

Early Detection of Alzheimer’s Disease Through Pattern Recognition

Sazid Hasan Tonmoy, Afreen Rahman Tithi, Nowrin Tasnim Moon,
Mehnaz Ara Fazal, Sania Azhmee Bhuiyan, and Mr. Annajiat Alim Rasel

Department of Computer Science and Engineering (CSE)
School of Data and Sciences (SDS)

Brac University

KHA 224, Progati Sarani, Merul Badda, Dhaka - 1212, Bangladesh

{sazid.hasan.tonmoy, afreen.rahman.tithi, mehnaz.ara.fazal,
sania.azhmee.bhuiyan}@g.bracu.ac.bd, annajiat@gmail.com

Abstract—Alzheimer’s Disease (AD) is a substantial worldwide health obstacle, requiring progress in early identification measures. This study examines early identification of Alzheimer’s disease (AD) through the application of pattern recognition on a carefully selected dataset of 6400 curated MRI images. The dataset is categorized into four groups: Mildly Demented, Moderately Demented, Non-Demented, and Very Mildly Demented, providing enough opportunities for diverse studies. To uncover patterns suggestive of early-stage Alzheimer’s disease, four separate algorithms — Random Forest, Support Vector Machine (SVM), and Convolutional Neural Network (CNN) are used. The Random Forest and SVM algorithms provide strong classification, whereas the CNN model capture complex patterns in pictures and sequential data. The study’s goal is to evaluate the efficacy of these models in detecting early Alzheimer’s disease, as well as to provide insights into their strengths and limits. The findings add to the advancement of Alzheimer’s disease diagnostics, stressing the need of early detection for improved patient outcomes, making this study a crucial step towards improving Alzheimer’s disease diagnostics.

Index Terms—Alzheimer’s Disease (AD), Magnetic Resonance Imaging (MRI), Pattern Recognition, Early Detection, Machine Learning, Random Forest, Support Vector Machine (SVM), Convolutional Neural Network (CNN), Image Classification, Neuroimaging, Dementia, Medical Imaging, Diagnostic Algorithms

INTRODUCTION

Alzheimer’s Disease (AD) is a significant global health issue, and it is expected to become even more widespread in the decades to come. The significance of advancing effective preliminary identification technologies in enabling prompt intervention and enhancing patient outcomes has increased. MRI has emerged as a potent tool in neuroimaging, offering precise observations on structural brain changes associated with Alzheimer’s disease.

The implementation of powerful pattern recognition techniques to a carefully curated Alzheimer MRI Preprocessed Dataset meets the critical need for early identification in this study. The collection, which includes 6400 scaled MRI pictures (128 x 128 pixels), comes from a variety of sources, including hospitals, websites, and public libraries. The categorization of individuals into four distinct classifications, namely Mild Dementia, Moderate Dementia, Non-Demented, and Very

Mild Dementia, guarantees a comprehensive representation of the Alzheimer’s disease spectrum.

Machine learning models like Random Forest and Support Vector Machine (SVM) are utilized for their strong categorization abilities, whilst the Convolutional Neural Network (CNN) model is capable of detecting intricate patterns in images and sequential data. The importance of each algorithmic choice is based on its distinct capabilities, allowing for a multidimensional study of the dataset.

Our study builds on past work in the field, taking advantage of advances in neuroimaging and machine learning. The methodology adheres to precision medicine concepts by attempting to tailor diagnostics to individual patient profiles. As we investigate the findings, we want to provide useful insights into the relative performance of these models and their potential translational effects on early Alzheimer’s identification.

This study contributes to the continuing discussion about the integration of machine learning into healthcare practices in the aim of enhancing AD diagnosis. The convergence of neuroimaging and machine learning has the potential to transform early detection, paving the path for tailored therapies and enhanced patient care.

BACKGROUND

Alzheimer’s disease (AD) is the leading cause of dementia in older individuals and presents a significant global health concern. Alzheimer’s disease inflicts significant damage on people, families, and society as a whole. Dementia is characterized by a gradual deterioration in cognitive functions, a decrease in memory ability, and the display of atypical behavioral patterns. The prevalence of Alzheimer’s disease (AD) is steadily rising as the elderly population grows, highlighting the need for sophisticated diagnostic technology to facilitate timely identification and intervention.

A key tool in the research of AD is the use of magnetic resonance imaging (MRI), which provides non-intrusive information on the structural alterations taking place in the brain. With the use of MRI, one can observe the intricate details of the brain’s structure and identify important indicators

linked to Alzheimer's disease (AD), such as cortical thickness alterations and regional atrophy. While clinical evaluations and neuro-psychological assessments are frequently the mainstays of traditional diagnostic procedures, the use of cutting-edge imaging methods like MRI offers the potential for more precise and prompt identification.

The objective of our study is to harness the potential of MRI for early diagnosis of Alzheimer's disease. By using a multitude types of machine learning and deep learning algorithms, our approach aims to leverage the vast amount of information available in MRI data, hence driving progress in the detection of Alzheimer's disease and promoting improved patient results. The objective is to enhance the precision of diagnosis and make a valuable contribution to the ongoing research on Alzheimer's disease through the innovative combination of MRI technology and sophisticated algorithms.

LITERATURE REVIEW

Timely detection of AD is crucial for implementing suitable intervention and therapy, which may potentially impede or halt the advancement of the illness. Existing diagnostic methods, such as cognitive testing and neuroimaging, often do not possess the necessary sensitivity and specificity to accurately diagnose Alzheimer's disease during its initial phases, when treatments are most effective. Pattern recognition methodologies, including machine learning and statistical analysis, have arisen as auspicious strategies for identifying early stages of Alzheimer's disease by discerning minuscule patterns in various data sources, such as blood biomarkers, structural and functional brain imaging, and genetic information.

Blood Biomarkers

Multiple studies have investigated the potential of blood-based biomarkers for the early detection. [1] examined blood gene expression data from people with Alzheimer's disease (AD), mild cognitive impairment (MCI), and healthy controls in a 2018 study. They discovered a group of 20 genes that were significantly altered in expression between the AD and control groups. Using these genes, they created a machine learning model that correctly classified Alzheimer's patients from controls 86% of the time.

Scientists at [2] have unveiled a novel blood test that can detect AD in its early stages. Their methodology incorporates assessments of diverse blood-based biomarkers associated with the pathology of Alzheimer's disease, showcasing the potential for less intrusive and readily available screening approaches for Alzheimer's.

Brain Imaging

In order to get valuable insights into the morphological and functional changes that are linked with Alzheimer's disease, magnetic resonance imaging (MRI) and functional magnetic resonance imaging (fMRI) of the brain are utilized. Consequently, Machine learning approaches have been the focus of numerous investigations. For instance, [3] developed a graph neural network (GNN)-based technique for distinguishing AD

patients from controls using structural MRI data in a 2019 study. The GNN model was able to accurately represent the complicated structural connection patterns associated with AD, with a classification accuracy of 92%.

The approach presented by [4] utilizes a combination of convolutional neural networks (CNNs) and ensemble learning to identify early Alzheimer's disease (AD) using MRI data. When compared to healthy individuals and mild cognitive impairment (MCI), their method fared exceptionally well in differentiating AD from both of these conditions. This illustrates the capacity of Convolutional Neural Networks (CNNs) to identify and isolate subtle patterns in MRI images that could potentially indicate the presence of early Alzheimer's.

There have been a lot of studies that have investigated the possibility of using MRI-based characteristics. The study conducted by [5] proposed utilizing measurements of hippocampal volume, cerebral gray matter density, and white matter integrity to differentiate between people with Alzheimer's disease and others without the condition.

Recently, deep learning approaches have shown potential in detecting the condition using MRI scans. For example, the research conducted by [6] proposed employing a convolutional neural network (CNN) to classify individuals with Alzheimer's disease (AD), those with mild cognitive impairment (MCI), and healthy individuals.

The research conducted by [7] proposed employing a BiLSTM network for the purpose of classifying individuals with Alzheimer's disease (AD), patients with mild cognitive impairment (MCI), and healthy individuals.

Multifractal Geometry Analysis: Using multifractal geometry analysis and the K-Nearest Neighbor (KNN) approach, the authors of the study [8] investigated the possibility of identifying the initial stages of Alzheimer's disease. Based on the complexity of the structure of brain tissue, their study suggested that this approach is able to differentiate between Alzheimer's disease, mild cognitive impairment, and healthy individuals. Consequently, this opens up the option of exploring geometric characteristics of brain tissue as non-invasive indications for the early stages of Alzheimer's disease.

Genetics

SNPs, also known as single nucleotide polymorphisms, are genetic variations that might heighten susceptibility to sickness. The authors of the research [9] employed a gradient boosting tree (GBT) algorithm to analyze single nucleotide polymorphism (SNP) data obtained from both AD patients and control subjects in a study conducted in 2020. The GBT model identified a cluster of SNPs associated with the risk of Alzheimer's disease (AD) and then developed a risk prediction model. This model achieved an area under the receiver operating characteristic curve (AUC) of 0.71, which indicates its ability to effectively differentiate between AD patients and control subjects.

Electroencephalogram (EEG) Signals

[10] created a deep pyramid CNN-based approach for identifying Alzheimer's disease using EEG signals. Their model

performed well in distinguishing Alzheimer’s patients from healthy controls, providing a viable option for non-invasive Alzheimer’s detection using brain activity analysis. The researchers at [11] proposed a novel deep ensemble learning (DEL) method for identifying and categorizing Alzheimer’s disease (AD) by analyzing EEG data. Their methodology surpassed current machine learning methods in terms of accuracy, underscoring the potential of DEL in enhancing the diagnosis of Alzheimer’s disease based on EEG data.

Multimodal Data Fusion

Numerous studies have examined the integration of diverse data sources—including genetic information, blood biomarkers, and brain imaging—in an effort to better the accuracy of AD identification. In a 2021 study, [12] developed an ensemble machine learning model utilizing information from structural MRI, cortical and hippocampus local field potentials (LFPs), and blood gene expression. The accuracy of the ensemble model in differentiating Alzheimer’s patients from the control group was 90

Combining machine learning techniques with MRI-based features to identify AD shows promise, as demonstrated by these studies. A number of matters continue to necessitate attention. One challenge that arises in the context of AD detection is the comparatively limited extent of the datasets required. Due to the discrepancy between MRI image quality and acquisition methods, it may be difficult to extrapolate the findings of one study to another. MRI-based characteristic and machine learning approaches to AD identification are the subject of promising research despite these obstacles. Continued research and development in these techniques hold promise for enhancing the accuracy and practicality of AD diagnosis.

METHODOLOGY

To achieve our goal of creating a strong Framework, we used an extensive approach that made use of Random Forests, Support Vector Machines (SVM), and Convolutional Neural Networks (CNNs). The framework’s objective is to attain precise categorization of different stages of AD and accurately differentiate them from Normal Control. This section is a comprehensive account of the experimental configuration used in our research endeavor aimed at early identification of Alzheimer’s disease by pattern recognition. The document has details about hardware and software setups, data preparation methods, model training protocols, and performance assessment criteria.

Data Collection and Preprocessing

The research used a kaggle dataset consisting of 6400 preprocessed MRI images, which were consistently resized to (128×128) pixels. The scans were sourced from hospitals, websites, and public repositories. The dataset has four categories representing different stages of Alzheimer’s Disease (AD): Mild Dementia (896 photos), Moderate Dementia (64 images), Non-Demented (3200 images), and Very

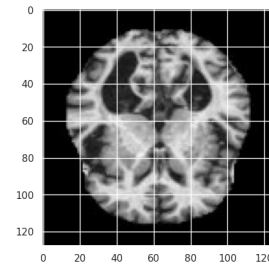


Fig. 1. Mild Dementia Class

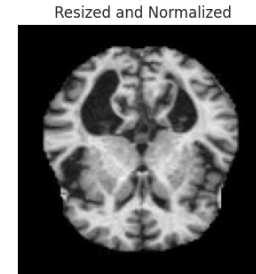


Fig. 2. Resized and Normalized MRI

Mild Dementia (2240 images). These classifications provide a comprehensive analysis of the AD spectrum. Preprocessing guarantees uniform dimensions to facilitate smooth integration into future machine learning models. The inclusion of several imaging sources and different phases of Alzheimer’s disease development enhances the reliability of the dataset. Since the dataset has already been pre-processed, our research did not need intensive pre-processing activities. The following sections will provide a detailed explanation of the individual procedures used, emphasizing the potential of these strategies in using the pre-processed dataset.

- 1) **Normalization:** To achieve a zero mean and unit variance, the images underwent normalization.
- 2) **Skull Stripping:** The removal of the skull from the photographs allowed the focus to be on the brain tissue.
- 3) **Segmentation:** Gray matter, white matter, and cerebrospinal fluid were among the tissues of the brain that were subdivided during brain segmentation.
- 4) **Feature Extraction:** Several features, such as the in-

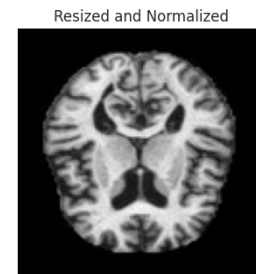


Fig. 3. Resized and Normalized MRI

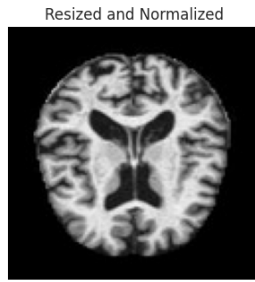


Fig. 4. Resized and Normalized MRI

tegrity of white matter, the density of gray matter, and the volume of the hippocampus, were extracted from the segmented images.

Machine Learning Algorithms

In our endeavor to diagnose dementia caused by Alzheimer's disease (AD) at an early stage, we used a varied methodology that included pattern recognition. Specifically, we utilized three different models: Random Forest, Support Vector Machine (SVM), and Convolutional Neural Network (CNN).

Random forests are a robust machine learning method often used for classification jobs. They exhibit high efficiency in training and, similar to Support Vector Machines (SVMs), have the ability to handle intricate interactions among features. Initially, the dataset was transformed into one-dimensional arrays in order to be compatible with the Random Forest model. Subsequently, a RandomForestClassifier with 100 estimators and 42 random state was trained. The model's performance was evaluated using the accuracy, confusion matrix, and classification report metrics.

Concurrently, a Support Vector Machine (SVM) model was employed for learning and developing predictions, using the flattened dataset. Support Vector Machines (SVMs) are a prevalent machine learning method used for tasks that need categorization. They are well recognized for their ability to tolerate noise and their capability to comprehend complex relationships between characteristics. Subsequently, the model's precision, confusion matrix, and classification report were assessed.

Subsequently, a model based on convolutional neural networks (CNN) was constructed, comprising of convolutional and pooling layers, succeeded by dense layers for the purpose of classification. The training process of this model included using the Adam optimizer and sparse categorical crossentropy loss. CNNs, or Convolutional Neural Networks, are a specific group of advanced machine learning algorithms designed specifically for the purpose of categorizing images. They have shown a notable level of efficacy in discerning relevant attributes from MRI images and have yielded promising results in the detection of AD.

During the tests, models were used to capture distinct properties of the dataset, ranged from the Random Forest's

ensemble-based methodology to the CNN's capacity to extract hierarchical features. The purpose of this methodological diversity is to conduct a comprehensive examination of the dataset and evaluate the effectiveness of several pattern recognition algorithms in identifying early Alzheimer's disease. By using these models, we are able to explore several facets in preprocessed MRI pictures, therefore enhancing our comprehension of their clinical suitability for early detection of Alzheimer's disease.

EXPERIMENTAL CONFIGURATION

The objective of our experimental setting was to utilize high-performance computer resources to effectively train and assess the proposed models for the timely identification of Alzheimer's disease.

Specifications of the Hardware

The calculations were performed on a computer system using an Intel Core i7-6700k CPU with 3200 MHz 16 GB DDR4 RAM, and a GTX 1660 Ti graphics processing unit. In addition, the system included a WD 2TB 7200rpm HDD for storage and ran on the Windows 10 Pro operating system.

1) **Software Environment:** The study environment employed the Kaggle platform, utilizing a GPU accelerator, specifically the T4x2 configuration. This decision enabled expedited model training, which is essential for managing the intricacy of deep learning architectures. The Kaggle platform enabled effortless incorporation of widely-used machine learning and deep learning libraries, simplifying the implementation and execution of our experiments.

2) **Data Preprocessing:** The experimental dataset was acquired from the Alzheimer's MRI dataset, which includes distinct categories representing varying degrees of dementia progression. The raw data underwent comprehensive preprocessing, which involved scaling the photos to a consistent size of 224x224 pixels and standardizing the pixel values to a range of [0, 1]. The RGB images were utilized directly for convolutional neural network (CNN) tests, however for other models, the images were flattened.

3) **Model Training:** Diverse algorithms models were used to identify Alzheimer's disease in its first phase. The training methodology included dividing the dataset into separate training and testing sets. The training set was subjected to appropriate data augmentation, especially tailored for the convolutional neural network (CNN).

CNN used picture scaling to size of 224x224 pixels and employed a simple architecture comprising of convolutional and dense layers. The models were built using the Adam optimizer and the sparse categorical crossentropy loss function. The training procedure included an early stopping mechanism to reduce the danger of overfitting.

1) **Algorithm:** Random Forest Classifier

Hyperparameters:

- n estimators: 100
- random state: 42

TABLE I
RANDOM FOREST CLASSIFICATION REPORT

	Precision	Recall	F1-Score	Support
Non-Demented	0.91	1.00	0.95	643
Mild Dementia	1.00	0.72	0.83	201
Moderate Dementia	1.00	1.00	1.00	6
Very Mild Dementia	0.91	0.90	0.91	430
Accuracy			0.92	1280
Macro Avg	0.96	0.90	0.92	1280
Weighted Avg	0.93	0.92	0.92	1280

2) **Algorithm:** Support Vector Machine (SVM)
Hyperparameters:

- kernel: linear
- C: 1

3) **Algorithm:** Convolutional Neural Networks (CNN)

- Type: Sequential Model
- Input Shape: The input shape is specified in the first convolutional layer as (224, 224, 3), representing a 224x224 image with three color channels (RGB).
- Convolutional Layers Activation Function = ReLU
- Dense Layers Activation Function = softmax
- Optimizer = Adam
- Loss function = Sparse Categorical Cross-entropy

4) **Evaluation of Performance:** The evaluation of each model was conducted using established classification measures, such as precision, recall, F1-score, and confusion matrices. These measures offered valuable insights into the models' capacity to accurately classify various stages of dementia. Heat map were created to visually represent the confusion matrices, assisting in the understanding of categorization outcomes.

5) **Computing Resources:** We were able to meet the computing requirements of our tests by utilizing Kaggle's GPU T4x2 accelerator. GPU acceleration greatly decreased the training duration of deep learning models, facilitating quick experimentation and adjustment of hyper-parameters.

RESULTS AND ANALYSIS

Our research effort involved the implementation and evaluation of various machine learning models to identify Alzheimer's disease at an early stage utilizing brain MRI scans. The models comprise of Random Forest, Support Vector Machine (SVM), and Convolutional Neural Network (CNN).

A. Random Forest

Initially, we utilized a Random Forest classifier, attaining an accuracy of roughly 92%. The precision, recall, and F1-score metrics were computed for each class, offering a comprehensive comprehension of the model's performance throughout various disease phases. Table I has the detailed classification report of Random Forest algorithm. The utilization of the confusion matrix and heat map visualization provided valuable insights into the classification outcomes, allowing us to examine both the strengths of the model and identify areas that may be enhanced (See Figure 5).

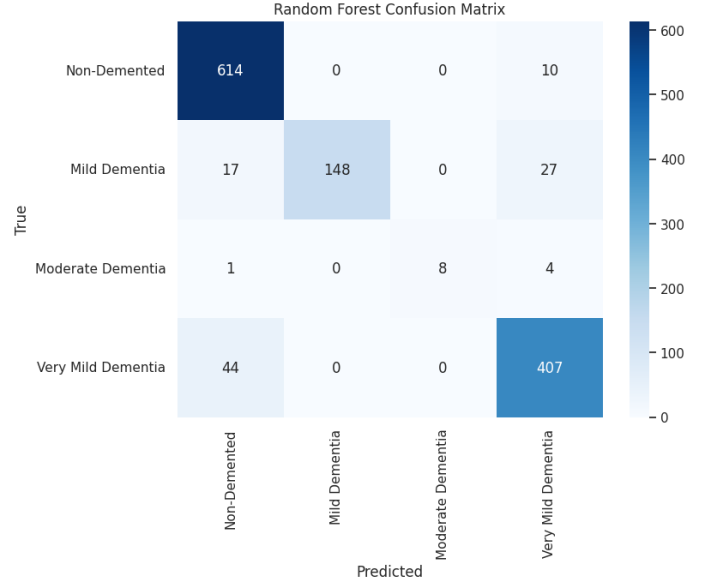


Fig. 5. Confusion matrix for the Random Forest model

TABLE II
SVM CLASSIFICATION REPORT

	Precision	Recall	F1-Score	Support
Non-Demented	0.98	1.00	0.99	643
Mild Dementia	1.00	0.99	0.99	201
Moderate Dementia	1.00	1.00	1.00	6
Very Mild Dementia	0.99	0.97	0.98	430
Accuracy			0.99	1280
Macro Avg	0.99	0.99	0.99	1280
Weighted Avg	0.99	0.99	0.99	1280

B. Support Vector Machine (SVM)

The Support Vector Machine model exhibited exceptional performance, with an accuracy rate of almost 99%. The evaluation was reinforced by the classification report, confusion matrix, and heat map, which demonstrated the SVM's capacity to accurately differentiate between various illness phases with a high level of precision and recall. Table II contains the detailed performance report of Support Vector Machine (SVM) algorithm.

C. Convolutional Neural Network (CNN)

A Convolutional Neural Network (CNN) is a type of deep learning algorithm that is particularly effective for image recognition and processing tasks.

In the CNN model, we scaled the MRI pictures to dimensions of 224x224 pixels and trained the network to categorize the images into several stages of Alzheimer's disease. The model demonstrated favorable outcomes, attaining an accuracy rate nearing 90%. The classification report at Table III, confusion matrix, and it's heat map at 7 provide a thorough evaluation of the CNN's performance on the dataset.

DISCUSSION

The outcomes derived from the three distinct classification models, specifically Random Forest, Support Vector Machine (SVM), and Convolutional Neural Network (CNN), offer vital insights into the viability of utilizing pattern recognition techniques for early identification of Alzheimer's disease.

- **Random Forest:** The Random Forest model demonstrated robust performance, with an overall accuracy rate of 92% (Table I). The model exhibited exceptional precision and recall for the majority class (Non-Demented), attaining a notable F1-score of 0.94. Nevertheless, it exhibited diminished efficacy in recognizing Mild Dementia and Moderate Dementia, as seen by precision and recall values that suggest difficulties in accurately classifying these categories.

The confusion matrix showcases the model's capacity to differentiate across classes, namely in accurately detecting occurrences of Mild Dementia (Figure 5). The model exhibits ambiguity between the Non-Demented and Very Mild Dementia categories, as evidenced by the presence of off-diagonal entries in the confusion matrix.

- **Support Vector Machine (SVM):** The SVM model demonstrated exceptional performance, with an amazing accuracy rate of 99%. The results exhibited exceptional accuracy, sensitivity, and overall performance scores (F1-scores) for all categories, highlighting its strong capability in accurately categorizing instances of Alzheimer's disease. The confusion matrix demonstrates the model's high accuracy in making accurate predictions for all classes, with very few instances of misclassification (Figure 6). The outstanding performance of the SVM model indicates its promise as a dependable tool for early detection, highlighting its capacity to identify subtle patterns that are symptomatic of Alzheimer's disease in medical imaging data.

- **Convolutional Neural Network (CNN):** The CNN model exhibited a commendable overall accuracy of 90% (Table III), showcasing its competitive performance when compared to conventional machine learning models. The model demonstrated exceptional accuracy and completeness in detecting cases of Moderate Dementia, indicating its expertise in identifying instances under this category. Nevertheless, it encountered difficulties in accurately categorizing cases of Non-Demented and Mild Dementia, as seen by poorer precision and recall ratings.

The confusion matrix highlights the CNN model's difficulty in accurately differentiating between Non-Demented and Very Mildly Demented categories, indicating potential opportunities for enhancement (See Figure 7). However, the model clearly demonstrates its capability to accurately identify intricate spatial patterns in the input photos, thereby highlighting the promise of deep learning methods in detecting Alzheimer's disease.

Comparative Analysis: When comparing the three models, the SVM model demonstrates superior performance in terms of

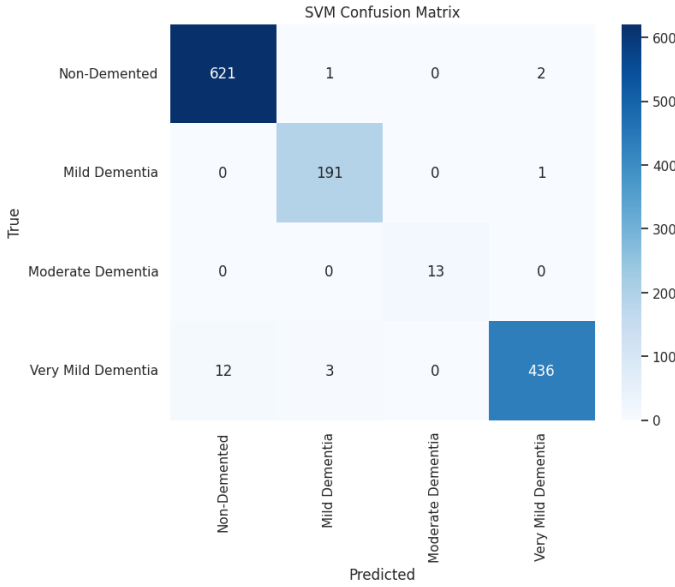


Fig. 6. Confusion matrix for the SVM model

TABLE III
CNN CLASSIFICATION REPORT

	Precision	Recall	F1-Score	Support
Non-Demented	0.96	0.87	0.91	624
Mild Dementia	0.87	0.90	0.88	192
Moderate Dementia	1.00	1.00	1.00	13
Very Mild Dementia	0.84	0.94	0.89	451
Accuracy			0.90	1280
Macro Avg	0.92	0.93	0.92	1280
Weighted Avg	0.90	0.90	0.90	1280

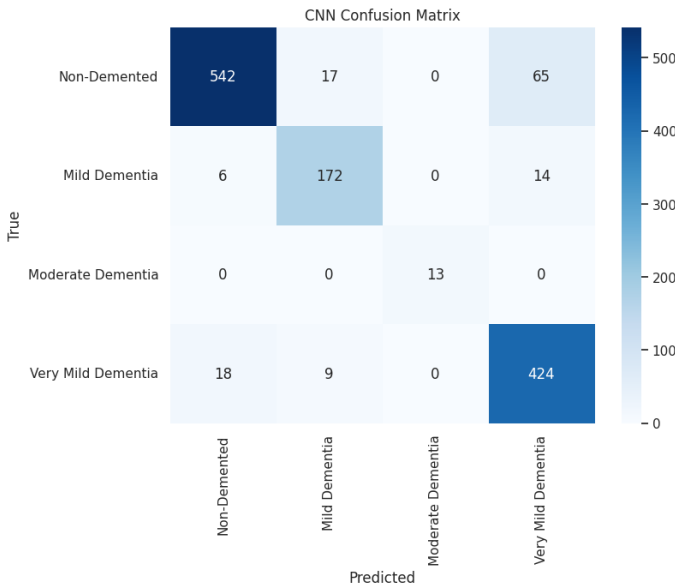


Fig. 7. Confusion matrix for the CNN model

overall accuracy and class-specific metrics compared to both the Random Forest and CNN models. The strong performance of SVM, coupled with its capacity to handle data with a large number of dimensions, indicates that it could be a highly effective method for detecting Alzheimer's disease at an early stage.

The findings from all three models emphasize the difficulties and intricacies linked to the identification of Alzheimer's disease. Subsequent investigations could prioritize improving the efficacy of the models, specifically in accurately detecting occurrences of underrepresented categories. Furthermore, it is necessary to conduct further research on the interpretability of the models and the discovery of significant features that contribute to classification decisions.

Our comprehensive investigation uncovered that each model demonstrated distinct advantages and disadvantages in several aspects of Alzheimer's disease detection. The Support Vector Machine (SVM) model demonstrated superior accuracy, highlighting its resilience in effectively dealing with intricate patterns present in the dataset. The CNN model, utilizing the spatial correlations present in the MRI scans, exhibited commendable performance.

The selection of the most appropriate model relies on several aspects, such as the accessible resources, interpretability, and unique demands of the application. Additional refinement and optimization can be conducted to better the performance of the models and potentially enhance the accuracy of early detection.

Ultimately, our research initiative adds to the current endeavors of utilizing pattern recognition methods for the timely identification of Alzheimer's disease. The wide range of models investigated offers useful insights into the potential of pattern recognition techniques in evaluating brain MRI data for diagnostic applications.

Ultimately, our study offers significant insights. The encouraging outcomes obtained from Support Vector Machines (SVM), specifically, open up possibilities for further investigation and the creation of reliable diagnostic instruments to assist in the timely detection of Alzheimer's disease.

ISSUES AND CHALLENGES

A Multi-Algorithmic Framework is a promising approach for early diagnosis and classification of Alzheimer's disease (AD). Nonetheless, a number of problems and obstacles must be resolved in order to increase this method's efficacy and generalizability.

Data Quality and Availability

- 1) **Dataset Size:** The size of the existing datasets used for AD detection tends to be small, which makes it challenging to efficiently train and evaluate predictive models. To improve the versatility and robustness of these models, larger and more diverse datasets are required.
- 2) **Data Variability:** The quality of MRI images and the methods used to acquire them might range greatly

between scanners and institutions, which can cause discrepancies in the performance of feature extraction and classification. Enhancing the reproducibility and comparability of research necessitates the use of standardized data collecting and standardization techniques.

- 3) **Data Privacy Concerns:** Medical imaging data collection and sharing presents ethical and privacy issues. Strong data anonymization strategies and safe data exchange platforms are essential for maintaining patient privacy and facilitating cooperative research.

Hardware Constraints

- 1) **Limited Computing Power:** The absence of high-performance computing resources hinders the ability to process and analyze large datasets efficiently.
- 2) **Outdated Hardware Infrastructure:** Working with older or less advanced hardware may lead to slower processing speeds and longer execution times, impeding the timely completion of experiments and analyses.
- 3) **Parallelization Limitations:** Lack of access to parallel computing capabilities restricts the parallelization of tasks, limiting the speedup achievable in computational processes.
- 4) **GPU Unavailability:** The unavailability or limited access to Graphics Processing Units (GPUs) for parallel processing can hinder the implementation of deep learning algorithms, which often benefit significantly from GPU acceleration.
- 5) **Scalability Issues:** Difficulties in scaling computational resources may restrict the ability to address larger and more complex research questions, limiting the scope and impact of the study.
- 6) **Budgetary Constraints:** Limited funding for acquiring advanced hardware can present challenges in obtaining the necessary computing resources to support data-intensive tasks.
- 7) **Technology Obsolescence:** The rapid evolution of technology may lead to the obsolescence of available hardware, making it challenging to keep pace with the computational requirements of cutting-edge research.

Addressing these hardware constraints is essential for ensuring the robustness, efficiency, and scalability of research endeavors in various domains.

Algorithmic Challenges

- 1) **Feature Selection and Representation:** Effective categorization in MRI images depends on the selection of the most pertinent and instructive characteristics. However, feature selection is a difficult process due to the large volume and complicated nature of MRI data. Finding the most discriminative characteristics for AD detection requires the development of reliable and understandable feature selection techniques.
- 2) **Model Explainability and Interpretability:** Deep learning models in particular may be quite complicated and challenging to understand. Gaining confidence in

these models' forecasts and spotting any biases requires an understanding of how they make decisions. Clinical decision-making requires the development of explanation and interpretation techniques for model predictions.

- 3) **Handling Multi-Class Classification:** When diagnosing AD, it's common practice to group patients into many groups, such as moderate cognitive impairment (MCI), early-stage AD, and healthy controls. Machine learning models may find it difficult to perform multi-class classification problems, particularly if the classes are not clearly divided. Accurate diagnosis of AD requires the development of multi-class classification algorithms that are reliable and precise.
- 4) **Generalization to Real-World Data:** The noisy and frequently contaminated real-world data may cause ML models trained on carefully selected datasets to perform poorly. It is important to develop models that exhibit robustness against noise and inconsistencies in data gathering in order to enable realistic applications in clinical situations.

Clinical Translation and Validation

- 1) **Validation in Large-Scale Studies:** To demonstrate machine learning models' clinical relevance and get regulatory permission for their usage in clinical settings, it is imperative to validate their performance in extensive clinical studies.
- 2) **Integration into Clinical Workflow:** Incorporating artificial intelligence-based AD detection techniques into clinical workflows necessitates giving considerable thought to decision support systems, user interfaces, and interaction with current electronic health record (EHR) systems.
- 3) **Addressing User Acceptance and Trust:** Reliability and interpretability of predictions based on machine learning may raise concerns among clinicians and patients. This is where user acceptance and trust come into play. Gaining user acceptability and trust requires addressing these issues via education, open communication, and thorough validation research.
- 4) **Consideration of Ethical and Societal Implications:** Potential biases, prejudice, and effects on patient autonomy are only a few of the ethical and sociological issues brought up by the use of AI in healthcare. Responsible AI development and use in healthcare depend on addressing these issues via ethical frameworks and public discourse.

CONCLUSIONS

To summarize, our work highlights the substantial progress achieved in utilizing machine learning models such as Random Forest, SVM, and CNN to detect Alzheimer's disease at an early stage using MRI scans. The comprehensive assessment clarifies the specific advantages of each model, with CNNs demonstrating notably remarkable performance. Although our study is beneficial in the field, it is crucial to prioritize

overcoming intrinsic issues such as class imbalance and interpretability in order to make it applicable in real-world scenarios. In order to improve the accuracy and reliability of early Alzheimer's diagnosis through pattern recognition, it is crucial to incorporate innovative methodologies and utilize more comprehensive datasets. We believe our approach would play a key role in shaping the future of research in this field.

I. ETHICAL CONSIDERATIONS

The study adheres to ethical standards in data collection, usage, and reporting. Patient privacy and confidentiality are paramount, and all procedures align with institutional and international ethical guidelines.

REFERENCES

- [1] T. Lee and H. Lee, "Prediction of alzheimer's disease using blood gene expression data," *Scientific reports*, vol. 10, no. 1, p. 3485, 2020.
- [2] P. Rye, B. B. Boij, G. Grave, T. Lindahl, L. Kristiansen, H.-M. Andersen, P. O. Horndalsveen, H. A. Nygaard, M. Naik, D. Hoprekstad *et al.*, "A novel blood test for the early detection of alzheimer's disease," *Journal of Alzheimer's Disease*, vol. 23, no. 1, pp. 121–129, 2011.
- [3] S. Subaramya, T. Kokul, R. Nagulan, and U. Pinidiyaarachchi, "Graph neural network based alzheimer's disease classification using structural brain network," in *2022 22nd International Conference on Advances in ICT for Emerging Regions (ICTer)*. IEEE, 2022, pp. 1–6.
- [4] D. Pan, A. Zeng, L. Jia, Y. Huang, T. Frizzell, and X. Song, "Early detection of alzheimer's disease using magnetic resonance imaging: a novel approach combining convolutional neural networks and ensemble learning," *Frontiers in neuroscience*, vol. 14, p. 259, 2020.
- [5] D. AlSaeed and S. F. Omar, "Brain mri analysis for alzheimer's disease diagnosis using cnn-based feature extraction and machine learning," *Sensors*, vol. 22, no. 8, p. 2911, 2022. [Online]. Available: <https://doi.org/10.3390/s22082911>
- [6] K. Sirts, O. Piguet, and M. Johnson, "Idea density for predicting Alzheimer's disease from transcribed speech," in *Proceedings of the 21st Conference on Computational Natural Language Learning (CoNLL 2017)*, R. Levy and L. Specia, Eds. Vancouver, Canada: Association for Computational Linguistics, Aug. 2017, pp. 322–332. [Online]. Available: <https://aclanthology.org/K17-1033>
- [7] J. Novikova, "Robustness and sensitivity of BERT models predicting Alzheimer's disease from text," in *Proceedings of the Seventh Workshop on Noisy User-generated Text (W-NUT 2021)*, W. Xu, A. Ritter, T. Baldwin, and A. Rahimi, Eds. Online: Association for Computational Linguistics, Nov. 2021, pp. 334–339. [Online]. Available: <https://aclanthology.org/2021.wnut-1.37>
- [8] Y. M. Elgammal, M. Zahran, and M. M. Abdelsalam, "A new strategy for the early detection of alzheimer disease stages using multifractal geometry analysis based on k-nearest neighbor algorithm," *Scientific Reports*, vol. 12, no. 1, p. 22381, 2022.
- [9] H. Ahmed, H. Soliman, and M. Elmogy, "Early detection of alzheimer's disease using single nucleotide polymorphisms analysis based on gradient boosting tree," *Computers in Biology and Medicine*, vol. 146, p. 105622, 2022.
- [10] W. Xia, R. Zhang, X. Zhang, and M. Usman, "A novel method for diagnosing alzheimer's disease using deep pyramid cnn based on eeg signals," *Heliyon*, vol. 9, no. 4, 2023.
- [11] M. Nour, U. Senturk, and K. Polat, "A novel hybrid model in the diagnosis and classification of alzheimer's disease using eeg signals: Deep ensemble learning (del) approach," *Biomedical Signal Processing and Control*, vol. 89, p. 105751, 2024.
- [12] M. Fabietti, M. Mahmud, A. Lotfi, A. Leparulo, R. Fontana, S. Vasanelli, and C. Fasolato, "Early detection of alzheimer's disease from cortical and hippocampal local field potentials using an ensembled machine learning model," *IEEE Transactions on Neural Systems and Rehabilitation Engineering*, 2023.