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Automatic for Generating Landmark Mandibular Panoramic Radiography Image

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Abstract: Forensic gender identification based on teeth is needed to identify incomplete victims, only bones and teeth. Previous studies identified gender by manually or semi-automatically measuring mandibular parameters based on landmark points. Gender identification, especially for victims of mass disasters, requires accuracy, so it takes longer, especially if there are many parameters to be measured. In addition, the observer's manual or semi-automatic measurements may give different results. This study proposes a new automatic approach to generate ten mandibular landmark points from panoramic radiographic images for gender identification. We propose a step, namely determining the centroid point of the mandibular image and using linear regression to predict ten mandibular landmark points such as the two condyle, two gonion, four ramus, and two body of the mandible. This study obtained panoramic radiographic images from the Academic Dental Hospital, Universitas Airlangga. We calculated the distance between expert mandibular landmark points and the predicted results to evaluate performance. The prediction of the landmark with the smallest average distance is the lower point of the mandibular body 1 pixel. In comparison, the predicted landmark with the most extended average length is a gonion of 10 pixels.

Keywords: Mandibular landmark generate, Gender identification, Dental panoramic radiography, Automatic, Linear regression.

1. Introduction

The identity of living and dead victims can be examined using teeth or bones. One way to identify individuals using teeth is by comparing postmortem data (results of examining the victim) and antemortem data (data on the victim's previous teeth). Previous research used an automatic identification process, namely inputting a dental radiographic image, comparing it with a dental radiographic dataset, and looking for the most similar one. Or by using a machine learning algorithm or CNN (convolutional neural networks), where features are extracted from dental radiographic images, trained as a model, and tested [1-4]. At the same time, the feature extraction method used is geometric features. Feature extraction is used for determining landmarks from objects or creating points and producing angles, length and area of the object [5-10]. Before the feature extraction uses geometric features so the image is binary (black and white) to extract the shapes of the image object, there is a segmentation stage. Previous studies related to segmentation included segmentation of the mandibular canal on radiographs [11] and segmentation of each tooth [12]. However, under certain conditions, teeth cannot be used as an identification tool for several reasons. For example, if the victim's dental data is incomplete or the victim is edentulous, an alternative method is needed, namely, using bones [13-14]. One of the bones that can be used for identification is the

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mandibular bone. Previous research states that if teeth are unavailable, the mandible bone can be used because the mandible bone is the strongest and largest bone in the face. In addition, several studies have shown that the mandibular bone is more accurate when identifying gender [15]. Identifying the mandibular bone to determine gender can be done by measuring it through radiography. The radiography used is panoramic digital imagery (digital orthopantomography) [16].

Identification using the mandibular bone is part of the primary identification. Identification using the mandibular bone is the main alternative for victims of mass disasters when secondary identification cannot be carried out due to damage to the victim's body so that he cannot be physically identified. However, identifying the mandibular bones requires high accuracy because you must measure many parameters in its application to get accurate results. So far, the process of measuring mandibular parameters is done semi-automatically bv determining mandibular landmark points. In several previous studies, the process of deciding mandibular landmark points used the ImageJ application, which was still semi-automatic [17]. Another research is the process of determining mandibular landmark and semilandmark points based on the mandibular contour in the form of point distribution using the CNN method [18]. Research has been carried out to automatically determine the landmark points of cephalometric images for the dental treatment process [19-22]. The main contributions in this research are as follows: automation method generating landmark points mandibular radiography panoramic. The ten mandibular landmark points are generated automatically, i.e., two condyle, two gonion, four ramus, and two body of the mandible.

This paper is structured as follows: Section 1 of the Introduction explains the background of the research. Section 2 Related work explains previous research related to landmark determination. Section 3, Dataset, describes the data used. Section 4, Automatic mandibular landmark generation, describes the proposed automatic process for determining ten mandibular landmark points. Section 5 Results explains the results of the research and experiments. Section 6 Conclusion is the conclusion of the research.

2. Related work

Research related to predicting landmarks on medical images automatically has been carried out on cephalometric images based on Table 1. Previous research determined mandibular landmark and semilandmark points based on the mandibular contour in the form of point distribution. The results of the point distribution were measured by distance and angle for the CNN process [18]. The difference between our research and previous [18] is that we propose landmark points automatically using linear regression with ten landmark points (two condyle, two gonion, four ramus, and two body of the mandible).

3. Dataset

The panoramic radiograph from the Academic Dental Hospital, Universitas Airlangga, Surabaya, has good quality and has been confirmed by a radiologist. Data from research segmentation [25] is used as input data to determine mandibular landmark points automatically. The radiologist's role is to select a dataset according to the selection criteria. Inclusion criteria include Patients aged 19-70 years; the radiographic quality is good, and the anatomy of the mandible on the radiograph is visible. Exclusion criteria include unclear mandibular appearance, e.g., superimposed condylar and coronoid areas with other anatomic features; Abnormalities in the mandible, e.g., growth disorders; Tumors/cysts; fracture.

The radiologist's role is to determine 120 panoramic radiographic images and ten mandibular landmark points on panoramic radiography. The ten mandibular landmark points (two condyle, two gonion, four ramus, and two body of the mandible) determined by the expert in Table 2 are examples of four panoramic mandibular radiographic images defined by a radiologist. The panoramic radiographic image the radiologist defines as a landmark is a binary image of the mandible with a size of 224x224. The Health Research Ethics Commission (KKEPK) Faculty of Dentistry, Airlangga University, Surabaya, ethically tested the sample data with certificate No. 043/HRECC. FODM/II/2022. Data 120 we use for training 104 and testing 16 image result of segmentation mandible.

Our dataset includes 120 patients aged 19-70 years and is grouped into five based on research [26]. The distribution of the first group is 19-29 years old, the second group is 30-39 years old, the third group is 40-49 years old, the fourth group is 50-59 years old, and the fifth group is 60-70 years as shown in Table 3.

4. Automatic landmark mandibular generating

The step to get a linear regression model is that the mandibular panoramic radiographic image is cropped and changed to a size of 224x224, the radiologist

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Method	Research object image	Result point landmark	Evaluation
Deep learning [18]	OPG dataset collected by the School of Medicine and Dentistry	d6R d2R d2R d3R d3L	Accuracy
	of the Universidade de	434 d5 d8 a2L	
	Santiago de Compostela	dTR al dIL dTR	
	digital panoramic		
Deep Regression [19]	Cephalometric X-ray		Mean Radial Error
	images		(MRE) (millimeters)
		the second second	
		and the second se	
CephaNet Faster R-	Cephalometric X-ray		Accuracy
CNN [20]	images. Datasets of the		
	IEEE ISBI 2014 and the IEEE ISBI 2015		
	challenges		
Backbone of ResNet50	ISBI 2015 Grand		Mean Radial Error
[21]	Challenge in Dental X-	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	(MRE) (millimeters)
	Tay Image	Sec. 1	
Deep Convolutional	Cephalometric X-ray		Error ranges
Neural Network	images. Datasets of the IFFE ISBI 2015		(millimeters)
(Denn) [22]	challenges		
		249	
		19 15 9 13	
		18	
Random Forest	Cephalometric X-ray		Mean Radial Error
Regression [23]	images. Datasets of the IEEE ISBI 2014 and the	and all the second	(MRE) (millimeters)
	IEEE ISBI 2015	19	
	challenges	17 18 18 18 18 18 18 18 18 18 18 18 18 18	
		10 ID ID	
		6 16	
		18	

Table 1. State-of-the-art automatic point landmark

Method	Research object image	Result point landmark	Evaluation
Convolutional Neural Networks (CNN) [24]	ISBI 2015 Grand Challenge in Dental X- ray Image		Average Euclidean distances
Our Proposal	Results of mandibular segmentation on panoramic radiography	50 100 150 200 -	Average Euclidean distances

Table 2. Data of landmark mandibular from radiologist's





Table 3. Data				
Age Group				
(Year)	Male	Female	Total	
19-29	15	14	29	
30-39	11	11	22	
40-49	12	10	22	
50-59	10	11	21	
60-70	13	13	26	
Total	61	59	120	

determines the centroid coordinates (x, y) of the cropped mandibular image size 224x224 and the condyle points left, right, left gonion point, right, left ramus point (2 points), right ramus (2 points), body point bottom, upper. We train the data model of 120 images that have determined the centroid and ten mandibular landmark points. The proposed steps for generating a panoramic radiographic landmark mandibular point are (Fig. 1):

- Read mandibular binary image
- Determining the centroid of each mandibular binary image,
- Determining each mandibular landmark point (two condyle, two gonion, four ramus, and two body of the mandible) of the mandibular binary image using linear regression
- Results landmark mandibular point (Fig. 2). There are four mandibular landmark points in Fig. 2, namely the condyle (a), ramus (b), gonion (c), and body of the mandible (d).

5. Results

We propose generate automatic the (x, y) coordinates of mandibular landmarks. The ten mandibular landmark points determined were the left/right condyle (a), left/right ramus (b), left/right gonion (c), and bottom/top mandibular body (d) (as shown in Fig. 2). To evaluate the prediction model of mandibular landmark points by measuring the actual distance of each mandibular landmark point (two condyle, two gonion, four ramus, and two body of the

mandible) with the predicted results using Euclidian distance (Eq. (1)). The landmark points of the condyle of the mandible (a) (right, left), ramus (b) (right, left), gonion (c) (right, left), and body of the mandible (d) (bottom, upper) were generated using linear regression with input in the form of centroid coordinates (x, y) of the mandibular binary image (as in Algorithm 1).

Based on algorithm 1, determine the points of the left condyle (clx, cly), right condyle (crx, cry), left gonion (glx, gly), right gonion (grx, gry), bottom mandibular body (mbx, mby), upper mandibular body (mux, muy), left ramus (rlx_1, rly_1) , (rlx_2, rly_2) , right ramus (rrx_1, rry_1) , (rrx_2, rry_2) . Following are the results of generating mandibular landmarks using linear regression as shown in Table 5.

$$Error = \sqrt{(x - x')^2 + (y - y')^2}$$
(1)

$$MRE = \frac{\sum_{i=1}^{n} Error_i}{N}$$
(2)

$$SDR = \frac{N_a}{N} 100\% \tag{3}$$

To evaluate the proposal's performance, we calculate the ME (mean error) in Eq. (1) [21]; [24] between the landmark mandibular from the radiologist and the proposed method results. Table 4 shows the ME between the panoramic radiographic mandibular landmark point. The radiologist selected the best 120 panoramic radiographic mandibular images. Radiologists defined 120 mandibular of ten landmark mandibular. The radiologist's results of ten landmark mandibular are used as much 104 for training data to create a machine-learning model. Using linear regression, our prediction determined mandibular landmarks in 16 mandibular panoramic radiographic images (Table 5). Algorithm 1 is a linear regression model to determine mandibular landmarks (two condyle, two gonion, four ramus, and two body of the mandible). In research [21], the mean radial

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Figure. 1 The proposed method of generate landmark mandibular

Algorithm: 1 a pseudocode to generate mandibular landmarks such as condyle, gonion, ramus, and body mandible.

Input: image mandible binary (I)				
Output: the landmark mandibular such				
as left/right condyle, left/right				
gonion, left/right ramus, and				
bottom/upper body mandible				
1: $a = imread(I);$				
2: $x, y = centroid(a);$				
3: $clx = 15.87 - 0.09x;$				
4: $cly = 12.79 - 0.07y;$				
5: $crx = 219.39 - 0.02x;$				
6: $cry = -111.19 + 0.85y;$				
7: $glx = -52.34 + 0.52x;$				
8: $gly = 161.91 - 0.17y;$				
9: $grx = 199.42 + 0.15x;$				
10: $gry = 111.77 + 0.2y;$				
11: $mbx = 6.03E - 14 + x;$				
12: $mby = 216.47 + 0.03y;$				
13: $mux = 6.03E - 14 + x;$				
14: $muy = 143.19 + 0.03y;$				
15: $rlx_1 = -32.97 + 0.34x;$				
16: $rly_1 = -12.65 + 0.65y;$				
17: $rlx_2 = 55.57 - 0.16x;$				
18: $rly_2 = -12.65 + 0.65y;$				
19: $rrx_1 = 227.55 - 0.37x;$				
20: $rry_1 = -73.91 + 1.13y;$				
21: $rrx_2 = 206.29 + 0.11x;$				
22: $rry_2 = -73.91 + 1.13y;$				

error (MRE Eq. (2)) is evaluated, the absolute difference of each coordinate of the x and y axes between the ground truth and prediction because the prediction results have several differences with the ground truth. If the difference is within a specific range, it means it is correct within that range. In the experiment, the range used as a standard was 4 pixels.



Figure. 2 Landmark mandibular point: (a) condyle, (b) ramus, (c) gonion, and (d) body of the mandible

Table 4. Evaluation				
		Mean		
		Error		
No	Landmark point	(pixels)	SDR (%)	
1	Left condyle	4	63.33	
2	Right condyle	6	34.17	
3	Left gonion	10	16.67	
4	Right gonion	9	18.33	
5	1st left ramus	7	32.50	
6	2nd left ramus	7	25.83	
7	1st right ramus	7	20.83	
8	2nd right ramus	6	30.00	
9	Bottom body	1	99.17	
10	Upper body	6	50.00	

For example, if the radial error is 3 pixels, it succeeds. Another way to evaluate is using the success detection rate (SDR Eq. (3)), where Na shows the number of accurate detections, and N shows the total number of detections. We round up all measurement results. Table 4 is the evaluation result of determining mandibular landmark points on testing data (16 images).



Table 6 describes several landmark points whose predictions are farthest from ground truth and closest to ground truth. In each figure in Table 6, the predicted landmark points are colored blue, while the ground truth landmark points are colored red. Table 6 shows the maximum distance between the predictions and the ground truth of each point and the shortest distance between the predictions and the ground truth of each point. The prediction landmark point very far from the ground truth is the upper mandibular body point, which is 41 pixels, as shown in Fig. 3. In addition, the prediction landmark point far from the ground truth is the left gonion point, which is 38 pixels, as shown in Fig. 4. The results of

No	Landmark point	Max Error	Min Error		
1	Left condyle	50 100 150 200 50 100 150 200	50 100 150 50 100 150 200 50 100 150 200		
2	Right condyle	50 100 150 50 50 100 150 200	50 100 150 50 100 150 200 50 100 150 200		
3	Left gonion	50 100 150 200 50 100 150 200			
4	Right gonion	50 100 150 50 100 150 50 100 150 200			
5	1st left ramus	50 100 150 200 50 100 150 200	50		

Table 6. Mandibular landmark point analysis





Figure. 3 Landmark points of the upper mandible body (red ground truth, blue prediction)



Figure. 4 Landmark points of the left gonion body (red ground truth, blue prediction)

	SDR (%)				
	2	2.5	3	4	4
Method	mm	mm	mm	mm	pixel
Deep					
Regression [19]	82.99	88.52	92.55	96.50	-
CephaNet [20]	77.45	81.18	84.48	88.25	-
Deep					
Learning					
[21]	62.00	70.50	78.10	86.60	-
DCNN [22]	87.51	91.83	94.74	98.01	-
Linear					
Regression					
(Our)	-	-	-	-	39.08

the projection of landmark points far from the ground truth are due to the different shapes of the ramus and width of the mandible, so the position of the coordinates (x, y) of the gonion and upper body of the mandible is not correct. In Table 7, research [19-22] uses cephalometric images, and the number of predicted landmark points is 19. The evaluation method uses standard limits of 2 mm, 2.5 mm, 3 mm, and 4 mm. Our proposal uses a 4-pixel standard because 1 mm is 3.78 pixels, and the evaluation results are very low, namely 39.08%. We used

panoramic dental radiographic images, and ten mandibular landmark points were predicted using the Linear Regression method.

6. Conclusion

This study proposes a linear regression method to generate mandibular landmarks on panoramic radiographs automatically. There are predicted to be ten mandibular landmark points, including two condyle, two gonion, four ramus, and two body of the mandible. From our proposal, the left gonion landmark point does not match the data from radiologists, with the lowest SDR value of 16.67%. On the other hand, the best landmark point is the bottom point of the body landmark because the highest SDR result is 99.17%.

Further research suggests improving how to method generate the mandibular landmark points on the gonion that have a low error difference from the actual data from doctors.

Conflicts of interest

The authors declare no conflict of interest.

Author contributions

Conceptualization: Nur Nafiiyah, Chastine Fatichah; methodology: Nur Nafiiyah, Chastine Fatichah; software, Nur Nafiiyah; validation, Chastine Fatichah, Darlis Herumurti, Eha Renwi Astuti, and Ramadhan Hardani Putra; resources data, Eha Renwi Astuti, Ramadhan Hardani Putra; writing—original draft preparation: Nur Nafiiyah; writing—review and editing: Nur Nafiiyah, Chastine Fatichah, Darlis Herumurti, Eha Renwi Astuti, Ramadhan Hardani Putra, and Agus Subhan Akbar.

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