

Advance Deep Learning Method by Using IOT and CNN for Early Diagnosis of Skin Cancer

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Abstract

In recent years, one of the deadliest malignancies is skin cancer. If it is not detected and treated in a timely manner, it is expected to spread to other body parts. An accurate automated system for skin lesion recognition is essential for early detection to save human lives. Although there are many other forms of skin cancer, basal cell carcinoma (BCC), squamous cell carcinoma (SCC), and melanoma are the three most prevalent. With early identification and appropriate treatment, these three kinds of skin cancer can be successfully treated by using deep learning techniques. One of the main benefits of using deep learning for skin cancer detection is its ability to accurately classify images with subtle differences. In this paper, Image preprocessing is employed at an initial diagnosis for removing the artifacts present in the raw dataset and further Convolutional Neural Network (CNN) is employed to improve classification and detection of skin cancer with improved accuracy. For analyzing enormous volumes of data, R-CNN algorithms are proved to be incredibly effective in terms of accuracy, IOT have proven to be very helpful in the identification and categorization of skin cancer.

Keywords: Skin cancer detection, CNN, R-CNN algorithms, IOT, using deep learning.

1. Introduction

UV-B rays, a type of ultraviolet radiation emitted by the sun, can have severe effects on our skin. While the sun's rays may feel warm and inviting, prolonged exposure to UV-B radiation can lead to a number of harmful health effects, including premature skin aging, sunburns, and an increased risk of skin cancer, particularly melanoma. UV-B rays penetrate the skin's outer layer, damaging skin cells and DNA, which can lead to irreversible harm over time. One of the most immediate visible signs of UV-B damage is a sunburn. Sunburns occur when the skin is exposed to UV-B rays for extended periods, causing inflammation, redness, and pain. Melanoma, a dangerous form of skin cancer, is one of the most alarming consequences of overexposure to UV-B

rays. This type of cancer begins in the skin's pigment-producing cells and can spread rapidly to other parts of the body if not detected and treated early. Melanoma rates have been rising globally, and studies have shown a direct correlation between excessive sun exposure and the increased incidence of this deadly disease. A greater emphasis on public education and awareness regarding the harms of excessive sun exposure is crucial to protecting the health and well-being of individuals, particularly as melanoma and other skin conditions continue to be a global concern. By prioritizing skin health and making conscious choices about sun exposure, individuals can significantly reduce their risk of developing skin cancer and enjoy the outdoors more

safely. Traditional image processing techniques for segmentation, such as thresholding or edge detection, have limitations in terms of precision and scalability. With the advent of deep learning, particularly convolutional neural networks (CNNs), the field of image analysis has seen significant advancements in automating the segmentation process. [1]

2. Literature Review

"Dermatologist-Level Classification of Skin Cancer with Deep Neural Networks," Esteva et al. (2024) demonstrate the ability of convolutional Neural Networks (CNNs) to classify skin cancer at a level comparable to professional dermatologists, using a large dataset of skin lesion photographs. This work, alongside the challenge, underscores the importance of CNN-based approaches for skin cancer detection. These studies collectively emphasize the growing importance of machine learning (ML) and deep learning (DL) techniques in the early detection and classification of skin cancers, particularly melanoma. The potential for these methods to match or even surpass human diagnostic accuracy underscores the transformative role that AI can play in healthcare. As ML and DL algorithms continue to evolve, the need for large, diverse datasets like the HAM10000 dataset becomes increasingly critical. "Skin Lesion Classification Using Ensembles of Deep Learning Models" (2024) by Akram et al. investigates the advantages of combining multiple deep learning models for skin lesion categorization. The research emphasizes that ensemble methods can further enhance the performance of CNN models in classifying skin lesions, offering a more robust approach to melanoma detection. ML methods for the classification of skin diseases, comparing ensemble methods like Bagging, AdaBoost, and Gradient Boosting with traditional feature selection. The results show that ensemble methods significantly enhance classification accuracy when predicting dermatological outcomes, particularly in comparison to individual classifiers.

3. Method

The methodology for developing a system using Deep Learning, Image Processing, and CNN for Early Diagnosis of Skin Cancer follows a clear

sequence of steps. First, data collection involves gathering a large dataset of skin images, typically from public sources like ISIC with images labeled as either benign (non-cancerous) or malignant (cancerous). Next, image preprocessing takes place, which includes resizing all images to a standard size, normalizing pixel values, and reducing any noise to improve the quality of the images for analysis. Techniques like edge detection and segmentation are applied to focus on the lesion areas, helping isolate them from the rest of the skin image. Once the model is trained, it is evaluated using various metrics such as accuracy, precision, recall, and F1-score to measure how well it predicts skin cancer. A confusion matrix helps visualize how the model performs across different classes. Hyperparameter tuning is performed to optimize the model's performance. After training, the model is deployed on a cloud platform or mobile app for real-time analysis of skin images, allowing users to upload images and receive diagnostic predictions quickly. The system is continuously improved by incorporating new data and receiving feedback from clinicians, ensuring its effectiveness and accuracy. Ethical considerations, such as protecting patient privacy and ensuring the system is interpretable (so doctors can understand the reasoning behind predictions), are key to building trust and compliance with medical regulations. By automating the detection of skin cancer, the system aims to provide faster, more accurate diagnoses, which could ultimately lead to earlier treatment and better patient outcomes. Figure 1 shows CNN Architecture

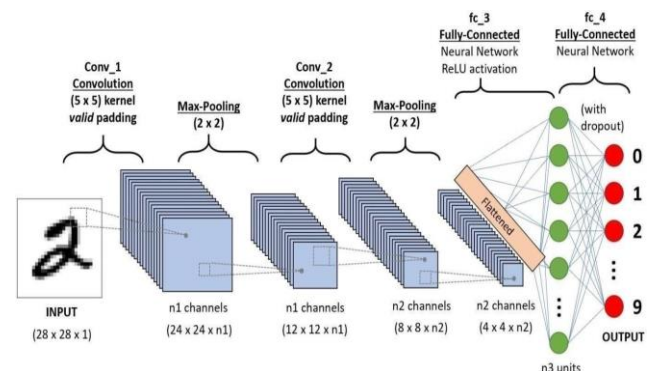


Figure 1 CNN Architecture

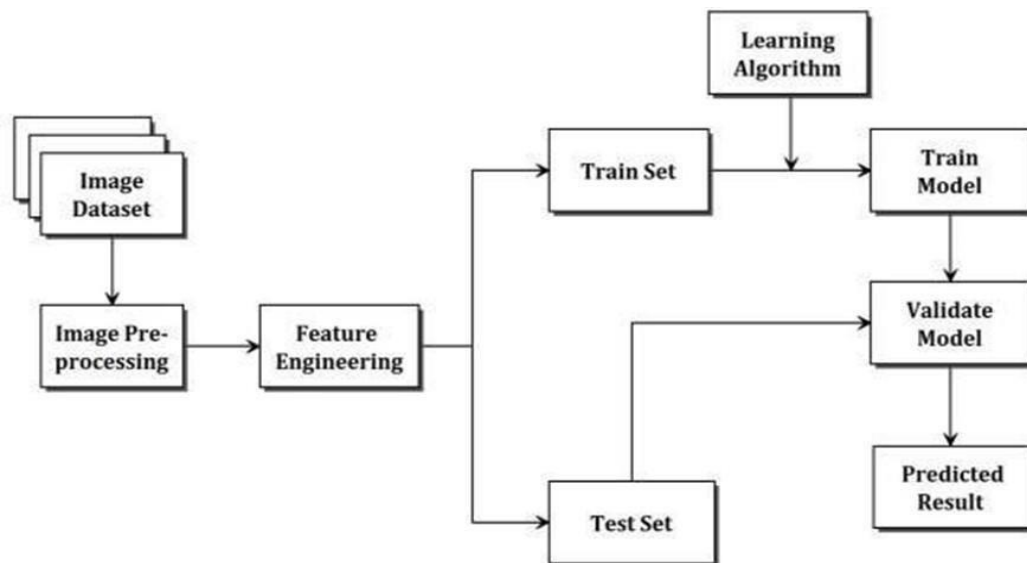


Figure 2 System Architecture

A system's architecture is its blueprint, outlining its structure and behavior conceptually. In order to help readers completely understand the structural features of a system, architects provide detailed descriptions in the form of formal articulations. It delineates the constituents or foundational blocks of the system, charting a path for the acquisition of components and the orchestration of interconnected systems to collectively attain the overarching system's objectives. [2]

4. Functional Modules

4.1.Data Collection and Pre-processing

This module is responsible for gathering skin lesion images from publicly available datasets like ISIC and HAM10000. It applies preprocessing techniques such as resizing, normalization, and data augmentation to enhance image quality. These steps help improve the model's learning capability and ensure it generalizes well across different skin types and conditions, increasing diagnostic accuracy.

4.2.CNN Model Development

This module focuses on designing and selecting the best deep learning architecture, such as VGGNet, ResNet, or Inception, for skin lesion classification. Transfer learning is used to fine-tune pre-trained models for improved efficiency.

4.3.Training and Validation

In this module, the preprocessed dataset is used to

train the CNN model using supervised learning techniques like backpropagation and optimization algorithms such as Adam and SGD. The model learns to differentiate between benign and malignant lesions. Its performance is evaluated using accuracy, precision, recall, and F1-score to ensure reliable predictions before deployment.

4.4.Diagnosis and Confidence Score

This module handles the prediction process by determining whether a skin lesion is malignant or benign. It also assigns a confidence score to each prediction, indicating the reliability of the classification.

4.5.User Interface

The user interface provides an interactive platform where users can upload images for analysis. The system processes the input and displays diagnostic results in an easily interpretable format. It also provides a summary of the predicted classification along with the confidence score, making it accessible for both medical professionals and general users seeking early screening. [3]

4.6.Visualization and Reporting

This module generates detailed diagnostic reports containing classification results and highlighted lesion areas using visualization tools. Reports can be exported in formats like PDF or CSV, enabling dermatologists and researchers to review and

document findings effectively. This feature helps in clinical decision-making and research purposes.

4.7.Integration with Medical Professionals

This module facilitates collaboration between AI-powered diagnostics and healthcare providers. Dermatologists can review, validate, and provide expert feedback on AI generated predictions. It also supports telemedicine consultations, allowing remote diagnosis and early intervention, thus improving accessibility to expert opinions and enhancing patient

care.

4.8.Deployment and Monitoring

The deployment module ensures that the trained model runs smoothly by using IOT. Continuous monitoring tracks system performance, collects user feedback, and updates the model with new training data to improve accuracy. Scalability and reliability are key aspects, ensuring that the system remains an effective tool for melanoma detection in real-world scenarios. Table 1 shows Test Cases

Table 1 Test Cases

Test ID	Inputs given	Results which to be expected
T_01	Upload Dataset	Uploaded data has to be stored in the work environment.
T_02	Feature Extraction	During this process from the images features has to be extracted and stored in data frames.
T_03	Data Splitting	The dataset must be divided into a training dataset and a test dataset at a ratio of 85:15 throughout this phase.
T_04	Testing Process	This process has stored test data and passes it to validation model and displays its classification.

5. Results and Discussion

5.1.Results

Compared to reinforcement and supervised learning techniques, unsupervised deep learning techniques (such as CNN, Faster R-CNN, Mask R-CNN, and U-Net) are more popular methods that have been used to develop convolutional networks for lung cancer detection and false-positive reduction. Deep learning techniques have achieved good performance in segmentation and classification. However, deep learning techniques still have many unsolved problems in lung cancer detection. First, clinicians have not fully acknowledged deep learning techniques for everyday clinical exercise due to the lack of standardized medical image acquisition protocols. The unification of the acquisition protocols could minimize it.

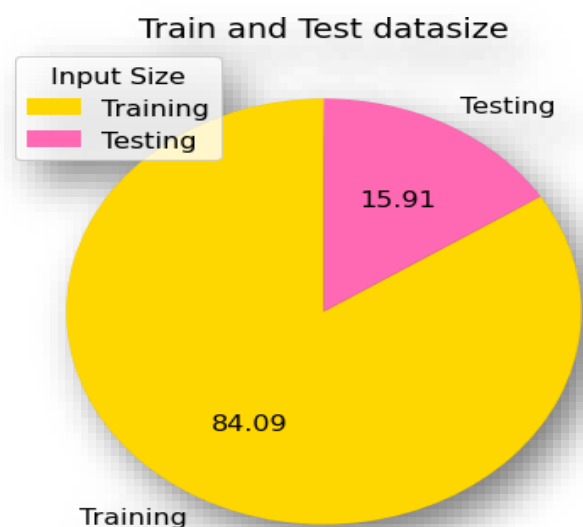


Figure 3 Train and Test Data-size

5.2.Discussion

Most deep learning techniques were developed by non-medical professionals with little or no oversight of radiologists, who, in practice, will use these resources when they become more widely available. As a result, some performance metrics, such as accuracy, AUC, and precision, which have little meaningful clinical application, continue to be used and are often the only summary outcomes reported by some studies. Instead, investigators should always strive to report more relevant clinical parameters, such as sensitivity and specificity, because they are independent of the prevalence of the disease and can be more easily translated into practice. Figure 4 shows Accuracy Plot Graph

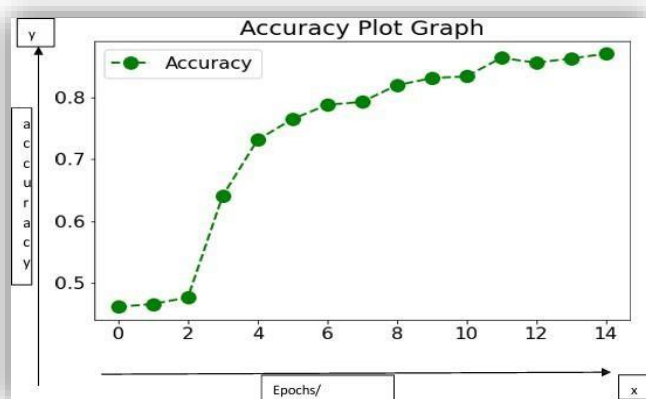


Figure 4 Accuracy Plot Graph

Conclusion

Skin diseases are so prevalent, early detection is crucial. With a CNN efficiency of up to 99.9 percent, the project work presented in this thesis offers a practical option for skin disease identification. The project details the three CNN transformations, analyses the results, and compares and contrasts their efficiency. As a first step toward more rapid identification of skin illnesses, it may serve as a model. To avoid this problem in the future, we may use picture painting methods and other pretreatment steps to eliminate hair before running the segmentation algorithm. This is essential for improving the accuracy of the training and

segmentation tasks to around 95%. There are a number of caveats to be aware of, even if "Melanoma Skin Cancer Detection using CNN" guarantees accurate detection and diagnosis. When planning, creating, and using the system, keep these constraints in mind.

References

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