

# CLINICAL DATA ANALYTICS & RADIOMICS

**Bhanu Prakash KN**  
Principal Investigator

Bioinformatics Institute, A\*STAR

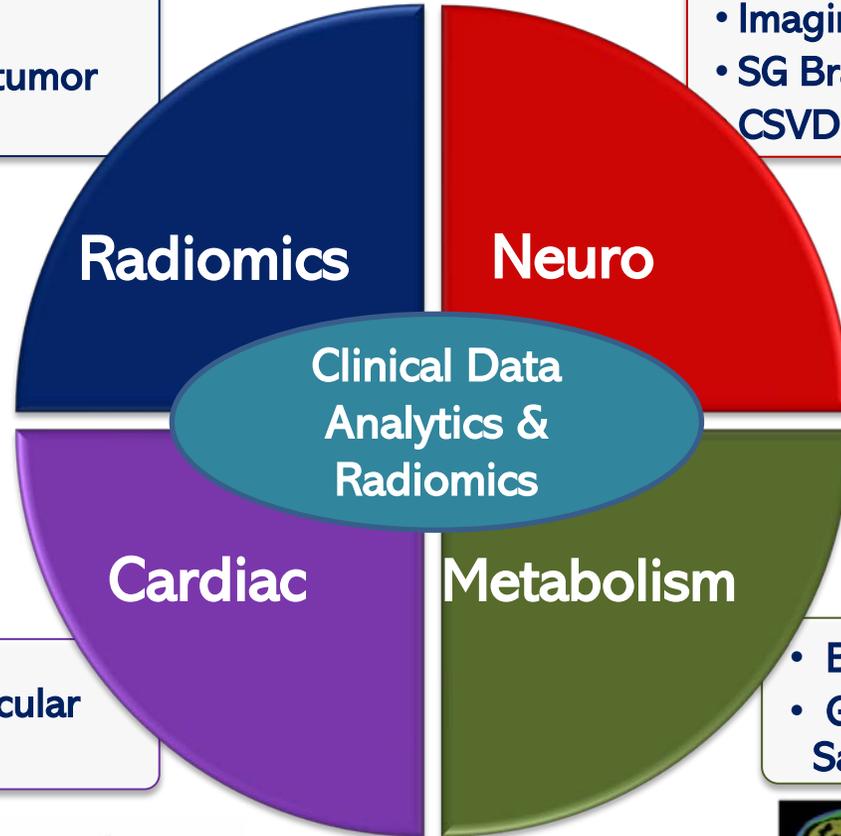
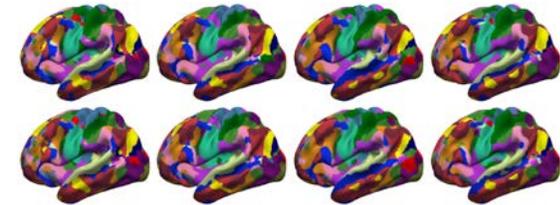
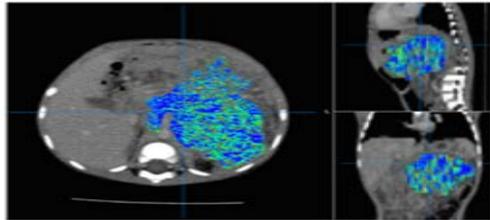
29<sup>th</sup> March 2022

# Overview -



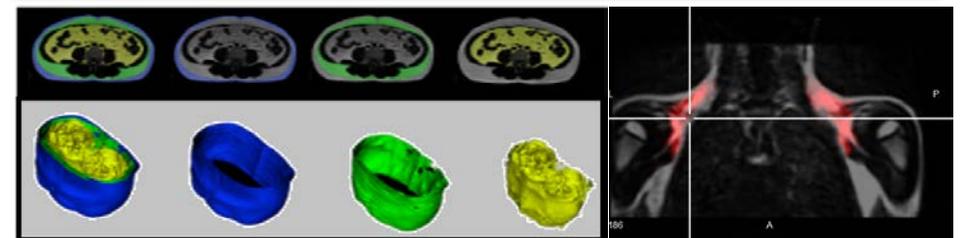
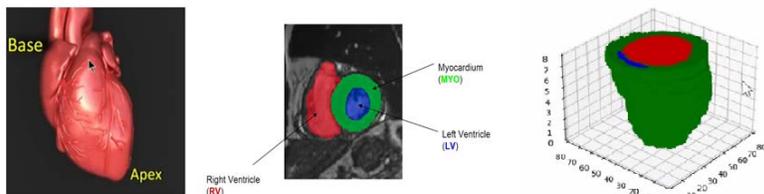
- Multi-modal imaging based Pediatric brain / non-brain tumor analysis

- Imaging biomarkers for Psychiatric disorders
- SG Brain: Normative ageing brain template CSVD & Neurodegeneration



- Characterization of Cardiovascular changes in SG population.

- Brown Adipose tissue in Children
- Geriatric cohort study - Body composition / Sarcopenia



# Obesity & Risk Factors



## Singaporeans and obesity

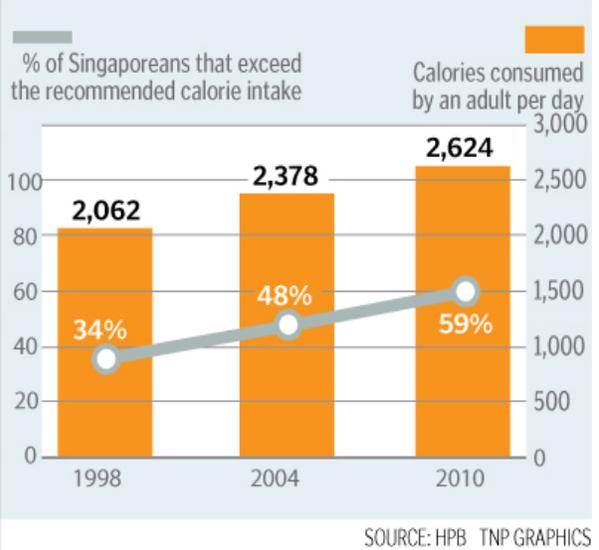
Overweight sets in during early childhood. **10% of five-year-olds** are overweight.

**3kg heavier** Weight increase of Singaporeans, on average, compared to a decade ago.

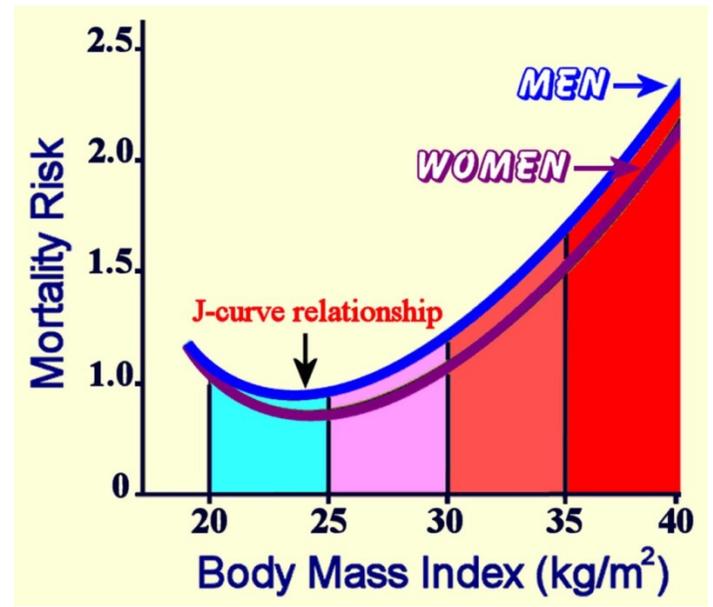
The 11- to 12-year-olds today are more likely to be **obese or severely obese**, compared to 20 years ago.

**70%** of children who were overweight at age seven stayed overweight as adults.

Obesity in Singapore is projected to hit **15% by 2024** if nothing is done. Currently, it is 11%.



## Health Risks & Burden on Healthcare



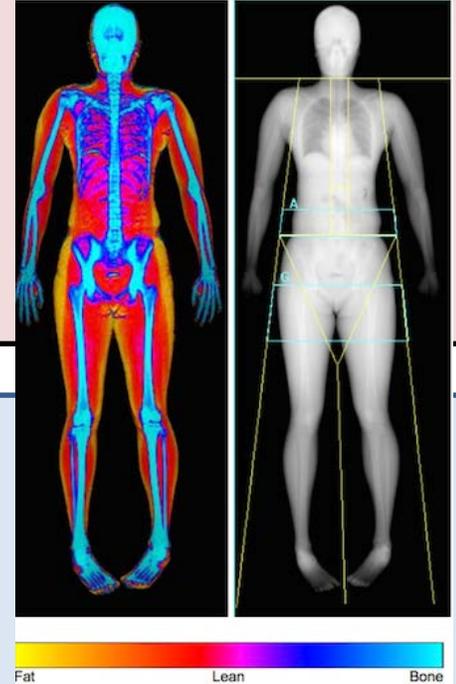
# Obesity Management

Singapore have declared war on obesity.

Understanding the phenotypes & genotypes of obesity is crucial for profiling & management of the condition.

Quantification of obesity helps

- monitoring the changes due to interventions,
- visualization of fat compartments,
- inter-ethnicity differences,
- inter – and intra-subject changes etc. which are part of the large cohort studies.



BMI is not an ideal metric – Same BMI subjects have different fat distribution

- Imaging – CT / MR best way to quantitate – Radiation / Expensive
- Different fat compartments influence risks differently.
- Single location (L3) vs L1 – L5 profiling – Variability in estimation
- MR – Breath hold sequence, issues with motion, variability in data – Anatomical / person, fat /water swaps
- Manual segmentation is time consuming & laborious

**Sarcopenic obesity** is a new class of obesity in older adults in which **low skeletal muscle mass** is coupled with **high levels of adiposity**.





# CAFT: a deep learning-based comprehensive abdominal fat analysis tool for large cohort studies

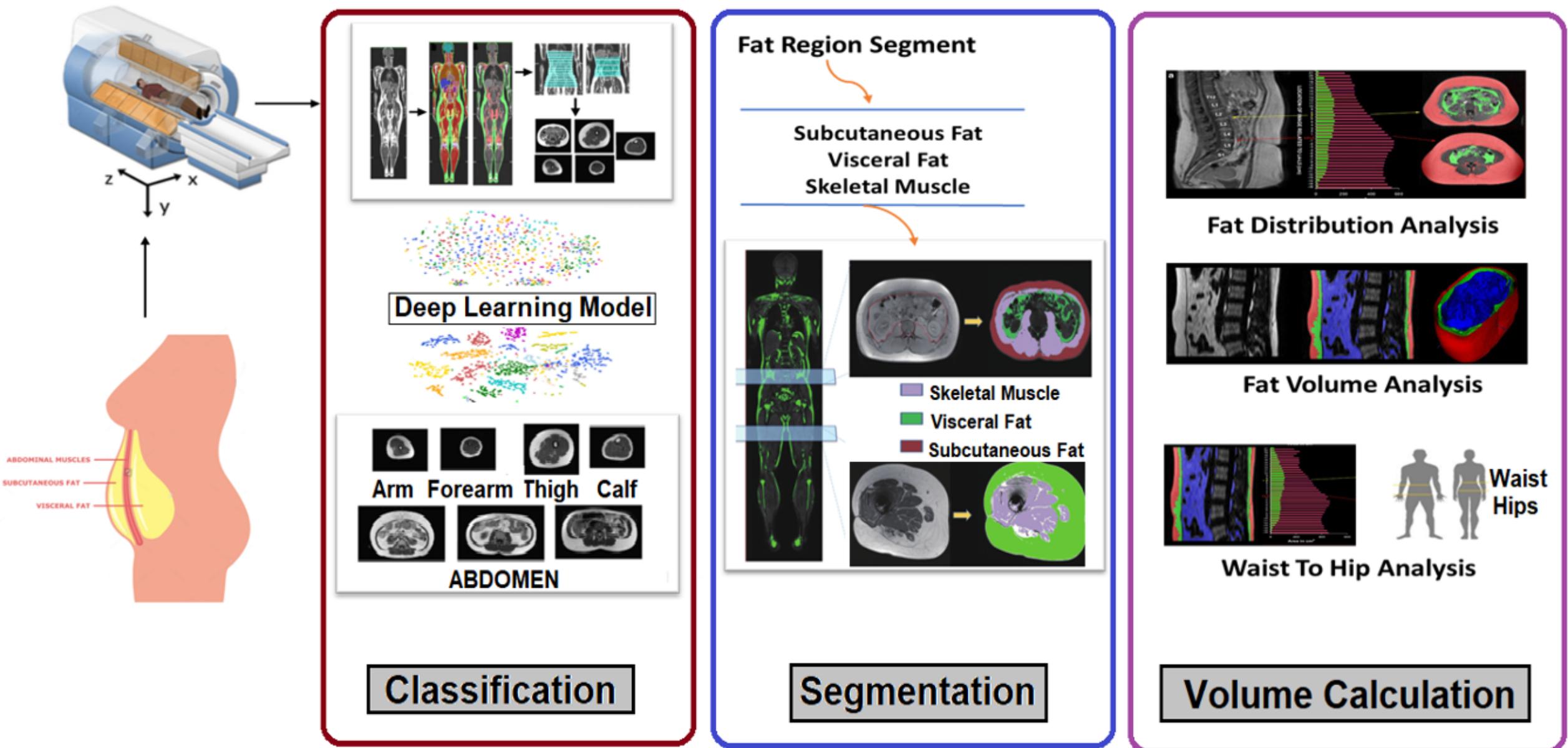
Research Article | [Published: 02 August 2021](#)

## CAFT: a deep learning-based comprehensive abdominal fat analysis tool for large cohort studies

[Prakash KN Bhanu](#) , [Channarayapatna Srinivas Arvind](#), [Ling Yun Yeow](#), [Wen Xiang Chen](#), [Wee Shiong Lim](#) & [Cher Heng Tan](#)

*Magnetic Resonance Materials in Physics, Biology and Medicine* (2021) | [Cite this article](#)

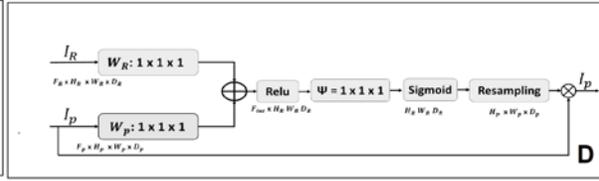
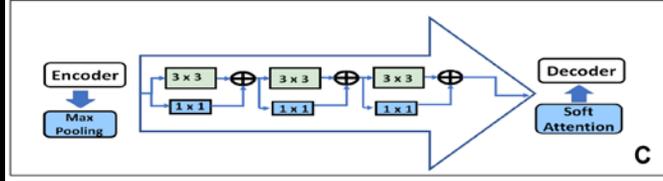
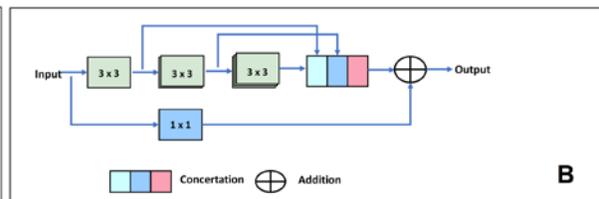
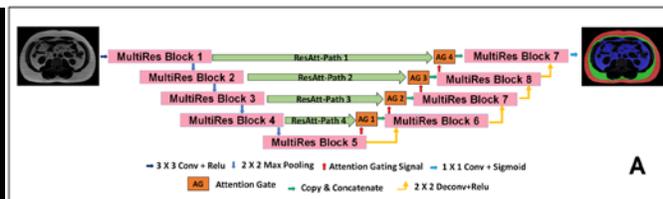
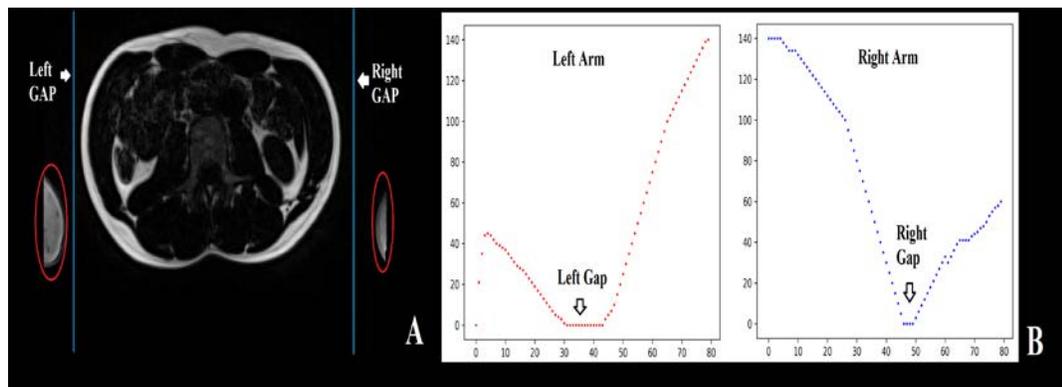




- End To End Human Metabolic Fat Analysis Framework
- Automatic Fat Analysis Report Generation
- Total Assessment Time: 5 mins per patient



# Per-Processing – Arm Removal

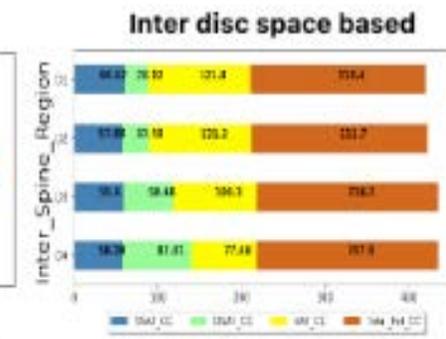
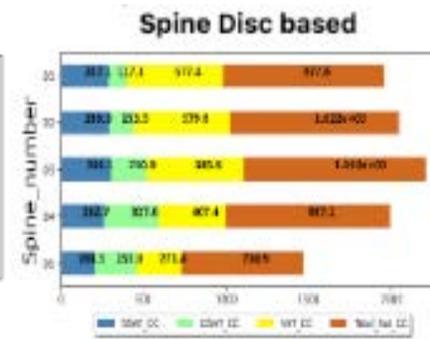
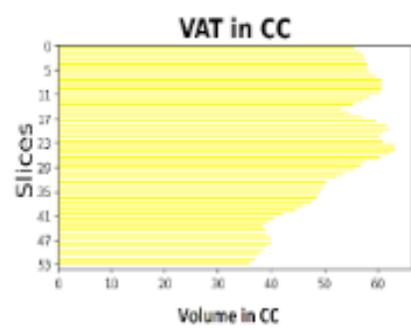
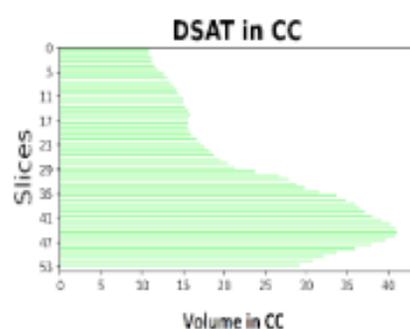
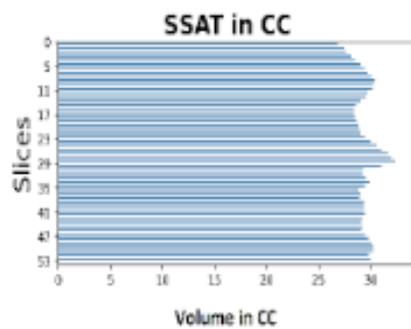


## Proposed MultiRes-Attention

# Post-Processing – Spine Region Extraction



# Abdominal Fat Quantification





# FAT Segmentation & Analysis Tool

**FAT Segmentation & Analysis Tool**

**Segmentation**

- Total Fat Region
- FAT Compartments
  - SSAT Region
  - DSAT Region
  - VAT Region
- 3D Visualize
- Analysis Graphs
  - Total Fat Volume
  - SubRegion Volume
  - Spine Fat Volume
  - Spine Fat Percent

**Calculate BMI**

Height (m): 1.70  
Weight (kg): 64  
BMI kg/m<sup>2</sup>: 21.89  
Waist-Hip Ratio: 0.94  
Hip (cm): 74

**Fat Percentage**

- SSAT: 35.9%
- DSAT: 28.3%
- VAT: 35.9%

Region	Volume (CC)
SSAT in CC	1418.0
DSAT in CC	1290.0
VAT in CC	2678.0
Total Fat in CC	5386.0

# Correction Tool

**Abdominal Fat Editing Tool**

**Load Image**

Original Image: subject\_5\_T1.nii  
Ground Truth Image: subject\_5\_tabel.nii

**Segmentation**

Off  On

- All
- SSAT
- DSAT
- VAT

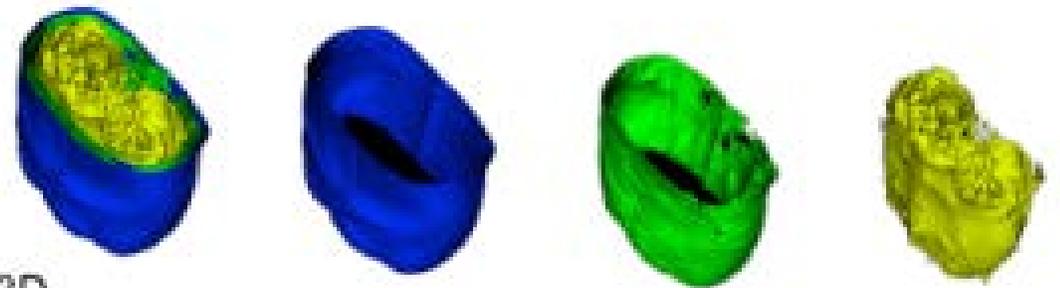
Additional drawing using free hand  
Removal of region using free hand  
Confirm drawing

Original  Edited

**Save Edited Segmentation**



2D

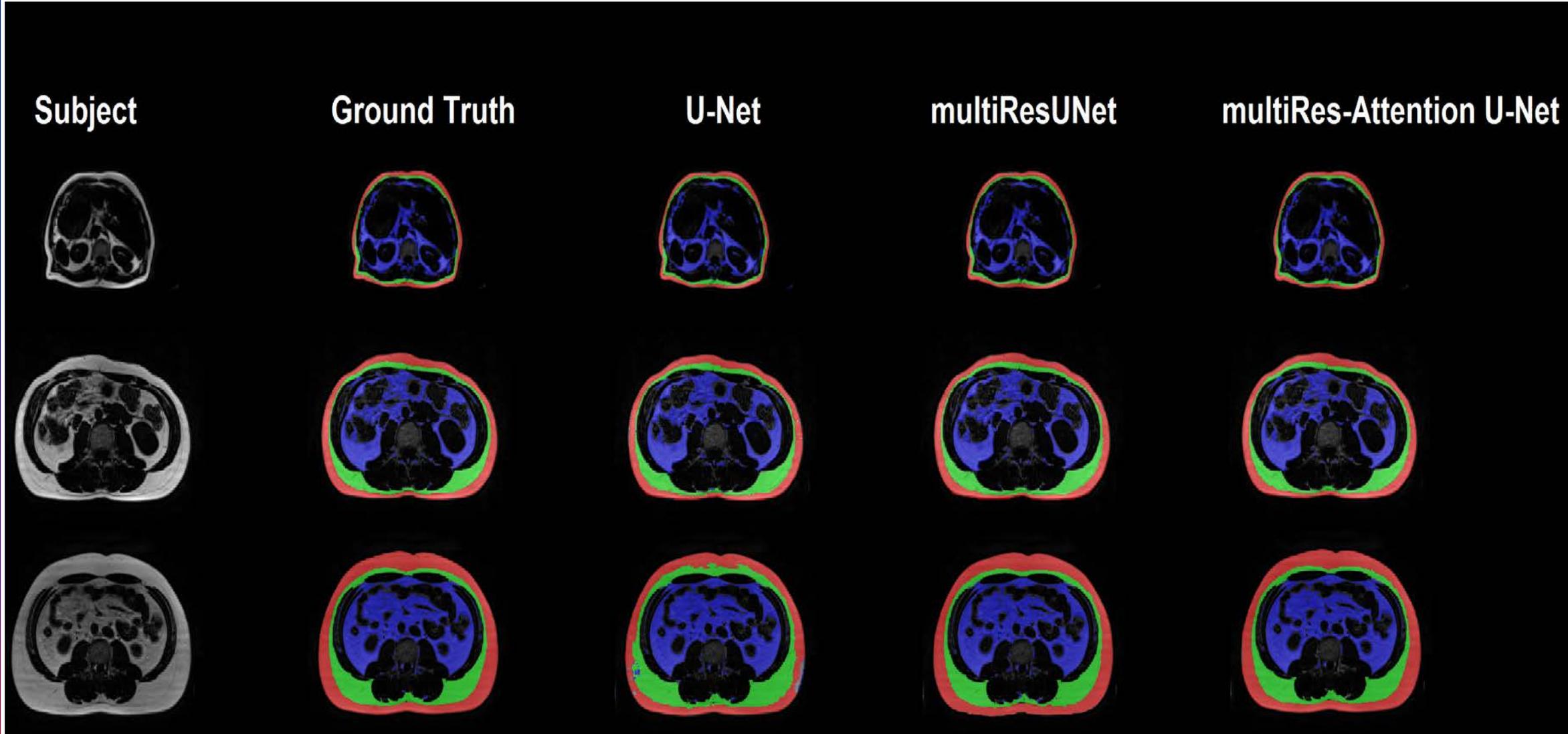


3D

# MultiRes-Attention Deep Learning Approach for Optimal Segmentation of Abdominal Adipose Tissue Compartments



CREATING GROWTH, ENHANCING LIVES

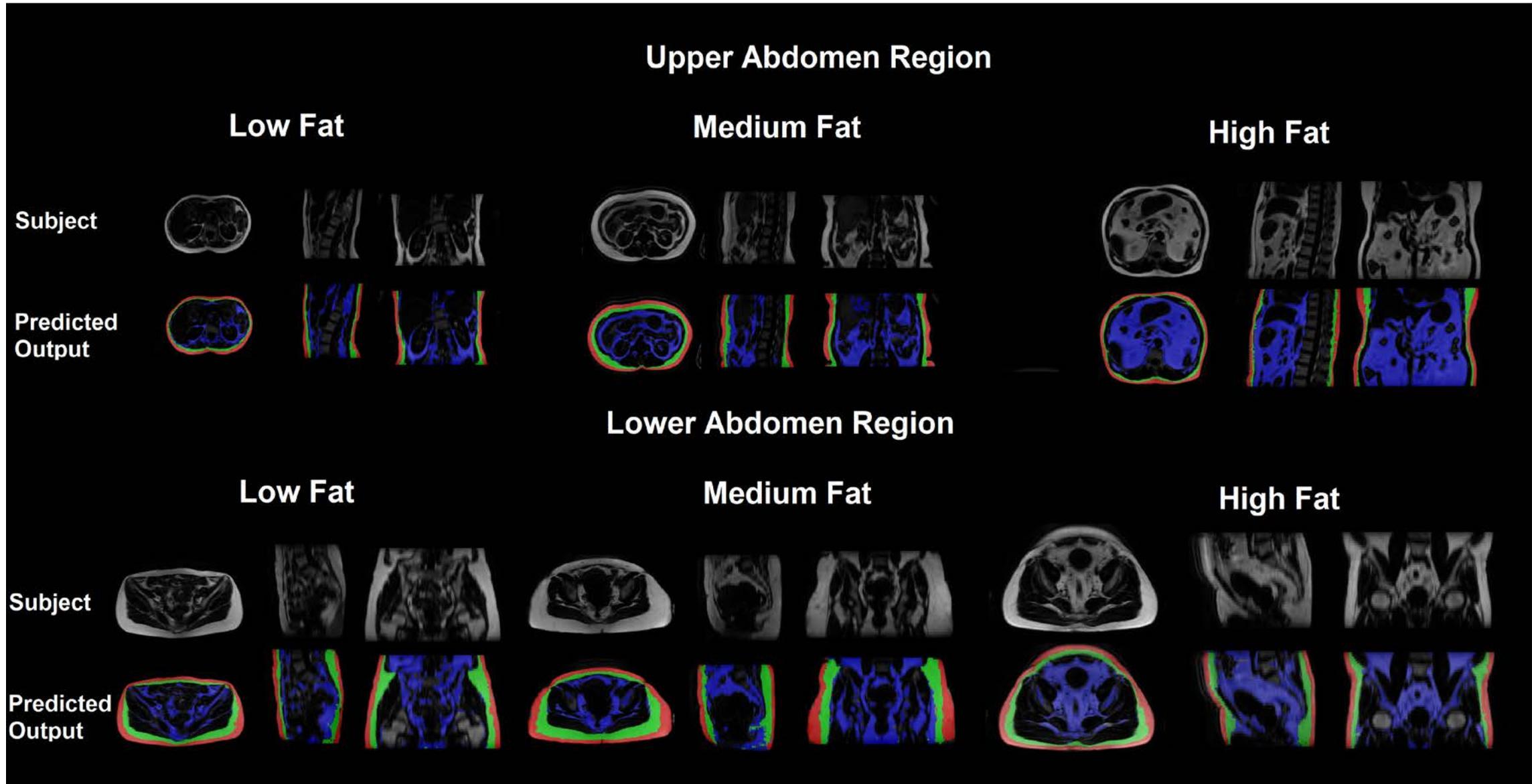


Sample Output of the proposed deep learning architecture and comparison

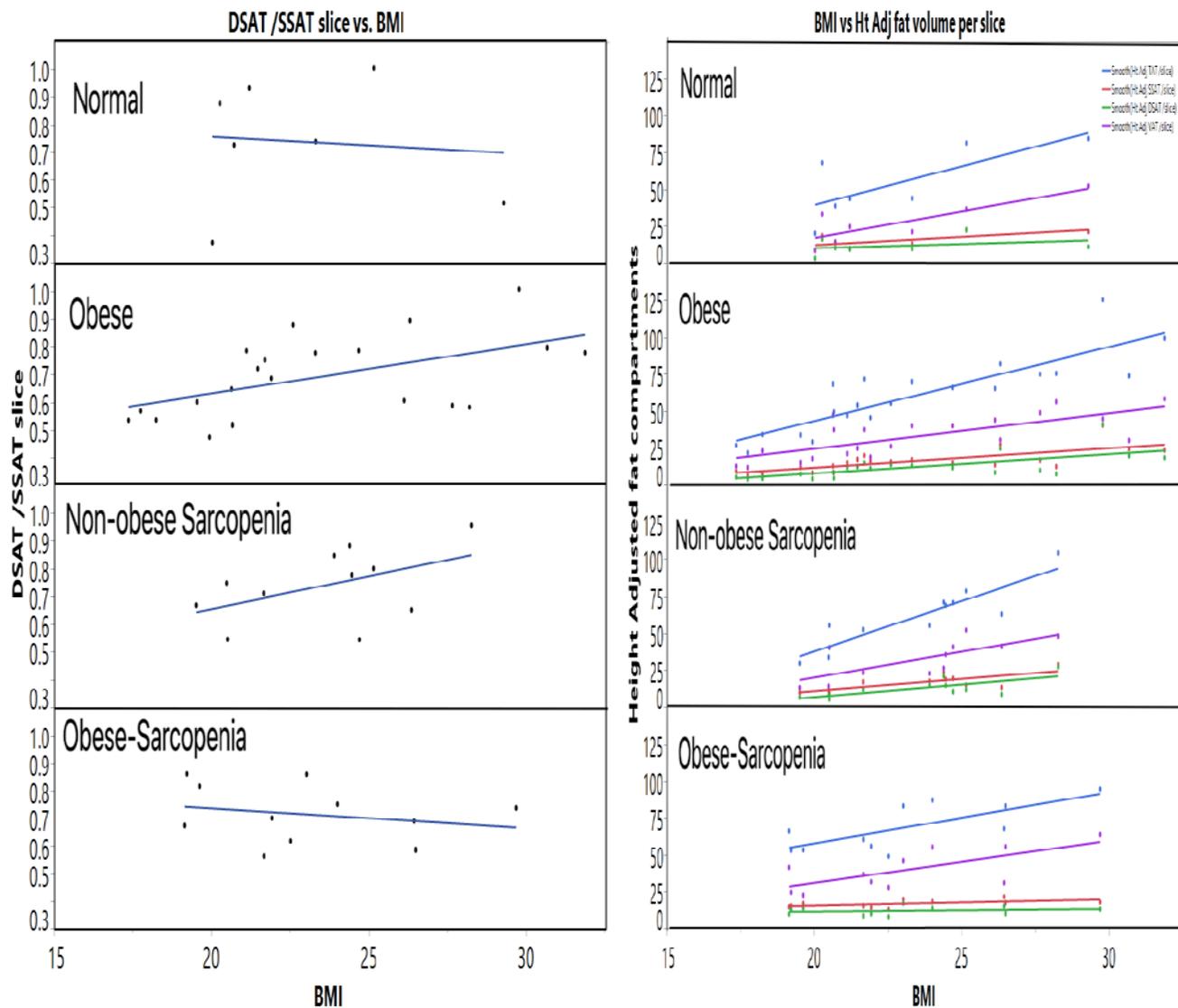
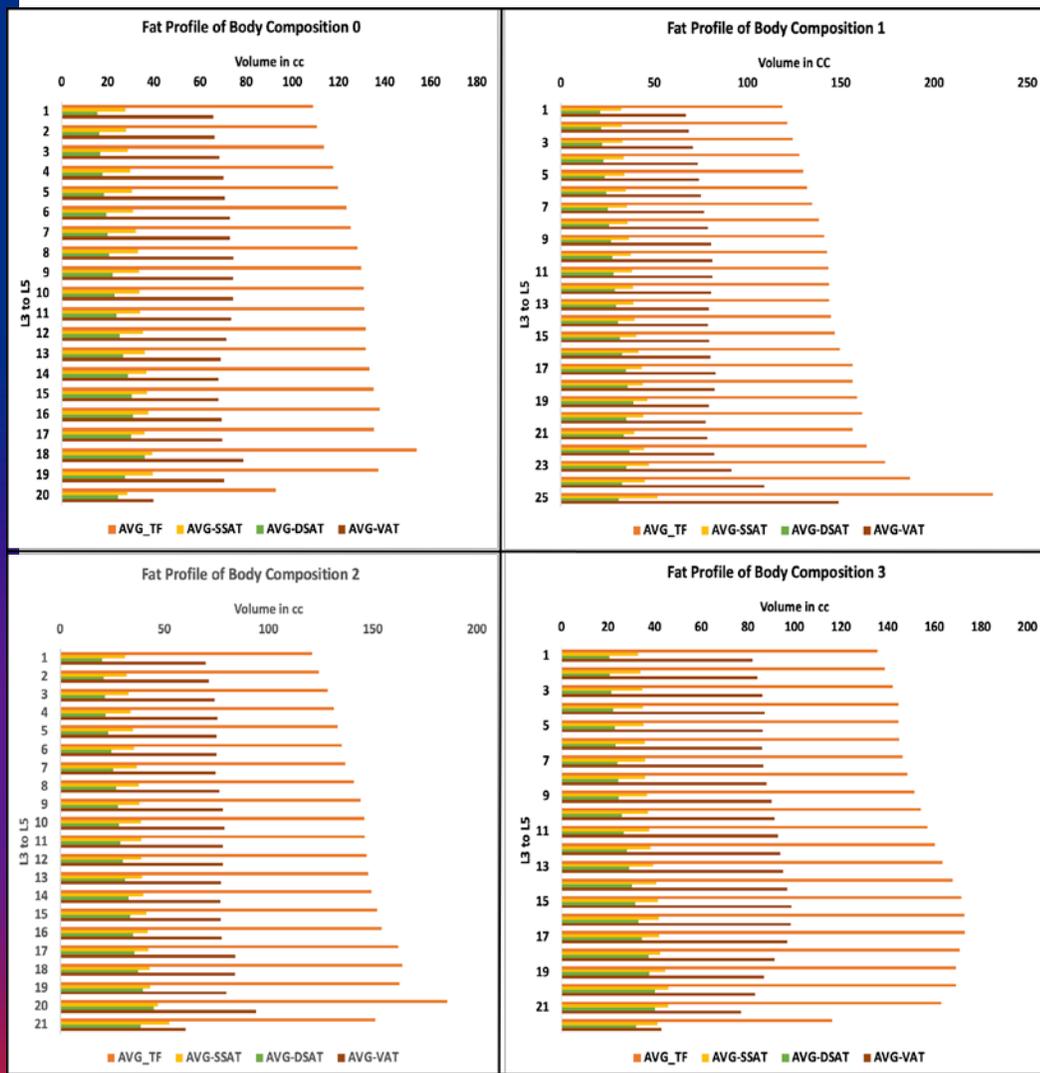
# MultiRes-Attention Deep Learning Approach for Optimal Segmentation of Abdominal Adipose Tissue Compartments



CREATING GROWTH, ENHANCING LIVES



# Clinical Assessment Framework for Sarcopenic Obesity profiling in SG population



Study extended to include other imaging regions – Upper / Lower abdomen, Thigh / Calf and Arm

# Background - Psychiatric disorders



**9 in 10 Singaporeans still struggling with their mental health 1 year into the pandemic, men and younger adults most worried**

**Singapore, 15 April 2021** – AIA Singapore today announced findings from a new study on the state of Singaporeans' health at the one-year mark since COVID-19 was declared a pandemic. It revealed that fears over income loss and job instability caused 91% of respondents to report declines in their mental health. Around 60% of respondents are also deeply concerned about the added burden of other critical illness diagnosis such as cancer.

**1 in 43 people in Singapore had a diagnosis of schizophrenia or other psychotic disorders in their lifetime**

The lifetime prevalence of schizophrenia and other psychotic disorders in Singapore was 2.3%. Of this, about one third of the population (0.86% or 1 in 116 persons) had a diagnosis of schizophrenia at some point in their lives. This makes schizophrenia the most common among psychotic disorders here. While the treatment gap of

**Prevalence of poor mental health among Singapore residents 'remained stable' in 2020:**

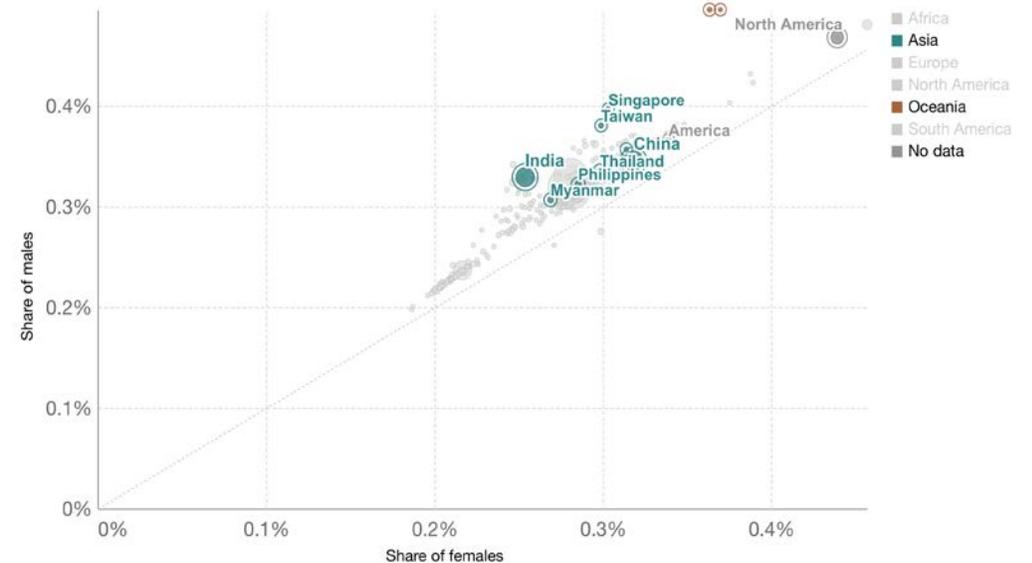
**MOH survey**

Younger adults aged 18 to 29 had the highest proportion with poor mental health in Singapore.

## Prevalence of schizophrenia in males vs. females, 2019

Share of male and female population suffering from schizophrenia. Figures attempt to provide a true estimate (going beyond reported diagnosis) of schizophrenia prevalence based on medical, epidemiological data, surveys and meta-regression modelling.

Our World in Data



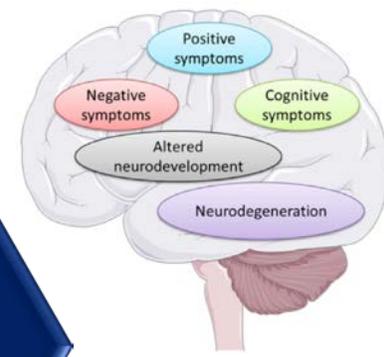
Source: IHME, Global Burden of Disease

CC BY

<https://www.channelnewsasia.com/singapore/poor-mental-health-stable-2020-national-health-young-adults-2322476>

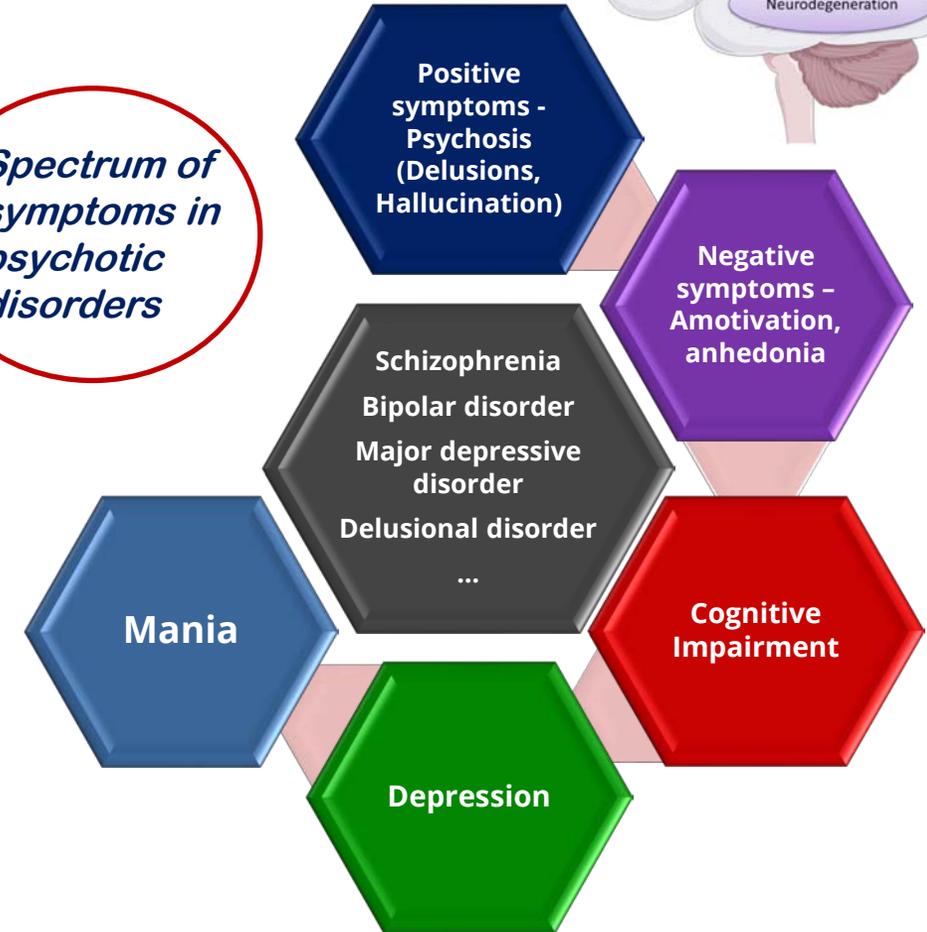
[https://www.imh.com.sg/Documents/research-announcements/21%20May%202021\\_%20Prevalence%20of%20Schizophrenia%20and%20Other%20Psychotic%20Disorders%20in%20Singapore.pdf](https://www.imh.com.sg/Documents/research-announcements/21%20May%202021_%20Prevalence%20of%20Schizophrenia%20and%20Other%20Psychotic%20Disorders%20in%20Singapore.pdf)

# Background - Psychiatric disorders



- Complex set of disorders with
  - overlapping symptoms,
  - long duration of illness preceded by
  - long prodromal phase
- Lack of reliable diagnostic markers
- Differential diagnosis and stratification of illness course or response
  - Remission vs Non-remission
  - Deficit /Non-Deficit
  - Individual patient level differences unclear

*Spectrum of symptoms in psychotic disorders*



Schizophrenia is a mental disorder characterized by a **distorted perception of reality**.

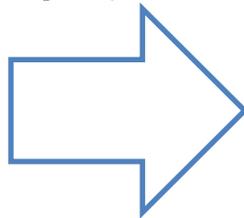




# Methodology – Data Overview



Loving Hearts, Beautiful Minds



Healthy controls	80
Schizophrenia	160
Bipolar disorder	42
Major depressive disorders	2



Diagnosis was made for all patients by psychiatrists based

- clinical history,
- existing medical records,
- structured clinical interview for DSM-IV,
- Symptoms (PANSS),
- Functioning (GAF),
- Quality of life (WHOQOL-BREF),
- Cognition, read, write (BACS, WRAT3),
- Mania (YMRS)

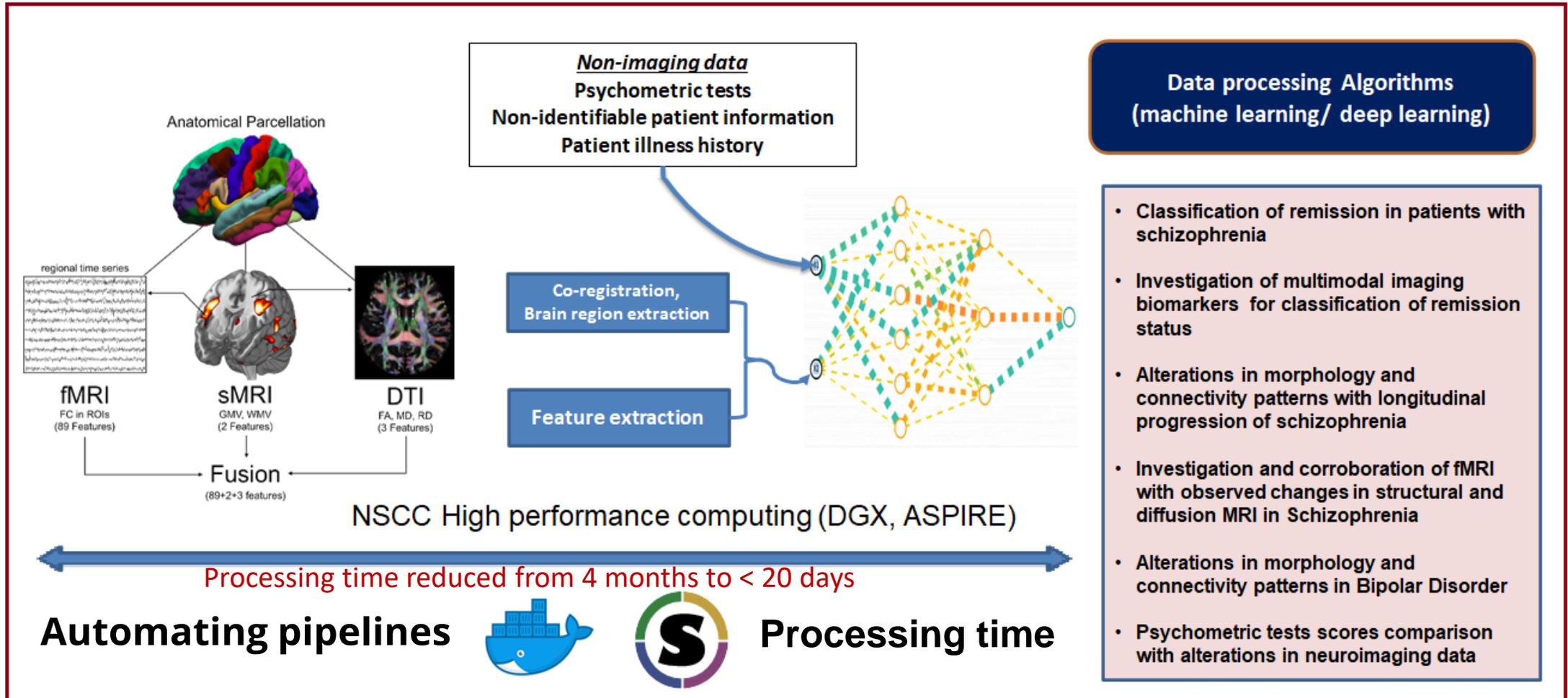


3T Philips Achieva Scanner  
 Parallel imaging (SENSE).  
 Axial T1 MPRAGE  
 256 x 256; 0.8984 x 0.8984 x 1 mm<sup>3</sup>,  
 at least 180 slices covering the brain.

Psychiatric subjects had no history of any significant neurological illness such as seizure disorder, head trauma or cerebrovascular accident for the patients.

HC were free of any Axis- I psychiatric disorders, had no history of any major neurological, medical illnesses, substance abuse or psychotropic medication use.

# Methodology – Processing



Current results derived are from pure data science perspective.

**“From observation to causation”**

# Methodology – Structural Data Processing

## Freesurfer 6.0.0 software

- Inhomogeneity correction
- Skull stripping
- Atlas registration
- Segmentation
- Extraction of statistics

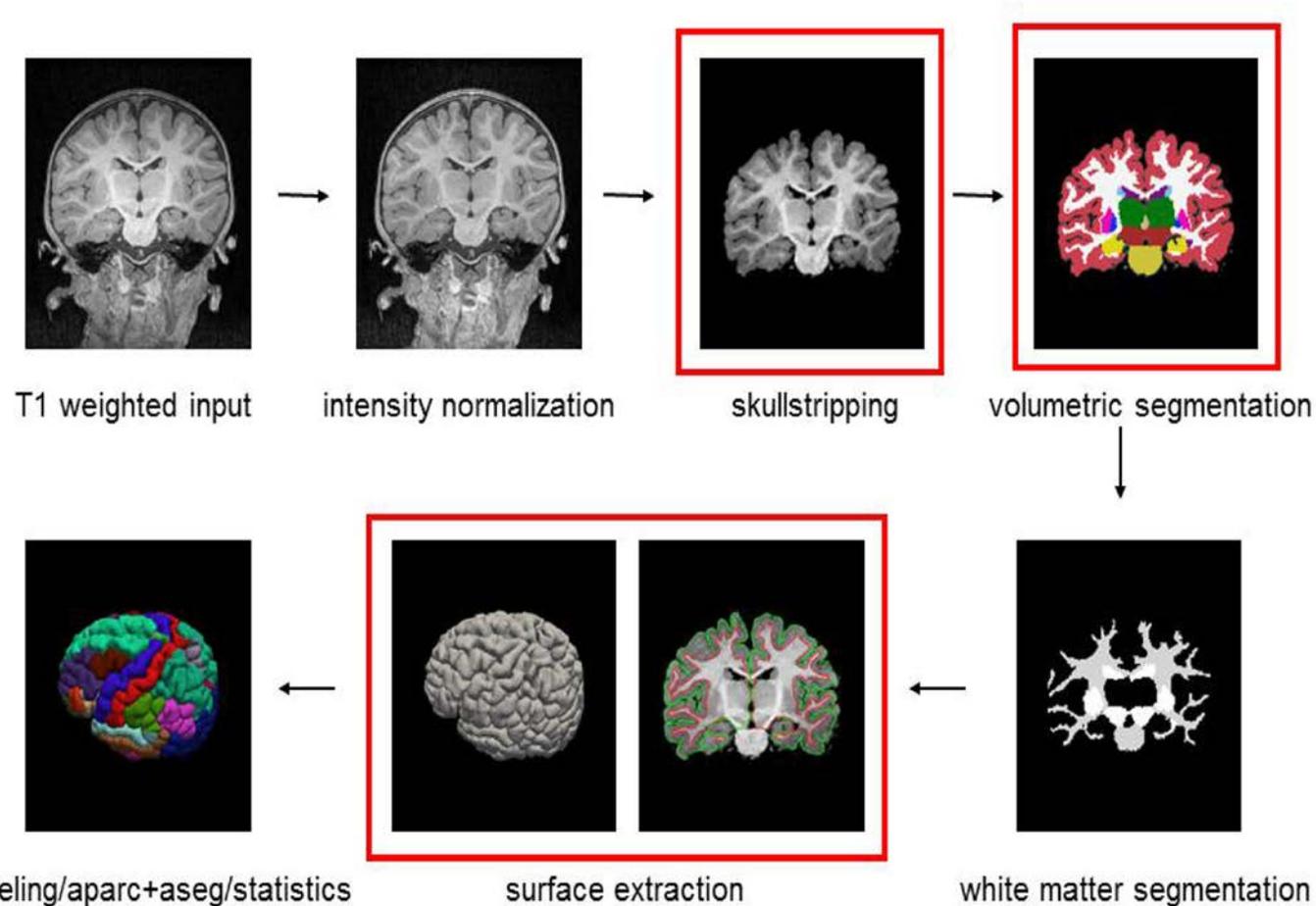
## Subcortical segmentation

Gaussian Classifier atlas

## Cortical parcellation

Desikan-Killiany atlas

- 55 subcortical volume,
- 71 cortical volume,
- 73 cortical surface area
- 71 cortical mean curvature
- 73 cortical thickness features



# Methodology – Structural /Psychometric scores data processing

## Classification Methods

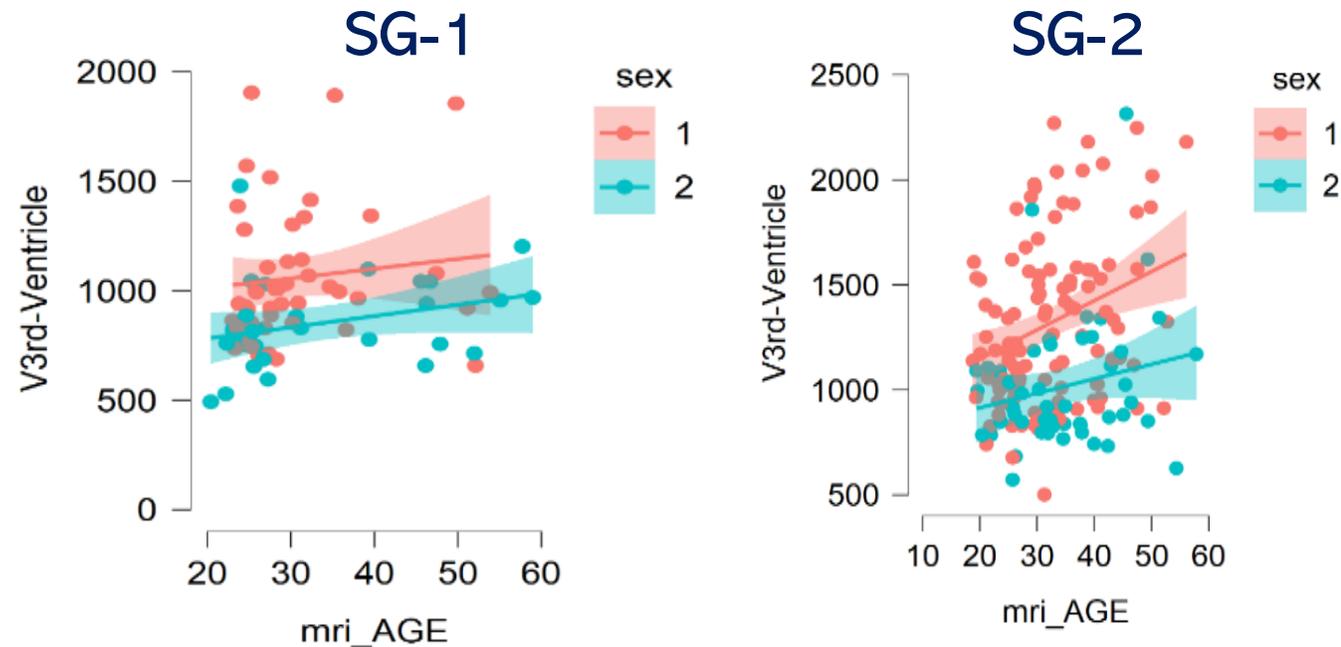
- Discriminant Analysis
- Embedded Classifiers
- Neural Nets
- Decision trees

## Psychometric score analysis

- Psychometric scores based classification
- Logistic Regression,
- SVM,
- KNN,
- Random Forests,
- Gradient Booting methods
  
- Identify the most relevant test/s – improve accuracy, save time & cost

## Subtyping of SCZ cohort

- Effects of
  - Age
  - Sex
  - CPZ
  - Psychosis duration
  - Education
  - Occupation
- Analysis of subtypes in SCZ
- Remission and Deficit correlation studies





# Acknowledgements



**Isaac Huen**  
Research Fellow



**Geetha Soujanya Chilla**  
Research Fellow



**Arvind CS**  
Senior Research Officer



**Yeow Ling Yun**  
Research Officer



Dr. Mya Thway Tint  
SICS



Dr. Derek Hausenloy  
NHCS- DUKE NUS



Dr. Ho Chi Long  
SKH



Dr. Cher Heng Tan  
TTSH



Dr. Sim Kang  
IMH



Dr. Tang Feng Ru  
SNRSI



Dr. Lim Wee Shiong  
TTSH



Dr. Tang Phua Hwee  
KKH



CREATING GROWTH, ENHANCING LIVES



# THANK YOU

---

[www.a-star.edu.sg](http://www.a-star.edu.sg)