Skin Cancer Identification Using Deep Learning Technique

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Introduction

- **Skin Cancer** is among the most rapidly increasing types of cancer globally, ranking as the sixth most common.
- It occurs due to the abnormal growth of skin cells, often triggered by factors such as UV ray exposure, a weakened immune system, and family history.
- Tumors can be classified as benign (non-harmful, like moles) or malignant (life-threatening and capable of damaging surrounding tissues).
- Benign tumors are non-cancerous, grow slowly, and do not spread, but may cause issues by pressing on nearby tissues.
- Malignant tumors are cancerous, grow aggressively, invade surrounding tissues, and can spread to other parts of the body.
- Early diagnosis and treatment are crucial for managing malignant tumors.



Benign & Melignant Images

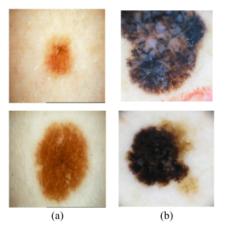


Figure: Image of (a)Benign Case (b)Malignant Case

Problem Statement

- Skin cancer diagnosis, particularly melanoma, is hindered by the subjectivity, cost, and limited availability of skilled professionals in traditional methods.
- While CNNs offer potential for automated detection, challenges such as limited annotated data, class imbalance, and lack of interpretability restrict their clinical adoption.
- A solution is needed to enhance accuracy, transparency, and accessibility for early and reliable diagnosis.

Title	Author(s)	Year	Volume	Journal name	Methodology	Result
			no.			
Identification	Gaurav Kumar Gautam, Sofia Singh, Archana Singh	2024	10	2024 Interna- tional Con- ference or Communica- tion, Compute Sciences and Engineering (IC3SE), Gau- tam Buddha Nagar, India.	Utilized EfficientNet Convolutional Neural Network (CNN) for feature extraction and classification. Implemented fairness evaluation algorithm to address biases in model	Achieved an accuracy of 82.14 percentage with EfficientNet for classifying seven skin lesion categories. Strong performance metrics: AUC = 0.9545, F1-score = high values near unity.
Classification	Ahmed Magdy, Hamdeer Hus- sein, Rehab F. Abdel-Kader, and Khaled Abd El Salam	2023	11	IEEE Access	AlexNet ResNet-18, ResNet-50, ResNet- 101 VGG-16, VGG- 19 DenseNet-201 EfficientNet-B0 Inception- v3 MobileNet-v2	greater than 99 percent- age with VGG-16 as the

Title	Author(s)	Year	Volume no.	Journal name	Methodology	Result
Learning-Based Convolutional Neural Network	Kumar		24	Measurement: Sensors	Developed a Deep Learning (DL) model using Convolutional Neural Networks (CNN). Employed VGG16 feature extractor for image-based Alzheimer detection. Used two MRI datasets for training and testing with accuracy, precision, recall, AUC, and FI-score metrics to evaluate performance.	percentage accuracy, precision of 0.905, recall of 0.904, AUC of 0.969, and F1-score of 0.904. Dataset 2: Achieved 71.1 percentage accuracy, precision of 0.71, recall of 0.711, AUC of 0.85, and F1-score of 0.71.

Title	Author(s)	Year	Volume	Journal name	Methodology	Result
			no.			
tion of Skin	shourbaji, Ghas- san Samara,	2021	20	Elementary Ed- ucation Online	Utilized Convolutional Neural Networks (CNNs) for classifying skin cancer images. The dataset used was obtained from Kaggle's ISIC archive and contained 3297 labeled images. Performed data augmentation (rotation, flipping, zooming) to enhance dataset diversity and prevent overfitting. The CNN architecture included layers for convolution, pooling, and fully connected classification.	skin cancer images into melanoma (malignant) and benign classes. Demonstrated the effec-

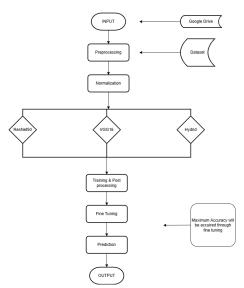
Title	Author(s)	Year	Volume	Journal name	Methodology	Result
			no.			
	Mohammed Rakeibul Hasan	2021		Journal Of Healthcare En- gineering	Comparison of CNN models (VGG16, ResNet50, SVM, sequential models) on Kaggle dataset with 6594 images; accuracy comparison and finetuning.	est accuracy of 93.18 per- centage, followed by SVM (83.48 percentage) and
Comparing the Performance of Linear Re- gression vs. Deep Learning on Detecting Melanoma Us- ing Apple Core ML	Herry Sujaini	2021	10	Bulletin of Elec- trical Engineer- ing and Infor- matics	Developed models using linear regression and CNN on the ISIC dataset; met- rics compared included accuracy, sensitivity, specificity, and false- positive/negative rates.	age accuracy with a 25 percentage false-negative rate, outperforming lin-

Proposed System

The following are the proposed models:

- **ResNet-50**: Used to address the vanishing gradient problem and extract deep features for accurate classification in skin cancer detection.
- VGG-16: Utilized for capturing detailed spatial hierarchies with its structured and efficient architecture.
- **Hybrid Model**: Combines the strengths of ResNet-50 and VGG-16 to improve overall classification accuracy and performance.

Architecture



Tools & Technologies

- NumPy: Efficient handling of large numerical arrays.
- Pandas: Data manipulation and analysis
- Matplotlib: Visualization of results
- Sklearn: Model training and evaluation
- TensorFlow/Keras: Deep learning model development
- Seaborn: Enhanced statistical visualizations

Feasibility Study

- Public datasets like **ISIC** on Kaggle provide annotated skin images, essential for training accurate skin cancer detection models.
- Tools like TensorFlow and Keras offer easy-to-use tools for building and refining deep learning skin cancer detection models.
- Models like CNN,ResNet-50,VGG-16 and Hybrid are highly effective in detecting skin cancer and identifying melanoma from dermoscopic images.
- Communities on GitHub and Google Scholar provide research, open source code, and support for skin cancer detection projects. They keep developers up-to-date on the latest advances.
- Ongoing research ensures that skin cancer detection models continue to improve. Integrates new techniques for better accuracy and interpretability in clinical use.

Societal Impact

- The proposed system can significantly reduce deaths related to melanoma by enabling accurate and early diagnosis, particularly in areas limited by resources.
- It provides a cost-effective and scalable solution that alleviates the burden on healthcare professionals and improves patient outcomes, ultimately improving global healthcare equity and reducing the socioeconomic impact of skin cancer.
- In general, this approach leads to improved global public health, improved access to timely medical care, and a reduction in health disparities.
- Sustainable Development Goals: GOOD HEALTH AND WELL BEING (3).

```
# loading the training data data_dir = '/content/drive/MyDrive/Major Project/train' train_df = loading_the_data(data_dir) train_df
```

	filepaths	labels
0	/content/drive/MyDrive/Major Project/train/ben	benign
1	$/content/drive/MyDrive/Major\ Project/train/ben$	benign
2	$/content/drive/MyDrive/Major\ Project/train/ben$	benign
3	$/content/drive/MyDrive/Major\ Project/train/ben$	benign
4	$/content/drive/MyDrive/Major\ Project/train/ben$	benign
2632	$/ content/drive/MyDrive/Major\ Project/train/mal$	malignant
2633	$/ content/drive/MyDrive/Major\ Project/train/mal$	malignant
2634	$/ content/drive/MyDrive/Major\ Project/train/mal$	malignant
2635	$/ content/drive/MyDrive/Major\ Project/train/mal$	malignant
2636	/content/drive/MyDrive/Major Project/train/mal	malignant
2637 rc	ws × 2 columns	

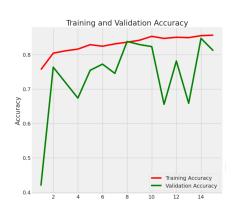
Importing the dataset

```
**Once the service of the service of
```

Pre-processing







```
# Model evaluation
model evaluation(ResNet50 model)
330/330 -
                   418s 1s/step - accuracy: 0.8573 - loss: 0.3104
42/42 -----
                  54s 1s/step - accuracy: 0.8551 - loss: 0.3068
42/42 -
                         92s 2s/step - accuracy: 0.7926 - loss: 0.4674
Train Loss: 0.2900655269622803
Train Accuracy: 0.8642396926879883
Validation Loss: 0.41477176547050476
Validation Accuracy: 0.811377227306366
Test Loss: 0.5126500725746155
Test Accuracy: 0.811377227306366
```

Model Evaluation & Accuracy

Project Timeline

Phase	Timeline	Description
Phase 1: Image	October	Collecting and pre-processing skin
Pre-processing and	2024 -	cancer image dataset from ISIC, ap-
Dataset Prepara-	Novem-	plying augmentation to address class
tion	ber 2024	imbalance and improve diversity.
Phase 2: Model	November	Develop deep learning models, includ-
Development	2024 -	ing ResNet-50, VGG-16, and hybrid,
	Decem-	for skin lesion classification.
	ber 2024	
Phase 3: Model	January	Ensure reliable performance with ex-
Interpretability	2025 -	tensive cross-validation and robust-
and Validation	February	ness testing under diverse conditions,
	2025	including image quality and lighting
		variations.

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Project Timeline

Phase	Timeline	Description
Phase 4: Deploy-	March	Deploy the model as a web or mobile-
ment and Integra-	2025	based diagnostic tool, enabling clini-
tion		cians and users to upload dermoscopic
		images for real-time analysis. Ensure
		the system is user-friendly and scal-
		able.
Phase 5: Paper	April	Prepare detailed documentation of
Publication	2025	the project's methodology, results,
	- May	and contributions. Submit the find-
	2025	ings to a peer-reviewed journal or con-
		ference and share insights with the
		broader research and medical commu-
		nities.

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Thank You