

31 Formula-Driven Data Augmentation and Partial Retinal Layer Copying for Retinal Layer Segmentation

Tsubasa Konno¹⁾ Takahiro Ninomiya²⁾ Kanta Miura¹⁾ Koichi Ito¹⁾

Noriko Himori²⁾ Parmanand Sharma²⁾ Toru Nakazawa²⁾ Takafumi Aoki¹⁾

1) Graduate School of Information Sciences, Tohoku University, Japan

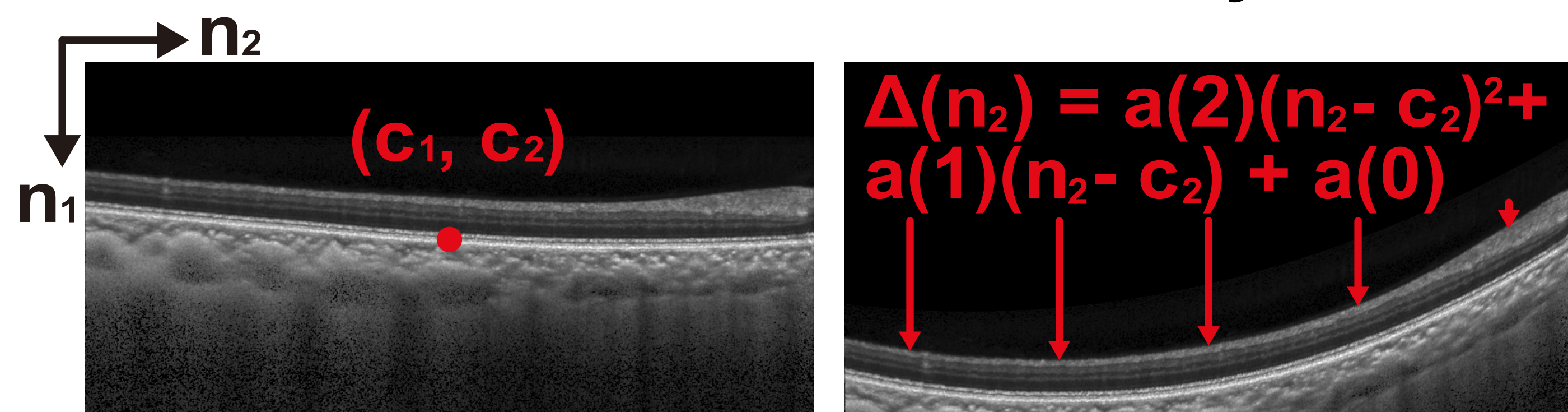
2) Department of Ophthalmology, Graduate School of Medicine, Tohoku University, Japan

Outline

- Thickness of retinal layers is an important criterion to diagnose ophthalmopathy
- To measure the thickness, it is necessary to segment the retinal layers from OCT images
- Due to lack of labeled training data, conventional retinal layer segmentation methods [1,2] cannot deal with various retinal shapes and may falsely detect background noise as retinal layers
- To solve these problems, we propose two data augmentation methods: Formula-Driven Data Augmentation (FDDA) and Partial Retinal Layer Copying (PRLC)

FDDA

Change the position, the tilt, and the curvature of retinas, and increase the variability of retinas

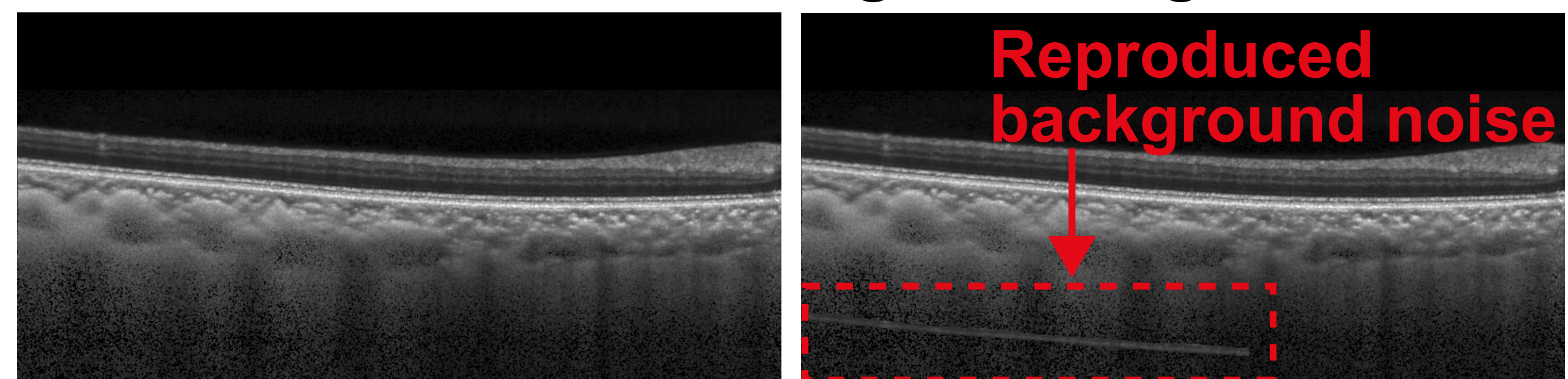


Before FDDA

After FDDA

PRLC

Reproduce the background noise, and reduce false detection in the background region

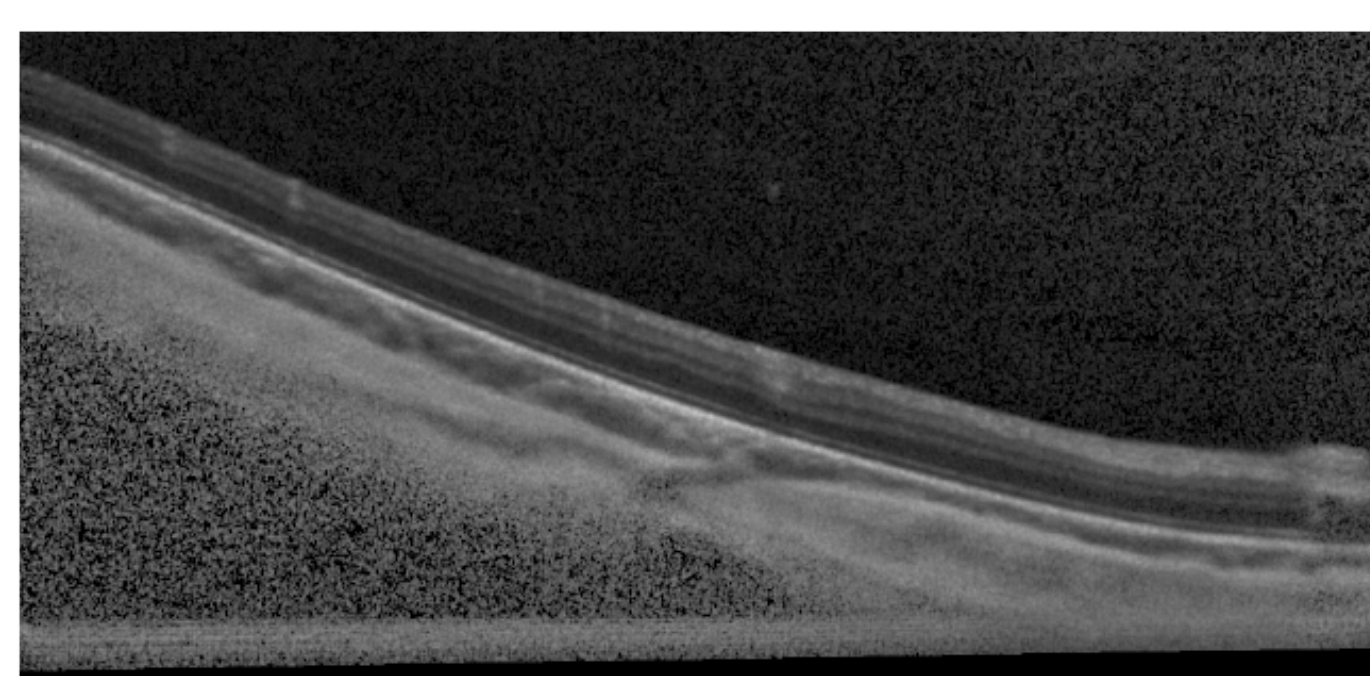


Before PRLC

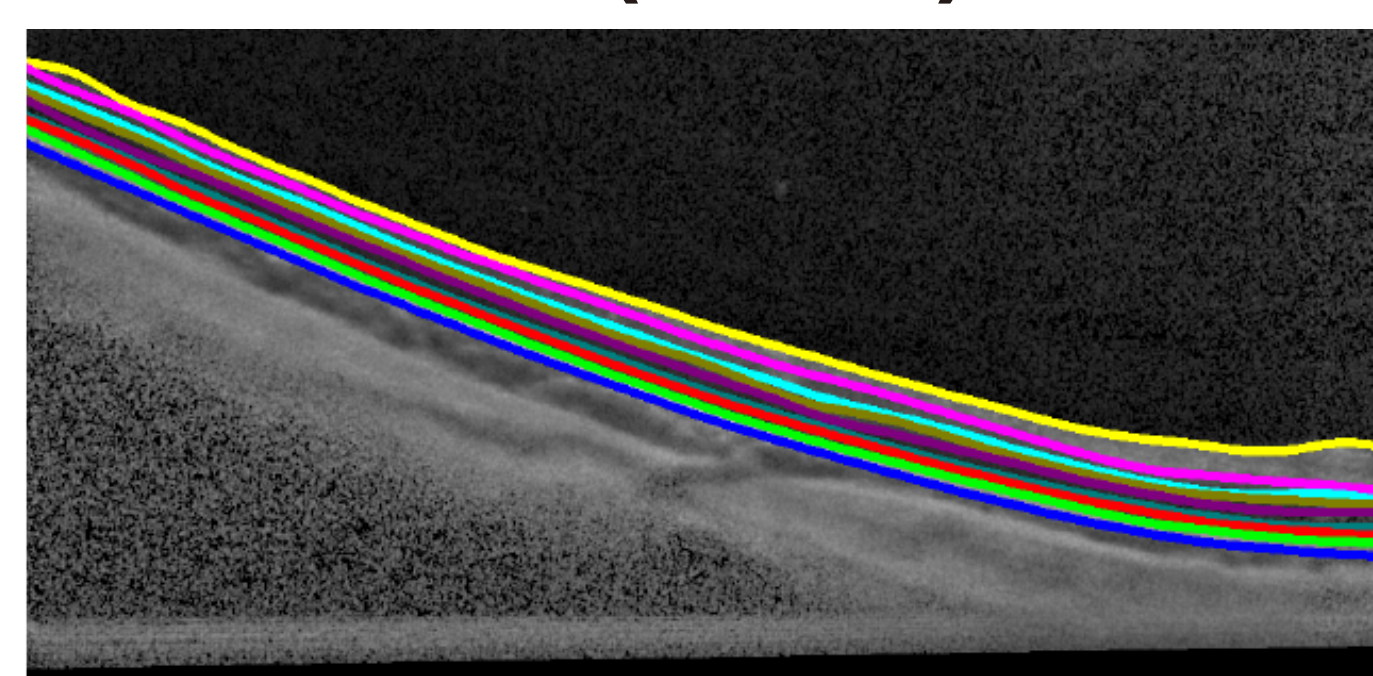
After PRLC

Experimental Results

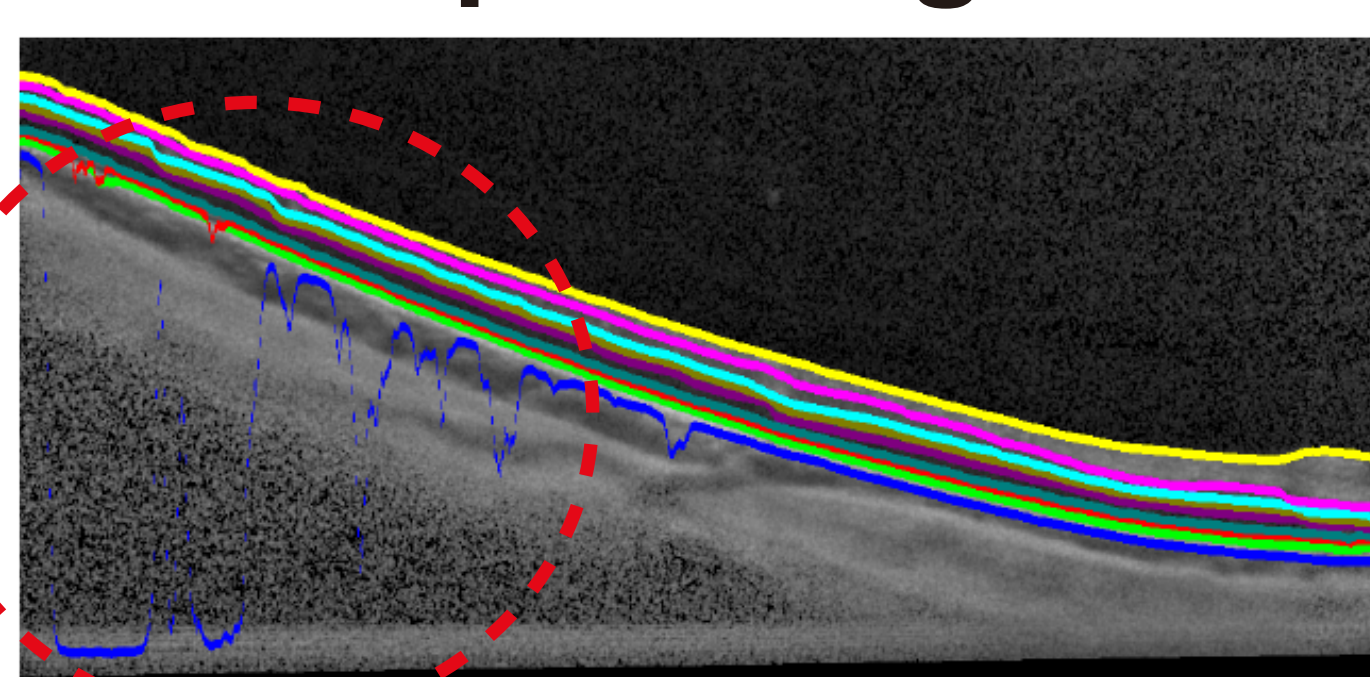
- Evaluate the accuracy by introducing FDDA and/or PRLC to FCBR [1] and SASR [2]
- Use OCT MS and Healthy Control (MSHC) dataset [3] and Duke Cyst DME (Duke DME) dataset [4]
- Evaluate Mean Absolute Distance (MAD) between the ground truth and detected boundaries



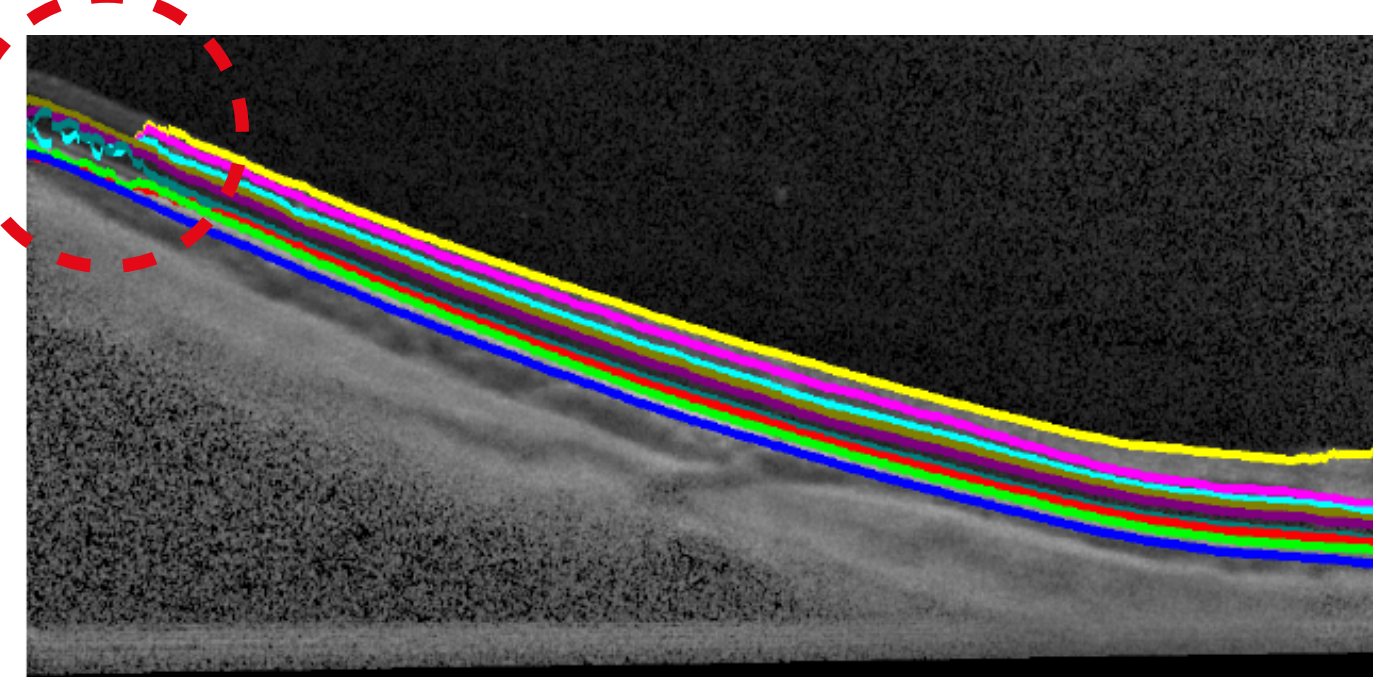
Input image



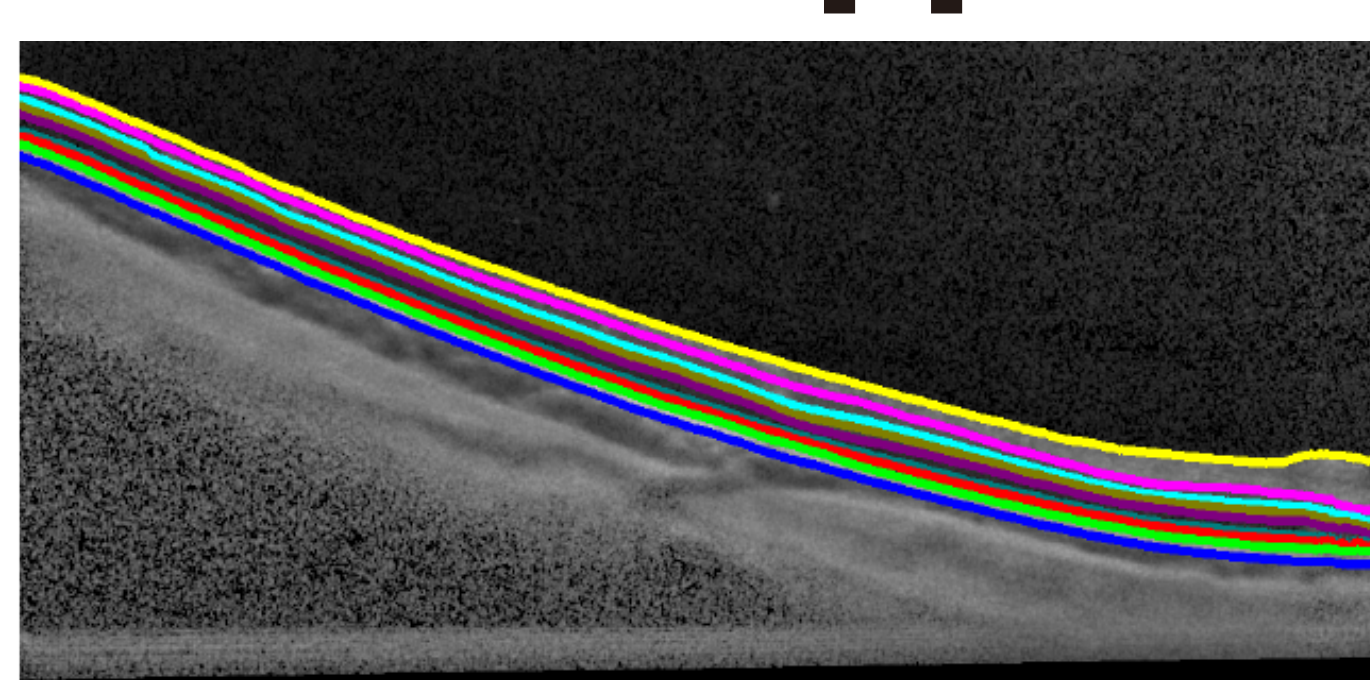
Ground truth



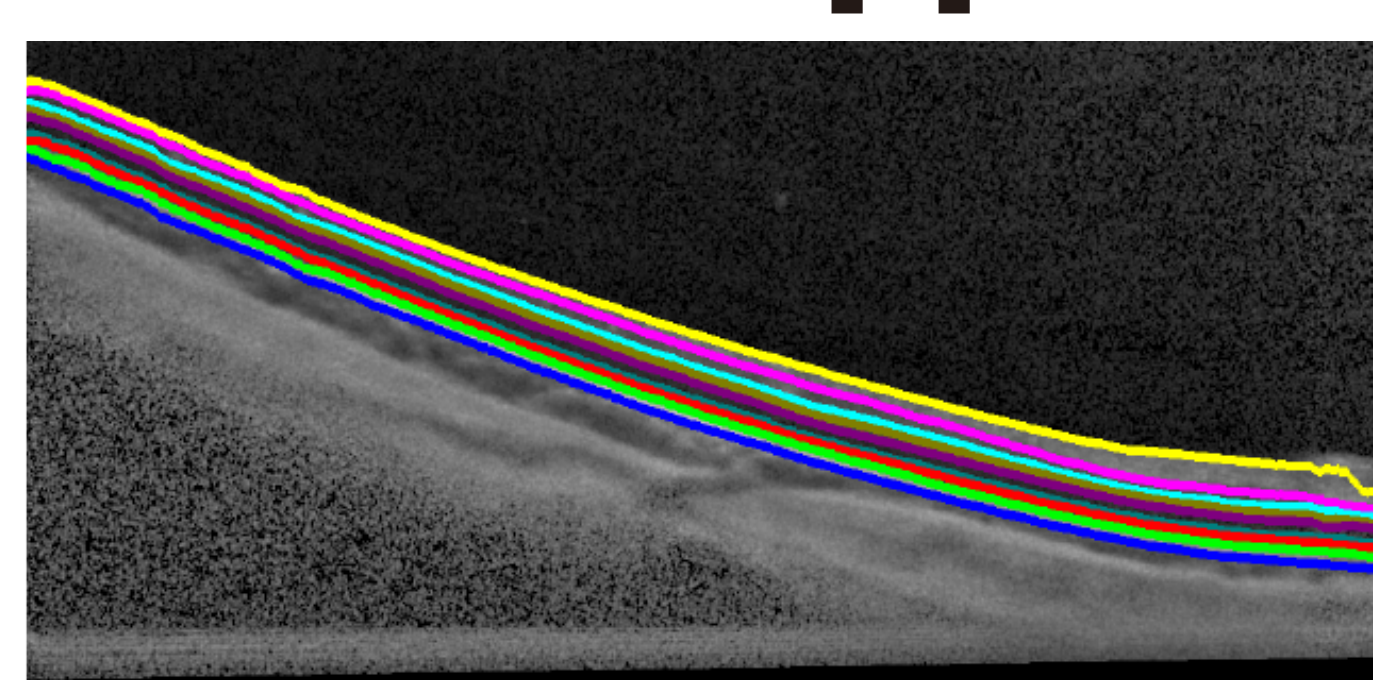
FCBR [1]



SASR [2]



FCBR [1]
w/ FDDA and PRLC



SASR [2]
w/ FDDA and PRLC

| Method | Flattening | MSHC | Duke DME |
|------------------|------------|-------------|-------------|
| FCBR [1] | ✓ | 2.92 | 6.59 |
| FCBR [1] | | 3.87 | 6.94 |
| w/ RandomAffine | | 3.76 | 6.44 |
| w/ CutMix [5] | | 3.52 | 6.68 |
| w/ FDDA | | 2.92 | 6.04 |
| w/ PRLC | ✓ | 3.16 | 6.32 |
| w/ FDDA and PRLC | | 2.84 | 5.97 |
| SASR [2] | | 2.87 | 6.54 |
| SASR [2] | | 3.05 | 6.34 |
| w/ FDDA | | 2.92 | 5.84 |
| w/ PRLC | | 2.99 | 6.10 |
| w/ FDDA and PRLC | | 2.90 | 5.83 |

[1] Y. He et al., "Fully convolutional boundary regression for retina OCT segmentation," Proc. MICCAI, pp. 120--128, Oct. 2019.

[2] H. Liu et al., "Simultaneous alignment and surface regression using hybrid 2D-3D networks for 3D coherent layer segmentation of retina OCT images," Proc. MICCAI, pp. 108--118, Sept. 2021.

[3] Y. He et al., "Retinal layer parcellation of optical coherence tomography images: Data resource for multiple sclerosis and healthy controls," Data Brief, vol. 22, pp. 601--604, Feb. 2018.

[4] S.J. Chiu et al., "Kernel regression based segmentation of optical coherence tomography images with diabetic macular edema," Biomed. Opt. Express, vol. 6, no. 4, pp. 1172--1194, April 2015.