

Using AI to personalize and optimize the treatment of craniosynostosis

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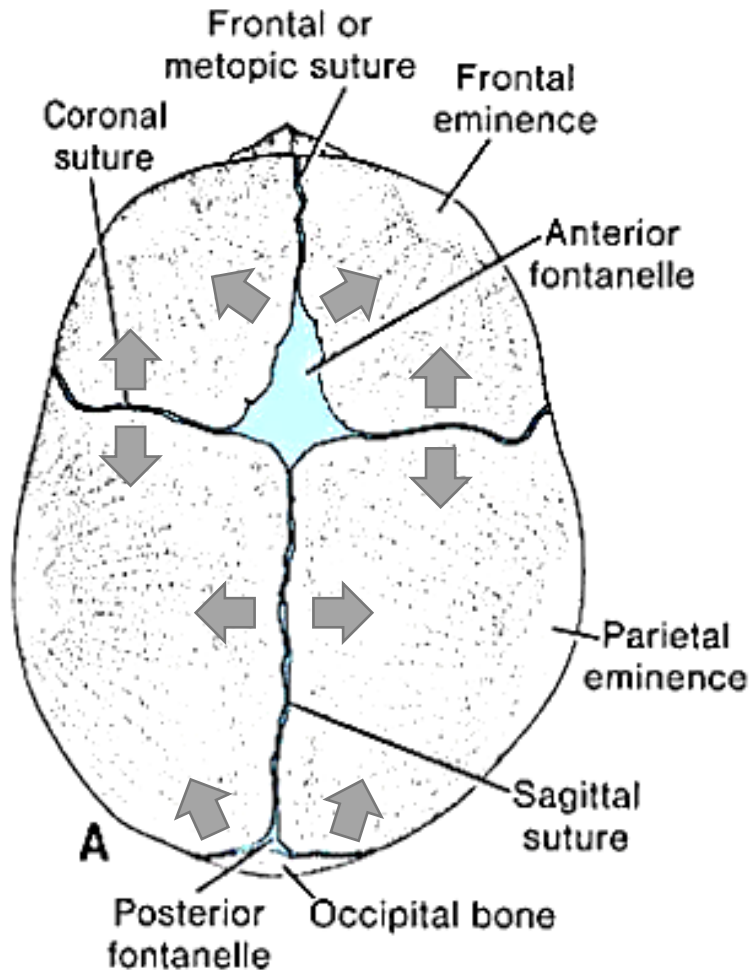
Department of Pediatric Neurosurgery
Children's Hospital Colorado

Research Director

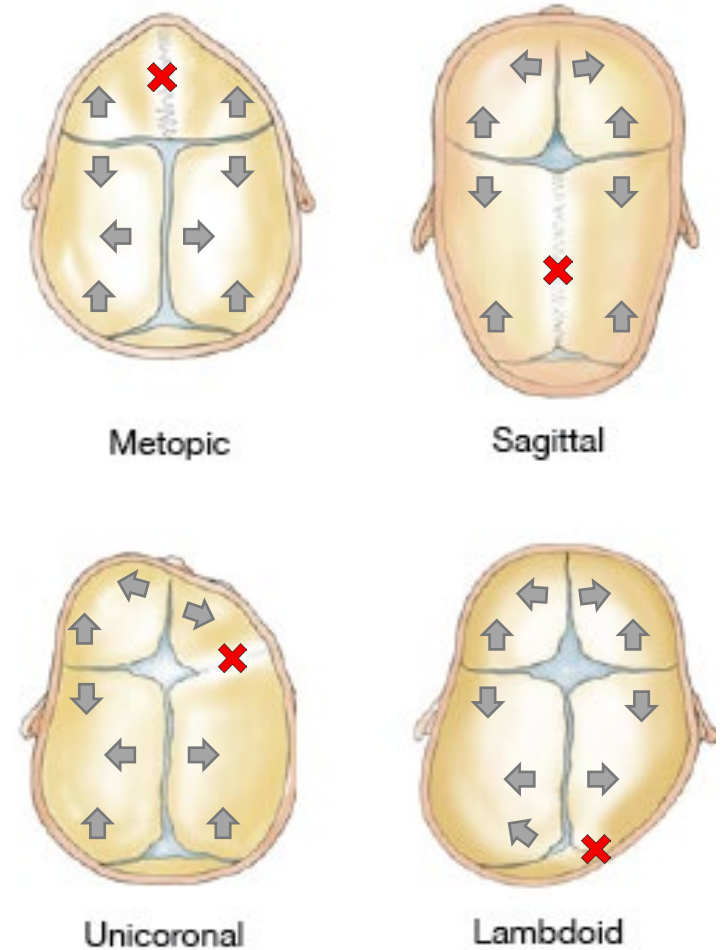
Department of Pediatric Plastic & Reconstructive Surgery
Children's Hospital Colorado

Craniosynostosis

- **Early fusion of one or more cranial sutures.** It affects ~1 in 1,600 - 1,800 live births.

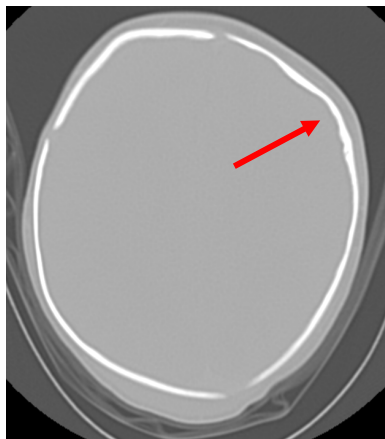
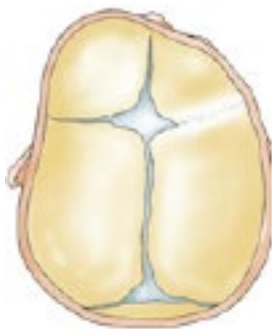


Single suture fusion

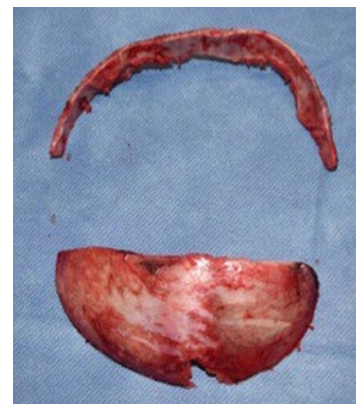


Traditional management of craniosynostosis

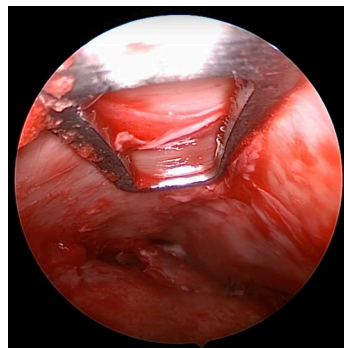
Pre-surgical evaluation



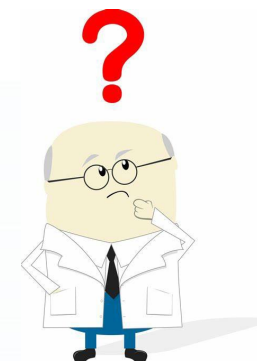
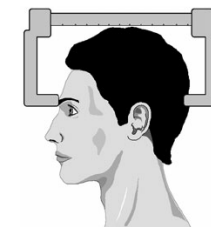
Open surgery



Endoscopic surgery

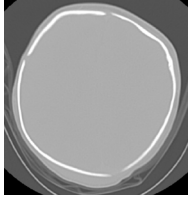


Post-surgical evaluation

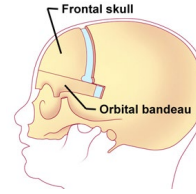


Our previous work

Pre-surgical evaluation



Treatment

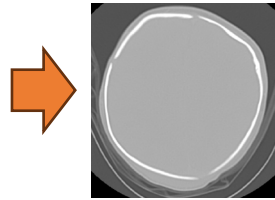


Post-surgical evaluation

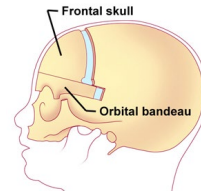


Our previous work

Pre-surgical evaluation



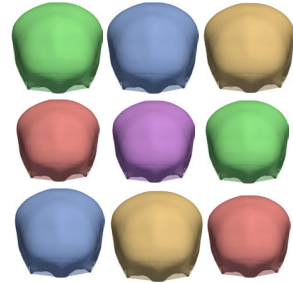
Treatment



Post-surgical evaluation

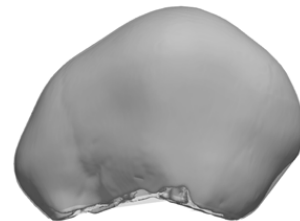
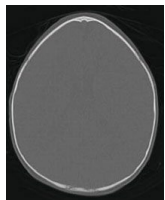


Normative database

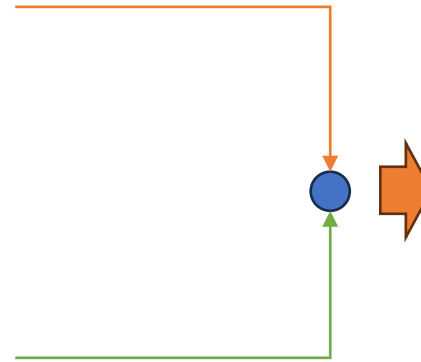


Normative cranial shape variability

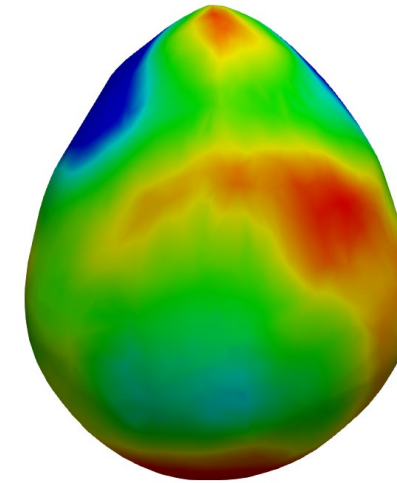
Patient



Cranial shape



Anterior

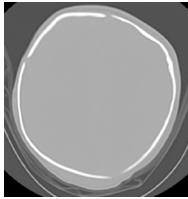


Posterior

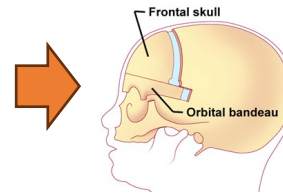
Malformations

Our previous work

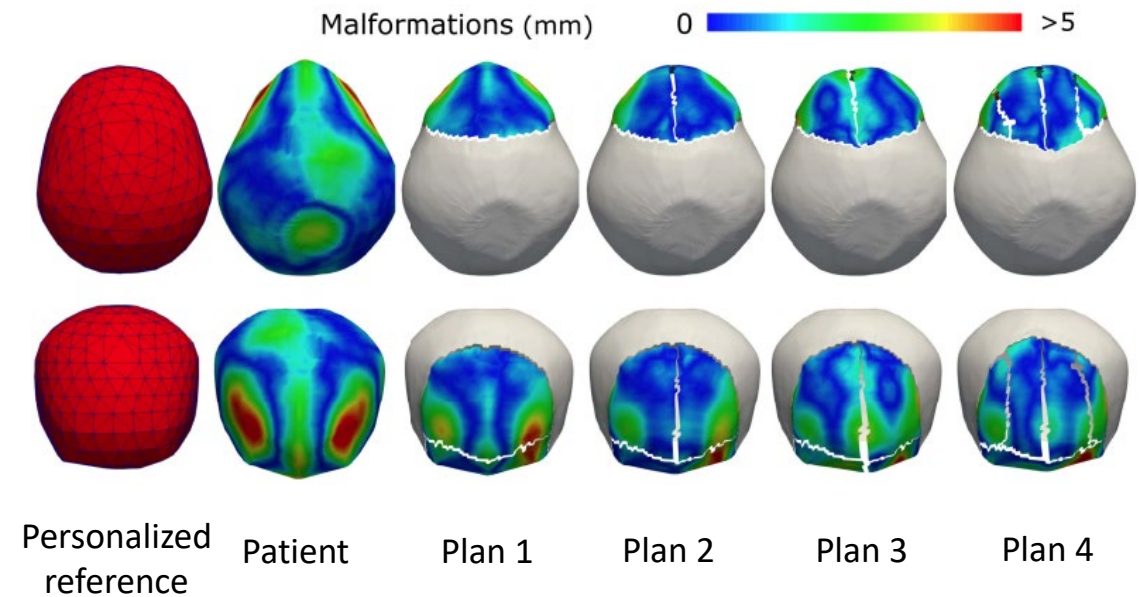
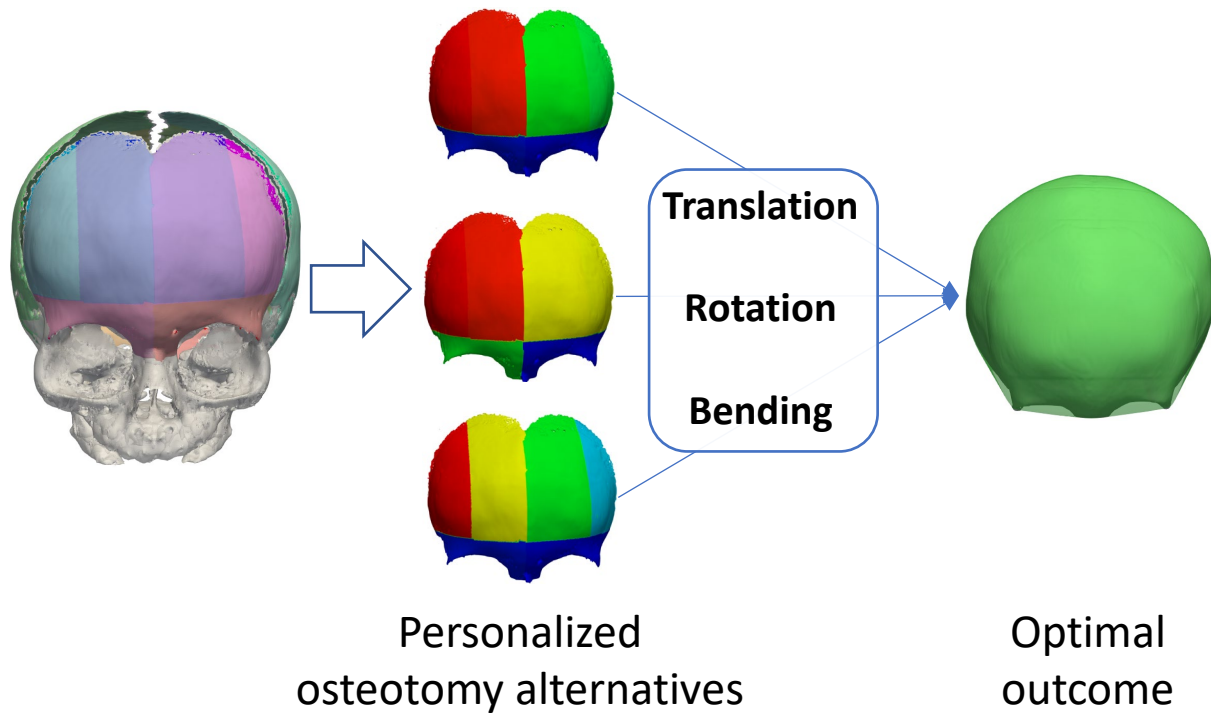
Pre-surgical evaluation



Treatment



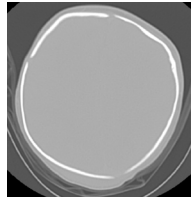
Post-surgical evaluation



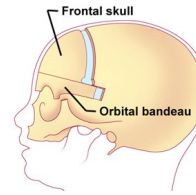
[Porras et al, Locally Affine Diffeomorphic Surface Registration and Its Application to Surgical Planning of Fronto-Orbital Advancement, IEEE Trans Med Imag, 2018]

Our previous work

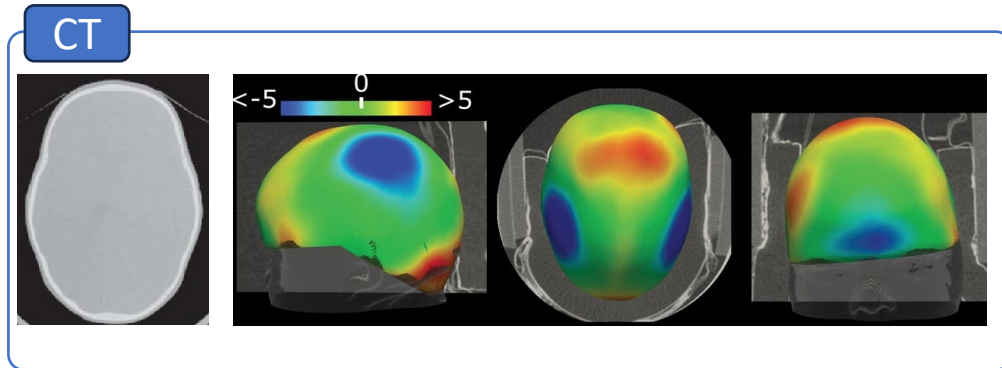
Pre-surgical evaluation



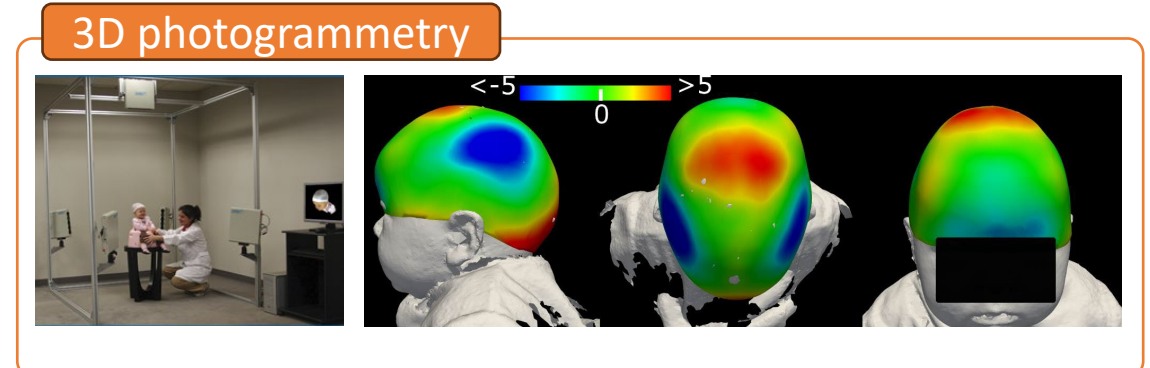
Treatment



Post-surgical evaluation



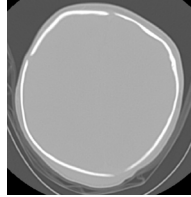
Craniosynostosis identification
❖ 95% sensitivity, 96% specificity



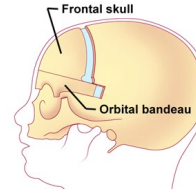
Identification of single fused suture
❖ Sagittal: 100% sensitivity, 99% specificity
❖ Unicoronal: 100% sensitivity, 99% specificity
❖ Metopic: 94% sensitivity, 100% specificity

Challenges

Pre-surgical evaluation



Treatment



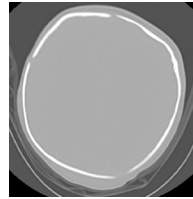
Post-surgical evaluation



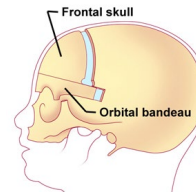
- Cannot quantify local volumetric anomalies in the context of age and sex
- Pre-surgical evaluations are not accurate at the time of surgery
- Post-surgical evaluation cannot be contextualized and interpreted

Challenges

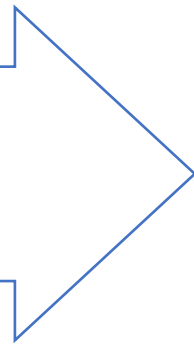
Pre-surgical evaluation



Treatment



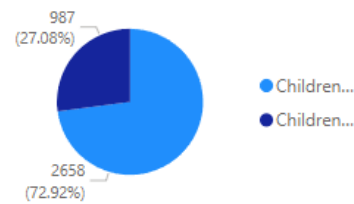
Post-surgical evaluation



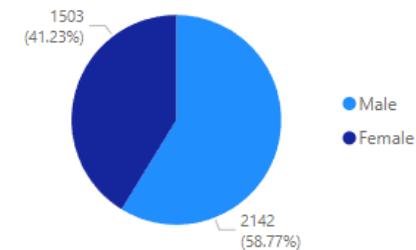
Craniosynostosis is a developmental disorders and must be studied as such



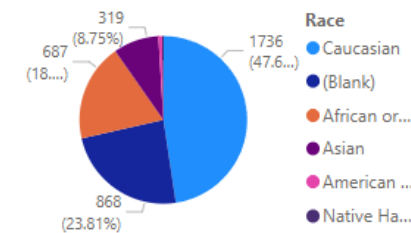
Patients by institution



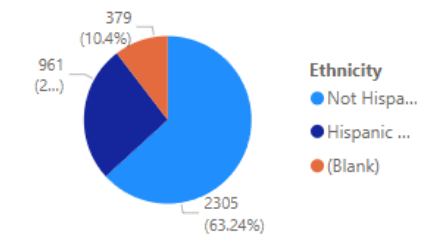
Patients by sex



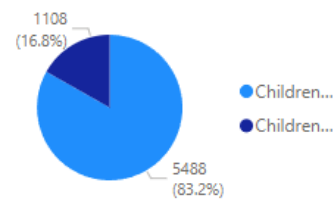
Patients by race



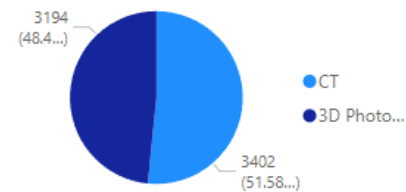
Patients by ethnicity



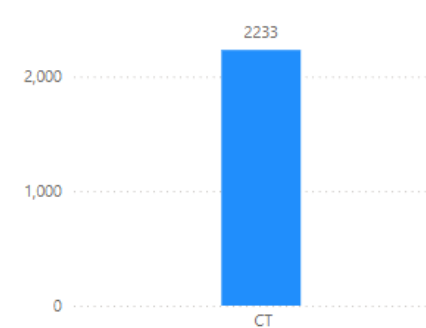
Images by institution



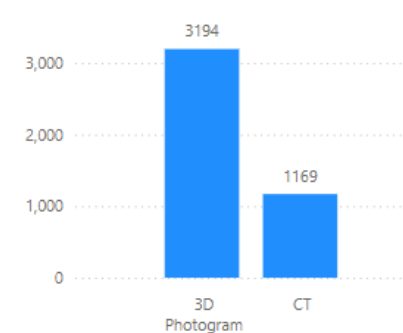
Images by type



Images: normative subjects

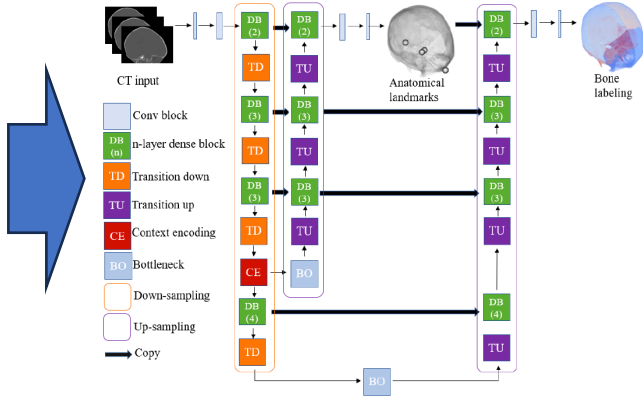
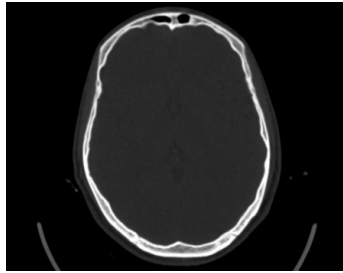


Images: patients with craniosynostosis



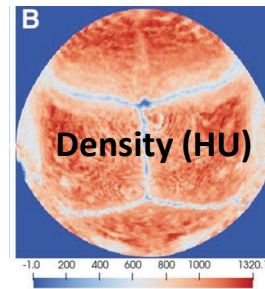
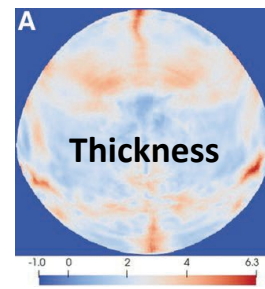
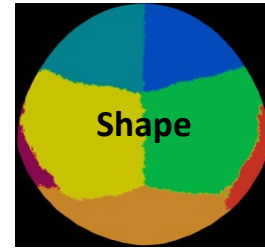
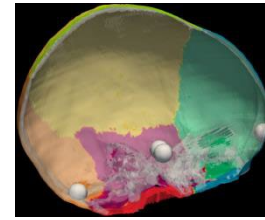
AI can learn personalized growth without longitudinal data

CT



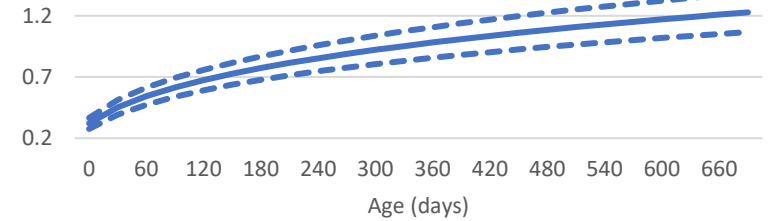
[Liu et al, MICCAI, 2022] [Liu et al, IEEE Tans Med Imag, 2023]

Standardization

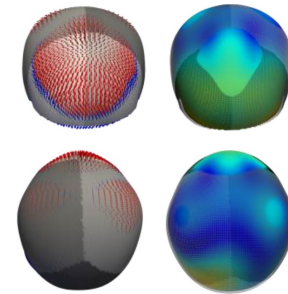
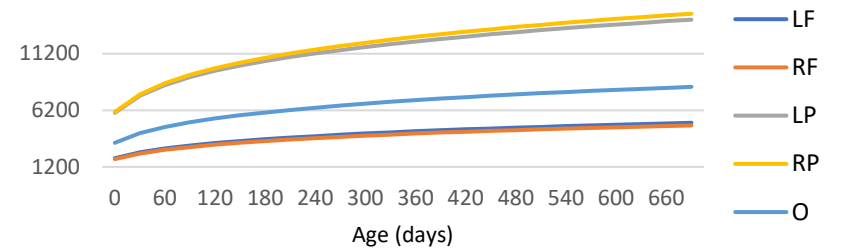


Personalized growth predictions

Intra-cranial volume (l)



Bone surface (mm²)

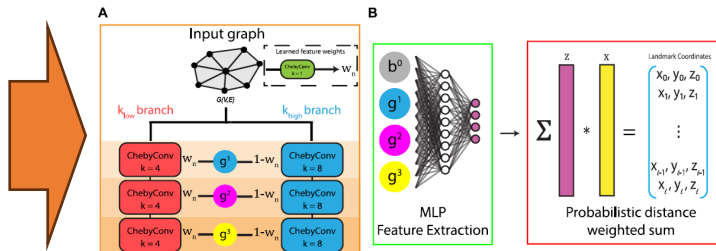


Predictive error: 1.36 ± 0.61 mm

Voxel spacing: 1.69 mm

[Porras et al, IEEE Trans Biomed Eng, 2022]

3D Photogrammetry

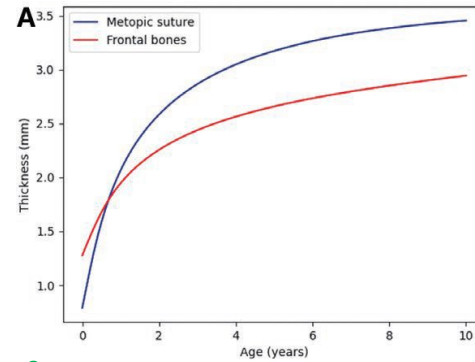
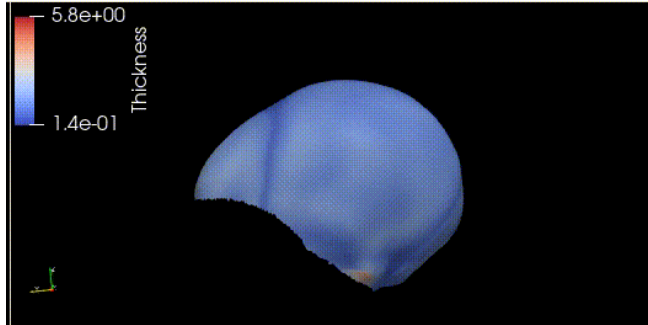


[Elkhill et al, MICCAI, 2022] [Elkhill et al, Comp Meth Prog Biomed, 2023]

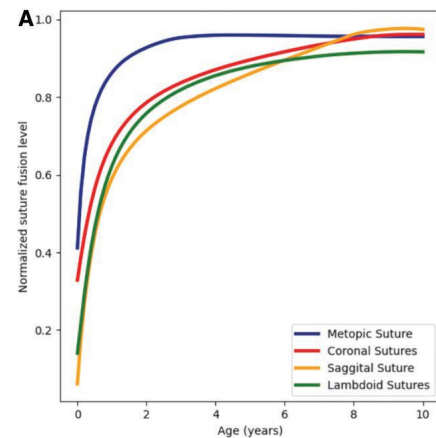
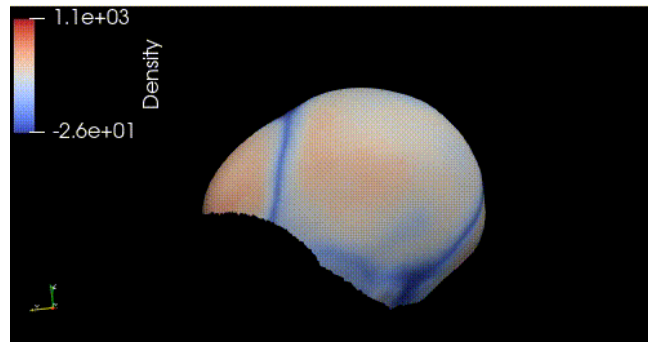
Developmental modeling

Normative reference model

Local thickness reference

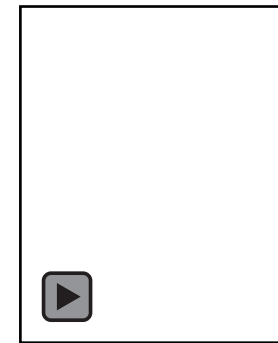


Local density reference

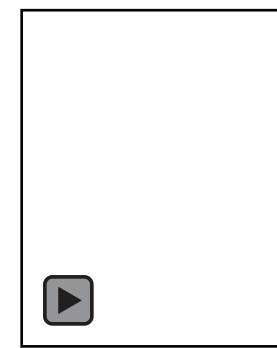


[Liu et al, Data-driven Normative Reference of Pediatric Cranial Bone Development, Plast Rec Surg GO, 2022]

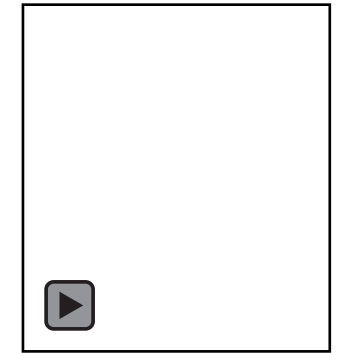
Predictive model of craniosynostosis



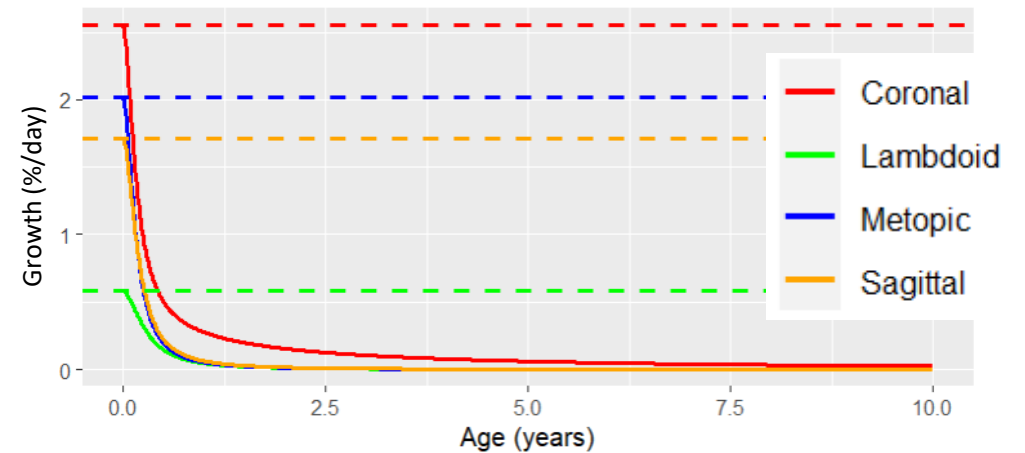
Metopic



Sagittal



Right coronal



[Liu et al, Data-driven cranial suture growth model enables predicting phenotypes of craniosynostosis, Sci Rep, 2023]

Developmental generative modeling

Method	PSNR	Shape distance (mm)	Volume difference (L)
cGAN	$22.41 \pm 3.91^*$	$7.54 \pm 4.05^*$	$0.28 \pm 0.22^*$
cVAE	$22.32 \pm 3.82^*$	$6.62 \pm 3.41^*$	$0.24 \pm 0.20^*$
AB-GAN	$25.41 \pm 2.28^*$	$6.39 \pm 3.36^*$	$0.27 \pm 0.19^*$
Baseline	$24.06 \pm 3.01^*$	$5.92 \pm 2.96^*$	$0.20 \pm 0.17^*$
TID-GAN	25.22 ± 2.35	$4.89 \pm 2.76^*$	$0.16 \pm 0.12^*$
REC-GAN	25.52 ± 2.33	$4.92 \pm 3.01^*$	$0.18 \pm 0.11^*$
Proposed	25.55 ± 2.21	4.66 ± 2.66	0.14 ± 0.12

* statistical significance



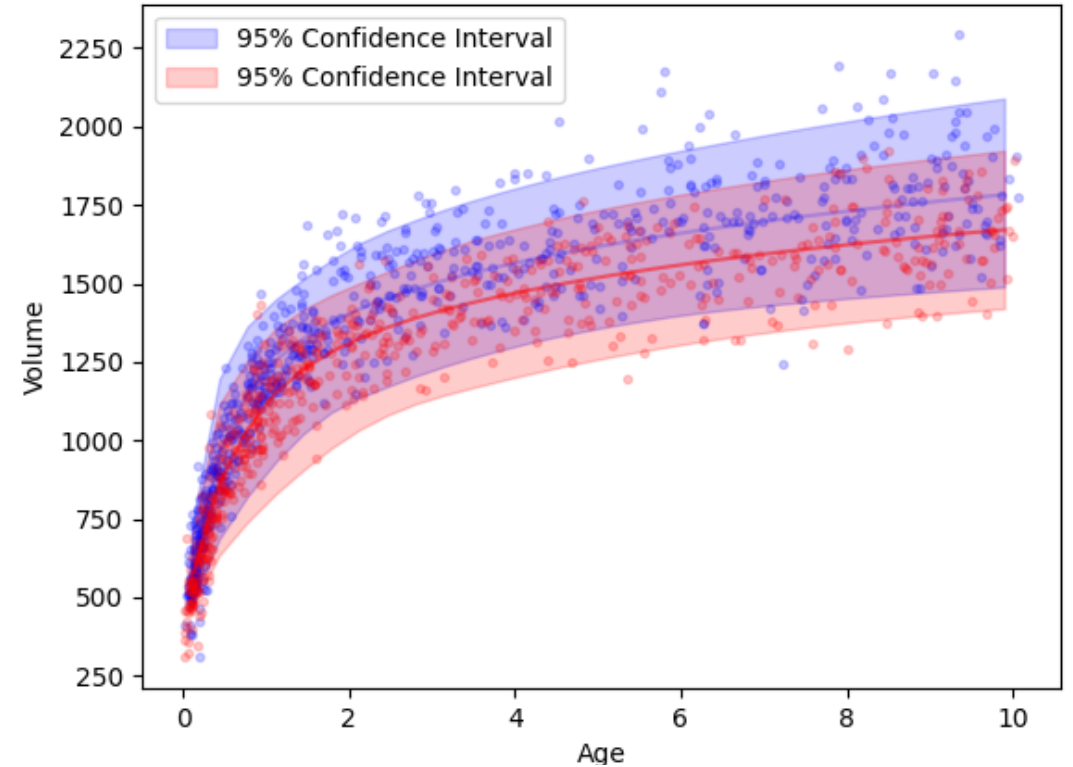
6 months

2.5 years

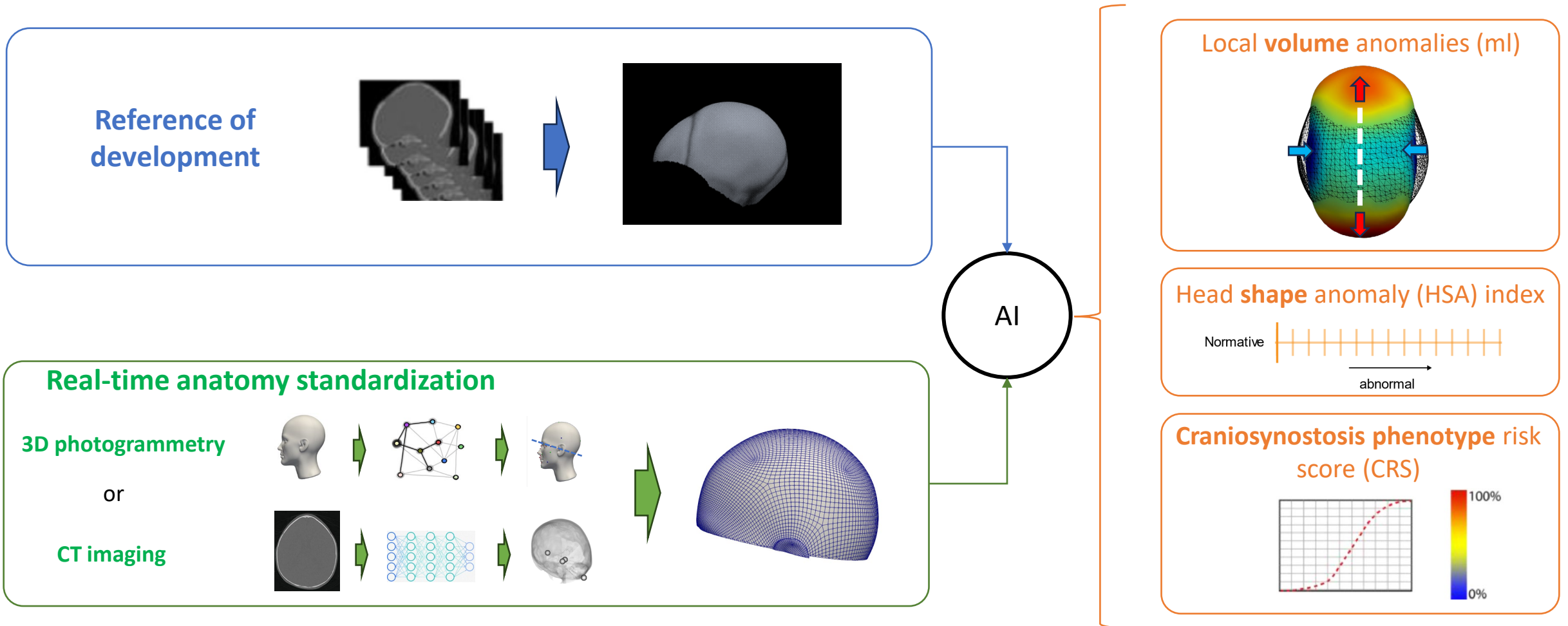
4.5 years

6.5 years

8.5 years



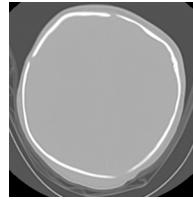
Quantitative characterization of development



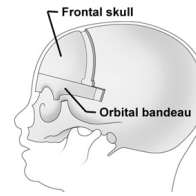
[Elkhill et al, Geometric learning and statistical modeling for surgical outcomes evaluation in craniosynostosis using 3D photogrammetry, Comp Meth Prog Biomed, 2023]

Our previous work

Pre-surgical evaluation



Treatment

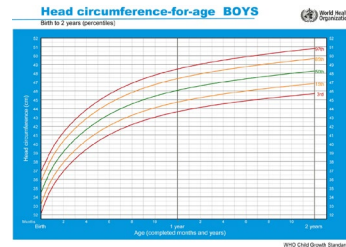
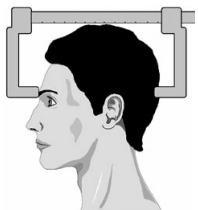


Post-surgical evaluation

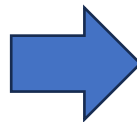
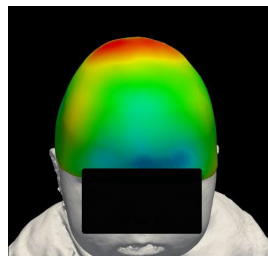


Evaluation of cranial growth

❖ Current: simple non-descriptive metrics



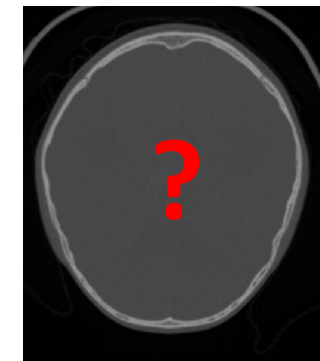
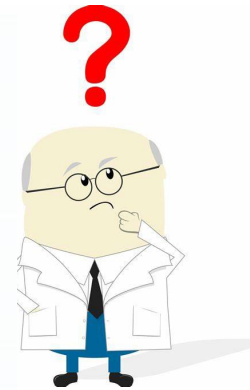
❖ Ongoing research



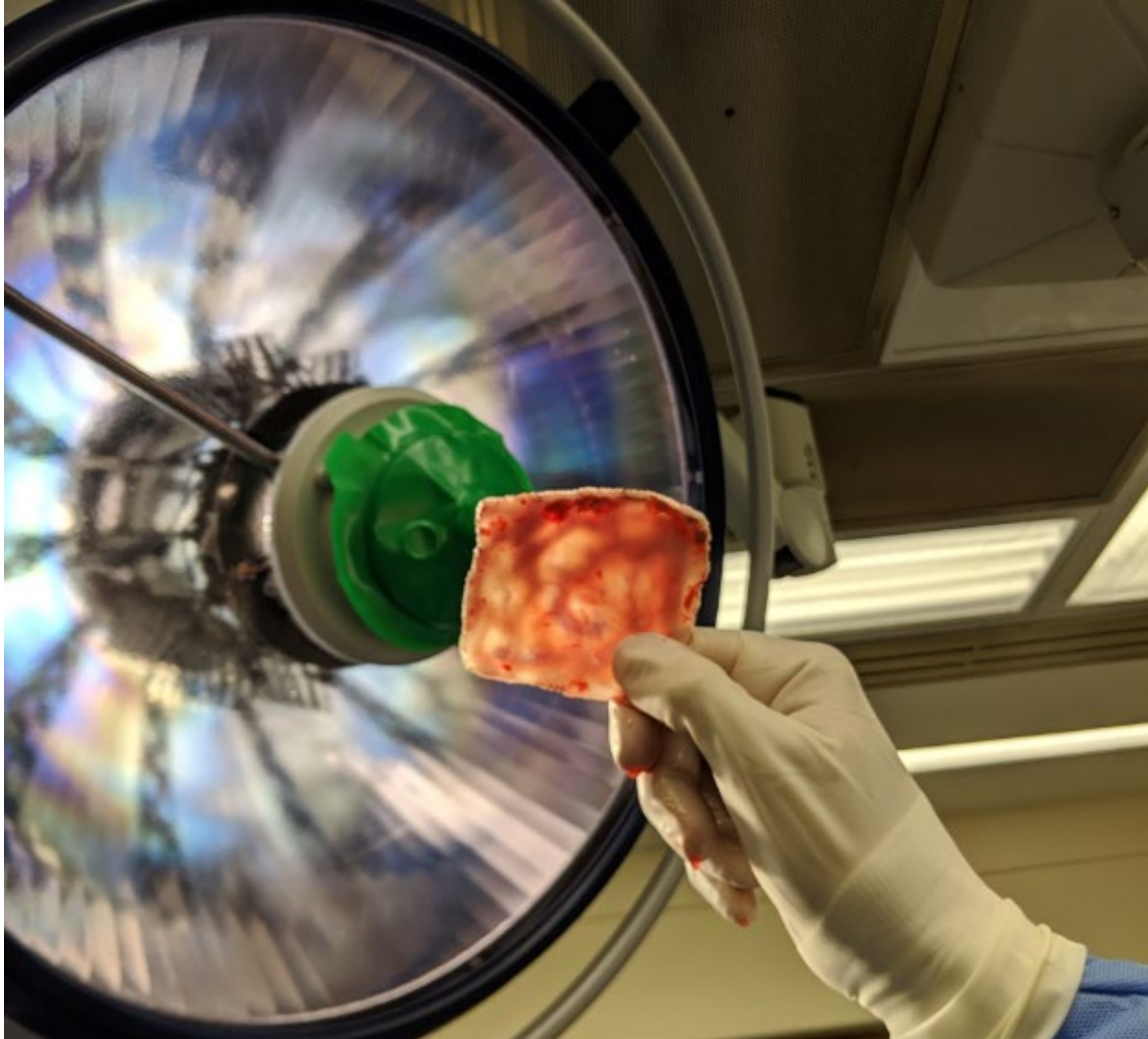
NIH National Institute of Dental and Craniofacial Research

Evaluation of increased intracranial pressure

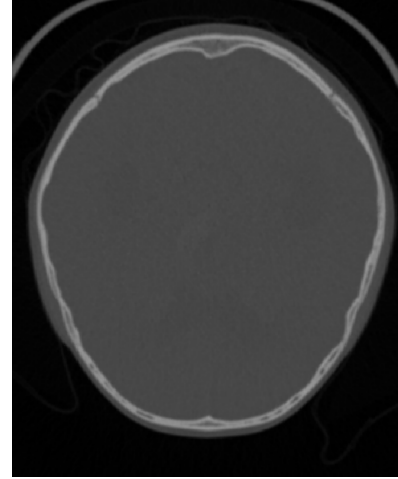
❖ Subjective evaluation of unspecific symptoms of **chronic** or **non-acute** intracranial pressure increase



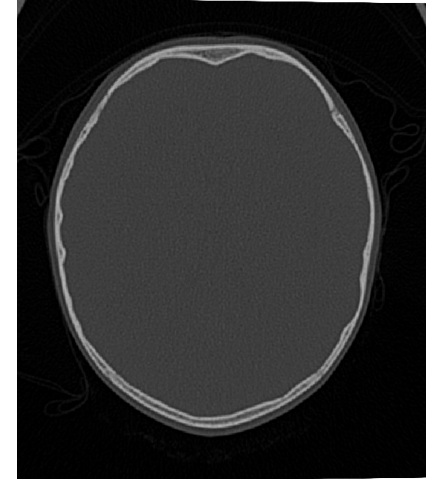
Identification of increased intracranial pressure



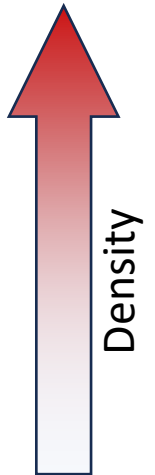
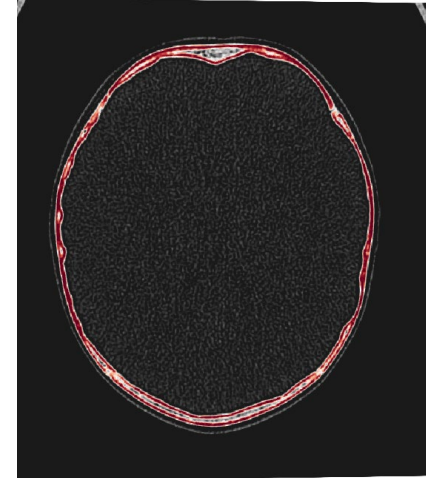
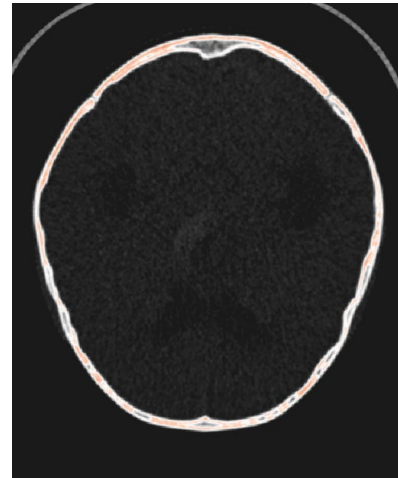
ICH - neoplasm



Normative

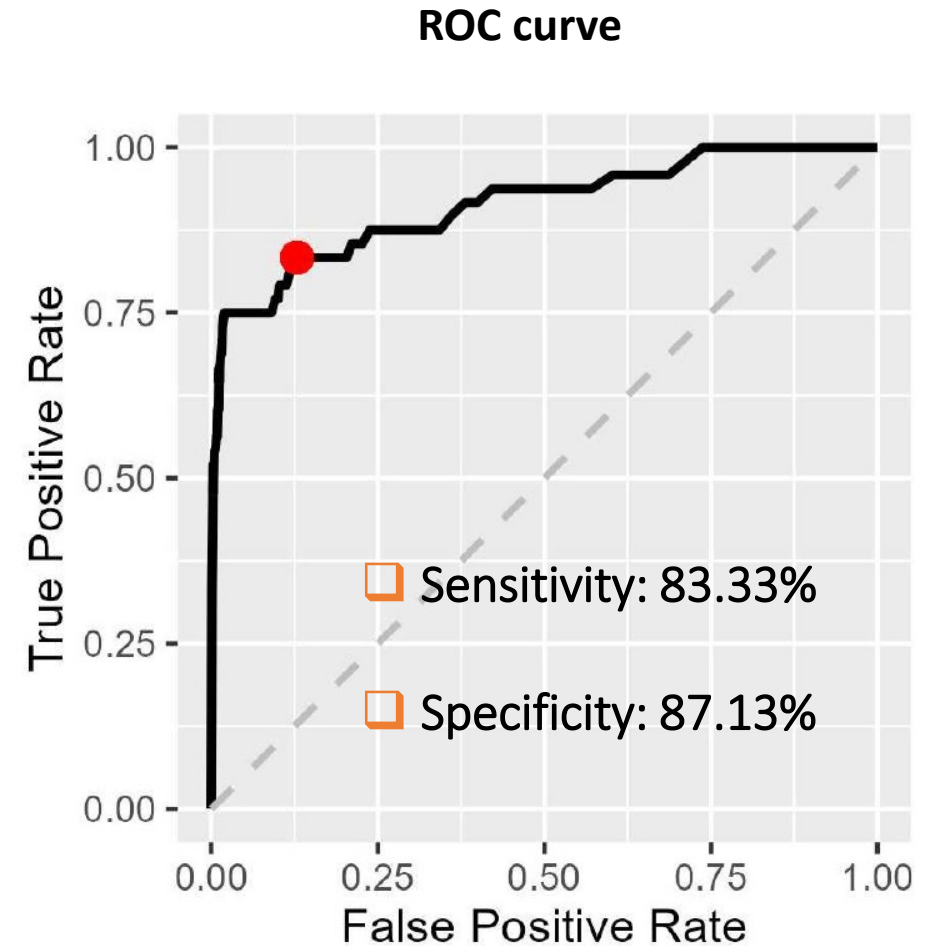
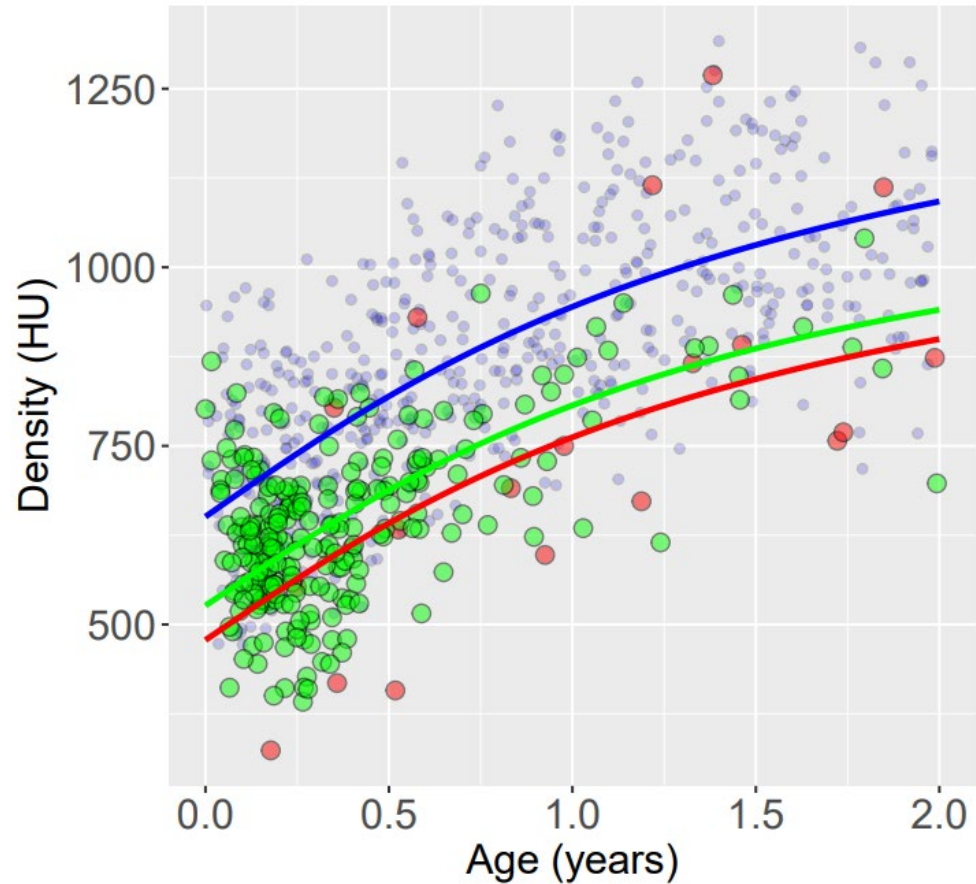


Male, 7 years and 8 months old



Identification of increased intracranial pressure

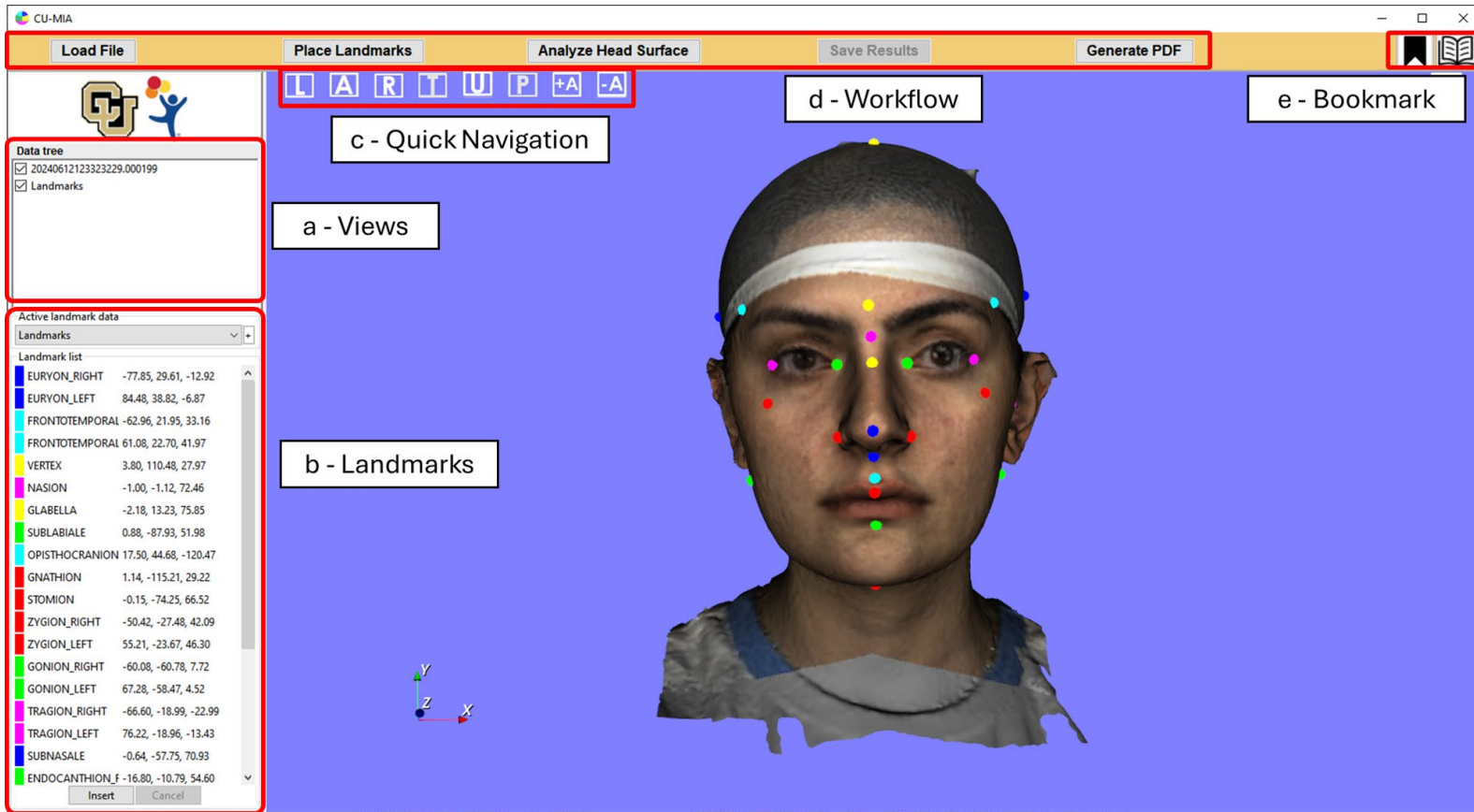
- Normative
- Chronic intracranial hypertension
- Non-syndromic sagittal craniosynostosis




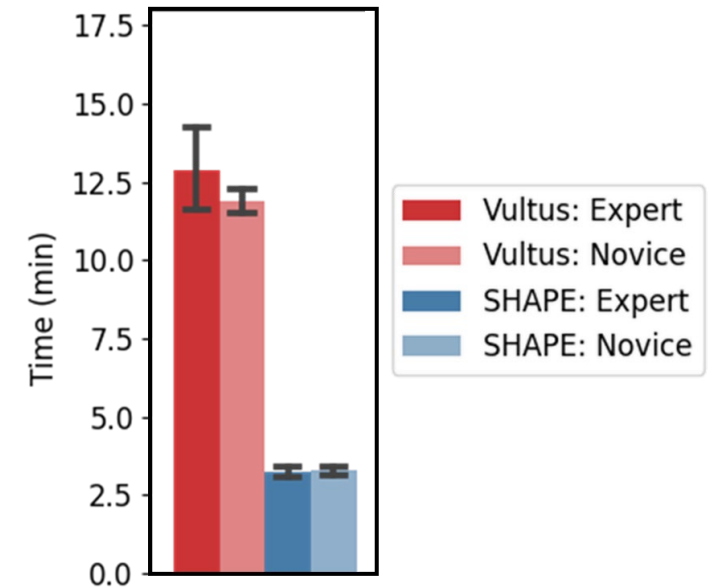
[Liu et al, Cranial bone thickness and density anomalies quantified from CT images can identify chronic increased intracranial pressure, Neurorad, 2024]

Clinical translation

Optimizing clinical workflows with **SHAPE**



Inter-operator variability (mm)	
Landmark Type	Vultus (vondor)
1	3.30 ± 2.56
2	10.68 ± 7.10
3	11.62 ± 11.87
Average	7.30 ± 7.80

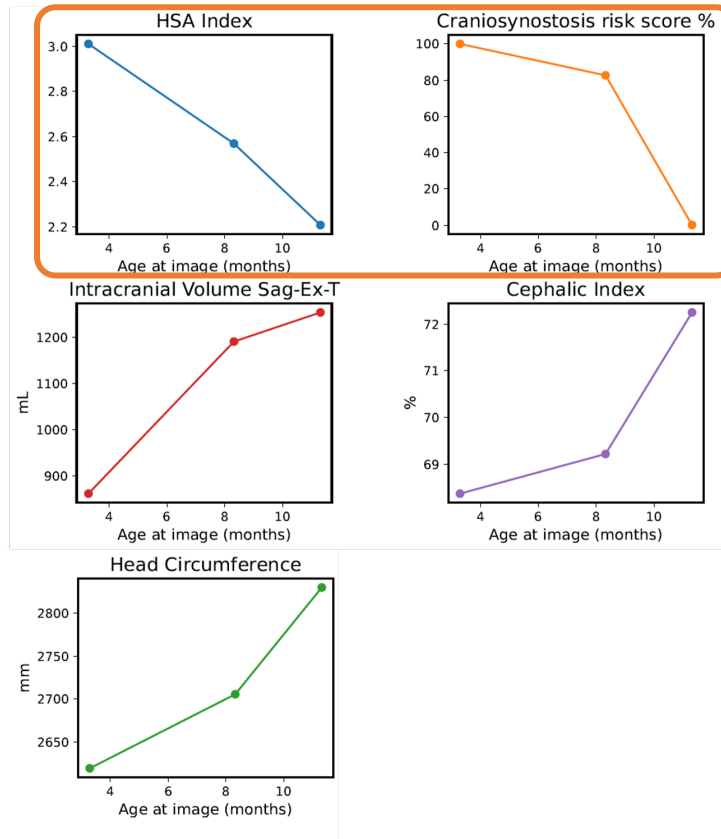
[Görg et al, SHAPE: a visual computing pipeline for interactive landmarking of 3D photograms and patient reporting for assessing craniosynostosis, *Under review*]

Clinical translation

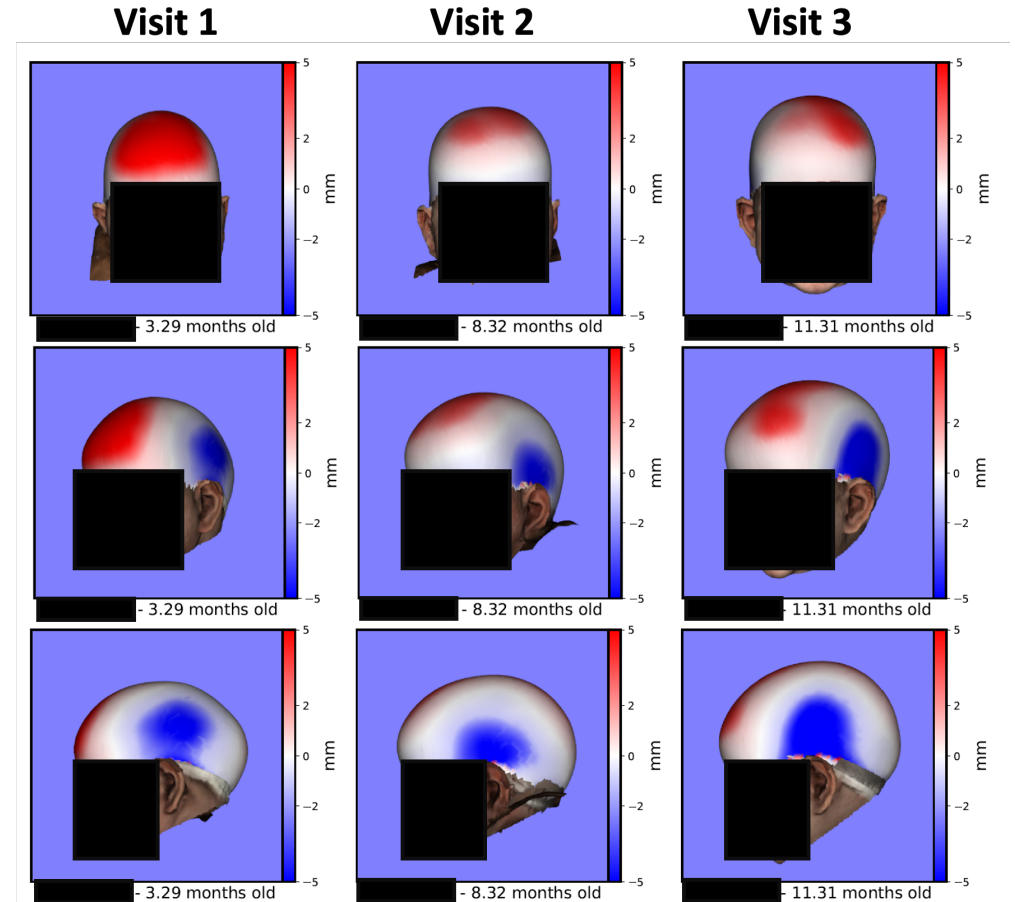
Automated EHR reports

Craniofacial measurements

Date of original image	██████	██████	██████
Age at image (months)	3.29	8.32	11.31
Biocular Width	69.96	70.98	72.57
Cephalic Index	68.36	69.21	72.25
Cranial Vault Asymmetry Index	1.00	1.02	1.02
Craniosynostosis risk score %	100.00	82.62	0.00
Cutaneous Upper Lip Height	10.26	8.28	9.57
Face Height	71.30	77.84	88.19
Face Width	84.70	94.75	88.53
Forehead Width	91.44	94.69	97.24
Head Circumference	2618.92	2705.33	2829.90
Head Height	151.51	168.59	177.02
Head Length	150.83	157.35	160.47
Head Width	103.12	108.91	115.94
HSA Index	3.01	2.57	2.21
Intercanthal Width	24.72	25.72	26.53
Intracranial Volume Level 2 to 10	689.16	842.09	873.96
Intracranial Volume Sag-Ex-T	861.36	1190.92	1254.10
Lower 1/3 Face Depth LEFT	59.56	52.81	63.01
Lower 1/3 Face Depth RIGHT	57.27	48.98	60.55
Lower 1/3 Face Height	40.63	42.07	54.51
Lower 1/3 Face Height-Mandible	33.80	36.13	45.92
Mandible Width	94.85	77.17	100.88
Middle 1/3 Face Depth LEFT	74.13	80.30	85.29
Middle 1/3 Face Depth RIGHT	73.97	80.43	84.30
Nasal Asymmetry (Alar to Tip)	0.79	1.11	1.14
Nasal Tip Protrusion	10.76	11.24	14.31
Nose Height	24.69	27.47	27.66
Nose Width	23.83	23.20	28.41
Orbital Asymmetry	0.35	0.36	0.37
Upper Face Height	8.27	10.50	7.51
Upper Lip Vermillion Height	5.77	5.12	30.63

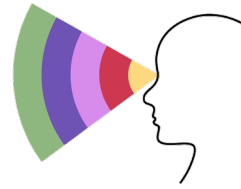


Local malformations



[Görg et al, SHAPE: a visual computing pipeline for interactive landmarking of 3D photograms and patient reporting for assessing craniosynostosis, *Under review*]

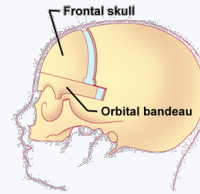
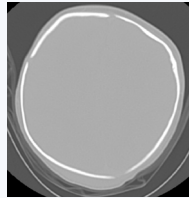
Why data science and AI?



Pre-surgical evaluation

Treatment

Post-surgical evaluation



Pediatric craniofacial biobank



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Thank you!

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colorado school of
public health



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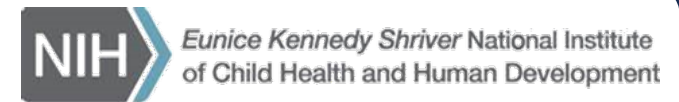
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