

An Empirical Study Of Melanoma Detection And Its Deep Learning Classifiers

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ABSTRACT

Melanoma is a form of skin cancer that generates from melanocytes and is predominantly diagnosed visually, starting with an initial treatment and subsequently, a biopsy and histopathological exam. Automated skin lesion diagnosis using images is a difficult task and a completely monitoring detection of skin tumors is very necessary to enhance pathologists' accuracy and performance. The advancement of deep learning technology has given us the ability to differentiate malignant melanoma from the many benign mimics that do not need biopsy. Deep learning techniques should not only enable early diagnosis of melanoma, but also reduce the large number of unnecessary and expensive biopsy procedures. In this paper we provide an overview of computerized melanoma detection , as well as segmentation stages along with various deep learning networks used for classification.

Keywords

Classification, Deep Learning, Melanoma Detection, Pathology, Skin Lesion, SKin Tumors.

1. INTRODUCTION

Melanoma is the most lethal type of skin cancer and constitutes about 75 percent of skin cancer-related deaths. Precise early detection of melanoma may greatly improve patients' survival rate. Melanoma is easily contagious if diagnosed early, but progressive melanoma may spread to lymph nodes and other organs which can be lethal. Medical expertise and specialized equipment are important for early and effective melanoma detection. But restricted availability to expert consultation gives rise to challenges facing the populations at risk for this disease with sufficient levels of care.

In recent years, deep learning is being used for all kinds of medical diagnosis. Deep learning can help which attempts to categorize the set of inputs directly, whether it be images, audio or text. It can offer an outstanding, up-to - date classification or category that often beats human assessment. Deep learning on its neural network model has several layers, and is provided with training . The most common neural network used for deep learning is the Convolutional Neural Network (CNN) Vijayalakshmi et al.[2019].

The dermoscopy technique was suggested to improve melanoma diagnostic performance. Dermoscopy is a non-invasive skin imaging procedure to create an enlarged and enhanced skin area image for improved spot visibility, which improves the skin lesion 's visual effect by reducing surface reflection. However, automated detection of melanoma from dermoscopic images is still a hard process, as it poses many challenges Hanon et al.[2015].

First, the poor contrast between skin lesions and the normal region of the skin makes it impossible to segment specific areas of the lesions. Second, melanoma and non-melanoma lesions may well have a high level of cognitive similarity, making it difficult to differentiate between melanoma lesion and non-melanoma. Third, the difference of skin conditions , e.g. color of the skin, natural hairs or veins, among patients causes specific melanoma presentation of terms of color and texture etc Mhaske et al.[2013].

Another departure from the stereotypical uplifted dark prototype of the past of many recent early melanomas is that they are often flat. In addition to coloring and altitude, there are several other features of melanomas in the lesion, such as texture and the presence of certain structures (clinical features), which distinguish them from benign lesions. Though Merkel cell carcinoma is more likely to result in death in a given instance, melanoma causes more deaths generally than any other form of skin cancer. Around 76,380 (46,870 men and 29,510 women) cases reported of melanomas are approximated to be diagnosed in 2025 according to the American Cancer Society (ACS).

Every year the frequency of melanoma has increased. Many of these lives could be saved if melanoma were to be identified at the initial point, when it is easily treatable. In the particular dermatology field, there are fairly few data sets and perhaps even fewer skin lesion image datasets. Besides that, most of these sets of data are too small and/or not accessible to the public, thus creating a major obstacle to conducting reproducible research in the area. A majority of researches that use different technologies for early detection of melanoma are being undertaken around the world Arasi et al.[2016].

With this detailed roadmap of melanoma detection and association of deep learning for its diagnosis, Section II studies the background of deep learning in melanoma detection, Section III discusses the segmentation stages in diagnosis and Section IV studies various deep learning networks used for diagnosis followed by conclusion.

2. RELATED STUDY

More recently, the emergence of deep learning has successfully developed medical image analysis structures that can exhibit remarkable accuracy to the point of expressing concern about the human radiologist's future. Convolutional neural networks have yielded positive results when categorizing skin lesions. There is a considerable amount of research on improving computer-assisted dermatology algorithms. Many methods depend on hand crafted features and can not be scaled to huge data sets Gautam et al.[2015].

Recent advances in the field of deep learning unexpectedly triggered vision algorithms move, depending mainly on costly manual extraction. The creation of convolutional neural networks (CNNs), and AlexNet in general, is widely considered the pivotal moment in deep learning science. Additionally, the methods used to automatically analyze skin lesions have lately become dominated by deep learning algorithms. A remarkable majority of these methods are ensemble strategies. Although a great deal of work has been suggested, there is indeed a margin of performance improvement for both segmentation and classification of skin lesions Sultana et al.[2018].

The International Skin Imaging Consortium (ISIC) is a consortium that focuses on automated skin lesion detection, and has been actively expanding its datasets since 2016. In ISIC 2017, illustrated datasets were published for scientists to facilitate the precision of automatic melanoma detection systems for the three processing applications related to skin lesion images, such as lesion segmentation, dermoscopic feature extraction and lesion classification. Unlike the thoroughly researched segmentation and classification of lesions, dermoscopic extraction of the feature is a recent task in the field Bhati et al.[2015].

Therefore, few studies were suggested to tackle the issue. The medical profession has spent much time and resources in preventive programs, raising public consciousness. Changing reckless conduct, however, does not ensure health, because the risk of skin cancer often depends on how many sunburns people have had in their lives. Thus it is often crucial to spend in developing technologies which can be used to detect skin cancer early.

To address the short supply of specialists particularly in developing countries, a lot of research has been carried out specifically to develop automated image analysis systems to detect skin disease from dermoscopic images. There are some articles that implement interventions and a review of the various techniques employed. There are many dermoscopy works which have developed diagnostic criteria for early melanoma detection. In this work deep analysis is done to study melanoma detection and deep learning networks that often need dermatologists or medical professionals to test.

3. MELANOMA DETECTION STAGES

Deep learning approaches are progressively being used to enhance clinical practice, and the list of examples is becoming longer and that every day. We're not going to try a detailed description of deep learning in medical imaging, but just sketch a few of the landscape before heading through a more comprehensive melanoma detection analysis of deep learning Rehman et al.[2020].

Three main stages are discussed: segmentation of lesions, segmentation of features and classification.

3.1 Lesion Segmentation

Within a dermoscopic image, a skin lesion is a specific marked region that is most commonly differentiated from the normal surrounding tissue due to different color or texture; this region is known to be the area of concern for further analysis. Lesion segmentation involves splitting that region (lesion) from the normal (non-lesion) region of the skin. Lesion segmentation is a very essential step in the analysis of dermoscopic images, as it enables the evaluation of potential global morphological characteristics particular to the lesion and at the same time provides a restricted region for the segmentation of different local clinical characteristics at a later stage Mustafa et al.[2017].

The edge of the segmented region, called the border or boundary, also includes support for use in lesion analysis. Right identification of the non-lesional area often offers a region of normal skin for calculating relative colors and other important elements, ignoring objects present in some images. Segmentation of lesions is a very major challenge for several reasons. For certain cases , the primary cause is the comparatively poor contrast between regular and lesional skin. Other causes include skin tone differences, skin aberrations, non-uniform lighting, non-uniform chromatic aberration, the lesion's physical location and, most pertinently, lesion variations.

Increasing these considerations should be taken into account when developing a robust segmentation algorithm for lesions. The impact of most of these in lesion segmentation can be mitigated by proper pre-processing steps. A thorough understanding of pre-processing steps may play an important role in precise segmentation of the lesions. Post-processing is important for effective segmentation of the lesions and for the identification and formation of features Subashini et al.[2020].

3.2 Feature Segmentation

There may be numerous health features in a given dermoscopic image of a lesion which imply whether the lesion is benign or malignant. A provided characteristic may be global, covering the region of lesion; local, present in a specific area; or current in the lesion at multiple spots. Therefore, unlike lesion segmentation, in most cases each trait segmentation will have several segments across the region of the lesion.

The widely used features in forecasting melanoma are pigment networks, streaks, regression frameworks, starburst structures, etc. Most of these function structures are often commonly known as having different patterns. Benign dermoscopic features in melanomas can be vitally valuable in rapid recognition whilst using these features to identify melanoma. As with segmentation of lesions, segmentation of features often involves phases in pre-processing , segmentation, and post-processing. Colour, texture , shape, structure, relative size, lesion location etc. are some of the defining qualities used in the segmentation of clinical features Gupta et al.[2016].

Pre-processing steps for features are largely function-dependent. Pre-processing methodologies such as standardization / correction of color and correction of light variation are closely related to those used in lesion segmentation. Over several iterations a variety of these pre-processing methods are rigorously tested to find the right place that best fits the detection of the targeted function. A pragmatic approach to dealing with the artefacts present in the image is taken during the feature segmentation step.

The targeted feature is often obscured by artifacts such as hairs and gels. Appropriately, hair or gel masks are either used in pre-processing or post-processing, based on the research paradigm to segmentation. The final segmentation output of the feature will indeed have several distributed segments of various shapes and sizes based on the segmented feature. For this case, post-processing is also critical and should be carefully chosen based on the sort of filtering required to produce the best performance Dhawan et al.[2008].

3.3. Feature Generation and Classification

Predicting a lesion as benign or malignant is a question of binary classification. To overcome a classification problem, it needs features or characteristics which characterize the samples. Such features can be scientifically collected in the issue of melanoma detection, and others are created using dermoscopy images.

Lesion and segmentation of features are the early steps in the process of character creation. From the lesion boundary it is possible to measure lesion-related morphological characteristics such as approximate diameter, symmetry, irregularity, eccentricity, etc. Because of the importance of different color distribution and texture around

the lesion, clustering techniques could also be used to split the lesion into different regions, and then color and texture characteristics can be computed based from those regions Khakabi et al.[2012].

The field of lesion can also be conservatively divided into separate peripheral and central regions from which global features can be derived. Specific attributes and/or masks generated using the function segmentation are used to build a clinical feature. In this case too, color and texture characteristics are very frequently used. However, it is also possible to use morphological attributes of such segments as form, height, position in the lesion etc. In certain cases, it is also necessary to look at the characteristics of neighboring regions for appropriate melanoma discrimination.

The final move is to use certain attributes (global and feature specific) to differentiate melanomas from benign lesions in a classifier. There are a variety of classifiers available for exploration and they can be selected based on their results. There are also other classifiers which can be discussed for classification as well. The classifier result assessment is based on the system's overall performance, sensitivity, and specificity on the test range. It is very necessary not to neglect melanoma in this area, thus being able to recognize benign lesions as accurately as possible. In other words, the ultimate aim is to target the highest sensitivity while improving the overall accuracy to increase the specificity Sengupta et al.[2017].

4. DEEP LEARNING NETWORKS FOR MELANOMA DETECTION

Melanoma detection using regular convolutional neural networks. Having an automated method for melanoma detection will assist dermatologists in the early diagnosis of skin cancer. This section reviews various convolutional neural networks used for melanoma detection [1]; Ali et al.[2017].

4.1 AlexNet

The network which initiated the recent deep learning revolution by gaining a big margin in the 2012 ILSVRC market. Prominent characteristics include the use of RELUs, normalization of dropouts, the separation of computations on multiple GPUs through the use of data increase during preparation.

4.2 ZFNet

ZFNet, a fairly small AlexNet modification, won the ILSVRC competition in 2013. VGG suggested the idea of using smaller filter kernels and thus deeper networks (up to 19 layers for VGG19, relative to 7 for AlexNet and ZFNet) and training deeper networks utilizing pretraining on shallower models.

4.3 GoogLeNet

GoogLeNet has advocated the concept of more dynamically stacking layers in CNNs, as networks in networks. GoogLeNet includes multiple inception modules within a fairly standard framework (called the stem), in which multiple different filter sizes are added to the data, and their effects are inserted. Such multi-scale processing helps the module to concurrently extract functions at various levels of detail. GoogLeNet also suggested the idea of not using end-to-end fully linked layers, but instead global average pooling, lowering the amount of design variables substantially. It won the competition in ILSVRC in 2014.

4.4 ResNet

ResNet has implemented activation functions which allow much deeper networks to be equipped. A 152-layer deep ResNet won the ILSVRC contest in 2015, and also developed a 1001-layer version with performance. Other than the traditional route, skipping connections gives the network the option of simply copying the activations from layer to layer (more specifically, from ResNet block to ResNet block), maintaining information as data moves between layers. Some features are best installed in shallow networks while others require that more profundity. The skip links both encourage and increase at the same time existence of the network as the data is fed in. As the skip connections allow the network to learn residuals, ResNets is doing a kind of boost.

4.5 HighwayNet

Highway networks are another way to improve depth based on gating modules, a concept from recurrent Long Short Term Memory (LSTM) networks that allows to optimize the network's skip connections. The gates can be trained to useful identity function combinations (as in ResNets) and the regular nonlinearity by which to feed its data.

4.6 DenseNet

DenseNet expands on ResNet's concepts, but instead of applying the one-layer activations to later layers, they are actually being compared together. Then the original inputs are held at each layer in relation to the activations from the preceding layer (again, more specifically, between blocks of layers), maintaining some kind of control structure. This promotes reuse of the function and reduces the number of parameters for a given depth. Therefore, DenseNets are especially well suited for smaller data sets (outperforming others on e.g. Cifar-10 and Cifar-100).

4.7 SENet

SENet is a Squeeze-and-Excitation Networks that earned the ILSVRC 2017 competition, improves on ResNext but introduces learnable parameters that can be used by the network to measure every function map, where previous systems simply put them up. Such SE-blocks allow the system to separately design the channel and extract pattern, flexibility of the model. SE-blocks can easily be added to any CNN model, with negligible increase in computational costs.

4.8 NASNet

NASNet is a neural network-designed CNN architecture which beats all previous life form-designed networks during the ILSVRC competition. It was generated using AutoML23, Google Brain's software design reinforcement learning method. It was generated using AutoML23, Google Brain's software design reinforcement learning method. A controller network (a recurrent neural network) introduces architectures targeted at performing on a specific level for a particular task, and learning to suggest better models by experimentation. NASNet was based on Cifar-10 and had fairly modest computational demands, but still surpassed ILSVRC data on the prior latest technology.

4.9 YOLO

YOLO is a modern, simpler way to do the identification and classification of objects in images simultaneously. It utilizes a specific CNN, which works directly on the bounding boxes and class probabilities of the image and output. It integrates many elements from the above-mentioned networks, including activation components and pretraining of a relatively smaller version. It is quick enough to allow for processing in real time. By raising the size of the model, YOLO makes trade accuracy for speed easier. YOLOv3-tiny has been capable of processing images on a typical benchmark data set at more than 200 frames per second, while still making accurate predictions.

4.10 GAN

GANs is an oppositional generative network composed of two neural networks pitting one against the other. The generative network G is tasked with generating samples which should be identified by the exclusionary network D as coming from the conceptual network or the training data. The networks are concurrently educated, where G aims to calculate the likelihood that D will make a mistake while D aims for high precision in classification.

4.11 Siamese Net

Siamese nets is an old concept that has been shown recently to allow one-shot learning from a specific instance. A siamese circuit consists of three similar neural networks connected at the top, both the structure and the

weights. They're equipped to distinguish input pairs together. When sorted out, the network capabilities can be used to do one-shot learning without having to re educate.

4.12 U-Net

U-net is a widely popular and efficient 2D image segmentation network. When an input image is processed, it is pre-sampled by a typical CNN using transpose convolutions, being upsampled until it exceeds its original dimension. Additionally, there are skip connections based on ResNet 's ideas that concatenate features from downsampling to upsampling routes. It is a network which is fully-convolutional.

4.13 V-Net

As in ResNet, V-net is a three-dimensional U-net variant with volumetric convolutions and skip links.

5.CONCLUSION

State-of-the-art classifiers based on convolutional neural networks (CNNs) were shown to identify skin cancer images on a par with dermatologists and could allow for lifesaving and rapid diagnosis, even outside the hospital, by downloading mobile device apps. To our knowledge, this study presents the complete deep learning networks available for melanoma detection. This study provides the first systematic analysis of state-of-the-art studies into various segmentations of CNN skin lesions. We also limit our study to list the classifiers of skin lesions.

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