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Deep Learning-Based Detection of Diabetic Retinopathy using Retina Images

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Abstract: The early detection of retinal diseases, such as diabetic retinopathy, is essential to prevent irreversible vision loss. In this study, we propose an automated system for the detection of retinal diseases using deep learning techniques, specifically Convolutional Neural Networks (CNN) and pre-trained models like MobileNet and VGG16. These models are applied to retinal fundus images to identify abnormalities, such as microaneurysms and hemorrhages, that are indicative of retinal diseases. The use of CNN allows for efficient feature extraction, while MobileNet and VGG16, known for their strong performance in image classification tasks, enable accurate disease classification across different stages. The system is trained and evaluated on publicly available datasets, ensuring robust performance across diverse retinal images. The study compares the performance of both MobileNet and VGG16 models, with a focus on achieving high accuracy, sensitivity, and specificity in detecting retinal abnormalities. MobileNet, with its lightweight architecture, proves advantageous for real-time applications on mobile devices, offering fast and efficient disease detection. On the other hand, VGG16 delivers higher precision but at a greater computational cost. Experimental results demonstrate the system's potential to assist healthcare professionals by automating the diagnostic process, enabling early detection and timely treatment of retinal diseases. This approach significantly reduces the reliance on manual screening, leading to more accessible and scalable diagnostic solutions

Keywords: Diabetic Retinopathy, Retina Image Analysis, Deep Learning, Convolutional Neural Networks (CNN), MobileNet, VGG16, Disease detection, Retinal diseases.

I. INTRODUCTION

Diabetic retinopathy is one of the most common complications of diabetes and a leading cause of blindness worldwide. As diabetes affects blood vessels in the retina, it can cause various abnormalities such as microaneurysms, hemorrhages, and retinal swelling, which gradually impair vision. Early diagnosis and timely treatment of diabetic retinopathy are critical to preventing severe vision loss. However, traditional methods for detecting DR, which involve manual screening by ophthalmologists, are time-consuming and often prone to human error, particularly in regions with limited medical resources. This underscores the need for automated, reliable, and scalable solutions for early detection of diabetic retinopathy. Recent advancements in deep learning, particularly Convolutional Neural Networks (CNNs), have shown tremendous potential in medical image analysis. CNNs have the ability to automatically learn and extract relevant features from images, making them ideal for detecting complex patterns in medical data, such as retinal fundus images. Deep learning-based systems can significantly enhance the speed and accuracy of diagnosing diabetic retinopathy, reducing the burden on healthcare professionals and allowing for more efficient screening in larger populations. CNNs, combined with pre-trained models such as MobileNet and VGG16, offer promising solutions by leveraging transfer learning to improve classification accuracy while minimizing the need for extensive labeled data. In this paper, we focus on developing a deep learning-based system for detecting diabetic retinopathy using retina images. The proposed approach employs CNNs alongside MobileNet and VGG16, two popular pre-trained models that have been widely used in image classification tasks. MobileNet, with its lightweight architecture, is well-suited for real-time applications, particularly on mobile devices, while VGG16, though computationally heavier, offers higher accuracy in identifying retinal abnormalities. By fine-tuning these models with large datasets of retinal fundus images, we aim to create a robust, scalable solution for automated diabetic retinopathy detection. This paper arms to provide a detailed

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analysis of the performance of CNN, MobileNet, and VGG16 in classifying retinal images into different stages of diabetic retinopathy. We evaluate these models in terms of accuracy, sensitivity, and computational efficiency, comparing their suitability for real-time clinical deployment versus more intensive diagnostic environments. The proposed system has the potential to revolutionize diabetic retinopathy screening by facilitating early detection, thereby improving patient outcomes and reducing the global burden of diabetes-related vision loss.

II. PROBLEM STATEMENT

The problem of detecting diabetic retinopathy lies in the complexity and resource-intensive nature of traditional diagnostic methods, which require trained ophthalmologists to manually examine retinal images for subtle signs of the disease. This process is not only time-consuming but also prone to variability in interpretation, especially in large-scale screenings. As diabetes cases continue to rise globally, many regions face a shortage of specialized medical professionals, leading to delays in diagnosis and treatment. Without timely intervention, diabetic retinopathy can progress to irreversible blindness. Therefore, there is an urgent need for an automated, reliable, and efficient system that can accurately detect diabetic retinopathy from retinal fundus images. The solution must address the challenge of identifying varying stages of the disease with high accuracy while being scalable for use in both clinical environments and remote healthcare settings.

III. LITERATURE REVIEW

S. K. M, M. A. V, and S. M, "Retinal Image Processing using Neural Network with Deep Learning" (2022)[1]This study investigates the application of neural networks with deep learning techniques for retinal image processing, specifically aimed at diagnosing retinal diseases such as diabetic retinopathy. The authors employ convolutional neural networks (CNNs) to extract features from retinal images and classify the diseases with high accuracy. The deep learning approach offers improved performance compared to traditional methods, as it automates the identification of complex patterns that are difficult for human experts to detect manually. By leveraging a deep learning model, the research demonstrates a marked improvement in accuracy and efficiency in disease detection.Despite the advantages, there are some limitations to the approach. The study acknowledges the challenge of requiring large datasets for training deep neural networks, which may not be readily available in medical applications. Additionally, the computational cost of training such models can be prohibitive, particularly in low-resource environments. Furthermore, the model's performance can be affected by the quality of the retinal images, with variability in lighting and image clarity potentially leading to lower accuracy in certain cases.

Patel, J., Umar, S.A., "Detection of Imagery Vowel Speech Using Deep Learning" (2022)[2]This paper explores the use of deep learning in the detection and classification of vowel sounds from speech imagery. The authors propose a deep learning-based approach that effectively extracts features from speech data and classifies vowel sounds with high accuracy. By using advanced neural networks, the model is designed to handle noisy environments and distinguish between similar vowel sounds, improving the performance of speech recognition systems. This approach is particularly useful in applications that require robust vowel detection in challenging acoustic conditions, such as voice-controlled systems. The system has some limitations. The model is computationally intensive, requiring significant resources for training and inference, which could limit its adoption in real-time applications. Additionally, the performance of the model may suffer when applied to new languages, dialects, or accents that were not part of the original training dataset. This lack of generalizability to diverse linguistic contexts reduces the system's flexibility, potentially necessitating additional training for specific speech environments.

P. Kollapudi et al., "A New Method for Scene Classification from Remote Sensing Images" (2022)[3]In this study, the authors propose a novel deep learning-based method for scene classification from remote sensing images. The model utilizes convolutional neural networks (CNNs) to extract relevant features from complex, large-scale remote sensing data, enabling the classification of various land cover types with high accuracy. The proposed method demonstrates significant improvements in both speed and precision, making it highly suitable for applications such as environmental monitoring, urban planning, and disaster management. The ability to handle large datasets efficiently is a key advantage of this model, particularly in the context of remote sensing, where vast amounts of data are generated. The primary limitation of the method is the high computational cost involved in training deep learning deep learning especially when

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applied to large-scale remote sensing data. Furthermore, the accuracy of the classification can be affected by variations in image resolution and noise, leading to potential misclassifications. While the model shows promise in controlled environments, real-world applications may require additional preprocessing steps to address these challenges and improve robustness across different imaging conditions.

Venkata Subbarao et al[4]., "Brain Tumor Classification Using Decision Tree and Neural Network Classifiers" (2022)This research compares the performance of decision tree and neural network classifiers in the task of brain tumor classification. The study finds that while decision trees are simpler and faster to train, neural networks offer superior classification accuracy due to their ability to capture complex, non-linear relationships in the data. The neural network model outperforms traditional classifiers, making it particularly well-suited for medical applications where accuracy is critical. The study highlights the importance of selecting appropriate machine learning models for medical imaging tasks, with neural networks emerging as a more effective tool for brain tumorclassification.Despite the advantages of neural networks, the study also notes some drawbacks. Neural networks are prone to overfitting, especially when trained on small datasets, which can limit their generalizability. Additionally, training neural networks requires substantial computational resources, which may not always be available in clinical settings. In contrast, while decision trees are less accurate, they offer greater interpretability and are computationally more efficient, making them a viable option in certain scenarios where speed and simplicity are prioritized over precision.

M. M. U. Islam and M. Indiramma[5], "Retinal Vessel Segmentation using Deep Learning – A Study" (2020)This study investigates the use of deep learning, specifically U-Net architectures, for segmenting retinal vessels in fundus images. The segmentation of retinal vessels is crucial for diagnosing conditions like diabetic retinopathy and hypertension, and the study shows that deep learning models can significantly improve the accuracy and speed of this process. The U-Net architecture, which is well-suited for medical image segmentation tasks, excels in identifying fine vessel structures, providing highly detailed and precise segmentations. The study highlights the potential of deep learning in improving diagnostic workflows by reducing the need for manual intervention. The model's performance is highly dependent on the quality of the input images, with noise or poor image resolution leading to less accurate segmentations. Additionally, the requirement for large annotated datasets to train the deep learning models poses a challenge, particularly in medical fields where data collection is time-consuming and expensive. The computational demands of deep learning models also represent a significant barrier to widespread adoption in clinical settings, particularly in resource-constrained environments.

J. Wang et al.[6], "Diagnosing and Segmenting Choroidal Neovascularization in Optical Coherence Tomographic Angiography Using Deep Learning" (2021)This paper focuses on diagnosing and segmenting choroidal neovascularization (CNV) in optical coherence tomographic angiography (OCTA) images using deep learning models. The authors developed a segmentation model that accurately identifies and segments CNV regions, providing an automated solution that reduces the burden on clinicians and improves diagnostic efficiency. By applying deep learning techniques, the model is able to detect subtle patterns in the OCTA images that are often missed by manual examination, offering significant improvements in both accuracy and speed of diagnosis.Despite its effectiveness, the model's performance is heavily reliant on high-quality OCTA images, with lower-quality inputs potentially leading to inaccurate segmentations. Furthermore, the computational intensity of deep learning algorithms means that they require advanced hardware for real-time analysis, which may limit the accessibility of the technology in some clinical environments. Additionally, the study points out the need for further validation with larger and more diverse datasets to ensure the model's generalizability across different patient populations.

J. Ma et al.[7], "Image Matching from Handcrafted to Deep Features: A Survey" (2021)This survey paper provides an overview of the evolution of image matching techniques, from traditional handcrafted methods to more recent deep learning-based approaches. The authors examine various deep feature extraction methods and their applications in tasks such as object recognition, image retrieval, and scene understanding. Deep learning methods, particularly those involving convolutional neural networks (CNNs), have significantly improved the accuracy and robustness of image matching, outperforming traditional handcrafted methods in complex and large-scale datasets. While deep learning-based methods offer superior performance, they come with certain drawbacks. The computational cost of training deep networks is much higher than that of traditional methods, making them less practical tor real-time applications. Moreover, the interpretability of deep learning models remains a challenge, as it is often difficult to understand why

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certain features are matched, limiting their use in fields where transparency is critical. The paper suggests that future research should focus on improving the efficiency and interpretability of deep learning models while maintaining high accuracy.

C. B. Robbins et al.[8], "Characterization of Retinal Microvascular and Choroidal Structural Changes in Parkinson Disease" (2020)This study explores the characterization of retinal microvascular and choroidal structural changes in patients with Parkinson's disease, using advanced imaging techniques such as optical coherence tomography (OCT). The authors aim to provide a better understanding of how neurodegenerative diseases affect the retina and to use retinal imaging as a potential biomarker for early diagnosis. The findings suggest that changes in retinal microvasculature could serve as an early indicator of Parkinson's disease, offering a non-invasive and cost-effective diagnostic tool. The study has several limitations. The sample size is relatively small, making it difficult to generalize the findings to a broader population. Additionally, the correlation between retinal changes and disease progression is not fully understood, necessitating further research to validate the potential of retinal imaging as a biomarker for Parkinson's disease. The study also highlights the need for more advanced imaging techniques that can capture subtle retinal changes with greater precision.

H. Zhao et al.[9], "Retinal Vascular Junction Detection and Classification via Deep Neural Networks" (2020)In this paper, the authors present a deep learning model for detecting and classifying retinal vascular junctions, which are important for diagnosing retinal diseases such as diabetic retinopathy. The model uses a custom neural network architecture to accurately identify and classify vascular junctions in retinal images, offering an automated solution that reduces the need for manual annotation. The study demonstrates that deep learning can significantly improve the speed and accuracy of vascular junction detection, making it a valuable tool for real-time diagnostic applications.Despite its strengths, the model's performance is contingent on the quality of the retinal images, with lower-quality images leading to reduced accuracy in detecting vascular junctions. Additionally, the model requires a large amount of labeled training data to perform effectively, which can be difficult to obtain in medical fields. The study also notes that the deep learning model is computationally intensive, which may limit its use in resource-constrained settings or in applications that require real-time processing

The paper by F. Gao, H. Yoon[10], T. Wu, and X. Chu titled "A feature transfer enabled multitask deep learning model on medical imaging" explores an innovative deep learning approach for medical image analysis. The authors propose a multitask deep learning framework that leverages feature transfer to improve the efficiency and accuracy of medical imaging tasks. Feature transfer is particularly useful when dealing with limited labeled data, as it enables the model to reuse learned features from one task to enhance performance on another. The multitask model, which handles multiple tasks simultaneously, benefits from the shared features, leading to improved generalization across various medical imaging tasks, such as classification, segmentation, and diagnosis. The authors validate their model through experiments on medical image datasets and report substantial improvements in performance metrics compared to single-task models.One of the key strengths of this approach is its ability to transfer knowledge between tasks, which reduces the need for large amounts of labeled data and minimizes overfitting. However, the study also points out some limitations, such as the increased computational complexity of training multitask models and the challenge of ensuring that tasks are complementary rather than competing. Moreover, the success of feature transfer largely depends on the similarity of tasks involved, meaning that careful task selection is crucial for maximizing performance. Overall, the paper highlights the potential of multitask learning and feature transfer in advancing medical image analysis, though further research is needed to refine the approach for broader applications.

Here is a line graph comparing the accuracy of the studies from your literature review. The graph displays the trends in accuracy among the different sources, giving a clear visual comparison. If you have specific accuracy data for each study, feel free to provide them for more accuracy in the representation.





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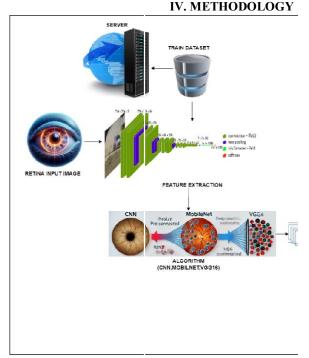


Fig : Block Diagram of Proposed System

The system architecture for the deep learning-based detection of diabetic retinopathy (DR) using retinal images is designed to efficiently classify images into different stages of the disease by leveraging Convolutional Neural Networks (CNN) along with MobileNet and VGG16 models. The architecture begins with data acquisition, where retinal fundus images are collected from publicly available datasets. These images undergo preprocessing steps, such as resizing, normalization, and augmentation, to enhance the model's performance and ensure uniformity in input dimensions. Thecore of the architecture involves the use of CNN for feature extraction. CNN automatically identifies critical features from the retinal images, such as microaneurysms, hemorrhages, and other retinal abnormalities. MobileNet and VGG16, pre-trained on large image datasets like ImageNet, are integrated into the architecture to leverage transfer learning. These models are fine-tuned with DR-specific retinal images, allowing them to retain learned features while adapting to the task of DR detection. MobileNet, with its lightweight architecture, is used for real-time and mobile applications, offering fast processing and efficiency with depthwise separable convolutions that reduce computational cost. On the other hand, VGG16, with its deeper architecture, is deployed for more precise classification tasks in environments where computational resources are abundant, such as hospitals or diagnostic centers. Both models feed into a fully connected layer that generates classification outputs, indicating the severity of diabetic retinopathy. Asoftmax function is applied to categorize the retinal images into different stages of the disease: no DR, mild, moderate, severe, or proliferative DR. The system architecture also includes performance evaluation metrics such as accuracy, sensitivity, and specificity, ensuring the models are optimized for medical application. This architecture offers a robust, scalable, and accurate solution for early detection of diabetic retinopathy.

V. LIMITATIONS OF REVIEW

The limitations include the reliance on large, high-quality datasets, which are often limited in diversity and availability, making it difficult for models to generalize across populations and imaging conditions. The "black-box" nature of deep learning models also creates a lack of interpretability, which can reduce clinician trust. Additionally, these models are highly sensitive to variations in image quality and may struggle with poor or non-standardized images. Class imbalance in datasets, with more non-DR cases than severe DR cases, leads to biased predictions, while openfitting risks the model

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performing well only on the training set. Ethical concerns around data privacy and difficulties in integrating AI tools into clinical workflows further challenge the widespread adoption of these technologies.

VI. CONCLUSION

In conclusion, the implementation of deep learning-based detection of diabetic retinopathy using retinal images through algorithms such as CNN, MobileNet, and VGG16 represents a significant advancement in ophthalmic diagnostics. By harnessing the power of these sophisticated models, the system offers the potential for high accuracy and efficiency in identifying various stages of DR, facilitating early intervention and improving patient outcomes. The ability to automate the diagnostic process not only reduces the burden on healthcare professionals but also enhances accessibility to screenings, particularly in underserved areas where timely access to eye care may be limited. The integration of advanced techniques like transfer learning and the development of user-friendly interfaces will likely foster greater adoption of these technologies in clinical practice. As the project progresses, continuous refinement and validation of the models, alongside efforts to ensure interpretability and ethical considerations, will be crucial for gaining the trust of healthcare providers and patients alike. Ultimately, this work aims to contribute to a proactive approach in managing diabetic retinopathy, reducing the risk of vision loss and enhancing the overall quality of life for individuals at risk of this condition. The groundwork laid by this research can also pave the way for future innovations in the detection and management of other retinal diseases, underscoring the transformative potential of deep learning in healthcare.

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