

Development and evaluation of machine-learning methods in whole-body magnetic resonance imaging with diffusion weighted imaging for staging of patients with cancer: the MALIBO diagnostic test accuracy study

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Plain language summary

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Whole-body magnetic resonance imaging demonstrates the entire body and can detect the spread of tumour, without the burden of ionising radiation. Recently, the STREAMLINE study reported that whole-body magnetic resonance imaging is accurate, efficient and cost-effective for cancer staging. However, whole-body magnetic resonance imaging is complex to report.

Machine learning is a type of artificial intelligence whereby a computer learns from being given previous data to undertake a task, using techniques such as classification forests, convolutional neural networks, and multi-atlas approaches. Our aim was to develop a machine-learning method to automatically detect lesions on whole-body magnetic resonance imaging to support radiologists by potentially improving their ability to correctly detect disease and reduce the reading time of whole-body magnetic resonance imaging scans in patients with cancer.

Firstly, whole-body magnetic resonance imaging scans from 51 healthy volunteers were used to develop machine-learning methods to automatically detect normal organs.

Secondly, machine-learning methods were trained to detect cancer lesions, using 271 whole-body magnetic resonance imaging scans from a previous study.

Finally, the refined machine-learning technique was tested in 188 patient scans from a previous study, to see if the technique could improve radiology reporting by increasing accuracy and speed in detecting disease. We designed a system to test the accuracy of radiologists reading whole-body magnetic resonance imaging with or without machine-learning support in a near-real clinical National Health Service setting. Twenty-five independent radiologists (18 experienced in reading whole-body magnetic resonance imaging and 7 radiologists inexperienced in whole-body magnetic resonance imaging) were randomly allocated whole-body magnetic resonance imaging scans to read with or without machine-learning support. We found that machine-learning support resulted in similar accuracy for detecting disease and was slightly more efficient in the reading time than for radiological reads without machine-learning support. Differences in interpretation between experienced readers were considered moderate in both cases.

Overall, the study was an ambitious attempt to undertake a highly complex machine-learning task, to detect cancer on whole-body magnetic resonance imaging. Many important steps have been taken but the current machine-learning algorithm did not result in a significant improvement in the radiologist's accuracy for disease detection, although it may have slightly reduced the time taken to read the study. Future work is advocated to further develop machine-learning tools to improve the accuracy of tumour detection.

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