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To cite this article: Abhishek Patel *et al* 2021 *IOP Conf. Ser.: Mater. Sci. Eng.* **1022** 012073

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# Detection of Prostate Cancer Using Deep Learning Framework

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**Abstract.** Recent studies in Prostate Cancer signifies as magnetic resonance imaging targets to biopsy shows more enhanced result. The systematic study of Medline, Embase, Scopus, Cochrane helps in meta-analysis. Prostate specific antigen is obtained from curative radiotherapy. Prostate-specific membrane antigen positron emission tomography helps to localize recurrence prostate cancer whether it has increased. Prostate specific antigen rising helps to identify and prompted the reason of Prostate-specific membrane antigen positron emission tomography imagining. angiogenesis play an important role for diagnosis noninvasive cancer with technique contrast-enhanced ultrasound. Prostate Cancer accuracy were determined by MRI-targeted biopsy and the transrectal ultrasound-guided biopsy.

**Keywords:** Prostate Cancer, Magnetic Resonance Imaging (MRI), Prostate specific antigen (PSA), Prostate-specific membrane antigen positron emission tomography (PSMA-PET), Prostate-specific membrane, Radiotherapy, Prostate Imaging Reporting and Data System (PI-RADS).

## 1. INTRODUCTION

The most common cancers among men is prostate cancer (PCa). Early diagnosis and preparation of care are critical in decreasing the mortality rate because of PCa. Precise grade prediction is required to ensure the treatment of cancer. The scaling of prostate cancer can be called as the ordinal classification issue. Accepted clinical approaches for the diagnosis of clinically relevant prostate cancer (PC) are generally the combination similar to prostate-specific antigen (PSA) testing, automated rectal analysis, trans-rectal ultrasound (TRUS) with the magnetic resonance imaging (MRI). Abd the PSA screening does, however, lead the diagnosis, leading to unnecessarily costly and the painful biopsies needle and possible over-treatment. The multiparametric MRI that depends mostly on diffusion-weighted imaging (DWI) has become highly standard for caring in terms of f diagnosis of prostate cancer is setting of the radiology where the region under the collected operating the characteristic of the curve (ROC) is present. Estimates suggest that the new cases and deaths with prostate cancer (PCa). In 2017 will be 161, 360 and 26, 730, respectively. Accurate diagnosis and staging for the prostate cancer are crucial for selecting the most effective treatment, and eventually to the reduction of PCa morbidity and death.

The field of medical imaging, detection based on computer-aided with a diagnosis which are the combination of the imaging function engineering and the classification based on ML, has demonstrated ability to assist radiologists in accurate diagnosis, reducing diagnostic time and diagnostic costs. Deep learning approaches in various computer vision technique such as the segmentation, the classification and the object detection have shown promising results. Such methods consist of convolution layers capable of extracting different features with help of the local low-level features towards the global high-level features collected from the input photos. A completely linked layer at the edge of the Convolutionary neural layers transforms convoluted features in terms of the mark probabilities. With different layers types have been given to enhance the output based on deep learning-based technique with the batch normalization layer, which normalize the given input layer with zero mean and the unit variant with dropout layer are seems to be one of the regularization techniques which ignores the nodes which are



selected in randomly order. Nevertheless, optimal combinations and layer structures with an accurate fine-tuning of the hyper-parameters which are needed to achieve convincing efficiency.

## 2. LITERATURE REVIEW

A novel and proficient semi supervised system proposed [1] for computerized prostate disease confinement using the multiparametric attractive reverberation imaging (MRI). The irregular walker (RW) calculation has end up being exact and quick in division applications. In this mechanized way utilizing discriminative classifiers, for example: SVM (support vector machine. The proposed strategy creates an affectability/explicitness pace of 0.76 to 0.86 individually. A Transient Enhanced Ultrasound (TeUS) proposed [2], involving the investigation of varieties of signals like backscattered signals which are from the tissue over an arrangement of ultrasound outlines. propose to utilize profound Recurrent Neural Networks (RNN) which expressly demonstrate the transient data in TeUS. The exploring a few models of RNN, they showed as the Long Short-Term Memory (LSTM) systems accomplish the most elevated exactness in isolating malignant growth from kind tissue present in prostate. If the relative Gleason score[3] has been allocated to the diagnosed prostate cancer, the accurate therapy followed by the needs to be specified promptly. The assist pathologists and the radiologists with respect to timely diagnosis, they suggest in this particular paper a system aimed at inferring the score of Gleason and the therapy for prostate cancer using systematic methods. Contrast-ultrasonic Imaging (CEUS) technology [4] gave the significant role of angiogenesis in the degree of cancer. Here, the different deep learning algorithmic models have been trained and the validated against the expert delineations over with the images of CEUS reported using two different types of the contrast agents. The presented convolutional neural networks (CNNs) [5] for detection of prostate cancers with the use of AUC. The CNNs known with the high-level feature that representation the nuclear architecture summarized from the maps of the nuclear seed and to identify cancers. CNNs obtained the AUC is 0.974 when identifying cancers (95 per cent CI: 0.961–0.985). Epithelial Network Head with the Grading Network Head, we are presenting a new regional Convolutionary neural network (R-CNN) [6] system. The suggested model obtained from an epithelial cell detection precision of 99.07 percent similar to the average of AUC of 0.998 using five-fold cross-validation. The Magnetic resonance imaging (MRI) [7]. We analyze a fully automatic method of detection using computer-aided consisting of two phases. The tests show a frequency of 0.42, 0.75 and 0.89 per usual case at 0.1, 1 and 10 false positives. The RF ultrasound time series [8]. We capture sequential ultrasonic RF echoes backscattered from tissue in order to form time series of RF while imaging the probe as well as the tissue which are stationary in place. The growth of Angiogenesis[9] roles in cancer growth that has inspired work aimed at the non-invasive identification of cancer through imagery of blood perfusion. The time-intensity curves (TICs) are measured with help of ultrasound imaging. In this paper [10], they immediately suggest an adversarial Network for segmentation of prostate cancer. Architecture proposed is a generator network with the discriminator network. Proposed a constructed computer-aided diagnostic (CAD) [11] tools that help identify anomalies by the radiologist. Radial Base Function (RBF), polynomial, and the Gaussian and the Decision Tree for detecting the cancer. The Cross validation was conducted, and output was evaluated with the terms of receiver operating curve (ROC), the precision, response, the Positive predictive value (PPV), false positive rate (FPR) and the negative predictive value (NPV). The magnetic Resonance Imaging (MRI) [13]. Here, segmentation is required to automatically or semi-automatically locate the prostate boundary. Fully Convolutionary Neural Networks (FCNN) have been used to this end recently. Magnetic Resonance Imaging (MRI) is mostly reliable, the non-invasive and the prostate imaging technique. The multi-parametric MRI [14] is known to be the safest imaging of the non-invasive tool for the prostate cancer (PCa) diagnosis. However, in the mp-MRI for the PCa diagnosis are currently limited with some of the critical qualitative or the interpretation semi-quantitative, resulting in variability between readers and a sub-optimal ability to assess aggressiveness of lesions. They proposed the novel CNN based on multi-class, FocalNet which will jointly detect the lesion of PCa and the forecast their aggressiveness with the help of Gleason score (GS). The Scale

Invariant Trans-Forming function (SIFT) [15] was used to collect local patch details surrounding the boundary. The size and variation of the SIFT function used for segmentation shall not be defined with the area of the purpose of concern.

### 3. FINDINGS FROM LITERATURE

We have systemically studies approx. 18 papers inclusion years from 2005 to 2020, and some meaning-full findings are highlighted in table 1. We have observed that MRI-TB is an enhanced technique for diagnosing the prostate cancer with the systematic biopsy. The patients who are suspected, PI-RADS seems having a good diagnosing with good accuracy. For improving the systematic biopsy, we mainly target the two different approaches as magnetic resonance imaging (MRI) and the transrectal ultrasonography (TRUS) fusion. The detection of PC with MRI pathway mainly involves guided systematic pathway for both (biopsy-naive subjects and those having prior negative biopsy) types of patients. Thus, MRI-TB is enhanced alternative diagnostic technique for systematic biopsy for the prostate cancer detection.

**Table 1: Summary Table of Literature Review**

| Authors, [reference]                             | Year of Publication | Database and size  | Number of patients   | Techniques used  | Finding from literatures   |
|--|---------------------|--|--|--|--|
| Y. Artan and I. S. Yetik [1]                     | 2012                | Multiparametric MR images of 15 confirmed patients were analysed.  | Out of 21 patients, 15 confirmed biopsy patient data were analysed.            | Developed the graph based multi-parametric random walker(RW) algorithm for segmenting the MRI and later use of discriminative classifier SVM.                        | RW technique with an initialization of automated seed enhanced the segmentation as increasing the weights with large discriminative power. |
| S. Azizi, S. Bayat, P. Yan et al. [2]            | 2018                | TeUS data were obtained from 157 patients during prostate biopsy fusion as well as 255 targeted biopsy patients were suspicious from mp-MRI were used. | 157 subjects with prostate biopsy and the 255 suspicious mp-MRI were examined. | Temporal Enhanced Ultrasound (TeUS) used for characterizing the tissue with help of RNN models. Long Short-Term Memory (LSTM) is used for gaining the high accuracy. | Proposed LSTM- based RNNs technique is used for depth analysis of latent features which helps to optimize the TeUS data.                   |
| L. Brunese, F. Mercaldo, A. Reginelli et al. [3] | 2019                | Dataset of real world analysed from Cancer Imaging Archive freely available in terms of research purpose.  | Totally 36 patients having 824 slices were observed.                           | Infer Gleason score were used with PCa therapy with method formal exploiting in MRI images which doesn't required a biopsy   | Automated real time technique is used for improving the Gleason score which supports the pathologist and the                               |

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|                                      |      |   |  | with a time automation in experimental analysis.   | radiologist while detecting the prostate cancer in earlier stage.   |
| Y.Feng, F. Yang, X. Zhou et al. [4]  | 2019 | CEUS images capture from iU22 ultrasound system have 505x246 raw data of AVI videos.  | Available raw dataset contains 78277 negative sample and 9073 positive sample.   | Contrast-enhanced ultrasound (CEUS) technology is used for diagnosing non-invasive cancer. It extracts both feature temporal and the spatial by performing 3D CNN operation. | Deep Learning technique is used for detection of PC from CESU videos which overall gives 90% of an average accuracy rate.   |
| Kwak, Jin Tae Hewitt, Stephen M. [5] | 2017 | Four tissue microarrays (TMAs) were taken from National Institute of Health while conducting the tissue microarrays research program. | TMAs contains 162 tissue sample (72 begin & 89 cancer in TMA A), similarly in TMA B it contains 149 sample (76 begin & 73 cancer) and TMA C contain 157 (73 begin & 86 cancer) | CNN approach is used. Microscopy identification of Epithelial nuclear seeds are used for constructing nuclear seed map.  | Sample tissue images are of size 5000x5000 pixels and the detection of nuclear seed takes an average of 547s due to classification of epithelium which nearly give 90% of accuracy.                                   |
| W. Li, J. Li, K. Sarma et al. [6]    | 2019 | Dataset contains 513 images which were gained from pathology department at Cedars-Sinai Medical Centre.                               | These 513 images are collected from two different sets as 224 images from 20 patients and rest 289 images from 20 patients.  | Gleason grading is used for classification. R-CNN framework is used for predicting multi-task model with used of Epithelial Network Head and the Grading Network Head.       | Proposed framework helps to detect epithelial cell and the grading of Gleason based on the historical images. R-CNN with adding of EHN the proposed model boosts the detection of epithelial cell and predict the PC. |

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| G. Litjens,<br>O. Debats,<br>J. Barentsz et<br>al. [7]      | 2014 | Among 165 consecutive studies of patients having PC 18 lesions and 183 case of non-cancer patients were analysed for the evaluation of proposed CAD system.                                       | Totally, 348 studies were obtained from 347 patients   | Two stage fully automated MRI detection system were used. Segmentation uses multi-atlas and the local maxima. Pharmacokinetic behaviour represented. Evaluation is based upon lesion and operating characteristic curve.     | Proposed CAD system detects PC in MRI images. ROC curve classifies the patients. Evaluation of CAD system performance is the state-of-the-art with the high specificity than the radiologist performance.  |
| M. Moradi,<br>P.<br>Abolmaesumi,<br>D.Siemens et<br>al. [8] | 2009 | Comparison of RF time series with LF and texture feature were gained for 35 patients. Hence, it enhanced the imaging depth, its frame rate and the acoustic power with an ROI size of the tissue. | 35 patients dataset were obtained and evaluated for RF time series features.                       | Analysis of ultrasound RF series of time with extended SVM for obtaining extended cancer map which enhance the process of biopsy. Sequential ultrasound RF echoes were recorded from agar-gelatin mimicking tissue phantoms. | Computer-based diagnosing technique is proposed with an concept of ultrasound RF timeseries. These helps in extracting the feature value from 1cm <sup>2</sup> proposition of the tissue which helps the radiologist for extraction the reasonable area of the cancer. |
| S. Schalk,<br>L. Demi,<br>N. Bouhouch et<br>al. [9]         | 2017 | Contrast ultrasound dispersion imaging(CUDI) while validating the in-vivo of 23 patients were parameter are validated with the histopathology after the RP.                                       | 23 patients' images taken from 58 datasets which are referred from the radical prostatectomy (RP). | Blood perfusion imaging is used for detecting non-invasive cancer. TICs obtained by ultrasound imaging. Firstly, theoretical connection between mutual information and dispersion.   | CUDI implementation is better for extracting the feature from TICs and helps while investing the tissue perfusion. Hence, it can be validated other cancer also where angiogenesis has more impact.  |
| G. Zhang,<br>W.Wang,  | 2019 | Dataset contains the MR T2-   | 120 patient datasets   | Bi-attention adversarial   | For segmenting the PC Bi-  |

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| D. Yang et al.<br>[10]                          |      | weighted images with a saturation of the fat for experimental modality having the vocal size of $0.9 \times 0.6 \times 3.5 \text{ mm}^2$ . All the collected imaging dataset are confirmed by the biopsy pathology. | collected from Shanghai Tenth People Hospital.   | network used for segmenting automatically. Discriminator and generator network architecture were used for enhancing adversarial learning performance and predicting mask with true label.                                 | attention adversarial network were compared with other existing technique and observed that it shows the better result than other state-of-art globally proposed.   |
| L. Hussain, A. Ahmed, S. Saeed et al.<br>[11]   | 2018 | Publicly available MRI Images dataset Harvard university were examined.   | Totally, 682 MRIs obtained from 20 patients. These contain 482 images obtained from prostate subjects and remaining 200 from Brachytherapy subjects. | CAD is used for diagnosing multiresolution MRI. Kernel SVM, RBF, Decision Tree and Gaussian technique used for detecting PCa. SIFT and EFDs helps in scaling the feature in ROC curve.                                    | Performance of proseed model were evaluated using PPV, NPV, FPR and AUC. However, it reveals that proposed feature extraction methodology is more effective for diagnosing the PC.  |
| L. Gorelick, O. Veksler, M. Gaed et al.<br>[12] | 2013 | All the collected images are approved by research ethics board. As all the subject are of confirmed cases. Here, the prostate section was processed by embedding standard paraffin, yielding whole mount.           | 15 subject images are obtained with radical prostatectomy.   | Radical prostatectomy gives prostatectomy information. AdaBoost classification. Firstly, portioning of super pixel image and secondly labelling tissue culture is label for classifying between cancer versus non-cancer. | Designed the software for detection of PC which classifies on haematoxylin & eosin-stained digital histopathology images. Proposed system determines high level tissue components labelling of the super pixel without use of explicitly domain knowledge which gives the best result for detecting the PC. |

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| T. Hassanzadeh, L. Hamey, K. Ho-Shon [13]                     | 2019 | Experimented dataset was collected from four different hospital with employing two Endo Rectal Coil (ERC). It includes 50 MRI volumes and also 30 MRI volumes without ground truth images which all together have 1377 images. | The PROMISE12 challenge dataset   | MRI imaging is segmented to detect boundary. Improved FCNN based upon 2D network architecture. Ten-fold-cross-validation shows competitive and improved result. 3D FCNN with endorectal coil and test fold enhance the performance without further extension of post-processing. | Eight FCNN based network architecture is proposed for segmentation of MRI images. These outperforms is comparable with 3D FCNN segmentation method. Here, it signifies the enhanced performance among the model which transfer the equal number of feature map to generate better result. |
| R. Cao, A. Mohammadian Bajgiran, S. Afshari Mirak et al. [14] | 2019 | All the collected images were performed on four different 3T scanner (126 patients on trio, 255 on Skyra, 17 Prisma and the 19 patients were evaluated on Verio). Evaluated on basis of standard mp-MRI protocol.              | 417 patients were examined who further went for a Radiotherapy or hormonal therapy. | mp-MRI considered for diagnosing PCa in non-invasive imaging. Multi-class CNNs with Focal Net and Gleason score are used for predicting lesions. 3T mp-MRI with the RALP. Uses of FROC used for analysing and generating highly enhancing performance.                           | Multi-class CNN framework with focal net is proposed which consist mutual loss finding with fully utilized distinctive knowledge obtained from multiparametric MRI images. Hence achieve 89.7% for focalNet and the 87.9% for sensitivity.  |
| M. Yang, X. Li, B. Turkbey, et al. [15]                       | 2013 | In the collected data each patient contains one axial scan and the TSE MR protocol of T2-w acquisition.  | Dataset of 52 patients was obtained from 3.0T Philips Gyroscan.                     | MRI is mostly used for assistance and diagnosis helps in surgical planning of the prostate carcinoma. Scale invariant feature transformation (SIFT) used for capturing   | Distinctive image descriptor is proposed to elaborate the PC position with the help of SVA-SWIFT framework.   |



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|  |  |  |  | boundary local patch. Coarse-to-fine segment approach is used obtaining variation in local shape. |  |
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## 4. METHODOLOGY

### 4.1 Dataset & Result

It contains total 158 patients, among which 96 are train case patients and the 62 are of test cases. The patients MRI sequence contain scan of 2D series which are deployed as 3D form of body. Every patients MRI consist five different modes as ADC, DWI, Ktrans and T2-weighted transverse sequence as well as T2-weighted sagittal sequence. The model of 3D CNN was used in these datasets and finally we obtained the confusion matrix with an accuracy of 0.82, precision of 0.86 as well as recall of 0.78 on the validation set.

### 4.2 Proposed architecture of 3D Convolutional Neural Network

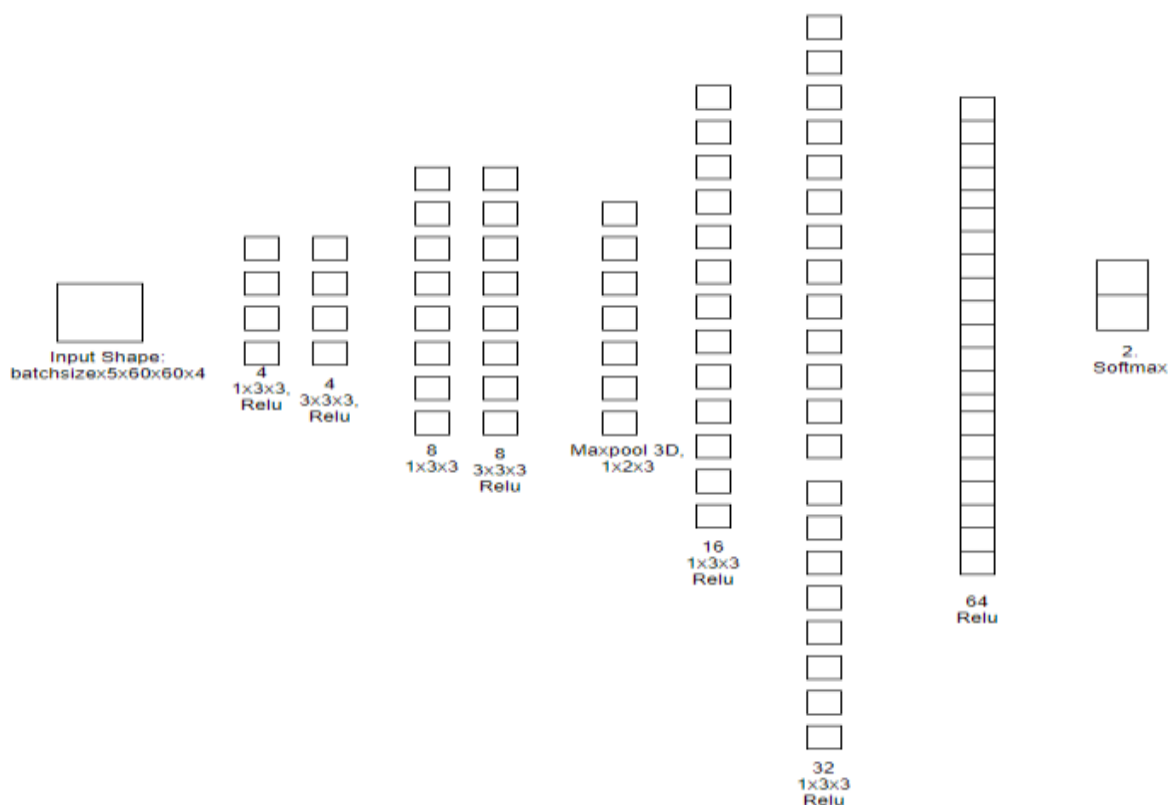


Figure 1: Architecture of proposed 3D CNN

## 5. CONCLUSION & FUTURE WORK

Detection of prostate cancer in a clinical systematic method. The MRI-TB plays a vital role that systematic biopsy as it alters and helps in diagnosis in the process of radiography. PI-RADS with the mp-MRI gives sensitivity and the specificity for detecting prostate cancer. We have compared the different methodology for detecting the prostate cancer in MRI imaging and the radiology with PI-RADS and the Focal Net were MRI images were examined with enhanced CNN model for predicting the cancer and non-cancer. The SVA-SIFT features were taken with a description of the NVFT and SIFT features. In research, it is observed that robust ML methodology for classification like SVM kernel, Decision Tree and the Bayesian approach are used for separating cancer cell from the subject like Brachytherapy. Feature extraction is done with the scale invariant feature transformation (SIFT), elliptic Fourier descriptor (EFDs), morphology and the texture were used. Cross validation is done by Jack-knife 10-fold for training and testing the data then the performance was evaluated on the basic of NPV, PPV, FPR and the AUC. Here accuracy of higher classification is done on basic of single texture and the morphological feature come from the SVM kernel and while combining them with EFDs and the texture generates good result. However, the different technique and the result shown in these papers are obtained from current feature extraction technique which are more efficient for diagnosing and detecting the prostate cancer in the men with acquiring the high ratio of detection for prostate cancer.

## References:

- [1] Y. Artan and I. S. Yetik, 2012, "Prostate cancer localization using multiparametric MRI based on semisupervised techniques with automated seed initialization," *IEEE Trans. Inf. Technol. Biomed.*, vol. 16, no. 6, pp. 1313–1323, doi: 10.1109/TITB.2012.2201731.
- [2] S. Azizi *et al.*, 2018, "Deep recurrent neural networks for prostate cancer detection: Analysis of temporal enhanced ultrasound," *IEEE Trans. Med. Imaging*, vol. 37, no. 12, pp. 2695–2703, doi: 10.1109/TMI.2018.2849959.
- [3] L. Brunese, F. Mercaldo, A. Reginelli, and A. Santone, 2019, "Prostate gleason score detection and cancer treatment through real-time formal verification," *IEEE Access*, vol. 7, pp. 186236–186246, doi: 10.1109/ACCESS.2019.2961754.
- [4] Y. Feng *et al.*, 2019, "A Deep Learning Approach for Targeted Contrast-Enhanced Ultrasound Based Prostate Cancer Detection," *IEEE/ACM Trans. Comput. Biol. Bioinforma.*, vol. 16, no. 6, pp. 1794–1801, doi: 10.1109/TCBB.2018.2835444.
- [5] J. T. Kwak and S. M. Hewitt, 2017, "Lumen-based detection of prostate cancer via convolutional neural networks," *Med. Imaging 2017 Digit. Pathol.*, vol. 10140, p. 1014008, doi: 10.1117/12.2253513.
- [6] W. Li *et al.*, 2019, "Path R-CNN for Prostate Cancer Diagnosis and Gleason Grading of Histological Images," *IEEE Trans. Med. Imaging*, vol. 38, no. 4, pp. 945–954, doi: 10.1109/TMI.2018.2875868.
- [7] G. Litjens, O. Debats, J. Barentsz, N. Karssemeijer, and H. Huisman, 2014, "Computer-aided detection of prostate cancer in MRI," *IEEE Trans. Med. Imaging*, vol. 33, no. 5, pp. 1083–1092, doi: 10.1109/TMI.2014.2303821.
- [8] M. Moradi, P. Abolmaesumi, D. R. Siemens, E. E. Sauerbrei, A. H. Boag, and P. Mousavi, 2009, "Augmenting detection of prostate cancer in transrectal ultrasound images using SVM and RF time series," *IEEE Trans. Biomed. Eng.*, vol. 56, no. 9, pp. 2214–2224, doi: 10.1109/TBME.2008.2009766.

- [9] S. G. Schalk *et al.*, 2017, “Contrast-Enhanced Ultrasound Angiogenesis Imaging by Mutual Information Analysis for Prostate Cancer Localization,” *IEEE Trans. Biomed. Eng.*, vol. 64, no. 3, pp. 661–670, doi: 10.1109/TBME.2016.2571624.
- [10] G. Zhang *et al.*, 2019, “A Bi-Attention Adversarial Network for Prostate Cancer Segmentation,” *IEEE Access*, vol. 7, pp. 131448–131458, doi: 10.1109/ACCESS.2019.2939389.
- [11] L. Hussain *et al.*, 2018, “Prostate cancer detection using machine learning techniques by employing combination of features extracting strategies,” *Cancer Biomark.*, vol. 21, no. 2, pp. 393–413, doi: 10.3233/CBM-170643.
- [12] L. Gorelick *et al.*, 2013, “Prostate histopathology: Learning tissue component histograms for cancer detection and classification,” *IEEE Trans. Med. Imaging*, vol. 32, no. 10, pp. 1804–1818, doi: 10.1109/TMI.2013.2265334.
- [13] T. Hassanzadeh, L. G. C. Hamey, and K. Ho-Shon, 2019, “Convolutional Neural Networks for Prostate Magnetic Resonance Image Segmentation,” *IEEE Access*, vol. 7, no. c, pp. 36748–36760, doi: 10.1109/ACCESS.2019.2903284.
- [14] R. Cao *et al.*, 2019, “Joint Prostate Cancer Detection and Gleason Score Prediction in mp-MRI via FocalNet,” *IEEE Trans. Med. Imaging*, vol. 38, no. 11, pp. 2496–2506, doi: 10.1109/TMI.2019.2901928.
- [15] M. Yang, X. Li, B. Turkbey, P. L. Choyke, and P. Yan, 2013, “Prostate segmentation in MR images using discriminant boundary features,” *IEEE Trans. Biomed. Eng.*, vol. 60, no. 2, pp. 479–488, doi: 10.1109/TBME.2012.2228644.