THE AI DEVCON 2018

Imaging biomarkers of neural circuits in normal development and disease

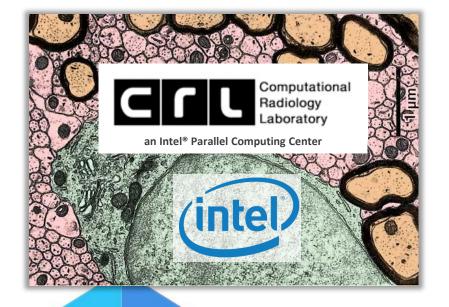
Simon K. Warfield

Professor of Radiology at Harvard Medical School

Benoit Scherrer, Onur Afacan, Damon Hyde, Burak Erem, Ali Gholipour



INTEL AI DEVCON 2018





Harvard Medical School

Concussion



Multiple Sclerosis



National Multiple Sclerosis Society

Today's *in vivo* imaging tools to assess the brain are limited



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Normal brain development

Cost of mental illness: ~\$317 billion per year (Insel 2008)

Traditional (historical) approach in Neurology

Focus on symptoms

Diagnose patients on the effect of the disconnections

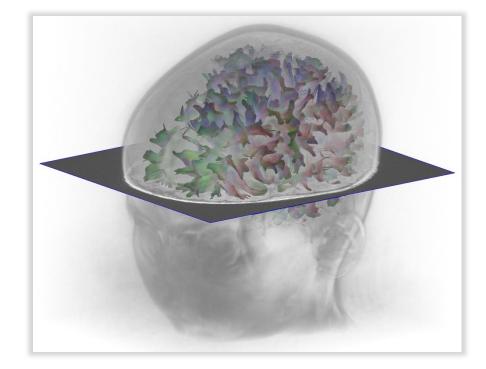
What we should do

Focus on the underlying neural basis of the disorder.

Diagnose patients based on the location of the disconnections.



Concussion **Multiple Sclerosis** Multiple Sclerosi Autism Spectrum Disorder



- Concussion, MS, ASD: Disconnection syndromes (?)
- Need to assess the microstructural integrity of brain connections Axonal loss? Inflammation? Demyelination? Remyelination? Atypical wiring of the brain?



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Normal brain development

Need to characterize neural circuits

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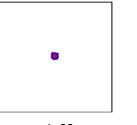
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Diffusion-weighted Imaging (DWI)

Assessment of the restrictions and hindrances to water diffusion in biological tissues

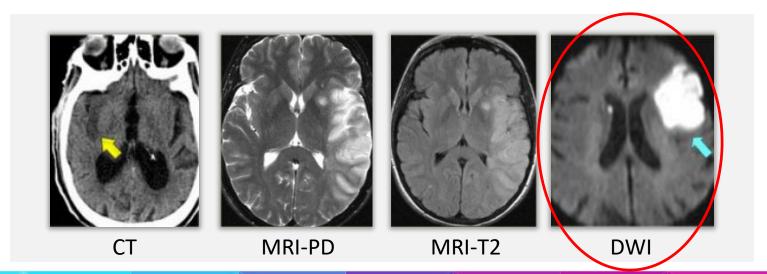


Free diffusion

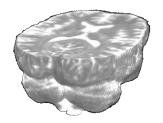


Restricted diffusion

Originally developed for assessing strokes



Diffusion-weighted Imaging



Each image: 3-D

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2nd Generation DWI

Assessment of the 4-D diffusion in each pixel

• Varying diffusion orientations

Varying diffusion length scales

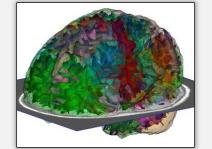
Large amount of data

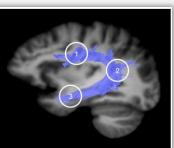
⇒Provides *in vivo* insight into the architecture and microstructure of neural circuits (the "wires" of the brain)











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Diffusion tensor imaging (DTI)

Over-simplified summary of the diffusion in voxels

Tensor

Limited information

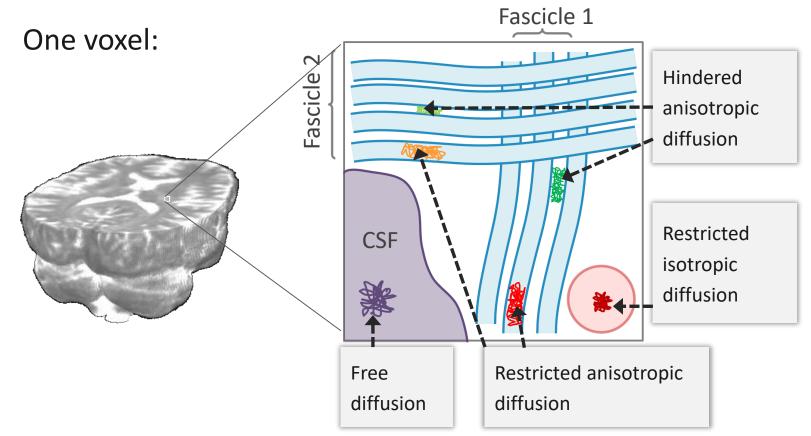
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Scientific Contribution: Diffusion Compartment Imaging (DCI)



Disentangle the various types of diffusion within voxel => Non invasive characterization of properties of neural circuits

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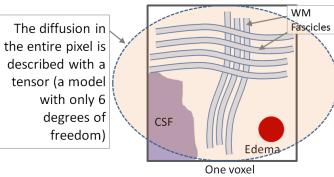
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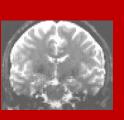
Diffusion-weighted Imaging

We have developed a novel diffusion-weighted imaging technique

Conventional technique Diffusion Tensor Imaging (DTI)



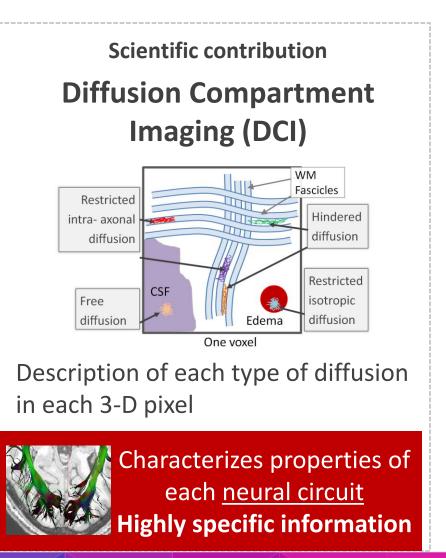
Summarizes the diffusion with an oversimplified model



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Characterizes each pixel of the 3-D image of the brain Limited information



(Some mathematics...)

$$S(\mathbf{g}, b) = \sum_{j=1}^{N_c} S_0 \int_{\mathbf{D} \in \operatorname{Sym}^+(3)} P_j(\mathbf{D}) \exp\left(-b\mathbf{g}^T \mathbf{D} \mathbf{g}\right) d\mathbf{D}$$

$$P(\mathbf{D};\kappa,\boldsymbol{\Psi},\boldsymbol{\Theta}) = \frac{[\det(\mathbf{D})]^{\kappa-2}}{[\det(\boldsymbol{\Psi})]^{\kappa}\Gamma_{3}(\kappa)} \exp[-\operatorname{tr}(-\boldsymbol{\Theta}-\boldsymbol{\Psi}^{-1}\mathbf{D})]F_{0,1}(\kappa;\boldsymbol{\Theta}\boldsymbol{\Psi}^{-1}\mathbf{D})$$

$$S = S_0 \sum_{j=1}^{N_c} \left(1 + b \mathbf{g}^T \boldsymbol{\Psi}_j \mathbf{g} \right)^{-\kappa_j} \exp\left(-\frac{b \mathbf{g}^T \boldsymbol{\Psi}_j \boldsymbol{\Theta}_j \mathbf{g}}{1 + b \mathbf{g}^T \boldsymbol{\Psi}_j \mathbf{g}} \right)$$

$$S(\mathbf{g},b) = S_0 \left[f_{\rm iso} \exp(-bD_{\rm iso}) + \sum_{j=1}^{N_f} f_j \left(1 + b\mathbf{g}^T \mathbf{D}_{0,j} \left(\kappa_j \mathbf{I}_3 + \boldsymbol{\Theta}_j\right)^{-1} \mathbf{g} \right)^{-\kappa_j} \exp\left(-\frac{b\mathbf{g}^T \mathbf{D}_{0,j} \left(\kappa_j \mathbf{I}_3 + \boldsymbol{\Theta}_j\right)^{-1} \boldsymbol{\Theta}_j \mathbf{g}}{1 + b\mathbf{g}^T \mathbf{D}_{0,j} \left(\kappa_j \mathbf{I}_3 + \boldsymbol{\Theta}_j\right)^{-1} \mathbf{g}} \right)^{-\kappa_j} \right]$$



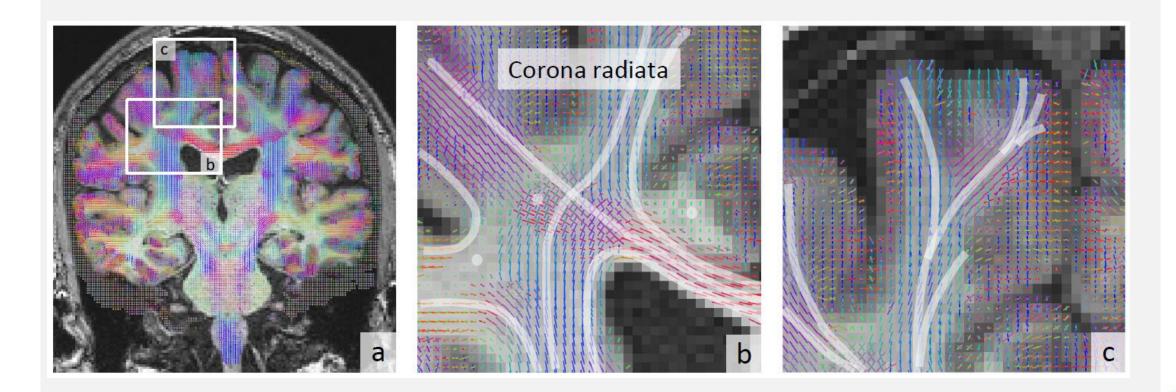
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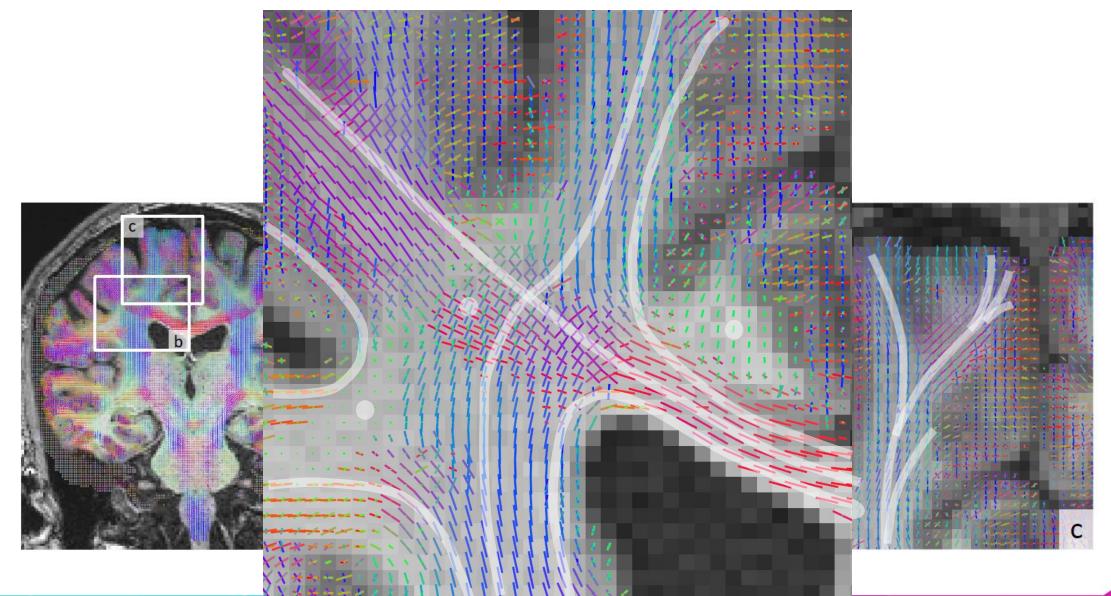
Diffusion Compartment Imaging (Healthy Subject)

Unprecedented characterization of neural circuits

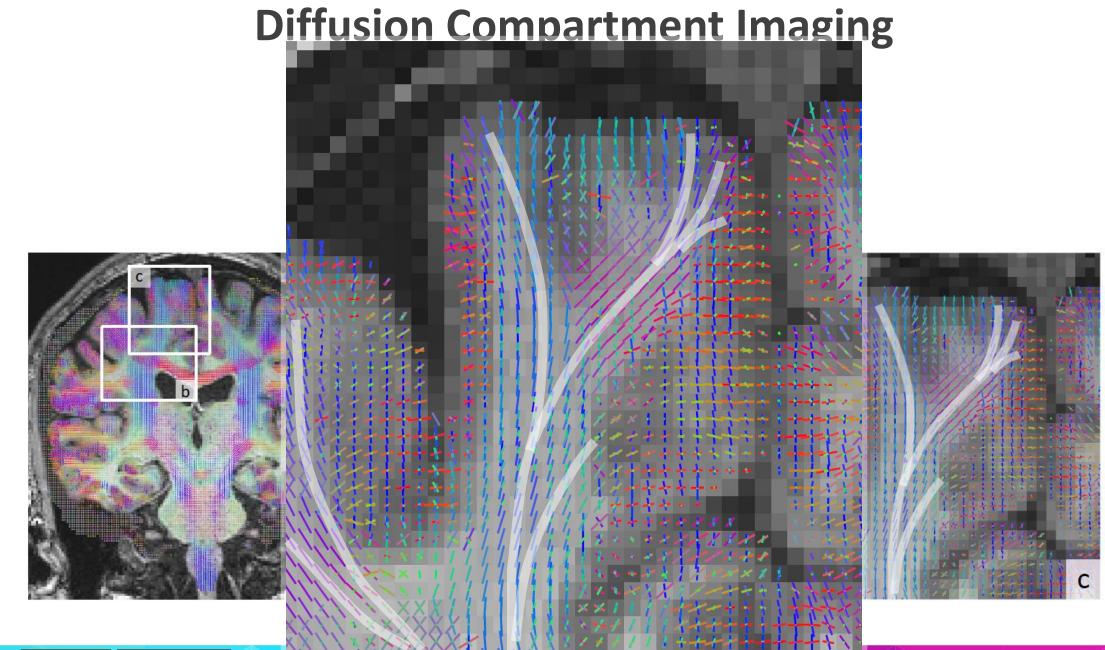




Diffusion Compartment Imaging

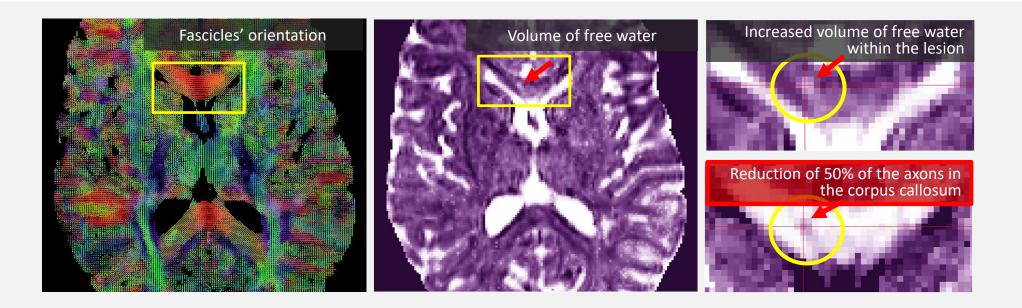






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Diffusion Compartment Imaging in Concussion





Suggest diffuse axonal injury leading to axonal death, while the remaining axons remain unchanged



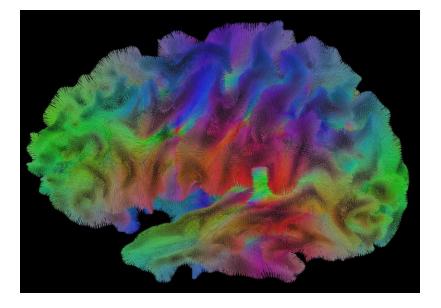
But...

Originally a few days of computations for each case...



The Computational Radiology Laboratory at Boston Children's Hospital,





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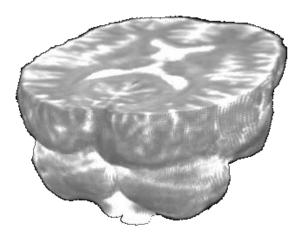
Boston Children's Technical goals:

- Improve cache performance, vectorization performance and multithreading performance for Intel[®] Xeon[®] processors
- Improved data structures
- Improved algorithms
- Open source implementations

➡ Modernize medical image computing

Programming environment

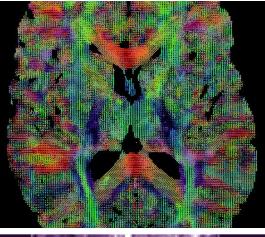
Diffusion Compartment Imaging Estimation

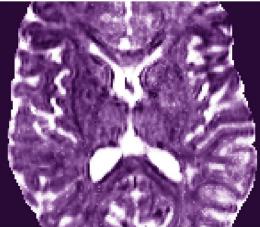


Large 4-D dataset for each patient



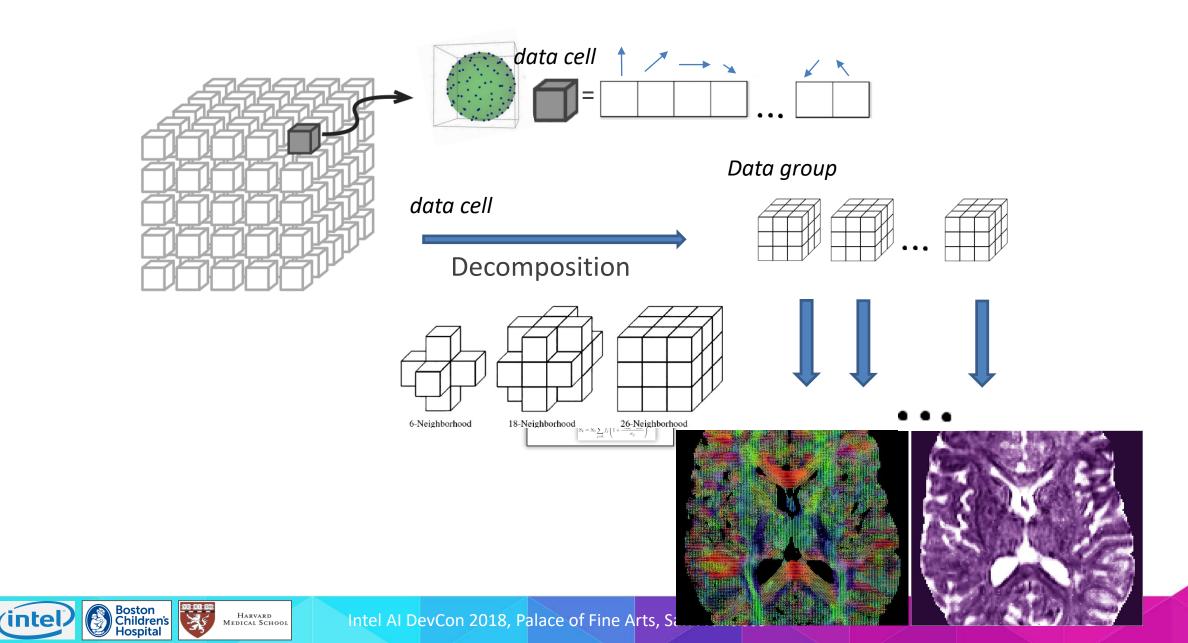
Filter







Programming environment



Improvements

Diffusion Compartment Imaging Estimation

Intel[®] Xeon(R) CPU E5-2697 v2 @ 2.70GHz × 24 core, 2 sockets, image 2x2x2mm³

- Single core: 43h06m21s x14.2 03h02m02s x1.76 Parallelization v1: 01h43m31s x1.12 Memory optimization: Vectorization: 01h32m38s x1.37 TBB filter, dynamic pool: 01h07m26s X7.4 x105 Flexible TBB decomposition: 55m23s **Optimizer improvement:** 38m27s' Intel compilation flag: 34m14s x1.4
- Intel[®] Xeon Platinum[™] 8160 23m53s[®] (Skylake 8160, 24 cores, 2.1Ghz nominal, 2 sockets)

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Optimization Notice: Intel's compilers may or may not optimize to the same degree for non-Intel microprocessors for optimizations that are not unique to Intel microprocessors. These optimizations include SSE2, SSE3, and SSSE3 instruction sets and other optimizations. Intel does not guarantee the availability, functionality, or effectiveness of any optimization on microprocessors not manufactured by Intel. Microprocessor-dependent optimizations in this product are intended for use with Intel microprocessors. Certain optimizations not specific to Intel microprocessors. Please refer to the applicable product User and Reference Guides for more information regarding the specific instruction sets covered by this notice. Software and workloads used in performance tests may have been optimized for performance only on Intel microprocessors. Performance tests, such as SYSmark and MobileMark, are measured using specific computer systems, components, software, operations and functions. Any change to any of those factors may cause the results to vary. You should consult other information and performance tests to assist you in fully evaluating your contemplated purchases, including the performance of that product when combined with other products. For more complete information visit: http://www.intel.com/performance Source: Intel measured as of May 2018.

Scalability

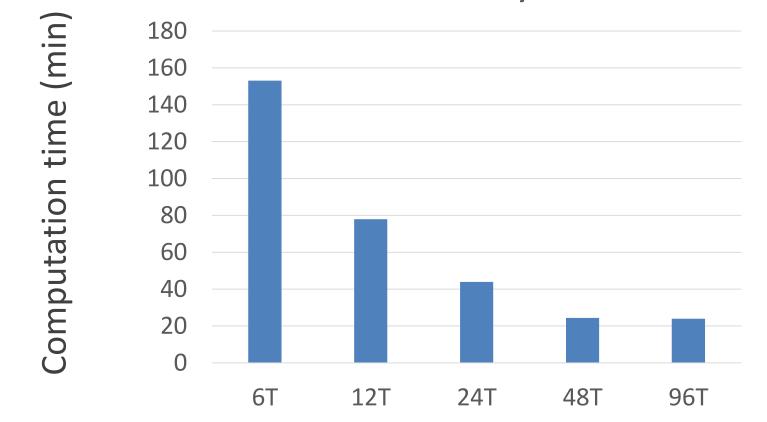


Image Resolution: 2x2x2mm³ Intel[®] Xeon Platinum[™] 8160 Skylake, 24 cores, 2 sockets, Stampede2, TACC – Texas Advanced Computing Center

Optimization Notice: Intel's compilers may or may not optimize to the same degree for non-Intel microprocessors for optimizations that are not unique to Intel microprocessors. These optimizations include SSE2, SSE3, and SSSE3 instruction sets and other optimizations. Intel does not guarantee the availability, functionality, or effectiveness of any optimization on microprocessors not manufactured by Intel. Microprocessor-dependent optimizations in this product are intended for use with Intel microprocessors. Certain optimizations not specific to Intel microprocessors. Please refer to the applicable product User and Reference Guides for more information regarding the specific instruction sets covered by this notice. Software and workloads used in performance tests may have been optimized for performance only on Intel microprocessors. Performance tests, such as SYSmark and MobileMark, are measured using specific computer systems, components, software, operations and functions. Any change to any of those factors may cause the results to vary. You should consult other information and performance tests to assist you in fully evaluating your contemplated purchases, including the performance of that product when combined with other products. For more complete information visit: http://www.intel.com/performance Source: Intel measured as of May 2018.

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The resolution of images is increasing

- Benchmarking done with conventional 8 mm³ voxel images (128x128x71 voxels)
- We can see more structure with voxel images (256x256x142 voxels)
- \rightarrow Processing times:

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Allows large scale processing

Pediatric Imaging, Neurocognition and Genetics (PING) dataset

DIATRIC IMAGING, NEURO											
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Bibliography			1000	100	All a	1000	150	100		100	
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The PING Data Resource is the product of a multi-site project involving developmental researchers across the United States including UC San Diego; the University of Hawaii; UC Los Angeles; Children's Hospital of Los Angeles of the University of Southern California; UC Davis; Kennedy Krieger Institute of Johns Hopkins University: Sackler Institute of Cornell University; University of Massachusetts; Massachusetts General Hospital at Harvard University; and Yale University.

- 698 scans from the PING database
 - Single shell HARDI DWI with a prior
- Computation at the National Energy Research Scientific Computing Center (NERSC) Haswell and Ivy Bridge nodes
- Real processing time spent:
 328 days
- Single processor equivalent time (from system's ticks) :
 6504 days, ~ 17.8 years!

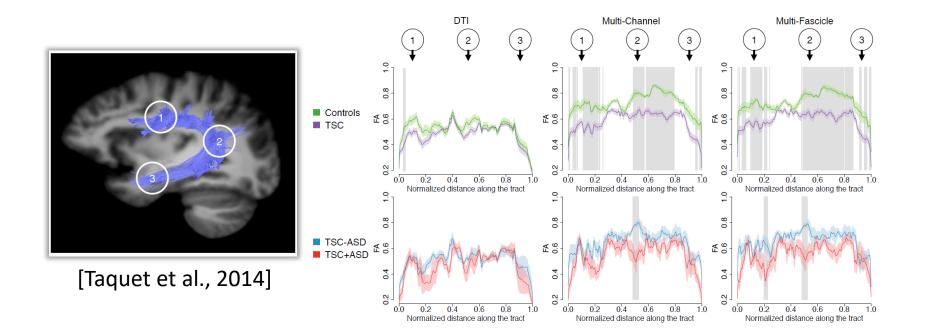
Transforming the Practice of Radiology



Quantitative Cohort Comparison

Big data analysis

• Brain microstructure characterization in ASD



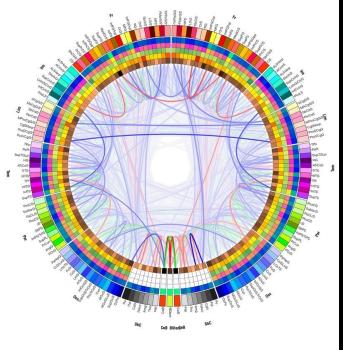


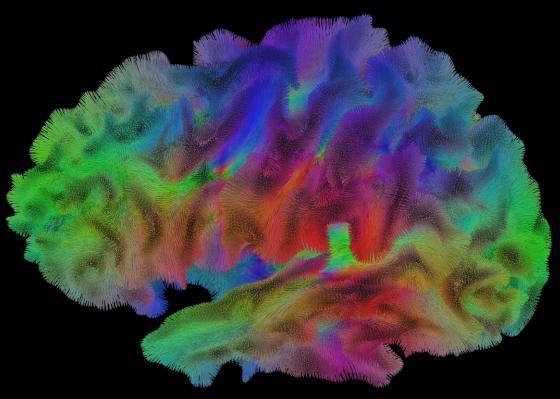
Understanding Neural Circuits

Human Connectome Project (HCP)



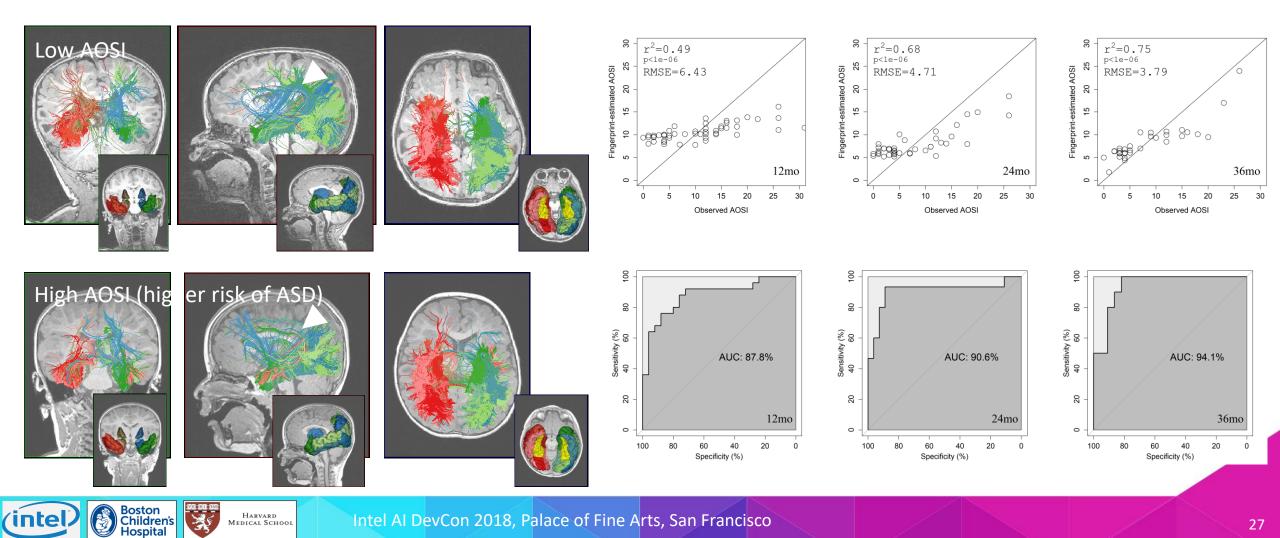
• Mapping the structural and functional connections







Connectivity fingerprint of the fusiform gyrus in Autism

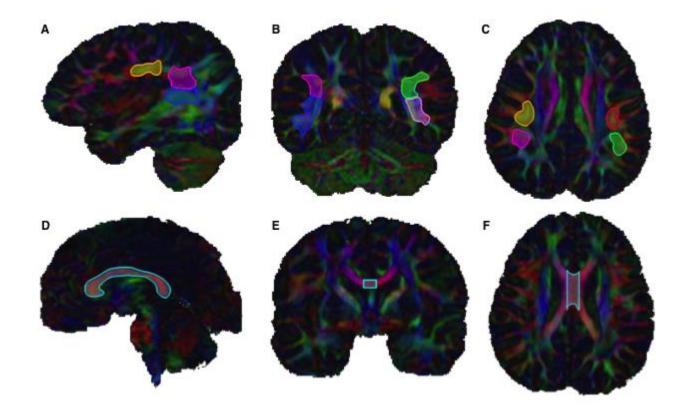


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White matter maturation in Autism



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a. Prediction of dichotomized AOSI from DTI metrics of white matter ROI and log age in the \leq 12 months of age subsample.

ROI	DTI metric	Sensitivity	Specificity	PPV	NPV	AUC	95% CI
R Wernicke	MD	66.67	86.36	72.73	82.61	76.14	58.42 - 93.86
L Wernicke	FA	83.33	63.64	55.56	87.50	75.76	58.33 - 93.18
R Geschwind	FA	83.33	63.64	55.56	87.50	74.24	57.26 - 91.22
L Geschwind	MD	66.67	77.27	61.54	80.95	73.11	55.18 - 91.03
R Geschwind	MD	58.33	86.36	70.00	79.17	71.21	52.31 - 90.11
R Wernicke	FA	75.00	68.18	56.25	83.33	70.83	52.68 - 88.98

b. Prediction of dichotomized AOSI from DTI metrics of white matter ROI, log age, and repeated measures in the longitudinal subsample.

ROI	DTI metric	Sensitivity	Specificity	PPV	NPV	AUC	95% CI
L Geschwind	FA	86.67	80.00	72.22	90.91	87.20	75.88 - 98.52
L Wernicke	FA	86.67	76.00	68.42	90.48	85.07	73.34 - 96.79
L Broca	FA	93.33	52.00	53.85	92.86	77.33	62.49 - 92.17
R Geschwind	FA	60.00	88.00	75.00	78.57	76.53	61.26 - 91.80
R Wernicke	FA	86.67	60.00	56.52	88.24	75.47	60.52 - 90.42
L Broca	MD	80.00	60.00	54.55	83.33	71.47	55.26 - 87.67
R Wernicke	MD	86.67	44.00	48.15	84.62	71.47	55.00 - 87.94
L Geschwind	MD	73.33	72.00	61.11	81.82	70.67	54.09 - 87.25
R Geschwind	MD	60.00	76.00	60.00	76.00	70.67	54.35 - 86.98
L Wernicke	MD	60.00	84.00	69.23	77.78	70.13	52.85 - 87.42

ROI with AUC > 70.00 shown. Longitudinal Sample, N=40; ≤ 12 months of age subsample, N=34.

AOSI= Autism Observation Scale for Infants; AF= Arcuate Fasciculus; AUC= Area Under Curve; CI=Confidence Interval; DTI= Diffusion Tensor Imaging; FA=Fractional Anisotropy X 10; L=left; MD=Mean Diffusivity mm²/s X 10³; NPV=Negative Predictive Value; PPV= Positive Predictive Value; R=right; ROI=Region of Interest.

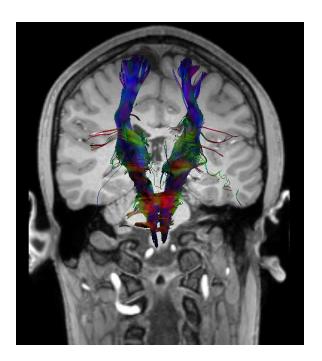
Neural Circuitry in the Individual

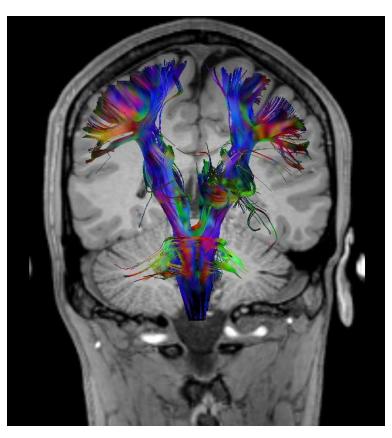
Surgical planning

• Navigation to preserve neural circuits.



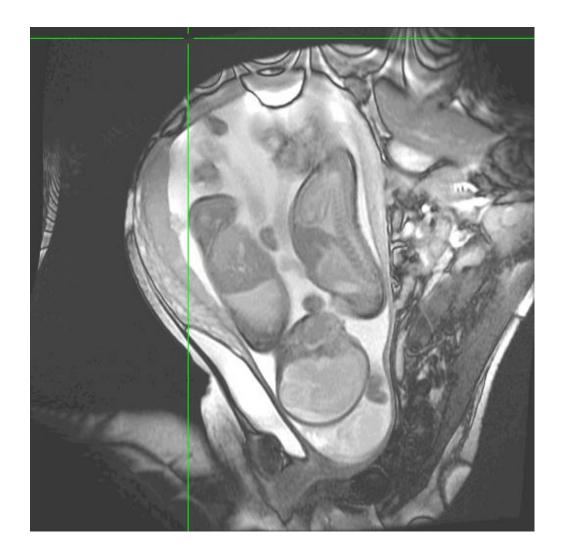






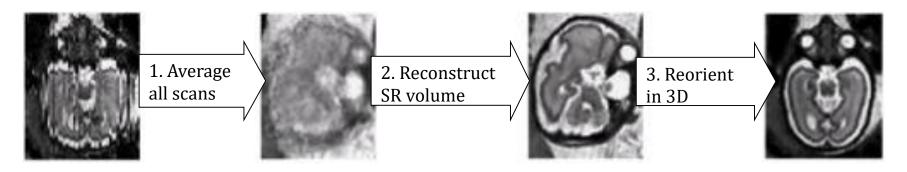


Fetal MRI : motion compensation





Post-reconstruction processing



- Extract brain (semi-automatic) → intracranial volume
 Simultaneous reconstruction and brain extraction (automatic)
- Correct intensity non-uniformity due to B1 field inhomogeneity
- Register to a common coordinate system (template or atlas)
- A normative spatiotemporal MRI template (22 to 38 weeks GA)
- Atlas labels for fetal brain MRI segmentation

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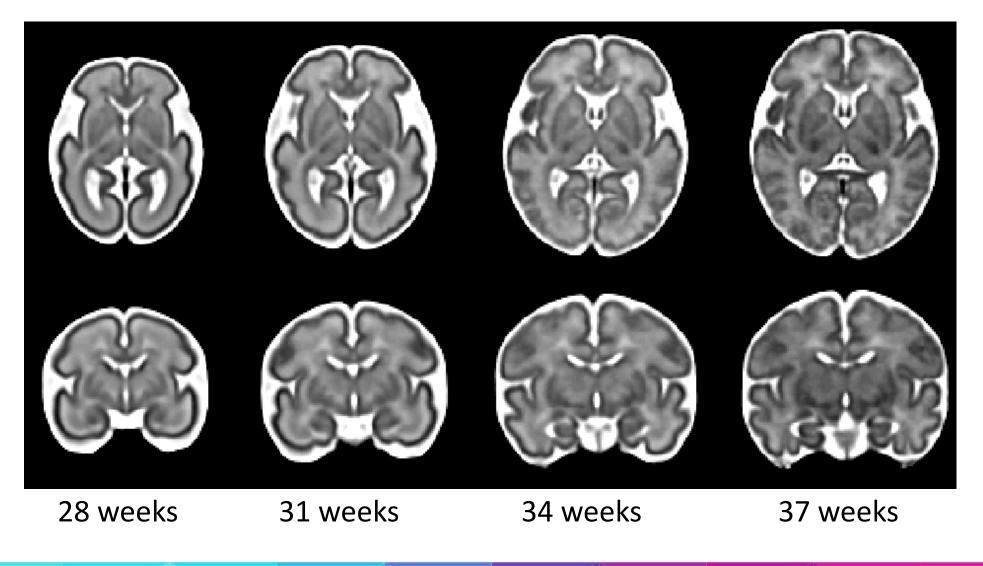
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 Quantitative volumetric and surface-based individual and group analysis

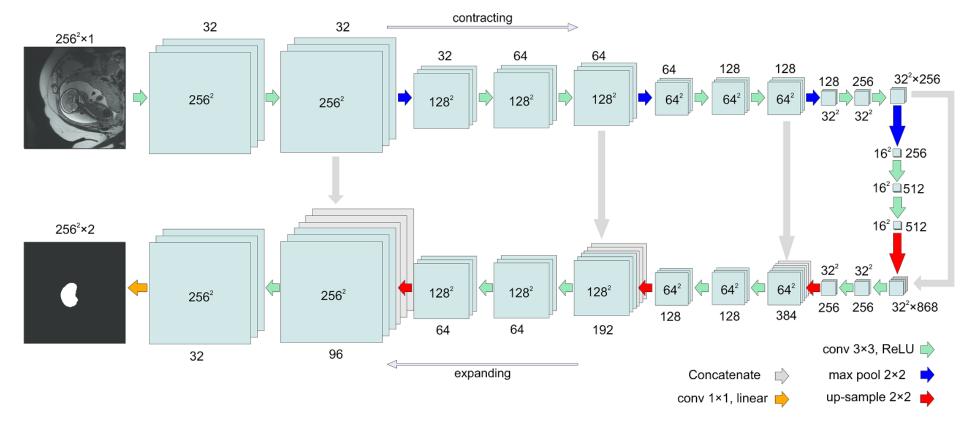
Spatiotemporal fetal brain MRI atlas





Real-time fetal brain extraction

A U-net style deep neural network trained using 250 stacks (~7000 slices) with manual brain masks



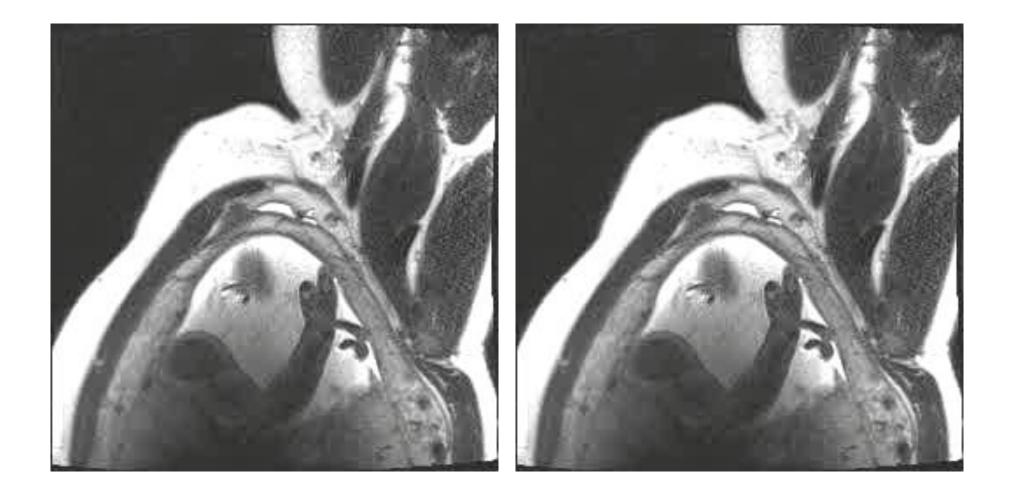
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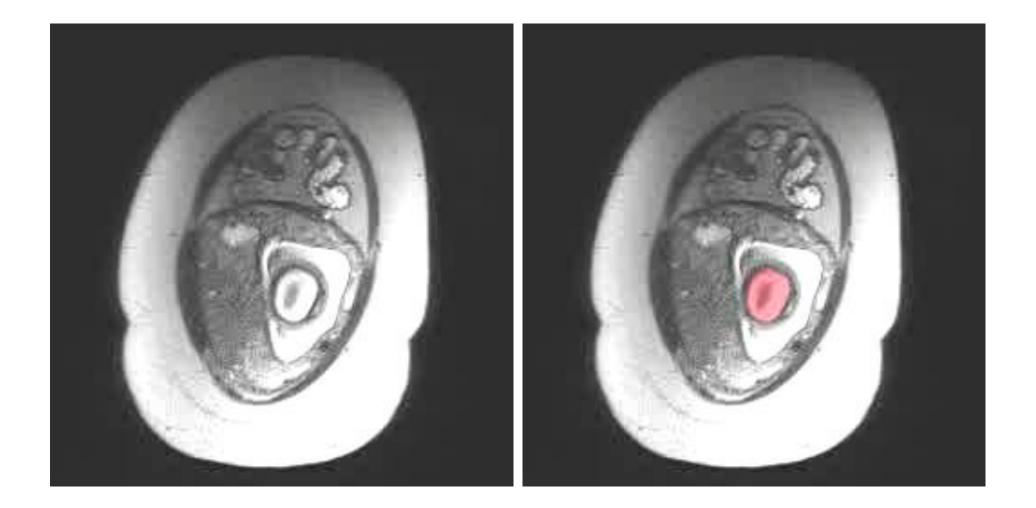
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Example 1: typical motion



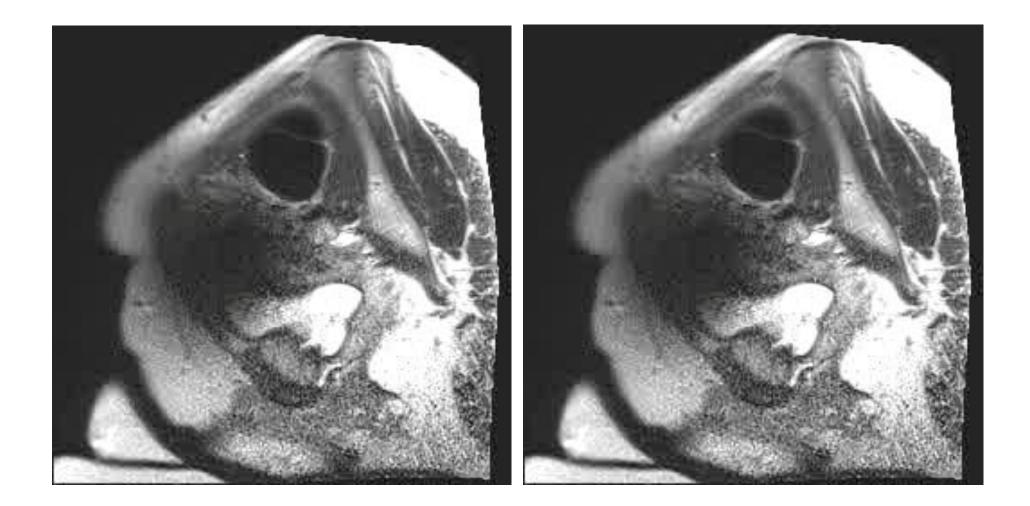


Example 2: substantial fetal motion



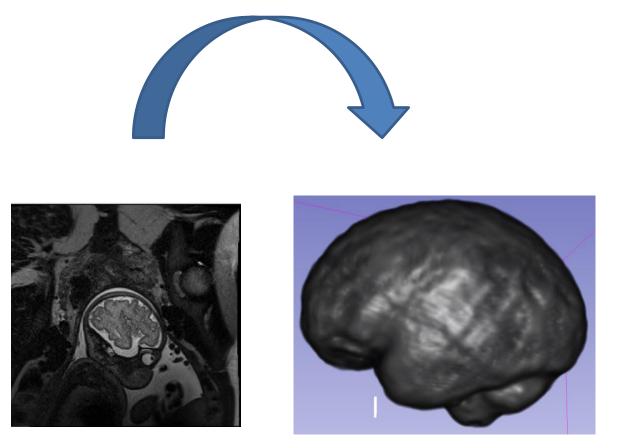


Example 3: noisy scan with motion





Real-time 3-D pose estimation



Alignment of each slice / Alignment to Atlas



A little bit of geometry!

Rotation matrix: R_{3x3} , $\begin{cases} Orthogonal \\ det R = 1 \end{cases}$ 3 DOFs

Axis-angle Representation: Rotation vector v with axis of rotation \hat{v} and an angle around it θ .

Where: $\hat{v} = \frac{v}{\|v\|_2} \ \theta = \|v\|_2$



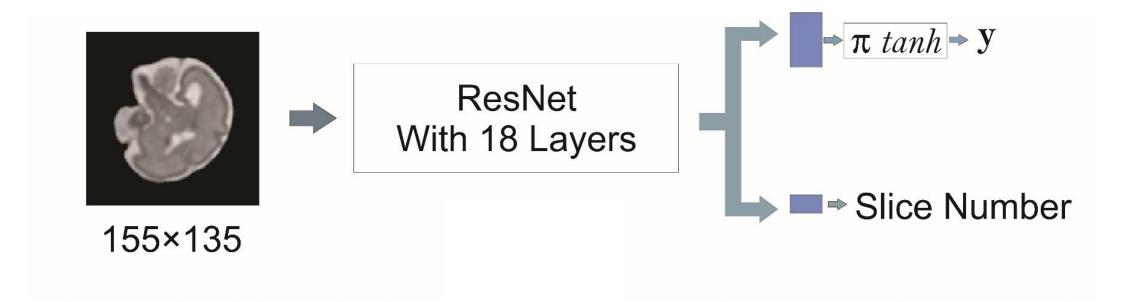
$$\hat{v} = \frac{v}{\|v\|_2} \quad \theta = \|v\|_2$$
$$R = exp(\theta[\hat{v}]_{\times})$$

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Boston Children's Rodrigues' rotation formula $R = I_3 + sin(\theta)[\hat{v}]_{\times} + (1 - cos\theta)[\hat{v}]_{\times}^2$ $\begin{cases} 2sin(\theta)[\hat{v}]_{\times} = R - R^T \\ tr(R) = 1 + 2cos(\theta) \end{cases}$

Network Architecture: (1) Slice-to-Volume Pose Estimation



Regression

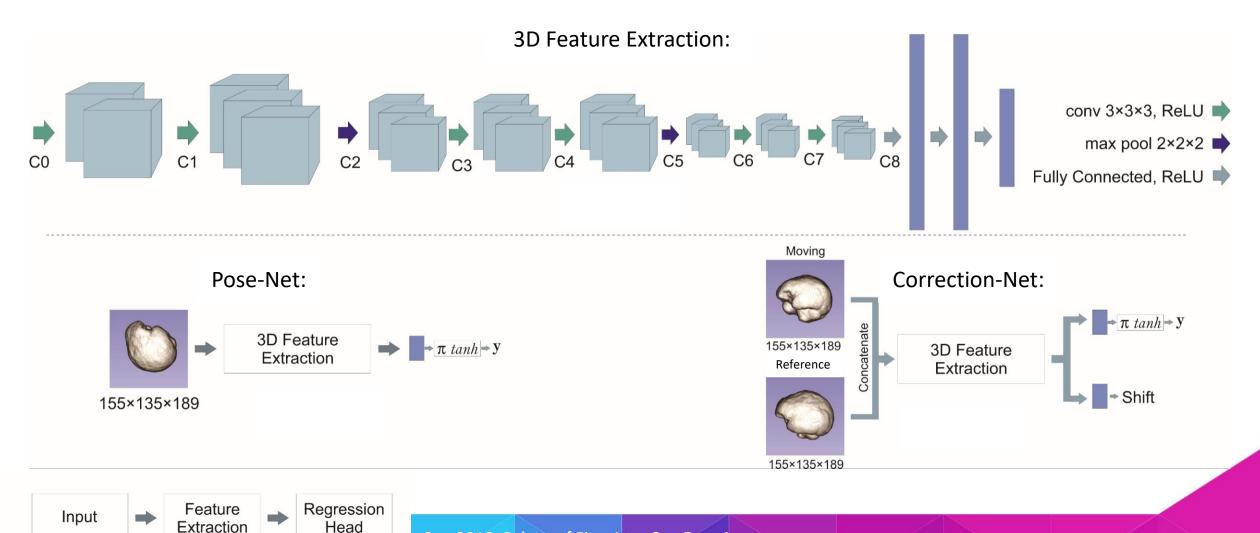
Head

Feature

Extraction

Input

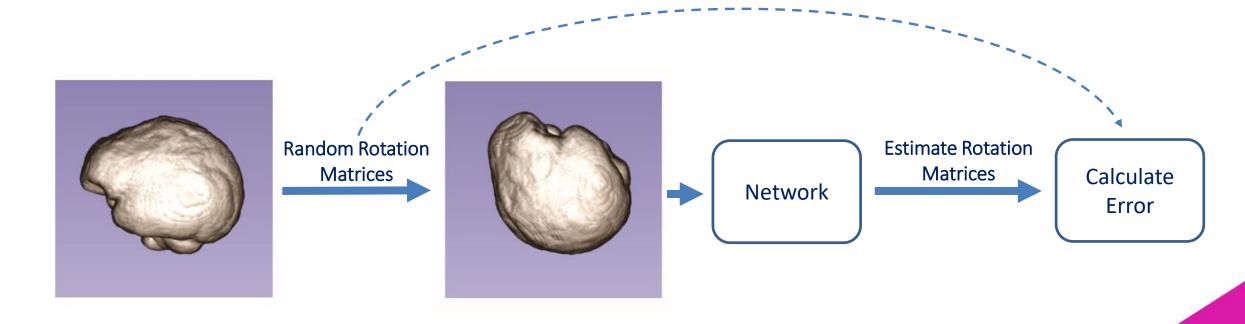
(2) Volume-to-Volume Pose Estimation



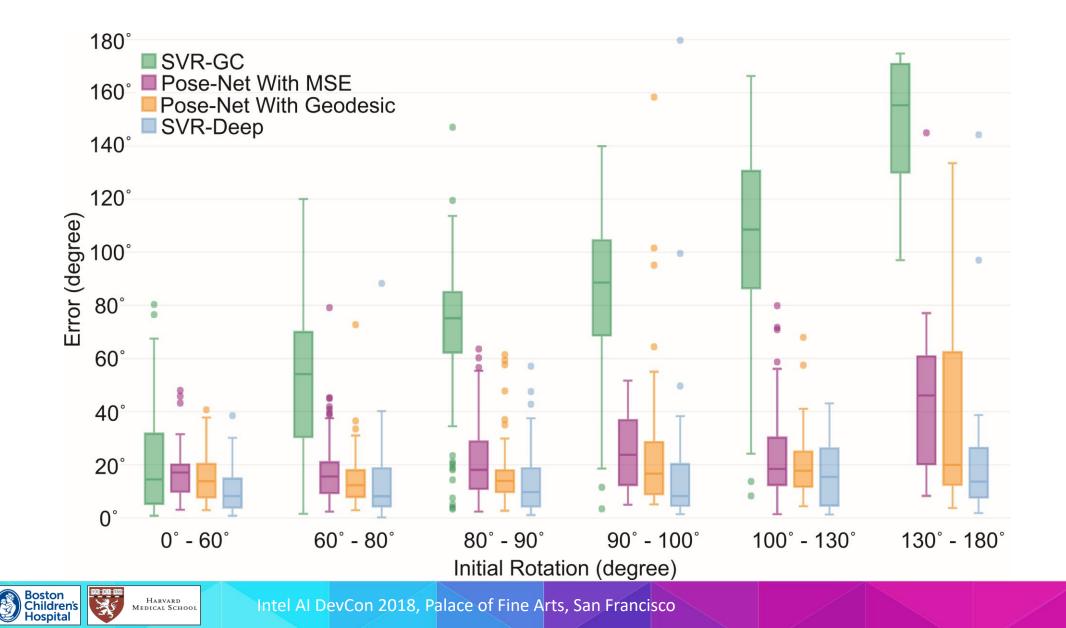
Training

36 Reconstructed image (26-37 weeks)

- -5,400,000 slices for Slice To Volume Training
- -180,000 volumes for Volume To Volume Training

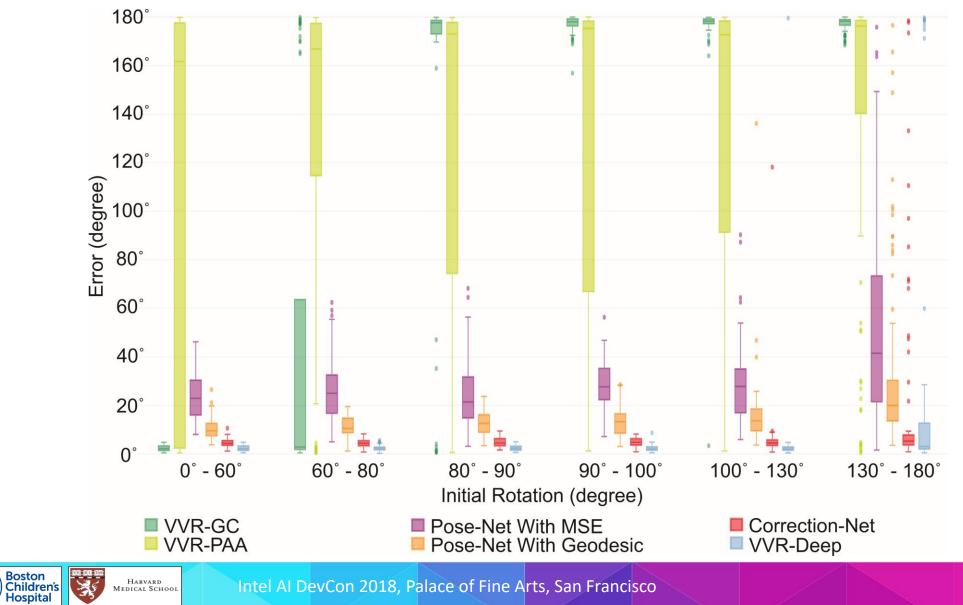


Slice-to-Volume Pose Estimation



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Volume-to-Volume Pose Estimation

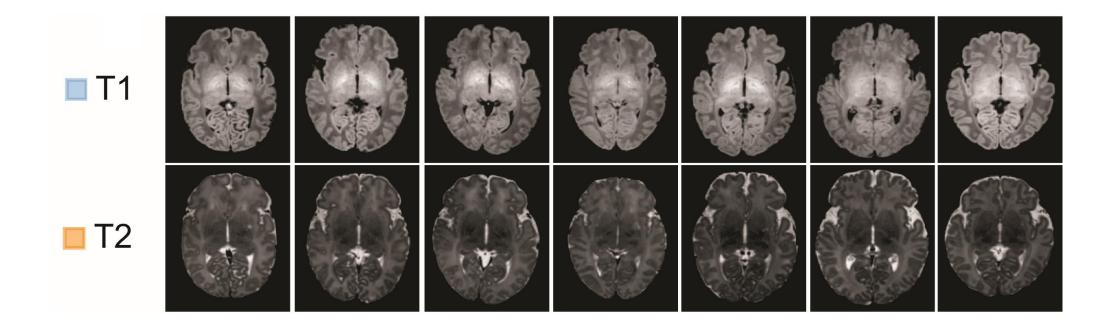


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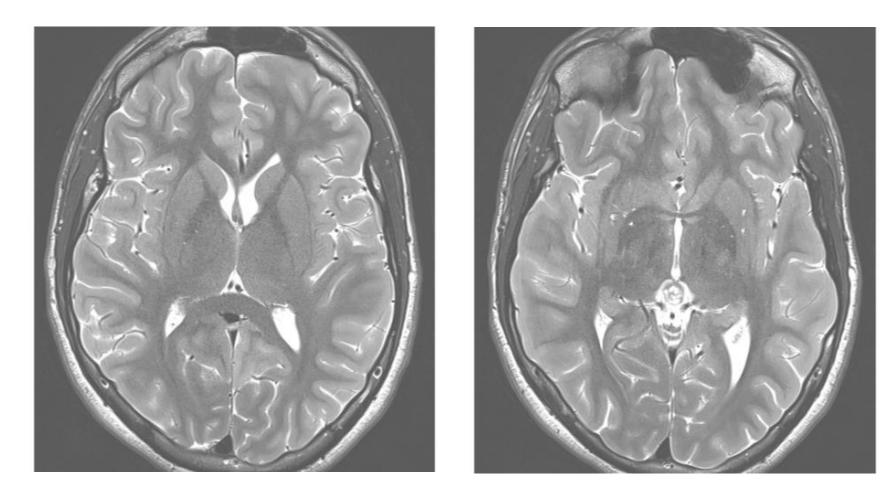
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Generalization Over Contrasts





Conventional T2 TSE of FCD from 3T MRI



Voxel size 0.5x0.5x2.5 cubic mm



MR Image Reconstruction

- Optimal reconstruction requires precise knowledge of the coil spatial sensitivity and the noise covariance structure of the array of coils.
- Approximations used in practice limit the sensitivity, as they are appropriate only in the high SNR regime.
- We developed improved coil to coil covariance structure estimation, and coil sensitivity profile estimation.
- We account for time varying properties of the scanner that occur during long acquisitions.
- About 1TB of raw data on a 64 channel head coil, long image reconstruction time.

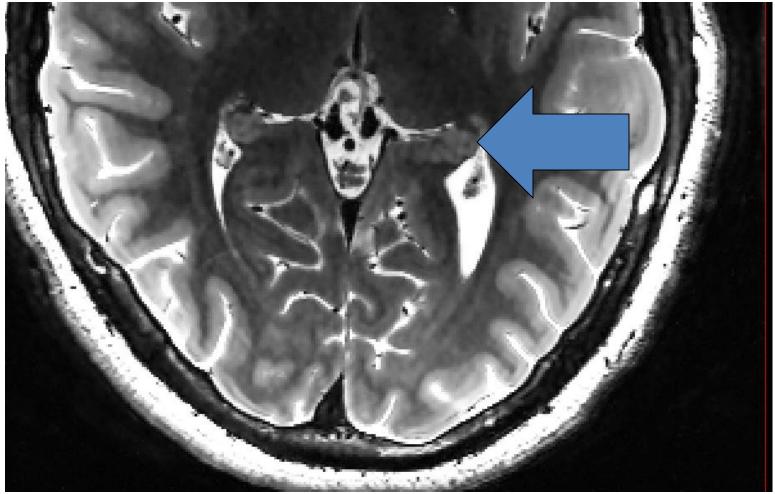
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In Vivo High Resolution MRI of FCD



Improved detection and determination of the extent of the FCD Voxel size 0.5x0.5x0.5 cubic mm



In Vivo High Resolution MRI of FCD

← GM Signal
 heterogeneity

Tail-like FCD visible in two planes.

Imaging data from offline reconstruction at 0.5x0.5x0.5 cubic mm.



EEG/MEG Source Imaging

Noninvasive measurements



128 channel EEG



MEG

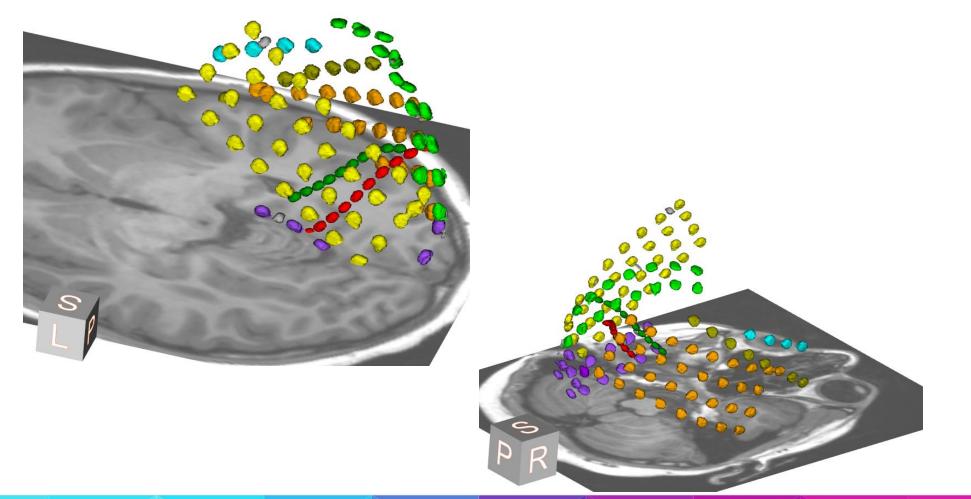


Invasive Source Localization

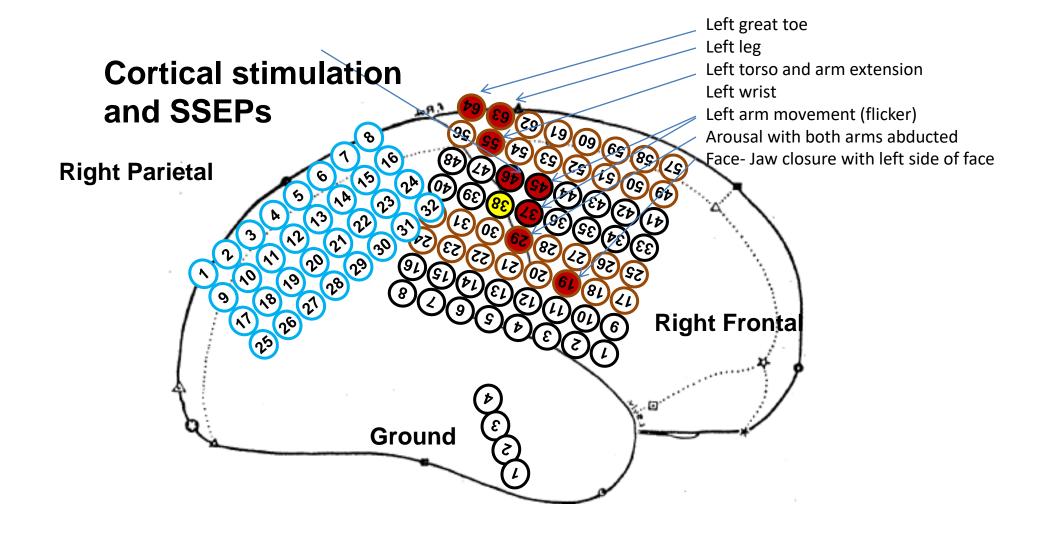


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3D visualization of electrodes



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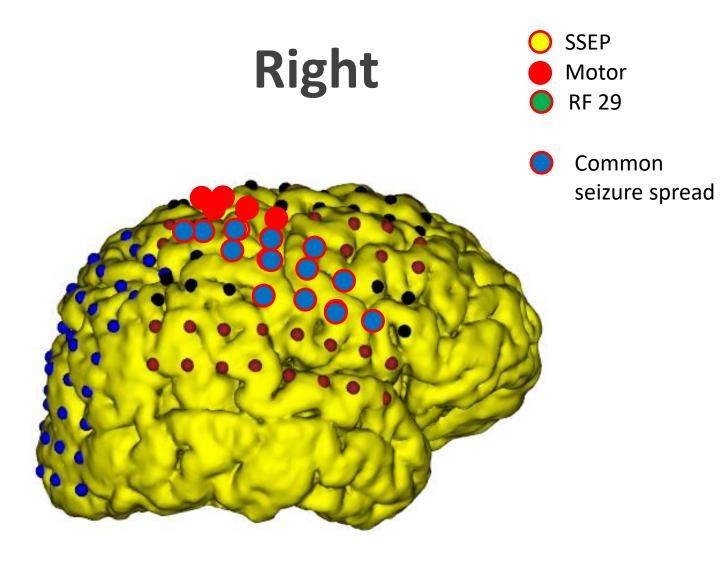
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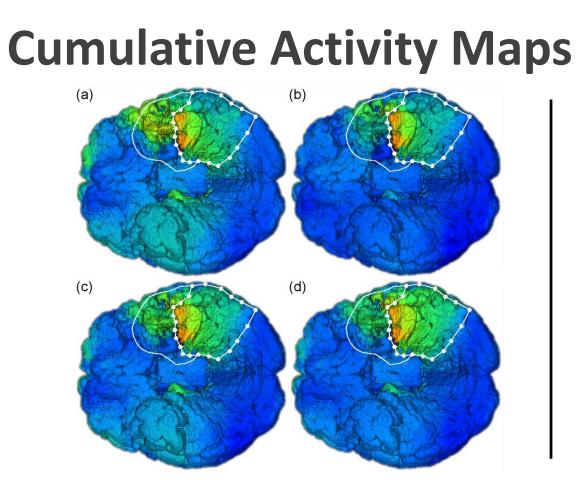
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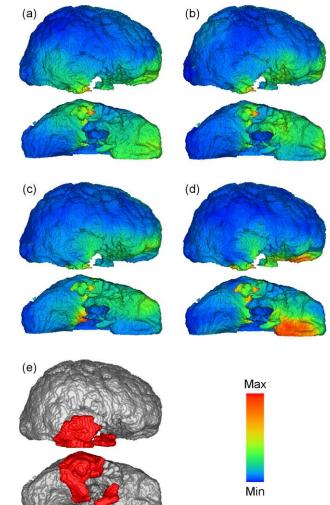




Propagation Example Segment from Patient 4, Seizure 1















We develop medical image computing solutions for clinical needs that arise from imaging of patients. We have a range of challenging visualization and analysis problems, that arise from sophisticated imaging and modeling strategies, from multiple sclerosis and concussion, to fetal MRI and epilepsy. Al is enabling rapid translation from research to clinical impact.





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