

Overview of my work

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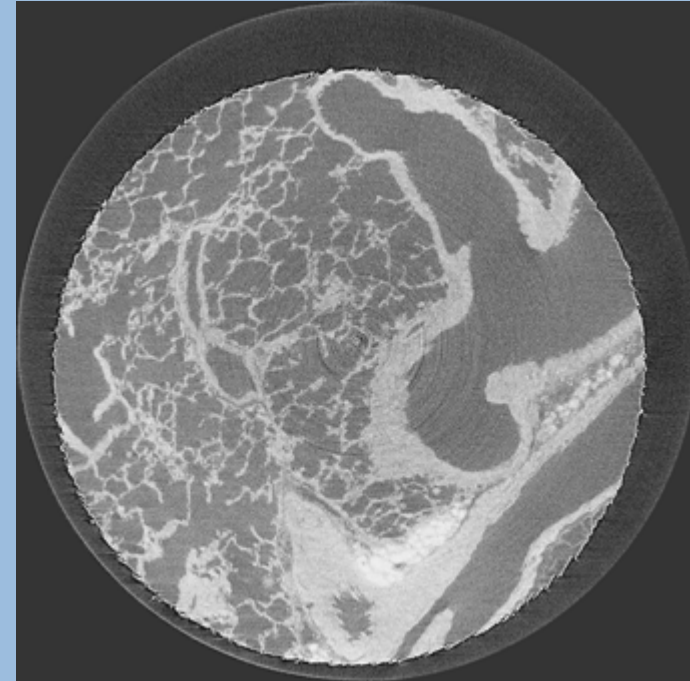
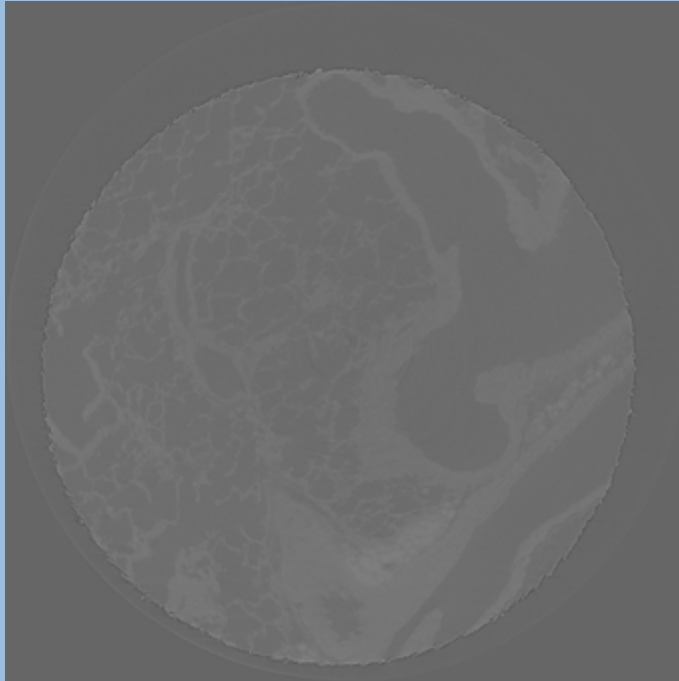
Background

- > Re-Definition of current lung development paradigm
 - Late alveolarization happens
 - Formation of septa after point that has been thought
- > Generation of 3D images of the lung enables further work that cannot be done without it
 - Study of the underlying structures
 - Comparison between modified and wild type mice (genome)
 - Study of alveolar airflow with structural data

Overview

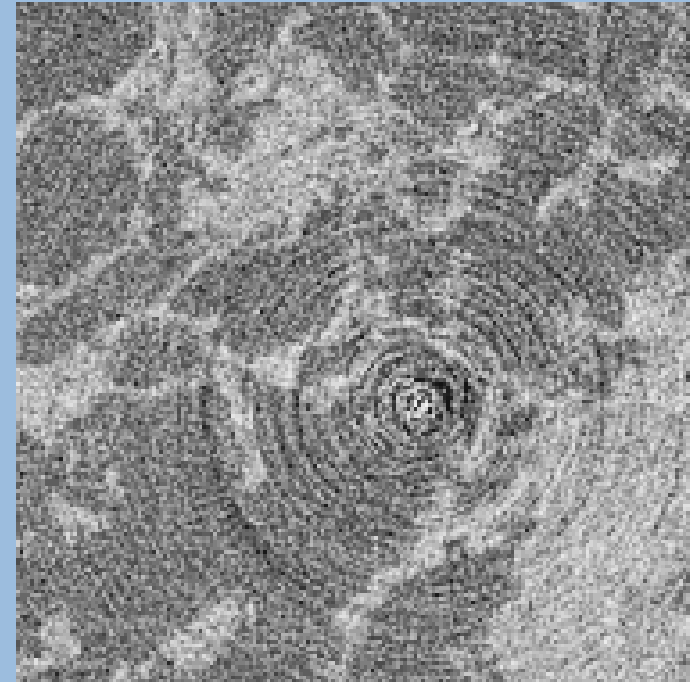
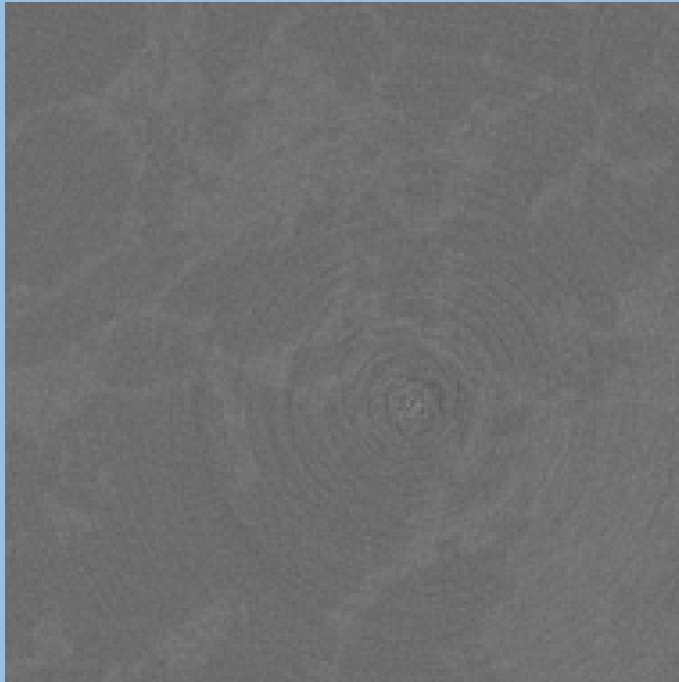
- > XTM work done here at the SLS
- > Refinement of process
- > Process data up to now
- > 3D-reconstruction is a well known process, but not for the small samples we have
- > Troubles arise through small sample size and Image acquisition process > Signal to noise ratio

Data acquisition



- > Image stack of 1024 images
- > 16bit Tiff-files, one reconstructed image is 2 MB > full stack ~2 GB

Image Noise



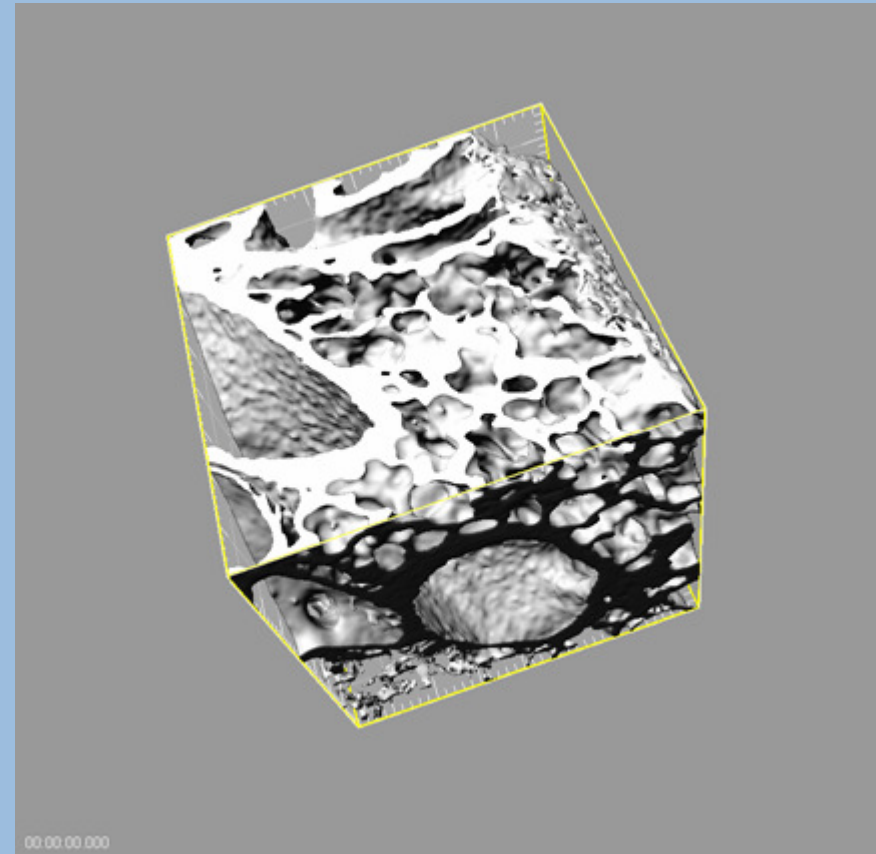
- > Contrast is low, Noise in enhanced images is high
- > Circular Artefacts in raw data through acquisition process
- > Filtering > Good for generation of images, bad for data

Image Filtering

- > Different filtering algorithms
 - Smoothing > averaging area, lost data
 - Median Filter > value sorting, noise removal
 - Kuwahara Filter > mean and variance smoothing, good edge protection
 - Anisotropic Diffusion > encourages intraregion smoothing while inhibiting interregion smoothing, very slow (+2h for 1 sample)

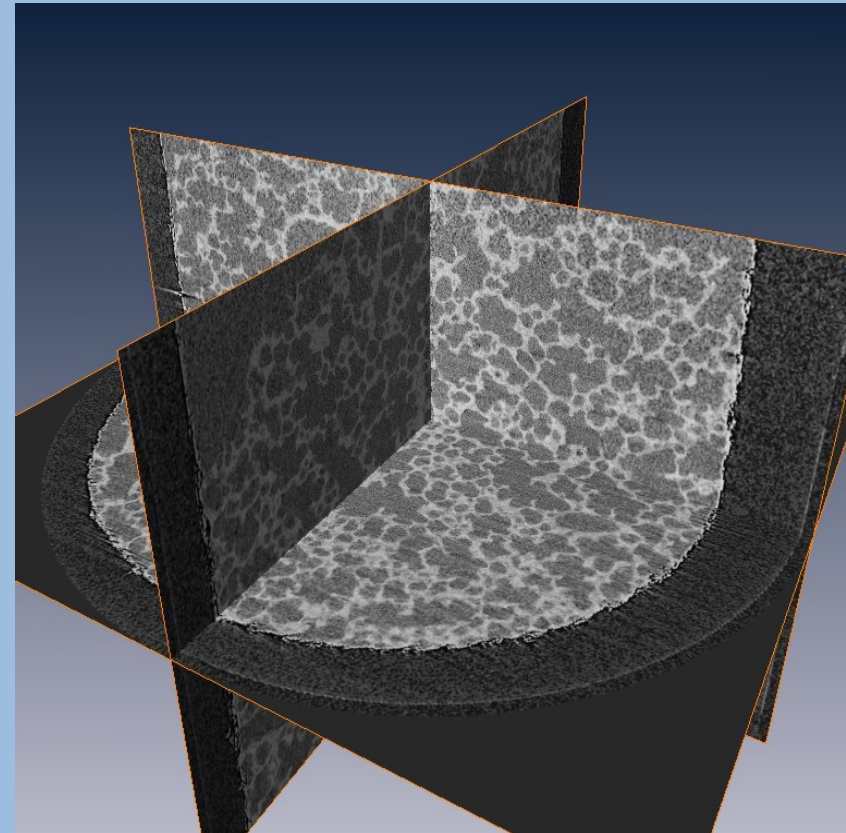
Imaris

- > Reconstruction software, marketed for interpreting protein expression patterns
- > Segmentation through thresholding
- > Only portion of sample can be visualized > not good for our big image stacks



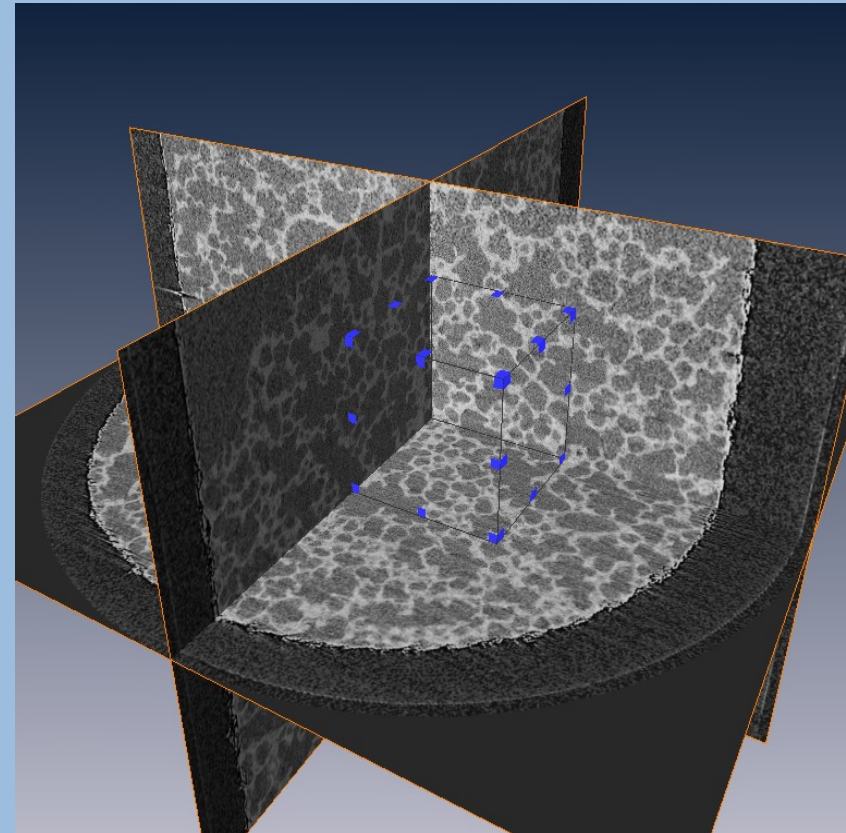
Amira

- > Visualization Software for 3D data sets, also used at the SLS
- > Licence through MEMcenter of the University of Bern > coreferee of my thesis
- > Powerful segmentation methods, which have not been applied yet
- > More suited for work with large data arrays



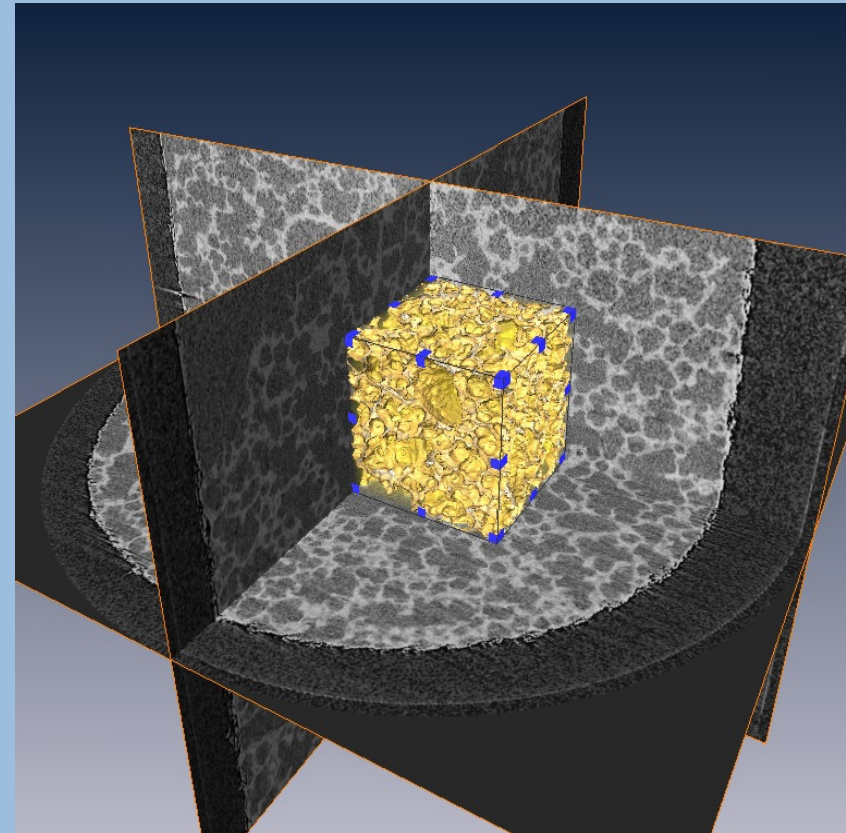
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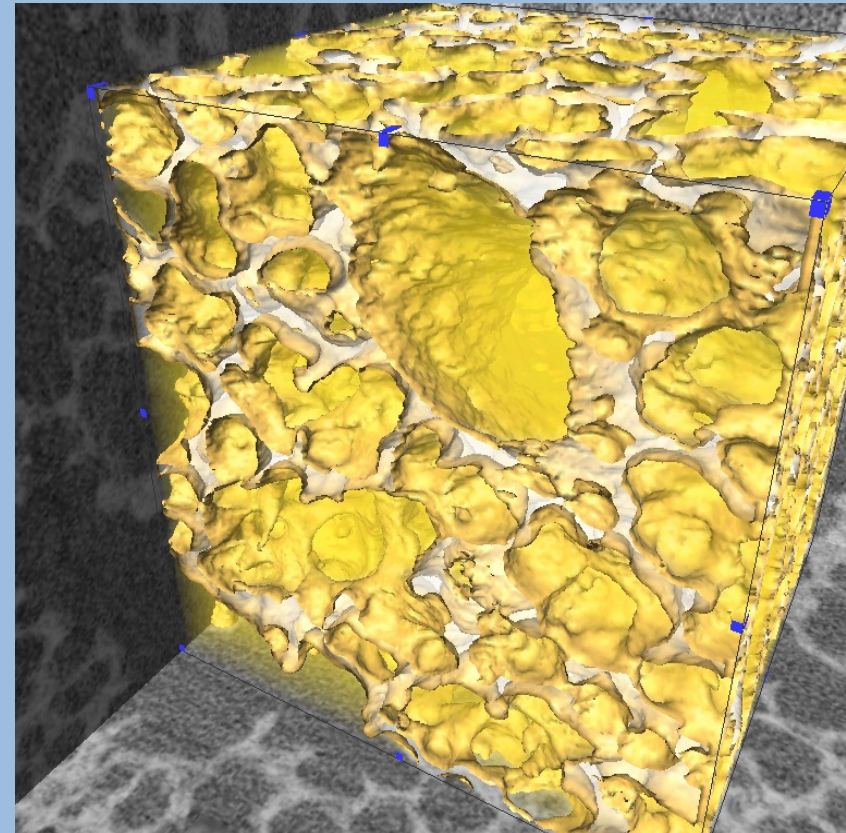
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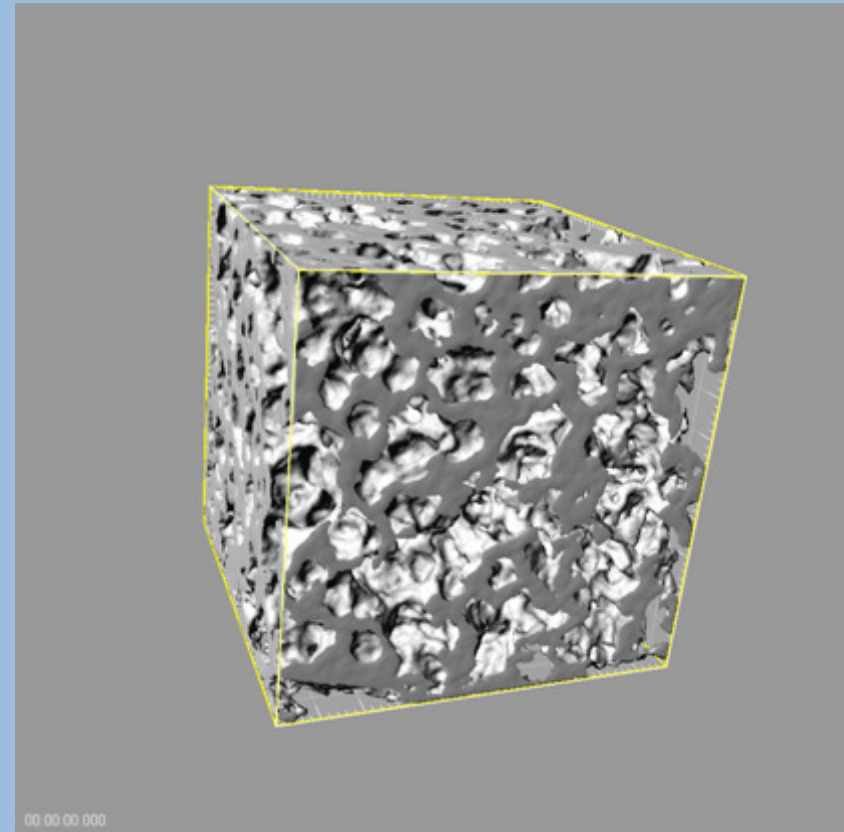


3D Reconstruction

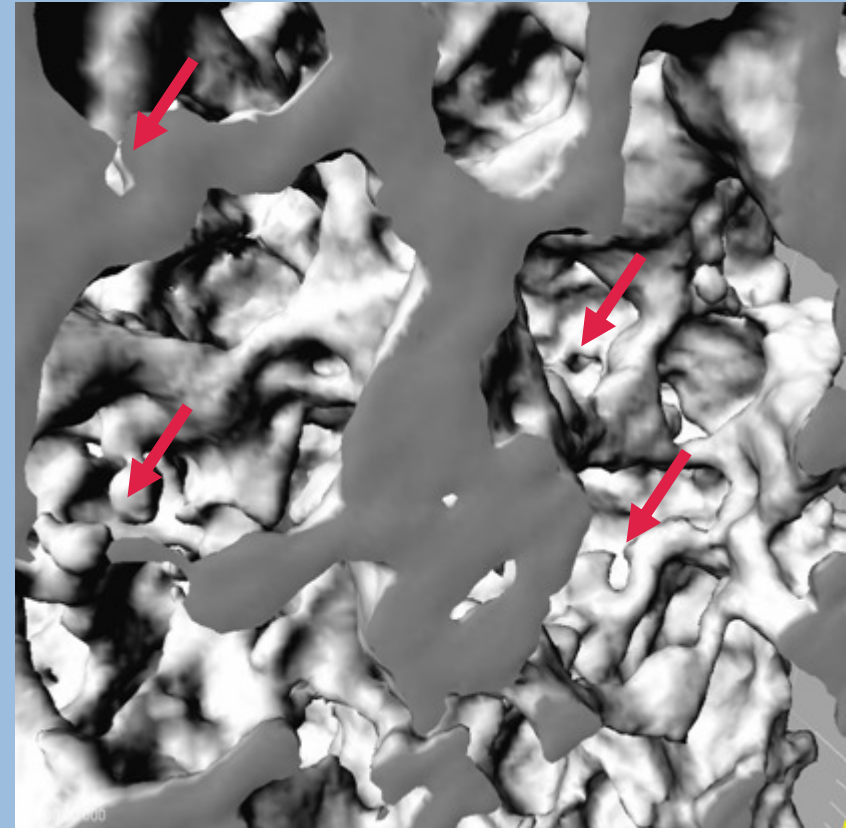
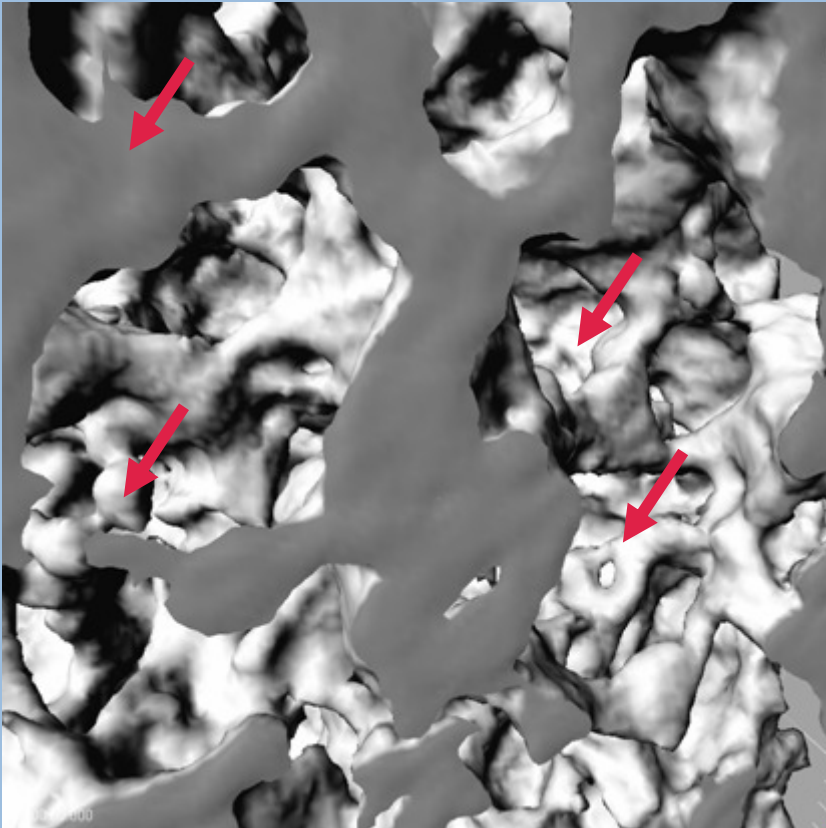
- > Segmentation is done through thresholding
- > Threshold value is relevant for thickness of lung structures > correct value is vital
- > Adaptive thresholding algorithms or skeletonizing images could help for reconstruction
- > Generate wireframe skeleton of lung
- > We are altering our data > Reconstruction error or pores?

Pores

- > Overview
- > Cube of 196 pixels edge length
- > Arbitrary crop
- > Automatic thresholding by Imaris

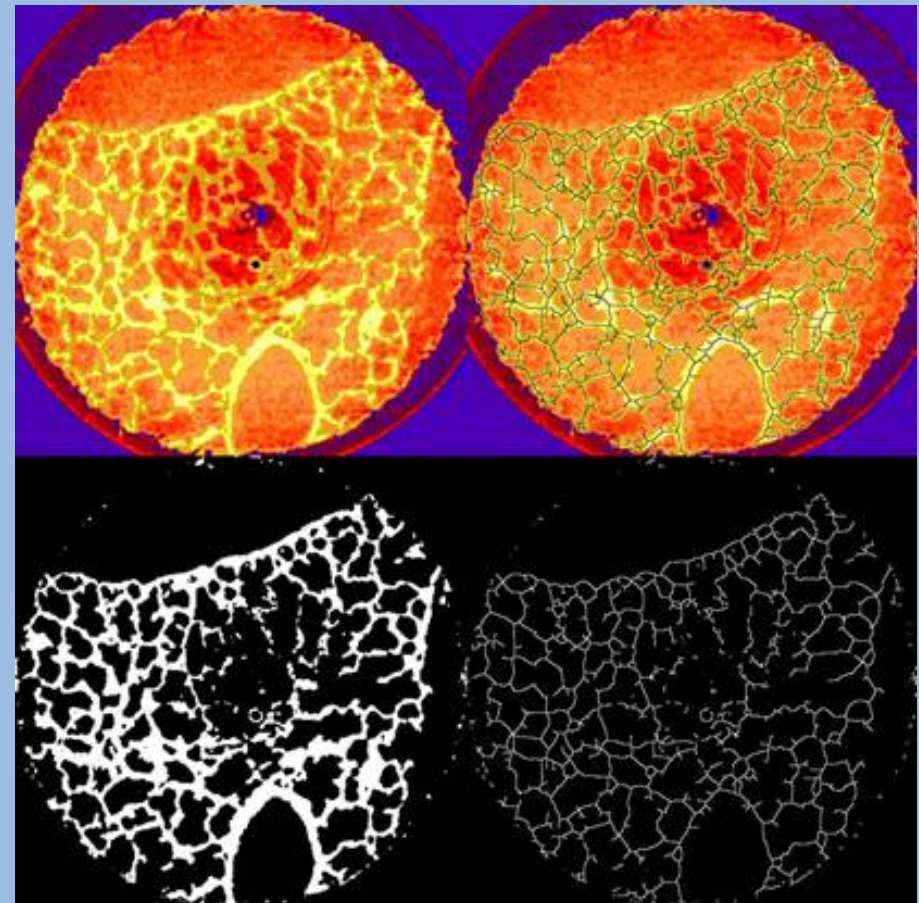


Pores



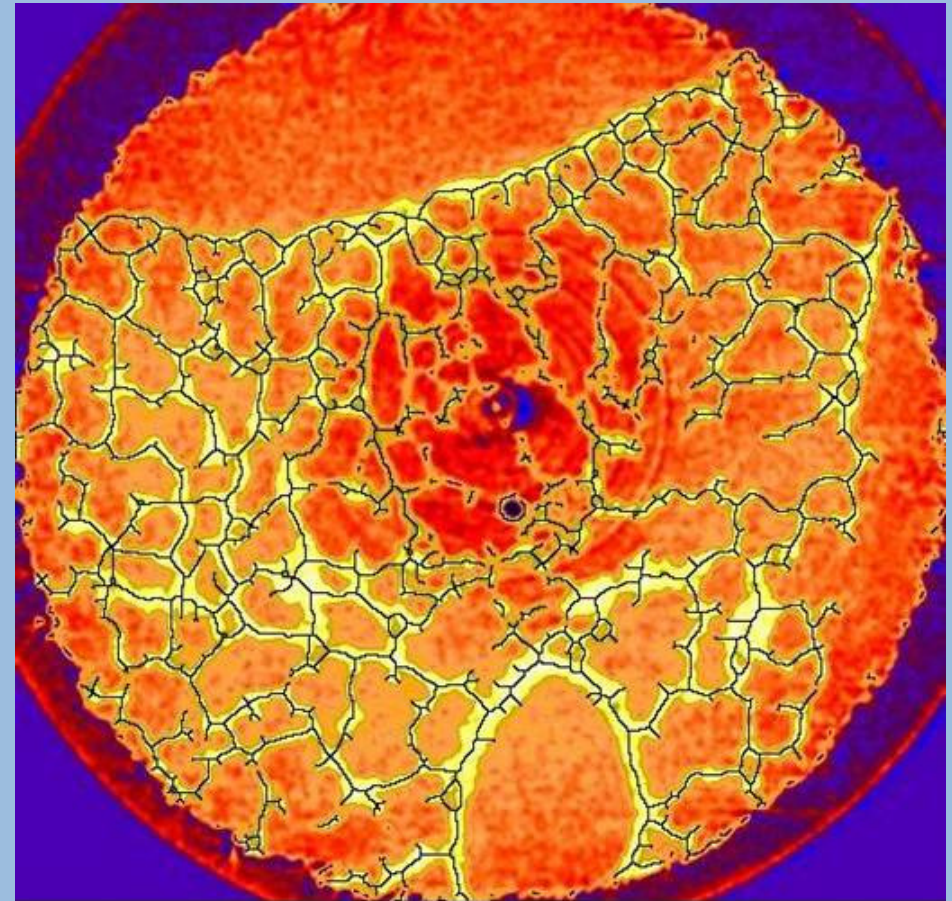
Skeletonizing Images

- > Filtered image
- > Binarized image (> threshold)
- > Skeleton (IDL-Function)
 - Non destroying
- > Problematic, not everything is an alveolar septa
- > Merged image



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Outlook

- > Image Reconstruction
- > Measuring/Comparison of data measured up to now
- > Refinement of imaging-process
- > Workflow adaptation

> Thanks for listening!