

# **FEATURE EXTRACTION AND CLASSIFICATION FOR MALARIA DETECTION**

**Yarramsetti Jaya Kiran Kumar**

School of Computer Science and Engineering, Lovely Professional University, Punjab 144411, India;  
jayakirankumar2008@gmail.com

## **ABSTRACT:**

Malaria is brought about by protozoan parasites of the sort Plasmodium and is a significant reason for mortality and dreariness around the world. These parasites have a mind-blowing life cycle in their mosquito vector and vertebrate hosts. The essential variables adding to the resurgence of intestinal sickness are the presence of medication safe strains of the parasite, the spread of bug spray safe strains of the mosquito and the absence of authorized jungle fever immunizations of demonstrated adequacy. This minireview incorporates an outline of the illness, the existence pattern of the parasite, data identifying with the genome and proteome of the species deadly to people, Plasmodium falciparum, along with other ongoing improvements in the field. Generally, research center analysis has been made utilizing the thick blood film, which keeps on being the best quality level test. Nonetheless, this test has impediments, for example, the way wherein the film is readied, the degree of preparing of the eyewitness, the sufficiency of support of materials and hardware and its quite reasonable affectability. Hence, many research centers have focused their endeavors on the improvement of elective strategies for intestinal sickness determination. These incorporate strategies for the location of Plasmodia inside erythrocytes (fluorescent microscopy, Quantitative Buffy Coat (QBC), dull field microscopy, nucleic corrosive tests and immunofluorescence), techniques for the discovery of plasmodial antigens in body liquids (radioimmunoassay, chemical immunoassay) and techniques for the identification of hostile to plasmodial antibodies in serum (backhanded immunofluorescence, protein immunoassay, Western blotting). Here, we fundamentally survey the different techniques for jungle fever finding dependent on the world's writing and our involvement in the greater part of them, with accentuation on ongoing advances.

**KEYWORDS:** deep learning, Transfer learning, Classification, image processing.

## **1.INTRODUCTION**

With the advent of new and unknown diseases into human life, there is an urgent requirement to introduce modern technologies into the medical field at least to detect the existing diseases in an accurate way so that we could utilize the manpower in an efficient manner. Technologies like deep learning and other technologies will immensely help us to achieve this feat. With the availability of plenty of deep learning models, we can use them to predict or identify the diseases with the help of medical reports. The present profound learning models can arrive at human-level precision in breaking down and portioning a picture. The clinical business is one of the most noticeable ventures, where profound learning can assume a critical job, particularly with regards to imaging. Every one of those progressions in profound learning make it a noticeable piece of the clinical business. Profound learning can be utilized in wide assortment of territories like the discovery of tumors and sores in clinical pictures, PC helped diagnostics, the investigation of electronic wellbeing related information, the arranging of treatment and medication admission, climate acknowledgment and cerebrum PC interface, expecting to concoct choice help for the assessment of the individual's wellbeing. The critical component of the accomplishment of profound learning depends on the capacity of the neural organizations to take in significant level deliberations from input crude information through a general reason learning strategy. Albeit as of now, profound learning actually can't supplant specialists/clinicians in clinical determination, it can offer help for specialists in the clinical space in performing tedious works, for example, inspecting clinical pictures for the indications of malaria.

Malaria is brought about by single-celled microorganisms of the Plasmodium gathering. The sickness is most usually spread by a tainted female Anopheles mosquito. The mosquito nibble presents the parasites from the mosquito's spit into an individual's blood. The parasites travel to the liver where they develop and recreate. Five types of Plasmodium can contaminate and be spread by people. Most passings are brought about by *P. falciparum*, though *P. vivax*, *P. ovale*, and *P. malariae* by and large reason a milder type of malaria. The species *P. knowlesi* infrequently causes sickness in people. Intestinal sickness is normally analyzed by the minuscule assessment of blood utilizing blood films, or with antigen-based fast analytic tests. Methods that utilize the

polymerase anchor response to identify the parasite's DNA have been grown, however are not generally utilized in zones where jungle fever is basic because of their expense and intricacy.

The danger of illness can be diminished by forestalling mosquito nibbles using mosquito nets and bug anti-agents or with mosquito-control estimates, for example, splashing bug sprays and depleting standing water. A few drugs are accessible to forestall jungle fever in voyagers to territories where the illness is normal. Incidental dosages of the blend prescription sulfadoxine/pyrimethamine are suggested in babies and after the first trimester of pregnancy in quite a while with high paces of intestinal sickness. Starting at 2020, there is one antibody which has been appeared to decrease the danger of jungle fever by about 40% in kids in Africa. Endeavors to grow more powerful antibodies are continuous. The suggested treatment for intestinal sickness is a mix of antimalarial meds that incorporates artemisinin. The subsequent drug might be either mefloquine, lumefantrine, or sulfadoxine/pyrimethamine. Quinine, alongside doxycycline, might be utilized if artemisinin isn't accessible. It is suggested that in zones where the sickness is normal, jungle fever is affirmed if conceivable before therapy is begun because of worries of expanding drug opposition. Obstruction among the parasites has created to a few antimalarial meds; for instance, chloroquine-safe *P. falciparum* has spread to most malarial zones, and protection from artemisinin has become an issue in certain pieces of Southeast Asia.

## **2. METHODS**

### **2.1 Outline of Methodology**

My method follows same pattern as shown in the figure. It consists of image preprocessing, data augmentation, transfer learning using V6616, VGG19, RESNET50, INCEPTIONV3, XCEPTION, NASNETLARGE, feature extraction and classification each network with random forest classifier, logistic regression, support vector machine, bagging classifier, decision tree classifier.

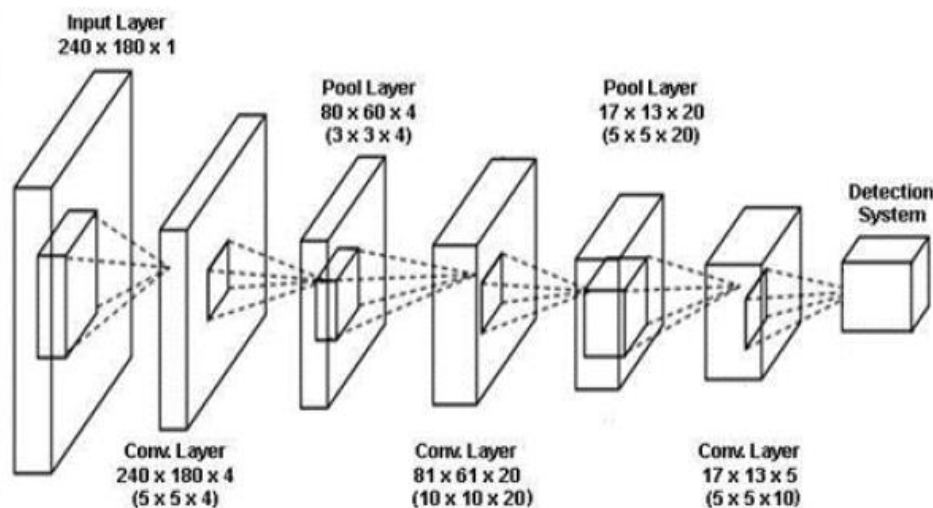
### **2.2 Image Preprocessing**

The entirety of the pre-prepared models were very huge to hold this dataset, and each model could be overfitted without any problem. To forestall this, some commotion was added to the dataset; it is notable that by adding some commotion to contributions of neural organization, in certain

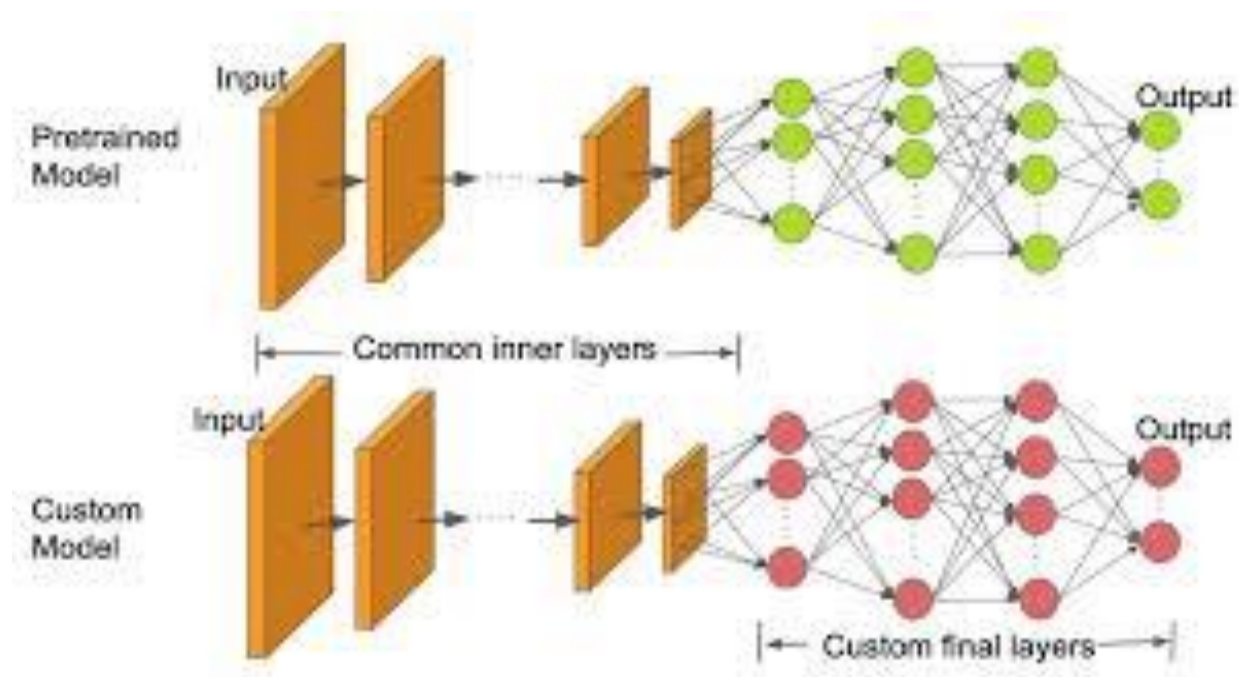
circumstances, this prompts huge improvement in summing up the dataset. In addition, adding commotion goes about as a type of increase of the dataset. Besides, other expansion procedures were additionally utilized. Since not all growth draws near were useful for X-beam pictures, we handled the pictures in four stages. To start with, we resized pictures to  $256 \times 256 \times 3$ , converting into array format (to manage the pneumonia indications on either side of the chest), Random Resized Crop (to get further connection among pixels), finally scaling and dividing the data into train and test sets.

## 2.4 Transfer Learning

As of now, the advanced profound learning models in PC vision use convolutional neural networks (CNNs). These layers make the unequivocal suspicion that any contribution to them is a picture. Early convolutional layers in an organization cycle a picture and think of recognizing low-level highlights in pictures like edges. These layers are effective in catching the spatial and fleeting conditions in a picture. This is finished with the assistance of channels. In contrast to typical feed-forward layers, these layers have a much lower number of boundaries and utilize a weight-sharing strategy, accordingly lessening calculation efforts. The learnable boundaries of each layer comprise of channels (or pieces), reached out through the full profundity of the information volume however these have a little responsive field. At the point when an information is exposed to forward pass, every portion is convolved over the tallness and width of the info volume, making a 2-D initiation guide of that channel. In the event that 'N' channels are utilized, at that point stacking those 'N' actuation maps along the profundity shapes the full yield of the convolutional layer



The enactment layer is valuable as it assists with approximating practically any nonlinear capacity. The component map from the convolutional layer is taken as contribution to the actuation layer. Pooling layers are utilized to decrease the spatial size of portrayal created by past pieces after convolution. This aides in diminishing the quantity of boundaries, hence decreasing the calculation work. These layers are utilized to remove prevailing aspects that are positional and rotational invariant. It is regular practice to incorporate a pooling layer in the middle of two convolutional layers.



The most well-known pooling layer is the maximum pooling layer; it isolates contribution to squares of a given size, and yields the most extreme estimation of each square. Then again, a normal pooling layer finds the normal of each square, both the strategies diminish the dimensionality and calculation efforts. When chipping away at a comparable PC vision issue, we can utilize those pre-prepared models, rather than experiencing the long cycle of preparing models without any preparation. This technique for moving gaining from one predefined and prepared model to some new area by reusing the organization layer loads is called move learning. Move learning is a valuable procedure and has accomplished huge outcomes in PC vision and different regions too.

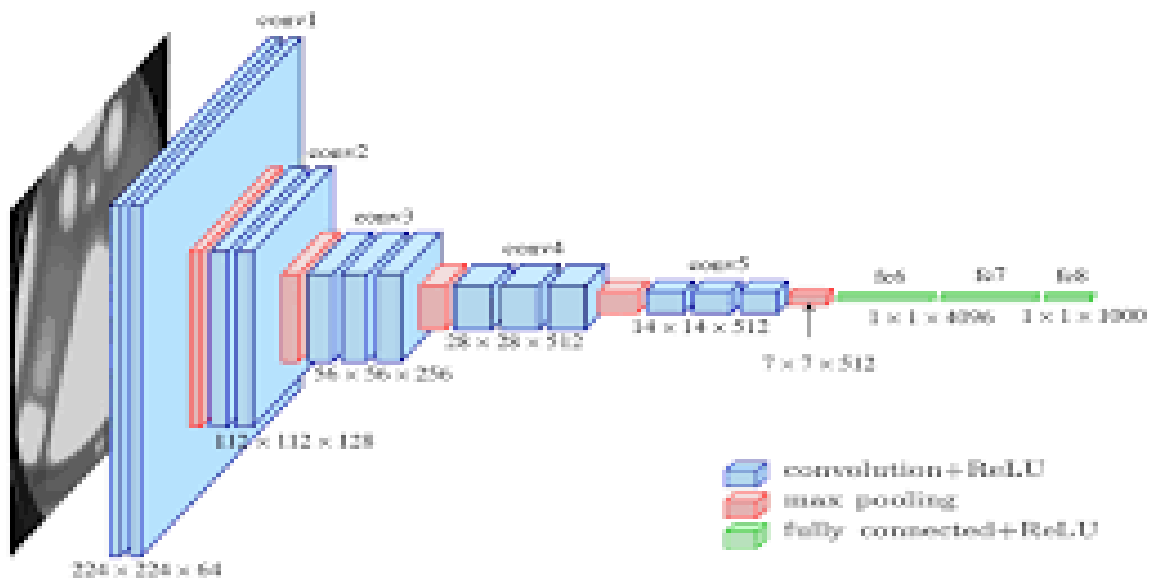
## 2.4 Pretrained Neural Networks

I have used six networks namely VGG16, VGG19, RESNET50, INCEPTIONV3, XCEPTION, NASNETLARGE which were pretrained on Imagenet dataset and then used to train and classify malaria disease images

### 2.4.1 VGG16 & VGG19

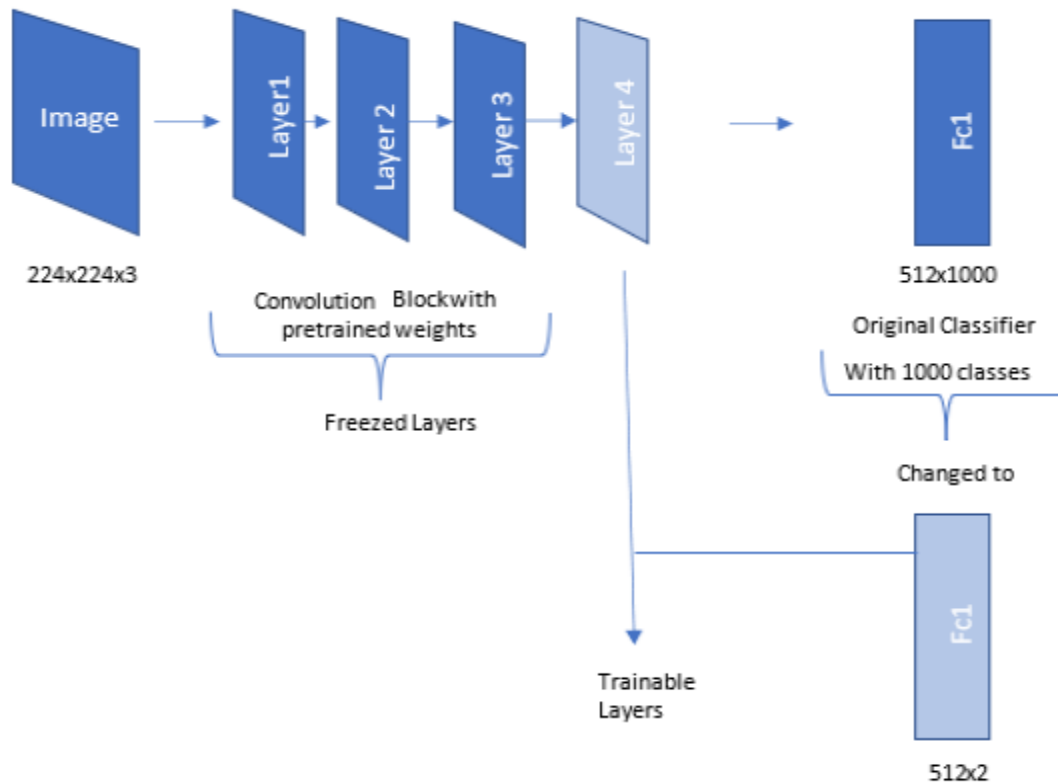
VGGNET is a convolutional neural network model is the best to use on images as it out perform other models with higher accuracy of 92.7% when performed on the imagenet dataset which contains more than 14 million pictures.

The numbers 16 and 19 indicates the number of deep layers that the model consists of.



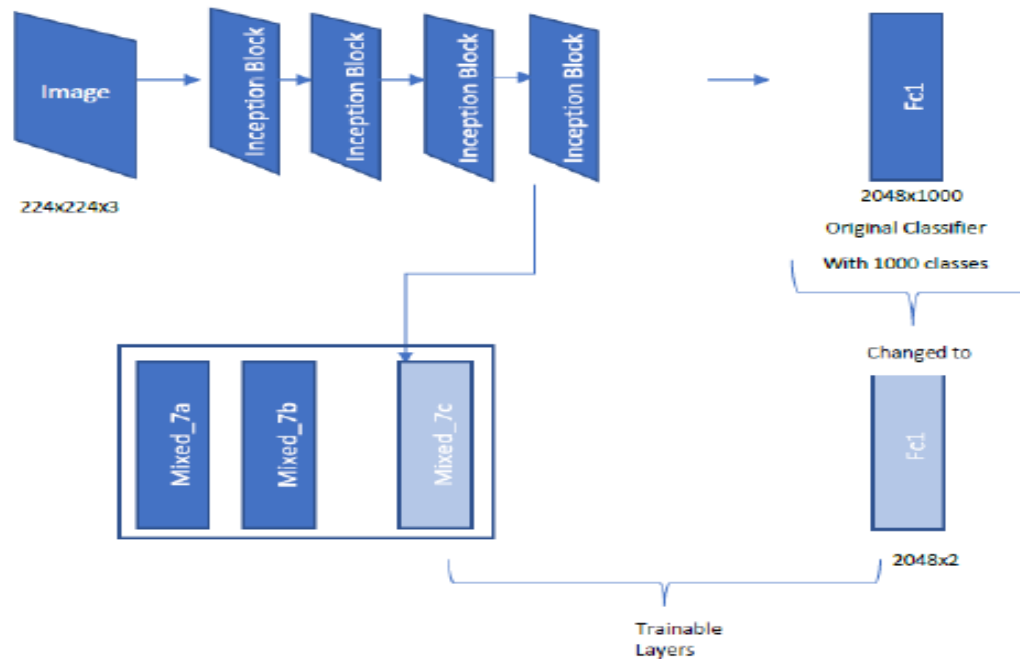
### 2.4.2 RESNET50

To simplify the training of deeper networks, RESNET has a residual learning framework. RESNET50 has four stages in which the max-pooling is done on stage 1 using  $7 \times 7$  and  $3 \times 3$  blocks of kernel sizes.



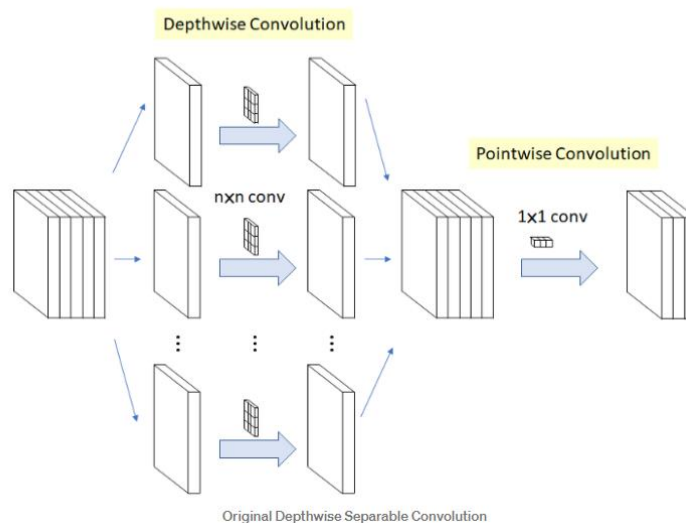
### 2.4.3 INCEPTIONV3

The Inception V3 model considers expanding the profundity and width of the profound learning organization, yet, keeping up the computational cost consistent simultaneously. This model was prepared on the unique ImageNet dataset with more than 1 million preparing pictures. It fills in as a staggered include generator by processing 1 x 1, 3 x 3 and 5 x 5 convolutions. This permits the model to utilize a wide range of bits on the picture and to get results from those. All such yields are stacked along the channel measurement, and utilized as contribution to the following layer. This model accomplished top execution for PC vision errands, by utilizing some serious procedures.



## 2.4.4 XCEPTION

Xception is a convolutional neural organization that is 71 layers profound. You can stack a pretrained rendition of the organization prepared on in excess of 1,000,000 pictures from the ImageNet information base. The pretrained organization can order pictures into 1000 item



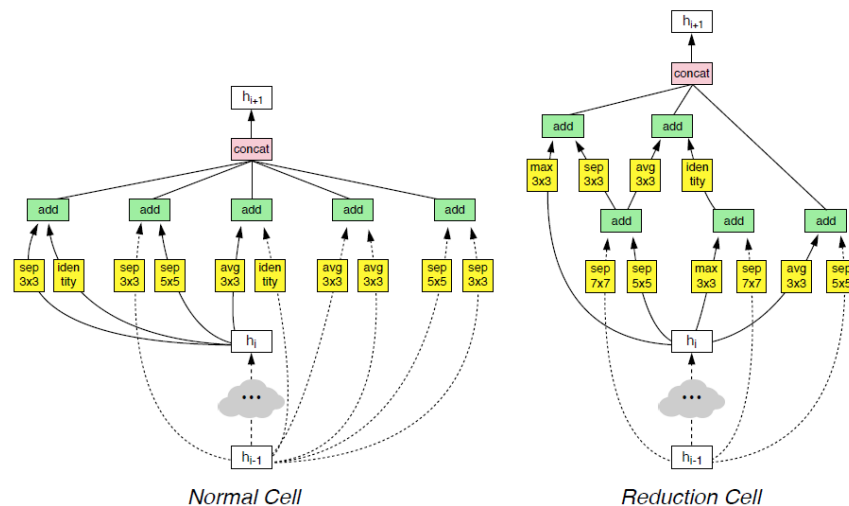
classes, for example, console, mouse pencil, and numerous creatures. Subsequently, the organization has learned rich component portrayals for a wide scope of pictures. The organization



has a picture input size of 299-by-299. For more pretrained networks in MATLAB, see Pretrained Deep Neural Networks. You can utilize order to arrange new pictures utilizing the Xception model. Follow the means of Classify Image Using GoogLeNet and supplant GoogLeNet with Xception.

## 2.4.5 NASNETLARGE

NASNet-Large is a convolutional neural organization that is prepared on in excess of 1,000,000 pictures from the ImageNet information base. The organization can order pictures into 1000 article classes, for example, console, mouse, pencil, and numerous creatures. Therefore, the organization has learned rich component portrayals for a wide scope of pictures. The organization has a picture input size of 331-by-331. For more pretrained networks in MATLAB, see Pretrained Deep Neural Networks. You can utilize characterize to group new pictures utilizing the NASNet-Large model. Follow the means of Classify Image Using GoogLeNet and supplant GoogLeNet with NASNet-Large.



## 2.5 DATASET

For the evaluation of the dataset downloaded from the Kaggle which has two folders test and train each containing 13.8k files where each has two folders named parasite and uninfected consists of 7990 and 7980 images.

	TEST	TRAIN
Parasitized	7990	7980
uninfected	7997	7823
Total	15987	15803

### 3 RESULTS

When each pretrained neural network is used to train the dataset and classified using various classifiers like random forest, SVM, Decision tree classifier, Logistic regression and bagging classifier. We recorded their accuracies using the metrics option in sklearn, compared among the pretrained networks from which the features are extracted. The accuracies with each classifier with each model as follows:

MODEL / CLASSIFIER	RANDOM FOREST	SVM	DECISION TREE CLASSIFIER	LOGISTIC REGRESSION	BAGGING CLASSIFIER
VGG16	88.81	71.65	81.34	91.04	70.91
INCEPTIONV3	94.03	97.02	94.03	94.78	96.27
RESNET50	82.09	67.91	82.09	79.11	67.91
VGG19	87.31	72.39	87.31	88.81	71.65
XCEPTION	96.27	96.27	96.27	97.02	97.02
NASNETLARGE	96.27	94.78	96.27	95.52	96.27

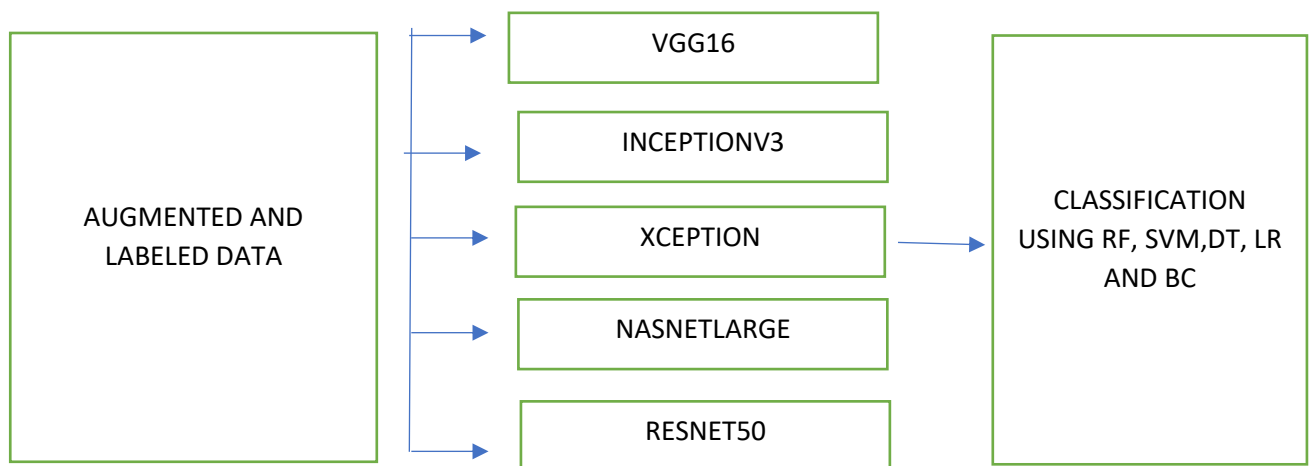
### MEAN ACCURACY FOR EACH MODEL:

VGG16	INCEPTIONV3	RESNET50	VGG19	XCEPTION	NASNET
80.75	95.226	75.822	81.494	96.57	95.822

Of all the pretrained models, XCEPTION perform well with a highest average accuracy of 96.57% while others perform with an accuracy as shown in the above table.

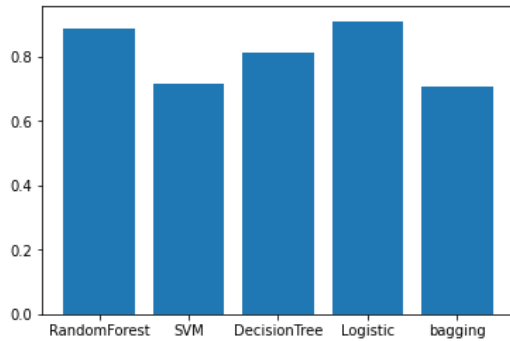
### DISCUSSION

Correct detection of this disease requires more accurate and detailed structured set of images which contains other patterns of the parasite, irregular shapes of the syndrome in the cell images which prevents the models to attain more accuracy and prevent to classify the image available in the dataset. Model used like VGG16, VGG19, XCEPTION, INCEPTIONV3, RECNET50, NASNETLARGE are trained over millions image which hardly deals with medical field, by which low amount of data may leads to overfitting and less generalization of the respective data. The accuracy can still be improved with introduction of more ensembled pretrained models and in future leads to the maximum accurate and sophisticated models.

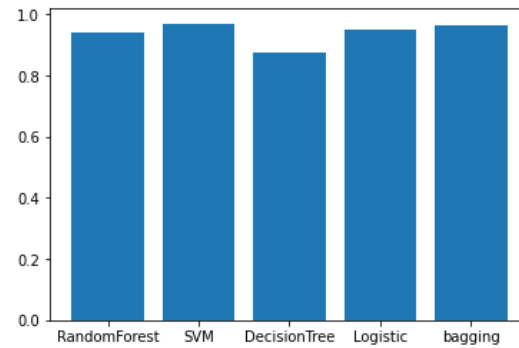


## ACCURACY GRAPHS FOR MODELS:

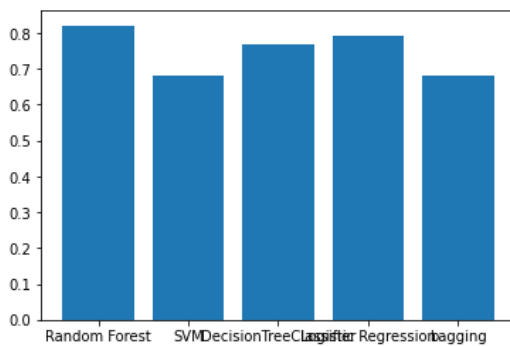
Accuracy for VGG16



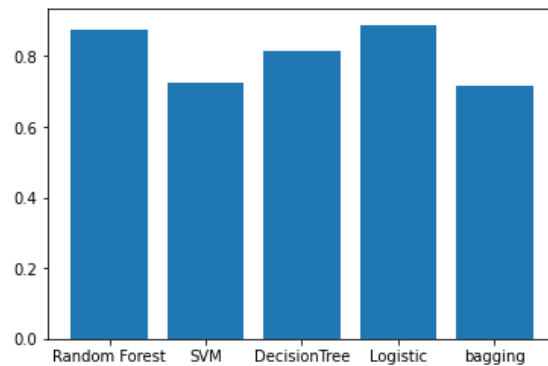
Accuracy for INCEPTIONV3



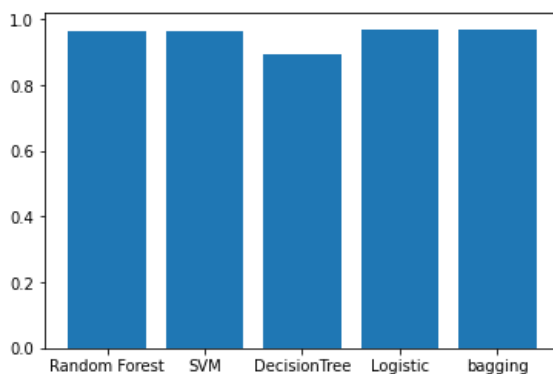
Accuracy for RESNET50



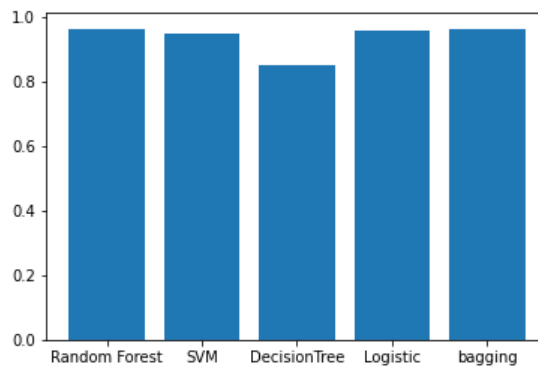
Accuracy for VGG19



Accuracy for XCEPTION



Accuracy for NASNETLARGE



## CONCLUSION:

In this paper, my main aim is to prove that the deep learning models can be used to detect diseases like malaria and decrease the use of manpower in that respective area of field so that it

can be used somewhere else. Pretrained models like VGG16, VGG19, RESNET50, XCEPTION, NASNETLARGE, INCEPTIONV3 were trained on the weights of pretrained models of imagenet dataset and the data was classified with features extracted from the respective models and classified with some well-known classifiers. The performance and the accuracy can be increased with introduction of more images to the deep learning models.

My project supports the fact that the deep learning models can be used to accurately predict malaria, which is commonly confirmed by a doctor or some physician. If the report after classified by the model is confirmed by the person in charge to conform it in the lab or hospital, reduces the human and technical error.

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CONFLICT OF INTEREST: Author declared no conflict of interests.

**GITHUB-LINK: <https://github.com/jashi2016/MALARIA-DETECTION>**