

Graph-Based Multimodal AI for Personalized Melanoma Risk Assessment and Skin Lesion Analysis

Anup Saha¹ | Laura Serra-García^{2 3 4} | Solomon Chibuzo Nwafor¹ | Nuria Ferrera³ | Clément Lenoir³ | Rafael Garcia¹ | Josep Malvehy^{2 3 4 5}

¹ VICOROB, University of Girona ² Hospital Clínic de Barcelona ³ IDIBAPS
⁴ University of Barcelona ⁵ CIBERER, Instituto de Salud Carlos III

From isolated lesion images to patient-aware melanoma risk modelling

Clinical Context and Objective

Clinical Gap

- Image-only models usually assess lesions independently.
- Longitudinal evolution and patient-specific risk factors are often omitted

Objective

Link temporal lesion change, within-patient lesion context and between-patient similarity in one multiscale graph framework

Multimodal Cohort and Data

>1,000
Patients

iToBoS and HARMONY cohort

>3,000
Patients

expected with ongoing expansion



Clinical
photographs



Dermoscopic
images



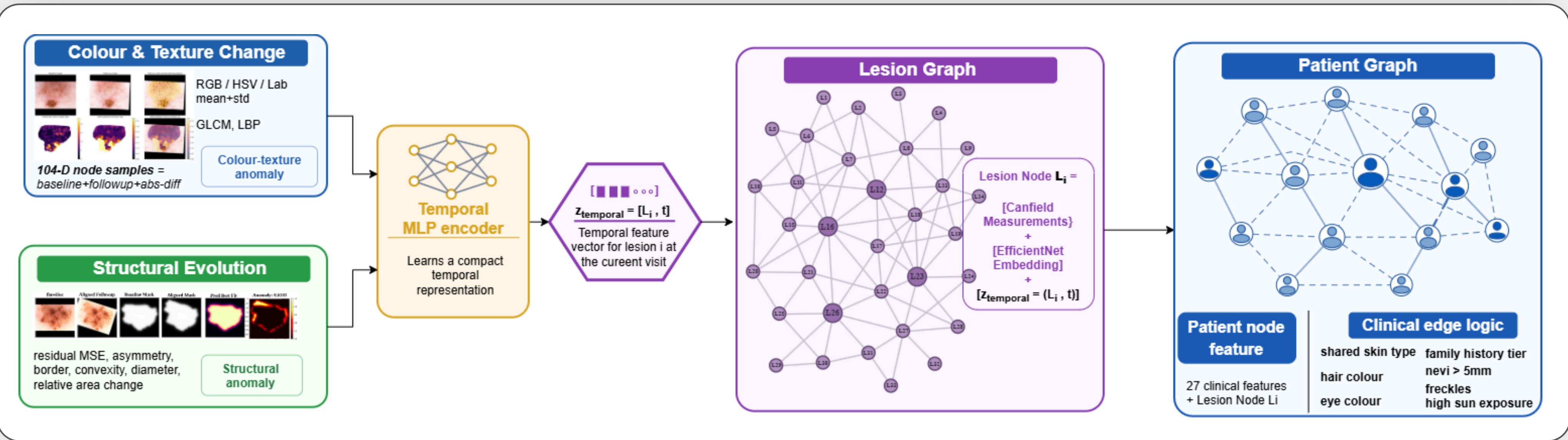
Sequential
visits



Clinical
metadata

Metadata examples: age, sex, geographic background, sun exposure, melanoma history and nevus count.

Multiscale Graph Framework



Preliminary Module-level Evidence

Lesion Graph

Graph setup

- Node: one lesion at one exploration
- Features: Canfield measurements + EfficientNet embedding
- Edges: top-k appearance similarity
- Output: lesion risk score

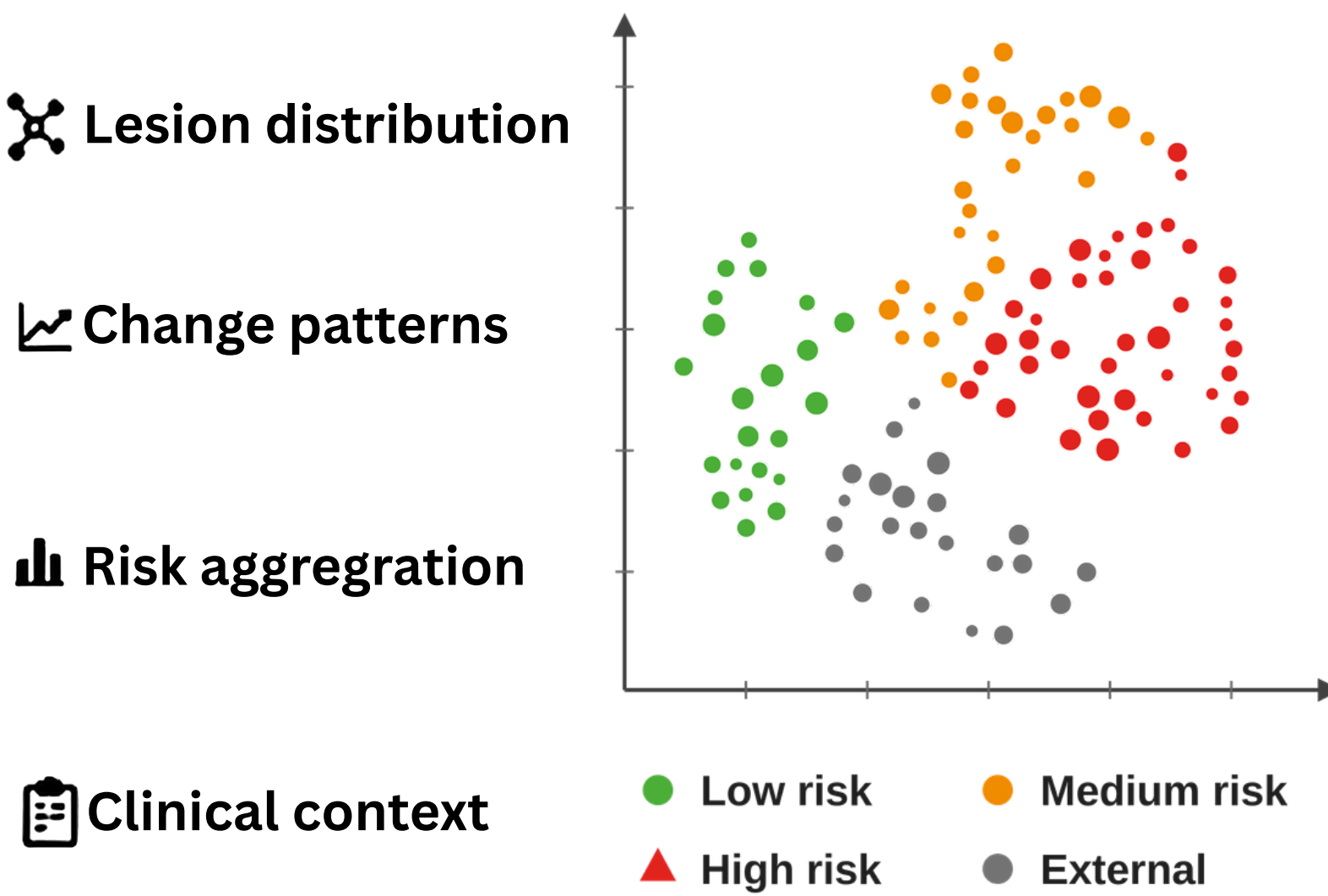
AUC

MLP 0.9265
SAGE 0.9388

Sensitivity at 90% Specificity

MLP 0.3649
SAGE 0.7845

Patient Embedding Space



ONE FRAMEWORK. TWO CLINICAL QUESTIONS.

Which lesion needs review?

lesion risk • ugly duckling • temporal anomaly

Which patient needs closer surveillance?

personalized risk • clinical context • graph relations