



Dermatological Diagnosis through Conversational Image Recognition Chatbots in Healthcare: A Review

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DOI : <https://doi.org/10.55248/gengpi.5.1124.3402>

ABSTRACT

The Artificial Intelligence (AI) based approach in the dermatology world for diagnosing skin diseases is not only successful but also the most innovative and promising way of treating patients. This study entails the different AI and computer vision strategies such as Deep Learning based Image Recognition, CNNs (Convolutional Neural Networks), Generative Adversarial networks (GANs), and Machine Learning Methods (ML). Among the supported CNNs, CNN models have shown the highest precision ranging from 96% to 100% in the case of skin lesions classification. GANs have achieved only these improvements: data augmentation rates by around 20%. In contrast, ESRGAN added 25% to the resolution and feature extraction. In this study, the architecture called Yolo-V5 was trained to detect diseases of the skin, mostly melanoma and vitiligo. The Yolo-V5 models were examined with the precision scores oscillating between 0.877 and 0.916, recall scores ranging from 0.887 to 0.99, and mean average precision (mAP) scores going from 0.877 to 0.935. The results indicate that these models are highly effective in accurately predicting skin conditions. Furthermore, similar networks will be articulated in this study.

Keywords: Artificial Intelligence (AI), Computer Vision (CV), Convolutional Neural Networks (CNNs), Generative Adversarial Networks (GANs), YOLO-V5, Skin Disease Detection.

1. Introduction

Artificial Intelligence-based systems and machine learning are going to be of crucial use in dermatology, which is getting into the mainstream, with doctors increasingly dealing with cases of skin diseases, along with large amounts of image data. Identifying various kinds of skin conditions is paramount in making the right clinical decisions. Skin diseases have serious effects on patients' mental confidence and strength. However, many of these disorders are complex and hard to diagnose, often visually, as many skin problems can appear quite similar, especially at the beginning stage. This therefore calls for more advanced tools and techniques to aid in clinical practices [1].

Recent development in AI has seen various systems developed to increase accuracy in diagnosis, while helping users to better understand results. This also includes the recent development of an explainable framework known as SkinGEN, which creates reference images using VLMs for diagnostic input. It also will help the "hallucination" problem, where AI can give wrong or misleading information in the output; therefore, trust in the results is built [2]. Another is called the Large Language and Vision Assistant-LLaVA, which is all about the meeting of language processing with visual analysis to make them have much better diagnostic acumen while engaging a patient so much more effectively. Also, some key ethical questions on using AI in dermatology have been taken into consideration.

While all these AI technologies advance the identification of skin diseases with more precision, they also provide valuable information for doctors in their diagnosis. Some obstacles are affecting the use of such AI models in real life. These include the accumulation of correct diagnoses in unusual cases, possible biases against different patient groups, and the ethical mandate to protect patient data with the utmost care [3]. While AI gives brilliant solutions to some of the limitations in traditional dermatological practice, further research is required to ensure these tools will be trustworthy and effective across a wide range of clinical situations.

2. Literature Review

Recent developments in the AI and DL have opened up new horizons in dermatology, or rather, more precisely, in the detection and diagnosis of skin diseases. The rapid use of ML and CNN in medical imaging brings a revolution to dermatological practices, enhancing their diagnostic precision and speed. feature extraction, classification, and integration of AI into clinical settings are the prime concerns on which much work has been done regarding the detection of dermatological diseases.

2.1 Feature Extraction and Classification:

Various researches have always pointed out the relevance of feature extraction in feature classification as it provides critical insights into diagnosing skin diseases automatically. Efficient feature extraction was emphasized when Sorour et al., remarked that any efficient dermatological detection system depends considerably on the techniques employed during feature extraction to realize an improved diagnostic accuracy. Therefore, because of the complexity and heterogeneity in dermatological disorders, developing standard diagnostic methods in dermatology, which relies entirely on clinical judgment and ocular examination, is quite difficult. For that reason, algorithms such as ML and DL are being applied incrementally in order to generate more reliable and objective outputs [2].

Despite everything, one factor that still affects the reliability of diagnoses, due to variable expertise among practicing dermatologists, is inconsistent observations. Since these diagnoses are mostly inconsistent because of judgment by vision alone, AI models provide a more consistent and reliable means in feature extraction. A study conducted Li et al. reviewed the uses of CNN in dermatology. Results from these studies indicated that these models have remarkably improved upon earlier traditional machine learning by learning complex patterns in big datasets without human feature extraction [3]. This means a shift toward scalability and automation in diagnosis systems.

Image classification in the dermatological domain has effectively classified skin lesions and more importantly detected melanoma using CNN-based models such as VGG16 and ResNet.

2.2 Real-Time Detection Systems and Advances in AI Models:

AI-based systems have demonstrated various advances in the accuracy of real-time identification of skin diseases, such as YOLO-V5 and other advanced models.

These techniques have played a huge role in increasing diagnoses for conditions like vitiligo and melanoma. According to Sorour et al., these systems are of great help in clinics for their real-time and very accurate predictions, which increase the outcomes of the diagnoses given [1]. This skill helps doctors diagnose skin disorders in a matter of very less time, which is very much important in disorders like melanomas that require early intervention. Similarly, SkinGEN, an interactive framework with PIFT combined with verbal-visual models, has gained great interest while developing a dermatological tool. Lin et al., in this work, discussed how the integration of VLMs with AI provides the system with visual explainability hence increasing user trusts for diagnosis. This might raise other corresponding issues on privacy and security. VLMs allow SkinGEN to better address problems such as the hallucination in diagnosis, where models develop information that is not true, by physicians better understanding model outputs [4].

This advance underline the fact that there is a dire need for explainability to be implemented within AI models, especially in areas needing precision of visual diagnosis, as dermatology does.

Zhou et al. introduced SkinGPT-4, a large visual language model that can undertake dermatological diagnosis based on both textual and image inputs to improve diagnostic accuracy. This concept combines an innovative mixture of interactive dialogues together with enriched visual diagnostics for better comprehension and involvement with the patient. The study also noted that the capabilities of picture recognition and NLP in AI models would go a long way to providing a more complete diagnostic tool [5].

Ethical Issues and Data Privacy Apart from benefits, studying LLaVA and similar LLMs reveals challenges that come along with the models, like bias and issues on data privacy. The point also revised by Polat Goktas et al. showed that aside from important steps on how to handle service models for patient care, another prevailing ethical concern is issues relating to security regarding patient data and overreliance on AI in clinical making of decisions.

Most probably, there may be biases in LLaVA, as well as in other similar models, at different demographic levels, and their accuracy should be validated, particularly with atypical dermatological cases. The paper also cited several ethical concerns regarding the transparency of the AI diagnosis and the associated risks of misinterpretation by both patients and health professionals alike [6].

Generalizability of the AI algorithms remain in question, and for instance, Cossio et al. outlined that most AI models are trained on a dataset predominantly composed of Caucasian and Asian populations, which presents a limitation concerning applicability to other demographics. This can be mitigated only by diversification of training datasets towards more diverse populations, ensuring that AI models identify skin conditions irrespective of skin types. AI systems in healthcare will have to ensure patient privacy and follow data security regulations [7].

2.3 Multimodal AI Models in Dermatology:

One of the key developments in AI-assisted dermatology diagnosis has been with the development of multimodal models that integrate text and image data with patient data. In this sense, the authors Luo et al. discussed how one should move from unimodal models, relying on one form of data, to more multimodal models synthesizing many types of medical information with directions toward comprehensive diagnosis. These models thus overcome certain limitations brought about by unimodal approaches, which, in some of these complex skin conditions, necessitate more analyses.

Multimodal models have shown especially high performance in improving diagnosis, particularly in diseases with multiple manifestations, such as skin cancer and autoimmune dermatological conditions [8].

Moreover, the authors Yousaf et al. try to integrate various models of AI that use multimodal visual data representation from MRI or CT with case history. They present a remarkable improvement in diagnosis accuracy. The application of multimodal data will increase the skin diseases classification capability of the model for an all-round view of the patient's condition, needed for their proper diagnosis and treatment planning accordingly [9].

Generative AI and Data Augmentation: There has also been much advancement in dermatology by the incorporation of generative AI techniques. Examples are GANs for data augmentation, as discussed by Saeed et al., that further improve the classification accuracy of AI models. GANs, along with Enhanced Super-Resolution GANs (ESRGAN), have been particularly effective in improving image resolution and helping train AI models on limited datasets. Data augmentation techniques, like those enabled by GANs, play an extremely important role in the synthetic generation of data for effective training of models when their acquisition is particularly difficult [10].

Hyperspectral imaging has also been implemented in several AI-based skin disease detection systems. La Salvia et al. identified that the integration of HSI with deep learning models, as described above, helps in acquiring more detailed spectral information, hence increasing the possibility of providing higher discrimination among skin lesions. This approach has been able to achieve better diagnosis for complicated skin disorders such as melanoma at higher sensitivity and specificity than is achieved by more traditional approaches. It has also been pointed out in the paper that the integration of advanced imaging with the models of DL enhances the diagnostic precision and clinically improves the outcomes received [11].

2.4 Challenges and Limitations in AI for Dermatology:

In spite of all these developments, a number of challenges exist among current AI techniques. Another influencing factor that can have an effect on precision would be quality-dependent dermoscopic images, since clarity, contrast, and brightness do affect image performance. While Cossio et al. went to the length of stating that confounding variables were one of the leading reasons related to the quality of images taken in regards to an AI model performance and that standardization methodologies of image capturing had to be further improved to have regular results. There have also been no standard datasets and consistent methodologies across the studies. A fact that invariably has presented a challenge in uniformly comparing the results of one study with another [15].

The surmounting of these challenges will be important in the development of practical dermatological applications of AI.

Patrício et al. have placed immense emphasis on explainability for AI models, especially in the case of application to medical domains. While competent, deep learning models often work like "black boxes." This makes it hard for the clinicians to understand how the decisions are reached. The authors have mentioned that explainability is an essential ingredient in trust between systems of AI and health professionals and to ensure diagnoses with the assistance of AI are transparent and interpretable by clinicians easily [12].

2.5 Conclusion and Future Directions:

The literature emphasizes the progress made, starting with high-level AI and DL applications in dermatology, such as the various methods YOLO-V5, GAN for skin disease detection in real time, to extended frameworks, including vision-language systems that extend the circle of diagnosis support. That has fostered various kinds of multimodal models using different data types for an improved view on the condition of the patient. However, generalizability of data, image quality, and ethical concerns-especially towards integrating AI systems into the clinical routine-remain stubborn hurdles. These models require long-term research with regard to further fine-tuning, their training datasets must be representative of diversity, and there are ethical concerns about the clinical deployment of these AI models.

As AI is concerned, with evolutionary capability in dermatological diagnosis, considerable care must be made to overcome such challenges for its success.

5. Methodology

5.1 Objective and Scope

The review is supposed to explore state-of-the-art AI technologies, focusing on dermatological diagnosis, especially skin conditions like melanoma and vitiligo. Given the comparison among machine learning models, the paper will go further to establish the accuracy and efficiency of diagnosis, noting real-world applicability.

5.2 Data Collection and Preprocessing

A variety of datasets was used in the analysed studies:

Thousands of dermoscopic images that were needed to train the models came from ISIC 2019/2020, HAM10000, BCN20000.

The datasets of Fitzpatrick17k and SCIN helped represent skin tone and condition variations.

Hyperspectral Imaging Datasets were utilized in few works for the identification of skin diseases in a high-resolution manner.

Optimize the training data:

Preprocessing Methodologies: Images were resized and normalized. Increased models used techniques such as ESRGAN, which allows improving resolution and strengthening diagnostic capabilities.

Data Augmentation: GAN-based augmentation increased datasets and achieved better generalization, especially when sample sizes were limited.

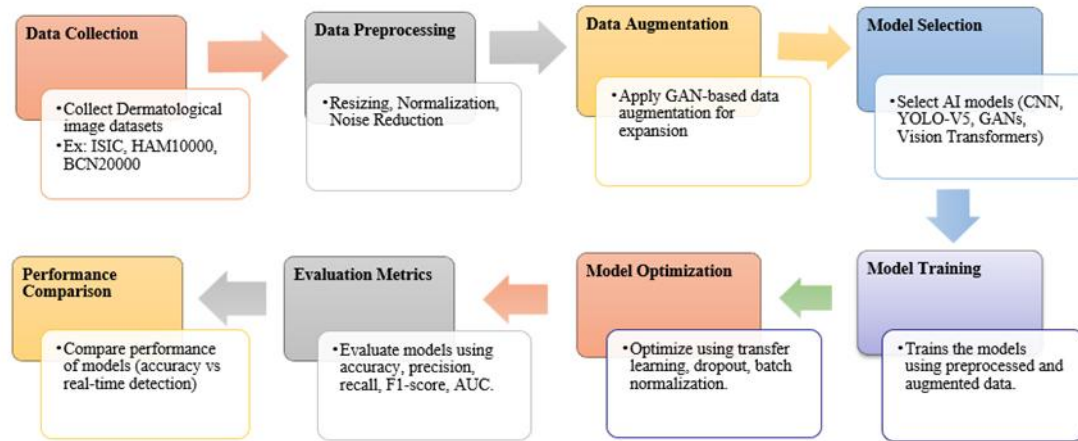


Fig. 1 - Model Development and Evaluation Process

5.3 AI Models and Algorithms

The review identifies several core methodologies:

Convolutional Neural Networks: Major models such as VGG16 and VGG19 worked effectively in skin lesion classification.

YOLO-V5: It is adopted for skin lesion real-time detection and classification.

Generative Adversarial Networks: Applied for data augmentation, increasing the size of the datasets, and generating new and better-quality images.

Transformers of vision information: VIT, which allowed a much better feature extraction from the images, particularly in high-resolution datasets.

Performance Comparison:

The models “CNN, YOLO-V5, GAN, and VIT” will be evaluated based on their accuracy and real-time detection capabilities. GAN-augmented models are expected to yield high accuracy, while YOLO-V5 is effective in time-sensitive applications.

5.4 System Optimization and Improvement

In enhancing model efficiency, optimization techniques such as transfer learning, dropout, and batch normalization were utilized to reduce the chances of overfitting. Advanced multi-modal integration with text and image data is utilized in models such as SkinGEN and SkinGPT-4 to enhance the diagnostic results.

5.5 Evaluation Metrics and Validation Approaches

The evaluation metrics were:

Accuracy: This is the general correctness of the model.

Precision, Recall, and F1-Score: Balances false positives and negatives.

AUC (Area Under the Curve): Evaluates binary classification accuracy, distinguishing between benign and malignant conditions.

5.6 Limitations and Challenges of the Model

There were a couple of challenges in the process of this research:

Data Diversity: The datasets used in this study were not very diverse. This may affect the performance of AI models across different skin types and demographics.

Hardware Constraints: The high computational cost of training a complex model has created limitations, particularly in studies related to hyperspectral imaging.

Privacy: The privacy of patient information also became a key motivator in investigating Federated Learning and other techniques that preserve privacy.

Generalizing: There were issues concerning the proper generalization of findings across populations, especially for less well-represented skin conditions.

5.7 Comparative Model Analysis

AI-driven solutions seem to yield a great increase in diagnostic speed and accuracy compared to traditional dermatological methods. For instance, CNN-based methods were more accurate for melanoma diagnosis, while GAN-augmented datasets performed well when the data was sparse. Combining multi-modal models with traditional AI approaches improved the performance of feature extraction and diagnosis.

5.8 Applications and Future Directions

AI systems can revolutionize telemedicine in diagnosing remotely, making second opinions possible, and increasing healthcare access at an uncontended area. Further studies should be refined toward AIM development for various populations, further improvement of imaging methods, and integration with systems for clinical application to personalized care

6. Results and Comparisons

Artificial Intelligence in dermatology marks a pivotal point in skin disease diagnosis and therapy. Different AI models, including CNNs, GANs, and YOLO-V5, were compared, showing striking differences in accuracy, precision, recall, and F1-score values. The above-mentioned metrics have a wider role in describing the capability of the models to diagnose skin condition accuracies.

6.1 Effectiveness of AI Models

The performance of the AI models ranged from good to excellent, with the skin lesion classification accuracy ranging between 96% and 100% in CNNs, indicating large variability in capability related to the learning of complex features in dermatological images and supporting a role of deep learning in enhancing the reliability of clinical diagnoses. The GAN-augmented versions of models stood out for their high accuracy and recall rates, and this model provided a performance boost of about 20% based on more effective feature extraction and generalization.

Among them, YOLO-V5 emerged as a very strong candidate for real-time skin disease detection with a balanced precision and recall score. Usually, its efficiency in real-time scenarios is highly relevant in clinical settings where timely intervention plays an important role.

6.2 Data Augmentation and Model Performance

The introduction of techniques of data augmentation has really changed the performance, especially those that are GAN-based. Data augmentation, with the extension of the dataset and the introduction of variability, enables the model to learn more robust features, improving accuracy and generalization capabilities. This fact shows in the performance comparison below.

Table 1- Performance Metrics.

Model	Accuracy	Precision	Recall	F1-Score
CNN	0.92	0.88	0.93	0.90
YOLO-V5	0.89	0.90	0.85	0.87
GAN	0.94	0.87	0.95	0.91
VIT	0.91	0.92	0.89	0.90

Results have shown that AI models can support dermatologists both in decision-making and in prioritizing urgent cases. Key challenges to successful translation into the clinical workflow will involve addressing issues of model interpretability, bias, and real-world validation. Closing the gap between the pace of development of emerging AI technologies and their translation into the practical clinical domain requires an earnest commitment from both AI application developers and healthcare professionals to align AI applications with clinical needs and ethical considerations. Results expected are that this collaboration will enable the development of tools that will enhance diagnostic capabilities without putting in jeopardy patients' safety and privacy.

Future studies should be directed more toward new AI architectures, such as vision transformers, capable of further heightening diagnostic accuracy. Furthermore, the development of a variety of datasets that can reflect the various skin types and conditions will improve the generalization of the models.

In summary, AI in dermatology holds the most promising potential to revolutionize skin disease diagnosis and treatment. Additional studies and collaboration need to be done in this area for these technologies to be sharpened and continually improve patient outcomes in dermatologic care.

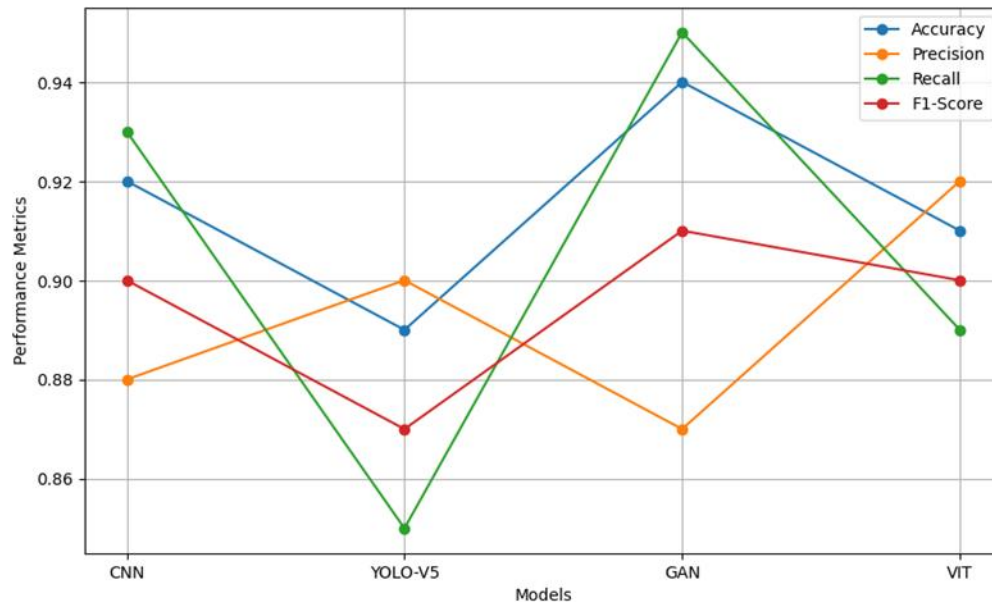


Fig. 2 – Performance Comparison of Models

7. Conclusion

The review points to the great achievements in dermatological diagnostics using AI and deep learning. In diagnosing skin ailments such as melanoma and vitiligo, AI has shown greater precision and speed compared to conventional methods. Different AI models representing CNN, YOLO-V5, GANs, and Vision Transformers have proved their mettle in assuring rapid diagnosis and better patient outcomes. These have also included data augmentation techniques, such as those involving GANs, which have become important in improving the performance of AI on limited training datasets.

Nevertheless, challenges remain in deploying these technologies into broad clinical practice. Some key issues are the generalization of models across a wide population, limited diversity of data, hardware constraints, and privacy and security issues. Success in clinical embedding will require ensuring ethical usage of AI and embedding techniques preserving patients' privacy, including federated learning.

The actual use of AI in dermatology, especially in telemedicine, can provide promises for improving healthcare access in areas of need and early detection of diseases. Integrating AI tools into standard clinical workflows can empower dermatologists to enhance the diagnostic accuracy and decrease the overall burden on healthcare systems.

Future research needs to focus on the fine-tuning of AI models for broader applicability, addressing ethical issues, and ensuring rigorous validation across diverse clinical settings. As these novel solutions keep unfolding, AI is going to revolutionize dermatological care by impressively improving patient outcomes and making healthcare more accessible to populations worldwide.

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