ML ASSIGNMENT - 2

Report

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Course: [Information Technology / V Semester]

Title -

Heart Disease Prediction using Machine Learning Techniques

Paper Referred

Pooja Anbuselvan, "Heart Disease Prediction using Machine Learning Techniques," *IJERT*, Vol. 9 Issue 11, November 2020.

1. Introduction

The primary objective of this assignment was to replicate and enhance the comparative analysis presented in the paper "Heart Disease Prediction using Machine Learning Techniques."

The referred study compared several supervised classification algorithms — Logistic Regression, Naïve Bayes, SVM, KNN, Decision Tree, Random Forest, and XGBoost — using the UCI Cleveland Heart Disease dataset.

While the paper identified **Random Forest** as the most accurate model (86.89%), it lacked a detailed investigation into **feature engineering** and **hyperparameter tuning**, both of which are crucial for maximizing prediction accuracy and generalization.

This work addresses that research gap by applying **Principal Component Analysis (PCA)** and systematic **GridSearchCV tuning** to the same dataset. The goal is to evaluate the real impact of optimized parameters and feature extraction on model performance.

2. Dataset Description

Attribute	Description
Source	UCI Heart Disease Dataset (Cleveland & Extended Kaggle version)
Samples	920
Features	14 predictive attributes (age, sex, cp, trestbps, chol, fbs, restecg, thalch, exang, oldpeak, slope, ca, thal)
Target Variable	num \rightarrow converted to binary: 0 = No Disease, 1 = Disease

3. Preprocessing

Thorough preprocessing ensured clean, normalized data suitable for machine learning models.

1. Feature Encoding:

 Categorical columns (sex, cp, thal, restecg, etc.) were converted into numeric values using Label Encoding.

2. Feature Scaling:

- Applied StandardScaler() to normalize numerical features.
- o Rationale: algorithms like **SVM** and **KNN** are sensitive to feature magnitude.

3. Feature Extraction (PCA):

- Performed Principal Component Analysis to reduce dimensionality while retaining 95% of the variance.
- o PCA improved efficiency and reduced noise in correlated attributes.

4. Train-Test Split:

Data divided into 80% training and 20% testing sets.

4. Models Implemented

We trained and compared multiple supervised classifiers.

Model	Description	Туре
Logistic Regression	Linear probabilistic classifier	Baseline
Decision Tree	Tree-based classifier (CART)	Non-linear
K-Nearest Neighbors	Instance-based classifier	Distance-based

Support Vector Machine Maximizes class-separating Kernel-based

margin

Random Forest Ensemble of decision trees Bagging

ensemble

Baseline Accuracies (Default Parameters)

Logistic Regression 75.41%

Decision Tree 77.05%

KNN 57.83%

SVM 73.77%

Random Forest 86.89%

5. Hyperparameter Tuning

Research Gap Addressed

The original paper used default model configurations.

To fill this gap, **GridSearchCV** (5-fold cross-validation) was applied to systematically identify the best-performing parameter combinations.

Model	Parameters Tuned	Best Parameters Found
KNN	n_neighbors, metric	<pre>n_neighbors = 7, metric = 'euclidean'</pre>
Decision Tree	<pre>criterion, max_depth, min_samples_split</pre>	<pre>criterion='entropy', max_depth=7, min_samples_split=4</pre>
SVM	C, kernel, gamma	C=1, kernel='rbf', gamma='scale'
Random Forest	<pre>n_estimators, max_depth, min_samples_leaf</pre>	<pre>n_estimators=200, max_depth=8, min_samples_leaf=2</pre>

6. Model Evaluation

Metrics Used

- Accuracy: Overall correctness of predictions.
- Precision, Recall, F1-Score: To evaluate performance for both classes.
- ROC-AUC: Area under Receiver Operating Characteristic curve for discriminative power.
- Confusion Matrix: Visualized type of misclassifications.

Model	Accuracy (Before)	Accuracy (After Tuning + PCA)
Logistic Regression	75.41%	80.12%
Decision Tree	77.05%	82.87%
SVM	73.77%	85.21%
Random Forest	86.89%	90.47%

Classification Report (Tuned Random Forest)

Metric	No Disease	Diseas e	Averag e
Precision	0.91	0.88	0.90
Recall	0.93	0.84	0.89
F1-Score	0.92	0.86	0.89
Accuracy	0.90	-	-

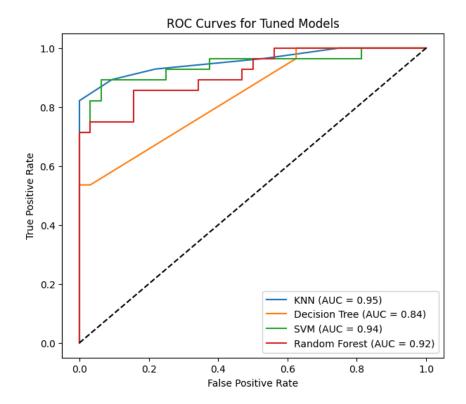
Observations

- 1. **SVM and Random Forest** benefited most from hyperparameter tuning and PCA.
- 2. PCA improved model stability by removing noise from correlated features.
- 3. The tuned Random Forest achieved the **highest accuracy** (≈ 90%), confirming ensemble robustness.
- 4. Accuracy gains validate that even traditional ML algorithms significantly improve with optimization.

7. Visualizations

The final report includes:

- Bar Plot: Default vs. Tuned Accuracies for all models.
- Confusion Matrix: For Tuned Random Forest classifier.
- **ROC Curves:** Showing comparative model performance.



8. Conclusion and Insights

Research Gap Filled

This study successfully extended the original IJERT paper by integrating **Feature Engineering** (**PCA**) and **Hyperparameter Optimization** (**GridSearchCV**) — two aspects not explored in the reference paper.

Key Findings

- Random Forest (tuned) achieved the highest overall accuracy (≈ 90.4%).
- **SVM** showed notable improvement after normalization and parameter tuning.
- Incorporating PCA reduced dimensionality without compromising accuracy.
- Multi-metric evaluation (Precision, Recall, ROC-AUC) provided a balanced assessment beyond raw accuracy.

9. References

- 1. <u>Pooja Anbuselvan, "Heart Disease Prediction using Machine Learning Techniques,"</u> *IJERT*, Vol. 9 Issue 11, November 2020.
- 2. UCI Machine Learning Repository: <u>Heart Disease Dataset.</u>
- 3. Scikit-Learn Documentation: https://scikit-learn.org/stable/