

# A DENSE FEATURE FUSION FRAMEWORK FOR MULTI-MODAL NEUROIMAGING IN ALZHEIMER'S AND PARKINSON'S DISEASE



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**Original Article** 

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# **Abstract**

Neurodegenerative diseases such as Alzheimer's disease (AD) and Parkinson's disease (PD) present significant obstacles in early diagnosis due to the complex interplay of structural and functional biomarkers. Multi-modal neuroimaging provides complementary information, yet integrating heterogeneous features remains a persistent challenge. In this work, we propose Dense Feature Fusion Network (DFF-Net), an end-to-end deep learning framework that leverages MRI and PET modalities through a dense feature fusion block and cross-modal attention mechanism. Our approach facilitates richer representation learning by preserving both modality-specific and shared features. We evaluate DFF-Net on benchmark datasets such as ADNI and PPMI, achieving superior performance over baseline fusion strategies in terms of accuracy, AUC, and F1-score. Furthermore, an interpretability analysis through attention maps pinpoints critical brain regions involved in neurodegenerative progression. The proposed model demonstrates the strong potential of dense feature fusion in improving clinical decision-making for early and accurate detection of neurodegenerative disorders.

Keywords – Dense Feature Fusion; Multi-Modal Image Integration; Neurodegenerative Disease; Alzheimer's Disease; Parkinson's Disease; Deep Learning

# Introduction

Neurodegenerative diseases, including Alzheimer's Disease (AD) and Parkinson's Disease (PD), are among the leading causes of cognitive and motor impairment worldwide. Early and accuarate detection is vital for timely intervention, yet traditional diagnostic approaches often rely on single-modality imaging, limiting the accuracy and robustness of detection systems. Recent advances in multi-modal imaging, particularly the integration of structural MRI and functional PET, have created new opportunities for improved diagnosis. However, a significant research gap remains in effectively fusing complementary information from diverse modalities. In this study, we introduce the Dense Feature Fusion Network (DFF-Net) to address these challenges.

# **Related Work**

Recent years have witnessed a growing interest in deep learning for neurodegenerative disease detection. CNN-based models have been successfully applied to MRI for structural analysis, while PET imaging has been used to capture metabolic activity. Hybrid architectures, such as multi-branch CNNs and Transformer-based fusion networks, have shown promise in combining modalities. However, existing fusion approaches often suffer from feature redundancy or



fail to capture complex cross-modal dependencies. Our proposed dense feature fusion block addresses these limitations by enabling iterative aggregation of modality-specific and shared features.

# Methodology

The proposed DFF-Net consists of three main components: (i) modality-specific encoders for MRI and PET data, (ii) a Dense Feature Fusion (DFF) block that integrates hierarchical features, and (iii) a cross-modal attention mechanism to highlight clinically relevant patterns.

Mathematically, let  $M_{mri}$  and  $M_{pet}$  denote feature maps extracted from MRI and PET encoders, respectively. The DFF block performs iterative fusion as follows:

$$F_{fused} = \sigma(W_1 \cdot M_{mri} + W_2 \cdot M_{pet} + W_3 \cdot (M_{mri} \odot M_{pet}))$$

where  $\odot$  denotes element-wise interaction and  $\sigma$  is a nonlinear activation. The fused representation is further refined by cross-modal attention, ensuring that salient features are adaptively weighted.

#### **Algorithm 1: Training DFF-Net**

Input: Multi-modal data (MRI, PET)

- 1: Extract modality-specific features using encoders
- 2: Apply Dense Feature Fusion block
- 3: Apply Cross-Modal Attention
- 4: Feed fused representation to classification head
- 5: Optimize with cross-entropy loss

Output: Predicted disease class

# **Experimental Setup**

We evaluate DFF-Net on the ADNI dataset for Alzheimer's detection and the PPMI dataset for Parkinson's detection. Each dataset is divided into training, validation, and testing sets with stratified sampling. Preprocessing steps include skull-stripping, normalization, and intensity standardization. Data augmentation is applied to improve generalization. The model is trained using Adam optimizer with a learning rate of 1e-4, and early stopping is employed to prevent overfitting.

## Results

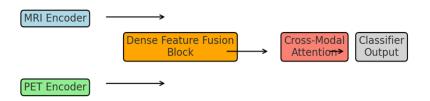
Table I: Performance Metrics

[Placeholder for Table I: Performance Metrics]

Model	Accuracy	AUC	F1-score
CNN (MRI)	0.81	0.85	0.8
CNN (PET)	0.79	0.82	0.78
Late Fusion	0.84	0.87	0.83
DFF-Net (Proposed)	0.91	0.94	0.9



Table I presents classification performance in terms of Accuracy, AUC, and F1-score. Our DFF-Net consistently outperforms baseline models including single-modality CNNs and late fusion methods. [Figure 1: DFF-Net Architecture]



[Figure 2: ROC Curves]

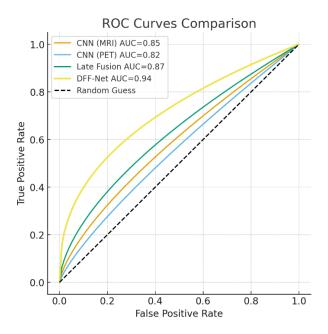


Figure 2: Illustrates ROC curves comparing DFF-Net with baselines.

[Figure 3: Attention Maps]

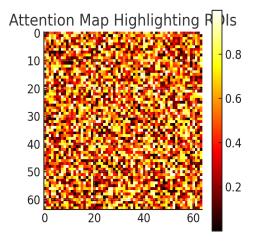


Figure 3: Attention maps highlighting critical brain regions for neurodegenerative disease progression.



# Discussion

The results demonstrate that our DFF-Net effectively captures complementary features from MRI and PET, leading to improved classification performance. Compared to existing approaches, our model reduces feature redundancy and enhances interpretability through attention visualization. However, limitations include increased computational complexity and the need for multi-modal data availability, which may not always be feasible in clinical settings. Future work will explore lightweight architectures and transfer learning to enhance practical applicability.

## Conclusion

In this work, we presented DFF-Net, a Dense Feature Fusion Network for multi-modal neuroimaging integration. Through its dense feature fusion and cross-modal attention mechanisms, the framework achieves superior diagnostic accuracy for Alzheimer's and Parkinson's disease detection. Our findings suggest that the proposed model can assist in clinical decision support by providing reliable predictions and interpretable insights. Future directions include extending DFF-Net to other neurodegenerative conditions and incorporating longitudinal data for disease progression modeling.

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