

# Hiding the Medical images by Reversible Data Hiding

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**Abstract:** *A data hiding is a technique that is used for embedding the important information into images. The degradation of the original image like medical imagery and military imagery are not allowed in reversible data hiding. The secret data is attached in the compression domain and the receiver needs to store the image in a compression mode to save storage space. An encoding data will be compressed and encrypted by the secret key. A decode message presents the secret data that can be seen by the encrypted key. This paper proposed to hide the medical images. The experimental result shows that proposed system can provide good performance to secure important data.*

**Keywords:** *Medical images, Secure data, RDH.*

## I. INTRODUCTION

The main purpose of data hiding is to extend the communication security by embedding secret messages into a hidden carrier and then transmitting it to receiver side. The embedding process will normally introduce permanent distortion and rebuild from the marked image. The uncompressed image using an encryption key to produce an encrypted image and then a data hider embeds extra data into the encrypted image using a data-hiding key. To apply reversible data hiding to encrypted images to take off the embedded data before the image decryption. The information is embedded the data that it is perceptually and analytically unpredictable. Data embedding also support an embedding valuable control and information. Reversible data embedding, which is frequently referred as lossless data embedding, is a technique that embedding the data into an image in a reversible manner. The original uncompressed image using an encryption key to produce an encrypted image and then a data hider embeds extra data into the encrypted image. To decrease the transmission time the data compression is essential. The encrypted image can be compressed by using various techniques. In Lossy compression of an encrypted image flexible compression ratio is done. The data exchange involves transmission of several types of data format like medical images, texts, and graphs. Data hiding techniques can also be used for authentication. As a persuasive means for security protection, encryption converts the ordinary signal into irregular data, so that the traditional signal processing normally takes place before encoding or after decoding.

## II. REVERSIBLE DATA HIDING

A reversible data hiding is a type of process covertly embedded in a noise-tolerant signal such as audio or image data. It is used to recognize ownership of the copyright of particular signal. It is the process of hiding digital information in a carrier signal. The hidden information does not need to contain a relation to the carrier signal. It can be used to verify the authenticity or purity of the carrier signal or to exhibit the identity of its owners. It is used for tracing copyright infringements and for banknote authentication.

A data is embedded into a digital signal at each point of distribution. If a work is found later, then the data can be fetch from the copy and the source of the distribution is known. Data hiding is based on the concept of separation of the design decisions in a computer program, if the design decision is switched, which are used to protect the other parts of the program from expanded modification. The protection giving a stable connection which protects the remaining program from the implementation. Compression schemes can be roughly divided into two classes. Lossless compression, here can't allow throwing away any data at all and the compressed data must be completely rectifiable. That is, the compression must be reversible.

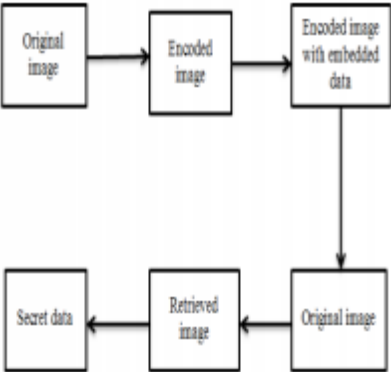
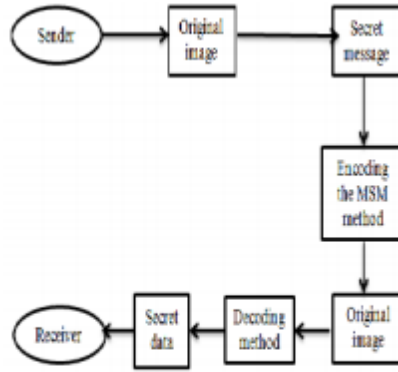


Fig 1: The process of Reversible data hiding

### III. BLOCK DIAGRAM



**Fig2: Architecture of proposed System**

### III. PROPOSED METHOD

The main concept in the shifted-histogram data hiding method is to determine a pair of maximum and minimum in the image pixel intensity histogram and then shift the intensity of those pixels within the maximum and minimum frequency range by one level, towards the minimum frequency level. This produces an empty space on the shifted histogram at the vicinity of the maximum pixel density. To embed a data stream, the modified image is re-scanned and when the pixel of maximum frequency is encountered if the corresponding bit in the embedding stream is “1” its gray level is incremented by one level otherwise it is unaltered. Thus the maximum number of bits that can be hidden into the image is equal to the maximum frequency of the original histogram. The data hiding mechanism is reversible, due to created gap. The maximum and minimum frequency values of the pixels are also recorded as side information. If the minimum frequency is non-zero, then their numbers also need to be embedded as the side information, which decreases the data hiding capacity of the system. Although Ni et. al. have shown that their algorithm for a vast variety of images outperforms almost all the known reversible data hiding methods so far, we believe for medical images it has two drawbacks:

1. If the intensity of the pixels in a region of interest lay in the maximum and minimum range of the histogram, then their values are also modified.

2. If the minimum frequency of the histogram is non-zero, the coordinates of all the pixels with minimum frequency have to be embedded as side information. This controls the data hiding capacity of the system. Now if the image is partitioned into sub-images, and the histogram shifting is applied to each image tile, not only the above shortfalls are overcome, but some additional benefits can be gained. These include:

1. Region of Interest: The image can be divided into parts such that, only the histograms of the non-region of interest image tiles are modified and the data is hidden.

2. High payload: In the shifted-histogram based data hiding method, the maximum number of hidden bits is equal to the maximum frequency of the pixel intensity histogram. When

the histograms of the image tiles are considered separately, it is intuitive that the sum of individual maxima is greater than the maximum of the original image intensity histogram. Hence shifted histograms of the image tiles can hide more data.

3. Higher goal quality: In the shifted-histogram method, the marked image quality based on the number of pixels whose intensity lay between the maximum and minimum frequency pixels, irrespective of the number of hidden bits. That is, image quality due to embedding of one bit of data is as bad/good as if the maximum payload (equivalent to the maximum of histogram) is embedded. On the other hand, with the histograms of image tiles, they may be first prioritized, in the order of their least intensity distance between the maximum and minimum frequency. Data are embedded in the ordered image tiles till it is fully loaded, and the left over data will be carried over to the next image tile, and so on. In this way, for a given payload, the intensity of the smallest number of pixels is modified and hence image quality will be at its best.

4. Higher subjective quality: Rather than prioritizing the image tiles as in 3 above, they may be prioritized based on their spatial content. Data hiding can be started from those image tiles that have the highest spatial details. In this case, due to spatial masking of the human visual system, the subjective quality of the watermarked image will be at its best.

5. Narrower histogram: Some image tiles have much narrower histograms than that of the whole image. This is specifically true for medical images that lead to the following useful properties for data hiding:

a) In the broader histogram of the whole image the minimum frequency may not be zero. For reversible data hiding, their positions need to be determined and given as side information, which greatly reduce the data hiding capacity. On the other hand, in the narrower histograms of the image tiles, the minimum frequencies are more likely to be zero.

b) Narrower histograms presents the opportunities of selecting the most appropriate pairs of peaks-zeros that will improve the quality of the marked images.

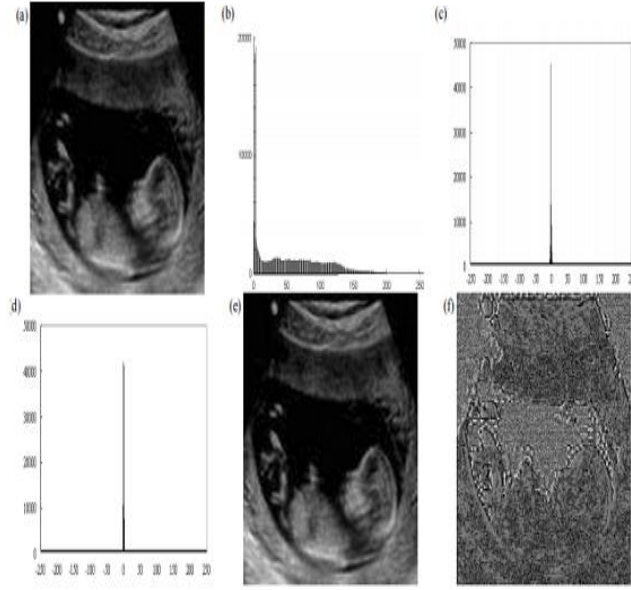


Fig 3: a) Medical Image, b) Original Image Histogram h, c) Histogram h1, d) Histogramh2, e) Stego Image, f) The difference image.

## IV. EXPERIMENTAL RESULT

The experimentation has been carried out using MATLAB R2014a platform for different images. We have used medical and general test images for testing our algorithm. It is assumed that size of general and medical test images is such that it is divisible by  $(4 \times 4)$ , i.e. it leads to integral number of  $4 \times 4$  blocks. The medical images used for evaluating the performance of the presented scheme are shown in Fig. 4. The digital watermark used for authentication is of the size  $64 \times 64$ . The scheme has been tested for a total payload of 196,608 bits or 0.75 bits per pixel (bpp). The image quality has been established by carrying out objective quality analysis in terms of Peak Signal to Noise Ratio (PSNR) and Structural Similarity Measure Index (SSIM) between original image and ‘watermarked & attacked’ image. The content authentication of the proposed scheme has been evaluated by calculating Bit Error Rate (BER%) and Normalized Cross-Correlation (NCC) between embedded ‘watermark and data’ and extracted ‘watermark and data’ for various attacks. Eqs. (1), (2), (3), (4), (5), (6), (7), (8), (9) have been used for computation of various objective quality metrics.

$$MSE = \frac{1}{MN} \sum_{i=1}^M \sum_{j=1}^N (x_{ij} - x'_{ij})^2 \quad (1)$$

$$PSNR = 10 \log \frac{(2^n - 1)^2}{MSE} = 10 \log \frac{(255)^2}{MSE} \text{ dB} \quad (2)$$

In the above formulae; M, N are the dimensions of the original image and the watermarked image; x (i, j) is the (i, j) th pixel value of original image and (x'i, j) is the (i, j) th pixel intensity value of watermarked image.

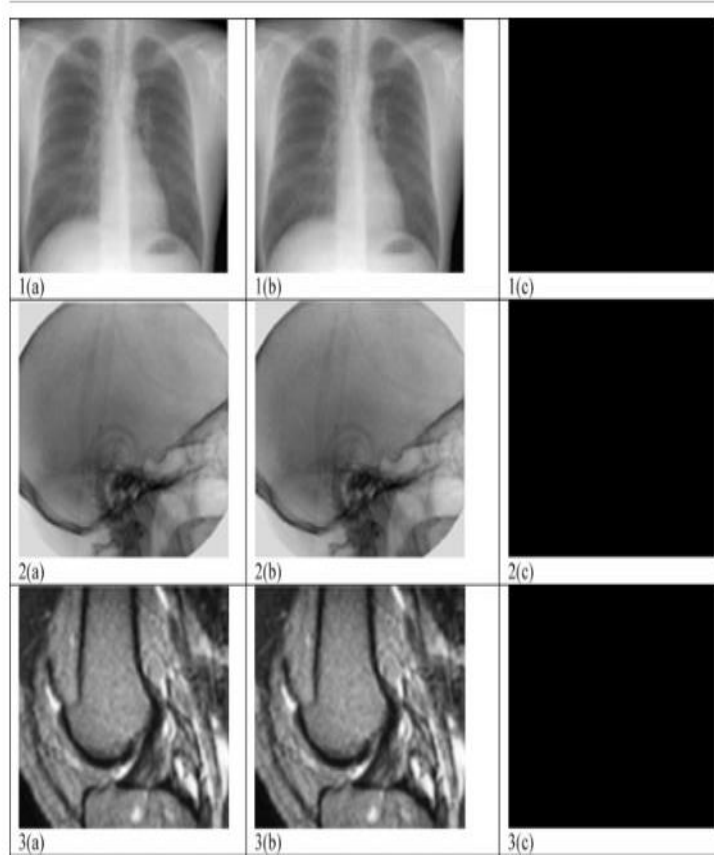


Fig 4: (1a–3a) Original images, (1b–3b) watermarked images for a payload of 0.75bpp, (1c–3c) difference of original and recovered images.

The Structural Similarity Index (SSIM) is based on the calculations of three terms, namely the luminance, contrast and structure. The overall index is a given by:

$$SSIM(x, y) = [l(x, y)]^\alpha \cdot [c(x, y)]^\beta \cdot [s(x, y)]^\gamma \quad (3)$$

Where,

$$l(x, y) = \frac{2\mu_x\mu_y + C_1}{\mu_x^2 + \mu_y^2 + C_1} \quad (4)$$

$$c(x, y) = \frac{2\sigma_x\sigma_y + C_2}{\sigma_x^2 + \sigma_y^2 + C_2} \quad (5)$$

$$s(x, y) = \frac{\sigma_{xy} + C_3}{\sigma_x \sigma_y + C_3} \quad (6)$$

where  $\mu_x$ ,  $\mu_y$ ,  $\sigma_x$ ,  $\sigma_y$ , and  $\sigma_{xy}$  are the local means, standard deviations, and cross-covariance for images  $x$ ,  $y$ . For default exponents and default selections of  $C_3$  the expression is given by:

$$SSIM(x, y) = \frac{(2\mu_x\mu_y + C1)(2\sigma_{xy} + C2)}{(\mu_x^2 + \mu_y^2 + C1)(\sigma_x^2 + \sigma_y^2 + C2)} \quad (7)$$

$$BER = \frac{1}{MN} \left[ \sum_{i=1}^M \sum_{j=1}^N W_m(i, j) + W_{m\epsilon}(i, j) \right] \times 100 \quad (8)$$

$$NCC = \frac{\sum_{i=1}^M \sum_{j=1}^N W_m(i, j) \times W_{m\epsilon}(i, j)}{\sum_{i=1}^M \sum_{j=1}^N W_m(i, j)^2} \quad (9)$$

In above equations;  $M$ ,  $N$  are the dimensions of the original logo and extracted logo;  $w_m(i, j)$  is the  $(i, j)$ th pixel of original watermark and  $w_{m\epsilon}(i, j)$  is the  $(i, j)$ th pixel of the extracted logo.

## V. CONCLUSION

In this paper, we proposed to hide the medical images for transmitting the secured message. The experimental result shows that the secret data can be encoded and decoded. In future work, we will pay our attention to secret file transmitting to one place to another place.

## VI. REFERENCES

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