# **Analysing of Diabetes using Logistic Regression** model.



#### Albert NDENGEYINTWALI: AIMS232401904

Malaria modelling, African Institute for Mathematical Sciences.

Supervisor: Prof. Evans Gouno

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#### **Contents**



- Introduction
- Problem statement
- Objectives
- Methodology
- 6 Results
- 6 Conclusion

Introduction 0000

# Introduction: Table showing detailed information



Table: Diabetes csv

ni	Pregnancies	Glucose	BloodPressure	SkinThickness	Insulin	BMI	DiabetesPedigreeFunction	Age	Outcome
	$X_1$	$X_2$	<i>X</i> <sub>3</sub>	<i>X</i> <sub>4</sub>	<i>X</i> <sub>5</sub>	<i>X</i> <sub>6</sub>	<i>X</i> <sub>7</sub>	<i>X</i> <sub>8</sub>	,
1	6	148	72	35	0	33.6	0.627	50	
2	1	85	66	29	0	26.6	0.351	31	
3	8	183	64	0	0	23.3	0.672	32	
4	1	89	66	23	94	28.1	0.167	21	
5	0	137	40	35	168	43.1	2.288	33	
6	5	116	74	0	0	25.6	0.201	30	
7	3	78	50	32	88	31	0.248	26	
8	10	115	0	0	0	35.3	0.134	29	
9	2	197	70	45	543	30.5	0.158	53	
10	8	125	96	0	0	0	0.232	54	
:	:	:	:	:	:	:	:	:	
762	9	170	74	31	0	44	0.403	43	
763	9	89	62	0	0	22.5	0.142	33	
764	10	101	76	48	180	32.9	0.171	63	
765	2	122	70	27	0	36.8	0.34	27	
766	5	121	72	23	112	26.2	0.245	30	
767	1	126	60	0	0	30.1	0.349	47	
768	1	93	70	31	0	30.4	0.315	23	

You can click (here) to see a whole dataset.

# Explanation of variables



#### Dependent variable

'Outcome' takes on values of 0 and 1, where 0 typically represents the absence of diabetes (no) and 1 represents the presence of diabetes (yes).

#### Independent variables

- 'Pregnancies': The number of times a person has been pregnant(Unit: Count).
- 'Glucose': Blood sugar level (Unit: mg/dL).
- 'BloodPressure': Blood pressure measurement (Unit: mm Hg).
- 'SkinThickness': Skinfold thickness measurement (Unit: mm).
- 'Insulin': Insulin level (Unit: mu U/ml).
- 'BMI': Body Mass Index, a measure of body fat based on height and weight (Unit:  $kg/m^2$ ).
- 'DiabetesPedigreeFunction': A function that represents the diabetes history in relatives and the genetic influence (Unit: Dimensionless)
- 'Age': Age of the individual (Unit: Years).

### About Logistic Regression that is going to be used



- Logistic regression is a statistical analysis method to predict a binary outcome, such as yes or no, based on prior observations of a data set.
- Taking Y as dependent variable,  $X_i's$  are independent variables and  $\beta_i's$  as regression coefficients. The modal is written as follow:

#### Formula

Introduction 0000

$$\begin{split} P(Y=1) &= \frac{e^{\beta_0+\beta_1X_1+\beta_2X_2+\cdots+\beta_nX_n}}{1+e^{\beta_0+\beta_1X_1+\beta_2X_2+\cdots+\beta_nX_n}} \quad \text{In case outcome is yes.} \\ P(Y=0) &= 1-P(Y=1) \quad \text{In case outcome is no.} \end{split}$$

Odds of outcome 
$$= \frac{P(Y=1)}{P(Y=0)}$$
  
Log-Odds (Logit)  $= \ln \left( \frac{P(Y=1)}{P(Y=0)} \right)$ 

### Why Logistic Regression?

Introduction



- Logistic regression streamlines the mathematics for measuring the impact of multiple variables  $(X_i's)$  with a given outcome (Y).
- It can also estimate the probabilities of events, including determining a relationship between features and the probabilities of outcomes.

#### Problem statement



- In project, we consider diabetes csv, as represented by the 'Outcome' variable, in a dataset containing information about individuals.
- The dataset includes the following independent variables: 'Pregnancies', 'Glucose', 'BloodPressure', 'SkinThickness', 'Insulin', 'BMI', 'DiabetesPedigreeFunction' and 'Age'.
- We intend to use Logistic Regression (LR) to understand how these factors collectively influence the likelihood of diabetes.

### Objectives



#### Main objective

The aim of this project is to build logistic regression that would likely be to predict whether an individual is at risk for diabetes (1) or not at risk for diabetes (0).

### Methodology



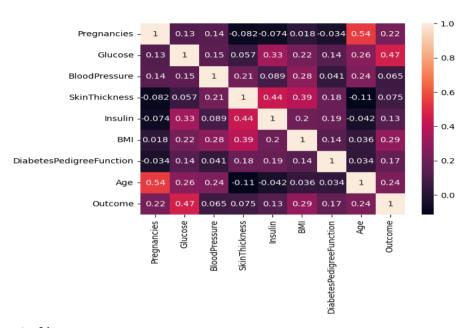
The general methodology we followed based on this analysis is as follows:

- Data Preparation.
- Exploratory Data Analysis.
- Logistic Regression Model Building.
- Interpretation of Coefficients and P-Values addition to finding the probabilities of having diabetes or not.

#### Results: General information



Results



★ Note: Glucose seems to be most correlated with outcome because it has the highest value compared to others which is 0.47 but it is weak

#### Results: Output from R in computing L.R



```
data <- read.csv('/home/albert/Downloads/archive/diabetes.csv')</pre>
X <- data[, c('Pregnancies', 'Glucose', 'BloodPressure', 'SkinThickness', 'Insulin', 'BMI',
              'DiabetesPedigreeFunction', 'Age')]
v <- data$Outcome</pre>
model <- glm(Outcome ~ ., data = data, family = binomial)
summary(model)
##
## Call:
## glm(formula = Outcome ~ .. family = binomial, data = data)
##
## Deviance Residuals:
       Min
                 10
                      Median
                                           Max
## -2.5566 -0.7274 -0.4159
                                        2.9297
                               0.7267
##
## Coefficients:
##
                              Estimate Std. Error z value Pr(>|z|)
## (Intercept)
                            -8.4046964 0.7166359 -11.728 < 2e-16 ***
## Pregnancies
                             0.1231823 0.0320776
                                                    3.840 0.000123 ***
## Glucose
                             0.0351637 0.0037087
                                                    9.481 < 2e-16 ***
## BloodPressure
                            -0.0132955 0.0052336 -2.540 0.011072 *
## SkinThickness
                             0.0006190 0.0068994
                                                    0.090 0.928515
## Insulin
                            -0.0011917 0.0009012 -1.322 0.186065
## BMI
                             0.0897010 0.0150876 5.945 2.76e-09 ***
## DiabetesPedigreeFunction 0.9451797 0.2991475
                                                    3.160 0.001580 **
## Age
                             0.0148690 0.0093348
                                                    1.593 0.111192
## ---
## Signif. codes: 0 '***' 0.001 '**' 0.01 '*' 0.05 '.' 0.1 ' ' 1
```

### Results: Interpretations of coefficients and p-values



The column of "estimated" shows the value of all  $\beta_i$ 's and their related p-values in column of "Pr(>|z|)"

- 1 const (Intercept): The constant term is -8.4047. This represents the estimated log-odds of the response variable when all other predictors are zero.
- Pregnancies: For each additional pregnancy, the log-odds of the response variable increase by 0.1232. The p-value is significant (p = 0.001), indicating a statistically significant effect.
- 3 Glucose: For each additional unit of glucose, the log-odds of the response variable increase by 0.0352. The p-value is significant (p = 0.001), indicating a statistically significant effect.
- BloodPressure: For each additional unit of blood pressure, the log-odds of the response variable decrease by -0.0133. The p-value is significant (p = 0.011), indicating a statistically significant effect.
- SkinThickness: The log-odds of the response variable change very slightly (0.0006) for each additional unit of skin thickness. The p-value is not significant (p = 0.929), suggesting that skin thickness may not be a strong predictor.
- **for Insulin**: For each additional unit of insulin, the log-odds of the response variable decrease by -0.0012. The p-value is not significant (p = 0.186), suggesting that insulin may not be a strong predictor.
- BMI: For each additional unit of BMI, the log-odds of the response variable increase by 0.0897. The p-value is significant (p = 0.001), indicating a statistically significant effect
- DiabetesPedigreeFunction: For each additional unit of the diabetes pedigree function, the log-odds of the response variable increase by 0.9452. The p-value is significant (p = 0.002), indicating a statistically significant effect.variables constant.
- Age: For each additional year of age, the log-odds of the response variable increase by 0.0149. The p-value is not significant (p = 0.111), suggesting that age may not be a strong predictor.

### Result: Output from R in computing confusion matrix



```
data <- read.csv('/home/albert/Downloads/archive/diabetes.csv')</pre>
X <- data[, c('Pregnancies', 'Glucose', 'BloodPressure', 'SkinThickness', 'Insulin', 'BMI',
               'DiabetesPedigreeFunction', 'Age')]
v <- data$Outcome
model <- glm(Outcome ~ ., data = data, family = binomial)</pre>
predicted probabilities <- predict(model, newdata = data, type = "response")</pre>
tab<-table(predicted probabilities >0.5,data$Outcome)
tab
##
##
     FALSE 445 112
     TRUE
            55 156
sum(diag(tab))/sum(tab)*100
## [1] 78.25521
table(data$Outcome)
## 500 268
500/(500+268)*100
## [1] 65.10417
```

#### Result:Interpretations of confusion matrix



- True Negatives (TN): The model correctly identified 445 cases as not having diabetes.
- False Positives (FP): The model incorrectly predicted 112 cases as having diabetes when they don't.
- False Negatives (FN): The model incorrectly predicted 55 cases as not having diabetes when they do.
- True Positives (TP): The model correctly identified 156 cases as having diabetes.
- 78.25521% Accuracy: represents the percentage of correct predictions made by the model for a binary classification task (0 for not having diabetes and 1 for having diabetes).
- 65.10417% Accuracy: This accuracy value appears to be calculated as 500 / (500 + 268), which is the accuracy achieved when you simply predict the majority class (in this case, 0 for not having diabetes).
- $\star$  An accuracy of 78.25521% is higher than the baseline accuracy of 65.10417%, indicating that the model is performing better.

# Result: Probability of having diabetes or not



• First, taking an individual with  $x_i^{(0)} \in X_i$  for  $i = 1, 2, \dots 8$ , Example:

$$x_1^{(0)} = 4, x_2^{(0)} = 121, x_3^{(0)} = 69, x_4^{(0)} = 21, x_5^{(0)} = 80, x_6^{(0)} = 32, x_7^{(0)} = 0.47, x_8^{(0)} = 33$$

- Probability of having diabetes  $P(Y=1) = \frac{e^{eta_0 + \sum_{i=1}^8 eta_i x_i^{(v)}}}{1 + e^{eta_0 + \sum_{i=1}^8 eta_i x_i^{(0)}}} \approx 0.299$
- Probability of not having diabetes  $P(Y=0)=1-P(Y=1)\approx 0.701$
- Odds of Diabetes  $=\frac{P(Y=1)}{P(Y=0)} = \frac{0.299}{0.701} \approx 0.426$
- Log-Odds (Logit)=  $\ln \left( \frac{P(Y=1)}{P(Y=0)} \right) \approx -0.853$

#### Conclusion



Conclusion

- ♣ In conclusion, our logistic regression analysis indicates that the probability of having diabetes is estimated at 0.299, while the probability of not having diabetes is estimated at 0.701. Again,the model is performing better since An accuracy of 78.25521% is higher than the baseline accuracy of 65.10417%.
- This suggests that several factors, including Pregnancies, Glucose, BloodPressure, BMI and DiabetesPedigreeFunction, are significant predictors of the outcome, suggesting higher values of these variables are associated with an increased or decreased likelihood of the outcome based on their related reression coefficient signs. However, the influence of other variables, such as SkinThickness, Insulin, and Age, are not statistically significant in this analysis.

### Bibliography



Conclusion

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### End



# Thank You