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## Abstract

With rising applications in engineering and science, digital image processing is a rapidly evolving sector. Modern digital technology has allowed multidimensional signal manipulation. Digital image processing has a wide range of applications including medical image processing, remote satellite sensing data, acoustic image processing, sonar, radar, and automation. Imaging has become important in fields of clinical practice and medical and laboratory science. Biologists research cells and produce data sets using three-dimensional optical microscope, three-dimensional image visualisation and quantitative analysis could only be carried out with expensive UNIX workstations and custom tools. Today, much of the simulation and analysis can be performed on an inexpensive desktop computer with the necessary hardware and software for the graphics. In these data-intensive problems, the introduction of new image analysis, database, data mining, and simulation strategies to record, evaluate, scan, and manage biological information has been increasingly focused. This recent emerging field of bioinformatics is being referred to as 'bioimage computing'. This chapter discusses the developments made in this field from various perspectives including implementations, main methods, tools, and resources available. The requisite strategies for success in the battle against COVID-19, such as identification of bioimage characteristics, monitoring and segmentation, visualisation, mining, registration, management of image data and annotation, along with a brief description of accessible analytical resources, bioimage databases, and other facilities, are also outlined.

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**20.1 Introduction**

The deluge of complex biomedical and biological images presents huge obstacles for the image processing community. As a natural extension of the existing biomedical field of image analysis, an emerging modern engineering area is to develop and optimise various image data processing and informatics strategies to handle, capture, scan and compare the biological information of the respective images. This latest field can be known as bioimage informatics. Although due to the quality of information and the high complexity of bioimages, such as the very high cell density (e.g. microglia, neurons, astrocytes), the mechanism of entangled or very fast microtubular growth in a 4-dimensional live cell film (Mathews and Jezzard 2004) makes it extremely difficult to specifically apply current medical imaging techniques to this bioimage computer problem. Multiple colour channels are a single biological image stack and are usually wide. The artefacts of interest like this in an image, such as in the 3D structures in neurons (Wiemer et al. 2003), can have drastic differences in strength and morphology from image to image. It is also not unusual that millions of photographs have to be handled automatically in a high-throughput manner in terms of the number of hours or even days, but not months and even years of manual labour. Both of these difficulties require the emergence of new systems and algorithms for bioimage informatics, mainly from three factors: mining and image processing, visualisation and image database.

There are many researches in bioimage informatics either ongoing or on the past few decades. To address the latest trends in this area, a series of very fruitful workshops have been planned. The aim of this section is to briefly examine the advancement of bioimage informatics from the primary methods, angles of implementation, resource availability and instruments.

The practise of making graphic pictures of the internal systems of body part for medical treatment and diagnostic, along with a direct picture of the role of the internal tissue, is diagnostic imaging. This approach pursues the condition's diagnosis and recovery. This method generates a catalogue of the normal configuration and operation of the organs to make the abnormalities easier to recognise. This technique covers both radiological and organic imaging using scopes, magnetic, thermal imaging, isotope and sonography and electromagnetic energies (X-rays). In order to record details about the function and location of the body, several other devices are used. Compared to those modules that generate images, there are several drawbacks to those techniques. For different diagnostic purposes, billions of images are made annually worldwide. Digital images regularly serve an integral role. The analysis in medical imaging relates to image handling using the machine. In this process involved several processes, including communication, presentation, storage and image retrieval. The image is a feature that means measuring features such as the

colour of a visible sight or illumination. There are many benefits of digital images, such as adaptable handling, easy and economical reproduction, immediate quality appraisal, multiple copying with quality reservation, quick storage and communication, and faster and cheaper processing costs. The drawbacks of digital images include the need for quicker processor manipulation, the need for large-capacity memory, the failure to resize with consistency retention and exploitation of copyright.

The use of computers to manipulate digital images is a technique for image processing. This technique has many benefits including connectivity, data management, adaptability and elasticity. This methodology has many sets of synchronous performance instructions for photographs. Multidimensional manipulation of the 2D and 3D Transform images for different areas such as TV images, humanities, therapeutic applications and environmental enhancement, digital imaging methods have been used. In the time, the editing of photographs became cheap, simple and quicker.

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## 20.2 Medical Imaging Techniques

Medical imaging techniques (MIT) consider the laboratory tests like blood test and specimen tests, it is one of the most popular medical tests. Over the past decade, medical imaging has undergone a revolution with rapid, more accurate and less invasive devices. Medical image techniques can be seen as instruments to learn more about neurobiology and people's behaviours (Wang et al. 2016). In medical image techniques, the energy source that enter in the body through sensor and detector detects the body part, after that algorithm works on this data which is given by the detector and then displays result.

There are some different tools that can be used to see into the patient, depending on the energy sources. This may be an image of the interior of the patient by sensing the pulse emanating from the body. In this article, important techniques include magnetic resonance imaging, computed tomography, computed thermography and tomography single photon release, optical imaging, radiography X-ray, radionuclide imaging, positron emission tomography (PET), ultrasonography and elastography. Worldwide, 5 billion medical imaging tests were carried out by 2010 (Roobottom et al. 2010).

### 20.2.1 X-Ray Radiography

It is a medical tool which uses electromagnet ionising radiation, for example, X-rays, to examine body part. With wavelength of about 0.01 and 10 manometers, X-ray is a high-energy radioactive radiation ionising gas capable of penetrating solids. X-rays travel through the body for medical imaging, forming a profile, absorbing or attenuating them at various amounts, depending on the atomic number of the different density and tissues (Spahn 2013). In the X-ray, information is recorded

on a sensor that is generated by X-ray. A current is applied through the cathode filament, which heats up and releases electrons via thermionic emission. The electrons were drawn by a spinning metallic anode that supplied the filament wire with an alternating current. The focal point is called as the anode area wherein the X-ray is emitted. The photon energies used vary around 17–150 KeV and a trade-off between the appropriate radiation dosage and the contrast picture possible is the preference for a particular application or tissue.

#### **20.2.1.1 X-Ray Radiography Advantage**

1. Non-invasive, painless and quick.
2. Support the planning of medical and surgical treatments.
3. When medical teams treat tumours by injecting catheters into the body.

#### **20.2.1.2 Risks from X-Ray Radiography**

1. Ionising radiation raises the risk of cancer in the future.
2. Tissue effects such as cataracts, skin reddening, and hair loss, which occur at relatively high levels of radiation exposure.

#### **20.2.1.3 Applications of X-Ray Radiography**

1. Can be used in a number of examinations, including dental, chiropractic, etc.
2. Can be used to demonstrate the activity of organs, such as you can even examine the brain vessels, heart and blood using the colon, stomach and intestine in the body.
3. Projection X-rays, determine the type of a fracture and extent of a fracture, including used to track and imagine physiological changes in the lungs gastrointestinal and intestinal function.
4. Mammogram used for breast tissue diagnosis and screening.
5. Bone densitometry used to measure the mineral content and density of bones.
6. Arthrography that was used to see inside the joint.
7. Hysterosalpingogram used for uterine and fallopian tube examination.

### **20.2.2 Computed Tomography (CT)**

This is a medical method and it combines a computer and cathode ray tube display with X-ray equipment. In this method, it produces images of the part of human body. This method, X-ray film is changed by a sensor that evaluates the X-ray data. There is a spinning frame within the CT scanner with a detector positioned on one side and the X-ray tube on the other side (Xu and Tsui 2014). An X-ray beam is generated as a rotating frame spins the X-ray tube and detector around the body. Any time the detector and X-ray tube perform one full rotation, an image or slice is obtained. The profile is repeated with a two-dimensional version of the slice viewed by the computer. 3-dimensional computed tomography can be acquired by spiral computed tomography (Xu and Tsui 2014) patient anatomy data volume all at one spot. This data collection of volumes will then be reproduced to include three-dimensional

representations of complex form. The subsequent 3-dimensional computed tomography images aid in the representation of tumour data in three dimensions. Recently four-dimensional computed tomography has developed in order to solve the difficulties. Four-dimensional computed tomography contains both temporal and spatial data regarding the activity of organs.

#### **20.2.2.1 Computed Tomography Advantages**

1. Comprehensive view of veins.
2. Painless, fast and non-invasive
3. Distinguished by slight physical density differences.
4. Should not invasively insert an arterial catheter and a guidewire.
5. Strong resolution of the spaces.

#### **20.2.2.2 Computed Tomography Risks**

1. Increases the risk that cancer can grow later in life.
2. The knowledge is not in real time.
3. Cannot spot anomalies in the luminaire.
4. Non-contrast-free results (toxicity, allergy).

#### **20.2.2.3 Computed Tomography Medical applications**

1. Analysis of certain body parts, for example: wrist, head, elbow, knee, arm, hip, dental, leg, kidney, sinus, neck, elbow, spines.
2. Diagnosis of sickness, trauma and disorder.
3. Planning and instruction of clinical or interventional treatments.
4. Tracking therapy success (treatment for cancer).

### **20.2.3 Magnetic Resonance Imaging (MRI)**

It is a health diagnostic technique for imagery body tissue and monitoring body chemistry using radio and magnetic frequency fields (Caiani et al. 2006). The MRI used to image morphological modifications is based on its ability to detect magnetic spin relaxation times and proton density variations that are typical of the tissue provided in the environment. When we talk about MR scanner, there are mainly three components: a radio frequency system, gradient, central magnet and magnetic field system. The principal magnet that produces a magnetic field is a permanent magnet. In the magnetic field gradient device, there are three orthogonal gradient coils. This coil uses for the signal localisation. The RF system has a transmitter coil capable; it is used for exciting a spin device, producing a spinning magnetic field, and a receiver coil capable of translating magnetisation processing into electrical signals. The MR scanner rebuilds the optical device and measures the signals and signals convert into images. Recently, a novel technique designed for measuring brain movement is called functional magnetic resonance imaging (fMRI) (Ng et al. 2009).

### **20.2.3.1 MRI Advantages**

1. Non-invasive and painless.
2. Without the radiation being ionised.
3. High resolution over space.
4. Personal operator.
5. Easy to blind and flow and speed measuring capability with specialised technique.
6. Should be treated without comparison (allergy to pregnancy).
7. Great contrasting soft tissue.

### **20.2.3.2 MRI Risks**

1. Sensitivity fairly low.
2. Long scanning time and post-processing time.
3. Mass sample volumes may be needed.
4. No details in real time.
5. The intraluminal defects cannot be observed.
6. Could make you feel claustrophobic to others.
7. Young children who cannot sit still will need sedation.
8. Pretty expensive.

### **20.2.3.3 MRI Medical Applications**

1. Review of brain and spinal cord abnormalities.
2. Analysis of cysts, tumours and other abnormalities in any body parts.
3. Examination of joint injuries or abnormalities.
4. Examination of liver and other gastrointestinal diseases.
5. Understanding why women suffer from pelvic pain.
6. Detecting unhealthy body tissue.
7. Projects preparation.
8. To have an overall view of the collateral veins.
9. Offering intra- and extracranial views internationally.

## **20.2.4 Ultrasonography**

It is a diagnostic methodology that provides broadband sound waves of high frequency megahertz. In the ultrasonography, to create medical images, which are reflected to various degrees by the tissue (Ovland 2012). It is located against the body of the patient, close to the problem area. After that transducer emits a flow of sound waves. These sound waves have high frequency. These high frequency waves enter the body. These waves reflect from the patient's organs. This wave bounces out from the internal heart component by the help of transducer. Different kind of tissues reflect the wave uniquely like signature which is transform in image format for study. When wave enters the body, it is captured by ultrasound machine and transforms into images. These images are live. This continuous image captured in real time will be

used to monitor the procedures for biopsy and drainage. Latest Doppler scanner techniques allow blood flow measurement in veins and arteries.

#### **20.2.4.1 Advantages of Ultrasonography**

1. Non-invasive and painless.
2. No ionising radiation is used.
3. Evidence in real time.
4. Intra- and extra-luminal irregularities are prone to detect flow changes.
5. Energy to calculate speeds.
6. Possible respiratory control.

#### **20.2.4.2 Risks in Ultrasonography**

1. No formal guidelines.
2. Dependent operators.
3. Save money.
4. Blinding is a difficult process.
5. Cannot take a regional view of the veins.
6. Influenced by the state of hydration.

#### **20.2.4.3 Ultrasonography Health applications**

1. The monitoring of fetal growth during pregnancy.
2. Imaging several neck and head structures including parathyroid glands and thyroid.
3. Seeing abdominal organs like kidneys, gallbladder, pancreas, spleen, liver, bile ducts, aorta and lower vena cava.
4. Guiding needle injections when inserting local anaesthetic solutions near to the nerves.
5. Echocardiography used to treat ventricles and valves in the heart and function.

### **20.2.5 Elastography**

In medical imaging, it is a non-invasive procedure. In this method, biological tissues are recognised based on their rigidity as opposed to natural tissue (Tyagi and Kumar 2010). The first technique to perform elastography was the biomechanical characteristics and ultrasound elastography of soft tissues is extensively studied in clinical diagnostic applications (Sarvazyan et al. 2011). Through incorporating using MRI and shear waves to visualise their propagation (Asbach et al. 2010). By the use of pulse sequence, MR elastography acts to sensitise the MRI scan. These waves are produced by an electro-mechanical transducer on the body. At about the same frequency are the mechanical excitation and the gradient sensitising wave. This method has features that sense the given parameter on the human body for optimal diagnosis. This elastography is used with optical coherence tomography (Sampson et al. 2013). To create optical coherence elastography practical on human, an annular piezoelectric charging transducer is intended and even a simultaneous image can be

obtained from it (Kennedy et al. 2009). Tactile imaging (Hoshi et al. 2010) is a diagnostic imaging method which converts a visual signal into the sense of touch. This method has features that sense the pressure on the body.

#### **20.2.5.1 Benefits from Elastography**

1. Non-ionising radiation and non-invasive.
2. To get immediate outcomes.
3. High accuracy calculation methods for 2D time change dependent on strain.
4. To get a detailed map of a standard transmural strain, high frame rate.

#### **20.2.5.2 Elastography Risks**

1. By raising the pressure applied, both the elastography images and the elasticity score can affect the elastography, which can contribute to a misdiagnosis.
2. Suffering from medical conditions causing tissue stiffness affected by irregular growths.
3. Resolution too small.

#### **20.2.5.3 Medical Applications for Elastography**

1. Detection and evaluation of particularly cirrhosis, liver disease.
2. Soft tissue inquiries.
3. Observing the cardiac muscle's electrical function during different stages of the heart cycle.
4. MR elastography, to analyse changes in the properties of muscle content associated with ageing.

### **20.2.6 Optical Imaging**

Optical imaging is a non-invasive technique which reveals molecular structure and cellular in the living body. Optical imaging is considered an effective method for deep tissue sampling, where light propagates diffusely (Garofalakis et al. 2007). In the optical imaging, tissues morphology and biomolecular process information is extracted. The light will disperse diffusely. Light interaction with different components of the tissue allows the imaging of tissue anomalies (Yodh and Chance 1995). The breast cancer test system is most commonly used in optical imaging.

#### **20.2.6.1 Benefits of Optical Imaging**

1. Non-invasive.
2. Radiation anti-ionising.
3. Tumour features can be viewed as the patient lies in a prone position, and the visibility of most breasts is relatively strong.
4. Longitudinal studies can be carried out over a time span.
5. Potential for differentiating soft tissue due to the different scattering or absorption.



### 20.2.6.2 Risks of Optical Imaging

1. Owing to the diffusive light absorption in the breast tissue, low spatial resolution.
2. Sensitive to accumulation of lipid in breast tissue, water in the blood and blood oxygenation.

### 20.2.6.3 Medical Devices for Optical Imaging

1. To check haemodynamic.
2. Tumour identification.
3. To include functional brain imaging.
4. Breast cancer scanner.
5. Scanning healthy bones.
6. To check jaws, gums and teeth.

## 20.2.7 Radionuclide Imaging

It is a medical technology. In this method, radioactive material is used to obtain picture. Radioactive isotopes are given to the patient by injection or mouth in small amount. Human body are absorbing the isotopes and emission happens which is detected by detectors. These detectors detect the radiation in body parts and scanner scans the information and generates image. Three techniques comprise radionuclide imagery; some differences between these techniques are seen in Table 20.1, SPECT (Larsson 2005), PET (Carstensen et al. 2011) and Scintigraphy Planner (Kraft and Havel 2012).

Planner scintigraphy uses other organs to absorb certain radioactive compounds, either for a limited time or indefinitely, after they have been delivered by mouth or injection to a patient. Radioisotopes such as Tc99 m used between 2 and 6 h at the latest after training. The minimum Tc99 m dosage is 20 to 25 millicurie (Nikpoor 2009). It is helpful to hydrate the patient before imagery. Between visualisation and isotope injection, the patient is urged to drink 4–5 glasses of water. Imaging time

**Table 20.1** Comparison of radionuclide imaging techniques

	Planar Scintigraphy	SPECT	PET
Origin	At a time one photon emits and this emitted photon moves in random route.	Gamma decay is produced by radioisotopes.	Positron decay is produced by radioisotopes.
Detector	Anger scintillation camera	Rotation of the rage camera to acquire multi-angle projection results.	Special coincidence detector circuitry for concurrently sensing two photons in opposite directions.
Methodology	Method like X-ray but use gamma rays. Only those photon capture which is move on one direction	The photons captured in different directions are identical to X-ray CT.	Capture various different-direction forecasts. Positron decay emits two photons at a time in two opposite directions.

depends on age. The nature of their distribution makes it possible to draw such assumptions regarding the body organ size.

#### **20.2.7.1 Radionuclide Imaging Benefits**

1. Provides highly accurate and precise functional details, frequently.
2. Provides an overall overview of the program of concern.
3. Strong contrast unique to the tissues.
4. May test the degree to which cancer has spread, and how well treatment works.

#### **20.2.7.2 Risks with Radionuclide Imaging**

1. High cost (production of equipment and isotopes).
2. Special caution appropriate to treat radioactive materials.
3. Many people can feel claustrophobic, which may mean they need sedation.
4. Relatively small spatial resolution.

#### **20.2.7.3 Scientific Radionuclide Imaging Applications**

1. Cancer diagnosis (cervical, oesophageal, neck and head, liver, colorectal, lymphoma, melanoma, pancreatic, breast, thyroid, etc.).
2. To assess the therapy's future efficacy.
3. Cardiovascular disease diagnosis
4. Alzheimer's disorder diagnosis, autism, neurological and epilepsy disorders, Parkinson's disease.

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### **20.3 Tools for Image Processing**

The important role of processing images is to increase the appearance of an image. In this computer field, there are many image processing software which is used in the healthcare field. Image Processing Tools provide engineering assistance and a wide range of plug-ins, toolkits, image processing features and software analysis for scientists. Most image processing techniques include a two-dimensional treatment of the image signal and use normal signal-processing techniques.

#### **20.3.1 Medical Images**

Medical imaging has undergone a significant advance in the modern medical industry. That's it. Technology is critical because it can be used during a real test in which a fee has been paid. Various forms of image analysis have been built up over the years; various medical picture forms adapt to various types of technology. When we study about the medical images then we know that every medical image has its particular benefits and drawbacks.

### 20.3.2 Medical Imaging and Its Properties

The visualisation of the organs, body or tissues used for medical diagnosis, treatment and disease tracking is medical imaging. The techniques of imaging include the fields of optical imaging, radiology and nuclear medicine. There are a few types of medical images, such as X-rays. In this diagnostic imaging techniques include advance radiation techniques for smart healthcare system.

Magnetic imaging and magnetic resonance imaging (MRI) are also kinds of medical imaging. The image, molecular imaging and CT work with ultrasound and MRI without the radiation being ionised, unlike conventional X-rays. MRIs employ powerful magnets which produce a strong magnetic field that forces protons in the body to align with that field. Imaging techniques, where ionising radiation is not necessary, can be used for certain types of clinical cases. Ultrasound scans hire waves, for example, with low frequency sonority.

### 20.3.3 Medical Image Processing Tools

The procedure, the method and the practise of medical imaging create visualisation representations of the body's interior aimed at medical practise and health study. Imaging medicine aims at exposing internal mechanisms concealed from the skin and bones, both for the treatment of diseases and diagnosis. Health images sets a basic anatomy and physiology database for Enable the detection of anomalies. Although images of organs and tissues removed for medicinal use are reasonable, such processes are commonly considered to be part of pathology rather than diagnostic image. So, the Chapter is going to be focus primarily on medical image processing equipment.

### 20.3.4 Medical Images Processing (MIP)

Medical image has its place in the modern medical field submitted a big advance. This technology matters as it may be implemented before an actual operation. On the several kinds of medical imaging have been created years ago, various forms of medical image suit various kinds of images engineering. Could medical images have its own merits and demerits? There are fifteen types of market-driven MIP equipment.

There are many technical resources used for the application of medical image processing. 15 Types of instruments widely used by researchers were introduced to the following section.

#### 20.3.4.1 VTK

It stands for Visualization Toolkit (VTK). This toolkit is accessible for everyone so it is open source framework. VTK is 3D computer graphics software and platform is supported by Kitware, with the community now working to develop the future. This

toolkit provides VTK Resources technical guidance and support. In addition, VTK has a robust information visualisation framework, 3D package Widget touch, enables parallel processing, and connects with numerous libraries of GUI toolkits, such as QT (Hanwell et al. 2015).

#### **20.3.4.2 ITK**

ITK stands for Insight Segmentation and Registration. This tool provides the image analysis to the developers (Roobottom et al. 2010). ITK is more powerful tool that provides registration algorithm and learning edge segmentation when we study about two and more dimension (Liu et al. 2014). It is an cross-platform framework and it is open source system.

#### **20.3.4.3 FSL**

Study produces FSL (FMRIB Software Library) Community, UK, OXFORD and FMRIB. FSL is wide DTI Brain, FMRI and MRI Research Toolkit imageryData (Smith et al. 2004). FSL is a comprehensive library of analysis tools for FMRI, MRI and DTI brain imaging. It provides the important library for algorithm for MRI images and also used for research works.

#### **20.3.4.4 SPM**

It stands for Statistical Parametric Mapping. It is used for statistical processes. This package of software is designed by Karl Friston. SPM is used for the brain imaging analysis. It is studying the data sequences like MEG, EEG, PET, etc. SPM helps for analysing brain anomaly or detects the abnormalities in the brain (Sowell et al. 2000).

#### **20.3.4.5 GIMIAS**

GIMIAS stands for Graphical Interface for Medical Image Analysis and Simulation. It is most powerful graphical interface, provides the solving simulation problem and also solves the complex biomedical image computing. It has the plug-ins of specific problem and also used for the research work (Larrabide et al. 2009).

#### **20.3.4.6 NiftyReg**

It is the most useful image registration software. It is used for the rigid and non-rigid registration. It is open source software developed by Translational Imaging Group (TIG 2014). It gives the more efficient result for medical image compared to other registration software.

#### **20.3.4.7 Elastix**

This software helps to solve the image registration software. It has the group of algorithms to solve the problem of registration of image. It is more powerful than other tools like ITK. Compare to other it has the more efficiency like fast configuration and other registration method. This is an open source software and also used for research works (Kerner et al. 2015).

#### **20.3.4.8 ANTs**

ANT is very useful for interpretation control and multidisciplinary data visualisation, and can derive information from large datasets (Avants et al. 2011). ANTs stand for Advanced Normalization Tools which is used for visualising multidimensional data and extract data from complex datasets. It is open source data.

#### **20.3.4.9 NiftySeg**

This tool has various programs to be used for analysis. It is used for EM based segmentation. This tool is indeed one of the university-developed programs, approved under BSD registration. It is a great thing. A tool involves many picture segmentation or format analysis programmes based on EM (TIG 2014).

#### **20.3.4.10 ITK-Snap**

ITK-Snap is a method for the segmentation of structures in 3D medical pictures, Paul Yushkevich produces it. This tool offers semi-automatic segmentation with active use methods of contour, and manual delineation and picture browser (Yushkevich et al. 2006).

#### **20.3.4.11 MITK**

It is a development platform which incorporates application structure with the Insight Toolkit Visualization Toolkit (VTK) and Insight Toolkit (ITK). The software is approved in compliance with BSD-Style (Lu et al. 2012). The MITK stands for Medical Imaging Toolkit.

#### **20.3.4.12 NiftyRec**

At UCL London, the NiftyRec software project that provides the Tomographic Reconstruction Code was created (Assaf and Alexander 2014). It has several types of package for registration like local and global. Registration of lungs also uses this package. This tool helps to us for free-form deformation algorithm when we use block-matching approach.

#### **20.3.4.13 NiftySim**

It is open source finite; high-performance toolkit uses for high graphics processing unit (GPU). This tool also has simulation abilities, developed at London University College, is a nonlinear feature solver, high-performance finite. The GPU-based execution option that allows a solver to greatly outperform market-like packages is a distinctive feature (Johnsen et al. 2015).

#### **20.3.4.14 Camino**

Camino is an MRI Processing software toolkit; it is capable of creating production pipelines that contain modules from other systems. Actually, Render Toolkit Maintenance is the imaging community of microstructures at UCL's lead development (Cook et al. 2006).

### 20.3.4.15 DTI-TK

It stands for Diffusion Tensor Imaging Toolkit. This tool is used for construction of an atlas Tool and spatial normalisation designed for analysing morphometry of white matter using data from DTI. In the year 2011, it published a journal in ImageNeuro. It rated DTI-TK as the cutting-edge method in its category (Keihaninejad et al. 2013).

A review of the fifteen medical photos in this section Table 20.2 tabulates the computing methods. Research is performed on the basis of the guidelines below. The following table provides a comparison of among the 15-MIP tools mentioned.

Fifteen Medical Image Comparisons Tabulated resources for the processing are as above. The requirements relating to comparisons are the most recent versions supported by the tool, Sponsored Device GUI, Medical Imaging Supported, provided tool languages, tool function, type tools, prices and platform type to run in standard to fulfill the requirement of consumers. As for the GUI tools, all 15 types of tools provided user interface power, so the existence of user-friendly and easy GUI view for beginners. There are fifteen different medical image-processing software modalities to help in smart healthcare. For example, VTK supports only the 3D Medical imaging, in which SPM can support 5 forms of PET, MRI, CT-Scan, EEG and fMRI medical imaging. MITK, GIMIAS and Elastix meanwhile endorse all forms of medical imaging.

Furthermore, each instrument has distinct characteristics, such as, Camino and Elastix supported both functions of their unit, while NiftyReg supporting only viewing and segmentation. In which there are different programming languages used to create the App Tool. On the other hand, C # is Camino, ITK-Snap, DTI-TK Tools SPM and FSL, NiftySeg and MITK Language C Utilities. GIMIAS, VTK and Elastix are the JAVA tools for C++. The remaining instruments, such as NiftyReg, NiftyReg, NiftySim and NiftyRec Equipment for pythons, are DTI-TK, ITK and Camino.

Based on the user experience and survey, for medical photos, Elastix would like to suggest tool that offers the most optimal image processing. This helps customers to download the new technical update of the tool and the GUI programme. It also encourages all forms of imaging, such as MRI, CT-scan, radiography and ultrasound. This promotes a broad variety of functions while image processing is performed and this procedure can be run as a separate device or paired with IDE software, for example, Visual studio, NetBeans, MATLAB. Furthermore, version on their official website tutorials for beginners is also offered. Elastix is an open access programme, with the latest available. It also has a big alternative for importing MIP services. Elastix is complete impact exporting. It supports Bitmap, PNG, Dicom, TIFF and JPEG variants of picture to import data.

It is for consumers who are looking for a full featured interface, The Elastix for MIP tool is recommended for research. During while users that either want to explore segmentation or segmentation, visualisation application, Camino should be carried out. Camino is similar to Elastix, which aims to cure both kinds of medication. Imaging and even offering all defined functionality, but it is possible to add only windows. Provide the installer with another operating system, while Camino







does not strong practical tool foundation. Some of the software are available on MIP for non-commercial use, free of charge is labelled as free from the Upper, bench. Free downloads can be found at online platform for the respective resources. In the case of MIP tools which are not listed as free, this means the consumer has to buy a license for the use of a given MIP tool.

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## 20.4 Conclusion

This chapter provides several techniques of medical imaging and discusses that how digital image processing is useful in bioinformatics technology. We also discuss advantages, disadvantages, benefits and accuracy of these techniques. Many bioinformatics technologies and tools are used in images. It also describes some useful toolkits for custom solutions to be created. The development of medical imaging technology has provided a large amount of data. There are several types of medical image processing technique that has different constraints. When we study about MIP tools, there are only 15 MIP tools used. These MIP tools play a very important role in bioinformatics techniques. In future, these techniques and tools are improving accuracy for better result and detecting other diseases.

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## References

- Asbach P, Klatt D, Schlosser B, Biermer M, Muche M, Rieger A, Loddenkemper C et al (2010) Viscoelasticity-based staging of hepatic fibrosis with multifrequency MR elastography. *Radiology* 257(1):80–86
- Assaf Y, Alexander DC (2014) Advanced methods to study white matter microstructure. In: Cohen-Adad J, Wheeler-Kingshott CAM (eds) *Quantitative MRI of the spinal cord*. Academic Press, London, pp 156–163
- Avants BB, Tustison NJ, Song G, Cook PA, Klein A, Gee JC (2011) A reproducible evaluation of ANTs similarity metric performance in brain image registration. *Neuroimage* 54(3):2033–2044
- Caiani EG, Toledo E, MacEneaney P, Bardo D, Cerutti S, Lang RM, MorAvi V (2006) Automated interpretation of regional left ventricular wall motion from cardiac magnetic resonance images. *J Cardiovasc Magn Reson* 8:427–433
- Carstensen MH, Al-Harbi M, Urbain JL et al (2011) SPECT/CT imaging of the lumbar spine in chronic low back pain: a case report. *Chiropr Man Therap* 19:2. <https://doi.org/10.1186/2045-709X-19-2>
- Cook PA, Bai Y, Nedjati-Gilani SKKS, Seunarine KK, Hall MG, Parker GJ, Alexander DC (2006) Camino: open-source diffusion-MRI reconstruction and processing. In: 14th scientific meeting of the international society for magnetic resonance in medicine (vol. 2759). Seattle WA, USA
- Garofalakis A, Zacharakis G, Meyer H, Economou E, Mamalaki C, Papamatheakis J, Kioussis D, Ntziachristos V, Ripollts J (2007) Three-dimensional in vivo imaging of green fluorescent protein-expressing T cells in mice with noncontact fluorescence molecular tomography. *Mol Imaging* 6(2):96–107
- Hanwell MD, Martin KM, Chaudhary A, Avila LS (2015) The visualization toolkit (VTK): rewriting the rendering code for modern graphics cards. *SoftwareX* 1:9–12
- Hoshi T, Takahashi M, Iwamoto T, Shinoda H (2010) Noncontact tactile display based on radiation pressure of airborne ultrasound. *IEEE Trans Haptics* 3(3):155–165

- Johnsen SF, Taylor ZA, Clarkson MJ, Hipwell J, Modat M, Eiben B, Ourselin S (2015) NiftySim: a GPU-based nonlinear finite element package for simulation of soft tissue biomechanics. *Int J Comp Assisted Radiol Surg* 10(7):1077–1095
- Keihaninejad S, Zhang H, Ryan NS, Malone IB, Modat M, Cardoso MJ, Ourselin S (2013) An unbiased longitudinal analysis framework for tracking white matter changes using diffusion tensor imaging with application to Alzheimer's disease. *NeuroImage* 72:153–163
- Kennedy BF, Hillman TR, McLaughlin RA, Quirk BC, Sampson DD (2009) In vivo dynamic optical coherence elastography using a ring actuator. *Optical Exp* 17(24):21762–21772
- Kerner GS, Fischer A, Koole MJ, Pruijm J, Groen HJ (2015) Evaluation of elastix-based propagated align algorithm for VOI- and voxel-based analysis of longitudinal 18F-FDG PET/CT data from patients with non-small cell lung cancer (NSCLC). *EJNMMI Res* 5(1):15
- Kraft O, Havel M (2012) Sentinel lymph node identification in breast cancer - comparison of planar scintigraphy and SPECT/CT. *Open Nucl Med J* 4:5–13
- Larrabide I, Omedas P, Martelli Y, Planes X, Nieber M, Moya JA, Bijmens BH (2009) GIMIAS: an open source framework for efficient development of research tools and clinical prototypes. In: *Functional imaging and modeling of the heart*. Springer, Berlin, pp 417–426
- Larsson A (2005) Corrections for improved quantitative accuracy in SPECT and planar scintigraphic imaging. Print & Media, Sweden
- Liu Y, Kot A, Drakopoulos F, Yao C, Fedorov A, Enquobahrie A, Clatz O, Chrisochoides NP (2014) An ITK implementation of a physics-based non-rigid registration method for brain deformation in image-guided neurosurgery. *Front Neuroinform* 8:33
- Lu T, Liang P, Wu WB, Xue J, Lei CL, Li YY, Liu FY (2012) Integration of the image-guided surgery toolkit (IGSTK) into the medical imaging interaction toolkit (MITK). *J Digital Imaging* 25(6):729–737
- Mathews P, Jezzard P (2004) Functional magnetic resonance imaging. *J Neurol Neurosurg and Psychiatry* 75(1):6–12
- Ng B, Abugharbieh R, Huang X, McKeown MJ (2009) Spatial characterization of fMRI activation maps using invariant 3-D moment descriptors. *IEEE Trans Med Imaging* 28(2):261–268
- Nikpoor N (2009) Scintigraphy of the musculoskeletal system. In: Weissman BN (ed) *Imaging of arthritis and metabolic bone disease*. W.B. Saunders, Philadelphia, pp 17–33
- Ovland R (2012) Coherent plane-wave compounding in medical ultrasound imaging, Master thesis. Norwegian University of Science and Technology
- Roobottom CA, Mitchell G, Hughes GM (2010) Radiation-reduction strategies in cardiac computed tomographic angiography. *Clin Radiol* 65(11):859–867
- Sampson D, Kennedy K, McLaughlin R, Kennedy B (2013) Optical elastography probes mechanical properties of tissue at high resolution. *Biomedical Optics & Medical Imaging, SPIE*
- Sarvazyan A, Hall TJ, Urban MW, Fatemi M, Aglyamov SR, Garra BS (2011) An overview of elastography—an emerging branch of medical imaging. *Curr Med Imaging Rev* 7:255–282
- Smith SM, Jenkinson M, Woolrich MW, Beckmann CF, Behrens TE, Johansen-Berg H, Niazky RK (2004) Advances in functional and structural MR image analysis and implementation as FSL. *Neuroimage* 23(Suppl. 1):S208–S219. External Resources Pubmed/Medline (NLM) CrossRef (DOI)
- Sowell ER, Levitt J, Thompson PM, Holmes CJ, Blanton RE, Kornsand DS, Toga AW (2000) Brain abnormalities in early-onset schizophrenia spectrum disorder observed with statistical parametric mapping of structural magnetic resonance images. *Am J Psychiatry* 157(9):1475–1484
- Spahn M (2013) X-ray detectors in medical imaging. *Nucl Instrum Methods Phys Res Sect A* 731:57–6311
- TIG (2014) The TIG, Image processing tool. Retrieved from [http://cmictig.cs.ucl.ac.uk/wiki/index.php/Main\\_Page](http://cmictig.cs.ucl.ac.uk/wiki/index.php/Main_Page)
- Tyagi S, Kumar S (2010) Clinical applications of elastography: an overview. *Int J Pharma Bio Sci* 1(3)

- Wang L, Alpert KI, Calhoun VD, Cobia DJ, Keator DB, King MD, Kogan A, Landis D, Tallis M, Turner MD, Potkin SG, Turner JA, Ambite JL (2016) SchizConnect: mediating neuro-imaging databases on schizophrenia and related disorders for large-scale integration. *Neuroimage* 124:1155–1167
- Wiemer J, Schubert F, Granzow M et al (2003) Informatics united: exemplary studies combining medical informatics, neuroinformatics and bioinformatics. *Methods Inf Med* 42(2):126–133
- Xu J, Tsui BMW (2014) Quantifying the importance of the statistical assumption in statistical X-ray CT image reconstruction. *IEEE Trans Med Imaging* 33(1):61–73
- Yodh AG, Chance B (1995) Spectroscopy and Imaging with diffusing light. *Phys Today* 48 (3):34–40
- Yushkevich PA, Piven J, Hazlett HC, Smith RG, Ho S, Gee JC, Gerig G (2006) User-guided 3D active contour segmentation of anatomical structures: significantly improved efficiency and reliability. *NeuroImage* 31(3):1116–1128. <https://doi.org/10.1016/j.neuroimage.2006.01.015>