

Automated Detection of Diabetic Retinopathy for Early Diagnosis using Exudate Images



P. Manimegalai, S. Soundarya, J. R. Aswath, M. Sowmiya, N. Raja Lakshmi

Abstract: -Retina plays a vital character in detection of various diseases in early point such as diabetes retinopathy which can be performed by analyzing the retinal images [6]. Diseased patients have to undergo periodic screening of eye. Standouts amongst the most predominant clinical indications of diabetic retinopathy are exudates [17]. To detect diabetic retinopathy in patients the ophthalmologist inspects the exudates by Ophthalmoscopy [17] where recognition of exudates is a vital diagnostic undertaking in which computer help may assume a noteworthy job. But intrinsic characteristics of retinal images detection process is difficult for the ophthalmologists. Here, we proposed another algorithm "Superpixel Multi-Feature Classification" for the programmed automatic recognition of retinal exudates successfully and to encourage ophthalmologist to give better patient finding experiencing diabetic retinopathy, advising them the level of seriousness ahead of time. The performance of algorithm has been compared as a result, the outcomes are effective and the sensitivity and specificity for our exudates identification is 80% and 91.28%, respectively [15].

Keywords: Super pixel, Diabetic Retinopathy, Exudates, Image Processing.

I. INTRODUCTION

Diabetic retinopathy is a basic eye disease which can be viewed as sign of diabetes on the retina. Diabetic retinopathy is described by the improvement of retinal micro aneurysms, hemorrhages and exudates. Exudates happen when lipid or fat leaks from abnormal vein or aneurysms. Exudates are described by bright spots with sharp edges [17]. There are two sorts of diabetic retinopathy they are NPDR (no proliferative diabetic retinopathy) and PDR (proliferative diabetic retinopathy) where NPDR can be subdivided into mild NPDR, moderate NPDR, severe NPDR. Proliferative anyway alludes whether there is any neovascularization (strange vein development) present or not. This paper proposes another computer put together

conclusion based with respect to the computerized picture preparing of exudate pictures so as to help individuals recognizing diabetic retinopathy ahead of time. The primary objective is to naturally group the non-proliferative diabetic retinopathy evaluation of any retinal picture. Our proposal has been tried on a database of 400 retinal pictures named by a 4-grade size of non-proliferative diabetic retinopathy. Accordingly, we acquired a most extreme sensitivity of 80% and a prescient limit estimation of 91.28%. Robustness regarding changes in the parameters of the calculation has additionally been assessed. Amid the early long periods of research, image processing techniques, for example, thresholding, separating and morphological administrators were utilized. Recent research is focused on implementing segmentation, edge detection, mathematical modeling, classification, pattern recognition and texture analysis techniques.

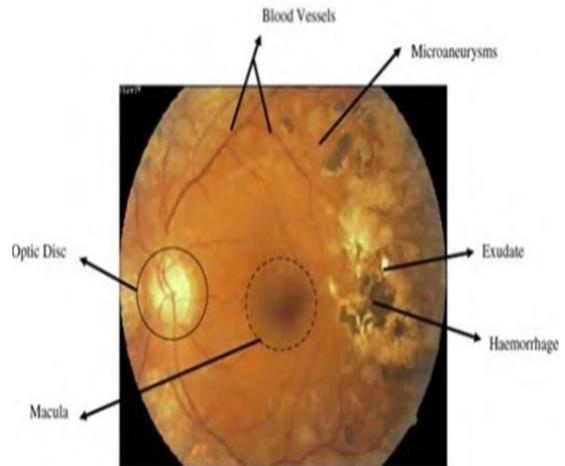


Fig1: Features in DR image

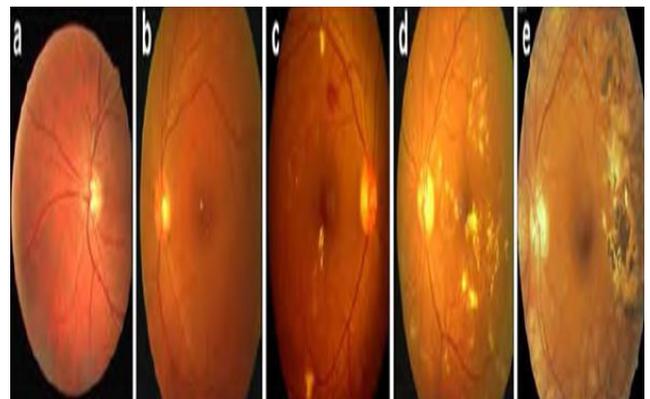


Fig 2: (a) Normal (b) Mild DR (c) Moderate DR (d) Severe DR (e) PDR

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II. RELATED WORKS

Huiqi Li et al., [2] has proposed an altered dynamic shape show in the shape discovery of optic plate; The achievement rates of circle restriction, circle limit recognition, and fovea limitation are 99%, 94%, and 100%, separately. The affectability and particularity of exudates discovery are 100% and 71%, correspondingly. The discovery and examination could be connected to programmed mass screening and finding of the retinal infections. Michael d. Abramoff et al., [1] built up a strategy to assess the execution of a framework for computerized recognition of diabetic retinopathy in advanced retinal photos, worked from distributed calculations, in a huge, delegate, screening populace [4]. All out territory under the beneficiary working trademark bend was 0.84, and nnm was 80 at an affectability of 0.84 and a particularity of 0.64. Now, 7,689 of 10,000 tests had adequate picture quality, 4,648 of 7,689 (60%) were genuine negatives, 59 of 7,689 (0.8%) were false negatives, 319 of 7,689 (4%) were genuine positives, and 2,581 of 7,689 (33%) were false positives. Desire Sidibé et al., [2] proposed a strategy for separating between various kinds of injuries is of enthusiasm for improving screening exhibitions. Utilization of inadequate coding systems for retinal pictures grouping is proposed. It accomplishes an affectability and an explicitness of 96.50% and 97.70% for the typical class; 99.10% and 100% for the drusen class; and 97.40% and 98.20% for the exudates class with a medium size word reference of 100 particles.

I.N. Figueiredo et al., [3] proposed a novel computerized framework for the recognition and conclusion of these retinal sores by handling retinal supports pictures. Suitable paired classifiers for these three distinct kinds of sores are structured. This is performed by examining a few wavelet groups (coming about because of the isotropic un devastated wavelet change disintegration of the retinal picture green channel) and by utilizing a proper blend of Hessian multiscale investigation, variety division and animation surface deterioration.

III. METHODOLOGY OF DETECTION

3.1. preprocessing

Input image in RGB to Gray scale conversion which reduces the complexity in image analysis. In grayscale images, the watershed algorithm is easily conceptualized with the two spatial dimensions and one brightness dimension as a 3D image. There are two main steps used in the preprocessing stage, they are image resizing and ROI extraction. In this pre-processing is achieved through median filter and the region of interest extraction is carried out by adaptive k mean clustering

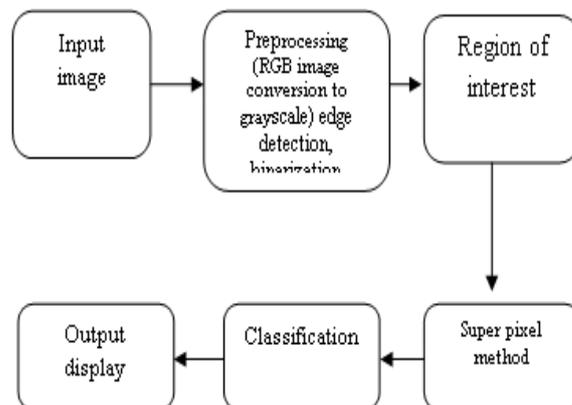


Fig3: Proposed block diagram for detection of Diabetic retinopathy

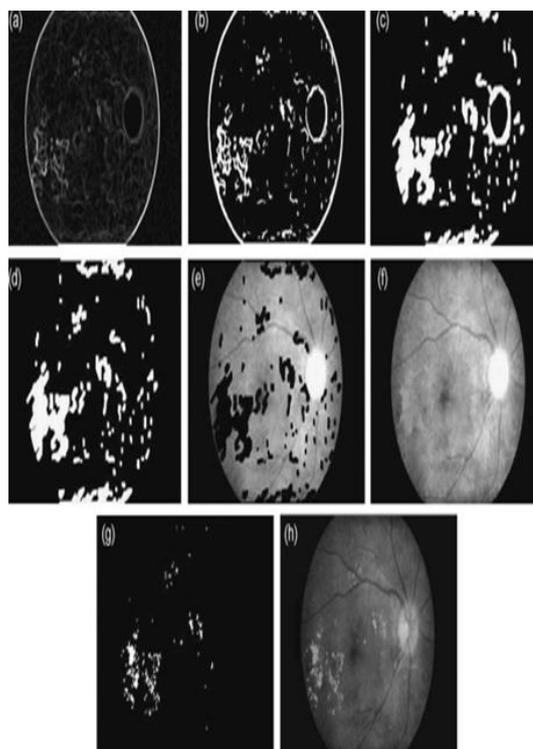


Fig4: (a) Local variation image, (b) threshold image, (c) enclosed areas were flood-filled, (d) optic disc was removed from image, (e) marker image, (f) reconstructed image, (g) difference image (h) result superimposed on the original image.

3.2. EDGE Detection

In image processing the edge identification treats the localization of essential varieties of a gray level image and the identifies the physical and geometrical properties of objects [8]. At first it distinguishes diagrams of an item and limits. In this undertaking objects and background in the image are separated. These features are used through advanced computer vision algorithms. These highlights are utilized through cutting edge computer vision algorithms. There are three distinct sorts of discontinuities in the

gray level, line and edges. Spatial covers identifies all the three sorts of discontinuities in the image.

Low Pass with Shaping Coefficient

Smoothing, sharpening, removing noise, and edge detection are done by image filtering [19]. Piece exhibit is connected to every pixel and its neighbors inside an image, the focal point of the part is lined up with the current pixel, and a square with an odd number (3, 5, 7, and so on.) of components in every dimension. Convolution process is utilized to apply channel to the picture in the spatial and recurrence space. At the point when the bit is focused over a pixel the initial segment of the convolution procedure duplicates the components of the portion by the coordinating pixel esteems. The components of the subsequent clusters are arrived at the midpoint of and the first pixel esteem is supplanted with the outcome. The CONVOL function is performed in this convolution procedure for an entire image.

3.3. Binarisation

The Sauvola technique for local binarization is utilized and we actualize it with tiling for efficiency. the threshold value is chosen close to the mean value, with very little contrast, and the threshold is chosen below the mean, by an amount proportional to the normalized local standard deviation.

3.4. Region Of Interest

In this the upper circle and lower circle in the eye is detected by the centroid values and matches the predefined values until the boundaries becomes equal the value is extended. Then the image is broken into pixels which are given as small images and multiple images to form a group. Based on these values masking of the image is done and the values such as area, perimeter, centroid and diameter are given as the result from the analyzed image.

3.5. Superpixel Method

➤ Superpixel Generation

The effective graph based segmentation is used to generate the super pixels. In This technique limit between two locales are spoken to utilizing a chart based portrayal of the picture. Estimating the difference among the limit of the parts is in respect to a proportion of the divergence among neighboring components inside every one of the two components. This division strategy is quick to run and it creates not very coarse and not very fine division

➤ Descriptors for Super Pixels

The k-means algorithm defines the textons where textons are the cluster centers. In this 64 textons are used to describe the texture. In this study, the distance

function for the super pixel color histogram distributions is chosen.

In this paper the χ^2 is the separation used to figure the distinction between two shading histograms presented below. A couple of shading histograms M and I, each contains p highlights and n receptacles absolutely and where, each element is partitioned into n canisters. At first the histogram is normalized to wipe out the impact from the distinctive size of the super pixels. The χ^2 distance of the color histograms is defined to be,

$$\chi^2(M, I) = \sum_{j=1}^{np} \frac{(m_{j-1j})^2}{m_{j-1j}} \dots \dots \dots (1)$$

(k-NN algorithm)

Let x be an unknown observation, which is a dimensional histogram data for a super pixel. suppose L is the number of classes, then

$$k = \sum_{i=1}^L k_i \dots \dots \dots (2)$$

The general rule for k-NN algorithm can be expressed as

$$X \in l_i \text{ if } m_i(X) > m_j(X), \text{ for all } j \neq i$$

$$m_i(X) = k_i \dots \dots \dots (3)$$

$$m_i(X) = \frac{\sum_{j=1}^{k_i} 1/D(X, X_j^i)}{\sum_{i=1}^L \sum_{j=1}^{k_i} (X, X_j^i)} \dots \dots \dots (4)$$

Where,

D (x, x_{ji}) is the histogram distance between the unknown super pixel x and its jth neighbour j belonging to class l_i.

χ^2 distance is used as the histogram distance function (j)D (x, x_{ji}). [7]

IV.RESULTS

By using 400 model input images for testing we got these results on classification. In this way we have got descent results for our analysis. The performance of algorithm has been compared as a result, the results are effective and the sensitivity and specificity for our exudates identification is 80% and 91.28%, respectively.

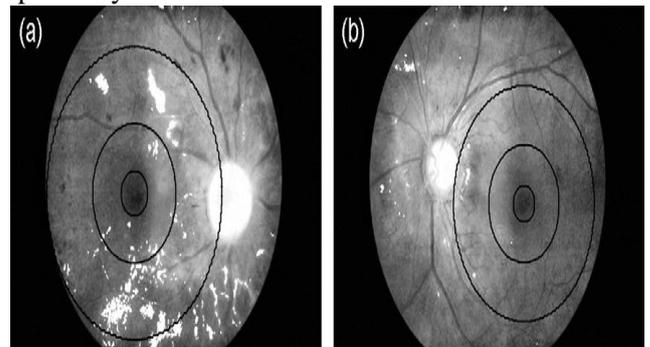


Fig5: (a) Macular grid fixated on the macular (b) superimposed on the exudate recognition result.[15]



The automated diagnosis of diabetic retinopathy based on intensity of the retinal image is very successful in detecting exudates. It is not the final result application but it can be a preliminary diagnosis tool for ophthalmologists.

Method	Sensitivity (%)	Specificity (%)
Proposed method (super pixel method)	80	91.28
Gabor filter	85.47	89.02
Matched filter	83.79	88.21

Table 1: comparison of the proposed method

Output:

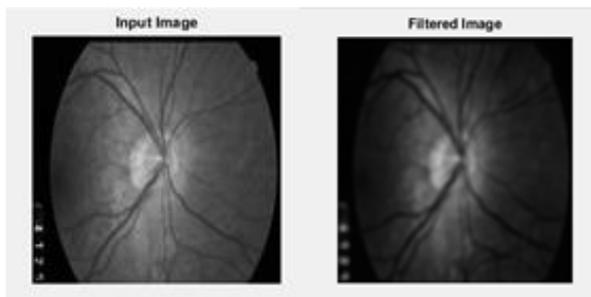


Fig :6 Input image Fig :7 Filtered image

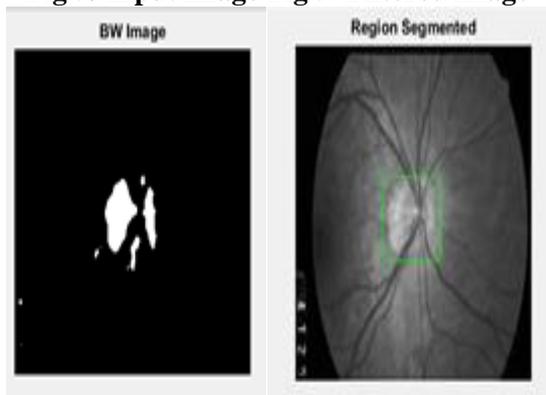


Fig 8: BW image Fig 9: Regionsegmented

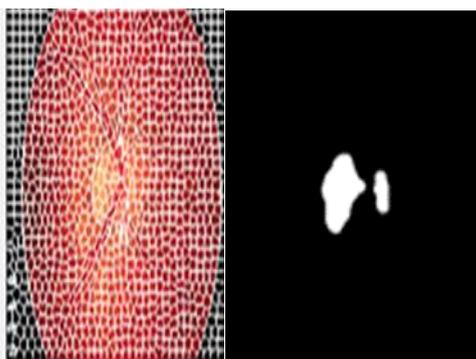


Fig10: Superpixelmethod Fig11: Background Detected

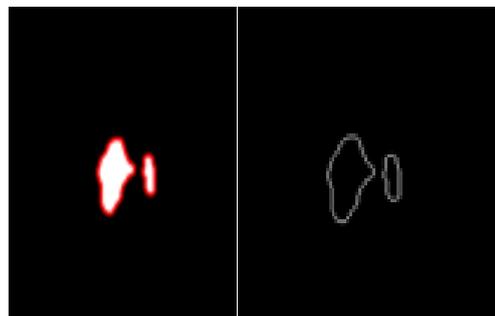


Fig 12: Blob Detected Fig 13: Boundary Detected

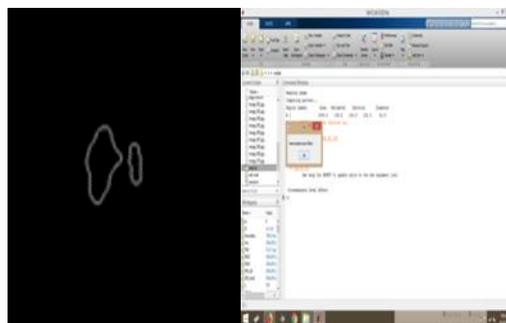


Fig 14: Skeleton Extract Fig 15: Final Result

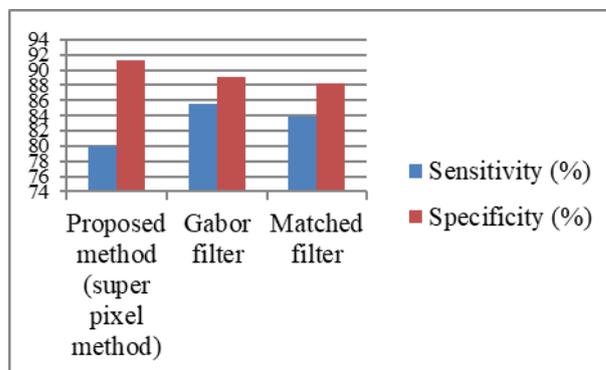


Table 2: Comparison of proposed method results on retinal database

V. CONCLUSION

In this paper, we set up a characterization framework dependent on the utilization of super pixels and the non-parametric kNN approach is embraced as the super pixel based order strategy, which is simple but robust. Thus by using the super pixel method the exudates size and intensity is found which advancedly predicts the diabetic retinopathy [13].

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