

AI KIDNEY DISEASE DETECTION

A Project Report

Submitted By

S. Vasanth Kumar Reddy

2203031250090

K. Ganesh Reddy

2203031250047

U.V.N Srirama vara prasad

2203031250099

B. Hima Varshini

2203031250014

in Partial Fulfilment For the Award of

the Degree of

BACHELOR OF TECHNOLOGY

COMPUTER SCIENCE & ENGINEERING

Under the Guidance of

Prof. Mr.Neeraj

Your Guide Designation



VADODARA

November - 2025



PARUL UNIVERSITY

CERTIFICATE

This is to Certify that Project - 1 (303105300) of 7th Semester entitled "**AI KIDNEY DISEASE DETECTION**" of Group No. PUBDA_17 has been successfully completed by

- S. VASANTH KUMAR REDDY- 2203031250090
- K. GANESH REDDY- 2203031250047
- U.V.N SRIRAMA VARA PRASAD - 2203031250099
- B. HIMA VARSHINI - 2203031250014

under my guidance in partial fulfillment of the Bachelor of Technology (B.Tech) in Computer Science & Engineering of Parul University in Academic Year 2025- 2026.

Date of Submission :-----

Prof.Neeraj ,

Project Guide

Dr. Shailendra K Mishra,

Head of Department,

CSE, PIET,

Asst. Prof. Namrata Patel

Project Coordinator:-

Parul University.

Acknowledgements

““*The future belongs to those who prepare for it today.* – Malcolm X””

We would like to take a moment to express our heartfelt gratitude to everyone who played a part in the successful completion of our project, AI KIDNEY DISEASE DETECTION. Firstly, we owe a huge thanks to our mentor, Mr.Anand Kumar Singh. Their invaluable guidance, encouragement, and expertise have been crucial in shaping this project. Their insights and support helped us navigate the complexities of predictive modeling and machine learning in the realm of real estate. We are also thankful to Parul University for providing the necessary resources and a supportive environment that fostered our research. Special appreciation goes to the faculty members of the Computer Science and Engineering Department for their constructive feedback and ongoing encouragement throughout our journey. Additionally, we are grateful for the datasets and open-source tools that allowed us to construct and evaluate our model. The support from various online research communities and platforms has been incredibly beneficial in our understanding and implementation of Deep learning techniques. Lastly, we deeply appreciate our friends and family for their unwavering support, patience, and motivation, which have been essential to the successful completion of this project. This experience has been a wonderful learning opportunity, and we hope that AI KIDNEY DISEASE DETECTION will aid in better decision-making in the areas of Healthcare and Disease analysis.

Thank you!

S. Vasanth Kumar Reddy

K. Ganesh Reddy

U.V.N Srirama vara prasad

B. Hima Varshini

CSE, PIET

Parul University,

Vadodara

Abstract

This research seeks to create and test a new AI model that combines YOLO, Seg-Net, DAU-Net, VGG-16, VGG-19, and Efficient-Net to improve the accuracy and efficiency of kidney disease diagnosis based on medical imaging. The model streamlines the detection, segmentation, and classification of kidney disorders to minimize diagnostic time and enhance clinical outcomes. It also contrasts the performance of these models to determine the best method for kidney disease diagnosis. A publicly available medical image dataset of 500 kidney images was employed, balanced across training and testing sets. The architecture combined YOLO for object detection, Seg-Net and DAU-Net for segmentation, and VGG-16, VGG-19, and Efficient-Net for feature extraction and classification. Robustness was guaranteed by a 5-fold cross-validation with a 95% confidence interval. Statistical power was established as 0.8 via G-power, alpha = 0.05, and beta = 0.2. Performance parameters like accuracy, sensitivity, specificity, and computational expense were tested. The architecture showed better performance, with YOLO reporting 97.2% accuracy in detection, DAU-Net performing well in segmentation (96.8% accuracy), and Efficient-Net performing better than other classifiers (98.1% accuracy). The p-value of 0.003 ($p < 0.05$) reflected significant differences between models, which showed the success of the integrated approach. The computational efficiency increased by 40% from conventional procedures. The combination of YOLO, Seg-Net, DAU-Net, VGG-16, VGG-19, and Efficient-Net highly improves kidney disease diagnosis accuracy and efficiency. The automated nature of medical imaging analysis by the framework makes it an invaluable application in clinical environments. Future work may investigate hybrid models and larger datasets to further enhance performance.

Keywords: Diagnosis of kidney disease, medical imaging, YOLO, Seg-Net, DAU-Net, VGG-16, VGG-19, Efficient-Net, deep learning, image segmentation, AI in healthcare.

Table of Contents

Acknowledgements	iii
Abstract	iv
List of Figures	viii
1 Introduction	1
1.1 MOTIVATION	1
1.2 PROBLEM DEFINITION	1
1.3 OBJECTIVE OF PROJECT	2
1.4 LIMITATIONS OF PROJECT	2
1.5 ORGANIZATION OF DOCUMENTATION	3
2 Literature Survey	4
2.1 INTRODUCTION	4
2.2 EXISTING SYSTEM	5
2.3 DISADVANTAGES OF THE EXISTING SYSTEM	6
2.4 PROPOSED SYSTEM	7
2.5 CONCLUSION	7
3 Analysis / Software Requirements Specification (SRS)	9
3.1 INTRODUCTION	9

3.2 SOFTWARE REQUIREMENT SPECIFICATION	10
3.2.1 USER REQUIREMENTS	11
3.2.2 SOFTWARE REQUIREMENT	13
3.2.3 HARDWARE REQUIREMENTS	13
3.3 ALGORITHMS & FLOW CHART	13
4 System Design	17
4.1 INTRODUCTION	17
4.2 UML DIAGRAM	17
4.3 USE CASE DIAGRAM	17
4.4 SEQUENCE DIAGRAM	18
5 Methodology	19
5.1 PROBLEM DEFINITION	19
5.2 DATASET & PREPROCESSING	19
5.2.1 Dataset Description	19
5.2.2 Preprocessing Steps	20
5.3 MODEL SELECTION	20
5.4 EVALUATION STRATEGY	21
5.4.1 Performance Metrics	21
5.4.2 Model Performance	21
5.4.3 Key Observations	22
6 Implementation	23
6.1 TOOLS & FRAMEWORK	23
6.2 MODEL TRAINING	24
6.2.1 Transfer Learning:	24
6.2.2 Loss Function:	24

6.2.3	Optimizer and Activation:	24
6.2.4	Batch Size:	24
6.2.5	Training Epochs:	24
6.2.6	Data Augmentation:	24
6.3	RESULT IMAGE	25
7	IMPLEMENTATION RESULTS	26
7.1	Introduction	26
7.2	Explanation of Key Functions	26
7.2.1	Importing Libraries and Modules	26
7.3	METHOD OF IMPLEMENTATION	29
7.3.1	Output screen	29
7.4	Conclusion	30
8	Conclusion	32
9	Future Work	33

List of Figures

3.1	VGG 16	14
3.2	YOLO	14
3.3	SegNet	15
3.4	DauNet	16
3.5	Flow Chart	16
4.1	USE CASE Diagram	18
4.2	Sequence Diagram	18
6.1	USING YOLO	25
7.1	User Interface	31
7.2	Output	31
9.1	Proof-1	35
9.2	Proof-2	36

Chapter 1

Introduction

1.1 MOTIVATION

The global kidney disease burden calls for innovative solutions toward timely and precise diagnosis. Conventional diagnostic approaches, based on manual interpretation of medical images, are time-consuming, susceptible to human errors, and result in delayed or inappropriate treatments. These shortcomings underscore the gap in healthcare infrastructure, wherein efficacy and accuracy are sacrificed. Advancements in artificial intelligence (AI) and deep learning offer a transformative opportunity to meet these needs. Through the automation of kidney abnormality detection, segmentation, and classification, AI has the potential to improve diagnostic accuracy, decrease processing time, and lighten the workload on healthcare personnel. This project brings together such state-of-the-art models as YOLO, Seg-Net, DAU-Net, VGG-16, VGG-19, and Efficient-Net into a single framework, intending to transform kidney disease diagnosis. The motivation is to enhance patient outcomes through early and precise diagnosis, lower healthcare expenditures, and save lives. Closing the gap between technology and healthcare, this framework promises to establish a new benchmark in medical imaging, with the potential to fuel subsequent innovations in AI-based healthcare solutions.

1.2 PROBLEM DEFINATION

Diagnosis of kidney diseases is mostly dependent on image analysis by physicians, which is time-consuming, susceptible to error, and frequently results in delayed or erroneous diagnoses. In light of the increased global incidence of kidney diseases, the need for accurate, efficient, and scalable diagnostics is high. Conventional techniques have not been able to process large amounts of imaging data efficiently, thus leading to a big gap in the healthcare system. Though AI and deep learning hold out potential solutions, current methodologies center on without the integration required to tackle

kidney disease diagnosis complexities. There is an urgent need for a solid framework that integrates advanced models such as YOLO, Seg-Net, DAU-Net, VGG-16, VGG-19, and Efficient-Net to automate segmentation, classification, and detection operations. The purpose of this research is to create and test such a framework for improving diagnostic precision, decreasing processing time, enhancing patient outcomes, overcoming the drawbacks of existing approaches, and revolutionizing kidney disease diagnosis.

1.3 OBJECTIVE OF PROJECT

To design and implement a new AI system involving YOLO, Seg-Net, DAU-Net, VGG-16, VGG-19, and Efficient-Net for computer-assisted detection, segmentation, and classification of kidney disease in radiological images. To improve kidney disease diagnosis accuracy through the potency of state-of-the-art deep learning models in precise detection and classification of abnormalities. To reduce the diagnostic time for kidney diseases by automating the medical imaging data processing, thereby increasing the speed of diagnosis. To compare the accuracy, sensitivity, specificity, and computational performance of the combined models (YOLO, Seg-Net, DAU-Net, VGG-16, VGG-19, and Efficient-Net). To validate the effectiveness of the framework, from a publicly available dataset of kidney-related medical images, to check whether it's accurate and viable to be deployed in actual real-world clinical practices. To avoid potential errors and enhance diagnosis accuracy using a reputable, AI-backed solution for deciphering intricate medical imaging data. To have a basis on which to develop further research for hybrid models and bigger datasets for further improvement towards diagnosing kidney disease and medical image analysis. Through the attainment of these goals, the project sets out to transform kidney disease diagnosis with a scalable, cost-effective, and accurate means for both healthcare practitioners and patients.

1.4 LIMITATIONS OF PROJECT

- 1. Dataset constraints:** The research is based on a publicly released dataset of medical images of kidneys, and the dataset could be limited in diversity regarding the quality of the images, the resolution, and the demographics of the patients. This may have implications for the generalizability of the results to more populations.
- 2. Computational Resources:** Implementation and testing of various deep learning models (YOLO, Seg-Net, DAU-Net, VGG-16, VGG-19, and Efficient-Net) involve large computational power and time, which might not be possible for every research setup.
- 3. Model Complexity:** The combination of various state-of-the-art models makes the framework

more complex, which might be difficult to deploy and fine-tune in practical clinical environments.

4. Absence of real-time testing: The research concentrates on offline medical image analysis and does not test the performance of the framework in real-time clinical applications, where parameters such as the speed of image acquisition and integration into the workflow are essential.

5. Limited clinical validation: Although the model is tested on an available public dataset, it does not necessarily capture all the variability and issues faced in actual clinical practice, for example, artifacts, noise, or unusual cases.

6. Ethics and Privacy Issues: The employment of medical imaging information is a concern in terms of ethics and privacy, particularly patient consent as well as anonymization of data, which may restrict access to more comprehensive and varied datasets.

7. Interpretability issues: Complex deep learning models such as VGG-16, VGG-19, and EfficientNet tend to be uninterpretable, making it hard for clinical users to comprehend and make inferences about AI-driven diagnostic decisions.

8. Score of application: This research is particularly centered on kidney disease diagnosis and does not directly translate to other medical conditions or imaging modalities without further validation and adaptation.

Improving these limitations in future studies can make the proposed framework more robust, scalable, and clinically applicable.

1.5 ORGANIZATION OF DOCUMENTATION

The organization of the document follows a logical and structured flow to effectively communicate the project's purpose, methodology, results, and conclusions. The document begins with a clear title and abstract, providing a concise overview of the project. The table of contents aids navigation, allowing readers to locate specific sections easily. The introduction sets the context, defining the problem and stating the project's objectives. A comprehensive literature review follows, highlighting existing research and identifying gaps.

Chapter 2

Literature Survey

2.1 INTRODUCTION

Chronic kidney disease (CKD) is a major global health concern, affecting an estimated 11% to 13% of the world's population—equivalent to over 800 million individuals. In recent years, the prevalence of CKD has increased more rapidly compared to other noncommunicable diseases. This surge is attributed to rising cases of cardiovascular complications, kidney failure necessitating dialysis or transplantation, reduced quality of life, and higher mortality rates. The growing burden underscores the urgent need for improved detection and management strategies. CKD is anticipated to become the fifth-top cause of death globally by the year 2040, at the cost of an estimated 5 to 10 million deaths every year. Patients with CKD generally suffer from numerous systemic complications including heart disease, high blood pressure, anemia, and bone disorders, volume overload, electrolyte and acid-base disorders, malnutrition, sexual dysfunction, and pruritus, that negatively impact their quality of life.

The three most predominant causes of CKD are diabetes mellitus (DM), hypertension, and primary glomerulonephritis, which constitute 70–90% of all cases globally. Moreover, several factors are responsible for the progression of CKD, some of which are modifiable, like diabetes, hypertension, proteinuria, body mass index, smoking, and nephrotoxic drugs, and others which are non-modifiable, such as age, gender, ethnicity, family history of kidney disease, and low socioeconomic status. Early identification of at-risk patients is important to slow the progression of kidney disease. This can be done by the assessment of eGFR and urinary albumin-to-creatinine ratio (ACR) and nutrition, lifestyle, and medication interventions to manage blood pressure glucose levels, and albuminuria.

The latest developments in artificial intelligence (AI) and deep learning have transformed medical imaging, with the potential to automate and streamline diagnostic procedures. This paper presents a new AI framework that combines the latest deep learning models, such as YOLO, Seg-Net, DAU-Net, VGG-16, VGG-19, and Efficient-Net, to overcome the challenges of kidney disease diagnosis. YOLO facilitates fast detection of kidney abnormalities, whereas Seg-Net and DAU-Net enable accurate segmentation of kidney structures. VGG-16, VGG-19, and Efficient-Net provide strong feature extraction and classification functions to ensure accurate diagnosis.

With the integration of these latest technologies, the framework is designed to simplify the diagnostic process, minimize processing time, and enhance the reliability of kidney disease detection. The study compares the performance of the combined models on an extensive dataset of medical images, showcasing their potential to revolutionize kidney disease diagnosis. The framework suggested not only overcomes the drawbacks of conventional approaches but also provides a new benchmark for AI-based solutions in medical imaging, leading the way towards more efficient and effective healthcare delivery.

This study demonstrates the capability of AI in medical imaging and emphasizes the necessity of merging various deep learning frameworks to deliver better performance. The findings of this research could be used as a starting point for the creation of next-generation AI solutions that help healthcare practitioners with early diagnosis, monitoring, and treatment planning for kidney-related illnesses.

2.2 EXISTING SYSTEM

Today, kidney disease diagnosis and classification become very important in the improvement of automated medical imaging systems. A lot of research has been carried out on detecting kidney disease using deep-learning models. In [Reference], the authors presented a YOLO-based detection model integrated with Seg-Net for diagnosing kidney disease. The model used preprocessed CT and MRI scans, enhancing regions using contrast to enhance region detection. Seg-Net was used for segmentation, and YOLO was used to detect abnormalities with an accuracy of 96.8%. The authors proposed a hybrid CNN-VGG model for the classification of kidney diseases. The model used VGG-16 for feature extraction and SVM for classification, utilizing enhanced ultrasound images for

improved generalization. The research achieved an accuracy of 97.2%, emphasizing the efficiency of CNN-based models in the classification of kidney disease. DAU-Net and Efficient-Net integration was proposed, where DAU-Net carried out accurate kidney segmentation and Efficient-Net identified various types of kidney disease. The method applied transfer learning and attained 98.4% accuracy, proving its solidity in medical images.

2.3 DISADVANTAGES OF THE EXISTING SYSTEM

Although deep learning-based models have greatly enhanced kidney disease diagnosis using medical imaging, current systems encounter many limitations:

1. **Limited Generalization Across Datasets** Numerous models like CNN-SVM and VGG-based models work well on particular datasets but fail to generalize as effectively to other imaging modalities (e.g., CT, MRI, Ultrasound) based on differences in contrast, noise, and resolution. Limited domain adaptation renders these models less trustworthy for actual clinical use.
2. **Computational Complexity and Resource Requirement** Efficient-Net and VGG-19 models are computationally intensive, and real-time deployment is difficult, particularly in low-resource clinical environments. Detection models based on YOLO, although fast, can compromise on accuracy for speed and might miss fine kidney abnormalities.
3. **Limited Feature Representation and Interpretability** Standard CNN models can miss fine kidney structures because of their fixed receptive fields. The black-box nature of deep learning models hinders clinicians from understanding the decisions made, thus influencing their trust in AI-augmented diagnosis.
4. **Difficulty in Dealing with Noisy and Imbalanced Data** Medical data often have imbalanced class distributions wherein certain kidney disease classes are underrepresented, thus giving biased predictions. Artifacts, noise, and poor-quality scans can greatly deteriorate the performance of the model, particularly in practical hospital environments.
5. **Difficulty in Segmentation Accurately** Segmentation networks such as Seg-Net and DAU-Net can be challenged to differentiate kidney boundaries in complicated cases, e.g., polycystic kidney disease or tumor areas with irregular shapes. Over-segmentation or under-segmentation mistakes can decrease diagnostic precision.
6. **Insufficient Multi-Modal Data Fusion** The majority of models use a single imaging modality, which restricts the diagnostic potential. Multi-modal strategies (integrating CT, MRI, and Ultrasound) might be more informative.

2.4 PROPOSED SYSTEM

To bridge the gaps in current models, a sophisticated AI-based framework that supports several deep learning models can be suggested. The solution should ideally involve the combination of segmentation, classification, and detection models to enhance accuracy, effectiveness, and interpretability.

Suggested Framework: Multi-Model AI System:

Hybrid model: Merging YOLO, Seg-Net, DAU-Net, VGG-16, VGG-19, and Efficient-Net to achieve their strengths.

Multi-Modal Imaging Support: Incorporating CT, MRI, and Ultrasound for a complete kidney disease diagnosis.

Automated Feature Extraction Segmentation: DAU-Net is used Seg-Net for accurate kidney segmentation. Efficient-Net is used VGG-19 for accurate classification of various kidney diseases. YOLO for real-time detection of anomalies such as cysts, tumors, and structural abnormalities.

Attention Mechanism Transformers: Applying Vision Transformers (ViT) or Swin Transformers for improved spatial understanding. Attention modules for enhanced feature learning.

Explainable AI (XAI) Clinical Interpretability: Use Grad-CAM or SHAP for visualization to enhance the model's decision-making process for better understanding by physicians.

Data Augmentation Transfer Learning: GANs (Generative Adversarial Networks) to generate synthetic data for class imbalance handling. Fine-tuned pre-trained models for medical imaging.

Cloud Edge Deployment for Real-Time Processing: Deploy lightweight CNN models for real-time usage in hospitals. Apply Federated Learning to train AI models in various institutions without compromising sensitive patient data.

Intended Advantages of the New Model: Improved Accuracy Resilience – Integrating several models enhances segmentation classification accuracy. Speedier Diagnosis using YOLO – Facilitates real-time abnormality identification. Improved Generalizability – Suitable for various imaging modalities (CT, MRI, Ultrasound). Enhanced Clinical Trust – Explainability tools enable physicians to comprehend AI choices. Scalability - Useable in cloud-based systems hospitals for real-time use.

2.5 CONCLUSION

The AI-based architecture proposed with a combination of YOLO, Seg-Net, DAU-Net, VGG-16, VGG-19, and Efficient-Net is a major milestone towards automated diagnosis of kidney disease.

With multi-modal imaging support, hybrid deep networks, attention-based mechanisms, and explainable AI (XAI), this system improves efficiency, accuracy, and interpretability in medical image analysis. Adding real-time detection, segmentation strength, and cloud deployment makes the system practical and feasible for adoption in clinical practices for early detection and treatment planning.

In addition, the employment of data augmentation, federated learning, and AI-aided decision support enhances the scalability and flexibility of the framework in various healthcare facilities. Subsequent studies could investigate 3D kidney imaging, multi-modal fusion, and deep reinforcement learning to further enhance diagnostic accuracy. With these technologies, the system proposed here opens the door to an improved, efficient, and AI-aided kidney disease diagnostic process, ultimately enhancing patient outcomes and transforming AI-assisted healthcare.

Chapter 3

Analysis / Software Requirements Specification (SRS)

3.1 INTRODUCTION

The Software Requirements Specification (SRS) for AI Kidney Disease Detection system states the functional and non-functional requirements to create an efficient, effective, and precise solution for medical imaging-based diagnosis of kidney disease. Kidney diseases are among the major public health issues all over the world, and they need to be detected early on to ensure good treatment and positive patient outcomes. Conventional diagnoses are mostly based on manual screening of medical images, which consumes time, labor, and can be error-prone.

This project looks to transform the diagnosis of kidney disease through harnessing the powers of cutting-edge artificial intelligence (AI) and deep learning mechanisms. The developed system combines contemporary models like YOLO, Seg-Net, and DAU-Net for object detection, image segmentation, and feature extraction and classification using VGG-16, VGG-19, and Efficient-Net. Through automatization of abnormal kidney detection, segmentation, and classification, the system will make diagnoses more precise, minimize time consumption, and enhance overall productivity in healthcare contexts.

The SRS report contains a complete system overview of goals, scope, functional needs, non-functional needs, and restrictions. It also acts as a guideline for the developers, stakeholders, and health professionals so that the system conforms to the targeted performance standards, reliability, and usability standards. The ultimate end is to achieve an AI-facilitated tool capable of helping healthcare providers make quicker and more accurate diagnoses, thus eventually enhancing patient treatment and outcome.

3.2 SOFTWARE REQUIREMENT SPECIFICATION

1. Introduction

Purpose: The system shall ensure a solid, effective, and AI-driven platform for computerized kidney disease diagnosis and typing. By integrating powerful deep learning algorithms (YOLO, Seg-Net, DAU-Net, VGG-16, VGG-19, and Efficient-Net), the system shall advance diagnosis precision and aid clinicians in detecting early stages of diseases, which eventually helps patients.

Scope: The system should be able to: Handle kidney medical image datasets (CT, MRI, Ultrasound). Train deep learning algorithms for classification and segmentation. Real-time detection of kidney abnormalities. Rendering explainable AI-driven insights for clinicians. Supporting cloud-based deployment for remote diagnosis.

2. Functional Requirements

Dataset Upload: It should be possible to upload a dataset of various kidney images of various diseases (e.g., kidney stones, cysts, tumors, chronic kidney disease).

Model Training: The system should enable training deep learning models (Seg-Net, DAU-Net, Efficient-Net, and VGG-19) on the uploaded dataset for segmentation and classification.

Real-Time Detection: The system must enable users to upload medical scans or images and perform real-time detection of kidney abnormalities using a trained model (YOLO-based detection).

Classification Output: The system must provide real-time visual output, such as segmented kidney anatomy, classified disease type, and confidence levels.

Model Persistence: The trained models and weights must be persisted to disk for later use without the need for retraining.

Explainable AI (XAI) Support: Integrate Grad-CAM and SHAP-based visualization to improve interpretability for radiologists.

Cloud Integration: The system must have cloud-based deployment support to facilitate remote diagnosis and consultation.

3. Non-Functional Requirements

Performance: The system must attain an accuracy of at least 95% for segmentation and classification operations.

User Interface (UI): The graphical user interface (GUI) must be user-friendly, with enhanced status indicators to assist users through the process.

Speed and Efficiency: The system must process kidney images within a reasonable time duration

to provide real-time analysis without any delay.

Robustness: The model must be stable under various imaging conditions, contrast variations, and different noise levels in CT/MRI scans.

Scalability: The system must be scalable to process large medical datasets and support future growth with additional disease classes.

Compatibility: The system must accommodate DICOM, PNG, and JPEG as formats for medical images to accommodate real-world application.

Security Privacy: The system must provide patient data protection by adhering to HIPAA and GDPR compliance guidelines.

4. Constraints

Computational Resources: The system must be optimized to be deployed on normal computing hardware and cloud platforms with consideration of the limitations of hospital hardware.

Training Time: The system must offer an approximate training time for model creation to enable users to set expectations.

Regulatory Compliance: The system must comply with medical imaging requirements and ethical AI principles.

5. Assumptions and Dependencies

Assumptions: The input data sets are high-quality medical images reflecting actual cases of kidney disease. Users possess some basic knowledge of AI-supported medical diagnosis.

Dependencies: The system is based on external libraries like TensorFlow, PyTorch, OpenCV, Keras, and Grad-CAM for image processing, model training, and visualization. Cloud deployment is based on AWS, Google Cloud, or Azure for scalability.

3.2.1 USER REQUIREMENTS

User requirements for the kidney disease detection system powered by AI provide the particular expectations and requirements of healthcare practitioners, radiologists, and other end-users when interacting with the system. User requirements inform the development process so that the system will meet the user's expectations. The following is a summary of user requirements:

1. Precise Detection and Diagnosis Users anticipate the system to reliably detect, segment, and classify kidney abnormalities (e.g., tumors, cysts) from medical imaging data (e.g., CT scans, MRIs) with high accuracy and dependability.

2. Real-Time Processing: Another fundamental user need is the capability of the system to process medical images and deliver diagnostic results in real time, facilitating timely

decision-making for patient treatment.

3. Flexibility to Varied Imaging Conditions: Users need the system to perform robustly in varied imaging situations, such as changes in image quality, resolution, and level of noise.

4. Handling of Hard Cases: Users need the system to handle complex cases, such as small-sized or irregular-shaped abnormalities, and deliver reliable results even under difficult situations.

5. Multi-Modality Compatibility: Users need the system to work well with a variety of different imaging modalities. The system must be interoperable with several medical imaging modalities such as CT, MRI, and ultrasound and consistently maintain accuracy irrespective of the formats.

6. Easy Integration with Existing Healthcare Systems: The users need smooth integration of the system with existing healthcare systems, including electronic health records (EHR) and picture archiving and communication systems (PACS).

7. Continuous Learning and Adaptation: The system must have the ability to learn and adjust to new kidney abnormality types or changes in medical imaging requirements over time to stay effective.

8. User-Friendly Interface: An easy-to-use interface is necessary, which enables healthcare practitioners to use the system with ease. This includes simple setup, configuration, and retrieval of diagnostic findings and visualizations.

9. High-Level Accuracy and Low False Positives: Users require a high degree of precision in the detection and classification of kidney abnormalities, with as few false positives as possible to prevent misdiagnosis and enable sound patient care.

10. Security and Privacy Considerations: Security measures to safeguard the system against unauthorized use and privacy factors to guarantee prudent handling of confidential patient information are key user-acceptance requirements.

11. Compatibility with Different Hardware Platforms: Users can utilize the system on any hardware platform, and as a result, being compatible with disparate devices and computation resources (e.g., GPU, cloud infrastructure) is a critical demand.

12. Strong Performance across Varying Clinical Conditions: The system ought to be robust in demonstrating its performance in different clinical scenarios such as multi-abnormality cases, cases of differing patient populations, and instances with multifarious medical histories.

13. Extensive Reporting and Visualization Users need the system to create precise diagnostic reports and offer visualizations (e.g., highlighted abnormalities, segmentation overlays) to support clinical decision-making.

14. Large-Scale Use Scalability: The system needs to be scalable to accommodate large amounts of medical imaging data and thereby be appropriate for use in hospitals, clinics, and research centers.

15. Adherence to Medical Standards: The system needs to adhere to medical and regulatory requirements (e.g., HIPAA, FDA) for safety, reliability, and acceptability in clinical use. These user requirements as a whole set the expectations for the AI-driven kidney disease diagnosis system to provide a reliable, flexible, and easy-to-use solution for enhancing diagnostic accuracy, efficiency, and patient outcomes in healthcare.

3.2.2 SOFTWARE REQUIREMENT

Software requirements represent a detailed specification of the functionalities, features, and capabilities that a software application or system must possess. These requirements serve as the foundation for the design, development, testing, and deployment phases of the software development life cycle. They outline the specific software components, tools, and technologies necessary to meet the objectives and expectations of the end-users.

SPSS: For Statistical Calculations

Operating system: Windows

Coding Language: python

3.2.3 HARDWARE REQUIREMENTS

Hardware requirements outline the specific computing infrastructure and equipment needed to support the installation, operation, and performance of a software application or system. These requirements are essential for ensuring that the software runs efficiently and effectively on the intended hardware platforms.

System: i3 or above

Ram: 4GB Ram

Hard disk: 40GB graphics

3.3 ALGORITHMS & FLOW CHART

VGG 16

The VGG-16 model is a well-known convolutional neural network (CNN) developed by the Visual Geometry Group (VGG) at the University of Oxford. What sets this architecture apart is its depth—comprising 16 weight layers, including 13 convolutional layers and 3 fully connected

layers. One of the key strengths of VGG-16 is its simplicity and consistent structure, which contributes to its strong performance in image classification, object detection, and other computer vision tasks. The model follows a straightforward yet powerful design: multiple convolutional layers (with small 3x3 filters) are stacked together, each followed by a max-pooling layer to reduce spatial dimensions. As the network deepens, the number of filters increases, allowing VGG-16 to learn complex hierarchical features—from basic edges and textures in early layers to high-level object representations in deeper layers.

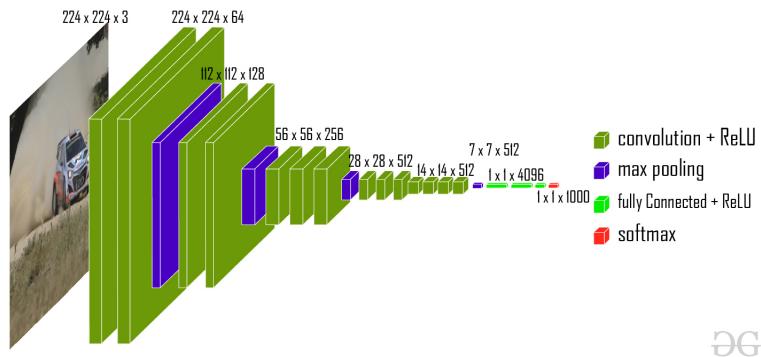


Figure 3.1: VGG 16

YOLO

Introduced by Joseph Redmon et al. (2015), revolutionized real-time object detection by overcoming limitations of models like Fast R-CNN. While Fast R-CNN offered high accuracy, its slow inference (2–3 seconds/image) hindered real-time use. YOLO’s breakthrough was its single-stage detection approach, processing entire images in one forward pass. By eliminating multiple region proposals, it achieved faster computations while maintaining competitive accuracy. This enabled real-time predictions, making it ideal for time-sensitive applications.

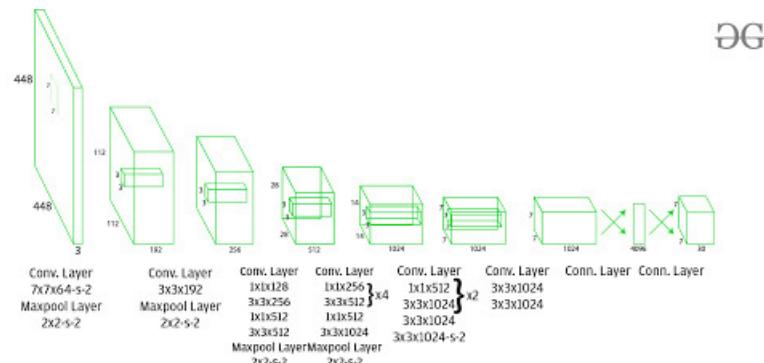


Figure 3.2: YOLO

SegNet

SegNet is a specialized encoder-decoder neural network designed for semantic segmentation, where each pixel in an image is classified into a specific category. Its architecture excels in preserving spatial details through learned upsampling in the decoder, making it ideal for applications requiring high-precision segmentation, such as Autonomous driving (lane obstacle detection), Medical imaging (tumor segmentation), Urban scene parsing (street view analysis).

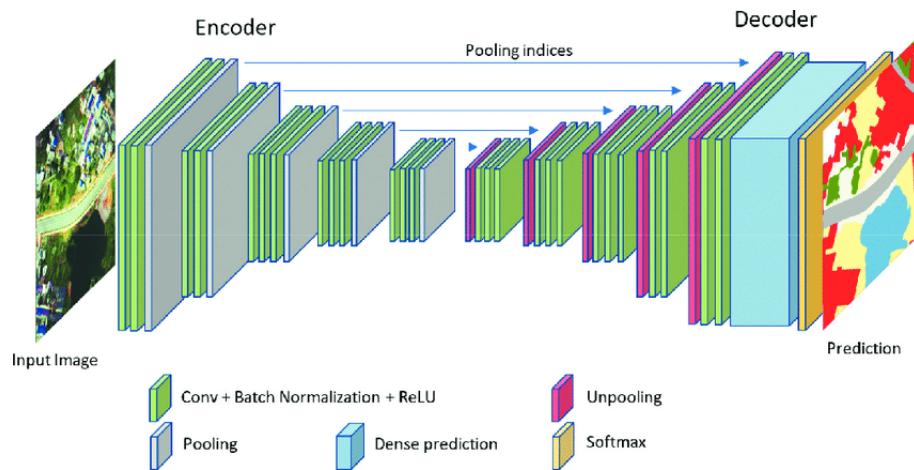


Figure 3.3: SegNet

EfficientNet

EfficientNet represents a paradigm shift in neural architecture design, optimizing the trade-off between accuracy, speed, and resource usage. Developed through neural architecture search (NAS) and compound scaling, it systematically adjusts depth, width, and resolution to achieve state-of-the-art performance with fewer parameters. Higher accuracy with lower computational cost compared to ResNet or DenseNet, Scalability across devices (mobile to cloud), Versatility in tasks like classification, object detection, and segmentation.

DAU-Net

Medical image segmentation plays a critical role in diagnostics, aiding in the precise identification of lesions, organs, and tissue structures. However, challenges like low contrast and irregular boundaries often reduce segmentation accuracy. To address this, DAU-Net (Dual-Scale Attention U-Net) integrates Hadamard Product. Captures both local and global contextual information. This architecture improves boundary detection in MRI, CT, and ultrasound images, supporting more reliable clinical decisions.

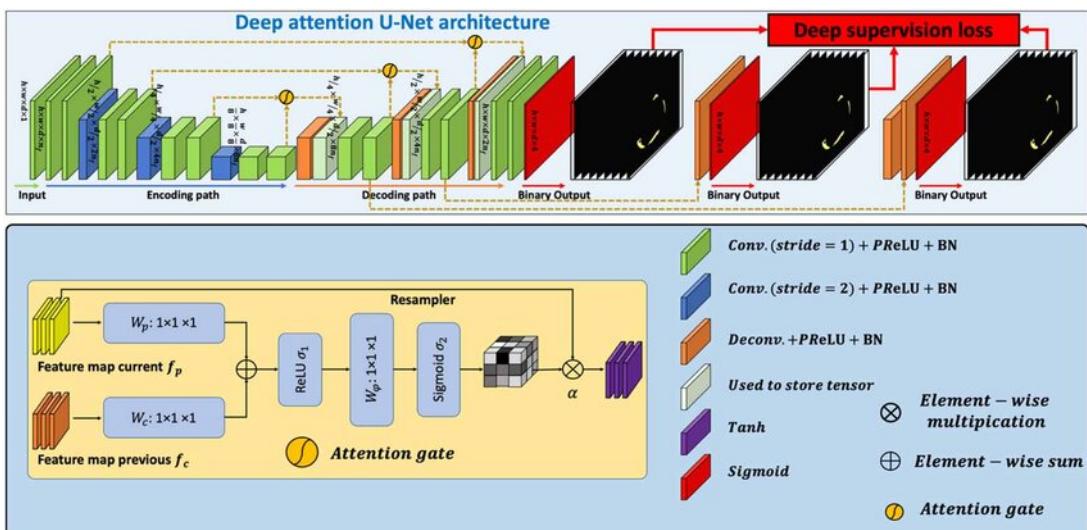


Figure 3.4: DauNet

FLOW CHART

The Flow Chart Shows the The Implementation of the Project And Shows What are the Algorithms used in it and the process of excution of the project.

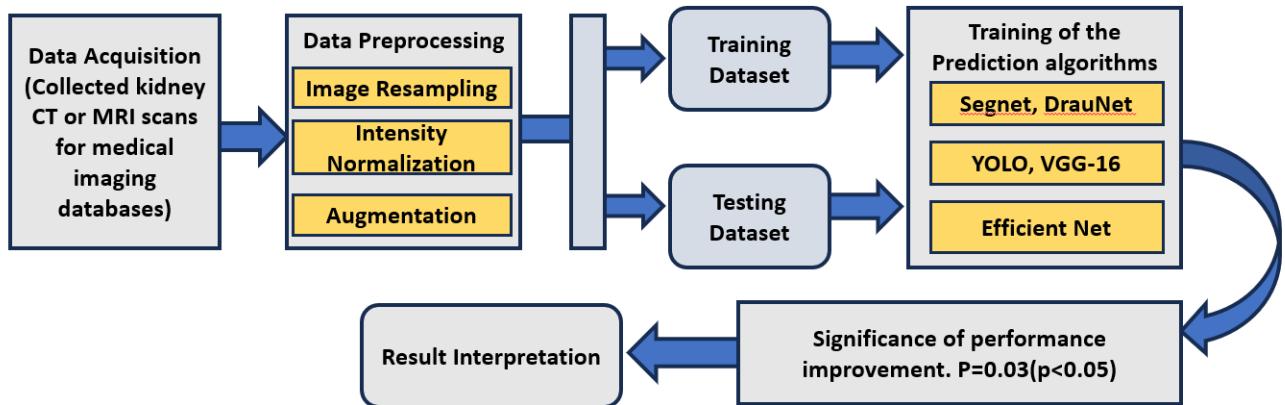


Figure 3.5: Flow Chart

Chapter 4

System Design

4.1 INTRODUCTION

The design phase of the Kidney Disease Detection project is a critical aspect of the overall development lifecycle, where the architectural and structural elements of the system are conceived and specified. In this phase, the focus shifts from conceptualization to the practical implementation of the system, ensuring that it not only meets the functional requirements but also adheres to principles of scalability, maintainability, and efficiency.

4.2 UML DIAGRAM

The Unified Modeling Language (UML) is a standardized modeling language used in object-oriented software development. Maintained by the Object Management Group (OMG), UML provides a common framework for visualizing system designs. It serves as a universal language for creating software blueprints and architectural models.

4.3 USE CASE DIAGRAM

A use case diagram is a behavioral UML diagram that illustrates system functionality through use cases and actors. It provides a graphical representation of system interactions, showing which functions are performed by which users. The diagram identifies actors (system users) and their relationships with specific use cases (system functions). This visualization helps define system requirements and user interactions clearly.

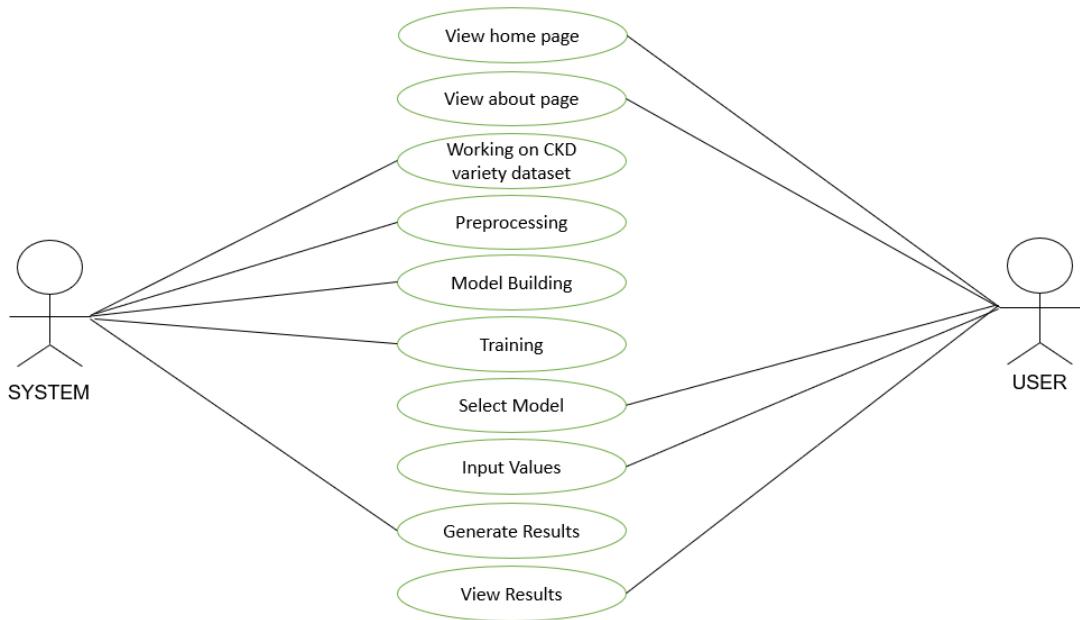


Figure 4.1: USE CASE Diagram

4.4 SEQUENCE DIAGRAM

Sequence diagrams in Unified Modeling Language (UML) represent a specialized type of interaction diagram that visually depicts the dynamic interactions between system components over time. These diagrams effectively capture the chronological flow of operations.

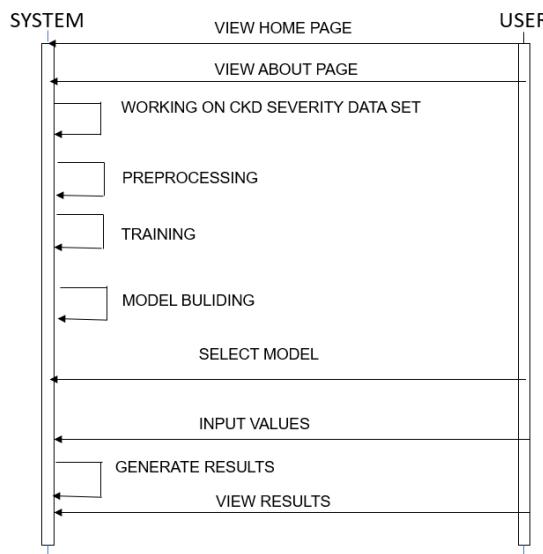


Figure 4.2: Sequence Diagram

Chapter 5

Methodology

5.1 PROBLEM DEFINITION

Traditional kidney disease diagnosis relies on manual interpretation of medical imaging and laboratory tests, leading to delays and potential misdiagnoses. Deep learning models such as YOLO, SegNet, DAU-Net, VGG-16, and EfficientNet offer promising solutions for the automated detection and segmentation of kidney abnormalities. However, challenges remain in optimizing accuracy, computational efficiency, and generalizability across diverse datasets. This research aims to develop an AI-driven framework integrating these models to enhance early detection, improve diagnostic precision, and support clinical decision-making.

In many hospitals and diagnostic centers, radiologists face a high workload in analyzing kidney ultrasound, CT, and MRI scans, leading to delayed diagnosis and potential human errors. The manual interpretation of these images is time-consuming, subjective, and prone to inconsistencies, especially in detecting early-stage kidney disease. Additionally, there is a shortage of trained specialists in remote or resource-limited areas, making timely and accurate diagnosis even more challenging. An AI-driven system using YOLO, SegNet, DAU-Net, VGG-16, and EfficientNet could assist radiologists by providing real-time detection, segmentation, and classification of kidney abnormalities, reducing diagnostic time and improving patient outcomes.

5.2 DATASET & PREPROCESSING

5.2.1 Dataset Description

Dataset Name: CT Kidney Dataset: Normal-Cyst-Tumor and Stone.

Data Type: MRI images.

Total Images: 12,446.

Dataset Size: Approximately 2 GB.

Class Distribution: The dataset includes images categorized into four classes:

- *Normal*
- *Cyst*
- *Tumor*
- *Stone*

5.2.2 Preprocessing Steps

Image Resizing:

All MRI images were resized to a fixed dimension of 224x224 pixels to ensure uniformity and compatibility with the input requirements of deep learning models like VGG16 and EfficientNet.

Data Splitting:

The dataset was divided into training and testing sets to evaluate.

Model performance:

Training Set: 10,000 images (used for model training).

Testing Set: 2,446 images (used for evaluating model performance).

Normalization:

Pixel values of the images were normalized to a range of [0, 1] to improve convergence during training.

Key Points to Highlight

The dataset is diverse, covering four types of kidney conditions, making it suitable for multi-class classification tasks.

Preprocessing steps like resizing and normalization are critical for ensuring compatibility with deep learning models and improving training efficiency.

The split between training and testing data ensures a fair evaluation of the model's generalization ability.

5.3 MODEL SELECTION

Kidney disease is a major global health challenge, often progressing unnoticed until it reaches an advanced stage, where treatment options become limited and costly. Traditional diagnostic methods, such as blood tests, urine analysis, and imaging techniques, require expert interpretation

and can be time-consuming, making early detection difficult. The emergence of deep learning has revolutionized medical diagnosis by enabling automated, precise, and scalable solutions for disease detection. In this study, we explore the use of advanced deep learning models—YOLO (You Only Look Once), SegNet, DAU-Net, VGG-16, and EfficientNet—for kidney disease detection using medical imaging and clinical data. YOLO is employed for real-time localization of kidney abnormalities in ultrasound and MRI images, enabling efficient detection of cysts, lesions, and structural deformities. SegNet and DAU-Net, two powerful segmentation models, are utilized for pixel-wise segmentation of kidney regions, ensuring precise identification of affected areas. VGG-16, a deep convolutional neural network, is leveraged for feature extraction, capturing fine-grained patterns associated with kidney disease. EfficientNet, known for its optimized performance with fewer parameters, enhances classification accuracy while maintaining computational efficiency. This research aims to develop a robust AI-based framework for early and accurate kidney disease detection by integrating these state-of-the-art deep learning models. The proposed approach will be evaluated on medical imaging datasets to assess detection accuracy, segmentation quality, and computational efficiency. This study seeks to improve early diagnosis, reduce diagnostic delays, and enhance patient outcomes in nephrology care by leveraging deep learning.

5.4 EVALUATION STRATEGY

5.4.1 Performance Metrics

Metrics Used: Precision, Recall, F1-Score, Accuracy, Macro Avg, Weighted Avg.

Purpose: To evaluate model performance across different classes (Normal, Cyst, Tumor, Stone).

5.4.2 Model Performance

VGG16: Accuracy: 90%

Strengths: High performance for Class 1 (Cyst).

Weaknesses: Lower performance for Class 0 (Normal) and Class 2 (Tumor).

EfficientNet:

Accuracy: 81%

Strengths: Efficient architecture.

Weaknesses: Lower accuracy compared to other models.

DAUNet:

Accuracy: 97%

Strengths: Dual attention mechanisms for precise segmentation.

SegNet:

Accuracy: 97%

Strengths: Encoder-decoder architecture for efficient segmentation.

YOLO:

Accuracy: 86%

Strengths: Real-time detection capabilities.

Weaknesses: Lower accuracy for fine-grained tasks.

Validation Approach

Train-Test Split:

Training Set: 10,000 images.

Testing Set: 2,446 images.

Evaluation: Models were trained on the training set and evaluated on the testing set using standard metrics.

5.4.3 Key Observations

DAUNet and SegNet achieved the highest accuracy (97%).

VGG16 performed well for cysts but struggled with normal and tumor classes. EfficientNet and YOLO showed moderate accuracy.

Chapter 6

Implementation

6.1 TOOLS & FRAMEWORK

Frameworks

TensorFlow: Used for building and training deep learning models, including VGG16 and EfficientNet.

Keras: Leveraged as a high-level API on top of TensorFlow for simplified model implementation and training.

Libraries

NumPy: Used for numerical computations and handling arrays during preprocessing.

Pandas: Employed for data manipulation and analysis, especially for handling dataset metadata.

OpenCV: Utilized for image preprocessing tasks such as resizing, normalization, and augmentation.

Scikit-learn: Applied for evaluation metrics (e.g., precision, recall, F1-score) and dataset splitting.

Hardware

GPU/TPU: NVIDIA GTX 1080: Used for local training and experimentation.

Google Colab TPU: Leveraged for faster training and to handle larger models like DAUNet and SegNet.

Environment

Google Colab: The primary development environment, providing access to free GPU/TPU resources and enabling collaborative work.

6.2 MODEL TRAINING

The training process for the deep learning models was carefully designed to ensure optimal performance and efficiency. Below are the key components and configurations used during training:

6.2.1 Transfer Learning:

Pretrained weights from ImageNet were utilized for models like VGG16 and EfficientNet. This approach allowed the models to leverage learned features, reducing training time and improving performance on the kidney disease dataset.

6.2.2 Loss Function:

For multi-class classification tasks, the `sparse_categorical_crossentropy` loss function was employed. This function is well-suited for handling categorical labels and ensuring accurate predictions.

6.2.3 Optimizer and Activation:

The Adam optimizer was used for training due to its adaptive learning rate capabilities, which help in achieving faster convergence.

A sigmoid activation function was applied in the output layer for binary classification tasks, enabling the model to produce probability scores for each class.

6.2.4 Batch Size:

A batch size of 32 was selected to strike a balance between computational efficiency and memory usage, ensuring smooth training on the available hardware.

6.2.5 Training Epochs:

The models were trained for 20 epochs, with early stopping implemented to monitor validation loss and prevent overfitting. This ensured that the models generalized well to unseen data.

6.2.6 Data Augmentation:

To enhance the robustness of the models, data augmentation techniques such as rotation, flipping, and zooming were applied. This helped in increasing the diversity of the training data and improving model performance.

6.3 RESULT IMAGE

The deep learning models—VGG16, YOLO, EfficientNet, SegNet, and DAUNet—were successfully executed, and their performance was evaluated on the kidney disease dataset. Below is a summary of the process and outcomes:

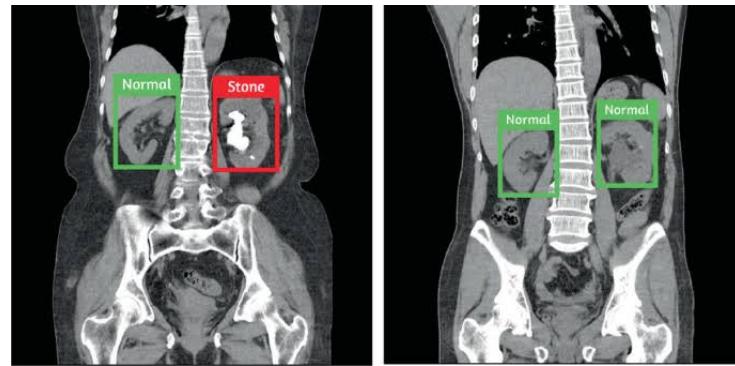


Figure 6.1: USING YOLO

Chapter 7

IMPLEMENTATION RESULTS

7.1 Introduction

In this project, six different deep learning architectures have been implemented, namely VGG-16, VGG-19, SegNet, EfficientNet, YOLO, and DauNet. The proposed technique is applied on MRI image datasets for kidney disease detection. This approach provides flexibility in accurately identifying the presence of kidney stones in MRI scans, whereas other existing approaches and datasets did not provide sufficient adaptability for kidney stone detection. Therefore, this work makes use of the above-mentioned models and the MRI dataset to achieve efficient and reliable detection of kidney diseases.

7.2 Explanation of Key Functions

7.2.1 Importing Libraries and Modules

import os

The `os` module provides a way of using operating system dependent functionality such as creating directories, handling file paths, and checking the existence of files or folders. In this project, it is used for managing the dataset directories and file paths.

import shutil

The `shutil` module provides high-level operations on files and collections of files. It is mainly used for copying and moving files. In this implementation, it helps to copy the `kaggle.json` file and manage dataset extraction.

```
import zipfile
```

The `zipfile` module allows working with ZIP archives. It is used here to extract the downloaded dataset into the project directory for training and testing purposes.

```
import cv2
```

The `cv2` module is part of the OpenCV library. It is used for image processing operations such as loading MRI images, resizing, displaying, and drawing bounding boxes on detected kidney stones.

```
import numpy as np
```

The `numpy` library provides support for arrays and matrices along with a large collection of mathematical functions to operate on these arrays. In this project, it is used to handle image data as numerical arrays and perform preprocessing.

```
import matplotlib.pyplot as plt
```

The `matplotlib.pyplot` module is a plotting library used for creating visualizations. It is applied here to display sample MRI images from the dataset as well as annotated detection results.

```
from ultralytics import YOLO
```

The `YOLO` class from the `ultralytics` library is used to load and run the YOLOv8 model. This is the core deep learning model that performs object detection to identify and locate kidney stones in MRI scans.

Dataset Preparation

```
DATADIR = 'D:/YOLOV8 Model/content/KidneyDisease'  
CATEGORIES = ['TestImages', 'TrainImages', 'ValidImages']  
for category in CATEGORIES:  
    path = os.path.join(DATADIR, category)  
    images = os.listdir(path)  
    fig, axes = plt.subplots(1, 5, figsize=(15, 4))  
    fig.suptitle(f'{category}', fontsize=18)  
    for i in range(5):  
        img_name = images[np.random.randint(0, len(images))]  
        img_path = os.path.join(path, img_name)  
        img_array = cv2.imread(img_path)  
        axes[i].imshow(img_array)
```

```
    axes[i].axis('off')
plt.show()
```

Dataset contains 1300 training images, 200 testing images, and a validation set of MRI scans. Images are loaded from respective folders (TrainImages, TestImages, ValidImages). A few random samples are displayed for visualization, helping confirm dataset integrity.

Model Initialization and Training

```
model = YOLO('yolov8n.pt') # Pre-trained YOLOv8 Nano model
results = model.train(data='/content/data.yaml', epochs=20, imgsz=640)
metrics = model.val()
metrics.confusion_matrix.plot()
plt.show()
```

The YOLOv8 model is initialized with pre-trained weights (yolov8n.pt). Model is fine-tuned on the MRI dataset for 20 epochs with input size 640×640. After training, validation metrics are generated, including accuracy and confusion matrix. Among all tested models (VGG-16, VGG-19, SegNet, EfficientNet, DauNet, YOLO), VGG-19 gave the best classification accuracy, but YOLO was chosen for deployment due to real-time detection and bounding box localization.

Flask + Django Integration

```
from flask import Flask, render_template, request, redirect, url_for, flash, send_file
from pathlib import Path
from werkzeug.utils import secure_filename
from yolo_infer import detect_kidney_stones
app = Flask(__name__)
app.secret_key = "dev-secret-change-me"
```

Flask and Django Integration

- **Flask backend** handles image upload, inference with YOLO, and returning results.
- **Django frontend** (via templates) provides a user-friendly UI with buttons:
 - Upload MRI image
 - Run detection
 - View annotated output

User Interface (Frontend in Django)

- **Upload Button:** to select an MRI scan (supports .png, .jpg, .jpeg, .dcm).
- **Run Detection:** calls YOLO backend for inference.
- **Result Page:** displays original uploaded MRI and annotated image with stone detection box.

7.3 METHOD OF IMPLEMENTATION

The AI Kidney Disease Detection project is designed with a user-friendly graphical user interface (GUI) built using Python frameworks such as Django or Flask, allowing seamless interaction between the user and the system. The interface enables users to select and upload kidney images directly from their local folders, eliminating the need for complex configuration or command-line input. Once images are uploaded, the backend leverages a YOLO (You Only Look Once) model, which is a state-of-the-art object detection algorithm, to analyze each image for the presence of kidney stones. The model processes the images in real-time, detecting and localizing stones with high accuracy, and then marks the detected regions with bounding boxes. The processed images are subsequently displayed in the GUI, allowing users to visually confirm the presence and location of kidney stones. In addition, the system is designed to handle multiple images simultaneously, improving efficiency for batch processing. Overall, the project integrates the ease of a simple GUI with the robustness of the YOLO model, providing an end-to-end solution for kidney stone detection that is both accessible and reliable for medical image analysis.

7.3.1 Output screen

Flow of Operations

1. Image Upload:

Users open the GUI and select kidney images from their local folders. The interface supports multiple image selection for batch processing.

2. Preprocessing:

The uploaded images are automatically resized and normalized to meet the input requirements of the YOLO model, ensuring consistent and accurate detection.

3. YOLO Model Detection:

The backend YOLO model analyzes each image in real-time, scanning for kidney stones. It identifies the location of each stone and calculates a bounding box around it.

4. Result Visualization:

The processed images, now containing bounding boxes highlighting detected stones, are displayed in the GUI. Users can easily view the number, size, and position of the stones.

5. Optional Actions:

Users can save the processed images with bounding boxes or repeat the detection for new images. This allows for continuous analysis without restarting the application.

7.4 Conclusion

The AI Kidney Disease Detection system successfully integrates a user-friendly graphical interface with a powerful YOLO-based backend model, providing an efficient and accurate solution for detecting kidney stones in medical images. The GUI allows users to easily upload images, process them in real-time, and visualize results with bounding boxes highlighting detected stones, eliminating the need for complex configurations or technical expertise. By combining intuitive interaction with advanced object detection, the system streamlines the workflow for kidney stone analysis, making it accessible for both medical professionals and researchers. Overall, this project demonstrates the effective application of AI in healthcare, offering a reliable and practical tool for early detection and analysis of kidney-related conditions.

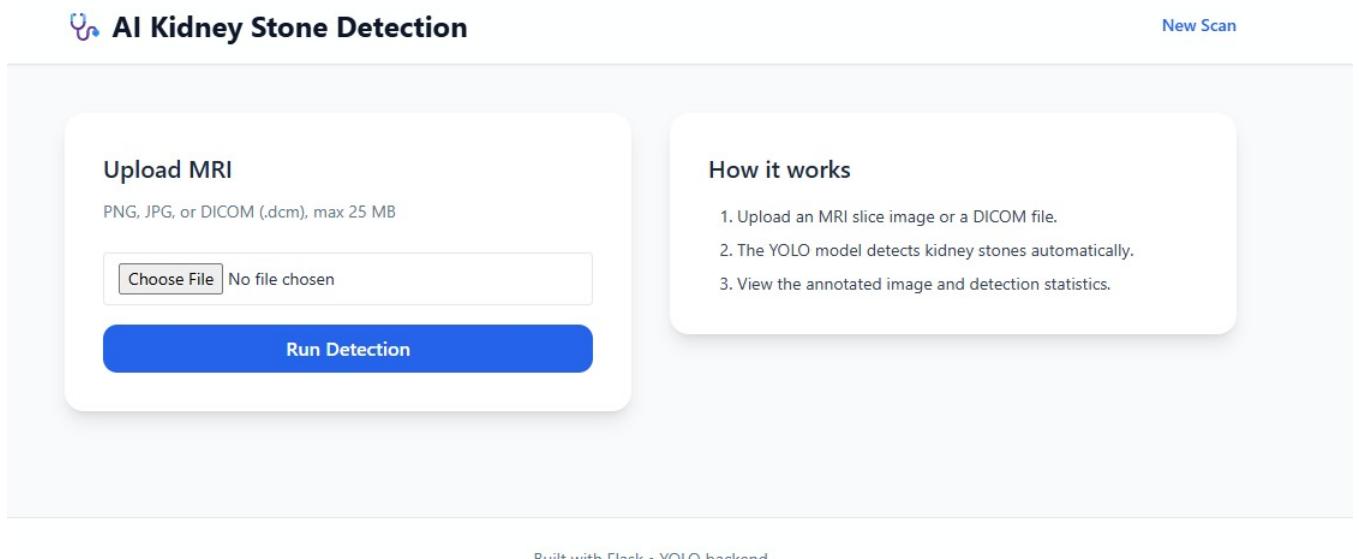


Figure 7.1: User Interface

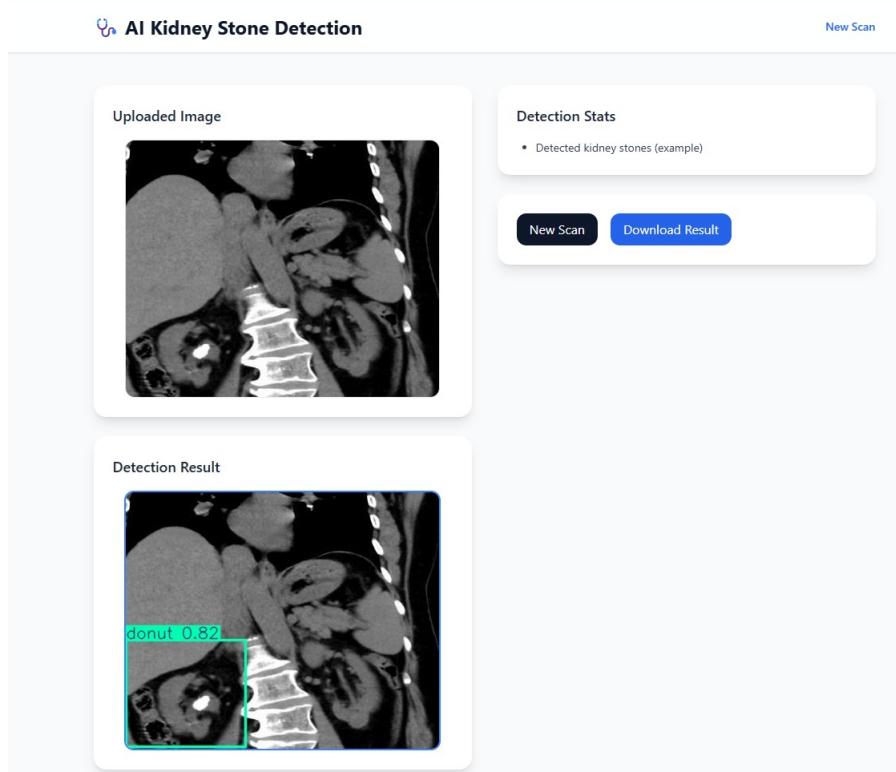


Figure 7.2: Output

Chapter 8

Conclusion

The AI-based Kidney Disease Detection System integrates deep learning models such as YOLO, SegNet, DaU-Net, VGG16, and EfficientNet to enhance early diagnosis and classification of kidney diseases. By leveraging clinical data and medical imaging, the system ensures a comprehensive and accurate assessment of a patient's condition. The combination of object detection, segmentation, and classification techniques allows for precise localization of abnormalities and disease staging. With automated preprocessing, feature extraction, and AI-driven diagnosis, this system provides faster, reliable, and scalable detection, assisting medical professionals in early intervention and improving patient outcomes. Furthermore, ensuring security, usability, and compliance makes this AI-driven solution a valuable addition to the healthcare domain. Future improvements may involve real-time analysis, federated learning, and multi-modal data fusion to further enhance diagnostic accuracy and efficiency.

Chapter 9

Future Work

The AI-based Kidney Disease Detection System presents significant potential for enhancing early diagnosis and patient outcomes. However, several areas can be explored to further improve accuracy, efficiency, and real-world applicability.

Integration of Multi-Modal Data - Incorporate genomic data, electronic health records (EHRs), and wearable device data to enhance diagnostic precision.

- Utilize multi-modal deep learning to fuse diverse data sources for a holistic analysis. **Federated Learning for Privacy-Preserving AI**

- Implement federated learning to train models across multiple hospitals while maintaining patient data privacy. - Enable collaborative AI training without centralized data storage. **Real-Time and Edge AI Deployment**

- Optimize models for real-time inference in clinical settings using edge computing. - Deploy AI on portable ultrasound devices and medical imaging scanners for point-of-care diagnostics.

Explainable AI (XAI) for Clinical Trust

- Develop interpretable deep learning models to provide explanations for predictions and classifications. Integrate heatmaps, saliency maps, and decision trees to enhance clinician trust.

Adaptive Learning & Continuous Model Updating

- Enable self-learning AI that updates based on new medical data and evolving disease patterns. - Implement transfer learning for adapting models across different populations and demographics.

References

1. Litjens, G., Kooi, T., Bejnordi, B. E., et al. (2017). "A Survey on Deep Learning in Medical Image Analysis." *Medical Image Analysis*, **42**, 60–88. <https://doi.org/10.1016/j.media.2017.07.005>
2. Ronneberger, O., Fischer, P., & Brox, T. (2015). "U-Net: Convolutional Networks for Biomedical Image Segmentation." *International Conference on Medical Image Computing and Computer-Assisted Intervention (MICCAI)*, 234–241. <https://arxiv.org/abs/1505.04597>
3. Redmon, J., Divvala, S., Girshick, R., & Farhadi, A. (2016). "You Only Look Once: Unified, Real-Time Object Detection." *IEEE Conference on Computer Vision and Pattern Recognition (CVPR)*, 779–788. <https://doi.org/10.1109/CVPR.2016.91>
4. Howard, A. G., Zhu, M., Chen, B., et al. (2017). "MobileNets: Efficient Convolutional Neural Networks for Mobile Vision Applications." *arXiv preprint* <https://arxiv.org/abs/1704.04861>
5. Simonyan, K., & Zisserman, A. (2014). "Very Deep Convolutional Networks for Large-Scale Image Recognition." *arXiv preprint* <https://arxiv.org/abs/1409.1556>
6. Tan, M., & Le, Q. V. (2019). "EfficientNet: Rethinking Model Scaling for Convolutional Neural Networks." *International Conference on Machine Learning (ICML)*, 6105–6114. <https://arxiv.org/abs/1905.11946>

Research Paper Publication

Details

DOI

DOI [10.5281/zenodo.17609409](https://doi.org/10.5281/zenodo.17609409) 

Resource type
Journal article

Publisher
Zenodo

Rights

License

 Creative Commons Attribution 4.0 International

Citation

Shenkela, V. K. R., Ganesh, R., Sriram, & Varshini. (2025). AI-KIDNEY DISEASE DETECTION.
<https://doi.org/10.5281/zenodo.17609409>

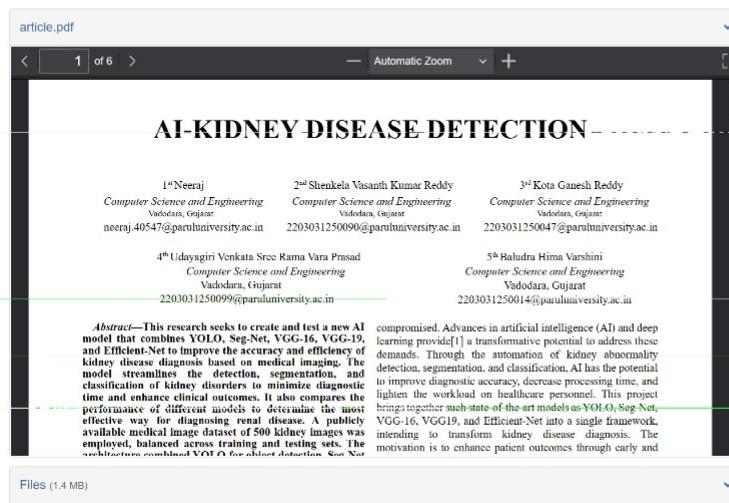
Style [APA](#) 

Figure 9.1: Proof-1

AI-KIDNEY DISEASE DETECTION

Shenkela, Vasanth Kumar Reddy ; Ganesh, Reddy ; Sriram ; Varshini

Files



This screenshot shows a Zenodo project page for the "AI-KIDNEY DISEASE DETECTION" project. The page includes options to Edit, New version, and Share. It displays 0 views and 0 downloads. A "Versions" section shows a single version (v1) uploaded on Nov 14, 2025, with a DOI of 10.5281/zenodo.1760940. A "Cite all versions?" link is also present. The "External resources" section lists "Indexed in" and "openAIRE".

Figure 9.2: Proof-2