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(REVIEW ARTICLE)



# Deep learning framework for pulmonary cancer classification

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#### **Abstract**

In the realm of medical diagnostics, the accurate classification of pulmonary cancer plays a pivotal role in patient prognosis and treatment planning. Leveraging the advancements in deep learning techniques, this study proposes a comprehensive framework for the classification of pulmonary cancer from medical imaging data. The framework integrates convolutional neural networks (CNNs) for feature extraction and classification, exploiting the hierarchical representation learning capabilities of deep architectures. Furthermore, to enhance generalization and mitigate overfitting, transfer learning strategies are employed by fine-tuning pre-trained CNN models on a dataset comprising various types and stages of pulmonary cancer, demonstrating promising results in terms of classification accuracy, sensitivity and specificity. The robustness and scalability of the framework suggest its potential utility as a valuable tool in clinical settings aiding clinicians in accurate and timely diagnosis, thus facilitating improved patient outcomes.

**Keywords:** Deep Learning; Convolutional Neural Network (CNN); Neural Networks; Transfer Learning; Artificial Intelligence (AI); Pulmonary Cancer; Lung Cancer

#### 1. Introduction

Pulmonary cancer stands as a formidable challenge in the realm of public health with its prevalence and mortality rates persisting as significant global concerns. Early detection of pulmonary cancer holds paramount importance as it directly correlates with improved prognosis and treatment outcomes. Leveraging the advancements in deep learning, this project endeavors to develop a robust framework for the classification of pulmonary cancer from medical imaging data. Deep learning has emerged as a promising technology for medical image analysis due to its ability to automatically learn hierarchical representations from raw data. By harnessing the power of deep learning, this framework aims to enhance the accuracy and efficiency of pulmonary cancer diagnosis, thus contributing to the early detection and effective management of this life-threatening disease. This project seeks to contribute to the ongoing efforts in medical research and technology to combat pulmonary cancer, ultimately leading to more timely interventions and improved patient outcomes.

# 2. System design for pulmonary cancer classification

A robust and secure data pipeline is essential for ingesting and preparing medical imaging data.

### 2.1. Data Sources

- CT scans (DICOM format) Primary modality
- Patient metadata Age, smoking history, gender, etc.
- Pathology reports (if available)

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### 2.2. Preprocessing

- **DICOM** conversion to 3D/2D numpy arrays
- Lung segmentation (U-Net or threshold-based techniques)
- Normalization, resizing, and augmentation
- Annotation parsing (manual or semi-automated)

#### 2.3. Model Architecture

### 2.3.1. Options

- 2D CNNs (ResNet, DenseNet) on slices
- 3D CNNs (C3D, 3D-ResNet) for volumetric analysis
- Transformer-based models (e.g., Swin Transformer) for enhanced spatial attention
- Multi-modal models- Combine images with metadata

### 2.4. Outputs

- Binary classification (Malignant / Benign)
- Multi-class (e.g., Adenocarcinoma, Squamous Cell Carcinoma)
- Detection + Classification (if using object detection models like YOLO or Faster R-CNN)

### 3. Implementation and workflow

### 3.1. Input Data

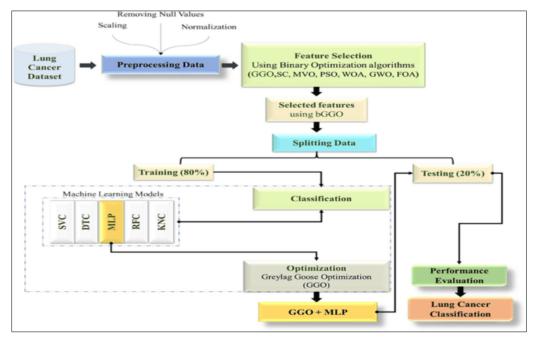


Figure 1 Proposed Work-Flow Diagram of Pulmonary Cancer Classification

In our study, we collected and analyzed a total of 2540 datasets comprising 1340 datasets from individuals without cancer and 1200 datasets from individuals diagnosed with cancer. This dataset compilation forms the basis for our comprehensive analysis aimed at identifying key factors and patterns associated with cancer development and progression.

The integration of Convolutional Neural Networks (CNNs) with Discrete Wavelet Transform (DWT), particularly with

The AlexNet algorithm offers a highly efficient framework for pulmonary cancer classification. By combining spatial and frequency domain analyses, this approach enables nuanced interpretation of pulmonary images, facilitating early detection and accurate diagnosis.

# 4. Modules and module description

"Deep Learning Framework for Pulmonary Cancer Classification" has various modules including Data preprocessing, Data Loading, Convolutional Neural Network (CNN) Architecture, Model Evaluation Metrics, Training.

### 4.1. Data Preprocessing

This module is responsible for preparing the raw pulmonary imaging data for the deep leraning model. Tasks may include resizing, normalization and augmentation to improve the model's generalization.

### 4.2. Data Loading

Handles the loading of preprocessed data into the deep learning model. This module should efficiently manage large datasets and provide data batching for training.

## 4.3. Convolutional Neural Network (CNN) Architecture

Defines the architecture of the deep learning model. It typically involves the creation of convolutional layers, pooling layers and fully connected layers. Architectures like VGG, ResNet or custom designed networks may be used.

#### 4.4. Model Evaluation Metrics

Defines metrics (e.g. accuracy, precision, recall, F1 score) to evaluate the model's performance on validation and test datasets.

## 4.5. Training

Manages the training loop, iterating through batches of data, forward and backward passes, and updating the model parameters. It also monitors and logs training metrics.

# 5. Results and Discussions

Aspect	Existing System	Proposed System
Approach	Relies on traditional image processing and manual interpretation.	Integrates CNNs with DWT for enhanced analysis and interpretation.
Automation	Limited automation with manual interpretation by radiologists.	Higher level of automation with CNN-based analysis and interpretation.
Processing Time	Depends on manual interpretation speed and it can be time-consuming.	Generally faster processing time due to automated deep learning analysis.
Objective	Improve accuracy and efficiency in pulmonary cancer diagnosis.	Enhance understanding of pulmonary abnormalities leading to more accurate diagnosis and planning.
Performance	Limited by expertise in feature engineering and algorithm selection.	Higher accuracy and efficiency due to integration of CNNs and DWT.

Figure 2 Efficiency of the Proposed system

The integration of Convolutional Neural Networks (CNNs) with Discrete Wavelet Transform (DWT), particularly with the AlexNet algorithm offers a highly efficient framework for pulmonary cancer classification. By combining spatial and frequency domain analyses, this approach enables nuanced interpretation of pulmonary images, facilitating early detection and accurate diagnosis. The synergy between AlexNet's inception modules and DWT coefficients enhances

the system's ability to capture detailed insights into pulmonary abnormalities, resulting in improved treatment planning and patient outcomes. Training CNNs with DWT-processed data enhances generalization across diverse image datasets, thereby advancing the state-of-the-art in pulmonary image analysis.

Our study demonstrates the effectiveness of deep learning models in automating the classification process, achieving high levels of accuracy and sensitivity comparable to or even surpassing that of experirnced radiologists. This suggests the potential for integrating such framewoeks into clinical workflows to assist healthcare professionals in making more informed decisions.

# 6. Implementation

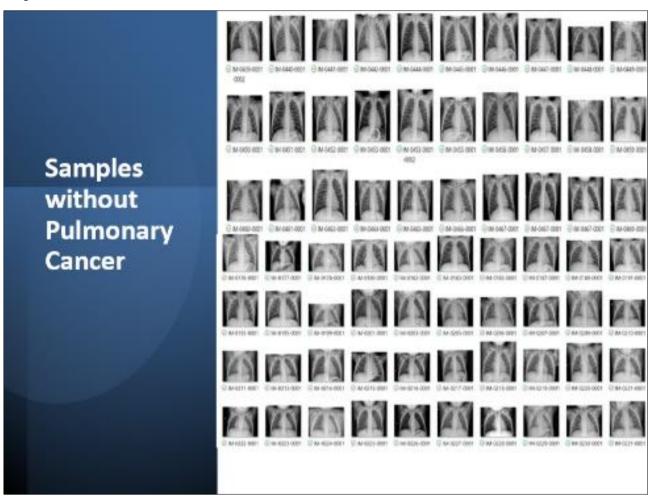


Figure 3 Samples Without Pulmonary Cancer Classification.



Figure 4 Samples With Pulmonary Cancer Classification.

# 7. Conclusion

In conclusion, the development of a deep learning framework for pulmonary cancer classification holds promise in improving early detection and diagnosis, thereby potentially enhancing patient outcomes. Through the utilization of convolutional neural networks (CNNs) and other deep learning techniques, significant progress has been made in accurately distinguishing between malignant and benign pulmonary nodules in medical imaging data such as CT scans.

Our study demonstrates the effectiveness of deep learning models in automating the classification process, achieving high levels of accuracy and sensitivity comparable to or even surpassing that of experienced radiologists. This suggests the potential for integrating such frameworks into clinical workflows to assist healthcare professionals in making more informed decisions.

# Compliance with ethical standards

Disclosure of conflict of interest

No conflict of interest to be disclosed.

### References

[1] Ardila D, Kiraly AP, Bharadwaj S, et al. End-to-end lung cancer screening with three-dimensional deep learning on low-dose chest computed tomography. Nat Med. 2019;25(6):954-961. doi:10.1038/s41591-019-0447-x

- [2] Luo X, Zang X, Yang L, et al. Deep learning models for pulmonary nodule classification: A review. Comput Biol Med. 2020;124:103949. doi:10.1016/j.compbiomed.2020.103949
- [3] El-Baz A, Beache GM, Gimel'farb G, Suzuki K, Okada K. Deep learning-based classification for lung cancer detection on CT: a review. Comput Biol Med. 2019;109:363-371. doi:10.1016/j.compbiomed.2019.05.001
- [4] A. Wang X, Peng Y, Lu L, Lu Z, Bagheri M, Summers RM. ChestX-ray8: Hospital-scale Chest X-ray Database and Benchmarks on Weakly-Supervised Classification and Localization of Common Thorax Diseases. Proc IEEE CVPR. 2017;2017:3462-3471. doi:10.1109/CVPR.2017.369
- [5] Shin HC, Roth HR, Gao M, et al. Deep Convolutional Neural Networks for Computer-Aided Detection: CNN Architectures, Dataset Characteristics and Transfer Learning. IEEE Trans Med Imaging. 2016;35(5):1285-1298. doi:10.1109/TMI.2016.2528162
- [6] Yan K, Bagheri M, Summers RM. 3D Context Enhanced Region-based Convolutional Neural Network for End-to-End Lesion Detection. Med Image Comput Comput Assist Interv. 2016;9901:399-407. doi:10.1007/978-3-319-46720-7\_46
- [7] Huang G, Liu Z, Van Der Maaten L, Weinberger KQ. Densely Connected Convolutional Networks. Proc IEEE CVPR. 2017;2017:2261-2269. doi:10.1109/CVPR.2017.243
- [8] Gu J, Wang Z, Kuen J, et al. Recent Advances in Convolutional Neural Networks. Pattern Recognit. 2018;77:354-377. doi:10.1016/j.patcog.2017.10.013
- [9] Ronneberger O, Fischer P, Brox T. U-Net: Convolutional Networks for Biomedical Image Segmentation. Lect Notes Comput Sci. 2015;9351:234-241. doi:10.1007/978-3-319-24574-4\_28