



Cough-Based Lung Infection Detection Using Deep Learning

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ABSTRACT

Cough sounds are rich in acoustic features that can reveal underlying respiratory issues. This project aims to develop an automated system for detecting lung infections from cough audio recordings. Using deep learning, particularly Convolutional Neural Networks (CNNs), we extract and classify cough patterns.The audio recordings undergo preprocessing steps, including noise reduction and normalization.Mel-spectrogram representations are generated from these recordings for feature-rich input.Our CNN model learns to differentiate between healthy and infection-related cough sounds.The dataset includes both healthy and infected cough samples, labeled accordingly. We evaluate the model's performance using metrics like accuracy, precision, recall, and F1-score.Our approach demonstrates high accuracy distinguishing infected coughs from healthy ones.Such a non-invasive, audio-based diagnostic tool can aid early detection and remote health monitoring. The system's potential lies in screening large populations, especially in resource-limited settings. Future work involves augmenting the dataset and exploring more robust feature extraction methods.Integration into mobile health applications could make this solution widely accessible. Ultimately, this project highlights the power of deep learning in biomedical acoustics for public health. The findings indicate a promising avenue for rapid, affordable, and scalable lung infection detection.

Keywords: ResNet-18, MFCC, Mel Spectrogram, CNN

1-INTRODUCTION

Lung infections, including pneumonia and tuberculosis, are major global health concerns. Early detection and diagnosis of these infections are critical for effective treatment and improved patient outcomes. Traditional diagnostic methods, such as chest X-rays and laboratory tests, can be expensive, time-consuming, and not readily accessible in all regions. In contrast, cough sounds carry valuable information about the condition of the respiratory system. With the advancement of artificial intelligence and deep learning, analyzing cough sounds presents a promising alternative for noninvasive lung infection detection. This project aims to develop an automated deep learning system that can classify lung infections based on cough audio recordings. We leverage Convolutional Neural Networks (CNNs) to analyze mel-spectrogram representations of cough sounds. This approach offers a cost- effective, fast, and scalable screening

tool that can potentially aid in the early detection of lung infections, especially in low-resource settings. Through this research, we aim to highlight the potential of integrating acoustic features with deep learning to support healthcare diagnostics and improve public health outcomes.

Existing System:

In the existing system or the approach followed now is a time consuming process and need to consult a doctor for checkup which is again a worthy and time taking process. In the existing Model where algorithms used only few extraction features in which rate of decay was absent and gives you inaccurate results. There are many pulmonary diseases which cause to death such as COPD, Asthma, Pertussis, Pneumonia, etc. It is prevalent mainly in developing countries where it is difficult to diagnose due to the lack of healthcare facilities and medical professionals. Hence, a low-cost, quick and easily accessible solution is needed to classify the diseases., etc.

Proposed System:

In this project, we're using a collection of cough sounds to figure out if someone might have a lung infection. To make this work, we collect a bunch of audio recordings of people coughing. Then, we look closely at the different aspects of these cough sounds. After that, we use a deep learning algorithm ResNet-18 to learn from all those cough sounds and to recognize patterns. Once the deep learning algorithm learned enough, we set it up on a website using Flask. Now, anyone can go to the website, upload a recording of their cough, and the system will tell them if it thinks they might have a lung infection. It's like quick and easy checkups without having to go to the doctor.

2-RELATED WORK

Survey:

In recent years, there has been a surge of interest in leveraging deep learning techniques for detecting lung infections through cough sound analysis. Researchers have developed models that utilize audio-based features, such as Mel-frequency cepstral coefficients (MFCCs) and spectrograms, to train convolutional neural networks (CNNs) and recurrent neural networks (RNNs) for classifying cough sounds. Several studies have explored the potential of cough sounds as reliable biomarkers for respiratory diseases, highlighting their role in distinguishing infections like pneumonia, COVID-19, and bronchitis. While some works have focused on integrating multimodal data (audio and clinical) to improve accuracy, others have emphasized realtime deployment on smartphones and edge devices.



Despite promising results, challenges remain in ensuring dataset diversity, generalizability, and robustness in noisy environments. This project builds upon these insights to create a comprehensive and deployable system for cough-based lung infection detection.

3-REQUIREMENT ANALYSIS

Functional Requirements:

Data Collection And Preprocessing:

This step involves gathering audio recordings of cough sounds from various sources, ensuring they are labeled correctly, and then cleaning and processing these recordings to remove noise and standardize the data for use in the deep learning model.

• Deep Learning Model Development:

This phase focuses on designing and training a neural network that can learn to distinguish between healthy and infected cough sounds. It involves selecting the appropriate architecture, configuring the model's parameters, and training it on the preprocessed data.

• Model Evaluation And Validation:

In this step, the model's performance is tested using separate datasets to ensure it can accurately detect lung infections. Metrics like accuracy, precision, recall, and F1-score are computed to validate the model's effectiveness.

• Integration And Development:

Here, the trained deep learning model is integrated into a larger application or system, such as a mobile app or web-based tool, making it accessible for users to input cough samples and receive diagnostic feedback.

• Data Storage and Security:

All collected and processed data, including cough audio files and diagnostic results, must be securely stored to ensure privacy and meet regulatory standards. This includes implementing secure databases and access controls.

Non-Functional Requirements:

Non-functional requirements are essential for ensuring that the system not only works technically but also meets real-world usage demands. They guarantee that the system is secure, reliable, and user-friendly, which is critical for handling sensitive health data and for adoption by patients and healthcare providers. These requirements ensure the system can scale to accommodate more users, integrate with existing healthcare tools, and remain accessible to all users, making it a practical and trusted tool in real-world healthcare environments.

Scalability

The system should be designed to handle an increasing number of users and data volumes over time without performance issues. It should be able to expand and adapt as more cough samples and user data are collected.

Usability

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The interface and features should be intuitive and user-friendly, enabling users to easily navigate and use the system with minimal training. It should also provide clear instructions and feedback to guide the user.

4-DESIGN

System Architecture:

The system architecture starts with users submitting cough audio recordings via a web or mobile interface. These audio samples are preprocessed to remove noise and extract features, ensuring they are standardized for accurate analysis. The preprocessed data is then forwarded to a dedicated deep learning model server, which predicts whether a lung infection is likely. The backend receives these predictions and processes them further, validating the results and storing them securely in an encrypted database. The system then returns diagnostic results and insights to the user interface in real-time, providing clear and actionable feedback. A robust security layer ensures all data transmissions are encrypted and privacy is maintained at every step. The architecture also includes scalability provisions to handle growing numbers of users and data submissions efficiently. To ensure reliability, the system is designed with redundancy and error continuous handling for availability. Interoperability modules enable seamless integration with existing healthcare systems, supporting electronic health records and data sharing. Finally, architecture prioritizes usability accessibility, making it intuitive for both patients and healthcare professionals.



System Architecture

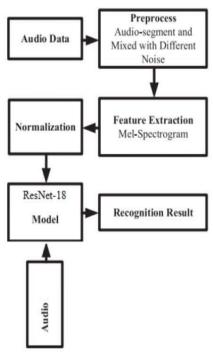


Fig. 4.1.1.1 System Architecture

Technical Architecture:

The technical architecture of this project comprises a user-friendly front-end application built with web or mobile frameworks that allows users to easily upload cough audio samples. These samples are securely transmitted over HTTPS to the backend server, where they undergo preprocessing steps such as noise filtering, normalization, and feature extraction to transform them into Mel-spectrogram representations. The processed data is then passed to a deep learning inference engine—typically implemented using Python and frameworks like TensorFlow or PyTorch—which performs real-time classification of the cough as either indicative of lung infection or not. The backend server, built using Flask or FastAPI, handles incoming requests.

It manages, preprocessing, and communicates with the deep learning model for predictions. Predictions, along with metadata, are stored in a secure database like PostgreSQL, ensuring data integrity and confidentiality through encryption and access controls. Scalability is addressed containerization with Docker and orchestration using Kubernetes, enabling the system to handle increased load efficiently. Additionally, the architecture integrates with healthcare systems via secure APIs, supporting interoperability with electronic health records and other healthcare platforms. Security and privacy are reinforced by implementing authentication and authorization protocols, ensuring only authorized users can access or upload data. The architecture's modular design allows for easy maintenance and updates, and it is complemented by comprehensive monitoring and logging systems to detect issues and optimize performance over time.



TECHNICAL ARCHITECTURE

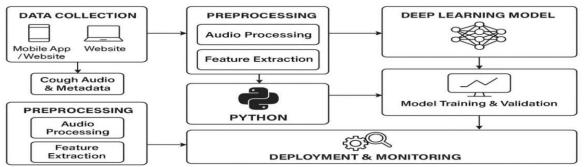


Fig. 4.1.2.1 Technical Architecture

5-IMPLEMENTATION

Libraries

1. Librosa

Librosa is a powerful library for audio analysis and feature extraction. It's used to load audio files and generate Mel-spectrograms from cough sounds, essential for feeding structured data into the deep learning model.

2. Numpy

Numpy is a fundamental package for numerical computing in Python. It's used for handling arrays and numerical data, including the transformation of audio features like Mel-spectrograms.

3. Skimage(scikit-image)

The skimage module is used for image processing, specifically resizing the Mel-spectrograms to a consistent shape (128x128), which ensures

compatibility with the deep learning model's input requirements.

4. Tensorflow

TensorFlow is a popular deep learning framework that enables loading, training, and running neural network models. In this project, it's used to load the trained cough classifier model and make predictions.

5. Matplotlib.pyplot

Matplotlib is a plotting library used to visualize data. In this code, it's specifically used to create and save pie charts that visually represent the infection prediction results.

6. *Matplotlib.use*('Agg')

This line ensures that Matplotlib can generate plots in environments without a display (like servers), by switching to a non-GUI backend ('Agg').

6. SCREENSHOTS

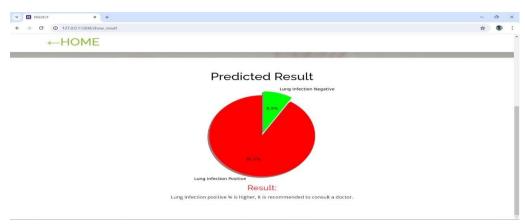


Fig:6.1 Home Page



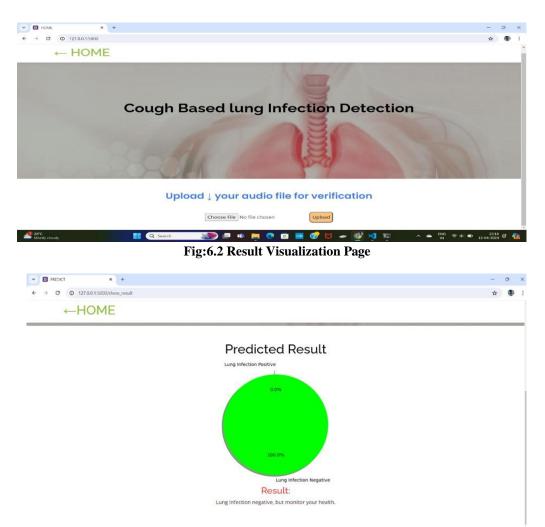


Fig:6.3 Result Visualization Page

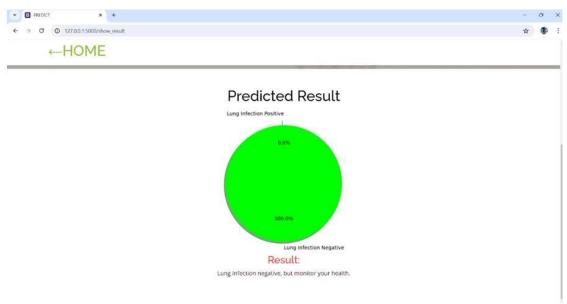


Fig:6.4 Result Visualization Page

7. CONCLUSION

The lung infection detection system using deep



learning is a sophisticated solution designed to address the critical healthcare need for rapid and non-invasive diagnosis of lung infections. User interaction is prioritized through intuitive interfaces, allowing users to easily record cough data, initiate analysis, and receive timely detection results. The user-friendly design enhances accessibility and encourages widespread adoption of the system.

REFERENCES

- [1] J. Harvill, Y. Wani, Mustafa Alam, Narendra Ahuja, M. Hasegawa-Johnsor, David Chestek, David G Beiser, (2022). Estimation Of Respiratory Rate From Breathing Audio DOI: 10.1109/EMBC48229.2022.9871897
- [2] Kumar, A., Abhishek, K., Chakraborty, C., & Kryvinska, N. (2021). Deep Learning And Internet Of Things Based Lung Ailment Recognition Through Coughing Spectrograms DOI: 10.1109/access.2021.3094132
- [3] G. Augustinov, P. Fischer, Volker Gross, Ulrich Koehler, K. Sohrabi, and Seyed Amir Hossein Tabatabaei. (2020). Automatic Detection And Classification Of Cough Events Based On Deep Learning. https://doi.org/10.1515/cdbme-2020-3083
- [4] M. Jasmine Pemeena Priyadarsini, Ketan kotecha, G. K. Rajini, K. Hariharan, K. Utkarsh Raj, K. Bhargav Ram, V. Indragandhi ,V. Subramaniyaswamy, and Sharnil Pandya. (2023). Lung Diseases Detection Using Various Deep Learning Algorithms. https://doi.org/10.1155/2023/3563696
- [5] Botha, G. H. R., Theron, G., Warren, R. M., Klopper, M., Dheda, K., van Helden, P. D., & Niesler, T. R. (2018). Detection of tuberculosis by automatic cough sound analysis.
- Physiological Measurement, 39(4), 045005. doi:10.1088/1361 6579/aab6d0
- [6] Ramesh, V., Vatanparvar, K., Nemati, E., Nathan, V., Rahman, M. M., & Kuang, J. (2020). CoughGAN: Generating Synthetic Coughs that Improve Respiratory Disease Classification*. 2020 42nd AnnualInternational Conference of the IEEEEngineeringinMedicine doi:10.1109/embc44109.2020.917559
- [7] & Biology Society (EMBC). Md. Nahiduzzaman, Md. Omaer Faruq Goni, Md. Shamim Anower (Member, Ieee), Julfikar Haider, Saravanakumar Gurusamy (Member, Ieee), Rakibul Hassan, And Md. Rakibul Islam. (2021). A Novel Method For Multivariant Pneumonia Classification Based On Hybrid CNN-PCA Based Feature Extraction Using Extreme Learning Machine 10.1109/ACCESS.2021.3123782
- [8] With CXR Images. DOI: Sharan, R. V., Berkovsky, S., Navarro, D. F., Xiong, H., & Jaffe, A. (2021). Detecting pertussis in the pediatric population using respiratory sound events and

Volume 13, Issue 3, 2025

CNN. Biomedical Signal doi:10.1016/j.bspc.2021.102722

[9] Botha, G. H. R., Theron, G., Warren, R. M., Klopper, M., Dheda, K., van Helden, P. D., & Niesler, T. R. (2018). Detection of tuberculosis by automatic cough sound analysis.

Physiological Measurement, 39(4), 045005. doi:10.1088/1361-6579/aab6d0

- [10] Ramesh, V., Vatanparvar, K., Nemati, E., Nathan, V., Rahman, M. M., & Kuang, J. (2020). *CoughGAN:* Generating Synthetic Coughs that Improve Respiratory Disease Classification*. 2020 42nd Annual International Conference of the IEEE Engineering in Medicine & Biology Society (EMBC). doi:10.1109/embc44109.2020.917559
- [11] Md. Nahiduzzaman, Md. Omaer Faruq Goni, Md. Shamim Anower (Member, Ieee), Julfikar Haider,Saravanakumar Gurusamy (Member, Ieee), Rakibul Hassan, And Md. Rakibul Islam.(2021). A Novel Method For Multivariant Pneumonia Classification Based On Hybrid CNN-PCA Based Feature Extraction Using Extreme Learning Machine With CXR Images. DOI:10.1109/ACCESS.2021.3123782
- [12] Sharan, R. V., Berkovsky, S., Navarro, D. F., Xiong, H., & Jaffe, A. (2021). Detecting pertussis in the pediatric population using respiratory sound events and CNN. Biomedical Signal Processing and Control, 68, 102722. doi:10.1016/j.bspc.2021.102722
- [13] Coppini, G., Diciotti, S., Falchini, M., Villari, N., & Valli, G. (2003). Neural networks for computer-aided diagnosis: detection of lung nodules in chest radiograms. IEEE Transactions information Technology in Biomedicine, 7(4), 344–357. doi:10.1109/titb.2003.821313
- [14] Basu, V., & Rana, S. (2020). Respiratory diseases recognition through respiratory sound with the help of deep neural network. 2020 4th International Conference on Computational Intelligence and Networks (CINE). doi:10.1109/cine48825.2020.234388.