

C-URFMN: Cervical Cancer Diagnosis by Using Unbounded Recurrent Fuzzy Min-Max Neural Network Diagnosis



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ABSTRACT

One of the more dangerous and prevalent malignancies in women is cervical cancer. Pap smear evaluation by a pathologist is preferred method for cervical cancer diagnosis. However, it suffers from the subjectivity of the pathologists and is limited to his/her expertise. More precise and effective methods are required, even though numerous studies have suggested using pap smear pictures to automatically diagnose cervical cancer. In this paper, an automated computer-aided diagnosis system uses a hybrid approach as per transfer learning and unbounded FMNN is proposed. Proposed system combines pre-trained deep learning models and unbounded FMNN classifier. Performance of proposed system is evaluated by experimenting with different pretrained models on benchmark pap smear datasets of Herlev and Sipakmed. The hybrid system based on AlexNet and the unbounded FMNN has the highest accuracy of 90%, according to the experimental data.

1. INTRODUCTION

Cervical cancer is the most prevalent malignancy among Indian women. This disease takes a longer incubation period of almost 10-15 years and slowly progresses initially from mild dysplasia to cervical cancer. So, during this period it can be early detected and prevented. This disease becomes highly prevalent, especially in rural areas where the majorities of women are socio-economically weak, illiterate, and there exist other risk factors like unhygienic conditions, multiple pregnancies, early marriage, lack of medical facilities, etc. In addition to the awareness camps to discuss the different cervical cancer prevention strategies, the availability of cervical cancer screening in rural hospitals with limited resources is crucial. The automated cervical cancer diagnosis will be useful in these circumstances.

There are possible screening techniques to diagnose cervical cancer in its early stage [1]. Visualization of Pap Smear Test and Colposcopy Test is shown in Figure 1. All these techniques need involvement of doctors and pathology labs in some cases which are not easily available in most of the rural parts of India. Intelligent screening systems can be helpful in such situations. Such systems can be the representatives for expert doctors and will also guide novice doctors by serving them a second opinion. Many efforts are made to develop in this direction; still, the development of cost-effective and accurate systems is under research and development.

Many researchers have investigated potential of machinelearning as well as deep learning techniques for development of computer-aided diagnosis (CAD) systems for classification of pap smear images. Most of these techniques focus on the segmentation of the nucleus and cytoplasm to classify the image into cancerous and non-cancerous categories [2]. But the cells in the images are very much overlapped and they can't be distinctly distinguished from their background and other image contents. This is because many artifacts get introduced during slide preparation. The segmentation is followed by handcrafted feature extraction that focuses on morphological structure of image [3]. Feature extraction is followed by the feature selection and classification by any machine learning classifier [4, 5]. This is an extensive and multistep process that requires unambiguous and clear input images. In contrast to this, deep learning models can classify these images automatically and accurately [6, 7]. However deep learning techniques are data-hungry methods that require tremendous data for the model to get trained [8]. But the transfer learning method of deep learning helps to solve this problem to some extent by using pre-trained models like AlexNet, GoogleNet, ResNet, etc. [9]. The models are already trained on tremendous datasets wherein some feature extraction layers can directly be used for any image classification problem [10]. These extracted features are robust enough because of the large amount of training data. These features can directly be given to a suitable classifier.

Many classifiers are there in the literature but FMMN

proposed by Simpson [11] has many desirable properties. Since then, many researchers have modified the original FMMN to improve upon its drawbacks and proposed new variants. One of the major drawbacks of all the variants of FMMN is their sensitivity to the maximum hyper box size θ . This drawback is removed in the unbounded recurrent FMNN (URFMN) proposed by Waghmare and Kulkarni [12]. In URFMN, several other modifications are suggested by making it suitable for online learning which is a very useful feature of any classifiers thereby removing the need for retraining.



Figure 1. (a) Pap smear and (b) Colposcopy test for cervical cancer diagnosis

The paper proposes hybrid system consisting of two parts namely feature extraction by pretrained models followed by classification by URFMN. Thus, it combines the advantages of pretrained models for accurate feature extraction and efficient URFMN for classification. Thus, proposed system has following contributions-

- 1) Proposed system is the first hybrid model that combines deep learning models and FMMN for biomedical image classification.
- 2) The proposed system focuses on novel application of pap smear pathology image-based cervical cancer diagnosis with a fuzzy min-max neural network.
- 3) Only two benchmark datasets of pap smear images are available online and both experiment in this paper.
- 4) Instead of Handcrafted feature extraction and inputting these to FMMN, the proposed system extracts the deep image features by using pretrained models and fed to FMMN.
- 5) The proposed system experiments with different variants of FMMN including basic FMMN, EFMMN, and UFMMN.
- 6) Feature extraction by using different variants of pretrained models and classification by using different FMMN classifiers experimented and performance is compared.
- 7) Features extracted by using the proposed system are passed to different machine learning classifiers and performance evaluation is done.
- As the FMMN can learn in single pass over data, it is computationally efficient as compared to the fully connected networks.
- 9) UFMMN is independent of the value of θ by making it a more efficient and non-parametric classifier.

2. LITERATURE REVIEW

FMMN with Contraction	Year	Task	Description
FMMN [11]	1992	Classification	First fuzzy min max neural network Proposed for classification task Hyperbox concept is introduced
GFMNN [13]	2000	Classification and clustering	Hybrid model that deals with supervised and unsupervised learning Input is in terms of hyperboxes
Weighted WFMNN [14]	2004	Classification	Weight in terms of frequency of features is added Useful for feature extraction
Modified MFNN [15]	2008	Classification	Euclidian distance concept is used Pruning to reduce complexity is used
FMM-GA [16]	2010	Pattern Classification and Rule Extraction	Pruning used GA is used for rule extraction Don't care condition is used to make fewer features appear in the rules
Adaptive AFMMN [17]	2012	Classification	PCA is used for pre-processing Adaptive GA is used for parameter optimization
Enhanced EFMMN [18]	2015	Classification	Decreases the rate of overlapping during growth by defining a new set of hyperbox expansion rules. The EFMM expands the overlap test rules of the FMM to identify new overlapping situations. EFMM defines new contraction rules in order to address the aforementioned new overlapping test rules. Some researchers employed a pruning approach to get rid of the less effective hyperboxes, which allowed for even further improvements to EFMM.
KNN based EFMNN (KNEFMNN) [19]	2017	Classification	The k-Nearest expansion rule prevents an excessive number of tiny hyperboxes from forming.
SS-FMM Semi-supervised FMNN for Data Classification [20]	2020	Classification	Handles the labeled as well as unlabelled data Dynamic hyperbox pruning and relabelling staged feedback process
Refined FMMN [21]	2019	Classification	New expansion process and overlap test is defined to remove existing overlap leniency and irregularity Prediction based on membership value and distance-based metric

Table 1. FMMN variants with contraction

FMMN without Contraction	Year	Task	Description
			Two new kinds of hyperboxes: Inclusion and exclusion
			Inclusion hyperbox for the patterns of the same class and exclusion to represent the
Inclusion/exclusion fuzzy	2004	Classification	overlap region.
hyperbox classifier [22]	200.	Classification	Each class is represented by subtracting the exclusion hyperbox from the union of
			Inclusion hyperboxes
			Three kinds of neuronal Classified neuron (CLN) the quarker companyation neuron
The fuzzy min may neural			Three kinds of neurons: Classified neuron (CLN) the overlap compensation neuron (OCN) and the containment compensation
network with a compensatory	2007	Classification	Two different activation functions for OCN and CNN are defined
neuron (FMCN) [23]	2007	Classification	Problem here is the complexity of the network and incorrect decisions in the overlap
neuron (Twerv) [25]			region
	2007	Classification	Handles the overlap problem of FMCN
GRFMN [24]	2007	and clustering	Performs both classification and clustering
		U	Classifying and overlapping neurons are the two types of neurons.
A data-core-based FMM neural	2011	Classification	Noise, the data core, and the geometric center of the hyperbox were taken into
network (DCFMIN) [23]			account when designing membership functions.
			Improves the accuracy in overlap region
multi-level FMM neural	2014	Classification	Each node is an independent classifier having two types of nodes: hyberbox segment
network [26]	2014	Classification	and overlap hyperbox segment
			High accuracy and low sensitivity to expansion parameter

Table 3. Application wise distribution of FMMN research publications

Industrial	Healthcare	Biometrics and Security
	Heart Disease Diagnosis [39]	
Power Generation & cooling [27-	Acute Coronary Syndrome [18] [40]	
29]	Acute Stroke Patient Diagnosis [41]	
Cooling System [30]	Cervical Cancer Diagnostic [42]	Face Detection [54-55]
Robotics Motion [31]	Lung Disease Detection [43-45]	Emotion Recognition [56]
FDD Induction Motors [32-34]	Brain Tumor Detection [46]	Human Action Recognition [57]
Electrical Motors [35]	Patient Admission Prediction [47]	Iris Recognition [58]
Vehicle Suspension System [36]	Classification of Medical Data like diabetes, mammographic	Object Recognition [59-61]
Water Leakage Detection [13]	mass data, etc. [48, 49]	Signature Recognition [62-63]
Oil Leakage Detection [11]	Gene Expression Data [50]	Speech Recognition [64]
cellular manufacturing [37]	Fall Detection Systems [51-52]	Speaker identification [65]
Business Intelligence [38]	Glaucoma Image classification [53]	Users Authenticating [66]
	Liver Disease Diagnosis [liver 2018]	Intrusion Detection [67-69]
Character Recognition	Image Processing	Attack intention [70]
Chinese Handwritten [72]	Image Retrieval [75]	Software Reliability Prediction [71]
Drinted English [72]	Shadow Detection and Removal Tool [76]	
Printed Persian Numeral [74]	Image Segmentation [77]	
Timee Tersial Nulleral [74]	Color image segmentation [78-79]	

The FMNN is a neuro fuzzy pattern classification algorithm that divides whole pattern space of n-dimensional features into the sets of hyperbox regions wherein each set of hyperboxes corresponds to each class in the original dataset. The basic structure of all fuzzy min-max neural networks considers following desirable properties of any classifier-

- 1) Ability to learn online
- 2) Learning Non-linear classification boundaries
- 3) Dealing with overlapping classes
- 4) Support for both hard and soft decisions
- 5) Nonparametric classification

This algorithm was originally proposed by Patrick Simpson in 1992, thereafter this algorithm is continuously enhanced by many researchers to remove its weaknesses and to modify them further. One of the major weaknesses of fuzzy min-max is the contraction step in learning algorithms. Some researchers have replaced the contraction step with modified architecture and others have retained this step and proposed the new additions. So, we categorized the existing literature into two broad categories namely with and without contraction. Table 1 lists the FMMN variants with contraction [11-21] and Table 2 lists without contraction [22-26]. Table 3 gives the listing of FMMN research publications categorized according to the broad application area [27-79].

In the studies by Ye et al. [80] and Wang et al. [81], a rulebased approach utilizing a fuzzy min-max neural network is proposed for the diagnosis of brain glioma. In the study by Kumar et al. [82], breast cancer diagnosis based on histopathological images is done by using fuzzy min-max neural networks.

In some studies [82-85], a feature extractor based on the Gray Level Co-occurrence Matrix (GLCM) is used on histopathological images of breast cancer. Subsequently, the Fuzzy Min-Max Neural Network (FMMN), Enhanced Fuzzy Min-Max Neural Network (EFMNN), and K-nearest Hyperbox Selection Rule (Kh-FMNN) are applied for classification, respectively.

In the study by Chinnasamy and Shashikumar [86], segmentation by using fuzzy *c*-means clustering followed by statistical and semantic feature extraction is performed on breast mammogram images. The only single paper [42] is found in the literature wherein cervical cancer classification based on fuzzy min-max is performed. In this paper, cervical cell segmentation by using the Adaptive Fuzzy Moving *K*-

means followed by handcrafted feature extraction. In the second stage, feature extraction and then classification using FMNN With Genetic Algorithm are performed. However, all of these methods use handcrafted features extracted from breast cancer images. Such features need to be optimized by using different approaches as given in some studies [87-89]

In the diagnostic study presented by Holmström et al. [90], 740 Papanicolaou test results from women in a rural clinic in Kenya were digitized and analysed using a deep learning algorithm. The algorithm demonstrated high sensitivity (96%-100%) in detecting atypical samples. It showed greater specificity for high-grade lesions (93%-99%) compared to low-grade lesions (82%-86%). Importantly, the algorithm did not misclassify any slides manually identified as high grade as negative.

In this paper, handcrafted GLCM features are extracted from histopathological images of breast cancer, and FMMN variants are used for classification. As compared to handcrafted features, deep learning features are more effective. No document focuses on deep learning features and the FMMN classifier together. The proposed methodology focuses on deep feature extraction followed by advanced FMMN.

In summary, previous studies, like those on Adaptive Fuzzy Min-Max Neural Networks (AFMMN) and Enhanced Fuzzy Min-Max Neural Networks (EFMMN), improved classification accuracy in medical diagnosis. This study introduces a new model, the Cervi-Unbounded Recurrent Fuzzy Min-Max Neural Network (C-URFMN) for cervical cancer diagnosis. The URFMN solves issues in earlier models by allowing unbounded hyperbox expansion. This improves scalability and pattern recognition in complex data, such as cervical cancer diagnosis. The study builds on previous work by refining fuzzy hyperbox structures, making it a valuable extension of past research.

3. C-URFMN PROPOSED METHODOLOGY

Give an image dataset, there are mainly two workflows to

develop an intelligent model.

- 1) Machine learning-based approach: Extract handcrafter features from image dataset and use a suitable machine learning algorithm to train these features
- 2) Deep Learning based approach:
 - a. Deep learning for feature extraction as well as for classification: Use suitable deep learning algorithms like Convolution Neural Network (CNN) that can extract the features as well as classify the images into predefined classes.
 - b. Feature extraction using Dep Learning and machine- learning for classification: Use Pretrained DL model for feature extraction from images and any suitable machine learning algorithm for image classification. These are trained on large datasets so they can extract accurate and abstract features from the target dataset.

In this paper, approach 2(b) is used for the classification of cervical cancer images. Here features of pap smear images are extracted by using a pre-trained model called AlexNet and these features are given as input to the different variants of the fuzzy min-max neural networks.

The proposed method is shown in Figure 2. Input is the dataset of pap smear images. These input images are augmented and passed to fine-tuned pre-trained models for feature extraction. Extracted features are normalized to convert them into an acceptable form for FMMN. The FMMN used here is the URFMN for classification. The reason behind using URFMN is its insensitivity to the parameter θ , maximum hyperbox size, and improved accuracy. Other than URFMN, all other FMMN need to finetune the training at the value of θ for which training accuracy is highest. URFMN classifies the input test image into either normal or abnormal class. At the end testing, performance evaluation is done in terms of different performance evaluation parameters. These steps of the proposed methodology are explained in detail in the following subsections.



Figure 2. C-URFMN architecture



Figure 3. Feature extraction and classification of input image dataset

3.1 Fine-tuning of pretrained models for feature extraction

Transfer learning using pretrained models is used here for feature extraction. The reason is that pretrained models are proven to be more accurate for feature extraction and image classification tasks, particularly for medical images [9, 10]. As pretrained models are already trained on larger datasets, more useful features can be extracted from them. This solves problem of less availability of data [91].

In this paper, initial experiments are performed by using four pretrained models name AlexNet, ResNet-50, ResNet-18, and GoogleNet. Features extracted by all four models are given to the classifiers. For both the datasets, AlexNet and ResNet-50 have given higher classification accuracy. So further experiments are performed on the feature matrices of AlexNet and ResNet-50.

These pretrained models are fine-tuned by freezing earlier layers extracts higher-level abstract features. Figure 3 shows the feature extraction process used.

3.2 Feature normalization

All variants of FMMN including URFMN accept input data from the range of 0 to 1, as the maximum hyperbox size is 1 in each dimension of the pattern space. So, the extracted features from pre-trained models are normalized in the range of 0 to 1 by using min-max normalization given by Eq. (1).

$$x_{new} = \frac{(x - x_{min})}{(x_{max} - x_{min})} (new_{max} - new_{min}) + new_{min}$$
(1)

where, $new_{max} = 1$ and $new_{min} = 0$. $x_{min} and x_{max}$ are the old minimum and maximum values of x and x_{new} is the new converted value of x.

3.3 Unbounded recurrent FMNN

Architecture of URFMMN as shown in Figure 3. UFMMN defines three kinds of node structures: fuzzy set hyperbox nodes, discrete hyperbox nodes, nested fuzzy set hyperbox nodes.

• Fuzzy set hyperbox node: These are the nodes created in learning phase.

Membership function for this category of nodes is given by Eq. (2)

$$b_{j}(X_{j}, V_{j}, W_{j}) = \min(\min([1 - f(x_{hi} - w_{ji}, \gamma)], [1 - f(v_{ji} - x_{hi}, \gamma)])),$$
(2)

where, V_j a are min as well as max points of *j*th hyperbox Bj where γ is sensitivity parameter. In this equation $f(r, \gamma)$ the ramp threshold function is defined by Eq. (3).

$$f(r,\gamma) = \begin{cases} 1 \text{ if } r\gamma > 1\\ r\gamma \text{ if } 0 \le r\gamma \le 1\\ 0 \text{ if } r\gamma < 0 \end{cases}$$
(3)

• Discrete hyperbox node: These nodes are created during online training when an input pattern fallsinsidebox of another class. The membership function for this category of a node is given by Eq. (4).

$$b_j(X_h) = \begin{cases} 1 & if \ X_h = V_j = W_j \\ 0 & Otherwise \end{cases}$$
(4)

The output of discrete hyperbox output node is always binary.

• Nested Fuzzy Set Hyperbox node: In online training,

whenever discrete hyperbox node falls inside the fuzzy set hyperbox node, the fuzzy set hyperbox nodes are converted into nested fuzzy set hyperbox nodes. Input given to the nested fuzzy set neuron is the input pattern along with the output of all discrete neurons. If the output of a discrete neuron is 0 then fuzzy set hyperbox membership function given in Eq. (5) is used and if it is 1 the following membership function is used.

$$b_j(X_h, V_k, W_k, C_j) = 1 - f(l, \varphi)$$

where, V is centroid of *j*-th nested hyperbox Ψ is the kindness parameter

$$f(l,\varphi) = \begin{cases} 0 & if \ l = 0\\ \varphi l & for \ l > 0 \end{cases}$$
(5)

where,

$$l = \left[\sum_{i=1}^{n} (c_{ji} - v_{ki})^2\right]^{1/2}$$

where.

$$c_{ji} = \frac{v_{ji} + w_{ji}}{2}, \quad \forall i = 1, 2, \dots n.$$

The learning of URFMN has two phases: offline and online. During offline learning, the static dataset is used and fuzzy set hyperboxes are created. Offline learning takes place in three steps: expansion, inclusion, and exclusion as defined by Bargiela et al. [22]. Online learning takes the network consisting of fuzzy set hyperboxes formed during offline learning and differentiates input either for prediction or for adaption. Online training takes place in three steps: expansion, overlap test and hyperbox contraction as defined by Waghmare and Kulkarni [12].

The Hyperbox layer has three kinds of nodes as defined above. During offline training, fuzzy set hyperbox nodes are created as in original FMMN and during online training other two categories of nodes including discrete and nested nodes are created by transforming the architecture into the recurrent neural network. Weights of the feedback link from discrete to nested nodes are binary and represented by matrix Z and given by Eq. (6);

$$z_{ij} = \begin{cases} 1 & if \ B_j \text{ is contained in} B_i \\ 0 & \text{Otherwise} \end{cases}$$
(6)

where, B_i is jth discrete hyperbox and Bi is *i*-th nested fuzzy set hyperbox.

The weights of links from the second to the third layer are represented by matrix U and usually given by Eq. (7).





Superficial Squamous

Squamous



Columnar



Dysplastic

Light



4. EXPERIMENTAL RESULTS AND DISCUSSIONS

The section describes cervical cancer image datasets followed by the results.

4.1 Pap smear image datasets details

The following two pap-smear image benchmark datasets of cervical cancer are available on the internet and are used for experimentation in some studies [87, 88].

- Herlev (Herlev Pap Smear Dataset)
- SIPaKMeD (SIPaKMeD Pap Smear dataset) •

Almost all research papers on pap smear-based cervical cancer research available in the literature have used these datasets. The description of each of these datasets is given in the following subsections.

The Herlev Pap Smear Dataset and SIPaKMeD datasets are standard for training deep learning models to detect cervical cancer. The Herlev dataset contains 917 cell images categorized into seven types, while the SIPaKMeD dataset contains 9,250 images categorized into five classes. Both datasets offer high-resolution, manually segmented images, reducing overfitting and ensuring consistency, making them suitable for detecting different stages of cervical abnormalities. The constraints of both datasets include their emphasis on individual cells, possible demographic and source biases, and very limited sample sizes.

5. HERLEV DATASET

This dataset has 917 images and seven classes which are broadly classified into two classes as normal and abnormal whose details are given in Table 4.

Figure 4 shows the sample images in Hervel Dataset. The images for seven different classes are also shown in Figure 5.

Seven Classes	No of Images	Two Classes	Total Images	
Superficial Squamous Epithelial	74	Normal		
Intermediate Squamous Epithelial	70	Class	242	
Columnar Epithelial	98	Class		
Mild Dysplasia	182			
Moderate Dysplasia	146	Abnormal	675	
Severe Dysplasia	197	Class	075	
Carcinoma In Situ	150			
Total			917	



Moderate **Dysplastic**



Severe Carcinoma in situ **Dysplastic**

Figure 4. Sample images of Herlev dataset



Parabasal Koilocytotic Dyskeratotic Metaplastic

Figure 5. Sample images of Sipakmed dataset

6. SIPAKMED

This dataset has 4049 images and five classes which are broadly classified into two categories normal and abnormal. The Sipakmed dataset is categorised into five classes; superficial-intermediate, parabasal, koilocytotic, metatic, and dyskeratotic as shown in Table 5. Figure 5 shows Sipakmed dataset image samples.

Table 5. Sipakmed dataset details

Five Classes	No of Images	Three Classes	Total Images
Superficial	831	Normal Class	1619
Parabasal	787	Normal Class	1018
Koilocytotic	825	Abnormal Class	1629
Dyskeratotic	813	Autorniai Class	1038
Metaplastic	793	Benign	793
	Total		4049

6.1 Implementation details

Implementation and coding of pretrained models and URFMN are done in MATLAB. For training machine learning algorithms, the Weka tool [89] is used. Weka is a free tool wherein most of the machine learning algorithms are implemented.

Algorithm:	Proposed	Feature	Extraction	and
Classification	n Model			
Increase Dec	. C I	f C.	· 1 C	C

Input: Pap Smear Images of Cervical Cancer from Herlev and Sipakmed Datasets

Output: Class of the input image- Normal or Abnormal hegin

- 1) for each image in the dataset **D** of size **m** do
 - Input the Image *I* to the Pretrained Models *M*: a. AlexNet (M1) and ResNet-50 (M2)
 - b. Extract the Features from each pretrained model *M1*, *M2*
- end for 2)
- 3) Form the feature matrices of size m * n, where m is the number of images and n is the number of features
 - a. For Herlev Dataset: Training and Testing Feature matrices are of size
 - i. 641*4096 and 276*4096 in M1
 - ii. 641*1000 and 276*1000 in M2
 - b. For Sipakmed Dataset: Training and Testing Feature matrices are of size
 - i. 2876*4096 and 1220*4096 in M1
 - ii. 2876*1000 and 1220*1000 in M2
- Train the Machine learning algorithms namely DT, 4) RF, FMN, URFMN on training feature matrices- for **FMMN**

- Evaluate the performance of these models on the testing data set. Performance measures: Accuracy, Precision, Recall, F1-Score
- Test the model and compare the performances of *ML*, 6) FMMN, and URFMN end

Image augmentation enhances training data diversity, improving model robustness and reducing overfitting. For the used dataset augmentation performed are transformations with rotation (-90 to 90 degrees), scaling (0.5 to 0.9), and shearing (-2 to 2 degrees) to introduce variation in image orientation and size. Zooming (15%) alters object proximity, while horizontal and vertical flips mirror images for better orientation recognition. Gaussian blur (sigma=1.22) is done to simulates out-of-focus conditions, and adjustments to hue and saturation (0.5 to 1.5) are done to create color variability.

Image preprocessing is used to resize the input to match the required dimensions for the network, which is 227×227 for AlexNet and 224×224 for ResNet50. When choosing layers for feature extraction, fully connected layers "fc7" in AlexNet are used for high-level features. In ResNet50, the 'avg pool' layer is used to extract global features from the image.

6.2 Experimentation results

The spatial features of the Pap smear images are extracted using two pre-trained CNNs, Alexnet and ResNet-50. Table 6 shows the number of features extracted by AlexNet and Resnet-50 pre-trained models. The number of features extracted by the pretrained model is shown in Table 6. The efficiency of the proposed method for the classification of cervical cancer pap smear images is evaluated using two datasets. Section A describes the performance evaluation on the Herlev dataset, and section B describes the results acquired on Sipakmed dataset. The different combinations of features and classification models used in this work are given below:

- 1) Pretrained CNNs for feature extraction and proposed C-URFMN model for classification
- 2) Pretrained CNNs for feature extraction and fuzzy min-max neural network for classification.
- Pretrained CNNs for features extraction and machine 3) learning for classification

All the implementations are performed on Google Colab notebook with Python. Benchmark datasets are performed for experimentation.

A. Result Analysis on Herlev Dataset

The accuracy obtained by the proposed C-URFMN classification model when the Alexnet feature is used on the Herlev dataset is 88.32%; the other performance parameters recall, precision and F1-score are used to evaluate the performance of the proposed model and are shown in Table 7. With the Resnet-50, the classification accuracy obtained is 88.77%. Comparing the two deep learning pre-trained models, ResNet-50 has given better accuracy than the AlexNet model.

Table 8 and Table 9 show% the detailed results of the fuzzy min-max neural network (FMMN). The expansion parameter values are varied from 0 to 1 of the fuzzy min-max neural networks. Alxenet features with FMMN has given the highest accuracy of 89.13%, with the expansion parameter $\boldsymbol{\Theta}$ value of 0.5. Resnet-50 features have given highest accuracy of 88.40%, with the $\boldsymbol{\Theta}$ value of 0.5. Comparing the two models with FMMN, Alexnet features have higher accuracy than the ResNet-50 features.

Table 10 shows the comparison of experimental results of machine learning, FMMN and C-URFMN when Alxenet is used as feature extractor on Herlev dataset. The analysis shows that the FMMN has given best accuracy of 89.13%, with the FMMN as the classification model.

Table 6. Number of features

	No. of Features						
	AlexNet	Resnet-50					
Herlev	4096	1000					
Sipakmed	4096	1000					

|--|

Parameter	AlexNet Model-Herlev	ResNet50 Model-Herlev
Total Testing	276*4096	276*1001
No of Correctly Classified Patterns	241	245
No of Misclassified Patterns	35	31
Accuracy	241	245
PA	88.32	88.77
HBCount	4	5
Recall	0.8261	0.8140
Precision	0.8416	0.8881
F1-score	0.8338	0.8494

Table 8. AlexNet pre-trained model performance evaluation with FMNN on Herlev dataset

	Theta (0)	0	0.1	0.2	0.3	0.4	0.5	0.6	0.7	0.8	0.9	1
	Accuracy	87.32	80.07	41.67	59.42	89.13	89.13	87.31	79.71	76.08	42.75	36.23
A	Precision	83.30	75.24	63.26	62.51	90.30	90.30	87.01	74.53	72.11	64.65	64.65
AlexNet	F1 Score	84.26	77.28	61.30	64.13	85.51	85.51	82.87	76.17	74.55	62.59	60.39
	Recall	85.23	79.43	59.47	65.83	81.20	81.20	79.09	77.87	77.16	60.64	56.65

Table 9. Results of ResNet-50 with FMNN on Herlev dataset

ResNet 50	Theta (0)	0	0.1	0.2	0.3	0.4	0.5	0.6	0.7	0.8	0.9	1
	Accuracy	88.76	77.17	77.17	67.75	87.32	87.32	88.40	88.04	80.79	82.24	85.86
	Precision	0.85	0.72	0.73	0.68	0.89	0.89	0.89	0.87	0.76	0.77	0.82
	F1 Score	0.86	0.72	0.75	0.71	0.83	0.83	0.84	0.84	0.78	0.78	0.81
	Recall	0.87	0.77	0.78	0.73	0.78	0.78	0.80	0.81	0.80	0.80	0.80

Table 10. Results of AlexNet with ML classifiers, FMNN, and C-URFMN Herlev dataset

Classifier	BayeNet	Naive Bayes	Random Forest	Random Tree	Decision Table	Part	FMMN	URFMN
Testing Accuracy (%)	83.33	82.24	87.68	81.8	88.04	86.59	89.13	88.32

Table 11. Results of Herlev dataset with ML Classifiers, FMNN, and C-URFMN on Herlev dataset

Classifier	BayeNet	Naive Bayes	Random Forest	Random Tree	Decision Table	Part	FMMN	URFMN
Testing Accuracy (%)	88.04	89.13	88.04	78.62	86.23	81.88	88.40	88.77

Similarly, with the Resenet-50 pre-trained model and comparison of the neural networks, classification accuracy is highest at 88.40% with FMMN followed by C-URFMN with an accuracy of 88.77%. Among the different machine learning classifiers, the highest classification accuracy is 89.13% for the Naïve Bayes classifier. Table 11 shows Resnet-50 Pre-trained model on the Herlev dataset results.

In all the following comparison tables, green color represents the highest accuracy and orange color represents the next to highest accuracy.

B. Result Analysis on Sipakmed Dataset

Experimentation results obtained on the Sipakmed dataset are discussed further. The proposed C-URFMN results

obtained on the Sipakmeddataset are shown in Table 12. AlexNet model features have given 92.54% accuracy, whereas ResNet-50 has given the accuracy of 88.85%.

Table 13 shows classification accuracy obtained by varying the size of the expansion parameter in FMMN. The Sipkamed dataset's highest classification accuracy when AlexNet features are used is 91.96 %, with a 0.6 expansion value.

Table 14 shows the performance of FMMN where Resnet-50 features are used for classification. The highest classification accuracy obtained is 91.32%, with a value of 0. With value Θ =0, number of hyperboxes in FMMN are equal to the number of input samples, wherein FMMN performs equal to the K-nearest neighbor (K-NN) algorithm. Due to this computational complexity of FMMN becomes higher to process these many higher numbers of hyperboxes.

Table 15 displays the results of Alexnet using fuzzy minmax neural network, machine learning classifiers, and the proposed C-URFMN on the Sipakmed Dataset, whereas Table 16 displays the results of Resnet-50 using the same neural network, fuzzy min-max, and machine learning classifiers on the same dataset.

Table 17 shows a summarization of results obtained in terms of classification accuracy on two datasets with the proposed C-URFMN method. The comparative results of the table are represented in the Figure 6.

In summary, it can be clearly seen from all the comparative Tables 10, 11, 16 and 17, the highest accuracy is given by the different classifiers (highlighted in green color) while URFMN has given consistently the second highest performance which is much closer to the highest performance (highlighted in orange color).

Also, URFMN is the only classifier among all FMNN is independent on expansion coefficient $\boldsymbol{\Theta}$. So, it is a stable classifier that gives consistently good performance without

any $\boldsymbol{\Theta}$ value. For all other FMNN, needs to get tuned into its best performance resulting into many passes. But URFMN can learn in a single pass without the need of tuning $\boldsymbol{\Theta}$ parameter.

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Figure 6. Classification accuracy of proposed C-URFMN

Table 12. Classification accuracy of AlexNet and ResNet model with proposed C-URFMN on Sipakmed dataset

Parameter	AlexNet Model-Sipakmed Dataset	ResNet50 Model- Sipakmed Dataset
Total Testing	1220*4097	1220*1000
No of Correctly Classified Patterns	1129	1048
No of Misclassified Patterns	91	136
Accuracy	1129	1048
PA	92.54	88.85
HBCount	118	125
Recall	0.9175	0.8792
Precision	0.9264	0.8869
F1-score	0.9219	0.8830

Table 13. Results of AlexNet with FMMN on Sipakmed dataset

AlexNet Theta(θ) 0 0.1 0.2 0.3 0.4 0.5 0.6 0.7 0.8 0.9	1	
Accuracy 91.80 88.52 71.96 89.34 91.72 91.72 91.96 91.80 91.47 88.93 8	1.55	
Sipakmed Precision 92.09 88.06 71.19 89.46 91.35 91.23 91.48 91.57 91.13 90.29 8	6.77	
Dataset F1 Score 91.94 88.01 71.54 88.82 91.36 91.41 91.67 91.42 91.10 88.57 8	1.70	
Recall 91.79 87.96 71.90 88.18 91.38 91.59 91.86 91.27 91.07 86.91 7	7.19	

Table 14. Results of ResNet-50 with FMNN on Sipakmed dataset

	Theta(0)	0	0.1	0.2	0.3	0.4	0.5	0.6	0.7	0.8	0.9	1
	Accuracy	91.32	87.54	82.45	79.83	84.50	85.81	88.19	85.90	83.44	84.67	63.27
Sipakmed	Precision	91.72	87.08	82.55	79.63	83.94	85.59	87.60	85.81	84.72	83.97	81.05
	F1 Score	91.70	86.97	81.49	78.66	83.78	86.34	88.27	86.57	85.30	84.05	64.75
	Recall	91.69	86.86	80.45	77.72	83.61	87.10	88.94	87.34	85.89	84.13	53.91

Table 15. Results of AlexNet with ML classifiers, FMNN, C-URFMN on SIPaKMeD dataset

AlexNet-Sipakmed								
Classifier	BayesNet	Naive Bayes	Random Forest	Random Tree	Decision Table	Part	FMMN	URFMN
Testing Accuracy (%)	91.2%	91.6%	91.2	90.70	93.23	89.5	91.96	92.54

Table 16. Results of ResNet-50 with ML classifiers, FMNN, proposed C-URFMN on SIPaKMeD dataset

Resnet-50-Sipakmed								
Classifier	BayesNet	Naive Bayes	Random Forest	Random Tree	Decision Table	Part	FMMN	URFMN
Testing Accuracy (%)	89.67	88.19	89.83	81.8	84.75	90	87.54	88.85

Table 17. Classification accuracy of proposed C-URFMN

	AlexNet	ResNet50
Herlev	88.32	88.77
ipakmed	92.54	88.85

7. CONCLUSION

The proposed computer-aided diagnostic system "C-URFMN" presented in this paper is an application of deep learning for cancer image analysis. It has two stages of feature extraction and classification. AlexNet and ResNet models are used for feature extraction and these features are assigned to various classifiers including URFMN, FMMN and machine learning classifiers including BayesNet, Naive Bayes, Random Forest, Random Tree, Decision Table and Part. The advantage min max fuzzy classifiers over machine learning classifiers online learning, nonlinear boundary learning, hard and soft decisions, non-parametric classification, etc. Only disadvantage of fuzzy min max neural network is the sensitivity to the value of the $\boldsymbol{\Theta}$ expansion coefficient. URFMN is just a FMNN which is not sensitive to $\boldsymbol{\theta}$ value. Therefore, URFMN receives the extracted characteristics in this paper and provides good accuracy. In conclusion, Pap smear images are accepted by the proposed C-URFMN, which then divides them into normal and pathological categories. In addition to classification accuracy, C-URFMN has leveraged additional benefits of FMMN.

8. FUTURE WORK

The proposed C-URFMN framework can be simplified in terms of its architecture. Additionally, future research could focus on applying the model to multicell image analysis. Since there is a limited number of publicly available datasets, data collection from hospitals is also necessary to advance research in this area. Furthermore, an extended form of Pap smear imaging, known as liquid-based cytology, offers potential for further exploration and development.

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