

H-scan imaging and quantitative measurement to distinguish melanoma metastasis

Jihye Baik
Department of Electrical
and Computer Engineering
University of Rochester
Rochester, NY, USA
jbai@u.rochester.edu

Shuyang Huo
Department of Microbiology,
Immunology University of Rochester
School of Medicine, Dentistry
University of Rochester Rochester
NY, USA
shuyang.hu@u.rochester.edu

Christopher J. Priebe
Department of Surgery University
of Rochester Medical Center
University of Rochester Rochester
NY, USA
cpriebe@u.rochester.edu

Devin J. Parker

fraction or percentage of higher frequency scattering encoded as blue color which is known as percent blue

$$\% \text{ blue} = \frac{\text{Number of pixels with color level } \geq 7}{\text{Total number of pixels}} \times 100. \quad (1)$$

H-scan analysis results in color levels for all pixels of input RK data. The color levels range from 0 to 7; levels 0-6 are considered red in color while levels 7 are considered blue in color. Thus, the number of pixels having color level between 0 and 6 is the numerator of (1). Utilizing the color levels obtained by H-scan analysis, we calculated the signal-to-noise ratio (SNR) of the color levels.

$$\text{H-scan SNR} = \frac{\sigma_{\text{red}}}{\sigma_{\text{blue}}} \quad (2)$$

where σ_{red} and σ_{blue} are the mean and standard deviation of the color levels respectively. In addition to the SNR of the H-scan, we also measured the SNR of the B-scan envelope data.

$$\text{B-scan SNR} = \frac{\sigma_{\text{red}}}{\sigma_{\text{blue}}}$$

-8) C>!CGU#->!

The H-scan analysis is capable of distinguishing between the "U++ and "U++ER subtypes of melanoma) H-scan parameters can differentiate the subtypes with lo2 p-value 50C)C;6 and high classification accuracy 5: :); <6 and H-scan imaging also shows a color difference between the two) This difference is not noticeable in B-scan parameters and imaging) Given that "U++ER melanoma tumors contain more immune cells within their 1+E than "U++ melanoma tumors H-scan may detect the immune cell number difference ?@; @JA) The potential for H-scan analysis to predict melanoma treatment response requires further investigations)

Therefore the H-scan approach with the parameters is promising for the clinical differentiation of immunologically distinct melanoma 1+Es) = e anticipate clinical use of H-scan parameters for melanoma diagnosis as well as the monitoring of treatment response in heterogeneous metastatic disease)

\$C0!>=GEDP+E!1

This work was supported by National Institutes of Health grant R7@EBC7;7BC)

References

?@A 0) *uiaoit D) DiCen4o 0) Katima Q*uantitative ultrasound radiomics for therapy response monitoring in patients with locally advanced breast cancer: a multi-institutional study results R vol) @; no) ' Jul 7' 7C7C)

?7A \$) +) /irmoa4en \$) Ohurana \$) El 0affas Q*uantitative ultrasound approaches for diagnosis and monitoring hepatic steatosis in nonalcoholic fatty liver disease R vol) @C no) B pp) F7' '-F7: B 7C7C)

?DA +) G) >el4e and J) +amou QRevie2 of *uantitative Ultrasound: Envelope Statistics and Backscatter Coefficient Imaging and Contributions to Diagnostic Ultrasound R !!! " # # vol) JD no) 7 pp) DDJ-; @ Ke& 7C@J)

?FA #) C) Gin E) He&a 1) = olfson Q! oninvasive Diagnosis of Nonalcoholic Fatty Liver Disease and *uantification of Liver Fat Using a !e2 *uantitative Ultrasound Technique R \$ % % vol) @D no) ' pp) @DD' -S Jul 7C@;)

?;A J) +amou and +) G) >el4e & Dordrecht: Springer 7C@D)

?JA R) J) Gavarello =) R) Ridg2ay #) #) #ar2ate QCharacterization of Thyroid Cancer in Mice Models Using High-Frequency *uantitative Ultrasound Techniques R " % vol) DB no) @7 pp) 7DDD-7DF@ Dec 7C@D)

?A +) G) >el4e =) D) >Brien and J) K) Machary Q*uantitative ultrasound assessment of breast cancer using a multiparameter approach R () * " + % , - . pp) B: @-S 7CC')

?;A +) G) >el4e =) D) >Brien Jr) J) /) Blue QDifferentiation and characterization of rat mammary fibroadenomas and F1@

mouse carcinomas using quantitative ultrasound imaging R !!!

?BA 0) J) /arker and J) Baek QKine-tuning the H-scan for discriminating changes in tissue scatterers R / ! % % !0 vol) J no) F Jul 7C7C)

?@CA J) Baek R) \$hmed J) "e QH-scan #hear =ave and Bioluminescent Assessment of the Progression of Pancreatic Cancer Metastases in the Liver R " % vol) FJ no) @7 pp) DDJB-DD': Dec 7C7C)

?@@A J) Baek #) #) /oul G) Basavarajappa QClusters of Ultrasound Scattering Parameters for the Classification of Fatty Liver Disease R " / % 7C7@)

?@7A J) Baek #) #) /oul 1) \$) #2anson Q#attering signatures of normal versus abnormal livers with support vector machine Classification R " % vol) FJ no) @7 pp) DD'B-DDB7 Dec 7C7C)

?@DA J) Baek 1) \$) #2anson 1) Iuthill Qsupport vector machine based liver classification: fibrosis, steatosis and inflammation R % ' () (" + 1 2 7C7C)

?@FA J) Baek and 0) J) /arker QH-scan trajectories indicate the (n)-7.75872 (o f 3.44001P3.879% (#)3.43819 (9 (m)1.42924 (a)-4.025

