#### From Static to Dynamic Visualization of Real-Time Imaging Data

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### Real-Time Medical Imaging (1)

- Acquisition of live in vivo image data of the human body
  - Imaging of dynamic processes
     Cardiology (heart), gastroenterology
     (stomach & bowel), nephrology
     (kidney), hepatology (liver), (bladder),
     obstetrics (fetus)
  - Interventional imaging
     Surgery (e.g., tumor resections, neurosurgery, bypass surgery), biopsies







### Real-Time Medical Imaging (2)

- Radiography
  - Fluoroscopy

Only 2D projections, ionizing radiation

- Computed Tomography (CT)
  - CT Fluoroscopy

*low spatial/temporal resolution, high radiation doses* 

- Magnetic Resonance Imaging (MRI)
  - FLASH (Fast Low Angle Shot) MRI Only single/few slices, limited availability









#### **Basic Ultrasound Imaging**



### **Ultrasound Characteristics**



- Non-invasive
- Cheap
- High resolution
  - Spatially
  - Temporally
- Noise
  - Random
  - Speckle





### **Common Ultrasound Modes**



- 2D Ultrasound
  - B-Mode
- 3D Ultrasound
  - Static 3D imaging
- 4D Ultrasound
  - Dynamic 3D imaging
- Doppler Ultrasound
  - Color Doppler: directional
  - Power Doppler: non-directional
- Contrast Ultrasound
  - Microbubbles-based contrast agents
- Elastography
  - Mechanical tissue properties







## Challenges



- Real-time imaging means that no part of the visualization pipeline can be considered pre-processing
  - Limited computational budget
  - Degree of interaction limited
  - Constant changes

### Outline



- Visualization of 3D/4D ultrasound data
- Recent advances in
  - Filtering
  - Classification
  - Illumination
  - Fusion and Guidance







# From Static to Dynamic Visualization of Real-Time Imaging Data

#### FILTERING



## Filtering



 Noisy character of ultrasound imaging makes filtering particularly important for 3D visualization



### **Lowest Variance Filtering**



- Remove speckle and random noise
- Structure-preserving filtering
  - Determine local structure orientation
  - Filter along direction of lowest variance



#### **Local Structure Orientation**



 Sample local voxel neighborhood on on a sphere

#### **Directional Filtering**



 Streamline integration along direction of lowest variance FORWARD ----BACKWARD

#### Results





Solteszova el al. 2012: Lowest-Variance Streamlines for Filtering of 3D Ultrasound

## 4D Filtering (1)



- Acceptable complexity of filtering method is limited by the target frame rate
  - Idea: only filter voxels that contribute to the final rendered image
  - Problem: filtering changes data values and hence can affect visibility globally
  - Solution: conservatively estimate a voxel's visibility after filtering

### 4D Filtering (2)



• Only a fraction of voxels actually influence the final image due to transparency and occlusion



#### **Visibility-Driven Filtering**





### **Prediction of Filter Behavior**

- Opacity of a filtered value of minimum and maximum of a neighborhood
- Possible for all convolutionbased filters with normalized non-negative weights
- calculation

 Lookup tables for conservative visibility mask





### Results (1)





### Results (2)





Solteszova el al. 2014: Visibility-Driven Processing of Streaming Volume Data

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#### CLASSIFICATION



### Classification



- Mapping of data values to optical properties (usually color and opacity)
- Several challenges
  - Low dynamic range
  - Significant amount of noise and speckle
  - Varying intensities for the same tissue
  - Fuzzy boundaries

### **Variational Classification**



- Simultaneous denoising and opacity assignment
- Variational approach based on isovalue and gradient



### **Scale Space Filtering**



 Automatic adjustment of the global opacity transfer function based on scale-space filtering



**Hönigmann et al. 2003:** Adaptive Design of a Global Opacity Transfer Function for Direct Volume Rendering of Ultrasound Data

#### **Predicate-based Classification**

- Problem: classification of 3D ultrasound data for volume visualization
  - Standard 1D transfer functions don't work well for ultrasound
  - Additional attribute dimensions can help, but classification space becomes difficult to navigate
- Approach: define a set of point predicates which can be combined via logical operations





### **Predicate Library**



- Set of different local and non-local predicates  $P = (f_P: X \rightarrow \{true, false\}, \kappa_P, \delta_P)$ 
  - $-\kappa_P$  is an importance factor
  - $-\delta_P$  is the color modulation
- Examples of possible predicates
  - Range-based predicates
  - Direction-based predicates
  - Signal-to-Noise ratio predicate
  - Vesselness predicate
  - Confidence predicate
  - Label predicate

### **Predicate Setup**



- Simple widget to assign importances and colors
- Combination of predicates with Boolean operations (and, or, not)



Schulte zu Berge et al. 2014: Predicate-based Focus-and-Context Visualization for 3D Ultrasound

### **Visual Mapping**



- Importance-driven layered compositing, cf. [Viola et al. 2004, Rautek et al. 2007]
- High-importance layers receive higher visibility (depth relationships can be overridden)
- Predicates only affect hue and opacity, luminance comes from data values

### **Predicate Histogram**

- Sketch-based interface for predicate setup
- User draws positive and negative sketch
- Importance of each predicate is modulated accordingly



(a) Original Predicate Histogram





(c) Predicate Histogram After Applying Scribbles

### Results (1)



 Shoulder dataset: combines visualization of bone and muscle tissue



### Results (2)



#### • Path of the carotid artery is shown in red



### Results (3)



#### • Achilles tendon is shown in red





#### **Recent Developments in Ultrasound Visualization**

#### RENDERING





#### Volume Rendering (1)



## Volume Rendering (2)

![](_page_34_Figure_1.jpeg)

### **Local Volume Illumination**

![](_page_35_Picture_1.jpeg)

- Only a function of gradient direction and light source parameters
  - Volumetric absorption between light source and sample point is ignored  $\rightarrow$  no shadows
  - Multiple scattering is ignored  $\rightarrow$  no color bleeding effects

![](_page_35_Picture_5.jpeg)

conventional

rendering

![](_page_35_Picture_6.jpeg)

fetoscopic image
# **Light Propagation in Tissue**



- Human skin (and tissue in general) is translucent
  - Red penetrates deeper than blue and green light
  - Light scatters predominantly in forward direction
  - Light propagation tends to become isotropic after multiple scattering events



# **Fetoscopic Illumination Model**





Varchola 2012: Live Fetoscopic Visualization of 4D Ultrasound Data

# **Fetoscopic Illumination Model**





# **Direct Lighting (1)**



# Light is attenuated along its way through the volume





### **Direct Lighting (2)**



#### **Light Source Extent (1)**





hard shadows

soft shadows

#### **Light Source Extent (2)**





#### **Soft Shadows**



# Kernel Size (1)





shadow softness - low

shadow softness - medium

shadow softness - high

# Kernel Size (2)





shadow softness - low



shadow softness - medium



shadow softness - high

# **Fetoscopic Illumination Model**





Varchola 2012: Live Fetoscopic Visualization of 4D Ultrasound Data

# **Indirect Lighting (1)**



# Light is scattered multiple times before it reaches the eye











### Forward Scattering (1)





rendering without scattering



rendering with scattering

### Forward Scattering (2)





# **Fetoscopic Illumination Model**





### **Front and Back Lighting**





#### Light positioned in front





#### Light positioned behind the scene







# Local Ambient Occlusion (1)

- Evaluate the average visibility of each point
  - Perform sampling in a small spherical neighborhood
  - Modulate ambient illumination intensity by the result





# Local Ambient Occlusion (2)





# **Fetoscopic Illumination Model**





Varchola 2012: Live Fetoscopic Visualization of 4D Ultrasound Data



#### **Specular Highlights**



# **Fetoscopic Illumination Model**





Varchola 2012: Live Fetoscopic Visualization of 4D Ultrasound Data

# Implementation



- GPU-based implementation using DirectX
  - Available as *HDlive* in GE's latest generation of ultrasound machines (Voluson E8 / Expert)
  - Interactive performance of 15-20 fps limited by data acquisition





### Results (1)



conventional rendering



fetoscopic rendering



# Results (2)



#### conventional rendering



#### fetoscopic rendering



### Results (3)



### Results (4)





### Results (5)





photograph acquired with fetoscope [A Child is Born, Nilson and Hamberger]



fetoscopic rendering [Picture of the Month, Ultrasound in Obstetrics & Gynecology 38(5)]

### **Benefits**



- Approximates realistic illumination in real-time
- Robust against noise and artifacts
- Better 3D perception may have diagnostic benefits
- Currently investigating other application scenarios (e.g., cardiac)



**cleft lip:** better visibility of border and separation



down syndrome: inclanation of palpepral fissures

#### **Cardiac Ultrasound**







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### **FUSION AND GUIDANCE**



# **Fusion and Guidance**



- Fusion: combine multiple modalities to improve diagnostic value
  - Registered CT/MRI scans, blood flow, etc.

- Guidance: augment images with additional information
  - Orientation and navigation aids, etc.

# **B-Mode/Doppler Fusion**



- Integrated visualization of B-Mode and Doppler data
- Non-photorealistic silhouette rendering for reduced visual clutter



#### **Vector Flow Imaging Visualization**



- Vector Flow
   Imaging provides
   3D velocity
   information
  - Pathlets-based
     visualization
  - Pathline
     integration on the
     GPU



### **Anatomical Context**



- Tracked 2D probe registered with pre-interventional CT scan
- Cutways for unoccluded depiction of the ultrasound slice


### **Guidance in Liver Examinations**

- Couinaud segmentation: divides the liver into different sections dependent on the blood vessels
- Registration to a liver model for real-time Couinaud overlays during the scan







## **Cardiac Ultrasound Guidance**



 Real-time augmentation of the ultrasound slice using an animated heart model



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### CONCLUSIONS



# Conclusions (1)



- Selection of recent approaches for improved visualization of ultrasound data
- Importance of 4D ultrasound as a cheap and effective imaging modality is ever-increasing
- Technological advances (e.g. beamforming) offer continuous improvements in frame rate and image resolution
- Live 4D data is still very challenging and many problems remain unsolved

# Conclusions (2)



- Technical challenges
  - Real-time filtering, segmentation, registration, rendering, ...
- Visualization challenges
  - Integration of anatomy and physiology (more after the break)
  - Visualization of high-speed processes
  - Interaction with real-time visualizations
  - Quantitative visualization
  - Collaborative visualization



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