LUNGTUMOR SEGMENTATION USING COMPUTED TOMOGRAPHY (CT) IMAGES

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Abstract—Lung tumor segmentation from computed tomographv(CT) images is a fundamental tool for determination and medicinal cure of liver malignant growth. Dissecting liver images is a manual and difficult task, hindering primary research toward finding effective remedies for patients with extreme liver disease. The present strategy to naturally gauge region of the malignant growth knob and disease knob rate utilizing input pictures of lung using Interactive Segmentation using graph cut and region growth based method and multisvm classifier. In contrast with a conventional method, the current strategy can gauge area and level of disease knob with sensible exactness and precision. The trial exhibits that the technique can effectively accomplish segmentation for CT liver images to assist pathologists with recognizing possible tumor size and location.

Keywords—Lung Tumor Segmentation, Image enhancement, CT Image.

I. INTRODUCTION

As indicated by the World Health Organization reports, lung malignancy has been the subsequent significant reason for death in all diseases [1]. A precise and vigorous tumors division technique is required for viable analysis and treatment. At present, computed tomography (CT) is one among the most generally utilized imaging techniques for identification and conclusion of lung lesions, included by its high resolution goals and quick filtering. In daily medical practices, the division should be possible physically by administrators having great ability and experience, however the procedure is consistently tedious and various administrators frequently generate variable outcomes. Hence, the improvement of a programmed segmentation technique is extremely important, primarily because of the inconsistency of lesions shapes, the extraordinary assorted variety of lesions, and the equivocalness of limits among lesions and encompassing ordinary lung tissues. An assortment of AI techniques have been created for programmed or self-loader division of liver lesions at Lung Tumor segmentation challenge 2008 [2].

In particular, Häme et al. utilized fuzzy clustering and a geometric model on the grouping result to get lesion locales [3]; Massoptier et al. applied K-implies grouping to separate liver

injuries [4]; Shimizu et al. prepared AdaBoost classifier to separate the name of voxels through various high quality highlights [5]; Zhou et al. proposed a self-loader division strategy utilizing support vector machine (SVM) classifier to extricate tumor locale on one cut, at that point anticipated the tumor form to its neighboring cuts[6].

Every one of these techniques require high quality features to prepare the classifiers to accomplish great division. All things considered, the extraction and determination of tumor are exceptionally issue subordinate. It is difficult to choose tumor to speak to the attribute of lung tumor information precisely. Furthermore, the size of tumor measurement to a great extent impacts the presentation of AI strategies.

Right now, we use thresholding procedure for lung tumor segmentation. The general structure for the process of lung tumor segmentation is shown in Figure (a). The methodology incorporate Pre-Processing, Segmentation, Post-Processing.

II. DESIGN METHODOLOGY

A.DATA PREPROCESSING

Simple preprocessing techniques on CT images were performed. Firstly, the image is converted to a gray scale image for adjusting image intensities and put the data in the same scale.. Secondly, median filter was used to reduce noise. Thirdly, image enhancement is done to get the better accuracy.



B. INTERACTIVE SEGMENTATION USING GRAPH CUT AND REGION GROWTH METHOD

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Interactive segmentation using graph cut and region growth basedmethod is used to segment lung imagesso no resource is wasted for unnecessary regions. This also reduces the work needed to do after image segmentation because object boundaries are generated within the defined regions.

Image segmentation by graph cut based methodis a normal and powerful approach for images containing packed objects which are differentiable from the background or other objects in terms of intensity values [7]. The pixel limits are typically balanced intuitively and shown progressively on screen. This segmentation is used to efficiently segment the images for better results.

C. CLASSIFICATION USING MULTI SVM:

Multi-level svm classifier is used, which is the combination of multiple binary svms. Multiclass SVM basically consists of the learning module and the classification module, where the classification model is applied to new data. It can be implemented by converting single class SVM into multiples of the binary classifications which can be done by distinguishing the classifiers on the basis of the particular label vs the rest(one-versus-all) or between every pair of classes(one-vs-one). This classifier is used to classify the type of the tumor whether it is a malignant type or a beginin type.

III. RESULTS

A. PRE PROCESSING

Different Pre Processing techniques are applied to the images in order to get better accuracy and results. The outputs of the pre processing techniques are below:







Fig (2): Filtered Enhanced Image Output

B. INTERACTIVE SEGMENTATION USING GRAPH CUT AND REGION GROWTH METHOD

The segmented output using interactive segmentation is shown in fig(3).





The edge detection output is shown in fig(4):





The possible location of tumor nodules using this approach is shown by using a green traced boundary in fig(5).

possible location of cancer is traced by green boundary



Fig (5): Possible Location of tumor nodule

C. CLASSIFICATION USING MULTI SVM:

Multi svm classifier derives the type of the tumor whether it is a malignant or beginin type of tumor. The image for which the results are taken has a beginin type of tumors.

The area and percentage of the tumor is shown in the below table1:

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	Area of tumor nodule in mm ²	Percentage of tumor nodule
Tumor nodules	[22]	0.0135555555
	[56]	0.0488888888
	[66]	0.0522222222
	[84]	0.078888888
	[93]	0.103333333
	[101]	0.112222222
	[124]	0.133333333
	[142]	0.157777777

Table 1: Area and Percentage of lung tumor

IV. CONCLUSION

Lung cancer is one among the most commonly occurred and dangerous cancers. Lung tumor segmentation is one of the most crucial steps in treating lung cancer. Accurate lesion segmentation on computed tomography (CT) images is done. In the future, it is aimed to use neural networks to divide lesions in CT images. An alternative mechanical method based on convolutional neural networks (CNNs) can be presented to divide cancerous tissues in CT images.

V. REFERENCES

[1] WHO http://www.who.int/mediacentre/factsheets/fs297/en/ [2]https://www.ncbi.nlm.nih.gov/pubmed/30159326

[3] Semiautomatic segmentation of liver metastases on volumetric ct images. DOI:10.1118/1.4932365.

[4] A new fully automatic and robust algorithm for fast segmentation of liver tissue and tumors from ct scans. https://www.ncbi.nlm.nih.gov/pubmed/18369633 [5]

https://bmcbioinformatics.biomedcentral.com/articles/10.1186/s1 2859-019-3069-x#Bib1

[6] Volumetry of hepatic metastases in computed tomography using the watershed and active contour

algorithms.Doi: 10.1186/s12859-019-3069-

xPMCID: PMC6886252

[7]https://www.researchgate.net/publication/28359594_Semiauto matic_Segmentation_of_3D_Liver_Tumors_from_CT_Scans_Us ing_Voxel_Classification_and_Propagational_Learning