

# Current Research Led By FDA

## High-throughput truthing of microscope slides to validate artificial intelligence algorithms analyzing digital scans of same slides

- Partnership with academia, clinicians, and industry through Medical Device Innovation Consortium (MDIC)
  - Focus on truth by pathologists, the microscope and TILs in breast cancer
  - Status: Creating project structure, workgroups and leadership
- 
- Key Deliverables:
    1. FDA qualified dataset for algorithm validation
    2. MDDT or mock 510(k) submission for
      - WSI viewer
      - TILs in breast cancer algorithm

Work to be done in the public domain.

MDDT:

Medical Device Development Tool

<https://www.fda.gov/medicaldevices/scienceandresearch/medicaldevicedevelopmenttoolsmddt/>

510(k):

Premarket submission for Class II medical devices

<https://www.fda.gov/medicaldevices/deviceregulationandguidance/howtomarketyourdevice/premarket submissions/premarketnotification510k/default.htm>

# High Throughput Truthing for AI Validation

## 1. FDA qualified dataset for algorithm validation

- Collect slide annotation data at pathology conferences and other high-volume settings
- Use microscope and system that records evaluation locations
  - Scanner agnostic: map annotations to any digital scan of the slides
- Also collect annotations from WSI's to support viewer and algorithm deliverables
- Multiple readers per slide/ROI (5 to 15, not 2+1)
- Dataset as a Medical Device Development Tool (MDDT)
- Available to developers (in a controlled way) to use in FDA submissions

## 2. MDDT or mock 510(k) submission for WSI viewer

- The WSI viewer is an enabling technology that has been developed by many groups.
- Goal: Demonstrate regulatory pathway to allow innovation enabled by different viewers.
- Use MDDT data (deliverable 1). Share process publicly. Community follows the example.

## 3. MDDT or mock 510(k) submission for TILs in breast cancer algorithm

- Create an algorithm use case (= FDA Indications for Use).
- Validate algorithm with MDDT data (deliverable 1).
- Share process publicly. Community follows the example.



Data  
Collection At  
ASCP 2018

# Why is the FDA doing this?

“help encourage more developers to translate advances into clinically actionable tools to benefit patients”  
Scott Gottlieb, Commissioner FDA, “Transforming FDA’s Approach to Digital Health.”

## MDDT

### *Medical Device Development Tool*

#### **New pathway. New mechanism.**

- Reduce burden to sponsors
  - Use MDDT data in the submission
  - Replace 40 pages of a submission with, “Using the MDDT dataset, our algorithm performance is ...”
- Reduce burden to FDA
  - Approve data once to support multiple sponsors

#### **New stakeholders.**

- Not just industry
- Pathologists, Academia, Health Providers
- Associations, Societies, Colleges (CAP, USCAP, ASCP)

#### **Create an example for stakeholders to follow.**

## Impact

#### **Build consensus. Build tools. Disseminate.**

- High-throughput data-collection tools and protocols
  - Standardize annotation formats for humans and algorithms
  - Statistical methods and software for algorithm performance evaluation
- **Improve submissions. Enable interoperability.**

#### **Give pathologists ownership and confidence.**

- What the algorithms should do
  - The validation process
- **Improve clinical practice**

#### **Shift effort to community.**

- **Reduce FDA workload**

# High-Throughput Truthing for AI Validation

How can your team get updates or get involved ?



## Info and Updates

- Browse this wiki page: <https://nciphub.org/groups/eedapstudies/wiki/HighthroughputTruthingYear2>
- Join this group: <https://nciphub.org/groups/eedapstudies>



## Use Case Development

- Outline use cases appropriate for novel AI algorithms, provide clinical guidance for industry R&D



## Conference Logistics

- Logistics and operations knowledge of pathology conferences, a primary source of pathologist recruitment

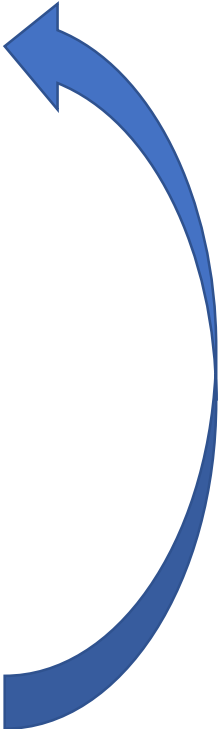


## Pathologist Recruitment, Management, and Training

- Use-case training, biotechnology informatics

# Big Tent project

- Plans will be shared with NCIPhub groups ([eeDAPstudies](#) and [wsi\\_working\\_group](#)) and then to the public
  - Join!
- Want workgroups to welcome the community (scale up)
  - Leaders get to steer and make decisions.
  - Leverage skills and resources of team.
  - Leaders cultivate the spirit to share and advance science
- Preparing to be adopted as MDIC project (MDIC board meeting June 12)
  - Looking for board champion
- MDIC will bring
  - Industry participation
  - Resources
  - Exposure
- Industry will
  - Join teams ... and possibly leadership
  - Add deliverables



Need to plan for  
industry et al.  
involvement

# Funding

- ITCR administrative supplements
- ITCR grant for the Viewer MDDT/510k
- Need to tap NCI Cancer Imaging Program
  
- FTE positions available at FDA
- Intern positions at FDA (part time and summer)
- UK Research Institute Centre for Doctoral Training in AI for Medical Diagnosis and Care

# Project Workgroups

- Slides
- Conference Logistics
- MDDT (Use-case) Development
- Infrastructure and Viewer
- Stats
- Annotation Data: Human
- Annotation Data: Algorithm
- Algorithm
- Pathologist Recruitment and Training

# Workgroup Leadership

## Slides

### Anant Madabhushi

- F. Alex Nason Professor II of Biomedical Engineering, Case Western Reserve University and Research Health Scientist, Louis Stokes Cleveland Veterans Health Administration Medical Center, Cleveland, OH, US

### Hannah Gilmore

- Division of Anatomic Pathology, University Hospitals Cleveland Medical Center, Case Western Reserve University

## Conference Logistics

### Jithesh Veetil

- MDIC: Medical Device Innovation Consortium

## MDDT Development (Use-case)

### Sarah Dudgeon

- FDA, CDRH, Office of Science and Engineering Laboratories, Division of Imaging, Diagnostics, and Software Reliability, Silver Spring, MD, US

### Raj Gupta

- Stony Brook Medicine

## Infrastructure and Viewer

### Ashish Sharma

- Emory: viewer caMicroscope

### Joel Saltz

- Dept. of Biomedical Informatics and Dept. of Pathology Stony Brook Medicine, Stony Brook, NY, US



# Workgroup Leadership

## Human Annotations

Darren Treanor

- NPIC: Northern Pathology Imaging Co-operative, Leeds Teaching Hospitals, NHS Trust, Leeds, UK

Bethany Williams

- Leeds Teaching Hospitals, NHS Trust, Leeds, UK

## Algorithm Annotations

Lee Cooper

- Dept. of Biomedical Informatics, Emory University School of Medicine, Atlanta, GA, US

Mohamed Amgad

- Dept. of Biomedical Informatics, Emory University School of Medicine, Atlanta, GA, US

## Algorithm

Roberto Salgado

- Department of Pathology, GZA-ZNA, Antwerp, Belgium; Division of Research, Peter Mac Callum Cancer Centre, Melbourne, Australia

Jeroen van der Laak

- Radboud University, The Netherlands

## Stats

Weijie Chen

- FDA, CDRH, Office of Science and Engineering Laboratories, Division of Imaging, Diagnostics, and Software Reliability, Silver Spring, MD, US

## Pathologist Recruitment, and Training

Opportunity!

# High-throughput Truthing

Go where thousands of pathologists go ... Annual Society Meetings

## Data-collection event (Demonstration)



Baltimore 2018.  
Local destination.  
Low cost.



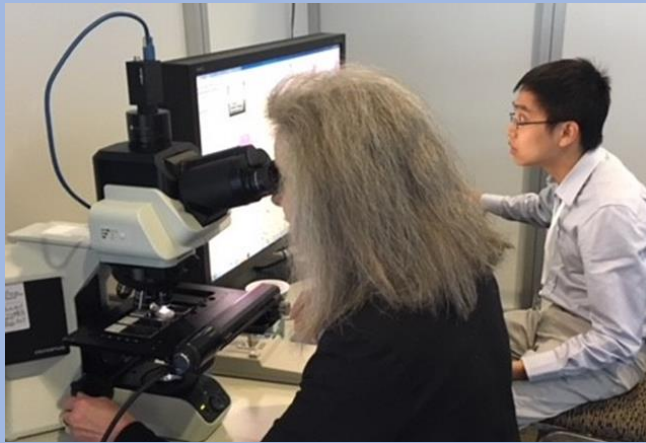
TILs: Tumor Infiltrating Lymphocytes

Pathologists evaluated regions of interest:

- Stromal TILs density task
- TIL marking task

Microscope and digital modes

26 pathologists; 13 collection hours total.

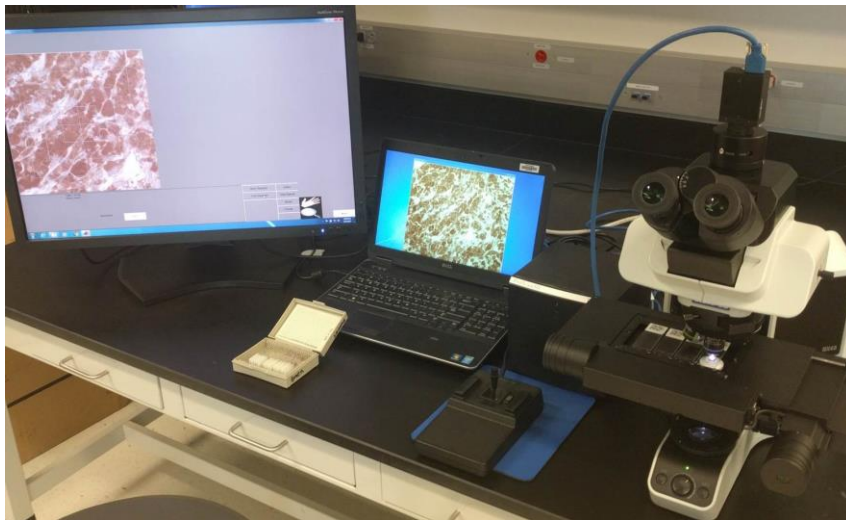


# eeDAP:

## Evaluation Environment for Digital and Analog Pathology

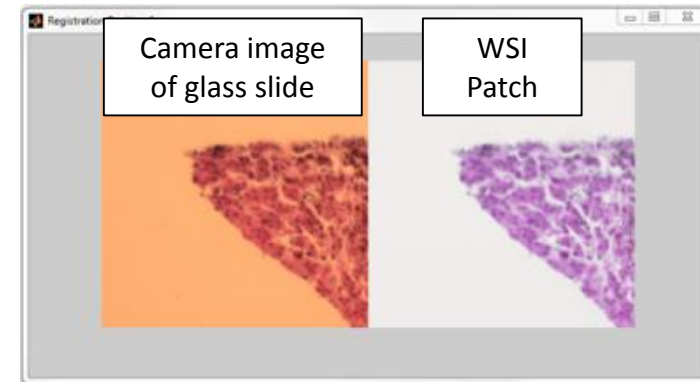
### Microscope Mode

Monitor, Computer,  
motorized stage with joystick,  
microscope with mounted camera,  
reticle in eyepiece



<https://github.com/DIDSR/eeDAP>

Register glass slide and WSI



Allow pathologists to create  
annotations using microscope ...  
**scanner agnostic annotations.**

Then map annotations to **\*any\*** WSI

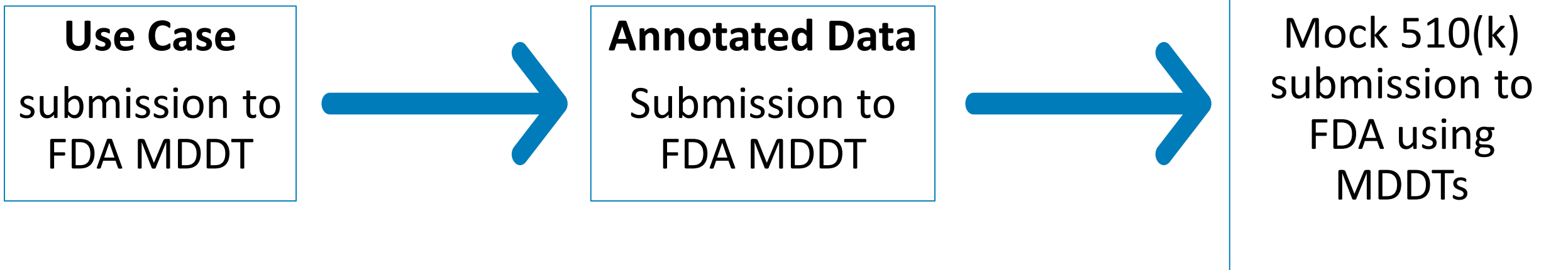
# Possible Data Collection Events

- FDA
  - 10?, 17? July, Silver Spring, MD
- ECP
  - 7-11 September, Nice, France
- ASCP
  - 11-13 September, Phoenix, AZ
- CAP
  - 21-25 September, Orlando, FL
- Complimentary web-based studies

## Default Plan

- Four workstations
  - 2 microscopes + 2 digital mode
- Semi-private space on exhibit floor or a small conference room
- Need advertising for recruiting ahead of and during conference
- Opportunity to organize a session of speakers about the different project elements

# Borrowing ACR's Pathway



ACR's Data Science institute's Senior Director has shared their first use-case MDDT submission with the HTT project.

# What is a “Use Case?”

- Sets framework for the way which AI is expected to perform
- Ensures AI for specified context is both clinically relevant and implementable
- Dictates dataset development
- Specifies the following

The inputs to the algorithm.  
Number of sections/slides required.  
The evaluation area: entire WSI or pathologist identified regions of interest (ROIs)?

Patient inclusion and exclusion criteria: organ, disease.  
Procedures or referrals that yield the appropriate specimen.  
Imaging specifications: magnification, stain.  
Other diagnostic results that are required.  
The outputs from the algorithm.

# How is the Use Case drafted?

