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A METHOD FOR AITIFACTS REMOVED FROM MRI OF BRAIN

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ABSTRACT

Improvement in detection and evaluation of brain abnormality and tissues detection is an important task in brain image analysis. Diagnosis quality of brain MR of brain images hampered due to the presence of artifacts. Small abnormalities detection hampered due to the presence of skull region of the brain. [1-4] Sometimes artifacts and skull have been treated as an abnormality in the automated system, and it hampers the intelligence system. Thus a computerized method requires pre-processed image as artifacts and skull removal. Pre-processing makes the image segmentation more accurate. In this paper, a pre-processing method for improvement of brain abnormality detection and diagnosis has been presented.

KEYWORDS: Brain Images, Segmentation, Artifacts and Pre-Processed Image.

INTRODUCTION

Automatic segmentation of brain tissues from MRI is a challenging process due to the variation in brain shapes and similarity of intensity values in the brain and nonbrain tissues. Artifacts and undesired tissues (skull) as non-brain region affect the quality of processing and may lead to automatic diagnostic confusion. [8-12] It is done for the purpose of clearing away non-brain backgrounds and reducing unwanted information from the MR images. The majority of skull stripping treats the brain as a single connected region separated from non-brain tissues by a rim of CSF. In reality, even with high-resolution, T1 weighted MR images, thin connections between the brain and other cranial structures exist in the form of dura and connective tissue lining venous sinuses. In the present day artifacts in MRI are mainly letters that contain the patient's pieces of information and image modality. [13-20]

The proposed pre-processing is very simple technique using the combination of binarization, wavelet decomposition, and computational geometric as major intermediate steps. It tested with a large number of MR images and produced good results. In pre-processing, method artifacts removal is considered as mandatory, and skull removal is optional. Artifacts removal is required for every post-processing technique, and skull removal is required for some abnormality detection like edema, tumor, stroke lesions and hemorrhage lesions, but sometimes for a particular type of hemorrhage, we need the distance of abnormal region from the skull. [21-40]

Review Works

Some automated and semi-automated skull stripping algorithms are available in the literature. Skull removal

using graph cuts^[41-52] relies on graph theoretic image segmentation techniques to position cuts that serve to isolate and remove skull. Region growing based^[53-81] method for coronal T1-weighted images plans to automatically detect two seed regions of the brain and non-brain by using the mask generated by mathematical morphological operations. Then the seed regions were expanded using 2D region growing algorithm. Another fully automatic brain extraction method^[82] using diffusion, run length encoding, and region labeling was developed for skull removal in T2 weighted axial MR brain images. Clustering and 2D Region Growing method^[83] for detecting the brain boundaries inside the skull was used to join the clusters and also remove the skull area. Authors are tested on four slices only thus method needed to improvement to process all the slices in the dataset. Robex method^[84] for skull stripping by using a shape model trained on healthy brains to be relatively insensitive to lesions inside the brain. Their results showed this method was better than Brain Surface Extractor (BSE), hybrid watershed algorithm (HWA) and brain extraction tool (BET). They used T1 weight images taken from glioblastoma patients.

A method based^[85] on histogram analysis and compared the segmentation accuracy between their proposed method and two widely used techniques, namely BSE and BET. Based on this factor, they reported that their proposed method outperforms these methods.

A deep convolutional learning^[86] architecture is used to skull removal but not limited to non-enhanced T1 images. When trained appropriately, it handles an arbitrary number of modalities including contrast-

enhanced scans. Its applicability to MRI data, comprising four channels: non-enhanced and contrast-enhanced T1w, T2w and FLAIR contrasts, is demonstrated on a challenging clinical data set containing brain tumors. A mathematical morphology method was implemented^[87] for the pre-processing of MR brain images for the improved segmentation of brain tumor based on mathematical morphology operations. The first part of that paper^[87] was an efficient method for the skull stripping of brain MR images based on mathematical morphology. In that paper, brain part was identified by the largest connected component in the image after binarization. The largest connected component is then dilated with a 3x3 square structuring element so as to preserve minute brain information in the output image. The holes in the resultant image were filled to make the brain a complete connected component. The resulting pixels are superimposed with the input image for getting the skull removed image. But the problem arises when skull and brain is connected then that method fails to identify the difference between brain and skull.

Most of these methods apply to specific a type of MR brain images and do not extract the brain completely in all the slices. Moreover, none of these presented methods give good performance when evaluated for large-scale data set. It is due to the complexity of the human brain, varying image contrast properties, image artifacts such as under-sampling, noise factor, variations in the image orientations and types.

Proposed Methodology

Artifacts removal is an essential task for normal and abnormality brain tissues identification. Skull elimination is another important step for abnormality segmentation. In the case of particular type of hemorrhage (e.g., chronic subdural hematoma) lesions segmentation skull information is required due to the distance measurement from the skull. Thus in preprocessing method skull removal is not mandatory for some few cases, it depends on applications. Figure 1 shows a flowchart of pre-processing of brain normal and abnormal tissue detection.

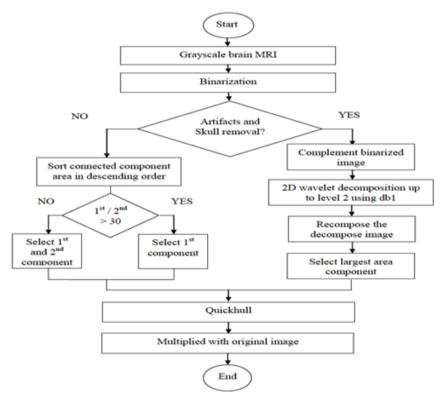


Figure 1: Flow diagram of pre-processing for brain abnormality and normal tissue detection.

A brain MRI first converted into a grayscale image, and then global threshold intensity has been calculated using standard deviation method. An image I[m,n] and h are the intensity of each pixel of the gray image. Thus the total intensity of the image is defined by.

$$T = \sum_{\substack{I \\ (1)}} h[I]$$

The average intensity of the image is defined as the mean of the pixel intensity within that image, and the average intensity is defined as $I_{\rm avg}$ by.

$$I_{avg} = \frac{T}{m \times n}$$

<u>www.ejpmr.com</u> 504

The standard deviation S_d of the intensity within an image is the threshold value of the total image is defined by:

$$S_d = \sqrt{\frac{1}{(m \times n) - 1} \sum_{m,n \in I} (I[m,n] - I_{avg})^2}$$
(3)

Here the threshold intensity S_d as of the entire image is unique. So, the binary image of an image I[m,n] is BI[m,n] is given by

$$BI[m,n] = 1$$
 $ifI[m,n] \ge S_d$
 $BI[m,n] = 0$ $ifI[m,n] < S_d$
(4)

Brain region, skull and many artifacts are converted into white pixels. This binarization step helps to perform connected generation in artifacts removal and wavelet decomposition in artifacts and skull removal. After binary image generation, we have an option of artifact and skull removal. Artifacts and skull removal is the one option and only artifacts removal as another option.

Artifacts Removal Intermediate Steps

Artifacts removal needs to perform following intermediate steps after performing above steps

(a) Compute the areas of each connected components, and descending order of areas are stored in an array. Connected component labeling works by scanning an image, pixel-by-pixel to identify connected pixel regions, i.e. regions of adjacent pixels which share the same set of intensity values $V=\{1\}$. The a. connected components labeling operator scans the image by moving along a row until it comes to a point p (where p denotes the pixel to be labeled at b. any stage in the scanning process) for which $V=\{1\}$. When this is true, it examines the four neighbors of p which have already been encountered in the scan (i.e. the neighbors (i) to the left of p, (ii) above it, c. and (iii and iv) the two upper diagonal terms). Based on this information, the labeling of p occurs as follows: i) If all four neighbors are 0, assign a new label to p, else ii) if only one neighbor has $V=\{1\}$, d. assign its label to p, else iii) if more than one of the neighbors have $V=\{1\}$, assign one of the labels to p and make a note of the equivalences.

After completing the scan, the equivalent label pairs are sorted into equivalence classes, and a unique label is assigned to each class. As a final step, a second scan is made through the image, during which each label is replaced by the label assigned to its equivalence classes.

(b) The connected component with the maximum area and second highest area are found out from descending order array. Then ratio between highest and second highest has been performed for the identification of head region (or brain without artifact). i) If the ratio is greater than high (e.g., >30), then keep only highest area and remove all other components. Ratio high (e.g., >30)

signifies that the skull and brain are connected as one component, and thus it produces very high ratio between the brain and small artifact. That ratio in that case always produces high because artifacts are principally letters which have very less area individually. ii) If the ratio is less than 30 (high value is taken as 30), then select highest and second highest components and remove others components. If skull and main brain region are disconnected, then these two are treated as highest and second highest components. The ratio between the skull and main brain never exceeds 30.

Artifacts and Skull Removal Intermediate Steps

Artifacts and skull removal both need to perform following intermediate steps after performing above steps:

Complement the binarized image that helps for wavelet decomposition because we want to disconnect main brain region from skull where both are connected.

Two-dimensional wavelet decompositions are done using 'db1' wavelet up to level two. The connection between brain and skull region are removed when we recompose the image.

Re-composition of the image is done using the approximate coefficient of the previous step. Then resize the image of the previous step to the original size and recomplement of the image.

Select a largest connected area of from connected components and remove other components. This largest component is the brain without skull region in MRI.

After performing the artifacts or artifacts and skull removal steps, we use some common procedure. The binary image contains white pixels are losses some information in the border as well as inside the bounded area. To make it perfect as possible we perform quickhull^[88] on white pixels. The quickhull algorithm uses less space than most of the randomized incremental algorithms and executes faster for inputs with non-extreme points. Computation time is less, and also, quickhull uses merged facets to guarantee that the output is clearly convex. Then that convex binarized image is multiplied with the original image to produce the final results.

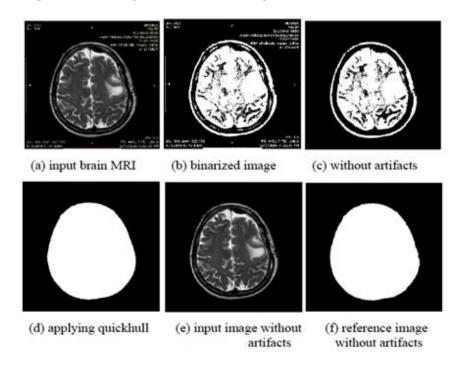
Complexity

The time complexity regarding big-O for proposed preprocessing method has been described. Assuming input image has m number of row and n number of column and if some row = number of column = n then to compute the binarized image $O(n^2)$ time required. Selection of maximum area require O(n) time, and convex hull computation takes $O(n\times n \log n)$ time, and multiplication of each image pixel require $O(n^2)$ time. Thus the total time complexity: $T(n) = O(n^2) + O(n^2) + O(n\times n \log n) + O(n) \approx O(n^2 \log n)$.

RESULTS AND DISCUSSIONS

Proposed method gives suitable results for different MRI of brain images in artifacts removal as well as artifacts and skull removal. The results below have been tested visually and metrically. The procedure of proposed methods has been described above, and figures below show each functional step of the proposed methods. Figure 2 below shows the intermediary results of different intermediate steps of artifacts and skull removal methodology. Brain MRI image (a) is taken as input and converted it to a grayscale image for next step binarization. (b) Is the binarized output using the standard deviation based threshold intensity for the input image (a), Here maximum of brain region along with artifacts are very clearly visible in the binary image. This visibility of maximum brain tissues and artifacts are very useful for next steps. It is clear that the ratio of brain to artifact gives very high (i.e. above 30). The ratio between the skull and internal brain tissue will not exceed 30 in any case. So, depending on the ratio between highest to second highest component brain and skull has been selected. (c) Is the output after removing artifacts from

the binary image but some loss of information may possible on the border of the image as well as inside of the image. To reduce the loss of information quickhull method has been used and the result is shown in (d). Pixel-wise multiplication has been performed between the input image (a) and quickhull image (d) and input image without artifacts is shown in (e). Reference image of without artifacts for input image has been shown in (f). Artifact removal by proposed method and reference image shows similar by visually which indicates good pre-processing. Different intermediate steps are required for artifacts and skull removal method. The complement of the binarized input image is shown (g) that help wavelet decomposition step. (h) Is output after applying wavelet decomposition using 'db1' wavelet up to level two. Using wavelet decomposition, we reduce the information within the image. If any connection exists in between skull and main brain region, then wavelet decomposition helps to disconnect between that connections. Due to the reduction of size in wavelet decomposition we recompose and resize the image to the initial size. The re-complemented and recomposed image has been shown in (i). Selection of largest area as the brain is easier as we disconnect the skull and main brain and largest area have been shown in (j). Some losses of information in (j) and to recover this loss quickhull method applied on (j). Applying quickhull generated correct result has been shown in (k). Then (l) is brain image without any artifacts and skull using the pixelwise multiplication between the input image and convex image. Reference binary image of artifacts and skull removal for input (a) has been shown in (m). In visual prospect, both proposed method result and the reference image are almost similar.



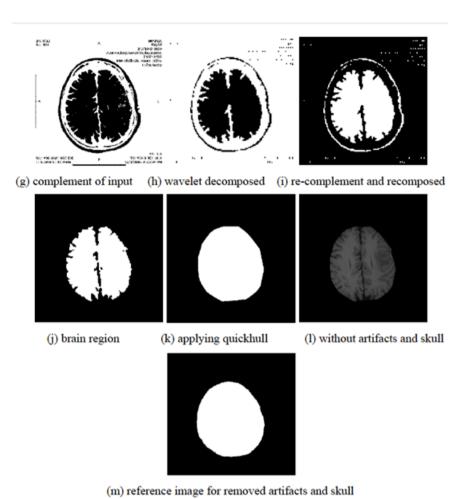


Figure 2: Output of different intermediate steps of artifacts and skull removal methodology. (b) is the binarized output for input image (a), (c) is the output after artifacts removal, (d) is convex hull output on image (c), (e) is input image without artifacts, (f) is reference image of without artifacts for input image (a), (g) is complement of inputted binarized image (b), (h) is output after applying wavelet decomposition, (i) is re-complement and recomposed result on image (h), (j) is the output after removing skull region, (k) is result after applying convex hull to generate correct result, (l) is brain image without any artifacts and skull, and (m) is reference binary

Performance Measurement

Artifacts removal technique can remove the artifacts if any artifacts present in the brain MRI. Proposed method is tested on a large dataset and produce excellent results except for connected artifact with the original brain portion image. Proposed technique is very helpful in the sense of brain tissues detection. Artifacts and skull removal technique is also to remove skull and artifacts for different images. The correct elimination of skull and artifacts will reduce false detection in abnormal tissues detection. Measure the performance by visually may be biased. Thus some performance evaluation metrics are used to evaluate the error and accuracy with respect to the reference image.

image of artifacts and skull removal for input (a).

The accuracy is used to evaluate the performance of the proposed methods are the Relative area Error (RAE or RE), Kappa Index (KI), Jacard Index (JI), Correct Detection Ratio (CDR) and False Detection Ratio (FDR). A critical problem faced in performance evaluation of

artifacts and skull removal method is the lack of a gold standard. Here we use ground truth suggested by a radiologist for the comparison with the automated method and measures their performance with the help of RE, KI, JI, CDR, FDR. [89, 90] Let AS, and MS denote the area of the automatically segmented (AS) and manually segmented (MS) regions of the MR brain images. The Relative Error (RE) for the segmented region can be calculated as a division of the difference between 'AS' and 'MS' to 'MS.' RE in percentage is given below.

$$RE = \frac{|AS - MS|}{MS} * 100\%$$

RE measure the relative area difference with respect to the manual ground truth segmented, in other words, we can say how much it differ from actual results. A method

could be better when RE value is less, so the best method would be the minimum value of RE. The Kappa Index (KI) between two areas is calculated by the following equation (6).

KI(AS, MS) =
$$\frac{(2|TP|)}{(|AS| + |MS|)} * 100\%$$

Here TP is the intersection of pixels between MS and AS, called true positive (TP), and it determines the correctness of method. KI determine correctness with respect to the automated and manual segmentation. KI is also represented as similarity index, which is sensitive to both differences in size and location. A method could be better when KI value is more, so the best method would be maximum value of KI. The Jaccard Index (JI) between two areas is represented as follow:

$$JI(AS, MS) = \frac{|TP|}{|TP + FN + FP|} * 100\%$$

Here false positive FP = AS - TP determine how much AS deviated from true positive and false negative FN = MS - TP determine how much MS deviated from true positive. This metric is further susceptible to variation since both denominator and numerator change with rising or falling overlap. Correct detection ratio (CDR) or sensitivity is defined by the following equation.

$$CDR = \frac{|AS \cap MS|}{MS} * 100\%$$

False detection ratio (FDR) is determine by

$$FDR = \frac{|AS - TP|}{MS} * 100\%$$
(9)

A Higher value of correct detection ratio and lower value of false detection ratio means the good results. A method could be better when JI and CDR value is more and less value of FDR so that the best method would be the maximum value of JI, and CDR and the minimum value of FDR. Different performance metric (AS, MS, RE, TP, FP, FN, KI, JI, CDR, FDR) has been shown in Table below for 0ten images^[7] for evaluation errors and accuracy of our results. Proposed method has been tested on 450 images from different dataset.^[5, 6, 7]

Segmented area of brain and brain without skull using proposed method with 341×341 image size has been shown in Table 1. Area of reference segmentation and the intersection between the reference and proposed method are also displayed in Table 1.Intersection pixels determines the exact number of pixels matches between automated segmented and manual (reference) segmented. The intersection nearer to the automated and manual segmentation indicates good segmentation and its intersection value has been shown in Table 1.

Table 1: Area of without artifacts and brain without skull using proposed and manual segmentation with their intersection.

Image	Without Artifacts			Brain Without Skull		
sequence	Automated	Manual	Intersection	Automated	Manual	Intersection
1	44246	45148	44232	30423	31062	30375
2	43672	44484	43649	28210	29125	28189
3	44135	44492	44125	30156	30483	30126
4	43581	44007	43389	29479	30282	29442
5	45278	45392	45198	30281	30933	30241
6	44288	45183	44206	29940	30426	29937
7	43218	44090	43183	28943	29471	28941
8	43826	44164	43820	29781	30282	29768
9	43002	44083	42960	29162	30001	29153
10	43539	44006	43502	29872	31206	29866

In medical imaging low error is required as much as possible because increased error reflects the wrong diagnosis. Removing artifacts and skull by keeping all necessary information (soft tissues of the brain) is the key goal of pre-processing. The relative area error (RE) and false detection ratio (FDR) for the brain with a skull (artifact removal) and without skull (artifacts and skull removal) are shown in Table 2.

Hormance metric								
Image		RE	FDR					
sequence	Without	Brain Without	Without	Brain Without				
-	Artifacts	Skull	Artifacts	Skull				
1	1.99	2.05	0.03	0.15				
2	1.82	3.14	0.05	0.07				
3	0.80	1.07	0.02	0.09				
4	0.96	2.65	0.43	0.12				
5	0.25	2.10	0.17	0.12				
6	1.98	1.59	0.18	0.01				
7	1.97	1.79	0.07	0.01				
8	0.76	1.65	0.01	0.04				
9	2.45	2.79	0.09	0.03				
10	1.06	4.27	0.08	0.02				

Table 2: RE and FDR performance metric

From the above table, all RE values in without artifacts are less than 3, and RE values in the brain without skull are less than 5. FDR values for both without artifacts and brain without skull are less than 1. RE less means that less over and under-segmentation, and FDR less means less false detection. In our preprocessing FDR and RE, both are very fewer values which indicate a good preprocessing. The column chart representation of RE and FDR values for ten images are shown in Figure 3 below.

From column chart, it is clear that maximum RE value is less than 3 and maximum FDR value is less than 2. Thus proposed pre-processing method is useful for brain abnormality detection as it generates a very low error.

The usefulness of pre-processing method also depends on correct segmentation or pre-processing. The values of different accuracy metrics KI, JI and CDR for preprocessing have been shown in Table 3 below.

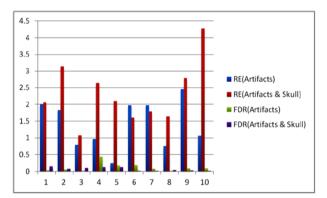


Figure 3: Column chart representation of RE and FDR metrics of preprocessing method.

Table 3: KI, JI, and CDR performance metric.

Image sequence	KI		Л		CDR	
	Without Artifacts	Brain Without Skull	Without Artifacts	Brain Without Skull	Without Artifacts	Brain Without Skull
1	98.96	98.80	97.94	97.64	97.97	97.79
2	99.03	98.33	98.07	96.72	98.12	96.78
3	99.57	99.36	99.15	98.73	99.18	98.82
4	99.08	98.53	98.16	97.11	98.60	97.22
5	99.68	98.80	99.39	97.64	99.57	97.76
6	98.82	99.18	97.66	98.38	97.83	98.39
7	98.92	99.09	97.86	98.19	97.94	98.20
8	99.60	99.12	99.21	98.26	99.22	98.30
9	98.66	98.55	97.36	97.14	97.45	97.17
10	99.38	97.80	98.77	95.69	98.85	95.71

Both without artifacts and brain without skull generates KI value greater than 98%. Thus this high KI indicates correctness with respect to the automated and manual

segmentation. As KI is sensitive to both in size and location thus with respect to similarity measurement proposed pre-processing generates very good accuracy.

JI values for both methods are greater than 97% that indicates good accuracy. CDR values for both methods are greater than 97% that signifies pre-processing technique correctly segment the desired region of the brain.

The column chart representation of KI, JI and CDR values for ten images are shown in Figure 4.

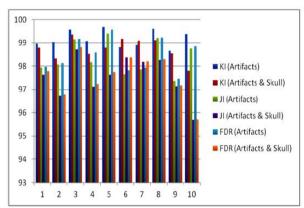


Figure 4: Column chart representation of KI, JI and CDR metrics of pre-processing method.

Proposed pre-processing technique generates very high accuracy which is clearly visible from column chart. High accuracy means correct identification, and it can be used as pre-processing. In another context, high accuracy increases the chances of good post-processing because good abnormality detection technique depends on good pre-processing.

The average value of performance evaluation metric RE, FDR, KI, JI, and CDR for ten images is shown in Table 4 below.

Table 4: Average value of error and accuracy metric.

Method name	RE	FDR	KI	Л	CDR
Artifacts	1.41	0.12	99.17	98.36	98.47
Artifacts and Skull	2.31	0.07	98.76	97.55	97.61

The average value of different error metrics is very less in both artifacts removal and artifacts and skull removal techniques. Average values of different accuracy metrics are also very high for both artifacts removal and artifacts and skull removal techniques. Thus a pre-processing with very high accuracy and very low error metric represents good pre-processing techniques.

CONCLUSIONS

In this paper, a fully automatic method for artifacts and skull removal of brain MR images using computational geometry, wavelet decomposition, and thresholding as intermediate steps has been described. Thresholding using standard deviation method is the key intermediate step to correct pre-processing of MR images. The proposed pre-processing method has high accuracy and low error rate for different MR images. This pre-processing is used to reduce the false detection. Thus it

increases the diagnosis quality of disease from MRI of the brain by a computer system. Thus reprocessing with low error and high accuracy does not hamper the post-processing of intelligence system. The proposed method is very useful and important pre-processing for correct automated detection of brain abnormalities. This pre-processing method is used in abnormalities detection, segmentation and classification and tissues identification in this research.

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