Decoupled Training for Semi-supervised Medical Image Segmentation with Worst-Case-Aware Learning

1 Visual Comparison

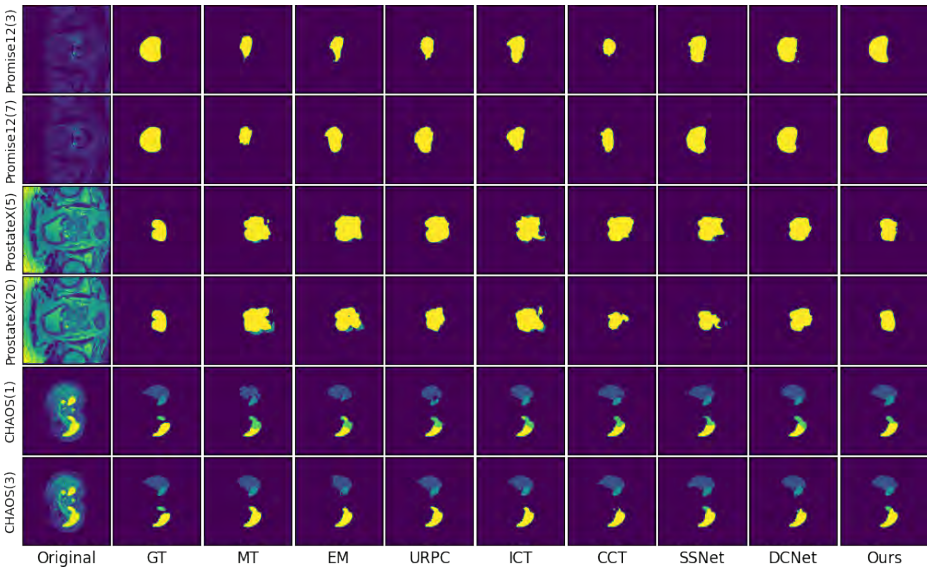

Fig. 1: Visual comparison with different state-of-the-art methods on PROMISE12, ProstateX, and CHAOS datasets for different percentages of labeled data. The first column represents the original image, the second column represents the ground truth (GT) image, the last column represents the output of the proposed method, and the remaining columns represent the output of the SOTA methods.

2 More Ablation Study

	3 (8%)		**7 (20%)**	
λ_{ws}	**DSC↑**	**HD95↓**	**DSC↑**	**HD95↓**
0.3	0.770	3.46	0.812	3.02
0.5	**0.791**	**3.37**	**0.827**	**2.51**
0.7	0.787	3.47	0.818	2.59
1	0.771	3.94	0.810	2.70

Table 1: Ablation study on different values of coefficient of strong augmentation loss on the proposed method for the PROMISE12 dataset. Model achieved the best performance at $\lambda_{ws} = 0.5$ for both the cases of 3 and 7 of the PROMISE12 dataset.

	3 (8%)		**7 (20%)**	
λ_{wa}	**DSC↑**	**HD95↓**	**DSC↑**	**HD95↓**
1	0.786	3.78	0.813	2.96
1.5	0.775	4.01	0.815	3.07
2	**0.791**	**3.37**	**0.827**	**2.51**

Table 2: Ablation study on different values of coefficient of worst-case-aware loss on the proposed method for the PROMISE12 dataset. Model achieved best performance at $\lambda_{wa} = 2$ for both the cases of 3 and 7 of the PROMISE12 dataset.