

Temporal Modeling Recommendations

Project: Temporal Deep Learning for Automated Grading of Retinal Inflammation in FA

Tymo van Rijn – 1057297

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1 Scope of This Advice Note

This short advisory note summarises the key findings from Week 1, Week 2 and Week 3 analyses and the first sequential experiments. It supports supervisors and future project members in deciding *which temporal strategy* to prioritise during the remaining development weeks.

2 Summary of Evidence

| Evidence | Key insight |
|-------------------------------------|---|
| Week 1 analysis presentation (PDF) | Later frames carry more discriminative signal; naïve averaging improves <i>window defect</i> & pooling but can dilute staining information. There also is a huge variability in number of frames, with big outliers. The intensity over time probably won't give us a lot of information for classifying the different HyperF_Types. Clinicians show in literature that information lies in temporal behavior, not just static intensity. |
| Week 2 timestamp analysis (PDF+CSV) | 85% of frames lie in the late (>60 s) phase; exam durations span 1–30 min; temporal coverage is highly unbalanced. These elapsed times do not correspond with the actual FA phases clinicians use, so binning them in that way would not make sense. The <i>(new) last frame only</i> baseline outperforms the <i>last 2 frames averaged</i> baseline. Binning is used across different other studies, and seemed to get good results |

Week 3 LSTM binning results

The LSTM results showed an improvement compared to the *last frame* baseline, using the binning strategy. Number of binning influences the results, higher *n_bins* seems to result in better model performance. The binning strategy being used also influences the results, for now the strategy where "logic" is applied, performs best.

3 Recommendation Matrix

| Option | Effort | Expected gain | Risks | Recommendation |
|---|--------|------------------|----------------------------------|---|
| Phase-aware bins (Choroidal → Late) | Medium | Medium | Phase cut-offs uncertain | Investigate if timestamp OCR stabilises & adopt if robust |
| Full-sequence LSTM (≥ 10 frames) | Medium | Potentially high | Overfit, variable-length padding | Since higher <i>n_bins</i> seems to help, this would be a logical next step |
| Using GRU instead of LSTM | Medium | Low | Same results | Might be waste of time, since principle is the same |

4 Concrete Next Steps (4 weeks)

1. Finalize bin implementation

- Implementing an elapsed time OCR-extracted bins approach.
- Run some more tests using different *n_bins*.

2. Implement full-sequence LSTM

- This increases the number of frames used, could include more "blur", but could also benefit from more temporal data.
 - Probably excluding exams that have a very high amount of frames, will have to find out what is an appropriate *n_frames* by using my already existing analysis for *frame distribution*.
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