

e-ISSN: 2320-9801 | p-ISSN: 2320-9798



INTERNATIONAL JOURNAL OF INNOVATIVE RESEARCH

IN COMPUTER & COMMUNICATION ENGINEERING

Volume 9, Issue 4, April 2021



Impact Factor: 7.488

9940 572 462

S 6381 907 438

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| e-ISSN: 2320-9801, p-ISSN: 2320-9798| <u>www.ijircce.com</u> | |Impact Factor: 7.488 |

|| Volume 9, Issue 4, April 2021 ||

| DOI: 10.15680/IJIRCCE.2021.0904118 |

Multi Scale Variable Analysis of Tumor Detection Using MRI Images

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ABSTRACT: Brain tumor is a tissue group that is prepared by a slow addition of irregular cells. It occurs when cells get an abnormal formation in the brain. Recently, it has become one of the main causes of death of many people. The severity of the brain tumor is very high in all types of cancer, so immediate detection and adequate treatment can be saved. The detection of these cells is a difficult problem because of the formation of tumor cells. It is very important to compare brain tumor from MRI treatment. Brain tumor is classified into three types: normal, benign and malignant. In the existing system, we used an automatic segmentation method basedon Convolutional Neural Networks (CNN), exploring small kernels. The use of small kernels allows designing a deeper architecture, besides having a positive effect against overfitting, given the fewer number of weights in the network. We also investigated the use of intensity normalization as a pre-processing step, whichthough not common in CNN-based segmentation methods, provedtogether with data augmentation to be very effective for braintumor segmentation in MRI images. In the proposed work, the neural network is used to classify the phase of malignant, malignant or normal brain tumors. Feature extraction using the Gray Level Co-Occurrence Matrix (GLCM). Image recognition and image compression are performed using the Principal Component Analysis (PCA) method and the dimensionality of the data is also reduced. The automatic classification of brain tumor stages is performed using the Modified probabilistic neural network (MPNN). The segmentation process is performed using the K-means clustering algorithm and also detects the brain tumor spreading region. In the spread region there are numerous defective cells. MPNN is the fastest technique and also offers good classification accuracy.

KEYWORDS: Convolutional Neural Networks (CNN), Gray Level Co-Occurrence Matrix (GLCM), Principal Component Analysis (PCA), Modified probabilistic neural network (MPNN)

I. INTRODUCTION

Brain tumor is an abnormal mass of tissue in which cells grow and multiply uncontrollably seemingly unchecked by the mechanisms that control normal cells. This change detection process uses a novel score function based on Bhattacharya coefficient computed with gray level intensity histograms. The score function admits a very fast search to locate the bounding box. It is very important to compare brain tumor from MRI treatment. Brain tumor is classified into three types: normal, benign and malignant. In the existing system, we propose an automatic segmentation method based on Convolution Neural Networks (CNN), exploring small kernels. The use of small kernels allows designing a deeper architecture, besides having a positive effect against overfitting, given the fewer number of weights in the network. We also investigated the use of intensity normalization as a pre-processing step, which though not common in CNN-based segmentation methods, proved together with data augmentation to be very effective for brain tumor segmentation in MRI images. In the proposed work, the neural network is used to classify the phase of malignant, malignant or normal brain tumors. Feature extraction using the Gray Level Co-Occurrence Matrix (GLCM). Image recognition and image compression are performed using the Principal Component Analysis (PCA) method and the dimensionality of the data is also reduced. The automatic classification of brain tumor stages is performed using the Modified probabilistic neural network (MPNN). The segmentation process is performed using the K-means clustering algorithm and also detects the brain tumor spreading region. In the spread region there are numerous defective cells. MPNN is the fastest technique and also offers good classification accuracy.

K-means clustering algorithm

k-means is one of the simplest unsupervised learning algorithms that solve the well known clustering problem. The procedure follows a simple and easy way to classify a given data set through a certain number of clusters

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|| Volume 9, Issue 4, April 2021 ||

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(assume k clusters) fixed apriori. The main idea is to define k centers, one for each cluster. These centers should be placed in a cunning way because of different location causes different result. So, the better choice is to place them as much as possible far away from each other. The next step is to take each point belonging to a given data set and associate it to the nearest center. When no point is pending, the first step is completed and an early group age is done. At this point we need to re-calculate k new centroids as barycenter of the clusters resulting from the previous step. After we have these k new centroids, a new binding has to be done between the same data set points and the nearest new center. A loop has been generated. As a result of this loop we may notice that the k centers change their location step by step until no more changes are done or in other words centers do not move any more.

OBJECTIVE

• To detect the size and location of brain tumors and edemas from the Magnetic Resonance Images.

II. LITERATURE SURVEY

Automatic segmentation of MR brain images with a convolutional neural network

Automatic segmentation in MR brain images is important for quantitative analysis in large-scale studies with images acquired at all ages. This paper presents a method for the automatic segmentation of MR brain images into a number of tissue classes using a convolutional neural network. To ensure that the method obtains accurate segmentation details as well as spatial consistency, the network uses multiple patch sizes and multiple convolution kernel sizes to acquire multi-scale information about each voxel. The method is not dependent on explicit features, but learns to recognise the information that is important for the classification based on training data. The method requires a single anatomical MR image only. The segmentation method is applied to five different data sets: coronal T -weighted images of preterm infants acquired at 30 weeks postmenstrual age (PMA) and 40 weeks PMA, axial T

2 weighted images of preterm infants acquired at 40 weeks PMA, axial T -weighted images of ageing adults acquired at an average age of 70 years, and T 1 -weighted images of young adults acquired at an average age of 23 years. The method obtained the following average Dice coefficients over all segmented tissue classes for each data set, respectively: 0.87, 0.82, 0.84, 0.86 and 0.91. 1 The results demonstrate that the method obtains accurate segmentations in all five sets, and hence demonstrates its robustness to differences in age and acquisition protocol.

A patch-based approach for the segmentation of pathologies: Application to glioma labelling

Abstract—In this paper, we describe a novel and generic approach to address fully-automatic segmentation of brain tumors by using multi-atlas patch-based voting techniques. In addition to avoiding the local search window assumption, the conventional patch-based framework is enhanced through several simple procedures: an improvement of the training dataset in terms of both label purity and intensity statistics, augmented features to implicitly guide the nearest-neighbor-search, multiscale patches, invariance to cube isometries, stratification of the votes with respect to cases and labels. A probabilistic model automatically delineates regions of interest enclosing high-probability tumor volumes, which allows the algorithm to achieve highly competitive running time despite minimal processing power and resources. This method was evaluated on Multimodal Brain Tumor Image Segmentation challenge datasets. State-of-the-art results are achieved, with a limited learning stage thus restricting the risk of overfit. Moreover, segmentation smoothness does not involve any post-processing.

III. PROPOSED METHODS

In the proposed work, the neural network is used to classify the phase of malignant, malignant or normal brain tumors. Feature extraction using the Gray Level Co-Occurrence Matrix (GLCM). Image recognition and image compression are performed using the Principal Component Analysis (PCA) method and the dimensionality of the data is also reduced. The automatic classification of brain tumor stages is performed using the Modified probabilistic neural network (MPNN). The segmentation process is performed using the K-means clustering algorithm and also detects the brain tumor spreading region. In the spread region there are numerous defective cells. MPNN is the fastest technique and also offers good classification accuracy.

ADVANTAGES

- The PNN classification is much faster than multilayer perceptron networks.
- It can be more accurate than multilayer perceptron networks.
- They are relatively insensitive to outliers.
- PNN networks generate accurate predicted target probability scores.

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• PNNs approach is anBayes optimal classification.

IV. RESULT AND DISCUSSION

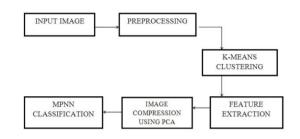


Fig1.Data Flow Diagram

Image Acquisition

All MRI images are composed from the internet, Hospitals, Radiologists. MRI scans are saved in database in JPEG image formats as images. These images are presented in gray level images.

Pre-Processing Stage

Normally, composed images have some corruptions and also some noise as a result of random difference, intensity and lighting or have some deprived contrast. So it can't be used frankly. The median filter is a non linear filtering technique. It is used to remove the noise from MRI image. Pixel intensity values are transformed to achieved certain image features, perfection to improve contrast and smoothing to eliminate noises and also for template to detects known patterns.

Image Segmentation:

It is the process of dividing (set of pixels) to make simpler and modify the illustration of the image information meaning full and easier to understand.

1. Clustering: It is the generally significant unsupervised learning problem. So it is only about a collection of a structure in a unlabelled data. A cluster is a set of objects which are "similar" linking them and different to the object belonging to others.

2. k-Means Clustering: Analysis of cluster, this technology is very important data mining, in this method is very useful for analyzing and to find the useful information frequent data. Cluster algorithm groups the data as the clusters into classes, so the objects have more similarity to compare each other dissimilarities used to base on the attribute the values to describe the objects and also distance between them is measured.

Feature Extraction

The statistical method of finding the textures to consider the spatial connection of the pixels is Gray Level Co Occurrence Matrix (GLCM). The GLCM functions to distinguish surface of an image by evaluating the pixel in pair with specific values and specified spatial relationship to present in image forms of GLCM. From this matrix, we can measure the extraction of statistical. Because of its elevated correctness and a smaller amount of work out time, this method is most widely used and more generally applied. Gray level co-occurrence matrix GLCM contains the details with reference to position of pixels having related gray level values.

Image recognition and Image compression using PCA

In this paper, image recognition and image compression are achieved by mathematical technique of Principle Component Analysis (PCA). This method is used to decrease the huge size of the data. The most important reason of MRI image detection scheme is to find more similarities involving training MRI images and check MRI images. In the training segment characteristic vectors are extracted for all images in the training set. Let $\Omega 1$ be a training image of image 1 which has a P * Q (P rows, Q columns) pixel resolution. So as to obtained characteristics of $\Omega 1$, the initial step is to change the image into a pixel vector $\Phi 1$ by linking all of the P rows into a particular vector. P*Q will be the dimensionality of the vector $\Phi 1$.the vector $\Omega 1$ transformed to $\omega 1$ vector by using PCA algorithm which has a dimensionality d (d< < P * Q). The vector ωi of a each Ωi are considered and stored. In the testing stage ωj of check image Ωj can be considered matching as testing stage.

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by using Euclidean distance. The output of image recognizer for the major part related to ωi. The MRI image j has perfectly recognized if i=j, if not j has misclassified.



Fig.2 final output

Modified Probabilistic neural network

The Modified probabilistic neural network was introduced by Donald Specht. It is based on the theory of Bayesian categorization and the judgment of Probability density function. It permits for cost function to characterize the truth that it may be worst to misclassify the vector that is actually a member of class m then it classified a vector that belongs to class n. At this phase examine the MRI image is analyzed with the training MRI image and provides result as test image which is related to training MRI images. It is used for Classification purpose. For the classification using bayes rule.

PmCm fm (x) > PnCn fn (x) Where, Pm -Priori probability of occurrence of pattern in class m.

Cm -cost associated with classifying vectors

f m (x) -probability density function of class

V. CONCLUSION

The intent of this project is to develop a computer-aided disease identification diagnostic system that can perfectly classify brain tumor as a normal stage or abnormal stage in MR images of the brain. Conveniently, the system has been developed based on Kmeans segmentation, feature extraction based on GLCM features in our proposed technique, feature selection and classification method based on the support vector machine and the modified probabilistic neural network. We evaluated the proposed method in the BRATS 2013 and 2015 databases. In terms of the 2013 database, we ranked first on the online evaluation platform. At the same time, the first position in the DSC metric was obtained in the complete, core and extension regions in the challenge record. Compared to the best generative model we were able to reduce the computation time tenfold. In terms of the 2015 database, we reached second place among the twelve participants in the on-site challenge. We therefore argue that the components that have been studied can potentially be incorporated into MPNN-based procedures and that our method as a whole is a strong candidate for brain tumor segmentation using MRI images.

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