

International Journal of Innovative Research in Computer and Communication Engineering

(A Monthly, Peer Reviewed, Refereed, Scholarly Indexed, Open Access Journal)





Deep Learning-based Pneumonia Detection

Mrs. Thara K L¹, Nithish A S², Rithish K R³, Shreyas G K⁴, Varun S⁵

Assistant Professor, Department of Information Science & Engineering, Jawaharlal Nehru New College of Engineering, Shivamogga, India¹

Student, Department of Information Science & Engineering, Jawaharlal Nehru New College of Engineering, Shivamogga, India^{2,3,4,5}

ABSTRACT: Pneumonia, a contagious complaint caused by a bacterium in the lungs' alveoli, is constantly the result of pollution. A lung infection causes pus to make up in the affected towel. Professionals conduct fleshly examinations and diagnose their cases using a chest X-ray, ultrasound, or lung vivisection to determine if they've certain conditions. Misdiagnosis, incorrect treatment, and failure to fete the complaint will affect in a case's incapability to lead a normal life. Deep literacy's advancement helps specialists make better opinions when diagnosing cases with certain conditions. The exploration provides a flexible and effective deep literacy fashion that uses the CNN model to prognosticate and descry a case who's unaffected. Using a chest X-ray snap, the study applies a flexible and effective deep literacy fashion of using the CNN model in prognosticating and detecting a patient innocent and affected by the illness. To demonstrate the overall performance of the CNN model being trained, the experimenters used an amassed dataset of 20,000 photos and a 224x224 snap decision with 32 batch lengths. At some point throughout the total performance training, the trained interpretation produced a 95 percent delicacy charge. The exploration study may descry and prognosticate COVID- 19, bacterial, and viral pneumonia ails grounded solely on chest X-ray photos, according to the results of the testing.

KEY WORDS: Pneumonia Discovery, Adaptive Deep literacy, Deep Convolutional Neural Network Architecture

I. INTRODUCTION

Pathogenic bacteria, physical and chemical causes, immunologic damage, and multitudinous medicines all beget inflammation of the lung parenchyma. Study, pulmonary conditions similar as pneumonia were the alternate leading cause of mortality in 2013. Pneumococcal illness has inflamed 35 percent of patients in European hospitals and 27.3 percent of patients globally. According to a recent data from John Hopkins Bloomberg College of Public Health, India had the highest rate of pneumonia mortality among children under the age of five in 2015, with almost 2.97 lac pneumonia combined diarrhea deaths among children under the age of five. Furthermore, pneumonia's fatality rate is inversely linked to its age, and pneumonia's superiority increases significantly with age, particularly in people over 65. The high number of infant mortality due to pneumonia has prompted scientists around the world to suggest more effective and immediate ways to combat the disease. Greater and further measures are advanced as the era progresses, with radiology-based treatments being the most common and effective. Diagnostic radiological techniques for pulmonary disease include chest X-ray imaging, computed tomography (CT), and magnetic resonance imaging (MRI), with chest X-ray scanning being the most efficient and cost-effective because it is far more accessible and portable in hospitals, and it exposes sick people to lower doses of radioactivity. However, even for multiple skilled and experienced medical physicians, analyzing pneumonia using X-ray snapshots remains a difficult task because X-ray images contain comparable area statistics for unique ailments, such as lung cancer. As a result, diagnosing pneumonia with conventional procedures is time-consuming and energy-intensive, and it is impossible to diagnose whether or not a patient has pneumonia in a uniform manner. As a consequence, in this study, we propose using a Convolutional Neural Network to autonomously diagnosis pneumonia using X-ray pictures, with an accuracy of 96.07 percent and an AUC of 0.9911. The remaining sections of this work are organized as follows. The literature's perspectives on medical picture processing processes are discussed in the second section. In recent times, section three has described a rapid way of Convolutional Neural Networks (CNN) architecture.



International Journal of Innovative Research in Computer and Communication Engineering (IJIRCCE)

(A Monthly, Peer Reviewed, Refereed, Scholarly Indexed, Open Access Journal)

II. LITERATURE SURVEY

[1] There are various challenges in developing a long term version of COVID-19 detection from X-ray images. To begin with, there are just a limited number of photos available. Because the epidemic has only been spreading for a few months, not enough datasets have been collected and released for scientists to use. Second, there may be a compelling need for scientists to create a smart device that can quickly identify and analyses viral infections utilizing breast X-ray images, which can convey the seriousness of the problem to the human body. Following an assessment of existing technology and the difficult conditions we face; it was found that method transfer is viable and reasonable for this research issue. This method involves using images of pneumonia to train deep neural networks on illnesses in one or both lungs, which can be caused by bacteria, infections, or fungus. The condition causes irritation in the lungs' alveoli, which are tiny air sacs. Breathing becomes difficult as the respiratory system fills with fluids or pus. To identify the type of virus, the process uses transfer learning on well-studied deep learning methods, validates the designs on a wide range of data sets, and then transfers the models and insights learned during training and validation to a new data set in a similar region, in this case, a new infectious fast-growing illness The coronavirus, commonly known as COVID-19, is a virus of the coronavirus family. The proposed method tackles a difficult problem in deep learning: how to develop a credible model from a small data set that hasn't been extensively analysed and has undiscovered properties.

[2] Deep CNNs do actually perform better when a large dataset is used rather than a smaller one. While there is a large number of infected COVID-19 individuals worldwide, the number of publicly available chest X-ray photographs online is small and distributed. As a result, the authors of this study defined a rather large dataset of COVID-19 infected chest X-ray photos, despite the fact that normal and pneumonia photographs are readily available and used in this study.

[3] The observations, which use a chest X-ray image, leverage flexible and sophisticated deep learning approaches, including the use of six CNN models to forecast and identify whether the patient is unaffected or affected by the ailment. Google Net, LeNet, VGG16, AlexNet, StridedNet, and ResNet-50 models with a dataset of 28,000 images and a 224x224 decision with 32 and sixty-four batch sizes are used to monitor the accuracy of each version being learnt. The study additionally employs Adam as an optimizer, giving all of the models a 500-epoch learning rate and an adjusted 1e-four learning rate. Both Google Net and LeNet models received a 98 percent accuracy rate during development, VGGNet-16 received a 97 percent accuracy rate, AlexNet and StridedNet models received a 96 percent average accuracy rate and the ResNet-50 model received an 80% accuracy rate. For total performance training, Google Net and LeNet fashions have the highest average accuracy. The six models identified were possible to perceive and predict a pneumonia illness, which included a normal chest X-ray.

[4] The authors of this paper classify the three types of X-rays. Image writers employed the ensemble technique at some point in the prediction process, and each image is sent through the type layer, where they verify whether the image is COVID-19, pneumonia, or ordinary.

[5] In the first phase of statistical preprocessing, the X-rays dataset is divided into training and test subsets. At this level, character X-ray images are also normalized. Data augmentation of training photos was finished for a strong version development. The age of a version that divides x-rays into two groups is the second degree (consolidation and non-consolidation). The accuracy of this model was demonstrated by the use of an okay-fold cross-validation approach (where okay is the number of folds). The final stage is the implementation of the explainable AI technique that we decided to improve our Machine's comprehensibility. The heatmap has arrived. To measure the quality of our Machine, we utilize two unique methods: 1) creating the heatmap using the simplest version, and 2) generating the heatmap using an ensemble of styles with the same structure but educated with unique record folds. The second method allows us to calculate an uncertainty level for each pixel (given by the same old deviation), allowing us to analyses the heatmap's robustness.

III. SCOPE AND METHODOLOGY

Scope

the scope of this project encompasses the development of a robust system for diagnosing pneumonia using chest X-ray images. The process begins with the acquisition of a comprehensive dataset from open-source platforms like Kaggle, which provides a diverse collection of X-ray images. These images will be resized to a standardized format of 224x224



International Journal of Innovative Research in Computer and Communication Engineering (IJIRCCE)

(A Monthly, Peer Reviewed, Refereed, Scholarly Indexed, Open Access Journal)

pixels during preprocessing to balance computational efficiency with the retention of critical image details for effective model training. The project aims to build a web or mobile-based application using tools like Google Colab or Jupyter Notebook for model training and development. The application will serve as an interface where users can upload X-ray images, and the system will predict the presence or absence of pneumonia. The classification process leverages advanced techniques such as filtering, pooling, and heatmap-based analysis to ensure accurate identification and visualization of affected areas. This comprehensive pipeline, from image acquisition to classification, highlights the integration of data science and machine learning in addressing healthcare challenges, making pneumonia diagnosis accessible and efficient.

Methodology

ResNet-50 is a deep convolutional neural network featuring 50 layers designed to address the vanishing gradient problem through residual learning. It uses skip connections to efficiently propagate gradients, enabling the training of very deep networks. The architecture is highly effective for tasks such as image classification and feature extraction, balancing depth with computational efficiency

IV. SYSTEM ARCHITECTURE

The system architecture for pneumonia detection using Convolutional Neural Networks (CNN) begins with acquiring chest X-ray images, typically sourced from open platforms like Kaggle. These images undergo preprocessing, including resizing to 224x224 pixels and normalization, to ensure consistent input quality. The CNN architecture extracts feature through multiple convolutional layers with filters, ReLU activation functions, and pooling layers to identify key patterns. Fully connected dense layers perform classification, followed by a binary output layer predicting whether the X-ray indicates pneumonia or not. Heatmaps highlight critical regions, aiding visualization. The model is trained and deployed using tools like Google Colab or Jupyter Notebook

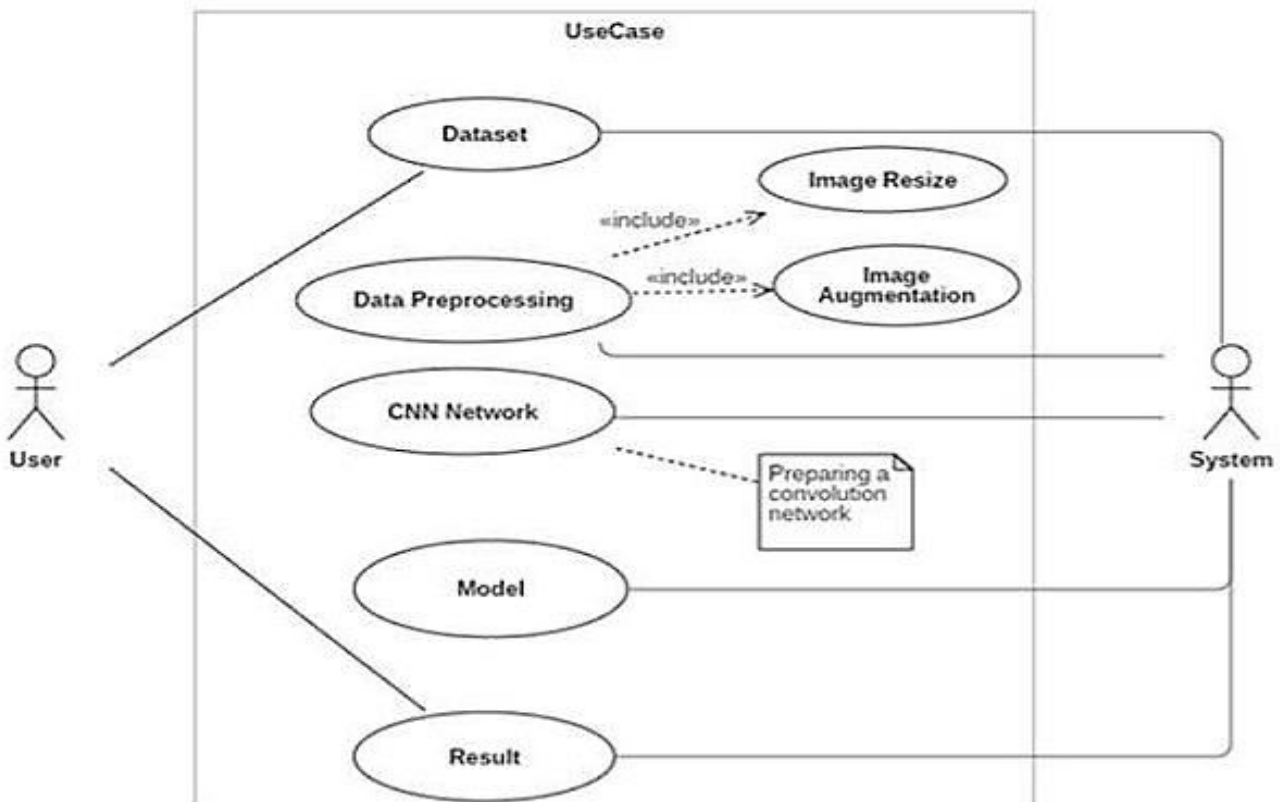


Figure 4.1:Use Case Diagram



International Journal of Innovative Research in Computer and Communication Engineering (IJIRCCE)

(A Monthly, Peer Reviewed, Refereed, Scholarly Indexed, Open Access Journal)

V. CONCLUSION

This paper presents an automated diagnosis of pneumonia in X-ray scans using deep CNN. The research was conducted utilizing the X-Rayscan dataset, which contains 5863 scans. Experiments yielded a variety of scores, including accuracy, recall, precision, and AU Cranking, proving the efficiency of our network model. The proposed framework was successful in reaching a 91 percent categorization accuracy. To improve the model's efficiency, hyper-parameter optimizations were examined, and multiple optimization techniques, such as stochastic gradient descent, Adagrad, and Adam optimizer, were used. The customizedVGG16 model's effectiveness in detecting pneumonia reveals that the model surpasses other optimizers when compared to Adam. In the future, this research will be broadened to include the detection and differentiation of multi-class Xray images. The efficiency could also be improved by applying more complex feature extraction approaches based on many recently established deep learning models for biomedical picture segmentation.

REFERENCES

- [1] Vandecia Fernandes et al., "Bayesian convolutional neural network estimation for pediatric pneumonia detection and diagnosis", Computer Methods and Programs in Biomedicine, Elsevier, 2021
- [2] Hongen Lu et al., "Transfer Learning from Pneumonia to COVID-19", Asia-Pacific on Computer Science and Data Engineering (CSDE), 2020 IEEE
- [3] Sammy V. Militante et al., "Pneumonia and COVID-19 Detection using Convolutional Neural Networks", 2020 the third International on Vocational Education and Electrical Engineering (ICVEE), IEEE, 2021
- [4] Nanette V. Dionisio et al., "Pneumonia Detection through Adaptive Deep Learning Models of Convolutional Neural Networks", 2020 11th IEEE Control and System Graduate Research Colloquium (ICSGRC 2020), 8 August 2020
- [5] Md. Jahid Hasan et al., "Deep Learning-based Detection and Segmentation of COVID-19 & Pneumonia on Chest X-ray Image", 2021 International Information and Communication Technology for Sustainable Development (ICICT4SD), 27-28 February 2021



INTERNATIONAL
STANDARD
SERIAL
NUMBER
INDIA



INTERNATIONAL JOURNAL OF INNOVATIVE RESEARCH

IN COMPUTER & COMMUNICATION ENGINEERING

 9940 572 462  6381 907 438  ijircce@gmail.com



www.ijircce.com

Scan to save the contact details