



CLASSIFICATION OF DIABETIC RETINOPATHY SEVERITY BASED ON GCA ATTENTION MECHANISM

SOWMIYA S R¹, SUBASHINI G², SALINI S², VIJAYALAKSHMI T²

¹Department of CSE, Research Scholar, B.S.Abdur Rahman Crescent Institute Of Science And Technology, Chennai

²Department of CSE, UG Student, Dhanalakshmi Srinivasan Engineering College, Perambalur

ABSTRACT

Diabetic retinopathy (DR) could be a serious disease originating from DM and also the most typical explanation for sightlessness within the developed countries. Early treatment will stop patients to become affected from this condition or a minimum of the progression of DR are often bogged down. The key to the first detection is to acknowledge microaneurysms (MAs) within the complex body part of the attention in time. Thus, mass screening of diabetic patients is very desired, however manual grading is slow and resource rigorous. Microaneurysms (MAs) are early signs of DR, that the detection of those lesions is important in associate economical screening program to satisfy clinical protocols. Early small aneurism detection will facilitate cut back the incidence of sightlessness and small aneurism detection is that the beginning in machine-controlled screening of diabetic retinopathy. A reliable screening system for the detection of MAs on digital complex body part pictures will give nice help to ophthalmologists in tough diagnoses. This project presents image process techniques like dark object detection to investigate the condition or enhance the input image so as to form it appropriate for any process and improve the visibility of Microaneurysm in color complex body part pictures. The correlation between every processed profile and a typical microaneurysm profile is measured and used as a multiplier factor to regulate the form of the candidate profile. every candidate is then classified supported unfold spectrographic analysis options. we have a tendency to implement this retinal imaging in real time environments.

Keywords: —Deep Learning, Attention mechanism, convolutional neural network, deep learning, diabetic retinopathy, medical images.

INTRODUCTION

Diabetic retinopathy (DR) is one in every of the most important complications of polygenic disorder because of the retinal harm caused by the rupture of capillaries from high levels of sugar [1]. There square measure currently 460 million folks worldwide aged 20-79 years with polygenic disorder and this range can exceed 700 million by 2045 [2], [3]. because of the dramatic increase within the range of individuals with polygenic disorder, the amount of individuals with DR is predicted to achieve 191 million by 2030 [4]. Early-stage DR is a smaller amount harmful, doesn't cause serious handicap and is clinically treatable [5], treatment in a very timely manner will cut back the danger of handicap by close to fifty seven [6]. Therefore, timely examination and treatment square measure the most measures to shield visual modality.

The World Health Organization estimates that 422 million folks have polygenic disorder. the amount of polygenic disorder patients is increasing considerably from year to year. the amount is predicted to extend to 522 million in 2034, as calculable by the International polygenic disorder Federation (IDF) [1].

Diabetic Retinopathy (DR), referred to as diabetic disease as a result of it happens on membrane because of polygenic disorder. DR is one in every of the leading causes of preventable vision defect within the world. DR is one in every of the complications of polygenic disorder within the membrane vessels [2]. Stage of DR is delicate, moderate, severe, and Proliferative Diabetic Retinopathy (PDR). each severity stage of DR has signed, like microanarysm, plant fibre spots, exudates, laborious exudates, and neovascularization [3-7]. DR may be a severe illness, therefore appropriate treatment for patients is important to try and do for preventing vision defect. within the examination of the membrane in typical ways to sight DR, skilled ability is required, high value and time overwhelming to perform the severity levels of DR. Doctors ought to look one by one to make sure the condition of the patient and their membrane to relinquish appropriate treatment for patients. From the purpose of health care read, it's simpler once DR is detected early [8]. Recent technology development in massive information has enabled victimisation computer science (AI), Machine Learning (ML), and Deep Learning (DL) for health care. several approaches supported cc are applied for detection and classification of DR within the severity levels through bodily structure images[9-12]. bodily structure pictures is employed for featured extraction [13]. Applied of cc used bar graph Of bound Gradients and Shallow learning to categoryify DR into delicate and traditional class achieved eighty fifth accuracy [14]. one in every of the ways utilized in deciliter might improve the performance of object detection and visual visual perception [15, 16]. deciliter may be a set of cc that uses multiple layers containing non-linear process units. deciliter application uses object detection of options of pictures, like lesion options within the bodily structure pictures, for detection DR [17]. one in every of the algorithms that helped CNN for higher accuracy to classify pictures is that the attention mechanism (AM). The AM is AN algorithmic program, that contains 3 steps for implementation, like international, local, and fusion branches [7]. AM focuses on the pathological space once bodily structure pictures square measure divided into traditional and DR and into four levels such delicate, moderate, severe, and PDR. during this study, we have a tendency to planned an AM and CNN as ways for the detection and classification of DR victimisation bodily structure pictures. we have a tendency to used Googlenet as an design of CNN as a result of Googlenet has deep design. we have a tendency to used AM as a result of it will concentrate on the pathological space, and Googlenet was wont to classify DR into traditional, mild NPDR, moderate NPDR, severe NPDR, and PDR. This analysis conjointly used Googlenet design while not an attention mechanism for detection and classifying DR victimisation bodily structure pictures. we have a tendency to compared the results between Googlenet with and while not attention mechanism.

RELATED WORK

Diabetic retinopathy severity detection aims to assist physicians build a timely designation of early bodily structure unwellness and supply a explanation for any treatment supported the severity of DR by discriminating lesion options on color bodily structure pictures or Gregorian calendar month pictures through image process techniques and engineering. Early analysis on DR principally used ancient machine learning techniques to spot lesion options. However, in recent years, with the speedy development of computer science technology and engineering, AN increasing variety of students have used deep learning techniques for DR severity classification. At the stage of DR detection victimisation ancient machine learning techniques, researchers have to be compelled to have some medical background and manual extract lesion options from the image dataset, whereat the extracted lesion options area unit fed into a classification model to finish the detection of DR. Nguyen et al. [13] projected a multilayer feedforward neural network with robust strength for DR severity classification. For the first detection and classification of the most symptoms of DR, Zhang et al. [14] used a support vector machine (SVM) to classify preprocessed bright nonlesion areas, exudates and plant fiber spots. Zhang et al. [15] projected a top-down strategy to observe bodily structure hemorrhage, projected combined 2DPCA, and applied virtual SVM to realize higher classification accuracy. To extract the feature vectors of the DR pictures, Soares et al. [16] used pixels and took a second Dennis Gabor moving ridge rework at multiple scales, that were fed into a classification model to spot tube-shaped structure and non-vascular. Nayak et al. [7] used image preprocessing, morphological process and texture analysis techniques to observe lesion options and used them as inputs to a synthetic neural network for the automated detection of DR severity. AN automatic system for analyzing DR lesions within the central field of membrane is projected by Barriga et al. [8], the system extracted options victimisation amplitude and FM and used partial statistical procedure (PLS) and a support vector machine (SVM) for classification. Priya et al. [9] compared the performance of a probabilistic neural

network (PNN) and support vector machine (SVM) for DR binary classification, the SVM model achieved ninety eight.608% accuracy that was higher than the opposite models. Roychowdhury et al. [2] analyzed bodily structure pictures in several contexts and reduced the amount of options used for lesion classification to get DR severity categories victimisation machine learning. during this paper [2], Srivastava et al. used a Frangi filter to extract options from the inexperienced channel of bodily structure pictures to coach a SVM classifier, that foreseen the severity of DR. Santhakumar et al. [2] divided the lesion options of bodily structure pictures into many rectangular patches, then passed the options of the patches into a support vector machine (SVM) for DR severity classification. This paper [3] makes an attempt to observe red lesions from retinal bodily structure pictures, Srivastava et al. projected a brand new filter with robust strength to discriminate between tube-shaped structure and red lesions, the lesion options were extracted victimisation the corresponding filter for red lesions of various sizes, the experiment results show that this filter was useful for the automated detection of DR. though these ways will observe the severity of DR to some extent, machine learning ways supported the standard approach need an outsized variety of annotated options, this method consumes loads of resources and time for feature annotation, it has to section the a part of the lesion from the full bodily structure image, that makes the full annotation method additional exacting in terms of medical background and inefficient. Moreover, it's simple to miss the lesion options within the bodily structure image throughout the annotation method. However, deep learning techniques don't need the manual annotation and segmentation of lesion options, for instance, convolutional neural networks (CNNs) will extract lesion options from the complete bodily structure image while not missing options compared to manual ones. additionally, once CNNs extract bodily structure image options, in keeping with the various receptive field, it's simple to extract elaborate options from convolutional kernels getting ready to the network input like the feel and form of the image, whereas additional linguistics options area unit simply extracted for convolutional kernels getting ready to the network output. Nowadays, an increasing variety of researchers area unit applying deep learning techniques for DR severity detection. The adoption of CNN has created the DR designation method straightforward and economical, Pratt et al. [4] used CNN structures to extract unwellness options from bodily structure pictures and trained the model victimisation information augmentation techniques to modify the extraction of advanced lesion options. a way for deep visual feature (DVF) extraction supported scale-invariant color density and gradient location direction bar graph was projected by Abbas et al. [5], with the full model having no pre-processing or post-processing stages, the extracted options were reworked and fed into a multilayer classification network to get the prediction results. Kanungo et al. [6] derived the impact of hyperparameters and also the quality and amount of coaching information on the model performance through an outsized variety of comparative experiments. because of the uninterpretable black-box nature of however CNNs build selections internally supported image options, Quillec et al. [7] projected some way to make heatmaps to point out that pixels in a picture play a job in prediction at the image level and applied it to DR screening.

ATTENTION MECHANISM

The attention mechanism was planned by Treisman et al. [3] to simulate a model of the human brain's attention, which may derive attention weights for various factors, accentuation the impact of a selected issue on the model's results. the eye mechanism has been wide employed in deep learning tasks like sequence-to-sequence, image localization [5], image understanding [6], and lip translation [7]. The electrical device structure planned by the Google AI team [8], that discards the formula and convolution structures and relies entirely on the less complicated attention mechanism for process feature sequences, achieved twenty nine.4 blue cheese within the WMT 2014 English-to-German translation task, that was a pair of blue cheese beyond the simplest result at the time. the eye mechanism was introduced to enhance the performance of the encoder-decoder model for AI. the thought behind the eye mechanism was to allow the decoder to utilize the foremost relevant elements of the input sequence in an exceedingly versatile manner, by a weighted combination of all of the encoded input vectors, with the foremost relevant vectors being attributed the best weights.

Alignment scores: The alignment model takes the encoded hidden states, h_i , and also the previous decoder output, (s_{t-1}) , to reckon a score, $(e_{t,i})$, that indicates however well the weather of the input sequence align with the present output at position, t . The alignment model is pictured by a operate, $a(\cdot)$, which may be enforced by a feedforward neural network: $e_{t,i} = a(s_{t-1}, h_i)$ Weights: The weights, $\alpha_{t,i}$ square

measure computed by applying a softmax operation to the antecedently computed alignment scores: $\alpha_{t,i} = \text{softmax}(e_{t,i})$ Context vector: a novel context vector, c_t , is fed into the decoder at whenever step. it's computed by a weighted add of all, T , encoder hidden states: $c_t = \sum_{i=1}^T \alpha_{t,i} h_i$

PROPOSED METHOD

Diabetes could be a well-known sickness that will cause abnormalities within the membrane (diabetic retinopathy) and system (diabetic neuropathy). additionally polygenic disorder will build a significant risk for vessel diseases. Diabetic retinopathy could be a small tube complication caused by polygenic disorder which may result in sightlessness within the operating age population. Blood vessels providing blood provide to the membrane once blood vessels step by step weaken thanks to polygenic disorder, it may be proud and blocked. The disordered and weak tiny blood vessels aren't able to maintain the proper blood provide, they will be burst, and thereby exudate and blood will break to the vitreous half. The blood flown to vitreous half obstructs the trail of sunshine to the membrane, thereby worsens vision. Diabetic retinopathy is one in all the leading disabling diseases in eye; it'll be leading causes of preventable sightlessness within the world. Early diagnosing of diabetic retinopathy allows timely treatments. so as to attain this major concern can need to be invested with into machine-driven screening programs. For machine-driven screening programs of diabetic retinopathy, image process and analysis algorithms need to be developed. Candidate objects area unit initial placed by applying a dark object filtering method. Then singular chemical analysis method detects the microaneurysm. Any object within the image showing MA-like characteristics then Candidate extraction method identifies such characteristic. These candidates can then be additional analyzed or classified into MAs and non-MAs exploitation filtering method. The ways area unit able to extract isolated MAs faraway from different dark objects as well as vessels. However, once associate MA is next to different dark objects, it absolutely was usually not detected however thought-about as a part of the neighboring objects. Calculate its eight neighboring pixels have lower or an equivalent intensity. Here the component regarded to be a neighborhood most (in associate inverted image), if the utilization of those native maxima created it easier to search out out additional MAs. And to implement the attain detection of microaneurysm. multilayered dark object filtering technique scale back common intrusive structures as MA candidates like vessel crossings moreover as several tiny background regions thanks to high native intensity variation.

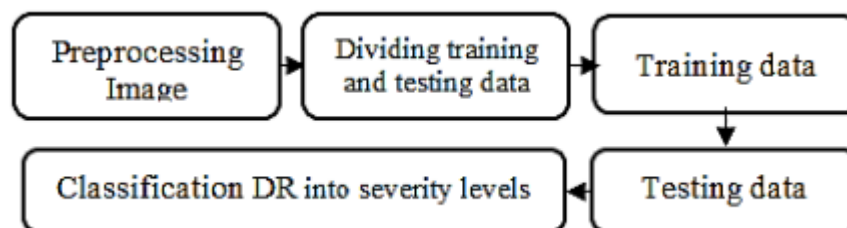


FIG.1.Flowchart DR Classification

GENET STRUCTURE

The deep convolutional neural network model utilized in this paper relies on EfficientNet, that relies on the neural specification search technique (NAS) obtained by equalization the network breadth, depth and input imageresolution, employing a comparatively little variety of parameters however getting higher performance, looking on the various resolutions of the input image, model breadth and depths. EfficientNet are often divided into eight models from EfficientNet-B0 to EfficientNet-B7. EfficientNet-B7 exceeds the accuracy achieved by the simplest GPipe at that point, but with 8.4 times fewer variety of parameters and six.1 times quicker computing speed. we have a tendency to used a parallel filter for operations on the computer file from the previous layer, and lots of receptive field image sizes for convolution square measure, severally, 1x1, 3x3, 5x5, and pooling operation is 3x3. This design has 2 auxiliary classifier layers that square

measure connected to the output of beginning and beginning layers. during this paper, we have a tendency to improve on the MBConv convolutional structure and propose the GConv structure that integrated the ground-controlled approach attention mechanism and also the MBConv structure, as shown in Fig.. Finally, with relevancy the EfficientNet-B0 model derived from NAS technology, the GCA-EfficientNet (GENet) primarily based severity classification model utilized in this paper for DR is projected, as shown in Fig.

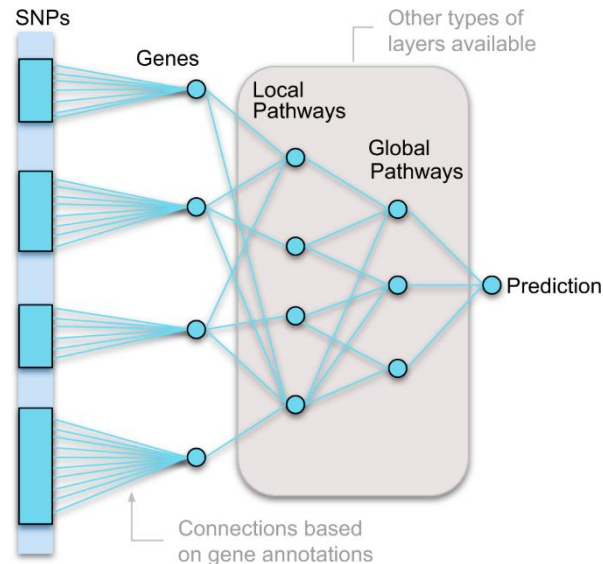


FIG.2.GENET STRUCTURE MODEL

EXPERIMENTAL SETUP

The dataset utilized in this experiment could be a Kaggle competition dataset containing 35126 high-resolution color anatomical structure pictures, that are divided into five classes by skilled clinicians per the severity of DR, the quantity of samples in every class. as a result of the sample variety of various classes during this dataset varies greatly, it'll have a negative impact on the results of the model, which can be addressed by the preprocessing method within the next section. After preprocessing knowledge, anatomical structure pictures within the initial output through convolution and GHB pooling. The perform of this method is to extract the info and verify traditional and DR anatomical structure pictures. After that, the a part of concatenate is employed to attach the results of the primary output and input pictures into the second method, like Googlenet design while not a completely connected layer, and at the tip method, we tend to add deconvolution to suit the dimensions for successive method. within the last method, we tend to used concatenate once more to attach the second method to the last method. The last method used Googlenet design, and that we obtained the classification of multiclass. The dataset utilized in this experiment is taken from anatomical structure cameras in numerous environments, that introduce noise throughout knowledge assortment, there area unit negative impacts like uneven lightweight, therefore image preprocessing is critical to scale back the impact of noise on the experiment results and improve the educational result of the network model. Meanwhile, to unravel the uneven variety of DR pictures in numerous categories, this paper makes the quantity of samples in every category essentially constant by playacting knowledge augmentation techniques on negative samples. though the pre-processed DR pictures may be directly trained for the network, it may be seen from Table one that the quantity of DR pictures in numerous classes varies greatly, which can adversely have an effect on the results of the network model, therefore this paper applies knowledge augmentation process to the negative samples, rotating (90° , 180° , 270°), flipping horizontally and vertically, cropping at the four corners and therefore the center of the negative sample pictures, guaranteeing the quantity of samples in every category is largely constant, finding the sample imbalance drawback. The GENet projected during this paper runs underneath PyTorch one.7.0, Python 3.6 atmosphere. It divides the dataset into coaching and

validation sets per eight : two, the image resolution is about as 224×224 , the cross-entropy loss perform is employed, a hundred epochs area unit learned on the coaching set, random gradient descent with momentum is employed because the model parameter optimizer, the initial learning rate is about to zero.01, the momentum is about to zero.9. so as to create the model finally converge, the trigonometric function hardening learning rate adjustment strategy. the dearth of decent labelled knowledge could be a major challenge for medical image process. once coaching DCNN models, atiny low coaching set is susceptible to overfitting. additionally, deep learning systems need way more coaching time and bigger quantity of information than ancient machine learning systems. so as to unravel the higher than issues, within the model coaching stage, this paper adopts the transfer learning technique. Transfer learning could be a deep learning coaching strategy that a pre-trained model with generalized options is reused in another task, and within the field of laptop vision, specific low-level options like edges, shapes, and textures may be shared between tasks. Therefore, the utilization of transfer learning techniques will fine tune the pre-trained model in downstream tasks, therefore greatly saving coaching time and therefore the quantity of information, permitting the model to converge as shortly as potential and avoiding the overfitting drawback. to confirm the model achieves the required performance as shortly as potential, the parameters of constant structure of GENet and EfficientNet-B0 were wont to initialize the GENet network model exploitation the transfer learning technique within the model coaching stage, the aircraft landing modules with completely different structures were initialized exploitation Kaiming data formatting [4], the models used as comparisons area unit initialized with the official pre-trained models provided by PyTorch official. to research the effectiveness of GENet in DR malady detection, during this paper, GENet and classical DCNN networks area unit compared within the same atmosphere, the experiment results area unit analyzed within the next section.

RESULTS

To evaluate the DR classification performance of GENet rigorously, the model which was trained for 1000 epochs was evaluated comprehensively for accuracy, precision, sensitivity and specificity on the validation set in this paper.

MODELS	Accuracy	precision	sensitivity	specificity
GoogLeNet	0.90	0.901	0.902	0.975
GENet	0.956	0.956	0.956	0.989

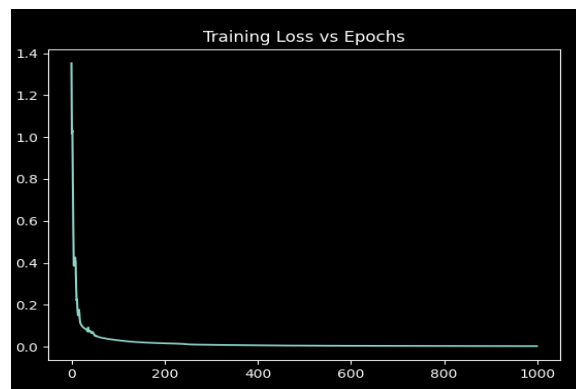


FIG.3. TRAINING LOSS VS NO OF EPOCHS

CONCLUSION

Diabetic retinopathy is one in every of the key complications of diabetes, failure to diagnose and treat it in time will result in severe eye vision loss or perhaps complete visual disorder. However, diabetic retinopathy may be prevented through routine screening and effective treatment, so avoiding the incidence of irreversible visual disorder. With the continual development of machine learning and AI technologies, Associate in Nursing increasing range of machine learning techniques ar utilized in the medical field to help doctors in routine diagnosing and treatment. Therefore, this paper proposes a

world channel attention mechanism for feature maps, named the GCA attention mechanism. Diabetic Retinopathy is one in every of the complications of polygenic disorder and leading visual disorder as a result of the harm in tissue layer. an automatic detection and classification of the DR level has a very important. Early detection permits for appropriate treatment to the patient, that is crucial as a result of early detection will effectively stop visual visual disorder. DR automatic classification of bodily structure pictures will effectively facilitate doctors in diagnosing DR, which might improve the diagnostic potency.

Furthermore, a deep convolutional neural network model GENet, within which the GCA attention mechanism and EfficientNet arE integrated, is projected for the first detection of diabetic retinopathy. within the illness feature extraction stage, for the network model to totally take into account the correlation between feature map channels, this paper proposes Associate in Nursing adjustive convolutional kernel size adjustment algorithmic rule for extracting native channel correlation, that makes GENet adaptively modify the convolutional kernel size in numerous tasks, so the network model is enough to realize higher performance. The coaching method uses transfer learning techniques and trigonometric function hardening algorithms to make sure that the model eventually converges as quickly as attainable. In future work, we'll mix the GCA attention mechanism with a lot of deep learning models to enhance the performance of the model to notice tiny variations between classes, so GENet may be utilized in a lot of situations.

REFERENCES

- [1] C. P. Wilkinson, F. L. Ferris, R. E. Klein, P. P. Lee, C. D. Agardh, M. Davis, D. Dills, A. Kampik, R. Pararajasegaram, and J. T. Verdager, "Proposed international clinical diabetic retinopathy and diabetic macular edema disease severity scales," *Ophthalmology*, vol. 110, no. 9, pp. 1677–1682, Sep. 2003, doi: 10.1016/S0161-6420(03)00475-5.
- [2] P. Saeedi, P. Salpea, S. Karuranga, I. Petersohn, B. Malanda, E. W. Gregg, N. Unwin, S. H. Wild, and R. Williams, "Mortality attributable to diabetes in 20–79 years old adults, 2019 estimates: Results from the international diabetes federation diabetes atlas, 9th edition," *Diabetes Res. Clin. Pract.*, vol. 162, Apr. 2020, Art. no. 108086, doi: 10.1016/j.diabres.2020.108086.
- [3] C. Sabanayagam, R. Banu, M. L. Chee, R. Lee, Y. X. Wang, G. Tan, J. B. Jonas, L. Lamoureux, C.-Y. Cheng, B. E. K. Klein, P. Mitchell, and R. Klein, "Incidence and progression of diabetic retinopathy: A systematic review," *Lancet Diabetes Endocrinol.*, vol. 7, no. 2, pp. 140–149, 2019, doi: 10.1016/s2213-8587(18)30128-1.
- [4] D. S. Ting, G. C. Cheung, and T. Y. Wong, "Diabetic retinopathy: Global prevalence, major risk factors, screening practices and public health challenges: A review," *Clin. Exp. Ophthalmol.*, vol. 44, no. 4, pp. 260–277, May 2016, doi: 10.1111/ceo.12696.
- [5] N. Cho, J. E. Shaw, S. Karuranga, Y. Huang, J. D. da Rocha Fernandes, A. W. Ohlrogge, and B. Malanda, "IDF diabetes atlas: Global estimates of diabetes prevalence for 2017 and projections for 2045," *Diabetes Res. Clin. Pract.*, vol. 138, pp. 271–281, Apr. 2018, doi: 10.1016/j.diabres.2018.02.023.
- [6] Early Treatment Diabetic Retinopathy Study Research Group, "Grading diabetic retinopathy from stereoscopic color fundus photographs— An extension of the modified airie house classification: ETDRS report number 10," *Ophthalmology*, vol. 127, no. 4S, pp. S99–S119, Apr. 2020, doi: 10.1016/S0161-6420(13)38012-9.
- [7] M. D. Abramoff, M. K. Garvin, and M. Sonka, "Retinal imaging and image analysis," *IEEE Rev. Biomed. Eng.*, vol. 3, pp. 169–208, 2010, doi: 10.1109/RBME.2010.2084567.
- [8] V. Gulshan, L. Peng, M. Coram, M. C. Stumpe, D. Wu, A. Narayanaswamy, and S. Venugopalan, "Development and validation of a deep learning algorithm for detection of diabetic retinopathy in retinal fundus photographs," *JAMA*, vol. 316, no. 22, pp. 2402–2410, 2016, doi: 10.1001/jama.2016.17216.
- [9] S. Wan, Y. Liang, and Y. Zhang, "Deep convolutional neural networks for diabetic retinopathy detection by image classification," *Comput. Electr. Eng.*, vol. 72, pp. 274–282, Nov. 2018, doi: 10.1016/j.compeleceng.2018.07.042.
- [10] T. R. Gadekallu, N. Khare, S. Bhattacharya, S. Singh, P. K. R. Maddikunta, I.-H. Ra, and M. Alazab, "Early detection of diabetic retinopathy using PCA-firefly based deep learning model," *Electronics*, vol. 9, no. 2, p. 274, Feb. 2020. [Online]. Available: <https://www.mdpi.com/2079-9292/9/2/274>
- [11] Y. Zhang, C. P. Huynh, and K. N. Ngan, "Feature fusion with predictive weighting for spectral image classification and segmentation," *IEEE Trans. Geosci. Remote Sens.*, vol. 57, no. 9, pp. 6792–6807, Sep.

2019, doi: 10.1109/TGRS.2019.2908679.

- [12] P. Liu, X. Yang, B. Jin, and Q. Zhou, "Diabetic retinal grading using attention-based bilinear convolutional neural network and complement cross entropy," *Entropy*, vol. 23, no. 7, p. 816, Jun. 2021, doi: 10.3390/e23070816.
- [13] H. T. Nguyen, M. Butler, A. Roychoudhry, A. G. Shannon, J. Flack, and P. Mitchell, "Classification of diabetic retinopathy using neural networks," in *Proc. 18th Annu. Int. Conf. IEEE Eng. Med. Biol. Soc.*, vol. 4, Nov. 1996, pp. 1548–1549, doi: 10.1109/IEMBS.1996.647546.
- [14] Z. Xiaohui and O. Chutatape, "Detection and classification of bright lesions in color fundus images," in *Proc. Int. Conf. Image Process. (ICIP)*, vol. 1, Oct. 2004, pp. 139–142, doi: 10.1109/ICIP.2004.1418709.
- [15] X. Zhang and O. Chutatape, "A SVM approach for detection of hemorrhages in background diabetic retinopathy," in *Proc. IEEE Int. Joint Conf. Neural Netw.*, vol. 4, Aug. 2005, pp. 2435–2440, doi: 10.1109/IJCNN.2005.1556284.
- [16] J. V. Soares, J. J. Leandro, R. M. Cesar Junior, H. F. Jelinek, and M. J. Cree, "Retinal vessel segmentation using the 2-D Gabor wavelet and supervised classification," *IEEE Trans. Med. Imag.*, vol. 25, no. 9, pp. 1214–1222, Sep. 2006, doi: 10.1109/TMI.2006.879967.
- [17] J. Nayak, P. S. Bhat, R. Acharya, C. M. Lim, and M. Kagathi, "Automated identification of diabetic retinopathy stages using digital fundus images," *J. Med. Syst.*, vol. 32, no. 2, pp. 107–115, Apr. 2008, doi: 10.1007/s10916-007-9113-9.
-

