

### Purpose and Objectives

- Current methods of characterizing dose distributions do not provide a spatially aware description of dose.
- Radio-morphology** (or “dosomics”) was proposed as a method to parameterize regions of interest (ROIs) and produce consistently defined, shape-based dose features, that encode the **spatial distribution of dose** at a higher resolution than organ-level dose-volume histograms (DVHs)

### Materials and Methods

The **Oncospace database** was queried for:

- Anatomical contours, as 3D binary masks
- Dose grids
- Clinical assessments and patient characteristics

The feature generation pipeline (see *Figure 1*) consists of the following steps:

#### Anatomy normalization:

- ROI masks were registered to a set of reference anatomy using a **deformable registration algorithm**.
- For binary masks, **coherent point drift (CPD)** was used for a landmark-less registration

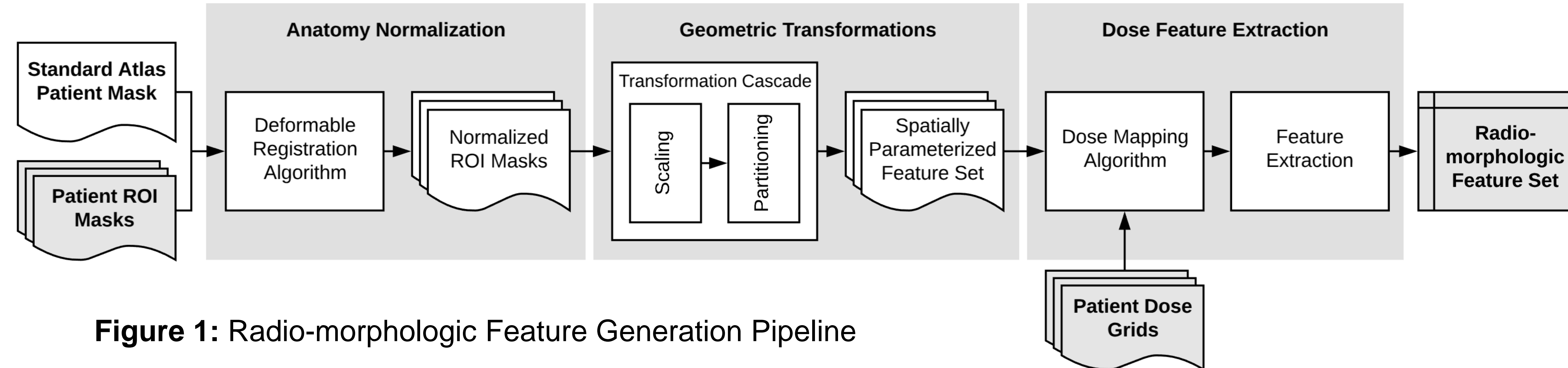
#### Geometric transformations:

- Scaling** transformations were used to expand or contract structures, producing shells.
- Partitioning** transformations were used to break down structures into sub-volumes, such as slices, octants, or radial sectors.
- Cascades of transformations** were applied to parametrically produce more complex sub-structures that encapsulate different regions of the anatomy.

#### Dose feature extraction:

- Dose grids were mapped onto the derived substructures
- Characteristics of the dose were derived, including voxel-level sampling and DVH values

Machine learning methods were applied, using the spatial-dose feature sets, to predict post-treatment clinical outcomes and **identify high importance regions** of the anatomy.



**Figure 1:** Radio-morphologic Feature Generation Pipeline

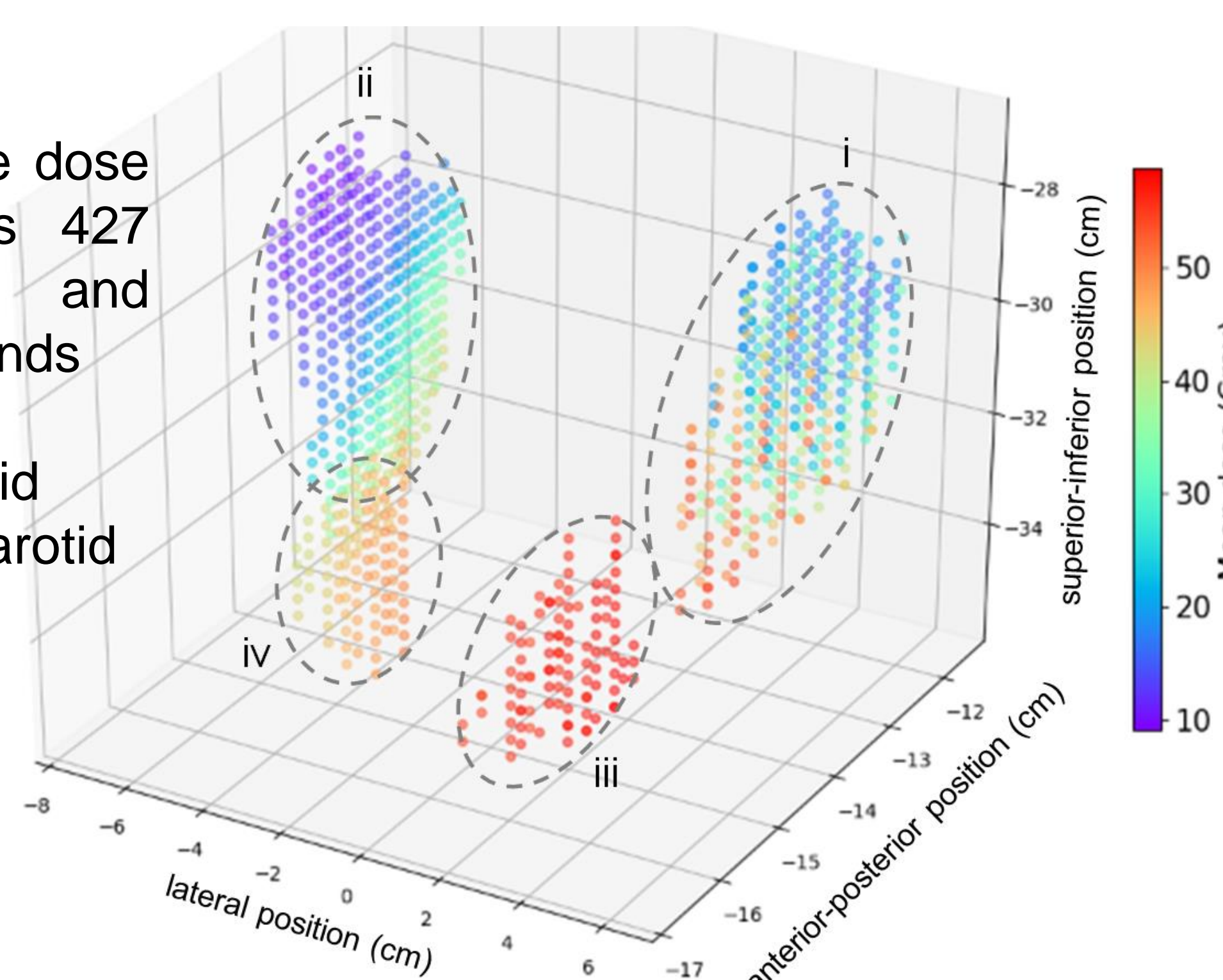
### Results

#### Voxel-Based Analysis of Salivary Glands for Xerostomia

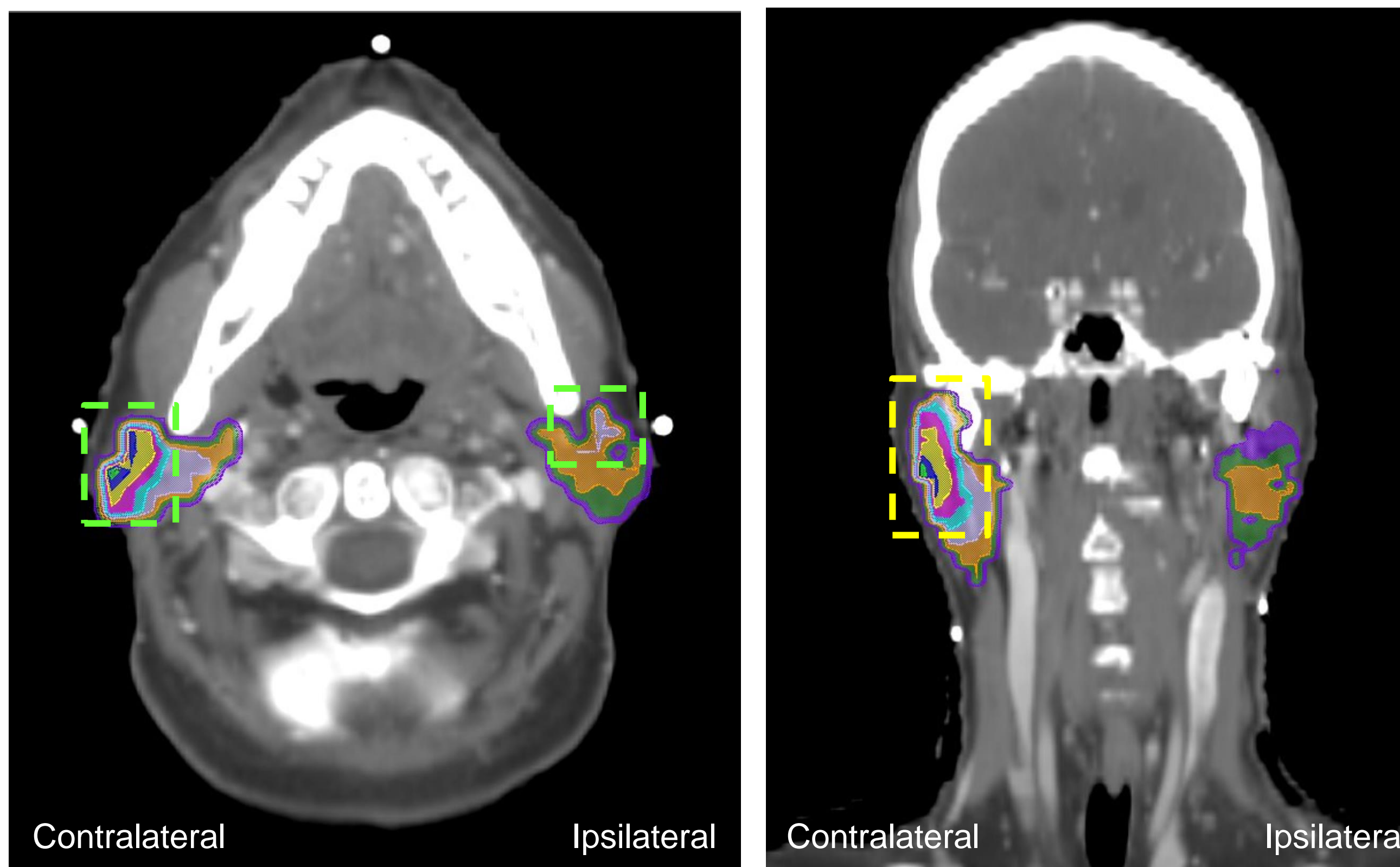
Anatomy normalization makes it possible to produce **population-level, spatial dose statistics** from spatial dose distributions, normalized across patient anatomy and tumor laterality.

**Figure 2:** Average dose distribution across 427 patients' parotid and submandibular glands

- (i) Ipsilateral parotid
- (ii) Contralateral parotid
- (iii) Ipsilateral submandibular
- (iv) Contralateral submandibular



The **Ridge logistic regression** algorithm was applied to the dose-voxel data and clinical covariates to **identify influential regions** for predicting xerostomia at 3-6 months, post treatment.

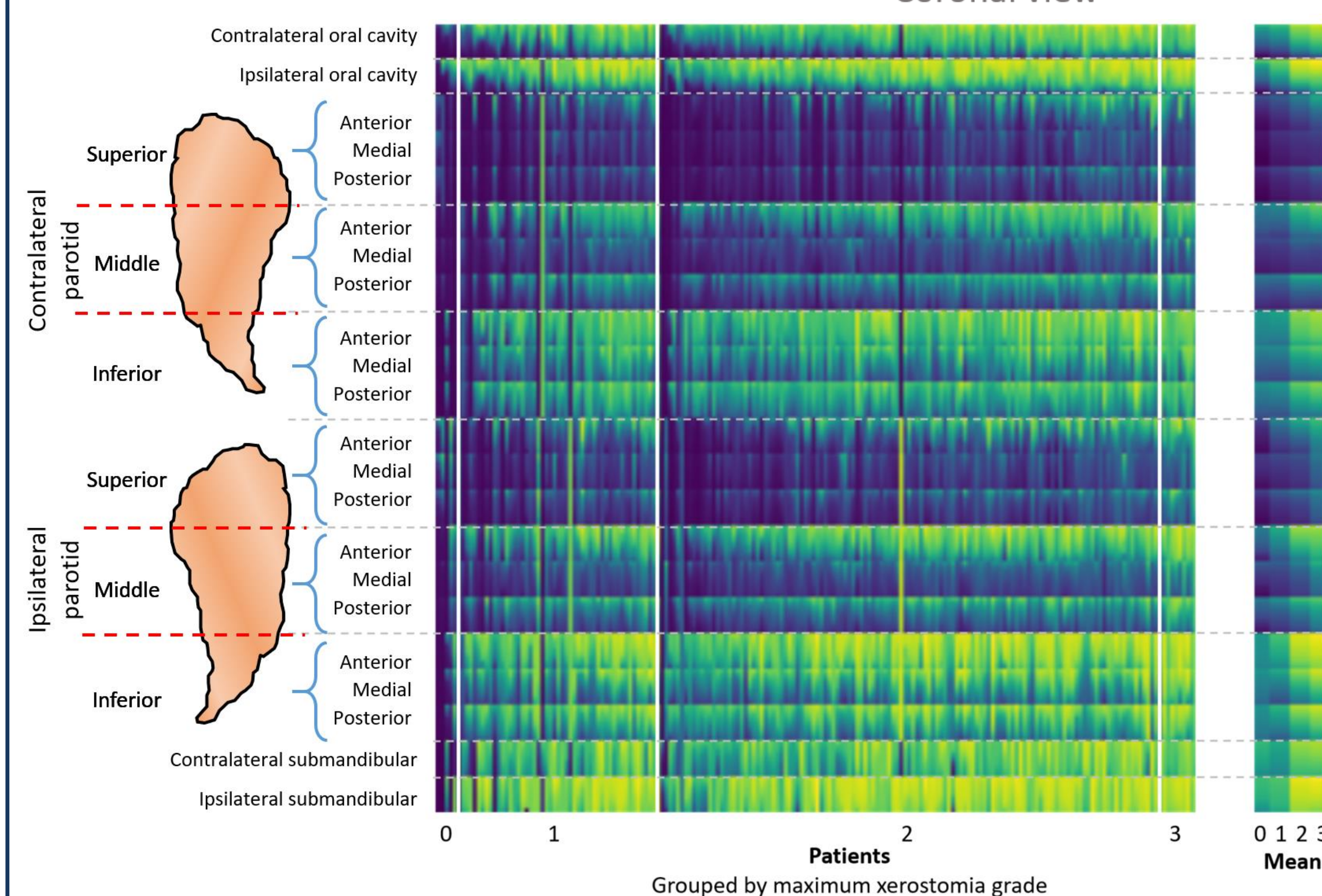
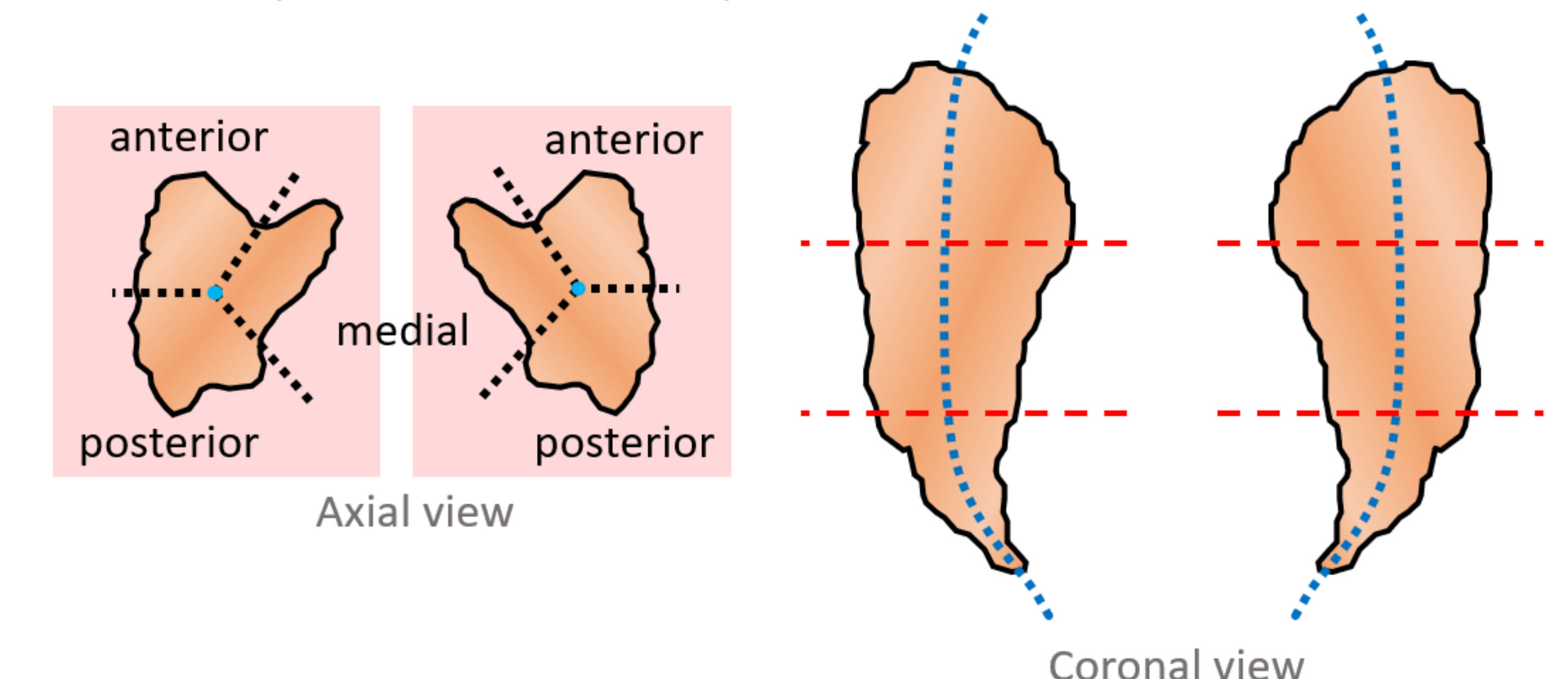


**Figure 3:** Regions of influence for prediction of high-grade xerostomia (CTCAE grade > 1) at 3-6 months post treatment, visualized on reference anatomy. Highly predictive regions were found on the contralateral parotid gland and near the ductal region of the parotids.

#### High-Volume Parametric Feature Extraction

Applying a series of geometric transformations transformed a set of ROIs into a large number of **parametrically defined and normalized** substructures.

**Figure 4:** Geometric transformations and dosimetric features extracted from parotid glands, compared against severity of xerostomia.



### Conclusions

- The radio-morphologic feature generation pipeline provides a method to consistently and efficiently derive a large volume of **spatially descriptive dosimetric features**.
- Large scale data analysis makes it possible to further investigate the physiological effects of radiotherapy and fine tune future treatment.