



Retinal Blood Vessels Extraction Using Morphological Operations



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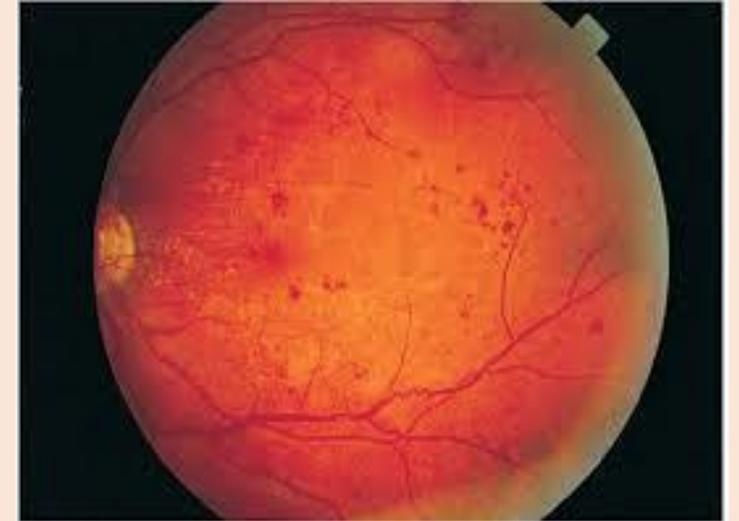


Outline

- Introduction - **Diagnostic in ophthalmology**
- State-of-the-art
- Image Database – **Messidor**
- Previous work
- Image processing - **Mathematical morphology**
- Our approach of - **Retinal Blood Vessel Extraction**
- Results
- Conclusion and future work

Diagnostic in ophthalmology

- direct diagnostic by ophthalmologist
- screening
 - automatic evaluation of images
 - reduction of resources
 - monitoring of detected findings



Screening of Diabetic Retinopathy (DR)

- diabetic retinopathy – the leading cause of **blindness**
- early medication can decrease the risk of severe vision loss by > 90%
- there are **no universally accepted criteria** for the detection of DR using digital imaging
- British Diabetic Association **recommends** minimum **80% sensitivity** and **95% specificity** for screening methods*

* British Diabetic Association. Retinal photographic screening for diabetic eye disease. A British Diabetic Association Report. London: British Diabetic Association; 1997

State-of-the-art - Extraction of blood vessels

Methods based on

- edge detection
- Canny detector or LoG operator
- wavelet transform
- classification algorithms using neural networks
- filtering algorithms
- morphological algorithms

In [*] - the comparison based on sensitivity and accuracy of five existing methods is presented **on DRIVE database**

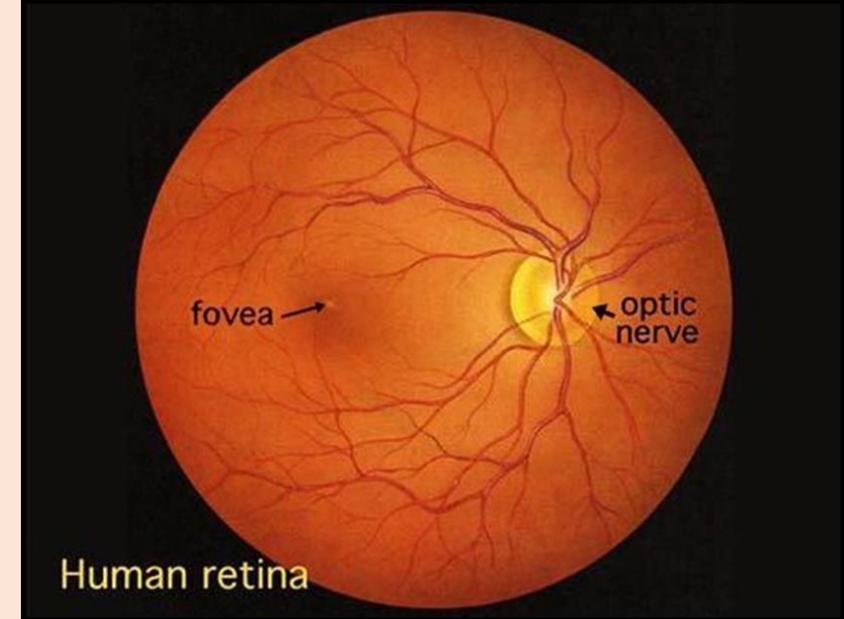
Sensitivity values $\cong 0,7 - 0,8$

Accuracy values $\cong 0,94$

* Miri, M.S.; Mahloojifar, A., "Retinal Image Analysis Using Curvelet Transform and Multistucture Elements Morphology by Reconstruction," Biomedical Eng., IEEE Trans. on, Vol. 58, Iss. 5, pp. 1183 – 1192, 2011

Retinal image database Messidor *

- 1200 colour fundus images
- by 3CCD fundus camera Topcon TRC NW6
- 45° visual field
- images of healthy subjects and subjects with diabetic retinopathy
- 8 bits colour depth
- 1440x960 to 2304x1536 pixels resolution



* MESSIDOR, "Methodes d'Evaluation de Systemes de Segmentation et d'Indexation Dediees a l'Ophthalmologie Retinienne," from <http://messidor.crihan.fr>, 2007

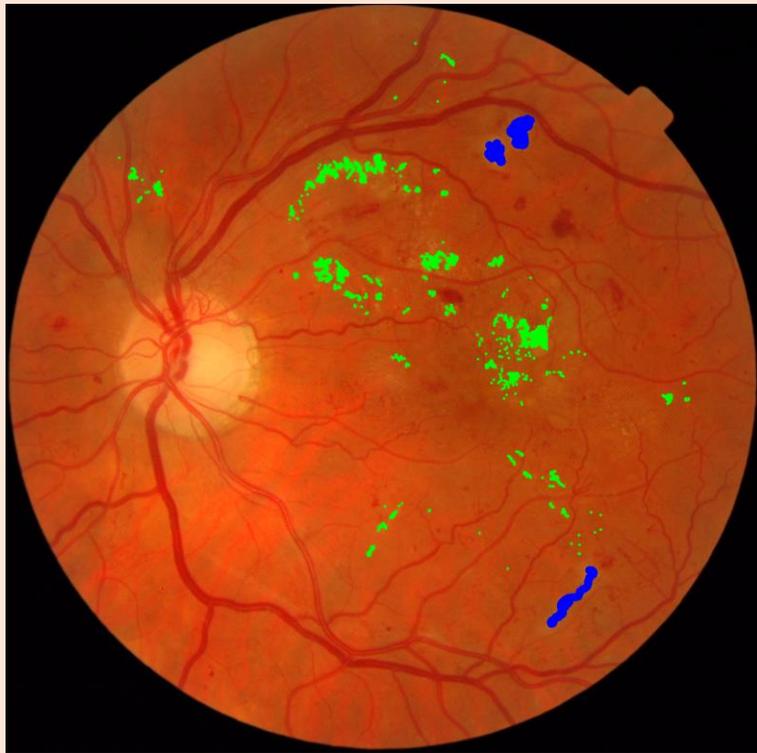
Retinal image database Messidor



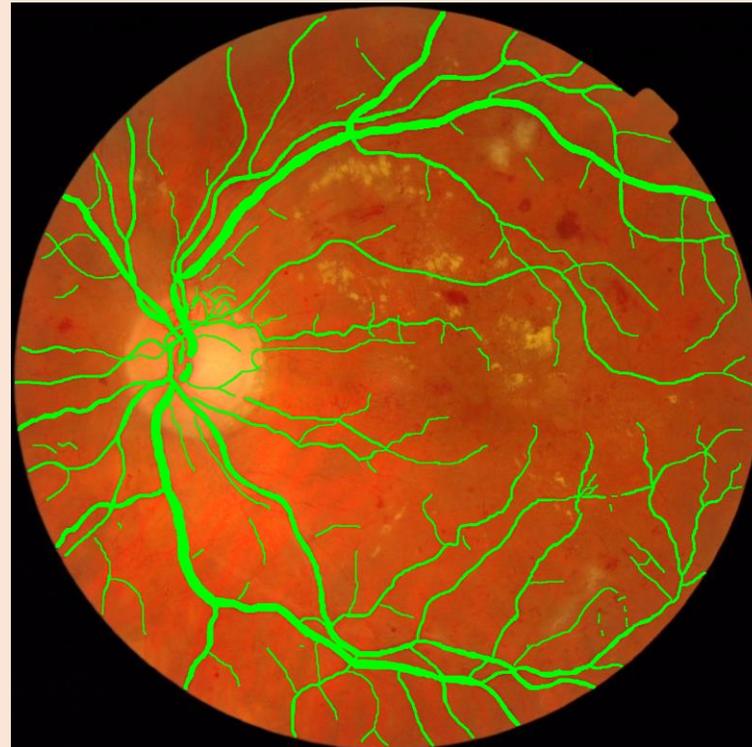
original

in our analysis:

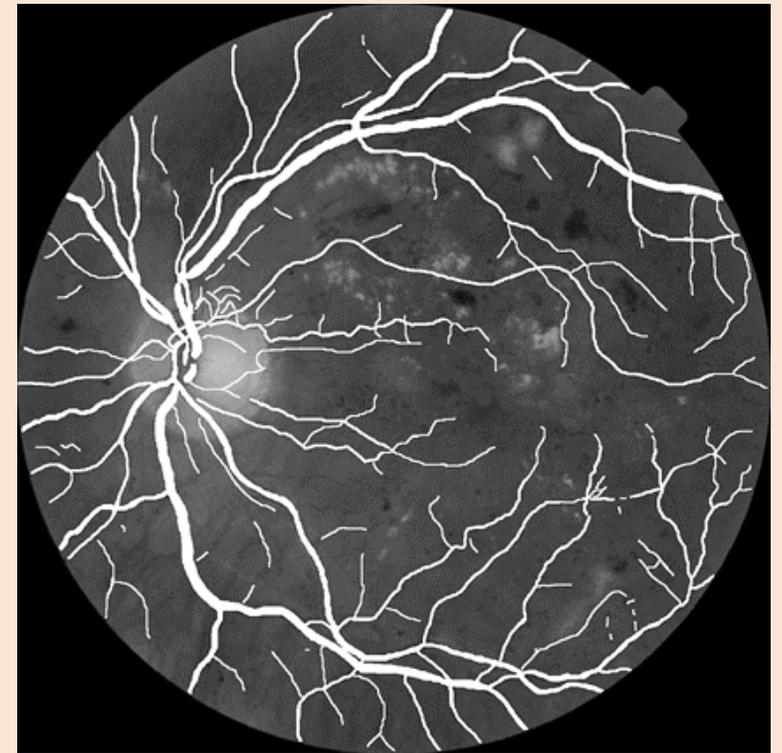
- 1373x1372 pixel array
- green channel



lesions marked by
ophthalmologist



blood vessels marked by
ophthalmologist



green channel

Previous work

- image normalization - luminance normalization, contrast enhancement
- optic disc suppression (Hough transform, FRST)
- **retinal blood vessels suppression – mathematical morphology**
- soft exudates feature extraction on fundus images
- soft exudates classification by NN (trained for 16 selected features)

Image normalization

$$I(x,y)=f(I^0(x,y))=C(x,y)I^0(x,y)+L(x,y)$$

$I(x,y)$ – original image

$I^0(x,y)$ – ideal image

$f(I^0(x,y))$ – transformed image

$C(x,y)$ – contrast variation parameter

$L(x,y)$ – luminance variation

$L'(x,y), \hat{C}(x,y)$ - estimation of parameters
based on μ and σ of background

- **luminance normalization**
- **contrast enhancement**

$$\hat{I}^0(x,y) = \frac{I(x,y) - L'(x,y)}{\hat{C}(x,y)}$$

Morphological operations for blood vessel detection

- *dilation, erosion, opening, closing*
- *white top hat – bright details*

$$WTH = X - (X \circ B)$$

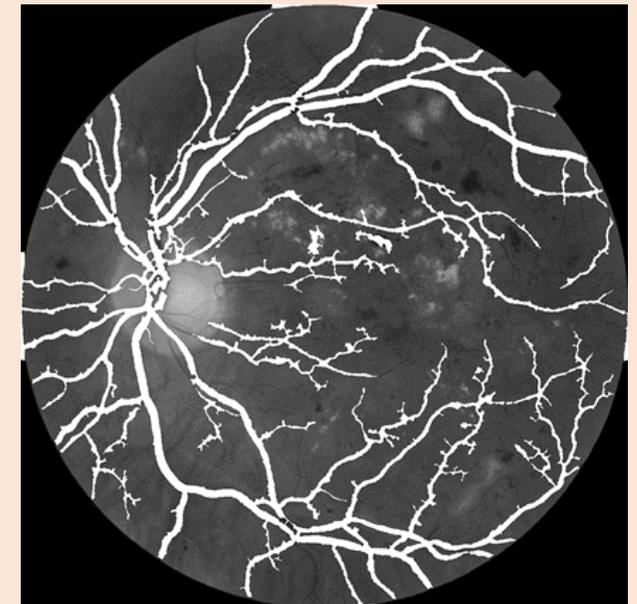
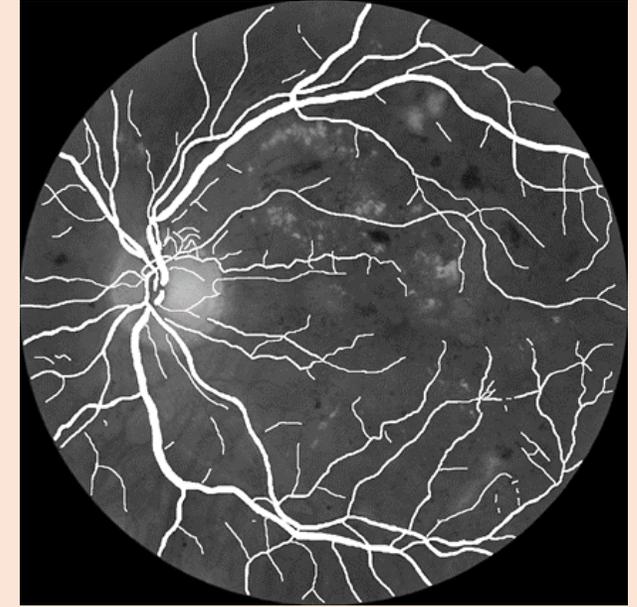
- *black top hat – dark details*

$$BTH = (X \bullet B) - X$$

- *morphological reconstruction – the intensity fluctuations removal*

Morphological Blood Vessel Detection – Approach I

- 1) Green channel extracion
- ↓
- 2) Morphological closing, SE disc size 10
- ↓
- 3) Sum of images 1) and 2)
- ↓
- 4) Morphological closing, SE disc size 4
- ↓
- 5) Contrast adjustment
- ↓
- 6) Morphological closing SE disc size 10
- ↓
- 7) Subtraction of the image 5) from image 6)
- ↓
- 8) Binary conversion of the image
- ↓
- 9) Morphological closing, SE disc size 2

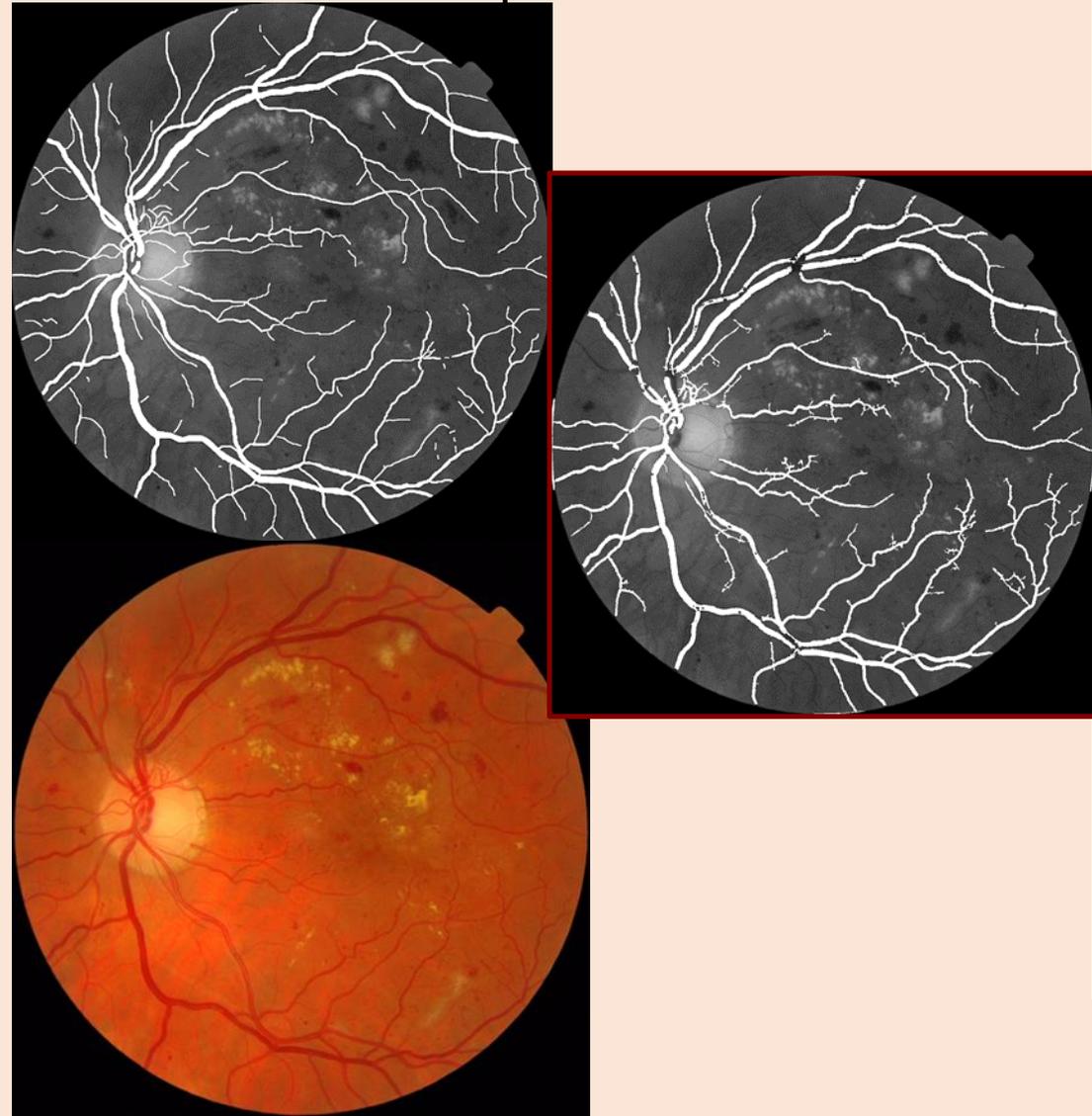


ophthalmologist

Approach I

Morphological Blood Vessel Detection - Approach II

- **two-channel processing**
- combination of profitable results



- 1) Image pre-processing
- 2) Morphological opening
- 3) Morphological reconstruction

- 4) Image sharpening
SE Disc, size 5
- 5) Morphological closing
SE Octagon, size 12
- 6) Subtraction of image
5) from 4)
- 7) Graythresholding
- 8) Morphological opening
SE linear, size 10
- 9) Area opening function

- 4) Image sharpening
SE Disc, size 6
- 5) Morphological closing
SE Disc, size 6
- 6) Subtraction of image
5) from 4)
- 7) Graythresholding
- 8) Morphological opening
SE linear, size 10
- 9) Area opening function

- 10) Combination of results
- 11) Postprocessing

Results

Approach I

accuracy of hand-marked pixels

TP (pixels) **84.86%**

FPR (pixels) 4.16%

FN (pixels) **15.14%**

ophthalmologist: 160 092 pixels

Approach I : 207748 pixels

TP: 135 856

FP: 71 892

FN: 24 236

Approach II two-channel processing

accuracy of hand-marked pixels

80.52%

FPR (pixels) **1.82%**

FN (pixels) 19,48%

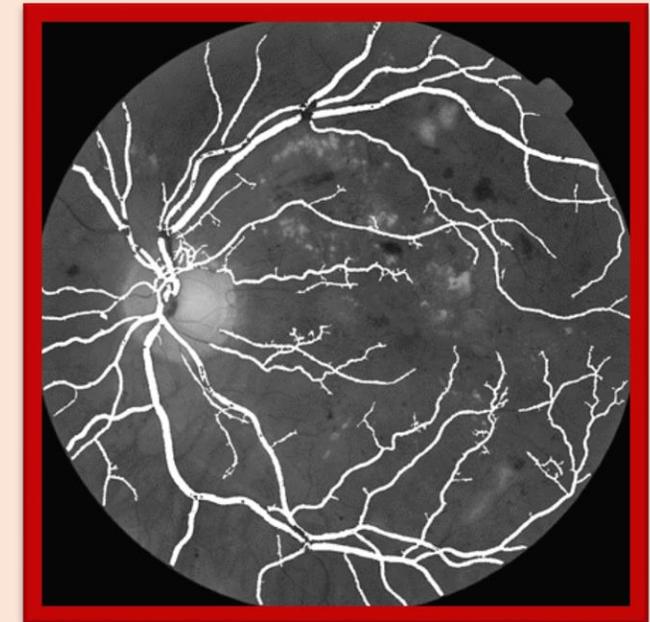
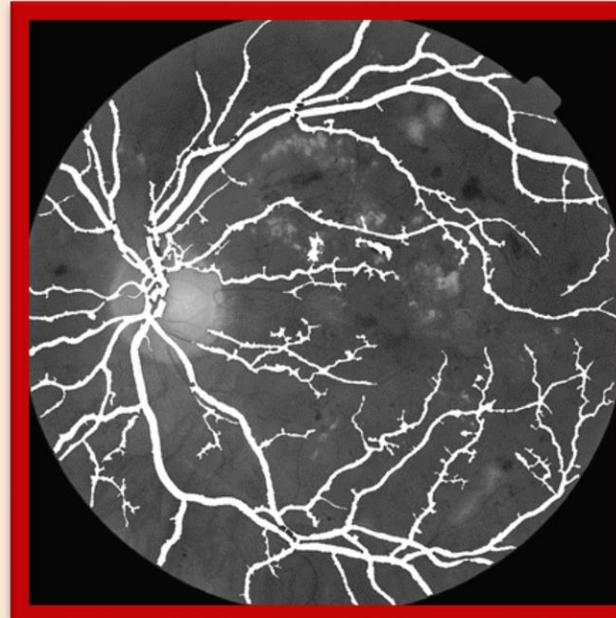
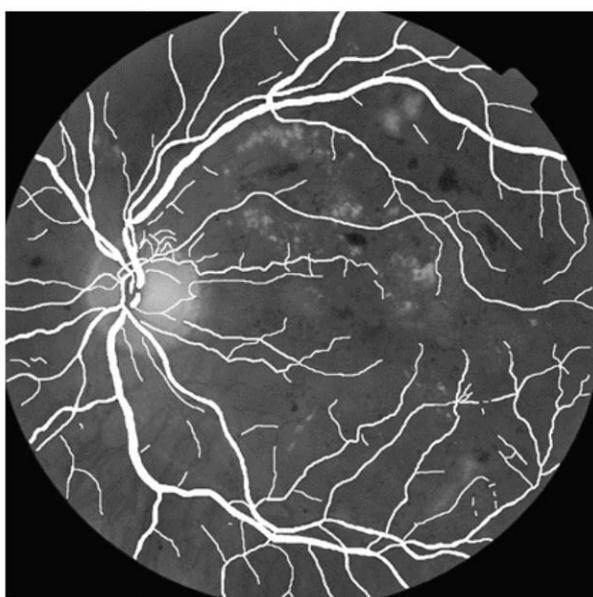
ophthalmologist: 160 092 pixels

Approach II : 160465 pixels

TP: 128 901

FP: 31 564

FN: 31 191



RESULTS OF APPROACH I

RESULTS OF APPROACH II

2 - CHANNEL PROCESSING

Image	Sensitivity (TPR)	Specificity (TNR)	Accuracy (ACC)
1	77.70%	98.03%	96.94%
2	72.68%	96.54%	94.90%
3	84.86%	95.84%	94.90%
Average	78.41%	95.85%	95.58%

Image	Sensitivity (TPR)	Specificity (TNR)	Accuracy (ACC)
1	80.72%	97.55%	96.64%
2	77.29%	95.43%	94.17%
3	80.52%	97.24%	95.82%
Average	79.51%	96.74%	95.55%

$$TPR = TP / (TP + FN)$$

$$TNR = TN / (FP + TN)$$

$$ACC = (TP + TN) / (TP + TN + FN + FP)$$

$$FPR = FP / (FP + TN)$$

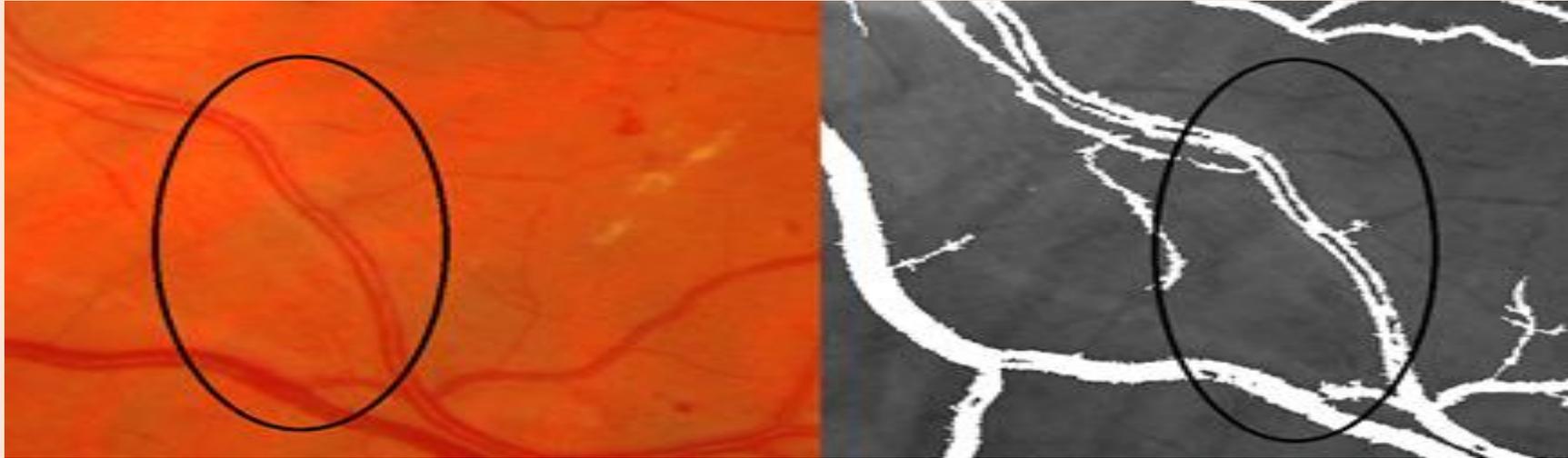
Conclusion

Our approaches - sensitivity (TPR) **79.51%** and accuracy **95.55% in average;**
- higher in most cases despite of used datab. Messidor (higher resolution of images then DRIVE)

COMPARISON OF PERFORMANCE BETWEEN THE RECENT STUDIES
DRIVE database

Method	TPR	FPR	Average Accuracy
Mendonça <i>et al.</i> [3]	0.7344	0.0236	0.9452
Staal <i>et al.</i> [22]	0.6780	0.0170	0.9441
Martinez-Perez <i>et al.</i> [23]	0.7246	0.0345	0.9344
Niemeijer <i>et al.</i> [20]	0.6898	0.0304	0.9416
Our method	0.7352	0.0205	0.9458

Conclusion - Specific false positive detections



- the border of bigger retinal arteries looks darker than its lumen
- have no negative influence to pathological retinal findings detection



- some degree of noise on the border of blood vessels

Conclusion

Presented methods

- fast and easy to implement
- suitable for physiological and also pathological images of any size
- satisfies the recommendation of min. specificity for screening (95%)
- sensitivity near recommended 80 %
- *Two-channel processing* - higher values of sensitivity and specificity in average

Improvements need to be developed in

- image normalization
- number of false positive detections

Tested images

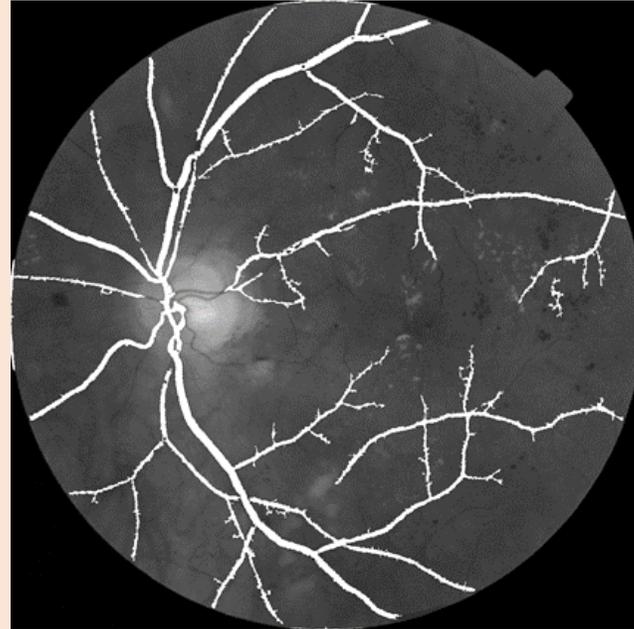
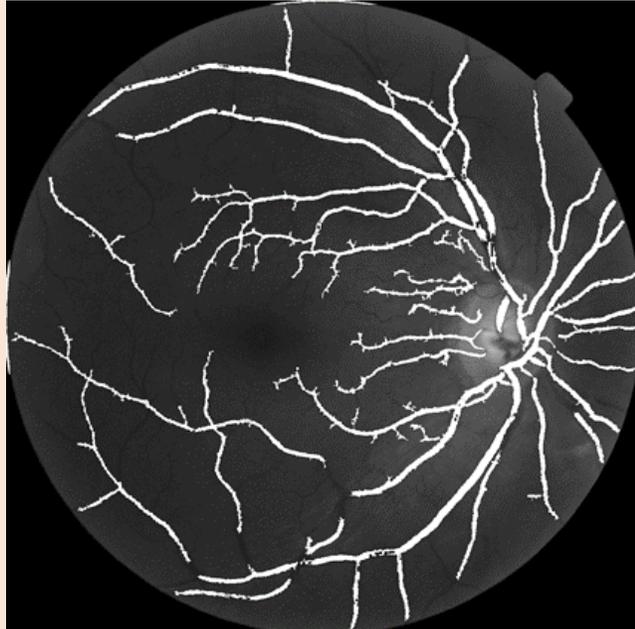
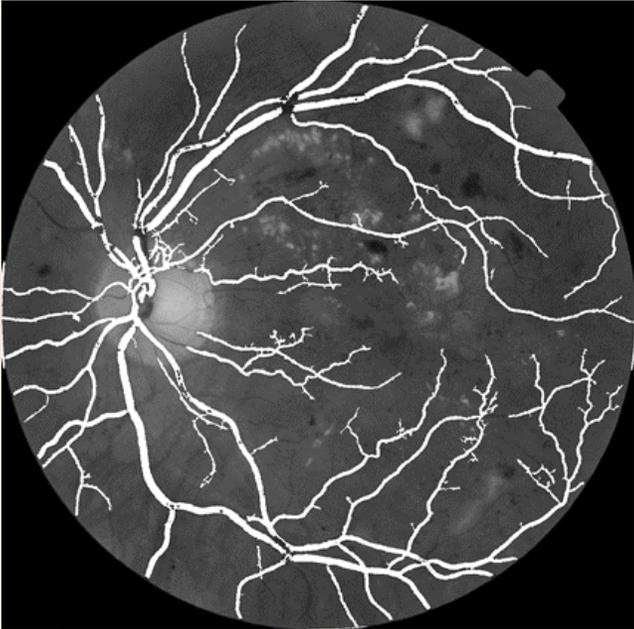
1



2



3



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