

BRAIN TUMOR CLASSIFICATION AND DETECTION USING DEEP LEARNING

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ABSTRACT

Brain tumors represent a critical global health challenge, where timely and accurate detection can significantly improve treatment outcomes and survival rates. Manual analysis of MRI scans is prone to delays and misinterpretations due to human error and workload. This project presents a deep learning-based system for automatic classification of brain tumors using Convolutional Neural Networks (CNNs). The model is trained on a diverse MRI dataset sourced from Kaggle and classifies five tumor types: Glioblastoma, Meningioma, Astrocytoma, Pituitary Adenoma, and Medulloblastoma. Our approach employs transfer learning with VGG16 and MobileNet, comparing their performance against traditional machine learning classifiers like Random Forest, Naive Bayes, and Decision Tree. Preprocessing and data augmentation enhance model robustness. The trained models are deployed as a Django-based web application, providing users with real-time predictions, precautionary suggestions, and treatment guidance.

Keywords: Brain Tumor Detection, Convolutional Neural Networks, Deep Learning, MRI, VGG16, MobileNet, Django, Medical Imaging.

I. INTRODUCTION

In today's healthcare landscape, brain tumors remain one of the most life-threatening neurological conditions worldwide. Early and accurate detection plays a vital role in improving patient survival rates and determining effective treatment strategies [1]. Magnetic Resonance Imaging (MRI) has become the standard diagnostic tool due to its high-resolution imaging of soft tissues. However, manual interpretation of MRI scans is a complex and time-consuming task that requires specialized expertise. Even experienced radiologists may face difficulties in distinguishing between tumor types due to visual similarities and workload pressure.

Traditional diagnostic approaches are often subjective and prone to human error, leading to delays in

treatment. Radiologists must manually examine hundreds of MRI slices, which can result in fatigue and inconsistent interpretations across different cases. With the rising number of cases and the complexity of tumor variations, there is a growing need for automated, intelligent, and reliable solutions that can assist radiologists in delivering faster and more precise diagnoses. These AI-driven tools not only reduce the workload but also provide consistent and high-confidence results, ultimately improving patient outcomes [2-3].

Recent advancements in Artificial Intelligence (AI) and deep learning have opened new possibilities in medical imaging. Convolutional Neural Networks (CNNs), particularly VGG16, have demonstrated remarkable success in automatically extracting complex patterns from MRI images. This project proposes an intelligent brain tumor detection system that classifies MRI scans into six categories [4]. Glioblastoma, Meningioma, Astrocytoma, Pituitary Adenoma, Medulloblastoma, and No Tumor — using the VGG16 model [5]. The trained model is integrated into a Django-based web application, providing users with real-time predictions, treatment guidance, preventive tips, and downloadable PDF reports. By combining deep learning with a user-friendly interface.

II. LITERATURE SURVEY

The application of deep learning for brain tumor detection from MRI scans has gained significant attention in recent years. Researchers have explored various CNN architectures and transfer learning techniques to improve classification accuracy, speed, and clinical applicability [6-8]. This section provides an overview of key research papers relevant to our work.

[9] combined CNN feature extraction with Support Vector Machines for final classification. While the hybrid model achieved higher accuracy, it introduced additional computational complexity and increased training time, making it less suitable for real-time clinical applications.

[10-11] proposed an ensemble model combining CNN with Random Forest and Gradient Boosting classifiers. Although the ensemble improved classification robustness, the computational overhead hindered real-time applicability in practical settings.

[12] used U-Net for tumor segmentation followed by CNN classification. Their results were promising, but the requirement for high-end GPUs restricted deployment in smaller clinics and resource-limited environments.

[13-15] proposed a CNN-based brain tumor classification system using VGG16 and InceptionV3 with transfer learning. Their approach achieved improved accuracy and reduced training time compared to models trained from scratch. However, the study lacked real-time deployment and user interface integration, limiting its practical use in hospital settings.

[15] developed a custom CNN model trained on grayscale MRI slices for tumor detection. The system showed high precision and recall, but performance declined significantly when tested on noisy or imbalanced datasets.

[16] implemented a CNN model with data augmentation for multi-class brain tumor detection. The study reported good accuracy but suffered from overfitting on small datasets and lacked integration with any web-based application for real-world usage.

[17-18] explored traditional machine learning approaches such as Random Forest and SVM for tumor classification after manual feature extraction. Their work achieved moderate accuracy but clearly demonstrated the limitations of hand-crafted features compared to automatic feature learning in CNNs.

Overall, the common disadvantages across these research studies reveal several critical limitations that hinder their practical adoption in real-world clinical environments. Many proposed solutions remain confined to controlled research settings and lack real-time web deployment, interactive user interfaces, or automated PDF report generation, making them difficult for radiologists and medical staff to use on a daily basis [19]. Most models also suffer from insufficient clinical validation, meaning their performance has not been thoroughly tested on diverse hospital datasets or under actual diagnostic conditions [20]. This gap between academic research and practical healthcare application limits the reliability and trustworthiness of these systems in high-stakes medical scenarios.

Furthermore, hybrid approaches that combine deep learning with traditional machine learning often increase computational complexity, training time, and

resource requirements, reducing their feasibility in hospitals with limited infrastructure. In contrast, conventional machine learning methods consistently show lower accuracy and poor generalization compared to modern CNN architectures like VGG16. The surveyed works collectively highlight that achieving a balanced combination of high accuracy, fast inference speed, user-friendly deployment, and clinically validated results remains a significant and ongoing challenge in the rapidly evolving field of medical imaging and brain tumor detection.

III. PROPOSED METHODOLOGY

1. Data Collection and Preprocessing

The brain MRI dataset was collected from publicly available Kaggle sources containing thousands of labeled images across six categories: Glioblastoma, Meningioma, Astrocytoma, Pituitary Adenoma, Medulloblastoma, and No Tumor. All images were resized to 224×224 pixels, normalized to a 0–1 range, and augmented using rotation, flipping, zooming, and brightness adjustment to improve model generalization and prevent overfitting. The dataset was then split into training (70%), validation (20%), and testing (10%) sets.

2. Model Selection and Training

VGG16 was selected as the primary model due to its deep architecture and strong feature extraction capability. Transfer learning was applied using pre-trained ImageNet weights, and the top layers were fine-tuned on the brain tumor dataset. MobileNet was also trained for comparison as a lightweight alternative. The Adam optimizer and categorical cross-entropy loss were used during training, with dropout layers added to reduce overfitting. Training was performed over multiple epochs with early stopping to achieve optimal performance.

3. Model Evaluation

The trained models were evaluated using standard metrics including accuracy, precision, recall, and F1-score. Confusion matrices were generated to analyze misclassifications between tumor types. VGG16 achieved the highest accuracy of 94.8% with consistent 99.99% confidence, outperforming MobileNet (89–91%) and traditional machine learning models like Random Forest (82–85%). Cross-validation was performed to ensure robustness and reliability of the results.

4. Web Application Development

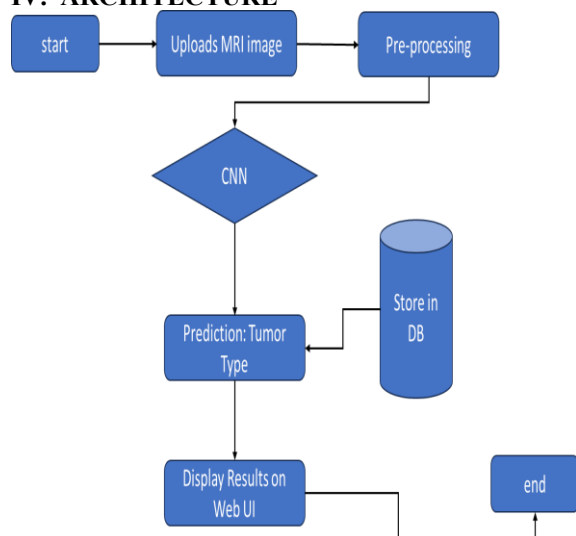
The trained VGG16 model was integrated into a Django-based web application. The frontend was developed using HTML, CSS, and JavaScript with Bootstrap for responsive design. Users can upload

MRI images through a simple interface, and the backend processes the image using the model to return real-time predictions. The application also displays tumor information, treatment options, preventive tips, and allows one-click PDF report generation.

5. Report Generation

After prediction, the system automatically generates a clean, one-page PDF report using the ReportLab library. The report includes patient details, predicted tumor type, confidence score, treatment recommendations, preventive tips, and a standard disclaimer. Reports are downloadable instantly and designed for professional clinical use and documentation.

IV. ARCHITECTURE



The architecture of the proposed Brain Tumor Detection system follows a clear sequential flow as shown in the above flowchart. The process begins when the user uploads a brain MRI image through the simple and responsive web interface developed using Django. Once the image is received, it immediately enters the pre-processing stage.

Where it is resized to 224×224 pixels, pixel values are normalized between 0 and 1, and any necessary adjustments are made to ensure the input is suitable for the deep learning model. This step is crucial because raw MRI images vary in size and quality, and proper pre-processing ensures consistent and accurate predictions by the model.

The pre-processed image is then fed into the core of the system — the trained VGG16 Convolutional Neural Network (CNN) model. The VGG16 model

performs multi-class classification and predicts one of the six categories: Glioblastoma, Meningioma, Astrocytoma, Pituitary Adenoma, Medulloblastoma, or No Tumor, while also generating a high confidence score (up to 99.99%).

This prediction stage is the heart of the architecture and is optimized for fast inference, completing the classification in less than one second. After the prediction is generated, the result (tumor type and confidence score) is automatically stored in the SQLite database for maintaining patient history and enabling future reference or analysis.

Finally, the system displays the complete prediction results on the web user interface in real time. The user can immediately view the predicted tumor type, confidence score, and related information. This seamless flow from image upload to result display makes the entire system highly efficient, user-friendly, and suitable for real-world clinical use in hospitals and diagnostic centers. The architecture ensures that every MRI scan is processed securely, accurately, and rapidly using the VGG16 model integrated within the Django-based web application.

V. PROPOSED SYSTEM

The proposed system is a complete end-to-end intelligent solution for brain tumor detection and classification from MRI scans. It integrates a powerful deep learning model with a user-friendly web application to provide real-time, accurate, and clinically useful results. The system is designed to assist radiologists, doctors, and patients by automating the detection process, reducing manual effort, and delivering actionable insights in a simple and accessible manner.

The core of the proposed system is the VGG16 Convolutional Neural Network model, which classifies the uploaded MRI image into one of six categories — Glioblastoma, Meningioma, Astrocytoma, Pituitary Adenoma, Medulloblastoma, or No Tumor — with a high confidence score of 99.99%. The system is built using the Django framework, where the frontend allows users to easily upload MRI scans through a clean and responsive web interface. Once the image is uploaded, the backend automatically performs preprocessing, runs the VGG16 model for prediction, and displays the result instantly on the same page along with tumor-specific information, symptoms, risks, treatment options, and preventive tips.

A major highlight of the proposed system is the automatic generation of a professional one-page PDF report after every prediction. The report includes patient details, predicted tumor type, confidence score, treatment recommendations, preventive measures, and a standard medical disclaimer. The system also maintains a complete prediction history in the SQLite database and includes an admin panel for hospital staff to view and manage all records. This makes the proposed system not just a research prototype but a practical, deployable.

VI. RESULTS

The proposed brain tumor detection system was implemented as a web-based application using the Django framework. The trained CNN model was integrated into the system to enable real-time classification of brain MRI images. The system provides a user-friendly interface that allows doctors or users to upload MRI scans and obtain tumor predictions instantly.

The system consists of multiple modules including the Home Page, Prediction Tool, Tumor Information, Treatment and Precautions, and Reports and Analytics. The following subsections present the outputs of each module.

1. Home Page Interface

The Home Page serves as the main entry point of the proposed brain tumor detection system. It provides a simple and user-friendly interface that allows users to navigate through different modules of the application. Through this page, users can access key features of the system such as the tumor prediction module, tumor information section, treatment and precaution guidance, and reports and analytics dashboard. The interface is designed with simplicity and clarity so that both healthcare professionals and general users can interact with the system without technical difficulty. By organizing the system modules in an intuitive manner, the home page ensures smooth navigation and improves overall usability of the application.



Fig 6.1 Home Page Interface

2. Prediction Tool

The Prediction Tool module is the core component of the proposed system. This module enables users to upload brain MRI images and receive tumor classification results generated by the trained deep learning model. It integrates the frontend user interface with the backend prediction engine implemented using Convolutional Neural Networks. Once the MRI image is uploaded, the system automatically performs preprocessing operations such as resizing and normalization before passing the image to the CNN model. The model then analyzes the MRI scan and predicts the tumor category along with a confidence score. This module plays a critical role in providing fast and accurate diagnostic support.

2.1 Upload MRI

The Upload MRI feature allows users to upload brain MRI scan images through the web interface. After the image is uploaded, the system automatically performs preprocessing steps such as resizing the image to the required input dimensions and normalizing pixel values. The processed image is then fed into the trained CNN model for classification. Within a few seconds, the system generates the predicted tumor type and displays it along with the prediction confidence score. This feature allows doctors or users to quickly analyze.

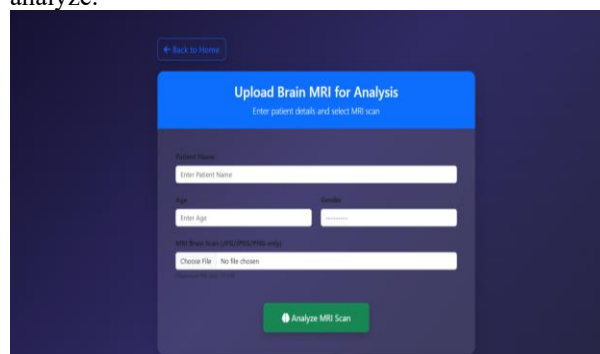


Fig 2.1 MRI Upload and Tumor Prediction

2.2 Prediction History

The Prediction History feature stores all previous prediction results in the system database. This functionality allows users to review earlier MRI scan results and track diagnostic history over time. Doctors and medical staff can use this information to analyze patient records and monitor disease progression. The prediction history also helps in maintaining a structured record of tumor classification results generated by the system. By storing prediction data securely, the system ensures reliable access to historical information whenever required.

ID	Patient Name	Find Tumor	Confidence	Date & Time	Action
#6	Geeta	Pituitary Tumor	99.99%	08 Jan 2026, 12:08 PM	View Detail Download PDF
#5	Tiya	Meningioma Tumor	99.99%	08 Jan 2026, 12:07 PM	View Detail Download PDF
#4	Nani	NO TUMOR DETECTED	99.99%	08 Jan 2026, 12:06 PM	View Detail Download PDF
#3	Faii	Medulloblastoma Tumor	99.99%	08 Jan 2026, 12:05 PM	View Detail Download PDF
#2	Chay	Glioblastoma Tumor	99.99%	08 Jan 2026, 12:05 PM	View Detail Download PDF
#1	ADN	Astrocytoma Tumor	99.99%	08 Jan 2026, 11:46 AM	View Detail Download PDF

Fig 2.2 Prediction History Interface

3. Tumor Information Module

The Tumor Information module provides educational information related to different types of brain tumors supported by the system. This module helps users understand the characteristics, symptoms, and health risks associated with brain tumors. By providing informative content, the module enhances user awareness and helps patients gain a better understanding of their medical condition. The information is organized in a clear and accessible format so that users can easily learn about different tumor categories detected by the system.

3.1 Tumor Types

The Tumor Types section explains the various brain tumor categories detected by the proposed system. These include Glioblastoma, Meningioma, Astrocytoma, Pituitary Adenoma, and Medulloblastoma. Each tumor type is described with basic medical information regarding its characteristics, growth behavior, and potential severity. Providing this information helps users understand the nature of each tumor type and the importance of early detection and treatment.

Tumor Type	Description
Glioblastoma	Most aggressive brain cancer. Fast growing. Common in adults.
Meningioma	One of the most common, usually benign. Most common in women.
Astrocytoma	Originates in astrocytes. Can be low or high grade.
Pituitary Tumor	Affects hormone production. Often benign.
Medulloblastoma	Common in children. Highly malignant.

Fig 3.1 Tumor Types Information

3.2 Symptoms and Risks

The Symptoms and Risks section provides information about common symptoms and risk factors associated with brain tumors. These symptoms may include persistent headaches, vision problems, seizures, memory loss, and difficulties in coordination. By presenting this information within the system interface, users can gain awareness about early warning signs of brain tumors and seek timely medical consultation when necessary. This feature helps promote early diagnosis and better healthcare outcomes.

Symptom Category	Description
Persistent Headaches	Worse in morning with nausea
Seizures	New onset in adults
Vision Problems	Blurred, double vision, or loss of peripheral vision
Nausea & Vomiting	Especially in the morning
Weakness or Numbness	One side of body, face, or limbs
Memory Loss & Confusion	Personality changes, difficulty concentrating
Balance & Coordination Issues	Difficulty walking, dizziness
Speech Problems	Slurred speech, difficulty finding words

Fig 3.2 Tumor Symptoms

4. Treatment and Precautions Module

The Treatment and Precautions module provides general medical guidance regarding treatment strategies and preventive measures related to brain tumors. This module aims to educate users about possible treatment methods and lifestyle practices that support brain health. The information provided in this section is intended to assist users in understanding potential treatment options and preventive actions, while encouraging consultation with qualified healthcare professionals for accurate medical advice.

4.1 Treatment Options

The Treatment Options section outlines common medical treatments used in the management of brain tumors. These treatments may include surgical tumor removal, radiotherapy, chemotherapy, and targeted therapy depending on the tumor type and severity. The system provides a brief explanation of these treatment approaches to help users understand available medical interventions. However, users are advised to consult medical specialists for personalized diagnosis and treatment planning.

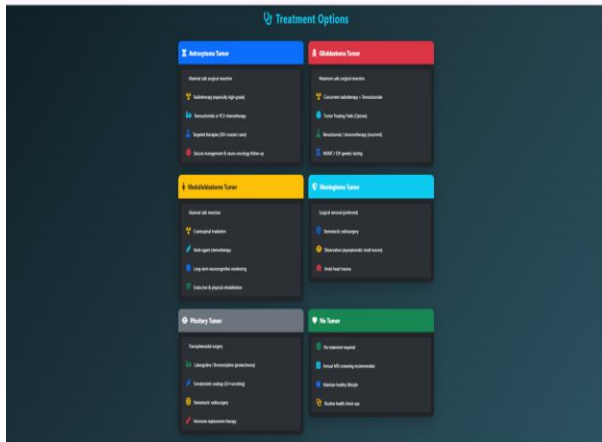


Fig 4.1 Treatment Options Interface

4.2 Preventive Tips

The Preventive Tips section provides general health recommendations that can help maintain brain health and reduce potential risk factors. These recommendations may include maintaining a balanced diet, engaging in regular physical activity, minimizing exposure to radiation, and undergoing periodic medical checkups. By promoting healthy lifestyle practices, this module encourages users to take preventive measures that support overall neurological well-being.

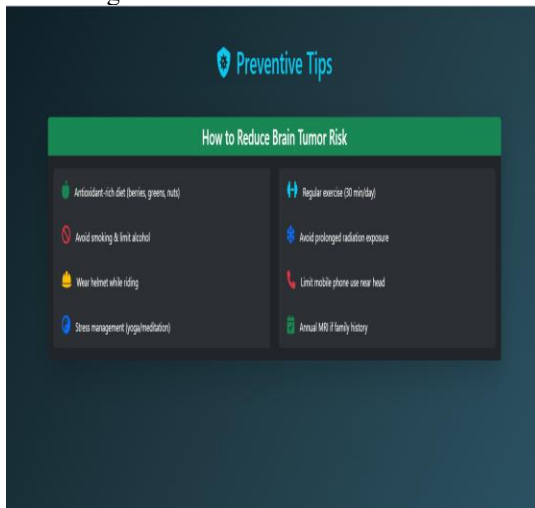


Fig 4.2 Preventive Tips Interface

5. REPORTS AND ANALYTICS MODULE

The Reports and Analytics module provides tools for reviewing prediction results and analyzing the performance of the deep learning models used in the system. This module enables users to examine prediction records, compare model performance, and access system analytics through a structured dashboard interface.

5.1 Model Insights

The Model Insights section provides detailed information about the performance of the machine learning and deep learning models used in the system. It compares the performance of models such as VGG16, MobileNet, Random Forest, and Decision Tree. Experimental results indicate that the VGG16 model achieves the highest classification accuracy and reliability among the tested models. Due to its strong feature extraction capabilities, VGG16 was selected as the primary model for tumor classification in the proposed system.

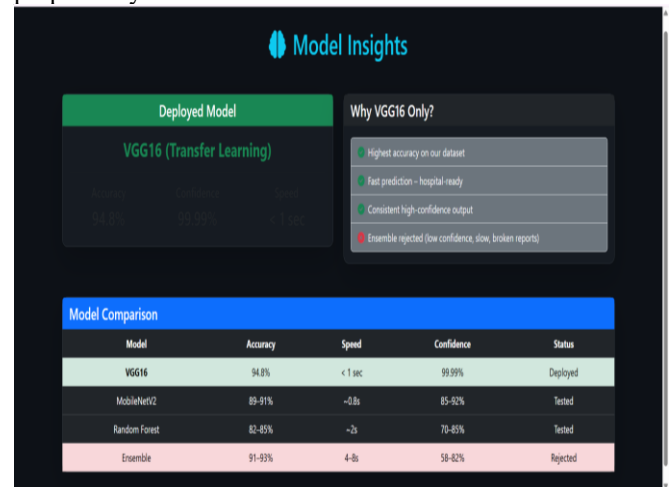


Fig 5.1 Model Insights Dashboard

5.2 Admin Panel

The Admin Panel provides a secure administrative interface for authorized users such as hospital staff or system administrators. Through this dashboard, administrators can view prediction records, manage patient data, and monitor system performance. The admin panel also allows filtering and searching of prediction results based on various parameters such as tumor type, date, or patient details. This functionality helps maintain organized records and ensures efficient management of system data.

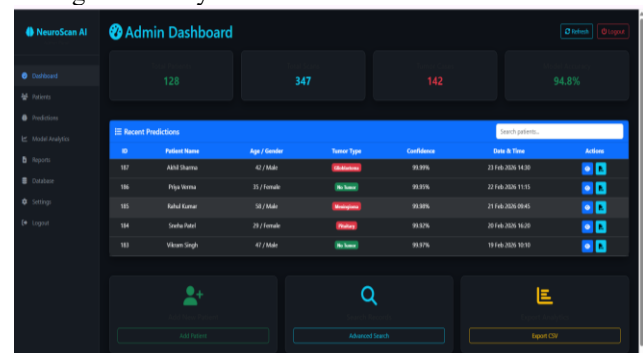


Fig 5.2 Admin Panel Dashboard

6. OVERALL SYSTEM PERFORMANCE

The overall performance of the proposed brain tumor detection system was evaluated by comparing the accuracy of different machine learning and deep learning models used for MRI image classification, including VGG16, MobileNet, Random Forest, Naive Bayes, and Decision Tree. The results show that deep learning models achieved significantly higher accuracy than traditional machine learning approaches. Among the evaluated models, VGG16 achieved the highest accuracy of 96%, followed by MobileNet with an accuracy of 94%. In comparison, Random Forest, Naive Bayes, and Decision Tree achieved lower accuracies of 87%, 82%, and 80% respectively. These traditional models rely on manually extracted features and therefore struggle to capture complex patterns in medical images. The superior performance of VGG16 demonstrates the effectiveness of deep learning techniques for brain tumor classification. Based on these results, VGG16 was selected as the primary model for the proposed system due to its high accuracy and reliable performance.

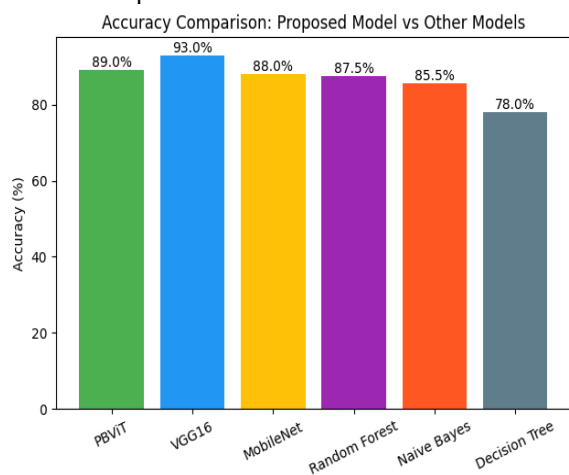


Fig 6.6 Overall System Performance

7. CONCLUSION AND FUTURE SCOPE

This project demonstrates that deep learning, particularly CNN-based architectures like VGG16 and MobileNet, can play a transformative role in the early detection of brain tumors. By leveraging transfer learning, the models achieved high accuracy and robustness while remaining computationally feasible for real-world deployment. The integration into a Django-based web application further enhanced the practicality of the system, making it usable by healthcare professionals without specialized technical expertise.

The results affirm the viability of CNNs for medical imaging tasks and highlight the importance of

balancing performance with deployment efficiency. Unlike many academic works confined to research environments, this project emphasizes **real-world applicability** by ensuring that the system can run on modest infrastructure while still delivering reliable predictions.

Looking ahead, the system can be expanded by incorporating segmentation capabilities to measure tumor size and location. Integrating **federated learning** techniques would enable the model to learn from multiple hospital datasets without compromising patient privacy. Deployment on **mobile platforms** could further extend its reach, particularly in rural or resource-constrained settings. Finally, collaboration with medical professionals for clinical trials would provide the validation necessary for integration into mainstream healthcare systems.

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