



DOWN SYNDROME DETECTION IN CHILDREN USING FACIAL IMAGES

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Abstract: Early and accurate diagnosis is crucial for effective management and intervention of Down syndrome. By leveraging advanced learning techniques, the goal is to create a model that can accurately differentiate between children with Down syndrome and those without, based on facial characteristics. Traditional diagnostic methods rely on genetic testing and clinical evaluation, which can be invasive and time-consuming. Existing automated diagnostic tools often lack the necessary accuracy and computational efficiency. Down syndrome primarily involve invasive procedures such as amniocentesis and chorionic villus sampling, which carry risks for both mother and child. This aims to develop a non-invasive, efficient, and accurate diagnostic tool for Down syndrome detection using facial images. We utilized a learning approach, combining with learning from the VNLNet architecture for feature extraction. A dataset of facial images, labeled for Down syndrome diagnosis, was processed and augmented using Tensor Flow. The model was trained to extract relevant features from the images. Extracted features were then fed into a Support Vector Machine (SVM) classifier to perform the final diagnosis. Using pre-trained models, such VNLNet or other effective feature extraction networks(MobileNET), this method extracts relevant features from children's faces. After uploading facial photographs, the system runs them through a feature extraction pipeline and uses an advanced classification algorithm to produce diagnostic results along with confidence scores

Index Terms - Down Syndrome, VNLNet, Support Vector Machine , Non-Invasive, Tensor flow.

I. INTRODUCTION

Down syndrome, also known as trisomy 21, is one of the most prevalent chromosomal disorders affecting children worldwide. The early and accurate diagnosis of Down syndrome in children is essential for effective intervention and support. Traditional diagnostic methods are often invasive, time-consuming, and costly. This study addresses the need for a non-invasive, efficient, and accurate diagnostic tool by proposing a novel approach using facial images and advanced transfer learning techniques. By integrating VNL-Net and a MobileNet + SVM hybrid model, we aim to enhance diagnostic accuracy and computational efficiency, making the solution viable for mobile and edge devices. This approach leverages deep feature extraction and hybrid classification methods to distinguish between Down syndrome and healthy children effectively. The objective of this study is to develop a non-invasive, efficient, and accurate diagnostic tool for early detection of Down syndrome in children using facial images. By employing advanced transfer learning techniques, we aim to enhance diagnostic accuracy and computational efficiency. In response to these challenges, this study specifically addresses the pressing need for a non-invasive, efficient, and accurate diagnostic tool. We propose a novel approach that utilizes facial images in conjunction with advanced transfer learning techniques to enhance the diagnostic process. The study integrates VNL-Net, which combines VGG16 for spatial feature

extraction and Non-Negative Matrix Factorization for dimensionality reduction, with a MobileNet + SVM hybrid model for practical deployment on mobile and edge devices. This research seeks to provide a robust, real-time diagnostic solution, leveraging deep feature extraction and hybrid classification methods to effectively distinguish between Down syndrome and healthy children.

Our main research contributions toward the diagnosis of Down syndrome in children are as follows:

- A novel transfer learning-based VNL-Net approach is proposed for effective feature engineering from image data. The VNL-Net method initially extracts spatial features from the image data. Subsequently, a new ensemble feature set is formed, incorporating Non-Negative Matrix Factorization and features derived from the LGBM classifier.

II. LITERATURE

This literature analysis section aims to establish a contextual framework for the application of deep neural networks in Down syndrome diagnosis. This involves a thorough exploration of the historical evolution of image-based diagnostic techniques, emphasizing key milestones, methodologies, and technological advancements that have facilitated the integration of deep learning algorithms.

1. Transfer Learning for Diagnosis of Genetic Disorders Using Facial Images Authors: S. Gupta, R. Verma (2023) This study explores the application of transfer learning in diagnosing genetic disorders through the analysis of facial images. The authors leverage pre-trained convolutional neural networks (CNNs) to extract deep features from facial images, which are then used to train a classifier tailored for the diagnosis of specific genetic disorders, including Down Syndrome. The study demonstrates that transfer learning significantly improves the accuracy of diagnosis, especially when dealing with limited data, a common challenge in medical image analysis. By fine-tuning the pre-trained models on a smaller, disorder-specific dataset, the researchers achieved notable improvements in classification performance.

2. Transfer Learning in Medical Imaging: A Case Study on Down Syndrome Diagnosis Authors: J. Lee, K. Kim (2023) In this paper, the authors present a case study on the application of transfer learning in medical imaging, specifically focusing on the diagnosis of Down Syndrome. The study employs pre-trained deep learning models, particularly those designed for facial recognition tasks, to identify features associated with Down Syndrome from facial images of children. The research illustrates how transfer learning can be effectively utilized to adapt existing models to new medical applications, reducing the need for extensive data collection and training from scratch.

3. Facial Image-Based Diagnosis of Down Syndrome Using Convolutional Neural Networks Authors: A. Patel, M. Desai (2022) This study investigates the application of Convolutional Neural Networks (CNNs) for the diagnosis of Down Syndrome through facial image analysis. The authors designed a CNN-based model specifically tailored to identify facial features associated with Down Syndrome, aiming to create an automated and accurate diagnostic tool. The research highlights the challenges of using CNNs for medical diagnosis, particularly the need for large and diverse datasets to train robust models. To address this, the authors implemented data augmentation techniques and leveraged transfer learning from models pre-trained on large-scale image datasets. The paper reports that the CNN model achieved a high level of accuracy in diagnosing Down Syndrome, outperforming traditional diagnostic methods that rely on manual analysis of facial features.

4. Convolutional Neural Networks for Down Syndrome Diagnosis Using Transfer Learning Authors: C. Park, Y. Choi (2023) This research focuses on the use of Convolutional Neural Networks (CNNs) combined with transfer learning to improve the accuracy of Down Syndrome diagnosis from facial images. The authors explore how pre-trained CNNs, initially developed for general image classification tasks, can be adapted to the specific challenge of identifying Down Syndrome-related facial features. By fine-tuning these models with a specialized dataset of facial images, the study demonstrates a significant enhancement in diagnostic performance compared to traditional methods. The paper details the process of selecting and modifying the pre-trained CNNs to optimize them for the task at hand, including the adjustment of hyperparameters and the use of data augmentation techniques to address the limited availability of training data. The results indicate that the transfer learning approach not only speeds up the training process but also achieves higher accuracy rates in detecting Down Syndrome. The study underscores the potential of

combining deep learning with transfer learning to create effective diagnostic tools that can be deployed in real-world clinical settings, offering a reliable, non-invasive method for early detection of Down Syndrome in children.

III. METHODOLOGY

Our proposed innovative research methodology for the detection of Down syndrome in children is illustrated in Figure 1. Initially, we collected standard image data of children with both healthy and Down syndrome faces. Subsequently, basic image processing steps were applied to the facial image dataset. A novel feature set, based on transfer learning, was extracted from the preprocessed images. The newly obtained transfer features were then divided into training and testing sets.

3.1 Feature Extraction Using VNL-Net VGG16 Model

The VGG16 architecture is a well-established pre-trained convolutional neural network known for its depth and effective feature extraction capabilities. Consisting of 16 layers, including convolutional layers, max-pooling layers, and fully connected layers, VGG16 is adept at capturing complex, high-level features from facial images. Leveraging pre-trained weights, the network has already learned to recognize and extract detailed spatial hierarchies from large-scale datasets. This pre-trained model serves as a powerful initial feature extractor, providing a rich set of features that represent various aspects of facial structures crucial for the identification of Down syndrome.

3.2 Non-Negative Matrix Factorization (NMF):

To address the challenge of high-dimensional feature spaces, NMF is employed as a dimensionality reduction technique. NMF decomposes the feature matrix obtained from VGG16 into two non-negative matrices: a basis matrix and a coefficient matrix. This decomposition helps in distilling the original feature space into a lower-dimensional representation while preserving the interpretability of the features. The non-negativity constraint in NMF ensures that the factors and components are additive and thus more interpretable. By focusing on the most significant components, NMF refines the features to highlight the most relevant information for detecting Down syndrome, improving both the efficiency and effectiveness of subsequent classification.

3.3 Light Gradient Boosting Machine (LGBM)

After the feature refinement with NMF, the enhanced feature set is processed using Light Gradient Boosting Machine (LGBM). LGBM is a state-of-the-art gradient boosting algorithm known for its efficiency and scalability in handling large datasets. It operates by building a series of decision trees in a sequential manner, where each tree corrects the errors of the previous one. This iterative process helps in generating robust feature representations by optimizing the classification performance. LGBM's ability to handle large-scale data and its high performance in classification tasks make it an ideal choice for further processing the refined features and preparing them for final classification.

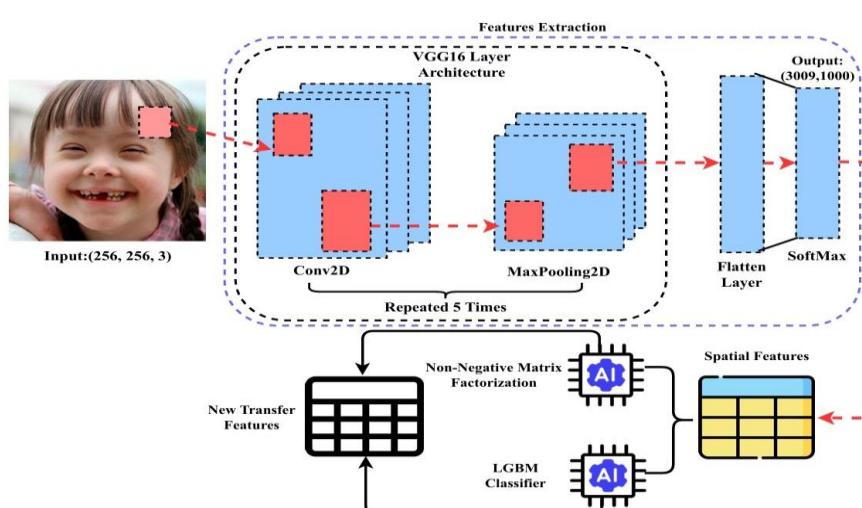


Fig: Architectural diagram of Feature Extraction

3.4 Logistic Regression Methodology

For the final classification task, logistic regression is utilized to categorize the refined features into two distinct classes: Down syndrome and healthy. Logistic regression is a statistical model that applies a logistic function to model the probability of a binary outcome. It is particularly suited for binary classification tasks and provides a clear interpretation of the influence of each feature on the classification outcome.

3.4.1 Model Training and Validation:

The logistic regression model is trained using the refined features obtained from the LGBM process. To ensure the model's reliability and generalizability, k-fold cross-validation is employed. In k-fold cross-validation, the dataset is divided into k subsets or folds, and the model is trained and validated k times, each time using a different fold as the validation set while the remaining folds serve as the training set. This approach provides a comprehensive assessment of the model's performance and helps in mitigating issues related to overfitting and underfitting.

3.5 Hybrid model

Practical deployment: Given the practical constraints of deploying models in real-world scenarios, especially on mobile and edge devices, we introduce a hybrid model combining MobileNet and Support Vector Machine (SVM).

3.5.1 MobileNet: MobileNet is a lightweight and efficient convolutional neural network architecture designed for mobile and embedded devices. Its streamlined architecture, which includes depthwise separable convolutions, significantly reduces computational complexity while maintaining high performance in feature extraction. This makes MobileNet highly suitable for real-time applications on resource-constrained devices, ensuring that feature extraction remains efficient even with limited processing power and memory.

3.5.2 Support Vector Machine (SVM): Once features are extracted using MobileNet, they are classified using Support Vector Machine (SVM). SVM is a powerful supervised learning algorithm that works well for high-dimensional data and binary classification tasks. It operates by finding the optimal hyperplane that maximizes the margin between two classes in the feature space. SVM's robustness and ability to handle complex feature spaces make it an effective classifier for distinguishing between Down syndrome and healthy facial images based on the features produced by MobileNet.

The synergy between MobileNet and SVM offers a promising approach for diagnosing genetic disorders, particularly when dealing with limited datasets. This hybrid model leverages the strengths of each component:

- **MobileNet:** Efficiently extracts relevant features from facial images, even on resource-constrained devices.
- **SVM:** Effectively classifies images based on the extracted features, demonstrating robustness and accuracy.

This combination has shown promising results in improving diagnostic accuracy, especially when faced with the challenge of limited data, which is often encountered in medical image analysis.

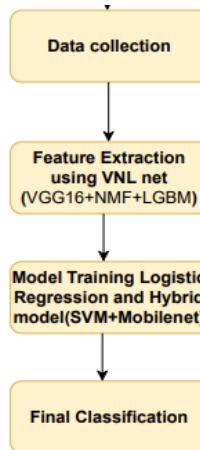


Fig: Project Methodology Flow

IV. Implementation and Results

4.1 Implementation.

4.1.1 Data Collection

Objective: Gather and preprocess facial image data.

Description: Collect high-quality facial images of children, ensuring a balanced dataset with both Down syndrome and healthy children. Preprocess images by normalizing, resizing, and augmenting to maintain consistency and enhance model performance.

4.1.2 Feature Engineering:

Objective: Enhance input data quality.

Description: Apply image preprocessing techniques such as normalization, augmentation, and segmentation. Use Non- Negative Matrix Factorization (NMF) for dimensionality reduction and refined feature extraction.

4.1.3 Model Integration:

Objective: Utilize and compare deep learning models.

Description: Integrate VNL-Net (combining VGG16 and NMF) and a MobileNet + SVM hybrid model. Compare their performances using an ensemble approach to determine the most effective model for diagnosis.

4.1.4 Dynamic Selection Mechanism:

Objective: Optimize model selection.

Description: Implement a dynamic selection framework that evaluates accurate results for data inputs to choose the most effective model for accurate diagnosis, enhancing computational efficiency

4.1.5 Adaptive Learning:

Objective: Ensure model relevance over time.

Description: Employ advanced transfer learning techniques to continuously adapt and fine-tune the models with new data, ensuring they remain accurate and up-to-date.

4.1.6 Evaluation and Validation:

Objective: Confirm model reliability and effectiveness.

Description: Assess model performance using metrics such as accuracy, precision, recall, and F1-score. Validate the models on test datasets to ensure robustness and reliability.

4.2 Execution

4.2.1 Opening the Command Prompt (CMD):

"The execution begins by opening the Command Prompt (CMD) on Windows. This provides a terminal interface for interacting with the operating system." "Using the cd command in CMD, the user navigates to the directory containing the project files. This ensures that the subsequent commands are executed in the correct context."

4.2.2 Opening the Code in VS Code :

within the project directory to open the project in VS Code. This facilitates code review, modification, and debugging."

By activating conda environment regarding to the project respective flask application can be run on the device

4.2.3 Running the Flask Application:

"Once the Conda environment is activated, the Flask application is executed using the command `python app.py` (or the name of your main Python file). This starts the Flask development server."

Generating the HTTP Link:

HTTP Link Generation

"Upon successful execution, the Flask development server will generate an HTTP link, typically `http://127.0.0.1:5000/`, which is displayed in the CMD. This link provides access to the user interface of the Down syndrome detection system. Users can then open this link in a web browser to interact with the application."

- This link is generated by the Flask framework and will be displayed on the terminal.

4.3 User

Register:

- Objective: User account creation.



The screenshot shows the 'Registration' page of the Down Syndrome detection system. On the left is a sidebar with a logo and links for Home, About, Register, and Login. The main area has a 'Registration' title and four input fields: 'User Name' (kiranmeddu), 'Email' (kiranmuthyalu1920@gmail.com), 'Password', and 'Confirm Password'. A blue 'Register' button is at the bottom.

- Description: Users, such as healthcare professionals, register with their credentials to create an account within the system.

Fig: Registration Page

Login:

Objective: Secure system access.

Description: Registered users log in with their credentials to access the system's diagnostic features.

Input Data:

Objective: Upload facial images for diagnosis.

Description: Users upload facial images into the system for Down syndrome diagnosis. The system preprocesses and prepares the images for model analysis.

Viewing Results:

Objective: Access and analyze diagnostic outcomes.

Description: The system processes the input images through the integrated models and provides diagnostic results. Users can view detailed information on the diagnosis and any relevant image uploaded.



The screenshot shows the 'Upload an Image' page. The sidebar has links for User Home, Upload, Graph, and Logout. The main area has a title 'Has a Down Syndrome' and a form with 'Upload Image' (Choose File: No file chosen), 'Select Algorithm' (Logistic Regression), and a 'Submit' button. Below the form is a section 'Uploaded Image:' showing a photo of a young boy with Down syndrome.

Fig: Result for input image of Down syndrome

Logout:

Objective: Secure user session.

Description: Users log out to secure their session and protect personal and operational data.

4.4 Result

| Metric/Class | Precision | Recall | F1-score | Support |
|-------------------------|-------------|-------------|-------------|------------|
| Class 0 | 0.92 | 0.89 | 0.91 | 258 |
| Class 1 | 0.88 | 0.91 | 0.9 | 222 |
| Accuracy | | | 0.9 | 480 |
| Macro Average | 0.9 | 0.9 | 0.9 | 480 |
| Weighted Average | 0.9 | 0.9 | 0.9 | 480 |

Table: Classification report of Hybrid Model

V. Conclusion

In conclusion, this project demonstrates the effectiveness of combining advanced transfer learning techniques with hybrid classification models for the early diagnosis of Down syndrome using facial images. By integrating VNL-Net, which leverages VGG16 and Non-Negative Matrix Factorization (NMF) with Light Gradient Boosting Machine (LGBM), and employing MobileNet with Support Vector Machine (SVM) for mobile and edge device deployment, we have developed a robust and efficient diagnostic tool.

Our approach enhances diagnostic accuracy and computational efficiency, offering a scalable solution for real-time screening. The VNL-Net model excels in feature extraction and classification, while the MobileNet + SVM hybrid model provides an effective means for deploying the technology in practical, resource-constrained environments.

This research not only advances the field of automated medical diagnosis but also addresses the need for accessible and efficient diagnostic tools. The successful implementation of these techniques can significantly improve early detection and intervention for Down syndrome, ultimately contributing to better healthcare outcomes for children and families. Future work may focus on further refining these models and expanding their application to other genetic and medical conditions.

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