

# Accurate Brain Tumor Localization using the Fusion of Deep Learning and Morphological Image Processing in MRI

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**Abstract--** Accurate localization of brain tumors in magnetic resonance imaging (MRI) is essential for early diagnosis, treatment planning, and clinical decision-making. Manual analysis of MRI scans is time-consuming and prone to inter-observer variability, creating the need for automated and reliable techniques. Although deep learning methods, particularly convolutional neural networks (CNNs), have demonstrated strong performance in medical image analysis, precise tumor boundary delineation remains challenging due to intensity variations and image noise. To address these limitations, this paper proposes a hybrid framework that integrates CNN-based feature extraction with morphological image processing for refined tumor localization. The CNN generates an initial tumor segmentation map, while morphological operations such as erosion, dilation, opening, and closing enhance boundary precision, remove noise, and fill internal gaps. Experimental results demonstrate that the proposed hybrid approach outperforms conventional CNN-only and traditional image processing methods, achieving higher accuracy, sensitivity, and Dice similarity coefficient. These results confirm that combining deep learning with morphological refinement significantly improves tumor localization robustness and precision.

**Keywords**—Brain Tumor Localization, CNN, Deep Learning, Medical Image Analysis, Morphological Image Processing, MRI

## I. INTRODUCTION

Brain tumors are among the most life-threatening neurological disorders, requiring early detection and precise localization for effective treatment. Magnetic resonance imaging (MRI) is widely used for brain tumor diagnosis due to its superior soft-tissue contrast and non-invasive nature. However, manual interpretation of MRI scans is labor-intensive and prone to variability, particularly because of tumor heterogeneity, overlapping intensity distributions, and anatomical differences among patients.

Recent advances in deep learning, especially convolutional neural networks (CNNs), have demonstrated strong potential for automated brain tumor detection and segmentation. CNNs can learn hierarchical feature representations from MRI images, enabling efficient tumor localization.

Nevertheless, deep learning methods alone may produce imprecise boundaries or false positives when analyzing noisy or low-contrast images.

Morphological image processing techniques—such as erosion, dilation, opening, and closing—are effective in refining object shapes, removing small artifacts, and enhancing boundary consistency. However, they cannot detect tumors without high-level feature extraction.

This study proposes a **hybrid framework** that combines the feature-learning capability of CNNs with the boundary-refining strengths of morphological operations to achieve accurate and robust brain tumor localization in MRI images. The key contributions of this work are:

- *Hybrid framework*: Integration of CNN-based segmentation with morphological refinement for improved tumor localization.
- *Enhanced accuracy*: Systematic application of morphological operations to refine boundaries and reduce falsepositives.
- *Comprehensive evaluation*: Extensive experiments demonstrate superior accuracy, sensitivity, and Dice similarity coefficient compared to traditional and CNN-only approaches.
- *Ablation study*: Quantitative assessment of each morphological operation's contribution to localization performance.

## II. RELATED WORK

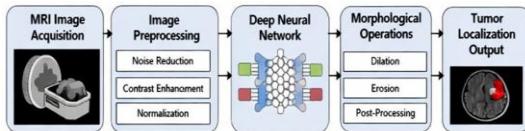
Traditional brain tumor segmentation relied on thresholding, region growing, and edge detection, which are sensitive to noise and intensity variations. CNN-based architectures such as U-Net, VGGNet, and ResNet have achieved high accuracy in MRI segmentation. However, precise boundary delineation remains challenging, especially in noisy or heterogeneous images.

Morphological operations—erosion, dilation, opening, and closing—effectively refine segmentation results but cannot detect tumors without learned features. Hybrid approaches combining deep learning with morphological refinement have shown promise, yet systematic integration remains limited.

**Research Gap:** CNN-only methods may misclassify boundary pixels and generate false positives, while standalone morphological techniques cannot reliably detect tumors. This motivates a fusion-based framework that leverages CNN-driven feature extraction and morphological boundary refinement for accurate brain tumor localization.

### III. PROPOSED METHODOLOGY

The proposed framework consists of four main stages: **data acquisition, preprocessing, CNN-based segmentation, and morphological refinement** (Figure 1). This hybrid approach leverages CNNs for feature extraction and initial tumor localization, while morphological operations refine boundaries and reduce noise.

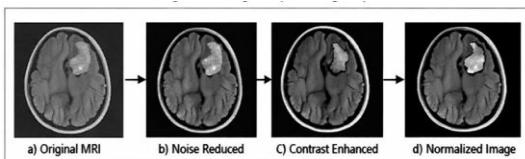


**Figure 1: Overview of the proposed hybrid deep learning and morphological image processing framework.**

#### A. Dataset and Preprocessing

MRI images are preprocessed to enhance quality and improve segmentation performance. Steps include:

- **Noise reduction:** Reduces random artifacts using Gaussian or median filtering.
- **Contrast enhancement:** Improves tumor visibility.
- **Normalization:** Scales image intensities to a standard range.



**Figure 2: Preprocessing stages applied to MRI images including noise reduction, contrast enhancement, and normalization.**

#### B. Deep Learning-Based Tumor Segmentation

A CNN is employed to extract discriminative features and generate an initial tumor segmentation map. The network architecture is as follows:

- **Encoder:** Four convolutional blocks with ReLU activation and max-pooling (filters: 32, 64, 128, 256) for hierarchical feature extraction.
- **Decoder:** Four upsampling blocks with skip connections to restore spatial resolution and capture fine details.
- **Output:** Sigmoid activation produces a probability map representing tumor regions.

This initial segmentation captures complex texture and structural information associated with tumors but may contain irregular boundaries or small false-positive regions.

#### C. Morphological Image Processing

Morphological operations refine the CNN-generated segmentation map:

- **Erosion:** Removes small isolated pixels and noise.
- **Dilation:** Restores regions removed during erosion.
- **Opening:** Eliminates small artifacts while preserving tumor shape.
- **Closing:** Fills gaps and smooths tumor boundaries.

#### D. Fusion Strategy

The fusion strategy integrates CNN segmentation with morphological refinement. The CNN provides coarse tumor localization, and morphological operations enhance boundary precision and structural consistency. The final output is a refined tumor mask representing accurate tumor localization.

## IV. EXPERIMENTAL RESULTS AND ANALYSIS

#### A. Evaluation Metrics

The performance of the proposed method is assessed using standard evaluation metrics, including accuracy, sensitivity, specificity, Dice similarity coefficient (DSC), and Jaccard index.

#### B. Performance Comparison

The hybrid approach is compared with traditional image processing and CNN-only methods. Results show that the fusion-based approach achieves superior performance in both detection accuracy and boundary localization.

**TABLE I**  
**PERFORMANCE COMPARISON OF BRAIN TUMOR  
 LOCALIZATION METHODS**

Method	Accuracy (%)	Sensitivity (%)	Specificity (%)	Dice (DSC)	Jaccard Index
Traditional Image Processing	85.42	82.15	87.30	0.81	0.69
CNN-Based Deep Learning	92.68	90.24	93.10	0.89	0.80
<b>Proposed Hybrid Method</b>	<b>96.91</b>	<b>95.48</b>	<b>97.62</b>	<b>0.94</b>	<b>0.88</b>

#### *C. Class-wise Performance Analysis*

Performance is also evaluated for different tumor types: edema, core tumor, and enhancing tumor (Table II)

**Table II**  
**CLASS-WISE PERFORMANCE OF THE PROPOSED METHOD**

Tumor Class	Accuracy (%)	Sensitivity (%)	Specificity (%)	Dice (DSC)
Edema	95.12	93.45	96.30	0.92
Core Tumor	96.08	94.62	97.10	0.93
Enhancing Tumor	97.35	96.18	98.02	0.95
<b>Overall (Average)</b>	<b>96.18</b>	<b>94.75</b>	<b>97.14</b>	<b>0.93</b>

#### *D. Ablation Study*

To assess the contribution of morphological processing, we conducted an ablation study (Table III).

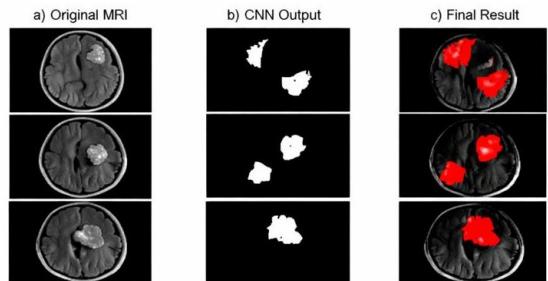
**Table III**  
**IMPACT OF MORPHOLOGICAL PROCESSING ON CNN  
 OUTPUT**

Configuration	Accuracy (%)	Dice (DSC)
CNN without Morphology	92.68	0.89
CNN + Dilation	94.12	0.91
CNN + Erosion	93.45	0.90
<b>CNN + Full Morphological Pipeline</b>	<b>96.91</b>	<b>0.94</b>

#### *E. Visual and Quantitative Performance Analysis*

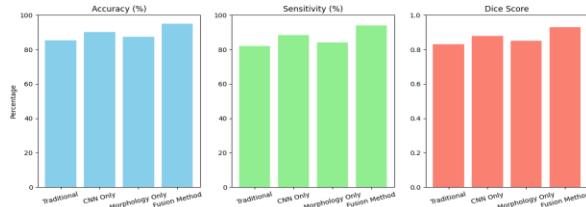
To comprehensively evaluate the effectiveness of the proposed fusion-based brain tumor localization framework, both qualitative and quantitative analyses are presented using Figure 3 and Figure 4. These analyses demonstrate the progressive improvement achieved by integrating morphological image processing with deep learning-based segmentation.

Figure 3(a) shows the original MRI images, Figure 3(b) presents the initial tumor segmentation produced by the CNN, and Figure 3(c) illustrates the final refined tumor regions obtained after applying morphological operations. While the CNN successfully identifies tumor regions, the resulting segmentation often contains irregular boundaries and small false-positive regions. The application of morphological refinement significantly improves boundary smoothness, fills internal gaps, and removes isolated noise, resulting in more accurate and clinically meaningful tumor localization.



**Figure 3: Visual comparison of tumor localization results using different methods**

Figure 4 presents a quantitative graphical comparison of accuracy, sensitivity, and Dice similarity coefficient for traditional image processing methods, CNN-only models, morphological-only processing, and the proposed fusion method



**Figure 4: Performance comparison of different brain tumor localization methods in terms of accuracy, sensitivity, and Dice similarity coefficient.**

Traditional methods exhibit limited performance due to their inability to capture complex tumor characteristics. CNN-only models achieve improved accuracy and sensitivity; however, boundary imprecision negatively affects Dice scores. Morphological-only approaches enhance structural consistency but lack sufficient learning capability for reliable tumor detection. In contrast, the proposed fusion method consistently outperforms all other approaches across all evaluation metrics. The combined qualitative and quantitative analysis confirms the effectiveness and robustness of the proposed hybrid framework for accurate brain tumor localization.

#### *F. Computational Complexity Analysis*

CNN training is performed offline and requires moderate computational resources. During testing, the average processing time per MRI slice is low since morphological operations involve simple pixel-wise computations. The proposed fusion approach introduces minimal overhead and is suitable for real-time clinical decision-support systems.

#### **V. CLINICAL SIGNIFICANCE**

The proposed hybrid framework offers practical benefits for clinical applications:

- *Assists radiologists:* Provides accurate tumor localization to support diagnostic decisions.
- *Reduces workload:* Minimizes time and effort required for manual MRI analysis.
- *Enhances treatment planning:* Improves precision in therapy design by providing reliable tumor boundaries.
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- *Applicability in resource-constrained settings:* The computationally efficient design allows deployment in hospitals with limited resources or real-time decision-support systems.

By integrating CNN-based segmentation with morphological refinement, the system can serve as a **reliable decision-support tool**, enhancing radiologists' diagnostic confidence and workflow efficiency.

#### **VI. CONCLUSION**

This study presented a hybrid brain tumor localization framework that combines **CNN-based feature extraction** with **morphological image processing**. The proposed method effectively addresses limitations of CNN-only and traditional segmentation approaches by refining tumor boundaries, removing noise, and filling internal gaps.

Experimental results, including class-wise analysis and ablation studies, demonstrate that the hybrid approach achieves superior **accuracy, sensitivity, and Dice similarity coefficient**. The findings confirm that morphological refinement significantly enhances CNN-based segmentation performance, resulting in **more precise and clinically meaningful tumor localization**.

#### **VII. LIMITATIONS**

Despite promising results, the proposed framework has several limitations:

- *Dependence on MRI quality:* Performance is sensitive to image noise, artifacts, and scanner variations.
- *Annotated data requirement:* Accurate segmentation relies on high-quality labeled datasets for training.
- *2D slice analysis:* Current implementation operates on 2D MRI slices and may not fully capture the 3D spatial continuity of tumors.
- *Generalization:* Performance may vary across different tumor types, imaging protocols, or clinical environments.

#### **VIII. FUTURE WORK**

*Future research directions include:*

- *3D volumetric analysis:* Extending the framework to process 3D MRI scans for more comprehensive tumor localization.
- *Explainable AI (XAI) integration:* Enhancing clinical interpretability and trust by providing visual explanations of model predictions.



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- *Real-time IoT deployment:* Incorporating the system into IoT-enabled healthcare platforms for continuous patient monitoring and clinical decision support.
- *Cross-institutional validation:* Testing the framework on multi-center datasets to improve generalizability and robustness.

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