018



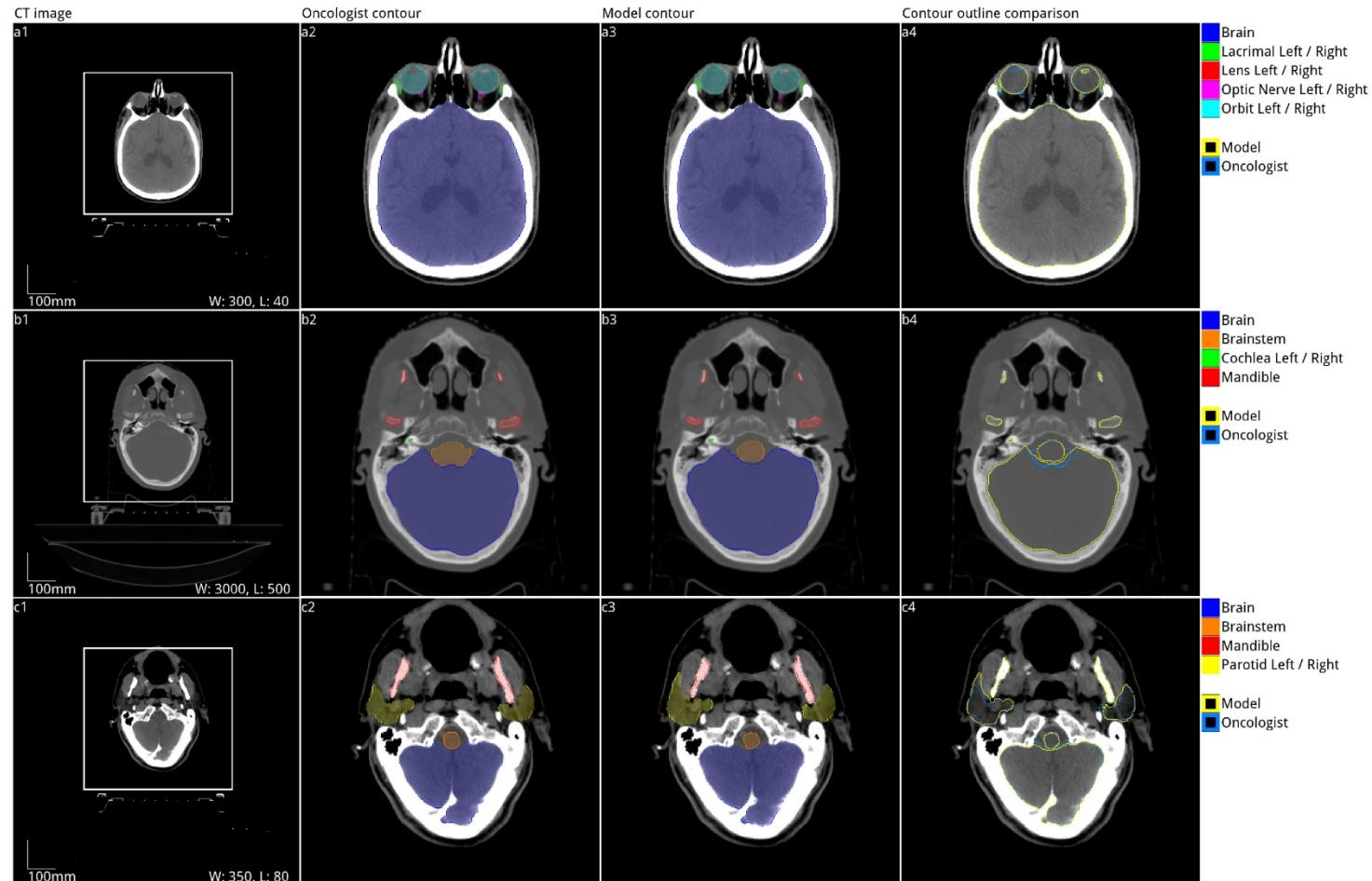
# Target Segmentation



Raymond H Mak, Michael G Endres, Jin H Paik, et al.

Use of Crowd Innovation to Develop an Artificial Intelligence–Based Solution for Radiation Therapy Targeting  
**JAMA Oncology - 2019**

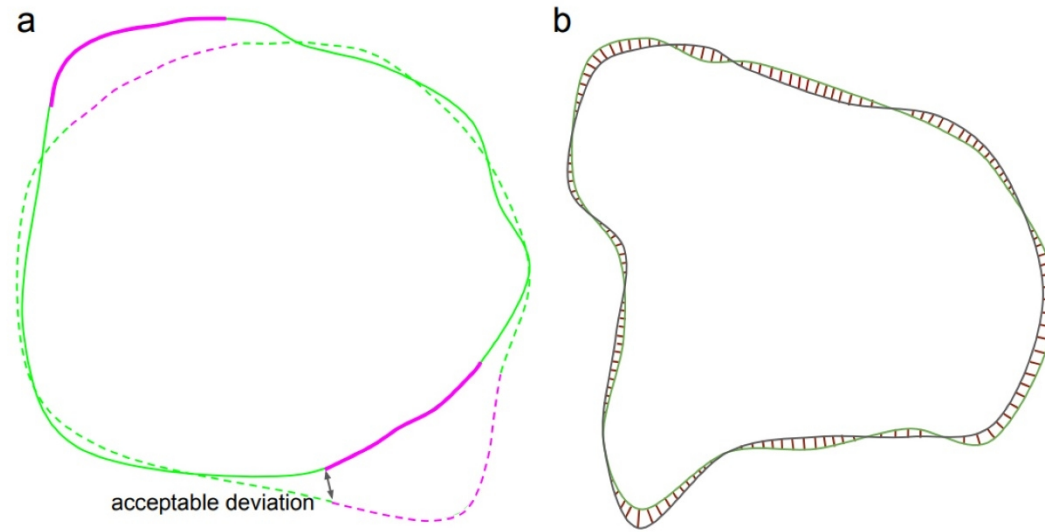
# OAR Segmentation



*Stanislav Nikolov, Sam Blackwell, Ruheena Mendes, et al.*

Deep Learning to Achieve Clinically Applicable Segmentation of Head and Neck Anatomy for Radiotherapy  
Medical Image Computing & Computer Assisted Intervention (MICCAI) - 2018

# OAR Segmentation



**Figure 3 | Surface DSC performance metric.** (a) Illustration of the computation of the surface DSC. Continuous line: predicted surface. Dashed line: ground truth surface. Black arrow: the maximum margin of deviation which may be tolerated without penalty, hereafter referred to by  $\tau$ . Note that in our use case each OAR has an independently calculated value for  $\tau$ . Green: acceptable surface parts (distance between surfaces  $\leq \tau$ ). Pink: unacceptable regions of the surfaces (distance between surfaces  $> \tau$ ). The proposed surface DSC metric reports the good surface parts compared to the total surface (sum of predicted surface area and ground truth surface area). (b) Illustration of the determination of the organ-specific tolerance. Green: segmentation of an organ by oncologist A. Black: segmentation by oncologist B. Red: distances between the surfaces. We defined the organ-specific tolerance as the 95th percentile of the distances collected across multiple segmentations from a subset of seven TCIA scans, where each segmentation was performed a radiographer arbitrated by an oncologist, neither of whom had seen the scan previously.

*Stanislav Nikolov, Sam Blackwell, Ruheena Mendes, et al.*

# Planning

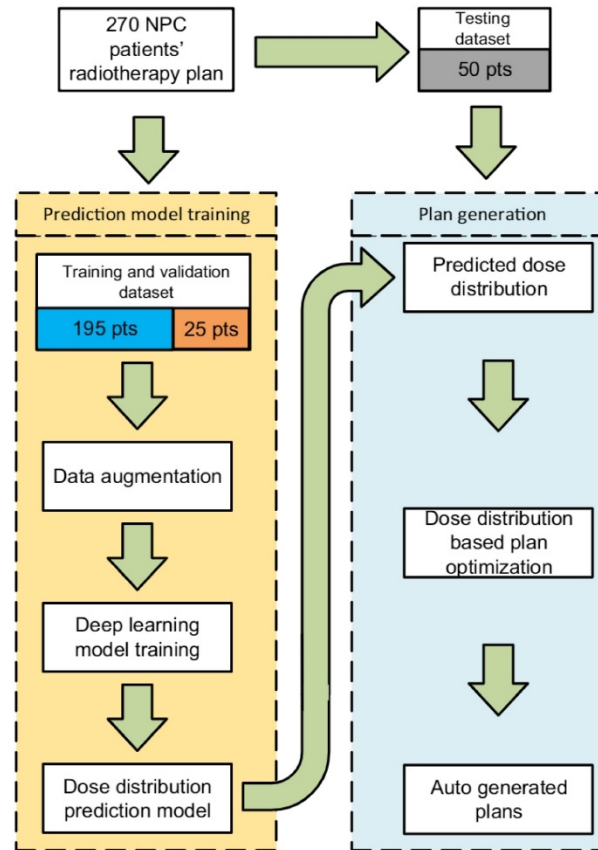
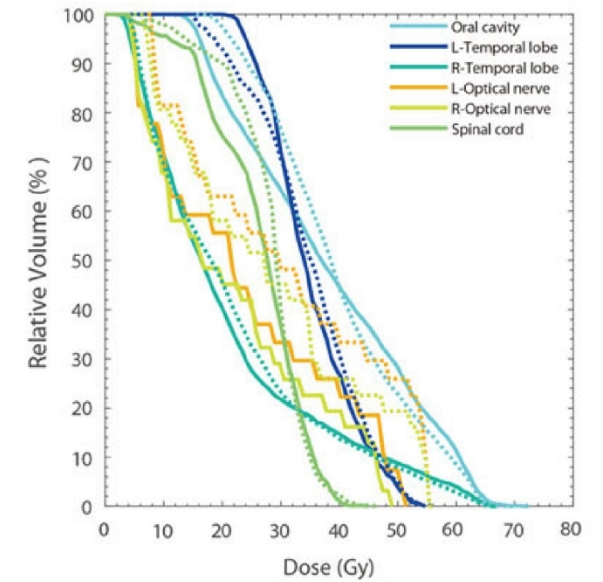
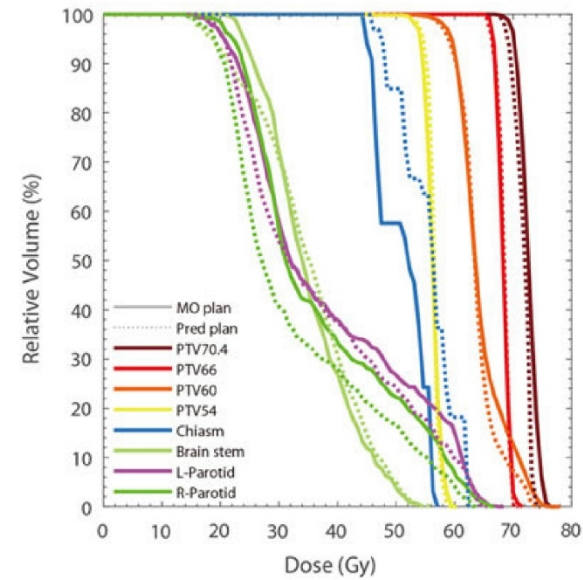
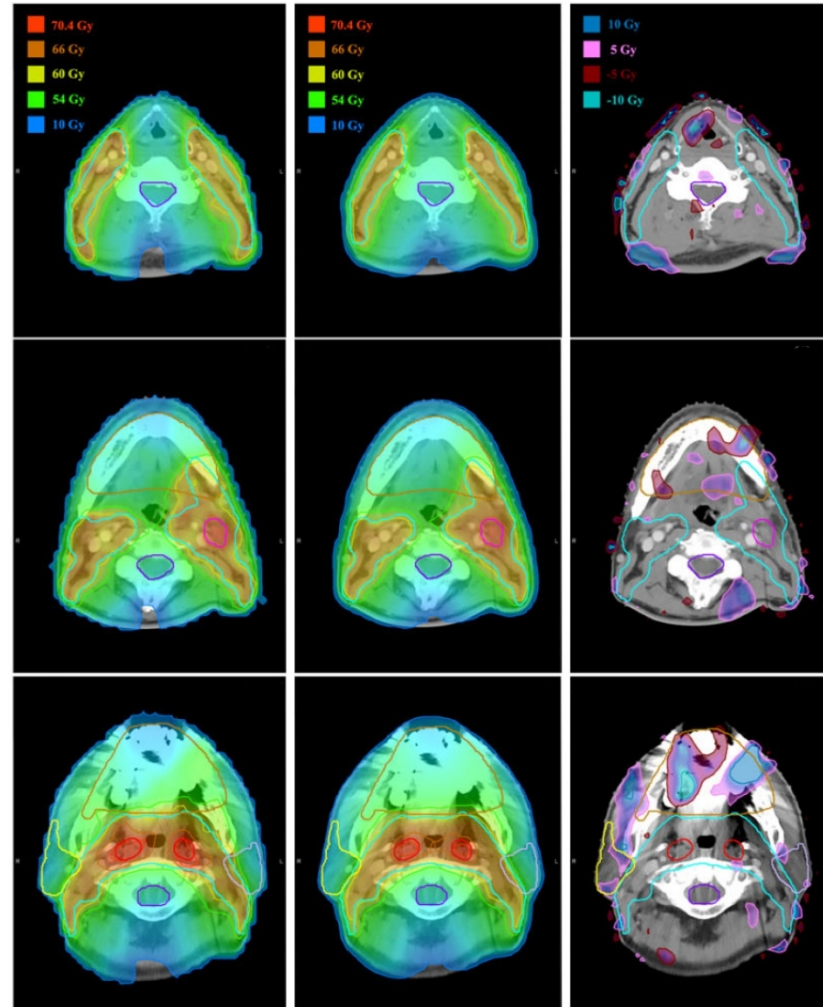


FIG. 1. Flowchart showing the proposed automatic planning process. [Color figure can be viewed at [wileyonlinelibrary.com](http://wileyonlinelibrary.com)]

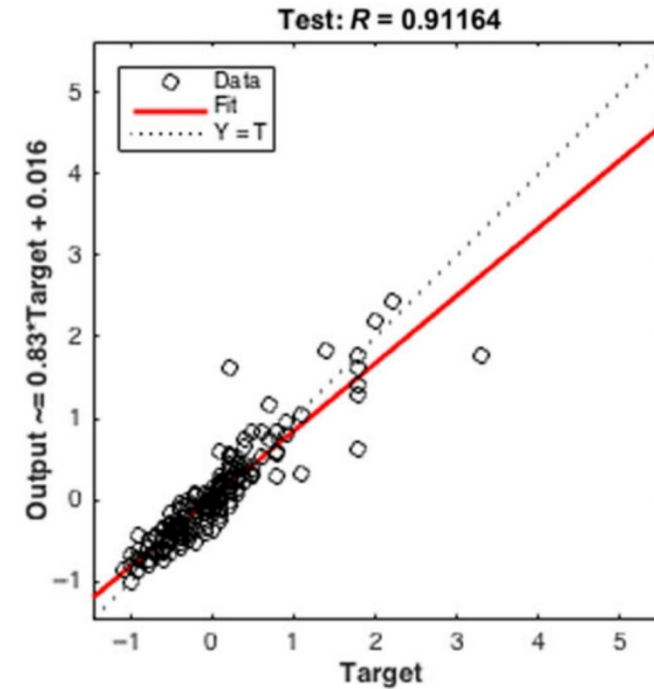
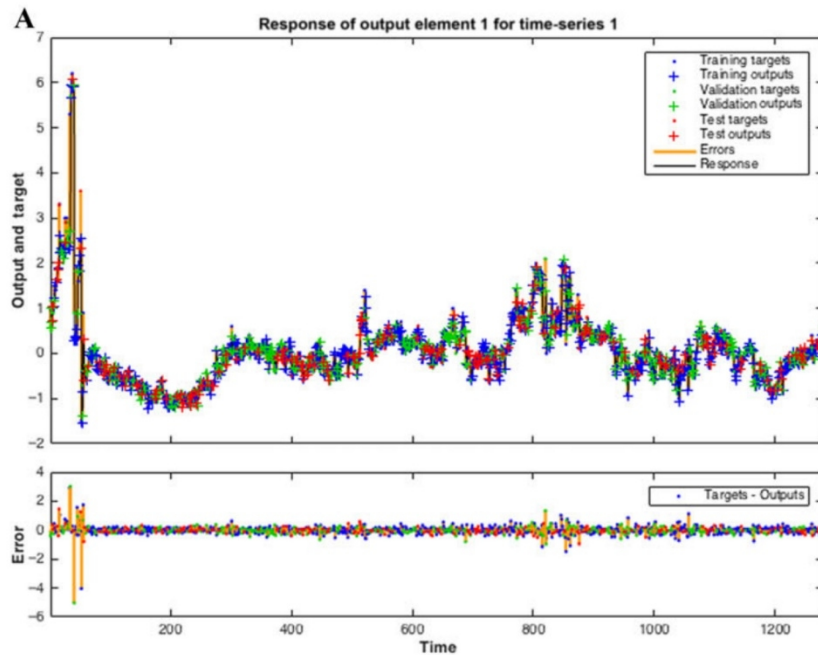
# Planning



*Jiawei Fan, Jiazhou Wang, Zhi Chen, et al.*

Automatic Treatment Planning Based on Three-dimensional Dose Distribution Predicted from Deep Learning Technique  
Medical Physics - 2019

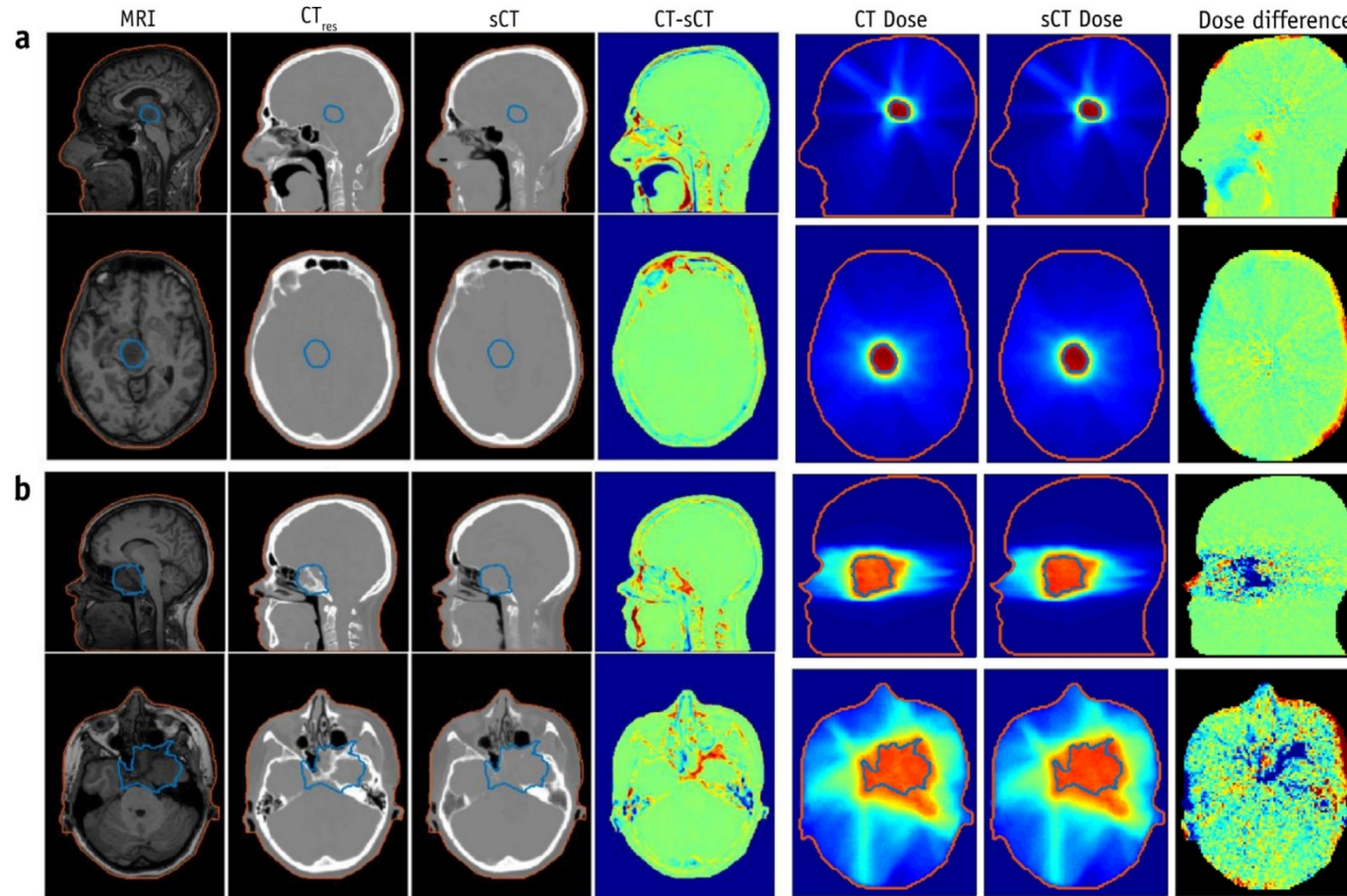
# Machine Trend & Error Prediction



*Qiongge Li & Maria F Chan*

Predictive Time-series Modeling using Artificial Neural Networks for Linac Beam Symmetry: An Empirical Study  
Annals of the New York Academy of Sciences - 2016

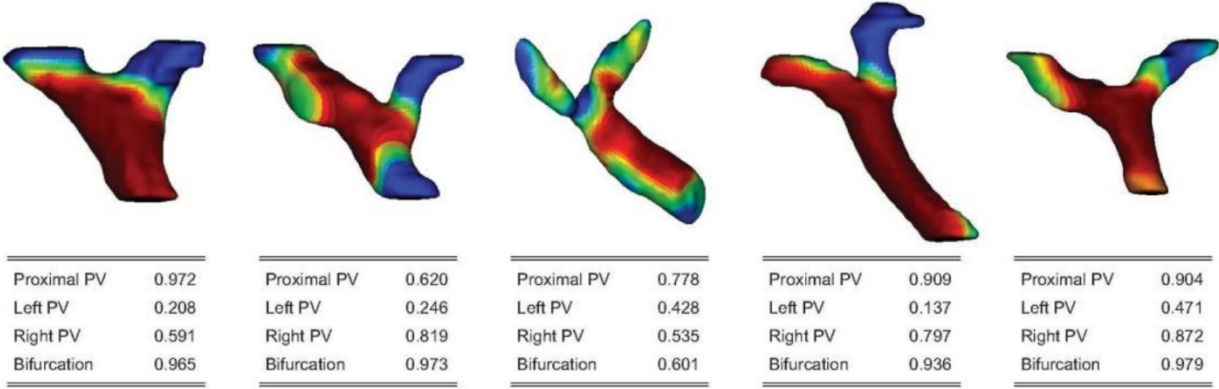
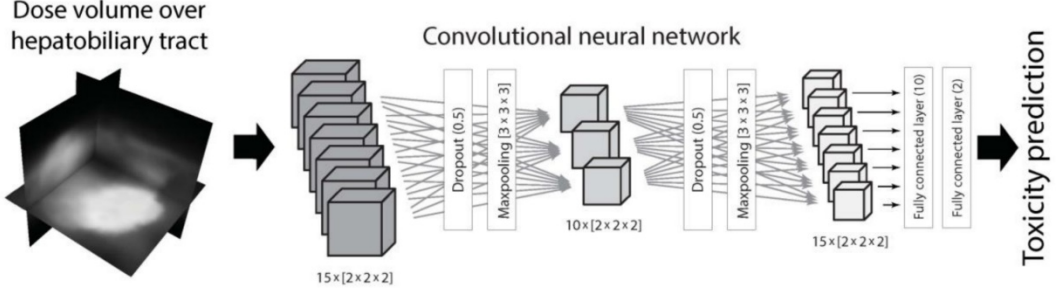
# MRI to Synthetic CT



*Anna M Dinkla, Jelmer M Wolterink, Matteo Maspero, et al.*

MR-Only Brain Radiation Therapy: Dosimetric Evaluation of Synthetic CTs Generated by a Dilated Convolutional Neural Network  
**International Journal of Radiation Oncology - 2018**

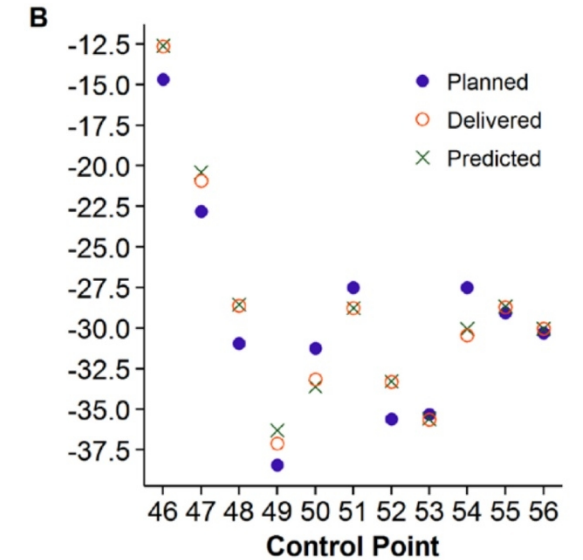
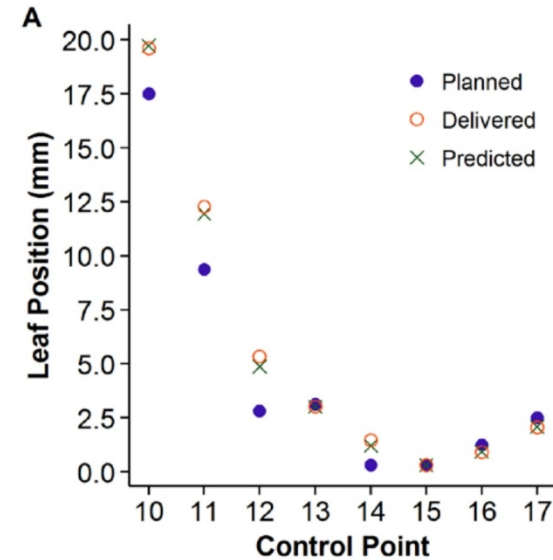
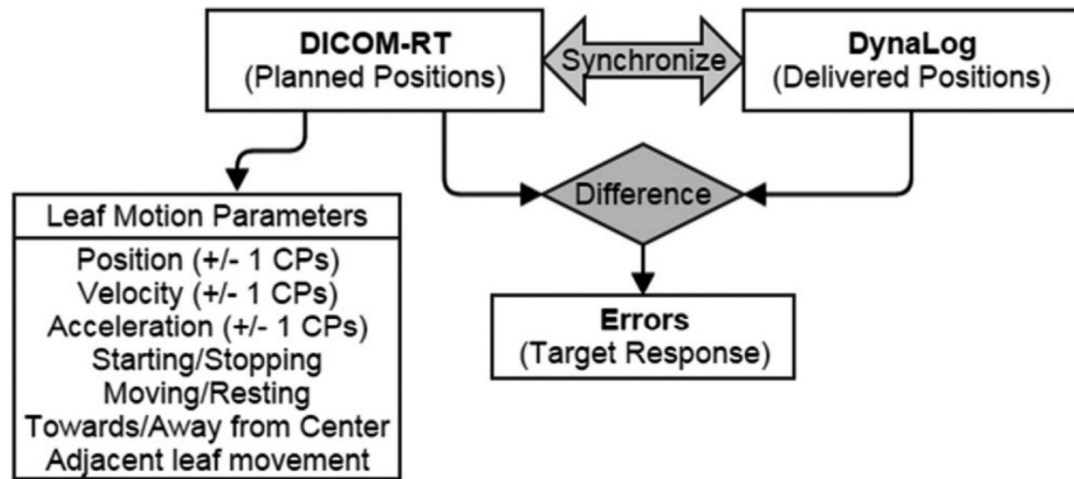
# Toxicity Prediction



*Bulat Ibragimov, Diego Toesca, Daniel Chang, et al.*



# Plan Error Prediction



*Joel N K Carlson, Jong M Park, So-Yeon Park, et al.*

A Machine Learning Approach to the Accurate Prediction of Multi-leaf Collimator Positional Errors  
Physics in Medicine & Biology - 2016

# Lack of External Validation

**Table 1.** Subject Fields of Articles Analyzed

Subject Fields*	Number of Articles (%)
Radiology (including nuclear medicine)	366 (70.9)
Ophthalmology	54 (10.5)
Pathology	41 (7.9)
Dermatology	19 (3.7)
Gastroenterology	19 (3.7)
Other fields	15 (2.9)
Combined fields	
Radiology and cardiology	1 (0.2)
Pathology and nuclear medicine	1 (0.2)
Total	516 (100)

\*Listed in descending order of article number.

**Table 2.** Study Design Characteristics of Articles Analyzed

Design Characteristic	All Articles (n = 516)	Articles Published in Medical Journals (n = 437)	Articles Published in Non-Medical Journals (n = 79)	P*
External validation				1.000
Used	31 (6.0)	27 (6.2)	4 (5.1)	
Not used	485 (94.0)	410 (93.8)	75 (94.9)	
In studies that used external validation				
Diagnostic cohort design	5 (1.0)	5 (1.1)	0 (0)	1.000
Data from multiple institutions	15 (2.9)	12 (2.7)	3 (3.8)	0.713
Prospective data collection	4 (0.8)	4 (0.9)	0 (0)	1.000
Fulfillment of all of above three criteria	0 (0)	0 (0)	0 (0)	1.000
Fulfillment of at least two criteria	3 (0.6)	3 (0.7)	0 (0)	1.000
Fulfillment of at least one criterion	21 (4.1)	18 (4.1)	3 (3.8)	1.000

Data are expressed as number of articles with corresponding percentage enclosed in parentheses. \*Comparison between medical and non-medical journals.

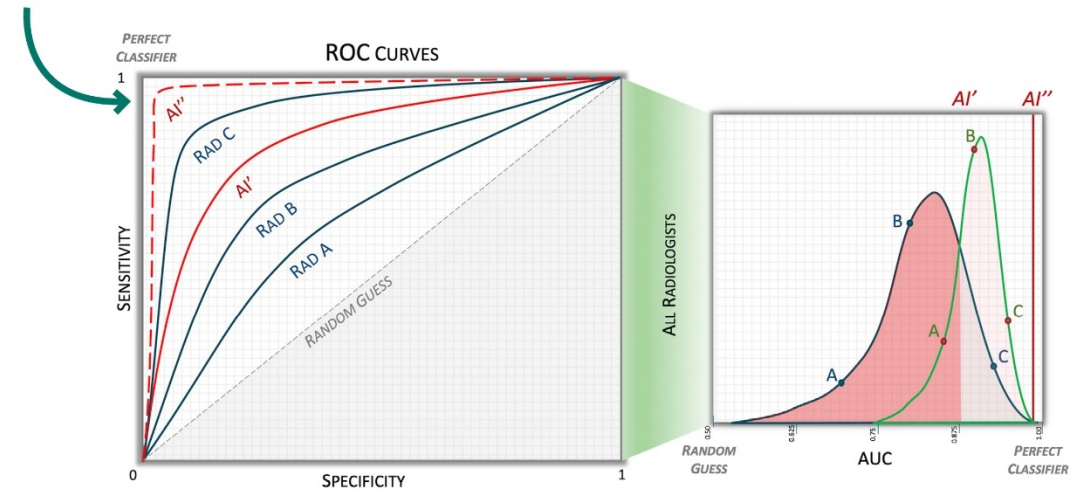
*Dong W Kim, Hye Y Jang, Kyung W Kim, et al.*

Design Characteristics of Studies Reporting the Performance of Artificial Intelligence Algorithms for Diagnostic Analysis of Medical Images  
**Korean Journal of Radiology - 2019**

# Clinical Translation

## HEALTHCARE AI CHALLENGES

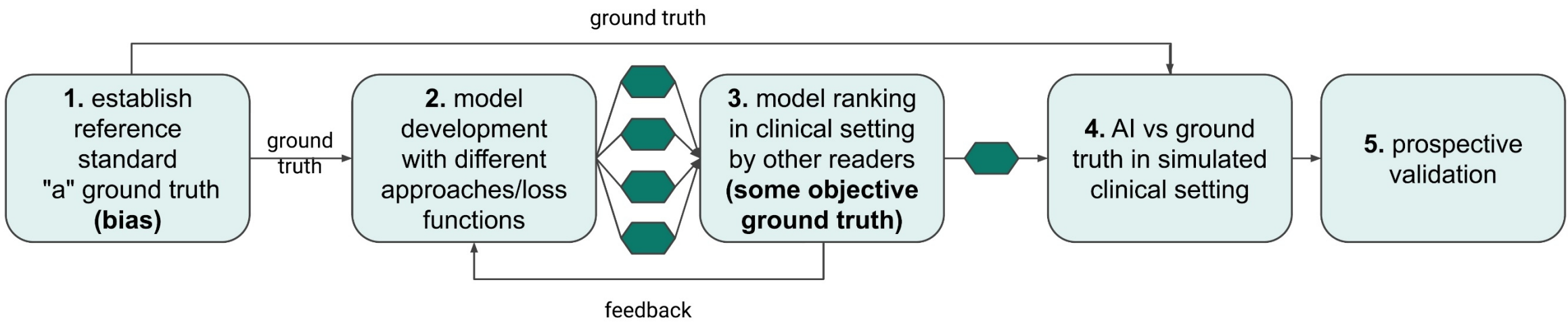
	Possible Reasons	Current Impact
1	Clinically effective uses for AI have been poorly defined	<div style="width: 40%;"></div>
2	No standards for clinical integration / care management	<div style="width: 35%;"></div>
3	Large, annotated training sets are difficult to create	<div style="width: 38%;"></div>
4	Currently no successful economic/business models	<div style="width: 32%;"></div>
5	Limitations in current AI/human UX/UI	<div style="width: 28%;"></div>
6	Inconsistent results and explicability between models	<div style="width: 22%;"></div>
7	Healthcare regulatory hurdles are challenging	<div style="width: 18%;"></div>
8	Resulting inference models are too brittle in practice	<div style="width: 12%;"></div>
9	Data science algorithms are limited for healthcare use	<div style="width: 8%;"></div>
10	Poor acceptance of technology in healthcare	<div style="width: 5%;"></div>



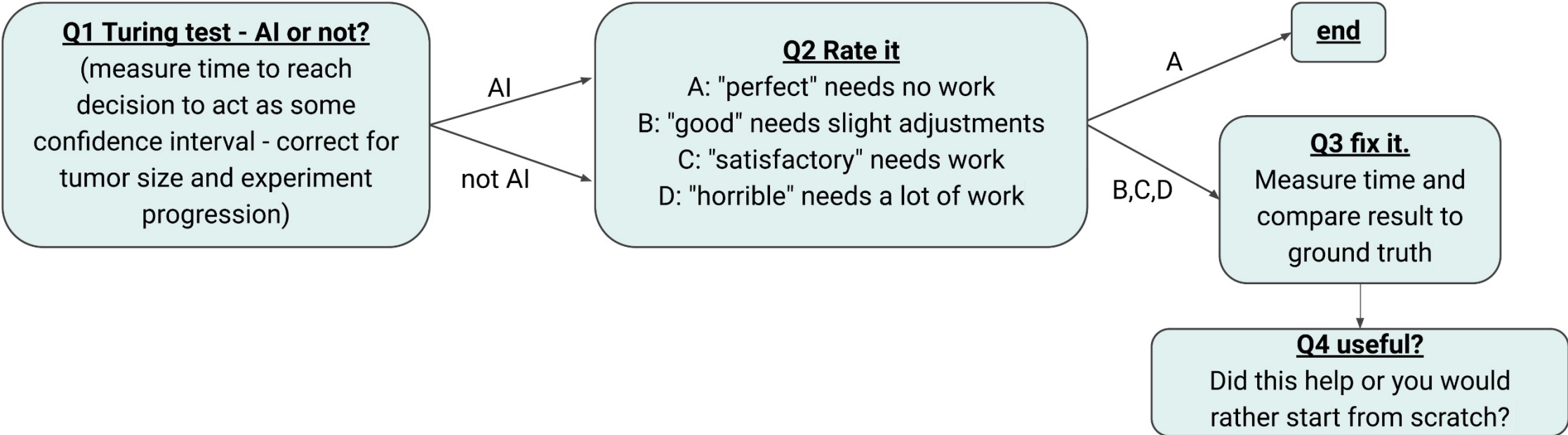
*Bibb Allen, Steven E Seltzer, Curtis P Langlotz, et al.*

A Road Map for Translational Research on Artificial Intelligence in Medical Imaging: 2018 NIH/RSNA/ACR/The Academy Workshop  
**Journal of the American College of Radiology - 2019**

# Validation Framework



# Validation Framework



# Validation Framework

**Recruiting non-research staff to conduct experiments**

**Assessing time and effort assessment in carrying out clinical tasks**

**Develop plugins for clinical systems**

# Clinical Adoption



# Clinical Adoption



Poor performance?

Poor implementation?

Lack of time?



