An Investigative Approach and Analysis on Fusion Techniques of Images for Medical Beneficial Applications

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Abstract

Objectives: Image fusion is the practice of combining appropriate data in sequence from a position of images into a distinct image and the fused or combined image contains supplementary information than any of the contributed image. Methods: The most important methods of the image fusion engages the pyramid based image fusion, simple image fusion, and wavelet based image fusion. To compute the quality and excellence of images is for purpose of evaluation of image fusion performance measures of Entropy, Peak signal to Noise ratio, Correlation Coefficient(CC), RMS inaccuracy, SD(Standard Deviation), Edge Detection which is considered, High Pass Correlation of Image, Average Gradient of image has been introduced. Entropy is for the determination of data informational quantity, Peak signal to Noise ratio is for the evaluation of image error, Correlation Coefficient is utilized to come across with the similarities connecting the contributed and the fused complex image, RMS inaccuracy is collective noise sandwiched between the fused and the innovative input image.

Findings: In this research paper an analysis is done on images with the approach of image fusion techniques of wavelet transform and focuses on their assessment and evaluation based on the superiority of the harvested or produced image.

Conclusion: The outputs are verified that performance in terms of lesser entropy and greater PSNR gives common sequence of information. Here SWT displays good performance and high-quality performance is always obtained by using wavelet transform. Wavelet transform has enhanced capability to recognize the border path feature and superior Medical Image analysis.

Keywords: Diagnostics, Wavelet Transforms Image Fusion, Medical Imaging, Fusion Techniques, Quality Image

1. Introduction

Through compensation in technical Knowledge, many imaging multi-modalities are accessible for clinical and research studies. For instance each of these modalities such as Positron Emission Tomography (PET), Computed tomography (CT), and Magnetic Resonance Imaging furnishes some distinctive, exceptional, unique and balancing characterization of the essential tissues microstructure and anatomy. The emergent demand of this study region experimented from the huge systematic research papers published in the scientific journals and scientific magazines. An image for each theme is defined as the collection of all distinct modality of medical images that symbolize the analysis of images is referred to as Poly channel Image Analysis (PIA). To develop the effectiveness and consistency of the Poly channel medical image registration, a tissue type is beneficial to immerse the appropriate information in sequence from all the medical modalities, and remove the part that integrates and is referred to as redundancy. Medical image fusion come across with a general and extensive series of techniques from image fusion to concentrate on therapeutic problem throughout medical descriptions of individual organs. An upward development of application the medical diagnostics, investigation chronological records. As the

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processor aided medical techniques facilitate a evaluation estimation progress usefulness doctors intensive conclusion short duration. poly -sensor and suggests superior therapeutic examination.

There are numerous scientific remedial imaging modalities as Figure 1 principal for illustration and evaluation. The collection of embattled quantifiable reference precise organs for evaluation. It is basically not possible to confine information individual medical image would make sure medical sturdiness, accuracy of the investigation and ensuing diagnosis. The great approach is to come across with medical numerous formulates a more consistent, perfect, truthfulness. The major modalities in experimental observe find in Magnetic resonance imaging such as Neuro and Body, Dynamic Contrast-Enhanced Magnetic Resonance Imaging, Angiography Hip Structural Analysis and Bone Mineral Density, PET. These discover series purpose medical image fusion must have the generic feature of robust and reliable and have the potential to bear up the imperfections such as misregistration or noise.

2. Wavelet Methods

The aspire of this analysis is to give a shared observation of the applicability and advancement of data in sequence of image fusion techniques in multi medical imaging is useful for experimental studies of medical images. Figure 1 displays the alert areas of fusion studies in medical image as Detection, enhancement therapeutic synthesis, improvement various medical images submission for evaluation of body organs concentration implementatic of conditions. The image represented for image fusion must have the generic feature of robust and reliable and have the potential to bear up the imperfections such as misregistration or noise.

3. Imaging modalities in Medical image fusion

Figure 2 displays the image fusion with special medical image modalities. Here the medical image fusion is attained by MRI-SPECT, MRI-CT, PET-CT technical Vibro-acoustography medical mammography utilize s a linear grouping.

3.1 MRI - Magnetic Resonance Imaging

MRI discusses an significant by wavelet transformation method and widely used medical imaging modalities in therapeutic studies in clinics. Prior proceeding work shows the flourishing images. The Medical models extensively useful for brain psychotherapy and management where the image fusion techniques been established and confirmed to demonstrate enhanced and superior investigative performances. Medical Image segmentation ns is broadly utilized recognize matter awareness in medical. Here techniques, the majority utilization mining several to recognize uncharacteristic insightful of brain tumors. Numerous brain illustrations mentioned that assist to get better the accurateness of brain tumor classification and habitual discovery of brain significants. The segmentation process with medical image fusion process broadly utilized localization.

3.2. Computerized Tomography

This method has important collision of analysis and assessment. Well-likely utilized image fusion with the help of wavelet transform. Analogous to images are utilized enormous variety of displays below realistic envi-
ronment. Automated estimation by means of CT medical images been the premature attempts towards contemporary medical imaging. The CT images add to significance as a three D check-up imaging of those which uses three D brain tumour simulations. The relevance of CT images in brain analysis and behaviour has been reported. Quite a few measured leading modality. A number applications as follows are tongue and lips cancer medical diagnosis, cancer treatment, image segmentation and integration. Comparative period fully understandable, Modality other restrictions inadequate classification for reason that the nature of investigation.

4. Wavelet Transform in Image Fusion

The previous examine come to be familiar with that Mallat algorithm are universally developed. The impression of utilization of the Multi-resolution investigation construct the initial one. The Mallat builds a wavelet, scaling functions. The first function allows to make estimation that constitutes frequency in sequence. At same time this functions construct High-High, low-high, High-Low, images that gives the wavelet coefficients. While using Mallat algorithm we come across with various issues such as the Pixel by Pixel is not possible and transform is not shift-variant. These disadvantage can be computed by the following illustration as given below.

\[
W_j^p(k,l) = P_j^p(k,l) - P_j(k,l)
\]

where J=1…N as j is represented as scale index, N represents the number of decomposition, \( P_j^p(k,l) \) and \( p(k,l) \) represents the filtered version of image introduced by means of below illustration

\[
P_j^p(k,l) = \sum_{n=m}^{n+2^{-j}k} \sum_{m}^{m+2^{-j}l} h(n,m) P_{j-1}(n+2^{-j}k,m+2^{-j}l)
\]

Here \( h(n,m) \) represents the coefficients.

Wavelet and approximation planes have the similar size as the initial image at each level of image decomposition. The raw value at every scale is avoided by adding zeros between coefficients. The original or the initial image is reproduced or reconstructed by totaling its final approximation plane with the corresponding wavelet coefficient to create exact value by the below mentioned illustrative equation as

\[
P(k,l) = P_N^0(k,l) + \sum_{j=1}^{N} W_j^p(k,l)
\]

The reconstruction and decomposition of wavelet transform have numerous flexible image modalities. Utilizing dissimilar decomposition method of decomposition or wavelet method level will construct fusion consequences of unusual visual illustrative results.

5. Performance Evaluation

The performance evaluation of projected algorithm is accepted out using dimensions of MSE, PSNR, Entropy, PSNR and Common Information (CI). This assessment enables classification of most excellent method for medical image fusion for medical related purpose and the beneficial applications.

1. Peak Signal to Noise Ratio: The PSNR indicates the comparison between two selected medical images. The superior the value of PSNR, the better the fused medical image is given by as shown below

\[
PSNR = 10 \log_{10} \frac{255^2}{RMSE^2}
\]

where RMSE (Root Mean Square Error) is distinctively defined as

\[
RMSE = \frac{\sqrt{\sum_{i=1}^{N} \sum_{j=1}^{M} (F1(i,j) - F2(i,j))^2}}{MN}
\]

2. Common Information (CI): procedures the degree of reliance of two medical images, Its value is 0 if I1 and I2 are self-determining of each additional other MI between selected source is denoted by

\[
t(X,Y) = \sum_{x} \sum_{y} p(x,y) \log \frac{p(x,y)}{p(x)p(y)}
\]

Entropy: Entropy is the purposeful and determination of information with quantity enclosed in an medical image. If the combined medical image has comparatively homogeneous occurrence content then it contains maximum entropy. Larger or higher entropy for combined medical image gives more satisfied information of initial image and scientifically, entropy is denoted as:

\[
E = \sum_{x=1}^{N} (P(x) \ln(x))
\]

6. Image Analysis for Fusion Process

The projected techniques for medical image fusion are implemented utilizing Mat lab and significant results of the image analysis are compared using replicated results. Figure 3 and Figure 4 displays original image of MRI.
and CT utilized as initial Image for a variety of algorithm for medical image fusion, figure 5, 6, 7, and 8 displays outputs of medical image fusion received utilizing SWT, PCA, DWT of wavelet transformation. The Mentioned Table 1 displays the assessment of presented medical image fusion technique for CT Medical image and MRI Medical Image.

7. Metrics of Fusion Images (MFI)

In this division, we consign a variety of image excellence metrics into a number of expansive module. There are statistical metrics measures excelencies in terms of reasonable arithmetical functions. Also there are various models that integrates effortless distinctiveness, such as luminance adjustment and contrast understanding function. There are various models that integrates the special uniqueness that comprise threshold attention of observers that use dimensions of medical image distinctiveness as smoothness, texture content, spectral slope, edge content. Lastly, there are metrics which challenges to model prematurely processing as absolute as probable and supply a meaningful evaluation of medical image quality. Mathematically defined distinct metrics been utilized in the various literature, including peak signal to noise ratio (PSNR), Mean Squared Error (MSE), Signal to Noise Ratio (SNR), Mean Absolute Error (MAE), Local Mean Squared Error and Distortion Contrast. These metrics achieve well when utilizing medical images with constraints on the image substance for meticulous informative motivative configurations. Nevertheless, widespread assessment of these metrics has exposed that they perform well across medical images which enclose appreciably dissimilar content.

8. Conclusion

In this projected research work curve wavelet, Discrete Wavelet Transform (DWT), Principal Component Analysis (PCA), Stationary Wavelet Transform (SWT) comparisons as represented in Table 1 and set of rules are utilized for fusion of medical images. The outputs are verified that performance in terms of lesser entropy and greater PSNR gives common sequence of information. Here SWT displays good performance and high-quality performance is always obtained by using wavelet transform. Wavelet transform has enhanced capability to recognize the border path feature and superior Medical Image analysis.

![Image 1](image1.png)

**Figure 1.** Modalities, Algorithms and Organs in Medical Image Fusion.

![Image 2](image2.png)

**Figure 2.** Image fusion with Modules for special medical image modalities.
Table 1. Comparative study of Wavelet Transforms

|       | MSE  | PSNR | Entropy |
|-------|------|------|---------|
| CWT   | 0.05 | 20.91| 0.05    |
| DWT   | 235  | 14.0 | 0.004   |
| SWT   | 455  | 19.5 | 0.04    |
| PCA   | 8.2  | 14.3 | 0.009   |

9. References

1. Wong TZ, Turkington TG, Hawkand TC, Coleman RE. PET and brain tumour image fusion. Cancer. 2004; 10(4):234–42.
2. Li Y, Verma R. Multichannel Image Registration by Feature-based Information Fusion. IEEE transactions on Medical Imaging Processing. Ragini. 2011Mar; 30(3).
3. Dasarathy BV. A special issue on natural computing methods in bioinformatics. Information Fusion. 2009; 10(3):209.
4. Dasarathy BV. A special issue on biologically inspired information fusion. Information Fusion. 2010; 11(1):1.
5. Casey MC, Damper RI. Editorial: Special issue on biologically-inspired information fusion. Information Fusion. 2010; 11(1):2–3.
6. Navarra J, Alsious A, S.-Faraco S, Spence C, Assessing the role of attention in the audiovisual integration of speech. Information Fusion. 2010; 11(1):4–11.
7. Piella G. A General framework for Multi-resolution Image Fusion: from Pixels to Regions. Report PNA-R0211. 2002 May 31.
8. Twycross J, Aickelin U. Information fusion in the immune system. Information Fusion. 2010; 11(1):35–44.
9. Kok C, Hui Y, Nguyen T. Medical image pseudo coloring by wavelet fusion, in: Engineering in Medicine and Biology Society, 1996. Bridging Disciplines for Biomedicine. Proceedings of the 18th Annual International Conference of the IEEE. IEEE. 1996; 2. p. 648–9.
10. Zhang Q, Tang W, Lai L, Sun W, Wong K. Medical diagnostic image data fusion based on wavelet transformation and self-organising features mapping neural networks. Proceedings of 2004 International Conference on Machine Learning and Cybernetics, IEEE. 2004; 5. p. 2708–12.
11. Kor S, Tiwary U. Feature level fusion of multimodal medical images in lifting wavelet transform domain, in: Engineering in Medicine and Biology Society, 2004. IEMBS’04. 26th Annual International Conference of the IEEE, IEEE . 2004; 1:1479–82.
12. Garg S, Kiran KU, Mohan R, Tiwary U. Multilevel medical image fusion using segmented image by level set evolution with region competition. IEEE-EMBS 2005. 27th Annual International Conference of the, IEEE, Engineering in Medicine and Biology Society, 2005. 2006. p. 7680–3
13. Ciampi M. Medical image fusion for color visualization via 3D RDWT. 2010 10th IEEE International Conference on Information Technology and Applications in Biomedicine (ITAB), IEEE. 2010. p. 1–6
14. Kapoor R, Dutta A, Bagai D, Kamal TS. Fusion for registration of medical images—a study, in: Applied Imagery Pattern Recognition Workshop, 2003. Proceedings. 32nd, IEEE. 2003; 180–5.
15. Bin L, Lianfang T, Yuanyuan K, Xia Y. Parallel multimodal medical image fusion in 3D conformal radiotherapy treatment planning. The 2nd International Conference on Bioinformatics and Biomedical Engineering, 2008. ICBBE, IEEE. p. 2600–4.
16. Srikanth B, Reddy S. Analysis and Detection of Multi Tumor from MRI of Brain Using Advance Adaptive Feature Fuzzy C-means(AAFFCM) Algorithm. Indian Journal of Science and Technology. Vol 9(43) ISSN(Print) 0974-6846
17. Bhatnagar G, Wu Q, Liu Z, Directive contrast based multimodal medical image fusion in NSCT domain. IEEE Transactions on Multimedia. 2013; 15(5):1014–24.
18. Kavitha C, Chellamuthu C. Multimodal medical image fusion based on integer wavelet transform and neuro-fuzzy. 2010 International Conference on Signal and Image Processing (ICSIP), IEEE. 2010. p. 296–300.
19. Hosseini HG, Alizad A, Fatemi M. Fusion of vibro-acoustography images and X-ray mammography, in: Engineering in Medicine and Biology Society, 2006. EMBS’06. 28th Annual International Conference of the IEEE, IEEE. 2006. p. 2803–6.
20. Aguilar M, New JR. Fusion of multi-modality volumetric medical imagery, Proceedings of the Fifth International Conference on Information Fusion, IEEE. 2002; 2. p. 1206–12.
21. Marshall S, Matsopoulos G. Morphological data fusion in medical imaging. IEEE Winter Workshop on Nonlinear Digital Signal Processing, IEEE. 1993. p. 6–1.
22. Barra V, Boire JY. Automatic segmentation of subcortical brain structures in MR images using information fusion. IEEE Transactions on Medical Imaging. 2001; 20(7):549–58.
23. Taussky D, Austen L, Too I, Yeung I, Williams T, Pearson S, McLean M, Pond G, Crook J. Sequential evaluation of prostate edema after permanent seed prostate brachytherapy using CT-MRI fusion. International Journal of Radiation Oncology Biology Physics. 2005; 62(4):974–80.
24. Guihong Q, Dai Z, Pingfan Y. Medical image fusion by wavelet transform modulus maxima. Optics Express. 2001; 9(4):184–90.
25. Zacharakis E, Matsopoulos G, Nikita K, Stamatakis G. An application of multimodal image registration and fusion in a 3D tumor simulation model, in: Engineering in Medicine and Biology Society, 2003. Proceedings of the 25th Annual International Conference of the IEEE. 2003; 1. p. 686–9.
26. Julow J, Major T, Emri M, Valalik I, Sagi S, Mangel L, Nemeth G, Tron L, Varallyay G, Solymosi D et al. The application of image fusion in stereotactic brachytherapy of brain tumours. ACTA neurochirurgica. 2000; 142(11):1253–8.
27. Wasserman R, Acharya R, Sibata C, Shin K. A data fusion approach to tumor delineation. Proceedings International Conference on Image Processing. 1995; 2. p. 476–9.
28. Xiaoyu J, Liwei Z, Zhiyun G. MultiSpectral Image Fusion using wavelet Transform. SPIE. 2898:35–42
29. Girod B. What's wrong with mean-square error. In: Watson AB editor. Digital Images and Human Vision, MIT Press, Cambridge, MA. 1993; 207—20
30. Fuhrmann DR, Baro JA, Cox JR. Experimental evaluation of psychophysical distortion metrics for JPEG-encoded Images. J Electronic Imaging. 1995; 4(4):397—406.
31. Malviya A, Bhirud SG. Image Fusion of Digital Images. International Journal of Recent Trends in Engineering. 2009 Nov; 2(3):146—8.
32. Thamarai M, Mohanbabu K. An Improved Image Fusion and Segmentation Using FLICM with GA for Medical Diagnosis. Indian Journal of Science and Technology. 2016 Mar; 9(12).
33. Sarmach A, Murali Krishna K, Rasool Reddy k. Adaptive Facial expression Identification Using PCA and Wavelet Transform. Indian Journal of Science and Technology. Vol9(39). ISSN(Online) 0974-5645