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Glaucoma Diagnosis Based on Retinal Fundus Image: A Review

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Abstract

Glaucoma is one of the most dangerous eye diseases. It occurs as a result of an imbalance in the drainage and flow of the retinal fluid. Consequently, intraocular pressure is generated, which is a significant risk factor for glaucoma. Intraocular pressure causes progressive damage to the optic nerve head, thus leading to vision loss in the advanced stages. Glaucoma does not give any signs of disease in the early stages, so it is called "the Silent Thief of Sight". Therefore, early diagnosis and treatment of retinal eye disease is extremely important to prevent vision loss. Many articles aim to analyze fundus retinal images and diagnose glaucoma. This review can be used as a guideline to help diagnose glaucoma. It presents 63 articles related to the applications of fundus retinal analysis. Applications of the glaucomatous image classification are improving fundus images by locating and segmenting the optic disc, optic cup, fovea, and blood vessels. The study also presents datasets, metrics, and parameters that indicate the changes in retina structure and the steps and results for each paper.

Keywords: Retinal Fundus Image, Glaucoma Screening, Cup-Disc-Ratio (CDR), Optic Nerve Head (ONH), Joint Segmentation Optic Disc and Optic Cup.

دراسة في تشخيص مرض الكلوكوما بالاعتماد على صورة قاع الشبكية

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الخلاصة

الكلوكوما (الماء الاسود او الماء الازرق) احد اخطر امراض العين. يحدث نتيجة خلل في تصريف وتدفق سائل الشبكية. و بالتالي يتولد ضغط داخل العين. و هو عامل خطورة مهم للإصابة بالكلوكوما. يتسبب الضغط داخل العين في تلف تدريجي لرأس العصب البصري ، مما يؤدي إلى فقدان البصر في المراحل المتقدمة. لا يعطي الجلوكوما أي علامات للمرض في المراحل المبكرة ، لهذا يطلق عليه "سارق البصر المتقدمة. لا يعطي الجلوكوما أي علامات للمرض في المراحل المبكرة ، لهذا يطلق عليه "سارق البصر في المراحل المتقدمة. لا يعطي الجلوكوما أي علامات للمرض في المراحل المبكرة ، لهذا يطلق عليه "سارق البصر الصامت" لذلك فإن التشخيص المبكر وعلاج أمراض الشبكية أمر بالغ الأهمية لمنع فقدان البصر. تهدف العديد من المقالات إلى تحليل صور شبكية قاع العين لتشخيص الكلوكوما. يتعلم الدراسة كدليل ارشادي يساعد في تشخيص مرض الكلوكوما. تعرض الدراسة (63) بحث يتعاق بتطبيقات تحليل قاع

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الشبكية. المفاهيم الاساسية او تطبيقات تصنيف صور الكلوكوما هي في تحسين صور قاع العين، تحديد و تقسيم القرص البصري، والكأس البصري، والنقرة، والأوعية الدموية. تعرض الدراسة أيضًا قواعد البيانات، مقاييس الاداء، المعايير التي تشير إلى التغييرات في بنية شبكية العين، كذلك خطوات ونتائج كل مقالة.

1. Introduction

According to the World Health Organization (WHO), the number of people suffering from glaucoma is estimated at 64 million in 2016 [1], 80 million in 2020 [2], and this number will increase to 95 million by 2030 [1], and 110 million by 2040 [3]. It is worth mentioning that glaucoma disease is responsible for about 12% of all people who lose their sight [3]. Therefore, glaucoma is considered the second leading cause of blindness in the world [4]. The large numbers of diseases are caused by the fact that glaucoma is a silent disease, and the disease can only be identified after an increase in the intraocular pressure (due to disorder in the flow of the eye fluid system) and destruction of some cells of the optic nerve. This is in the early stages. Generally, a person with glaucoma has several conditions such as increasing the intraocular pressure (IOP), damaging the optic nerve head (ONH), and losing the visual field [1].

For the reasons above, it is necessary to detect glaucoma at an early stage because glaucoma disease is a severe disorder. The damage it causes is irremediable. It leads to perpetual loss of sight if not cured promptly. There are no perceptible indications in its preliminary stages. There is no prophylactic treatment for glaucoma. Analyzing the optic nerve head is the essential and critical factor in diagnosing glaucoma in the early stages [5].

In recent years, computer-aided diagnosis (CAD) systems based on medical images have been in increasing demand since the retina is the visible portion of the nervous system that connects directly to the brain. A retina provides vital information and features for diagnosing several eye diseases, including cataracts, glaucoma, diabetic retinopathy, and age-related macular degeneration. This information and characteristics are the color, size, and shape of parts or regions of the retina, such as Optic Disc, Optic Cup, Blood Vessels, Neuroretinal Rim, and Fovea [2]. Figure 1 shows the regions of the retinal fundus image.

This paper presents a comprehensive review of a collection of recent articles (Figure 2). The period covered by the published articles was from 2016 to 2021. These articles are considered noteworthy for our review. The review was based on the academic databases used to collect the articles, such as PubMed, Springer, Scopus, Google Scholar, IEEE Xplore, Science Direct, and Web of Science. Sections of the study provide guidelines to help researchers understand ophthalmic applications such as retinal fundus image enhancement, segmentation, and classification.



Figure 1-Structures of the retina fundus image.



Figure 2-Category of articles per application.

2. Parameters Analysis

In glaucoma, intraocular pressure (IOP) causes several changes in the retina of the eye, especially in the area of the optic nerve head (ONH). Changes influence the level of vision because the ganglion cell axons pass through ONH to transmit images from the eye to the brain. Most retinal regions in Figure 1 are affected by these changes [6]. One of the most significant changes in glaucoma is the deformity that occurs in the optic disc (OD) and optic cup (OC) regions .This change leads to the occurrence of what is called "cupping," where the OD size increases and the thickness of the neuroretinal rim (NRR) decreases. Several parameters (structural indications) detect these changes and help to diagnose the glaucomatous image. For example, the Cup-to-Disc Ratio (CDR) parameter and the SNT rule recognize cupping [7]. Table 1 shows a set of parameters that are used to distinguish between healthy and glaucomatous images.

Parameters	Abbreviation	Formula	Description
Vertical Diameter Cup to Disc Ratio [8]	CDR / VCDR	Vertical Cup Diameter (VCD) Vertical Disc Diameter (VDD)	The ratio of the vertical diameter of the OC to the vertical diameter of the OD
Horizontal Diameter Cup to Disc Ratio [9]	HCDR	Horizontal Cup Diameter (HCD) Horizontal Disc Diameter (HDD)	The ratio of the horizontal diameter of the OC to the horizontal diameter OD
Horizontal to Vertical CDR [8]	H-V CDR	Horizontal CDR Vertical CDR	The ratio of the horizontal CDR to the vertical CDR
Cup to Disc Area Ratio [9]	CDAR	Cup Area Disc Area	The ratio of the area of the OC to the area of the OD
Rim to Disc Area Ratio [10]	RDAR	$\frac{Rim Area}{Disc Area} = \frac{Aree(Disc - Cup)}{Aree(Disc)}$	The ratio of the area of the Neuroretinal Rim" (NRR) to the area of the OD
Rim to Disc Ratio [11]	RDR	vertical neuro retinal rim(VNRR Vertical Disc Diameter (VDD)	The ratio of the VNRR (thickness of superior part only) to the vertical diameter of the OD
Rim Area Ratio [2]	RAR	InferiorArea + Superior Area Nasal Area + Temporal Area	RAR is determined by removing the optical cup from the area of the optic disc.
Inferior, Superior, Nasal, and Temporal Rule [12]	ISNT Rule	Inferior> Superior> Nasal> Temporal	Healthy must keep the relation among the regions in descending order

Table 1-Set of parameters analysis

Cup shape /Hausdorff's fractal dimension [11]	HFD	$HFD = \lim_{\epsilon \to 0} \frac{\log N(\epsilon)}{\log \epsilon^{-1}}$	$N(\epsilon)$ represents the number of hyper-cubes that fills the object with Euclidean dimension and length ϵ
Disc damage likelihood scale [9]	DDLS	Mimum width of Rim Disc Diameter	The severity of Glaucoma is calculated by DDLS.
Glaucoma Risk Index [13]	GRI	GRI = 6.8375 - 1.1325 (PC1) - 1.6500 (PC2) + 2.7225 (PC3) + 0.6750 (PC4) + 0.6650 (PC5)	PCA (Principal Component analysis) healthy: GRI =(8.68 ± 1.67) Glaucomatous: GRI =(4.84 ± 2.08)

3. Retinal Fundus Image Datasets

There are some types of images used to diagnose diseases: Optical Coherence Tomography (OCT), Heidelberg Retinal Tomography (HRT), and Retinal Fundus Image (RFI). OCT and HRT are three-dimensional images. Unfortunately, these images are not widely available. The unavailability comes for two reasons. First, the devices used to capture images are expensive. Second, the devices require specialists to work on them [14]. However, retinal fundus images are two-dimensional images, which are widespread, and databases of these kinds of retinal images are available to researchers and specialists because of the low cost of the devices for capturing images and their presence in most ophthalmology centers. There are several datasets for RFI. The datasets are either public or private. For the reasons listed above, this study's focus on public datasets for RFI is due to the availability of datasets online. Researchers can make efficient comparisons between them, so researchers can benefit from them in their work. Table 2 shows the set of available datasets. Some existing datasets have been updated and have more than one version. This research referred to the number of images used in each article for each dataset because some researchers used just a part of the dataset or just a few images from the dataset.

Table 2- widely used available datasets.					
Dataset	Tota l	Glaucomato us	Norm al	Information of Ground Truth	Link
ACRIMA [15]	705	396	309	Classification of normal and glaucomatous	https://figshare.com/s/c2d31f850af 14c5b5232
HARVARD [16]	1542	756	786	Classification of normal and glaucomatous	https://dataverse.harvard.edu/datas et.xhtml?persistentId=doi:10.7910/ DVN/1YRRAC
ORIGA [17]	650	168	482	Classification of normal and glaucomatous	https://github.com/Barcelona- Technology- School/InnoSpark- edir/tree/main/Datasets/ORIGA/gla ucoma
sjchoi86-HRF [18]	401	101	300	Classification of normal and glaucomatous	https://github.com/yiweichen04/ret ina_dataset
JSIEC /kaggle [19]	51	13	38	Classification of normal and glaucomatous	https://www.kaggle.com/linchunda n
GlaucomaDB [11], [20]	100	48	52	Classification of normal and glaucomatous	http://biomisa.org/index.php/glauc oma-database/
REFUGE-1 [21]	120 0	120	1080	 Classification images Segmentation for OC and OD Location of Fovea 	https://refuge.grand- challenge.org/Download/
REFUGE-2 [21]	160 0	160	1440	 Classification images Segmentation for OC and OD Location of Fovea 	https://refuge.grand- challenge.org/REFUGE2Downloa d/
LAG [22]	5824	2392	3432	 Classification images Attention maps 	https://github.com/smilell/AG- CNN

Table 2-Widely used available datasets.

DRISHTI-GS1 [23]	101	70	31	 Classification images Soft matt segmenting cup and disc 	http://cvit.iiit.ac.in/projects/mip/dri shti-gs/mip-dataset2/enter.php
[23]				•CDR values and Disc center	shti-gs/imp-dataset2/enter.php
				Classification images	
HRF [24]	45	15	15	 Segmentation Vessel and 	https://www5.cs.fau.de/research/da
IIII [2+]	т.)	15	15	FOV	ta/fundus-images/
DIM ONT 1				•Center and Radius for OD	1.4
RIM-ONE-r1 [25]	169	51	118	 Classification images Segmentations optic disc 	http://medimrg.webs.ull.es/researc h/reitnal-imaging/rim-one/
RIM-ONE-r2				•Classification of images into	http://medimrg.webs.ull.es/researc
[25]	455	200	255	normal and glaucomatous	h/retinal-imaging/rim-one/
RIM-ONE-r3				Classification images	
[26]	159	74	85	• Segmentations of Cup and	http://medimrg.webs.ull.es/rim- one-release-3-is-finally-here/
[20]				disc	-
RIM-ONE-DL				 Classification images 	http://medimrg.webs.ull.es/rim- one-dl-a-unified-retinal-image-
[27]	485	172	313	•Segmentations of Cup and	database-for-assessing-glaucoma-
[-/]				disc	using-deep-learning/
				• Each image has six	https://deepblue.lib.umich.edu/data
RIGA [28]	750			boundaries detection for OC	/concern/data_sets/3b591905z
				and OD • Contour OD by 36 points	
DRIONS-DB	110			 Software provided OD 	http://www.ia.uned.es/~ejcarmona/
[29]	110			contours	DRIONS-DB.html
INSPIRE-AVR				 Segmentation Optic Disc, 	https://medicine.uiowa.edu/eye/ins
[30]	40			Vessel and Arterio-venous	pire-datasets
				ratio	-
CHASE_DB1[31	28			Vessel Segmentation	https://blogs.kingston.ac.uk/retinal/ chasedb1/
1					http://www.aldiri.info/Image%20D
ONHSD [32]	99			Optic Disc (OD) segmentation	atasets/ONHSD.aspx
	40			•Vessel Segmentation	http://www.isi.uu.nl/Research/Data
DRIVE [33]				•Mask FOV	bases/DRIVE/
				• 13 diseases • 81 locations	http://cecas.clemson.edu/~ahoover/
STARE [34][35]	402			optic disc, 10 locations veins	stare/
				and arteries, 20 blood vessels •Healthy and diseased	
	120		7 1		http://www.damianjjfarnell.com/?p
ARIA [36]	138		51	OD	age_id=276
				•Location of Fovea	
				•File signs of diabetic	1
DIARETDB0 [37]	130		20	retinopathy ●software to annotate and	https://www.it.lut.fi/project/imager et/diaretdb0/index.html
[37]				inspect	
				• Images point to signs	
DIARETDB1	89		5	diabetic	https://www.it.lut.fi/project/imager
[38]	07		5	•software to annotate and	et/diaretdb1/
				inspect	https://www.adois.pot/on/third
MESSIDOR [39]	1200			Spreadsheet grade and risk of macular edema	https://www.adcis.net/en/third- party/messidor/
MEGGIDOD				Spreadsheet grades and	
MESSIDOR-2 [40]	1748			referable diabetic macular	https://www.adcis.net/en/third- party/messidor/
[+0]				edema grades	
ROC [41]	100			Diabetic retinopathy	http://webeye.ophth.uiowa.edu/RO C/
•	3400			5 levels for grading of the	https://www.kaggle.com/c/diabetic
Kaggle [42]	0			"Diabetic Retinopathy" (DR)	-retinopathy-detection/overview

4. Performance Metrics

The most crucial applications in glaucoma diagnosis involve classification and segmentation. They require metrics for evaluating a method's efficiency. In general, the metrics for segmentation measure the degree of overlap or similarity between the segmentation result and the ground truth, while the metrics for classification measure the number of images classified correctly. Most metrics depend on True Positive (TP), False Negative (FN), True Negative (TN), and False Positive (FP). They represent the results of segmentation (in pixels) and classification (in the number of images). Both operations (segmentation and classification) can be seen as classifications since the segmentation (binary classification) divides pixels into classes. There are two deceptions in classification and segmentation contained within these terms. This work distinguishes between all metrics used for segmentation by putting x refers to pixel $(*_x)$ such as sensitivity for segmentation (SEN_x) versus for classification (SEN). Table 3 shows the segmentation and classification metrics.

Table 3-Segmentation and classification metrics			
Metrics	Abbreviation & Formula		
Sensitivity/ Recall	$SEN_x = TP_x/(TP_x + FN_x)$		
Specificity	$SPE_x = TN_x / (TN_x + FP_x)$		
Accuracy	$ACC_x = (TP_x + TN_x)/(TP_x + FN_x + TN_x + FP_x)$		
Precision	$PRE_x = TP_x / (TP_x + FP_x)$		
False Positive Rate	$FPR_x = FP_x/(FP_x + TN_x)$		
Dice/F- score	$DICE_x = 2 * TP_x / (2 * TP_x + FP_x + FN_x)$		
Intersection-Over-Union / Jaccard	$IoU_x = TP_x / (TP_x + FP_x + FN_x)$		
Overlapping Error	$OER_x = 1 - [Area(Ground \cap result)/Area(Ground \cup result)]$		
Relative Area Difference	$RAD_x = (Area(Ground) - Area(result)) / Area(result)$		
Correlation Coefficient	$CC_x = coverance(x, y) / S_x S_y$		
Absolute CDR error	$ACDRE_x = CDR_{result} - CDR_{Ground Truth} $		
Area Under the Curve	AUC_x = A curve that represents the nonlinear function between Sensitivity and (1- Specificity)		
Average Boundary Distance	$AVRBD_x = \frac{1}{N} \sum_{\varphi=1}^{\varphi_N} \sqrt{\left \left(D_G^{\varphi} \right)^2 - \left(D_R^{\varphi} \right)^2 \right }$, B _G , B _R boundaries ground truth		
	and result. (D_G^{ϕ}) and (D_R^{ϕ}) distances from the points on (B_G) and (B_R) to the centroid of (B_G) , in the direction of ϕ_N where N=4, $\phi = 270^{\circ}$, 180°, 90° and 0°		

Table 3-Segmentation and classification metrics
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5. Enhancement Retinal Image

Most computer vision and image processing applications apply a preprocessing step, which improves the raw image and makes it more suitable for work, such as: image fusion, de-noise, de-blur, and de-haze applications ([43], [44]). Analyzing and diagnosing glaucoma based on fundus retinal images requires a preprocessing step because the low-resolution of the image with unclear details makes it difficult to diagnose a disease, particularly in automatic systems. The processes of glaucoma diagnosis are interrelated. Hence, the enhancement of the image influences the accuracy of the results of the segmentation step and so on [45]. Therefore, it is necessary to overcome the challenge of poor image resolution through image enhancement algorithms. Table 4 shows an overview of articles enhancing the retinal image.

Table 4-Overview of article	les for enhancing the	retinal image.
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Author/s	Method	Dataset
Dai et al. 2016 [46]	 Normalized convolution, domain transform 	•DRIVE (40)
Dai et al. 2010 [40]	 Image Fusion 	●DIARETDB1

	(89)
the blocky effects and the relaxed median filter	•STARE (402)
 Reducing the size of the image Enhancement luminosity by a gain matrix based on gamma correction for V channel Enhancement contrast for L channel by "Contrast Limited Adaptive Histogram Equalization" (CLAHE). 	• MESSIDOR(1200) • Private (961)
 Enhancement luminosity by gamma correction based on "Cumulative Density Function" (CDF) for the V channel. Modified the histogram based on mean Structural Similarity Index SSIM Enhanced contrast based on CLAHE to the low-frequency components in "Discrete Wavelet Transform" (DWT) 	Private (128)
Cycle-CBAM modified the CycleGAN by utilizing the "Convolutional Block Attention Module" (CBAM)	 EyePACS (88702) Private (2906)
 Created synthesized cataract-like images from a clear image by applying the mathematical haze model and refined image by CNN called CataractSimGAN De-hazing image by using CNN called CataractDehazeNet 	private (800)
Modifying "Contrast Limited Adaptive Histogram Equalization" (CLAHE) by "Modified Particle Swarm Optimization" (MPSO) For Green channel	• DRIVE (40) • STARE (40)
 Separated the image into three layers using Total-Variation The base for correcting the illumination, details for enhancing the contrast, and noise for smoothing the image 	•DIARETDB0 (130) •DIARETDB1 (89)
	 Enhancement luminosity by a gain matrix based on gamma correction for V channel Enhancement contrast for L channel by "Contrast Limited Adaptive Histogram Equalization" (CLAHE). Enhancement luminosity by gamma correction based on "Cumulative Density Function" (CDF) for the V channel. Modified the histogram based on mean Structural Similarity Index SSIM • Enhanced contrast based on CLAHE to the low-frequency components in "Discrete Wavelet Transform" (DWT) Cycle-CBAM modified the CycleGAN by utilizing the "Convolutional Block Attention Module" (CBAM) Created synthesized cataract-like images from a clear image by applying the mathematical haze model and refined image by CNN called CataractSimGAN De-hazing image by using CNN called CataractDehazeNet Modifying "Contrast Limited Adaptive Histogram Equalization" (CLAHE) by "Modified Particle Swarm Optimization" (MPSO) For Green channel Separated the image into three layers using Total-Variation The base for correcting the illumination, details for enhancing the

6. Localization Optic Disc/ Optic Nerve Head (ONH)

The optic disc (OD) is the key to identifying many diseases, so the localization of OD is an essential step for retinal fundus image analysis to reduce the time and increase the accuracy of the work [52]. In general, the OD is the bright circular region in the retinal fundus image [53]. The region of interest (ROI) is the area that contains the OD. The optic nerve head (ONH) is the other name for the OD. Some articles consider the ONH as the ROI. Table 5 shows an overview of some localization methods.

Author/s	Preprocessing	Localization	Dataset
Alghamdi et al. 2016 [52]	Subtracted the average and divided by standard deviation	Cascade classifier with CNN	MESSIDOR (1200),STARE (402), DIARETDB1 (89), DRIVE (40), Four local (4050)
Wu et al. 2016 [53]	 Removing the cross of the vessels by morphology operations Computing the gradient direction of the OD without vessels 	"Hybrid Directional Model" (HDM) by Incorporating two-directional models • "Relaxed Bi-parabola Directional Model" (R- BPDM) • "Disc Directional Model"	STARE (81), ARIA (120) MESSIDOR (1200), ROC (100) DIARETDB0 (130), DRIVE (40) DIARETDB1 (89), ONHSD (90) DRIONS (110)
Peiyuan et al. 2017 [54]	Subtracted the average and resized images	VGG CNN	STARE (400), ORIGA (650) MESSIDOR (1200)
Martinez-Perez et al. 2019 [55]	 For ONH "Reduced size of image, Created mask of the FOV by Otsu, increase the contrast Removed smaller objects such as blood vessels by using Gaussian filter 	 Otsu: multi-level thresholding Combined channels based on binary operations Selected the object with large roundness 	Private(1131) DRIVE (40) MESSIDOR (1200)

Table 5-Overview of articles for localizatio	n Optic Disc (OD)/ Optic Nerve Head (ONH).
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 For OD center: Removed blood vessels using morphological operations Selected one channel from RGB image based on Shannon information 	OD center: circular Hough	
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7. Segmentation in Retinal Fundus Image

Accurate segmentation for regions of the retinal fundus image is necessary to solve the challenge of the accuracy of diagnosing diseases in automatic systems. The segmentation step is usually performed before the classification step because the classification step analyzes specific regions within the fundus image. As seen in Figure 1, the regions of the retinal fundus image that are considered important regions based on the classification method. The regions are the optic disc (OD), optic cup (OC), blood vessel, and Fovea. The optic disc and the optic cup are the main parts in fundus images that most of the methods need to be segmented. There are several articles for segmentation fundus images. They are categorized according to the article's objective.

7.1 Segmentation Blood Vessels

Blood vessels are a vital component in the fundus image. There are some purposes for segmenting blood vessels. The first purpose is to segment vessels and study their properties and the correlation of these properties with diagnosing diseases. The extracted properties are color, size, and shape. The second purpose is to segment the vessels and track their path and curvature for extracting some cues to determine the position of the OC and OD (bending in the border of the optic cup and entering the vessels into the optic disc from the top and bottom). The third purpose is to segment blood vessels for the purpose of removing them in a precise way. Table 6 shows an overview of a set of articles that aim to segment blood vessels.

Author/s	Preprocessing	Segmentation	Perf	forma	Dataset		
Autior/s	rreprocessing	Segmentation	AUC		% SEN _x	SPE _x	Dataset
		•Multi-scale CNN supported with a modified cross-entropy		95.3 3	77.7 2	97.93	DRIVE (40)
Hu et al. 2018 [56]		function •Fully connected "Conditional Random Fields" (CRFs)	97.5 1	96.3 2	75.4 3	98.14	STARE (20)
Gu et al. 2019 [57]	Scaling image, HSV color space, Shifting randomly, Data augmentation	New "Context Extractor Network" (CE-Net)	97.7 9		83.0 9	95.45	DRIVE (40)
	Reduced image size, Normalized •Enhanced contrast by "Contrast Limited Adaptive Histogram Equalization" and		2	95.6 6			DRIVE (40)
Jin et al.		"Deformable U-Net" (DUNet)	2	96.4 1			STARE (20)
2019 [58]			98.0 4	96.1			CHASE (28)
	gamma		98.3 1	96.5 1			HRF(45)
VIIAN	•Getting Gray image by using	"N		95.2	78.5	96.7	DRIVE (40)
KHAN et al. 2021 [59]	Principal Component Analysis • Smoothing by the median	"Normalized Second-Order Derivative of anisotropic Gaussian Kernel" (NSDAGK)		95.1	78.8	96.6	STARE (20)
[37]		Gaussian Kernel" (NSDAGK)		95.2 1	96.8 2	78.75	CHASE (28)

7.2 Segmentation of the Optic Disc

This section presents a set of articles for the segmentation of the optic disc (OD), as shown in Table 7. For segmentation of the OD, the methods of localizing the OD (section 6) and segmenting blood vessels (section 7.1) can be used as preprocessing.

	Durante constant						ics %	Deteret	
Author/s	Preprocessing	Localization	Segmentation	DICE	IoU _x	ACC,	SEN,	SPE _x	Dataset
				87.2	78.6	97.7 2	81.8 7	99.66	DRIVE (40)
	•Normalizing G channel by			89.1 0	85.1	97.7 2	85.1 0	99.84	DIARETDB1 (89)
<u> </u>	subtracting	Circular Hough transform		90.5 0	83.2	95.7 9	83.1 3	99.71	CHASE_DB1 (28)
Abdullah et al. 2016	smoothing version from morphology version			91.0 2	85.1	95.4 5	85.0 8	99.66	DRIONS-DB (110)
[60]	Remove vessel by morphology			9	87.9 3	99.8 9	89.5 4	99.95	MESSIDOR (1200)
	operation			87.6 3	80.1	97.9 3	5	99.91	Private: (19)
				91.9 7	86.1	99.6 7	7	99.92	ONHSD (99)
	●Corrected			90.3 9	84.4	99.1 8	1	99.73	MESSIDOR (1200)
	 Contected illumination by Histogram Matching Normalizing Red channel by subtracting Remove vessel Improved the OD Circular boundary by 			93.0 6	87.4	7	97.0 6	99.49	DIARETDB1 (89)
Zahoor et		•Estimated the center of OD •Hough Transform		93.7 8	88.6	99.8 6	4	99.94	DRIONS-DB (110)
al. 2017 [61]				85	75.6	99.8	83.0 9	99.93	DRIVE (40)
				84.9 1		97.5	91.1 2	98.07	RIM-ONE (118)
	morphology operation			2	86.8 6	4	3	98.92	HRF (45)
	-F			2	87.8 8	3	8	99.96	Private: (111)
				2	82.1 7	7	9	99.59	DRIONS-DB (110)
		•Smoothed Green by		3	80.0 5	1	2	99.43	DRISHTI (101)
	•Resized image	opening • CLAHE	•Cropped	2	75.5 9	2	6	99.89	MESSIDOR (1200)
Ramani et al. 2020	•Binarized image •Eroded image	•Binarized images	image ●Circular	8	71.0 0	8	5	99.52	DRIVE (40)
[62]	•Multiplied bitwise •Smoothed by	•Applied pixel density	Hough •Super Pixel	0	1	U	0	99.43	CHASE_DB1 (28)
	Gaussian filter	calculation and multilevel	segmentation	3	75.4 7	1	5	99.84	INSPIRE-AVR (40)
		localization		3	80.1 8	7	1	99.90	HRF (45)
				84.4 8	74.0 4	99.6 4	85.4 7	99.82	ONHSD (90)

Table 7-Overview	of articles	for Optic Disc	(OD) segmentat	ion methods
	or articles	Tor Optic Disc	(OD) segmentat	ion memous

7.3 Segmentation of the Optic Cup

The location of the optic cup (OC) is inside the optic disc. Figure 1 shows the structure of the fundus image and refers to the OC. In the fundus images, the segmentation of the OC is the most challenging task since the OC interferes with the OD and blood vessels are present,

in addition to the distortions that are observed in this area due to the disease. This section presents a set of articles for the segmentation of the OC. Table 8 shows methods for segmenting OC.

		T (11) B	Perform	ance I	S		
Author/s	Preprocessing	Segmentation	%			Dataset	
			DICE _x	ACC _x	AVRB		
Yang et al. 2018 [63]	 Enhanced Green by morphological operations Subtracted the smoothed version from the enhanced version Inpainting blood vessels 	"Local Chan–	79.55		12.32	private (94)	
				98.61		RIM-ONE (159)	
		"Glowworm		100		DRIVE (40)	
Pruthi et al. 2020				98.75		STARE (81)	
[64]		Swarm Optimization" (GSO) algorithm	94	99.87	23.8	DRIONS-DB (110)	
		(050) algorithin		96.56		DIARETDB1 (89)	
	cropped the rectangular region around the optic disc manually	Modified the architecture of U- Net				ORIGA (650)	

7.4 Segmentation of the Optic Disc, Fovea, and Blood Vessel

This section presents several articles that aim to segment more than one part of the fundus images, such as the optic disc, fovea, and blood vessels. Table 9 shows the brief steps of the articles.

Author/	Preprocessing	Localization	Segmentation Performance M					cs %	Dataset/ Work
S	rreprocessing	Localization	Segmentation	IoU	ACC _x	SEN _x	SPE _x	PRE _x	on
Rodrigue s et al. 2017	Selected the best contrast channel	Bright region	Transforming into Haar 5th level wavelets and threshold		85				DRIVE (40)/ OD
[66]	Selected Green channel		Vessels: multi-scale Frangi based on Hessian matrices		92.6 9				DRIVE (40)/ vessels
	Selected the Green channel •Removed		 Smoothing the Green channel by morphological operations Differencing the morphology version and enhanced version Applied Otsu method 		95.3 5	75.1 7	97.2 4	73.4 0	DRIVE (40)/ vessels
Kim et al. [67]	noise (Gaussian) ●enhanced	•Binarized the enhanced version	•Enhanced contract •Removed the vessels of		99.1 8	78.2 2	99.5 4	77.1 6	DRIVE (40)/ OD
	contract (CLAHE)	•Determined circle-shaped around OD	ROI •Reconstructed the OD region by using Otsu		98.9 4	91.0 8	99.2 1		DRIONS-DB (110)/ OD
		Determining circle-shaped center vessels (ROI)	 Differencing the morphology version and flood-fill version Applied Otsu method 		99.8 0	90.6 0	99.8 5	78.4 2	DRIVE (40)/ Fovea
et al.	•Reduced the size of the		•Learned simultaneously " Intra-Structure Relational	2	99.7 9				ONHSD (99)/ OD
2021[68]	image, flipped		Knowledge" (intra-SRK),	87		90.7	99.9		MESSIDOR

horizontally the	and (inter-SRK) models		2	5	(1200)/ OD
image to the	•Combined the intra-SRK				
left side	and inter-SRK models to				
 Normalized 	create an OD-fovea model		88.4	99	MESSIDOR
the image by	•Differential evolutionary		1	,,	(1200)/ Fovea
using contrast					
stretching					

7.5 Segmentation Optic Disc and Optic Cup

There are two kinds of segmentation. The first kind is joint segmentation, where the result of segmentation contains the optic disc and the optic cup as one region. The second kind is disjoint segmentation, where the result of segmentation consists of two independent regions: the optic disc and the optic cup regions. Table 10 shows the articles of the joint segmentation and Table 11 shows the articles of the disjoint segmentation.

1 abic 10-	Table 10-Overview of articles for joint segmentation methods.														
			Joint		F	Performance Metrics %				0					
Author/s	Preprocessin g	Localization	OD&OC Segmentatio n	OD/ OC		loU _x	ACC,	SEN _x	SPE _x	PRE _x	Dataset				
Shankaranar ayana et al. 2017 [69]	Resize image 256× 256		ResU-cGAN	OD OC	97.7 94	89.7 76.8					RIM-ONE (159)				
				OD	95.97	91.8 3	99.6 6	97.45	3		DRISHTI-GS				
	S170	e ented		OC	92.4	86.3 2	99.7 1	95.67	99.8 1		(101)				
Tabassum et al. 2020				CNN c		CNN called	OD		88.3 7					REFUGE	
[70]	• Augmented the images						CDED-Net	OC		81.1 1					(400)
									OD	95.82	1	6	97.34	3	
				OC	86.22	75.3 2	99.6 1	95.17	99.8 1		(159)				
				OD	97.8	95.7		97.84		97.78	DRISHTI-GS				
Liu et al. Data	Data	Extracted the ROI by CNN	CNN called	OC	91.23	84.4 2		92.2		91.49	(101)				
2021[71]	augmentation	U-net and circular Hough	DDSC-Net	OD	96.01	92.3 9		98.14		94.12	REFUGE				
				OC	89.03	80.6 5		92.09		87.49	(120)				

Table 10-Overview of articles for joint segmentation methods.

Table 11-Overview	of articles for	disjoint segmentation	methods
	or untrefees for	and only beginemation	memous

Author/s	Preprocessing	Localization	Disjoint OD&OC Segmentation	00	9/		Performance Metrics % DICE,IoU,ACCSENPRI		Dataset
Mittapalli	Detected and	"Principal	Active contour		97.5			Private (40) RIM-ONE (10)	
and Kande 2016 [9]	removed blood vessels	component analysis" (PCA)	"spatially weighted fuzzy c means"	OC	89			DIARETDB0 (9)	
Sevasto-	• CLAHE		Modification of U-	OD	94	89		DRIONS-DB (110)	
polsky et al. 2017	•Augmenting data		Net CNN	02	95	89		RIM-ONE-r3	
[72]	•Cropping OD		==	OC	82	69		(159)	

	•CLAHE •Augmenting data				85	75				DRISHTI-GS (50)
Nazir et	•Augmented data •Created a polygon	•Created features map using	Custom Mask-R- CNN •Improved	OD	95.3	98.1	97.9	96. 9	95.9	
al. 2021 [73]	for OD and OC	•Identified ROI	location of OD and	~~	98.7	96.3	95.1	95. 7	97.1	ORIGA (650)

8. Glaucomatous Classification

Retinal funds Image classification is the backbone of this study because correctly classifying the images leads to an accurate diagnosis of glaucoma. There are multiple methods for classifying images (for glaucoma diagnosis). This study categorizes the classification methods according to the type of features used in the classification. The following subsections describe the classification methods: medical-based techniques; intensity-based techniques; deep-based techniques; and hybrid-based techniques.

8.1 Medical-Based Techniques

This section presents the first category of the Retinal Fund's image classification. The first category is the method that depends on the structural characteristics. The characteristics are used clinically in the diagnosis of glaucoma diseases, such as the Cup-to-Disc Ratio (CDR). The study will call this category a medicinal-based technique. Table 12 shows the articles in the first category.

Author/s	Preprocessing Localization Segmentation for Classificati on		Measur e	Valu e%	Dataset				
	Removing vessels,	●Intensity	•K-mean clustering		ACC	92			
Ayub et al. 2016 [74]	Sharping and Equalizing image	weighted centroid	for L channel •Canny and ellipse	• CDR	SEN	93	Private (100)		
	1 0 0	then cropped the ROI	fitting		SPE	88			
	After localization		•Reduce		SEN	92.3			
Zilly at al	•L* a *b	•Circular	computation •CNN with Gentle			95.6	RIM-ONE		
Zilly et al. 2017 [75]	 Subtracted by mean Division by standard deviation 	Hough for Green • Cropped ROI	AdaBoost •Graph cut algorithm •Convex hull	• CDR	ACC	94.1	(159)		
Arnay et al. 2017 [10]	Segmented vessels by thresholding & thinning		"Ant Colony Optimization" (ACO)	• CDR	AUC	79.57	RIM-ONE (159)		
	Multiple sizes with		 M-Net CNN with 4 mechanism 	-	AUC	85.08	ORIGA (650)		
Huazhu et al. 2018 [6]	polar transformation version images		• threshold, ellipse fitting for segmenting jointly OD and OC	• CDR • RDAR	AUC	89.97	Private (1676)		
Nawaldgi et al. 2018 [12]			Thresholding and morphology operations •OD from Red •OC from Green	CDRISNT rule	ACC	99	DRISHTI-GS1 (101)		

Table 12-Overview of articles for glaucoma diagnosis (Medical-Based Techniques)

Mohamed et al. 2019 [76]	 Selection channel Noise removal by Anisotropic Diffusion Corrected the illumination 		 Superpixels based on "Simple Linear Iterative Clustering" Extraction features by "Statistical Pixel- Level" Support Vector Machine for OD&OC 	• CDR • CDAR	AUC SEN SPE AUC	91 92.30 97.60 98.63	RIM-ONE (166)
Riaz et al. 2020 [77]	 Estimated the size of OD Illumination correction Data augmentation 	Template matching	Fuzzy broad learning system •Level-1(OD: Red) •Level-2(OC: Green)	• CDR	AUC AUC AUC AUC	90.6 923 97.21 88.7	RIM-ONE-r3 (159) Private (566) REFUGE (1200) DRISHTI-GS (101)
Imtiaz et al.2021 [78]	 Reducing the size of the images Augmenting data by contrast variations and rotation 		 Encoder-decoder based on Semantic Segmentation fine tuning VGG 16 CNN Removing noise Ellipse fitting 	• CDR	SEN SPE ACC DICE	96.74 99.1 99.03 85.94	RIM-ONE-r3 (169)

8.2 Intensity-based Techniques

The second category is the method that depends on pixels' features to classify the image. Statistical features are an example of them. Intensity-based techniques fall into the second category. The set of articles showing intensity features is in Table 13.

Author/s	Preproces sing	Localizati on	Segmentati on	Features Extraction	Norm./ Selection	Classifica tion	Meas ure	Valu e%	C.	Dataset
				 Transforming into "Empirical 		" Least Squares	ACC	98.3 3	f.	Private
Maheshw ari et al.	Extracting R, G, B,			Wavelet Transform" (EWT)	T-test/ z-	Support Vector	ACC	96.6 7	10- f	(60)
2016 [14]	and gray			•Extracting 3 Correntropy	score	Machine " (LS-	ACC	81.3 2	3- f.	RIM- ONE
				features for each channel		(LS- SVM)	ACC	80.6 6	10- f	(505)
		●Kaiser window	●Segmentin	●Transforming	Genetic,	Random forest	ACC	94.7 5		
		for getting high	g OD by bit plane from	into first level Discrete wavelet	Evolution ary	Naïve Byes	ACC	89.4 8		
Singh et al. 2016		intensity	R channel •Removing	(DWT) •Extracting mean	Attribute	ANN	ACC	94.7 5		Private (63)
[79]		Green	vessels by the in-	and energy using Haar, db3, Symlet3	z-score/ "Principal	SVM	ACC	94.7 5		(03)
		•cropped circular ROI	painting method	and Bi-orthogonal filters	Compone nt Analysis"	K-NN	ACC	94.7 5		
Kavya et al. 2017 [80]	enhance R by "Adaptive Histogram Equalizati on"		Hough Transformat ion for OD	 "Gray Level Co-occurrence Matrix" "Gaussian Markov Random Field" (MRF) 		"Support vector machine" (SVM)	ACC	86		DRISH TI- GS(101) , Private: (30)
Maheshw ari et al.	•Resized images			• Transforming into "Variational	Z-score/ Relief	"least squares	ACC	94.7 9	10- f.	Private(488)

2017 [4]	• Enhanced by			Mode Decomposition" (2D-VMD)		support vector machine"	SEN SPE	93.6 2 95.8	_	
	CLAHE			• Extracting entropies and fractal dimensions		(LS- SVM)	ACC	8 95.1 6	3- f.	
							ACC ACC	81.6 3 81.2 2	10- f. 3- f.	RIM- ONE (505)
			OD thresholding				SEN	85.1	1.	
Arwa A. Gasm Elseid and Alnazier O. Hamza	•Resized the image •Smoothe d the Red channel •Remove d vessel		smoothed and constructed a circle from the Red channel.	13 shape features from OD and OC	T-test	Ensemble RUSBOO STED tree classifier with	SPE	93.6	f.1 0	RIM- ONE (169)
0. Hamza 2018 [81]			OC used OD mask			SMOTE method	ACC	91.3		
	contract		for thresholding and smoothed				AUC	92		
	•Cropped the image •corrected	thresholdi ng Red	Cropped	•Transforming into Daubechies4 wavelet			AUC ACC SPE SEN	89.4 90.9 87.9	5 f.	Glauco maDB (66)
Abdel- Hamid	illuminatio n Red by subtractin	detected manually the radius,	boundary for OD for	• Textural features Extracted "Gray- Level Co-	Relief algorithm and	KNN classifier	AUC ACC SPE		-	
2020 [82]	g mean •Smoothi	center, and rectangula r for OD	Green and Blue channels.	occurrence Matrices" (GLCM) features • Statistical features seven features	Informatio n Gain	classifier	SEN	93.3	5 f.	HRF (30)
	•Removin g noise by			•Transforming into			SEN	89.2 9		
al. 2021 [83]	Median filter •Removin g vessels by morpholog y operations	ROI	"Local Region Recursive Segmentatio n" (LRRS)	pattern, and correntropy features	Z-score / T-test	Random forest	ACC	89.7 1		RIM- ONE-r2 (455)
Shantham		Localized OD by		•Converting into 9 color model and gray	Fisher filtering	"Random	ACC	96.8 3		DRISH TI-GS1 (101)
alar J. Jeslin 2021 [5]		pixel density calculatio n		•Extracting: Statistical, "Gray Level Concurrence Matrix" and Histogram features	filtering	Tree" (RT) classifier	SEN	97.2 6		RIM- ONE-r1 (169)

* (Norm.) refers to normalization, (C.) refers to cross-validation and (f.) refers to k-fold.

8.3 Deep-Based Techniques

The third category is the methods that depend on the deep features extracted through the Convolution Neural Network (CNN) to classify images. Table 14 shows a set of methods for deep-based techniques.

Author/s	Preprocessing		Segmentati	Features Extraction/	Measu	Valu	C.	Dataset
1101/5	reprocessing	on	on	Classification	re	e%	~ •	
Abbas 2017 [18]		High intensity of Green channel	Croup the ROI	 Pre-trained CNN Optimized by the fine- tuning deep-belief network (DBN) 	SEN SPE ACC PRE	84.5 98.0 1 99 84	10- f.	 DRIONS- DB(110) HRF (30) sjchoi86- HRF(401)
								•private (659)
Li et al. 2018 [84]	•Normalize •Reduced size •Subtracted mean • Augmentation			Glaucomatous Optic Neuropathy" (GON) consisted of 11 Inception- v3 CNN	AUC SEN SPE AUC	98.6 95.6 92 98.6		Private (48116)
					AUC	91.8 3		
	• The stream			•DENet with several	SEN	84.7 8		private: SCES(1676)
Fu et al.	of polar		CNN like	streams based on fine- tuned for ResNet-50	SPE	83.8 0		
2018 [85]	transformation work as data augmentation		the U-Net	Global Image, ONH, ONH polar, optic disc	AUC	81.7 3		
	augmentation			•Ensemble Networks	SEN	78.7 6		private: SINDI(5783)
					SPE	71.1 5		
Christop her et al. 2018 [86]	• Augmentation •Reducing the size of the image	●Manually	Cropped the square around OD manually	Native ResNet50 Transfer learning ResNet50	AUC AUC	89 91	10- f.	Private (7411)
Raghave ndra et al. 2018 [87]	Reducing size image to 64*64 pixels			New CNN with 18 layers	ACC SEN SPE PRE	98.1 3 98. 98.3 98.7 9	5- f.	Private (1426)
Ahn et al. 2018 [16]	•Cropped the optic nerve •Data augmentation			Transfer learning of GoogleNet Inception New Convolutional Neural Network	ACC AUC ACC AUC	93 84.5 87.9 94	-	HARVARD (1542)
Diaz et al. 2019 [15]	•Subtracted the average •Resized	Fine-tune VGG + thresholdin g	Croup the ROI	Fine-tuned Xception	AUC ACC SPE SEN DICE	96.0 5 89.7 7	10- f.	•ACRIMA (705) •DRISHTI- GS1(101) •sjchoi86-HRF (401) • HRF (45) •RIM-ONE (455)
Li et al. 2019 [22]	Resized images to 224 × 224	"Pathologi cal Area Localizatio n Subnet"		"Attention-based CNN for Glaucoma detection" AG- CNN: three stages "Attention Prediction	ACC SEN SPE AUC	95.3 95.4 95.2 97.5	-	LAG(5824)

Table 14-Overview of articles for	deep-based technique	s to detect glaucoma
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		(PALS)		Subnet", "Pathological Area Localization Subnet" and "Glaucoma classification subnet"	ACC SEN SPE AUC	85.2 84.8 85.5 91.6	RIM-ONE-r1 (169)
Serte et al. 2020 [88]	Data augmentation	Graph saliency region detection	Threshold cropped around OD	Three parallel fine-tuned CNNs AlexNet8 ResNet-50 and -152 • Sum of the Maximal Probabilities" (SMP)	AUC ACC SEN SPE	94 88 86 90	HARVARD (1542)
Hemelin gs 2020 et al. [89]	 Cropped square Resize image Gaussian Augmentatio n 			•Transfer learning ResNet-50/ new layers •Active learning and Saliency maps	AUC SEN SPE	99.5 98.0 91	Private (4935)
Joshi et al. 2020 [90]	•Data augmentation		Drew a bounding box manually	Transfer Learning of YOLO-v3	ACC. SEN SPE	93.7 89.1 95.8 5	•DRISHTI-GS (101) • REFUGE (400) • private (256)
Alghamd i et al. 2021 [91]	Data augmentation			"Semi-supervised Convolutional Neural Network model with Autoencoder"	ACC SEN SPE AUC	93.8 98.9 90.5 95	• RIM-ONE-r2 (455) • RIGA (750)
Bao et al. 2021 [92]	Resized of images			"Self-Adaptive Transfer Learning" (SATL) integrated the VGG and "Variational Auto- Encoder" (VAE)	ACC SEN PRE DICE	74 71.3 8 59.5 5 57.1	LAG (4854) private (1881) REFUGE-2 (400)

*(C.) refers to cross-validation and (f.) refers to k-fold

8.4 Hybrid-Based Techniques

The fourth category is the methods that depend on more than one type of feature. They combine more than one type of category. This type we will call the hybrid-based technique. The study presents two groups for this category: hybrid-based (Intensity + Medical) techniques in Table 15 and hybrid-based (Intensity + Deep) techniques in Table 16.

Table 15-Overview	of articles	s for hybrid-based	(Intensity +	Medical)	techniques to detect	ct
glaucoma						

Author/s	Preprocessi ng	Segmentation	Features Extraction	Classificati on	Measu re	Valu e%	C.	Dataset
Chakravart	vet al illumination	Template match by Hough to Crop square ROI	"Texture of Projection" (ToP) and "Bag of Words" (BoW)	"Support	ACC	76.7 7	5- f.	DRISHTI- GS1 (101)
y et al.		()) and ()(by	•vertical CDR and rim to disc	Vector Machine"	AUC	78	1	
2016 [8] correction	the estimated depth and	area ratio, major axis length of OD, and the ratio of	(SVM)	ACC	73.2 8	5-	Private	
		"Markov Random Field"	horizontal to vertical CDR		AUC	79	f.	(1103)
			Hybrid Structural Feature-set	"Support	SPE	88		
171 111 / 1	the resolution	OC (B channel) •thresholding	• CDR • Rim to Disc Ratio (RDR)	Vector Machine"	SEN	77	10- f.	GlaucomaD B (100)
Khalil et al. 2017 [11]	• by the	OpeningConvex hull	•"Hausdorff's Fractal Dimension" (HFD)	(SVM)	ACC	83		D (100)
	interpolatio n method	•Cropping the region of OD	Hybrid Texture Feature-set • OD(GLCM, 2D Discrete	==	SPE	92	==	==

	 Scaled image Increased 	• Segmenting vessels in the rim by 2D	Wavelet Transform", Grey- level run length, Fractal, brightness, Super-pixels,		SEN	96		
	 Increased the contrast of the image Cropped ROI 	•	 Burghtness, Super-pixels, mean and standard deviation Rim vessels (Area, Mean, Kurtosis, Standard deviation, Variance Skew) 		ACC	94		
		OD: Prewitt	• Medical features (CDR,		SPE	91.2 1		_
Pathan et		filter, applied the circle finder		"Support	SEN	93.4 7		private (300)
al. 2021 [2]	vessels	operation	mean, skewness, energy,	Vector	ACC	90		
	Green	OD: decision tree	standard deviation, and variance)	Machine" (SVM)	SPE	92.6 8	10	DRISHTI-
	channel	OC: k-mean	•Texture features "Grey Level Co-occurrence Matrix"		SEN	100	f.	GS1 (101)
					ACC	95		

*(C.) refers to cross-validation and (f.) refers to k-fold, ("==") refers to the same procedures or materials (as above).

Table 16-Overview of articles for hybrid-based (Intensity + Deep) techniques to detect glaucoma

Author/	Preprocessi ng	Features Extraction	selection	Classificat ion	Measu re	Valu e%	C.	Dataset
Claro et al. 2019 [19]	RGB and	 Morphology : Area, Perimeter, Convex Area, Diameter, and Extension Texture: LBP, GLCM, HOG, Tamura and GLRLM Deep features: using CNNs (CaffeNet, Vgg-f, Vgg-m, Vgg- s, VGG-19, AlexNet and Vgg- 16) 	gain ratio	Random forest (RF)	ACC	93.3 5	10 J	RIM-ONE-r1 (158) RIM-ONE-r2 (455)
					AUC	98		RIM-ONE-r3 (159) DRISHTI-GS1 (101)
					ACC	93.6 1	10- f	HRF (30) JSIEC (67)
					AUC	97.5		ACRIMA (705)
Chaudh ary et al. 2021[93]	•Extracted Bess Green Emp channel •Enhanced •Ext contrast by "G CLAHE	Empirical Wavelet Transform"	min-max/ "Principal Compone nt Analysis" (PCA) / T-Test	SVM	ACC	90		RIM-ONE-r2 (455)
				random forest (RF)	ACC	95.5 1	RIM-ONE-r1 (169) RIM-ONE-r2 (455)	
				Random forest (RF)	ACC	98.2 1		RIM-ONE-r1 (169)
	•Reduced			Soft-max classifier	ACC	91	ŀ	RIM-ONE-r1 (169) RIM-ONE-r2 (455) RIM-ONE-r3 (159) ORIGA (650) DRISHTI-GS1 (101)
	size of Green	"Two Dimensional Fourier- Bessel Series Expansion based			SPE	83		
	channel	Empirical Wavelet Transform"			SEN	94		
	•Enhanced by CLAHE •Augmente d	to obtain sub-images •Extracted deep features by transfer learning of ResNet-50			AUC	96		

*(C.) refers to cross-validation and (f.) refers to k-fold

9. Discussion and Analysis

• Dataset

The retinal fundus image has many datasets. Depending on the ground truth, each dataset can be used to solve a specific problem. Figure 3 shows the datasets that were used in this review.



Figure 3-Categories of datasets used based on the presented articles.

•Enhancement: The enhancement image step is part of the preprocessing step. It includes correcting contrast/luminosity and de-noising. Several techniques such as CLAHE, gamma correlation, bilinear interpolation, subtracting mean, and CNN are utilized for adjusting contrast and luminosity, but CLAHE is the most widely used. De-noising can be done by using Gaussian, median, and anisotropic filters. The Gaussian filter is the most commonly used.

•Localization: The localization step of an optic disc (OD) is different from the OD segmentation step, but in many methods, the two steps overlap because the segmentation step initially needs to be localized. The localization step involves some tasks. The first task is to select a suitable channel, either using the Shannon information or the red channel, because it is the most common choice. The second task determines the work area, which is ONH or called ROI. The third task determines the center of the OD and sometimes its radius to be ready for segmenting. Notably, the Optic Cup does not need a localization step because the location of the OC is inside the OD and is usually identified by using the green channel.

•Segmentation: Segmentation is considered the most significant challenge in diagnosing glaucoma, especially when using classification methods based on medical features, because it requires very high precision segmentation. The purpose of segmentation is to extract OD and OC. Cup segmentation is the most difficult challenge in the diagnosis of glaucoma due to the overlap of the Cup with the Disc, the presence of blood vessels, and changes associated with glaucoma.

•Classification

• **Medical-based technique**: This type is the most important kind of classification because it uses the medical indicators for diagnosing glaucoma, such as the CDR and ISTR rules.

• Intensity-based technique: This type of classification has proven its worth, especially since it does not require precise segmentation. It extracts the features of the parts of the raw image or the converted version of the image (wavelet widely used) and afterwards classifies the features by one of the machine learning techniques (SVM widely used).

• **Deep-based technique:** The CNN net contains two stages: feature extraction (convolution layer and pooling layer) and a fully connected layer (classification). Practically, there are several kinds of CNN nets. First, the new CNN net (newly implemented) is built and trained from scratch. Second, the transfer learning net uses the pre-trained net and keeps the

architecture and weights of the old net but makes a change in the fully connected layer (as retraining the weights and reducing the number of outputs). Third, the fine-tuning net uses the pre-trained net and retrains the weights (for any part of the net) or modifies any layer or parameter for the pre-trained net. Some methods use more than one kind (hybrid, transfer learning, and fine-tuning). However, in recent years, more methods that rely on CNN have achieved highly accurate results.

• Hybrid-based techniques: This type is comprehensive and extracts various features.

The hybrid-based (Intensity + Deep) technique archives good results.

10. Articles Gap

Datasets

Methods using private datasets have a drawback because it is difficult to compare results with other methods and it is impossible to determine if the results are accurate. Some methods use inappropriate datasets with the target of the pepper consequence that the authors create private ground truth.

•Enhancement:

The enhancement must be precise because some methods generate blocky effects.

Localization

Localizing the OD using only the principle that the OD is the bright circular region in the retinal fundus image is not accurate because the retinal fundus images contain a lot of bright areas. Some methods are not fully automatic, such as specifying the disc area and radius manually.

•Segmentation: Generally, if OD and OC are segmented by the same method, the segmentation results for OC will not be as pleasing. Most methods ignore the relationship between the parts of the retina.

Classification

• **Medical-based technique:** It depends very heavily on the accuracy of separating the cup, disc, and the rest of the retina. However, there are several parameters associated with the features used in this type of classification. Most methods used one or two parameters and ignored the rest.

• **Intensity-based technique:** This type of work consumes a lot of time and effort. There are many extracted features, but the classification stage does not use all of them.

• **Deep-based technique:** It needs large datasets. Unfortunately, these are not available for glaucoma patients, as they consume a lot of time during training.

• **Hybrid-based techniques:** According to the best of our knowledge, no method combines the three kinds of features.

11. Conclusion and Guideline for Diagnosing Glaucoma

Analyzing the retina requires several major steps. The steps involve analyzing the retina based on the objective of the research and the techniques used by the researcher. The research goals are enhancement, localization, segmentation (several kinds), or classification. Classification usually has more steps than other applications. However, enhancement, localization, and segmentation are often implicit steps to achieve the goal of classification.

In glaucoma diagnosis, feature extraction and classification are indispensable steps, while the rest are used optionally depending on the methodology used in the algorithm. Figure 4 shows a summary of the main steps and useful notes required for glaucoma diagnosis.

Gathering Data	It depends on the ground truth. For example, if a method requires segmentation, it will need information about OD and OC masks.
Preprocessing	Enhancing contrast and luminosity, Remove noise, choosing Channel, Resized image, Removing vessels, data augmentation to increase data for avoiding possible over-fitting, image fusion Other steps as needed
Localization	Selecting channel (for OD red channel is the most common), determining ONH, determining the centralize of the OD
Segmentation	In general, the first step determines the ONH and the centralize of the OD. Second step segments the OD region then the OC is segmented from the OD region.
	Three types •Medical features, Table-1. This type requires precise segmentation. •Intensity
Features Extraction	features such as statistical and texture. They can be extracted without segmentation or at least identifying the area of the ONH •Deep features are extracted automatically by the CNN network, usually do not need to segment the image and run on the ONH area.
Features Selection	It statistical step to exclude features, that do not affect the differentiation process. It usually comes with an Intensity-based technique.
Cross-validation	It is a necessary task in the testing step to avoid possible over-fitting because most datasets are small. In general, methods based on the learning process (CNN and machine learning techniques) require cross-validation.
Classification	It depends on features used • Medical-based techniques: There is no need for a classification because it depends on the few parameter values,(one or two)•Deep-based techniques, generally implicitly, contain a classification method, the Soft-max.• Intensity-based and hybrid-based techniques: both require a classification method (SVM is more common).

Figure 4-Guideline /Steps for diagnosing Glaucoma

12. References

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