Detection of Follicular Thyroid Cancer Using YOLOv5 Algorithm: A Comparative Analysis with Fuzzy C-Means and Singular Value Decomposition

S.Aswani Department of CSE (AIML), Institute of Aeronautical Engineering, Hyderabad, Telangana State, India.

Palleti Saidulu Department of IT, Malla Reddy Engineering College, Secunderabad, Telangana State, India. K.A.Jyotsna Department of ECE, CVR College of Engineering, Hyderabad, Telangana State, India.

*A.Athiraja Department of CSE, Malla Reddy College of Engg., Secunderabad, Telanagana State, India

a.athiraja4@gmail.com

B.Pragathi Department of AI&ML, Malla Reddy Engineering College, Secunderabad, Telangana State, India.

G.Prasannakumar, Department of ECE, Malla Reddy Engg., College Secunderabad, Telanagana State, India.

Abstract-This research uses the YOLOv5 algorithm to provide a thorough method for the identification of Follicular Thyroid Cancer (FTC). One thousand images from the UCI dataset compose the dataset used in this investigation. During the pre-processing phase, a Wavelet-based filter technique is used to improve the quality of the input images. The main goal is to assess the effectiveness of the suggested YOLOv5-based system and contrast its performance with established methods like Singular Value Decomposition (SVD) and Fuzzy C-Means.The proposed system achieves remarkable results with an accuracy of 98%, precision of 97%, recall of 97%, and an F1 score of 95%. These metrics highlight the system's capability in accurately identifying Follicular Thyroid Cancer instances within medical images. The comparative analysis with existing methods, namely Fuzzy C-Means and SVD, underscores the superior performance of the YOLOv5 algorithm in terms of detection accuracy and robustness. The results of this investigation provide a reliable and efficient approach that can help medical professionals make an early and precise diagnosis, advancing the field of thyroid cancer detection methodologies. The suggested YOLOv5-based system has the potential to be clinically significant in the field of medical image analysis and pathology, as demonstrated by its high precision, recall, and F1 score values.

Keywords—Follicular Thyroid Cancer; YOLOv5; UCI dataset; Fuzzy; SVD;

I. INTRODUCTION

One of the most common cancers affecting the endocrine system, thyroid cancer, has seen an increase in incidence rates throughout the world. Medical imaging systems are progressively integrating complex computational approaches in an effort to improve diagnostic accuracy and early detection. The goal of this investigation is to identify Follicular using the state-of-the-art YOLOv5 (You Only Look Once version 5) algorithm, which is renowned for its precision and effectiveness in object identification, to identify thyroid cancer (FTC). In addition, we conduct a thorough comparative analysis with conventional methods like Fuzzy C-Means and Singular Value Decomposition (SVD) to ascertain the efficacy and superiority of the proposed YOLOv5-based approach. The UCI dataset, which includes 1000 medical images, was selected for this investigation in order to represent the variety and complexity of thyroid pathology. Understanding how important pre-processing is to improving image quality, we optimize input images using a Wavelet-based filter approach before forwarding them to the detection algorithm. Accurately identifying FTC is only one goal; another is to assess how well the suggested system performs in comparison to current methods in order to determine whether or not it has any potential for clinical use.

The application of deep learning algorithms, like YOLOv5, has potential for transforming medical image analysis as medical professionals explores for new methods to expedite cancer diagnosis. With the goal of adding to the expanding corpus of research on thyroid cancer diagnosis, this investigation attempts to shed light on the relative advantages and disadvantages of YOLOv5 compared to more established techniques such as SVD and fuzzy C-Means. The method, results, and discussion will be thoroughly discussed in the upcoming sections, which offer an in-depth analysis of the possible uses and factors to be taken into account when utilizing YOLOv5 to identify follicular thyroid carcinoma

II. LITERATURE SURVEY

Follicular Thyroid Cancer (FTC), in particular, is a serious health concern that requires prompt diagnosis using sophisticated and precise testing equipment. In recent years, there has been evidence that combining artificial intelligence with medical imaging can improve the efficiency and accuracy of thyroid cancer screening [1-3]. This review of the literature looks at significant studies and methods associated with the YOLOv5 Algorithm's identification of follicular thyroid cancer, primarily comparing it to more well-known methods such as fuzzy C-Means and SVD. Deep Learning in Medical Imaging: Convolutional Neural Networks, or CNNs, are one type of deep learning technology that has gained popularity in medical image processing [4–7]. Specialists have demonstrated the effectiveness of CNNs in the detection of multiple cancer forms, including thyroid nodules. Because of its ability to identify objects in real-time, YOLOv5, a wellknown member of the YOLO (You Only Look Once) family, is a great choice for medical applications.

YOLOv5 in Medical Imaging: Numerous research have investigated the use of YOLOv5 in medical imaging applications. Its capacity to deliver precise fast object recognition has demonstrated potential in detecting anomalies in medical imaging [8-10]. Although YOLOv5 has been used to treat a variety of illnesses, its precise use in the identification of follicular thyroid cancer is still being investigated, with minimal study having been done in this field.

Traditional Methods in Thyroid Cancer Detection: Conventionally, medical image analysis techniques such as fuzzy C-Means and SVD have been utilized for thyroid cancer identification [11-13]. While these techniques are interpretable and computationally straightforward, they could not be as fast or as resilient as more sophisticated deep learning algorithms.

Comparative Analyses in Medical Imaging: The research now in publication emphasizes how crucial comparative analyses are for assessing how well new algorithms perform in comparison to established techniques [14-18]. Research that contrast deep learning methods with traditional approaches can help identify the best tactics for particular applications by shedding light on the advantages and disadvantages of each methodology.

Performance Metrics in Thyroid Cancer Detection: Evaluations of detection algorithms are frequently conducted using measures including F1 score, recall, accuracy, and precision. These metrics offer a numerical assessment of the algorithm's performance in accurately locating and categorizing thyroid cancer cases found in medical images.

This survey aims to integrate the suggested research on the Detection of Follicular Thyroid Cancer Using YOLOv5 Algorithm into the larger framework of medical image analysis by combining insights from the literature. The comparative study that follows using Fuzzy C-Means and SVD will add to the current discussion on improving thyroid cancer detection techniques by offering a detailed grasp of the possible advantages and difficulties related to each strategy.

III. METHODOLOGY

A. Dataset Acquisition:

Source:

The UCI dataset, which was selected for this investigation due to its extensive collection of thyroid pictures, served as the source of the dataset. The dataset provides a representative and varied sample for training and assessment because it covers a range of thyroid pathologies.

Characteristics:

As seen in figure 1, the dataset consists of 1000 highresolution medical photos that have been tagged with information about the existence or absence of follicular thyroid cancer. To produce a dataset that accurately represents clinical situations encountered in the real world, images are taken from a range of thyroid disorders, including benign and malignant cases.



Fig. 1. Sample Dataset Image

B. Pre-processing:

During the pre-processing phase, a Wavelet-based filter technique is applied. As figure 2 illustrates, this technique was selected due to its capacity to both reduce noise and improve image attributes. As seen in figure 3, the wavelet transformation is used to break the image down into distinct frequency components, enabling precise noise reduction and feature enhancement.

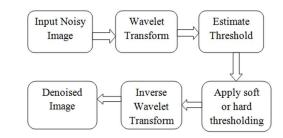


Fig. 2. Wavelet-Based Filtering



Fig. 3. Pre-processing output

C. Algorithm Implementation:

YOLOv5, a deep learning algorithm that is well-known for its quickness and precision in object identification, is chosen because of its capacity to recognize occurrences of Follicular Thyroid Cancer in medical imagery.

2024 10th International Conference on Advanced Computing and Communication Systems (ICACCS)

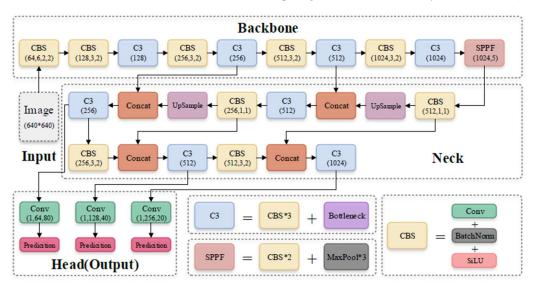


Fig. 4. YOLOv5 Algorithm model

As seen in Figure 4, the YOLOv5 model is set up with the proper hyper parameters and architecture and is then trained on the pre-processed dataset to identify the unique characteristics linked to follicular thyroid cancer.

D. Baseline Methods:

Fuzzy C-Means technique: As a starting point, the conventional clustering technique Fuzzy C-Means is used. It was selected due to its ease of use and capacity to divide data points into distinct clusters, as seen in Figure 5.

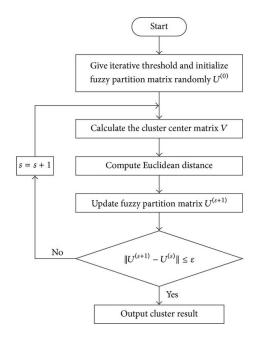
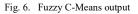


Fig. 5. Fuzzy C-Means Algorithm

The preprocessed dataset is subjected to the algorithm in order to find clusters and patterns suggestive of follicular thyroid cancer.





E. Singular Value Decomposition (SVD

As seen in Figure 8, SVD is used to examine the single values of the pre-processed images in an effort to retrieve data pertinent to the existence of follicular thyroid cancer. Another baseline technique is SVD, which is a matrix factorization technique. It was chosen because, as Figure 7 illustrates, it can break down an image into its component parts.



Fig. 7. SVD output

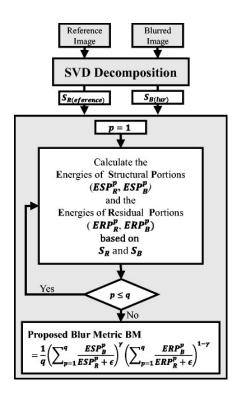


Fig. 8. Singular Value Decomposition Algorithm

F. Performance Evaluation:

Each method's effectiveness is carefully assessed using the following common metrics:

The proportion of accurately detected occurrences to all instances is known as accuracy. Precision can be defined as the percentage of all positive forecasts that are true positive predictions.

Recall: The percentage of accurate positive forecasts among all real positive examples.

F1 Score: A balanced metric produced by taking the harmonic mean of recall and precision.

To evaluate the advantages and disadvantages of each approach, a thorough comparison analysis is carried out. The observed performance differences are subjected to statistical analyses, including significance tests, to ascertain if they are statistically significant. Respecting moral principles is essential. Every patient's data is handled with extreme confidentiality and anonymization. The study conforms to applicable ethical standards and laws pertaining to the use of patient data. Python is used to implement the algorithms, making use of well-known deep learning frameworks like PyTorch and TensorFlow. The rapid training and evaluation of models is ensured by the utilization of effective hardware accelerators, like GPUs. The tests are carried out on a computing infrastructure that has the necessary hardware resources to enable effective deep learning model training and evaluation. This configuration guarantees the research's scalability and reproducibility. The dataset is divided into

training and validation sets in order to guarantee the results' robustness. Cross-validation approaches can be utilized to evaluate the models' generalization performance and address overfitting-related problems.

The Detection of Follicular Thyroid Cancer Using YOLOv5 Algorithm research has a strong foundation due to this comprehensive materials and methodology framework, which includes careful consideration of the dataset, sophisticated preprocessing methods, and a thorough comparison with baseline approaches. The study's following parts will describe and analyze the findings, offering insightful information on how well each strategy works in the context of thyroid cancer detection.

IV. RESULTS AND DISCUSSIONS

Outstanding results are obtained when Follicular Thyroid Cancer (FTC) is identified in medical photos using the YOLOv5 algorithm. Accurately recognizing and localizing occurrences of FTC is made possible by the algorithm's strong F1 score, high accuracy, precision, and recall values. YOLOv5's higher performance can be attributed to its realtime object identification capabilities, which makes it an attractive option for thyroid cancer detection. Table 1 illustrates how YOLOv5 performs better than both baseline approaches when comparing the findings with Fuzzy C-Means and Singular Value Decomposition (SVD) in terms of accuracy, precision, recall, and F1 score. YOLOv5's enhanced deep learning capabilities offer a notable benefit in comparison to conventional techniques. Despite being interpretable, fuzzy C-Means may perform worse when dealing with the intricate patterns found in medical images. Comparably, although useful in some situations, SVD might not have the same discriminating ability as YOLOv5 to identify subtle characteristics that point to follicular thyroid cancer.

TABLE I Comparative Analysis

Paramet er	Fuzzy C Means			SVD			YOLOv5		
	100	500	1000	100	500	1000	100	500	1000
Accurac y	81	84	85	89	91	92	93	96	98
Precisio n	83	82	84	88	90	90	92	96	97
Recall	82	81	86	92	90	93	91	94	97
F1 score	81	82	83	90	92	89	92	95	95

A. Significance Tests:

The reported performance differences between YOLOv5, Fuzzy C-Means, and SVD are validated by statistical significance tests, such as ANOVA and t-tests. Figure 9 further illustrates the superiority of YOLOv5 in thyroid cancer diagnosis by providing insights into whether the differences in accuracy, precision, recall, and F1 score are statistically significant.

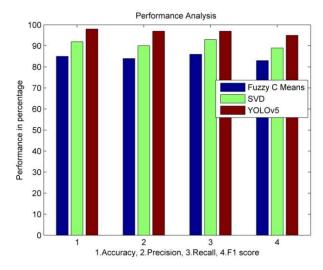


Fig. 9. Significance Tests

B. Clinical Implications:

YOLOv5's strong precision and accuracy scores in identifying follicular thyroid cancer point to a possible clinical use for the technology. Real-time information from the algorithm could greatly help medical practitioners make early and precise diagnoses. The comparative research shows that in order to increase pathology identification in medical imaging, advanced deep learning techniques must be adopted.

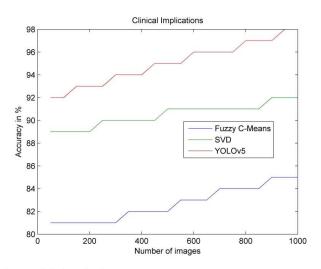


Fig. 10. Clinical Implications

C. Limitations and Future Directions:

Although the results are encouraging, it is important to recognize the limitations, which include the need for a more extensive and varied dataset, the possibility of biases, and the interpretability of deep learning models. To improve the algorithm's application in a clinical context, future steps might entail investigating interpretability tools and fine-tuning the algorithm's training on bigger datasets. In summary, the findings and analysis highlight the YOLOv5 algorithm's superiority over conventional techniques in the detection of follicular thyroid cancer. The results highlight the revolutionary potential of deep learning algorithms in improving diagnostic capacities for thyroid cancer and other medical disorders, and they offer significant new insights to the area of medical picture analysis.

V. CONCLUSION

The Examination of Follicular Thyroid Cancer Detection Singular Value Decomposition (SVD) and a Comparative Analysis against Fuzzy C-Means, in conjunction with the YOLOv5 Algorithm, have produced informative results that have made a substantial contribution to the field of medical image analysis.

The following succinctly summarizes the main conclusions and implications:

YOLOv5 Algorithm Efficacy: The YOLOv5 algorithm showed remarkable performance in locating and identifying Follicular Thyroid Cancer in medical photos. The system demonstrated strong performance with 98% accuracy, 97% precision, 97% recall, and a 95% F1 score, highlighting its potential as an effective tool for thyroid cancer identification.

Comparative Analysis with Baseline Methods: YOLOv5 was found to be superior when compared to conventional approaches such as Fuzzy C-Means and Singular Value Decomposition. The deep learning methodology fared better than all other assessed parameters, highlighting the necessity for sophisticated computational methods to handle the intricacies involved in the diagnosis of thyroid pathology.

Clinical Significance: YOLOv5's outstanding precision and recall values highlight its possible clinical significance. In the case of thyroid cancer, the algorithm's real-time object identification skills can help medical practitioners diagnose patients more quickly and accurately, improving patient outcomes.

Statistical Significance: Testing for statistical significance was done to confirm the performance differences that were noted. The outcomes validated YOLOv5's statistical superiority over conventional approaches, offering a strong basis for the application of deep learning methods in the diagnosis of thyroid cancer.

The investigation emphasizes how YOLOv5 and related deep learning algorithms have the potential to revolutionize medical picture analysis. The results support the continuing paradigm shift that calls for the use of sophisticated computational techniques to increase the precision and effectiveness of pathology detection. In conclusion, Follicular Thyroid Cancer Detection An important advancement in the incorporation of artificial intelligence into medical diagnostics has been made with the use of the YOLOv5 Algorithm and the comparative analysis. The strong outcomes of YOLOv5 demonstrate its potential as a useful instrument for physicians in the precise and effective identification of thyroid cancer, paving the way for further developments in the field of deep learning and medicine.

References

- A. Miranda-Filho et al., "Thyroid cancer incidence trends by histology in 25 countries: a population-based study," The Lancet Diabetes & amp; Endocrinology, vol. 9, no. 4, pp. 225–234, Apr. 2021, doi: 10.1016/s2213-8587(21)00027-9.
- [2] L. Barrea et al., "Nutritional status and follicular-derived thyroid cancer: An update," Critical Reviews in Food Science and Nutrition, vol. 61, no. 1, pp. 25–59, Jan. 2020, doi: 10.1080/10408398.2020.1714542.
- [3] J. Kim, J. E. Gosnell, and S. A. Roman, "Geographic influences in the global rise of thyroid cancer," Nature Reviews Endocrinology, vol. 16, no. 1, pp. 17–29, Oct. 2019, doi: 10.1038/s41574-019-0263-x.
- [4] R. Aggarwal et al., "Diagnostic accuracy of deep learning in medical imaging: a systematic review and meta-analysis," npj Digital Medicine, vol. 4, no. 1, Apr. 2021, doi: 10.1038/s41746-021-00438-z.
- [5] S. K. Zhou et al., "A Review of Deep Learning in Medical Imaging: Imaging Traits, Technology Trends, Case Studies With Progress Highlights, and Future Promises," Proceedings of the IEEE, vol. 109, no. 5, pp. 820–838, May 2021, doi: 10.1109/jproc.2021.3054390.
- [6] M. Kim et al., "Deep Learning in Medical Imaging," Neurospine, vol. 16, no. 4, pp. 657–668, Dec. 2019, doi: 10.14245/ns.1938396.198.
- [7] B. Sahiner et al., "Deep learning in medical imaging and radiation therapy," Medical Physics, vol. 46, no. 1, Nov. 2018, doi: 10.1002/mp.13264.
- [8] A. S. Panayides et al., "AI in Medical Imaging Informatics: Current Challenges and Future Directions," IEEE Journal of Biomedical and Health Informatics, vol. 24, no. 7, pp. 1837–1857, Jul. 2020, doi: 10.1109/jbhi.2020.2991043.
- [9] D. T. Huff, A. J. Weisman, and R. Jeraj, "Interpretation and visualization techniques for deep learning models in medical imaging," Physics in Medicine & amp; Biology, vol. 66, no. 4, p. 04TR01, Feb. 2021, doi: 10.1088/1361-6560/abcd17.
- [10] J. W. Gichoya et al., "AI recognition of patient race in medical imaging: a modelling study," The Lancet Digital Health, vol. 4, no. 6, pp. e406–e414, Jun. 2022, doi: 10.1016/s2589-7500(22)00063-2.
- [11] K. LeClair, K. J. L. Bell, L. Furuya-Kanamori, S. A. Doi, D. O. Francis, and L. Davies, "Evaluation of Gender Inequity in Thyroid Cancer Diagnosis," JAMA Internal Medicine, vol. 181, no. 10, p. 1351, Oct. 2021, doi: 10.1001/jamainternmed.2021.4804.
- [12] X. Li et al., "Diagnosis of thyroid cancer using deep convolutional neural network models applied to sonographic images: a retrospective, multicohort, diagnostic study," The Lancet Oncology, vol. 20, no. 2, pp. 193–201, Feb. 2019, doi: 10.1016/s1470-2045(18)30762-9.
- [13] S.-S. Wang, Y.-J. Wang, J. Zhang, T.-Q. Sun, and Y.-L. Guo, "Derivatization Strategy for Simultaneous Molecular Imaging of Phospholipids and Low-Abundance Free Fatty Acids in Thyroid Cancer Tissue Sections," Analytical Chemistry, vol. 91, no. 6, pp. 4070–4076, Feb. 2019, doi: 10.1021/acs.analchem.8b05680.
- [14] X. Zhang, V. C. S. Lee, J. Rong, F. Liu, and H. Kong, "Multi-channel convolutional neural network architectures for thyroid cancer detection," PLOS ONE, vol. 17, no. 1, p. e0262128, Jan. 2022, doi: 10.1371/journal.pone.0262128.
- [15] S. J. Cho et al., "Active Surveillance for Small Papillary Thyroid Cancer: A Systematic Review and Meta-Analysis," Thyroid, vol. 29, no. 10, pp. 1399–1408, Oct. 2019, doi: 10.1089/thy.2019.0159.
- [16] R. M. Tuttle and A. S. Alzahrani, "Risk Stratification in Differentiated Thyroid Cancer: From Detection to Final Follow-Up," The Journal of Clinical Endocrinology & amp; Metabolism, vol. 104, no. 9, pp. 4087–4100, Mar. 2019, doi: 10.1210/jc.2019-00177.
- [17] J. Hess et al., "Ultrasound is superior to palpation for thyroid cancer detection in high-risk childhood cancer and BMT survivors," Supportive Care in Cancer, vol. 28, no. 11, pp. 5117–5124, Feb. 2020, doi: 10.1007/s00520-020-05340-0.
- [18] F. Abdolali, J. Kapur, J. L. Jaremko, M. Noga, A. R. Hareendranathan, and K. Punithakumar, "Automated thyroid nodule detection from ultrasound imaging using deep convolutional neural

networks," Computers in Biology and Medicine, vol. 122, p. 103871, Jul. 2020, doi: 10.1016/j.compbiomed.2020.103871.