Analysis of pixels in the region of interest using efficient segmentation methods and heat prediction for focused ultrasound interventions.

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Abstract— Lesion detection is a challenging task in the field of cancer imaging. In this research paper three efficient segmentation techniques are discussed to find the accurate Region of Interest (ROI). Image of liver cancer is taken for analysis. A new heat prediction method has been proposed and pixel wise heat prediction is done after applying the best method of segmentation. The heat prediction is done for High Intensity Focused Ultrasound (HIFU) interventions to treat cancer tissue by applying various ranges of heat intensities to ablate the tumor. The heat to be applied is compared for basic Pennes Bio-heat transfer equation (PBHTE) and the proposed heat prediction method.

Keywords— Pennes bio-heat transfer equation, Threshold based segmentation, Active volume contour method, Level set segmentation.

I. INTRODUCTION

HIGH intensity focused ultrasound (HIFU) is an imaging modality that provides cancer tissue removal by applying appropriate heat to the detected Region of Interest (ROI). Prediction of heat to be applied for HIFU treatment of abdominal organ like liver affected by tumor using Pennes Bio-heat heat prediction method considers the blood perfusion term as a constant. But the blood vessels passing through the liver carry away the heat to be applied to treat the affected area. Hence complete necrosis cannot be achieved. Also medical images are affected by intensity inhomogeneity, weak boundary, noise and the presence of similar objects close to each other. Segmentation of the tumor region from the liver is challenging.

A. Segmentation

Segmentation is the preprocessing step in any tumor detection process. In a heat treatment like HIFU the tumor region is segmented first for treatment planning. So proper segmentation of tumor region is important. A very basic segmentation method is intensity based segmentation which is otherwise called as threshold based segmentation. Thresholding type of segmentation can be done either locally or globally. In this research paper global type of segmentation is used for detection of tumor.

The tumor region is distinguished from the background by comparing with the threshold value chosen and then uses binary partition to segment the image. The threshold value is chosen such that the pixels that pass the threshold value are considered as the tumor object pixel and they are assigned with a binary value 1. Other pixels that do not pass the threshold value are assigned with a value 0 and they are the background pixels [1]. The most basic morphological operations used are dilation and erosion. The result of dilation is that, the output pixel is the maximum value of all the pixels in the input pixel's neighborhood. In a binary image, if any of the pixels is set to the value 1, the output pixel is set to 1, and for erosion, the value of the output pixel is the minimum value of all the pixels in the input pixel's neighborhood [2]. Canny edge detection method is a modification of Sobel method [3]. Canny edge detector implements Gaussian in its method to reduce the effect of noise during edge detection. Canny method provides sharpen edge detection compared to other edge detection methods [4]. Another popular method to segment medical images is the Chan Vese Active contour model otherwise called as Active contour model [5]. This method easily identifies the interior contours and also the objects whose boundaries are not defined by gradient. A classical snake model is an edge detector which detects the edged based on the gradient value of the image [6]. The initial contour detection is improved by Active contour model. This model works well for intensity inhomogeneity images [7]. Similar to active volume contour method, level set segmentation method is used successively for liver tumor segmentation with better preservation of details [8].

B. Similar Research

Various techniques for automatic segmentation of tumor in human liver are discussed by Vinita Dixit and Jyotika Pruthi [9]. When comparing the results of the proposed research with

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relevant papers, the base temperature is taken as 37^{0} c by taking the standard value as absorption coefficient for human tissue. Also the temperature at the highly focused region is 65^{0} c in average

and in the off focus regions the temperature is $42^{\circ}c$ [10]. In the proposed research paper the base temperature of human tissue is taken as $37^{\circ}c$ for simulation. The absolute highest temperature measured for a single pixel was 97.8°C [11]. In reference paper [12] the author has discussed that good segmentation results were obtained by processing the intensity band of image.

C. Heat prediction by various thermal models for HIFU

After segmentation, pixel wise heat prediction is done for the segmented region. The heat transfer in the tissue and the temperature rise is based on Pennes Bio-Heat Transfer Equation (PBHTE) [13]. Thus the temperature and thermal dose to be applied to the region of interest are calculated. The physical phenomena of the living tissues are studied by the Bio-Heat Transfer Equations (BHTE). The tradition and the basic one is the Pennes bio-heat transfer equation. Other thermal models of bio-heat transfer are the extended and modified versions of the original work of Pennes. The Pennes bio-heat transfer equation are the and modified transfer equation for blood perfused tissues is written as,

$$(\rho C_{\rho})_{t} \frac{\partial \mathbf{T}t}{\partial t} = \nabla \cdot \left(K_{t} \nabla T_{t} \right) + q_{p} + q_{m}$$
(1)

Where $q_{p,} q_{m,} \rho$, $(C_{\rho})_{t,} T_{t}$, K_{t} , t are the heat convention, metabolic heat transfer, tissue density, specific heat of tissue, temperature of tissue, thermal conductivity and time respectively. The advantage of PBHTE is that it predicts temperature fields and it is used in hyperthermia modeling. The limitation of PBHTE is that it does not consider the effect of the direction of blood flow. In PBHTE the blood perfusion term is proportional to temperature difference between two blood streams. This limitation is overcome by Wulff continuum model. In Wulff model the blood perfusion term is made proportional to the temperature difference between blood and tissue [14]. Wulff's equation is given as,

$$(\rho C_{\rho})_{t} \frac{\partial \mathbf{T}t}{\partial t} = \nabla \cdot (\mathbf{k}_{t} \nabla \mathbf{T}_{t}) - \rho_{b} V_{h} C_{b} \nabla T_{b} - \nabla H_{b} \nabla \phi$$
(2)

Where V_h , H_b , ρ_b , C_b and T_t are local mean blood velocity, specific enthalpy of blood, density of blood, specific heat of blood and tissue temperature respectively. The disadvantage of this method is that the local blood mass flux is hard to determine. The disadvantage of Pennes bio-heat model is that it neglects the effect of blood flow within the tissue. To overcome this, in Klinger continuum model the convective heat caused by blood flow in the tissue was considered [15].

Klinger continuum model is otherwise called as modified Penne's model equation and it is written as,

$$(\rho C_{\rho})_t \frac{\partial \mathbf{T}_t}{\partial t} + (\rho C)_b V_0 \nabla \mathbf{T}_t = k \nabla^2 T_t + q_m$$
(3)

Where k_t , T_t , q_m and V_0 are the thermal conductivity, tissue temperature (convective heat caused by blood flow inside the tissue), metabolic heat transfer and the non-uniform velocity field respectively. Based on the discussion of the blood and tissue parameters [16], [17] and their values by comparing the Pennes BHTE, Wulff and Klinger, the proposed model of heat equation is formed.

II. PROPOSED HEAT EQUATION

To overcome the convective heat transfer problem and to predict the temperature in an efficient way, it is proposed to implement thermal dose and temperature prediction method based on varying blood perfusion.

A. New heat prediction equation by adding a parameter dynamic viscosity

The blood perfusion rate (ω_b) and the dynamic viscosity of blood (μ) values are added in the calculation of thermal dose for the proposed model. In the PBHTE the effect of blood flow within the tissue is neglected and in the proposed algorithm the perfusion rate and viscosity terms are taken into consideration [18]. Equation of the proposed algorithm is,

$$(\rho C)_t \frac{\partial Tt}{\partial t} = k_t \nabla^2 T_t - (\rho C)_b V_h \nabla T_t - (\rho C)_b \nabla T_t(\omega_{b-}\mu) + q_m \qquad (4)$$

Where V_h = 10.5 m/s is the average blood velocity, $\omega_b = 0.5$ kg/m³s is the perfusion rate of the blood flow and μ = 0.004 kg/ms is the viscosity of blood.

III. RESULTS AND DISCUSSION

The input image of a tumorous liver is taken for analysis. The preprocessing stage before prediction of heat for tumor tissue is segmentation. A perfect segmentation technique is very important for finding the tumor region accurately. Complete ablation of tumor cells avoids recurrence of the cancer. In this research paper three methods to segment liver tumor targeted to support HIFU ablation are discussed. The results of various segmentation methods are analyzed.

A. Healthy and tumor pixels in the ROI

First the input image is segmented using threshold based segmentation. The result of segmentation by intensity based threshold segmentation is shown in Fig 1. The figure shows the stages of segmentation done. Finally the ROI is obtained which is marked. There are totally 3078 pixel intensities in the segmented region by threshold method.



Fig 1. ROI identified by threshold based segmentation

Out of which 156 are healthy pixels and they lie in the intensity range 200 to 255. The remaining 2922 pixels are tumorous. Therefore 5.07% of pixels are healthy and 94.93% of pixels are tumorous. Next the input image is segmented using Active contour segmentation. The stages of the segmentation are shown in Fig 2.



Fig 2. ROI identified by Active contour segmentation

There are totally 2725 pixels in the segmented region by threshold method. Out of which 92 are healthy pixels, which lie in the intensity range 200 to 255. The remaining 2633 pixels are tumorous. Therefore 3.38% of pixels are healthy and 96.62% of pixels are tumorous. Next the input image is segmented using Level set segmentation. The stages of the segmentation are shown in Fig 3.



Fig 3. ROI identified by Active contour segmentation

The region segmented using Active contour method is small compared to the threshold method of segmentation. The number of heathy pixels identified in the tumor region is very low for the Active contour method and therefore less number of healthy pixels is affected by heat during treatment. The level set method has segmented the tumor region with 2842 pixels. Out of which 114 are healthy pixels and 2728 pixels are tumorous. Therefore 4.01% of the region in ROI is healthy and the remaining 95.99% are tumorous. Table I shows the size of the ROI, Number of tumor and healthy pixels in the ROI based on range of pixel intensities and the average intensity of pixels in the ROI.

Table I. Analysis of the Region of interest by various segmentation methods.

Segmentation method	Average intensity of pixels in the ROI	Size of ROI	Number of tumor and healthy pixels in the ROI based on range of pixel intensities			
			200 to 255	100 to 200	0 to 100	
Threshold based segmentation	153.7297	3078	156	2578	344	
Chan Vese Active contour Segmentation	156.8969	2725	92	2402	231	
Level set segmentation	155.5609	2842	114	2486	242	

From the above Table Active contour segmentation has segmented the tumor with less size of ROI and so very less number of healthy pixels are identified in the tumor region. But the other two methods have not segmented the tumor properly by not accounting the curves in the tumor region.

Table II. Percentage of tumor and healthy pixels in ROI

Segmentation method	Percentage of tumor and healthy pixels in the ROI based on range of pixel intensities				
	200 to 255	100 to 200	0 to 100		
Threshold based segmentation	5.07	83.75	11.18		
Chan Vese Active contour Segmentation	3.38	88.15	8.47		
Level set segmentation	4.01	87.47	8.52		

Table II shows the percentage of the healthy and tumor pixels in the total tumor region in three different intensity ranges. 200 to 255 which is the healthy portion, 100 to 200 which shows the region moderately affected by tumor and finally 0 to 100 shows the region highly affected by tumor. The number of healthy pixels in the tumor region for various segmentation methods is plotted in Fig 4.



Fig 4. The number of healthy pixels in the ROI for various segmentation techniques.

The plot for the number of tumor pixels for various segmentation methods are shown in Fig 5.



Fig 5. The number of tumor pixels in the ROI for various segmentation techniques.

B. Atlas based heat prediction

The result of heat predicted by PBHTE and Proposed heat prediction model are tabulated in Table III. An atlas is formed for all the pixel intensities from 0 to 255. 0 represents black which is highly tumorous and 255 represents white pixel ehich is healthy pixel. The heat predicted by PBHTE for the healthy pixel is 16.50° c and that of the proposed model is 36.74° c. The heat prediction for the healthy pixel intensity by proposed heat prediction model is more similar to the normal body heat which is 37° c. From the Table III it is clear that the necessary heat for ablating the tumor tissue is predicted by the proposed heat prediction model. In the table below the predicted temperature values above 110° c are not shown. The temperature within the tissue should be within the range $55^{\circ}c$ to 85° c to destroy the tumor tissue completely [19]. As per the experimental results proven by Solovchuk [20] for temperature above 85°c, preboiling or cavitation occurs.

IV. CONCLUSION

Three different segmentation methods are analyzed to segment the tumor region in a MRI image of liver tumor. Chan Vese Active contour segmentation has segmented the tumor effectively as the number of healthy pixels in the tumor region is very low compared to the other two segmentation methods. Also from the atlas based temperature predicted by the proposed heat prediction method, the values of temperature predicted are more relevant to the similar research done in HIFU. This new temperature prediction method can be extended for 3D images and for tumor in other organs like brain and lungs.

Table III. The atlas of temperature values by PBHTE and Proposed heat prediction model.

Pixe1 Intensity	PBHTE	Proposed heat	Pixel Intensity	PBHTE	Proposed heat	Pixel Intensity	PBHTE	Proposed heat
01	107 1244	109 7473	146	33 2458	58 1987	201	21 1105	43 3831
07	103.0225	107 7810	147	32,8608	57 7776	201	20.0883	43 2152
93	99 2009	105.892	148	32,4859	57 3651	202	20.9005	43.0496
94	95.634	104.0736	140	32 121	56 9609	203	20.7496	42 8862
05	02.200	107.3228	150	31 7656	56 5647	204	20.7490	42.0002
06	80 1755	100.6363	151	31 4103	56 1763	205	20.0001	42.725
07	86 2455	00.0107	151	31.0810	55 7055	200	20.0105	42.500
90	83,4026	07.4428	152	30.753	55,4221	207	20.4050	42.4091
00	80.0025	05 0200	153	30,4322	55.0558	200	20.2945	42.2045
100	78.462	01.1602	155	30 1104	54.6966	210	20.1031	41.0506
101	76 1504	03.0583	155	20.8142	54 3442	210	10 0712	41.9500
101	73 084	01 6047	157	29.5142	53 0083	211	19.9712	41.6548
102	71 0263	91.0947	158	29.0104	53,6580	212	19.8007	41.5007
103	60.0775	90.3702	150	29.2237	52 2350	213	10.6622	41.3037
104	69 1009	07.0662	1.59	20.7410	52.0099	214	19.0023	41.004
105	66 2750	07.0003	161	20.0040	52,6777	215	19.3024	41.225
100	64 7002	05 5122	162	20.3930	52.0777	210	10.2660	41.0655
107	62 12/1	84 2014	162	20.1292	52.0520	217	19.3009	40.9474
100	03.1241	04.3914	103	27.6170	51 7497	210	19.2/12	40.6112
109	60.176	83.3030	104	27.01/8	51./48/	219	19.177	40.0707
110	60.0027	82.2480	100	27.3707	51.1564	220	19.084	40.3438
111	57.4024	81.225	100	27.1289	50.069	221	18.9924	40.4125
112	57.4954	80.2315	10/	20.8925	50.5045	222	18.9021	40.2828
115	30.2412	79.2008	108	20.0011	50,2050	225	18.815	40.1347
114	53,0455	/8.329/	109	20.4547	50.000	224	18.7232	40.0281
115	53.8972	77.5241	1/0	20.2131	30.032	225	18.0383	39.9031
110	52.799	/0.3341	1/1	25.9962	49.7627	220	18.5551	39.7795
11/	51./462	/3.6/36	1/2	25.7857	49.4979	227	18.4688	39.6575
118	30.7302	/4.8303	1/3	25.5757	49.2370	228	18.3830	39.3300
119	49./000	74.022	1/4	25.3/19	48.9815	229	18.3030	39.4173
120	48.855	73.2293	1/5	25.1722	48.7296	230	18.2226	39.2993
121	47.9394	/2.45/5	1/6	24.9765	48.4819	231	18.1427	39.1827
122	47.0779	/1./038	1//	24./84/	48.2381	232	18.0039	39.0074
123	40.2487	/0.9/36	1/8	24.5967	47.9982	255	17.986	38.9535
124	43.43	/0.2601	1/9	24.4123	47.7622	234	17.9092	38.8408
123	44.0802	09.3043	180	24.2510	47.5298	230	17.8554	38.7294
120	43.938	08.8804	181	24.0543	47.3012	230	17.7585	38.0192
127	43.2219	68.225	182	23.8803	4/.0/61	257	17.6846	38.5103
128	42.3300	07.3799	185	23.7097	40.8343	238	17.6206	38.4023
129	41.803	00.9303	184	23.3422	40.0303	239	17.3390	38.2939
130	41.21/8	00.5508	185	23.3778	40.4214	240	17.2001	38.1905
131	40.594	65.7559	186	23.2165	46.2098	241	17.3981	38.0862
132	39.9907	00.1001	18/	23.0381	40.0014	242	17.3280	37.983
155	39.4068	04.378	188	22.9026	45.7961	243	17.20	37.881
134	38.8415	64.0189	189	22.7498	45.5958	244	17.1923	37.78
150	38.294	03.4/2/	190	22.3998	40.3940	240	17.1205	37.0801
136	37.7634	62.9388	191	22.4524	45.1982	246	17.0592	37.5812
137	37.2491	02.4108	192	22.3077	45.0048	247	16,0000	37.4854
158	30./302	01.9064	193	22.1604	44.8141	248	16.9292	37.3800
139	30.2003	01.40/1	194	22.0256	44.6262	249	16,8604	37.2907
140	50./960	00.9188	195	21.8881	44.441	250	16.8023	37.1939
141	50.3404	60.4409	196	21.753	44.2584	201	16./399	57.102
142	34.89/4	39.9753	197	21.6202	44.0784	252	10.0/83	37.0091
143	34.4009	39.5155	198	21.4896	43.9009	253	10.0173	30.9171
144	34.0485	59.0673	199	21.3611	43.7259	254	16.5571	36.826
145	55.0416	58.6285	200	21.2348	45.5533	200	16.4975	30./359

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