







Label-Free Liver Tumor Segmentation

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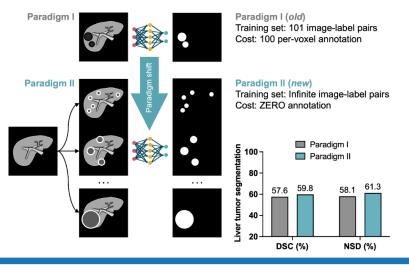








Tumor segmentation paradigm shift from label-intensive to label-free.



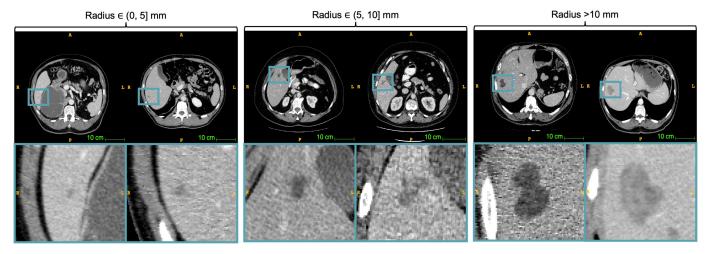
Paradigm I (old)

- Per-voxel annotations.
- Time-consuming, expansive.
- Requires extensive medical expertise.

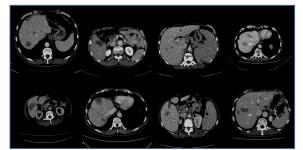
Paradigm II (new)

- ZERO annotations.
- Infinite training pairs
- Similar performance.

Can you tell which liver tumors are real and which are fake?



Even *professionals* can't distinguish synthetic tumors from

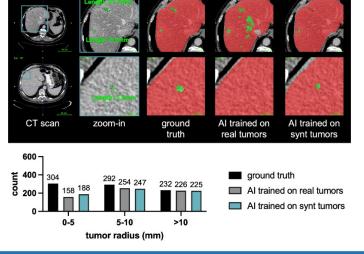


		junior pro	ofessional	senior professional		
		real (P)	$\operatorname{synt}(N)$	real (P)	$\operatorname{synt}\left(N\right)$	
th	real(P)	5	15	10	2	
呈	$\operatorname{synt}(N)$	21	8	7	12	

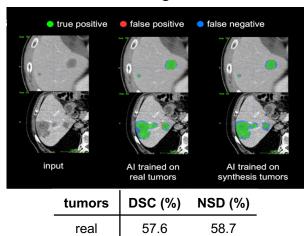
¹The junior professional achieves an Accuracy, Sensitivity, and Specificity of 26.5%, 27.6%, and 25.0%. One CT scan is marked unsure.

²The senior professional achieves an Accuracy, Sensitivity, and Specificity of 71.0%, 63.2%, and 83.3%. 19 CT scans are marked unsure

Synthetic tumor can benefit small tumor detection.

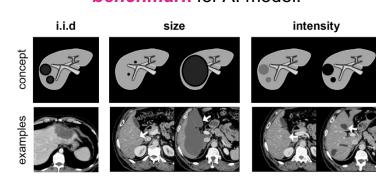


Synthetic tumor is efficient for real tumor segmentation.



59.8 61.3

Synthetic tumor can provide benchmark for AI model.



	size			intensity		
	$\mu \pm \sigma$	$\mu \pm 2\sigma$	$\mu \pm 3\sigma$	$\mu \pm \sigma$	$\mu \pm 2\sigma$	$\mu \pm 3\sigma$
UNet++	68.45	63.01	9.27	90.16	75.58	26.99
nnU-Net	80.23	59.55	5.39	91.60	83.61	30.53
Swin UNETR	82.62	65.95	26.08	88.95	79.36	12.87