A Detailed Review on CT & X-Ray Images Using Deep Learning Techniques

Sakshi Ashtputre¹, Prof. Vijay Prakash Sharma²

¹Dept of Computer Science & Engineering ²Assti Professor, Dept of Computer Science & Engineering ^{1, 2}ShriRam college of Engineering and Management, Banmore

Abstract- A significant number of individuals have died and are reported to be a pandemic of WHO (World Health Organization) after an outbreak of COVID19 (Coronavirus Disease 2019). Millions of individuals are afflicted and continue to get infected every day by this virus: the cost and the time needed for conventional reverse learning and deep learning methods. Interpretation of chest radiographs is important in identifying thoracic illnesses, like TB and lung cancer, impacting millions of individuals globally annually. In the case of fatigue-related diagnostic mistakes and the absence of diagnostic knowledge in regions in the globe where Radiologists are not accessible, these time-intensive tasks usually need experts to interpret the pictures. Therefore, several studies can be discovered in the literature to identify chest X-rays utilizing deep learning. This article provides an overview of deep learning technologies for chest x-rays of COVID-19 and pneumonia. Also, it presents a brief overview of CAD and dimension reduction. In addition, it defines data preprocessing with these denoising methods or approaches. At last, it described the introduction of machine learning and its techniques.

Keywords- Covid-19 Detection, Computer-Aided Detection, Dimension Reduction, Gender Voice Prediction, Machine Learning, Deep Learning.

I. INTRODUCTION

COVID-19, which started on 31 December 2019, has rapidly developed into a pandemic by reporting unexplained pneumonia reasons in Wuhan, Hubei province, China. The name of the illness is COVID-19, and the name of the virus is SARS-CoV-2. This novel disease travelled to much of China in just 30 days from Wuhan. The USA reported the initial seven cases on 20 January 2020 and had more than 300,000 by 5 April 2020. The majority of coronaviruses attack animals; however, due to their zoonotic nature, they can potentially infect people. SARS-CoV (SARS Coronavirus) and MERS-CoV(Middle East Coronavirus respiratory syndrome) were infected with humans, both of which resulted in severe respiratory illness and mortality. COVID-19 has cough, fever, headache, sore throat, muscular discomfort, fatigue, shortness of breath, and a characteristic clinical characteristic. A realtime reverse transcription-polymerase chain reaction is the most often utilized test technology presently for COVID-19 diagnosis (RT-PCR). The earliest radiological diagnosis and treatment of the illness has a crucial function for chest imagery like computed tomography (CT) and X-rays. The low sensitivity of RT-PCR of 60percent to 70percent enables signs to be found via radiological imaging, even if negative results are provided. According to the study, CT is a sensible technique for COVID-19 pneumonia detection also may be used along with RT-PRC as a screening tool. For a significant period after symptoms start, CT abnormalities are seen, with most patients having normal CT during the first 0-2 days. The most severe lung damage was found 10 days after the start of symptoms in research on lung CT of individuals living with COVID-19 pneumonia.[1]

The remaining paper is systematized as follows: section II gives a small introduction about automated detection of Covid-19. Section III elaborates a description of computeraided detection (CAD). It talks about dimension reduction in Section IV. Next, data preprocessing has been discussed in Section V with its denoising approaches. The overview of machine learning has given with these techniques in Section VI. Section VII provides a detailed overview of deep transfer learning architecture with CNN layers. Section VIII provides the related work. At last, Section IX concludes this work.

II. AUTOMATED DETECTION OF COVID-19

Although CT scans help identify the lung damage caused by COVID-19, there are certain disadvantages in utilizing this diagnostic method. In certain individuals, Chest CT scans are normal at the beginning of the illness, despite a WHO recommendation, which makes CT alone a poor forecast of the development of the illness. The poor specificities of a CT scan may make non-COVID-19 instances difficult to identify. In addition, CT-scanner radiation may provide difficulties for individuals who require numerous CT scans throughout their diseases. According to the American College of Radiology, CT scans cannot be utilized as 1st diagnostic line. Concerns like the danger of disease transmission and its high cost may create severe problems in patients and healthcare systems using CT scan equipment, which means that if medical imaging is necessary, CT scans are substituted by CXR radiography. [2]. X-ray is considerably wider and cheaper than traditional diagnostic examinations. Since a digital x-ray picture is not necessary from access to analysis, the diagnostic procedure may be finished quickly. Radiographs are simple and fast for the medical triage of patients. In contrast to CT scans, X-ray imaging needs less scarce and costly devices, and substantial operating savings may be achieved. The use of portable CXR equipment may aid decrease the risk of infection in hospitals in separate rooms. [3][4]. Numerous studies have demonstrated that CXR diagnostics are ineffectual and differentiate among COVID-19 also other types of pneumonia. Radiologists cannot identify pleural effusion and estimate the number of X-rays involved. It has certain benefits, however, despite the poor precision of COVID-19 X-ray diagnosis. [5]. Various research on the application of deep learning (DL) has been performed in the analysis of radiological pictures to overcome the constraints of COVID-19 radiological testing pictures [6].



Figure 1.Schematic representation for the prediction of normal (healthy), COVID-19, bacterial & viral pneumonia patients.

CT has modified diagnostic decision-making since its inception in the 1970s. The results were better procedures, detection and treatment of cancer, post-injury care, serious therapy for trauma, stroke and heart treatment. CT offers several benefits over other imaging methods because it can be done within minutes and is readily accessible, which enables doctors to confirm or exclude a diagnosis more confidently. It has had a major effect on the surgical sector, decreasing the need for surgery from 13% to 5% and virtually eliminating many explorations of surgical procedures. The extensive use of CT has been discovered in clinical practice that decreases patients who have to be hospitalized. The continuous technical developments in CT have made the imaging method even more attractive, improving spatial resolution and shorter scanning time, resulting in wide range of clinical applications [7]

Doctors use X-rays as an effective medical tool. Xrays are ionized forms of radiation that use rays to capture an image. The doctor discovered that a detailed image of the patient's body could not be acquired. Thus, several technologies such as MRI or CT scans, which are more expensive, are used to view the detailed information. X-ray scans only show bones and provide no medical information about organs or tissues. MRI and CT scans can reveal more information about the bones than regular X-rays. A CT scan can provide a 3-D image of bone structures, whereas an X-ray can only create a 2-D image. However, MRI and CT scans are more expensive, and patients cannot pay them. As a result, digital x-ray technology is a viable option for x-rays that display a three-dimensional digital image structure. Many factors add to a poor X-ray image outcome, including external and internal causes, such as insufficient equipment, operator error, patient abnormality, and others. This can result in a lack of detail in X-ray images and low contrast and brightness. As a result, we must improve the X-ray image's quality in comparison to the prior one. Histogram equalization, for example, can be used to allow for uniform illumination, adjusting grey levels for reduced noise, and applying Highpass filters to clarify details, among other things.[8].

III. COMPUTER-AIDED DETECTION (CAD) SYSTEMS

CAD is most beneficial when it can detect lung cancer in people at greater risk but do not have disease-related symptoms, indicating that tumour is discovered at an early stage and has a better prognosis. CR, used examination tool in medical practice, gives effective clinical utility in disease diagnosis. As a result, biggest topic in medical imaging research is the automatic identification of chest illness using chest radiography. The study undertakes a comprehensive survey of CAD systems based on clinical applications, focusing on AI technology used in CR.

The first attempt to create a CAD system was in 1960s (LODWICK, KEATS, & DORST, 1963), and studies have indicated that using an X-ray CAD system as an assistant improves detection accuracy for chest disease. Many commercial products, such as the CAD4 TB, Riverain, and Delft imaging systems, have been created for clinical use. [9]. Though due to complexity of CXR, automatic disease identification is still a work in progress, and most present CAD systems are focused on early detection of lung cancer. The automatic detection of different forms of diseases is the subject of a very small number of studies.

CAD is a tool in field of radiology that provides vital information for surgical purposes. Because of their importance, several computer vision approaches are processed to gain meaningful information from images acquired from imaging technologies, e.g., X-ray, MRI, & CT.



Figure 2: Computer-Aided Detection (CAD) System

IV. MACHINE LEARNING

ML is a computer science subfield that differs from conventional computer techniques. Algorithms are a collection of instructions created for analysis and resolution of problems by machines. On the other hand, machine learning methods enable computers, through statistical analysis, to learn on input data and generate values in a specified range. Consequently, machine learning makes developing models from sample data simpler for computers and simplifies decision making procedures based on actual inputs.

Machine Learning is extensively utilized in various technologies such as

- Prediction
- Speech Recognition
- Computer Vision
- Health diagnoses.

A. Machine Learning Approaches

- Decision tree: Decision trees are a very important and efficient method for classifying and prediction [10]. DTs are used ML strategy when compared to other approaches. "Decision tree learning is one of the most widely utilised and realistic methods of reasoning." A decision tree is a flowchart structure that resembles a tree. Each leaf node indicates the outcome, an inner node representing an attribute or function, and a branch representing a decision rule. In a decision tree, the root node is the highest. A decision tree divides itself based on the value of its attributes. It divides the tree in a repeated manner and this repetition is called recursive partitioning.
- 2) Random Forest: The random forest method may be utilised for issues of classification as well as regression. It is a supervised classification system

Page | 123

that creates a forest with many trees In general, the more trees there are in the forest, the more study it appears. It might also be stated that better no. of trees in forest, higher the accuracy of the outcomes. RF algorithms have numerous advantages. The classifier can handle missing values. For categorical variables, it can also simulate the RF classifier. When we employ the random forest approach in any classification task, the overfitting issues never arises. [11].

- 3) Support Vector Machine (SVM):SVMis a cuttingedge classification system established by Boser, Guyon, and Vapnik in 1992. SVMs fall within the umbrella of kernel approaches. A kernel technique is an method that only relies on data done dot-products. In this situation, the dot product can be substituted with a kernel function that computes a dot produce in hypothetically high-dimensional feature space[12].
- 4) K-Nearest Neighbours:KNN is an easy way to preserve all available instances and classify new cases using a similarity measure. KNN was used for the identification of statistics and patterns. KNN forecasts a new instance (x) by scanning for k most like instances entire training programme & summarizing outcome variable of those k cases.
- 5) Artificial Neural Networks: ANN are a class of methods for ML which mimic human brain. The ANN can learn from data, and provide answers in the form of predictions or categorization, since neurons may be learned from prior data. One significant advantage of ANN is that it learns from sample data sets. The most typical application of ANN is random function approximation. With these tools, one can arrive at solutions that cost-effectively specify the distribution. ANN can also deliver output results based on sample data rather than the complete dataset.

V. ARCHITECTURE OF DEEP TRANSFER LEARNING

The study in progress concentrates on using multiple DL techniques to combat the COVID-19 pandemic with an automated detection system for exact and quick decision making, as the self-scan or human scan of radiologic (X-ray) data of infected individuals takes a significant number of times. Numerous researches have shown that DL algorithms can enhance the rates of metric characteristics of CT scanning pictures & sensitivity & special characteristics of x-rays associated to diagnostic radiologists, so using this inexpensive & affordable method is a reliable diagnostic diagnostic COVID-19 method. In a number of instances of pneumonia,

particularly COVID-19, the identification of this illness utilizing DL algorithms under radiologist supervision demonstrated improved efficiency and decreased diagnostic mistakes. Computer-aided techniques and Computer-Aided Diagnosis (CAD) are gifts of computer era which reduces complications in medical image diagnosis. Advancement of CAD techniques like CNN, the deep neural network and auto encoders provide more for analyzing medical images. The extraction of one organ from another is a tough procedure for radiology in our body chest locks.[13].

Deep learning in machine learning is presently a prominent and interesting subject. DL is efficient, supervised, timely & cost-effective method to ML. The method learns deeply layered illustrative and differential characteristics. In a broad variety of applications, DL approaches have produced substantial performance improvements including important security solutions. It is considered as the best method to detect complex architecture using back propagation technique for high-dimensional data. A wide range of applications, including biological image gradient, computer vision, cancer detection, natural language processing, face recognition, and language recognition, have made significant progress and proved tremendous performance.

1) Convolutional Neural Networks (CNNs)

CNN is one of most significant DL methods and the most successful method to identify abnormalities and illnesses in chest radiographs. Much study has since the outbreak of COVID-19 on the processing of data associated with DL algorithms, especially CNN. CNNs were utilized extensively to simulate the human visual system for various computer vision applications. The majority of them are Convolutional layer, pooling layer& fully connected layer. Convolutional layers are used to encode local space data before going to FC layers in order to encode worldwide data. AlexNet, VGGNet, GoogLeNet, and ResNet are some of the most commonly used CNN models. There are few layers for Early CNN models like LeNet and AlexNet.

2) Autoencoder-based and Stacked Autoencoder Methods

A single hidden layer neural system with similar input is an autoencoder (AE) and output that is used to create a deep architecture called a stacked-autoencoder (SAE). Pretraining & fine-tuning are two phases of SAE model's training. At the pre-training step, an SAE is trained unsupervised layer by layer. Pretrained SAE model is supervised in the finishing phase using gradient descent and back-propagation methods.[14][15][16].

2) Recurrent Neural Networks (RNNs)

RNNs are kind of NN which learns input and context trends. An RNN may affect itself by repetitions by learning the results of previous iterations and by integrating them with current input to create an output. There are three sets of parameters in the RNN model:hidden weights U, hidden weights output V,&input to hidden weights W, weights distributed among position or time of input sequence.[17]

3) Deep Belief Networks (DBNs)

A deep network design constructed utilizing Boltzmann restricted cascades is referred to as a DBN (RBMs). A contrasting divergence technique is used to train an RBM to maximize the similarity among input and projection (in terms of likelihood). DBNs are probabilistic frameworks, since they utilize likelihood for avoiding degenerate solutions. A gradient descent and backpropagation methods like SAEs are used to teach DBNs without unsupervised utilizing layer-by-layer greedy learning approach, then fine-tuned. DBNs are created unsupervised using a greedy method of gradient descent and backpropagation, like SAEs, then improved using layer after layer learning.[18].

VI. DIMENSION REDUCTION

Dimension reduction allows for a reduced number of random variables or qualities that must be taken into account. Dimensional decrease is referred to as techniques for decreasing the number of input variables inside a dataset. The dimension curse refers to the notion that it is harder to model by putting more input functions to the predictive modelling activity. Life sciences have undergone a massive transformation with the rapid growth of high-tech and laboratory instrumentation over the last decade. For instance, with the arrival of whole genome sequences, the biological area has progressed significantly. This post-genomic age has led to new high-performance methods, generating enormous amounts of data and exponentially increasing numbers of biological databases. Often these datasets contain many more variables than observed. For instance, in dozens of samples, the typical data sets for microarrays often consist of a thousand variables (genes). This is not unique in biomedical research; there has been a rise in the number of variables investigated in one single experiment in many other scientific fields. Instances of this include image processing, mass spectrometry, analyses of time series, internet search engines and automated text analysis. If it comes to such highdimensional data, statistical and machine reasoning techniques are faced with a difficult task. Most algorithms in data mining

need to decrease the amount of input variables before effectively using them. The decrease in dimensionality can be achieved in two ways: by only maintaining the most significant features from original dataset (the technique of feature selection), or through the redundancy of the input data and by identifying a smaller set of new variables that are integrated with the input variables and essentially includes a same info as the input variables. (This is termed the decrease of dimensionality [19][20].

VII. DATA PRE-PROCESSING

Pre-processing data is one of most important steps before data analysis. Pre-processing is a process that is used to increase accuracy and interpretability. In computer-aided diagnostic systems, image pre-processing is a critical and difficult component. In medical image processing, preprocessing the image is critical to ensure that the segmentation and feature extraction algorithms operate properly. Accurate detection and segmentation of the tumour leads to the exact extraction of features and classification of those tumours. If an image is pre-processed according to picture size and quality, precise tumour segmentation is feasible. Due to the many noises from the raw pictures taken from the scan centre and web pages are not appropriate for immediate processing. It should thus be pre-processed before consideration. Preprocessing is a crucial stage for MRI, labelling, elimination, enhancement and segmentation of artefacts. The preprocessing includes translation, picture resizing, noise removal and quality improvement, and generates a picture of how details may be properly identified [21]. The next part will explain the numerous methods of preprocessing the data for various purposes.[20].

- Data cleansing: also called data scrubbing or data clean, is an also called data scrubbing or data clean, is a method of processing raw data that includes detecting errors, removing duplicated data, filling in blanks, and removing invalid data. Traditional data cleansing methods, in general, have limitations when processing large amounts of data, because input data may contain misspellings or invalid data due to human or machine error. As a result, studies seek to identify viable strategies or models for resolving the issues stated above and ensuring high-quality data acquisition.
- Noise Removal: Unwanted and irrelevant information in the acquired image will be removed in this step to improve the image's clarity. Numerous medical equipment or dissimilar kinds of scanners generate noise into medical images during the image acquisition stage. While capturing the picture in the

image acquisition phase, noise in the chosen picture is deemed an unwanted.

- **Image resizing:**This is essential stage in all medical image apps to growth or reduction, based on application, size of supplied picture in pixel format. Precise input picture scaling is essential in most IP applications, including face identification, fingerprint recognition, security,& microscopic imagery.
- **Image acquisition:**It is a method of obtaining an image from a variety of sources. In all medical image processing applications, image acquisition is the first step. An image acquisition step's goal is to convert an optical image into a set of numerical values that may then be modified in a computer system.
- **Image Normalization:** The normalization procedure changes the pixel intensity range. Also, histogram extension or contrast stretching is known as normalization. In several applications the purpose of dynamic range development has been to bring a picture or other kind of signal into a range known or normal for senses, hence the term normalization.

VIII. LITERATURE REVIEW

This section contains the literary background. It presents CT- & x-ray investigations via deep learning and machine learning methods by numerous investigators to computerized corona viral detection (COVID-19). Several techniques for identifying coronaviruses with computer help have been utilized.

In this paper, [22]propose an ACOS (Automated COVID Screening) technique which utilizes radiomic texture descriptors from CXR pictures to distinguish between normal, suspected, or NCOVID-19 people. This new proposal takes a two-stage classification method, using majority vote-based classifier ensemble composed of 5 benchmark supervised categorization approaches (normal vs. abnormal or nCOVID-19 vs. pneumonia). This ACoS system is trained, tested, and validated using a total of 2088 CXR images (696 normal, 696 pneumonia, and 696 nCOVID-19), as well as 258 (86 images from each group). For phase-I (ACC (Accuracy) = 98.062percent, AUC (Area UnderCurve) = 0.956) or phase-II (ACC (Accuracy) = 91.329 percent, AUC = 0.831) validation results indicate that proposed system works well. Friedman's post-hoc various comparisons and z-test statistics indicate that theACoS system's results are statistically significant. Finally, these results are compared to presently available state-of-the-art approaches.

This work [23]utilizes COVID-CT open-source data set from Petuum researchers from San Diego's University of California. They are gathered from 143 unique patients with coronavirus pneumonia and retain their respective characteristics. The whole dataset (containing original picture and improved picture) includes 1460 pictures. Of them, 1022 (70 percent) and 438 (30 percent) are utilized correspondingly to train and test the model's efficiency. The suggested prototype validates the accuracy of categorization in various layers & learning rates. It is also contrasted with most state-ofthe-art prototypes. It has been discovered that suggested method performs well in categorization. The relative sensitivity and specificity are 0.98, 0.96, 0.98 and 0.97, correspondingly, PPV (Positive Predictive Values), NPV (Negative Predictive Values) & precise.

This study [24]provides deep transmission learning prototype for COVID-19 detection in chest radiography which exceeds current state-of-the-art techniques. Original weights of developing DesneNet121 and emerging ResNet50 are transferred and the 2prototypeshave been fine tuned to 3 classes of COVID-19, Viral Pneumonia & normal radiograms using a deep data augmentation. On the sole accessible COVID-19 radiography dataset, the suggested models achieved 97.83% precision with low false-negative outcomes. The image-level accuracy (ILA) of findings outpatient with sensitivity and recall effectiveness above prior research outcomes. The presented techniques are also scalable and may be extended in the future to identify different kinds of illnesses and combined with additional CNNs to improve their capacity to generalize illnesses.

In this work[25]they propose network of DL to identifyCOVID19 in CXR pictures. Present architecture comprises medium adaptive filter, histograms equalization and a recurrent neural network. It has been fully trained with openly available data. It's available for purchase. Their model had a 98.62 percent binary categorization precision and a 95.77 percent multi categorization precision. This may help radiologists diagnose COVID19 because early detection can help reduce the transmission of the virus.

In this study, [26]efficiency of multi-CNN, a mixture of numerous pre-trained CNNs, is explored towards automatically recognize COVID-19 as of X-ray pictures. Method integrates characteristics found in the Multi CNN with Co-Relationship feature Selection Algorithm (CFS) as well as Bayesnet Classifier for COVID-19 prediction. Two publicly available datasets are utilized to test the method, with promising results. This technique obtained an AUC of 0.963 and an accuracy of 91.16 percent on the first dataset of 453 COVID 19 images and 497 non-COVID images. In the second data set, which contained 71 COVID-19 images or seven non-COVID images, the method obtained an AUC of 0.911 and an accuracy of 97.44 percent. Tests carried out in this research demonstrated the efficient identification of COVID-19 by pretraining multi-CNN over single CNN.

Their unique CNN efficacy[27] shown to diversity of well-known CNN architectures including ResNet, Inception-ResNet v2 &DenseNet via impactful, multi-path & hybrid CNN paradigms. Provided DL-CRC prototype adjusts to a production of synthetic COVID-19 pictures with a sick CXRdependsupon resilient model dependsupon generational network of adversaries and general radiation methods using radiographic (DARI) image radiation COVID-19. With the real training data & x-ray synthetic chest images they were able to obtain a 93.94 percent COVID-19 detection accuracy in DL-CRC compared to 54.54 per cent without an increase in data in their customized neural networks (CNN) (i.e., If in the real dataset, only few genuine examples of COVID-19 CXR pictures samples may be accessed). Excellent precision of their suggestion showed that in addition to the already available COVID-19 medical testing, COVID 19 may be rapidly mechanized for X-ray detection and therefore simply and rapidly verified COVID-19 disease.

They used [28]x-ray imaging to train the VGG model on the new covid-19 illness CNN. This study calls for the wider app of artificial intelligence, notably in disease prediction and information transfer. The Internet of Things enables this idea to be used and enhanced in actual-time settings, such as collecting X-rays for probable Covid-19 patients right away and predicting them more accurately. They developed the VGG model, which may be used with a variety of transmission technologies. They had a success rate of 99 % to identify COVID19, and also a success rate of 98 percent to detect pneumonia and chest x rays.

In this paper[29]the novel CT image denoisation method is implemented via GAN(Generative Adversarial Network) with Wasserstein distance and perceptive similar. Wasserstein distance is an important concept in the best transport theory that may enhance the GAN's efficiency. Perceptual loss lowers noise by contrasting perceptual characteristics of denoted output to those in ground truth in given space. In contrast, GAN mainly concentrates on statistical migration from strong to weak data noise distribution. Tasan outcome, the proposed method thus uses your visual perception expertise to the issue of image degeneration. It is able not only to decrease noise of images but also to maintain important information. They discovered encouraging outcomes in their experiments utilizing clinical CT images.

IX. CONCLUSION

The new Coronavirus Disease (COVID-19) became very infectious through human contact in late 2019 and eventually turned into a pandemic in 2020. The COVID-19 pandemic has challenged the scientific community to encourage forward-looking research on disease prevention by investigating several study modes. The research showed that CT must be examined after CXR for big number of patients suffering with suspected COVID-19 pneumonia, which may cause impairment in the lack of established criteria for diagnostic work-ups. The number of cases with COVID-19 is growing each day. The current system of medicine collapses. The automated techniques may help to identify cases of COVID-19 at initial stage and prevent spread of viruses. From ground up, the DNN architecture is developed. This research has a drawback when a limited dataset is used. More COVID-19 and other samples of lung illnesses are necessary for validating machine learning & deep learning techniques. This article has sought to examine deep literature structures relevant to the diagnosis of COVID-19.

REFERENCES

- [1] T. Ozturk, M. Talo, E. A. Yildirim, U. B. Baloglu, O. Yildirim, and U. Rajendra Acharya, "Automated detection of COVID-19 cases using deep neural networks with X-ray images," *Comput. Biol. Med.*, 2020, doi: 10.1016/j.compbiomed.2020.103792.
- [2] E. S. Amis *et al.*, "American College of Radiology White Paper on Radiation Dose in Medicine," *J. Am. Coll. Radiol.*, 2007, doi: 10.1016/j.jacr.2007.03.002.
- [3] E. Baratella *et al.*, "Severity of lung involvement on chest x-rays in sars-coronavirus-2 infected patients as a possible tool to predict clinical progression: An observational retrospective analysis of the relationship between radiological, clinical, and laboratory data," *J. Bras. Pneumol.*, 2020, doi: 10.36416/1806-3756/e20200226.
- [4] G. D. Rubin *et al.*, "The role of chest imaging in patient management during the covid-19 pandemic: A multinational consensus statement from the fleischner society," *Radiology*, 2020, doi: 10.1148/radiol.2020201365.
- [5] A. M. Tahir *et al.*, "A systematic approach to the design and characterization of a smart insole for detecting vertical ground reaction force (vGRF) in gait analysis," *Sensors (Switzerland)*, 2020, doi: 10.3390/s20040957.
- [6] M. Ghaderzadeh and F. Asadi, "Deep Learning in the Detection and Diagnosis of COVID-19 Using Radiology Modalities: A Systematic Review," *Journal of Healthcare Engineering*. 2021, doi: 10.1155/2021/6677314.

- [7] S. P. Power, F. Moloney, M. Twomey, K. James, O. J. O'Connor, and M. M. Maher, "Computed tomography and patient risk: Facts, perceptions and uncertainties," *World J. Radiol.*, 2016, doi: 10.4329/wjr.v8.i12.902.
- [8] M. N. Aziz, T. W. Purboyo, and A. L. Prasasti, "A survey on the implementation of image enhancement," *Int. J. Appl. Eng. Res.*, 2017.
- [9] A. N. Zakirov, R. F. Kuleev, A. S. Timoshenko, and A. V. Vladimirov, "Advanced approaches to computer-aided detection of thoracic diseases on chest X-rays," *Appl. Math. Sci.*, 2015, doi: 10.12988/ams.2015.54348.
- [10] S. K. Himani Sharma, "A Survey on Decision Tree Algorithms of Classification in Data Mining," *Int. J. Sci. Res.*, 2016, doi: 10.21275/v5i4.nov162954.
- [11] B. E. Boser, I. M. Guyon, and V. N. Vapnik, "Training algorithm for optimal margin classifiers," 1992, doi: 10.1145/130385.130401.
- [12] D. G. R., Et. al., "Revelation of Diabetics by Inadequate Balanced SVM," *Turkish J. Comput. Math. Educ.*, 2021, doi: 10.17762/turcomat.v12i2.2084.
- [13] V. T. #1 and R. Roselin, "Survey on Lung Segmentation in Chest X-Ray Images," vol. XI, no. 795, pp. 795–801, 2019.
- [14] G. E. Hinton and R. R. Salakhutdinov, "Reducing the dimensionality of data with neural networks," *Science* (80-.)., 2006, doi: 10.1126/science.1127647.
- [15] C. Y. Liou, W. C. Cheng, J. W. Liou, and D. R. Liou, "Autoencoder for words," *Neurocomputing*, 2014, doi: 10.1016/j.neucom.2013.09.055.
- [16] D. Maji, A. Santara, S. Ghosh, D. Sheet, and P. Mitra, "Deep neural network and random forest hybrid architecture for learning to detect retinal vessels in fundus images," 2015, doi: 10.1109/EMBC.2015.7319030.
- [17] T. Mikolov, M. Karafiát, L. Burget, C. Jan, and S. Khudanpur, "Recurrent neural network based language model," 2010, doi: 10.21437/interspeech.2010-343.
- [18] O. Vinyals, A. Toshev, S. Bengio, and D. Erhan, "Show and Tell: Lessons Learned from the 2015 MSCOCO Image Captioning Challenge," *IEEE Trans. Pattern Anal. Mach. Intell.*, 2017, doi: 10.1109/TPAMI.2016.2587640.
- [19] V. L. Chetana, S. S. Kolisetty, and K. Amogh, "A Short Survey of Dimensionality Reduction Techniques," in *Recent Advances in Computer Based Systems, Processes* and Applications, 2020.
- [20] Z. Guan, T. Ji, X. Qian, Y. Ma, and X. Hong, "A survey on big data pre-processing," 2017, doi: 10.1109/ACIT-CSII-BCD.2017.49.
- [21] S. Perumal and T. Velmurugan, "Preprocessing by Contrast Enhancement Techniques for Medical Images," *Int. J. Pure Appl. Math.*, 2018.
- [22] T. B. Chandra, K. Verma, B. K. Singh, D. Jain, and S. S. Netam, "Coronavirus disease (COVID-19) detection in

Chest X-Ray images using majority voting based classifier ensemble," *Expert Syst. Appl.*, 2021, doi: 10.1016/j.eswa.2020.113909.

- [23] L. Fang and X. Wang, "COVID-19 deep classification network based on convolution and deconvolution local enhancement," *Comput. Biol. Med.*, 2021, doi: 10.1016/j.compbiomed.2021.104588.
- [24] Y. Yari, T. V. Nguyen, and H. Nguyen, "Accuracy Improvement in Detection of COVID-19 in Chest Radiography," 2020, doi: 10.1109/ICSPCS50536.2020.9310066.
- [25] S. Lafraxo and M. El Ansari, "CoviNet: Automated COVID-19 detection from X-rays using deep learning techniques," 2020, doi: 10.1109/CiSt49399.2021.9357250.
- [26] B. Abraham and M. S. Nair, "Computer-aided detection of COVID-19 from X-ray images using multi-CNN and Bayesnet classifier," *Biocybern. Biomed. Eng.*, 2020, doi: 10.1016/j.bbe.2020.08.005.
- [27] S. Sakib, T. Tazrin, M. M. Fouda, Z. M. Fadlullah, and M. Guizani, "DL-CRC: Deep learning-based chest radiograph classification for covid-19 detection: A novel approach," *IEEE Access*, 2020, doi: 10.1109/ACCESS.2020.3025010.
- [28] D. Haritha, C. Praneeth, and M. K. Pranathi, "Covid prediction from x-ray images," 2020, doi: 10.1109/ICCCS49678.2020.9276795.
- [29] Q. Yang et al., "Low-Dose CT Image Denoising Using a Generative Adversarial Network With Wasserstein Distance and Perceptual Loss," *IEEE Trans. Med. Imaging*, 2018, doi: 10.1109/TMI.2018.2827462.