

# **Technology Driven Thyroid Cancer Diagnosis:**

**Improvements in Efficiency** 

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# **Overview**

### Company Background

Tan Tock Seng Hospital (TTSH) with 175 years of advanced medical care and development, is one of Singapore's largest multidisciplinary hospitals. The hospital has always been looking for innovative ways to improve their service care delivery.



TTSH has most of the specialties with the following core strength in Medicine, Geriatric Infectious Diseases, Rehabilitation Medicine, Medicine, Respiratory Rheumatology Allergy and Immunology.

### Problem Description

Thyroid is one of the 10 common Cancers in Singapore and the trend continues to increase. Besides clinical examination, the diagnosis of Thyroid Cancer is done through Ultrasound to detect anomalies in the images. For undetermined cases, Fine Needle Aspiration (FNA) procedures is performed and conclusion is made based on Histology report.

### Efficiencv

The increase in volume of Thyroid Ultrasound is far more rapid than the increase in number of personnel which resulted to longer turn around time of Ultrasound report.

### Accuracy & Cost



The noise and speckle of the ultrasound image and the ability of the operator to correctly acquire the image can affect reading performance. This may lead to a higher percentage of suspicious and undetermined cases that require extra-fine needle aspiration (FNA) costing more time and money.

### Objective

- Develop a decision support system based on deep learning that can provide automatic diagnostics for thyroid nodules.
- Improve the service quality of thyroid cancer detection system in TTSH. Alleviate the problem of insufficiency in the number of radiologists and high dependency on the expertise.
- Increase diagnostic speed and accuracy and decrease medical costs and risks for patients





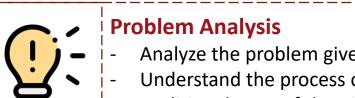
**Decision System** Service Quality Performance

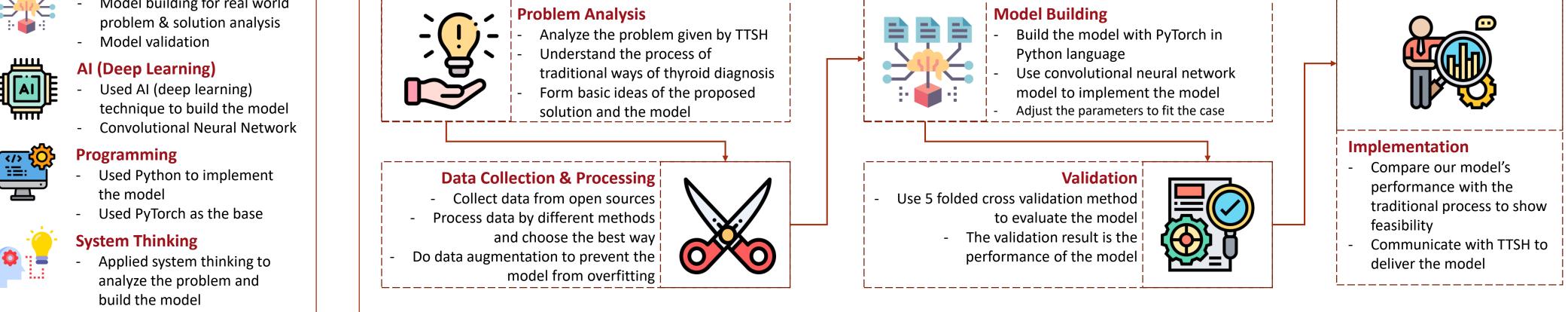


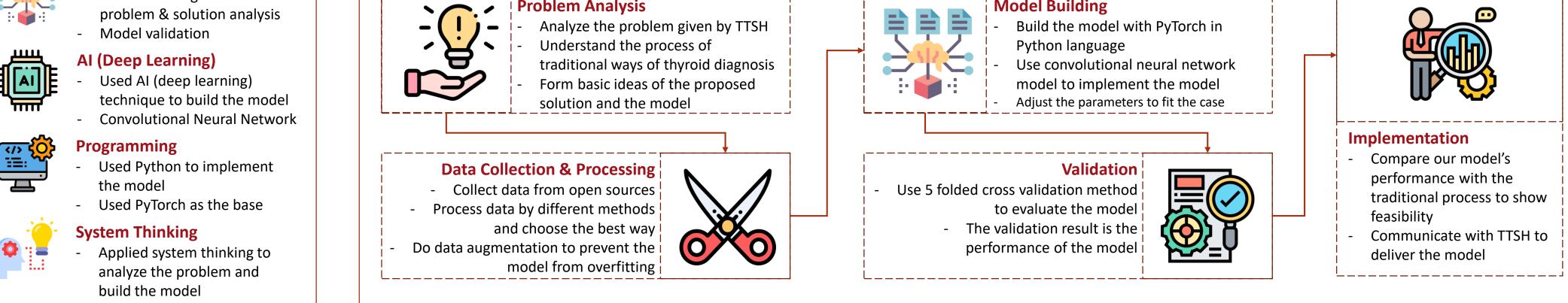


### **Project Management** Model building for real world Model validation

# Methodology







# **Model Building & Result**

### Classification Criterion

Thyroid Imaging Reporting and Data System(TI-RADS) Malignant: TI-RADS 4a, 4b, 5 Benign: TI-RADS 1, 2, 3

### Data source

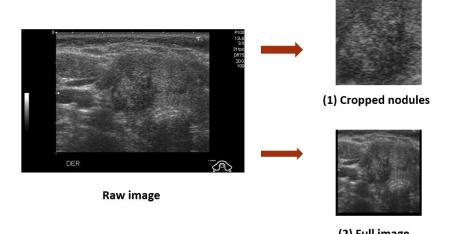
1) Open source thyroid ultrasound image database proposed by Pedraza

2) Beijing Tongren Hospital thyroid image data

After removing data without classification labels, we have in total:  $\rightarrow$  Malignant: 286 Benign: 79

### Pre-processing

We removed the disturbance in the background and resized all images to the same scale. The final output of the pre-processed image is 3channel images with size 128(height) \* 128(width). We built models with cropped modules and full image and found the model using full



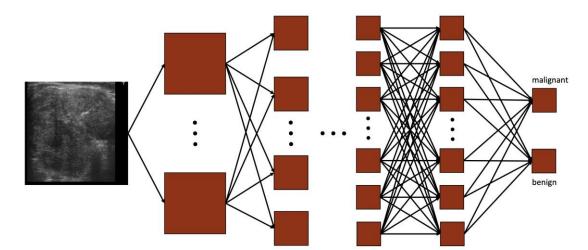




CNN Model

In our CNN model, we created nine convolutional layers, added batch normalization, used LeakyReLU as the activation function, and threw the max-pooling layer.

**Optimizer:** Adam **Loss function:** Binary Cross-Entropy(BCE) loss Training batch size: 32 Input image: 128\*128\*3

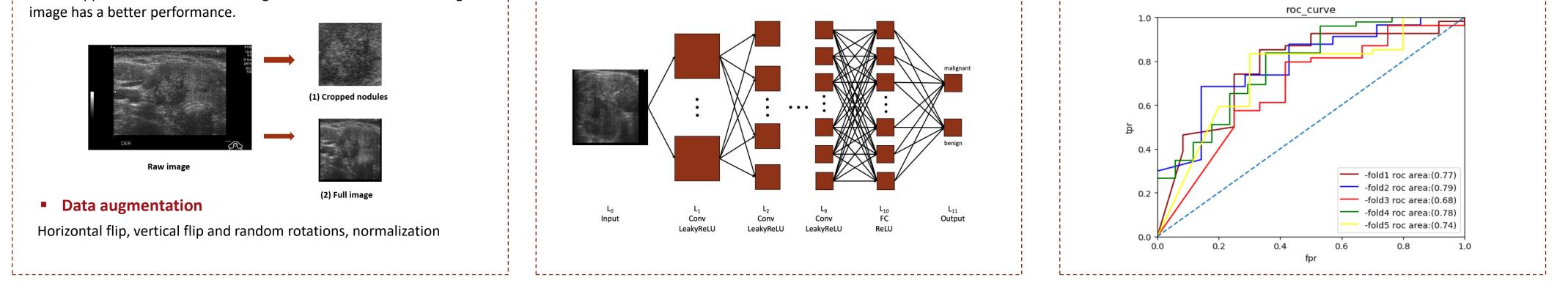


### Results

**Evaluation Metrics:** 

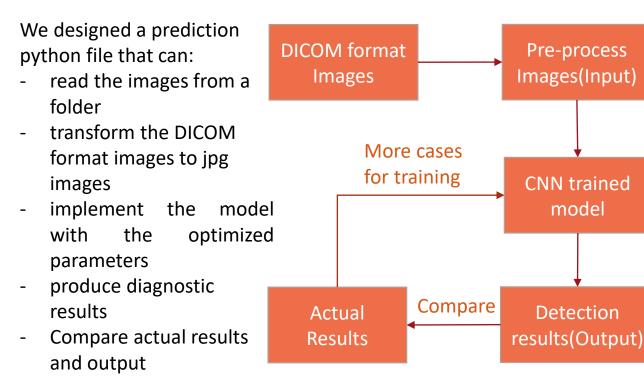
Accuracy, True Positive Rate (TPR), True Negative Rate (TNR), and the area under the ROC Curve (AUC).

Metrics	Accuracy	TPR	TNR	AUC
Fold 1	0.8484	0.8387	1	0.77
Fold 2	0.9219	0.9355	1	0.79
Fold 3	0.8333	0.8750	1	0.68
Fold 4	0.7424	0.8333	0.6666	0.78
Fold 5	0.8906	1	0.75	0.74
Average results	0.8573	0.9088	0.8833	0.752



# Implementation

### Prediction python file



### Demo Output

The output is the file name of the image and the diagnostic results given by the CNN model.

It took 7.96875 seconds	Load successfully
for diagnosing 6 images.	10_1.jpg is Malignant
Compared to the manual	127_1.jpg is Benign
detection time of 10 minutes	29_1.jpg is Malignant
for each case, the model's	30_1.jpg is Malignant
diagnosis time obtained a	67_1.jpg is Malignant
high improvement	68_1.jpg is Malignant
in detection efficiency.	Process time: 7.96875 Process finished with exit code 0

# Recommendations

### Limitations

The model has two major limitations

- Translation invariance: a slight movement of a singe object may not properly activate the neural networks to recognize it. Data augmentation helps alleviate this problem, but it can not be eliminated
- Lack of data: There are only 365 images for training, this means the data is insufficient to provide a comprehensive model.
- Conclusion & Future Works
- CNN is one of the Deep Learning techniques suitable for analyzing images, and can be used to analyze Thyroid Ultrasound images to assist in decision making
- Retrain the developed CNN model with the actual data;
- With more data to retrain the developed CNN model, the accuracy of the developed DSS will be largely improve