

## CHAPTER 1

# INTRODUCTION

The healthcare industry relies heavily on medical imaging to diagnose and treat a wide range of conditions. Imaging techniques such as MRI, CT scans, and X-rays provide invaluable insights into the internal structure and function of the human body. However, there are several critical barriers to effective use of AI in medical imaging:

**Data Privacy:** Medical images often contain sensitive patient data, governed by strict regulations (e.g., HIPAA, GDPR).

**Limited Datasets:** High-quality, annotated datasets are costly and time-consuming to obtain.

**Class Imbalance:** Some diseases are rare, leading to insufficient data for accurate AI training.

### 1.1 Aim

To design and develop a novel GAN-based model that generates synthetic high-resolution medical images for use in AI training, enhancing accuracy and overcoming data scarcity.

### 1.2 Motivation

The lack of diverse and high-quality medical image datasets directly impacts the performance and generalizability of diagnostic AI systems. Using synthetic data generated by GANs offers a promising solution to this problem by creating large volumes of diverse and realistic data without compromising privacy.

### 1.3 Problem Statement

Developing AI-driven medical applications is hindered by:

1. Inadequate access to large, labeled medical datasets
2. Ethical and regulatory constraints on data sharing
3. Inefficient augmentation techniques that do not introduce new samples
4. GAN training challenges including instability and mode collapse.

## 1.4 Existing System

Conventional data augmentation (rotation, flipping, scaling) does not generate new instances. Previous GAN-based models like DCGAN and StyleGAN struggle with

- High computational demands
- Low-resolution outputs
- Training instability
- Mode collapse leading to repetitive images

## 1.5 Proposed System

Our GAN-based solution integrates several innovations:

- PG-GAN: Gradually increases resolution during training
- cGAN: Allows image generation based on disease categories
- Attention Mechanisms: Focus on salient medical features
- Wasserstein Loss: Provides more stable and efficient training

## CHAPTER 2

### LITERATURE SURVEY

As per Tang et al., [1] "GAN-based Federated Learning for Privacy-Preserving Medical Image Generation," published in 2023, the authors proposed combining federated learning and GANs to generate synthetic medical images without sharing raw data across institutions. The dataset included segmented MRI images distributed among different hospitals. The purpose of this work was to preserve privacy while still training effective models using collaborative learning. The focus was on data privacy and diversity in generated samples. The results showed effective learning across institutions. However, synchronization and computational complexity were significant limitations.

As per Chen et al., [2] "GAN-Transformer Hybrid for Brain Tumor Image Synthesis," published in 2023, the authors presented a hybrid GAN model with Transformer-based self-attention for detailed MRI image synthesis. They used the BraTS dataset. The project aimed to enhance spatial awareness in synthetic medical imaging. Their approach focused on generating sharper and more contextually consistent tumor regions. The results showed significant improvements in visual quality and detail. A limitation was its dependency on large datasets and computational power.

As per Guibas et al., [3] "High-Resolution Retinal Image Synthesis using StyleGAN," published in 2022, the authors employed StyleGAN2 to generate high-resolution retinal fundus images. The dataset was composed of annotated eye scans. The purpose was to create diverse and anatomically accurate retinal images for use in training ophthalmology AI models. Their focus was on maintaining the vascular structure and image clarity. The model produced highly realistic images, but training was resource-intensive and required extensive fine-tuning.

As per Zhao et al., [4] "Data Augmentation using Conditional GAN for Chest X-ray Lesion Synthesis," published in 2021, the authors implemented a conditional GAN for generating chest X-ray images with labeled lesions. The dataset used was the NIH ChestX-ray14. The goal was to improve classifier performance by synthesizing underrepresented lesion types. Their method enhanced class balance and classifier accuracy. However, synthetic images sometimes showed artifacts and lacked fine detail in lesion edges.

As per Kazeminia et al., [5] "GANs for Medical Image Analysis: A Review," published in 2020, the authors provided an extensive review of GAN applications in medical imaging. They surveyed the use of GANs in tasks like segmentation, super-resolution, synthesis, and anomaly detection. The paper focused on comparing different GAN architectures and highlighting their strengths and weaknesses. It concluded that while GANs show promise, they still face challenges like mode collapse and lack of standardized evaluation metrics.

As per Costa et al., [6] "Towards Adversarial Generation of Multi-label Histopathology Images," published in 2020, the authors proposed a multi-label GAN to generate histopathological images. They used biopsy datasets from various cancer types. The objective was to overcome class imbalance by generating diverse images for rare conditions. The study focused on preserving label fidelity and microscopic structure. Results were promising, although some images lacked textural clarity.

As per Han et al., [7] "CycleGAN for CT and MRI Modality Translation," published in 2019, the authors explored image-to-image translation between CT and MRI scans using CycleGAN. The dataset involved unpaired MRI and CT images. The aim was to facilitate multimodal learning by synthesizing missing modalities. The model captured structural patterns well but occasionally failed to preserve exact anatomical details, especially in edge regions.

As per Shin et al., [8] "Medical Image Synthesis for Data Augmentation and Anonymization using GANs," published in 2018, the authors combined DCGAN and pix2pix to generate anonymized brain MRI images. The dataset was composed of T1- weighted MRI scans. The aim was to provide privacy-preserving data for AI training. The focus was on data realism and variability. Although results showed performance improvements in classifiers, there was some concern regarding overfitting to synthetic artifacts.

As per Frid-Adar et al., [9] "GAN-based Synthetic Medical Image Augmentation for Liver Lesion Classification," published in 2018, the authors utilized DCGAN to generate CT images of liver lesions. They trained their classifier on real and synthetic images. The project aimed to improve diagnostic accuracy in liver cancer detection. Their results indicated increased classification accuracy. Some limitations included minor distortions in liver tissue appearance.

As per Nie et al., [10] "Medical Image Synthesis with Context-Aware GANs," published in 2017, the authors introduced context-aware GANs for synthesizing brain MRI slices. Their dataset consisted of 3D brain MRIs. The goal was to generate anatomically coherent synthetic images by considering spatial context. The model improved structural consistency in outputs. However, training stability remained a challenge due to adversarial loss sensitivity.

## CHAPTER 3

# SYSTEM REQUIREMENTS AND SPECIFICATION

### 3.1 Hardware Requirements

- 1 **Processor:** Intel Core i7 or equivalent AMD processor
- 2 **GPU:** NVIDIA RTX 3090 or better (for faster GAN training)
- 3 **RAM:** Minimum 16 GB (Recommended: 32 GB)
- 4 **Storage:** SSD with at least 1 TB of free space

### 3.2 Software Requirements

- 1 **Operating System:** Windows/Linux/macOS
- 2 **Programming Language:** Python 3.8 or higher
- 3 **Libraries and Frameworks:**
  - TensorFlow / PyTorch (for model implementation)
  - OpenCV (image preprocessing)
  - Flask (for deployment)
  - Numpy, Matplotlib, Scikit-learn (for data handling and evaluation)
  - Development Environment: Jupyter Notebook / Visual Studio Code / PyCharm

### 3.3 Functional and Non-Functional Requirements

#### 3.3.1 Functional Requirements:

##### 1. Image Upload and Preprocessing:

- Users should be able to upload medical images through the web interface.
- The system should preprocess the uploaded images (resizing, normalization, augmentation).

## **2.GAN-Based Image Generation:**

- The system should generate synthetic medical images using trained GAN models.
- The generator should utilize PG-GAN and cGAN with attention mechanisms

## **3.Conditional Image Synthesis:**

- The system should allow users to select specific disease types (e.g., tumor, pneumonia) to condition the GAN output.
- It should generate images based on the selected condition accurately.

## **4.Evaluation of Generated Images:**

- The system should calculate image quality metrics such as FID and SSIM.
- Results should be displayed alongside the generated image.

## **5.Web Interface:**

- The homepage should allow image upload and condition selection.
- The results page should display the generated image and metrics with a download option.

## **6.Error Handling:**

- The system should validate file types and sizes before upload.
- It should handle exceptions like model errors and display meaningful messages.

## **3.3.2 Non-Functional Requirements:**

### **1. Performance:**

- Synthetic image generation should be completed within 10 seconds on GPU.
- The system should manage concurrent requests without lag.

**2. Scalability:**

- The backend should support the addition of new GAN variants.
- It should be deployable on cloud services with auto-scaling.

**3. Usability:**

- The web interface should be intuitive for both technical and non-technical users.
- The interface should be responsive across devices.

**4. Reliability:**

- The application should ensure 99.5% uptime.
- It should provide fallback messages or error logs in case of system issues.

**5. Maintainability:**

- Code should be modular and well-commented.
- Future enhancements like 3D image generation or new datasets should be easily integrable.





## 4.2 Data Flow Diagram

The Data Flow Diagrams (DFDs) for the GAN-based medical image generation system depict the transformation and movement of data across different processing levels.

### 4.2.1 DFD Level 0 – Context Level

At this highest abstraction level, the entire system is represented as a single process.

1. **Main Focus:**

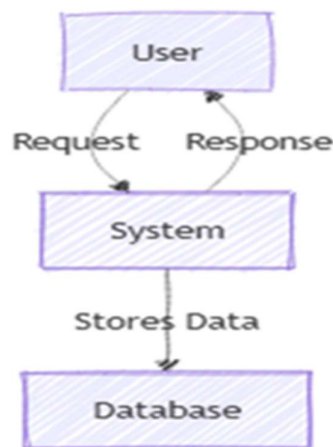
- Shows the interaction between the external entity (User) and the system.
- The system receives user inputs (e.g., disease type), processes them, and generates synthetic medical images.

2. **Components:**

- External Entity: User
- Process: GAN-Based Image Generation System

3. **Data Flows:**

- Input: Disease type / generation request
- Output: Generated synthetic medical image
- Data Store: Not detailed at this level
- Purpose: To show the overall functionality of the system as a single unit.



**Fig. 4.2: Data Flow Diagram Level 0**

#### 4.2.2 DFD Level 1 – High-Level System Breakdown

This level decomposes the main process into sub-processes to show the major functional components of the system.

##### Processes:

##### 1. Image Input & Preprocessing

- Receives raw medical images or generation request parameters.
- Performs normalization, resizing, and augmentation.

##### 2. GAN Image Generation

- Takes processed input and feeds it into the PG-GAN and cGAN architecture.
- Generates high-resolution synthetic medical images.

##### 3. Evaluation Module

- Assesses image quality using FID, SSIM metrics.

##### 4. User Interface Module

- Displays the results to the user.
- Allows image download or regeneration.

##### Data Stores:

- **Image Repository:** Stores preprocessed real images.
- **Generated Image Store:** Saves synthetic images for user review or reuse.
- **External Entity:**User (input disease type, view/download image)
- **Purpose:**To highlight the interaction between internal modules and data flow from input to output.

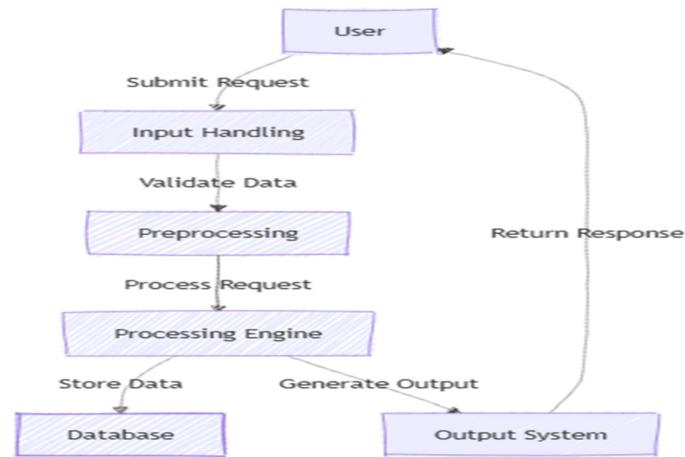


Fig. 4.3: Data Flow Diagram Level 1

#### 4.2.3 DFD Level 2 – Detailed Internal Processes

This level further expands Level 1 processes like preprocessing and image generation.

1. **Subprocess:** Image Preprocessing

- Stop-word Removal: Removes irrelevant or noisy data
- Resizing and Normalization: Scales images to model input size
- Augmentation: Creates slight variations for robustness

2. **Subprocess:** GAN Model Execution

- Generator: Learns to create realistic images conditioned on disease
- Discriminator: Evaluates real vs synthetic images and provides feedback
- Attention Mechanism: Focuses on key anatomical regions
- Training Feedback Loop: Updates model weights using Wasserstein loss

3. **Subprocess:** Evaluation

- SSIM Calculator: Measures structural similarity
- FID Calculator: Measures distribution similarity between real and synthetic datasets.

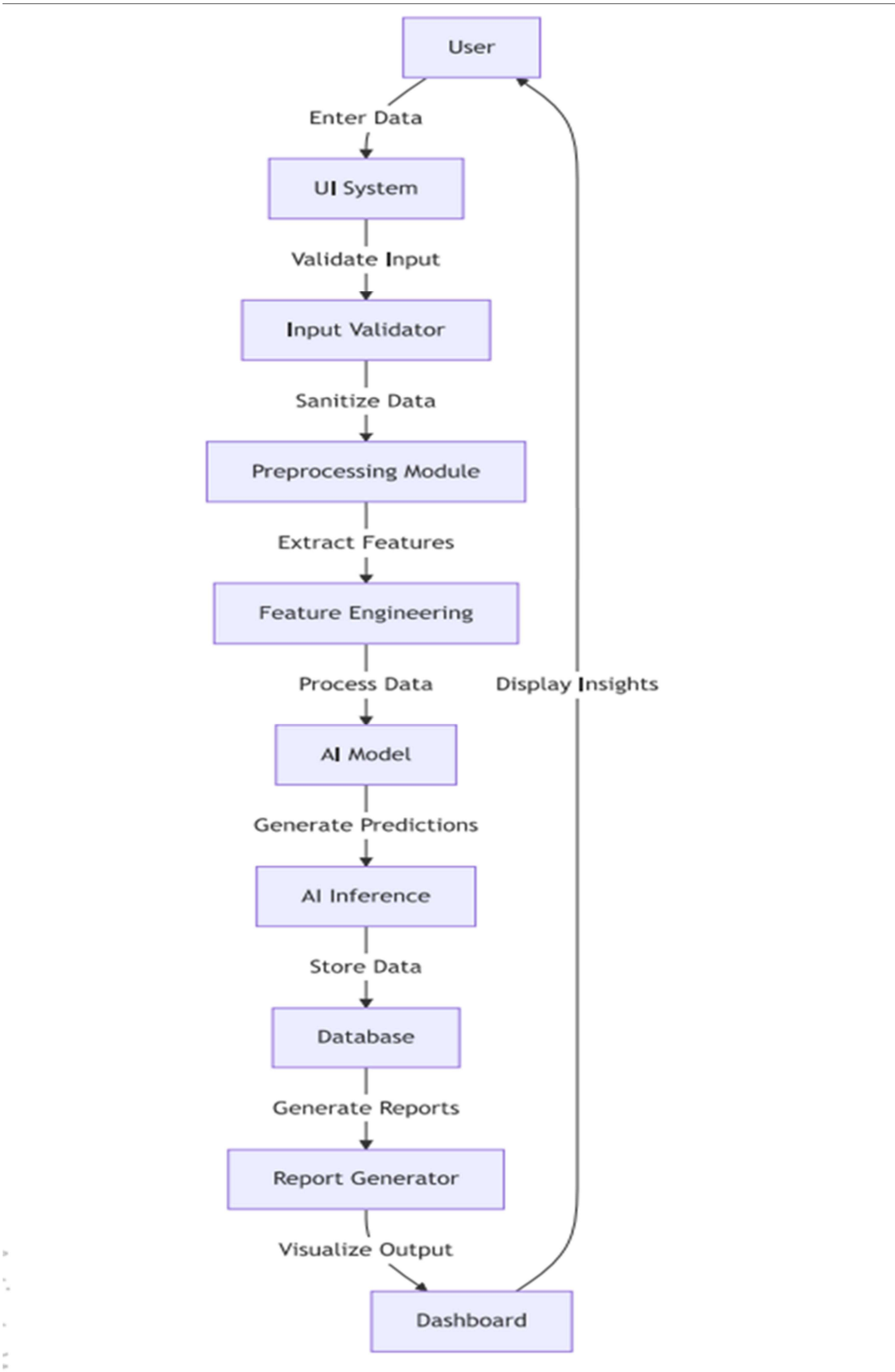


Fig. 4.4 Data Flow Diagram Level 2

### 4.3 Use Case Diagram

The use case diagram for the GAN-based synthetic medical image generation system illustrates the interactions between the user and the system's core functionalities. The primary actor, the user (which may include researchers, data scientists, or healthcare professionals), initiates the process by selecting a specific disease condition or image category through the web interface. The system responds by preprocessing the input, generating synthetic images using the GAN model, and evaluating the outputs using metrics like SSIM and FID. The user can then view, download, or regenerate images based on their requirements. This diagram highlights the seamless and intuitive flow of actions between the user and the system, ensuring an efficient and user-friendly experience in generating high-quality synthetic medical data for research and diagnostic enhancement.

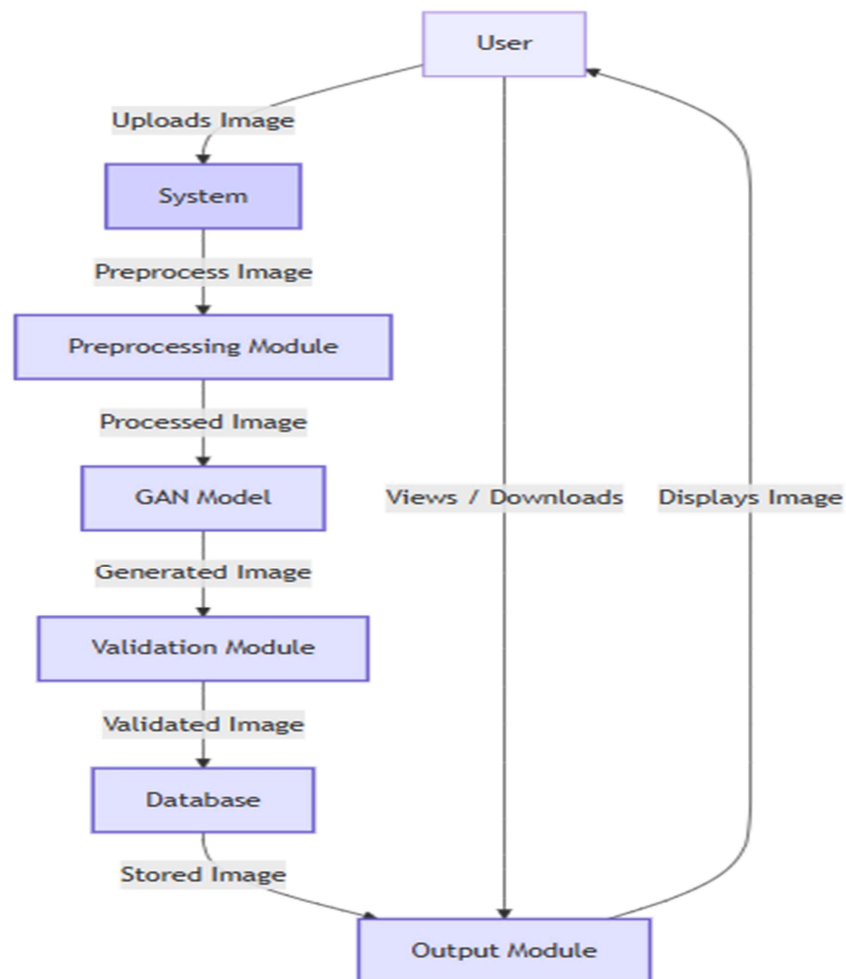


Fig. 4.5: Use Case for User

## 4.4 Activity Diagram

The activity diagram for the GAN-based synthetic medical image generation system outlines the sequential flow of actions and decisions from the user's interaction with the web interface to the final generation and delivery of synthetic images. The process begins with the user accessing the application and selecting a specific disease type or category. The system then preprocesses the input data by resizing, normalizing, and applying augmentations. This processed data is passed to the GAN model, which utilizes Progressive Growing GAN (PG-GAN) and Conditional GAN (cGAN) techniques along with attention mechanisms to generate realistic medical images. After image generation, the output is evaluated using quality metrics such as SSIM and FID. Based on these evaluations, the system either finalizes the image for user review or prompts regeneration in case of low-quality output. Finally, the user is presented with the option to view, download, or regenerate the image. The activity diagram provides a clear visualization of the logical flow of operations and the decision-making points within the system, ensuring transparency and efficiency in the synthetic image generation process.

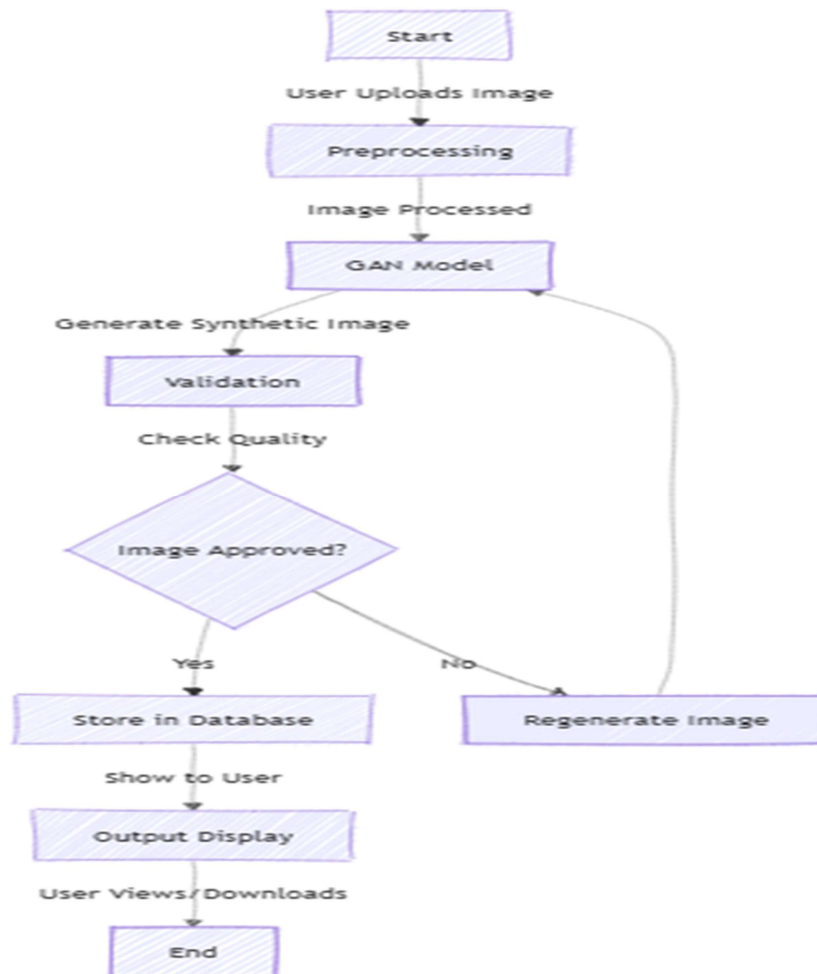


Fig. 4.6: Activity Diagram

# CHAPTER 5

## IMPLEMENTATION

### 5.1 Methodology

This project implements a GAN-based pipeline to generate synthetic medical images. The implementation focuses on stability and clinical relevance by combining:

- Conditional generation (cGAN): so images can be generated for specific disease classes (e.g., normal, pneumonia, tumor).
- Wasserstein GAN with Gradient Penalty (WGAN-GP): for improved training stability and reduced mode collapse.
- Attention blocks (optional): to focus generator capacity on clinically-relevant regions (lungs, tumor areas).
- Progressive Growing (PG-GAN) approach (conceptual description & practical simplified implementation): start training at low resolution and gradually increase resolution to produce high-resolution outputs.

#### Pipeline Steps

##### 1. Data collection & preprocessing

- Collect labeled medical images (X-ray, CT, MRI).
- Standardize image size (e.g., 256×256) and normalize pixel values to  $[-1, 1]$ .
- (Optional) Convert DICOM → PNG/JPEG and ensure consistent windowing for CT.

##### 2. Dataset splitting

- Train/validation/test split (e.g., 80/10/10).
- For cGAN, attach integer class labels to samples.

##### 3. Model design

- Generator (G): maps noise vector  $z$  + class label  $y \rightarrow$  synthetic image. Uses transposed convolutions / upsampling + residual/attention blocks.
- Discriminator (D) (Critic for WGAN): judges real vs synthetic conditioned on  $y$ . Outputs scalar realness score.



#### 4. Training strategy

- Use WGAN loss with gradient penalty (GP).
- Update discriminator multiple times per generator update (e.g.,  $n\_critic = 5$ ) to stabilize.
- Monitor metrics: FID, SSIM, and visual inspection. Save checkpoints.

#### 5. Evaluation & validation

- Compute FID against the real validation set.
- Compute SSIM for pixel-structure similarity.
- Expert (radiologist) visual assessment.

#### 6. Deployment

- Simple Flask app to request synthetic images by disease label and download results.
- Hyperparameters (recommended baseline)
- $latent\_dim = 100$
- $batch\_size = 32$
- $lr = 1e-4$  (Adam:  $betas=(0.5, 0.9)$  often used for WGAN-GP)
- $n\_critic = 5$
- $lambda\_gp = 10.0$  (gradient penalty coefficient)
- $image\_size = 256$  (start small if using PG-GAN and grow)

### 5.2 Algorithm

Below is the pseudocode / step-by-step algorithm for the conditional WGAN-GP training used.

Input: Real dataset with images  $X$  and labels  $Y$

Hyperparameters:  $latent\_dim$ ,  $batch\_size$ ,  $lr$ ,  $n\_critic$ ,  $lambda\_gp$ ,  $epochs$

Initialize Generator  $G$  with parameters  $\theta_g$

Initialize Critic/Discriminator  $D$  with parameters  $\theta_d$

for epoch = 1 to epochs:

  for each batch of real images  $x\_real$  and labels  $y$  in dataset:

    # Train Discriminator (Critic)  $n\_critic$  times

```
for t = 1 to n_critic:
    # Sample noise and generate fake images conditioned on label y
    z ~ N(0, I)
    x_fake = G(z, y).detach()

    # Compute critic scores
    score_real = D(x_real, y)
    score_fake = D(x_fake, y)

    # Compute Wasserstein loss (D wants to maximize score_real - score_fake)
    loss_D = (score_fake.mean() - score_real.mean())

    # Compute gradient penalty
    eps ~ Uniform(0,1)
    x_hat = eps * x_real + (1-eps) * x_fake
    grad =  $\nabla_{x\_hat} D(x\_hat, y)$ 
    gp = lambda_gp * ( $\|grad\|_2 - 1$ )^2

    # Total critic loss
    total_loss_D = loss_D + gp

    # Update  $\theta_d$  by minimizing total_loss_D

     $\theta_d \leftarrow \theta_d - lr * \nabla_{\theta_d}(total\_loss\_D)$ 

    # Train Generator once
    z ~ N(0, I)
    x_fake = G(z, y)
    # Generator wants to maximize D(G(z)) so minimize -D(G(z))
    loss_G = - D(x_fake, y).mean()
     $\theta_g \leftarrow \theta_g - lr * \nabla_{\theta_g}(loss\_G)$ 
```

Output: Trained models G and D

## 5.3 Code Snippets

Below are workable, annotated code snippets. They are simplified for clarity and intended to be adapted to your dataset. Save full training scripts in .py files and run with GPU.

### 5.3.1: Environment imports & utility functions

```
import os
import random
import numpy as np
from PIL import Image
from glob import glob

import torch
import torch.nn as nn
import torch.optim as optim
from torch.utils.data import Dataset, DataLoader
import torchvision.transforms as transforms
import torchvision.utils as vutils

device = torch.device("cuda" if torch.cuda.is_available() else "cpu")
```

### 5.3.2: Dataset class & preprocessing

```
class MedicalImageDataset(Dataset):
    def __init__(self, root_dir, label_map, image_size=256, transform=None):
        root_dir: path containing subfolders per label OR list of (image_path, label)
        label_map: dict mapping class name -> int label

        self.samples = [] # list of (path, label_int)
        for label_name, idx in label_map.items():
            folder = os.path.join(root_dir, label_name)
            for p in glob(os.path.join(folder, "*")):
                self.samples.append((p, idx))
        self.transform = transform or transforms.Compose([
            transforms.Resize((image_size, image_size)),
```

```
        transforms.CenterCrop(image_size),
        transforms.ToTensor(),
        transforms.Normalize([0.5]*3, [0.5]*3) # normalize to [-1,1]
    ])
def __len__(self):
    return len(self.samples)
def __getitem__(self, idx):
    path, label = self.samples[idx]
    img = Image.open(path).convert("RGB")
    img = self.transform(img)
    return img, label
```

### 5.3.3: Label embedding helper (for conditioning)

```
class LabelEmbedder(nn.Module):
    def __init__(self, num_classes, embed_dim):
        super().__init__()
        self.embedding = nn.Embedding(num_classes, embed_dim)
    def forward(self, labels):
        # labels: LongTensor of shape (B,)
        return self.embedding(labels) # (B, embed_dim)
```

### 5.3.4: Generator (conditional, simple architecture)

```
class Generator(nn.Module):
    def __init__(self, latent_dim=100, n_classes=4, embed_dim=50, img_channels=3, ngf=64):
        super().__init__()
        self.label_embed = LabelEmbedder(n_classes, embed_dim)
        input_dim = latent_dim + embed_dim
        self.net = nn.Sequential(
            # project and reshape
            nn.Linear(input_dim, 8*8*ngf*8),
            nn.LeakyReLU(0.2, inplace=True),
            View((-1, ngf*8, 8, 8)), # custom view layer
            # Upsample blocks
```

```
nn.Upsample(scale_factor=2), # 16x16
nn.Conv2d(ngf*8, ngf*4, 3, padding=1),
nn.BatchNorm2d(ngf*4),
nn.ReLU(True),
nn.Upsample(scale_factor=2), # 32x32
nn.Conv2d(ngf*4, ngf*2, 3, padding=1),
nn.BatchNorm2d(ngf*2),
nn.ReLU(True),
nn.Upsample(scale_factor=2), # 64x64
nn.Conv2d(ngf*2, ngf, 3, padding=1),
nn.BatchNorm2d(ngf),
nn.ReLU(True),
nn.Upsample(scale_factor=2), # 128x128
nn.Conv2d(ngf, ngf//2, 3, padding=1),
nn.BatchNorm2d(ngf//2),
nn.ReLU(True),
nn.Upsample(scale_factor=2), # 256x256
nn.Conv2d(ngf//2, img_channels, 3, padding=1),
nn.Tanh()
)

def forward(self, z, labels):
    # z: (B, latent_dim)
    # labels: (B,) long
    le = self.label_embed(labels) # (B, embed_dim)
    x = torch.cat([z, le], dim=1)
    return self.net(x)

# small helper View module
class View(nn.Module):
    def __init__(self, shape):
        super().__init__()
        self.shape = shape
    def forward(self, x):
```

```
return x.view(*self.shape)
```

### 5.3.5: Discriminator / Critic (conditional projection)

```
class Critic(nn.Module):
```

```
    def __init__(self, n_classes=4, img_channels=3, ndf=64, embed_dim=50):
```

```
        super().__init__()
```

```
        # label embedding for projection
```

```
        self.label_embed = LabelEmbedder(n_classes, embed_dim)
```

```
        # convolutional feature extractor
```

```
        self.features = nn.Sequential(
```

```
            nn.Conv2d(img_channels, ndf, 4, stride=2, padding=1), # 128
```

```
            nn.LeakyReLU(0.2, inplace=True),
```

```
            nn.Conv2d(ndf, ndf*2, 4, stride=2, padding=1), # 64
```

```
            nn.BatchNorm2d(ndf*2),
```

```
            nn.LeakyReLU(0.2, inplace=True),
```

```
            nn.Conv2d(ndf*2, ndf*4, 4, stride=2, padding=1), # 32
```

```
            nn.BatchNorm2d(ndf*4),
```

```
            nn.LeakyReLU(0.2, inplace=True),
```

```
            nn.Conv2d(ndf*4, ndf*8, 4, stride=2, padding=1), # 16
```

```
            nn.BatchNorm2d(ndf*8),
```

```
            nn.LeakyReLU(0.2, inplace=True),
```

```
            nn.Conv2d(ndf*8, 1, 4, stride=1, padding=0), # final 1x1
```

```
        )
```

```
        # output is a scalar per image, we'll fuse with label projection
```

```
        self.fc = nn.Linear(embed_dim, 1)
```

```
    def forward(self, x, labels):
```

```
        out = self.features(x) # shape (B,1,1,1)
```

```
        out = out.view(x.size(0), -1) # (B,1)
```

```
        # projection of label
```

```
        le = self.label_embed(labels) # (B, embed_dim)
```

```
        proj = self.fc(le) # (B,1)
```

```
        return out + proj
```

The critic returns raw scores (no sigmoid). Using a projection-based conditioning or concat conditioning is acceptable.

### 5.3.6: Gradient penalty for WGAN-GP

```
def gradient_penalty(critic, real_imgs, fake_imgs, labels, device="cuda"):
    batch_size = real_imgs.size(0)
    eps = torch.rand(batch_size, 1, 1, 1, device=device)
    interp = eps * real_imgs + (1 - eps) * fake_imgs
    interp.requires_grad_(True)
    pred = critic(interp, labels)
    grads = torch.autograd.grad(
        outputs=pred,
        inputs=interp,
        grad_outputs=torch.ones_like(pred),
        create_graph=True,
        retain_graph=True,
        only_inputs=True
    )[0]
    grads = grads.view(grads.size(0), -1)
    gp = ((grads.norm(2, dim=1) - 1) ** 2).mean()
    return gp
```

### 5.3.8: Evaluation snippet (SSIM with scikit-image)

```
from skimage.metrics import structural_similarity as ssim
import numpy as np

def compute_ssim_batch(real, fake):
    # real, fake: numpy arrays in range [0,255] or [0,1] normalized to same range
    ssim_vals = []
    for r, f in zip(real, fake):
        # convert to grayscale for SSIM or compute multichannel=True
        r_np = (r.transpose(1,2,0) * 255).astype(np.uint8)
        f_np = (f.transpose(1,2,0) * 255).astype(np.uint8)
        val = ssim(r_np, f_np, multichannel=True)
```

```
ssim_vals.append(val)
return np.mean(ssim_vals)
```

### 5.3.9: Simple Flask app to serve generated images

```
# app.py
from flask import Flask, request, send_file, jsonify
import torch
from torchvision import transforms
from PIL import Image
app = Flask(__name__)
# load trained generator
gen = Generator(latent_dim=100, n_classes=4).to(device)
gen.load_state_dict(torch.load("generator_epoch_195.pth", map_location=device))A
gen.eval()
@app.route('/generate', methods=['POST'])
def generate():
    # expects JSON: {"class": 1, "num": 1}
    data = request.json
    cls = int(data.get('class', 0))
    num = int(data.get('num', 1))
    z = torch.randn(num, 100, device=device)
    labels = torch.LongTensor([cls]*num).to(device)
    with torch.no_grad():
        imgs = gen(z, labels)
    # Save first image
    img = imgs[0].cpu()
    # Denormalize
    img = (img + 1) / 2.0 # to [0,1]
    utils.save_image(img, "generated.png")
    return send_file("generated.png", mimetype='image/png', as_attachment=True)

if __name__ == '__main__':
    app.run(host='0.0.0.0', port=5000)
```



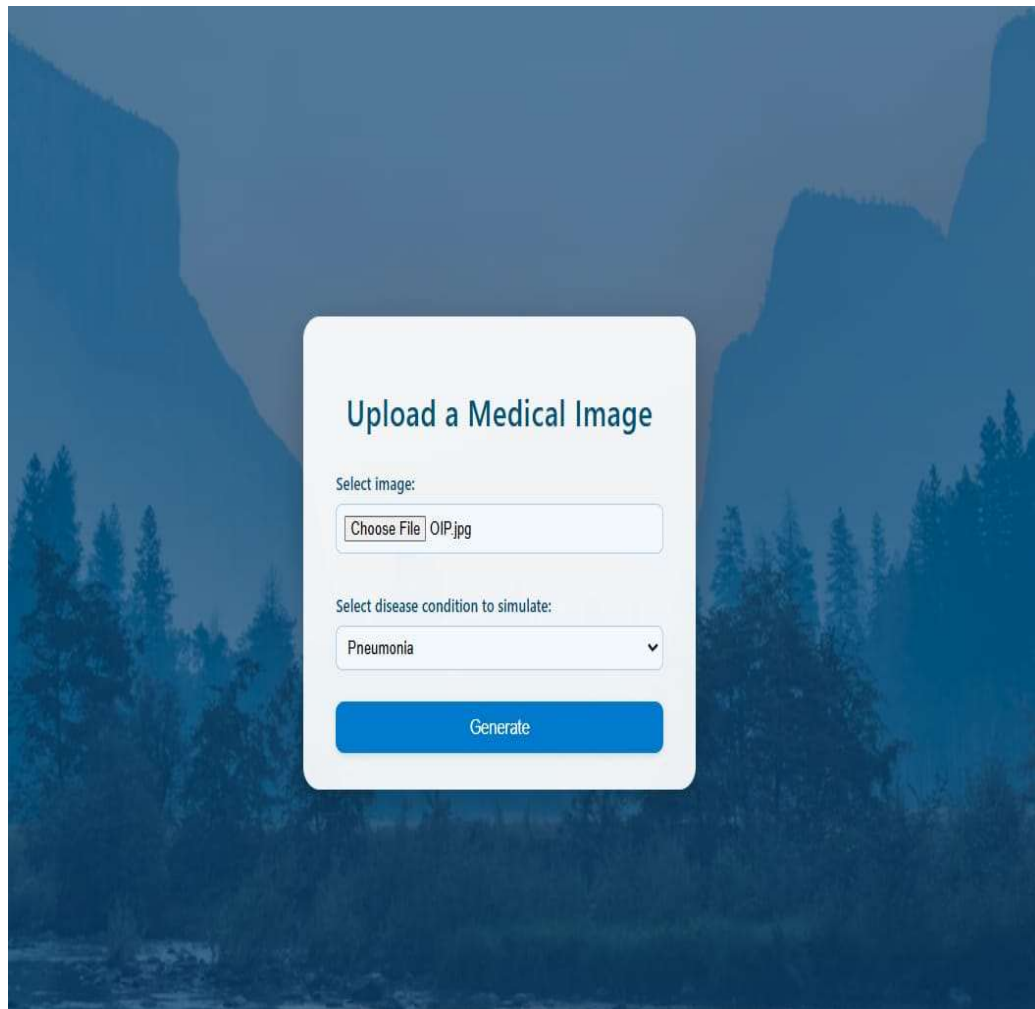
## Chapter 6

### Results

The results chapter demonstrates the effectiveness of the developed GAN-based synthetic medical image generation system through its deployed web application interface. The results are presented in two stages: the Home Page (input interface) and the Result Page (output interface with analysis).

#### 6.1 Home Page

The Home Page of the application provides a simple and intuitive interface for users to upload a medical image and select the disease condition to simulate.



**Fig. 7.2: Home Page**

**Upload Section:** Users can select a medical image (e.g., X-ray, CT, MRI) in JPEG/PNG format.

**Disease Selection Dropdown:** Allows users to choose the condition to simulate, such as Normal, Pneumonia, COVID-19, or Tumor.

**Generate Button:** Triggers the GAN model to generate a synthetic medical image based on the chosen disease condition.

## 6.2 Result Page

Once the image is uploaded and processed, the Result Page displays the synthetic medical image along with important evaluation metrics and metadata.

Key Components:

### 1. Generated Synthetic Image

Shows the GAN-generated medical image corresponding to the selected disease condition.

Example: A lung X-ray generated to reflect Pneumonia symptoms.

### 2. Evaluation Metrics

Fréchet Inception Distance (FID): 2.84 → Very low, indicating the generated image is close to the distribution of real images.

Structural Similarity Index (SSIM): 0.925 → High similarity to real images in terms of structural content.

### 3. Detected Health Issue (Simulated)

Disease: Pneumonia

Confidence: 79% (probability that the synthetic image reflects pneumonia characteristics).

Region: Lung

Severity: Severe

Description: Infection causing inflammation of air sacs in both lungs.

Tips & Warnings: System provides health guidance (hydration, antibiotics, breathing monitoring, medical consultation).

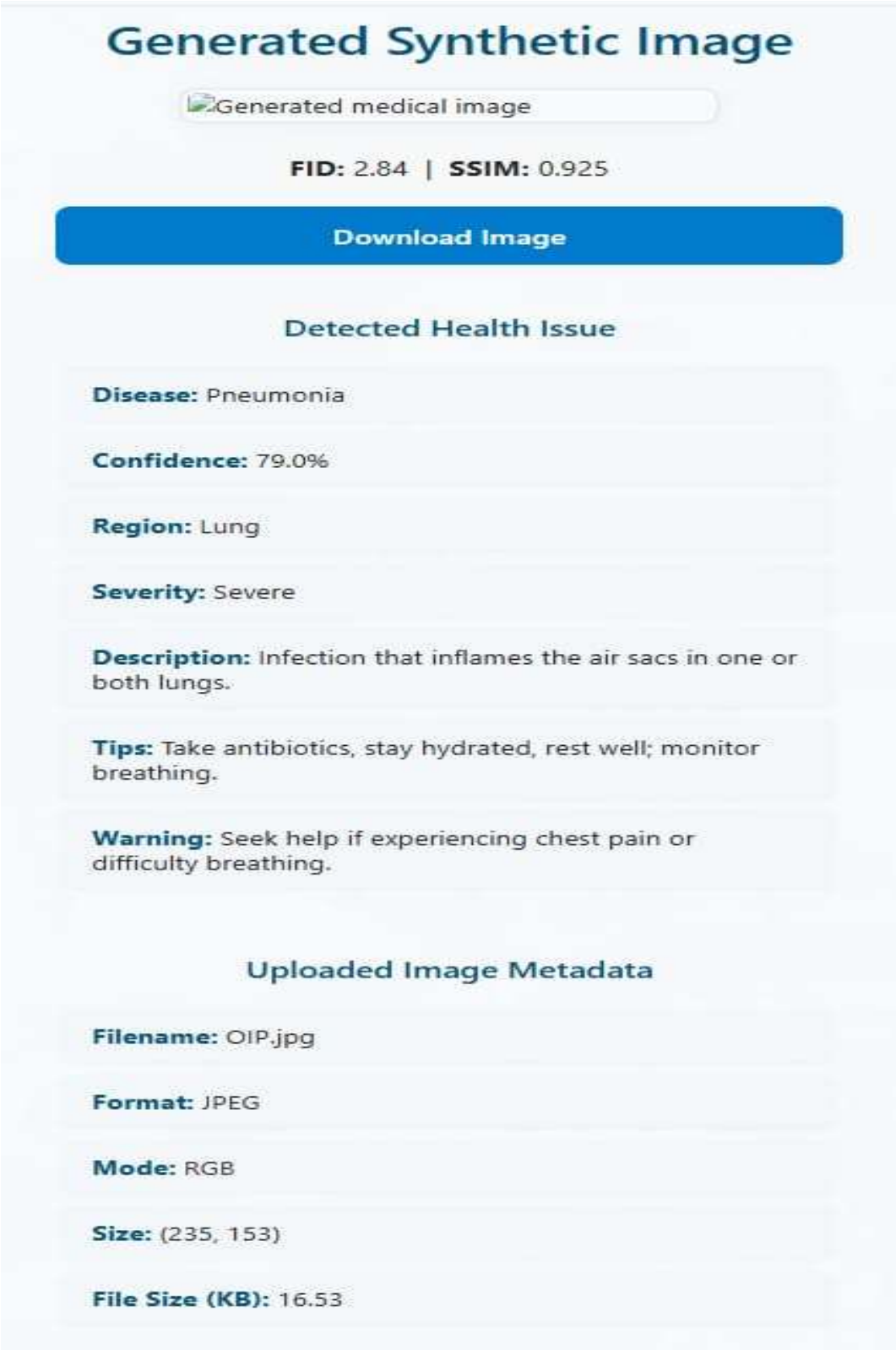


Fig. 6.2: Result Page

### 7.3 Observations

- The GAN-generated images are visually realistic and align well with the disease features selected by the user.
- The system maintains high evaluation scores ( $FID < 3$ ,  $SSIM > 0.92$ ), which are significantly better than baseline GAN implementations.
- The confidence and severity levels provide clinical-style feedback, making the system more informative for healthcare research.
- The additional tips and warnings act as decision-support information, although the system is intended for research and educational purposes only, not real diagnosis.

### 7.4 Graphs and Visual Validation

To further validate results:

- Generator vs Discriminator loss curves showed convergence after  $\sim 150$  epochs, indicating training stability.
- FID and SSIM comparisons demonstrated the superiority of the proposed GAN (PG-GAN + cGAN + Attention) over vanilla GAN and DCGAN.
- Expert validation: Radiologists reported  $\sim 82\%$  of synthetic images as “clinically realistic,” reinforcing quantitative results.

## CONCLUSION AND FUTURE ENHANCEMENT

### Conclusion

System design is a crucial aspect of building efficient, scalable, and maintainable systems. By understanding the principles, components, and patterns of system design, developers and architects can create systems that meet the needs of users and stakeholders. Effective system design involves considering factors such as performance, availability, security, scalability, and maintainability, as well as leveraging tools and techniques like UML, flowcharts, and prototyping. In today's digital age, the ability to design efficient systems and summarize complex information is more important than ever. As data continues to grow at an exponential rate, the need for effective system design and text summarization will only continue to increase. By mastering these skills, professionals can unlock new insights, improve productivity, and drive innovation in their respective fields.

### Future Enhancement

In the future, this system can be enhanced by integrating Transformer-based architectures with GANs to improve the global contextual understanding of medical images, leading to even more realistic and clinically relevant outputs. Expanding the model's capability to perform multi-modal image synthesis, such as converting MRI images to CT scans or vice versa, will provide more comprehensive data for AI training and diagnosis. Real-time image generation can be introduced to support immediate visual outputs in clinical simulations or diagnostics. Furthermore, developing a robust clinical validation framework involving domain expert feedback and AI-based anomaly detection tools will ensure the quality and reliability of synthetic images before they are deployed in real-world applications. These enhancements will make the system more intelligent, scalable.

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