



'ISCHEMIC STROKE DETECTION IN NON-ENHANCED COMPUTED TOMOGRAPHY EXAMINATIONS'

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INTRODUCTION:

- Stroke is a worldwide concern, only in Brazil it accounts for 10% of all registered deaths.
- Early diagnosis is essential to avoid irreversible cerebral damage.
- Non-enhanced computed tomography (NECT) is the main diagnostic techniques used to diagnose stroke.

INTRODUCTION:

Stroke Diagnosed with CT

- Distinguish between ischemic and hemorrhagic stroke.
- Ischemic stroke with hemorrhagic transformation >> the wrong choice of treatment can lead to patient death;



Hyperdense area
of hemorrhage

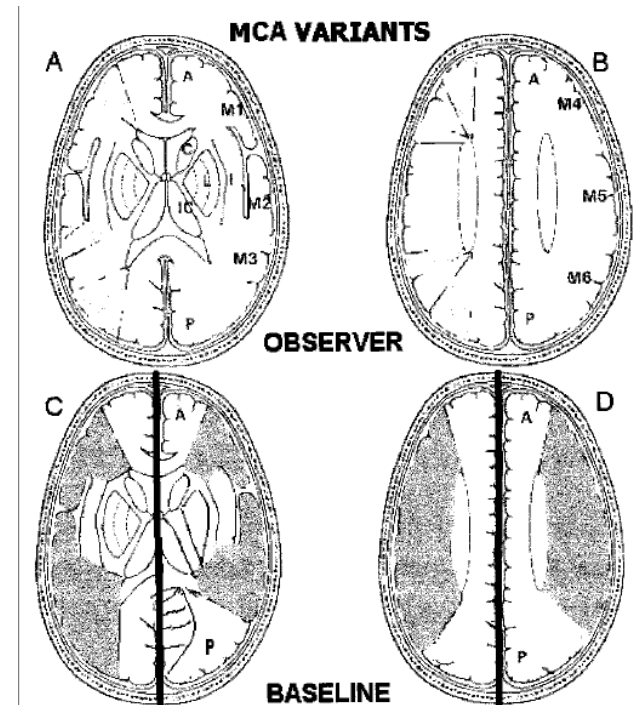
Chawla et al. (2009)

INTRODUCTION:

ASPECTS - *Alberta Stroke program early CT score*

- Standard ischemic stroke diagnosis with a reproducible scoring system. The score divides the middle cerebral artery (MCA) territory into 10 regions of interest.

This analysis is thus a subjective estimative of the affected area by ischemic stroke.



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PURPOSE:

- The aim of this work was to implement an image segmentation and enhancement algorithm to detect ischemic stroke lesions in NECT scans.

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METHODS:

- Construction of a database with retrospective examination of patients diagnosed with stroke;
- **Inclusion criteria**
 - Patient diagnosed with stroke by specialist (neuroradiologist);
 - CT scans acquired with at least 16 slices scanner;
- **Exclusion criteria**
 - History of intracranial hemorrhage;
 - Malformations, tumors and aneurysms.

METHODS:

Computational algorithm was developed in Matlab software

Initial Image



Image
segmentation



Multiscale
enhancement
(wavelets)



Final Image



Area
Quantification

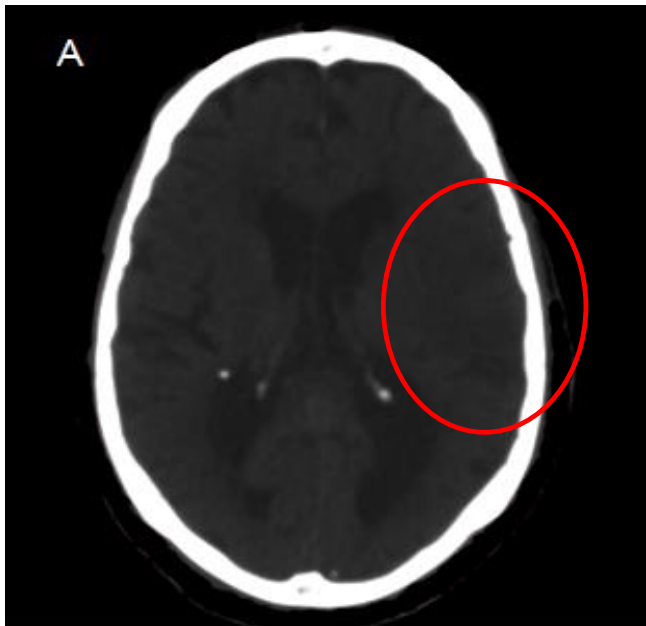


Fuzzy C-means
clustering

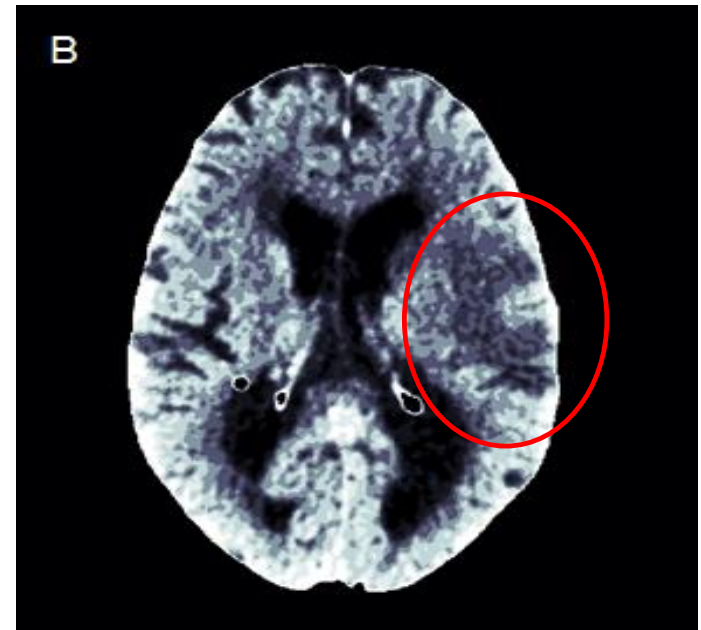
METHODS:

Multiresolution analysis via Wavelets: enhances morphological characteristics and frequencies presented in the image.

Fuzzy c-means clustering (FCM): identifies natural groups or cluster of pixels within each CT slice, which highlighted the areas affected by ischemic stroke.



A) Original image



B) Image after applying the algorithm.

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RESULTS:

- 15 patients were analyzed;
- Neuroradiologists found that the morphological filters actually improved visualization of ischemic areas;
- The comparison between the neuroradiology's subjective analysis and the computational algorithm showed a good agreement between detected areas affected by ischemic stroke.



Mean percentage
difference = 16 %

CONCLUSIONS:

Aid for the inexperienced
or non-specialist
radiologists



- Greater efficiency in the diagnosis;
- Early diagnosis (within 3 hours of treatment window);

These results indicates the importance of a **computer aided diagnosis software** to assist neuroradiology decisions, especially in critical situations such as the choice of treatment for ischemic stroke.