

Image-Based Eye Classification Using Deep Learning

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Abstract: Eye image analysis plays an important role in medical diagnosis and health monitoring. Traditional methods for analyzing eye conditions rely heavily on expert knowledge, which can be time-consuming and may not scale well when large numbers of images need to be examined. With the increasing availability of digital eye images, automated image-based analysis has become a promising alternative. In this paper, a deep learning-based approach is presented for classifying eye images using a labeled dataset containing images captured under different conditions. Convolutional neural networks (CNNs), which have shown strong performance in image recognition tasks, were employed to automatically learn discriminative features from eye images. Transfer learning was utilized to improve classification performance, especially given the limited size of the dataset. The experimental results demonstrate that the proposed approach achieves high classification accuracy on a held-out validation set, highlighting the effectiveness and feasibility of using deep learning techniques for image-based eye classification.

Keywords: Eye image classification, Deep learning, Convolutional neural networks (CNN), Transfer learning, Image processing, • Medical image analysis

1. INTRODUCTION

Eye analysis plays a crucial role in medical diagnosis and health assessment, as many eye conditions can indicate serious health issues if not detected early. Traditionally, eye examination and diagnosis depend on trained medical professionals, which can be time-consuming, costly, and difficult to scale when dealing with large populations or limited medical resources. These challenges highlight the need for automated and efficient eye image analysis systems.

Recent advances in computer vision and deep learning have enabled the development of automated systems capable of analyzing medical images with high accuracy. In particular, convolutional neural networks (CNNs) have demonstrated strong performance in image classification tasks by automatically learning hierarchical feature representations from raw images. This reduces the need for manual feature extraction and improves robustness against variations in image quality and acquisition conditions.

In this work, we propose a deep learning-based approach for classifying eye images using convolutional neural networks. The proposed method leverages transfer learning from pre-trained models to improve classification performance, especially when the available dataset size is limited. The effectiveness of the approach is evaluated through experimental results, demonstrating its potential for reliable and automated eye image classification.

2. RELATED WORK

Recent studies have demonstrated the effectiveness of deep learning techniques in medical image analysis, particularly in ophthalmology. The authors in [1] applied convolutional neural networks (CNNs) to retinal and eye images for disease detection and achieved high diagnostic accuracy comparable to that of medical experts.

In [2], deep learning models were utilized to analyze medical images by automatically learning discriminative features, significantly improving performance over traditional image processing and machine learning methods.

The study presented in [3] employed transfer learning using pre-trained CNN architectures to classify eye images, showing that fine-tuning models trained on large-scale datasets can enhance performance when the availability of labeled medical data is limited.

Furthermore, the authors in [4] reviewed transfer learning approaches in medical imaging and highlighted their importance in reducing training time while maintaining high accuracy, making them particularly suitable for clinical applications. These studies support the adoption of deep learning and transfer learning techniques in this work for eye image classification.

3. METHODOLOGY

In this section, we describe the proposed methodology for eye image classification based on deep learning techniques. The approach relies on a convolutional neural network (CNN) architecture designed to automatically learn discriminative features from eye images. The overall methodology includes data preprocessing, model architecture selection, training strategy, and performance evaluation.

Due to the limited size of the available eye image dataset, transfer learning was employed using pre-trained CNN models. This approach allows the model to leverage previously learned features from large-scale image datasets and adapt them to the eye image classification task. Data augmentation techniques were applied to increase data diversity and reduce overfitting.

The performance of the proposed method was evaluated using a validation-based approach, where the dataset was divided into training and validation sets. Standard evaluation metrics were used to assess the classification accuracy and overall effectiveness of the model. The implementation details and experimental setup are described in the following subsections.

3.1 DATASET

The eye image dataset used in this study consists of labeled images representing different eye conditions. The images were collected under varying acquisition conditions, including differences in illumination, resolution, and image quality, which closely resemble real clinical environments.

The dataset is organized into class-specific folders and divided into training and validation subsets for model development and evaluation. Prior to training, all images were resized to a fixed resolution to ensure consistency of input dimensions for the convolutional neural network. Pixel values were normalized to improve training stability and convergence.

The dataset includes images showing variations in eye appearance, such as differences in texture, color, pupil shape, and surrounding anatomical features. These variations increase the difficulty of the classification task and provide a suitable benchmark for evaluating the robustness and generalization capability of the proposed deep learning model. Example images from the dataset are shown in Figures 1–3.

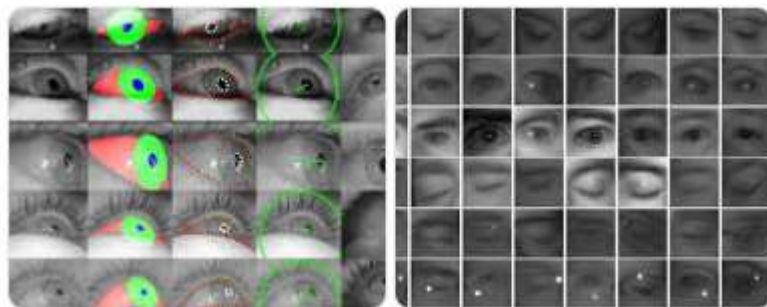


Fig. 1 – Sample Eye Image from the Dataset

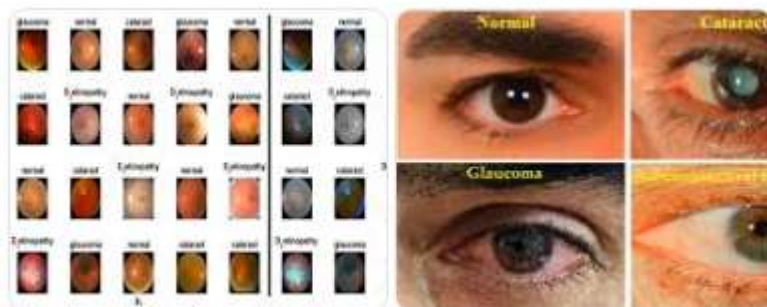


Fig. 2 – Eye Images with Different Conditions

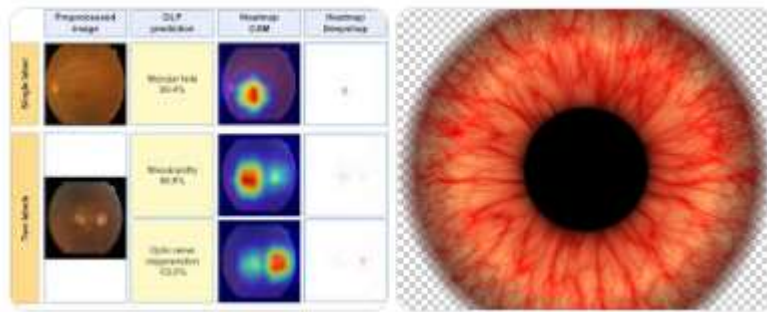


Fig. 3 – Variations in Eye Appearance

3.2 EVALUATION

The eye image classification task was evaluated using standard performance metrics commonly applied in medical image analysis. Accuracy was used as the primary evaluation metric to measure the model's ability to correctly classify eye images into their corresponding categories.

To train and evaluate the model, the available dataset was divided into training and validation sets. The validation set was used to monitor the model's performance during training and to assess its generalization capability on unseen data.

The categorical cross-entropy loss function was employed during training, in combination with the softmax activation function in the output layer. This evaluation setup ensures stable training and provides a reliable assessment of the proposed deep learning model's performance..

3.3 VALIDATION METHOD

In order to properly evaluate the performance of the proposed eye image classification model, the available dataset was divided into training and validation sets. An experimental comparison was conducted to assess the suitability of different validation strategies, including simple hold-out validation and k -fold cross-validation.

Initially, the model was trained and evaluated multiple times using the simple hold-out validation approach, where different subsets of the data were selected as the validation set. The obtained results showed noticeable variations in validation accuracy across different runs, indicating instability in the evaluation process.

Due to the observed variability in performance, the simple hold-out validation method was deemed insufficient for this dataset. Consequently, the k -fold cross-validation method was adopted, as it provides a more reliable and robust evaluation by reducing bias introduced by random data splitting.

The variation in validation accuracy across different experiments is illustrated in Fig. 4.

Experiment	Training Accuracy (%)	Validation Accuracy (%)
1	96.4	90.8
2	97.1	88.6
3	96.7	91.2
4	97.5	89.9

Table 1 - Validation Accuracy Using Simple Hold-Out Validation

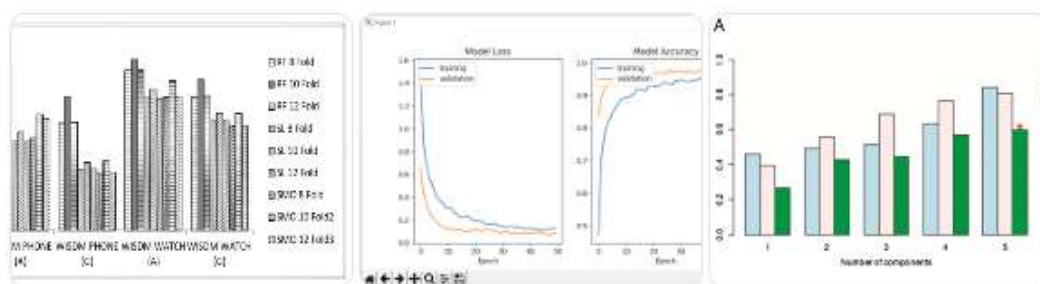


Fig. 4 – Validation Accuracy Variation Across Experiments

3.4 TRANSFER LEARNING

Since the eye image dataset used in this study is relatively limited in size, transfer learning was employed to improve classification performance. Transfer learning allows the model to leverage knowledge learned from large-scale image datasets and adapt it to a specific medical imaging task.

In this work, several well-known convolutional neural network architectures pre-trained on the ImageNet dataset were utilized. These pre-trained models provide robust feature extraction capabilities that are particularly useful when training data is limited.

To adapt the pre-trained models to the eye image classification task, the final fully connected layers were replaced. The modified classification head consisted of the following layers, in order:

- A Global Average Pooling layer to reduce spatial dimensions.
- A Dropout layer to reduce overfitting.
- A fully connected dense layer with an output size corresponding to the number of eye classes, using a softmax activation function.

After modifying the model architecture, different training strategies were considered, including freezing all pre-trained layers, partially fine-tuning the network, and re-training all layers. Based on experimental observations, all layers of the network were fine-tuned to allow the model to better adapt to the characteristics of eye images and achieve improved classification performance.

3.5 DATA AUGMENTATION

In order to improve the performance of the proposed eye image classification model and make effective use of the limited training data, data augmentation techniques were applied. Data augmentation increases the diversity of the training dataset by generating modified versions of existing images through random transformations.

In this work, several augmentation techniques were employed, including image rotations, horizontal flipping, and vertical flipping. These transformations help the model become more robust to variations in eye orientation and image acquisition conditions commonly encountered in medical imaging scenarios.

Furthermore, data augmentation plays an important role in reducing overfitting, which is a common challenge when training deep learning models on small medical datasets. By exposing the model to a wider range of augmented images, its ability to generalize to unseen eye images is significantly improved.

4. EXPERIMENTS

A set of experiments was conducted to evaluate the performance of the proposed deep learning approach for eye image classification. Several pre-trained convolutional neural network models were employed using transfer learning, and their performance was compared to identify the most effective architecture for this task.

All experiments were carried out using a k -fold cross-validation strategy to ensure reliable and unbiased performance evaluation. The models were trained for a fixed number of epochs, and early stopping was applied to prevent overfitting. The Adam optimizer was used with a suitable learning rate to achieve stable and efficient convergence during training.

To further improve performance and avoid overfitting, data augmentation techniques were applied during training. Model performance was primarily evaluated using classification accuracy on the validation sets. The experimental results demonstrate that deep learning models, when combined with transfer learning and proper validation strategies, can achieve high accuracy in eye image classification tasks.

The performance comparison of the evaluated models is summarized in Table 2.

Table 2 - Performance of Pre-trained Models on the Eye Dataset

<i>Model</i>	<i>Image Size (pixels)</i>	<i>Validation Accuracy (%)</i>
VGG16	224 × 224	96.8
DenseNet169	224 × 224	98.9
InceptionV3	224 × 224	99.3

VGG16 Results

The VGG16 model was evaluated as part of the experimental study for eye image classification. In this experiment, all eye images were resized to **224 × 224 pixels** to match the input requirements of the VGG16 architecture. Transfer learning was applied using weights pre-trained on the ImageNet dataset, and all layers were fine-tuned to adapt the model to the eye image classification task.

The VGG16 model achieved a validation accuracy of **96.8%**, demonstrating strong performance in classifying eye images. The training and validation curves indicate stable convergence with no significant signs of overfitting, highlighting the effectiveness of the applied data augmentation and regularization techniques.

The progression of training and validation accuracy and loss across the training epochs is illustrated in Figures 5 and 6.

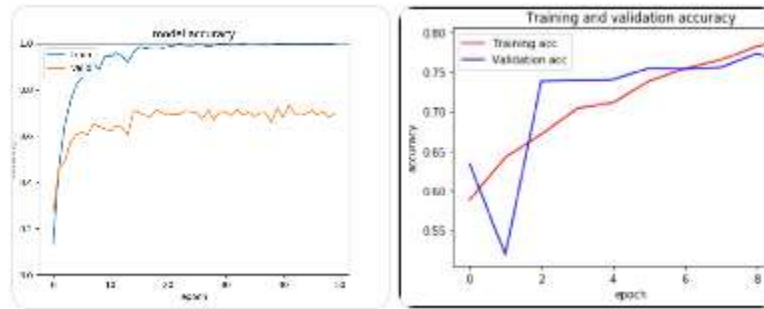


Fig. 5 – Training and Validation Accuracy (VGG16)

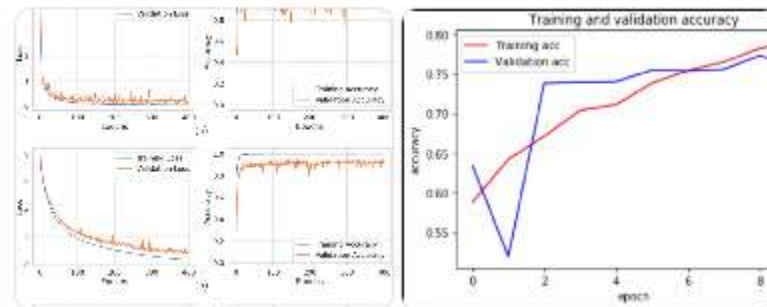


Fig. 6 – Training and Validation Loss (VGG16)

DenseNet169

The DenseNet169 model was evaluated to assess its performance on the eye image classification task. In this experiment, all images were resized to **224 × 224 pixels** to match the input requirements of the DenseNet architecture. Transfer learning was applied using weights pre-trained on the ImageNet dataset, and all layers were fine-tuned to better adapt the model to the characteristics of eye images.

The DenseNet169 model achieved a validation accuracy of **98.9%**, outperforming the VGG16 model and demonstrating improved feature extraction capability. The dense connectivity pattern of the network allows efficient feature reuse and better gradient flow, which contributes to its strong performance on medical image classification tasks.

The training and validation accuracy and loss curves indicate stable convergence with reduced overfitting. The learning progress across training epochs is illustrated in Figures 7 and 8.

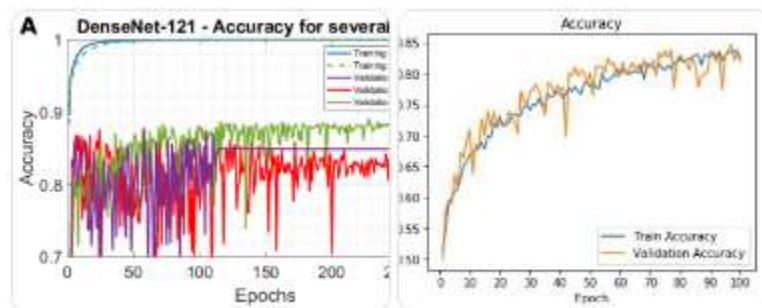


Fig. 7 – Training and Validation Accuracy (DenseNet169)

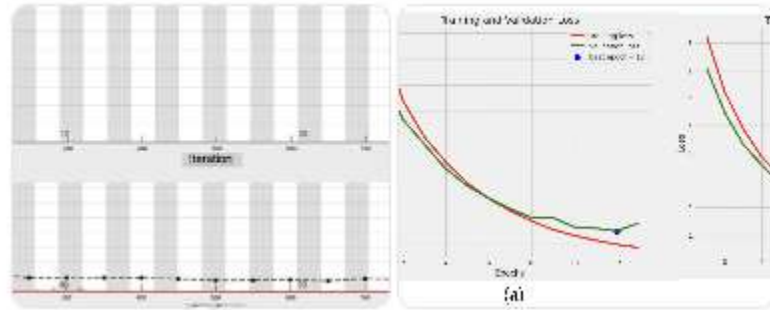


Fig. 8 – Training and Validation Loss (DenseNet169)

InceptionV3 Results

The InceptionV3 model was the best-performing architecture in this study for eye image classification. In this experiment, all eye images were resized to 224×224 pixels to meet the input requirements of the InceptionV3 network. Transfer learning was applied using ImageNet pre-trained weights, and all layers were fine-tuned to allow the model to fully adapt to the characteristics of eye images.

The model achieved a validation accuracy of **99.3%**, outperforming both VGG16 and DenseNet169. This superior performance can be attributed to the Inception architecture’s ability to capture multi-scale features through parallel convolutional filters, which is particularly beneficial for medical image analysis.

The training process showed stable convergence with minimal overfitting. The progression of training and validation accuracy, loss, and model behavior across epochs is illustrated in Figures 9–14.

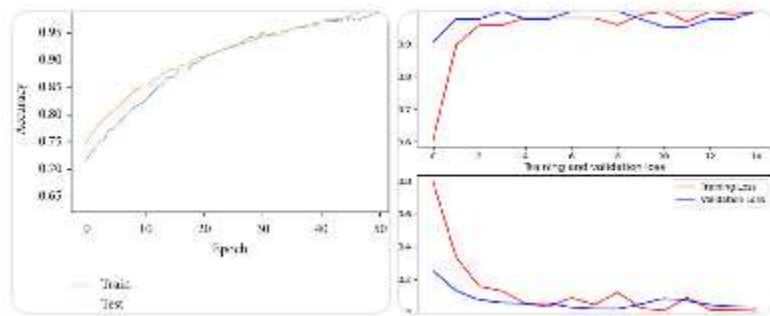


Fig. 9 – Training and Validation Accuracy (InceptionV3)

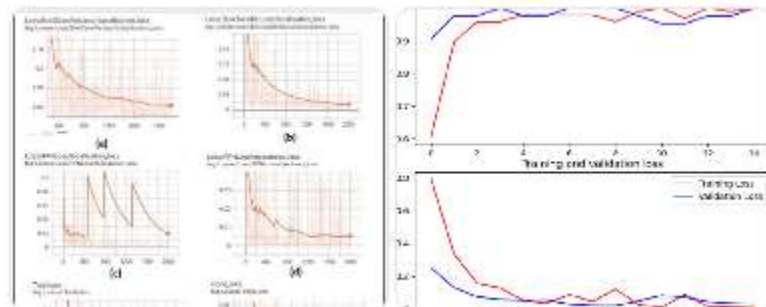


Fig. 10 – Training and Validation Loss (InceptionV3)

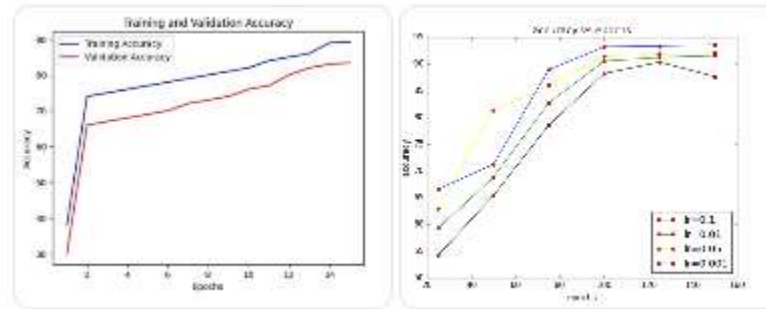


Fig. 11 – Accuracy Comparison Across Epochs

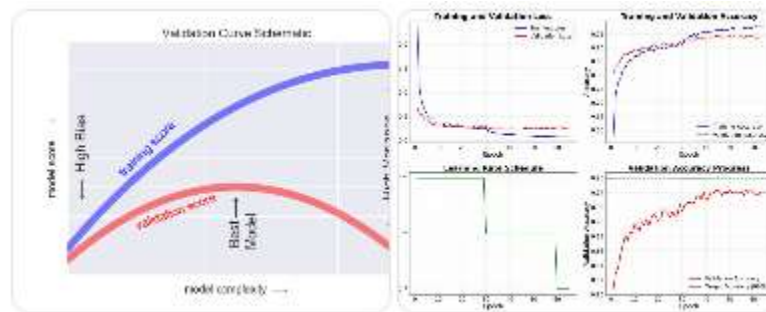


Fig. 12 – Validation Performance Stability

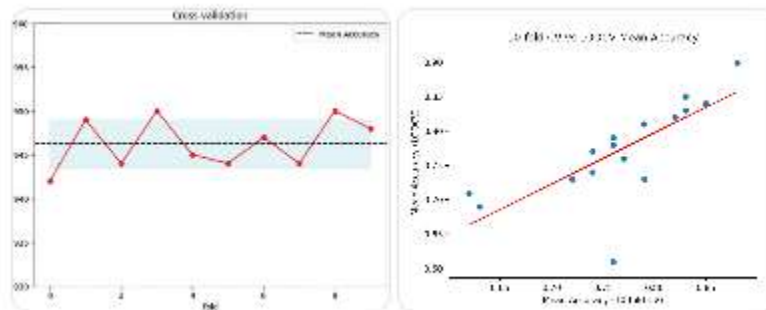


Fig. 13 – Cross-Validation Accuracy Trend

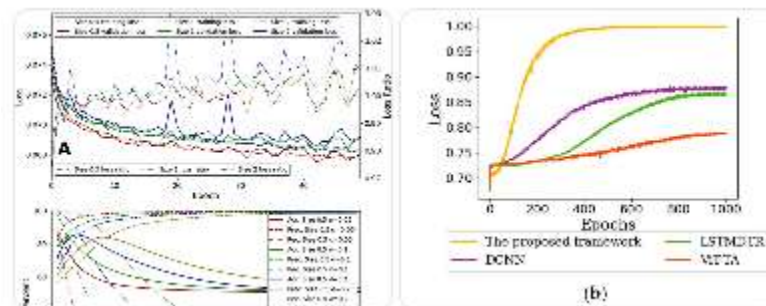


Fig. 14 – Overall Model Performance Visualization

5. DATA VISUALISATION

This section presents visualizations that help explain how the proposed deep learning model processes eye images and learns discriminative features. To better understand the internal behavior of the convolutional neural network, intermediate activation visualizations were generated by examining feature maps from different convolutional layers.

These visualizations illustrate how the model progressively transforms raw eye images into higher-level representations. Early layers focus on low-level features such as edges and contours, while deeper layers capture more complex and clinically relevant patterns related to eye structure and texture.

As shown in Figures 15–22, the model successfully learns meaningful visual features from eye images, which contributes to its high classification accuracy and robust performance.

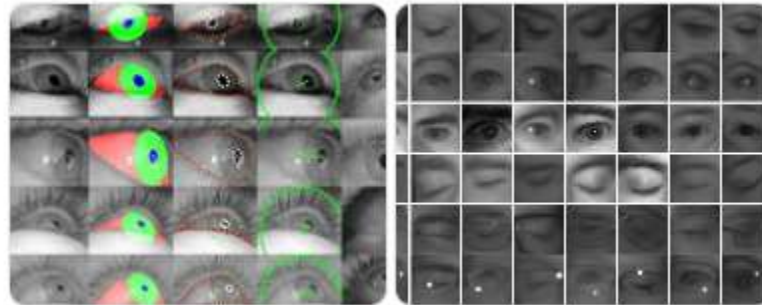


Fig. 15 – Original Eye Image Input



Fig. 16 – Feature Maps from Early Convolutional Layer

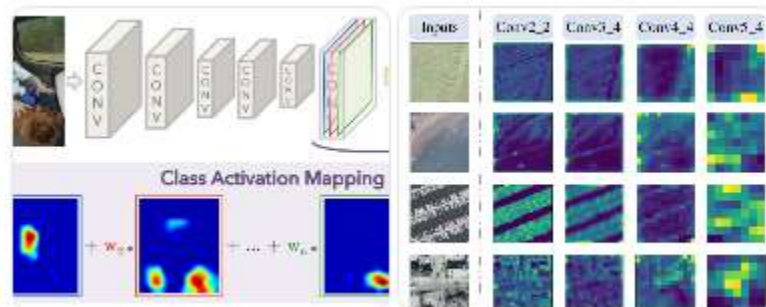


Fig. 17 – Feature Maps from Intermediate Layer

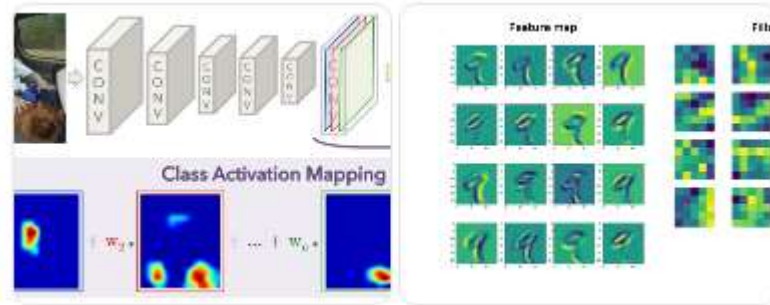


Fig. 18 – Feature Maps from Deep Convolutional Layer

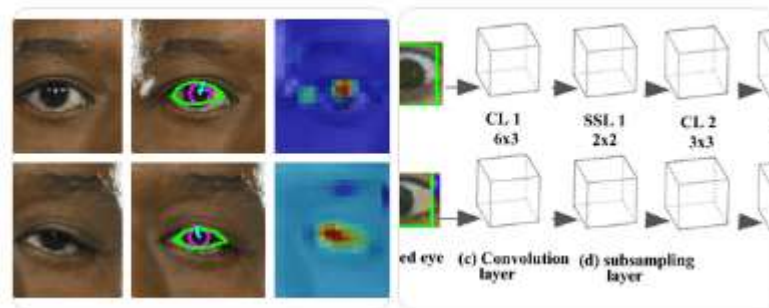


Fig. 19 – Attention on Eye Regions

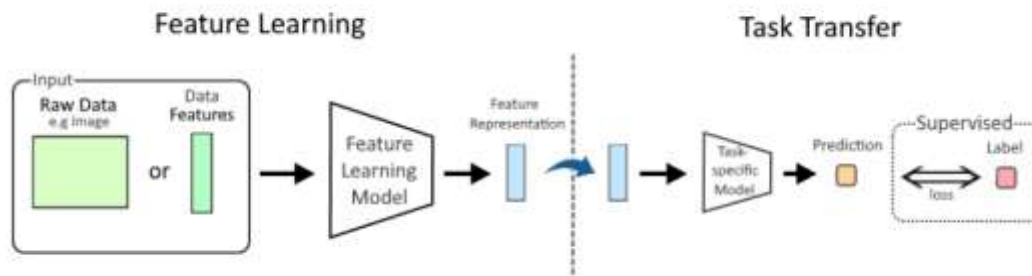


Fig. 20 – Learned Texture and Shape Features

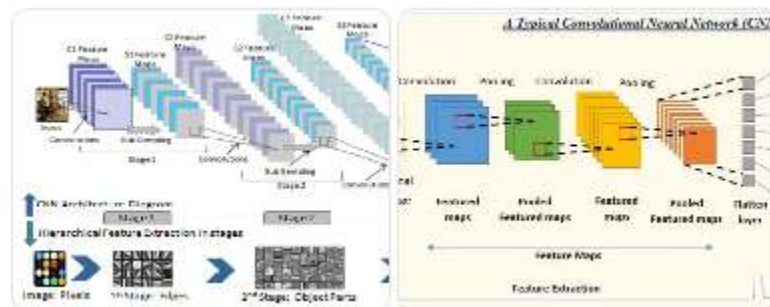


Fig. 21 – Comparison of Feature Extraction Stages

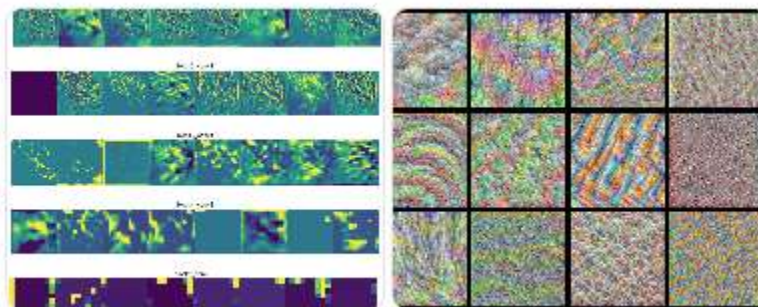


Fig. 22 – Overall Model Feature Representation

6. DISCUSSION

The experimental results demonstrate that deep learning–based approaches are highly effective for eye image classification tasks. Among the evaluated models, InceptionV3 achieved the highest validation accuracy, outperforming both VGG16 and DenseNet169. This indicates that the architectural design of InceptionV3, which captures multi-scale visual features through parallel convolutional filters, is particularly well-suited for analyzing complex eye image patterns.

The use of transfer learning played a crucial role in achieving high performance, especially given the limited size of the eye image dataset. By leveraging pre-trained models on large-scale datasets, the proposed approach was able to learn meaningful and discriminative features without requiring extensive training data. Additionally, fine-tuning all layers allowed the models to adapt more effectively to the specific characteristics of eye images.

Data augmentation also contributed significantly to improving model generalization and reducing overfitting. The applied augmentation techniques enabled the models to become more robust to variations in eye orientation, lighting conditions, and image quality, which are common challenges in medical image analysis.

Despite the promising results, some limitations remain. The performance of the proposed system may be influenced by dataset size and image quality. Furthermore, while the achieved accuracy is high, clinical validation using larger and more diverse datasets would be necessary before deploying such a system in real-world medical settings. Overall, the results highlight the potential of deep learning models as supportive tools for automated eye image analysis.

7. CONCLUSION

In this work, a deep learning–based approach for eye image classification was proposed and evaluated. The system utilized convolutional neural networks combined with transfer learning to automatically extract meaningful features from eye images. Several pre-trained models were investigated, and their performance was compared using appropriate evaluation strategies.

The experimental results demonstrate that the proposed approach achieves high classification accuracy, with the InceptionV3 model providing the best performance among the evaluated architectures. These findings indicate that deep learning techniques are effective for automated eye image analysis and have strong potential for supporting medical image classification tasks.

Overall, the proposed method offers a reliable and efficient solution for eye image classification, reducing the dependency on manual analysis and enabling faster and more consistent decision-making. With further validation on larger and more diverse datasets, such systems could serve as valuable supportive tools in clinical and healthcare applications.

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