

Automated Detection Of Brain Tumor From MRI Images Using MATLAB

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ABSTRACT:

A tumor is carried on by rapid and uncontrolled cell growth in the brain. If it is not treated in the initial phases, it could prove fatal. Despite numerous significant efforts and encouraging outcomes, accurate segmentation and classification continue to be a challenge. Detection of brain tumors is significantly complicated by the distinctions in tumor position, structure, and proportions. The main disinterest of this study stays to offer investigators, comprehensive literature on Magnetic Resonance (MR) imaging's ability to identify brain tumors. Using computational intelligence and statistical image processing techniques, this research paper proposed several ways to detect brain cancer and tumors. This study also shows an assessment matrix for a specific system using particular systems and dataset types. This paper also explains the morphology of brain tumors, accessible data sets, augmentation methods, component extraction, and categorization among Deep Learning (DL), Transfer Learning (TL), and Machine Learning (ML) models. Finally, our study compiles all relevant material for the identification of understanding tumors, including their benefits, drawbacks, advancements, and upcoming trends.

INDEX TERMS: Brain tumor, image classification, image segmentation, deep learning, machine learning.

LINTRODUCTION:

An unchecked expansion of brain tissues is known as a brain tumor. It produces pressure in the skull and interferes with the brain's natural functioning. Brain tumor comes in two different types: Benign (non-cancerous) and Malignant (cancerous). Among them, malignant tumors grow quickly in the brain, damage the normal tissues, and may replicate themselves in other parts of the body. Brain tumors are graded into four different categories.

Grade I: These tumors do not spread quickly and develop slowly. These are connected to a higher chance of enhanced order and may be surgically eliminated nearly entirely. One such tumor is a pilocytic astrocytoma.

Grade II: Although they may migrate to surrounding tissues and advance to higher grades, these tumors also grow over time. These tumors may detect even though treatment is taken by the patient. An oligodendroglioma tumor is an example of an overtime growth tumor.

Grade III: The growth of these tumors has been quicker than grade II malignancies and could spread to adjoining tissues. Such tumors require post-operative chemo or radio therapy because surgery alone would be insufficient to treat them. Aden squamous astrocytoma is an indication of such a tumor.

Grade IV: The most dangerous and likely to spread malignant tumors are in this category. They might even use blood vessels to speed up their growth. An illustration of one of these tumors is glioblastoma multiforme.

Brain tumors must be identified in time and appropriately be classified in order to get proper treatment and endure for patients. Because of the several vulnerabilities including different shapes, sizes of tumors, appearance, positions, scanning parameters, and modalities detection of brain tumors is a very challenging job to perform to attain. This task a number of traditional and intelligence techniques are being used. Typically, traditional approaches like Leksell Gamma Knife, Gamma Knife (GK), and Radioactive beams are helpful in diagnosing the lesions, but this process includes human involvement and is often a time-consuming task to perform .

Brain tumor identification, many medical imaging modalities like Computer Tomography (CT), Magnetic resonance imaging (MRI) scans, and Positron Emission Tomography (PET) are employed.

A unique MR technique called chemical exchange saturation transfer (CEST) makes it possible in imaging some substances at concentrations that are too low to affect the contrast of conventional MR imaging and too low to be directly identified in MRS at usual water imaging resolution. Among them, MRI scan is a non-invasive method that shows the internal body structure with the help of magnetization and microwave pulses.

Brain tumor diagnosis, three categories of magnetic resonance image patterns. Fluid Attenuated Inversion Recovery (FLAIR), T1 weighted, and T2 weighted. The problem of identifying and detecting non-infected areas using brain MRI is crucial. The human visual system has a minimal ability to notice

tiny variations brought on by the Magnetic Resonance Image's increased complexity (MRI). Recently, a number of investigators developed Systems for computer-aided diagnosis (CAD) to help radiologists make precise diagnoses. Although Leksell Gamma Knife is a better approach to diagnosing tumors, because of the presence of necrosis in the brain the finding suffers. Therefore, effective machine learning should be adopted in order to solve this problem. Authors in have proposed a novel method with the amalgamation of a Random Forest classifier along with a voxel clustering algorithm. Similarly, conventional diagnosis processes including Leksell Gamma Knife are time-consuming processes, therefore authors in have introduced a semiautomated method using an unsupervised FCM clustering algorithm for accurately segmenting the lesion volume. A pipeline of four algorithms namely K-means, Fuzzy K-means and Gaussian Mixture Model (GMM), and Gaussian Hidden Markov Random Field (GHMRF) has been proposed for the segmentation of brain tumors. Authors in propose a two-stage mechanism for the assessment in dose escalation and eliminate the need for multispectral MRI data to analyze the image. The proposed framework incorporates the FCM algorithm in defining a novel method named a fully automatic method for necrosis extraction although ML approaches are quite efficient in handling the MRI images for accurate detection of the tumor region, with the availability of complex, large volumes of data and high computing devices, deep learning models are being cast-off for achieving advanced performance.

The proposed work incorporates various deep learning and machine learning mechanisms adopted for the detection and classification of brain tumors from MRI images. Various findings like datasets, deep models, classification approaches, parameters, future research directions along with the importance of using 3D models and attention-based mechanisms are being discussed followed by our proposed work. The brain is the most advanced part of the human nervous system that dominates a series of vital activities of the human body. Brain-related diseases are characterized by high relapse rates, high disability rates, high morbidity rates, and high fatality rates, which challenge clinical diagnosis and treatment.

II. MATERIALS AND METHODS:

1. Existing method

A lot of research has been directed toward the adaptation of deep learning models in diagnosing brain tumors. Academicians have put in their efforts and with the help of high-end computing devices, higher accuracy has been achieved. Convolutional neural networks (CNN), which include input, output, hidden layers, and hyperparameters, are often called Deep Learning (DL). It uses supervised classification and generates feature maps by having the kernel convolve all around the input image. Automatic-based feature extraction is both possible with DL models. Apart from its usefulness for medical condition detection, it has some shortcomings, including the requirements to design complex models, fine-tuning of hyper-parameters, the requirement of large data set, and time and effort to training/testing. As per recent research, significant data augmentation methods like resizing, rotation, scaling, and transformation are enforced to tackle the big data availability problem. A trained NN is used in transfer learning techniques to extract similar properties from an application – specific dataset. Brain tumor identification current TL methods like RESNET-100, VGGNET, Google-Net, Alex Net, etc.

The various deep learning techniques used by the researchers in the past are summarized. the recent developments in technology, 3D scanning is also being used for the analysis of tumors. 3D image processing for brain tumor detection and classification has been described. It used various deep learning frameworks, such as MobileNetV2, MobileNetV3 small, MobileNetV3 big, VGG16, VGG19, and custom CNN models. CNN achieved the highest accuracy. It offers a solution that combines a CNN built with Keras and Tensor flow with a fully-featured cross-platform application built. The pre-processing, data augmentation, segmentation, and binary classification of brain tumors implemented with a 3D medical image. In this context, classification is performed using two distinct classifiers. The dataset of 3D-MR images, the suggested framework obtained an accuracy of 98.67% and a dice similarity coefficient (DSC) of 97.91% for segmentation. For brain tumor classification on 3D-MR images from the BRATS 2018 dataset, the suggested framework obtained a DSC of 98.14%, an accuracy of 98.26% using the Dense-Net classifier, and a DSC of 96.4%, an accuracy of 96.52% using the Dark-Net classifier. A higher level of accuracy was achieved by the Dense-Net classifier compared to the Dark-Net classifier. In addition, they have compared this framework to earlier research, and the results Show that custom CNN obtains higher classification accuracy. Some of the 3D-based methods.

2. Proposed System

Pre-processing techniques including filtration, intensity correction, and skull stripping being used to maintain the original visual characteristics. To analyze the research gap between the existing machine learning and deep learning approaches, the study has been directed towards summarizing the various literature work incorporating both technologies which are presented. This table comprises the details with respect to methodology, algorithms, gap analysis, and dataset. They employed a specially created CNN classifier trained with the Adam optimizer using a mini-batch size of 16 and then tested the Classifier with 10-fold cross-validation. A Glorot initializer is used to get the convolution layers' weights started off in the right direction. The measures utilized to assess the model's performance were the highly sensitive, selectivity, accuracy, recall, and F1-score. Meningiomas, gliomas, and pituitary tumors all have sensitivity values of 89.8%, 96.2 percent, and 98.4%, respectively. Meningiomas have a specificity of 90.2 percent, gliomas have a specificity of 95.5 percent, and pituitary tumors have a specificity of 97.7 percent according to the model. In addition, the models have an overall accuracy of 95.4 percent, an average precision of 94.81 percent, an average recall of 95.07 percent, and an F1-score of 94.94 percent correspondingly. Convolutional neural networks, Deep CNN, dual-force CNN, cascaded CNN, 3-dimensional CNN, and Modern deep learning techniques are employed to train the data in the healthcare sector, including convolutional encoder networks, long short-term memories, CRF, U-Net CNN, and WRN-PPNet.

3. Methodology

It is a technique used to obtain areas of interest from digital images. The tumor's position must be distinguished from the MR brain scans, which is crucial. segmentation, numerous supervised methods are available, including thresholding, soft computing technique, atlas-based, Neural Networks (NNs), clustering, etc. Thresholding methods include global, adaptable, Otsu's, and histogram-dependent techniques. There are two unsupervised clustering methods namely K-means clustering and fuzzy C-means clustering. It successfully separates brain MRI scans into Gray Matter (GM), Cerebrospinal Fluid (CSF) as well as White Matter (WM). Segmentation techniques that draw inspiration from nature include Particle Swarm Optimization (PSO) and Genetic Algorithm. Recent studies show that DL frameworks like Convolutional Neural Networks (CNN), Mask- Recur rent Neural Networks, and UNET outperform conventional methods in segmentation.

- **Feature extraction:**

The extracting features, properties of brain MR scans such as shape, structure, wavelet, and Gabor are retrieved. The Gray-Level Co-occurrence Matrix (GLCM) is commonly studied. A second-order statistical method is used to evaluate textural features like energy, correlation, and intensity. Wavelet data is derived using the Discrete Wavelet Transform (DWT). The approximation coefficients are obtained and it is applied to an original image, and then the feature vector is selected. Both automatic features produced by DL techniques like Convolutional Neural Networks, Res Net, Capsule Networks, and handwritten features have shown success. To decrease the number of features, PCA and Genetic Algorithms are utilized.

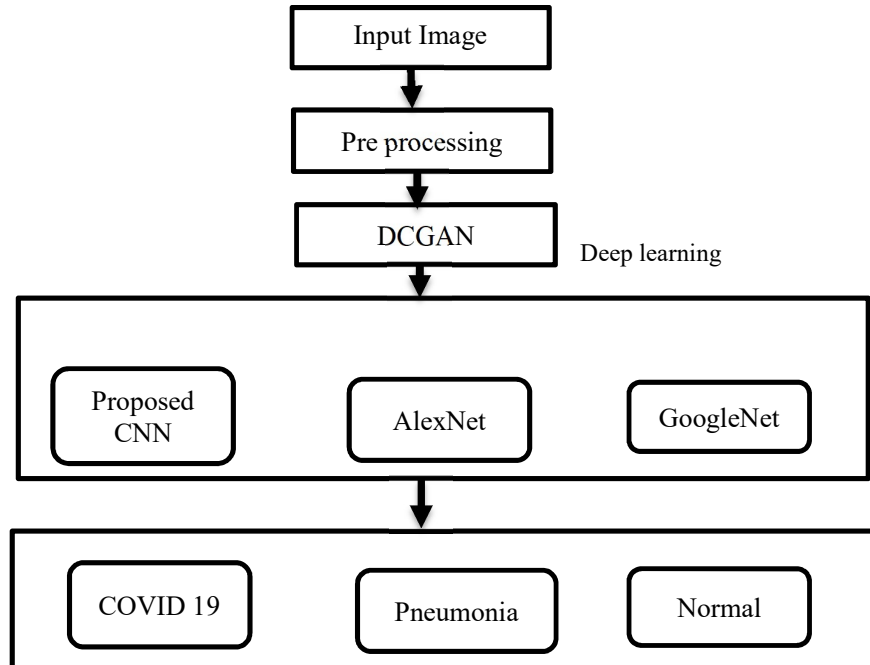
Solution: Benign and malignant tumors are the most prevalent forms of brain tumors. The three types of malignant tumors include hypothalamic, gliomas, and malignant tumors methodologies. In this section, we will go through various challenging datasets that are both significant and crucial. The BRATS datasets are considered to be the most difficult MRI datasets.

- **Tumor classification approaches:**

The input data is sorted using classification techniques into a variety of separate classes., after which training and validation are carried out using both known and unknown instances. The classification of tumors into relevant classifications is a widespread application of machine learning, tumor as well as non-tumor, and malignant and benign tumors. Super vised methods include KNN, support vector machine, nearest subspace classification model, and representation classification model.

Solution: Deep learning (DL) models, as opposed to shallow Machine Learning (ML) techniques, are founded on the principles of learning data representations as well as learning hierarchical features. Deep learning techniques are used to categorize brain tumors, and these techniques find the descriptive data that most properly describes the many forms of brain tumors. The classification of brain tumors shifts away from being driven by manually created characteristics and toward being driven by data due to the nature of deep learning. In the domain of deep learning technics, a convolutional neural network is one of the most popularly utilized ones for the categorization of brain tumor

1. Proposed Block Diagram



Flow chat of proposed DCGAN-CNN model

VggNet Deeplearning

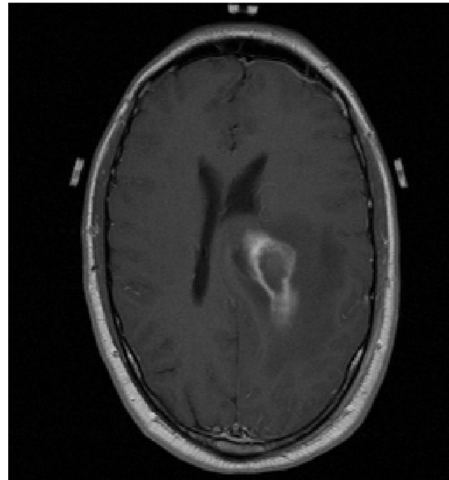
Caps VggNet is a deep learning model that combines the Capsule Network with the VGGNet architecture to improve the accuracy of image classification tasks. Compared to traditional deep learning approaches, Caps VggNet offers several advantages in terms of time complexity and computational efficiency. In this study, we compare Caps VggNet to other deep learning models. Caps VggNet achieved comparable or higher accuracy in image classification tasks, requiring significantly less training and processing time. This improvement in time complexity is due to several factors, including the use of a dynamic routing algorithm and transfer learning techniques. By leveraging pre-trained weights and selecting only the relevant features of an image, Caps VggNet can reduce the number of calculations required, thereby reducing the time complexity of the process. Moreover, the empirical findings illustrate that the network introduced in this research article exhibits superior accuracy in recognition and improved generalization capabilities during the segmentation process, enabling it to perform image segmentation with heightened precision. Also, the algorithm described in this paper necessitates minimal computational operations, resulting in shorter detection times and the potential for enhanced training performance.

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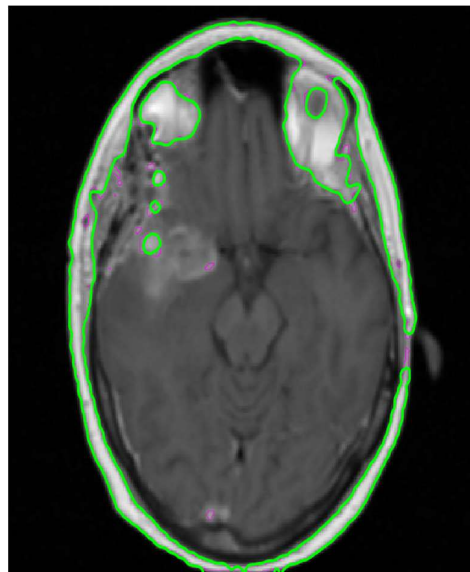
This describes the execution of the proposed system in the detection of various diseases using CNN. The entire architecture depicts how the system deals with the recognition and detection of the test image, and below we explain the process of execution. The purpose of this research is to combine feature selection approaches with machine learning to identify pre-illnesses. For the early diagnosis of early diseases in MRI, CT scan, and X-ray images, this system makes use of deep learning techniques and image processing technology.

III. SIMULATION OUTPUT:

INPUT



OUTPUT



Deep learning employs a variety of artificial neural networks, including CNN, ANN, RNN, and others. The image is sent into CNN, which extracts the most important characteristics as distinct layers. The key benefit of the convolutional neural network is that it lowers the amount of work required by humans to extract

- ❖ The superior performance of CNNs is due to the fact that these networks capture the fundamental features of pictures.
- ❖ This important property of CNN gives the confidence to apply it in the suggested dataset analysis.

RESULT AND DISCUSSION:

The entire architecture depicts how the system deals with the recognition and detection of the test image, and below we explain the process of execution. The purpose of this research is to combine feature selection approaches with machine learning to identify pre-illnesses. For the early diagnosis of early diseases in MRI, CT scan, and X-ray images, this system makes use of deep learning techniques and image processing technology. To make feature extraction more efficient, the dataset including defective images from several categories was pre-processed and segmented.

IV. CONCLUSION:

This section provides a summary of commonly used MRI datasets. Although several ML and deep learning methods are used for classification, CNN has shown to be quite accurate. CNN is often used to categorize brain tumors into two types: normal and pathological. The development of an autonomous brain tumor detection system must consider reliability, accuracy, and calculation time. This review examines current methodologies and can be utilized in the future to build effective diagnostic tools for additional brain illnesses that as Alzheimer's disease, Parkinson's disease, dementia, and stroke using various MRI imaging modalities.

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