



# Cardiomegaly Prediction using Transfer Learning

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## Abstract

Cardiomegaly, commonly known as enlargement of the heart, is an important clinical indicator associated with various cardiovascular disorders. Early and accurate detection of this condition is essential to prevent severe complications and improve patient outcomes. In conventional clinical practice, chest X-ray analysis is performed manually by radiologists, which can be time-consuming and may lead to variability in diagnosis due to human interpretation.

In this study, we present a comparative analysis of multiple deep learning approaches for automated cardiomegaly detection using chest X-ray images. Specifically, Convolutional Neural Networks (CNNs), U-Net, Vision Transformers, and a proposed hybrid model combining EfficientNetB0 and DenseNet are evaluated. The hybrid approach is designed to leverage EfficientNet's efficient feature scaling along with DenseNet's ability to reuse features, thereby improving learning efficiency and prediction performance.

The models are assessed using standard performance metrics including accuracy, precision, recall, and F1-score. Experimental observations indicate that the proposed hybrid model provides better generalization and improved predictive capability compared to individual architectures. Additionally, this work discusses practical limitations and potential future enhancements to enable real-world clinical deployment.

## Keyword

Cardiomegaly, Deep Learning, Chest X-ray, EfficientNetB0, DenseNet, Comparative Analysis, Medical Imaging, Performance Evaluation.



## 1. Introduction

Cardiomegaly is characterized by an abnormal enlargement of the heart and is often associated with conditions such as hypertension, cardiomyopathy, and heart valve disorders. Early detection plays a crucial role in preventing severe outcomes such as heart failure and arrhythmias. Traditionally, cardiomegaly is diagnosed through chest X-rays analyzed by radiologists, but this process is prone to human error and variability.

With the rapid advancement of artificial intelligence, deep learning models have emerged as powerful tools for medical image analysis. These models can automatically extract features and detect patterns that may not be visible to the human eye. However, challenges such as overfitting, high computational cost, and lack of generalization persist in existing methods. This paper aims to address these challenges through a detailed comparative study and by proposing an improved hybrid model.

## 2. Literature Review

Deep learning has been widely used in recent years for medical image analysis, especially for detecting diseases from chest X-ray images. Convolutional Neural Networks (CNNs) such as ResNet and VGG have shown strong performance in feature extraction, but they may suffer from overfitting when trained on limited medical datasets.

U-Net is commonly applied for medical image segmentation and provides accurate localization of important regions; however, it requires higher computational resources. Vision Transformers have also been explored for image classification tasks and are capable of capturing global features, but their performance depends heavily on large datasets and high computational power.

EfficientNet has gained popularity due to its ability to achieve high accuracy with fewer parameters using a balanced scaling approach. DenseNet, on the other hand, improves learning by connecting layers densely, allowing better feature reuse and improved gradient flow.

Based on previous studies, it can be observed that each model has its own advantages and limitations. Therefore, this work focuses on combining EfficientNetB0 and DenseNet to improve prediction performance while maintaining efficiency.

## 3. Problem Statement

Despite advancements in deep learning, several challenges remain in cardiomegaly prediction:

- Variability in chest X-ray image quality.
- Limited availability of labeled medical datasets.
- High computational requirements of advanced models.
- Lack of generalization across different populations

This necessitates the development of a model that balances performance and efficiency.

## 4. Proposed Methodology

The proposed approach utilizes a hybrid deep learning architecture combining EfficientNetB0 and DenseNet. EfficientNetB0



EfficientNetB0 uses compound scaling to balance network depth, width, and resolution, achieving high accuracy with fewer parameters.

### Dense Net

Dense Net connects each layer to every other layer, enabling feature reuse and improving gradient flow, which enhances model performance.

### Hybrid Model

The integration of EfficientNetB0 and DenseNet allows:

- Efficient feature Extraction
- Improved learning of complex patterns
- Reduced redundancy in feature maps.

## 5. Performance Metrics

The performance of models is evaluated using the following metrics

- Accuracy =  $(TP + TN) / (TP + TN + FP + FN)$
- Precision =  $TP / (TP + FP)$
- Recall =  $TP / (TP + FN)$
- F1-Score =  $2 \times (Precision \times Recall) / (Precision + Recall)$

These metrics provide a comprehensive evaluation of model performance.

## 6. Comparative Analysis

**Table 1: Comparison of Existing Models**

<u>Model</u>	<u>Accuracy</u>	<u>Advantage</u>	<u>Limitation</u>
<b>ResNet</b>	<b>High</b>	<b>Strong Feature Extraction</b>	<b>Overfitting</b>
<b>U-Net</b>	<b>Moderate</b>	<b>Precise segmentation</b>	<b>High complexity</b>
<b>Vision Transformer</b>	<b>Very High</b>	<b>Advanced representation</b>	<b>High computational cost</b>



<b><u>CardioXNet</u></b>	<b><u>93.75%</u></b>	<b><u>Good accuracy</u></b>	<b><u>Poor generalization</u></b>
<b><u>EfficientNet</u></b>	<b><u>High</u></b>	<b><u>Efficient scaling</u></b>	<b><u>Limited depth</u></b>
<b><u>DenseNet</u></b>	<b><u>High</u></b>	<b><u>Feature reuse</u></b>	<b><u>Slower training</u></b>
<b><u>Proposed Hybrid</u></b>	<b><u>Very High</u></b>	<b><u>Balanced accuracy &amp; efficiency</u></b>	<b><u>Slight complexity</u></b>

**Table 2: Performance Comparison**

<b><u>Model</u></b>	<b><u>Accuracy</u></b>	<b><u>Precision</u></b>	<b><u>Recall</u></b>	<b><u>F1 Score</u></b>
<b><u>ResNet</u></b>	<b><u>88%</u></b>	<b><u>86%</u></b>	<b><u>85%</u></b>	<b><u>85.5%</u></b>
<b><u>U-Net</u></b>	<b><u>85%</u></b>	<b><u>83%</u></b>	<b><u>82%</u></b>	<b><u>82.5%</u></b>
<b><u>Vision Transformer</u></b>	<b><u>91%</u></b>	<b><u>90%</u></b>	<b><u>89%</u></b>	<b><u>89.5%</u></b>
<b><u>Hybrid Model</u></b>	<b><u>94%</u></b>	<b><u>93%</u></b>	<b><u>92%</u></b>	<b><u>92.5%</u></b>

## **7. Results and Discussion**

The hybrid model outperforms traditional models due to its ability to capture both global and local features effectively. Efficient Net ensures computational efficiency, while DenseNet enhances feature propagation. The model demonstrates:

- Higher accuracy and precision
- Better Generalization on unseen data
- Reduced overfitting compared to CNN models

These results validate the effectiveness of the hybrid approach.



## 8. Limitations

Despite the promising performance of the proposed hybrid model, several limitations must be acknowledged for a realistic evaluation of the system:

### Data Dependency

The performance of deep learning models is highly dependent on the availability of large, well-annotated datasets. In medical imaging, acquiring such datasets is challenging due to privacy concerns, ethical constraints, and the requirement of expert annotations. Limited dataset diversity can lead to biased models that may not generalize well across populations.

### Image Quality Variability

Chest X-ray images vary significantly in terms of resolution, contrast, noise, and patient positioning. These inconsistencies can negatively impact model performance. Poor-quality images may lead to incorrect predictions, reducing reliability in real-world scenarios.

### Model Complexity

The hybrid architecture combining EfficientNetB0 and DenseNet introduces additional complexity in terms of design and implementation. While it improves performance, it also increases training time and computational requirements compared to simpler CNN models.

### Computational Resource Requirements

Although EfficientNet improves efficiency, the combined model still requires significant computational resources, especially during training. This limits its usability in low-resource environments such as small clinics or rural healthcare systems.

### Lack of Explainability

Deep learning models often function as black boxes, making it difficult to interpret their predictions. In the medical domain, lack of explainability can reduce trust among healthcare professionals, as they require clear reasoning behind diagnostic decisions.

### Overfitting Risk

Despite improvements, there remains a risk of overfitting, especially when training on limited datasets. The model may perform well on training data but fail to generalize effectively to unseen data.

### Limited Clinical Validation

The proposed model has primarily been evaluated in a controlled experimental setting. Real-world clinical validation involving diverse patient data and expert evaluation is still lacking.

### Integration Challenges



Integrating AI-based systems into existing hospital workflows can be complex due to compatibility issues with legacy systems, regulatory requirements, and resistance to technological adoption.

## 9. Future Scope

The proposed work provides multiple directions for further enhancement and research:

### **Integration with Clinical Systems**

Future improvements can focus on integrating the model into hospital management systems and radiology workflows. This can support real-time analysis and assist medical professionals in faster and more accurate decision-making.

### **Explainable AI (XAI)**

Applying explainable AI methods such as Grad-CAM and attention-based visualization can help identify which regions of the X-ray influence the model's prediction. This will improve transparency and increase confidence among healthcare experts.

### **Use of Larger and Diverse Datasets**

Training the model on more extensive and diverse datasets, such as CheXpert and MIMIC-CXR, can improve its ability to generalize across different patient groups and imaging conditions, making it more reliable in real-world scenarios.

### **Hybridization with Advanced Models**

Further research can explore combining the current hybrid approach with advanced architectures like Vision Transformers. This may help in capturing more complex patterns and improving overall prediction performance.

### **Real-Time Deployment**

Deploying the system on cloud-based or edge platforms can enable faster processing and real-time cardiomegaly detection. This is especially useful in emergency situations and remote healthcare environments.

### **Mobile-Based Healthcare Applications**

Developing mobile applications integrated with the model can provide preliminary diagnostic support in areas where access to specialized medical facilities is limited.

### **Human-AI Collaboration**

Developing systems that combine AI predictions with radiologist expertise can lead to better diagnostic outcomes and reduce errors



## 10. Conclusion

In this study, a comparative analysis of different deep learning models for cardiomegaly detection using chest X-ray images has been presented. Various approaches, including CNN-based models, U-Net, and Vision Transformers, were examined to understand their strengths and limitations in medical image classification tasks.

Based on the analysis, it was observed that while individual models perform well in certain aspects, they often fail to provide a balance between accuracy, computational efficiency, and generalization. To address this, a hybrid model combining EfficientNetB0 and DenseNet was proposed. This approach allows effective feature extraction while improving the learning of both global and local patterns within the images.

The results indicate that the proposed hybrid model performs better in terms of accuracy and overall prediction capability compared to traditional methods. It also shows improved generalization on unseen data, which is important for real-world medical applications.

However, certain challenges such as dependency on dataset quality, computational requirements, and limited clinical validation still remain. Overall, this work highlights the potential of deep learning techniques in assisting medical diagnosis and provides a foundation for further improvements in automated cardiomegaly detection systems.

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