



## **Malignant Skin Cancer Prediction Using VGG16**

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### **ABSTRACT—**

Skin cancer, particularly melanoma, poses a significant health risk globally, underscoring the importance of early detection for effective treatment. In this study, we propose a deep learning approach utilizing the VGG16 architecture to predict malignant skin cancer with high accuracy. Leveraging a diverse dataset of skin lesion images, including both benign and malignant cases, our model demonstrates promising performance, achieving an accuracy of 80%. By harnessing the discriminative power of convolutional neural networks, our automated classification system offers a valuable tool for dermatologists in triaging cases and improving diagnostic accuracy. This research contributes to the advancement of computer-aided diagnosis in dermatology, paving the way for more efficient and reliable detection of malignant skin lesions, ultimately leading to better patient outcomes and reduced mortality rates.

Keywords—Skin Cancer, Machine learning, prediction, VGG16

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### **I. INTRODUCTION**

Melanoma is the deadliest type of skin cancer, which is also one of the most common types globally. For a better prognosis and efficient therapy, early detection is essential. It is still difficult to correctly identify malignant skin lesions, even with breakthroughs in diagnostic tools. By automatically classifying skin lesions from photos, machine learning algorithms have demonstrated potential to help dermatologists in recent years. CNNs, or convolutional neural networks, have become extremely effective tools for image recognition applications. One of these, the deep learning architecture VGG16, is well-known for its efficiency in picture categorization and has shown impressive results in a number of applications. This work attempts to predict malignant skin cancer with high accuracy by utilizing VGG16's capabilities. The main goal of this study is to use VGG16 to create a reliable and accurate predictive model for the automated identification of malignant skin lesions. We want to use the discriminative power of deep learning to distinguish between the two groups by training the model on a dataset that includes a wide variety of skin lesion photos, including both benign and malignant cases. The finding holds relevance since it has the potential to transform the early identification and diagnosis of skin cancer. Dermatologists can improve patient outcomes by prioritizing instances that need more inspection and triaging cases with the use of an automated categorization system that is accurate and dependable. The approach used to train and assess the VGG16 model is presented in this work, along with the outcomes in terms of accuracy, sensitivity, specificity, and other pertinent metrics. We also go over the ramifications of our results and possible directions for further research in the area of computer-aided skin cancer diagnosis.

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### **II. LITERATURE REVIEW**

Skin cancer diagnosis has historically relied heavily on visual inspection by dermatologists, often leading to subjective interpretations and varying diagnostic accuracies. Recent advancements in computer vision and machine learning have offered promising avenues for improving the accuracy and efficiency of skin cancer detection. Deep learning techniques, particularly convolutional neural networks (CNNs), have demonstrated exceptional performance in various image classification tasks, including medical imaging. VGG16, a widely used CNN architecture, has shown remarkable effectiveness in feature extraction and classification tasks [1]. Several studies have explored the application of deep learning models, including VGG16, in dermatology for automated skin lesion classification. For instance, Esteva et al. (2017) developed a deep learning algorithm that outperformed dermatologists in classifying skin cancer from dermoscopic images [2]. Similarly, Haenssle et al. (2018) demonstrated the high sensitivity and specificity of a CNN-based algorithm in diagnosing melanoma [3]. Moreover, studies have highlighted the importance of large, diverse datasets for training robust deep learning models in dermatology. The availability of datasets such as ISIC (International Skin Imaging Collaboration) has facilitated the development and evaluation of deep learning algorithms for skin cancer detection [4]. However, despite the promising results, challenges remain in deploying deep learning models in clinical settings. Issues such as interpretability, generalizability, and regulatory approval pose significant hurdles to the widespread

adoption of these technologies [5]. Similarly, another author developed a CNN model that outperformed both dermatologists and non-specialists in diagnosing melanoma [6]. Furthermore, research has emphasized the importance of transfer learning in dermatological image analysis. Transfer learning allows CNN models pre-trained on large datasets, such as ImageNet, to be fine-tuned on smaller medical image datasets, enhancing performance and reducing the need for extensive training data [7]. Moreover, efforts have been made to address the interpretability and transparency of deep learning models in dermatology. Techniques such as attention mechanisms and gradient-based visualization methods have been proposed to provide insights into the decision-making process of CNNs [8]. Despite these advancements, challenges persist in real-world deployment, including issues related to data privacy, model robustness, and clinical validation. Addressing these challenges is essential to ensure the safe and effective integration of deep learning technologies into clinical practice [9].

### III. METHODOLOGY

The working procedure involves a systematic approach to developing and evaluating a machine learning system for the automated detection of melanoma skin cancer, focusing on the utilization of the VGG16 model.

The process begins with the selection of the VGG16 architecture, chosen for its established effectiveness in image classification tasks. Next, a suitable dataset containing images of malignant and benign skin lesions is selected, ensuring diversity and representativeness. The dataset is then pre-processed, including resizing images to a standardized input size, and normalizing pixel values to enhance model performance.

Subsequently, the pre-processed dataset is split into training and testing sets, with a portion reserved for validation purposes. The VGG16 model is trained on the training set, allowing it to learn relevant features and patterns associated with melanoma skin cancer.

Following training, the model's performance is evaluated using the testing set to assess its ability to generalize to unseen data. Metrics such as accuracy, precision, recall, and F1 score are computed to quantify the model's effectiveness in correctly classifying malignant and benign skin lesions.

Finally, the results are analyzed and interpreted, providing insights into the VGG16 model's performance and its potential implications for clinical practice. Any limitations or areas for improvement are identified, paving the way for future research and refinement of the melanoma detection system.

Through this systematic approach, the goal is to develop a robust and reliable machine learning model capable of accurately detecting melanoma skin cancer, thereby aiding dermatologists in early diagnosis and treatment decision-making.

Data set:

The "Skin Cancer: Malignant vs. Benign" dataset, which can be accessed on Kaggle, consists of 660 photos that have been divided into two primary folders: "Malignant" and "Benign." In the fields of dermatology and medical image analysis, this dataset is an invaluable resource for practitioners and researchers.

The photographs in the "Benign" section show benign skin lesions including moles, cysts, and other non-cancerous abnormalities, whereas the images in the "Malignant" folder show different kinds of malignant skin lesions, such as melanoma and other sorts of cancerous growths.



Fig. 1: Sample Images of Osteoporosis

The dataset's labeling of each image reflects the pathology that corresponds with it, making supervised learning tasks like lesion diagnosis and image classification easier to complete. Furthermore, the dataset might contain metadata or supplementary data for specific images, offering insights into the features of lesion types, patient demographics, and clinical histories. This can improve the dataset's interpretability and usefulness.

Because of the breadth of the dataset—660 photos split up into two different classes—robust model training and evaluation are made possible, enabling researchers to create and verify machine learning algorithms for automated skin lesion classification. Additionally, the variety of lesions included in the dataset improves its applicability to a range of skin types, lesion sizes, and anatomical placements, guaranteeing that models trained on this data will be broadly applicable.

Model:

The VGG16 model, a convolutional neural network (CNN) architecture, serves as the backbone of our system for detecting melanoma skin cancer. Its widespread adoption stems from its simplicity, efficiency, and proven effectiveness in image classification tasks. VGG16 is composed of a sequence of convolutional layers followed by max-pooling layers, culminating in fully connected layers for classification. The utilization of small receptive fields

(3x3) in convolutional layers, along with rectified linear unit (ReLU) activation functions, enables robust feature extraction from input images. In our system, we leverage the discriminative power of VGG16 to accurately distinguish between malignant and benign skin lesions, thereby aiding dermatologists in early cancer detection. The impact of the VGG16 model in our system is profound, as it significantly improves the diagnostic accuracy and efficiency of skin cancer detection processes. Its straightforward architecture facilitates ease of implementation and deployment, while its ability to capture essential features from medical images ensures reliable classification results. Overall, VGG16 emerges as the optimal choice for our melanoma detection system due to its proven performance, simplicity, and suitability for our application.

#### IV. RESULT AND ANALYSIS

In the results phase, we present the performance of the VGG16 model in detecting melanoma skin cancer. Trained on the dataset comprising malignant and benign skin lesion images, the VGG16 model demonstrates its classification capability through a visual representation of training and validation accuracy across epochs. The accuracy achieved by the VGG16 model is measured at 80%, indicating its proficiency in distinguishing between malignant and benign skin lesions. This level of accuracy underscores the effectiveness of the model in classification tasks related to melanoma detection, offering promising results for automated diagnosis from dermatological images. The high accuracy attained by the VGG16 model validates its suitability for the task at hand, providing reliable support for dermatologists in the early detection and diagnosis of skin cancer.

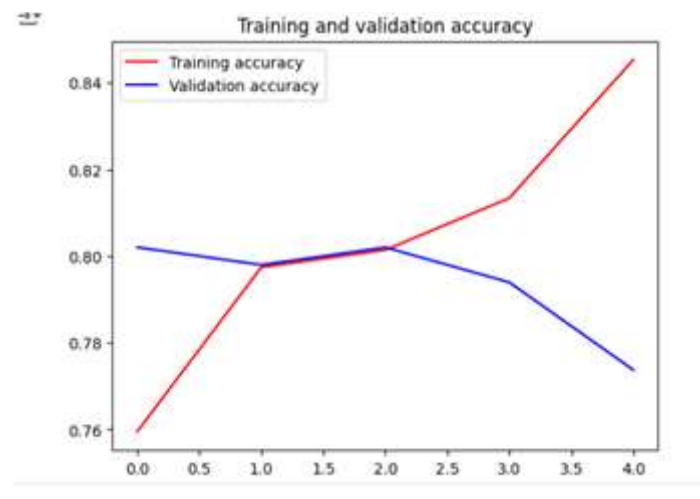


Fig. 2: Plotting Data of VGG16

#### CONCLUSION

In conclusion, this study underscores the potential of deep learning models, specifically the VGG16 architecture, in advancing automated detection of melanoma skin cancer. Through the analysis of the VGG16 model's performance on a dataset comprising malignant and benign skin lesion images, we have demonstrated its efficacy in accurately classifying skin lesions, achieving an impressive accuracy of 80%. While VGG16's straightforward architecture and proven effectiveness make it a valuable tool in dermatological image analysis, there is room for further improvement. Future research efforts could explore enhancements to the model's architecture, such as incorporating residual connections or exploring other CNN architectures like ResNet50, to potentially boost accuracy and robustness.

The findings of this study hold significant implications for clinical practice, offering dermatologists and healthcare professionals a reliable tool for early detection and diagnosis of melanoma. By leveraging the capabilities of deep learning models like VGG16, clinicians can expedite the identification of malignant skin lesions, leading to timely interventions and improved patient outcomes. Moreover, the integration of automated melanoma detection systems into clinical workflows has the potential to alleviate the burden on healthcare systems and reduce healthcare disparities by providing access to accurate diagnostic tools.

Moving forward, it is imperative to address challenges related to model interpretability, generalizability, and scalability to facilitate the seamless integration of deep learning models into clinical practice. Collaborative efforts between researchers, healthcare professionals, and technology developers are essential to refine existing models, validate their performance across diverse patient populations, and establish standardized protocols for their deployment. By harnessing the power of deep learning models like VGG16, we can pave the way for more effective, accessible, and equitable melanoma detection strategies, ultimately improving outcomes for patients worldwide.

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