



Adaptive Branch Tracing and Image Sharpening for AirwayXTree Extraction in 3-D Chest CT

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1. Motivation

- Development of a method for automatic airway tree extraction to reduce the physicians' workload during diagnosis and treatment of lung disease
- Evaluation of the robustness of the method on 20 chest CT datasets from various scanners, using a wide range of acquisition and reconstruction parameters, including low dose scans



2. Preprocessing

- Automatic lung extraction [hu2001] and seed point search inside trachea
- Image smoothing by a modified level-set curvature diffusion equation [whitaker2001] depending on the image noise (calculated within the lung voxels by the mean of the gradient magnitude)

• Comparison to 14 other state-of-the-art algorithms

Image Sharpening

- Based on the Laplacian of Gaussian (LoG) and a modified version (L'oG)
- L'oG is using the same Gaussian convolution kernel as LoG, but its Laplacian convolution kernel ignores any voxels being greater than the center voxel of the kernel

 $F_{sharpened} = F - \beta \cdot \frac{LoG(F) + L'oG(F)}{2}$ $\sigma_{L} = \min(3, \lfloor 15 \cdot reso_{\min} / r \rfloor)$ $\sigma_{G} = reso_{\min}$

Detection of Branch Furcations

- Iterative adjustment of current VOI in z direction using a binary search [mori2009]
- After each iteration, we check the number of connected components (N_c) on the VOI surface (except S₁). If
 N_c = 0: If the binary search interval is still greater than reso_{min}, we shorten the VOI. If it reaches reso_{min}, we terminate tracing.

3. Airway Tree Segmentation

- 1. Reconstruction of a small volume of interest (VOI) around the current branch of the airway tree
- 2. Edge enhancement within the VOI by an image sharpening filter
- 3. Detection of bifurcations or trifurcations of the airways tree by adaptively adjusting the VOI size and region growing threshold
- 4. Generation of more volumes of interest (child VOIs)
- 5. Repeat 1-4, until no more furcations can be detected [kitasaka2002]

4. Evaluation

• Criteria defined according to [lo2009].

Brand	h Branch	Tree	Tree	Leakage	Leakage	False
coui	nt detected	length	length	count	volume	positive
	(%)	(cm)	detected (%)		(mm ³)	rate (%)





Highest number of leakages

Lowest number of detected branches

 N_c = 1: The VOI is extended and the bronchial region is re-segmented using region growing thresholded at T.

N_c = 2 or N_c = 3: We found a furcation. If the binary search interval is still greater than reso_{min}, we shorten the VOI. If it is equal to reso_{min}, we terminate tracing for the current branch and calculate its final dimensions. Its thickness is measured by



averaging the extracted bronchial region on each slice of the VOI image along the z-axis of the VOI. The radius of the branch, r, is calculated from this thickness. The furcation point, g, is then determined as the gravity center of the bronchial region on the (D-r)-th slice. The gravity center of each C_i, g_i, is also calculated.



• Average runtime: 5±3 min

5. Discussion & Conclusion

- Development of automatic leakage detection method necessary
- Development of method for extraction of interrupted branches required
- Fully automated and more complete airway tree extraction than any other method evaluated [lo2009]

Generation of Child VOIs

- If the radius of a branch is smaller than a predefined value T_r, then the resolution of the current VOI image is doubled by using tricubic interpolation.
- Generation of levees to prevent tracing from growing into sibling branches. No voxels beyond these levees are extracted.
- Highest leakage volume Highest number of detected branches Highest percentage of detected branches

- Then, child VOIs are generated based on g, g_i, and r.
- $N_c > 3$: If the binary search interval is still greater than reso_{min}, we shorten the VOI. If it is equal to reso_{min}, the
- threshold T is reduced by T and the bronchial region is updated.



References

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