

# Can ovarian cancer detection be improved using AI-driven diagnostic support applied to ultrasound images?

<b>Submission date</b> 26/03/2023	<b>Recruitment status</b> Recruiting	<input type="checkbox"/> Prospectively registered <input checked="" type="checkbox"/> Protocol
<b>Registration date</b> 01/04/2023	<b>Overall study status</b> Ongoing	<input type="checkbox"/> Statistical analysis plan <input type="checkbox"/> Results
<b>Last Edited</b> 28/05/2024	<b>Condition category</b> Cancer	<input type="checkbox"/> Individual participant data <input type="checkbox"/> Record updated in last year

## Plain English summary of protocol

### Background and study aims

Ovarian tumors are common and their management is dependent on the risk of malignancy. Patients with malignant ovarian tumors benefit from being referred to a gynecologic oncologist for debulking surgery, indicating higher survival rates. On the other hand, benign cysts should be handled conservatively with ultrasound follow-up or with minimally invasive surgery, while preserving fertility and avoiding unnecessary suffering. Transvaginal ultrasound assessment has a central role in the diagnostics of ovarian tumors as it has high accuracy, at least in the hands of ultrasound experts. There is currently a shortage of sonographers with enough experience though, as malignant tumors are relatively uncommon. Thus, there is a need to find alternatives to improve the diagnostics of ovarian tumors. In other medical fields, researchers have been able to develop automated imaging tools to improve diagnostic accuracy, for example when searching for breast cancer and bone fractures. Recent advances in computerized image analysis have been powered by deep neural networks (DNNs), which are computational versions mimicking the biological nervous system. Recently, researchers have developed and validated a DNN model (Ovry-Dx) to discriminate benign from malignant ovarian tumors based on 3077 ultrasound images from 758 patients. Ovry-Dx had a diagnostic accuracy comparable to human expert assessment. Further validating studies are needed to explore the generalizability and robustness of DNN models, and the clinical benefits in the hands of less experienced examiners. This study aims to compare the accuracy in differentiating benign from malignant masses using DNN models as compared to subjective assessment using pattern recognition or the IOTA-ADNEX model, by examiners of different levels of expertise.

### Who can participate?

Women aged 15 years and over with a recently detected ovarian tumor, planned for either surgery or long time (at least 21 months) follow-up

### What does the study involve?

Subjective assessment using pattern recognition and the IOTA-ADNEX model score will be compared to the DNN-model assessment. The histological outcome from surgery or long-time ultrasound follow-up (minimum 21 months) serves as the gold standard.

What are the possible benefits and risks of participating?

There are neither any benefits nor any risks as the DNN model outcome will not be shown to the examiner. The images will not be analysed by the DNN model until all patients have been examined. Therefore, participation will not affect the management of the patient.

Where is the study run from?

Karolinska Institutet (Sweden)

When is the study starting and how long is it expected to run for?

January 2020 to June 2026

Who is funding the study?

1. Swedish Research Council (Sweden)
2. Swedish Cancer Society (Sweden)
3. Stockholms Läns Landsting (Sweden)
4. Radiumhemmets Forskningsfonder (Sweden)

Who is the main contact?

Elisabeth Epstein, [elisabeth.epstein@ki.se](mailto:elisabeth.epstein@ki.se)

## Contact information

### Type(s)

Principal Investigator

### Contact name

Prof Elisabeth Epstein

### ORCID ID

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## Additional identifiers

### EudraCT/CTIS number

Nil known

### IRAS number

### ClinicalTrials.gov number

Nil known

### Secondary identifying numbers

## Study information

### Scientific Title

Diagnostic accuracy of computerized ultrasound image analysis using deep neural network models as compared to subjective assessment using pattern recognition or IOTA-ADNEX model - a prospective multi-centre trial

### Acronym

OV-AID, Phase I

### Study objectives

The accuracy in differentiating benign from malignant masses using deep neural network (DNN) models is superior to subjective assessment using pattern recognition or the IOTA-ADNEX model, by non-expert examiners.

### Ethics approval required

Old ethics approval format

### Ethics approval(s)

Approved 02/02/2021, Etikprövningsmyndigheten (Sjukhusbacken 10, Uppsala, 750 02 Uppsala, Sweden; +46 (0)104750800; [registrator@etikprovning.se](mailto:registrator@etikprovning.se)), ref: 2020-07200, 2021-04549, 2021-06367-02, 2023-01834-02

### Study design

Prospective multicenter diagnostic accuracy study

### Primary study design

Observational

### Secondary study design

Cohort study

### Study setting(s)

Hospital

### Study type(s)

Diagnostic

### Participant information sheet

Not available in web format, please use contact details to request a participant information sheet

### Health condition(s) or problem(s) studied

Ovarian cancer

### Interventions

Current interventions as of 28/05/2024:

A prospective study including >700 patients with ovarian tumors, assessed by examiners with

varying expertise (at least 400 assessments by non-experts, and 300 by expert examiners). Subjective assessment using pattern recognition and the IOTA-ADNEX model score will be compared to DNN-model assessment. The histological outcome from surgery or long-time ultrasound follow-up (minimum 9 months, with scans after 3 and 6 months) serves as the gold standard. For every case: over four grayscale (at least two without callipers), two power Doppler still images and two video clips (with and without Doppler), should be collected.

#### Previous interventions:

A prospective study including >400 patients (at least 150 malignant) with ovarian tumors, assessed by examiners with varying expertise (at least 200 assessments by non-experts). Subjective assessment using pattern recognition and the IOTA-ADNEX model score will be compared to DNN-model assessment. The histological outcome from surgery or long-time ultrasound follow-up (minimum 21 months, with scans after 3, 6 and 12 months) serves as the gold standard. For every case: over four grayscale (at least two without callipers), two power Doppler still images and two video clips (with and without Doppler), should be collected.

#### Intervention Type

Other

#### Primary outcome measure

Diagnostic accuracy in differentiating benign from malignant ovarian tumors measured by comparing the outcomes from subjective assessment, IOTA-ADNEX model scoring and previously developed deep neural network (DNN) models at one timepoint

#### Secondary outcome measures

Accuracy in differentiating benign from malignant ovarian tumors measured by comparing the outcomes from subjective assessment, IOTA-ADNEX model scoring and previously developed DNN models - stratified by user experience (expert examiners versus non-expert examiners) at one timepoint

#### Overall study start date

01/01/2020

#### Completion date

06/06/2026

## Eligibility

#### Key inclusion criteria

1. Women aged  $\geq 15$  years
2. Newly detected ovarian tumor
3. Capable of understanding the study information and accepts participation

#### Participant type(s)

Patient

#### Age group

Mixed

#### Lower age limit

15 Years

**Sex**

Female

**Target number of participants**

Minimum 700 participants, and at least 400 assessments are performed by non-experts.

**Key exclusion criteria**

1. Aged <15 years
2. Patients who are not capable of understanding the study information or don't accept participation

**Date of first enrolment**

01/03/2021

**Date of final enrolment**

31/12/2025

## **Locations**

**Countries of recruitment**

Czech Republic

Italy

Lithuania

Philippines

Poland

Spain

Sweden

**Study participating centre**

**Södersjukhuset**

Department of Obstetrics and Gynecology

Stockholm

Sweden

11883

**Study participating centre**

**Centrallasarettet Växjö**

Department of Obstetrics and Gynecology

Växjö

Sweden  
35234

**Study participating centre**  
**Karolinska University Hospital, Huddinge**  
Division of Gynecology and Reproduction  
Huddinge  
Sweden  
14186

**Study participating centre**  
**Aleris UltraGyn, Sabbatsbergs Hospital**  
Sabbatsbergs Hospital  
Stockholm  
Sweden  
11361

**Study participating centre**  
**Uppsala University Hospital**  
Department of Obstetrics and Gynecology  
Uppsala  
Sweden  
75185

**Study participating centre**  
**University Hospital Linköping**  
Department of Obstetrics and Gynecology  
Linköping  
Sweden  
58191

**Study participating centre**  
**Skåne University Hospital**  
Department of Obstetrics and Gynecology  
Lund  
Sweden  
22242

**Study participating centre**

**Östra Hospital, Sahlgrenska University Hospital**  
Department of Obstetrics and Gynecology  
Gothenburg  
Sweden  
41685

**Study participating centre**  
**Hallands Hospital**  
Department of Obstetrics and Gynecology  
Halmstad  
Sweden  
30233

**Study participating centre**  
**Danderyds Hospital**  
Department of Obstetrics and Gynecology  
Danderyd  
Sweden  
18288

**Study participating centre**  
**GynStockholm, Cevita Care**  
Gynecology Clinic  
Stockholm  
Sweden  
11281

**Study participating centre**  
**Nyköpings Hospital**  
Department of Obstetrics and Gynecology  
Nyköping  
Sweden  
61139

**Study participating centre**  
**NÄL Hospital Trollhättan**  
Department of Obstetrics and Gynecology  
Trollhättan  
Sweden  
46173

**Study participating centre**  
**Örebro University Hospital**  
Department of Obstetrics and Gynecology  
Örebro  
Sweden  
70185

**Study participating centre**  
**Skåne University Hospital**  
Department of Obstetrics and Gynecology  
Malmö  
Sweden  
21428

**Study participating centre**  
**Karlstad Central Hospital**  
Department of Obstetrics and Gynecology  
Karlstad  
Sweden  
65230

**Study participating centre**  
**Endogyn**  
Stockholm  
Sweden  
131 31

**Study participating centre**  
**Institute for the Care of Mother and Child**  
Prague  
Czech Republic  
147 00

**Study participating centre**  
**I.R.C.C.S. Burlo Garofolo Institute for Maternal and Child Health,**  
Trieste  
Italy  
341 37



**Study participating centre**  
**IRCCS San Gerardo Dei Tintori**  
Department of Obstetrics and Gynecology  
Monza  
Italy  
20900

**Study participating centre**  
**University of Milano-Bicocca**  
Department of Medicine and Surgery  
Milan  
Italy  
20126

**Study participating centre**  
**Fondazione Poliambulanza Istituto Ospedaliero**  
Department of Obstetrics and Gynecology  
Brescia  
Italy  
25124

**Study participating centre**  
**Forlì and Faenza Hospitals**  
Obstetrics and Gynecology Unit  
Romagna  
Italy  
48018

**Study participating centre**  
**Mater Olbia Hospital**  
Gynecology and Breast Care Center  
Olbia  
Italy  
07026

**Study participating centre**

**Medical University of Lublin**

Lublin  
Poland  
20059

**Study participating centre****Medical University of Silesia**

Katowice  
Poland  
40055

**Study participating centre****Rizal Medical Center**

Department of Obstetrics and Gynecology  
Metro Manila  
Philippines  
1600

**Study participating centre****Hospital Universitario Dexeus**

Department of Obstetrics, Gynecology, and Reproduction  
Barcelona  
Spain  
08028

**Study participating centre****Lithuanian University of Health Sciences**

Department of Obstetrics and Gynaecology  
Kaunas  
Lithuania  
44307

**Sponsor information****Organisation**

Karolinska Institute

**Sponsor details**

Sjukhusbacken 10  
Stockholm  
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11883  
+46 (0)8 524 800 00  
annsofie.wall@ki.se

**Sponsor type**

University/education

**Website**

<https://ki.se/kisos>

**ROR**

<https://ror.org/056d84691>

## **Funder(s)**

**Funder type**

Government

**Funder Name**

Vetenskapsrådet

**Alternative Name(s)**

Swedish Research Council, VR

**Funding Body Type**

Government organisation

**Funding Body Subtype**

National government

**Location**

Sweden

**Funder Name**

Cancerfonden

**Alternative Name(s)**

Swedish Cancer Society

**Funding Body Type**

Private sector organisation

**Funding Body Subtype**

Trusts, charities, foundations (both public and private)

**Location**

Sweden

**Funder Name**

Stockholms Läns Landsting

**Alternative Name(s)**

Stockholm County Council

**Funding Body Type**

Government organisation

**Funding Body Subtype**

Local government

**Location**

Sweden

**Funder Name**

Radiumhemmets Forskningsfonder

## Results and Publications

**Publication and dissemination plan**

Planned publication in a high-impact peer reviewed journal

**Intention to publish date**

30/06/2026

**Individual participant data (IPD) sharing plan**

Data from the analysis will be available upon request from Elisabeth Epstein (elisabeth.epstein@ki.se). Anonymized clinical data will be shared after publication; images and videos will not be available. All patients gave their informed consent to participate, but not specifically that data would be shared. All data have been anonymized only the PI of the study has access to the anonymization key.

**IPD sharing plan summary**

Available on request

**Study outputs**

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
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<a href="#">Protocol file</a>	version 1	06/11/2023	No	No
<a href="#">Protocol file</a>	version 2	28/05/2024	No	No