

Využitie AI pri MR diagnostike karcinómu prostaty

MUDr. Vítazoslav Belan, PhD.

Úvod

2012 - ESUR - MR prostaty PIRADS (Prostate Imaging Reporting and Data System)

2019 – EAU: MR prostaty pred biopsiou

2022 – potenciál pre skríning karcinómu prostaty (CaP)

2022 – EU rezolúcia rozšírenie skríningu nádorov vrátane CaP (zahrňujúca MR prostaty)

P. Puech: How should we prepare a generation of radiologists for MRI-based prostate cancer screening?
European Radiology, <https://doi.org/10.1007/s00330-023-09680-3>

Válek V (2022) Council recommendation of 9 December 2022 on strengthening prevention through early detection: a new EU approach on cancer screening. Off J Eur Union. C473:01

Úvod

- Kvalifikácia, certifikácia rádiológov a zobrazovacích centier
- Dvojité čítanie
- Využitie AI (umelej inteligencie) v MR prostaty

European Radiology (2021) 31:9567–9578
<https://doi.org/10.1007/s00330-021-08021-6>

UROGENITAL



ESUR/ESUI position paper: developing artificial intelligence for precision diagnosis of prostate cancer using magnetic resonance imaging

Tobias Penzkofer^{1,2}  · Anwar R. Padhani³ · Baris Turkbey⁴ · Masoom A. Haider⁵ · Henkjan Huisman⁶ · Jochen Walz⁷ ·
Georg Salomon⁸ · Ivo G. Schoots^{9,10} · Jonathan Richenberg¹¹ · Geert Villeirs¹² · Valeria Panebianco¹³ ·
Olivier Rouviere^{14,15} · Vibeke Berg Logager¹⁶ · Jelle Barentsz⁶

Pro Diagnostic Group structure



MRI Centres:



PET/CT Centre:



CT Centre:

Multimodality Centre:



Nuclear medicine:



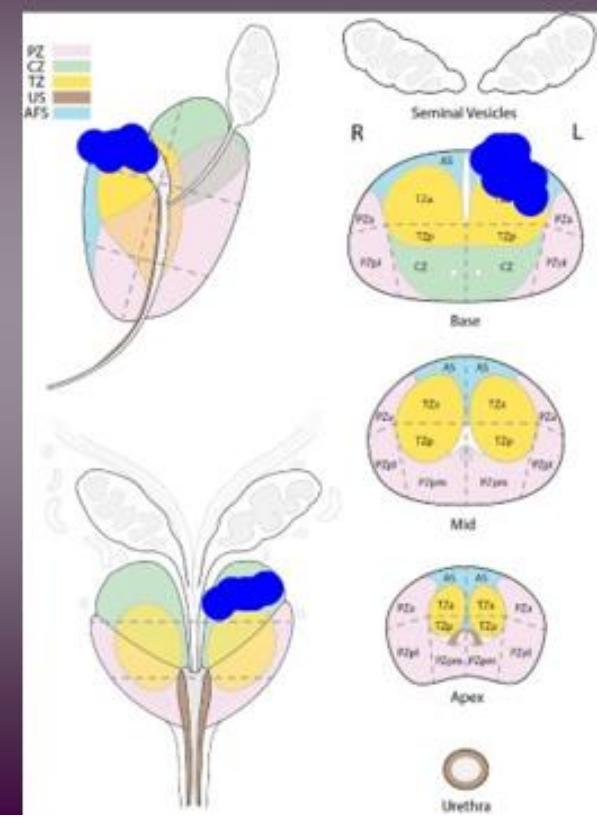
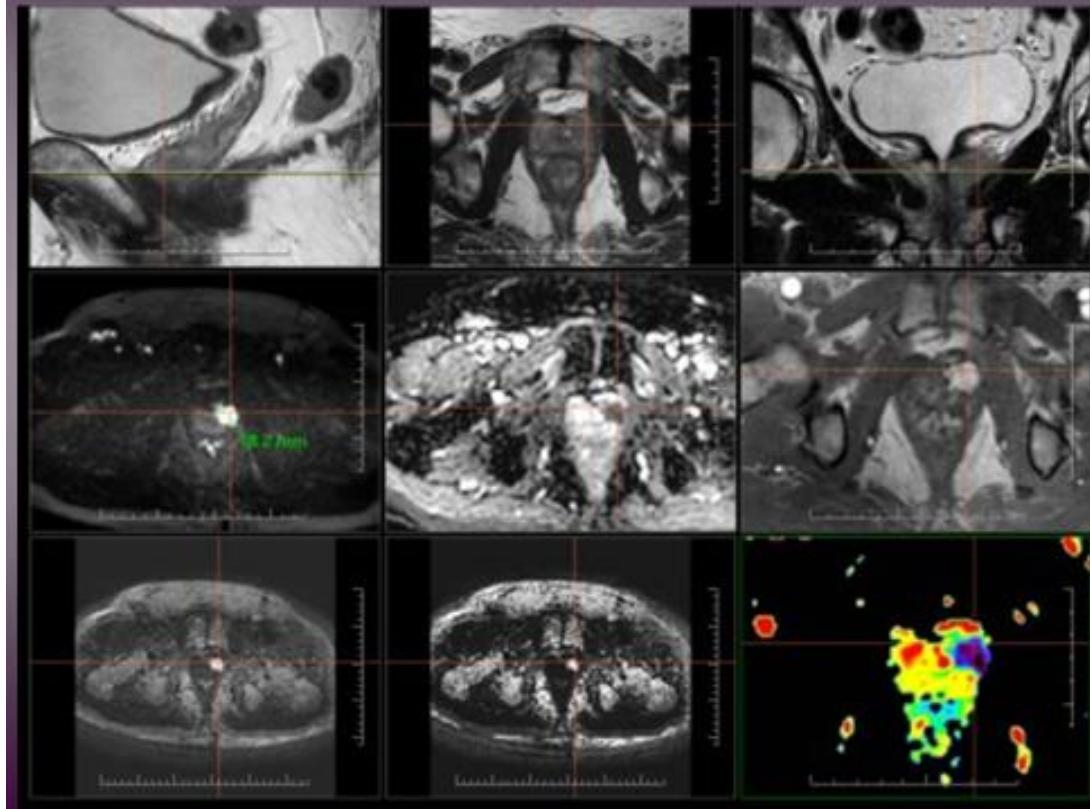
Densitometry:



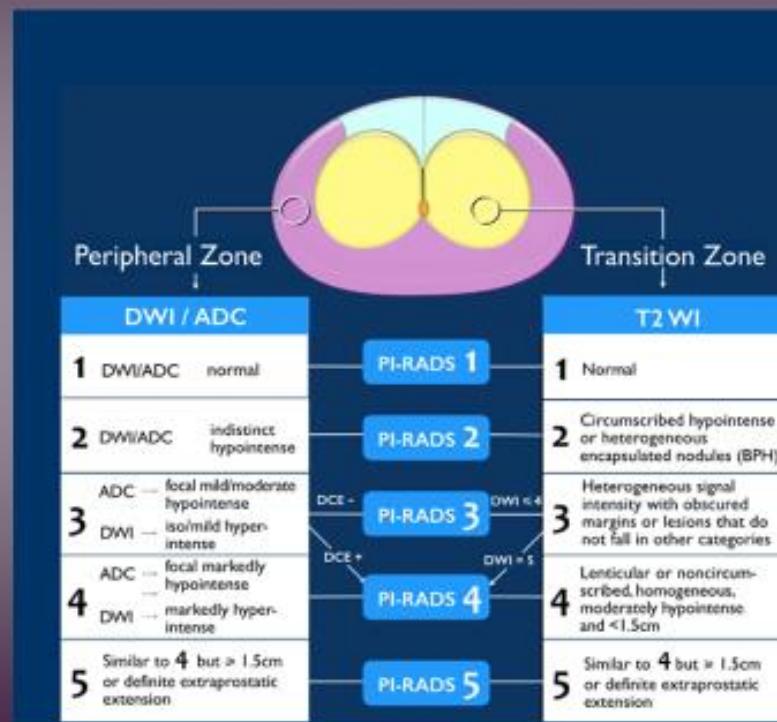
TUR (11/2017). PSA 5,52ng/ml, PSAD = 0.13ng/ml².

36x54x42mm (APxLLxCC), volume cca 42.5ml

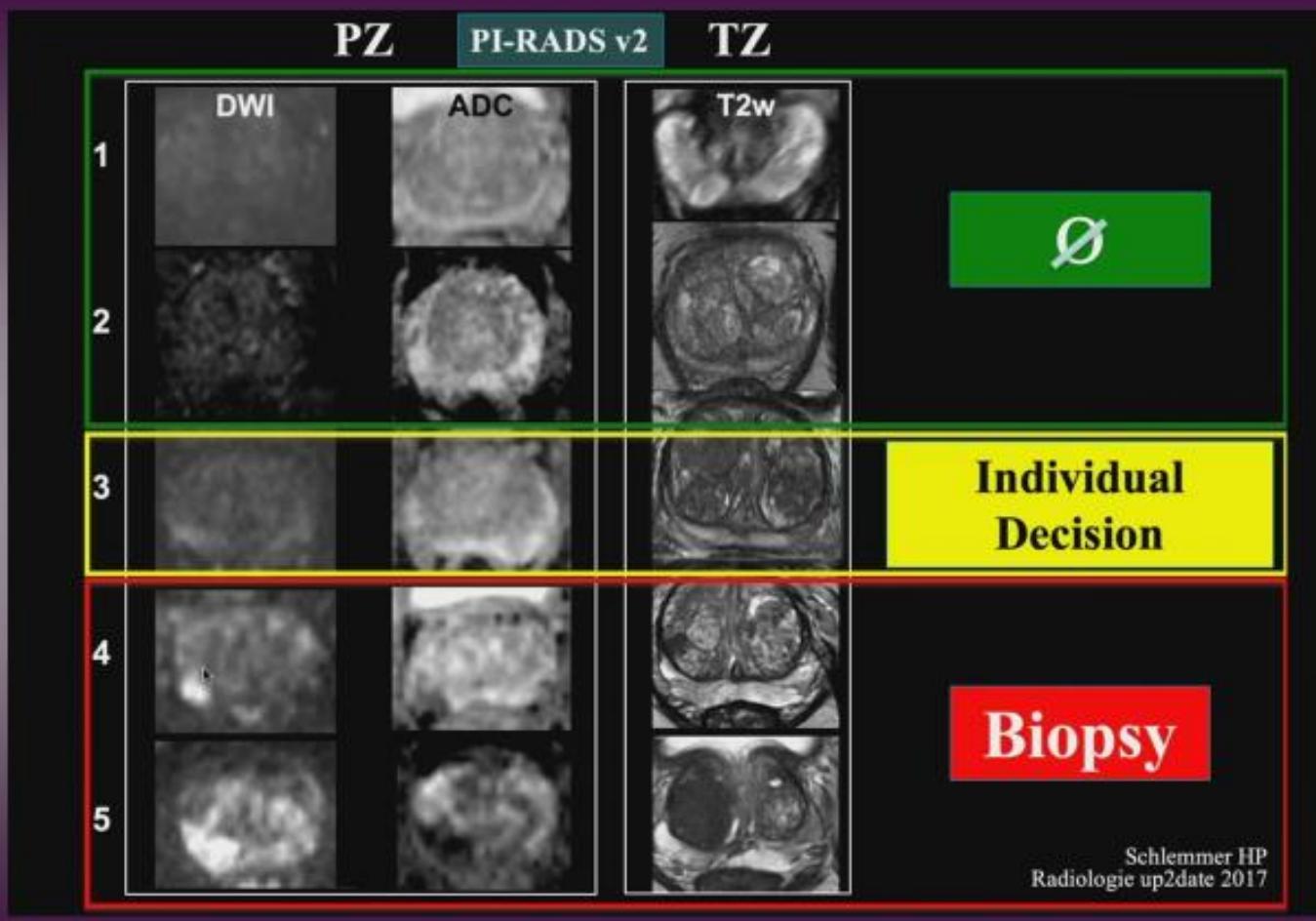
mpMR 1200 images



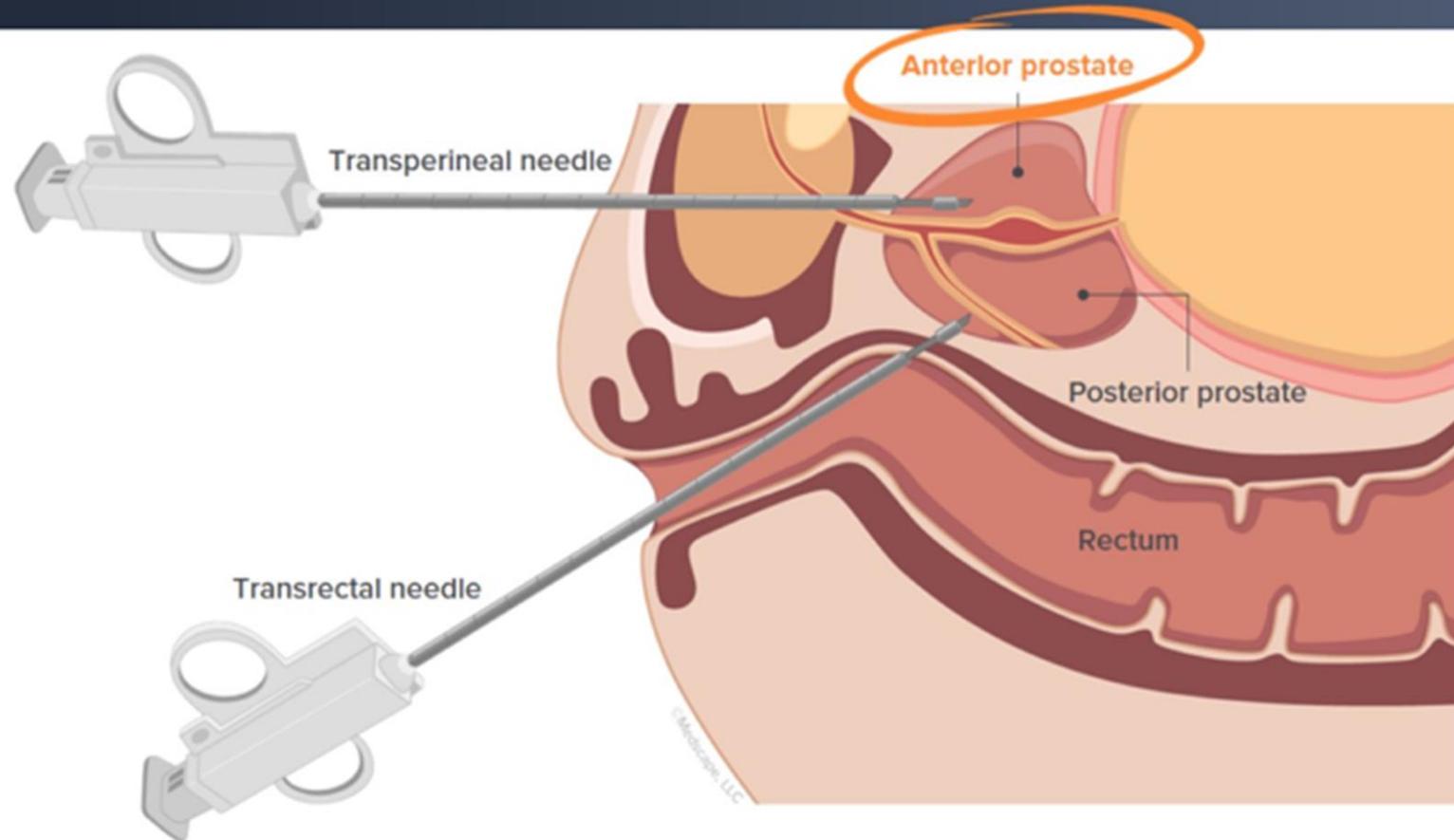
Prostate Imaging Reporting and Data System (PI-RADS)



Radiology Assistant

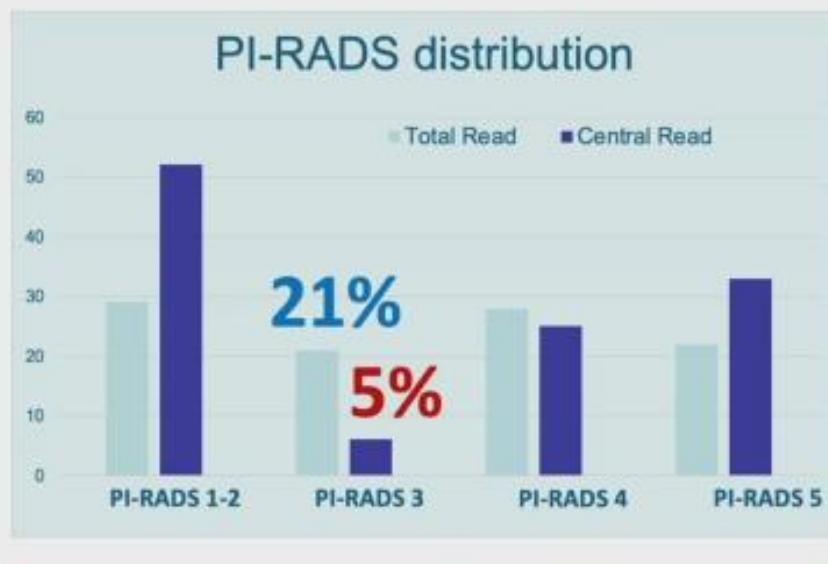


Transrectal vs Transperineal Biopsy Approaches



Chang DT, Challacombe B, Lawrentschuk N. Nat Rev Urol. 2013;10:690-702.

Pitfall I – Reader experience



ESOI Webinar 1, 01/31, 2019

HP Schlemmer, J. Radtke



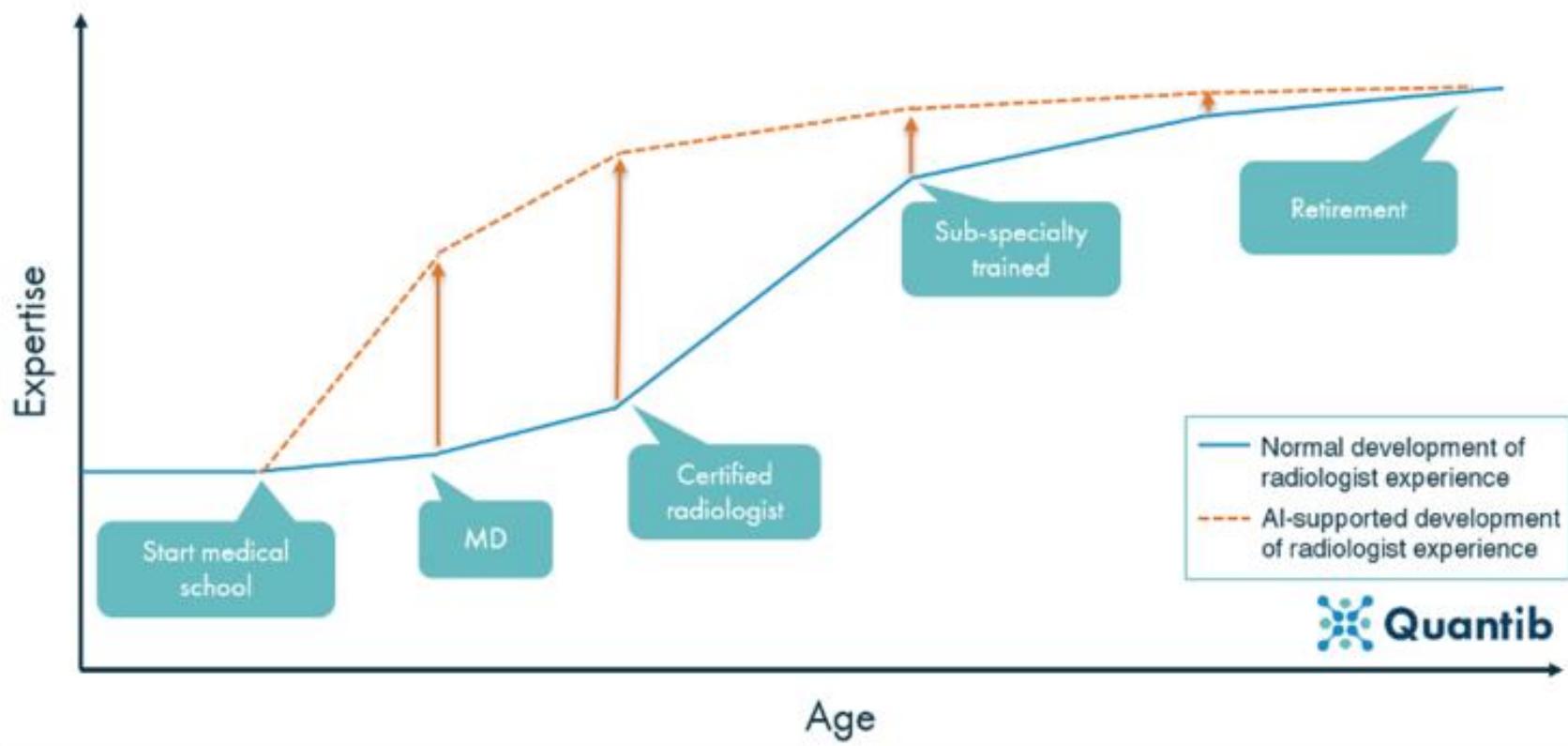
ESUR/ESUI consensus statements on multi-parametric MRI for the detection of clinically significant prostate cancer: quality requirements for image acquisition, interpretation and radiologists' training

Maarten de Rooij¹ · Bas Israël^{1,2} · Marcia Tummers³ · Hashim U. Ahmed^{4,5} · Tristan Barrett⁶ · Francesco Giganti^{7,8} · Bernd Hamm⁹ · Vibke Løgager¹⁰ · Anwar Padhani¹¹ · Valeria Panebianco¹² · Philippe Puech¹³ · Jonathan Richenberg¹⁴ · Olivier Rouvière^{15,16} · Georg Salomon¹⁷ · Ivo Schoots^{18,19} · Jeroen Veltman²⁰ · Geert Villeirs²¹ · Jochen Walz²² · Jelle O. Barentsz¹

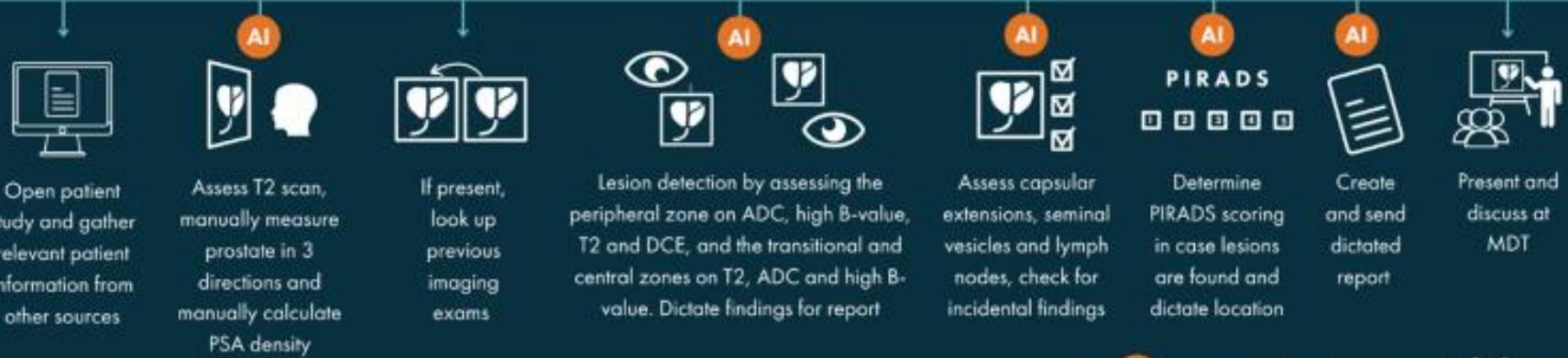
Table 4 Consensus-based criteria ‘basic’ versus ‘expert’ radiologists. N/A not applicable

Basic	Criterion	Expert
100	Minimum number of supervised cases before independent reporting	N/A
400	Minimum number of cases read	1000
150	Minimum number of cases/year	200*
1	Examination interval (year(s))	4
80	Agreement in double reads with expert centre (%)	≥ 90

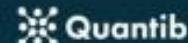
THE RADIOLOGIST'S LEARNING CURVE FOR READING PROSTATE MRIS



The current prostate MRI reading workflow is lengthy, labour-intensive and requires substantial practice to master. Integrating AI in the prostate radiology workflow can increase its efficiency



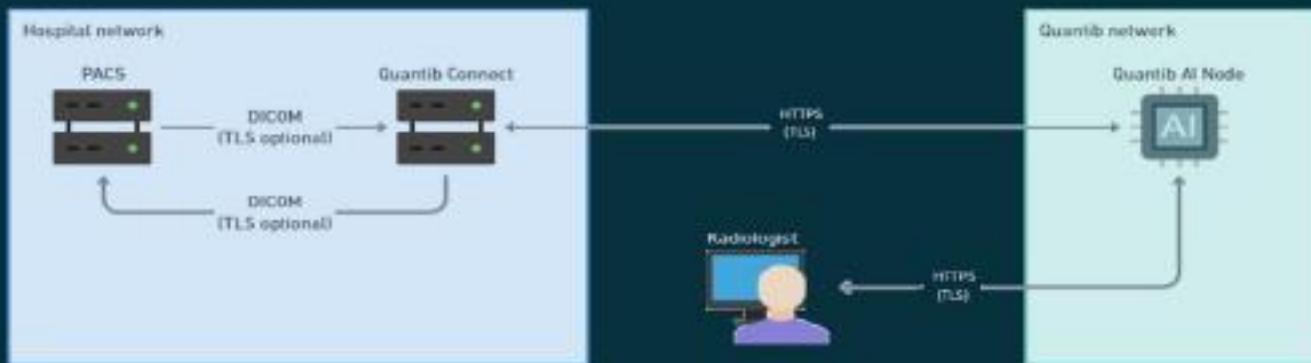
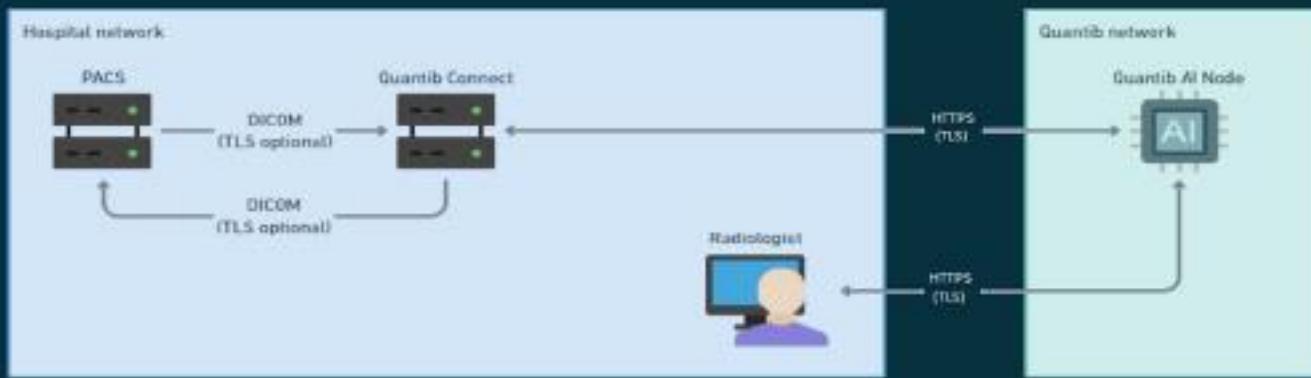
AI This is where AI can be implemented

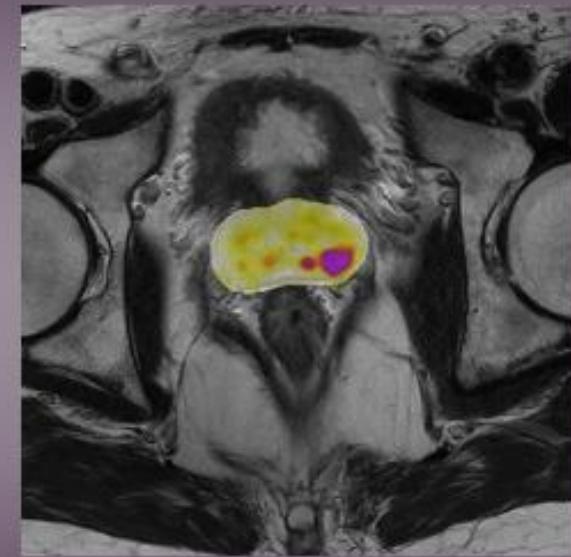
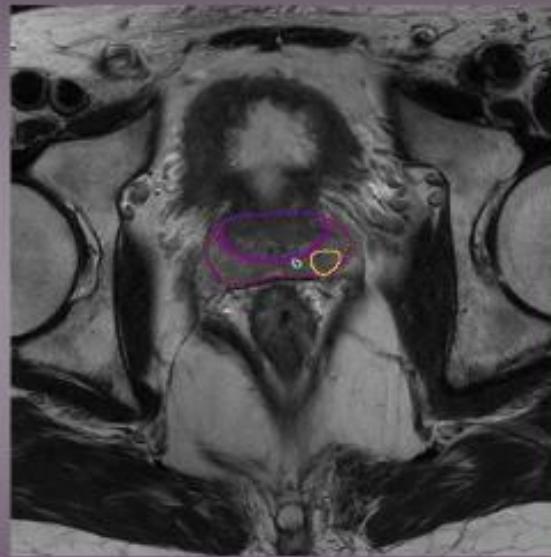
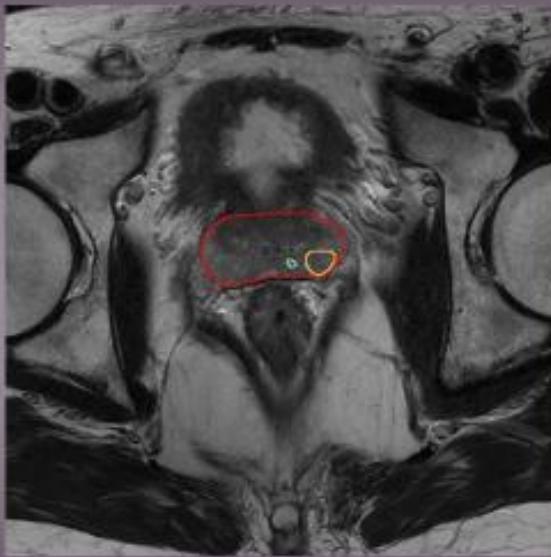


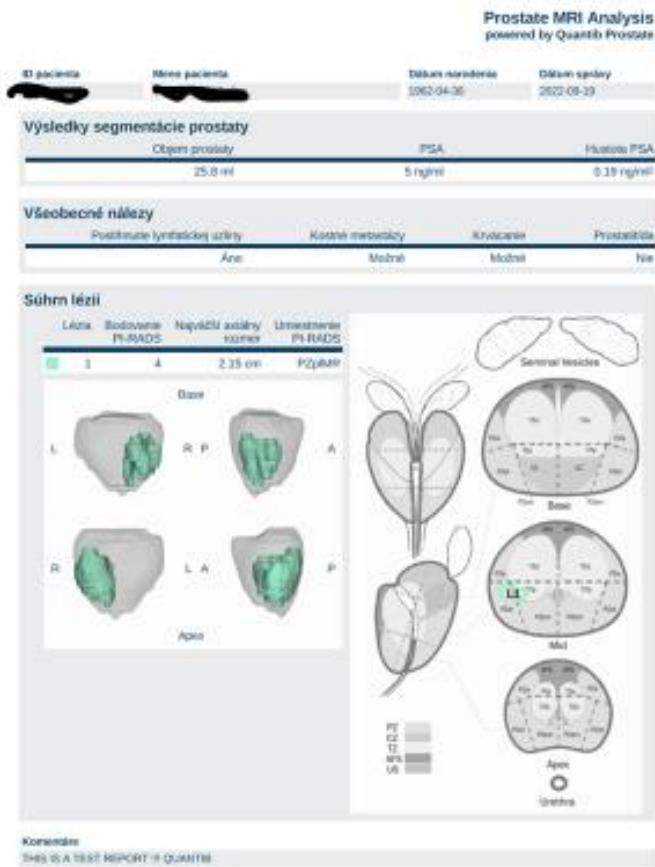


- Accelerated workflow
- Accurate quantification
- Elaborate reporting

Quantib® Connect solution



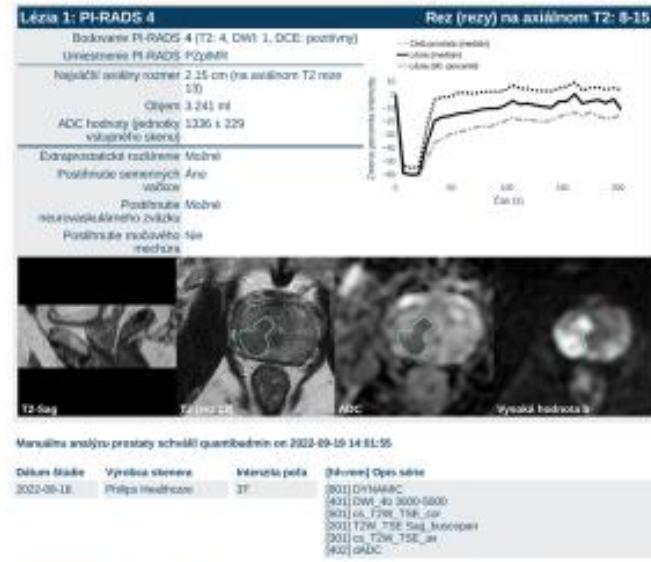




ID pacienta: 6294036185

© Quantib Prostate 2.1.1 | Quantib AI Node 2.5.0

Strana 1 of 2



ID pacienta: 6294036185

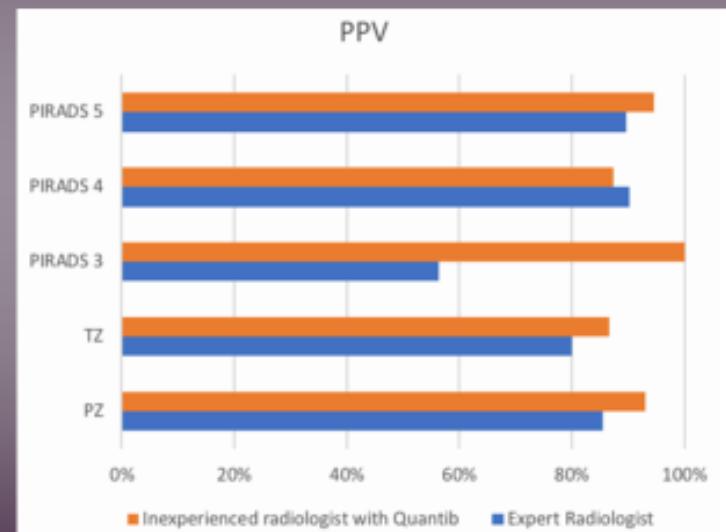
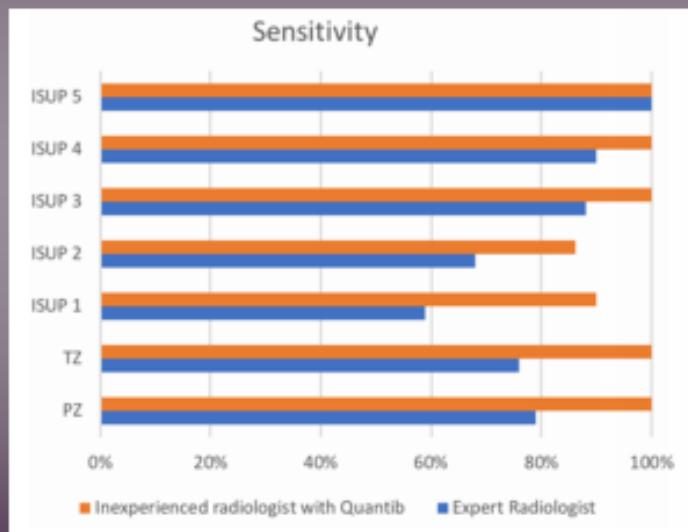
© Quantib Prostate 2.1.1 | Quantib AI Node 2.5.0

Strana 2 of 2

Article

Quantib Prostate Compared to an Expert Radiologist for the Diagnosis of Prostate Cancer on mpMRI: A Single-Center Preliminary Study

Eliodoro Faiella ^{1,2}, Daniele Vertulli ¹✉, Francesco Esperto ³, Ermanno Cordelli ⁴, Paolo Soda ⁴✉,
 Rosa Maria Muraca ², Lorenzo Paolo Moramarco ², Rosario Francesco Grasso ¹, Bruno Beomonte Zobel ¹
 and Domiziana Santucci ^{1,2,4,*}✉



Tomography 2022, 8, 2010–2019. <https://doi.org/10.3390/tomography8040168>

PSA density analysis mpMRI analysis

This workflow step is read-only, because it has been approved. Editing has been disabled.

 There are 2 warnings [Show more](#)

Editing tools

Reset segmentation Delete all  

Display

Show ROI as outlines [Reset viewers](#)

Measurements

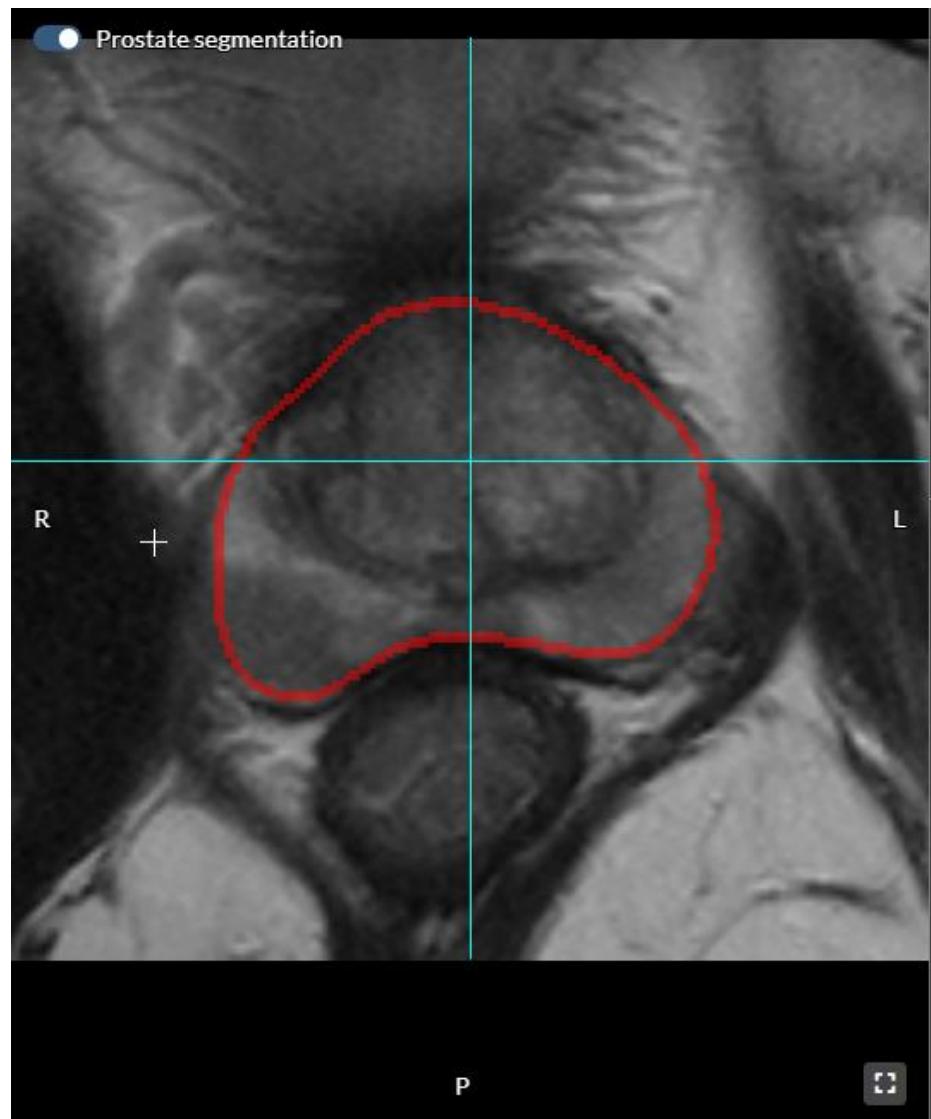
PSA value: 10.53 ng/ml

Prostate volume: 30.6 ml

PSA density: 0.34 ng/ml²

[Next >](#)

[Reject](#)  



PSA density analysis

This workflow step is read-only, because it has been approved. Editing has been disabled.

mpMRI analysis

There are 2 warnings [Show more](#)

Regions of interest

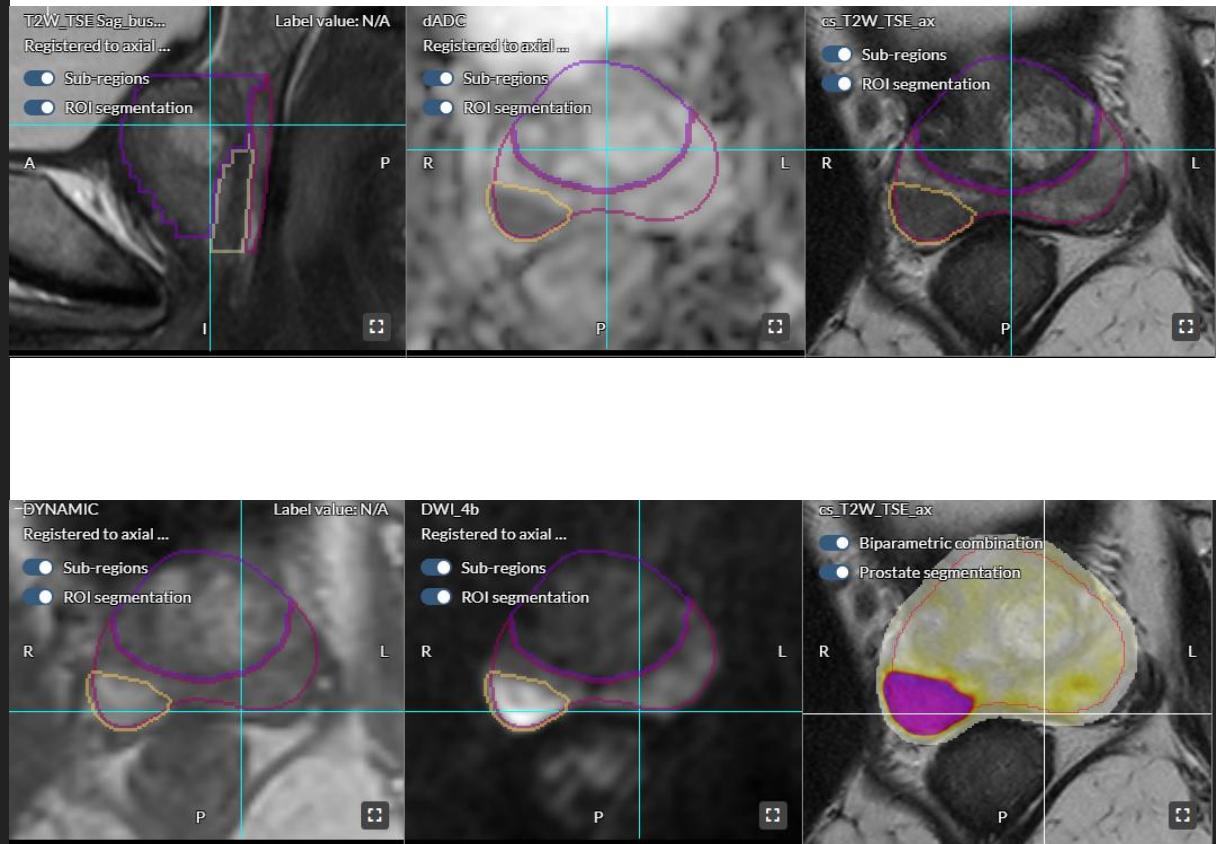
Id	Volume ml	Dimension cm [slice]	ADC	PI-RADS
1	2.690	1.86[13]	0.782 ± 0.217	5/Pzpl-MR

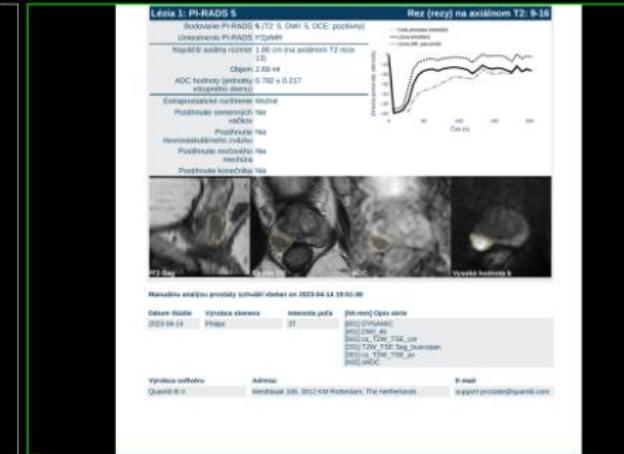
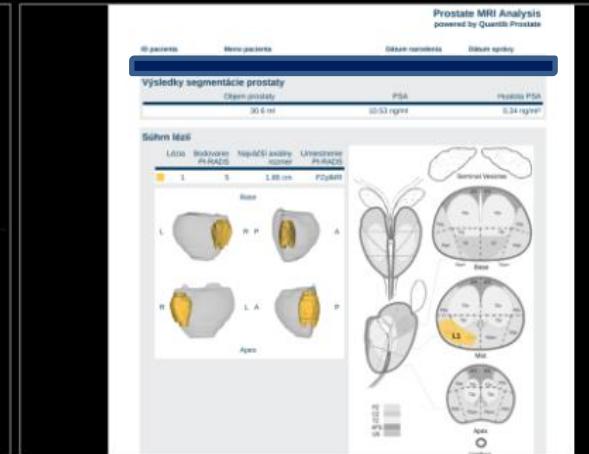
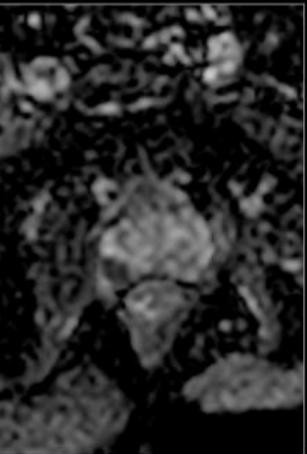
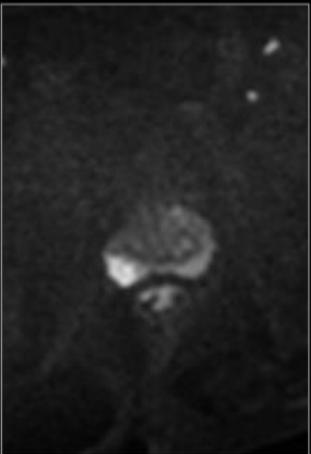
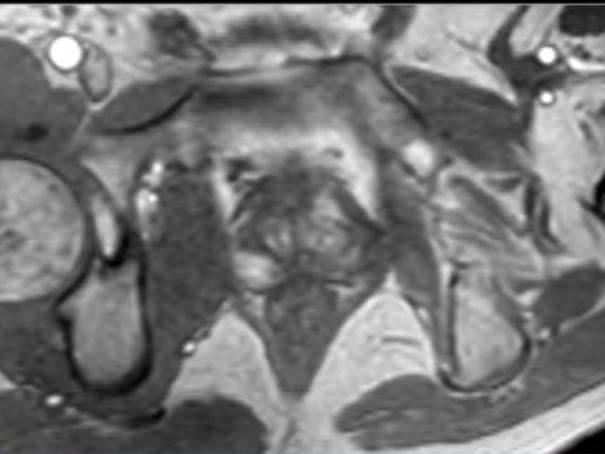
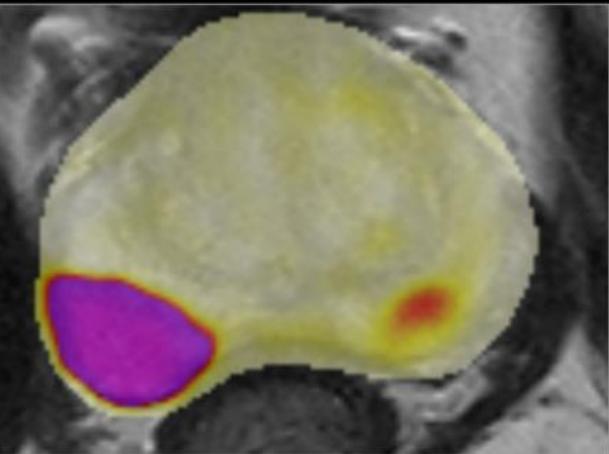
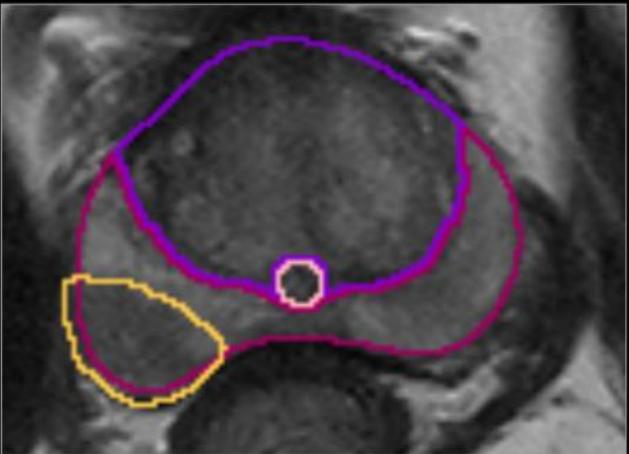
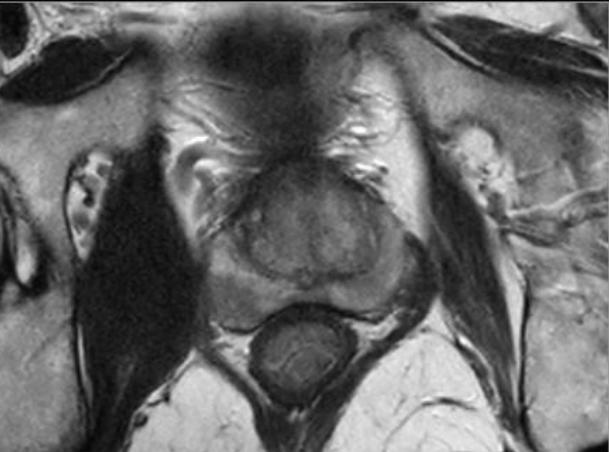
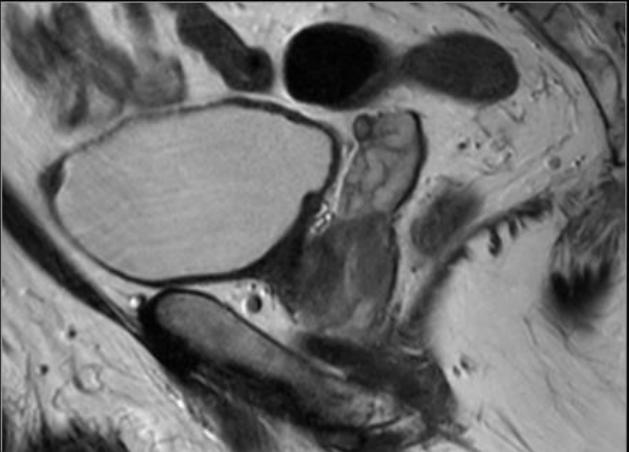
Editing tools

Finish editing

Delete all

< Previous **Approve** **Reject**







S podporou AI umožňuje hodnotenie mpMR na expertnej úrovni

- Zrýchľuje (zefektívňuje) hodnotenie
- Spresňuje a urýchľuje kvantifikáciu a hodnotenie
- Umožňuje efektívnu tvorbu štrukturovaného a štandardizovaného popisu