An Automated Deep Learning Artifact Detection Tool for Quality Control of Whole-Slide Digital Pathology Images

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INTRODUCTION

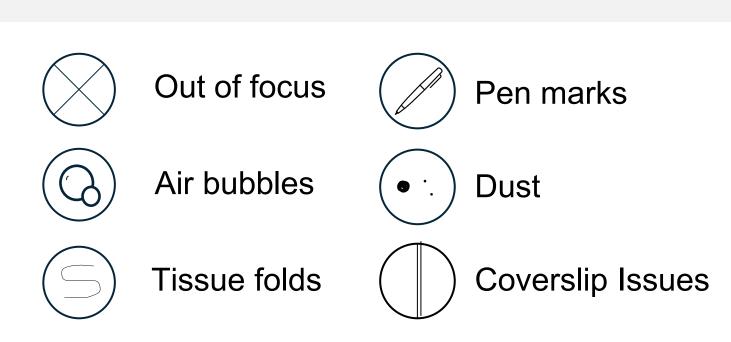
Mechanical and digital artifacts have a negative impact on digital pathology workflows. Image focusing issues can be a critical bottleneck during slide digitisation.

We developed SlideQC to automatically segment tissue artifacts in hematoxylin and eosin (H&E) and immunohistochemistry (IHC) stained whole slide images (WSI).

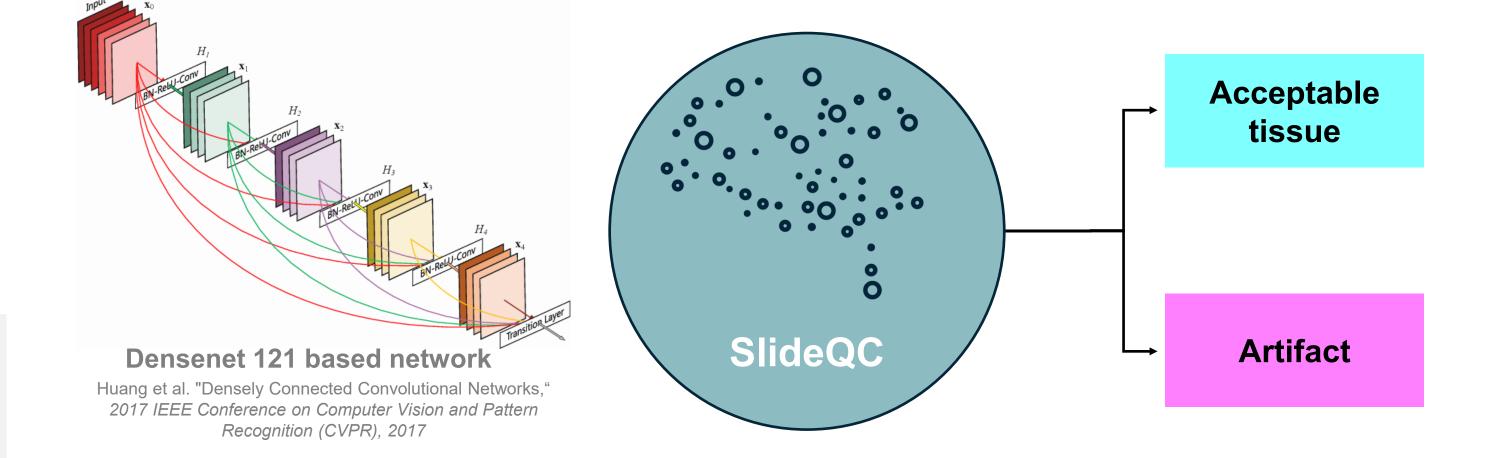
SlideQC DEVELOPMENT

2499 Annotations comprising a total artifact area of 52.15 mm² Across 302 H&E and IHC stained WSI from more than 9 tissue types

A Densenet based network was trained to classify slides as acceptable tissue or artifact.







The training set was supplemented with a set of 2048 synthetically generated out-of-focus images.

RESULTS

SlideQC showed high precision, recall and F1-score over pixel-level annotations on external test sets

SlideQC performance was evaluated on 432 annotations across 79 external H&E (HistoQCRepo) and IHC (LYON19) test images.

Markup Results on H&E images (HistoQC Repo)

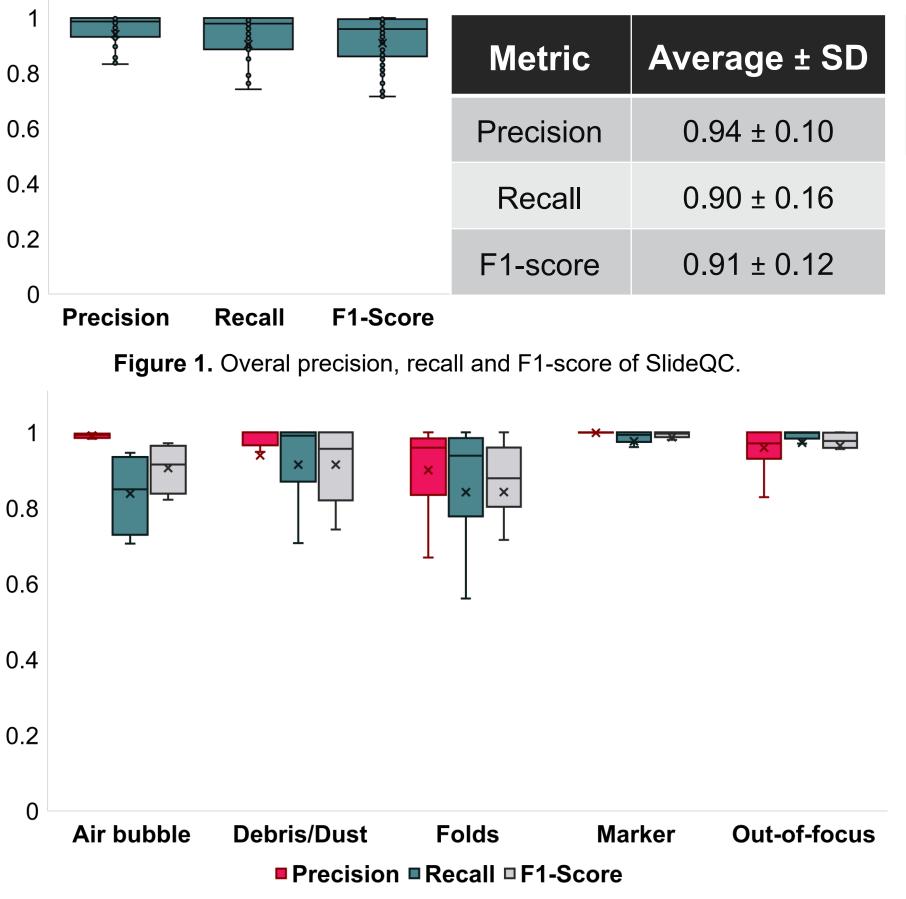
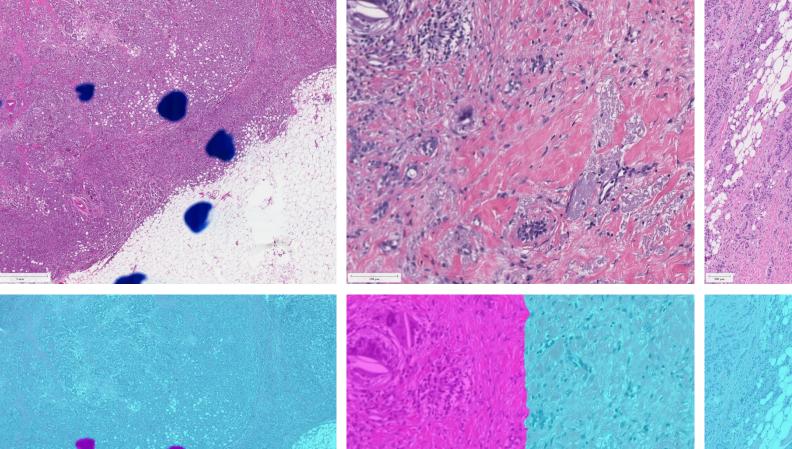


Figure 2. Precision, recall and F1-score of SlideQC sorted by artifact type.





Tissue Figure 3. Representative markups of H&E-stained images

sourced from HistoQCRepo analyzed with SlideQC.

Markup Results on IHC images (LYON19)

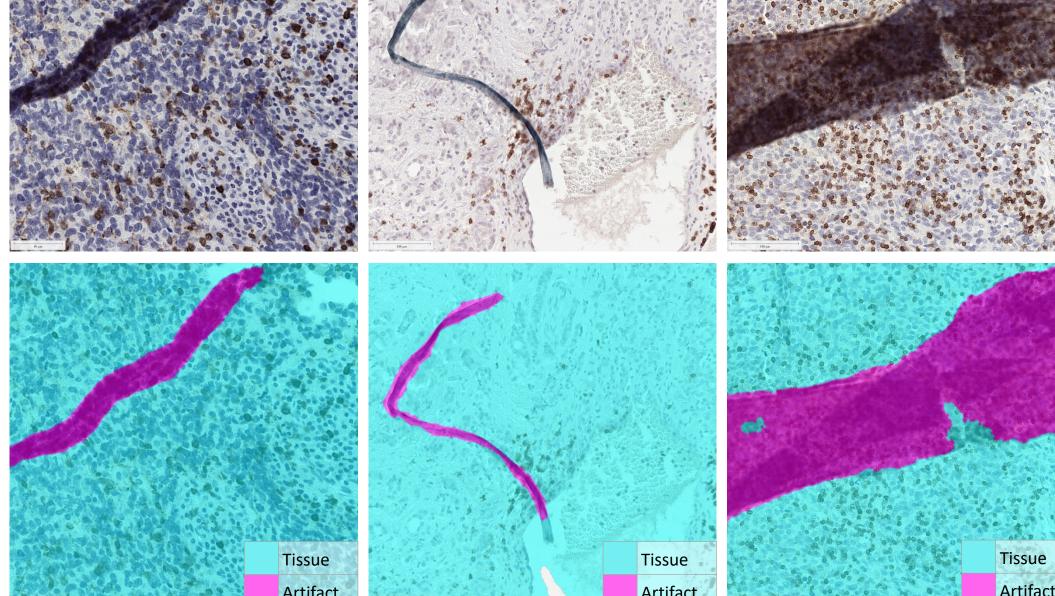
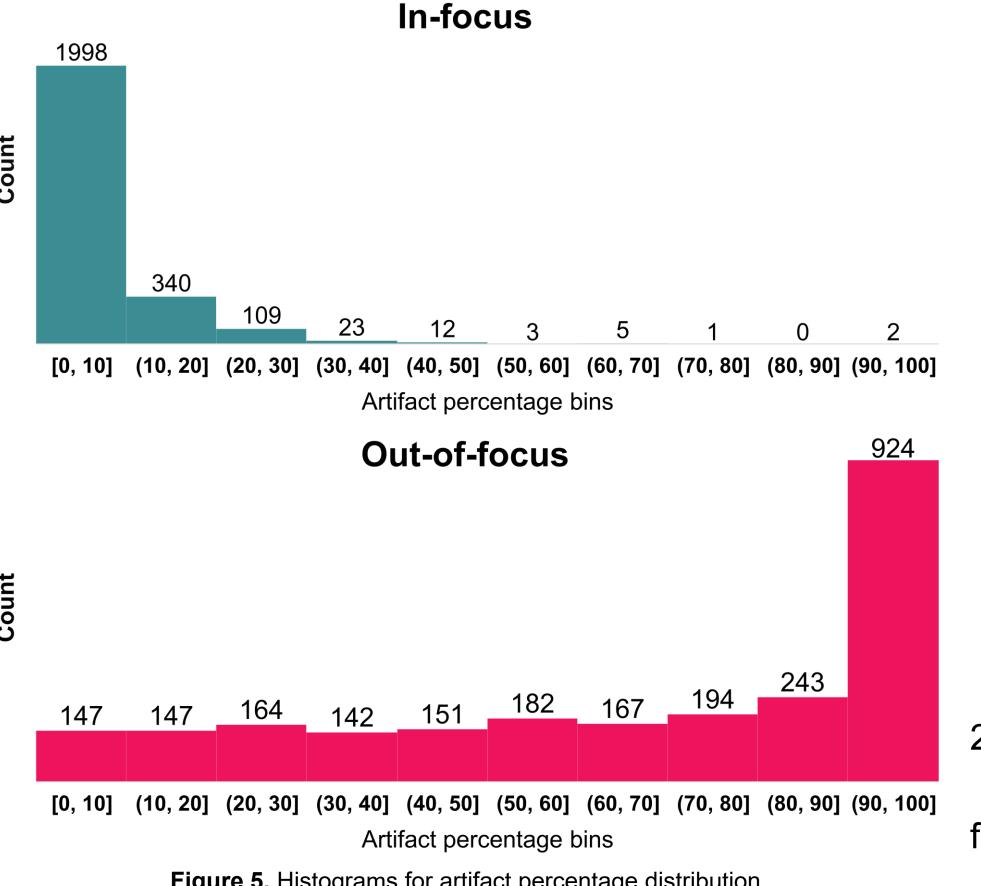
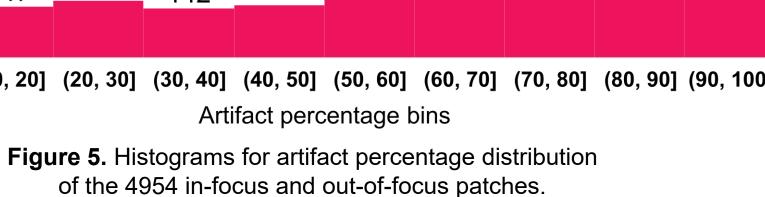


Figure 4. Representative markups of IHC stained images sourced from the LYON19 dataset analyzed with SlideQC.

SlideQC showed a good ability to distinguish out-of-focus from in-focus labelled patches from the TCGA@Focus dataset

Tissue





■ In Focus ■ Out of Focus Figure 6. Percent artifact distribution for the 4954 in focus and out-of-focus patches.

The median percent of tissue area classified as artifact within the 2461 patches labelled as out-of-focus was 76.7 [IQR 41.3 – 97.6] and for the 2493 in-focus labelled patches was 3.3 [IQR 0.8 - 8.4].

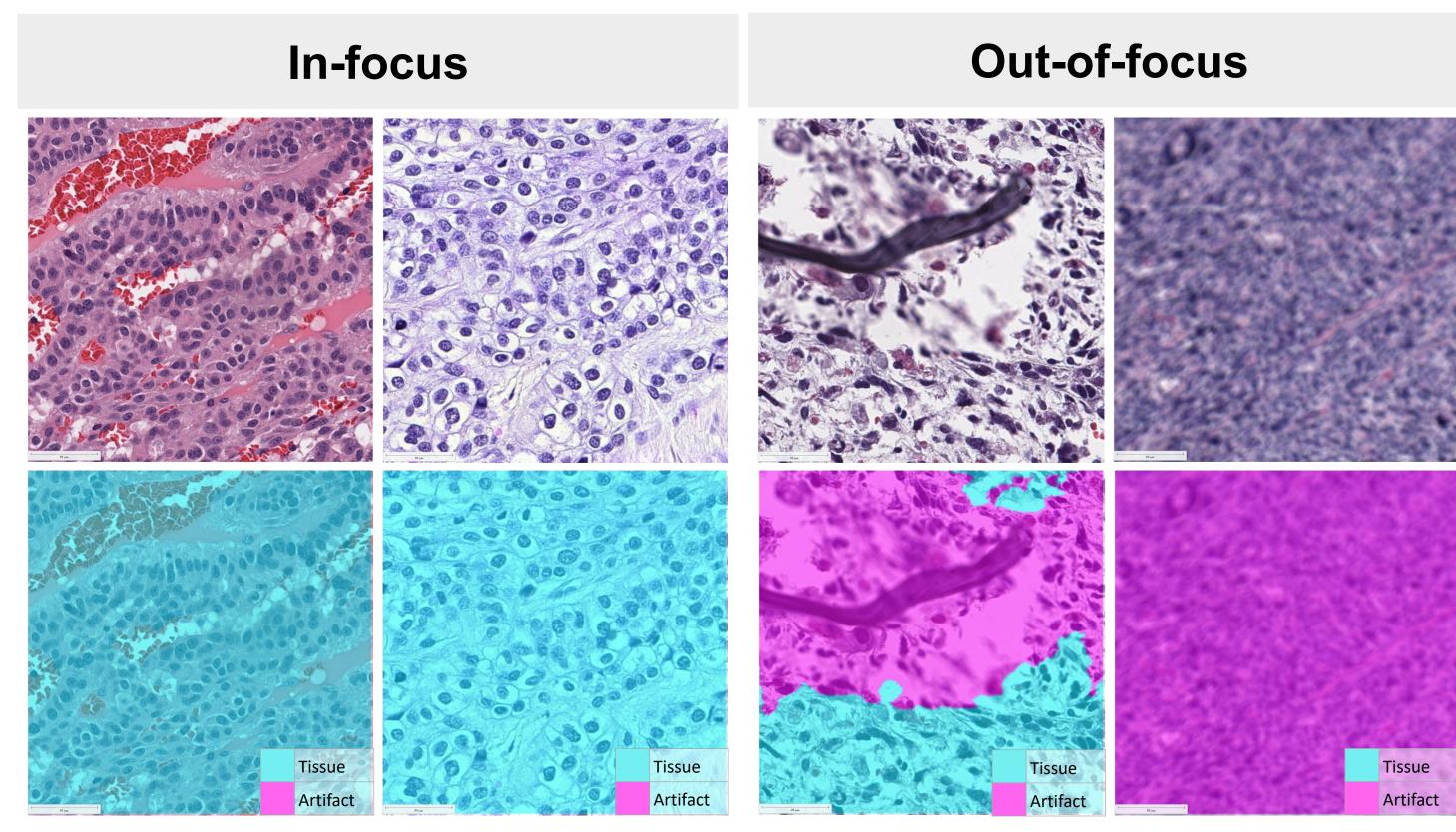


Figure 7. Representative markups of in-focus and out-of-focus patches sourced from the TCGA@Focus dataset analyzed with SlideQC.

CONCLUSIONS

SlideQC can alleviate the bottleneck of manual quality control in both clinical and research based digital pathology workflows, thereby bringing efficiency gains to both fields. SlideQC achieved high precision, recall, and F1-score in H&E and IHC external test cohorts. Furthermore, SlideQC showed the ability to distinguish out-of-focus from in-focus patches in the TCGA@Focus dataset. By identifying and reporting the percentage of artifacts on each slide, SlideQC can provide an automated, quantifiable quality control procedure.