Predictive Modeling for Metabolomics Data

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Chapter 16

Predictive Modeling for Metabolomics Data

Tusharkanti Ghosh, Weiming Zhang, Debashis Ghosh, and Katerina Kechris

Abstract

In recent years, mass spectrometry (MS)-based metabolomics has been extensively applied to characterize biochemical mechanisms, and study physiological processes and phenotypic changes associated with disease. Metabolomics has also been important for identifying biomarkers of interest suitable for clinical diagnosis. For the purpose of predictive modeling, in this chapter, we will review various supervised learning algorithms such as random forest (RF), support vector machine (SVM), and partial least squares-discriminant analysis (PLS-DA). In addition, we will also review feature selection methods for identifying the best combination of metabolites for an accurate predictive model. We conclude with best practices for reproducibility by including internal and external replication, reporting metrics to assess performance, and providing guidelines to avoid overfitting and to deal with imbalanced classes. An analysis of an example data will illustrate the use of different machine learning methods and performance metrics.

Key words Metabolomics, Mass spectrometry, Supervised learning, Performance Metrics, Predictive Modeling

1 Introduction

In the past 20 years, there has been a dramatic increase in the development and use of high-throughput technologies for measuring various types of biological activity. Common examples include transcriptomics (the measurement of gene expression) and proteomics (the measurement of protein levels). The focus of this chapter is on metabolomics, which involves the measurement of small compounds, referred to here as metabolites, on a high-throughput basis. As products of activity at the protein level, metabolites represent an intermediate level between regulatory processes such as methylation and transcription, and the full spectrum of physiological and disease states. One appealing feature of metabolites is their ability to be used as clinical biomarkers, and for this reason, metabolomics has been extensively applied for finding biomarkers and

studying physiological processes and phenotypic changes associated with disease [1-4].

Metabolomics experiments fall into two categories: targeted and untargeted. Targeted metabolomics experiments measure ions from known biochemically annotated metabolites. By contrast, untargeted metabolomics experiments measure all possible ions within a predefined mass range and as a result may also include ions that do not map to known metabolites [5-8]. The main objective of metabolomics is to quantify and characterize the whole spectrum of metabolites. There are a variety of platforms by which metabolites can be measured. Examples include gas chromatography mass spectrometry (GC-MS) and liquid chromatography mass spectrometry (LC-MS) [9–11]. At a high level, these platforms input a sample, fragment it into ions, and separate them using physical properties in order to generate spectra for the sample. The fragmented ion spectra are then selected based on their physical properties (e.g., the retention time and the mass-charge ratio). In many instances, these properties can be used to map the ions to known metabolites.

Metabolomics data pose a variety of analytical challenges [12, 13]; thus, carefully constructed analytical pipelines need to be developed in order to preprocess and normalize the data. Once the data are normalized, one can proceed with various downstream analytical tasks, such as differential expression analysis, clustering, classification, network discovery, and visualization. In this chapter, we focus on the particular task of classification, which also goes by the name of prediction, supervised learning and biomarker discovery. We give an overview on some of the most commonly used methods for classification, along with an illustrative example using a dataset from our group. The structure of this chapter is as follows. In Subheading 2, we provide a short review of missing values and techniques for missing value imputation in metabolomics data. We then briefly describe the most commonly used supervised learning methods (Random Forest, Support Vector Machine, and Partial Least Square-Discriminant Analysis). In Subheading 3, we lay out a framework on fitting prediction models and their practical issues. This is followed by an illustrative example of data analysis and performance evaluation in Subheading 4, and the chapter ends with a short discussion in Subheading 5. In this chapter, we interchangeably use the term supervised learning, predictive modeling and machine learning.

2 Methods

2.1 Missing Values

Supervised learning methods require complete data; however, untargeted metabolomic data is prone to missing values, where the data matrix contains zeros in one or more entries. Some studies

have reported 20-30% missing values in datasets generated using untargeted MS [14, 15]. It is difficult to deduce whether a missing value is a genuine absence of a feature, a feature below the lower limit of detection of the machine, or the failure of the algorithms employed to identify real signals from the background. In practice, statisticians have defined three types of mechanisms that lead to missing values: missing at random (MAR), missing not at random (MNAR) and missing completely at random (MCAR) [16– 18]. MCAR means that the missingness mechanism is completely random and depends neither on the observed data nor on the missing data. Scientifically plausible reasons that are compatible with missing completely at random include random errors or stochastic fluctuations of peak detection during the acquisition process of the raw data (incomplete derivations of signals). MAR means that the probability of a variable being missing is fully accounted for by other observed variables. Missing not at random (MNAR) means that the missingness mechanism depends on the unobserved values. If analysts believe MNAR to hold, there are unfortunately no ways to assess this assumption using observed data. A practical strategy is to collect as much covariate information as possible in order to make the MAR assumption plausible with the observed data.

There have been several attempts in the literature to deal with missing values for metabolomics data. For example, fillPeaks [19] in the XCMS software package has many missing value imputation tools available. A practical rule of thumb is to impute missing values by a small value or zero. This is problematic in that this leads to distortions of the distribution of missing variables and can cause the standard deviations to be underestimated [20]. Finally, Zhan et al. developed kernel-based approaches which explicitly modeled the missingness into a differential expression analysis [21]. Other imputation strategies include imputing missing values by zero, half of the minimum value or by the mean or median of observed values. More advanced methods use, random forest (RF) [20, 22], singular value decomposition (SVD) [23, 24], and k-nearest neighbors (kNN) [25]. The choice of these methods can influence the data analyses and inferences [14, 22, 26]. It is therefore extremely crucial to select the most suitable method for tackling missing values before moving forward with prediction. Recent work has compared performance of various missing value imputation methods [14, 25, 27, 28] on MS metabolomics data [20].

2.2 Classification Methods: An Early Look It is important to note that what we now call supervised learning dates back to over 80 years ago, when Sir R. A. Fisher introduced the use of linear discriminant analysis (LDA) [29]. This was a generative model in which the features conditional on class label were modeled as a multivariate normal distribution with a mean vector that depended on group, and a common covariance matrix.

This was generalized to quadratic discriminant analysis, in which the covariance matrix also depends on the group. Linear discriminant analysis possessed two desirable properties:

- 1. Since the multivariate normal distribution is fully specified by the mean vector and covariance matrix, it is relatively simple to compute.
- 2. The classification rule from LDA is linear in the predictors and thus simple to interpret.

While this methodology is well established, there are two challenges with modern metabolomics data that make the utility of LDA less effective. First, in most situations, the number of metabolites being measured is greater than the sample size, which means that the covariance matrix will not be directly estimable from the observed data. Second, there is an increasing recognition that the linear classification rule might be too restrictive and that analysts should consider other nonlinear classifiers. This will motivate the classification tools we describe in Subheadings 2.3–2.5.

A second technique that dates back to the 1950s and has been used extensively in machine learning is Naïve Bayes [30]. In this framework, we assume the features are conditionally independent given the group label and model the likelihood ratio of the feature given the group label. Based on the product of these likelihood ratios, we are able to assign a new observation to a predicted group. The term "Naïve" comes from the fact that we assume that the features are statistically independent when, in fact, we know that they are not. That said, Naïve Bayes has been shown to be an effective tool in classification problems [31], and it can handle the situation when the number of metabolites measured is greater than the sample size.

2.3 Decision Tree

A Decision Tree (DT) is a supervised machine learning model, that outputs a hierarchical structure to classify subjects [32]. It is a nonlinear classifier which is mainly used for classifying nonlinearly separable data. The objective of a decision tree is to develop a model that predicts the value of a response variable based on several predictor variables. Figure 1 shows an example of a hypothetical DT, which divides the data into two categories based on two input variables. DT used in data mining can be classified into two groups:

- Classification tree: The predicted outcome is a categorical variable, representing two or more classes to which the observation belongs.
- Regression tree: The predicted value is a continuous variable.

DT is also known as Classification and Regression Trees (CART), which was first introduced in the machine learning literature [33]. The main difference between classification and regression trees is the criteria on which the split-point decision is made.

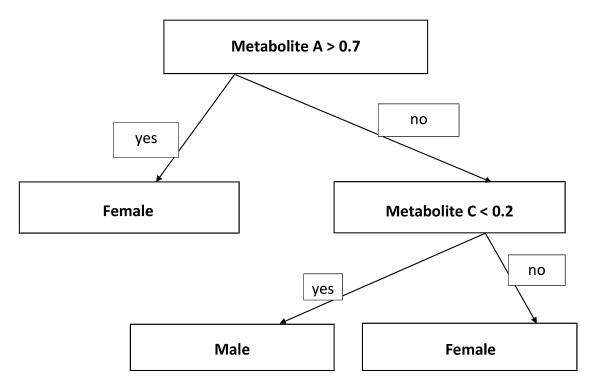


Fig. 1 A simple decision tree that splits the data into two gender groups based on two metabolites

2.4 Random Forest

A Random Forest (RF) is an extremely reliable classifier and robust to overfitting. It constructs an ensemble of DTs, which means an aggregation of tree-structured predictors [34]. In RF, each tree is independently constructed using a bootstrap sample of the original data (the "bagged sample"). This training data is used to build the classification model. The data that was not sampled using the bootstrap is referred to as the out-of-bag sample. Since these data were not used in model building, they can be used as a test data set, which can be used to evaluate classification accuracy in an unbiased manner, by calculating the "out-of-bag error" [35]. A measure of the variable importance of classification is also computed by considering the difference between the results from the original and randomly permuted versions of the data set. Cross-validation is not needed since RF is estimated from the bootstrap samples.

RF has become popular as a biomarker detection tool in various metabolomics studies [36, 37]. RF has the strength to deal with missing and data [34, 38] and overfitting issues [39, 40]. In addition, it can also tackle high-dimensional data sets without feature elimination as a requirement [41].

2.5 Support Vector Machines

Support Vector Machines (SVM) have been previously used in the analysis of several omics studies, particularly gene expression data [42–44]. A simple figure of an SVM is shown in Fig. 2. The main characteristics that define the concept of SVMs are (a) the criteria they use to categorize nonlinear relationships (b) the set of training

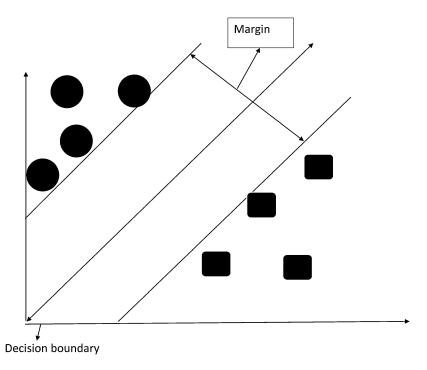


Fig. 2 A simple graphical representation of SVM

sets that are necessary to optimize the linear classifier; (c) the use of kernel machines to transform the variable into a higher order nonlinear space where linear separability holds; (d) utility in terms of performance and efficiency for high dimensional data sets.

A major drawback of SVM is its restrictions to binary classification problems. For example, it can only discriminate between two classes where the data points are categorized by two classes in n-dimensional space, where n corresponds to the number of metabolites in our context. A hyperplane is constructed that separates the data points from the two classes. The hyperplane coefficients are determined based on the variable (metabolite) importance for discriminating between two classes.

SVM can yield a hyperplane of p-1 dimension in p dimensional space. The main purpose of SVM is to optimize the largest margin. In practice, a separation often does not exist as the data points cannot always be linearly separated. In such nonlinear cases, a kernel substitution is adopted to map the data to a higher order dimension. The maximum-margin hyperplane was the original algorithm developed as a linear classifier [45]. An extension to create nonlinear classifiers was proposed by applying the kernel trick to maximum-margin hyperplanes [46]. The advantage of using the kernel trick is that it can substitute the linear kernel with other robust kernels, such as the Gaussian kernel [47]. Also in the family of nonlinear supervised learners are deep neural networks (DNN), which construct a nonlinear function from input variables to outcome variables using a combination of convolution filters and hidden layers [48].

2.6 Partial Least Squares-Discriminant Analysis

Partial least squares-discriminant analysis (PLS-DA) is a supervised technique widely used in metabolomics studies [49–52]. It is mainly constructed on the rotation of metabolite abundances in order to maximize the covariance between the independent variables (metabolite abundances) and the corresponding response variable (classes) in high-dimension by finding a linear subspace of the predictors [53]. PLS-DA is an extension of classical PLS regression which was implemented for solving linear equations and estimating parameters of interest. PLS-DA method has been extensively used in various metabolomics studies for disease classification and biomarker detection [50, 54–56]. Furthermore, PLS-DA can also be used for dimension reduction, and feature selection by ranking the loading vectors in decreasing order [52, 57, 58].

Orthogonal PLS (OPLS)-DA was developed as an improvement to PLS-DA in order to discriminate two or more classes of metabolites using multivariate data [59, 60]. The main advantage of OPLS-DA over PLS-DA is that a single component is used as a predictor where the other components constitute the orthogonal contrasts for analysis of variance, which are independent linear comparisons between the classes of a component.

Multilevel PLS-DA is another classification technique that can be used to classify multivariate data from crossover designed studies [61]. For example, each subject in a controlled experimentation setup undergo treatment in a random order [62]. Multilevel PLS-DA can be thought as a multivariate extension of the paired *t*-test [61].

3 Practical Issues in Fitting Prediction Models

3.1 Feature Selection

Feature Selection (FS) is an important step in successful data mining procedures [63], such as SVMs [64, 65] and Naïve Bayes [66], to enhance performance and reduce computational efficiency. However, FS is not a necessary criterion for some supervised algorithms, such as SVM due to its reliance on regularization, which is the process of adding information to prevent overfitting in order to enhance the predictive accuracy and interpretability of the supervised learning model. The purpose of feature selection is similar to model selection [67], which tries to find a compromise between high predictive accuracy and a model with few predictors. The insignificant input features in a supervised model may lead to overfitting. Hence, it is reasonable to ignore those input features with negligible or no effect on the output. For example, in the example later in this chapter, the objective is to infer the relationship between gender and their corresponding metabolite features. However, if the sample identifier or any other redundant column is included as one of the input features, it may cause overfitting. FS is generally used as a preprocessing tool, in order to reduce the dimension of a data set by only selecting subsets of features (metabolites), on which a supervised learning is employed. Some well-known extensions of these FS techniques are Recursive Feature Elimination, L1 norm SVM [68], and Sequential Minimal Optimization (SMO) [69].

One of the most commonly used measure in FS is the Variable Importance Score (VIS), which evaluates features using a model-based approach [70] by ranking the features according to their relevance in a classification problem [71]. The main advantage of using VIS is that incorporates the correlation structure between the predictors (metabolite features) into the importance calculation.

3.2 Cross-Validation

The classification performance of supervised learners is crucial to determine their predictive power and accuracy. Generally, the validation procedures are implemented by assuming the model on a training set and then testing it on an independent set (validation data set). However, in practical situations, due to the relatively small number of samples and unavailability of an unbiased independent validation data set, cross-validation (CV) can be applied by splitting a data set into training and test sets. Using k-fold cross validation [36], the training data set is split into k subsets (folds) of almost equal size, that is, where k-1 training sets consist of x% of the data and the remaining (100-x)% data is contained in the kth test data set. Ideally, x% far exceeds (100-x)%, and x is usually chosen as 90, 80 or 70. Leave-One-Out-CV is a special case of CV, where k is equal to the total number of data points.

3.3 Metrics for Evaluation

There are several potential metrics by which one can evaluate a prediction model. The most common metric that is used in practice is the classification accuracy, meaning the proportion of predictions from the model that are correct based on the gold standard label. An alternative classification metric is given by the receiver operating characteristic (ROC) curve. Assume that we have two groups, disease and control and that higher values of the model correspond to a greater probability of having disease. We will let the model output be Υ and group label be D, where D=0 means control and D=1 means diseased. One can define the false positive rate based on a cutoff c by $FP(c) = P(\Upsilon > c | D = 0)$. Similarly, the true positive rate is $TP(c) = P(\Upsilon > c | D = 1)$. The true and false positive rates can then be summarized by the receiver operating characteristic (ROC) curve, which is a graphical presentation of TP(c), FP(c) for all possible cutoff values of c. The ROC curve shows the tradeoff between increasing true positive and false positive rates. Then, the area under the ROC curve (AUC) can be measured for the curve and is a summary based on how well the model can distinguish between two diagnostic groups (diseased/control). Other commonly used metrics are defined in terms of TP(c) and FP(c) as below:

```
Sensitivity (SENS): SENS = TP(c).

Specificity (SPEC): SPEC = 1 - FP(c).

Precision (PREC): TP(c)/(TP(c) + FP(c).

Recall (REC): REC=SENS = TP(c).

False Discovery Rate (FDR): FP(c)/(TP(c) + FP(c).
```

The predicted classes are conventionally computed based on the cut-off c (=50%) for the probabilities. However, the cutoff (threshold) value can be tuned to control the FDR depending on the problem setting in order to attain maximum predictive accuracy.

Calibration is another property that has been espoused for risk prediction models. Well-calibrated models are those in which the predicted risk matches the observed risk for individuals. The manner in which this is typically assessed is by comparing the risk predictions from the model to some nonparametric (i.e., non-model-based) estimate; the closer the predictions are, the better calibrated the model is. Calibration has been advocated in the risk prediction [72]. As a matter of course, nonparametric estimates of risk models require binning of covariates or categorization of predicted values in order to deal with the inherent sparsity that exists with using continuous covariates. One method of performing calibration, in the binary outcome setting, is to use the Hosmer–Lemeshow goodness of fit statistic [73]; smaller values of the statistic correspond with better calibrated models.

In the calibration setting, what is important is understanding the distribution of the predicted probabilities, or equivalently, the risk scores, from the fitted model. Calibration of the model then is equivalent to modeling the distribution of risk scores; a useful quantity for accomplishing this is the predictiveness curve [74].

3.4 Imbalanced Classes

In numerous data sets, there are unequal numbers of cases in each class. In this instance, the classifier is biased toward better performance of the larger (or majority) class, compared to the smaller (or minority) class. Often, the research question is much more focused on performance of discriminating the minority class from the majority class. But the size of the minority class may be limited by the difficulty, expense, or time of obtaining the rarer type of sample. This unequal distribution between classes of a data set is referred to as the imbalanced class problem [75].

In such cases, the main interest lies in the correct classification of the "minority class" [76]. Classes with fewer samples or no sample have a low prior probability and low error cost [77]. The relation between the distribution of samples in the training set and costs of misclassification can be controlled by setting a prior probability at each class.

Several methods have been discussed for tackling imbalanced data [78, 79], and two techniques which have been extensively applied in the last decade are resampling and cost-sensitive learning. In resampling, the approach is to either oversample the minority class or undersample the majority class. For example, the minority class can be oversampled by producing duplicates [80] or under sampling (removing samples) of the majority class [81, 82]. One major drawback of under sampling is that the majority class may lose some information, if a large part of majority class in a small training set is not considered. In cost-sensitive learning, the approach is to assign a cost misclassification of the minority class and minimize the overall cost function [83, 84]. Both the resampling and cost-sensitive learning approaches are considered to be more effective in terms of predictive accuracy than by using equal class prior constraints [85].

3.5 TRIPOD Guidelines

A recent scientific initiative has focused on developing more reproducible approaches to the building, evaluation and validation of prediction models. A document resulting from this effort that helps in this goal is the TRIPOD (Transparent reporting of a multivariable prediction model for individual prognosis or diagnosis) statement, which provides recommendations for fair reporting of studies developing, validating, or updating a prediction model. It consists of a 22-item checklist detailing vital information that must be incorporated in a prediction model study report [86]. For our example analysis below, we provide supporting information to illustrate how our analysis satisfies the 22-item TRIPOD checklist (Appendix 1).

4 Illustrative Example

4.1 Data

For the predictive comparison of classifiers, we obtained a LC-MS metabolomics dataset from https://www. metabolomicsworkbench.org (Project ID: PR00038). The data were generated from subjects enrolled in the Genetic Epidemiology of Chronic Obstructive Pulmonary Disease Gene study (COPD-Gene) [87, 88]. Plasma from 131 subjects was collected from the COPDGene study cohort and analyzed using untargeted LC-MS (C18+ and HILIC+) metabolomics. The lipid fraction of the human plasma collected from current and former smokers was analyzed using Time of Flight (ToF) liquid chromatograph (LC) (Agilent 6210 Series) and a Quadrupole ToF mass spectrometer (Agilent 6520) which yielded combined data on 2999 metabolite features. Data were annotated, normalized and preprocessed using the methods described in [87, 88].

COPD is an extremely heterogeneous disease comprising multiple phenotypes. The 131 subjects were either current or former

smokers with various chronic obstructive pulmonary disease (COPD) phenotypes including airflow obstruction, radiologic emphysema, and exacerbations. Within this set there were 56 males and 75 females. For additional information about the cohort, sample collection and data storage data generation, see [87].

4.2 Training and Test Sets

We split the data (131 samples) into 70% (93 samples) training and 30% (38 samples) test (evaluation) data. For the training data, we use fivefold CV, where we split the training data (93 training samples) into 5 different subsets (or fivefolds). We used the first fourfolds to train the data and left the last (fifth) fold as holdout-test dataset. We then trained the algorithms against each of the folds and computed (average over fivefolds) the metrics for the training dataset. The test dataset (n = 38 samples) is used to provide an unbiased evaluation of the best model fit on the training dataset. The test dataset can be regarded as an external dataset which provides the gold standard used to evaluate the models, using ROC curves and other metrics for evaluation. For model validation, we predicted the performance of the test data using the trained models for all the three classifiers.

4.3 Feature Ranking and Variable Importance

In this section, we implemented different predictive models using metabolite abundances as the predictor variables and Gender (Male/Female) as the response based on the training dataset. We then computed the Variable Importance Score, which is a measure of feature relevance to gender for each metabolite (*see* Subheading 3.1). These scores are nonparametric in nature, and range between 0 and 100. They are subsequently used to rank all the features to the classification of our response variable, that is, Gender. Metabolites with high values are considered to more relevant features in classification problem.

In the dataset, the top five metabolites are detected as feature metabolites out of 2999 metabolites in the training set with fivefold Cross-Validation for three different classifiers (Fig. 3a–c). Among them, C39 H79 N7 O + 7.3314843, N-palmitoyl-D-sphingosyl-1-(2-aminoethyl)phosphonate, and C43 H86 N2 O2 are considered to be significant metabolite features based on RF and SVM classifiers. However, zeta-Carotene, unannotated metabolite (mass: 2520.6355 and retention time: 1.5409486), 5-Hydroxyisourate +4.668069, C13 H28 N2 O4, and Tyrosine* +2.3151746 are identified as good predictors based on PLS-DA.

4.4 Model Validation

In this section, we evaluated the performance of all the three classifiers based on the 30% test data of 38 samples using the trained models. Here, we present ROC curves for all the predictive models of the testing data used to compute the diagnostic potential of a classifier in this clinical metabolomics application. From the ROC

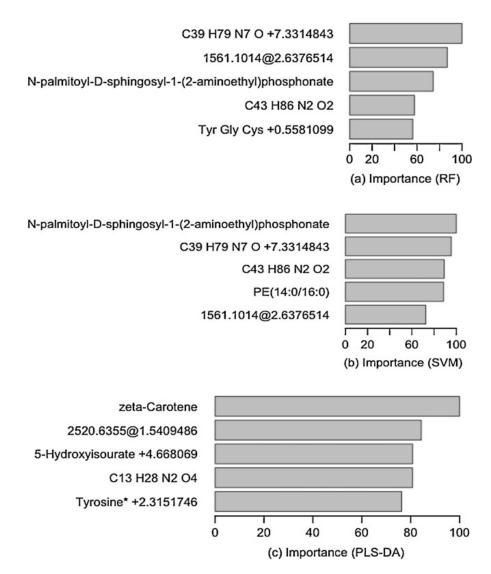


Fig. 3 Metabolite relevant feature ranking bar plots (top five metabolites) using Variable Important Scores ranging from 0 to 100. (a) Random Forest, (b) Support Vector Machine (SVM), and (c) Partial Least Square-Discriminant Analysis (PLS-DA) for the training dataset

curves, the three methods perform similarly (Fig. 4). Table 1 shows the performance metrics of the testing data evaluated for all the classifiers. In this testing dataset, we use AUC as our metric to choose the best performing classifier. Based on this metric RF has a small advantage over the other methods (0.87 versus 0.86), but with other metrics the other methods have a small advantage. In addition, we also computed the Variable Importance Score on the test dataset. The top five metabolites for all the three classifiers using the test dataset were exactly the same selected using the training dataset with fivefold CV in the previous section.

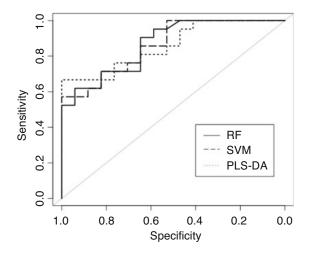


Fig. 4 ROC curves of the testing dataset obtained from three classification algorithms (RF, SVM, and PLS-DA)

Table 1
Metrics (area under curve (AUC), sensitivity (SENS), specificity (SPEC), precision (PREC), recall (REC)) to evaluate the performance of classification on testing dataset

Metrics/methods	AUC	SENS	SPEC	PREC	REC
RF	0.87	0.71	0.64	0.71	0.71
SVM	0.86	0.76	0.71	0.76	0.76
PLS-DA	0.86	0.81	0.65	0.74	0.81

5 Summary

Biomarker detection in the field of metabolomics is popular both in the context of prognostic and diagnostic studies. In this chapter, we discussed the most commonly used supervised learning algorithms, feature selection methods, and performance metrics, used in the downstream analyses of metabolomics studies. In addition, we also reported predictive accuracy of three classifiers on an example human plasma LC/MS test dataset to predict gender. Even though there were advantages of one method compared to the other depending on the metric, our results cannot be held as a comprehensive comparison of these methods, since different classifiers perform differently depending on the datasets. We encourage investigators to explore a variety of methods. For more detailed discussions of biomarker detection and predictive accuracy, see [89– 92]. The R code for this chapter is posted at the supplemental website, https://metabolomics-data.github.io/. Appendix 2 lists selected open source tools that implement supervised learning algorithms.

TRIPOD Checklist for Predictive Modeling for Metabolomics Data

Section/topic	Item	Checklist item	Section
Title and abstract			
Title	1	Identify the study as developing and/or validating a multivariable prediction model, the target population, and the outcome to be predicted	See title
Abstract	2	Provide a summary of objectives, study design, setting, participants, sample size, predictors, outcome, statistical analysis, results, and conclusions	See abstract
Introduction			
Background and objectives		Explain the medical context (including whether diagnostic or prognostic) and rationale for developing or validating the multivariable prediction model, including references to existing models	
	3b	Specify the objectives, including whether the study describes the development or validation of the model or both	Internal validation, Subheading 4.4 (continued)

Section/topic	Item	Checklist item	Section
Methods			
Source of data	4a 4b	Describe the study design or source of data (e.g., randomized trial, cohort, or registry data), separately for the development and validation data sets, if applicable Specify the key study dates, including start of accrual; end of accrual; and, if applicable, end of follow-up	Subheading 4.1, Subheading 4.1, see [87]
Participants	5a 5b	Specify key elements of the study setting (e.g., primary care, secondary care, general population) including number and location of centers Describe eligibility	N/A Subheading 4.1,
	5c	criteria for participants Give details of treatments received, if relevant	see [87] N/A
Outcome	6a	Clearly define the outcome that is predicted by the prediction model, including how and when assessed Report any actions	Subheading 4.1 N/A
		to blind assessment of the outcome to be predicted	- 7,

Section/topic	Item	Checklist item	Section
Predictors	7a 7b	Clearly define all predictors used in developing or validating the multivariable prediction model, including how and when they were measured Report any actions to blind assessment of predictors for the outcome and other predictors	2999 predictors, for more details see [87]
Sample size	8	Explain how the study size was arrived at	Subheading 4.1, see [87]
Missing data	9	Describe how missing data were handled (e.g., complete-case analysis, single imputation, multiple imputation) with details of any imputation method	The data was already preprocessed and imputed, see Subheading 4.1
Statistical analysis methods	10c	For validation, describe how the predictions were calculated	Subheading 3.3
	10d	Specify all measures used to assess model performance and, if relevant, to compare multiple models	Subheading 3.3
	10e	Describe any model updating (e.g., recalibration) arising from the validation, if done	N/A

Section/topic	Item	Checklist item	Section
Risk groups	11	Provide details on how risk groups were created, if done	N/A
Development vs. validation	12	For validation, identify any differences from the development data in setting, eligibility criteria, outcome, and predictors	N/A
Results			
Participants	13a	Describe the flow of participants through the study, including the number of participants with and without the outcome and, if applicable, a summary of the follow-up time. A diagram may be helpful	Subheading 4.1, see [87]
	13b	Describe the characteristics of the participants (basic demographics, clinical features, available predictors), including the number of participants with missing data for predictors and outcome For validation,	Subheading 4.1, see [87] Subheadings 4.3
	130	show a comparison with the development data of the distribution of important variables (demographics, predictors, and outcome)	and 4.4

Section/topic	Item	Checklist item	Section
Model performance	16	Report performance measures (with CIs) for the prediction model	N/A
Model-updating	17	If done, report the results from any model updating (i.e., model specification, model performance)	Subheading 4.4
Discussion			
Limitations	18	Discuss any limitations of the study (such as nonreprese ntative sample, few events per predictor, missing data)	Subheading 4.1, see [87]
Interpretation	19a	For validation, discuss the results with reference to performance in the development data, and any other validation data	N/A
	19b	Give an overall interpretation of the results, considering objectives, limitations, results from similar studies, and other relevant evidence	Subheadings 4.4 and 5
Implications	20	Discuss the potential clinical use of the model and implications for future research	Subheadings 4.4 and 5. However, performance of the model is data-driven
Other information			

Section/topic	Item	Checklist item	Section
Supplementary information	21	Provide information about the availability of supplementary resources, such as study protocol, web calculator, and data sets	Subheading 4.1, see [87]
Funding	22	Give the source of funding and the role of the funders for the present study	NIH

Selected Open Source (R/Bioconductor/Web-Based) Tools for Supervised Learning Algorithms

Method	Source	Reference
PLS-DA	Bioconductor (ropls)	[93]
PLS-DA, RF, and SVM	Bioconductor (biosigner)	[94]
SVM, RF	Bioconductor (MLSeq)	[95]
RF, SVM, PLS-DA	Metaboanalyst http://www. metaboanalyst.ca/	[96]
PCA, PLS-DA, RF	$Bioconductor\left(statTarget\right)$	[97]
Feature selection, metric evaluation	Bioconductor (OmicsMarker)	[98]
Sparse PLS-DA	Bioconductor (mixOmics)	[99]
Feature selection, metric evaluation	CRAN (lilikoi)	[100]
Probabilistic principal component analysis	CRAN (MetabolAnalyze)	[101]
Kernel-based metabolite differential analysis	CRAN (KMDA)	[21]
PLS-DA, OPLS-DA	CRAN (muma)	[102]
RF	CRAN (RFmarkerDetector)	[103]
RF, SVM, PLS-DA	CRAN (caret)	[104]

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