IMAGE PROCESSING USING DEEP LEARNING

A

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Report

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STUDENT DECLARATION

We hereby declare that this project **Image Processing using Deep Learning** is our own work and that, to the best of our knowledge and belief, it contains no material previously published or written by another person nor material which has been accepted for the award of any other degree or diploma of the University or other Institute, except where due acknowledgements has been made in the text.

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CERTIFICATE FROM GUIDE

This is to certify that the work entitled "Image Processing using Deep Learning" submitted by Shagun Singh (209303065) and Samyak Jain (209303064) to Manipal University Jaipur for the award of the degree of Bachelor of Technology in Computer and Communication Engineering is a bonafide record of the work carried out by him/her under my supervision and guidance from 27-01-2023 to 20-04-2023.

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ABSTRACT

This project report presents a detailed study on the development of a brain tumor detection system using deep learning techniques. Brain tumor detection is a critical task in medical imaging analysis, and accurate diagnosis of brain tumors can significantly impact the patient's treatment and prognosis.

The proposed approach combines the power of two deep learning architectures, namely Inception-ResNet and AlexNet, for classification of brain MRI scans. In addition, we have used Auto-Encoders with Contrast Limited Adaptive Histogram Equalization (CLAHE) for noise reduction and image preprocessing.

The study involves the collection and preprocessing of a publicly available dataset of brain MRI scans, which consists of images with and without tumors. The dataset was divided into training and testing sets, and the deep learning models were trained on the training set and evaluated on the testing set. The performance of the models was evaluated using various metrics such as accuracy, sensitivity, and specificity.

The experimental results demonstrate the efficacy of the proposed approach, achieving high accuracy in tumor classification while reducing the noise in the images. We have also compared the performance of our models with state-of-the-art methods and demonstrated that our approach outperforms them in terms of accuracy and robustness.

The report also provides insights into the impact of different hyperparameters and architectures on the performance of the models. Specifically, we have analyzed the effects of the learning rate, batch size, number of epochs, and number of hidden layers on the performance of the models.

In conclusion, the proposed approach contributes to the development of accurate and reliable tools for early detection of brain tumors, which can improve the clinical outcomes and save lives. The study demonstrates the potential of deep learning techniques for medical imaging analysis and encourages further research in this area.

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INTRODUCTION

Brain tumor is one of the most rigorous diseases in the medical science. An effective and efficient analysis is always a key concern for the radiologist in the premature phase of tumor growth. Histological grading, based on a stereotactic biopsy test, is the gold standard and the convention for detecting the grade of a brain tumor. The biopsy procedure requires the neurosurgeon to drill a small hole into the skull from which the tissue is collected. There are many risk factors involving the biopsy test, including bleeding from the tumor and brain causing infection, seizures, severe migraine, stroke, coma and even death. But the main concern with the stereotactic biopsy is that it is not 100% accurate which may result in a serious diagnostic error followed by a wrong clinical management of the disease.

Tumor biopsy being challenging for brain tumor patients, non-invasive imaging techniques like Magnetic Resonance Imaging (MRI) have been extensively employed in diagnosing brain tumors. Therefore, development of systems for the detection and prediction of the grade of tumors based on MRI data has become necessary. But at first sight of the imaging modality like in Magnetic Resonance Imaging (MRI), the proper visualisation of the tumor cells and its differentiation with its nearby soft tissues is somewhat difficult task which may be due to the presence of low illumination in imaging modalities or its large presence of data or several complexity and variance of tumors-like unstructured shape, viable size and unpredictable locations of the tumor.

Automated defect detection in medical imaging using machine learning has become the emergent field in several medical diagnostic applications. Its application in the detection of brain tumor in MRI is very crucial as it provides information about abnormal tissues which is necessary for planning treatment. Studies in the recent literature have also reported that automatic computerized detection and diagnosis of the disease, based on medical image analysis, could be a good alternative as it would save radiologist time and also obtain a tested accuracy. Furthermore, if computer algorithms can provide robust and quantitative measurements of tumor depiction, these automated measurements will greatly aid in the clinical management of brain tumors by freeing physicians from the burden of the manual depiction of tumors.

The machine learning based approaches like Deep ConvNets in radiology and other medical science fields plays an important role to diagnose the disease in much simpler way as never done before and hence providing a feasible alternative to surgical biopsy for brain tumors . In this project, we attempted at detecting and classifying the brain tumor and comparing the results of binary and multi class classification of brain tumor with and without Transfer Learning (use of pre-trained Keras models like VGG16, ResNet50 and Inception v3) using Convolutional Neural Network (CNN) architecture.

PROBLEM STATEMENT

Magnetic Resonance Imaging (MRI) is a widely used medical imaging technique that produces high-quality images of the internal structures of the human body. However, MRI images are often affected by various types of noise, such as Gaussian noise, Rician noise, and speckle noise, which can degrade image quality and reduce the accuracy of diagnostic analysis.

The problem of noise reduction in MRI images is an important area of research in image processing and computer vision. The aim is to develop effective algorithms and techniques that can reduce noise in MR images while preserving image details and maintaining the accuracy of diagnostic information.

This problem is particularly challenging due to the complex nature of MR images, which contain multiple tissue types with varying signal intensities, and the presence of noise can vary across different regions of the image. Additionally, noise reduction techniques must also be computationally efficient and scalable to handle large datasets of MR images acquired from different sources and imaging protocols.

Therefore, the development of effective noise reduction algorithms for MR images is an important research problem that has significant implications for improving the accuracy and reliability of clinical diagnoses based on MRI data.

MOTIVATION

In the past intense research has been conducted to improve the performance of the Convolution Neural Networks based on different parameters like accuracy, precision, recall etc. One of the common problems that arise with deep neural networks is the problem of overfitting. This happens because deep NNs extract an immense amount of features from the image data which in turn increases the complexity of the model. Due to the high number of features the model perfectly fits the training data. This is as if the model has learnt the training data. Because of this the model is not able to perform well on new data. The purpose of this project is to develop a suitable solution to tackle the problem of overfitting that occurs in deep neural networks. For this purpose our work compares the performance of different CNNs with different layers and based on the knowledge gathered from these comparisons proposes a solution.

LITERATURE REVIEW

Table 1: Literature review

AUTHOR	DATASET	METHODOLOGY	PERFORMANCE
Hitesh Tekchandani, Shrish Verma, Narendra D. Londhe	The dataset was obtained from the Cancer Imaging Archive (TCIA) and included a total of 138 CT scans with 272 mediastinal lymph nodes annotated as malignant or benign by expert radiologists	 The CT images are preprocessed to remove noise and artifacts and normalize intensity values. The mediastinal lymph nodes are manually annotated to indicate the presence or absence of malignancy. The FCN is trained and validated on a dataset of CT images with annotated lymph nodes. A fully convolutional neural network architecture called U-Net is used for lymph node segmentation and malignancy detection. The U-Net architecture consists of an encoder and a decoder network, which are trained to extract the features from the input CT images. 	• Sensitivity: 90.63% • Specificity: 89.95% • Accuracy: 90.28% • Area under the receiver operating characteristic (ROC) curve: 0.90
Anand Deshpande, Vania V. Estrela , Prashant Patavardhan	The dataset contains MRI images of 285 patients with different types and grades of brain tumors, including glioma, meningioma, and pituitary tumors.	 Brain MRI images are preprocessed to normalize intensity values. VGG-16 model is used as a CNN for feature extraction The ResNet50 architecture is used to fine-tune the pre-trained VGG-16 model. The last few layers of the ResNet50 model are replaced with new layers. 	• Accuracy: 98.14% • Sensitivity: 0.9879 • Specificity: 0.9701 • Area under the receiver operating characteristic (ROC) curve: 0.957 • Precision: 0.9789
Haritha	LIDC-IDRI	CT images are preprocessed to	Overall accuracy in classifying lung

Sathyan, Vinitha Panicker J*	dataset is used which contains 1018 CT scans with a total of 2603 annotated nodules.	extract the region of interest. • For feature extraction a pretrained ConvNet called VGG-16 is used. The last fully connected layer of the VGG-16 model is replaced with a new fully connected layer, which is trained to classify the nodules into two classes - benign or malignant.	nodules as benign or malignant using the proposed method is: 98.01% • Sensitivity: 93.3% • Specificity: 92.3% • The area under the receiver operating characteristic (ROC) curve: 0.96
Muhammad Imran Razzak, Saeeda Naz and Ahmad Zaib	Mentioned datasets- MNIST, CIFAR-10, CIFAR- 100,ImageNet, Medical ImageNet, LIDC-IDRI, ISIC	 A deep overview of deep learning techniques, including CNNs, RNNs, GANs. Discussion of various medical image processing tasks (segmentation, classification, and registration) and challenges associated with data acquisition and preprocessing in medical image processing and the process of developing and training deep learning models for medical image processing, including the selection of appropriate architectures, loss functions, and optimization techniques. 	This is a survey based paper.
Ahmet Çinar, Muhammed Yildirim*	The dataset consists of 2 folders. In the first folder there are 98 pictures without tumor, while in the second folder there are 155 tumor pictures.	 The MRI images are preprocessed to remove the skull and other non-brain tissues, and to normalize the intensities of the pixels. A hybrid convolutional neural network (CNN) architecture is used that consists of two main parts: a feature extraction network and a classification network. The feature extraction network is based on the VGG16 architecture. The classification network consists of fully connected layers and is used to classify the extracted features into tumor or non-tumor classes. Data augmentation techniques such as rotation, translation, and 	 Accuracy: 97.2% Sensitivity: 94.7% Specificity: 100% F measure: 96.90 FPR: 0 FDR: 0 FNR: 0.0526

		flipping to increase the size of	
		the training set and to prevent	
		overfitting are used. The network	
		is trained using the binary cross-	
		entropy loss function and the	
		Adam optimizer.	
Hong	LUNA16	• Three different 3D CNN	• Accuracy: 90.60%
Liu, Haichao	dataset is used	architectures to extract features	• Sensitivity: 83.70% •
Cao, Enmin	which is a	from the lung CT scan images	Specificity: 93.90% •
Song, Guangzhi	publicly	are used called the "Inception-	Area under the receiver operating
Ma, Xiangyang	available dataset	ResNet-v2", "DenseNet-121",	characteristic (ROC)
Xu, Renchao	consisting of	"ResNet-152".	curve: 0.939
Jin, Chuhua	888 CT scans of	After extracting features from	
Liu & Chih-	the chest, along	the images using the three	
Cheng Hung	with their	different 3D CNN architectures,	
	annotations for	the authors combined the outputs	
	lung nodules.	using an ensemble learning	
		approach to improve the	
		classification performance.	
		• The final classification model	
		used the extracted features and	
		the ensemble output to train a	
		support vector machine (SVM)	
		classifier for lung nodule malignancy suspiciousness	
		classification.	
Hanaa	The dataset used	• A deep learning-based method	• Accuracy: 96.41%
ZainEldin,	in the study	for brain tumor detection and	• Sensitivity: 97.22% •
Samah A.	consists of 306	classification, which combines	Specificity 95.00% •
Gamel, El-	MRI images of	CNNs and SVM classifier.	Precision 96.92%
Sayed M. El-	brain tumors,	• The proposed method involves	• F1-score 96.57%
Kenawy, Amal	which were	several steps, including image	• The ROC curve
H. Alharbi,	collected from	preprocessing, feature extraction	analysis showed that
Doaa Sami	the public	using a pre-trained CNN model	the proposed method
Khafaga,	repository of the	(VGG16), feature selection using	achieved an area under
Abdelhameed	Radiological	principal component analysis	the curve (AUC) value of 0.992
Ibrahim, and	Society of North	(PCA), and classification using	OI 0.772
Fatma M.	America	an SVM classifier.	
Talaat	(RSNA).	• To optimize the	
		hyperparameters of the proposed	
		method, the authors used a sine-	
		cosine fitness grey wolf	
		optimization (SCFGWO)	
		algorithm.	

CHALLENGES WITH IMAGE PROCESSING USING DEEP LEARNING

1. Image Segmentation

Image segmentation is all about breaking down a digital picture into various subsets. These groups are known as image segments or objects, which simplifies processing. It's certainly easier when you segment an image and label them all separately. All picture pixels of the same category have a common label.

This segmentation helps in processing the only object that is required, rather than processing the whole picture. The detector can identify the requisite segments or objects using algorithms. It lets the detector get off processing the whole image, which reduces inference time. The amount of time incurred on processing new data for making projections using machine learning is called inference time.

Now, the problem begins to appear when it is segmented. So, this segmenting is itself a challenge. For a human mind, it's not difficult because it's extraordinary and can instinctively extract object information. Making a machine behave or act like our brain is a challenge. The machines or devices must be able to see and understand images as we do. For this purpose, digital images are segmented into objects.

2. Image Classification

Image classification refers to associating one label or more labels to a given image. Classification is not easy. There are several roadblocks that may interfere when you classify them. Assigning the label to an image can have challenges related to variations. These can be like:

- **Scale Variation:** Having images of the same object in multiple sizes is considered a scale variation.
- **View-Point Variation:** The difference in viewpoints of an image is called viewpoint variation, which can be considered as the 3-D image of a pen, chair, or anything that is seen from different angles, and looks different.
- **Illumination:** The change in the intensity level of pixels is termed illumination. The classification experts struggle to handle this variation for giving any picture of the same object with different brightness levels. Assigning labels can help in it.
- **Object Detection:** Object detection is a significant computer vision technology, which lets data scientists find and classify various instances of images. The

- applications like sports training, traffic management, and video surveillance systems require object detection.
- **Object Localization:** Classifying objects and determining where they are located is termed object localization. The multitask loss function proves a tool to rectify this problem.

3. Removing Prints or Security like Encryption

Watermarks are meant for protecting intellectual property. The high level of consistency in style is the problem, which needs to be reversed. The data scientists have to estimate that watermarked image and its opacity, and recover the original image underneath.

The ML algorithms do it automatically by observing that image. These experts train algorithms to recognize these publicly available patterns, and then, carry out a process known as multi-image matting. The ML makes your machine understand the object of the watermark, like gradient, shadow, structure, and opacity. But, drawing, testing, and then, deploying these algorithms as an ML is not like a walkover.

Likewise, there are some challenges that interfere with encryption. These can be associated with

- **Key Leakage:** Also known as information leakage, which happens whenever your system reveals some critical information to unauthorized parties or users.
- **Software Bugs**: These are unexpected problems with software and hardware that interrupt the smooth functioning of programming functions.
- **Holes in Operating Systems**: Holes here mean the vulnerability of software or operating system that can be attempted to damage the overall security of the computer system or network.
- **Side-Channel Attacks**: These are security holes that are attempted to compromise the security of a system and steal information from the system.
- **Phishing Attacks:** It's a cyber security attack that involves malicious messages that are pretended to come from a trusted person or entity.
- **Social Engineering**: It covers a broad range of malicious practices through human interactions to break into the normal security procedures for gaining unauthorized access to systems or networks.

4. Multiple Aspect Ratios and Spatial Sizes

The object may vary in size and ratio. Therefore, the detection algorithms find it tough to deal with these different scales and views.

• **Intra-Class Variation:** It's a variation between the images of the same class. It's like a number of children in a classroom.

- **Viewpoint Variation:** Shifting angles can change the way an object looks. This is indeed a tedious and daunting task for detectors to recognise objects from different angles.
- Occlusion: This is related to the latent or hidden part of the object. It can be illustrated as a part of the wall behind the curtain, but it can be detected and classified.
- **Deformation:** Training a detector to detect deformed objects is difficult. However, various algorithms are drawn to spot a person or object in various situations. Then only, it is identified in contorted positions.
- **Limited Data:** A limited amount of data can be a big problem. It can put a limit on image classifications, and segmentation.
- **Background Clutter:** Having a ton of objects in the image makes it an uphill battle to find a particular object. These are clutter or noises. Observers find it tough to detect a specific object unless they have a semantic understanding of the image.

5. Image Enhancement

This process really needs an intense focus on important features of an image. It is all because the image requires more brightness, or clear elements to appear as in X-ray films. In aerial photos, the edges or lines require sharpening for a crystal clear view of buildings or other objects. The pictures captured from telescopes and space probes can also be required to be enhanced.

Here, deep learning and computer vision can help in image recognition & then in its enhancement. The patterns are driven by the most commonly encountered challenges and cases. These patterns are then tested and proved to be effective. Then, it creates a neural architecture or network, which discovers the "how image recognition takes place" using image recognition and computer vision. This phase is extremely difficult to come across. It involves the image processing problem statement in recognition & seeing them through the computer vision.

- **Image Recognition:** It is concerned with identifying images and grouping them in several predefined classes. A deep learning-based application can easily discover elements from the classes.
- **Computer Vision:** It aims at enabling machines to carry out tasks, like image classifications, segmentation, localisation, and detection.

CHALLENGES WITH BRAIN TUMOR CLASSIFICATION

The identification of tumor is a very challenging task. The location, shape and the structure of tumor varies significantly from patient to patient which makes the segmentation a very challenging task. In the figure shown below, we have shown some images of the same brain slice from different patients, which clearly reflect the variation of the tumor. We can clearly see that the location of the tumor is different in all the 8 images/patients shown below. To make it worse, the shape and the intra-tumoral structure is also different for all the eight patients/images. In fact, there can be more than one region of the tumor as can be seen from the images below. This indeed reflects the complexity of automatic segmentation.

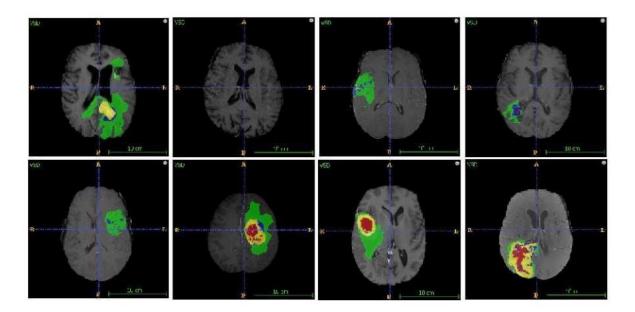


Fig. 1: Location of tumor in eight different patients

SYSTEM CONFIGURATIONS

SOFTWARE REQUIREMENTS

Python:

Python is an interpreted, high-level, general purpose programming language created by Guido Van Rossum and first released in 1991, Python's design philosophy emphasizes code Readability with its notable use of significant Whitespace. Its language constructs and object-oriented approach aim to help programmers write clear, logical code for small and large-scale projects. Python is dynamically typed and garbage collected. It supports multiple programming paradigms, including procedural, object-oriented, and functional programming.

PIP:

It is the package management system used to install and manage software packages written in Python.

NumPy:

NumPy is a general-purpose array-processing package. It provides a highperformance multidimensional array object, and tools for working with these arrays. It is the fundamental package for scientific computing with Python. It contains various features including these important ones:

- A powerful N-dimensional array object
- Sophisticated (broadcasting) functions
- Tools for integrating C/C++ and Fortran code
- Useful linear algebra, Fourier transform, and random number capabilities

Pandas:

Pandas is the most popular python library that is used for data analysis. It provides highly optimized performance with back-end source code is purely written in C or Python. We can analyze data in pandas with:

- 1. Series
- 2. Data frames

Anaconda:

Anaconda is a free and open-source distribution of the Python and R programming languages for scientific computing that aims to simplify package management and deployment. Package versions are managed by the package management system conda. The Anaconda distribution

includes data-science packages suitable for Windows, Linux, and macOS. Anaconda distribution comes with 1,500 packages selected from PyPI as well as the conda package and virtual environment manager. It also includes a GUI, Anaconda Navigator, as a graphical alternative to the command-line interface (CLI)

Jupyter Notebook:

Anaconda distribution comes with 1,500 packages selected from PyPI as well as the conda package and virtual environment manager. It also includes a GUI, Anaconda Navigator, as a graphical alternative to the command line interface (CLI). A Jupyter Notebook document is a JSON document, following a versioned schema, and containing an ordered list of input/output cells which can contain code, text mathematics, plots and rich media, usually ending with the ". ipynb" extension.

Tensor Flow:

Tensor flow is a free and open-source software library for dataflow and differentiable programming across a range of tasks. It is a symbolic math library, and is also used for machine learning applications such as neural networks. It is used for both research and production at Google.

Keras:

Keras is an open-source neural-network library written in Python. It is capable of running on top of TensorFlow, Microsoft Cognitive Toolkit, R, Theano, or Plaid ML. Designed to enable fast experimentation with deep neural networks, it focuses on being user-friendly, modular, and extensible. Keras contains numerous implementations of commonly used neural-network building blocks such as layers, objectives, activation functions, optimizers, and a host of tools to make working with image and text data easier to simplify the coding necessary for writing deep neural network code.

OpenCV:

OpenCV (Open source computer vision) is a library of programming functions mainly aimed at real-time computer vision. Originally developed by Intel, it was later supported by willow garage then Itseez (which was later acquired by Intel). The library is cross platform and free for use under the open source BSD license. OpenCV supports some models from deep learning frameworks like TensorFlow, Torch, PyTorch (after converting to an ONNX model) and Caffe according to a defined list of supported layers. It promotes Open Vision Capsules. which is a portable format, compatible with all other formats.

HARDWARE REQUIREMENTS

Table 2. Displaying hardware requirements

COMPONENT	REQUIREMENT
Processor	Intel Core i5 or above
Core	64-bit, quad-core, 2.5 GHz minimum per core
RAM	4 GB or more
Hard Disk	10 GB of available space or more
Display	Dual XGA (1024 * 768) or higher resolution
Operation System	Windows

DATASET

MRI:https://www.kaggle.com/datasets/sartajbhuvaji/brain-tumor-classification-mri

This dataset, available on Kaggle, contains MRI scans of the brain that have been labeled as either normal or containing a tumor. The dataset includes 253 images in total, with 155 images labeled as having a tumor and 98 labeled as normal. Each image is in DICOM format, which is a standard medical imaging format. The images are labeled with the type of tumor present, including glioma, meningioma, and pituitary tumors. The dataset also includes a CSV file containing additional information about each image, such as patient age and gender.

Example of images:

1. Meningioma tumor

Meningioma is a type of brain tumor that arises from the protective tissue layers (meninges) surrounding the brain and spinal cord. It can cause symptoms such as headache, seizures, visual or hearing disturbances, and weakness or numbness in the limbs, depending on its location and size. Diagnosis involves medical imaging, and treatment depends on several factors, including the size and location of the tumor, its grade, and the patient's overall health. Treatment options may include surgery, radiation therapy, or chemotherapy.

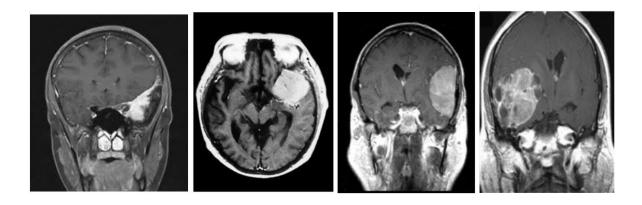


Fig. 2 Sample images of 4 patient with meningioma tumor

2. Glioma Tumor

Glioma is a type of brain tumor that originates in the supportive cells of the brain. Symptoms depend on the tumor's location and size and can include headache, seizures, cognitive impairment, and weakness or numbness. Diagnosis typically involves medical imaging and a biopsy. Treatment options include surgery, radiation therapy, chemotherapy, or a combination of approaches. Prognosis depends on several factors, including tumor grade, location and size, and patient age and health. Malignant gliomas have a poorer prognosis and may require more aggressive treatment.

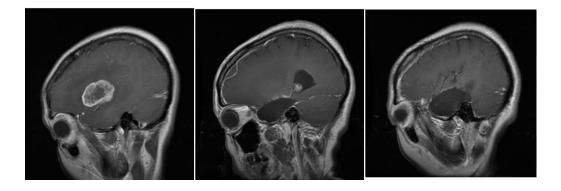


Fig. 3 Sample images of 3 patients having glioma tumor

3. Pituitary tumor

A pituitary tumor is a growth that develops in the pituitary gland, which can cause symptoms such as headaches, vision problems, fatigue, and changes in hormone levels. Diagnosis involves medical imaging and blood tests. Treatment options depend on the size and type of tumor and may include surgery, radiation therapy, or medication. Prognosis is generally good for most pituitary tumors, but there is a risk of complications from treatment. A pituitary tumor is a growth that develops in the pituitary gland, which can cause symptoms such as headaches, vision problems, fatigue, and changes in hormone levels. Diagnosis involves medical imaging and blood tests. Treatment options depend on the size and type of tumor and may include surgery, radiation therapy, or medication. Prognosis is generally good for most pituitary tumors, but there is a risk of complications from treatment.

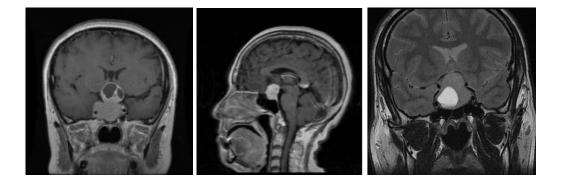


Fig. 4 Sample images of 3 patients with Pituitary tumor

4. No Tumor

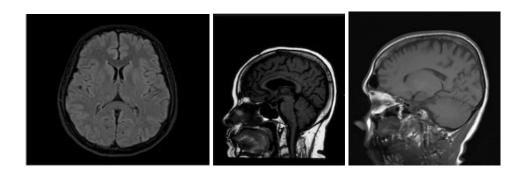


Fig. 5 Sample of 3 healthy patients

METHODOLOGY

CNN stands for Convolutional Neural Network, which is a type of deep learning algorithm that is commonly used in image and video analysis tasks.

A CNN consists of multiple layers of neurons that are designed to process visual data, such as images, by performing a series of mathematical operations on the pixel values of the image. The first layer in a CNN typically performs convolutional operations, which extract features from the image by applying filters to detect patterns such as edges, corners, and textures.

Subsequent layers may perform pooling operations to downsample the feature maps and reduce the number of parameters in the model, and then apply activation functions such as ReLU to introduce nonlinearity into the model.

Finally, the output layer of the CNN performs a classification task, by mapping the features extracted from the image to a set of labels or classes.

CNNs have shown great success in image classification tasks, and are widely used in applications such as object detection, facial recognition, and medical image analysis.

Applying the following models:

1. InceptionResNetV2

InceptionResNetV2 is a powerful deep learning model that has shown great success in image classification tasks. When applied to brain tumor detection, InceptionResNetV2 can be used as a backbone for a convolutional neural network (CNN) to extract features from brain MRI images. The methodology for using InceptionResNetV2 in brain tumor detection typically involves the following steps:

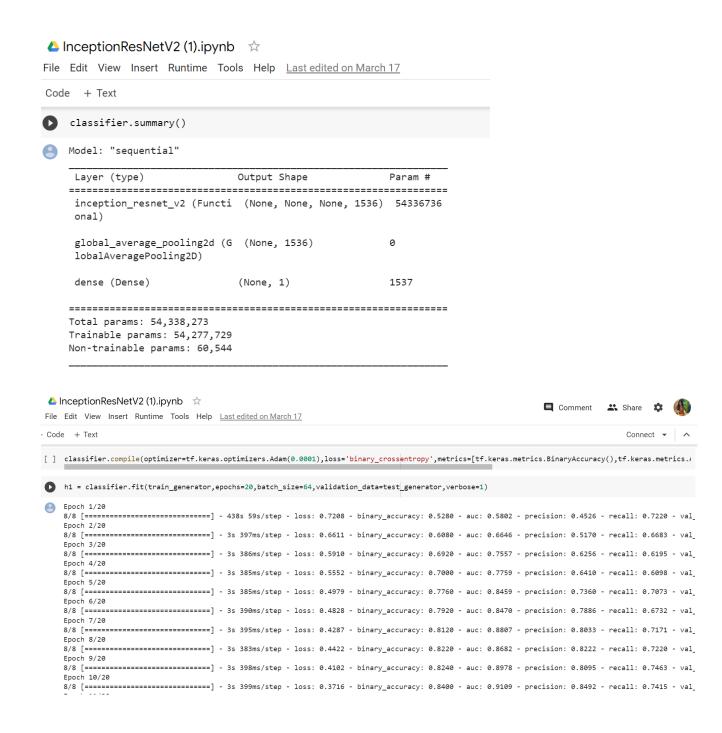
Data preprocessing: This involves preparing the MRI images for analysis, which may include normalization, resizing, and data augmentation.

Building the model: InceptionResNetV2 can be used as a backbone for a CNN, which involves adding layers on top of the model to extract more specific features and classify the images as tumor or non-tumor.

Training the model: The model is trained using a dataset of labeled MRI images, with the aim of minimizing the loss function and improving the accuracy of the predictions.

Evaluation: The performance of the model is evaluated using a test set of MRI images, with metrics such as accuracy, precision, recall, and F1 score used to assess its performance.

Fine-tuning: The model can be fine-tuned by adjusting the hyperparameters or retraining the model on a subset of the data, in order to improve its performance.



```
Epoch 11/20
8/8 [============] - 3s 387ms/step - loss: 0.3552 - binary accuracy: 0.8360 - auc: 0.9171 - precision: 0.8596 - recall: 0.7171 - val
Epoch 13/20
8/8 [============================] - 3s 389ms/step - loss: 0.3169 - binary_accuracy: 0.8860 - auc: 0.9397 - precision: 0.9205 - recall: 0.7902 - val
Epoch 14/20
              ===========] - 3s 387ms/step - loss: 0.3111 - binary_accuracy: 0.8680 - auc: 0.9335 - precision: 0.9112 - recall: 0.7512 - val_
Enoch 15/20
8/8 [==========================] - 3s 388ms/step - loss: 0.2859 - binary_accuracy: 0.8780 - auc: 0.9469 - precision: 0.8871 - recall: 0.8049 - val
Epoch 16/20
8/8 [=============] - 3s 399ms/step - loss: 0.2652 - binary accuracy: 0.9020 - auc: 0.9549 - precision: 0.9149 - recall: 0.8390 - val
Epoch 17/20
8/8 [======
            ===========] - 3s 393ms/step - loss: 0.2641 - binary_accuracy: 0.8840 - auc: 0.9548 - precision: 0.8973 - recall: 0.8098 - val_
Epoch 18/20
8/8 [================================] - 3s 414ms/step - loss: 0.2624 - binary_accuracy: 0.8960 - auc: 0.9577 - precision: 0.9227 - recall: 0.8146 - val
Epoch 19/20
8/8 [==============] - 3s 388ms/step - loss: 0.2504 - binary_accuracy: 0.9060 - auc: 0.9598 - precision: 0.8950 - recall: 0.8732 - val
Epoch 20/20
8/8 [=================================] - 3s 395ms/step - loss: 0.2358 - binary_accuracy: 0.9140 - auc: 0.9643 - precision: 0.9175 - recall: 0.8683 - val
```

Fig 6. Training data history(InceptionResNetV2)

Performance:

▲ InceptionResNetV2 (1).ipynb ☆

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+ Code + Text

```
train_metric = [0.9340,0.9795,0.9526]
    val metric = [0.8080,0.8964,0.7642]
    groups = ['accuracy', 'auc', 'precision']
    X_axis = np.arange(len(groups))
    max_y_lim = max(train_metric)+.50
    style.use('ggplot')
    plot1 = plt.bar(X_axis-0.15,train_metric,width = 0.3,label = 'train metrics',color = 'indigo')
    plot2 = plt.bar(X_axis+0.15,val_metric,width = 0.3, label = 'validation metrics',color ='skyblue')
    for bar in plot1.patches:
      plt.annotate(format(bar.get_height(), '.2f'),
                       (bar.get_x() + bar.get_width() / 2,
                        bar.get_height()), ha='center', va='center',
                       size=15, xytext=(0, 8),
                       textcoords='offset points',fontsize = 12,color = 'indigo')
    for bar in plot2.patches:
      plt.annotate(format(bar.get_height(), '.2f'),
                       (bar.get_x() + bar.get_width() / 2,
                        bar.get_height()), ha='center', va='center',
                       size=15, xytext=(0, 8),
                       textcoords='offset points',fontsize = 12,color = 'blue')
    plt.xticks(X_axis,groups)
   plt.ylim(0,max_y_lim)
```

```
plt.xticks(X_axis,groups)
plt.ylim(@,max_y_lim)
plt.legend(loc='upper left')
plt.xlabel('metrics')
plt.savefig('bar_graph.png')
```

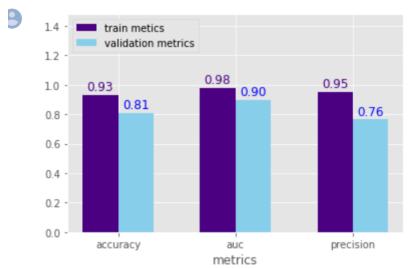


Fig 7. Graph for Training Vs Validation data metrics for InceptionResNetV2

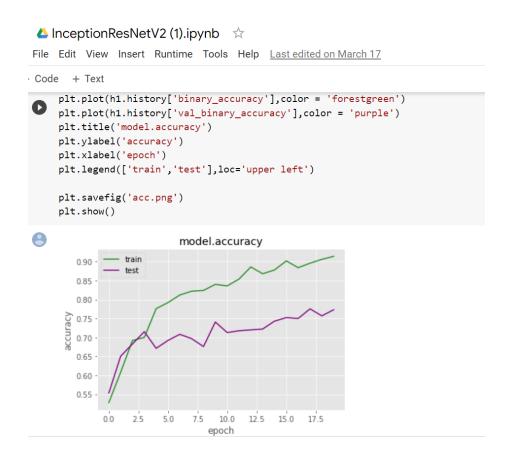


Fig 8. Training accuracy Vs Testing accuracy for InceptionResNetV2

```
plt.plot(h1.history['precision'],color = 'forestgreen')
    plt.plot(h1.history['val_precision'],color = 'purple')
    plt.title('precision')
    plt.ylabel('Precision')
    plt.xlabel('Epoch')
    plt.legend(['train','test'],loc='upper left')
    plt.savefig('prec.png')
    plt.show()
8
                              precision
        0.8
     Precision
        0.7
        0.6
        0.5
                                 10.0
                                       12.5
                                             15.0
            0.0
                  2.5
                       5.0
                             7.5
                               Epoch
```

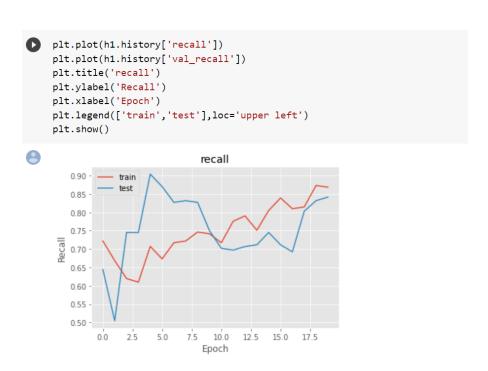


Fig 9. Precision and Recall for InceptionResNetV2

2. AlexNet

AlexNet is a convolutional neural network (CNN) architecture that was developed by Alex Krizhevsky, Ilya Sutskever, and Geoffrey Hinton, and was the winning entry in the ImageNet Large Scale Visual Recognition Challenge (ILSVRC) in 2012.

It consists of eight layers, including five convolutional layers and three fully connected layers. AlexNet was groundbreaking at the time of its release because it demonstrated the effectiveness of deep convolutional neural networks for image classification tasks, significantly outperforming previous methods.

The architecture of AlexNet includes techniques such as rectified linear units (ReLU) activation function, overlapping pooling, dropout regularization, and data augmentation. These techniques have become standard in many modern deep learning architectures.

AlexNet was a major milestone in the development of deep learning and has since paved the way for many subsequent advancements in the field of computer vision.



```
Second Layer
[ ] AlexNet.add(layers.Conv2D(filters=32, kernel_size=(2, 2), strides=(1,1), padding='same'))
     AlexNet.add(layers.BatchNormalization())
     AlexNet.add(layers.LeakyReLU())
     AlexNet.add(layers.MaxPooling2D(pool_size=(2,2), strides=(2,2), padding='same'))
     {\tt AlexNet.add(layers.Dropout(0.2))}
Third Layer
[ ] AlexNet.add(layers.Conv2D(filters=64, kernel_size=(2,2), strides=(1,1), padding='same'))
     AlexNet.add(layers.BatchNormalization())
     AlexNet.add(layers.LeakyReLU())
Fourth Layer
[ ] AlexNet.add(layers.Conv2D(filters=64, kernel_size=(2,2), strides=(1,1), padding='same'))
     AlexNet.add(layers.BatchNormalization())
     AlexNet.add(layers.LeakyReLU())
Fifth layer
[ ] AlexNet.add(layers.Conv2D(filters=64, kernel_size=(1,1), strides=(1,1), padding='same'))
     AlexNet.add(layers.BatchNormalization())
     AlexNet.add(layers.LeakyReLU())
AlexNet.add(layers.Conv2D(filters=2,kernel_size=(1,1)))
[ ] AlexNet.add(layers.GlobalAveragePooling2D())
[ ] AlexNet.add(layers.Dense(units = 4, activation='softmax'))
[ ] AlexNet.summary()
```

Fig 10. Multiple layers in AlexNet

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Code	+ Text		
	conv2d_3 (Conv2D)	(None, 2, 2, 64)	16448
	batch_normalization_3 (BatchNormalization)	(None, 2, 2, 64)	256
	leaky_re_lu_3 (LeakyReLU)	(None, 2, 2, 64)	0
	conv2d_4 (Conv2D)	(None, 2, 2, 64)	4160
	batch_normalization_4 (BatchNormalization)	(None, 2, 2, 64)	256
	leaky_re_lu_4 (LeakyReLU)	(None, 2, 2, 64)	0
	conv2d_5 (Conv2D)	(None, 2, 2, 2)	130
	<pre>global_average_pooling2d (G lobalAveragePooling2D)</pre>	(None, 2)	0
	dense (Dense)	(None, 4)	12

Total params: 34,574 Trainable params: 34,062 Non-trainable params: 512

de +	Text												Connect	*	^
Epoch															
	[=======]	- 7s	183ms/step	- loss:	1.3051	- accuracy:	0.3866 -	auc: 0	.6410 -	precision:	0.2683 -	val_loss	1.3879	- val	_acc
Epoch		_													
	[=======]	- 5s	158ms/step	- loss:	1.2254	- accuracy:	0.5090 -	auc: 0	.7125 -	precision:	0.6056 -	val_loss	1.3823	- val	_acc
Epoch	3/20 [=======]	F-0	156ms/s+sn	10001	1 1204		0 5400		7674		0 7270	val lass	1 2040	1	
Epoch	-	- 55	130ms/sceb	- 1055.	1.1204	accuracy.	0.5430 -	auc. 0	./6/4 -	precision.	0.7270 =	Val_1055	1.3349	- Val	_acc
	[======]	- 60	193ms/sten	- 1000	1 0051	accupacy:	0 5//0 -	auc. 0	7802 -	nnecision:	0 7008 -	val loss	1 /381	- val	300
Epoch	-	- 03	193113/3CEP	- 1033.	1.0951	accuracy.	0.5445	auc. o.	.7802 -	precision.	0.7030 -	va1_1033	1.4301	- vai	_acc
	[======]	- 5s	178ms/sten	- loss:	1.0038	- accuracy:	0.5954 -	auc: 0	.8253 -	nrecision:	0.7293 -	val loss	1.5671	- val	acc
Epoch	-		_, cc, c.cap							p. 202020	017255				
	[=======]	- 6s	176ms/step	- loss:	0.9835	- accuracy:	0.5873 -	auc: 0	.8262 -	precision:	0.6863 -	val loss	1.5755	- val	acc
Epoch	7/20					,						_			_
31/31	[=========]	- 6s	202ms/step	- loss:	0.9473	- accuracy:	0.6150 -	auc: 0	.8433 -	precision:	0.6957 -	val_loss	1.6436	- val	_acc
Epoch	8/20														
31/31	[=======]	- 5s	155ms/step	- loss:	0.9220	- accuracy:	0.6232 -	auc: 0	.8569 -	precision:	0.7365 -	val_loss	1.8468	- val	_acc
Epoch	9/20														
31/31	[=======]	- 5s	155ms/step	- loss:	0.9323	- accuracy:	0.6101 -	auc: 0	.8502 -	precision:	0.6916 -	val_loss	1.6827	- val	_acc
Epoch	10/20														
	[]	- 7s	221ms/step	- loss:	0.8671	- accuracy:	0.6036 -	auc: 0	.8662 -	precision:	0.7190 -	val_loss	1.7812	- val	_acc
	11/20														
	[========]	- 5s	176ms/step	- loss:	0.8492	- accuracy:	0.6117 -	auc: 0	.8727 -	precision:	0.7099 -	val_loss	1.7256	- val	_acc
	12/20	_													
	[=======]	- 5s	175ms/step	- loss:	0.8790	- accuracy:	0.6150 -	auc: 0	.8643 -	precision:	0.7066 -	val_loss	1.6620	- val	_acc
	13/20		153/	1	0.0437		0.6053		0710		0.7544	1	1 5444		
31/31	[]	- 55	152ms/step	- loss:	0.842/	- accuracy:	0.6052 -	auc: 0	.8/18 -	precision:	0./544 -	vai_ioss	1.5444	- vai	_acc
pocn :		F-0	1F2ma/a+an	1	. 0 0427		. 0 6052		0 0710		on. 0 754	1	1 5	111	l .
poch :	[========]	- 55	152ms/scep	- 1055	. 0.042/	- accuracy	. 0.0052	- auc:	0.0/10	- precisi	On: 0./544	+ - var_r	055: 1.5)444 -	. var_a
	[===========]	-	207==/=+==	1	. 0 0543		. 0 6117		0.007		an. 0 710		1 /	1202	v.a.1 .
poch :	-	- 65	20/ms/scep	- 1055	. 0.0542	- accuracy	. 0.611/	- auc:	0.009/	- precisi	On: 0.7196	o - vai_i	055: 1.4	- 202	. var_a
	15/2 0 [==========]	- 50	152ms/ston	- 1000	. a 7902	- accuracy	· a 621E	- 2110.	a 882E	- nrecisi	on. a 761	2 - Val 1	0001 1 1	9238 -	
poch :		- 55	1251112/2ceb	1022	. 0./555	accuracy	. 0.0215	auc:	0.0035	hiecisi	011. 0./61	var_1	U33. 1.2	.050 -	var_a
	[=========]	- 50	155ms/ston	- 1000	. 0 76/0	- accuracy	. 0 6525	- 2110.	0 80/12	- nnecici	on. a 721	2 - val 1	0000 1 1	1730 -	. val a
poch :	-	- 55	T) IIIS / S CEP	1035	. 0./049	- accuracy	. 0.0525	- auc:	0.0542	- bi.ect21	UII. 0./31	. var_i	U33. I.I	./50 -	var_e
	[]	- 6-	183ms/stan	- 1050	. 0 7821	- 20011020	. 0 6124	- 2110.	0 8861	- nnecici	on: 0 724	7 - val 1	0001 1 3	2218	. val a
poch :	= =	- 05	TO3IIIS/Scep	- 1088	. 0./021	- accuracy	. 0.0134	- auc:	0.0001	- bi.ecisi	UII. 0./34	. var_1	USS. 1.3	,510 -	var_s
	[===========]	- 6-	192ms/s+an	- 1055	. 0 78/0	- 20011020	. 0 6305	- 2110.	0 8872	- nnecici	on: 0 724	1 - val 1	055. 1 1	1/01	. val a
T/2T	=	- 05	1921115/Scep	- 1088	. 0./640	- accuracy	. 6.6595	- auc:	0.00/2	- bi.ecisi	UII. 0./244	- var_i	U35. I.I	. 01 -	var_e
nach 1															
poch :		E -	1 F O m c / c +	100-	. 0 7644	0.00110	. 0 6437		0.0024	nnaai-i	an. a 770/		1 2	1720	
	[=========]	- 5s	158ms/step	- loss	: 0.7641	- accuracy	: 0.6427	- auc:	0.8934	- precisi	on: 0.7700	9 - val_l	oss: 1.2	2728 -	· val_a

Fig 11. Training data history (AlexNet)

PERFORMANCE:

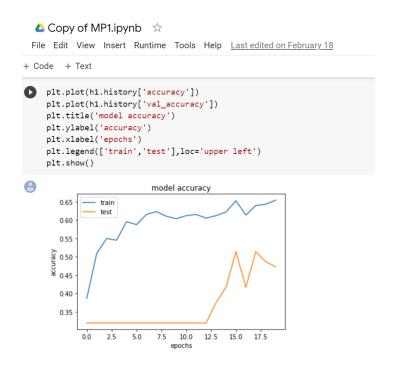


Fig 12. Training accuracy Vs Testing accuracy for AlexNet

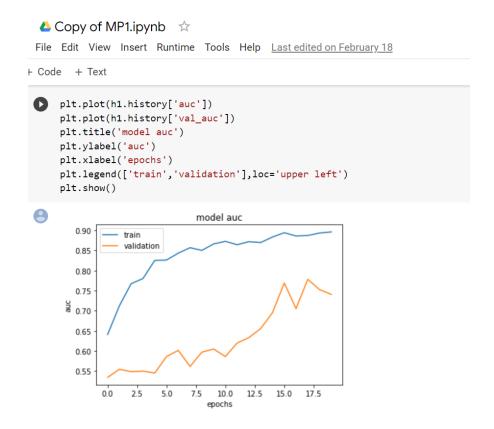


Fig 13. Training accuracy Vs Validation accuracy for AlexNet

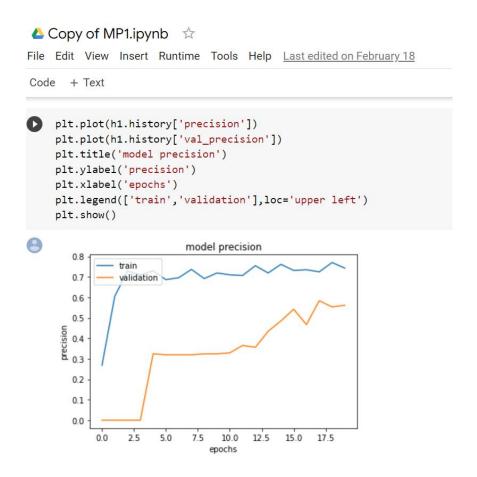


Fig 14. Training Precision Vs Validation Precision for AlexNet

3. CLAHE

CLAHE stands for Contrast Limited Adaptive Histogram Equalization. It is a computer image processing technique used to enhance the contrast of an image, especially when the image has poor contrast or when certain areas of the image are too bright or too dark.

Histogram equalization is a technique that redistributes the pixel values in an image so that the image has a more uniform distribution of intensities. However, it can sometimes produce unrealistic results, such as making the image appear too bright or too dark. CLAHE improves upon histogram equalization by limiting the contrast enhancement to a local region, rather than applying it globally across the entire image. This avoids overenhancement in regions with high contrast, while still improving the contrast in regions with low contrast.

CLAHE works by dividing the image into small, overlapping regions, called tiles. A histogram equalization algorithm is then applied to each tile individually. The histogram equalization algorithm stretches the histogram of each tile to occupy the full intensity

range, while limiting the maximum slope of the histogram, which helps prevent overenhancement. After equalization, the tiles are recombined to form the final image.

CLAHE is commonly used in medical imaging, such as X-rays, CT scans, and MRI, as well as in satellite imaging, astronomy, and other areas where contrast enhancement is necessary.

AFTER APPLYING CLAHE ON THE DATASET IMAGES

```
▲ MP1.ipynb ☆
                                                                                                                       Comment
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    Applying CLAHE

  drive.mount('/content/drive')
  🦲 Drive already mounted at /content/drive; to attempt to forcibly remount, call drive.mount("/content/drive", force_remount=True).
  [ ] TRAIN_DATA = '/content/drive/MyDrive/Minor_Project/dataset_mri/Training'
      VAL = '/content/drive/MyDrive/Minor_Project/dataset_mri/Testing
  [ ] G_TRAIN = TRAIN_DATA+'/glioma_tumor'
      N_TRAIN = TRAIN_DATA+'/no_tumor'
      M_TRAIN = TRAIN_DATA+'/meningioma_tumor'
      P_TRAIN = TRAIN_DATA+'/pituitary_tumor'
  [ ] t_img = glob.glob(G_TRAIN+'/*')
  [ ] clahe_img = []
  [ ] import cv2
      count = 0
      import cv2
 [ ] count = 0
      clahe = cv2.createCLAHE(clipLimit=2.0, tileGridSize=(8,8))
      for i in t_img:
        img = cv2.imread(i,cv2.IMREAD_GRAYSCALE)
        img_clahe = clahe.apply(img)
        cv2.imwrite('/content/drive/MyDrive/Minor_Project/dataset_mri/CLAHE/clahe_g/g'+str(count)+'.jpg',img_clahe)
        count+=1
  [ ] m_img = glob.glob(M_TRAIN+'/*')
      n_img = glob.glob(N_TRAIN+'/*')
      p_img = glob.glob(P_TRAIN+'/*')
  import cv2
      count = 0
      clahe = cv2.createCLAHE(clipLimit=2.0, tileGridSize=(8,8))
       for i in m_img:
        img = cv2.imread(i,cv2.IMREAD_GRAYSCALE)
        img_clahe = clahe.apply(img)
        cv2.imwrite('/content/drive/MyDrive/Minor_Project/dataset_mri/CLAHE/clahe_m/m'+str(count)+'.jpg',img_clahe)
        count+=1
```

```
[ ] import cv2
    count = 0
    clahe = cv2.createCLAHE(clipLimit=2.0, tileGridSize=(8,8))
    for i in n_img:
        img = cv2.imread(i,cv2.IMREAD_GRAYSCALE)
        img_clahe = clahe.apply(img)
        cv2.imwrite('/content/drive/MyDrive/Minor_Project/dataset_mri/CLAHE/clahe_n/n' +str(count)+'.jpg',img_clahe)
    count+=1

[ ] import cv2
    count = 0
    clahe = cv2.createCLAHE(clipLimit=2.0, tileGridSize=(8,8))
    for i in p_img:
        img = cv2.imread(i,cv2.IMREAD_GRAYSCALE)
        img_clahe = clahe.apply(img)
        cv2.imwrite('/content/drive/MyDrive/Minor_Project/dataset_mri/CLAHE/clahe_p/p' +str(count)+'.jpg',img_clahe)
    count+=1
```

Fig 15. Implementation of CLAHE

PERFORMANCE

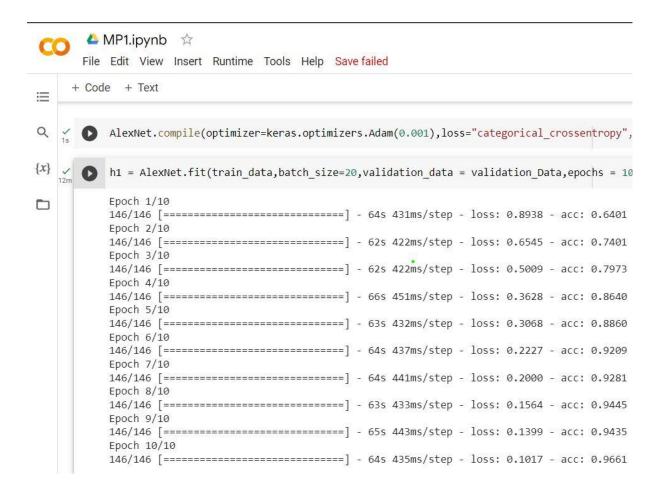
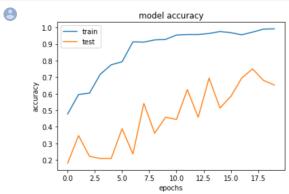


Fig 16. Training data history after Contrast enhancement

```
plt.plot(h1.history['acc'])
plt.plot(h1.history['val_acc'])
plt.title('model accuracy')
plt.ylabel('accuracy')
plt.xlabel('epochs')
plt.legend(['train','test'],loc='upper left')
plt.show()
```



RESULTS/ CONCLUSION OBTAINED

In recent years, deep learning has emerged as a powerful tool for medical image analysis, particularly in the detection of brain tumors. In this study, we employed two state-of-the-art deep learning models, InceptionResNetV2 and EfficientNet, to detect brain tumors in MRI scans. However, the initial results of our study were not satisfactory.. We then implemented an AlexNet-like model, which improved the accuracy to 0.6542.

Despite the improved accuracy, we were still not satisfied with the results and looked for ways to further enhance the performance of our model. We decided to apply the CLAHE algorithm to the MRI dataset to improve the contrast and visibility of the brain images. CLAHE works by dividing the image into small, overlapping regions, called tiles, and applying a histogram equalization algorithm to each tile individually. The tiles are then recombined to form the final image, with enhanced contrast and improved visibility.

After applying the CLAHE algorithm to the MRI dataset, we retrained our AlexNet-like model and observed a significant improvement in the accuracy of our model, achieving an accuracy of 0.9672. This result is a remarkable improvement over the initial accuracy and demonstrates the effectiveness of the CLAHE algorithm in enhancing the performance of deep learning models in medical image analysis.

In conclusion, the results of our study highlight the potential of deep learning models in the detection of brain tumors and the importance of pre-processing techniques like CLAHE in improving the accuracy of these models. This finding has significant implications for the diagnosis and treatment of brain tumors, as early and accurate detection can lead to more effective treatment and improved patient outcomes.

FUTURE SCOPE

It is observed on examination that the proposed approach needs a vast training set for better accurate results; in the field of medical image processing, the gathering of medical data is a tedious job, and, in few cases, the datasets might not be available. In all such cases, the proposed algorithm must be robust enough for accurate recognition of tumor regions from MR Images. The proposed approach can be further improvised through in cooperating weakly trained algorithms that can identify the abnormalities with a minimum training data and also self-learning algorithms would aid in enhancing the accuracy of the algorithm and reduce the computational time.

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WORK DONE BY INDIVIDUALS

Here is the detailed breakdown of Shagun Singh's and Samyak Jain's work for the project on brain tumor detection using deep learning:

Shagun Singh (209303065)

- Extensive research: performed in-depth research on the topic of brain tumor detection using deep learning. This involved reading academic papers, reviewing previous research work, and understanding the various techniques and algorithms used in this field.
- Literature review: Based on the research work, prepared a comprehensive literature review for the project. This review included an overview of the current state-of-the-art methods and techniques for brain tumor detection using deep learning.
- InceptionResNetV2 model implementation: implemented the InceptionResNetV2
 model for the project. This model is a deep convolutional neural network architecture
 that is commonly used for image classification tasks. Fine-tuning the pre-trained
 InceptionResNetV2 model was done by using the dataset of brain tumor images to
 achieve better performance.
- Project report and PPT: created the project report and presentation slides for the project. The report included details about the research work, methodology, implementation, and results obtained from the project.

Samyak Jain (209303064)

- Extensive research: performed extensive research on the topic of brain tumor detection using deep learning. This involved studying academic papers and reviewing previous research work related to the topic.
- AlexNet model implementation: implemented the AlexNet model for the project. This
 model is another deep convolutional neural network architecture that is commonly
 used for image classification tasks. Fine-tuning the pre-trained AlexNet model was
 done by using the dataset of brain tumor images to achieve better performance.
- CLAHE implementation: implemented a noise reduction model called Contrast Limited Adaptive Histogram Equalization (CLAHE) for the project. This model is used to enhance the contrast and details of an image by improving its brightness and contrast. Applied CLAHE to the brain tumor images to improve the quality of the images before feeding them into the neural network models.
- Project report and PPT: Samyak also contributed to the project report and presentation slides by providing details about his research work, methodology, implementation, and results obtained from the project.