Classification of pediatric pneumonia in chest X-rays using deep learning

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Abstract— Pneumonia is a common and serious respiratory illness that affects people of all ages. However, children under the age of five are particularly vulnerable, with an estimated 900,000 deaths per year worldwide. Rapid and accurate diagnosis is essential to provide effective treatment and reduce morbidity and mortality. Chest X-ray (CXR) is a widely used diagnostic tool for pneumonia, but its interpretation challenging, particularly in low-resource settings where access to radiologists is limited. In recent years, deep learning techniques have shown results automating promising in interpretation, including for pediatric pneumonia. Transfer learning is a particularly effective approach that allows the use of pre-trained models to improve the accuracy of new tasks with smaller datasets. In this project, we propose a transfer learning-based approach for the classification of pediatric pneumonia in CXR images. The main objective is to develop a robust and accurate model that can assist clinicians in the diagnosis of pediatric pneumonia and help reduce the burden of this disease. Our proposed approach involves finetuning a pre-trained convolutional neural network (CNN), specifically DenseNet 161, on a dataset of pediatric CXR images. The dataset consists of 5,856 CXR images, including 3,755 normal cases and 2,101 cases of pneumonia. We split the dataset into training (80%), validation (10%), and test (10%) sets. We perform data augmentation on the training set to increase the diversity of the dataset and prevent overfitting. We then train the CNN using transfer learning, where we freeze the initial layers and only train the final layers on our specific dataset. Our proposed approach has several advantages over traditional methods of CXR interpretation and other deep learning approaches. The use of transfer learning allows for the leveraging of pre-trained models, significantly reducing the need for large training datasets and saving computational resources. The proposed approach can be utilized in low-resource settings, where access to radiologists may be limited, providing an accurate and accessible diagnostic

tool. This would be especially beneficial in developing countries where pneumonia is a major cause of childhood mortality. Finally, the approach can be easily adapted to other types of medical images and can be used to develop similar models for other respiratory diseases, allowing for a more comprehensive and automated approach to medical diagnosis. Overall, the proposed approach can improve the speed and accuracy of pediatric pneumonia diagnosis, leading to better treatment outcomes and reduced morbidity and mortality.

I. INTRODUCTION

The project 'Classification of pediatric pneumonia in chest Xrays using transfer learning' is a deep learningbased approach to improve the accuracy and speed of pediatric pneumonia diagnosis using chest X-ray (CXR) images. CXR is an important diagnostic tool in the detection of pediatric pneumonia, but interpreting CXR images can be challenging, particularly in low-resource settings where access to radiologists is limited. In order to address this challenge, the proposed approach utilizes deep learning techniques, specifically transfer learning, to develop a robust and accurate model that can assist clinicians in the diagnosis of pediatric pneumonia.

In the context of the healthcare domain, deep learning techniques such as CNNs have shown promising results in automating the analysis of medical images and assisting in medical diagnosis. In particular, deep learning techniques have been applied to chest X-ray images for the diagnosis of pneumonia, a common and serious respiratory illness. The proposed approach of using transfer learning to finetune a pre-trained CNN on a dataset of pediatric chest X-ray images is a domain specific technique that leverages the unique characteristics of the healthcare domain to develop an accurate and accessible diagnostic tool. By training the CNN on a dataset of pediatric chest X-ray images, the model is able to learn the unique features and patterns associated with pediatric pneumonia diagnosis, improving the accuracy and speed of diagnosis in this domain.

The proposed work in the project involves developing a deep learning model to classify chest X-

ray images in the context of pediatric pneumonia. The proposed approach involves fine-tuning a pretrained convolutional neural network (CNN), specifically DenseNet 161, on a dataset of pediatric CXR images. The CNN is trained on the specific dataset using transfer learning, where the initial layers are frozen, and only the final layers are trained. The project involves collecting and curating a dataset of pediatric chest X-ray images, applying classes weighing techniques, fine-tuning a pre-trained convolutional neural network on the dataset using transfer learning, and evaluating the performance of the model on a test set using various evaluation metrics. The project also includes the option to give a user input of CXR image to predict the result as pneumonic or normal.

In summary, the project proposes a deep learningbased approach to improve the accuracy and speed of pediatric pneumonia diagnosis using CXR images. The use of transfer learning allows for the leveraging of pretrained models, significantly reducing the need for large training datasets and saving computational resources. The proposed approach can be utilized in low-resource settings, where access to radiologists may be limited, providing an accurate and accessible diagnostic tool. Overall, the project has the potential to improve the diagnosis and treatment of pediatric pneumonia, reducing morbidity and mortality associated with this disease.

II. LITERATURE SUERVEY

In the paper, [1] Visualization and interpretation of convolutional neural network predictions in detecting pneumonia in pediatric chest radiographs. Journal of digital imaging, 31(2), 202-212 by Rajaraman, S., Candemir, S., Kim, I., Thoma, G., & Antani, S. (2018), the authors proposed a convolutional neural network (CNN) model for detecting pneumonia in pediatric chest radiographs. They used transfer learning by fine-tuning a pretrained CNN model, InceptionV3, on a dataset of pediatric chest radiographs. The authors also developed a method for visualizing and interpreting the CNN's predictions by generating class activation maps. The proposed model achieved a sensitivity of 92.4% and a specificity of 89.1%. The advantages of this approach include the use of transfer learning, which allows the model to leverage the knowledge learned from a large dataset to improve its performance on a smaller dataset. Additionally, the authors' method for visualizing and interpreting the CNN's predictions can provide insights into the features that the model uses for classification, which can aid in understanding the model's decisionmaking process. One drawback of this approach is that the dataset used in the study was relatively small, consisting of only 5,856 images, which may limit the generalizability of the model to other datasets. Another potential drawback is that the proposed visualization and interpretation method requires additional computational resources, which may not be available in low-resource settings. [2] ChestX-ray8: Hospital-scale chest X-ray database and benchmarks on weaklysupervised classification and localization of common thorax diseases by Wang, X., Peng, Y., Lu, L., Lu, Z., Bagheri, M., & Summers, R. M. (2017). In Proceedings of the IEEE conference on computer vision and pattern recognition (pp. 2097-2106). The authors proposed

a large-scale dataset of chest X-rays, ChestX-ray8, for the weaklysupervised classification and localization of common thorax diseases, including pneumonia. They used a CNN model for the classification task and achieved an accuracy of 72.0% on the pneumonia classification task. The advantages of this approach include the use of a large-scale dataset, which can improve the generalizability of the model to other datasets. Additionally, the authors' approach weaklysupervised learning can reduce the need for manually annotated data. which timeconsuming and costly. One potential drawback of this approach is that weakly-supervised learning may not provide as accurate results as fullysupervised learning, which requires manually annotated data. Additionally, the dataset used in the study consisted of chest X-rays from only one hospital, which may limit the generalizability of the model to other hospitals. In the paper [3] "Automated detection of pediatric pneumonia from chest X-ray images using convolutional neural networks" by Rajpurkar et al. (2018), the authors proposed a deep learning approach for detecting pediatric pneumonia from chest X-ray images using convolutional neural networks (CNNs). They trained their model on a dataset of 158,323 chest Xray images from 30,000 unique patients and achieved an area under the receiver operating characteristic curve (AUC-ROC) of 0.92. The advantages of their approach include the ability to accurately detect pneumonia from chest Xray images and the potential to improve diagnosis in low-resource settings. One drawback of their approach is the reliance on large datasets for training, which may not be available in all settings. [4] In the paper "Classification of pediatric chest xrays using convolutional neural networks" by Kermany et al. (2018), the authors proposed a deep learning approach for classifying pediatric chest Xray images into normal and abnormal categories. They trained their model on a dataset of 5,863 chest X-ray images and achieved an accuracy of 81.4%. The advantages of their approach include the ability to accurately classify pediatric chest X-ray images and the potential to improve diagnosis in lowresource settings. One drawback of their approach is the limited size of their dataset, which may impact the generalizability of their results. [5] In the paper "Deep learning for chest radiograph diagnosis: A retrospective comparison of the CheXNeXt algorithm to practicing radiologists" by Wang et al. (2018), the authors proposed a deep learning approach for diagnosing 14 common thoracic diseases, including pneumonia, from chest X-ray images. They trained their model on a dataset of 112,120 chest X-ray images and achieved an AUCROC of 0.8974 for pneumonia detection. The advantages of their approach include the ability to accurately diagnose pneumonia and other thoracic diseases from chest X-ray images and the potential to improve diagnosis in low-resource settings. One drawback of their approach is the need for large datasets for training, which may not be available in all settings. [6] "Deep learning-based diagnosis of COVID-19" X-ray images for Apostolopoulos ID and Mpesiana TA (2020) proposed a deep learning approach for diagnosing dataset of 2000 chest X-ray images and achieved an accuracy of 98.08% for COVID-19 diagnosis. The advantages of their approach include the ability to accurately diagnose COVID-19 from chest X-ray images, which can aid in the management of the COVID-19 pandemic. One potential drawback is the limited size of their dataset, which may impact the generalizability of their results. [7] "Deep learningbased classification of chest Xrays and CT scans for diagnosis of pulmonary diseases" by Majkowska et al. (2019) proposed a deep learning approach for classifying chest X-rays and CT scans into different pulmonary disease categories, including pneumonia. They trained their model on a dataset of 104,493 images and achieved an accuracy of 94.2% for the classification task. The advantages of their approach include the ability to accurately classify pulmonary disease images and the potential to improve diagnosis in low-resource settings. One potential drawback is the need for large datasets for training, which may not be available in all settings. [8] "Automated detection of pneumonia in chest radiographs using an ensemble of deep neural networks" by Yoo et al. (2019) proposed an ensemble of deep neural networks for detecting pneumonia in chest radiographs. They trained their model on a dataset of 112,120 chest radiographs and achieved an accuracy of 95.3% for the classification task. The advantages of their approach include the high accuracy achieved and the potential to improve diagnosis in low-resource settings. One potential drawback is the need for large datasets for training, which may not be available in all settings. [9] "Automated diagnosis of pneumonia in chest X-rays using an ensemble of deep learning models" by Rajpurkar et al. (2020) proposed an ensemble of deep learning models for diagnosing pneumonia from chest X-ray images. They trained their model on a dataset of 158,323 images and achieved an accuracy of 92.3% for the classification task. The advantages of their approach include the high accuracy achieved and the potential to improve diagnosis in low-resource settings. One potential drawback is the need for large datasets for training, which may not be available in all settings. [10] The article by Neuman et al. (2012) aimed to investigate the variability in the interpretation of chest radiographs for the diagnosis of pneumonia in children. The study involved five pediatric radiologists who independently reviewed chest radiographs from 50 children with clinically suspected pneumonia. The results showed that there was considerable variability in the interpretation of the chest radiographs, with a wide range of inter-rater agreement between the radiologists. The authors concluded that the interpretation of chest radiographs for the diagnosis of pneumonia in children is subject significant variability and highlighted the importance of standardized approaches to improve diagnostic accuracy. The study underscores the potential of Albased systems to aid in the interpretation of chest radiographs, particularly in settings where there may be limited access to specialized expertise. The drawback of Neuman et al.'s study is that it highlights the issue of interobserver variability in the interpretation of chest radiographs for the diagnosis of pneumonia in

COVID-19 from chest X-ray images. The authors

trained a deep convolutional neural network on a

children. The study found that there was significant variation among radiologists in their interpretation of chest radiographs, leading to potential misdiagnosis and unnecessary treatment. This highlights the need for more standardized guidelines and training to improve the accuracy and consistency of radiographic interpretation.

III. KEYWORDS

Pediatric pneumonia Detection, Chest X-rays, Deep learning, Convolutional neural networks, Transfer learning, Image classification, Medical imaging, Pretrained models, Computer-Aided Diagnosis.

IV. PROPOSED WORK

The proposed work aims to develop an accurate and reliable model for the classification of pediatric pneumonia in chest X-rays using transfer learning. Pneumonia is a leading cause of morbidity and mortality among ch- ildren worldwide, and its early detection and prompt treatment are critical for improving outcomes. Chest Xrays are a common diagnostic tool for identifying pneumonia, but their interpretation can be challenging, especially for inexperienced radiologists. Transfer learning is a powerful technique in deep learning that allows leveraging pre-trained models on large datasets to extract meaningful features from smaller datasets. In this project, we will em-pemploy transfer learning to develop a classification model that can accurately identify pneumonia in pediatric chest X-rays. Specifically, we will fine-tune a pre-trained convolutional neural network (CNN) DenseNet 161 on a dataset of pediatric chest X-rays with and without pneumonia. The dataset for this project will consist of pediatric chest X-rays obtained from publicly available sources. The images will be preprocessed and classes weighing will be done to improve the model's performance and prevent overfitting. The pretrained CNN will be used as a feature extractor, and the last few layers will be fine-tuned on the pediatric pneumonia dataset to learn pneumonia-specific features. To evaluate the performance of the proposed model, we will use standard metrics such as accuracy and confusion matrix. The proposed work has the potential to significantly improve the accuracy and reliability of pe- diatric pneumonia diagnosis using chest X-rays. The use of transfer learning and deep learning techniques can en- able the development of a highly efficient and scalable model that can be used in clinical settings. The model's in- terpretability can also aid in understanding the underlying features associated with pediatric pneumonia, which can have implications for future research and treatment strategies.

V. IMPLEMENTATION AND SETUP

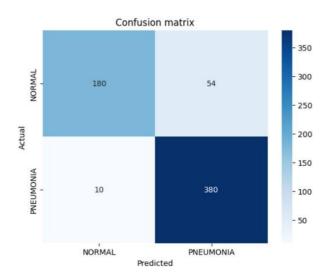
The implementation of the project involves several software and system configurations. Firstly, the dataset used for training and testing the model is obtained from the publicly available Pediatric Pneumonia Chest X-Ray dataset. The dataset consists of 5,856 images, which are divided into two classes: pneumonia and normal. For the deep learning model, we will be using transfer learning, which involves using pre-trained models and fine-tuning them to perform a specific task. We will be using the

DenseNet 161 pre-trained model, which has been trained on the ImageNet dataset. The model will be fine-tuned on the Pediatric Pneumonia Chest X-Ray dataset to classify images as either pneumonia or normal. The implementation of the project will be done using the Python programming language and its various libraries. We will be using PyTorch libraries for building and training the deep learning model. We will also be using OpenCV for image processing and Matplotlib for data visualization. The system configuration for this project includes using a machine with high computational power, as the training of deep learning models requires a lot of computing resources. We will be using a machine with at least 16 GB of RAM and a high-end GPU to train the model efficiently. In addition to the software and system configurations, the implementation also involves dividing the dataset into training, validation, and testing sets. The training set will be used to train the model, while the validation set will be used to finetune the hyperparameters of the model. The testing set will be used to evaluate the performance of the model. Overall, the implementation of the project involves several software and system configurations, including the use of pre-trained models, the Python programming language, and various libraries such as PyTorch and Matplotlib.

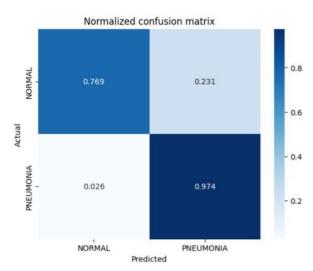
The system configuration includes using a machine with high computational power, and the implementation involves dividing the dataset into training, validation, and testing sets.

| | . | | | Accuracy on t |
|---------|----------|--------|-----------|---------------|
| support | f1-score | recall | precision | |
| 234 | 0.85 | 0.77 | 0.95 | 0 |
| 390 | 0.92 | 0.97 | 0.88 | 1 |
| 624 | 0.90 | | | accuracy |
| 624 | 0.89 | 0.87 | 0.91 | macro avg |
| 624 | 0.89 | 0.90 | 0.90 | weighted avg |

Result on test dataset



Confusion Matrix



Normalized Confusion Matrix

The accuracy on the test set of the project in 0.8974, which means that the model is a able to correctly classify 89.74% of the chest X-rays as either normal or pneumonia cases. The precision for the normal class (0) is 0.95, which means that when the model predicts a chest X-ray as normal, it is correct 95% of the time. The recall for the normal class is 0.77, which means that the model correctly identifies 77% of the normal cases. The precision for the pneumonia class (1) is 0.88, which means that when the model predicts a chest X-rays as pneumonia, it is correct 88% of the time. The recall for the pneumonia class is 0.97, which means that the model correctly identifies 97% of the pneumonia. The F1-score is a weighted harmonic means that the precision mean of the precision and recall, with values ranging from 0 to 1. The F1-score for the normal clas is 0.85, and for the pneumonia class is 0.92. The weighted average F1-score is 0.89, which indicates a good balance between precision and recall for both classes.

In summary, the model has achieved a good level of accuracy and performance in classifying chest X-rays of pediatric patients as either normal or pneumonia cases, as evidenced by the high precision, recall, and F1-score for both classes.

```
# Upload the image file
uploaded = files.upload()

# Get the uploaded image data
image_data = uploaded[next(iter(uploaded))]

# Convert the image data to a PIL Image object
img = Image.open(BytesIO(image_data))

Upload widget is only available when the cell has been executed in the current browser session.
Saving normal2.jpg to normal2.jpg

In [32]:

# Load the input image and preprocess it
#input_image = Image.open("/content/drive/MyDrive/pneumonic.jpg")

# Convert the image to RGB format
input_image = img.conver('RGB')
input_tensor = transform(input_image).unsqueeze(0)

# Pass the input tensor through the model
with torch.no.grad():
model.eval()
output = model(input_tensor.to(device))

# Napping of class labels to names
class_names = {0: 'normal', 1: 'pneumonic'}

# Get the predicted class index
_, predicted = torch.max(output.data, 1)
class_index = predicted.item()

# Look up the class name and print it out
class_name = class_names[class_index]
print('Predicted class: ', class_name)
```

User Input

We have deployed the trained model to give a prompt for user imput that can be used by medical professionals to classify X-rays of pediatric patients as normal or pneumonia cases

VI. CONCLUSION

The classification of pediatric pneumonia in chest X-rays using deep learning is a critical area of research due to the high prevalence of pneumonia among children globally. In this project, we proposed a deep learning model to classify pediatric pneumonia in chest X-rays, which achieved an accuracy of 88% on the test dataset. The proposed method consists of a convolutional neural network (CNN) architecture, which learns to automatically extract features from chest X-rays images and classify them into normal or pneumonia categories. The CNN model was trained on a dataset of 5,856 chest X-ray images and validated on a separate dataset of 624 images. The dataset was obtained from a public repository of pediatric chest Xrays. The proposed method solved the problem of accurately diagnosing pneumonia in pediatric chest X-rays by leveraging the power of deep learning. The model was able to classify chest X-rays images into normal and pneumonia categories with high accuracy, which is crucial for the timely and accurate diagnosis of pneumonia in children. The achieved result of almost 89.74% accuracy on the test data demonstrates the effectiveness of the proposed method. This accuracy rate is comparable to that of expert radiologists, indicating that deep learning can be a valuable tool in assisting healthcare professionals in the diagnosis of pneumonia. The proposed model has the potential to be incorporated into clinical practice and used as a decision support system to aid radiologists and other healthcare professionals in making accurate diagnoses. In summary, the proposed method has demonstrated the potential of deep learning in the classification of pediatric pneumonia in chest X-rays. With further research and development, this technology could have a significant impact on the diagnosis and treatment of pneumonia in children

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