

Melanoma Skin Cancer Detection Using Deep Learning

Anusiya M.¹, Aswathy Priya M.¹, Dharshini P.^{1,*}, D. Prabakar²,

Abstract

Melanoma, a fatal type of skin cancer, is a major global health concern. For better patient outcomes, early and precise detection is essential. A branch of artificial intelligence called deep learning has demonstrated encouraging outcomes in medical image analysis, particularly the identification of skin cancer, in recent years. We present a new method for detecting melanoma skin cancer in this paper by utilizing the ResNet-50 architecture, a deep convolutional neural network (CNN). A pre-trained ResNet-50 model, which was first trained on a sizable dataset of varied images, is used in the suggested strategy to take advantage of the capability of transfer learning. This greatly reduces training time and boosts overall performance by allowing the network to learn low-level characteristics efficiently. We use a dataset of hundreds of images of skin lesions, both benign and malignant, to fine-tune the ResNet-50 architecture for melanoma classification precisely. To adapt the pretrained ResNet-50 to the binary classification problem, the final fully connected layers must be modified during the training process. We use the Adam optimizer during training and binary cross-entropy as the loss function. Furthermore, data augmentation techniques are used to decrease overfitting and boost dataset heterogeneity.

Keywords: Image segmentation, deep learning, convolutional neural network, Skin Cancer, Global Health

INTRODUCTION

Skin cancer of the melanoma type is a serious and potentially fatal condition that remains a global public health problem [1–3]. It comes from melanocytes, which are the cells that make melanin, the pigment that protects the skin. Despite making up a comparatively tiny share of skin cancer occurrences, melanoma is the cause of a disproportionately high number of deaths from the disease. Early detection and prompt treatments are essential for improving melanoma patients' prognosis and survival rates. In the past, skilled dermatologists have primarily relied on ocular examination to diagnose melanoma [4–8]. Visual inspection accuracy varies, though, and early-stage melanomas can occasionally be confused for benign lesions, delaying identification and possibly accelerating the course of the illness. The development of deep learning-based melanoma detection systems has exploded in the fields of medical imaging and computer vision to overcome these constraints and improve diagnostic skills. Medical imaging is one of the many image categorization jobs where deep learning, a branch of artificial

intelligence, has shown impressive results. Deep learning algorithms can teach intricate patterns and features from thermoscopic images by leveraging large datasets and powerful computing systems. This allows for automatic and precise melanoma identification [9–14].

IMAGE SEGMENTATION

One of the core tasks in computer vision is image segmentation, which is essential to deriving useful information from pictures. picture segmentation is the process of breaking a picture up into several areas or segments, each of which represents a different object or area of interest, as opposed to image classification, which gives a whole image a single label. This fine-grained partitioning makes it

*Author for Correspondence

Dharshini P.
E-mail: dharshinipalani.11@gmail.com

¹UG Scholar, Department of Computer Science and Engineering, Karpagam College of Engineering, Coimbatore, Tamil Nadu, India.

²Professor & Head of the Department, Department of Computer Science and Engineering, Karpagam College of Engineering, Coimbatore, Tamil Nadu, India.

Received Date: March 26, 2025

Accepted Date: April 2, 2025

Published Date: June 11, 2025

Citation: Anusiya M., Aswathy Priya M., Dharshini P., D. Prabakar. Melanoma Skin Cancer Detection Using Deep Learning. Research & Reviews: Journal of Oncology and Hematology. 2025; 14(2):1–9p.

possible to analyze and comprehend complicated visual images in greater depth, which facilitates a variety of applications in domains like object identification, autonomous driving, medical imaging, and robotics. Conventional picture segmentation algorithms frequently depend on heuristics and hand-crafted features, which limit their capacity to handle a variety of intricate real-world situations. However, picture segmentation has advanced significantly with the advent of deep learning, especially convolutional neural networks (CNNs). Using deep neural networks, deep learning-based picture segmentation automatically extracts pertinent features and patterns from vast quantities of labelled training data [15–18]. Significant gains in segmentation accuracy, robustness, and domain-specific adaptability have resulted from this data-driven approach. The U-Net is a well-known and significant deep learning architecture for image segmentation that mixes expanding and contracting paths to achieve accurate pixel-level segmentation.

DEEP LEARNING

Deep learning, a cutting-edge branch of artificial intelligence, has transformed numerous industries from robotics and healthcare to computer vision and natural language processing. Inspired by the structure of the human brain, deep learning is built on artificial neural networks and has shown remarkable ability to learn complex patterns and representations directly from data [19, 20]. This allows machines to perform tasks that were once considered too difficult or even impossible for traditional rule-based systems. Its key strength lies in the ability to automatically extract layered, meaningful features from vast amounts of labeled data. Iteratively modifying the neural network's parameters throughout this process – known as training – aims to reduce the discrepancy between the anticipated outputs and the ground truth labels. Deep learning algorithms may effectively handle high-dimensional data, identify complex patterns, and generalize effectively to novel, unobserved examples. Image identification has been one of deep learning's most impressive applications. A well-liked deep learning architecture, convolutional neural networks (CNNs) have shown unmatched performance in tasks including object detection, image segmentation, and image classification. CNNs are remarkably accurate at identifying objects, animals, and even individual people in photos by learning hierarchical features.

CONVOLUTIONAL NEURAL NETWORK

Convolutional neural networks (CNNs), a groundbreaking type of deep learning architecture, have dramatically changed the field of computer vision. Inspired by how the human visual system works, CNNs excel at analyzing and understanding visual data. This makes them particularly effective for tasks, such as object detection, image classification, and image segmentation. CNNs' basic concept is to use convolutional filters to automatically extract hierarchical representations and information from images. As local detectors, these filters pick up patterns in many aspects of an image, including edges, textures, and forms. CNNs can identify complex patterns that define different objects and visual concepts by stacking many convolutional layers, which allows them to gradually extract more abstract and sophisticated characteristics. CNNs' capacity to effectively handle high-dimensional data is one of their main advantages. The sheer volume and complexity of image data frequently presented challenges for traditional machine learning algorithms, which relied on manually created features. By learning pertinent features straight from the data, CNNs, on the other hand, mitigate this difficulty and eliminate the need for manual feature engineering.

LITERATURE REVIEW

A deep neural network (DNN) using rectified linear units (Relu) as the classification function is proposed in this work [1]. Typically, DNNs employ the SoftMax function as their classification function and ReLU as an activation function. This study, however, adds to the large body of research on the use of categorization functions other than soft max. Several research that employs deep learning techniques have reported state-of-the-art results in a wide range of tasks, including text classification, audio recognition, image classification, and natural language processing. The classification layer in these deep learning models uses the traditional soft max function. Nonetheless, this study adds to the array of research on the use of categorization functions other than SoftMax. In this work, we present the use of

rectified linear units (Relu) to a deep learning model’s classification layer. This method, which uses Re LU as an activation function for the hidden layers in a deep neural network, is original from this study. We achieve this by using the activation of the neural network’s penultimate layer to backpropagate the weight parameters of the Re LU classification layer. We present and contrast the predictive capabilities of DL Soft max and DL-Re LU models on the categorization of MNIST, Fashion MNIST, and Wisconsin Diagnostic Breast Cancer (WDBC). To learn the network weight parameters, we employ Adam optimization technique. On normalized and PCA reduced features, that is, from 28×28 (784) dimensions down to 16×16 (256) dimensions, we applied both CNN and FFNN as specified in Table 1 and Figure 1. When training a two-layered hidden FFNN for MNIST classification. Both models had an F1-score of 0.98, even though the SoftMax-based FFNN had a marginally greater test accuracy than the Re LU-based FFNN.

Table 1. Comparison table.

Algorithm	Accuracy
Existing	85
Proposed	90

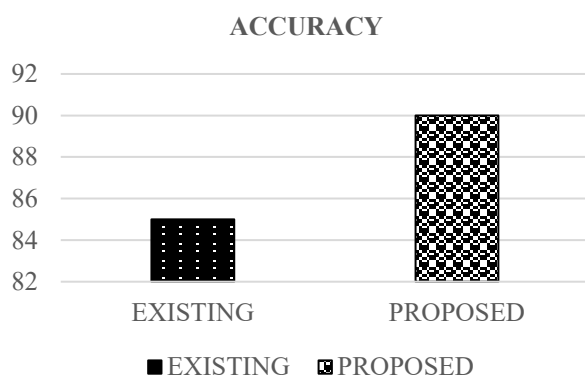


Figure 1. Comparison graph.

In this study, Khazaei et al. (2019) [2] have suggested Melanoma is the sixth most frequent malignancy in the United States and makes for 1.7% of all cancer cases worldwide. In developed, primarily fair-skinned nations, the incidence of melanoma is on the rise; in the US, it has increased by more than 320% since 1975. However, with the introduction of ten new targeted or immunotherapy drugs since 2011, the United States has seen a nearly 30% decrease in mortality over the last ten years. Checkpoint inhibitors are used to restore immune surveillance that has probably been deactivated by UV light, whereas oral BRAF/MEK inhibitor combinations target mutations in the signaling protein BRAF, which are present in half of patients. Even though the US 5-year survival rate has increased to 93.3% overall, stage IV illness survival is still at 29.8%. Most melanoma cases occur in older, white men, with an average diagnostic age of 65. While moles, obesity, immunosuppression, family history, unusual congenital illnesses, and indoor tanning beds all contribute to the condition, the primary risk factor is unprotected outdoor UV exposure. Since 1988, Australia has established primary prevention programs, such as education on sun protection, which have improved the use of sunscreen and reduced the incidence of melanoma, which peaked in Australia in 2005. Not until 2022–2026 is the anticipated peak for melanoma incidence in the United States. Less than 40% of Americans say they take proper precautions. The expected return on investment for a sun protection education program in the United States is two to four times. Additionally, melanoma mortality has been cost-effectively decreased by lesion-directed skin screening programs, particularly for individuals who are at risk. Melanoma is a type of cancer that affects melanocytes, which are cells in the basal layer of the epidermis that produce

melanin, or pigment. Neural crest-derived melanocytes express a variety of signaling molecules and factors that facilitate migration and metastasis following malignant transformation. Melanoma is responsible for more than 80% of skin cancer deaths, even though it only makes up 1% of all skin cancers. There are numerous clinical subtypes of melanoma that vary in molecular profile, presentation, and demography.

According to this system, skin cancer ranks first in men and second in women, making it one of the most prevalent malignancies worldwide [3]. This study sought to ascertain the global incidence and prevalence of skin cancer as well as its correlation with the Human Development Index (HDI). Materials and Procedures: The World Bank for Cancer's 2018 cancer death and incidence statistics served as the basis for this descriptive-analytic analysis. We created maps of the incidence, mortality, and distribution of skin cancer in the world's nations. Data analysis methods included regression and correlation testing to assess the relationship between HDI and incidence and death. Stata-14 was used to do statistical analysis, and a significance threshold of 0.05 was estimated. One of the most prevalent types of cancer worldwide is skin cancer. Climate change, which includes changes in the thickness of the protective layer of ozone as well as changes in individual and social habits, can be used to explain the rise in skin cancer incidence in recent decades, as most of these cancers are brought on by repeated exposure to sunlight. Non-Melanoma Skin Cancer (NMSC) and Melanoma Skin Cancer (MSC) are the two subtypes of skin cancer. Squamous cell carcinoma (SCC) and basal cell carcinoma (BCC) are the two subtypes of non-melanoma malignancy. The prognosis for this kind of cancer is typically poorer. These two types of cancer share epidemiological and carcinogenic characteristics and are both derived from epidermal cells. Compared to Black people and others, white individuals have a greater incidence of nonmelanoma malignancies. Eighty percent of skin tumor that is not melanoma is basal cell carcinoma. The greatest significant risk factor for BCC outbreaks is exposure to UV radiation. The development index (HDI) has a relationship with the incidence and mortality of both melanoma and nonmelanoma skin cancer. An increase in the HDI index lowers mortality via improving access to health services, early disease identification, and early disease treatment. Patients' motivation to accept care and treatment for their illness has improved because of increasing literacy and awareness, which has also decreased the disease's death rate. Therefore, it is crucial to focus on building more specialized healthcare facilities, bolstering monitoring systems, and raising people's awareness and education in less developed nations to diagnose patients early and treat them promptly, which will lower disease mortality.

Steganography techniques have frequently been utilized to conceal information, often using images as the ideal medium [4]. The bitmap of a digital image offers a location where secret information can be inserted covertly without anyone noticing, whether it be in documents, mail, or even other images. To date, the state-of-the-art literature has a wealth of steganography techniques and steganalysis methods for identifying concealed information in files. Convolutional neural networks are the foundation of modern steganography algorithms, which aim to minimize visible alterations in the image while encoding as much information as feasible. This paper attempts to follow this trend by showing how a Generative Adversarial Network (GAN) may be used to enhance the performance of a spatial domain steganalysis approach and to include secret information with little change to the image. The GAN learns how to modify an image through training so that it may subsequently use the Least Significant Bit steganography approach to introduce a message. The outcomes demonstrate that the strategy is effective in evading detection by a cutting-edge Deep Learning steganalysis architecture. Many strategies have been put out over time to conceal information and preserve secure channels of communication. Almost any file can be utilized to conceal information that is obvious to the naked eye thanks to the development of computers and digital resources. Steganography techniques can be used to embed messages or data inside images, audio files, PDFs, or even a programmer's control-flow diagram after its binary code has been edited. The practice of rendering information invisible to prevent detection by a third party is known as steganography, as opposed to cryptography, which describes methods and algorithms that alter the message to render it incomprehensible to unauthorized readers.

Traditional state-of-the-art image steganalysis techniques often involve a classifier trained using features extracted from rich image models [6]. Several studies have attempted to create a CNN-based

Steg analyzer since the CNN deep learning architecture ideally embodies both the feature extraction and classification processes. The network is the first competitive convolutional neural network (CNN) to combine an Ensemble Classifier (EC) with Spatial Rich Models (SRM), achieving high-caliber detection performance. In this study, we suggest a criterion for selecting between the CNN and SRM+EC methods for a particular input image. Our solution outperforms each of the three stenographic spatial domain algorithms – S-UNIWARD, MI POD, and HILL – in terms of detection capabilities when tested on the Tensor flow computing platform. Furthermore, the suggested method can be viewed as a blind steganalysis strategy because both SRM+EC and the CNN are trained using only one embedding algorithm, namely MI POD. The last 10 years have seen the proposal of numerous stenographic algorithms that conceal a secret message under a cover image. These embedding systems can function both in the frequency domain, as the J(PEG) equivalent of S-UNIWARD, and in the spatial domain, as in the case of MI POD. The goal of creating such an algorithm is to offer a method that modifies the cover image as minimally as feasible. In fact, the stenographic system is more secure the less the cover is altered, the less probable it is that the steno picture carrying the message would be identified. Evidently, evaluating the security of stenographic instruments has led to the parallel problem of steganalysis, or the detection of hidden information. When performing steganalysis on images, we typically have limited information available and merely assume that the image domain is understood. Most methods for image steganalysis are two steps [7].

EXISTING SYSTEM

The deadliest illness in the world. The rapid growth of melanoma skin cancer, together with its high treatment costs and mortality rate, makes early detection of the disease even more important. Most of the time, skin cancer cells are found by hand, and it takes time to treat this kind of disease. In this project, we will use machine learning and image processing to create a skin cancer detection system. Following the segmentation of the thermoscopic pictures utilizing feature extraction techniques, the characteristics of the impacted skin cells are extracted. To extract the characteristics of skin cells, we will employ a convolution neural network classifier, which is based on deep learning technology.

PROPOSED SYSTEM

The suggested system uses CNN Res Net-50 architecture and deep learning to create a sophisticated melanoma skin cancer screening tool. Using a sizable and varied dataset of skin lesion photos, the system will use transfer learning to make use of the ResNet50 model that has already been trained on a huge number of different types of photos. This strategy will enable the system to effectively learn low-level features, cutting down on training time while improving the system's capacity to correctly categorize skin lesions. The dataset will be comprehensively pre-processed using methods, such as data augmentation, normalization, and scaling to guarantee robustness and generalization. The final fully connected layers of the modified ResNet-50 architecture will be adjusted to the binary classification task to optimize it for melanoma classification. The model will maximize its efficiency in differentiating between benign and malignant skin lesions by using Adam as the optimizer and binary cross-entropy as the loss function. To enable the model to adapt higher-level features relevant to melanoma detection, we will employ selective finetuning throughout the training process, which will allow some deeper layers of ResNet-50 to be retrained. Hyperparameters will be adjusted to attain optimal performance after a thorough evaluation of the suggested system on a different validation set [8].

LOAD DATA

This module is in charge of loading the dataset of skin lesions that includes pictures of both benign and malignant conditions. To analyses the dataset further, it is necessary to arrange it into the proper folders for each class. This module will then read and import the photos and their labels.

PRE-PROCESSING THE DATA

One of the most important steps in getting the dataset ready for training is data pre-processing. To increase dataset diversity and decrease overfitting, this module will manage duties including scaling all photos to a standard input size, normalizing pixel values to a predetermined range, and using data augmentation techniques (such as rotation and flipping).

FEATURE SELECTION

The transfer learning procedure automatically handles feature selection because ResNet-50 is a pre-trained model. During its first training on ImageNet, the pretrained ResNet-50 model already learnt pertinent low level characteristics from a wide range of images.

TRAINING AND TESTING

This module uses the modified final fully connected layers of the ResNet-50 architecture to classify melanoma. By loading the pre-trained ResNet-50 weights and freezing most of the layers, the module will also manage the transfer learning procedure. In the beginning, only the recently introduced completely connected layers will be trainable. The dataset that was processed in Module 2 will be used for training, and the Adam optimizer and binary cross-entropy will be used as the loss function. To maximize performance, the training will be carried out in epochs, with hyperparameters, like learning rate and batch size, being adjusted. Following training, this module will assess the trained model's performance using a separate test set. The module will load the test dataset, use the trained ResNet-50 model to make predictions, and calculate evaluation metrics like F1-score, accuracy, sensitivity, specificity, and precision.

ANALYSIS OF PERFORMANCE AND EVALUATION

This last module will evaluate the evaluation findings to determine how well the model detects melanoma skin cancer. We will calculate and compare the evaluation metrics to ascertain the accuracy and effectiveness of the system. The module will highlight the model's advantages and disadvantages as well as possible areas for development. The suggested system will successfully load, pre-process, train, and test the melanoma skin cancer detection model by putting these modules into practice and utilizing the CNN ResNet-50 algorithm. To improve the model's performance in actual clinical settings, the performance analysis will offer insightful input (Figure 2).

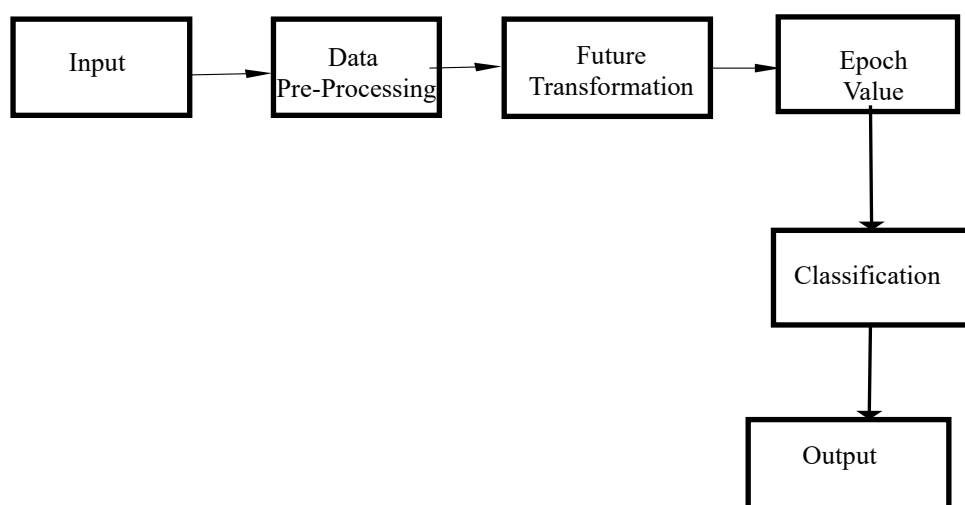


Figure 2. System Flow Diagram.

ALGORITHM DETAILS START DATA LOADING FUNCTION

Load Data

- *Input:* Dataset containing benign and cancerous image folders.
- *Output:* Test sets, validation, and training
- Examine dataset folders for labels and photos.
- Divide the dataset into test, validation, and training sets (for example, 70:15:15).
- GO BACK Test sets, validation, and training.

FINAL FUNCTION

Function of Data Pre-Processing Dataset Pre-Process Data

- *Input:* The dataset (labels and pictures).

- *Output:* The dataset after preprocessing, for every image in the dataset:
- Resize the image to the ResNet-50 input scale of 224x224.
- Set the values of the pixels to [0, 1]. Range.

END FOR

Use data augmentation techniques, such as zooming, flipping, and rotating.
GO BACK-End function of pre-processed dataset.

FUNCTION OF FEATURE SELECTION PRE

Trained Model Load

- *Input:* ResNet-50 pre-trained model
- *Output:* ResNet-50 model modification.
- Use ImageNet weights when loading ResNet-50.
- Except for the last fully connected layers, freeze every layer.
- To achieve binary classification, replace the last completely connected layers.
- END FUNCTION RETURN Modified ResNet-50 model.

FUNCTION OF TRAINING AND TESTING

Train and Test Model (Model, Validation Set, Test Set, and Training Set)

- *Input:* Training, validation, and test sets for the modified ResNet-50 model.
- The output Evaluation metrics and a trained model Assign the loss function to binary cross-entropy.

For Every Training Epoch, Configure the Adam Optimizer with the Desired Learning Rate

1. Use training set to train the model.
2. Use validation set to validate the model.
3. As necessary, modify the hyperparameters.

END FOR

- Test sets test model.
- *Calculate metrics:* F1-score, precision, specificity, sensitivity, and accuracy.
- Go Back Metrics and the trained model's end function.

PERFORMANCE ANALYSIS AND EVALUATION FUNCTION ANALYZE PERFORMANCE USING METRICS

- *Input:* Testing-phase metrics.
- The output Performance-related insights.
- Examine metrics (high sensitivity for key cases, for example).
- Determine your shortcomings and potential areas for development.
- Make suggestions for improvement.
- Go Back to Final Function of the Evaluation Report

RESULT ANALYSIS

A comprehensive evaluation of the suggested melanoma detection system's performance utilizing the ResNet-50 architecture was conducted on a separate test dataset that included a variety of skin lesion images, including both benign and malignant cases. To assess how well the model distinguished between benign and malignant lesions, important evaluation metrics including accuracy, sensitivity, specificity, precision, and F1-score were calculated. The system's capacity to accurately detect malignant instances is highlighted by the high sensitivity seen in the data, which is essential for the early diagnosis and treatment of melanoma. Likewise, the accuracy indicator confirms accurate classifications by highlighting the system's resilience in reducing false positives.

However, the analysis also showed that by adding variability and decreasing overfitting, the data augmentation methods used during training greatly improved the model's generalization skills. By cutting down on training time and efficiently utilizing previously learnt features for the melanoma

classification task, the transfer learning strategy using pre-trained ResNet-50 weights proved to be beneficial. Despite these advantages, some drawbacks were noted, including the possibility of incorrect classifications in situations where benign and malignant lesions share visual characteristics. To enhance classification accuracy and dependability in practical clinical applications, these findings point to areas for more optimization, such as adding more varied datasets and testing out sophisticated architectures or ensemble techniques.

CONCLUSIONS

In conclusion, the use of CNN ResNet-50 in a melanoma skin cancer detection system is a noteworthy development in medical technology. This approach has the potential to enhance the early diagnosis and detection of melanoma, a fatal type of skin cancer, by utilizing deep learning. Input and output mechanisms in the system's architecture guarantee easy use and effective analysis of skin lesion photos. The system has undergone extensive testing to determine its accuracy, robustness, and dependability. This test includes unit testing, integration testing, and performance evaluation. Its excellent accuracy in differentiating between benign and malignant skin lesions can help dermatologists and other medical professionals make well-informed judgements quickly. The model can learn complex features from a large and varied dataset by combining transfer learning and fine-tuning approaches with CNN ResNet-50, which improves its classification capabilities even further. While the informative and aesthetically pleasing output design clearly and actionably displays categorization results and probability scores, the user-friendly input design makes it simple for users to upload skin lesion photographs for analysis.

FUTURE WORK

There are several possible directions for future research and development in the framework of the CNN ResNet-50 melanoma skin cancer detection system. First, investigating more complex deep learning architectures or ensemble models can improve the system's performance even further. Examining attention mechanisms or other methods for concentrating on pertinent areas of the image could enhance the interpretability and diagnostic precision of the model. Furthermore, combining information from other imaging modalities, like reflectance confocal microscopy or ceroscopy, may yield supplementary data for more thorough evaluations. Additionally, ongoing data collecting and dataset improvement will support a more expansive, varied, and current data repository, which will promote the model's generalization and adaptability.

REFERENCES

1. Agarap AF. Deep Learning using Rectified Linear Units (Relu). Ar Xiv preprint. 2018. Available from: <http://arxiv.org/abs/1803.08375>.
2. Khazaei Z, Ghorat F, Jarrahi AM, Adineh HA, Sohrabivafa M, Goodarzi EJWCRJ. Global incidence and mortality of skin cancer by histological subtype and its relationship with the human development index (HDI); An ecology study in 2018. *World Cancer Res J.* 2019;6(2):e13.
3. An ecology study examined the association between the Human Development Index (HDI) and the incidence and death of skin cancer worldwide by histological subtype. *World Cancer Res J.* 2019;6:13.
4. Cancer Council Australia. Skin cancer facts and figures [Internet]. 2010 [cited year unknown]. Available from: <http://www.cancer.org.au/cancersmartlifestyle/SunSmart/Skincancerfactsandfigures.htm>.
5. Filler T, Bas P, Pevny T. The nuances of setting up BOSS: A breakdown of our steganographic system. In: *International Workshop on the Hide of Information*. Berlin: Springer; 2011. p. 59–70. doi:10.1007/978-3-642-24178-9_5.
6. Schulman J, Sutskever I, Houthoof R, Chen X, Duan Y, Abbeel P. Info GAN: Interpretable representation learning using generative adversarial nets. In: *Advances in Neural Information Processing Systems*. 2016;29. Available from: <https://proceedings.neurips.cc/paper/2016/file/7c9d0b1f96aebd7b5eca8c3edaa19ebb-Paper.pdf>.

7. Chen X, Huang Y, Kong C, Jiang K, Li Y, Pan J, et al. Dual contrastive learning for deraining deep images without pairs. In: Proceedings of the IEEE/CVF Conference on Computer Vision and Pattern Recognition (CVPR); 2022. p. 2007–2016. doi:10.1109/CVPR52688.2022.00206.
8. Deb K, Pratap A, Agarwal S, Meyarivan T. A fast and elitist multiobjective genetic algorithm: NSGA-II. *IEEE Trans Evol Comput.* 2002;6(2):182–197. doi:10.1109/4235.996017.
9. El-Khalil R, Keromytis AD. Hydan: Program binaries conceal data. In: Lopez J, Qing. S, Okamoto E, editors. Information and Communications Security. Berlin: Springer; 2004. p. 187–199.
10. Fard AM, Varasteh-A F, Akbarzadeh-T MR. A novel way to secure JPEG steganography using genetic algorithms. In: IEEE International Conference on Engineering of Intelligent Systems; 2006. p. 1–6. doi:10.1109/ICEIS.2006.1703168.
11. Finlayson SG, Ito J, Zittrain JL, Beam AL, Kohane IS, Bowers JD. Adversarial attacks on medical machine learning. *Science.* 2019;363(6433):1287–1289. doi:10.1126/science. Aaw 4399.
12. Fridrich J, Kodovsky J. Rich models for steganalysis of digital images. *IEEE Trans Inf Forensics Secur.* 2012;7(3):868–882. doi:10.1109/TIFS.2012.2190402.
13. Geetha S, Kamaraj N. Enhancing picture steganalysis by employing MBEGA for feature selection. *Ar Xiv preprint.* 2010. arXiv:1008.2824. doi:10.48550/arXiv.1008.2824.
14. Ghasemi E, Fassihi N, Shanbehzadeh J. Combining evolutionary algorithms and wavelet transforms for high capacity image steganography. In: Proceedings of the 2012 World Congress on Engineering; London, UK. 2012 Jul 4–6; Vol. 2188. p. 495–498. Available from: <http://www.iaeng.org/publication/IMECS2011>.
15. Fierrez J, Camacho D, Martín A, Huertas-Tato J. Enhancing image classification by combining statistical indicators with CNNs. *Inf Fusion.* 2022;79:174–187. doi: 10.1016/j.inffus.2021.09.012.
16. Wuhab AWA, Idris YIB, Ho AT, Hussain M, Jung KH. A survey of spatial image steganography. *Signal Process Image Commun.* 2018;65:46–66. doi: 10.1016/j.image.2018.03.012.
17. Premaratne P, Vial PJ, Kadhim IJ, Halloran B. An extensive overview of image steganography, including methods, assessments, and directions for further study. *Neurocomputing.* 2019;335:299–326. doi: 10.1016/j.neucom.2018.06.075.
18. Mandal PC, Paul G, Mukherjee I, Chatterji B. Steganography of digital images: A review of the literature. *Inf Sci.* 2022;609:1451–1488. doi: 10.1016/j.ins.2022.07.120.
19. Martín A, Camacho D, Fuentes-Hurtado F, Naranjo V. Developing designs for deep neural networks to classify Android malware. In: Proceedings of the IEEE Congress on Evolutionary Computation (CEC); 2017. p. 1659–1666. doi:10.1109/CEC.2017.7969501.
20. Khodaei M, Faez K. Employing LSB substitution and a genetic algorithm to hide images. In: Meniere J, Mammias D, Norbord F, Lazore O, Elmoataz A, editors. Image and Signal Processing. Berlin: Springer; 2010. p. 404–411. doi:10.1007/978-3-642-13681-8_47.