

# Classification using Logistic Regression

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## Background

Analyze the tumor dataset, which contains medical information used in the pre-screening diagnosis of tumors. First logistic regression is used to determine the factors that predict the probability of tumor diagnosis. Then naïve Bayes classifier and linear discriminant analysis are used for the classification task. Finally, the performance of the three classifiers is compared.

## Part 1

### 1. Data Transformation and Cleaning (Description)

#### Rename

The columns of the tumor dataset were renamed for easier interpretation.

```
names(Tumor_BT)

[1] "Outcome_BT"      "Age_BT"          "Sex_BT"
[4] "Bone_Density_BT" "Bone_Marrow_BT"  "Lung_Spot_BT"
[7] "Pleura_BT"       "Liver_Spot_BT"   "Brain_Scan_BT"
[10] "Skin_Lesions_BT" "Stiff_Neck_BT"   "Supraclavicular_BT"
[13] "Axillar_BT"      "Mediastinum_BT"
```

#### Normalization

All the columns were normalized to have values in set {0,1}. Additionally, values in Supraclavicular and Axillar columns were swapped so that 0 and 1 consistently represent “No” and “Yes” respectively. The updated Data Dictionary is shown below:

#### Data Dictionary (After Transformation)

Name	Description
Out	Tumor is present=1, Is not preset=0
Age	Older =1, Younger=0
Sex	Male=1, Female=0
Bone	Bone Density Test: Good=0, Bad=1
Marrow	Bone Marrow: Good=0, Bad=1
Lung	Spot on Lung: Yes=1, No=0
Pleura	Pleura: Yes=1, No=0
Liver	Spot on Liver: Yes=1, No=0
Brain	Brain Scan: Yes=1, No=0
Skin	Lesions: Yes=1, No=0

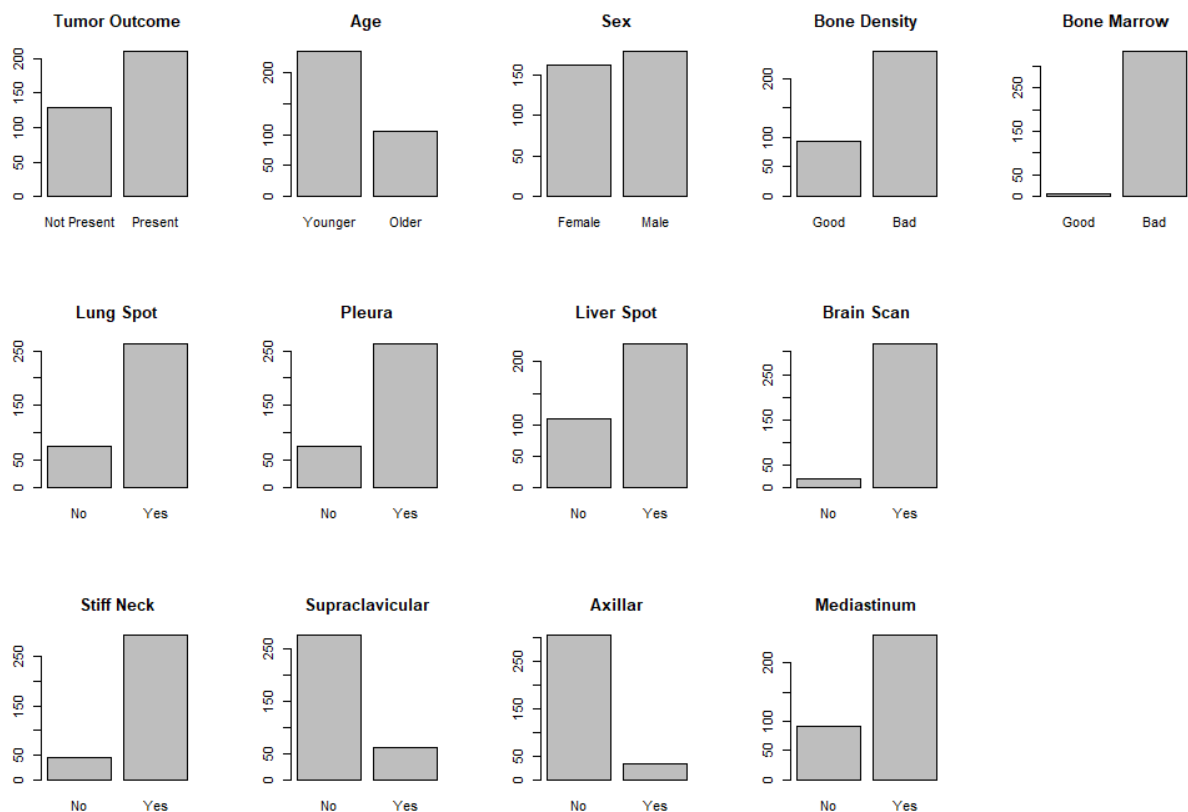
Neck	Stiff Neck? Yes=1, No=0
Supra	Supraclavicular: Yes=1, No=0
Axil	Axillar: Yes=1, No=0
Media	Mediastinum: Yes=1, No=0

## 2. Descriptive Data Analysis

### Quantitative Summary

Outcome_BT	Age_BT	Sex_BT	Bone_Density_BT
Min. :0.0000	Min. :0.0000	Min. :0.0000	Min. :0.0000
1st Qu.:0.0000	1st Qu.:0.0000	1st Qu.:0.0000	1st Qu.:0.0000
Median :1.0000	Median :0.0000	Median :1.0000	Median :1.0000
Mean :0.6195	Mean :0.3097	Mean :0.5251	Mean :0.7227
3rd Qu.:1.0000	3rd Qu.:1.0000	3rd Qu.:1.0000	3rd Qu.:1.0000
Max. :1.0000	Max. :1.0000	Max. :1.0000	Max. :1.0000
Bone_Marrow_BT	Lung_Spot_BT	Pleura_BT	Liver_Spot_BT
Min. :0.0000	Min. :0.0000	Min. :0.0000	Min. :0.0000
1st Qu.:1.0000	1st Qu.:1.0000	1st Qu.:1.0000	1st Qu.:0.0000
Median :1.0000	Median :1.0000	Median :1.0000	Median :1.0000
Mean :0.9823	Mean :0.7758	Mean :0.7758	Mean :0.6755
3rd Qu.:1.0000	3rd Qu.:1.0000	3rd Qu.:1.0000	3rd Qu.:1.0000
Max. :1.0000	Max. :1.0000	Max. :1.0000	Max. :1.0000
Brain_Scan_BT	Skin_Lesions_BT	Stiff_Neck_BT	Supraclavicular_BT
Min. :0.0000	Min. :0.0000	Min. :0.0000	Min. :0.0000
1st Qu.:1.0000	1st Qu.:1.0000	1st Qu.:1.0000	1st Qu.:0.0000
Median :1.0000	Median :1.0000	Median :1.0000	Median :0.0000
Mean :0.9381	Mean :0.9351	Mean :0.8673	Mean :0.1829
3rd Qu.:1.0000	3rd Qu.:1.0000	3rd Qu.:1.0000	3rd Qu.:0.0000
Max. :1.0000	Max. :1.0000	Max. :1.0000	Max. :1.0000
Axillar_BT	Mediastinum_BT		
Min. :0.00000	Min. :0.0000		
1st Qu.:0.00000	1st Qu.:0.0000		
Median :0.00000	Median :1.0000		
Mean :0.09735	Mean :0.7286		
3rd Qu.:0.00000	3rd Qu.:1.0000		
Max. :1.00000	Max. :1.0000		

### Graphical Summary



**Comment:** The dataset doesn't have an equal representation from older people, as such results can only be generalized to a population with similar sample statistics.

## Exploratory Data Analysis

### 2.1 Correlations

	Outcome_BT	Age_BT	Sex_BT	Bone_Density_BT	Bone_Marrow_BT
Outcome_BT	1.00	0.08	0.29	0.18	0.03
Age_BT	0.08	1.00	0.10	0.20	0.04
Sex_BT	0.29	0.10	1.00	0.08	0.01
Bone_Density_BT	0.18	0.20	0.08	1.00	0.17
Bone_Marrow_BT	0.03	0.04	0.01	0.17	1.00
Lung_Spot_BT	0.02	-0.04	0.00	0.08	-0.02
Pleura_BT	-0.01	0.07	-0.07	0.00	-0.02
Liver_Spot_BT	-0.10	-0.22	-0.04	-0.18	0.00
Brain_Scan_BT	0.15	0.07	0.05	0.06	0.06
Skin_Lesions_BT	0.11	0.15	0.04	0.10	-0.04
Stiff_Neck_BT	0.28	0.07	0.22	-0.01	-0.05
Supraclavicular_BT	-0.16	-0.14	-0.05	0.00	0.06
Axillar_BT	0.07	-0.18	0.13	-0.06	-0.03
Mediastinum_BT	0.34	0.04	0.11	0.08	0.07

	Lung_Spot_BT	Pleura_BT	Liver_Spot_BT	Brain_Scan_BT	
Outcome_BT	0.02	-0.01	-0.10	0.15	
Age_BT	-0.04	0.07	-0.22	0.07	
Sex_BT	0.00	-0.07	-0.04	0.05	
Bone_Density_BT	0.08	0.00	-0.18	0.06	
Bone_Marrow_BT	-0.02	-0.02	0.00	0.06	
Lung_Spot_BT	1.00	0.08	0.10	0.01	
Pleura_BT	0.08	1.00	-0.01	0.01	
Liver_Spot_BT	0.10	-0.01	1.00	-0.05	
Brain_Scan_BT	0.01	0.01	-0.05	1.00	
Skin_Lesions_BT	0.00	0.00	0.00	0.08	
Stiff_Neck_BT	-0.04	-0.06	-0.20	-0.06	
Supraclavicular_BT	0.00	0.02	0.10	-0.01	
Axillar_BT	-0.01	0.06	0.10	-0.04	
Mediastinum_BT	0.21	0.17	0.13	0.26	
	Skin_Lesions_BT	Stiff_Neck_BT	Supraclavicular_BT	Axillar_BT	
Outcome_BT	0.11	0.28	-0.16	0.07	
Age_BT	0.15	0.07	-0.14	-0.18	
Sex_BT	0.04	0.22	-0.05	0.13	
Bone_Density_BT	0.10	-0.01	0.00	-0.06	
Bone_Marrow_BT	-0.04	-0.05	0.06	-0.03	
Lung_Spot_BT	0.00	-0.04	0.00	-0.01	
Pleura_BT	0.00	-0.06	0.02	0.06	
Liver_Spot_BT	0.00	-0.20	0.10	0.10	
Brain_Scan_BT	0.08	-0.06	-0.01	-0.04	
Skin_Lesions_BT	1.00	0.11	-0.06	-0.24	
Stiff_Neck_BT	0.11	1.00	-0.29	-0.16	
Supraclavicular_BT	-0.06	-0.29	1.00	0.31	
Axillar_BT	-0.24	-0.16	0.31	1.00	
Mediastinum_BT	-0.03	-0.02	-0.17	-0.05	
	Mediastinum_BT				
Outcome_BT	0.34				
Age_BT	0.04				
Sex_BT	0.11				
Bone_Density_BT	0.08				
Bone_Marrow_BT	0.07				
Lung_Spot_BT	0.21				
Pleura_BT	0.17				
Liver_Spot_BT	0.13				
Brain_Scan_BT	0.26				
Skin_Lesions_BT	-0.03				
Stiff_Neck_BT	-0.02				
Supraclavicular_BT	-0.17				
Axillar_BT	-0.05				
Mediastinum_BT	1.00				

Comment: Out of all the variables Mediastinum and Sex have the highest correlation coefficients. Stiff Neck is the variable with the next highest correlation factor.

In terms of collinearities, the correlation matrix suggests the following relationships:

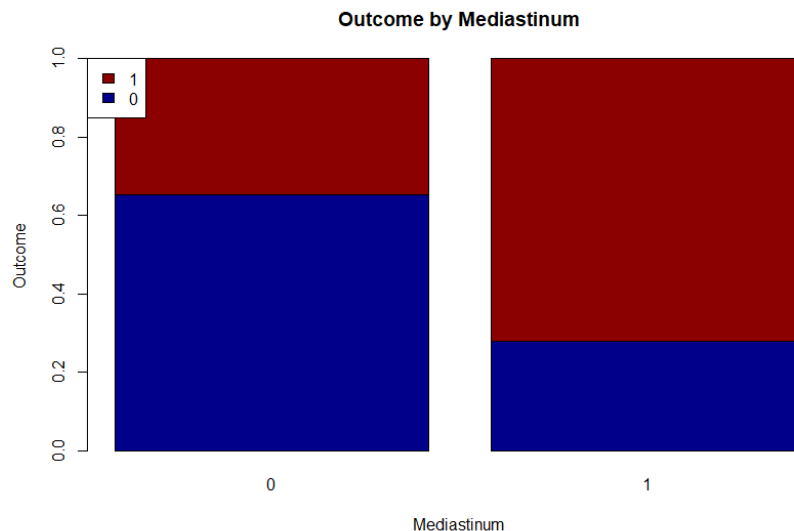
1. Supraclavicular and Stiff Neck, and Supraclavicular and Axillar.
2. Mediastinum and Brain Scan.

## 2.2 Significant Predictors

Mediastinum and Sex appear to be the most significant predictors based on correlation coefficients.

**Mediastinum:** Observed data shows that when Mediastinum is “No”, only 34% of time tumor was present, on the other hand when Mediastinum is “Yes” then 72% of the time tumor was present.

Mediastinum		
Outcome	0	1
0	0.6521739	0.2793522
1	0.3478261	0.7206478



This is further confirmed by the Chi-squared test which results in p-value less than .05, which means the null hypothesis (no relationship) should be rejected. The table also shows how the distribution of outcome should be if there were no relationship which is significantly different from what is observed.

Pearson's Chi-squared test

```
data: Tumor_BT$Outcome_BT and Tumor_BT$Mediastinum_BT  
X-squared = 39.526, df = 1, p-value = 0.000000003238
```

```
chisq_Media_BT$observed # What we observed
```

```
      Tumor_BT$Mediastinum_BT  
Tumor_BT$Outcome_BT  0    1  
0      60    69  
1      32   178
```

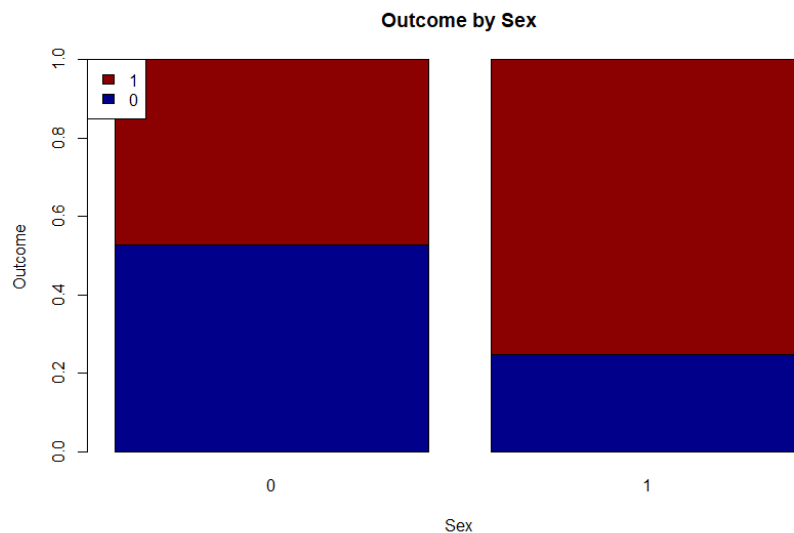
```
chisq_Media_BT$expected # If there were no relationship
```

```
      Tumor_BT$Mediastinum_BT  
Tumor_BT$Outcome_BT  0    1
```

0	35.00885	93.99115
1	56.99115	153.00885

**Sex:** Observed data shows that when Sex is “Female”, only 47% of the time tumor was present, on the other hand when Sex is “Male” then 75% of the time tumor was present.

	Sex	
Outcome	0	1
0	0.5279503	0.2471910
1	0.4720497	0.7528090



Chi-squared test further confirms this. The p-value of less than .05 indicates that the null hypothesis (no relationship) should be rejected. The table also shows how the distribution of outcome should be if there were no relationship which is significantly different from what is observed.

Pearson's Chi-squared test

```
data: Tumor_BT$Outcome_BT and Tumor_BT$Sex_BT
X-squared = 28.269, df = 1, p-value = 0.0000001056
```

```
chisq_Sex_BT$observed    # What we observed
```

	Tumor_BT\$Sex_BT	
Tumor_BT\$Outcome_BT	0	1
0	85	44
1	76	134

```
chisq_Sex_BT$expected    # If there were no relationship
```

	Tumor_BT\$Sex_BT	
Tumor_BT\$Outcome_BT	0	1

```
0 61.26549 67.73451
1 99.73451 110.26549
```

### 3. Model Development

#### 3.1 Stepwise Selection Model

```
summary(stp_Out_glm_BT)
```

Call:

```
glm(formula = Outcome_BT ~ Sex_BT + Bone_Density_BT + Brain_Scan_BT +
     Skin_Lesions_BT + Stiff_Neck_BT + Supraclavicular_BT + Axillar_BT +
     Mediastinum_BT, family = "binomial", data = Tumor_BT, na.action = na.omit)
```

Deviance Residuals:

Min	1Q	Median	3Q	Max
-2.6407	-0.8722	0.4821	0.7060	2.8736

Coefficients:

	Estimate	Std. Error	z value	Pr(> z )	
(Intercept)	-5.6287	0.9663	-5.825	0.0000000571	***
Sex_BT	0.8314	0.2744	3.030	0.00244	**
Bone_Density_BT	0.9148	0.2988	3.062	0.00220	**
Brain_Scan_BT	0.9183	0.5619	1.634	0.10217	
Skin_Lesions_BT	1.3427	0.5608	2.395	0.01664	*
Stiff_Neck_BT	2.0327	0.4302	4.725	0.00000230315	***
Supraclavicular_BT	-0.7450	0.3839	-1.941	0.05231	.
Axillar_BT	2.1933	0.6790	3.230	0.00124	**
Mediastinum_BT	1.6823	0.3035	5.543	0.0000002968	***

---

Signif. codes: 0 '\*\*\*' 0.001 '\*\*' 0.01 '\*' 0.05 '.' 0.1 ' ' 1

(Dispersion parameter for binomial family taken to be 1)

Null deviance: 450.41 on 338 degrees of freedom  
Residual deviance: 337.81 on 330 degrees of freedom  
AIC: 355.81

Number of Fisher Scoring iterations: 5

#### Model Measures

1. Fisher's Scoring Iteration: Iteration count of 5 indicates the model had no issues in convergence.
2. AIC: Stepwise selection model results in a final AIC of 355.81. AIC of the model with all the variables included was 363.33, so only marginal drop.
3. Deviance: Residual deviance is smaller than Null deviance, meaning the proposed better does a better job at explaining data than the Null model.
4. Residual symmetry: Deviance residuals are almost symmetric.
5. z-values: p-values corresponding to z-tests indicate Mediastinum and Stiff Neck are the most significant variable. The Sex variable which was found to have a relatively high correlation coefficient is not as significant as the Mediastinum and Stiff Neck variables.

6. Variable Co-Efficients: Mediastinum and Stiff Neck coefficients have a positive sign as we observed in the correlation matrix.

For the two user models, the output of the stepwise selection model (the selected variables) was used as the base model. Then variable selection was performed.

## 4.2 User Model 1

For User Model 1 all the variables as in output of stepwise selection model were selected and the Brain Scan variable was removed. Brain Scan was the least significant variable as per the p-values of 0.1 (>.05) in the z-test. Additionally, removing the Brain Scan from the model would only lead to a marginal increase in AIC as the iterations of the stepwise selection model showed. So we will have a simpler model (fewer variables) with similar performance.

```
summary(Out_UM_1_BT)
```

Call:

```
glm(formula = Outcome_BT ~ Sex_BT + Bone_Density_BT + Skin_Lesions_BT +  
     Stiff_Neck_BT + Supraclavicular_BT + Axillar_BT + Mediastinum_BT,  
     family = "binomial", data = Tumor_BT, na.action = na.omit)
```

Deviance Residuals:

Min	1Q	Median	3Q	Max
-2.5945	-0.8799	0.4908	0.7185	2.8881

Coefficients:

	Estimate	Std. Error	z value	Pr(> z )	
(Intercept)	-4.7961	0.7935	-6.044	0.0000000150	***
Sex_BT	0.8332	0.2729	3.053	0.00227	**
Bone_Density_BT	0.9090	0.2970	3.060	0.00221	**
Skin_Lesions_BT	1.3584	0.5537	2.454	0.01414	*
Stiff_Neck_BT	1.9720	0.4260	4.629	0.00000366993	***
Supraclavicular_BT	-0.7173	0.3821	-1.877	0.06046	.
Axillar_BT	2.1079	0.6639	3.175	0.00150	**
Mediastinum_BT	1.7793	0.2978	5.974	0.0000000232	***

---

Signif. codes: 0 '\*\*\*' 0.001 '\*\*' 0.01 '\*' 0.05 '.' 0.1 ' ' 1

(Dispersion parameter for binomial family taken to be 1)

Null deviance: 450.41 on 338 degrees of freedom  
Residual deviance: 340.54 on 331 degrees of freedom  
AIC: 356.54

Number of Fisher Scoring iterations: 5

### Model Measures

1. Fisher's Scoring Iteration: Iteration count of 5 indicates the model had no issues in convergence.
2. AIC: User Model 1 results in AIC of 356.51. So only a marginal increase from the stepwise selection model's AIC.
3. Deviance: Residual deviance is smaller than Null deviance, meaning the proposed better does a better job at explaining data than the Null model.



4. Residual symmetry: Deviance residuals are symmetric for the most part.
5. z-values: p-values corresponding to z-tests indicate that still Mediastinum and Stiff Neck are the most significant variables although the p-values are slightly different now.
6. Variable Co-Efficients: Mediastinum and Stiff Neck coefficients have a positive sign as we observed in the correlation matrix.

### 4.3 User Model 2

Next, we analyze the impact of the variable Supraclavicular. Supraclavicular appeared to be collinear with the Stiff Neck variable as we observed in the correlation matrix. This could be explained by the fact that swollen supraclavicular lymph nodes could lead to a stiff neck (Healthwise Staff, 2020). Furthermore, after the Brain Scan variable, Supraclavicular was the next least significant variable both in terms of AIC and p-value. So, it will be interesting to observe the impact of removing the Supraclavicular variable from the model and keep other variables intact as in the stepwise selection model.

```
summary(Out_UM_2_BT)
```

Call:

```
glm(formula = Outcome_BT ~ Sex_BT + Bone_Density_BT + Brain_Scan_BT +  
    Skin_Lesions_BT + Stiff_Neck_BT + Axillar_BT + Mediastinum_BT,  
    family = "binomial", data = Tumor_BT, na.action = na.omit)
```

Deviance Residuals:

Min	1Q	Median	3Q	Max
-2.4299	-0.8022	0.5056	0.7383	2.6850

Coefficients:

	Estimate	Std. Error	z value	Pr(> z )	
(Intercept)	-5.7110	0.9532	-5.991	0.00000000208	***
Sex_BT	0.8320	0.2726	3.052	0.00227	**
Bone_Density_BT	0.8531	0.2943	2.899	0.00374	**
Brain_Scan_BT	0.8736	0.5594	1.562	0.11838	
Skin_Lesions_BT	1.2604	0.5509	2.288	0.02214	*
Stiff_Neck_BT	2.1293	0.4243	5.019	0.00000052051	***
Axillar_BT	1.7381	0.6048	2.874	0.00406	**
Mediastinum_BT	1.7551	0.2997	5.856	0.00000000474	***

---

Signif. codes: 0 '\*\*\*' 0.001 '\*\*' 0.01 '\*' 0.05 '.' 0.1 ' ' 1

(Dispersion parameter for binomial family taken to be 1)

Null deviance: 450.41 on 338 degrees of freedom  
Residual deviance: 341.58 on 331 degrees of freedom  
AIC: 357.58

Number of Fisher Scoring iterations: 4

### Model Measures

1. Fisher's Scoring Iteration: It took 4 iterations for the model to converge faster than the other models.

2. AIC: User Model 2 results in an AIC of 357.58 which is slightly more than both stepwise and user model 1.
3. Deviance: Residual deviance is smaller than Null deviance, meaning the proposed better does a better job at explaining data than the Null model.
4. Residual symmetry: Deviance residuals are also symmetric for the most part.
5. z-values: p-values corresponding to z-tests indicate that still Mediastinum and Stiff Neck are the most significant variable although the p-values are slightly different now.
6. Variable Co-Efficients: Mediastinum and Stiff Neck coefficients have a positive sign as we observed in the correlation matrix.

#### 4. Model Evaluation

##### User Model 1

User Model 1		Predicted		
		0	1	
Actual	0	80	49	129
	1	26	184	210
		106	233	339

Parameter	Value
Accuracy	77.9%
Specificity	62.0%
Sensitivity	87.6%
Precision	79.0%

##### User Model 2

User Model 2		Predicted		
		0	1	
Actual	0	81	48	129
	1	25	185	210
		106	233	339

Parameter	Value
Accuracy	78.5%
Specificity	62.8%
Sensitivity	88.1%
Precision	79.4%

Comment: User Model 2 slightly outperforms User Model 1 in all the above-calculated aspects.

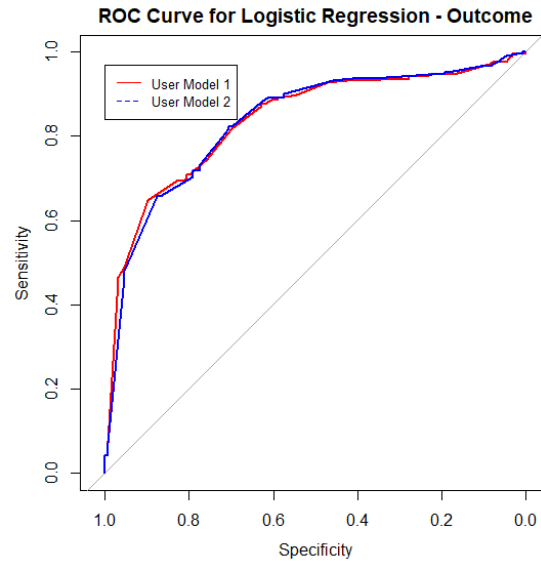
##### ROC Curve

ROC stands for receiving operator characteristics. The ROC curve shows the trade-off between sensitivity and specificity. Ideally, we want a classifier whose ROC curve passes through the top left-corner (~100 % sensitivity and 100 % specificity). When comparing two ROC curves the one closer to the top-left corner indicates a better performance. A random classifier will give points lying along the diagonal. The closer the curve comes to the 45-degree diagonal of the ROC space, the less accurate the classifier is.

In our case, both the models have overlapping ROC, except for higher specificity where User Model 1 seems to be doing better.

##### AUC

AUC means the area under the curve (ROC). In ideal conditions, we want a classifier with an AUC of 1. Generally higher AUC means a better model, but it may change depending upon application whether we want higher sensitivity at low specificity or vice versa. Overall AUC is slightly higher for User Model 1 (.8379) than User Model 2 (.8353).



## 5. Model Evaluation

Overall, both models have similar performance. It is difficult to recommend one over another. User Model 1 appears to be marginally better in terms of ROC curve and AUC whereas User Model 2 has slightly better accuracy, specificity, sensitivity, and precision values.

## Part 2

### 1. Logistic Regression – Stepwise

#### 1.1. Model

```
summary(stp_Out_glm_BT)
```

Call:

```
glm(formula = Outcome_BT ~ Sex_BT + Bone_Density_BT + Brain_Scan_BT +  
    Skin_Lesions_BT + Stiff_Neck_BT + Supraclavicular_BT + Axillar_BT +  
    Mediastinum_BT, family = "binomial", data = Tumor_BT, na.action = na.omit)
```

Deviance Residuals:

Min	1Q	Median	3Q	Max
-2.6407	-0.8722	0.4821	0.7060	2.8736

Coefficients:

	Estimate	Std. Error	z value	Pr(> z )
(Intercept)	-5.6287	0.9663	-5.825	0.0000000571 ***
Sex_BT	0.8314	0.2744	3.030	0.00244 **

```

Bone_Density_BT      0.9148      0.2988      3.062      0.00220 **
Brain_Scan_BT        0.9183      0.5619      1.634      0.10217
Skin_Lesions_BT      1.3427      0.5608      2.395      0.01664 *
Stiff_Neck_BT        2.0327      0.4302      4.725 0.00000230315 ***
Supraclavicular_BT  -0.7450      0.3839     -1.941      0.05231 .
Axillar_BT           2.1933      0.6790      3.230      0.00124 **
Mediastinum_BT       1.6823      0.3035      5.543 0.0000002968 ***

```

---

Signif. codes: 0 '\*\*\*' 0.001 '\*\*' 0.01 '\*' 0.05 '.' 0.1 ' ' 1

(Dispersion parameter for binomial family taken to be 1)

Null deviance: 450.41 on 338 degrees of freedom  
Residual deviance: 337.81 on 330 degrees of freedom  
AIC: 355.81

Number of Fisher Scoring iterations: 5

## 1.2. Confusion Matrix

	Predicted	
Act Outcome	0	1
0	83	46
1	26	184

## 1.3. Run Time

sw\_Time\_BT

Time difference of 0.141644 secs

# 2. Naïve-Bayes Classification

## 2.1. Data Transformation

The Outcome variable was converted to factor data type to use Naïve Bayes Classifier.

```
str(Tumor_BT)
```

```

'data.frame':   339 obs. of  14 variables:
 $ Outcome_BT      : Factor w/ 2 levels "0","1": 2 2 2 2 2 2 2 2 2 1 ...
 $ Age_BT          : num  0 0 0 0 0 0 0 0 0 0 ...
 $ Sex_BT          : num  0 1 1 0 0 0 0 0 0 1 ...
 $ Bone_Density_BT : num  1 0 0 1 0 1 1 0 1 0 ...
 $ Bone_Marrow_BT  : num  1 1 1 1 1 1 1 1 1 1 ...
 $ Lung_Spot_BT    : num  1 0 1 1 1 1 1 1 1 1 ...
 $ Pleura_BT       : num  1 1 1 0 1 1 1 0 1 1 ...
 $ Liver_Spot_BT   : num  0 0 1 1 1 0 1 1 1 1 ...
 $ Brain_Scan_BT   : num  1 1 1 1 1 1 1 1 1 1 ...
 $ Skin_Lesions_BT : num  1 0 1 1 1 0 1 1 1 1 ...
 $ Stiff_Neck_BT   : num  1 0 1 1 1 1 1 1 1 1 ...
 $ Supraclavicular_BT: num  0 1 0 0 0 0 1 0 1 0 ...
 $ Axillar_BT      : num  0 1 1 0 0 0 0 0 0 0 ...
 $ Mediastinum_BT  : num  1 1 1 1 1 1 1 1 1 0 ...

```

## 2.2. Model

```
Tumor_Naive_BT <- NaiveBayes(Outcome_BT ~ Age_BT + Sex_BT + Bone_Density_BT +  
  Bone_Marrow_BT + Lung_Spot_BT + Pleura_BT + Liver_Spot_BT + Brain_Scan_BT +  
  Skin_Lesions_BT + Stiff_Neck_BT + Supraclavicular_BT + Axillar_BT +  
  Mediastinum_BT, data = Tumor_BT, na.action=na.omit)
```

## 2.3. Confusion Matrix

	Predicted	
Actual	0	1
0	71	58
1	30	180

## 2.4. Run Time

NB\_Time\_BT

Time difference of 0.006008148 secs

## 3. Linear Discriminant Analysis

### 3.1. Data Transformation

No new transformations are required for LDA.

### 3.2. Model

```
Tumor_Discrim_BT <- lda(Outcome_BT ~ Age_BT + Sex_BT + Bone_Density_BT +  
  Bone_Marrow_BT + Lung_Spot_BT + Pleura_BT + Liver_Spot_BT +  
  Brain_Scan_BT + Skin_Lesions_BT + Stiff_Neck_BT +  
  Supraclavicular_BT + Axillar_BT + Mediastinum_BT,  
  data = Tumor_BT, na.action=na.omit)
```

### 3.3. Confusion Matrix

	Predicted	
Actual	0	1
0	84	45
1	26	184

### 3.4. Run Time

LDA\_Time\_BT

Time difference of 0.004987001 secs

#### 4. Compare All Three Classifiers

Model	Accuracy	Run Time	Type I Errors	Type II Errors
Stepwise Selection	78.8%	0.14 secs	46	26
Naïve Bayes	74.0%	0.006 secs	58	30
LDA	79.1%	0.005 secs	45	26
User Model 2	78.5%	0.02 secs *	48	25
* time for stepwise model not included				

- 4.1. LDA is the most accurate classifier with an accuracy of 79.1%
- 4.2. LDA has the fastest runtime of .005 secs.
- 4.3. LDA has the lowest Type I errors (45).
- 4.4. Both LDA and stepwise selection models have the lowest Type II errors (26).
- 4.5. In terms of accuracy, Type I and Type II errors the difference between LDA and Stepwise selection model is minimal. But LDA is about 30 times faster than the stepwise selection model. So, in this case, LDA is the best overall classifier.
- 4.6. In case of tumor diagnosis, even one positive case should not go undetected. So, the focus should be on the model with the lowest false negatives, i.e., the one that minimizes Type II errors. Keep that in mind, User Model 2 is recommended, although it does not do as well as LDA on other parameters.

#### References

Healthwise Staff. (2020, December 6). *Swollen Lymph Nodes*. Retrieved from [www.healthlinkbc.ca](https://www.healthlinkbc.ca/health-topics/aa65796spec):  
<https://www.healthlinkbc.ca/health-topics/aa65796spec>