

Personalized Future Lung Cancer Risk Assessment from a Single LDCT: The Sybil Machine Learning Algorithm

Lecia V. Sequist, MD, MPH

The Landry Family Professor of Medicine, Harvard Medical School

Program Director, Cancer Early Detection & Diagnostics, Mass General Cancer Center

Leader, Program in Cancer Risk, Prevention and Early Detection, DF/HCC

The Problems of the grasp and reach of LCS

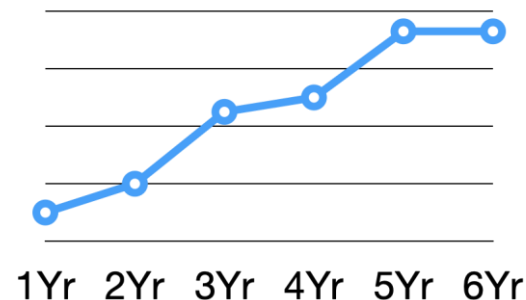
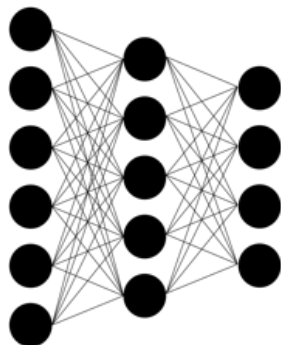
Lung Cancer Screening USA 2023: Population-Level Access and Effectiveness Challenges!



Osarogiagbon et al, ASCO Ed Book 2023

Sybil: Individualized Future Cancer Risk

> 44K LDCT exams from
15K subjects in NLST trial

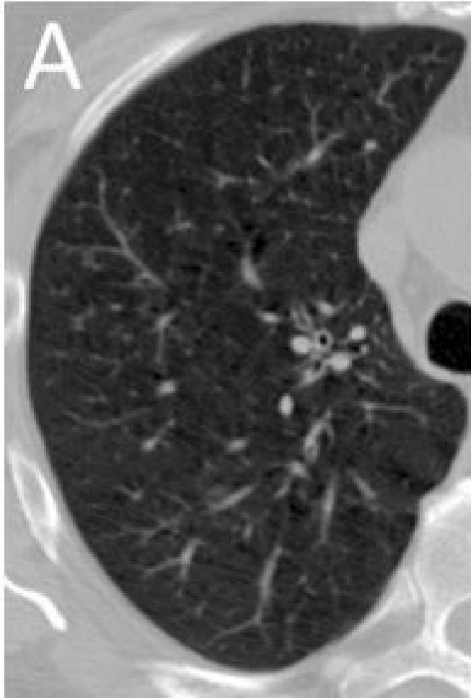


Key Advantages

- No image annotation
- No clinical data needed
- Instant readouts
- Multi-year future risk stratification from single CT
- Accurate near-term risk stratification also



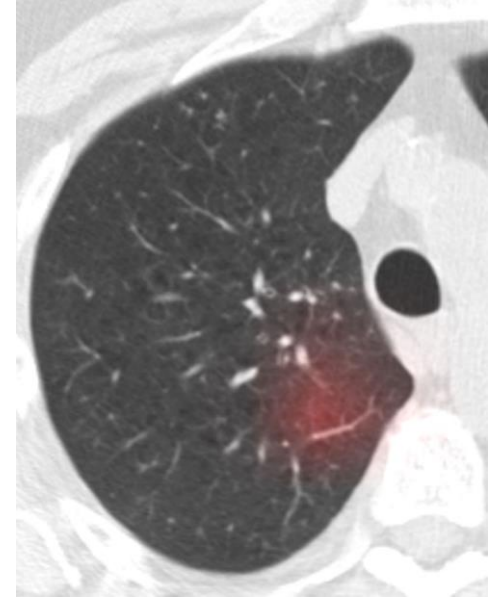
What is Sybil Seeing?



69-year-old male with
99 pack-year smoking hx

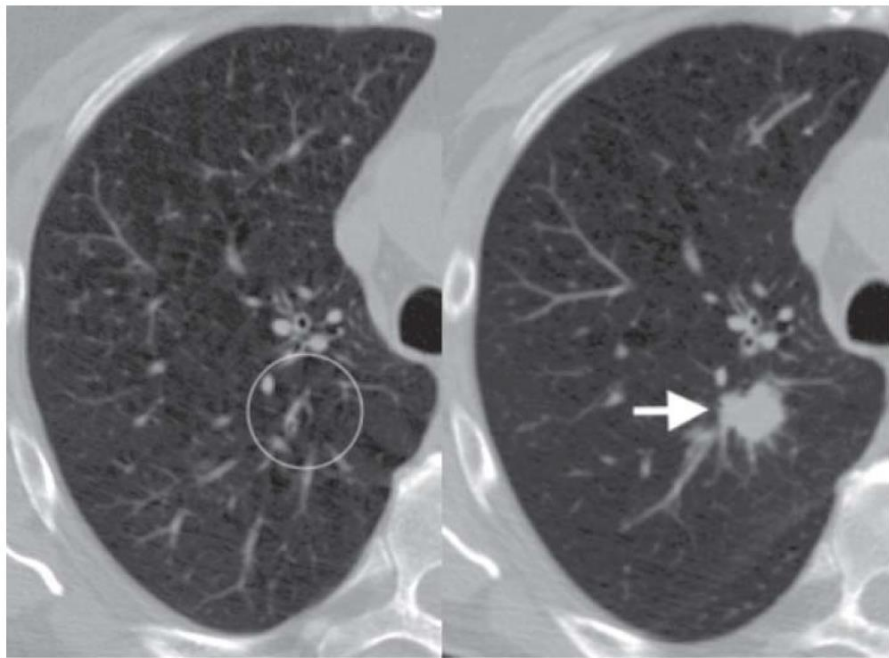
Baseline scan read by
radiologist as “negative
screen, minor abnormalities
not suspicious for lung
cancer”

Sybil placed scan in 75%
risk percentile (6-year risk)

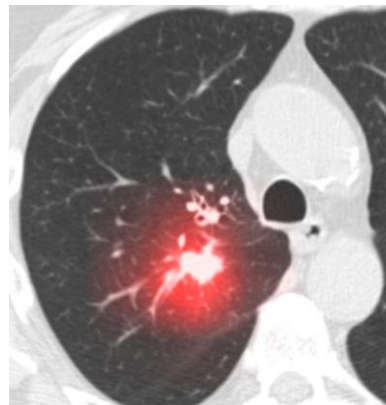


Sybil “attention map”
(note this is *not* a PET scan)

What is Sybil Seeing?



- The following year, a worrisome nodule appeared in the location Sybil was focused on for risk assessment.
- Pt had surgery for a 2.2 cm poorly-differentiated squamous cell lung cancer (pT1cN0)



Sybil “attention map”
(not a PET scan)

