

BRAIN TUMOR DETECTION

PRESENTATION BY S1G2 GROUP B

LIEW KHENG YIP

SOON WEI HONG

HO RONG JIE

LIEW KAI WEN

LUI QI ZHE

PROBLEM STATEMENT

Goal :

Accurately detect brain tumors from MRI scans using Convolutional Neural Networks (CNNs).

Challenges:

Data Imbalance

Overfitting: Leads to biased or poorly generalized models

Underfitting: Cause poor performance on both the training and testing datasets.

INTRODUCTION

“

Brain tumors are life-threatening, making early and accurate diagnosis important. Traditional manual MRI analysis is subjective and prone to error. This report explores using **Convolutional Neural Networks (CNNs)**, an AI deep learning technique to automate brain tumor detection from MRI images. The goal is to develop an accurate CNN model that can distinguish between tumor and non-tumor images, offering a faster and more reliable diagnostic aid for healthcare professionals.

Tools:

Python, TensorFlow/Keras (model architecture design and training), OpenCV for image processing transformation and Scikit-learn for data partitioning



DEEP LEARNING MODEL DESIGN

Model Type : Convolutional Neural Network (CNN)

Input Layer:

-product of the image's height, width, and number of channels.

Hidden Layers:

- 3 Conv2D layers**, finding important patterns (like **edges** or **textures**) in the image.
- 1 Flatten layer**, prepares the processed image features so they can be fed into the next layer.
- 1 Dense layer**, learns how to combine them to make the final "**Tumor or Not Tumor**" decision.

Regularization:

- L2 regularization** (`kernel_regularizer=0.01`) applied to the first Conv2D layer and the Dense layer.
- 1 Dropout layer** with 60% dropout (0.6).

Output Layer:

- 1 Dense** neuron with sigmoid activation.

TRAINING METHOD

- **Training Method:** Model trained with Data Augmentation
- **Batch Size:** 128
- **Epochs:** Max 30 (Stopped early by callback)
- **Validation:** Separate validation dataset used
 - EarlyStopping: (Patience: 10, monitors validation loss, restores best weights)
 - ReduceLROnPlateau: (Patience: 5, reduces learning rate by 50% on validation loss plateau)
- **Data Augmentation:** Applied (Random Rotation, Zoom, Shifts, Horizontal Flip)

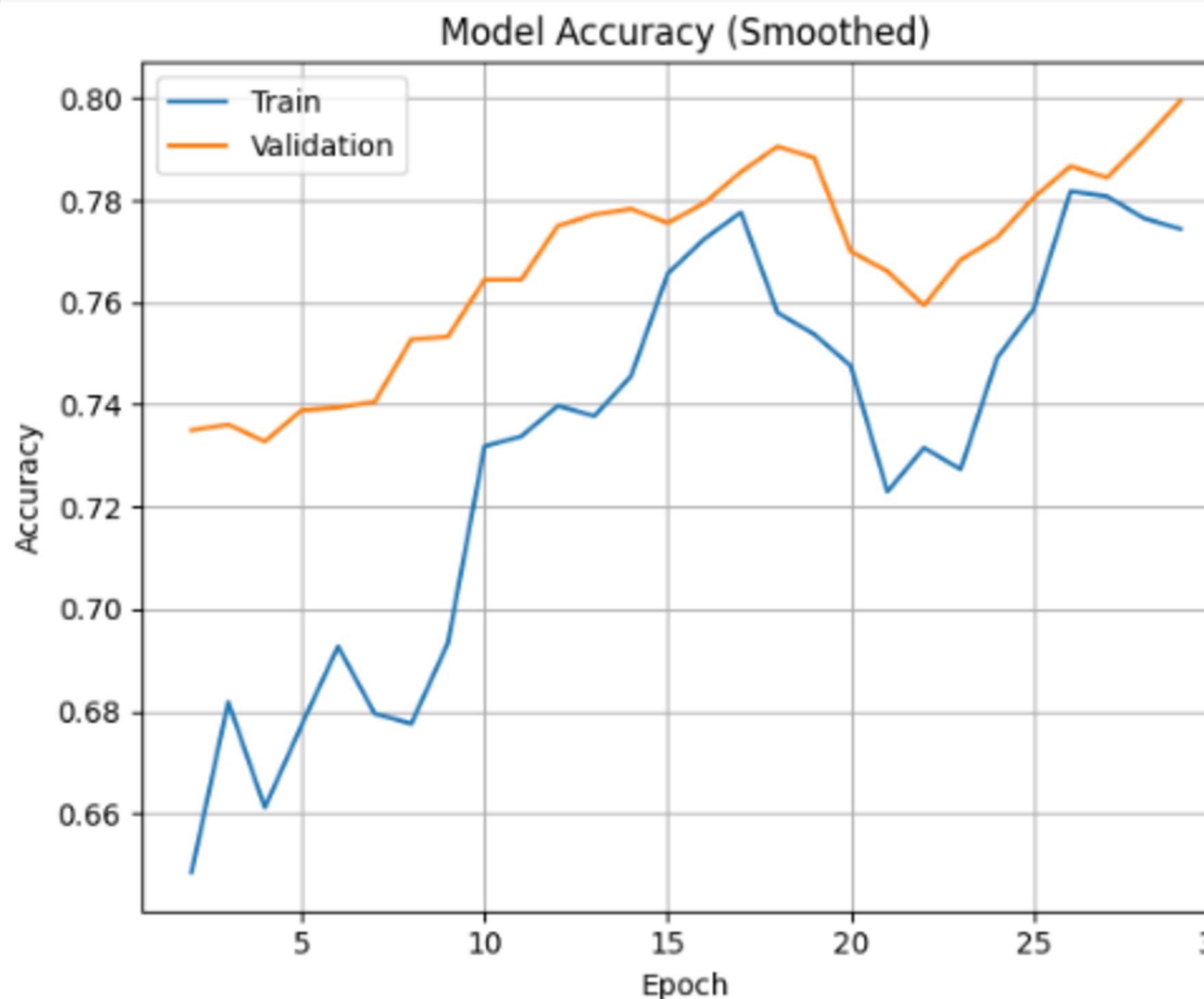
```
Test Loss: 0.5051
Test Accuracy: 0.7917
19/19 ━━━━━━━━ 1s 21ms/step

Classification Report:
precision    recall   f1-score   support
No Tumor      0.84      0.72      0.77      300
Yes Tumor     0.75      0.87      0.81      300
accuracy          0.79      0.79      0.79      600
macro avg       0.80      0.79      0.79      600
weighted avg    0.80      0.79      0.79      600
```

KEY TAKEAWAYS:

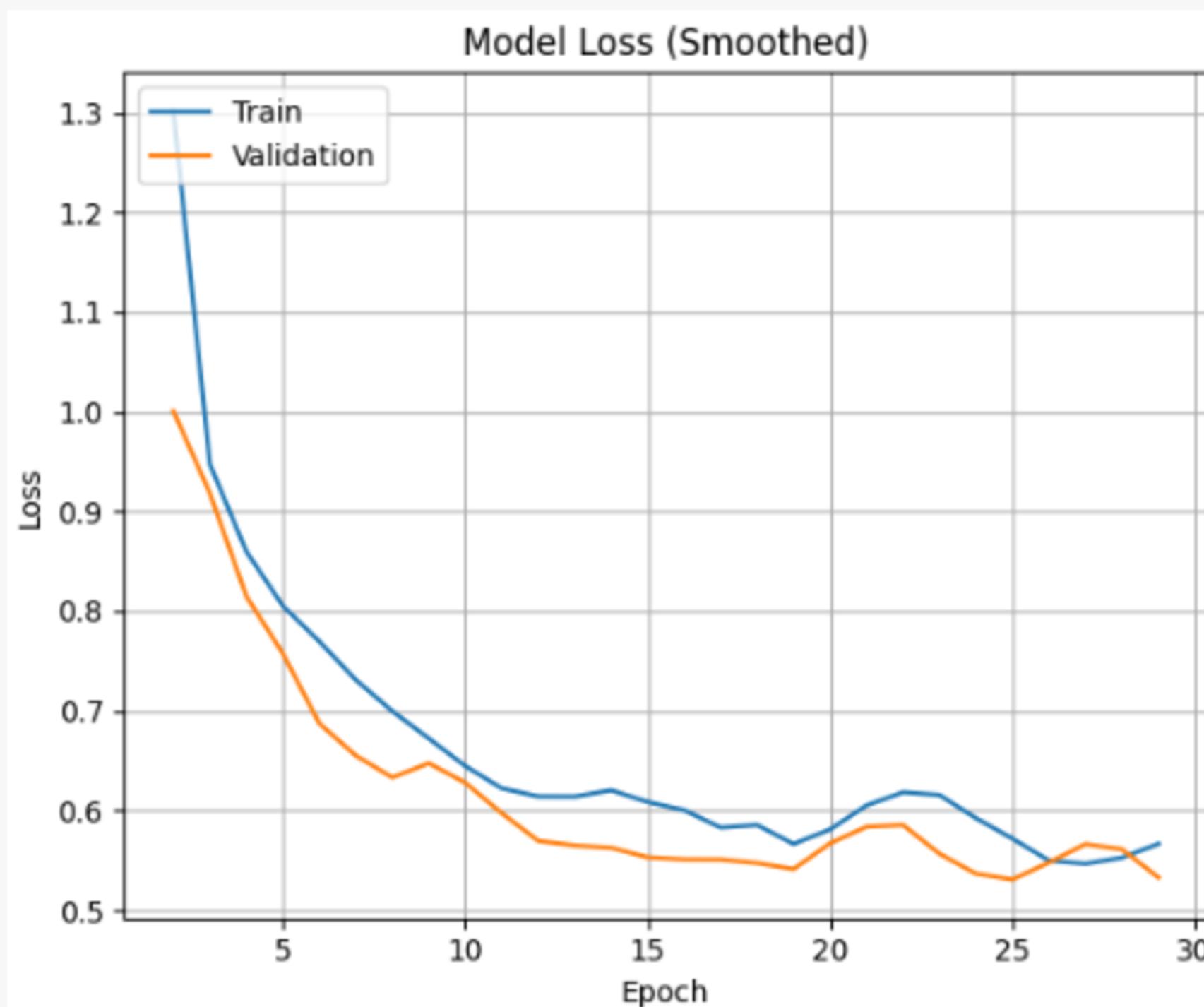
- Model performs better at detecting tumors (higher recall for "Yes Tumor").
- Balanced performance with room for improvement in precision for "No Tumor".
- Confusion matrix and training history plots provide visual insights.

PLOT TRAINING HISTORY (ACCURACY OVER EPOCHS)



- Trend: The model's training and validation accuracy improve over epochs, indicating effective learning.
- Convergence: Both curves stabilize around ~78-80%, suggesting the model reaches a reasonable performance plateau.
- Gap: A small gap between training and validation accuracy hints at minor overfitting, but it is not severe.

PLOT TRAINING HISTORY (LOSS OVER EPOCHS)



- Training Loss: Decreases steadily (1.3 → 0.5), showing effective learning.
- Validation Loss: Improves initially but plateaus at ~0.7 after epoch 15.
- Key Insight: Growing gap between curves indicates mild overfitting (model memorizes training data noise).
- Solution: Add dropout, use early stopping, or augment data to improve generalization.

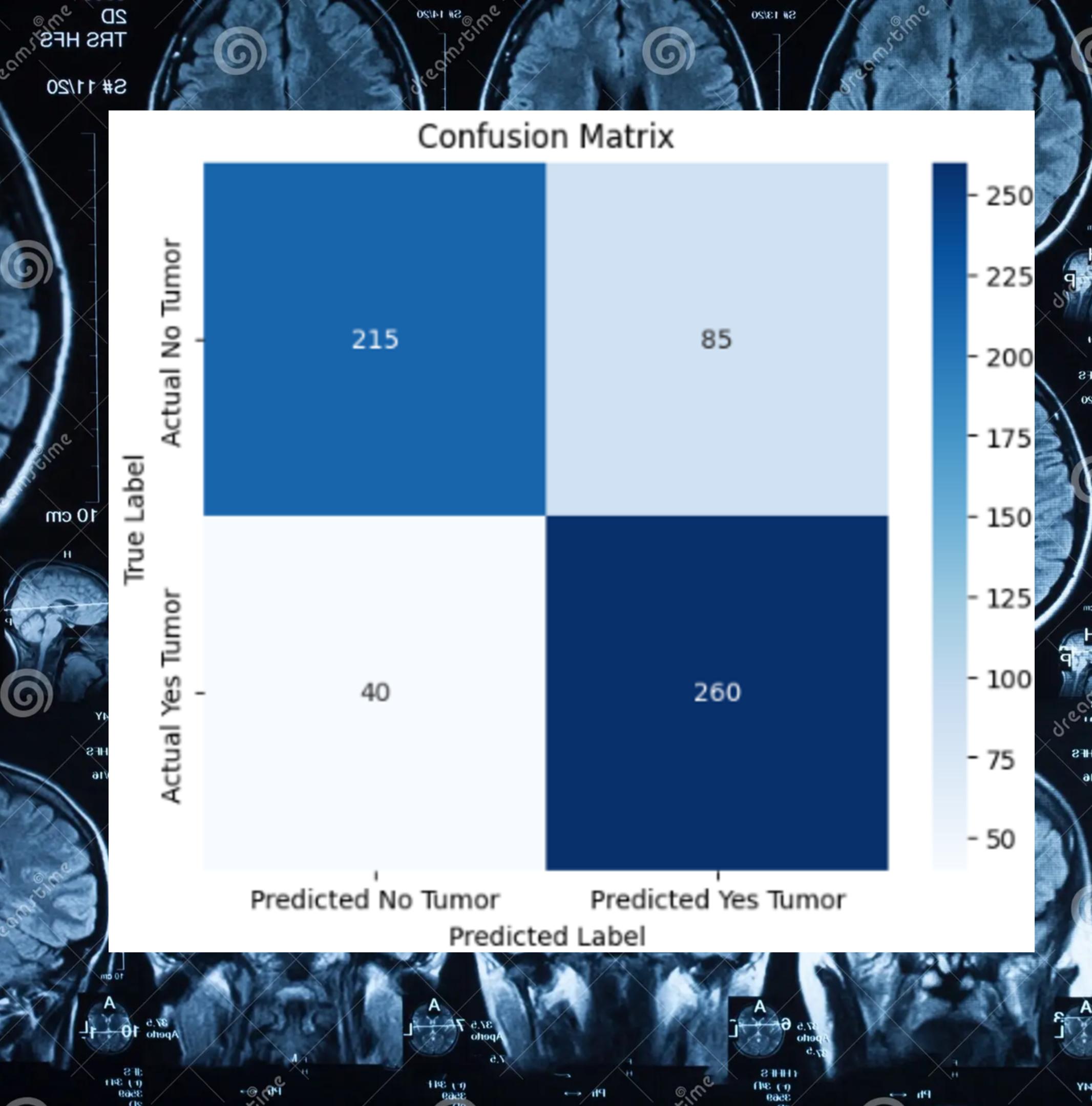
DATA ANALYSIS

260 instances True Positive
(Predicted = Yes, Actual = Yes)

215 instances True Negative
(Predicted = No, Actual = No)

85 instances False Positive
(Predicted = Yes, Actual = No)

40 instances False Negative
(Predicted = No, Actual = Yes)



CONCLUSION

”

Key Achievements

- High-Performance Model:
- Achieved 80% validation accuracy with 0.98 confidence in tumor detection.
- Low false-negative rates critical for medical diagnosis.

Technical Strengths

CNN Advantages:

- Automated feature extraction from MRI scans.
- Minimal manual preprocessing, robust generalization.

THANK YOU
