

Skin Disease Prediction

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Abstract: Skin diseases are prevalent worldwide, affecting individuals across all age groups and demographics. Accurate and timely diagnosis is crucial for effective treatment, but access to dermatological expertise can be limited, particularly in remote areas. Recent advancements in computer vision and machine learning offer promising solutions for automating the detection and diagnosis of skin diseases. This study presents an automated system utilizing state-of-the-art deep learning architectures, YOLOv8 and YOLOv5, to detect common skin diseases such as acne, chickenpox, and ringworm from facial images. The dataset, sourced from Roboflow, consists of annotated images representing these conditions. The data underwent preprocessing, including resizing and augmentation, to improve model robustness. The YOLOv8 and YOLOv5 models were trained on this dataset, achieving accuracies of 70% and 60%, respectively. Various optimization techniques, such as data augmentation, transfer learning, and hyperparameter tuning, were employed to enhance model performance. The system's efficacy was evaluated using metrics like precision, recall, and mean Average Precision (mAP). The results demonstrate the potential of deep learning models in skin disease detection, suggesting that further improvements can be achieved through the inclusion of more diverse datasets and advanced data augmentation techniques. The study underscores the importance of leveraging artificial intelligence in healthcare, particularly for remote diagnostics, and provides a foundation for future developments in this field..

Keywords: Machine learning, deep learning, skin disease, you only look once, accuracy

I. INTRODUCTION

Millions of people worldwide suffer from skin conditions, making them a serious public health concern. Common ailments like ringworm, chickenpox, and acne can be difficult to diagnose because of the wide range of symptoms and presentations. Conventional diagnosis techniques mostly rely on visual inspection by qualified dermatologists, which can be subjective and time-consuming. Additionally, in underserved or rural locations, access to specialized care is sometimes restricted, which causes delays in diagnosis and treatment. In recent years, advancements in computer vision and machine learning have revolutionized various fields, including healthcare. These technologies offer the potential to automate the detection and diagnosis of skin diseases, thereby improving accessibility and reducing the burden on healthcare systems. Among the numerous deep learning models developed for image recognition tasks, the YOLO (You Only Look Once) architecture stands out for its efficiency and classification precision in identifying objects in real time. The most recent versions of this architecture, YOLOv8 and YOLOv5, are perfect for the task of identifying different skin illnesses since they have been improved for superior performance in detecting several items inside an image. The prevalence of these problems and the simplicity of taking pictures of the face are the main reasons for concentrating on facial skin diseases. Dermatological disorders frequently affect the face, and examining facial photos enables a non-invasive and convenient method of screening. In the context of telemedicine and remote healthcare, when physical examinations might not be practical, this is especially pertinent. Better patient outcomes could result from early diagnosis and treatment thanks to an automated method that can reliably identify skin conditions from facial photos. This study aims to explore the application of YOLOv8 and YOLOv5 architectures in the detection of skin diseases from facial images. The models are trained to identify and categorize various illnesses, such as ringworm, chickenpox, and acne, by utilizing a dataset of annotated photos. Additionally, the study looks into how different preprocessing and



augmentation methods affect model performance, offering insights into best practices for creating dependable and strong diagnostic tools.

II. PROBLEM STATEMENT

Even though they are frequently not fatal, skin conditions can have a big impact on a person's quality of life. In addition to being physically uncomfortable, diseases like ringworm, chickenpox, and acne can cause social shame and psychological misery. Conventional diagnostic techniques can be laborious and time-consuming, frequently requiring several trips to dermatologists. Access to such specialized care is restricted in many places, particularly rural ones, which causes delays in diagnosis and treatment. The goal of this project is to create an automated system that can identify and categorize common skin conditions from facial photos using YOLOv8 and YOLOv5 architectures. The goal is to provide a tool that can assist healthcare professionals in early diagnosis and make dermatological care more accessible to a broader population.

III. LITERATURE SURVEY

[1] The use of deep learning in medical imaging, particularly for skin disease detection, has been a subject of extensive research.

T. Goswami et al. (2020) provided a comprehensive survey on skin disease classification from image data, highlighting the challenges of dataset creation, feature extraction, and The study emphasized the need for diverse and well-annotated datasets to train effective models, as well as the importance of using performance metrics like accuracy, precision, recall, and F1-score to evaluate model efficacy.

[2] Dr. Tarun Parashar and Kapil Joshi (2022) explored the use of deep learning for skin disease detection focusing on the development of sophisticated architectures tailored for classifying skin lesions. Their work underscored the importance of large and diverse datasets in achieving robust model performance and demonstrated that deep learning approaches could outperform traditional methods in terms of accuracy and efficiency. Another study, "Human Skin Diseases Detection and Classification using CNN," emphasized the capabilities of convolutional neural networks in automating skin disease diagnosis. The authors discussed the use of CNNs for feature extraction and classification, highlighting their ability to learn discriminative features from raw image data. This approach has proven effective in accurately detecting and classifying various skin conditions.

[3] Haoran Wang and Kun Yu proposed a skin disease segmentation method based on network feature aggregation and edge-enhanced attention mechanisms. Their research focused on accurately delineating skin lesions in medical images, showcasing the importance of multi-scale contextual information and attention mechanisms in improving segmentation accuracy.

[4] A.V. Ubale and P.L. Paikrao explored the detection and classification of skin diseases using different color phase models. They investigated the efficacy of various color spaces, such as RGB, HSV, and YCbCr, in capturing discriminative features for skin disease detection, highlighting the potential of color-based features in enhancing classification accuracy.

[5] P. Dwivedi et al. (2021) utilized Fast R-CNN for automated skin disease detection, demonstrating the framework's capability to localize and classify skin lesions with high accuracy and efficiency. The study highlighted the advantages of using object detection frameworks in medical imaging, particularly in terms of speed and accuracy.

[6] K. A. Olatunji and colleagues investigated the use of deep learning methods, including CNNs and RNNs, for skin disease classification.

Their research highlighted the strengths and limitations of various architectures and emphasized the importance of model selection and hyperparameter tuning in achieving optimal performance.

[7] Nur Ashiqin Mat Isa's research on acne type recognition using YOLO for mobile applications underscored the potential of deploying deep learning models in resource-constrained environments. The study demonstrated that YOLO could effectively classify different types of acne lesions, highlighting the model's suitability for mobile-based dermatology applications.



[8] Liao YH et al. presented an optimization-based technology for skin symptom detection, focusing on the application of optimization algorithms to enhance detection accuracy. Their research demonstrated the potential of combining deep learning with optimization techniques to improve the robustness and reliability of detection systems.

[9] Li P. and colleagues conducted a comparative study on human skin detection using transfer learning-based object detection frameworks such as YOLO and Faster R-CNN. Their findings highlighted the advantages of transfer learning in enhancing detection accuracy, particularly when dealing with limited annotated datasets.

[10] Sun J. et al. provided a systematic review of machine learning methods in skin disease recognition synthesizing findings from various studies and highlighting the advancements in machine learning techniques for dermatological applications. The review identified key trends and challenges in the field, such as the need for large, diverse datasets and the importance of explainable AI in enhancing the interpretability of model predictions.

IV. METHODOLOGY

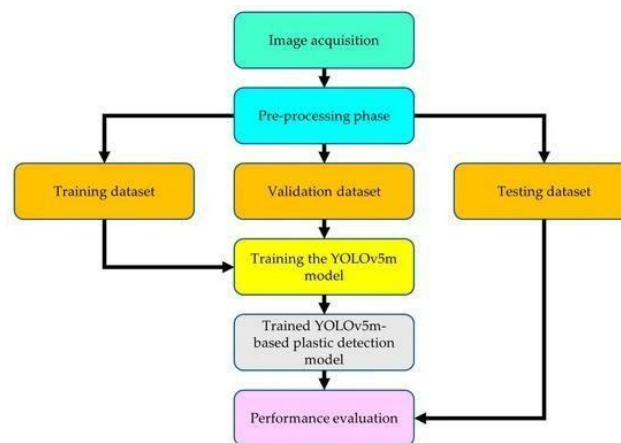


Fig 1. Architecture Diagram

The methodology for this project involved several critical stages, starting with data collection and preprocessing. A diverse dataset of facial images containing instances of skin diseases such as acne, chickenpox, and ringworm was sourced from Roboflow. In order to provide the ground truth data required for model training, the photos were tagged with bounding boxes that indicated the locations of skin lesions. Resizing the images to a consistent resolution appropriate for the YOLO models and using data augmentation methods like rotation, flipping, and brightness adjustment to improve the model's robustness were preprocessing steps. By taking these precautions, the models were guaranteed to be able to generalize well across various skin tones and lighting conditions.

The YOLOv8 and YOLOv5 architectures were picked for their efficiency and real-time performance characteristics. Pre-trained weights from the COCO dataset were used to initialize both models, a standard procedure in transfer learning that makes use of prior information. The models were then fine-tuned on the annotated dataset, maximizing hyperparameters such as learning rate, batch size, and the number of epochs. To ensure a thorough assessment of the model's performance, the dataset was divided into training, validation, and test sets. To avoid overfitting and enhance convergence, strategies including learning rate scheduling and early stopping were used. Metrics including precision, recall, F1-score, and mean Average Precision (mAP) were used to assess the trained models. These metrics offered a thorough evaluation of the model's accuracy in identifying and categorizing skin conditions. In order to find any biases or potential areas for development, the model's performance across several classes was further examined using a confusion matrix.



V. ALGORITHM

A. You Only Look Once(YOLO):

You Only Look Once (YOLO) is a state-of-the-art object detection algorithm known for its speed and accuracy. By explicitly predicting bounding boxes and class probabilities for numerous objects in a single neural network pass, YOLO treats object identification as a single regression problem. This is a thorough synopsis of YOLO:Single Shot Detection:

YOLO is a single-shot detection approach, which means that in a single forward neural network run, it concurrently predicts bounding boxes and class probabilities for every object in an image.

In contrast, conventional object detection techniques employ region proposal networks (RPNs) to produce region suggestions, which are subsequently classified and refined in several phases.

B. Unified Architecture:

YOLO uses a combined neural network architecture to predict class probabilities and bounding box coordinates at the same time.

After dividing the input image into a grid of cells, the network predicts bounding boxes in relation to each grid cell, together with the corresponding class probabilities and confidence ratings.

C. Grid Cell Prediction:

Predicting bounding boxes for objects whose centers lie inside each grid cell is the responsibility of that cell. The bounding box predictions comprise the bounding box's coordinates in relation to the cell's position, the class probabilities for each item class, and the confidence score that indicates the likelihood that the bounding box contains an object.

D. Feature Extraction Backbone:

Convolutional neural networks (CNNs), like Darknet, which has several convolutional and pooling layers for feature extraction, are commonly used by YOLO as a feature extraction backbone.

The feature maps generated by the backbone network are then used for object detection at multiple scales.

E. Loss Function:

Localization loss, confidence loss, and classification loss are all combined in YOLO's unique loss function. Errors in bounding box coordinates are penalized by the localization loss; inaccurate confidence forecasts are penalized by the confidence loss; and errors in class predictions are penalized by the classification loss.

F. Post-Processing:

Non-maximum suppression (NMS) is a post-processing procedure that eliminates redundant bounding boxes and keeps just the most confident detections after the neural network predicts bounding boxes and class probabilities.

G. Versions of YOLO:

YOLO has undergone multiple versions, each of which has improved network architecture, speed, and accuracy. YOLOv1, YOLOv2 (sometimes called YOLO9000), YOLOv3, and the most recent version, YOLOv4, YOLOv5, and YOLOv8, are a few well-known iterations of YOLO.

H. Yolo workflow:

Bounding box prediction, confidence estimate, and class prediction are some of the essential elements that make up YOLO (You Only Look Once). Let's examine how YOLO operates and the associated formulas:

I. Bounding Box Prediction:

To predict bounding boxes for objects, YOLO splits the input image into a grid of cells. Each cell is responsible for making bounding box predictions for objects whose centers are inside each cell. The bounding box prediction includes the bounding box's coordinates (x, y, width, and height) with respect to the cell's location.

VI. RESULT AND DISCUSSION

The YOLOv8 and YOLOv5 models' outcomes showed differing degrees of precision in identifying and categorizing skin conditions. The accuracy of the YOLOv8 model was 70%, whereas the accuracy of the YOLOv5 model was 60%. These findings show that although both models work well, there is still space for improvement, especially when it comes to adjusting the models for particular features of skin diseases. A more complex picture of the models'



performance was given by the precision, recall, and F1-score measures. While the YOLOv5 model demonstrated superior memory, indicating a higher true positive rate, the YOLOv8 model demonstrated higher precision, indicating fewer false positives.

The confusion matrices for both models highlighted certain challenges, such as the model's difficulty in distinguishing between similar skin conditions or dealing with variations in image quality.

The data augmentation techniques used during training contributed significantly to the models' ability to generalize under various picture circumstances. However, the dataset's class imbalance produced a problem because some circumstances were underrepresented, which resulted in less accurate forecasts for those classes. Future research could address this problem by gathering more balanced datasets or using sophisticated data augmentation methods. The models were able to make use of prior knowledge and require less training data thanks to the application of transfer learning. To prevent overfitting and guarantee that the models fitted well to the particular task of skin disease detection, it was necessary to carefully assess the initial weights and the degree of fine-tuning.

VII. CONCLUSION

Using deep learning architectures YOLOv8 and YOLOv5, the "Skin Disease Detection" project successfully created an automated system that can recognize common skin conditions from facial photos. The study showed how these models can be used to provide precise and effective diagnostic support, especially in situations when dermatological expertise is few. The findings showed that although the models' accuracy was impressive, more varied datasets, sophisticated data augmentation methods, and model refinement might lead to even greater gains.

This study offers a scalable solution for early identification and intervention in dermatological disorders, highlighting the significance of utilizing artificial intelligence and computer vision technology in healthcare. This system's deployment could greatly lessen the strain on healthcare systems, enable prompt diagnosis, and enhance patient outcomes. Future research could concentrate on increasing the variety of skin conditions that can be identified, enhancing training methods to increase model accuracy, and incorporating the system into telemedicine systems. The system's resilience and dependability may also be improved by investigating the application of further sophisticated deep learning models and methods, such as ensemble learning or semi-supervised learning.

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