# **Extrapolation of Missing Craniofacial Skeletal** Structure via Statistical Shape Models Collabortive Laboratory for

BIGSS

Biomechanical- and Image-guided Surgical Systems

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#### Introduction

- Using publicly available CT Imagery (TCIA), we have created a Statistical Shape Model (SSM) of the human skull and skin of the head
- Using the SSM, we are able to extrapolate missing anatomical craniofacial skeletal structure
- A method for synthetic patient disfigurement was also designed for future use in SSM evaluation





Synthetic Removal of Structure and Extrapolation





#### **The Problem**

- We propose that the SSM-based extrapolation may be used for surgical planning in Face Transplant Surgery
- Without a pre-trauma medical scan of the patient, true cephalometrics are unknown
- Utilize extrapolated skull of patient to a more accurate estimate of cephalometrics, for a surgical plan that yields a higher probability of post-operative success

## The Solution

- SSM Construction ullet
  - Manual segmentation of the skull and skin of the template image
  - Deformable volumetric registration (Diffeomorphic via SyN, ANTs); Bootstrapped via mean displacement field
  - Template mesh creation and deformation to create all training meshes
  - PCA on training mesh vertices
- Extrapolation
  - SSM-to-Patient registration via a modified Active Shape Model search
    - $R(s, \boldsymbol{\theta}, \mathbf{t}, \boldsymbol{\alpha}) = D_{\text{mean}}^{(\text{surface})}(T(M_P; s, \boldsymbol{\theta}, \mathbf{t}), (\boldsymbol{\mu}_A + \mathbf{U}_A \boldsymbol{\alpha}, F_A))$



A Synthetic Disfigurement

(Top) Face Transplant Candidate (Middle) Patient Registered to SSM (Bottom) Heat Map of Surface Error Between SSM and **Original Regions of Patient** 

(mm)

### **Outcomes and Results**

- Leave-one-out analysis used to evaluate SSMs
- Small surface distances about the neurocranium bias the mean surface distance metric
- Mean Surface Distance of 1.3 mm, Maximum Surface Distance of 7.6 mm (Bone)
- Extrapolation performed on known data, non-smooth transitions observed between the "known" and "unknown" regions



# **Future Work**

- Finer CT resolution (1 mm)
- Other extrapolation approaches (e.g. Thin Plate Spline)
- Better segmentation; multiple segments
- Comparison of several Patient-to-Atlas registration techniques
- PCA applied to deformation fields
- Evaluation of incomplete disfigurement knowledge on SSM estimation Lessons Learned

 $R(s, \boldsymbol{\theta}, \mathbf{t}, \boldsymbol{\alpha})$  subject to  $|\boldsymbol{\alpha}_i| \leq 3\sigma_{A,i}$  for  $i \in \{1, 2, \dots, N_A\}$ argmin  $s \in \mathbb{R}, \boldsymbol{\theta}, \mathbf{t} \in \mathbb{R}^3, \boldsymbol{\alpha} \in \mathbb{R}^{N_A}$ 

- Approach 1: "Cut-and-paste" of the SSM estimate of the "missing region" into the patient mesh
- Approach 2: Perform regression by modeling the "known" and "unknown" regions with a multivariate Gaussian model

 $\widehat{\mathbf{m}}_{U} = \boldsymbol{\mu}_{U} + \mathbf{C}_{UK}\mathbf{C}_{KK}^{-1}\left(\mathbf{m}_{K} - \boldsymbol{\mu}_{K}\right)$  $= \boldsymbol{\mu}_U + \mathbf{U}_U \boldsymbol{\Sigma}_U \boldsymbol{V}_U^T \boldsymbol{V}_K \boldsymbol{\Sigma}_K^{-1} \mathbf{U}_K^T (\mathbf{m}_K - \boldsymbol{\mu}_K)$ 

- Synthetic Disfigurement •
  - Random displacement of mesh vertices, followed by Gaussian smoothing



- Design everything to be processed automatically
- Good visualization tools are worth the time investment Credits
- Robert Grupp: SSM pipeline, Extrapolation, Visualization  $\bullet$
- Hsin-Hong Chiang: Synthetic Disfiguration, ANTs Bootstrapping

#### **Publications**

Plan to submit to the *IEEE Medical Imaging Conference (MIC)* and the Workshop on Modeling and Monitoring of Computer Assisted Interventions (M2CAI)

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