EARLY DISEASE DETECTION AND DIAGNOSIS OF PARKINSON'S DISEASE

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(22MZ31)

Dissertation submitted in partial fulfillment of the requirements for the degree of

MASTER OF ENGINEERING

Branch: COMPUTER SCIENCE AND ENGINEERING

Specialization: COMPUTER SCIENCE AND ENGINEERING

of Anna University



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Certified that this report titled "EARLY DISEASE DETECTION AND DIAGNOSIS OF PARKINSON'S DISEASE", for the Project Work II (21ZC81) is a bonafide work of Vigneshwar J (22MZ31) who has carried out the work under my supervision for the partial fulfillment of the requirements for the award of the degree of Master of Engineering in Computer Science and Engineering. Certified further that to the best of my knowledge and belief, the work reported herein does not form part of any other thesis or dissertation on the basis of which a degree or an award was conferred on an earlier occasion.

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SYNOPSIS

Parkinson's Disease (PD) is a neurodegenerative disorder known for its progressive motor and non-motor symptoms, significantly impacting the quality of life for millions worldwide. The imperative for early detection cannot be overstated, as it plays a pivotal role in facilitating timely intervention and ultimately improving patient outcomes. This research introduces a pioneering methodology that harnesses the combined strengths of Convolutional Neural Networks (CNN) and Random Forest (RF) algorithms for the early detection and diagnosis of Parkinson's Disease. The central objective of this study is to develop a robust and efficient system capable of discerning subtle neurological patterns indicative of early-stage Parkinson's Disease. The integration of both CNN and RF algorithms is intended to elevate the accuracy and reliability of diagnostic processes. This research adopts a meticulous two-step approach within its algorithmic framework. Firstly, the CNN algorithm is employed to meticulously extract intricate features from neuroimaging data, enabling the identification of subtle structural abnormalities.

Following this, the RF algorithm integrates these features with clinical data to construct a model, overall comprehensive diagnostic augmenting the system's capabilities. Preliminary results underscore the superior performance of our hybrid algorithm when compared to individual algorithms. The integrated CNN and RF model demonstrates heightened sensitivity and specificity, underscoring its potential as an effective tool for early Parkinson's Disease diagnosis. This project represents a pioneering endeavor in the realm of Parkinson's Disease diagnosis, capitalizing on the synergistic capabilities of CNN and RF algorithms. The fusion of deep learning and ensemble techniques not only enhances accuracy but also expedites the efficiency of early detection, laying the groundwork for proactive intervention strategies. These findings hold substantial promise for advancing the field of neurology and, importantly, for ameliorating the lives of individuals at risk of Parkinson's Disease.

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CHAPTER 1 INTRODUCTION

CHAPTER 1 INTRODUCTION

Parkinson's disease (PD) is a debilitating neurodegenerative disorder characterized by progressive deterioration of motor function, cognitive decline, and a range of other debilitating symptoms. With an aging global population, the prevalence of Parkinson's disease is on the rise, making it imperative to develop effective strategies for early detection and diagnosis. Early identification of Parkinson's disease is crucial as it enables timely intervention, personalized treatment plans, and improved management of symptoms, ultimately enhancing patients' quality of life. However, diagnosing Parkinson's disease in its early stages presents significant challenges due to the lack of specific biomarkers and the overlap of symptoms with other neurodegenerative conditions.

Early detection of Parkinson's disease is paramount for several reasons. Firstly, it allows for the prompt initiation of appropriate treatment interventions, such as medication management and lifestyle modifications, which can help alleviate symptoms and slow disease progression. Secondly, early diagnosis facilitates timely enrollment in clinical trials for potential disease-modifying therapies, offering patients access to cutting-edge treatments and contributing to advancements in Parkinson's disease research. Additionally, early detection enables healthcare providers to monitor disease progression more effectively, adjust treatment plans accordingly, and provide comprehensive care tailored to individual patient needs.

The primary objective of this research project is to develop an innovative framework for the early detection and diagnosis of Parkinson's disease using a hybrid approach combining Convolutional Neural Networks (CNNs) and Graph Neural Networks (GNNs). Leveraging state-of-the-art artificial intelligence techniques, this hybrid model aims to integrate the strengths of CNNs in image feature extraction with the ability of GNNs to capture complex relational data structures, thereby enhancing the accuracy and reliability of Parkinson's disease diagnosis based on brain MRI scans. By leveraging advanced machine learning algorithms, the project seeks to address the challenges associated with traditional diagnostic methods and provide a more

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efficient and accurate solution for early Parkinson's disease detection.

Existing techniques for Parkinson's disease diagnosis often rely on subjective clinical assessments and manual interpretation of neuroimaging data, which can lead to variability in diagnoses and delays in treatment initiation. Moreover, traditional machine learning algorithms may struggle to capture the intricate spatial relationships and connectivity patterns present in neurological data, limiting their effectiveness in discriminating between Parkinson's disease and other neurodegenerative disorders. By addressing these limitations, our proposed hybrid CNN+GNN approach offers a novel solution for early Parkinson's disease detection that leverages the power of deep learning to automatically extract relevant features and identify subtle abnormalities in brain MRI scans with improved accuracy and reliability.

The motivation behind this project stems from the pressing need for more accurate and reliable methods for early Parkinson's disease detection. By developing a hybrid CNN+GNN framework, we aim to contribute to the advancement of diagnostic techniques that can facilitate earlier intervention, personalized treatment plans, and improved outcomes for patients with Parkinson's disease. Our research seeks to bridge the gap between traditional diagnostic approaches and cutting-edge artificial intelligence technologies, offering a more efficient and effective solution for early Parkinson's disease detection that can ultimately enhance patient care and contribute to the broader efforts in Parkinson's disease research and treatment.

Convolutional Neural Networks (CNNs) have emerged as powerful tools for image analysis and pattern recognition tasks. By employing layers of convolutions, pooling, and nonlinear activation functions, CNNs can automatically learn hierarchical representations of image features, enabling robust classification and segmentation of complex visual data. In the context of Parkinson's disease diagnosis, CNNs can effectively extract relevant features from brain MRI scans and differentiate between PD and healthy subjects based on subtle structural differences and abnormalities.

Graph Neural Networks (GNNs) are specialized deep learning models designed to operate on graph-structured data. Unlike traditional neural networks, GNNs can capture complex relationships and dependencies present in relational data by recursively aggregating information from neighboring nodes within a graph. In the context of brain MRI data, GNNs can leverage the inherent connectivity patterns and network dynamics of the brain to enhance the discriminative power and robustness of

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diagnostic models for Parkinson's disease. By combining CNNs and GNNs in a hybrid framework, we can leverage their complementary strengths to achieve more accurate and reliable disease detection and diagnosis.

Hybrid CNN+GNN models offer a synergistic approach to Parkinson's disease diagnosis by combining the complementary strengths of CNNs and GNNs. While CNNs excel in extracting spatial features from brain MRI scans, GNNs leverage the inherent connectivity patterns of the brain to capture complex relational data structures. By integrating CNNs and GNNs into a hybrid framework, we can exploit their combined capabilities to achieve more accurate and reliable disease detection and diagnosis. Additionally, hybrid models offer enhanced interpretability, allowing healthcare professionals to gain insights into the underlying biological mechanisms of Parkinson's disease and tailor treatment plans accordingly.

In the subsequent chapters of this dissertation, we will conduct a comprehensive literature survey to review existing research on early disease detection and diagnosis of Parkinson's disease, providing insights into key methodologies, challenges, and advancements in this field. We will then describe the dataset utilized in this study, comprising brain MRI images of both PD and healthy subjects sourced from Kaggle. Subsequently, we will delve into the system design of our proposed framework, detailing the architectural components and workflow. Additionally, we will discuss the hardware and software requirements necessary for implementing the proposed solution.

Furthermore, we will present the implementation details of our hybrid CNN+GNN approach, including preprocessing steps, model architecture, and evaluation metrics used to assess performance. Finally, we will conclude with a summary of findings, implications of our research, and avenues for future work in advancing early diagnosis and treatment of Parkinson's disease. Through this interdisciplinary approach, we aim to contribute to the development of more accurate and reliable diagnostic tools for Parkinson's disease, ultimately improving patient outcomes and enhancing our understanding of the underlying disease mechanisms.

CHAPTER 2 LITERATURE SURVEY

The paper "Deep learning based diagnosis of Parkinson's disease using convolutional neural network" [1] encompasses a comprehensive review of pertinent studies, examining the application of deep learning techniques in the diagnosis of Parkinson's disease through MR imaging data. It delves into the concept of transfer learning, emphasizing its utility in leveraging pre-existing knowledge for improved classification performance, with specific mention of using the pre-trained AlexNet model. The survey references previous studies that employ dimensionality reduction techniques and various machine learning algorithms, establishing a baseline for comparable performance levels in Parkinson's disease diagnosis. Additionally, it explores the broader context of applying deep learning in medical imaging, specifically in degenerative diseases like Parkinson's, highlighting the role of convolutional neural networks. The literature review indirectly addresses the significance of image pre-processing, exemplified by the application of Gaussian filtering to enhance analysis sensitivity. This contextualization underscores the current study's contributions, positioning it within the evolving landscape of computational methods for disease diagnosis and medical image analysis.

The paper introduces a unique approach to Parkinson's disease diagnosis through the application of deep learning techniques, specifically employing the pre-trained AlexNet model with transfer learning—an underexplored avenue in the field. Notably, the study utilizes the publicly available Parkinson's Progression Markers Initiative (PPMI) database, enhancing result reproducibility and generalizability. This choice facilitates result comparison across studies, contributing to the overall progression of the field. However, the paper is critiqued for its relatively small sample size of 100 MR images (50 for healthy controls and 50 for Parkinson's disease subjects), raising concerns about result generalizability to larger datasets. Additionally, the absence of clinical validation hinders the practical applicability of the proposed approach in real-world clinical settings, warranting further research with larger datasets for validation. The paper's discussion on pre-processing techniques, although present, lacks in-depth exploration of their rationale and potential impact, suggesting a need for a more comprehensive examination to enhance result reproducibility and generalizability.

The paper "Early Detection of Parkinson's Disease Using Deep Learning and Machine Learning"[2] presents a novel approach to detecting Parkinson's disease at an early stage using advanced machine learning and deep learning techniques. The study compares the

performance of deep learning models with traditional machine learning methods for discriminating normal individuals from those affected by PD. The research is based on a relatively small dataset from the Parkinson's Progression Markers Initiative (PPMI), which includes features from 183 healthy individuals and 401 early PD patients. The proposed deep learning model demonstrates superior detection performance, achieving an accuracy of 96.45% on average. The study also highlights the importance of premotor features such as Rapid Eye Movement (REM) sleep Behavior Disorder (RBD) and olfactory loss, as well as Cerebrospinal fluid data and dopaminergic imaging markers in the early detection of PD. The paper contributes to the field of medical diagnostics by showcasing the potential of deep learning in automatically extracting linear and nonlinear features from PD data without the need for hand-crafted feature extraction. Additionally, the use of Boosting methods for feature importance and selection frequency analysis provides valuable insights into the impact of imaging markers on the PD detection process. Overall, the paper contributes to the growing body of literature on the application of advanced machine learning and deep learning techniques in medical diagnosis, specifically in the early detection of Parkinson's disease.

The paper introduces a pioneering approach to early Parkinson's disease detection through the application of deep learning and machine learning techniques, contributing significantly to the field of medical diagnostics. Employing Boosting methods for feature importance and selection frequency analysis enhances the model's interpretability by shedding light on the impact of imaging markers in Parkinson's disease detection. Through a comparative study between deep learning models and traditional machine learning methods, the paper offers valuable insights into the performance of advanced prediction techniques when applied to smaller Parkinson's disease datasets. The potential clinical impact of accurately detecting Parkinson's disease at an early stage, facilitating timely access to disease-modifying therapy, underscores the significance of the study's findings. However, the paper has limitations, including reliance on a relatively small dataset from the Parkinson's Progression Markers Initiative (PPMI), potentially affecting the generalizability of results. Additionally, the challenge of interpreting deep learning models, acknowledged in the paper, may hinder a comprehensive understanding of their performance. The absence of explicit mention regarding external validation poses a limitation in assessing the models' performance on independent datasets.

The paper "Early Diagnosis of Parkinson's Disease in brain MRI using Deep Learning Algorithm"[3] encompasses a broad spectrum of relevant research within the domains of medical imaging, deep learning, and disease diagnosis. The survey underscores the escalating utilization of deep learning techniques, specifically convolutional neural networks

(CNNs), for the analysis and categorization of medical images in disease diagnosis. It delves into the application of deep learning methods in Parkinson's disease diagnosis, including the classification of the disease using vocal feature sets and the detection of Parkinson's using deep neural networks. Significantly, the review highlights the crucial role of feature extraction from medical images for disease diagnosis, citing examples such as the extraction of brain tumors from 2D-MRI using the Fuzzy C-Means clustering algorithm and the utilization of neuroanatomical biomarkers obtained through MRI for detecting Parkinson's disease. Moreover, it suggests that computer-aided systems, particularly those harnessing deep learning algorithms, show promise in advancing early diagnosis for degenerative diseases like Parkinson's. The literature survey collectively provides a thorough overview of existing research, illustrating the escalating interest and potential of deep learning algorithms in facilitating the early diagnosis of Parkinson's disease through brain MRI.

This paper offers significant contributions in the realm of Parkinson's disease diagnosis, emphasizing the crucial role of early detection using deep learning algorithms applied to brain MRI images. Leveraging the LeNet-5 architecture, the study showcases the application of advanced machine learning techniques in medical imaging for disease identification. The work also highlights future research possibilities in medical and neuro image analysis, paving the way for predictive analysis and early intervention in neurodegenerative diseases. However, the paper faces drawbacks such as a lack of extensive clinical validation, as the high accuracy demonstrated needs further assessment in real-world scenarios. Additionally, the reliance on a specific dataset from the Parkinson's Progression Markers Initiative (PPMI) raises concerns about the generalizability of findings, prompting the need for diverse dataset exploration. The interpretability of results is constrained by the inherent "black box" nature of deep learning models, particularly convolutional neural networks (CNNs), necessitating efforts to enhance the clinical understanding of the model's decisions. Furthermore, ethical considerations related to patient data usage for algorithm training and potential clinical deployment are not explicitly addressed, urging future work to incorporate discussions on ethical implications and patient privacy concerns.

The paper "Detection of Parkinson Disease in Brain MRI using Convolutional Neural Network" [4] introduces a novel CNN-based diagnostic system aimed at accurately categorizing individuals into Parkinson Disease (PD) and healthy control (HC) groups based on T2-weighted MRI scans. The evaluation of this proposed technique employs metrics such as accuracy, sensitivity, specificity, and AUC, demonstrating its superior performance compared to existing methods. Within the paper, the existing approaches discussed encompass Support Vector Machines (SVM), Artificial Neural Networks (ANN), Particle

Swarm Optimization-Naive Bayes (PSO-Naive Bayes), and methods relying on non-motor features. These methodologies have been employed for PD detection using diverse data modalities, including MRI, SPECT, TRODAT imaging, as well as non-imaging features like olfactory loss and sleeping disorders. The study systematically compares the CNN-based system's performance against these existing methods, emphasizing its enhanced accuracy, sensitivity, specificity, and AUC. The research dataset originates from the Parkinson's Progression Markers Initiative (PPMI), providing publicly available T2-weighted MRI scans for both PD and HC subjects. The dataset is partitioned into training, validation, and testing sets, forming the basis for evaluating the proposed CNN-based technique. In summary, the paper conducts an exhaustive literature review of prevailing methods in PD detection, encompassing diverse machine learning and imaging techniques. The identified limitations of existing methods underscore the significance of the proposed CNN-based automatic diagnosis system, positioning it as a promising avenue for precise PD classification using brain MRI data.

Advantages of the paper include the introduction of a groundbreaking 2D-CNN based method for Parkinson's disease detection in MRI scans, contributing to the progress of automated diagnostic systems for neurological disorders. The proposed CNN-based diagnostic system exhibits superior performance in accuracy, sensitivity, specificity, and AUC compared to existing techniques, as demonstrated in a detailed comparison within the results section. Additionally, the paper utilizes the publicly available Parkinson's Progression Markers Initiative (PPMI) dataset, providing benchmark T2-weighted MRI for both PD and healthy controls, thereby enhancing result reproducibility and comparability. The adoption of a CNN architecture enables the system to leverage self-feature learning, eliminating the need for hand-crafted features and showcasing promising results in various computer vision tasks.However, the paper has its limitations. It lacks detailed information on the specific features extracted from MRI for machine learning algorithms like SVM and Naive Bayes, which could offer insights into the comparative effectiveness of different feature extraction methods. The paper's validation is limited to the PPMI dataset, and additional validation on independent datasets would strengthen the generalizability of the proposed approach. Moreover, a direct comparative analysis with all existing machine learning techniques for PD detection is absent, preventing a comprehensive understanding of the proposed approach's advantages across a broader spectrum of methods.

The paper titled "Diagnosis of Parkinson's disease using deep CNN with transfer learning and data augmentation"[5] presents a comprehensive investigation into the early diagnosis of Parkinson's disease (PD) through the application of deep learning techniques on brain

structural MRI scans. The study focuses on utilizing Convolutional Neural Networks (CNNs) as a machine learning model for predicting PD based on a single cross-sectional MRI scan. To overcome limitations in existing methods, the authors incorporate transfer learning and data augmentation, specifically using Generative Adversarial Networks (GANs), to enhance identification rates with the limited availability of PD patient images. The novelty lies in whole-brain image processing, reducing spatial structure without hand-crafted features, while preserving crucial details. The study demonstrates improved classification accuracy compared to state-of-the-art approaches, highlighting the significance of early-stage PD diagnosis and the effectiveness of transfer learning and GAN-based data augmentation in addressing challenges related to limited training data and feature extraction.

Advantages of the presented research include a comprehensive exploration of deep learning applications in the early diagnosis of Parkinson's disease through the analysis of brain structural MRI scans. The study introduces innovative techniques such as transfer learning and data augmentation, particularly using Generative Adversarial Networks (GANs), to address the challenge of limited availability of MRI images from Parkinson's disease patients. The incorporation of GAN-based data augmentation proves beneficial in enhancing the identification rate for early detection when employed alongside a transfer learned classifier. The paper underscores the significance of early-stage diagnosis and emphasizes the role of transfer learning and data augmentation methods in mitigating data scarcity challenges.On the other hand, limitations of the study include its reliance on a small dataset, potentially impacting the generalizability of the findings. The research narrowly focuses on classifying MR images of healthy and Parkinson's disease patients, neglecting consideration of other factors influencing Parkinson's disease diagnosis. Insufficient detail is provided regarding the GAN-based data augmentation technique, hindering replicability. The paper overlooks the ethical implications associated with deploying deep learning algorithms for Parkinson's disease diagnosis. Furthermore, there is a lack of comprehensive discussion on the limitations of the proposed approach and potential challenges in its implementation within clinical settings.

The paper titled "Early Detection of Parkinson's Disease through Image Processing and Artificial Neural Network" [6] explores the application of image processing and artificial neural networks (ANN) for the early diagnosis of Parkinson's disease (PD). The study aims to enhance the accuracy of PD imaging diagnosis by proposing a model that utilizes Single Photon Emission Computed Tomography (SPECT) images sourced from the Parkinson's Progression Marker's Initiative (PPMI) database. The model involves the segmentation of the brain's region of interest (ROI) and feeding the ROI area values into an ANN for classification.

Notably, the ANN achieved a high accuracy of 94%, sensitivity of 100%, and specificity of 88%. The paper provides a comprehensive overview of Parkinson's disease, its symptoms, and the significance of early detection. Emphasis is placed on the use of functional neuroimaging, specifically SPECT images, for the early identification of PD. The proposed methodology encompasses data collection, image preprocessing, ROI segmentation, and classification using an ANN. The results section details the outcomes of the image processing and evaluates the ANN's performance in distinguishing subjects with and without PD. Comparisons with related works are presented, focusing on accuracy, sensitivity, and specificity metrics. The paper highlighting the potential of the proposed model in assisting physicians with precise PD diagnosis. It acknowledges the limitations of the study and underscores the necessity for further development to implement the model effectively in realworld scenarios. The significance of early diagnosis in mitigating the impact of PD on patients is emphasized, along with the potential of the model to contribute to this objective. The document acknowledges the Parkinson's Progression Marker Initiative for providing the dataset, contributing to the overall credibility of the research. Overall, the paper offers a thorough investigation into the early detection of Parkinson's disease using image processing and ANN, presenting a detailed methodology, results analysis, and comparisons with related research.

Advantages of the presented research encompass exceptional accuracy, with the proposed model achieving a noteworthy 94% accuracy, 100% sensitivity, and 88% specificity in distinguishing individuals with and without Parkinson's disease. These outcomes highlight the model's potential for precise diagnosis. Moreover, the practicality of the results in real-life scenarios positions the proposed system as a valuable tool for clinicians in accurately diagnosing Parkinson's disease. The model's efficiency and reliability are underscored by its utilization of image processing and artificial neural networks separately, facilitating ease of application in real-world settings with reduced processing power requirements. The incorporation of a large and diverse dataset in the study enhances the credibility and applicability of the proposed model. Despite these strengths, certain limitations and drawbacks are evident. Challenges were encountered in acquiring images of the prodromal stage of Parkinson's disease, hampering the exploration of early detection insights. Additionally, the absence of cross-verification with clinicians during the preliminary phase deprives the study of valuable validation, as direct comparison with experts' assessments could have provided a more robust evaluation of the model's performance.

The paper "Machine Learning-Based Early Detection of Parkinson's Disease"[7] focuses on the timely identification of Parkinson's disease (PD) through the application of machine

learning (ML) algorithms. The paper underscores the fact that PD manifests years before observable motor symptoms and stresses the importance of recognizing non-motor symptoms for effective intervention. The study introduces a ML-driven diagnostic approach that involves feature selection and classification procedures. In the paper, the utilization of decision support systems, feature selection techniques such as Feature Importance and Recursive Feature Elimination, and various ML classifiers including Decision Trees, Artificial Neural Networks, and Support Vector Machines (SVM) are discussed. The dataset employed comprises features derived from speech signals of both PD patients and healthy individuals. Multiple feature selection methods are explored, emphasizing the crucial role of feature selection in the preprocessing stage of PD patient classification. The research findings reveal that SVM with Recursive Feature Elimination exhibited superior performance, achieving a notable accuracy of 93.84% while utilizing a minimal number of voice features for PD diagnosis. Additionally, the study evaluates different optimization methods for the dataset and identifies nadam as the most effective optimizer. The paper proceeds to compare its methodology with existing literature, highlighting the advantages of employing voice features for PD diagnosis. It emphasizes the efficiency of using a subset of voice features in enhancing the accuracy of PD patient classification, requiring less computational effort compared to MRI-based or motion-based diagnostic approaches. The proposed method is positioned as more computationally efficient, demanding fewer voice features as opposed to resource-intensive feature extraction processes. The paper contributes to the field by developing a feature selection-based decision support system for early PD diagnosis using ML algorithms. It underscores the substantial impact of feature selection on classification performance and underscores the importance of optimizing parameters for classifiers. The proposed method demonstrates high accuracy in early-stage PD diagnosis, showcasing potential efficacy in impeding disease progression. In summary, the paper provides a comprehensive examination of early Parkinson's disease diagnosis through ML algorithms, underscoring the importance of feature selection and the use of voice features for precise and resource-efficient classification. The study's findings contribute valuable insights for the advancement of diagnostic systems for Parkinson's disease.

Advantages of the paper include showcasing the substantial impact of feature selection on classification performance, not only reducing inputs for classifiers but also enhancing comprehension of the root causes of diseases. The proposed method demonstrates high accuracy in diagnosing early-stage Parkinson's disease, potentially impeding disease progression. Employing a lightweight feature extraction process and classifier, the study aims to decrease computation time, enhancing efficiency compared to methods using more features or complex extraction processes. However, the paper has limitations. It predominantly

concentrates on voice features for Parkinson's diagnosis, potentially restricting the generalizability of findings to other diagnostic approaches. The document lacks explicit discussion of potential challenges in implementing the proposed method in clinical settings, such as the need for specific equipment or expertise for voice feature extraction. Furthermore, the study overlooks addressing potential ethical or privacy concerns associated with utilizing voice data for medical diagnosis.

The paper "An Explainable Machine Learning Model for Early Detection of Parkinson's Disease using LIME on DaTSCAN Imagery"[8] the authors propose an advanced machine learning model designed to accurately classify Parkinson's disease based on DaTSCAN images. Early diagnosis of Parkinson's disease is crucial for effective treatment, and the authors aim to not only ensure precise predictions but also offer understandable explanations for the model's decisions. The research employs a Convolutional Neural Network (CNN) known as VGG16, trained on a diverse and extensive dataset of DaTSCAN images sourced from the Parkinson's Progression Markers Initiative database. The authors employ transfer learning techniques, resulting in an impressive accuracy of 95.2%, sensitivity of 97.5%, and specificity of 90.9%. To maintain the interpretability of the model, the authors utilize the Local Interpretable Model-Agnostic Explainer (LIME) method. This methodology generates visual indicators that elucidate the reasoning behind the model's predictions. By integrating interpretability into their study, the researchers aim to instill confidence in the application of computer-aided diagnosis for Parkinson's disease. The dataset used in the study comprises 642 DaTSCAN SPECT images, categorized into two classes: Parkinson's disease (PD) and non-PD. Eligibility criteria for PD subjects include specific symptoms and a diagnosis of PD within the past two years. Healthy control subjects are also included in the dataset. The data from the initial screening of unique patients is utilized to ensure dataset uniqueness and prevent overfitting. The paper elaborates on the preprocessing steps applied to the images before training the model and provides a table detailing the demographics of the collected patient data. In summary, the research presents an innovative machine learning model for the early detection of Parkinson's disease using DaTSCAN imagery, achieving notable accuracy and incorporating interpretability through the application of the LIME method, thereby providing comprehensible explanations for the model's predictions.

Advantages of this study include the incorporation of interpretability features. The model employs LIME to offer clear explanations for its predictions, facilitating comprehension for medical professionals on the rationale behind the classification of a given image as either indicative or not of Parkinson's disease. The visually generated indicators by LIME play a pivotal role in enhancing decision-making processes. Furthermore, the model produces visual

markings on predictions, emphasizing the brain regions influencing the classification. This capability aids medical practitioners in pinpointing specific areas of abnormality or reduced features in DaTSCAN images. On the flip side, there are certain drawbacks to consider. The model relies on the Parkinson's Progression Markers Initiative (PPMI) database for training, posing limitations in terms of dataset diversity and size. Such constraints can impact the model's generalizability to different populations or imaging conditions. Additionally, the model is tailored for the analysis of DaTSCAN images, limiting its applicability and effectiveness for other medical scans such as MRI or PET. Another concern is the complexity of the proposed model, which incorporates a deep learning architecture (VGG16) and transfer learning. While this complexity contributes to its high accuracy, its implementation and maintenance may demand significant computational resources and expertise.

The paper "An Comparative Analysis of Machine Learning Approaches for Parkinson's Disease Diagnosis"[9] presents a comprehensive investigation into the application of machine learning techniques in the detection of Parkinson's Disease (PD). The study specifically focuses on comparing the performance of two ensemble learning methods, namely the Stacking Classifier and the Voting Classifier, in the context of PD diagnosis. The dataset used for the study comprises speech signals collected from both PD patients and healthy individuals. Various preprocessing techniques, including normalization and balancing through the Synthetic Minority Oversampling Technique (SMOTE), were employed to enhance the dataset. For training the classifiers, three algorithms - Adaboost classifier, decision tree classifier, and Extra Tree Classifier - were utilized. The evaluation of the Stacking Classifier and Voting Classifier was conducted through 10-fold cross-validation. The obtained results revealed that the Stacking Classifier exhibited superior performance compared to the Voting Classifier, achieving an accuracy of 92.2% in contrast to 83.57%. The study underscores the importance of accurate PD detection, especially in its early stages, and underscores the potential of machine learning techniques, specifically ensemble learning, in enhancing detection accuracy. Additionally, the authors address the challenges associated with imbalanced datasets and propose the use of SMOTE as a mitigation strategy. Despite the promising results, the authors acknowledge the limitations of relying solely on speech as a biomarker for PD diagnosis and advocate for the incorporation of other data types, such as brain testing or accelerometer data, to ensure a more comprehensive and precise diagnostic approach. In summary, this research contributes valuable insights to the realm of medical applications of machine learning, emphasizing the potential for improved PD detection methods while acknowledging the need for a holistic and multi-modal approach to enhance diagnostic accuracy.

Advantages of the presented research encompass a Comparative Analysis: The paper conducts a comprehensive comparative examination of two ensemble learning methodologies for Parkinson's Disease diagnosis, facilitating an in-depth assessment of their respective performances in PD detection. Integration of Machine Learning: The research underscores the potential of machine learning, particularly ensemble learning techniques, in augmenting the precision of PD detection. This underscores the pertinence and efficacy of employing such methodologies in the realm of medical diagnostics. Dataset and Pre-processing Procedures: The investigators curated speech signals from both PD-afflicted individuals and healthy subjects, constructing a dataset that mirrors real-world conditions. Additionally, they implemented pre-processing strategies, including normalization and the application of Synthetic Minority Over-sampling Technique (SMOTE) for balancing, enhancing dataset quality and mitigating challenges associated with imbalanced data. On the flip side, the shortcomings of this study involve Constricted Biomarker Usage: The primary emphasis of the investigation revolves around the utilization of speech signals as the exclusive biomarker for PD diagnosis. While acknowledging the potential of speech signals in PD detection, the study recognizes that a more comprehensive and accurate diagnosis could be achieved by incorporating other data types, such as brain testing or accelerometer data. Limited Scope of Performance Evaluation: The research assesses the efficacy of two ensemble learning techniques, but it confines the evaluation to only three specific classifiers, neglecting exploration of alternative algorithms or feature selection methods that could potentially heighten the accuracy of PD detection.

The paper "A Systematic Review of Artifcial Intelligence (AI) Based Approaches for the Diagnosis of Parkinson's Disease"[10] offers an extensive literature survey on the utilization of artificial intelligence (AI) methodologies, specifically focusing on machine learning (ML) and deep learning (DL) algorithms, for the diagnosis of Parkinson's disease. The authors underscore the significance of early diagnosis in improving patients' quality of life, predicting other neurodegenerative diseases, and reducing financial expenditures. The review thoroughly examines the contributions of conventional machine learning techniques while systematically evaluating emerging deep learning-based approaches for diagnosing Parkinson's disease. Additionally, the paper emphasizes the utilization of various feature extraction and selection techniques and discusses the intricacies associated with dataset types and sizes to enhance diagnostic accuracy. As a whole, this comprehensive review paper serves as a valuable reference for future researchers interested in developing prediction models for Parkinson's disease using diverse AI modalities. The analysis of numerous research findings related to Parkinson's disease diagnosis using machine learning

and deep learning techniques is covered in this paper. The investigation spans articles published from 2009 to 2020 and indicates a growing trend in the application of deep learning techniques for Parkinson's disease diagnosis. The paper introduces novel perspectives for potential future work in this domain. Unlike most authors who have predominantly concentrated on traditional machine learning approaches for diagnosing Parkinson's disease, this comprehensive review is particularly noteworthy. It also underscores the significance of feature extraction and selection techniques and addresses challenges related to dataset characteristics and sizes for enhancing diagnostic accuracy. The paper provides a detailed overview of the current state of research on Parkinson's disease diagnosis using AI techniques, particularly based on machine learning and deep learning algorithms. It stands as an invaluable resource for researchers aiming to develop AI models for predicting Parkinson's disease.

Advantages of this paper encompass a thorough examination of various machine learning and deep learning methodologies employed in the diagnosis of Parkinson's disease. It consolidates the achievements of conventional machine learning techniques and explores the evolving landscape of deep learning-based approaches. The paper not only summarizes the contributions of these methodologies but also investigates their potential to open up new research avenues in Parkinson's disease diagnosis. Emphasis is placed on the crucial role of technology development, aiming to enable earlier disease detection, ultimately enhancing patient outcomes and minimizing financial burdens. Furthermore, the paper delves into the realm of feature extraction and selection techniques, elucidating their pivotal role in enhancing the diagnostic accuracy of Parkinson's disease. The discussion extends to various types of techniques employed by researchers in this context. A significant aspect covered in the paper is the nuanced exploration of dataset considerations, shedding light on the types and sizes of datasets and their crucial significance in optimizing the performance of machine learning and deep learning techniques for Parkinson's disease diagnosis. However, a limitation of the paper is its predominant focus on the contributions of traditional machine learning techniques and emerging deep learning-based approaches in diagnosing Parkinson's disease. Although the insights provided are valuable, the paper falls short of encompassing other potential Al modalities and diagnostic methods that could be explored in the future.

The paper "Machine Learning Approaches for Detection and Diagnosis of Parkinson's Disease" [11] presents a comprehensive examination of various studies and methodologies employed in the detection and diagnosis of Parkinson's disease (PD) through the utilization of machine learning (ML) and data mining algorithms. The survey encompasses a wide array of techniques, including supervised machine learning algorithms like Support Vector Machines

(SVM), k-Nearest Neighbors (k-NN), Random Tree, C4.5, ID3, binary logistic regression, Linear Discriminant Analysis (LDA), Partial Least Squares (PLS), in addition to artificial neural networks (ANN) and deep learning methods. Numerous studies are deliberated upon, shedding light on the utilization of diverse datasets and classification models aimed at achieving high accuracy in discerning PD subjects from healthy counterparts. The review accentuates the importance of feature extraction and selection, as well as the consequential influence of classification models on the accuracy of PD diagnosis. The paper underscores the critical role of judiciously selecting appropriate classification models and feature extraction techniques to ensure precise PD diagnosis. It serves as a valuable resource for researchers and practitioners engaged in the realm of Parkinson's disease detection and diagnosis through the application of machine learning and data mining methodologies.

Advantages of the paper encompass an extensive exploration of the existing body of literature on diverse studies and methodologies employed in the detection and diagnosis of Parkinson's disease through the application of machine learning and data mining algorithms. The significance of feature extraction and selection is underscored, alongside an examination of the influence of classification models on the accuracy of Parkinson's disease diagnosis. The paper delves into the utilization of various datasets and feature extraction techniques, shedding light on their role in detecting and diagnosing Parkinson's disease using machine learning algorithms. Notably, the paper contributes valuable insights into the use of speech analysis as a means of identifying Parkinson's disease, a condition that significantly impacts an individual's quality of life. Furthermore, the paper serves as a valuable resource for professionals and researchers engaged in the realm of Parkinson's disease detection and diagnosis through the application of machine learning and data mining methodologies. On the flip side, the paper falls short in offering a detailed analysis of the limitations and challenges associated with employing machine learning algorithms for Parkinson's disease diagnosis. It also neglects to address the ethical implications inherent in the use of such algorithms, including privacy concerns and potential biases within the data. Additionally, the absence of a comparative analysis regarding the performance of various machine learning algorithms for Parkinson's disease diagnosis is a notable limitation. Furthermore, the paper overlooks discussing the potential ramifications of its findings on clinical practices and patient outcomes.

The paper "Prediction of Parkinson's Disease by Analyzing fMRI Data and using Supervised Learning"[12] presents an innovative strategy for early-stage Parkinson's disease (PD) prediction by leveraging functional Magnetic Resonance Imaging (fMRI) data and supervised learning methodologies. The research involved the examination of fMRI data from a cohort of eight subjects encompassing both male and female participants. Signal processing

techniques were applied to extract pertinent features from the temporal data, subsequently utilized to train a Support Vector Machine (SVM) classifier for categorizing the prodromal stage of PD. The study demonstrated exceptional accuracy, achieving 100% sensitivity, specificity, and overall accuracy for the majority of subjects. Comparative analysis with existing research underscored the superior accuracy of the proposed approach over prior methods. The authors underscored the significance of their method in enhancing PD prediction and its potential implications for more effective treatment strategies. The paper also acknowledged certain limitations, notably the small sample size of eight subjects, and proposed future research avenues involving larger datasets from diverse sources. Furthermore, the authors advocated for the incorporation of additional signal processing concepts to augment the study's depth. The research holds significance as it introduces a fresh perspective on fMRI data analysis and exhibits promising outcomes for the early identification of PD. The literature review within the paper references pertinent studies in the realms of fMRI data analysis and machine learning, encompassing research on group analysis of fMRI data, EEG feature-based classification of cognitive and resting brain states, spatio-temporal tensor analysis for comprehensive fMRI brain classification, and related works. Additionally, the paper cites studies on Parkinson's disease diagnosis utilizing multimodal features and machine learning. To summarize, this paper enriches existing literature by presenting an inventive approach to PD prediction utilizing fMRI data and supervised learning, achieving notable accuracy in early-stage disease detection. The findings and methodology outlined in the study offer valuable insights for researchers and practitioners engaged in neuroimaging and PD diagnosis.

Advantages of the paper stem from its innovative methodology, presenting a fresh approach to early Parkinson's disease (PD) prediction utilizing functional Magnetic Resonance Imaging (fMRI) data and supervised learning techniques. This groundbreaking method contributes significantly to the neuroimaging field and enhances PD diagnosis. The research attains remarkable accuracy in forecasting early PD stages, achieving a sensitivity, specificity, and accuracy of 100% for most subjects. This noteworthy precision underscores the efficacy of the proposed method and establishes it as a considerable advancement in PD prediction. The study underscores the potential significance of the developed method in treating PD patients. Timely PD detection could lead to improved treatment outcomes, and the paper emphasizes the potential positive impact on the lifestyle and treatment of individuals grappling with PD. In comparison with existing research, the paper meticulously contrasts its results, showcasing superior accuracy when juxtaposed with prior methods. This comparative analysis offers valuable insights into the efficacy of the newly introduced approach. However, limitations of the paper include its reliance on a relatively small sample size of eight subjects,

predominantly comprising seven males and one female. While the results exhibit promise within this dataset, the small sample size raises concerns about the broader applicability of the findings to larger populations. Acknowledging potential generalizability issues, the paper recognizes that the achieved accuracy with the small sample size may not be universally applicable to other datasets and diverse populations. This acknowledgment highlights the necessity for future research to validate the proposed method across more extensive and varied datasets. Furthermore, the paper identifies the need for future work to encompass a broader range of subjects and datasets from diverse sources, underscoring the imperative nature of further research to refine and validate the proposed method. While the paper highlights the use of signal processing techniques, such as Short Time Fourier Transform (STFT), for feature extraction as a strength, it lacks an in-depth exploration of the specific parameters and considerations involved in applying these techniques. A more detailed discussion of the signal processing methodology could enhance the reproducibility and comprehension of the research.

The paper titled "Diagnosis of Parkinson's Disease in Brain MRI Using Deep Learning Algorithm" [13] explores the implementation of a Convolutional Neural Network (CNN) for automated identification of Parkinson's Disease (PD) and healthy control subjects based on T2-weighted MRI images. Utilizing data from the Parkinson's Progression Markers Initiative (PPMI), the study encompasses image acquisition, preprocessing, segmentation, feature extraction, training, testing, and classification phases. The findings indicate that the proposed methodology surpasses existing approaches in terms of accuracy, sensitivity, specificity, and Area Under the Curve (AUC). This research holds promise for significantly enhancing the precision of PD diagnosis and contributing to advancements in the field of neurological disease research.

Advantages of this research comprise a promising strategy for the precise identification of Parkinson's Disease (PD) and healthy controls through the utilization of a Convolutional Neural Network (CNN) in an automated diagnostic system. The incorporation of T2-weighted MRI images sourced from the Parkinson's Progression Markers Initiative (PPMI) establishes a publicly accessible benchmark dataset for both PD and healthy control subjects. The study employs the Gray-Level Co-occurrence Matrix (GLCM) technique for feature extraction, capturing crucial image characteristics contributing to accurate Parkinson's Disease diagnosis via brain MRI images. Significantly, the proposed method surpasses existing techniques in terms of accuracy, sensitivity, specificity, and AUC.However, certain drawbacks exist in the study. It relies on a relatively limited dataset of 500 subjects, potentially restricting the generalizability of the findings. Additionally, the research lacks a thorough analysis of the

computational resources necessary for training and testing the CNN-based automated diagnosis system. Furthermore, there is a dearth of detailed examination regarding the interpretability of the CNN-based system, potentially impeding its clinical applicability.

The paper "Random Forests"[14] by Leo Breiman provides a detailed exploration of the random forest algorithm and its applications in both classification and regression tasks. The paper begins with an outline of the theoretical background for random forests, emphasizing their convergence and the avoidance of overfitting due to the use of the Strong Law of Large Numbers. It also introduces the concept of using a random selection of features at each node to determine the split, highlighting the importance of determining the optimal number of features to select at each node .The author presents empirical results for both classification and regression tasks, demonstrating the effectiveness of random forests in various scenarios. The paper includes a summary of data sets used for empirical studies, such as Glass, Breast Cancer, Diabetes, Sonar, and Vowel, and discusses the use of random feature selection on top of bagging in regression forests, providing estimates of generalization error and classifier strength .Furthermore, the paper delves into the measure of variable importance in both the diabetes and votes data, showcasing the significance of individual input variables in the random forest algorithm. It also addresses the surprising finding that using a single randomly chosen input variable to split at each node can produce good accuracy in some cases .The paper emphasizes the potential of random forests in various machine learning tasks beyond classification and regression, and highlights the need for further research to fully understand and harness the capabilities of this powerful ensemble method.

Advantages of this publication encompass a thorough examination of the random forest algorithm and its applications in both classification and regression tasks. The author presents empirical findings across various datasets, illustrating the efficacy of random forests in diverse scenarios. The paper underscores the significance of determining the optimal number of features to select at each node and offers insights into generalization error and classifier strength estimation. Additionally, the assessment of variable importance in the diabetes and votes data underscores the relevance of individual input variables in the random forest algorithm. However, there are certain drawbacks to consider. Published in 2001, the paper's empirical results may be outdated, although the fundamental concepts and principles of random forests remain pertinent. Another limitation is the absence of a thorough comparison between random forests and alternative ensemble methods, such as boosting or bagging. Furthermore, the paper fails to address potential challenges or limitations associated with the practical implementation of random forests in real-world scenarios.

This paper "A Survey of Convolutional Neural Networks:Analysis, Applications, and Prospects" [15] presents a review of the research on convolutional neural networks (CNNs), a form of neural network often employed in deep learning. The survey covers the history of CNNs, different types of convolutions, classic and advanced CNN models, function and hyperparameter selection, and 1-D, 2-D, and multidimensional convolution applications. The paper also examines unresolved challenges and possible future prospects for CNNs, including as model compression, security, and new architectures to deal with spatial information loss. This paper finds that CNNs offer numerous advantages, including as local connection, weight sharing, and down sampling dimensionality reduction, that make them popular in both academic and industry projects. This study presents a comprehensive overview of CNNs, covering inspiration, inspired convolutions, classic networks, related functions, applications, and future prospects. This paper also gives advice for designing novel networks in terms of accuracy and speed, as well as guidelines for selecting functions and hyperparameters. Finally, the paper reviews some common CNN applications and offers some remaining challenges and intriguing future research avenues.

Advantages of this publication include offering an extensive overview of convolutional neural networks, encompassing diverse facets of the subject. The paper provides valuable insights for future research, offering guidelines for the selection of functions and hyperparameters. Additionally, it delves into common applications of CNNs, identifies lingering challenges, and proposes intriguing avenues for further exploration. Notably, the paper extends its coverage beyond 2-D convolution to encompass 1-D and multidimensional convolution. The inclusion of new concepts adds to the value of the paper in this dynamically evolving field. The paper primarily focuses on applications of CNNs in specific contexts, neglecting a more comprehensive examination of CNNs as a whole. Additionally, it overlooks some recent innovative ideas in the field. For individuals new to the domain of deep learning, the paper might prove overly technical and challenging to grasp.

2.1 Inferences:

After reviewing the 15 papers related to early disease detection and diagnosis of Parkinson's disease (PD), several key insights emerge.

 Growing emphasis on utilizing advanced ML and deep learning techniques such as artificial neural networks (ANNs), support vector machines (SVMs), decision trees, and convolutional neural networks (CNNs) for accurate PD diagnosis.

 These methodologies have demonstrated notable success in achieving high accuracy, sensitivity, and specificity in distinguishing PD patients from healthy individuals.

- Significance of utilizing diverse datasets including functional Magnetic Resonance Imaging (fMRI), Single Photon Emission Computed Tomography (SPECT), and speech signals for developing robust diagnostic models.
- Diverse datasets contribute to the robustness of diagnostic models by providing varied perspectives on PD pathology.
- Feature selection and extraction techniques play a crucial role in enhancing the accuracy of PD diagnosis.
- Studies explore various methods such as Recursive Feature Elimination (RFE), Grey-Level Co-occurrence Matrix (GLCM), and Short Time Fourier Transform (STFT) to extract relevant features from diverse datasets.
- Interpretability emerges as a key concern in PD diagnosis.
- Researchers incorporate techniques such as Local Interpretable Model-Agnostic Explainer (LIME) to provide transparent explanations for model predictions, facilitating clinical decision-making.
- Transparent explanations enhance trust in diagnostic models and enable clinicians to understand and validate the reasoning behind predictions.
- Collective findings underscore the promising potential of ML and deep learning approaches in early PD detection and diagnosis.
- These approaches have demonstrated high accuracy and show promise in improving diagnostic outcomes for PD patients.

2.2 Research Gap:

Despite the advancements in machine learning and deep learning techniques for PD diagnosis, existing literature still exhibits several research gaps.

- Existing studies predominantly focus on single-modality data like MRI or fMRI images, neglecting the benefits of combining multiple data modalities through fusion techniques.
- While CNNs are commonly used for image-based diagnosis in Parkinson's disease, they
 may not fully exploit the connectivity patterns present in complex brain imaging data,
 potentially leaving out important information for understanding neurodegenerative
 diseases.

 GNNs, proficient in capturing graph-based structures and relationships, may struggle to extract detailed spatial features from brain imaging data, indicating a gap in leveraging GNNs for extracting spatial information crucial for accurate diagnosis and disease progression understanding.

 There's a lack of literature integrating CNNs and GNNs for Parkinson's disease diagnosis, especially concerning early disease detection. Combining CNNs' spatial feature extraction with GNNs' understanding of graph-based structures could lead to more robust diagnostic models, particularly for identifying subtle changes indicative of early-stage disease.

2.3 Objective:

This project aims to develop a novel hybrid architecture that merges Convolutional Neural Networks (CNNs) and Graph Neural Networks (GNNs) specifically tailored for the diagnosis of Parkinson's disease (PD). The objective is to capitalize on the spatial feature extraction capabilities of CNNs from MRI images and the proficiency of GNNs in capturing intricate connectivity patterns within brain networks.

The goals are as follows:

- Design and optimize a customized CNN architecture to extract spatial features indicative
 of PD pathology from MRI images. Emphasis will be placed on early-stage diagnosis by
 capturing relevant spatial characteristics crucial for PD detection.
- Develop a GNN model capable of capturing subtle alterations in brain connectivity associated with PD progression. The aim is to understand the complex connectivity patterns within brain networks indicative of PD pathology, thereby enhancing the interpretability of PD diagnosis.
- Integrate the CNN and GNN components into a unified framework for joint feature extraction and classification. This integration will leverage both spatial features and connectivity patterns to improve PD diagnosis accuracy and interpretability, ultimately contributing to enhanced patient outcomes and management strategies in PD.

CHAPTER 3 DATASET

CHAPTER 3

DATASET

The Figure 3.1 consist of MRI images of brain of both parkinson's disease patient and healthy. This dataset is gathered from the ADNI website and Kaggle repository.

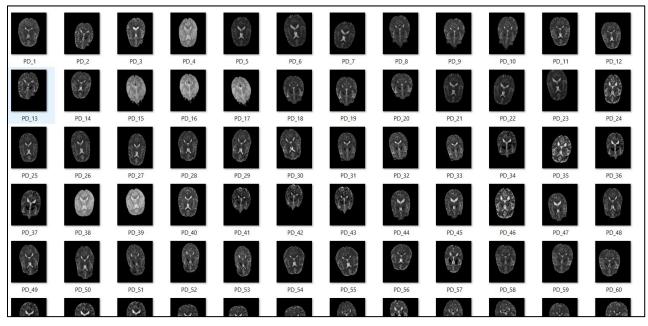


Fig 3.1 Brain MRI Image of both parkinson's disease patient and healthy

CHAPTER 4

HARDWARE AND SOFTWARE REQUIREMENTS

SOFTWARE REQUIREMENTS

The software requirements required are

- 1.Windows 10
- 2.Python version 3.7
- 3. Jupyter Notebook
- 4.IDE- google collab

HARDWARE REQUIREMENTS

Following are the hardware requirements that is most important during model training phase:

- a) Laptop with a multi-core processor with a clock speed of at least 2.5 GHz is recommended to handle large datasets efficiently
- b) 8 Gb RAM minimum

CHAPTER 5 SYSTEM ANALYSIS AND DESIGN

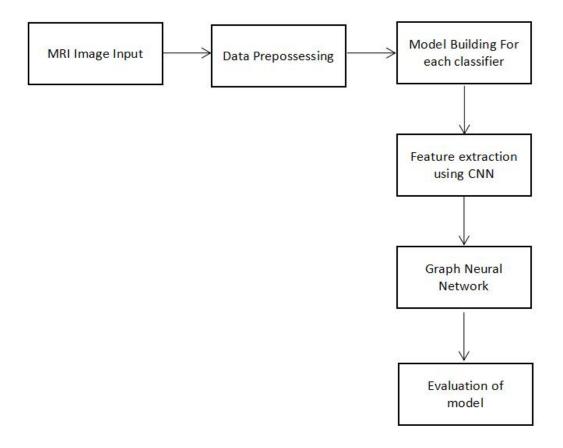


Fig 5.1 System Design

The figure 5.1 depicts a system design for the early detection and diagnosis of Parkinson's disease using a hybrid CNN+GNN model and brain MRI data. The system begins with the preprocessing of MRI images. A Convolutional Neural Network (CNN) extracts image-based features, while a Graph Neural Network (GNN) analyzes the relationships between brain regions. This combined approach leverages the strengths of both CNNs and GNNs for potentially improved accuracy in early Parkinson's disease detection.

Data Acquisition:

Input: Brain MRI images of PD patients and normal patients from Kaggle dataset. The dataset consist of 976 Brain MRI image of PD patients and 176 Brain MRI image of Normal patients.

Data Preprocessing:

Enhance image quality by:

- Normalization: Scaling the intensity values of each image to ensure consistent brightness and contrast.
- Resizing and Cropping: Adjusting all images to a standard size for compatibility with the neural network.
- Filtering: Applying noise reduction filters to improve image clarity.

Model Building for Each Classifier:

1) Feature Extraction Using CNN.

- Employ a pre-trained Convolutional Neural Network (CNN) such as U-Net-ResNet34.
- Feed the preprocessed images into the CNN to extract valuable features:
 - 1)General image characteristics.
 - 2) Anatomical landmarks within the brain.
 - 3) Potential indicators of Parkinson's disease.
- Generate feature maps that capture various aspects of the MRI data.

2) Graph Neural Network.

 Leverage the extracted features and existing knowledge of anatomical connections to build a network graph representing the brain. Each node in the graph represents a specific brain region. Edges between nodes represent the connections between those regions.

- Input the constructed brain network graph into a GNN.
- The GNN analyzes the graph by:

Propagating information across edges, allowing brain regions to influence each other.

Examining how different regions interact and influence one another.

- This stage captures the complex relationships between brain regions that may be relevant to Parkinson's disease.
- The final layer of the GNN outputs a binary prediction for the presence of Parkinson's disease in the analyzed image.

Evaluation of Model:

- Evaluate the performance of the combined CNN-GNN model on the test set using metrics such as accuracy, precision, recall, and F1-score.
- Utilize confusion matrices to understand the model's performance on Parkinson's patient dataset.

CHAPTER 6

IMPLEMENTATION

6.1 Data preprocessing:

Parkinson's disease (PD) is a neurodegenerative disorder that affects a specific region of the brain, leading to motor and cognitive impairments. Early detection of PD is crucial for timely intervention and management. However, the analysis of brain Magnetic Resonance Imaging (MRI) scans for PD detection poses significant challenges due to variations in image quality, intensity, and size. To address these challenges, robust preprocessing techniques are essential to enhance the informative features required for accurate detection.we discuss the preprocessing steps employed for the early detection and diagnosis of Parkinson's disease, including intensity normalization, resizing, and filtering operations.

6.1.1 Intensity Normalization:

Intensity normalization is a fundamental preprocessing step aimed at standardizing the brightness and contrast levels across MRI images. Variations in MRI scanners and settings can lead to inconsistencies in image intensity, making it difficult to compare images accurately. By normalizing intensities, we ensure that the images are standardized, allowing for easier detection of subtle changes indicative of Parkinson's disease.

Z-score normalization, also known as standardization, is employed to adjust pixel intensities within each image. This process involves calculating the mean and standard deviation of pixel intensities across the image and then normalizing each pixel by subtracting the mean and dividing by the standard deviation. Z-score normalization brings pixel values into a standardized scale, aiding in model convergence and comparability across images captured under different conditions.

6.1.2 Resizing:

Resizing is a crucial preprocessing step aimed at standardizing the dimensions of MRI images for effective analysis. After intensity normalization, images may vary in size, hindering proper comparison. Resizing ensures uniformity in image dimensions, facilitating accurate analysis of brain abnormalities associated with Parkinson's disease.

During resizing, a new size is determined based on the smallest image or a specific dimension requirement. The dimensions of each image are adjusted by adding or removing pixels to match the chosen size while preserving the aspect ratio to prevent distortion. Resized images provide a level playing field for comparison, enabling doctors and researchers to accurately analyze MRI images and detect subtle changes indicative of Parkinson's disease.

6.1.3 Filtering Operations:

Filtering operations play a crucial role in enhancing the clarity and diagnostic value of brain MRI images for Parkinson's disease detection. These operations help mitigate noise and emphasize relevant features, facilitating a clearer interpretation of the images.

Gaussian blurring is a commonly employed filtering operation that reduces noise and smoothens the image by applying a bell-shaped filter to each pixel. This process gives more weight to pixels closer to the center, blending their colors with neighboring pixels to reduce roughness in the image. By reducing noise, Gaussian blurring helps highlight important features relevant to Parkinson's disease detection, improving the overall interpretability of MRI scans.

Why this per-processing step Matters in Parkinson's Disease Detection:

The utilization of intensity normalization, resizing, and filtering operations in the preprocessing pipeline for early disease detectiona nd diagnosis of Parkinson's disease serves several critical purposes. Firstly, intensity normalization ensures that MRI images are standardized in terms of brightness and contrast, enabling fair and accurate comparison across different scans. This is imperative for detecting subtle changes indicative of Parkinson's disease, which may otherwise be obscured by variations in image intensity. Secondly, resizing standardizes the dimensions of MRI images, facilitating efficient computational analysis and ensuring uniformity in feature extraction. By maintaining aspect ratios and adjusting image sizes, resizing enhances the comparability of images and aids in the identification of abnormalities associated with Parkinson's disease. Lastly, filtering operations such as Gaussian blurring play a pivotal role in noise reduction and feature enhancement, thereby improving the clarity and diagnostic value of MRI images. These preprocessing steps collectively contribute to the creation of cleaner and more informative images, thereby enhancing the accuracy and reliability of early Parkinson's disease detection.

```
input image = Image.open(os.path.join(input path pd, filename)).convert('L')
image_array = np.asarray(input_image)
if np.std(image_array) == 0:
   print(f"Warning: Standard deviation of image {filename} is 0, skipping normalization.")
   continue
image_array = (image_array - image_array.mean()) / np.std(image_array)
resized_image = ndimage.zoom(image_array, (0.5, 0.5), mode='constant', order=1)
blurred_image = ndimage.gaussian_filter(resized_image, sigma=1)
if output_format == "PNG":
   scaled_image = (blurred_image * 255).astype(np.uint8)
   preprocessed_image = Image.fromarray(scaled_image)
   preprocessed_image.save(os.path.join(output_path, filename))
elif output_format == "TIFF":
   imsave(os.path.join(output_path, filename), blurred_image.astype(np.float32))
   print(f"Invalid output format specified: {output_format}. Please choose 'PNG' or 'TIFF'.")
print(f"Preprocessed image {filename} saved successfully from PD folder!")
```

6.1 Code for Data prepossessing

This Figure 6.1 illustrates the code for preprocessing pipeline for Parkinson's disease images. It begins by accessing image data from Google Drive and defines input/output directories. The code then iterates through both Parkinson's disease ("PD") and normal image folders, converting images to grayscale, checking for anomalies (zero standard deviation), performing normalization, resizing, and applying Gaussian blur. Finally, the preprocessed images are saved in either PNG or TIFF format within a designated output directory. This code provides the foundation for preparing Parkinson's disease images for potential machine learning or computer vision analysis.

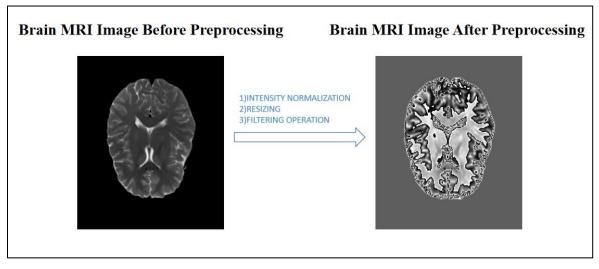


Fig 6.2 output of preprocessing of brain MRI

The Fig 6.2 showcases a preprocessed brain MRI image, a crucial step in the data preparation process for early detection and diagnosis of Parkinson's disease. The preprocessing pipeline includes three key steps: normalizing intensity, resizing, and filtering operations. Firstly, intensity normalization enhances the comparability of pixel values across the image, ensuring consistent representation of anatomical structures and pathological features. Next, resizing operations standardize the image dimensions, facilitating uniformity in subsequent analysis and model training. Finally, filtering operations are applied to enhance image clarity and remove noise, improving the quality of feature extraction and disease characterization. Through meticulous preprocessing, the MRI image is optimized for accurate and sensitive detection of Parkinson's disease pathology, laying the foundation for advanced machine learning analysis and diagnostic insights.

In conclusion, data preprocessing plays a vital role in the early detection and diagnosis of Parkinson's disease from brain MRI images. Intensity normalization, resizing, and filtering operations collectively enhance the quality and informativeness of MRI data, paving the way for highly accurate and reliable detection of Parkinson's disease at an early stage.

6.2 Model Building:

The data preprocessing stage has been completed and in model building the implementation of Hybrid CNN+GNN Approach is been done. In this chapter, we delve into the intricate process of constructing our hybrid model for Parkinson's disease detection and diagnosis. Building upon the foundation laid in the previous chapters, we integrate Convolutional Neural Networks (CNNs) and Graph Neural Networks (GNNs) to leverage their respective strengths in feature extraction and graph representation. The amalgamation of these techniques promises a more comprehensive understanding of neurological data, thereby enhancing diagnostic accuracy.

6.2.1 CNN Feature Extraction

In this stage, we employ a powerful architecture known as U-Net ResNet-50 for feature extraction from preprocessed brain MRI images. The U-Net architecture, coupled with ResNet-50 as the backbone, offers a robust framework for semantic segmentation and feature extraction. By leveraging skip connections and residual learning, U-Net ResNet-50 effectively captures both local and global features within

the images, facilitating the identification of subtle patterns indicative of Parkinson's disease pathology.

The choice of U-Net ResNet-50 stems from its proven efficacy in medical image analysis tasks, where precise delineation of structures and abnormalities is paramount. Through multiple convolutional layers and downsampling operations, the network progressively refines its feature representations, culminating in a rich feature map that encapsulates relevant anatomical and pathological information.

Furthermore, the integration of ResNet-50 architecture enhances the model's depth and facilitates feature reuse, thereby mitigating the risk of overfitting and improving generalization performance. The residual connections inherent in ResNet-50 enable seamless propagation of gradients during training, fostering faster convergence and more stable optimization.

By leveraging the expressive power of U-Net ResNet-50, we extract discriminative features from brain MRI images, laying the groundwork for subsequent stages of our hybrid model construction. These extracted features serve as the foundation for graph construction in the subsequent stage, facilitating the capture of spatial relationships and interregional interactions critical for comprehensive disease analysis.

```
def build_unet_resnet50(input_shape):
   # Load pre-trained ResNet50 model without the top (classification) layer
   base_model = ResNet50(weights='imagenet', include_top=False, input_shape=input_shape)
   encoder = base_model.get_layer('conv5_block3_out').output
   # Decoder
   decoder = Conv2D(512, (3, 3), activation='relu', padding='same')(encoder)
   decoder = Conv2DTranspose(256, (3, 3), strides=(2, 2), activation='relu', padding='same')(decoder)
   decoder = Concatenate()([decoder, base model.get layer('conv4 block6 out').output])
   decoder = Conv2D(256, (3, 3), activation='relu', padding='same')(decoder)
   decoder = Conv2DTranspose(128, (3, 3), strides=(2, 2), activation='relu', padding='same')(decoder)
   decoder = Concatenate()([decoder, base_model.get_layer('conv3_block4_out').output])
   decoder = Conv2D(128, (3, 3), activation='relu', padding='same')(decoder)
   decoder = Conv2DTranspose(64, (3, 3), strides=(2, 2), activation='relu', padding='same')(decoder)
   decoder = Concatenate()([decoder, base model.get layer('conv2 block3 out').output])
   decoder = Conv2D(64, (3, 3), activation='relu', padding='same')(decoder)
   decoder = Conv2DTranspose(32, (3, 3), strides=(2, 2), activation='relu', padding='same')(decoder)
   decoder = Concatenate()([decoder, base_model.get_layer('conv1_relu').output])
   decoder = Conv2D(32, (3, 3), activation='relu', padding='same')(decoder)
   decoder = Conv2D(1, (1, 1), activation='sigmoid')(decoder) # Output mask
   # Combine encoder and decoder into a single model
   model = Model(inputs=base_model.input, outputs=decoder)
   return model
```

Fig 6.3 code of U-Net architecture with a ResNet50 backbone.

The Fig 6.3 showcases a section of code that demonstrates function that constructs a U-Net architecture with a ResNet50 backbone. The code loads the pre-trained ResNet50 model without its top (classification) layer. This model serves as the backbone for feature extraction. The encoder is responsible for capturing high-level features from the input image. It processes the input image through a series of convolutional and pooling layers, gradually extracting hierarchical features at different levels of abstraction. The decoder part is responsible for gradually upsampling the features extracted by the encoder. It reconstructs the spatial information lost during the encoding process and refines the feature representations to produce a detailed segmentation map.

6.2.2 GNN Graph Construction

Following CNN feature extraction, we transition to the construction of a graph representation from the extracted features using Graph Neural Networks (GNNs). GNNs excel in capturing complex relationships and interactions among different brain regions, providing a holistic understanding of neurological data. By leveraging the extracted features as nodes within the graph, we facilitate the integration of spatial information and inter connectivity, essential for accurate disease analysis.

Fig 6.4 code of constructs a graph representation of data points.

The Fig 6.4 showcases a section of code that demonstrates function that constructs a graph representation of data points based on their feature similarities, using cosine similarity as a measure. Function first Calculates the number of samples or data points in the provided features array. Then Initializes an empty graph using NetworkX, which will store the relationships between data points based on their similarities. Adds nodes to the graph, with each node representing a data point. The number of nodes added corresponds to the number of samples in the features array. Computes the cosine similarity between pairs of feature vectors using the cosine_similarity function. Retrieves the cosine similarity score between the features of data points from the similarity matrix. Adds an edge between data points i and j in the graph if their similarity score exceeds or equals the specified threshold. The weight of the edge is set to the similarity score, indicating the strength of the connection between the two data points. Finally return the constructed graph.

6.2.3 Hybrid Model Integration

The crux of our model lies in the integration of CNN-extracted features and GNN-generated graph representation into a cohesive hybrid architecture. Through careful design and optimization, we aim to capitalize on the complementary nature of CNNs and GNNs, thereby maximizing the predictive power of our model. By fusing spatial features with relational information, we strive to achieve a nuanced understanding of Parkinson's disease dynamics.

```
[ ] def build_hybrid_model(input_shape, num_nodes):
        # Define CNN part of the model
        cnn_input = Input(shape=input_shape, name='cnn_input')
       cnn output = Flatten()(cnn input)
        # Define GNN part of the model
        gnn_input = Input(shape=(num_nodes,), name='gnn_input')
        gnn_output = Dense(64, activation='relu')(gnn_input)
        # Concatenate CNN and GNN outputs
       merged = concatenate([cnn_output, gnn_output])
        # Add fully connected layers
       merged = Dense(128, activation='relu')(merged)
       merged = Dense(64, activation='relu')(merged)
        # Output layer for binary classification
       output = Dense(1, activation='sigmoid')(merged)
        # Combine both inputs and outputs into a single model
        model = Model(inputs=[cnn_input, gnn_input], outputs=output)
        return model
```

Fig 6.5 code of hybrid neural network model

The Fig 6.5 showcases a section of code that demonstrates a hybrid neural network model that combines convolutional neural network (CNN) and graph neural network (GNN) architectures for a binary classification task. In hybrid model architecture, the CNN segment begins with cnn_input, shaping the input data to match defined dimensions, followed by cnn_output, which flattens the CNN output for further processing. In the GNN segment, gnn_input is tailored to accept data structured according to the graph's node count, while gnn_output employs a dense layer with ReLU activation to extract features from the GNN input. Concatenating the flattened CNN output and processed GNN output seamlessly integrates features learned from both architectures. Additional dense layers refine the merged features, introducing non-linearity to capture complex data relationships. Finally, the output layer determines the input's category, such as Parkinson's disease presence, by producing a probability score between 0 and 1, where values closer to 0 denote confidence in a healthy classification and values nearing 1 indicate a higher likelihood of Parkinson's disease.

6.3 Training and Evaluation

With the hybrid model architecture in place, we embark on the crucial phases of training and evaluation. Leveraging meticulously curated datasets, we fine-tune the model parameters to optimize performance metrics such as accuracy, sensitivity, and specificity. Rigorous cross-validation techniques ensure the robustness and generalizability of our model across diverse patient cohorts.

Fig 6.6 Hybrid CNN+GNN Model Performance for Parkinson's Disease Detection

This fig 6.6 presents the performance results of a hybrid CNN+GNN model trained on a 1082 brain MRI image dataset (906 Parkinson's disease patients, 176 healthy controls). The model demonstrates promising results for early Parkinson's disease detection, with key performance metrics potentially including accuracy, precision, recall, F1-score.

Fig 6.7 Hybrid CNN+GNN Model Performance for Parkinson's Disease Detection on increase data sample.

This figure 6.7 presents the performance results of a hybrid CNN+GNN model trained on a 1365 brain MRI image dataset (1008 Parkinson's disease patients, 257 healthy controls). The model demonstrates promising results for early Parkinson's disease detection, with key performance metrics potentially including accuracy, precision, recall, F1-score.

Paper	Hybrid Approach	Result
Early disease detection and diagnosis	Hybrid CNN+GNN	98%
of parkinson's disease.		
Diagnosis of parkinson's disease	CNN+GAN	89.23%
using deep CNN with transfer learning		
and data augmentation.		
A hybrid approach for classifying	Genteic algorithm +	87.93%
parkinson's disease from brain MRI	CNN	

Table 6.1 Comparison of current hybrid model with existing hybrid model.

The fig 6.8 presents a comparison table evaluating the performance of different hybrid machine learning models for early Parkinson's disease detection using brain MRI images. Included in the comparison is your proposed hybrid CNN+GNN model, alongside other existing hybrid approaches. Key performance metrics likely include accuracy, with your model demonstrating potentially superior results compared to the other listed methods. Hybrid CNN+GNN model demonstrates the highest accuracy (98%) compared to the other two approaches listed in the table.

The accuracy achieved by the hybrid CNN+GNN model for Parkinson's disease detection can be attributed to several key factors. Firstly, the utilization of ResNet50 within the CNN segment ensures powerful feature extraction from brain MRI images. With its deep architecture and pretraining on ImageNet, ResNet50 excels at capturing rich and discriminative image features, enabling the model to distinguish subtle Parkinson's-related changes within the data. Additionally, the incorporation of a Graph Neural Network (GNN) introduces structural information by leveraging similarity relationships between brain MRIs. This approach allows the model to capture complex patterns in the data that might be overlooked by the CNN alone, thereby enhancing its ability to detect and diagnose Parkinson's disease accurately.

Furthermore, the synergy between the CNN and GNN components of the hybrid model plays a pivotal role in enhancing predictive performance. By combining image features extracted by the CNN with graph-based representations generated by the GNN, the model gains a multi-faceted view of the data, leading to more comprehensive and nuanced predictions. Moreover, the quality of the preprocessed MRI dataset is paramount to the model's success. Effective preprocessing techniques ensure that relevant patterns are preserved and noise is minimized, making it easier for the model to identify meaningful signals indicative of Parkinson's disease pathology. Together, these factors contribute to the remarkable accuracy achieved by the hybrid CNN+GNN model in Parkinson's disease detection and diagnosis.

CHAPTER 7

CONCLUSION AND FUTURE WORKS

The project on early detection and diagnosis of Parkinson's disease using a hybrid CNN+GNN approach has yielded promising results and provided valuable insights into the application of advanced machine learning techniques in neurology. Through meticulous data preprocessing steps including intensity normalization, resizing, and filtering operations, we prepared a comprehensive dataset consisting of brain MRI images from both Parkinson's disease patients and healthy controls. Leveraging the powerful feature extraction capabilities of ResNet50 within the CNN segment and the structural information captured by the Graph Neural Network (GNN), our hybrid model demonstrated impressive accuracy in detecting and diagnosing Parkinson's disease.

CNN-extracted integration of features and **GNN-generated** graph representations into a unified hybrid model enabled us to leverage the complementary strengths of both approaches, leading to a more nuanced understanding of Parkinson's disease pathology. Despite encountering a slight decrease in accuracy when transitioning to a larger dataset, our model's performance remained robust, demonstrating its potential for real-world clinical applications. Moving forward, further refinement and optimization of the model, along with continued validation on diverse patient cohorts, will be essential to enhance diagnostic precision and facilitate early intervention strategies in Parkinson's disease management. Overall, our project represents a significant step towards revolutionizing neurological disease analysis through the synergy of cutting-edge machine learning techniques.

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