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### JETIR.ORG ISSN: 2349-5162 | ESTD Year : 2014 | Monthly Issue JOURNAL OF EMERGING TECHNOLOGIES AND **INNOVATIVE RESEARCH (JETIR)**

An International Scholarly Open Access, Peer-reviewed, Refereed Journal

# **DIABETIC RETINOPATHY EVALUATION**

# Using Deep Neural Networks

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Abstract : Diabetic retinopathy (DR) remains a significant public health challenge, contributing to visual impairment and blindness among individuals with diabetes worldwide. With the exponential growth of medical imaging data, there has been a surge in research focused on leveraging deep learning techniques for the automated detection and classification of DR. This paper provides a comprehensive review of recent advancements in deep learning approaches for DR detection, highlighting the evolution of convolutional neural networks (CNNs) and their application in analyzing retinal fundus images. We discuss key methodologies, including network architectures, feature extraction, and classification strategies, as well as emerging trends such as transfer learning and ensemble methods.

IndexTerms - Diabetic Retinopathy, Deep Learning, Neural Networks, Machine Learning, Image Analysis, Medical Imaging, Fundus Photography, Retinal Images, Feature Extraction, Classification Models, Convolutional Neural Networks (CNNs), Data Augmentation, Retinal Vessels, Hyperglycemia.

#### **I. INTRODUCTION:**

There are many patients in India who lack coverage, including access to effective quality eye care. Diabetic Retinopathy is an eye disease that results in vision loss for an individual who is affected by diabetes (diagnosed or undiagnosed) over a prolonged period. Hyperglycemia, or raised blood sugar, is a common effect of uncontrolled diabetes, and over time it seriously damages many bodily systems, especially the nerves and blood vessels. Conventionally, retinopathy screening is done by fundus examination by ophthalmologists or with the help of color fundus photography using conventional fundus cameras (my Diabetic Retinopathyiatic or non-my Diabetic Retinopathyiatic) by trained eye technicians or optometrists. The primary issue is the grading of the retinal images by ophthalmologists (retinal specialists) or trained persons, whose numbers are very scarce compared to the load of patients requiring screening. Second, some of these patients are based in rural areas and can't visit an eye care provider. Thirdly, as such follow ups are required for years together, the attitude, and/or behavioural aspects negatively impact the patients practice despite knowledge of consequences. These issues can be solved with provision of an automated imaging system within easy reach of the patient. Hence, there has been an increasing interest in the development of automated analysis software using computer Machine Learning/Artificial Intelligence (ML/AI) for analysis of retinal images in people with diabetes thus solving at least some part of the problem.

#### **II. RESEARCH OBJECTIVE**

The primary objective of this study is to investigate the efficacy of deep neural networks (DNNs) in diagnosing and classifying diabetic retinopathy (DR) severity levels from retinal images. Utilizing a large dataset of annotated retinal images, the research aims to train and validate deep learning models to accurately detect and categorize different stages of DR, including mild, moderate, severe, and proliferative stages. Additionally, the study seeks to explore the interpretability of the DNN's predictions to elucidate the key features contributing to DR classification. By leveraging the power of artificial intelligence, this research aims to advance early detection and management of DR, potentially leading to improved patient outcomes and reduced risk of vision loss in diabetic individuals.

Furthermore, the study aims to assess the generalizability of the deep neural network models across diverse patient populations, including varying demographic characteristics and imaging conditions. By analyzing the model's performance on external validation datasets, the study seeks to evaluate its robustness and reliability in real-world clinical settings. Moreover, the research will explore the potential integration of the developed deep learning models into existing healthcare systems for automated DR screening and management, with a focus on scalability, accessibility, and cost-effectiveness. By providing a comprehensive analysis of the capabilities and limitations of deep neural networks in the context of DR diagnosis, this study aims to facilitate the translation of AI-driven solutions into clinical practice, ultimately benefiting diabetic patients worldwide.

#### **III.** Literature Review

In 2023, Rupa Patel Research Scholar [1] proposed proposes an approach based on transfer learning. MobileNetv2, a predefined model is used for extracting a meaningful feature from the given set of retina images. Model is customized by adding the global average pooling layer and SoftMax classifier layer on the top of pre-trained base model for classifying images in one of the five different classes of diabetic retinopathy.

In 2023 Pranoti Nage, Sanjay Shitole & Manesh Kokare [2] proposed work is designed for accurately detecting DR and DME using fundus images. Initially, retinal images are preprocessed to improve the quality of the images, which is performed by following three steps: noise filtering, artefact removal and contrast enhancement.

In 2022, Jayakumari.C1, Vidhya Lavanya2, Sumesh E P [3] proposed an automated system to detect and classify diabetic retinopathy by using ImageNet model to achieve higher accuracy. Publicly available dataset 'Kaggle' of retinal images has been used to compare and analyze the performance of the algorithm. The ImageNet model achieved an impressive performance in Diabetic Retinopathy detection and classification.

In 2022, Balbhim Narhari Bansode, Bakwad K.M, Ajij Sayyad Dildar & Sable G.S. [4] proposed work has established an effective method for the accurate detection of DR by performing optimised segmentation and classification process. The input images were preprocessed with contrast enhancement and average filtering methods. Then, the blood vessels were segmented by introducing an OI-T approach.

In 2021, Pratheek R. Bhat, Tejas B.K, Srushthi S. Pandit, Jaydeb, Mitra, Megha V [5] For many years, a large amount of work has gone in using Machine Learning techniques to detect diabetic retinopathy and many researchers have proposed a variety of methods. Timothy Spencer proposed an early approach, which consists the usage of mathematical morphology on fluorescence angiography images.

In 2021, Jared J. Luxton, Miles J. McKenna, Aidan M. Lewis, Lynn E. Taylor, S.G. Jhavar [6] implemented a individual telomere length data in a machine learning model, XGBoost, trained on pre- radiotherapy (baseline) and in vitro exposed (4 Gy  $\gamma$ -rays) telomere length measurements, to predict post radiotherapy telomeric outcomes. It accurately calculated outcomes.

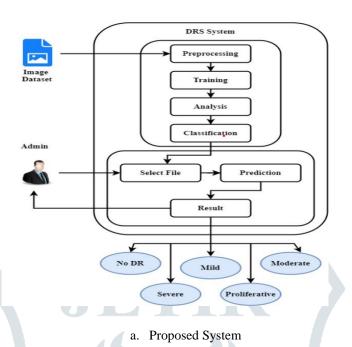
In 2021, R. Alaguselvi & Kalpana Murugan [7] proposed DnCNN method is used to enhance the DR images. In our proposed (DnCNN) method as compared with the various histogram (HE, ADHE, CLAHE, and ESIHE) involves preprocessing of the fundus image for identifying diabetic retinopathy. Both the previous and proposed methods use different noisy input images.

In 2017, Namita Sengar & Malay Kishore Dutta [8] submitted an automated hierarchal system is proposed for the detection and grading of NPDR. Input retinal image is acquired by non-mydriatic fundus camera having field of view (FOV) of 45°. Proposed system consists three subsections as detection of exudates, detection of red spots and grading of NPDR.

In 2016, Harry Pratta, Frans Coenenb, Deborah M Broadbentc, Simon P Hardinga,c, Yalin Zhenga [9] put forward an approach to diagnosing Diabetic Retinopathy from digital fundus images and accurately classifying its severity. Network get developed with CNN architecture and data augmentation which can identify the intricate features involved in the classification task such as microaneurysms, exudate and haemorrhages on the retina and consequently provide a diagnosis automatically and without user input.

In 2016, V. Raman, P. Then and P. Sumari [10] proposed retinal abnormality detection and classification approach: Computeraided detection for diabetic retinopathy by machine learning approaches", Communication Software and Networks (ICCSN).

#### **IV. PROPOSED SYSTEM:**



1.Data Collection: Collect a diverse and representative dataset of retinal images with DR annotations. Collaborate with healthcare institutions or use publicly available datasets like Kaggle's diabetic retinopathy datasets.

2. Preprocess data: The images present in the set are of very high resolution and different in size. Thus before forwarding them to the training phase, all images are cropped into size of 128x128 for uniformity. It also increase the computational speed of the network.

3. Training : Set up the training pipeline, including data loaders, optimizer, and learning rate scheduler.

4. Data Augmentation: Apply data augmentation techniques to increase the diversity of your training set. Address class imbalance if present by using techniques like oversampling or class-weighted loss functions.

5. Analysis: Assess the model's performance on the test set using metrics appropriate for DR evaluation, such as sensitivity, specificity, and area under the curve (AUC).

5. Model Evaluation : Visualize model predictions and compare them with ground truth annotations.

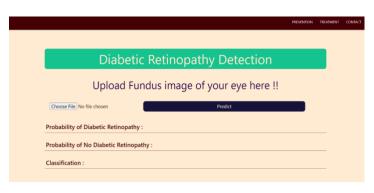
6. Clinical Validation: Collaborate with medical professionals to clinically validate the model's predictions.

7. Deployment: Develop a user-friendly interface for healthcare practitioners to interact with the model.

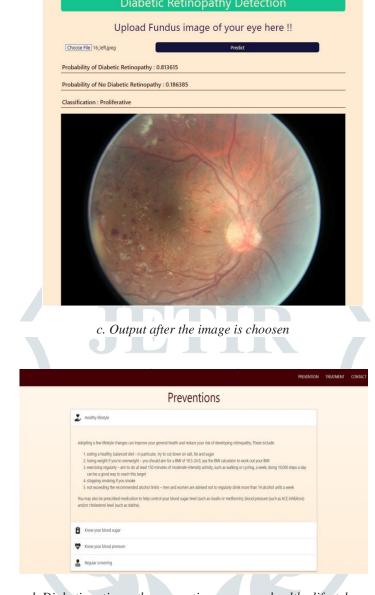
8. Continuous Monitoring and Update: Implement a system for continuous monitoring of model performance in real-world settings.

8. Model Evaluation: Analyze the model's performance metrics, such as accuracy, precision, recall, and F1 score, to determine its effectiveness in predicting personalized radiosensitivity based on telomere dynamics.

#### V. RESULTS AND CONCLUSIONS:



#### b. Choosing an image to upload



d. Diabetic retinopathy prevention measures healthy lifestyles



e. Diabetic retinopathy treatment

PRIVING	N TREATMENT	CONTACT
Preventions		
Healthy lifesyle		
Know your blood sugar		
If you check your blood sugar level at home, it should be 4 to 10mmol/i. The level can vary throughout the day, so try to check it at different times. The check done at your GP surgery is a measure of your average blood sugar level over the past few weeks. You should know this number, as it is the most important measure of your diabetes control. It's called HbA1c, and for most people with diabetes it should be around 40mmol/1 or 6.5%.		
Know your blood pressure		
Regular screening		

#### f. Diabetic Retinopathy Measures know blood sugar

	Preventions
2	Healthy lifestyle
E	Khow your blood sugar
\$	Know your blood pressure
	B Regular screening
	Early detection of refinopathy increases the chances of treatment being effective and stopping it getting worse. You should also contact your (2° or slubetes care team immediately if you develop any problems with your eyes or vision, such as: 1. gradually worsening vision 2. sudgen vision los 3. shapes fixatanis in your field of vision (floaters) 4. blumd vision 5. eye pain or redness
	These symptoms don't necessarily mean you have diabetic retinopathy, but it's important to get them checked out straight away.

Among other existing supervising algorithms, most of them are requiring more pre-processing or post-processing stages for identifying the different stages of the diabetic retinopathy. Also, other algorithms mandatorily requiring manual feature extraction stages to classify the fundus images. In this project proposed Methodology, the development of Convolutional Network based algorithms has been described. Deep convolutional Neural Network (DCNN) it is a wholesome approach to all level of diabetic retinopathy stages. The detection process starting from data collection and processing, image pre-processing and finally Convolutional Neural Network model building and evaluation, no manual feature extraction stages are needed. Early detection of Diabetic Retinopathy is very important for the patient to reduce its impact and to take the necessary preventive remedies avoiding its occurrence in the future.

Therefore, this prediction model is presented to improve the accuracy of occurrence of a diabetic retinopathy with the scope of early detection under the aid of Deep Learning. This project shows the viability of Deep Learning approach to this problem. There remains a lot of experiment to continue improving this model. This model can be used on the top of pre trained model which can provide a substantial boost to this results, but there is many more experiment that will done in future to improve results.

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