

# Automatic Feature Description of Endometrioma in Ultrasonic Images of the Ovary

# Mus'ab Sahrim<sup>1</sup>, Ain Nadiah Abdul Aziz<sup>1</sup>, Wan Zakiah Wan Ismail<sup>1\*</sup>, Irneza Ismail<sup>1</sup>, Juliza Jamaludin<sup>1</sup> and Sharma Rao Balakrishnan<sup>1</sup>

<sup>1</sup>Faculty of Engineering and Built Environment, Universiti Sains Islam Malaysia (USIM), 71800 Nilai, Negeri Sembilan

Received 4 February 2018; accepted 10 April 2018, available online 30 April 2018

Abstract: Endometriosis cyst or endometrium is commonly found in women with subfertility. Traditionally, medical technologies fail to detect the disease automatically and it is fully dependent on the doctors to determine the peritoneal disease where it may lead to inaccurate findings. A method of assessment may give more accurate detection without the need for surgical procedure, especially in monitoring disease recurrence. This will avoid surgical risk and will not delay the management. In this study, the feature description is developed using pattern recognition, involving image processing techniques; the ultrasonic images is used as input in which the region of interest of images, image segmentation, feature extraction are studied

Keywords: Endometrioma cysts, ultra-sonographic, pattern recognition, image processing technique, ultrasound scan.

# 1. Introduction

Endometrima cyst is a cyst in the ovary filled with old blood, occurs due to endometriosis in which the endometrium bleeds during the menstrual cycle, grows and enlarges inside the ovaries. It forms an ovarian cyst filled with chocolate like material [1-2]. It can be detected by using ultrasound where the image is darker than other regions. A sort of edge of an elliptical geometric shape can be traced. Endomatrioma can be dangerous and harmful if no treatment is done as the cyst may grow. It is not unusual for endometrioma to grow to 18cm-20cm (7-8 inches) [1]. Endometrioma and dermoid cyst will usually rupture if there is a severe blow to the pelvis. It is unlikely that they will rupture spontaneously. If they do rupture, surgery is performed to flush the pelvis with a saline solution (distilled water containing salt), to irrigate and wash away the contents of the cyst [3].

However, gynecologists need to do the clinical diagnosis of the the cyst manually from the ultrasonic image, but quality and image interpretation is highly depending on the skill of the gynecologist. This may lead to inaccurate finding and can be dangerous and risk to the patient. It is hard for the doctors to determine the endometrima from the ultrasound image as the image of endometrioma is quite similar with normal follicle, Thus, automated software are proposed by using Matlab Software to help them in order to detect the cyst accurately without the need for surgical procedure, especially in monitoring disease recurrence.

Different methods have been developed in the literature on the identification of the ovarian cysts. Potocnik and Zazula worked on a method based on optimal thresholding [3] and then upgraded by using active contour technique [4] for the segmentation of follicles. Cigale and Zazula implemented the neural network approach for the segmentation [3]. Others use the multiscale morphological method for the denoising, contrast enhancement [5], and horizontal and vertical thresholding for cysts segmentation [6].

The method presented in this paper consist of applying a multi – scale morphological process for noise reduction and for contrast enhancement, followed by segmentation and detection. The classification process is applied on the image to measure and analyze the size of the cyst based on the minor axis, major axis, parameter and area.

# 2. Experiment set up

Figure 1 shows the feature description method and MATLAB is used as a platform of processing the images. Previous studies also used quite similar techniques to process the image in order to describe the features [7-10].

<sup>\*</sup>*Corresponding author: drwanzakiah@usim.edu.my* 2018 UTHM Publisher. All right reserved. penerbit.uthm.edu.my/ojs/index.php/ijie



Fig. 1 Feature description method

#### Image Acquisition

The images are taken from Dr Mukhri Hamdan, University Malaya Medical Centre (UMMC). Figure 2 shows the original image of the endometrioma.



Fig. 2 Original Image of Endometrioma

#### Image Pre-processing

The image is converted into grayscale, cropped to select the region of interest. After that, global thresholding is applied on the cropped image before masking it global thresholding. Lastly, Otsu thresholding is applied to that image. The techniques of image pre-processing are: First, original image is cropped (Figure 3(a)) to define the region of interest. This image then is applied to global thresholding to get black and white image. Global Thresholding is used by visual inspection of the image histogram. The result of global thresholding is shown as Figure 3(b). Next, masking is applied by subtracting image from global thresholding and cropped image. The result of masking is shown in Figure 3(c). Last step of pre - processing involves Otsu Thresholding in which the method is applied on the subtracted image. Otsu's thresholding is used to automatically perform clusteringimage thresholding, or the reduction of a gray level image to binary image. The image is shown in Figure 3(d).



Fig. 3 (a) Cropped original image; Image pre-processing method: (b) Global thresholding-Iterative Method, (c) Subtracted Image and (d) Gray Threshold using Otsu Thresholding.

#### 3. Results and Discussion

Manual measurement is measured by a specialist based on ultrasonic image to get the geometric measurement of endometrioma. The geometric measurements that are being measured are major and minor axis length, area, perimeter, and compactness. The manual measurement is compared with automatically measurement using MATLAB as shown in Table 1.

Measurement	Manual	Automatic
	(mm)	(pixel)
Major Axis	13.4	196
Length		
Minor Axis	9.0	112
Length		
Area	378.9	16790
Perimeter	120.6	678
Compactness	0.327	0.459

Table 1 Manual Measurement of endometrioma

However, the unit of manual measurements are in mm, compared to automatic measurement in pixel. Both mm and pixel unit cannot be directly compared. Thus relative (R) is calculated to eliminate both pixels and mm unit. It is expressed as a ratio in a unitless number, shown as in equation (1):

$$R = \frac{Major Axis Length}{Minor Axis Length}$$
(1)

R are 1.489 and 1.751 for manual and automatic measurement respectively with no unit, so both values are valid to be compared. It shows that the automatic measurement can be used to assist the manual

measurement. The properties of R and Compactness of automatic measurement is calculated using relative error and percent error based on manual measurement shown as equations below.

Relative Error =

|Manual Measurement – Automatic Measurement| Manual Measurement

(2)

Percentage Error (%) = Relative Error × 100% (3)

The percentage error is the relative error expressed in %. Table 2 shows the error measured of R, and Compactness. It shows that automatic measurement can be used to reduce the time consuming of the manual measurement because the relative error is small and the compactness is still acceptable.

Table 2 Error Measured of R and Compactness

	R	Compactness
Relative	0.176	0.404
Error		
Percentage	17.56	40.36
Error (%)		

#### 4. Summary

This work presents the elaboration of an automated technique that can be used to describe the endometrioma cysts in ovarian ultrasound images and of differentiating between the two types of cysts. This detection and classification has been made based on the geometrical features of the cysts texture. For future work, the technique can be improved to generalize the work on all ovarian cyst types, including Dermoid cysts, while maintaining the classification accuracy. Increasing the database size and the number of images would therefore be necessary for a better evaluation of the solution.

# References

[1] A. H. Balen, J. S. E. Laven, S-L. Tan and D. Dewailly, "Ultrasound assessment of the polycystic ovary", International consensus definitions, Hum Reprod Update, 9:505-514. 2003.

[2] Guidice, "Endometriosis," The New England Journal of Medicine, vol. 25, no. vol. 362, pp. 2389 - 2398, 2010.
[3] B. Cigale and D. Zazula, "Segmentation of ovarian ultrasound images using cellular neural networks," Proc. 7th Inter .work. systems, signals and image processing, 2000.

[4] Anthony Krivanek and Milan Sonka, "Ovarian Ultrasound Image Analysis: Follicle Segmentation," IEEE Transaction on medical imaging, vol. 17, pp. 935-944, 1998.

[5] P. S. Hiremath and Prema Akkasaliger, "Despeckling medical ultrasound images using the contourlet transform," 4th AMS Indian International Conference on Artificial Intelligence, 2009.

[6] P. S. Hiremath and J.R.Tegnoor, "Automated detection of follicle in ultrasound images of ovaries using edge based method," IEEE International Conference on Computational Intelligence and Computing Research, pp. 120-125, 2010.

[7] M. S. Nixon and A. S. Aguado. "Feature Extraction & Image Processing for Computer Vision". Elsevier Ltd. 2012, pp.84-85.

[8] M. M. Myint, T. Myint. "Effevtive Kidney Segmentation Using Gradient Based Approach in Abdominal CT Images." Proceedings of 2015 International Conference on Future Comuputational Technologies, pp.130-135, 2015.

[9] M. Rafael, C. Gonzalez and Richard E. Woods "Object Shape Measurements." In Digital Image Processing Using MATLAB, Mc. Graw Hill, pp.194-195, 2004.

[10] D. Kumar, S. Vandhana, K. Sakhthi Priya, S. Jeneeth Subashini. "Brain Tumour Image Segmentation using MATLAB." IJIRST, pp. 447-451, 2015.