

Quantitative Endoscopy and Interventional Medicine

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Endoscopy: The Oldest Imaging Modality

- **1804:** First endoscope by Bozzini
- **1822:** Beaumont uses in human
- **1877:** Nitze introduces fixed lens system
- **1901:** Hirschmann first use to visualize sinus
- **1953:** Fiberscope introduced by Hopkins
 - Actually patented by Baird in 1927
 - First camera coupling in 1957
 - Converted to rod-lens in 1960
- **1980's:** First effective video scopes allowing development of minimally invasive surgery

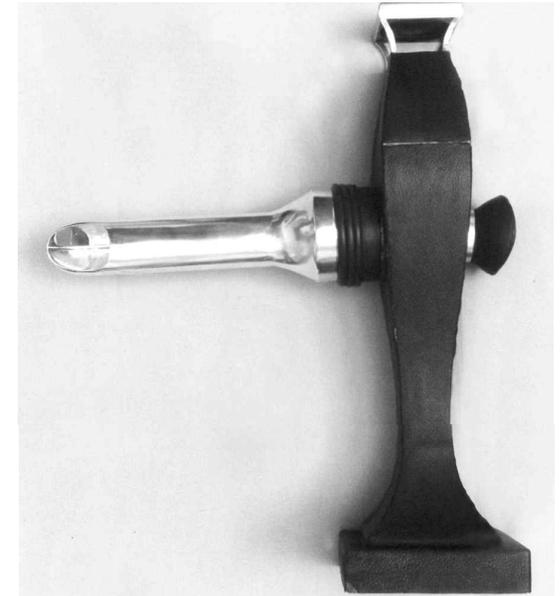


Fig. 3 - Engel, R. Philipp Bozzini--The father of endoscopy
Journal of Endourology, Mary Ann Liebert, Inc., 2003, 17, 859-862

Vision-Based Navigation in Image-Guided Interventions. Mirota Hager Ishii, Annual Review of Biomedical Engineering, 2010

The Opportunity

- **Olympus** introduced its first HDTV surgical cameras in 2005. Millions of procedures performed.
- **Intuitive Surgical:** More the 1.6M procedures performed under high-def stereo video guidance



None of this video is processed or archived.

A Steady and Growing Field

- Puerto, Gustavo A., and Gian-Luca Mariottini. "A comparative study of correspondence-search algorithms in MIS images." *Medical Image Computing and Computer-Assisted Intervention–MICCAI 2012*. Springer Berlin Heidelberg, 2012. 625-633.
- Xiongbiao Luo, Marco Feuerstein, Daisuke Deguchi, Takayuki Kitasaka, Hirotsugu Takabatake, and Kensaku Mori. Development and comparison of new hybrid motion tracking for bronchoscopic navigation, *Medical Image Analysis* 16(3), 577-596, (2012).
- Helferty, James P., et al. "Computer-based system for the virtual-endoscopic guidance of bronchoscopy." *Computer Vision and Image Understanding* 108.1 (2007): 171-187.
- Wengert, Christian, et al. "Markerless endoscopic registration and referencing." *Medical Image Computing and Computer-Assisted Intervention–MICCAI 2006*. Springer Berlin Heidelberg, 2006. 816-823.
- Deligianni, Fani, Adrian Chung, and Guang-Zhong Yang. "pq-space based 2D/3D registration for endoscope tracking." *Medical Image Computing and Computer-Assisted Intervention-MICCAI 2003*. Springer Berlin Heidelberg, 2003. 311-318.
- Mori, Kensaku, et al. "A method for tracking the camera motion of real endoscope by epipolar geometry analysis and virtual endoscopy system." *Medical Image Computing and Computer-Assisted Intervention–MICCAI 2001*. Springer Berlin Heidelberg, 2001.

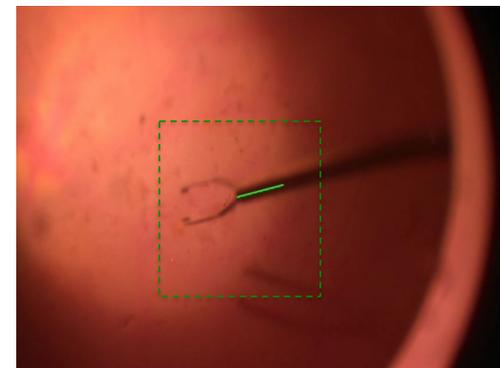
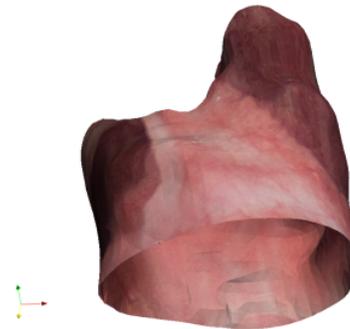
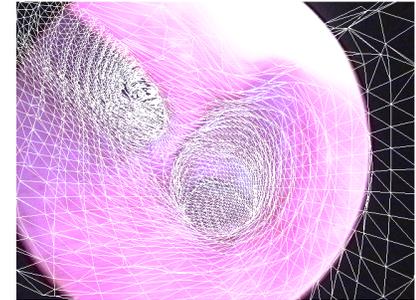
How To Choose a Path

1. **Significant:** address a true need
2. **Practical:** consistent with reasonable clinical workflow
3. **Deployable:** usable in foreseeable practice for next decade
4. **Testable** in real-world settings – measurable progress!

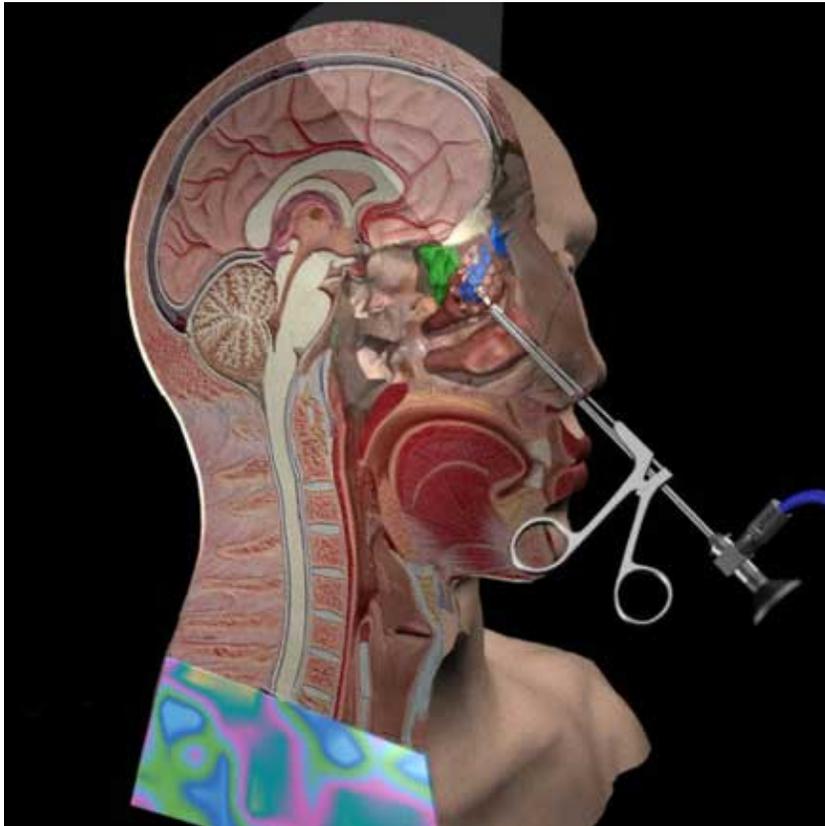


An Opportunity for Computational Vision: Quantitative Interventional Tools

- Video-volume registration
 - Visualization/Augmentation
 - Evaluation of surgical progress
- Video reconstruction
 - Staging/evaluation
 - Monitoring
 - Registration
- Tool tracking/surface estimation
 - Enhanced tool motion
 - Automation
 - Safety zones



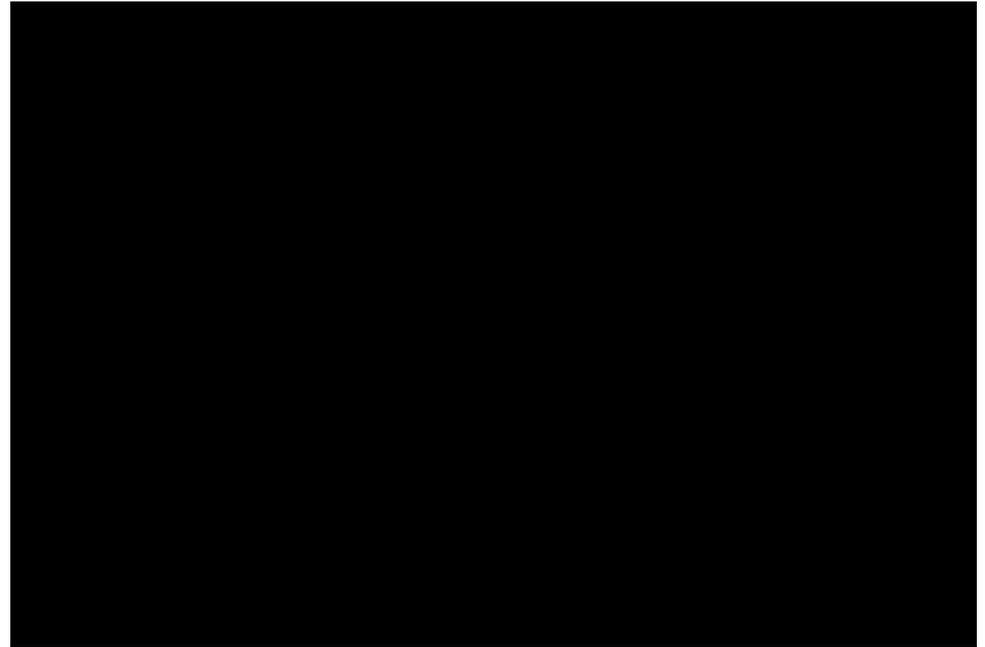
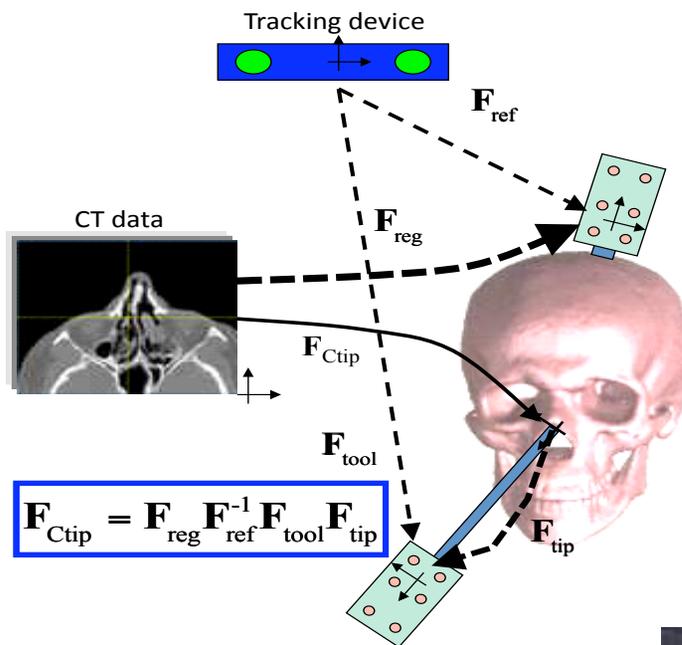
Surgery Near the Skull Base



NIH- R21EB005201, Hager, Ishii, Taylor

NIH - R01EB015530, Hager, Ishii, Taylor, Siewerdsen

Traditional Navigation



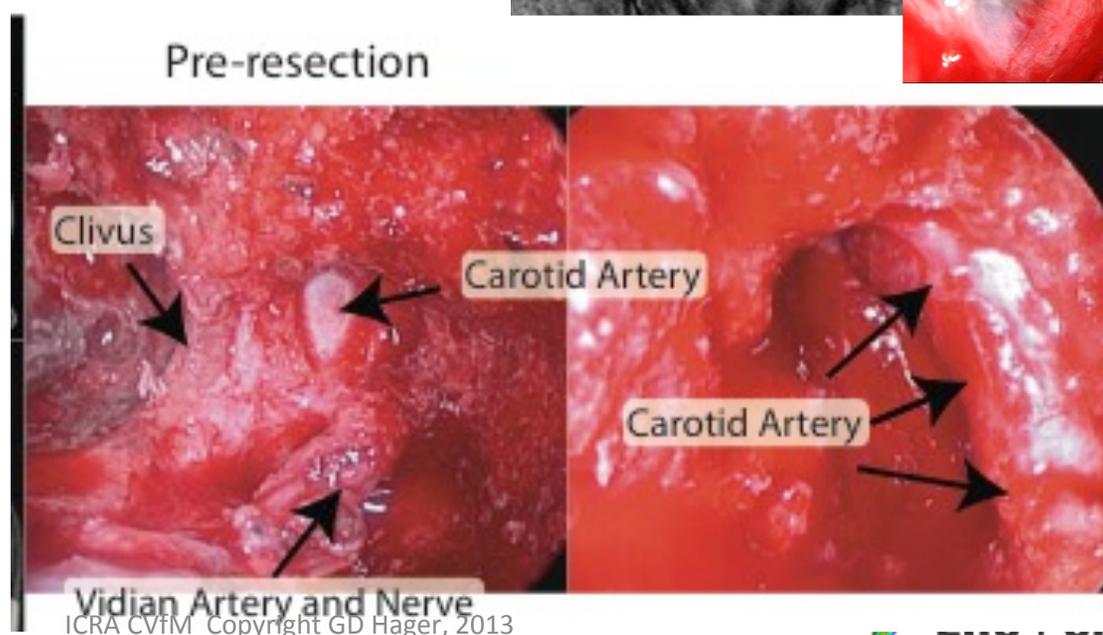
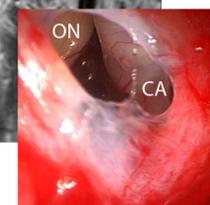
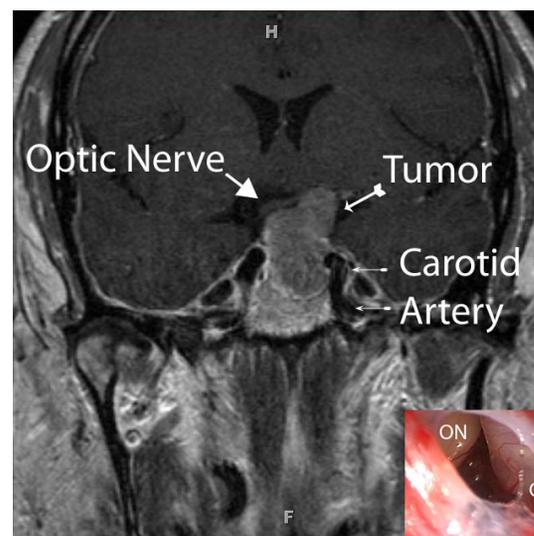
Quoted accuracy of 2mm



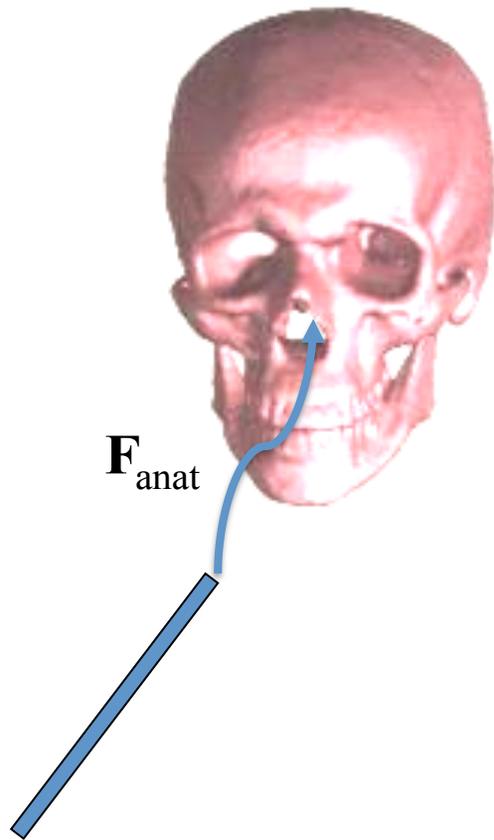
BrainLab Intraoperative CT Solution

Motivation: Surgery Near the Skull Base

- Challenge: Carotid artery mobilization
 - Large bone excision to track artery
 - Long time in OR
 - Traditional navigation methods are inadequate



Goal: Direct Video-CT Registration

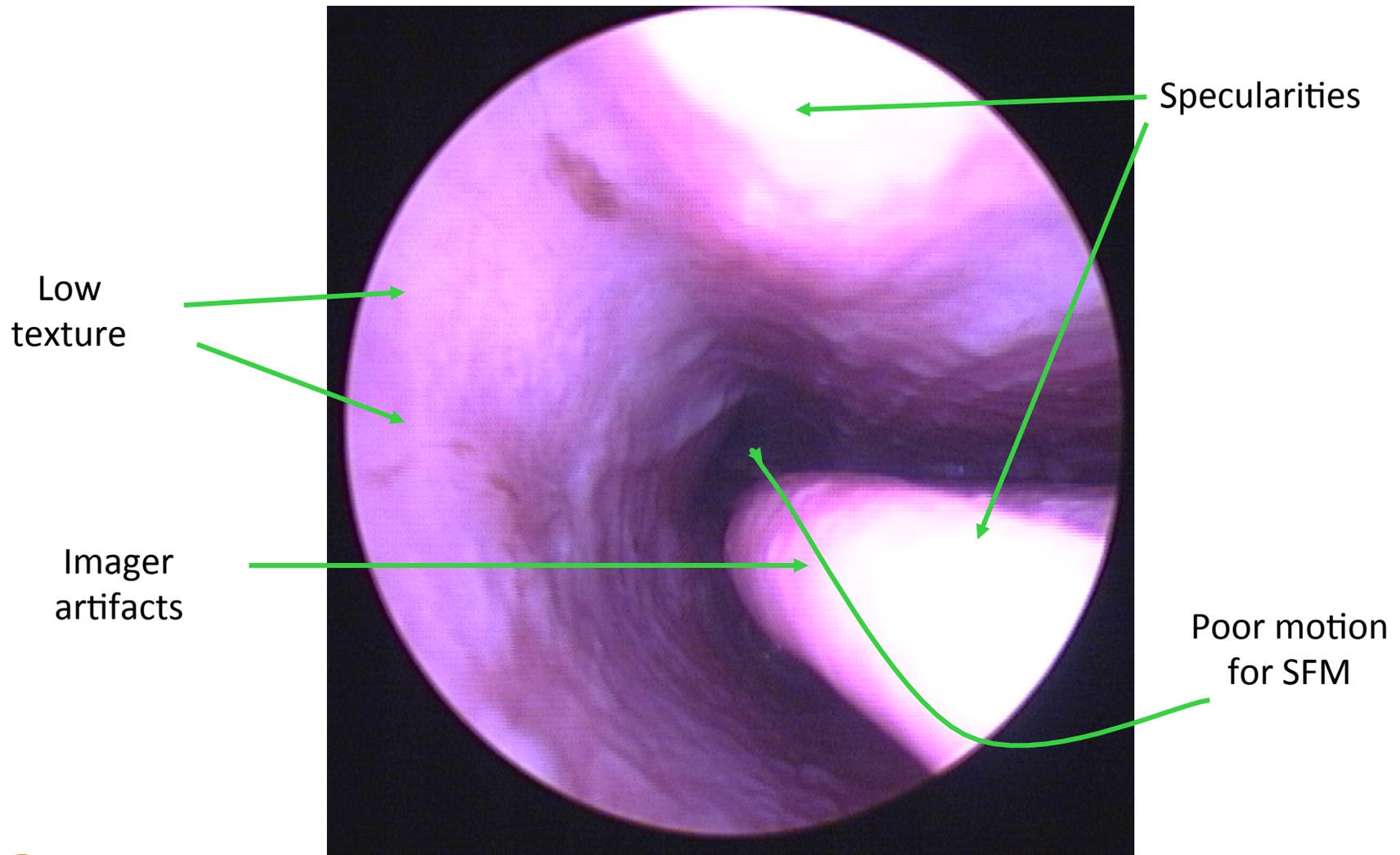


From a sequence of **monocular** endoscope images, compute high-accuracy **local** registration to CT

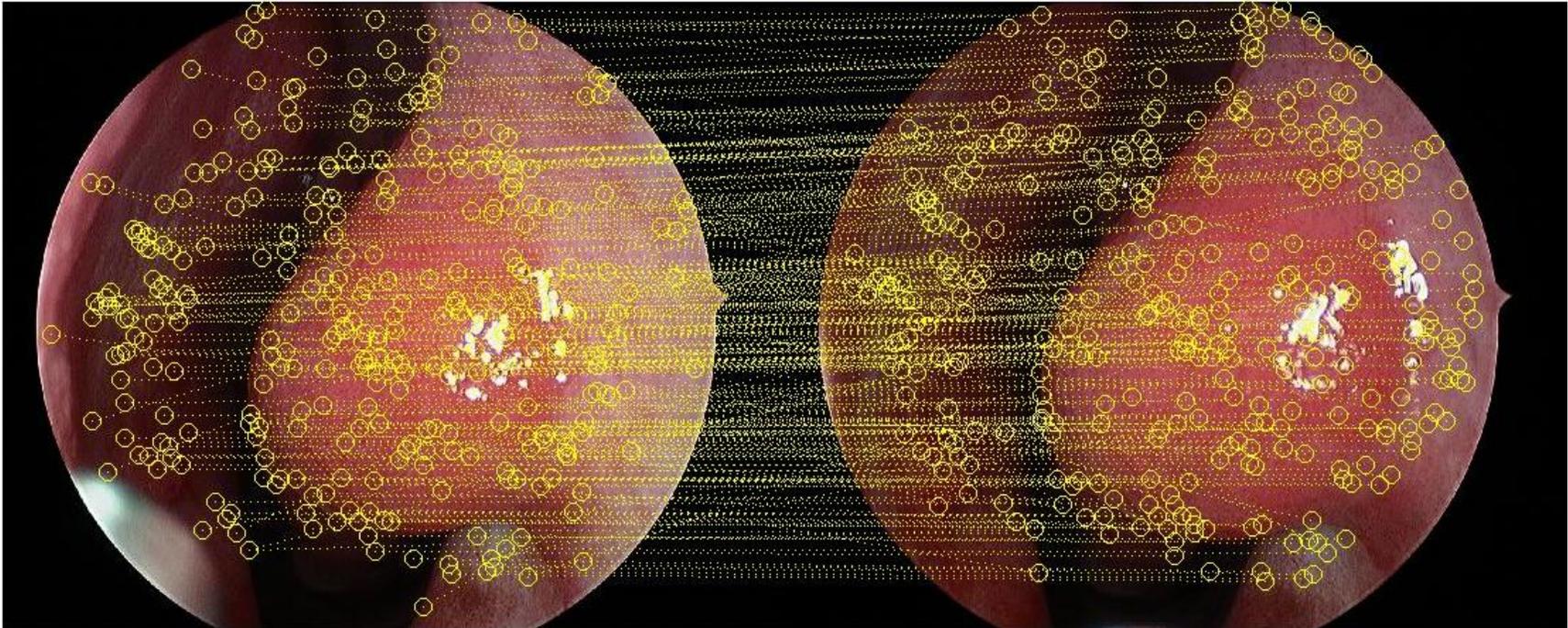


Mirota, Siewerdsen, et al.

A Few Challenges

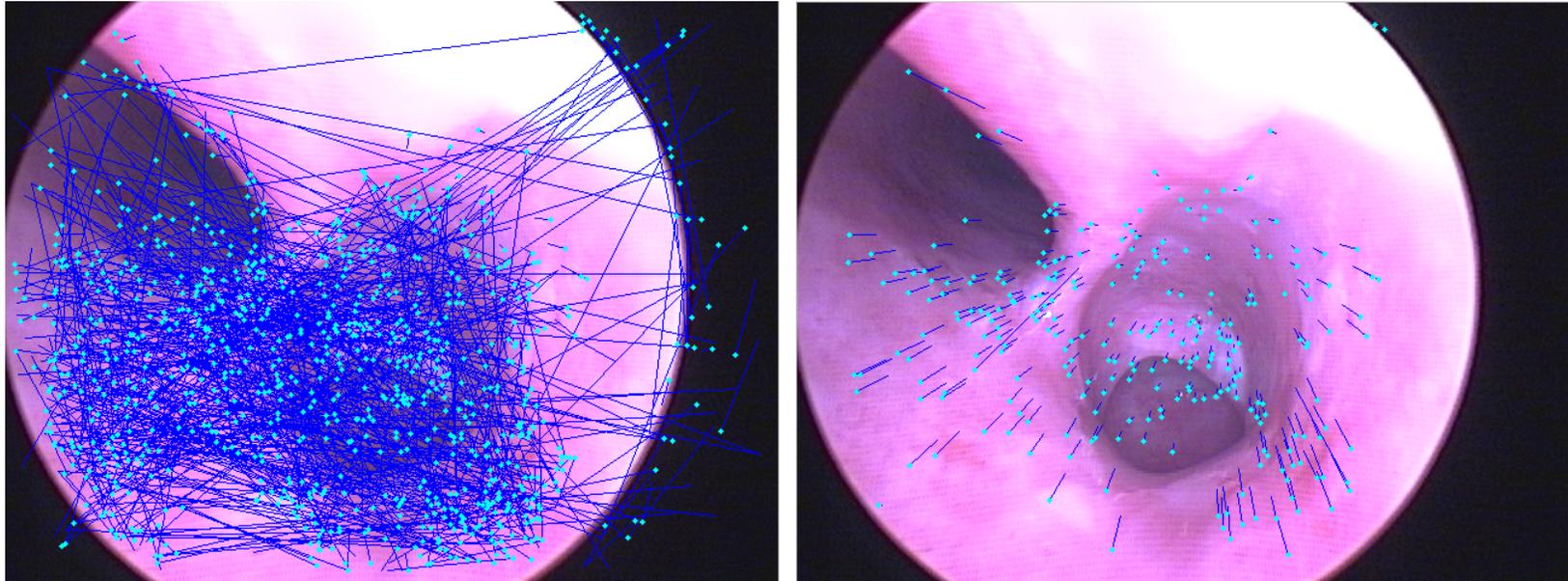


A Few Challenges



The results of traditional SIFT matching on a high def pair

A Solution

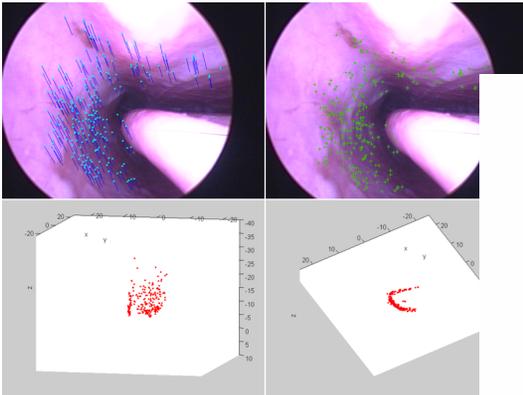


ASKC: A new robust estimation method that is able to detect inliers in highly contaminated data: motion estimation, registration, and motion tracking.

A generalized kernel consensus-based robust estimator, H Wang, D Mirota, GD Hager, PAMI 2010

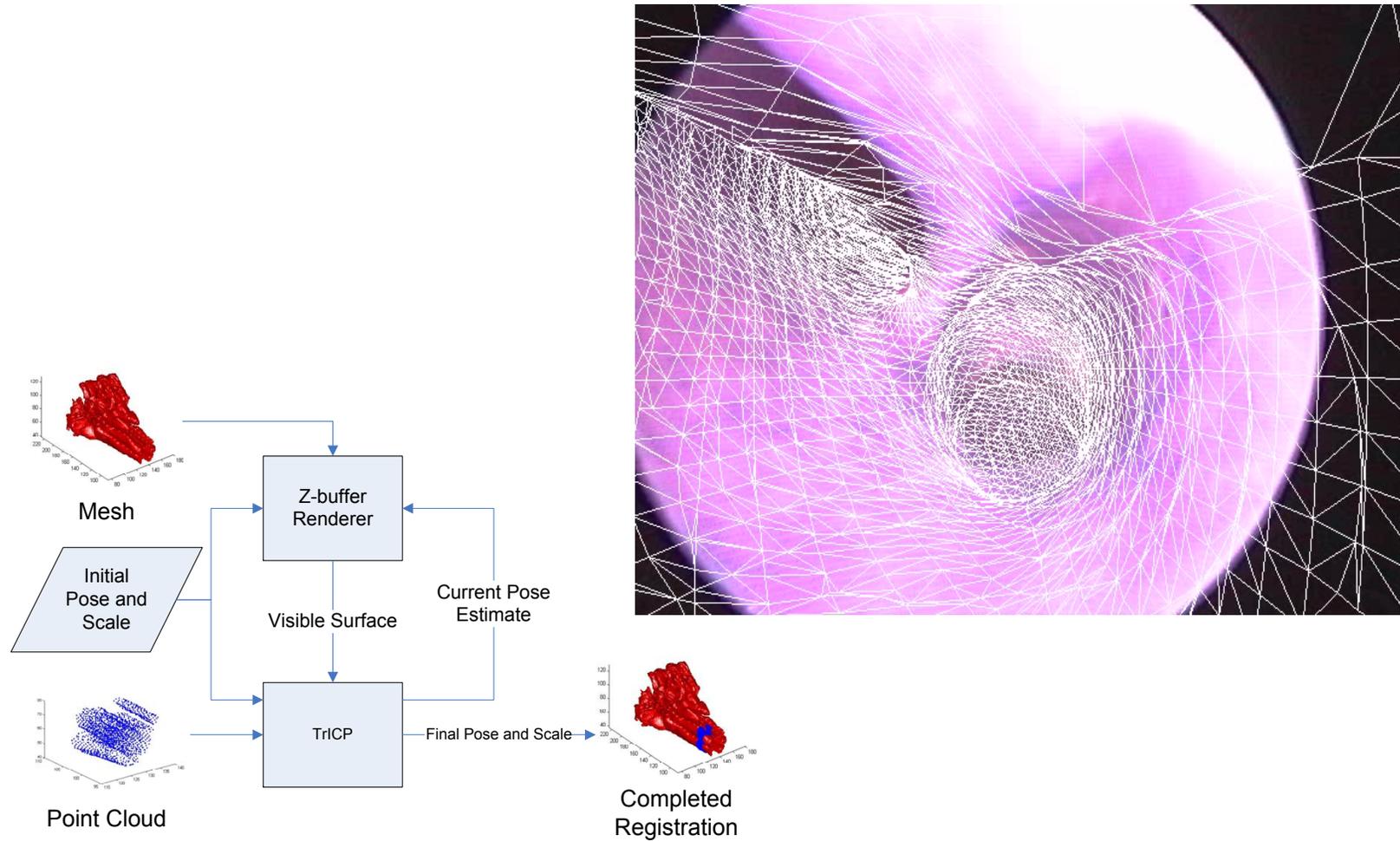
Multi-Frame Results

(Wang, Mirotu, Ishii, Hager, CVPR 08)

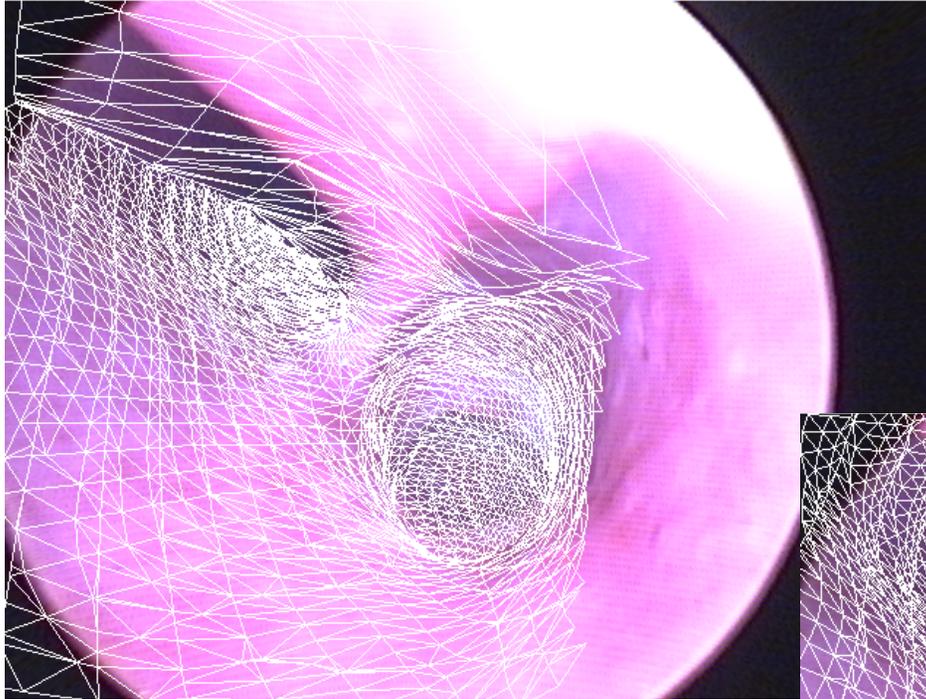


Registration System

Mirota, Ishii, Taylor, Hager, SPIE 2009

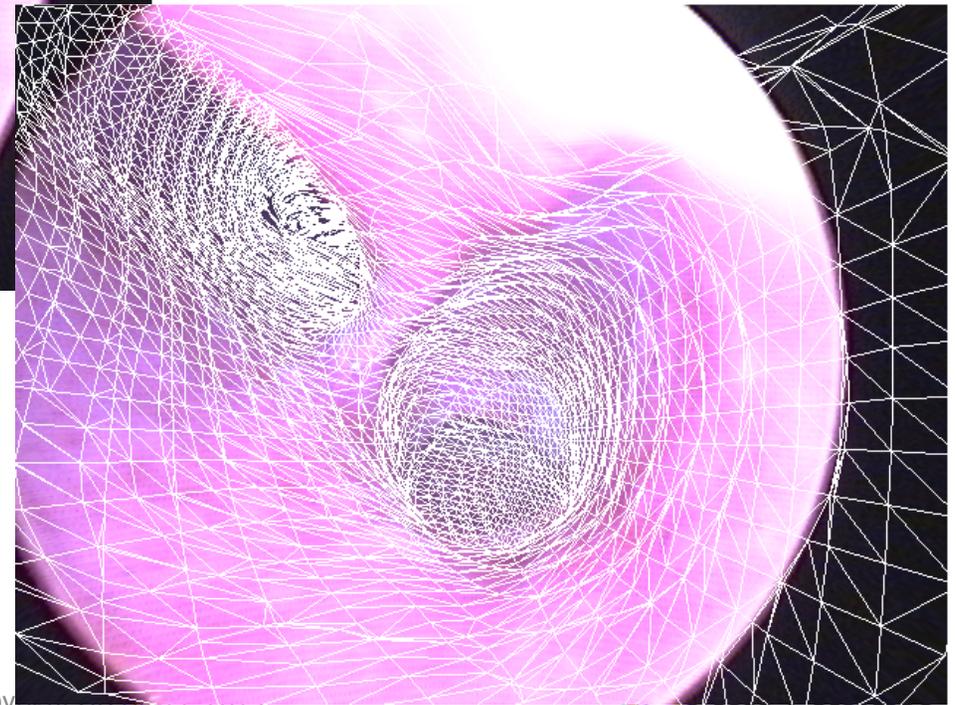


Some Comparative Results



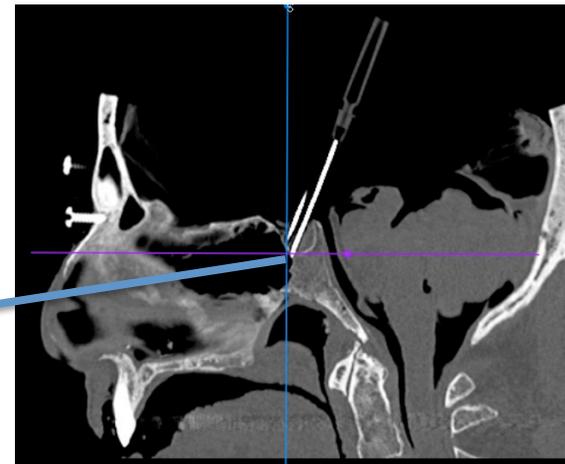
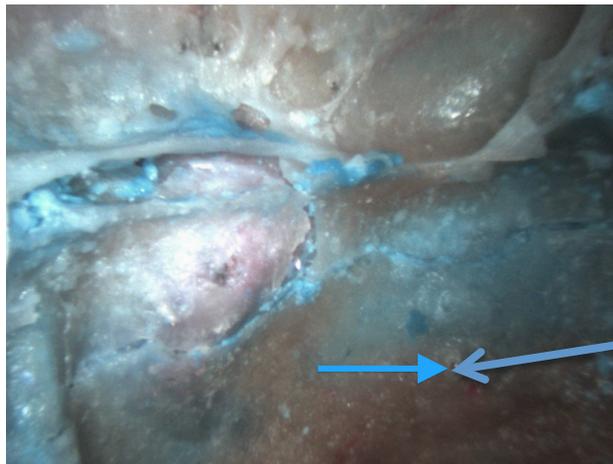
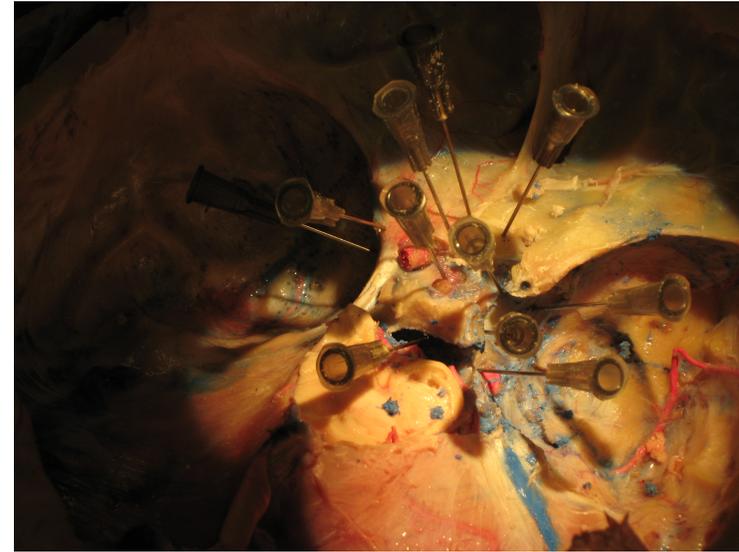
Optotrak

Video-CT



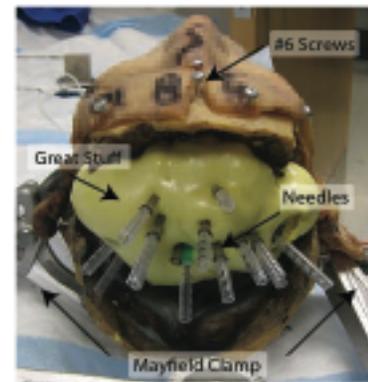
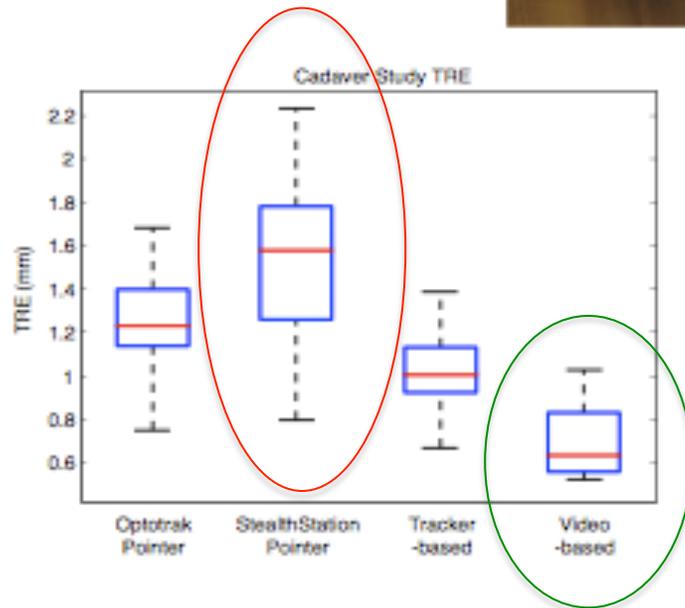
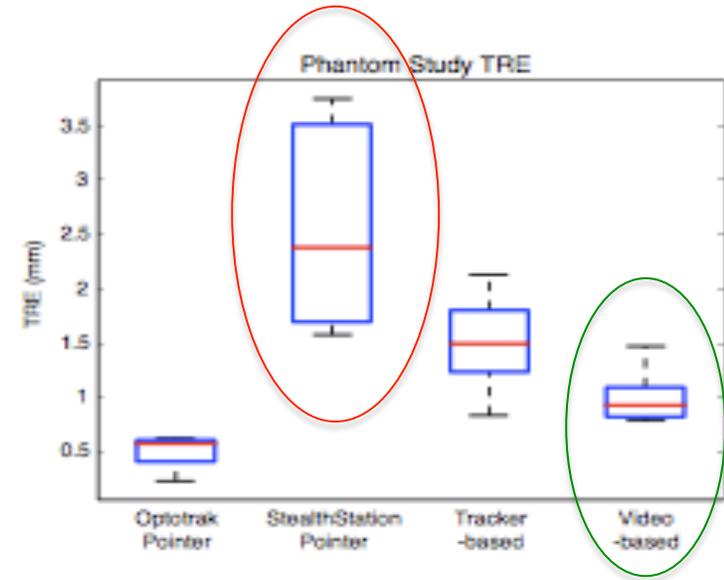
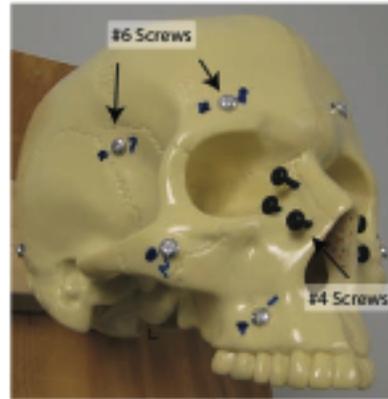
Validation: Measurement

2D and 3D TRE based on
implanted fiducials



Validation

Phantom Study



Cadaver Study

A System for Video-based Navigation for Endoscopic Endonasal Skull Base Surgery

Mirota Wang Taylor Ishii Gallia Hager, TMI 2011.

ICRA CVfM Copyright GD Hager, 2013

Tracking Comparative Results

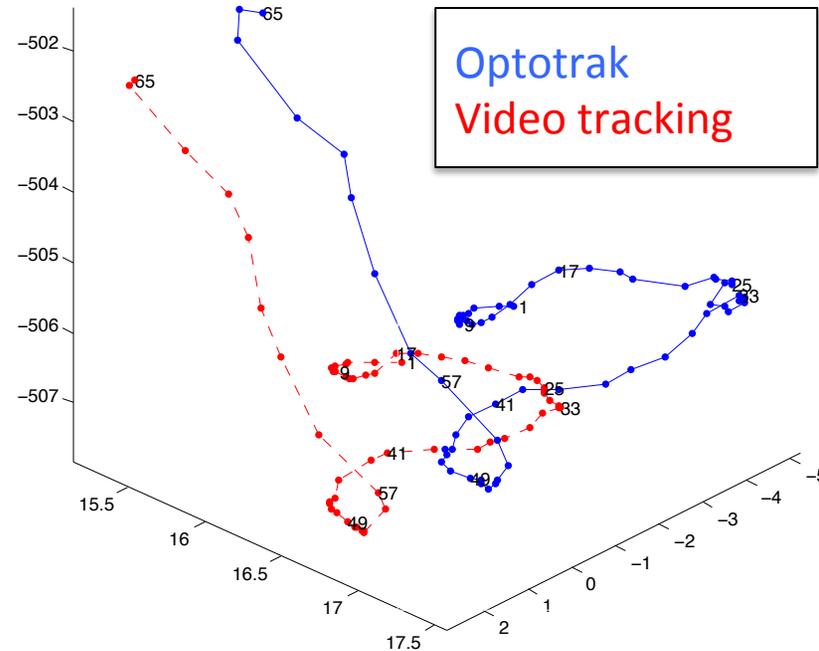


TABLE VI: Head Study Hypothesis Testing ^a

	Optotrak	StealthStation	Tracker-Based
StealthStation	$\chi^2(1) = 0.04; p = 1.000$		
Tracker-Based	$\chi^2(1) = 59.59; p < 0.001$	$\chi^2(1) = 43.83; p < 0.001$	
Video-Based	$\chi^2(1) = 161.72; p < 0.001$	$\chi^2(1) = 121.48; p < 0.001$	$\chi^2(1) = 26.80; p < 0.001$

^a Post Hoc testing, corrected for multiple comparisons with the Bonferroni method.

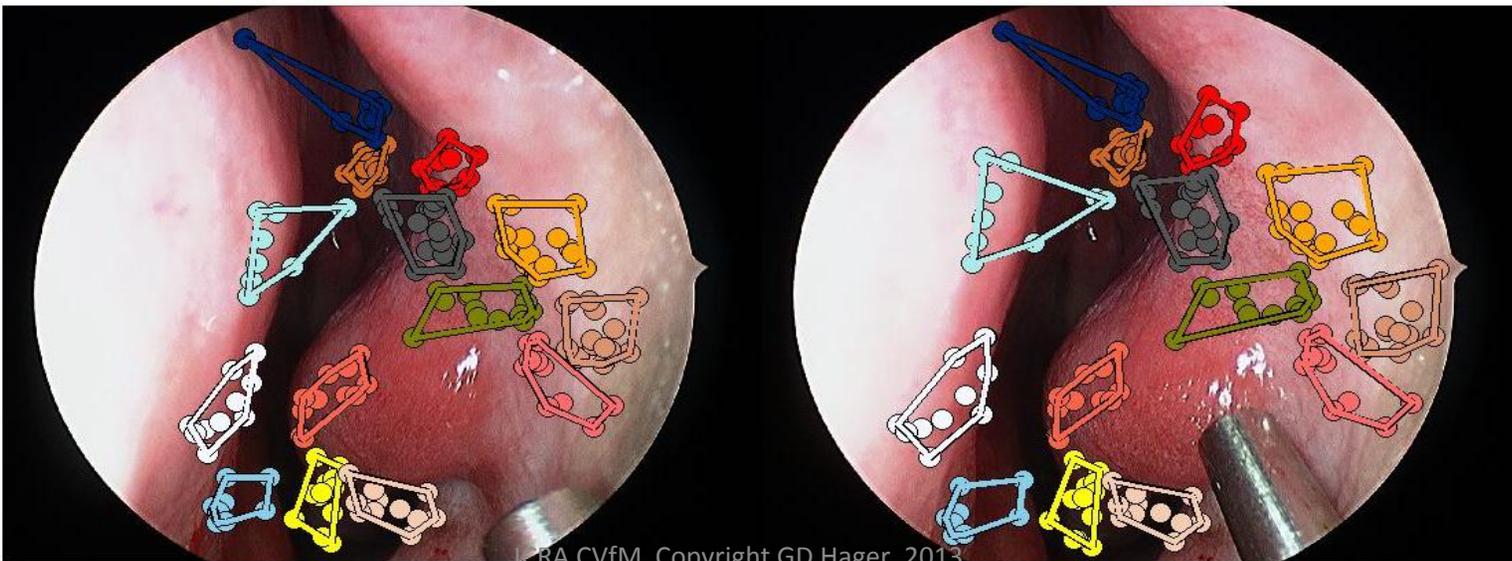
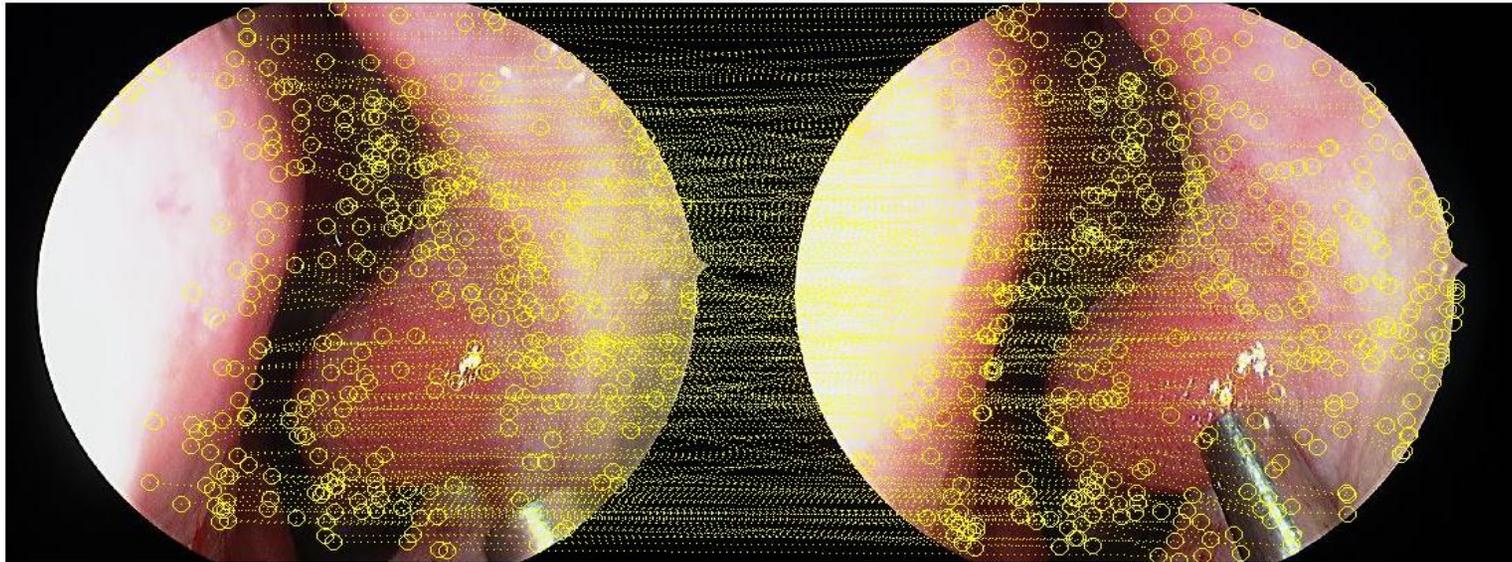
Current Work: Scaling Up

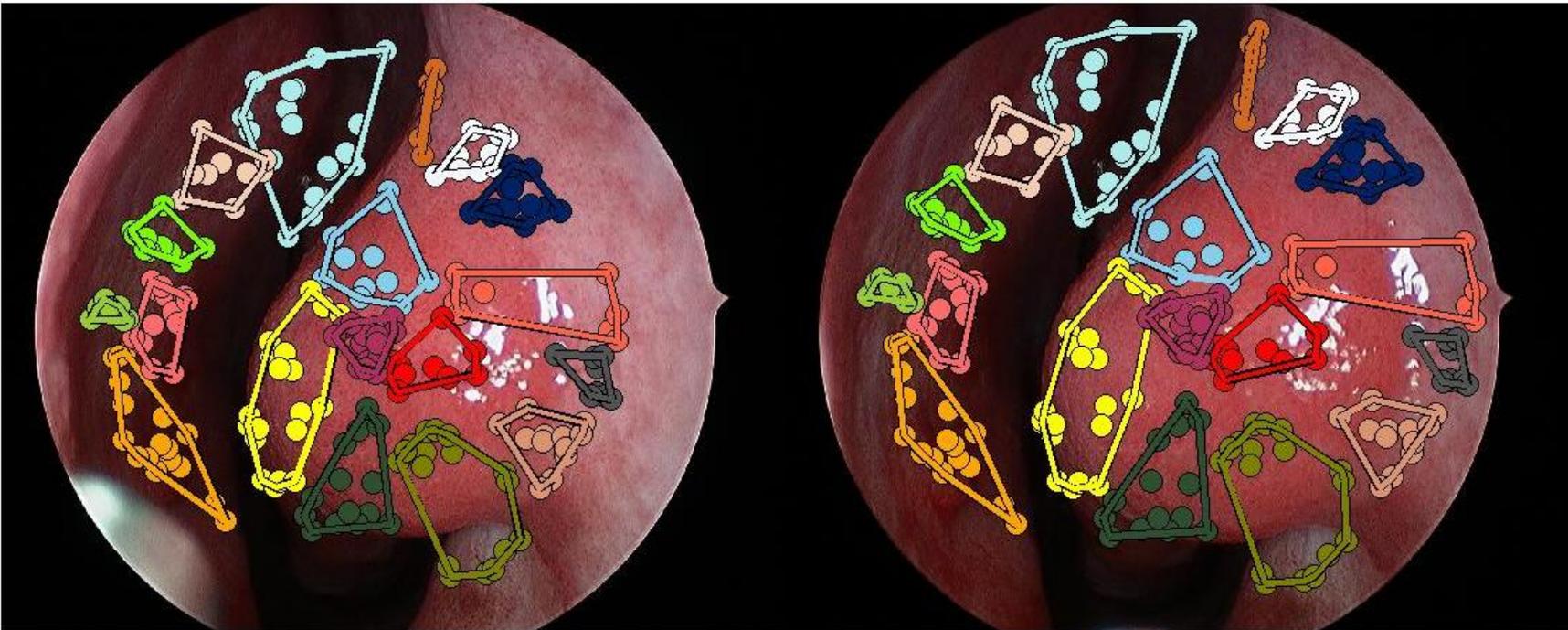
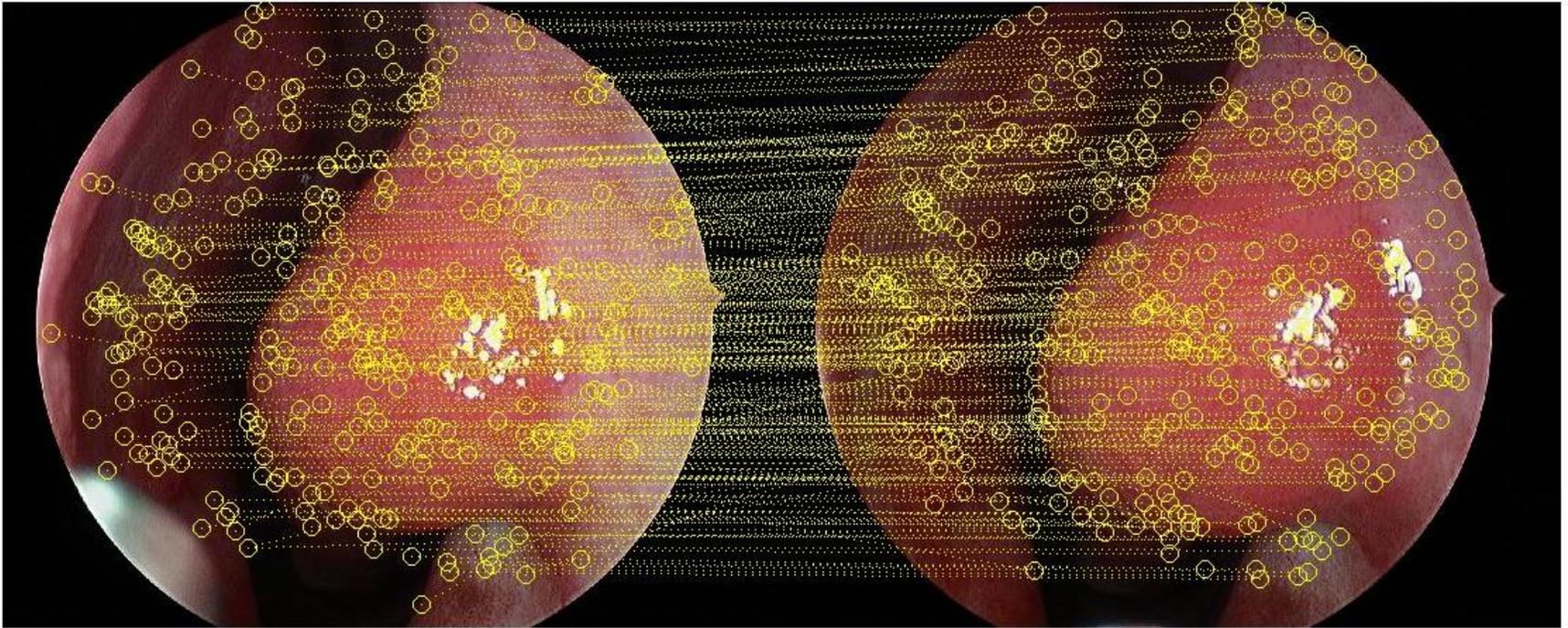
- Integrate registration, navigation, reconstruction into clinically usable system.
- Perform retrospective evaluation on patient data.
- First 6 data sets; 250 Gb of video.



Improved Matching with HMA

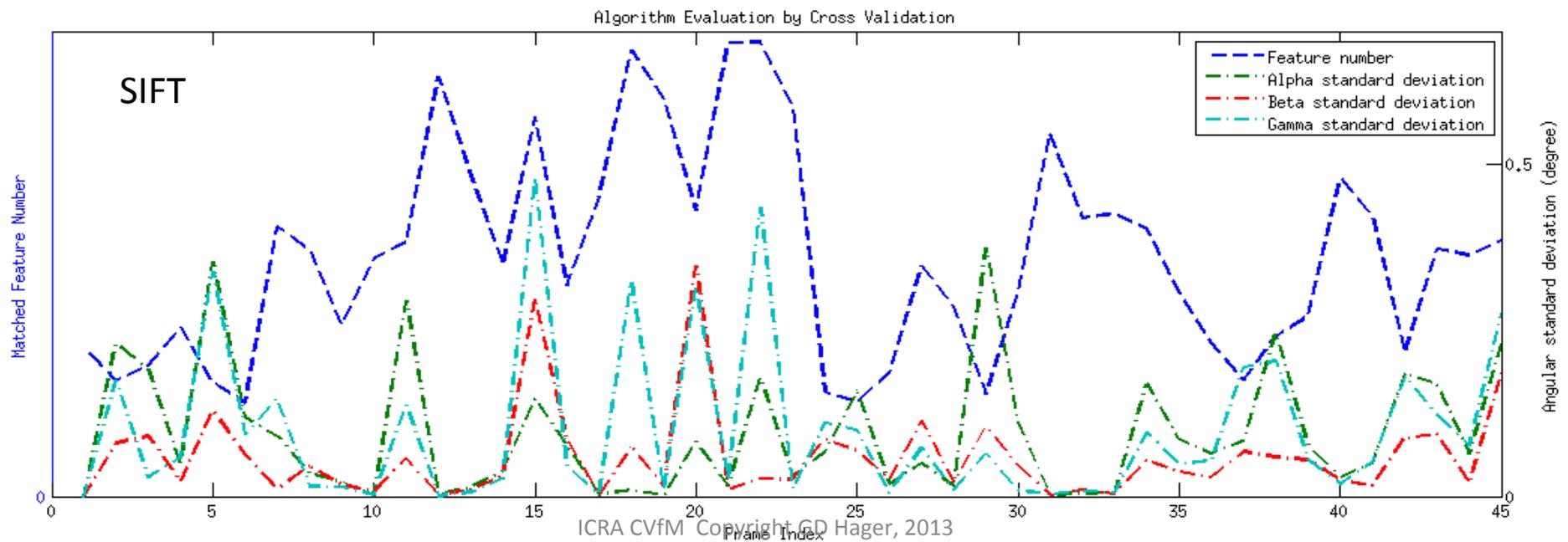
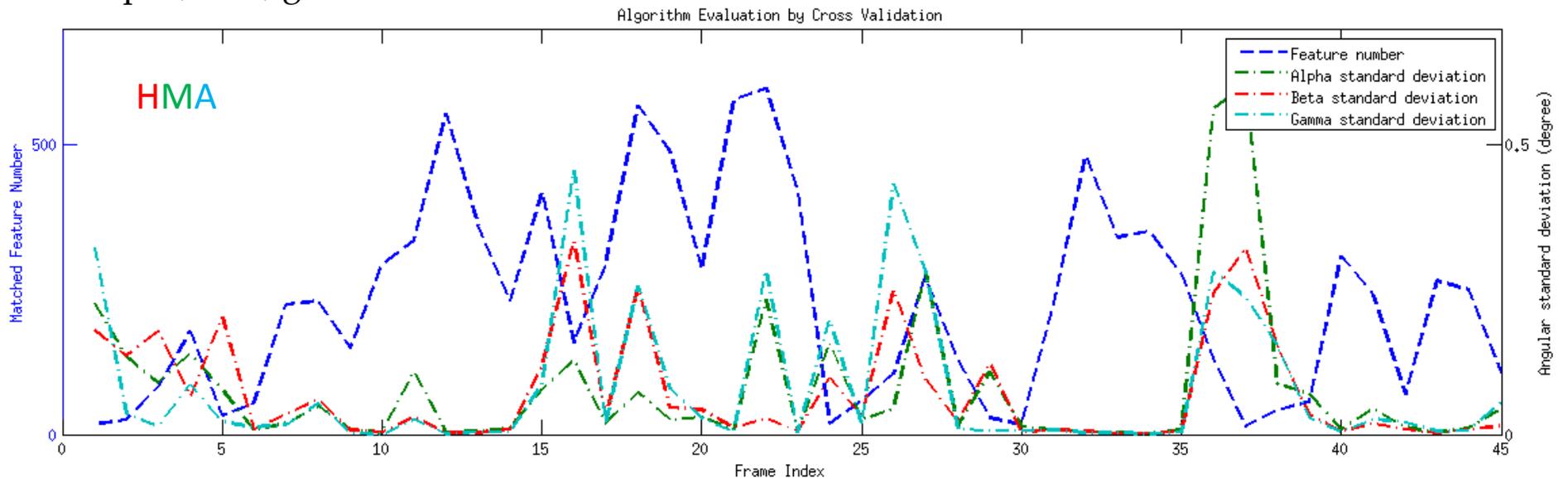
Mariottini et al. (UT Arlington), MICCAI 2012



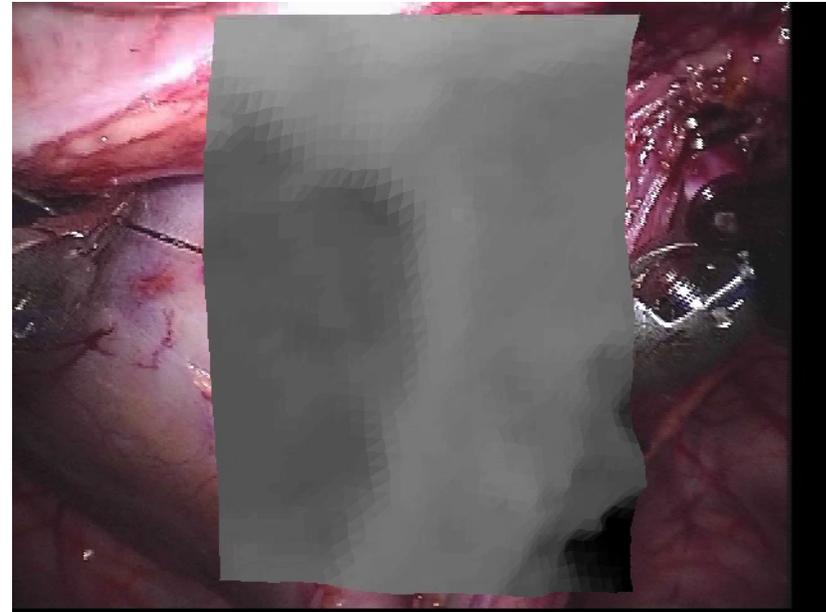
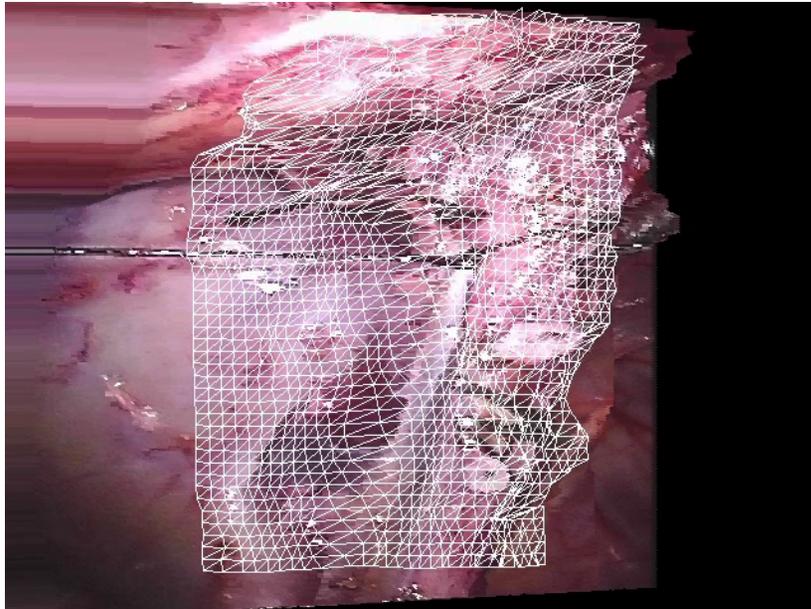


Cross-Validation Results

Alpha, beta, gamma with feature number



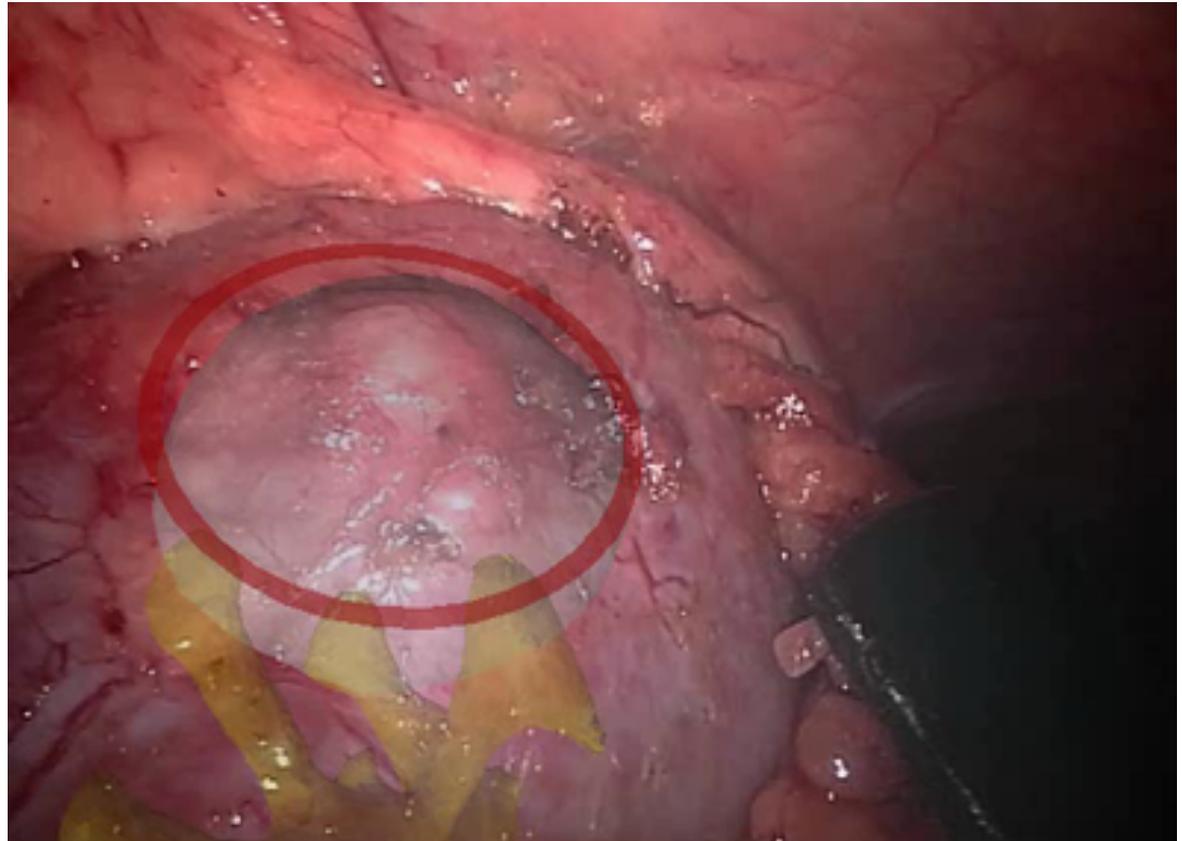
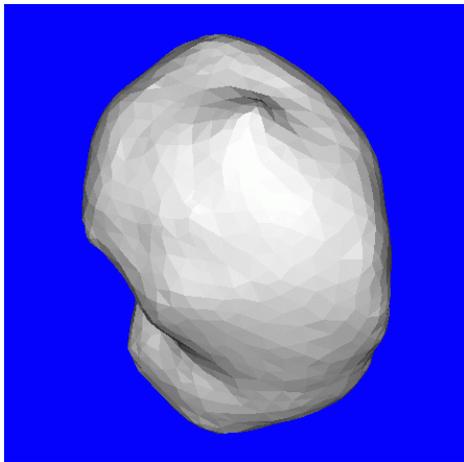
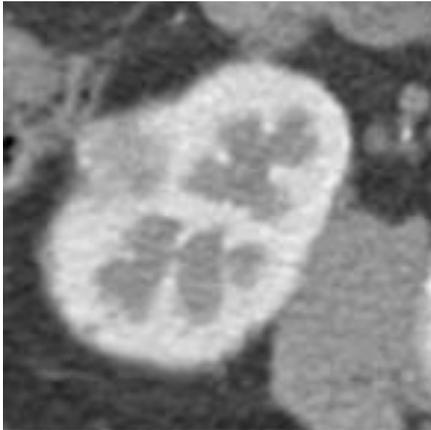
An Aside: The Advantages of Stereo



Real-time dynamic programming stereo + deformable registration
Final registration error of $< 1\text{mm}$ without tool in image

CT Registration To Live Stereoscopic Video

Vagvolgyi, Hager, Taylor, Su, Journal of Urology, 2009



Real-time importation and display of preoperative information in
in the surgeon field of view

A Second Example: Subglottic Stenosis



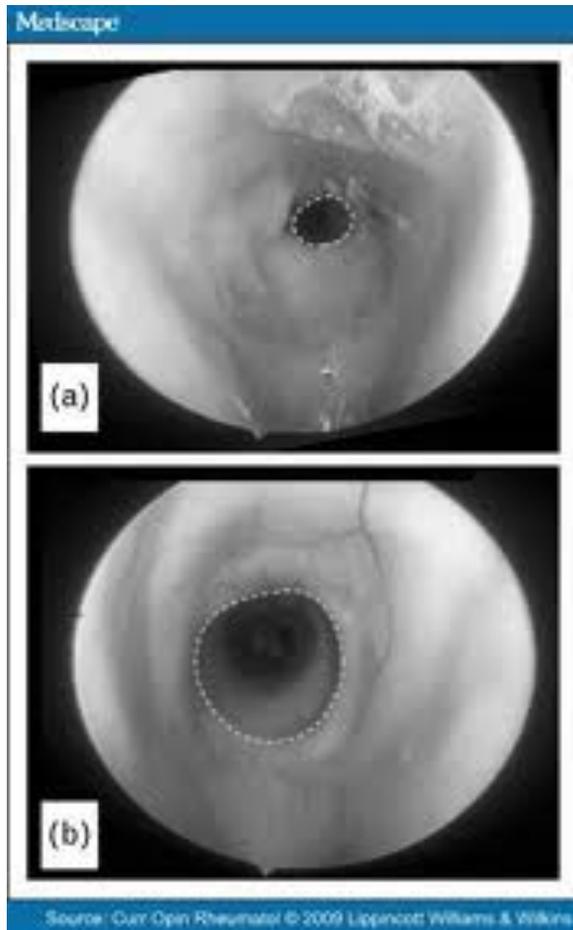
Why does this



... lead to this?

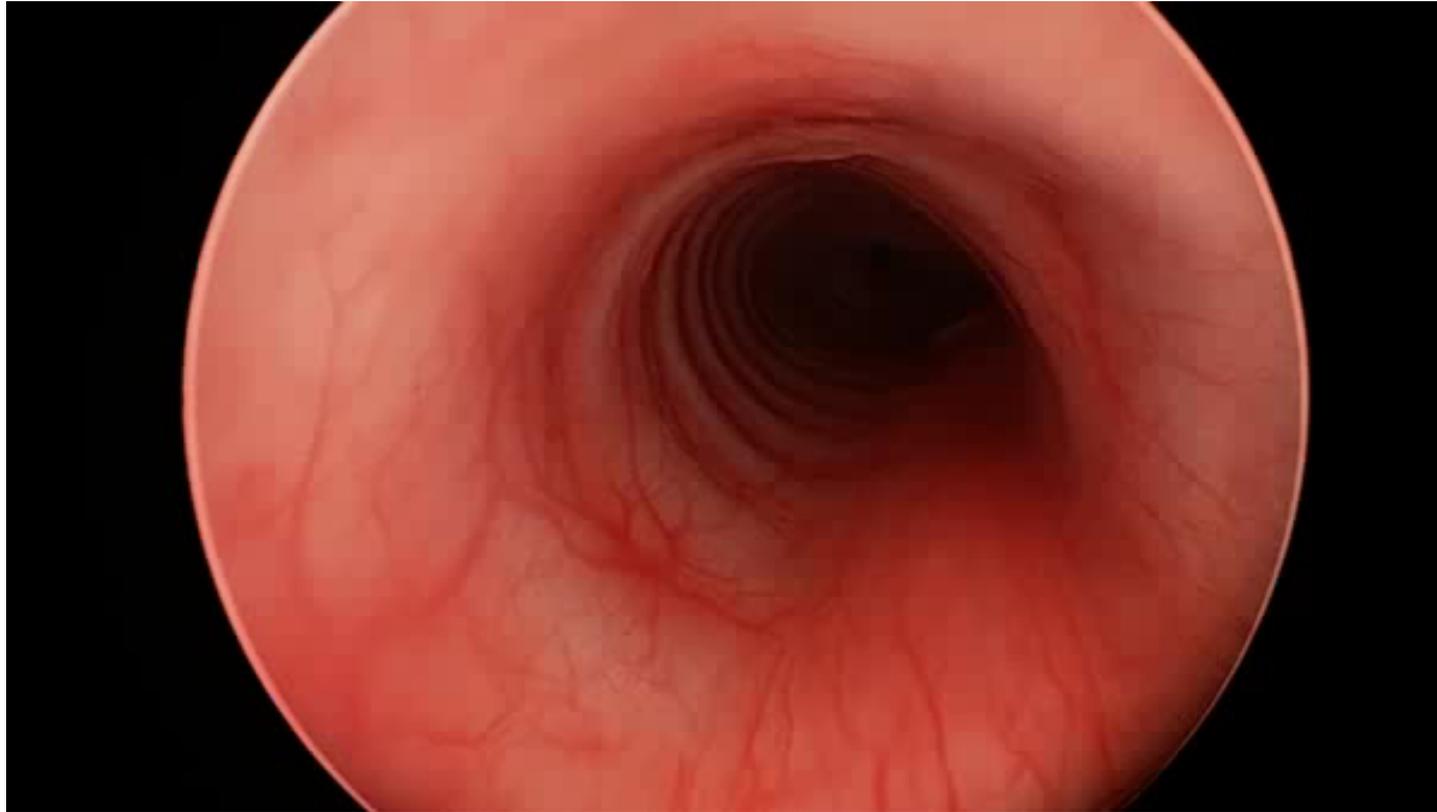
NIH R21 EB008490

Subglottic Stenosis



Quantitative Endoscopy: Reconstruction

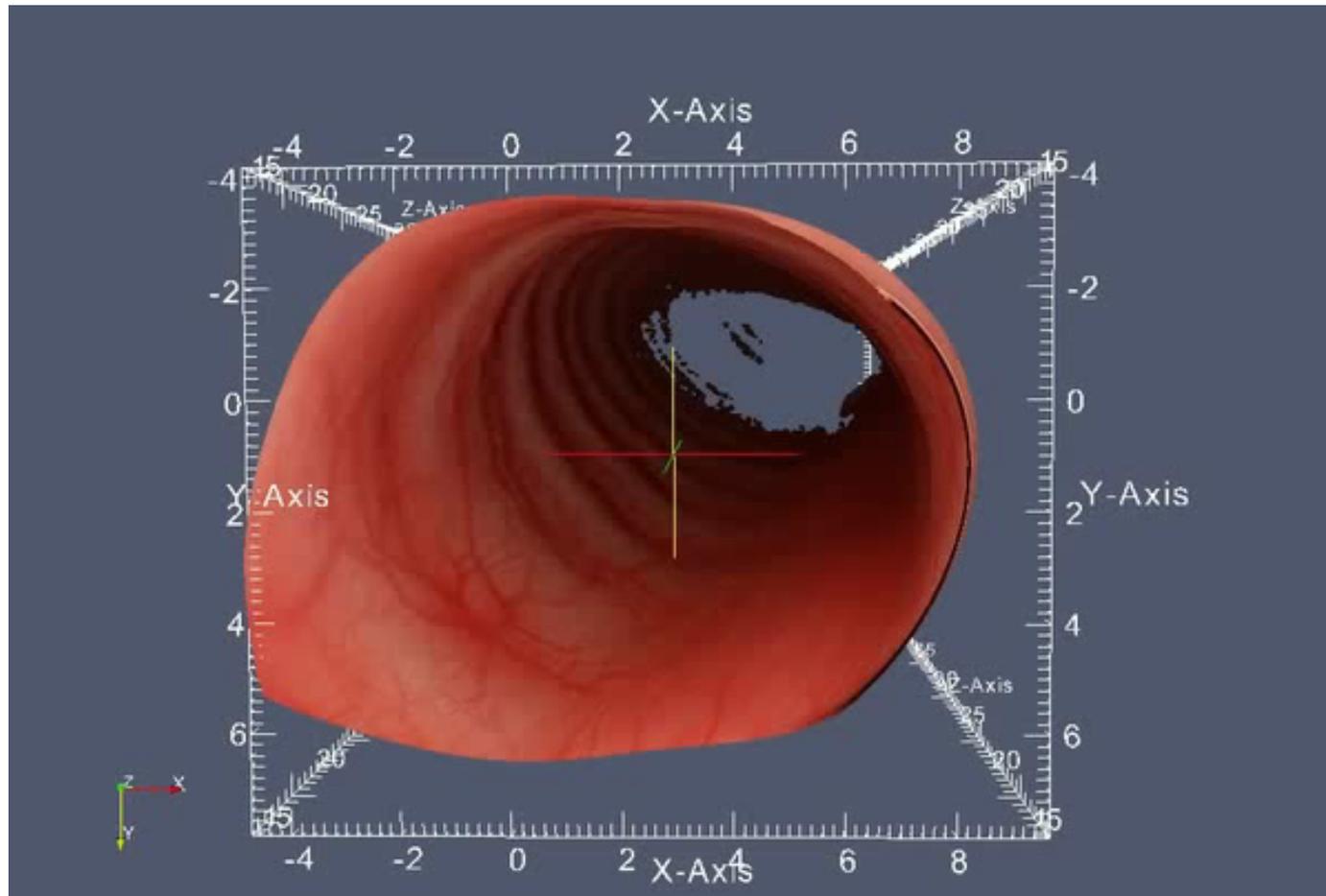
(with Masaru Ishii, MD, Eric Meisner, Haluk Tokgozoglu)



Can we measure noninvasively?

Quantitative Endoscopy: Reconstruction

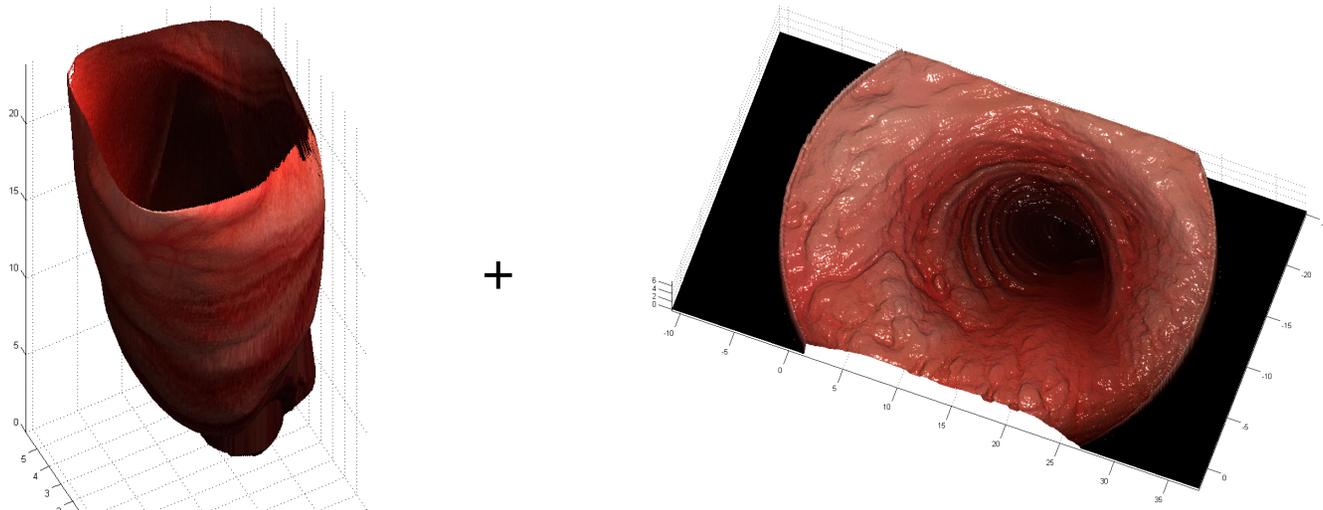
(with Masaru Ishii, MD, Eric Meisner, Haluk Tokgozoglu)



Can we measure and evaluate noninvasively?

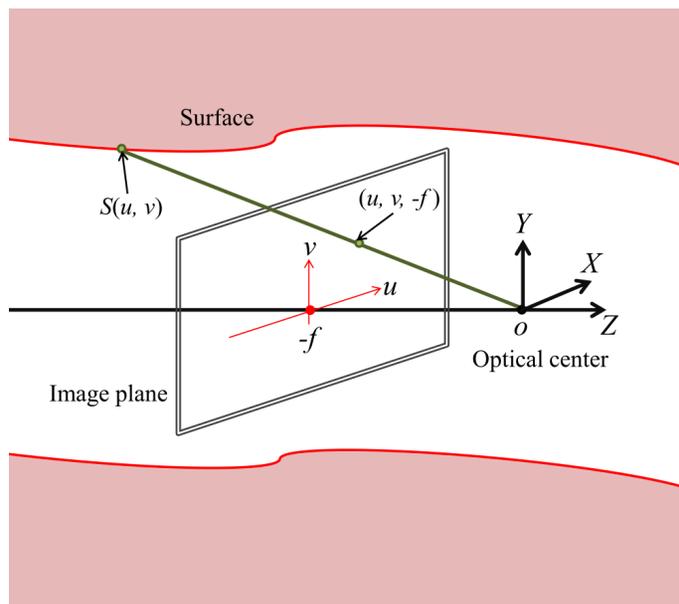
An Idea: Hybrid Reconstruction

- Multiview reconstruction provides a globally correct shape
- SFS (assuming we deal with the albedo problem) provides locally correct shape
- Can we produce a hybrid reconstruction that is globally + locally correct?



Aside: Perspective SFS in the Airway

- Light source is at camera center (endoscope)
- Lambertian reflectance: $I = \eta \frac{\cos\theta_i}{r^2} = \eta \frac{N \cdot L}{r^2}$

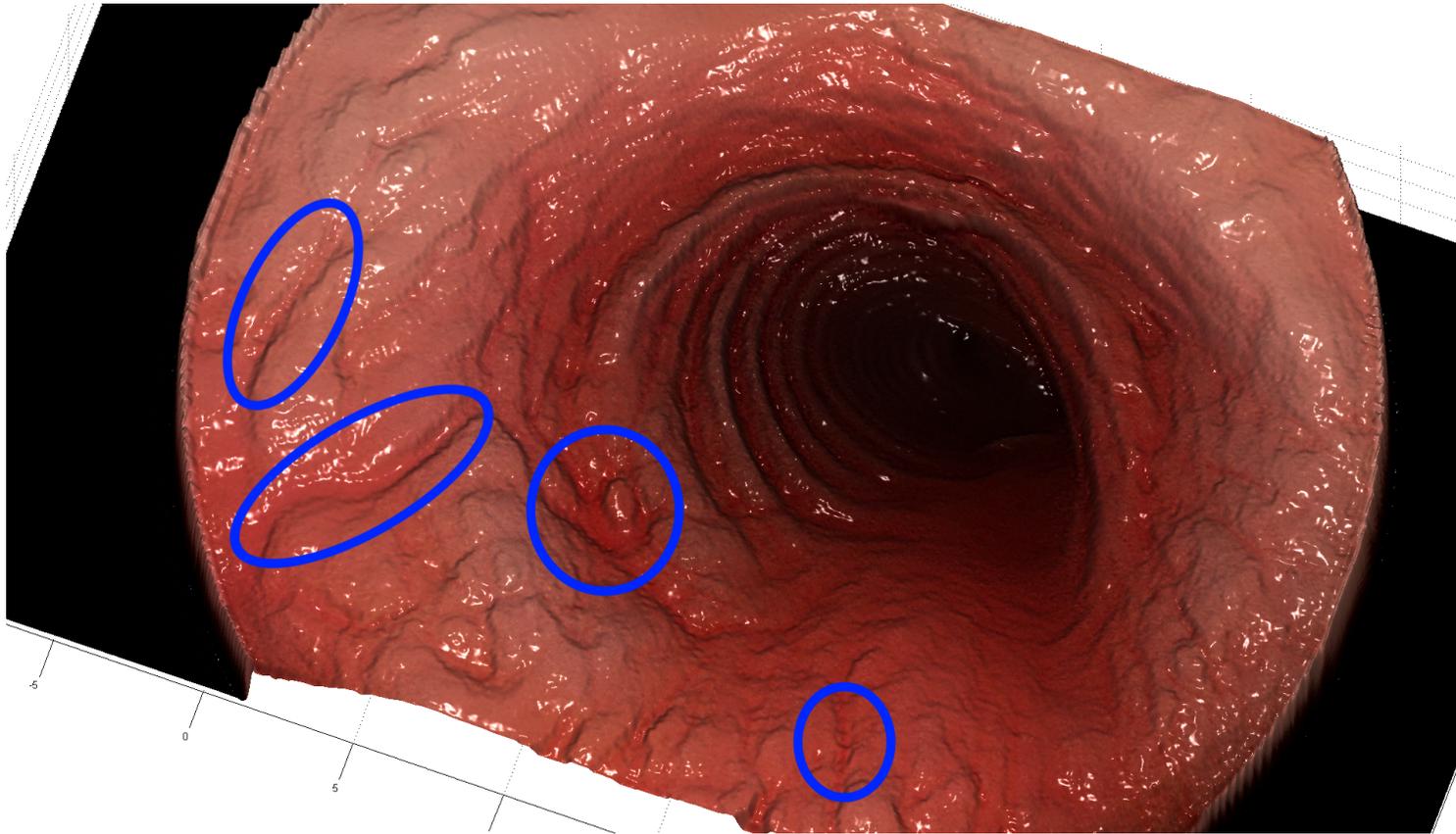


- Characterize the object in terms of pixel coordinates using perspective projection:

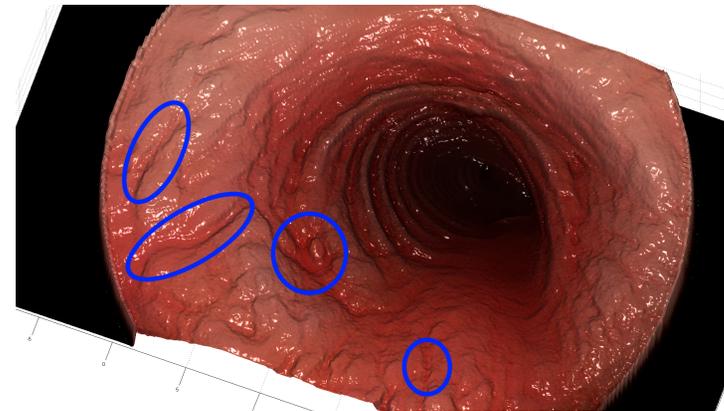
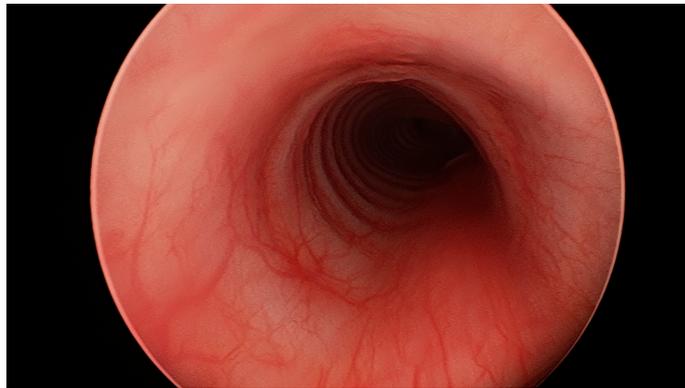
$$S(u, v) = u \frac{z(u, v)}{f}, v \frac{z(u, v)}{f}$$

- We need N, L, r

A Slight Problem



Intensity Variation Minimization



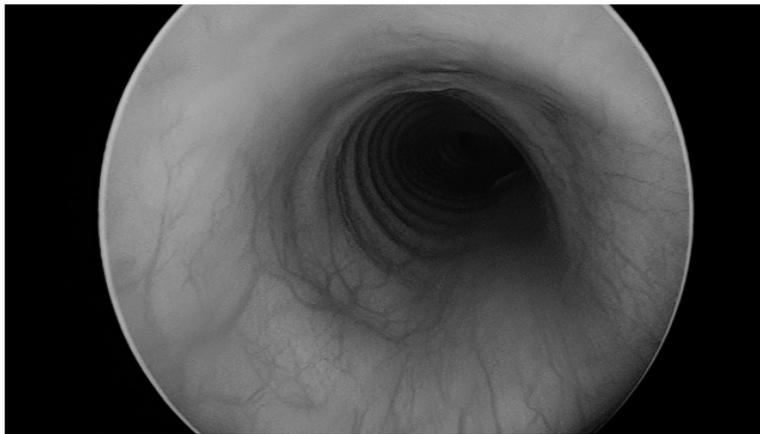
- Our approach: find w such that:

$$\min_w \sum_{i \in P} \sum_{j \in N(i)} \|w^T v_i - w^T v_j\|^2$$

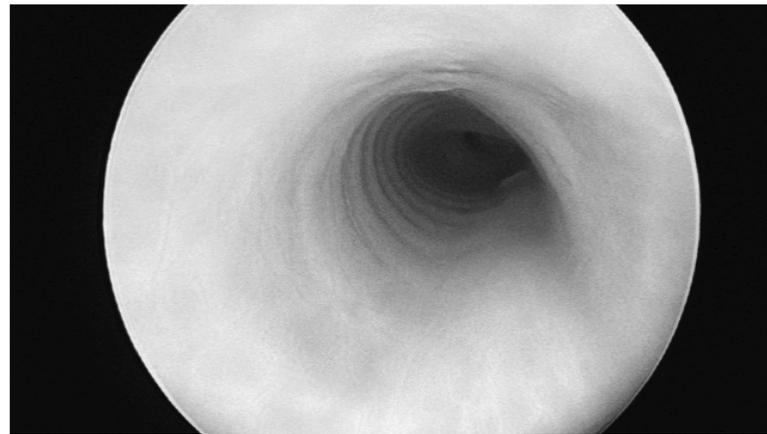
- Where P is the set of marked pixels, $N(i)$ is a set of pixels in a neighborhood of i with size γ_i and $v_k \in \mathbb{R}^{3 \times 1}$ is the *RGB* values at pixel k

Results of Color Variation Reduction

Grayscale



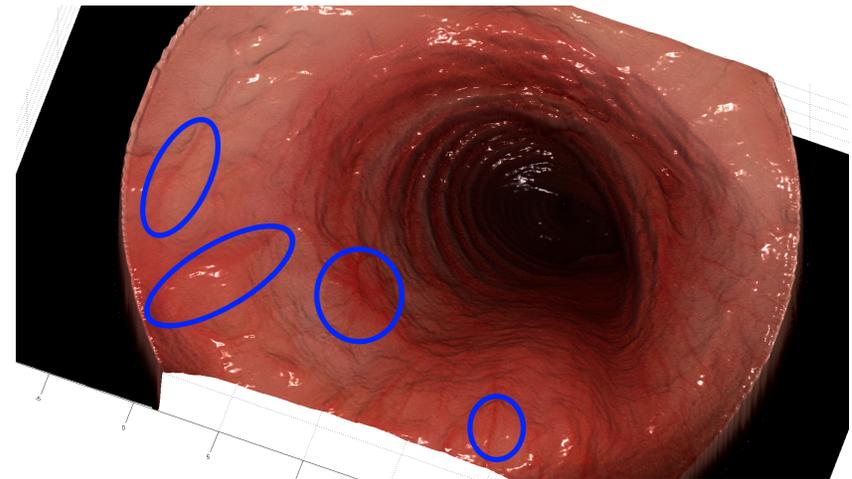
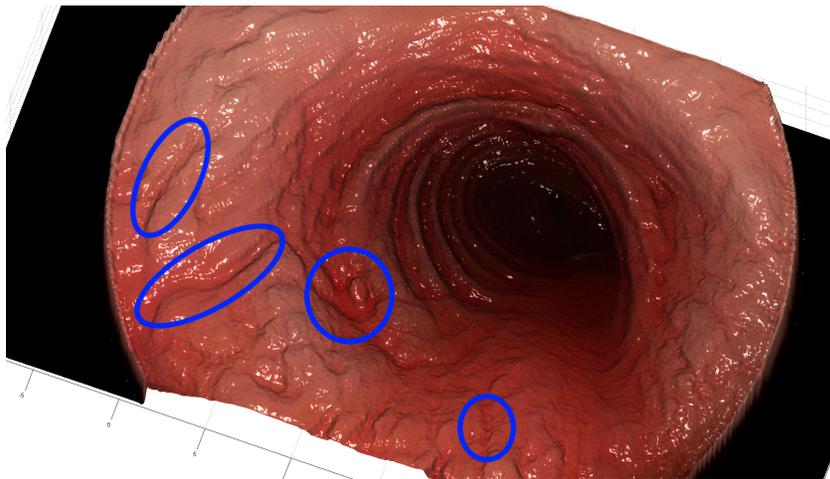
Projected color



Results of Color Variation Reduction

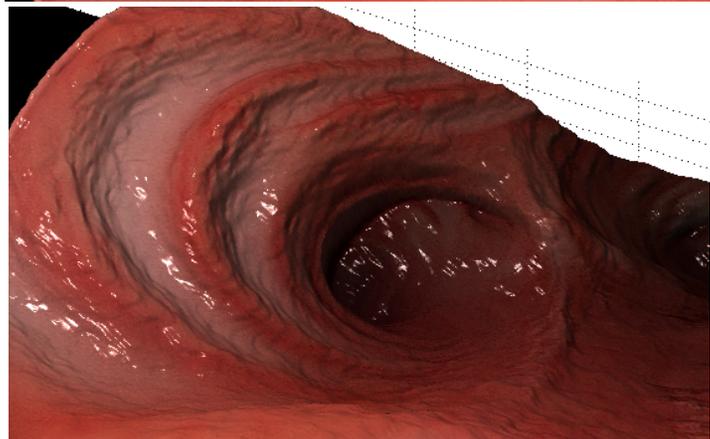
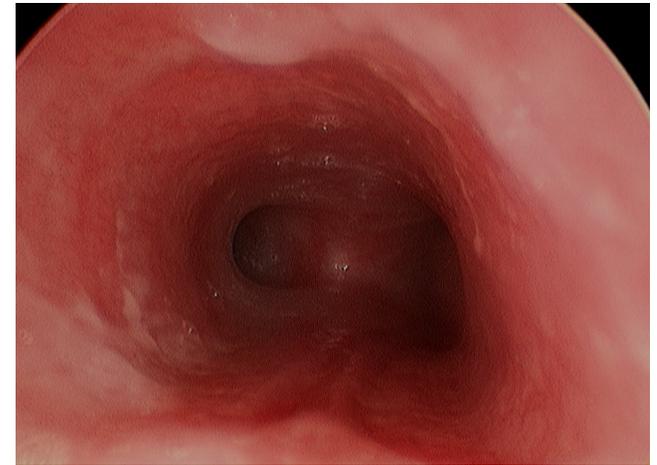
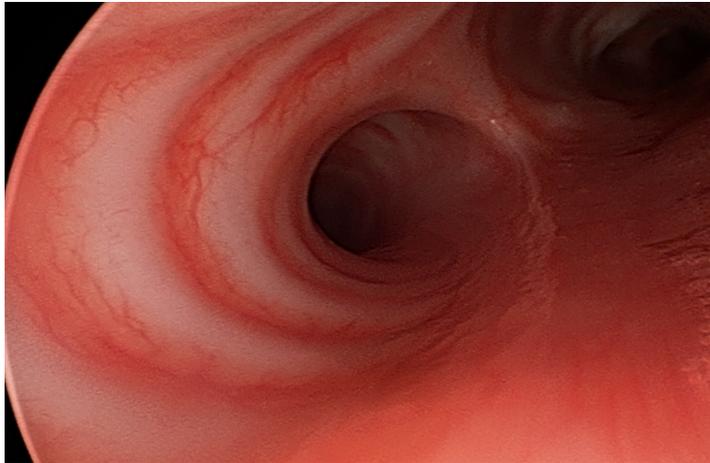
Grayscale

Projected color

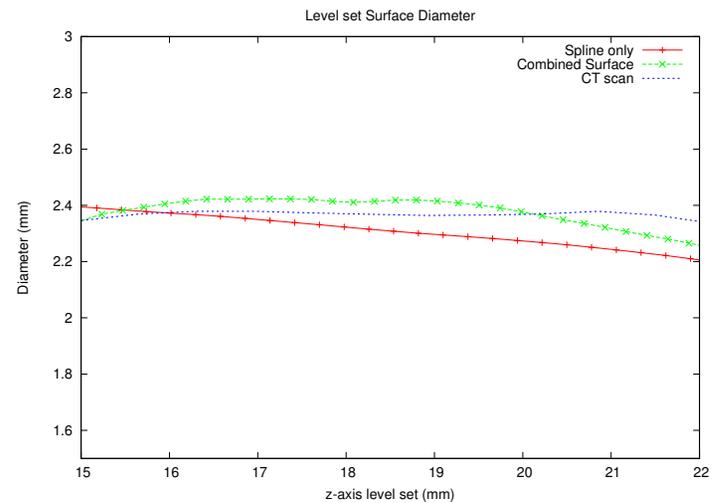
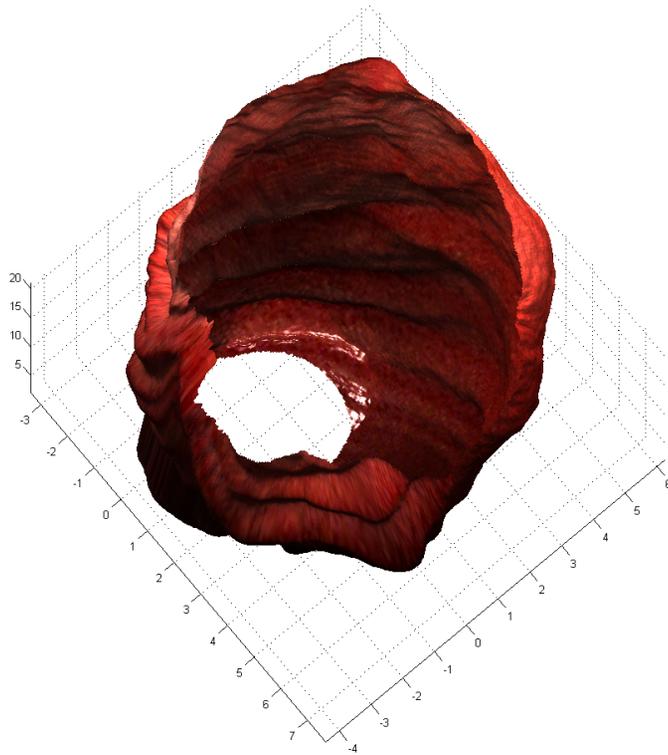


- Geometry (like rings) is preserved!

More Results



Quantitative Comparison



Comparison of Hybrid Reconstruction diameter to CT and Multiview

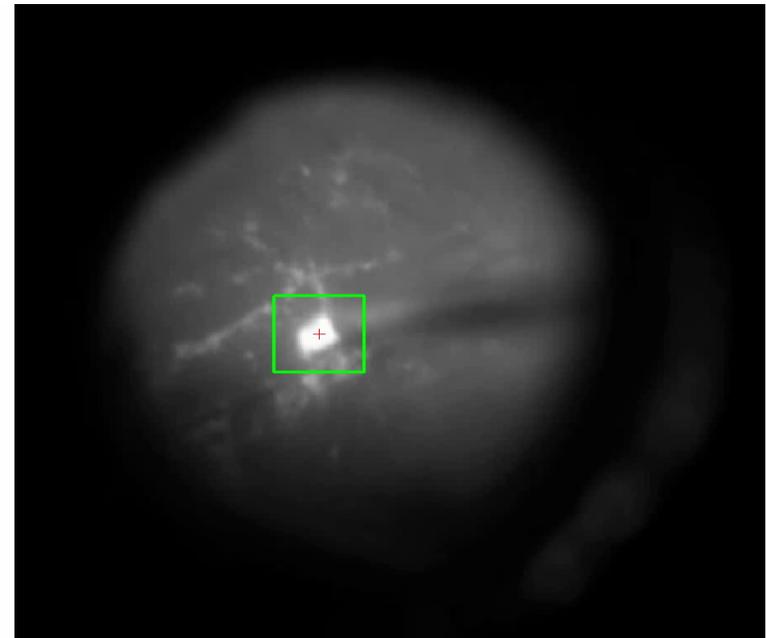
Millimetric accuracy based on a simple digital endoscope!

Retinal Surgery



Team

- **WSE:** R. Taylor, G. Hager, J. Kang, P. Kazanzides, I. Iordachita
- **SoM:** J. Handa, P. Gehlbach, E. Gower
- **Current Funding:** NIH BRP



Tool Tracking as Detection

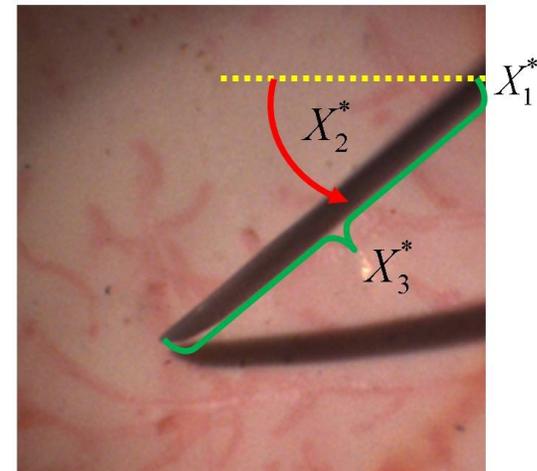
¹Jedynak, Frazier, Sznitman. **Twenty questions with noise: Bayes optimal policies for entropy loss.** J. of Applied Probability: 49 (1), 114-136 (2012)

Let us find the tool pose in an image ¹:

- ▶ Let $X^* = (X_1^*, X_2^*, X_3^*)$ be a discrete random variable that defines the tool pose.
- ▶ Let the space of possible tool locations be:

$$\mathcal{S} = [0, P] \times [-\pi/2, \pi/2] \times [\delta, L]$$

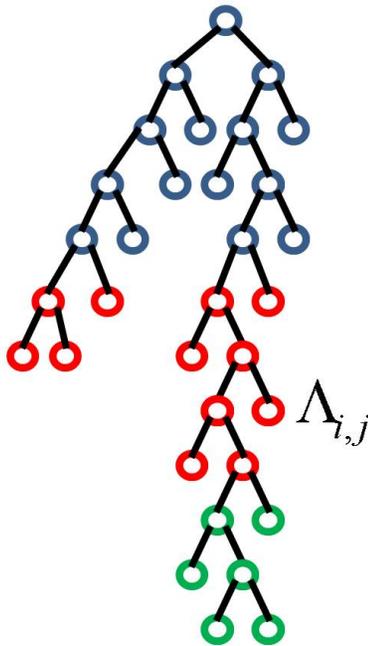
- ▶ Let $p_0 \sim U(\mathcal{S} \cup \{\square\})$
- ▶ More complicated density: need a way to organize



Basic Idea

- ▶ At each node $\Lambda_{i,j}$, can evaluate a question type: $k = 1, \dots, \mathcal{K}$
- ▶ A question $X_{i,j}^k$ asks: “is $X^* \in \Lambda_{i,j}$ ” by computing a function k of the image:

$$X_{i,j}^k : I_{\Lambda_{i,j}} \mapsto R$$



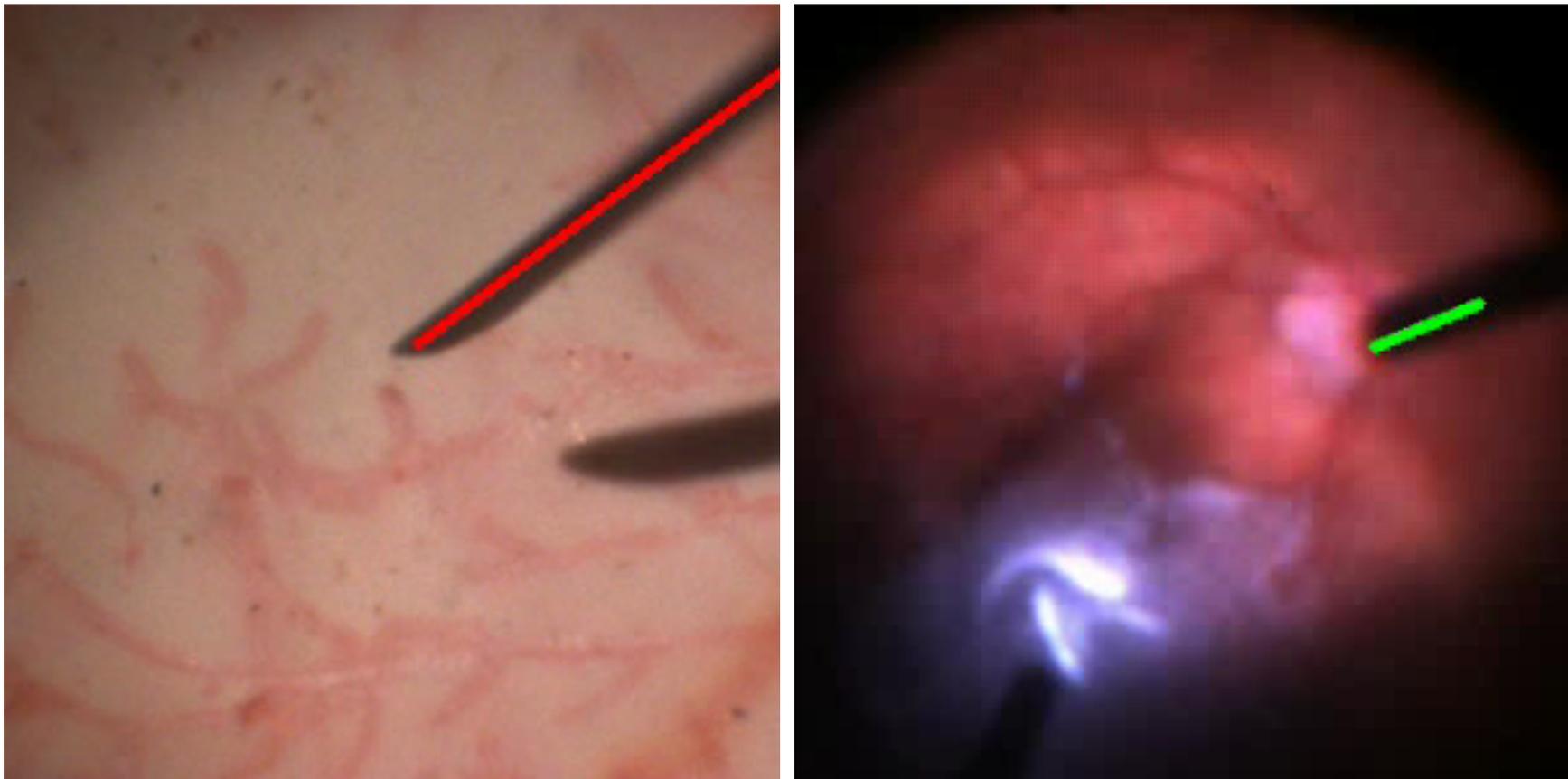
- ▶ Answer $Y_{i,j}^k$ is random,

$$Y_{i,j}^k = \begin{cases} f_1(\cdot; i, j) & \text{if } X^* \in \Lambda_{i,j} \\ f_0(\cdot; i, j) & \text{if } X^* \notin \Lambda_{i,j} \end{cases}$$

(f_1, f_0) are estimated from labeled training data.

Some Results

Sznitman, Raphael, et al. "Unified detection and tracking in retinal microsurgery."
Medical Image Computing and Computer-Assisted Intervention–MICCAI 2011.
Springer Berlin Heidelberg, 2011. 1-8.

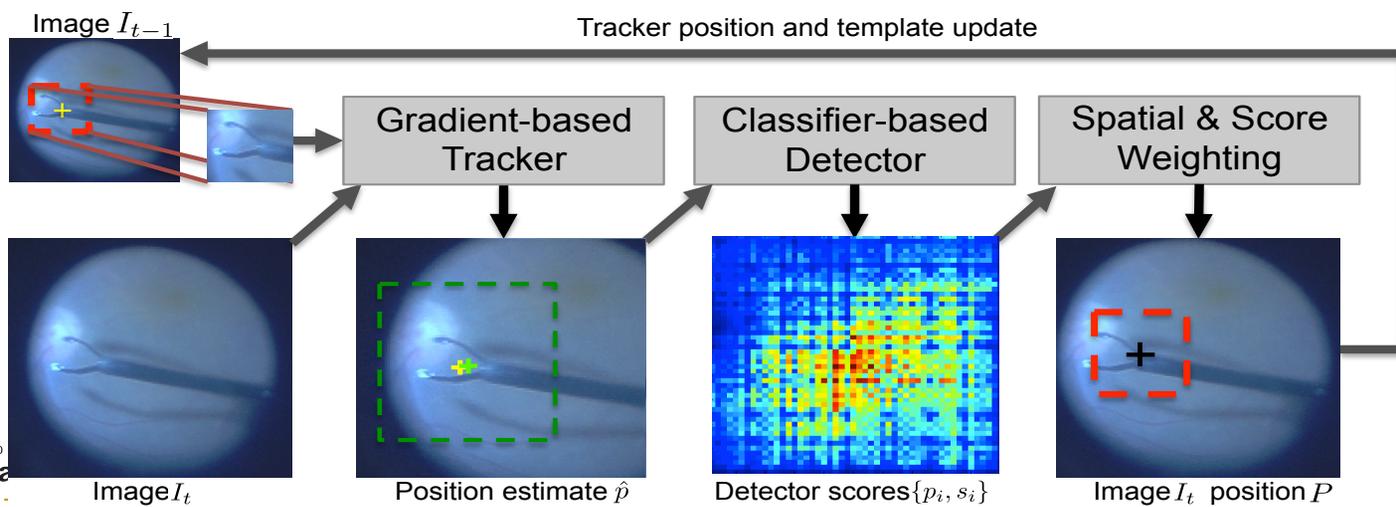
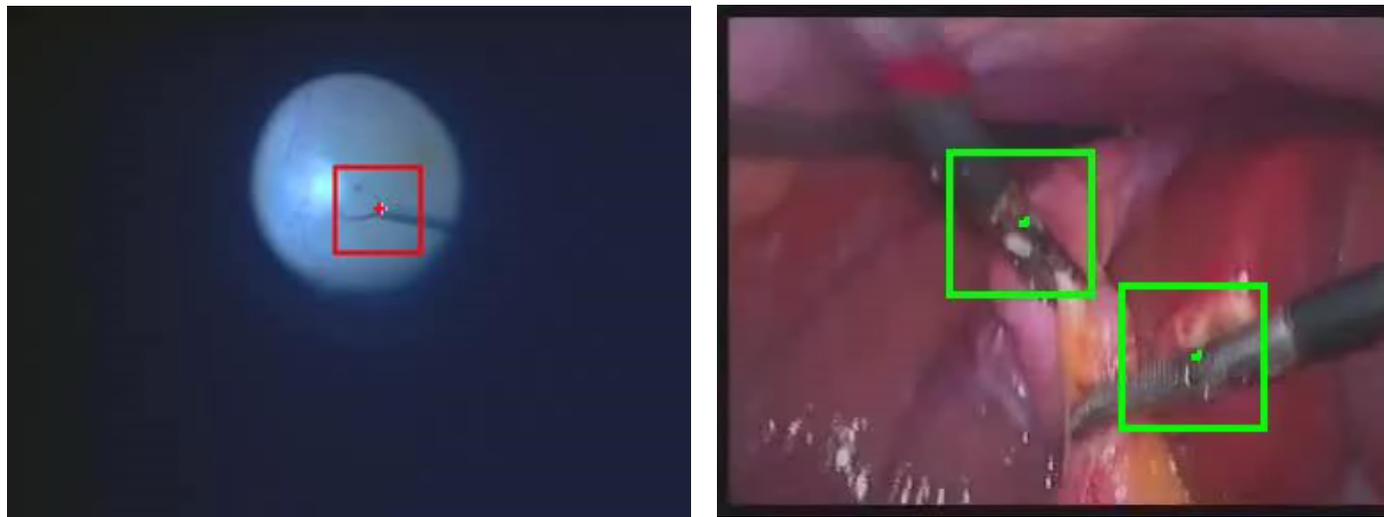


Data-Driven Visual Tracking in Retinal Microsurgery

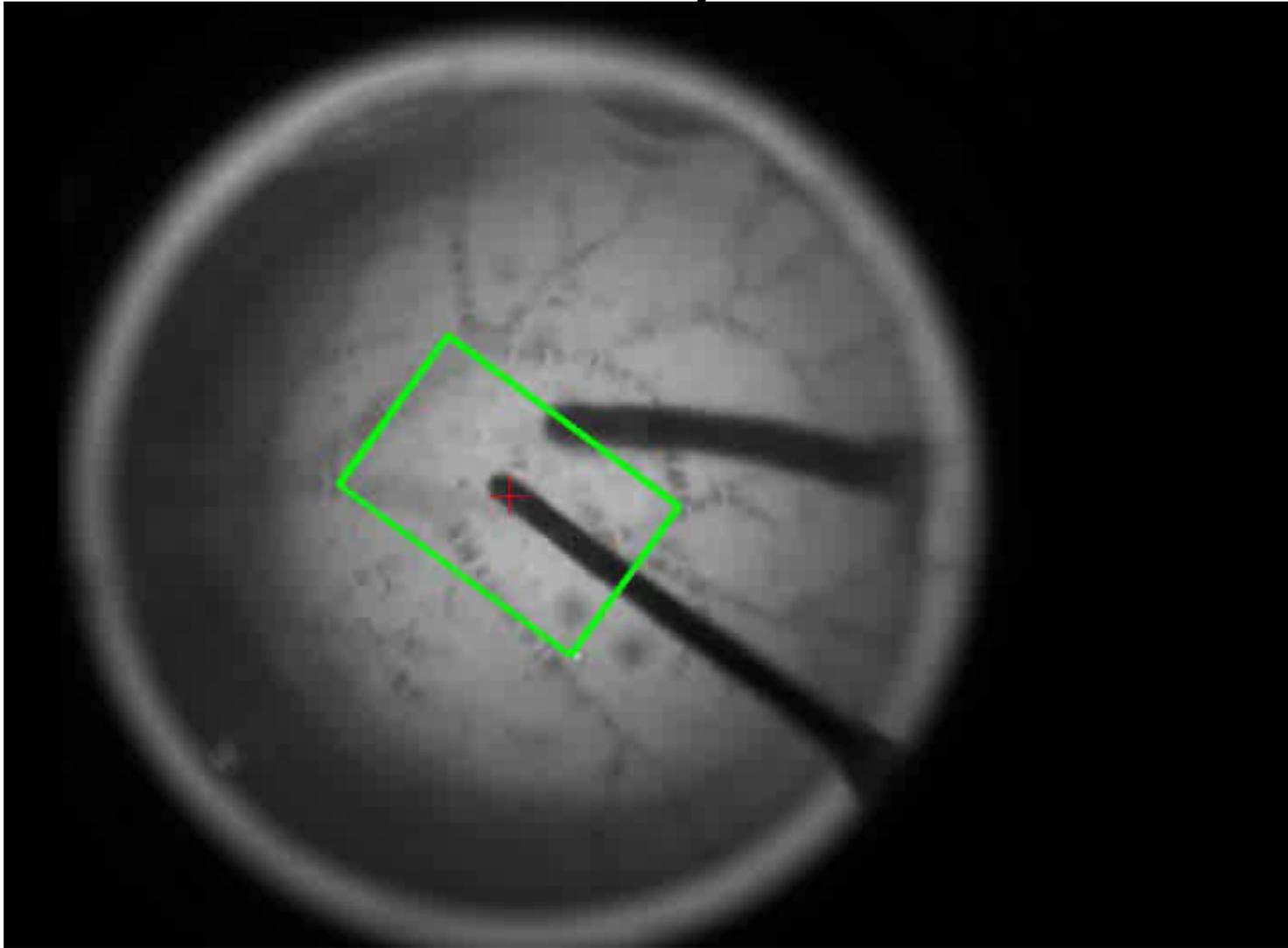
Raphael Sznitman¹, Karim Ali¹, Rogerio Richa², Russell H. Taylor², Gregory D. Hager² and Pascal Fua¹

1. École Polytechnique Fédérale de Lausanne, Switzerland

2. The Johns Hopkins University, Baltimore MD, USA



Proximity Alert

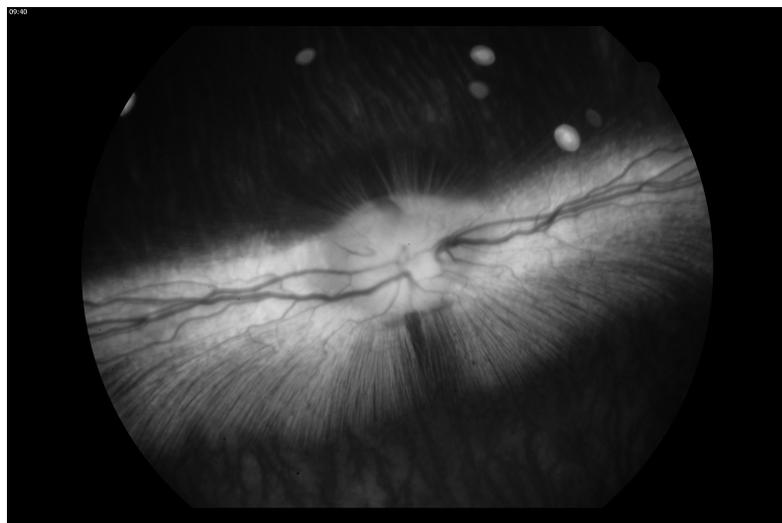


Rogério Richa, Balazs Vagvolgyi, Raphael Sznitman, Greg Hager, *et al.*

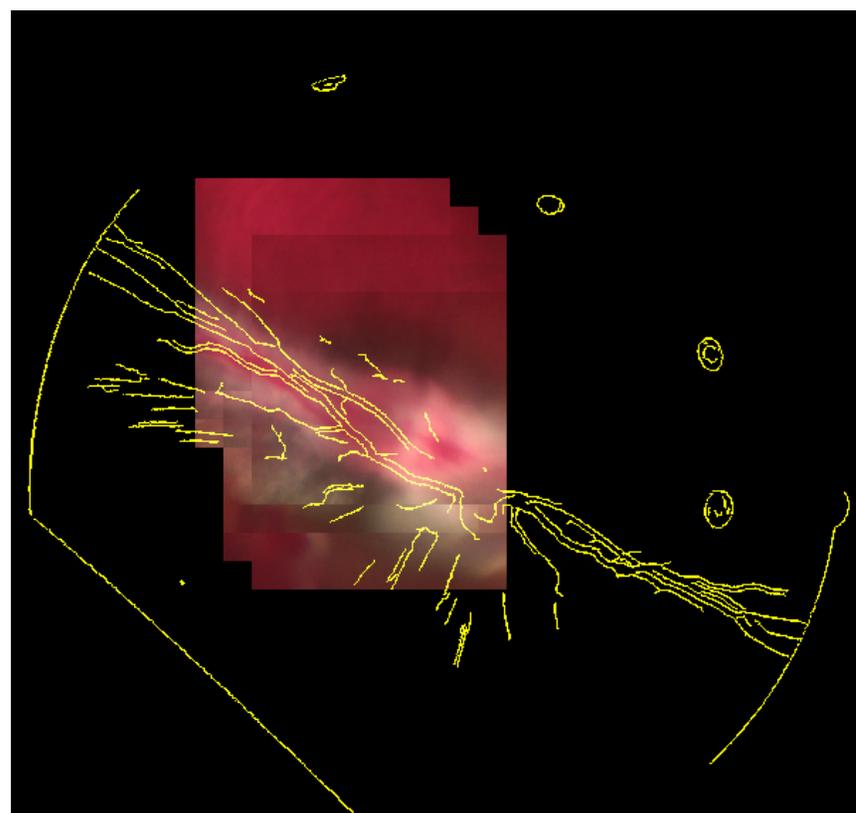
Retinal Image Registration



- How to **reliably** create/register high-resolution fundus images from a microscope or slit lamp?

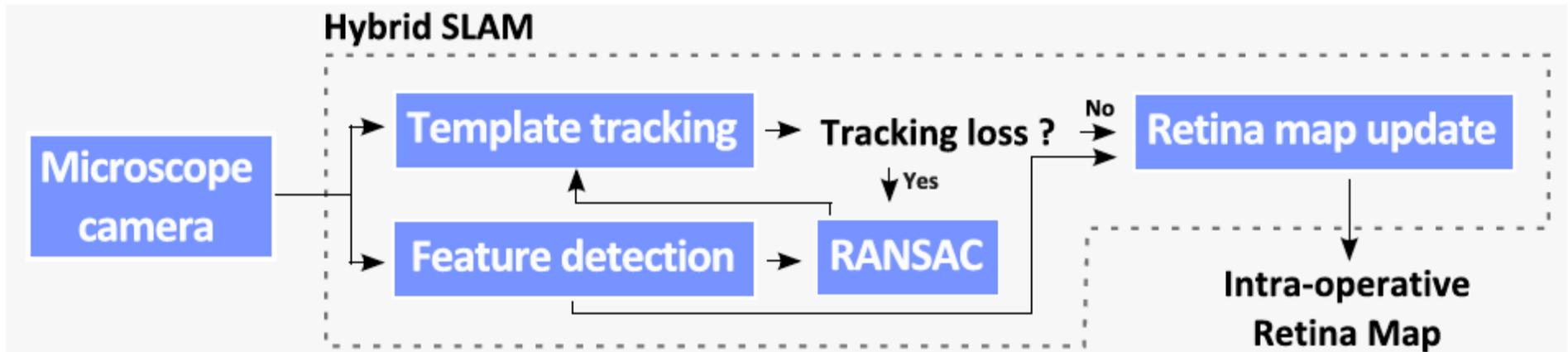
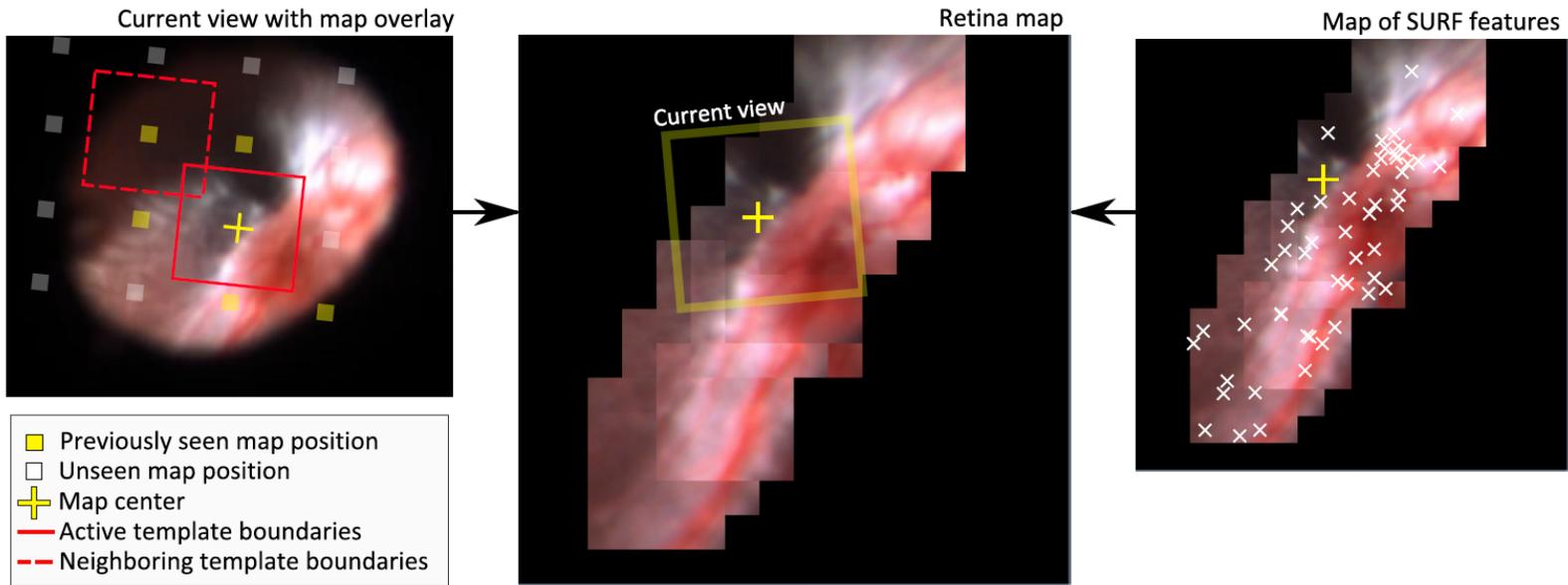


Rabbit Fundus image



Fundus edge map overlay

Tracking and Mosaicking

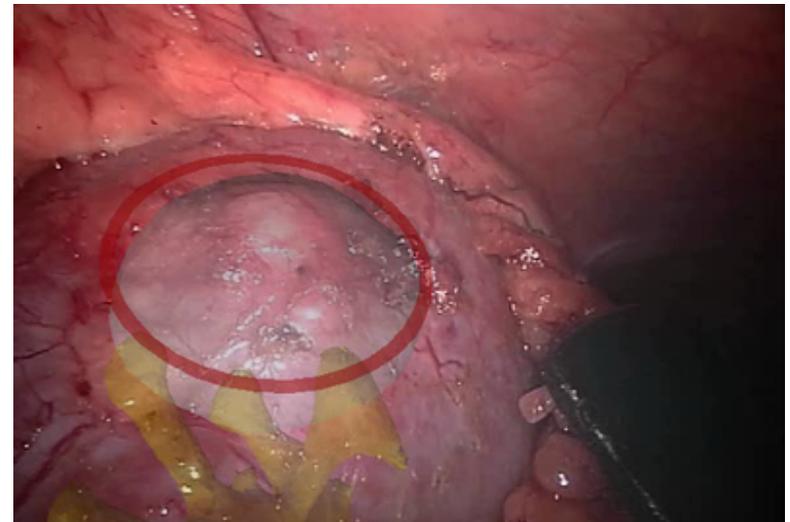


TRACKING AND MOSAICKING THE RETINA DURING SURGERY

Intra-operative information overlay

QE Opportunities and Challenges

- **Opportunity:** Make medicine better
 - Quantitative non-irradiating measurement
 - Cost-neutral
 - Always available
 - New science of studying surgery
- **Challenges:**
 - Reliable methods at scale
 - Online assessment and feedback
 - Deployment in clinical workflow



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