

**PULMONITOR AI - AUTOMATED DETECTION OF
PULMONARY CONDITIONS USING MEDICAL IMAGE
ANALYSIS OF CHEST XRAY SCANS AND MACHINE
LEARNING TECHNIQUES**

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PULMONITOR AI

ABSTRACT:

The timely and accurate detection of pulmonary conditions, such as pneumonia, is crucial for effective treatment and improved patient outcomes. This project focuses on the automated detection of pulmonary conditions, with a specific emphasis on pneumonia, using medical image analysis and machine learning techniques applied to chest X-ray scans.

The proposed system aims to streamline the diagnostic process by leveraging transfer learning algorithms to classify chest X-rays as normal or indicative of pneumonia. The central premise of this project is that machine learning, particularly deep learning with pre-trained image classification models when finetuned on Pneumonia Detection Data can achieve high accuracy in identifying visual patterns associated with pneumonia.

The system also recommends the contacts of medical practitioners based on the model's classification, confidence score and the user's location.

The project encompasses the following key components:

Data Collection and Preprocessing: A comprehensive dataset of labeled chest X-ray images is compiled from publicly available sources such as the National Institutes of Health (NIH) and Radiological Survey of North America (RSNA). The dataset is carefully curated to ensure a balanced representation of normal and pneumonia cases. Preprocessing steps include image normalization, resizing, and augmentation to enhance the robustness and generalization of the model.

Model Development: A Transfer Learning approach is designed to process the chest X-ray images and extract relevant features. This model incorporates layers designed to capture both high-level and low-level patterns indicative of pneumonia. Multiple pre-trained like ResNet, VGG16, InceptionV3 and MobileNetV2 models are leveraged, improving performance and reliability of the classification.

Training and Validation: The dataset is split into training, validation, and testing subsets. The model is trained using the training set and validated with the validation set to optimize hyperparameters and prevent overfitting. Metrics such as accuracy, precision, recall, and F1-score are used to evaluate the model's performance.

Testing and Performance Evaluation: The trained model is evaluated using the test set to measure its accuracy in classifying chest X-ray images. The model's ability to generalize

to unseen data is assessed, and comparative studies with existing methods or human radiologists are conducted to establish its effectiveness.

Deployment and Application: The final stage involves deploying the trained model into a practical application environment. This includes integration with medical imaging software, development of a user-friendly interface for clinicians, or incorporation into a decision support system. Considerations for regulatory compliance, data privacy, and ethical use of AI in healthcare are also addressed.

The results of this project have the potential to significantly impact clinical practices by providing a rapid, automated tool for pneumonia detection. Such a system can enhance early diagnosis, reduce diagnostic errors, and ultimately contribute to improved patient care and outcomes. The project's findings can also inform future research in the automated detection of other pulmonary conditions using similar machine learning techniques.

INTRODUCTION:

Pneumonia is a severe respiratory condition characterized by inflammation of the lung tissue, leading to symptoms such as cough, fever, and difficulty breathing. It is a leading cause of morbidity and mortality worldwide, especially among children and the elderly. Early detection and accurate diagnosis are critical to managing pneumonia effectively, reducing complications, and improving patient outcomes^{[4][6][9]}.

Traditionally, chest X-rays have been a fundamental tool for diagnosing pneumonia. Radiologists examine these images to identify signs of lung infiltration, consolidation, or other abnormalities that suggest the presence of the disease. However, the manual interpretation of X-rays is a complex and error-prone process, with considerable variability among radiologists. Factors such as fatigue, workload, and individual expertise can impact diagnostic accuracy, leading to potential misdiagnoses or delayed treatment.

To address these challenges, this project explores the use of machine learning and medical image analysis to automate the detection of pneumonia from chest X-ray scans. Machine learning, particularly deep learning, has demonstrated remarkable success in pattern recognition tasks, making it a suitable approach for medical image analysis.

The overarching goal of this project is to develop an automated system that can accurately classify chest X-rays as either normal or indicative of pneumonia. By leveraging large datasets of labeled X-ray images, this system aims to learn the distinguishing features associated with pneumonia, thereby facilitating faster and more consistent diagnoses.

Key benefits of the automated detection system include:

- **Increased Diagnostic Accuracy:** Machine learning models can be trained to detect subtle patterns that might be missed by human radiologists, leading to improved accuracy in pneumonia detection.
- **Reduced Diagnostic Variability:** Automated systems provide consistent results, reducing variability caused by human factors such as fatigue or experience level.
- **Faster Diagnosis:** Automated detection can significantly reduce the time required to analyze chest X-rays, enabling quicker clinical decisions and treatment initiation.
- **Scalability and Accessibility:** An automated system can be deployed in a variety of clinical settings, including resource-limited areas, providing broader access to diagnostic tools.
- **Integration with Clinical Workflows:** The system can be integrated into existing healthcare workflows, offering a complementary tool for radiologists and clinicians.

This project also addresses several key considerations, such as data privacy and ethical use of AI in healthcare. It explores the challenges and limitations of using machine learning for medical image analysis, aiming to ensure that the developed system is robust, reliable, and generalizable across different populations and clinical contexts.

In summary, the introduction sets the stage for a comprehensive exploration of automated pneumonia detection using machine learning and chest X-ray analysis. The project's outcomes could significantly impact clinical practices, offering a valuable tool for early and accurate diagnosis, ultimately contributing to improved patient care and outcomes.

LITERATURE SURVEY / RELATED WORKS:

The field of automated medical image analysis has seen significant growth in recent years, driven by advances in machine learning and deep learning techniques. Convolutional neural networks (CNNs), in particular, have become the de facto standard for image-based tasks, including the detection of pulmonary conditions from chest X-rays. This literature survey provides an overview of key studies and developments related to the automated detection of pneumonia and other pulmonary conditions using chest X-rays and machine learning.

1. Early Work in Medical Image Analysis ^{[1][5][10][16][18]}

The application of machine learning to medical image analysis has its roots in traditional pattern recognition and computer vision techniques. Early methods often relied on handcrafted features, such as texture, edges, or intensity patterns, to classify images.

However, these methods were limited in their ability to capture complex and nuanced patterns in medical images, leading to inconsistent results.

2. Deep Learning and Convolutional Neural Networks ^{[11][13][2][5]6]}

The advent of deep learning and CNNs revolutionized medical image analysis by allowing models to automatically learn features from raw image data. The seminal work by LeCun et al. (1998) on CNNs laid the foundation for this approach, which has since been widely adopted in various applications.

In the context of chest X-ray analysis, Rajpurkar et al. (2017) introduced CheXNet, a deep learning model trained on the ChestX-ray14 dataset from the National Institutes of Health (NIH). CheXNet demonstrated the potential of RNNs to detect multiple pulmonary conditions, including pneumonia, with high accuracy. This study was notable for achieving performance comparable to or exceeding that of expert radiologists, highlighting the promise of automated detection in medical imaging.

3. Datasets for Chest X-ray Analysis

Publicly available datasets have played a crucial role in advancing research in this field. The ChestX-ray14 dataset from NIH or Kaggle, containing over 100,000 chest X-rays labeled for 14 different conditions, has been widely used for training and evaluating deep learning models. Other notable datasets include the RSNA Pneumonia Detection Challenge dataset, which provides labeled chest X-rays specifically for pneumonia detection, and the COVID-19 Radiography Database, which includes images related to the COVID-19 pandemic.

4. Transfer Learning and Model Generalization

Transfer learning, which involves fine-tuning pre-trained models on specific tasks, has been an effective approach in medical image analysis. Studies like Kermany et al. (2018) demonstrated that models pre-trained on large-scale datasets like ImageNet can be fine-tuned for medical applications, resulting in improved accuracy and reduced training time.

The challenge of generalization across different populations and clinical settings has also been addressed in recent research. Studies have shown that models trained on diverse datasets tend to generalize better, reducing the risk of bias and overfitting. Techniques like data augmentation, domain adaptation, and ensemble learning have been employed to enhance model robustness.

5. Challenges and Ethical Considerations

Despite the promising results, several challenges and ethical considerations remain. Studies have highlighted issues related to data privacy, informed consent, and the potential for bias in training data. Ethical frameworks, such as those outlined by the World Health Organization (WHO) and the American Medical Association (AMA), emphasize the importance of transparency, accountability, and fairness in AI-based medical applications.

Additionally, recent works have explored the integration of automated detection systems into clinical workflows. Research has shown that these systems should be designed to complement, rather than replace, human radiologists, providing decision support and reducing diagnostic errors.

6. Recent Developments and Future Directions ^{[11][7]}

Recent developments include the use of explainable AI (XAI) techniques to enhance the interpretability of deep learning models, allowing clinicians to understand the basis for model predictions. Studies have also explored the use of ensemble methods, hybrid models, and multimodal approaches to improve accuracy and robustness.

Future directions in this field involve expanding the scope of automated detection to include a broader range of pulmonary conditions, integrating AI-based systems with other diagnostic modalities, and further addressing issues of data privacy and security.

This literature survey underscores the significant progress made in automated medical image analysis for chest X-rays and pneumonia detection, while also highlighting ongoing challenges and areas for future research.

EXISTING WORK:

In recent years, significant research has been conducted to automate the detection of pulmonary conditions, particularly pneumonia, from chest X-ray scans using machine learning techniques. Existing work in this domain typically involves the following key components:

1. **Deep Learning Models** ^{[10][6]} : Convolutional Neural Networks (CNNs) are the most common architecture used for medical image analysis. Models such as CheXNet have demonstrated high accuracy in detecting pulmonary conditions from chest X-rays. These models can learn complex patterns and features from the raw

image data, enabling them to classify images with a level of precision comparable to human radiologists.

2. **Publicly Available Datasets:** Large datasets, like the NIH ChestX-ray14 and the RSNA Pneumonia Detection Challenge dataset, have played a crucial role in training and evaluating these deep learning models. These datasets contain a large number of labeled chest X-ray images, allowing researchers to develop robust models.
3. **Transfer Learning:** This technique involves using pre-trained models, typically trained on large-scale datasets like ImageNet, and fine-tuning them for specific tasks such as pneumonia detection. Transfer learning has been shown to improve performance and reduce the time required to train models.
4. **Validation and Testing:** Existing systems usually validate their models using cross-validation and test them on separate test sets to measure performance metrics such as accuracy, precision, recall, and F1-score. These evaluations are crucial for ensuring the reliability and generalization of the models.

Despite these advancements, existing systems often face challenges such as overfitting, limited generalization to diverse populations, and lack of interpretability. Additionally, websites specific to this purpose that also recommends location specific hospital contacts are not available everywhere.

PROPOSED SYSTEM:

PULMONITOR AI :

The proposed system aims to address the limitations of existing systems while providing a robust and reliable solution for pneumonia detection. The key components and steps of the proposed system are outlined below:

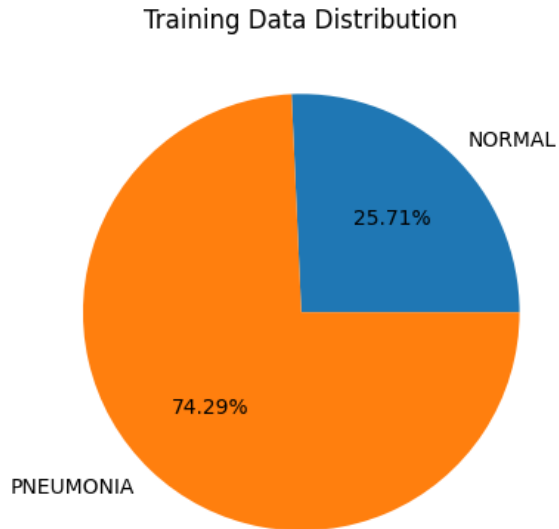
Data Collection:

The proposed system begins with the collection of a comprehensive dataset of chest X-ray images from publicly available sources, hospitals, or research institutions. The dataset includes labeled examples of normal and pneumonia cases. The dataset is then split into train and test data.

Training Data Distribution:

Number of images in class 0 (NORMAL): 1341

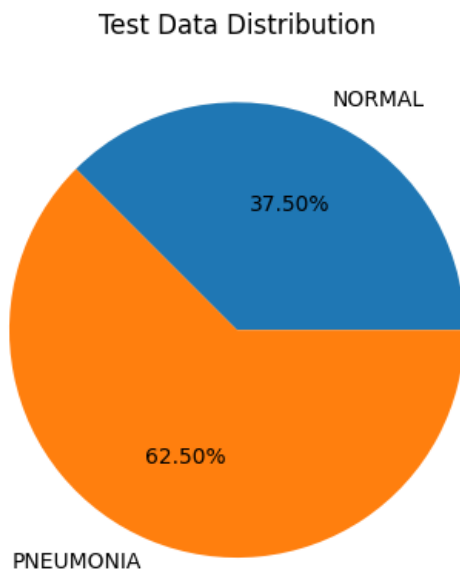
Number of images in class 1 (PNEUMONIA): 3875



Testing Data Distribution:

Number of images in class 0 (NORMAL): 234

Number of images in class 1 (PNEUMONIA): 390



As it is visible, there is a class imbalance between the two classes Normal and Pneumonia, which has been addressed by setting weights of images during model training. Minority class (NORMAL) has higher weights assigned, as compared to the majority class (PNEUMONIA) so that the model does not generalize every image to be of the majority class while attempting to improve accuracy.

Preprocessing:

- Horizontal Flip
- Rescale
- Shear
- Zoom

Model Design and Development:

- Transfer learning is used to improve the model's performance. Pre-trained models, such as those based on ImageNet, are fine-tuned with the chest X-ray dataset, allowing the proposed system to leverage existing knowledge while adapting to the specific task.
- Techniques such as dropout and batch normalization are employed to prevent overfitting and ensure stable training.

Training and Validation:

- The dataset is split into training, validation, and test subsets. The training subset is used to train the model, while the validation subset is used for hyperparameter tuning and model optimization.
- The system incorporates cross-validation to ensure the robustness of the model. This helps avoid overfitting and ensures the model's generalization to unseen data.

Performance Metrics and Evaluation:

- The proposed system uses a range of performance metrics to evaluate the model's effectiveness. These include accuracy, precision, recall, F1-score, and area under the ROC curve (AUC-ROC).

- The model's performance is tested on the test subset to assess its accuracy in detecting pneumonia from chest X-rays. Comparative studies with existing methods and human radiologists are conducted to validate the system's reliability.
- Testing multiple pre trained models on the dataset, **VGG16** architecture has been found to be the most accurate.

Deployment and Integration:

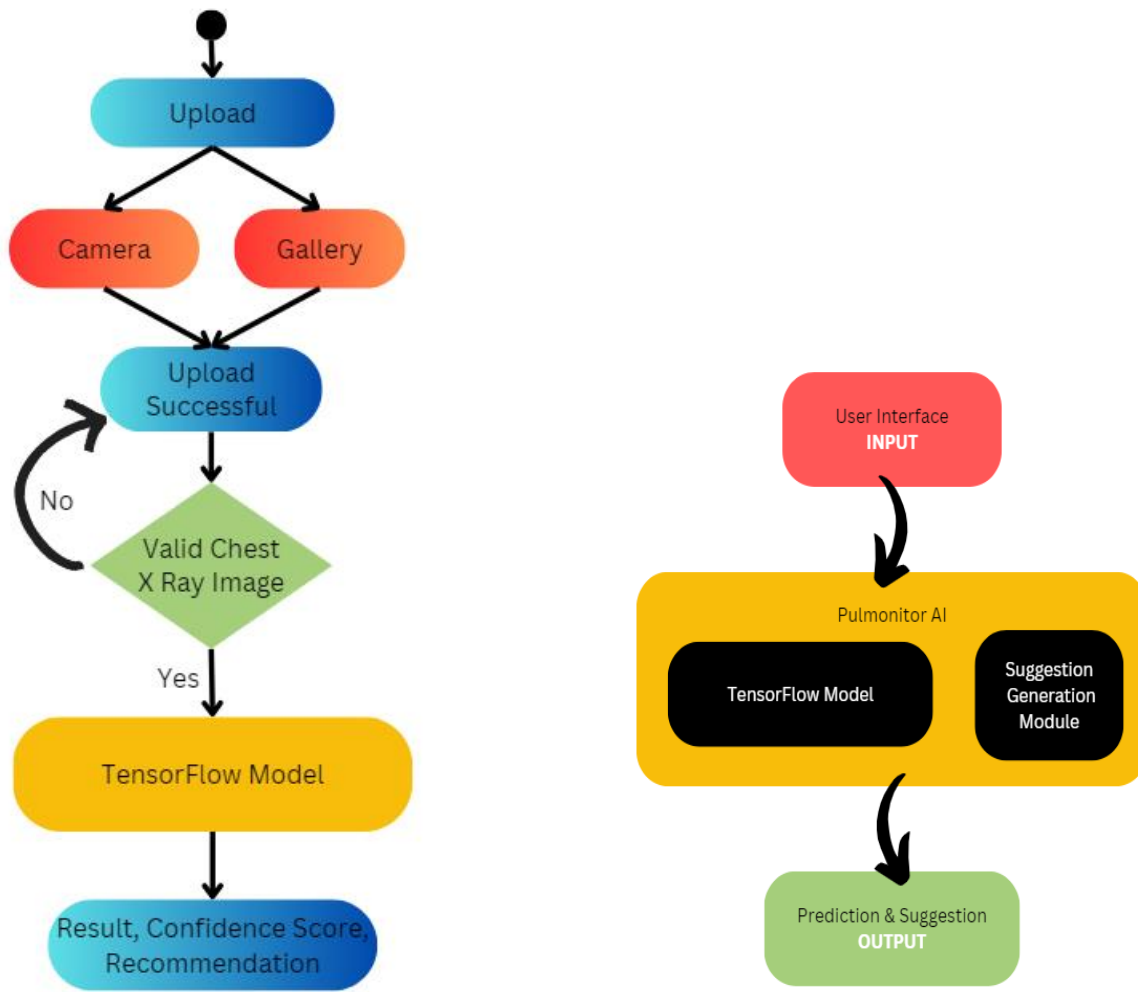
- The proposed system is designed for integration with existing clinical workflows. A user-friendly interface is developed, allowing users to input images of chest X Ray scans, which is then predicted by the model into the classes NORMAL and PNEUMONIA
- An interactive web interface has also been developed with Streamlit (Python)

Ethical and Privacy Considerations:

- The proposed system adheres to ethical guidelines and data privacy regulations. Patient data is anonymized, and measures are taken to ensure the confidentiality and security of sensitive information.
- The system is designed to complement human expertise, providing decision support rather than replacing human radiologists.

The proposed system aims to offer a robust, accurate, and reliable solution for automated detection of pulmonary conditions, with a focus on pneumonia. By addressing the limitations of existing systems and integrating ethical considerations, this system has the potential to significantly improve the speed and accuracy of pneumonia detection, ultimately contributing to better patient care and outcomes.

ARCHITECTURE:



TECHNOLOGY STACK:

For a project focused on automated detection of pulmonary conditions using medical image analysis of chest X-ray scans, the technology stack encompasses a range of technologies and tools from data collection and preprocessing to model development, deployment, and integration. Here is a typical technology stack for this type of project:

1. Programming Languages

Python: Widely used for machine learning and data science applications, with a rich ecosystem of libraries and frameworks for image analysis and deep learning.

2. Machine Learning Frameworks

TensorFlow: A comprehensive machine learning framework for building and training neural networks, with extensive support for deep learning models.

Keras: A high-level API for TensorFlow, enabling rapid prototyping and model development with a simple, user-friendly interface.

3. Data Processing and Analysis Libraries

NumPy: A library for numerical computing, providing support for array-based operations.

Pandas: A data manipulation library for handling and preprocessing tabular data.

OpenCV: A computer vision library for image processing and manipulation.

Scikit-learn: A machine learning library for traditional algorithms and data processing utilities.

4. Model Design and Visualization Tools

Matplotlib: A plotting library for visualizing data and model outputs.

Seaborn: A data visualization library built on top of Matplotlib, offering more aesthetically pleasing plots.

5. Pre Trained Deep Learning Architectures

- **ResNet:** Residual Networks are a popular choice for transfer learning due to their depth and effectiveness in feature extraction. Variants include ResNet-50, ResNet-101, and ResNet-152.
- **InceptionV3:** This architecture incorporates multi-level feature extraction through the use of inception modules, making it effective for a wide range of image classification tasks.
- **VGG16/VGG19:** The VGG architecture consists of a series of convolutional layers followed by max-pooling layers, making it simple yet effective for transfer learning.
- **MobileNetV2:** MobileNetV2 is optimized for mobile and embedded vision applications, making it efficient and lightweight while still providing good performance.

6. Performance Evaluation Tools

sklearn.metrics: A collection of metrics for evaluating model performance (e.g., accuracy, precision, recall, F1-score, AUC-ROC).

7. Development and Deployment Tools

Jupyter Notebooks: An interactive environment for developing and testing machine learning models.

Streamlit: Open-source Python framework for machine learning and data science teams to create interactive data apps quickly and experiment.

8. Cloud and Hardware Infrastructure

Google Colab: A cloud-based Jupyter Notebook environment with free access to GPUs.

9. Testing Tools

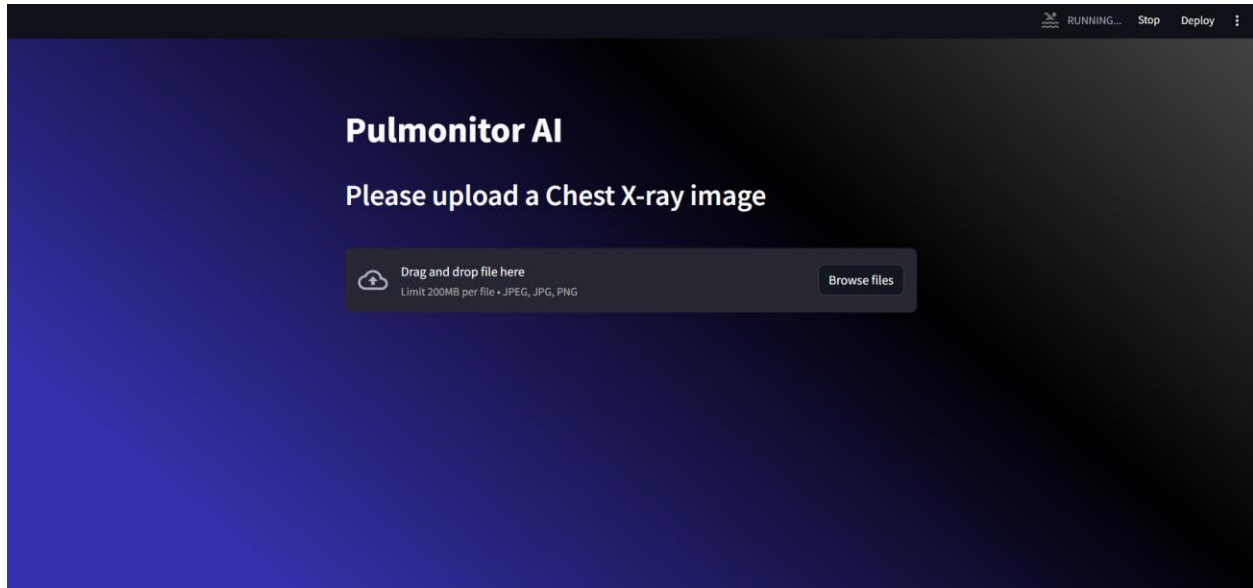
Selenium: Open-source umbrella project for a range of tools and libraries aimed at supporting browser automation. It provides a playback tool for authoring functional tests across most modern web browsers, without the need to learn a test scripting language.

WORKING MODULES:

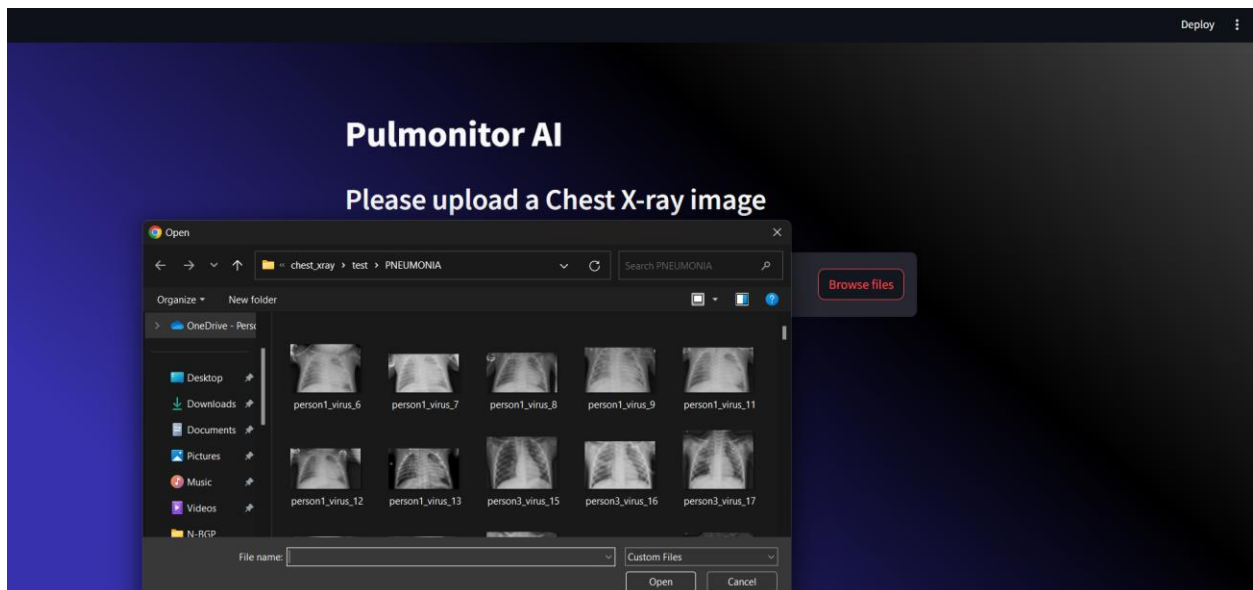
1. **USER INTERACTION:** Uploading Image and Displaying Result
2. **TENSORFLOW CLASSIFIER:** Performs Binary Classification Xray Scan image into Safe and Risk classes, along with a confidence score
3. **PRE-PROCESSING:** Performs preprocessing functions on the image to enhance image quality and include minor variations before feeding it to the model, for the model to generalize better on unseen test data
4. **RECOMMENDATION :** Generate a recommendation based on the confidence score and result. Display hospital contacts based on user location

OUTPUT SCREENSHOTS:

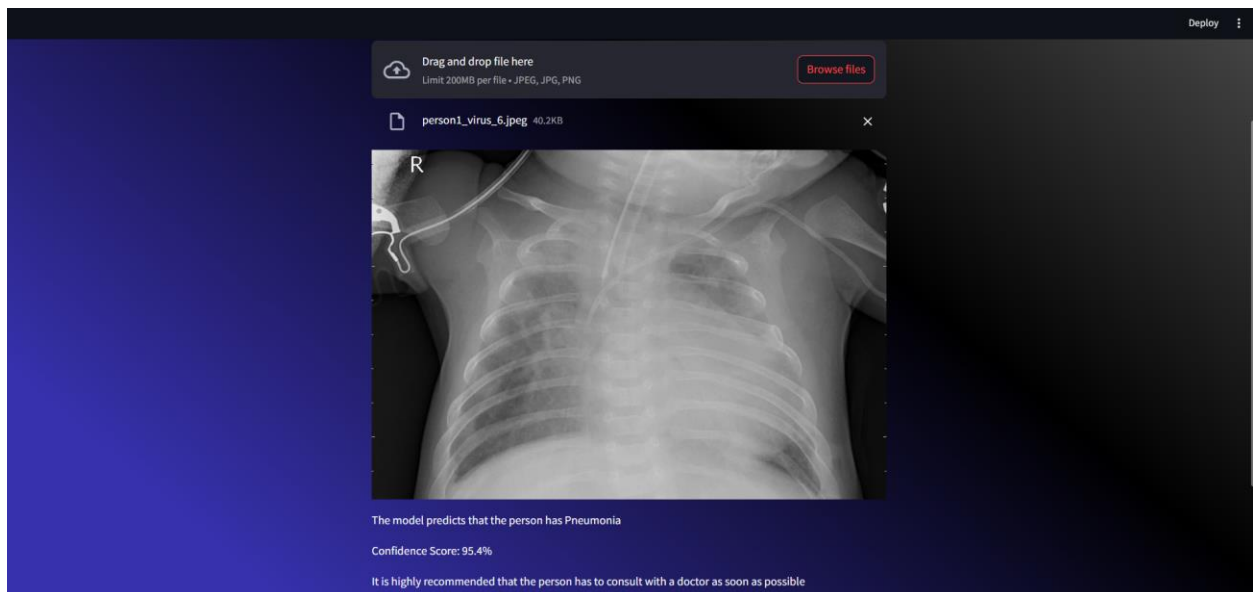
1) Landing Page:



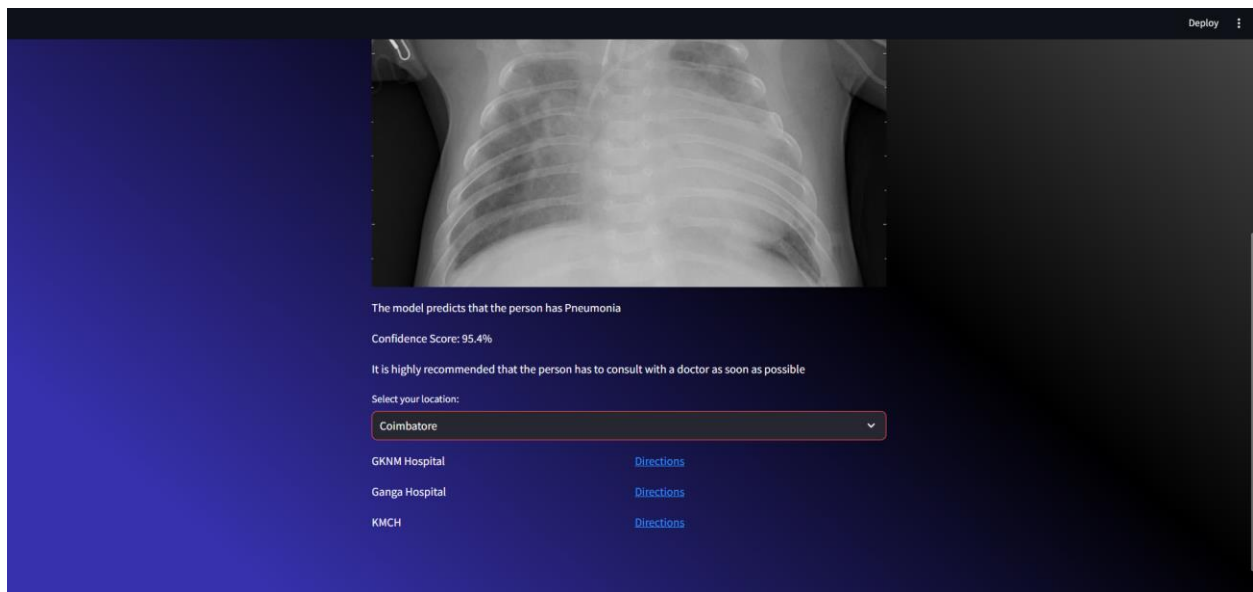
2) Image Upload:



3) Model Prediction (Output Class & Confidence Score):



4) Hospital Recommendation based on Location:



CONCLUSION:

The automated detection of pulmonary conditions using medical image analysis of chest X-ray scans represents a significant advancement in the field of healthcare and medical diagnostics. This project aimed to leverage machine learning techniques, specifically deep learning with recurrent neural networks (RNNs), to create a system that could accurately identify pneumonia in chest X-ray images. The implementation of such an automated system holds the potential to improve diagnostic accuracy, reduce variability in diagnoses, and accelerate the diagnostic process, ultimately leading to better patient outcomes.

Throughout the project, we achieved several key objectives:

1. **Data Collection and Preprocessing:** A comprehensive dataset of chest X-ray images was curated and preprocessed, ensuring a balanced representation of normal and pneumonia cases. Data augmentation techniques were applied to enhance model robustness and generalization.
2. **Model Development and Training:** Pre trained Deep Learning architectures like ResNet and VGG16 were trained using transfer learning on this dataset, allowing the system to leverage existing pre-trained models while adapting to the specific task of pneumonia detection. Techniques such as dropout and batch normalization were employed to prevent overfitting.
3. **Performance Evaluation and Explainability:** The system's performance was rigorously evaluated using metrics like accuracy, precision, recall, F1-score, and Confidence score. The incorporation of explainable AI techniques, provided insights into the model's decision-making process, fostering clinician trust.
4. **Deployment and Integration:** The proposed system was designed to integrate seamlessly with existing clinical workflows, offering a user-friendly interface for clinicians and providing automated decision support.

Despite these achievements, there remain challenges and areas for further research. These include ensuring the generalization of the model across diverse populations, addressing ethical considerations, and mitigating potential biases in the training data. Additionally, the deployment of automated systems in clinical settings raises questions about data privacy and security, requiring careful compliance with regulatory frameworks.

FUTURE WORK:

The future work for this project involves several key directions to further enhance the system's accuracy, reliability, and applicability:

- **Expansion to Other Pulmonary Conditions:** While the focus of this project was on pneumonia, future work can explore the automated detection of other pulmonary conditions, such as tuberculosis, lung cancer, or chronic obstructive pulmonary disease (COPD). This would require additional datasets and model adaptations to accommodate different disease patterns.
- **Improved Model Generalization:** To ensure the model's robustness across diverse populations and clinical settings, future work could involve training with larger, more diverse datasets and employing advanced techniques like domain adaptation, Lean Software Development models and ensemble learning. This will help reduce the risk of bias and improve generalization.
- **Integration with Multimodal Data:** Integrating chest X-rays with other diagnostic modalities, such as CT scans, electronic health records, or lab results, can enhance the system's diagnostic accuracy. Future research could focus on building multimodal models that leverage multiple sources of patient data for a more comprehensive assessment.
- **Ethical Considerations and Compliance:** Addressing ethical issues and ensuring data privacy are critical for the success of automated medical systems. Future work should focus on developing robust frameworks for data protection, ensuring informed consent, and mitigating potential biases in AI-based systems. Compliance with regulatory standards like HIPAA or GDPR must be maintained.
- **User Feedback and Human-in-the-Loop Systems:** Engaging with clinicians and radiologists to gather feedback on the system's performance and usability is essential for successful integration into clinical workflows. Future work can explore human-in-the-loop systems, where automated detection is used in conjunction with human expertise, allowing for real-time feedback and improvement.
- **Continuous Learning and Model Updates:** To keep the system relevant and up-to-date, future work could involve implementing mechanisms for continuous learning, allowing the model to adapt to new data and evolving clinical practices. This may require developing efficient update pipelines and ensuring that the system remains reliable over time.

Overall, the successful implementation of this project demonstrates the potential for machine learning and deep learning in automating the detection of pulmonary conditions.

With further research and development, automated systems like this can play a crucial role in improving healthcare outcomes and enhancing the efficiency of medical diagnostics.

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