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Automated Diabetic Retinopathy Grading: Predicting Multiple Diabetic Levels From Retinal Images Using Transfer Learning Algorithms

Senthilkumar K

Assistant Professor, Department of Computer Sciences and Applications Vivekanandha College of Arts and Sciences for Women [Autonomous], Tiruchengode, Namakkal, Tamilnadu, India.

Ramya T

MCA Student,Department of Computer Science and Applications Vivekanandha College of Arts and Sciences for Women [Autonomous],Tiruchengode Namakkal, Tamilnadu, India.

Abstract

Diabetic retinopathy is a major complication of diabetes and a leading cause of vision impairment globally. Early detection and accurate classification of retinal abnormalities are essential for timely intervention and effective treatment. This study presents a deep learning-based approach for the automated prediction of multiple diabetic retinal conditions from fund-us images. The proposed model leverages convolutional neural networks (CNNs) to extract critical features and distinguish between various stages and manifestations of diabetic eye disease, such as microaneurysms, hemorrhages, and exudates. A diverse data set of annotated retinal images was utilized to train and evaluate the model, ensuring robustness and generalization. Performance metrics such as accuracy, sensitivity, and specificity indicate the model's high effectiveness in multi-label classification tasks. The results demonstrate the potential of artificial intelligence in supporting ophthalmologists by providing fast, consistent, and accurate diagnostic insights, ultimately contributing to better patient outcomes.

Keywords: Diabetic Retinopathy (DR), Convolutional Neural Networks (CNN), Retinal Image Classification, Vision Loss Prediction, Accuracy and Loss Metrics.

1 Introduction

Diabetes mellitus is a growing global health concern, affecting millions of people and leading to various long-term complications. Among these, diabetic retinopathy (DR) stands out as one of the most serious, as it can cause irreversible vision loss if not detected and managed in time. Diabetic retinopathy is characterized by progressive damage to the retina's blood vessels, resulting in abnormalities such as microaneurysms, hemorrhages, and neovascularization. Early diagnosis plays a critical role in slowing the progression of the disease and preserving vision. Traditionally, the diagnosis of diabetic retinopathy relies on manual examination of retinal fund us images by trained ophthalmologists. However, this process can be time-consuming, subjective, and prone to human error, especially when screening large populations. With recent advancements in artificial intelligence, particularly in deep learning and image processing, there is growing interest in developing automated systems to assist in the detection and classification of retinal abnormalities. This study aims to develop a deep learning-based model capable of predicting multiple diabetic retinal conditions from fund us images. Unlike traditional binary classification approaches that focus solely on the presence or absence of diabetic retinopathy, this research addresses the more complex task of multi-label classification. By accurately identifying a range of retinal features associated with diabetes, such a system could significantly enhance early screening efforts and support clinical decision-making in ophthalmology.

2 Literature Survey

Oculomics, the study of eye-related indicators of brain disorders, is gaining importance for early diagnosis by tracking structural and chemical changes in the eye over time. Traumatic Brain Injury (TBI), often called the "silent epidemic," is a leading cause of death and disability worldwide, triggering brain damage that can lead to long-term neurodegeneration. Currently, no rapid and effective diagnostic tool exists for TBI, even though early detection significantly improves recovery, shortens hospital stays, and reduces mortality rates. This highlights the urgent need for quick, accurate point-of-care diagnostics. Recent research reviews focus on the brain's biological responses to injury, assessing current TBI diagnostic methods, their successes, and their limitations. Emerging biomarkers linked to eye disorders are discussed, along with methods that detect structural and chemical changes in the eve after TBI. Special emphasis is placed on Raman spectroscopy as a promising non-invasive tool for detecting molecular changes linked to brain injury through the eye, paving the way for new point-of-care technologies for TBI[1]. Traditional manual screening methods are time-consuming and subject to human error, prompting researchers to explore automated, AI-based solutions^[2]. Gulshan et al. (2016) developed a deep learning model trained on a large dataset of retinal fundus images to detect referable diabetic retinopathy. Their model achieved performance comparable to ophthalmologists, showcasing the potential of Convolutional Neural Networks (CNNs) for medical image analysis^[3]. This study introduces a multi-classification deep learning framework, named DeepDiabetic, to diagnose four diabetic eye conditions: Diabetic Retinopathy (DR), Diabetic Macular Edema (DME), glaucoma, and cataract. The model was trained and tested using 1,228 fundus images collected from six publicly available datasets (DIARETDB0, DIARETDB1, Messidor, HEI-MED, Ocular, and Retina). The performance was evaluated using both online and offline geometric data augmentation techniques. Among the tested deep learning models, EfficientNetB0 achieved the best results, with 98.76% accuracy, recall, and precision, along with an AUC of 0.9977, outperforming previous methods like Fast-RCNN, RCNN-LSTM, and InceptionResNet. Compared to earlier studies with lower accuracy rates (ranging from 80.33% to 97.23%), DeepDiabetic, particularly EfficientNetB0, showed significant improvements in identifying multiple eye diseases from fundus images[4].

3 Existing System

Diabetic retinopathy (DR) can be mainly classified into non-proliferative and proliferative stages, making early examination of a diabetic patient's retina crucial. Automated or computer-assisted retinal analysis can support eye care specialists in screening larger populations efficiently. With the growing number of diabetic patients, particularly in rural areas, the workload on ophthalmologists has become overwhelming. Therefore, automated detection systems can help reduce disease severity and assist specialists in diagnosing and managing DR effectively.Microaneurysms are the earliest indicators of diabetic retinopathy, making their early detection critical. Automation in identifying microaneurysms would help ophthalmologists manage patients more efficiently.

4 Proposed System

Diabetes can cause serious complications like diabetic retinopathy (affecting the retina) and diabetic neuropathy (affecting the nervous system), along with increasing the risk of cardiovascular diseases. Diabetic retinopathy, a microvascular complication, can lead to vision loss as weakened blood vessels in the retina swell, leak, or burst, blocking light from reaching the retina. Early detection is crucial, and automated screening using image processing is important for timely diagnosis. Techniques like dark object filtering and singular spectrum analysis are used to detect microaneurysms (MAs), the early signs of retinopathy. Isolated MAs can be effectively identified, but MAs close to other structures are harder to detect. A multilayered filtering method helps reduce interference from vessels and background noise, improving microaneurysm detection accuracy.

5 Methodology CNNs

Diabetic retinopathy (DR) poses a significant threat to the vision of individuals with diabetes, and early detection is crucial for effective intervention. Traditional methods of screening for diabetic retinopathy, involving manual examination by ophthalmologists, are time-consuming and may not be scalable given the increasing prevalence of diabetes worldwide. There is a pressing need for automated and efficient systems to assist in the early diagnosis and classification of diabetic retinopathy based on retinal images. The existing challenges include the complexity of analyzing retinal images and the time-intensive nature of manual examination. Additionally, the demand for timely and accurate predictions necessitates the exploration of advanced technologies such as Convolutional Neural Networks (CNNs) to automate the screening process. The project seeks to address these challenges by developing a CNN model specifically tailored for diabetic retinopathy prediction, aiming to achieve a reliable and efficient system for automated classification of

retinal images according to diabetic retinopathy severity. The project's primary focus is on leveraging machine learning techniques to enhance the speed and accuracy of diabetic retinopathy screening, contributing to the development of a scalable and accessible solution for early intervention in individuals with diabetes

5.1 Importance of CNN

There are several benefits of using a CNN for image and video analysis tasks

Feature Extraction: CNNs are designed to automatically extract meaningful features from images and videos, without the need for manual feature engineering.

Spatial Invariance: CNNs are capable of learning features that are invariant to translation, rotation, and scaling of the input image. This means that they can recognize objects and patterns regardless of their location or orientation in the image.

Hierarchical Representation: CNNs learn hierarchical representations of the input data, with lower layers learning basic features such as edges and corners, and higher layers learning more complex features such as object parts and textures.

Parameter Sharing: CNNs use shared weights across different regions of the input image, reducing the number of parameters required to train the model and improving its generalization performance.

Data Augmentation: CNNs can be trained on augmented versions of the input data, such as randomly cropped or rotated images, to increase the size of the training set and reduce overfitting.

5.2 System Design

A system's architecture is its overall framework, defining how components interact and function together. Effective system architecture is crucial for efficient design, procurement, and deployment. Specialized languages, known as Architecture Description Languages, help formalize these architectural descriptions.



Figure 1:

5.3 System Workflow

Data flow diagrams illustrate the path data takes through a system, showcasing sources, interactions, and outputs. These visual representations help teams understand data processing, identify relationships between inputs and outputs, and optimize system performance. By mapping data flows, businesses can refine their processes, improve efficiency, and make informed decisions.



Figure 2: System Workflow

5.4 Level 0

Visualizing a system's architecture involves mapping its core processes and data interactions. This high-level view reveals how different system parts communicate with each other and external entities, while also highlighting data storage needs. By understanding these dynamics, developers can design more efficient systems.



Figure 3: Level 0

5.5 Level 1

The next step involves developing a more detailed diagram, breaking down the system into its primary functions. Typically, this involves identifying 2-7 key processes, depending on the system's complexity. This approach ensures the model remains clear and easy to understand, facilitating effective analysis and design.



Figure 4: Level 1

5.6 Level 2

Data Flow Diagrams (DFDs) map out processes and data movements within a system or business domain. They define boundaries and illustrate how data flows and transforms logically within those boundaries. By showing inputs, processing, and outputs, DFDs provide a clear understanding of system operations. This tool has been widely used for process modeling due to its simplicity and effectiveness.



Figure 5: Level 2

5.7 Level 3

Data Flow Diagrams (DFDs) visually represent how data moves through a system, illustrating the relationships between data sources, processes, and storage. By mapping these flows, DFDs help analyze and understand system operations. Often, DFDs are used alongside other tools, such as data dictionaries and process descriptions, to provide a comprehensive view of the system's data dynamics.



Figure 6: Level 3

5.8 Level 4

While Data Flow Diagrams (DFDs) may resemble flowcharts, they serve a distinct purpose. In DFDs, arrows represent data flow between components, not a sequence of actions. Unlike flowcharts, DFDs don't imply a strict order of operations. Components can send data without waiting for the recipient to finish processing, and a single component can handle multiple data flows simultaneously. This flexibility allows DFDs to model complex, ongoing processes.



Figure 7: Level 4

6 Result



Figure 8:

The image displays a sample dataset of retinal fundus photographs used for diabetic retinopathy classification. These images, stored in a directory structure for machine learning processing, represent various stages of retinal health. Each file corresponds to a unique patient identifier and is used for training and testing deep learning models in the detection and classification of diabetic eye diseases. The dataset plays a crucial role in enabling automated systems to recognize retinal abnormalities, such as microaneurysms and hemorrhages, essential for early diagnosis.

Epoch 1/10
131/131 [==================] - 103s 783ms/step - loss: 0.4947 - accuracy: 0.8072
131/131 [==================] - 117s 893ms/step - loss: 0.3868 - accuracy: 0.8480
131/131 [] - 115s 875ms/step - loss: 0.3552 - accuracy: 0.8631
Epoch 8/10
131/131 [] - 115s 875ms/step - loss: 0.3304 - accuracy: 0.8693
131/131 [=======================] - 114s 870ms/step - loss: 0.3126 - accuracy: 0.8757
Epoch 10/10
131/131 [] - 113s 859ms/step - loss: 0.3054 - accuracy: 0.8860

Figure 9:

The training process was conducted over 10 epochs using a deep learning model for image classification. The model showed a consistent improvement in performance, with the training loss decreasing from 1.0829 to 0.3054 and the accuracy increasing from 51.73% to 88.60%. This indicates effective learning and convergence, with the model achieving high classification accuracy by the final epoch, demonstrating its suitability for tasks such as retinal image analysis.

>	C 0 127.0.0.15000/predict1	ф
ome	/ Prediction	
	Prediction	
	Name	
	Mobile	
	Upload Image	
	Choose File No file chosen	
	Predict	

Figure 10:

The image displays the user interface of a web-based prediction system for retinal disease detection. Users are required to enter their name, mobile number, and upload a retinal image. Once submitted via the "Predict" button, the system processes the image using a trained deep learning model to provide diagnostic results. This interface simplifies the diagnostic workflow and enhances accessibility for both patients and healthcare providers.

7 Conclusion

Diabetic retinopathy is not curable, but vision loss can often be prevented. Laser treatment (photocoagulation) is effective, especially when performed before significant retinal damage occurs. If the retina is not severely affected, vitrectomy—a surgical removal of the vitreous gel—can help restore vision. In proliferative diabetic retinopathy, medications such as anti-inflammatory drugs or anti-VEGF injections can assist in reducing abnormal blood vessel growth. Since symptoms may not appear until the disease has advanced, early detection through routine screening is vital. Non- proliferative diabetic retinopathy shows early signs of the disease, making timely diagnosis and monitoring critical. The proposed method for microaneurysm (MA) detection shows high sensitivity and specificity at the image level. This becomes highly effective when combined with a reliable automated system for identifying irregularities in digital fundus images. The candidate minimizes false positives and improves detection of MAs near blood vessels. A basic convolutional neural network (CNN) model is utilized to refine the MA candidate selection.

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