

# Assessing Ventilator-Associated Pneumonia (VAP) Using Deep Learning



Computer Integrated Surgery II  
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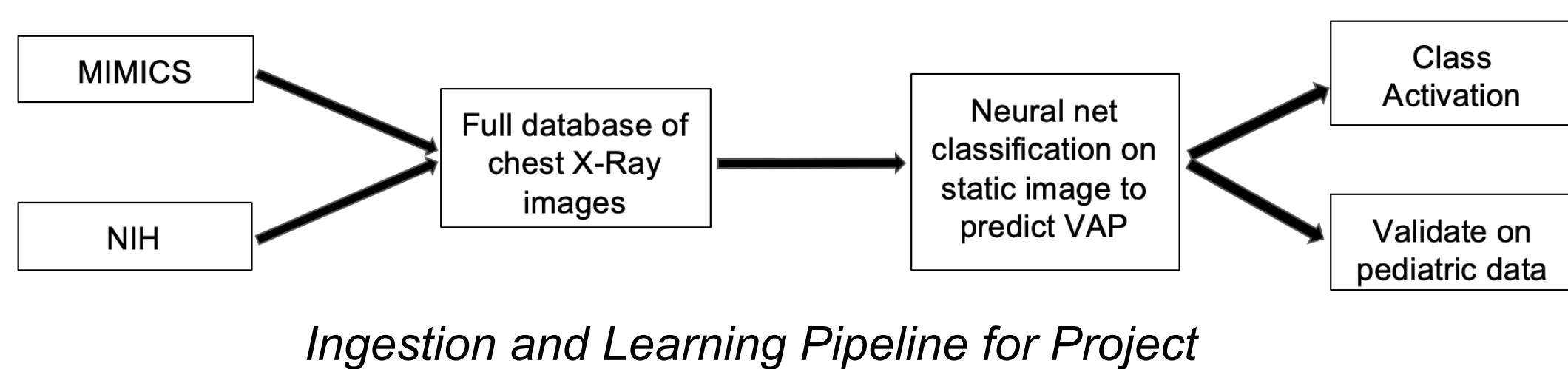
## Introduction

- There is currently a lack of machine-augmented techniques that can be applied in critical-care settings (ICU and PICU) to classify pneumonia
- To address this problem, I implemented several deep learning techniques to classify pneumonia with high accuracy and visualize the actual features on which the machine detected pneumonia
  - This was built with an adult chest X-ray pipeline, but can be applied to pediatrics (with enough data)

## Problem

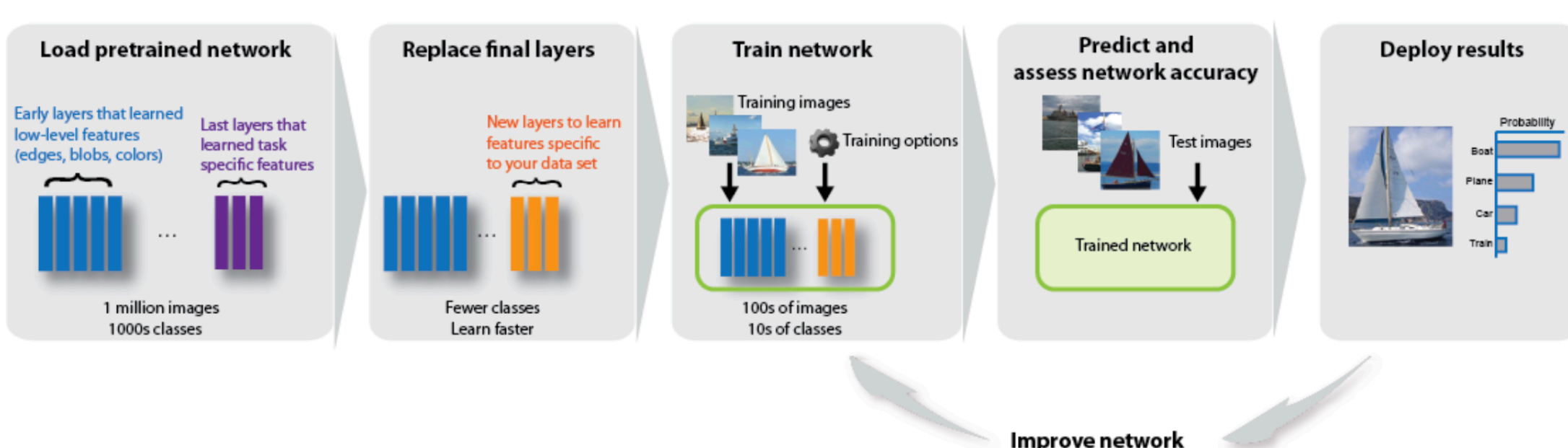
- Chest X-rays are the empirical standard in diagnosing pneumonia but are subject to trained radiologist diagnoses
- Mechanical ventilation is a critical, life-sustaining ICU therapy (more than half of patients ventilated within 24 hours) but results in increased mortality for many
- 10-20% of patients every year are diagnosed with VAP, and contracting VAP amplifies risk of mortality by 30%
- Radiologists are often unavailable to diagnose chest X-rays in real-time in critical-care settings
- Thus, there is a need for an automatic classifier to diagnose VAP in these situations

## The Solution



## Overview of Transfer Learning

### Reuse Pretrained Network

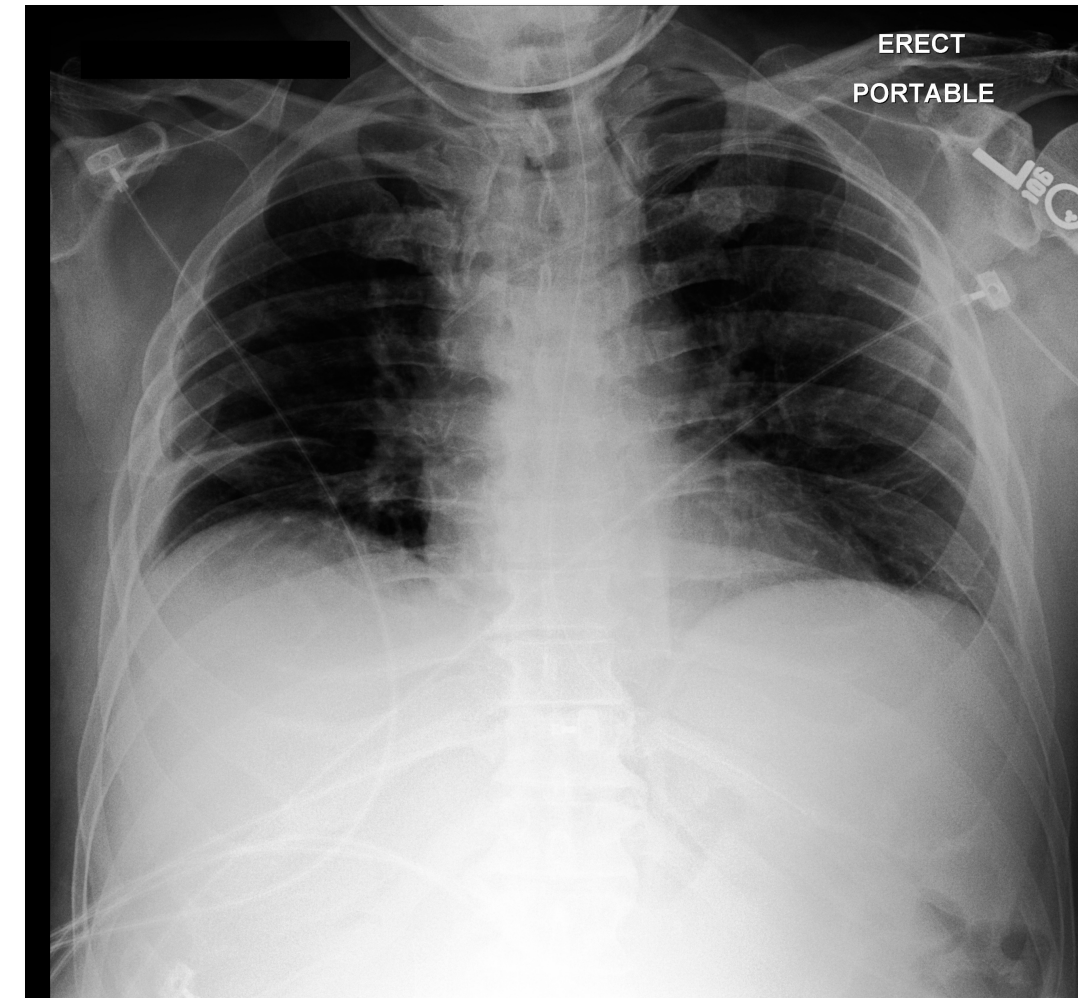


- First, assembled a pipeline for easy manipulation of publicly available data; able to sort data easily into model-ready inputs after assembly
- Built models off of existing pre-trained convolutional neural networks, and adjusted feature size and optimization accordingly, *example implementation is shown below*
- After training the model, ran class activation algorithms to display to physicians where feature extraction most occurs
- Models were tested and cross-verified across both datasets

### Network Parameters for Binary Classification

Loss Function	Binary Cross Entropy Loss
Optimization Function	SGD (stochastic gradient descent)
Output Activation Function	Probabilistic Softmax
Iterations	50
Epochs	10

## Outcomes and Results



Patient with Pneumonia

Class Activation Filtering



Achieved 94% accuracy on binary classification (trained on 65K images)

## Future Work

- I will be graduating and starting a full-time job in August, so cannot continue work on my own
- **Computational:** include applying deep clustering methods on top of the neural network to extract most relevant features
- **Experimental:** testing on a more robust set of pediatric patients (especially validating on patients who are specifically ventilated)

## Lessons Learned

- Generalization of convolutional neural networks derives a convenient way to train own datasets
- Publicly available time-series data is difficult to ingest
- Very accurate diagnosis of pneumonia can often depend on non-imaging data points

## Support by and Acknowledgements

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