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# Blood vessel enhancement via multi-dictionary and sparse coding: Application to retinal vessel enhancing

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#### Abstract

Blood vessel images can provide considerable information of many diseases, which are widely used by ophthalmologists for disease diagnosis and surgical planning. In this paper, we propose a novel method for the blood Vessel Enhancement via Multi-dictionary and Sparse Coding (VE-MSC). In the proposed method, two dictionaries are utilized to gain the vascular structures and details, including the Representation Dictionary (RD) generated from the original vascular images and the Enhancement Dictionary (ED) extracted from the corresponding label images. The sparse coding technology is utilized to represent the original target vessel image with RD. After that, the enhanced target vessel image can be reconstructed using the obtained sparse coefficients and ED. The proposed method has been evaluated for the retinal vessel enhancement on the DRIVE and STARE databases. Experimental results indicate that the proposed method can not only effectively improve the image contrast but also enhance the retinal vascular structures and details.

#### Keywords

Blood vessel enhancement; Multi-dictionary; Sparse coding; Retinal vessel image

#### **1. Introduction**

The human body contains different types of blood vessels, which constitute a network of arteries and veins. The visualization of these blood vessels is important for disease diagnosis and improving the planning and navigation in interventional procedures [1-4]. For instance, retinal vessel images are widely used by ophthalmologists for the disease diagnosis such as diabetes, hypertension, cardiovascular disease and stroke. In case of changes in vessel caliber, branching angle or vessel tortuosity are results of hypertension [5]. The onset of neovascularization is a sign of diabetic retinopathy, and a complication of diabetes which leads to the cause of blindness [6]. However, due to the imperfect imaging condition, the quality of blood vessel images is usually poor, making it hard to recognize the vascular structure clearly. An effective way to overcome these issues is to use the image enhancement technology. The main purpose of blood vessel enhancement is to highlight the vascular structures and details [7-9]. In this paper, we propose a novel method for the blood Vessel Enhancement via Multi-dictionary and Sparse Coding (VE-MSC). The DRIVE<sup>1</sup> and STARE<sup>2</sup> databases are used to evaluate the proposed method. Experimental results demonstrate that the image contrast is effectively improved and the retinal vessel structures and details are well enhanced. A comparison with state-of-the-art methods has also been carried out in the retinal vessel enhancement.

The rest of the paper is organized as follows. In Section 2, the related works about blood vessel enhancement are briefly reviewed. The proposed method VE-MSC and its application on

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1. http://www.isi.uu.nl/Research/Databases/DRIVE/

2. http://www.ces.clemson.edu/~ahoover/stare/

vessel enhancement are presented in Section 3. In Section 4, the performance of retinal vessel enhancement is assessed by experiments on the DRIVE and STARE databases. Finally, a conclusion is given in Section 5.

#### 2. Related works

According to different emphasis on the prior knowledge, blood vessel enhancement methods can be categorized into three groups: histogram based, transformation based and filter based.

(1) *Histogram-based* method [10-14] utilizes the prior information of blood vessel to equal the histogram distribution. For instance, histogram equalization (HE) [15] and contrast limited adaptive histogram equalization (CLAHE) [16] are two basic methods used for the retinal vessel enhancement. However, some retinal vessel details are lost during the equalization. Kuldeep et al. [17] proposed a contrast enhancement method based on the sub-image histogram equalization for low exposure gray scale image. The histogram was clipped using a threshold value as an average number of gray level occurrences to control the enhancement rate, but it was only used for the low exposure gray scale image.

(2) *Transformation-based* method transfers the image to other space [18-21], where the blood vessel can be enhanced. Miao et al. [22] proposed a retinal vessel enhancement algorithm based

on multi-scale top-hat transformation and histogram fitting stretching. However, part of the vascular structures were changed through the transformation and histogram stretching. In addition, some parameters utilized in the method were sensitive to the initialization. Li et al. [23] applied the fractional Fourier transformation to the image enhancement. However, it also suffered the blood vessel details lost problem during the selection of image features.

(3) *Filter-based* method utilizes a filter or multiple filters [24-27] to enhance the blood vessel. Fraz et al. [28] proposed a retinal vessel enhancement method based on decision trees and Gabor filter, while it also had the vascular details lost problem. To overcome these weaknesses, a medical image enhancement method using morphology-based homo-morphic filtering technique was developed by Oh et al. [29]. However, the contrast of the blood vessel was low, and the vascular details lost problem was also existed.

The vascular details enhanced by these classical reported methods in literatures are hardly to be completely reserved, and the contrast of the enhanced vascular image is not high enough. To solve these problems, a novel blood vessel enhancement method using multi-dictionary and sparse coding is proposed in this paper. To the best of our knowledge, this is the first time to achieve the blood vessel enhancement via multi-dictionary and sparse coding. In order to gain the blood vascular structures and details, two corresponding dictionaries are generated. One is the representation dictionary (RD) generated from the blood vessel images, the other one is the enhancement dictionary (ED) extracted from the corresponding label images. The patches in RD and ED are selected through the information of the label images to optimize the multi-dictionary. Then the input target image is represented by RD to get the sparse coefficients via a sparse coding process. Finally, the enhanced blood vessel image is obtained from the solved sparse coefficients and ED. The effect of dictionary patch size and dictionary patch selection are analyzed in the experiments.

# **3.** Vessel Enhancement via Multi-dictionary and Sparse Coding (VE-MSC)

#### 3.1. RD and ED generation

Dictionary based methods have been studied in medical image processing [30-33], which differs in how they form the overcomplete dictionary. For instance, Chen et al. [34] proposed a Low-Dose CT (LDCT) image processing method based on artifact suppressed dictionary learning, where an overcomplete global dictionary was included. Li et al. [35] used the group-sparse representation with dictionary learning for medical image denoising and fusion, and the dictionary utilized was also overcomplete. In the proposed method, both the generated RD and ED are overcomplete, which are then used for enhancing the blood vascular structures and details.

Each patch in RD has the unique and corresponding patch in ED, and they have the same location in the respective dictionary. RD is generated from the original blood vessel images, ED is extracted from the corresponding label images with value 0 or 1. Let f be a 2D gray image in a blood vessel image database. The image size of f is  $M \times M$ , and its sequence number in the blood vessel image database is k. Then a pixel with the location (x, y) in f can be remarked as f(x, y, k). Let  $f_l$  be the corresponding label image of f, which is the blood vessel segmentation result delineated manually by an expert. Then the corresponding label value of f(x, y, k) in the label image  $f_l$  is denoted as  $f_l(x, y, k)$ . A patch in RD ( $p^{\text{RD}}$ ) and its corresponding patch in ED ( $p^{\text{ED}}$ ) are defined as:

$$p^{\text{RD}}: f(\tau + s, \tau + s, k), \tau = -h, -h + 1, \dots h \quad if \sum_{\tau = -h}^{h} f_l \ge t$$

$$p^{\text{ED}}: f_l(\tau + s, \tau + s, k), \tau = -h, -h + 1, \dots h \quad if \sum_{\tau = -h}^{h} f_l \ge t$$
(1)

where  $\forall s \in \{d, 2d, 3d, ..., md\}$ ,  $\forall k \in \{1, 2, ..., L\}$ , h is the patch size, d is a step value used to gain different patches, m is the integer part of M/d, L is the amount of blood vessel images in the database, and t is a patch selection threshold value used to optimize the dictionaries. Fig .1 shows some patches in the RD and ED with h = 4, t = 10. The red boxes in





**Fig. 1.** Patches in the RD and ED, h = 4, t = 10. (a) RD, the patches are extracted from the DRIVE training set, only use the green channel, (b) ED, the patches are extracted from the corresponding retinal vessel segmentation results (label images from the first expert).

the corresponding patches, they have the same location in the respective dictionary. Most patches in the dictionaries contain blood vessels due to the patch selection in Eq. (1). The impact of background is mostly eliminated through the ED, and the blood vascular structures and details can be mostly reserved by the two dictionaries.

#### 3.2. Sparse coding and blood vessel enhancement

The multi-dictionary (RD and ED) is generated from Eq. (1), in order to describe the dictionaries clearly, let  $p_i^{\text{RD}}$  be the *i*-th patch in RD,  $\text{RD} = [p_1^{\text{RD}}, p_2^{\text{RD}}, ..., p_n^{\text{RD}}]$ , then ED  $= [p_1^{\text{ED}}, p_2^{\text{ED}}, ..., p_n^{\text{ED}}]$ . Let  $f_o$  be the original blood vessel image to be enhanced (a 2D gray image), and  $p_{f_0}$  is a patch extracted from  $f_0$ . To get the sparse coefficients used in the blood vessel enhancement processing,  $p_{f_0}$  is represented as:

$$p_{f_0} = \alpha_1 p_1^{\text{RD}} + \alpha_2 p_2^{\text{RD}} + \dots + \alpha_n p_n^{\text{RD}}.$$
 (2)

Since the representation in Eq. (2) is sparse, most of the coefficient  $\alpha_i$  will be zero, let  $\alpha = [\alpha_1, \alpha_2, ..., \alpha_n]$ , and the  $\alpha$  satisfy the restricted isometry property (RIP) [36, 37]. Then the sparse solution can be obtained by solving the following equation [38]:

$$\hat{\alpha} = \min_{\alpha} \|\alpha\|_{0} \text{ subject to } \|p_{f_{0}} - \text{RD}\alpha\|_{2}^{2} \le \varepsilon.$$
(3)

where the  $\varepsilon$  is an error target for the sparse solution ( $\varepsilon = 10^{-15}$  in our method),  $l_0$ -norm denotes the number of nonzero coefficients, and is the sparse constraint of this equation. Since  $n \gg 2h$ , the Eq. (3) doesn't have a unique solution. However, when the solution of Eq. (3) is sparse enough, it can be solved efficiently by many sparse coding methods [39-41]. In the proposed method, an efficient Batch Orthogonal Matching Pursuit (Batch-OMP) method [42] is used for obtaining the sparse coding coefficients  $\alpha$  in Eq. (3). Then we reconstruct the enhanced patch  $p_{f_e}$  according to the corresponding relationship from RD to ED:

$$p_{f_e} = \alpha_1 p_1^{\text{ED}} + \alpha_2 p_2^{\text{ED}} + \dots + \alpha_n p_n^{\text{ED}}, \qquad (4)$$

where  $f_e$  is the enhanced blood vessel image made up of patches  $p_{f_e}$ , and the sparse coding coefficients  $\alpha$  in Eq. (4) is the same as in Eq. (3). As the values in ED are binary, the gray value of  $f_e$  is usually small. Then we rescale  $f_e$  to [0,255] by the following equation:

$$f_{er} = \frac{f_e - f_e^{\min}}{\max(f_e - f_e^{\min})} \cdot 255 , \qquad (5)$$

where  $f_e^{\min}$  is the minimum in  $f_e$ ,  $\max(\cdot)$  is an operator to find the maximum, and  $f_{er}$  is the final enhanced image.

The algorithm steps of the proposed VE-MSC are given as follows:

- 1) Gain RD and ED
  - a) Initial the d, h, t, L in Eq. (1) and  $\varepsilon$  in Eq. (3);
  - b) Extract the corresponding patch  $p^{\text{RD}}$  and  $p^{\text{ED}}$  using Eq. (1);
- 2) Represent the target image  $f_0$  with RD (Eq. (2));
- 3) Solve the sparse coding coefficients  $\alpha$  with Batch-OMP (Eq. (3));
- 4) Construct the enhanced patch  $p_{f_e}$  using  $\alpha$  and ED (Eq. (4));
- 5) Get the enhanced image  $f_{er}$  through a gray rescaling (Eq. (5)).

A detailed flow chart of the proposed method is shown in section 3.3 (application on retinal vessel enhancement). In general, the blood vessel image to be enhanced is not in the database used for the generation of RD and ED, but they are the same type of blood vessel images. For instance, we use the DRIVE to gain the dictionaries and the STARE to be the target image  $f_0$  in the application of retinal vessel enhancement.

#### 3.3. Retinal vessel enhancement via VE-MSC

Fig. 2 shows a normal retinal vessel image and a background diabetic retinopathy retinal vessel



**Fig. 2.** Retinal vessel image. (a) Normal retinal vessel image in the STARE database, image index is 162, (b) Retinopathy retinal vessel image in the STARE database, image index is 1.

image. It can be observed that the retinal vascular structures and details are not clearly enough, therefore the proposed VE-MSC is utilized to overcome these issues. Hereinafter, only the green channel of the original color image is used as it offers the best vessel-background contrast [4, 9, 22]. Fig. 3 presents a flow chart of the retinal vessel enhancement method via VE-MSC. In order to enhance the image contrast and the retinal vascular structures and details, patches

extracted



**Fig. 3.** Flow chart of the retinal vessel enhancement method via VE-MSC, h = 4, t = 10 (only use the green channel of the original RGB retinal image in the Gray image database).

from retinal vessel image database and label image database. The extracted patches ( $p^{\text{RD}}$  and  $p^{\text{ED}}$ ) have the same location (x, y, k) in the gray image database and label image database. The patches in RD have gray values, and the corresponding patches in ED have binary values. During the dictionary building process, most of the retinal vascular structures and details are obtained through a patch selection, which is introduced in Eq. (1). Then a representation to the target image  $f_o$  is utilized to solve the sparse coefficients  $\alpha$ . After getting the dictionaries (in Eq. (1)) and sparse coefficients (in Eq. (3)), we use the ED and sparse coefficients to obtain the enhanced retinal vessel image with Eq. (4). Finally, the enhanced retinal vessel image is rescaled by Eq.

(5).

#### 4. Experiments and results

To evaluate the performance of the proposed method, a series of experiments are performed on the DRIVE and STARE databases. The DRIVE database consists of 40 color retinal images, which were captured by Canon CR5 nonmydriatic 3 Charge-Coupled-Device (CCD) cameras at  $45^{\circ}$  field of view (FOV). Among them, the first 20 images are served as the testing set (image index No.1-20) and the rest constitute the training set (image index No.21-40), the size of each retinal image is  $565 \times 584$  pixels. The STARE database contains 20 color retinal images (image index No.1-20, only use the images with hand labels) with the size of  $700 \times 605$  pixels, which were captured by a TopCon TRV-50 fundus camera at  $35^{\circ}$  FOV.

In order to evaluate the enhancement quality quantificationally, two metrics [29] are used:

(1) *C* represents the contrast between the retinal vessels and the background (retinal regions except the vessels), which is defined as:

$$C = \left| \frac{Y - G}{Y + G} \right|,\tag{6}$$

where Y is the average gray values of the retinal vessels, G is the average gray values of the background.

(2) *CII* represents the contrast rate between enhanced image ( $C_{en}$ ) and the original image ( $C_{or}$ ), which is defined as:

$$CII = \frac{C_{en}}{C_{or}}.$$
 (7)

The larger the value of C is, the more obvious the difference between the retinal vessels and the background is. It should be mentioned that black background pixels outside the pupil are not calculated in our method. In the experiment, the proposed approach was compared with HE [15], CLAHE [16], methods in [22, 28, 29]. Meanwhile, the effects of dictionary patch size (h) and patch selection (t) were also provided.

#### **4.1. Effect of dictionary patch size** (*h*)

The effect of using different patch size is analyzed in this section. Fig. 4 shows the *C* values of DRIVE testing set with different patch sizes. In order to optimize the dictionaries (RD and ED), we set the parameter  $t = \{5, 10, 14, 18, 25, 36\}$ , respectively. It can be observed that the best overall performance on the image contrast is achieved when the patch size is set to  $12 \times 12$ . The patch size 9×9 has the worst overall performance on the image contrast in Fig. 4. This is because



Fig. 4. Values of *C* with different patch sizes (DRIVE testing set)

of the dictionary patch size is related to the retinal vascular local geometry, and it leads to an imperfect enhancement performance when the patch size isn't suitable for the retinal vascular width. However, the influence of the retinal vascular local geometry can be reduced to a minimum due to the dictionary patch selection and sparse coding.

#### **4.2. Effect of dictionary patch selection** (*t* )

Besides the above experiments, the effect of dictionary patch selection (t) was also provided. Fig. 5 shows the *C* values of DRIVE testing set with different patch selection threshold values (t = 5, 10, 14, 18, 25), and the patch size is  $8 \times 8$ . It can be noticed that the average value of C is



Fig. 5. Values of C with different patch selection threshold values t (DRIVE testing set)

decreased and the mean gray value of the enhanced retinal image is increased with the increase of t. The reason of these phenomena is the patches selection during the dictionary building. When the t is increased, the extracted patches from Eq. (1) contain more retinal vessel pixels, so the average value of the ED is increased. Then the average gray value of the enhanced retinal vessel image is also increased, leading to a low contrast between the background and retinal vessel region.

#### 4.3. Enhancement results

All the RD and ED used in the retinal vessel enhancement of two databases (DRIVE and

STARE) were extracted from DRIVE database. We utilized the DRIVE testing set (image index No.1-20) and STARE as the evaluating data. Fig. 6 and Fig. 7 present some retinal vessel enhancement results by using different methods. It can be seen that the retinal vascular structures enhanced by the proposed method are clear and complete in Fig. 6, and the small retinal vessels are also enhanced efficiently. The C and CII in Fig. 7 are the corresponding values of Fig. 6. Obviously, the proposed method has the largest C and CII values.







**Fig. 7.** Comparisons of *C* and *CII* values with different methods in Fig. 6, the image index is corresponding. (a) *C* values of image index No. 5, 10, 15, in DRIVE testing set, (b) *C* values of image index No. 1, 3, 5, in STARE database, (c) *CII* values of image index No. 5, 10, 15, in DRIVE testing set, (d) *CII* values of image index No. 1, 3, 5, in STARE database.

A comparison of CII values with other enhancement methods in DRIVE testing set (image

index No.1- 20) and STARE database (image index No.1- 20) is depicted in Fig. 8. It can be

observed that the proposed method has the best performance. For the DRIVE testing data (Fig. 8

а



Fig. 8. Values of *CII* with different methods. (a) DRIVE testing set, (b) STARE database.

(a)), the maximum difference value of *CII* between the proposed method and method in [22] is
4.7937 (image No.13), and the mean difference value of *CII* is 2.0842. For the STARE (Fig.
8(b)), the maximum difference value is 3.2480 (image No.4), and the mean difference value of *CII* is 0.9124.

Compared with HE [15], CLAHE [16], method in [22, 28, 29], the enhanced retinal vessels by the proposed method VE-MSC are much easier to recognize. Based on the above results, it can be concluded that the proposed method has a much better enhancement performance on image contrast, retinal vascular structures, and retinal vascular details. The superiority of our method is mainly contributed to the adoption of multi-dictionary and sparse coding.

#### 5. Conclusion

A novel vessel enhancement method (VE-MSC) via multi-dictionary (RD and ED) and sparse coding has been proposed in this paper. We evaluated the proposed method for the retinal vessel enhancement on the DRIVE and STARE databases. Experimental results show that the VE-MSC not only can effectively improve the image contrast but also enhance the retinal vascular structures and details. In the proposed method, two corresponding overcomplete dictionaries (RD and ED) are developed via a patch selection. The RD is utilized to gain the sparse coefficients ( $\alpha$ ), then the enhanced blood vessel image is reconstructed by  $\alpha$  and ED. The patch size (h) and patch selection threshold value (t) both affect the enhancement performance of the blood vessel image. Further work includes: (i) improving the enhancement performance with a larger database; (ii) applying on 3D blood vessel enhancement problems; (iii) extending to other image enhancement problems.

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Vitae



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