



MACHINE LEARNING IMPLEMENTATION OF HIERARCHIAL DECISION-TREE PROJECTION ALGORITHM USING MRI IMAGE CORTEX EVALUTION

J. Sarada ¹

Dr.N.V. Muthu Lakshmi ²

1. Research Scholar, Department of Computer Science, Sri Padmavathi MahilaVishvavidyalayam (SPMVV), Tirupati, Andhra Pradesh – India

2. Assistant Professor, Department of Computer Science, Sri Padmavathi MahilaVishvavidyalayam (SPMVV), Tirupati, Andhra Pradesh - India

Abstract: - Chronic Kidney Disease is the most common disease which affects the renal system and makes the kidney in the Chronic Renal Failure. This Chronic Kidney Disease is caused by various factors like diabetes, renal disturbance, kidney stones etc. To Find and Predict the presence of the Chronic Kidney Disease, Earlier the author has proposed the method using the serum of the patient and contributing with the exact value with the default value. In this paper we implement the process of inputting the MRI image of the Kidney and estimate the presence of the Chronic Kidney Disease. The Size and Position of the MRI Image and its characteristic value of functioning is taken into consideration and the presence of the disease is predicted. The results are obtained from each

parametrical evaluation and with the results the prediction and presence of the Chronic Kidney disease is evaluated. The Experimental results shows the algorithmic evaluations are showing the comparatively high accuracy and performance. The experimental results are evaluated to find that gives the intended results.

Keywords:- Chronic Kidney Disease, MRI Image, Hierarchical Decision Tree Projection Algorithm, Machine Learning.

I.INTRODUCTION

Chronic kidney illness consolidates conditions that hurt your kidneys and decrease their ability to keep you strong via doing the duties recorded. If kidney sickness crumbles, wastes can attempt to raised levels in your blood and cause you to feel weakened. You may make disarrays like hypertension, fragility

(low blood count), weak bones, helpless dietary prosperity and nerve hurt. Moreover, kidney ailment extends your threat of having heart and vein sickness. These issues may happen slowly throughout a broad timespan. Wearisome kidney affliction may be achieved by diabetes, hypertension and diverse issue. Early acknowledgment and treatment can often shield incessant kidney disease from breaking down. Right when kidney contamination progresses, it may in the end prompt kidney dissatisfaction, which requires dialysis or a kidney relocate to take care of life.

Constant Kidney Disease is an extremely hazardous medical issue that has been spreading around the world because of modifications in way of life, for example, food propensities, changes in the environment, and so forth In this way, it is basic to choose any solution for maintain a strategic distance from and to foresee the illness in beginning phase which assists with dodging wastage of life. We show that include choice methodology is appropriate for constant kidney illness expectation. Head Component Analysis is one of the element choice methods that channels out less significant ascribes; it additionally picks credits of significance from the dataset. We likewise think about various information order approaches as far as how precisely they foresee ongoing kidney sickness.

We utilize Hierarchical Algorithm for the gathering and requesting of the comparable datasets for the data. Progressive bunching, otherwise called various leveled group investigation, is a calculation that bunches comparative items into bunches called groups. The endpoint is a bunch of groups, where each group is particular from one another bunch, and the articles inside each bunch are comprehensively like one another, Hierarchical grouping begins by regarding every perception as a different group. At that point, it consistently executes the accompanying two stages: (1) recognize the two bunches that are nearest together, and (2) combine the two most comparative groups. This proceeds until all the bunches are consolidated.

We utilize Futuristic Enhance capable Decision-Tree Projection calculation to Implement the Machine Learning Concept into the proposes framework. Choice Tree Projection is a model for

AI. It comprises of a Decision tree at a solitary level. This tree is a Decision tree straightforwardly connected to each leaf with a root hub. Choice Tree Projection makes a creation controlled by the worth expected to be by precisely one information highlight. They are additionally called 1 principle occasionally. As the information work changes, there might be a few varieties. Choice Tree Projection are regularly utilized as parts in troupe procedures for AI

II.RELATED STUDY

Constant Kidney Disease is a peaceful condition. Signs constantly of CKD, if present, are conventionally not unequivocal in nature and not at all like several other consistent afflictions, (for example, congestive cardiovascular breakdown and ceaseless obstructive lung sickness), they don't uncover a piece of information for confirmation or genuineness of the condition. Early affirmation and treatment can regularly keep consistent kidney illness from crumbling. CKD is an incredible condition that outcomes in significant dreariness and mortality. Due to the gigantic work the kidneys play in focusing on homeostasis, CKD can affect fundamentally every body structure. Early confirmation and mediation of CKD is fundamental to slow illness advancement, to keep up near and dear satisfaction and improve results. CKD can besides be depicted as harm to kidney or Glomerular Filtration Rate (GFR) $< 60 \text{ mL/min/1.73 m}^2$ for an exceptionally significant time-frame or ceaselessly, liberated from the clarification.

Kidney hurt in kidney related burdens can be accomplished by the closeness of albuminuria, depicted as egg whites to creatinine degree $>30 \text{ mg/g}$ in two of three spot pee models. GFR can be overviewed from changed serum creatinine and surveying conditions. A touch of the accessible conditions for GFR incorporate are Modification of Diet in Renal Disease (MDRD) study condition, the Cockcroft-Gault condition, and so forth, which are giving positive assessments of GFR in different clinical settings. GFR is by and large surveyed as renal room of an ideal filtration marker i.e., inulin from plasma. This purposeful GFR is considered as the most astounding level yet isn't wise for bit by bit clinical use by virtue of multifaceted nature of the evaluation framework. Looking over GFR subject

to a filtration marker (generally serum creatinine) is as of now all things considered perceived as a fundamental test. Five stages and their individual GFR levels are imparted.

Thriving Informatics is passing on immense extent of information and arranging of this conveyed huge extent of information makes more open entryways for information to be gotten. This got data can improve the association thought of social assurance to patients. The measure of issues creates while managing this tremendous extent of information, one among them is the best approach to break down this information in a dependable manner. The chief objective of Health Informatics is to utilize real clinical information to improve our enthusiasm for remedy and clinical practice. As of now a-days, Data mining procedure is gotten along with AI to kill camouflaged models also concerning evaluation purposes.

Information mining is depicted as "a procedure of nontrivial extraction of saw, adequately dull and possibly obliging data from the informational collection aside in an informational collection. Clinical information mining has marvelous potential like investigating the covered plans which can be used for clinical finding of any illness dataset. There are two methodologies to perform information mining, unequivocally oversight and autonomous learning. In oversight learning, a preparation set is utilized to learn model limits while in autonomous changing no arranging set is utilized. Depiction is a controlled learning used to find camouflaged models from existing clinical information. Depiction is major for treatment of patients. Approach is an enormous information mining task and the standard motivation driving social affair is to propose a depiction work or on the other hand assembling model (called classifier).

The depiction models can change the information in the data base or dataset to an express class. Strategy progression systems include: Guileless Bayes, SMO, K-NN, Support Vector Machine, Radial Premise Function Network, Multi-Layer Perceptron, Logistic Relapse, Decision Tree, Back Propagation Neural Network, Arbitrary Forest, Ultrasonography (USG, etc Feature Decision-Tree is a technique to decrease the dimensionality. The standard utilization of this technique is to dispose of

little subsets of critical highlights from the first dataset dependent on assessment model. By and large, it is utilized to improve exactness.

III. PROPOSED SYSTEM

The Chronic Kidney Disease which chiefly influences the Kidney contribution to different human body afflictions. The Predication of the CKD stayed testing until the AI calculation was brought into the entire mechanical examination. The proposed method implements four main schemes namely 1) MRI Image Segmentation 2) Data Set Generation 3) Algorithmic Implementation 4) Result Generation

The above mention four phases play a vital role in the prediction and identification of the presence of Chronic Kidney Disease. All the Information are taken into consideration and used in all criteria.

MRI Image Segmentation

A Phased MRI image is taken into the Consideration of the patient suspected to be positive with the Chronic Kidney Disease. The Segmentation is done through Auto-Segmentation methodology using the machine learning technology. Each and every segments are denoted as the dataset modes and is taken into the consideration. The parameter taken into consideration are listed below,

Parameter Name	Value
Mean Resistance Index (mean-RI)	Normal/Dilated
Kidney Longitudinal Diameter (I-Diameter)	Normal/Dilated
Kidney Transverse Diameter (t-diameter)	Normal/Dilated
Total Kidney Volume (t-volume)	Normal/Dilated
Kidney Parenchymal Volume (p-volume)	Normal/Dilated
Parenchymal Thickness (mPT)	Normal/Dilated
Total Kidney Section Area (ASMT)	Normal/Dilated
Kidney Sinus Section Area (ASMS)	Normal/Dilated
Kidney Parenchymal Section Area (ASMP)	Normal/Dilated

Table 1 – MRI Evaluation with Respect to the Parametrical name and Result

The previously mentioned boundary esteems are acquired from the clinical assessments of the patient. Every single boundary is assessed with the reaches from Normal-Mild-High regarding the outcomes that are acquired with the clinical tests that are performed. Through this the entire outcomes are mulled over concerning the different gets.

Dataset Generation

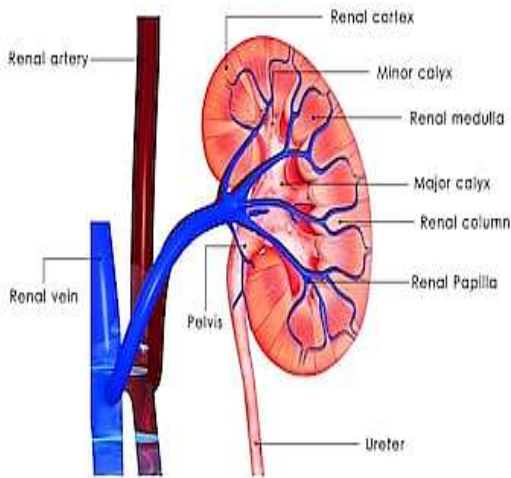


Fig 1: - Anatomy of Kidney with Labeled Peripherals

The above-mentioned image is the picturistic anatomy of the overall kidney dissection for the generation of the chronic kidney diseases.

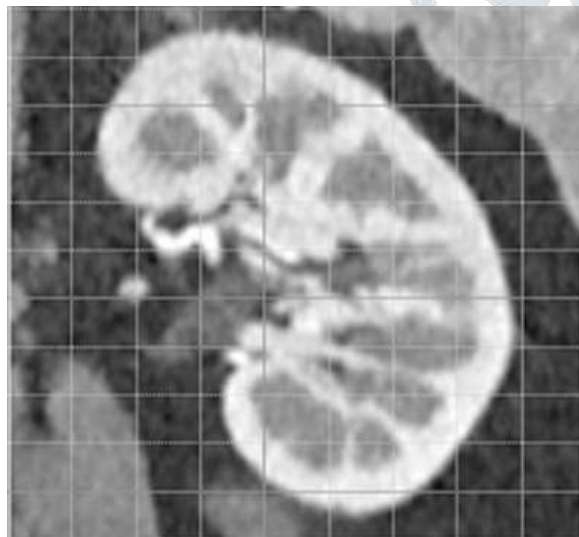


Fig 2: - MRI image of the Kidney with the presence of Chronic Kidney Diseases

This stage gets all the MRI assessment from the parametrical comprises and makes them changed over into the datasets according to the need of it into

the AI idea. Every single parametrical esteem is mulled over and parsed into the following stage. Prior to parsing into the algorithmic assessment, it ought to be changed over in the spot informational indexes which the AI calculation acknowledges. For the assessment few examples are mulled over and development of the dataset is created in this stage.

Parameter Name	Value	Data Conversion (Y/N)
Mean Resistance Index (mean-RI)	Normal	No
Kidney Longitudinal Diameter (l-Diameter)	Normal	No
Kidney Transverse Diameter (t-diameter)	Dilated	Yes
Total Kidney Volume (t-volume)	Dilated	Yes
Kidney Parenchymal Volume (p-volume)	Dilated	Yes
Parenchymal Thickness (mPT)	Normal	No
Total Kidney Section Area (ASMT)	Dilated	Yes
Kidney Sinus Section Area (ASMS)	Dilated	Yes
Kidney Parenchymal Section Area (ASMP)	Dilated	Yes

Fig 2: - Evaluation and Data Set Generation using the Cortex Results of MRI Image

The above table establishes the different test outcomes got from the human investigation of the patient 1. All the outcome contemplations are taken into a solitary cluster for the change of the algorithmic lattice for the expectation and presence of the constant kidney infection.

$$\text{Result } R = \{n, n, y, y, y, n, y, y, y\}$$

All the previously mentioned results are changed over into the 1 and 0 individually for the Yes and No which is later changed over in the resultant framework for the assessment

$$R = \{0, 0, 1, 1, 1, 0, 1, 1, 1\}$$

The assessment network is established utilizing the outcomes got from the above outcome exhibit R, all

the acquired outcomes are isolated into 3x3 lattice for the better comprehension of the outcomes

$$R_1 = \begin{bmatrix} 0 & 0 & 1 \\ 1 & 1 & 0 \\ 1 & 1 & 1 \end{bmatrix}$$

All the above resultant matrix $R \rightarrow R_1$, are sent into the algorithmic evaluation for the result generation.

Algorithmic Implementation

This stage establishes of the algorithmic execution of the resultant lattice acquired from the prior stage. This stage utilizes the Hierarchical Decision-Tree Projection Algorithm which is one of the AI calculations which accepts the resultant network as the information and gets the outcome for the assessment.

Algorithm – Hierarchical Decision-Tree Projection Algorithm

Input = R (R₁,R₂.....R_n)
 Output = Value → V
 Cycle C=(C₁,C₂,.....C_n)
 Result Rector R_R = Abnormality A → 1,
 Normal B → 0
 Value V → Positive(P) / Negative(N)

Initialize
 Initialize Cycle C
 Input
 R → R₁, R₂.... R_n)
 R = (R₁(Value), R₂(Value)...
 R_n (Value))
 R = (R₁(A/B), R₂(A/B) ...
 R_n (A/B))
 R = (R₁ (A/B) (Total),R₂ (A/B)
 (Total)...R_n (A/B) (Total))
 R = V → Positive/Negative
 Result R_R = Abnormality/Normal
 End

The previously mentioned assesses the given dataset into different cycles and settles on the choice whether the presence of the Chronic Kidney Disease is evaluable. The Resultant Vector R which is viewed as assessment of the efficient methodology on the AI guideline for the outcome age. The Abnormality in the resultant vector demonstrates the outcome to be considered as the Significant or non-huge on account of the Chronic Kidney

Diseases, through which the precise predication should be possible in the AI idea.

The previously mentioned assesses the given dataset into different cycles and settles on the choice whether the presence of the Chronic Kidney Disease is evaluable. The Resultant Vector R which is viewed as assessment of the precise methodology on the AI rule for the outcome age. The Abnormality in the resultant vector demonstrates the outcome to be considered as the Significant or non-huge on account of the Chronic Kidney Diseases, through which the precise predication should be possible in the AI idea.

Result Generation

The results are generated using the above-mentioned algorithm for the evaluation chronic kidney disease

Input = R (R → R₁,)
 Output = Value → V
 Cycle C = C₁,
 Rector = Abnormality A → 1, Normal B → 0
 Value V → Positive(P) / Negative(N)

Initialize
 Initialize Cycle C₁
 Input R₁,
 R → R₁
 R₁ = (0,0,1,1,1,0,1,1,1)
 → (B,B,A,A,A,B,A,A,A)
 R₁ = (6(P),3(N))
 R₁ = V → Positive
 Resultant Vector R_R = Abnormality

The Abnormality detected in the given input of the Human Study regarding the Clinical Trials.

$$R = R_1 \rightarrow V(\text{Positive}),$$

R → Positive (CKD)

While Calculating the Patient record with the proposed Hierarchical Decision-Tree Projection Algorithm the above-mentioned results are obtained which shows the presence of Chronic Kidney Disease.

Result oriented evaluation using the two patients MRI Image

Two patient MRI test results are taken into consideration. All the parameters taken for the clinical study is listed below with the needed evaluation with reference range

Parameter Name	Value	Patient 1	Patient 2
Mean Resistance Index (mean-RI)	Normal /Dilated	Normal	Normal
Kidney Longitudinal Diameter (I-Diameter)	Normal /Dilated	Normal	Normal
Kidney Transverse Diameter (t-diameter)	Normal /Dilated	Dilated	Normal
Total Kidney Volume (t-volume)	Normal /Dilated	Dilated	Normal
Kidney Parenchymal Volume (p-volume)	Normal /Dilated	Dilated	Normal
Parenchymal Thickness (mPT)	Normal /Dilated	Normal	Normal
Total Kidney Section Area (ASMT)	Normal /Dilated	Dilated	Normal
Kidney Sinus Section Area (ASMS)	Normal /Dilated	Dilated	Normal
Kidney Parenchymal Section Area (ASMP)	Normal /Dilated	Dilated	Normal

Table 3 – MRI Image Evaluation of Two Patients for the Chronic Kidney Disease Evaluation

The result of the two patient's information is evaluated and produced in the form of the table for the process evaluation

Result	<i>Patient 1</i>	<i>Patient 2</i>
R ₁	Positive	Negative

IV.CONCLUSION

This paper assesses the Prediction and Presence of the Chronic Kidney Disease (CKD) utilizing the Hierarchical Decision-Tree Projection Algorithm through which the specific presence and precise forecast of the presence of Chronic Kidney Disease is assessed. The Hierarchical Decision-Tree Projection calculation is the Enhanced rendition of the Hierarchical Decision Stump Algorithm which looks like better and more exactness when contrasted and the current calculation. The hypothetical assessment frees the exactness from the proposed calculation with giving the better precision when contrasted and other proposed calculations on the constant kidney sickness.

V.REFERENCES

- [1] Noble, A., Amerasinghe, P., Manthirithilake, H. & Arasalingam, S., 2014. Review of literature on chronic kidney disease of unknown etiology (CKDu) in Sri Lanka. International Water Management Institute (IWMI), Volume 158, p. 41.
- [2] Abbas, T. F., Raheem, O. A. & Abbas, A. N., 2011. Surface Fitting and Representation by Using 2D Least Squares Method in CAD Applications. Engineering & Technology Journal, pp. 1325-1437.
- [3] Weaver, V. M., Fadrowski, J. J. & Jaar, B. G., 2015. Global dimensions of chronic kidney disease of unknown etiology (CKDu): a modern era environmental and/or occupational nephropathy?. BMC nephrology, 16(01), pp. 01-08.
- [4] Boor, P., Ostendorf, T. & Floege, J., 2010. Renal fibrosis: novel insights into mechanisms and therapeutic targets. Nature Reviews Nephrology, 06(11), pp. 643-656.
- [5] Kalyan, K. et al., 2014. Artificial Neural Network Application in the Diagnosis of Disease Conditions with Liver Ultrasound Images. Hindawi Publishing Corporation - Advances in Bioinformatics, 708279(01), pp. 01-14.
- [6] Abe, C., KAHN JR, C. E., Doi, K. & Katsuragawa, S., 1992. Computer Aided detection of diffuse liver disease. Investigative radiology, 27(01), pp. 71-77.

- [7] Solomon, C. & Breckon, T., 2011. Fundamentals of Digital Image Processing: A Practical Approach with Examples in Matlab. 01 ed. West Sussex: John Wiley & Sons Ltd.
- [8] Albregtsen, F., 2008. Statistical texture measures computed from gray level cooccurrence matrices. Image processing laboratory, department of informatics, university of oslo, 05(01), pp. 01-14.
- [9] Vicas, C. et al., 2010. Liver Fibrosis detection by the means of texture analysis. Limitations and further development directions. Automat. Comput. Appl. Math., 19(01), pp. 397-402.
- [10] Naganna Chetty, Kunwar Singh Vaisla and Sithu D Sudarsan, "Role of attributes selection in classification of Chronic Kidney Disease patients", International Conference on Computing, Communication and Security (ICCCS), 4-5 Dec, 2015, pp 1-6.
- [11] L. Jerlin Rubini and Dr. P. Eswaran, "Generating comparative analysis of early stage prediction of Chronic Kidney Disease", International Journal of Modern Engineering Research (IJMER), Volume 5, Issue 7, July 2015, pp 49-55.
- [12] Parul Sharma and Poonam Sinha, "Comparative Study of Chronic Kidney Disease Prediction using KNN and SVM", International Journal of Engineering Research & Technology (IJERT), Volume 4, Issue 12, December-2015, pp 608-612.
- [13] Dr. S. Vijayarani and Mr. S. Dhayanand, "Data Mining Classification Algorithms for Kidney Disease Prediction", International Journal on Cybernetics & Informatics (IJCI) Volume 4, No. 4, August 2015, pp 13-25.
- [14] Renuka Marutirao Pujari and Mr. Vikas D. Hajare, "Analysis of Ultrasound Images for Identification of Chronic Kidney Disease Stages", First International Conference on Networks & Soft Computing, 19-20 Aug, 2014, pp 380-383.
- [15] Abeer Y. Al-Hyari, "Chronic Kidney Disease Prediction System Using Classifying Data Mining Techniques", library of university of Jordan, 2012.
- [16] S. Ramya and Dr. N. Radha, "Diagnosis of Chronic Kidney Disease Using Machine Learning Algorithms", International Journal of Innovative Research in Computer and Communication Engineering, Volume 4, Issue 1, January 2016, pp 813-820.
- [17] Mohammed Siyad B and Manoj M, "Fused Features Classification for the Effective Prediction of Chronic Kidney Disease", International Journal for Innovative Research in Science & Technology, Volume 2, Issue 10, March 2016, pp 44-48.
- [18] L. Ladha and T. Deepa, "Feature Selection Methods And Algorithms", International Journal on Computer Science and Engineering, Volume 3, Issue 5, May 2011, pp 1787-1797.
- [19] Jiliang Tang, Salem Alelyani and Huan Liu, "Feature Selection for Classification: A Review".
- [20] Yvan Saeys, Inaki Inza and Pedro Larranaga, "A review of feature selection techniques in bioinformatics", Bioinformatics, Volume 23, Issue 19, August 2007, pp 2507-2517.