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## Real-Time Self-Supervised Ultrasound Image Enhancement Using Test-Time Adaptation for Sophisticated Rotator Cuff Tear Diagnosis

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### Introduction and Background

Ultrasound imaging is widely used in clinical diagnostics due to its affordability, safety, and real-time capability; however, its intrinsic low resolution and speckle artifacts limit diagnostic reliability, particularly for computer-aided diagnosis (CAD). Supervised learning methods for ultrasound image enhancement are restricted by the impracticality of acquiring paired clean and degraded images, while existing self-supervised or zero-shot approaches suffer from slow inference, hindering real-time clinical deployment. To address these constraints, this study proposes a real-time self-supervised enhancement framework using test-time adaptation (TTA) to improve both image quality and rotator cuff tear (RCT) diagnostic performance.

### Material and Method

An ultrasound dataset of 20 patients with pixel-level RCT annotations was collected under IRB approval. The proposed framework consists of two stages: (1) pretraining on external natural-image data (STL-10) using synthetic degradations and MSE-based restoration, and (2) test-time adaptation during inference using perceptual VGG-feature loss to refine enhancement on real ultrasound input. A lightweight CNN with NAF blocks enables efficient computation. Image-quality metrics included contrast-to-noise ratio (CNR), generalized CNR (gCNR), and NIQE-K. Segmentation performance was assessed using SAM2 to quantify the effect of enhancement on RCT delineation.

### Results

Three TTA iterations yielded the optimal balance between performance and speed. Compared with zero-shot and self-supervised baselines (ZSSR, DIP), the proposed method achieved the highest CNR, gCNR, and lowest NIQE-K, demonstrating superior enhancement quality. Segmentation accuracy improved by 13.4%, while overall image-quality improvement reached up to 18%. Importantly, the method achieved real-time performance ( $\approx 5$  FPS,  $< 1$  s inference) with fewer parameters than competing models.

### Conclusions

This study presents a real-time self-supervised ultrasound enhancement framework that effectively improves both image quality and RCT segmentation performance without requiring paired training data. By combining domain-agnostic pretraining with test-time adaptation, the method enables clinically feasible, rapid enhancement suitable for integration into ultrasound imaging workflows.



Figure & Table 1.

**TABLE I**  
QUANTITATIVE COMPARISONS OF DIFFERENT ADAPTATION ITERATIONS IN OUR TEST-TIME ADAPTATION FRAMEWORK IN TERMS OF CNR, gCNR, NIQE-K, AND INFERENCE TIME ON THE RCT ULTRASOUND IMAGES

# of adaptation iteration	CNR	gCNR	NIQE-K	Inference time (ms)
three	<b>1.2521</b>	<b>0.7763</b>	0.5824	<b>218.81</b>
five	1.2488	0.7618	0.5820	363.24
seven	1.2386	0.7479	0.5815	511.37
ten	1.2187	0.7332	<b>0.5811</b>	727.40

The best performance is in bold.

**TABLE II**  
QUANTITATIVE COMPARISONS OF OUR APPROACH WITH OTHER METHODS IN TERMS OF CNR, gCNR, NIQE-K, RCT SEGMENTATION PERFORMANCE, INFERENCE TIME, AND THE NUMBER OF PARAMETERS ON THE RCT ULTRASOUND IMAGES

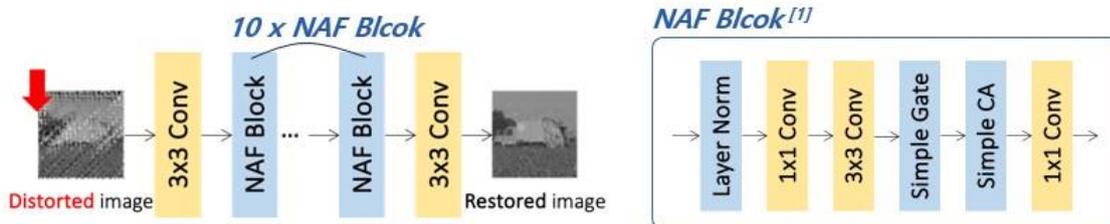
Methods	Original	ZSSR	DIP	Ours-3
CNR	1.061	0.9446	1.1196	<b>1.2521</b>
gCNR	0.6781	0.6374	0.6667	<b>0.7763</b>
NIQE-K	0.5833	0.5831	0.5838	<b>0.5824</b>
RCT Segmentation	0.2666	0.1949	0.2448	<b>0.3022</b>
Inference time (s)	-	6.917	11.561	<b>0.219</b>
# of parameters (MB)	-	0.850	7.500	<b>0.056</b>

The best performance is in bold.

Figure & Table 2.

## Network Architecture and Training Strategy

### Pre-training



### Optimization settings

- ✓ ADAM optimizer
- ✓ Number of epochs: 100
- ✓ Learning rate : 1e-4
- ✓ Loss function : Mean Squared Error (L2)

### Dataset

- ✓ STL-10 Dataset  
(Natural images, Classification-specific dataset)
- ✓ Distortions :
  - Random downsampling
  - Gaussian noise
  - Gaussian blurring

[1] Chen, Liangyu, et al. "Simple baselines for image restoration." *European conference on computer vision*. Cham: Springer Nature Switzerland, 2022.