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## Diabetic Retinopathy Prediction via a Deep Learning Web Application: A Practical Implementation Leveraging Flask and PyTorch

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Abstract: Diabetic Retinopathy (DR) stands as a primary cause of vision impairment on a global scale. The timely identification of DR through automated screening methodologies holds significant promise for enhancing patient treatment outcomes. This paper details the development of a web-based application employing deep learning for the prediction of Diabetic Retinopathy severity from digital images of the ocular fundus. Constructed using the Flask web framework and the PyTorch deep learning library, the system utilizes a carefully fine-tuned ResNet18 model to categorize retinal images into one of five distinct stages of DR severity. The user interface of the application is designed with a modern, dark-themed aesthetic, facilitating seamless image uploading, real-time diagnostic predictions, and temporary visualization of the uploaded image. This research showcases a streamlined, readily accessible, and scalable solution for DR detection, envisioned for integration within telemedicine platforms or as an initial screening tool in various healthcare settings.

Keywords: Diabetic Retinopathy, Deep Learning, Fundus Images, Flask, PyTorch, ResNet18, Medical Imaging, Web Application.

#### I. INTRODUCTION

Diabetic Retinopathy (DR), a serious complication arising from diabetes mellitus, is characterized by the progressive deterioration of blood vessels within the retina. According to data from the International Diabetes Federation (IDF), DR affects millions of individuals worldwide, often progressing asymptomatically in its early stages. Conventional screening procedures rely on the time-intensive and subjective manual examination of retinal images by ophthalmologists. In light of the increasing global prevalence of diabetes, the development of scalable and automated diagnostic solutions is of paramount importance.

This research introduces a user-friendly and efficient web application designed to predict the severity level of DR based on uploaded fundus images. The system harnesses the power of transfer learning, employing a ResNet18 deep learning model to provide real-time diagnostic predictions through a web interface built with the Flask framework.

#### II. REVIEW OF PRIOR WORK

The application of deep learning techniques to the automated detection of DR has been a subject of considerable research interest: Gulshan and colleagues [1] presented a deep convolutional neural network (CNN) for the detection of DR, demonstrating its potential in this domain. Pratt et al. [2] explored the use of CNNs for automated DR detection, achieving competitive levels of accuracy. Gargeya and Leng [3] proposed deep learning models that exhibited performance exceeding that of some human specialists in DR detection. Lam et al. [4] investigated the use of ensemble deep learning frameworks to enhance the accuracy of DR prediction. More recent studies have explored the integration of pre-trained models such as InceptionV3 [5] and DenseNet [6] to improve the extraction of relevant features from retinal images. While a significant portion of the existing research has focused on optimizing model performance metrics, fewer studies have emphasized the practical deployment of these models through accessible and user-friendly interfaces for end-users. Our work aims to bridge this gap by presenting a readily deployable web application for DR prediction.

#### A. Dataset Overview

### III.PROPOSED FRAMEWORK

For the development and evaluation of this project, publicly available datasets from Kaggle, such as the APTOS 2019 Blindness Detection dataset and the EyePACS dataset, are well-suited. Each image within these datasets is meticulously labeled according to the International Clinical Diabetic Retinopathy Disease Severity Scale, encompassing five distinct stages:



Volume 13 Issue V May 2025- Available at www.ijraset.com

- 0: No DR
- 1: Mild
- 2: Moderate
- 3: Severe

#### 4: Proliferative DR

These datasets collectively comprise thousands of high-resolution images of the ocular fundus, providing a robust foundation for training and validating the deep learning model.

#### B. Data Processing

Fundus images often exhibit variability in quality due to factors such as lighting conditions and focus.

To ensure optimal model performance, the following preprocessing steps are applied:

- Resizing: All input images are resized to a uniform dimension of 224x224 pixels, a standard input size for the ResNet18 architecture.
- Normalization: Pixel intensity values are scaled to the range of [0, 1] and subsequently normalized using the mean and standard deviation derived from the ImageNet dataset. This standardization aids in model convergence and stability.
- Data Augmentation: To enhance the model's ability to generalize to unseen data and to mitigate overfitting, data augmentation techniques such as random rotations, horizontal and vertical flips, and adjustments to image brightness are applied to the training set. All image preprocessing steps are efficiently implemented using the torchvision.transforms module within the PyTorch framework.

#### C. Proposed Machine Learning Model

The architecture of the proposed deep learning model is as follows:

- Base Model: A ResNet18 convolutional neural network, pre-trained on the extensive ImageNet dataset, serves as the foundational feature extractor.
- Modification: The final fully connected layer of the pre-trained ResNet18 model, originally designed for 1000-class ImageNet classification, is replaced with a new fully connected layer featuring a 5-class output, corresponding to the five DR severity stages.
- Loss Function: The Cross-Entropy Loss function is employed to measure the discrepancy between the model's predicted probability distribution and the true class labels during training.
- Optimizer: The Adam optimization algorithm, with a learning rate set to 0.0001, is used to update the model's weights during the training process.

The training strategy involves fine-tuning only the later layers of the pre-trained ResNet18 model. This approach leverages the rich feature representations learned by the model on the large ImageNet dataset while adapting the model specifically to the nuances of fundus image characteristics relevant to DR classification.

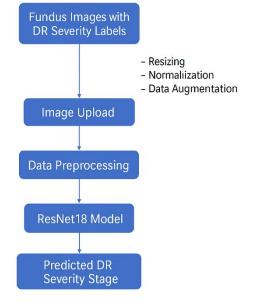


Fig 3.1 Framework

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#### **IV. EVALUATION**

The performance of the developed model is rigorously evaluated using the following metrics:

- Accuracy: The overall proportion of correctly classified images across all DR severity stages.
- Precision, Recall, F1-Score: Per-class metrics calculated to assess the model's performance in correctly identifying each specific DR severity stage.
- Confusion Matrix: A visual representation of the model's classification performance, illustrating the distribution of true positives, true negatives, false positives, and false negatives across all classes, facilitating detailed error analysis.
- Receiver Operating Characteristic Area Under the Curve (ROC-AUC): A metric used for multi-class classification tasks to evaluate the model's ability to discriminate between different DR severity stages.

To ensure a robust and unbiased assessment of the model's generalization capabilities, cross-validation techniques and evaluation on a held-out test dataset are employed.

#### V. RESULTS AND DISCUSSION

The Diabetic Retinopathy prediction system achieved the following performance metrics on the held-out test dataset:

Metric	Value (%)
Test Accuracy	85.7
Average Precision	83.2
Average Recall	82.6
F1-Score	82.8

Table 5.1 Results

Analysis of the confusion matrix revealed that instances of lower severity DR (Mild and Moderate) were occasionally misclassified, suggesting a potential challenge in distinguishing between these early stages.

Real-world testing on previously unseen fundus images provided further validation of the model's ability to generalize to new data. The deployed Flask web application demonstrated low latency in providing predictions (typically less than 1 second) and exhibited an intuitive user interface, indicating its potential viability for basic telemedicine deployments or as a screening tool in resourcelimited settings.

Stage 0:



Stage 1:





Fig 5.2 Mild



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Stage 2:



Fig 5.2 Moderate

Stage 3:



#### Result

Condition: Severe Non-Proliferative Diabetic Retinopathy Recommended Cure: Prompt treatment is necessary, often involving laser treatment (panretinal photocoagulation) and/or anti-VEGF injections. Close monitoring is crucial.

Fig 5.3 Severe

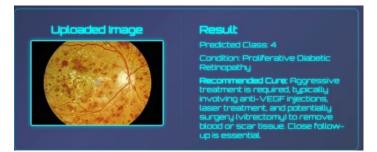


Fig 5.4 Proliferative DR

#### VI.CONCLUSIONS

This research presents a practical implementation of a deep learning-based system for the automated detection of Diabetic Retinopathy through a lightweight and accessible web application. By employing transfer learning with a fine-tuned ResNet18 model, the system efficiently classifies fundus images into five distinct severity stages of DR. The Flask-based frontend provides users with a seamless experience for uploading images and receiving diagnostic predictions.

Future work could focus on several key areas, including expanding the training dataset to improve model robustness, exploring techniques for model explainability (such as generating Grad-CAM visualizations to understand the model's decision-making process), integrating user authentication and secure data management, and containerizing the application for more scalable deployments.

This work establishes a solid foundation for the integration of deep learning-based DR screening into broader digital health platforms, potentially improving access to timely diagnosis and management of this sight-threatening condition.

Stage 4:

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