

Image Classification with Deep Learning: Detecting Pneumonia in X-ray Images

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Stakeholder:

Be Well Healthcare Center, Radiology Department

Business Problem:

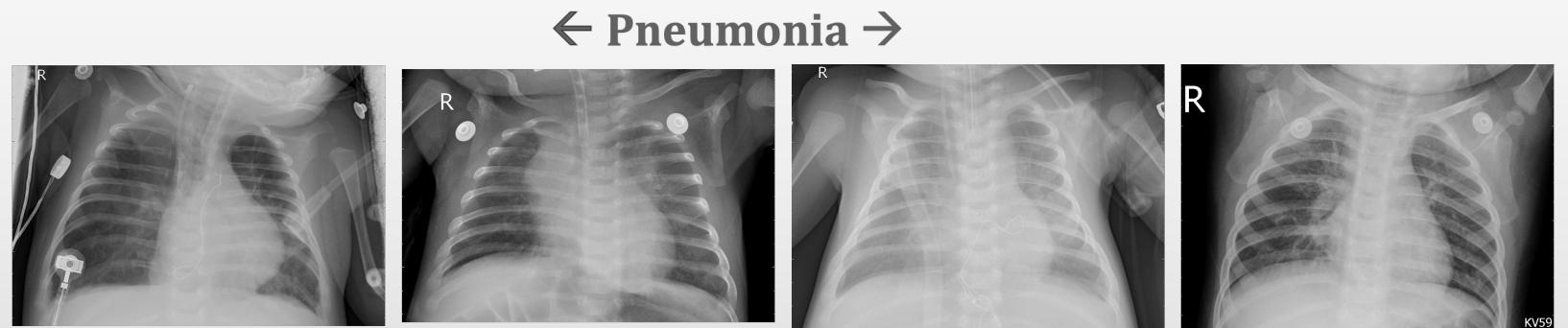
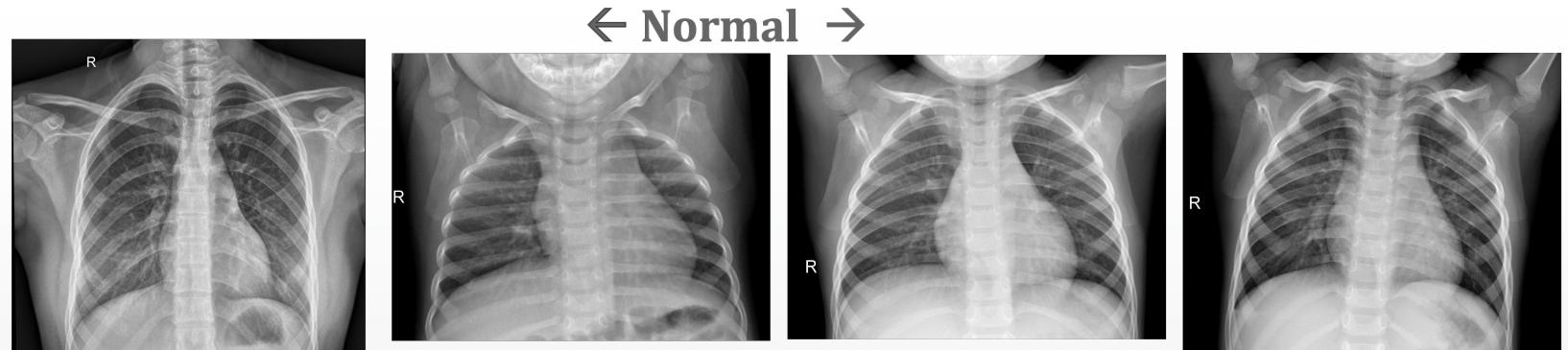
Looking for an efficient way to screen chest x-ray images for pneumonia detection in pediatric patients.

Project Value:

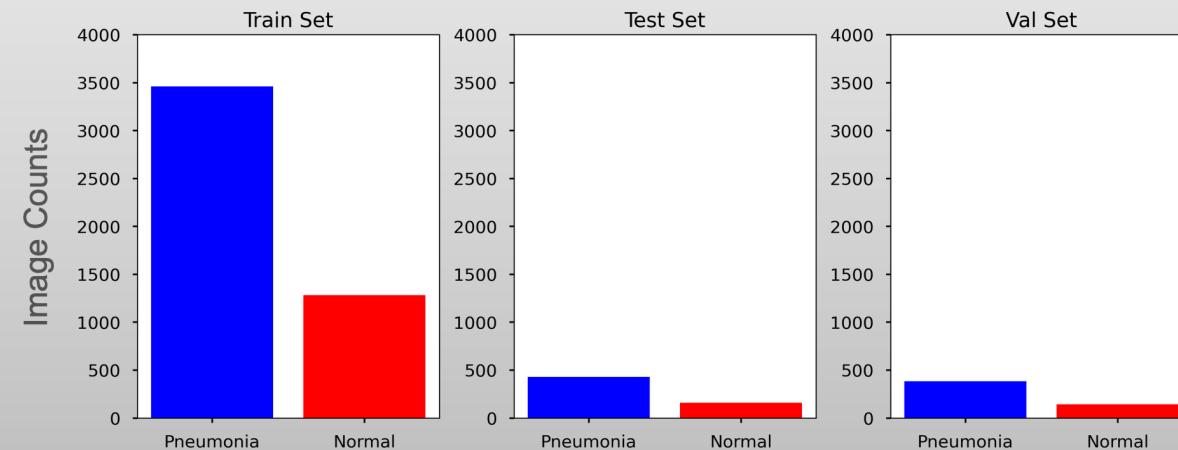
- Decrease the workload of its radiologists.
 - Minimize diagnosis time and allows for faster treatment.
 - Lower the risk of human errors and improve patient safety.
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Data:

Kaggle Dataset of **Chest X-ray images** from **5,863** pediatric patients.

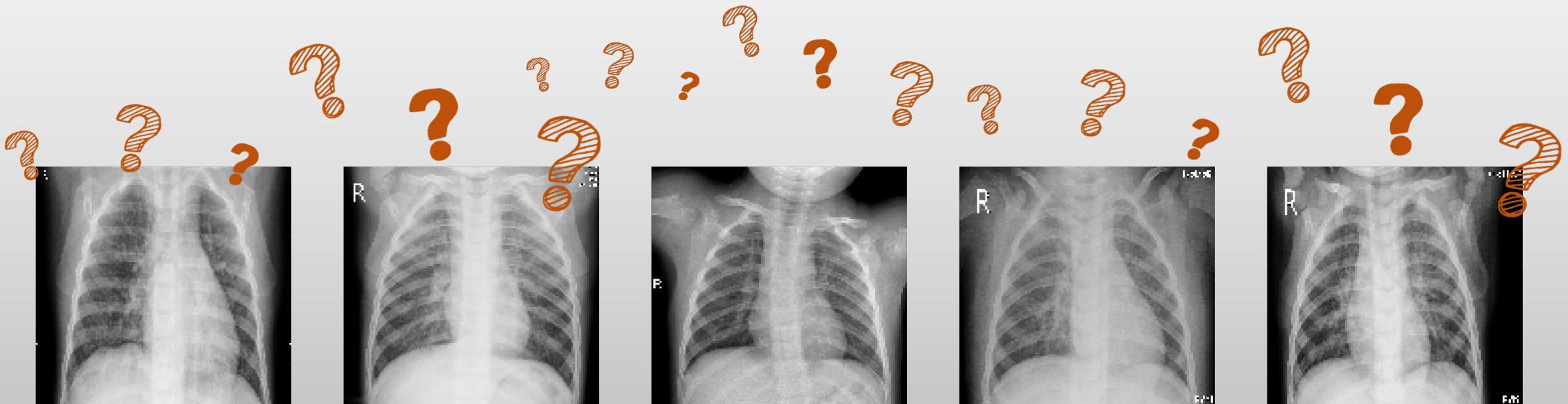


Data is separated by:
train (80%), **test** (10%),
validation (10%) sets and the
categories they belong to
(**Pneumonia**/**Normal**).

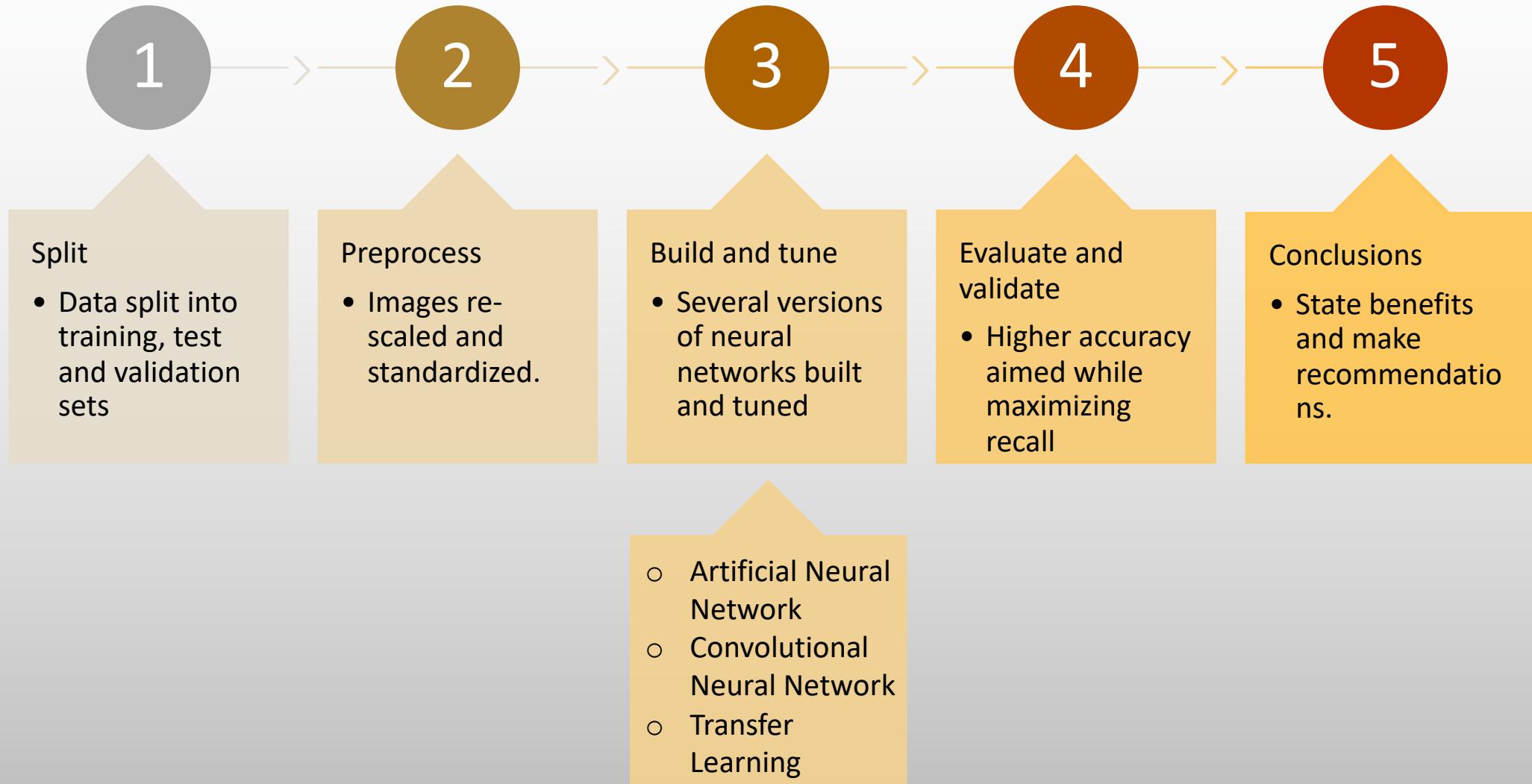


Goal:

- Generate a **Neural Network Model** that classifies the X-ray images by detecting pneumonia.
- **Target Accuracy:** Predict the status of the lungs (**Normal vs pneumonia**) as accurately as possible.
- **Maximize Recall:** Identify majority of the **True Positive** cases so that we catch as many kids with pneumonia as possible.

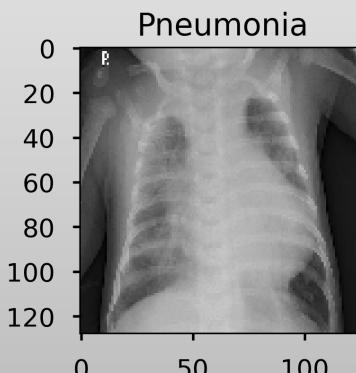
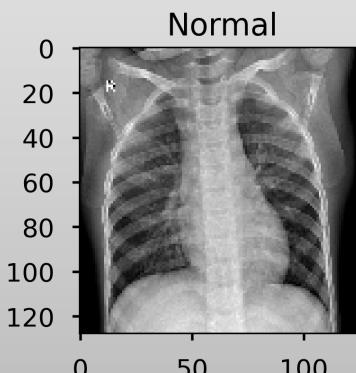
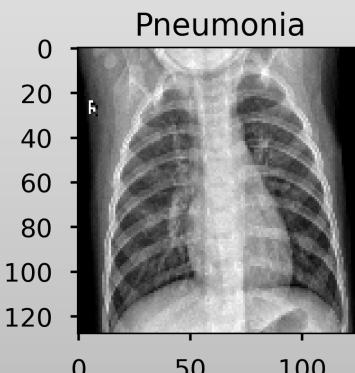
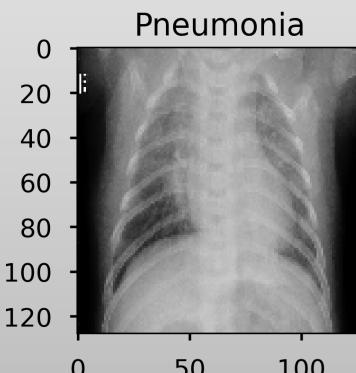
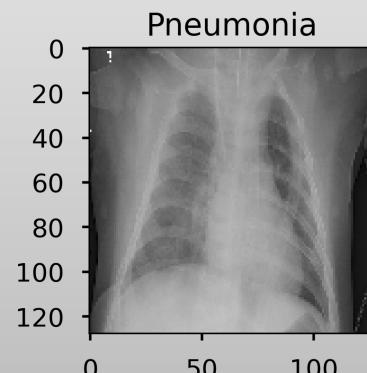
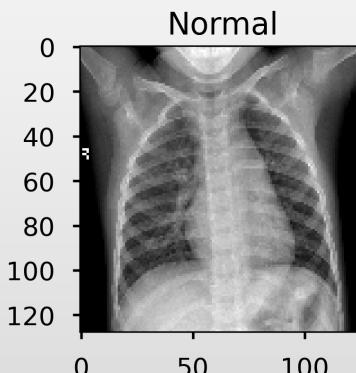
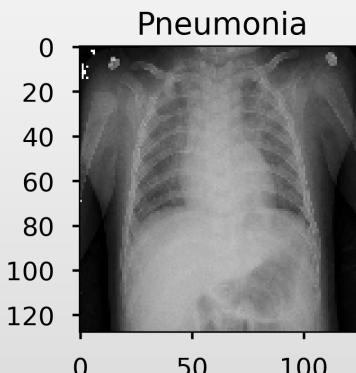
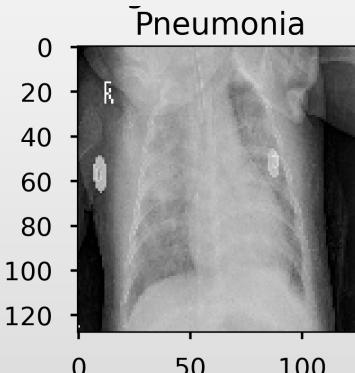
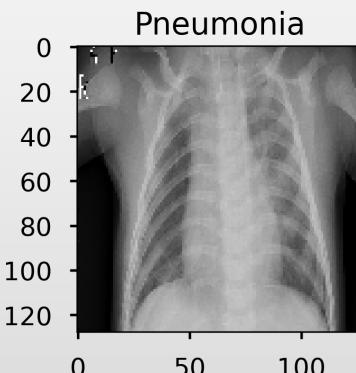
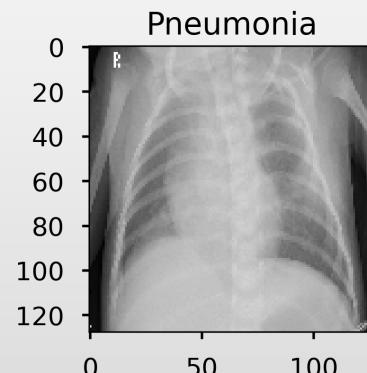


Methodology:



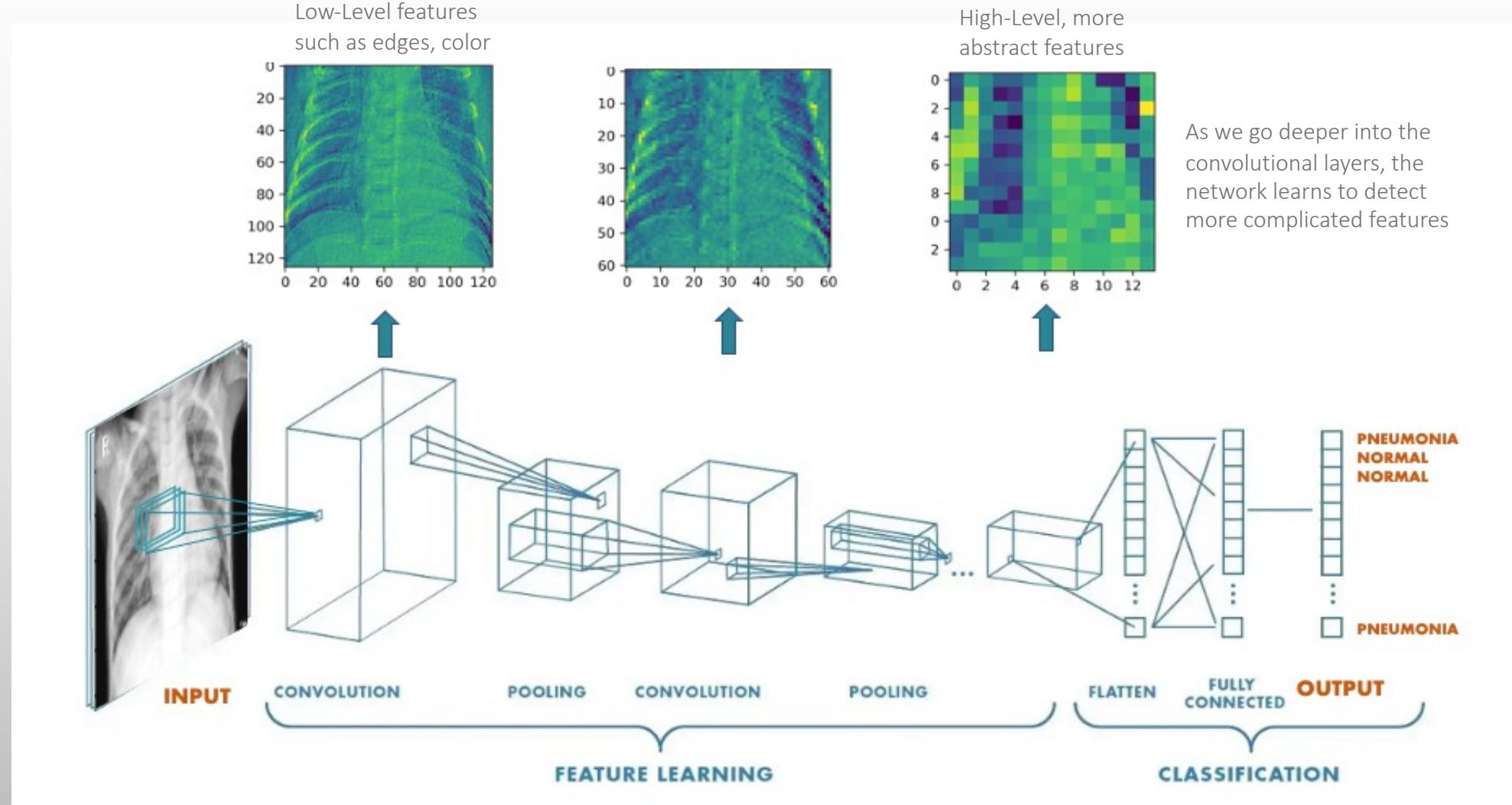
Preprocess:

- All images are downsized to a size of 128 x 128 pixels
- Pixels values (0–255) normalized to 0–1



Build and Tune:

Top Performing Model: Convolutional Neural Network

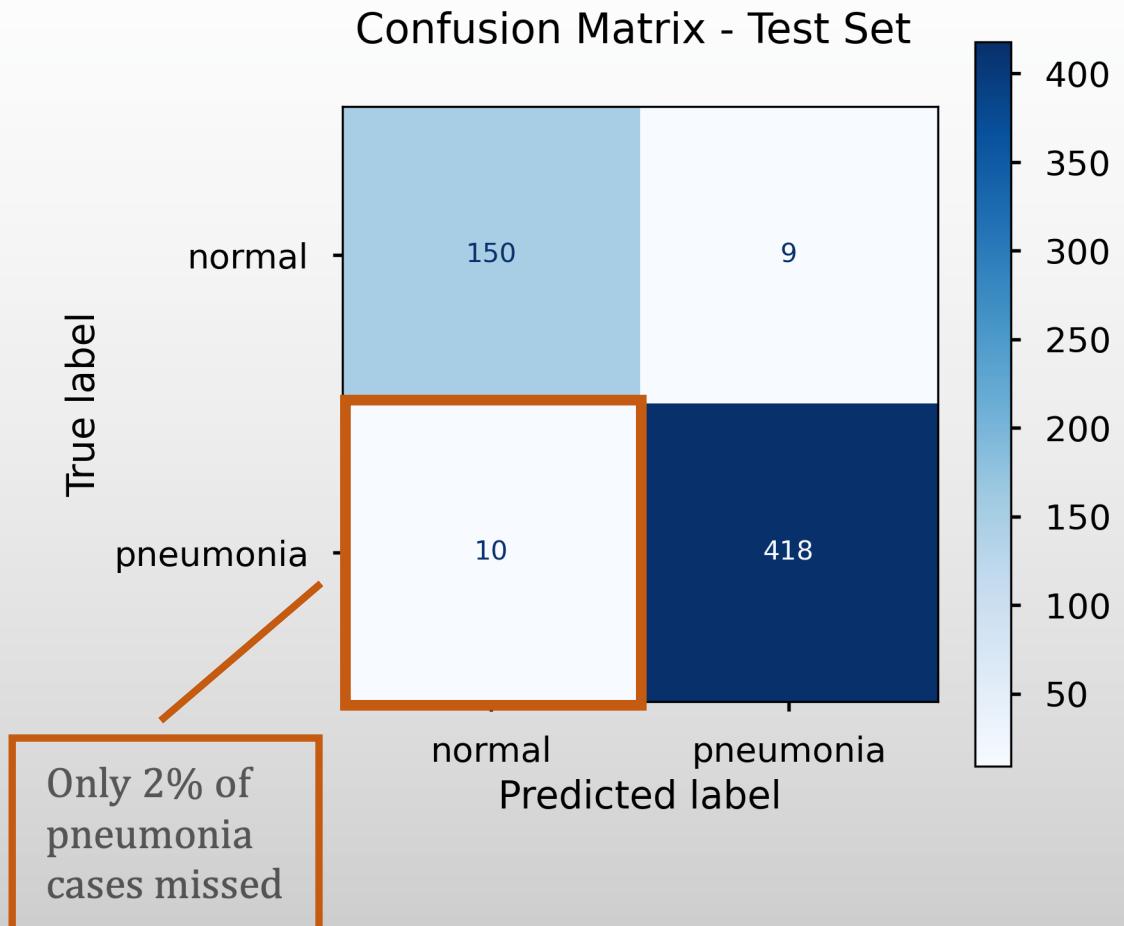


Validate and Evaluate:

Model Performance

| | Pneumonia | Normal |
|---------------------------------------|-----------|--------|
| Accuracy | | 97% |
| Precision | 98% | 94% |
| Recall <i>(True positive rate)</i> | 98% | 94% |
| f1-score | 98% | 94% |

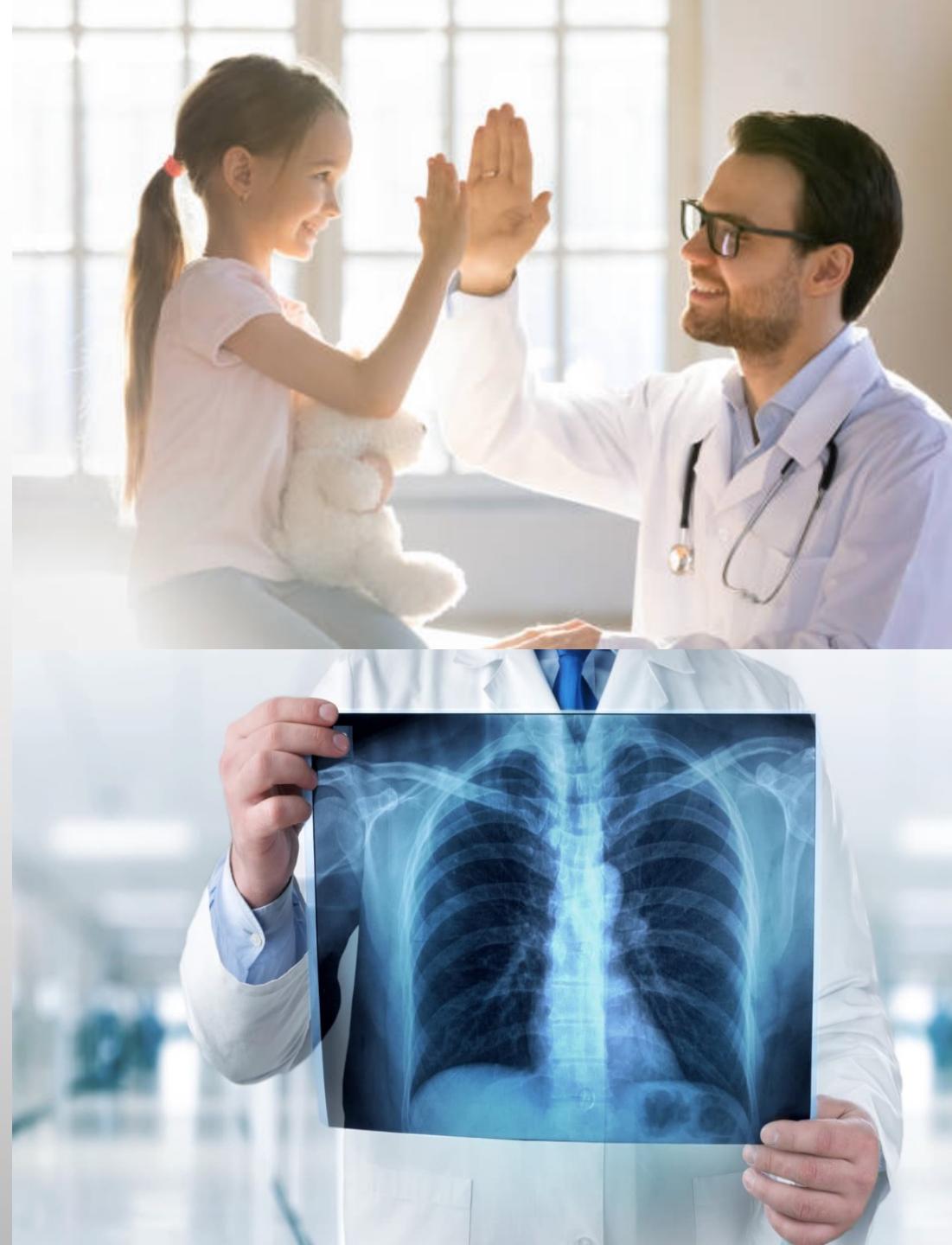
“Very Good” performance in all metrics.



Recommendations:

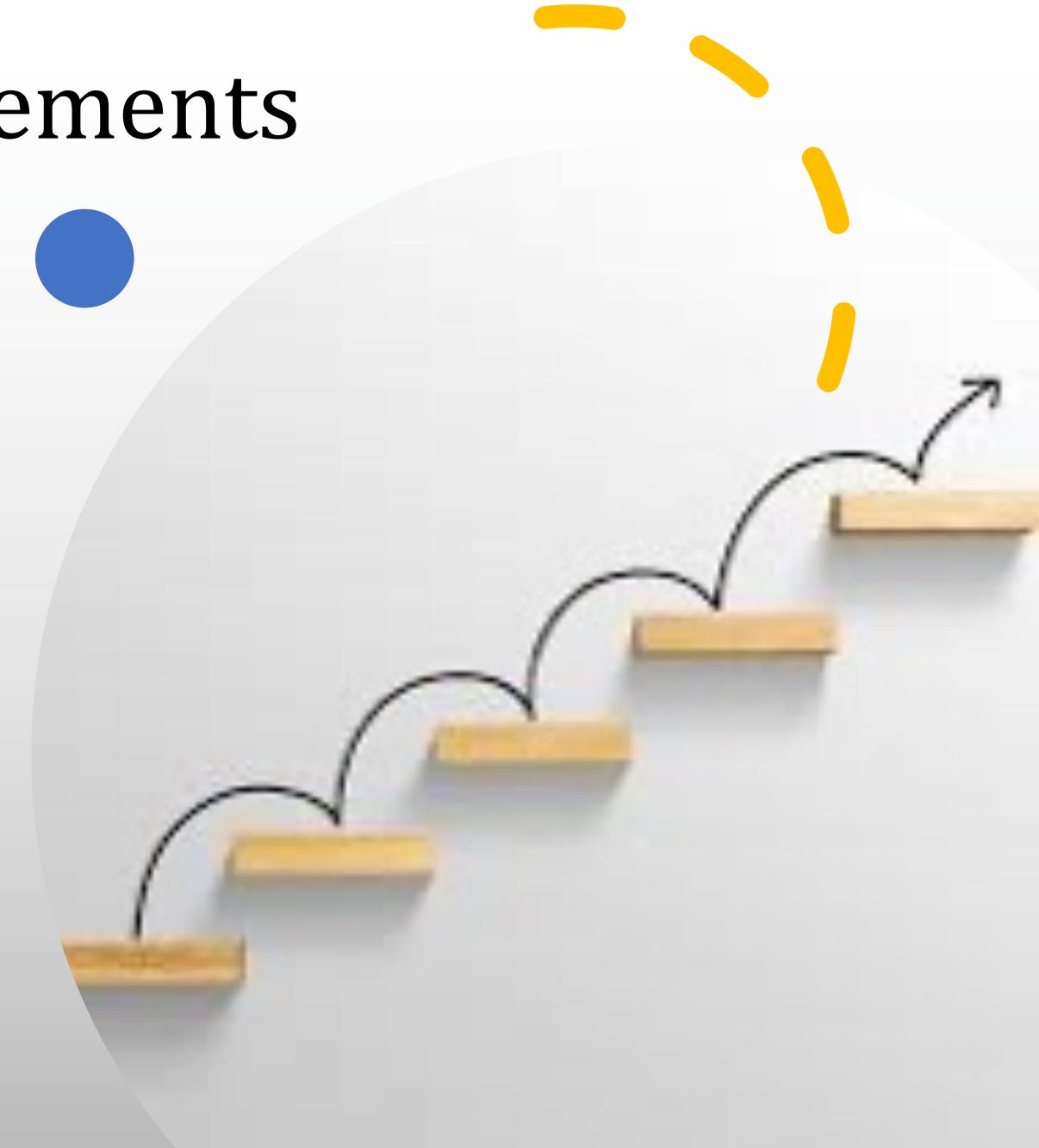
Use of CNN to classify x-ray images

- Decreased work-load by stream-lining the diagnosing process → *quicker return time and greater patient satisfaction.*
- Faster initiation of treatment for patients classified as high-risk.
- Doctors / radiologists can allocate **more time** to go over the images in the grey zone more rigorously or **for more demanding and complex procedures** in general.



Limitations and Improvements

- We can use **data augmentation** methods to increase the size of the training set.
- We can **crop the images** to exclude the electrodes and letter R from the display which might be negatively affecting the image processing algorithm.
- We could address the **class imbalance** issue using **oversampling** techniques.



Thank You

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