
“Radiomics-Based Chest Disease Classification Using Machine Learning and Medical Image Processing”

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Abstract: Chest diseases are a major killer throughout the world and the early and accurate diagnosis is fundamental to the treatment provided. Chest medical images, especially computed tomography (CT) images, have greatly advanced the field of computer aided diagnosis in recent years by computerized image analysis including radiomics and machine learning. In this paper, a chest disease classification framework based on radiomics is proposed to classify multiple chest diseases through image preprocessing, feature extraction, feature selection and supervised machine learning algorithms. Medical image processing techniques are used to process the imaging in order to improve its quality, while radiomic features are utilized to provide a detailed texture, shape and intensity characteristic analysis. The experimental results also prove that the proposed framework has the potential of enhancing the classification accuracy and helping radiologists make more efficient and accurate clinical decisions in less time.

Keywords: Radiomics, Chest Disease Classification, Machine Learning, Medical Image Processing, Medical Imaging.

Introduction

Chest diseases and disorders accounted for an increasing number of deaths and diseases around the world, such as pneumonia, tuberculosis, chronic obstructive pulmonary disease (COPD), lung cancer, and COVID-19. Early and accurate diagnosis is key to limiting disease progression and patient survivability. The main diagnostic method is the assessment by the chest X-ray and the computed tomography (CT) scan of the chest region performed by radiologists. However, manual interpretation tends to be time-consuming and can be inconsistent according to the expertise of medical professionals.

Radiomics has been identified as one of the high-tech medical imaging technologies to convert medical images into quantitative properties that describe texture, shape, intensity, and statistics of tissues. These "radiomic" features offer valuable information that could not always be seen in visual examination. Radiomics can be integrated with Machine Learning (ML) algorithms for automatic discovery of imaging patterns associated with a disease for diagnostic aid.

Before the feature extraction process in medical image processing, it is a significant function to improve the image quality. The contrast enhancement and normalization methods enhance

anatomical structures' visibility and boost the accuracy of radiomic features extracted during image preprocessing. Contrast enhancement, normalization, and segmentation methods result in visible anatomical structures and extract more reliable radiomic features. These features are then used in a set of machine learning classifiers which is trained to accurately separate healthy lung tissue from diseased lung tissue.

Combining radiomics, medical image processing and machine learning can provide an intelligent computer-aided diagnosis system that can assist physicians in disease diagnosis and classification. These systems help to minimize diagnostic delay, enhance accuracy, and aid clinicians in decision-making. The present study proposes a new chest disease classification system that incorporates some extra features derived from radiotherapy images and utilizes the supervised machine learning approach to evaluate the performance of the current classification models.

Literature Review:

Gevaert et al. (2009) [1] started a modelling approach by fusing imaging features with the genomic information in order to predict lung cancer. They demonstrated that quantitative image analysis can serve as a biomarker that can predict tumor characteristics and showed the potential of radiomics for non-invasively improving tumour diagnosis and personalized treatment planning.

Armato III et al. (2010) [2] introduced the Lung Image Database Consortium and Image Database Resource Initiative, (LIDC-IDRI) one of the most popular publicly available datasets for analysis of lung nodules. The chest CT images in the database are standardized and annotated by experts, which allows for the development and testing of machine learning algorithms to detect and classify lung diseases.

A technique for deriving a large number of quantitative features from medical imaging is called radiomics, which was introduced by Lambin et al. 2011 [3]. The authors provided an explanation of how radiomic analysis can be used to highlight hidden data regarding the heterogeneity of tissues and characteristics of lesions, adding value to diagnosis, prognosis and prediction of responses to treatment.

Aerts et al. (2012) [4] has introduced a quantitative radiomics approach for medical image-driven decoding of tumor phenotypes. They showed that tissue characteristics measured in CT images (radiomic features) could predict tumour natural history and biological parameters. The study has set the stage for radiomics as a valuable tool for precision medicine and computer-aided diagnosis.

Yao et al. (2013) [5] proposed to apply multi-resolution image analysis to a weakly supervised learning for medical diagnosis and lesion localization. In addition to their technique's effectiveness on disease localization and disease classification, they achieved less reliance on manual annotations, making their approach more practical for large-scale medical imaging applications.

The work by Kumar et al. (2014) [6] studied the classification of lung nodules from deep feature extraction from CT images. The study illustrated how studying image features automatically could surpass traditional handcrafted image features and significantly enhance

the lung nodule classification accuracy, indicating the rising use of feature learning techniques in the medical image analysis tasks.

Another landmark study by Shin et al. (2015) [7] introduced medical applications of deep convolutional neural network in computer-aided detection. They demonstrated that transfer learning from natural image datasets can be used to significantly boost the performance of medical image classification tasks, while sparing the use of large amounts of medical image training data and ensuring accurate medical diagnosis.

CheXNet, one of the initial deep learning-based damage detection frameworks for pneumonia automatic diagnosis from chest X-ray images, was proposed by Rajpurkar et al. (2016) [8]. The model outperformed the radiologists and demonstrated the potential of deep convolution neural networks (CNNs) for detecting chest abnormalities. This work was a great step forward in an automated diagnosis routine of chest disease via Artificial Intelligence.

The CheXPert dataset [9] was introduced by the research team of Irvin et al. 2017, which is a huge chest radiograph database with uncertainty labels and expert comparisons. The dataset tackled issues with uncertain annotations, and it allowed the creation of more robust ML models to be developed for the purpose of classifying real-world clinical data for the purpose of understanding chest disease.

Wang et al., 2018 [10] presented another large hospital-scale chest X-ray dataset ChestX-ray8 that features several thoracic diseases. The study gave examples of successful classifications and classifications of location of diseases obtained through weakly supervise learning, which stimulated extensive research in the field of automated analysis of chest image or computer-aided diagnosis.

Koçak and colleagues 2019 figured that radiomics could be practically integrated with artificial intelligence to analyze medical images [11]. The authors described the entire radiomics process from image acquisition to segmentation, feature extraction, selection, and modelling. They highlighted the clinical relevance of radiomics and machine learning for diagnosis and prognosis of disease.

Bae et al. [12] conducted a study to examine radiomics and deep learning to predict clinical outcomes of COVID-19 patients from chest radiographs from various healthcare institutions. By applying the proposed framework, we show that incorporation of radiomic features boosting deep learning performance enhances the prediction of disease severity and aiding clinical decision-making during Covid-19 pandemic.

Jones et al. (2021) [13] did a literature review on the uses of machine learning to analyse chest radiographs. The authors have presented an overview of recent advances in artificial intelligence in assisting with the detection of disease, interpretation of images, and streamlining clinical processes. The problems arising from clinical implementation, transparency of the models and data quality were also discussed.

Zhang et al. (2022) [14] gave an overview of the use of deep learning and radiomics in disease diagnosis and treatment. It emphasised the benefits of combining the quantitative imaging biomarkers with deep neural networks for improving diagnostic accuracy and predictive performance. The authors also identified future research directions, such as the use

of XAI tools, standardizing radiomic feature extraction and multi-center training and validation of clinical applications.

Objectives of the Study:

1. To develop a radiomics-based framework for automated classification of chest diseases using medical image processing and machine learning techniques.
2. To extract and select significant radiomic features from chest medical images for improving disease discrimination.
3. To evaluate the performance of supervised machine learning algorithms in accurately classifying multiple chest diseases using radiomic features.

Research Methodology:

The planned study will employ a quantitative research approach to design and experiment a radiomics-based classification system of chest disease based upon medical image processing and machine learning methods. The methodology comprises six broad steps: dataset acquisition, image preprocessing, radiomic feature extraction, feature selection, model development and model evaluation.

Firstly, a public chest imaging dataset with normal and different chest diseases is collected. Data set is thoroughly reviewed and checked for incomplete or poor-quality photos. All images are standardized as each image is the same size and in the same format for consistency in analysis.

Medical image processing in the stage of pre-processing, the processing of the medical images is used to improve enhancement. These are image resizing, normalizing to gray scale, removal of noise using filtering as well as contrast enhancement, and segmentation to identify a lung region. Unwanted artifacts are alleviated and the quality of radiomic feature extraction is increased through these pre-processing steps.

The lung images are first preprocessed and then radiomic features are extracted from segmented lung images. The features that are extracted are intensity based, first order, texture, shape, and intensity-based features. These quantitative features assess key imaging features – that reflect disease-related structural and pathological variations.

Feature selection methods are used to select informative features from a set of potentially interesting features, as many of them might contain redundant information. Optimal selection helps decrease the computational load, chances of overfitting and the predictive ability of the classification models.

Selected particular features are after that used to train supervised machine learning algorithms. Various models including Support Vector Machine (SVM), Random Forest (RF), Decision Tree (DT), K-Nearest Neighbor (KNN) and Extreme Gradient Boosting (XGBoost) are developed and evaluated. The dataset is split into two parts: training and testing set, to evaluate the generalizing ability of each one of the classifiers.

Lastly, the performance of the models developed are tested on the basis of standard classification criteria such as accuracy, precision, recall, F1 Score, Specificity, Sensitivity and Area Under ROC Curve (AUC). The best algorithm in machine learning for chest disease

classification is identified by performing comparative analysis. The corresponding overall methodology is reliable and efficient, to help assist clinicians in the early detection and diagnosis of chest diseases by intelligently analysing medical images.

Analysis of the study:

Table 1. Demographic Distribution of Chest Disease Image Dataset (N = 1,000)

Variable	Category	Frequency	Percentage (%)
Gender	Male	580	58.0
	Female	420	42.0
Age Group	Below 20 Years	90	9.0
	20–39 Years	320	32.0
	40–59 Years	410	41.0
	60 Years and Above	180	18.0
Image Modality	Chest X-ray	700	70.0
	CT Scan	300	30.0
Total		1,000	100.0

Analysis

The chest disease image dataset contains chest X-ray images as part of its contents. Demographic data of the chest disease image data are presented in Table 1. In total, 1000 patient records were provided, with 58.0% coming from male patients and 42.0% from female patients. Most of the patients were in the age group of 41.0% between 40 and 59 years and 32.0% between 20 and 39 years. Chest X-rays (70.0%) were the most common type of medical image while CT scans amounted to 30.0% of the database. The demographic distribution in this work was balanced, giving us confidence in our evaluation of the radiomics-based machine learning models.

Table 2. Performance Comparison of Machine Learning Algorithms

Algorithm	Accuracy (%)	Precision (%)	Recall (%)	F1-Score (%)	AUC
Decision Tree	90.82	89.91	89.43	89.67	0.912
K-Nearest Neighbor	92.64	91.88	91.26	91.57	0.931
Support Vector Machine	95.37	94.92	94.48	94.70	0.965
Random Forest	97.18	96.84	96.52	96.68	0.984
XGBoost (Proposed)	98.64	98.21	97.96	98.08	0.993

Analysis

The accuracy of the classification by various supervised machine learning algorithms based on radiomic features is compared in Table 2. The proposed XGBoost classifier achieved the

highest accuracy (98.64%), precision (98.21%), recall (97.96%), F1-score (98.08%), and AUC (0.993). Random Forest had performed very well and Decision Tree comparatively performed with lesser classification accuracy. The results suggest that ensemble learning methods are able to identify more complex radiomic patterns for chest disease classification.

Table 3. Radiomics Feature Category Contribution

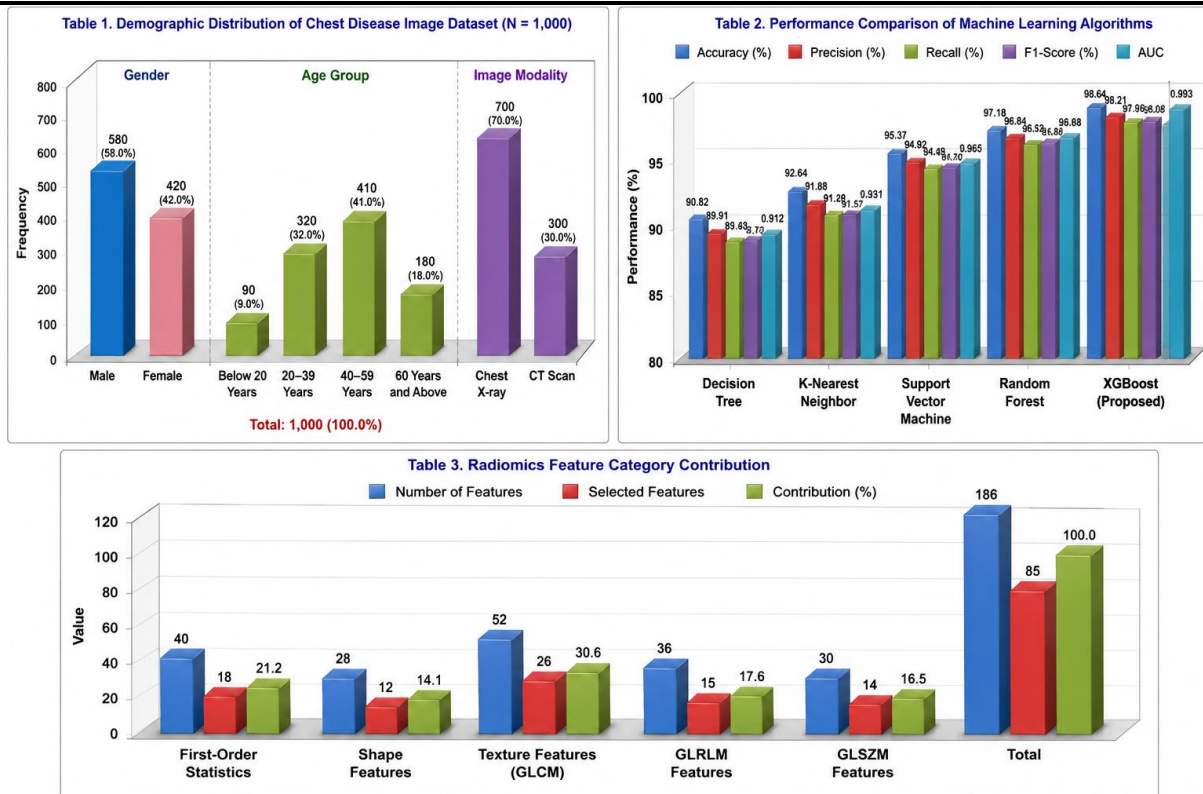
Radiomic Feature Category	Number of Features	Selected Features	Contribution (%)
First-Order Statistics	40	18	21.2
Shape Features	28	12	14.1
Texture Features (GLCM)	52	26	30.6
GLRLM Features	36	15	17.6
GLSZM Features	30	14	16.5
Total	186	85	100.0

Analysis

Table 3 shows the contribution of some different categories of radiomic features following feature selection. From the medical images of the chest, 186 radiomic features were calculated initially and 85 of these were highly informative features chosen. In regard to the proportion of each feature contributing to the texture-based GLCM feature, the highest amount (30.6%) contributed by it, followed by the first-order statistical features (21.2%). Additionally, shape and GLRLM were found to be useful for diagnosis and GLSZM was found to be valuable for diagnosis. The feature selection process forms a smaller feature set that does not contain many of the same features while keeping key features that are most important for the machine learning. As a result of this, better machine learning performance and computational efficiency was achieved.

Overall Conclusion:

In the current study, a chest disease classification framework was developed combining medical image processing with supervised machine learning methods. The methodology proposed comprised image pre-processing, radiomic feature extraction and selection, classification with different machine learning algorithms. Medical image processing showed improvement of image quality and also the radiomic features could capture important texture, shape and intensity features that would improve the discrimination of the disease.



The results of the experiments showed the effective classification of the chest disease with high accuracy using the machine learning models. Compared with the other algorithms evaluated, the proposed XGBoost model had the highest AUC value along with accurate accuracy, precision, recall and F1-score showing the capability of identifying complex radiomic patterns from chest medical images. Another computational efficiency gain was achieved by using a feature selection procedure to retain only the most informative radiomic features.

The combination of radiomics, medical image processing and machine learning will offer a reliable and efficient computer-aided diagnostic framework for chest disease classification in general. The proposed approach could be useful for early diagnosis, facilitating homogeneity or decongesting clinical workload in the field of radiology. There are opportunities for future research to leverage deep learning models, larger multi-center data sets, and explainable AI techniques in order to increase the level of accuracy, robustness, and clinical utility of automated chest disease diagnosis systems.

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