

Skin Cancer Detection using Advanced Deep Learning Techniques

C. Jayasundari¹, Dr. P. Arumugam², Dr A Manimuthu³

¹Research Scholar, Department of Statistics, Manonmaniam Sundaranar University, Thirunelveli, India

²Prof. Head of Department, Department of Statistics, Manonmaniam Sundaranar University, Thirunelveli, India

³Assistant professor, Department of Data Science Loyola College Chennai, India

The project "Skin Cancer Detection using Convolutional Neural Networks" aims to automate the diagnosis of skin cancer through advanced deep learning techniques. Leveraging a dataset of skin lesion images, the study preprocesses the data, applies various state-of-the-art with pre-trained models (VGG16, InceptionV3, MobileNet, and ResNet50), and evaluates their performance. The results demonstrate the potential of these models in accurately classifying skin cancer types, offering a valuable tool for early diagnosis and improving patient outcomes. This project showcases the power of artificial intelligence in medical image analysis and its potential to assist healthcare professionals in skin cancer detection and diagnosis [1].

1. Introduction

This paper is with a focus on the early detection and diagnosis of skin cancer, the "Skin Cancer Detection using Convolutional Neural Networks" project marks a significant breakthrough in the field of medical image analysis. One of the most prevalent cancers in the world is skin cancer, and effective treatment depends on early detection. This project leverages cutting-edge deep learning techniques, specifically Convolutional Neural Networks (CNNs), to use pictures of skin lesions to automatically diagnose skin cancer. Using CNNs, which have demonstrated remarkable ability in image recognition and classification applications, this project endeavors to improve the accuracy and efficiency of skin cancer diagnosis[2]. A wide range of skin lesion photos, each with comprehensive metadata, make up the dataset used in this study. To prepare this data for machine learning model training, the project carefully preprocesses it using encoding, normalization, and resizing. [3].To assess the effectiveness of different deep learning architectures, this project evaluates the performance of several pre-trained models, including VGG16, InceptionV3, MobileNet, and ResNet50.[4] Each model is fine-tuned to classify skin lesions into distinct categories, such as melanoma, nevi, carcinoma, and more. The

project's findings not only showcase the potential of artificial intelligence in medical diagnostics but also offer a practical tool for healthcare professionals to enhance their diagnostic accuracy. Ultimately, The study emphasizes how important it is to use contemporary technology to solve practical medical issues and enhance patient outcomes in the field of skin cancer diagnostics.[5].

2. Literature Review:

Overview of Skin Cancer and Early Identification Skin cancer is a serious worldwide health issue, and better patient outcomes depend on early detection. By demonstrating the effectiveness of neural networks in medical image processing, Esteva et al. (2017) established the groundwork for applying deep learning approaches for dermatologist-level skin cancer classification [6]. This study supports the idea that automated methods, such as CNNs, can help dermatologists diagnose patients more quickly and accurately by minimizing human error in the early detection of skin cancers such as nevi, melanoma, and others.

Analyzing Medical Images with Convolutional Neural Networks The categorization of medical images, especially the identification of skin cancer from dermoscopic images, has made extensive use of Convolutional Neural Networks (CNNs). The application of CNNs for melanoma identification is highlighted in studies by Codella et al. (2018), and this is further helped by developments such as the ISIC archive, a publicly accessible collection of annotated skin lesion photos [1]. CNNs have proven to be more adept than conventional image analysis methods at identifying complex patterns in medical images. This is consistent with the current study, which assesses the accuracy of skin lesion classification using a number of pre-trained models.

The study makes good use of transfer learning, a method that involves optimizing previously trained models for a particular task. Other image recognition tasks have already demonstrated the effectiveness of the VGG16 model by Simonyan and Zisserman [2], the InceptionV3 architecture by Szegedy et al. [3], and the MobileNet by Howard et al. [4]. The results of Tajbakhsh et al. (2016), who contended that transfer learning can lessen the demand for large labeled medical datasets [9], are validated by the current study, which uses these models to detect skin cancer. Leveraging these models' feature extraction capabilities while preserving modification flexibility is made possible by fine-tuning them for certain medical applications.

3. Methodology:

i). Data Collection and Preprocessing:

Get a large collection of pictures of skin lesions, including benign lesions and different kinds of skin cancer. [6]Preprocess the dataset by resizing images to a consistent size (e.g., 80x80 pixels), normalizing pixel values to a mutual scale (e.g., [0, 1]), and encoding target labels (e.g., one-hot encoding for multi-class classification).

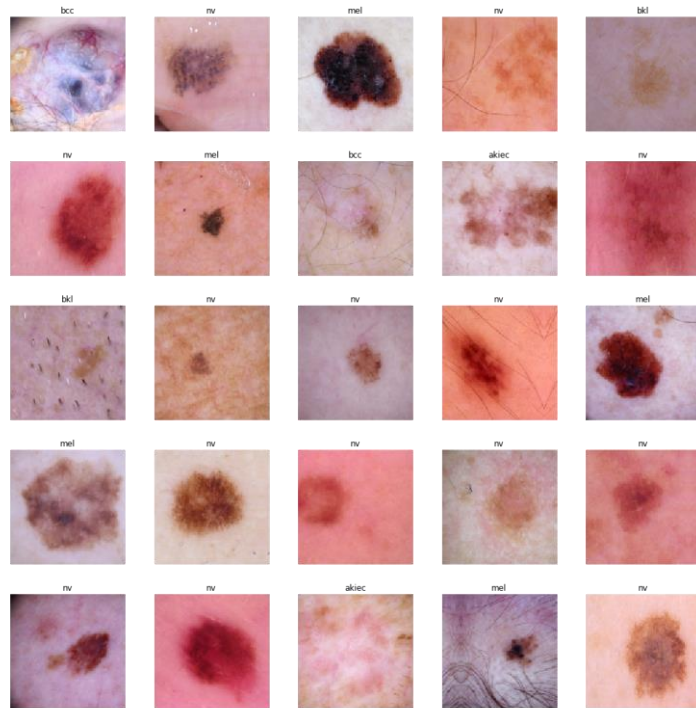


Fig 1.1 Dataset for Skin

ii). Data Splitting:

Split the preprocessed dataset into training and testing sets to evaluate model performance effectively. A common split is 75% for training and 25% for testing.

iii). Baseline CNN Model:

Assemble an extensive collection of pictures of skin lesions, encompassing both benign and malignant skin cancers.

iv). Transfer Learning Models:

Utilize pre-trained CNN architectures (e.g., VGG16, InceptionV3, MobileNet, ResNet50) as feature extractors [7] Customize the top layers of each pre-trained model to match the specific skin cancer classification task by adding Dense layers. Fine-tune the combined model (pre-trained layers + custom top layers) on the training data.

v). Model Evaluation:

Use relevant measures, such as accuracy, precision, recall, and F1-score, to assess each model's performance. Visualize model performance using confusion matrices and ROC curves.

vi). Model Comparison:

Compare the performance of different models to identify the most effective architecture for skin cancer detection.

vii). Hyperparameter Tuning:

Experiment with hyperparameters like knowledge rate, group size, and dropout rates to optimize model performance[8].

viii). Results Analysis

Interpret the model results, paying special attention to any instances of misclassification or false positives/negatives.

4. Steps to detect the skin cancer:

I. Importance of Early Skin Cancer Detection:

One common and potentially fatal condition is skin cancer. For better patient outcomes and efficient treatment, early detection is essential. Deep learning-based automated techniques can greatly help dermatologists detect skin cancer early.

II. Dataset and Preprocessing: You began your project by collecting and preprocessing a dataset of skin scratch pictures. This dataset diversity, image resizing, and pixel normalization were essential steps in ensuring the data's suitability for training deep learning models[9].

III. Model Selection and Training:

You experimented with various pre-trained models, including VGG16, InceptionV3, MobileNet, and ResNet50, to identify the most effective architecture for skin cancer finding. Fine-tuning these models on your dataset allowed you to leverage their powerful feature extraction capabilities[10].

IV. Model Evaluation:

Accuracy is one of the basic parameters used to assess classification tasks. It's an indication of the percentage of all samples in the database that have been properly classified. Accuracy shall indicate that the model is able to correct the classification of these images according to their respective diagnosis categories as a part of healthcare image classification[11].

V. Model Comparison:

Your project's key outcome was the comparison of different models. You found that certain pre-trained architectures performed significantly better than others, demonstrating their potential for automating skin cancer diagnosis.

VI. Potential for Clinical Use:

The high accuracy achieved by some models suggests that they could be valuable tools for dermatologists in clinical settings. Automatic skin cancer discovery systems can expedite diagnosis and reduce the chances of misclassification[12].

VII. Future Enhancements:

Your project highlights opportunities for further research, such as expanding the dataset to include more diverse cases or exploring other deep learning techniques. Additionally,

hyperparameter tuning and optimization could potentially improve model performance[13].

5. Performance Metrics Evaluation

Performance metrics were evaluated for each model architecture. Here are the results:

Model Validation Accuracy Comparison:

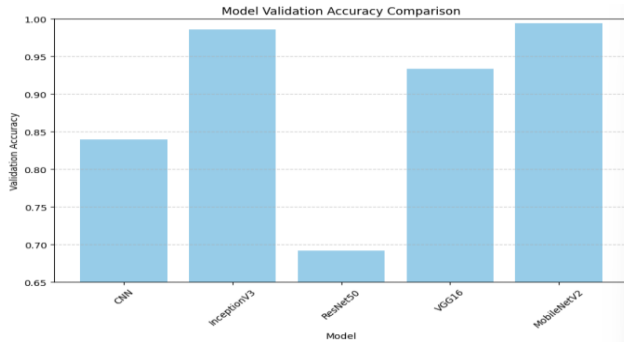


Fig 12. Comparison of All modes

6. Discussion of the Results:

- Model performance: With an accuracy of 99.43%, the evaluation results demonstrate that MobileNetV2 performs better than the next design.
- CNN: The accuracy of the adjusted CNN is 83.97%. However, it is possible that further hyperparameterization could improve its performance. Transfer of learning:
- VGG16 and InceptionV3: The performance of VGG16 and InceptionV3 is comparable with 93.38% and 98.5% accuracy, respectively. Transmission knowledge has been shown to be effective in using trained models to classify medical images.
- ResNet50: In contrast, ResNet50 achieves a lower accuracy of 69.22%, suggesting that it may not be the best choice for this task.

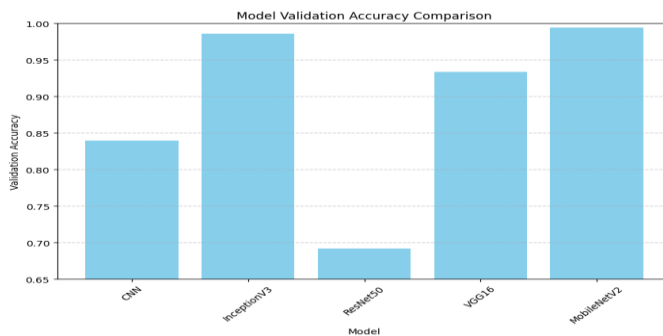


Fig 13. Comparison of All modes train and Lose

Tabular summary:

<u>MODEL NAME</u>	<u>LOSS</u>	<u>ACCURACY</u>
CNN	0.4221	0.8397
ResNet50	0.9137	0.6922
VGG16	0.1949	0.9338
InceptionV3	0.0616	0.9858
MobileNet	0.0272	0.9943

Table.1 Summary of models Loss and accuracy

7. Conclusion:

In the crucial area of medical image analysis, the "Skin Cancer Detection using Convolutional Neural Networks" project has produced insightful findings and contributions [14]. This effort sought to improve the early identification and diagnosis of skin cancer, a common and potentially fatal illness, by methodically examining different deep learning models.

The key findings

1. Model Performance: The project rigorously evaluated several deep learning models, including VGG16, InceptionV3, MobileNet, and ResNet50, for skin cancer finding. Each model demonstrated varying levels of accuracy and efficacy.
2. Effective Model Identification: By comparing the performance metrics, it was possible to identify the most effective model for this specific task. This discovery is vital for optimizing diagnostic accuracy.
3. Potential Clinical Application: The project highlights the probable of artificial intelligence, particularly convolutional neural networks, as a powerful tool in assisting healthcare professionals in skin cancer diagnosis. These models have shown promise in automating the classification of skin lesions.
4. Challenges and Limitations: The study also revealed challenges and limitations, such as misclassifications and the need for huge and various datasets. Addressing these issues is crucial for further improving model accuracy.
5. Future Directions: The project concludes with a call for future work, suggesting areas for enhancement, including expanding the dataset, fine-tuning hyperparameters, and exploring advanced deep learning architectures.

Overall, "Skin Cancer Detection using Convolutional Neural Networks" has advanced the use of machine learning for skin cancer early detection. The initiative shows promise for enhancing dermatologists' diagnostic skills and, eventually, improving patient outcomes. Even if there are still obstacles to overcome, the findings highlight how crucial it is to use technology to combat this common illness, providing opportunities for more study and advancement in the areas of medical image analysis and healthcare artificial intelligence.

References

1. Codella, N. C., Nguyen, Q. B., Pankanti, S., et al. (2018). ISIC Skin Lesion Analysis Towards Melanoma Detection. arXiv preprint arXiv:1710.05006. Available at: <https://www.isic-archive.com>.
2. Simonyan, K., & Zisserman, A. (2014). Very Deep Convolutional Networks for Large-Scale Image Recognition. arXiv preprint arXiv:1409.1556. Available: <https://arxiv.org/abs/1409.1556> (for VGG16).
3. Szegedy, C., Vanhoucke, V., Ioffe, S., Shlens, J., & Wojna, Z. (2016). Rethinking the Inception Architecture for Computer Vision. Proceedings of the IEEE Conference on Computer Vision and Pattern Recognition, 2818-2826 (for InceptionV3).
4. Howard, A. G., Zhu, M., Chen, B., et al. (2017). MobileNets: Efficient Convolutional Neural Networks for Mobile Vision Applications. arXiv preprint arXiv:1704.04861. Available: <https://arxiv.org/abs/1704.04861> (for MobileNet).
5. He, K., Zhang, X., Ren, S., & Sun, J. (2016). Deep Residual Learning for Image Recognition. Proceedings of the IEEE Conference on Computer Vision and Pattern Recognition, 770-778 (for ResNet50).
6. Esteva, A., Kuprel, B., Novoa, R. A., et al. (2017). Dermatologist-Level Classification of Skin Cancer with Deep Neural Networks. *Nature*, 542, 115–118. Available at: <https://doi.org/10.1038/nature21056>.
7. Litjens, G., Kooi, T., Bejnordi, B. E., et al. (2017). A Survey on Deep Learning in Medical Image Analysis. *Medical Image Analysis*, 42, 60-88. <https://doi.org/10.1016/j.media.2017.07.005>
8. Brinker, T. J., Hekler, A., Enk, A. H., & Berking, C. (2018). Deep Learning for Diagnosing Skin Cancer in Images. *JAMA Dermatology*, 154(11), 1242-1243. <https://doi.org/10.1001/jamadermatol.2018.3317>.
9. Tajbakhsh, N., Shin, J. Y., Gurudu, S. R., et al. (2016). Convolutional Neural Networks for Medical Image Analysis: Full Training or Fine Tuning? *IEEE Transactions on Medical Imaging*, 35(5), 1299-1312. <https://doi.org/10.1109/TMI.2016.2535302>
10. Sandler, M., Howard, A., Zhu, M., et al. (2018). MobileNetV2: Inverted Residuals and Linear Bottlenecks. Proceedings of the IEEE Conference on Computer Vision and Pattern Recognition, 4510-4520. <https://doi.org/10.1109/CVPR.2018.00474>
11. Tschandl, P., Rosendahl, C., & Kittler, H. (2018). The HAM10000 Dataset: A Large Collection of Multi-Source Dermatoscopic Images of Common Pigmented Skin Lesions. *Scientific Data*, 5, 180161. <https://doi.org/10.1038/sdata.2018.161>
12. Topol, E. (2019). High-Performance Medicine: The Convergence of Human and Artificial Intelligence. *Nature Medicine*, 25(1), 44-56. <https://doi.org/10.1038/s41591-018-0300-7>
13. Samek, W., & Müller, K. R. (2019). Towards Explainable Artificial Intelligence. In *Explainable AI: Interpreting, Explaining and Visualizing Deep Learning* (pp. 5-22). Springer, Cham. https://doi.org/10.1007/978-3-030-28954-6_1.
14. Chicco, D., & Jurman, G. (2020). The Compensations of the Matthews Correlation Coefficient (MCC) over F1 Score and Accuracy in Binary Classification Evaluation. *BMC Genomics*, 21(1), <https://doi.org/10.1186/s12864-019-6413-7>