
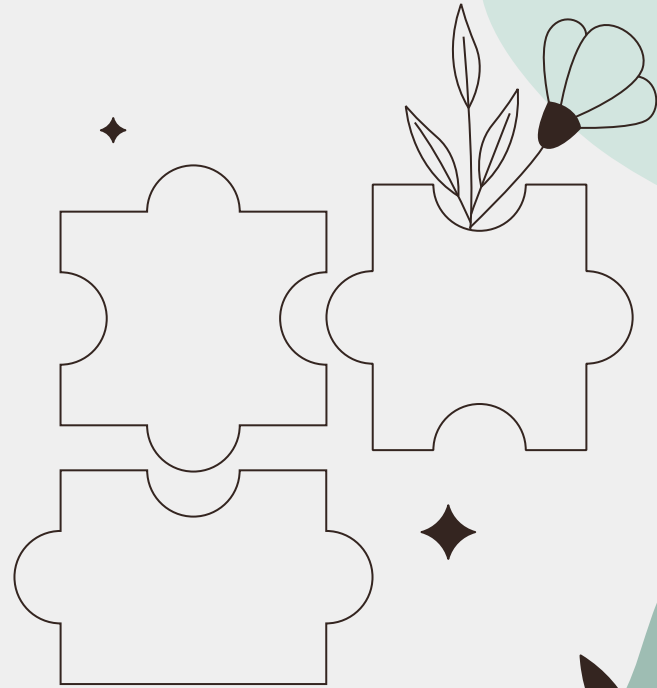




# Predictive Modeling for Heart Attack Risk



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01

# Introduction

# Cardiovascular diseases (CVDs)


- Leading cause of death globally
- Primary symptoms :
  - Heart attack
  - stroke





# 19,700,000

Estimated number of lives taken by CVDs each year



# Heart Attack Prediction Dataset



## Source

[www.kaggle.com](https://www.kaggle.com)



## Structure

25 features :  
13 categorical,  
12 ratio



## Target

Heart Attack Risk  
(yes/ no)

# Heart Attack Prediction Dataset

- **Demographic info** : Age, Sex, BMI
- **Health conditions** : Blood pressure, Diabetes, etc.
- **Habits** : Smoking, Physical activity per day, etc.
- **Personal info** : Income, Family history, etc.



02

# Preprocessing



# Preprocessing

## Data cleaning

Removing duplicated  
and invalid data

## Train-test split

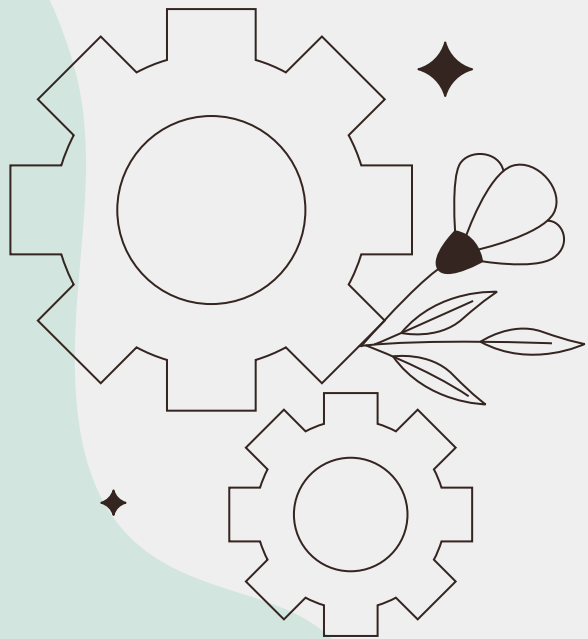
Data is splitted to  
train and test sets  
(66.7% / 33.3%).

## Label encoding

Encoding nominal  
and ordinal features  
accordingly

## Normalizing

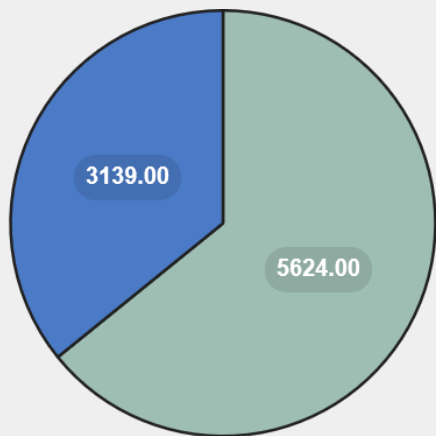
Scaling data for  
better ML  
convergence speed





# 03 Data Exploration

# Distribution of Heart Attack Risk



**Healthy**  
People with no risk of heart attack.

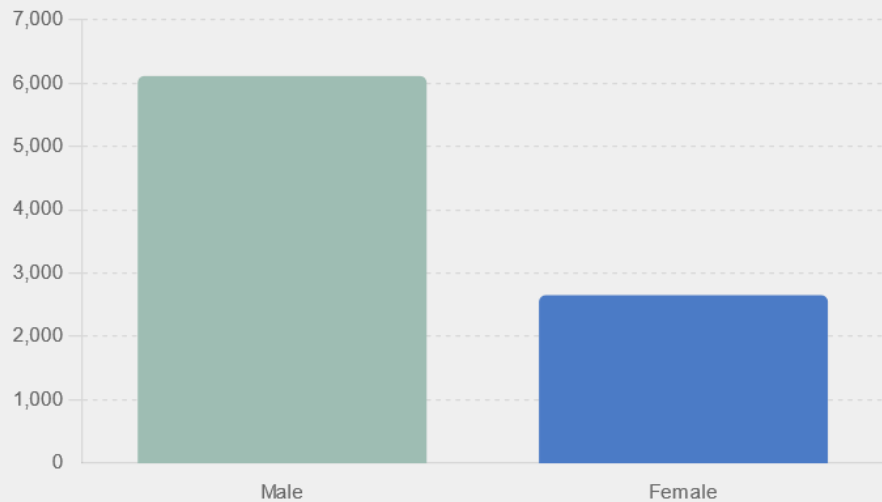
64.2%

**Social withdrawal**  
People with heart risk of heart attack

35.8%

Distribution of the target label.

# Distribution of Gender



**Male** 69.7%

**Female** 30.3%

Proportion of men and women in the dataset

# Famous well-being centers

## South Korea

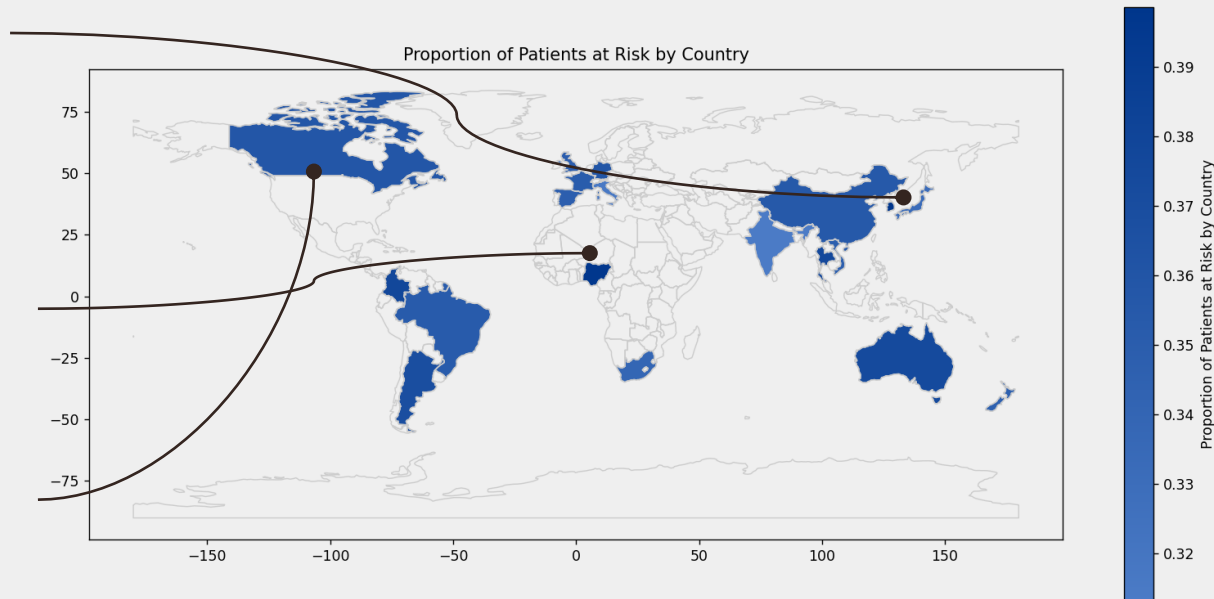
With 39.85% is the leading country

## Nigeria

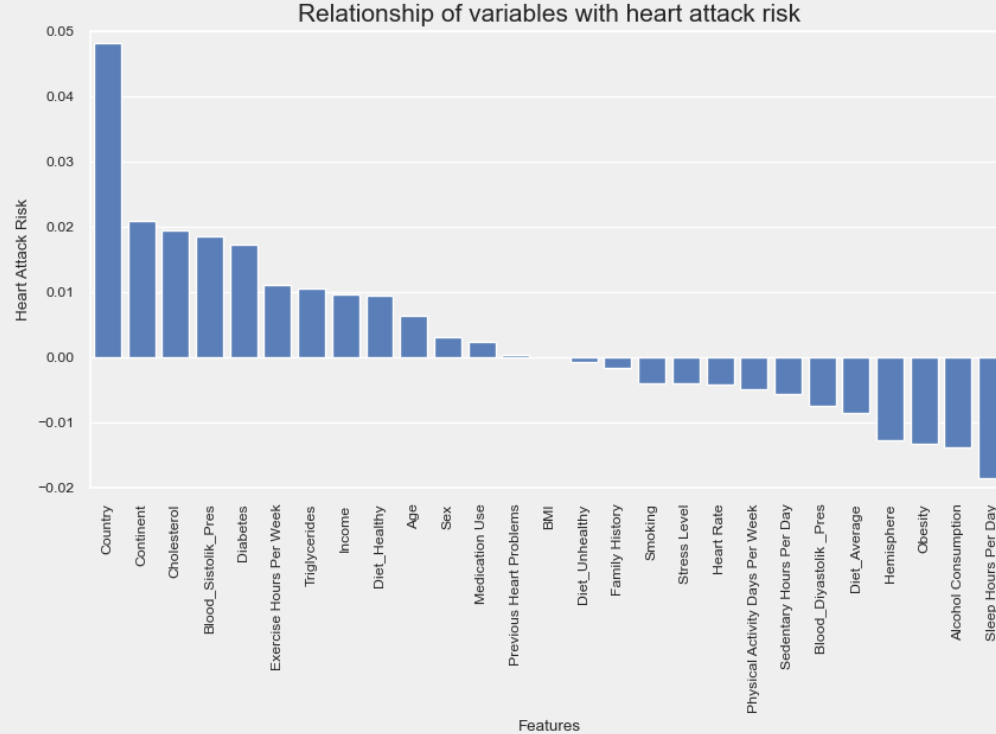
With 39.72% in second place

## United States

With 39.52% in third place

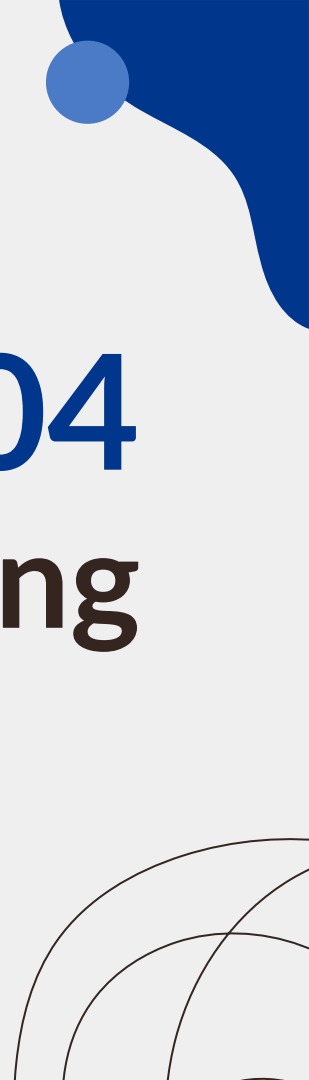


# Analyzing Features Linked to Heart Attack Risk





# 04 Learning



# Learning

- Different classification models are employed.
- Validation techniques are used to assess the model performance.





# Classification Models

Logistic  
Regression

Descision  
Tree

Random  
Forest


SVM classifier

KNN


Guassian  
Naïve Bayes

# First trial

Model	Accuracy	Recall
Logistic regression	64%	100%
SVM	64%	100%
Adaboost	64%	97%
KNN	56%	50%

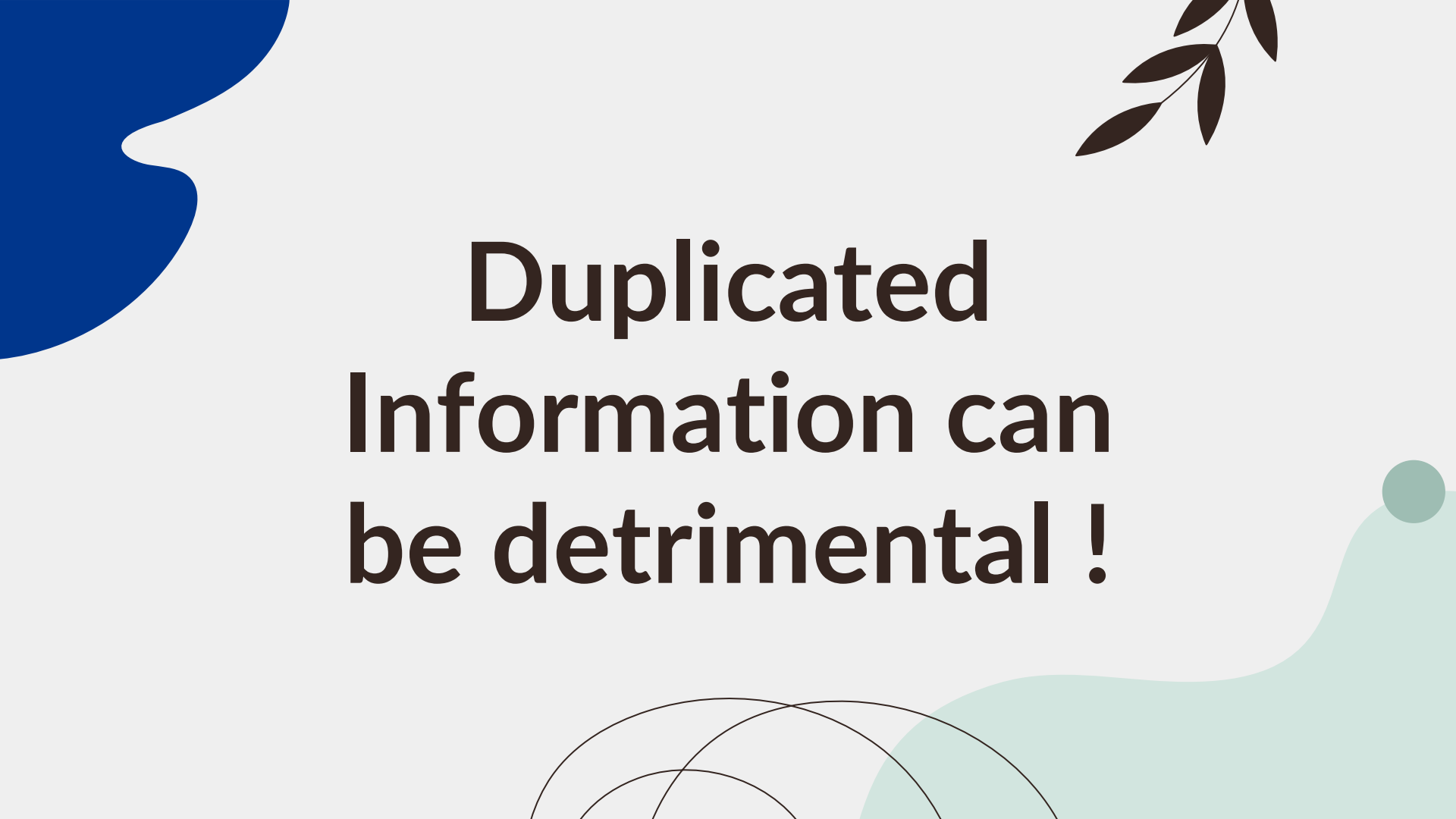


To find a correct and reliable model with higher accuracy, it is vital to tune the hyperparameters.




## Second trial using grid search

Model	Accuracy	Recall
Logistic regression	65%	100%
SVM	64%	100%
Adaboost	64%	99%
KNN	61%	87%



**Duplicated  
Information can  
be detrimental !**



# Model Learning with Dimension Reduction

## Preprocessing

Cleaning dataset as before



## Dimension reduction

Performing dimension reduction  
using PCA method



## Learning

Learning process of different  
classification models



## Validation

Stratified K-Fold



## Model Evaluation

## Second trial using PCA

Model	Accuracy	Recall
Logistic regression	65%	100%
SVM	65%	100%
Adaboost	64%	99%
KNN	61%	88%

# Validation

- Using Stratified K-Fold, the accuracy and performance are assessed.
- Validation results show that the accuracy for each model is not biased towards the training data.





# 100%

Percentage of patients that are predicted correctly.





65%

Accuracy up until now



# Why is the accuracy limited ?

- Poor data quality
- Information is hidden → requires feature engineering
- Intrinsic difficulty of the problem → requires more data collection





05

# Future Steps

# Feature Engineering



## Technical Knowledge

To ensure the discovery of useful features, it's crucial to gain technical medical knowledge about heart attacks or seek assistance from specialists.



## EDA

More exploration is required to uncover relationships and patterns.

# Resources

## **Dataset : Heart Attack Prediction**

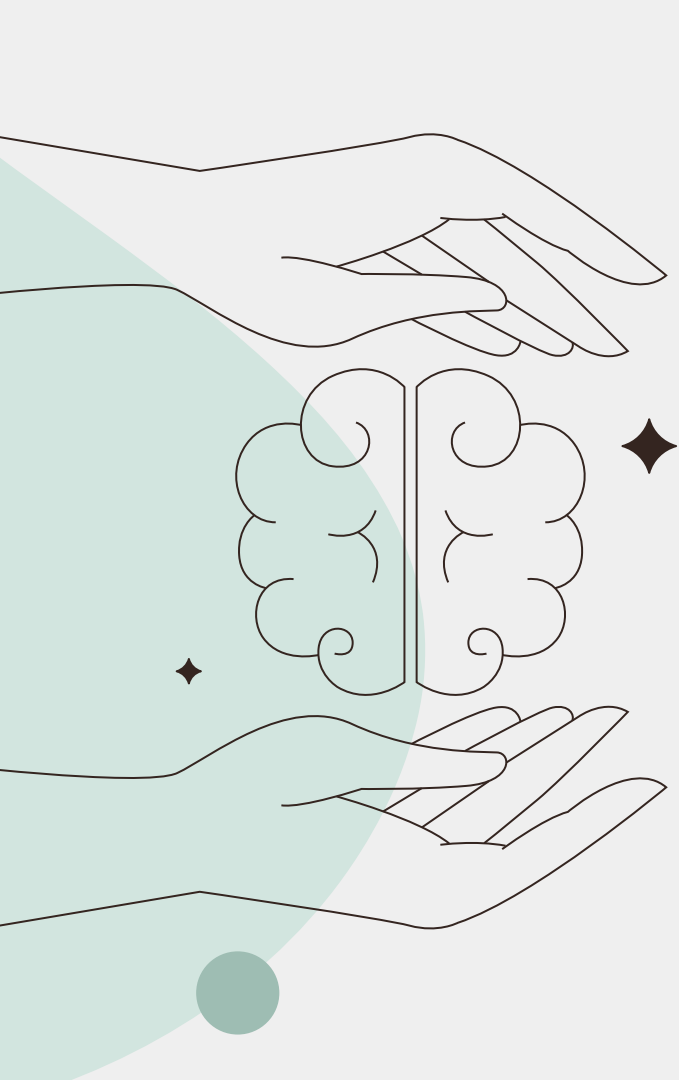
- <https://www.kaggle.com/datasets/m1relly/heart-attack-prediction>

## **Machine Learning methods**

- [Dr.Abolghasemi, Dr.Tavassolipoor, Machine Learning lecture notes](#)

## **other resources:**

- [World Health Organization : Cardiovascular diseases](#)
- [Ourworldindata : Cardiovascular Diseases statistics](#)



# Thanks!

**Do you have any questions?**

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