



BodyMaps

Personalized 3D Atlas of Human Body

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Data Science and AI Trusted Dataset Awards

Part of the mission of the Data Science and AI Institute is to strengthen the reputation of Johns Hopkins as a premier source of trusted datasets that can be used for research, scholarship, and the development of trustworthy AI systems. As the NAIRR notes, there is a need for “Trusted data providers and hosts for a transparent and responsible AI data commons. Access to data should be tiered, controlled by the data providers, and provided through the same portal through which computational resources are provided.” Poor data practices can lead to a variety of problems including ‘bad’ data, inherent biases, representational disparities, inability to generalize to real-world situations, and lack of robustness. In practical application, these problems can in turn lead to a host of consequences including miscarriage of justice, reputational damage, and liability.



AT WSE

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A Boost for Cancer Moonshot

WINTER 2025



A Johns Hopkins engineering-led team has been awarded \$20.9 million over five years to enhance surgical capabilities to treat cancer.



AWARDS AND HONORS

Johns Hopkins University's faculty achievements shine with Lauren Gardner winning the Future Insight Prize from Merck, a global life sciences conglomerate based in Germany.

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The BodyMaps Project

AI-Integrated Annotation

AI-Assisted Cancer Moonshot

AI-Trusted Benchmark

**ScaleMAI
Platform**

**Synthetic Data
Engine**

Lesion Detection

**Cancer
Diagnosis**

**Treatment
Planning**

**Foundation
Models**

**Universal
Models**

**Anatomical
Segmentation**

**Multi-lesion
Segmentation**

**Human-level
Detection**

**Super-human
Classification**

Tumor Staging

**Supervised Pre-
Trained Models**

**Generalists vs.
Specialists**



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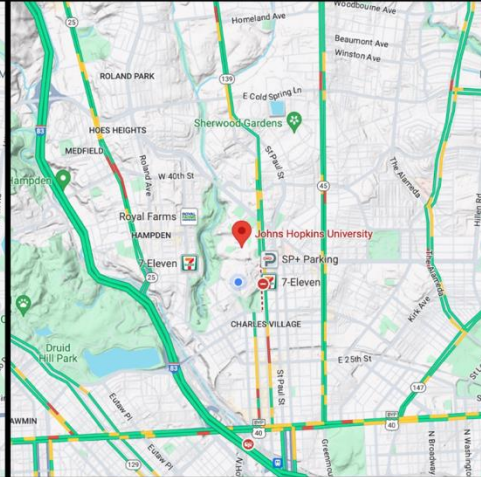
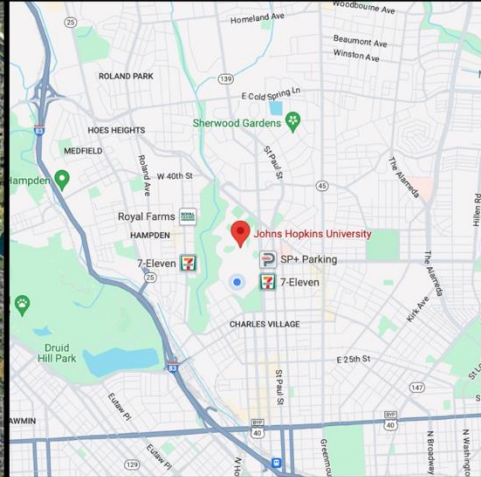
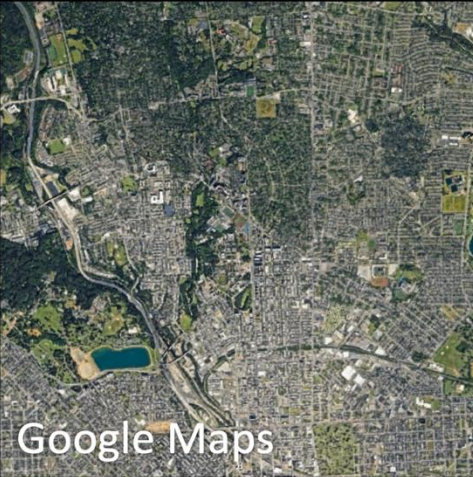
Super-human
Classification

Tumor Staging

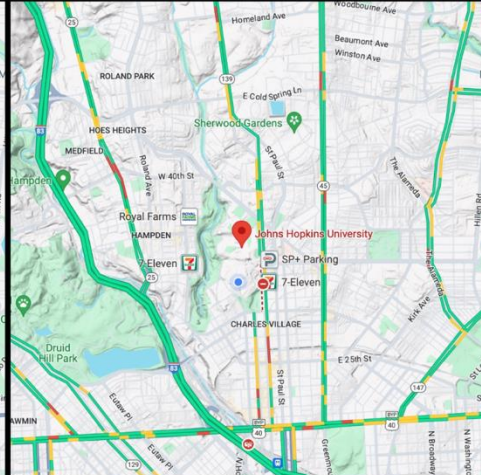
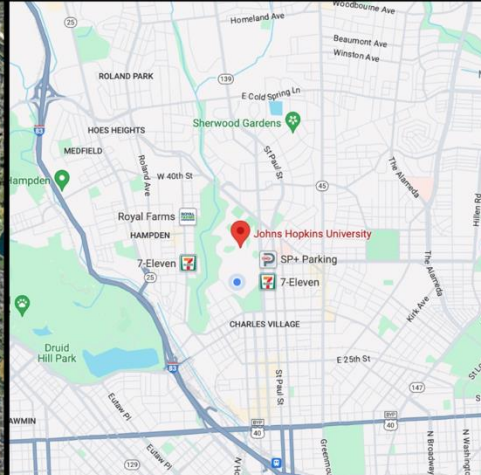
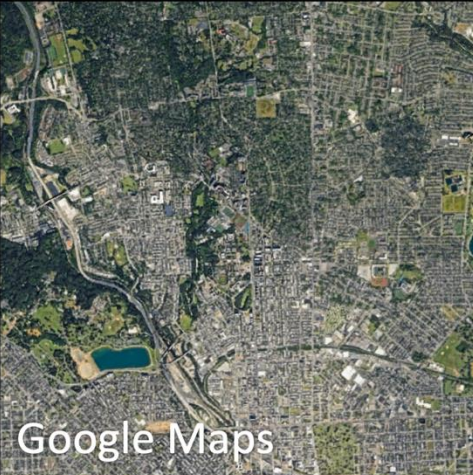
Supervised Pre-
Trained Models

Generalists vs.
Specialists

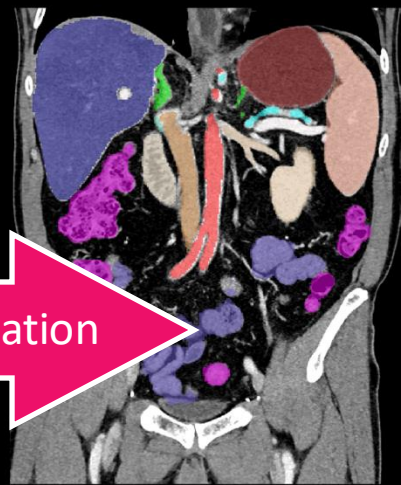
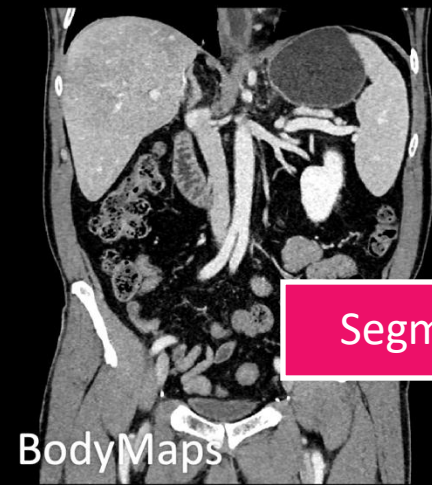




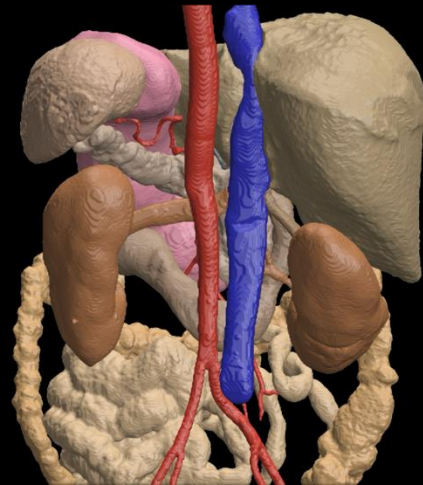
Data → Information → Knowledge → Application

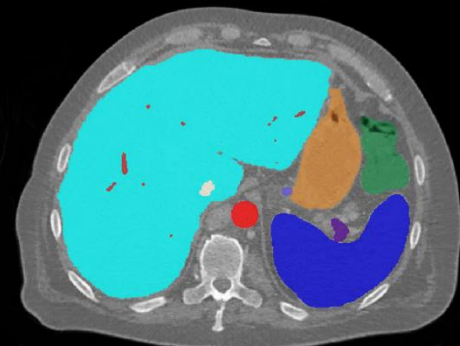
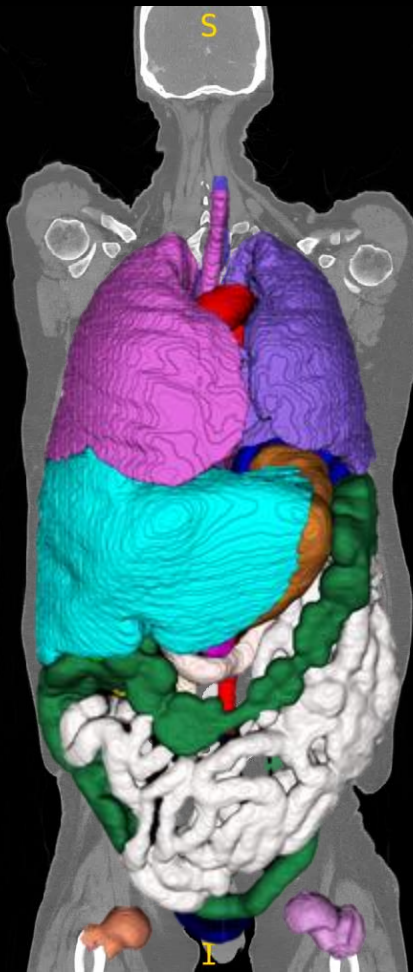
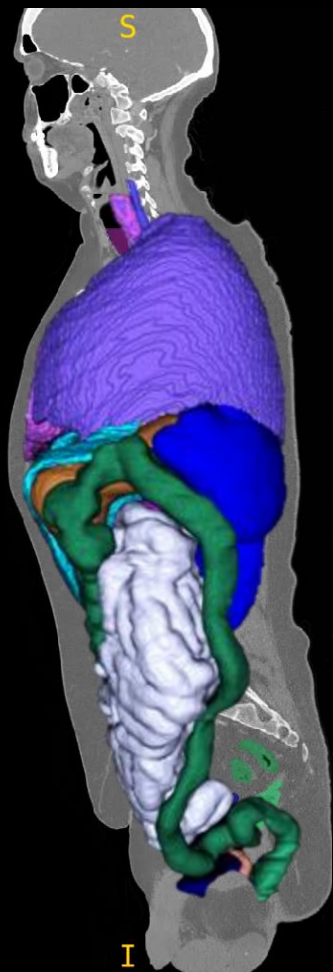


Data → Information → Knowledge → Application

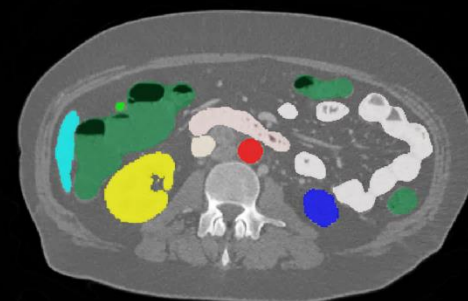
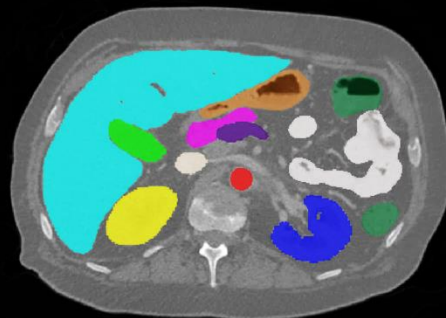


Segmentation





Google Maps Earth
We Map Human Body





The **Visible Human Project** is an effort to create a detailed data set of cross-sectional photographs of the human body, in order to facilitate anatomy visualization applications.

Wikipedia

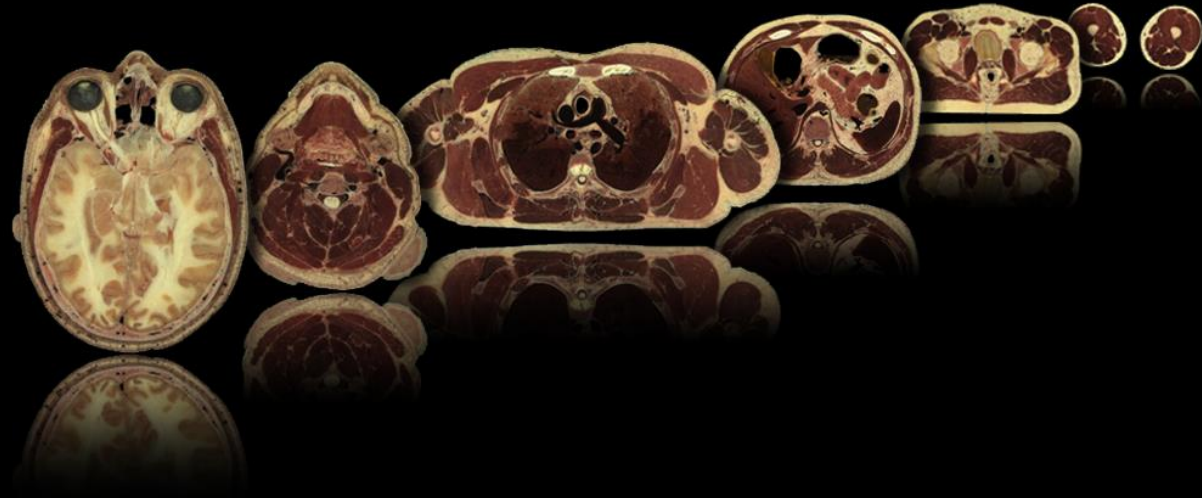
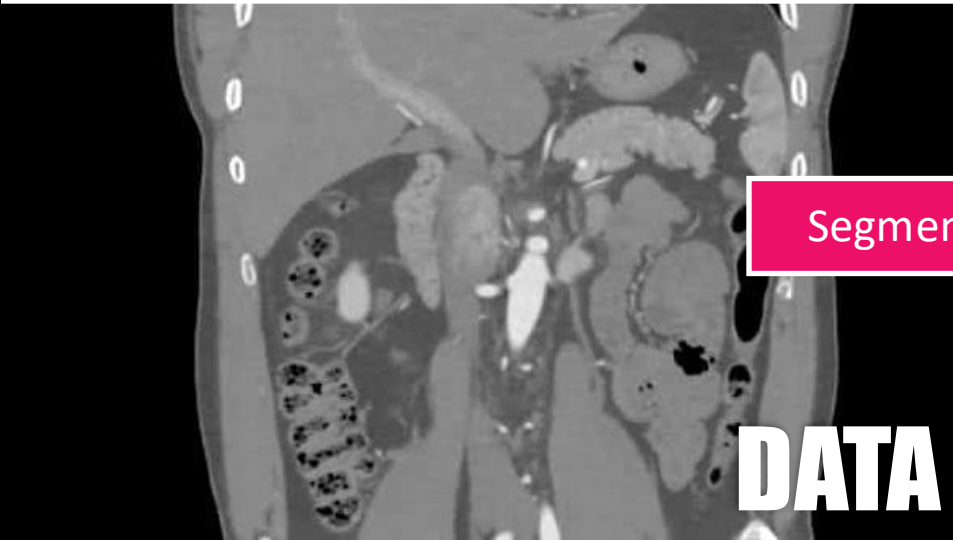
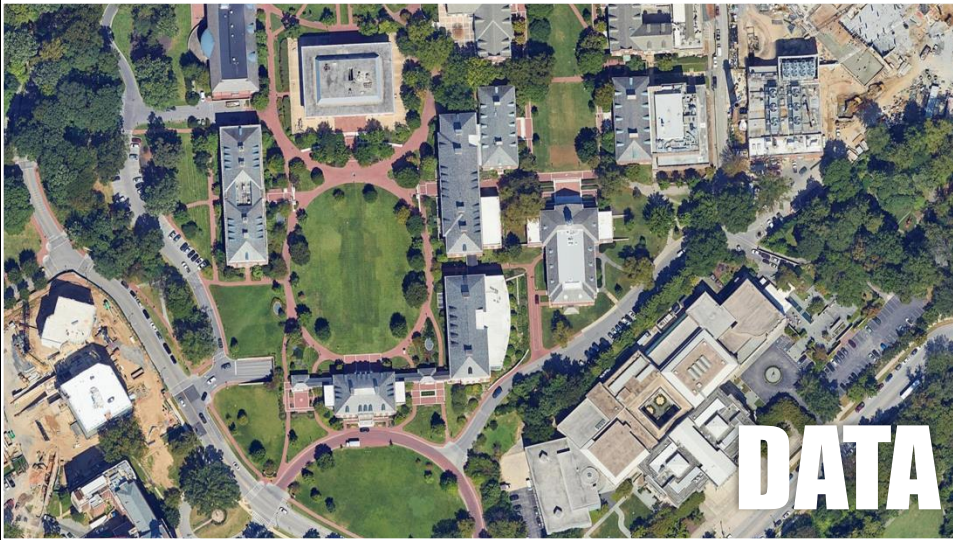


Photo by Visual Human Project



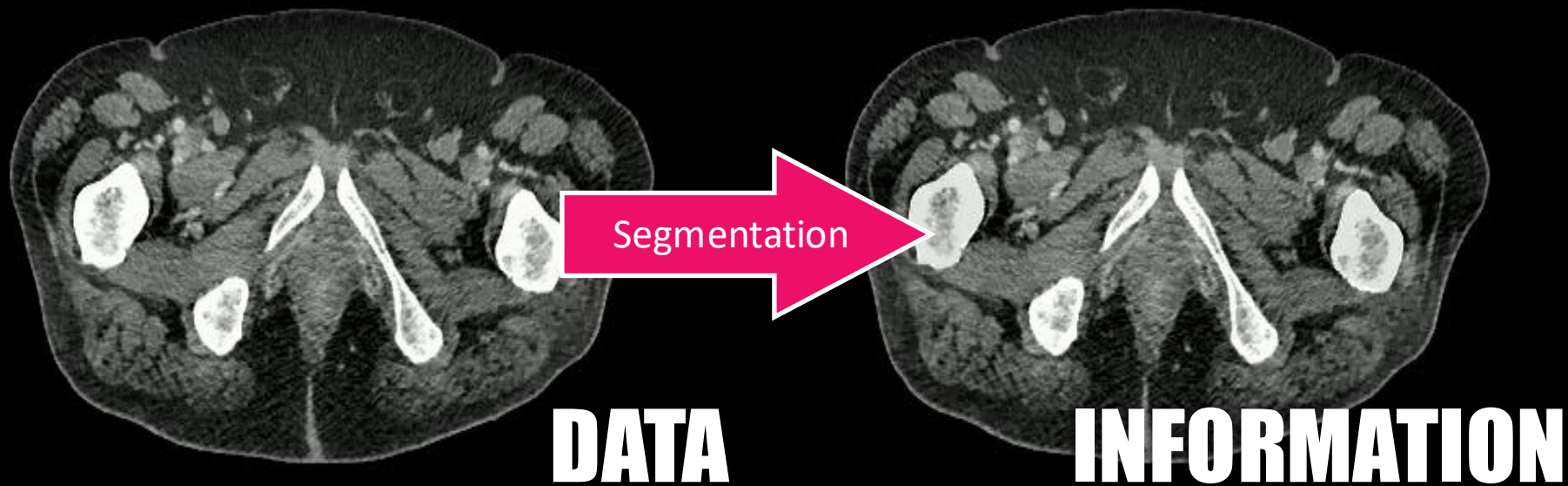
Raw Data

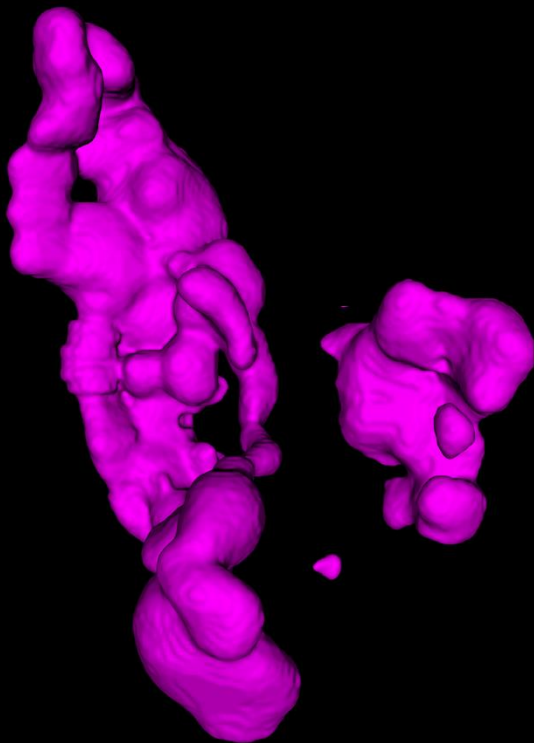
Computed Tomography



INFORMATION

Take a radiologist **30~60 minutes** to annotate a structure





annotated colon in
TotalSegmentator

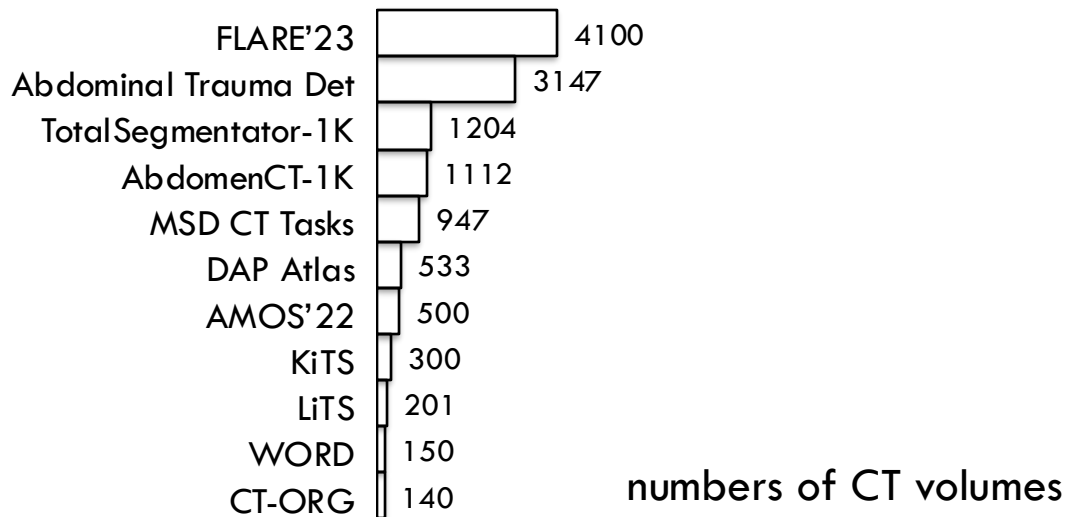
“The colon contour should include entire wall and lumen of cecum, appendix, ascending colon, transverse colon, descending colon and sigmoid colon **continuously**, as well as any colon lesions. **Adjacent structures** such as small intestine, surrounding fat, mesentery, and omentum should be excluded. The boundary between the ileum and colon is defined by the ileocecal valve. The boundary between the rectum and sigmoid colon is defined by the sigmoid take-off.”

— Annotation standard
for the colon



annotated colon in
AbdomenAtlas

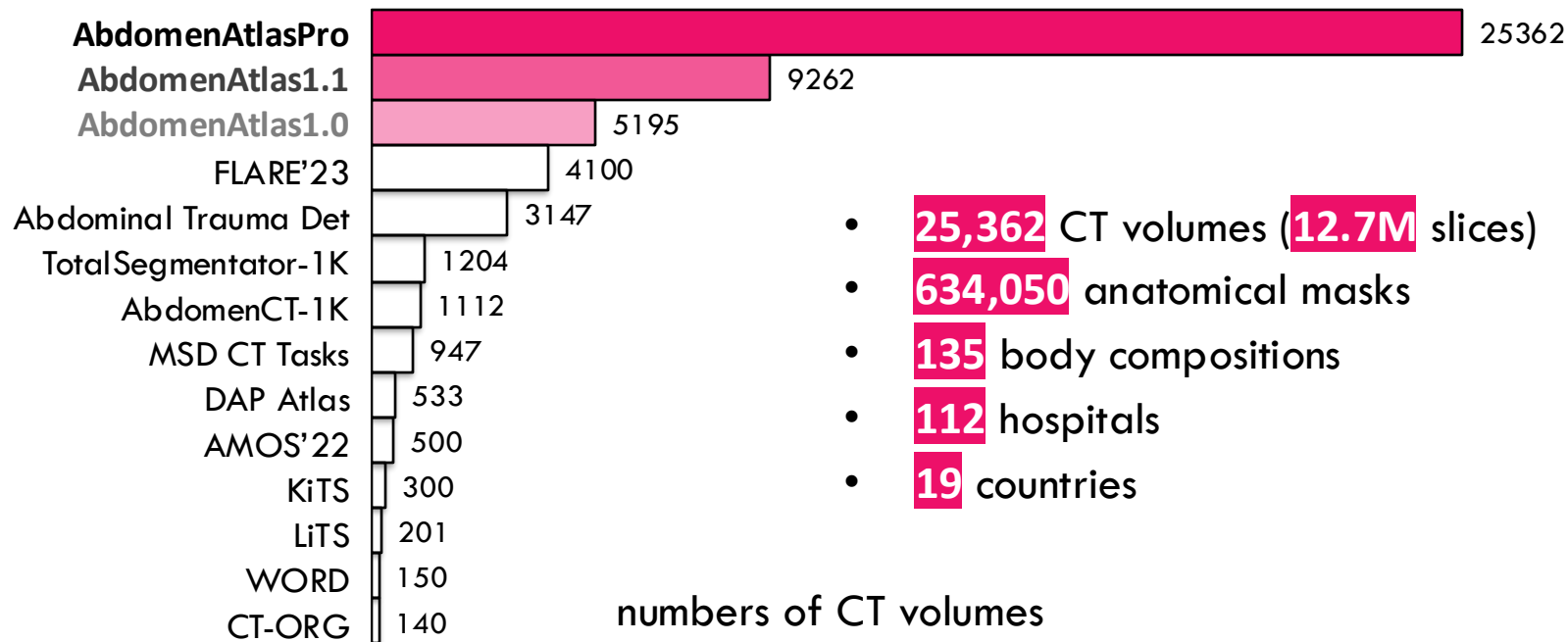
Publicly available abdominal CT datasets



AbdomenAtlasPro = 25K CT Volumes + 600K 3D Masks

AbdomenAtlas1.1 = 9K CT Volumes + 225K 3D Masks

AbdomenAtlas1.0 = 5K CT Volumes + 45K 3D Masks



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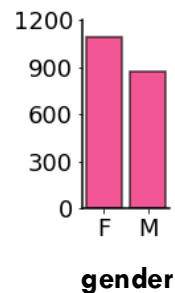
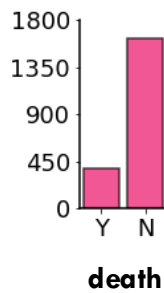
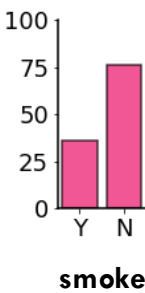
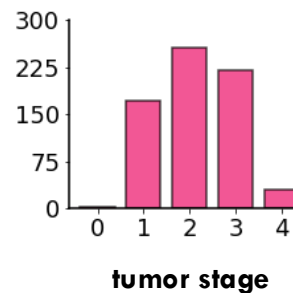
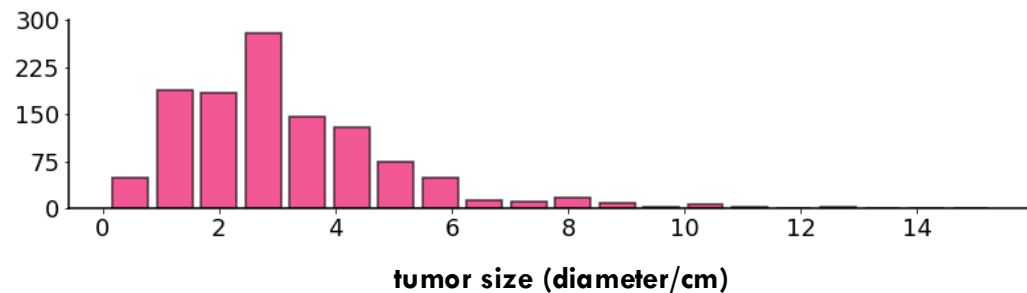
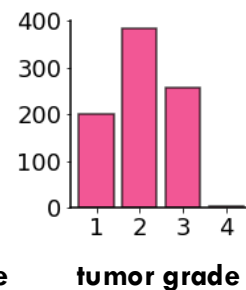
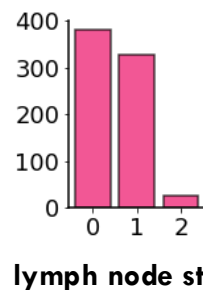
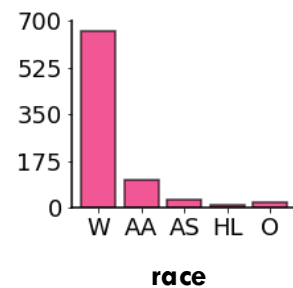
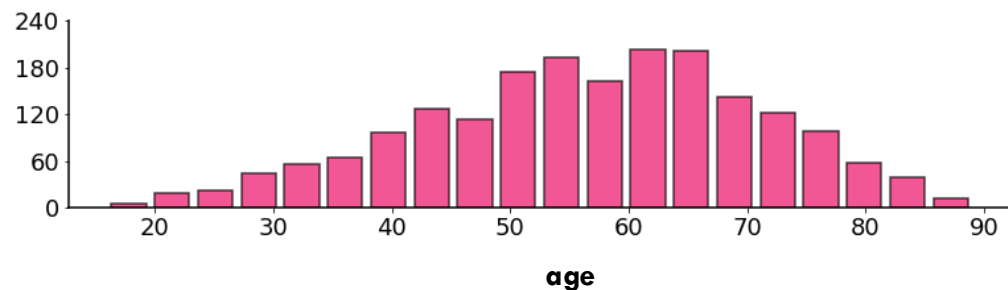
136 anatomical structures: adrenal gland left · adrenal gland right · airway · aorta · atrial appendage left · autochthon left · autochthon right · bladder · bone · brachiocephalic trunk · brachiocephalic vein left · brachiocephalic vein right · brain · clavicle left · clavicle right · celiac trunk · colon · common bile duct · common carotid artery left · common carotid artery right · costal cartilages · duodenum · esophagus · femur left · femur right · gall bladder · gluteus maximus left · gluteus maximus right · gluteus medius left · gluteus medius right · gluteus minimus left · gluteus minimus right · heart · hepatic vessel · hip left · hip right · humerus left · humerus right · iliac artery left · iliac artery right · iliac vena left · iliac vena right · iliopsoas left · iliopsoas right · intestine · kidney left · kidney right · liver · liver segment 1 · liver segment 2 · liver segment 3 · liver segment 4 · liver segment 5 · liver segment 6 · liver segment 7 · liver segment 8 · lung left · lung lower left lobe · lung lower right lobe · lung middle right lobe · lung right · lung upper left lobe · lung upper right lobe · pancreas · pancreas body · pancreas head · pancreas tail · pancreatic duct · portal vein and splenic vein · postcava · prostate · pulmonary vein · rectum · rib left 1 · rib left 10 · rib left 11 · rib left 12 · rib left 2 · rib left 3 · rib left 4 · rib left 5 · rib left 6 · rib left 7 · rib left 8 · rib left 9 · rib right 1 · rib right 10 · rib right 11 · rib right 12 · rib right 2 · rib right 3 · rib right 4 · rib right 5 · rib right 6 · rib right 7 · rib right 8 · rib right 9 · sacrum · scapula left · scapula right · skull · spleen · spinal cord · sternum · stomach · subclavian artery left · subclavian artery right · superior mesenteric artery · superior vena cava · thyroid gland · trachea · veins · vertebrae C1 · vertebrae C2 · vertebrae C3 · vertebrae C4 · vertebrae C5 · vertebrae C6 · vertebrae C7 · vertebrae L1 · vertebrae L2 · vertebrae L3 · vertebrae L4 · vertebrae L5 · vertebrae S1 · vertebrae T1 · vertebrae T10 · vertebrae T11 · vertebrae T12 · vertebrae T2 · vertebrae T3 · vertebrae T4 · vertebrae T5 · vertebrae T6 · vertebrae T7 · vertebrae T8 · vertebrae T9



AbdomenAtlasPro = 25K CT Volumes + 600K 3D Masks

AbdomenAtlas1.1 = 9K CT Volumes + 225K 3D Masks

AbdomenAtlas1.0 = 5K CT Volumes + 45K 3D Masks



dataset [year] [source]	# of CTs	# of classes	# of hospitals	annotation standard
<i>organ datasets</i>				
1. CHAOS [2018] [link]	40	1	1	gold
2. BTCV [2015] [link]	50	13	1	gold
3. Pancreas-CT [2015] [link]	82	1	1	gold
4. CT-ORG [2020] [link]	140	6	8	silver
5. WORD [2021] [link]	170	16	1	gold
6. AMOS22 [2022] [link]	500	15	2	silver
7. AbdomenCT-1K [2021] [link]	1,112	4	12	silver
8. TotalSegmentator [2023] [link]	1,228	117	1	silver
9. Trauma Detect. [2023] [link]	4,274	6	23	silver
<i>tumor datasets</i>				
10. TCGA-SARC [2016] [link]	5	1	1	-
11. TCGA-KICH [2016] [link]	15	1	1	-
12. TCGA-KIRP [2016] [link]	33	1	1	-
13. CTpred-Sunitinib-panNET [2022] [link]	38	1	1	-
14. Pancreatic-CT-CBCT-SEG [2021] [link]	40	7	1	gold
15. TCGA-STAD [2016] [link]	46	1	1	-
16. MSD Spleen [2019] [link]	61	1	1	gold
17. CPTAC-SAR [2019] [link]	88	1	1	-
18. MSD Lung [2019] [link]	96	1	1	gold
19. TCGA-LIHC [2016] [link]	97	1	1	-
20. HCC-TACE-Seg [2021] [link]	105	1	1	gold
21. TCGA-BLCA [2016] [link]	120	1	1	-
22. TCGA-OV [2016] [link]	143	1	1	-
23. CPTAC-PDA [2018] [link]	168	2	1	gold
24. CT Lymph Nodes [2015] [link]	176	2	1	gold
25. MSD Colon [2019] [link]	190	1	1	gold
26. MSD Liver [2019] [link]	201	2	7	gold
27. LiTS [2019] [link]	201	2	7	gold
28. PCL[2021] [link]	221	3	1	silver
29. StageII-Colorectal-CT [2022] [link]	230	1	1	-
30. CPTAC-UCEC [2019] [link]	250	1	1	-
31. CPTAC-CCRCC [2018] [link]	262	1	1	-
32. TCGA-KIRC [2016] [link]	267	1	1	-
33. TCIA-LDCT [2020] [link]	299	1	1	-
34. MSD Pancreas [2019] [link]	420	2	1	gold
35. MSD Hepatic Vessels [2019] [link]	443	2	1	gold
36. Med-Lymph-Node-SEG[2024] [link]	513	1	3	gold
37. KiTS23 [2020] [link]	599	3	2	gold
38. TCIAColon [2015] [link]	825	1	1	-
AbdomenAtlasPro	25,362	25	112	silver

***“How long does it take
to annotate
25K CT volumes
600K 3D masks?”***

dataset [year] [source]	# of CTs	# of classes	# of
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organ datasets

1. CHAOS [2018]	1		
2. BTCV [2017]	13		
3. Pancrn	1		
4. CT	6		
5. V			
6.			
7.			
19.			
20.			
21. TC	1		
22. TCGA	1		
23. CPTAC-P	2		
24. CT Lymph Node	2		
25. MSD Colon [2019] [link]	190	1	
26. MSD Liver [2019] [link]	201	2	
27. LiTS [2019] [link]	201	2	
28. PCL[2021] [link]	221	3	
29. StageII-Colorectal-CT [2022] [link]	230	1	
30. CPTAC-UCEC [2019] [link]	250	1	
31. CPTAC-CCRCC [2018] [link]	262	1	
32. TCGA-KIRC [2016] [link]	267	1	
33. TCIA-LDCT [2020] [link]	299	1	
34. MSD Pancreas [2019] [link]	420	2	
35. MSD Hepatic Vessels [2019] [link]	443	2	
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37. KiTS23 [2020] [link]	599	3	
38. TCIAColon [2015] [link]	825	1	

AbdomenAtlasPro	25,362	25	112	silver
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WASHINGTON ON VIEW

THE NATION'S CAPITAL SINCE 1790

JOHN W. REPS

1790-2024



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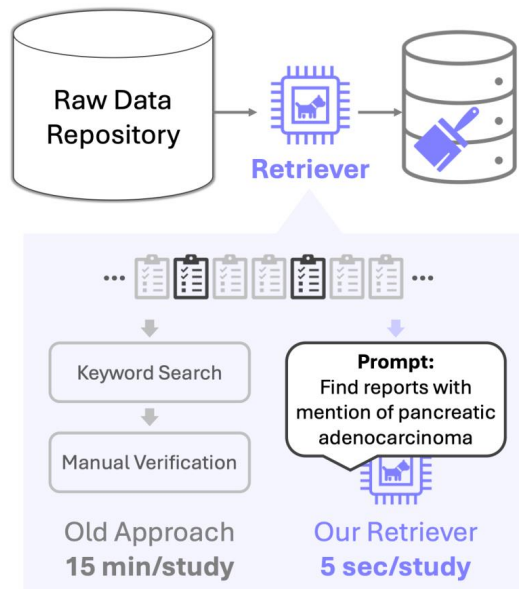
Generalists vs.
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Supervised Pre-
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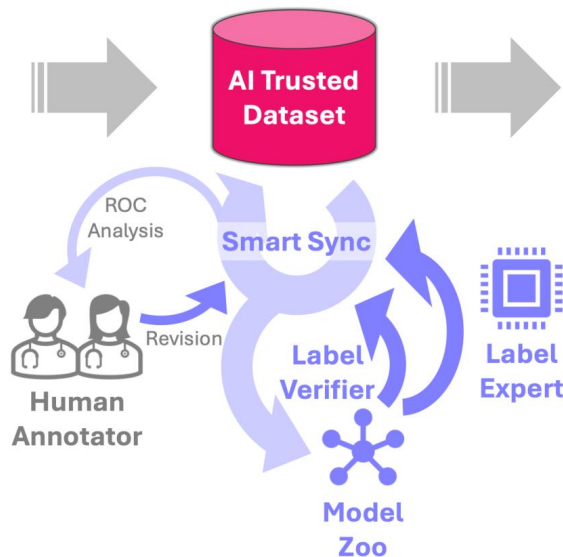


ScaleMAI – Accelerating the Development of Trusted Datasets and AI Models

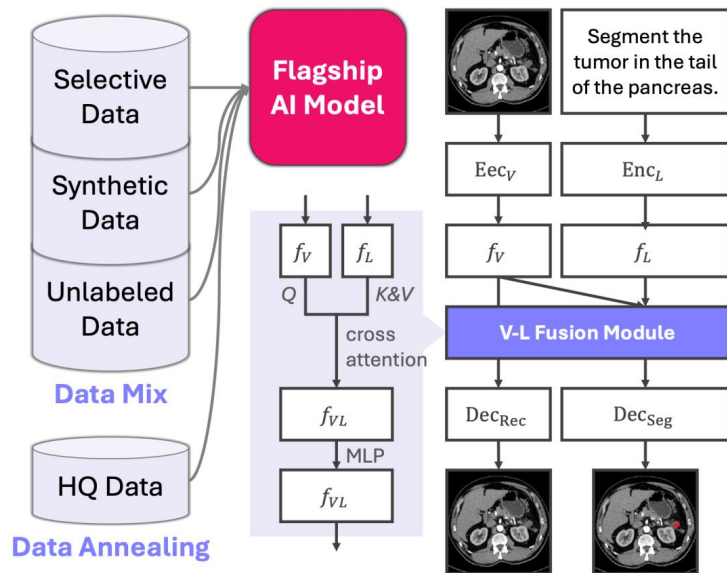
Curation: Clinical Needs → Suitable Data



Integration: AI, VLM, Human → Better Data



Integration: Data Mix, Annealing → Better AI

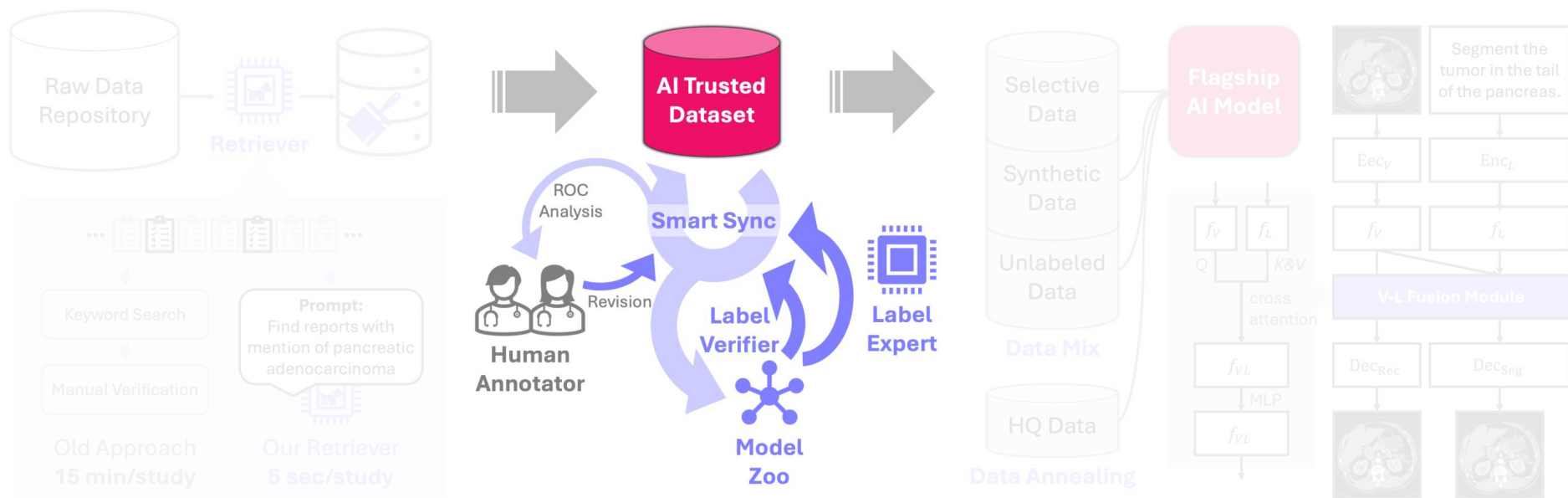


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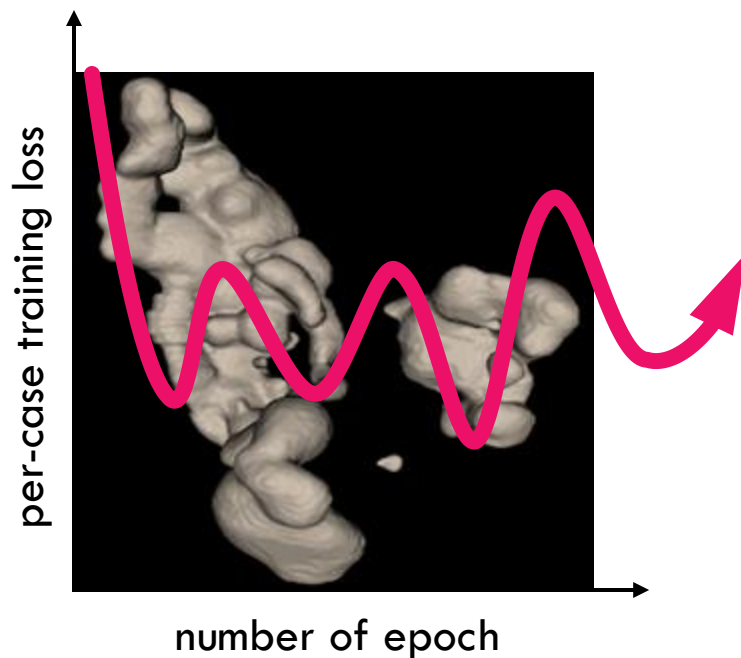
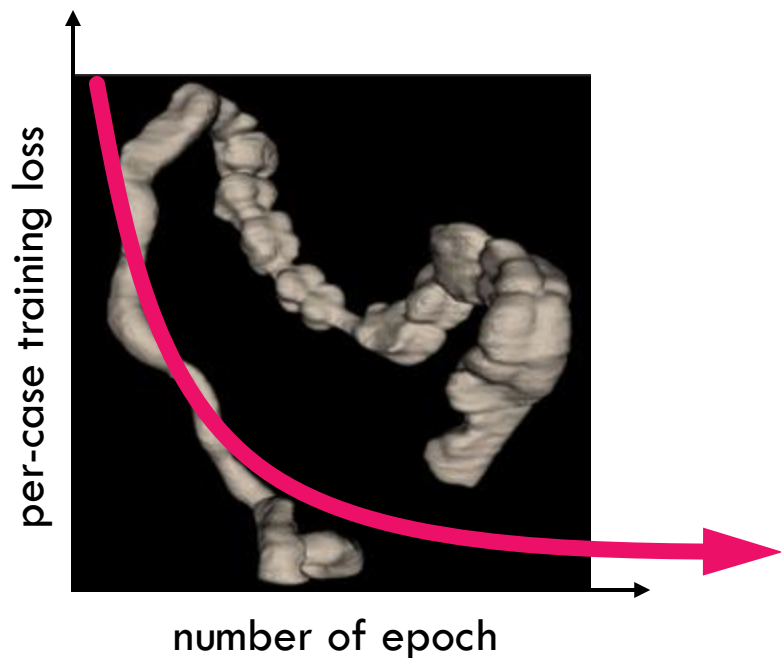
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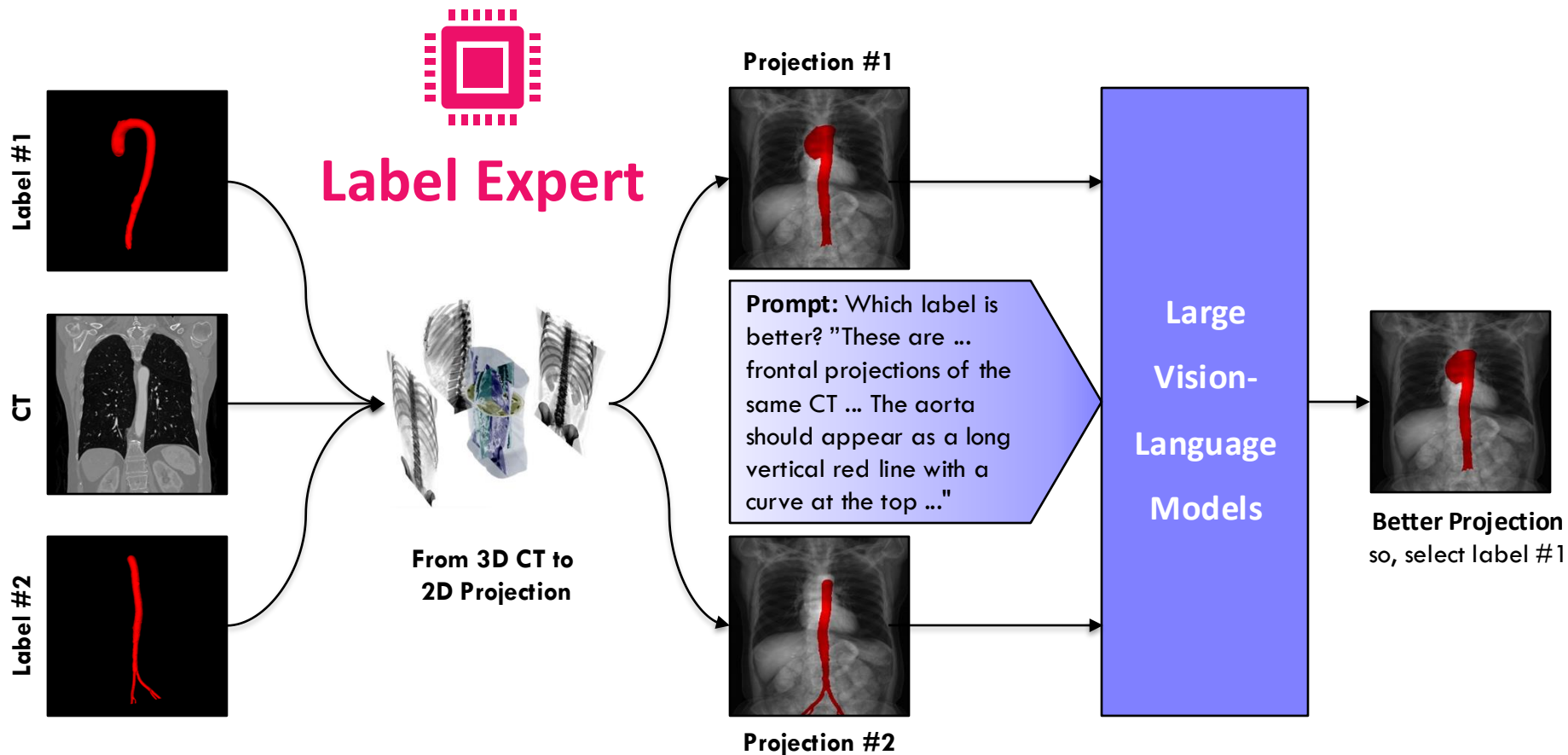


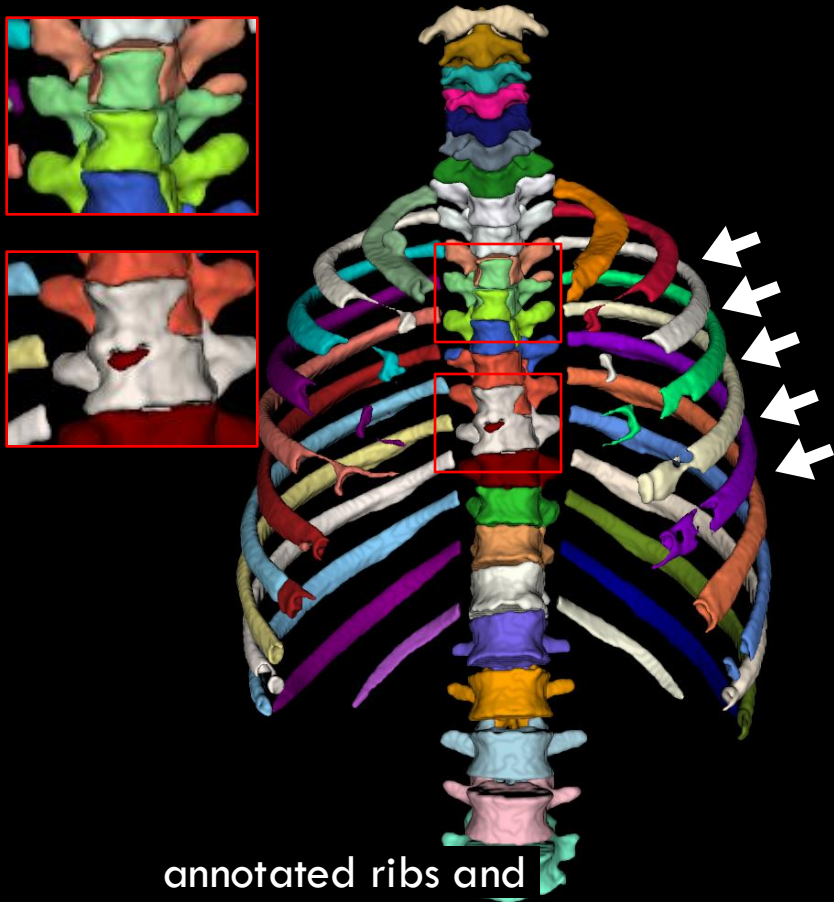
Label Verifier

left: well-annotated training data

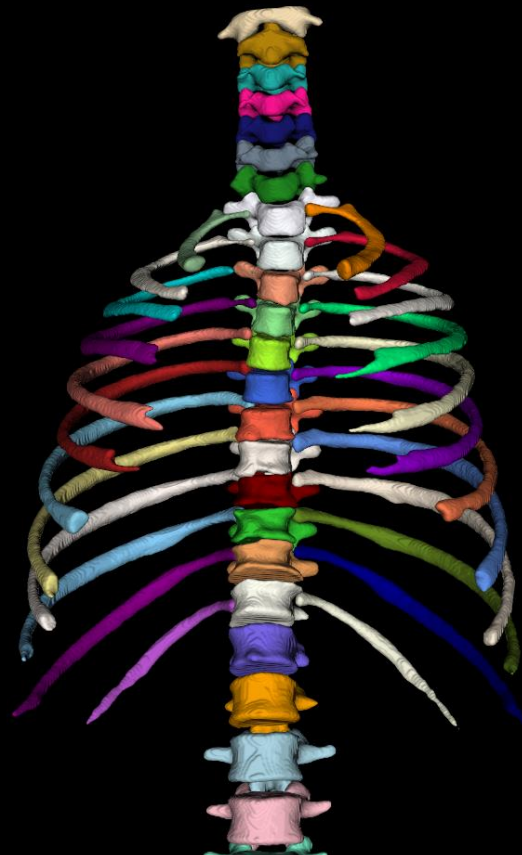
right: poorly-annotated training data





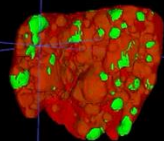
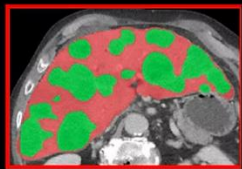
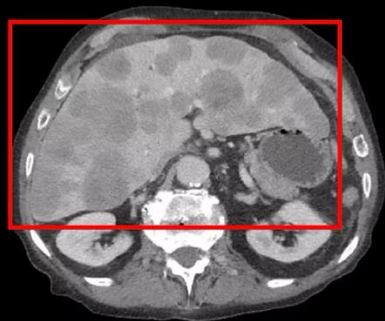


annotated ribs and
vertebrae in
TotalSegmentator

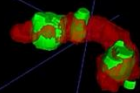
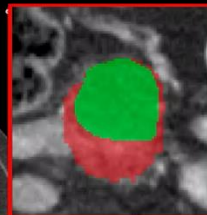


revised ribs and vertebrae
in
AbdomenAtlas

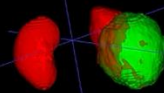
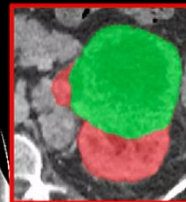
liver tumor



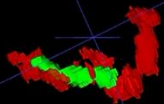
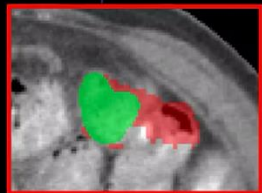
pancreatic tumor



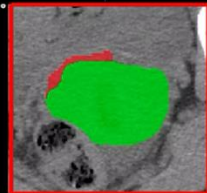
kidney tumor



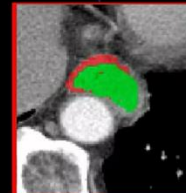
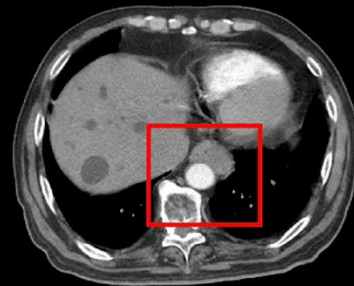
colon tumor

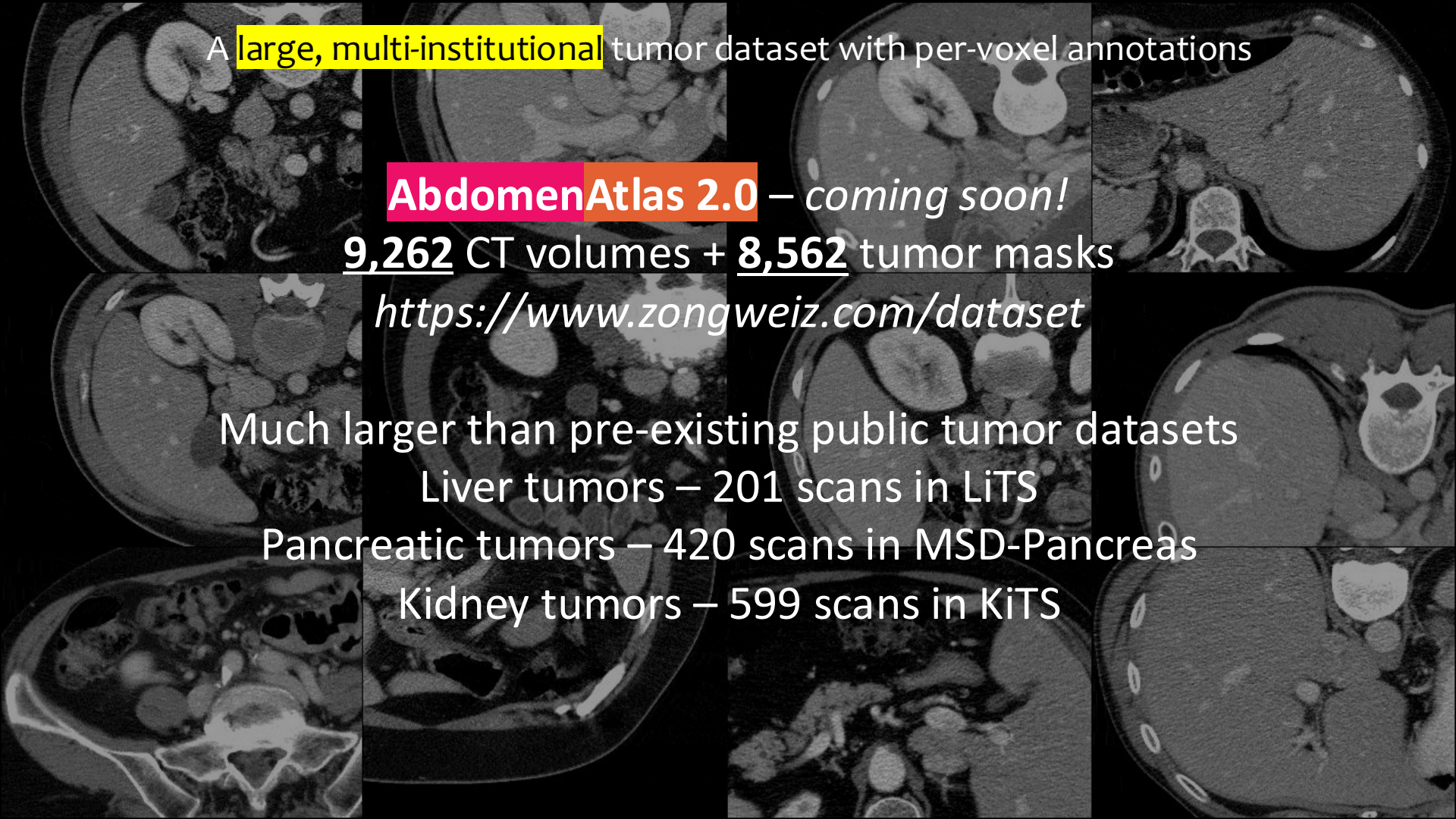


uterus tumor



esophagus tumor





A large, multi-institutional tumor dataset with per-voxel annotations

AbdomenAtlas 2.0 – *coming soon!*

9,262 CT volumes + 8,562 tumor masks

<https://www.zongweiz.com/dataset>

Much larger than pre-existing public tumor datasets

Liver tumors – 201 scans in LiTS

Pancreatic tumors – 420 scans in MSD-Pancreas

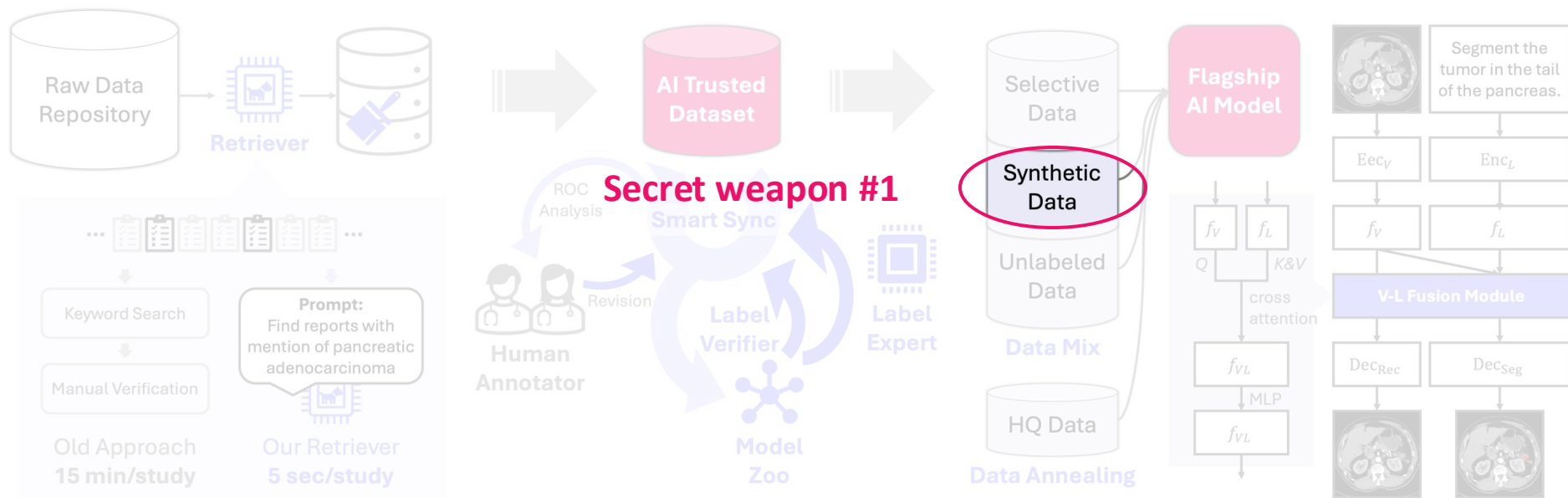
Kidney tumors – 599 scans in KiTS

ScaleMAI – Accelerating the Development of Trusted Datasets and AI Models

Curation: Clinical Needs → Suitable Data

Integration: AI, VLM, Human → Better Data

Integration: Data Mix, Annealing → Better AI





MidJourney

An astronaut riding a horse.

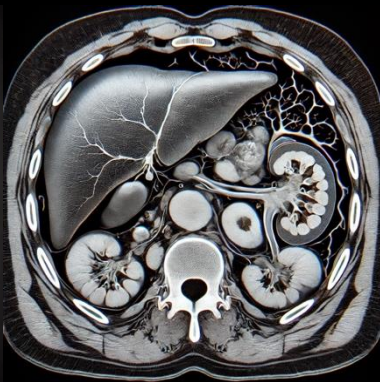
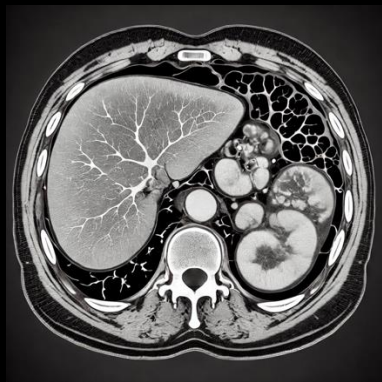


GPT-4o (OpenAI)

An astronaut riding a horse.

Synthetic data are a promising way forward.

- ✓ Cheap & perfect labeled
- ✓ No privacy issue
- ✓ Enormous training data



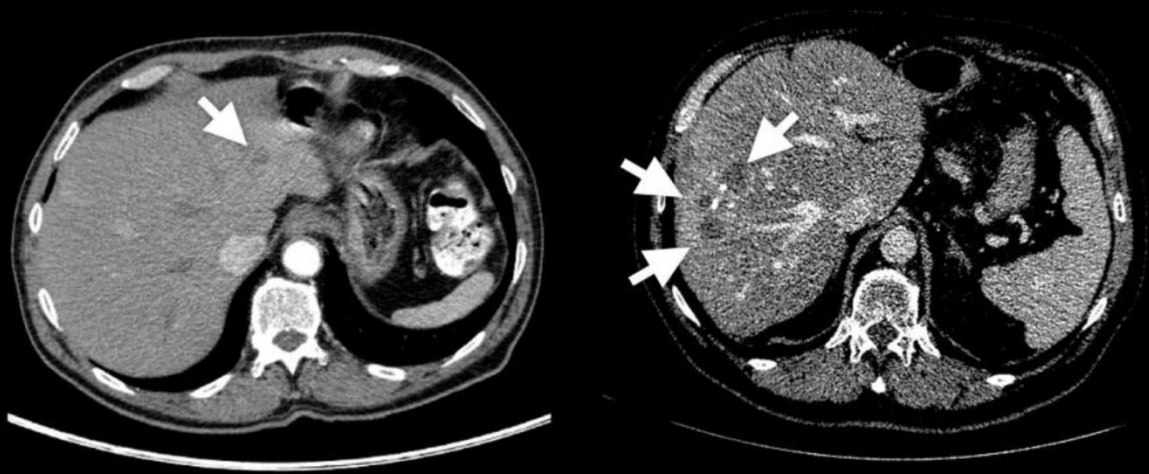
GPT-4o (OpenAI)

*Left: A 2D axial view of CT with liver tumors.
Right: A 2D axial view of CT without liver tumor.*



GPT-4o (OpenAI)

*Left: A 2D axial view of CT with pancreatic tumors.
Right: A 2D axial view of CT without pancreatic tumor.*



ARTIFICIAL INTELLIGENCE

JOHNS HOPKINS RESEARCHERS CREATE ARTIFICIAL TUMORS TO HELP AI DETECT EARLY-STAGE CANCER

The Hopkins-led team demonstrated that an AI model trained solely on synthetic tumor data works as well as models trained on real tumors

Synthetic data are a promising way forward.

- ✓ Cheap & perfect labeled
- ✓ No privacy issue
- ✓ Enormous training data

(Let's discuss these later)

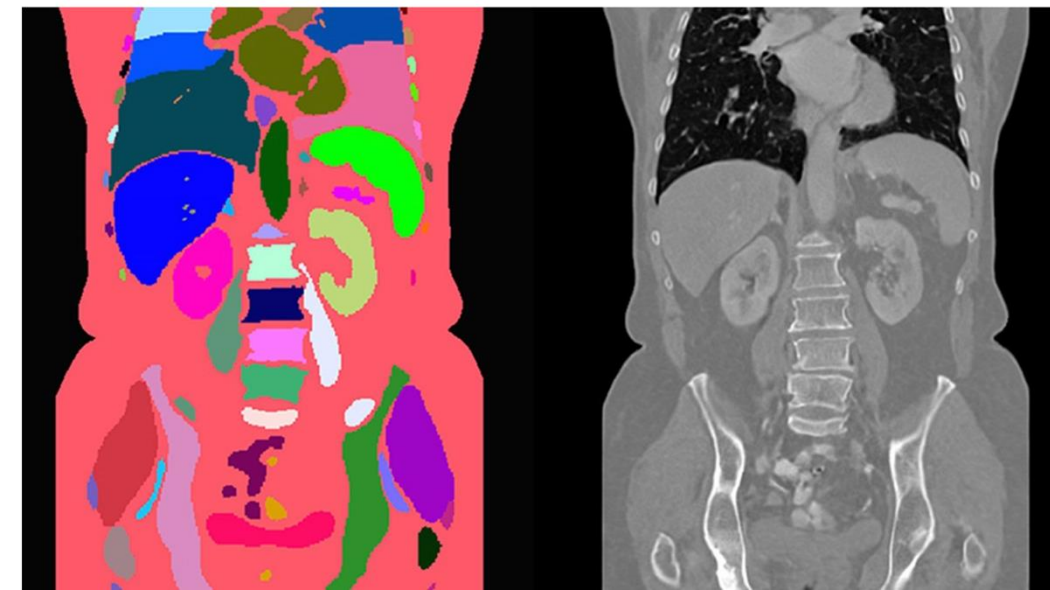
- ✓ Tougher testing
- ✓ Controllable analysis

Addressing Medical Imaging Limitations with Synthetic Data Generation

Jun 24, 2024

+26 Like Discuss (0)

By [Pengfei Guo](#), [Dong Yang](#), [Can Zhao](#) and [Daguang Xu](#)

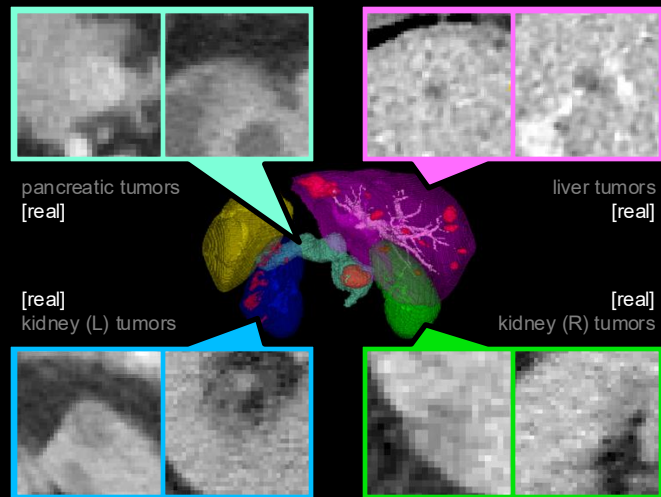


Synthetic data are a promising way forward.

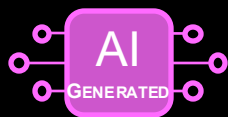
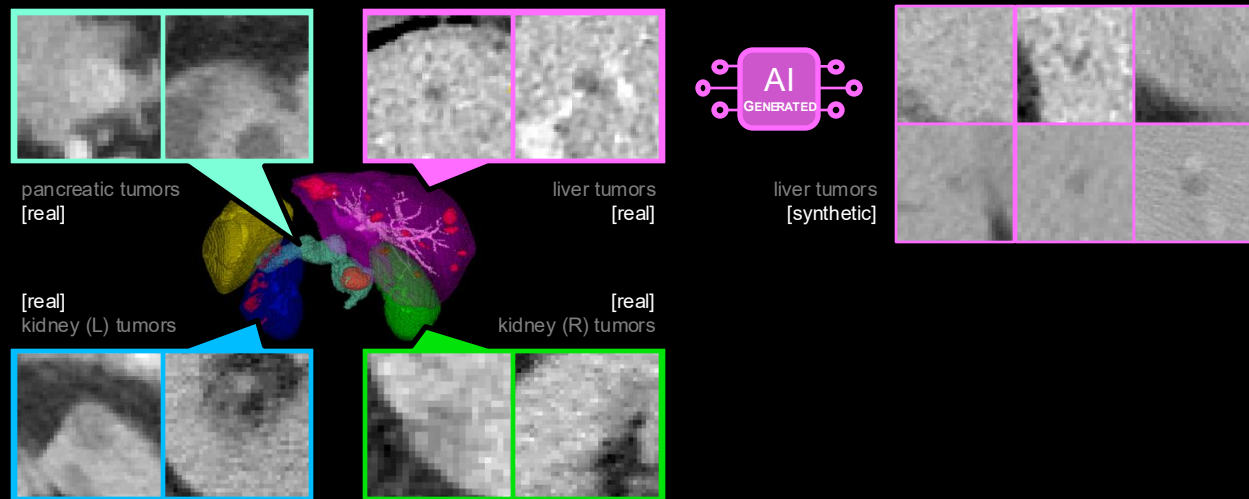
- ✓ Cheap & perfect labeled
- ✓ No privacy issue
- ✓ Enormous training data



Observation: **early-stage** tumors ($< 2\text{cm}$) often have *similar appearance* in CT images, whether they originate in the liver, pancreas, or kidneys.

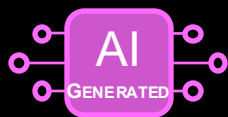
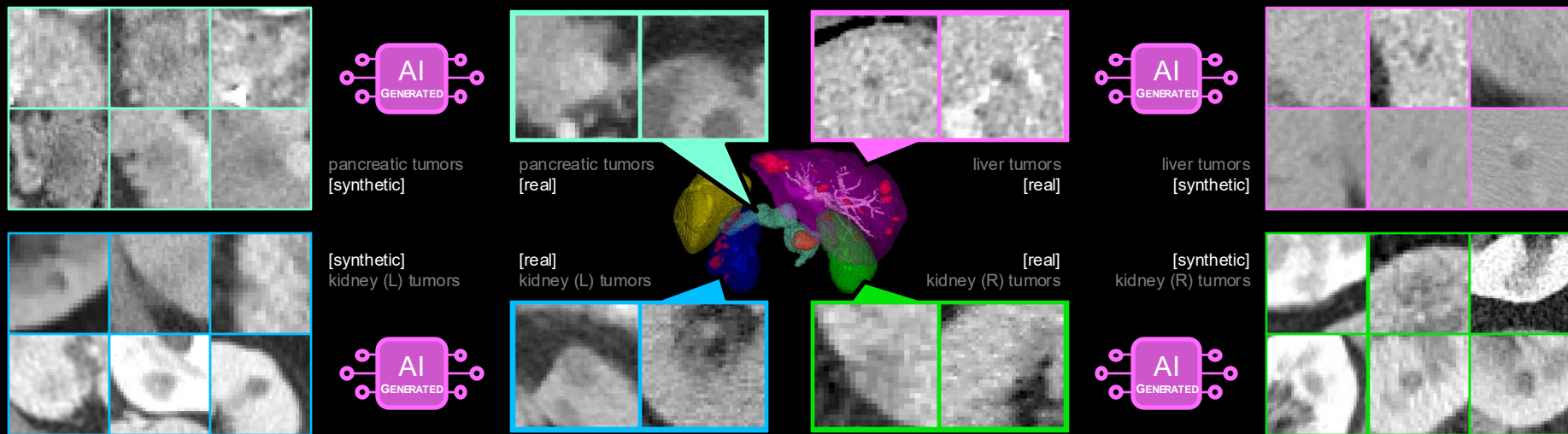


We used a Diffusion Model to “overfit” small tumor appearance across organs



Generative AI models (e.g., diffusion models) trained on **liver tumor** examples

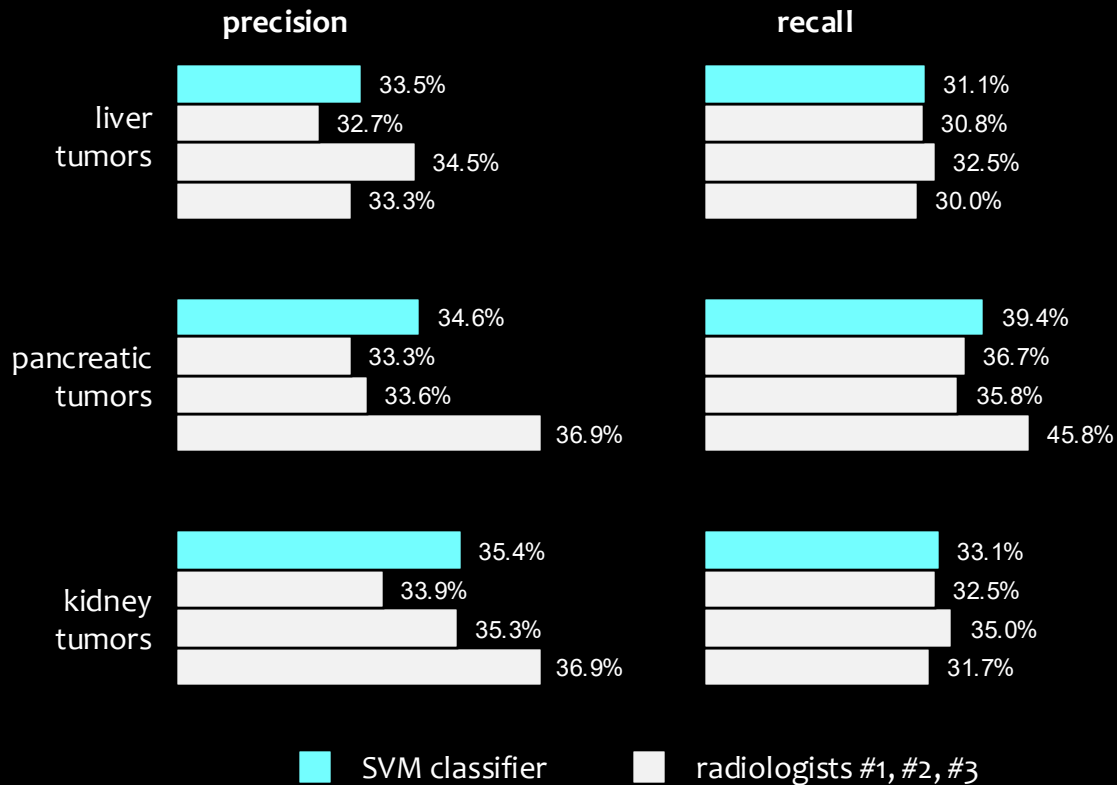
We used a Diffusion Model to “overfit” small tumor appearance across organs



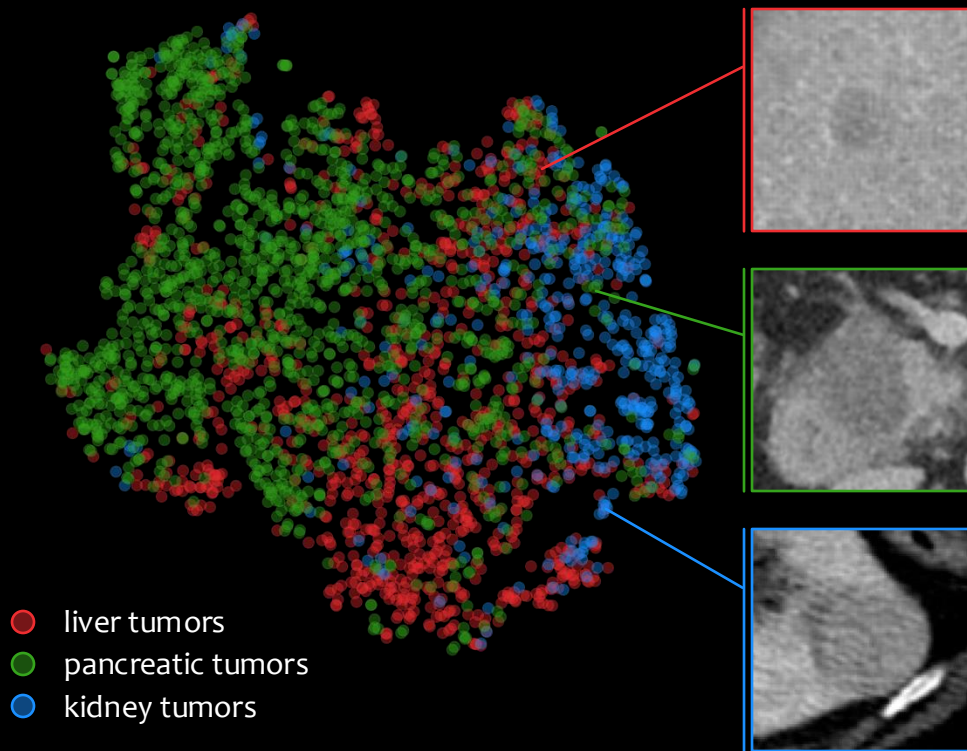
Generative AI models (e.g., diffusion models) trained on **liver tumor** examples

From which organ? Medical professionals / ML models cannot tell

We mix them up!



From which organ? Radiomics feature analysis cannot tell

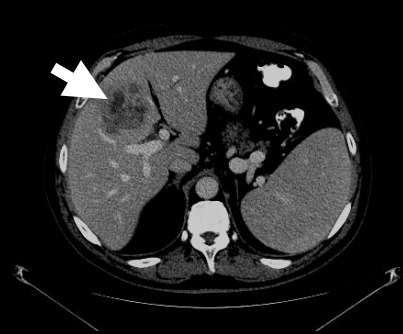
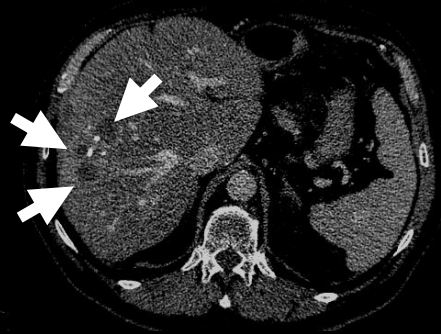


Early hepatocellular carcinoma in the liver presents as a small **hypoattenuating** lesion with a **round** shape in the portal venous phase, attributed to the 'wash-out' effect.

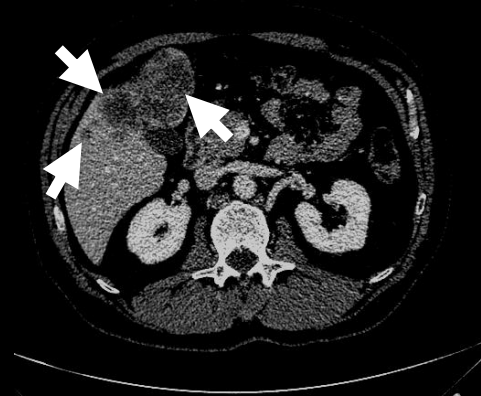
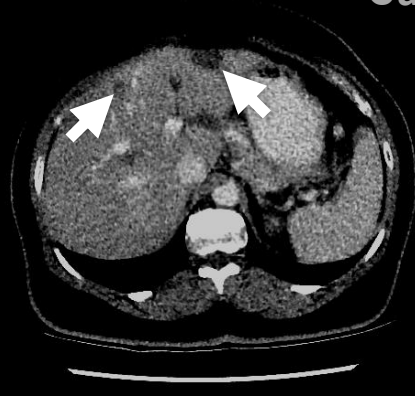
Early pancreatic ductal adenocarcinomas in the head of the pancreas display a **hypoenhancing** lesion with an **oval** shape in the venous phase, resulting from the dense fibroblastic stroma.

Early renal cell carcinoma in the left kidney manifests as an **oval hypoattenuating** lesion in the nephrographic phase.

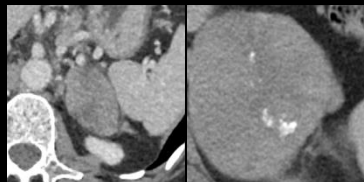
Real or synthetic? Medical professionals cannot tell



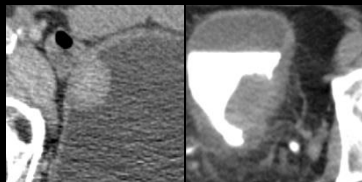
Can you?



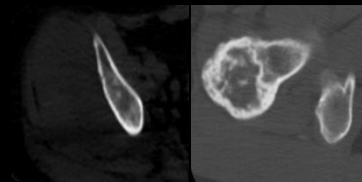
Real or synthetic? Medical professionals cannot tell



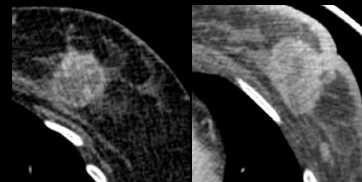
(a) adrenal tumor



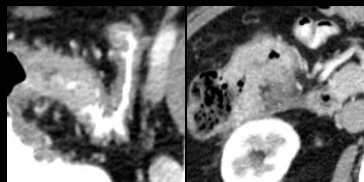
(b) bladder tumor



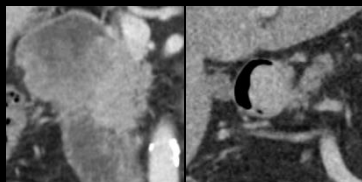
(c) bone tumor



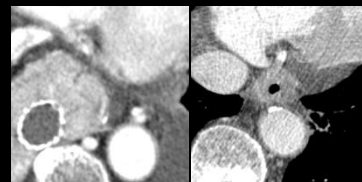
(d) breast tumor



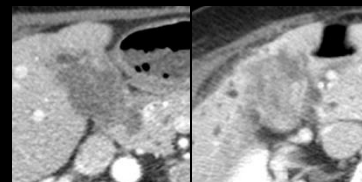
(e) colon tumor



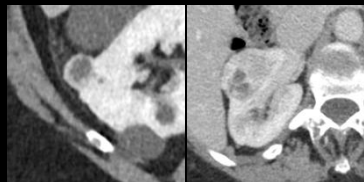
(f) duodenum tumor



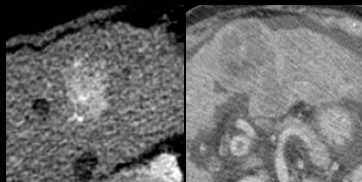
(g) esophagus tumor



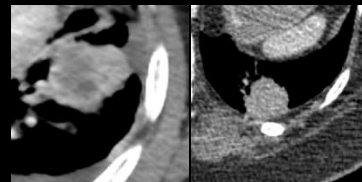
(h) gallbladder tumor



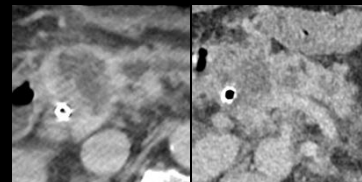
(i) kidney tumor



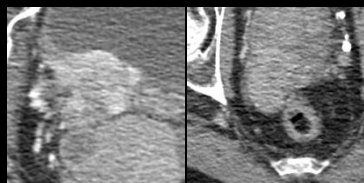
(j) liver tumor



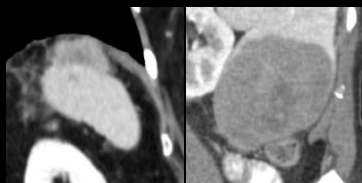
(k) lung tumor



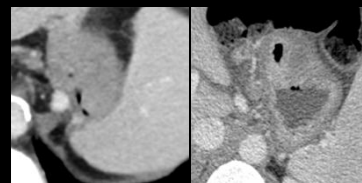
(l) pancreas tumor



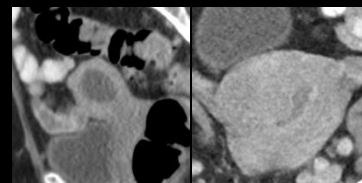
(m) prostate tumor



(n) spleen tumor



(o) stomach tumor



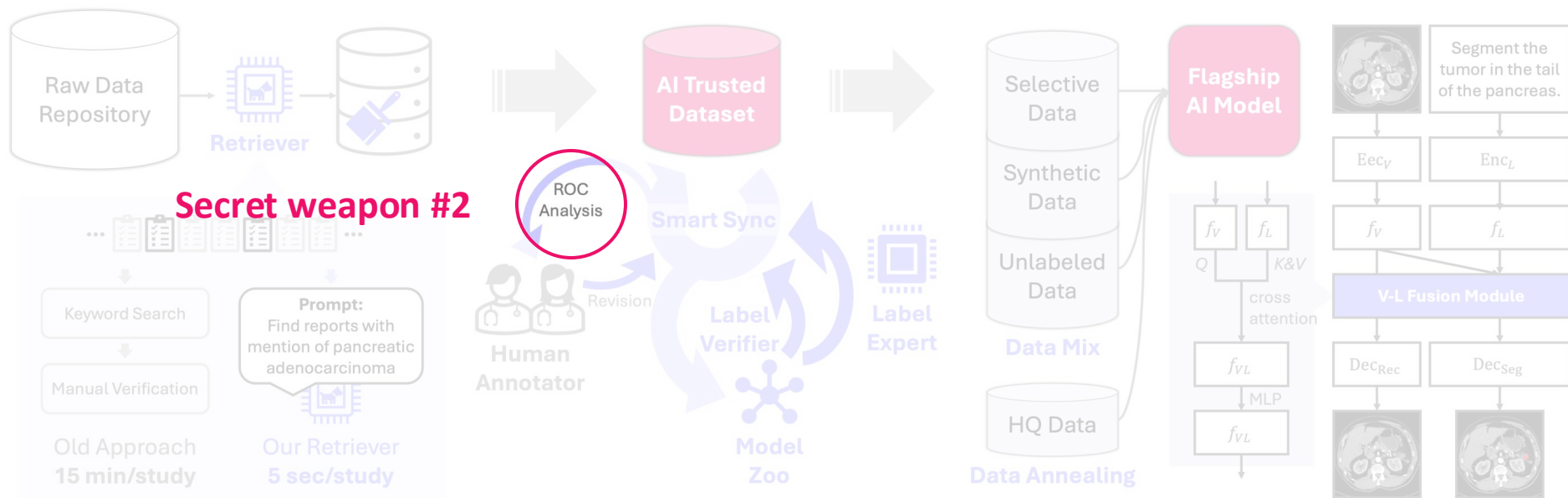
(p) uterus tumor

ScaleMAI – Accelerating the Development of Trusted Datasets and AI Models

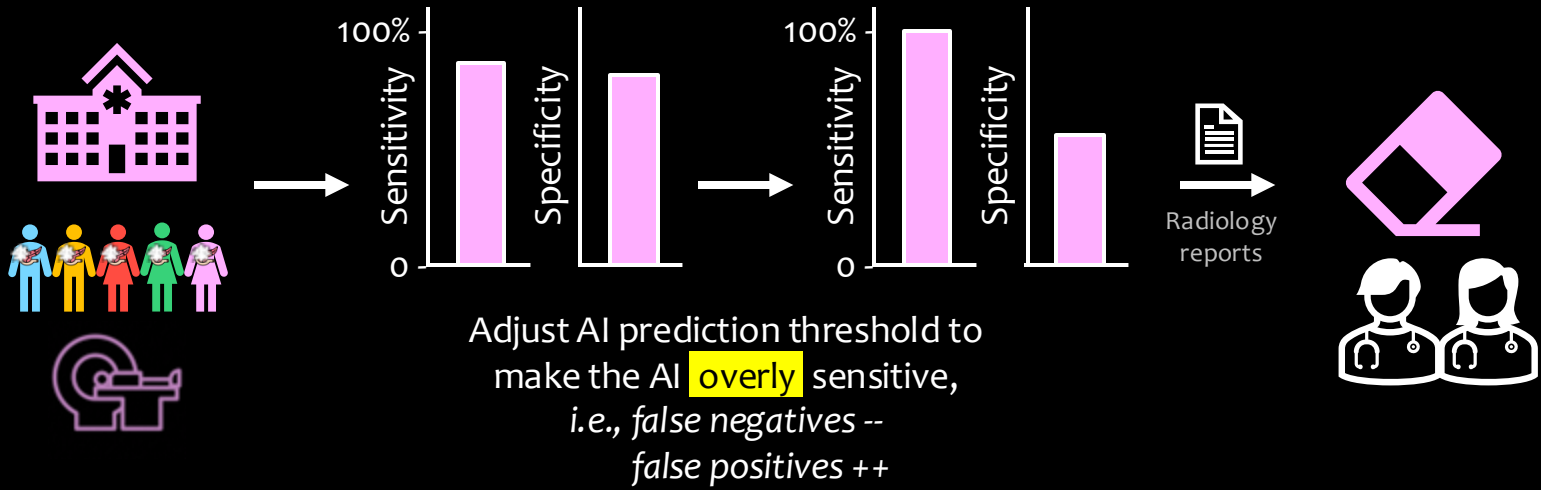
Curation: Clinical Needs → Suitable Data

Integration: AI, VLM, Human → Better Data

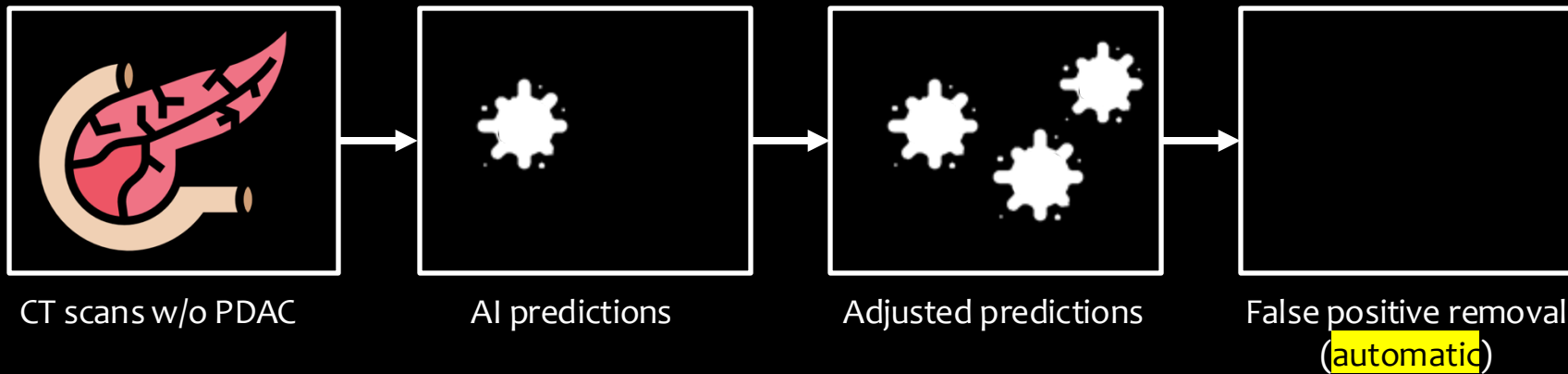
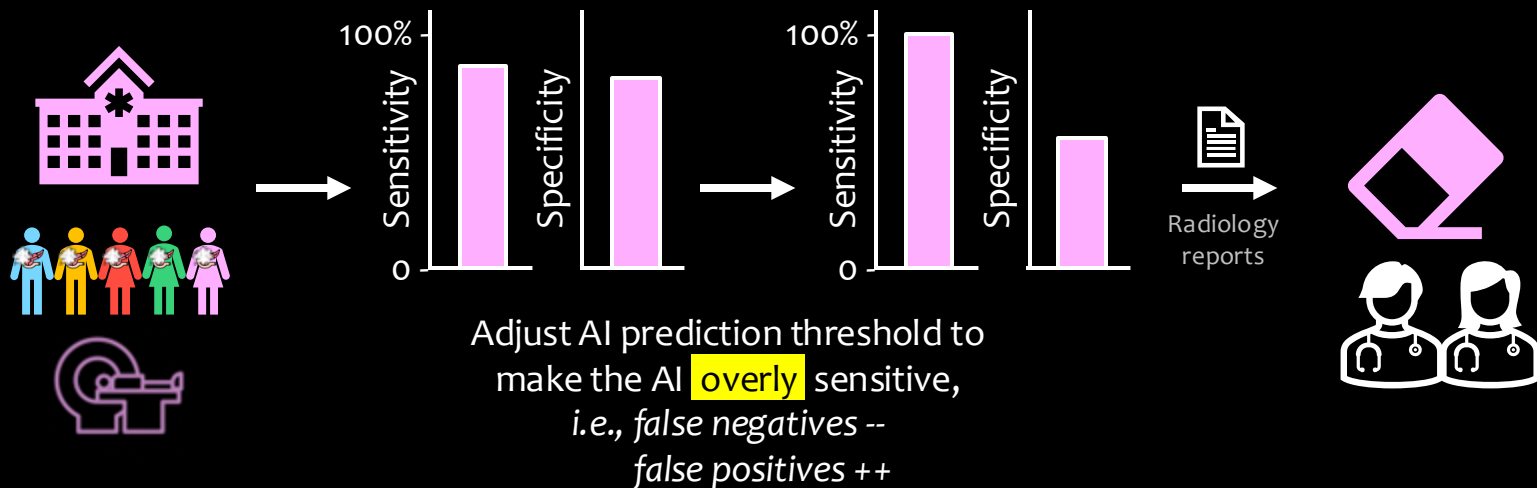
Integration: Data Mix, Annealing → Better AI



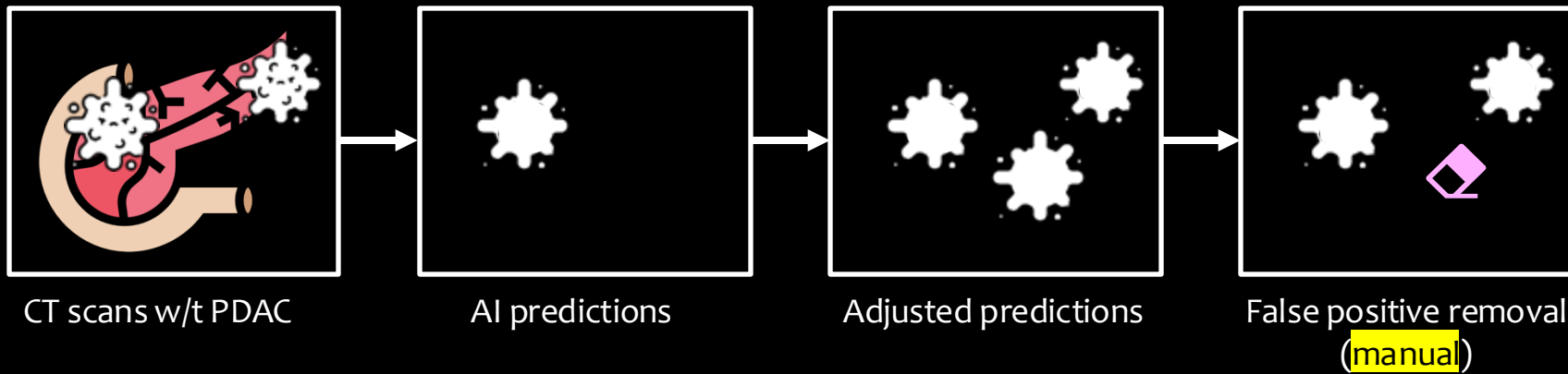
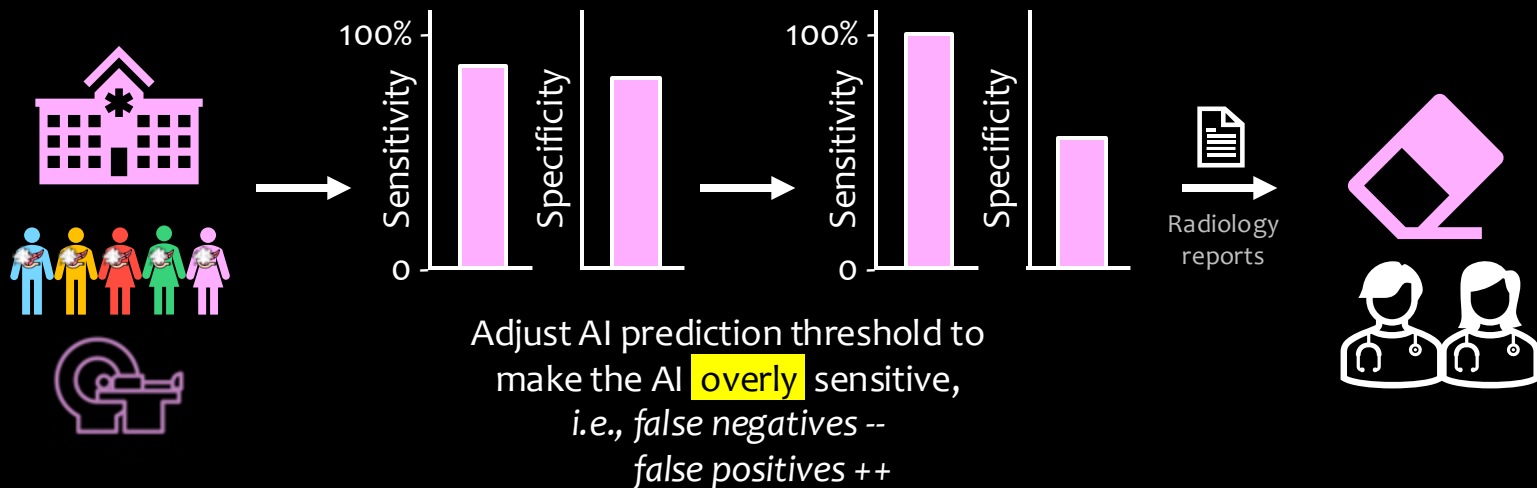
Efficient tumor annotation for new hospitals



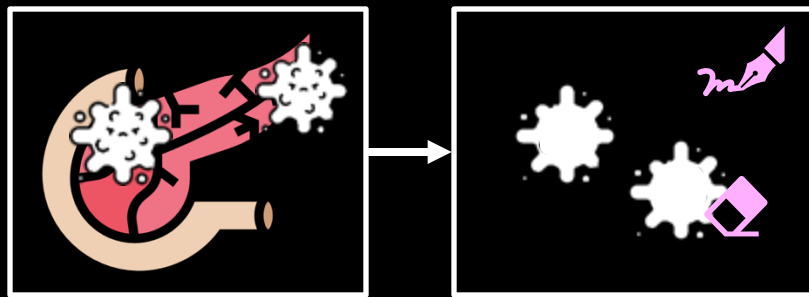
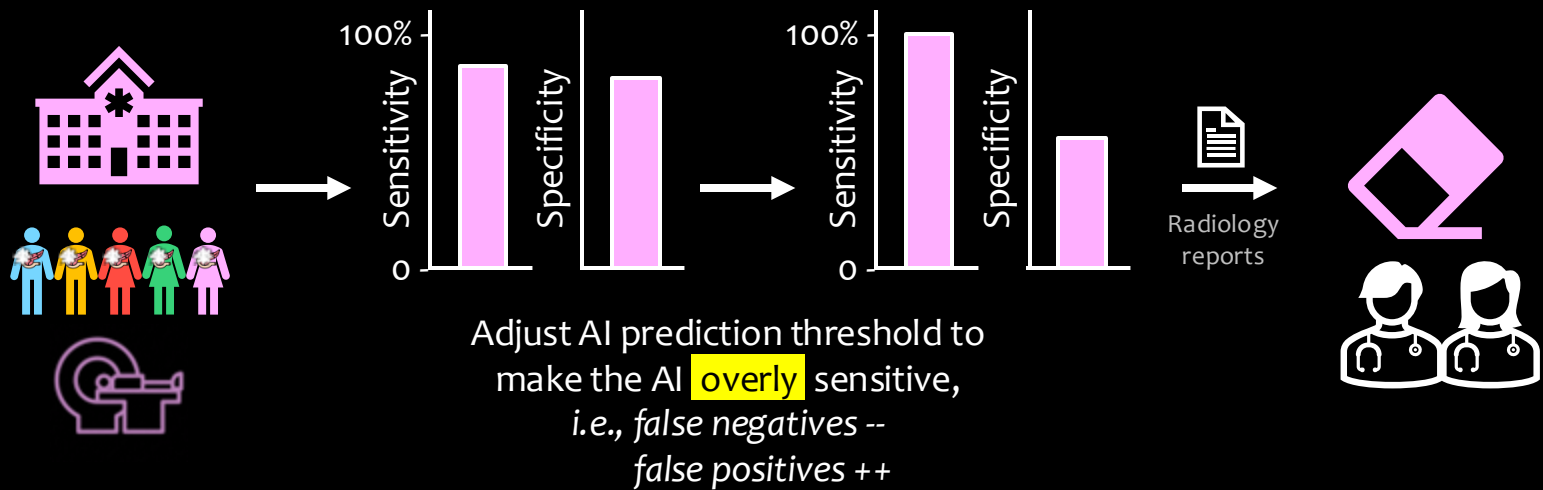
Efficient tumor annotation for new hospitals



Efficient tumor annotation for new hospitals



Efficient tumor annotation for new hospitals



Sensitivity = 99% at 0.6 false positives per patient



4-5 min/tumor: create per-voxel annotation



<5 sec/tumor: remove per-voxel annotation

CT scans w/t PDAC

AI predictions



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AI and Radiologists Unite to Map the Abdomen

Hopkins researchers have leveraged the synergy between medical professionals and artificial intelligence algorithms to create the largest annotated multi-organ dataset to date.



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AI and Radiologists Unite to Map the Abdomen

Hopkins researchers have leveraged the synergy between medical professionals and artificial intelligence algorithms to create the largest annotated multi-organ dataset to date.

“While a dataset of this size would have taken an experienced human annotator almost 31 years to fully annotate, the team completed this task in only three weeks.”

The BodyMaps Project

AI-Integrated Annotation

AI-Assisted Cancer Moonshot

AI-Trusted Benchmark

**ScaleMAI
Platform**

**Synthetic Data
Engine**

Lesion Detection

Cancer
Diagnosis

Treatment
Planning

Foundation
Models

Universal
Models

Anatomical
Segmentation

Multi-lesion
Segmentation

Human-level
Detection

Super-human
Classification

Tumor Staging

Supervised Pre-
Trained Models

Generalists vs.
Specialists



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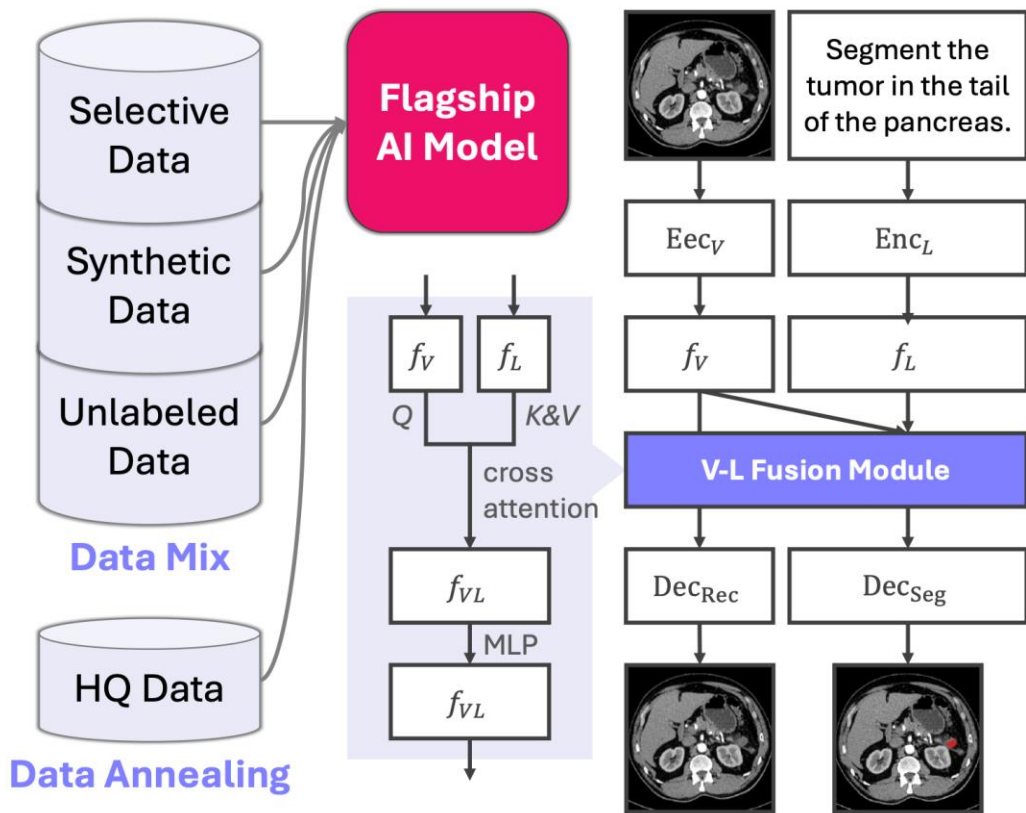
Tumor Staging

Supervised Pre-
Trained Models

Generalists vs.
Specialists



Integration: Data Mix, Annealing → Better AI



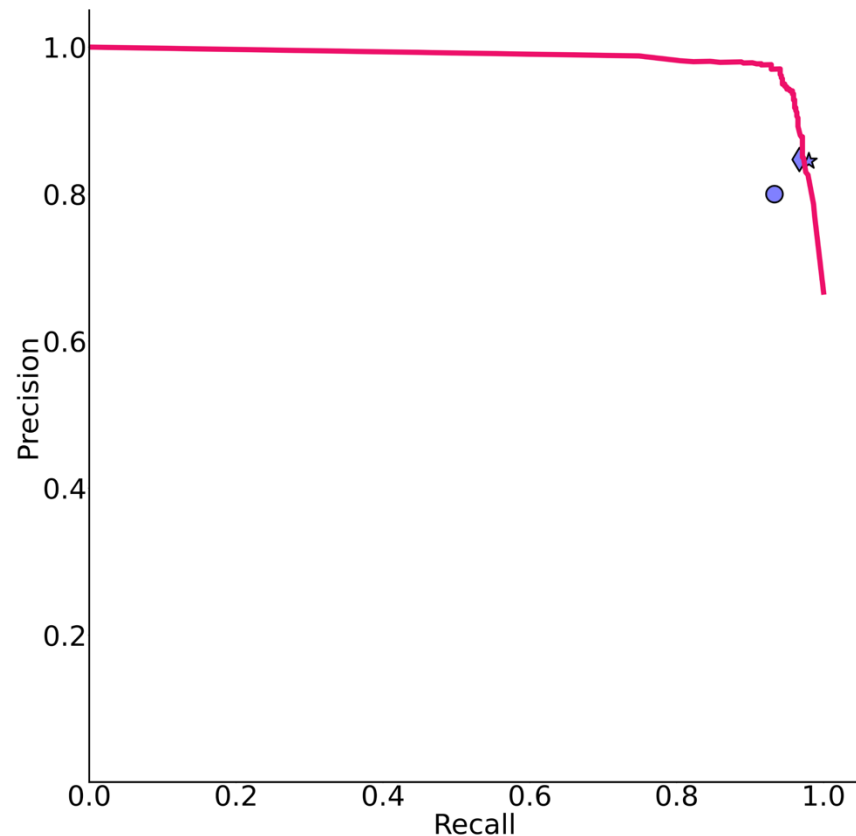
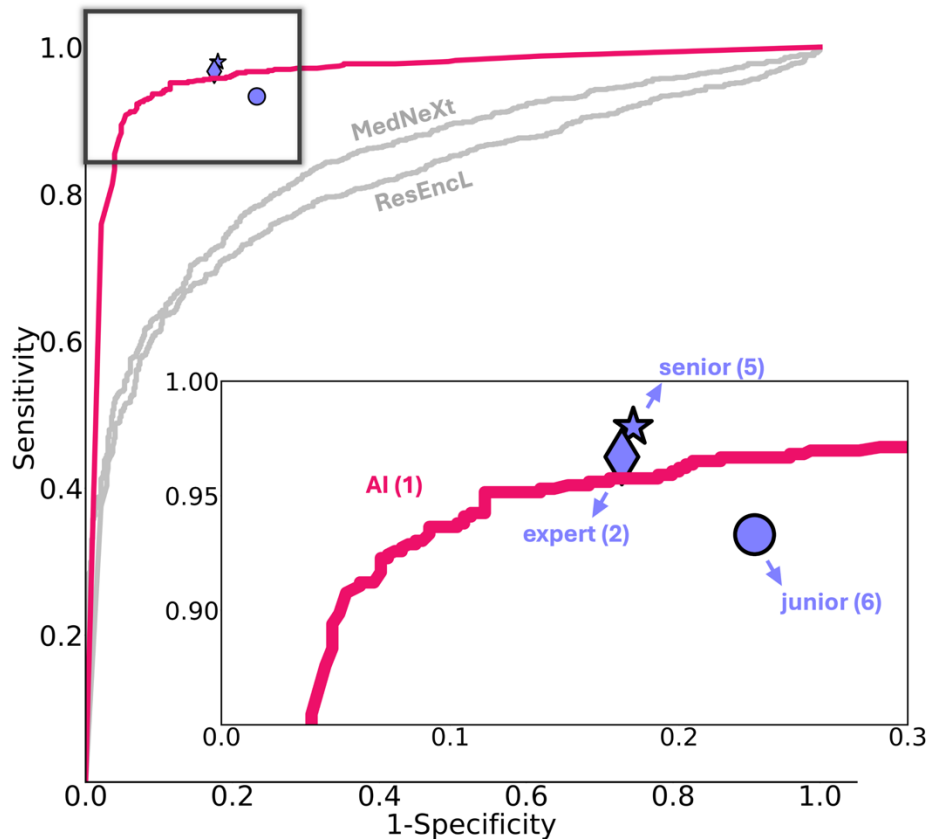
AbdomenAtlasPro = 25K CT Volumes + 600K 3D Masks

16 tumor pathologies: adrenal gland · bladder · bone · breast · colon · duodenum · esophagus · gallbladder · kidney · liver · lung · pancreas · prostate · spleen · stomach · uterus

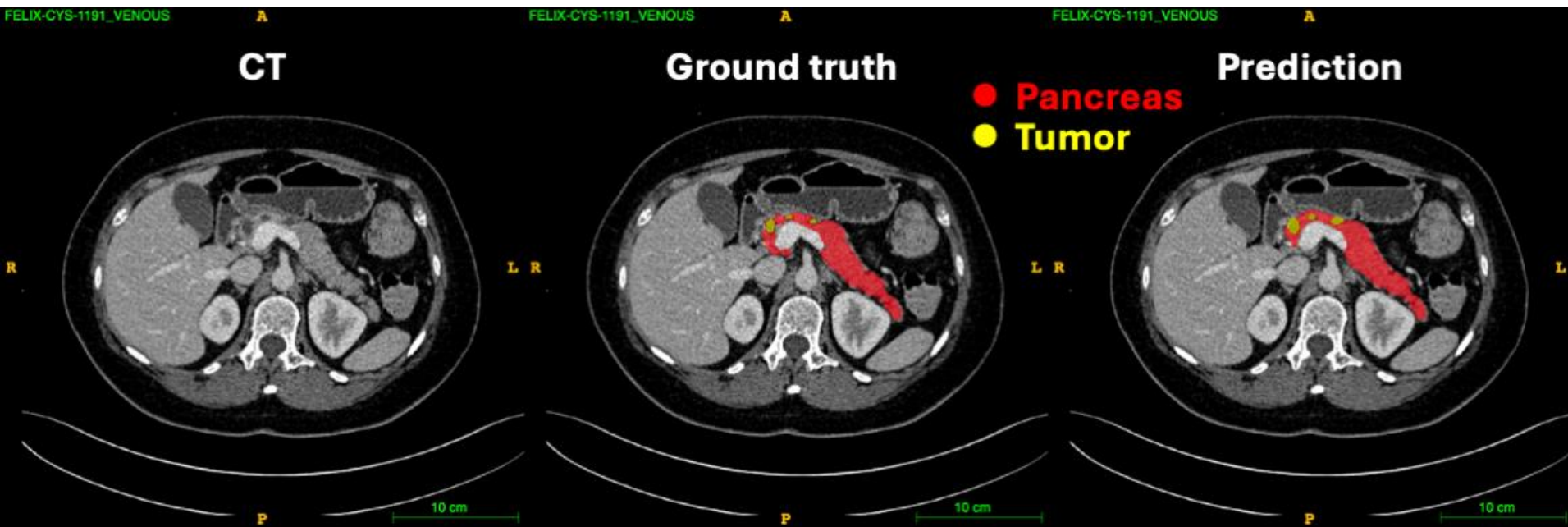
136 anatomical structures: adrenal gland left · adrenal gland right · airway · aorta · atrial appendage left · autochthon left · autochthon right · bladder · bone · brachiocephalic trunk · brachiocephalic vein left · brachiocephalic vein right · brain · clavicle left · clavicle right · celiac trunk · colon · common bile duct · common carotid artery left · common carotid artery right · costal cartilages · duodenum · esophagus · femur left · femur right · gall bladder · gluteus maximus left · gluteus maximus right · gluteus medius left · gluteus medius right · gluteus minimus left · gluteus minimus right · heart · hepatic vessel · hip left · hip right · humerus left · humerus right · iliac artery left · iliac artery right · iliac vena left · iliac vena right · iliopsoas left · iliopsoas right · intestine · kidney left · kidney right · liver · liver segment 1 · liver segment 2 · liver segment 3 · liver segment 4 · liver segment 5 · liver segment 6 · liver segment 7 · liver segment 8 · lung left · lung lower left lobe · lung lower right lobe · lung middle right lobe · lung right · lung upper left lobe · lung upper right lobe · pancreas · pancreas body · pancreas head · pancreas tail · pancreatic duct · portal vein and splenic vein · postcava · prostate · pulmonary vein · rectum · rib left 1 · rib left 10 · rib left 11 · rib left 12 · rib left 2 · rib left 3 · rib left 4 · rib left 5 · rib left 6 · rib left 7 · rib left 8 · rib left 9 · rib right 1 · rib right 10 · rib right 11 · rib right 12 · rib right 2 · rib right 3 · rib right 4 · rib right 5 · rib right 6 · rib right 7 · rib right 8 · rib right 9 · sacrum · scapula left · scapula right · skull · spleen · spinal cord · sternum · stomach · subclavian artery left · subclavian artery right · superior mesenteric artery · superior vena cava · thyroid gland · trachea · veins · vertebrae C1 · vertebrae C2 · vertebrae C3 · vertebrae C4 · vertebrae C5 · vertebrae C6 · vertebrae C7 · vertebrae L1 · vertebrae L2 · vertebrae L3 · vertebrae L4 · vertebrae L5 · vertebrae S1 · vertebrae T1 · vertebrae T10 · vertebrae T11 · vertebrae T12 · vertebrae T2 · vertebrae T3 · vertebrae T4 · vertebrae T5 · vertebrae T6 · vertebrae T7 · vertebrae T8 · vertebrae T9



AbdomenAtlasPro → Improved Tumor Detection



AbdomenAtlasPro → Improved Small Tumor Detection



Sensitivity = 89%
Specificity = 93%

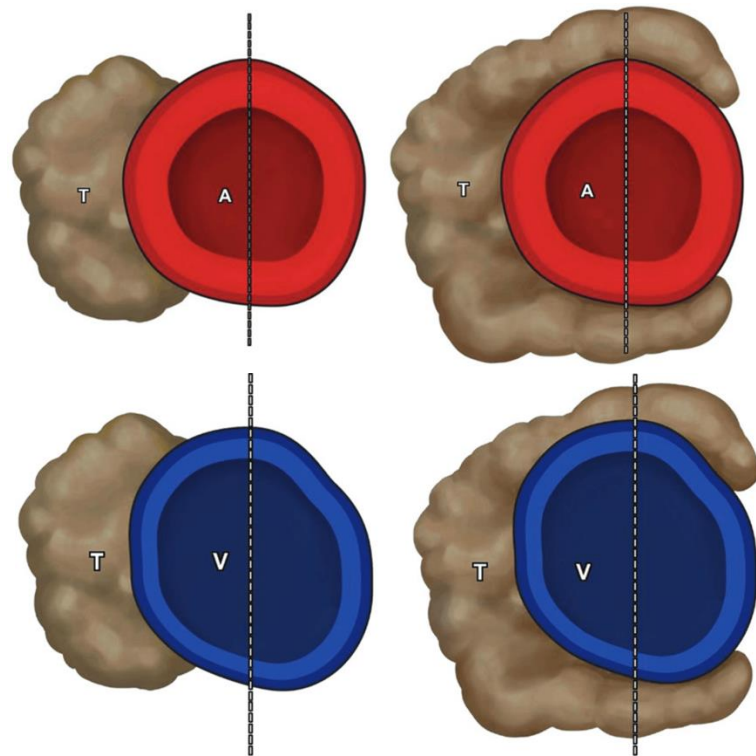
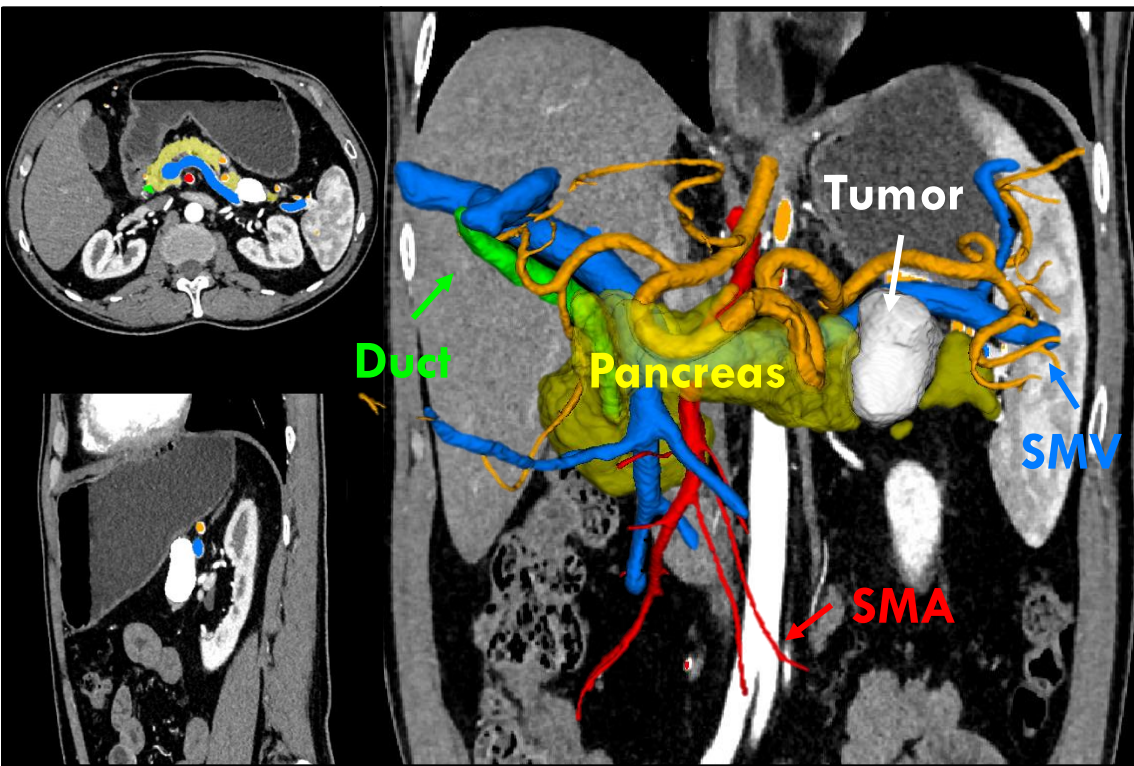


Sensitivity = 33~44%
Specificity = 82~96%

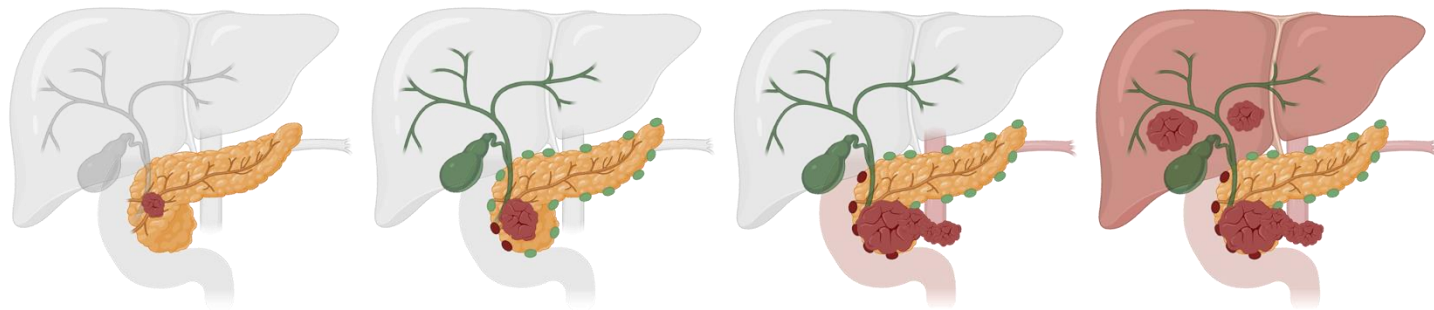
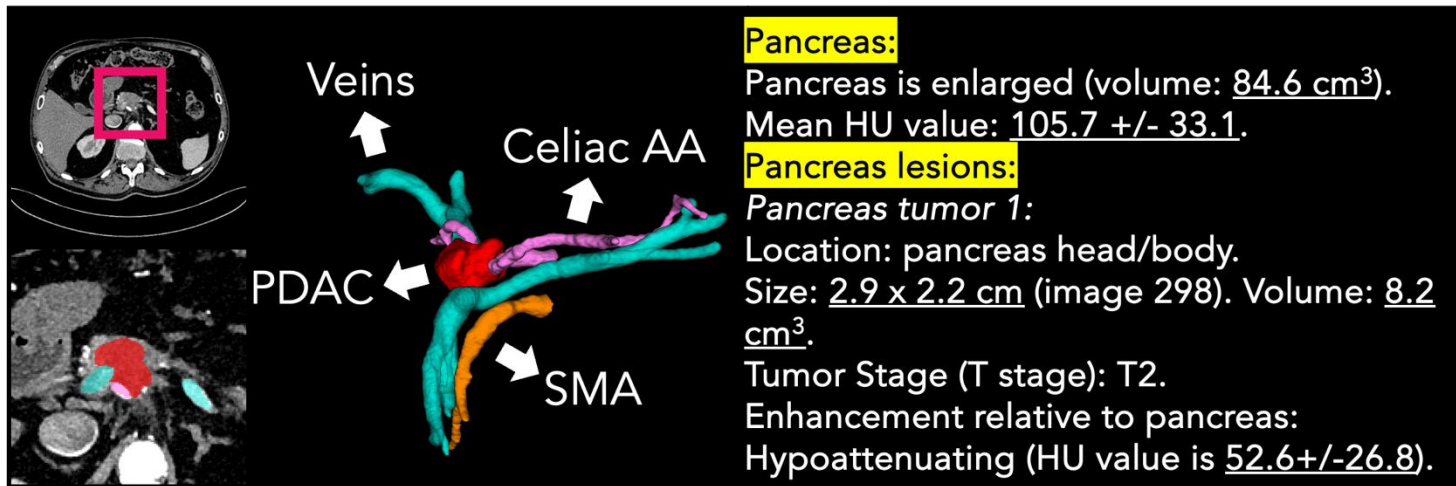
AbdomenAtlasPro → Improved Tumor Classification

		junior (6)				senior (5)			
		expert (2)				AI (1)			
		predicted class							
		PDAC	Cyst	PNET	Recall	PDAC	Cyst	PNET	Recall
path-proven class	PDAC	29	2	7	.76	33	0	9	.79
	Cyst	15	38	2	.69	20	27	0	.57
	PNET	23	6	18	.38	17	4	22	.51
	Precision	.43	.83	.67	.61	.47	.87	.71	.62
	PDAC	12	1	4	.71	268	34	23	.82
	Cyst	11	6	0	.35	55	198	41	.67
	PNET	3	1	13	.76	36	33	110	.61
	Precision	.46	.75	.76	.61	.75	.75	.63	.72

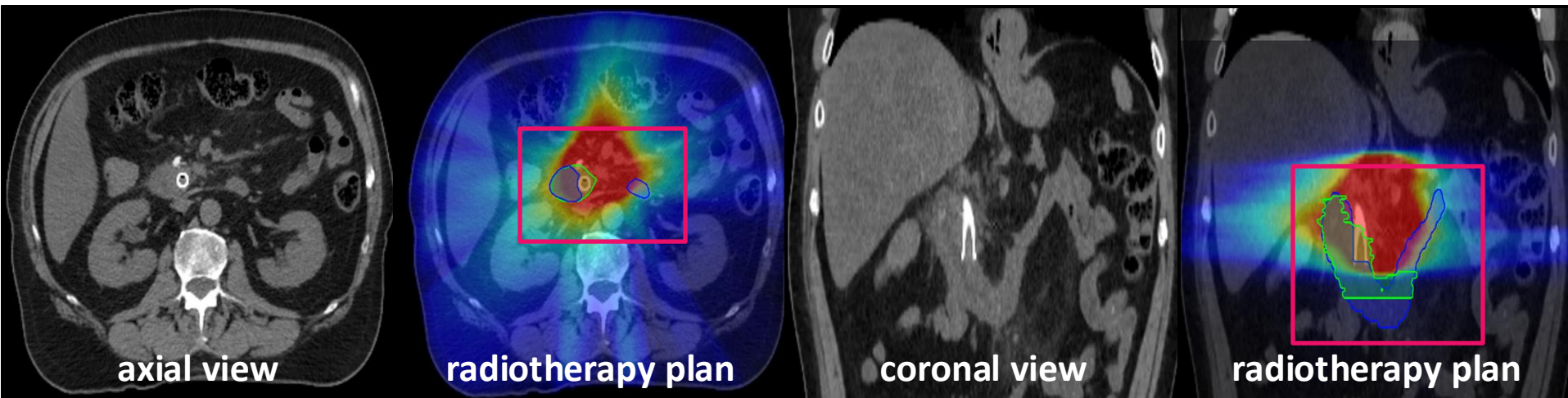
AbdomenAtlasPro → Tumor Resectability Estimation



AbdomenAtlasPro → Pancreatic Tumor Reporting

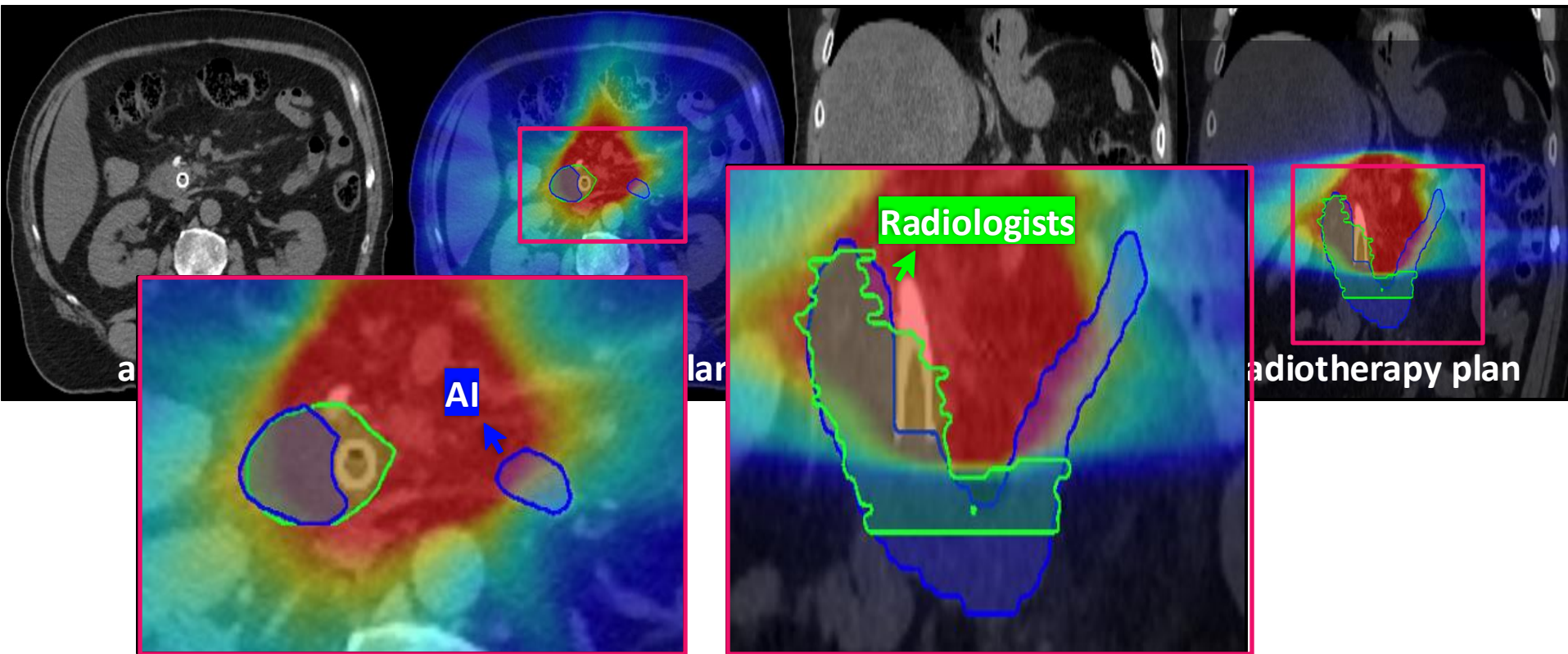


AbdomenAtlasPro → Generalized to Planning CT Scans



E.g., Duodenum Segmentation Planning CT Scans

AbdomenAtlasPro → Generalized to Planning CT Scans



AbdomenAtlasPro → Automated Report Generation



MEDICAL REPORT

PATIENT INFORMATION
BDMAP ID: BDMAP_00000037
Age: N/A
Sex: N/A

IMAGING DETAIL
spacing: [0.9 0.9 5.0]
shape: (512, 512, 44)
scanner: N/A
contrast: N/A

AI MEASUREMENTS

	organ Volume (cc)	total lesion #	total lesion volume (cc)
liver	2107.6	1	193.4
pancreas	109.3	1	0.1
kidney	282.9	1	70.7

NARRATIVE REPORT
The patient has a liver mass located in hepatic segment 5, measuring 7.7 x 6.8 cm (image 13), with a volume of 193.4 cc. The lesion is hyperattenuating, with a mean HU value of 98.3 +/- 23.4. There are multiple pancreatic lesions, including a hypoaattenuating mass in the pancreas head, measuring 0.6 x 0.2 cm (image 24), with a volume of 0.1 cc. This lesion is consistent with a biopsy-proven pancreatic ductal adenocarcinoma (PDAC). The tumor does not contact the SMA, aorta, portal vein, SMV, IVC, CA, CHA, or SA, and is considered resectable. Additionally, there are two hyperattenuating masses in the pancreas, consistent with pancreatic neuroendocrine tumors (PNETs). The larger mass measures 5.3 x 3.9 cm (image 33), with a volume of 32.7 cc, and the smaller mass measures 0.8 x 0.7 cm (image 31), with a volume of 0.4 cc. Both tumors do not contact the SMA, aorta, portal vein, SMV, IVC, CA, CHA, or SA, and are considered resectable. There is also a hypoaattenuating cystic lesion in the pancreas, measuring 0.5 x 0.4 cm (image 24), with a volume of 0.1 cc. The spleen is normal in size, with a volume of 234.0 cc and a mean HU value of 124.6 +/- 32.9. The kidneys are enlarged, with a total volume of 534.0 cc. There is a large hypoaattenuating mass in the left kidney, measuring 5.8 x 5.0 cm (image 9), with a volume of 70.7 cc.

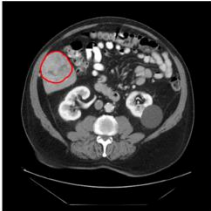
IMPRESSION:
The patient has a large hyperattenuating liver mass, an enlarged pancreas with multiple lesions including a biopsy-proven PDAC and two PNETs, and enlarged kidneys with a large hypoaattenuating mass in the left kidney.

STRUCTURED REPORT
CT Venous Phase
FINDINGS:

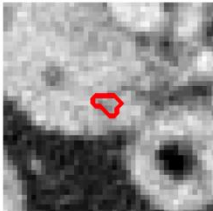
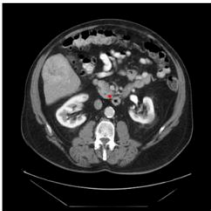


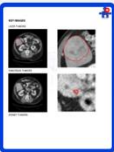
KEY IMAGES

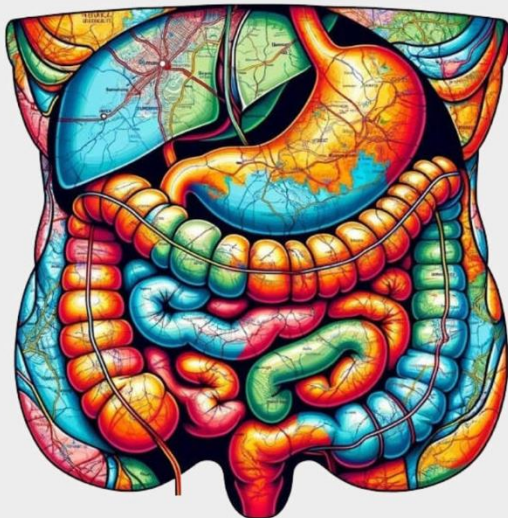
LIVER TUMORS



PANCREAS TUMORS







ARTIFICIAL INTELLIGENCE

AI-POWERED MAP OF THE ABDOMEN COULD HELP FIND CANCER EARLY ON

Johns Hopkins researchers used artificial intelligence to create the largest, most comprehensive dataset of abdominal organs to date to help radiologists quickly and accurately identify tumors and other diseases

"Annotating 45,000 CT scans with 6 million anatomical shapes would require an expert radiologist to have started working around 420 BCE—the era of **Hippocrates**—to complete the task by 2025,"



says lead author Zongwei Zhou

ARTIFICIAL INTELLIGENCE

AI-POWERED MAP OF THE ABDOMEN COULD HELP FIND CANCER EARLY ON

Johns Hopkins researchers used artificial intelligence to create the largest, most comprehensive dataset of abdominal organs to date to help radiologists quickly and accurately identify tumors and other diseases

The BodyMaps Project

AI-Integrated Annotation

AI-Assisted Cancer Moonshot

AI-Trusted Benchmark

ScaleMAI
Platform

Synthetic Data
Engine

Lesion Detection

Cancer
Diagnosis

Treatment
Planning

Foundation
Models

Universal
Models

Anatomical
Segmentation

Multi-lesion
Segmentation

Human-level
Detection

Super-human
Classification

Tumor Staging

Supervised Pre-
Trained Models

Generalists vs.
Specialists



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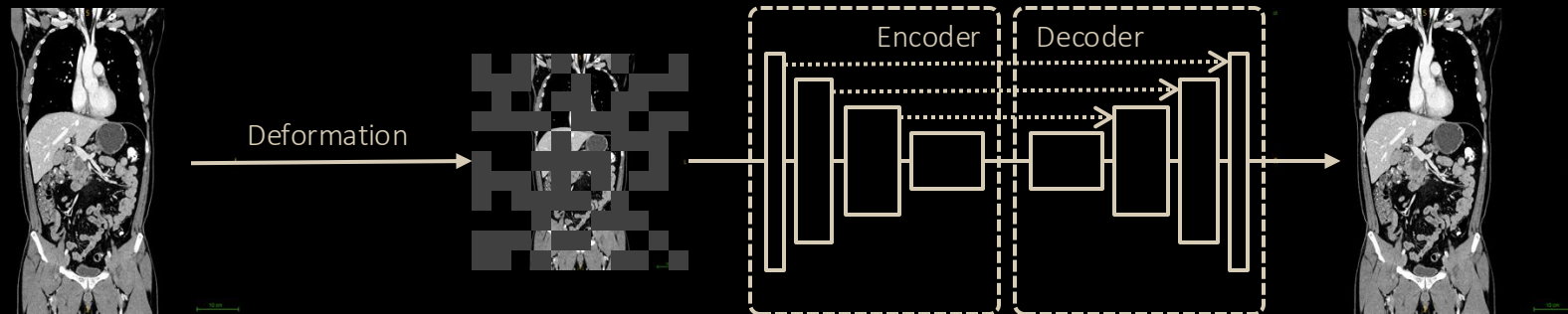
Super-human
Classification

Tumor Staging

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Trained Models

Generalists vs.
Specialists





Option 1. Self-supervised pre-training

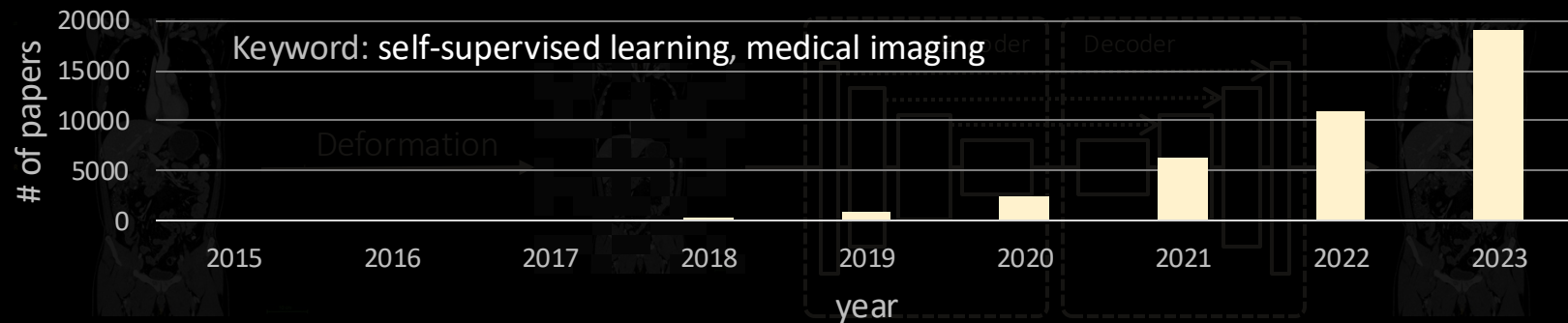
De-noising [Vincent et al., 2010]
Positioning [Doersch et al., 2015]
In-painting [Pathak et al., 2016]
Jigsaw [Noroozi and Favaro, 2016]
DeepCluster [Caron et al., 2018]
Restoration [Chen et al., 2019]

Models Genesis
[Zhou et al., MICCAI 2019]
MICCAI Young Scientist Award
Media Best Paper Award

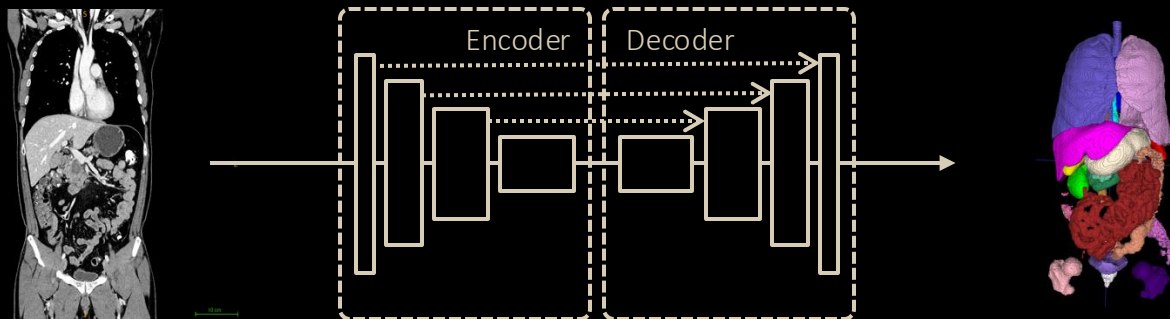
Rubiks Cube
[Zhuang et al., MICCAI 2019]

Swin UNETR
[Tang et al., CVPR 2022]

UniMiSS
[Xie et al., ECCV 2022]

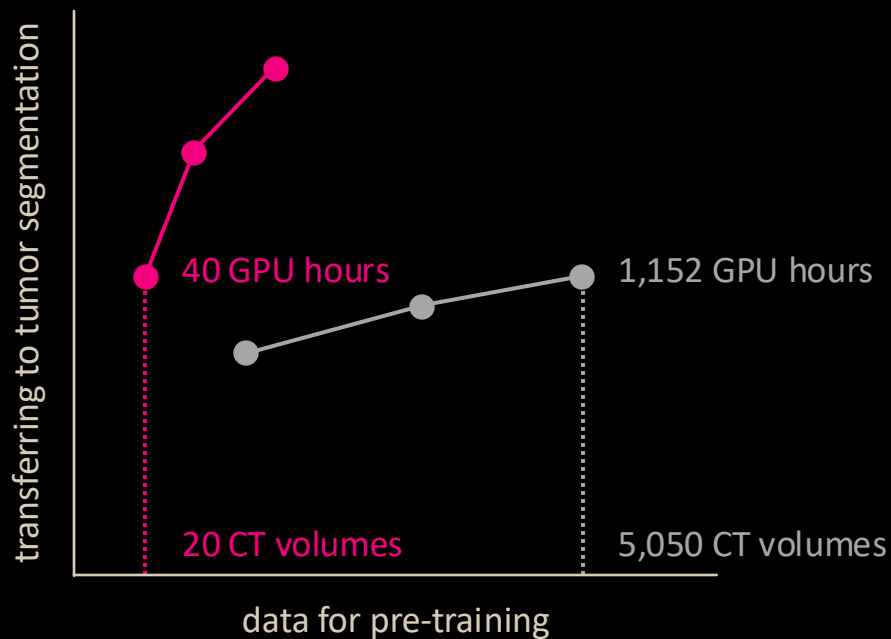


Option 1. Self-supervised pre-training



Option 2. Supervised pre-training

Supervised > Self-supervised
data & computation efficiency

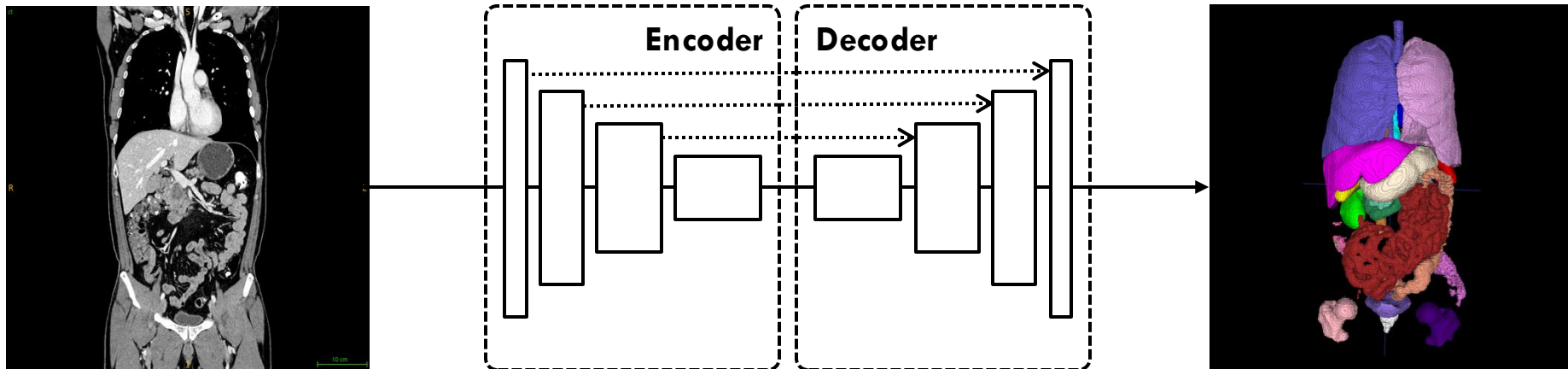


Foundation Models

AI models pre-trained on **broad** data
and can be applied across tasks

Expensive?

***“How Well Do Models Pre-Trained on
25K CT Volumes and 600K 3D Masks
Transfer to Medical Imaging Tasks?”***



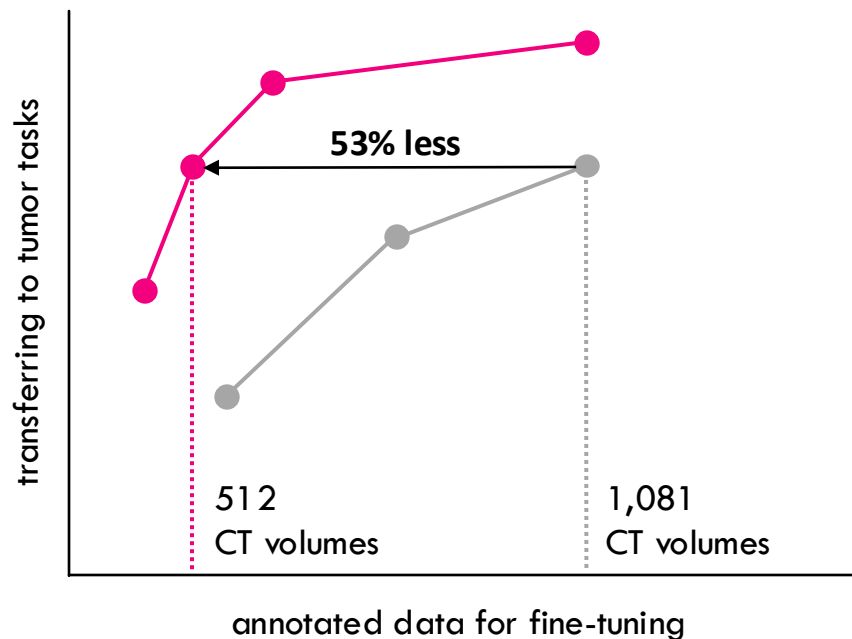
Foundation Models

AI pre-trained on broad data and
can be applied **across** tasks

▼ U-Net

name	params	pre-trained data	resources	download
Models Genesis	19.08M	623 CT	 Stars 741	weights
UniMiSS	tiny	5022 CT&MRI	 Stars 58	weights
	small	5022 CT&MRI		weights
Med3D	85.75M	1638 CT	 Stars 2k	weights
DoDNet	17.29M	920 CT	 Stars 180	weights
Universal Model	19.08M	2100 CT	 Stars 585	weights
SuPreM	19.08M	2100 CT	ours 🌟	weights

Supervised > Self-supervised
annotation & learning efficiency





Touchstone

@MICCAI @ISBI Challenges

ISBI 2024
ATHENS, GREECE

MICCAI 2024
Marrakech
MOROCCO

Backbone	Author	Institute	Publication	Backbone	Author	Institute	Publication
U-Net	O. Ronneberger	Uni Freiburg	MICCAI	nnU-Net	Fabian Isensee	DKFZ	Nat. Methods
nnFormer	Hong-Yu Zhou	HKU	TIP	SAT	Ziheng Zhao	SJTU	arXiv
CoTr	Yutong Xie	NPU	MICCAI	Swin UNETR	Ali Hatamizadeh	NVIDIA	MICCAIW
UniverSeg	Victor Ion Butoi	MIT	ICCV	UniSeg	Yiwen Ye	NPU	MICCAI
UNet++	Zongwei Zhou	ASU	TMI	MagicNet	Duowen Chen	ECNU	CVPR
TransUNet	Jieneng Chen	JHU	ICMLW	MedSegDiff	Junde Wu	NUS	AAAI
Swin-Unet	Hu Cao	Huawei	ECCVW	3D UNeXt	Jeya Maria Jose	JHU	MICCAI
DiNTS	Yufan He	JHU	CVPR				

So far, **53 groups** have confirmed the contribution—we will invite more inventors of **famous backbones** for medical segmentation.

Zongwei Zhou
zzhou82@jh.edu

Code, Dataset, & Model:
<https://www.zongweiz.com/dataset>



Touchstone Benchmark: Are We on the Right Way for Evaluating AI Algorithms for Medical Segmentation?

Pedro R. A. S. Bassi^{1,2,3*} Wenxuan Li^{1*} Yucheng Tang⁴ Fabian Isensee^{5,6}
Zifu Wang⁷ Jieneng Chen¹ Yu-Cheng Chou¹ Saikat Roy^{5,8} Yannick Kirchhoff^{5,8,9}
Maximilian Rokuss^{5,8} Ziyang Huang¹⁰ Jin Ye¹¹ Junjun He¹¹ Tassilo Wald^{5,6}
Constantin Ulrich⁵ Michael Baumgartner^{5,6} Klaus H. Maier-Hein^{5,12} Paul Jaeger^{6,13}
Yiwen Ye¹⁴ Yutong Xie¹⁵ Jianpeng Zhang¹⁶ Ziyang Chen¹⁴ Yong Xia¹⁴
Zhaohu Xing¹⁷ Lei Zhu^{17, 18} Yousef Sadegheih¹⁹ Afshin Bozorgpour¹⁹
Pratibha Kumari¹⁹ Reza Azad²⁰ Dorit Merhof^{19,21} Pengcheng Shi²²
Ting Ma²² Yuxin Du²³ Fan Bai^{23,24} Tiejun Huang^{23,25} Bo Zhao^{10,23}
Haonan Wang¹⁸ Xiaomeng Li¹⁸ Hanxue Gu²⁶ Haoyu Dong²⁶
Jichen Yang²⁶ Maciej A. Mazurowski²⁶ Saumya Gupta²⁷ Linshan Wu¹⁸
Jiaxin Zhuang¹⁸ Hao Chen²⁸ Holger Roth⁴ Daguang Xu⁴
Matthew B. Blaschko⁷ Sergio Decherchi²⁹ Andrea Cavalli^{2,29,30}
Alan L. Yuille^{1†} Zongwei Zhou^{1†}

¹Department of Computer Science, Johns Hopkins University

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⁴NVIDIA

⁵Division of Medical Image Computing, German Cancer Research Center (DKFZ)

⁶Helmholtz Imaging, German Cancer Research Center (DKFZ)

Full affiliations are given in Appendix F.

Code, Models & Data: <https://github.com/MrGiovanni/Touchstone>



NEURAL INFORMATION
PROCESSING SYSTEMS

rank	model	organization	average DSC	paper	github
🏆	MedNeXt	DKFZ	89.2	arXiv 2303.09975	Stars 327
🏆	STU-Net-B	Shanghai AI Lab	89.0	arXiv 2304.06716	Stars 269
🏆	MedFormer	Rutgers	89.0	arXiv 2203.00131	Stars 262
🏆	nnU-Net ResEncL	DKFZ	88.8	arXiv 1809.10486	Stars 5.7k
🏆	UniSeg	NPU	88.8	arXiv 2304.03493	Stars 163
🏆	Diff-UNet	HKUST	88.5	arXiv 2303.10326	Stars 149
🏆	LHU-Net	UR	88.0	arXiv 2404.05102	Stars 23
🏆	NexToU	HIT	87.8	arXiv 2305.15911	Stars 55
9	SegVol	BAAI	87.1	arXiv 2311.13385	Stars 212
10	U-Net & CLIP	CityU	87.1	arXiv 2301.00785	Stars 565
11	Swin UNETR & CLIP	CityU	86.7	arXiv 2301.00785	Stars 565
12	Swin UNETR	NVIDIA	80.1	arXiv 2211.11537	Stars 1.8k
13	UNesT	NVIDIA	79.1	arXiv 2303.10745	Stars 1.8k
14	SAM-Adapter	Duke	73.4	arXiv 2404.09957	Stars 120
15	UNETR	NVIDIA	64.4	arXiv 2111.04004	Stars 1.8k





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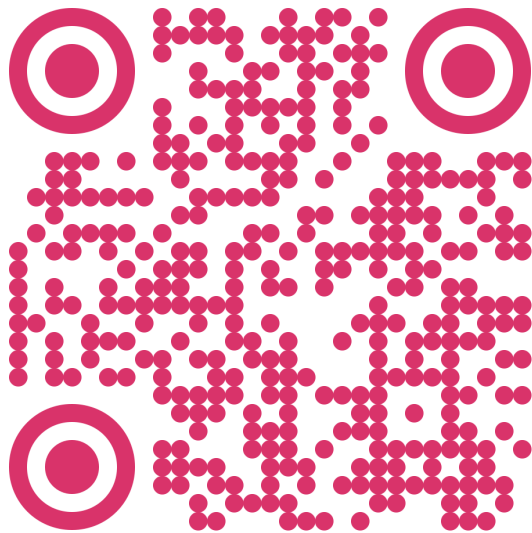
Info For

HOME > NEWS

A touchstone of medical artificial intelligence

Johns Hopkins researchers release a new standard for evaluating medical AI models to promote fairness and reduce bias.





Touchstone Benchmark

PARTICIPATE - TOUCHSTONE 1.0

PARTICIPATE - TOUCHSTONE 2.0



71



Follow @BodyMaps

We present Touchstone, a large-scale medical segmentation benchmark based on annotated **5,195** CT volumes from **76** hospitals for training, and **6,933** CT volumes from **8** additional hospitals for testing. We invite AI inventors to train their models on AbdomenAtlas, and we independently evaluate their algorithms. We have already collaborated with **14** influential research teams, and we remain accepting new submissions.



The BodyMaps Project

AI-Integrated Annotation

AI-Assisted Cancer Moonshot



AI-Trusted Benchmark

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Human-level
Detection

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Tumor Staging

Supervised Pre-
Trained Models

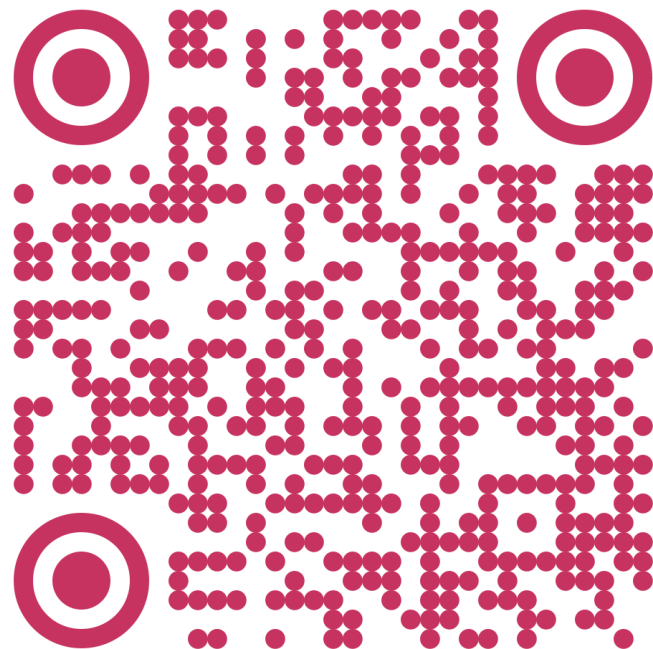
Generalists vs.
Specialists



AbdomenAtlasPro = 25K CT Volumes + 600K 3D Masks

AbdomenAtlas1.1 = 9K CT Volumes + 225K 3D Masks

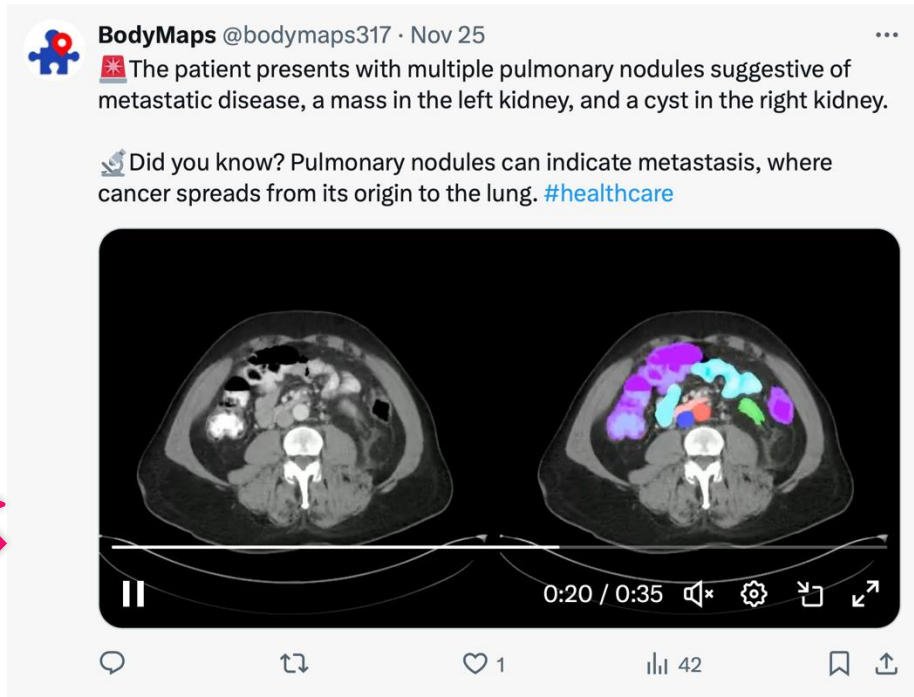
AbdomenAtlas1.0 = 5K CT Volumes + 45K 3D Masks



AbdomenAtlasPro = 25K CT Volumes + 600K 3D Masks

AbdomenAtlas1.1 = 9K CT Volumes + 225K 3D Masks

AbdomenAtlas1.0 = 5K CT Volumes + 45K 3D Masks

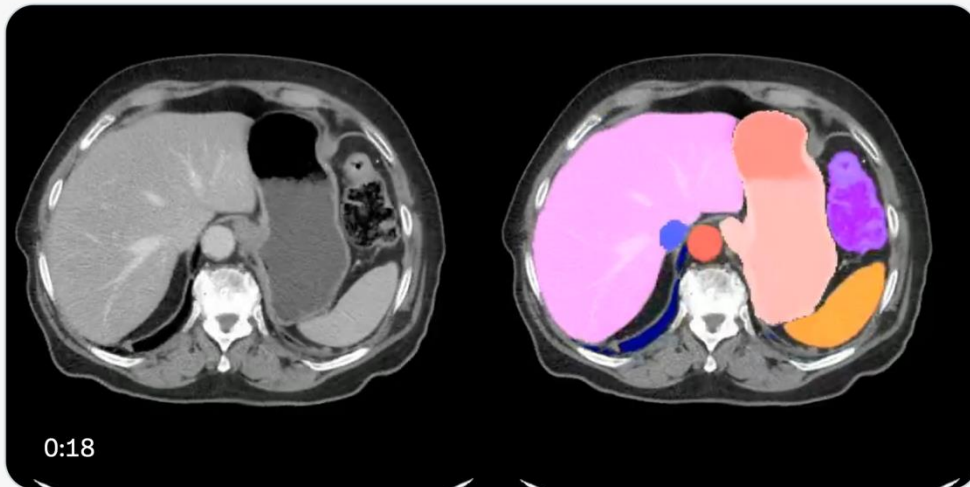


Abdomer
Abdomer
Abdomer



BodyMaps @bodymaps317 · Nov 6

🚨 The patient has undergone bilateral femoral replacement, which is causing localized metal artifacts that affect the imaging clarity of the bladder and parts of the pelvic bowel loops. Additionally, the patient is post-cholecystectomy (gallbladder removal). #MedicalImaging



132



← **BodyMaps**
36 posts



BodyMaps

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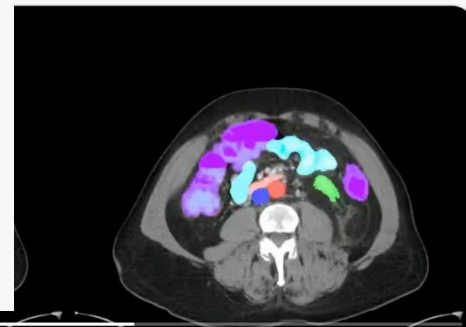
📅 Joined May 2024

... D Masks
Masks
Masks

v 25

Multiple pulmonary nodules suggestive of the left kidney, and a cyst in the right kidney.

Nodules can indicate metastasis, where the lung. #healthcare



0:20 / 0:35



42



Zongwei Zhou
zzhou82@jh.edu

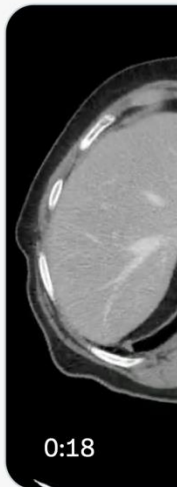
Code, Dataset, & Model:
<https://www.zongweiz.com/dataset>

Abdomer
Abdomer
Abdomer



BodyMaps @bodymaps317 · Nov 6

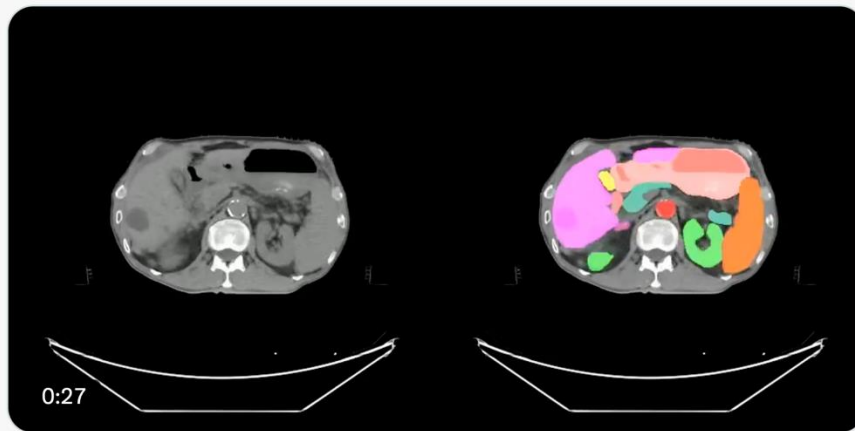
🚨 The patient has undergone bilateral femoral replacement, which is causing localized metal artifacts that affect the imaging clarity of the bladder and parts of the pelvic bowel loops. Additionally, the patient is post-cholecystectomy (gallbladder removal). #MedicalImaging



BodyMaps @bodymaps317 · Oct 29

The patient has undergone surgery resulting in the absence of the colon and part of the small intestine. Imaging reveals a protruding nodule on the right kidney and multiple cysts with calcification in the liver.

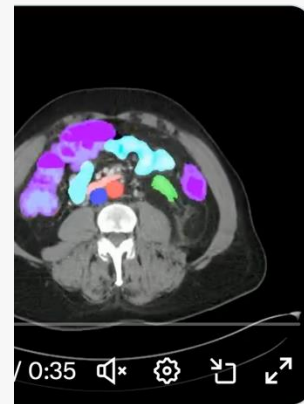
Liver calcification and cysts are often benign. #Healthcare



D Masks
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Masks

y nodules suggestive of
and a cyst in the right kidney.

ate metastasis, where
lthcare



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zzhou82@jh.edu

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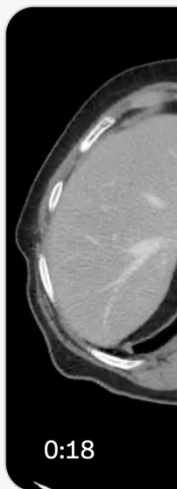
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BodyMaps @bodymaps317 · Nov

The patient has undergone bili causing localized metal artifacts in the bladder and parts of the pelvic bladder post-cholecystectomy (gallbladder)



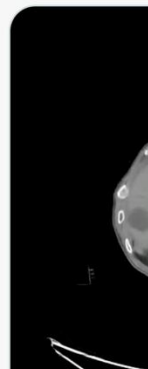
0:18



BodyMaps @

The patient has undergone bili and part of the right kidney

Liver calcifications



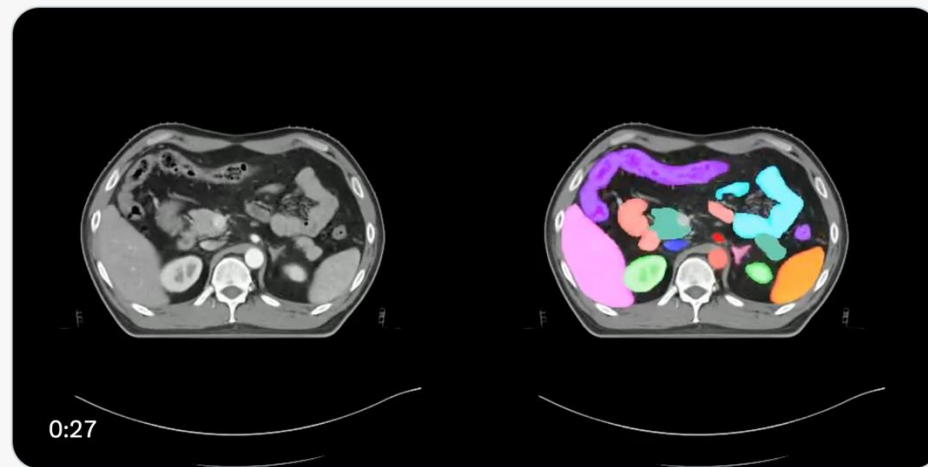
0:27



BodyMaps @bodymaps317 · Oct 21

The patient is post-sigmoidectomy and ileostomy in the right lower abdomen.

Did you know? A sigmoidectomy involves the removal of part of the sigmoid colon, often due to conditions like diverticulitis or cancer. An ileostomy is created for waste to bypass the colon. #Healthcare



0:27



3

227



2

67



42



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Code, Dataset, & Model:
<https://www.zongweiz.com/dataset>

Abdomer
Abdomer
Abdomer



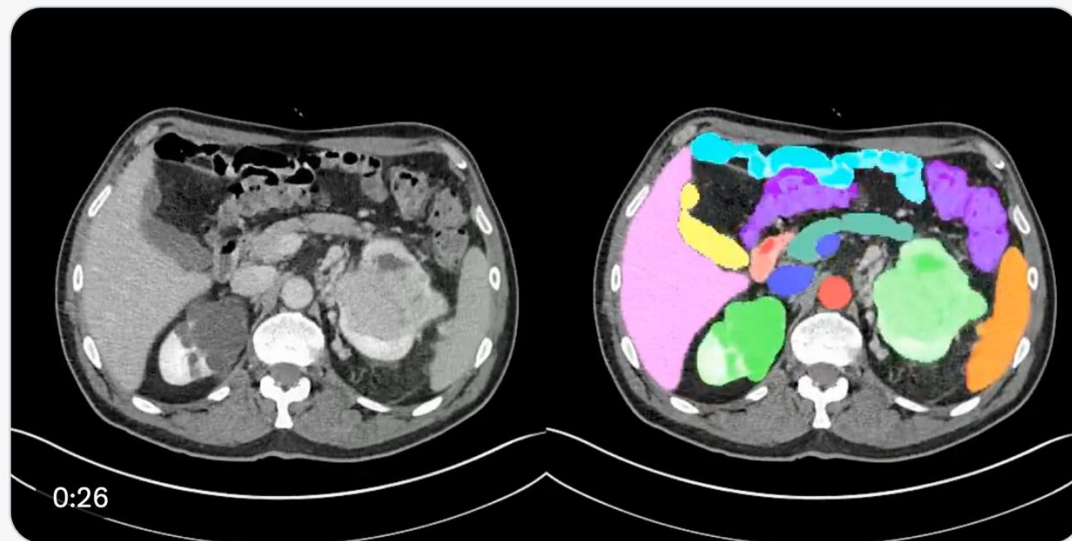
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post



BodyMaps @bodymaps317 · Sep 24

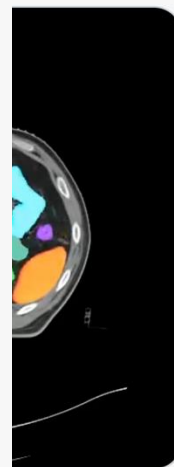
⚠️ This patient has multiple cystic lesions in the right kidney and a mass in the left kidney.

🔬 Cystic lesions in the kidney are often fluid-filled and can be benign, but a mass in the kidney may require further evaluation to rule out malignancy. #KidneyHealth #MedicalImaging



ower

of the sigmoid
leostomy is



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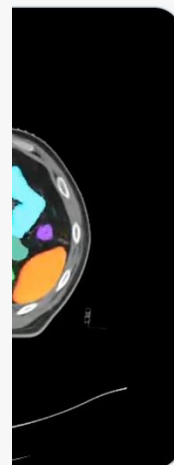
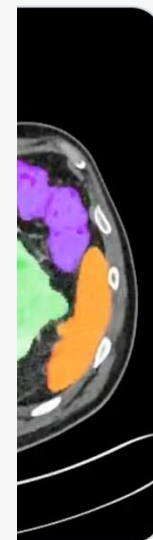
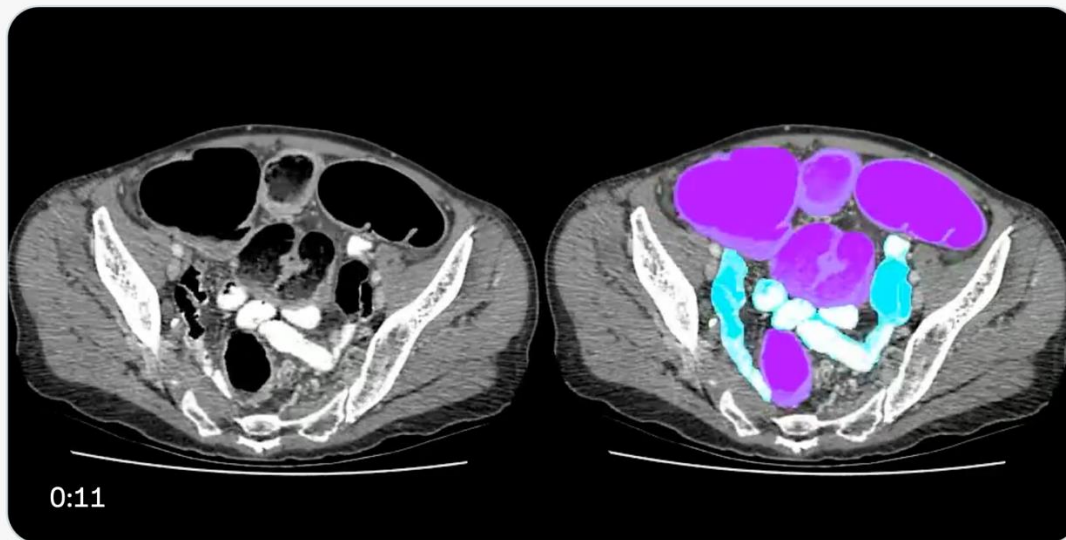


BodyMaps @bodymaps317 · Sep 17

🚨 Patient is experiencing colonic obstruction, leading to compression and displacement of multiple intra-abdominal organs.

📺 Colonic obstruction occurs when the colon is blocked, preventing the normal passage of contents. This can lead to series complications.

[#MedicalImaging](#)



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Code, Dataset, & Model:
<https://www.zongweiz.com/dataset>

Thank you!

Acknowledgement: Wenxuan Li · Pedro R. A. S. Bassi · Qi Chen · Chongyu Qu · Xiaoxi Chen · Kang Wang · Yang Yang · Tiezheng Zhang · Hualin Qiao · Jessica Han · Jie Liu · Yucheng Tang · Yijia Shi · Lihua Gao · Wenlan Zhou · Guiqin Zhang · Damin Li · Yixiao Zhang · Jieneng Chen · Linda Chu · Satomi Kawamoto · Seyoun Park · Christopher Wolfgang · Ammar Javed · Daniel Fadaei · Shahab Shayesteh · Jefferson Graves · Alejandra Blanco · Eva S. Zinreich · Benedict Kinny-Köster · Kenneth Kinzler · Ralph H. Hruban · Bert Vogelstein · Elliot K. Fishman · Jaimie Patterson · Junfei Xiao · Yongyi Lu · Xinyi Li · Huimiao Chen · Yaoyao Liu · Jianing Li · Yu-Cheng Chou · Angtian Wang · Yixiong Chen · Yuxiang Lai · Jincheng Wang · Huimin Xue · Yining Cao · Haoqi Han · Xiaorui Lin · Yutong Tang · Meihua Li · Yujiu Ma · Jinghui Xu · Jiawei Liu · Zheyuan Zhang

