

AI FOR EARLY DETECTION OF STROKE USING NEUROIMAGING

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Abstract. *Stroke is a leading cause of death and long-term disability worldwide, and early detection is crucial for effective treatment and improved patient outcomes. Neuroimaging modalities, including computed tomography (CT) and magnetic resonance imaging (MRI), are essential for identifying ischemic and hemorrhagic strokes. However, manual interpretation of neuroimages can be time-consuming, subjective, and dependent on radiologist expertise. Artificial intelligence (AI) and deep learning methods, particularly convolutional neural networks (CNNs), provide automated, accurate, and rapid analysis of neuroimaging data, enabling early detection, classification, and localization of stroke lesions. This paper reviews current AI methodologies for stroke detection using CT and MRI, discusses challenges such as image variability, limited annotated datasets, and model interpretability, and highlights the potential of AI systems to enhance diagnostic accuracy, optimize clinical workflows, and improve patient outcomes.*

Keywords. *Stroke, neuroimaging, CT, MRI, artificial intelligence, deep learning, convolutional neural networks, automated detection, ischemic stroke, hemorrhagic stroke*

Introduction

Stroke is one of the leading causes of morbidity and mortality worldwide, with significant implications for long-term disability and healthcare systems. Early and accurate detection is critical for timely intervention, including thrombolysis, mechanical thrombectomy, and medical management, which can significantly reduce neurological damage and improve patient outcomes. Neuroimaging modalities, particularly computed tomography (CT) and magnetic resonance imaging (MRI), play a central role in stroke diagnosis, enabling visualization of ischemic areas, hemorrhages, and vascular abnormalities. However, manual interpretation of these images is time-intensive, highly dependent on radiologist expertise, and subject to inter-observer variability, which may delay diagnosis and treatment.

Artificial intelligence (AI) and deep learning methods, especially convolutional neural networks (CNNs), have emerged as transformative tools for automated stroke detection and classification. These models can analyze complex imaging data, accurately identifying stroke lesions, determining their location and volume, and distinguishing between ischemic and hemorrhagic strokes. Hybrid approaches that integrate neuroimaging with clinical data, including patient age, comorbidities, and laboratory findings, further enhance predictive performance and support personalized intervention strategies.

Challenges in AI-based stroke detection include variability in imaging protocols, differences in scanner types and quality, and limited availability of large, annotated datasets for training robust models. Techniques such as data augmentation, transfer learning, and multi-center data integration are employed to improve model generalizability and robustness. Additionally, interpretability of AI models is essential for clinical adoption; visualization methods like heatmaps and saliency maps allow clinicians to understand which regions of the neuroimage influenced AI predictions, increasing trust in automated systems.

This paper reviews current AI methodologies for early detection and classification of stroke using CT and MRI, discussing model architectures, segmentation and classification strategies, clinical applicability, challenges, and future directions. The study emphasizes the potential of AI to improve diagnostic accuracy, facilitate early intervention, and enhance patient outcomes in stroke care.

Main Body

Artificial intelligence (AI) and deep learning have transformed the early detection of stroke by enabling automated analysis of neuroimaging data. Convolutional neural networks (CNNs) are widely used to extract complex spatial features from CT and MRI scans, allowing accurate detection of ischemic and hemorrhagic stroke lesions. These models can identify subtle changes in brain tissue, detect early infarcts, and differentiate between stroke subtypes, which is crucial for selecting appropriate treatment strategies.

Segmentation models, such as U-Net and its variants, are employed to delineate stroke-affected regions accurately, facilitating volumetric assessment, monitoring disease progression, and guiding intervention planning. Hybrid models that combine imaging data with patient-specific clinical parameters, including age, comorbidities, laboratory values, and neurological assessment scores, improve predictive accuracy and support personalized treatment strategies.

Challenges in AI-assisted stroke detection include variability in imaging protocols, differences in scanner resolution, and limited availability of large annotated datasets. Data augmentation, transfer learning, and multi-center dataset integration are commonly used to enhance model robustness and generalizability. Additionally, artifacts in imaging and

patient motion can affect model performance, requiring careful preprocessing and quality control.

Interpretability of AI models is essential for clinical integration. Visualization techniques such as heatmaps, saliency maps, and Grad-CAM allow clinicians to identify regions of the brain that influenced model predictions, building trust and facilitating validation of AI outputs. Ethical considerations, regulatory approval, and patient privacy are critical for safe deployment of AI systems in clinical practice.

Overall, AI-based neuroimaging analysis offers a powerful approach for rapid, accurate, and reproducible stroke detection, supporting early intervention, reducing diagnostic errors, and improving patient outcomes. Integration of these systems into clinical workflows can optimize resource utilization, enhance decision-making, and transform stroke care.

Discussion

The application of artificial intelligence (AI) in stroke detection has substantially improved the diagnostic process in neurology and radiology. Deep learning models, particularly convolutional neural networks (CNNs), enable automated analysis of CT and MRI scans, providing rapid and accurate detection of ischemic and hemorrhagic lesions. Segmentation techniques, such as U-Net and its variants, allow precise delineation of stroke-affected areas, facilitating volumetric assessment, monitoring disease progression, and informing treatment decisions.

Hybrid and multi-modal approaches that integrate neuroimaging with clinical data, including patient age, comorbidities, laboratory values, and neurological assessments, further enhance predictive accuracy and enable personalized intervention strategies. Techniques such as data augmentation, transfer learning, and multi-center dataset integration improve model generalizability, addressing challenges related to variability in imaging protocols and limited annotated datasets.

Interpretability of AI models is critical for clinical adoption. Visualization tools like heatmaps, saliency maps, and Grad-CAM allow clinicians to understand which brain regions influenced model predictions, fostering trust in automated systems. Despite significant progress, challenges such as regulatory approval, ethical considerations, patient privacy, and potential algorithmic bias remain. Prospective validation in diverse populations and integration into routine clinical workflows are essential for safe and effective deployment.

Overall, AI-assisted neuroimaging systems enhance early detection of stroke, optimize clinical workflows, reduce diagnostic errors, and improve patient outcomes, demonstrating the transformative potential of AI in modern stroke care.

Conclusion

In conclusion, artificial intelligence and deep learning provide powerful tools for early detection of stroke using CT and MRI neuroimaging. CNN-based models and advanced segmentation techniques enable accurate identification and localization of ischemic and hemorrhagic lesions, supporting timely clinical interventions and improving patient outcomes.

Although challenges such as imaging variability, limited annotated datasets, and the need for interpretability persist, ongoing methodological innovations, multi-center data integration, and visualization tools continue to strengthen AI applications in stroke detection. Integration of AI-assisted neuroimaging into clinical practice can optimize diagnostic accuracy, facilitate early intervention, reduce errors, and enhance overall patient care, highlighting the transformative impact of AI in neurology.

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