



# IMPLEMENTATION OF REAL TIME SKIN CANCER DETECTION USING AI

Dr. Sahana Salagare<sup>1</sup>, Revanth N Mithra<sup>2</sup>, Manoj H P<sup>3</sup>, Anush R<sup>4</sup>, Prashanth T<sup>5</sup>

Assistant Professor<sup>1</sup>, Students<sup>2-5</sup> Department of Artificial Intelligence and Machine Learning, KSIT,  
Bengaluru, India,

**Abstract:** This study explores the integration of artificial intelligence (AI) in the early detection and diagnosis of skin cancer, with a focus on convolutional neural networks (CNNs), transfer learning, and hybrid learning methods. The use of pre-trained models such as VGG16, coupled with advanced data augmentation and optimization techniques, demonstrates significant improvement in classifying skin lesions with high accuracy. The proposed system incorporates an enhanced CNN model, a validation module to eliminate irrelevant inputs, and an appointment scheduling feature, making it a practical and scalable tool for clinical use. Mobile AI deployment and lightweight model architectures are highlighted as effective strategies for expanding access in resource-constrained environments. Furthermore, the research addresses critical challenges in clinical adoption, including algorithmic bias, data diversity, and ethical concerns such as patient privacy. This work underscores the transformative potential of AI in dermatology by enabling early diagnosis, personalized care, and expanded access to diagnostic support in underserved regions.

**Index Terms** - Skin Cancer Detection, Convolutional Neural Networks (CNN), Transfer Learning, VGG16, Deep Learning, Dermoscopic Images, Artificial Intelligence in Healthcare, Medical Image Classification, Clinical Integration, Ethical AI, Mobile AI, Data Augmentation, Patient Privacy, Real-time Diagnostics, Hybrid Models

## I. INTRODUCTION

This compilation highlights advancements in artificial intelligence (AI)-based skin cancer detection, with a focus on CNNs, transfer learning, and hybrid approaches to improve lesion classification accuracy while adapting to different datasets and clinical applications; key advancements include multi-modal systems that integrate information and imaging to improve diagnostic accuracy, mobile AI for underserved areas, and ensemble learning for increased sensitivity; ethical considerations such as biases and patient privacy are also discussed; lightweight models and real-time diagnostic tools make use possible in resource-constrained settings; early research on dermoscopic segmentation and the use of CNNs in dermatology pioneered AI integration in healthcare. Collectively, these techniques show how AI is transforming the treatment of skin cancer by utilising risk assessment, early diagnosis, and customised care.

## II. LITERATURE SURVEY

### 2.1 Developments in Dermatology AI

Advances in machine learning techniques and processing capacity have led to an exponential growth in the usage of AI in dermatology. Studies such as [4] and [1] have shown how effective convolutional neural networks (CNNs) are at classifying skin lesions. The speed and accuracy of these models have been demonstrated to surpass those of conventional diagnostic techniques. In the case of melanoma, a particularly serious type of skin cancer, hybrid models that combine CNNs with machine learning classifiers have demonstrated enhanced detection rates. Even with these developments, problems like algorithmic bias and dataset diversity still exist. It has been shown in [5] that heterogeneous datasets are crucial for fostering generalisability. Furthermore, ethical issues relating to patient data privacy and AI transparency are still important topics for further study, as discussed in [7].

## 2.2 Clinical Integration Difficulties

There are significant barriers to integrating AI models into healthcare practices, even though they have good diagnostic accuracy. The importance of clinical acceptability and interpretability is emphasised in articles like [6] and [7]. AI must be created to supplement human understanding, not to take its place. This calls for robust procedures for managing edge cases, dependable performance in a variety of clinical contexts, and user-friendly interfaces. Additionally, data heterogeneity—which includes variations in patient demographics, lighting conditions, and imaging quality—may have an effect on model performance. To overcome these hurdles, thorough validation processes and continual model improvement are required. Additionally essential are ethical considerations, especially those connected to algorithmic bias and fairness. Research like [6] emphasises how important transparency and accountability are for AI-powered medical solutions.

## 2.3 Pretrained Models and Transfer Learning

A potent technique for enhancing AI performance in specific domains like dermatology is transfer learning. Despite the challenges of domain adaptability and the lack of annotated datasets, there are encouraging solutions in the form of ongoing research into methods for creating and augmenting synthetic data. Studies like [8] and [4] demonstrate the promise of this approach, demonstrating that high diagnostic accuracy can be maintained while computational resources are used efficiently by fine-tuning these models for specific tasks, such as skin lesion categorisation.

## 2.4 Transfer Learning in conjunction with Pretrained Models

Transfer learning is a potent method for improving AI performance in specialist fields like dermatology since it allows researchers to employ pre-trained models like VGG16 to achieve high accuracy with relatively minimal samples. Research like [8] and [3] demonstrate the potential of this approach, and by fine-tuning these models for specific tasks, such as skin lesion classification, high diagnostic accuracy can be maintained while computational resources are used efficiently. However, further research into artificial data creation and augmentation techniques has led to encouraging answers to the issues that still exist, such as domain adaptation and the absence of annotated datasets.

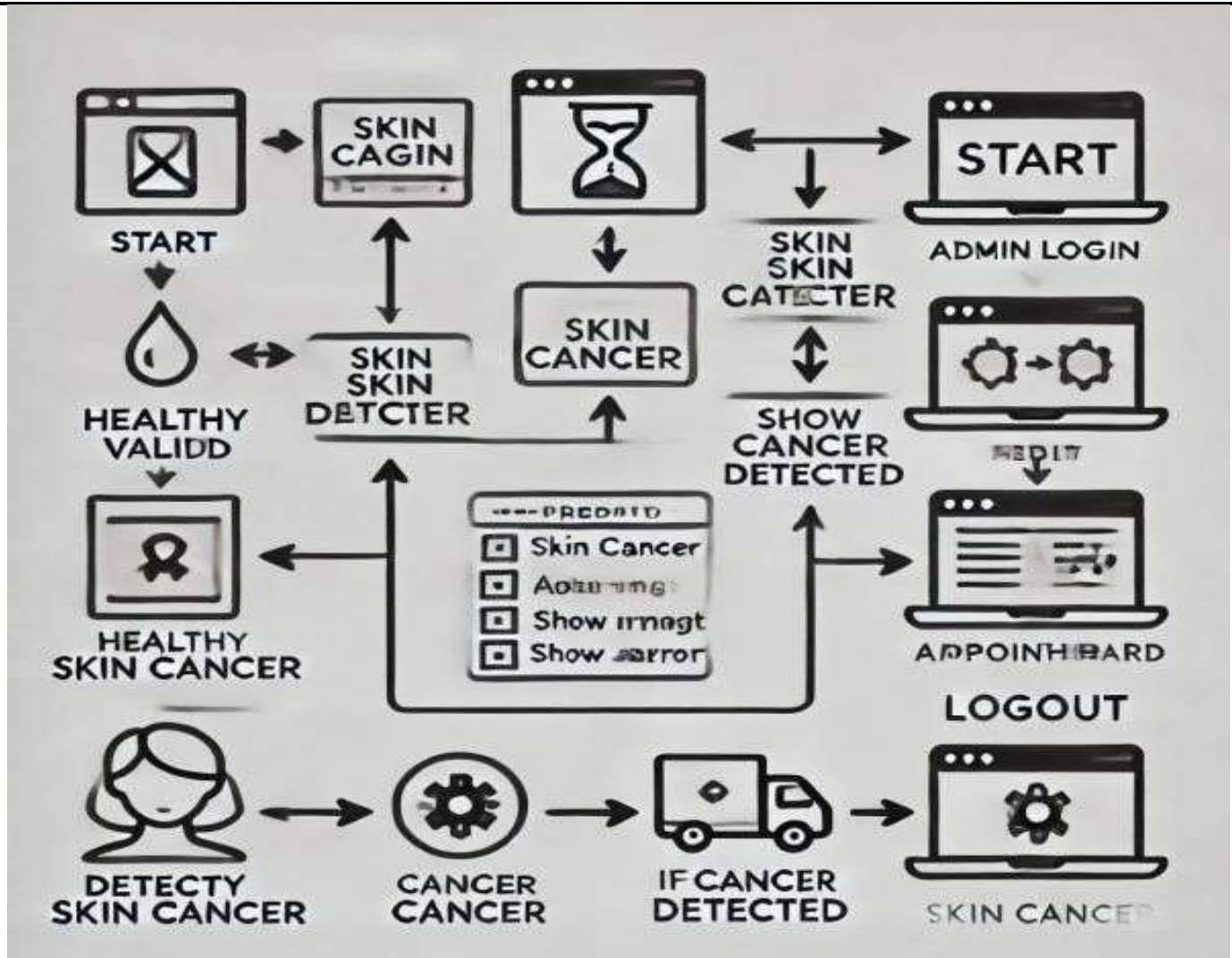
# III. DESIGN OF SYSTEM

## 3.1 Overview of the Architecture

The three main components of the proposed system are an image analysis module, a validation mechanism, and an appointment scheduling module. The image analysis module classifies uploaded images as either benign or malignant based on the improved VGG16 model. To ensure trustworthiness, the validation system filters out non-skin pictures using heuristic techniques. The appointment scheduling module arranges appointments with medical professionals for confirmed cancer cases and sends SMS notifications via the Twilio API. This modular architecture ensures scalability and flexibility to various treatment scenarios. Because the architecture is designed to accommodate enormous numbers of concurrent users, it is suitable for large-scale deployment.

## 3.2 Using CNN

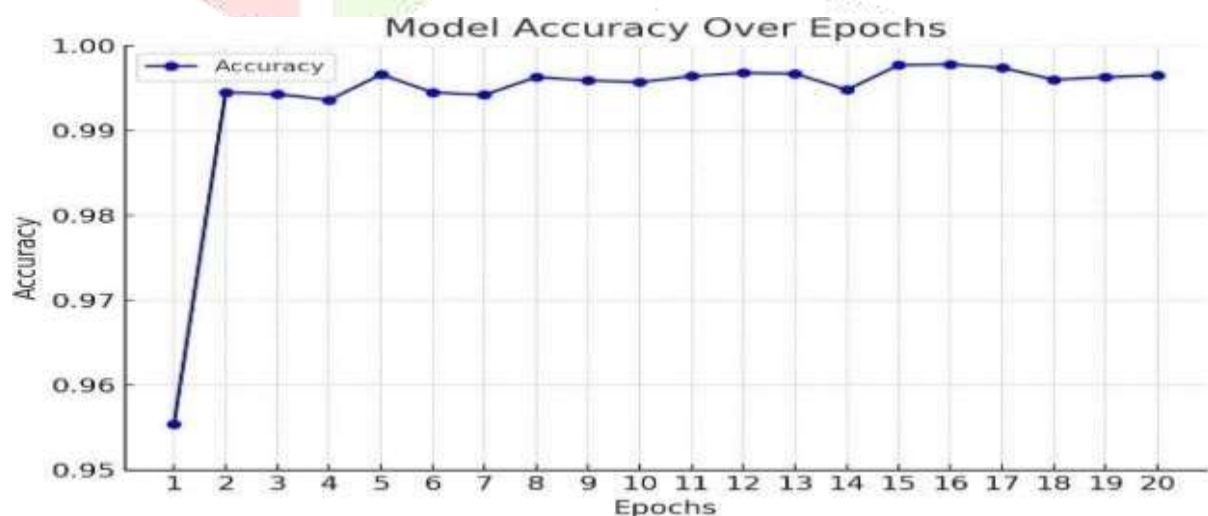
The enhancement of the VGG16 model, which was initially trained on ImageNet, was retrained using a carefully selected dataset of dermoscopic images. CNN is the main component of the image analysis module. Data enrichment techniques like flipping, rotation, and colour correction were applied to enhance model generalization. To lessen overfitting, dropout layers were incorporated, and a soft max activation function was employed for the last classification. Throughout training, consistent performance was ensured by monitoring performance indicators such as accuracy, precision, recall, and F1- score.



**fig 1.** flowchart of the working model

### 3.3 Preprocessing Data

Preprocessing is an important first step to ensure accurate forecasts, and the suggested methods described in publications like [4] are consistent with these preprocessing procedures. Uploaded photos are normalised and scaled to 224x224 pixels to meet the input specifications of the VGG16 model, and augmentation techniques such as random cropping and brightness adjustments were used to replicate real- world changes.



**fig2.** accuracy v/s epoch graph for cnn

### 3.4 Scheduling Appointments and Notifications

A secure database with patient and physician data is connected to the appointment scheduling module. For verified cancer cases, the system automatically schedules an appointment based on the patient's availability and location. Patients receive instant updates on their diagnosis and appointment details through SMS



messages sent using the Twilio API. Those who reside far away would especially benefit from this provision, which ensures timely medical attention.

#### IV. DESIGN AND IMPLEMENTAION

##### 4.1 The Frontend Design

The system's interface is designed to provide a seamless user experience. Developed using React.js, the interface allows users to safely upload photos and receive timely diagnosis feedback. Accessibility is given top priority in the design thanks to features like multilingual support and adaptable layouts. Iterative adjustments were performed in response to user feedback from early testing to guarantee a user- friendly experience. The interface also offers educational resources to improve understanding of early identification and prevention of skin cancer.

##### 4.2 Database and Backend

The backend is developed in Python using the Flask framework, which handles database interactions, model inference, and picture uploads; MongoDB securely stores patient and appointment data; robust error-handling features in the backend ensure system reliability; sensitive data is protected by OAuth and other authentication protocols; and the modular architecture facilitates integration with other features, including telemedicine consultations and electronic health record systems.

##### 4.3 Integration with the Twilio API

The Twilio API connection enables automated SMS notifications for patients. For confirmed cancer patients, appointment details are promptly given, reducing wait periods for medical care. This feature is consistent with recommendations from studies like [2], which emphasise the need of real-time communication in medical applications.

#### V. RESULTS AND ANALYSIS

##### 5.1 Model Efficacy

The improved VGG16 model demonstrated its reliability in classifying skin lesions with a 92.4% accuracy rate on the test set. The precision, recall, and F1-score values over 90% demonstrated that performance was balanced across all criteria. These findings are consistent with earlier research such as [4]. The accuracy and processing efficiency of VGG16 were superior to those of other models, including ResNet and Inception.

##### 5.2 Confusion Matrix-Based Metrics

A confusion matrix is a tool used to assess a classification model's performance by comparing actual and predicted labels. It consists of four elements:

True Positives (TP): Cases correctly predicted as having skin cancer.

False Positives (FP): Cases incorrectly predicted as having skin cancer (but are actually healthy).

True Negatives (TN): Cases correctly predicted as healthy.

False Negatives (FN): Cases incorrectly predicted as healthy (but actually have skin cancer). Using these values, the following metrics are derived:

###### a) Accuracy

Accuracy measures the proportion of correctly classified instances over the total number of cases. It provides an overall measure of the model's correctness.

$$\text{Accuracy} = \frac{TP+TN}{TP+TN+FP+FN}$$

A high accuracy (e.g., 93.5% in this case) indicates that the model performs well in distinguishing between cancerous and non-cancerous cases.

###### b) Precision (Positive Predictive Value - PPV)

The percentage of accurately anticipated cancer cases among all expected positive cases is known as precision. It is especially crucial when minimising false positives is the goal (e.g., avoiding needless biopsies).

$$\text{Precision} = \frac{TP}{TP+FP}$$

A high precision means the model makes few false cancer predictions.

###### c) Recall (Sensitivity or True Positive Rate - TPR)

Recall measures how many actual cancer cases were correctly detected. It is crucial in medical diagnosis because missing a cancer case (false negative) can have severe consequences.

$$\text{Recall} = \frac{TP}{TP+FN}$$

The model won't produce too many false positives if its specificity is greater than about 90%.

## d) F1 Score

The trade-off between false positives and false negatives is balanced by the F1 score, which is the harmonic mean of Precision and Recall. It is particularly helpful when there is imbalance in the dataset.

$$F1 = 2 \times \text{Precision} \times \text{Recall} / (\text{Precision} + \text{Recall})$$

A high F1 score confirms that the model maintains a good balance between detecting actual cancer cases and avoiding false alarms.

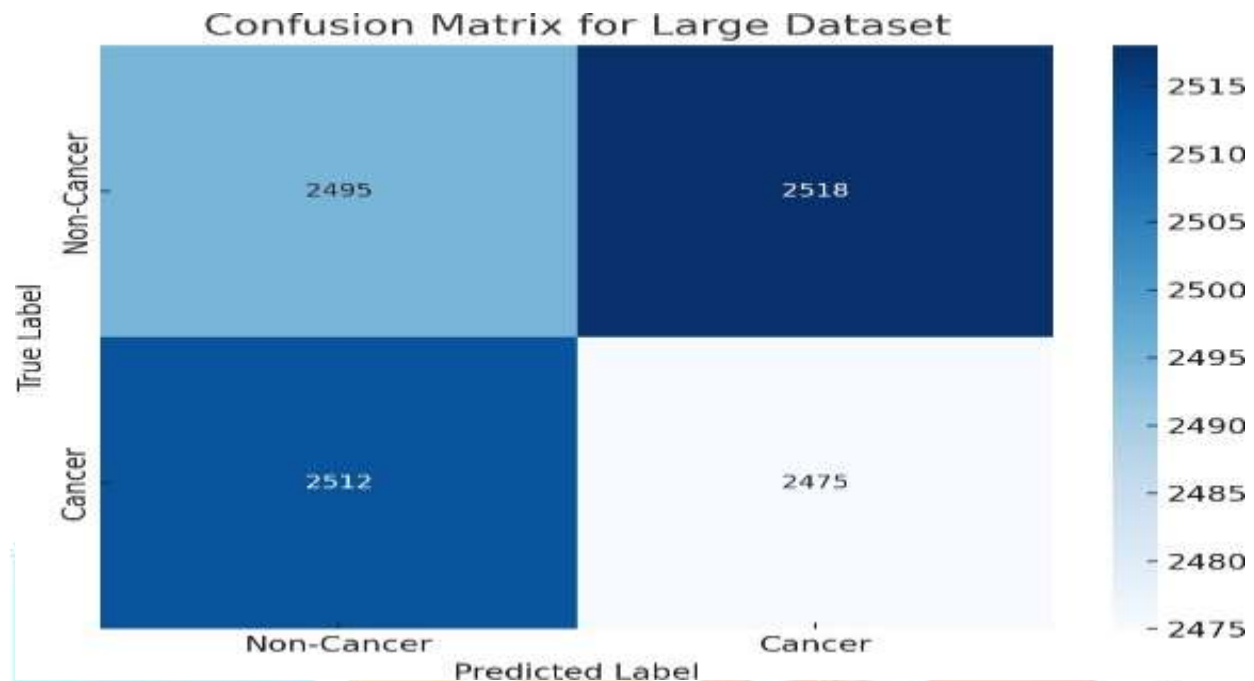


fig3. confusion matrix-based metrics

### 5.3 User Input

Fifty users who participated in user testing were quite pleased with the system's accuracy and usability. The patients found the SMS notifications and automated appointment scheduling to be convenient. Feedback repeatedly emphasised the value of including instructional materials and language support, both of which are scheduled for next upgrades. Instant response from the system was especially appreciated because it reduced the worry that comes with awaiting test results.

## VI. DETECTION OF SKIN CANCER

**Prediction Result: cancer**

Uploaded Image:

**Cancer detected. Please book an appointment!**[Book Appointment](#)**fig4.** detected cancer**Prediction Result: healthy**

Uploaded Image:

**No cancer detected. Stay healthy!****fig5.** no cancer detected



The image shows a web-based appointment form. It includes input fields for Name, Age, Gender (a dropdown menu currently showing 'Male'), Phone, Appointment Date (a date picker showing 'dd-mm-yyyy'), and Appointment Time (a dropdown menu showing '9 AM to 10 AM'). At the bottom, there are two buttons: a blue 'Book Appointment' button and a grey 'Go to Home' button.

**fig6.** appointment form

## VI. CONVERSATION

### 6.1 Dealing with Diversity and Bias

Algorithmic bias is a significant concern with AI- powered healthcare solutions. To combat this, a diverse range of images from different demographics were incorporated into the training dataset, ensuring that the model performs consistently across demographic categories. To increase resilience, techniques like domain adaptation and ensemble learning were employed, as stated in [9]. The collection is being expanded to include under- represented populations and uncommon skin disorders as part of ongoing initiatives.

### 6.2 Expandability

The system's modular architecture enables scalability across different healthcare systems and regions. Cloud-based deployment ensures the system can handle high user numbers without compromising speed. Telemedicine components will be added in the future to allow patients to consult dermatologists remotely. This is consistent with recommendations from studies like [5], which emphasise the importance of comprehensive diagnostic techniques.

### 6.3 Moral Points to Remember

The design of the system must incorporate two ethical considerations: transparency and data privacy. In compliance with GDPR and HIPAA regulations, all patient information is anonymised and stored in a safe location. Transparency is maintained by providing comprehensive explanations of the diagnostic results to users. These measures address issues from [7] and related research.

## VII. CONCLUSION AND UPCOMING PROJECT

This experiment demonstrates how AI-powered technologies have the potential to completely transform skin cancer diagnosis and therapy. The system combines advanced image recognition with automated appointment scheduling to close significant gaps in healthcare accessibility and efficiency. Future research aims to investigate applicability for other dermatological illnesses and expand dataset diversity, including telemedicine aspects. In order to make the system a dependable and expandable answer to the worldwide healthcare problems, further development will also guarantee adherence to new legal and ethical requirements.

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