

Early-stage stratification of Hodgkin lymphoma patients through the use of deep learning, molecular imaging and clinical data

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HOLY2020

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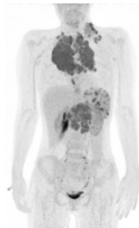


Images taken from the internet.

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Background

Hodgkin lymphoma patients and treatment options



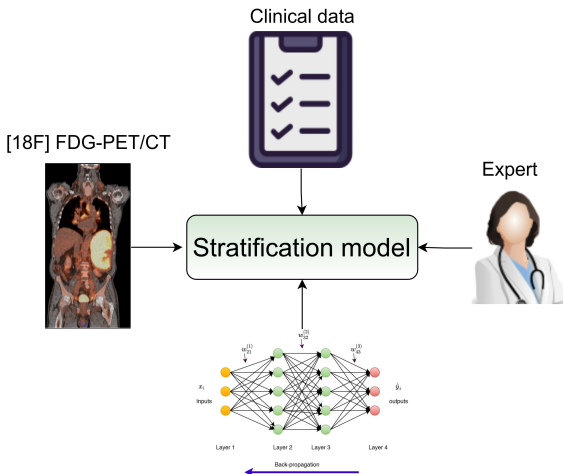
- Bimodal age range (between 20-24, and 75-79 years) with majority between 20-40 years
- Combination of chemotherapy and radiotherapy
- Long-term treatment-related complication remains a significant concern
- Avoid over-treatment with the risk of unnecessary toxicity without jeopardizing cure rates

State-of-the-art

- International Prognostic Score (IPS) together with level of albumin, hemoglobin, white cell count, lymphocyte count, age, sex, and Ann Arbor classification are used for prognostic stratification
- The **current stratification options fail** to reliably identify patients with the need for radiotherapy
- For example, radiation therapy of the mediastinum significantly increases the risk of secondary malignancies such as breast cancer and are causing cardio-toxicity

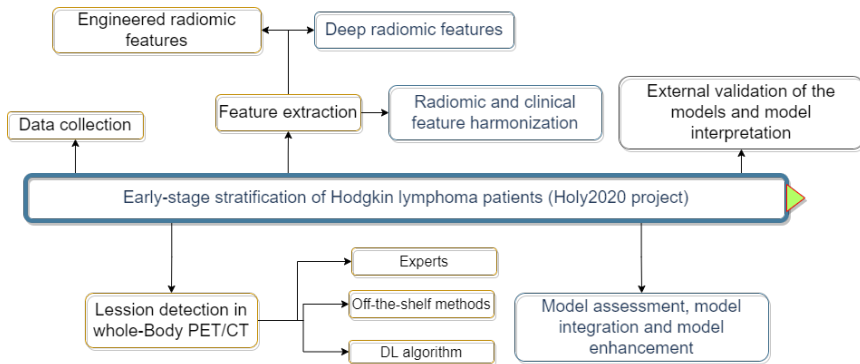
Hypothesis

- *Can we build an improved treatment stratification model using deep learning (DL), molecular imaging, and relevant clinical data?*

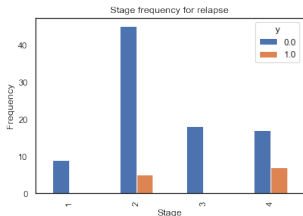
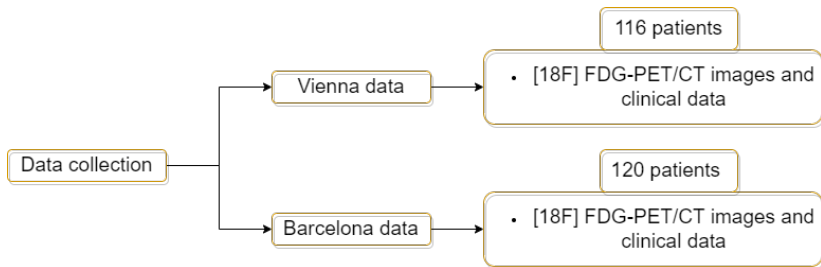


Objectives

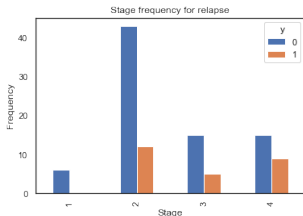
- Identify patients with a high risk of relapse, towards personalized medicine



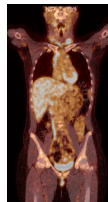
Data



Vienna



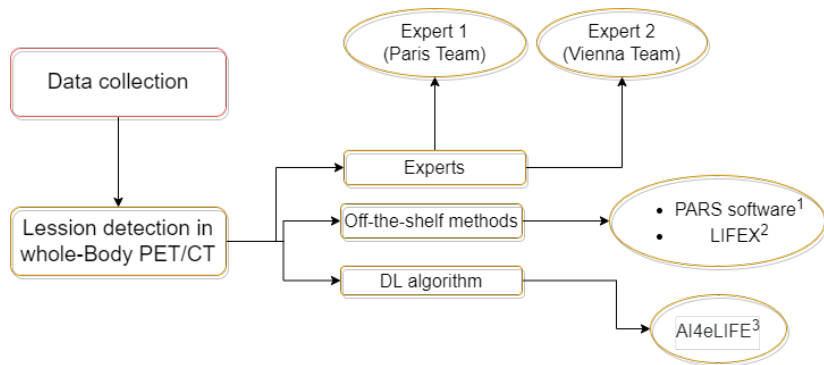
Barcelona



PET/CT

Highly imbalanced data: Vienna (10.3%) and Barcelona (22.5%) relapse.

Whole-body lesion segmentation

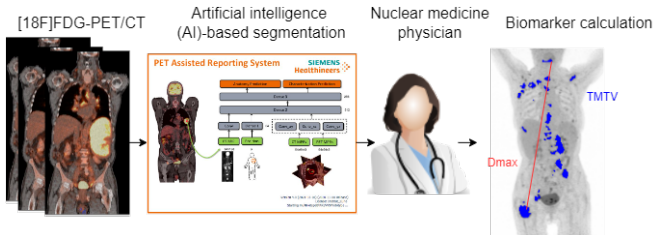
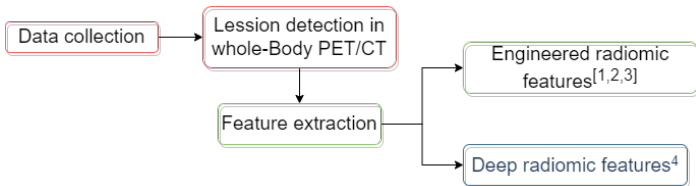


¹Sibille L. et al. Radiology 2020

²Nioche CL. et al. Cancer Res. 2018

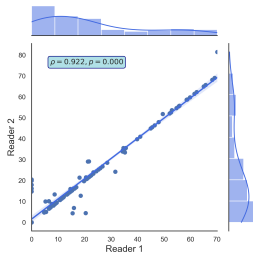
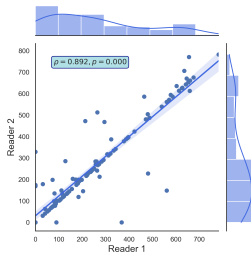
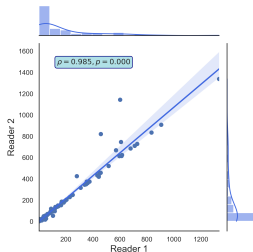
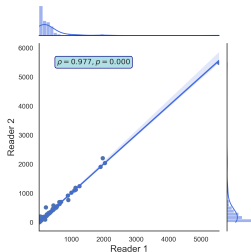
³Girum KB. et al. J. Nucl. Med. 2022

Biomarker calculation



- ¹ Vercellino L. et al, Blood 2020
- ² Cottreau A-S, et al, J Nucl Med 2020
- ³ Sibille L. et al. Radiology 2020
- ¹ Chen T. CL. et al. PMLR. 2020

Inter-operator variability: reader 1 & 2

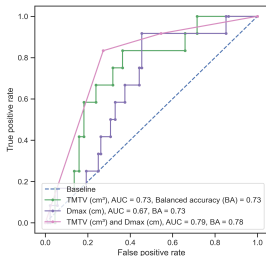


Vienna

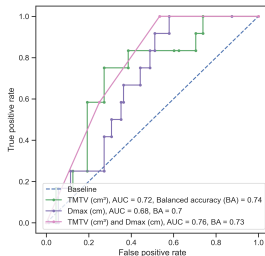
Barcelona

- 1st row: TMTV
- 2nd row: Dmax
- $P < 0.05$ (Dmax, $P = 0.00958$, and TMTV, $P \ll 0.005$): Vienna
- $P < 0.05$ (Dmax, $P = 0.0285$, and TMTV, $P = 0.00279$): Barcelona

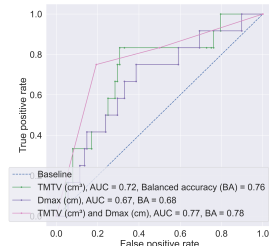
ROC AU: reader 1, 2, and MIP AI



reader 1



reader 2

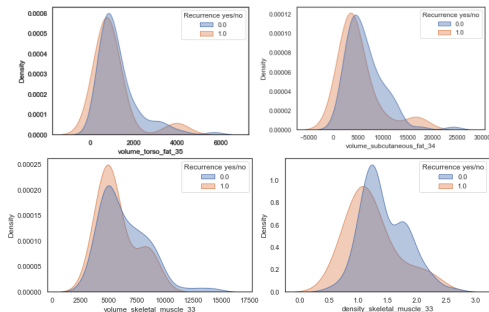
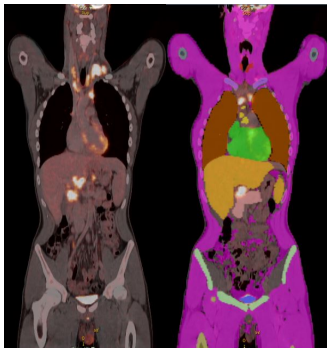
MIP-based AI ²

- Identification of patients with a high risk of relapse for Vienna data

¹Girum KB. et al. J. Nucl. Med. (supplement 2). 2022

² <https://github.com/KibromBerihu/ai4elife>

Healthy tissues: MOOSE software



- Work in progress ...

¹ <https://github.com/QIMP-Team/MOOSE>

Future works

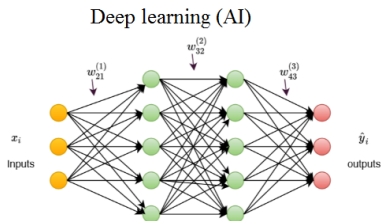
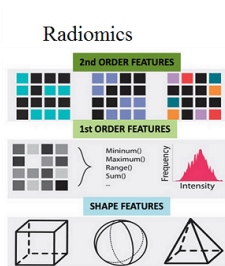
Tasks to do

- Finalize and analyze engineered radiomic features efficacy in stratifying lymphoma patients
- Harmonize radiomic and clinical features

Future works

Tasks to do

- Continue to explore deep learning-based feature extraction from the whole-body PET/CT images¹
- Model assessment, integration, and enhancement



¹Chen T. CL. et al. PMLR. 2020

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