

Integration of quantitative and qualitative imaging methods for cancer diagnosis

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ABSTRACT The integration of quantitative and qualitative imaging techniques has improved cancer detection by providing a more complete picture of patient outcomes. The diagnostic value and therapeutic strategy can both be improved with the use of quantitative imaging since it gives objective assessments of physiological and molecular changes. Qualitative imaging, on the other hand, delivers visual clues and contextual information necessary for deciphering complicated biological processes. When combined, the two methods provide a more complete picture that is useful for making accurate diagnoses and keeping tabs on patients during therapy. Challenges in data harmonization, validation, and clinical translation arise when integrating disparate data sources from quantitative and qualitative imaging approaches. Effectively combining the two forms of information requires ensuring consistent acquisition techniques and building Robust Analysis Processes (RAP). With the goal of improving diagnostic accuracy and allowing for more detailed illness characterization, a Hybrid Imaging Diagnostic Machine Learning-based Framework (HIDML-F) is suggested to fuse and analyse the hybrid data. HIDML-F is useful for treating both solid tumors and hematological malignancies. It is helpful in determining the aggressiveness of tumors, measuring the effectiveness of treatment, and differentiating benign from malignant growths. Furthermore, HIDML-F captures both functional and morphological information, which enables individualized treatment regimens. The value of HIDML-F is demonstrated through simulated patient scenarios and subsequent simulation analysis. HIDML-F has been shown to be superior to traditional imaging approaches in a number of ways, including its ability to detect subtle changes, reduce false positives, and boost diagnostic confidence, among others. The potential for early treatment response assessment to guide therapeutic interventions is further demonstrated by longitudinal simulations.

Key words: quantitative, qualitative Imaging, cancer diagnosis, hybrid imaging diagnostic, machine learning

INTRODUCTION

A number of obstacles must be overcome in order to successfully combine quantitative and qualitative imaging techniques for the detection of cancer [1]. The inherent heterogeneity of tumors is one of the main problems [2]. Even within a single patient, tumors can display notable heterogeneity in terms of size, form, cellular makeup, and metabolic activity [3]. It is difficult to generate a unified and accurate assessment of the tumor's characteristics due to the fact that different imaging techniques may produce conflicting results due to this heterogeneity. Radiologists and other medical professionals often must rely on visual inspection of qualitative data like radiological pictures [4]. It's possible that the diagnostic accuracy might suffer if other witnesses, each with their own unique set of experiences and perspectives, were brought into the mix [5]. Integrating qualitative and quantitative data presents numerous technical problems. Since the data from each imaging modality has its own unique set of acquisition parameters and file format, fusing them together is a challenging process [6]. The effective combination and interpretation of such varied datasets demands sophisticated computing tools and skills, which must be developed into algorithms [7]. While there is potential in an integrated approach, it is critical that it produce trustworthy and therapeutically relevant outcomes [8]. This usually entails contrasting the integrated findings with histological information or the final results of the patients [9]. There are additional ethical and privacy issues to consider, such as the use of patient consent forms and the security of sensitive medical data [10]. To overcome these obstacles, teamwork between academics, medical professionals, and engineers is essential. More precise cancer diagnosis and individualized treatment will be possible after imaging processes are standardized, computational approaches are improved, and rigorous clinical validation is performed [11].

In the field of cancer diagnostics, combining quantitative and qualitative imaging techniques provides a more complete picture of malignancies [12]. Combining functional and anatomical data, existing methods like Positron Emission Tomography-Computed Tomography (PET-CT) and Magnetic Resonance Imaging-PET (MRI-PET) fusion can shed light on metabolic and structural processes. Machine learning uses algorithms to combine information from several modalities and clinical characteristics, while radiomics extracts quantitative aspects from images. Simultaneous data acquisition is made possible by multimodal imaging platforms like PET-MRI, which eases registration difficulties. However, there are difficulties in these attempts at integration. For effective data fusion, exact registration is required, taking into account differences in resolu-

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tion and contrast. When evaluating qualitative data, there is room for interpretation due to interobserver variation. The geographical and temporal variability of tumors makes it challenging to combine data from diverse tumor locations. Imaging protocol standardization across institutions is a difficult but essential task. It is crucial to show the clinical relevance of integrated therapies through rigorous clinical validation. Safeguarding data privacy and meeting computational demands are additional challenges. To overcome these obstacles and realize the full potential of integrated imaging for cancer diagnosis, which will ultimately lead to more precise diagnoses and better patient care, requires concerted efforts from researchers, physicians, and technologists.

By combining quantitative and qualitative imaging methods, the researchers expect to improve the accuracy of cancer diagnoses. The goal of this fusion is to enhance diagnostic precision by providing a more thorough evaluation of tumor features.

The improvement of cancer treatment plans is another important objective. Researchers hope to provide tailored treatment plans based on a more thorough understanding of the condition by integrating quantitative data, which provides objective assessments of physiological and molecular changes, with qualitative data, which provides context.

The present research tackles the problems that arise when trying to combine data collected using several quantitative and qualitative imaging techniques. In order to improve cancer treatment, this project seeks to advance the clinical translation of integrated imaging techniques by creating a Hybrid Imaging Diagnostic machine learning-based framework (HIDML-F) that can efficiently harmonize and analyze hybrid data.

Following this introduction, the research moves on to examine existing quantitative and qualitative imaging methods for cancer diagnosis in Section 2. In addition, a mathematical proposal for a machine learning-based framework (HIDML-F) for hybrid imaging diagnostics is presented in Section 3. The results and the discussion are addressed in Section 4, while a conclusion and summary are presented in Section 5.

LITERATURE REVIEW

The combination of AI with medical imaging has ushered in a new era of revolutionary healthcare in recent years. AI has broadened the diagnostic horizons of healthcare providers, allowing for more precise tumor volume delineation, extraction of cancer characteristics, and risk prediction.

According to the research presented by Sheth, D. et al., IT-based imaging (IT-I) has given radiologists a wider variety of diagnostic options and larger picture datasets to examine and interpret. Accurate tumor volume delineation, extraction of typical cancer phenotypes, translation of tumoral phenotype features to clinical genotype implications, and risk prediction are all areas in which AI's automated skills have the potential to improve physicians' diagnostic expertise [13]. Researchers examine the literature on the current application, promise, and limitations of AI in breast cancer imaging, with a focus on magnetic resonance imaging.

Innovations in the qualitative interpretation of cancer imaging by expert clinicians, such as volumetric delineation of tumors over

time, extrapolation of the tumor genotype and biological course from its radiographic phenotype, prediction of clinical outcome, and assessment of the impact of disease and treatment on adjacent organs, have been made possible by the development of Artificial Intelligence in cancer imaging (AI-CI) by Bi, W. L. et al. Clinical workflow comprising radiography identification, management decisions on whether to deliver an intervention, and subsequent observation may undergo a paradigm shift brought about by AI [14]. There has been an increase in coordinated efforts to bring AI technology into clinical use and influence the future of cancer care, however most studies to date examining AI applications in oncology have not been rigorously tested for reproducibility and generalizability.

Clinical integration of Machine Learning (CI-ML) was proposed by McIntosh et al. They conducted a blinded, head-to-head study where they fully integrated a random forest algorithm into the clinical workflow and used it to plan Radiation Therapy (RT) for prostate cancer with the goal of curing the disease [15]. These results demonstrate the limitations of relying on retrospective or simulated evaluations of ML approaches, even when experts are blinded to the results, to predict the acceptability of algorithms in a real-world clinical context when lives are at stake.

The Augmented Reality Microscope (ARM) suggested by Chen, P. H. C. et al. superimposes AI-based information on top of the live view of the sample, making it possible to incorporate AI into existing workflows without disrupting existing processes. The diagnosis and staging of cancer, which indirectly affects treatment, rely heavily on microscopic analysis of tissue samples. Many parts of the world lack access to skilled pathologists, and these evaluations show a lot of variation. With the ARM's help, researchers anticipate being able to more easily use AI tools that enhance cancer diagnosis' precision and productivity [16].

Radiomics in Breast Cancer Classification (R-BCC) was developed by A. Conti et al. to improve the sensitivity of Breast Cancer (BC) diagnosis and screening without sacrificing specificity [17]. Among these, radiomics has been gaining traction in oncology as a means of enhancing cancer detection, diagnosis, and therapy. Magnetic Resonance Imaging (MRI) is the gold standard for identifying and diagnosing lesions because of the superior resolution it provides compared to other methods. Radiomics has great potential for distinguishing malignant from benign breast lesions, for categorizing BC types and grades, and for forecasting treatment response and recurrence risk, according to the majority of evidence gleaned from the literature.

Artificial Intelligence (AI) based methods were developed by Baxi, V. et al. to investigate and extract data that is not immediately apparent to the human eye [18]. The difficulty in choosing the best treatment for each individual patient is growing as more and more options become accessible for any given ailment. Pathologists have traditionally played a crucial role in providing correct diagnoses and evaluating biomarkers for companion diagnostics. However, AI-powered analysis tools have the potential to improve upon these tasks in terms of accuracy, reproducibility, and scalability [19].

Our suggested Hybrid Imaging Diagnostic Machine Learning-based Framework (HIDML-F) is a major breakthrough among the many methods and new ideas that have been addressed. HIDML-F outperforms conventional methods by providing a holistic approach that uses AI to improve precision, reliability,

and scalability in cancer diagnosis. HIDML-F raises the bar for cancer treatment by revolutionizing medical imaging diagnostics through the seamless incorporation of AI into clinical workflows and the use of cutting-edge radiomics and imaging technology [20].

PROPOSED METHOD

An enormous step forward in cancer care has been the combination of quantitative and qualitative imaging techniques for diagnosis. To get insight into the physiological characteristics of cancer, quantitative imaging methods such as Magnetic Resonance Imaging (MRI), computed tomography (CT), and Positron Emission Tomography (PET) scans are used. However, qualitative imaging, such as conventional X-rays and ultrasounds, offers visual context that aids doctors in determining where and how a tumor is located in the body.

A more complete and accurate image of the illness is shown when these two methods are integrated seamlessly. Functional and molecular changes may be measured using quantitative data, while geographical and contextual details can be provided with qualitative data. This integration makes accurate diagnosis, early detection, and individualized therapy possible. On the other hand, it raises problems in analyzing and harmonizing data. The use of sophisticated machine learning-based frameworks that enable the effective integration and interpretation of disparate imaging data is on the rise as a means of overcoming these obstacles. When quantitative and qualitative imaging approaches are used, practitioners can make better judgments for their patients, thereby improving cancer treatment results.

Figure 1 explains integrating quantitative and qualitative imaging techniques into a complete cancer diagnostic framework. By combining the benefits of many imaging techniques, this framework greatly aids in identifying and diagnosing cancer.

Methods of quantitative imaging:

These techniques use the application of cutting-edge technologies like Positron Emission Tomography (PET), Magnetic Resonance Imaging (MRI), or Computed Tomography (CT) to get specific

information on cellular and molecular alterations in tissues. Objective numerical estimates of tumor size, metabolic activity, and perfusion may be obtained by quantitative imaging. This information is priceless for delving into the biology of cancer.

Methods of qualitative imaging:

Imaging techniques such as conventional X-rays, ultrasound, and even optical imaging fall under this category. Visual cues and contextual information are provided regarding the tumor's location, shape, and surrounding tissue features. However, the degree of quantitative data may not be as high as with more sophisticated procedures. Understanding the spatial linkages and larger context of the tumor inside the body is facilitated by qualitative imaging.

Imaging data integration and fusion:

This approach relies heavily on a process dubbed "Integration & Fusion of Imaging Data." At this point, the quantitative and qualitative information acquired from both imaging modalities must be harmonized and combined. A more complete image of the patient's health can only be achieved via integrating data from these many sources. The process of clinical translation, data harmonization, and data validation are all discussed here. The following analysis relies on this synthesis as its cornerstone.

HIDML-F: The combined information is sent to the "Hybrid Imaging Diagnostic Machine Learning-based Framework" (HIDML-F). The diagnostic procedure revolves around this framework. It uses advanced machine learning algorithms to investigate the combined data in-depth.

Enhancing the diagnostic process and therapeutic interventions:

The ultimate purpose of this framework is to enhance cancer patients' access to accurate diagnosis and effective treatment. Physicians may make more accurate diagnoses by integrating the quantitative information about the tumor's physiological properties with the qualitative information about its geographical

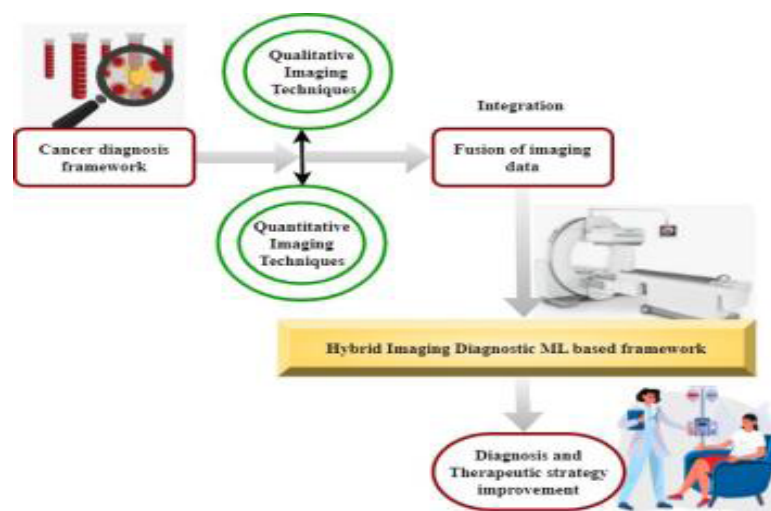


Fig. 1. Integration of Qualitative and Quantitative Imaging Methods

surroundings. They may also create individualized treatment strategies by learning more about the tumor's behavior and traits. Tumor aggressiveness, therapy efficacy, and benign/malignant differentiation are just a few applications for HIDML-F.

HIDML-F allows for the creation of highly personalized treatment regimens by recording functional and morphological characteristics. This paper improves health outcomes and reduce adverse reactions by tailoring care to each individual. The proposed method represents a major step forward in cancer detection and therapy. It uses the benefits of both quantitative and qualitative imaging techniques, solves data integration problems, and uses machine learning to draw useful conclusions. The outcome is higher diagnostic certainty, more precise diagnoses, more efficient treatment plans, fewer false positives, and better outcomes overall.

Figure 2 explains the Hybrid Imaging Diagnostic Machine Learning Framework (HIDML-F) for Tumor Assessment and Therapy Efficacy, focusing on its core features and methodology in the context of cancer diagnosis and therapy. This approach explains how quantitative and qualitative imaging data may be integrated to diagnose tumors better and choose the best course of therapy.

Raw data: In equation (1), quantitative and qualitative imaging data $[[QQ]]^k(s,t)$ are two input data types the framework needs. Qualitative imaging methods give visual hints and contextual information about biological processes $L(s,t)$, whereas quantitative methods objectively evaluate physiological and molecular changes $Mc(\partial k)$ inside the patient's body. This merged information may then be used for further investigation and diagnosis.

$$[[QQ]]^k(s,t) = L(s,t) + Mc(\partial k) \tag{1}$$

Harmonization and data integration:

Equation (2) will include matching and synchronizing the $S(\partial k)$ quantitative and qualitative imaging data. Harmonizing and aligning data from many sources $1/S$ and modalities is achieved through this procedure. Since different sources of information often employ different formats and scales vt , this is crucial for ensuring consistency and coherence Cn in future analytic procedures.

$$S(\partial k) = 1/S * 1 / (1 - (|\partial k| / Cn)^2) + vt \tag{2}$$

Machine Learning: Equation (3) expresses that the Machine learning techniques integrate and align data for in-depth analysis $E^2(s,t)$. Machine learning methods are well-suited to interpreting

medical images because of their ability to detect patterns $[[c]]^2(s,t) \setminus (n)$ and correlations z within large datasets. These algorithms use the combined data $j(n+1)$ to understand how to proceed best.

$$E^2(s,t) = a \{ [c]^2(s,t) \setminus (n) \in z \} + j(n+1) \tag{3}$$

Model for diagnosis-based treatment:

Equation 4 shows a diagnostic decision model DT provides the basis for tumor diagnosis (x,y) and therapy efficacy analysis. Important choices about the patient's health q may be made with the help of this model because of the insights generated from the combined data and machine learning algorithms. It can tell the difference between benign bn and malignant growths vt , evaluate the efficacy of therapy, and ascertain the aggressiveness of tumors.

$$DT = q(x,y) + s(x,y) + (vt - bn) \tag{4}$$

Model:

The capacity to appropriately evaluate tumor aggressiveness is a major benefit of the framework. This data is important for individualizing care and realizing the urgency of actions. In addition, the framework assesses the efficacy of continuing treatments, offering insights into whether or not the selected therapies are producing the anticipated results or need revisions.

Differentiating cancerous growth:

Cancer diagnosis relies heavily on being able to tell the difference between benign and malignant tumors. In this respect, HIDML-F shines because it provides a more complete assessment using quantitative and qualitative data. This capacity guarantees that patients quickly obtain appropriate therapy while decreasing the chance of a wrong diagnosis.

Customized health care plans:

HIDML-F goes further by allowing customized treatment plans to be developed. The framework may personalize treatment regimens to the unique features of each patient's illness by considering both functional and morphological information from imaging data. This individualized strategy improves treatment outcomes while reducing unwanted adverse effects.

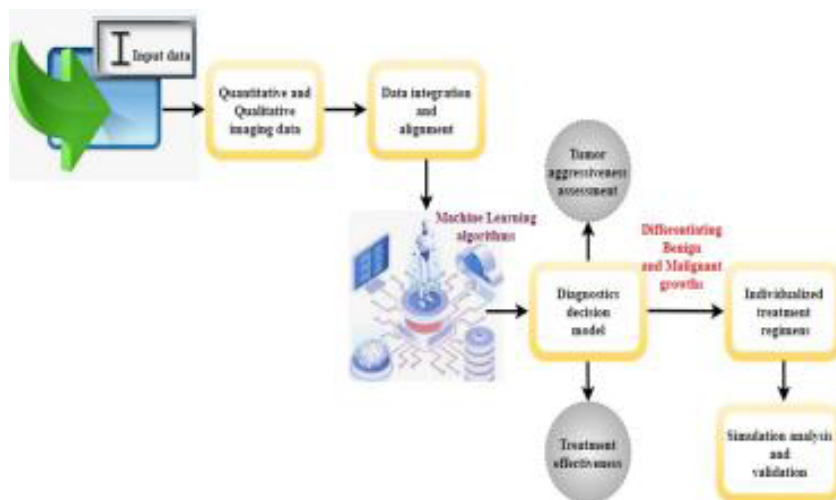


Fig. 2. HIDML-F for Tumor Assessment and Treatment Effectiveness

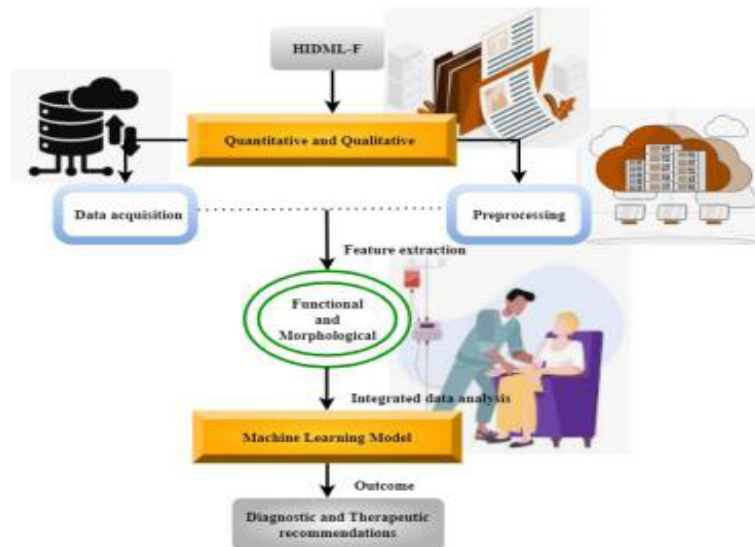


Fig. 3. Hybrid Imaging Diagnostic Machine Learning-based Framework (HIDML-F)

Analyzing and verifying simulations:

Analysis and validation of the framework's simulations round out the process. This phase evaluates the system's functionality with simulated and actual patient data. It ensures that the findings provided by HIDML-F are trustworthy and accurate for clinical decision-making.

Figure 3 explains that integrating quantitative and qualitative imaging techniques for cancer detection is much easier with the help of the Hybrid Imaging Diagnostic Machine Learning-based Framework (HIDML-F). The data from various imaging methods may be processed and analyzed using this framework, leading to more accurate diagnoses and better treatment suggestions.

Data acquisition and preprocessing:

Gathering quantitative and qualitative imaging data is the next stage. Imaging technologies such as PET, MRI, and CT scans may provide quantitative data, whereas X-rays and ultrasounds can provide qualitative data. Noise reduction and data alignment are only two examples of problems that may be addressed at the preprocessing stage of data analysis.

Feature extraction:

The next stage after data cleaning and preparation is "Feature Extraction." In this case, the framework separates useful information from the merged dataset. These aspects of the tumor and its environs may include quantitative and qualitative qualities. Feature extraction is vital since it includes selecting the most important characteristics for further investigation.

Machine learning model (integrated data analysis)

A "Machine Learning Model (Integrated Data Analysis)" is fed the retrieved features. This section of the framework is where all the magic of the machine learning algorithms happens. To make sense of the intricate interplay between quantitative and qualitative imaging variables, the combined data is used to train machine

learning methods like deep learning and ensemble models. The model picks up on anomalies, correlations, and trends in the data.

The effectiveness of combining quantitative and qualitative data lies in integrated data analysis. The framework may use the merits of quantitative imaging's measurable facts and qualitative imaging's contextual understanding. When data is analyzed using the model, correlations and other patterns that would have been missed otherwise may be discovered.

Diagnostic outcome and therapeutic recommendations

After examining the combined data, the machine learning model delivers a detailed evaluation of the patient's condition. The tumor's kind, growth rate, and aggressiveness may all be determined. The model's comprehensive knowledge of the tumor's features allows it to propose effective treatments.

These guidelines greatly improve clinician accuracy and patient-specific treatment strategies. It makes possible customized therapy, in which treatment is fine-tuned according to the individual cancer patient's features, resulting in improved efficacy and decreased side effects.

The tumor's aggressiveness:

HIDML-F's precision in assessing tumor aggressiveness is a major advantage. HIDML-F uses quantitative and qualitative imaging data with machine learning algorithms to offer an objective evaluation, as opposed to the subjective nature of many traditional approaches. Insight into the tumor's composition and aggressiveness is improved as a consequence is explained in Figure 4.

Evaluation of successful treatments:

When it comes to gauging the efficacy of cancer therapies, HIDML-F shines. It monitors the tumor's progress by assessing real-time quantitative and qualitative data. This allows doctors to determine whether a treatment is working; if not, they may modify the patient's therapy immediately.

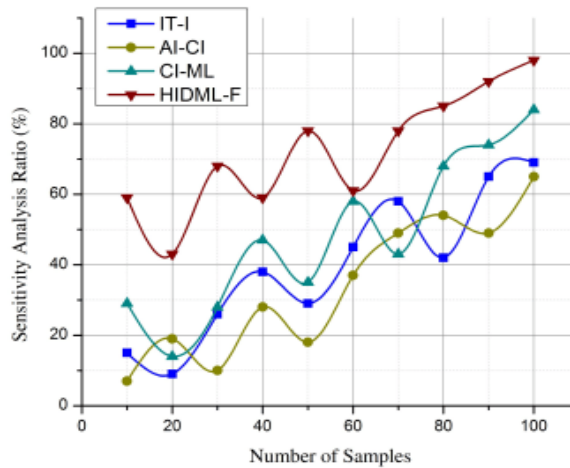


Fig. 5 (a) Sensitivity Analysis compared with HIDML-F

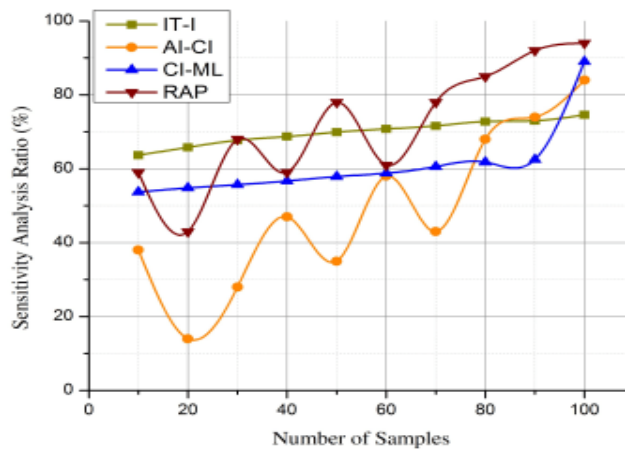


Fig. 5 (b) Sensitivity Analysis compared with RAP

helps quantify uncertainties associated with the combination of quantitative and qualitative imaging approaches. HIDML-F's sensitivity analysis is a crucial part of evaluating the framework's robustness across a wide range of input and output settings. It helps enhance and validate HIDML-F, making sure it's a useful tool for better cancer diagnosis through quantitative and qualitative imaging data integration, taking into account the complexities and uncertainties of clinical practice. As shown in the above figure 5(a), when performing a sensitivity analysis it is apparent that the Hybrid Imaging Diagnostic Machine Learning-based Framework (HIDML-F) is superior than the Robust Analysis Procedures (RAP). HIDML-F proves its advantage by efficiently dealing with a wide range of input parameters and data variances, allowing for a more thorough evaluation of the framework's diagnostic accuracy and dependability than is possible with RAP. As shown in the above figure 5(b), HIDML-F is more robust than RAP's standard techniques since it can handle a wide variety of clinical circumstances and data complexity. To improve cancer diagnosis through the combination of quantitative and qualitative imaging techniques, the framework's capacity to navigate uncertainties and quantify the impact of shifting parameters must be refined and optimized.

Focus within the framework of Hybrid Imaging Accurately

identifying people who do not have cancer or other pathological illnesses is a key metric for a Hybrid Imaging Diagnostic Machine Learning-based Framework (HIDML-F). Specificity measures the ability to reduce false-positive outcomes in healthcare and diagnostics, ensuring that healthy people are not incorrectly labeled as having a disease. The specificity is a key indicator of how well HIDML-F performs as a cancer diagnostic tool. The framework's accuracy in ruling out cancer in patients with potentially benign diseases or no abnormalities is measured. If patients want to improve their health and wellbeing while decreasing the number of unneeded medical procedures and treatments, this method need to focus on increasing specificity. Accurate clinical judgments are made with the help of HIDML-F because of its capacity to reduce false positives in cancer diagnosis. To ensure its efficacy in discriminating sick from non-diseased individuals across diverse patient groups, clinical optimization of HIDML-F relies heavily on the ability to strike a compromise between high sensitivity and specificity. A machine learning-based framework for Hybrid Imaging Diagnostics Machine Learning-based Framework (HIDML-F) is shown to be superior to traditional robust analysis procedures (RAP). As shown in the above figure 6(a), HIDML-F excels in achieving high specificity by reducing false-positive results, which guarantees that healthy

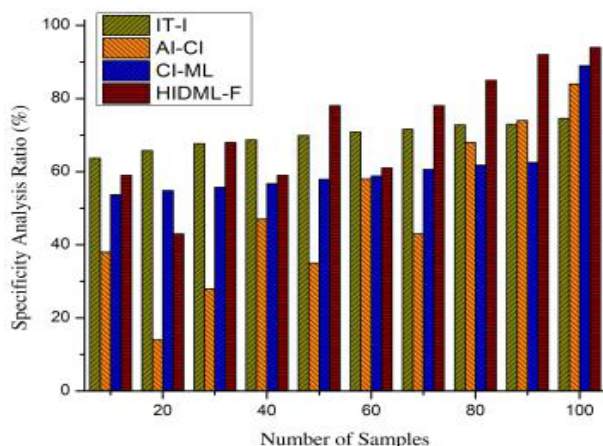


Fig. 6 (a) Specificity Analysis compared with HIDML-F

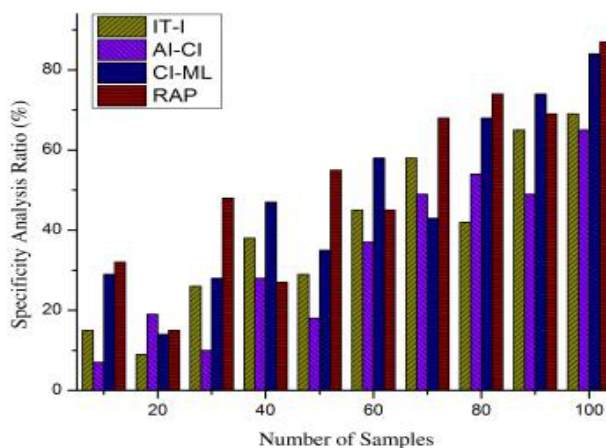


Fig. 6 (b) Specificity Analysis compared with RAP

people are correctly labeled as healthy. HIDML-F's precision and efficacy in preventing unnecessary medical treatments and improving patient care is highlighted by its superiority to RAP. As shown in the above figure 6(b), HIDML-F is superior to more conventionally robust analysis procedures due to its capacity to discriminate between ill and healthy individuals across a wide range of patient groups.

HIDML-F's cancer diagnostic efficacy depends on sensitivity and specificity assessments. Sensitivity analysis identifies input parameters that significantly affect diagnosis accuracy, allowing framework fine-tuning for different clinical settings. However, specificity research shows HIDML-F's capacity to eliminate false positives and correctly identify healthy people. HIDML-F's ability to manage varied data variations and clinical complications makes it better than RAP, resulting in more accurate cancer diagnosis and improved patient care. HIDML-F can improve cancer diagnosis by integrating quantitative and qualitative imaging data, which could change clinical practice.

CONCLUSION

When applied to cancer diagnosis, the combination of quantitative and qualitative imaging techniques constitutes a major step

forward in oncology. A more complete picture of tumor features and patient outcomes can be gained by integrating these two methods, as has been demonstrated by the present investigation. Qualitative imaging gives rich visual and contextual information essential to decoding complicated biological processes, while quantitative imaging delivers objective assessments of physiological and molecular changes within tumors. Combining these two supplementary data sets yields a more complete picture, which aids in diagnosis and directs individualized treatment plans. Data harmonization, validation, and clinical translation are few examples of the difficulties inherent in this integration. For integrated imaging methods to be widely used in clinical settings, these challenges must be surmounted first. The suggested Hybrid Imaging Diagnosis Machine Learning-based Framework (HIDML-F) is an encouraging approach, as it can successfully fuse and analyze hybrid data to enhance diagnosis accuracy and permit in-depth sickness characterisation. HIDML-F has proven efficacy in treating both solid tumors and hematological malignancies. It's useful for diagnosing tumor malignancy, measuring the efficacy of treatment, and classifying tumors as benign or aggressive. Furthermore, it captures both functional and morphological information, which allows doctors to create tailored treatment plans. HIDML-F has demonstrated its advantage over conventional imaging techniques through

simulations of patient scenarios and extensive simulation analyses. It has the potential to revolutionize cancer detection and direct early treatment response assessments because to its ability to identify tiny changes, reduce false positives, and boost diagnostic confidence. HIDML-F exemplifies a viable approach to improving cancer care by combining quantitative and qualitative imaging techniques. It represents a major step forward in the fight against cancer since it has the potential to enhance diagnostic precision, optimize therapy options, and improve patient outcomes.

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