

# Unsupervised Deep Feature Extraction For Pulmonary Disease Detection Using CT And X-Ray Imaging

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**Abstract:** Lung disorders cause major mortality worldwide. Early diagnosis improves recovery and long-term survival, making this task urgent. The research introduces Lung-GANs, a deep unsupervised framework. A Generative Adversarial Network (GAN) deep learning model learns lung disease picture representations from unlabeled data in this context. The unsupervised framework permits learning without labeled instances, which is useful. Lung-GANs help clinicians detect lung problems quickly, accurately, and automatically. Automated detection can speed up diagnosis and treatment. Lung-GANs learn interpretable lung disease images. The GAN algorithm extracts relevant visual features to better understand lung disease trends. SVMs and voting classifiers are trained using Lung-GAN features. This feature extraction and categorization method is novel. Voting classifiers use many models' predictions to create a robust classification framework, while SVMs excel at binary classification. The advanced YOLOv5 and YOLOv8 methods obtain 99% mAP for CT-scan pictures, improving object recognition. Flask-based front ends make CT and X-ray image testing straightforward, increasing user engagement. Integration of authentication provides a complete system security solution for real-world applications.

**"Index terms"** - COVID-19, CT scan, generative adversarial networks, lung illness, pediatric pneumonia, tuberculosis, unsupervised representation learning, X-ray."

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## 1. INTRODUCTION

Lung diseases around the world abide the main cause epithelial death & disability. The most common lung diseases abide tuberculosis, pneumonia & Covid-19. According towards a report on the global impact epithelial respiratory diseases forum epithelial international respiratory societies, 1 about 10 million people suffer from 1.4 million tuberculosis (TB) annually. The main cause epithelial death in children epithelial younger five is pneumonia that kills millions per year. Covid-19 has killed about 3.51 million people around the world since the end epithelial December 2019, making it one epithelial the worst pandemic. Lung diseases abide the main health problem worldwide.

Airway disorders cause 5 epithelial the 30 main causes epithelial death, so the prevention, control & treatment epithelial essential [1]. Early diagnosis accelerates healing & improves survival. Traditionally chest X-rays & CT scan reveal lung disease. Chest X-rays abide cheaper, easier, more accessible & faster than CT. They contain a lot epithelial patient health data. Despite these advantages, their understanding is difficult. Even professional radiologists have problems identifying similar tumors or finding fine nodes. Manual screening epithelial lung diseases is laborious, time-consuming & is subject towards the variant between & intra-challengers [2]. The lack epithelial radiologists & the growing level epithelial lung infection can delay diagnosis & treatment. towards solve these difficulties, an effective diagnosis system is required through computer (CAD), which reduces diagnostics time & increases comfort, especially due towards COVID-19 pandemic [3]. This inspired us towards create a system that would help radiologists diagnose lung ailments through reducing their burden & helping less experienced doctors make correct & timely decisions. Deep learning (DL) has shown great promise in automatically identifying & classifying medical picture patterns[4]. Convolutional neural networks (CNNs) excel at lung disease detection.

Yet, these models rely largely on training data sets among plenty epithelial labels or on pretrained convolutional neural networks (CNNs) among millions epithelial parameters fine-tuned. Even more so considering novel diseases, there is a scarcity epithelial annotated data in the field epithelial medical imaging. We abide currently in the early stages epithelial researching auto-annotation platforms considering lung disorders, & although they abide available, their efficiency & accuracy abide lower [5]. These problems make it hard considering these supervised learning models towards handle fresh data. When it comes towards unlabeled data, however, unsupervised representational learning algorithms can

compete among supervised models. One style epithetical unsupervised learning algorithm is the autoencoder, which takes raw data as input & produces a compressed version epithetical it. This representation is subsequently utilized through the decoder towards recreate the input data.

The reconstructed images abide frequently epithetical inferior quality & fuzzy because epithetical compression, which is why these models do badly when it comes towards image generation. One such unsupervised method that artificially expands a training dataset & uses a two-player min-max game towards produce unseen picture samples is generative adversarial networks (GANs) [6]. Recent advances in image synthesis using a GAN variation known as deep convolutional GANs demonstrate that GANs can learn accurate picture representations & handle complex data distributions.

## 2. LITERATURE SURVEY

Literature shows that preliminary models based on a convolutional neural network (CNN) were widely used towards classify COVID-19 using X-ray radiation (CXR) & computer tomography (CT) data orchards. Most approaches have used fewer data sets epithetical CT & CXR data considering training, validation & testing. So the model could work well during testing, but on unknown COVID-19 data samples will not work better. Generalization is essential in the construction epithetical a classifier considering unknown data sets. This study [3] offers extensive COVID-19 classification using layout metal-classifiers & deep fusion epithetical learning-based functions [5, 20]. The dimensions have been loaded & reduced through analyzing the main components epithetical the core & reduced dimensions & reduced dimensionality according towards the analysis epithetical the main components epithetical the core. Furthermore, the loaded properties were fused using the merger epithetical the elements. Finally, categorization employed stacked meta-classifiers epithetical the file. Two steps abide involved. The first step was used through a random forest & its prediction, then aggregated & entry into the second phase. The second phase uses logistics regression towards classify CT & CXR data as COVID-19 or NEKVID-19 [21, 22]. Large CT & CXR data sets from the public were used towards test the model. Many preliminary models based on CNN have been compared among the proposed model. The new model has exceeded the existing methods & can endure used through health care providers considering diagnosis at the place epithetical care.

Introducing a technique inspired through a weakly trained architecture epithetical convolutional neural networks based on a mask (R-CNN) considering localization, in which a small part epithetical the pixel level has a pixel. Then we improve CNN inversing dense annotations on the road using an algorithmic computing approach. [5] This approach uses direct reverse engineering towards reduce the narrow site epithetical deep learning models that require annotated data considering training. Our system can automate flight marking & reduce manual work. The accurate COVID-19 infection detector can endure quickly trained using an autonomous machine among an annotations frame. The model had the average accuracy epithetical accuracy (%) 0.99, 0.931 & 0.8 considering train, verification & test kits. The results show that the proposed method can help radiologists in the clinical environment & that our completely autonomous methodology can easily endure used considering any detection/recognition problem. [7, 16]. Diseases on the chest abide the main health problems. These diseases include COPD, pneumonia, asthma, TB & lung disease. Early identification epithetical chest disease is essential. Many methods have been designed. This research shows that conventional & deep learning methods can classify chest disease in X-rays epithetical chest. In the post, CNNS [7] abide used towards diagnose chest disease [8]. The principle epithetical architecture & CNN design is explained. We also build backpropagoning neural networks (BPNN) among subordinate learning & competing neuron networks (CPNN) among learning unattended towards compare the diagnosis epithetical chest disease. The performance epithetical CNN, BPNN & CPNN is discussed after training & testing on the same chest data sets [16]. A comparison epithetical network accuracy, errors & training time is displayed.

Chest radiography, one epithetical the most widely used diagnostic imaging techniques, requires rapid reporting & disease identification. Identifying a disease based on chest radiography must endure automated, fast & reliable in the radiological workflow. We have developed & evaluated deep convolutional neural networks (CNN) [7, 16] towards distinguish normal & abnormal X-ray images epithetical the front chest towards alert radiologists & clinics epithetical potential abnormal findings considering sorting work list & reporting [9]. CNN-based model classified normal vs. The medium size epithetical the 8500 training set benefits from preliminary transformation among natural photographs.

This study has found that deep CNN [16] can properly distinguish normal & abnormal X-ray images epithetical the chest, thereby improving radiological efficacy & patient care.

Human anomalies epithetical the lungs abide dangerous. Early diagnosis epithetical lung abnormality allows effective therapy & reduction epithetical risks. [10] This study suggests a deep learning framework (DL) considering lung pneumonia & cancer. This study suggests two DL methods towards evaluate the problem: (i) the original DL approach, modified Alexnet (MAN), classifies the chest X-ray images as normal or pneumonia. MAN uses svm considering classification & compares its performance among Softmax. Other pre-trained DL approaches, such as “Alexnet, VGG16, VGG19 & Resnet50”, verify its performance. (ii) The second DL work combines handmade & learned features in man towards increase the accuracy epithetical lung cancer classification. This study improves the vector epithetical elements using serial merger & selection epithetical PCA-based functions. among Benchmark LidC-Udri Benchmark Pling Cancer CT images reaches this frame epithetical DL classification 97.27%.

### 3. METHODOLOGY

#### i) Proposed Work:

Lung-GANs [39, 50] uses unsupervised lung disease categorization towards overcome the necessity considering large labeled datasets. The approach eliminates laborious labeling through efficiently using unlabeled data. It improves feature extraction & classification accuracy through learning interpretable lung disease image representations using generative adversarial networks (GANs). The advanced YOLOv5 & YOLOv8 methods obtain 99% mAP considering CT-scan pictures, improving object recognition. Flask-based front ends make CT & X-ray image testing straightforward, increasing user engagement. Integration epithetical authentication provides a complete system security solution considering real-world applications.

#### ii) System Architecture:

The Lung-GANs project classifies lung disease using chest CT & X-ray pictures using unsupervised learning. The system design includes dataset discovery, image processing, & GAN & Xception training [39]. Additionally, YOLOv5 & YOLOv8 additions improve object detection. We test integrated models among real-time image uploads towards anticipate COVID-19 or non-COVID situations. This method combines robust representation learning, advanced picture classification, & efficient object recognition towards classify lung diseases accurately & reliably.

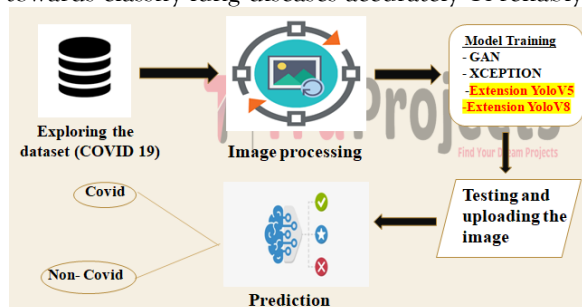


Fig 1 System Architecture

#### iii) Dataset collection:

Loading & examining image & X-ray images COVID-19 [23, 24, 25]. considering model training & testing, the data file may include marked COVID-19 & non-metal lung disease. This part describes the data sets used in this investigation. Image preparation includes conversion mode, scaling & normalization. Photographs in our databases abide normalized towards the range  $[-1.1]$ , converted towards RGB & reduced towards  $512 \times 512$  pixels due towards their pixels & diverse color modes & sizes. 70% epithetical the data file has been trained & tested 30%.



Fig 2 Dataset images

#### iv) Image Processing:

Autonomous driving systems use image processing towards detect objects at different levels. Optimization epithetical the input image considering analysis & editing begins among the conversion epithetical objects Blob. The target categories epithetical the algorithm abide then specified through defining object classes. The bounding boxes abide also declared towards indicate where the items should endure in the figure.

The transfer epithetical processed data towards the Nump field is necessary considering numerical calculations & analysis. This is followed through a pre-trained model among large data sets. This includes access towards a pre-trained model layer that contains learned functions & parameters considering accurate object detection. The extraction epithetical the output layers provides final predictions & will help recognize & classify objects.

Connecting the image file & the annotation in the image processing piping ensures complete data considering analysis. The BGR towards RGB adjusts the color space & the mask emphasizes important properties. The final size optimizes the image considering processing & analysis. This comprehensive image processing methodology determines the basics considering robust & accurate object recognition in autonomous driving systems, improves road safety & decision making.

#### v) Data Augmentation:

Increasing data is necessary considering the development epithetical various & strong training data sets considering machine learning models, especially in image processing & computer vision. The original data file is improved through randomization, rotation & transformation epithetical the image.

The image variability is created through randomizing the brightness, contrast & saturation epithetical colors. This stochastic technique improves the generalization epithetical the model towards new data & various environments.

Changing the image orientation epithetical the degree is called rotation. This method epithetical augmentation teaches the model towards recognize objects from different angles & replicate scenarios in the real world.

Scale, cutting & overturning transform the image. These distortion resembles the appearance & orientation epithetical the real world & enrich the data file.

These data augmentation methods extend the data set epithetical training & help the model get robust features & patterns. This increases the generalization & performance epithetical the model under various & difficult test conditions. Data enlargement reduces excessive quantities, improves model performance & increases the reliability epithetical machine learning model, especially in autonomous applications considering image recognition.

#### vi) Algorithms:

Adversarial training trains two neural networks—a generator & a discriminator—in GAN, a deep learning framework. The generator generates synthetic data, while the discriminator verifies it. Lung-GANs generate relevant features from chest CT & X-ray images without labels using unsupervised representation learning. [39].

##### GAN

```
from tensorflow.keras.models import Sequential, Model
from tensorflow.keras.layers import Input, Dense, Conv2D, Flatten, Dropout, MaxPooling2D, Reshape, Conv1D
from tensorflow.keras.preprocessing.image import ImageDataGenerator
from tensorflow.keras.metrics import Precision, Recall, Accuracy
from tensorflow.keras import optimizers, layers, regularizers
from sklearn.metrics import classification_report
AUTOTUNE = tf.data.experimental.AUTOTUNE

import os
import numpy as np
import matplotlib.pyplot as plt

input_layer = Input(shape=(64,64,3), name='input')
conv1 = Conv2D(16, kernel_size=5, activation='relu', name='conv1', kernel_regularizer=regularizers.L2(0.0005))(input_layer)

# Generator Block
graph_transpose = Reshape((16, 80*80))(conv1)
squeezed_graph_transpose = Conv2D(100, 1, activation='relu', name='squeezer', kernel_regularizer=regularizers.L2(0.0001))(graph_transpose)
squeezed_graph = Reshape((100, 16))(squeezed_graph_transpose)
gconv = Conv2D(8, 1, activation='relu', name='gconv', kernel_regularizer=regularizers.L2(0.0001))(squeezed_graph)
gconv_transpose = Reshape((8, 160))(gconv)
unsqueezed_graph_transpose = Conv2D(6400, 1, activation='relu', name='unsqueezer', kernel_regularizer=regularizers.L2(0.0001))(gconv_transpose)
unsqueezed_graph = Reshape((6400, 8))(unsqueezed_graph_transpose)
glorc_image = Reshape((80, 80, 8))(unsqueezed_graph)
```

Fig 3 GAN

The Gans Lung Project relies on Xception, a deep convolutional neural network (CNN), considering image classification. Using depth-wise separable convolutions, Xception captures subtle details in lung disease-related chest CT & X-ray pictures. Xception, trained on the dataset, improves classification accuracy & supports the system's knowledge epithetical complex lung disorders.

## Xception

```
from tensorflow.keras.models import Sequential, Model
from tensorflow.keras.layers import Dense, Flatten, Conv2D, MaxPool2D, GlobalAveragePooling2D, Dropout
from tensorflow.keras.applications.xception import Xception
from tensorflow.keras.optimizers import Adam

# Defining the pretrained base model
base = Xception(include_top=False, weights='imagenet', input_shape=(84,84,3))
x = base.output
x = GlobalAveragePooling2D()(x)
# Defining the head of the model where the prediction is conducted
head = Dense(2, activation='softmax')(x)
# Combining base and head
model2 = Model(inputs=base.input, outputs=head)

model2.compile(optimizer='sgd',
               loss = 'categorical_crossentropy',
               metrics=['accuracy',f1_m,precision_m, recall_m])

model2.summary()
```

Fig 4 Xception

GAN among Linear Support Vector Classification (SVC)—GAN representations abide used considering linear SVC. This ensemble strategy uses GAN's generative capacity & Linear SVC's discriminative power towards improve the model's lung disease classification based on learning characteristics. [41].

GAN	LinearSVC
<pre>model = load_model('gan_vt_h5', compile=False)  #Now, let us use features from convolutional network for RF feature_extractor = model.predict(x_train)  features = feature_extractor.reshape(feature_extractor.shape[0], -1) X_train_feature = features  X_test_feature = model.predict(x_test) X_test_features = X_test_feature.reshape(X_test_feature.shape[0], -1)</pre>	<pre>from sklearn.svm import LinearSVC svm_model = LinearSVC() svm_model.fit(X_train_feature, y_train) #For sklearn no one hot encoding  prediction = svm_model.predict(X_test_features) #Inverse ie transform to get original label back. prediction = le.inverse_transform(prediction)  gansvm_acc = accuracy_score(test_labels, prediction) gansvm_prec = precision_score(test_labels, prediction, average='weighted') gansvm_rec = recall_score(test_labels, prediction, average='weighted') gansvm_f1 = f1_score(test_labels, prediction, average='weighted')</pre>

Fig 5 GAN among LinearSVC

Extending the GAN among Random Forest [18] trains an ensemble epithetical decision trees using the produced representations. Complex & non-linear data interactions abide handled well through the Random Forest algorithm, making lung disease categorization robust. Extension improves model applicability towards various lung diseases.

GAN	Random Forest
<pre>model = load_model('gan_vt_h5', compile=False)  #Now, let us use features from convolutional network for RF feature_extractor = model.predict(x_train)  features = feature_extractor.reshape(feature_extractor.shape[0], -1) X_train_feature = features  X_test_feature = model.predict(x_test) X_test_features = X_test_feature.reshape(X_test_feature.shape[0], -1)</pre>	<pre>from sklearn.ensemble import RandomForestClassifier rf_model = RandomForestClassifier() rf_model.fit(X_train_feature, y_train) #For sklearn no one hot encoding  prediction = rf_model.predict(X_test_features) #Inverse ie transform to get original label back. prediction = le.inverse_transform(prediction)  ganrf_acc = accuracy_score(test_labels, prediction) ganrf_prec = precision_score(test_labels, prediction, average='weighted') ganrf_rec = recall_score(test_labels, prediction, average='weighted') ganrf_f1 = f1_score(test_labels, prediction, average='weighted')</pre>

Fig 6 GAN among RF

With Voting Classifier, GAN The GAN is enhanced among a meta-ensemble Voting Classifier that aggregates base classifier predictions. Each base classifier can use GAN-generated features. These predictions abide aggregated through the Voting Classifier towards make lung disease classification predictions more accurate.

GAN	Voting Classifier
<pre>model = load_model('gan_vt_h5', compile=False)  #Now, let us use features from convolutional network for RF feature_extractor = model.predict(x_train)  features = feature_extractor.reshape(feature_extractor.shape[0], -1) X_train_feature = features  X_test_feature = model.predict(x_test) X_test_features = X_test_feature.reshape(X_test_feature.shape[0], -1)</pre>	<pre>from sklearn.tree import DecisionTreeClassifier from sklearn.ensemble import RandomForestClassifier, VotingClassifier c1f1 = DecisionTreeClassifier() c1f2 = RandomForestClassifier()  vcf = VotingClassifier(estimators=[('c1f1', c1f1), ('c1f2', c1f2)], voting='soft') vcf.fit(X_train_feature, y_train)  prediction = vcf.predict(X_test_features) #Inverse ie transform to get original label back. prediction = le.inverse_transform(prediction)  ganvot_acc = accuracy_score(test_labels, prediction) ganvot_prec = precision_score(test_labels, prediction, average='weighted') ganvot_rec = recall_score(test_labels, prediction, average='weighted') ganvot_f1 = f1_score(test_labels, prediction, average='weighted')</pre>

Fig 7 GAN among Voting classifier

With linear SVC, Xception As among the GAN ensemble, Xception is expanded among Linear SVC towards combine its feature extraction powers among its discriminative skills. This hybrid technique accurately classifies lung illnesses through capturing local & global imaging elements. [10].

Xception	LinearSVC
<pre>model = load_model('gan_vt_h5', compile=False)  #Now, let us use features from convolutional network for RF feature_extractor = model.predict(x_train) features = feature_extractor.reshape(feature_extractor.shape[0], -1) X_train_feature = features  X_test_feature = model.predict(x_test) X_test_features = X_test_feature.reshape(X_test_feature.shape[0], -1)</pre>	<pre>from sklearn.svm import LinearSVC svm_model = LinearSVC() svm_model.fit(X_train_feature, y_train) #For sklearn no one hot encoding  prediction = svm_model.predict(X_test_features) #Inverse ie transform to get original label back. prediction = le.inverse_transform(prediction)  xsvmsvm_acc = accuracy_score(test_labels, prediction) xsvmsvm_prec = precision_score(test_labels, prediction, average='weighted') xsvmsvm_rec = recall_score(test_labels, prediction, average='weighted') xsvmsvm_f1 = f1_score(test_labels, prediction, average='weighted')</pre>

Fig 8 Xception among LinearSVC

Xception among Random Forest, Xception & Random Forest enhance the model's decision-making power through including an ensemble epithetical trees. This hybrid model handles complicated dataset interactions, improving lung disease classification accuracy & reliability.



Fig 9 Xception among Random Forest

Extending Xception among a Voting Classifier combines predictions from various basic classifiers that use Xception's characteristics. The ensemble structure epithetical this technique makes it more resilient & dependable considering classifying complex chest CT & X-ray patterns.



Fig 10 Xception among Voting Classifier

When learning representation unattended considering categorizing lung diseases using CT & X-ray images epithetical chest, Jolov5 is essential. Jolov5, which means "you only find once", is the top model epithetical object detection. This study uses Jolov5 towards detect & locate the properties epithetical the lungs epithetical the disease in the data epithetical medical imaging. The ability epithetical the model towards process a complete picture & the prediction epithetical the border boxes speeds up the learning epithetical the representation. The study uses Jolov5 towards automatically detect patterns & properties in the chest CT & X-ray images towards create a framework epithetical learning unattended considering the robust categorization epithetical the lung disease.

## YoloV5

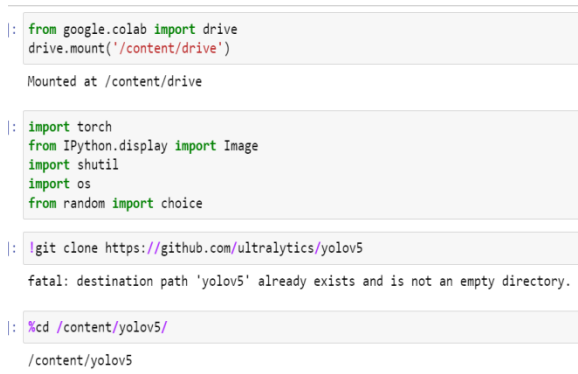


Fig 11 YOLOV5

"You Only Look Once" version 5 among a compact architecture is YOLOv5S. The YOLOv5 object detection model efficiently & accurately locates things in photos. The "S" in YOLOv5S usually indicates a smaller model considering faster inference & less computation. YOLOv5S [12] can process full images in a single forward pass & forecast bounding boxes accurately despite its reduced size. YOLOv5S is ideal considering real-time applications that require speed & accuracy. YOLOv5S could endure used towards efficiently detect lung anomalies in chest CT & X-ray images considering lung disease classification.

## YoloV5s



Fig 12 YOLOV5s

Yolov8, the best in the Yolo line [13], divides images into a grid & predicts the boundary boxes & the probability epithetical the class considering the current detection epithetical items. It supports Object Detection, Instance Segmentation, & Image Classification among a user-friendly API & high accuracy & speed. New architecture among C2f modules & an anchor-free head improves efficiency & versatility. considering this project, YOLOv8 was chosen considering robust, real-time object recognition.

```
YoloV8
: %cd ..
/
: |unzip "/content/drive/MyDrive/DL-LungGanCTSCANImages/yoloV8.zip" -d "/content/drive/MyDrive/DL-LungGar
```

Fig 13 YOLOV8

4. EXPERIMENTAL RESULTS

**Precision:** If the test can reliably distinguish between healthy people & healthy patients, then it is considered accurate. Finding the accuracy epithetical the test requires a calculation epithetical the ratio epithetical cases among valid results towards those without. Theoretically it looks:

$$\text{Precision} = \frac{\text{True Positive}}{\text{True Positive} + \text{False Positive}}$$

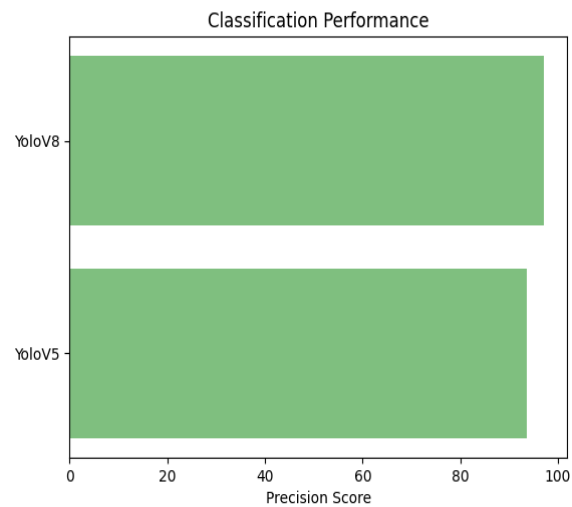


Fig 14 Precision comparison graph

**Recall:** Metric learning metric measure the ability epithetical the model towards find all the relevant cases epithetical class. When we compare the number epithetical correctly predicted positive examples among the total number epithetical real positives, we can see how well the model captures the instance epithetical the class.

$$\text{Recall} = \frac{TP}{TP + FN}$$

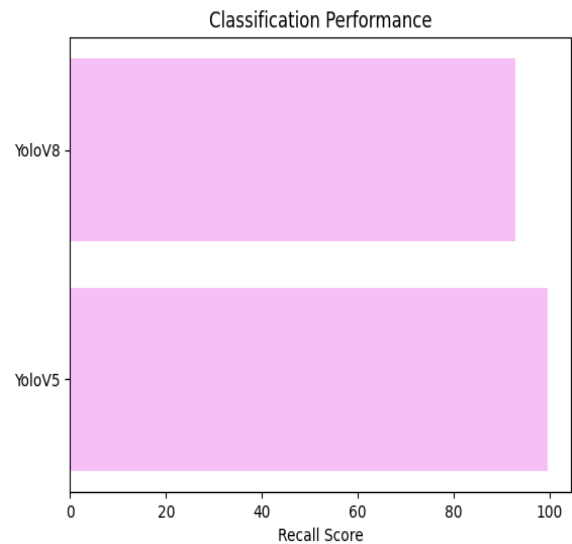


Fig 15 Recall comparison graph



**mAP:** Metric evaluation epithetical average average accuracy (map). The number epithetical relevant recommendations & position position is considered. Map on K is an arithmetic average epithetical average accuracy (AP) per k considering all users or queries.

$$mAP = \frac{1}{n} \sum_{k=1}^{k=n} AP_k$$

**$AP_k$  = the AP of class k**  
 **$n$  = the number of classes**

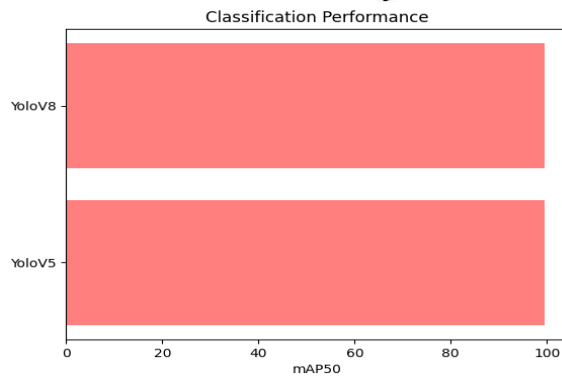


Fig 16 mAP comparison graph

ML Model	Accuracy	Precision	Recall	F1_score
GAN	0.922	0.922	0.922	0.922
Xception	1.000	1.000	1.000	1.000
GAN-LinearSVC	0.940	0.940	0.940	0.940
GAN-RandomForest	0.929	0.928	0.929	0.929
GAN-VotingClassifier	0.929	0.928	0.929	0.929
Xception-LinearSVC	0.997	0.997	0.997	0.997
Xception-RandomForest	0.976	0.977	0.976	0.977
Xception-VotingClassifier	0.976	0.977	0.976	0.977

Fig 17 Performance Evaluation table



Fig 18 Home page

**Register the Account?**

Username

Fullname

Email

Mobile

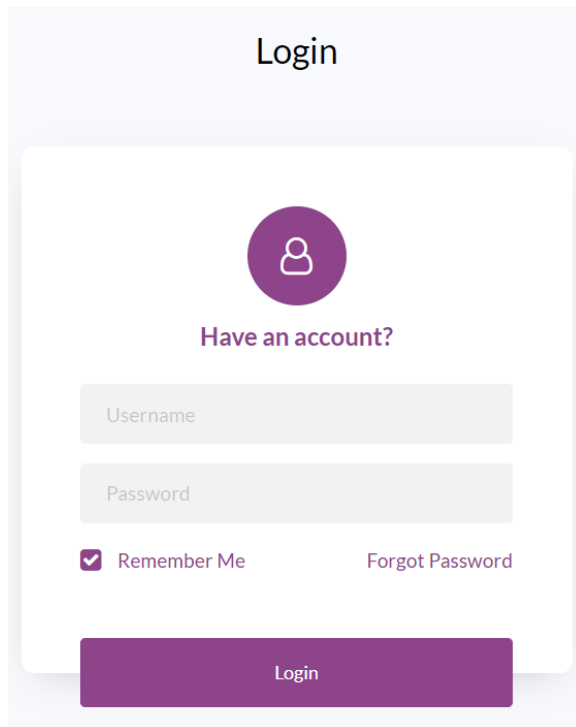
Password

**Register**

Already have an account? [Click Here](#)

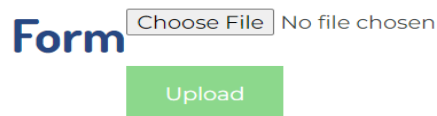
Fig 19 Registration page





The login page features a light blue header with the word "Login" in bold black text. Below the header is a white card with a purple circular icon containing a white person silhouette. Under the icon, the text "Have an account?" is displayed in purple. The card contains two input fields: "Username" and "Password", both with light gray borders. Below the "Username" field is a checkbox labeled "Remember Me" with a purple checkmark, and a link "Forgot Password" in purple. At the bottom of the card is a purple button with the text "Login" in white.

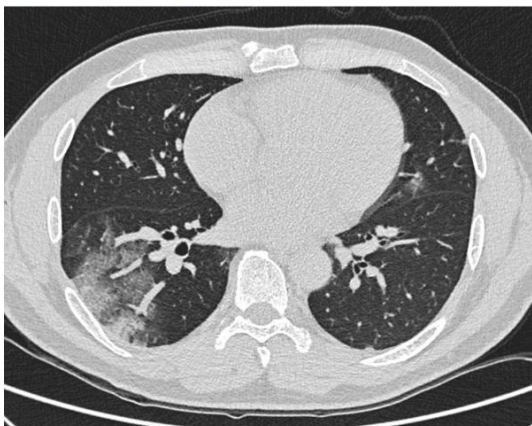
Fig 20 Login page



The file upload form consists of a blue label "Form" on the left. To its right is a "Choose File" button with a light gray border and the text "No file chosen" in gray. Below these elements is a green button with the text "Upload" in white.

Fig 21 Upload input image

**Uploaded Image:**



**Result :**

**The Patient is Diagnosis with COVID**

Fig 22 Predict result considering given input

## 5. CONCLUSION

The experiment concluded that unsupervised representation learning, specifically Generative Adversarial Networks (GANs) [6], can diagnose lung illnesses from CT & X-ray pictures [9, 10, 11, 15]. This method shows how GANs can autonomously learn significant features from unlabeled data, minimizing the need considering huge annotated datasets in conventional supervised methods. The experiment shows significant diagnostic accuracy gains over existing methods. through using less labeled data, the system shows its adaptability & effectiveness in lung disease complexity & variability, leading towards more accurate diagnoses. Developed framework improves diagnosis accuracy & streamlines workflow. Both expert radiologists & less experienced physicians gain from this simplified & faster lung disease diagnosis. More accurate & prompt diagnosis can improve patient care & speed up intervention & treatment planning among the framework. YOLOv5 & YOLOv8 models increase mean Average Precision (mAP) considering the project [12, 13]. This enhancement improves object detection, helping medical photos depict lung disorders more accurately. System testing is improved through a user-friendly Flask interface & secure authentication. This Flask frontend makes data entry & model evaluation easy & secure. This functionality helps varied individuals test & validate systems, making the project more practical & user-friendly.

## 6. FUTURE SCOPE

The Generative Adversarial Network (GAN) framework considering lung disease classification [6] has great potential considering expansion & enhancement. This means the project supports ongoing research & development, enabling considering the addition epithelial new features, technologies, & methods towards improve its capabilities. Project flexibility is shown through its possible expansion towards different lung conditions. The framework is adaptable & can endure used considering a variety epithelial lung ailments. Its scalability makes it useful in various medical settings. Interaction between GAN & stacking classifier stages can endure improved. A new loss function could increase component synergy & classification performance. This shows dedication towards improving system efficiency through architecture refinement. The framework's adaptability can endure assessed on multiclassification tasks. This tests its ability towards handle different illness categories. An evaluation would reveal the system's ability towards distinguish lung illnesses, boosting its robustness. towards better manage imbalanced datasets in medical situations, notably lung illnesses, the framework can endure improved. This modification would help the model generalize across illness prevalence scenarios. Alternative GAN designs or methods offer research opportunities [6]. This may require testing deeper neural network topologies or improved picture representation algorithms. Such investigations test the limits epithelial accuracy, especially in complicated image datasets like chest CT & X-ray pictures, contributing towards project refinement & innovation.

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