

# Fully automatic catheter localization in C-arm images using 11-Sparse Coding

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### **Motivation**

Minimally invasive procedures rely on navigation Automatic Catheters tracking and detection ✓ Facilitates navigation ✓ Enables 3D reconstruction of the catheters w.r.t. Patient ✓ Reduces surgery time and exposure to radiations

### **Previous Work**

- Methods based on Manual Initialization [1]
- Methods based on blob detection and geometric constraints [2]



### **Our contribution**

- Robust detection and tracking method based on:
  - Blob-like feature detection to constrain search space
  - Feature-specific intensity context (intensity profiles)
  - Hypotheses selection and scoring using I1-sparse coding

## **Training Stage**

- Dictionaries used for **tips** detection
  - Dictionary  $\mathbf{D}_{T}$  containing patches collected around annotated tips
  - Dictionary  $D_F$  containing patches collected around \_\_\_\_ annotated electrodes
- Dictionaries used for **candidate** scoring
  - Dictionaries of intensity profiles collected from annotated catheters  $\mathbf{D}_{\kappa}$ Meta-data: for each profile store electrodes positions Dictionaries of "negative" intensity profiles **D**<sub>N</sub> collected from background

### Results



- Tested on 2835 images (20 sequences)
- Three catheters
- 50 intensity profiles used for training
- ~ 97% global detection rate



### **Pre-processing step**

- Image enhancement via Homomorphic filter
- Noise Suppression via bilateral filtering



#### **Tips detection step**

- Two dictionary containing •
  - 1. Patches depicting tips  $\mathbf{D}_{\mathrm{T}}$
  - 2. Patches depicting electrodes **D**<sub>F</sub>
- Enable tip discrimination Through reconstruction **errors**  $\|\mathbf{D}_T \hat{\alpha}_t - \mathbf{y}_i\|_2^2 < \|\mathbf{D}_E \hat{\alpha}_e - \mathbf{y}_i\|_2^2$

### **Candidate catheters scoring**

- Each Candidate catheter is represented by line joining *n-th* catheter tip and *i-th* electrode
- Intensities are sampled from lines Intensities reconstructed via each k-th catheter specific dictionary, solving:

Average precision ~ 0.5 mm ± 0.1 mm



#### Hypotheses selection

Candidate catheters are scored according to:

 $\begin{cases} d E_P & \text{if } E_P \ge E_N \\ d \frac{E_P}{E_N - E_P} & \text{if } E_P < E_N \end{cases}$ 

#### **Interest Point detected via** determinant of Hessian

- **Meta-Data**
- Each catheter specific dictionary word is associated with ground truth position of electrodes w.r.t. tip
- Therefore we can recover undetected electrodes

#### References

[1] - Wu, W., Chen, T., Barbu, A., Wang, P., Strobel, N., Zhou, S.K., Comaniciu, hypothesis fusion for robust catheter tracking in 2d x-ray fluoroscopy. In: CVPR, IEEE (2011) 1097–1104

[2] - Ma, Y., Gogin, N., Cathier, P., Housden, R.J., Gijsbers, G., Cooklin, M., O'Neill, M., Gill, J., Rinaldi, C.A., Razavi, R., et al.: Real-time x-ray fluoroscopy-based catheter detection and tracking for cardiac electrophysiology interventions. Medical physics 40(7) (2013) 071902

- $\hat{\alpha}_{ni}^{k} = \min_{\alpha_{ni}^{k}} \left\| \mathbf{D}_{k} \alpha_{ni}^{k} \mathbf{l}_{ni} \right\|_{2}^{2} + \lambda_{3} \left\| \alpha_{ni}^{k} \right\|_{1}$
- And dictionary encoding "negative" profiles:
  - $\hat{\beta}_{ni}^{k} = \min_{\substack{\beta_{ni}^{N} \\ ni}} \left\| \left[ \mathbf{D}_{N}, \mathbf{D}_{j \neq k} \right] \beta_{ni}^{k} \mathbf{l}_{ni} \right\|_{2}^{2} + \lambda_{4} \left\| \beta_{ni}^{k} \right\|_{1}$



- Ep and En are reconstruction errors obtained via catheter specific and "negative" profiles dictionaries
  - Multiple Catheters  $\rightarrow$  Ungarian Algorithm for best global hypothesis selection

