

SKIN CANCER DETECTION USING DEEP LEARNING ALGORITHMS

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ABSTRACT:

Skin cancer remains one of the most prevalent and potentially life-threatening diseases worldwide. Early and accurate identification of malignant lesions is essential for improving treatment success rates and reducing mortality. Recent advancements in computer-aided diagnosis (CAD) systems, particularly those based on deep learning, offer promising pathways for automated and reliable skin cancer detection.

This study presents an enhanced approach for classifying skin lesions by integrating region-based segmentation with a two-dimensional deep learning framework. Region-based segmentation isolates suspected lesion areas by evaluating color, texture, and shape features extracted from dermoscopic images, ensuring precise delineation of lesion boundaries. These segmented features are then processed using a 2D deep learning algorithm to differentiate malignant lesions from benign ones.

The proposed model was evaluated using a large, annotated dataset of skin lesion images. Experimental findings reveal that the combination of region-based segmentation and deep learning produces high accuracy, sensitivity, and specificity. This demonstrates the approach's

potential as a clinical support tool for dermatologists, assisting in early diagnosis and improving patient outcomes. With further refinement and extensive clinical validation, the system may contribute significantly to cost-effective and accessible skin cancer screening.

Keywords: Skin cancer, Deep learning, Segmentation, CNN, 2D learning.

INTRODUCTION:

Skin cancer poses a major global health challenge, with incidence rates continuing to rise. Early detection is crucial, as timely intervention greatly increases the likelihood of successful treatment. Traditional screening relies heavily on visual inspection by dermatologists, which can be subjective, time-consuming, and influenced by varying levels of expertise.

Deep learning, a rapidly advancing branch of artificial intelligence, has shown exceptional capability in medical image analysis. Convolutional neural networks (CNNs), in particular, can automatically learn visual patterns from large training datasets, making them ideal for detecting abnormalities in skin images. This technological progression has created opportunities for developing CAD systems that support clinicians by offering objective and fast assessments of skin lesions.

The objective of this research is to design a deep learning-based diagnostic system that can classify

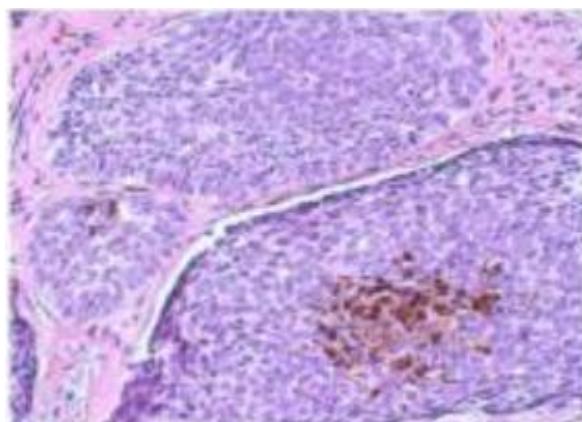
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skin lesions as benign or malignant. The paper discusses challenges such as variations in lesion appearance, differences in image acquisition, and the need for diverse training datasets to ensure robustness. Additionally, the study explores suitable deep learning architectures, training strategies, and evaluation methods to build a reliable model.

Fig 1:



Fig 2:



The successful implementation of such systems could democratize access to early screening especially in resource-limited settings and empower general practitioners and individuals to perform preliminary assessments. This aligns with

the broader goal of enhancing public health outcomes through technological innovation

LITERATURE REVIEW

Several researchers have proposed automated methods for skin lesion classification using neural networks and machine learning algorithms.

Xie et al. introduced a three-stage model involving lesion extraction, feature selection, and classification using an ensemble of neural networks. Their system extracted detailed color, texture, and shape features and used PCA for dimensionality reduction, demonstrating strong classification performance.

Masood et al. developed an ANN-based system that evaluated multiple learning algorithms, including Levenberg–Marquardt and scaled conjugate gradient approaches. The LM algorithm achieved high specificity, while SCG produced better sensitivity, illustrating the importance of choosing suitable learning strategies.

Another study implemented the ABCD rule to characterize moles based on asymmetry, border irregularity, color distribution, and diameter. Using these features and a backpropagation neural network, the model achieved high classification accuracy.

Other research explored wavelet-based feature extraction, maximum entropy segmentation, and

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GLCM-based texture analysis, followed by ANN or CNN classifiers. These studies consistently highlight the value of automated systems for early skin cancer detection and the superior performance of deep learning over classical methods.

AIM AND OBJECTIVES

Aim

The primary aim of this study is to develop an efficient and accurate deep learning-based system for the early detection and classification of skin cancer using dermoscopic images.

Objectives

To design a region-based image segmentation method capable of accurately isolating skin lesions from surrounding healthy tissue.

To extract relevant visual features including color, texture, and shape to support reliable lesion characterization.

To develop and implement a deep convolutional neural network (CNN) for automated classification of skin lesions as benign or malignant.

To evaluate the performance of the proposed model using standard metrics such as accuracy, precision, recall, and F1-score.

To compare the proposed CNN approach with existing deep learning algorithms to determine relative improvements and effectiveness.

To provide a robust diagnostic support system that can assist clinicians in early detection and decision-making

METHODOLOGY:

Convolutional Neural Networks (CNNs)

CNNs are widely used in image recognition tasks due to their ability to learn both global and local visual patterns. They consist of convolutional layers for feature extraction, pooling layers for dimensionality reduction, and fully connected layers for classification. CNNs have demonstrated exceptional performance in medical imaging, particularly in tasks involving lesion segmentation and classification.

Dataset

The model was trained using the 2016 ISIC Challenge dataset, which contains 379 dermoscopic images labeled as benign or malignant. Fourteen clinical attributes accompany the images, providing additional data for feature learning.

Image Preprocessing

a. Image Filtering

Mean filtering was employed to smooth the images by replacing each pixel with the average value of its neighborhood. This reduces intensity variations and eliminates noise, facilitating more effective segmentation.

b. Segmentation

Image segmentation is essential for isolating cancerous regions from surrounding skin. Region-

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based segmentation was used because it is effective even in noisy environments.

Region Growing

This approach begins with a seed pixel and iteratively incorporates neighboring pixels that satisfy predefined similarity conditions. The process continues until no further pixels meet the criteria.

Region Splitting and Merging

In the splitting phase, the entire image is initially treated as one region. If it fails similarity tests, it is recursively divided into quadrants. In the merging phase, small homogeneous regions are combined to form complete segmented areas.

Deep CNN Model

A deep CNN architecture with eight layers was implemented. The first five layers consisted of convolutional operations, and the final three layers were fully connected. Rectified Linear Unit (ReLU) activation functions were used to prevent vanishing gradients and accelerate training.

Input images ($227 \times 227 \times 3$) were processed using 96 convolutional filters of size 11×11 . Subsequent layers included normalization, ReLU activation, and maximum pooling. The fully connected layers acted as classifiers, mapping learned features to output categories.

Performance Metrics

Model performance was evaluated using:

- Precision

- Recall
- F1 Score
- Accuracy

Confusion matrix-derived values (TP, TN, FP, FN) were used to compute these metrics

RESULTS:

A comparative performance analysis was conducted for three deep learning algorithms: GAN, DCGAN, and Fast CNN.

Algorithm	Precision	F1 Score	Accuracy	Recall
GAN	85.67	86.89	87.12	84.91
Deep Convolutional GAN	89.34	89.56	90.23	91.12
Fast CNN	96.67	97.54	97.45	98.45

The proposed Fast CNN model outperformed the other algorithms across all metrics, demonstrating excellent classification capability.

DISCUSSION

The findings of this study demonstrate that the integration of region-based segmentation with a deep convolutional neural network provides a reliable and effective framework for automated skin cancer detection. The segmentation process played a crucial role in isolating lesion regions with high precision, thereby enabling the CNN to learn more discriminative features during training. Accurate boundary detection is essential for improving classification performance, and the region-growing and splitting-merging methods used in this study proved effective even when dealing with variations in image quality and noise.

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The deep CNN model achieved superior performance compared to GAN and DCGAN-based approaches, with notable improvements in precision, recall, accuracy, and F1-score. These results highlight the strength of deep learning algorithms in capturing complex patterns and subtle differences between benign and malignant skin lesions. The ability of the Fast CNN to generalize across diverse images suggests that deep architectures with optimized parameters can significantly enhance diagnostic reliability.

In addition, the robustness of the proposed model indicates its potential for integration into real-world clinical workflows. By delivering rapid and accurate predictions, the system can support dermatologists in making informed decisions, particularly in cases where early detection can substantially influence treatment outcomes. Such CAD tools are especially valuable in settings with limited access to specialized dermatological expertise.

Despite the promising results, several challenges remain. The dataset used, though relevant, was relatively limited in size, and larger, more diverse datasets would further improve the model's generalizability. Variations in imaging conditions, skin tones, and lesion types must also be considered when scaling the system for broader use. Future work may explore advanced data augmentation strategies, transfer learning techniques, and hybrid models to enhance

performance and reduce dependency on large annotated datasets.

Overall, the study demonstrates that deep learning-based skin cancer detection systems can significantly improve diagnostic accuracy and contribute to early intervention efforts. Continued advancements in CNN architectures, combined with extensive clinical validation, will be essential for translating such technologies into practical, accessible medical tools.

CONCLUSION

This study demonstrates the potential of an enhanced CNN-based framework for accurate and efficient skin cancer detection. The proposed system delivers high performance in distinguishing malignant from benign lesions, even with variations in image quality, lighting, and skin tone.

The model's robustness and computational efficiency make it suitable for integration into CAD systems and mobile applications, broadening access to early screening tools. Although the system achieves strong accuracy, it should complement—not replace—clinical judgment. Continued research, larger datasets, and real-world clinical testing are necessary to further validate and refine the model.

Integrating advanced deep learning techniques into dermatological practice marks a significant

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advancement towards improving early diagnosis and reducing the global burden of skin cancer.

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