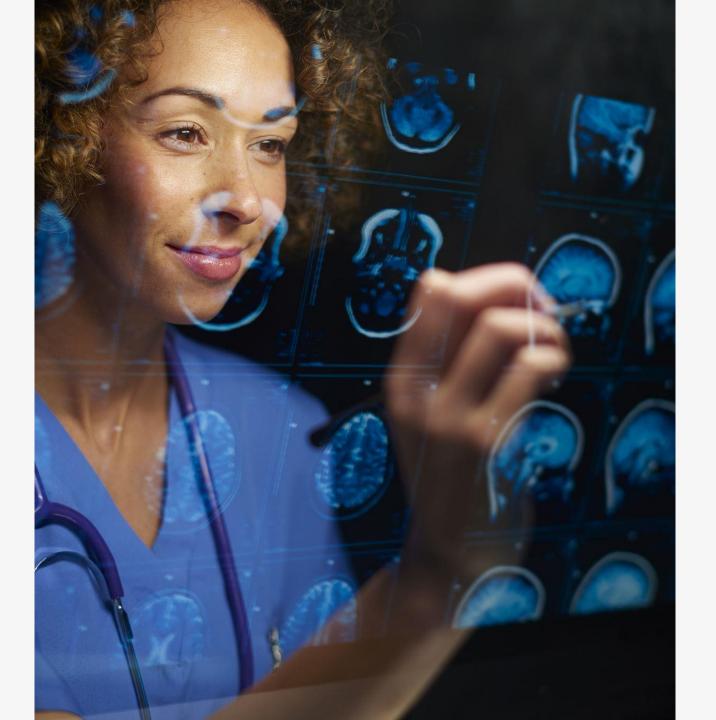


## AGENDA



- Medical imaging background
- Overview of foundation models in medical imaging
- Self-supervised learning
- Adaptation of foundation models
- Foundation model applications
- Specific application to rare cancer detection
- Deep learning models for specific imaging modalities (MRI, PET, Xrays, CT, and fundus)
- Integration of multiple imaging modalities





## Medical Image Analysis

## **Medical imaging modalities**

MRI, PET, X-rays, CT, and fundus imaging are used in clinical practice and offers unique information for diagnosis

## **Common DL tasks**

DL can aid clinicians/technicians with image segmentation, classification, reconstruction, and registration.



## Foundation models



Large pretrained models learning from vast unlabeled data



Learn general features which can be applied to specific clinical tasks



Adapt model to specific tasks with minimal labeled data



Help address data scarcity in medical imaging



Backbones are commonly CNN or Vision Transformers (ViT)

# Backbone comparison

#### **CNN** strengths

CNN can efficiently extract local features and are computationally efficient. They also incorporate parameter sharing making them easier to train.

#### **CNN** weaknesses

Receptive fields are local so CNNs struggle with long range dependencies. They also have difficulty to detect features at various scales due to fixed kernel sizes.

#### ViT strengths

They can capture long range dependencies and global context. ViTs can also analyze large scale patterns.

#### ViT weaknesses

ViTs are computationally expensive due to their selfattention mechanisms. They may be not as effective in capturing fine grained detail in images.



Self-Supervised Learning: Learning from unlabeled data

#### **Discriminative Learning**

Learns discriminative representations (ie the differences between instances)

#### Generative

Learns the data structure and underlying data distributions to generate or reconstruct data

Masked image modelling is where part of the image is masked, and the model is trained to reconstruct the missing information

#### Multimodal

Learning shared information across multiple modalities such as medical images and text reports. These models can be used for image to text or image retrieval.



## Adapting Foundation Models to Clinical Tasks

#### **Prompt Engineering**

Guiding model behavior through prompt techniques

### **Linear Probing**

Training a linear classifier on top of a foundation model's embeddings

#### Task specific heads

Adding small task specific neural networks to frozen foundation model layers

#### PEFT: parameter efficient fine tuning

Updating a small number of the model's parameters.

#### Full fine tuning

Updating all parameters to a given task



## Overview of Clinical Applications of Foundation Models

Automated Image Interpretation	Foundation models enables more efficient interpretation and report generation	
Patient Communication	Simplified medical reports can improve patient communication	
Diagnostic support	Foundation models can aid in diagnosis by providing lesion segmentation and disease classification	
Streamlined clinical workflows	Foundation models can aid in streamlining clinical workflows	
Population understanding	FOUNDATION MODELS CAN VIEID NONLIIATION INSIGNTS	

# Foundation models applied to pathology, radiology, and ophthalmology

## **Pathology**

- Foundation models have been proposed to model global context in whole slide images
- These models are showing promise in disease detection and classification, automated reporting, and personalized medicine applications.
- However, there are challenges in data quality and model robustness.

## Radiology

- Due to the abundance of unlabeled images, SSL can be applied to train models.
- Reduces need for expensive manual annotations
- RadClip: image classification and image/text matching
- RadFM: disease diagnosis, visual question answering, and report generation

## **Ophthalmology**

- RETFound: disease diagnosis and prognosis in retinal images
- VisionFM: covers a variety of ophthalmologic diseases; offers disease screening and diagnosis, disease prognosis, and subclassification of disease

## Benefits and challenges of FM applications in medical image analysis



## **Benefits**

Improved diagnostic accuracy
Enhanced generalizability
Reduced annotation burden
Facilitating research and clinical applications



## Challenges

Data heterogeneity

Model interpretability

Computational resources

Regulatory and ethical considerations

## Rare cancer modelling: Vorontsov et al [Nature Medicine Vol 30, October 2024, 2924–2935]

## Pan cancer foundation model called Virchow

- 1.5 Million H&E **unlabeled** slides for training spanning multiple tissue types (breast, skin, lymph node, lung, etc); ~100,000 patients
- Model generates data representations that can generalize well to a variety of tasks
- Helpful for rare cancer detection that may not have sufficient samples to develop a model

#### Technical details

- ViT architecture with 632 million parameters
- H&E slide -> tissue tiles -> embeddings per tile -> aggregation
- Trained using the DINOv2 algorithm (self-supervised learning) to determine embeddings per tile
- Train an aggregator model to go from tile level to slide level [required labeled data of 89,417 slides] for pan cancer detection
- Trained a different aggregator model on labeled data for each biomarker prediction task

### Results

- Pan cancer detection for common and rare cancers [Training dataset efficiency: less training data but almost matches clinical grade models]
- Biomarker prediction: good performance across multiple biomarker tasks with aucs ranging from 83% to 99% depending on the task
- May reduce need for immunohistochemistry





## MRI Deep Learning Models

#### Goals

- Improve accuracy and efficiency for tumor detection, classification, segmentation, quantification, prognosis, and response prediction
- Image enhancement: noise reduction to enhance image quality, artifact suppression, and bias field correction
- Identify neurodegenerative changes in Alzheimer's and Parkinson's
- DL accelerates MRI scans with image reconstruction
- Image registration: align MRI with histopathology images

Common DL techniques: attention, augmentation, and multimodal models

### **MONAI**

- Framework for deep learning in medical imaging
- Includes various MRI DL models for 3D segmentation of brain tumor subregions, segmentation of prostate zones in 3D MRI, and others

YOLOv7: Automate brain tumor detection

# Deep Learning for PET images

### Goals:

- Improve image quality, reduce radiation exposure, and automate lesion detection and segmentation
- Predict patients' response to treatment
- Classify tumor type
- DL for direct reconstruction and iterative reconstruction to tomographic representation
- Improve diagnostic efficiency and reduce radiologists' workload
- Personalized treatment

## **Architectures include GAN and UNET:**

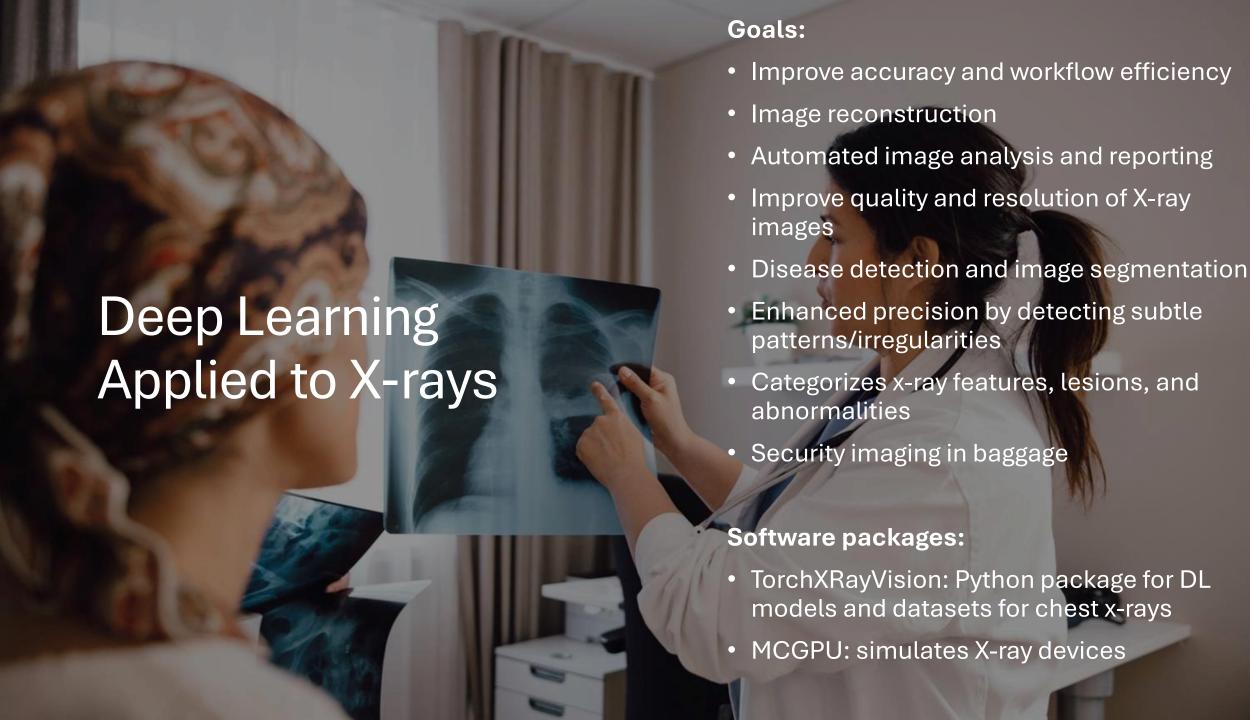
- Reduce noise of low dose PET
- Restore image quality
- Predict standard dose images from lose dose (tracer)

## Packages:

- NiftyPET: python package for reconstruction, processing, and analysis of PET images
- PyTomography, CASToR, STIR, and MCGPU-PET

## Recent work in multimodal integration

PET + CT



# Deep Learning Applied to CT and Fundus Imaging

30

165~

150

## **CT Imaging**

- DL applied to tumor detection, organ segmentation, and disease classification
- Understanding of changes in CT scans over time
- Reconstruction of 3D CT scans from a smaller number of views

### **Fundus Imaging**

- Early detection of neurodegenerative diseases
- Prediction of cardiovascular factors
- Detection of eye diseases and assignment of severity scores
- Grad-CAM to highlight fundus features





## Multi-modal Fusion



Integrating multiple imaging modalities or imaging + clinical/omics data



More comprehensive diagnosis



Aim for personalized medicine and prediction of patient outcomes



Target Diseases: cancer diagnosis and prognosis, neurodegenerative diseases, and cardiovascular diseases



Architectures: Transformers and graph convolutional networks



Software packages: MONAI, OpenMEDLab, and Molmo

## Comparison of Fusion Techniques

	Early Fusion	Intermediate Fusion	Late Fusion
Concept	Multiple input modalities are combined before training a single machine learning model.	Different data modalities are first processed by individual models, before the extracted features are combined and fed into a final prediction model.	Different models are trained on separate data modalities, then the resulting predictions are merged via an aggregation function.
Advantages	Preserving the original information from each modality without losing substantial details.  Simple model architecture and reduced computational complexity.	Capturing more complex interactions between modalities.  Allowing separate processing pathways for different data types prior to fusion.	Easily dealing with missing data for patients.
Disadvantages	Potentially an imbalance of data richness from each modality.	Requiring a huge amount of data to precisely learn the additional interactions and combinations.	Impossible to model interactions and relationships between different modalities, with potential loss of information.  Integration of results from different models will be complex.

Krones F et al, "Review of multimodal machine learning approaches in healthcare," Information Fusion, Volume 114, 2025

## Conclusions

Foundation models can aid in streamlining clinical workflows

Foundation models can aid in diagnosis by providing lesion segmentation and disease classification

Generalization of foundation models aids in rare cancer detection that may not have sufficient samples to develop a model

Challenges remain in areas of data heterogeneity, model interpretability, computational resources, and regulatory and ethical considerations

Non foundational DL models showed many clinical applications for MRI, PET, X-ray, CT, and fundus imaging

Multi modal fusion aims for a more comprehensive diagnosis and personalized medicine applications

## QUESTIONS?

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