

Chongqing University of Technology ATA Advanced Technique of Artificial Intelligence

Graph Enhanced Contrastive Learning for Radiology Findings Summarization

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Code:https://github.com/jinpeng01/AIG_CL

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Artificial



1.Introduction

2.Method

3.Experiments













Introduction

- Findings

PA and lateral views of the chest. The previously seen pericardial and pleural effusions have resolved. There is no pneumothorax. There is no consolidation. The cardiac, mediastinal, and hilar contours are normal.

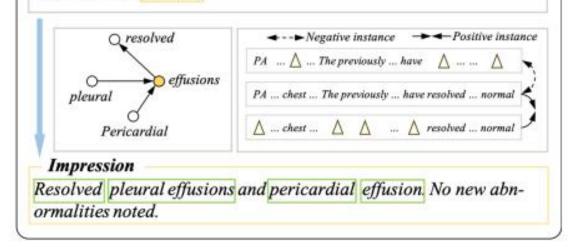


Figure 1: An example of the findings and corresponding impression, where the relation information, as well as positive and negative examples, are also shown in the figure. Note that \triangle represents the removed word.



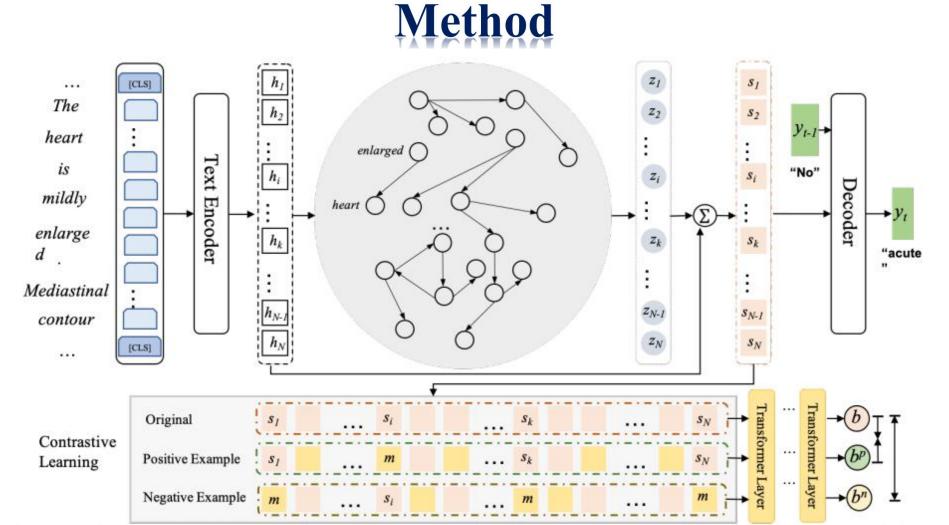
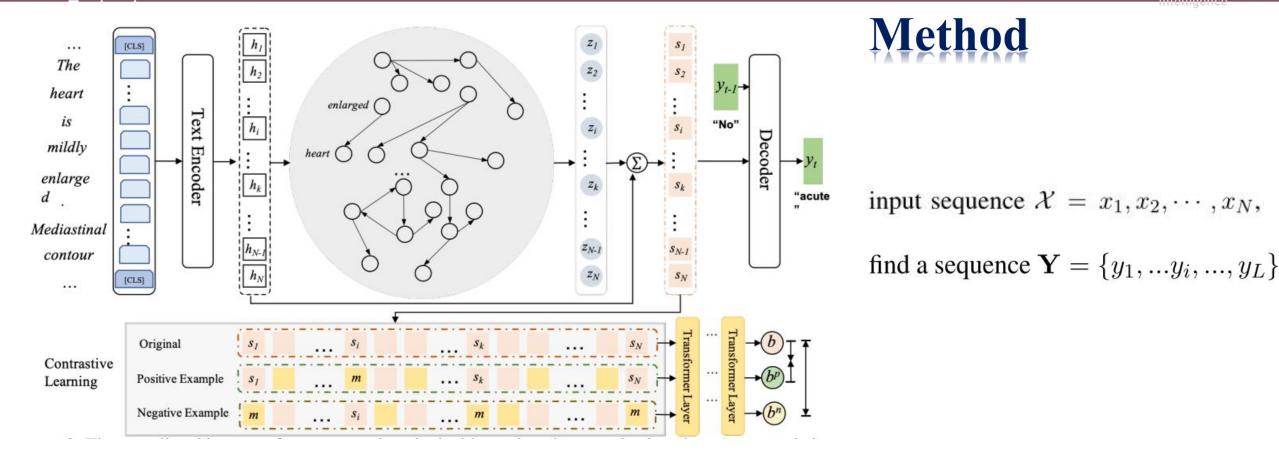


Figure 2: The overall architecture of our proposed method with graph and contrastive learning. An example input and output at t-1 and t step are shown in the figure, where the top is the backbone sequence-to-sequence paradigm with a graph to store relation information between critical words and the bottom is the contrastive learning module with specific positive and negative examples. m refer to a mask vector.





$$p(\mathbf{Y} \mid \mathcal{X}) = \prod_{t=1}^{L} p\left(y_t \mid y_1, \dots, y_{t-1}, \mathcal{X}\right) \quad (1)$$

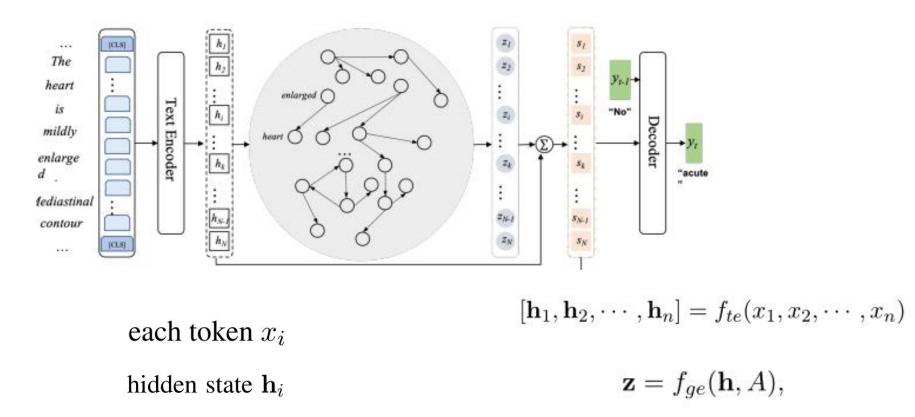
The model is then trained to maximize the negative conditional log-likelihood of \mathcal{Y} given the \mathcal{X} :

$$\theta^* = \arg\max_{\theta} \sum_{t=1}^{L} \log p\left(y_t \mid y_1, \dots, y_{t-1}, \mathcal{X}, A; \theta\right)$$
(2)





Graph Enhanced Encoder



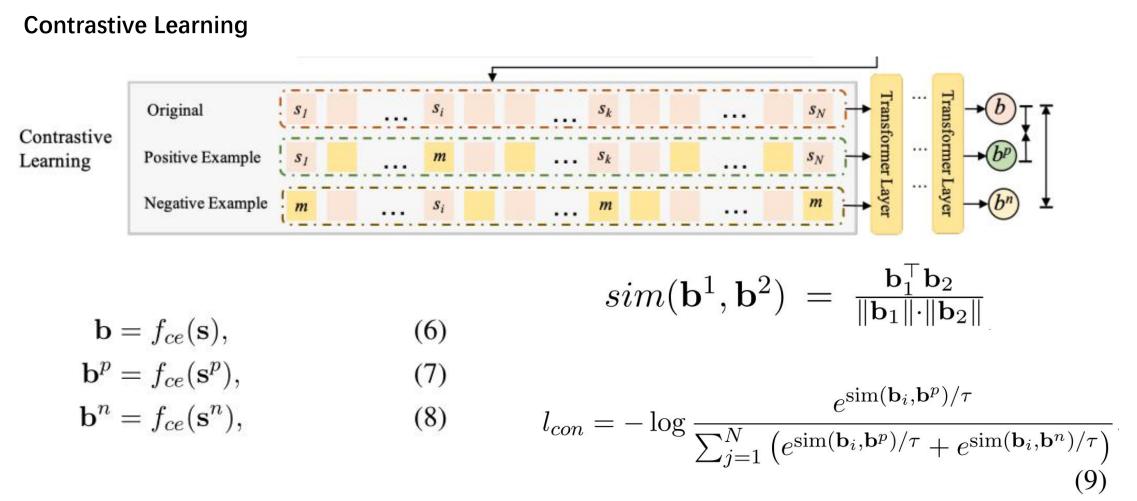
$$\mathbf{s} = \mathsf{MLP}([\mathbf{h}_1 \oplus \mathbf{z}_1, \mathbf{h}_2 \oplus \mathbf{z}_2, \cdots, \mathbf{h}_n \oplus \mathbf{z}_n]), (5)$$

(3)

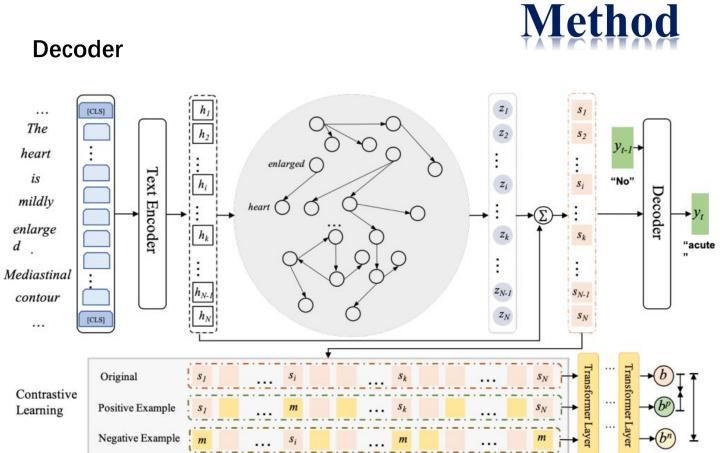
(4)











$$y_t = f_e(\mathbf{s}_1, \mathbf{s}_2, \cdots, \mathbf{s}_n, y_1, \cdots, y_{t-1}),$$
 (10)

$$L = l_{ge} + \lambda l_{con}, \tag{11}$$

where l_{ge} is the basic sequence-to-sequence loss, and λ is the weight to control the contrastive loss.



DATA	TYPE	TRAIN	DEV	TEST	
OpenI	REPORT #	2400	292	576	
	AVG. WF	37.89	37.77	37.98	
	AVG. SF	5.75	5.68	5.77	
	AVG. WI	10.43	11.22	10.61	
	AVG. SI	2.86	2.94	2.82	
MIMIC -CXR	REPORT #	122,014	957	1,606	
	AVG. WF	55.78	56.57	70.67	
	AVG. SF	6.50	6.51	7.28	
	AVG. WI	16.98	17.18	21.71	
	AVG. SI	3.02	3.04	3.49	

Table 1: The statistics of the two benchmark datasets with random split for OPENI and official split for MIMIC-CXR, including the numbers of report, the averaged sentence-based length (AVG. SF, AVG. SI), the averaged word-based length (AVG. WF, AVG. WI) of both IMPRESSION and FINDINGS.



DATA	MODEL	1	ROUGE			FC			
		R-1	R-2	R-L	Р	R	F-1		
OpenI	BASE	62.74	53.32	62.86		-	19 4 0		
	BASE+CL	63.53	54.58	63.13	-	-	-		
	BASE+GRAPH	63.29	54.12	63.03	-	-	-		
	BASE+GRAPH+CL	64.97	55.59	64.45	-	-	-		
MIMIC-CXR	BASE	47.92	32.43	45.83	58.05	50.90	53.01		
	BASE+CL	48.15	33.25	46.24	58.34	51.58	53.70		
	BASE+GRAPH	48.29	33.30	46.36	57.80	51.70	53.50		
	BASE+GRAPH+CL	49.13	33.76	47.12	58.85	52.33	54.52		

Table 2: Comparisons of baselines and our method on OPENI and MIMIC-CXR datasets. R-1, R-2 and R-L refer to ROUGE-1, ROUGE-2 and ROUGE-L, respectively. P, R and F-1 represent precision, recall, and F1 score.



	OPENI RANDOM SPLIT			MIMIC-CXR					
Model				OFFICIAL SPLIT			RANDOM SPLIT		
	R-1	R-2	R-L	R-1	R-2	R-L	R-1	R-2	R-L
LEXRANK (Erkan and Radev, 2004)	14.63	4.42	14.06	18.11	7.47	16.87	-	-	-
TRANSEXT (Liu and Lapata, 2019)	15.58	5.28	14.42	31.00	16.55	27.49	-	-	-
PGN (LSTM) (See et al., 2017)	63.71	54.23	63.38	46.41	32.33	44.76	-	-	-
TRANSABS (Liu and Lapata, 2019)	59.66	49.41	59.18	47.16	32.31	45.47	2	-	-
ONTOLOGYABS [†] (Gharebagh et al., 2020)	(7.1)	1.77		-		0 .	53.57	40.78	51.81
WGSUM (LSTM) ^{\dagger} (Hu et al., 2021)	64.32	55.48	63.97	47.48	33.03	45.43	54.97	43.64	53.81
WGSUM (TRANS) [†] (Hu et al., 2021)	61.63	50.98	61.73	48.37	33.34	46.68	56.38	44.75	55.32
OURS	64.97	55.59	64.45	49.13	33.76	47.12	57.38	45.52	56.13

Table 3: Comparisons of our proposed models with previous study on the OPENI and MIMIC-CXR with respect to ROUGE metric. † refers to that the results is directly cited from the original paper.



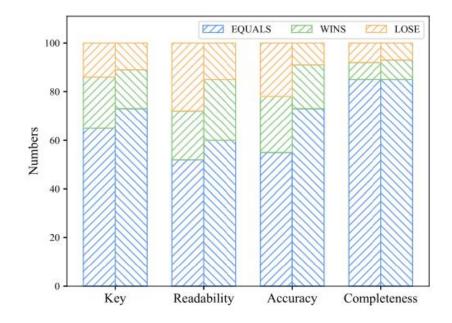


Figure 3: The results of human evaluation, where forward and backslash represent that BASE+GRAPH+CL versus the reference and BASE, respectively. Yellow, green and blue represent that our model loses, equal to competitors and wins.

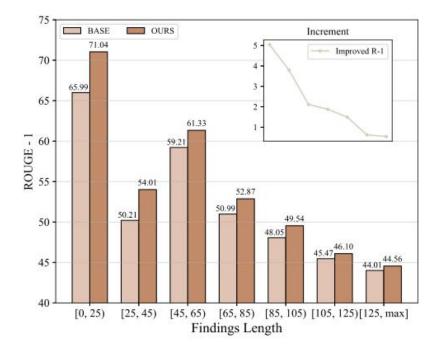
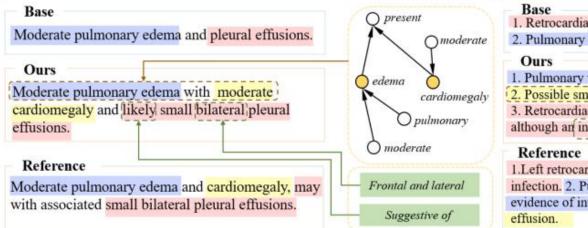


Figure 4: R-1 score of generated impressions from BASE and our model on the MIMIC-CXR test set, where OURS represent the BASE+GRAPH+CL.



Frontal and lateral views of the chest demonstrate low Findings: lung volumes. Moderate pulmonary edema is present. Costophrenic angles are obscured, suggestive of small pleural effusions. Hilar and mediastinal silhouettes are unremarkable. Moderate cardiomegaly is noted. Aortic arch calcifications are seen with tortuosity of the descending aorta. There is no pneumothorax.



Findings: Retrocardiac opacification could be due to atelectasis, although an infectious process can not be excluded. There is minimal right basilar atelectasis. Pulmonary vascular congestion is seen without evidence of interstitial pulmonary edema. A small left pleural effusion is possible. There is no right pleural effusion. No pneumothorax is seen. The mediastinal contours are normal.

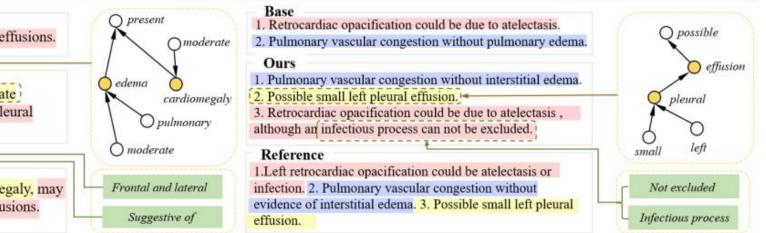


Figure 5: Examples of the generated impressions from BASE and BASE+GRAPH+CL as well as reference impressions. The yellow nodes in the graph indicate that these words are contained in entities.



Thank you!