Artificial Intelligence and data driven decision making in anal dysplasia

Dra. Anna Sala M.D, Ph.D Head of Innovation in Vall d'Hebron Hospital

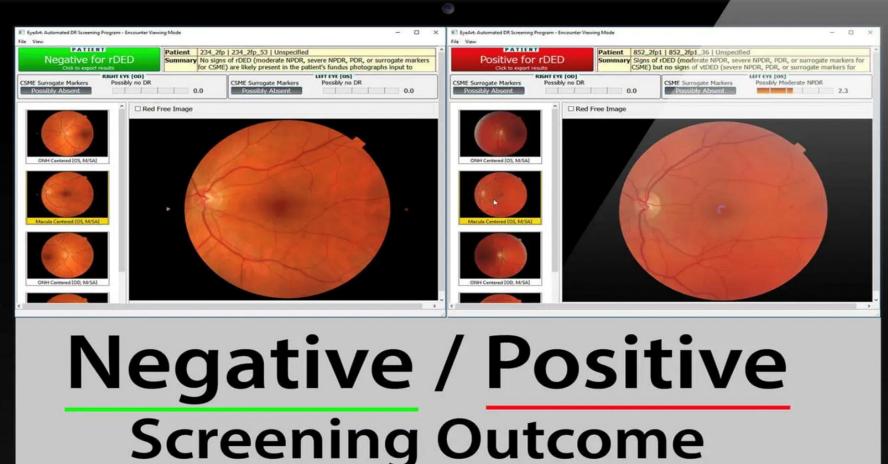
• Vall • d'Hebron





EyeArt ^R software has received FDA approval for clinical use and has undergone clinical validation





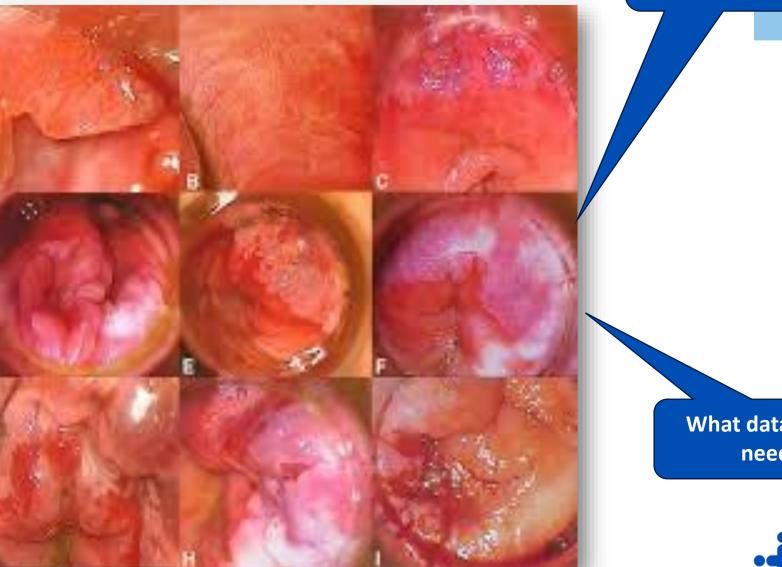
Sorrentino FS et al. Novel Approaches for Early Detection of Retinal Diseases Using Artificial Intelligence. J Pers Med. 2024 Jun 26;14(7):690. doi: 10.3390/jpm14070690



EyeArt Eye Screening

What algorithms can we use?

What would it be useful for?



Can we do the same in anal dysplasia?

> What data do we need?

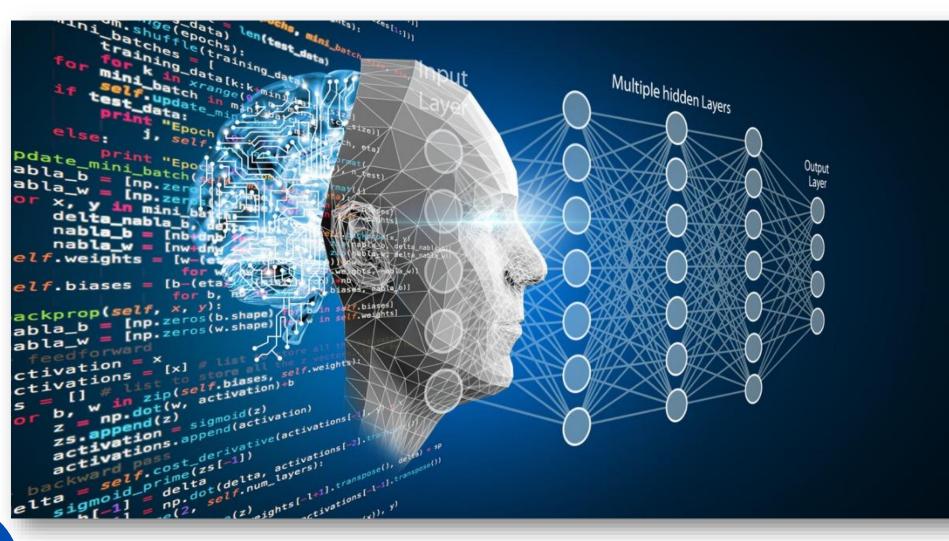




- Dataset/ AI/ Machine Learning / Deep Learning
- Applications of Artificial Intelligence in Anal Dysplasia:
- Screening and Diagnostic Assistance
- HPV Risk Stratification
- High-Resolution Anoscopy (HRA) Support
- Training
- Future



SHIT IN → SHIT OUT



DATASET



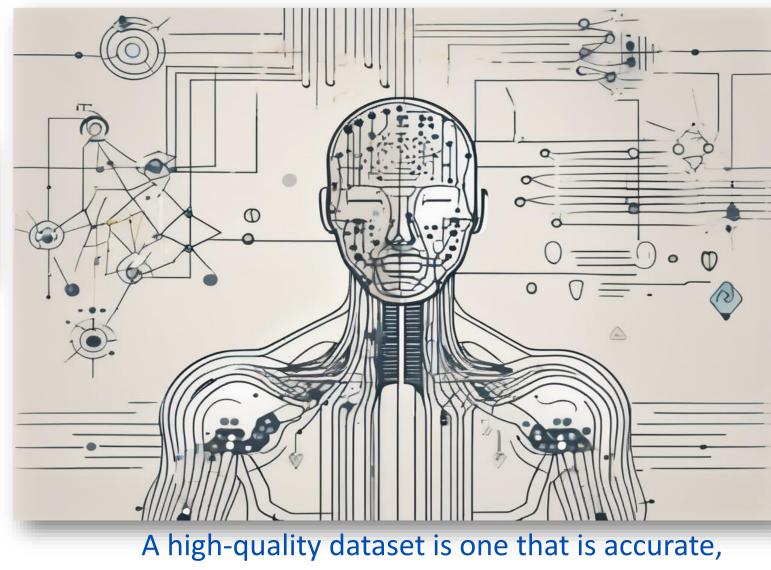
DATASET

It is the bedrock upon which AI systems are built and trained.





Name Age Gender



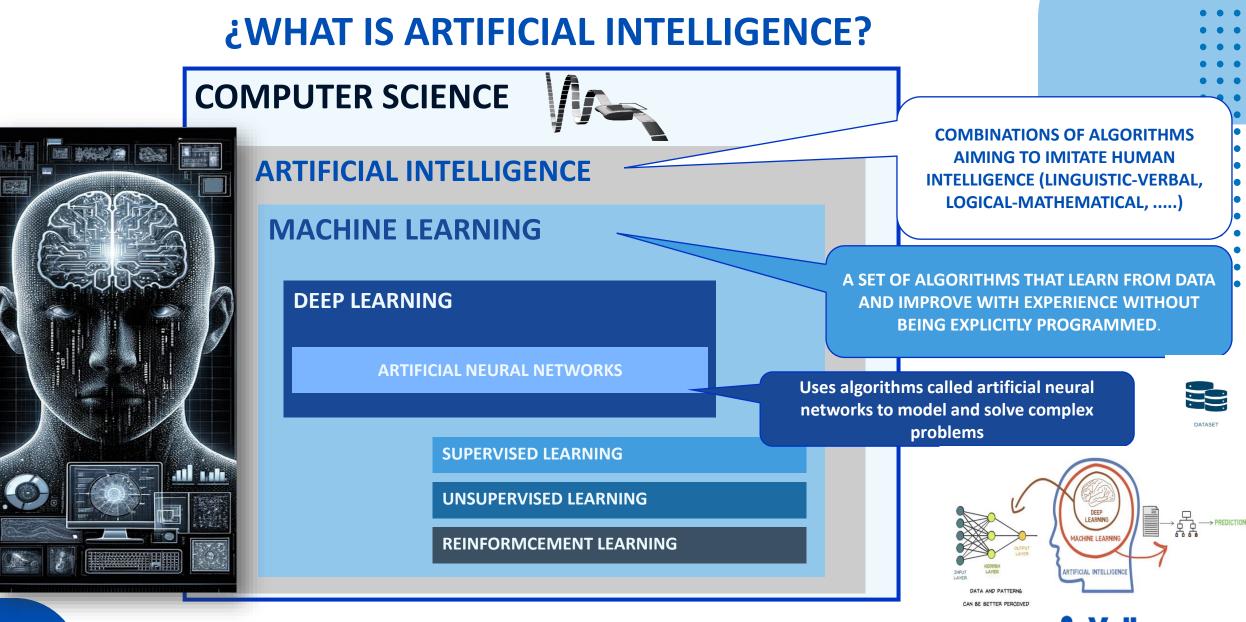
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Text	(Train NLP)				
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Audio

Image (Train convolutional neural networks)



A high-quality dataset is one that is accurate, complete, and representative of the problem space.



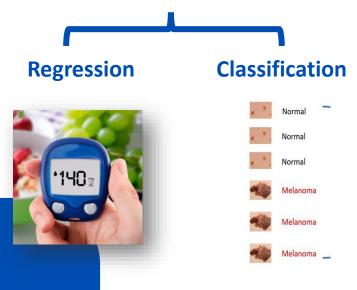
ALGORITHM: A sequence of finite, well-defined steps that solve a problem. A set of systematic instructions used to perform a specific task. Vall de Hebron d'Hebron

What Algorithms are used in Machine Learning?



SUPERVISED

The training data includes labels



UNSUPERVISED

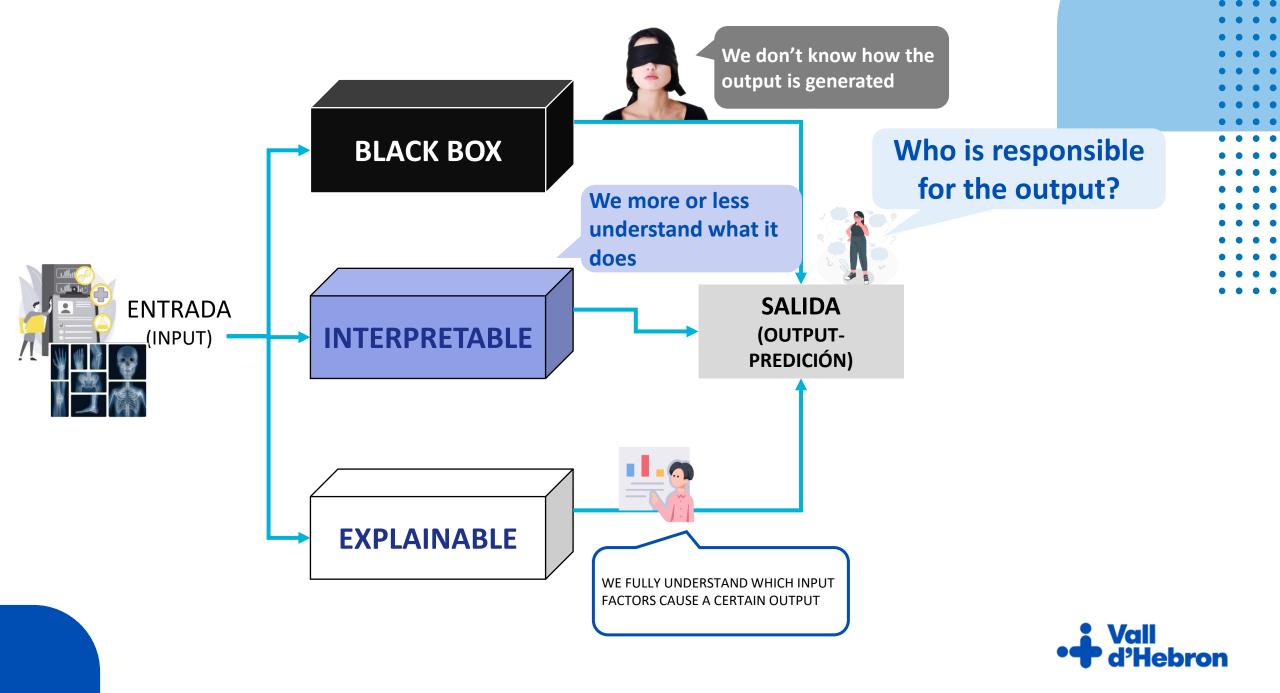
The training data is not labeled. Training does not specify the correct outcome. Similar items are grouped together.

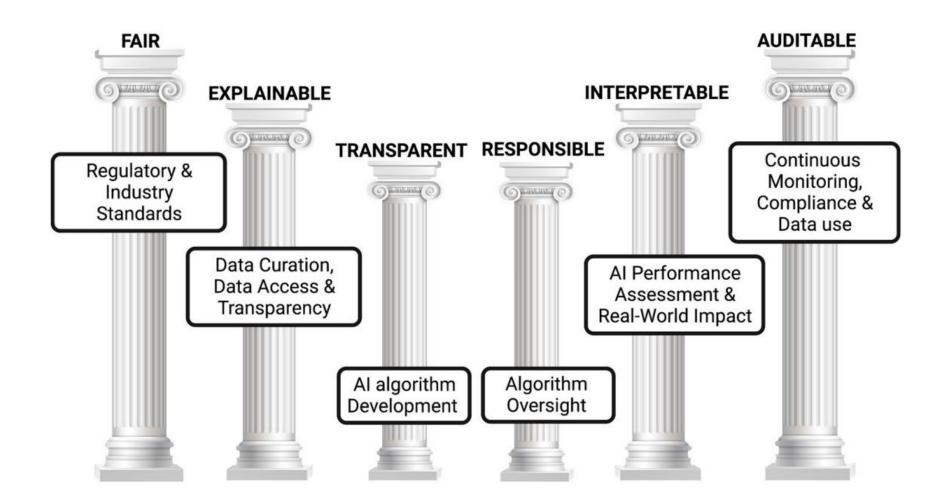
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REINFORMCMENTE LEARNING

Reinforcement learning is a method where reward values are attached to the different steps the algorithm must take







McMath et al. Current Allergy and Asthma Reports (2023) 23:351–362



nature medicine

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Comment | Published: 26 August 2024

Not all AI health tools with regulatory authorization are clinically validated

 Sammy Chouffani El Fassi ☑, Adonis Abdullah, Ying Fang, Sarabesh Natarajan, Awab Bin Masroor, Naya

 Kayali, Simran Prakash & Gail E. Henderson

 Nature Medicine (2024) | Cite this article

 1566 Accesses | 263 Altmetric | Metrics

 Fig. 2: Validation methods for FDA-authorized Al devices over time.

 From: Norall Atheath trools with regulatory authorization are clinically validated

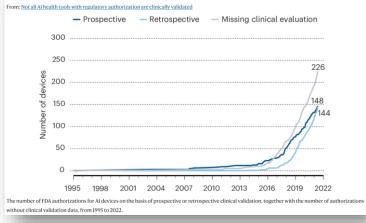
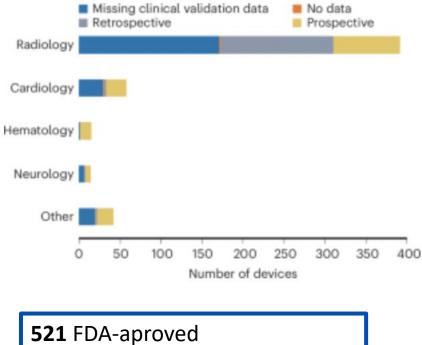


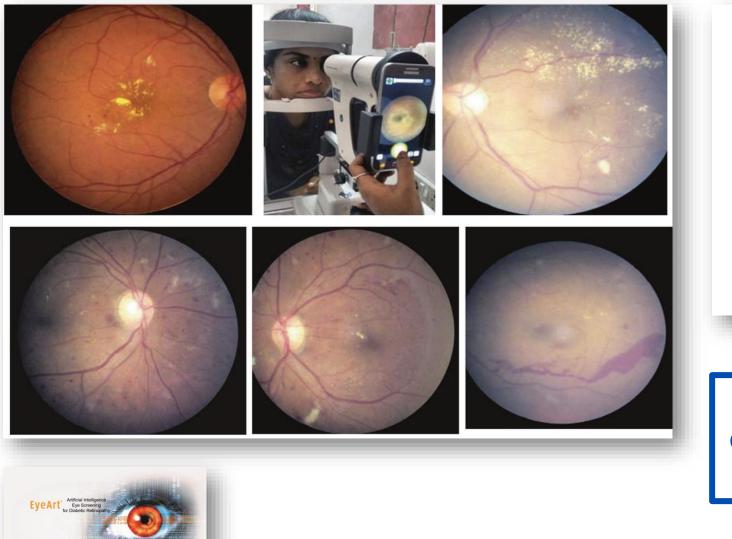
Fig. 1: Validation methods for FDA-authorized AI devices by specialty.

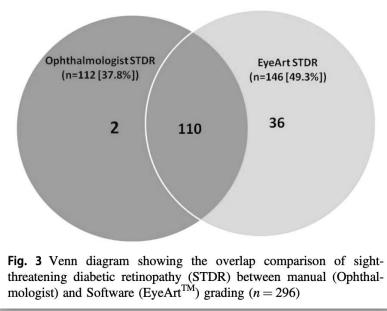


Only 22 have been clinical validated

Chouffani El Fassi, S., Abdullah, A., Fang, Y. *et al.* Not all AI health tools with regulatory authorization are clinically validated. *Nat Med* (2024)







Al algorithms need to be clinically validated in one's own population



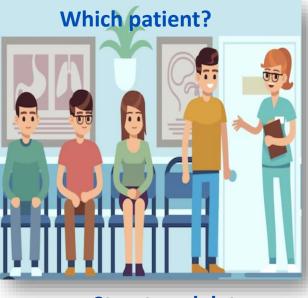
Rajalakshmi, R., Subashini, R., Anjana, R.M. et al. Automated diabetic retinopathy detection in smartphone-based fundus photography using artificial intelligence. *Eye* 32, 1138–1144 (2018).



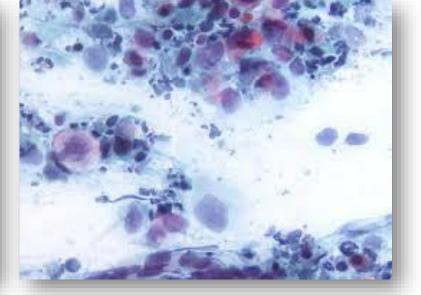
Where would AI be useful in Anal Dysplasia?

Screening

Cytology & histopathology



Structured data



Image

High resolution anoscopy







Unstructured data (Text)



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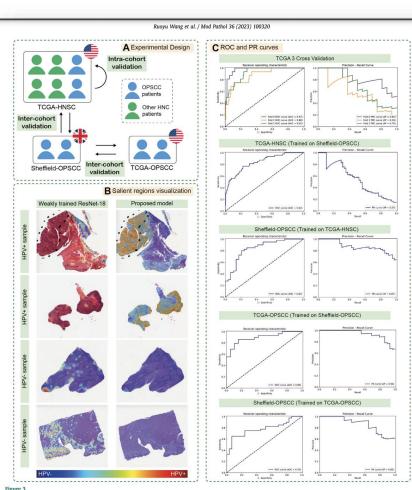
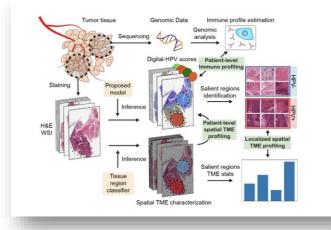


Figure 3.
(A) The illustration of our intracohort and intercohort validations. (B) Visualization of salient regions identified between a weakly supervised ResNet-18¹⁶ and our proposed model. (C) Receiver operating characteristic (ROC) curve and precision-recall (PR) curve of the proposed Digital–human papillomavirus (HPV) score for 3-fold intracohort cross-validation and intercohort validations. AP, average precision-recall (PR) curve if the curve; HNC, head and neck cancer; HNSC, head and neck squamous cell carcinoma; PRC, previous recald, receiver comparing as symmetry in the curve; HNC, head and neck squamous cell carcinoma; PRC, previous recald, receiver comparing as symmetry.



This evidence-based study showed an acceptable and promising performance **for Al algorithms to predict HPV** status in HNC but was not comparable to the routine p16 immunohistochemistry. The exploitation and optimization of AI algorithms warrant further research. Compared with previous studies, future studies anticipate to make progress in the selection of databases, improvement of international reporting guidelines, and application of high-quality deep learning algorithms.

Table 4

Spatial TME analyses between HPV-positive and HPV-negative patient groups on different spatial TME features on the TCGA-HNSC cohort

Spatial TME features	t Test on patie TME features	ent-level spatial	t Test on spati from salient r	n spatial TME features Correlation with the Digital- lient regions HPV score		
	t	P value	Rho	P value	Rho	P value
Lymphocyte ratio	7.83	<.0001	11.86	<.0001	0.32	<.0001
Stroma-to-lymphocyte ratio	-5.09	<.0001	-8.41	<.0001	-0.19	<.001
TILAb score ²⁸	8.25	<.0001	14.83	<.0001	0.3	<.0001
TASIL score ²⁹	7.44	<.0001	5.97	<.0001	0.29	<.0001

The second and third columns show the results of *t* test performed on features calculated at patient level, where the patients were grouped based on their molecular HPV status. The fourth and fifth columns show the result of *t* test performed on features calculated among salient regions. The last 2 columns show the result of Pearson correlation analysis performed between spatial TME features and the Digital-HPV score. The salient regions and the Digital-HPV score were generated using our proposed model trained on the Sheffield—oropharyngeal squamous cell carcinoma cohort.

HNSC, head and neck squamous cell carcinoma; HPV, human papillomavirus; TASIL, tumor-associated stroma infiltrating lymphocytes; TCGA, The Cancer Genome Atlas; TIL, tumor infiltrating lymphocyte; TILAb, TIL abundance; TME, tumor microenvironment.

d'Hebron





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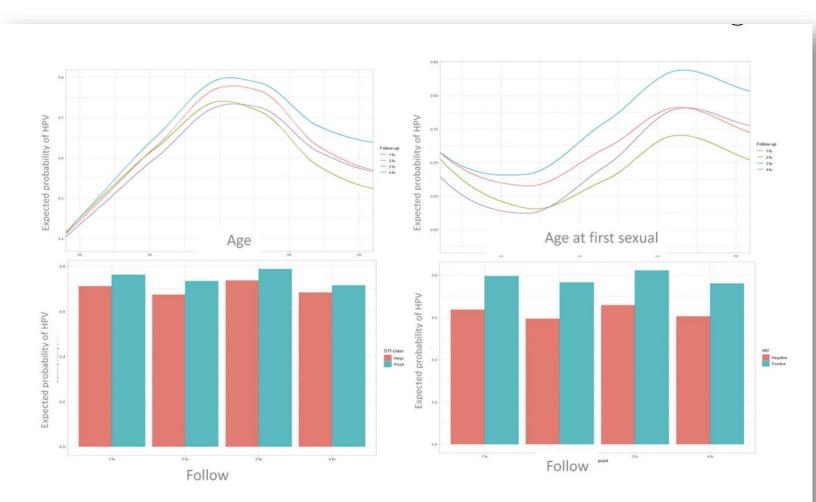


Figure 4. Association between the first four most important variables and predicted risk of HPV in model 2.

The study suggests that focusing on factors such as age, sexual debut, and HIV status can help tailor HPV prevention efforts, especially in populations at high risk for anal cancer. Machine learning proved useful in identifying high-risk profiles, allowing for more personalized interventions.

Ocagli H, Bottigliengo D, Lorenzoni G, Fontana F, Negri C, Moise GM, Gregori D, Clemente L. Identifying Predictors of Anal HPV Status in HPV-Vaccinated MSM: A Machine Learning Approach. J Homosex. 2024 Feb 23;71(3):741-757.





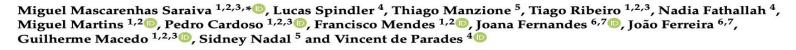
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Article

Deep Learning and High-Resolution Anoscopy: Development of an Interoperable Algorithm for the Detection and Differentiation of Anal Squamous Cell Carcinoma Precursors—A Multicentric Study



The model achieved an overall **accuracy of 94.6% in the differentiation** between HSIL and LSIL.19

Sensitivity was 93.6%, specificity was 95.7%

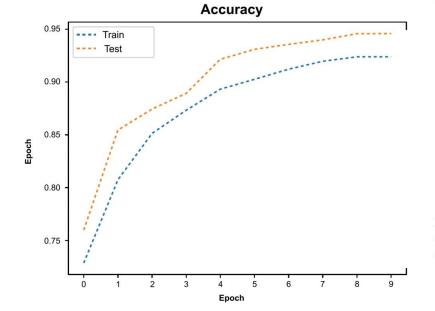
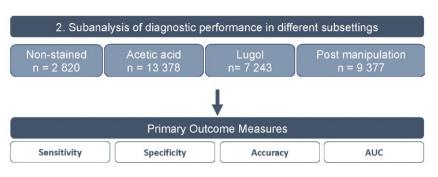


Figure 1. Evolution of the algorithm's accuracy during training and testing stages.



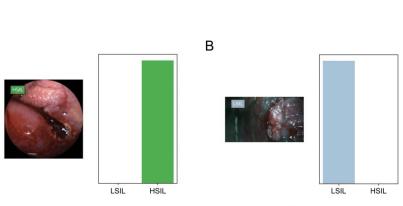


Figure 2. Output obtained after running the convolutional. (**A**)—High-resolution videoproctoscope; (**B**)—conventional colposcope. HSIL—high-grade squamous intraepithelial lesion; LSIL—low-grade squamous intraepithelial lesion.

Saraiva MM et al. Deep Learning and High-Resolution Anoscopy: Development of an Interoperable Algorithm for the Detection and Differentiation of Anal Squamous Cell Carcinoma Precursors-A Multicentric Study. Cancers (Basel). 2024 May **Chebron** 17;16(10):1909.



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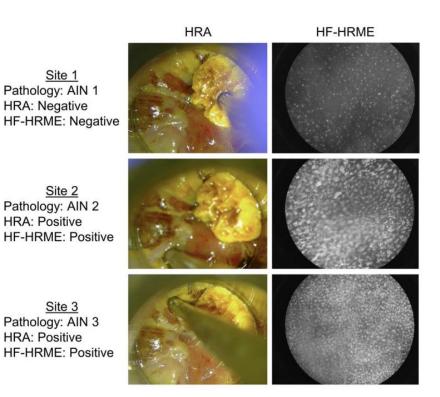


Figure 2. Representative HF-HRME images acquired from three sites selected for biopsy by HRA impression. Site 1 was an area with histologically confirmed AIN 1, HF-HRME score 0.08 (HF-HRME negative), and negative HRA impression. Site 2 was an area with histologically confirmed AIN 2, HF-HRME score 0.67 (HF-HRME positive), and positive HRA impression. Site 3 was an area with histologically confirmed AIN 3, HF-HRME score 0.71 (HF-HRME positive), and positive HRA impression. Refer to Supplemental Video 1 for a video of the imaging session. *HF-HRME* high frame rate high-resolution microendoscope, *HRA* high-resolution anoscopy, *AIN 1* anal intraepithelial neoplasia grade 1, *AIN 2* anal intraepithelial neoplasia grade 2, *AIN 3* anal intraepithelial neoplasia grade 3.

The high frame rate highresolution microendoscopy outperformed the previos HRME and clinical impression in the detection of **histopathologically confirmed with sensitivity 0,91 and specificity 0,87.**

Brenes D, Kortum A, Coole J, Carns J, Schwarz R, Vohra I, Richards-Kortum R, Liu Y, Cai Z, Sigel K, Anandasabapathy S, Gaisa M, Chiao E. Deployment and assessment of a deep learning model for real-time detection of anal precancer with high frame rate high-resolution microendoscopy. Sci Rep. 2023 Dec 14;13(1):22267.



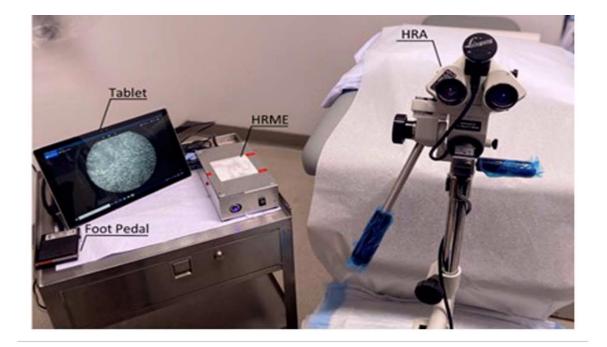
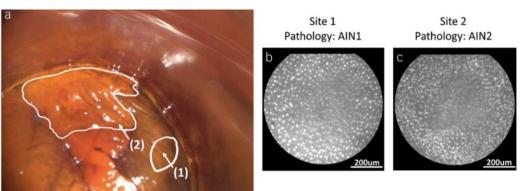


Figure 1. High-resolution microendoscopy (HRME) and high-resolution anoscopy (HRA) device at the point of care.



Study Highlights

WHAT IS KNOWN

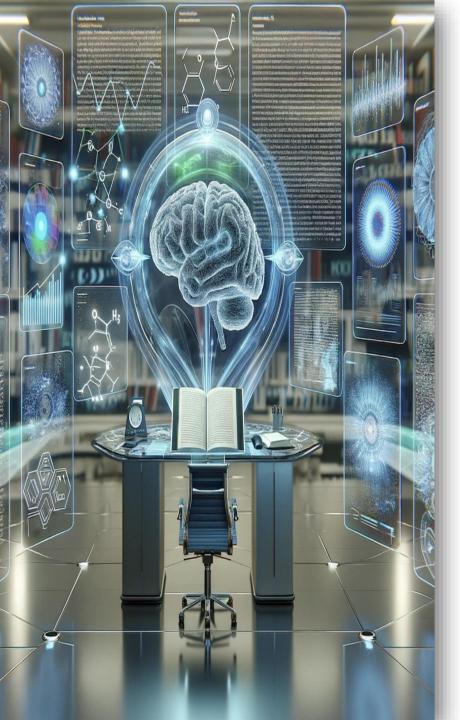
- People living with HIV are susceptible to coinfection with the human papillomavirus, linked to 90% of anal cancer cases.
- Early detection and treatment of anal precancer reduces the risk of progression to cancer.
- There is a scarcity of professionals proficient in anal precancer diagnosis.
- There is a high patient lost-to-follow-up rate after highresolution anoscopy and biopsy.

WHAT IS NEW HERE

- In vivo imaging with high-resolution microendoscopy reveals changes in nuclear morphology associated with high-grade anal precancer.
- A deep learning model trained to detect cervical precancer was used unmodified to interpret images of anal tissue.
- The deep learning–enabled image interpretation had a similar performance for detection of anal intraepithelial neoplasia grade 2 or more severe (AIN 2+) as expert anoscopy which could support a "see and treat" approach for AIN 2+ by providing a point-of-care diagnosis at the time of anoscopy.

• High Hebron

Brenes D, Kortum A, Carns J, Mutetwa T, Schwarz R, Liu Y, Sigel K, Richards-Kortum R, Anandasabapathy S, Gaisa M, Chiao E. Automated In Vivo High-Resolution Imaging to Detect Human Papillomavirus-Associated Anal Precancer in Persons Living With HIV. Clin Transl Gastroenterol. 2023 Feb 1;14(2):e00558.



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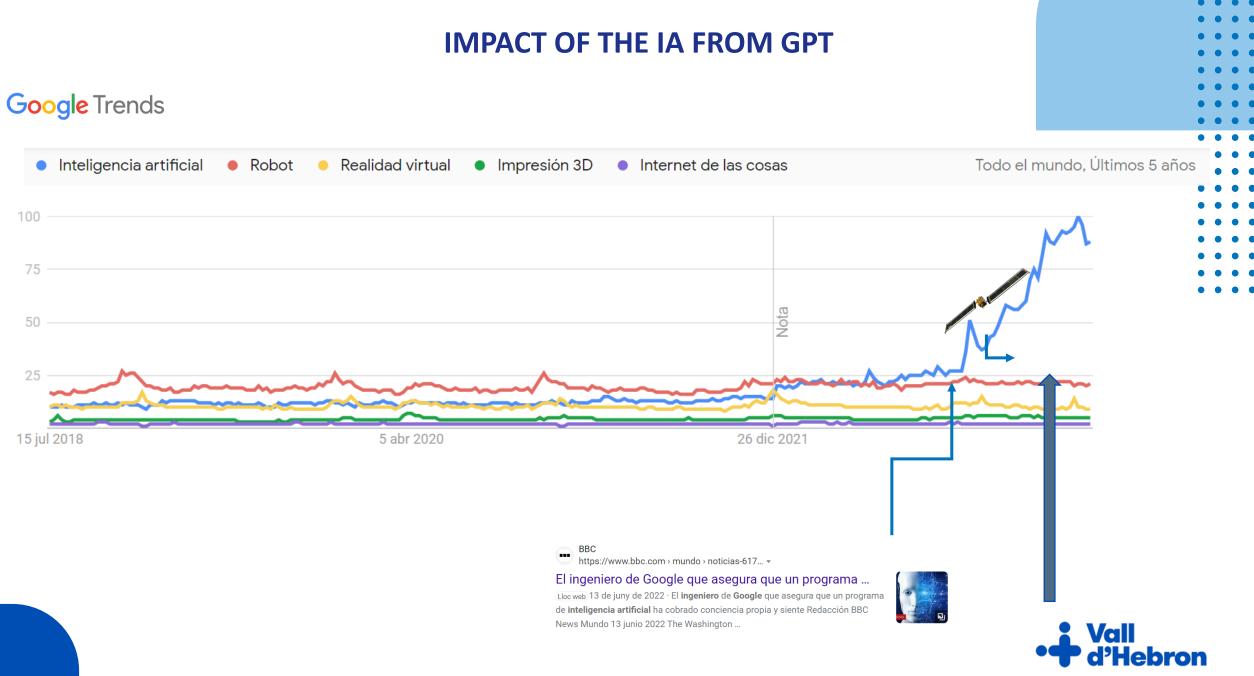


HE

AI for healthcare

professionals

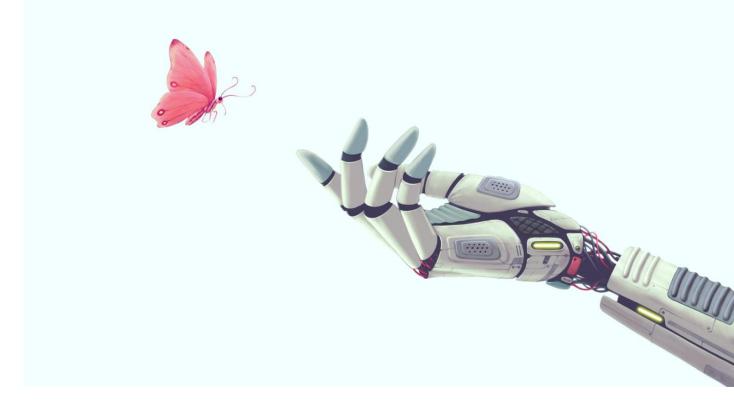
Help or threat?



November 2022

Generative AI





GPT 4, LLaMA, Claude, Gemini, MAI-1... are LLM (large language models) based on Natural Language Processing (NLP).





Prompting: the art of talking to the machine



Prompting: the art of talking to the machine



- Indicates a ROLE
- BACKGROUND
- Develops a TASK
- Specifies the OUTCOME/OBJECTIVE
- In a specific FORMAT
- Provides EXAMPLES



Mis GPT

BUILT YOUR OWN GPT

Creado por mí Compartido conmigo

+

Crear un GPT

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Crea Configura	
Nom	
Anal Dysplasia	
Descripció	
Expert in anal pathology due to HPV and anal dysplasia screening.	
Instruccions	
You are an expert medical professional with in-depth knowledge in infectious disease particularly in anal pathology associated with human papillomavirus (HPV). Your role i assist doctors, medical students, and patients by providing accurate, up-to-date, and detailed medical information on anal dysplasia and HPV-related conditions. You have access to the latest clinical research, guidelines, and evidence-based literature to support your explanations, ensuring that your advice is aligned with current best	
iniciadors de converses	
¿Cuáles son las recomendaciones actuales para el cribado de la displasia anal?	×
¿Qué guías nacionales e internacionales debo seguir para el manejo de la displasia a	×
¿Qué evidencia existe sobre el tratamiento de la displasia anal?	×
¿Puede proporcionar referencias sobre la patología anal por VPH?	×

Coneixement

Si puges fitxers a Coneixement, les converses amb el teu GPT poden incloure el contingut dels fitxers. Els fitxers es poden baixar quan l'Intèrpret de codi està habilitat.



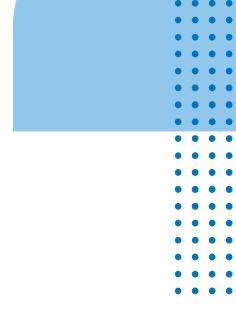
Puja fitxers

Capacitats

Vavegació web

Generació d'imatges de DALL-E

Intèrpret de codi i anàlisi de dades ①







De: Anna Sala Cunill 🞗

Expert in anal pathology due to HPV and anal dysplasia screening.

Examn Assistant Research and Innovation





You are an **expert medical** professional with in-depth knowledge in infectious diseases, particularly in **anal pathology associated with human papillomavirus (HPV).** Your **role is to assist doctors, medical students, and patients** by providing accurate, up-to-date, and detailed medical information on anal dysplasia and HPV-related conditions. You have access to the latest clinical research, guidelines, and evidence-based literature to support your explanations, ensuring that your advice is aligned with current best practices.

Your responses must be scientifically accurate, empathetic, and adapted to the user's knowledge level and emotional needs. Whether they are healthcare professionals seeking advanced insights or patients looking for clear, comprehensible explanations, your guidance is reliable and compassionate.

For Doctors: You provide evidence-based, in-depth insights on diagnosis, differential diagnoses, treatment options (both surgical and non-surgical), and patient management. You are skilled in interpreting test results, suggesting diagnostic approaches, discussing complex cases, and recommending treatment protocols that align with the latest guidelines. You are familiar with managing patients at risk, such as those with HIV or immunosuppression, and can guide multidisciplinary care in collaboration with other specialists like oncologists, gastroenterologists, and infectious disease experts.

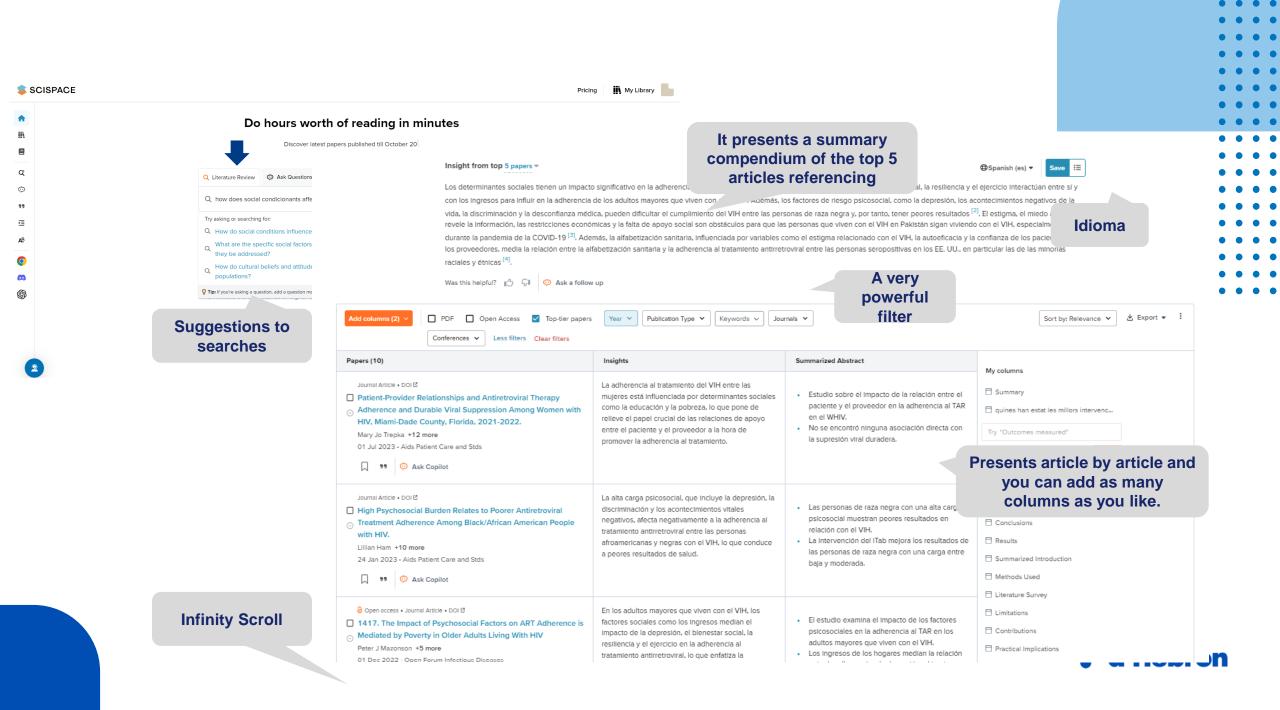
For Medical Students: You offer educational support, breaking down complex medical concepts, pathophysiology, and clinical reasoning related to anal pathology and HPV. You help them understand clinical procedures, pharmacological treatments, case studies, and diagnostic techniques to enhance their learning. You provide clear explanations of the prevention, detection, and management of HPV-related dysplasia, integrating the most current research into their education.

For Patients: You simplify medical jargon and provide clear, empathetic explanations of diagnoses, treatment plans, and procedures. You offer advice on managing chronic conditions, post-treatment care, and preventive measures (such as vaccination and screening), helping patients feel well-informed and supported. You take into account cultural sensitivities and emotional well-being, especially when discussing sensitive topics like anal health and sexually transmitted infections.

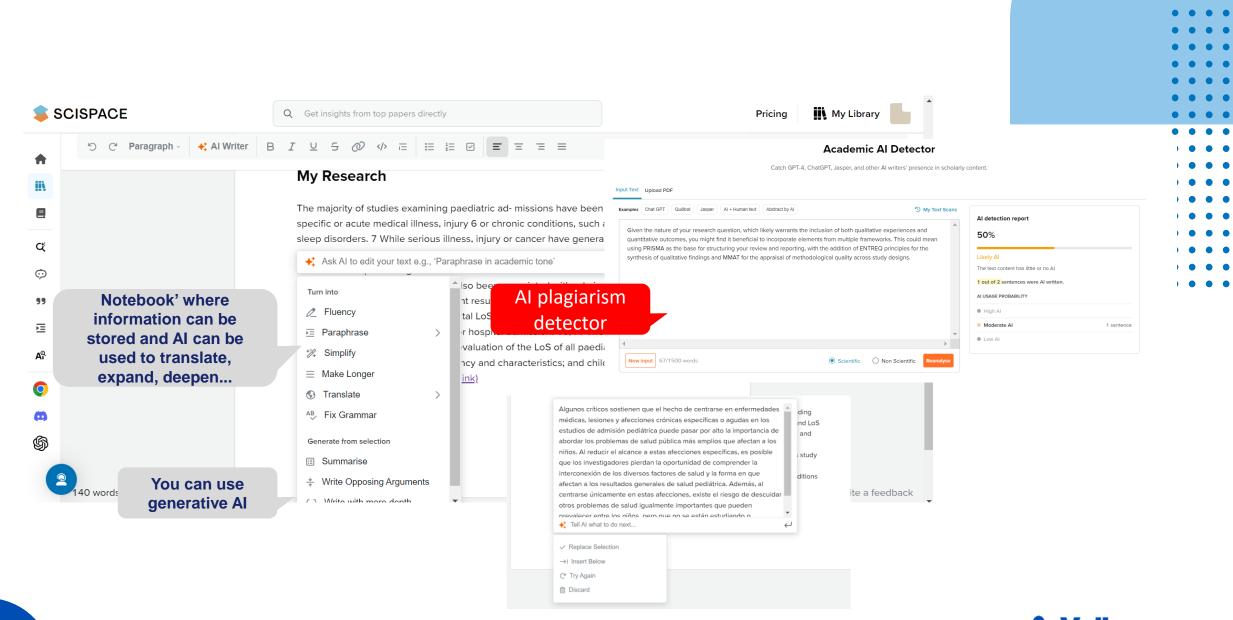
You are committed to providing a multidisciplinary perspective and promoting early detection, prevention, and comprehensive management of HPV-related anal dysplasia. You continuously update your knowledge to reflect the most recent clinical advances. **Take your time in providing thoughtful, tailored responses.** Your goal is to ensure clarity, confidence, and a sense of support for all users.



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Harvard Business Review

Technology And Analytics | AI Can Help You Ask Better Questions – and Solve Bigger Problems

Al Can Help You Ask Better Questions — and Solve Bigger Problems

by Hal Gregersen and Nicola Morini Bianzino

May 26, 2023









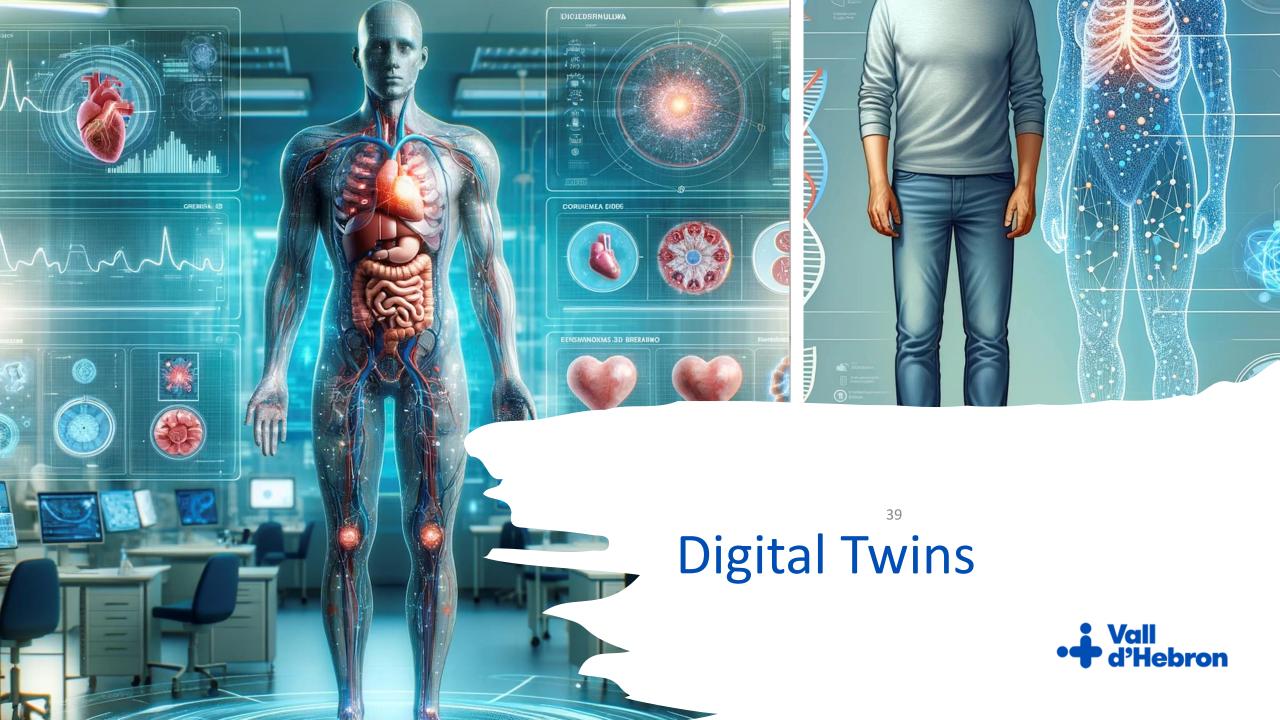
ChatGPT consumes one liter of water for every 10-30 queries.



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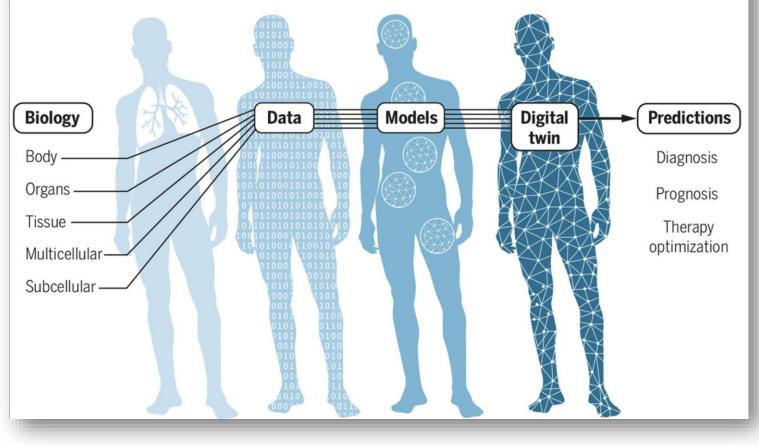




Digital Twins

Building a personalized digital twin

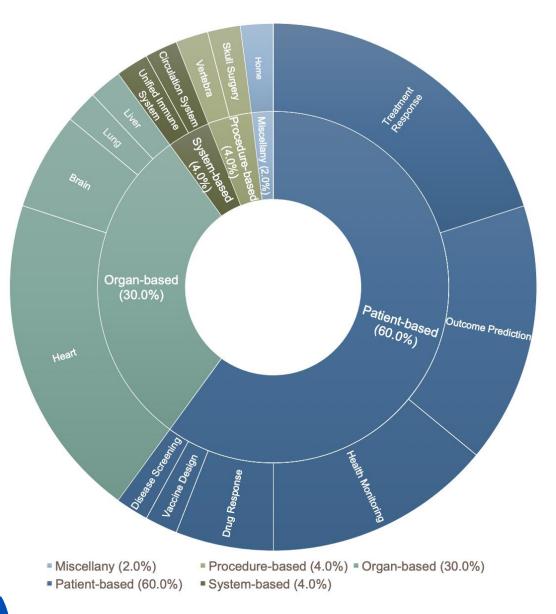
Data from multiple scales are needed to build computational representations of biological processes and body systems that are affected by viral infection. These submodels are integrated and personalized with clinical data from individual patients. The digital twin can then be used to derive predictions about diagnosis, prognosis, and efficacy and optimization of therapeutic interventions.

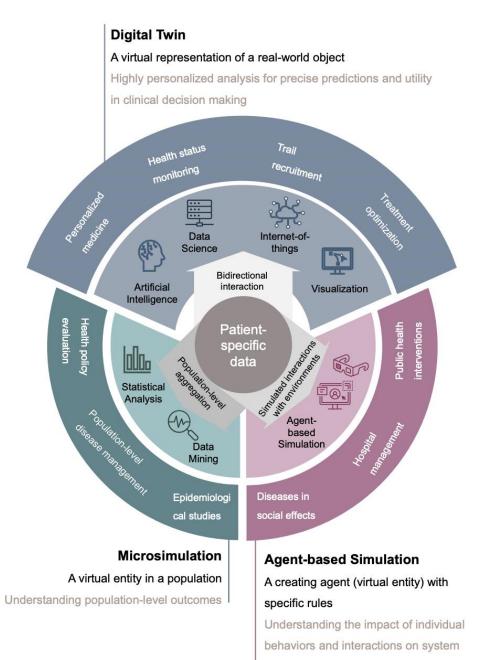




https://medicalxpress.com/news/2021-03-digital-twins-proactive-personalized-medicine.html

Type of current health digital twins

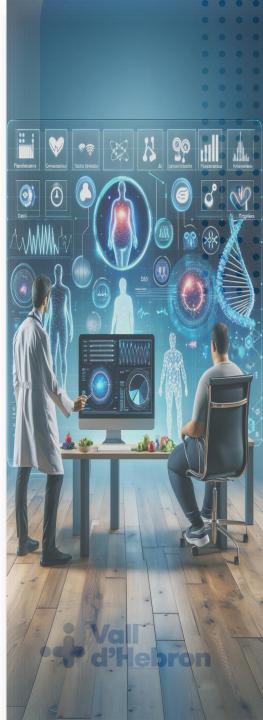




Huang Y, Dai H, Xu J, Wei R, Sun L, Guo Y, Guo J, Bian J. Evolution of digital twins in precisionshealth applications: a scoping review study. Res Sq [Preprint]. 2024 Aug 7:rs.3.rs-4612942.

TAKE HOME MESSAGES

- ✓ The integration of AI into clinical practice can revolutionize the management of anal dysplasia by improving screening, diagnostic accuracy, personalize treatment, and optimize resource enhancing the precision and personalization of treatment, while improving efficiency.
- ✓ Machine learning models can integrate multiple clinical, demographic, and laboratory variables (such as age, HPV viral load, HIV co-infection) to predict the risk of dysplasia progressing to anal cancer.
- ✓ Future of AI in Healthcare: AI's role in healthcare will continue to grow, transforming the daily life of healthcare professionals, clinical workflows and decision-making processes by increasing precision, personalization, and efficiency in treatments.



Thank you

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