

Synthetic sources of image data and their utility

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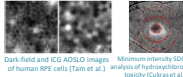


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**NIH
NEI**

- PIs: Tam, Cukras, Chew, Wong, Wiley, et al.
- Capabilities: multi- λ -AOSLO+ICG, FDML-based multimodal AO-OCT (Fall 2019)
- Clinical focus: AMD, inherited retinal diseases, hydroxychloroquine toxicity, RPE stem cell therapies, clinical endpoints

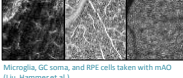


Dark-field and ICG-AOSLO images Minimum intensity SD-OCT of human RPE cells (Tam et al.) μ WMS of hydroxychloroquine toxicity (Cukras et al.)

DC AO/OCT Community

FDA

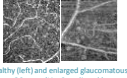
- PIs: Hammer, Liu, Agrawal
- Capabilities: mAO, FDML-based AO-OCT (Fall 2019)
- Focus: Glaucoma, AO biomarkers, AO phantoms



Microglia, GC soma, and RPE cells taken with mAO (Liu, Hammer et al.)

UMD

- PI: Saeedi
- Clinical focus: Glaucoma, blood flow



Healthy (left) and enlarged glaucomatous GC soma (Liu, Saeedi et al.)

...growing AO and OCT capabilities and impact for clinical translation and regulatory science

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Motivation

How best to validate and standardize AO and OCT performance?

- ISO OCT standard is limited
- No clinical gold standards to compare to
 - OCT is three-dimensional and not directly relatable to standard fundus imaging
 - OCT angiography employs fundamentally different technological characteristics than dye angiography
 - Unprecedented and exceptional capabilities in AO and OCT
 - Other functional biomarkers (e.g., phase-based)
 - AO provides uniquely high spatial resolution, coupled with dynamic and personalized imaging

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Synthetic data sources

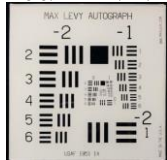
- Phantoms** \Rightarrow Physical tools for imaging performance evaluation
- Model eyes** \Rightarrow Physical tools for imaging performance evaluation
- Synthetic images** \Rightarrow Software tools associated with machine learning

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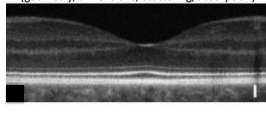
Phantom: basic concept

Precision test target
Imaging performance principles

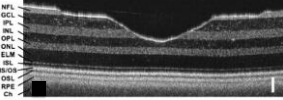


+

Known physical properties of tissue
(geometry, dimensions, scattering/absorption)



PHANTOM: Physical model with controlled properties for tissue-relevant performance characterization



=

- Quantify image quality metrics
- Compare devices
- Track performance
- Calibrate measurements
- Access underlying physics



Streamline device development, evaluation, regulation

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Commercially available OCT phantoms



Arden Products

Retina-like phantom
www.rowetechnical.com

Multi-parameter phantom
For measuring several important imaging performance metrics
www.ardenphotonics.com

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Phantoms for retinal OCT imaging



3D point spread function phantom
Agrawal et al, BOE 2012

Improved macula phantoms
Lee et al, JBO 2015
Bowden lab, formerly Stanford Univ.

Optic nerve head phantoms
Agrawal et al, IOVS 2016

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Multimodal AO photoreceptor phantom



3D-printed cylinders
encapsulated in silicone

AO-SLO AO-OCT Linear AO-OCT Log

Kedia et al, Optics Letters 2019

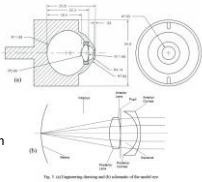
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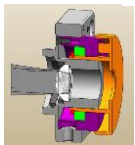
Model eyes



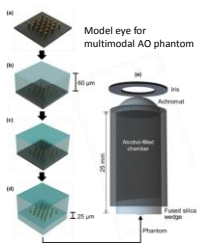
OEMI-7
www.ocularinc.com



High-precision calibrated model eye



Courtesy of the Dubra Lab at Stanford University and Moonfog Optics



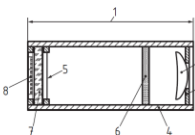
Kedia et al, Optics Letters 2019

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Model eye – OCT standard



ISO 16971:2015(E) Ophthalmic instruments — Optical coherence tomograph for the posterior segment of the human eye



- Key
- 1 length approx. 17 mm
 - 2 lens, $f = 17$ mm
 - 3 aperture, diameter 6 mm
 - 4 tube
 - 5 single filament with 100 μ m diameter (has to be tight)
 - 6 neutral density filter
 - 7 glass plane, 1 mm thick
 - 8 scale with reference marks for field size

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Software-based synthetic image formation and usage



Data augmentation

Model-based data generation

Sina Farsiu, Duke Univ. 12

Data augmentation for manual segmentation



Research Article
 Biomedical Optics EXPRESS

Retinal optical coherence tomography image enhancement via deep learning

KERRY J. HALUPKA,^{1,2} BHAVNA J. ANTONY,¹ MATTHEW H. LEE,¹ KATHI A. LUCY,² RAINNET S. RAJ,² HISOHIKI EBHARA,² GADI WOLLSTEIN,² JOEL S. SCHUMAN,² AND RAHIL GARNANI¹

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	PSNR	SSIM	MS-SSIM	MSE
Healthy				
Raw	26.82±0.67	0.62±0.04	0.79±0.02	136.67±22.43
BM3D	31.17±1.27	0.74±0.04	0.88±0.02	51.53±17.29
DD-CWT	31.21±1.59	0.75±0.04	0.89±0.02	51.22±15.92
CNN-RGAN	31.83±1.21	0.77±0.03	0.92±0.01	44.52±14.34
CNN-MSE	32.28±1.27	0.78±0.03	0.92±0.01	40.28±13.44
Glaucoma				
Raw	25.46±0.67	0.58±0.04	0.76±0.02	188.32±52.53
BM3D	29.12±1.12	0.74±0.03	0.88±0.03	83.34±44.76
DD-CWT	29.44±1.18	0.74±0.03	0.89±0.03	77.84±46.15
CNN-RGAN	29.92±1.27	0.76±0.03	0.91±0.02	72.85±46.07
CNN-MSE	30.21±1.12	0.78±0.03	0.92±0.03	70.04±44.91

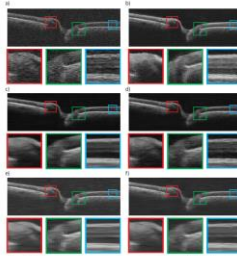


Fig. 1. OCT Image from a glaucomatous volume captured by Cirrus HD-OCT Scanner (a), and corresponding native enhanced image (b). The result of post-processing of (a) with CNN-MSE (c), CNN-RGAN (d), BM3D (e), and DD-CWT (f). Three zoomed in, color coded sections are shown below each B-scan from top to bottom.

Data augmentation for algorithm training



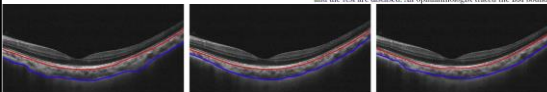
Neurocomputing 207 (2019) 501–506
 Contents lists available at ScienceDirect
 Neurocomputing
 journal homepage: www.elsevier.com/locate/neurocom

3.1. Data set and data augmentation

Macular-centered 3D EDI-OCT volumes (1536 × 406 × 49 voxels with a resolution of 5.8 × 3.9 × 123.9 μm³) were obtained using the Heidelberg Spectralis instrument (Heidelberg Engineering, Heidelberg, Germany) from both ocular sinister and ocular dexter of 42 normal subjects and 31 patients diagnosed with macular edema, aged between 24 and 68 years old. The research protocol was approved by the local Institutional Review Board, and written informed consent was obtained from all participants. From these OCT volumes, we manually chose 972 B-scans which are in good quality and bear a full view of the choroid, retina and sclera. Among these B-scans, 618 scans are normal and the rest are diseased. An ophthalmologist traced the BM boundary

Choroid segmentation from Optical Coherence Tomography with graph-edge weights learned from deep convolutional neural networks

Xiaodan Sun^{1,2*}, Yangle Zhang^{1,2,3,*}, Rongrong Wu¹, Honghong Qi¹, Jianfeng Wu¹, Xuemai Pan¹, Yilong Yin¹, Shaojing Zhang¹



degree values varying from 1 to 6 and parameters set randomly between 0-1 (with a similar way to our previous work [17]). They were all finally scaled to a value within [0.5, 5]. Adding the combination of these geometric and photometric variations result in an augmented training set with a size of 23,972 images. All images were resized to 768 × 256 by using a bilinear interpolation before feeding into our CNN architecture. Here, the scale factors applied to rows and columns are a little different in order for a convenient usage in our CNN model.

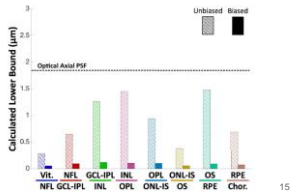
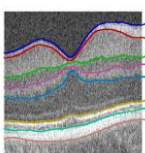
Model-based data generation



1979 IEEE TRANSACTIONS ON MEDICAL IMAGING, VOL. 37, NO. 9, SEPTEMBER 2018

Statistical Models of Signal and Noise and Fundamental Limits of Segmentation Accuracy in Retinal Optical Coherence Tomography

Theodore B. DuBose¹, David Cunefare², Elijah Cole, Peyman Milanfar, Fellow, IEEE, Joseph A. Izatt, and Sina Farsiu, Senior Member, IEEE



Summary



- A number of non-clinical physical tools (phantoms and model eyes) have been developed for AO and OCT imaging, mostly in prototype form
- Community consensus needed to identify most important data to obtain with physical tools
 - Imaging performance figures of merit
 - Measurement accuracy
 - System calibration during longitudinal studies
 - Post-processing traceability
- Software-based synthetic image usage in AO and OCT is quite nascent; data augmentation has potential to enhance training of AI/deep learning algorithms

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