A CAD system based on neural network for breast cancer detection using biopsy results comprising optimisation methods and performance specification functions.

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Abstract

Breast cancer is one of the most important and challenging factor in the medical problems. In this paper, we report the results of using neural networks for breast cancer diagnosis. It describes, an alternative classification scheme based on feed forward neural networks. One of the primary reason for using neural networks is that they can approximate the probability of malignancy directly.

For the feed forward neural network used here, model selection includes the choice of network architecture i.e., network topology, number of hidden layers and feature selection (the set of input variables). Here we used results of biopsy as set of input variables(attributes). Our work is used to give more information about breast cancer detection. This will helps the doctors in diagnosis, the treatment plan making and state of the cancer. We have developed an algorithm on the basis of neural networks. This is achieved by training the network from a training data set. Thus, the network is trained with about 70% of data set for training ratios and remaining 30% for testing and validating. Applications to cancer patients with variable amount of cancer appearance demonstrated that the procedure can handle large number of detection.

Key Words: Breast cancer, Benign, Malignant, Biopsy, Attributes, Neural network, perceptron, Levenberg-marquardt, Quasi Newton, Gradient Descent, Bayesian Regulation, Mean Square Error(MSE), Mean Absolute Error(MAE), Sum Squared Error(SSE),Computer Aided Diagnosis(CAD).

1. Introduction

Breast cancer is one of the most important medical problems. According to the American Cancer Society: Excluding cancers of the skin, breast cancer is the most common cancer among women, accounting for one out of every three cancer diagnoses in the United States. In the United States, approximately 211,000 new cases of invasive breast cancer are diagnosed among women and an estimated 40,000 women die from breast cancer in a typical year. It is also reported that in a typical year, approximately 1,300 men are diagnosed and 400 men die of breast cancer. Overall, breast cancer is the leading cancer type among American women and is second only to lung cancer in cancer deaths. For women ages 40 to 59, breast cancer is the leading cause of cancer deaths.[1][25]. Two criteria determine the of any breast cancer screening effectiveness methodology: specificity and sensitivity. Specificity is defined as the proportion of patients correctly identified as not having breast cancer. Conversely, sensitivity is defined as the proportion of patients correctly identified as having breast cancer. Therefore, a good screening methodology must have both high sensitivity and high specificity [2]. The recent decline in the breast cancer mortality rate is generally attributed to a greater awareness of the disease and the increased use of mammography. Despite the fact that X-ray mammography provides high resolution images using relatively low radiation doses, but its limitations are well documented. When mammography detects a tumour, biopsy is required to determine its malignancy. Fine needle biopsy is much less invasive and less costly than a full biopsy. Thus we dedicated our project work in accurate determination of benign and malignant breast cancer by making use of biopsy results by developing a neural network system for easy and fast determination.

2. Related works:

In Density Based Breast Segmentation for Mammograms Using Graph Cut Techniques, the graph cut segmentation algorithm performs well on mammogram. However, in this preliminary stage, the detection of the boundary is done semi-automatically where the user needs to define and mark the labels.[3] SUDHIR.D.SAWARKAR Department of Computer Engineering Datta Meghe College of Engineering, Airoli. Mumbai University ASHOK A. GHATOL Vice Chancellor, Dr. Baba saheb Technological University, Lonere suggested An artificial neural network (ANN) is an information-processing paradigm inspired by the way densely interconnected, parallel structure of the mammalian brain processes information.

The key element of the ANN paradigm is the novel structure of the information processing system. Learning in ANN typically occurs by example through training, or exposure to a set of input/output data where the training algorithm iteratively adjusts the connection weights (synapses). These connection weights store the knowledge necessary to solve specific problems. In this work, they have used neural networks Support Vector Machine method for diagnosis of breast cancer. SVMs can only be used for classification, not for function approximation. The Support Vector Machine (SVM) is implemented using the kernel Adatron algorithm. The kernel Adatron maps inputs to a high-dimensional feature space, and then optimally separates data into their respective classes by isolating those inputs, which fall close to the data boundaries.

There are many other methods like breast cancer prediction with artificial neural network based on BI-RADS standardized lexicon combined neural network and decision trees model for prognosis of breast cancer relapse etc. but there are problems in computation time and learning rate.

All breast cancers that are retrospectively detected on the mammograms are not detected by radiologists. Due to the subtle and complex nature of the radiographic findings related with breast cancer, human factors such as varying decision criteria, distraction by other image features, and simple oversight can be responsible for the errors in radiological diagnosis.

The table below shows the accuracy of proposed and existing work.[4][5][6][7]

Our work provides with the four possible methods that the operator can use depending on the need. The goal is to build a classifier that can distinguish between cancer and control patients from the mass spectrometry data. The methodology followed in this is to select a reduced set of measurements or "features" that can be used to distinguish between cancer and control patients using a classifier. These features will be ion intensity levels at specific mass/charge values. An advantage of our system is that it uses a data base on the basis of biopsy report. As a result there is a direct contact with the cancer content as obtained from pathology. As compared to detection on the basis of images [8][9][10][11][12] there may be visual interference, such that damage to the image or due to disturbances such as motion artifacts or due to some physical interference.[13][14][15][16][3].

3. Implementation:

The various stages of the proposed network is as shown in "fig 1"[22]

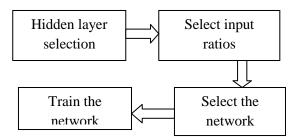


Fig 1: Training stages for breast cancer detection

3.1 Levenberg-Marquardt Algorithm:

The Levenberg-Marquardt (LM) algorithm is an iterative technique that locates the minimum of a function that is expressed as the sum of squares of nonlinear functions. It has become a standard technique for nonlinear least-squares problems. The Levenberg-Marquardt algorithm is a very simple, but robust, method for approximating a function. Basically, it consists solving the equation:[19][20].

Where,					J
is the Jacobian matrix for the system	m		λ	is	the
Levenberg's damping factor			δ	is	the
weight update vector	Е	is	the	;	error
vector containing the output		erro	ors i	for	each
input vector used on training the	net	work			

The δ tell us by how much we should change our

Туре о	f	Breast cancer	Adaptive K
detection		detection	means method
		using neural	using image
		network	processing
		based on	techniques
		biopsy	1
		results	
cancerous			
		98.2%	77%
Non			
cancerous		95.5%	91%

network weights to achieve a better solution. The $J^t J$ matrix can also be known as the approximated Hessian. The λ damping factor is adjusted at each iteration, and guides the optimization process. If reduction of **E** is rapid, a smaller value can be used, bringing the algorithm closer to the Gauss–Newton

algorithm, whereas if iteration gives insufficient reduction in the residual, λ can be increased, giving a step closer to the gradient descent direction.

3.1.1Computing the Jacobian

The Jacobian is a matrix of all first-order partial derivatives of a vector-valued function. In the neural network case, it is a N-by-W matrix, where N is the number of entries in our training set and W is the total number of parameters (weights + biases) of our network. It can be created by taking the partial derivatives of each output in respect to each weight, and has the form:

$$J = \begin{bmatrix} \frac{\partial F(x_1, w)}{\partial w_1} & \cdots & \frac{\partial F(x_1, w)}{\partial w_W} \\ \vdots & \ddots & \vdots \\ \frac{\partial F(x_N, w)}{\partial w_1} & \cdots & \frac{\partial F(x_N, w)}{\partial w_W} \end{bmatrix}.$$

Where,

 $F(x_i, w)$ is the network function evaluated for the *i*-th input vector of the training set using the weight vector w and w_j is the *j*-th element of the weight vector w of the network. In traditional Levenberg-Marquardt implementations, the Jacobian is approximated by using finite differences

3.1.2Approximating the Hessian

For the least-squares problem, the Hessian generally doesn't needs to be calculated. As stated earlier, it can be approximated by using the Jacobian matrix with the formula:

$H \approx J^t J$(2)

Which is a very good approximation of the Hessian if the residual errors at the solution are "small"? If the residuals are not sufficiently small at the solution, this approach may result in slow convergence.

3.1.3Solving the Levenberg-Marquardt equation

Levenberg's main contribution to the method was the introduction of the damping factor λ . This value is summed to every member of the approximate Hessian diagonal before the system is solved for the gradient. Typically, λ would start as a small value such as 0.1.

Then, the Levenberg-Marquardt equation is solved, commonly by using a LU decomposition. However, the system can only be solved if the approximated Hessian has not become singular. If this is the case, the equation can still be solved by using a SVD decomposition.

After the equation is solved, the weights **w** are updated using δ and network errors for each entry in the training set are recalculated. If the new sum of squared errors has decreased, λ is decreased and the iteration ends. If it has not, then the new weights are discarded and the method is repeated with a higher value for λ . This adjustment for λ is done by using an adjustment factor **v**, usually defined as 10. If λ needs to increase, it is multiplied by **v**. If it needs to decrease, then it is divided by **v**. The process is repeated until the error decreases. When this happens, the current iteration ends.

3.1.4 General Levenberg-Marquardt Algorithm

As stated earlier, the Levenberg-Marquardt consists basically in solving equation (1) with different λ values until the sum of squared error decreases. So, each learning iteration will consist of the following basic steps:

1. Compute the Jacobian I	by using finite differences or
the chain rule	2.Compute the
error gradient,	$\mathbf{g} = \mathbf{J}^{t}\mathbf{E}$
3.	Approximate the Hessian
using the cross product Jac	obian,
	$\mathbf{H} = \mathbf{J}^{t}\mathbf{J}$

4. Solve $(\mathbf{H} + \lambda \mathbf{I})\delta = \mathbf{g}$ to find δ . 5. Update the network weights **w** using δ . 6.Recalculate the sum of squared errors using the updated weights

7. If the sum of squared errors has not decreased, discard the new weights, increase λ using v and go to step 4. 8.

Else decrease λ using v and stop.

3.2 Quasi-Newton Methods:

There are many variants of quasi-Newton methods. In all of them, the idea is to base the quadratic model in equation on an approximation of the Hessian matrix built up from the function and gradient values from some or all of the steps previously taken. Quasi-Newton methods are chosen as the default in *Mathematica* because they are typically quite fast and do not require computation of the Hessian matrix, which can be quite expensive both in terms of the symbolic computation and numerical evaluation. With an adequate line search, they can be shown to converge super linearly. To a local minimum where the Hessian is positive definite.

3.3 Gradient descent

Gradient descent is based on the observation that if the defined multivariable function F(x)is and differentiable in a neighborhood of a point, 'a' then F(x) decreases *fastest* if one goes from **a** in the direction of the negative gradient of **F** at **a**, $-\nabla F(\mathbf{a})$. It follows that, if

$$\mathbf{b} = \mathbf{a} - \gamma \nabla F(\mathbf{a})_{\dots,(3)}$$

For $\gamma > 0$ a small enough number, then $F((a) \ge$ F(b). With this observation in mind, one starts with a guess \mathbf{x}_0 for a local minimum of F, and considers the sequence $\mathbf{x}_0, \mathbf{x}_1, \mathbf{x}_2, \ldots$ such that

$$\mathbf{x}_{n+1} = \mathbf{x}_n - \gamma_n \nabla F(\mathbf{x}_n), \ n \ge 0.$$
(4)

We have

so hopefully the sequence $(\mathbf{x}_n)_{\text{converges to the}}$ desired local minimum. Note that the value of the step size γ is allowed to change at every iteration. With certain assumptions on the function F and particular choices of γ , line search Wolfe conditions convergence to a local minimum can be guaranteed. When the function F is convex, all local minima are also global minima, so in this case gradient descent can converge to the global solution.

3.4 Bayesian Regulation

Bayesian regularization takes place within the Levenberg-Marquardt algorithm. Backpropagation is used to calculate the Jacobian jX of performance perf with respect to the weight and bias variables X. Each variable is adjusted according to Levenberg-Marquardt,

jj = jX * jXje=jX*E $dX = -(jj+I*mu) \setminus je....(6)$

where E is all errors and I is the identity matrix.

3.5 Mean square error (MSE):

Least mean square error (LMS) algorithm is an example of supervised training, in which the learning rule is provided with a set of examples of desired network behavior; it is similar to perceptron learning

Where,

 \mathbf{p}_{Q} is an input to the network the t₀ is corresponding target output. As each input is applied to the network, the network output is compared to the target. The error is calculated as the difference between the target output and the network output. The goal is to minimize the average of the sum of these errors.

$$mse = \frac{1}{Q} \sum_{k=1}^{Q} e(k)^2 = \frac{1}{Q} \sum_{k=1}^{Q} t(k) - \alpha(k))^2 \qquad (8)$$

The neural network toolbox allows to weight each squared error individually as follows:

$$F = mse = \frac{1}{N} \sum_{i=1}^{N} w_i^e(e_i)^2 = \frac{1}{N} \sum_{i=1}^{N} w_i^e(t_i - a_i)^2 \qquad(9)$$

Where

$$w_i$$
 weight parameter e_i error generated t_i target output α_i expected output N numberof samples

3.6 Mean absolute

error (MAE)

The mean absolute error is an average of the absolute errors. It measures the average magnitude of the errors in a set of forecasts, without considering their direction. It measures accuracy for continuous variables. The equation is given below

$$MAE = \frac{1}{n} \sum_{i=1}^{n} |f_i - y_i| = \frac{1}{n} \sum_{i=1}^{n} |e_i|.$$

$$e_i = |f_i - y_i|$$
.....(10)

Where,

f

$$f_i$$
 is the prediction y_i the true value.

3.7 Sum square error (SSE):

SSE is the sum of the squared differences between each observation and its group's mean. It can be used as a measure of variation within a cluster. If all cases within a cluster are identical the SSE would then be equal to 0.The formula for SSE is:

SSE =
$$\sum_{i=1}^{n} (x_i - \bar{x})^2_{....(12)}$$

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Where,nis the number of observationsxi is thevalue of the ith observation and 0is the mean of allthe observations.

4. Results:

The proposed method has been implemented using MATLAB 7.12.0365 environment and tested on the data base of breast biopsy consisting of different values related to attributes. The data base consists of both normal and abnormal (i.e. cancer and non cancer patient records).Confusion matrix plot shows the accuracy of our work as shown in fig Following figure shows GUI for normal and abnormal patients tested on the basis of their biopsy results.[17][18].

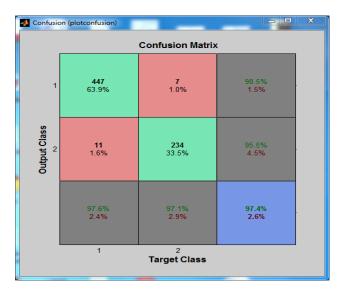


Fig 2: Confusion matrix

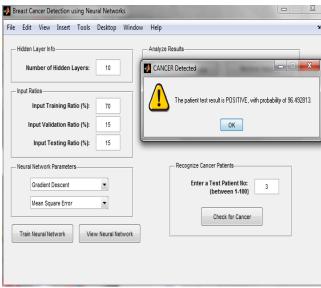


Fig 3: GUI for abnormal patient

File Edit View Insert Tools Desktop	Window Help
Hidden Layer Info-	Analyze Results
Number of Hidden Layers: 10	CANCER Not Detected
- Input Ratios	The patient test result is NEGATIVE, with probability of 87.847469.
Input Training Ratio (%): 70	
Input Validation Ratio (%): 15	ОК
Input Testing Ratio (%): 15	·
- Neural Network Parameters	Recognize Cancer Patients
Gradient Descent	Enter a Test Patient No: (between 1-100)
Mean Square Error	
Train Neural Network View Neural Network	Check for Cancer

Fig 4: GUI for normal patient

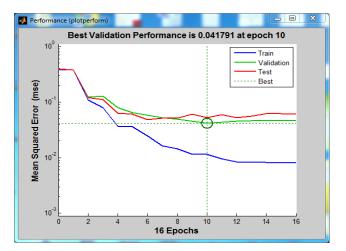


Fig 5: Performance plot

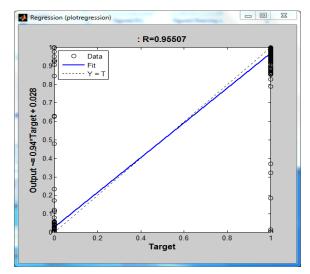


Fig 6: Regression plot

5. Conclusion:

This work is used to give more information about breast cancer detection. This will helps the doctors in

diagnosis, the treatment plan making and state of the cancer. We have developed an algorithm on the basis of neural networks. This is achieved by training the network from a training data set [21]. Thus, the network is trained with about 70% of data set for training ratios and remaining 30% for testing and validating. Applications to cancer patients with variable amount of cancer appearance demonstrated that the procedure can handle large number of detection.

Our work provides with the four possible methods that the operator can use depending on the need. The goal is to build a classifier that can distinguish between cancer and control patients from the mass spectrometry data. The methodology followed in this is to select a reduced set of measurements or "features" that can be used to distinguish between cancer and control patients using a classifier. These features will be ion intensity levels at specific mass/charge values.

An advantage of our system is that it uses a data base on the basis of biopsy report. As a result there is a direct contact with the cancer content as obtained from pathology. As compared to detection on the basis of images there may be visual interference, such that damage to the image or due to disturbances such as motion artefacts or due to some physical interference. Detecting cancer requires information from inside, the judgement can't be done on the basis of some pictorial images. So our work has found a great success in that way with a least possibility of error in detection and helping in detection of cancer so that proper treatment can be made and save life. Our work advises every woman to have a regular biopsy check up.

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