

Visual adaptation and medical
image perception:
How images can shape what you see

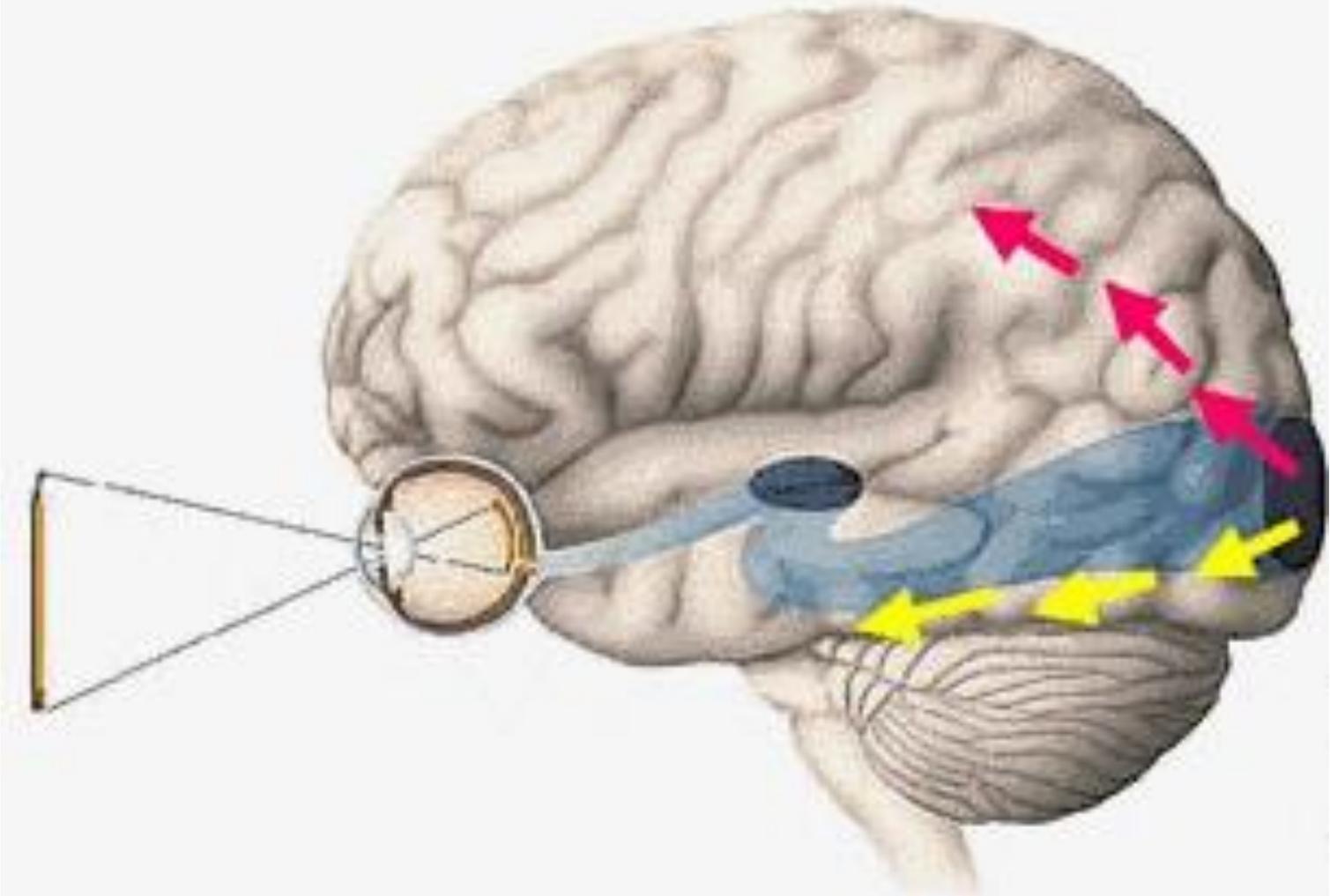
Michael Webster



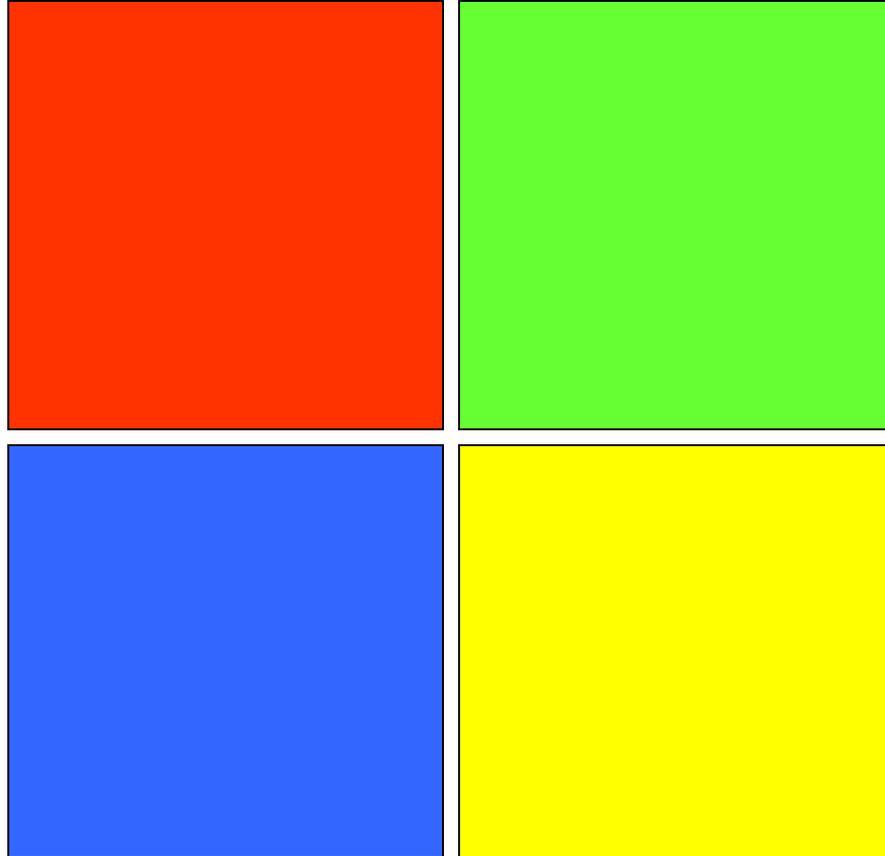
Visual Perception Lab

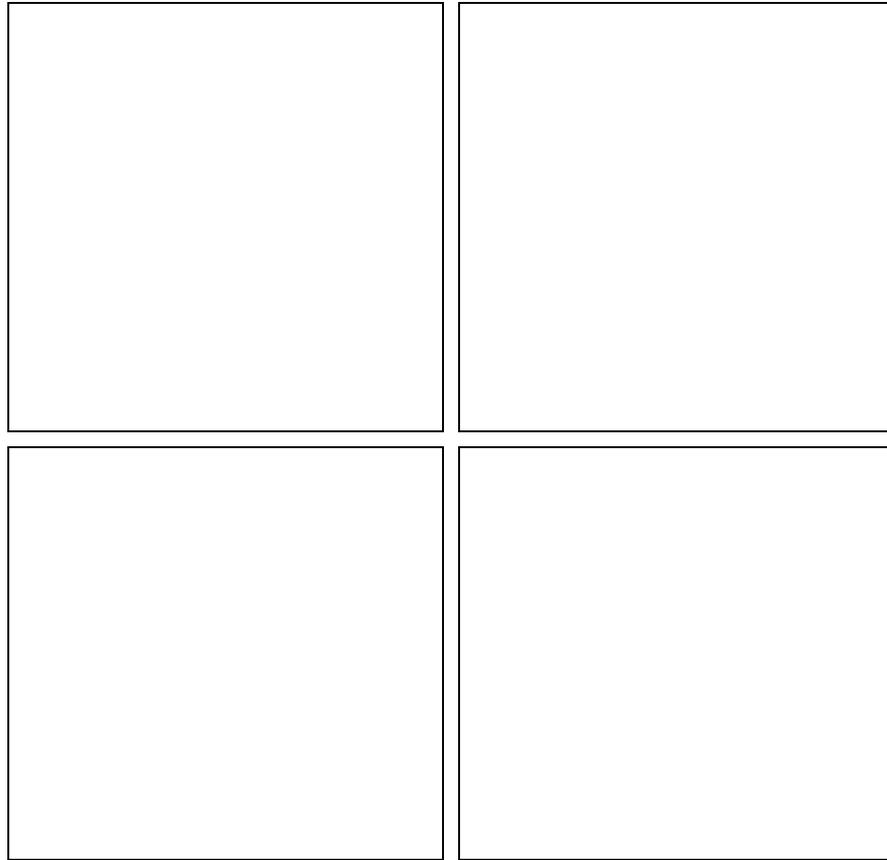
University of Nevada Reno

The human visual system



The visual system is highly adaptable



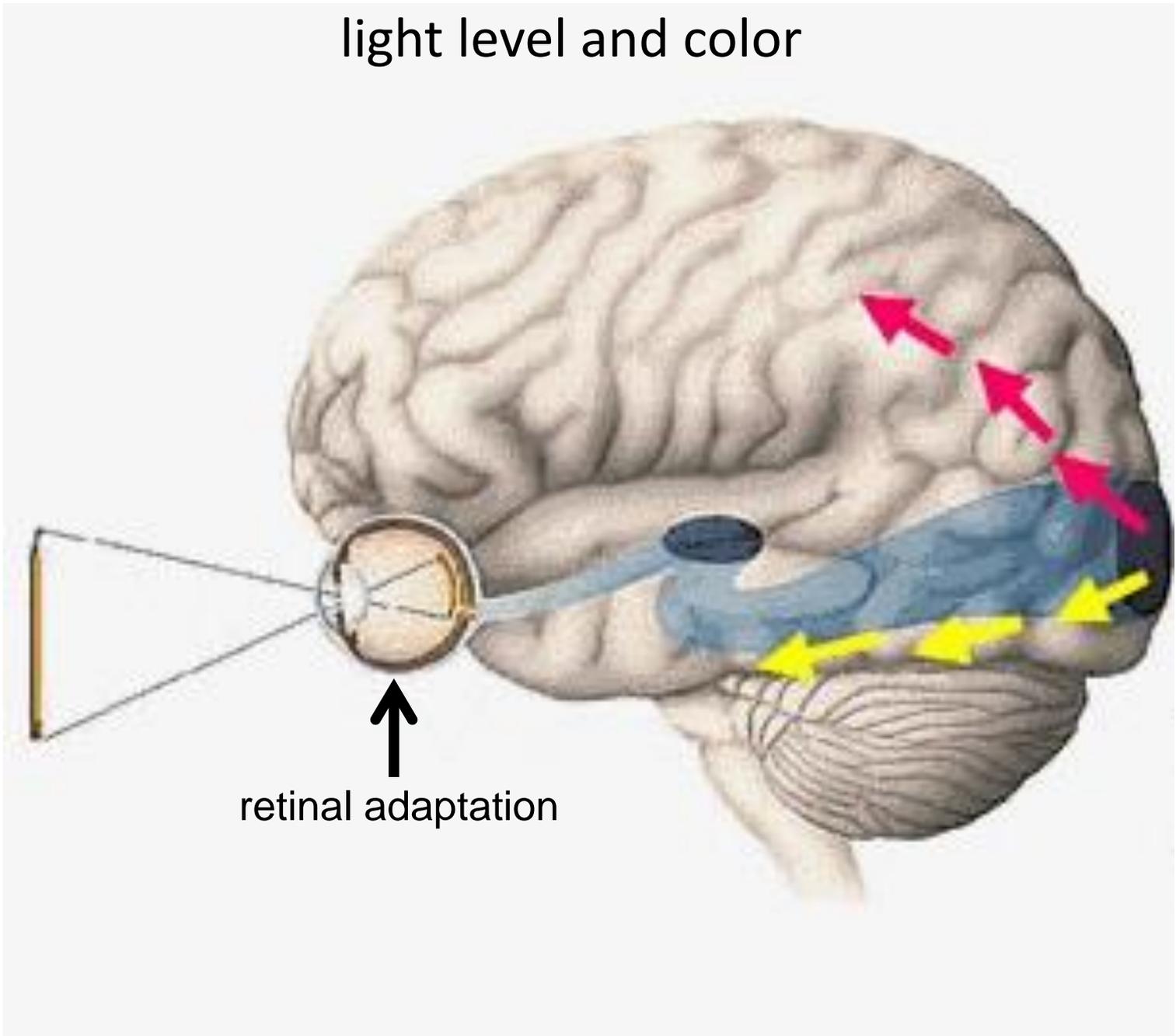


Adaptation across the visual hierarchy

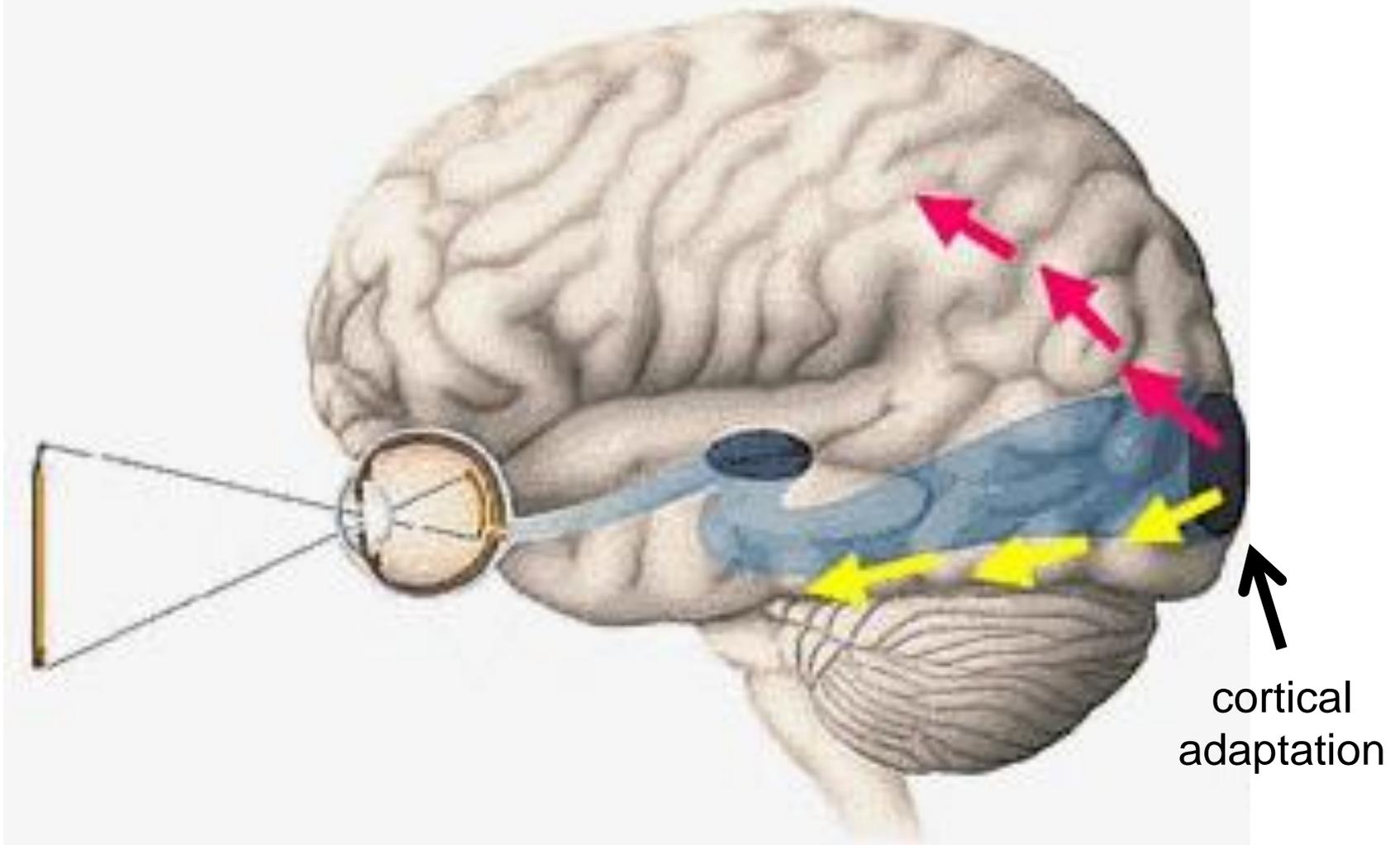
Adaptation operates in functionally similar ways at all levels of visual coding.

And thus points to common processes of sensitivity regulation at all processing stages

e.g. receptors in the eye adjust to the average light level and color



Adaptation in the cortex adjusts to more complex features of the image



e.g. adaptation to image blur

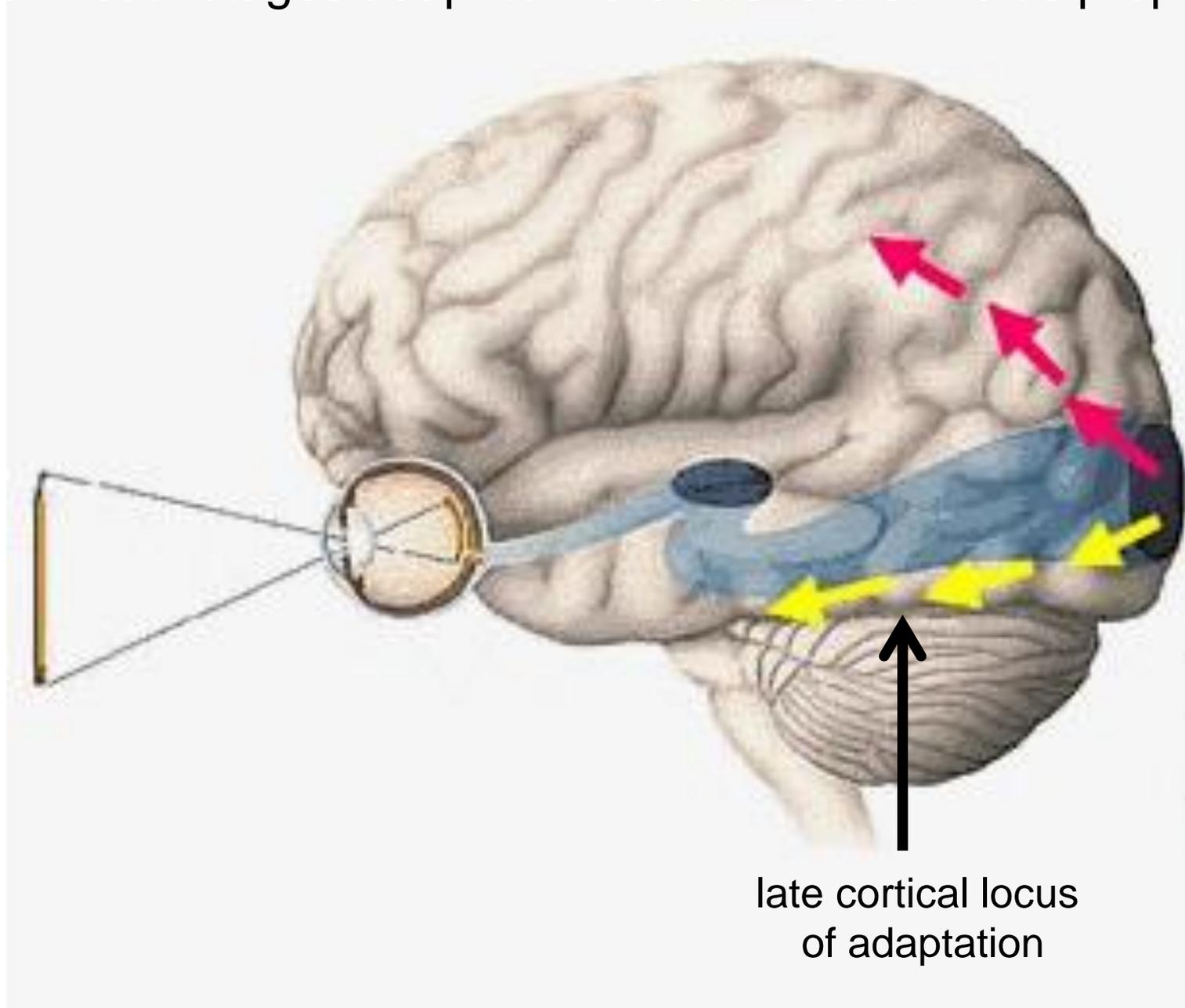


Webster et al. Nature Neuroscience 2002

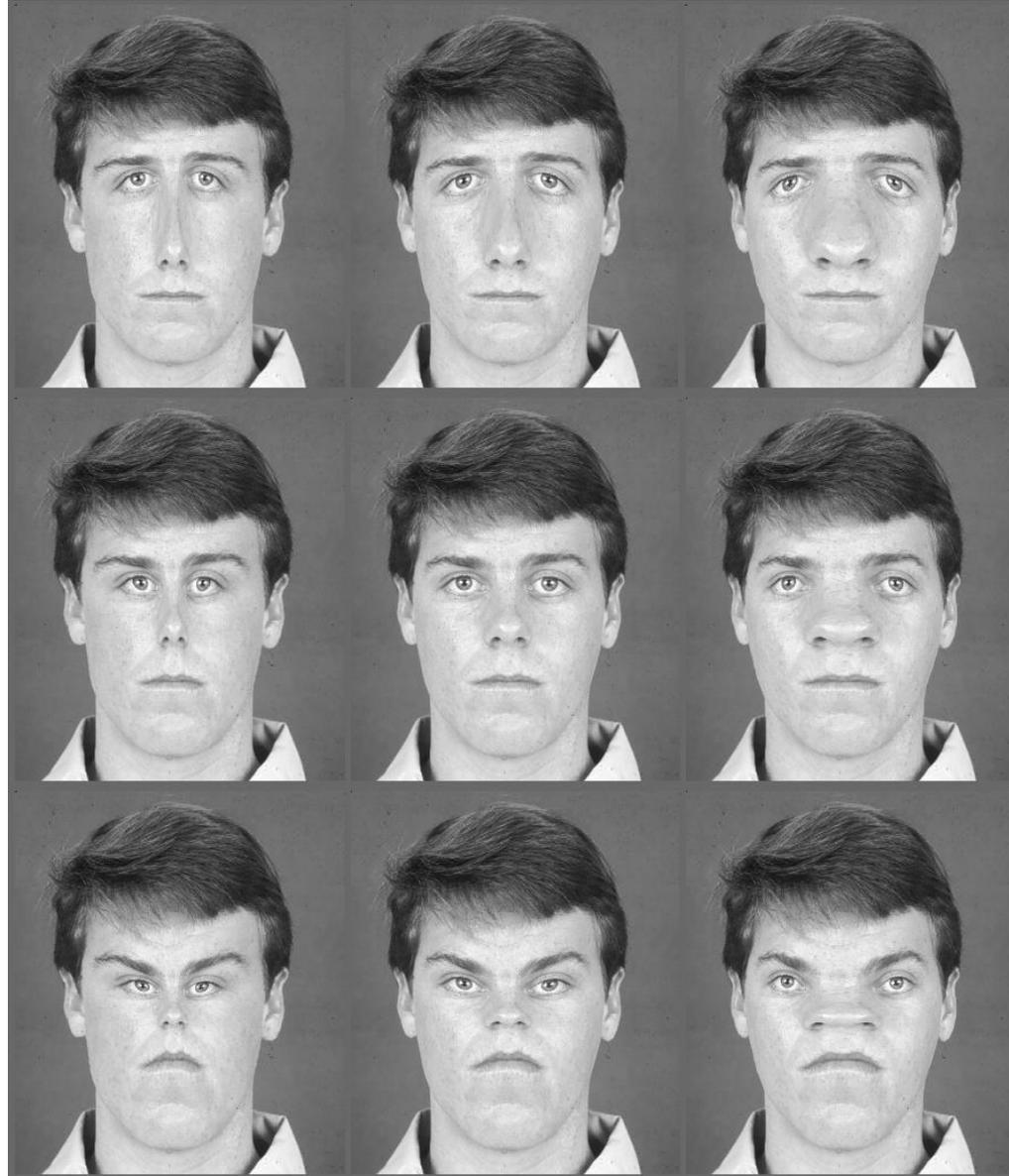




Higher visual stages adapt to more abstract stimulus properties



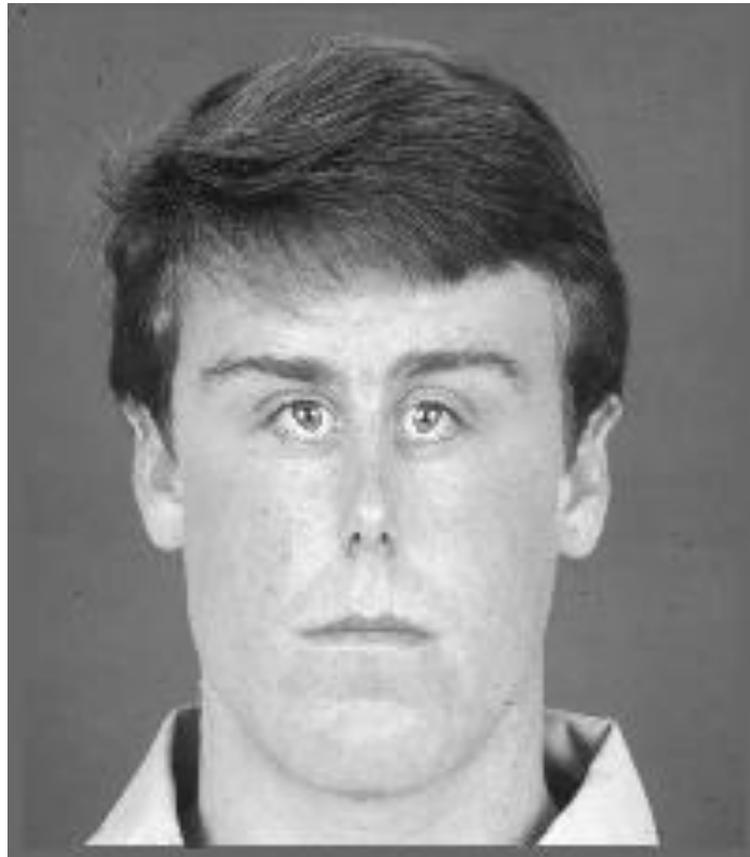
e.g. adaptation to faces



Webster and MacLeod Phil Trans Royal Soc 2011

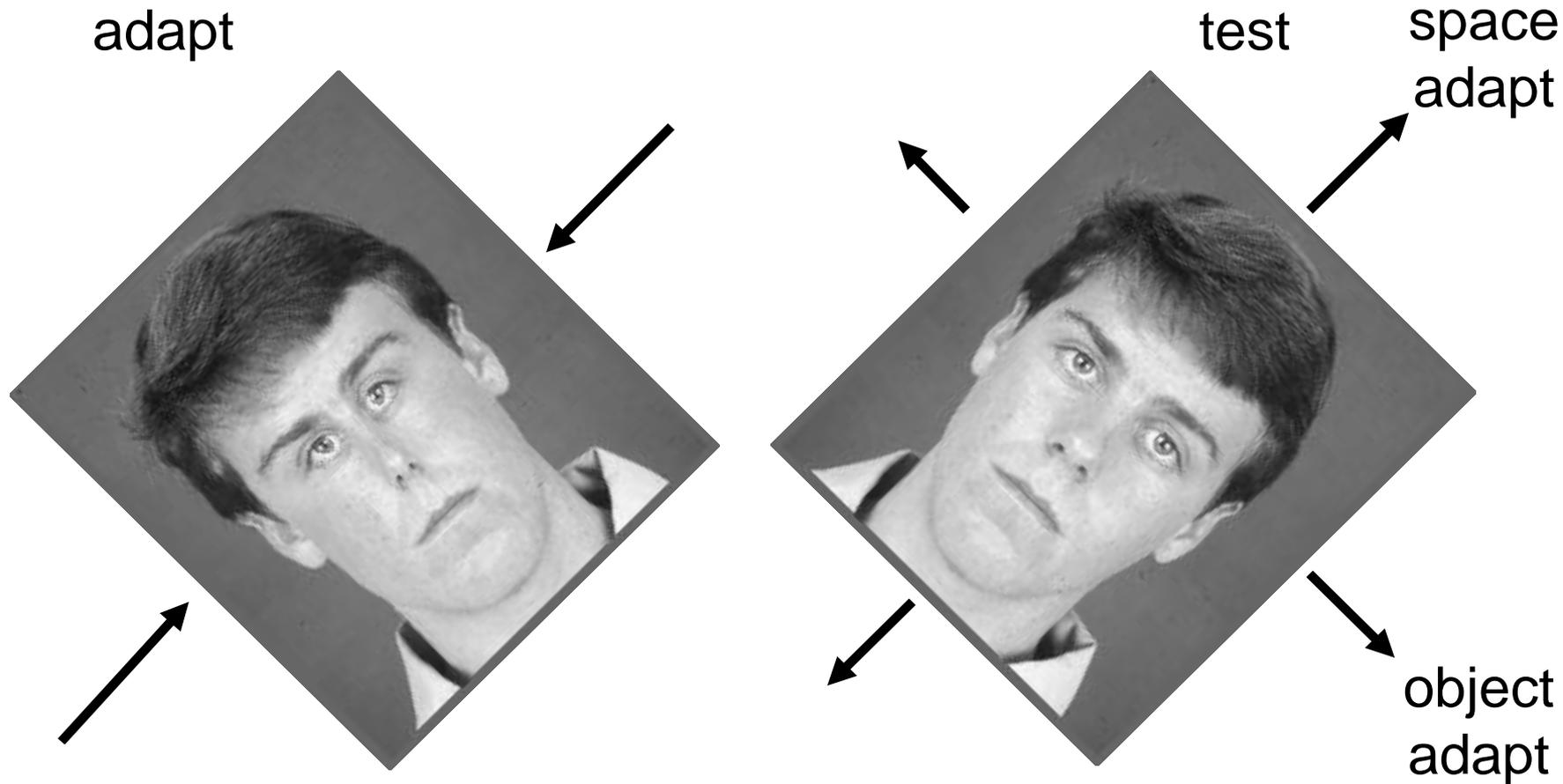
A demonstration of face adaptation







The adaptation partly occurs at object- and possibly face-specific loci



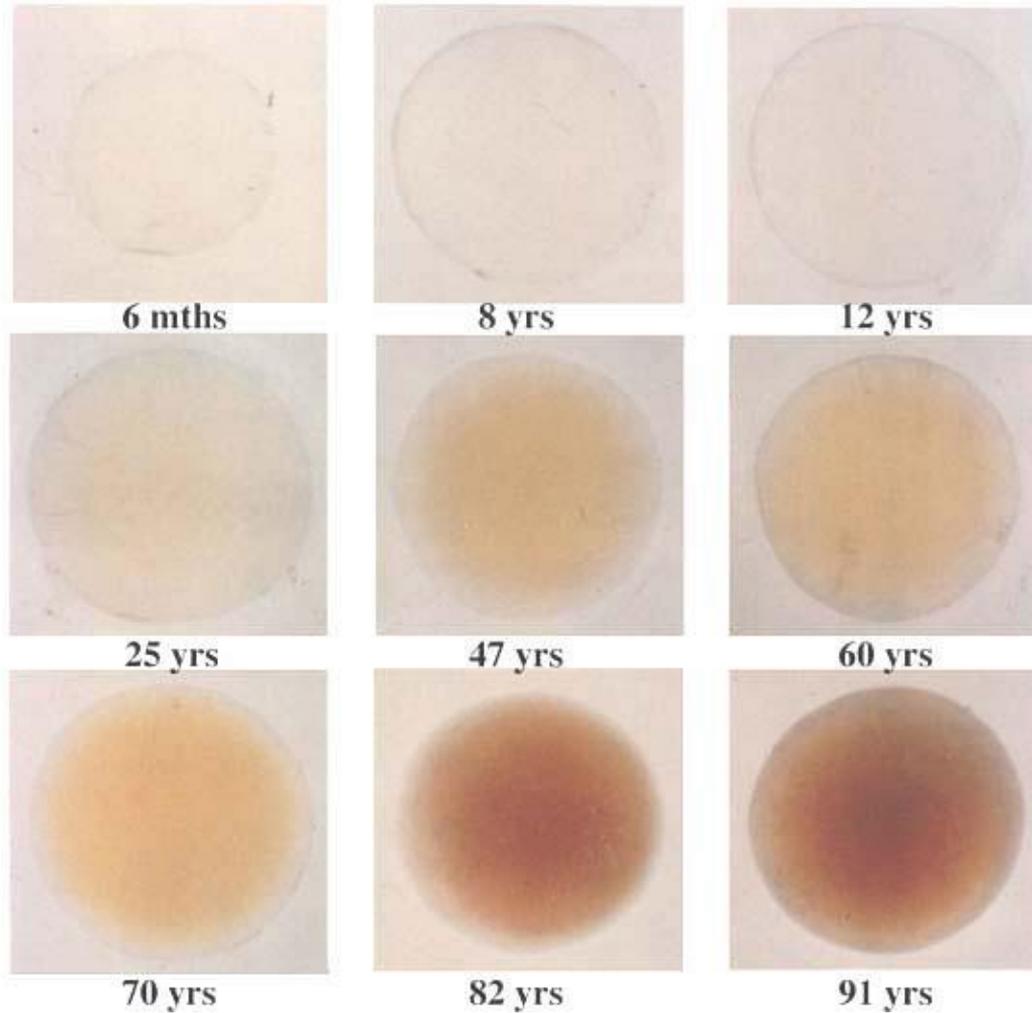
Adaptation is strong and persistent in natural viewing

Natural images and natural visual tasks provide very potent stimuli for adaptation

Thus vision is constantly under adaptation to the properties of the visual world

This optimizes perception not only for changes in the world but also variations in the observer

e.g. we are strongly adapted to the spectral filtering by our lens



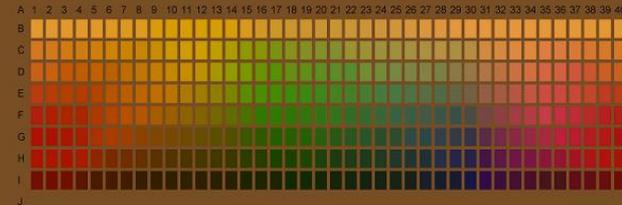
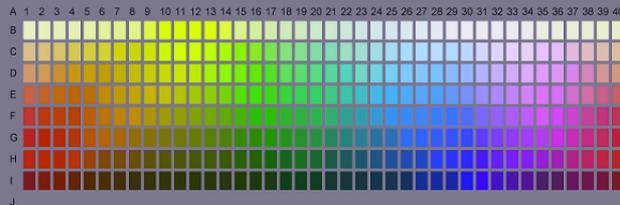
Lerman *Radiant energy and the eye* 1980

Color changes predicted by lens density changes

as seen by
young observer



image filtered through
lens of older eye



Adapting different observers to the same environment

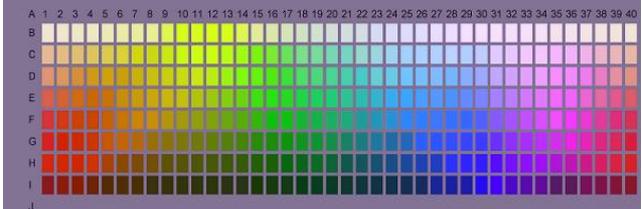
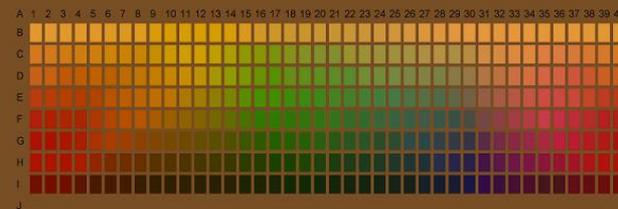
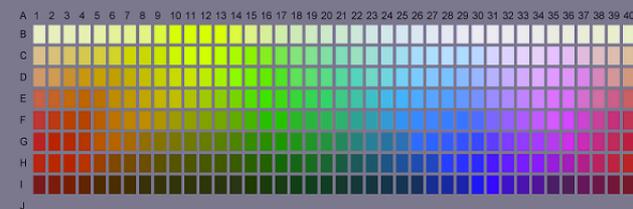
as seen by
young observer



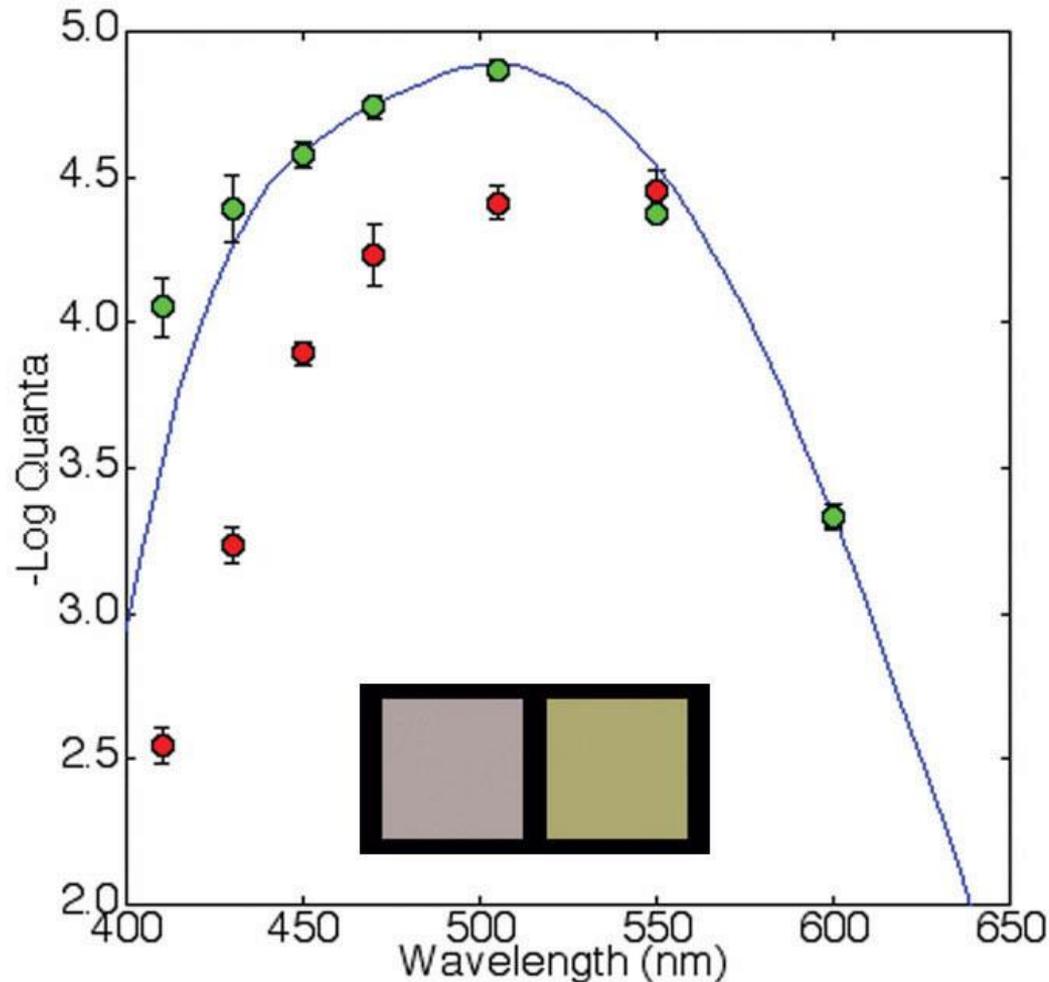
image filtered through
lens of older eye



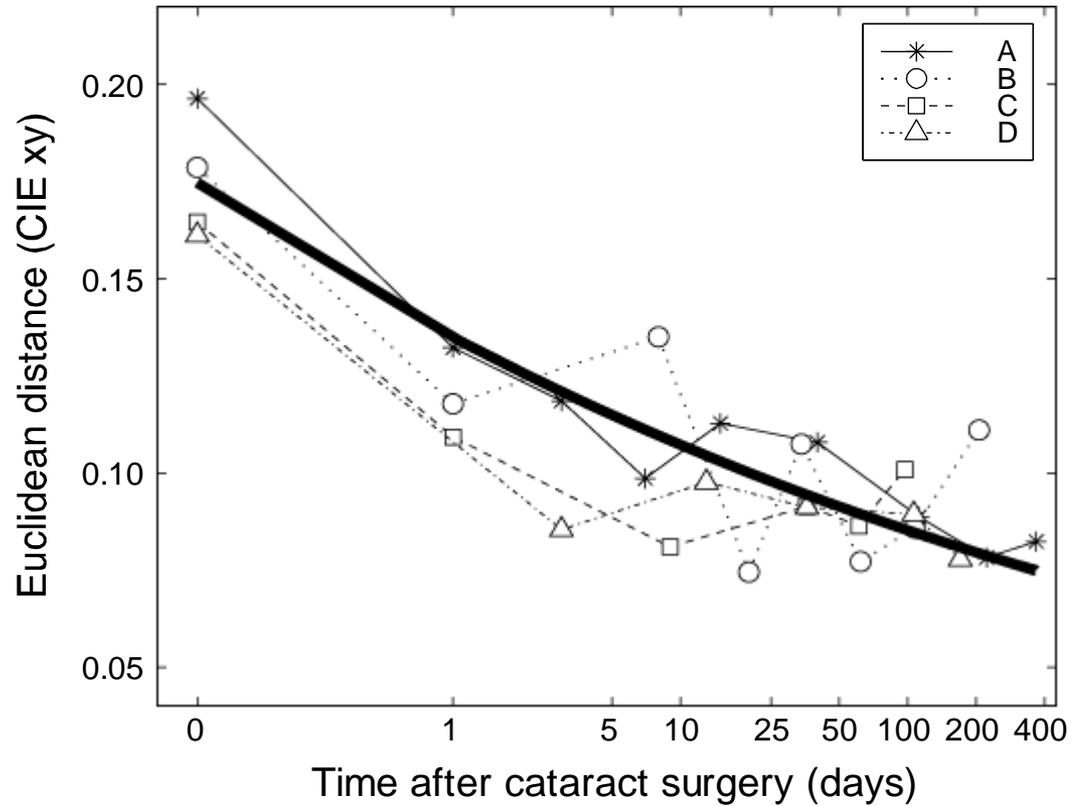
as seen by older observer
adapted to their lens



Spectral sensitivity before (red) and after (green) cataract surgery



Changes in the perception of “white” following surgery reveal a very slow re-adaptation to the world.



e.g. we are also adapted to the optical blur of our own eyes



Frits Zernike Original image

-3

-2

-1

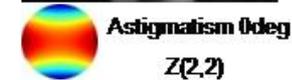
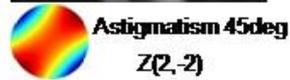
0

1

2

3

2nd Order



3rd Order



4th Order



View angle: 4°

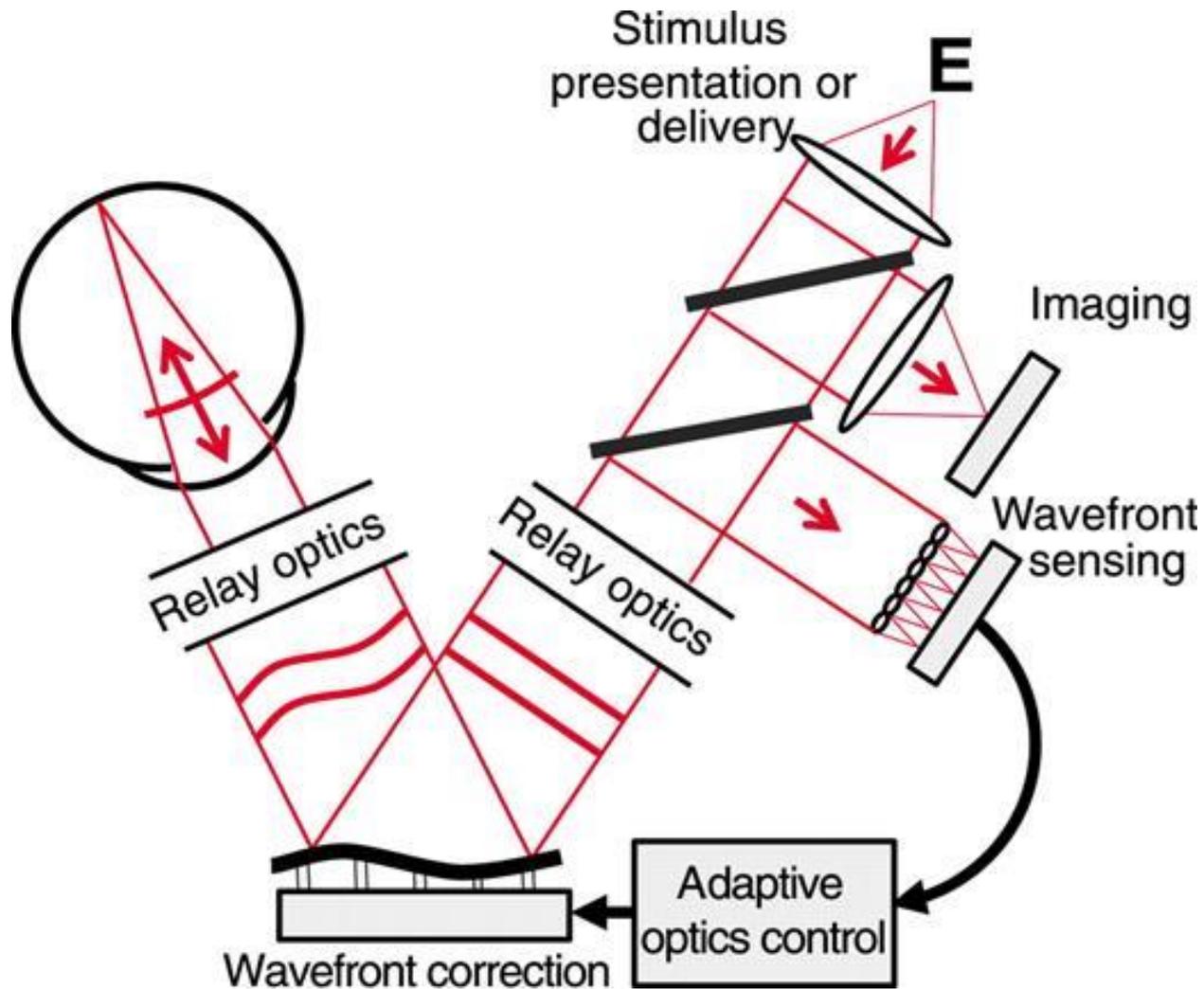
Pupil: 3mm

Blur strength : 350 nm

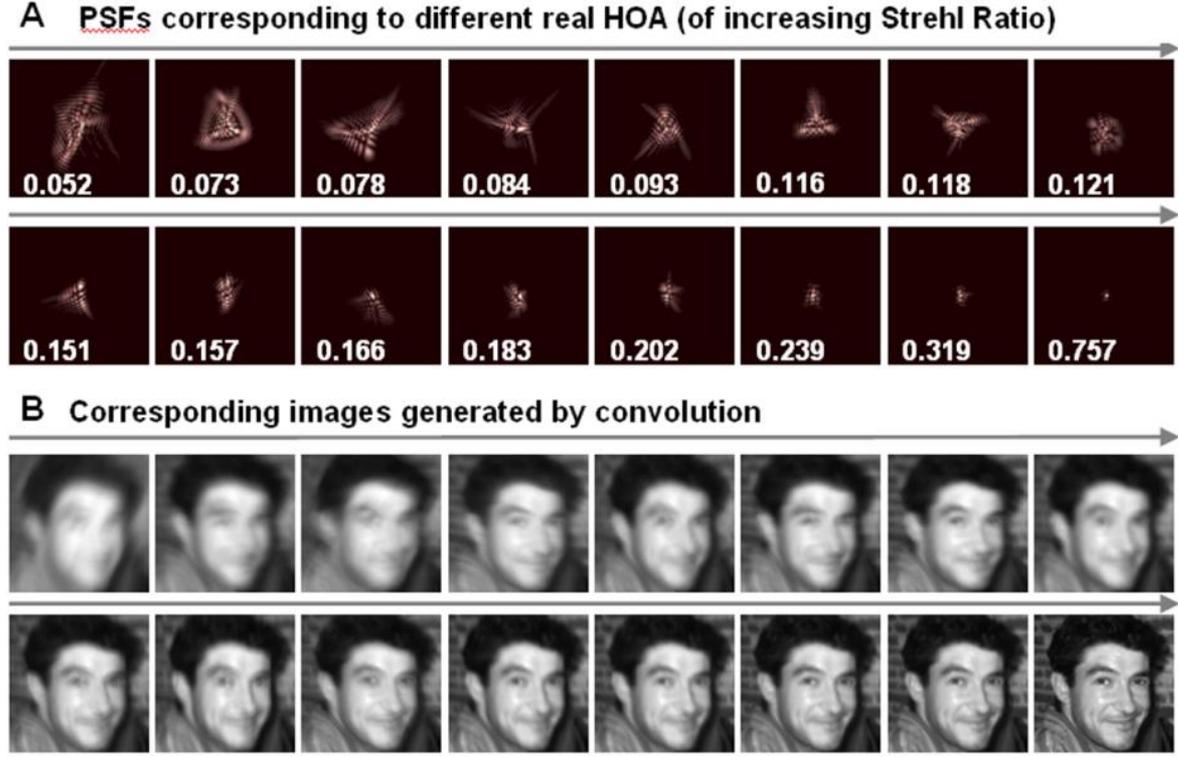
Ab: -300nm + Defocus 127nm

Adaptation to high-order aberrations

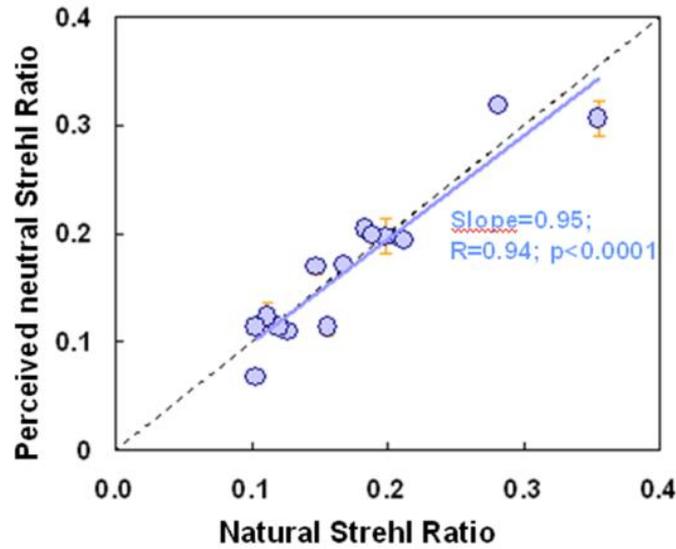
Adaptive Optics



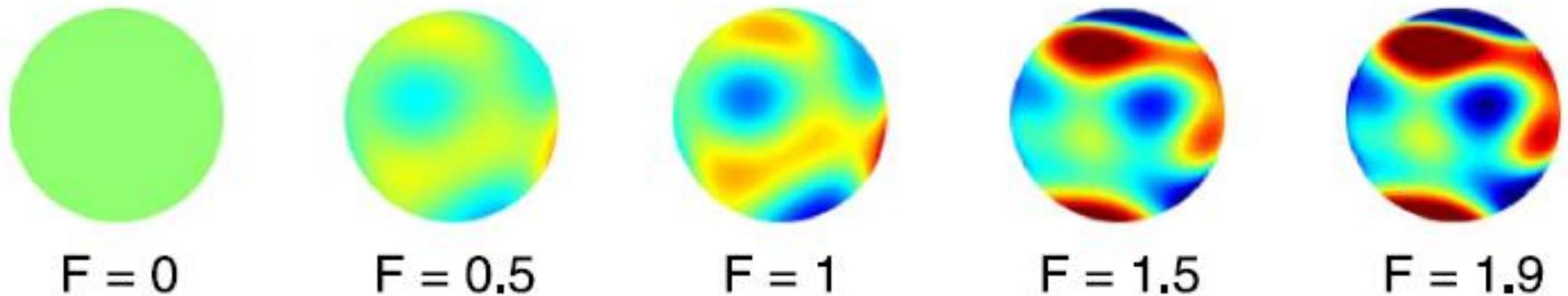
Observers perceive images filtered by their own magnitude of wave aberrations as “best-focused”



C Correspondence between the image quality perceived as neutral and the retinal image quality produced by the aberrations of the subject



Observers also adapt to changes in the magnitude of their own HOA's



← Sharp Natural Blurred →



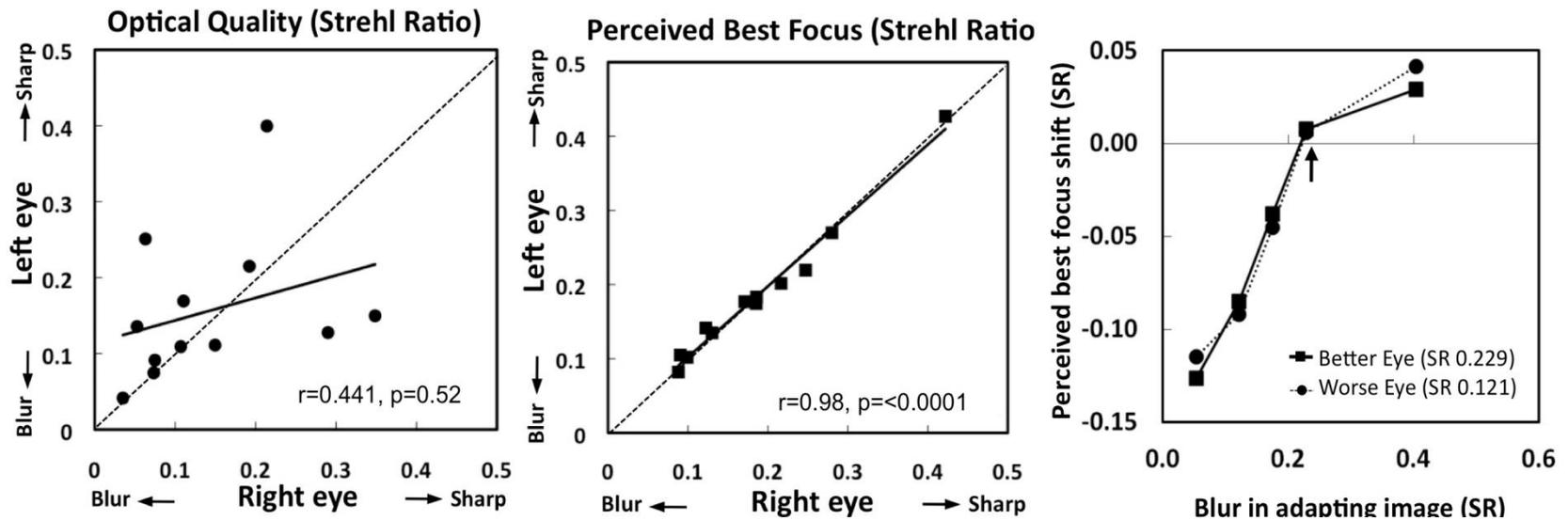
$F < 1$: SHARPER



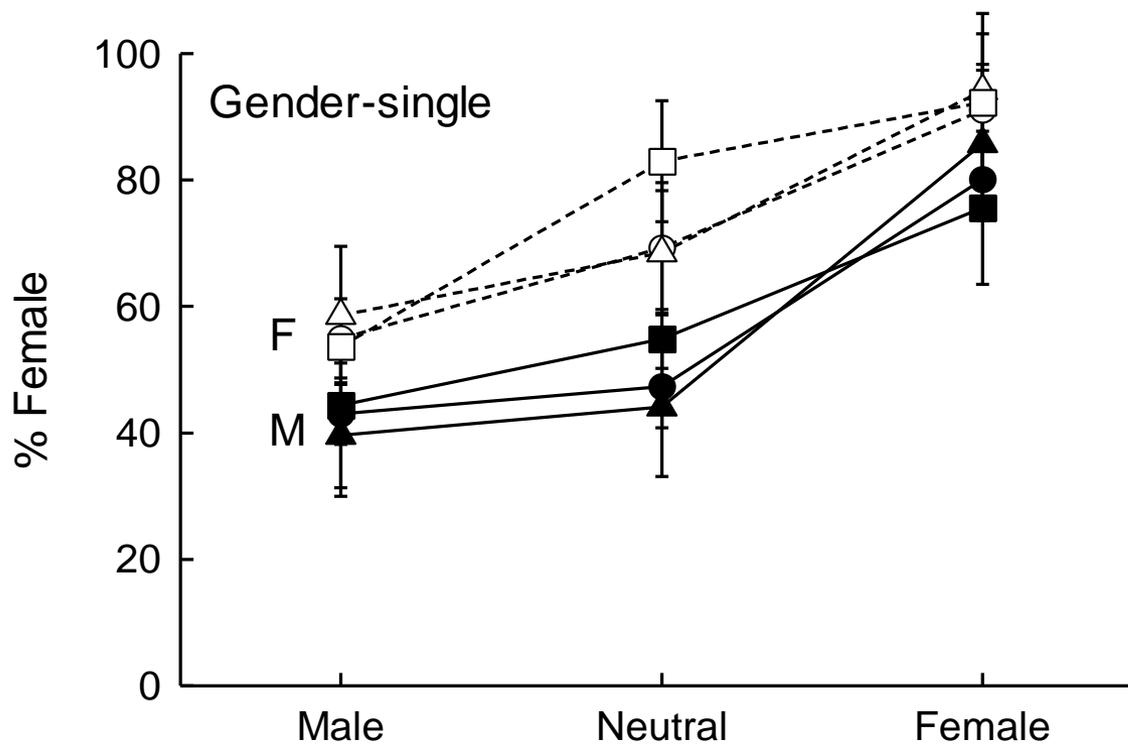
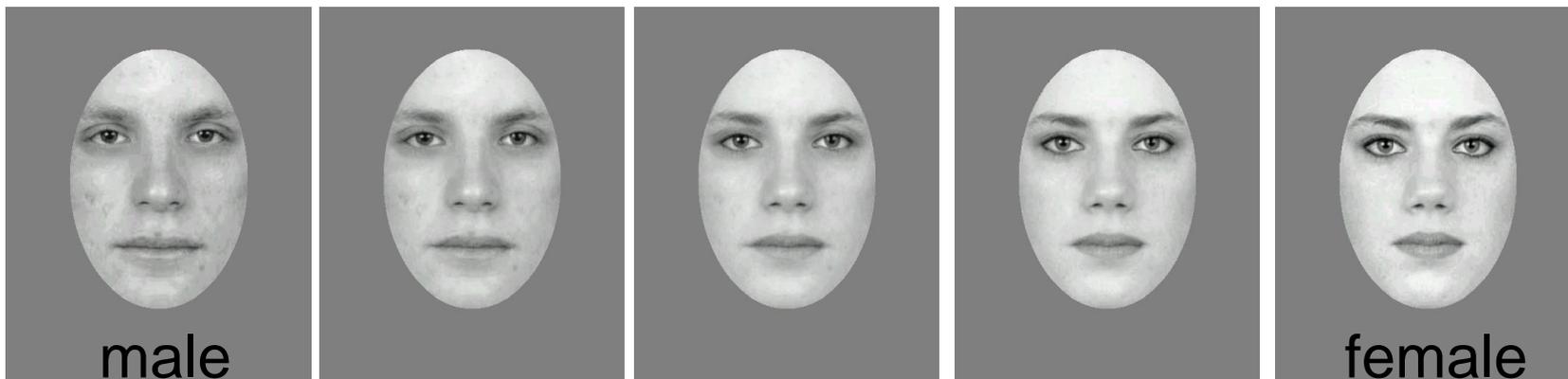
$F > 1$: BLURRED



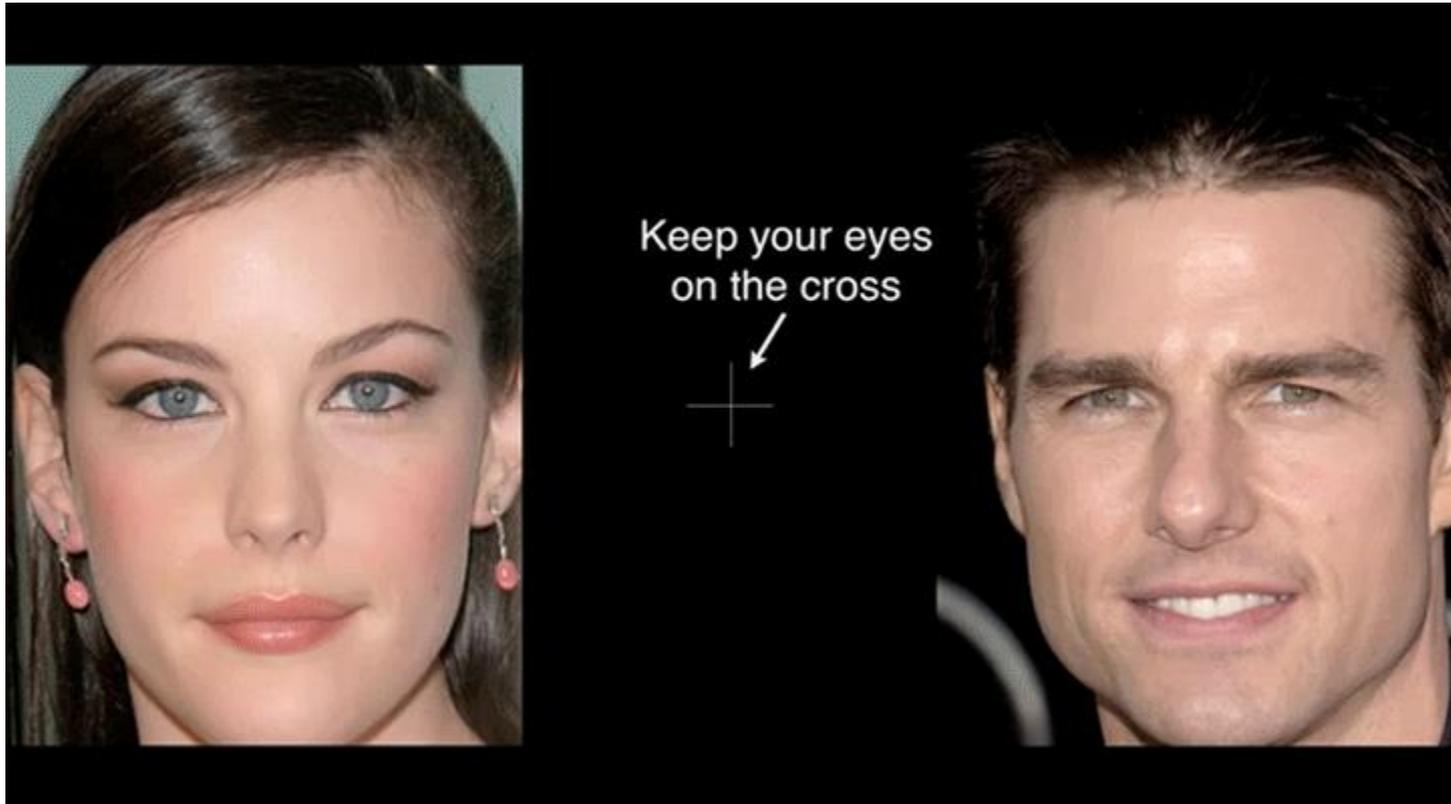
Perceived focus and blur adaptation are set by the eye with better image quality



eg: adaptation to natural variations in faces



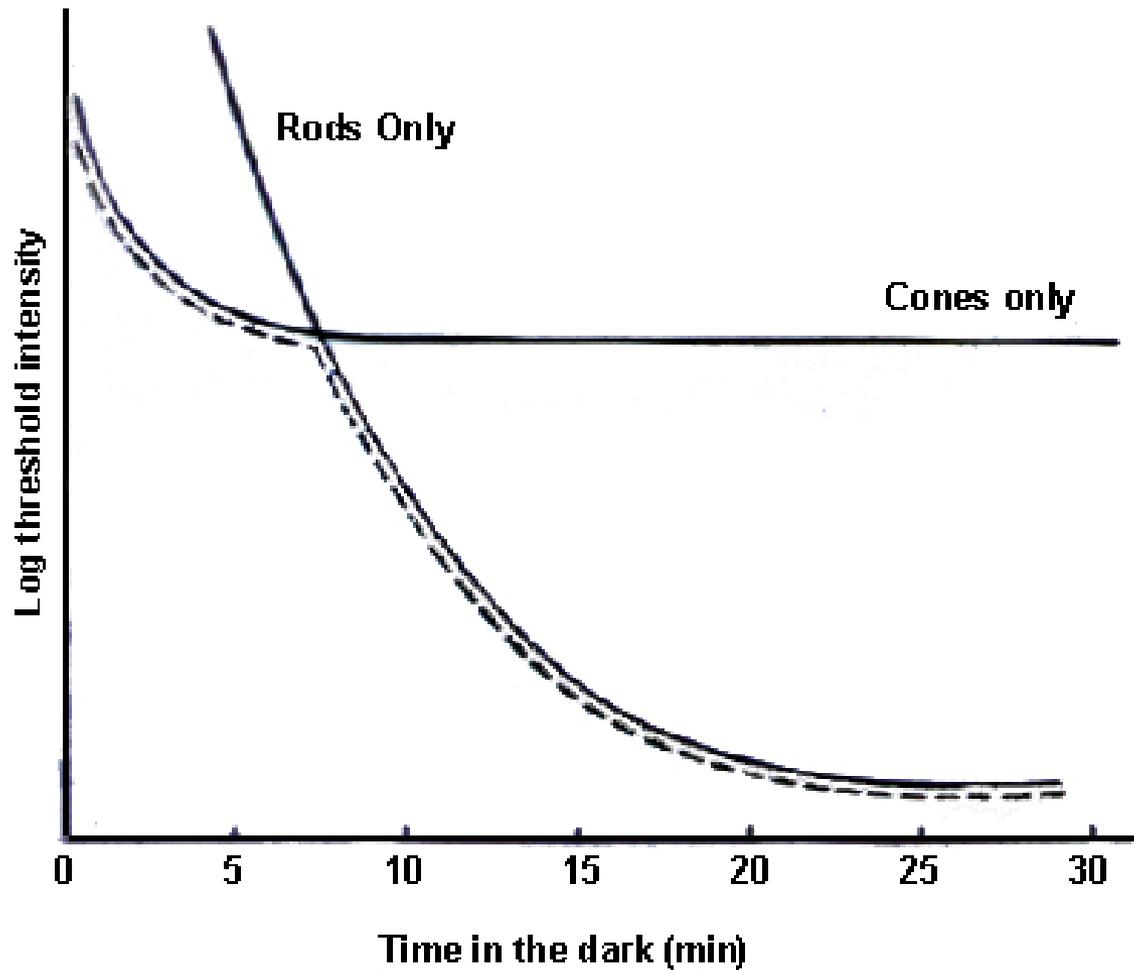
Webster et al. Nature 2004



Tangen et al. Perception 2011

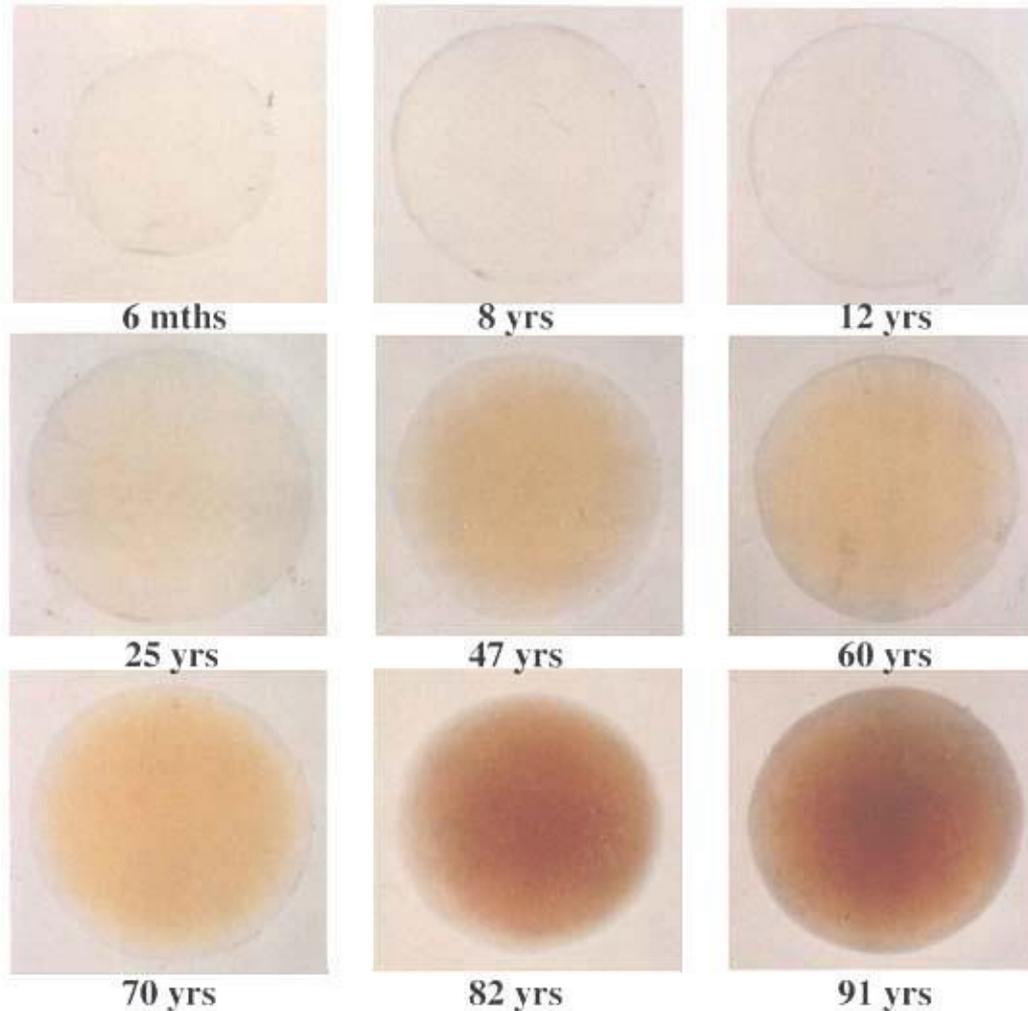
Why adapt?

1. Coding efficiency: adaptation optimizes neural resources for the ambient range of stimuli



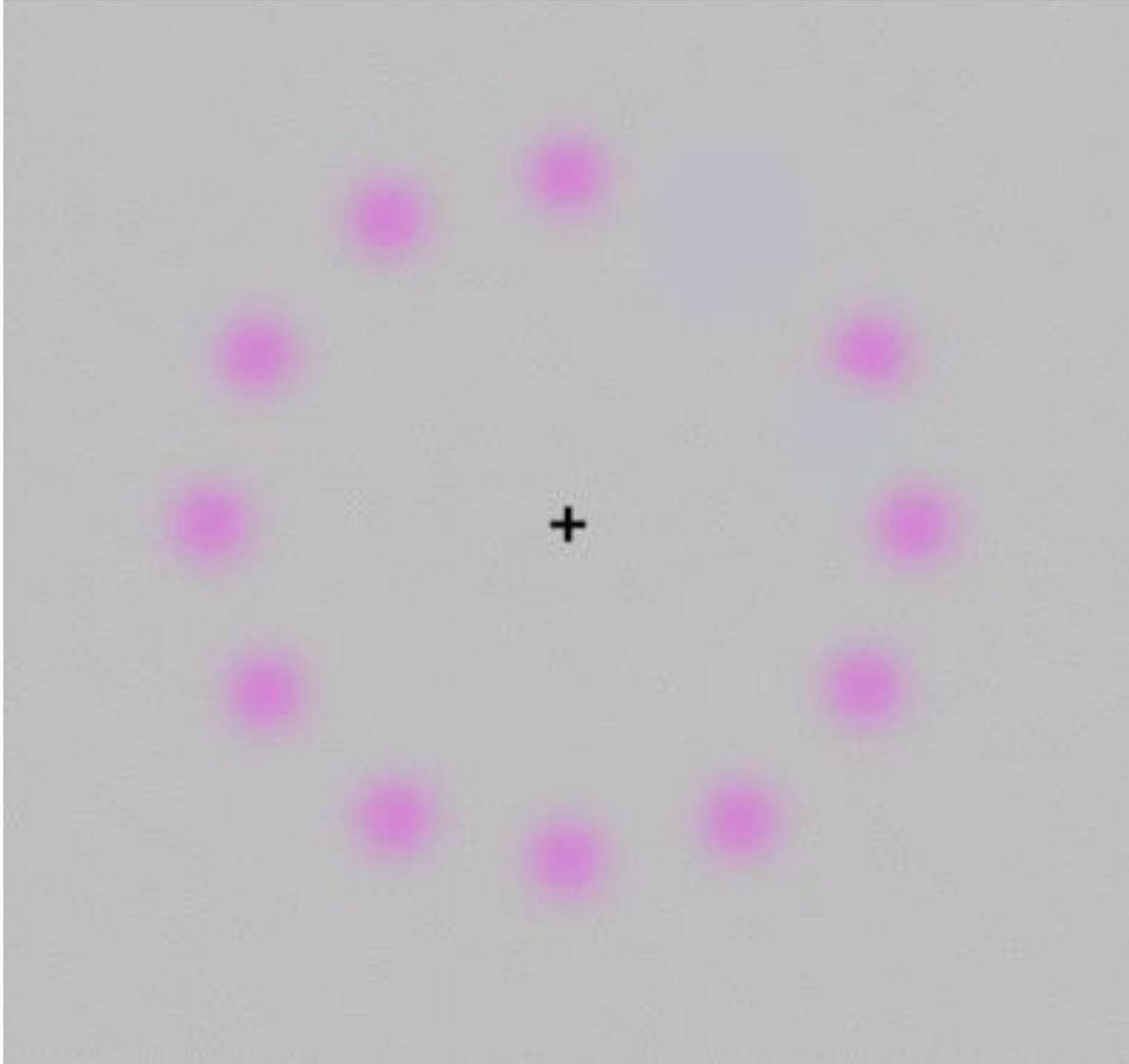
Why adapt?

2. Error correction / constancy: adaptation discounts variance in the observer or stimulus to maintain stable percepts



Why adapt?

3. Predictive coding: adaptation nulls responses for expected stimuli to enhance the salience of novel stimuli



Lilac Chaser, by Jeremy Hinton

e.g. finding a fruit among foliage



Adaptation and the natural environment



Adaptation effects are pronounced in natural viewing
The adjustments strongly impact most if not all percepts
Adapting allows us to see better within the environments
we are currently adapted to

Adaptation to unnatural environments

Modern technology is increasingly immersing us in novel and idiosyncratic visual environments

How will visual coding adjust to these worlds?

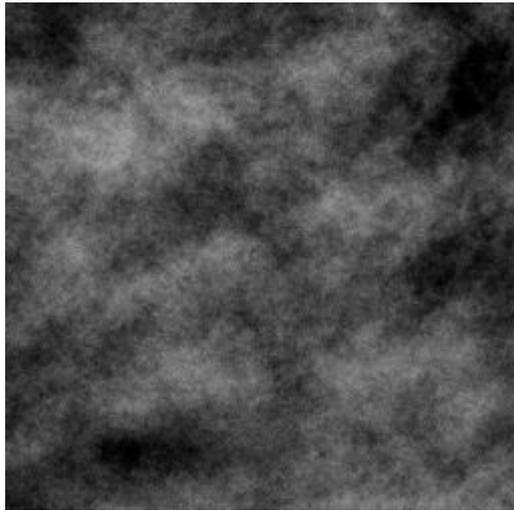
e.g. adaptation to medical images

Radiologists spend hours inspecting images that have unnatural properties (e.g. texture and blur)

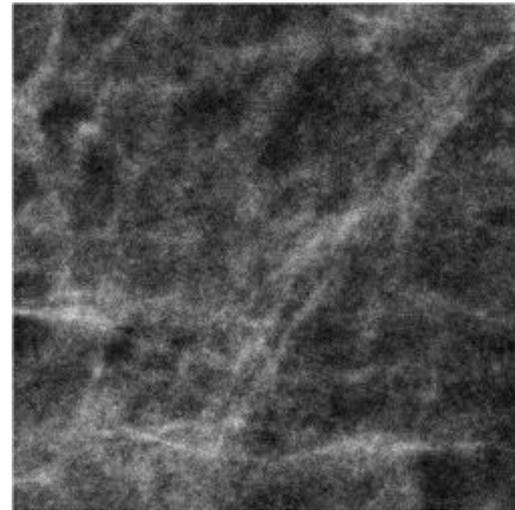
They might therefore adapt to the unique statistics of their “environment”

e.g. tissue in mammograms typically classified from dense to fatty

Could these classifications be affected by the distribution of images seen previously?



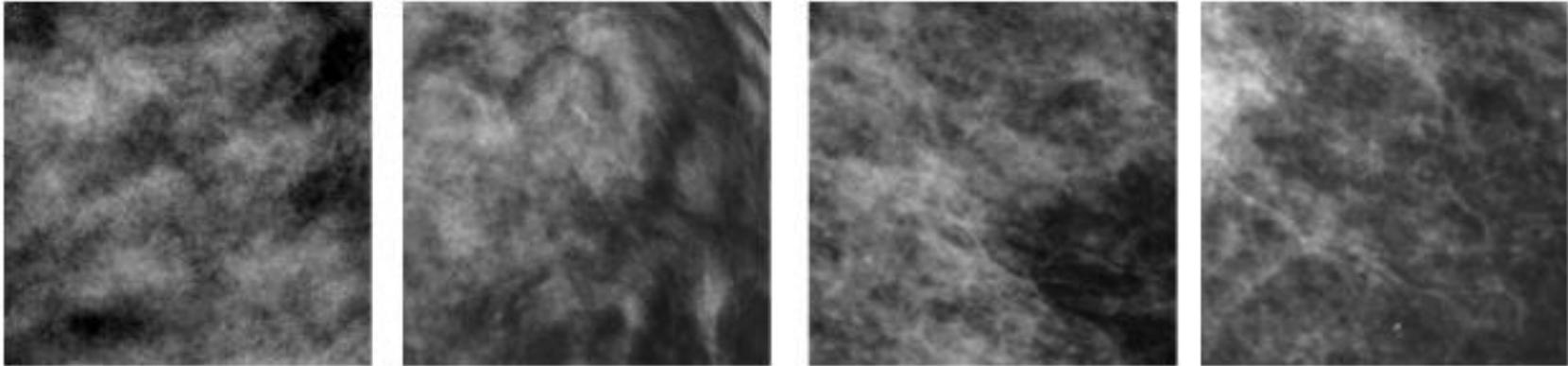
dense



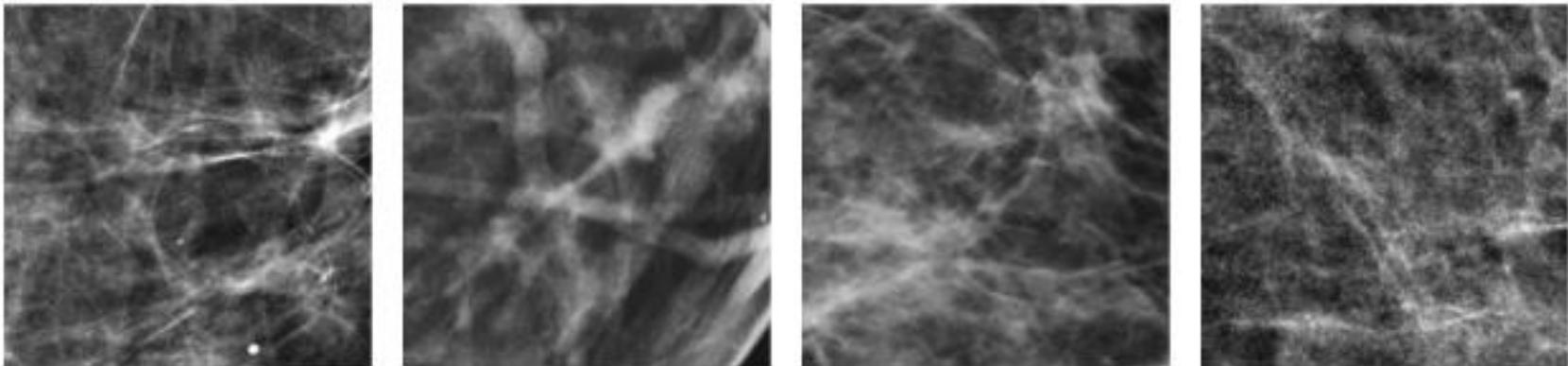
fatty

BIRADS classification of mammograms as dense or fatty tissue

Dense - (BIRADS 4)



Fatty - (BIRADS 1)

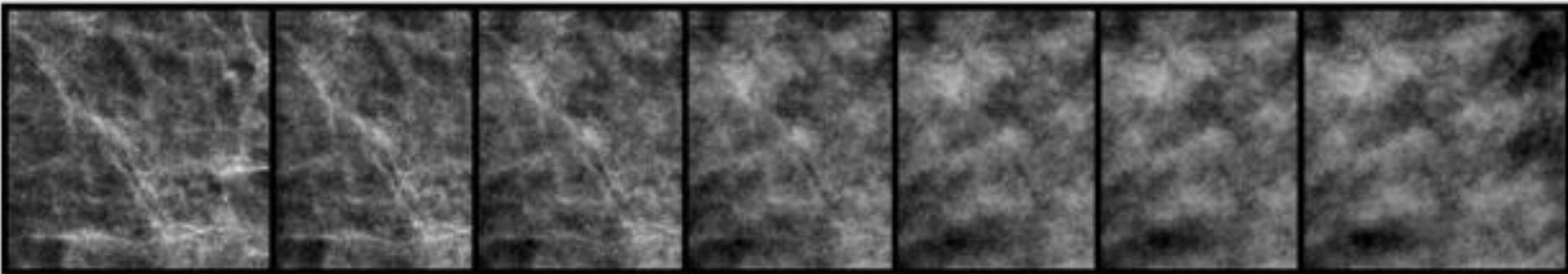


Graded blends of fatty and dense images

Original Fatty

Intermediate Images

Original Dense



100% Fatty/
0 % Dense
(-50)

80% Fatty/
20% Dense
(-30)

65% Fatty/
35% Dense
(-15)

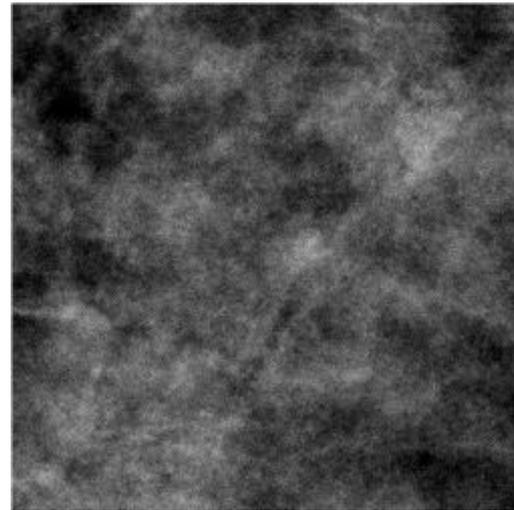
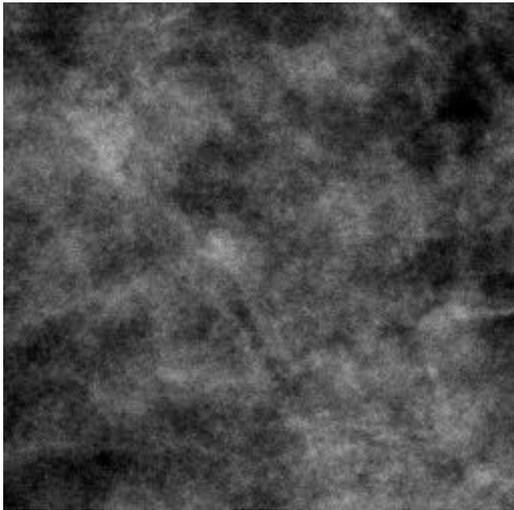
50%Fatty/
50% Dense
(0)

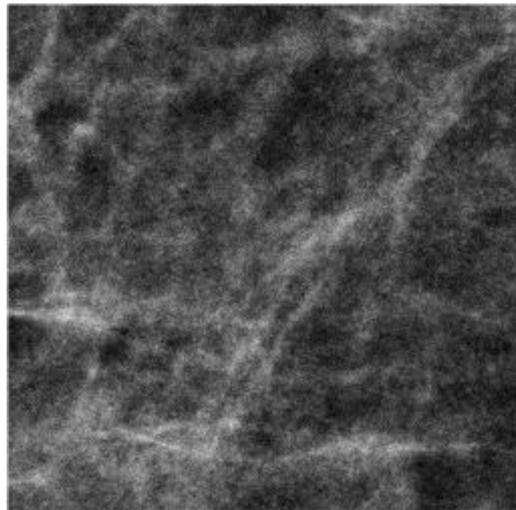
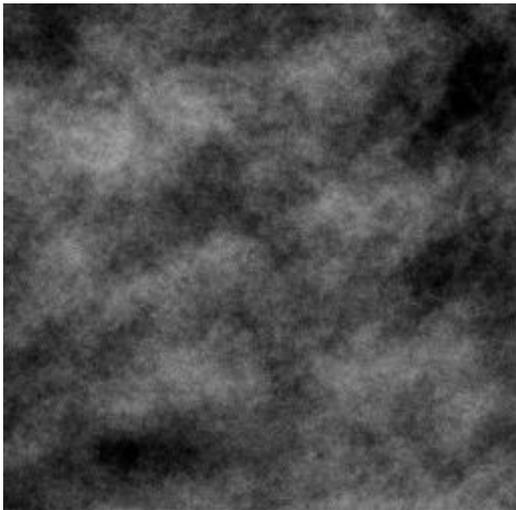
35%Fatty/
65% Dense
(15)

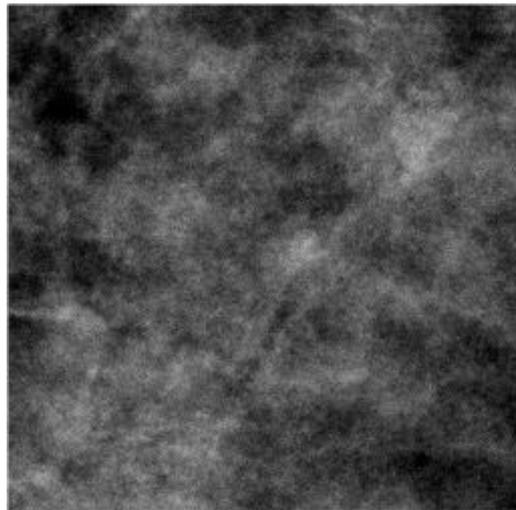
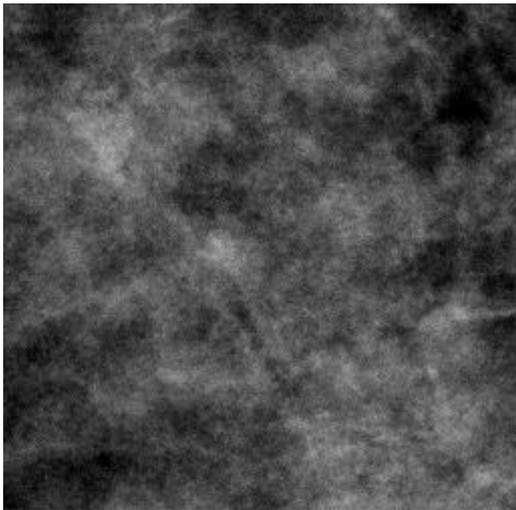
20%Fatty/
80% Dense
(30)

0%Fatty/
100% Dense
(50)

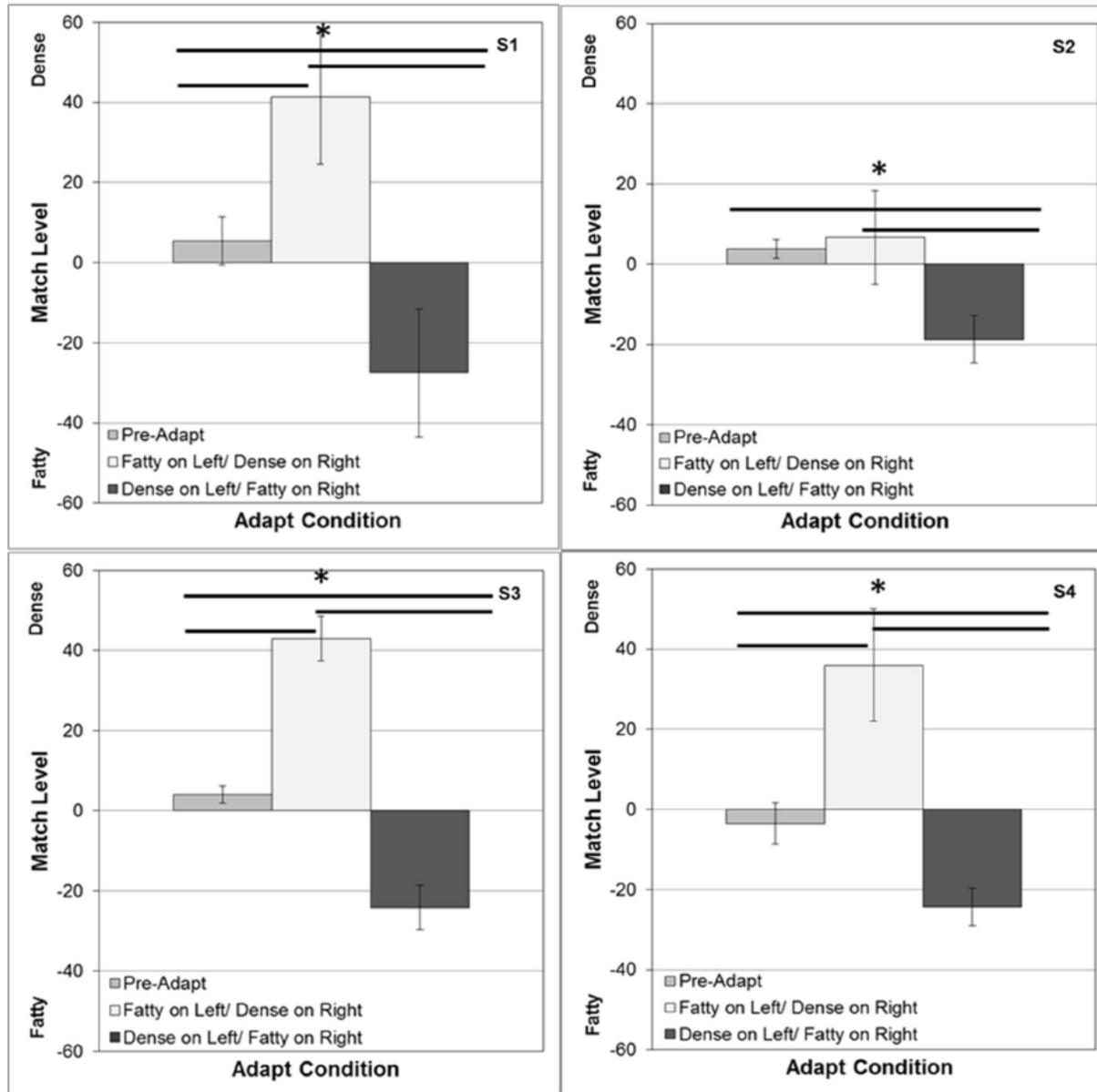
Adaptation to medical images



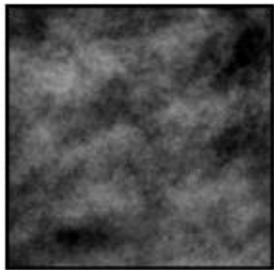




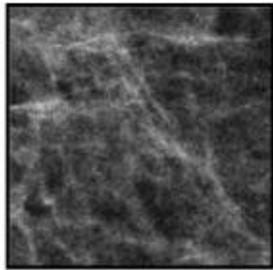
Adaptation biases the perceived texture in the images



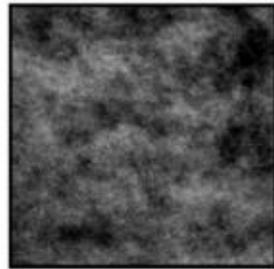
Aftereffects are driven by the phase spectrum and not the amplitude spectrum



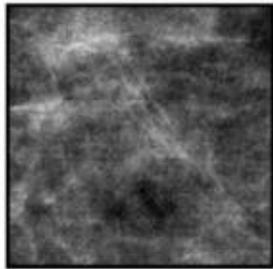
Original Dense



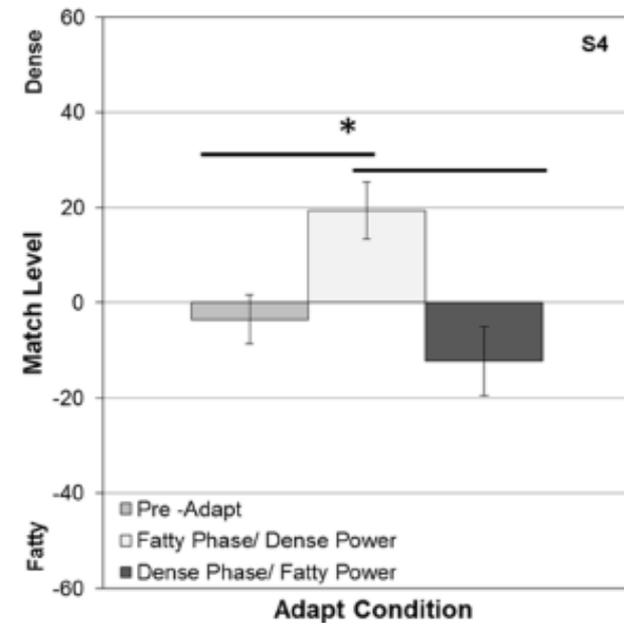
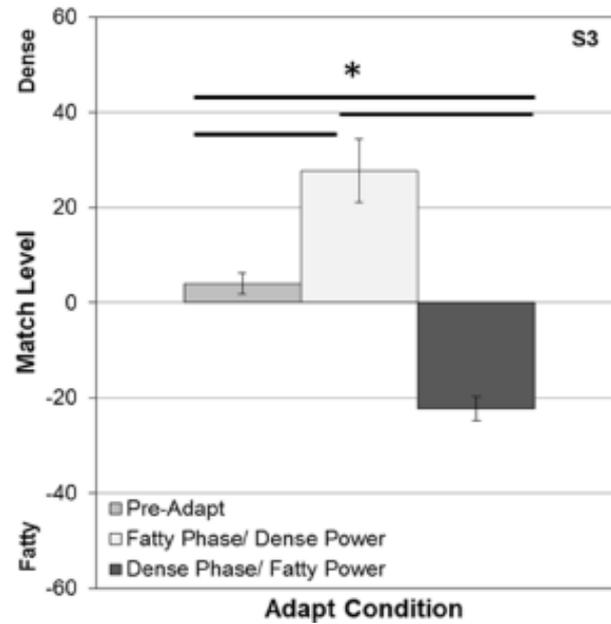
Original Fatty



Dense Phase/ Fatty Power

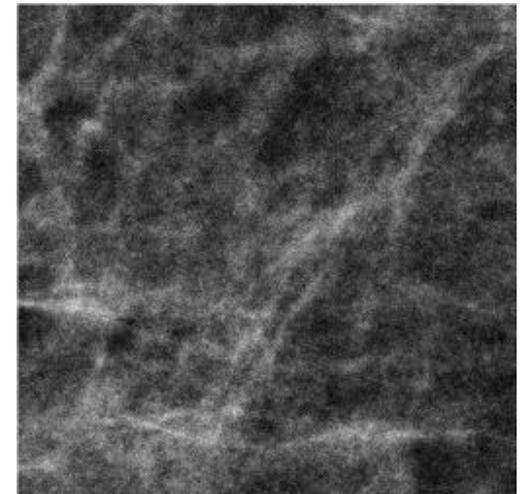
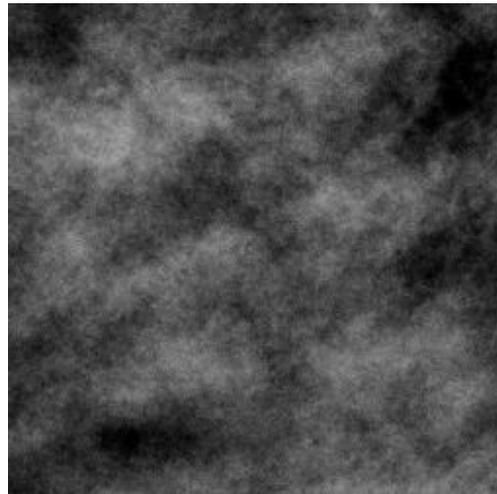
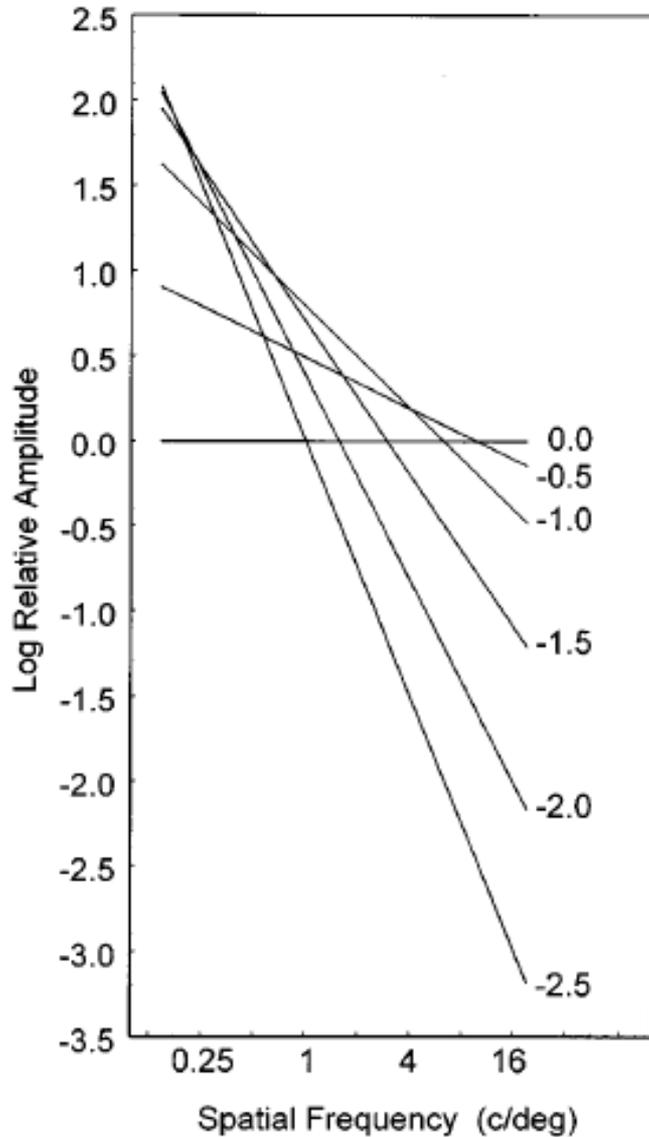


Fatty Phase/ Dense Power



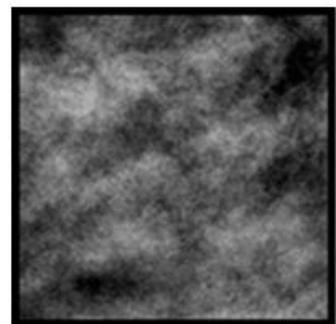
Adaptation to the characteristic blur in mammograms

slope ~ -1.0

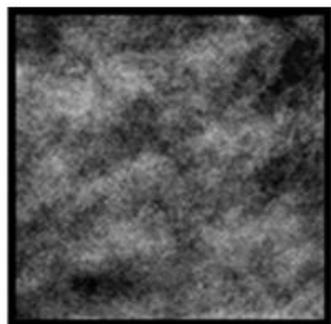


slope ~ -1.4

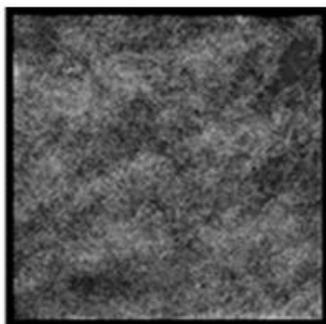
Adaptation to the characteristic blur in mammograms



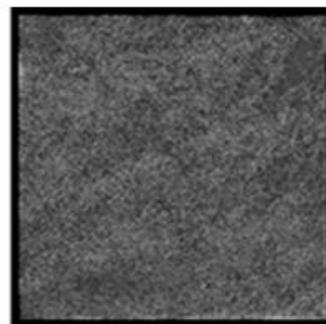
-1.4



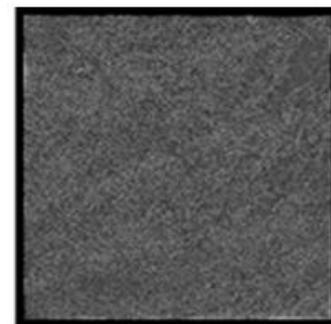
-1.25



-1

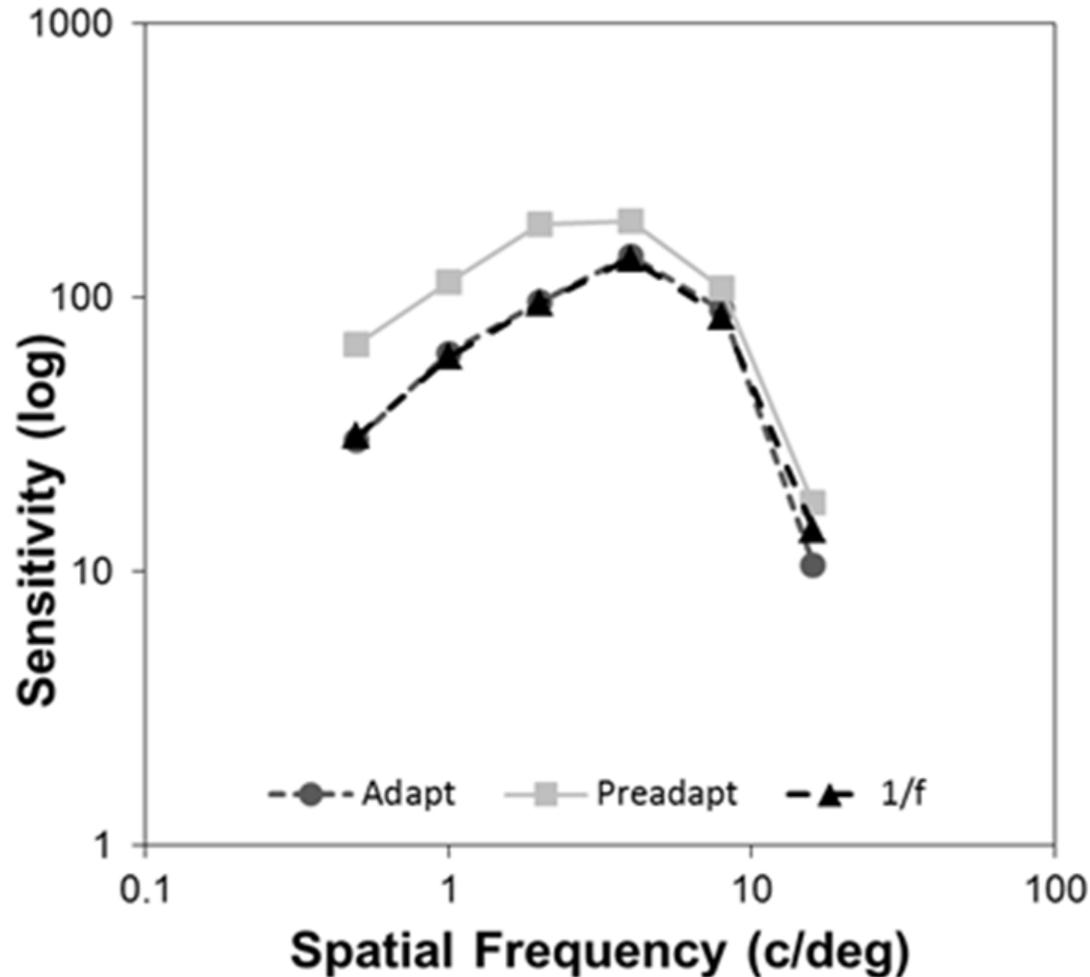


-0.75



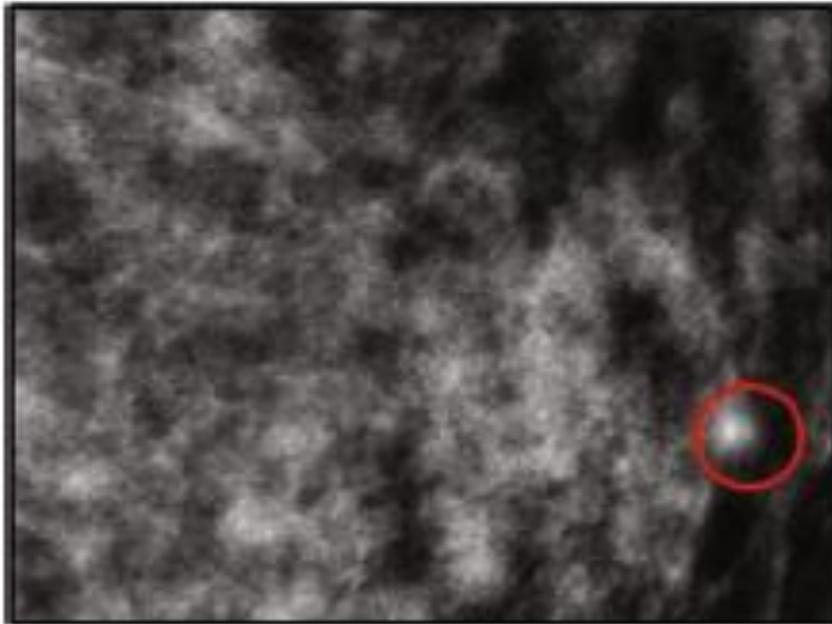
-0.5

Adaptation to the images also leads to selective sensitivity losses at low spatial frequencies, biasing the contrast sensitivity function (CSF)

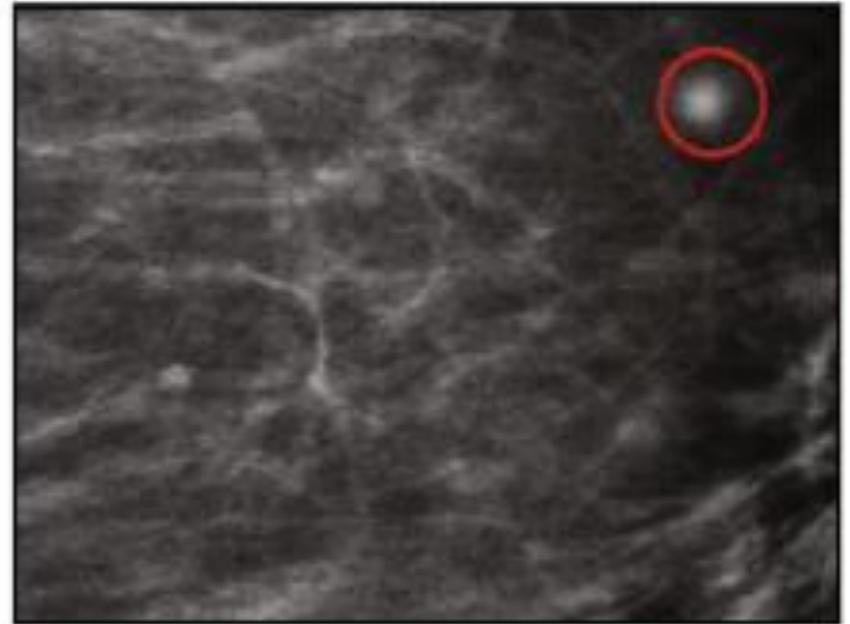


Adaptation and visual search in mammogram images

Mammograms with added targets (circled)

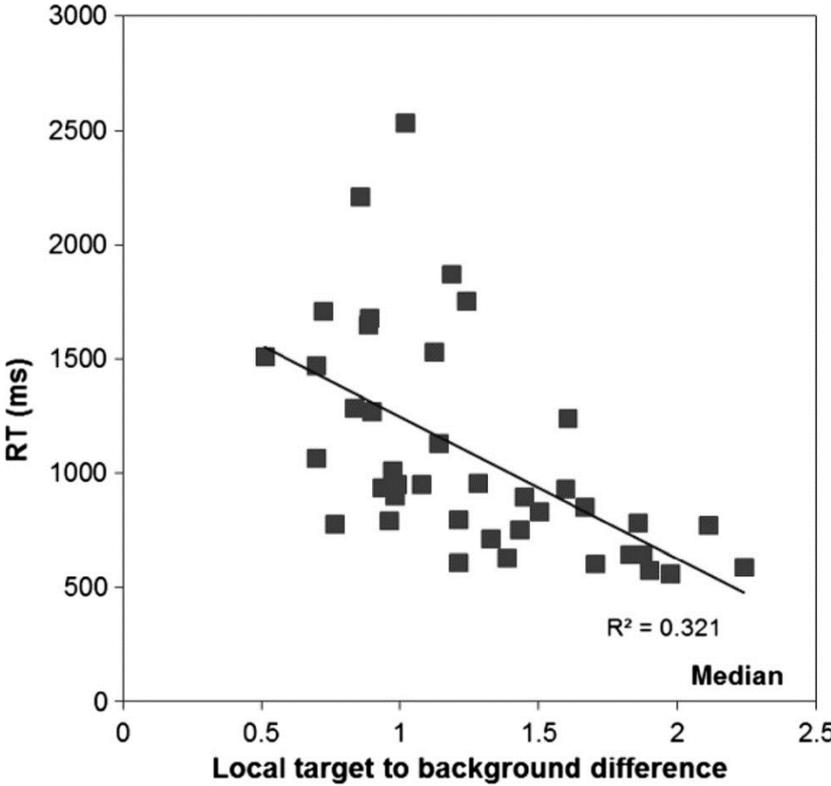
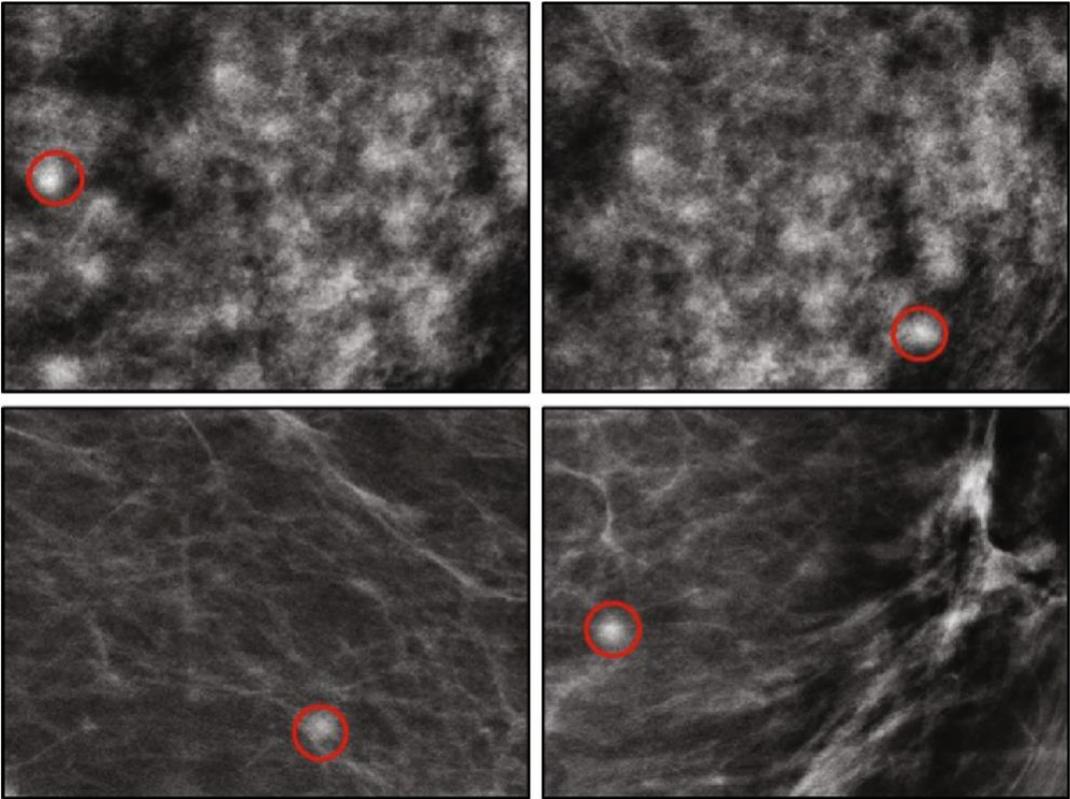


Dense Tissue

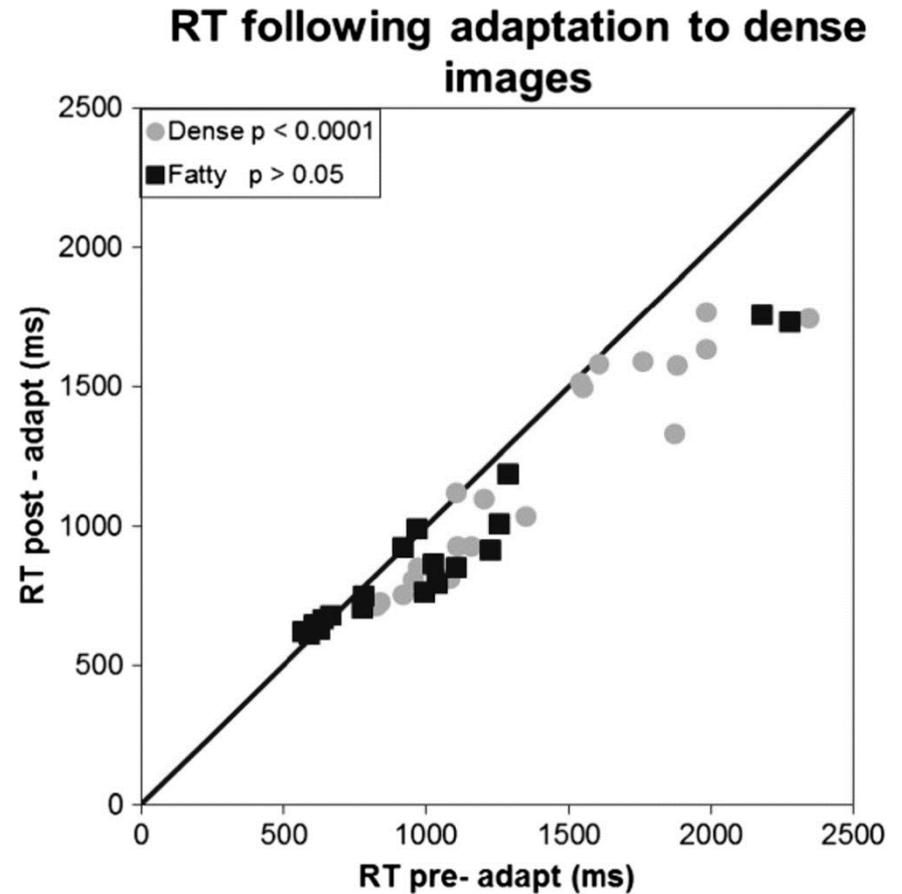
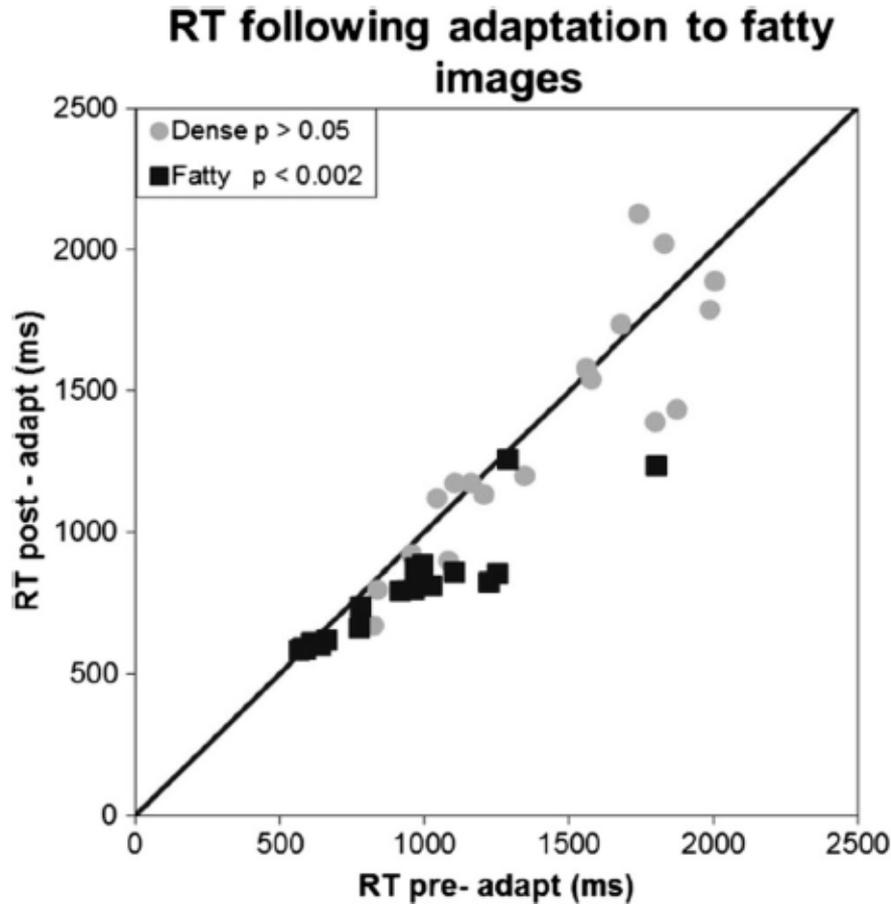


Fatty Tissue

Search times are faster with higher contrast targets



Adaptation facilitates search for a “lesion” within the adapted tissue type – and thus is selective for texture



Adaptation and medical image perception

- Radiological images present unique visual properties of observers
- Adaptation to these properties can bias contrast sensitivity and visual appearance
- The adaptation may also enhance sensitivity to novel (suspicious) features in the images
- Protocols for inspecting medical images could be developed to control for and potentially harness visual adaptation to improve performance

Thank you!

Integrative Neuroscience
Center of Biomedical Research Excellence



Visual Perception Lab
University of Nevada Reno



National Eye Institute

Supported by EY-10834 and P20-GM103650