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Recent Progress In Deep Learning For Early Detection Of Pancreatic Cancer Disease

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ABSTRACT:

Multiple disease is found in human body such as cancer is a worrying disease which emerge for detection of medical health. Early detection plays a vital role in physicians providing suitable treatment and increasing the chances of patient survival. When pancreatic cancer is discovered, cancer is well-developed. With the late and incurable point of diagnosis and noteworthy chemo-resistance in tumors, poor results are obtained. Most of the treatments are hopeless in later diagnosis. Many findings reveal the benefits of the premature stage of pancreatic discovery. In early detection, biomarkers are the noteworthy ones that analysis the people in high-risk groups and prioritize them for screening. Thousands of researches accomplished but, no one biomarker for the early detection of cancer converted into a medical application. Obtaining adequate samples for biomarker expansion is difficult during the diagnosis since it needs extensive national and international collaborations. Pancreatic tumors are tremendously diverse within and between people. Thus, accurate diagnosis is the key issue in conventional detection mechanisms. This leads to degrading the overall performance of disease diagnosis. To address these issues, novel machine learning as well as deep learning techniques are developed using proposed research work. The first work aims at segmenting and classifying the MRI/CT images for pancreatic disease using a deep learning-based method. The second and third works aim at enhancing the classifier performance in machine learning to diagnose pancreatic cancer depending on the extracted medical data. The first work presents a method for pancreatic cancer diagnosis using Hadoop distributed Guided Trilateral Filter based Schutz Indexive Recurrent Neural Network (HdiGTF-SIRNN). Guided trilateral filter-based preprocessing was performed for eradicating noise within MRI/CT images. Schutz index regressive segmentation is employed to partition the images into multiple segments to accurately find the pancreatic disease. Later, Log-Linear analysis is employed for categorizing the images within normal or pancreatic. The proposed HdiGTF-SIRNN method accuracy enhanced by 45% is compared to existing HdiCNN and HCNN respectively. Precision is achieved in HdiGTF-SIRNN by 15% as compared to existing HdiCNN and HCNN methods respectively. The proposed RIDT-GDLBC technique True positive rate and FP Rate is in terms of 0.513 and 0.512, precision 0.492. The proposed DHEGQDRLCS technique Accuracy, precision, specificity in terms of 0.79, 0.37, 0.85.

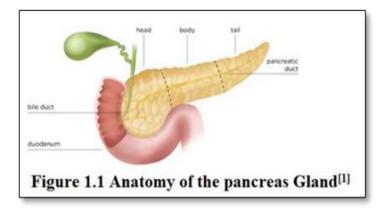
Keywords-Transfer learning, attention mechanisms, cancer detection, machine learning, deep learning.

I.INTRODUCTION:

1.1Background

A pancreas is the organ positioned within abdomen. It is encircled with organs comprising lesser intestine, liver, and spleen as shown in fig 1.1. The pancreas is soft, 6 to 10 extensive, as well as it shaped as plane pear enlarged horizontally across the abdomen. Pancreas generates enzymes which digestion as well as hormones assist to control body procedures of glucose (sugar). It is the significant task for converting food eaten within fuel to the body's cells.

- Pancreas middle segment is called as neck or body.
- Slim end is termed as tail as well as extends to left side



The pancreas is enveloped by numerous main blood vessels, the better mesenteric artery, higher vein of mesenteric, portal, and celiac, providing blood to pancreas as well as abdominal organs. Almost pancreas (95%) contains exocrine tissue which generates pancreatic enzymes to digestion. Remaining tissue has endocrine cells termed as islets of Langerhans. Clusters of cells similar to grapes as well as create hormones for controlling blood sugar as well as adjust pancreatic secretions.

Different Pancreas Conditions:

In diabetes, the pancreas plays a position. In type 1 diabetes body's protected schme is attacked, as pancreas as well as beta cells no longer creates insulin. In type 2 diabetes, the pancreas loses the capability to secrete adequate insulin in response to meals. Here are the three common pancreas conditions that humans have to cope with at some or the other time in their lifetime. Disorders affecting pancreas consist of pancreatitis, precancerous circumstances namely PanIN, IPMN, as well as pancreatic cancer. Every disorder shows dissimilar symptoms that needs diverse behaviors. • Pancreatitis Pancreatitis is a pancreas swelling which produce pancreatic enzyme secretions build up as well as begin for digesting organ. It happens the acute painful attacks chronic disorder which process through the year era. • Precursors to Pancreatic Cancer Precise basis of pancreatic cancer is unidentified, however these are recognized danger influences which augment hazard of increasing disease. The various factors are cigarette smoking, the hereditary cancer syndromes, as well as chronic pancreatitis. Besides, specific pancreatic lesions namely IPMNs as well as PanIN are conducted precursors to pancreatic cancer. Three human pancreatic ductal adenocarcinoma (PDAC) precursor injury are identified such as pancreatic intraepithelial neoplasias, mucinous cystic neoplasm, as well as intraductal papillary muci- nous neoplasm. In left, PanIN grading scheme has revealed, boosting grade reproduces enhancing atypia as well as important in forthright adenocarcinoma. Right side exemplifies potential sequence of MCNs as well as IPMNs as well as PDAC. Inherited modifications recognized with adenocarcinomas by PanIN, as well as to minimum level MCNs as well as IPMNs within obvious temporal series. The variety of genetic events and precursor lesions occurs in PDAC progression.

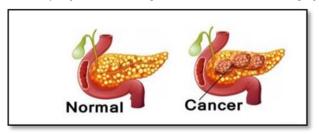


Figure 1.2 Normal and Abnormal Pancreatic

Pancreatic Cancer

PC has deadly growth by excessive humanity duty. Recently, NCI estimate to 1.9 million cancer patients diagnosed and 609,360 cancer deaths in the India. It has positioned within world when 14th general tumour as well as the 7th growth patient's death. PC has amongst mainly lethal as well as enveloping tumors scheme. Also, it defined as tumor emperor, owing to its offensive, as well as fast metastasis, underprivileged endurance as well as prognosis. The incidence of pancreatic cancer is connected with aging, alcohol operation, smoking, as well as diet so on. An exact stratification of malignancy levels have significant with maximum therapeutic outcomes. The highly vascularized situation makes cancer very extremely violent. General indication of cancer comprises abdominal pain namely diabetes's well as jaundice, irregular liver purpose parameters, loss of weight, so on. It is generally through higher illness level as well as frequently missed in premature stages. Pancreatic cancer is the disease to healthy cells within pancreas work improperly as well as grows up to controller. A cancerous cells accumulation as well as mass termed as tumor. While it develops, pancreatic tumors that impact pancreas purpose, produce within blood vessels as well as organs, spread to body parts through a process called metastasis. Symptoms of pancreatitis based on various kind. Acute pancreatitis symptoms comprise:

Upper abdominal ache

• Abdominal pain • Rapid pulse

The pancreatic cancer stages are shown in fig 1.3

- Stage IA: The cancer is still smaller in the pancreas.
- Stage IB: Cancer has grown in the pancreas.
- Stage IIA: The cancer is making longer beyond the pancreas.
- Stage IIB: Cancer increases in near lymph nodes.
- Stage III: Cancer extends more local lymph nodes.
- Stage IV: Cancer increases with additional organs in body like the lungs, lymph nodes, and bone

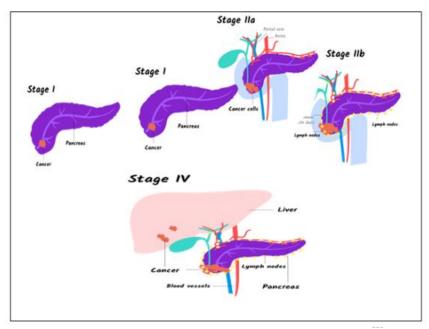


Figure 1.3 Various stages of pancreatic cancer

Flow Process of pancreas cancer diagnosis:

The pancreatic cancer CT/MRI image has noise because of patient motion, detector miscalibration, etc., with removing the sound. The noise elimination function is vital to analyze the image in image processing. Different linear and non-linear denoising techniques are available to eliminate the noise as well as preserve data. Non-linear filters sharpen the edges as well as protect the image data. Depending on this kind of noise present in the image an apt filter is employed to de-noise the image. Fig 1.4 illustrates the process of pancreas tumors.

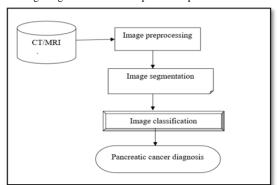


Figure 1.4 Flow Process of pancreas cancer diagnosis

II. REVIEW OF LITERATURE:

2.1 Literature study/ Preamble

The prior chapter discuss about the preamble and the overview of the proposed system. This chapter highlights essential related literature connected with the segmentation approaches and the classification approaches employed. This existing method relating for research issues are also discussed in this chapter.

Introduction

Image processing scheme developed for detecting the object integrates segmentation, classification, as well as data grouping are employed using various number of fields. In order to categorize different specific objects within the image, the object detection is used. The object recognition techniques are used for identifying as well as tracking object movement. Several image segmentation approaches are obtainable in image processing and deciding upon the apt classifiers for the selected image segmentation becomes increasingly significant when it comes to medical applications such as cancer detection. Listed below is some of the work performed in the past relating to cancer diagnosis and related medical applications. N. Al-Shaheri F et al., [39] introduced a Blood biomarker to diagnosis as well as pancreatic cancer identification. It was a vital feature to enhance dismal condition

makes probable. Also, advanced growth to clinical utilization for enhancing biomarker for providing various clinical intents as well as diagnostic accuracies need to be performed. Frederike Dijk et al.,[10] developed an unsupervised group recognition in PDAC correlates better similarity among described classification. The enhancement of pancreatic cancer lethal rate was fair due to the competent biomarkers require for screening and premature detection tumors. Behrouz Alizadeh Savareh, [7] introduced a robust diagnostic model by means of the ML methods to find out the pancreatic cancer by miRNA biomarkers. The obtained outcomes provide the index with clinically-chosen miRNAs as biomarkers to discover the pancreatic cancer as well as showed ranking miRNAs through feature selection techniques. With this, top discerning miRNAs to identify pancreatic cancer was confirmed to be acquired. Abu Z. M. Dayem Ullah,[1] reviewed an analysis of temporality of clinical factors related with pancreatic cancer.

2.2 Research Gap

The following research gaps have been recognized from the extensive literature survey conducted. • Difference between the significant versus the insignificant cancers is at a standstill a challenge. The pancreas conditions at type 1 diabetes and type 2 diabetes. Type 2 diabetes and cancer are more general in adult people. Type 1 diabetes lead to an augmented risk of developing cancer of the cervix and the stomach cancer. Offering a clear differentiation between the two conditions is vital in providing timely and apt treatment to the patient. There is no work carried out in this direction.

- •Till day many works have been employed towards developing prediction performance rate of the cancer but no work has been carried out to classify the image into different each growing stages of pancreas cancer.
- Most of the work performs in this area only address about the development in the prediction accuracy using only the deep learning and convolutional network methods with diverse classifiers but does not notify which among the two methods are improved in terms of performance. In the deep learning model is handling fewer samples for pancreatic cancer detection.

Authors	Methods	Classifiers	Results
Gao, X.W.; James-	Enhanced residual deep	pre-trained CNN	Accuracy 93%
reynolds, C.;	learning method	classifier,	specificity - 81.24%.
Currie, E 11		SVM classifier,	
		random forest (RF)	
		classifier,	
Kieu,	Ensemble deep	TB detection	Accuracy- 89.77%,
S.T.H.;Hijazi,	learning for	classifiers,	sensitivity - 90.91%
M.H.A.;Bade,	tuberculosis detection	base classifiers	specificity - 88.64%.
A.;Yaakob,			
R.;Jeffree, S. 30			
Ramya Na, Manoj	Detection and	Probabilistic Neural	accuracy: 90%
Kumar Bb, Vijay	Identification of	Network (PNN)	
Balaji Bb,	Pancreatic Cancer	neural network	
Kiruthiga Devi Mb	Using Probabilistic	Classifier, Ensemble	
and Deepika, 45	Neural Network	Learning-Support	
		Vector Machine	
		(EL-SVM) as	
		classifier	
[50] Santosh	Ensemble Methods in	Naive Bayes	accuracy: 88.6%
Reddy P,	Machine Learning	Classifier.	Sensitivity: 79.1%
Chandrasekar M,			
[56] Sourabh	A novel Grading-	dynamic base-	accuracy - 99.45%
Shastri, Paramjit	AdaBoost ensemble	classifier	
Kour, Sachin	approach	meta-classifier	
Kumar, Kuljeet		ANN classifier	
Singh & Vibhakar		Naive Bayes	
Mansotra,:		classifier, Random	
		Forest, K* instance-	
		based classifier,	
[66] Wang, C.;	Pulmonary Image	Optimal Path Forest	Sensitivity -95.41%
Chen, D.; Hao, L.;	Classification Based	(OPF) classifier	specificity - 80.09%
Liu, X.; Zeng, Y.;	on Inception-v3	SVM classifier	

Table 2.1 Summary of Methods, Classifiers and Performance Metrics Based on various Studies

2.3 Motivation of this work

Cancer is one of the most frightening diseases, that is harassed from the previous decades. Cancer is an outcome of a certain kind of DNA mutation that is present inside the cells. That reason this type of mutation is still indistinct even after conducting much research. The altering environment, augment in pollution, mounting stress levels, change in way of life, and cancer family history are only added together to the problem. From ICMR, India registers around 1.9 million cancers, as well as close up to 8.5 lakh people from cancer related problems with every year. Ratio of the registered cases and the number of deaths per year is in fact alarming. Also understand the detail that, cancers are curable if detected at a starting stage. But, in most cases, people do not illustrate any early symptoms. Even regular health checkups provide very lesser assist in detecting the presence of cancers in extremely early stages as the patient screening with the existing technologies namely biopsies, CT scans, MRI, etc., needs a really high expertise and time. The certain machine learning with image processing techniques presented for previously existing screening systems greatly develops the possibility of detecting cancer with highest accuracy. ML is the discipline of AI which associates problem of obtaining knowledge from a set of samples with the common concepts for sketching the conclusion. In recent years ML is manifested to significant task within the biomedical region by providing enormous applications. ML essentially works by searching for the given set of data during an n-dimensional space. Image 16 processing on

the other hand is confirmed to be extremely useful in detecting cancer presence in its initial stages. It essentially works by executing certain functions on the image in an effort to extract some useful facts. As time and accuracy is the significant task of cancers, ML and image processing techniques offer very promising outcomes in a very lesser time. This acts as a point of motivation in order to perform this research work. processing on the other hand is confirmed to be extremely useful in detecting cancer presence in its initial stages. It essentially works by executing certain functions on the image in an effort to extract some useful facts. As time and accuracy is the significant task of cancers, ML and image processing techniques offer very promising outcomes in a very lesser time. This acts as a point of motivation in order to perform this research work.

2.4 Problem Statement

Pancreatic cancer is the cruel kinds of cancer as well as predicted to be extremely underprivileged within associations. Pancreas borderline has tricky in differentiate over anatomies within CT/MRI scans, as difficult ocular form as well as vague curves. The significant health research is accessible on cancer forecast, that have different appearances as well as concerning on varied body elements. Cancer is forecasted to be not correctable, that cannot be preserved capably. At present, machine learning as well as neural networks optimistic outcomes to pancreatic image segmentation. • Identification of the greatest preprocessing strategy: Performing preprocess is very necessary, especially, when there is a need to lessen the resources needed for removing redundant data without mislay upon decisive as well as most important data. It greatly facilitates lessening of redundant information, which in turn minimizes the data dimensionality to be taken into consideration. As in our study we deal with clinical images, the data gathered from the images will also be very enormous. So it becomes even more necessary to discover the best possible preprocessing approach, which is practically missing in the existing systems. • Using an accurate classification approach: The medical image remains the vital issue for the image recognition. An accurate classification algorithm aids in classifying the image into dissimilar classes, which in turn helps the doctors in diagnosing the disease healthier. Even now doctors mostly make employ their professional experience to categorize medical images, which is tiring, prone to errors, and also consumes time. Identifying the best classification approach for the chosen preprocessing technique still remains an open issue. • Obtain higher accuracy rates: when it comes to the recognition of diseases like cancers, the accuracy with which this condition is detected still remains insufficient even with so much advancement in present-day medical technology. Still there exists high false positive as well as false negative rates, to the patient may have, to undergo either over diagnosis or under diagnosis, both of which are unsafe for the patient. The existing systems have still not yielded acceptable results with respect to the accuracy with which the condition is diagnosed.

Research Objectives

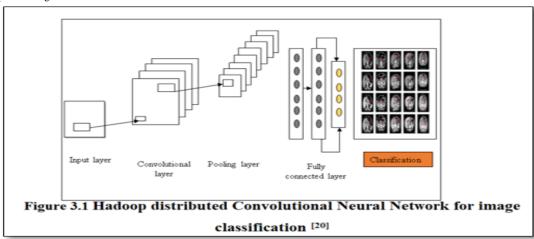
The proposed work is used for evolving potential method for diagnosing pancreatic cancer at the very beginning stage with the highest accuracy. For this purpose, a framework requires to be diagnosed by incorporating the image processing and machine learning approaches, with an end target of developing a mechanism that can precisely diagnose cancer at a very premature stage. The following research objectives are given below: • To augment the pancreatic cancer detection accuracy, Schutz index regressive segmentation and Log-Linear analysis are used in Hadoop distributed Guided Trilateral Filter based Schutz Indexive Recurrent Neural Network (HdiGTF-SIRNN). • To increase early disease diagnosis by improved precision and recall, guided trilateral filter based preprocessing is executed. • To improve the pancreatic cancer classifier performance, Rand Indexive Decision Tree with Gradient Descent Logit Boost Classifier (RIDT-GDLBC) method is proposed. • To enhance the pancreatic cancer diagnosis accuracy, Distributed Hybrid Elitism gene Quadratic discriminant Reinforced Learning Classifier System (DHEGQDRLCS) is introduced.

III.RESEARCH METHODOLOGY:

3.1 Existing System

Hadoop Distributed Convolutional Neural Network

CNN were the methodological models employed for propagating classes of data. Besides, the neural networks were worked on perception of multicast as well as back propagation, that was mainly employed to segmentation, categorization as well as associated information. A variation among conventional as well as gathered alternates of reconsideration of connected characteristics. The novel construction called Hadoop distributed Convolutional Neural Network (HdiCNN) was designed to find the object in images. A image cannot protect associations among channels as well as reliability of luminaries. According to classification of CNN, HdiCNN find out recolored image as depicted in figure 3.1



A process of image classification for pancreatic cancer detection using HdiCNN is shown in figure 3.1. The HdiCNN comprises convolutional layer, pooling layer as well as fully 46 connected layer. First, number of pancreatic tumor images was used as input. Then, the input data was forwarded to the convolutional layer. The major principle of convolutional layer was to carry out a filter for input image to make feature map which extract features existed within input image. After that, pooling was employed to diminish the dimensions of the feature map. Then the results were forwarded to the FC layer. A process of FC layer was to connect output of previous layer. Designed network comprised many FC layers where the last layer was associated to the output layer. In that layer, the classification of pancreatic tumor image was made using activation function. Lastly, the output layer provided the classification results into normal or diseased.

3.2 Research Framework

Dataset:

CT imaging gives significant anatomical, improved soft tissue resolution as well as benefit of giving different cross sectional of image information. By taking all these advantages, CT image datasets have been contemplated in this research. The actual pancreatic cancer CT scan images are gathered from the dataset of Department of General Surgery of the Beijing Medical School hospital. The dataset comprised of total of 59 patients containing 15 patients using non-pancreatic disease as well as 44 with pancreatic-related disease. Totally, 236 slice images are included in the dataset. Delta radiomics find net transform within radiomic features on longitudinal images. It makes the wealth of data is available for distinguishing, specify as well as forecasting therapy-induced changes.

3.3 Proposed Methodology

Figure 3.2 illustrates the process of pancreatic tumor diagnosis through the segmentation and classification process involved in HdiGTF-SIRNN method. Number of CT/MRI images is considered as input from the given dataset in proposed RNN. Then, the input images are preprocessed using Guided trilateral filter to eradicate the unwanted noisy pixels in the image. Followed by this, segmentation is carried out by applying Schutz index regression where the preprocessed images are partitioned into more segments. Later, classification of segmented images is performed with the help of log-linear analysis by means of computing relationship between training image region and testing image region. From that, input CT/MRI images are classified to find the pancreatic cancer with higher accuracy.

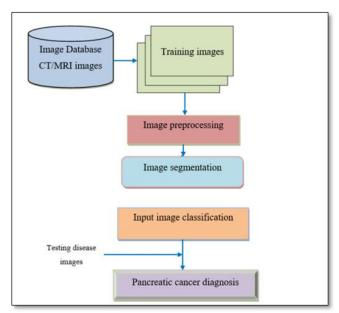


Figure 3.2 Architecture of the proposed HdiGTF-SIRNN method

IV. APPLICATIONS

4.1 APPLICATIONS

- 1. Modified algorithm will help to increase in Performance accuracy.
- 2. It is more easily and corrected cancer disease diagnosis.

4.2 CONCLUSION

Pancreatic cancer has become a cruel kind of cancer. The detection has been extremely underprivileged in the current state of associations

since the pancreas was an organ deep in the body; there are no external lumps or external skin changes. In a recent analysis of 3.9 million cancer citizens from various countries, pancreatic cancer has the lowest five-year survival rates. The early finding will certainly assist in the development of these statistics. The conventional distributed machine learning techniques such as SVM and logistic regression were not efficient to increase the pancreatic cancer classification accuracy in terms of precision, recall, and measure. Also, the traditional ML algorithms on medical images failed to significantly segment the images for disease diagnosis. In this study, a three-fold methodology has been proposed for pancreatic cancer detection. Hadoop-distributed recurrent neural network based techniques called HdiGTFSIRNN were proposed for pancreatic prediction. HdiGTF-SIRNN performed pancreatic cancer segmentation through MRI and CT images. This regularization of the stability of the form allowed the spatial smoothness of the pancreatic segmentation. The outcome of the method attained a better performance using HdiGTF-SIRNN in the pancreatic diagnosis with an average accuracy of 86.3%, average precision of 86.4%, average recall of 82.8%, and ROC of 0.9893 respectively.

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