ORIGINAL ARTICLE



Aerial low-altitude remote sensing and deep learning for in-field disease incidence scoring of virus yellows in sugar beet

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Abstract

This study investigates the potential of high-resolution (<0.5 cm/pixel) aerial imagery and convolutional neural networks (CNNs) for disease incidence scoring in sugar beet, focusing on two important aphid-transmitted viruses, beet mild yellowing virus (BMYV) and beet chlorosis virus (BChV). The development of tolerant sugar beet cultivars is imperative in the context of increased disease management concerns due to the ban on neonicotinoids in the European Union. However, traditional methods of disease phenotyping, which rely on visual assessment by human experts, are both time-consuming and subjective. Therefore, this study assessed whether aerial multispectral and RGB images could be harnessed to perform automated disease ratings comparable to those performed by trained experts. To this end, two variety trials were conducted in 2021 and 2022. The 2021 dataset was used to train and validate a CNN model on five cultivars, while the 2022 dataset was used to test the model on two cultivars different from those used in 2021. Additionally, this study tests the use of transformed features instead of raw spectral bands to improve the generalization of CNN models. The results showed that the best CNN model was the one trained for BMYV on RGB images using transformed features instead of conventional raw bands. This model achieved a root mean square error score of 11.45% between the model and expert scores. These results indicate that while high-resolution aerial imagery and CNNs hold great promise, a complete replacement of human expertise is not yet possible. This research contributes to an innovative approach to disease phenotyping, driving advances in sustainable agriculture and crop breeding.

KEYWORDS

convolutional neural networks, phenotyping, unmanned aerial vehicle, virus yellows

1 | INTRODUCTION

In recent years, the ban on neonicotinoid insecticides within the European Union has resulted in the resurgence of aphidtransmitted plant viral diseases that were previously well controlled in sugar beet (Hossain et al., 2021). Virus yellows (VY) is a disease complex caused by different virus species that are transmitted by the green peach aphid (Myzus persicae). These virus species include two poleroviruses from the Solemoviridae family, beet mild yellowing virus (BMYV) and beet chlorosis virus (BChV), a closterovirus from the Closteroviridae family, beet yellows virus (BYV) and a potyvirus from the Potyviridae family, beet mosaic virus (BtMV) (Hossain et al., 2021). Of these, BMYV and BChV



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have emerged as significant threats to sugar beet cultivation in Europe, causing yield losses of up to 23% and 24%, respectively (Hossain et al., 2021). In the absence of neonicotinoid insecticides for seed coating and subsequent disease control, the development of resistant cultivars is the most sustainable solution (Hossain et al., 2021). However, developing tolerant sugar beet cultivars is hindered by the phenotyping process, which has become a major bottleneck (Mahlein et al., 2019).

Phenotyping plays a pivotal role in the development of tolerant and resistant cultivars, as it helps in identifying plants with desirable traits (Yang et al., 2017). Traditionally, this process has been timeconsuming and resource-intensive as it relies on tedious visual examination carried out by trained experts (Mahlein et al., 2019). Despite providing insightful data, this method is inherently subjective and can be inconsistent across experts (Bock et al., 2020). Therefore, the term 'ground reference' is preferred to 'ground truth' when referring to ground data collected by trained experts, as the latter implies that ground data are error-free (Justice & Townshend, 1981). The urgent need to accelerate and enhance the objectivity of breeding resistant sugar beet cultivars requires a paradigm shift in phenotyping approaches (Mahlein et al., 2019).

Contributing to such a shift might be the rapid evolution of unmanned aerial vehicle (UAV) technologies, integrated with increasingly sophisticated data analysis approaches including machine learning (ML) and deep learning (DL), which provides an innovative solution to the challenges posed by traditional phenotyping methods (Soori et al., 2023). UAVs equipped with high-resolution cameras (<0.5 cm resolution) have the potential to capture detailed information on plant health status swiftly and objectively. By leveraging ML and DL techniques, these images can be systematically and automatically analysed, eliminating the subjectivity associated with human evaluations (Bock et al., 2022; Mahlein et al., 2019).

Several studies have explored the potential of UAVs for stress phenotyping applications. For example, a study by Trapp (2015) compared tolerant and susceptible recombinant inbred lines of dry bean under terminal drought conditions using high-resolution multispectral images. Plot-to-plot comparison of the green normalized difference vegetation index (GNDVI) with yield data resulted in a strong correlation (r = 0.79, p = 0.01). Another study by Chivasa et al. (2020) evaluated 25 maize varieties grown in a trial inoculated with maize streak virus. Multispectral images were analysed using random forest (RF) models. Correlations between the UAV-derived data and manual maize streak virus scores were significant (r=0.74-0.84). Barreto et al. (2023), with overall accuracy values of up to 85.8%, established a pipeline based on ML methods to extract disease-relevant parameters for Cercospora leaf blight in sugar beet phenotyping. Ispizua Yamati et al. (2024) also used UAV multispectral and RGB images combined with different ML and DL approaches, including convolutional neural network (CNN) models to score Rhizoctonia crown and root rot severity on sugar beet. In this study, precision values ranging from 0.73 to 0.85 could be achieved for Rhizoctonia crown and root rot scoring.

While the promise of UAVs and ML/DL for disease phenotyping€ is compelling, it is essential to acknowledge that their effectivenes varies depending on the particular model and pathosystem consid ered (Dhaka et al., 2021). As the ML and DL approaches are empirica modelling procedures, large volumes of data are needed to capture often complex, dynamic and variable phenomena. Furthermore while DL techniques such as CNNs are considered cutting-edge image analysis methods, cases exist where they have been out o performed by older and less complex ML methods (Li et al., 2020) Therefore, each plant-pathogen interaction may necessitate tailored approaches for accurate disease assessment.

This study aims to develop a CNN-based approach for automatical incidence scoring of virus yellows disease in sugar beet and to eval ₹ uate the effectiveness of this proposed approach. In this study, we explore the utilization of transformed features, as opposed to raw spectral bands, to enhance the generalization of CNNs. To the best of our knowledge, this approach has not been extensively investing gated in the context of CNNs. Furthermore, unlike most previous CNN studies, the model developed in this research was rigorously ibility of our accuracy assessments. This study unmatery to the improvement of phenotyping approaches for the development of phenotyping approaches approaches for the development of phenotyping approaches ap assessed on a completely independent dataset, reinforcing the cred $\frac{\sigma}{\omega}$

MATERIALS AND METHODS

Study area and experimental design

Data from two different trials were harnessed for the analysis p\. €. sented in this study. In 2021, a virus yellows (VY) variety trial virus yellows (VY) variety (VY The experimental site was located in Sieboldshausen, Germany (51°28′13″ N, 09°54′20″ E). The trial was arranged in a two-factoria design with four replicates. The two factors were the inoculation variant comprising three inoculation strategies (not inoculated, in oculated with BMYV and inoculated with BChV) and the genotype (from susceptible to tolerant) comprising five genotypes from threed. different suppliers (Table 1). Seeds were sown on 3 April 2021, in plots (8 × 1.5 m) containing three rows of sugar beets, resulting in ap € proximately 100 plants in each plot. To prevent unintentional viru \S_2 spread by insects, border rows and control plots were sprayed with insecticides. To produce viruliferous aphids (M. persicae) for the inoc ulation, healthy aphids were placed on virus-infected mother plants that were produced in sufficient quantities in advance in the green house. The aphids were placed on plants infected with the individua viruses for at least 48 h to acquire the virus. The inoculation of plants was conducted on 31 May 2021, with 10 viruliferous wingless aphids being transferred to 3% of the plants per plot. Inoculated plants were at the phenological stage corresponding to plants with four เ unfolded and fully developed leaves (BBCH 14; Meier et al., 2009).

Data from another VY cultivar trial, conducted in 2022, on two sugar beet genotypes different from those used in 2021, wag overned by the 3653059, 2024, 0, Downloaded from https://bsppjournals.onlinelibrary.wiley.com/doi/10.1111/ppa.13973

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FIGURE 1 Composed RGB image of the first experimental site on 8 June 2021 under sunny conditions. Different inoculation variants (Control, beet mild yellowing virus [BMYV], beet chlorosis virus [BChV]) as well as genotypes (coded from 1 to 5) are depicted. More information on the genotypes is given in Table 1. The discontinuity sign in the image indicates that the 'Control' treatment was further away from the two other treatments (about 75 m).

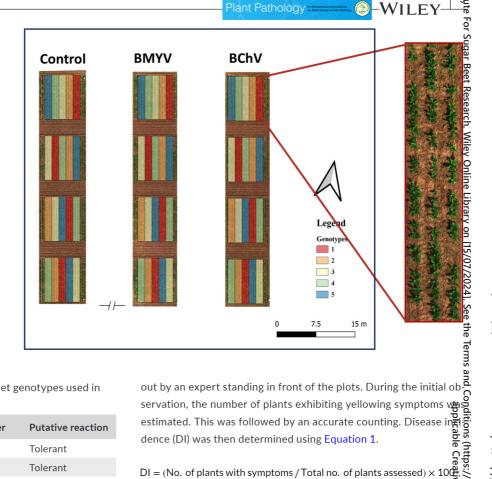


TABLE 1 Information about the sugar beet genotypes used in this study.

Genotype	Breeder's code	Provider	Putative reaction
1	BMYV2021	KWS	Tolerant
2	ST-VY220	Strube	Tolerant
3	TolSV2020	SES	Tolerant
4	ST-VY120	Strube	Susceptible
5	ZR 2313	SES	Susceptible

harnessed to validate the developed models. The trial included a tolerant (T) and a susceptible (S) genotype (Figure 2). The inclusion of both susceptible and tolerant genotypes provided a high-variability dataset to develop a more robust model (Tasdizen et al., 2018). The experiment was carried out at an independent site located in Harste, Germany (51°36′00″ N, 09°52′00″ E). For this second experiment, only data for BMYV was available. Again, the trial was arranged in a two-factorial design, but this time the factors were the time of inoculation and the genotypes, with four replicates for each combination. The time of inoculation included four levels: (a) not inoculated, (b) inoculated at the phenological stage BBCH 12 (mid-May), (c) inoculated at row closure (mid-June) and (d) inoculated 3 weeks after row closure (mid-July). An overview of the experimental design is presented in Table 2. For this experiment, plots were sown on 31 March 2022. The plots had the same dimensions as those in the 2021 experiment and were separated by a 6m distance to avoid contaminations between different virus species tested on the same field location.

Visual assessment of VY 2.2

In both years, the monitoring of virus symptoms was performed from June to September (Table 3). The visual assessment was carried

 $DI = (No. of plants with symptoms / Total no. of plants assessed) <math>\times 100$

nce (DI) was then determined using Equation 1.

= (No. of plants with symptoms / Total no. of plants assessed) × 100 in elibrary.

Both numbers (DI values from estimate and counting) were the state of compared (data not shown) and yielded nearly similar values, allow. ≤ ing for subsequent observations to rely solely on estimates of be number of plants displaying symptoms. The yellowing symptoms caused by BMYV and BChV could be distinguished from other types of yellowing, including those caused by insects and wilt, as they typ ically manifest initially at the leaf margin but subsequently spread conditions) on Wiley over the entire leaf, as described by Hossain et al. (2021).

2.3 Image acquisition

To allow for automatic scoring, aerial imaging was conducted in $\operatorname{ad}_{\mathcal{Q}}$ dition to manual scoring. The UAV platform was the Matrice 210 (SZ DJI Technology Co.). Multispectral images with 1280×960 pixels were captured using the Altum multispectral snapshot camera (MicaSense)ই The Altum has five multispectral bands including blue (B: 475 nm cen tre wavelength, 32nm bandwidth), green (G: 560nm, 27nm), red (R골 668nm, 14nm), red edge (RE: 717nm, 12nm) and near-infrared (NIR $^{\Omega}_{\Sigma}$ 842nm, 57nm) and an integrated long-wave thermal infrared (TIR) sensor (band range 8-14 μm). Images were captured simultaneously on the six different cameras in 16-bit raw GeoTIFF format. The capture was done at an altitude of 15 m above the soil level, with 70% forward and lateral overlap and an average flight speed of 0.4 m/s, resulting in an average ground sampling distance (GSD) of 4mm. A grey reference overned by the

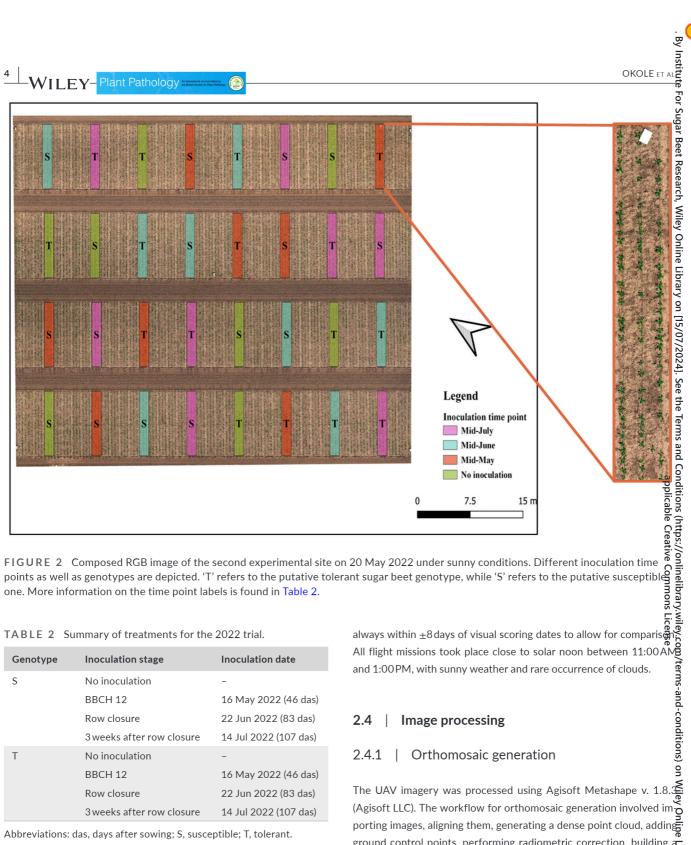


TABLE 2 Summary of treatments for the 2022 trial.

Genotype	Inoculation stage	Inoculation date
S	No inoculation	-
	BBCH 12	16 May 2022 (46 das)
	Row closure	22 Jun 2022 (83 das)
	3 weeks after row closure	14 Jul 2022 (107 das)
Т	No inoculation	-
	BBCH 12	16 May 2022 (46 das)
	Row closure	22 Jun 2022 (83 das)
	3 weeks after row closure	14 Jul 2022 (107 das)

Abbreviations: das, days after sowing; S, susceptible; T, tolerant.

panel, provided by the camera manufacturer, was imaged directly before and after each flight for radiometric calibration using the empirical line method (Aasen et al., 2018). To ensure precise georeferencing and co-registration, ground control points were installed at the corner points of the field and measured with a real-time kinematics (RTK) positioning system for referencing the generated map according to its actual geographic location. Eventually, georeferencing errors of less than 0.1 cm were achieved for all flights. A total of six flights in 2021 and five in 2022 were conducted as reported in Table 3. Flight missions were

(Agisoft LLC). The workflow for orthomosaic generation involved im $\overline{\mathfrak{g}}$ porting images, aligning them, generating a dense point cloud, adding ground control points, performing radiometric correction, building digital elevation model (DEM), generating an orthomosaic and export ing it as a tagged image file. For all these steps, preconfigured set ing it as a tagged image file. For all these steps, preconfigured set for tings from the Metashape Professional User Manual v. 1.8 (Agisoficial LLC, 2022) were used with slight modifications as reported in Table S1 of use, OA articles of use, OA articles are governed by the guish between healthy and diseased plants, individual sugar beed by the

TABLE 3 Visual scoring and unmanned aerial vehicle (UAV) mission dates.

Sual scoring 3 Jun 2021 (30 dai) 3 Jul 2021 (45 dai) 3 Jul 2021 (60 dai)	UAV mission 8 Jun 2021 (10 dai) 28 Jun 2021 (30 dai) 13 Jul 2021 (45 dai)	Days of difference - 0	Crop phenological stage BBCH 37 BBCH 39
3 Jun 2021 (30 dai) 3 Jul 2021 (45 dai) 3 Jul 2021 (60 dai)	8 Jun 2021 (10 dai) 28 Jun 2021 (30 dai) 13 Jul 2021 (45 dai)	- O	BBCH 37 BBCH 39
3 Jun 2021 (30 dai) 3 Jul 2021 (45 dai) 3 Jul 2021 (60 dai)	28 Jun 2021 (30 dai) 13 Jul 2021 (45 dai)	0	BBCH 39
3 Jul 2021 (45 dai) 3 Jul 2021 (60 dai)	13 Jul 2021 (45 dai)		
3 Jul 2021 (60 dai)		0	BBCH 39
	3 Aug 2021 (66 dai)	+6	BBCH 39
Sep 2021 (103 dai)	2 Sep 2021 (96 dai)	-7	BBCH 39
	29 Sep 2021 (123 dai)	-	BBCH 39
	20 May 2022 (50 das)	-	BBCH 17
2 Jun 2022 (83 das)	23 Jun 2022 (84 das)	+1	BBCH 39
Jul 2022 (98 das)	-	-	BBCH 39
2 Jul 2022 (113 das)	19 Jul 2022 (110 das)	-3	BBCH 39
Aug 2022 (126 das)	-	-	BBCH 39
7 Aug 2022 (139 das)	24 Aug 2022 (146 das)	+7	BBCH 39
Sep 2022 (154 das)	-	-	BBCH 39
Sep 2022 (168 das)	23 Sep 2022 (176 das)	+8	BBCH 39
A Significant	ul 2022 (98 das) Jul 2022 (113 das) ug 2022 (126 das) Aug 2022 (139 das) ep 2022 (154 das) Sep 2022 (168 das) ical stage BBCH 17 re	Il 2022 (98 das) - Jul 2022 (113 das) 19 Jul 2022 (110 das) ug 2022 (126 das) - Aug 2022 (139 das) 24 Aug 2022 (146 das) ep 2022 (154 das) - Sep 2022 (168 das) 23 Sep 2022 (176 das) ical stage BBCH 17 refers to the stage where place to the stage where leaves cover 70% of the growes cover 90%–100% of the ground.	Jul 2022 (113 das) 19 Jul 2022 (110 das) -3 ug 2022 (126 das) - - Aug 2022 (139 das) 24 Aug 2022 (146 das) +7 ep 2022 (154 das) - - Sep 2022 (168 das) 23 Sep 2022 (176 das) +8 ical stage BBCH 17 refers to the stage where plants have sevents to the stage where leaves cover 70% of the ground and BBCI

plants had to be detected and then cropped from the orthomosaic. Our approach, developed in Python v. 3.8 (Python Software Foundation, 2021), used a modified version of the workflow by Günder et al. (2022) for individual plant detection. Modification included the removal of the Hough transform-based row detection algorithm, which in our case resulted in the omission of many sugar beet plants. After plant centroid detection using the approach by Ispizua Yamati et al. (2024), individual sugar beet plants were cropped around the centroid position. A ground distance of 22.5 cm was considered on either side of the plant to crop a 45 cm square image around the centroid of the plant. This image size allows the incorporation of an adult plant's largest approximated surface area (Ispizua Yamati et al., 2024). For further processing, these images were assigned to classes according to the variety, the inoculation variant and the ID of the plot they were cropped from.

CNN modelling and training 2.4.3

A CNN was used for the classification. The architecture of the CNN model was similar to that of AlexNet (Krizhevsky et al., 2017), which proved to be suitable for other disease classification tasks (Saleem et al., 2019), with slight modifications as presented in Table S2. To build the training dataset, two replicate plots out of four were considered for each genotype. The other two plots were left for validation. Images that were cropped from inoculated plots were assessed visually for symptoms and were labelled as 'Diseased' if yellowing and necrotic symptoms were present. The same was done for noninoculated plots and the images were assigned to the 'Healthy' class. Eventually, the dataset was made of 5801 images, of which 3352 belonged to the class 'Healthy', 1722 to the class 'BChV' and 727 to

This included random rotations, shifts and slight zooms and even ਪ੍ਰਿੰਡ ਤੋਂ ally 5000 images were obtained for each class. In total, four diff ent models were trained, including two for each disease (i.e., BC) and BMYV).

For each disease, one model was constructed using only the R bands of the Altum camera and the other model was built by con ≦ sidering all bands of the Altum camera, except the thermal. The models are later referred to as RGB-based and multispectral-based models, respectively. At this point, a choice of the type of training features had to be made. After a first evaluation using raw spectra bands (i.e., red, green, blue, ...), it was noticed that the models did not achieve a good validation accuracy (results not shown). Therefore the final models were trained on preprocessed features instead of raw spectral bands. The latter approach showed a more robust val idation accuracy. For RGB-based models, three features were com $\stackrel{\ \, {}_{\ \, \ \, }}}}}}}}}}}}}}\,$ puted, namely hue (H; Equation 2), saturation (S; Equation 3) and green leaf index (GLI; Equation 4). For multispectral-based models $\overset{\checkmark}{\circ}$ four features were computed, among which were the hue and sat uration as before, and the optimized soil-adjusted vegetation index (OSAVI; Equation 5) and the normalized difference red-edge (NDRE) index (Equation 6).

$$H = \begin{cases} 0, & \text{ifmax}(R,G,B) - \min(R,G,B) = 0 \\ 60 \times \frac{G - B}{\max(R,G,B) - \min(R,G,B)}, & \text{ifmax}(R,G,B) = R \\ 60 \times \left(\frac{B - R}{\max(R,G,B) - \min(R,G,B)} + 2\right), & \text{ifmax}(R,G,B) = G \\ 60 \times \left(\frac{R - G}{\max(R,G,B) - \min(R,G,B)} + 4\right), & \text{ifmax}(R,G,B) = B \end{cases}$$

$$S = \begin{cases} 0, & \text{if } max(R,G,B) = 0\\ \frac{min(R,G,B)}{max(R,G,B)}, & \text{otherwise} \end{cases}$$
 (3)

$$GLI = \frac{2G - R - B}{2G + R + B} \tag{4}$$

$$OSAVI = \frac{NIR - R}{NIR + R + 0.16}$$
 (5)

$$NDRE = \frac{NIR - RE}{NIR + RE}$$
 (6)

The training process was carried out using the adaptive moment estimation (Adam) optimizer, with an initial learning rate (Lr), a batch size and a maximum number of epochs of 0.001, 256 and 100, respectively. Throughout the training, two metrics were continuously monitored: validation loss, which gauges how well the model is performing and how close its predictions are to the actual values, and validation accuracy, which indicates the proportion of correct predictions relative to the total predictions made on the validation dataset. The damping factor for the Lr was set to 0.1 with a patience of three epochs, so that the Lr was lowered by factor 0.1 after three consecutive epochs with no improvement in the validation loss. Early stopping was also applied with a patience of 7 to avoid overfitting.

The architecture and weights of the proposed CNN model were finally stored as a hierarchical data format (H5) file for further validation processes.

2.4.4 Visual assessment of CNN models

While deep learning models are often regarded as black box models (Bilbrey et al., 2020), it is possible to reveal and visualize the features in the image that have relevance for the classification. For a visual explanation of models in this study, the gradient-weighted class activation mapping (Grad-CAM) method was used (Selvaraju et al., 2017). Here, the final convolutional layer is converted into a localization map that indicates significant image areas for predicting a specific class (in this situation, 'diseased'). These localization maps were then plotted as heat maps to visually assess whether the model selects areas that can be biologically linked to the examined disease symptoms.

2.4.5 Accuracy assessment (validation and testing)

As the data was pooled and analysed from two different datasets, the accuracy assessment of the model was also done based on this background. A thorough accuracy assessment should include validation and testing. During the validation phase, the model's performance is evaluated on a separate dataset not used during training, ensuring that it generalizes well to unseen data. This step is vital to detect overfitting, where the model performs exceptionally well on \overline{R} the training data but poorly on new data (Vabalas et al., 2019). The testing phase is the final step in assessing accuracy. In this phase ក្ល the model is put to the ultimate test by evaluating its performance $^{\circ}$ on an entirely independent dataset, distinct from both the training and validation datasets. This ensures that the model's accuracy re $\frac{1}{6}$ mains robust and trustworthy, offering a true reflection of its real $\hat{\underline{o}}$ world capabilities (Malebary & Khan, 2021).

First, validation was done on the two plots per treatment that were left untouched during model training in 2021 for each assess ment date. Secondly, testing was performed using the dataset col9 lected on different genotypes in a different location and setting in $\overline{\mathbf{G}}$ 2022. The CNN model's prediction (i.e., healthy or diseased) was re corded for all plant images from the same plot, and disease incidence (%) in each plot was calculated as the ratio of images classified as containing diseased plants. The resulting scores for each plot were then stored in a data frame, along with the ground reference score for the same plot, for further agreement analyses between the two scores.

Statistical analysis

2.5 | Statistical analysis

An analysis of variance (ANOVA) was carried out to test the effect the genotype on disease incidence across different blocking fact $\Re \vec{\xi}$ (i.e., inoculation variant, inoculation time point). The agreement \mathbb{B} tween the model-derived score and the ground reference score was assessed by fitting a linear function, using metrics such as the slo the Pearson correlation coefficient (r), the coefficient of determing tion (R²) and the root mean squared error (RMSE) as indicators **∑**É the performance. In addition, Lin's concordance correlation coe \Re cient (CCC) was computed to account for both precision and bias (Lin, 1989). All statistical analyses were performed in R software (R Core Team, 2016), and all analyses involving comparisons of means were carried out using the 'agricolae' package (De Mendiburu, 2014) Additionally, disease development was analysed by fitting disease progress models to the data using the 'epifitter' package in R (Alve & Del Ponte, 2021). Four models of disease progression were fitted to the incidence data. These models were the Gompertz, logistic \$\oldsymbol{2}\$ exponential and monomolecular models. The coefficient of deter mination was used to select the best-fitting model (in our case, the $\ensuremath{\widetilde{\phi}}$ logistic and Gompertz models for the years 2021 and 2022, respec tively). The infection rate (IR) value derived from the model was there used to compare different disease evolution dynamics.

3 | RESULTS

3.1 | Disease development in different trials

First, only the expert-based incidence and disease progression are outlined, without linking them to the CNN-based scoring. The results of the expert-based disease incidence scoring for the years of the expert-based disease incidence scoring for the years of the expert-based disease incidence scoring for the years of the expert-based disease incidence scoring for the years of the expert-based disease incidence scoring for the years of the expert-based disease incidence scoring for the years of the expert-based disease incidence scoring for the years of the expert-based disease incidence scoring for the years of the expert-based disease incidence scoring for the years of the years of the expert-based disease incidence scoring for the years of the years

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2021 and 2022 are presented in Figures 3 and 4, respectively. During the rating period in year 2021, the different genotypes showed a heterogenous response to BMYV and BChV. Although the most tolerant genotype to BMYV was also the most tolerant to BChV, the two diseases showed slightly different dynamics over the growing season. For BMYV, differences in expert-based scores were observed as early as 30 days after infection (dai) (p=0.046), while for BChV, the first significant differences across genotypes were only detected at 45 dai (p=0.050). Later in the season (60 dai), no more significant differences could be observed across genotypes for BMYV (p=0.272), whereas for BChV, the difference was still significant (p=0.039). Towards the end of the growing season, disease incidence was severe for all genotypes except for BMYV on genotype 1, which had a significantly lower incidence compared to other genotypes (p=0.045).

For the year 2022 (Figure 4), only BMYV was used to inoculate one susceptible and one tolerant genotype at different time

points, which were approximately 1 month apart from each other As expected based on infection rate (IR) values (Table 4), the dis ease developed faster for the treatments that were inoculated ear lier (mid-May). For this inoculation time point, the disease developed faster in the susceptible genotype (IR=0.112) compared to the tol $\frac{\omega}{2}$ erant one (IR = 0.036). Although at the end of the season the disease incidence was the same for both the tolerant and the susceptible genotypes reaching 100% (p=0.185), the progression of the dis \tilde{Q} ease was different. Delaying the inoculation time point by approx imately 1 month (mid-June) had a significant effect on the disease dynamics. The infection rate was dramatically reduced for both the susceptible (IR=0.023) and the tolerant (IR=0.015) genotype com pared to early inoculation (mid-May). A significant difference be tween the two genotypes could only be seen towards the end of the $\stackrel{\circ}{\mathcal{C}}$ season (p = 0.027, p < 0.001 and p = 0.027 at 126, 154 and 168 days after sowing [das], respectively). Further delaying the inoculation time point by 3 weeks (mid-July) made the difference between the

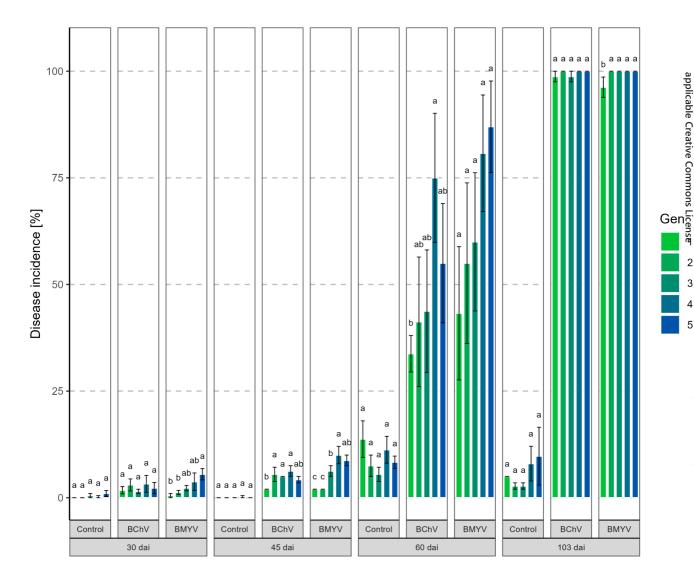
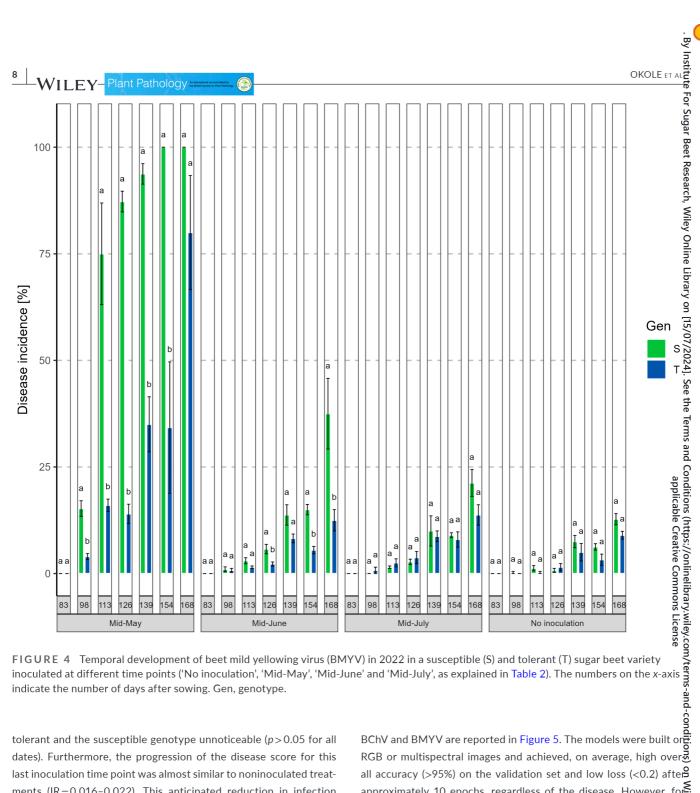


FIGURE 3 Temporal development of disease on different genotypes following beet chlorosis virus (BChV) and beet mild yellowing virus (BMYV) inoculation (experiment in 2021). The numbers in the legend and the corresponding colour relate to the different genotypes described in Table 1. Dai, days after inoculation; Gen, genotype.



dates). Furthermore, the progression of the disease score for this last inoculation time point was almost similar to noninoculated treatments (IR=0.016-0.022). This anticipated reduction in infection rates is likely to be due to the shorter time left for disease development and less conducive climatic conditions for disease transmission by the aphid when inoculation occurs late in the growing season. The variability in the dataset due to different infection rates ultimately permitted a comprehensive assessment of the CNN model.

Evaluation of the predictive ability of the **CNN** models

In this section, differences between RGB and multispectral data will be reported. The accuracy and loss curves during training of the CNN models used to discriminate healthy plants from those infected with

RGB or multispectral images and achieved, on average, high over all accuracy (>95%) on the validation set and low loss (<0.2) after $\stackrel{\mathbf{S}}{\hookrightarrow}$ approximately 10 epochs, regardless of the disease. However, for BChV, the multispectral-based model showed better performance $\widehat{\underline{\hspace{-0.05cm}}}$ as indicated by its lower loss compared to the RGB-based model Conversely, for BMYV, both the RGB-based and the multispectral based model showed similar performance.

By analysing, the activation maps of the last convolutional layer produced by the Grad-CAM method (Figure 6), it was observed that and chlorotic windows (highlighted by white circles in the image) to make its predictions. In contrast, the RGB-based CNN model relied on other features besides visible symptoms (highlighted by red cir cles). For the BMYV disease, the RGB-based model relied on visible symptoms to make its predictions, while the multispectral-based $\frac{1}{2}$ model sometimes based its decision on visible symptoms and other overned by the

TABLE 4 Disease development models fitted to disease incidence data for different sugar beet genotypes in both trials across different blocking factors (i.e., inoculation variant, inoculation time point).

Year	Inoculation variant	Genotype	Model	IR	IR_se	IR_ci_lwr [95%]	IR_ci_upr [95%]	R^2
2021	BChV	1	Logistic	0.123	0.017	0.051	0.194	0.965
	BChV	2	Logistic	0.149	0.017	0.077	0.221	0.976
	BChV	3	Logistic	0.120	0.008	0.084	0.156	0.990
BChV	4	Logistic	0.148	0.017	0.077	0.219	0.976	
	BChV BMYV	5	Logistic	0.154	0.015	0.087	0.220	0.980
		1	Logistic	0.119	0.019	0.039	0.199	0.953
	BMYV	2	Logistic	0.163	0.019	0.080	0.247	0.973
	BMYV	3	Logistic	0.152	0.011	0.102	0.201	0.989
	BMYV	4	Logistic	0.144	0.014	0.083	0.205	0.981
	BMYV	5	Logistic	0.141	0.020	0.053	0.229	0.960
Control	Control	1	Logistic	0.093	0.060	-0.166	0.351	0.545
	Control	2	Logistic	0.084	0.055	-0.152	0.319	0.539
	Control	3	Logistic	0.045	0.056	-0.194	0.284	0.245
	Control	4	Logistic	0.053	0.031	-0.082	0.187	0.586
	Control	5	Logistic	0.058	0.061	-0.204	0.319	0.310
ear/	Inoculation time point	Genotype	Model	IR	IR_se	IR_ci_lwr [95%]	IR_ci_upr [95%]	R ²
022	No inoculation	S	Gompertz	0.017	0.002	0.011	0.022	0.921
	No inoculation	Т	Gompertz	0.017	0.002	0.011	0.023	0.922
	Mid-May	S	Gompertz	0.112	0.011	0.083	0.141	0.921 0.922 0.952 0.889
	Mid-May	Т	Gompertz	0.036	0.006	0.021	0.050	0.889
	Mid-June	S	Gompertz	0.023	0.002	0.017	0.029	0.955
	Mid-June	T	Gompertz	0.015	0.002	0.009	0.022	0.955 0.886 0.935 0.896
	Mid-July	S	Gompertz	0.022	0.003	0.015	0.029	0.935
Mic	Mid-July	Т	Gompertz	0.016	0.002	0.010	0.023	0.896

Note: Four models were fitted for each case, namely Gompertz, logistic, exponential and monomolecular, and only the best model was retained. The genotypes for 2021 are coded from 1 to 5 and are further described in Table 1.

Abbreviations: BMYV, beet mild yellowing virus; BChV, beet chlorosis virus; IR, infection rate; IR_ci_lwr (95%) and IR_ci_upr (95%), lower and upper limits of the 95% confidence interval for the IR estimate, respectively; IR_se, standard error of the infection rate; S, susceptible; T, tolerant.

times on irrelevant features in the image (i.e., shadows and healthy tissues).

Comparison between automatic scoring of the disease using a CNN and expert-based scoring

Figure 7 outlines the comparison between the expert-based disease scores and the model-based disease scores for different diseases and different input image types derived from the year 2021 (validation dataset from the same experimental setup as training data). In general, all model-based scores showed a good agreement with expert-based scores (RMSE < 16%, CCC > 0.90), with the models for BChV being on average more accurate (RMSE < 11%, CCC > 0.94). As expected from the visual assessment of the CNN models for BChV, a slightly better performance was obtained from multispectral images (RMSE=10.5%, CCC=0.954) compared to RGB images (RMSE=10.89%, CCC=0.946). In contrast, the performance of the CNN models for BMYV did not follow the predictions of the vis \S^0 ual assessment. In this case, multispectral images (RMSE=15.35% ₹ CCC = 0.904) showed a slightly higher performance than RGB image \$7. (RMSE=15.7%, CCC=0.901), although the activation map showed that the multispectral-based model made its decision based on bio logically unexplainable features. All CNN models except the RGB $\overline{\mathbf{Q}}$

The CNN models for BMYV were further evaluated using a data of set collected in the year 2022, from a different location and with presented in Figure 8. Although the multiported well in the first year "To tion was inver" compared to the RGB-based model, which showed an even better overned by the

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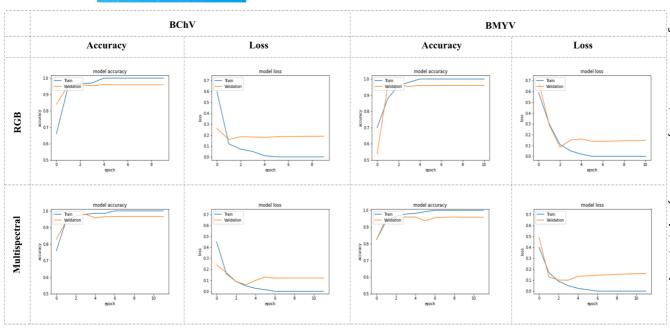


FIGURE 5 Accuracy and loss curves during training of CNN classification models for beet chlorosis virus (BChV) and beet mild yellowing virus (BMYV).

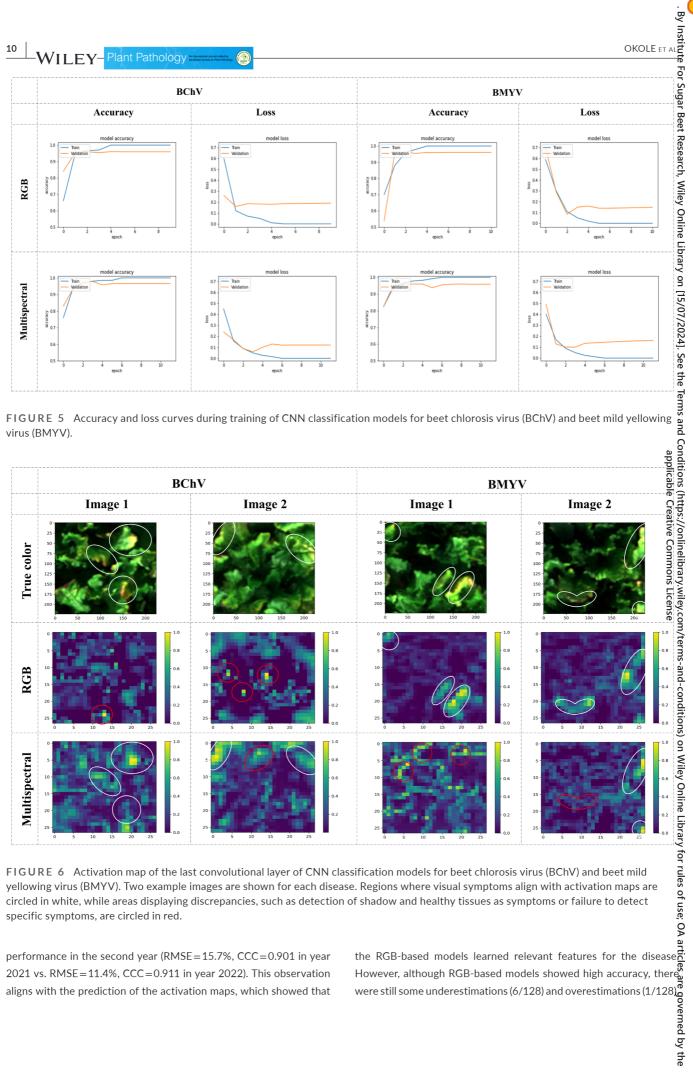
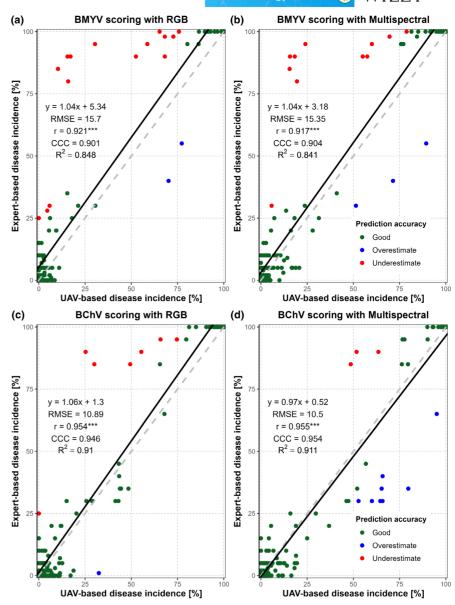


FIGURE 6 Activation map of the last convolutional layer of CNN classification models for beet chlorosis virus (BChV) and beet mild yellowing virus (BMYV). Two example images are shown for each disease. Regions where visual symptoms align with activation maps are circled in white, while areas displaying discrepancies, such as detection of shadow and healthy tissues as symptoms or failure to detect specific symptoms, are circled in red.

performance in the second year (RMSE=15.7%, CCC=0.901 in year 2021 vs. RMSE=11.4%, CCC=0.911 in year 2022). This observation aligns with the prediction of the activation maps, which showed that

FIGURE 7 Comparison between expert-based disease incidence and unmanned aerial vehicle (UAV)-based disease incidence in the year 2021 (first experiment). The coefficient of determination (R^2), the correlation coefficient (r), the root mean square error (RMSE) and Lin's concordance correlation coefficient (CCC) are indicated in the figure. Plots where the score was correctly estimated by the model (less than 15% difference) are shown in green, while overestimated and underestimated ones are shown in blue and red, respectively. The 1:1 line indicating perfect agreement is shown with a grey dashed line. (a, b) Beet mild yellowing virus (BMYV) with RGB and multispectral images, respectively. (c, d) Beet chlorosis virus (BChV) with RGB and multispectral images, respectively.



4 | DISCUSSION

This research was undertaken to assess the potential of UAVs and CNNs for disease incidence scoring in sugar beet phenotyping, specifically for BMYV and BChV. A dataset collected in 2021 was used to train a CNN model, while another dataset collected in 2022, in a different experimental setup and with only BMYV, was used to test the trained CNN model in real-world conditions. In addition, the use of RGB images versus multispectral images as input data to the CNN model, as well as the use of transformed features for training CNN models, were compared.

The research outcomes shed light on the potential of UAVs for advancing disease phenotyping precision in sugar beet breeding. Our most effective CNN model, trained to score disease incidence on RGB images for BMYV in 2021, showed good generalization abilities when evaluated on a hold-out validation dataset in the same year (RMSE=15.7%, CCC=0.904). In addition to the conventional practice of testing the model on a hold-out dataset,

our model was tested on a distinct dataset from 2022, characterized by a different experimental setup and with different genotypes and exhibited even better performance (RMSE=11.43%, CCC=0.911).

Achieving high performance on previously unseen data is a noteworthy outcome. Such an outcome can be attributed to several factors, including (a) an initial training dataset with substantial variability (Therrien & Doyle, 2018), (b) the application of image processing techniques, such as data augmentation (Thanapol et al., 2020), which artificially augments the training dataset's variability, or (c) the training of the model on transformed features (Liu et al., 2020) that are less dependent on conditions that are specific to the training dataset. In our case, the model's robustness results primarily from the utilization of data augmentation techniques, such as random image rotation, flipping, zoom in and zoom out, and, to a greater extent, from the utilization of transformed features instead of the original spectral bands. When the model was exclusively trained on the original spectral bands, it demonstrated strong performance on the

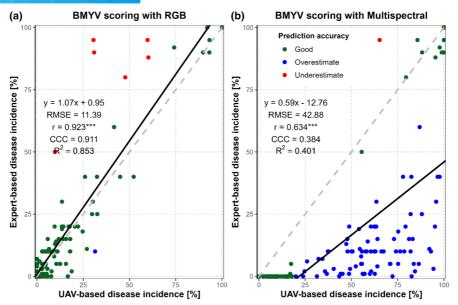


FIGURE 8 Comparison between expert-based disease incidence and unmanned aerial vehicle (UAV)-based disease incidence in the year 2022 (second experiment in a different location). The coefficient of determination (R²), the correlation coefficient (r), the root mean square error (RMSE) and Lin's concordance correlation coefficient (CCC) are indicated in the figure. Plots where the score has been correctly estimated by the model (less than 15% difference) are shown in green, while overestimated and underestimated ones are shown in blue and red, respectively. The 1:1 line indicating perfect agreement is shown with a grey dashed line. (a, b) Beet mild yellowing virus (BMYV) with RGB and multispectral images, respectively.

hold-out subset from the same year. However, it was unable to generate accurate predictions and generalize effectively to the dataset from the following year (results not shown). In contrast, employing transformed features such as the HSV colour space (hue and saturation only) and vegetation indices, which exhibit minimal sensitivity to variations in weather and lighting conditions (Purkis & Klemas, 2011), yielded a more resilient model capable of robust generalization to unseen data. Although feature transformation has been extensively explored and appreciated in the field of conventional machine learning, it remains relatively underexploited in the field of deep learning (Gowda & Yuan, 2019). A study by Krishnaswamy Rangarajan and Purushothaman (2020) showed that using the RGB colour space was better than using the YCbCr colour space to classify eggplant diseases, with overall accuracies (OAs) of 94.7% and 87.8%, respectively, when using pictures taken in laboratory conditions where illumination effects are minimal. When images taken in field conditions were used instead, both models showed similar performance (OA = 99.4%).

The ability to achieve good results on previously unseen data, particularly in the context of changing experimental conditions and genotypic diversity, reflects the promise of data augmentation techniques and adequate use of transformed features when training a CNN model (Gowda & Yuan, 2019). While data augmentation is well known and commonly applied, feature transformation has some potential to further improve the accuracy of CNN models, specifically in the fields of disease detection and diagnosis. In this study, only colour space transformation and vegetation indices were explored as feature transformation approaches. Other feature transformation

approaches such as texture features are also worth investigating to build more robust models. Texture features contain valuable information related to the spatial arrangement of pixels in an image (Muneer & Fati, 2020). For disease detection, texture features can be highly informative, especially in cases where textural variations are key indicators of disease presence.

In addition, this study emphasizes that although CNNs are often regarded as black boxes (i.e., they produce outstanding results with often high accuracy, but the process leading to the result cannot be logically/mathematically tracked; Schramowski et al., 2020), they should not be treated as such (Ras et al., 2022). Neglecting the need to comprehend how CNNs achieve their predictions before deploying them in practical applications can lead to inaccuracies in the outputs. In fact, it is highly probable that a model making accurate predictions based on incorrect assumptions will fail to generalize effectively to unseen data (Ispizua Yamati et al., 2024).

In this study, we evaluated the generalization ability of the different CNN models using the Grad-CAM method. This method uses the final convolutional layer to generate a rough localization map, which is subsequently evaluated visually. While quantitatively evaluating the models' performance (measured by RMSE and CCC) for BMYV detection, it appeared that the model trained on multispectral data (Figure 7a, RMSE=15.4, CCC=0.904) performed slightly better than its RGB-trained counterpart (Figure 7b, RMSE=15.7, CCC=0.901). However, during the visual evaluation using the Grad-CAM method (Figure 6), it became evident that the RGB-based model's predictions exhibited greater robustness. This observation was corroborated when both models were tested on previously unseen data. In

agreement with the results of the visual assessment, the RGB-based model (Figure 8a, RMSE=11.45, CCC=0.911) performed significantly better than its multispectral-based counterpart (Figure 8b, RMSE=42.9, CCC=0.384).

This result underscores that relying solely on metrics such as RMSE or CCC for comparing or selecting the best CNN model can be misleading. It can sometimes happen that the model with the better RMSE or CCC is inferior when performing visual assessments and therefore poorly generalizes to unseen data as observed in the present study. The same observation was made by Lin et al. (2022), who used the Grad-CAM method to visualize the results of three different CNN models trained to detect grapevine foliar diseases. Their results showed that using the F1-score metric to select the best model would have resulted in selecting the wrong model in terms of the visualization map. In fact, the model with the highest F1-score in their study had activation maps that were not focused on disease symptoms. Surprisingly, the model with the lowest F1-score had its activation maps precisely focused on disease symptoms, which ultimately resulted in the highest overall accuracy score on the test set. It is therefore imperative to stop treating CNNs like black boxes and to perform visual assessment before their practical utilization.

This study also highlights the potential of multispectral and RGB imaging for disease phenotyping. Multispectral imagery captures a wider range of spectral information compared to standard RGB imaging, enabling the detection of subtle disease-related changes that may go unnoticed with the naked eye or traditional cameras. This was particularly evident in the context of BChV, where the symptoms were not as prominent as in BMYV (Figure 3). Conversely, in the context of BMYV, where infected plants showed more conspicuous yellowing symptoms, the benefit of using multispectral images instead of RGB images could not be established. This finding demonstrates that the decision whether to use multispectral or RGB imagery should depend on the epidemiology of the specific disease as well.

BMYV and BChV, while both affecting sugar beet, exhibit unique characteristics in terms of disease progression and symptom manifestation. The research emphasizes that a one-size-fits-all approach is not adequate when it comes to UAVs and CNNs for disease incidence scoring. Instead, it highlights the necessity of customizing methodologies, sensor configurations and data processing techniques to suit the distinct behaviours of different pathogens.

Finally, the research findings demonstrate the potential advantages of using UAVs in disease phenotyping and scoring, particularly in the context of virus yellows (BMYV and BChV) in sugar beet. UAVs equipped with high-resolution cameras and advanced image analysis techniques offer several compelling benefits including efficiency, objectivity, cost-effectiveness and consistency (Mahlein et al., 2019). However, it is essential to acknowledge that the complete replacement of human raters with UAVs may not be straightforward and requires careful consideration. In fact, our best model had a RMSE score of 11.45%, indicating that disease incidence can be scored within a confidence interval of $\pm 11.45\%$. This means that genotypes that differ from each other by a score less than 11.45% disease incidence cannot be accurately scored with the developed

UAV-based approach. This limitation is particularly significant when dealing with genotypes that exhibit subtle variations in disease susceptibility.

Complete replacement of human raters by UAVs should be approached with caution, especially in situations where precise discrimination between closely related disease states or genotypes is paramount. Instead, a more pragmatic approach involves leveraging UAVs to streamline the assessment process, improve efficiency and reduce human subjectivity while preserving the role of human experts to validate results, provide domain-specific insights and address cases that fall within the margin of error. In summary, our findings demonstrate the potential of UAVs as powerful tools for disease phenotyping. UAVs equipped with high-resolution cameras can swiftly and objectively assess disease incidence, thereby mitigating the subjectivity and resource-intensive nature of traditional human scoring. The development and application of CNN models further enhance the accuracy and efficiency of disease scoring, offering the promise of rapid advancements in sugar beet breeding. Nevertheless, the path forward involves a nuanced approach, as technology should complement rather than entirely replace human expertise. By harnessing the strengths of both, the phenotyping of disease-resistant sugar beet cultivars can be expedited and optimized.

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CONFLICT OF INTEREST STATEMENT

There is no conflict of interest.

DATA AVAILABILITY STATEMENT

The data that support the findings of this study are available on request from the corresponding author.

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SUPPORTING INFORMATION

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