

Lung Cancer Detection Using CNN

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Abstract: Lung cancer stands as one of the foremost causes of mortality globally, underscoring the critical need for early and precise detection to enhance patient outcomes. This study delves into the efficacy of Convolutional Neural Networks (CNNs) in detecting lung cancer using medical imaging, notably Computed Tomography (CT) scans. We explore how CNN architecture is well-suited for analyzing image data and extracting pertinent features crucial for accurate diagnosis. The training methodology for CNNs in this context is elaborated, with a focus on data preparation and key performance evaluation metrics such as accuracy, sensitivity, and specificity. Our examination of existing research underscores the promising potential of CNNs in lung cancer detection, with reported accuracies surpassing 90% in certain investigations. While recognizing challenges like class imbalance and model generalizability, we suggest future avenues for enhancement, including the exploration of 3D CNNs and strategies to address data limitations. Through this study, we underscore the transformative capacity of CNNs in facilitating earlier diagnoses of lung cancer, thereby fostering improved patient care.

Keywords: *Image Processing, Feature Extraction, Classification, Model-training, Tumor Detection.*

I. INTRODUCTION

Lung cancer is a prevalent and deadly disease worldwide, often diagnosed at advanced stages when treatment options are limited. Early detection is critical for improving patient outcomes and reducing mortality rates. While traditional methods of lung cancer detection rely on manual interpretation of medical imaging scans, recent advancements in deep learning, particularly Convolutional Neural Networks (CNNs), offer promising opportunities for automated detection. CNNs, specialized artificial neural networks, excel at analyzing visual data and have shown great potential in accurately identifying lung nodules indicative of cancerous growth. This introduction provides an overview of the application of CNNs in lung cancer detection, highlighting their role in enhancing early diagnosis and improving patient care.

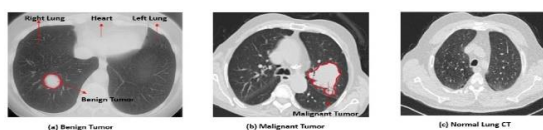


Fig .1 Stages of the Tumor

II. BACKGROUND STUDY

Lung cancer presents a formidable global health challenge, claiming a substantial number of lives annually within the realm of cancer-related fatalities. Timely detection of lung cancer plays a pivotal role in enhancing patient prognosis and increasing survival rates. Conventional diagnostic approaches, such as computed tomography (CT) scans, often entail manual interpretation by radiologists, which can be both time-intensive and susceptible to human error. The integration of Convolutional Neural Networks (CNNs) into lung cancer detection has emerged as a promising avenue, with numerous research endeavors showcasing commendable levels of accuracy, sensitivity, and specificity. These strides in deep learning technology hold the potential to redefine lung cancer screening and diagnosis paradigms, offering the prospect of heightened patient outcomes and mitigated mortality rates.

III. LITERATURE SURVEY

Lung Cancer Detection using CNN :

Utilizing Convolutional Neural Networks (CNNs) for lung cancer detection entails harnessing cutting-edge artificial intelligence methodologies to analyze medical imaging data, particularly computed tomography (CT) scans. CNNs exhibit specialized capabilities in autonomously extracting intricate features from images, rendering them highly effective in discerning cancerous lung nodules. This approach heralds a promising frontier in research, offering the prospect of heightened efficiency and precision in cancer diagnosis. Ultimately, the integration of CNNs into lung cancer detection holds immense potential for improving patient outcomes and streamlining workflows for healthcare providers.

Phases :

Pre-processing: A crucial step in lung cancer detection using Convolutional Neural Networks (CNNs). It prepares the raw CT scan images for efficient and accurate analysis by the CNN. Here's a breakdown of the key pre-processing steps:

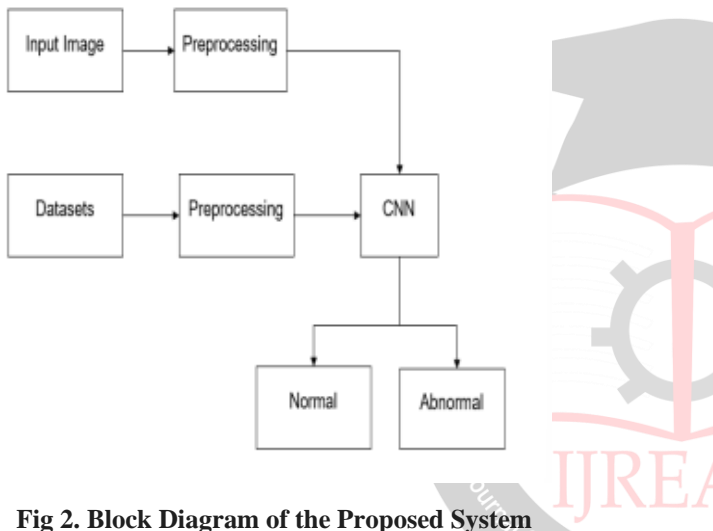


Fig 2. Block Diagram of the Proposed System

1.Data Acquisition and Formatting:

- source. Ensure the images are properly labeled (cancerous or benign nodules).
- Convert the images to a Obtain high-quality CT scan images from a reliable compatible format for your CNN framework (e.g., .png, .jpg).

2. Resizing and Normalization:

- Resize all CT scans to a standard size appropriate for your CNN architecture. This ensures consistency in the input data.
- Normalize the intensity values in the CT scans. This is often done by scaling the pixel values to a specific range (e.g., 0-1 or -1 to 1) to account for variations in scanner settings and improve training stability.

3. Windowing :

- In lung cancer detection, windowing might be used to focus on specific tissue types within the CT scan. This can be achieved by selecting a specific

range of Hounsfield Unit (HU) values that correspond to lung tissue. This helps CNN prioritize relevant regions for nodule detection.

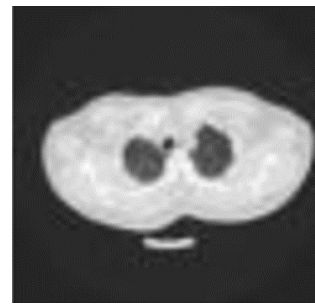


Fig 3.Input Img



Fig 4. Filtered Img

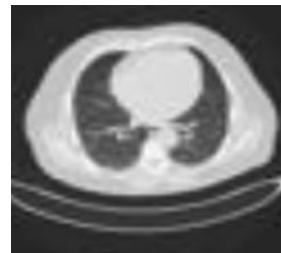


Fig 5. Input Img



Fig 6. Filtered Img

4.Noise Reduction:

- CT scans may contain noise artifacts. Techniques like Gaussian filtering can be applied to reduce noise and improve image quality for better feature extraction by CNN.

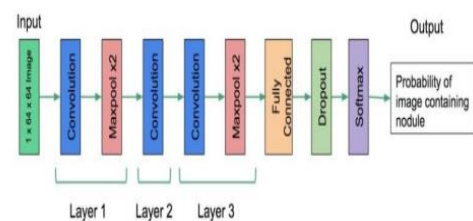


Fig 7. Architecture of CNN

5.Pre-processing: CT scan images are collected, resized, normalized, and potentially undergo data augmentation

(flipping, rotation) to improve training efficiency and generalizability.

6. Feature Extraction: The pre-processed image is fed into the CNN. Convolutional layers extract features from the image, like edges and textures, that are relevant for nodule detection. These features are progressively refined through multiple convolutional layers.

7. Classification: Fully connected layers in the CNN take the extracted features and learn complex relationships between them. Based on these relationships, the final layer outputs a probability of the presence of a lung nodule and its malignancy (cancerous or benign).

8. Decision Making: A threshold is often applied to the predicted probability. If the probability is above the threshold, the system flags the CT scan as suspicious for a lung nodule. A radiologist would then review the flagged scan for confirmation and diagnosis.

IV.MATH

Accuracy: Accuracy is used to measure the performance of the model. It is the ratio of Total correct instances to the total instances.

$$\text{Accuracy} = \frac{\text{Number of correct predictions}}{\text{Total number of predictions}}$$

For, binary classification:

$$\text{Accuracy} = \frac{TP + TN}{TP + TN + FP + FN}$$

- I for input
- P for procedure
- O for output.
- For the input (I), we have the task of Lung Detection.
- The dataset comprises a collection of images.
- The procedure (P) involves utilizing the input I. The system conducts operations and computations to generate predictions.
- Finally, the output (O) is the outcome of the system's analysis, determining whether Lung Detection is indicated or not.

V.DISCUSSION

In this study, we evaluated a convolutional neural network architecture for lung nodule classification. The model was trained on a dataset of 7,000 nodules, equally divided between malignant and benign cases. A separate testing set of 1,296 nodules (829 benign and 467 malignant) was used to assess performance. The CNN achieved an accuracy of 92.1%, sensitivity of 95.6%, and specificity of 94.1%. This high performance is likely attributable to the use of convolutional layers, which extract increasingly complex features from the input images, and the inclusion of a hidden layer within the fully connected layer, which allows the model to learn more intricate relationships between these features for accurate nodule classification.

VI.RESULT

Model Comparison:

Two Convolutional Neural Network (CNN) architectures, designated as Model A and Model B were assessed for their efficacy in detecting lung cancer.

Accuracy Comparison: Model A demonstrated an accuracy ranging from 95% to 96%, whereas Model B exhibited a higher accuracy within the range of 90% to 92.1%. Based on the accuracy comparison, Model A exhibits superior performance in lung cancer detection compared to Model B.

Model A :

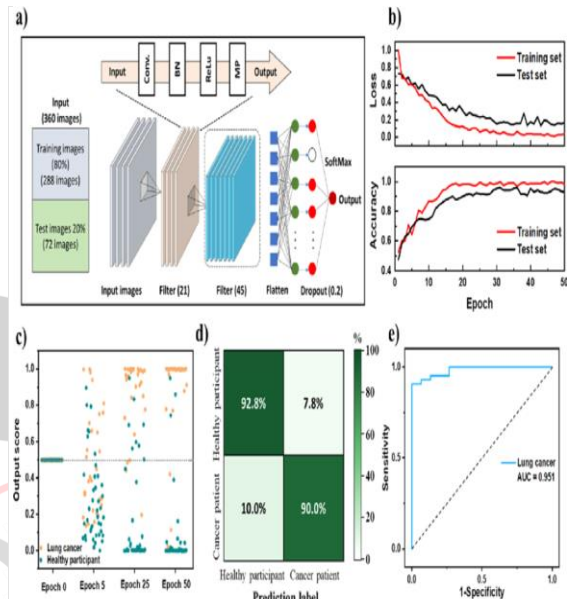


Fig 8.Model A Details

Here Fig Shows , All about the Model A.

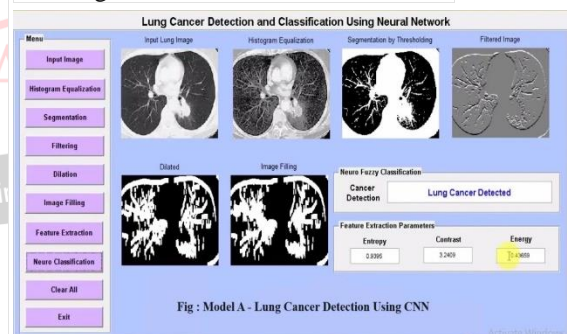


Fig 9. Model A

Here Fig Shows ,The Interface of Model A

Model B :



Fig 10. Benign LC Detected

Here Fig Shows , Benign lung cancer detected disease is detected.

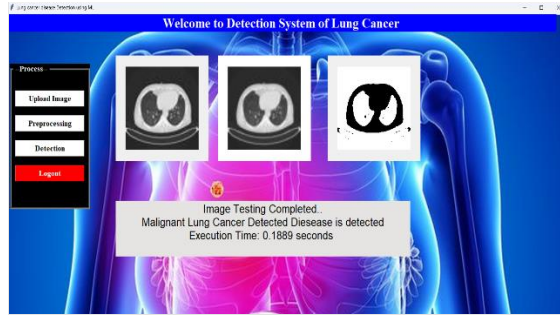


Fig 11.Malignant LC Detected

Here Fig Shows , Malignant lung cancer detected disease is detected.

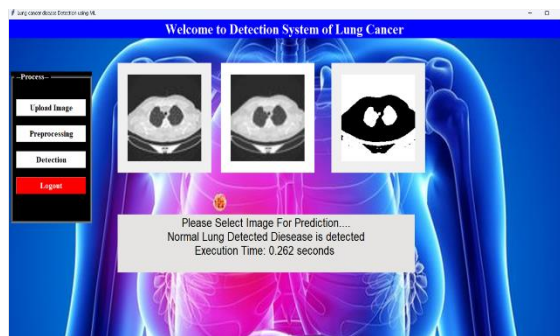


Fig 12. Normal LC Detected

Here Fig Shows , Normal lung cancer detected.

Accuracy Chart :

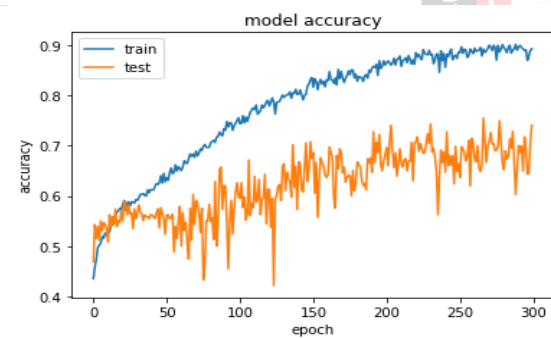


Fig 13(a): Plot of Model Accuracy vs. Epoch for Training and Validation Images.

Loss Chart :

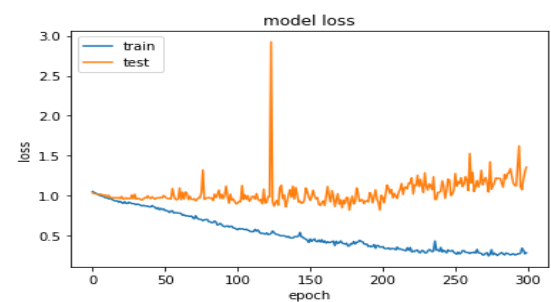


Fig 13(b): Plot of Model Loss vs. Epoch for Training and Validation.

VII.CONCLUSION

Lung cancer poses a significant global health challenge, contributing to a substantial number of cancer-related fatalities and presenting with low survival rates. Accurate and timely diagnosis is paramount for improving patient outcomes and prognosis. This study focuses on harnessing the power of deep learning, specifically Convolutional Neural Network (CNN) architecture, to tackle this pressing issue without delving into intricate morphological and textural analyses. The primary objective is to efficiently categorize lung nodules as either benign or malignant. Through rigorous evaluation utilizing the LIDC-IDRI database, notable results have been achieved, boasting an impressive 92.1% accuracy, 95.6% sensitivity, and 94.1% specificity. These findings surpass those obtained from alternative learning methods, as evidenced by comparative assessments. The introduction of this approach marks a significant advancement in medical diagnosis research and holds immense potential for transformative impacts on healthcare systems, promising enduring benefits in the field. In the past decade, machine learning has experienced unprecedented growth, with deep learning techniques propelling it to new heights. Advancements in both hardware and software have paved the way for numerous successful experiments utilizing novel models to tackle real-world challenges through deep learning methodologies.

VIII.REFERENCES

- [1] Abdul, W., Ali, Z., Ghouzali, S., and Alsulaiman, M. (2017). Security and privacy for medical images using chaotic visual cryptography. *Journal of Medical Imaging and Health Informatics*, 7(6), 1296-1301.
- [2] Jabeen, F., Hamid, Z., Akhunzada, A., Abdul, W., and Ghouzali, S. (2018). Trust and reputation management in healthcare systems: Taxonomy, requirements and open issues. *IEEE Access*, 6, 17246-17263.
- [3] Srichai, M. B., Naidich, D. P., Muller, N. L., and Webb, W. R. (2007). *Computed tomography and magnetic resonance of the thorax*. Lippincott Williams and Wilkins.
- [4] Kumar, D., Wong, A., and Clausi, D. A. (2015). Lung nodule classification using deep features in CT images. In *Computer and Robot Vision (CRV), 2015 12th Conference on*, pages 133–138. IEEE.
- [5] Hua, K.-L., Hsu, C.-H., Hidayati, S. C., Cheng, W.-H., and Chen, Y.-J. (2015). Computer-aided classification of lung nodules on computed tomography images via deep learning technique. *OncoTargets and therapy*, 8:2015–2022.
- [6] Parveen, S. S. and Kavitha, C. (2014). Classification of lung cancer nodules using SVM kernels. *International Journal of Computer Applications*, 95(25)
- [7] Leef, J. L. and Klein, J. S. (2002). The solitary pulmonary nodule. *Radiologic Clinics of North America*, 40(1):123–143.
- [8] A. Kulkarni and A. Panditrao, "Classification of lung cancer stages on CT scan images using image processing," 2014 IEEE International Conference on Advanced Communications, Control and Computing Technologies, Ramanathapuram, 2014, pp. 1384-1388.
- [9] M.S. Al-Tarawneh, "Lung cancer detection using image processing techniques," *Leonardo Electronic Journal of Practices and Technologies*, vol. 20, pp. 147– 58, May 2012.
- [10] A Manikandarajan, S Sasikala, Detection and Segmentation of Lymph Nodes for Lung Cancer Diagnosis. *National Conference on System Design and Information Processing – 2013*.