USE CASE Automatic identification of orthopaedic implants using AI



VINEET BATTA Senior Clinical Fellow Luton & Dunstable University Hospital NHS Trust













Automated Orthopaedic Implant Identification

Dr. Vineet Batta MBBS, MS(Orth), Dip SEM, FRCS (Orth), MD (BioMed Eng.) UCL Orthopaedic & Trauma Surgeon Luton & Dunstable University NHS Hospital, Luton, UK

Research Associate Royal National Orthopaedic Hospital, London, UK











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2023

Disclosures

- No Industry affiliations
- CEO of Unicorn Medics , UK Ltd
- Fellow Royal College of Surgeons , England
- Member British (BOA) & Indian (IOA) Orthopaedic Association
- Grant received from UKRI : Innovation



Teamwork : Grateful to all my Collaborators



Imperial College London







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Luton & Dunstable University Hospital









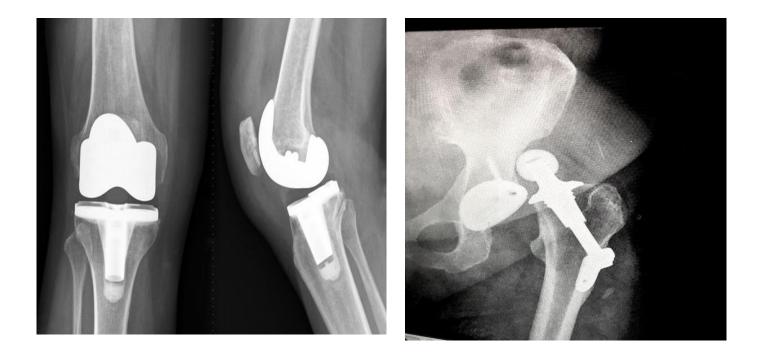
600 Bed Teaching Hospital

25 - 30 % Immigrants

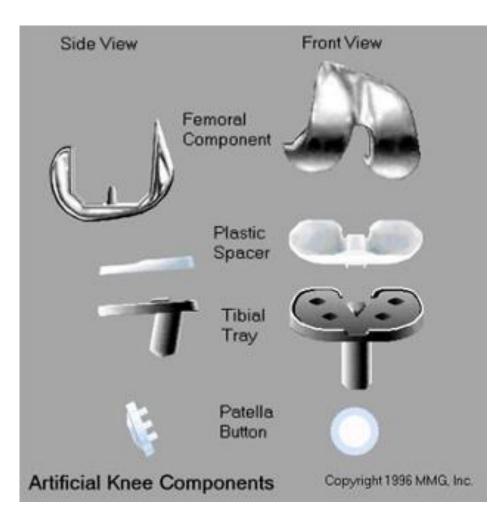
10 % patients who had their Primary Joint Arthroplasty outside UK



Not able to recognize the Manufacturer (make & Mode) type of Knee or Hip Replacement (Arthroplasty)









Implant Identification: Key step of pre-op planning

Gold standard of Implant Identification : Barcode labels





Orthopaedic Implant (OI) ID



 \bigcirc \bigcirc \checkmark

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implantid New Submission! "Thinking DJO-CLP stem, but can't tell on the cup. Any input would be greatly appreciated!!"

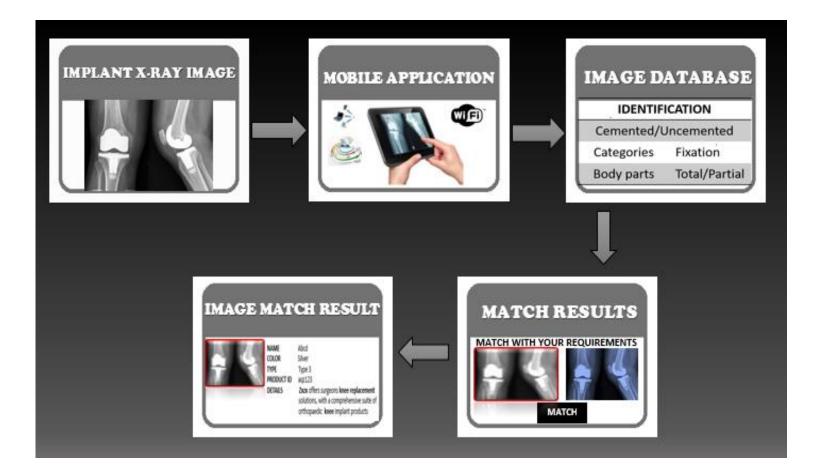
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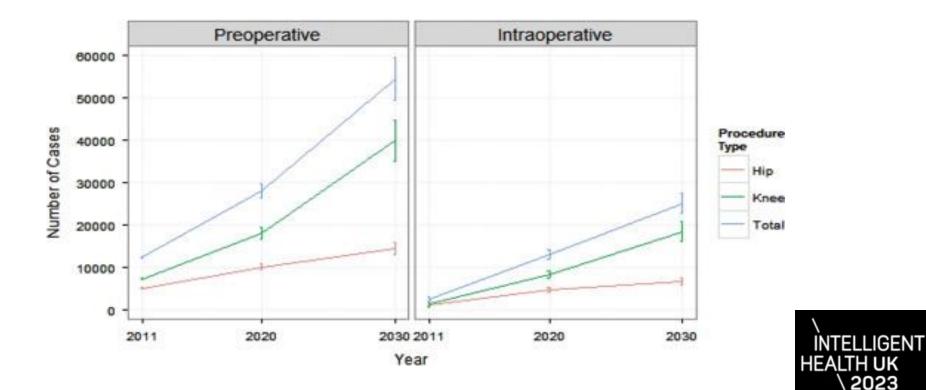








National projections of time, cost and failure in implantable device identification: Consideration of unique device identification use Healthc (Amst) 2015. N Wilson et al .



Significant time, cost and inability to identify failed implants

- 87% of surgeons reported having this problem
- Median surgeon identification time was 30 min.
- 10% of implants could not be identified pre-operatively.
- 2% could not be identified intra-operatively.



www. whichorthopaedicimplant.com



Home About Identify Implants Help Education

IIIMPRO – Implant Identification

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Welcome

WhichOrthopaedicImplant.com is a searchable orthopaedic implant database for identification of orthopaedic devices. The website has been established as a *free reference*.

We are working to collect a comprehensive orthopaedic implant database of implant radiographs to assist orthopaedic surgeons in identification of orthopaedic devices. The correct identification of orthopaedic devices is an important element of pre-operative planning which should facilitate implant extraction during revision arthroplasty.

If you have a revision arthroplasty case where the patient's implant is unfamiliar, then use our implant search function to limit the possibilities. Our database of implant radiographs is categorised by *shape characteristics* which can be determined from the implant radiograph, without prior knowledge of the implant:

- Is the stem tapered or rounded ?
- Does it have a collar ?
- Howmany holes or insertion slots ?
- Convex or concave curvature ?
- 🔹 Etc...

By answering some of these questions, you can filter the implant radiographs in our database down to a smaller sample to compare against your patient's implant radiograph. Our tutorial pages provide further explanation.

Alternatively if you know the orthopaedic implant in question then you can access specific implant posts which contain technical information and advice for planning revision arthroplasty.

Bear with us: This site has just been launched but we hope to increase the number of orthopaedic devices in the orthopaedic implant database, thereby offering progressive functionality. If you can see an opportunity to assist us in improving our database of implant radiographs then please do so.





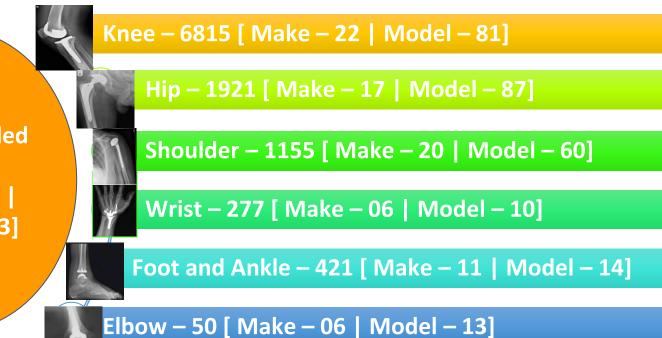
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Our Database

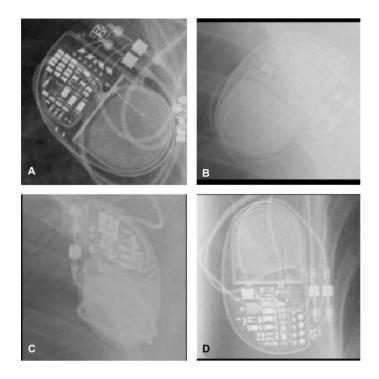
Total Labelled 13349 [Make -93 | Model -353]





Cardiac Rhythm Device Identification Using Neural Networks

Department of Cardiology, National Heart and Lung Institute, Imperial College London,^bDepartment of Cardiology, UCL ^cDepartment of Computing, Imperial College UK







AI IN BRIE

Radiology: Artificial Intelligence

Automated Identification of Orthopedic Implants on Radiographs Using Deep Learning

Ravi Patel, MB, BChir, MA (Cantab) • Elizabeth H. E. Thong, MBBS, BSc • Vineet Batta, FRCS(Orth), MBBS • Anil Anthony Bharath, PhD, BEng, FIET • Darrel Francis, FRCP, MD, MRCP, MB, BChir, MA (Cantab) • James Howard, MRCP, MB, BChir, MA (Cantab)

From the Faculty of Medicine, Imperial College Healthcare NHS Trust, London, England (R.P., E.H.E.T., D.F., J.H.); Department of Bioengineering, Imperial College London, Level 2, Faculty Building, South Kensington Campus, London SW7 2AZ, England (R.P., A.A.B.); and Department of Orthopaedic Surgery, Luton and Dunstable University Hospital, Luton, England (V.B.). Received August 1, 2020; revision requested September 25; revision received February 21; accepted March 1. Address correspondence to R.P. (e-mail: sevi-patel@ulectors.org.uk).

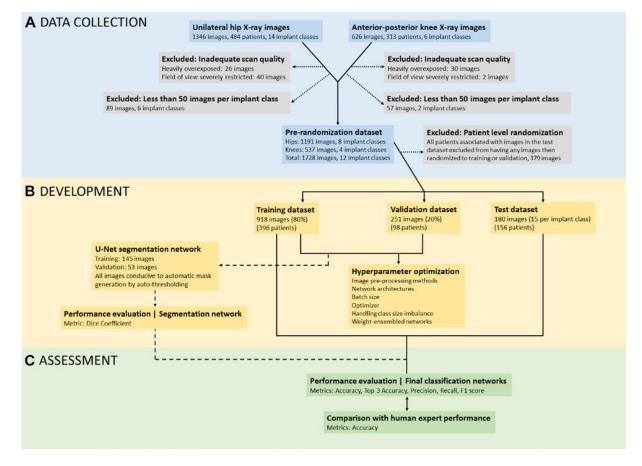
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Conflicts of interest are listed at the end of this article.

Radiology: Artificial Intelligence 2021; 3(4):e200183 * https://doi.org/10.1148/ryai.2021200183 * Content codes: Al MK

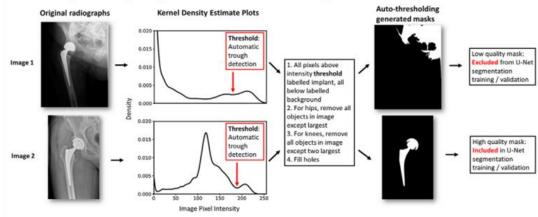


Study Structure



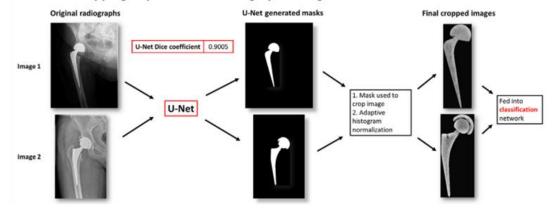


Automated cropping of OI radiographs



A Auto-generating image masks to train a U-Net segmentation network

B Auto-cropping implants from radiographs using the trained U-Net



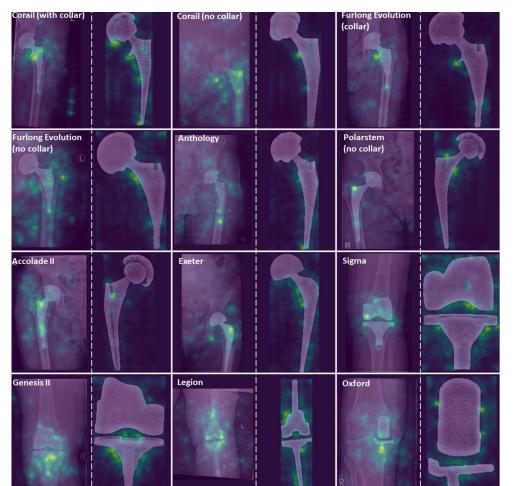


Distribution of Implant model design

Joint	Manufacturer	Model	Number	Higher quality test data example	Lower quality test data example
Нір	Depuy-Synthes -	Corail (with collar)	189		7
		Corail (no collar)	216	1	A
	JRI Orthopaedics	Furlong Evolution (with collar)	95	The second	
		Furlong Evolution (no collar)	65	7	r
	Smith & Nephew	Anthology	156		
		Polarstem (no collar)	113		
	Stryker	Accolade II	86	r	2
		Exeter	271	7	1
Knee	Depuy-Synthes	Sigma	156	-	÷.
	Smith & Nephew	Genesis II	206	-	
		Legion	74		
	Zimmer- Biomet	Oxford	101		



Saliency maps of EfficientNet(left) and U-Net-EfficientNet(right)



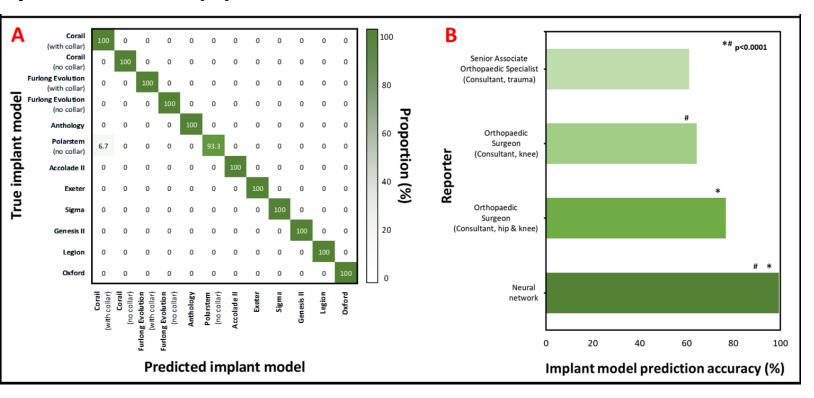


Performance evaluation of final classification networks

Structure (see Fig. 3)	Network architectures	Trainable parameters (millions)	Number of training epochs	Accuracy	Top 3 Accuracy
	InceptionV3	21.8	80	95.0%	100%
	Xception	20.8	40	90.0%	97.8%
Structure 1	ResNet50V2	23.6	120	88.9%	98.3%
Single classification network on original	DenseNet121	7.0	120	88.3%	99.4%
images	InceptionResNetV2	54.3	50	87.2%	97.8%
	NASNetMobile	4.3	40	32.2%	52.8%
	MobileNetV2	2.3	40	16.7%	38.3%
Structure 2 Single classification	Unet-InceptionV3	21.8	80	97.8%	98.9%
network on segmented images	Unet-Xception	20.8	40	96.7%	98.3%
Structure 3	Unet-Xception + InceptionV3			99.4%	100%
Two 1:1 weight- ensembled classification networks with original	Unet-InceptionV3 + InceptionV3			98.3%	99.4%
and segmented inputs	Unet-Xception +			97.2%	100%



Best performing network (A) and comparison with human expert performance (B)





Dissemination

Published Manuscript:

- 1. Patel, Ravi, et al. "Automated identification of orthopedic implants on radiographs using deep learning." *Radiology: Artificial Intelligence* 3.4 (2021): e200183
- 2. Belete, Samuel C., Vineet Batta, and Holger Kunz. "Automated classification of total knee replacement prosthesis on plain film radiograph using a deep convolutional neural network." *Informatics in Medicine Unlocked* 25 (2021): 100669
- 3. R. Patil et al. "Supra-human orthopaedic implant identification in radiographs using deep learning", Imperial College Healthcare NHS Trust, Faculty of Medicine, London, UK. BOA Virtual Congress 2020.
- 4. Sukkrit Sharma, Dr. Vineet Batta, et al. "Knee Implant Identification by Fine tuning Deep Learning Models ", In press.

Forthcoming Manuscript

- "Automatic Identification of Make and Model of Ankle Implants using Artificial Intelligence" ICECCT, 2023
- 2. "Automated Identification of Make and Model of Total Wrist Replacement Implants using Deep Learning" MVML, 2023.
- Identification of knee prostheses from lateral radiographs using deep learning techniques" CIST, 2023



Orthopaedic Implant List





- Total Knee Replacement
- Unicondylar
- Bicompartmental
- Patello Femoral
- Revision Knee Replacement
- Other

300



HIP

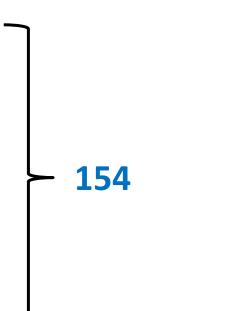
- Total Hip Replacement
- Hemi Arthroplasty
- Resurfacing
- Revision
- Bipolar
- Other

- 350



SHOULDER

- Total Shoulder Replacement
- Partial Shoulder Replacement
- Reverse Shoulder Replacement
- OTHER





FOOT AND ANKLE

- Total Ankle Replacement
- Great Toe Arthroplasty
- Revision Ankle Replacement
- Other

- 139



HAND, WRIST AND ELBOW

- Total Wrist Replacement
- Ulnar Head Replacement
- Proximal Interphalangeal Joint Replacement
- Elbow
 - Total Elbow Arthroplasty
 - Hemi Elbow Arthroplasty
 - Radiocapitellar
 - Distal Humeral
 - Ulnohumeral Distraction & Interpositional Arthroplasty
 - Olecranon Fossa Debridement
 - Radial Head Arthroplasty

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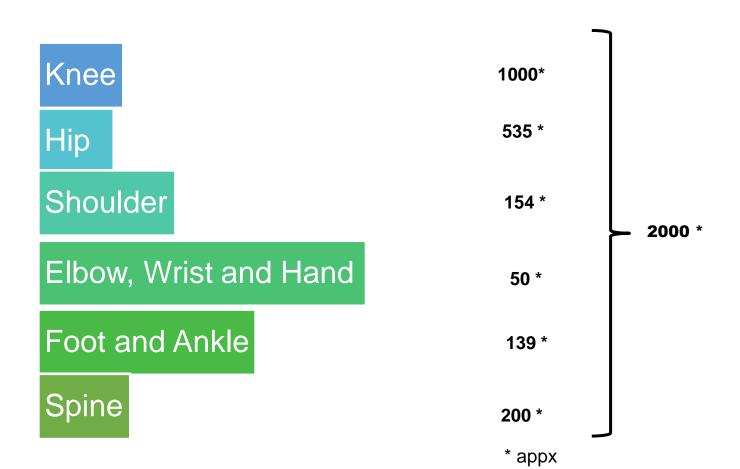
SPINE

- TOTAL DISC REPLACEMENT
- DISC NUCLEUS REPLACEMENT
- LUMBAR DISC REPLACEMENT
- OTHER

- 200



SUMMARY OF ORTHOPAEDIC LIST



IGENT

2023

HFAITH

Knee Arthroplasty





DePuy- PFC Sigma



Smith & Nephew - Genesis II



Stryker - Scorpio



DePuy - Attune



Smith & Nephew - Legion



Stryker - Duracon



Depuy - LCS



Smith & Nephew - Journey II



Zimmer - Nexgen



Meril Maxx - Freedom

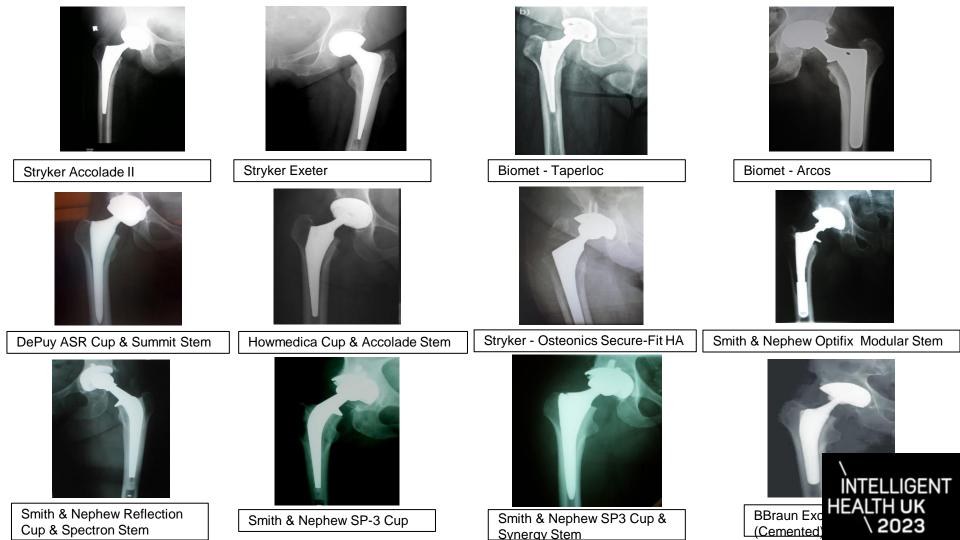


Stryker - Triathlon



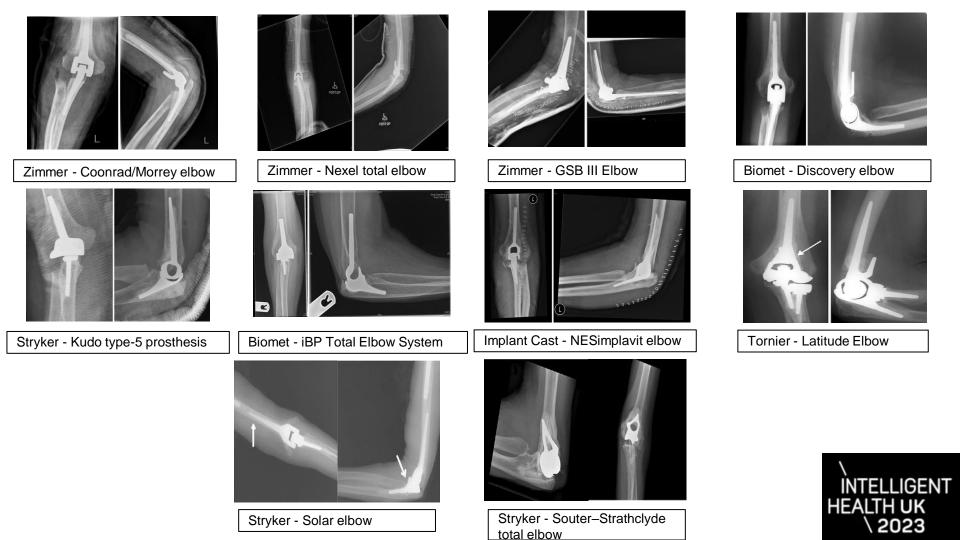
Hip Arthroplasty



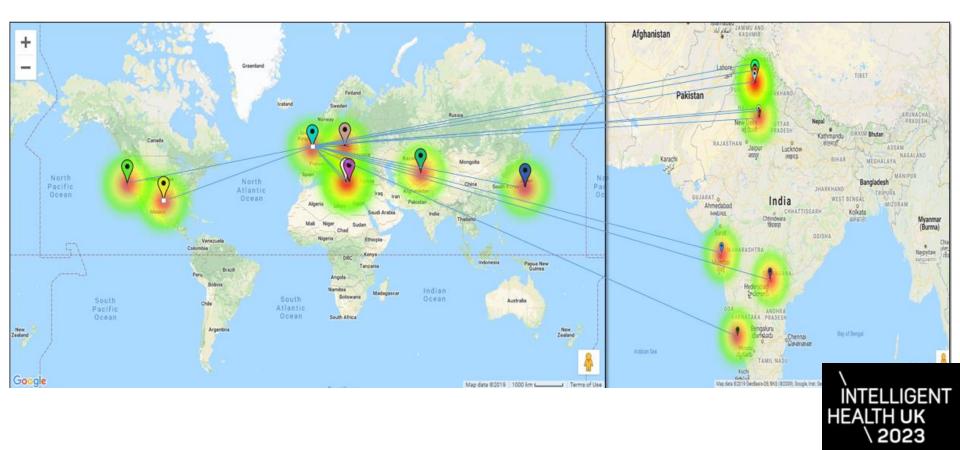


Elbow Arthroplasty

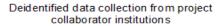


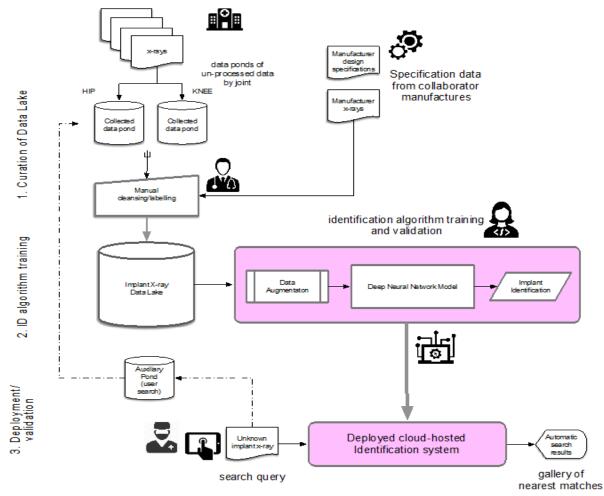


Collaborating Hospitals / Universities



Period	Issue/complication	Impact	Monetary estimate (per revision)	
Pre-operative	 Delay in identifying implant because of lack of access to patient notes Delay in scheduling operation Problems in sourcing correct spare parts 	 Extra technician, surgical time in identification Delay to operation and potential patient discomfort Need to hold stocks of rarely used components 	Bed costs saving £375/day; foreign implants £1500; technician salary 0.5 day/case	
Intra-operative	 None or incorrect replacement parts available Re-use of worn implant components Surgical complications, e.g. greater blood- loss, greater use of anaesthesia 	 Lengthened surgery Greater use of surgical time and support 	£32 per minute; ~£1000 pounds per surgery	
Post-Operative	Longer hospital staysRemedial/follow-up surgery	 Longer patient recovery Potential relapse of condition of further failure of implant Need for re-revision surgery 	2 days extra in hospital = £600-£3,000 pounds bed time; drug usage costs; re- revision surgery - 2x costs	
		Total estimated perannum@10% re-revision rate.	5000 cases x £6000 = £30M	





UDIs and GUDID

In 2014, the Food and Drug Administration (FDA) issued a new rule requiring manufacturers to label medical devices with

- unique device identifiers (UDIs) and
- Publicly accessible Global Unique Device Identifier Database (GUDID)



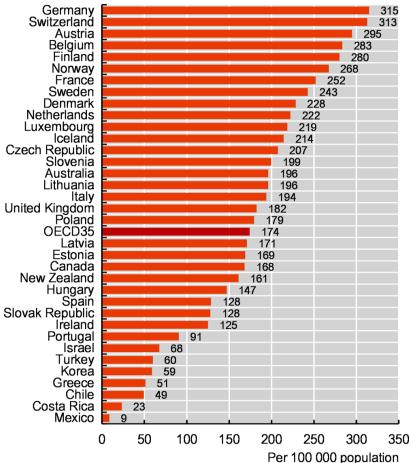
Problem Statement

- Around 7 million adults living with some form of Orthopaedic implant in USA[1]
- Factors for Implant failure
 - → Infection, instability, stiffness, wear and tear, loosening, and fractures
- Any Implant average life span 10 -15 years
- The surgeon requires the primary surgery's implant model to plan revision surgery, but that info is unavailable.

 Need to order the correct spare from right company, delay treatment, and to the patients, which can be prevented with our proposed tool



Hip replacement surgery, 2019 (or nearest year)





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• About 2 - 8 % have an Implantable medical device

• 1st all orthopaedic Implants

 Identify all Implantable Medical devices







Minimizing training data required to Identify the make & model of Orthopaedic Implants

Method:

- 1. To create a 20-class classification model spanning the hip, knee and shoulder wherein, the data has been sourced from multiple centres.
- 2. Develop a few shot problem (where every class possesses less than 10 Xray's) based on a meta-learning neural network in order to build on the sustainability aspects of the problem.

Initial Result :

- 1. Achieved state-of-the-art precision scores (90%) for 10 implant class models with only 30 implant per class (as opposed to the industry average of 100).
- 2. Identified challenging classes to classify.



Soumya Snigdha Kundu M.Sc. ML at QMUL Incoming ML PhD at King's College London



Co- Supervisor: Mr. Vineet Batta Luton and Dunstable Univ. Hospital



Supervisor: Prof. Gregory Slabaugh Professor of Computer Vision and AI and Director of the Digital Environment Research Institute (DERI) at QMUL.

Thank You





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Breaking down the barriers between tech and healthcare











