

DATA RESEARCH

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2nd EDITION



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Prediction of Rectal Cancer Complete Response to Chemoradiotherapy by Multiscale Imaging and Deep Learning Analyses (PRECORMIDEL)

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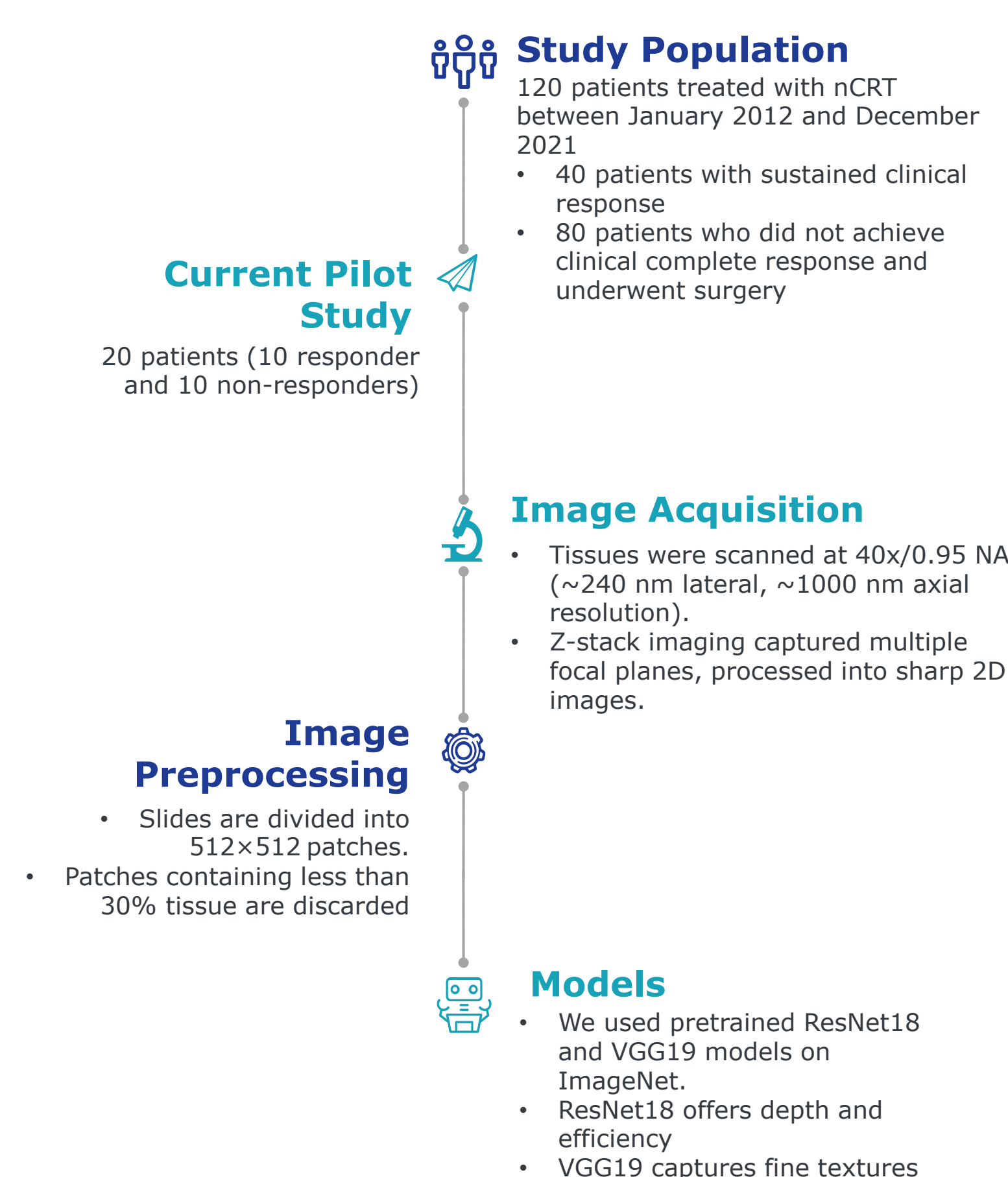
THE CLINICAL PROBLEM

- Rectal cancer (RC) is a major contributor to colorectal cancer burden. For patients with locally advanced RC, neoadjuvant chemoradiotherapy (nCRT) is standard, yet only ~15% achieve a sustained clinical response [1].
- Response to nCRT varies greatly between individuals, biomarkers have shown limited reliability due to tumor heterogeneity [2], and predictions still rely mainly on stage and grade.
- Accurate response prediction is essential to safely implement watch-and-wait strategies and reduce the risk of undertreatment and tumor regrowth [3].

PROJECT HYPOTHESIS

This project explores the novel hypothesis that predictive information on nCRT response is embedded in pre-treatment biopsies and can be revealed using AI, enabling more accurate treatment decisions and improved clinical outcomes in rectal cancer

PREDICTIVE MODELING PIPELINE



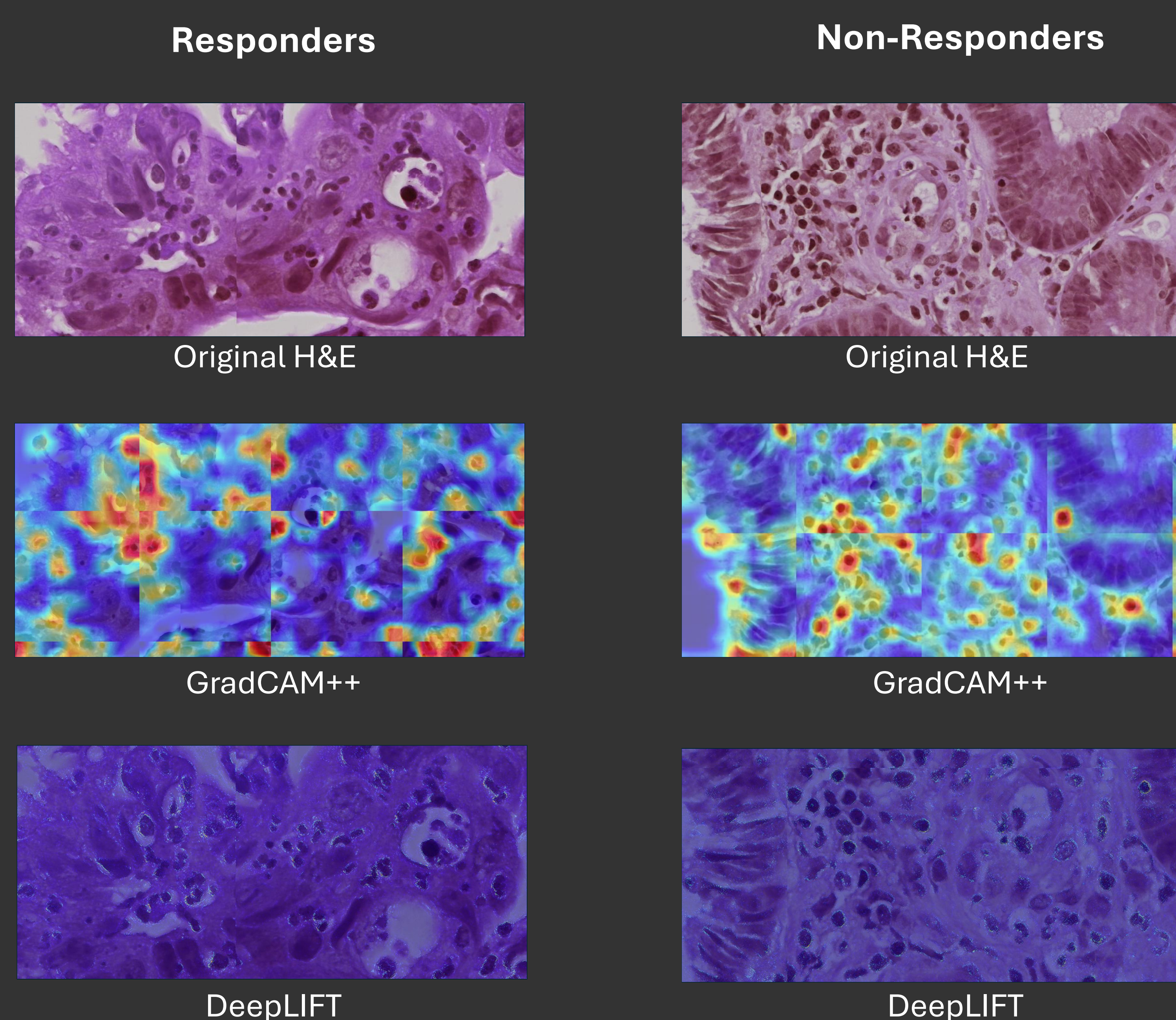
KEY FINDINGS & FUTURE WORK

- VGG19 showed strong performance. Explainable AI indicates possible tissue differences between responders and non-responders, though their biological relevance is still unclear.
- Future work will integrate additional biomarkers (CDX-2, Ki-67, PHH3, Cleaved Caspase-3, and p27) to better interpret which tissue regions drive AI predictions and enhance model explainability.
- We also aim to explore multiple instance learning, attention mechanisms, and super-resolution microscopy to enhance prediction accuracy and feature localization.

REFERENCES

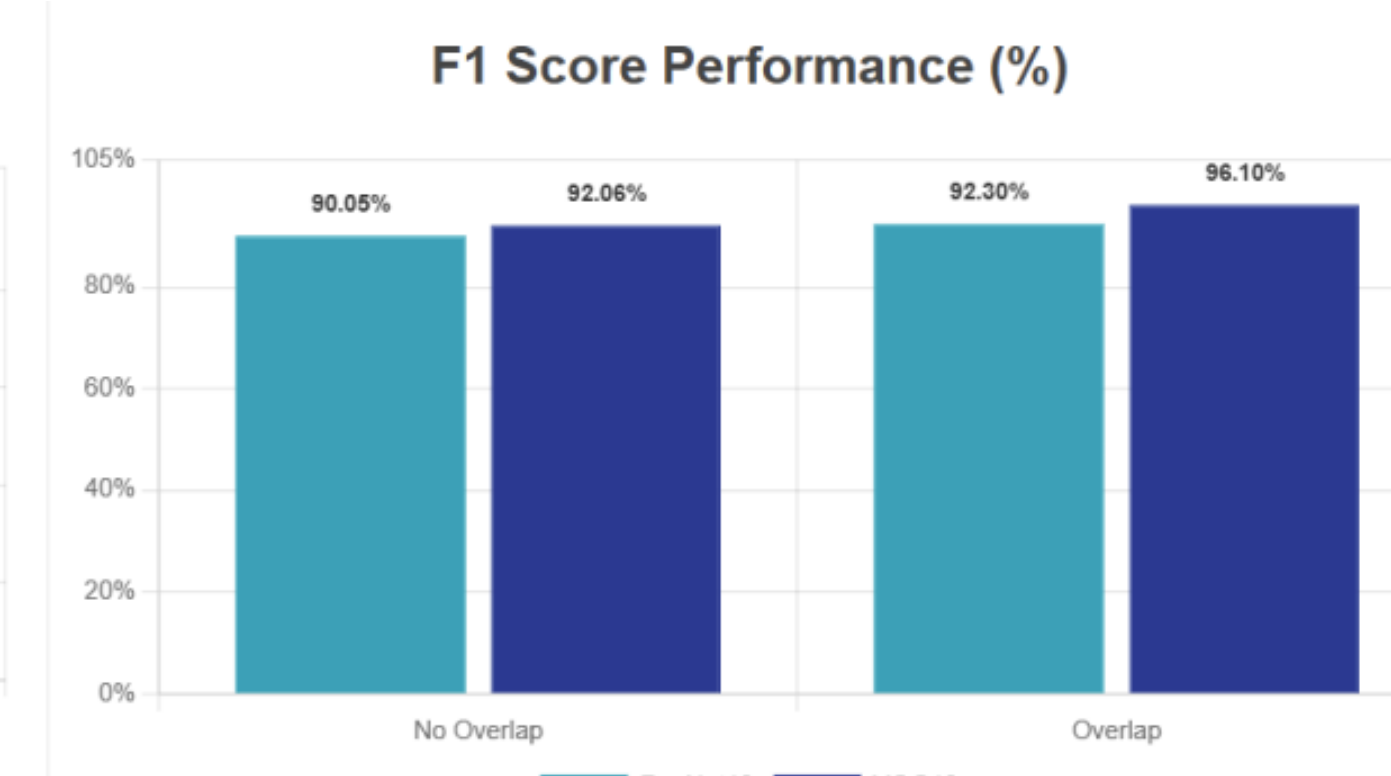
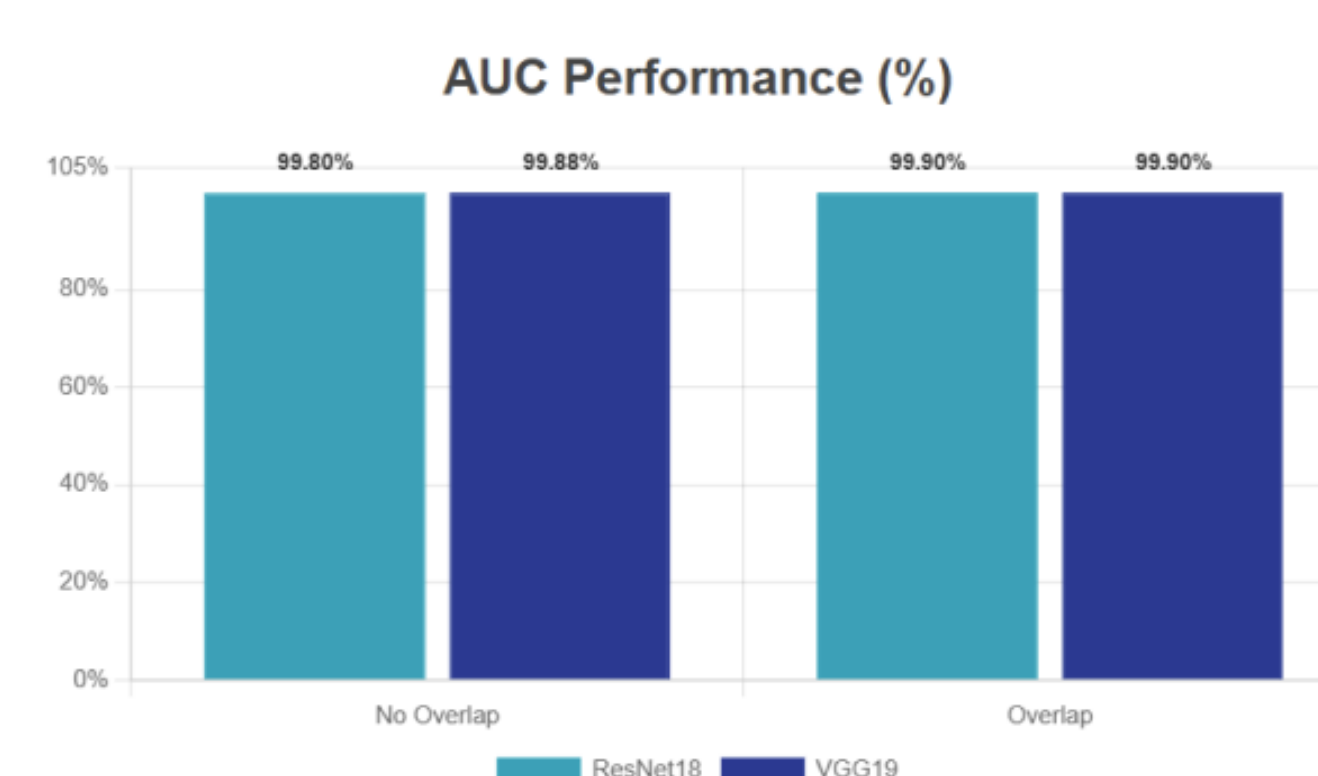
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Uncovering tissue signatures of chemotherapy response in rectal cancer through explainable AI



MODEL PERFORMANCE

- Both models achieved outstanding discrimination with AUC values >99.8% across all conditions.
- VGG19 consistently outperformed ResNet18 in predictive accuracy, as reflected in higher F1 scores.
- Overlap patches demonstrated superior performance compared to non-overlap patches for response prediction.



ACKNOWLEDGEMENTS

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