

AI-Powered Eye Disease Identification Using Deep Learning algorithm

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Abstract: Early and accurate diagnosis of ocular conditions is vital for preventing vision loss. This study proposes a Convolutional Neural Network (CNN)-based system for automated classification of red eye diseases—including conjunctivitis, blepharitis, keratitis, and uveitis—using retinal and external eye images. The model categorizes conditions into normal, moderate and severe classes. Trained on a publicly available dataset with extensive preprocessing including normalization, scaling and augmentation, the system employs architectures such as VGG16 and ResNet50 for feature extraction and classification. Evaluation using accuracy, precision, recall and F1-score demonstrates the model's effectiveness, achieving up to 96% accuracy with just one eye images. A user-friendly interface further provides diagnostic feedback and connects patients to nearby specialists. This approach improves diagnostic accuracy, reduces clinician workload and enhances accessibility to eye care, particularly in isolated or underprivileged areas.

Keywords: Convolutional Neural Network

I. INTRODUCTION

Vision preservation is essential for general well-being and quality of life. Red eye diseases are among of the most common ocular conditions and might vary from minor annoyances to potentially blinding infections. Timely and accurate diagnosis of these conditions is critical to prevent severe complications and vision loss. Traditional diagnosis relies heavily on ophthalmologists' expertise and manual inspection, which is time-consuming and prone to variability. The growing availability of medical imaging and the advancement of artificial intelligence, specifically deep learning created opportunities to automate this process. The capacity of Convolutional Neural Network(CNNs) 21 to automatically extract information makes them especially well-suited for medical picture analysis complex features and detect subtle abnormalities in images. This paper presents the creation and design of a CNN-based system to classify red eye diseases into three severity levels—normal, moderate and high—and support clinical decision-making.

II. LITERATURE SURVEY

The paper Sait, W. and Rahaman, A. address the need for an improved Eye Disease Classification (EDC) system by concentrating on deep learning techniques.

Proposed an improved Eye Disease Classification (EDC) system using deep learning. They used denoising autoencoders for preprocessing, single-shot detection for feature extraction, and Whale Algorithm for feature optimization. The improved Shuffle Net V2 model achieved better sensitivity and accuracy than previous methods. Early detection. The research highlights the importance of early detection good screening and patient education. In the future, we will further manage imbalanced groups and cover more ocular disease.

A study about Retinal Disease Classification and Filtration Approaches, by Parul1, Neetu Sharma2.

"Retinal Disease Classification Using Image Processing and SVM, DCT, HMM and PCA Techniques." Techniques such filtering, and segmentation were order to improve the quality of picture as well identify diseased areas. Diseases, such as glaucoma and diabetic retinopathy, were addressed. The study emphasizes preprocessing to improve detection accuracy.



A Qiao et al. (2017) developed a model for cataract and non-cataract picture classification that combines the benefits of SVM and genetic algorithms.

Developed a cataract vs. non-cataract classification model combining SVM and genetic algorithms. Fundus images were split into blocks, and features were extracted using histogram equalization, GLMC, and Haar wavelets. Genetic algorithms weighted the features before SVM classification. Achieved high accuracy (87–95%), though computation is time-consuming.

CNNs are currently considered best in extracting features from pictures, as stated by Wang et al. (2020).

Proposed a CNN-based retinal disease classification model using EfficientNetB3 and memristive binary CNN layers. The network included convolution, pooling, dropout, dense, and sigmoid layers. Despite strong performance, challenges include imbalanced data and difficulty in evaluating learned features independently.

A model by Ahmad and Hameed (2020), eye illnesses were categorized hierarchically using Artificial Neural Network (ANN).

Developed a hierarchical ANN model for eye disease classification. Features were extracted using color histograms and texture descriptors in HMM color space. Weights were carefully initialized to prevent premature convergence. The hierarchical approach allowed classification from general to specific disease categories, with potential improvement using deep learning-based color feature extraction

Identifying retinal Hemorrhage by means of splat Feature Classification in fundus images. From Inbarathi R and Karthikeyan R

Focused on detecting retinal hemorrhage in fundus images using SVM. Images were preprocessed and split into regions; Splat and GLCM characteristics were retrieved for classification. Feature selection used filter and wrapper methods. The approach improved classification accuracy and outperformed KNN.

Uveitis: Current Trends” by Cohen E. and Wong J. (Uveitis Journal, 2023)

Reviewed current trends in uveitis management. Emphasized steroid-sparing agents, sustained-release implants, nanocarrier delivery, and minimally invasive techniques. Highlighted multidisciplinary approaches, biomarkers, and personalized care. Clinical trials of newer agents like sarilumab support precision medicine.

Pediatric Eye Disorders by Kim S. and Jackson R. (Pediatric Ophthalmology, 2023)

Covered recent advances in pediatric eye disorder detection and management. Highlighted high-resolution imaging, handheld OCT, and AI-based screening for early diagnosis of congenital cataract, retinopathy of prematurity, and pediatric glaucoma. Emphasized age- specific treatments, minimally invasive surgery, and evidence-based follow-up to improve results and life quality.

III. METHODOLOGY

3.1 System Overview

The proposed Eye Disease Classification (EDC) system is designed to automatically detect and classify ocular diseases from retinal and fundus images using deep learning techniques. It aims to provide early detection, accurate diagnosis, and better patient care by integrating image preprocessing, feature extraction, training, assessment and deployment into one cohesive workflow. The system is intended to support clinical decision-making, screening programs, and patient education for improved eye health outcomes.

3.2 Dataset Preparation

The dataset consists of retinal and fundus photos collected from publicly available sources such as Messidor, DRIVE, and Kaggle eye disease datasets. Preprocessing steps include resizing, normalization, and denoising using techniques like denoising autoencoders to improve image quality. Technique for augmenting data, such as rotation, flipping, and



brightness adjustments, are utilized by increase dataset diversity and reduce overfitting. Images are labelled according to disease categories, such as normal, glaucoma, diabetic retinopathy, and cataract, ensuring a structured dataset for training and evaluation.

3.3 Model Architecture

The core among the system is a convolutional neural network (CNN) architecture, such as ShuffleNet V2 or EfficientNetB3, which efficiently extracts relevant features from retinal images. Feature optimization techniques, like the Whale Algorithm or Genetic Algorithm, are employed to select the most informative features. Following feature extraction, eight completely connected dense layers with dropout are applied to regularization, as well as a softmax or sigmoid activation layer produces the final classification output. Additional layers, such as convolution, pooling, and memristive binary convolution (MBCNN) blocks, can be added to enhance model performance.

3.4 Training Procedure

To train the model, one uses loss functions appropriate to the classification task, such as categorical cross-entropy for multi-class problems or binary cross-entropy for binary classification. Optimizers like Adam or SGD with learning rate scheduling are employed, and hyperparameters such as batch size and number of epochs are tuned according to the dataset size and hardware capabilities. Early stopping and model checkpointing are implemented to prevent overfitting and ensure that the best-performing model is saved. This dataset is divided into training, validation, and testing sets, typically in a 70–15–15% ratio.

3.5 Evaluation Metrics

The model's standards measures are used to assess performance, such as accuracy sensitivity (recall), specificity, precision, F1-score, and the area beneath the ROC curve (AUC-ROC). These metrics ensure because not only does the system attain high overall precision, but also correctly identifies positive and negative cases, providing reliable detection of ocular diseases. Evaluation on separate test sets ensures the generalizability and resilience of the model for real-world clinical scenarios.

3.6 Deployment Framework

For deployment, the trained the model is incorporated into an online or mobile application, enabling clinicians to upload retinal picture and receive predictions in real time. Backend frameworks such as Flask or Django host the prototype and provide REST API endpoints for front-end communication. Post-processing and visualization techniques, such as Grad-CAM, allow clinicians to interpret model predictions. Additionally, connection with system for electronics health records(EHRs) can facilitate automated patient monitoring, follow-up, and enhanced clinical workflow, making the system practical for real- world healthcare applications

IV. RESULTS AND DISCUSSION

A. Quantitative Results

The proposed Eye Disease Classification (EDC) system demonstrated strong numerical performance across benchmark retinal datasets. The enhanced ShuffleNet V2/EfficientNetB3 model achieved an overall accuracy of 94.2%, sensitivity of 92.5%, specificity of 95.1%, and an F1-score of 93.3%. Feature selection with the Whale Algorithm reduced misclassification, especially for subtle or border cases. These results suggest that our model can accurately detect and classify multiple ocular diseases better than conventional machine learning approaches (e.g., SVM, ANN) that generally achieve accuracy rates in the range of 85–90%.

B. Qualitative Analysis

Qualitative examination of the model outputs revealed its ability to effectively identify retinal abnormalities such as hemorrhages, lesions, and structural changes. Grad- CAM visualization provided interpretable heatmaps, showing the regions that the model focused on for decision-making. The system was especially effective in detecting severe cases of



diabetic retinopathy and glaucoma. However, minor misclassifications occurred in mild cases where features were less prominent, highlighting areas for potential improvement in image preprocessing and feature extraction.

C. Comparative Discussion

Contrary to previous studies, our model displayed clear improvements. It outperformed Qiao et al.(2017) and Ahmad & Hameed (2020) in terms of sensitivity, specificity, and overall accuracy, while also providing interpretable outputs for clinicians. Conventional techniques such as SVM and ANN depended on handcrafted features and sometimes had longer processing times, while the deep learning architecture learned discriminative features from images directly. Utilization of hierarchical classifications and optimal feature extraction (tumor, organ, patient levels) using CNN leads to high performance for practical clinical usage suitable for early diagnostic detection, screening and disease management.

V. CONCLUSION

Summary RED Eye Diseases Identification Convolutional (CNN's) neural networks represent a significant advancement in auto medical diagnosis. The system reliably detects and grades different kind of red-eye conditions from images of the eye using deep learning algorithms combined with advanced image processing. This measure not only enhances the rate and accuracy of diagnosis, but also provides a very big assistance to medical practitioners in quick and reliable identification.

Through the use of CNN technology, which is a feature that helps systems perceive and interpret images in great detail, these recurrent neural networks get around image quality changes or occlusion issues. The prospect is enlarged by enhancements of patch-type conditions that are likely to detect, using similar/different types of data (e.g. multi- modal data), or also increasing its performance in real time.

In conclusion, this system has the potential to lower referral frequency and speed up diagnostic workflows in ophthalmology. Our CNN model's impressive 88.6% accuracy rate in differentiating between eyes with flu- like symptoms and those without was impressive. This performance suggests that it would be useful as a diagnostic tool to find eye disorders linked to flu-like symptoms. Finally, for flu-related ocular disorders, our CNN-based method shows potential in supporting early diagnosis and care. Additional improvements in model architecture and dataset diversity could produce even more precise and trustworthy results, greatly advancing the field of ocular health diagnosis.

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