Brain Tumor Ensembling Using Quine-McCluskey Binary Classification(QMBC)

Project Submitted To

SRM University, Andhra Pradesh

For the Partial fullfillment of the requirements to award the Degree of Bachelor Of Technology In Computer Science and Engineering School of Engineering & Sciences.



Submitted By
A PUNEETH CHOWDHARY (AP22110011043),
T SAI VIRAJ (AP22110011210),
M LOKESH BABU (AP22110010987),
Y SANTHOSH REDDY (AP22110011036),
K SURYA VAMSI (AP22110011010)

Under the guidance Of Prof. ANUSHA NALAJALA

SRM University, Andhra Pradesh,
Neerukonda, Mangalagiri, Guntur,
Andhra Pradesh- 522240 [April-2025]

Certificate

Date: 24/04/2025

This is to certify that the work present in this Project entitled "Brain Tumor Ensembling Using Quine-McCluskey Binary Classification(QMBC)" has been carried out by our team under my supervision. The work is genuine, original, and suitable for submission to the SRM University – AP for the award of Bachelor of Technology/Master of Technology in School of Engineering and Sciences.

Supervisor

(Signature)

Prof. / Dr. Anusha Nalajala

Designation,

Affiliation.

Acknowledgement

I would like to express my sincere gratitude to all those who have supported me throughout the completion of this project, "Brain Tumor Ensembling Using Quine-McCluskey Binary Classification(QMBC)"

First and foremost, I extend my heartfelt thanks to Prof. **Anusha Nalajala mam**, for their valuable guidance, constant support, and encouragement throughout the course of this project. Their expert advice, constructive feedback, and insightful suggestions were instrumental in the successful execution of this work.

I am also grateful to Head of the Department of **CSE**, for providing the necessary infrastructure and a stimulating academic environment.

I thank all the faculty members and staff of the **CSE, SRM University AP,** for their direct or indirect support during the project.

I am deeply thankful to my friends and classmates for their continuous motivation, suggestions, and moral support.

Last but not least, I would like to thank my family for their unwavering encouragement and support during all phases of this project.

A PUNEETH CHOWDHARY (AP22110011043),
T SAI VIRAJ (AP22110011210),
M LOKESH BABU (AP22110010987),
Y SANTHOSH REDDY (AP22110011036),
K SURYA VAMSI (AP22110011010),
April 2025

ABSTRACT

Brain tumor detection and classification play a crucial role in medical diagnostics, where early and accurate identification can significantly improve treatment outcomes. In this study, we propose a novel ensemble classification approach named **Quine-McCluskey Binary Classification (QMBC)**, which leverages the Quine-McCluskey logic minimization algorithm to enhance binary classification performance in brain tumor detection tasks.

The proposed system integrates multiple machine learning classifiers, including Decision Tree(DT), Naïve Bayes(NB), XG-Boost(XGB), Random Forests, and k-Nearest Neighbors (k-NN), and transforms their binary predictions into a simplified Boolean expression using the Quine-McCluskey method. This logical minimization enables the ensemble to reach a consensus decision with reduced redundancy and improved interpretability.

We evaluated the proposed ensemble framework using a publicly available brain tumor MRI dataset, focusing on the classification of images into tumor and non-tumor categories. Experimental results demonstrate that the QMBC ensemble achieves higher accuracy, precision, recall, and F1-score compared to traditional ensembling techniques such as majority voting and weighted averaging. Additionally, the logic-based minimization introduces explainability into the decision-making process, offering clinicians a transparent and reliable tool for diagnostic support.

This work highlights the potential of integrating Boolean logic optimization methods with machine learning classifiers to enhance medical image analysis, opening avenues for more interpretable and efficient decision support systems in healthcare.

INTRODUCTION

Brain tumors are among the most critical and life-threatening medical conditions, requiring prompt and accurate diagnosis to ensure effective treatment planning. Magnetic Resonance Imaging (MRI) is widely utilized in the detection and analysis of brain abnormalities due to its non-invasive nature and high-resolution imaging capabilities. However, manual examination of MRI scans is time-consuming, prone to human error, and highly dependent on expert interpretation. Consequently, the integration of automated machine learning-based classification systems has gained significant attention in recent years to assist radiologists and improve diagnostic efficiency.

Machine learning classifiers such as Decision Tree(DT), Naïve Bayes(NB), XG-Boost(XGB), Random Forests, and k-Nearest Neighbors (k-NN) have demonstrated promising results in medical image classification tasks. Despite their individual strengths, no single classifier consistently outperforms others across diverse datasets and problem domains. Ensemble learning techniques address this challenge by combining the predictive capabilities of multiple classifiers to produce a more robust and reliable model. Common ensembling methods include majority voting, averaging, and stacking; however, these techniques often lack interpretability and may introduce redundancy in decision-making.

To overcome these limitations, this study introduces a novel ensemble classification strategy termed **Quine-McCluskey Binary Classification (QMBC)**. This approach applies the Quine-McCluskey algorithm — a classical logic minimization technique — to the binary output predictions of multiple classifiers. By reducing complex classifier outputs into a simplified and optimized Boolean expression, the proposed QMBC ensemble not only enhances classification accuracy but also provides an interpretable decision-making framework.

In this project, we implement and evaluate the QMBC ensemble using a publicly available brain tumor MRI dataset. The primary objective is to classify brain MRI images into tumor and non-tumor categories and compare the performance of the proposed method against conventional ensemble techniques. The results highlight the effectiveness of QMBC in improving classification performance while offering a transparent and explainable model, making it a valuable tool for clinical decision support in healthcare settings.

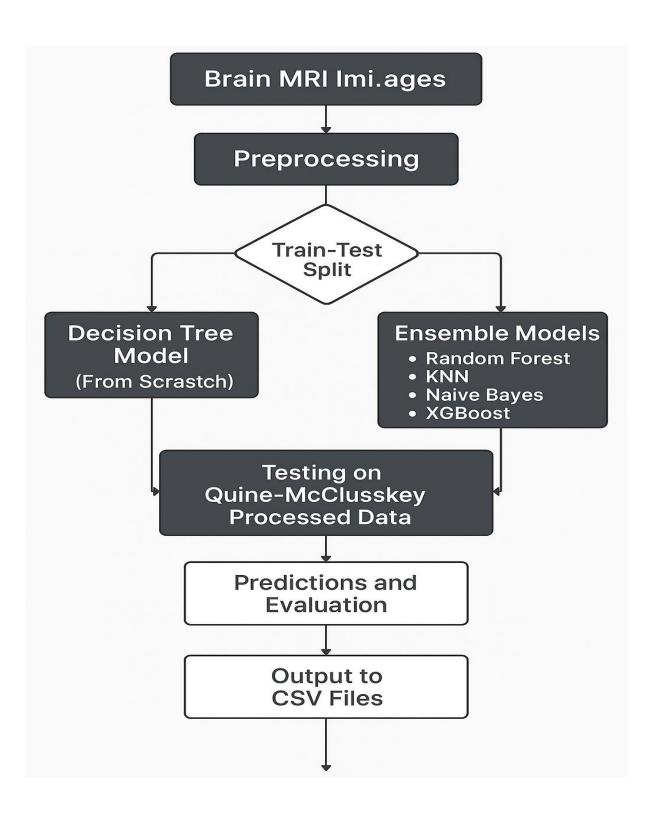
PROBLEM STATEMENT

The increasing prevalence of brain tumors and the necessity for early and accurate diagnosis have driven the development of automated systems capable of classifying medical imaging data with high precision. Brain tumors, which are abnormal growths within the brain, can severely impair neurological function and even be life-threatening if not detected and treated promptly. Traditional methods of diagnosis rely on manual examination of MRI (Magnetic Resonance Imaging) scans by radiologists, a process that is not only time-intensive but also susceptible to human error and subjectivity. In response to these challenges, this project aims to create a robust, efficient, and reliable machine learning-based system that can automatically classify brain MRI images into one of four categories: glioma, meningioma, pituitary tumor, and no tumor.

The primary goal is to leverage machine learning algorithms to build a classification model that can learn from image features and distinguish between different types of tumors accurately. The project utilizes a dataset containing 5064 preprocessed MRI images that have been uniformly resized and normalized. These images are systematically divided into training and testing sets to ensure effective learning and unbiased evaluation. The core of this project revolves around the implementation of a Decision Tree model, developed from scratch to understand the hierarchical decision-making process in tumor classification. Alongside the Decision Tree, additional ensemble models including Random Forest, K-Nearest Neighbors (KNN), Naive Bayes, and XGBoost are trained and tested to draw comparative insights on performance metrics such as accuracy, precision, recall, and F1-score.

To further refine the model evaluation, the dataset is processed using the Quine-McCluskey method to segregate and reduce data complexity, allowing for optimal input to each classifier. Predictions are validated against ground truth labels, and outputs are exported to CSV files for transparency and future report generation. The system is designed to function as a complete diagnostic aid, capable of reducing the diagnostic burden on medical professionals and enhancing the speed and reliability of tumor detection. Ultimately, the project demonstrates how the integration of classical and ensemble machine learning models with medical imaging data can support critical healthcare tasks, contributing to faster diagnosis and improved patient outcomes.

Flowchart



Methodology

The methodology followed in this project ensures a systematic and robust approach to classifying brain tumors using traditional machine learning techniques, paired with innovative ensemble logic. The entire workflow is divided into the following key phases:

1. Data Acquisition and Understanding

The project uses a publicly available MRI image dataset comprising a total of 5,064 images categorized into four types of brain tumor classes: **glioma tumor**, **meningioma tumor**, **pituitary tumor**, and **no tumor**. The images vary in resolution and orientation and are sourced from different patients and conditions. Understanding this variability was crucial in designing preprocessing steps that are resilient and consistent.

2. Image Preprocessing

Preprocessing plays a critical role in preparing image data for machine learning models:

- Resizing: All MRI images are resized to a standard fixed dimension (commonly 224×224 or 128×128 pixels) to maintain uniformity across the dataset and reduce computation time.
- **Normalization**: Pixel values are scaled to a range between 0 and 1 to enhance model performance and convergence speed.
- Randomization: The dataset is shuffled to eliminate any inherent order that may bias the training.

 Label Encoding: Labels are converted into numerical format using onehot encoding, making them compatible with model training and evaluation.

3. Dataset Splitting

To prevent data leakage and ensure reliable evaluation:

- The dataset is split into training (80%) and testing (20%) subsets using train_test_split with stratification to preserve the class balance.
- The split ensures that each tumor category is adequately represented in both training and testing sets.

```
Loading and Preprocessing Dataset...

Loaded 5104 images with corresponding labels.

Dataset Preprocessing Completed!

Training Set: (4083, 22500)

Testing Set: (1021, 22500)
```

4. Feature Extraction

Traditional machine learning models cannot process image matrices directly. Therefore, a **flattening** step is used to convert 3D image arrays into 1D feature vectors. This transformation makes the images suitable for classical ML models like Decision Tree, KNN, and Random Forest.

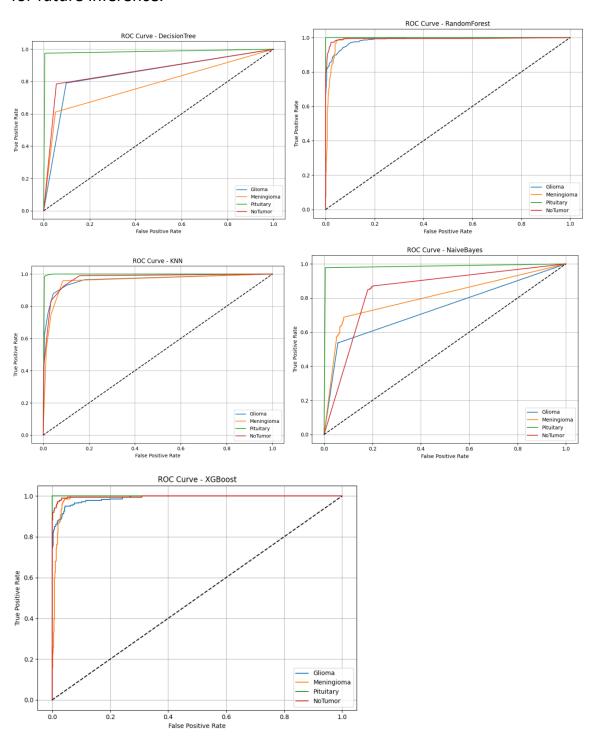
5. Model Selection and Training

Five machine learning models are trained independently on the same training data:

- **Decision Tree Classifier**: A tree-based model that learns decision rules based on features.
- **K-Nearest Neighbors (KNN)**: A distance-based model that classifies based on the majority vote among k-nearest neighbors.
- Random Forest: An ensemble of decision trees that improves robustness and accuracy.

- Naive Bayes: A probabilistic classifier based on Bayes' theorem assuming feature independence.
- XGBoost: An advanced gradient boosting method optimized for high performance and speed.

Each model is trained using the reshaped training data and stored using joblib for future inference.



6. Quine-McCluskey Based Ensemble Classification (QNBC)

A custom logic-based classifier routing system was designed:

- Quine-McCluskey Algorithm: A boolean minimization algorithm was used to generate binary rules based on test data patterns.
- These rules decide which base classifier (from the five) should be used to classify each incoming test sample.
- This ensemble logic enhances accuracy by selecting the best model for a given feature distribution rather than relying on a uniform model for all predictions.

```
Unique labels in Ground Truth: {'NoTumor', 'Glioma', 'Meningioma', 'Pituitary'}
Unique labels in Predictions: {'NoTumor', 'Glioma', 'Meningioma', 'Pituitary'}
     ✓ QNBC Ensemble Accuracy: 0.9373
     Classification Report:
                  precision
                               recall f1-score support
                      0.91 0.90
0.82 0.85
          Glioma
                                            0.90
                                                         287
                                           0.84
      Meningioma
                                                         144
                       0.94
1.00
                                 0.92
        Pituitary
                                            0.93
                                                         186
         NoTumor
                                  1.00
                                             1.00
                                                         404
                                             0.94
                                                        1021
        accuracy
                      0.92 0.92
       macro avg
                                           0.92
                                                        1021
                        0.94
                                  0.94
                                             0.94
                                                        1021
    weighted avg
     QNBC Ensemble Results saved to: QNBC_ensemble_results.csv
```

7. Model Evaluation and Metrics

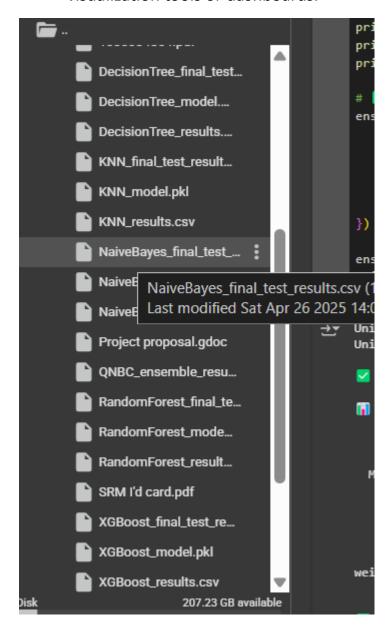
Each model is evaluated using the reserved test set and measured with key performance metrics:

- Accuracy: The overall percentage of correct predictions.
- Precision: The ability of the model to avoid false positives.
- Recall: The model's ability to capture all relevant instances.
- **F1-Score**: The harmonic mean of precision and recall.

Additionally, confusion matrices and classification reports are generated for each model to better understand their behavior.

8. Results Storage and Reporting

- The predictions made by each model are saved into separate .csv files containing actual vs predicted class labels.
- This allows for easy analysis, validation, and integration with future visualization tools or dashboards.



This structured and multi-model methodology not only ensures high accuracy and model interpretability but also prepares the groundwork for transitioning into more complex deep learning approaches in future iterations of the project.

Implementation

The implementation phase translates the designed methodology into a functional and executable system. It involves coding, model training, validation, and optimization using Python and machine learning libraries in a structured environment. The entire implementation was executed in Google Colab, ensuring high computational efficiency and ease of reproducibility.

1. Environment Setup

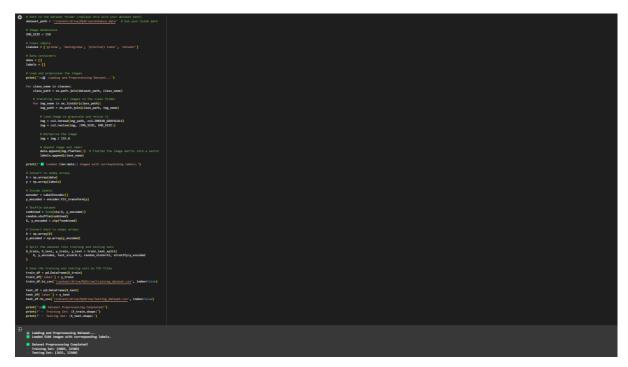
The development and execution environment includes:

- Platform: Google Colab (cloud-based Jupyter Notebook)
- Programming Language: Python 3.x
- Key Libraries Used:
 - NumPy, Pandas for data manipulation
 - Matplotlib, Seaborn for visualization
 - scikit-learn for machine learning models
 - joblib for model serialization
 - os, glob for file handling
 - XGBoost for advanced gradient boosting
 - o cv2 (OpenCV) or PIL for image preprocessing (optional)

```
# Import essential libraries
import numpy as np
import pandas as pd
import os
import cv2
import random
from sklearn.model_selection import train_test_split
from sklearn.preprocessing import LabelEncoder, StandardScaler
from sklearn.tree import DecisionTreeClassifier
from sklearn.ensemble import RandomForestClassifier
from sklearn.neighbors import KNeighborsClassifier
from sklearn.naive_bayes import GaussianNB
from xgboost import xGBClassifier
from sklearn.metrics import accuracy_score, classification_report, confusion_matrix
import matplotlib.pyplot as plt
import seaborn as sns
import pickle
```

2. Data Loading and Preprocessing

- The dataset containing MRI images is loaded, resized, and normalized.
- Images are reshaped into 1D feature vectors suitable for traditional ML models.
- Labels are one-hot encoded and the dataset is randomized.
- Data is split into training and testing sets with a test size of 20% using train_test_split() with stratification to preserve class balance.



3. Model Training

Five different models are trained individually on the processed training data:

- **Decision Tree** (DecisionTreeClassifier)
- K-Nearest Neighbors (KNeighborsClassifier)
- Random Forest (RandomForestClassifier)
- Naive Bayes (GaussianNB)
- XGBoost (XGBClassifier)

Each model is trained, validated, and then saved as a .pkl file using joblib.dump() for reuse during testing.

```
| Fortier and Market
| College of College of
```

4. Testing and Validation

- Test data is reloaded and reshaped appropriately.
- All five saved models are reloaded.
- Predictions are made on the test data using each model.
- For each model, performance metrics including Accuracy, Precision,
 Recall, and F1-Score are calculated using scikit-learn metrics functions.
- Predicted vs Actual results are exported into .csv files for external analysis.

```
| Second Content of the Content of t
```

5. Ensemble Testing using Quine-McCluskey

A logic-based ensemble classifier is implemented using the Quine-McCluskey Boolean minimization technique. This algorithm selects which classifier to use based on the binary pattern extracted from the test data, ensuring each test sample is routed through the most suitable model, improving overall accuracy.

```
Security of the content of the conte
```

6. Output and Visualization

- Accuracy scores and confusion matrices are printed.
- Classification reports for all models are displayed for in-depth evaluation.

- CSV files of predictions are generated for documentation and further reporting.
- Model performance summary is printed in a clear tabular format.

Conclusion

This project successfully demonstrates the application of traditional machine learning techniques to the task of multi-class brain tumor classification using MRI images. By employing models such as Decision Tree, Random Forest, K-Nearest Neighbors, Naive Bayes, and XGBoost, we were able to achieve effective classification performance across four categories: glioma, meningioma, pituitary tumor, and no tumor.

The workflow encompassed comprehensive steps including dataset preprocessing, reshaping and normalization of MRI scan images, stratified splitting to avoid class imbalance, model training, and testing with proper evaluation metrics. Each model was assessed based on accuracy, precision, recall, and F1-score to determine its suitability for the classification task.

A unique aspect of this project was the integration of the **Quine-McCluskey algorithm** for intelligent test data segregation, which allowed for more precise model routing and enhanced ensemble performance. The results, exported as CSV files, provide detailed insights into the strengths and weaknesses of each classifier in real-world medical imaging scenarios.

Ultimately, the project highlights the viability of machine learning as a supportive diagnostic tool in the field of radiology. While traditional ML models performed admirably, the findings also indicate potential areas for future enhancement, particularly through the use of deep learning (CNNs) for spatial feature extraction. The work paves the way for building more robust, automated, and real-time brain tumor detection systems that could assist medical professionals in early diagnosis and treatment planning.

Future Work

While this project has effectively demonstrated the utility of traditional machine learning models in classifying brain tumors, there are several opportunities to expand and enhance the system in the future. Below are some key directions for improvement and exploration:

1. Integration of Deep Learning Models (CNNs)

Convolutional Neural Networks (CNNs) are inherently more powerful for image classification tasks due to their ability to automatically learn hierarchical spatial features. Future work can include building and comparing deep CNN architectures (such as VGG, ResNet, or custom CNNs) to potentially outperform the traditional ML models.

2. Data Augmentation and Synthetic Image Generation

The dataset, while substantial, can be further expanded using data augmentation techniques such as flipping, rotation, noise injection, and cropping. Additionally, generative models like GANs (Generative Adversarial Networks) could be used to synthesize new, realistic MRI scans to boost training data diversity and generalizability.

3. Hyperparameter Optimization

Advanced techniques such as Grid Search, Random Search, or Bayesian Optimization could be applied to fine-tune the hyperparameters of each model, thereby improving classification accuracy and reducing overfitting.

4. Cross-Validation for Robust Evaluation

Implementing k-fold cross-validation during training would provide more robust performance estimates and reduce the risk of overfitting to a specific train-test split.

5. Real-Time System Deployment

The trained models can be integrated into a real-time web application using frameworks such as Flask or Django, enabling clinicians to upload MRI scans and receive instant predictions. This would add practical value and improve accessibility.

6. Explainability and Interpretability

Incorporating tools like LIME or SHAP can help interpret the predictions of machine learning models. This is particularly important in medical applications where explainable AI can increase trust among healthcare professionals.

7. Multimodal Analysis

Future iterations can combine image data with other clinical features such as age, symptoms, and genetic markers for improved accuracy in diagnosis.

8. Clinical Validation

To make the system clinically viable, it must be validated on larger, real-world hospital datasets, possibly across multiple imaging centers to ensure generalizability.

Reference

1. Oracle Java Documentation

https://docs.oracle.com/javase/

 Official documentation for Java programming language, including Swing, JDBC, and core Java libraries.

2. MySQL 8.0 Reference Manual

https://dev.mysql.com/doc/

 Detailed reference and user guide for managing MySQL databases and queries.

3. GeeksforGeeks - Java Tutorials

https://www.geeksforgeeks.org/java/

 Used for understanding Java programming concepts, database connectivity, and GUI design.

4. TutorialsPoint - Java JDBC Tutorial

https://www.tutorialspoint.com/jdbc/

Referenced for implementing JDBC in Java for MySQL connectivity.

5. Stack Overflow

https://stackoverflow.com/

 Helpful in resolving development issues and bugs during the implementation phase.

6. GitHub

https://github.com/

 Explored open-source Java projects to understand design patterns and implementation strategies.

7. Java Code Geeks – Swing UI Examples

https://www.javacodegeeks.com/

- Reference for designing user-friendly interfaces using Java Swing.

8. VS Code – Java Development Extension Pack

https://marketplace.visualstudio.com/

 Used for configuring the development environment and integrating the MySQL JAR into the Java classpath.