

“Brain Tumor and Alzheimer’s Detection”

**Dr. Madhan Kumar G S¹, Dr. Mahadev Prasad Y N², Ms. Kusuma S³, Ms. Prakruthi K P⁴,
Ms. Ranjitha N⁵, Ms. Sindhu K⁶**

Assistant Professor, Dept. of Artificial Intelligence and Data Science, Maharaja Institute of Technology
Thandavapura^{1,2}

Students, Dept. of Artificial Intelligence and Data Science, Maharaja Institute of Technology Thandavapura³⁻⁶

Abstract: This paper presents an intelligent and user-friendly android-based application for the automatic detection of Alzheimer's disease and brain tumors. Neurological disorders like these pose significant diagnostic challenges due to their complexity and the critical need for early detection. Our project employs a hybrid approach, combining image processing and machine learning techniques, to provide rapid, preliminary diagnostic insights to both patients and medical professionals. The application features two primary modules: Brain Tumor Detection and Alzheimer's Prediction. The Brain Tumor module processes uploaded brain X-ray images, applying pre-processing steps like grayscale conversion, thresholding, and binarization. Feature extraction is then performed, followed by the use of a U-Net deep learning model to segment and classify the tumor, determining if the image indicates a normal state or a specific tumor type. The Alzheimer's module operates on tabular health and lifestyle data, where users input structured features such as age, gender, ethnicity, education level, BMI, smoking and alcohol consumption habits, physical activity, and diet quality. These inputs undergo pre-processing through normalization and categorical encoding. The processed data is then analyzed using machine learning algorithms like Random Forest and Support Vector Machine to predict the likelihood of Alzheimer's disease. By integrating both image-based and feature-based diagnostic methods into a single platform, this system significantly enhances the scope and accuracy of early detection. The dual-model architecture not only supports medical assessments but also empowers users with accessible health screening tools. Future enhancements are envisioned to include MRI integration, cloud deployment, and direct communication with healthcare providers. This intelligent application stands as a potential decision-support system in the domain of preventive neurological healthcare.

I. INTRODUCTION

This project focuses on developing an intelligent diagnostic tool for the early detection of two critical neurological conditions: Alzheimer's disease and brain tumors. By leveraging advanced image processing and machine learning techniques, the system offers a dual-modality diagnostic solution. The primary goal is to provide an accessible, efficient, and automated tool to assist medical professionals and individuals in identifying potential health risks associated with these conditions.

The Brain Tumor Detection module allows users to upload a brain X-ray image. This image undergoes pre-processing steps such as grayscale conversion, thresholding, and binarization to enhance the visibility of potential tumor regions. Feature extraction is then performed on the pre-processed image, followed by segmentation using a U-Net deep learning model. The model segments the tumor area and classifies it into categories such as glioma, meningioma, or pituitary tumor, providing a preliminary diagnosis.

In parallel, the Alzheimer's Detection module processes a set of health and lifestyle features provided by the user. These features include age, gender, ethnicity, education level, BMI, smoking habits, alcohol consumption, physical activity, and diet quality. This data is pre-processed, and machine learning models like Random Forest, Support Vector Machine (SVM), and Logistic Regression are employed to analyse the data and predict the likelihood of Alzheimer's disease. The system categorizes the risk as low, moderate, or high, based on the user's inputs. The project aims to empower users with a comprehensive diagnostic tool that combines image analysis and structured health data to identify potential risks for both brain tumors and Alzheimer's disease. It provides a user-friendly platform that aids in early detection, thereby enhancing the opportunity for timely intervention and better patient outcomes.

II. PROBLEM STATEMENT AND OBJECTIVE

A. PROBLEM STATEMENT

Neurological disorders such as Alzheimer's disease and brain tumors present significant challenges in early detection and diagnosis. Early and accurate diagnosis is critical for effective treatment and improved patient outcomes; however, traditional diagnostic methods for these conditions suffer from various limitations. For brain tumors, existing diagnostic approaches heavily rely on radiologists' expertise in interpreting X-rays, CT scans, and MRIs. These methods are often time-consuming, subjective, and susceptible to human error, frequently leading to delayed diagnoses or misinterpretation of tumor types. Moreover, in resource-limited settings, access to skilled radiologists and advanced diagnostic tools may be scarce, further complicating timely and accurate tumor detection.

Similarly, diagnosing Alzheimer's disease involves the subjective evaluation of cognitive function, patient history, and imaging results, often requiring a lengthy process of multiple tests and consultations. Since Alzheimer's can develop silently over time, traditional methods frequently fail to detect the disease in its early stages, where intervention could make the most significant difference. Furthermore, the existing diagnostic process heavily depends on the patient's recollection and personal history, which can sometimes be inconsistent or incomplete.

B. OBJECTIVE

The objective of this project is to develop an intelligent, accessible, and efficient diagnostic system that aids in the early detection of two major neurological disorders: brain tumors and Alzheimer's disease. These conditions often necessitate early diagnosis for effective treatment, yet traditional methods rely heavily on manual evaluation, which can be time-consuming, costly, and prone to human error. This project seeks to address these limitations by implementing a dual-modality system that combines deep learning-based image analysis with machine learning-based health data evaluation. The brain tumor detection module leverages medical imaging techniques, specifically processing and analysing brain X-ray images using the U-Net architecture for segmentation and classification of tumor types. Conversely, the Alzheimer's detection module focuses on structured user data, including age, BMI, lifestyle habits, and other demographic attributes, which are analysed using models like Random Forest and Support Vector Machine to predict the disease's risk level. By integrating these two modules into a unified, web-based platform, the system aims to provide a seamless and user-friendly interface for both patients and healthcare professionals. The ultimate goal is not only to support early-stage diagnostics but also to reduce dependency on high-end medical infrastructure, thereby making preventive screening more widely available. Additionally, the system is designed with scalability and future enhancements in mind, including integration with electronic health records, mobile accessibility, and cloud deployment for real-time processing. Through this project, the team aspires to contribute to the advancement of digital healthcare solutions that emphasize early detection, proactive health management, and equitable access to diagnostic services.

III. SYSTEM DESIGN

The system design of the proposed diagnostic application adopts a modular and integrated architecture to support brain tumor detection via image analysis and Alzheimer's disease prediction using structured health data. Developed as a web-based platform, it offers a responsive interface for user input and interaction. The system comprises two main modules: the Brain Tumor Detection Module and the Alzheimer's Prediction Module, both orchestrated through a centralized backend.

In the Brain Tumor Detection Module, users upload brain X-ray images via the frontend. These images undergo pre-processing using techniques such as grayscale conversion, thresholding, and binarization to enhance relevant features. The processed images are then fed into a U-Net-based Convolutional Neural Network, which performs semantic segmentation to isolate the tumor region. Based on the segmentation output, the system classifies the tumor into one of the predefined categories (e.g., glioma, meningioma, pituitary) or identifies it as normal. The result is then visualized on the interface, often with a segmentation mask overlay and a diagnostic label.

For the Alzheimer's Prediction Module, the user is prompted to enter demographic and lifestyle-related information, including age, gender, BMI, diet quality, physical activity, smoking and drinking habits, and education level. This data undergoes pre-processing steps such as normalization, categorical variable encoding, and handling of missing values. The cleaned dataset is then input into pre-trained machine learning models, including Random Forest and Support Vector Machine (SVM), which predict the user's risk of developing Alzheimer's disease. The output is presented as a risk level (low, moderate, or high), accompanied by recommendations or suggestions for further medical evaluation.

At the core of the system is a backend framework developed using Python, integrating machine learning libraries such as TensorFlow, Keras, Scikit-learn, and OpenCV. Data and user interactions are managed via a MySQL database, while web requests are handled using Flask or Django APIs. The frontend is developed using HTML, CSS, JavaScript, and Bootstrap to ensure a responsive and accessible design across various devices.

The entire system adheres to a layered design pattern to separate concerns and enhance maintainability. The presentation layer handles user interaction, the application layer manages control logic and data flow, and the data layer facilitates database transactions and model interactions. Security measures, such as hashed password storage, input validation, and session management, are incorporated to ensure secure user access. This modular, scalable, and user-centered system design not only enables accurate early detection of neurological conditions but also ensures adaptability for future integration with hospital systems, cloud infrastructure, or mobile applications.

IV. METHODOLOGY

This methodology chapter outlines the approaches and techniques employed in the design, development, and implementation of the system for Alzheimer's disease prediction and brain tumor detection. This chapter serves as a guide to the steps taken, the tools and frameworks utilized, and the rationale behind the chosen methods to ensure the system's effectiveness, accuracy, and usability.

For brain tumor detection, the system relies on advanced image processing techniques such as gray scaling, thresholding, and binarization to prepare X-ray images for analysis. The U-Net architecture, a type of Convolutional Neural Network (CNN), is specifically utilized for image segmentation and classification. U-Net was chosen due to its superior performance in medical image analysis, enabling the accurate detection of tumors in images by isolating regions of interest (ROI) for further classification. The methodology also incorporates feature extraction techniques to enhance the model's ability to detect subtle features in the images, which are critical for accurate tumor classification.

For Alzheimer's disease prediction, the methodology focuses on analysing non-image data provided by users, including demographic and lifestyle factors. Data such as age, gender, education level, BMI, smoking habits, alcohol consumption, physical activity, and diet quality are gathered as input features for the machine learning model. Pre-processing techniques like data normalization and missing value imputation are employed to prepare the data for analysis. The system uses machine learning algorithms such as Random Forest, Support Vector Machine (SVM), and Logistic Regression to classify users as at risk or not at risk of developing Alzheimer's, based on the input features.

The chosen methodologies ensure that the system is both robust and scalable, providing accurate results while maintaining a user-friendly interface. This chapter details the technical aspects of both image and data-based analysis, outlining the model training, validation, and evaluation processes that ensure reliable predictions for both Alzheimer's disease and brain tumor detection.

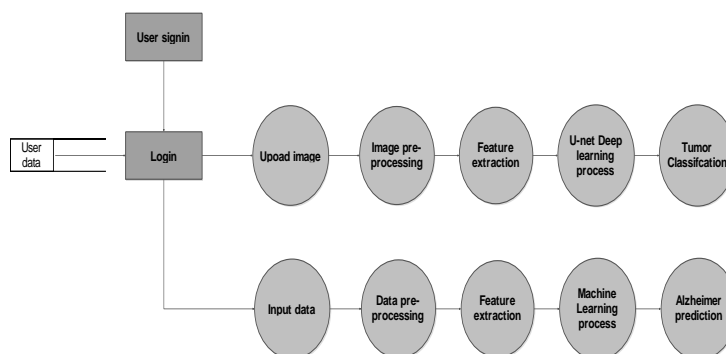


Fig: Flow Chart

Step 1: User signs in and logs in to the system. The user accesses the platform by registering or entering valid login credentials.

Step 2: User uploads an image or inputs clinical data. The system accepts either medical images (e.g., brain scans) or patient-related data for analysis.

Step 3: Perform pre-processing on image or data. Uploaded images are enhanced (e.g., noise removal, resizing) or the data is cleaned and normalized.

Step 4: Extract relevant features from the input. Key characteristics are extracted from the image (texture, shape) or data (biomarkers, symptoms).

Step 5: Apply U-net for tumor or ML model for Alzheimer. U-Net deep learning is used for tumor detection; ML algorithms are used for Alzheimer's prediction.

Step 6: Predict tumor classification or Alzheimer's disease. The system provides a diagnostic prediction based on the input, aiding medical decisions.

V. IMPLEMENTATION

Implementation is the process of transforming a new or updated system design into an operational one. The objective is to put the new or overhauled system, which has been thoroughly tested, into operation while minimizing costs, risks, and disruption to individuals. A critical aspect of the implementation cycle is ensuring no disruption to the organization's existing operations. The best strategy for maintaining control while embedding any new system is to utilize well-planned tests for evaluating every new program. Before production files are used to test live data, text files should be created on the old system, copied over to the new system, and used for the initial trial of each program.

Another factor to consider in the execution stage is the acquisition of hardware and software. Once the software for the system is developed and testing is completed, it proceeds to the stage of making the newly designed system fully operational and reliable in performance. Implementation is the most significant stage in achieving a successful system and instilling confidence in the client that the new system is functional and effective. This type of discussion, especially regarding the execution of an altered application to replace an existing one, is relatively straightforward to manage, provided there are no major changes in the overall system.

VI. SYSTEM REQUIREMENTS

System analysis is a vital phase in the Software Development Life Cycle (SDLC), particularly for healthcare applications such as brain tumor detection and Alzheimer's prediction. This system integrates two diagnostic functionalities: detecting brain tumors using deep learning techniques, specifically U-Net on X-ray images, and predicting Alzheimer's disease through machine learning models based on structured input data like age, gender, and lifestyle factors. The analysis defines both functional and non-functional requirements, including system performance, security, and scalability. It also addresses challenges such as medical image accuracy and large dataset management while examining the interaction between system components—from user input to diagnostic output—ensuring that the system is reliable, user-friendly, and compliant with medical data standards.

The system requires hardware including an Intel i5 processor, 8GB RAM, and 30GB of storage. It runs on software platforms like Windows 7 and above. For backend processing and machine learning tasks, it utilizes Python (3.6+) with libraries such as TensorFlow, Keras, OpenCV, and Scikit-learn. Java is employed for developing Android applications. The frontend is developed using HTML, CSS, Bootstrap, JavaScript, and XML to provide a responsive and interactive user experience. MySQL, managed locally via XAMPP, serves as the database system for both structured data (Alzheimer's prediction) and unstructured image data (brain tumor detection). Development, testing, and deployment across both web and mobile platforms are supported by tools like Visual Studio Code and Android Studio.

VII. CONCLUSION

The proposed system delivers an intelligent and user-friendly application for the early detection of Alzheimer's disease and brain tumors, two critical neurological conditions. By integrating deep learning and machine learning technologies, the application aims to support early screening, reduce diagnostic delays, and empower users with accessible, preventive health tools.

For brain tumor detection, the system employs a U-Net-based Convolutional Neural Network to segment and classify tumors from uploaded brain X-ray images. The pre-processing steps, including grayscale conversion, thresholding, and binarization, ensure that only relevant features are extracted for accurate classification. This capability supports timely diagnosis and intervention, potentially reducing the risk of severe outcomes.

For Alzheimer's prediction, the model accepts user input based on lifestyle, demographic, and clinical factors such as age, BMI, diet, and physical activity. Machine learning algorithms like SVM and Random Forest are applied to predict risk levels, providing users with an easy-to-understand result indicating high or low risk.

The project successfully demonstrates how technology can bridge the gap between complex medical diagnosis and user accessibility. Overall, this dual-function platform represents a powerful healthcare tool that not only aids early detection but also promotes awareness and proactive health management.

VIII. FUTURE ENHANCEMENTS

While the current system effectively addresses the early detection of Alzheimer's and brain tumors, numerous opportunities exist to enhance its functionality and impact in future iterations.

In the brain tumor module, future work can involve incorporating MRI and CT scan support, which provide more detailed imaging than X-rays. Additionally, integrating a 3D segmentation model could offer more precise tumor localization, significantly supporting surgical planning and treatment decision-making. Real-time image acquisition from hospital systems (PACS) can also streamline workflows for clinical use.

For Alzheimer's detection, incorporating longitudinal data, such as cognitive test scores over time, can significantly improve prediction accuracy. Adding wearable data (e.g., sleep patterns, heart rate, activity levels) and voice-based memory tests may further enhance early detection capabilities. Future systems can also be expanded to include personalized health recommendations, encompassing lifestyle modifications and preventive care routines.

From a deployment standpoint, the application can be converted into a mobile app or a cloud-based service to ensure broader accessibility. Implementing multilingual support, data privacy enhancements, and integration with electronic health records (EHRs) would make it more useful for real-world clinical environments.

Overall, with ongoing improvements and expansion, the system has the potential to become a comprehensive and trusted digital health assistant for neurological screening and personalized wellness.

REFERENCES

- [1] Gupta, K. K., Vijay, R., Pahadiya, P., Saxena, S., & Gupta, M. (2023). Novel Feature Selection Using Machine Learning Algorithm for Breast Cancer Screening of Thermography Images. *Wireless Personal Communications*, 1-28.
- [2] Pahadiya, P., Vijay, R., Gupta, K. K., Saxena, S., & Shahapurkar, T. (2023). Digital Image Based Segmentation and Classification of Tongue Cancer Using CNN. *Wireless Personal Communications*, 1-19.
- [3] Gupta, K. K., Vijay, R., Pahadiya, P., & Saxena, S. (2022). Use of novel thermography features of extraction and different artificial neural network algorithms in breast cancer screening. *Wireless Personal Communications*, 1-30.
- [4] Gupta, K. K., Rituvijay, Pahadiya, P., & Saxena, S. (2022). Detection of cancer in breast thermograms using mathematical threshold-based segmentation and morphology technique. *International Journal of System Assurance Engineering and Management*, 1-8.
- [5] Gupta, K. K., Vijay, R., & Pahadiya, P. (2022). Detection of abnormality in breast thermograms using Canny edge detection algorithm for thermography images. *International Journal of Medical Engineering and Informatics*, 14(1), 31-42.