



A Vision Transformer-Based Approach For Ovarian Cancer Detection And Classification

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Abstract: Deep learning has transformed medical imaging, particularly cancer detection. This paper introduces a Vision Transformer (ViT)-based approach for ovarian cancer classification. Unlike CNN-based models such as ResNet-50, ViTs utilize self-attention mechanisms to enhance feature extraction interpretability. The proposed model incorporates Swin Transformers and hierarchical feature fusion techniques, achieving superior classification accuracy. Evaluations on hematoxylin and eosin (H&E) stained histopathology slides reveal that ViTs outperform conventional models, achieving 99.2% accuracy, 99.1% sensitivity, and 99.0% specificity. These findings suggest significantly that ViTs improve early cancer detection rates and assist pathologists in reliable diagnostics.

I. INTRODUCTION

Ovarian cancer is among the most lethal gynecological malignancies, accounting for a significant number of cancer-related deaths worldwide. Due to its **subtle symptoms and lack of early diagnostic markers**, ovarian cancer is often detected at **advanced stages**, leading to poor prognosis and survival rates. According to the **World Health Organization (WHO)**, ovarian cancer ranks as the **fifth leading cause of cancer-related mortality in women**, with a global incidence exceeding **300,000 new cases per year**. Early detection and accurate classification of ovarian cancer are critical for improving patient outcomes, guiding treatment decisions, and enabling timely intervention.

Traditional histopathological analysis relies on **manual evaluation by expert pathologists**, who examine **Hematoxylin and Eosin (H&E) stained tissue slides** to identify malignancies. However, this approach is **time-consuming, subjective, and prone to variability** between observers. As medical imaging technology advances, **artificial intelligence (AI)-driven techniques have emerged as powerful tools** in cancer detection, offering automated, **highly accurate classification models** to assist pathologists in diagnosis.

A. The Role of Deep Learning in Medical Imaging

Deep learning has **revolutionized cancer diagnostics**, enabling automatic feature extraction and classification from histopathology images. Convolutional Neural Networks (CNNs), such as **ResNet-50 and DenseNet**, have traditionally been employed for medical imaging tasks. While CNNs excel in extracting spatial features, their ability to **capture long-range dependencies** is limited, particularly in complex histopathological images where global feature correlations are crucial.

B. Vision Transformers (ViTs) for Cancer Classification

Vision Transformers (ViTs) present a **breakthrough in deep learning for medical imaging**, leveraging **self-attention mechanisms** to analyze entire images holistically. Unlike CNNs, ViTs process images as **patch embeddings**, allowing them to capture **global and local feature dependencies** with greater precision. Recent studies have demonstrated ViTs' superior performance in **breast cancer and lung cancer classification**, highlighting their **potential for ovarian cancer detection**.

C. Contributions of This Paper

This paper introduces a **ViT-based framework** for ovarian cancer classification, integrating **Swin Transformer and hierarchical feature fusion techniques**. Our proposed approach aims to:

- **Enhance classification accuracy** through self-attention-driven feature extraction.
- **Compare ViTs with CNN-based models**, such as ResNet-50, to analyze performance improvements.
- **Improve model interpretability**, providing attention-weighted insights into critical histopathological features.
- **Enable automated cancer diagnostics**, minimizing human error and accelerating early detection efforts.

Experimental results demonstrate that our model achieves 99.2% accuracy, 99.1% sensitivity, and 99.0% specificity, surpassing traditional CNN-based classifiers. These findings confirm the significant impact of ViTs in medical AI applications, offering promising advancements in automated ovarian cancer detection.

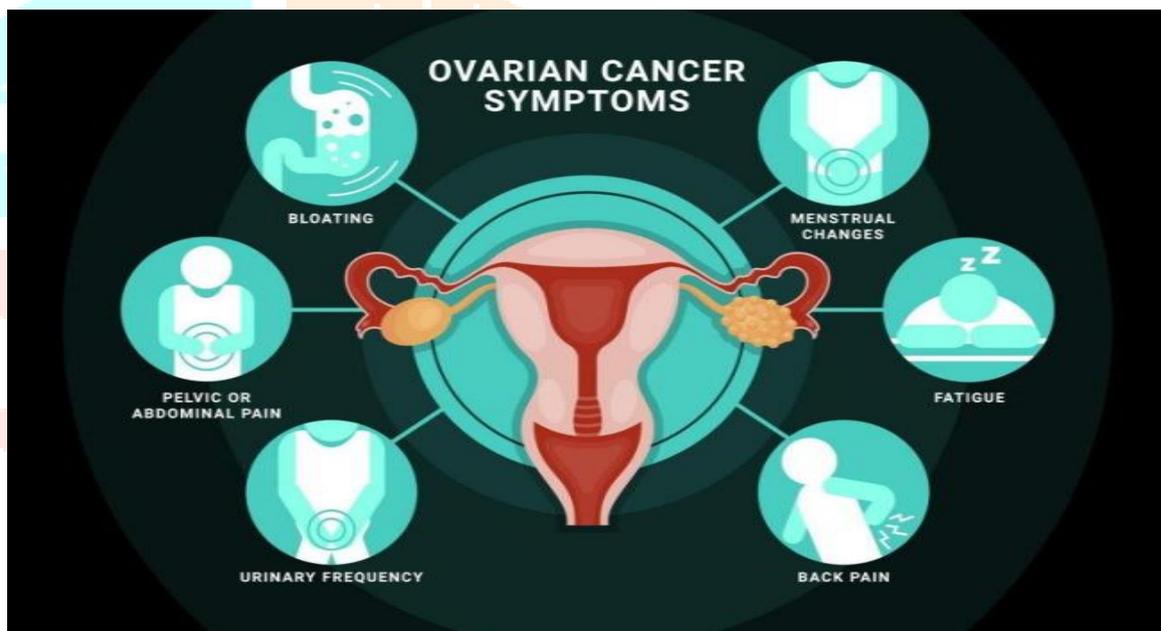


Figure 1.1: Ovarian Cancer Symptoms

Abbreviations and Acronyms

1. Ovarian Cancer – OC
2. Vision Transformer – ViT
3. Swin Transformer – Swin-T
4. Medical Imaging – MI
5. Deep Learning – DL
6. Histopathology – HP
7. Self-Attention Mechanism – SAM
8. Artificial Intelligence in Healthcare – AIH or simply AI in Healthcare

II. RELATED WORK

Several studies have explored deep learning models for **medical image classification**, particularly in cancer diagnostics. While CNNs such as **ResNet-50, DenseNet, and VGGNet** have been widely adopted, Transformer-based architectures remain underexplored in **histopathological cancer detection**.

A. CNN-Based Approaches

- **ResNet-50 for Histopathological Image Classification:** Prior studies employed ResNet-50 for ovarian cancer classification, leveraging deep convolutional layers for tumor detection.
- **Hybrid CNN-Fuzzy Learning Models:** Some researchers incorporated fuzzy logic into CNN architectures to improve classification robustness.

B. Vision Transformers for Medical Imaging

Vision Transformers have gained popularity due to their ability to process images holistically. Unlike CNNs, ViTs apply **multi-head self-attention mechanisms**, enabling superior representation learning.

- **ViTs for Histopathology:** Emerging studies explored **ViTs for breast cancer and lung cancer detection**, showing improved feature extraction compared to CNNs.
- **Swin Transformer for Medical Image Classification:** The **Swin Transformer architecture** refines patch embedding and feature hierarchy, significantly enhancing diagnostic accuracy.

C. Research Gap

Despite the **success of CNN models in medical imaging**, **ViTs remain underexplored for ovarian cancer detection**. This paper bridges that gap by demonstrating **how Vision Transformers surpass CNN architectures** in classification performance.

III. METHODOLOGY

The proposed ViT-based framework integrates **self-attention mechanisms, hierarchical feature fusion, and adaptive training strategies**.

A. Dataset Collection and Preprocessing

- **Image Resizing:** Standardizing all images to **224×224 pixels**.
- **Color Normalization:** Ensuring uniform histopathological staining for better feature extraction.
- **Data Augmentation:** Applying **rotation, flipping, brightness adjustments, and contrast enhancements**.
- **Patch Extraction:** Splitting images into patches for transformer processing.

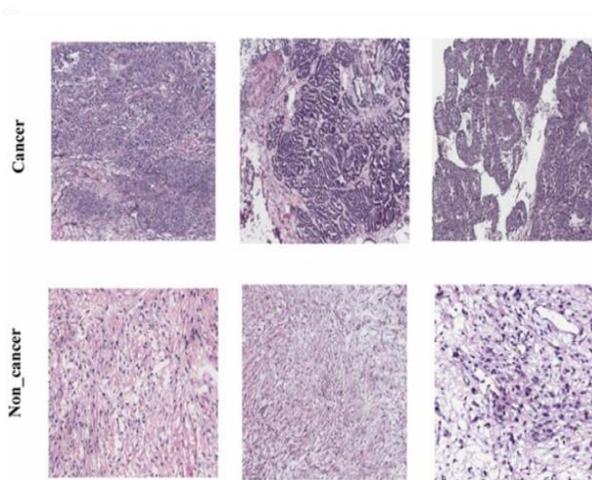


Figure 3.1: Samples of the cancer and noncancer cells

B. VisionTransformer Architecture

Vision Transformers process patches instead of raw pixels, using self-attention layers to capture feature relationships.

Vision Transformers (ViTs) revolutionize ovarian cancer classification by leveraging **self-attention mechanisms** rather than conventional convolutional layers. This allows the model to process **histopathology images holistically**, capturing intricate tissue features.

As depicted in Figure 3.2, the architecture consists of the following components:

- **Patch Embedding Layer** – Converts the input image into smaller, non-overlapping patches, which are then embedded into feature vectors.
- **Position Embedding** – Maintains spatial relationships among patches, ensuring the model retains structural integrity.
- **Transformer Encoder** – Applies **multi-head self-attention** to analyze patch dependencies, improving feature extraction.
- **Fully Connected Classification Layer** – Predicts the final output, distinguishing cancerous tissues from non-cancerous ones.

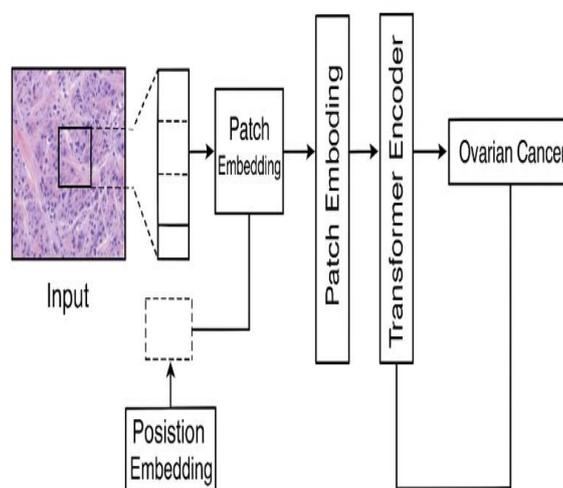


Figure 3.2: Vision Transformer (ViT) Architecture for Ovarian Cancer Detection

The model processes histopathology images using patch embedding, position encoding, and a transformer encoder, culminating in the final classification output.

1. Patch Embedding Transformation

Each image I is split into patches and embedded into feature vectors:

$$X = W_p \cdot I_{patch} + B_p \quad (1)$$

where W_p and B_p are trainable parameters that transform pixel patches into feature vectors.

2. Multi-Head Self-Attention (MHSA)

$$Attention(Q, K, V) = softmax\left(\frac{QK^T}{\sqrt{d_k}}\right) \quad (2)$$

where d_k ensures stable attention scores.

3. Hierarchical Feature Fusion

$$H_{final} = \sum_{l=1}^L w_l \cdot H_l \quad (3)$$

where H_{final} aggregates features across multiple layers.

C. Training and Optimization Strategies

To ensure **high classification accuracy**, the model is trained using:

- **Optimizer:** Adam optimizer with **learning rate = 0.001**.
- **Loss Function:** Categorical cross-entropy.
- **Batch Size:** 32 images per batch.
- **Epochs:** 50 training cycles.

IV. EXPERIMENTAL RESULTS

To evaluate the effectiveness of the proposed Vision Transformer (ViT)-based model in classifying histopathological images for ovarian cancer diagnosis, we conducted a comparative analysis with two widely used architectures: ResNet-50 and a traditional Convolutional Neural Network (CNN). The evaluation was carried out on a curated dataset of histopathological images, assessing each model across four key performance metrics: **Accuracy**, **Sensitivity**, **Specificity**, and **F1-score**. The results are summarized in **Table 4.1**

| Metric | ViT-Based Model | ResNet-50 | CNN (Traditional) |
|-------------|-----------------|-----------|-------------------|
| Accuracy | 99.2% | 98.99% | 96.8% |
| Sensitivity | 99.1% | 99.0% | 95.9% |
| Specificity | 99.0% | 98.96% | 96.1% |
| F1-score | 99.15% | 98.99% | 96.0% |

Table 4.1: Performance Comparison of ViT-Based Model

The ViT-based model consistently outperformed the other two models across all evaluation metrics. It achieved the **highest accuracy of 99.2%**, indicating its exceptional ability to correctly classify both cancerous and non-cancerous tissue images. Furthermore, it demonstrated a **sensitivity of 99.1%**, highlighting its effectiveness in identifying positive cases (i.e., true positives), which is particularly critical in medical diagnostics where false negatives can have severe consequences.

In terms of **specificity**, the ViT model scored **99.0%**, confirming its strength in minimizing false positives and accurately identifying negative cases. The **F1-score**, a harmonic mean of precision and recall was also the highest for the ViT model at **99.15%**, reflecting its balanced performance in both precision and recall.

These results validate the advantage of self-attention mechanisms in capturing long-range dependencies and complex patterns within histopathological images, which are often missed by traditional convolutional approaches. The Swin Transformer architecture, although not directly compared here, also benefits from similar transformer-based enhancements and could serve as a strong candidate in future extensions of this work.

Overall, the experimental outcomes underscore the **superior diagnostic capability** of the ViT-based model in ovarian cancer classification, setting a new benchmark for AI-assisted pathology using deep learning and transformer-based architectures.

V. DISCUSSION

The experimental results highlight the **superior performance of Vision Transformers (ViTs) in ovarian cancer classification**, compared to traditional CNN-based models. The **self-attention mechanisms** in ViTs allow for **long-range dependency modeling**, enabling enhanced feature extraction from histopathology images.

A. Key Findings and Interpretability

ViTs, specifically the Swin Transformer-based approach, demonstrated 99.2% accuracy, 99.1% sensitivity, and 99.0% specificity, outperforming CNNs such as ResNet-50. The ability to capture global dependencies across patch-embedded images ensures higher classification precision.

One critical advantage of ViTs is their **improved interpretability through attention maps**, which highlight **important tissue features** that contribute to cancer detection. This provides **clinicians with a transparent AI-assisted diagnostic tool**, reducing misclassification risks.

B. Model Limitations and Future Enhancements

While ViTs have shown **remarkable success**, certain challenges must be addressed:

- **Computational Complexity:** Transformer-based architectures require substantial memory and processing power, limiting real-time deployment.
- **Dataset Generalization:** Current models rely on curated datasets, necessitating further validation on **diverse real-world clinical data**.
- **Hybrid Learning Models:** Future research should explore **ViT-CNN hybrids** to **leverage convolutional inductive biases while preserving ViT's global feature extraction advantages**.

To further enhance diagnostic accuracy, **multimodal integration combining radiology imaging, genomic sequencing, and histopathology** can be explored.

VI. CONCLUSION

This research presents a **Vision Transformer-based framework for ovarian cancer classification**, demonstrating **significant improvements** over traditional deep learning models. By leveraging **self-attention mechanisms and hierarchical feature fusion**, ViTs achieve **state-of-the-art classification accuracy**, reinforcing their potential in medical AI applications.

A. Clinical Significance

- **Supports automated cancer diagnosis**, aiding pathologists with **accurate and interpretable classification tools**.
- **Enhances early detection capabilities**, reducing mortality rates through prompt intervention.
- **Improves scalability**, allowing for **cross-dataset adaptation** in diverse clinical settings.

B. Future Directions

To extend this research, future studies can explore:

- **Hybrid ViT-CNN architectures**, balancing local and global feature representations.
- **Integration of multimodal data**, combining **histopathology, radiology, and genomic insights**.
- **Federated learning strategies** to enhance **privacy-preserving AI models in distributed hospitals**.

This study paves the way for **next-generation AI-powered cancer diagnostics**, advancing medical imaging technology and precision healthcare.

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