



Craniofacial Dysmorphism & Fetal Alcohol Exposure

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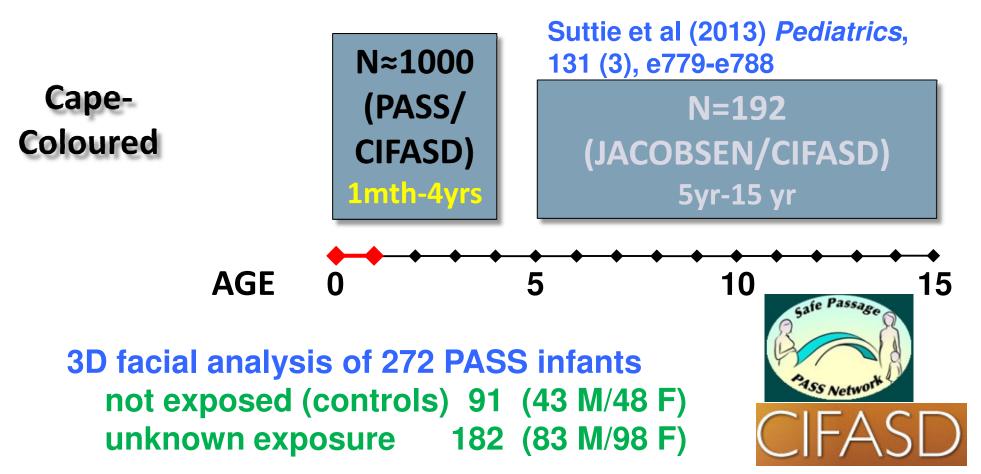


Analysis Objectives

- 1) Develop a screening tool that would utilize the data from the 3D facial images and could be widely used to accurately identify individuals with a high likelihood of alcohol exposure
- 2) Recruit and analyze facial imaging data from very young populations to develop a screening tool that accurately identifies high risk individuals for future intervention
- 3) Combine face images, neurobehavioral data and brain images to identify common pathways and hence improve diagnosis of prenatal alcohol exposure
- 4) Extend existing and develop novel techniques and associated software to cope with demands of larger datasets and more diverse comparison of controls, alcohol exposed and other developmentally delayed subjects while accommodating multiple anatomical images per subject



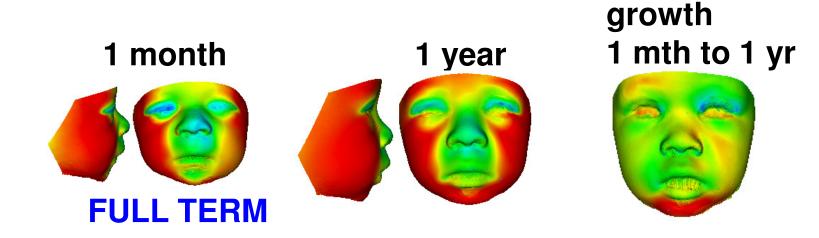
2) Recruit and analyze facial imaging data from very young populations to develop a screening tool that accurately identifies high risk individuals for future intervention

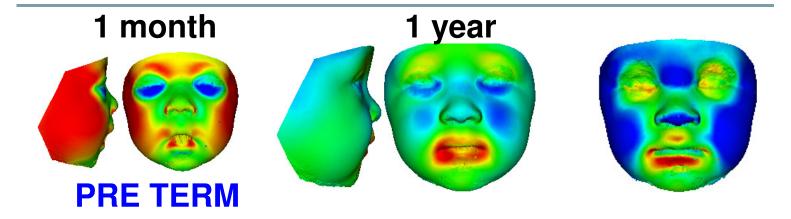






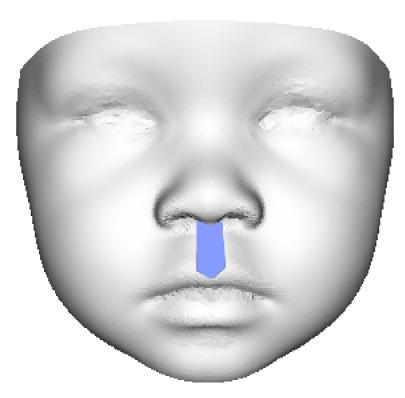
Example facial growth in 1st year of life Normalised w.r.t 40 controls





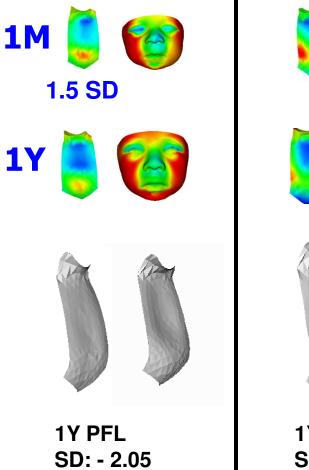




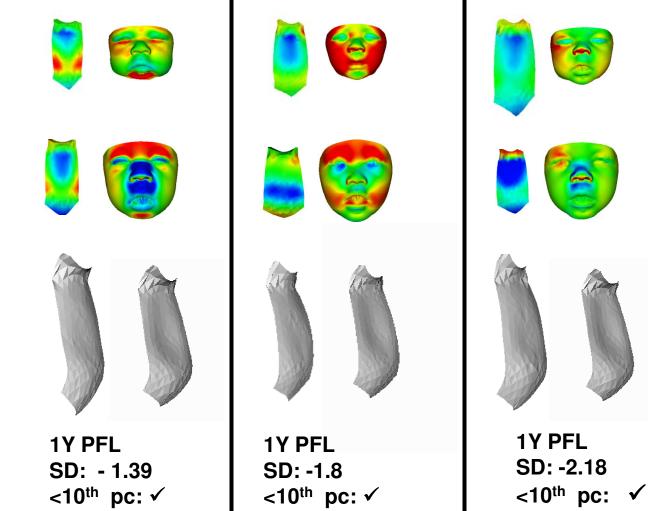




UNKNOWNS WITH SMOOTH PHILTRUM all at 2.0 SD sensitivity unless otherwise indicated



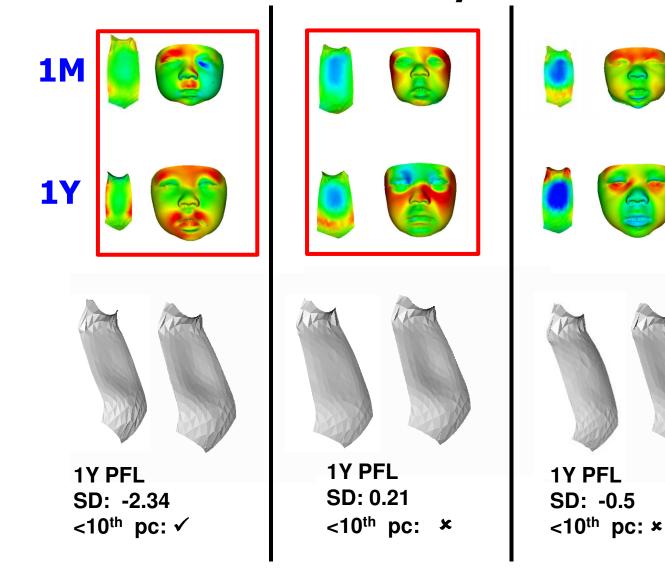
<10th pc: ✓

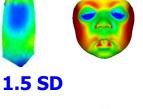


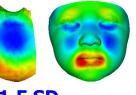


UCL

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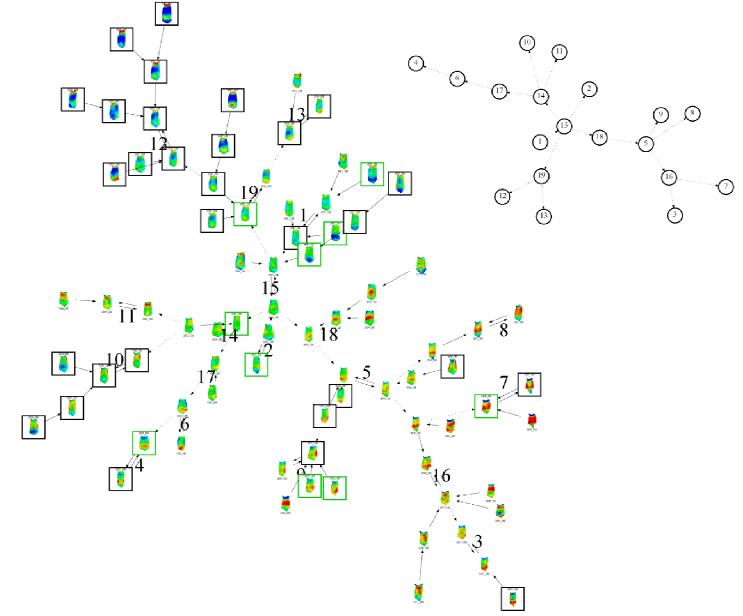






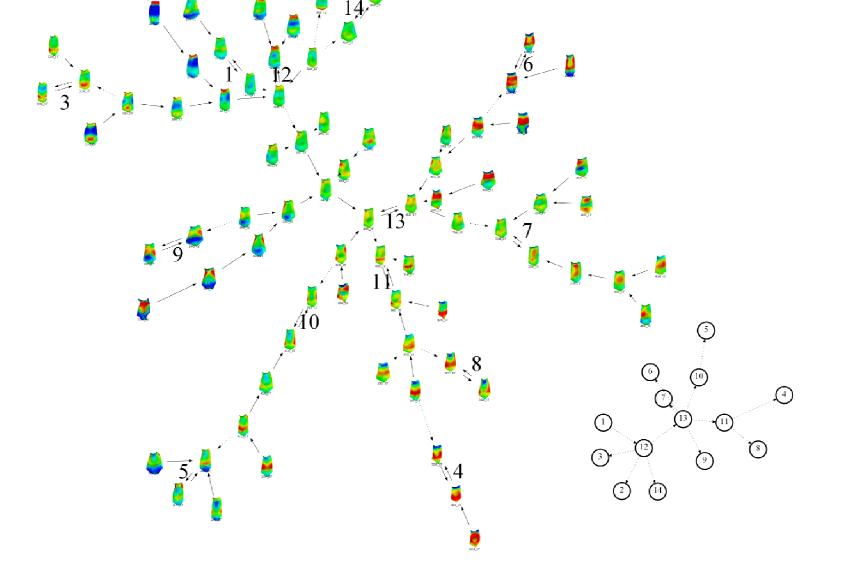
1Y PFL SD: -0.42 <10th pc: *****

Male Philtrum Signature Graph at 1 Month





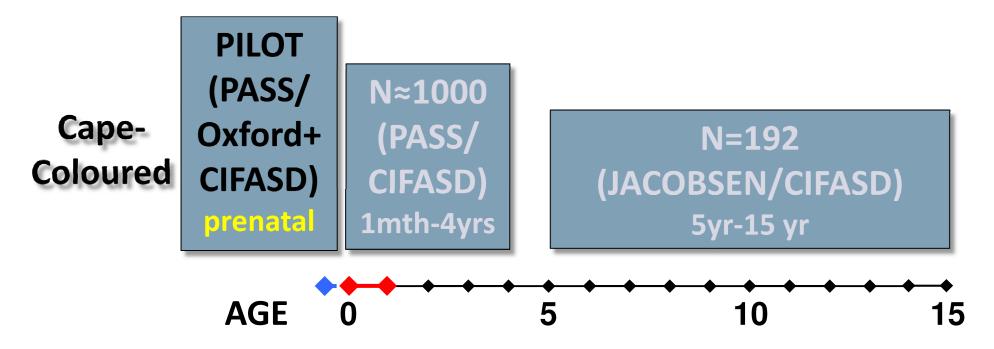
Male Philtrum Signature Graph at 1 Year







Development Project: Jan'14 - May'14







Combine 3D U/S & face analysis to detect FASD facial effects prenatally







Alison Noble

Tom Řackham

Head,Biomedical Imaging Lab (writing up DPhil) Biomedical Engineering, Oxford University Hein Odendaal,

Safe Passage

Rosemary Meyer (Stellenbosch Univ, South Africa)





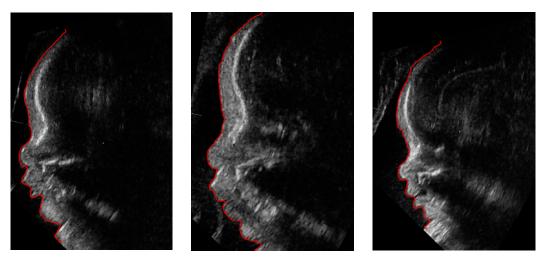
Combine 3D U/S & face analysis to detect FASD facial effects prenatally

- identify variation in quality of face surfaces segmentable from 3D U/S images
- determine if "3D" curve of face mid-line profile is reliably segmentable
- determine which face patches produce shape models good enough for face discrimination

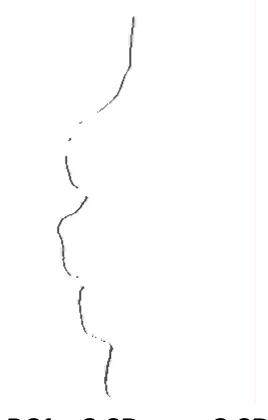




Segment mid-line face profiles & build shape model



Examples of mid-line profiles (n=21) 6 landmarks added manually

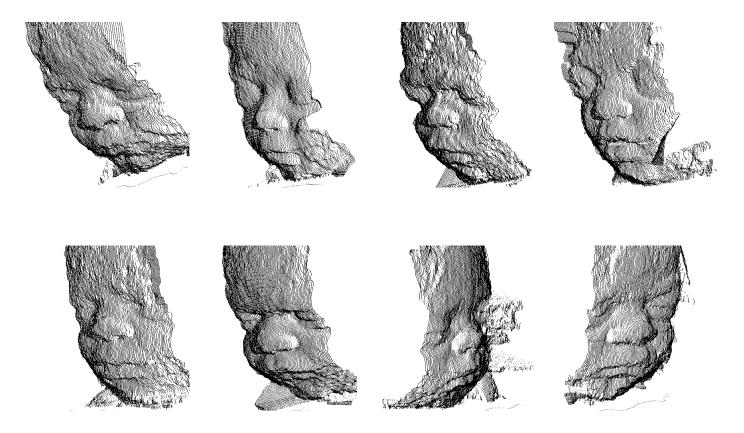


PC1: -2 SD <-> +2 SD





Extract face surface point cloud







Future work

- work with experienced sonographer to define protocol for optimal face capture, e.g. covering exocanthi to derive PFL
- for future delineation of brain structures, need 2nd protocol:
 - Dr Noble's lab has manuscript on new techniques under review "Predicting Fetal Neurodevelopmental Maturation in Ultrasound Images"

3D MRI

3)

UCL Combine face images, neurobehavioral data and brain images to identify common

pathways and hence improve diagnosis of prenatal alcohol exposure

PILOT (FAS:7; HC:11) (JACOBSEN/CIFASD)

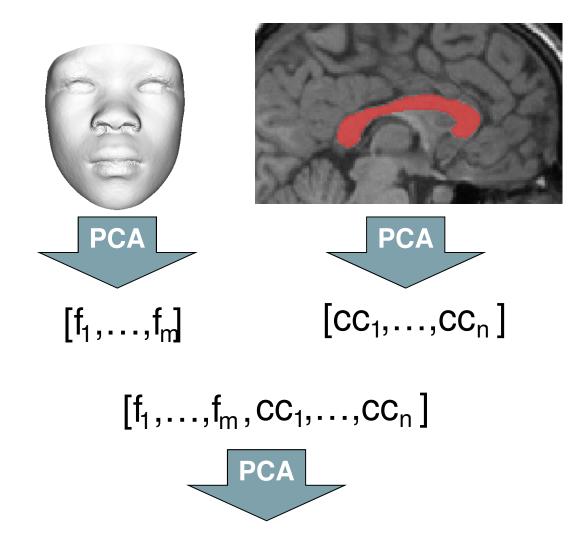
9yr-10yr

FAS:12; HC:21; HE:24 (USA/CIFASD) 8.6yr-18.1yr





Extension to dense surface model construction

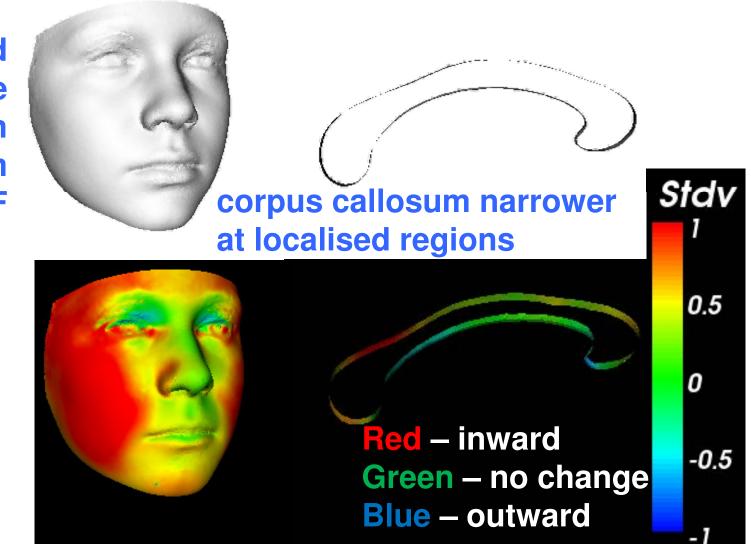






Mean FAS (N=12) vs Mean HC (N=21) joint model: Face & Corpus Callosum

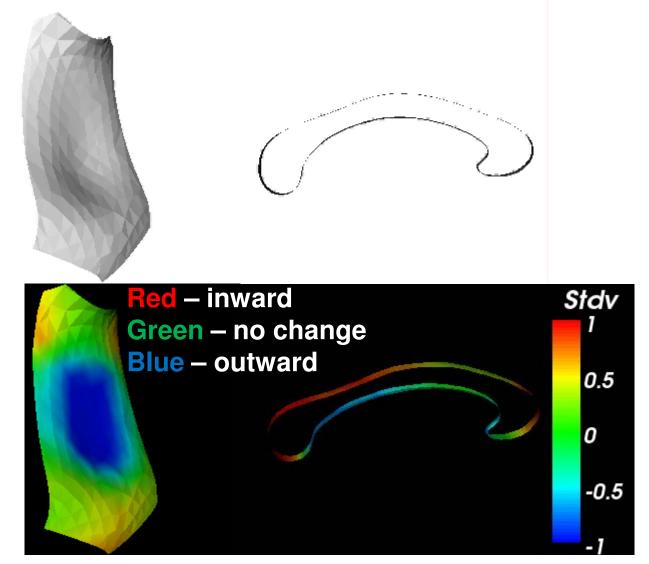
reduced size smooth philtrum smaller PF





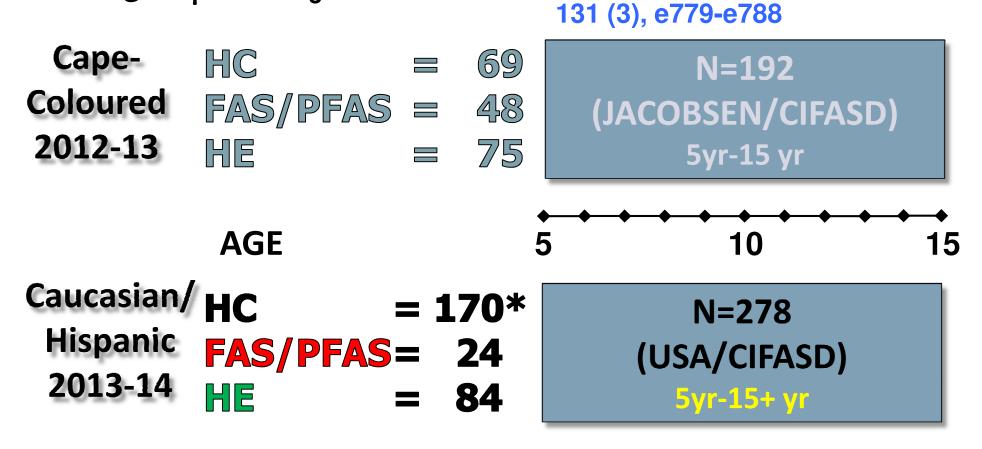


Mean FAS (N=12) vs Mean HC (N=21) joint model: Philtrum & Corpus Callosum



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4) Extend existing and develop novel techniques and associated software to cope with demands of larger datasets and more diverse comparison of controls, alcohol exposed and other developmentally delayed subjects while accommodating multiple anatomical images per subject Suttie et al (2013) *Pediatrics*,





HC vs FAS

Cape-Coloured

Probability of	Face
correctly	Periorbit
classifying random	Perioral
pair (1 HC & 1	Perinasal
FAS)	Profile

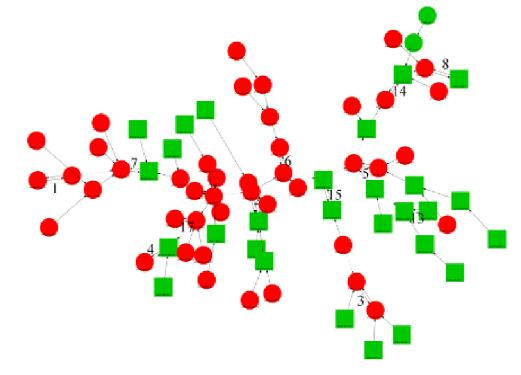
US Caucasian/_ Hispanic

	СМ	LDA	SVM
Face	0.88	0.89	0.90
Perinasal	0.91	0.92	0.92
Profile	0.89	0.89	0.95
Philtrum	0.83	0.80	0.86

LICL Cape-Coloured: 2012-13 FAS/PFAS

HE2 ●

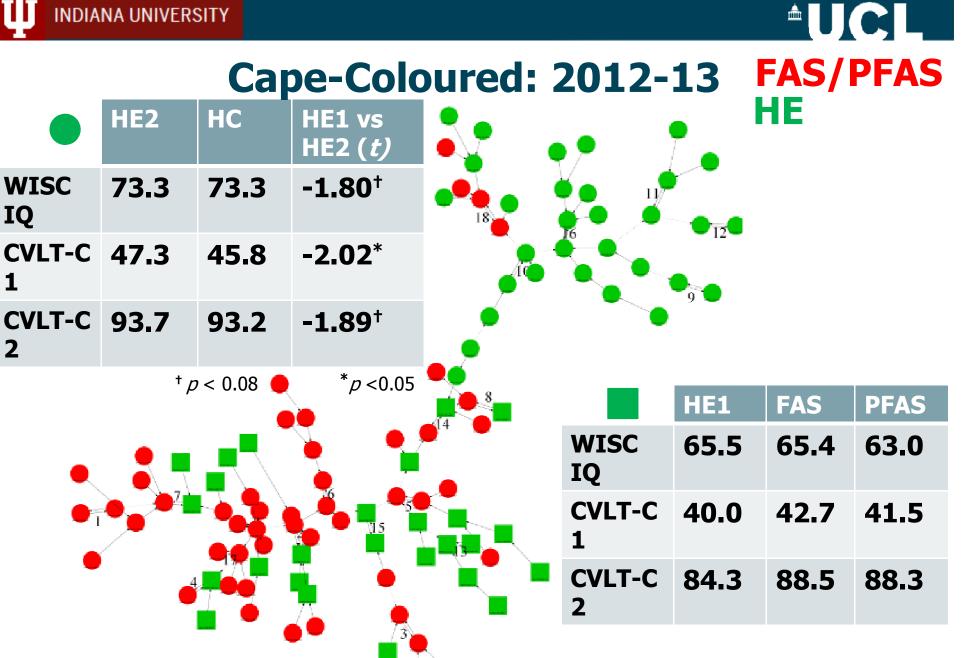
facial differences more control like than FAS/PFAS



HE1 🗖

facial differences more FAS/PFAS like than control

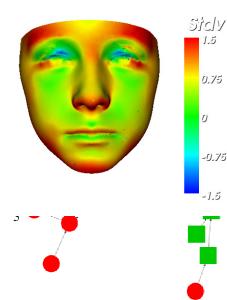
IQ





US Caucasian/Hispanic: 2012-13

-1



INDIANA UNIVERSITY

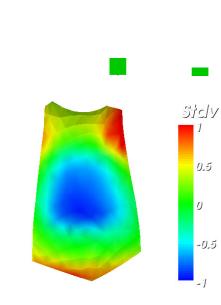
1.5

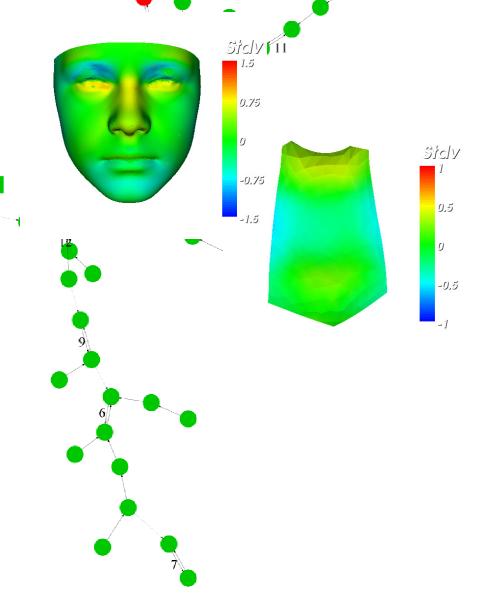
0.75

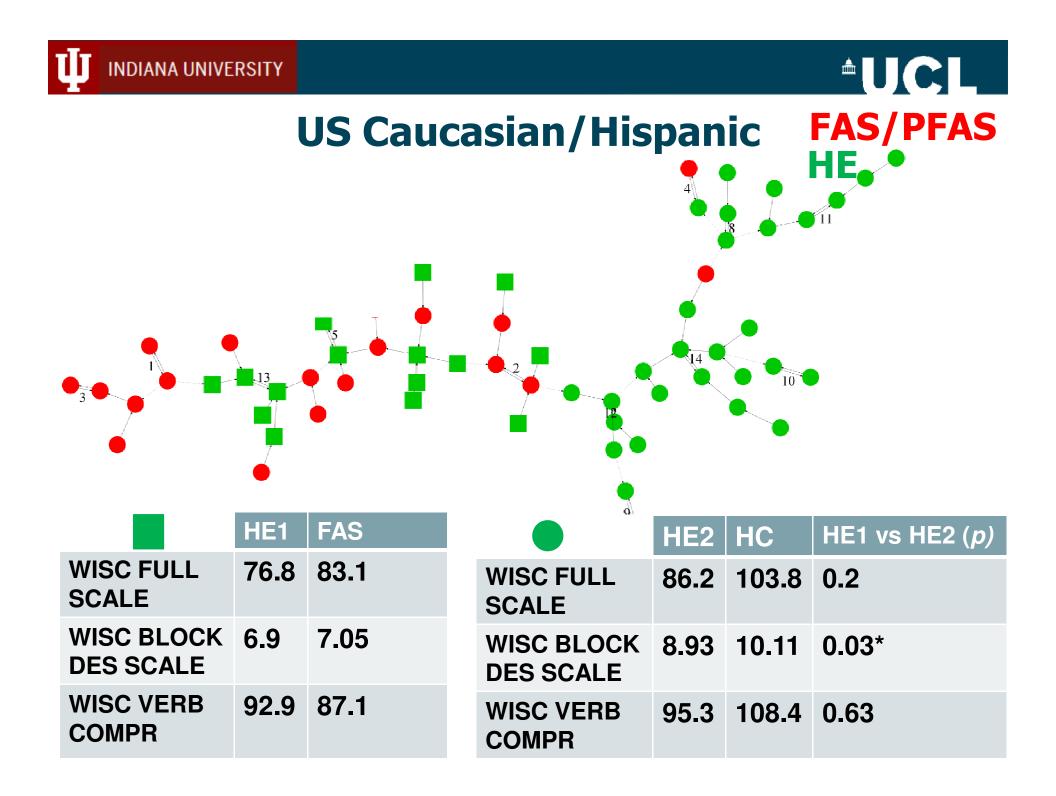
Ŋ

-0.75

-1.5









Cape-Coloured

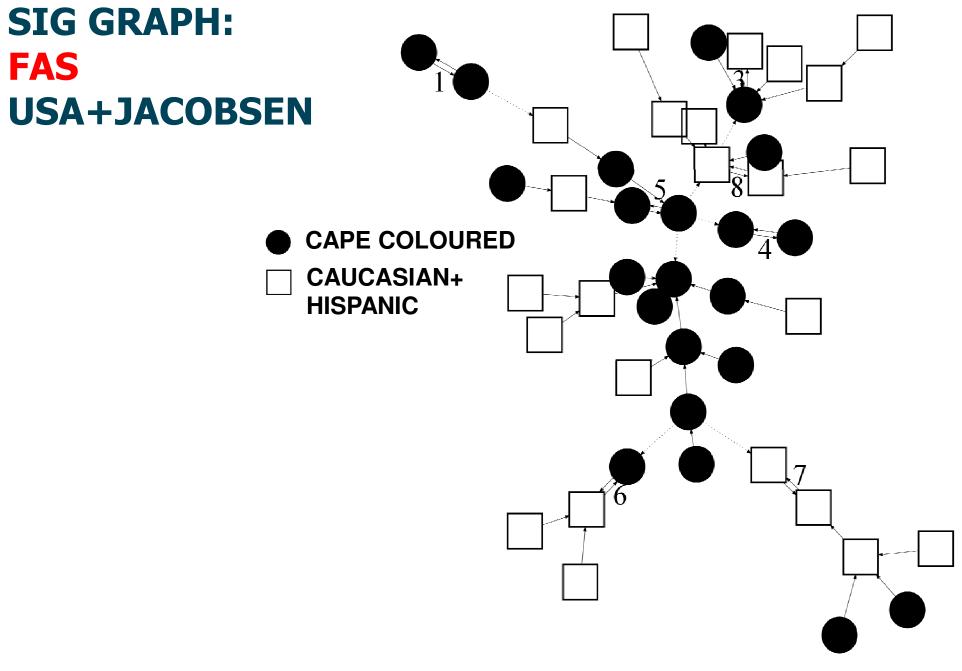
	HE1	FAS		HE2	HC	HE1 vs HE2 (<i>t</i>)
WISC IQ	65.5	65.4	WISC IQ	73.3	73.3	-1.80 ⁺
CVLT-C 1	40.0	42.7	CVLT-C 1	47.3	45.8	-2.02*
CVLT-C 2	84.3	88.5	CVLT-C 2	93.7	93.2	-1.89 ⁺

).08 **p* <0.05

[†]*p* < 0.08 **US Caucasian/Hispanic**

	HE1	FAS		HE2	HC	HE1 vs HE2 (<i>p</i>)
WISC FULL SCALE	76.8	83.1	WISC FULL SCALE	86.2	103.8	0.2
WISC BLOCK DES SCALE	6.9	7.05	WISC BLOCK DES SCALE	8.93	10.11	0.03*
WISC VERB COMPR	92.9	87.1	WISC VERB COMPR	95.3	108.4	0.63







Plans for 2014-2015

- Write up/submit USA Caucasian face analysis
- Complete/write up/submit Face-Brain-Behaviour analysis (? USA/? Jacobsen)
- Complete/write up/submit (?) PASS 1m-1yr analysis after discussion with PASS network
- Seek funding to undertake 3D ultrasound/face analysis