

CAS-IQA: Teaching Vision-Language Models for Synthetic Angiography Quality Assessment

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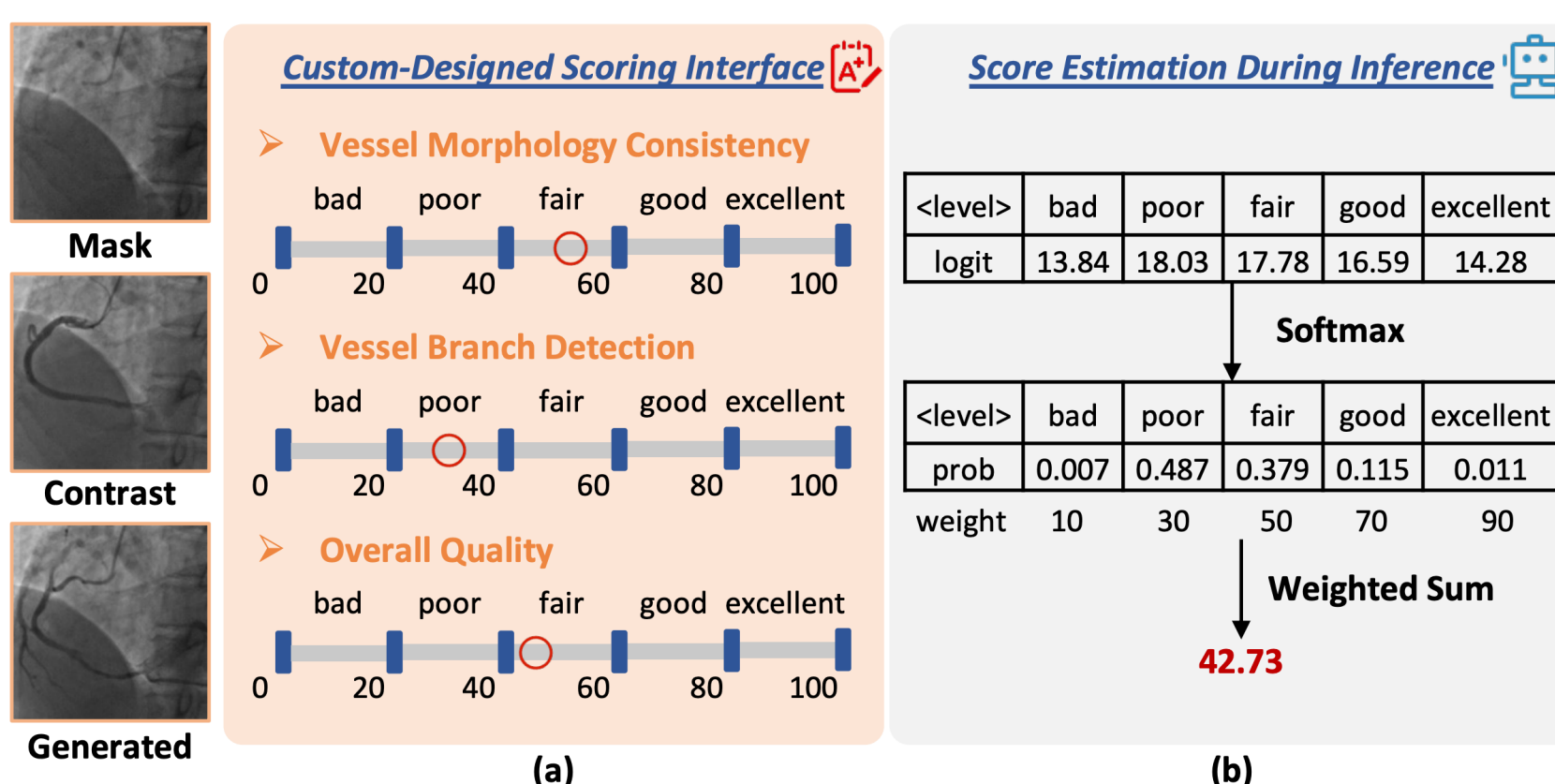


Motivation

- (a) Cardiac Cycle
- (b) Traditional IQA Models vs. Our Proposed CAS-IQA
- Recent advances in AIGC have demonstrated impressive capabilities in generating photo-realistic angiographies from non-contrast X-rays.
 - However, the fidelity of such synthetic angiographies to essential clinical constraints remains unquantified, underscoring the need for rigorous quality assessment.
 - Existing IQA models fail to leverage auxiliary images as references during evaluation and lack fine-grained, task-specific metrics necessary for clinical relevance.

CAS-3K Dataset

Image Collection and Scoring Rules



Subjective Quality Assessment and Data Processing

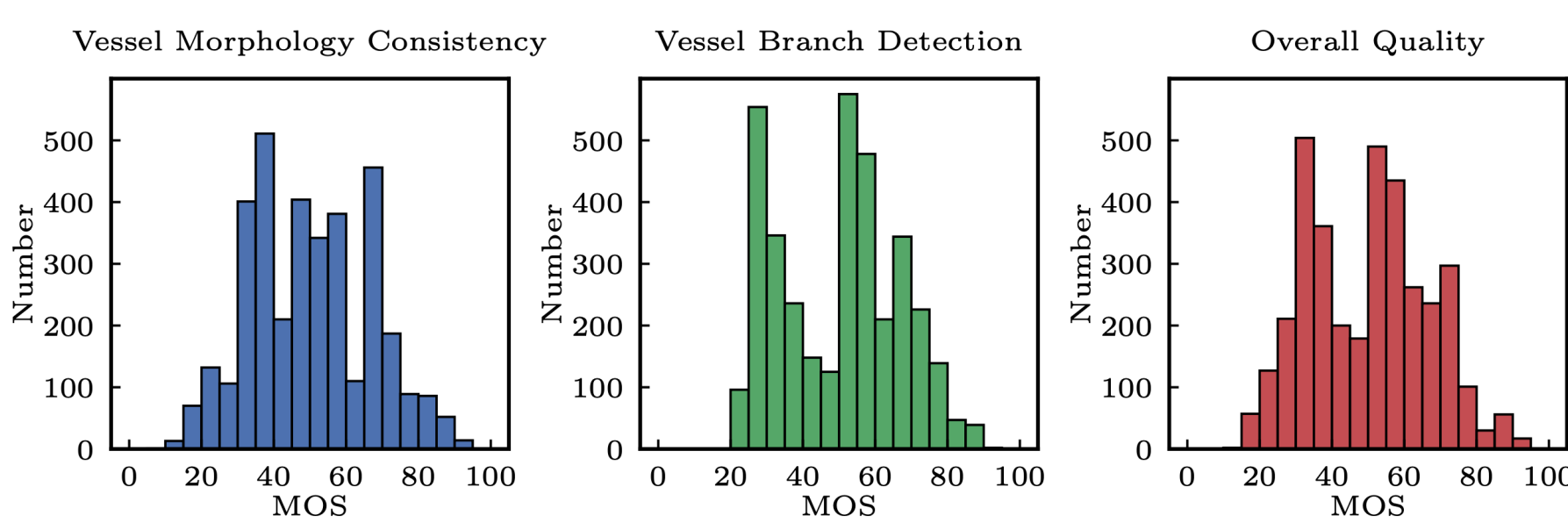


Image Collection.

- We construct CAS-3K by manually selecting 713 high-quality mask-contrast angiography pairs from XCAD and CADICA.
- Using the masks as input, we generate 3,565 synthetic angiograms with five state-of-the-art generative models, forming paired Mask-Generated-Contrast samples.

Task-specific Evaluation Metrics.

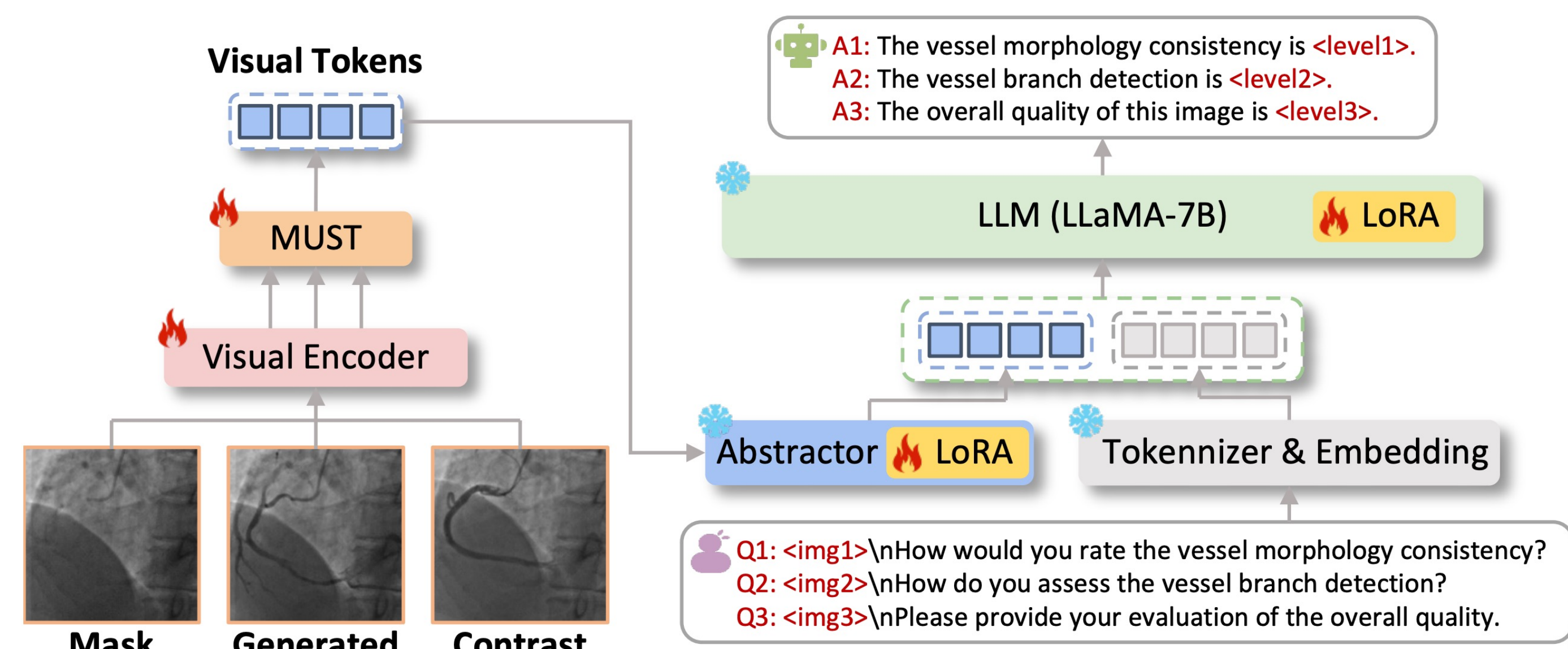
- Vessel Morphology Consistency (VMC)
- Vessel Branch Detection (VBD)
- Overall Quality (OQ)

- Three graduate students majoring in biomedical engineering are recruited to participate in subjective evaluation experiments.
- The MOS is calculated using the following formulas.

$$MOS_j = \frac{1}{N} \sum_{i=1}^N \hat{Z}_{ij} \quad Z_{ij} = \frac{S_{ij} - \mu_i}{\sigma_i}$$

Method

Overall Framework



VLM-based.

- Our method is built upon the mPLUG-Owl2.

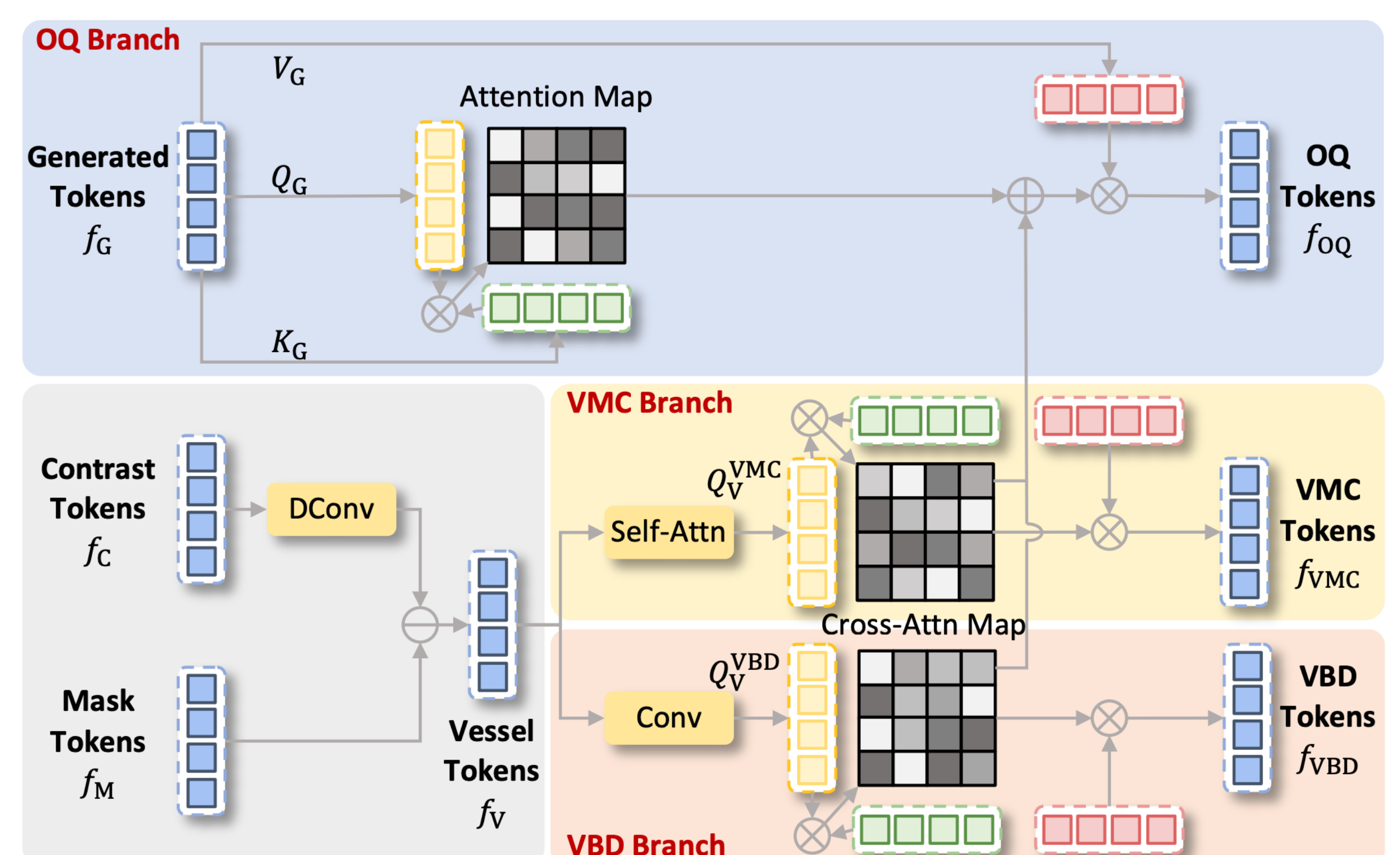
Instruction Tuning.

- We design a series of prompts framed as multi-turn question-answer interactions, as illustrated in the figure on the right.
- Both the Visual Abstractor and the LLM are fine-tuned using LoRA.

Score Estimation.

- We apply softmax over five level logits and take a weighted sum using interval midpoints to obtain the final quality score.

Multi-Path Feature Fusion and Routing (MUST) Module



- A MUST module is presented, which fuses features of Mask, Contrast, and Generated, and routes them to metric-specific branches for optimized assessment.

- We use different attention maps to focus on the synthetic angiography from different perspectives.

Experiments

Comparisons with SOTA Methods

Category	Methods	VMC		VBD		OQ	
		PLCC	SRCC	PLCC	SRCC	PLCC	SRCC
Handcrafted	NIQE [16] [SPL'12]	0.0520	0.0438	0.0289	0.0256	0.0337	0.0202
	BRISQUE [15] [TIP'12]	0.1876	0.1901	0.2359	0.2391	0.2224	0.2139
DNN-based	DBCNN [31] [TCSVT'20]	0.4990	0.4853	0.5856	0.5647	0.4745	0.4666
	HyperIQA [21] [CVPR'20]	0.6657	0.6356	0.5942	0.5873	0.6339	0.6216
	AHIQ [8] [CVPR'22]	0.6251	0.6434	0.6050	0.6010	0.6654	0.6621
	ManIQA [28] [CVPR'22]	0.6823	0.6759	0.6089	0.6060	0.6778	0.6689
	QCN [20] [CVPR'24]	0.6750	0.6651	0.6308	0.6235	0.6796	0.6765
	LoDa [27] [CVPR'24]	0.6859	0.6664	0.6353	0.6279	0.6899	0.6737
	CAS-IQA (Ours)	0.6925	0.6855	0.6639	0.6605	0.6985	0.6986
VLM-based	Q-Align [25] [ICLR'24]	0.6030	0.5907	0.5683	0.5651	0.6096	0.5999
	MA-AGIQA [24] [MM'24]	0.6892	0.6625	0.6507	0.6314	0.6696	0.6598

Ablation Study

MUST	VMC		VBD		OQ	
	PLCC	SRCC	PLCC	SRCC	PLCC	SRCC
✗	0.6517	0.6636	0.6451	0.6491	0.6830	0.6750
✓	0.6925	0.6855	0.6639	0.6605	0.6985	0.6986

Metric	w/o MUST	w/ MUST	GT
VMC	50.16	47.31	41.45
VBD	50.19	50.87	43.30
OQ	62.91	53.19	44.26

Metric	w/o MUST	w/ MUST	GT
VMC	24.75	19.98	17.89
VBD	29.79	28.34	28.93
OQ	16.48	24.02	23.30

- We compare it against a comprehensive set of baselines, including two handcrafted IQA methods, six DNN-based approaches, and two VLM-based methods.
- Extensive experimental results indicate that CAS-IQA significantly outperforms state-of-the-art IQA models on the CAS-3K dataset.
- Extensive ablation studies validate the effectiveness of our MUST module.

Conclusion

- The first high-quality dataset for angiography IQA (CAS-3K) is constructed, consisting of 3,565 synthetic angiographies with metric-based annotations.
- A novel IQA framework based on vision-language models is proposed to comprehensively evaluate the quality of synthetic angiographies. Moreover, the MUST module is designed to effectively fuse visual cues from multiple image sources and adapt them to different evaluation metrics.
- Future work will focus on improving the interpretability of CAS-IQA to facilitate its deployment in real-world clinical applications.

Contact

