

# U-Net Transplant

# The Role of Pretraining for Model Merging in 3D Medical Segmentation

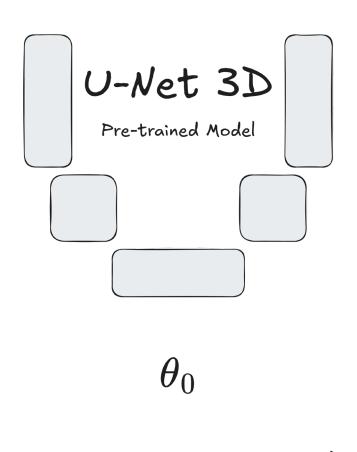
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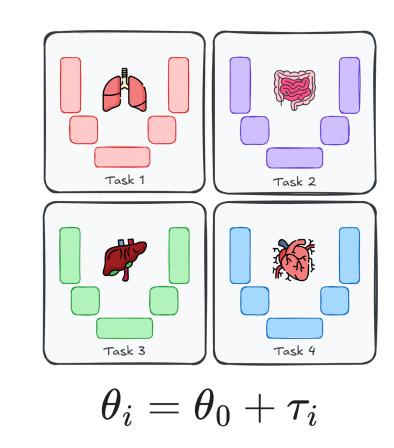
\*equal contribution, †equal supervision, \_ presenting the poster

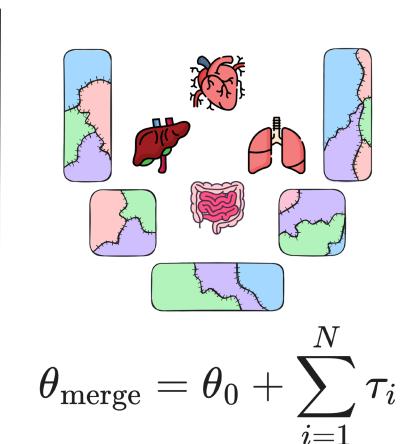


### 1. Model Merging

Model merging is a technique that combines the weights of multiple neural network models into a single unified model that inherits strengths from each component.







1. Pre-train a Model

2. Finetune ¥ tasks

3. Merge models

Starting from a pretrained model, we can finetune it multiple times for each different task. We can then merge all these models into a single one, able to perform all the tasks in a single forward pass.

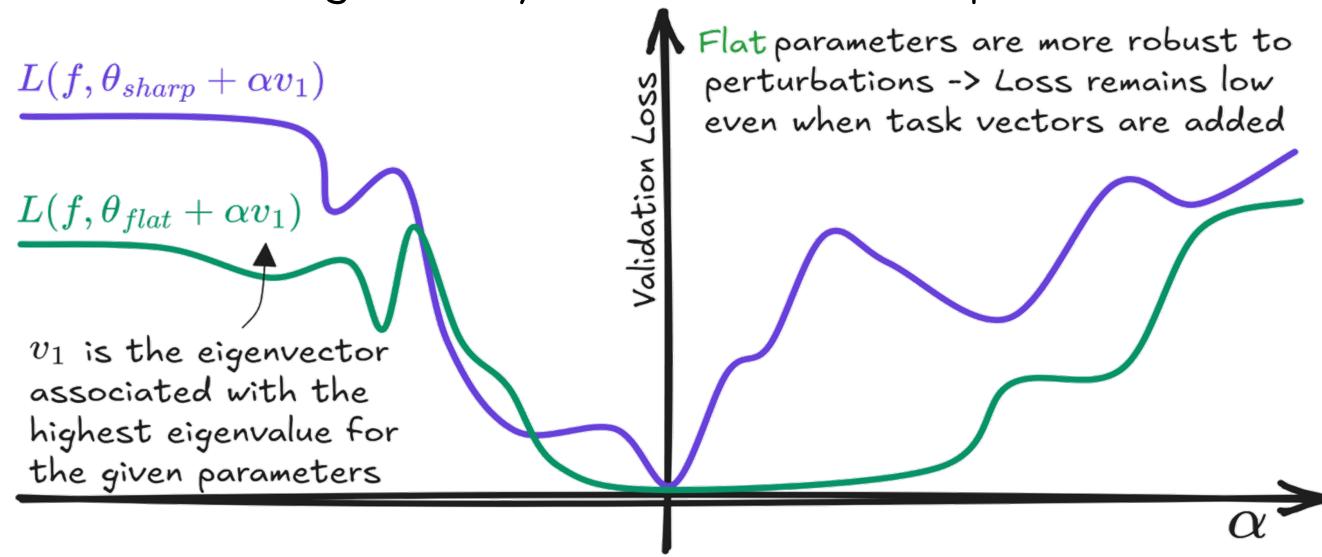
### 2. Role of Pretraining

Research has focused only on post-training phase, about task vectors, by proposing different merging methods and advanced algorithms to reduce task-wise interference.

Can we do something during the pretraining to ease the merging process?

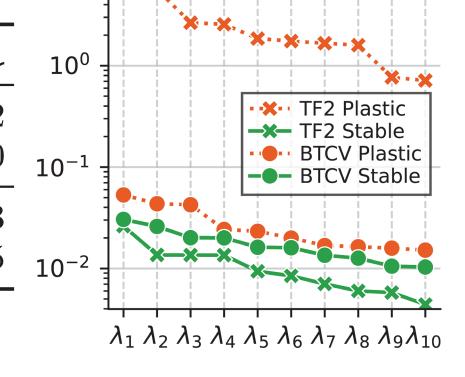
## 3. Biasing towards Wider Minima

The entire spectrum of eigenvalues of the Hessian matrix is related to the geometry of the loss landscape.



A larger maximum eigenvalue suggests that the loss landscape is steeper along at least one dimension, which corresponds to a sharper minimum. Smaller eigenvalues suggest wider minima because the surface of the loss changes less drastically in those directions.

Regime	Dataset	BS	DO	$\mathbf{L}\mathbf{R}$	Dice↑	$\sum \lambda_i \downarrow$	$\lambda_1 \downarrow$
Stable Plastic	Cui	4 8	0.5 0.0	$10^{-3} \\ 10^{-4}$	34.93 42.68	$0.57 \\ 40.71$	0.02 6.00
Stable Plastic	AMOS	4 8	0.5 0.0	$   \begin{array}{c}     10^{-3} \\     10^{-4}   \end{array} $	43.76 46.87	2.30 58.46	0.03 0.05



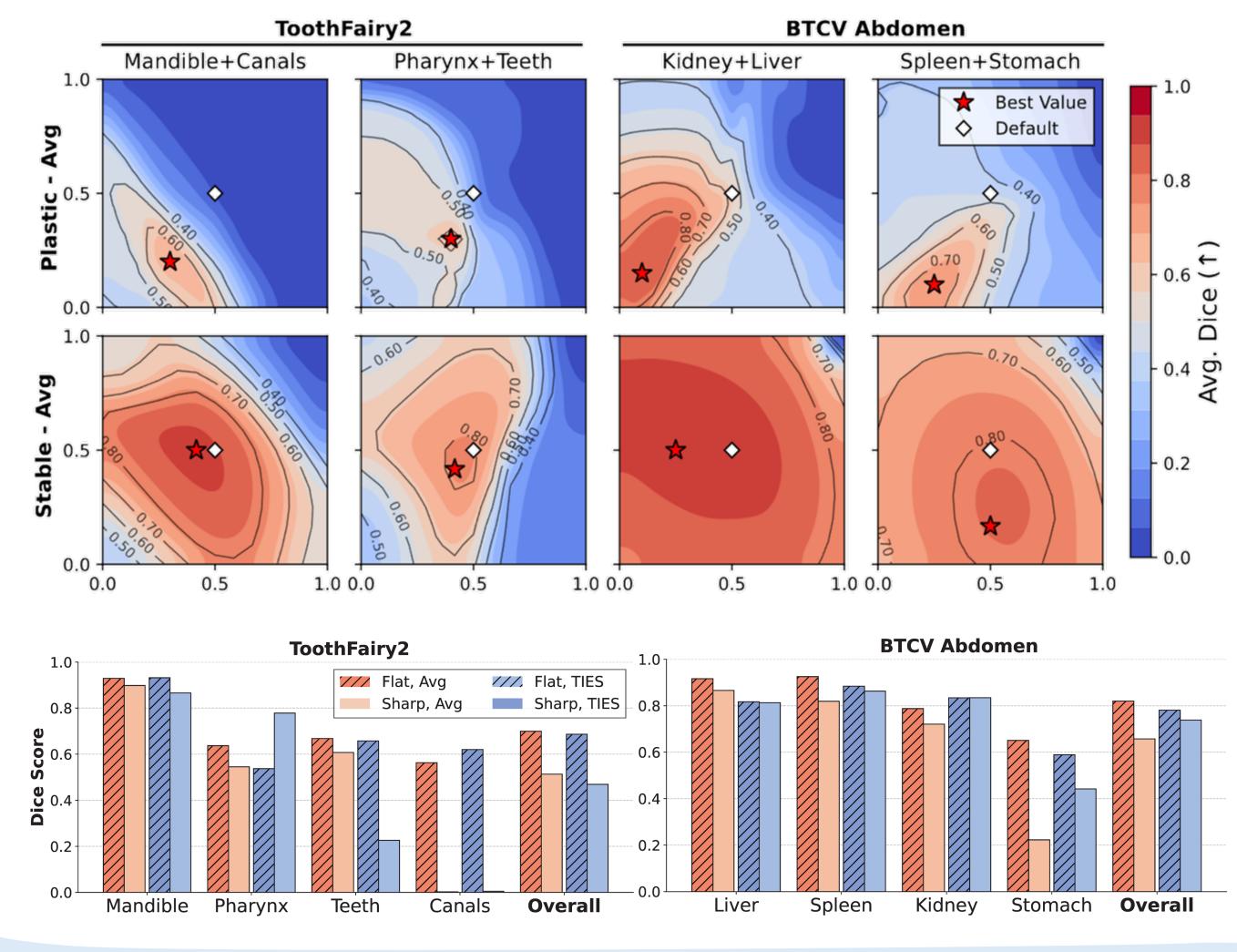
#### 4. Datasets

We chose four datasets, two for pretraining and two for finetuning different tasks. Two of them are about the abdominal region (AMOS and BTCV Abdomen), two are about the maxillofacial area (Cui and ToothFairy2).

Dataset	Modality	Volumes	Structs	Shape
AMOS [12] ( <b>pre-training</b> ) BTCV Abdomen [15]	$\operatorname{CT}$	240 30	15 13	$148 \times 533 \times 560$ $125 \times 512 \times 512$
Cui [6] ( <b>pre-training</b> ) ToothFairy2 [3]	CBCT	151 480	42 42	$322 \times 402 \times 402$ $169 \times 356 \times 375$

### 5. Wide Minima Improve Merging

Models finetuned from a stable pretraining phase show better performance and greater stability when merged.



#### 6. Results

Results show that merging two tasks yields results similar to performing a joint training of the two tasks simultaneously and that we can merge up to four tasks without degrading performance significantly.

Dataset	$oldsymbol{w}$	Merging Strategy	Spl. Kid	Spl. Liv.	$_{ m Spl.}$	Kid Liv.	Kid Sto.	Liv. Sto.	Avg.
BTCV Abdomen	Default 🔷	Average [10] TIES [26]	91.41 82.80	92.18 90.76	80.61 76.83	90.85 88.69	77.18 58.56	80.91 76.69	85.52 79.05
	Best 🖈	Average [10] TIES [26]	92.64 92.42	92.22 91.88	82.09 81.55	91.01 91.07	78.97 77.72	81.80 81.04	86.45 85.95
	-	Joint	91.40	93.34	78.38	92.31	91.79	88.86	89.35
Dataset	$oldsymbol{w}$	Merging Strategy	Mand. IACs	Mand. Teeth	Mand. Phar.	IACs Teeth	IACs Phar.	Teeth Phar.	Avg.
ToothFairy2	Default 🔷	Average [10] TIES [26]	89.54 88.70	82.55 79.89	87.70 88.96	56.08 58.51	57.08 63.44	81.27 73.72	75.70 75.54
	Best 🖈	Average [10] TIES [26]	89.67 89.24	82.78 82.33	91.89 91.97	68.16 67.94	75.19 68.91	81.27 81.07	81.49 80.24