

# **QIW XX Session 3:**

## **Opportunities To Advance CT Lung Measurements Using CT Calibration & Artificial Intelligence**

### **Panel Discussion**

**Stephen Lam MD, FRCPC**

Professor of Medicine  
University of British Columbia  
Medical Director  
BC Lung Cancer Screening Program  
Vancouver, Canada

# Lung nodule volume change measurements have better sensitivity and specificity for classifying malignant from benign lung nodules when applied to solid lung nodules from high-quality CT scans

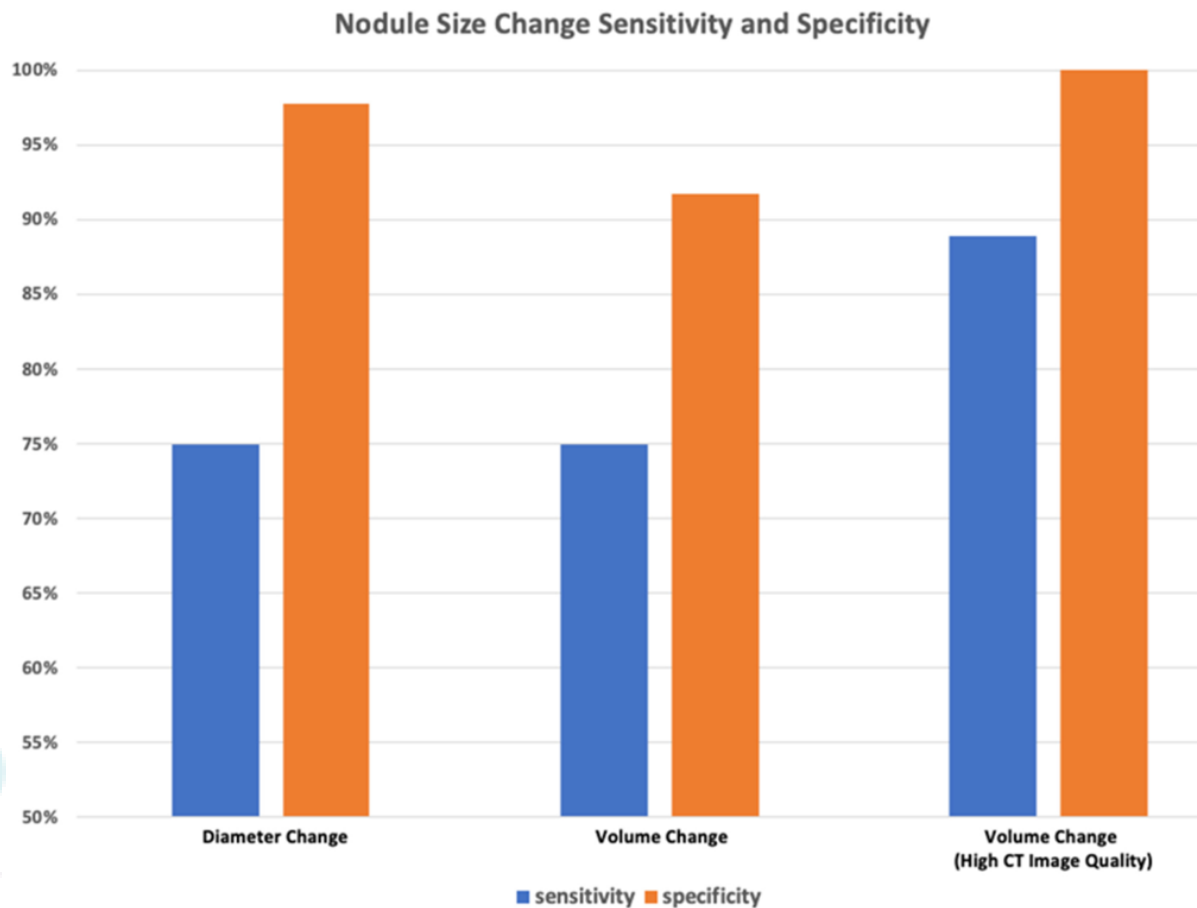


Table 4. The Mean Lung Nodule Volume Change and the COV for Malignant and Benign Solid Nodules in Data Subset 2

Number of Cases	Nodule Volume (mm <sup>3</sup> )	Mean Volume Change (%)	COV
Non-lung cancer cases	<300	6.6	11.0
	≥300	-101.4	-4.7
Lung cancer cases	<300	346.9	0.9
	≥300	382.5	1.1

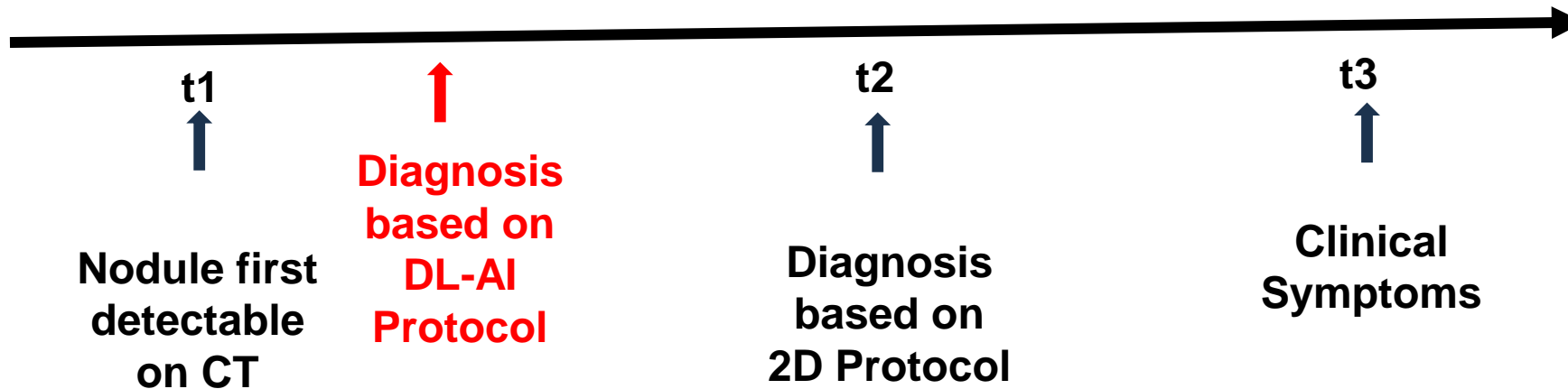
COV, coefficient of variation.

# Why is quantitative imaging of small lung nodules not widely used in clinical practice?

- CT departments generally do not have QA system in place to assess the performance of the software (the reproducibility/quality of volumetric measurements)
- No published data to show volumetrics result in stage shift or provide mortality reduction benefit over diameter measurements

# Opportunity: Prospective Randomized Trial To Provide Evidence that AI Approach Improves Clinical Outcome

- Example



If AI recommends an earlier imaging study or biopsy for a more aggressive tumor, this benefit cannot be observed in retrospective study because the patient did not have a visit at this earlier time point, and it is unknown whether the patient already had lung cancer at that time.