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## Detection of Hard Exudates in Retinal Images

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**ABSTRACT:** Diabetic Retinopathy (DR) is the major cause of blindness in diabetic patients. Regular screening can stop or reverse the progress of this disease. Hard Exudates (HEs) are common and early medical signs of DR. Automatic detection of DR lesions in retinal images can help the diagnosis and treatment of the disease. Automatic detection of hard exudates from retinal images is medically significant. Here, various Image Processing techniques are presented that can be used for automated detection of Hard Exudates. The outcomes are evaluated by using ground truth of the test images and the use of image databases in particular digital algorithm for detection of hard Exudates. Accuracy, Sensitivity and Specificity are few of the parameters which are used for concluding the better method for digital Processing

**KEYWORDS:** Diabetic retinopathy, Hard Exudates, Image Processing Techniques

### I. INTRODUCTION

DIABETIC retinopathy (DR) is the most common cause of blindness and vision impairments in diabetic patients [1]. Hard Exudates (HEs) are known as the specific marker of DR [2]. Automatic detection of hard exudates from retinal images is medically significant. Thus, the clinical examination of hard exudates is essential for the early detection and treatment of DR. Early detection and regular treatment of the disease can stop or reverse the progress of the disease and prevent blindness. The traditional detection of hard exudates is accomplished manually, which is a laborious and time-consuming work. As populations of DR expand the workload of ophthalmologist notably and the deficiency of manual checking became significantly serious, it has kept many patients apart from receiving effective treatment in time. Therefore, an automatic detection of hard exudates is an important task in computer aided diagnosis of DR. For this reason, all diabetic patients should have their both eyes examined at least once every year even if they don't have any visual impairment. For capturing images of the retina fundus camera is used. The sample images are shown in the figure 1.

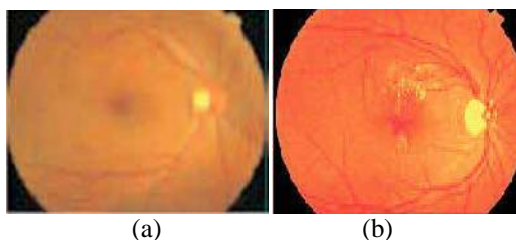


Figure 1. (a) Sample normal image (b) Hard exudates image

### II. LITERATURE SURVEY

C.JayaKumari et al [1] presented some image processing techniques for automatic detection of the presence of hard exudates in fundus images. First preprocessing is done with the use of contrast adaptive histogram equalization then the exudates are segmented by using contextual clustering algorithm. Some of the key features such as standard deviation, mean, intensity, edge strength and compactness of the segmented regions are extracted and given as inputs into Echo State Neural Network (ESNN) to differentiate between the normal and pathological image. A total of 50 images are used to find the exudates out of which 35 images which consists of both normal and abnormal are used to train the ESNN and the remaining 15 images are used for testing the neural network. Furthermore, it achieves 93% sensitivity and 100% specificity in terms of exudates based classification.



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Huiqi Li et.al [2] presented novel method for extraction of the main features in color retinal images. To locate the optic disk principal component analysis is employed. An approach which is the combination of region growing and edge detection is proposed here for detection of exudates. Disk localization, disk boundary detection, and fovea localization achieve the success rates of 99%, 94%, and 100%, respectively. The sensitivity and specificity of exudates detection are 100% and 71% respectively. The success of the proposed algorithm can be contributed for the utilization of the model-based methods. The detection and analysis could be applied to automatic mass screening and diagnosis of the diseases related to retina.

Xiang Chen et. al [3] presented a novel method for automatic detection of HEs in color retinal images. First combination of histogram segmentation and morphological reconstruction is used for extraction of HEs candidate regions. Next, a set of features is defined for each candidate region which consists of 44 significant features. A supervised support vector machine (SVM) is finally trained based on these features for classification of the candidate regions for HEs. This method is evaluated on the public DIARETDB1 database and achieves sensitivity of 94.7% and a positive predictive value of 90.0%. Experimental result shows that this method can produce efficient detection of HEs.

Clara I. Sánchez et.al [4] presented an automatic method for detection of hard exudates. The algorithm is based on mixture models for dynamic thresholding of the images for separation of hard exudates from background. Algorithm performance is prospectively assessed using a database of 20 retinal images which varies in color, brightness, and quality. The algorithm achieves a sensitivity of 90.23% and a predictive value of 82.5% using a lesion-based criterion. The image-based classification accuracy is also measured which obtains a sensitivity of 100% and a specificity of 90%.

Thomas Walter et. al [5] presented a new algorithm for exudates detection. Exudates are detected using their high grey level variation, and their contours are found by the use of morphological reconstruction techniques. The detection of the optic disc is essential for this approach. Morphological filtering techniques and the watershed transformation are used for optic disc detection. The algorithm is tested on a small image data base and compared with the performance of a human grader. As a result, mean sensitivity and mean predictive value of 92.8% and 92.4% are obtained. Robustness with respect to changes of the parameters of the algorithm has been evaluated.

Xiaohui Zhang et. al [6] Here bottom-up and top-down strategies are applied respectively based on different properties of bright lesions and dark lesions, to cope with the main difficulties in lesions detection such as inhomogeneous illumination. A three-stage, bottom-up approach is applied in bright lesion detection. Two-step improved Fuzzy C-Means is applied in Luv colorspace to segment candidate bright lesion areas after local contrast enhancement preprocessing stage. Finally, a hierarchical SVM classification structure is applied for classification of bright non-lesion areas, exudates and cotton wool spots. In detection of hemorrhages, a top-down strategy is adopted. The hemorrhages are located in the ROI firstly by calculating the evidence value of every pixel using SVM. Then their boundaries can be accurately segmented in the post-processing stage.

Wynne Hsuet. al [7] Automated detection of retinal lesions can decrease the workload and increase the efficiency of doctors and other eye-care personnel reading the retinal images and facilitate the follow-up management of diabetic patients. Existing techniques for detection of retinal lesions are neither adaptable nor sufficiently sensitive and specific for real-life screening application. Here, the contribution of domain knowledge in improving the accuracy and robustness for detection of hard exudates in retinal images is demonstrated. This method is tested on 543 consecutive retinal images of diabetic patients and achieves sensitivity and specificity of 100% in the detection of hard exudates.

Diptoneel Kayalet. al [8] proposed a method which uses various image processing techniques with a goal to detect hard exudates. First median filtering is used for excellent noise reduction with considerably less blurring. Median filtered image is then subtracted from input image. For image segmentation thresholding is used. Image addition is then used for creating double exposure of two images into one. Proposed algorithm is evaluated on DIARETDB0, DIARETDB1 image database which contains 219 images in total. This method achieves sensitivity of 97.25% and specificity of 96.85%.



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Dr. G. G. Rajput et. al[9] presented an efficient method for identification and classification of the exudates as hard and soft exudates. The retinal image in CIELAB color space is pre-processed for elimination of noise. Next, blood vessels network elimination is performed to facilitate detection and optic disc elimination. Hough transform is used for optic disc elimination. K-means clustering technique is then used for the candidate exudates detection. Finally, classification of exudates is done as hard and soft exudates based on their edge energy and threshold. The proposed method has achieved very good results. OD has been eliminated with an accuracy of 100%. However, the method fails for the images that have only a portion of optic disk. The morphological operations for removing the blood vessel network have yielded 100% results.

Nayomi Geethanjali Ranamukaet. al[10] proposed an approach based on morphological image processing and fuzzy logic for detection of hard exudates from DR retinal images. At the initial stage, the exudates are detected using mathematical morphology that includes elimination of the optic disc. Subsequently, an adaptive fuzzy logic algorithm is implemented for extraction of hard exudates that uses values in the RGB colour space of retinal images to form fuzzy sets and membership functions. The fuzzy output for all the pixels in every exudate is calculated for a given input set corresponding to red, green and blue channels of a pixel in an exudate. This fuzzy output is calculated for hard exudates according to the proportion of the area of the hard exudates. The results are compared with hand-drawn ground truth which achieves sensitivity of 75.43% and specificity of 99.99%.

### III. CONCLUSION

Several methods are developed for detection of exudates from nonmydiatic, low-contrast, retinal digital images of retinopathy patients using various databases available. The main intention is to help the ophthalmologists in the diabetic retinopathy screening process over the large population suffering from Diabetic Retinopathy, to detect symptoms faster and more easily. The proposed techniques work effectively even on a poor computing system. The results of this work can be developed to produce an automated system for detection of exudates. Microaneurysm and haemorrhage detection could be added to the system in order to increase its ability to verify the degree of diabetic retinopathy. It will be useful to extend this work by developing a system to detect them. Future work will address an issue of improving the sensitivity by improving the results. Further classification to specify the severity of DR can be done. A complete system can be established that can be used for detection of all the possible abnormalities and the anatomical organs.

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