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3D hemisphere-based convolutional neural network for wholebrain MRI segmentation

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Abstract

Whole-brain segmentation is a crucial pre-processing step for many neuroimaging analyses pipelines. Accurate and efficient whole-brain segmentations are important for many neuroimage analysis tasks to provide clinically relevant information. Several recently proposed convolutional

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neural networks (CNN) perform whole brain segmentation using individual 2D slices or 3D patches as inputs due to graphical processing unit (GPU) memory limitations, and use sliding windows to perform whole brain segmentation during inference. However, these approaches lack global and spatial information about the entire brain and lead to compromised efficiency during both training and testing. We introduce a 3D hemisphere-based CNN for automatic whole-brain segmentation of T1-weighted magnetic resonance images of adult brains. First, we trained a localization network to predict bounding boxes for both hemispheres. Then, we trained a segmentation network to segment one hemisphere, and segment the opposing hemisphere by reflecting it across the mid-sagittal plane. Our network shows high performance both in terms of segmentation efficiency and accuracy (0.84 overall Dice similarity and 6.1 mm overall Hausdorff distance) in segmenting 102 brain structures. On multiple independent test datasets, our method demonstrated a competitive performance in the subcortical segmentation task and a high consistency in volumetric measurements of intra-session scans.

Keywords

MRI; segmentation; 3D CNN

1. Introduction

Structural magnetic resonance imaging (MRI) is the most widely used neuroimaging modality for clinical investigation of the human brain, ranging from development (Gogtay et al., 2004; Wilson et al., 2021; Wang et al., 2019; Fjell et al., 2015; Knickmeyer et al., 2008; Giedd et al., 1996; Gilmore et al., 2018) and aging (Guo et al., 2017; Gur et al., 1991; Grajauskas et al., 2019; Scahill et al., 2012; Gunning-Dixon et al., 2009) research, to neurological conditions such as developmental disorders (Habibullah et al., 2020; Kuzniecky, 1994) or dementia (Agosta et al., 2017; Noor et al., 2019). It can provide a high-resolution 3D volumetric representation of the brain with sufficient image contrast to differentiate among distinctive brain structures and tissue types. Therefore, MRI is the preferred modality particularly for studying structural abnormalities associated with brain disorders, where the detection of subtle disease-related changes, such as atrophy, can greatly assist with earlier diagnosis and intervention. Furthermore, structural MRI is frequently used as the anatomical reference for other imaging modalities with lower spatial resolution, such as functional MRI (fMRI) or positron emission tomography (PET). Accordingly, whole-brain segmentation of the structural MRI is one of the most important processing steps for almost all neuroimaging analyses pipelines: an accurate and efficient segmentation is a prerequisite to a greater clinical relevance of the imaging findings.

To achieve successful translate the neuroimage analysis techniques into clinical practice, an ideal segmentation algorithm needs to be fast and accurate. Otherwise, it can become a bottleneck in processing time and may affect the results of subsequent analyses. The classical segmentation method uses nonlinear registration to align the intensities or folding patterns of an image with those of a manually segmented atlas template (Fischl et al., 2002; Ma et al., 2014). However, these techniques usually require large amounts of computational resources and processing time. For example, the popular FreeSurfer package, one of the

most commonly used segmentation tools, can take more than 24 hours to process one image using a typical desktop computer (Fischl, 2012). In addition, manual intervention are often needed to reduce segmentation bias or correct for segmentation errors (Derakhshan et al., 2010; Despotovi et al., 2015; Mortamet et al., 2009; Monereo-Sánchez et al., 2021). These limitations may render the classical segmentation methods less ideal for large, multi-site studies that are increasingly becoming the norm.

There is an increasing interest in using CNNs for whole-brain segmentation because of its fast inference time and high performances in semantic segmentation tasks (Ren et al., 2015; He et al., 2017; Liu et al., 2016). Several CNNs have been proposed for subcortical and whole-brain segmentations. Yet, these networks cannot directly segment a whole-brain image due to graphical processing unit (GPU) memory constraints. Instead, they segment 2D slices or 3D patches of a whole-brain image, which are then fused together to create a final segmentation. Many of the existing networks are trained on very small 3D patches with patch sizes ranging from 13³ to 38³ (de Brebisson and Montana, 2015; Dolz et al., 2018; Wachinger et al., 2018; Fedorov et al., 2017; McClure et al., 2018). Only a few studies have used large 3D patches of size 96³ (Li et al., 2017; Jog et al., 2019). A drawback of patchbased approach is that patches contain mostly local information and lack the spatial context. To improve the performance of 3D patch-based CNN, recent studies have incorporated spatial context into network training. For instance, (Wachinger et al., 2018) augmented 3D patches with coordinate information and showed that providing spatial context to input patches leads to a higher segmentation accuracy. Huo et al. (2019) used a different approach and registered MRI images to a common space, followed by training individual networks for each patch. Since each patch is associated with a fixed spatial location, each network implicitly learns contextual information for the corresponding location.

Our goal was to devise a memory efficient solution that allows us to train on inputs that are as large as possible and as semantically meaningful as a whole-brain image. The amount of memory required for whole-brain segmentation depends on two factors: the size of the input image and the number of structures to segment. Typically, a CNN uses a softmax layer to assign class probabilities to each voxel. In this setting, the CNN generates a volume for each structure, meaning the size of an output segmentation is the size of the input multiplied by the number of brain structures. With limited GPU memory, it is not feasible to segment a high-resolution MRI image (1 mm isotropic) into a large number of structures (left and right). We note that structures in one hemisphere of the human brain have symmetric counterparts in the opposing hemisphere. As such, for the purposes of segmentation, the CNN does not need to learn different representations for corresponding structures in each hemisphere. We can divide the task of segmenting a whole-brain image into segmenting each cerebral hemisphere separately. These tasks are more manageable because an image of a hemisphere is significantly smaller and a hemisphere contains half the number of structures of the whole brain. Moreover, a hemisphere image already contains both local and global contexts. This strategy utilizes the bilateral organization of the brain to drastically reduce memory usage. We test the proposed method on diverse data sets and evaluated the segmentation accuracy and consistency.

2. Materials

2.1. Data

The training data used in the preparation of this article was obtained from the Alzheimer's Disease Neuroimaging Initiative (ADNI) database (adni.loni.usc.edu), the Australian Imaging Biomarkers and Lifestyle flagship study of ageing (AIBL) group, the Open Access Series of Imaging Studies (OASIS) database, and the Human Connectome Project (HCP) database. The ADNI was launched in 2003 as a public-private partnership, led by principal investigator Michael W. Weiner, MD. The primary goal of ADNI has been to test whether serial MRI images, PET scans, biological markers, and clinical and neuropsychological assessments can be combined to measure the progression of MCI and early Alzheimer's disease. As such, ADNI data includes images of controls with normal aging, subjects with mild cognitive impairment, and subjects with dementia of the Alzheimer's type (DAT). The AIBL and OASIS data contain images with similar demographics and clinical factors. The methodology of AIBL and OASIS studies have been previously reported (Ellis et al., 2009; LaMontagne et al., 2018). The HCP dataset is an open-access data set with high-resolution MRI images of healthy young adults (Van Essen et al., 2013). Segmentations generated using a dedicated FreeSurfer pipeline are also made available (Glasser et al., 2013).

To train our network, we combined the ADNI, AIBL, OASIS and HCP data sets and split the images at the subject and data set level. This was to ensure the training, validation, and test sets did not share any subjects. As shown in Table 1, we used 60% of the images from each dataset for training, 20% of the images for validation, and the remaining 20% as held-out test data.

We divide our experiments into three parts:

- **1.** Evaluation of segmentation accuracy (held-out test data)
- 2. Comparison with manual segmentation (CANDI, IBSR and MICCAI 2012 datasets)
- **3.** Evaluation of segmentation consistency (MIRIAD and TRT datasets)

The first experiment was evaluated on the held-out test images, which have similar acquisition parameters as the training data. The second and third experiments were evaluated on independent test data sets. For the second experiment, we used images and manual segmentations obtained from the Child and Adolescent NeuroDevelopment Initiative (CANDI), the Internet Brain Segmentation Repository (IBSR), and the MICCAI 2012 dataset. The CANDI data set contains images and the corresponding sub-cortical segmentations, of healthy children and children with psychiatric disorders in the 5–15 age range. We obtained a total of 103 images from https://www.nitrc.org/projects/candi_share. The IBSR dataset provides 18 images along with manually guided expert segmentations to encourage the validation of segmentation algorithms. The MR brain data sets and their manual segmentations were provided by the Center for Morphometric Analysis at Massachusetts General Hospital and are available at https://www.nitrc.org/projects/ibsr. The MICCAI 2012 dataset is used in the MICCAI Multi-Atlas Labeling challenge (Landman and Warfield, 2012). This challenge provides 20 images and manual segmentations for

testing. The MICCAI 2012 data set is available upon request at https://my.vanderbilt.edu/ masi/workshops/.

To evaluate the consistency of our segmentation, we used data sets with intra-session scans. We obtained images from the Minimal Interval Resonance Imaging in Alzheimer's Disease (MIRIAD) data set, which contains 185 pairs of back-to-back scans of normal aging controls and subjects with DAT (Malone et al., 2013). The Test-Retest (TRT) data set is released to assess the reliability of volumetric measurements (Maclaren et al., 2014). It contains 120 images from 3 subjects who were scanned twice within each session for a total of 20 sessions spanning 31 days.

2.2. Image pre-processing

The MRI images were reoriented into the radiological convention and re-sampled into a standard $256 \times 256 \times 256$ image grid with 1 mm isotropic voxel size. We performed min-max scaling to rescale the image intensity values to the range between 0 and 1.

3. Methods

Figure 1 illustrates our hemisphere-based approach, which consisted of a localization network and a segmentation network. The localization network predicts bounding boxes for both hemispheres and the segmentation network segments the localized left hemisphere into 54 FreeSurfer-based structures. To segment the right hemisphere, we simply performed a left-right flip on the localized right hemisphere and applied the segmentation network.

3.1. Localization network

We used downsampled MRI images for hemisphere localization to reduce their memory footprint and to speed up the training process. Figure 2 illustrates the architecture of our localization network. It uses convolutional layers with increasing dilation factors. Each convolutional layer is followed by an instance normalization layer and an activation layer with leaky rectified linear units (Ulyanov et al., 2017; Maas et al., 2013). The convolutional layers are followed by a global average pooling layer which performs extreme dimensionality reduction. The final layer is a fully connected layer with 12 units. It performs bounding box regression to predict the center voxel's coordinates and the bounding box's dimensions for each hemisphere. The network outputs a total of 12 bounding box parameters for a given image. We trained the network to minimize the mean squared error using the Adam optimization method with the default learning rate of 0.001 and a batch size of 8 (Kingma and Ba, 2014). For augmentation, we applied translation of maximum 20 voxels on-the-fly.

3.2. Segmentation network

Our segmentation network is shown in Figure 3. Similarly to the popular U-Net architecture, our network has two paths of convolutional networks with skip connections between the paths to promote information flow (Ronneberger et al., 2015). The skip connections simply concatenate features in one path to those in the other path. However, unlike the U-Net architecture, we did not perform downsampling and upsampling in the two paths. Rather,

we progressively increased the dilation factors in one path and decreased the dilation factors in the other path. Increasing the dilation factors expands the receptive field size, providing more spatial context to subsequent network layers. While a large dilation factor is useful for the global context, it can be detrimental to small regions with thin boundaries. In the other path, we used decreasing dilation factors to aggregate local features. Similar networks have been used to segment small objects in remote sensing tasks (Hamaguchi et al., 2018). We only performed downsampling in the first layer to reduce the input image's size and memory usage. With the exception of the final layer, every convolutional layer is followed by an instance normalization layer and an activation layer with leaky rectified linear units (Ulyanov et al., 2017; Maas et al., 2013). In total, the network has 21 convolutional layers.

We trained the network to minimize both the voxel-wise cross-entropy loss and the soft dice loss according to:

 $L_{segmentation} = L_{cross - entropy} + L_{soft - dice}$

The soft dice loss for each region is given by

$$L_{soft-dice, roi} = 1 - \frac{2\sum_{i}^{N} y_{i} \tilde{y}_{i}}{\sum_{i}^{N} y_{i}^{2} + \sum_{i}^{N} \tilde{y}_{i}^{2}}$$

where the sums run over *N* voxels of a predicted segmentation \tilde{y}

and a reference segmentation *y*. The final soft dice loss is the average of the soft dice losses of all regions. Since the cross-entropy loss function treats all voxels equally and independently evaluates the class prediction for each voxel, networks trained using only the cross-entropy loss function fail to detect small regions. Therefore, the network would be biased towards regions with large volumes. On the other hand, the soft dice loss function implicitly re-weighs the voxels, which helps handle such class imbalances. However, since this function does not differentiate between over-segmentation and under-segmentation, we opted to optimize both cross-entropy and soft dice loss. We trained the network using the Adam optimization method with the default learning rate of 0.001 (Kingma and Ba, 2014). We used 2 GPUs to speed up the training process, with each GPU processing one hemisphere. We stopped training the network when the validation loss stopped decreasing. In total, we trained the network for 12 epochs which took about 72 hours.

Table 2 listed the configuration details for both of the hemisphere localization and the segmentation networks, including the number of trainable parameters, number of epochs, optimizer, batch size, and the loss function.

3.3. Post-processing

To create a final whole-brain segmentation, we used the bounding boxes to orient the two segmentations obtained by passing the left and horizontally flipped right hemispheres to the segmentation network. Since the bounding boxes of the two hemispheres overlap, we used majority voting with a

$5 \times 5 \times 5$

neighborhood for each voxel where the two segmentations disagreed. We combined the left and right labels for 6 structures (white matter hypointensities, 3rd-ventricle, 4th-ventricle, brain stem, corpus callosum and cerebrospinal fluid) and kept the left and right labels separate for the remaining 48 structures. The final segmentation had a total of 102 structures. We computed a brain mask by performing dilation and keeping the largest component. The brain mask was used to convert the labels of any voxels located outside of the brain to background.

3.4. Evaluation measures

We used three metrics to analyze the similarity and discrepancy between our segmentation and a reference segmentation: signed relative volume difference (SRVD), Dice Similarity Coefficient (DSC) and Hausdorff Distance (HD). SRVD is computed according to:

$$SRVD(A, B) = \frac{Volume(A) - Volume(B)}{Volume(A)} \times 100\%$$

where A is a binary reference segmentation and B is a predicted segmentation. It is a volume-based metric that ranges between -100 and 100, where 0 indicates perfect segmentation, positive value indicates over-segmentation, and negative value indicates under-segmentation. Note that imperfect segmentations or even non-overlapping segmentations can result in a SRVD of 0 as long as the volumes of the predicted and reference segmentations are equal. In our variant of SRVD, we ignore the direction of volume difference and take the absolute of relative volume difference (ARVD) according to:

$$ARVD(B_{t1}, B_{t2}) = \left| \frac{Volume(B_{t1}) - Volume(B_{t2})}{Volume(B_{t1})} \right| \times 100\%$$

where B_{t1} and

 B_{t2}

are segmentations of the first and second scans of a pair of back-to-back scans. This metric measures the variability of volume measurements for scans acquired on the same day.

We used DSC to measure overlap (Dice, 1945). It provides a similarity measure that ranges between 0 and 1, where 0 shows no overlap between two segmentations and 1 shows 100% overlap. DSC is defined as the following

$$DSC(A, B) = \frac{2|A \cap B|}{|A| \cup |B|}$$

For small structures, DSC may be overly sensitive to errors. Note that DSC does not differentiate between over-segmentation and under-segmentation, nor does it account for shape fidelity.

HD, a distance-based metric, measures the discrepancy between two shapes (Jain and Dubes, 1988). It is defined by

HD(A,B) = max(h(A,B),h(B,A))

where h(A, B) is computed according to

 $h(A, B) = max_{a \in A}min_{b \in B} \parallel a - b \parallel$

HD compares the boundaries between two segmentations and gives the maximum of all distances from a boundary point in one segmentation to the closest boundary point in the other segmentation. A low HD value indicates that every point of either segmentation is close to some point of the other segmentation. Note that HD is sensitive to outliers and a single outlying voxel can result in a high HD value.

4. Results

4.1. Localization performance

In Table 3, we show the performance of the localization network on the held-out test data. Overall, each predicted coordinate is within 3 voxels away from the ground truth coordinate, and each predicted dimension is within 4 voxels of size difference. To account for error in the localization network and to avoid under-segmentation, we increased each predicted dimension of the bounding boxes by 10 voxels. The expanded bounding boxes were used to localize both hemispheres in the segmentation network.

4.2. Evaluation of segmentation accuracy

4.2.1. Held-out test data—Figure 4 shows examples of input images, reference segmentations, and our automatic segmentations. For the held-out test data, the distributions of SRVD, DSC and HD for all structures are shown in Figure 5. The overall mean DSC is 0.836 and the overall mean HD is 6.067. Regions with a mean DSC that is much lower than the overall mean DSC include bilateral cuneus, entorhinal, pericalcarine, frontal pole, temporal pole, and accumbens areas. The errors in these regions are likely due to over-segmentation as the predicted volumes of these regions tended to be higher than the reference volumes. However, over-segmentation errors are mostly limited since the distances between the predicted boundaries and the reference boundaries of these regions in Figure 7. The first column shows that the FreeSurfer segmentations are not error-free, potentially resulting in low DSC values for some images. The bilateral choroid plexus and white matter hypointensities regions include scattered voxels, making their DSC and HD metrics much more sensitive to errors and outliers.

4.3. Comparison with manual segmentation

The manual segmentations provided in the CANDI, IBSR and MICCAI 2012 data sets contained different numbers of structures, some of which do not directly correspond to any FreeSurfer label. However, all three data sets have manual segmentations of the subcortical structures. For this experiment, we focused on comparing our automatic subcortical segmentation results with these manual subcortical segmentations.

4.3.1. CANDI dataset—We evaluated our network on the CANDI dataset. In Figure 8, we show the distribution of SRVD, DSC and HD for several subcortical regions. The mean DSC is 0.79. DSC scores greater than 0.85 were observed in the bilateral thalamus, bilateral caudate and right putamen, while lower DSC scores were observed in the bilateral amygdala and accumbens areas. The volume difference boxplot indicates that our network tends to over-segment most of the subcortical regions except for the amygdala. A challenging aspect of the CANDI data set is that it represents a much younger demographic. Overall, the distances between the predicted and reference boundaries were quite small except for bilateral caudate and hippocampus. For each subcortical region, we show examples of the input images and segmentations in Figure 9.

4.3.2. IBSR dataset—Figure 10 shows the distributions of SRVD, DSC and HD for the 14 subcortical structures obtained on the IBSR dataset. Overall, the predicted subcortical volumes are higher than the volumes derived from manual segmentations. The overall mean DSC is 0.778. Larger structures such as the thalamus, caudate, and putamen have higher DSC values, whereas smaller structures such as the amygdala and accumbens area have lower DSC values. The overall mean HD is 5.034. Regions with mean HD larger than the overall mean include bilateral caudate and hippocampus.

We compared our method with the state-of-the-art methods in Table 4. For a fair comparison, we included only methods that performed independent testing on the IBSR data set. The overall mean DSC and HD achieved using our network were 0.779 and 5.034. Even though our network was trained on FreeSurfer data, it performed better on the IBSR data compared to the FreeSurfer data. The performance of our network is also comparable with other CNN-based approaches (Dolz et al., 2018; Roy et al., 2018). However, these networks were trained to segment much smaller numbers of structures. Dolz et al. (2018) trained their network to segment 8 subcortical structures and Roy et al. (2018) fined-tuned their network with other manual segmentations to segment 27 structures. We show samples of IBSR images and their segmentations in Figure 11 to highlight the fact that these images have a lower contrast and a lower resolution of 1.5 mm in the anterior-posterior direction, which make these images difficult to segment.

4.3.3. MICCAI 2012 Multi-Atlas dataset—We show the distributions of SRVD, DSC and HD obtained on the MICCAI 2012 dataset in Figure 12. The overall mean DSC was 0.780 and the DSC values for bilateral amygdala and accumbens area were the lowest. The overall HD was 5.486 and the HD values for bilateral caudate were the worst. In Figure 13, we show examples of caudate segmentations sorted by HD values and we show examples of amygdala and accumbens area segmentations sorted by DSC values. Table 5 compares

the DSC and HD values obtained using our method and FreeSurfer. Our method showed a significant improvement of segmentation accuracy for most of the structures, except for the caudate and hippocampus. Other CNN-based methods have shown lower to comparable performances prior to training on the MICCAI 2012 images and higher performances after training on the MICCAI 2012 images (Roy et al., 2018; Kushibar et al., 2018).

4.4. Evaluation of segmentation consistency

4.4.1. MIRIAD dataset—The DSC and HD distribution patterns in Figure 14 are similar to those of the held-out test data with an overall mean DSC of 0.836 and HD of 6.093 across 102 structures. The overall mean change in volumes across back-to-back scans is 2.229 for our method and 5.634 for FreeSurfer. This indicates that our network is capable of generating consistent segmentations and volume measurements for intra-session scans.

4.4.2. TRT dataset—We computed the intra-session coefficient of variation

 $CV_s = \frac{\sigma_s}{\overline{x}} \times 100$

where the standard deviation of intra-session measurements,

$$\sigma_{s} = \sqrt{\sum_{i}^{m} (x_{i} - x_{i}^{''})^{2}/2m}$$

, is based on differences between

n

pairs of back-to-back measurements (Maclaren et al., 2014). The total coefficient of variation,

 CV_t

, was computed using the standard deviation across all measurements. Table 6 shows the comparison between the intra-session and total variation of volumetric measurements of subcortical structures obtained using our method and FreeSurfer. The volumetric measurements generated using our method have less variation between scans and days.

5. Discussion

In this study, We proposed a new strategy for whole-brain segmentation, in which a CNN is first trained on both the left and horizontally flipped right hemispheres rather than smaller patches. A hemisphere can be considered as a very large patch that contains all the structures to be segmented. This provides an important context for the segmentation task and simplifies the sampling process for network training. A patch-based CNN requires a more sophisticated sampling strategy that accounts for the presence of brain structures in each patch. The localization network can therefore be considered as part of a sampling strategy. Additionally, using a hemisphere as the input patch allows us to more efficiently learn representations and manage memory usage. We can use the same representations for both hemispheres by simply performing a left-right flip on one of the hemispheres. In other words, our segmentation network does not need to learn separate filters and generate separate labels for the left and right parts of each structure. The predicted segmentations can be affixed with left and right annotations based on which bounding box was used. Since each hemisphere is considered as an independent sample, this strategy also allows us to double the number of training samples.

Our method shows high accuracy in generating FreeSurfer segmentations as shown in Section 4.2.1. However, it is difficult to directly compare our method with other CNN approaches due to differences in the selection of training data, testing data and brain structures. The experiment most closely related ours, McClure et al. (2018), trained a patch-based CNN (32^3 patches) on a very large dataset (N= 11,148) to generate FreeSurfer-based segmentations of 49 brain structures. They achieved a DSC of 0.78 on a held-out test data and a DSC of 0.73 on an independent test data. Our network, which obtained DSC of 0.836 on both the held-out test data and independent MIRIAD data, outperformed their CNN. In comparing our segmentations with manual segmentations, we have demonstrated that our network's subcortical segmentation performance is comparable to other CNN-based approaches. On intra-session scans, our method showed consistent volumetric measurements.

In addition to the improvement in terms of accuracy, the proposed method also showed improvement in computational complexity and reduction in the inference time. In terms of computational complexity, the light-weight hemisphere localization network is able to reduce the input image dimension to half of the original size. Furthermore, the proposed framework is able to drastically reduce the whole brain segmentation time from FreeSurfer's over 24 hours to the level of seconds. In addition, compared to the other CNN-based whole brain segmentation using multi-view 2D slices as input and using sliding windows during inference(Roy et al., 2019; Henschel et al., 2020), the proposed hemisphere-based 3D-CNN segmentation is able to achieve further speedup the segmentation at given that only two forward passes are necessary to perform inference on each volume.

5.1. Limitations and future work

We note that our method performed better on images with similar acquisition parameters as the training data. To generalize better to unseen data, our network needs to be more robust to intensity, contrast and scanner variations. We used minimal pre-processing, augmentation, and post-processing techniques in our experiments. Pre-processing techniques such as intensity, contrast and spatial normalization are often performed to provide segmentation algorithms with consistent input images. Alternatively, augmentation strategies such as alteration of the intensity and contrast in training images can be employed to expose our segmentation network to a wider range of images. A recent study showed that augmenting the contrast in training images can improve the robustness of segmentation networks (Jog et al., 2019). This augmentation scheme uses altered versions of training images to simulate various acquisition protocols. A network trained on voxel-wise cross-entropy loss and soft Dice loss does not actually learn inter-class relationship, and it does not account for the topological interactions of different structures. This may lead to implausible classifications. Various studies have used fully connected conditional random fields while post-processing their results to formulate constraints among voxels and penalize implausible connections among voxel pairs (Wachinger et al., 2018; Kamnitsas et al., 2017; Chen et al., 2014). Some of these techniques can improve our network's robustness and performance.

Finally, in this study, we have tested the robustness of the proposed whole brain segmentation through extensive independent validation of the proposed methods using

multiple independent dataset, including CANDI, IBSR, and MICCAI2012. To translate the proposed machine-learning-based method into a real clinical situation, further extensive clinical evaluations with perspective studies on independent real clinical institutional datasets are necessary (Ma et al., 2021). The clinical generalizability of the proposed model could potentially be further improved by incorporating more divesed dataset collected from multiple sites with different clinical situations. On the other hand, challenges are still needed to be resolved. For example, additional manual ground truth data would be expensive to generate, even through semi-automatic procedures using the constantly evolving segmentation model. And the constrain of limited capability of sharing privacy-sensitive patient data might need to be overcome through federated learning approaches (Lo et al., 2021).

6. Conclusions

We have presented a CNN-based segmentation strategy that performs segmentation directly on large and semantically meaningful input images. We trained our neural networks to localize and segment cerebral hemispheres. Through various experiments, our network demonstrated high accuracy in generating FreeSurfer-based segmentations, outperformed FreeSurfer in subcortical segmentations of the IBSR and MICCAI 2012 datasets, and produced consistent volumetric measurements for intra-session scans.

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Figure 1:

Illustration of our hemisphere-based segmentation pipeline. (a) A sample MRI image. (b) The localization network predicts 12 bounding-box parameters for a given image. (c) The bounding-box parameters include the coordinates of the center voxel and dimensions of each bounding box. (d) Images of both hemispheres are obtained by cropping the original image and image of the right hemisphere is horizontally flipped. (e) The segmentation network segments each hemisphere into 54 structures. (f) The segmentation generated is affixed with left or right label accordingly. (g) The segmentation generated for the right hemisphere is horizontally flipped and fused with the segmentation generated for the left hemisphere.

Input MRI 128×128×128

Conv 8, 5×5×5, stride=2, dilation=1
Conv 8, 3×3×3, stride=1, dilation=1
Conv 8, 3×3×3, stride=1, dilation=1
Conv 16, 5×5×5, stride=2, dilation=1
32×32×32
Conv 16, 3×3×3, stride=1, dilation=1
Conv 16, 3×3×3, stride=1, dilation=1
Conv 16, 3×3×3, stride=1, dilation=2
Conv 16, 3×3×3, stride=1, dilation=2
Conv 32, 3×3×3, stride=1, dilation=3
Conv 32, 3×3×3, stride=1, dilation=3
Conv 32, 3×3×3, stride=1, dilation=4
Conv 32, 3×3×3, stride=1, dilation=4
Global Average Pooling
FC 12

Bounding box parameters

Figure 2:

The localization network predicts the coordinates of the center voxel and the width, the height, and the depth of the bounding box for each hemisphere. Each block in the figure listed the detailed parameters for each network layer. For the convolutional layer (red), parameters include: the number of convolutional filters, convolutional kernel size, stride number, and dilation sizes; the global average polling layer (green) doesn't include learnable parameters; the fully connected layer have output a total of 12 parameters representing the coordination for the two bounding boxes for each given image (6 for each hemisphere).



Figure 3:

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The architecture of the proposed segmentation network. Each block in the figure listed the detailed parameters for the corresponding network layer. Each convolution layer uses a kernel size of $3 \times 3 \times 3$, a stride of $1 \times 1 \times 1$ and a dilation factor of 1 unless otherwise specified.

Yee et al.



Figure 4:

Examples of test input images, reference segmentations, and predicted segmentations. Reference segmentation refers to FreeSurfer segmentation except for the CANDI, IBSR and MICCAI 2012 datasets, in which case it refers to manual segmentation.



Figure 5:

Boxplots of SRVD, DSC and HD for 68 cortical structures evaluated on the held-out test data. For the SRVD boxplot, a gray line is drawn on the reference point 0. The gray lines in the DSC and HD boxplots show the overall mean DSC and HD values across all structures.



Figure 6:

Boxplots of SRVD, DSC and HD for 34 subcortical structures evaluated on the held-out test data. For the SRVD boxplot, a gray line is drawn on the reference point 0. The gray lines in the DSC and HD boxplots show the overall mean DSC and HD values across all structures.

Yee et al.



Figure 7:

Sample segmentations of the held-out test dataset with the (a) lowest, (b) median and (c) highest DSC in bilateral cuneus, entorhinal, pericalcarine, frontal pole and temporal pole.

Page 24



Figure 8:

Boxplots of SRVD, DSC and HD for 14 subcortical structures evaluated on the CANDI dataset. For the SRVD boxplot, a gray line is drawn on the reference point 0. The gray lines in the DSC and HD boxplots show the overall mean DSC and HD values across all structures.

Yee et al.



Figure 9:

Sample segmentations of the CANDI dataset with the (a) lowest, (b) median and (c) highest DSC for each subcortical region.

Page 26



Figure 10:

Boxplots of SRVD, DSC and HD for 14 subcortical structures evaluated on the IBSR dataset. For the SRVD boxplot, a gray line is drawn on the reference point 0. The gray lines in the DSC and HD boxplots show the overall mean DSC and HD values across all structures.

Yee et al.



Figure 11:

Sample segmentations of the IBSR dataset with the (a) lowest, (b) median and (c) highest DSC for each subcortical region.



Figure 12:

Boxplots of SRVD, DSC and HD for 14 subcortical structures evaluated on the MICCAI 2012 dataset. For the SRVD boxplot, a gray line is drawn on the reference point 0. The gray lines in the DSC and HD boxplots show the overall mean DSC and HD values across all structures.

Yee et al.



Figure 13:

Sample segmentations of the MICCAI 2012 dataset with the (a) worst, (b) median and (c) best HD values for caudate and DSC values for other structures.





Figure 14:

Boxplots of ARVD, DSC and HD for 102 structures evaluated on the MIRIAD dataset. The ARVD boxplot shows the variability of volumetric measurements across back-to-back scans. The gray lines in the DSC and HD boxplots show the overall mean DSC and HD values across all structures.

Table 1:

Number of images used for training, validation, and testing.

Dataset	Training Images	Validation Images	Testing Images
ADNI	4385	1345	1428
AIBL	552	175	189
OASIS	1131	447	375
HCP	668	222	223
CANDI	ı	ı	103
IBSR	I	ı	18
MIRIAD	ı	ı	370
TRT	ı	ı	120
MICCAI 2012	ı	ı	20

Table 2:

Configuration details for both of the localization and the segmentation networks, including: Number of trainable parameters, number of epochs, optimizer, batch size, and the loss function.

	Localization network	Segmentation network
Trainable parameters	145k	1.1M
Epochs	12	12
Optimizer	Adam	Adam
learning rate	0.001	0.001
Batch size	8	1
Loss	MSE	DiceCE

Abbreviation: MSE: Mean Squared Error loss; DiceCE: Soft dice loss + Cross Entropy loss.

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Yee et al.

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left	1.472	2.695	2.000	2.566	1.535	2.140
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tight	1.060	2.690	1.907	2.483	1.532	2.179
)	± 0.949	± 1.855	± 1.719	± 1.994	± 1.226	+ 1.785

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Yee et al.

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Comparison of performances achieved on the IBSR dataset via independent testing.

Structure	FreeS	urfer	Dolz et al. (2018)	Roy et al. (2018)	Ourn	nethod
	DSC	HD	DSC	DSC	DSC	Ħ
thalamus-Proper (L) Thalamus-Proper (R)	0.815 ± 0.056 0.864 ±	5.367 ± 1.168 4.471 ±	0.87	0.87	0.845 1.029 0.889 0.889	4,263 0.610 3.703 4.5 2.4
audate (L) audate (R)	0.796 1.796 1.050 0.809 ± 0.048	6.435 6.435 1.939 8.201 2.443	0.84	0.86	0.033 0.038 0.038 0.030 0.030	2.202 7.322 1.298 6.905 6.905 2.014
utamen (L) utamen (R)	0.789 ± 0.038 0.829 ± 0.031	5.310 ± 0.923 4.716 ± 1.189	0.85	0.88	0.819 ± 0.027 0.857 ± 0.019	4.542 4.542 1.169 4.105 ± 0.447
allidum (R) allidum (R)	0.632 ± 0.171 0.774 ± 0.032	4.652 ± 1.294 3.966 ± 0.793	62.0	0.81	0.709 ± 0.083 0.812 0.033	4.871 ± 1.196 3.677 ± 0.613
ippocampus (L)	0.760 ± 0.036	5.787 ± 1.264	ı	·	0.774 ± 0.028	6.069 ± 1.217
lippocampus (R)	0.767 ± 0.060	5.615 ± 1.600	ı		0.774 ± 0.030	9.204 ± 7.121
.mygdala (L)	0.661 ± 0.069	5.521 ± 1.517	ı		0.723 ± 0.051	4.646 ± 1.234
Amygdala (R)	0.690 ± 0.067	4.720 ± 1.553		ı	0.717 ± 0.055	5.042 ± 1.571

Structure	Free	Surfer	Dolz et al. (2018)	Roy et al. (2018)	Our n	nethod
	DSC	HD	DSC	DSC	DSC	HD
Accumbens-area (L)	0.604	3.634			0.679	3.155
	± 0.071	± 0.783			± 0.065	± 0.599
Accumbens-area (R)	0.574	4.507	ı	I	0.631	3.463
	土 0.074	± 1.077			± 0.067	± 0.652
Average	0.740	5.207 ±			0.778 ±	5.034 ±
	0.110	1.761			0.086	1.582

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Table 5:

Comparison of performances achieved on the MICCAI 2012 dataset using our method and FreeSurfer. The p-value showed the statistical results of the repeated-measures t-test, indicating a significant improvement of segmentation accuracy for most of the structures, except for the caudate and hippocampus.

Yee et al.

č	Free	eSurfer	Our m	aethod	zv-q	lue
Structure	DSC	HD	DSC	HD	DSC	ΠD
Thalamus-Proper (L)	0.830 ± 0.018	4.94 ± 1.01	0.866 ± 0.011	4.44 ± 0.95	0.000	0.037
Thalamus-Proper (R)	0.849 ± 0.021	4.76 ± 0.75	0.876 ± 0.012	4.38 ± 0.71	0.000	0.033
Caudate (L)	0.808 ± 0.079	9.89 ++ 3.09	0.810 ± 0.051	11.35 ± 2.40	006.0	0.031
Caudate (R)	0.801 ± 0.042	10.39 ± 3.09	0.810 ± 0.039	11.01 ± 2.62	0.356	0.368
Putamen (L)	$\begin{array}{c} 0.771 \\ \pm \\ 0.039 \end{array}$	6.31 ± 1.09	0.843 ± 0.019	4.45 ± 0.78	0.000	0.000
Putamen (R)	0.799 ± 0.026	5.85 ± 0.84	0.849 ± 0.023	4.57 ± 0.78	0.000	0.000
Pallidum (L)	0.693 ± 0.189	3.89 ± 1.07	0.837 ± 0.033	2.98 ± 0.73	0.000	0.000
Pallidum (R)	$\begin{array}{c} 0.792 \\ \pm \\ 0.085 \end{array}$	3.45 ± 0.98	0.821 ± 0.049	2.96 ± 0.54	0.085	0.012
Hippocampus (L)	0.784 ± 0.054	6.35 ± 1.87	0.779 ± 0.041	6.16 H ± 1.66	0.664	0.654
Hippocampus (R)	0.794 ± 0.025	6.19 ± 1.59	0.794 ± 0.035	5.66 + 1.54	1.000	0.161
Amygdala (L)	0.585 ± 0.064	5.05 ± 0.97	0.694 ± 0.050	4.38 ++ 1.02	0.000	0.006

	FreeS	urfer	Our m	nethod	p-va	ılue
Structure	DSC	HD	DSC	HD	DSC	НD
Amygdala (R)	0.576 ± 0.076	5.43 ± 0.90	0.661 ± 0.065	5.17 ± 1.00	0.000	0.257
Accumbens-area (L)	0.630 ± 0.055	4.28 ± 1.11	0.683 ± 0.053	4.07 ± 1.08	0.000	0.425
Accumbens-area (R)	0.443 ± 0.065	5.47 ± 1.02	0.592 ± 0.061	5.23 ± 1.03	0.000	0.331
Average	0.725 ±± 0.137	5.87 + 2.48	0.780 ± 0.094	5.49 ± 2.82	0.054	0.551

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Table 6:

Comparison of intra-session

 CV_s

) and total variation

CV,

		FreeSurfer			Our method	
Structure	Mean volume (ml)	CV_s (intra-session)	CV_{i} (total)	Mean volume (ml)	CV_s (intra-session)	CV_r (total)
Thalamus	12.90	5.98	6.06	14.51	1.51	1.76
Caudate	7.40	1.54	1.58	7.75	0.63	0.71
Putamen	11.60	4.04	3.92	10.73	1.04	1.22
Pallidum	3.20	5.25	5.42	3.17	2.26	2.56
Hippocampus	8.90	2.77	2.92	9.19	0.83	0.95
Amygdala	3.80	4.69	5.21	3.07	1.18	1.49