

CNN Based Brain Tumor Detection

Harshini Badisa, Madhavi Polireddy, Aslam Mohammed

Abstract: Brain tumor identification is really challenging task in early stages of life. But now it became advanced with various machine learning algorithms. Now a day's issue of brain tumor automatic identification is of great interest. In Order to detect the brain tumor of a patient we consider the data of patients like MRI images of a patient's brain. Here our problem is to identify whether tumor is present in patients brain or not. It is very important to detect the tumors at starting level for a healthy life of a patient. There are many literatures on detecting these kinds of brain tumors and improving the detection accuracies. In this paper, we Estimate the brain tumor severity using Convolutional Neural Network algorithm which gives us accurate results.

Index Terms: Tumor Detection, Convolutional Neural Network, Gaussian Filters.

I. INTRODUCTION

Tumor is the unusual growth of the tissues. A brain tumor is a quantity of unnecessary cells growing in the brain or central spine canal. It is an unrestrained progress of cancer cells in any portion of the body. Tumors are of different forms and have different features and different treatments. Presently, brain tumors are categorized as primary brain tumors and Metastatic brain tumors. The earlier arise in the brain and incline to stay in the brain, the later begin as a cancer in different places in the body and increasing to the brain part. Brain tumor segmentation is one of the critical techniques in careful and treatment planning. Brain tumor separation using MRI has been an extreme exploration area. Brain tumors have various dimensions and shapes and appear at different locations. Varying amount of tumors in brain magnetic resonance images (MRI) makes the automatic division of tumors enormously stimulating. There are various techniques which have been proposed to segment tumors on magnetic resonance images. Texture is one of most standard characteristic for image classification and retrieval. Texture segmentation is done using GLCM (Gray-Level Co-occurrence Matrix). From the MRI images of brain, the optimum texture characteristics of brain tumor are take out by using GLCM. Today, tools and techniques to evaluate tumors and their behavior are becoming more predominant. Clearly, determinations over the past century have generated real improvements. However, we have also diagnosis tools. Even if we have yet to cure brain tumors, few forward steps have to be followed on the way to reach the ultimate goal;

More and more researchers have to be done which will be helpful to those who are suffering with brain tumors. MRI Images are widely used for high quality imaging mostly in brain scanning images because brain tumors are easily tracked by these images. MRI provides a digital representation of tissue characteristics that can be obtained in any tissue plane. MRI Scanner produced images are sliced, added advantage is slicing into both horizontal and vertical planes. These MRI Scanned images are useful in identifying and detecting and classifying the tumor parts of the brain easily. Now a day's most of the present techniques are human experience interpretation for image evaluation which may result in false identification of brain tumor. Digital way of representing the images can make us detection clear when compared to manual. From the complex medical images, Information is gained using the technique called Segmentation. Its main objective is to segment the image into various partitions for image classification, but the risk factors may include rarely. Magnetic resonance imaging (MRI) is the prime technique to diagnose brain tumors and monitor their treatment. Different MRI modalities of each patient are acquired and these images are interpreted by computer-based image analysis methods in order to handle the complexity as well as constraints on time and objectiveness. In this thesis, two major novel approaches for analysing tumor-bearing brain images in an automatic way are presented: Multi-modal tissue classification with integrated regularization can segment healthy and pathologic brain tissues including their sub-compartments to provide quantitative volumetric information. The method has been evaluated with good results on a large number of clinical and synthetic images. The fast run-time of the algorithm allows for an easy integration into the clinical work flow. An extension has been proposed for integrated segmentation of longitudinal patient studies, which has been assessed on a small dataset from a multi-center clinical trial with promising results. Atlas-based segmentation with integrated tumor-growth modeling has been shown to be a suitable means for segmenting the healthy brain structures surrounding the tumor. Tumor-growth modeling offers a way to cope with the missing tumor prior in the atlas during registration. To this end, two different tumor-growth models have been compared. While a simplistic tumor growth model offered advantages in computation speed, a more sophisticated multi-scale tumor growth model showed better potential to provide a more realistic and meaningful prior for atlas-based segmentation. Both approaches have been combined into a generic framework for analyzing tumor-bearing brain images, which makes use of all the image information generally available in clinics.

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* Correspondence Author (s)

Harshini Badisa, CSE Department, KLEF, Guntur, India.
Madhavi Polireddy, CSE Department, KLEF, Guntur, India
Aslam Mohammed, CSE Department, KLEF, Guntur, India.

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This segmentation framework paves the way for better diagnosis, treatment planning and monitoring in radiotherapy and neurosurgery of brain tumors.

II. LITERATURE SURVEY

A technique called Enhanced Intelligent Scissors (EIS) is presented for segmenting areas of interest in medical images. The proposed algorithm specifies the issues that are associated with segmenting medical images and allows for fast, strong, and flexible subdivision without requiring true manual tracing. The boundary extraction problem is formulated as a Hidden Markov Model (HMM) and the present technique to the second-order Viterbi algorithm with state pruning is used to find the best boundary in a robust and efficient manner based on the pull out external and internal local costs, thus handling much inexact user boundary definitions than existing methods. Experimental results using MR and CT images show that the proposed algorithm achieves accurate segmentation in medical images without the need for accurate boundary definition as per existing Intelligent Scissors methods. For usability testing shows that the proposed algorithm requires less user interaction than Intelligent Scissors. The main advantage of using the proposed approach of user interaction over the conventional IS approach is that the user does not need to trace around the boundary carefully. These methods are refined based on image gradients, making it highly sensitive to contrast non-uniformities typically found in medical images.

III. EXISTING SYSTEM

The Existing system describes the cellular automation of segmentation. The technique is used to interactive multi label segmentation for N dimensional images. It segments the areas which are more difficult to segment. The method is iterative, giving feedback to the user while the segmentation is computed.

IV. PROPOSED SYSTEM

- In this paper, here we are providing new methods of MRI images of Brain of a patient.
- Here pre-processing is done by Gaussian which is a linear filter.

2. Pre Processing

The images which are collected are subjected to pre-processing. In Pre-processing stage basic steps are image resizing and applying Gaussian filters for a perfect input clear image for easy identification of an image.

1. Segmentation

In this stage of implementation, Pre-processed images will be segmented digitally into various pixels. We do this segmentation for an image is to modify its representation to have more clarity to study and analyse the images.

- Then feature Extraction is done for the images by GLCM features.
- Finally classification applied through an algorithm Convolutional neural networks which will identify the tumor regions.

V. METHODOLOGY

Process of implementation undergoes in 5 basic steps.

1. Image Acquiring.
2. Pre-processing
3. Segmentation
4. Feature Extraction
5. Classification.

$$\begin{aligned}(f * g)(t) &\stackrel{\text{def}}{=} \int_{-\infty}^{\infty} f(\tau)g(t - \tau) d\tau \\ &= \int_{-\infty}^{\infty} f(t - \tau)g(\tau) d\tau.\end{aligned}$$

CONVOLUTIONAL NEURAL NETWORK

Convolutional Neural network is a deep learning technique which is feed forward artificial neural networks that are applied to visual images. These are also called as CONV NETS. These are combined set of layers that can be worked on group functionalities.

VI. MODULE DESCRIPTION

1. Image acquiring

The Primary Phase is acquiring images. After the Images collection, the obtained images have to be prepared with a wide range of vision. First capture the input images from available source with uigetfile and imread mat lab functions.

3.Feature Extraction

In the feature extraction process, we can implement the effective texture operator which labels the pixels of an image. Here we extract the features and characteristics of Images for easy detection of brain tumor.

4. Classification

In Classification stage, Convolutional neural networks algorithm is used for classification of brain images. It is a non-parametric method which is used for both classification and regression.

EXPERIMENTAL INPUTS

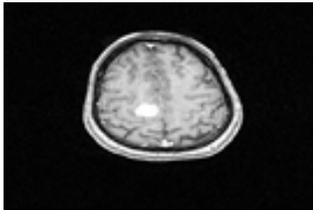
Here in this paper, Dataset is MRI images of brain which are not Pre-processed.

We can take any number of MRI images of brain tumor patients and can check whether tumor is identified or not.

VII. EXPERIMENTAL OUTPUTS

The data set considered here is a set of brain images where they are divided into test and trained data sets. With the help of both trained and test data sets our selected algorithm convolutional neural network in applied. The results are followed here:

1. FILTERED IMAGE



Filtered image

2. DWT IMAGE

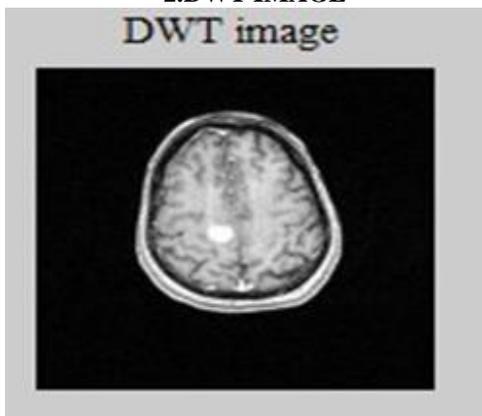


fig 2 DWT image



3. SEGEMENTED IMAGE

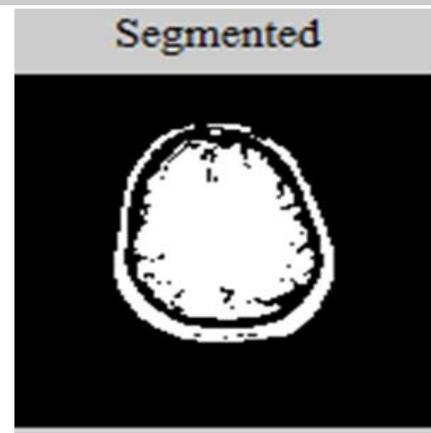
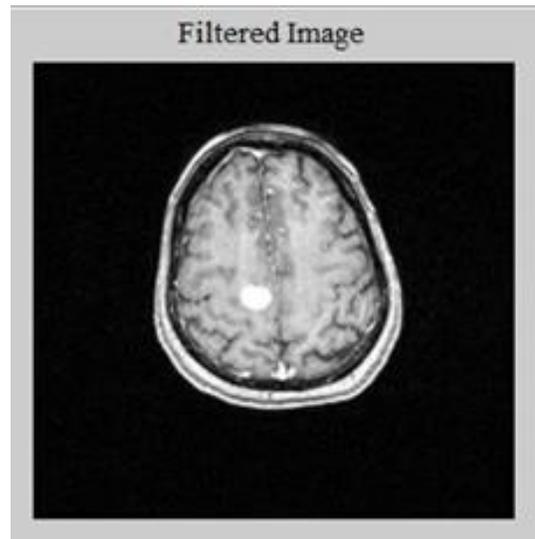
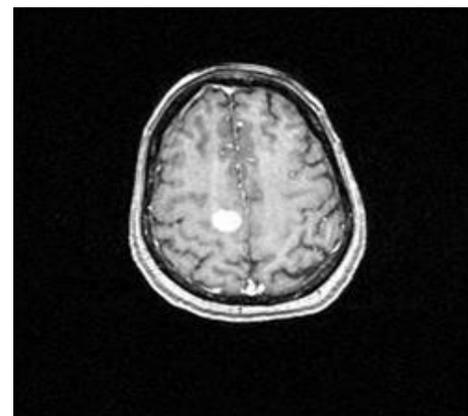


fig 3 Segmented Image

After the output of the segmented image we get the histogram features, shape features and GLCM features of the selected image from the dataset. The final output is Estimation of tumor which is severe or not.



SEVERE TUMOR

CNN Based Brain Tumor Detection

For the selected image present in dataset, the tumor is severe.



NON SEVERE TUMOR

For another MRI image in dataset, the tumor is non-severe. Like this we can select any image as an input and detect the brain tumor.

VIII. CONCLUSION

This paper has given a far reaching outline of the best in class MRI-based brain tumor division techniques. A significant number of the present cerebrum tumor division strategies work MRI images due to the non-intrusive and great delicate tissue differentiation of MRI and utilize grouping and bunching techniques by utilizing diverse highlights and considering spatial data in a nearby neighborhood. The motivation behind these strategies is to give a fundamental judgment on finding, tumor checking, and also treatment. And also to give strong outcomes inside a sensible calculation time.

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