Major Project Proposal

Melanoma Detection: An Automated Approach

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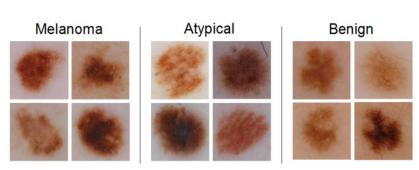
- 1. Significance of the problem
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Significance

- 1. Early melanoma diagnosis is critical to combatting the disease
- 2. Lack of experts and increasing melanoma incidences
- 3. An automation technique that can easily be adapted for other image based medical diagnostics
- 4. Explore recent algorithms in CV for image classification

Codella - using CNN and SVM (Transfer Learning)

- **Dataset**: International Skin Imaging Collaboration (ISIC) dataset
- Uses pre-trained Caffenet model from the ILSVRC
 - Concept detector layer, FC8 (1000 dimensions)
 - Fully connected layer, FC6 (4096 dimensions)
- The preprocessing step involves resizing the image and Subtract the model's input mean image to "centralize"
- Feature normalization : Sigmoid
- Classifier: Non-linear SVM using a histogram intersection kernel
- SVM score averaged FUSION



Drawbacks

- Melanoma vs Atypical and Benign has 92% accuracy while Melanoma vs. Atypical has a max of 72%.
- The network has been optimized for natural photographs of real-world objects.
- Based on stochastic learning with an annealing learning rate later samples in the dataset have lower effect.
- Model is highly depended on the training dataset to give high level of accuracy and doesn't adjust with new dataset, easily.
- Requires large datasets while most medical imaging problems have considerably small datasets

Codella - Sparse Coding and SVM

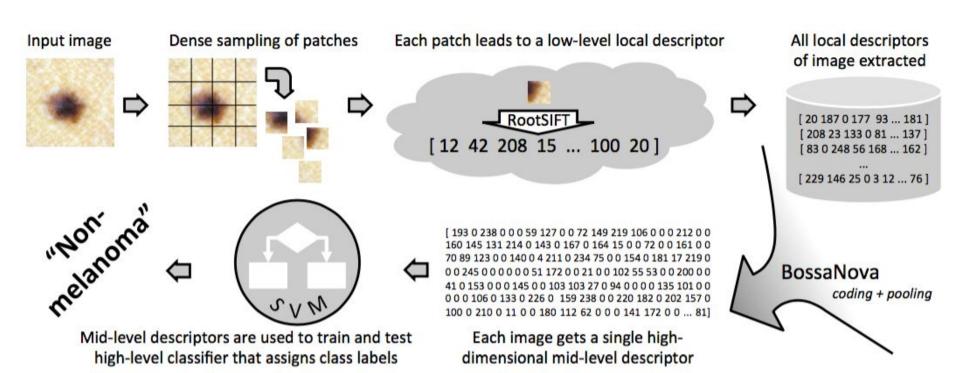
- **Dataset**: International Skin Imaging Collaboration (ISIC) dataset
- Unsupervised methods learns a dictionary of sparse codes
- SPAMS sparse coding dictionary learning algorithm- based on stochastic approximations.
- Images are rescaled to 128x128 pixel dimensions before extraction of 8x8 patches, to learn dictionaries of 1024 elements.
- Two dictionaries are constructed in color (RGB) and grayscale color spaces.
- Classifier: Non-linear SVM using a histogram intersection kernel

Drawbacks

- We performed the experiment and found that specificity is in accordance with the results in the paper but the accuracy depends upon the dataset
- The feature vector is multi-dimensional and hence, converting the feature vector to one dimension results in loss of spatial information
- It involves solving a non-convex optimization problem and hence, finding the global solution takes long time and sometimes results in dead end (as observed in the experiment)

BossaNova

- **Dataset**: International Skin Imaging Collaboration (ISIC) dataset
- The pipeline
 - 1. Pre-processing image by resizing using ImageMagick
 - 2. Low-level local feature extraction using RootSIFT in VLFeat
 - 3. Sparsification by mapping all dimensions below threshold to zero
 - 4. Descriptor sampling
 - 5. Learn PCA matrix (to reduce dimensionality)
 - 6. Create codebook by random choice via k-means routine
 - 7. Mid-level features are created
- Feature normalization : PCA
- **Classifier**: SVM



Drawbacks

- All identified features are treated equally lacks a hierarchy of characteristics
- Soft coding both saves geometric data but also results in denser feature vectors in the coding step (94 GB)
- The complete pipeline takes days to run => complex feature extraction.

Research Gap

- 1. Most of the methods proposed are based on empirical dataset and hence, the results are not consistent when tested on different datasets.
- 2. The topology of the Deep Convolutional Neural Network is decided by the user before training and hence, it is based on heuristics leading to underfitting or overfitting issues.
- 3. There is no algorithm that deterministically build the network appropriate for the dataset available, though work has been done on Constructive Learning for Multi-Layer Perceptron.

What next?

- Explore constructive learning for DNN
- 2. Understand characteristics of DNN by performing experiments
- 3. Formulate an algorithm to train topologies for image classification
- 4. A robust model for Melanoma Detection in particular.