## Introduction

- The Cobb angle serves as a key metric for quantifying the degree of spinal curvature
- Manual Cobb angle measurement is timeconsuming, labor intensive, and prone to variability between clinicians
- Such inconsistencies can significantly affect scoliosis diagnosis & treatment



## Objectives

- This project aims to develop a machine learning tool for automated
- Using ML, the tool aims to reduce variability in Cobb angle measurements and enhance clinical decisionmaking in scoliosis care

## Materials and Methods

**Dataset:** The data came in the form of AP X-Rays from scoliosis patients. Due to lack of ground-truth segmentation masks, hip segmentation was used as a proxy task.

### <u>Methodologies:</u>

- Hip Segmentation: We used a U-Net neural network to segment six anatomical regions on grayscale hip Xrays.
- 2. Direct Angle Regression: an end-to-end model that takes in a spinal X-ray and directly outputs the Cobb angle

We used three model architectures for the final regression pipeline:

- ConvNeXT: A hybrid model combining CNNs and transformer-inspired design
- Swin Transformer: Uses shifted windows to efficiently handle large images while maintaining context
- **ResNet-50**: A proven deep CNN known for robustness and simplicity through residual connections

# ScolA

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#### Model After First Epoch

- 80% training data & 20% validation data
- Model only sees set of training data once
- Predicted mask is noisy & does not resemble true mask





#### Model After 10th Epoch

- Model sees set of training data 10 times
- Begins to recognize key anatomical members at a higher rate





#### Model After 20th Epoch

- Model sees set of training data 20 times
- points
- Predicted mask closely resembles the ground truth mask



spinal data once annotations become available. We're optimistic about ScolAI's potential in clinical workflows.