

BBS Seminar: AI in Clinical Research and Drug Development and BBS General Assembly

Automated Total Metabolic Tumor Volume (aTMTV) and its Performance Assessment

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on behalf of the aTMTV model validation study team



Total metabolic tumour volume (TMTV) is a measure of total tumour burden ¹

TMTV is a quantitative radiological measurement of the total volume of all lesions visualised on FDG-PET/CT scans and has potential prognostic value in some lymphoma types

Example studies showing prognostic value of pre-treatment TMTV in different settings

Tumour burden has the potential to		DLE	3CL3		cular 1oma⁴		gkin 10ma ⁵
predict outcomes in people with lymphoma ^{1,2}	Pretreatment TMTV, cm ³	≤ 300	> 300	≤510	> 510	≤147	> 147
Treatment failure	5-year PFS rate, %	75	42	65	33	92	71

CT, computed tomography; FDG, 18F-fluorodeoxyglucose; PET, positron emission tomography; SUV, standardised uptake value; TMTV, total metabolic tumour volume. 1. Barrington SF, Meignan M. J Nucl Med 2019;60:1096–102; 2. El-Galaly TC et al. Br J Haematol 2022;197:139–55; 3. Capobianco N et al. J Nucl Med 2021;62:30–6; 4. Jemaa S et al. Cancer Imaging 2022;22:39;



Manual evaluation limit the broad adoption of Total metabolic tumour volume (TMTV)

The assessment of TMTV requires the segmentation of all malignant foci in the body A threshold may be applied to distinguish between physiological and pathological FDG-uptake – this may be calculated as either 41% of the maximum SUV, or a fixed SUV threshold of 2.5 or 4.0 may be applied^{1,2}

Semi-automated visualisation software can be used to define volumes of interest around the tumour, which are then manually adjusted by the radiologist or nuclear medicine physician based on their prior knowledge and experience^{3,4}



Current methods for delineating all tumour regions are challenging and time-consuming ^{1,3, 5, 6} The optimal cut-off value for determining the prognostic significance of TMTV has not yet been defined ² SUV thresholding methods for tumour segmentation have not been standardised or validated for use in clinical research and practice ^{1,2}

CT, computed tomography; FDG, 18F-fluorodeoxyglucose; PET, positron emission tomography; SUV, standardised uptake value; TMTV, total metabolic tumour volume. 1. Barrington SF, Meignan M. J Nucl Med 2019;60:1096–102; 2. El-Galaly TC et al. Br J Haematol 2022;197:139–55; 3. Capobianco N et al. J Nucl Med 2021;62:30–6; 4. Jemaa S et al. Cancer Imaging 2022;22:39; 5. Meignan M et al. Br J Radiol 2021;94:20210448; 6. Weisman AJ et al. Radiol Artif Intell 2020;2:e200016

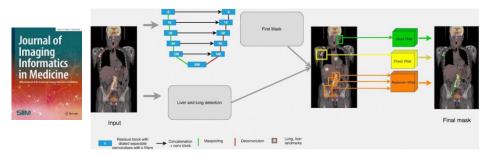


aTMTV is a machine-learning-based tumour assessment tool in development for use in people with FDG-avid lymphoma

Algorithm developed at Genentech

Skander Jemaa (Genentech) Rick Carano (Genentech)

Jemaa S et al. J Digit Imaging 2020



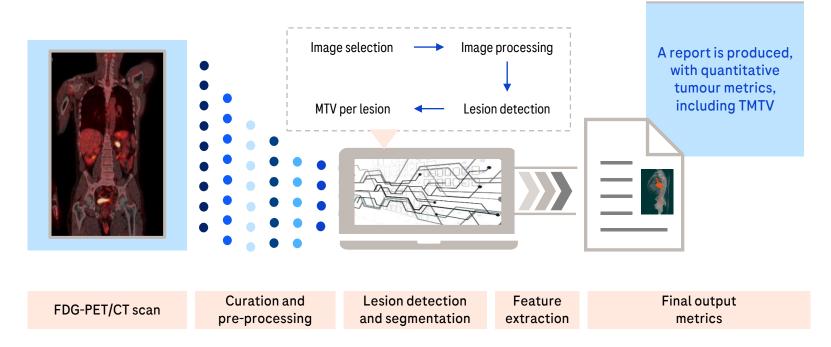
aTMTV is a machine-learning-based algorithm currently in development, which aims to automate lesion segmentation, lesion visualisation and TMTV assessment from whole-body FDG-PET/CT scans of people with FDG-avid lymphoma



aTMTV is an investigational device currently in development. aTMTV, automated total metabolic tumour volume; CT, computed tomography; FDG, 18F-fluorodeoxyglucose; mTMTV, manual total metabolic tumour volume; PET, positron emission tomography; TMTV, total metabolic tumour volume 1. Jemaa S et al. J Digit Imaging 2020;33:888–94; 2. Jemaa S et al. Cancer Imaging 2022;22:39.



aTMTV automates FDG-PET/CT scan analyses



aTMTV is an investigational device currently in development. aTMTV annotated images can be reviewed or edited by appropriately trained physicians. aTMTV, automated total metabolic tumour volume; CT, computed tomography; FDG, 18F-fluorodeoxyglucose; MTV, metabolic tumour volume; PET, positron emission tomography; TMTV, total metabolic tumour volume.



Methods for assessing model performance^{3,4}

aTMTV was trained and tested using a large, multicentre clinical trial dataset

aTMTV was trained and tested using retrospective data Pearson's correlation coefficient (r)extracted from two large, phase 3 multicentre trials was used to evaluate the performance in DLBCL and FL^{1,2} of aTMTV versus an expert radiologist Bias and variances were assessed using Independent test set a weighted Deming regression and **Training set** Baseline and post-treatment **Baseline and post-treatment** Bland-Altman analysis, respectively FDG-PET/CT scans from FDG-PET/CT scans from 166 participants with DLBCL 836 participants with DLBCL (the GOYA study) and Lesion detection performance was from 235 different study sites^{3,4} 201 participants with FL evaluated based on sensitivity and (the GOYA study) (the GALLIUM study)^{3,4} positive predictive values

GOYA, NCT01287741; GALLIUM, NCT01332968. FDG-PET/CT scans were acquired according to a standardised imaging charter using a range of scanner models. aTMTV, automated total metabolic tumour volume; CT, computed tomography; DLBCL, diffuse large B-cell lymphoma; FDG, 18F-fluorodeoxyglucose; FL, follicular lymphoma; PET, positron emission tomography. 1. Jemaa S *et al. Blood* 2019;134(Suppl 1):4666; 2. Jemaa S *et al. J Digit Imaging* 2020;33:888–94; 3. Xu. T. *et al.* Poster presented at 2023 European Hematology Association (EHA) Hybrid Congress, June 8–15, 2023. 4. Xu T. *et al.* Poster presented at the 17th International Conference on Malignant Lymphoma (ICML), June 13–17, 2023.



Samples selected for aTMTV performance exploratory study

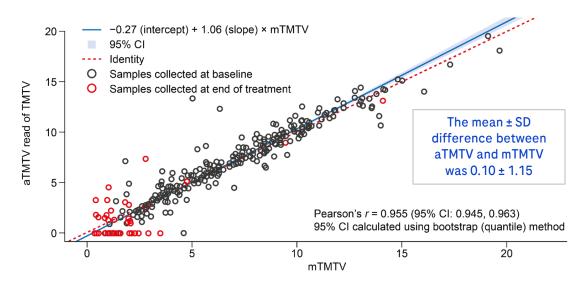
		Patients with DLBCL	Patients with FL (from GALLIUM) n = 201 123 (61.2)	
	Overall	(from GOYA)		
Characteristic, n (%)	n = 367	n = 166		
Sex, female	208 (56.7)	85 (51.2)		
Age, group, years				
< 65	237 (64.6%)	98 (59.0)	139 (69.2)	
≥ 65	130 (35.4%)	68 (41.0)	62 (30.8)	
Ethnicity				
Hispanic or Latin	33 (9.0%)	14 (8.4)	19 (9.5)	
Not Hispanic or Latin	304 (82.8%)	146 (88.0)	158 (78.6)	
Not reported or unknown	30 (8.2%)	6 (3.6)	24 (11.9)	
ECOG Performance Status				
0 or 1	343 (93.5%)	148 (89.2)	195 (97.0)	
2 or 3	24 (6.5%)	18 (10.8	6 (3.0)	
Presence of bulky disease	153 (41.7%)	60 (36.1)	93 (46.3)	
> 1 extra-nodal site	233 (63.5%)	113 (68.1)	120 (59.7)	
Bone marrow involvement, Yes	125 (34.1%)	17 (10.2)	108 (53.7)	



aTMTV correlation with mTMTV $^{1,2}\,$

Model testing

Deming regression fit between aTMTV versus mTMTV in cubic root (N = 367 participants with DLBCL or FL)



A slope of 1.06 (95% CI: 1.02, 1.09) and intercept of -0.27 (95% CI: -0.52, -0.03) indicate a lack of systematic bias between aTMTV quantification and mTMTV in people with DLBCL or FL

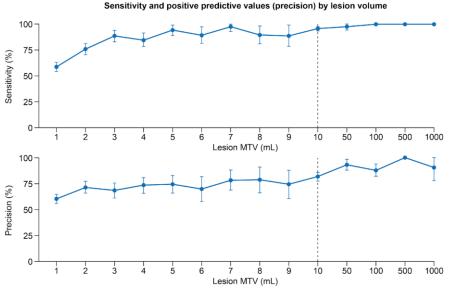
Agreement between aTMTV and mTMTV was consistent among patients with different demographics, clinical characteristics, and across scans from different PET/CT scanner manufacturers

aTMTV, automated total metabolic tumour volume; CI, confidence interval; DLBCL, diffuse large B-cell lymphoma; FL, follicular lymphoma; mTMTV, manual read of total metabolic tumour volume; TMTV, total metabolic tumour volume. 1. Xu. T. *et al.* Poster presented at 2023 European Hematology Association (EHA) Hybrid Congress, June 8–15, 2023. 2. Xu T. *et al.* Poster presented at the 17th International Conference on Malignant Lymphoma (ICML), June 13–17, 2023.



aTMTV lesion detection performance^{1,2}

Model testing



me Detection performance was lower for lesions ≤ 10 mL (sensitivity, 67%; precision, 72%) than for lesions > 10 mL (sensitivity and precision > 95%) Reduced algorithm performance for lesions ≤ 10 mL may be the result of higher variability among readers in the determination of small lesions; future work aims to optimise performance for use in clinical practice

lesions also detected by aTMTV

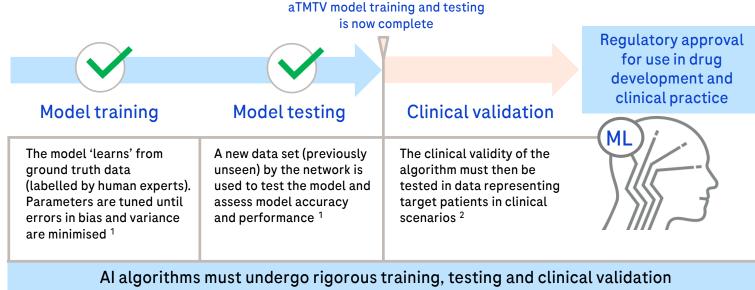


detected manually

The combined test set included 367 participants with DLBCL and FL. Sensitivity and positive predictive values (precision) are first calculated per patient, then summarised as mean values for the patient population. aTMTV, automated total metabolic tumour volume; DLBCL, diffuse large B-cell lymphoma; FL, follicular lymphoma; mTMTV, manual read of total metabolic tumour volume; MTV, metabolic tumour volume; TMTV, total metabolic tumour volume. 1. Xu. T. *et al.* Poster presented at 2023 European Hematology Association (EHA) Hybrid Congress, June 8–15, 2023. 2. Xu T. *et al.* Poster presented at the 17th International Conference on Malignant Lymphoma (ICML), June 13–17, 2023.



Clinical validation is the next stage of aTMTV development and a step closer towards regulatory approval



before they can be used in clinical practice

Doing now what patients need next