VIEWER DISCRETION IS ADVISED

Leveraging Computer Vision Techniques to Measure the Total Burn Surface Area of Pediatric Patients in Ghana.

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Outline of Presentation

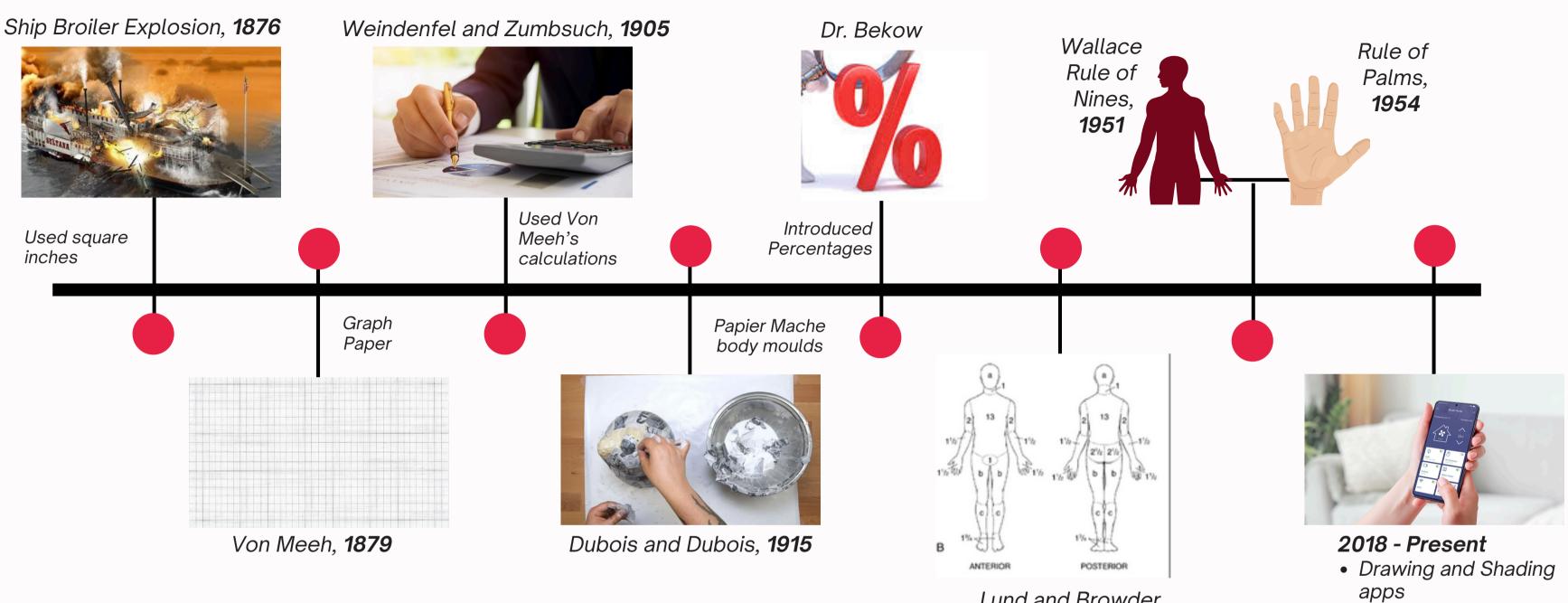
- Introduction
- Problem Statement
- Objectives
- Methodology
- Results
- Validation
- Recommendation and Conclusion





Introduction

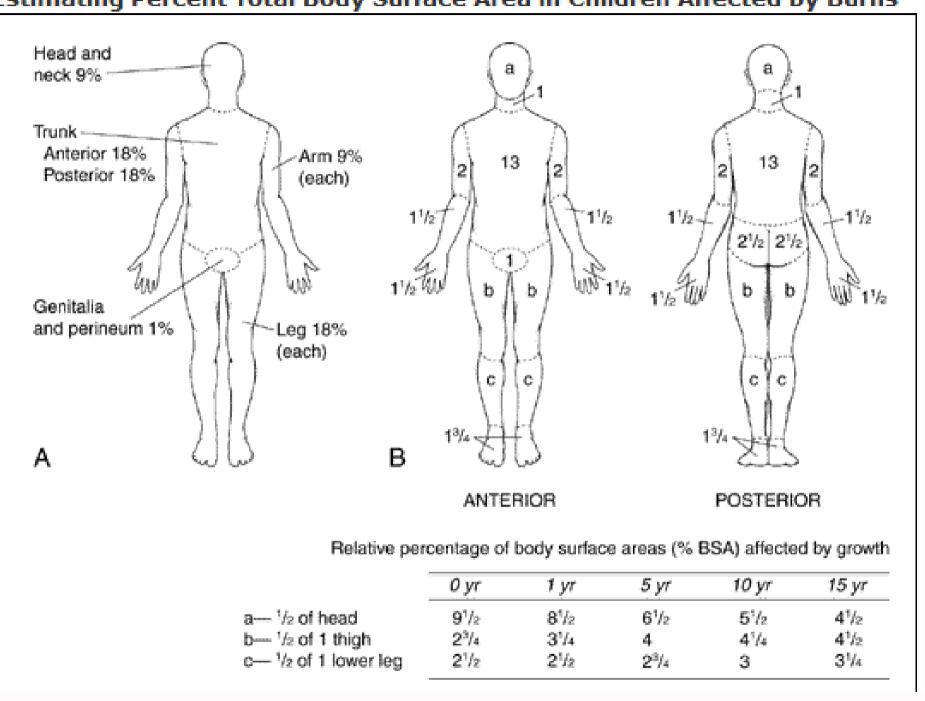
- According to the WHO, 11 million skin burn cases are recorded annually. [2][3]
- Of this alarming figure, 90% occur in LMICs with about 180,000 leading to death.
- Children are the most vulnerable since their defence mechanisms are not fully developed [1]
- The Total Burn Surface Area (TBSA) is a visual estimate of the size of a burn wound done by clinicians.
- Accurately measuring the TBSA is necessary for other burn management procedures like fluid resuscitation, wound healing monitoring, burn severity assessment etc.



Problem Statement

The TBSA is **subjective** and prone to error and variability. Studies have been done [4][5][6] to deal with subjectivity but unfortunately, they do not include African datasets.

Lund and Browder Chart, 1944



Estimating Percent Total Body Surface Area in Children Affected by Burns

Lund-Browder Chart



To create a semi-automated model that **segments burns** from an African image dataset.

> To create a model that **objectively measures** the TBSA of children on a partby-part basis using an African burn image dataset.

Data

• 226 images from Komfo Anokye Teaching Hospital.

Exclusion:

- Images with non-lateral views.
- Images with dressing on the wound.
- Images that did not show a full body part with a burn.
- Used 120 of the 226 images.

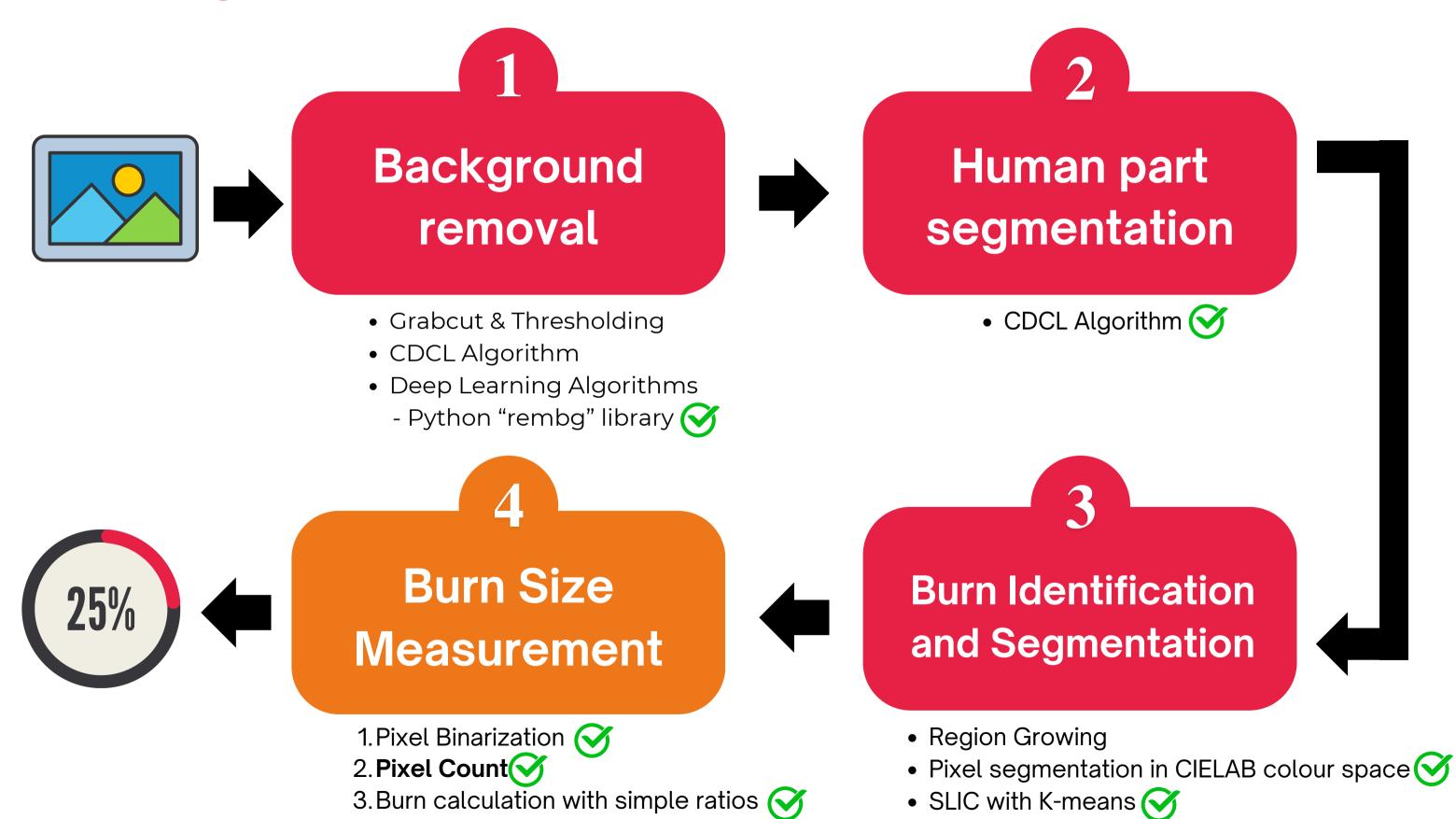
Excluded



Included



Methodology





Background Removal



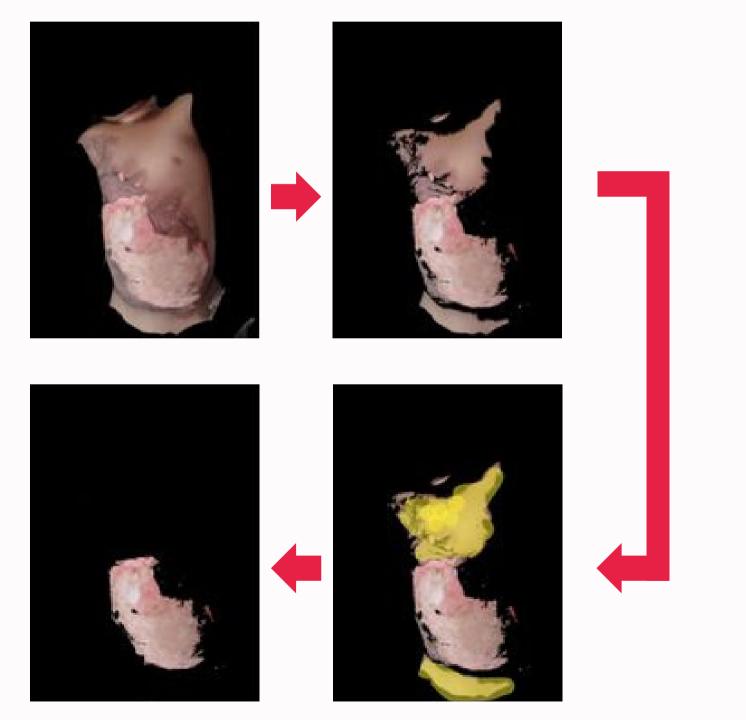


Achieved high accuracy with head segmentations (95.77%) and least with arms and feet (69.84% and 44% respectively).

Body Part Segmentation



Burn Segmentation



Dice Scores

Automated

SLIC with

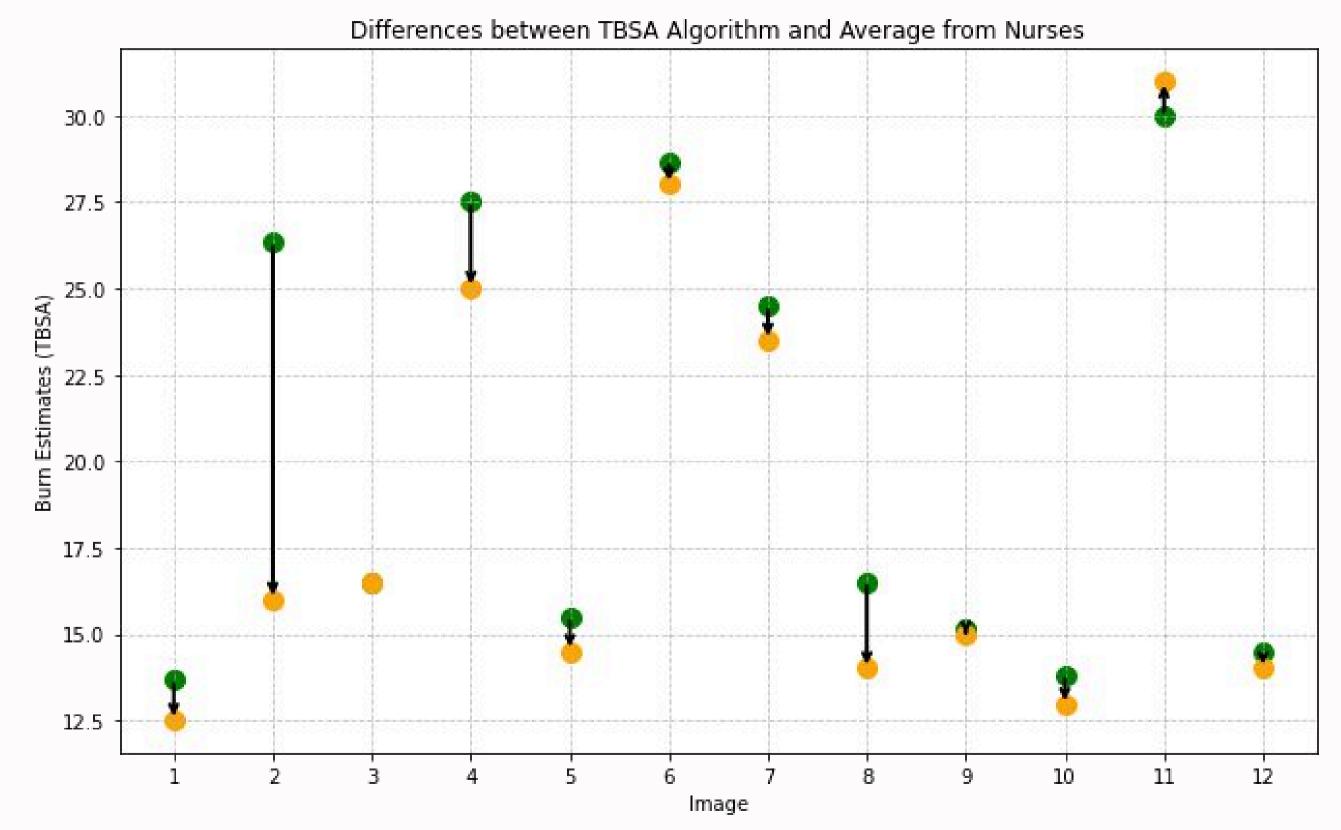
Automate

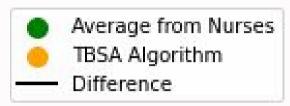
| s for Burn Segmentation | |
|-------------------------|------|
| d (CIELAB) | 0.55 |
| n K-Means | 0.92 |

| K-Means | 0.92 |
|-----------|------|
| ed + SLIC | 0.86 |



Validation





MAE = 1.77



Recommendations and Conclusion

• Consider using data that captures all views of the patient so that circumferential burns can also be measured.

• Computer vision has the potential to objectively measure the total burn surface area of burn wounds which can reduce problems with over and under-resuscitation and also help in burn wound healing monitoring.

References

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- 3.Quinn, L., Ahmed, T., Falk, H., Miranda Altamirano, A., Muganza, A., Nakarmi, K., Nawar, A., Peck, M., Man Rai, S., Sartori, J., et al. (2023). Burn admissions across low-and middle-income countries: a repeated cross-sectional survey. Journal of Burn Care & Research, 44(2):320–328
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THANK VOLUME

