



Diagnosing Medical Image Using Fuzzy Relevance Feedback Technique

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Abstract - Segmentation is a significant feature of medical image processing, where Clustering scheme is extensively utilized in biomedical applications mainly for brain tumor recognition. Image segmentation notices and envisages restrictions of the objects in the section input image. Capability of level set method to hold topological changes (merging and contravention) is more practical in broad range of applications like Fluidics, medical image segmentation, and Computer visualization. For sensing circulating fronts, level set methods are regularly used. Developing contour is entrenched in an advanced dimensional level-set function. The previous work presented a novel approach for image segmentation via fuzzification of Rènyi Entropy of Generalized Distributions (REGD). But the downside of REGD is that the shape taken by the outline all through the process is connected to energy-minimization. To enhance the energy level of the process, in this work, we plan to present a fuzzy relevance feed back mechanism in which image cluster object configuration is done with fuzzification of increasing active contours with the formerly known contours of diseased image portions. Fuzzy active functions are produced with perceived contours using pre-dominant value. Detected contours are created as cluster faction of medical image segment portions. An experimental evaluation is conducted with bench mark data sets obtained from UCI repository and parametric evaluations are measured in terms of Contour objects in the cluster, Similarity ratio of known and unknown contours, error rate.

Keywords: Image segmentation, Fuzzy relevance feedback, detect growing active contours.

I. INTRODUCTION

Image segmentation is a solution trends just before image examination and provides in the range of applications including object detection, pattern recognition and medical imaging, which is also observed as one of the essential confronts in image processing and computer vision. The assignment of image segmentation can be confirmed as the separation of an image into diverse significant regions with harmonized uniqueness using discontinuities or resemblances of the image such as color, intensity, texture, and so on. The image segmentation mechanisms can be separated into four groups: clustering, threshold, edge recognition and region pulling out. In this paper, a clustering based technique for image segmentation will be measured. Many clustering strategies have been employed, such as the brittle clustering system and the fuzzy clustering system, all of which contains its own individual characteristics

Image segmentation plays a main role in the ground of biomedical applications. The segmentation method is broadly utilized by the radiologists to fragment the input medical image into consequential regions. The precise application of this method is to perceive the swelling region by dividing the abnormal MR input image. The mass of the tumor region can be trailed using these methods which assist the radiologists in behavior planning. The primal techniques are supported on physical segmentation which an instance consuming process is in addition being vulnerable to human errors. Several computerized techniques have been urbanized which eradicates the disadvantages of physical segmentation.

Clustering is one of the extensively used image segmentation mechanisms which categorize patterns in such a method that illustrations of the similar group are more analogous to one a different than samples going to diverse groups. There has been substantial attention newly in the employment of fuzzy clustering methods, which keep more information from the unique image than solid clustering methods. Fuzzy C-means algorithm is broadly favored since of its supplementary elasticity which permits pixels to fit in to numerous classes with unreliable degrees of membership. But the main outfitted protest is that the FCM technique is time consuming. The problem of the FCM is improved by the corresponding techniques used.

Image segmentation is a progression of pixel classification. An image is fragmented into subsets by conveying entity pixels to classes. Seeded region growing (SRG) is one of the mixture methods establishes with allocated seeds, and produce regions by integrating a pixel into its adjacent neighboring seed region. The first-order dependence happens when numerous pixels have the similar diversity quantify to their adjoining regions. The second-order dependence occurs when one pixel has the

similar dissimilarity assess to numerous regions. They used analogous processing and re-examination to eradicate the arranged dependencies.

In this paper, we plan to present fuzzy relevance feedback mechanism to analyze medical image disease diagnosis. With level set segmentation based on geodesic active contour, active cluster objects are segregated. Cluster object formation is done with fuzzification of growing active contours with the previously known contours of diseased image portions. Fuzzy active functions are generated with detected contours. Detected contours are formed as cluster group of medical image segment portions.

II. LITERATURE REVIEW

Image segmentation [6] is an uncomplicated and noteworthy constituent in numerous applications such as pattern recognition, image analysis, medical diagnosis and at present in robotic vision. Nevertheless, it is one of the most hard and demanding tasks in image processing, and decides the excellence of the ultimate results of the image analysis. In [1], proposed an approach for image segmentation via fuzzification of R nyi Entropy of Generalized Distributions (REGD). The fuzzy REGD is utilized to specifically determine the structural in sequence of image and to place the finest threshold preferred by segmentation [11]. The proposed approach illustrates upon the supposition that the finest threshold agrees with utmost information contented of the distribution. Over the previous century knowledge has sophisticated from the detection of xrays to a diversity of imaging tools such as Computed Tomography (CT), MRI, Positron Emission Tomography (PET) and ultrasonography [7]. If segmentation is done, there is a possibility of topology alters. The topology of the network should be conserved [12].

In medical imaging, precise segmentation of brain MR images is of attention for numerous brain manipulations. In [2], present a process for brain withdrawal and tissues categorization. An relevance of this method to the segmentation of replicated MRI intellectual images in three clusters will be completed. Fuzzy clustering using Fuzzy C- Means (FCM) algorithm established to be superior over the additional clustering approaches in terms of segmentation competence. But the major problem of the FCM algorithm is the massive computational instance essential for convergence [10]. The efficiency of the FCM algorithm in terms of computational speed is enhanced by adapting the cluster core and association value updating criterion. In [3], divergence rate is evaluated among the conservative FCM and the enhanced FCM. Fuzzy C means is a way of grouping which permits one pixel to fit in to one or more clusters [9]. The FCM algorithm efforts to separating a restricted collection of pixels into a compilation of "C" fuzzy clusters regarding some known criteria [8].

Even though the conservative FCM algorithm works fine on mainly noise-free images, it has a severe restraint [5]: it does not integrate any information regarding spatial situation, which basis it to be receptive to noise and imaging objects. To recompense for this disadvantage of FCM, we have proposed in [4] the preface of spatial information as conclusion by hubbing on the neighborhood (DFN) for the pixels not containing a sturdy amount of membership behind the fuzzy partition.

III. DIAGNOSING MEDICAL IMAGE USING FUZZY RELEVANCE FEEDBACK TECHNIQUE

The proposed work is reliably designed for image segmentation by adapting the Fuzzy relevance feedback technique which identifies the cluster object formation of growing active contours with the previously known contours of diseased image portions. Fuzzy active functions are generated with detected contours. Detected contours are formed as cluster group of medical image segment portions. After identifying the growing contours of cluster object, the automatic seeded growing method is applied to identify the similarity raises among the regions on clustered portion. The proposed image segmentation using fuzzy relevance feedback describes the fuzzification of cluster object formation to identify the growing active contours. The quantization of the characteristic space is achieved by covering the lesser 'm' bits of the characteristic value. The quantized production will affect in the frequent intensity values for other than one characteristic vector. The architecture diagram of the proposed diagnosing medical image using fuzzy relevance feedback mechanism [DMFRF] is shown in fig 3.1.

From the fig 3.1, it is being noted the active cluster objects obtained from the level set GAC are taken as input for further process. For the active cluster objects, the fuzzy feedback relevance mechanism is applied to identify the intensity value of the given input image. For each medical image, there might be a pre-dominant value to be compared to attain the contour growth. For that, we have to compare the pre-dominant vale with the obtained value. Then the comparison will takes place to identify the growth of contour on the clustered image portions. The growth of contour are detected with the feedback process determine the feedback to lessen the error rate occurrence. After detecting the growth of contour, form a cluster of medical image segmented portions.

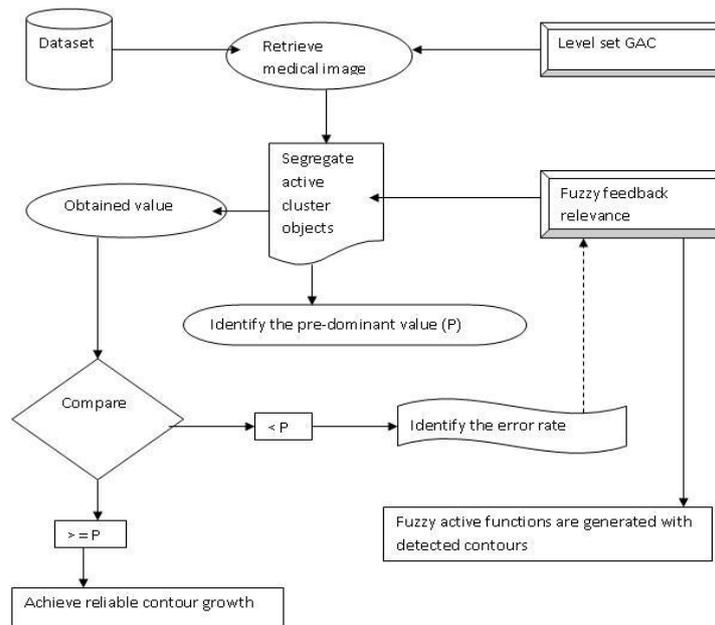


Fig 3.1 Architecture diagram of the proposed DMFRF

A. Fuzzy relevance feedback mechanism for cluster object formation

A given medical image objects model is O , specified with a set of similarity measures $M = \{m_{ij}\}$ which is used to determine how similar or dissimilar two objects are. Different similarity measures are used for different feature representations. Based on the image object model and set of similarity measures, the proposed fuzzy relevance feedback mechanism identified the growth of contour in the image object model. The process of the fuzzy relevance feedback mechanism is described in the fig 3.2.

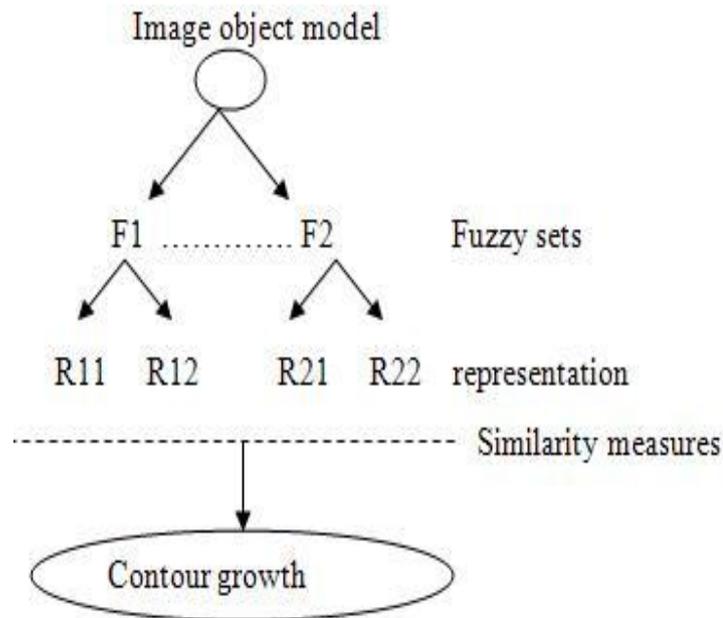


Fig 3.2 Process of fuzzy relevance feedback mechanism

Initialize the pre-dominant value (P) of each active contour objects in the clustered image portions. Implement the fuzzification of active contour objects to form the cluster object in the segmented portions based on number of different features

present in the active contour objects. Fuzzy active functions are generated with detected contours. Detected contours are formed as a cluster group of medical image segment portions. The values obtained (o) using fuzzy feature sets are analyzed and error rate (e) obtained through the process of fuzzification is identified. The error rate of the active contour objects are identified by evaluating the error rate

$$e = P - o \dots \text{eqn 1}$$

If the error rate attains maximum, the active contour objects are again processed with the fuzzification and the error rate is again processed. The process of fuzzification takes place until the error rate reaches its minimum value. After processing with the fuzzification mechanism, the pre-dominant value is analyzed with each intensity value of the active contour objects of each segmented portions.

The algorithm below describes the proposed **Fuzzy relevance feedback mechanism** for cluster object formation

- Step 1: Given the number of clusters c , the number of images N .
- Step 2: Initialize positive matrix $P_{c \times N}$ and negative matrix $Q_{c \times N}$ to be zero matrices.
- Step 3: Repeat
- Step 4: A user begins his (her) recovery session by giving a medical image as input;
- Step 5: flag $\leftarrow 1$; While (flag = 1)
- Step 6: If the system can choose that user is looking for a pre-dominant value corresponding to Cluster s
- Step 7: Search images inside Cluster s ; flag $\leftarrow 0$;
- Step 8: Else : Probabilistic Feature Relevance mechanism (PFRL);
- Step 9: End if : End while
- Step 10: If (flag = 0)
- Step 11: Compute κ and renew P and Q , then calculate matrix F and α ;
- $k = \arg \max_{k=1,2,\dots,c} P(k) \dots \text{eqn 2}$
- Where P is the positive matrix
- k- Index of the cluster
- c- Number of contour objects
- Step 12: Calculate cluster centers and the fuzzy covariance matrices concerning Pre-dominant value
- Step 13: Update partition matrix: if not predefined as 0, the elements are computed again. With the same procedure
- Step 14: If k exceeds pre-dominant value : Stop : Else, Goto 2
- Step 15: End if ; End

The above algorithm described the process of Fuzzy active functions are generated with detected contours. Based on the number of clusters formed by the GAC level set method, active contour objects are segregated. Then the contour objects are formed with fuzzification process. The pre-dominant value of each contour objects are compared with the pre-defined intensity value of the given segmented image portions. Based on the pre-dominant value, fuzzification process takes place with the relevant feedback mechanism.

IV. EXPERIMENTAL EVALUATION

The proposed diagnosing medical image using fuzzy relevance feedback mechanism is efficiently designed for analyzing the growth of contour in the segmented image. Experiments for different kinds of images were presented for evaluation. These experiments express the capability to notice several objects, as well as the capability to notice interior and exterior boundaries at the same time. The experiment is taken over with given medical image shown in fig 3.1 which is taken as input image. The performance of the image segmentation using GAC level set methods is tested under medical images. The segment size defines the size of the partitioned image in a meaningful format. Even after partition is done with the image, how the clarity of the image would be. The contour growth defines the sharpness level of the image after it gets partitioned using GAC level set methods. Then the fuzzy relevance feedback mechanism is applied based on the pre-dominant value of the subjective images. If the obtained value of contour growth is less than the pre-dominant value, then the error rate is identified with the steps to improve the growth of contour. The performance evaluation of the diagnosing image process using fuzzy relevance feedback is measured in terms of

- i). Contour objects in the cluster,

- ii). Contour growth,
- iii). error rate

V. RESULTS AND DISCUSSION

When compared to an existing novel approach for image segmentation via fuzzification of Rènyi Entropy of Generalized Distributions (REGD) for Image segmentation in which the optimal threshold corresponds with the highest information content of the distribution consumes more time, but the proposed diagnosing medical image using fuzzy relevance feedback mechanism performed better in terms of segment size and contour growth. The sharpness level of the image after segmentation is high in the proposed diagnosing medical image using fuzzy relevance feedback mechanism. The below table and graph describes the performance of the proposed diagnosing medical image using fuzzy relevance feedback mechanism.

No. of cluster	Contour objects in the cluster	
	Proposed DMFRF	Existing REGD
1	4	2
2	5	3
3	8	5
4	6	4
5	10	5

Table 5.1 No. of clusters vs. contour objects in the cluster

The above table (table 5.1) describes the number of contour objects present in the cluster for identifying the contour growth. The effect of the proposed diagnosing medical image using fuzzy relevance feedback mechanism is compared with an existing novel approach for image segmentation via fuzzification of Rènyi Entropy of Generalized Distributions (REGD).

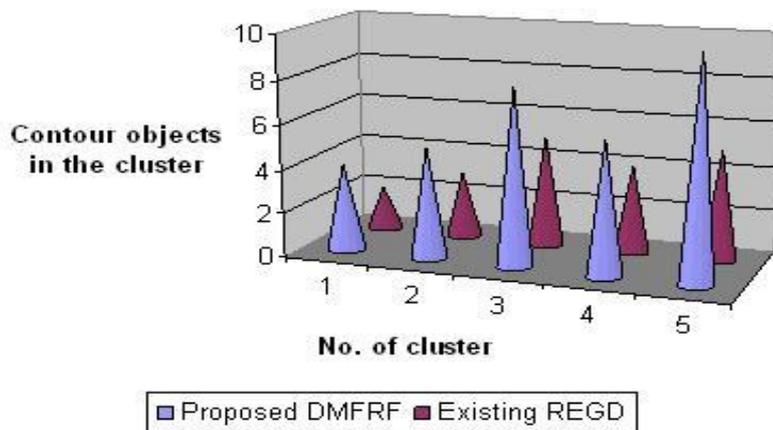


Fig 5.1 No. of clusters vs. contour objects in the cluster

Clustered using GAC level set method. In the proposed diagnosing medical image using fuzzy relevance feedback mechanism [DMFRF], the clustered part of the image provides a list of contour objects and the pre-dominant value of the each contour objects are identified. Evaluate the comparison of the pre-dominant value and the obtained value to identify the contour objects in the cluster. Based on the contour objects, the level of the clustered part of the diseased diagnosed images are identified clearly. Compared to an existing novel approach for image segmentation via fuzzification of Rènyi Entropy of Generalized Distributions (REGD), the proposed DMFRF provides a contour objects better in the clustered image part and the variance is 20-30% high in the proposed DMFRF.

No. of cluster	Contour growth (%)	
	Proposed DMFRF	Existing REGD
1	12	5
2	16	10
3	20	13
4	22	15
5	25	17

Table 5.2 No. of clusters vs. contour growth

The above table (table 5.2) describes the growth of contour based on number of clusters in the image segmentation. The effect of the proposed diagnosing medical image using fuzzy relevance feedback mechanism is compared with an existing novel approach for image segmentation via fuzzification of R nyi Entropy of Generalized Distributions (REGD).

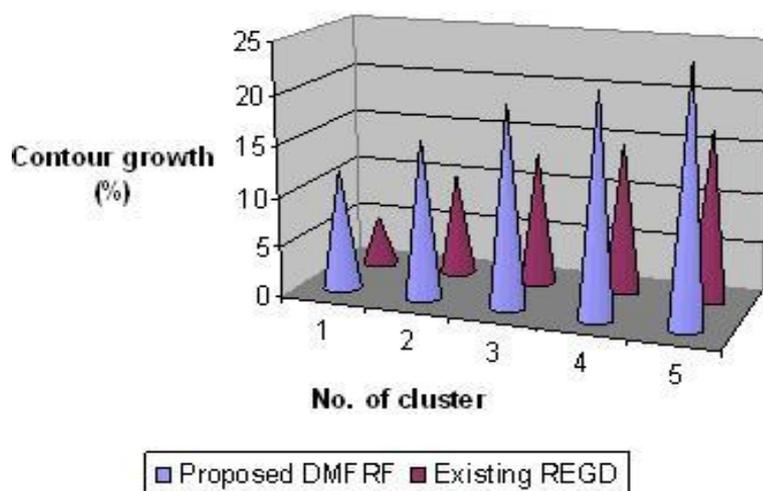


Fig 5.2 No. of clusters vs. contour growth

Fig 5.2 describes the growth of contour in the clustered image using fuzzy relevance feedback mechanism. For each and every image, the intensity/pre-dominant values are there. After clustering the image with active contour objects, the difference between the pre-dominant and obtained values are evaluated. These difference represent the growth of contour in the clustered part of the image. Compared to an existing novel approach for image segmentation via fuzzification of R nyi Entropy of Generalized Distributions (REGD), the growth of contour in the proposed diagnosing medical image using fuzzy relevance feedback mechanism is high and the variance is 20-30% high and the growth of contour is easily identified.

No. of contour objects	Error rate	
	Proposed DMFRF	Existing REGD
2	3	8
4	6	14
6	5	12
8	9	18
10	7	16

Table 5.3 No. of contour objects vs. error rate

The above table (table 5.3) describes the error rate occurred while identifying the contour objects. The effect of the proposed diagnosing medical image using fuzzy relevance feedback mechanism is compared with an existing novel approach for image segmentation via fuzzification of R nyi Entropy of Generalized Distributions (REGD).

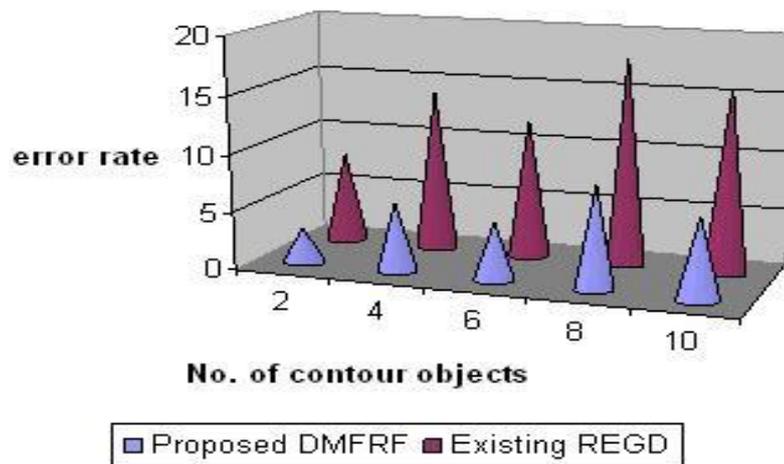


Fig 5.3 No. of contour objects vs. error rate

Fig 5.3 describes the error rate occurred based on the number of contour objects present. The pre-dominant value/intensity of each contour objects are compared with the obtained values of active contour objects using the proposed fuzzy relevance feedback mechanism to identify the error rate. Lesser the error rate, higher the performance of the active contour objects would be. If the error rate obtained in the proposed DMFRF is high, the proposed DMFRF presented a relevant mechanism for diminishing the error rate and tried to obtain the pre-dominant value. Compared to an existing fuzzification of R nyi Entropy of Generalized Distributions, the proposed fuzzy relevance feedback mechanism provides less error rate and the variance is 25-35% low in the proposed DMFRF.

From this work, it is known that the proposed diagnosing medical image using fuzzy relevance feedback mechanism efficiently identify the active contour objects even if the topology of the image changes often. Cluster object formation is done with fuzzification of growing active contours with the previously known contours of diseased image portions. Fuzzy active functions are generated with detected contours. Detected contours are formed as cluster group of medical image segment portions and provide a good growth of contour and less error rate.

VI. CONCLUSION

The proposed DMFRF efficiently had done the fuzzification of growing active contours with the previously known contours of diseased image portions. Fuzzy active functions are generated reliably with detected contours. Detected contours are formed as cluster group of medical image segment portions with a subjective pre-dominant values based on the medical image given as input. The contour growth models that further magnetize the deforming curve to the boundary, by improving the detection of boundaries with large differences in their gradient. In the proposed DMFRF, the growth of contour is high and efficiently identified the contour objects in the cluster using relevance feedback mechanism which provides a feedback for every fuzzy process taken over on medical image with error rate. Compared to an existing REGD for image segmentation, the proposed diagnosing medical image using fuzzy relevance feedback mechanism [DMFRF] performed better in terms of contour growth with less error rate. The experiments were made with medical image and proved that the proposed DMFRF identified the cluster objects contour growth.

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