



## BCDNet: Using Mammogram Images to Detect Breast Cancer with an Improved Convolutional Neural Network

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### Abstract:

Abstract: Among the world's leading causes of death for women is breast cancer. Significant progress has been made in the diagnosis of breast cancer since the advent of artificial intelligence (AI). In order to cure breast cancer and make informed treatment decisions, early identification is essential. Deep learning (DL) techniques are frequently utilized in computer vision, but they have also been applied in a number of other sectors, including medicine. A well-liked paradigm for medical image analysis but its performance may not be optimal for a specific imaging modality without empirical study. This paper introduces an enhanced CNN model called Breast Cancer Detection Network (BCDNet), designed to be more efficient with breast mammogram images. We also propose an algorithm called Learning-Based Cancer Screening (LBSC) that leverages the BCDNet model. An empirical study using the CBID-DDSM benchmark dataset demonstrates that BCDNet attains the best level of accuracy of 97.68%, outperforming many of the deep learning models in use today. Medical facilities can use this proposed model as part of a CDSS for breast cancer screening.

## 1. Introduction

Lung cancer was the top cause of death for males and the third most common cause of death for women, per a 2018 database created by the International Agency for Research on Cancer (IARC) Global Cancer Observatory. The database contained data on 185 different countries' incidence and mortality rates for 36 distinct cancer forms.

There were about 9.6 million cancer-related fatalities recorded in 2018; of these, around 1.8 million deaths, or 18.4% of all deaths, were attributable to lung cancer [1]. Due to the extremely high incidence of lung cancer and the concerning rise in mortality from the disease in the natural world, early detection techniques, different cancer control studies, and research have been implemented to reduce mortality. Curing lung cancer usually requires early illness identification, and lower lung cancer incidence rates are the consequence of good diagnosis techniques. Currently, there are seven methods available for

treating lung cancer: computed tomography (CT) scans, magnetic resonance imaging (MRI), positron emission tomography (PET), breath analysis, and cytology sputum [2]. Every lung cancer screening method now in use has a particular threshold for detection and a range of indicators. Additionally, these methods have certain disadvantages. In contrast to MRI and PET, which are less successful in identifying and staging lung cancer, CT, Septum, and CXR are radiation-prone. Serum testing is also an intrusive method whose sensitivity and specificity are insufficient for early detection, which makes the results unacceptable. However, sputum has the ability to identify lung cancer early on because gene promoter methylation but further research was necessary. Furthermore, compared to CXR, which has a large proportion of false negative readings and poor sensitivity, More research samples were needed even though the VOC in urine demonstrated good sensitivity and specificity. The most efficient way to find lung cancer these days is by computed

tomography (CT) imaging, which gives exact details on the nodular sizes and places. The low-dose CT examination enabled early cancer identification of the tumors. It resulted in a 20.0% decrease in mortality as well as a notable rise in the number of positive screening test results in contrast to conventional radiography techniques. Histopathological samples and genome sequencing types are widely used in lung cancer research. Many contributions are found in the literature focusing on deep learning models for automatically detecting lung cancer. The literature has noted that the CNN model is widely used and efficient for medical image analysis. However, since one size does not fit all, it cannot provide optimal performance with all imaging modalities and problems. Therefore, enhancing the CNN model to achieve optimal performance in detecting breast cancer using mammogram images is important.

In our paper, we present two main contributions. Firstly, we introduce a refined CNN model called the Breast Cancer Detection Network (BCDNet), specifically designed to analyze breast mammogram images efficiently. We propose an algorithm called Learning-Based Cancer Screening (LBCS), which utilizes the BCDNet model. Our empirical study, conducted using the CBID-DDSM benchmark dataset, demonstrates that BCDNet outperforms many existing deep learning models, attaining a remarkable 97.68% accuracy rate. This model may be used as part of a Clinical Decision Support System (CDSS) for breast cancer screening at medical institutions. This is how the remainder of the paper is structured: In Section 2, prior research on deep learning models for breast cancer detection is reviewed. In Section 3, an outline of deep learning, specifically the CNN model. Section 4 introduces the methodology for automatically detecting breast cancer to improve the state of the art at the moment. Experiments and our empirical study are presented in Section 5. Our work is summarized in Section 6 along with recommendations for further investigation.

## 2. Related work

Using mammography pictures as an imaging modality, numerous researchers helped to automatically diagnose breast cancer. [1] Abdelrahman et al.

examined CNN uses in mammography, outlining future research prospects and talking about tasks, datasets, and practical implementations. Sereshkeh et al. [2] looked at predicting tumor stage and lymph node involvement in patients with breast cancer by using deep characteristics from mammography. Islam et al. [3] exceeded previous

models in the identification of breast cancer by introducing an Ensemble Deep Convolutional Neural Network (EDCNN) model. Singh et al. [4] for the effective identification of suspicious mass in digital mammograms, pixel-based pre-processing and Faster R-CNN are used in an efficient hybrid technique. Karthiga et al. [5] increased by early identification of breast cancer. This is aided by mammography facilitated by AI. Models of hybrid deep neural networks function well.

Koshy et al. [6] identified breast cancer is essential. Diagnoses are aided by the effective classification of histological pictures using LMHistNet, a deep neural network. Anas et al. [7] improved by recent AI developments, most notably deep learning. Accuracy is increased by decreasing False Positive and Negative Rates using the YOLOv5 and Mask R-CNN models. Wen et al. [8] used a variety of imaging techniques, AI-enabled computer-aided diagnosis of breast cancer is beneficial for early detection, which is critical for survival. Techniques from deep learning and machine learning are compared. Shah et al. [9] for breast cancer to be effectively treated, early diagnosis is essential. Mammography is important, however the trustworthiness of synthetic pictures has to be increased. Tan et al. [10] improved the identification of tiny masses, RCM-YOLO, a novel breast mass detection network, lowers the number of missed and incorrect diagnoses.

Torabi et al. [11] used adversarial and self-supervised learning strategies to address breast cancer detection problems, greatly increasing accuracy and flexibility. Sani et al. [12] presented a unique CNN framework that improves the efficiency and accuracy of breast cancer classification by leveraging group theory and DCT. Loizidou et al. [13] highlighted CAD systems and potential areas for future development while focusing on the application of mammography in the diagnosis of breast cancer. Asadi et al. [14] for breast abnormalities to be effectively treated, early diagnosis is essential. High diagnostic accuracy is attained via a cascade network model that combines segmentation and classification. Atrey et al. [15] improved the accuracy of breast cancer diagnosis, a hybrid deep learning bimodal CAD algorithm integrates ultrasound and mammography images. The proposed model performs significantly better with an accuracy of unimodal systems and presents opportunities for future research and clinical advantages.

Gami et al. [16] widespread malignancy that kills a lot of people worldwide. Early identification and therapy are facilitated by computer-aided detection methods that use deep learning to diagnose malignant cells with high accuracy. Frank [17] for

breast mass localization on mammograms, an integrated deep learning system integrates CNN and YOLO v5 object identification, facilitating effective physician evaluation. Saran et al. [18] predicted by breast density. Density classification accuracy for screening is improved using a deep learning classifier that uses transfer learning. Mohapatra et al. [19] compared to traditional CAD systems is deep learning-based breast cancer diagnosis. We test a variety of CNN architectures, proving that transfer learning is effective: AlexNet, VGG16, and ResNet50. Mechria et al. [20] investigates the relationship between a Deep Convolutional Neural Network's (DCNN) breast cancer detection ability and the quality of the mammography pictures. When compared to Wiener and median filters, denoising using DCNN dramatically increases classification accuracy, specificity, and sensitivity.

Petrini et al. [21] highlighted how well deep convolutional neural networks function for diagnosing breast cancer from mammograms. Three transfer learnings are employed in a unique way to build a high-performance CAD system that significantly outperforms single-view classifiers. The model and code for this method are publicly available. Aljuaid et al. [22] classified breast cancer accurately using deep neural networks and transfer learning on the BreakHis dataset. The most successful model is ResNet. Increasing accuracy and expanding the dataset are among the next plans. Omonigho et al. [23] increased the tumor detection accuracy of the system. Outperforming conventional techniques, modified AlexNet DCNN classifies mammography pictures into benign and malignant cancers with huge accuracy. Agnes et al. [24] increased by early detection of breast cancer. With 96% sensitivity and 0.99 AUC, the mammogram-specific MA-CNN was designed to effectively classify pictures and support diagnosis. Shakeel and Raja [25] used a tailored DCNN architecture, a revolutionary CAD approach achieves an accuracy in classifying breast cancer as malignant or benign.

Yurttakal et al. [26] important to diagnose breast cancer early. Early detection is aided by mammography; however, MRI provides better soft tissue imaging. High accuracy is attained with a CNN-based method, which helps with diagnosis. Chouhan et al. [27] saved by early identification of breast cancer. A DFeBCD system with a variety of features—including dynamic ones—performs better than one with only one feature. Ekici et al. [28] approached detecting breast cancer is thermography, which is non-invasive. It may even outperform mammography in terms of price and convenience of use for screening. Hassan et al. [29]

presented a deep convolutional neural network-based classification model for breast cancer masses that has excellent accuracy rates. Nagpure et al. [30] with 1 in 28 Indian women at risk, breast cancer poses a serious threat to them. Early detection with neural networks and data mining helps with prompt therapy.

Djebbar et al. [31] updated CAD method that makes use of YOLOv3 aids in the identification and categorization of mammography masses, offering practical and reliable outcomes. Kavitha et al. [32] used a variety of methods, the OMLTS-DLCN model diagnoses breast cancer with good accuracy on benchmark datasets. Patil et al. [33] suggested using deep learning, tumor segmentation, and image pre-processing to create a hybrid classifier for mammography-based breast cancer diagnosis. Shu et al. [34] suggested to use unique pooling structures for lesion identification in a deep learning-based mammography classification technique that produced competitive results. Salama et al. [35] identified breast cancer with high accuracy and efficiency, a novel framework makes use of many deep learning models.

Sun et al. [36] for the categorization of mammogram images, a unique approach combines multi-view CNNs with modified loss functions and outperforms state-of-the-art techniques. Isaza et al. [37] compared to current methods, great accuracy was obtained in the segmentation and classification of breast lesions using DL structures. Songsaeng et al. [38] with high accuracy and high AUROC, multi-scale designs improve the ability of radiologists to identify breast calcification in mammography. Khan et al. [39] for a better prognosis, breast cancer identification must occur early. Accurate categorization is improved by the multi-view CADx system, which uses four mammography scans. Meenalochini and Kumar [40] assisted in the early diagnosis of breast cancer, mammography lowers death rates. This study examines feature extraction, segmentation, and pre-processing methods in machine learning for categorization. It has been noted in the literature that the CNN model is widely used and efficient for medical image analysis. However, since one size does not fit all, it cannot provide optimal performance with all imaging modalities and problems. Therefore, it is important to enhance the CNN model to achieve optimal performance in detecting breast cancer using mammogram images.

An example of an artificial neural network is frequently used for processing and classifying images is the convolution neural network, which is specifically made to handle pixel data. CNN's architecture has the advantage of reducing the image in a way that preserves its features and

makes it easier to analyze because it consists of multiple layers that are absent from the standard neural network [9]. Artificial neurons comprise these layers. In the different layers that are available, neurons are in charge of extracting features. Pixel patches of a picture are fed to the neurons when it is designated as a CNN model participation; the neurons then identify features in the image. The first layer identifies the image's fundamental characteristics, like size and orientation. As the layer number rises, more advanced features are taken from the output that has been acquired and sent to a higher layer. The CNN architecture is depicted in the figures in ref [10]. The convolution layer performs convolution, This is the mathematical process of creating a new signal by combining two signals. A kernel is applied to each pixel in the image during image processing, producing a single-dimensional value for that specific field of reception. Researchers can then use the reduced image to extract features.

In terms of the pooling layer, it carries out actions to reduce the input/extracted feature array's dimensions, which lowers the computational cost [11]. There are two varieties of it: maximum pooling and average pooling. A kernel is applied to the input, much like in convolution, and a single value is extracted for that specific input portion. The value will be obtained based on the type of pooling. By inserting the kernel one at a time into each segment, max pooling yields the single value output for the highest value in the area where the input and kernel overlap. This process is repeated for all the input segments. The overlapped input and kernel portion values will be averaged for average pooling.

Additionally, the input noise is reduced by the pooling layer. The classification's ultimate output will come from the final completely connected layer, which gives the probability value indicating the number of connected neurons in the hidden layers. Non-linear inputs are easily classified by this fully connected layer. Before the fully linked layer receives its input, the flatten layer immediately before it flattens it into a one-dimensional array. Iterations spanning multiple epochs for training purposes. Updating the weight and bias on a regular basis guarantees ideal model tuning. Different activation functions that take weight and bias as inputs and produce an output are available.

### 3. Materials and Procedures

The suggested deep learning framework for breast cancer automatic detection is presented in this part. It includes the description of the improved CNN

model, the architecture of the suggested framework, the problem specification, dataset details, the algorithm, and the evaluation methodology.

#### 3.1 Problem Definition

Provided a breast cancer mammography image of a person, developing The difficult problem under consideration is the use of a deep learning-based system for the efficient and automated diagnosis of breast cancer probability.

#### 3.2 Our Framework

We have created an efficient system for detecting breast cancer from mammography images using deep learning. Our empirical investigation made use of The CBIS-DDSM dataset is commonly utilized in research on the diagnosis of breast cancer. The framework allows the system to learn during training and then detect breast cancer in testing. We preprocessed the given dataset to increase test sample diversity and raise the standard of the training procedure. The data was divided into test and training sets following preprocessing. 80% of the samples in this study were allocated to the training set, and 20% to the testing set. BCDNet, the suggested improved CNN model, is trained utilizing labeled data from training examples in order to acquire expertise. Following training, the model is saved or persisted in secondary storage. This is done to ensure that the system can continue functioning and screen new patients for breast cancer diagnosis using the trained model. The saved model is reused in the system when needed. When new training samples are received, the system retrain Transfer learning is being used by the model to enhance its performance. The saved model is loaded when required to test whether a mammography sample shows any probability of breast cancer. This process is known as testing. The model is evaluated using a specified methodology, which provides performance metrics reflecting how well the model was trained and used in the suggested structure. Figure 1 shows the overall suggested framework.

#### 3.3 Proposed Enhanced CNN Model

The augmented CNN model that has been proposed, as presented in Figure 2, is known as a Breast Cancer Detection Network (BCDNet). It is implemented using TensorFlow's Keras API to detect breast cancer efficiently. The model begins with'same' padding, a 3x3 kernel, 32 filters, and a ReLU activation function in the convolutional

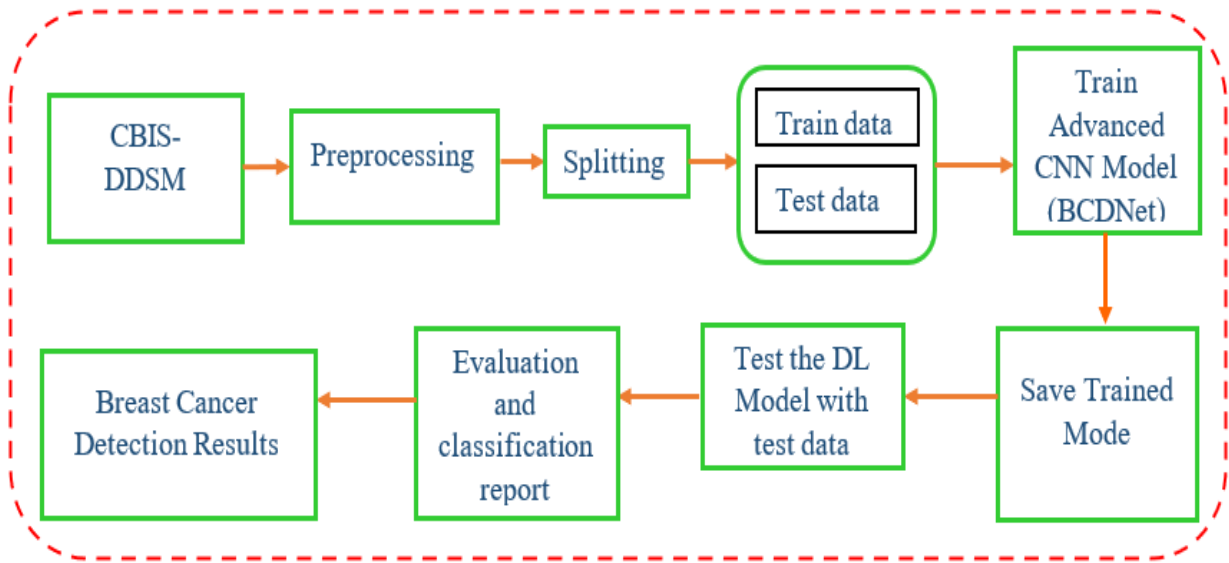


Figure 1. Deep learning framework for automatic breast cancer diagnosis

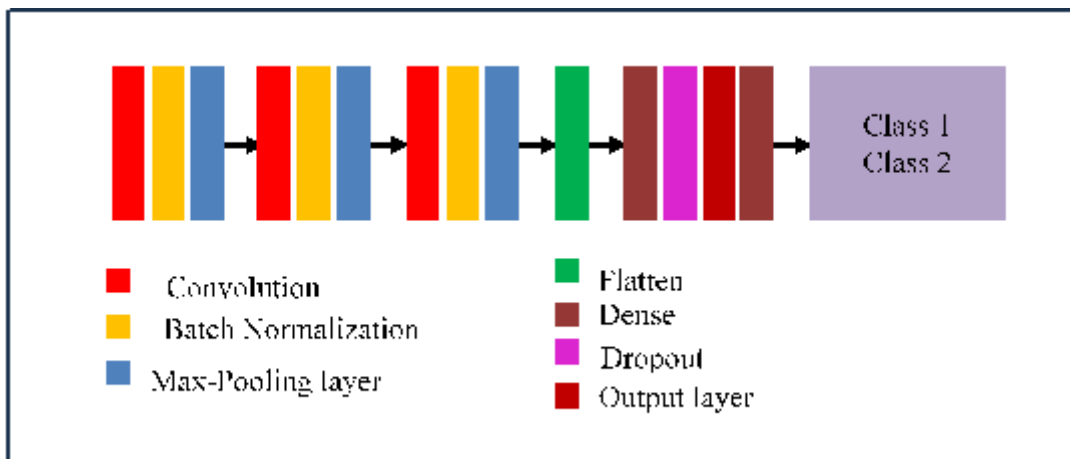


Figure 2. Architecture of the proposed enhanced CNN model known as BCDNet

layer. A max-pooling layer with a default stride and a 2x2 pool size comes next, followed by a batch normalization layer. Subsequently, Using the corresponding batch normalization and max-pooling layers,'same' padding, ReLU activation, and two more 64- and 128-filter convolutional layers are added. The final convolutional layer uses ReLU activation, 128 filters, and "same" padding. Next, a 3x3 pool size and stride of two are used for batch normalization and max-pooling. The model then flattens the output before moving on to a fully linked layer that has 128 units, a dropout layer with a rate of 0.3, and ReLU activation. The last output layer of the model uses the softmax activation function, which has two units for binary

classification. In essence, the enhanced CNN model is constructed in a step-by-step fashion, starting with convolutional max-pooling to reduce the spatial dimensions of the convolved features after layers to extract features from the input image data and batch normalization to increase training speed and stability. The model then flattens the output and transitions to fully connected layers for classification, incorporating dropout to prevent overfitting. Figure 3 shows layers and configuration details of the BCDNet. The output layer's use of softmax activation suggests that the model is intended for binary classification tasks, in which it determines the chance that an input belongs to each class and chooses the one with the highest

Layer	Convolution	Max pooling
First layer	filters=32	pool_size=(2,2)
	kernel_size=(3,3)	strides=(2)
	padding="same"	
	activation=ReLU	
Second layer	filters=64	pool_size=(3,3)
	kernel_size=(3,3)	strides=2
	padding="same"	
	activation="ReLU"	
Third layer	filters=128	pool_size=(3,3)
	kernel_size=(3,3)	strides=2
	padding="same"	
	activation="ReLU"	
Forth layer	filters=128	pool_size=(3,3)
	kernel_size=(3,3)	strides=2
	padding="same"	
	activation="ReLU"	
<b>Parameter</b>	<b>Value</b>	
Batch size	25	
learning rate	75	
optimizer	adam	
no of epochs	25	
total parameters	3,08,162	
trainable parameters	3,07,458	
non-trainable parameters	704	

**Figure 3.** Layers and configuration details of the BCDNet

likelihood. Overall, this construction demonstrates a comprehensive approach to building an convolutional, batch normalization, An enhanced convolutional neural network (CNN) for breast cancer diagnosis must have max-pooling, fully connected layers, appropriate activation functions, and dropout regularization to boost the model's performance and generalization skills . This systematic configuration aligns with best practices in CNN design and showcases a foundational implementation for deep learning problems related to breast cancer detection.

### 3.4 The proposed algorithm

We propose an algorithm called Learning-Based Cancer Screening (LBSCS) that utilizes the BCDNet model based on an empirical study using the CBID-DDSM benchmark dataset. Using the CBIS-DDSM dataset, our system, LbBCD, seeks to identify breast cancer. The process begins with data modeling, where the dataset D undergoes a preprocessing step to derive D'. The algorithm then involves data preparation, model building, and training. The BCDNet model is configured as depicted in Figure 2, compiled,

**Algorithm:** Learning-based Breast Cancer Detection (LbBCD)  
**Input:** CBIS-DDSM dataset D  
**Output:** Breast cancer detection results R, performance statistics P

1. Begin
2. **Data Modelling**  
 $D' \leftarrow \text{DataPreProcess}(D)$
3.  $(T1, T2) \leftarrow \text{DataPreparation}(D')$   
**Model Building and Training**
4. Configure BCDNet model m as in Figure 2
5. Compile m
6.  $m' \leftarrow \text{TrainBCDNet}(T1)$
7. Persist m'
8. Load m'
9. **Breast Cancer Detection**  
 $R \leftarrow \text{CancerDetection}(T2, m')$
10. **Performance Evaluation**  
Generate confusion matrix
11.  $P \leftarrow \text{Evaluate}(R, \text{ground truth})$   
**Display Output**
12. Print R
13. Print P
14. End

**Algorithm 1:** Learning-based Breast Cancer Detection (LbBCD)

and then trained using the preprocessed data D'. The trained model m' is persisted and loaded for the breast cancer detection phase. During this phase, the algorithm detects breast cancer using the prepared data T2 and the loaded model m', resulting in the output R. The performance evaluation entails generating a confusion matrix and evaluating the results R with the ground truth to obtain performance statistics P. The final step involves displaying the output by printing the results R and performance statistics P. Among the crucial processes of the LbBCD technique are data preprocessing, model construction, and training, breast cancer detection, and performance evaluation. The algorithm aims to effectively process the CBIS-DDSM dataset to detect breast cancer and provide performance statistics. This structured approach ensures the systematic utilization of the dataset and the trained model to achieve accurate and reliable breast cancer detection results.

Overall, this algorithm highlights the significance of data processing while offering a thorough framework for breast cancer identification, model training, and performance evaluation. By following a systematic flow, from data preparation to result display, the LbBCD algorithm aims to advance breast cancer detection using machine learning techniques, potentially offering valuable insights for medical professionals and researchers.

### 3.5 Dataset Details

One popular benchmark is the DDSM Curated Breast Imaging Subset (CBIS-DDSM) dataset. for mammography screening. It contains 2620 mammography samples, including Information about normal, benign, and malignant instances as well as related pathologies. This dataset is essential for supervised learning processes, providing ground truth. The images in the dataset have Breast cancer diagnosis after being decompressed and converted to DICOM format requires feature-enhanced ROI segmentation and bounding boxes.

### 3.6 Evaluation Methodology

Since we used a learning-based approach, metrics are utilized to assess our methods and are obtained from the confusion matrix, as illustrated in Figure 4.

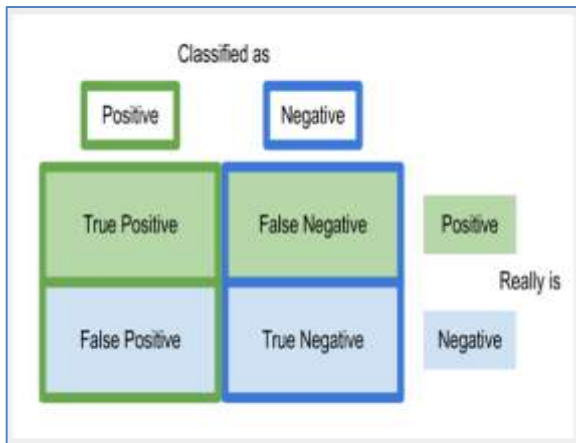


Figure 4. Confusion matrix

Our method's predicted labels are compared using ground truth to calculate performance statistics based on the confusion matrix. The measures utilized in the performance evaluation are expressed by Equations 1 through 4.

$$\text{Precision (p)} = \text{TP}/(\text{TP}+\text{FP}) \quad (1)$$

$$\text{Recall (r)} = \text{TP}/(\text{TP}+\text{FN}) \quad (2)$$

$$\text{F1-score} = 2*((p*r))/((p+r)) \quad (3)$$

$$\text{Accuracy} = (\text{TP}+\text{TN})/(\text{TP}+\text{TN}+\text{FP}+\text{FN}) \quad (4)$$

A value between 0 and 1 is the outcome of the performance evaluation metrics. Machine learning research makes extensive use of these metrics.

## 4. Experimental results

This section displays the experimental findings of our empirical investigation, which was conducted using a prototype application designed to automatically detect breast cancer from

mammography images. A number of cutting-edge tip learning models, such as baseline CNN, LeNet, and UNet, are compared to the suggested deep learning model, BCD net, in order to assess its performance. The observations include exploratory data analysis which analyses the data distribution dynamics and results of breast cancer screening. Experiments are done with a benchmark data set known as CBIS-DDSM, which contains breast mammography images. As presented in Figure 5, the cropped version of the breast mammogram image is provided as part of exploratory data analysis. As presented in Figure 6, the full breast mammogram image is provided. The full mammogram image is the one which is not cropped. As presented in Figure 7, it is observed that an ROI mask is provided associated with a breast mammogram image useful as ground truth to validate the performance of breast cancer prediction. As presented in Figure 8, it is observed that the total number of patients available in the dataset is divided into two categories: healthy and breast cancer-affected. As presented in Figure 9, the data set contains three kinds of images: cropped, full mammogram, and ROI mask images. It shows the distribution of the three kinds of data in the given dataset.

As presented in Figure 10, the total number of breast mammography samples in the data set, along with the left breast count and right breast count, are visualized. As presented in Figure 11, the data set contains two kinds of abnormalities: calcification and mass abnormalities. The data distribution of these two abnormalities is visualized. As shown in Figure 12, the data distribution dynamics of left and right breast mammography images related to

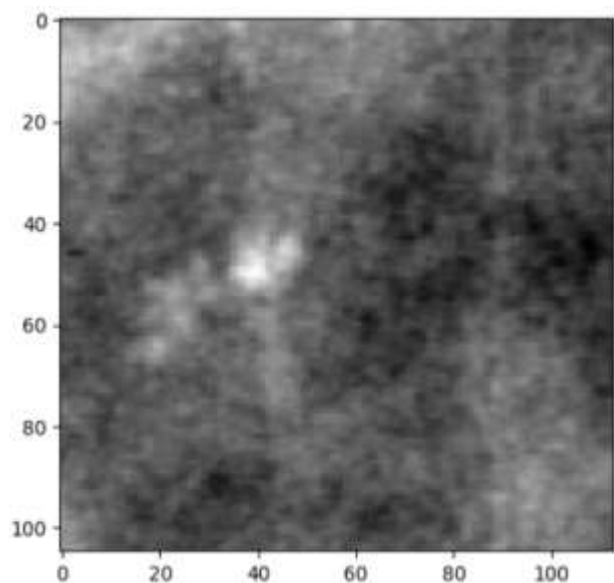


Figure 5. Cropped mammogram image

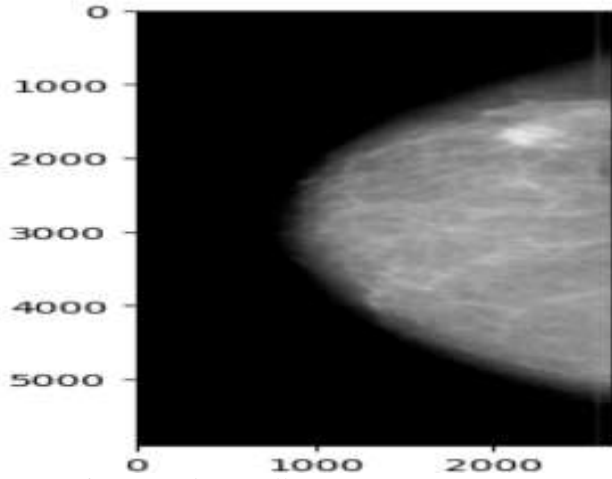


Figure 6. Shows full mammogram image

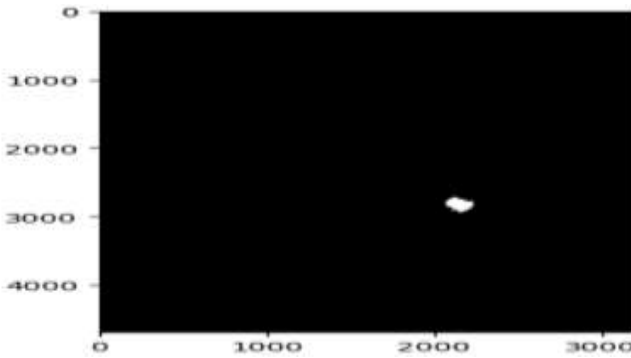


Figure 7. ROI mask of a breast mammogram image

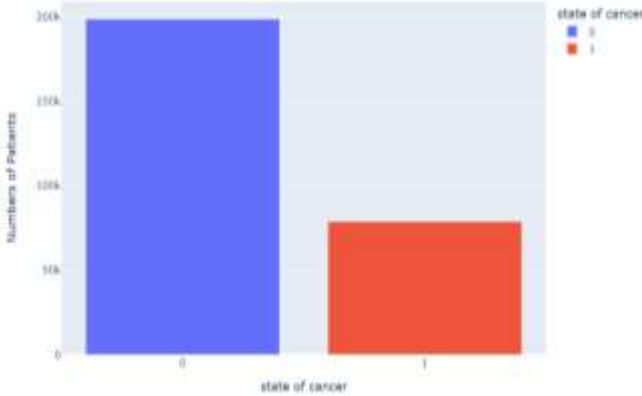


Figure 8. The data distribution dynamics in the data set

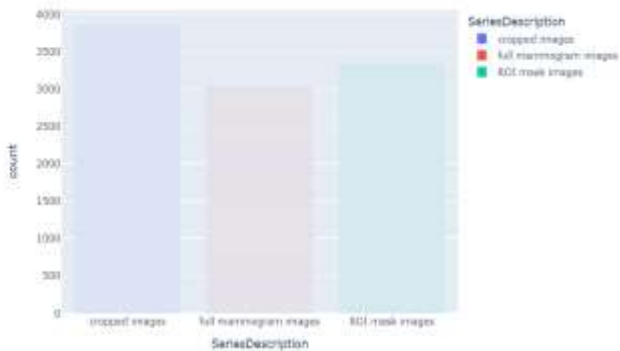


Figure 9. The dataset distribution dynamics consisting of crop images, full mammogram images, and ROI mask images

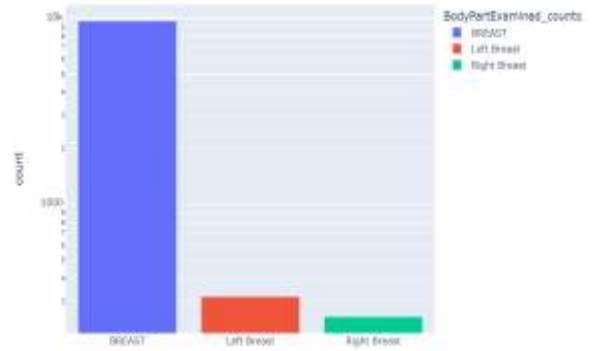


Figure 10. Mammography data dynamics

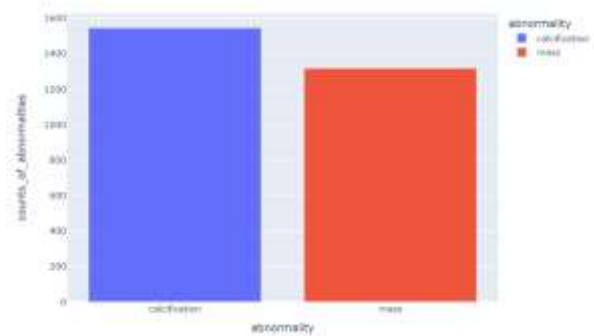


Figure 11. Data distribution dynamics in terms of calcification of abnormality and mass abnormality

calcification abnormality are visualized. As present Figure 13, an excerpt from different types of calcification samples is provided, reflecting both affected and healthy samples. As presented in Figure 14, it is observed that the ground truth values are contrasted with the predictions of the suggested model in order to assess the model's performance. As presented in Figure 15, the results of breast cancer probability are provided for the given test sample. It shows a breast cancer probability of 1.0, reflecting the highest probability of breast cancer. The accuracy of the suggested model is plotted versus the number of epochs in terms of both training and test accuracy, as shown in Figure 16. The findings indicate that the accuracy of the model is influenced by the number of epochs.

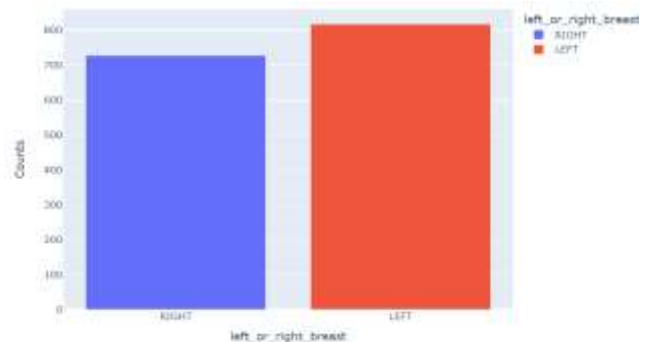


Figure 12. Data distribution in terms of left or right breast linked to calcification abnormality



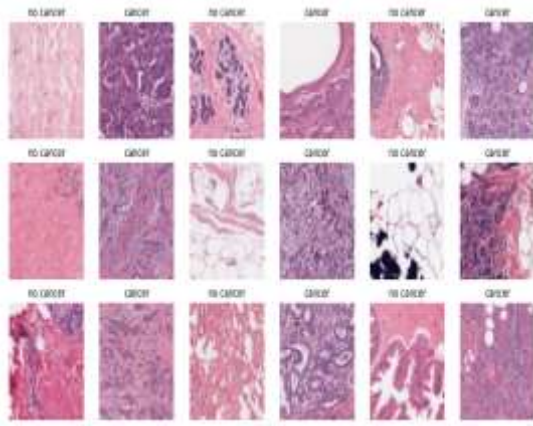


Figure 13. Cancer and healthy samples associated with different types of calcification

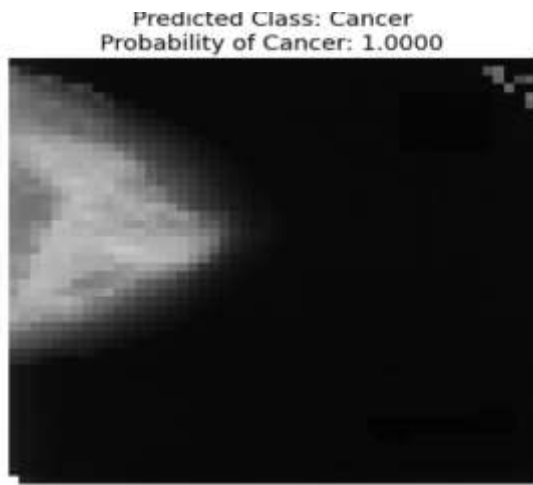


Figure 14. The results of the probability of breast cancer

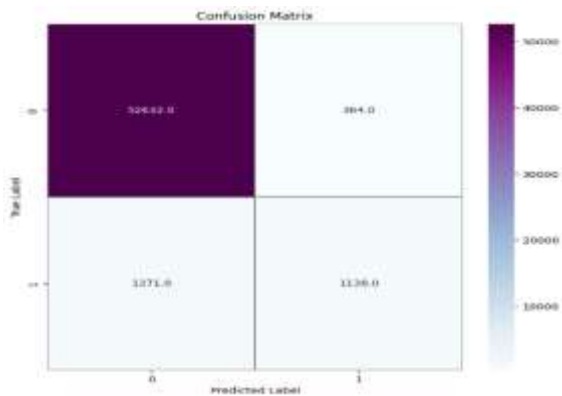


Figure 15. Results of experiments in terms of confusion matrix

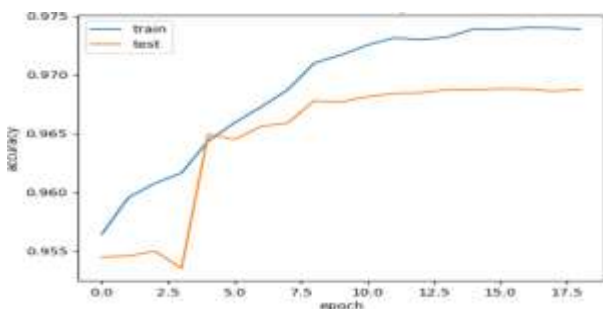


Figure 16. Results of experiments on the accuracy of training and testing

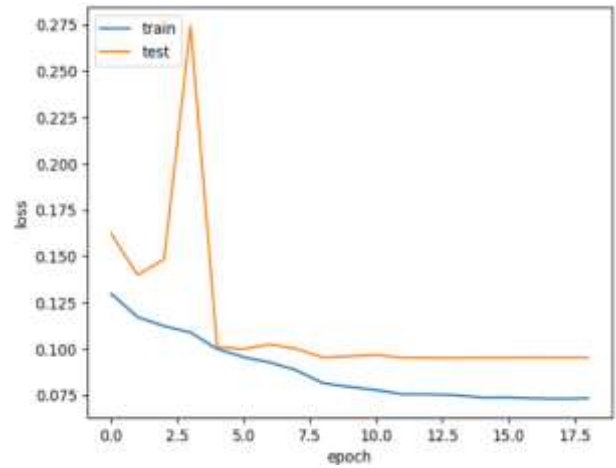


Figure 17. Results of experiments on training and testing loss

In other words, the model accuracy progressively rises until convergence as the number of epochs grows. Figure 17 illustrates the loss of the proposed model in terms of both training and test loss as a function of epochs. Results show that the model's loss depends on the number of epochs. Put another way, the model loss progressively drops until convergence as the number of epochs rises.

### 5. Discussion

Breast cancer research with the help of artificial intelligence is a significant area due to its learning-based approach, which could increment knowledge from time to time.

Artificial intelligence-enabled approaches for medical image analysis are becoming very popular. AI-enabled approaches are widely used to solve problems in the healthcare domain. With respect to breast cancer screening, there are many imaging modalities available. In this research, we used breast mammograms as an imaging modality.

The rationale behind this is that mammogram images are found to be more suitable for breast cancer screening. We proposed a deep learning framework that has mechanisms to exploit training samples and perform automatic breast cancer detection. The supervised learning approach that the framework is built on is intended to automatically detect breast cancer.

Based on the CNN model, a deep learning model is suggested for effectively identifying breast cancer in the breast mammography pictures. The suggested deep learning model was tested using evaluated and found to detect breast cancer more accurately. Our empirical evolution revealed that a large number of cutting-edge deep learning models are outperformed by the suggested model; however, the

proposed methodology has certain limitations, as discussed in Section 5.1.

### 5.1 Limitations

The proposed research presented in this paper has certain limitations. The breast mammogram images available in the dataset are limited in number. Without sufficient diversity of training samples, it is difficult to generalize the findings of breast cancer detection. Another important limitation found in this research is that the proposed framework relies on enhanced CNN model without considering other options like hybridization of deep learning models and creating a collection of several deep learning models towards leveraging performance and detection process.

### 6. Conclusion and future work

This research presents an improved CNN model known as Breast Cancer Detection Network (BCDNet), specifically designed for improved efficiency in analyzing breast mammogram images. BCDNet model can perform feature extraction, feature optimization, and breast cancer detection. It is based on the supervised learning process in which experts train samples to gain knowledge and use the same for automatic breast cancer detection. In the empirical study, mammogram images are used as they are better than many other imaging modalities. Additionally, we introduce an algorithm, Learning-Based Cancer Screening (LBCS), which utilizes the BCDNet model. An empirical study using the CBID-DDSM benchmark dataset demonstrated that BCDNet outperforms many existing deep learning models and achieves the highest accuracy of 97.68%. As part of a CDSS, healthcare facilities can utilize this model to test for breast cancer. We plan to enhance our breast cancer detection methodology in our future work by utilizing hybrid deep-learning models. Another area for future work involves creating an ensemble deep-learning model to improve detection performance further. Convolutional neural networks is an important tool and used in many different application [41-54].

#### Author Statements:

- **Ethical approval:** The conducted research is not related to either human or animal use.
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