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Stroke Detection Using Brain MRI Images

Dr.P.EdithLinda¹, Dr.R.Srividhya², M.Varatharajan³

Dr.G.R. Damodaran College of Science, Coimbatore-641014

Abstract: *The increasing prevalence of brain strokes worldwide highlights the need for efficient diagnostic methods. This project aims to classify brain stroke cases into two categories: stroke and normal, using machine learning models. In existing systems, techniques like Support Vector Machine (SVM), K-Nearest Neighbors (KNN), and Convolutional Neural Networks (CNN) with sequential models have been explored. These methods, while effective, present opportunities for improvement in accuracy and generalization. In the proposed system, a deep learning approach utilizing CNN with VGG-19 architecture is implemented. VGG-19, known for its deep layers and powerful feature extraction capabilities, is expected to offer enhanced accuracy in classifying brain strokes. This approach leverages transfer learning to effectively utilize pre-trained models, saving both time and computational resources. The dataset used in this project comprises MRI scans of brain images, where each image is labeled as either a stroke or normal. These images are preprocessed and augmented to improve model training. The VGG-19 model is then fine-tuned for this classification task, adapting the pre-trained model to the specific requirements of brain stroke detection.*

I. INTRODUCTION

Brain stroke, a medical emergency, occurs when blood flow to the brain is interrupted, leading to potential brain damage or dysfunction. There are two main types of strokes: ischemic stroke (caused by a blockage in blood vessels) and hemorrhagic stroke (caused by bleeding in the brain). Early detection and prompt treatment are crucial to reducing mortality and improving recovery chances for stroke patients. However, diagnosing a stroke often involves complex medical assessments, including imaging, clinical evaluations, and patient history. In recent years, the advent of machine learning (ML) and deep learning (DL) has revolutionized the healthcare industry, providing advanced tools for early stroke detection and diagnosis. These technologies allow healthcare professionals to analyze large amounts of medical data, such as imaging scans, clinical features, and vital statistics, in a more efficient and accurate manner than traditional methods. Machine learning, which involves algorithms that learn from data to make predictions or decisions, is widely used for tasks like predicting stroke risk or classifying stroke types based on clinical data. On the other hand, deep learning, a subset of machine learning that uses complex neural networks to automatically extract features from large datasets, is particularly effective for processing. The integration of machine learning and deep learning into stroke diagnosis is an exciting development that promises to enhance the accuracy and speed of stroke detection, leading to more effective early intervention. In this context, the use of both supervised learning techniques, where labeled data is used to train models, and unsupervised learning methods, where the algorithm uncovers hidden patterns in data, offers diverse solutions for stroke classification.

II. OVERVIEW OF THE PROJECT

Brain strokes, one of the most prevalent neurological disorders worldwide, are a major health concern that can result in long-term disabilities or fatalities if not diagnosed early. The traditional diagnostic process often involves manual evaluation of MRI scans by medical professionals, which can be time-consuming and prone to inconsistencies. With the increasing volume of medical imaging data and the critical need for timely diagnosis, automated systems powered by machine learning and deep learning technologies offer promising solutions for brain stroke detection and classification. Existing approaches, such as Support Vector Machine (SVM), K-Nearest Neighbors (KNN), and Convolutional Neural Networks (CNN) with sequential models, have demonstrated effectiveness in brain stroke classification. However, these methods have limitations in terms of accuracy, scalability, and their ability to generalize across diverse datasets. These limitations necessitate the exploration of advanced architectures capable of handling the complex features present in medical images. Transfer learning and pre-trained models, like VGG-19, provide an opportunity to overcome these. The proposed system utilizes the VGG-19 architecture, a deep learning model renowned for its robust performance in image classification tasks. By fine-tuning the pre-trained VGG-19 model for brain stroke classification, the system achieves higher accuracy and better generalization. The use of preprocessing and data augmentation techniques further enhances model training, ensuring reliable classification of MRI scans as stroke or normal.

Brain stroke classification using machine learning and deep learning is a predictive healthcare project aimed at early stroke detection and diagnosis. The project utilizes structured clinical data, such as patient demographics and medical history, as well as medical imaging data, including MRI and CT scans, to train models for stroke classification. Traditional machine learning algorithms like Logistic Regression, Random Forest, are used for structured data analysis, while deep learning techniques, particularly Convolutional Neural Networks (CNNs) and pretrained models like VGG16, are employed for medical image classification. Data preprocessing involves handling missing values, feature scaling, image augmentation, and addressing class imbalances. The models are trained and evaluated using performance metrics such as accuracy, precision, recall. The final model is deployed as a web-based or cloud-hosted application to provide real-time stroke predictions for medical professionals, enabling faster and more accurate diagnosis. This project bridges the gap between AI and healthcare, enhancing early stroke detection and improving patient outcomes. This project bridges the gap between artificial intelligence and healthcare, demonstrating the potential of AI-driven diagnostics in reducing stroke-related fatalities and disabilities. By integrating machine learning and deep learning models with real-world medical data, the system can support early intervention strategies, ultimately improving patient outcomes.

A. Existing System

The existing system for brain stroke classification relies on traditional machine learning models such as Support Vector Machine (SVM), K-Nearest Neighbors (KNN), Logistic Regression and basic Convolutional Neural Networks (CNN) with sequential architectures. SVM and KNN models work by analyzing the features extracted from MRI images and applying mathematical techniques to classify the data into two categories: stroke or normal. CNN sequential models, on the other hand, use convolutional layers to automatically learn and extract features from the images, but they are relatively shallow in their architecture compared to more advanced deep learning techniques. While these models have been applied in various healthcare settings, they face several limitations in terms of accuracy and scalability. For instance, SVM and KNN models rely heavily on feature engineering, and while CNN sequential models offer some automation, they may not capture complex, intricate patterns in medical images, leading to suboptimal performance. These existing systems often require fine-tuning and manual adjustments to improve results, which may not be efficient for large datasets. Moreover, they can struggle with real-time applications where speed and precision are critical. The deployment of such a system in hospitals and telemedicine platforms can revolutionize stroke detection, making healthcare more efficient and proactive.

B. Module Description

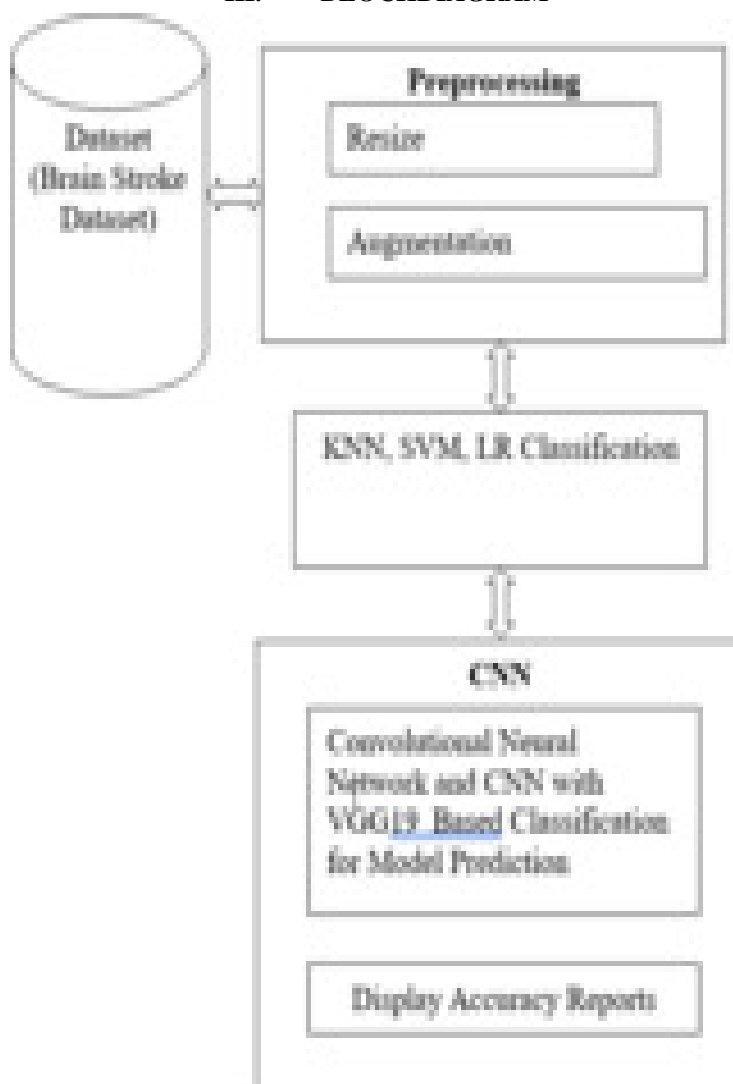
- 1) **Dataset Collection:** The first module focuses on collecting a diverse dataset of brain MRI images, labelled as stroke or normal. The dataset is essential for training and evaluating the models. It may involve preprocessing steps like resizing, normalizing, and augmenting the images to improve the model's generalization capabilities. The dataset is taken from <https://www.kaggle.com/datasets/afridirahman/brain-stroke-ct-image-dataset>.
- 2) **Existing System-SVM/KNN:** This module implements traditional machine learning techniques, specifically Support Vector Machine (SVM) and K-Nearest Neighbors (KNN), for stroke classification. The models are trained using extracted features from the MRI images, and their performance is evaluated to establish a baseline for comparison with more advanced systems.
- 3) **Existing System-CNN:** This module explores the performance of a basic Convolutional Neural Network (CNN) for brain stroke classification. A sequential CNN model is used, where different convolutional layers are applied to the MRI images to extract hierarchical features for classification. The results from this system provide insights into the effectiveness of deep learning models in comparison to traditional machine learning techniques. Convolutional Neural Network (CNN) is implemented for the classification of brain stroke using MRI images. The CNN consists of multiple convolutional and pooling layers, which automatically learn features from the input images. The network uses backpropagation to minimize the error during training. Though this model has the advantage of automating feature extraction, it is relatively shallow compared to advanced models, which may limit its ability to capture complex patterns in the images.
- 4) **Proposed System-CNN with VGG-19:** The proposed system utilizes a CNN model based on the VGG-19 architecture. The VGG-19 model is pre-trained and fine-tuned for stroke classification, leveraging its deep architecture to extract advanced features from brain MRI images. This system aims to improve classification accuracy and offer better performance than the existing models. The proposed system enhances the CNN model by using the VGG-19 architecture, which consists of 19 layers of convolution and fully connected layers. This deeper architecture is pre-trained on large image datasets, allowing it to learn richer features from the brain MRI images. By fine-tuning the pre-trained model, the system adapts to the specific task of stroke detection.

- 5) *EvaluationMetrics-ConfusionMatrix/AccuracyScore*: The final module involves evaluating the performance of all models using evaluation metrics like the confusion matrix, accuracy score, precision, recall, and F1-score. The confusion matrix helps visualize the model's performance by showing true positives, false positives, true negatives, and false negatives. Accuracy and other metrics are calculated to compare the effectiveness of the proposed system against existing systems.

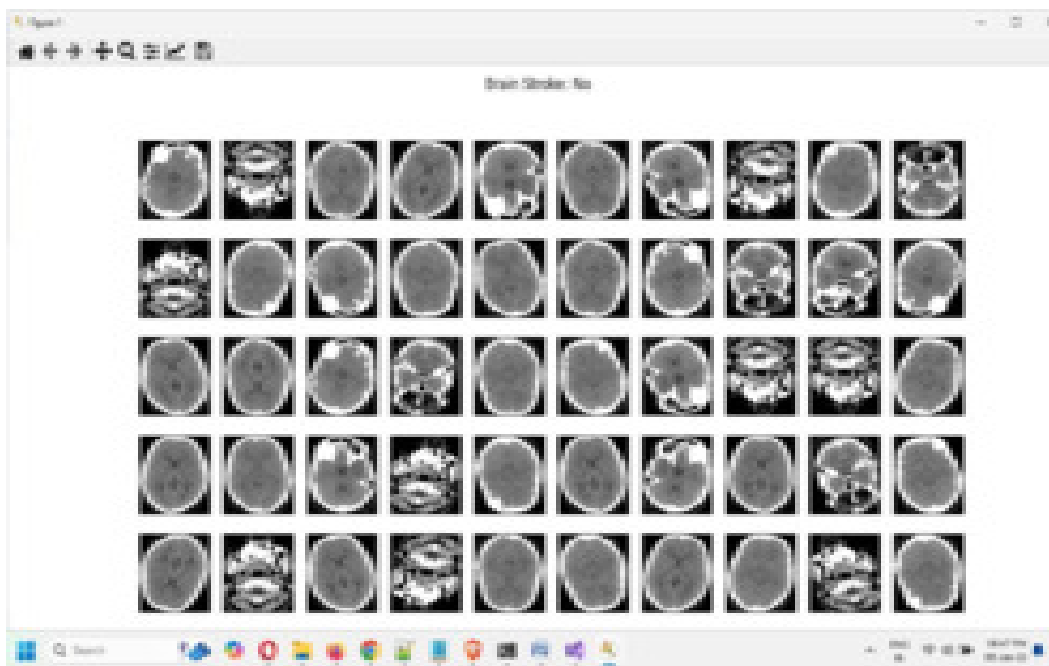
C. Proposed System

The proposed system utilizes a Convolutional Neural Network (CNN) with the VGG-19 architecture, a deep learning model known for its exceptional ability to classify and extract features from complex images. VGG-19, with its 19 layers, is designed to capture detailed hierarchical patterns in the data, making it well-suited for medical image classification tasks like brain stroke detection. This system fine-tunes a pre-trained VGG-19 model, adapting it to classify brain MRI images into two categories: stroke and normal, offering significant improvements over traditional methods. One of the major advantages of using CNN with VGG-19 is its ability to learn high-level features automatically without the need for extensive manual feature engineering. This results in better accuracy and reduced human error in the classification process. Furthermore, VGG-19's deep architecture provides a more nuanced understanding of complex medical images, improving the model's ability to detect subtle variations. Additionally, the use of transfer learning speeds up training by leveraging pre-trained weights, significantly cutting down computational resources and time. The system is also more robust and adaptable to different datasets, offering better generalization than traditional models.

III. BLOCKDIAGRAM



C. BRAINSTROKENO-IMAGES



D. BRAINSTROKEYES-IMAGES



V. CONCLUSION

The proposed system leveraging the VGG-19 deep learning architecture provides a significant improvement in brain stroke detection through MRI scans. By utilizing the powerful feature extraction capabilities of VGG-19 and the transfer learning approach, the system achieves enhanced accuracy and robustness compared to traditional methods such as SVM, KNN, and CNN sequential models. The application of preprocessing and data augmentation techniques further ensures reliable performance, making this model a dependable tool for classifying brain stroke cases into stroke or normal categories. This system demonstrates the potential of deep learning in medical image analysis, offering a scalable and efficient solution for assisting healthcare professionals in diagnosing brain strokes early. With its capacity for accurate classification and minimal computational resources, the system addresses the growing need for automated diagnostic tools in the medical field, paving the way for advanced healthcare technologies that improve patient outcomes and reduce diagnostic delays.

REFERENCES

BOOK REFERENCES

- [1] CyberPunk Architects, "PYTHON: THE BLUEPRINT TO PYTHON PROGRAMMING: A Beginners Guide: Everything You Need to Know to Get Started (CyberPunk Blueprint Series)" Kindle Edition.
- [2] David Mertz, "Functional Programming in Python", O'Reilly, May 2015, First Edition.

WEB REFERENCES

- [3] <http://www.python.org>
- [4] <http://www.w3schools.com>
- [5] <http://www.tutorialspoint.com>

JOURNAL REFERENCES

- [6] World Health Organization—Cancer. Available online: <https://www.who.int/news-room/fact-sheets/detail/cancer>. (accessed on 5 November 2019).
- [7] Priya, V. V. An Efficient Segmentation Approach for Brain Tumor Detection in MRI. Indian J. Sci. Technol. 2016, 9, 1–6.
- [8] Afshar, P.; Plataniotis, K. N.; Mohammadi, A. Capsule Networks for Brain Tumor Classification Based on MRI Images and Coarse Tumor Boundaries. In Proceedings of the ICASSP 2019–2019 IEEE International Conference on Acoustics, Speech and Signal Processing (ICASSP), Brighton, UK, 12–17 May 2019; pp. 1368–1372.
- [9] American Association of Neurological Surgeons—Classification of Brain Tumours. Available online: <https://www.aans.org/en/Media/Classifications-of-Brain-Tumors> (accessed on 30 November 2019).
- [10] DeAngelis, L. M. Brain Tumors. New Engl. J. Med. 2001, 344, 114–123. [CrossRef]
- [11] Louis, D. N.; Perry, A.; Reifenberger, G.; Von Deimling, A.; Figarella-Branger, M.; Cavenee, W. K.; Ohgaki, H.; Wiestler, O. D.; Kleihues, P.; Ellison, D. W. The 2016 World Health Organization Classification of Tumors of the Central Nervous System: A summary. Acta Neuropathol. 2016, 131, 803–820. [CrossRef]
- [12] Cancer Treatment Centers of America—Brain Cancer Types. Available online: <https://www.cancercenter.com/cancer-types/brain-cancer/types> (accessed on 30 November 2019).
- [13] Byrne, J.; Dwivedi, R.; Minks, D. Tumours of the brain. In Nicholson T (ed) Recommendations Cross Sectional Imaging Cancer Management, 2nd ed.; Royal College of Radiologists: London, UK, 2014; pp. 1–20. Available online: <https://www.rcr.ac.uk/publication/recommendations-cross-sectional-imaging-cancer-management-second-edition> (accessed on 5 November 2019).
- [14] Center for Biomedical Image Computing & Analytics (CBICA). Available online: <http://braintumorsegmentation.org/> (accessed on 5 November 2019).
- [15] Mlynarski, P.; Delingette, H.; Criminisi, A.; Ayache, N. Deep learning with mixed supervision for brain tumor segmentation. J. Med Imaging 2019, 6, 034002. [CrossRef]
- [16] Ferlay J, Ervik M, Lam F, Colombet M, Mery L, Piñeros M, et al. Global Cancer Observatory: Cancer Today. Lyon: International Agency for Research on Cancer; 2020 (<https://gco.iarc.fr/today>, accessed February 2021).
- [17] de Martel C, Georges D, Bray F, Ferlay J, Clifford GM. Global burden of cancer attributable to infections in 2018: a worldwide incidence analysis. Lancet Glob Health. 2020;8(2):e180–e190.
- [18] Assessing national capacity for the prevention and control of noncommunicable diseases: report of the 2019 global survey. Geneva: World Health Organization; 2020.



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