



AI IN PRIMARY DIAGNOSIS:

# Advances in AI to support the Primary Diagnosis of Breast Pathology

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# Agenda

Overview of Ibex & our technology

How can AI help in the Practice of Breast Pathology

Update on the latest clinical evidence

Ibex / AstraZeneca HER2 Study Results

Q&A



# Trusted Cancer Diagnostics for All



Clinical grade, AI-based solution  
for cancer diagnosis



Accuracy



Efficiency



Insights



# Ibex Platform: AI -supported Cancer Diagnosis



## Available in multiple workflows:

- Supporting case review during primary diagnosis
- AI-powered second reads on all cases



## Multi tissue detection:

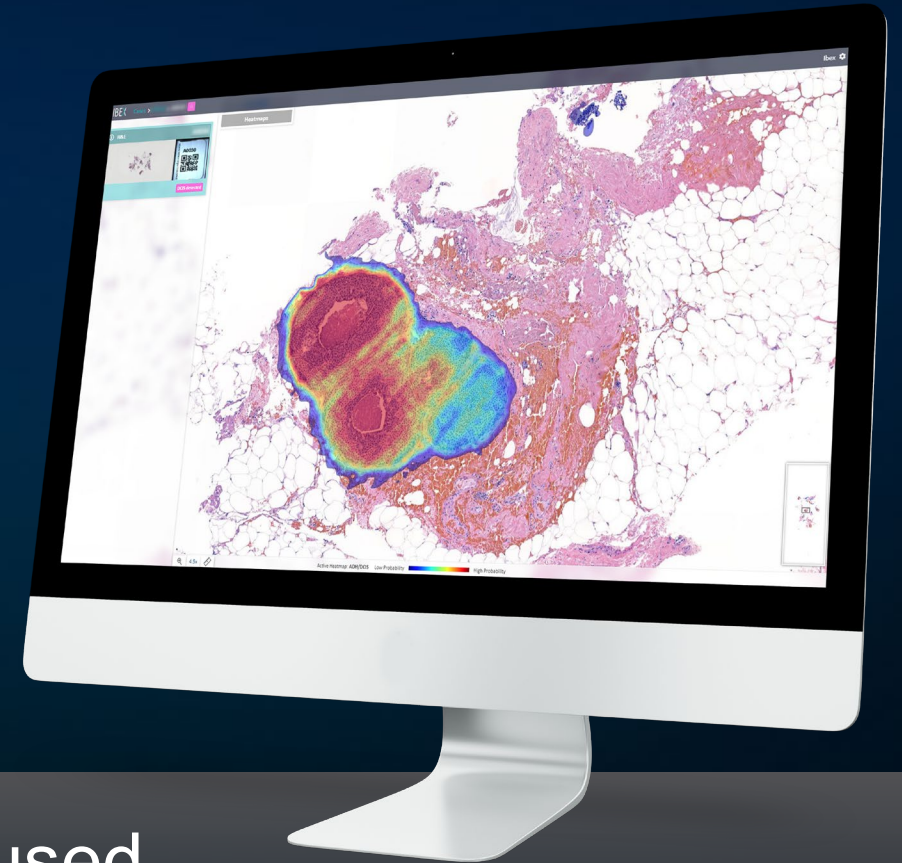
Prostate, breast & gastric



**AI-based diagnostic tools:** case prioritization worklist, slide viewer, IHC preordering, cancer heatmaps, grading, measurements, non-cancer findings, AI-driven reporting



**Open API** for AI-integration: scanning, workflow & LIS



## Deployed at labs worldwide & used by pathologists in everyday practice



## The most powerful and comprehensive AI solution for breast diagnosis

- **Trained** on >200K manual annotations in >4,300 slides, selected by clinical findings and other criteria
- Rigorously **validated** in large-scale multi-site studies
- **Deployed** and used in routine clinical practice since 2019

### H&E

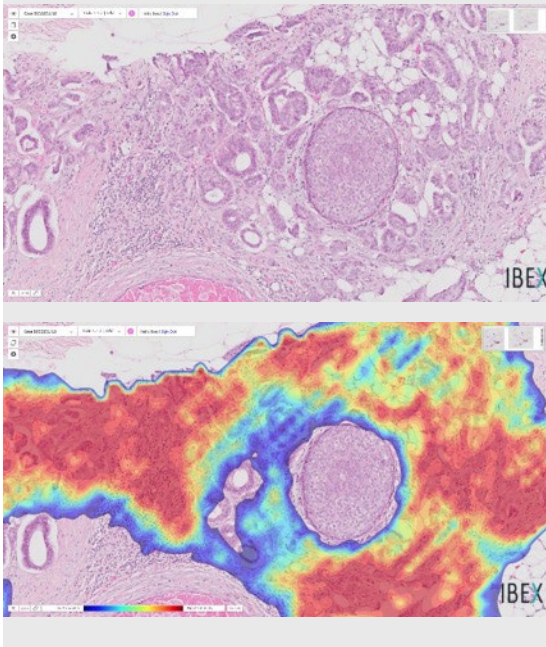
- AI identifies **51 morphological features**, including: Invasive cancer (+special subtypes), DCIS (+grading), TILs, ALI, lobular neoplasia, microcalcifications, hyperplasia, CCC, biphasic tumors, ...

### IHC (breast panel)

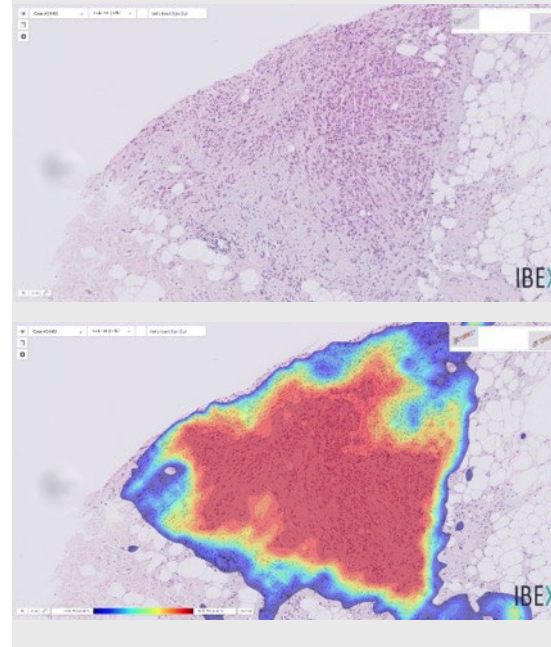
- **Fully automated quantification**: AI detects invasive cancer, identifies tumor cells, classifies their staining pattern and provides a slide-level score
- Apps: Her2, Ki67, ER, PR



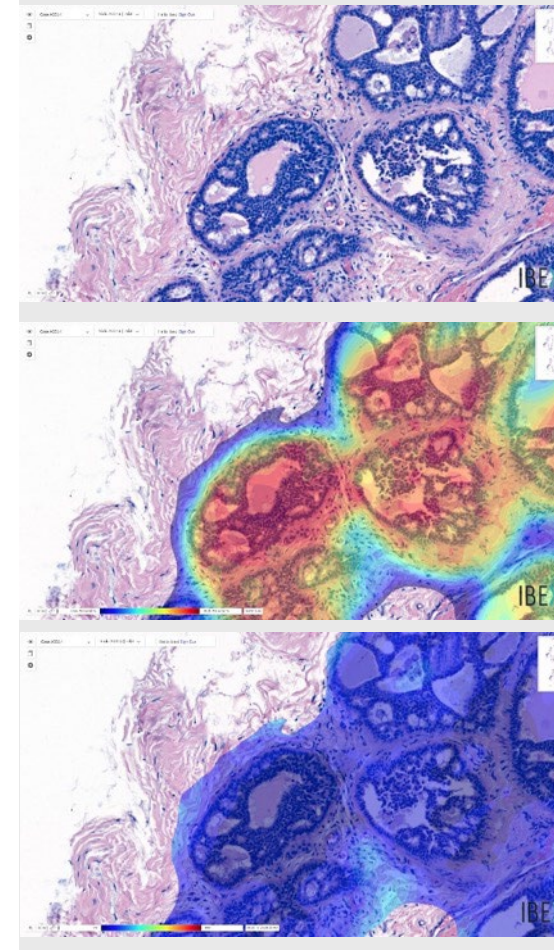
## IDC



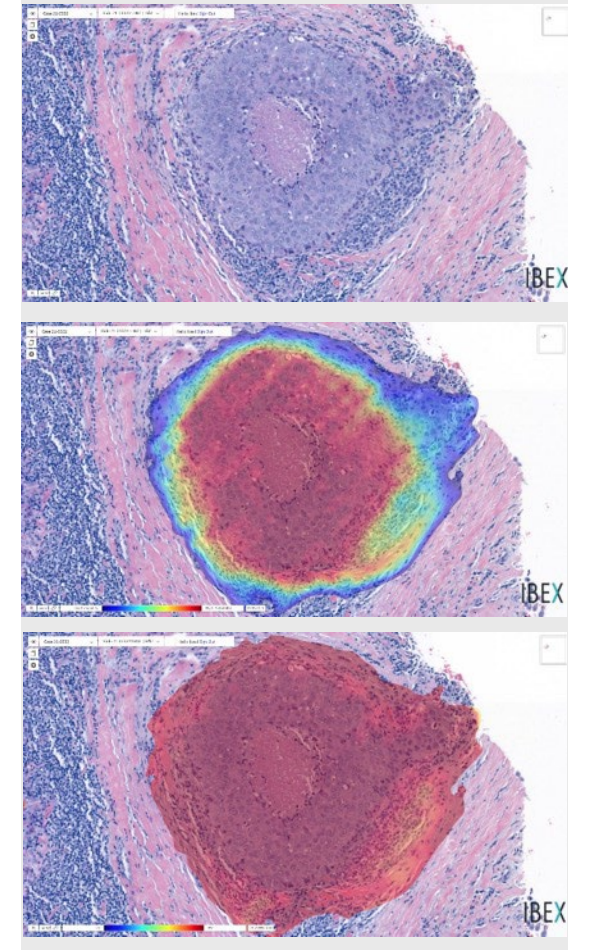
## ILC



## DCIS (low grade)



## DCIS (high grade)



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AI accurately **detects** & grades **multiple types** of invasive & in- situ breast cancer

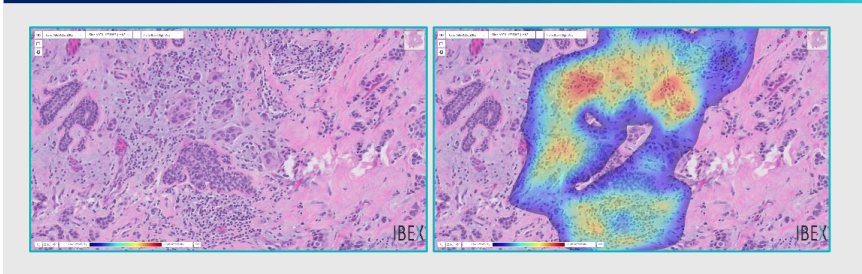
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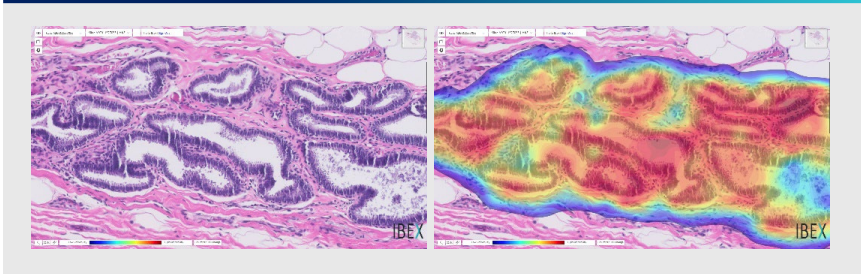
# Ibex Breast: More Than Just Cancer



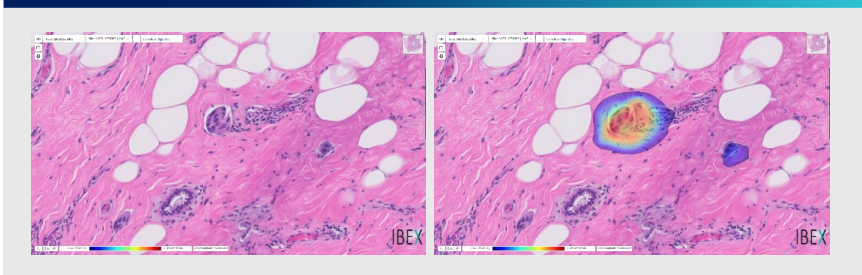
## TILs



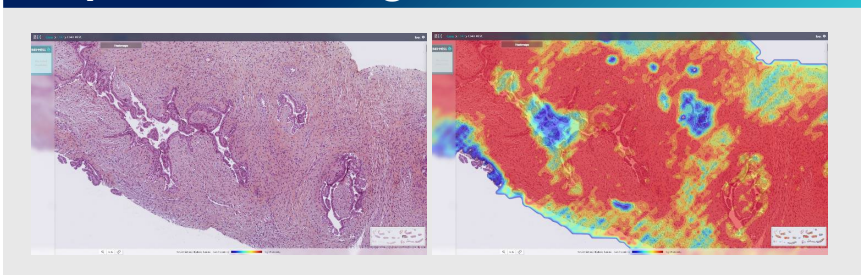
## Columnar Cell Change



## ALI



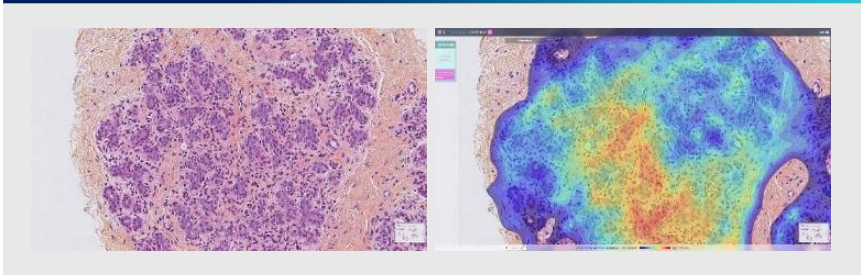
## Phyllodes Tumor grade I



## Microcalcifications



## Adenosis



## Additional features

Angiolymphatic involvement	Biphasic tumor	Tumor infiltrating lymphocytes
Hyperplasia	Inflammation	Fibrocystic change
Elastosis	Tumor necrosis	Normal ducts & lobules
Stromal changes	Lobular neoplasm	Sclerosing adenosis

and many more...

The Broadest Range of Detection Capabilities Available In the Field



## HER2





# How Can AI Help in the Practice of Breast Pathology?



## Improve Quality

- **AI decision support** - Highlight clinically important lesions and other morphological features in primary diagnostic workflow
- **AI Diagnostic QA** - Provide second a read before final sign out to ensure clinically significant lesions have not been missed
- **AI Quantification of IHC**



## Improve workflow & reduce TAT

- Prioritisation of cases
- Pre-order receptor IHC's for invasive cancers and DCIS
- Pre-order additional levels (e.g., for calcifications)
- Eliminate need for diagnostic IHC for some cases

# Ibex Breast: AI-powered Accuracy

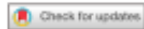
npj | breast cancer

www.nature.com/npjbcancer

ARTICLE OPEN

## Validation and real-world clinical application of an artificial intelligence algorithm for breast cancer detection in biopsies

Judith Sandbank<sup>1,2</sup>, Guillaume Bataillon<sup>3,7</sup>, Alona Nudelman<sup>1</sup>, Ira Krasnitsky<sup>2</sup>, Rachel Mikulinsky<sup>2</sup>, Lilach Bien<sup>2</sup>, Lucie Thibault<sup>3</sup>, Anat Albrecht Shach<sup>4</sup>, Geraldine Sebag<sup>2</sup>, Douglas P. Clark<sup>2</sup>, Daphna Laifenfeld<sup>2,8</sup>, Stuart J. Schnitt<sup>5,6</sup>, Chaim Linhart<sup>2</sup>, Manuela Vecsler<sup>7</sup> and Anne Vincent-Salomon<sup>7,9,10</sup>



Detection	AUC	Specificity	Sensitivity
Invasive Breast Cancer	0.990	93.6%	95.5%
DCIS	0.980	93.8%	93.2%
IDC vs ILC	0.973	92.7%	92.9%
IG / HG DCIS vs. ADH / LG DCIS	0.921	84.8%	84.1%

institut  
Curie

Maccabi

The Best Healthcare Group in Israel

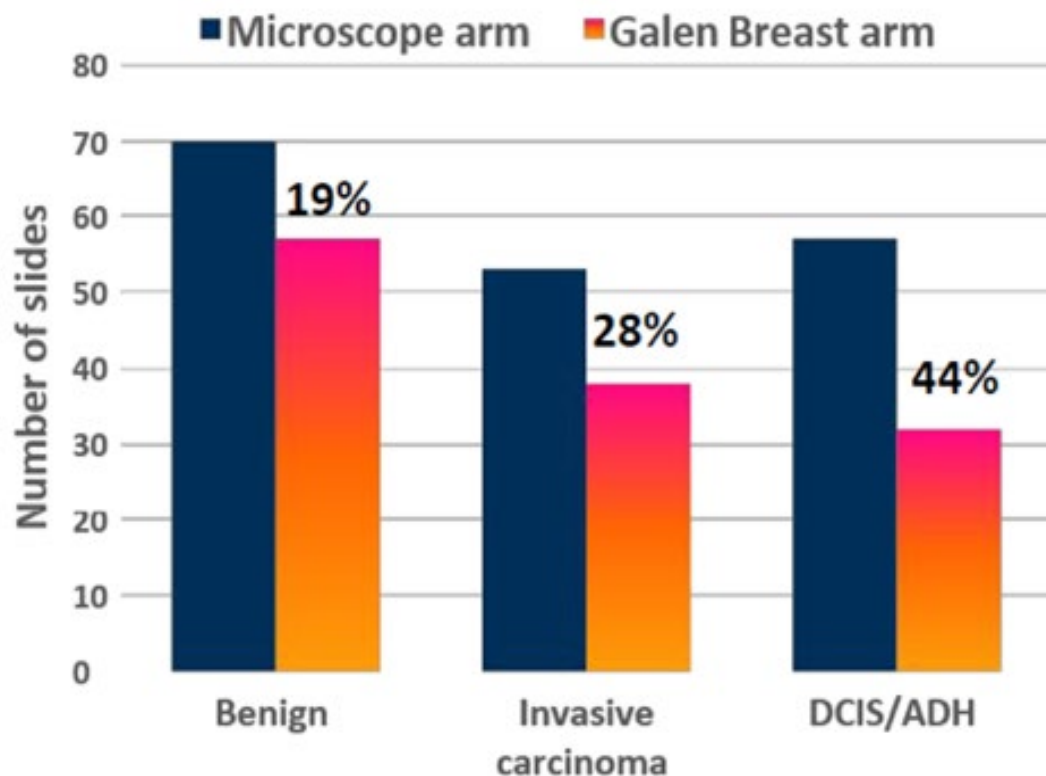
- \* A multi-site study of 436 breast biopsies (841 H&E/HES slides): 156 invasive, 135 DCIS/ADH, 145 benign<sup>1</sup>
- \* Cohort enriched with rare subtypes
- \* Multiple scanning systems and staining platforms
- \* The study **successfully validated** the performance of Galen Breast:
  - **Very high performance** for invasive carcinoma & DCIS detection
  - AI differentiated well between subtypes/grades of invasive & in-situ cancers

1) Vincent-Salomon et al, npj Breast Cancer 2022



# Ibex Breast: AI for Primary Diagnosis

## 30% Reduction in IHC Ordering<sup>2</sup>



- \* Multiple studies of Galen Breast in primary diagnosis (485 cases collectively)
- \* Parallel arms comparing pathologists with AI to pathologists with microscope
- \* Galen Breast was found to help pathologists **improve diagnostic quality and efficiency**:
  - Improved overall accuracy (by 29%)<sup>1</sup>
  - Improved sensitivity for invasive cancer<sup>1</sup>
  - Reduced IHC ordering (by 30%)<sup>2</sup>

1) Unpublished data from clinical studies. Subject to further analysis

2) Sandbank et al. Presented at USCAP 2022

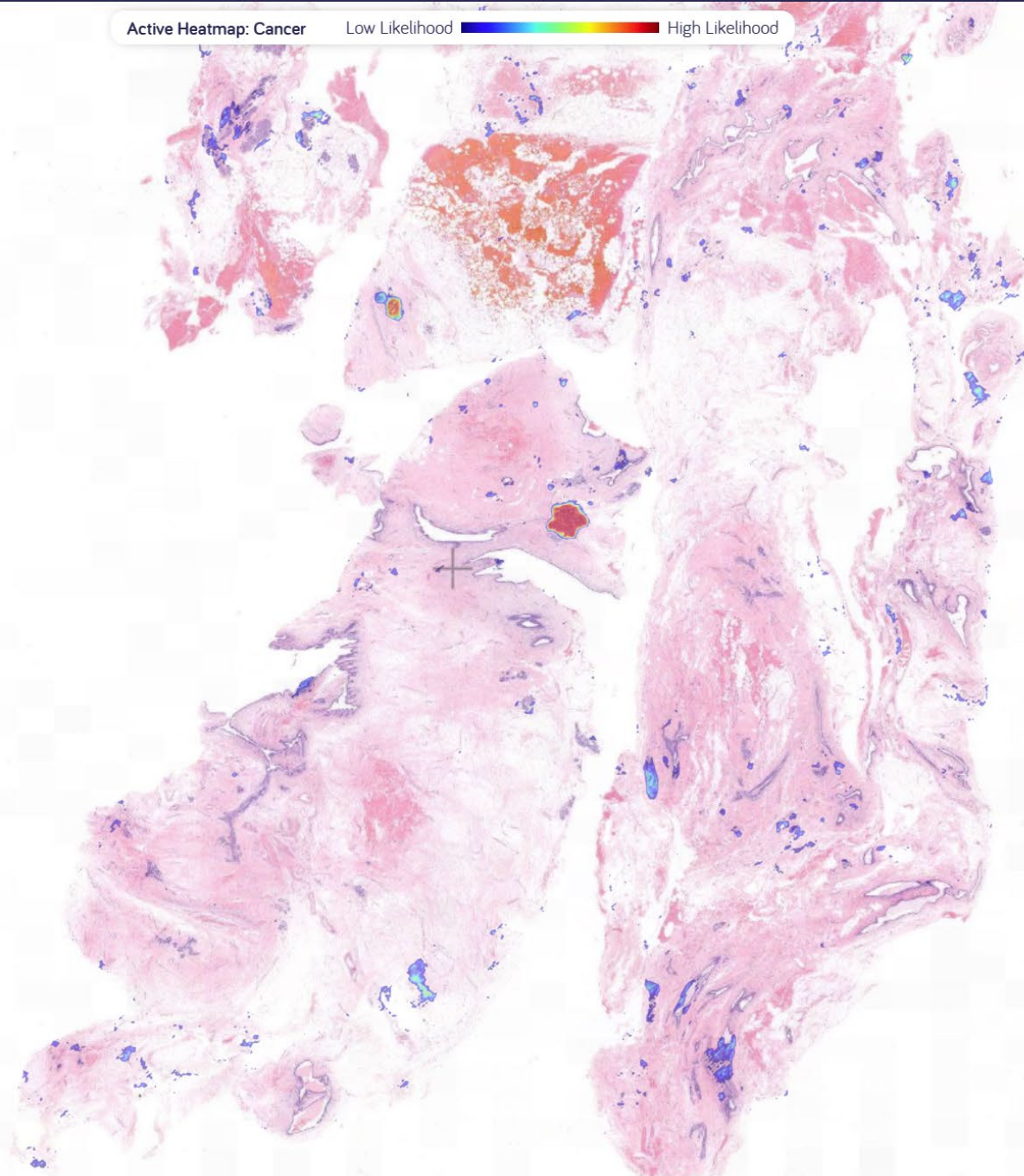
## Heatmaps

Active Heatmap: Cancer

Low Likelihood



High Likelihood

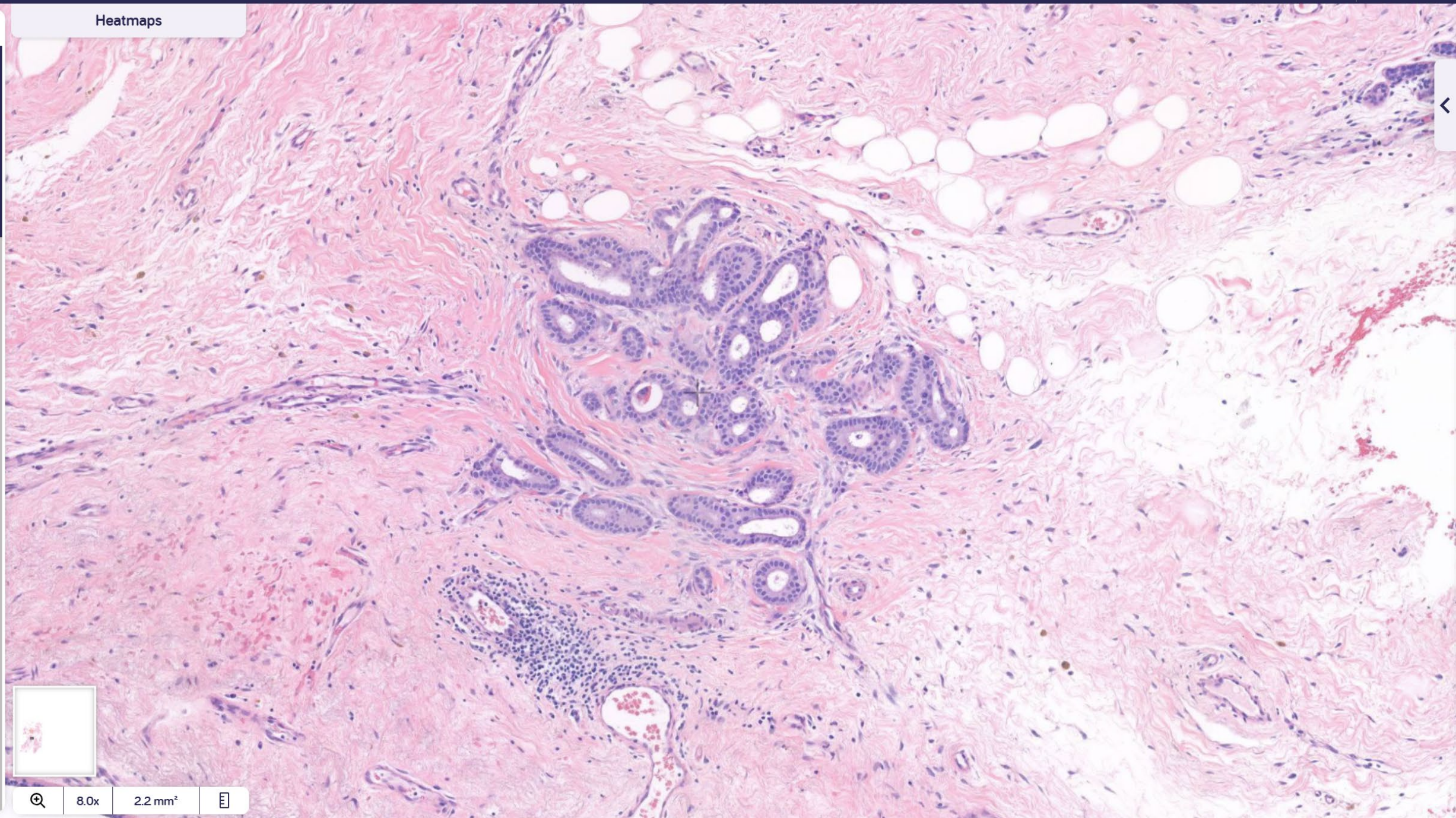


0.4x

883 mm<sup>2</sup>



## Heatmaps



8.0x

2.2 mm<sup>2</sup>



# Small foci of IDC detected with Galen Breast AI



IBEX

Cases (55 Incomplete) > MC-999170 > MC-999170\_1\_HNE

Case Report Slide Report Ibex

HNE

Heatmaps

2\_IHC

3\_IHC

H&E

MC-999170\_1\_HNE

Cancer

AI High Likelihood

Observed Not Observed Other

Invasive Cancer

AI High Likelihood

Observed Not Observed Other

ADH/DCIS

AI Low Likelihood

Observed Not Observed Other

ILC vs. IDC

AI ILC IDC

ILC IDC Other

DCIS LG vs. DCIS HG

AI LG HG

ADH LG ADH/LG IG HG Other

ALI/LVI

AI

Observed Not Observed Other

TILs

AI

Observed Not Observed Other

Tumor Necrosis

AI

Observed Not Observed Other

Lobular Neoplasia

AI

Observed Not Observed Other

Hyperplasia

AI

Observed Not Observed Other

Enter slide report comments...

In Review

10.0x

Active Heatmap: ILC vs. IDC ILC IDC

# Case Prioritisation, Triage & IHC Pre-ordering

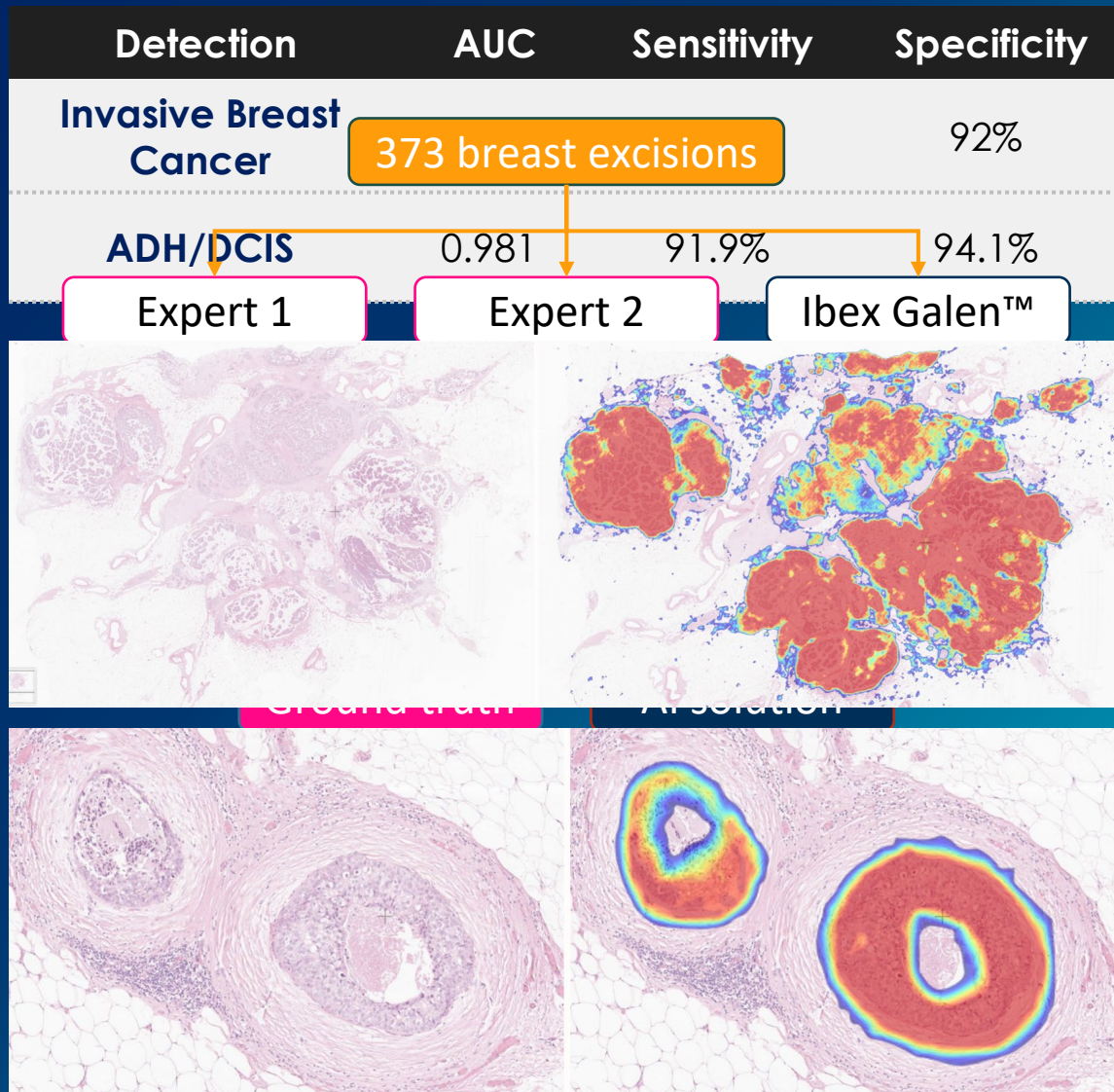


Breast

	Case ID	Date ↑	Tissue	No. of Slides	Findings	Assigned to
	MP-004417	2022-05-23	breast	15	Cancer Invasive Cancer ADH/DCIS	Pathologist
	MC-999070	2022-05-25	breast	3	Cancer Invasive Cancer ADH/DCIS	Pathologist
	MP-004402	2022-05-25	breast	8	Cancer Invasive Cancer	Pathologist
	MC-117463	2022-05-25	breast	9	Cancer Invasive Cancer	Pathologist
	CP-000030	2022-05-25	breast	1	Cancer Invasive Cancer	Pathologist
	MP-004354	2022-05-25	breast	3	Cancer Invasive Cancer	Pathologist
	CP-000014	2022-05-25	breast	1	Cancer Invasive Cancer	Pathologist
	MP-004485	2022-05-25	breast	12	Cancer Invasive Cancer ADH/DCIS	Pathologist
	MP-009618	2022-05-25	breast	6	Cancer Invasive Cancer ADH/DCIS	Pathologist
	MP-004357	2022-05-25	breast	4	Cancer ADH/DCIS	Pathologist
	MC-023811	2022-05-25	breast	6	Cancer ADH/DCIS	Pathologist
	MC-999170	2022-05-25	breast	3	Cancer ADH/DCIS	Pathologist
	MC-008566	2022-05-25	breast	13	Cancer ADH/DCIS	Pathologist
	MC-134340	2022-05-25	breast	1		Pathologist
	MC-032851	2022-06-07	breast	2		Pathologist
	KM-000040	2022-06-07	breast	9		Pathologist
	CP-000098	2022-06-07	breast	17		Pathologist
	IC-000129	2022-06-07	breast	1		Pathologist
	MC-045262	2022-08-16	breast	1		Pathologist



# Galen Breast: Excisions Study

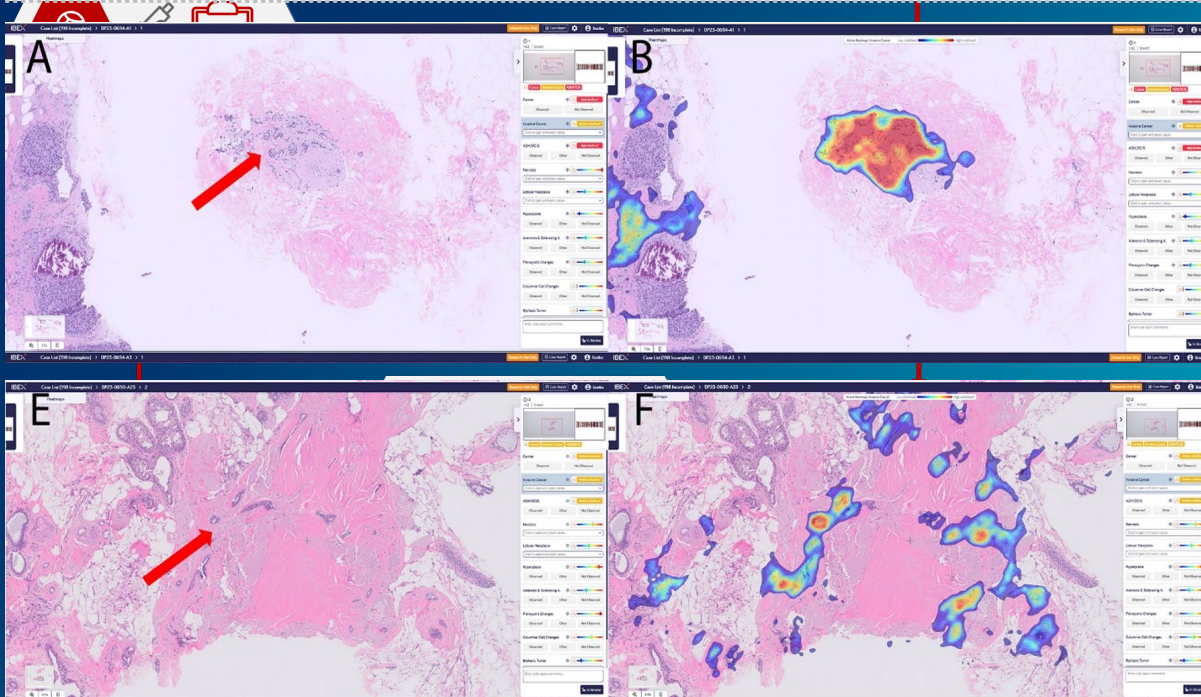


The Best Healthcare Group in Israel

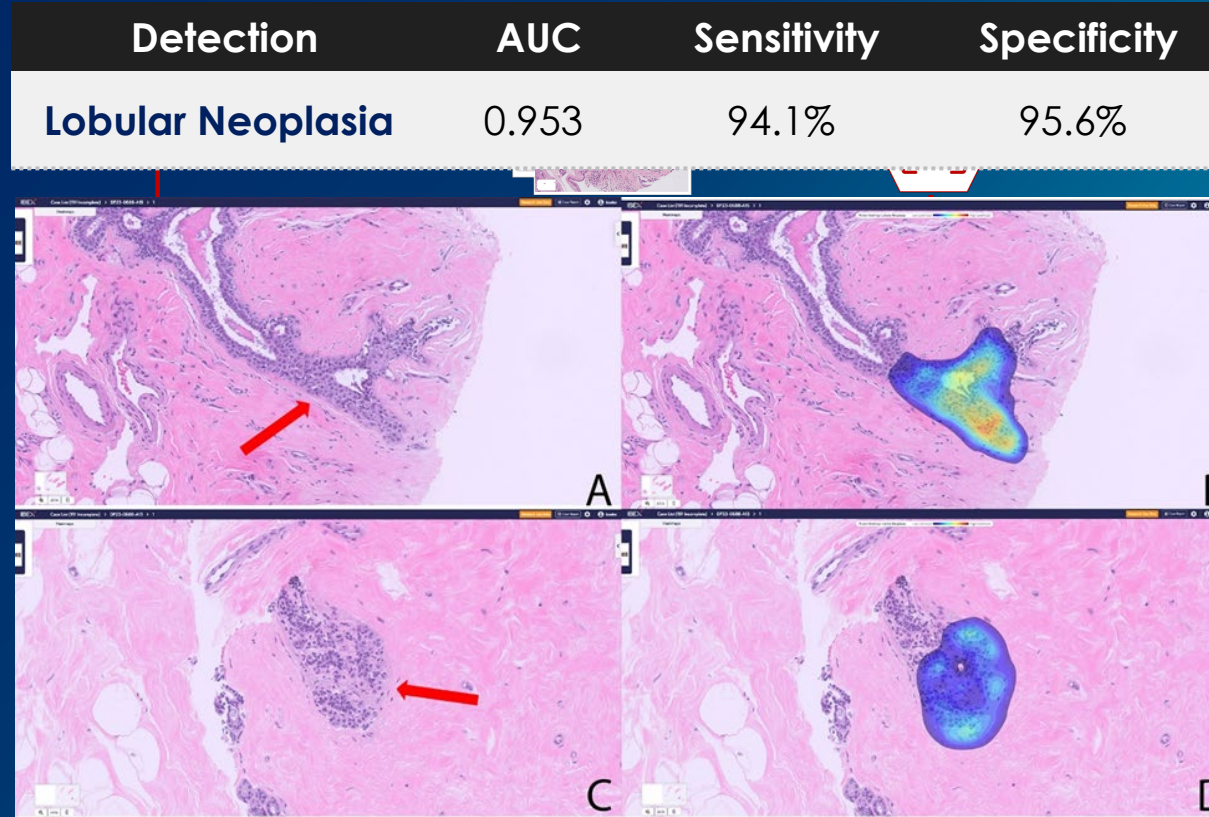
- \* A multi-site study of 373 breast excision cases: invasive, DCIS & ADH
- \* Ground Truth established by 3 expert breast pathologists
- \* Multiple scanning systems and staining platforms
- \* The study **successfully validated** the performance of Ibex Breast on excision cases:
  - **Very high performance** for invasive carcinoma & DCIS detection
  - AI differentiated well between subtypes/grades of invasive & in-situ cancers



Detection	AUC	Sensitivity	Specificity
Invasive Breast Cancer	0.976	91.7%	95%
DCIS	0.976	93.3%	96.6%

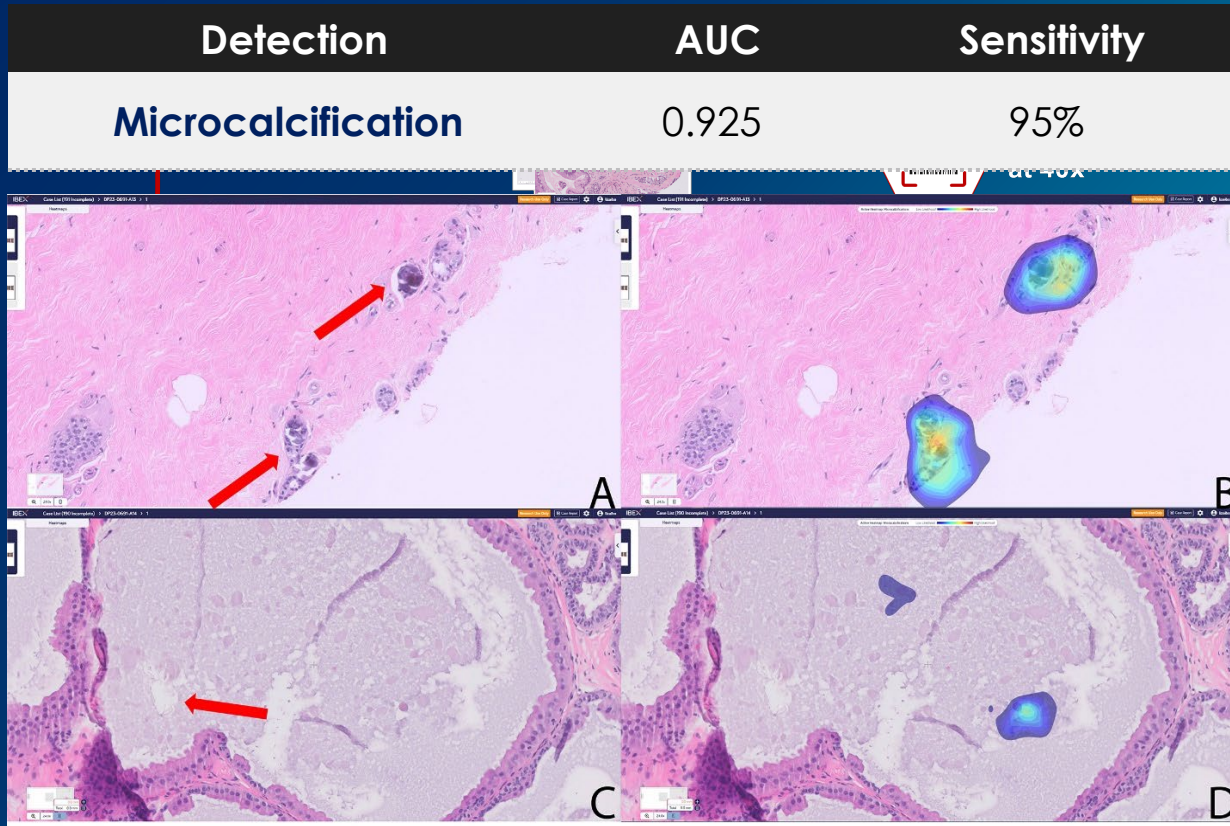


- \* Study of **104 breast biopsy cases**: 24 invasive, 4 microinvasion, 15 DCIS & 65 benign
- \* Ground Truth based on original report by expert breast pathologist
- \* The study **successfully validated** the performance of Ibex Breast on biopsy cases:
  - **Very high performance** for classification of invasive carcinoma & in situ breast cancer
  - Accurately identified multiple other pathologies, such as lobular neoplasia, and multiple benign lesions



- \* Study of **65 breast biopsy cases**: 17 lobular neoplasia & 48 benign
- \* Ground Truth based on original report by expert breast pathologist
- \* AI results were compared with the ground truth, which was confirmed by loss of E-cadherin staining
- \* The study **successfully validated** the performance of Ibex Breast on biopsy cases:
  - **Very high performance** for detection of Lobular Neoplasia

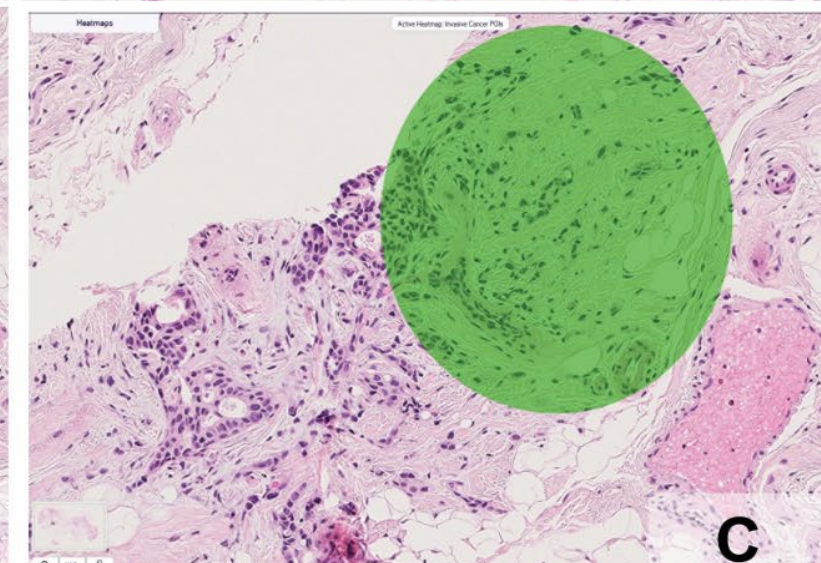
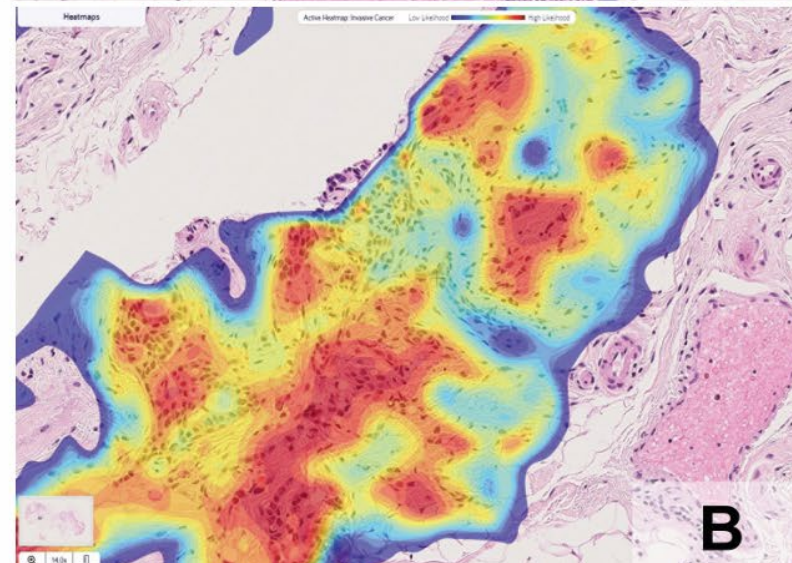
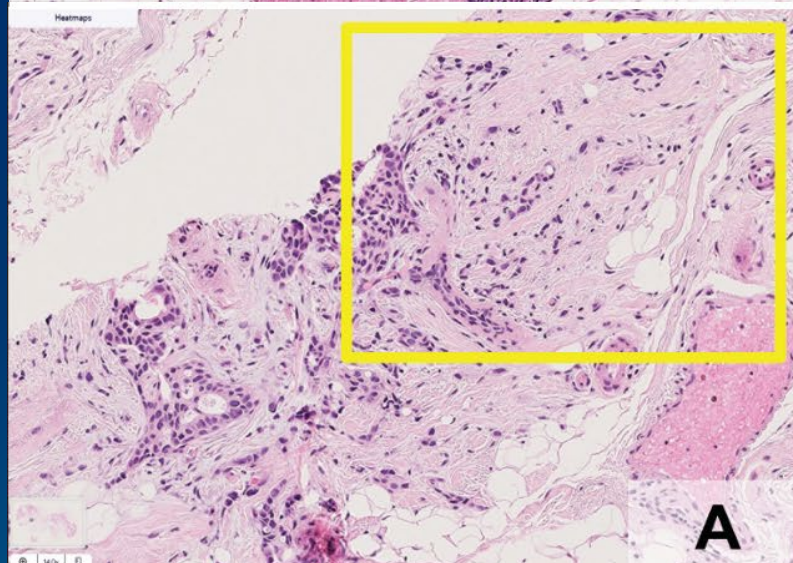
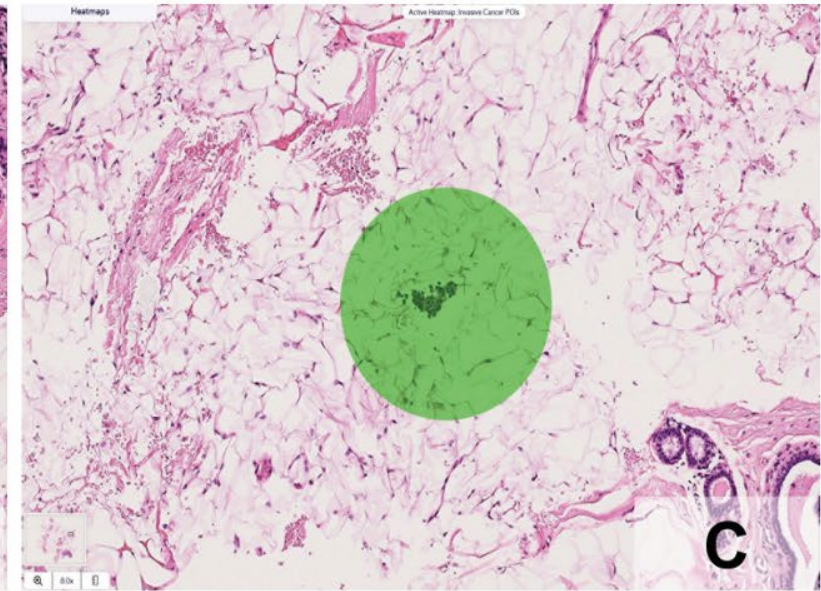
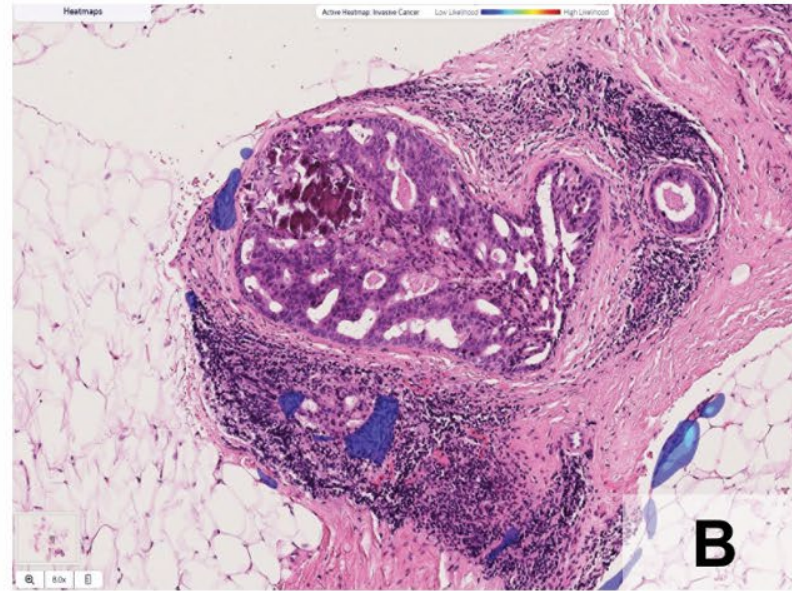




- \* Study of **53 non-cancerous breast biopsy cases**: 21 with microcalcifications & 33 without microcalcifications
- \* Ground Truth based on original report by expert breast pathologist
- \* The study **successfully validated** the performance of Ibex Breast on biopsy cases:
  - **High performance** for detection of microcalcifications



# Galen Breast: Detection of Microinvasive Carcinoma



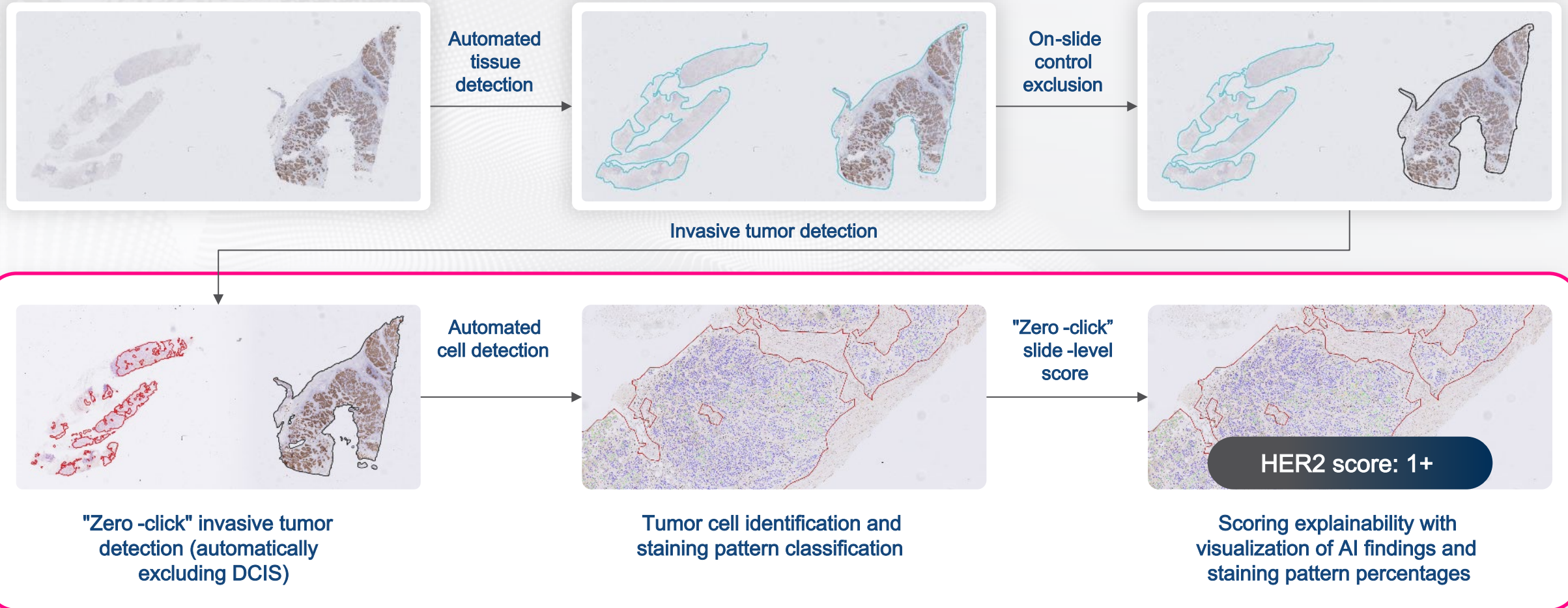


# Ibex Breast HER2



Fully automated "zero-click", AI-enhanced accuracy and reproducibility

The AI-powered computational pipeline automates and optimizes case review:



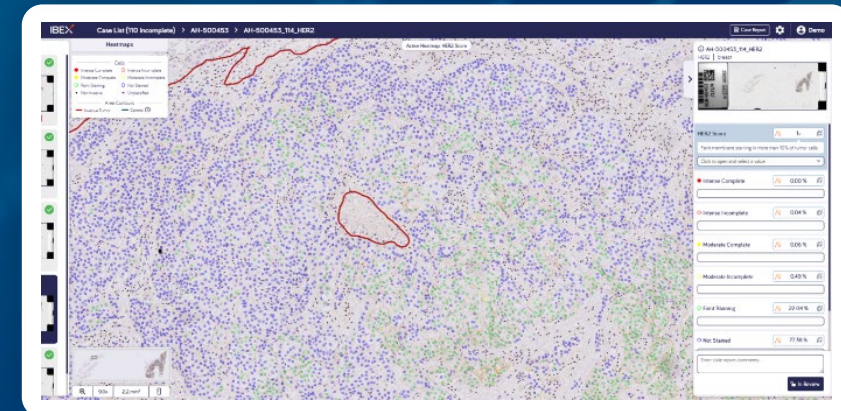
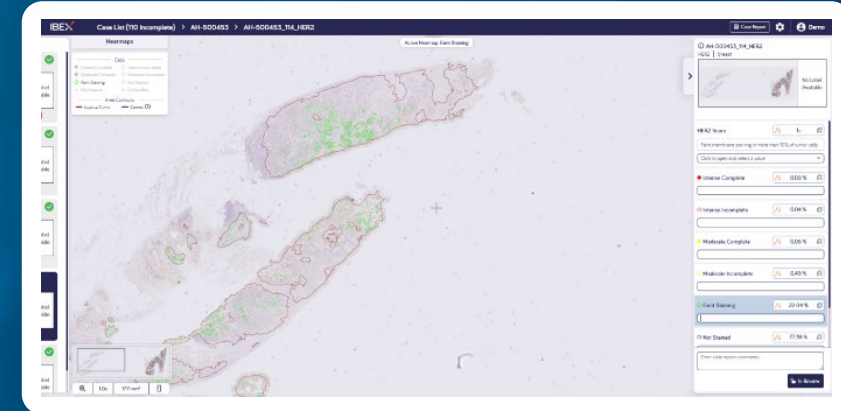
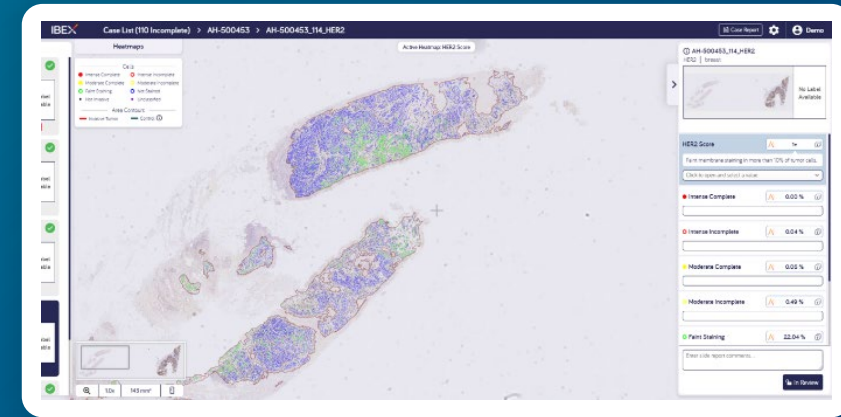
# Ibex Breast HER2

Fully automated “zero-click” AI-powered decision support tool for pathologists scoring HER2 immunohistochemistry (IHC)

Delineates HER2 expression into four standard scores: 0, 1+, 2+ and 3+, based on the 2023 ASCO/CAP guidelines

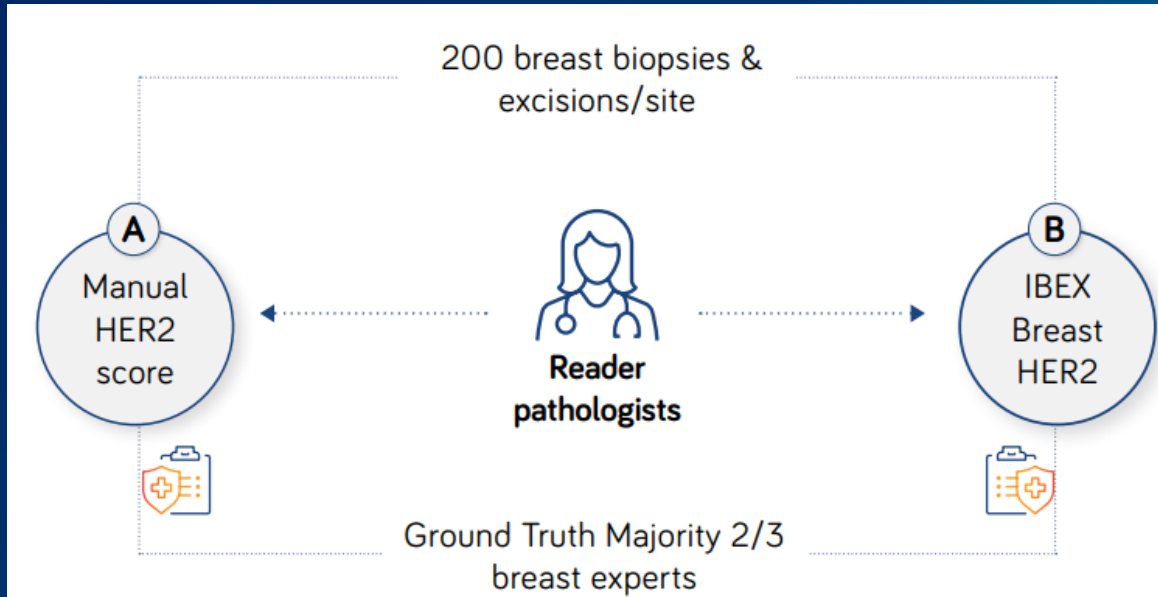
Increases accuracy and reproducibility of HER2 IHC scoring, including the highly subjective HER2-low cases

Bolsters pathologists’ confidence in their HER2 scoring accuracy with explainable visualization of AI findings and staining pattern percentages





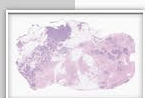
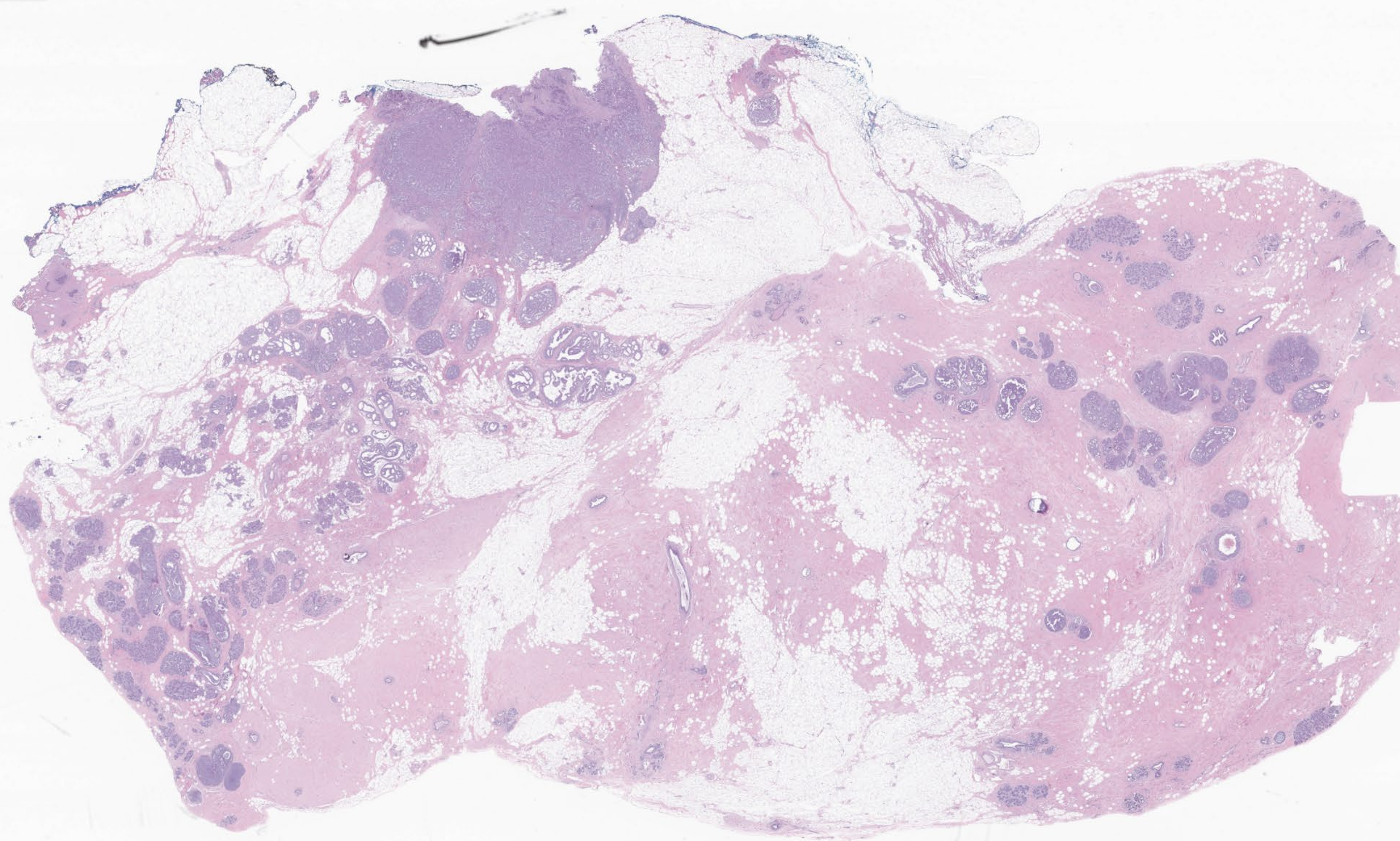
# Ibex Breast HER2: Early Evidence Program



- 28 “reader” pathologists from 13 pathology labs scored HER2 IHCs according to the 2023 ASCO/CAP guidelines
  - **Arm A** - unassisted digital review
  - **Arm B** - AI assisted digital review
- Ground truth (GT) established as majority score of 3 breast experts/site, scoring slides per standard of care (no AI)
  - 43 GT pathologists in total - 19 internal, 24 external
- Reader performance in each arm was compared to GT

- \* Study of 2,300 patients from 13 academic and reference/private laboratories (US, EU, UK)
- \* 100-200 anonymized breast biopsies/site (HER2 + corresponding H&E)
- \* Diverse invasive carcinoma subtypes from primary and metastatic tumors
- \* Real-world distribution of HER2 scores (15-20% HER2 positive, 80-85% HER2 negative)
- \* Variety of scanners

Heatmaps



0.8x





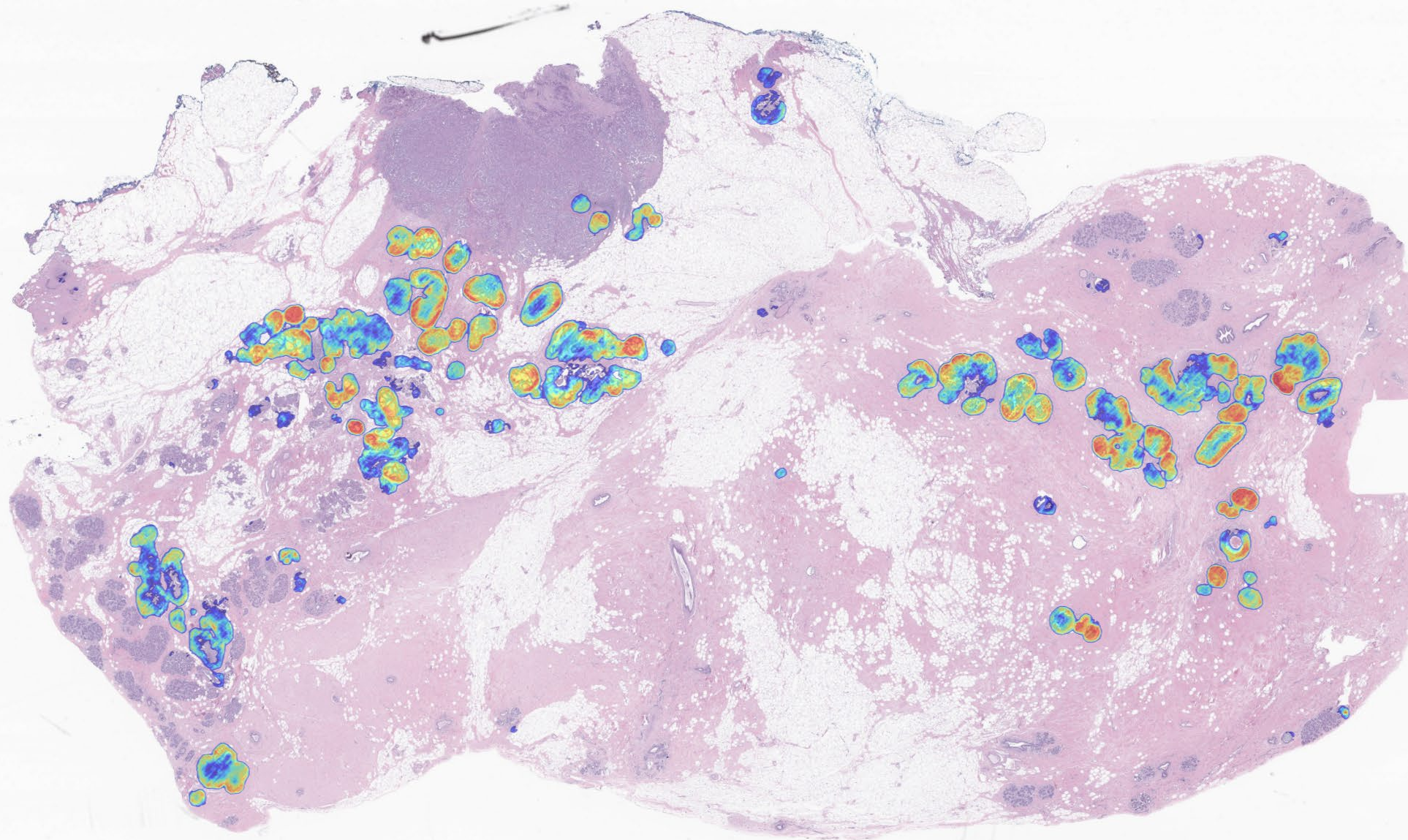
Heatmaps

Active Heatmap: ADH/DCIS

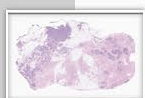
Low Likelihood



High Likelihood



ADH/DCIS heatmap



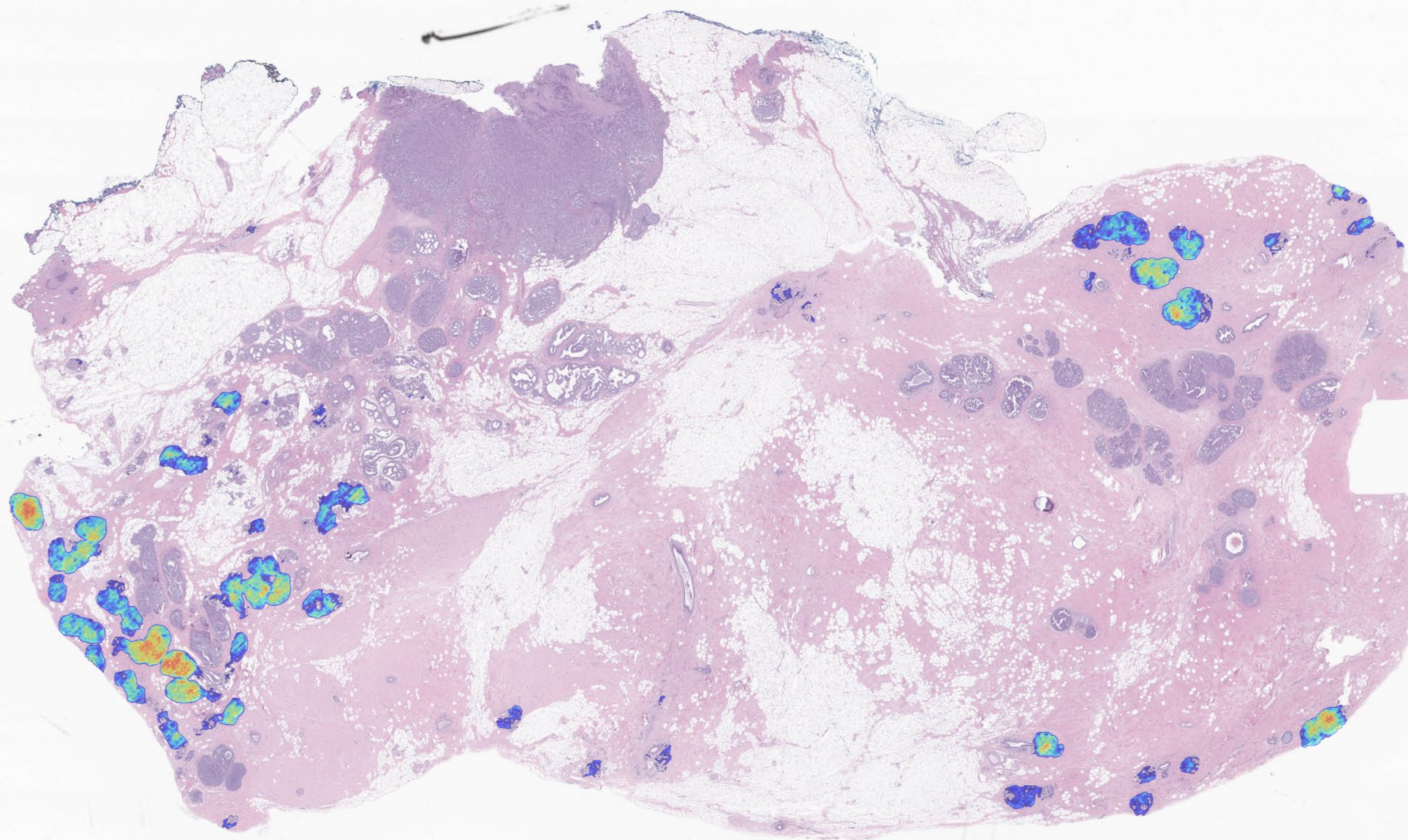
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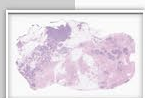


Heatmaps

Active Heatmap: Adenosis &amp; Sclerosing A. Low Likelihood High Likelihood



Adenosis heatmap

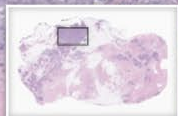
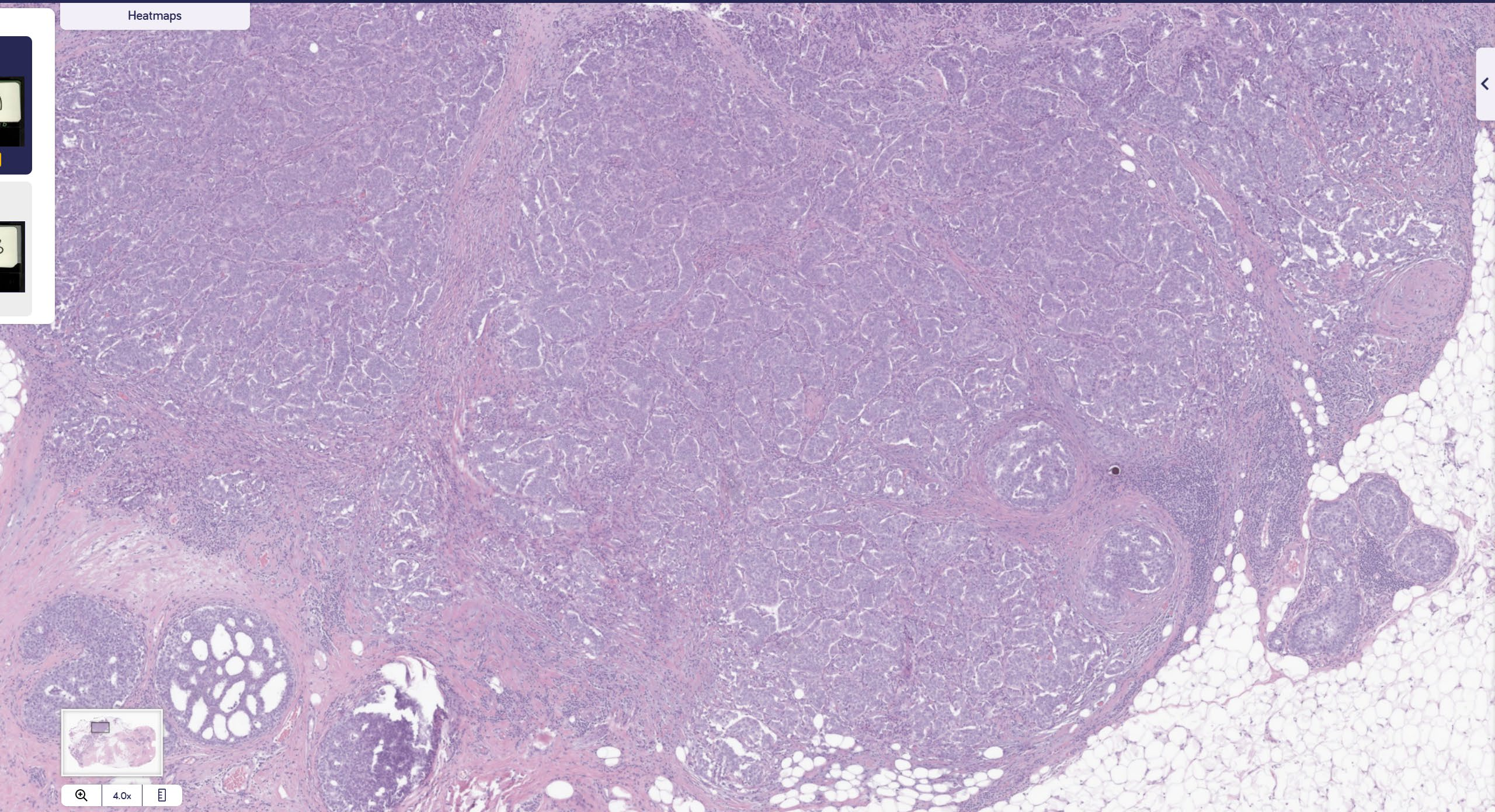


0.8x





Heatmaps



4.0x





Heatmaps

≥1 ንኒብ ብሒ ያብካሉ ልዩ ምዃር ልብ ልብ ልብ ልብ ልብ ልብ  
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4.0x





Active Heatmap: HER2 Score

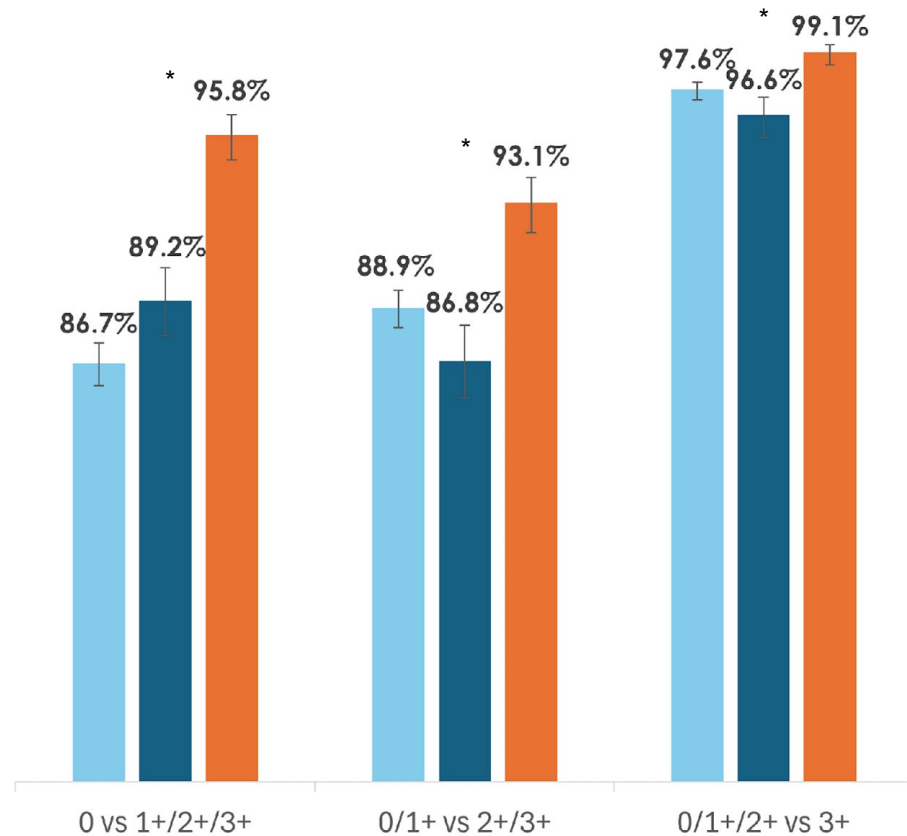
— Invasive Tumor      — Control (i)

☐

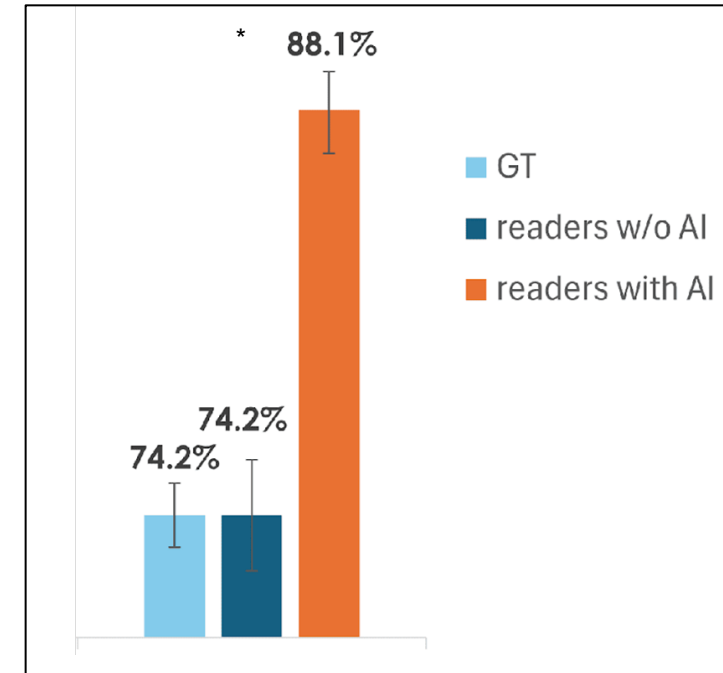
 In Review



# Increased Consistency: Inter-observer Agreement



Overall Inter -observer Agreement

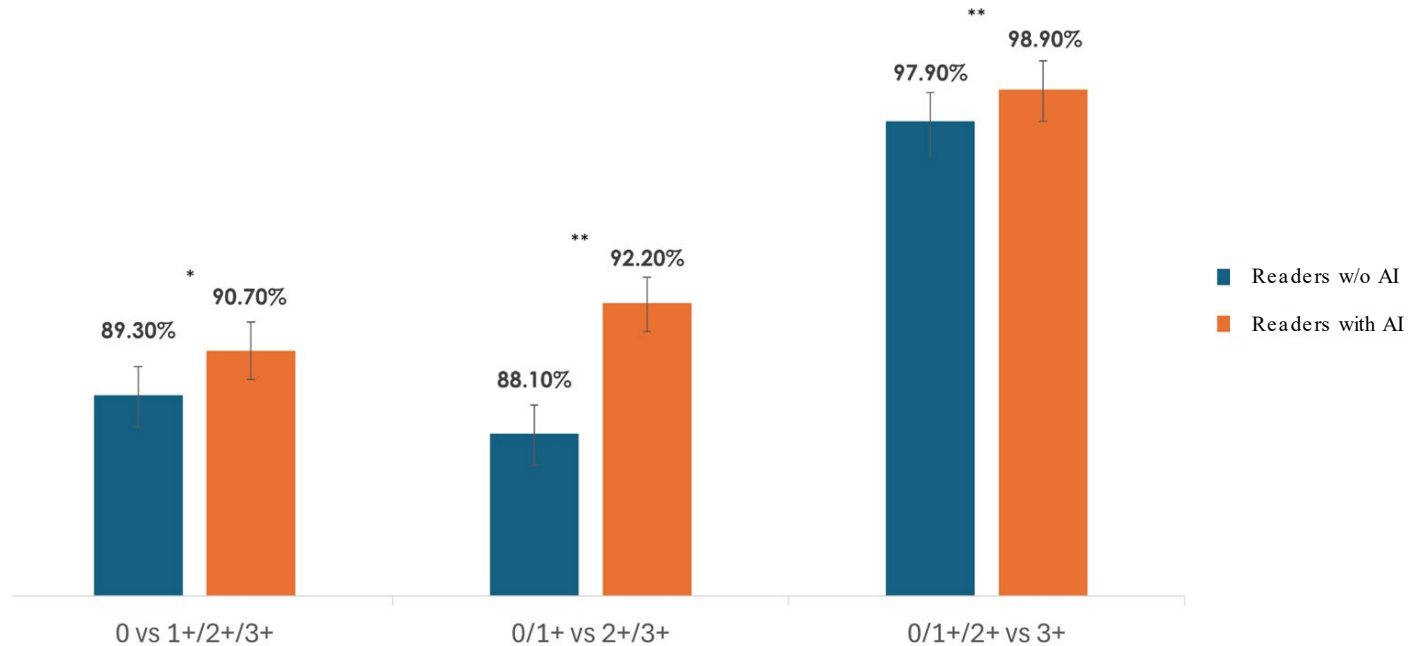


Pathologists' average inter-observer agreement was significantly higher when assisted by AI

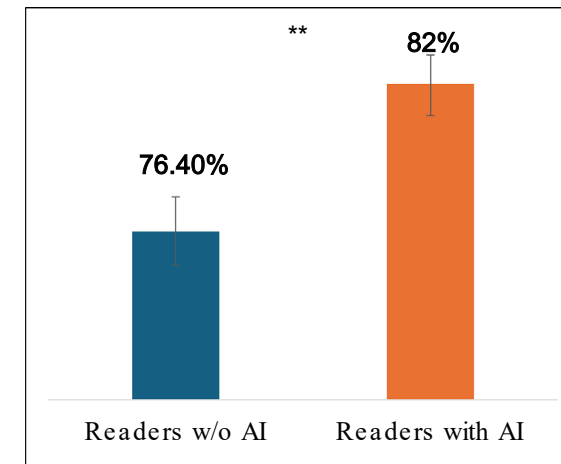


# Improved Accuracy: Agreement with Ground Truth

Accuracy by HER2 cut -offs



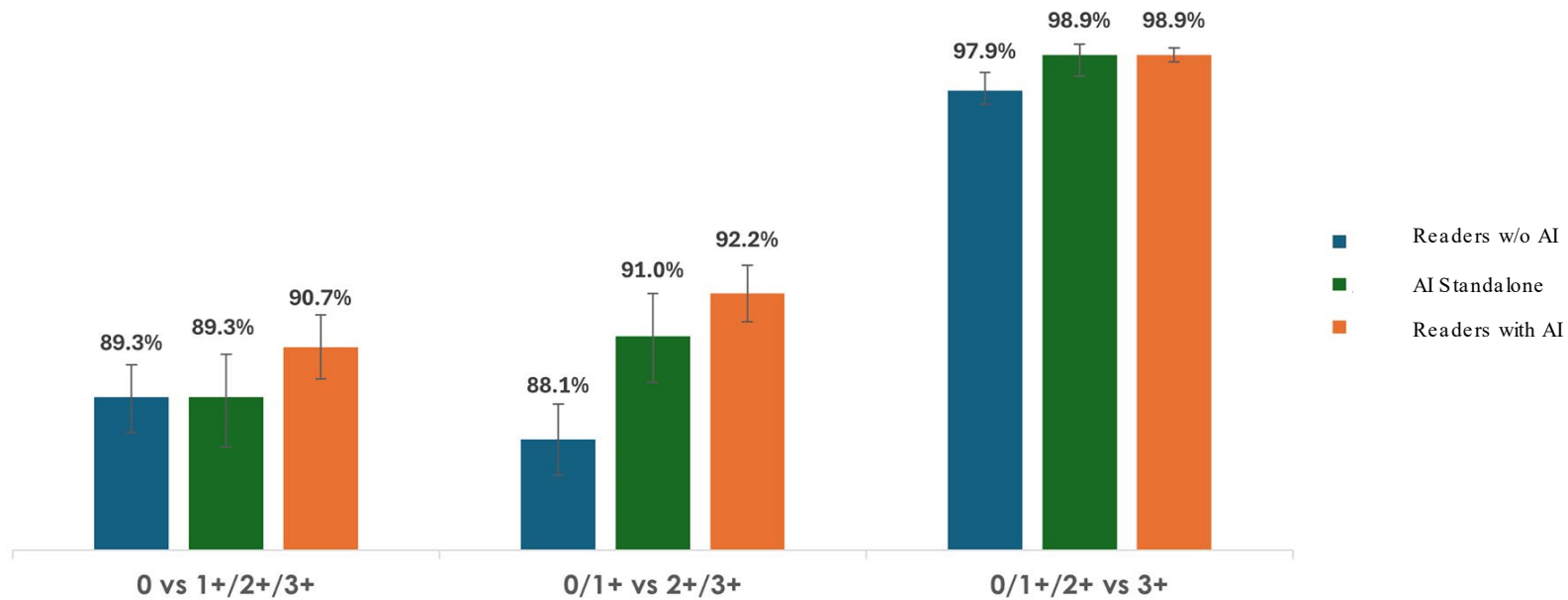
Overall Accuracy



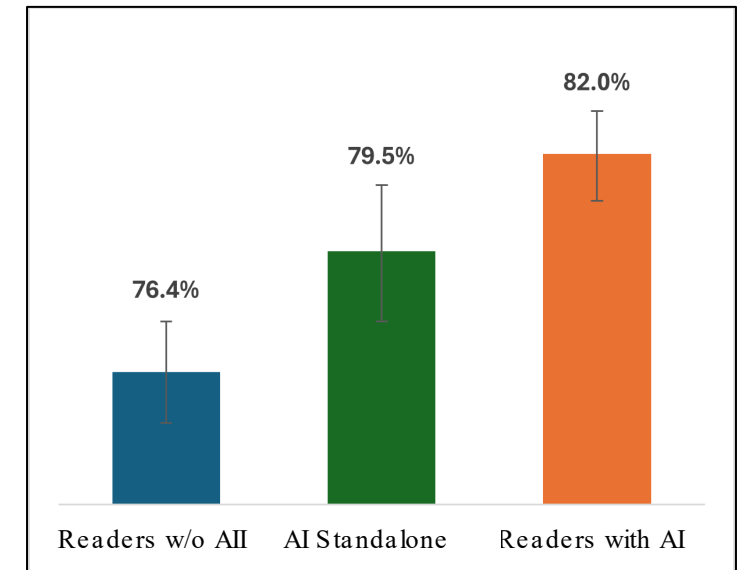
- **82%** overall agreement with GT when assisted by the AI vs. **76.4%** without AI
- Significantly improved agreement with GT at all HER2 cut-offs

# Agreement with Ground Truth: AI and Readers

Accuracy by HER2 cut -offs



Overall Accuracy



The AI standalone accuracy was higher than the readers w/o AI accuracy but lower than the accuracy of readers when supported by AI

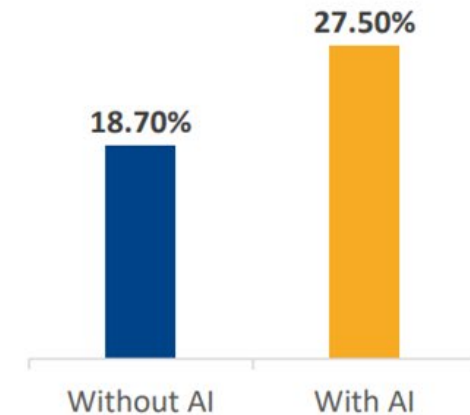


# HER2 2+ cases and FISH Tests

Rate of HER2 1+ and 2+ scored by readers without and with AI

	1+ cases	2+ cases
Without AI	36.2%	17.2%
With AI	44.8%	10.1%
Change	<b>+8.6%</b>	<b>-7.1%</b>

Percentage of FISH positive cases from cases scored by readers as 2+



**A decrease of 41% in the required number of FISH tests**

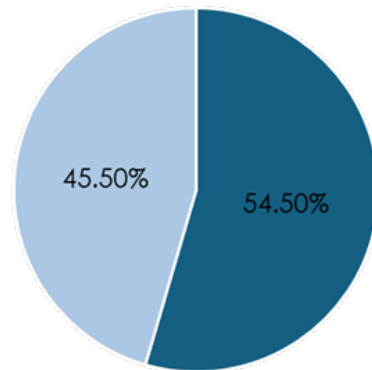
\* Data from Cambridge University Hospitals NHS site, Presented at the ECP 2024

AI assistance led to a decrease in the ISH tests, thus a decrease in TAT to patients' results.

# Pathologist Feedback Survey

## Satisfaction

100% of pathologist were satisfied with the application

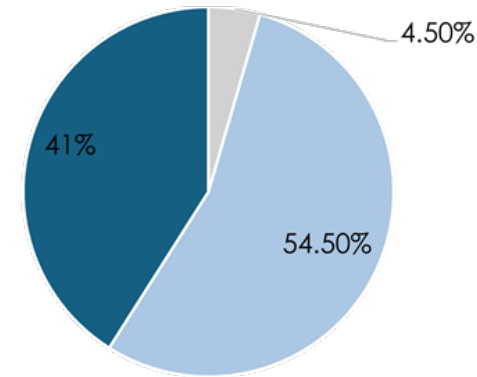


■ Highly satisfied ■ Somewhat satisfied

How satisfied were you with the Ibex application?

## Adoption

21/22 pathologists would prefer using Ibex Breast HER2 instead of their standard of care



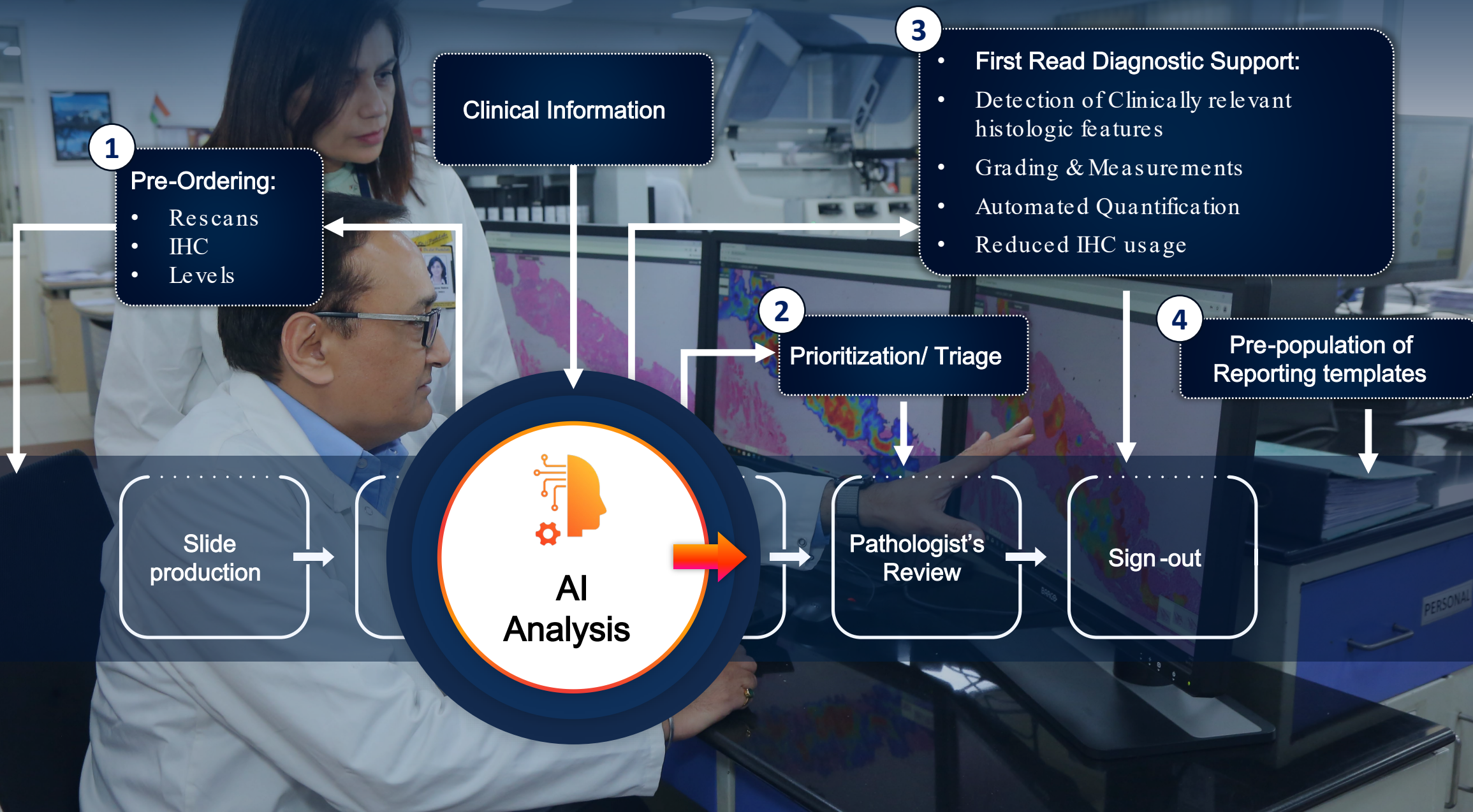
■ Not very motivated ■ Somewhat motivated ■ Very motivated

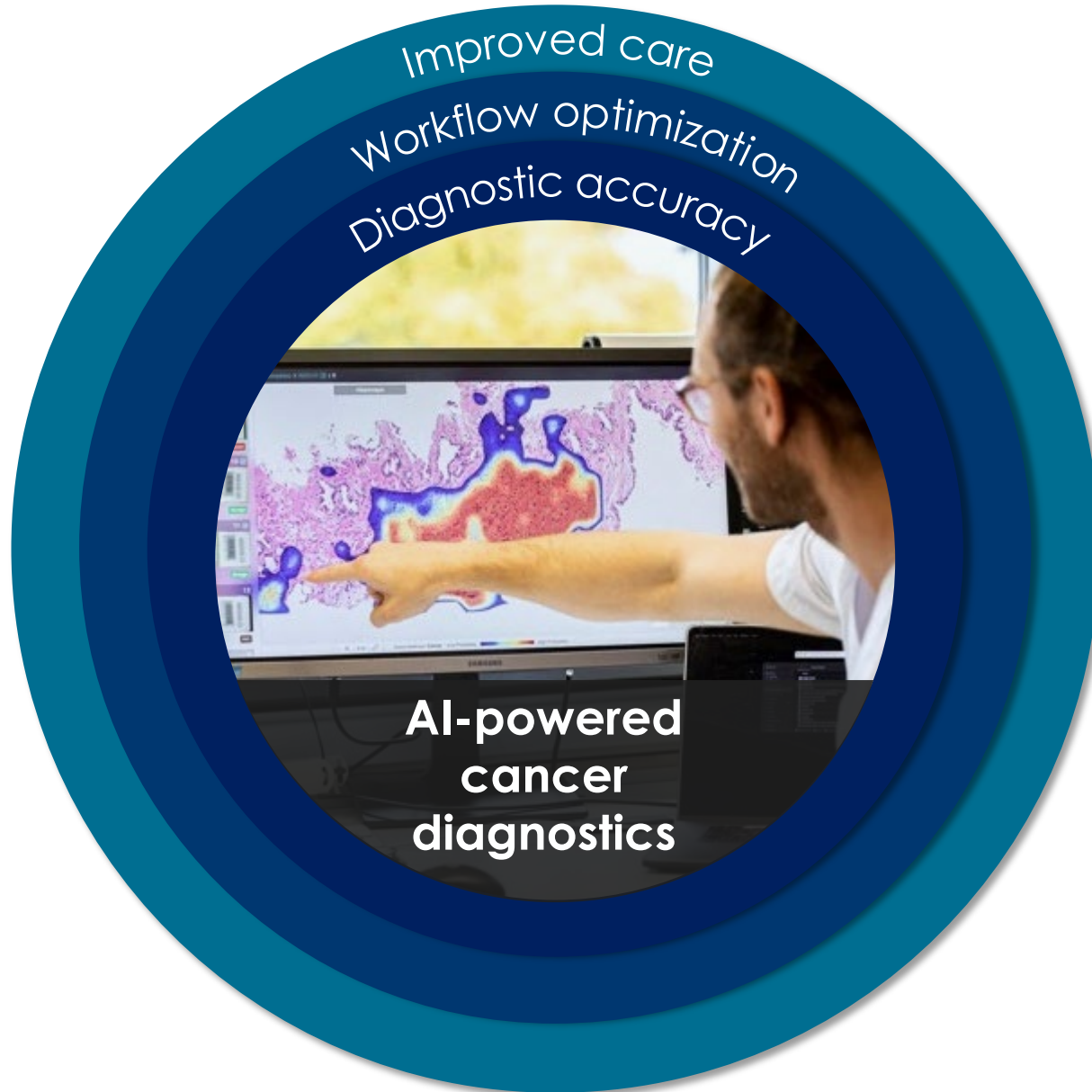
How motivated are you to keep using the Ibex application instead of using your SoC practices?

- All Pathologists felt more confident about their scoring accuracy when assisted by the AI
- All Pathologists felt more consistent in their HER2 scoring when assisted by the AI



# AI Driven Pathology Workflow





- Improved **accuracy**
- **Reduced error rate** and nearly eliminated missed cancers
- Improved **productivity**
- Shorter **turnaround** times
- Reduction of **IHC ordering**
- Improved **IHC quantification**: accuracy, subjectivity, reproducibility
- Ready for integration with scanning platforms, pathology workflow and lab information software
- Improved **lab workflows** with AI insights: Breast IC/DCIS detection, TILS, ALI, microcalcifications & more...
- **Reduced physician burnout** with better working experience and alleviated workloads



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