



EFFICIENT AUGUMENTATION OF EXTRACTED IMAGES USING DEEP LEARNING

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Abstract- A intracranial tumor is a complaint caused by the growth of abnormal cells in the brain. There are two main orders of intracranial tumors non- cancerous(benign) intracranial tumor and cancerous(malignant) intracranial tumor. With the growth of artificial intelligence, deep literacy models are used to diagnose intracranial tumor by taking images with magnetic resonance imaging.

Index Terms - Brain tumor detection and classification, Yolo, Mobile Net-v2

I. INTRODUCTION

An unbridled and unnatural brain cell's development is known as BT. The Human brain is volume- confined and a rigid body; thus, a Human capacity may be told by an unlooked-for development; in addition, this might gain into other body organs and affect in life hanging conditions. As per the worldwide (excescence growth) report, handed by the World Health Organization (WHO), BT lies under 2 of Human cancer; extreme dismalness, complications, and comorbidities also live[1]. Being studies report that around 30 of BTs are benign excrescences. BTs bracket can be classified grounded on the inflexibility and type, similar as severe/ benign. Due to the below- substantiated knowledge, early BT's discovery and discovery transfigure into an essential errand and likewise help (to cover the case's life) in choosing the most accessible curing approach. either, the categorization stage might be a confounding and monotonous task (for radiologists and croakers) in some sensitive cases. These cases need specialists to deal with excrescence localization, discrepancy the apkins of excrescence and neighboring locales, filter the picture if essential, make it all further straightforward for Human vision, incipiently, anyhow of whether this is BT other than its grade and kind we propose a more effective deep literacy grounded approach using a Gaussian sludge for pre-processing(for noise filtering and smoothing the input images).It's time consuming, and we bear Computer- backed Design(CAD) grounded approach(without Human supplication) for the foremost identification of BTs.

II. PROPOSED FRAMEWORK

DEEP LEARNING APPROACH:

Deep Learning is a novel subset of machine learning that was developed in the traditional method to overcome the limitations of the existing machine learning [1,2] approaches. Because of the performance of most classical classification algorithms is dependent on the feature extraction step. Extraction of significant features from data is sometimes difficult and time-consuming. Furthermore, substantial prior domain understanding is required for the design of a feature extractor to efficiently obtain information from data. A learning model with many levels of representations is presented to develop higher levels of abstraction. Each level of representation in the model is used to extract particular features of the data, where higher-level features are determined from lower-level features to make some sense to data which shows how deep networks suppress irrelevant information for the tasks of face recognition and amplify the significant features of the input image which are essential for discrimination.

Algorithms:

In medical image analysis, pre-processing is a pivotal step. In order to do so, we use the pre-processing phase to apply discrepancy improvement . For MRI image improvement, adaptive histogram equalization is applied. After pre-processing, use the YOLO model to separate the excrescence region from the non-affected part of the brain image. Finally, transfer literacy, i.e., the Mobile Net- v2 CNN model, is used to snappily classify intracranial tumor regions into benign and nasty. transfer literacy, i.e., the Mobile Net- v2 CNN model, is used to snappily classify in tracraniel tumor regions into benign and malignant. Transfer literacy models include both the point birth and bracket stages.

YOLO Model:

YOLO is a system that provides real-time object discovery using neural networks. The fashionability of this algorithm is due to its delicacy and swiftness. It has been applied in a variety of ways to identify creatures, humans, parking measures, and business lights. The following apologies make the YOLO algorithm pivotal,

YOLO workshop using the three ways; Residual blocks, Bounding box retrogression, crossroad Over Union (IOU). Beforehand identification and treatment planning are essential for a correct opinion of an intracranial tumor. The early discovery of brain cancer reduces the impact of surgery and treatment, perfecting the prognostic for numerous cases. The task of segmenting and detecting intracranial tumors has been heavily automated, either incompletely or fully, by a number of studies. A study was done on a subset of the BRATS 2018 data set that contained 1,992 Brain MRI reviews. The YOLOv5 model achieved a delicacy of 85.95% and the Fast AI bracket model achieved a delicacy of 95.78%. These two models can be applied in real-time intracranial tumor discovery for early opinion of brain cancer.

MobileNet V2:

MobileNet is a class of convolutional neural network (CNN) that provides an excellent starting point for training classifiers that are insanely small and insanely presto. In this composition we will be using MobileNetV2 for Transfer literacy. Transfer literacy is the exercise of a pre-trained model on a new problem. Transfer literacy helps us training a pre trained model with some redundant added layers.

MobileNet V2 armature is special because it uses veritably lower calculation power to run. This makes it a perfect fit for mobile bias, bedded systems, and computers to run without GPUs. MobileNetV1 is the first interpretation of the MobileNet models. It significantly has a lower number of parameters in the deep neural network. This results in further featherlight. Being featherlight, it's stylish suited for bedded systems and mobile bias. Pre-trained models are deep neural networks that are trained using a large images dataset. Using there-trained models, the inventors need not make or train the neural network from scrape, thereby saving time for development. MobileNet-v2 is a convolutional neural network that's 53 layers deep.

III. SYSTEM ARCHITECTURE

This flow of the system describe the formal representation of a system, that organized in the sense of about the structures and process of the system Implementation.

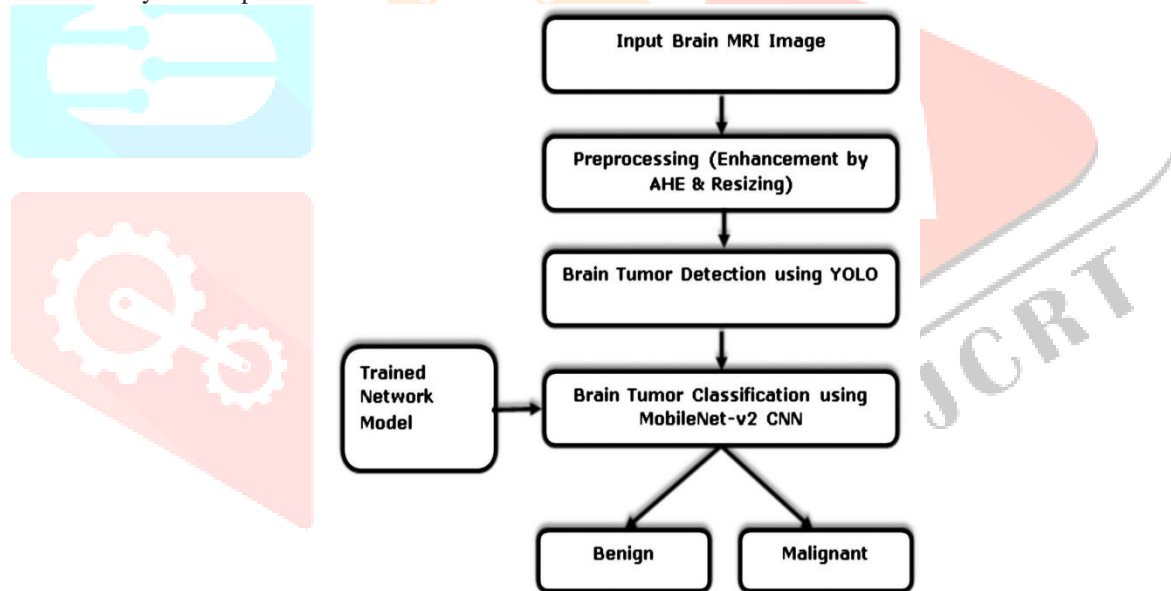


Fig 1: Implementation of Brain tumor

A system architecture is the abstract model that defines the structure, behavior, and farther views of a system.

INPUT DATAS:

The input design describe the information of the system and user data. It comprises the developing specification and procedures for data drug. The design of input focuses on controlling the amount of input demanded, controlling the crimes, avoiding detention, avoiding spare way and keeping the process simple. The number of images with representing orders. The images are further distributed into training dataset and testing dataset. The images are gray position images with intensity value ranges from (0 to 255).

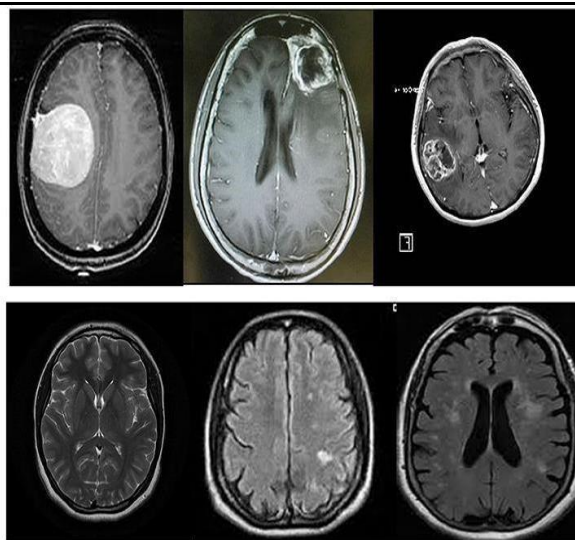


Fig 2: MRI brain images samples

These images are used for both discovery and type operations. Some samples of the MRI database have shown.

MODULES:

1. Image Acquisition
2. Preprocessing
3. Brain Tumor Detection
4. Brain Tumor Classification
5. Performance Measure

1. Image Acquisition:

The term is constantly assumed to indicate or include the processing, compression, storage, printing and display of analogous images. Image accession in image processing can be vastly defined as the action of repossessing an image from some source, generally attack- predicated source, so it can be passed through whatever processes need to do latterly. Performing image accession in image processing is always the first step in the work flux sequence The factual attack device can be anything from a desktop scanner to a massive optic telescope. However, also visual vestiges can be produced that can complicate the image processing If the attack is not properly configured and aligned.

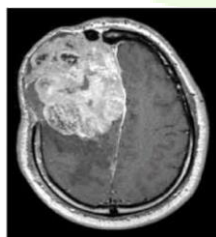


Fig 3: Test Image

The above MRI image is the first stage for detecting brain tumor for digital representation.

2. Preprocessing:

The alternate stage of intracranial tumor discovery and type is preprocessing, which includes distinction enhancement. After that, the image resizing process is executed (10). Data preprocessing is performed to remove the unmasked data in noise form that decreases the model's performance. Therefore, cropping the images is vital to remove extraneous space and use only the applicable data. In the MRI images it has different sizes, heights, and extents. So it's necessary to resize the images into equal height and range to achieve the swish results. After that, all images are decrypted between 0 and 255. For that we use Adaptive histogram equalization (AHE) is a computer image processing fashion used to meliorate distinction in images.

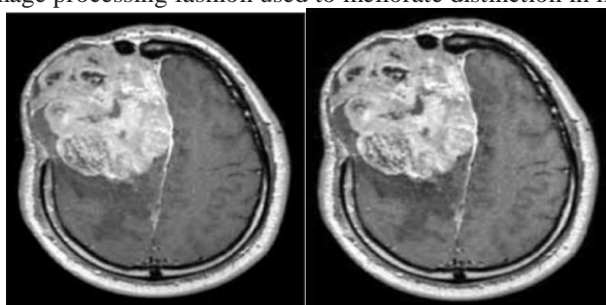


Fig 4: Resizing the Images

First step for preprocessing, load the factual MR image, convert the images into grayscale and blur it slightly and also apply the thresholding to the glamorous resonance image for converting these images into double images.

3. Brain tumor detection:

Brain tumor segmentation is a vital task in the medical world. The significance of early intracranial tumor identification in perfecting treatment issues and adding patient survival rates can't be inflated (9,12). We give a unique deep knowledge frame for exrescence discovery in this work. In image segmentation and computer vision, deep learning models play a critical part.

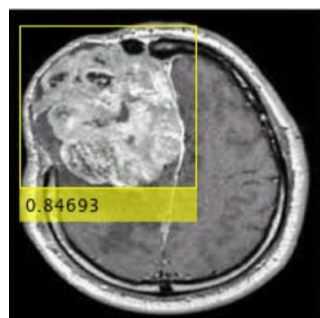


Fig 5: Brain tumor detection

This is the third step, The brain image should be detected a specified range.

4. Brain tumor classification:

The CNN grounded intracranial tumor bracket is divided into two phases similar as training and testing phases. The number of images is divided into different order by using markers name similar as tumor and non-tumor brain Fig3.5 &3.6 shows training and testing results. originally, marker the training image set. Eventually, the complication neural network is used for automatic intracranial tumor bracket. However, we've to train the entire subcaste (i.e.,) up to ending layer. So time consumption is very high. It will affect the performance.

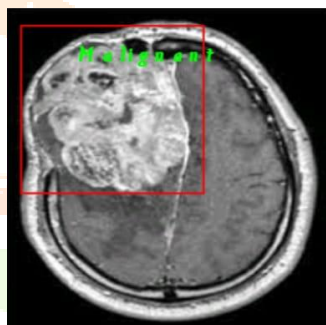


Fig 6: Identification of brain tumor

After the identification of brain tumor it is named as two categories to provide accurate classification.

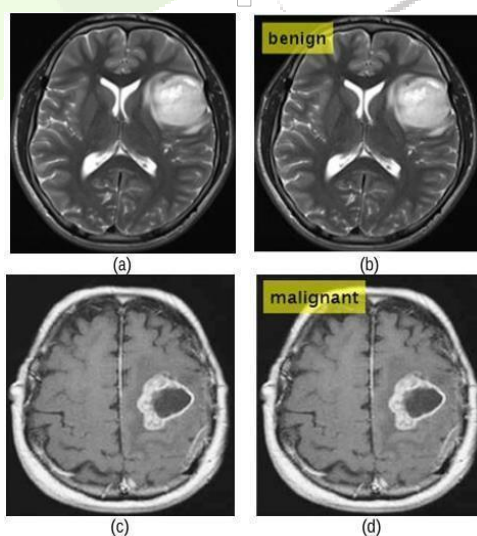


Fig 7: MIR images of Benign and malignant

To avoid this kind of problem, pre-trained model based brain dataset is used for classification steps categories the brain tumor into two types:

- **Benign**
- **Malignant**

Performance measurement:

Different evaluation criteria are used for the vaticination and bracket challenges, similar as delicacy, perfection, recall, and F1measure. The effectiveness of the proposed model is assessed using the following evaluation criteria.

- Accuracy
- Precision
- Recall
- F1_Score

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Training on single CPU.
Initializing input data normalization.
=====
| Epoch | Iteration | Time Elapsed | Mini-batch | Mini-batch | Base Learning |
|       |          | (hh:mm:ss)  | Accuracy   | Loss       | Rate         |
=====
| 1     | 1       | 00:00:35    | 48.39%    | 0.8284    | 0.0003      |
| 50    | 50      | 00:08:48    | 100.00%   | 0.0726    | 0.0003      |
| 100   | 100     | 00:16:20    | 100.00%   | 0.0142    | 0.0003      |
=====
Training finished: Max epochs completed.

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Fig 8: Training process is completed by max epoch

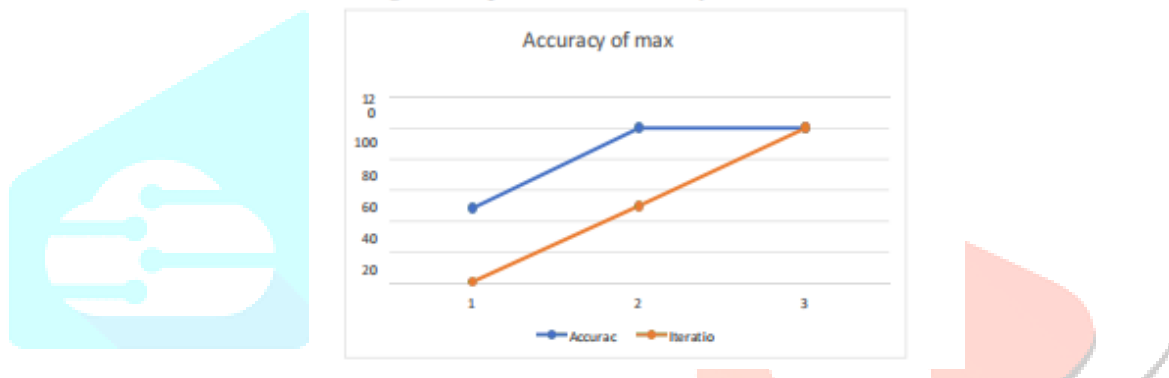


Fig 9: Graph shows the accuracy of MobileNet-v2

The above mentioned graph shows the accuracy of brain tumor using YOLO and MobileNet-V2 algorithm.

IV. CONCLUSION AND FUTURE SCOPE

Detecting an intracranial tumor is complicated because of the brain's complex structure. Every organ in the body has a function that's controlled by the brain. This study proposed the CNN- grounded deep literacy model And Matlab to classify the intracranial tumors using the MIR intracranial tumor images dataset. The proposed model uses the Convolutional Neural Network for rooting the features in the form of cropped images. Four criteria, delicacy, perfection, recall, and F1- measure, are used to estimate the model's performance. The proposed model provides the stylish result by achieving 99.1% delicacy, perfection is 98.8%, recall is 98.9%, and F1- measure is 99.0%. The results showed that the proposed model is stylish for detecting the MR brain images.

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