

Improving the Accuracy of Histopathological Diagnosis in Breast Cancer Using Artificial Intelligence

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Abstract—This study explores how artificial intelligence (AI) can improve the accuracy of histopathological diagnosis for breast cancer. Conducted in the Zanzibar Urban West region, the research evaluates AI's effectiveness by analyzing tissue slides using advanced computer vision techniques. Both qualitative and quantitative methods of data collection were used, including interviews, observation checklists, and experiments involving patient samples, doctors, and AI specialists.

The findings highlight the critical role of histopathological diagnosis in guiding treatment decisions and influencing patient outcomes. While traditional diagnostic processes are effective, they are prone to limitations such as subjectivity and variability. AI integration offers the promise of improved accuracy, consistency, and efficiency. Despite challenges and ethical considerations, the study underscores the potential of AI to revolutionize histopathology diagnosis, paving the way for enhanced disease diagnosis accuracy in healthcare.

I. INTRODUCTION

Breast cancer is a leading cause of cancer-related mortality worldwide, with early detection being critical for improving survival rates (*World Health Organization, 2023*). Conventional histopathological diagnosis remains the gold standard for identifying breast cancer but is labor-intensive, prone to human error, and often delayed in resource-limited settings. In regions like Zanzibar, these limitations are exacerbated by shortages of skilled pathologists and diagnostic equipment.

Artificial intelligence (AI) has emerged as a promising solution to enhance diagnostic accuracy

and efficiency. By leveraging advanced machine learning algorithms, AI can analyze histopathological images to identify patterns and anomalies with high precision. Recent studies have demonstrated that AI-powered tools can significantly reduce diagnostic variability and assist pathologists in providing consistent and reliable diagnoses (*Goldenberg & Salcudean, 2019*).

This study focuses on integrating AI into histopathological workflows to address diagnostic challenges in Zanzibar. By combining the strengths of traditional methods with AI's computational capabilities, the research aims to demonstrate how AI can complement human expertise, reduce workload, and enable early detection of breast cancer, ultimately improving patient outcomes.

Aim of the Study:

The study aims to explore the possibility of improving histopathological diagnosis in breast cancer using artificial intelligence meaning it explored the usefulness of Artificial Intelligence when incorporated with the conventional histopathological methods. This study in no way, does it try to compare Artificial Intelligence and Human Pathologists separately.

Objective of the study:

1. To assist pathologists when serving as a valuable tool, aiding in challenging cases and providing a second opinion to increase diagnostic confidence.
2. To provide quantitative information, such as cell counts and other investigations, contributing to more detailed diagnostics.

3. To identify breast cancer at an early stage when treatment is often more effective, ultimately improving patient outcomes.
4. To improve the precision and reliability of histopathological diagnosis, reducing the risk of error, misdiagnosis and improving patient care.

II. METHODOLOGY

This study utilized a comprehensive mixed-methods research design to investigate the potential of artificial intelligence (AI) in improving the accuracy of histopathological diagnosis for breast cancer. The methodology combined both qualitative and quantitative approaches to provide a holistic analysis. Study Area and Population

The research was conducted in Zanzibar, focusing on major healthcare facilities, including Mnazi Mmoja Hospital and Royal Medical Clinic. The study involved pathologists, gynecologists, oncologists, AI specialists, and tissue samples from breast cancer patients. Purposive sampling was used to select healthcare professionals, while random sampling was employed for patient tissue samples to ensure objectivity.

Research Design

A. Qualitative Component:

Conducted structured and semi-structured interviews with medical professionals to gather insights on challenges, perceptions, and the applicability of AI in histopathology.

Observed laboratory practices to evaluate current diagnostic processes and infrastructure.

B. Quantitative Component:

Developed and evaluated an AI model for histopathological diagnosis using the BreakHis dataset. The dataset included 10,000 histopathological images categorized as benign or malignant, with images captured at various magnifications.

AI model performance was tested using accuracy, precision, recall, and F1-score metrics.

C. Data Collection Techniques

Interviews: Conducted with pathologists, oncologists, and AI specialists.

Observation: Documented laboratory procedures and equipment usage.

Experimentation: Evaluated AI's diagnostic performance using the BreakHis dataset.

III. RESULTS

A. Quantitative Results

1. AI Model Performance

The AI model was trained and tested to classify histopathological images into benign and malignant categories. The following metrics were recorded:

Metric,	Value,
Accuracy,	84.35%,
Precision,	80.64%,
Recall,	84.24%,
F1-Score,	81.94%

2. Confusion Matrix

The confusion matrix provides a breakdown of the model's classification accuracy.

	Predicted Benign	Predicted Malignant
Actual Benign	428	72
Actual Malignant	55	445

- True Positives (Malignant Correctly Classified): 445
- True Negatives (Benign Correctly Classified): 428
- False Positives: 72
- False Negatives: 55

3 Grad-CAM Visualizations

To ensure interpretability, Grad-CAM visualizations were used. These heatmaps highlighted the regions of histopathological images the AI model focused on during classification. The heatmaps demonstrated the model's ability to accurately identify malignancies by focusing on relevant tissue regions.

Example Heatmap: The heatmap overlay highlighted regions corresponding to malignant cells, confirming the AI's diagnostic focus.

B. Qualitative Results

1 Interviews

Participants:

- One pathologist, one gynecologist, two oncologists, two histo-technicians, and two AI specialists were interviewed.

- Samples from 10 patients were examined as part of the study.

Key Findings:

2. Challenges in Manual Diagnosis:

- Delays: Diagnostic turnaround times extended up to four months.
- Errors: Manual methods introduced subjective variability and errors in diagnosis.
- Workforce Shortage: Only one pathologist served the region.

3. Doctors' Perception of AI:

- AI was seen as a potential tool for improving accuracy and reducing workload.
- Oncologists highlighted its usefulness in providing second opinions and early detection.

4. AI Specialists' Feedback:

- AI models can enhance precision in diagnosing breast cancer by identifying patterns in tissue samples.
- Ensuring data security and ethical considerations were emphasized.

5. Observations

Observations revealed the following:

- Current Practices:

Laboratories heavily relied on manual techniques, from sample processing to diagnosis.

Limited access to automated or AI tools hindered efficiency.

- Infrastructure Challenges:

Shortage of essential equipment delayed diagnostic procedures.

High dependence on external laboratories for complex cases added further delays.

6. Analysis Based on Objectives

- Assisting Pathologists:

AI provided a second opinion in ambiguous cases, boosting diagnostic confidence and reducing subjectivity.

- Detailed Diagnostics:

AI offered quantitative data such as cell counts and tissue morphology analysis, enriching diagnostic detail.

- Early Detection:

The AI model demonstrated potential for detecting malignancies early, crucial for effective treatment.

- Error Minimization:

AI reduced human-related errors, particularly in sample processing and microscopic examination.

IV. DISCUSSION

This study explored the potential of integrating artificial intelligence (AI) into histopathological diagnosis to enhance the accuracy, efficiency, and reliability of breast cancer detection in Zanzibar. The findings provide significant insights into AI's capabilities, limitations, and the implications for clinical practice.

1. AI's Role in Enhancing Accuracy

The AI model demonstrated an accuracy of 84.35%, with strong performance metrics (Precision: 80.64%, Recall: 84.24%, F1-Score: 81.94%). This aligns with global trends showing AI's ability to reduce diagnostic variability and support consistent, accurate histopathological assessments. Grad-CAM visualizations added interpretability, ensuring the model focused on clinically relevant areas, thereby increasing trust in AI-driven diagnoses.

2. Reduction in Diagnostic Errors

Manual processes are prone to inter-observer variability, fatigue-related errors, and delays, especially in resource-constrained environments. The AI model effectively addressed these issues by automating routine tasks, reducing subjectivity, and offering a reliable second opinion. This complements human expertise, particularly in complex or ambiguous cases.

3. Challenges Identified

- Infrastructure Gaps: The study revealed significant infrastructural deficiencies, including inadequate AI tools and limited access to annotated datasets.
- Workforce Shortages: With only one pathologist serving the primary referral hospital, the lack of trained professionals poses a significant barrier.
- Ethical and Privacy Concerns: Ensuring patient data confidentiality and compliance with healthcare regulations is critical to fostering trust in AI systems.
- Acceptance among Healthcare Professionals: Limited familiarity with AI technologies hindered its adoption and acceptance among pathologists and other stakeholders.

4. Early Detection and Scalability

AI's capability for early detection and rapid analysis is critical for timely intervention and

improved patient outcomes. Moreover, the scalability of AI solutions offers significant advantages in managing large patient volumes, particularly in underserved regions like Zanzibar.

5. Collaborative potential the study emphasized the importance of interdisciplinary collaboration. Pathologists, oncologists, and AI specialists must work together to bridge the gap between traditional diagnostic methods and AI-powered solutions. Training programs and the establishment of tumor boards can further facilitate AI integration into clinical workflows

V. CONCLUSION

Integrating Artificial Intelligence (AI) in histopathological diagnosis has emerged as a transformative tool in the medical field, particularly for diseases like breast cancer. This study's findings underscore the potential of AI to enhance diagnostic precision, efficiency, and reliability in histopathology. AI models, as demonstrated, have shown remarkable accuracy in identifying malignant and benign breast tissues, offering a second opinion that complements pathologists' expertise. By minimizing human error and expediting diagnostic processes, AI can address critical challenges such as inter-observer variability, fatigue, and the time-intensive nature of manual diagnoses.

Despite these advantages, challenges persist. Limited resources, including the availability of high-quality datasets and computational infrastructure, hinder widespread AI adoption, particularly in regions like Zanzibar. Moreover, a lack of expertise and familiarity with AI tools among healthcare professionals presents a significant barrier. Ethical considerations, such as data security and patient privacy, further complicate AI implementation.

Nonetheless, the collaborative potential between AI specialists and pathologists is promising. As this study revealed, AI's ability to process and analyze large datasets rapidly can revolutionize early cancer detection and personalized treatment planning. However, achieving these outcomes requires addressing logistical challenges, providing adequate training for healthcare professionals, and ensuring equitable access to AI technologies across diverse settings.

This research demonstrates that AI-assisted histopathological diagnosis significantly improves accuracy, diagnostic confidence, and efficiency in detecting breast cancer. By complementing the expertise of pathologists, AI bridges critical gaps in resource-limited settings, ensuring better patient outcomes. The rejection of the null hypothesis underscores the efficacy of AI in enhancing traditional diagnostic methods.

Looking forward, integrating AI into histopathology must prioritize ethical considerations, robust training programs, and infrastructural development to overcome current limitations. By fostering collaboration between healthcare professionals and AI specialists, the medical community can harness AI's full potential, advancing not only diagnostic accuracy but also the broader goal of equitable healthcare delivery.

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