# Final Report Machine Learning: Detecting Brain tumors in Magnetic Resonance Imaging (MRI)

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# **Table of Contents**

PROJECT PROPOSAL	3
INTRODUCTION	5
DESCRIPTION OF THE DATASET	5
MACHINE LEARNING MODELS	7
EXPERIMENTS DESIGN	11
RESULTS	14
SUMMARY AND DISCUSSION	22
REFERENCES	24
APPENDIX I	25
APPENDIX II	26

#### PROJECT PROPOSAL

What problem did you select, and why did you select it?

To sharpen our machine learning skills and understand real-world data, our group decided to select the topic of detecting brain tumors in Magnetic Resonance Imaging from a Kaggle competition: <a href="https://www.kaggle.com/sartajbhuvaji/brain-tumor-classification-mri">https://www.kaggle.com/sartajbhuvaji/brain-tumor-classification-mri</a>

The objective of this project is trying to classify the tumor types after training all the MRI images.

The reason we select it is because automated classification techniques using Machine Learning(ML) and Artificial Intelligence(AI) has consistently shown higher accuracy than manual classification. Hence, proposing a system performing detection and classification by using Deep Learning Algorithms using Artificial Neural Network (ANN) would be helpful to doctors all around the world.

• What database will you use? Is it large enough to train a machine learning network or different algorithms?

We would use the dataset provided by Kaggle. This dataset is collected in the form of images through the scans which is the best technique to detect brain tumors. The dataset needs to be read out into matrix data. After that, we will have lots of data which is large enough to train a machine learning network.

 What neural network will you use? Will it be a standard form of the network, or will you have to customize it? What algorithms will you use?

The ANN classification algorithm will be used in this project according to the objects. Some of the parameters, like layer number, learning rate, will be modified to make a comparison.

 What software will you use to implement the neural network or different algorithms? Why?

Python will be adopted here to implement the neural network because it is easy to use and many packages are plug-in-use.

 What reference materials will you use to obtain sufficient background on applying the chosen network or algorithm to the specific problem that you selected?

In this project, EDA, preprocessing, image reading out, model building and evaluation strategy, will be applied, so all the knowledge and reference materials related to the above topic will be referred.

 How will you judge the performance of the network? What metrics will you use?

After building a model with the 80% randomly selected data from the training dataset, we will apply the model to the 20% left dataset to evaluate the model performance and fitness. The evaluation metrics will be the accuracy score.

• Provide a rough schedule for completing the project.

June 15 - 16: proposal writing and data preparation;

June 17 - 20: code for model building and evaluation strategy;

June 21 - 23: presentation preparation and final report.

#### INTRODUCTION

A typical brain tumor diagnosis requires an expert neuro-oncologist, a pathologist and series of scans and surgeries. The process is time consuming and causes distress to the patient while they wait for the results. On the other hand the oncologist has to wade through a series of MRI scans and make expert judgment on whether they identify a tumor or not. The recent groundbreaking research [13] utilizing stimulated Raman histology (SRH) - an optical imaging method in conjunction with artificial intelligence (AI) motivated our team to explore similar ideas with a different dataset i.e. MRI scans.

#### **DESCRIPTION OF THE DATASET**

Brain tumors are named according to the region of the brain they occur in (Figure 1). We downloaded a training set of MRI scans for brain tumors from Kaggle [12]. The tumors were classified into categories detailed in Table 1.

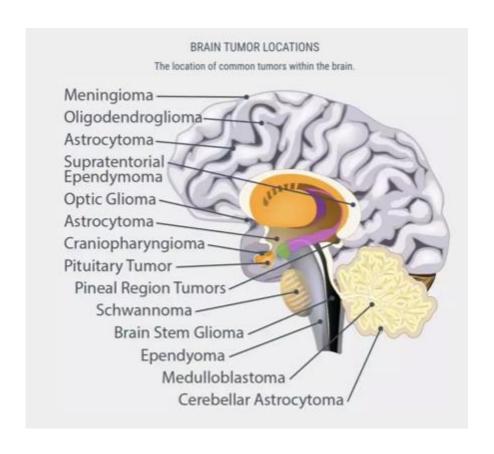


Figure 1. Types of Brain Tumors [9]

Tumor Type	Dataset Type	Image Number
No Tumor	Training	395
Glioma	Training	826
Meningioma	Training	822
Pituitary	Training	827

Table 1. Classes of Brain Tumor in Kaggle training set

# **MACHINE LEARNING MODELS**

We explored various machine learning methods that ranged from classical to deep learning techniques.

# **Support Vector Machine (SVM)**

SVM is a supervised machine learning model that uses classification algorithms for classification problems. Compared to newer algorithms like neural networks, they have two main advantages: higher speed and better performance with a limited number of samples (in the thousands)[13]. It depends on three working principles:

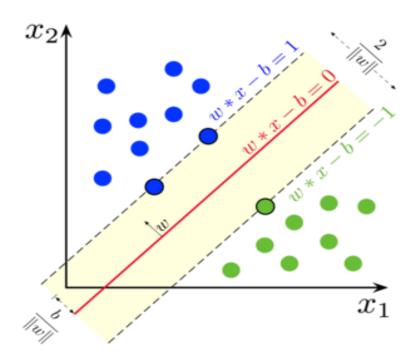


Figure 2. SVM (from Wikipedia)

#### I. Maximum margin classifier

The maximum margin classifier considers a hyperplane with maximum separation width to classify the data.

#### II. Support Vector Classifiers

This type of classifier can be regarded as an extended version of the maximum margin classifier which also deals with the non-separable cases. The kernel trick to make SVM work on non-linear separatable problems.

#### III. Support Vector Machine

The support vector machine approach is considered during a non-linear decision and the data is not separable by a support vector classifier irrespective of the cost function.

#### k-nearest neighbors (KNN)

KNN is one of the simplest Machine Learning algorithms based on Supervised Learning technique. KNN algorithm assumes the similarity between the new case/data and available cases and put the new case into the category that is most similar to the available categories. KNN algorithm stores all the available data and classifies a new data point based on the similarity. This means when new data appears then it can be easily classified into a well suite category by using KNN algorithm. The KNN algorithm can be used for Regression as well as for Classification but mostly it is used for the Classification problems[14].

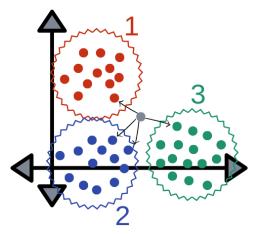


Figure 3. KNN (from Wikipedia)

# **Artificial Neural Network (ANN)**

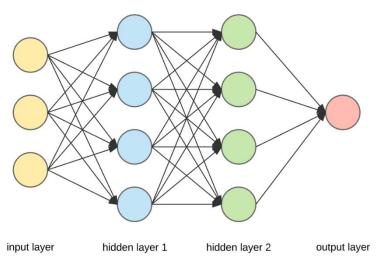


Figure 4. ANN (from Wikipedia)

ANN is typically organized in layers. Layers are being made up of many interconnected 'nodes' which contain an 'activation function'. A neural network may contain the following 3 layers:

1. Input layer to receive as input the values of the explanatory attributes for each observation.

- 2. Hidden layer to transform the input values to activation.
- 3.Output layer which receives connections from hidden layers or from input layer.

It returns an output value that corresponds to the prediction of the response variable. In classification problems, there is usually only one output node. The active nodes of the output layer combine and change the data to produce the output values.

ANNs are considered as simple mathematical models to enhance existing data analysis technologies. Although it is not comparable with the power of the human brain, still it is the basic building block of the Artificial intelligence [15].

#### **Model Evaluation Statistics**

#### I. Accuracy

The accuracy is the ratios of correctly predicted observations to the total number of observations. Here, TP means true positives, TN means true negative, FP means false positives, and FN means false negatives.

$$Accuracy = (TP+TN)/(TP+TN+FP+FN)$$

#### II. Precision

Precision is the ratio of correctly predicted positive samples to the total of predicted positive observations

#### III. Recall

Recall is the ratio of TP to all the observations in actual area.

#### IV. F1-Score

F-1 score is used to evaluate the classification model based on precision and recall.

# F1=2\*precision\*recall'(precision+recall)

#### **EXPERIMENTS DESIGN**

#### 1. Data Visualization

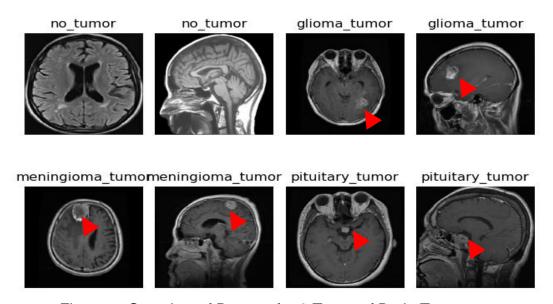


Figure 5. Overview of Dataset for 3 Types of Brain Tumors

The presentative images for no\_tumor, glioma\_tumor, meningioma\_tumor and pituitary\_tumor were picked from the files to show the phenotypes (the tumors were pointed out with red arrow head).

### 2. Data Preprocessing

The MRI scans were put through a series of preprocessing steps before being fed into the deep learning layer. The images were of varying sizes therefore they were resized to a standard 128 by 128. Next we performed data augmentation to include variations of the image to improve our prediction accuracy. The images were then transformed to an array, normalized by dividing the pixels by 255 and finally reshaped from a 3D to 2D.

# 3. Classical Modeling, Prediction and Evaluation – SVM, KNN and Naïve Bayes

The packages that have been used for the modelling is Scikit Learn and we have imported Support Vector Classifier, KNeighborsClassifier and GaussianNB library to perform the functions of the algorithm

```
from sklearn.svm import SVC
from sklearn.neighbors import KNeighborsClassifier
from sklearn.naive_bayes import GaussianNB

# creating the classifier object
clf = SVC(kernel="poly")
clf = KNeighborsClassifier(n_neighbors=4)
clf = GaussianNB()
```

After training the models with X\_train (splitted from X dataset) and testing the models with X\_test(splitted from X dataset), The performance will be evaluated and presented with confusion matrix, classification report and accuracy score.

```
print(confusion_matrix(y_test,y_pred))
print(classification_report(y_test,y_pred))
print("Accuracy: ", accuracy_score(y_test, y_pred) * 100)
```

#### 4. Deep learning: ANN Parameters Optimization

Optimized parameters in ANN are important for the final model's performance. Here we select the following parameters to do modify for our trials:

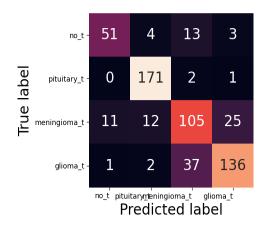
- a. Hidden layers and nodes
- b. Iteration numbers
- c. Activation with "sigmoid" or "relu"
- d. Early-stopping
- e. Solver with Adam/ SGD/ RMSprop/ Adagra/ Adadelta/ Adamax The combination of parameters is listed in the table as following:

Table 2. Experiment Design for ANN

ANN	Layers & Nodes	Iteration	Activation	Early- stopping	Solver
01	(20, 20)	500	"sigmoid"	False	Adam
02	(20, 20)	500	"relu"	False	Adam
03	(20, 20)	500	"sigmoid", "relu"	False	Adam
04	(500, 500)	500	"sigmoid"	True	Adam
05	(20, 20, 20, 20)	500	"sigmoid"	False	Adam
06	(20, 20)	2000	"sigmoid"	False	Adam
07	(20,20)	500	"sigmoid"	False	SGD
08	(20, 20)	500	"sigmoid"	False	RMSprop
09	(20, 20)	500	"sigmoid"	False	Adagrad
10	(20, 20)	500	"sigmoid"	False	Adadelta
11	(20,20)	500	"sigmoid"	False	Adamax
ANN	(500, 500, 20)	500	"sigmoid"	False	RMSprop

RESULTS

Modeling, Prediction and Evaluation – SVM



Classific	atio	n Report:			
		precision	recall	f1-score	support
	0	0.81	0.72	0.76	71
	1	0.90	0.98	0.94	174
	2	0.67	0.69	0.68	153
	3	0.82	0.77	0.80	176
accur	асу			0.81	574
macro	avg	0.80	0.79	0.79	574
weighted a	avg	0.81	0.81	0.80	574

Figure 6. Confusion matrix and classification for SVM

From the confusion matrix shown in figure.6, we could find that there are 51 true positives for no\_tumors, 171 true positives for pituitary\_tumors, 105 true positives for meningioma\_tumors and 136 true positives for glioma\_tumors. From the classification report graph, we can see the accuracy of SVM model is 81%( f1 score for 0's = 0.76 and f1 score for 1's = 0.94, f1 score for 2's = 0.68 and f1 score for 3's = 0.80). It means, for the given test data set, the ratio of the number of samples correctly classified by the classifier to the total number of samples is 81%. It is calculated by (TP+TN)/(TP+FP+FN+TN). Here, TP represents the true positive, and the FP represents the false positive, and the FN represents the false negative, and TN means the true negative. We could get those result from confusion matrix above.

Overall, SVM model shows high classification rate only for pituitary\_tumors, we cannot say it is a great model. So, next we will try KNN.

#### Modeling, Prediction and Evaluation - KNN

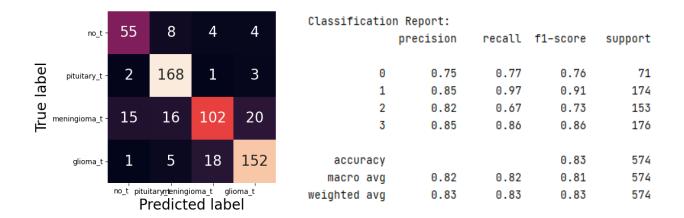


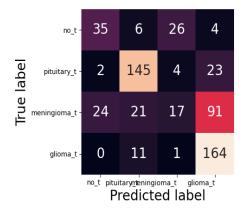
Figure 7. Confusion matrix and classification for KNN

From the confusion matrix shown in figure.7, we could find that there are 55 true positives for no\_tumors, 168 true positives for pituitary\_tumors, 102 true

positives for meningioma\_tumors and 152 true positives for glioma\_tumors. From the classification report graph, we can see the accuracy of KNN model is 83% (f1 score for 0's = 0.76 and f1 score for 1's = 0.91, f1 score for 2's = 0.73 and f1 score for 3's = 0.86).

Overall, KNN model shows better performance on classification rate for all tumor types, however, the accuracy is still not high enough. So, this model is acceptable but not the ideal one.

#### Modeling, Prediction and Evaluation - NB



Classific	atio	n Report:			
		precision	recall	f1-score	support
	0	0.57	0.49	0.53	71
	1	0.79	0.83	0.81	174
	2	0.35	0.11	0.17	153
	3	0.58	0.93	0.72	176
accur	acy			0.63	574
macro	avg	0.58	0.59	0.56	574
weighted	avg	0.58	0.63	0.58	574

Figure 8. Confusion matrix and classification for Naïve Bayes

We also tried Naïve Bayes, from the confusion matrix shown in figure.8, we could find that there are 35 true positives for no\_tumors, 145 true positives for pituitary\_tumors, 17 true positives for meningioma\_tumors and 164 true positives for glioma\_tumors. From the classification report graph, we can see the accuracy of NB model is only 63%( f1 score for 0's = 0.53 and f1 score for 1's = 0.81, f1 score for 2's = 0.17 and f1 score for 3's = 0.72), which is much lower than SVM and KNN.

Overall, NB model shows a much poor performance on classification rate for all tumor types, So, we will leave it behind.

#### **ANN Model Parameters Optimization**

ANN is a model can be used to work on the complex issues. For this image classification problem. We got it involved and tried many different combination of parameters.

From the accuracy shown in Table 3, we could find that

- I. activation with "sigmoid" shows a higher accuracy than activation with "relu" (84.5 vs 79.4);
- II. Model with more nodes (500,500) for hidden layers gets a higher accuracy than model with less nodes (20,20);
- III. Model with more hidden layers (20,20,20,20) does not show better performance in our case, the accuracy is even lower than model with less hidden layers(20,20)(80.0 vs 84.5).
- IV. Models with 6 different solver were compared. The highest accuracy is from solver with "RMSprop" (84.8) which is almost same with solver with "Adam" (84.5).

The accuracy and loss curves for all the experiments are shown in figure.9.

ANN	Layers & Nodes	Iteration	Activation	Early- stopping	Solver	Accuracy (%)
01	(20, 20)	500	"sigmoid"	False	Adam	84.5
02	(20, 20)	500	"relu"	False	Adam	79.4
03	(20, 20)	500	"sigmoid", "relu"	False	Adam	82.1
04	(500, 500)	500	"sigmoid"	True	Adam	85.2
05	(20, 20, 20, 20)	500	"sigmoid"	False	Adam	80.8
06	(20, 20)	2000	"sigmoid"	False	Adam	82.2
07	(20,20)	500	"sigmoid"	False	SGD	81.2
08	(20, 20)	500	"sigmoid"	False	RMSprop	84.8
09	(20, 20)	500	"sigmoid"	False	Adagrad	81.0
10	(20, 20)	500	"sigmoid"	False	Adadelta	78.6
11	(20,20)	500	"sigmoid"	False	Adamax	73.3
ANN	(500, 500, 20)	500	"sigmoid"	False	RMSprop	87.5

Table 3. The accuracy for ANN with different parameters

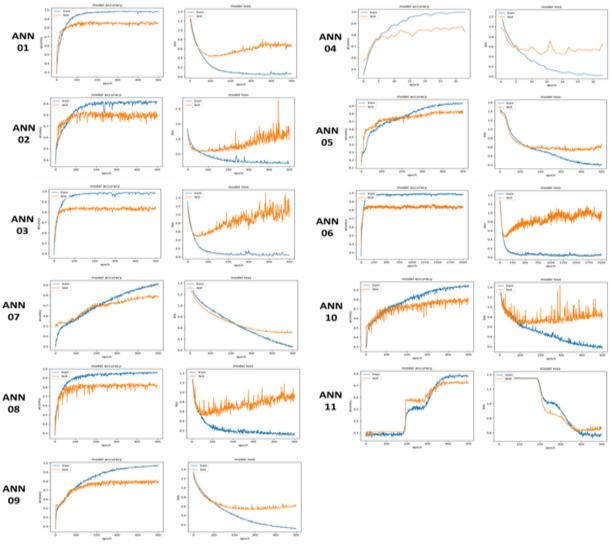


Figure 9. The accuracy and loss curves for ANN with different parameters

#### Modeling, Prediction and Evaluation - ANN

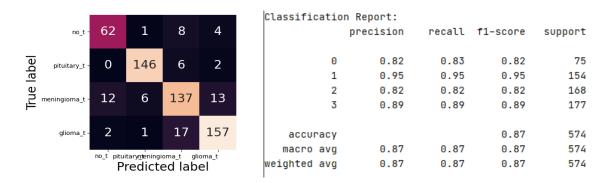


Figure 10. Confusion matrix and classification for ANN

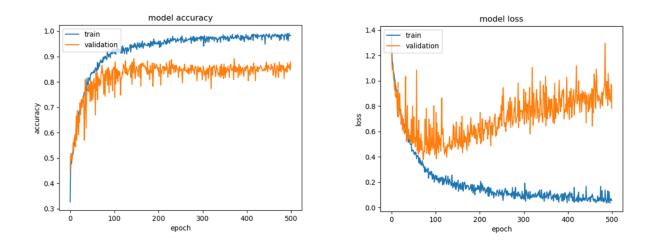


Figure 11. The accuracy and loss curves for ANN

Based on the parameter optimization in ANN model above, an ANN was designed with the following parameters: hidden layers and nodes (500.500.20); iteration (500); activation with "sigmoid" and solver with "RMSprop".

From the confusion matrix shown in figure 10, we could find that there are 62 true positives for no\_tumors, 146 true positives for pituitary\_tumors, 137 true positives for meningioma tumors and 157 true positives for

glioma\_tumors. From the classification report graph, we can see the accuracy of ANN model is 87% (f1 score for 0's = 0.82 and f1 score for 1's = 0.95, f1 score for 2's = 0.82 and f1 score for 3's = 0.89), which is higher than SVM and KNN.

Overall, ANN model shows a much better performance on classification rate for all tumor types.

#### **SUMMARY AND DISCUSSION**

It feels like technology has come a full circle. A method that was adapted from the functioning of the brain is being used to detect its aberrations and help heal it. We applied various machine learning and artificial neural net methods on the MRI scans of the brain tumor dataset.

Based on our results and the index we have discussed before, we could define that ANN model shows a better performance in this MRI image classification. So, we choose it to do prediction. This model has 87% accuracy, which means it could explain the 87% of the test data.

During the parameters optimization in ANN, we find something interesting:

1. The first one is that activation with "sigmoid" shows higher accuracy than activation with "relu". I think the reason for this observation might be that activation with "sigmoid" will not blow up the original data and "relu" will involve too much gradients. For the image matrix, the data points showing not much differences will be kept same with "relu" and will be normalized with "sigmoid".

2. Another one is hidden layers increasement did not improve the accuracy.

I think the reason for this observation might be that 1-2 layers transfers have been enough for the matrix data from image.

Besides the models we talked about, we also get Con2D and Maxpool involved to conduct CNN classifiers. The result shows an even better accuracy(96%)(see Appendix).

We believe that the neural network will largely improve the diagnosis efficiency and accuracy on the brain cancers.

#### **REFERENCES**

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- 13. <a href="https://towardsdatascience.com/support-vector-machine-introduction-to-machine-learning-algorithms-934a444fca47">https://towardsdatascience.com/support-vector-machine-introduction-to-machine-learning-algorithms-934a444fca47</a>
- 14. <a href="https://medium.com/capital-one-tech/k-nearest-neighbors-knn-algorithm-for-machine-learning-e883219c8f26">https://medium.com/capital-one-tech/k-nearest-neighbors-knn-algorithm-for-machine-learning-e883219c8f26</a>
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#### APPENDIX I

#### **Technical Considerations:**

- 1. Installation of Python 3.5 & above, Pycharm and Anaconda are necessary
- 2. Packages like numpy, pandas, matplotlib, seaborn, sklearn, tensorflow and keras needs to be installed in the computer in order to execute the application

#### **GitHub Repo Link:**

All the documents except data files(too large to upload) related to this project are included in the following repo link:

https://github.com/andrew120606/ML-Final-Project-Group5

The repo has following folders and file:

- 1. README.md Defines the structure of the repo
- 2. Final\_Group5\_Project\_Proposal
- 3. Group5\_Code This folder contains the code.
- 4. Final \_Group5 \_Presentation This folder has the PDF version of group project presentation
- 5. Final\_Group5\_Project\_Report This folder includes the complete report of the project in PDF format.
- 6. Data This folder contains the data source used in this project.

The data files can be found in the following kaggle link:

https://www.kaggle.com/sartajbhuvaji/brain-tumor-classification-mri?select=Training

#### **APPENDIX II**

# Modeling, Prediction and Evaluation - CNN

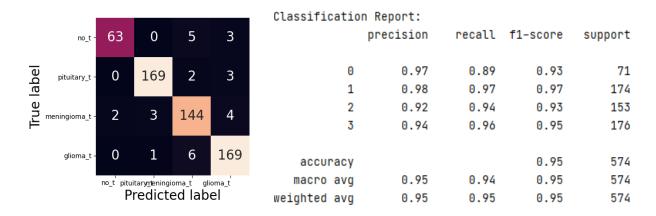


Fig. Confusion matrix and classification for CNN

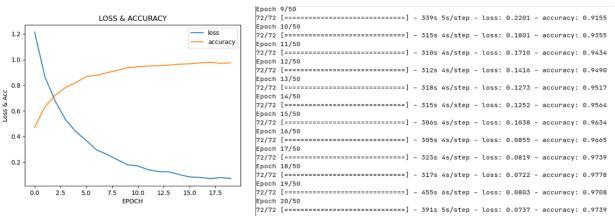


Fig. The accuracy and loss curves for CNN

[[ 52	2 10	7]			
[ 0 16	8 1	5]			
[ 14	7 111	21]			
[ 1	1 33	141]]			
		precision	recall	f1-score	support
	0	0.78	0.73	0.75	71
	1	0.94	0.97	0.95	174
	2	0.72	0.73	0.72	153
	3	0.81	0.80	0.81	176
accu	racy			0.82	574
macro	avg	0.81	0.81	0.81	574
weighted	avg	0.82	0.82	0.82	574

# Report for MLP-2

]]]	48	6	11	6]			
[	0	168	1	5]			
[	13	7	114	19]			
[	1	1	27	147]]			
				precision	recall	f1-score	support
			0	0.77	0.68	0.72	71
			1	0.92	0.97	0.94	174
			2	0.75	0.75	0.75	153
			3	0.83	0.84	0.83	176
	ac	cur	асу			0.83	574
	mac	cro	avg	0.82	0.81	0.81	574
wei	ight	ted	avg	0.83	0.83	0.83	574

Accuracy: 83.10104529616724

[[ 49 5 15 2] [ 0 167 2 5] [ 11 10 114 18] [ 0 5 29 142]]

_					
		precision	recall	f1-score	support
	0	0.82	0.69	0.75	71
	1	0.89	0.96	0.93	174
	2	0.71	0.75	0.73	153
	3	0.85	0.81	0.83	176
accura	асу			0.82	574
macro a	avg	0.82	0.80	0.81	574
weighted a	avg	0.82	0.82	0.82	574

Accuracy: 82.22996515679442

# Report for MLP-4

[[ 48 5 12 6] [ 0 167 1 6] [ 15 8 110 20] [ 2 3 34 137]]

	precision	recall	f1-score	support
0	0.74	0.68	0.71	71
1	0.91	0.96	0.94	174
2	0.70	0.72	0.71	153
3	0.81	0.78	0.79	176
accuracy			0.80	574
macro avg	0.79	0.78	0.79	574
weighted avg	0.80	0.80	0.80	574

Accuracy: 80.48780487804879

[[ 57	1 9	4]			
[ 1 16	3 6	4]			
[ 20	8 35	90]			
[ 2	0 6	168]]			
		precision	recall	f1-score	support
	0	0.71	0.80	0.75	71
	1	0.95	0.94	0.94	174
	2	0.62	0.23	0.33	153
	3	0.63	0.95	0.76	176
accu	racy			0.74	574
macro	avg	0.73	0.73	0.70	574
weighted	avg	0.74	0.74	0.70	574

Accuracy : 73.69337979094077

# Report for MLP-6

[[ 44 4 21 2] [ 0 169 1 4] [ 14 12 108 19] [ 3 7 36 130]]

	precision	recall	f1-score	support
0	0.72	0.62	0.67	71
1	0.88	0.97	0.92	174
2	0.65	0.71	0.68	153
3	0.84	0.74	0.79	176
accuracy			0.79	574
macro avg	0.77	0.76	0.76	574
weighted avg	0.79	0.79	0.78	574

Accuracy : 78.57142857142857

[ 0 166 [ 17 1	2 102	6]			
		precision	recall	f1-score	support
	0	0.73	0.68	0.70	71
	1	0.89	0.95	0.92	174
	2	0.67	0.67	0.67	153
	3	0.80	0.77	0.78	176
accu	racy			0.79	574
macro	avg	0.77	0.77	0.77	574
weighted	avg	0.78	0.79	0.78	574

Accuracy: 78.57142857142857

# Report for MLP-8

]]]	52	2	14	3]			
[	0	167	2	5]			
[	12	2	119	20]			
[	0	1	28	147]]			
				precision	recall	f1-score	support
			0	0.81	0.73	0.77	71
			1	0.97	0.96	0.97	174
			2	0.73	0.78	0.75	153
			3	0.84	0.84	0.84	176
	a	ccur	асу			0.84	574
	mad	cro	avg	0.84	0.83	0.83	574

weighted avg 0.85 0.84 0.85

574

Accuracy: 84.49477351916377

54	2	12	3]
4	164	2	4]
22	2	107	22]
2	4	24	146]]
	4 22	4 164 22 2	4 164 2 22 2 107

	precision	recall	f1-score	support
0	0.66	0.76	0.71	71
1	0.95	0.94	0.95	174
2	0.74	0.70	0.72	153
3	0.83	0.83	0.83	176
accuracy			0.82	574
macro avg	0.80	0.81	0.80	574
weighted avg	0.82	0.82	0.82	574

Accuracy : 82.05574912891987