



Intelligent System for Multi-Class Brain Tumor Classification

Kajal Kapur¹, Prof. Mangesh More²

¹Undergraduate Student, Department of Computer Science and Engineering, Deccan College of Engineering and Technology, Hyderabad

²Senior Assistant Professor, Department of Computer Science and Engineering, Deccan College of Engineering and Technology, Hyderabad

Abstract

The field of medicine is undergoing a major transformation driven by Artificial Intelligence (AI). With advancements in digital data collection, machine learning techniques, and powerful computing capabilities, AI is now being applied to areas once dominated by human expertise. Brain tumors, which involve abnormal tissue growth from uncontrolled cell proliferation, present a significant health risk due to their potential malignancy. These tumors can invade and damage healthy brain tissue, resulting in severe consequences. This project explores recent advancements in AI technologies and their applications in the biomedical sector. We address the challenges that must be overcome to advance medical AI systems and examine the economic, legal, and social implications of integrating AI into healthcare.

In response to these needs, we propose a novel approach for accurate brain tumor detection and classification. Our project features an intuitive interface that supports tumor detection, classification, and severity assessment. It utilizes Convolutional Neural Networks (CNNs) for reliable tumor classification and incorporates state-of-the-art machine learning algorithms to enhance performance.

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

Introduction

Artificial Intelligence (AI) has made remarkable strides, especially in the realm of Computer Vision. This area enables machines to interpret visual data, facilitating tasks such as image recognition, analysis, and classification. These advancements are revolutionizing healthcare by enhancing diagnostics, treatment planning, and predicting health outcomes. AI's influence spans from straightforward applications like detecting diabetic retinopathy or breast cancer using machine learning models, to more sophisticated tasks such as COVID-19 and brain tumor detection through advanced segmentation techniques. Our project harnesses this potential by proposing an accessible online platform for brain tumor detection. This platform integrates various machine learning approaches, including deep learning, and is designed to be user-friendly for individuals with different levels of expertise. Its intuitive interface ensures easy usage, making the benefits of this AI-driven tool widely accessible.



Motivation

Early and precise diagnosis of brain tumors is vital for improving patient outcomes. As a major cause of death and disability globally, timely detection can greatly affect a patient's prognosis. Traditional diagnostic methods, such as biopsies, can be invasive and slow. Intelligent multi-class brain tumor classification systems present a promising alternative. These systems utilize machine learning algorithms, particularly deep learning techniques like Convolutional Neural Networks (CNNs), to analyze medical images such as MRIs and CT scans. Key benefits include:

- Non-invasive and Rapid Diagnosis: The system processes scans quickly, potentially reducing diagnostic time and patient discomfort.
- Enhanced Diagnostic Accuracy: Training on extensive datasets can lead to higher accuracy than traditional methods, allowing for earlier tumor detection and more effective treatment strategies.
- Multi-class Classification: The system can identify various types of brain tumors, enabling more targeted treatment plans.

Our project focuses on the challenge of multi-class brain tumor classification, which is essential for tailoring treatment strategies based on tumor type, thus significantly improving patient care.

Problem Statement

Brain tumors are a leading cause of death and disability worldwide, making early and accurate diagnosis crucial for effective treatment and better patient outcomes. However, traditional methods, such as visual examination of medical images by radiologists, are susceptible to human error and subjectivity. These methods can also be time-consuming, leading to delays in starting treatment.

Existing Systems

Several current approaches tackle brain tumor analysis with medical imaging data but vary in their methodologies and outputs. Examples include:

- BRATS: An annual competition that advances brain tumor segmentation and classification.
- Deep Medic: A deep learning system specifically for tumor segmentation and classification.
- Radiomics-based Systems: These use machine learning to classify tumors based on features such as texture and intensity, capturing subtle details that may be missed by the human eye and improving classification accuracy.

Each of these systems has unique characteristics, but our proposed system aims to enhance multi-class brain tumor classification through advanced techniques and user-friendly design.

Proposed System

Our proposed system employs a ResNet-50 architecture for classifying brain tumors. By utilizing transfer learning from a pre-trained model, we aim to achieve high classification accuracy. The system features a user-friendly interface for inputting images and receiving classification results. Trained on a dataset of 3,064 T1-weighted and contrast-enhanced brain MRIs, the system classifies tumors based on their size and location. The ResNet-50 architecture provides several advantages for this task. Its deep convolutional design excels in image classification, potentially offering high accuracy in tumor detection. The model automatically extracts relevant features from images, aiding in precise classification. Moreover, transfer learning from a comprehensive image dataset like ImageNet creates a strong foundation for training on medical data, leading to quicker convergence and potentially greater accuracy with fewer labeled images. ResNet-50 also



incorporates mechanisms to reduce overfitting, enhancing its performance on unseen tumor images and improving reliability in clinical environments. The system's scalability allows it to handle various dataset sizes and complexities. While deep learning models can be complex, techniques such as gradient-based visualization can provide insights into the features learned by ResNet-50, enhancing trust and acceptance in medical contexts. Additionally, despite its complexity, ResNet-50 can be optimized for efficient inference on modern hardware, facilitating real-time or near-real-time tumor classification and seamless integration into clinical workflows.

Implementation

1. Data Acquisition and Preprocessing:

- Data Collection: Acquire a labeled dataset of brain MRI scans with annotations for different tumor types (e.g., glioma, meningioma, pituitary tumor). Utilize public datasets like Kaggle or the BRATS (Brain Tumor Segmentation) leaderboard as starting points. Ensure diverse data in terms of tumor size, location, and MRI modality (e.g., T1-weighted, contrast-enhanced).
- Preprocessing: Standardize and enhance images to improve model performance. Resize images to a consistent size, normalize pixel intensities, and apply data augmentation techniques such as random cropping, flipping, and rotations to increase dataset variability and improve model generalization.

2. Model Development with ResNet-50:

- ResNet-50 Architecture: Use a pre-trained ResNet-50 model as the base architecture. ResNet-50 is a deep convolutional neural network known for its high performance in image classification tasks, leveraging pre-trained weights from large datasets like ImageNet.
- Transfer Learning: Implement transfer learning by freezing the pre-trained layers of ResNet-50 and training only the final layers specific to brain tumor classification. This approach reduces training time and leverages features learned from large-scale datasets.
- Customization for Multi-Class Classification: Modify the final fully-connected layer of ResNet-50 to match the number of tumor classes (e.g., three for glioma, meningioma, and pituitary) and use a softmax activation function to output class probabilities.

3. Model Training and Evaluation:

- Training: Split the preprocessed data into training, validation, and test sets. Train the model with an optimizer (e.g., Adam) and a suitable loss function (e.g., categorical crossentropy). Monitor loss and accuracy to avoid overfitting and use techniques like early stopping or learning rate decay to regulate training.
- Evaluation: Assess model performance on the test set using metrics such as accuracy, precision, recall, and F1-score. Analyze the confusion matrix to identify misclassifications and refine the model.

4. Deployment and User Interface:

- Deployment: Host the website using VS Code's live server. The dynamic website, developed with JavaScript and HTML, allows users to upload MRI scans. After uploading, users can click a button to predict the tumor type (e.g., Glioma, Meningioma, Pituitary, No-tumor) and receive additional information about the detected tumor.



ResNet-50 Results:

- The results from ResNet-50, including accuracy, precision, and other performance metrics, will be displayed.

System Configuration:

- Software Requirements:
- Operating System: Windows 7 or higher, Mac
- Web Browser: Chrome, Brave
- IDE: VS Code
- Libraries Used: OpenCV, Flask, TensorFlow, Anaconda (for Python libraries), Keras
- Hardware Requirements:
- RAM: 4GB
- Hard Disk: 50 GB
- Processor: Intel i5 or equivalent Mac

Methodology

ResNet-50, a 50-layer convolutional neural network developed by Microsoft Research in 2015, is widely recognized for its superior performance in image recognition tasks due to its use of residual blocks. These blocks address the vanishing gradient problem in deep networks by allowing information to bypass multiple layers, thus enabling more effective learning from complex images. Residual connections, or skip connections, facilitate learning by letting the network learn residual functions rather than attempting to learn the original mapping directly. This design allows ResNet-50 to handle deep learning tasks efficiently, with batch normalization after each convolution layer to stabilize and accelerate training. The model is initially trained on large datasets like ImageNet and can be fine-tuned for specific tasks, such as brain tumor classification, to enhance performance further.

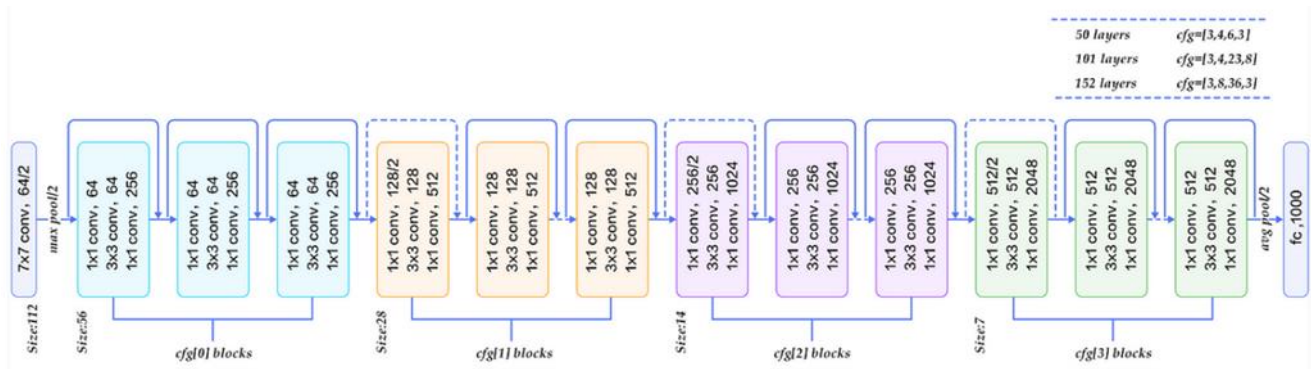


Fig. 1. ResNet 50 Architecture

Detailed Architecture of ResNet-50:

- Input: 224x224x3 (RGB image)
- Initial Convolutional Layer: This layer applies 64 filters with a 7x7 kernel size and a stride of 2x2, followed by batch normalization and ReLU activation.
- Max Pooling Layer: Performs max pooling with a 3x3 kernel size and a stride of 2x2.
- Residual Blocks:



- Block 1: Consists of three convolutional layers with 64 filters, using kernel sizes of 1x1, 3x3, and 1x1, respectively. Each layer is followed by batch normalization and ReLU activation. The output of this block is added to the input via a residual connection. This block is repeated 3 times.
- Block 2: Includes three convolutional layers with 128 filters, with kernel sizes of 1x1, 3x3, and 1x1, respectively. Batch normalization and ReLU activation follow each layer. The output is added to the input through a residual connection. This block is repeated 4 times.
- Block 3: Contains three convolutional layers with 256 filters, using kernel sizes of 1x1, 3x3, and 1x1. Each layer is followed by batch normalization and ReLU activation, with the output added to the input via a residual connection. This block is repeated 6 times.
- Block 4: Features three convolutional layers with 512 filters, with kernel sizes of 1x1, 3x3, and 1x1, respectively. Batch normalization and ReLU activation follow each layer, and the output is added to the input through a residual connection. This block is repeated 3 times.
- Global Average Pooling Layer: Computes the average value of each feature map.
- Fully Connected Layer: Consists of 1,000 nodes, corresponding to each class in the ImageNet dataset.
- SoftMax Activation Function: Produces the final output probabilities for classification.

Additionally, the mention of a "one-hot state machine" seems unrelated to the ResNet-50 architecture and might pertain to another aspect of your system or another context entirely.

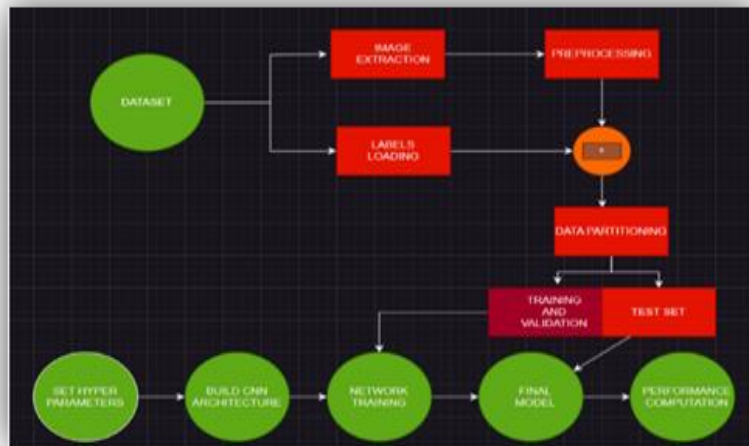


Fig. 2. Architecture diagram of Intelligent Multi-Class Brain Tumor Classification System

An Intelligent Multi-Class Brain Tumor Detection system consists of several key components, as illustrated in Figure 4, which outlines its flow and functionality. After downloading the dataset, the images are extracted, label-encoded, and preprocessed. The data is then divided into training and testing sets. Following this, the CNN architecture is constructed, hyperparameters are configured, and the model is evaluated using the testing set to assess its accuracy.



Conclusion

Our study assessed the performance of four Convolutional Neural Network (CNN) models in classifying brain tumors from MRI scans. The models were designed to distinguish between Glioma, Meningioma, Pituitary tumors, and healthy scans. Performance metrics, including accuracy, precision, recall, and F1-score, were used to evaluate each model's effectiveness. Figure 1 (likely a chart or graph) visually presents a comparison of the models' performance. According to these metrics, our custom-designed CNN, known as the Brute Force Custom Model, proved to be the most effective. This suggests that the custom model's architecture, optimized hyper parameters, or specific features tailored to the task contributed to its superior classification accuracy.

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