

Computer-Augmented Point-of-Care Ultrasound

Stephen Aylward, Ph.D.
Senior Director of Strategic Initiatives
Kitware, North Carolina

Disclosure

- Funded by an NIH R01 grant to Kitware.
 - *NIH NIGMS / NIBIB R01: Slicer+PLUS: An Open-Source Platform for Point-Of-Care Ultrasound*
- Kitware
 1. Collaborates on grant-funded research, creates scientific software, and gives it away for free.
 - VTK (used by Osirix), ITK, CMake, 3D Slicer, ParaView
 2. Consults on scientific computing projects.



Point-of-Care Ultrasound (Pre-Hospital)

- Far-forward medics and EMS personnel lack portable, easy-to-use diagnostic devices for:
 - Intra-abdominal bleeding, Pneumothorax, Traumatic brain injury, ... Trauma Patient Triage
- When EMS ultrasound is conducted by experts, patient management is altered in 37% of cases. [Walcher 2002]
- Even after hours of training, pre-hospital personnel are not sufficiently proficient in FAST for over 48% of trauma patients. [Melanson 2001]



Other Point-of-Care Ultrasound (POCUS) Applications

- Vascular access
 - Hospitals require the use of ultrasound for guidance, confirmation, and documentation
- Scoliosis screening in schools
 - And monitoring those with scoliosis, without x-rays
- Monitor progression of TBI, mildly elevated ICP
 - Without invasive an procedure

Point-of-Care Ultrasound

1. To achieve its broad potential, point-of-care ultrasound must be approached as a new diagnostic modality, not simply as portable, rugged ultrasound.

2. Point-of-care ultrasound will become the most common type of ultrasound exam.

- Shaping the future of ultrasound



Philips Lumify

Future: Computer-Augmented Point-of-Care Ultrasound

1) Task-specific devices

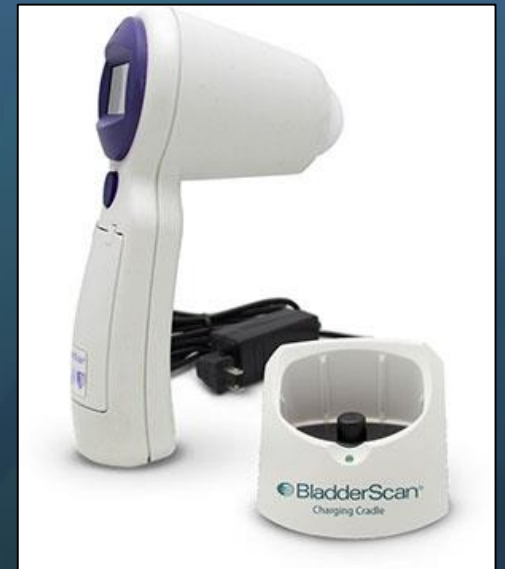
2) Apps for computer-assisted image analysis

- Display results (red light / green light),

not B-Mode images.



BladderScan



1) Task-Specific Devices

Sonivate



Clear Guide



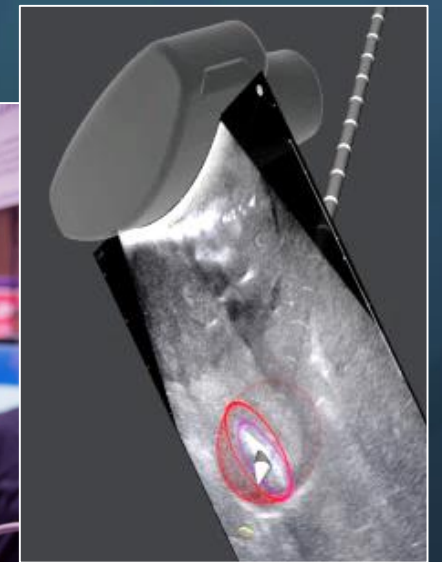
Clarius



Butterfly Networks



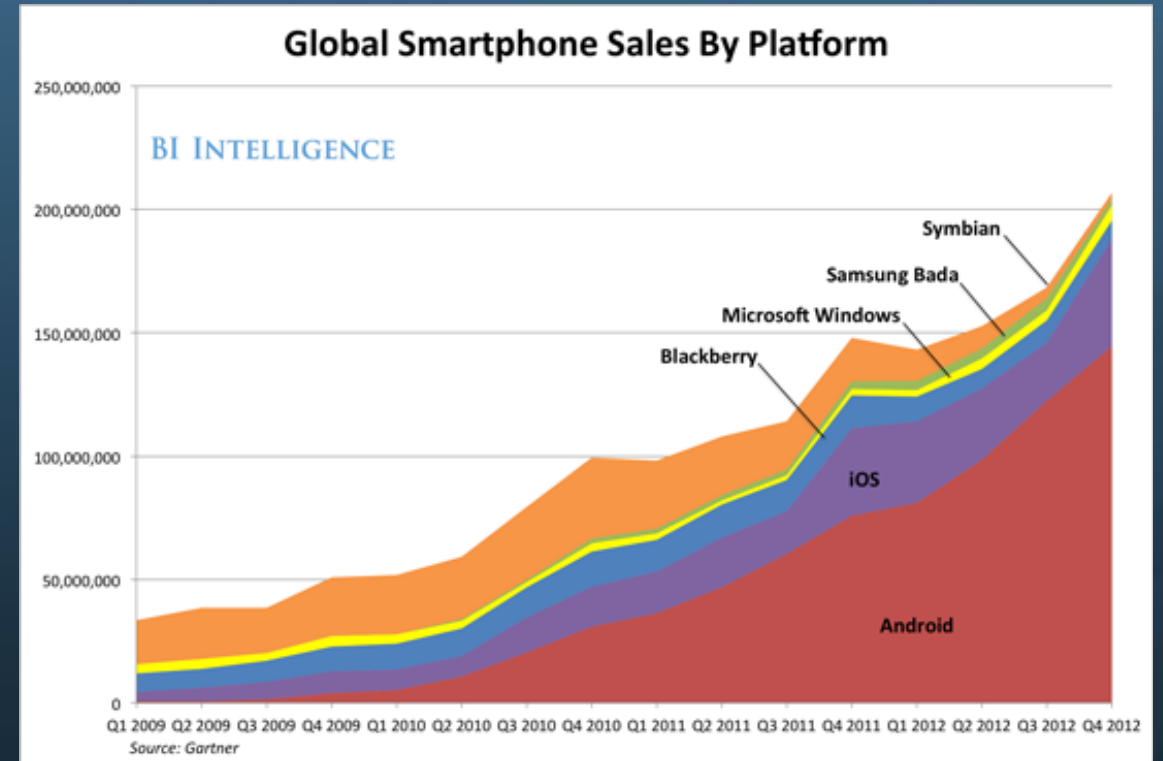
InnerOptic



2) Apps for computer-assisted image analysis

= Open / standard hardware platforms

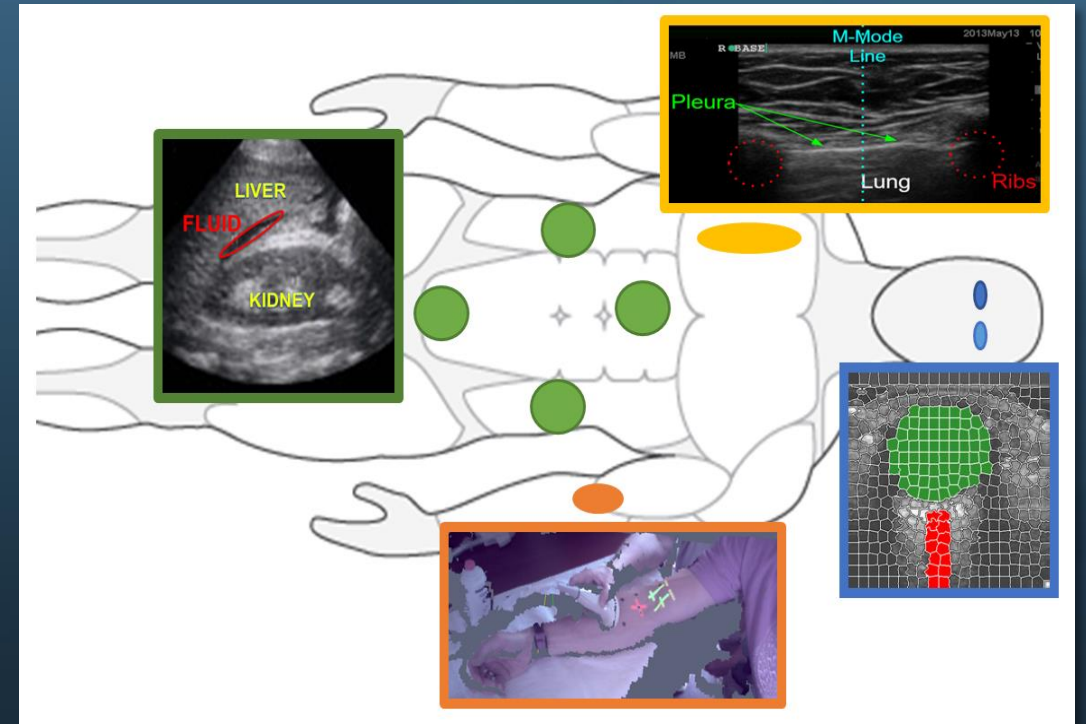
= A.I. (Deep learning / Neural Nets)



Windows (PC Clones) > MacOS
Android (Samsung, HTC, ...) > iOS

A.I. in Point-Of-Care Ultrasound

- FAST (Intra-abdominal bleeding)
- TBI (Intracranial pressure: ICP)
- Pneumothorax
- Hemothorax
- Renal dysfunction
- Guidance: paracentesis, peripheral vascular access
- General medicine: Scoliosis

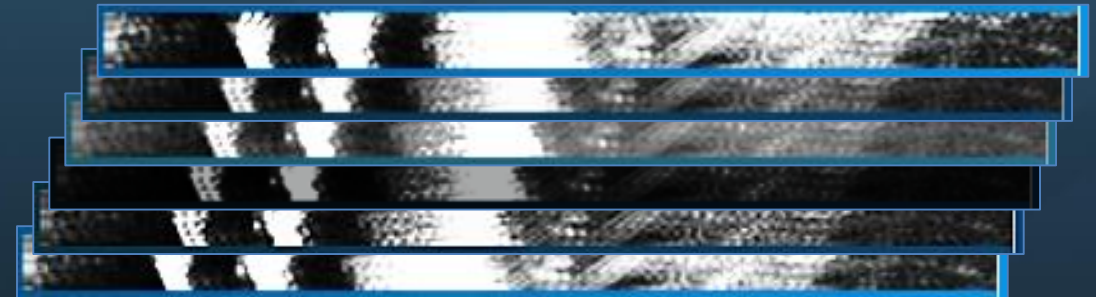


Ultrasound Spectroscopy

Analyze RF returns from
multiple powers and multiple frequencies

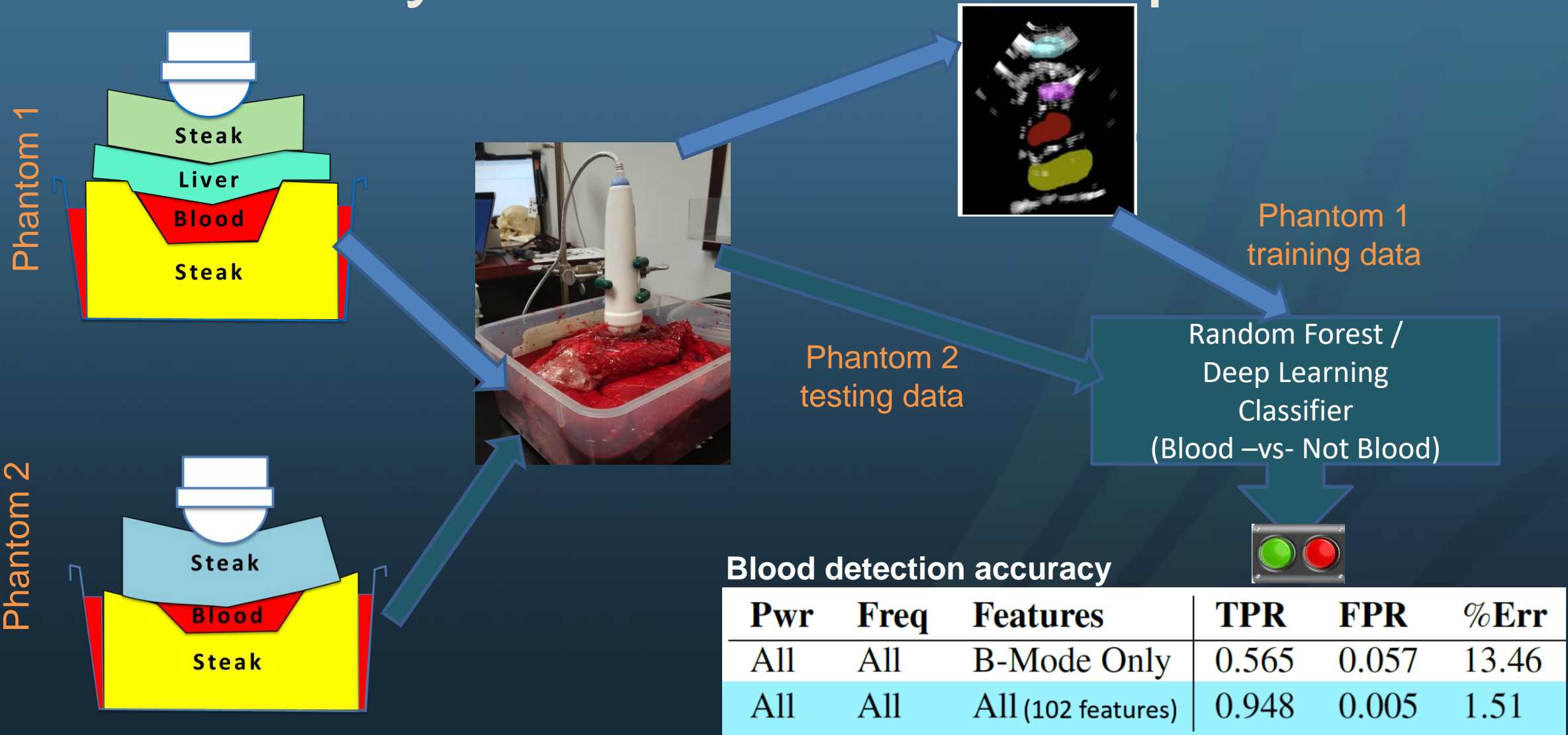
- Pre-processing
 - “Quantitative Ultrasound” [Lavarello 2011]
- RF Characterization
 - Chebyshev Polynomial Coefficients
 - Legendre Polynomial Coefficients
 - Linear Fit (Slope, Intercept)
 - Backscatter Coefficient Estimation
- Classification = Neural Network

	Power	Freq.
1	15%	2.5
2	15%	3.5
3	15%	5.0
4	30%	2.5
5	30%	3.5
6	30%	5.0



RF Data

Preliminary Ex Vivo Tissue Experiment



Phantom 1

Phantom 2

Phantom 1 training data

Phantom 2 testing data

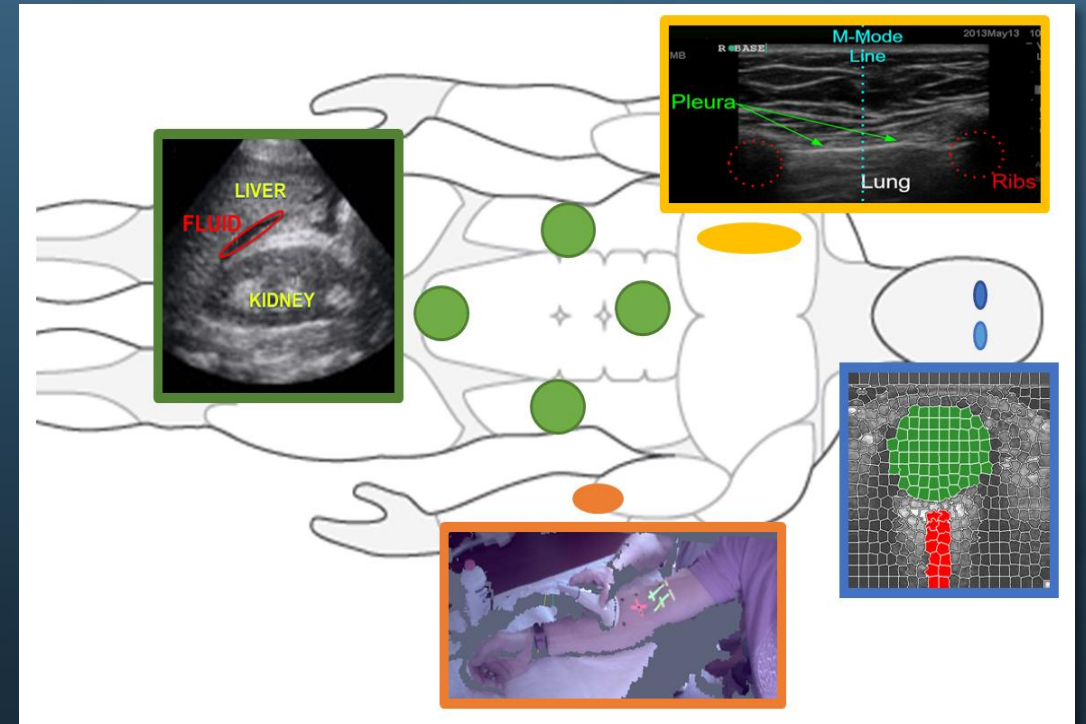
Random Forest / Deep Learning Classifier (Blood -vs- Not Blood)

Blood detection accuracy

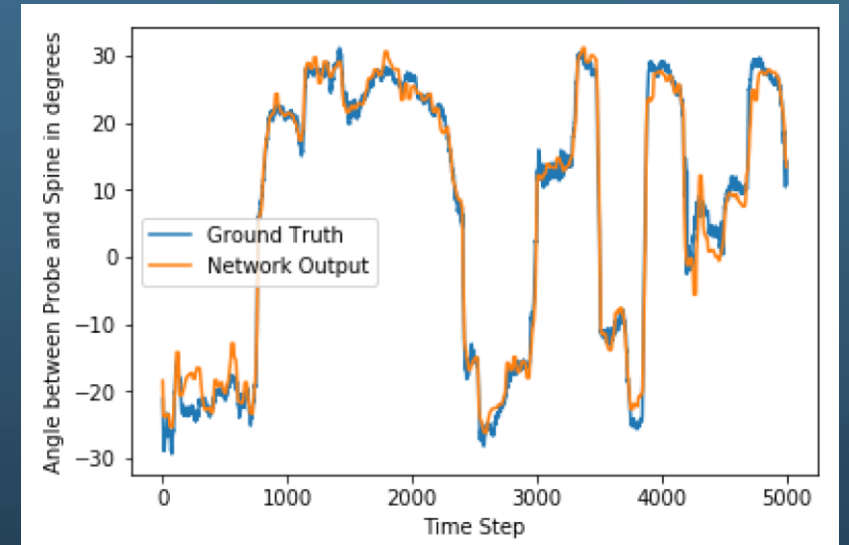
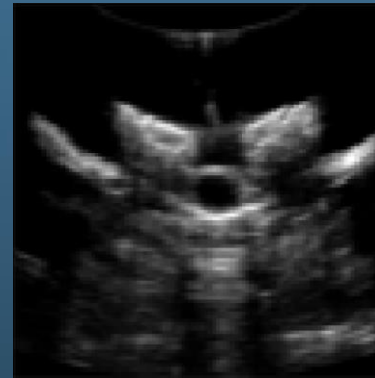
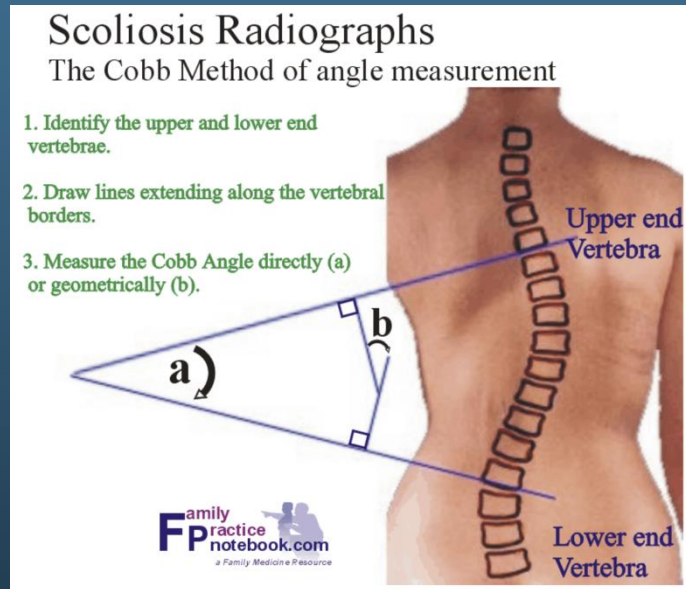
Pwr	Freq	Features	TPR	FPR	%Err
All	All	B-Mode Only	0.565	0.057	13.46
All	All	All (102 features)	0.948	0.005	1.51

Demonstration applications

- FAST (Intra-abdominal bleeding)
- TBI (Intracranial pressure: ICP)
- Pneumothorax
- Hemothorax
- Renal dysfunction
- Guidance: paracentesis, peripheral vascular access
- General medicine: Scoliosis

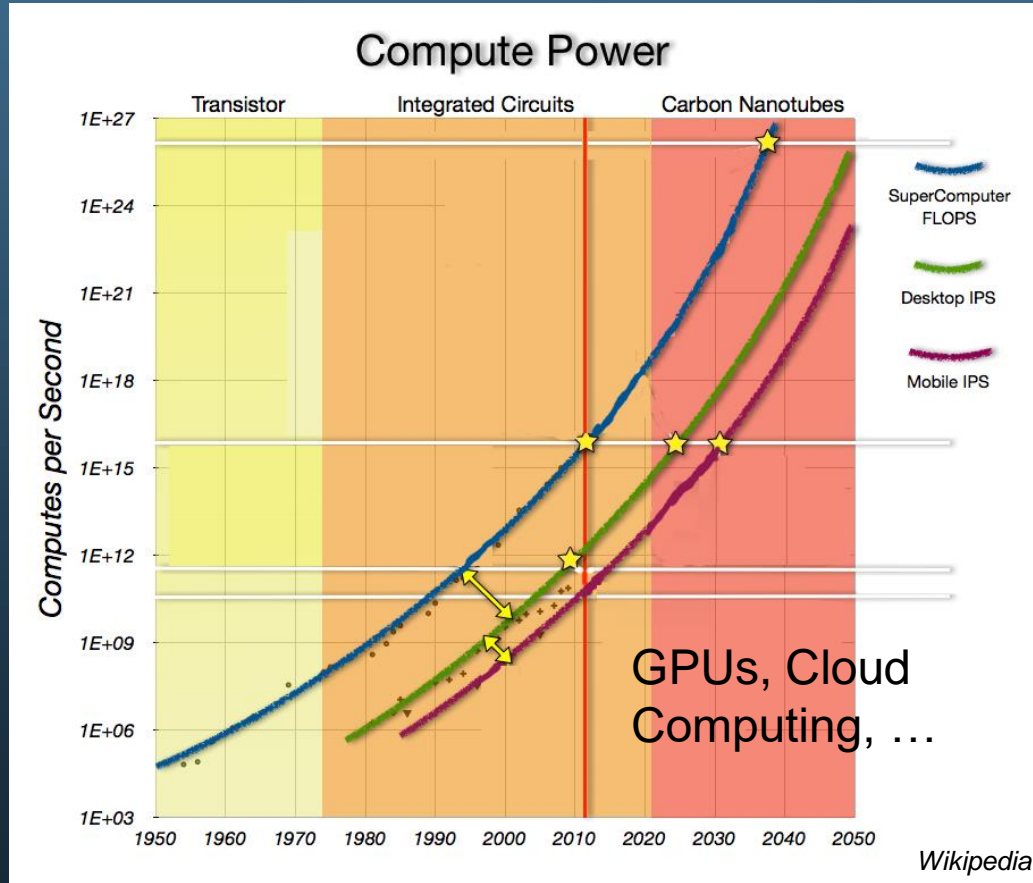


Scoliosis detection and monitoring



- Neural Network: Angle between probe and spine, from b-mode
- IMU: Angle between probe and vertical
- NN + IMU: Cobb Angle, between vertebrae and vertical

Computer-Assisted Point-of-Care Ultrasound



- FAST (Intra-abdominal bleeding)
- TBI (Intracranial pressure: ICP)
- Pneumothorax
- Hemothorax
- Renal dysfunction
- Guidance: paracentesis, peripheral vascular access
- General medicine: Scoliosis

Outline

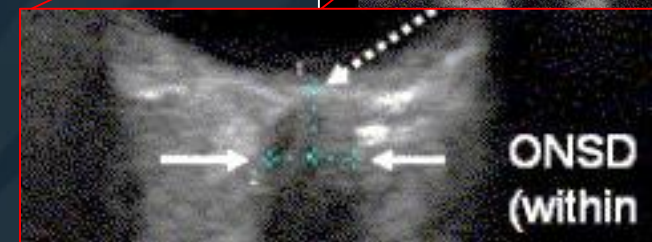
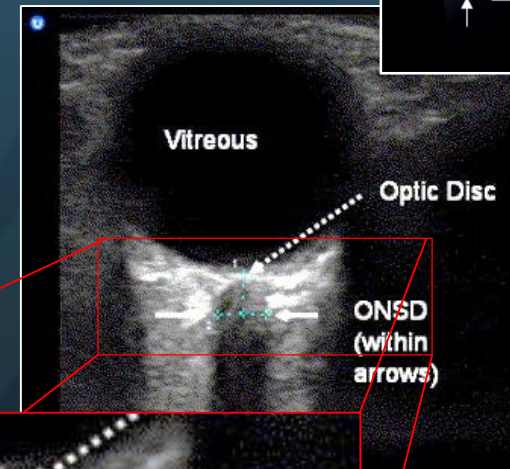
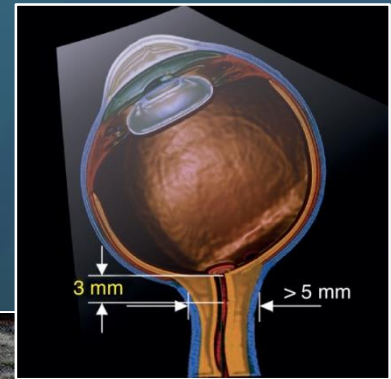
- FAST
- TBI
- Scoliosis
- Vascular Access / augmented reality

Optic Nerve Sheath Diameter (ONSD) and ICP

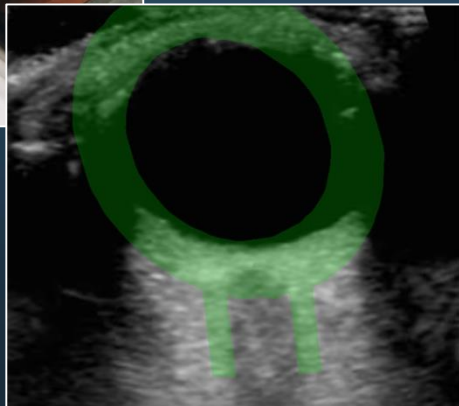
ONSD is an **accurate and quick monitor** for changes in ICP

Maissan IM , Dirven PJ , Haitsma IK , Hoeks SE , Gommers D , Stolker RJ - J Neurosurg. 2015 Sep;123(3):7437.

- 18 ICP-monitored patients in ICU
- Before, during, and after tracheal manipulation to increase ICP
- ICP above 20 mmHg is associated with dilation of ONSD > 5.0 mm
 - 20-30 mmHg = mild intracranial hypertension
 - 94% sensitivity
 - 98% specificity



Traumatic Brain Injury: Increased ICP



23 images

Compared to an expert

$$R^2 = 0.91$$

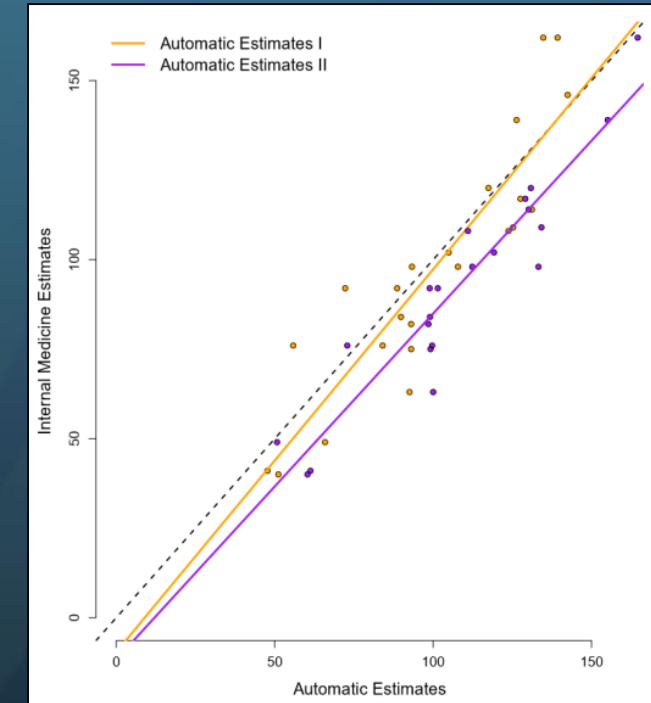
$$p\text{-value} = 2.0e-12$$

Compared with study mean

$$\text{Auto } R^2 = 0.82$$

$$\text{Expert } R^2 = 0.84$$

$$\text{Med. students } R^2 = 0.78 - 0.81$$

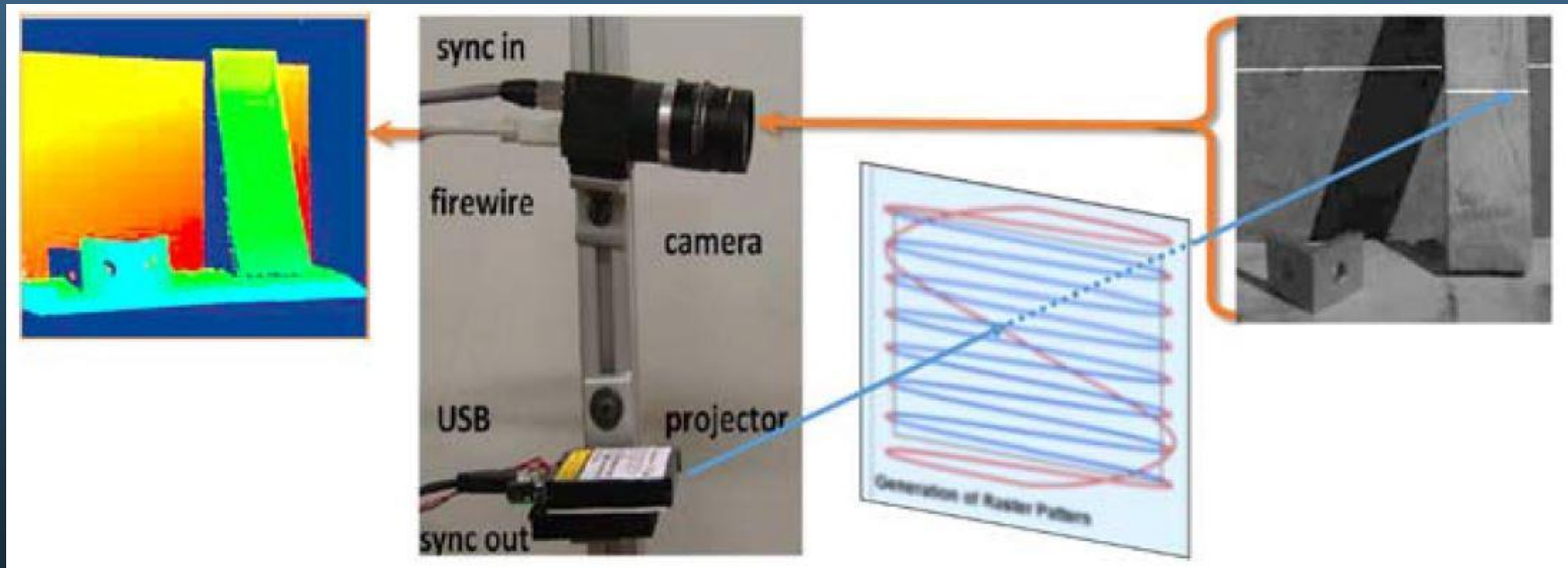


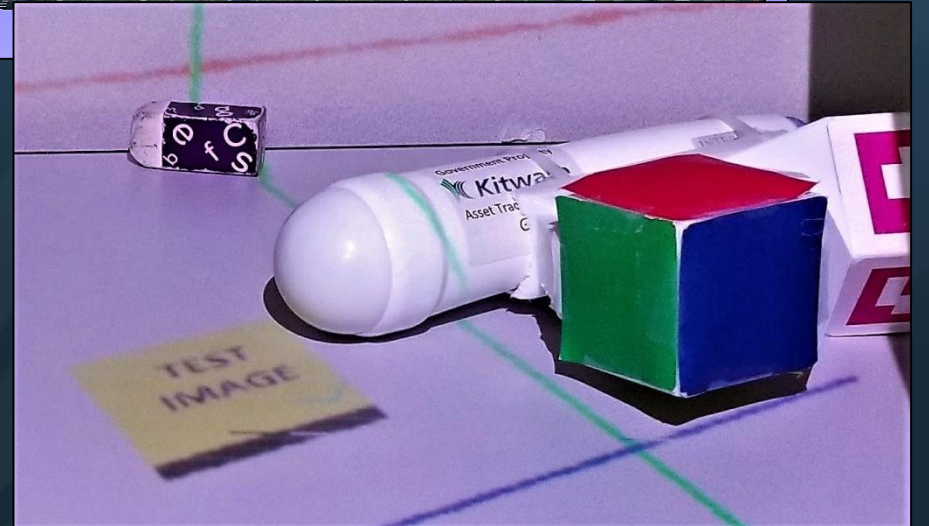
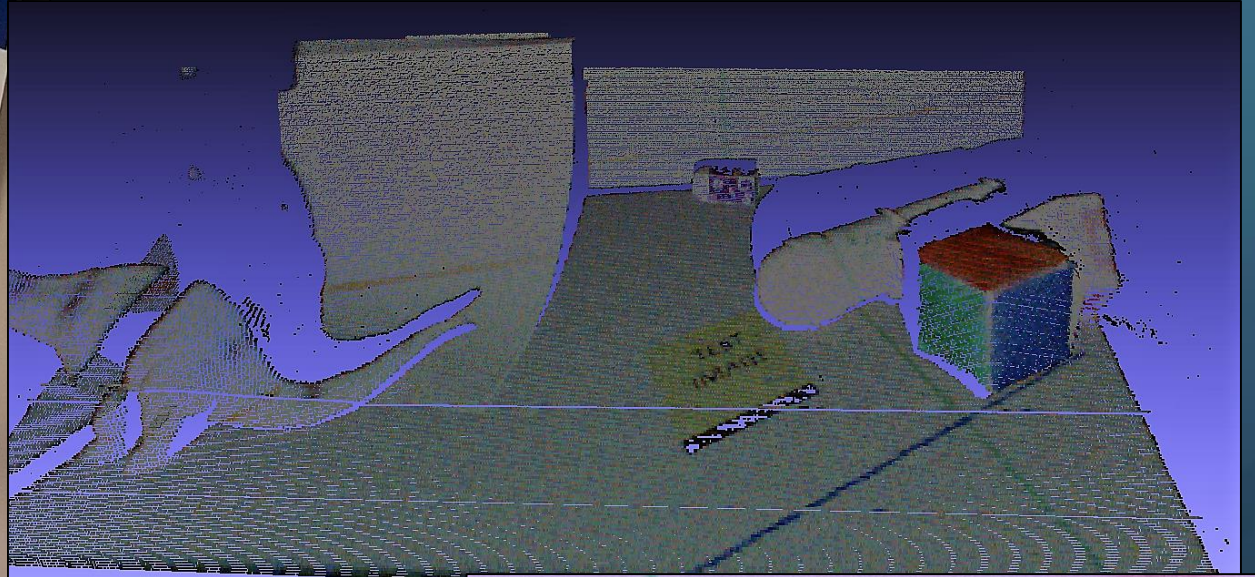
Outline

- FAST
- TBI
- Scoliosis
- *Vascular Access / augmented reality*

Ultrasound Augmentation

Carnegie Mellon University





Preliminary Results

