

# Deep Learning Mobile Application Towards Malaria Diagnosis

Martha Shaka The University of Dodoma, Tanzania

# Introduction

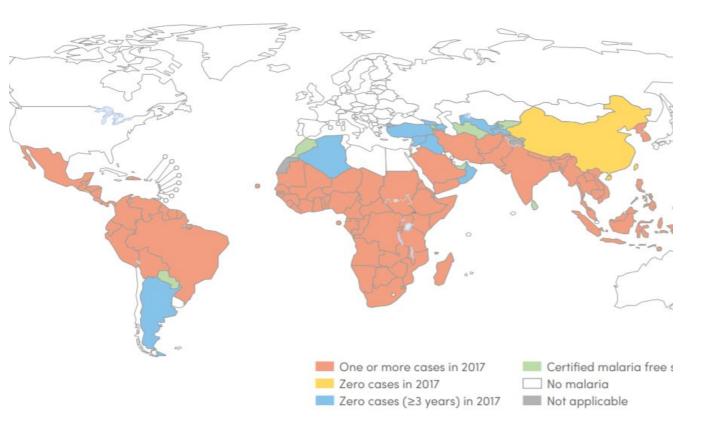
 Malaria is a life threatening disease transmitted by a bite of an infected <u>female</u> <u>anopheles mosquito.</u>

### Who is at Risk?

 In 2017 nearly half of the world was at risk of malaria being the poorest and marginalized communities with the highest risk;

### **Death Burden**

- 93% of the deaths caused by malaria was reported in Africa in 2017;
- 60% of the reported cases of death were children under 5 years;
- Malaria kills a child every 2 minutes!



Source: WHO malaria report 2018 showcasing malaria cases globally

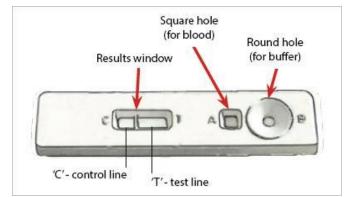
# The goal of this project is to reduce mortality rate related to malaria disease, particularly in marginalised communities.

# **Existing Strategies**

• Malaria is curable and with a prompt diagnose and treatment can reduce death.

Common diagnosis tools for malaria





Microscope Pros: accurate. Cons: takes time (15-30 mins), requires expert and labour in count of parasites.

### <u>RDT</u>

Pros: fast, portable, no need of expert, cheap. Cons: can't diagnose malaria at early stage, no quantitative analysis.

- Existing rapid diagnosis tests can't identify the stage or count the number of parasites (quantitative diagnosis).
- But we can do so with object detection in Computer Vision.

### Why Quantitative Diagnosis matters?

• Uncomplicated malaria patient receives oral antimalarial.



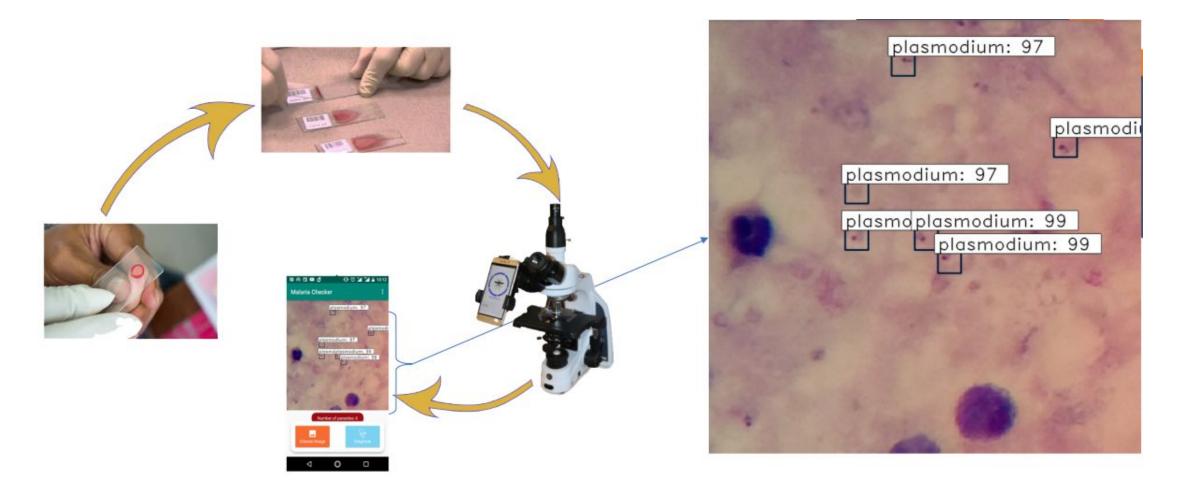
• Severe malaria patient receives parenteral antimalarial.



In this study we have used computer vision to solve the challenges posed in these existing strategies.

### **Our Solution**

A malaria diagnosis test using a mobile phone that is fast, can detect early stage of malaria, provides quantification of parasites and not expert dependent.



# Methodology

#### Data Set

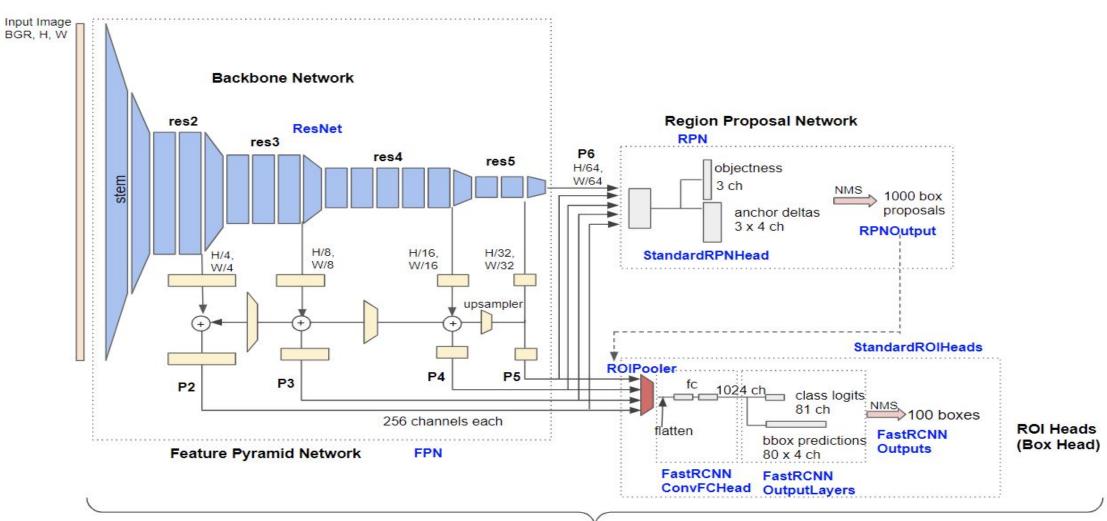
Datasets	Number of patients	Number of thick blood smear images	Number of a bounded box of parasites
Uganda	n/a	1182	7245
Tanzania	28	100	600

- The dataset was split into 80:10:10 ratio.
- We had a total of approximately 7800 bounded box of parasites
- Model used: Facebook
  Detectron 2

# Methodology

### Our Model

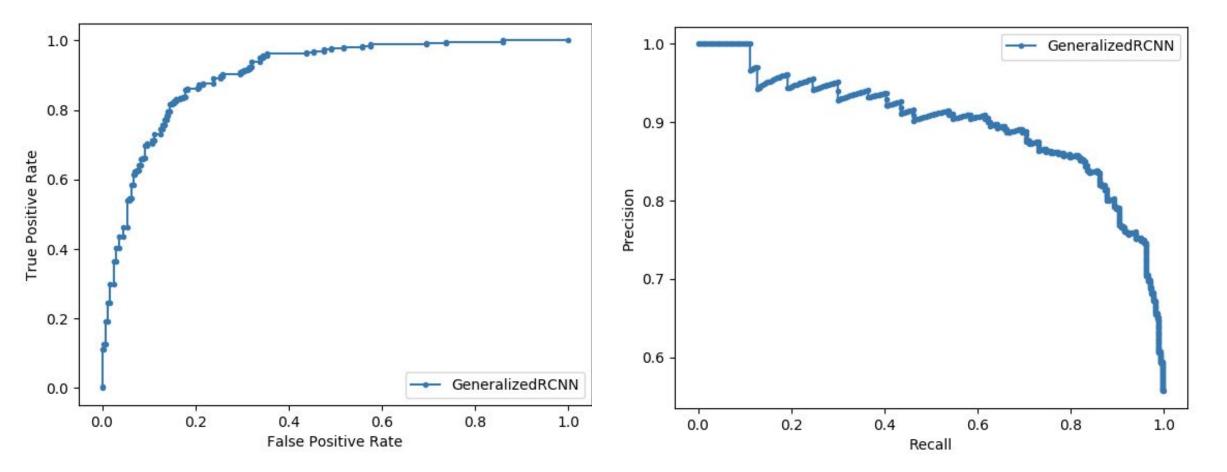
• We fine-tuned a coco-pretrained R50-FPN Mask R-CNN from our custom malaria dataset.



GeneralizedRCNN



- F1- score =0.841
- AUC=0.898



ROC and Precision-recall for malaria

# **Future Work**

- Collect more data set (5000 Images) with both parasite and white blood cells labelled to improve the performance of the model and have a fully automated malaria diagnosis.
- To understand why the model made certain predictions such as false positive and false negative could

also be valuable to improve the model performance

• Training of a smaller network that can easily be deployed in a limited resource area such as a mobile

phone will eliminate the need to deploy the model in a computer server.

# Reference

- Ephraim, R.K., Duah, E., Cybulski, J.S., Prakash, M., D'Ambrosio, M.V., Fletcher, D.A., Keiser, J., Andrews, J.R. and Bogoch, I.I., 2015. Diagnosis of Schistosoma haematobium infection with a mobile phone-mounted Foldscope and a reversed-lens CellScope in Ghana. The American journal of tropical medicine and hygiene, 92(6), pp.1253-1256.
- He, K., Zhang, X., Ren, S. and Sun, J., 2016. Deep residual learning for image recognition. In Proceedings of the IEEE conference on computer vision and pattern recognition (pp. 770-778).
- Rajaraman, S., Antani, S.K., Poostchi, M., Silamut, K., Hossain, M.A., Maude, R.J., Jaeger, S. and Thoma, G.R., 2018. Pre-trained convolutional neural networks as feature extractors toward improved malaria parasite detection in thin blood smear images. PeerJ, 6, p.e4568.
- WHO malaria Diagnostic test, Retrieved on 1st March 2019 from <u>https://www.who.int/malaria/areas/diagnosis/en/</u>
- WHO malaria 2018 report. Retrieved on 1st March 2019 from <u>https://apps.who.int/iris/bitstream/handle/10665/275867/9789241565653-eng.pdf?ua=1</u>