

SPIE. MEDICAL IMAGING

MUSIIC
Research Laboratory

Stabilized Ultrasound Imaging of a Moving Object Using 2D B-mode Images and a Convolutional Neural Network

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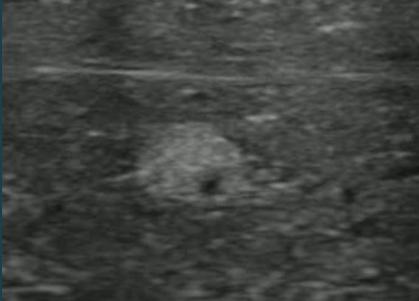
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Co-robotic ultrasound + tracking algorithm → **steady imaging**

Images are subject to physiological motions.	Stabilized imaging with the tracking algorithm.
	

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Outline



Challenge and Motivation	In a biopsy, compensate physiological motions and reduce musculoskeletal trauma for sonographers using co-robotic ultrasound
Methods	6-DoF motion estimation. A convolutional neural network is embedded to estimate out-of-plane motions . Joint velocities control.
Evaluation and Results	Feasibility of the tracking algorithm within simulation environments built with scans obtained on biopsy phantoms, pork , etc.
Discussion and Conclusions	Advantages. Limitations.

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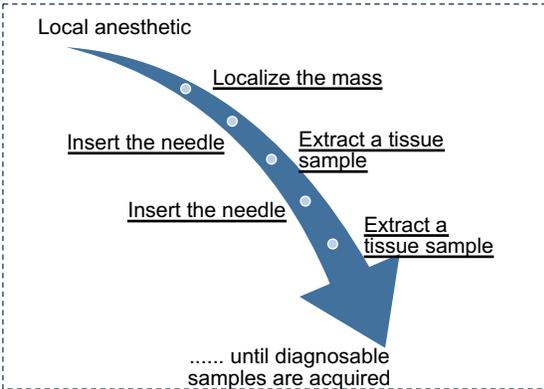
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Challenge: A Biopsy Procedure



- An ultrasound-guided biopsy



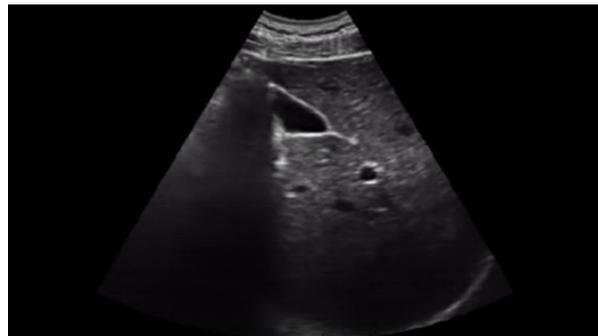
Ultrasound-guided liver biopsy on a 47-year-old female patient¹.

¹ Courtesy of <https://www.youtube.com/watch?v=2SIZOqJiU4>

Challenge: Physiological Motions



- Imaging of abdominal organs is subject to physiological motions:
 - Respiratory motion
 - Cardiac-induced motion
 - Patient's small movement
- Amplitudes of motions:
 - E.g. Shimizu et al.³ investigated liver tumor motion using high-speed MRI
 - 21 mm, 8 mm, 9mm in the SI, AP and lateral directions.



Ultrasound sequence of liver undergoing respiratory and cardiac - induced motion².

² Courtesy of <https://www.youtube.com/watch?v=NKDTNnvCtI4>

³ Shimizu, S., Shirato, H., Xo, B., Kagei, K., Nishioka, T., Hashimoto, S., & Miyasaka, K. (1999). Three-dimensional movement of a liver tumor detected by high-speed magnetic resonance imaging. *Radiotherapy and oncology*, 50(3), 367-370.

Challenge: Work-related Musculoskeletal Disorders (WRMSD)



Main causes of WRMSD⁵



An accumulation of repeated exposure to physical risk factors:



- Awkward or sustained postures



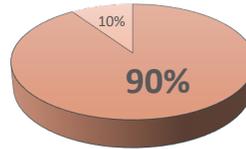
- Repetition
- Force



- Contact pressures

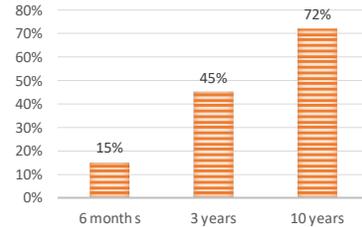
(Murphey, S., 2017).

2,963 participants in Evans *et al.*⁴



■ WRMSDs ■ No pain

SONOGRAPHERS WITH WRMSD



⁴ Evans, K., Roll, S., & Baker, J. (2009). Work-related musculoskeletal disorders (WRMSD) among registered diagnostic medical sonographers and vascular technologists: a representative sample. *Journal of Diagnostic Medical Sonography*, 25(6), 287-299.

⁵ Murphey, S. (2017). *Work related musculoskeletal disorders in sonography*.

Motivation



- **Robotic arm:**
 - force control, accuracy, repeatability
- **Co-robotic ultrasound**

In a biopsy procedure, **physiological motions** of the target is another problem to solve.



“Hand-over-hand control”

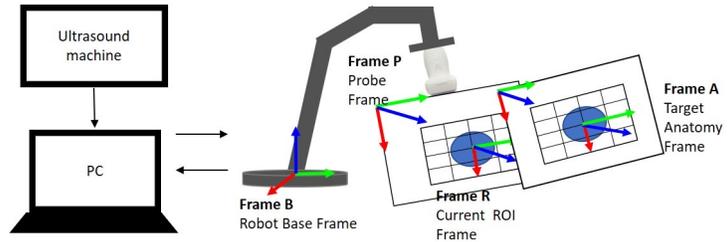


Respiratory motion

Proposed Method: System Setup



Co-robotic setup



Tracking algorithm for stable imaging

- In-plane motion: $\Delta g_{pr}(t) = g_{pr}(0) g_{pr}^{-1}(t)$
- Out-of-plane motion: $\Delta g_{ar}(t)$
- 6 degree of freedom (DoF) motion: $\Delta g_{p0p} = g_{pr}(0) (g_{pr}(t) g_{ar}^{-1}(t))^{-1}$
- Proportional control on SE(3) error

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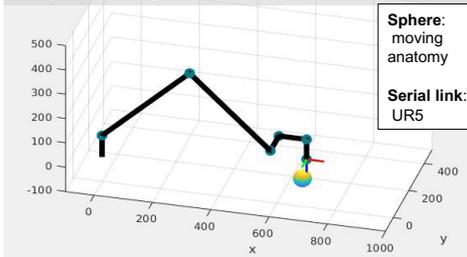
Proposed Method: Significance



A co-robotic ultrasound system with a tracking algorithm

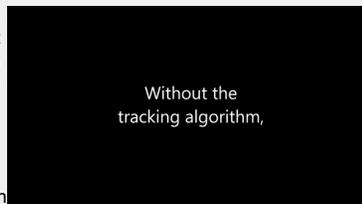
- **compensates physiological motions:**
 - keep track of the target frame
 - suppress motion artifact and enhance image quality
- **reduces musculoskeletal injuries for sonographers:**
 - use a robot for long-lasting procedures
 - integrate with force control
- **requires only B-mode images:**
 - apply to almost all commercial ultrasound machines

Have a robotic system to track the target during the biopsy



UR5 Robot motion simulation

Imaging comparison



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Outline



Challenge and Motivation

In a biopsy, compensate **physiological motions** and reduce **musculoskeletal trauma** for sonographers using **co-robotic ultrasound**

Methods

6-DoF motion estimation. A **convolutional neural network** is embedded to estimate **out-of-plane motions**. Joint velocities control.

Evaluation and Results

Feasibility of the tracking algorithm within simulation environments built with scans obtained on **biopsy phantoms, pork, etc.**

Discussion and Conclusions

Advantages. Limitations.

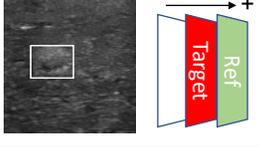
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Overview: Tracking Algorithm



Acquire target frame I_0 , and a reference image I_{ref} along the (+) direction



If using different probes

CALIBRATION

Step 1: acquire parallel B-scans across the tissue within a small volume.

Step 2: fine tune the CNN weights with a small learning rate.

g^*

$g(t)$

Controller

Joint velocity control on SE(3)

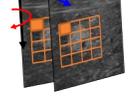
Current Image I_t

Image processing

Out-of-plane transformation



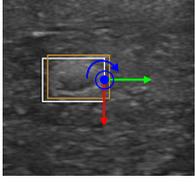
Elevational displacement for each patch using CNN.



Overall out-of-plane transformation by minimizing the reconstruction error using all patches.

Image processing

In-plane transformation



Template matching via NCC when no large rotation.

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Estimation of Out-of-plane Motion

(1)

Use a CNN to estimate the unsigned distance between two patches

(2)

Get the sign using both the target and reference frames

(3)

Fit the overall out-of-plane transformation using all patches

$$g_{ar} = \operatorname{argmin} \Sigma \|g_{ar} \vec{P}_{r,i} - \vec{P}_{a,i}\|$$

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Speckle Decorrelation

Speckle

- Granular appearance in ultrasound images
- Diffuse scattering in a resolution cell

Speckle decorrelation

- Imperfect focus along the elevational direction → neighboring patches are correlated
- Gaussian using RF signals and assuming Gaussian resolution cell

Conventional speckle decorrelation methods⁶:

- **RF signals** may not be accessible
- Hard to convert back to RF signals
- Rely on fully developed speckles

Our method **only requires **grayscale B-mode** images:**

- High **non-linearity** of the CNN
- “**Correlation**”

⁶ Gee, A. H., Housden, R. J., Hassenpflug, P., Treece, G. M., & Prager, R. W. (2006). Sensorless freehand 3D ultrasound in real tissue: speckle decorrelation without fully developed speckle. *Medical image analysis*, 10(2), 137-149.

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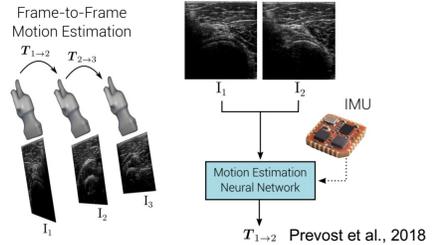
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CNN to Estimate Elevational Distance



Prevost et al.⁷ 3D freehand ultrasound estimation using **deep learning**

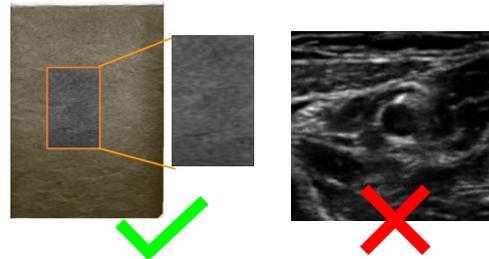
- Is used for tomography
- **Depends on anatomical features** of the specific part of the body (e.g. forearm)



In a tracking scenario, the target appearance varies.

A model invariant to the appearance of the masses.

Training data containing only **speckle noises** without anatomical features (e.g. vessels).

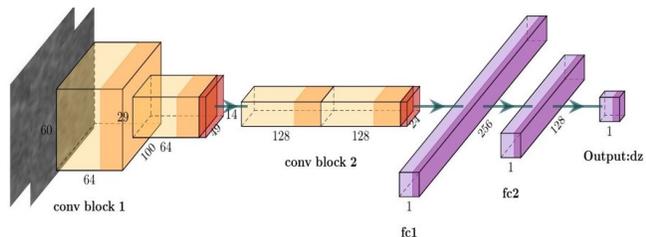


⁷ Prevost, R., Salehi, M., Jagoda, S., Kumar, N., Sprung, J., Ladikos, A., ... & Wein, W. (2018). 3D freehand ultrasound without external tracking using deep learning. *Medical image analysis*, 48, 187-202.

CNN Architecture



- A standard convolutional neural network
- # of parameters: ~ 2.7 million
- **Real-time** tracking. Less than **50 ms** on a PC with an NVIDIA GTX 1050 Ti GPU (use 16 pairs of patches)
- **Input:** two neighboring B-mode image patches
- **Output:** elevational distance between two patches



Conv block
Conv layer
Batch normalization
Conv layer
Batch normalization
Maxpooling

<u>Optimizer:</u> Adam
<u>Loss function:</u> Logcosh (more robust to outliers compared with MSE)

Estimation of Out-of-plane Motion

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Use a CNN to estimate the unsigned distance between two patches

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Get the sign using both the target and reference frames

(3)

Fit the overall out-of-plane transformation using all patches

$$g_{ar} = \operatorname{argmin} \Sigma \|g_{ar} \vec{P}_{r,i} - \vec{P}_{a,i}\|$$

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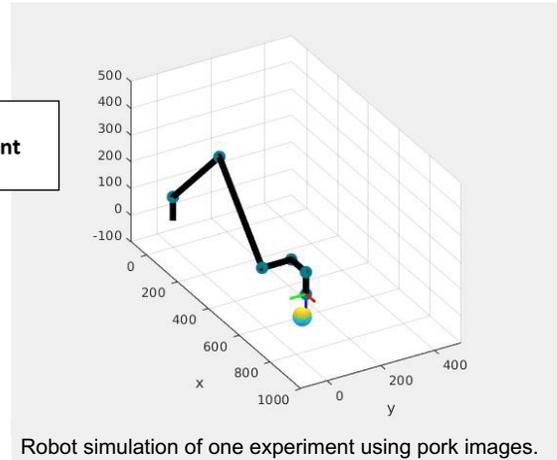
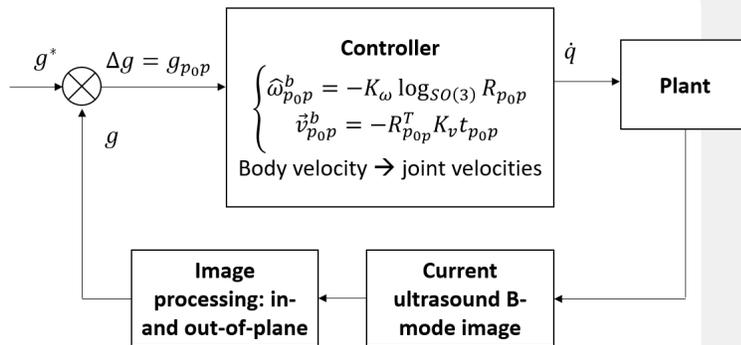
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Velocity Control on SE(3) Group



- Implement a proportional (P) controller with double-geodesic feedback on SE(3)⁸



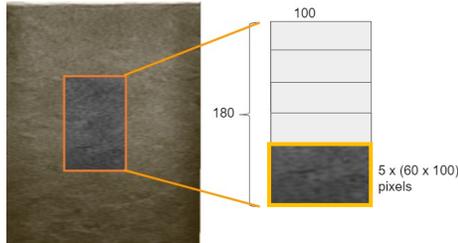
⁸ Bullo, F. and Murray, R. M., (1995). Proportional derivative (PD) control on the Euclidean group.

Data and Experiments



CNN Training Data

- **Patch size:** 60 x 100 pixels
- **Patches contain only speckle noises**
- Elevational displacement (ground truth) ranges from **0 to 1 mm** (close to the size of a resolution cell)



- Sonix-Touch Q+ Ultrasound machine (Ultrasonix Inc., Richmond, BC, CA)
- Probe: BK L14-5/38 linear, 10 MHz
- Phantoms: CIRS Elasticity QA phantom model 049 and 049A
- Ground truth: linear stage + a dial indicator (0.001mm)
- 12,000 pairs: 80% for training, 20% for validation
- 2,000 patches collected on the other phantom for testing

Data and Experiments

Data

- Sonix-Touch Q+ Ultrasound machine
- Probes:
 - (1) BK L14-5/38 linear; (2) C5-20/60 curvilinear
- Phantoms:
 - (a) CAE Blue Phantom tissue biopsy ultrasound training model
 - (b) Pork tenderloin

(a)
(b)

Motion Simulation

- Construct a volume using parallel scans
- Simulate cyclic motions
- Implement P control to track the moving target

$$x(t) = \frac{A}{2} - A \cos^{2n} \left(\frac{\pi t}{\tau} - \phi \right)$$

$$\alpha(t) = \theta \sin^2 \left(\frac{\pi t}{\tau} - \phi \right)$$

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Evaluation and Results: CNN Estimation



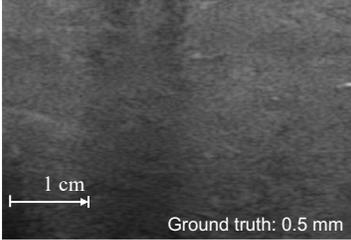
- 10 parallel scans with 0.1 mm separation
- 756 patches in one image (slide by 20 pixels along x, y axes)
- Accurate estimations in range 0.2 to 0.7 mm
- Poorer estimations near 0 or 1 mm (near the size of the resolution cell)

Estimations of 756 patches

Mean absolute percentage error

Ground truth/mm	Mean abs %
0.1	10.56
0.2	1.62
0.3	0.49
0.4	0.29
0.5	0.95
0.6	2.23
0.7	0.25
0.8	5.4
0.9	9.99

Original image



Absolute error in mm



- Label each pixel with the absolute error computed at the nearest patch center
- Dark regions correspond to non-fully developed speckles (“bad” regions for speckle decorrelation)

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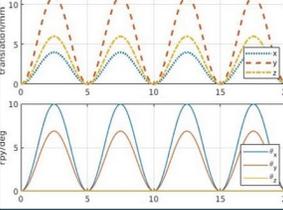
Evaluation and Results: Biopsy Phantom



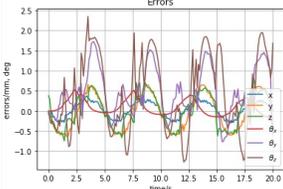
Target view



Target motion

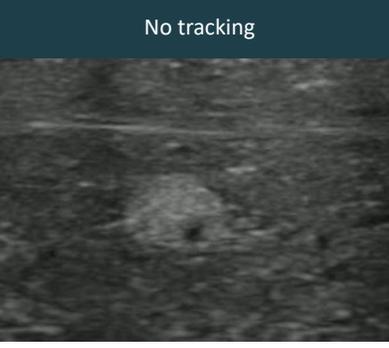


Errors over time

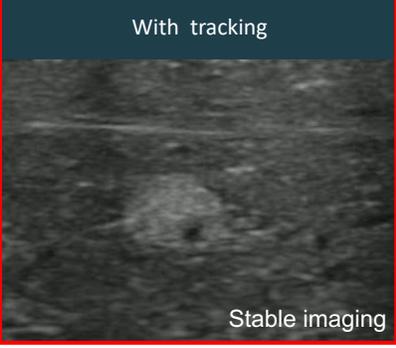


- **Target motion:**
 - 4, 11 and 6 mm along axial, lateral and elevational axes
 - 10 and 6 degree about x and y axes (w/o in-plane rotation)
- **Error:**
 - Translations: less than 0.7 mm
 - Rotations: less than 2 degree
- No fine tuning. Same linear probe used for CNN training.

No tracking



With tracking



Stable imaging

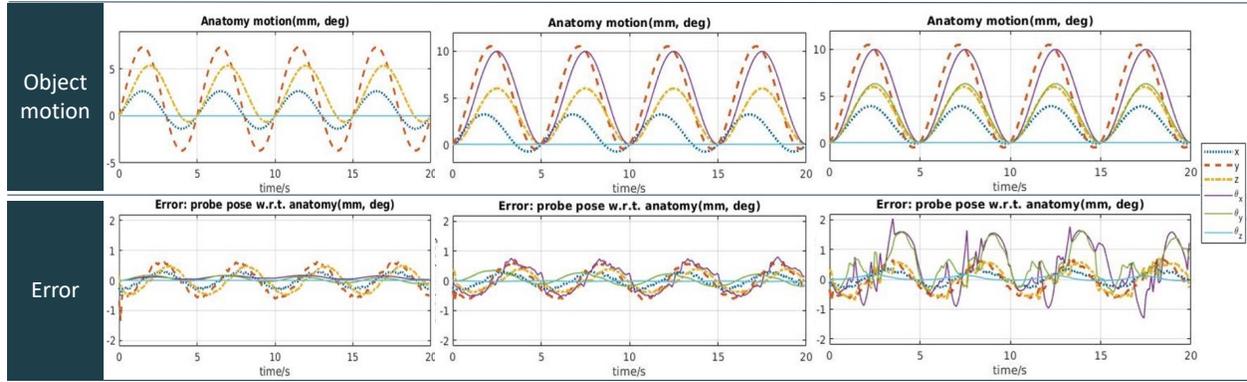
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Evaluation and Results: Biopsy Phantom



- **Target motion:**
 - 4, 11 and 6 mm along axial, lateral and elevational axes
 - Less than 10 degree about x and y axes (w/o in-plane rotation)
 - Different random phase angles
- **Low errors compared with the magnitudes of the motions.**



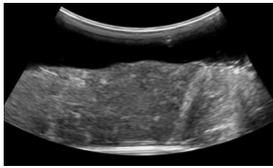
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Evaluation and Results: Pork Tenderloin

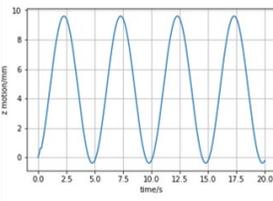


Target view

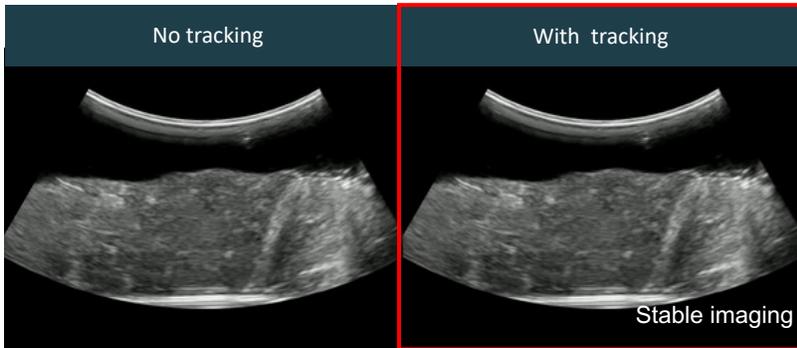
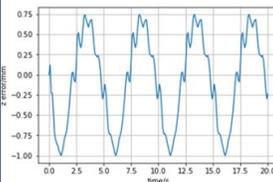


- **Target motion:**
 - 1-DoF elevational translation (amplitude 10 mm)
- **Error:**
 - Less than 1.05 mm
- Fine tuning using 400 pairs of patches. 40 epochs within 40 s (GPU)

Target motion



Error over time



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Discussion and Conclusions

Advantages. Limitations.

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Discussion and Conclusions



Verified the feasibility of a co-robotic ultrasound system:

- **Real-time Tracking** of a moving object using 2D B-mode images
- **Out-of-plane motion** estimation using CNN based on speckle patterns
- Velocity control on robot joints

Advantages:

- Provide stabilized imaging
- Track in real time
- Use only B-mode images
- Reduce musculoskeletal disorder for sonographers

Limitations:

- Larger deformation
- Quick and large motion – beyond the size of a resolution cell

Further development:

- Algorithms robust to in-plane rotation
- Kalman filter
- Force control

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Thank you




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Appendix 1: tracking algorithm



Tracking algorithm

If using different probes

CALIBRATION

Step 1: acquire parallel B-scans across the tissue within a small volume.

Step 2: fine tune the CNN weights with a small learning rate.

TRACKING

Step 1: at time $t = 0$, acquire the target image I_0 .

Step 2: move end effector a small distance to the (+) elevational direction. Acquire a reference image I_{ref} .

while tracking:

Step 3: compute in-plane transformation -- NCC

Step 4: estimate out-of-plane translation for each patch using the CNN

Step 5: estimate the overall out-of-plane transformation using all patches

Step 6: compute transformation error and control the robot joint velocities

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Appendix 2: P control on SE(3)



- Implement a proportional (P) controller with double-geodesic feedback on SE(3) group [11]

Body Velocity

$$\Delta g = g_{p_0 p} = g_{pr}(0) \left(g_{pr}(t) g_{ar}^{-1}(t) \right)^{-1} \rightarrow (R_{p_0 p}, t_{p_0 p})$$

$$\begin{cases} \hat{\omega}_{p_0 p}^b = -K_\omega \log_{SO(3)} R_{p_0 p} \\ \vec{v}_{p_0 p}^b = -R_{p_0 p}^T K_v t_{p_0 p} \end{cases}$$

(Positive definite K_ω and K_v)

$$\vec{V}_{p_0 p}^b = \begin{bmatrix} (\hat{\omega}_{p_0 p}^b)^V \\ \vec{v}_{p_0 p}^b \end{bmatrix}$$

$$\vec{V}_{bp}^b = Ad_{g_{p_0 p}^{-1}} \vec{V}_{bp_0}^b + \vec{V}_{p_0 p}^b$$

(Change coordinate to the base frame)

- Omit object velocity (the first term $\vec{V}_{bp_0}^b$) on the R.H.S \rightarrow joint velocity

Joint Velocity

$$\dot{q} = J_b^\dagger \vec{V}_{bp}^b$$