Ki67 Expression Classification from HE Images with Semi-Automated Computer-Generated Annotations

Dominika Petríková¹¹⁰^a, Ivan Cimrák¹¹^b, Katarína Tobiášová² and Lukáš Plank²⁰^c

¹Cell-in-fluid Biomedical Modelling & Computations Group, Faculty of Management Science and Informatics, University of Žilina, Slovak Republic

²Department of Pathology, Jessenius Medical Faculty of Comenius University and University Hospital, Martin, Slovak Republic

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Abstract: Ki67 protein plays crucial role in cell proliferation and it is considered a good marker for determining the cell growth. In histopathology, it is often assessed by immunohistochemistry (IHC) staining. Even though IHC is considered common practice in clinical diagnosis, it has several limitations such as variability and subjectivity. Meaning interpretation of IHC can be subjective and vary between individuals. Moreover, quantification can be challenging as well as it is cost and time consuming. Therefore neural network models hold promise for improving this area, however they require a large amount of high quality annotated dataset, which is time-consuming and laborious work for experts. In the paper, we employed the proposed semi-automated approach of generating Ki67 score from pairs of hematoxylin and eosin (HE) and IHC slides, which aims to minimize expert assistance. The approach consists of image analysis methods such as clustering optimization for tissue registration. Using a sample of 84 pairs of whole slide images of seminomas tissue stained by HE and IHC, we generated dataset containing approximately 30 thousand labeled patches. On the HE patches annotated by proposed approach, we executed several experiments on fine-tuning neural networks model to predict Ki67 score from HE images.

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1 INTRODUCTION

Digital pathology and image analysis have important roles in diagnostic of many diseases including cancer. It requires digital scans of high quality tissue samples in high-resolutions generated by digital scanners as whole slide images (WSIs). Development of digital scanners has enabled generation of large amounts of histopathology data, which can be processed by machine learning algorithms for many tasks including classification of the tisue specimen (Hamilton et al., 2014; Pantanowitz, 2010).

Histopathological analysis of all tissues, including malignant tumours, is performed on 3-4µm thick sections of formalin-fixed paraffin embedded (FFPE) sections stained first with hematoxylin and eosin. This staining enables basic evaluation of morphology of malignant tumour, including parameters such as mitotic activity, invasion of adjacent structures, and grading. Grading corresponds to the degree of resemblance of tumour cells to the original healthy tissue. Well-differentiated tumours (G1, G2) in general have a more favourable outcome, poorly differentiated tumours (G3 or G4 resp.) behave more agressively and have worse prognosis. Certain categories of tumours, such as neuroendocrine neoplasias of gastroenteropancreatobiliary and respiratory tract, require immunohistochemical analysis of tumor proliferation activity as a part of their grading. This analysis uses the IHC antibody against the so-called proliferation factor (Ki67), a nuclear protein associated with ribosomal RNA transcription expressed during interphase of proliferating cells (Bullwinkel et al., 2006). Testicular seminoma is the most common testicular germ cell tumour and the most common malignant tumour among young men (Krag Jacobsen et al., 1984). Prognosis depends on clinical stage at the time of diagnosis, tumour size, rete testis invasion and vascular invasion. Proliferation index in seminoma tends to exceed 50% (Rabes et al., 1985), but lower values (below 20%) can be found as well. High prolifera-

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^a https://orcid.org/0000-0001-8309-1849

^b https://orcid.org/0000-0002-0389-7891

[°] https://orcid.org/0000-0002-1153-1160

tion index in seminoma does not correlate with clinical stage and presence of distant metastases (Gallegos et al., 2011), however, one study detected a significant inverse association with rete testis invasion and the expression of Ki67 in more than 50% of cells (Lourenço et al., 2022). In order to initiate machine based learning on HE and Ki67 stained slides containing samples of testicular seminoma, we established three different thresholds for Ki67 expression: below 20%, 20-50% and above 50%.

In practice, multiple IHC and HE staining is performed on adjacent tissue sections. This allows pathologists to examine different tissue characteristics in the same area on adjacent slides. Although adjacent regions have similar spatial characteristics, they are not identical to other specimens. Moreover, these can still be rotated and displaced, so it is very important to align these differently stained histological scans together in order to use machine learning analysis.

Training a deep neural network requires a large amount of high quality annotated images as a training dataset. Since the WSIs are too large to be processed as a whole by the neural network, they need to be divided into smaller images, called patches. Consequently, for patch annotation we distinguish several approaches such as whole slide-level, region-level, cell-level. The difficulty of evaluating patches among these approaches increases rapidly in terms of the effort required for creation as well as the expertise of the evaluator.

Whole slide annotations are also referred to as weak annotations because all patches from a single slide share a common annotation, regardless of the fact that the tissue on them may be heterogeneous. Such a dataset may be easier to obtain, but its use is quite limited and requires a special approach called weakly-supervised learning. For example, (Li et al., 2021) used Multiple instance learning for prostate biopsy WSI classification and weakly-supervised tumor region detection.

In order to train a machine learning classifier for cell-level annotation, the images must first be annotated with the boundaries of each cell and its subtypes. The cell-level annotation process requires a huge manual effort, which can be facilitated by using cell segmentation followed by region-level annotation to capture cell-level features, such as presence of tumor infiltrating lymphocytes (Saltz et al., 2018). The use of region-level annotations assumes that the cells in the annotated region have the same cell types (Lee et al., 2021).

Region-level annotations require additional input from experts. For instance, pathologists have to local-

ize and annotate all pixels or cells in WSI by contouring the whole tumor. Although creating region-level (or patch-level) annotations is more challenging, it is reasonable and we will discuss this approach more in this paper. In (Yang et al., 2021), EfficientNet and ResNet (Residual Net) were employed to carry out patch-level classification of lung lesions into 6 types. To aggregate patch predictions into slide-level classification two methods were compared: majority voting and mean pooling. Similar approach was used in (Luo et al., 2022) to perform the binary subtype classification of eyelid carcinoma. Authors used DenseNet-161 to make predictions for every patch in WSI and then used a patch voting strategy to decide the WSI subtype.

Obtaining IHC staining is a standard procedure in clinical practice to determine tissue molecular information, however it has several limitations. IHC is time-consuming, expensive, and highly dependent on tissue handling protocols because the output is expressed as stain intensity or presence/absence of stain or the percentage of cells that achieve detectable stain intensity (Naik et al., 2020). Many recent studies showed that there exists correlation between HE and IHC stained slides from the same region (Naik et al., 2020; Seegerer et al., 2020; Rawat et al., 2020). Therefore it should be possible to predict expression of specific proteins directly from HE slides. The problem of prediction Ki67 cell positivity from HE images was addressed in (Liu et al., 2020). Authors fine-tuned ResNet18 at the cell-level annotated HE images. To obtain annotated cell patches point label approach on homogeneous Ki67 positive or negative regions was employed. Subsequently, trained CNN was transformed into fully convolutional network, so it was able to handle WSI as input and prodcuse heatmap of Ki67 concentration on the whole slide image as output. In (Shovon et al., 2022), modified Xception network was proposed to classify HE images into four categories based on Human epidermal growth factor receptor 2 (HER2) positivity.

Contents of This Work

The aim of this work is to train neural network model for classification of Ki67 protein expression from HE images. First, we describe the proposed method of semi automated dataset creation and then show experiments made in training several neural network models for classification.

The dataset consists of individually labeled HE patches representing the amount of Ki67 protein expressed on that patch. These patches were cut from HE whole slide images and annotated based on Ki67

expression on IHC whole slide images of the same tissue. For the purpose of training the neural network, HE and IHC staining was used on adjacent tissue sections to make the tissue as identical as possible. Hence we assume that based on spatial proximity of the physical slides from which HE and Ki67 images were obtained, a patch from the HE whole slide image can be labelled by the patch from the Ki67 whole slide image from the same location.

In Section 2 we describe laboratory and mathematical methods. First we describe laboratory protocols for tissue sample and image acquisition. Then we present data preprocessing and steps leading to creating annotations. Further we present optimization method used to align Ki67 and HE images. Finally, the end of the section is devoted to introduction of machine learning methods, specifically neural networks, for prediction tasks with image data.

In Section 3 we provided details of the data annotation and dataset creation process. This includes results of the enhanced Ki67 and HE images registration through optimization method with defined key points. Further we show details of color clustering and modifications needed. Finally, we present experiment results of a neural networks classification of HE patches into two Ki67 labels.

2 METHODS

2.1 Image Acquisition

84 samples of testicular seminoma were sectioned into 3-4mm thick parallel FFPE sections. HE staining was performed on Tissue-Tek Prisma® Plus Automated Slide stainer (Sakura Finetek Japan Co.,Ltd.) on deparaffinized sections with Weigert hematoxylin, which were then washed and differentiated with low pH alcohol, washed and put into eosin, dehydrated, cleared with carboxylole and xylene and finished slides were coverslipped with Tissue-Tek Film® Automated Coverslipper (Sakura Finetek Japan Co., Ltd.). Immunohistochemical analysis was performed with the monoclonal mouse antibody clone MIB-1 (FLEX, Dako), on automatized platform PTLink (Dako, Denmark A/S). Visualization was performed using EnVision FLEX/HRP (Dako), DAB (EnVision FLEX, Dako) and cotrast hematoxylin staining. HE and Ki67 whole slides from the same case were ordered successively, anonymized and scanned in 3D Histech PANORAMATIC© 250 Flash III 3.0.3, in BrightField Default mode. WSIs were annotated for areas of tumour and non-tumorous tissue and for the so-called "hot spots" with the highest density of positive IHC reaction.

2.2 Data Preprocessing

In order to use image analysis methods on the data, we first had to convert it from the original mrxs format to png using the OpenSlide library in python. The original format can store images of samples from glass slides at multiple levels with different resolutions. Our scans contain images in 8 levels. Due to the memory requirements of the highest resolution images, we decided to process the images at a lower level with second highest resolution. They are still detailed enough without information loss while not causing a memory problem. HE scans contained two tissue sections, therefor we extracted super patches containing only one tissue from the original scans. The same procedure was also applied to IHC scans, which significantly reduced the size of the resulting png images.

Obtained data do not contain any additional information about Ki67 expression that could be used as a label apart from the pairs of scans themselves. Therefore, we devised improved method based on (Petríková et al., 2023) to estimate the ratio of positive cells to all cells on patches from Ki67 scans, which we then use as annotations for HE patches. Proposed method consists of three steps: slides registration, colors clustering, quantification of Ki67 score.

Each tissue sample is rotated differently on the slide. First, it was necessary to align the images so that tissues from the same area are in the same position. We defined alignment as rotation and shift. In our improved method, we tried a different approach of registration, which will be described in the next subsection.

After slides alignment, K-means clustering is applied to Ki67 stained image to obtain main colors of the tissue. These colors are then divided into three categories: positive cells (brown colors), negative cells (blue colors) and background (white colors). Next, the whole image is recolored according to clustering result. From obtained recolored Ki67 image it is possible to estimate Ki67 score as:

$$ratio = \frac{brown pixels}{brown pixels + blue pixels}$$
(1)

2.3 BFGS Optimization

To align the pairs of scans, we needed to find transformation parameters to rotate and shift the images using the defined key points. That is, for pairs of key points from the Ki67 scan and the HE scan that corresponded to the same location on the tissue, we needed to optimize two transformation parameters.

The BFGS method (named for its discoverers Broyden, Fletcher, Goldfarb and Shanno) is the most popular second order optimization algorithm belonging to class of quasi-Newton methods. These methods approximate the second derivative also called the Hessian and the inverse of the Hessian matrix using the gradient, meaning that the Hessian and its inverse do not need to be available or calculated precisely for each step of the algorithm. By measuring the changes in gradients, quasi-Newton methods construct a model of the objective function that can produce superlinear convergence. They require only gradient of the objective function at each iteration, which makes them sometimes more efficient than Newton's method since second derivatives are not required. In Newton's methods Hessian can be used to determine both the direction and the step size to move, so the input parameters change in order to minimize the objective function. In BFGS, the direction of move can be expressed from approximation of inverse of Hessian like:

$$\boldsymbol{p}_k = -H_k \nabla f_k. \tag{2}$$

However it is not possible to use approximation of the Hessian inverse to determine step size α_k . The algorithm addresses this by using a line search in the chosen direction to determine how far to move in that direction that satisfies Wolfe conditions. From direction p_k and step size α_k new iterate can be computed as:

$$x_{k+1} = x_k + \alpha_k p_k, \tag{3}$$

. To simplify the formula for inverse Hessian approximation, we can define the vectors s_k and y_k as:

$$s_k = x_{k+1} - x_k, \tag{4}$$

$$y_k = \nabla f_{k+1} - \nabla f_k. \tag{5}$$

The solution of inverse Hessian approximation is then given by

$$H_{k+1} = (I - \rho_k s_k y_k^T) H_k (I - \rho_k y_k s_k^T) + \rho_k s_k s_k^T, \quad (6)$$

with

$$\rho_k = \frac{1}{y_k^T s_k}.\tag{7}$$

Given starting point x_0 , convergence tolerance $\varepsilon > 0$ and inverse Hessian approximation H_0 , the BFGS algorithm can be summarized as follows:

1. set
$$k = 0$$

- 2. while $\|\nabla f_k\| > \varepsilon$;
- 3. compute search direction p_k and step size α_k
- 4. set x_{k+1} according to (5)
- 5. compute H_{k+1} by means of (6)

6. set k = k + 1

7. end (while).

Before running the algorithm, it is necessary to found initial approximation H_0 . There is no general procedure on how to set the initial approximation. It is possible to set it as an identity matrix or its multiple, or to use problem specific information (Nocedal and Wright, 2006; Griva et al., 2008).

2.4 Convolutional Neural Networks

Ever since it was possible to scan and load images into computers, researchers were trying to develop automated system for image analysis. One of the most popular machine learning approaches used in medical image analysis are supervised techniques using example data with corresponding labels. The basis of these algorithms is to learn connections and patterns in data itself to find a model for mapping inputs to outputs. Creating model involves finding the best parameters that can be used to predict outputs for inputs based on a defined loss function (Jordan and Mitchell, 2015; Litjens et al., 2017).

Neural networks form the basis of the most deep learning algorithms. They consist of neurons, interconnected units, with activation and parameters organized into multiple layers. By now, there are several types of neural networks adapted to certain tasks.

One of the most widely used is the convolutional neural networks (CNNs). It was primarily introduced for processing of visual data like images and videos, although, they can be extremely useful for almost any type of data (Litjens et al., 2017; Wang et al., 2018). CNNs consist of three types of layers: convolutional layers, pooling layers, and fully connected layers. The most significant component of the CNN architecture is the convolutional layer with its filters, also called kernels. Kernels are represented as a grid of discrete values referred to as kernel weights and contribute to the convolution operation. In particular, these kernel weights, adjusted during training, slide over the entire image horizontally and vertically to obtain a feature maps. The dimensionality of generated feature maps is reduces by pooling layers. Convolutional layers together with pooling layers build pipeline called feture extraction, which detects local features in the input data. Similar to classical multilayer perceptron networks, the lower layers of CNNs learn basic features and kernels of deeper layers learn more and more complex features. At the end of CNN architecture, there are fully-connected layers, which combine local features extracted by the previous layers to obtain global features, and perform the final classification task (Ahmad et al., 2019; O'Shea and



Figure 1: Convolutional neural network architecture.

Nash, 2015; Alzubaidi et al., 2021). Typical CNN architecture is displayed in Figure 1

Critical factor in improving the performance of different applications is model architecture. From first CNN model, various modifications have been achieved. Key upgrade in performance of CNNs occurred due to the processing-unit reorganization, as well as the development of novel blocks. The most novel developments in CNN architectures were performed on the use of network depth (Alzubaidi et al., 2021). To date, there are several proven architectures that are frequently used in a wide range of domains. These architectures can be trained with initialized weights from scratch or fine tuned from pretrained weights on known large datasets such as ImageNet. Examples of such architectures are VGG (Visual Geometry Group), ResNet, DenseNet or nets from the Inception family.

3 RESULTS

3.1 HE - Ki67 Registration

For this research, we were able to produce 84 pairs of HE and Ki67 scans of tissue specimens of seminomas (testicular tumors). Before the actual optimization of the rotation and displacement parameters, it was necessary to define key points for each pair of scans and mark them on the images. For this, we used the SlideViewer software, which can display multiple scans simultaneously and create annotations. Each key point was created as a square annotation, with five key points defined for a single pair of scans. In addition to these, on each slide we marked with a square annotation the area where the tissue is located and which will be further processed. This allowed us to make tissue bounding box cutouts from the WSIs, which significantly reduced the size of the images. The adjacent image pairs were adjusted to have the same dimensions by adding white pixels to the smaller one. The existing annotations were exported to xml files via SlideMaster and converted to key point coordinates, taking the center of the annotation as the coordinate. The objective function was the sum of the distances of each pair of the original HE coordinates and the calculated new IHCs. The new coordinates were calculated from the parameters of the current iteration using matrix operations for inplane translation and rotation. The resulting rotation was applied to the IHC image, performing it around the center with pixel replenishment. We added white pixels to the HE image to make it the same size and centered it. We then shifted the original HE tissue image by the calculated parameter in the negative direction, resulting in an aligned pair of images with the same dimensions. An illustration of the transformation performed along with the key points highlighted is shown in Figure 2. With this procedure, we were able to automatically align 79 pairs of scans.



Figure 2: Registration example, on the left original HE tissue with highlighted keypoints (blue points), in the middle original IHC tissue with highlighted keypoints (red points), on the right overlay of HE tissue with registered IHC tissue.

3.2 Construction of Dataset

The next step in annotation extraction was to apply the Kmeans clustering algorithm to the IHC images to obtain the dominant colors. Due to the size of the images we were working with, it was not possible to apply clustering to the whole image at once, but had to be divided into smaller parts. However, even on the smaller parts, the algorithm took several hours to compute, significantly increasing the number of hours spent per image. Therefore, we decided not to do clustering on all parts of the image, but to choose one region that is quite representative and contains a wide range of all colors. Subsequently, all pixels from the image were assigned to one of the obtained centroids.

These centroids had to be categorized into one of three classes: Ki67 positive cell (brown), Ki67 negative cell (blue), and background (white) based on which objects in the scan corresponded to each color. Even though we increased the number of clusters k from the original 6 to 12, for some scans there were no brown shades among the dominant colors. This is due to the general low Ki67-positivity of the tissue on our scans. Applying such centroids would have suppressed the low number of Ki67-positive cells to



Figure 3: Comparison of original image and recolored one after clustering.

zero, thus creating incorrect, misleading annotations. In this case, we used centroids from another image that had a similar color spectrum and its centroids contained brown. An example of a comparison between the original IHC tissue and an image recolored into 3 colors based on centroids is shown in Figure 3. The recolored image served as the basis for the evaluation of Ki67 patch scores according to the formula (1).

HE patches with annotation estimated from patches of the redrawn image were generated with a size of 224x224 pixels and only under the condition that the pixel ratio in the white shades corresponding to the background was below a certain threshold. For HE patches we set the threshold to 40%, for Ki67 patches the value was higher, up to 60%. However, even among these patches, there were still some patches that did not contain cells, in case the background color was darker than our thresholds. Therefore, it was still necessary to additionally remove the incorrect data. From the counts of generated patches mentioned above, it is clear that our dataset is heavily imbalanced, which may cause problems during model training. Due to the high amount of data, we decided to balance the dataset using an undersampling method, in which the classes with higher data counts are reduced in the process. We randomly selected approximately 10,000 patches from the below 20% and 20-50% categories to be used as part of the dataset.

The resulting dataset thus had the following distribution: 9632 patches of below 20%, 9419 patches of 20-50% and 10 576 patches of above 50%. The example of detailed distribution of the first class in dataset is displayed in the histogram Figure 4.

3.3 Training Neural Networks

For the purpose of validation, we split the dataset into training and validation sets in a 9:1 ratio. In addition to data balancing, we also used horizontal and vertical flip data augmentation for training. Moreover, the data were normalized before entering into the model.

In all experiments, we trained the ResNet archi-



Figure 4: Dataset distribution of class below 20%, on x axis, there is Ki67 ratio of patches grouped into bins by 2%, y axis represents counts of patches.

Table 1: Accuracy of ResNet18 model with different learning rates.

Learning rate	0.1	0.01	0.001
Accuracy	0,7785	0,7674	0,7471

tecture with pre-trained weights on ImageNet namely ResNet50 and smaller ResNet18. Since preliminary results showed that ResNet18 exhibited higher accuracy on the validation set, we decided to further investigate the best hyperparameter setting on this architecture only. We replaced the classification part of the original architecture with two fully-connected layers with 512 and 3 neurons respectively. A dropout with a value of 0.2 was used on the penultimate layer. In addition to the network depth itself, we also compared two types of optimizer: Adam and SGD (Stochastic gradient descent). In Figure 5 we can see example plots of the evolution of the loss on the validation and training sets for both optimizers. From the comparison, we can observe that the loss progression with SGD was more stable, so we used only the latter in the following experiments. All models were trained for 50 epochs with a batch size of 64, unless otherwise stated. Below we describe the most important

In Table 1 are the results of the models for different learning rates. Although in this case 0.1 seemed to be the best choice, in later experiments 0.01 proved to be a better choice.

Because of the present overfitting, we tried adding regularization and momentum in the next experiment (Table 2). Among several possibilities, 0.0001 proved to be the best value for weight decay. Larger values caused the model to be underfitted adn lower values failed to eliminate the overfitting problem. We tried to increase the accuracy by changing the batch size, but as we can see in the Table 3 the chosen batch size



Figure 5: Comparison of ResNet18 model loss function with optimizer Adam (left) and SGD (right).

Table 2: Accuracy of ResNet18 model with different parameters of regularization and momentum.

Weight decay	Momentum		
weight decay	None	0.9	
None	0,7539	0,7768	
0.0001	0,7391	0,7907	

64 achieved the highest accuracy.

The highest accuracy achieved on the validation set was 0.79, which is quite low. From the confusion matrix of the best model on the validation set shown in Figure 6, it is clear that it is most difficult for the model to distinguish patches from the category below 20%. But it is able to distinguish between the other two categories quite well. To test this hypothesis, we tried to train a binary model distinguishing between patches from the 20-50% and above 60% category. We purposely omitted the interval between 50 and 60% to test what accuracy it achieves on a simpler task. In this case, the best model achieved 0.8595 accuracy, and after adding the omitted interval to the new model, the accuracy only dropped to 0.8484.

Even though the model achieves higher accuracy for binary classification, neural networks have the potential to achieve better results. Therefore, we proposed possible reasons and improvements for the future, mainly related to dataset modification. As a first step, we need to verify that our proposed annotation method is correct on this data as well, since it differs from the data on which it was originally validated. Another problem could be that patches are generated from the whole slide and although we tried to automatically discard those containing a small amount of tissue, we could not remove all of them. In addition, there are also parts of the tissue where there are few cells or the tissue is somehow damaged. These areas would need to be discarded or regions of interest marked on the slides from which to determine the score.

Table 3: Accuracy of ResNet18 model with different batch size.

Batch size	8	32	64	128
Accuracy	0,7417	0,7758	0,7907	0,7812



Figure 6: Confusion matrix of the best multiclass ResNet18 model on validation set, on x axis predicted classes, on y axis actual (ground truth) classes.

4 CONCLUSIONS

In this paper, we attempted to develop a neural network model for classifying Ki67 scores from HE images using a semi-automated annotation generation method. We proposed an improvement to the previous annotation extraction method. In contrast to (Petríková et al., 2023), we used manually defined keypoint pairs for registration. Among these pairs, we found the optimal transformation parameters using the BFGS optimization method. With this improvement, we were able to successfully register most of the scan pairs. Then, with the labeled patches, we tried to train several models on multi-class classification as well as on the binary classification task.

Nevertheless, this work has several limitations involving the lower accuracy of the classification models on the validation set. We have proposed several reasons for this and possible solutions for the future concerning the modification of the training dataset. Regardless of this, it is clear from the results that neural networks have the potential to estimate IHC features directly from HE stained tissue. However, this is only the beginning of our experiments with training neural network models. There are still challenges, like:

- 1. The accuracy of the workflow for generating Ki67 score annotations on this data is unknown. Since we do not have any annotations on our data, we are not able to judge whether our approach is accurate or has some bias. In the future, our goal is to use medical software to obtain estimates of Ki67 scores on some scans and compare them with the estimates generated by semi-automated method.
- 2. Proliferation activity needs to be evaluated within areas of the highest density of positive staining

(so-called hot spots) on the minimal number of 500 tumour cells, ideally more than 1000. Other populations present in tumour, such as stromal tissue and tumour infiltrating immune cells, also stain with Ki67 and can skew the result. These cells are not included into the tumor proliferation activity evaluation. Currently available machine based learning programs allow training of recognition of tumour and non-tumour cells in order to maintain a highly reliable result comparable with manual counting of a trained pathologist. In order for the model's predictions to be closer to the pathologists' procedure, it will be necessary to train and evaluate the model only on patches from tumor region.

Our future research will mainly focus on the following aspects. First, improve the accuracy of the models by conducting a wider range of experiments. Part of this step will also be the verification of the annotations generating method and a closer examination of the data that are incorrectly classified by the model. Second, employ explanation methods on neural networks, so we will gain better knowledge about the areas according to which the model makes decisions.

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REFERENCES

- Ahmad, J., Farman, H., and Jan, Z. (2019). Deep Learning Methods and Applications, pages 31–42. Springer Singapore, Singapore.
- Alzubaidi, L., Zhang, J., Humaidi, A. J., Al-Dujaili, A., Duan, Y., Al-Shamma, O., Santamaría, J., Fadhel, M. A., Al-Amidie, M., and Farhan, L. (2021). Review of deep learning: concepts, cnn architectures, challenges, applications, future directions. *Journal of Big Data*, 8(1):53.
- Bullwinkel, J., Baron-Lühr, B., Lüdemann, A., Wohlenberg, C., Gerdes, J., and Scholzen, T. (2006). Ki-67 protein is associated with ribosomal RNA transcription in quiescent and proliferating cells. *J. Cell. Physiol.*, 206(3):624–635.
- Gallegos, I., Valdevenito, J. P., Miranda, R., and Fernandez, C. (2011). Immunohistochemistry expression of p53, ki67, CD30, and CD117 and presence of clinical metastasis at diagnosis of testicular seminoma. *Appl. Immunohistochem. Mol. Morphol.*, 19(2):147–152.
- Griva, I., Nash, S. G., and Sofer, A. (2008). *Linear and Nonlinear Optimization (2. ed.).* SIAM.

- Hamilton, P. W., Bankhead, P., Wang, Y., Hutchinson, R., Kieran, D., McArt, D. G., James, J., and Salto-Tellez, M. (2014). Digital pathology and image analysis in tissue biomarker research. *Methods*, 70(1):59–73. Advancing the boundaries of molecular cellular pathology.
- Jordan, M. I. and Mitchell, T. M. (2015). Machine learning: Trends, perspectives, and prospects. *Science*, 349(6245):255–260.
- Krag Jacobsen, G., Barlebo, H., Olsen, J., Schultz, H. P., Starklint, H., Søgaard, H., and Vaeth, M. (1984). Testicular germ cell tumours in denmark 1976-1980. pathology of 1058 consecutive cases. *Acta Radiol. Oncol.*, 23(4):239–247.
- Lee, K., Lockhart, J. H., Xie, M., Chaudhary, R., Slebos, R. J. C., Flores, E. R., Chung, C. H., and Tan, A. C. (2021). Deep learning of histopathology images at the single cell level. *Frontiers in Artificial Intelligence*, 4.
- Li, J., Li, W., Sisk, A., Ye, H., Wallace, W. D., Speier, W., and Arnold, C. W. (2021). A multi-resolution model for histopathology image classification and localization with multiple instance learning. *Computers in Biology and Medicine*, 131:104253.
- Litjens, G., Kooi, T., Bejnordi, B. E., Setio, A. A. A., Ciompi, F., Ghafoorian, M., van der Laak, J. A., van Ginneken, B., and Sánchez, C. I. (2017). A survey on deep learning in medical image analysis. *Medical Image Analysis*, 42:60–88.
- Liu, Y., Li, X., Zheng, A., Zhu, X., Liu, S., Hu, M., Luo, Q., Liao, H., Liu, M., He, Y., and Chen, Y. (2020). Predict ki-67 positive cells in h&e-stained images using deep learning independently from ihc-stained images. *Frontiers in Molecular Biosciences*, 7.
- Lourenço, B. C., Guimarães-Teixeira, C., Flores, B. C. T., Miranda-Gonçalves, V., Guimarães, R., Cantante, M., Lopes, P., Braga, I., Maurício, J., Jerónimo, C., Henrique, R., and Lobo, J. (2022). Ki67 and LSD1 expression in testicular germ cell tumors is not associated with patient outcome: Investigation using a digital pathology algorithm. *Life (Basel)*, 12(2).
- Luo, Y., Zhang, J., Yang, Y., Rao, Y., Chen, X., Shi, T., Xu, S., Jia, R., and Gao, X. (2022). Deep learning-based fully automated differential diagnosis of eyelid basal cell and sebaceous carcinoma using whole slide images. *Quantitative Imaging in Medicine and Surgery*, 12(8).
- Naik, N., Madani, A., Esteva, A., Keskar, N. S., Press, M. F., Ruderman, D., Agus, D. B., and Socher, R. (2020). Deep learning-enabled breast cancer hormonal receptor status determination from base-level H&E stains. *Nat. Commun.*, 11(1):5727.
- Nocedal, J. and Wright, S. (2006). *Numerical Optimization*. Springer Series in Operations Research and Financial Engineering. Springer, New York, NY, 2 edition.
- O'Shea, K. and Nash, R. (2015). An introduction to convolutional neural networks.
- Pantanowitz, L. (2010). Digital images and the future of digital pathology: From the 1st digital pathology summit, new frontiers in digital pathology, university of nebraska medical center, omaha, nebraska 14-15 may 2010. Journal of Pathology Informatics, 1(1):15.

- Petríková, D., Cimrák, I., Tobiášová, K., and Plank, L. (2023). Semi-automated workflow for computergenerated scoring of Ki67 positive cells from he stained slides. In *BIOINFORMATICS*, pages 292– 300.
- Rabes, H. M., Schmeller, N., Hartmann, A., Rattenhuber, U., Carl, P., and Staehler, G. (1985). Analysis of proliferative compartments in human tumors. II. seminoma. *Cancer*, 55(8):1758–1769.
- Rawat, R. R., Ortega, I., Roy, P., Sha, F., Shibata, D., Ruderman, D., and Agus, D. B. (2020). Deep learned tissue "fingerprints" classify breast cancers by er/pr/her2 status from h&e images. *Scientific Reports*, 10(1):7275.
- Saltz, J., Gupta, R., Hou, L., Kurc, T., Singh, P., Nguyen, V., Samaras, D., Shroyer, K. R., Zhao, T., Batiste, R., Van Arnam, J., Cancer Genome Atlas Research Network, Shmulevich, I., Rao, A. U. K., Lazar, A. J., Sharma, A., and Thorsson, V. (2018). Spatial organization and molecular correlation of tumor-infiltrating lymphocytes using deep learning on pathology images. *Cell Rep.*, 23(1):181–193.e7.
- Seegerer, P., Binder, A., Saitenmacher, R., Bockmayr, M., Alber, M., Jurmeister, P., Klauschen, F., and Müller, K.-R. (2020). Interpretable Deep Neural Network to Predict Estrogen Receptor Status from Haematoxylin-Eosin Images, pages 16–37. Springer International Publishing, Cham.
- Shovon, M. S. H., Islam, M. J., Nabil, M. N. A. K., Molla, M. M., Jony, A. I., and Mridha, M. F. (2022). Strategies for enhancing the multi-stage classification performances of her2 breast cancer from hematoxylin and eosin images. *Diagnostics*, 12(11).
- Wang, M., Lu, S., Zhu, D., Lin, J., and Wang, Z. (2018). A high-speed and low-complexity architecture for softmax function in deep learning. In 2018 IEEE Asia Pacific Conference on Circuits and Systems (APCCAS), pages 223–226.
- Yang, H., Chen, L., Cheng, Z., Yang, M., Wang, J., Lin, C., Wang, Y., Huang, L., Chen, Y., Peng, S., Ke, Z., and Li, W. (2021). Deep learning-based six-type classifier for lung cancer and mimics from histopathological whole slide images: a retrospective study. *BMC Med.*, 19(1):80.