



An Advanced Multi-Class Brain Tumor Classification System

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Abstract

The medical field is currently experiencing a revolutionary phase propelled by Artificial Intelligence (AI). Progress in digital data collection, machine learning algorithms, and robust computing infrastructure has broadened the scope of AI applications into domains traditionally handled exclusively by human experts. Brain tumors, characterized by abnormal tissue growth from uncontrolled cell division, present significant health risks due to their potential malignancy. These tumors can invade and damage healthy brain tissue, posing life-threatening consequences. This project explores recent advancements in AI technology and their applications in biomedical sciences. We identify challenges that must be overcome to advance medical AI systems and examine the economic, legal, and social implications of integrating AI into healthcare.

Addressing this urgent need, we propose an innovative approach for precise brain tumor detection and classification. Our project introduces a user-friendly interface designed to facilitate tumor detection, classification, and visualization of severity. This system harnesses Convolutional Neural Networks (CNNs) to achieve robust tumor classification and integrates state-of-the-art machine learning algorithms to enhance performance.

Keywords: CNN, Deep Learning, ResNet-50, OpenCV, TensorFlow.

1. Introduction

Artificial Intelligence (AI) has made substantial strides, particularly in the realm of Computer Vision, empowering machines to interpret visual data for tasks such as image recognition, analysis, and classification. These capabilities are revolutionizing healthcare by facilitating diagnoses, treatment planning, and even prognostication of future health conditions. AI's impact spans from basic applications like diabetic retinopathy and breast cancer detection using machine learning models to complex tasks such as detecting COVID-19 and brain tumors through advanced segmentation techniques. This project seizes upon this potential by proposing an intuitive online platform designed for brain tumor detection. The platform employs diverse machine learning methodologies, including deep learning, with a focus on accessibility for users of varying expertise levels. Its user-friendly interface ensures straightforward usability, enabling individuals to harness the benefits of this AI-powered tool effectively.

1.1 Motivation:

Timely and accurate diagnosis of brain tumors is crucial for enhancing patient outcomes. Brain tumors rank among the leading causes of mortality and disability globally, underscoring the importance of prompt



intervention. Traditional diagnostic methods, such as biopsies, can be invasive and time-intensive. Intelligent multi-class brain tumor classification systems offer a promising alternative. These systems utilize machine learning algorithms, particularly deep learning techniques like Convolutional Neural Networks (CNNs), to analyze medical imaging modalities such as MRIs and CT scans. This approach enables:

- Non-invasive and expedient diagnosis: The system can swiftly and efficiently analyze scans, potentially shortening diagnostic timelines and minimizing patient discomfort.
- Enhanced diagnostic precision: By training on extensive datasets of medical images, machine learning algorithms can achieve greater accuracy than traditional methods, leading to earlier detection of brain tumors and more effective treatment strategies.
- Multi-class classification: The system can differentiate between various types of brain tumors, facilitating tailored treatment plans.

This project specifically addresses the challenge of multi-class brain tumor classification, crucial for optimizing patient care since different tumor types necessitate distinct treatment protocols. Developing a system capable of accurately distinguishing between these classes promises significant advancements in healthcare.

1.2 Problem Statement:

Inaccuracies and delays in brain tumor diagnosis pose significant challenges. Brain tumors are a leading cause of mortality and morbidity worldwide, emphasizing the critical need for precise and timely diagnoses to improve patient outcomes. Traditional diagnostic approaches, relying on visual inspection of medical images by radiologists, are susceptible to human error and subjectivity. Moreover, these methods can be time-consuming, resulting in delays in initiating appropriate treatment.

2. System Analysis

2.1 Existing System:

Several existing methods akin to the proposed system vary in their output generation and dependency on inputs. Various approaches address brain tumor analysis using medical imaging data. For instance, BRATS is an annual competition promoting advancements in this field, while Deep Medic represents a deep learning system specializing in tumor segmentation and classification. Radiomics-based systems utilize machine learning to classify tumors based on extracted features such as texture and intensity. These systems aim to capture subtle imaging characteristics that may elude human perception, thereby enhancing tumor classification accuracy.

2.2 Proposed System:

Our proposed system employs a ResNet-50 architecture for brain tumor classification. By leveraging transfer learning from a pre-trained model, our goal is to achieve high accuracy. The system features a user-friendly interface for image input and classification output. Trained on a dataset comprising 3064 T1-weighted and contrast-enhanced brain MRIs, the system classifies tumors based on their size and location. ResNet-50 offers



several advantages for this task. Its deep convolutional architecture is renowned for exceptional performance in image classification, potentially yielding high accuracy in brain tumor detection. The model automatically extracts pertinent features from images, facilitating precise classification. Moreover, transfer learning from a vast image dataset like ImageNet establishes a robust foundation for training on medical data, leading to faster convergence and potentially higher accuracy even with limited labeled medical images. Additionally, ResNet-50 incorporates mechanisms to mitigate overfitting, enhancing its applicability to unseen brain tumor images and bolstering reliability in clinical settings. The scalability of ResNet-50 ensures performance across varying dataset sizes and complexities, adapting to diverse data sources. While deep learning models may lack transparency, techniques such as gradient-based visualization can elucidate the features learned by ResNet-50. This interpretability fosters trust and acceptance among medical professionals by providing insights into the classification rationale. Finally, despite its complexity, ResNet-50 can be optimized for efficient inference on modern hardware, enabling real-time or near-real-time brain tumor classification. This efficiency is crucial for seamless integration into clinical workflows without introducing significant delays.

3. Implementation

Steps for Implementing a Multi-Class Brain Tumor Classification System Using ResNet-50:

3.1. Data Acquisition and Preprocessing:

-Data Collection:

- Collect a labeled dataset of brain MRI scans categorized into different tumor types (e.g., glioma, meningioma, pituitary tumor).

- Consider utilizing public datasets like Kaggle or BRATS (Brain Tumor Segmentation) leaderboard to ensure diversity in tumor size, location, and modality (e.g., T1-weighted, contrast-enhanced).

- Preprocessing:

- Standardize the images by resizing them to a consistent size.

- Normalize pixel intensities to a uniform scale (e.g., 0 to 1).

- Apply data augmentation techniques such as random cropping, flipping, and rotations to enhance dataset variability and improve model generalization.

3.2. Model Development with ResNet-50:

- ResNet-50 Architecture:

- Utilize a pre-trained ResNet-50 model known for its effectiveness in image classification tasks.

- Incorporate pre-trained weights from datasets like ImageNet to leverage learned generic image features.

- Transfer Learning:

- Implement transfer learning by freezing pre-trained ResNet-50 layers and fine-tuning specific layers for brain tumor classification.

- This approach accelerates training time and enhances model performance by leveraging pre-



existing features.

- Customization for Multi-Class Classification:
 - Replace ResNet-50's final fully-connected layer with a new layer tailored for multi-class tumor classification.
 - Use a softmax activation function in the final layer to output class probabilities (e.g., glioma, meningioma, pituitary tumor).

3.3. Model Training and Evaluation:

- Training:
 - Divide preprocessed data into training, validation, and test sets.
 - Train the model using an optimizer like Adam and a categorical crossentropy loss function suitable for multi-class classification.
 - Monitor training metrics such as loss and accuracy to prevent overfitting.
 - Apply techniques like early stopping or learning rate decay to optimize training stability.
- Evaluation:
 - Evaluate model performance on the test set using metrics such as accuracy, precision, recall, and F1-score for each tumor class.
 - Analyze the confusion matrix to identify and address potential misclassifications.

3.4. Deployment and User Interface:

- Deployment:
 - Host the system using VS CODE live server to facilitate user interaction.
 - Develop a dynamic website using JavaScript and HTML where users can upload brain MRI images.
 - Implement functionality where users can predict tumor types (e.g., Glioma, Meningioma, Pituitary, No-tumor) by clicking a prediction button.
 - Provide additional information about detected tumors to users based on the prediction results.

ResNet-50 Results:

Display findings including accuracy, precision, and other relevant metrics achieved by ResNet-50.

4. System Configuration

Software Requirements:

- Operating System: Windows 7 or higher, macOS



- Web Browsers: Chrome, Brave
- Integrated Development Environment (IDE): VS Code
- Libraries Used:
 - OpenCV
 - Flask
 - TensorFlow
 - Anaconda (for various Python libraries)
 - Keras

Hardware Requirements:

- Minimum Requirements:
 - RAM: 4GB
 - Hard Disk: 50GB
 - Processor: Intel Core i5 or equivalent for Windows, Mac counterpart

5. Methodology

ResNet-50 is a convolutional neural network architecture developed by Microsoft Research in 2015, renowned for its efficacy in image recognition tasks such as object detection and classification, surpassing traditional models. Its innovation lies in utilizing residual blocks to address the challenge of vanishing gradients in deep neural networks, enabling effective learning across multiple layers. These blocks incorporate skip connections that allow information to bypass layers, facilitating more efficient training by focusing on residual learning.

The architecture of ResNet-50 consists of 50 layers, structured with residual connections between each pair of convolutional layers. This design enables the network to learn features at varying levels of abstraction, enhancing its ability to recognize complex patterns in images. Batch normalization layers are employed after each convolution to standardize inputs and accelerate network convergence by reducing internal covariate shifts.

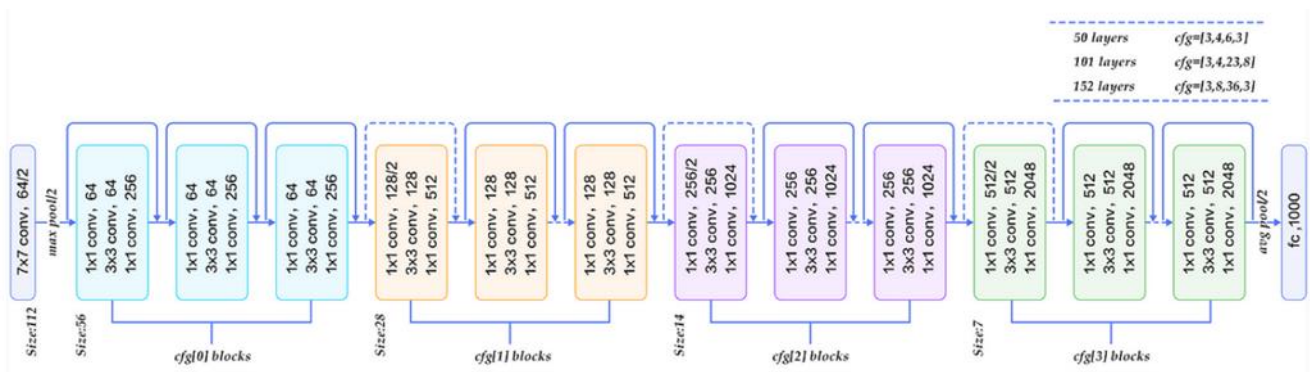


Fig. 1. ResNet-50 Architecture

Detailed Architecture of ResNet-50:

- Input: 224x224x3 (RGB image)
- Initial Convolutional Layer: 64 filters, kernel size 7x7, stride 2x2, followed by batch normalization and ReLU activation.
- Max Pooling Layer: Kernel size 3x3, stride 2x2.



- Residual Blocks:

- Block 1: Three convolutional layers with 64 filters (1x1, 3x3, 1x1), followed by batch normalization and ReLU activation. Output is added to input via a residual connection. This block is repeated three times.

- Block 2: Three convolutional layers with 128 filters (1x1, 3x3, 1x1), followed by batch normalization and ReLU activation. Output is added to input via a residual connection. This block is repeated four times.

- Block 3: Three convolutional layers with 256 filters (1x1, 3x3, 1x1), followed by batch normalization and ReLU activation. Output is added to input via a residual connection. This block is repeated six times.

-Block 4: Three convolutional layers with 512 filters (1x1, 3x3, 1x1), followed by batch normalization and ReLU activation. Output is added to input via a residual connection. This block is repeated three times.

- Global Average Pooling Layer: Computes the average of each feature map.

- Fully Connected Layer: 1000 nodes for ImageNet classes.

- SoftMax Activation Function: Outputs final probabilities.

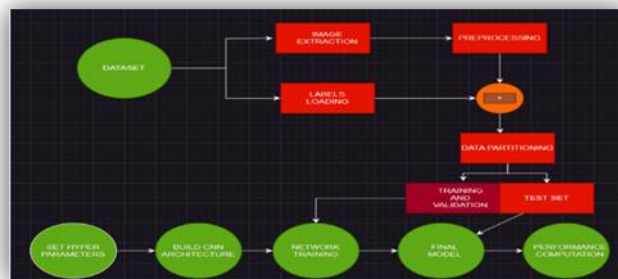


Fig. 2. Architecture Diagram of Intelligent Multi-Class Brain Tumor Classification System

The Intelligent Multi-Class Brain Tumor Detection system depicted in Figure 4 is composed of several stages. Initially, the dataset is downloaded, images are extracted, labeled, and preprocessed. The data is then split into training and testing sets. Following this, the CNN architecture, including hyperparameters, is defined and trained on the training set. Finally, the model's accuracy is evaluated using the testing set to assess its performance.

6. Conclusion

In our research, we assessed the efficacy of four different Convolutional Neural Network (CNN) architectures in the classification of brain tumors from MRI scans. The CNNs were trained to distinguish among Glioma, Meningioma, Pituitary tumors, and healthy scans. We used standard performance metrics including accuracy, precision, recall, and F1-score to evaluate the models. Figure 1 (presumably a visual representation like a chart or graph) illustrates a comparative analysis of these metrics. According to our findings, our custom-designed CNN model, referred to as the Brute Force Custom Model, demonstrated the highest effectiveness. This outcome suggests that the unique architecture of our model, optimized hyperparameters, or specific features tailored to the task contributed to its superior accuracy in classifying brain tumors.

References

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5. Sharif et al. (2021) developed a decision support system for multimodal brain tumor classification using deep learning, integrating multiple data sources for comprehensive analysis.
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