

Implementation of Fourier Transformation with Brain Cancer and CSF Images

Soobia Saeed^{1*}, Afnizanfaizal Abdullah¹ and NZ. Jhanjhi²

¹Department of Software Engineering, Universiti Teknologi Malaysia-UTM, Johor Bharu, Malaysia; Saeed.soobia@graduate.utm.my, afnizanfaizal@utm.my

²School of Computing and IT (SoCIT), Taylor's University, Subang Jaya, and Selangor, Malaysia; noorzaman.jhanjhi@taylors.edu.my

Abstract

Objectives: Medicinal images assume a key part in the diagnosis of tumors as well as Cerebrospinal Fluid (CSF) leak. In a similar way, MRI could be the cutting edge regenerative imaging technology, which permits an angle sectional perspective of the body, which gives convenience to specialists to inspect the affected person. In this study, the authors had attempted the strategy to classify MRI images (4-Dimensional) either at the beginning of production to have a tumor or even can be utilized for tumor recognition. The aim of the study is to address the aforementioned problems associated with the brain cancer due to the leakage of CSF. **Methods/Findings:** This research is to construct the research framework that can identify cancer damage area or be isolated from tumors and non-tumors quiet by using Fourier transformation. Another research tool, based on Fourier Transform, is the main mathematical method for frequency analysis and has extensive engineering and science applications. Because DFT is omnipresent, there has been extensive study of highways for the DFT account and active research has continued. **Application:** Several fast algorithms are provided by the DFT partitioning method. In this document, we provide DFT with two rapid implementation algorithms to assess their performance. This study helps the detection of brain cancer due to the process of interfacing the 4-D (4 Dimensional) image segmentation process and Fourier transformation. 4-D is followed by MATLAB software modeling techniques to measure the size of brain damage cells deep inside of CSF. These Methods of light fields can be useful for improving the quality of application editing segmentation and light field composite pipeline, as they reduce boundary artefacts.

Keywords: Brain Tumor, Cerebrospinal Fluid, Fourier Transformation, Image segmentation, MRI

1. Introduction

Brain tumor acknowledgement with Magnetic Resonance Images (MRI) is critical in the medicinal determination as it gives organized information on the design outline of a body part. There are a couple of essential MRI checks out: T1 weighted MRI as well as T2 weighted MRI. T1 pictures are generally used to take a gander at typical anatomical subtle elements. T1 is best to look at the cerebrum structure on the grounds that fats and tissues seem brilliant and bone marrow contains a lot of fat. T2 is the transverse development of protons and is typically used in the treatment of pathology because most of the tissues included in the infection tend to have higher water content than normal.

- The white matter appears a light grey in T1 and a dark grey in T2.
- The grey matter appears grey in both.
- CSF appears black in T1 and white in T2.

Malignant brain tumors are serious and life threatening to patients¹⁻³. Tumors of the brain and spinal cord tend to differ from adults to kids. In various regions, they often crystallize, create from various cell types and have alternate perspectives and treatments. A benign brain tumor can very infrequently become malignant⁴. Early detection is a key to huge numbers of these tumors but then our capacity to do is constrained⁵. Brain tumors are the principal region of our exploration and Accuracy is the key

*Author for correspondence

tool for progress, so this examination recommends MRI to get the best images and best outcomes⁶.

As we are concentrating on the tumorous area so T1 weighted MRI outputs are most useful for us as they can help us in examining the points of interest of anatomical conduct of tumorous region. So we have utilized T1-weighted pictures for preparing our model. This study shows brain cancer by using segmentation of brain cancer images between MRI images and showing results using the proposed algorithm in 4D. The purpose of this study is to detect brain cancer through MRI in the brain, for example, the supervised machine learning in terms of 4D light field segmentation. The four-dimensional light field segmentation technique uses the diagram-cutting algorithm (grab cut). Since the 4D light field information contains verifiable profundity data and contains a recurrence (excess). It varies from the basic 4D estimate size hyper-volume). To look after repetition, the researcher recognizes the two neighboring radios rays (spatial and angular) in light field segmentation. For segmentation goals, additionally a structure of learning-based likelihood and considered objectivity that utilizations indications of appearance and variety. To demonstrate the adequacy of our strategy through numerical assessment and some light field altering applications utilizing artificial light fields (synthetic and true light fields).

The MRI information is acquired from the Web Brain Database to work on these tumor-dependent images and applied the cancer segment (including the leakage of CSF). These images essentially represent the measure of the quantity level of CSF leakage and need to compute the size of cancer as well, which estimate the assistance of the MATLAB programming. This research work focused on the extent of the tumor created by CSF leakage and calculated the area of the region from the progression to the last advance to the expanding sizes of cancer cells (cells or damaged tissue). Using different tools, the researcher tested more than 200 skull samples that detected the location of brain cancer.

Fourier series give an alternative technique for representing to information: we represent to the sign at various frequencies as opposed to representing to the sign limit as a component of time. In the event that on a stereo equalizer while just observe the flashing lights, one can see Fourier examining turn on. The lights represent when there is a lot of bass or treble in the music. Fourier analyzes are significant for information gathering just as for acoustic hardware. As ne increments bass power in ones

stereo, when leading a laboratory experiment, one can channel the high recurrence commotion from the adjacent radio towers at Needham. Fourier analysis empowers certain recurrence groups to be isolated. This document describes a portion of the Fourier arrangement ' essential ideas and shows how one can without much of a stretch play out this examination utilizing MATLAB. While MATLAB encourages the interpretation of the time area signal into the frequency domain, one needs to see how information in the frequency domain can be translated⁷.

2. Literature Survey

MRI benefits from CT imaging with the ability to detect blood flow and vascular cascading abnormalities. Disease detection can also detect demyelinating and have no beam hardening artefacts such as CT. The posterior fossa can, therefore, be visualized more easily on MRI than on CT. Pictures are made also without ionizing radiation. MRI depends on the magnetization properties of nuclear nuclei⁸. A solid, uniform outside attractive field is utilized to adjust the protons in the tissues analyzed that are randomly directed to the water nuclei. With the presentation of outer Radio Frequency (RF) energy this arrangement (or polarization) is then disabled or disabled. The nuclei return through different relaxation processes to their resting alignment. Radio frequency energy is therefore emitted. The emission signals are measured after a certain period after the initial RF. Fourier Transform is utilized to change over the frequency data in the sign to the corresponding density levels at every area at the image level, which at that point shows up in the pixel matrix as grey shades. Changing the grouping of relevant and joined RF pulses makes different sorts of pictures. Time Repeat (TR) is the time between the progressive heartbeat successions utilized in a similar section. The Time Echo (TE) is the time between the RF beat conveyance and the echo signal gathering⁹.

The tissue may have two different times of relaxation: T1 and T2. T1 (longitudinal relaxation time) is the time steady that decides the protons ' balance rate. It is a proportion of the time taken to change over them into the outside attractive field by periodic protons.

T1 reflects the time needed to recover to its initial maximum value the longitudinal relaxation time. Tissues recover faster with shorter T1 than long T1 tissues. Longitudinal relaxation values are greater, giving the MR image a stronger signal and a brighter point^{10,11}.

T2 (Transverse Relaxation Time) is a constant time, which determines the rate of high protons balancing or emerging from each other. It is a measure of the time taken by protons to rotate the loss of phase consistency between nuclei that rotates vertically in the main field. T2 reflects the time taken on the transverse plane by the MR signal for analysis. T2 means the signal is declining very fast. T2 materials therefore contain smaller signals and appear darker than longer T2 values materials. T1-weighted scans weighted by T2 are the most common MRI sequences. The weighted images are generated in T1 using short TE and TR times. The contrast and illumination of the image is primarily determined by the tissue's T1 properties.

On the other hand, weighted images use longer lengths of TE and TR in T2. In these images, contrast and luminosity are determined primarily by the T2 properties of the tissue. In general, it is easy to distinguish balanced images in T1 and T2 from CSF. With weighted images, CSF is dark in T1 and bright in T2 with weighted images. T1 is the white (light gray scale) and T2 is the dark gray scale^{11,13}.

One of the important aspects of MRI is that it can create images of various characteristics of brain regions in conjunction with MRI assessments of tumor boundaries based on T1 and T2-weighted images. T1-images are generally used with typical anatomical elements (different parts of the body) to take a gender (male or female). T1 is best to look at the structure of the cerebrum because the fats and tissues appear brilliant and the bone marrow contains a lot of fat. T2 is the transverse development of protons and is typically used to take a pathological gender (both male and female) in view of the fact that most tissues incorporated in the infection tend to have higher water content than normal, although the white problem appears in T1 as light gray and in T2 as dark gray^{12,14}.

- Grey matter in both appears grey
- CSF in T1 and white in T2 appears black.

A radiologist primarily focuses on the tumors area paying attention to T1 weighted MRI outputs deemed to be most useful for examining the points of interest in the tumors region or vice versa. So we have utilized T1-weighted pictures for preparing our model and this research as well. MRI is the best technology in medical imaging, allowing the cross-sectional perspective of the body with unusual tissue contrast^{13,15,16}. MRI plays a

vital role in assessing the condition of the lower leg, foot and brain (brain). MRI is a non-interventionist methodology that has ended up being a compelling tool in human brain research. The data provided by MRI have greatly expanded information about normal and pathological anatomy on medical research, an essential part of the identification and regulation of treatment. The doctor's medical treatment options depend on diagnostic tests, making accurate analysis a form of medical care. Fortunately, the characteristics of the achievement tests can be measured. For a particular disease condition, the most perfect test can be chosen in the light of these characteristics. Sensitivity, privacy and accuracy are used extensively to lead to demonstration testing^{14,17,18}.

The brain tumor is one of the real reasons for the increment in mortality among kids and young generation. A tumor is a mass of tissue that becomes uncontrollable by the typical forces of directs development. The rate of brain tumors is exceeding quick, especially in older people than younger once. The brain tumor is a social event of anomalous cells that moves toward becoming inside the cerebrum or around the cerebrum^{15,19}. Tumors can explicitly smash all sound cerebrum cells. It can likewise influence the healthy cells around the tumorous one and influence various pieces of the cerebrum by making aggravation, swelling and creating weight within the skull. Early location and right treatment taking into account precise conclusion are essential strides to enhance disease results. Brain irregularities include a wide range of conditions extending from development mistakes to vascular mishaps. This unpredictability results in immeasurable potential outcomes of discoveries of prenatal ultrasound, which could make some analytic predicaments¹⁶. A few pre-processing systems are utilized to concentrate more correct components from MRI images. The scientist has utilized dark MRI images so it can be smoothed by an alteration in contrast for better outcomes. The main objective of our work is to develop a system that can auto detect the tumorous region or can separate between tumorous and non-tumorous patient. Initially, the input MRI image is pre-processed in order to fix the image for the rest of the process¹⁷⁻²⁰.

The brain develops and works in a highly controlled environment resulting from the coordination of the different cell interfaces among blood and extracellular liquid in the brain, including interstitial liquid and CSF. The barrier properties of these interfaces challenge the delivery of pharmacologically active molecules and,

specifically, macromolecules in the cerebrum. The blood-brain interfaces incorporate both the blood-brain barrier in the blood at the brain micro vessel endothelium and the blood - CSF barrier located at the choroid plexus epithelium.

The functions of the body the central nervous system is very important, and any compromise in the brain and spinal cord could lead to serious problems. As suggested by the cerebral blood - brain barrier, the central nervous system has a distinct blood supply. The blood content cannot simply pass through the central nervous tissue. There is strict control over what can be done in the brain and spinal cord to protect this area of toxins and pathogens that pass through the bloodstream. CNS needs specialized structures to maintain circulation because of this privilege. This starts with a unique blood vessel arrangement that carries fresh blood to the central nervous system. The central nervous system filters this blood into the CSF apart from the blood supply, which then circulates through the cavities of the brain and the spinal cord called the ventricles²¹.

CSF circulates all over the central nervous system and around it. As a major contributor to interstitial fluid, water and small molecules are filtered through the capillaries in other tissues. Cerebrospinal fluid in the brain is produced to perfuse through the central nervous system's nervous tissue in special structures and is continuous with interstitial fluid. The cerebrospinal fluid is specifically distributed to remove the metabolic waste from the nerve tissue interstitial fluid and return it to the bloodstream. The ventricles are the open spaces within the brain that circulate the cerebrospinal fluid. Filtering the blood through a specialized membrane called the choroid plexus produces CSF in some of these spaces. The cerebrospinal fluid circulates through all the ventricles and eventually appears in the subarachnoid space where it is absorbed into the blood^{22,23}.

Inside the brain there are four ventricles, all of which evolved from the original hollow space inside the central canal, the neural tube. The first two is called the brain - deep lateral ventricles. These ventricles are connected by two openings called the interventricular foramina to the third ventricle. The third ventricle is the vacuum between the left and right sides of the interstitial brain that opens in the middle brain channel. The channel is the space between the cerebellum and the pons and the upper medulla in the fourth ventricle^{24,25}.

The cerebrospinal fluid in the blood is reabsorbed into the arachnoid granulations where the macular membrane appears in the dural sinuses. It is confined to the area within the skull when the telencephalon expands and grows in the cranial cavity. The telencephalon is most of the neural tube's anterior area, but it cannot go beyond the skull's frontal bone boundaries. Because the brain fits in with this space, through the frontal, parietal, occipital, and finally temporal regions, it takes on a C shape formation.

In this same form of C, the area within the telencephalon is stretched. The two ventricles were called the first and second ventricles on the left and right sides at the same time. The interventricular foramina connect the lateral ventricle frontal region with the third ventricle²⁶.

The third ventricle is the area of the hypothalamus and thalamus defined by the medial walls. In most brains, the two thalamus are placed in the center as the massa intermedia surrounded by the third ventricle. The cerebrospinal canal opens directly below the epithelium and crosses the middle brain. The middle brain layers ' tectum and tegmentum are respectively the roofs and the cerebral aqueduct floor. The aqueduct opens up to the fourth ventricle. The fourth ventricle floor is the pons and upper medulla (the gray matter that makes the tegmentum) dorsal surface. The fourth ventricle narrows towards the spinal cords central channel^{27,28}.

CSF is produced continuously by the brain and is absorbed into the blood system. Sometimes, as a result of skull fracture, poor brain coverage (Dura), or intracranial surgery or brain tumor growth, CSF may leak through the brain. This is a potentially serious condition that can cause infection in the CSF (meningitis) or the brain itself (brain abscess). The biggest issue is not a segmentation process and detection of cancer and many diseases. The big issue is to find out the high accuracy of work and identify the range of damage cell. One of the motives of this research is to find out the deposited liquid of CSF in the brain as well²⁹.

3. Methodology

The main objective of our work is to develop a system that can detect the CSF leakage and tumors region or can separate between tumors and non-tumors patient. Initially, the input MRI image is 4D-Light Field Tool (LFT) segmentation in order to fix the image for rest of though.

The basis of this study is detecting of brain cancer due to interfacing of MRI-4D images with LFT segmentation. The researcher discusses the damaged cell of the brain due to the abnormalities of the brain cell. It is a qualitative research study.

The primary goal of our work is to build up a framework that can recognize the tumors area or can isolate between tumors and non-tumors quiet. At first, the information MRI image is pre-processed with a specific end goal to in shape the image for rest of the procedures.

3.1 Proposed Framework

The proposed framework is based on, for the most part, comprises of two parts, which include:

1. 4D light field segmentation method, 4D structured graphs, Objectness from intensity and FourierTransform.

3.2 Proposed Technique for Detection of Tumor

In this research, the researcher follows the direction of 4d tools and techniques with Fourier transformation system for the detection of tumor and CSF leakage inside of brain.

3.3 Tools and Platforms

Here are mention the tools of research thesis platform with details which is given below:

The basis of this study is detecting of a brain cancer due to interfacing of MRI-4D images with LFT segmentation. The researcher discusses the damage cell of brain cell or tissues due to the abnormalities of brain cell. The primary goal of our work is to build up a framework that can recognize the CSF leakage area or can isolate between tumors and non-tumors quiet. At first the information MRI image is pre-processed with a specific end goal to in shape the image for rest of the procedures.

3.4 4D Light Field Segmentation Method

The purpose of selection of a light field is basically a four-dimensional structure. Almost the sounds of each pixel corresponding to the ray. The two dimensions determine the position of that ray, while the other two determine its direction. In the case of images measured by a camera based on a camera lens such as Lytro, the two dimensions

choose a lens image. The remaining two of them chooses pixels within the image of this lens to maintain the resolution of the segmentation.

3.5 4D Structured Graphs

The purpose of selecting the 4D graph structure is to apply the graph-cutting algorithm to reduce the power function. The solution provides the optimal mark for each ray. It was observed that the solution becomes almost ideal for segmentation of multiple classifications.

3.6 Objectness from Intensity and Disparity

The purpose of the objective is to assess the similarity between ray and CSF leakage in terms of disparity and intensity. Machine learning performances play an important role in the strong measurement of objectness, which can facilitate the integration of these different types of information. To evaluate the term data, objectness of the labels must be comparable to each other. The researcher chooses the machine learning technique that meets this requirement while providing good performance.

3.7 Fourier Transforms

In this document, we propose the transformation of Fourier, which combines the 4d segmentation to insert continuous time series data, where the correlation between the variables may be delayed; the data may be rain cancer and CSF. In multiple biological domain datasets (one simulation, then real clinical data and sensor data carried by the body), we compared approaches with others, indicating that our proposed work has the highest precision for all practical relationships 4D segmentation.

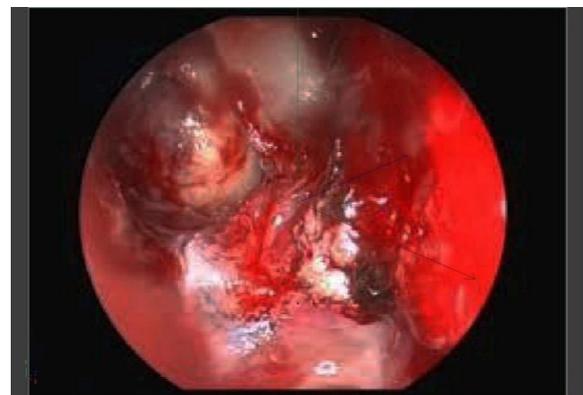


Figure 1: CSF leakage of brain cell.

As Figure 1 show the originality of CSF leakage from brain side and as you can see the image which have already clear the vision of leakage from the brain.

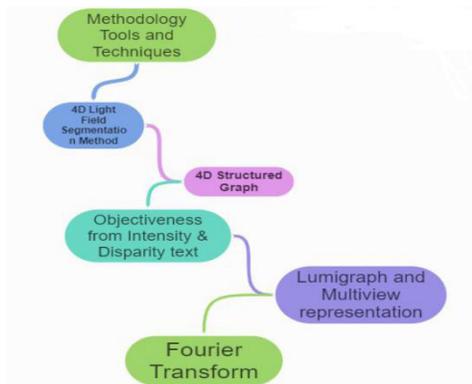


Figure 2. Proposed methodology of learning model.

Figure 2 show the structure of proposed methodology framework of learning model. In this model show the

flow chart of overall procedure of Fourier transformation process.

Figure 3 (a) show the original image sample of CSF leakage which is selected by Fourier transformation. As we know that Fourier transformation are the fastest techniques of showing the signal to power ratio.

Figure 3 (b) show the implementation of Fourier transformation for first step. In this step the image show the overall black due to the reason of image selection for identifying the region of leakage.

Figure 3(c) show the selection of image for centered Fourier transformation of an image. This step is to select the region of center of the image which is easily detecting the region of damage cell.

Figure 3 (d) show the vision of an image. In this step show that the black and white region with light. So it means that the FFT (Fourier fast transformation) shows the area of selection for the image.

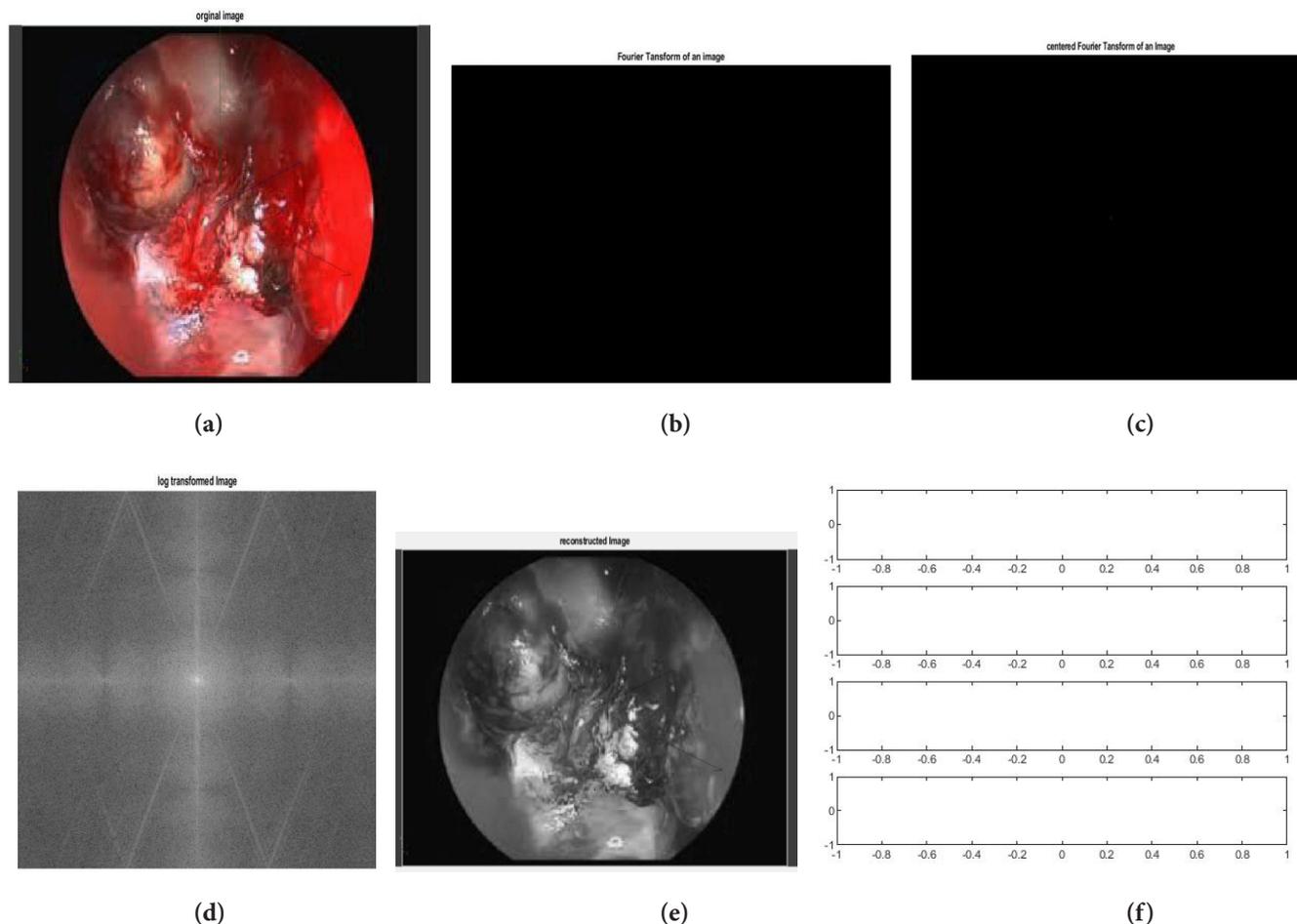


Figure 3. (a) Original Image of sample. (b) Implementation of Fourier transformation. (c) Centered Fourier transformation of an image. (d) Log Transform Image. (e) Reconstruct of an image. (f) Fourier Transformation of signal Rati.

Figure 3 (e) shows that the clear image of selected region of whole figure. With black and white form with signal to power ratio of FFT.

Figure 3 (f) shows that the Fourier transformation of signal ratio with black and white images form and also show the intensity of an image with their values.

Here is a mention of algorithm to show the Fourier transformation which are given below:

Algorithm 1: Fourier Transformation

Input: Upload DICOM Images I1 (Image.1)

Get Image (MxN).

Output: Show DICOM Images I1;

Get Image (Gray Image);

1. Begin
2. Show DICOM Images I1;
3. Get Fourier Transform of an image
4. Get $F = \text{fft2}(\text{imdata})$
5. Show DICOM Images I1;
6. Get centered spectrum
7. Get $F_{sh} = \text{fftshift}(F)$;
8. Show DICOM Images I1;
9. Apply log transform
10. $S1 = \log(1 + \text{abs}(F_{sh}))$;
11. Show DICOM Images I1;
12. Get reconstructs the Image
13. Get $F = \text{ifftshift}(F_{sh})$;
14. Get $f = \text{ifft2}(F)$;
15. Show DICOM Images I1;
16. Get reconstructed Image
17. Apply $F_s = 1000$ for sampling frequency
18. Get $T_s = 1/F_s$ for sampling period of time step
19. CALCULATE the difference $dt = 0$; $T_s = 5 - T_s$; %signal duration
20. Load $f1 = 10$;
21. Load $f2 = 70$;
22. Load $f3 = 100$;
23. APPLY FORMULA $Y = A \sin(2\pi f t + \theta)$;
24. CALCULATE the difference $Y1 = 10 * \sin(2\pi * f1 * dt)$;
25. CALCULATE the difference $Y2 = 10 * \sin(2\pi * f2 * dt)$;
26. CALCULATE the difference $Y3 = 10 * \sin(2\pi * f3 * dt)$;
27. CALCULATE the ADDITION OF $Y4 = Y1 + Y2 + Y3$;
28. APPLY $\text{nfft} = \text{lenth}(Y4)$; % length of time domain signal

29. APPLY $\text{nfft2} = 2^{\text{nextpow2}(\text{nfft})}$; %length of signal in power of 2
30. GET $\text{ff} = \text{fft}(Y4, \text{nfft2})$;
31. GET $\text{fff} = \text{ff}(1:\text{nfft2}/2)$;
32. SHOW THE RESULT OF $\text{fft} = F_s * (10:\text{nfft2}/2 - 1) / \text{nfft2}$;
33. APPLY Ylabel Amplitude (Y)
34. SHOW THE RESULT OF Time Domain Signal
35. APPLY XlabelFrquency(Xs)
36. APPLY YlabelNormaized Amplitude
37. SHOW THE RESULT OF Frequency Domain Signal
END

4. Result and Discussion

In this research article, the researcher analyzes the detecting of a brain cancer due to interfacing of MRI-4D Images. It is a qualitative research study. Our aim of this research is to construct a proposed framework that can identify cancer damage area or be isolated from tumors and non-tumors quiet and leakage of CSF. By using 4D image light field segmentation. Initially, the MRI processed the pre-processed image method with the final target selected to adjust the image for the rest of the procedures. On the basis of this study is the detection of brain cancer and CSF leakage due to the process of interfacing the 4d image segmentation process. Therefore, it consists of primary and secondary sources after a research study, followed by MATLAB Fourier modeling techniques with the use of original medical sample images to measure the range of brain damage cells deep inside of CSF. To implement the Fourier transformation with segmentation process by using MATLAB Algorithm. In this study, the researcher proposes a 4D modulation method that supervises the light field that can be used to emit light with FFT. By building a 4D-structured graph, the 4D light field can be segmented in order to reduce the graph algorithm by creating a 4D graph. The researcher uses the technique for editing the brain skull damaged brain samples. These findings show the effectiveness of our approach to light editing applications. These light field methods can be useful for improving the quality of the segmentation of application editing and the composite light field pipeline, as they reduce boundary artefacts.

The researcher evaluated the methods for overcoming the value of missing data in the computational experiments of the proposed new method. We use the Fast Fourier Transform method with correlation and multiple

missing data types in time series data. We made it clear that the improvement of the calculated data to determine the validation method variables is associated with the time delay of the test and the training vector resulting from the time delay. Fourier transform show the accuracy of medical images with the results of brain cancer with CSF leakage and maintain the accuracy of transformation with grey scale.

5. Conclusion

We established brain cancer location system using MRI brain images. Brain Web Database collects the MRI data and displays a sample brain image of the MRI. In these images the tumor size must be calculated using MATLAB. We focused on the size of a tumor in this research work and calculated the region area by using Fourier transform and another MATLAB tool. Cerebrum tumors due to leakage of CSF is the fundamental area of our exploration, exactness is the primary tool of achievement. With this reason our investigation proposes MRI so as to get the best pictures and best outcomes. This investigation depicts the brain tumor utilizing image segmentation of the cerebrum tumor between the pictures of the MRI and demonstrates the consequences of our as of late proposed estimation. The reason for this study is to use MRI brain images to locate cerebral tumors.

6. Acknowledgement

Authors are grateful to the Department of Software Engineering, faculty of computing, Universiti Teknologi Malaysia-UTM, Malaysia for financial support to carry out this work.

7. References

1. Shree NV, Kumar. Identification and classification of brain tumor MRI images with feature extraction using DWT and probabilistic neural network, *Brain Inform.* 2018, 5(1):23–30. <https://doi.org/10.1007/s40708-017-0075-5>.
2. Hiyama E, Hiyama K. Minireview: Telomere and telomeres in stem cell. *British Journal of Cancer.* 2007; 96:1020–4. <https://doi.org/10.1038/sj.bjc.6603671>.
3. Blasco MA. Telomeres and human disease: Ageing, cancer and beyond. *Nature Reviews Genetics.* 2005, 6, pp. 611–622. <https://doi.org/10.1038/nrg1656>.
4. Badarnel AA, Nafadat H, Alraziqi AM. A classifier to detect tumor disease in brain MRI brain images. *ACM International Conference on Advances in Social Networks Analysis and Mining;* 2012. p. 1–6.
5. Bauer S, Wiest R, Nolte L-P, Reyes M. A survey of MRI based medical image analysis for brain tumor studies. *Physics in Medicine and Biology.* 2013; 58:97–100. <https://doi.org/10.1088/0031-9155/58/13/R97>.
6. Lee CH, Schmidt M, Murtha A, Bistriz A, Sander J, Greiner R. Segmenting brain tumors with conditional random fields and support vector machines; 2017. p. 1–10.
7. Samantaray M, Panigrahi M, Patra KC, Panda AS, Mahakud R. An adaptive filtering technique for brain tumor analysis and detection. *International Conference on Energy Communication, data analysis and soft computing;* 2017. p. 1–5.
8. Saha BN, Ray N, Greiner R, Murtha A, Zhang H. Quick detection of brain tumors and edemas: A bounding box method using symmetry. *Computerized Medical Imaging and Graphics.* 2012; 36:95–107. <https://doi.org/10.1016/j.compmedimag.2011.06.001>.
9. Wu W, Chen AY, Zhao L, Corso JJ. Brain tumor detection and segmentation in a CRF (conditional random fields) framework with pixel-pairwise affinity and super pixel-level features. *International Journal of Computer Assisted Radiology and Surgery.* 2014; 9:241–53. <https://doi.org/10.1007/s11548-013-0922-7>.
10. Subbanna NK, Precup D, Collins DL, Arbel T. Hierarchical probabilistic gabor and MRF segmentation of brain tumors in MRI volumes. *Medical image computing and 880 Pattern Anal Application.* 2017; 20:871–81.
11. Chowdhry BS, Faisal A. Telemedicine modernization and expansion of health care systems. *Info Tech Consultants;* 2013. p. 105–24.
12. Madai VI, von Samson-Himmelstjerna FC, Bauer M, Stengl KL, Mutke MA. Ultrahigh-field MRI in human ischemic stroke - A 7 Tesla Study. *PLoS ONE.* 2012; 7(5). <https://doi.org/10.1371/journal.pone.0037631>.
13. Wang T, Cheng I, Basu A. Fluid vector flow and applications in brain tumor segmentation. *IEEE Transactions on Biomedical Engineering.* 2009; 56:781–9. <https://doi.org/10.1109/TBME.2009.2012423>.
14. Usman K, Rajpoot K. Brain tumor classification from multi-modality MRI using wavelets and machine learning. *Pattern Analysis and Applications.* 2017; (20):871–81. <https://doi.org/10.1007/s10044-017-0597-8>.
15. Van der Kleij LA, de Bresser J, Hendrikse J, Siero JCW, Petersen ET, De Vis JB. Fast CSF MRI for brain segmentation; Cross validation by comparison with 3D T-based brain segmentation methods. *PLoS ONE.* 2018; 13(4). <https://doi.org/10.1371/journal.pone.0196119>.

16. Sezgin M, Sankar B. Survey over image thresholding techniques and Quantitative performance evaluation. *Journal of Electronic Imaging*. 2004; 13(1):146–65. <https://doi.org/10.1117/1.1631315>.
17. Das S, Siddiqui NN, Kriti N, Tamang SP. Detection and area calculation of brain tumour from MRI images using MATLAB. *International Journal of Multimedia and Ubiquitous Engineering*. 2017; 4(1):1–12. <https://doi.org/10.14257/ijmue.2017.12.12.01>.
18. Saeed S, Naqvi SMR. Detection of brain cancer using MATLAB techniques. *Journal of Medical Imaging and Health Informatics*. 2017; 7(6):1454–60. <https://doi.org/10.1166/jmihi.2017.2187>.
19. Saeed S. Technique for tumour detection upon brain MRI image by utilizing support vector machine. *Quaid-E-Awam University Of Engineering, Science and Technology*. 2018; 16(1):37–42.
20. Saeed S, Noor SA. Analysis of brain cancer due to the usage of mobile phone. *Mehran University of Engineering Journal*. 2017; 36(3):609–20. <https://doi.org/10.22581/muet1982.1703.17>.
21. Saeed S. Estimation of cerebrum cancer using latest technology of mobile phone. *Journal of Information and Communication Technology*. 2015; 9(1):23–32.
22. Mihara H, Funatomi T, Tanaka K, Kubo H. 4D light field segmentation with spatial and angular consistencies. *Ministry of Education, Culture, Sports, Science and Technology*; 2018. p. 1–8.
23. Erickson MA, Nicolazzoc JA, Banks WA. Commentary on the 2018 Named Series on blood-brain interfaces: Roles of neuro immuno modulation in health and disease. *Brain, Behavior, and Immunity*. 2018; 74:3–6.
24. Ueno M, Chiba Y, Murakami R, Matsumoto K, Kawauchi M, Fujihara R. Blood-brain barrier and blood-cerebrospinal fluid barrier in normal and pathological conditions. *Brain Tumor Pathology*. 2016; 33(2):89–96. <https://doi.org/10.1007/s10014-016-0255-7>.
25. Kant S, Stopa EG, Johanson CE, Baird A, Silverberg GD. Choroid plexus genes for CSF production and brain homeostasis are altered in Alzheimer's disease. *Fluids and Barriers of the CNS*. 2018; 15(34):1–10. <https://doi.org/10.1186/s12987-018-0120-7>.
26. Joyce M, Laing AJ, Mullet H, Mofidi A, Tansey D, Connolly CE, McCabe, JP. Multiple schwannomas of the posterior tibial. *Nerve Foot Ankle Surgery*. 2000; 8:101–3. <https://doi.org/10.1046/j.1460-9584.2002.00290.x>.
27. Jiana WX, Zhangb Z, Chub SF, Pengb Y, Chen NH. Potential roles of brain barrier dysfunctions in the early stage of Alzheimer's disease. *Brain Research Bulletin*. 2018; 142:360–7. <https://doi.org/10.1016/j.brainresbull.2018.08.012>.
28. Gelb S, Stock AD, AnziS, Putterman C, Ben-Zvi A. Mechanisms of neuropsychiatric lupus: The relative roles of the bloodcerebrospinal fluid barrier versus blood-brain barrier. *Journal of Autoimmunity*. 2018; 91:34–44. <https://doi.org/10.1016/j.jaut.2018.03.001>.
29. Horowitz G, Fliss DM, Margalit N, Wasserzug O, Gil Z. Association between cerebrospinal fluid leak and meningitis after skull base surgery. *Otolaryngology-Head and Neck Surgery*. 2011; 145:689–93. <https://doi.org/10.1177/0194599811411534>.