DOI: https://doi.org/10.32628/IJSRSET207352

Skin Cancer Detection Using GLCM and ABCD Parameter

V. Supraja¹, G. Gayathri2, K. Thanuja³, K. Harshitha⁴, M. N. Sasikala⁵

¹Associate Professor, ECE, Ravindra College of Engineering for Women, Kurnool, Andhra Pradesh, India ²⁻⁵ECE, Ravindra College of Engineering for Women, Kurnool, Andhra Pradesh, India

ABSTRACT

Lately, skin malignancy is viewed as one of the most Perilous types of diseases found in People. Skin malignant growth is found in different sorts, for example, Melanoma, Basal and Squamous cell Carcinoma among which Melanoma is the most capricious. The discovery of Melanoma malignant growth in the beginning period can be useful to fix it. PC vision can assume a significant job in Clinical Picture Analysis and it has been demonstrated by many existing frameworks. Right now, we present a PC helped strategy for the location of Melanoma Skin Malignant growth utilizing Picture Preparing instruments. The contribution to the framework is the skin sore picture and afterwards by applying novel picture preparing systems, it investigations it to close about the nearness of skin malignancy. The Lesion Picture investigation devices checks for the different Melanoma parameters Like Asymmetry, Boundary, Color, Diameter (ABCD) and so on by surface, size and shape investigation for picture division and highlight stages. The extricated highlight parameters are utilized to characterize the picture as Ordinary skin and Melanoma malignant growth lesion.

Keywords: Melanoma, Color models, GLCM features, ABCD parameters, Back propagation network.

I. INTRODUCTION

Skin is the largest organ in the body which occupies almost 1.73 square feet to cover bones and flesh. It is nature's protection given to almost every human or animal in the planet. Melanin is a pigment found in underneath the skin which gives the skin its color. The cells that produce the melanin are called as "melanocytes" which are located at bottom of skin epidermis. The situation when an uncontrollable cell division happens the melanocytes resulting in the formation tumors or a pile of dead skin is called as "Melanoma". Melanoma is an especially lethal type of skin malignant growth and despite the fact that it represents just 4% of all skin tumors it is answerable for 75% of all skin malignant growth passing. On the off

chance that melanoma is analyzed and treated in its beginning times, it very well may be restored however in the event that the analysis turns out to be late, melanoma can become further into the skin and spread to different pieces of the body. It's spread in different parts past the skin can be perilous as it is hard to treat. The nearness of Melanocytes in any one part causes the Melanoma. Escalated Presentation of skin to bright radiation is the principal reason for the melanoma. The factors that cause melanoma are numerous starting from the exposure to excessive UV radiation to the inheritance there many ways one can be have melanoma. Melanoma is fatal type of cancer when it spreads deep into skin, therefore early detection of melanoma plays a vital role in saving life of the person. The melanoma can develop on anyplace over the skin, anyway they will likely start on the capacity compartment (chest and the back) in males and females, it is commonly found on legs. The face and the neck are the other ordinary districts where it might be found. Skins having faintly shades cut down the threat of melanoma at this ordinary district; anyway, anyone may have melanoma over the palm of the hand, under the nails and bottoms of the feet.

Melanoma is considered as slowly spreading cancer in the human body; therefore, it has various stages but as to segregate for the analysis there are mainly four. They are:

Stage 0: It is the underlying stage additionally alluded to as "Insitumelanoma". Events of strange melanocytes are seen in the top layer of the skin. Melanoma identified in this stage is 100% reparable.

Stage 1: The tumor right now spread into the skin however restricted to the epidermis layer. No spreads into the lymph or different pieces of the body are identified. The tumor development profundity is between 1mm to 2mm and can show ulceration (for example breakage of the skin). At this phase through careful systems the patients can be relieved.

Stage 2: In this stage, Melanoma tumor is 2mm to 4mm in measure and can show ulceration. No spread to lymph hubs or different parts of the body.

Stage 3: Tumor is more than 4mm profound and can show ulceration. Malignant growth is spread to the lymph hubs yet is still limited. Advance medical procedure and post-careful consideration is essential in this stage.

Stage 4: The tumor is more than 4mm profound and has spread to different organs and lymph hubs. Treatment at this stage is costly and dangerous as the malignancy has spread from its essential tumor site. Early discovery of melanoma (Stage 0 furthermore, Stage 1) is the answer for lessen death rates among patients experiencing melanoma skin malignant growth.

Skin biopsy is a non-intrusive assessment strategy dependent On the utilization Of occurrence light and oil inundation to make conceivable the visual assessment of subsurface structures Of the skin. Along these lines, programmed conclusion instrument is fundamental for doctors. In any event, when the master dermatologists utilize the biopsy for analysis, the exactness of melanoma conclusion is assessed to be around 80% The PC supported diagnostics is useful to build the conclusion exactness just as the rate of change. PC isn't

increasingly astute than human however it might have the option to extricate some data, similar to shading variety, asymmetry, surface highlights, that may not be promptly seen by human eyes. There have been many proposed frameworks and calculations, for example, the 7.0 agenda, ABCD rule, and the Menzies meth0d to improve the diagnostics of the melanoma skin cancer. Various investigators have been working on the Computer approach for skin sickness acknowledgment. For the division of skin sore in the data picture, existing structures either use man operational, automatic or totally customized edge acknowledgment procedures. The features to perform skin sore division used in various papers are shape, concealing, surface, and luminance.

Many periphery area methodologies are represented in the writing Some of the procedures fuse histogram thresholding, overall thresholding on streamlined concealing channels followed by morphological activities, Hybrid thresholding. Right now, have applied an Automatic thresholding and edge area strategy. Unmistakable picture taking care of frameworks have been used to think such features, creator has introduced a robotized Global edge acknowledgment procedure in biopsy pictures taking into account concealing space assessment and overall histogram thresholding which shows prevalent in recognizing the edges of melanoma wounds. the makers have used the technique for dividing the data picture into various clinically basic regions using the

Euclidean division change for the extraction of concealing and surface features. The ABCD rule of dermoscopy, prescribe that asymmetry is given the most perceptible among the four features of asymmetry, edge irregularity, concealing separation over. Various examinations have been done on measuring asymmetry in skin injuries. In Some procedures, the balance include is determined dependent on geometrical estimations all in all lesion, e.g. symmetric distance and circularity Other studies, propose the circularity index, as a measure of irregularity of borders in dermoscopy images. The paper gives the overview of the most important implementations in the literature and compares the performance of several classifiers on the specific skin lesion diagnostic problem.

There are numerous approaches to distinguish the melanoma in beginning periods. The physical biopsy is considered as a best and exact strategy for distinguishing melanoma; in any case, the procedure incorporates getting tests of the skin by making torment patient and it requires over five days to give proper outcomes.

II. METHODOLAGY

The proposed technique for Skin Cancer Detection utilizing Image Processing is as appeared in Fig. 1. The contribution for the framework is the picture of the skin sore which is suspected to be a affected lesion. This picture is at that point pre-processed to upgrade the picture quality. The programmed procedure and edge identification are utilized for picture division. The sectioned picture is given to the component extraction square which comprises of sore locale examination for its geometrical highlights and abcd highlights. The constructional highlights are proposed since they are the most noticeable highlights of lesion. The extricated include is additionally prescribed to the component which arranges the skin sore as cancerous or ordinary by contrasting its component parameters and the predefined constraints.

A Frame work of proposed technique

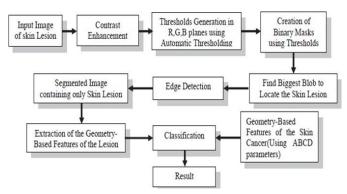


Figure-1:Block diagram

III. The Proposed Technique

Image Pre-processing

The information picture given to the framework can be gotten in any lighting condition or by utilizing any camera, for example, a portable camera. Consequently, it should be pre-prepared. Here, the pre-preparing incorporates the picture resizing and difference and brilliance alteration. This is done so as to make up for the non-uniform brightening in the picture.

Image Pre-processing Flow chart:

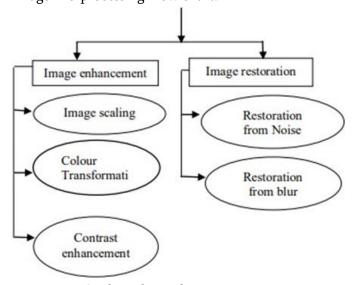


Figure-2: Flow chart of Image Pre-processing

RGB color model (Red, Green, Blue):

In this model of the image, each and every pixel of the image is supplied with red, green, blue colors to get a value according to its pixel color.

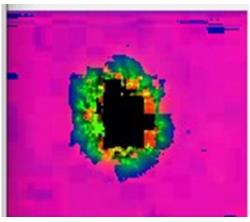


Figure-3:RGB to HSV

HSV colour model (Hue, Saturation, Value):

This colour model is generally used to make colour adjustments and enhance the contrast part of the image.



Figure-4: HSV model

Extraction of features:

Feature extraction is a technique of collecting the consistent information of a given image like finding patterns. This project uses three kinds of feature extracting techniques they are:

LBP (Local Binary Patterns):

The local binary patterns is a simple yet effective technique to know the boundaries of the lesion in the image in which the clear impression of borders are visible.

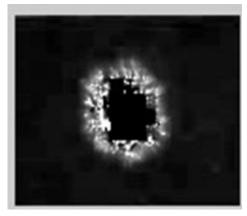


Figure-5: Local binary pattern image

Contour Detection:

This image analysis technique is used to detect and mark the high pixel values which are present in the lesions. This process goes on by joining the continuous points which are having same intensity points on the image resulting in the formation of curve. This helps to locate the biggest blob in the affected area.



Figure-6 The biggest blog detected

GLCM (Grey Level cooccurrence Matrix)

As explained earlier The GLCM is generally used image analysis to determine following features like energy, entropy, contrast, homogeneity, correlation. By calculating above parameters and comparing them with the database values gives the appropriate result.

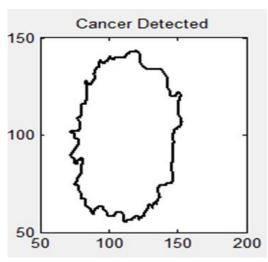


Figure-7: Border detected

ABCD parameters:

The ABCD parameters are guiding directions of detecting melanoma. As mentioned earlier the calculation of Asymmetry, Border, Color, Diameter of the lesion. After computing the values, they are calculated as a score called TDS (total dermoscopy score).

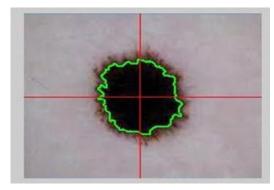


Figure- 8: Asymmetry calculation in ABCD

The TDS score is a value to determine the percentage of melanoma in the affected skin. The score of TDS is calculated by using the following formulae.

Area (A): Number of pixels of the lesion. Perimeter (P): Number of edge pixels.

Major Axis Length or Greatest Diameter (GD):

The distance between the line passing through lesion centroid and connecting the two farthest boundary point

$$(xc, yc) = \left(\frac{\sum x_i}{n}, \frac{\sum y_i}{n}\right)$$

Here n is number of pixels, (xi, yi) are coordinates at ith lesion

Minor Axis Length or Shortest Diameter (SD): The distance between the line passing through lesion centroid and connecting the two farthest boundary points.

Irregularity index (Ir A):

Irregularity Index B (Ir B):

Irregularity Index C (Ir C)

$$Ir C = P_{SD}^{\frac{1}{N}}, \frac{1}{GD}$$

Irregularity Index D (Ir D):

$$Ir D = SD-GD$$

TDS Index	Nature of Skin Cancer
TDS<4.75	Non-Cancerous
4.75 <tds<5.45< td=""><td>Suspicious</td></tds<5.45<>	Suspicious
TDS>5.45	Cancerous

GMM (Gaussian Mixture Model)

Gaussian mixture model is a method based on probability which assumes the data points are generated from a limited number of Gaussian distributions. This model helps to create masking on the lesion to identify the location very accurately.

Combining the Features:

In this step, the acquired features are combined and loaded into the database. This plays a vital role for comparing them with the already existed database. The features are trained according to the requirements of the neural network (BPN). When features are loaded, they are sent to neural network for the further steps.

Comparing features with the database:

The decision making is a very significant step in deciding the percentage of melanoma and the type of cancer, therefore a neural network is used as a decision tree.

IV. RESULTS AND DISCUSSION

To start with, the Skin Lesion is framed and afterward it was applied on the info picture to acquire the sectioned picture. As appeared in Fig9. Input picture of the skin lesion is effectively sectioned for both moles, just as Melanoma Disease Image utilizing proposed division technique.



Figure-9: Pictures we took as input the left side is cancer image and right side is a non cancerous image

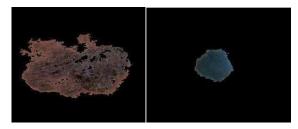


Figure-10: Mask creation

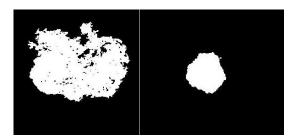


Figure-11: Pictures that show the biggest blob detected

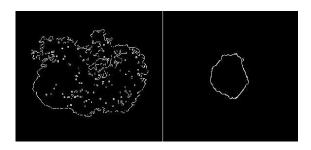


Figure-12: Edge detected

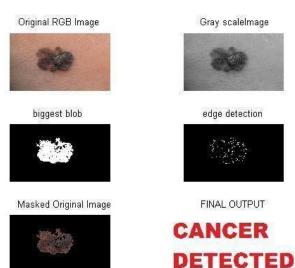


Figure-13: Final output

V. CONCLUSION

In this paper, we have examined a PC supported determination framework for melanoma skin

malignant growth. It tends to be finished up from the outcomes that the submitted framework is successfully utilized by the patients and doctors to analyze the skin disease precisely. This apparatus is progressively helpful to country zones where the specialists in the clinical sector may not be accessible. Since the instrument is made easier to use and hearty for pictures obtained in any conditions, it can fill the need in programmed eradicating of the Skin malignancy.

Comparative analysis:

IMAGETYPE

OUTPUT IMAGE

TYPE OF CANCER

MELANOCYTI C

NEVUS(MOLE)

MELANOMA (MEDIUM)

KERATOSIS (HIGH)

VI. REFERENCES

- [1]. A. Bono, S. Tomatis, and C. Bartoli, The ABCD system of melanoma detection: A spectrophotometric analysis of theasymmetr y,border, color, and dimension, "Cancer", vol. 85, no. 1, pp. 72–77, January1999
- [2]. Pehamberger H, Binder M, Steiner A, Wolff K.

 "In vivo epiluminescence microscopy: improvement of early diagnosis of melanoma." J
 Invest Dermatol,100:356S–62S.1,993.
- [3]. G.Argenziano, H. Soyer, S. Chimenti, R. Talamini, R. Corona, F. Sera, and M. Binder, " Dermoscopy of pigmented skin lesions: Results

- of consensus meeting via the Internet Journal of the American Academy of Dermatology", vol. 48, pp. 679–693, 2003.
- [4]. R. Garnavi, "Computer-aided diagnosis of melanoma", Ph.D. dissertation, University of Melbourne, Australia, 2011.
- [5]. M.E. Celebi, H. Iyatomi, G. Schaefer, and W. V. Stoecker, "Lesion border detection in dermoscopy images Computerised Medical Imaging and Graphics", vol. 33, no. 2, pp. 148–153, 2009.

Cite this article as:

V. Supraja, G. Gayathri, K. Thanuja, K. Harshitha, M. N. Sasikala, "Skin Cancer Detection Using GLCM and ABCD Parameter", International Journal of Scientific Research in Science, Engineering and Technology (IJSRSET), Online ISSN: 2394-4099, Print ISSN: 2395-1990, Volume 7 Issue 3, pp. 233-239, May-June 2020. Available at

doi : https://doi.org/10.32628/IJSRSET207352 Journal URL : http://ijsrset.com/IJSRSET207352