Revolution in Oncology: Artificial Intelligence and Precision

Medicine

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Artificial Intelligence (AI)

> **Definition**

- Simulation of human intelligence using algorithms and systems
- Capable of learning, reasoning, and decision-making

> History

- 1950s: Early algorithms and concept introduction
- 1980s-1990s: Neural networks & deep learning emergence
- 2000s onwards: Medical applications

> AI in Medicine

- Disease diagnosis
- Treatment prediction and optimization
- Clinical data management

Al in Oncology

- > Why AI is Crucial in Oncology ?
- Global Impact : Cancer is the second leading cause of death worldwide.
- Clinical Challenges : Faster diagnoses, effective treatments, cost reductions.
- Contributions of AI in Oncology
- Application in Diagnosis : Tumor detection in MRI, CT, PET
- Complex Data Management : Integrating genetic, clinical, and treatment data
- Outcome Prediction : Forecast patient survival
- Personalized Treatment : Optimizing treatment plans based on tumor characteristics and therapeutic response

Machine Learning (ML)

Machine learning is a branch of AI focused on building computer systems that learn from data to identify patterns and make predictions.

Stages of Machine Learning in Oncology:

1.Data Collection:

Gathering large datasets (images, clinical reports, genomic data).

2.Data Preprocessing:

Cleaning, normalizing, and labeling data for better accuracy.

3.Model Training:

Using algorithms (SVM, DT, ANN) to learn from data.

4.Model Testing:

Validating the model with unseen data.

5.Deployment & Monitoring:

Applying the trained model in clinical practice and monitoring its performance.

Types of Machine Learning

1. Supervised Learning

•Definition: Models learn from labeled data.

•How it works: Identifies relationships between inputs and outputs to make predictions. •Examples in Oncology: Classifying tumors as benign or malignant using MRI data.

2. Unsupervised Learning

•Definition: Models work with unlabeled data to discover hidden patterns or structures.
•How it works: Groups similar data points or uncovers correlations.
•Examples in Oncology: Clustering cancer patients based on genetic profiles.

3. Reinforcement Learning

•Definition: Models learn through interaction with the environment.
•How it works: Optimizes decision-making strategies by trial and error.
•Examples in Oncology: Developing optimal radiotherapy treatment plans.

Types of Machine Learning



Deep Learning (DL)

- > Deep Learning is a subset of ML using layered neural networks to handle complex data.
- > Key Components of Deep Learning :
 - Input Layer: Receives raw data
 - Hidden Layers: Processes data through multiple layers of neurons.
 - Output Layer: Provides predictions or classifications.
- > Key Features of Deep Learning :
 - Automated Feature Extraction
 - Handles Complex Data
 - High Prediction Accuracy



The Evolution of Al



Radiomics

- **Radiomics** is an emerging machine learning method that can extract numerical data reflecting biologically important tissue characteristics from medical imaging information.
- **Quantitative features** describe the intensity, texture and geometrical characteristics attributed to the tumor radiographic data.
- These features have been used to build **predictive models** for diagnosis, prognosis, and therapeutic response.

The Importance of Radiomics

- Non-invasive : Provides critical information without the need for biopsy or surgery
- 2) **Comprehensive :** Allows for a deeper understanding of tumor heterogeneity by analyzing vast amounts of data from medical images.
- **3) Cost-Effectiveness :** Radiomics leverages existing medical imaging data, reducing additional testing costs.
- 4) **Personalized Treatment :** Facilitates the development of personalized treatment plans based on the specific characteristics of a patient's tumor.

Clinical Applications of AI in Oncology



AI in Early Detection of Prostate Cancer

Definition: Early detection of cancer involves identifying malignancies at an initial stage when treatment is more likely to be successful.

Application: In prostate cancer, AI algorithms increase the accuracy and efficiency of early cancer detection by analyzing image data from MRI scans.

Importance: Early detection significantly improves patient outcomes and survival rates.

Findings:

- 1) AUC: 0.96 for cancer vs. benign.
- 2) AUC: 0.85 for high-risk vs. low-risk cases.

AI-Optimized Radiation Therapy Planning in Lung Cancer

Definition: Radiation therapy planning designs optimal radiation doses to target lung tumors while sparing healthy tissues, with AI automating tumor identification and dose optimization.

Application: Tumor Segmentation - Dose Optimization

Importance:

- Ensures precise tumor targeting, improving treatment effectiveness.
- Reduces radiation exposure to healthy lung tissues, minimizing side effects.

Findings:

- 1) AI achieves up to 92% accuracy in segmenting lung tumors from CT scans.
- 2) AI improves radiation dose coverage by up to 85%, minimizing damage to healthy tissues.

Radiomics Features in Glioblastoma Patients

INTRODUCTION

- Glioblastoma multiforme (GBM) is the most common primary malignant brain tumor in adults and most aggressive tumor.
- Brain tumors are graded on a I to IV scale (slow to fast grow).
- GBM is a grade IV Tumor that develops from star-shaped glial cells (astrocytes)
- Glioblastoma accounts for 20% of all intracranial tumors and 60% of astrocytic tumors.
- Most common in older patients (45-55y) and more common in men than women.



DIAGNOSIS

* Neurological exam



A patient with any neurological symptoms will first be given a physical exam that includes • neurologic function tests.

* Removing a sample of tissue for testing (Biopsy)



- A biopsy can be done with a needle before surgery to remove tissue of tumor.
- The sample of suspicious tissue is analyzed in a laboratory to determine the types of cells and their level of aggressiveness.

✤ Imaging tests



MRI and CT scans produce detailed images of the brain (Location & Size,...).

PROGNOSIS

- Patients have exhibited poor prognosis with a median survival of 12–15 months despite radiation therapy.
- Several prognostic factors influence the survival of patients with GBM, including clinical characteristics , molecular characteristics and characteristics of MRI.
- Poor prognosis Due to the spatial and temporal intra-tumor heterogeneity.
- Genetic heterogeneity
 Reduces the value of invasive biopsy-based genomic analysis
 Provides opportunities for non-invasive medical imaging (MRI)

ADVANTAGES OF RADIOMICS Automatic extraction of radiomics features and offers abundant data relative to qualitative analyses.

Promising approach for assisting in developing individual treatment strategies in oncology.

Progress of Radiomics in GBM

- 1) Predict the overall survival
- 2) Discrimination between pseudoprogression and progressive disease

in GBM patients

3) Classification of GBM

Workflow



Clinical Significance of the Study





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Thank you for your attention!