BANGALORE

A Project Report

On

"Early Prediction of Lifestyle Diseases"

Batch Details

| Sl. No. | Roll Number | Student Name | | | | |
|---------|--------------|---------------|--|--|--|--|
| 1 | 20201CSD0153 | DEEKSHITH D L | | | | |
| 2 | 20201CSD0182 | MITHUN R | | | | |
| 3 | 20201CSD0187 | MADHUSHREE | | | | |

School of Computer Science,

Presidency University, Bengaluru.

Under the guidance of,

Mr. Lakshmisha S K

School of Computer Science,

Presidency University, Bengaluru

CONTENTS

| 1. | . Introduction about Project |
|----|-----------------------------------|
| 2. | Literature Review |
| 3. | Objectives |
| 4. | . Methodology |
| 5. | Timeline for Execution of Project |
| 6. | Expected Outcomes |
| 7. | Conclusion |
| 8. | References |
| | |
| | |
| | |
| | |
| | |

1. INTRODUCTION

General Introduction:

The increasing prevalence of lifestyle diseases has become a significant global health concern, leading to a surge in healthcare costs. Early prediction and preventive measures can play a crucial role in reducing the burden of these diseases. This report focuses on utilizing detailed demographic and vital statistics, obtained during physical checkups, to predict the likelihood of lifestyle diseases. Technology companies, such as Google, can employ machine learning models to enhance early detection, enabling more effective preventive healthcare strategies.

Introduction to the Domain

Lifestyle diseases encompass conditions like heart disease, diabetes, hypertension, and obesity, often influenced by factors such as age, genetics, diet, physical activity, and smoking. The objective is to leverage machine learning to analyze these factors and predict the likelihood of individuals developing such diseases, facilitating timely interventions.

Problem Statement:

How can we predict the likelihood of lifestyle diseases early to enable preventive healthcare. This can reduce the cost of treatment significantly. Potential solution: using detailed demographic and vital stats about people who have a particular disease and those who dont, technology companies like Google can create machine learning models to predict specific diseases in an individual during physical checkups

2. LITERATURE REVIEW

Existing Methods

Advantages:

- **Early Detection:** Existing methods leverage medical data for early disease detection.
- Cost Reduction: Early identification enables cost-effective preventive measures.
- Improved Patient Outcomes: Timely interventions lead to better patient outcomes.
- **Data-Driven Insights:** Data analytics provides valuable insights into disease trends.

Limitations:

- Data Privacy Concerns: Use of personal health data raises privacy issues.
- Limited Predictive Accuracy: Current methods may have limitations in accurately predicting disease risk.
- **Dependency on Data Quality:** The reliability of predictions depends on the quality of input data.
- **Ethical Considerations:** Ethical concerns arise from the use of personal health information.

3.OBJECTIVES

- Develop a machine learning model for predicting lifestyle diseases.
- Enhance predictive accuracy by incorporating advanced features.
- Address privacy concerns through secure data handling practices.
- Evaluate the model's effectiveness in a real-world setting.

4. METHODOLOGY

Experimental Details/Methodology

Hardwares and Softwares Used:

Hardware:

• High-performance computing system for model training and validation.

Software:

- Python for programming.
- Scikit-learn, TensorFlow, or PyTorch for machine learning model development.
- Jupyter Notebooks for experimentation and analysis.

Design Procedure

- Data Collection: Gather detailed demographic and vital stats from individuals during physical checkups.
- Data Preprocessing: Clean and preprocess the data, handling missing values and outliers.
- Feature Engineering: Extract relevant features, considering factors like age, gender, BMI, smoking status, etc.
- **Model Development:** Implement machine learning models such as logistic regression, decision trees, or neural networks.
- Model Training: Train the models using historical data, fine-tuning parameters for optimal performance.
- Validation: Evaluate the model's performance using a separate dataset.
- Privacy Measures: Implement encryption and secure data handling practices to address privacy concerns.
- **Deployment:** Deploy the model for real-world prediction during physical checkups.

5. OUTCOMES

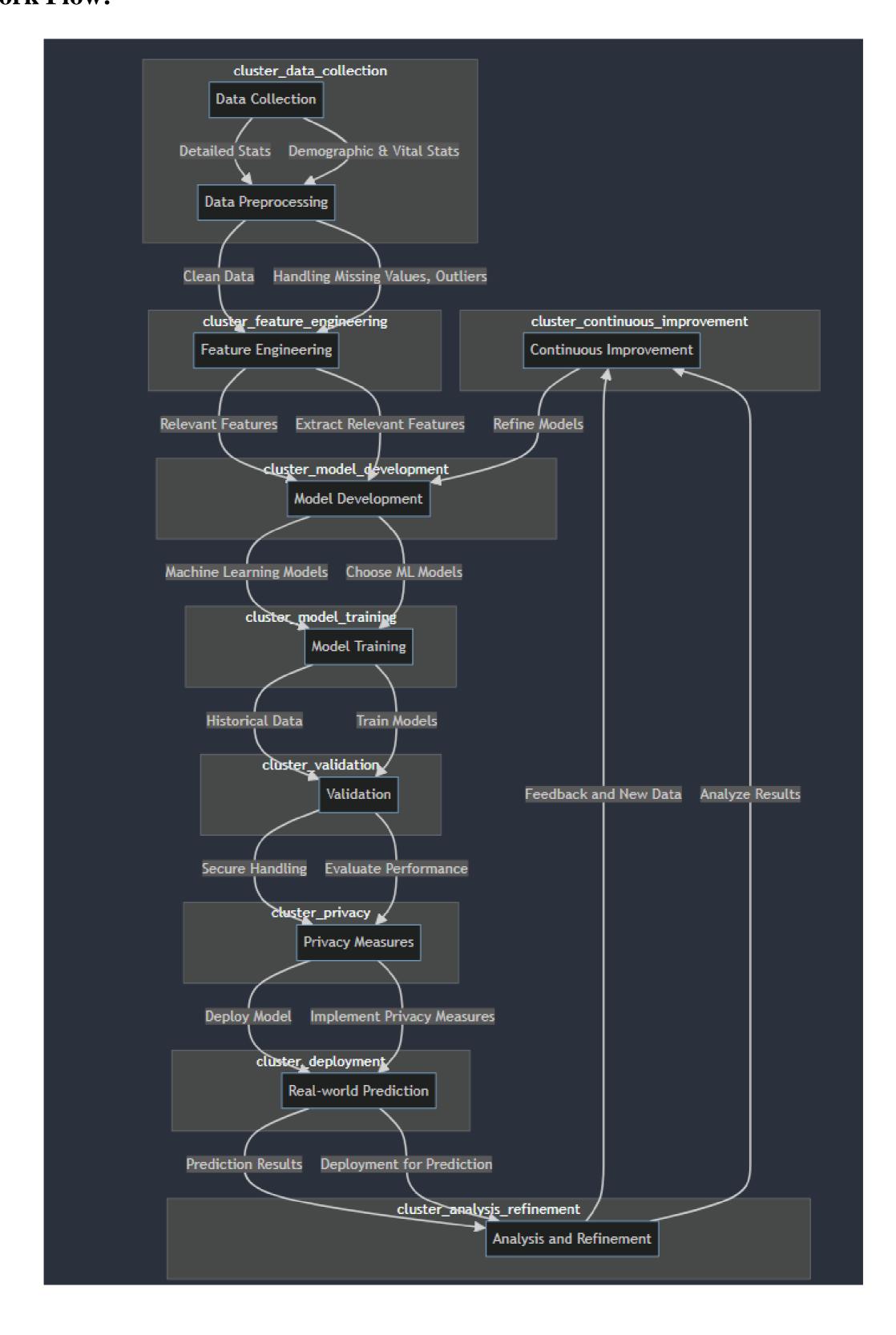
The expected outcomes include:

- A machine learning model capable of predicting the likelihood of lifestyle diseases.
- Improved accuracy and reliability compared to existing methods.
- Enhanced understanding of the impact of various features on disease prediction.

6. PROJECT EXECUTION PLAN

- Data collection and preprocessing.
- Feature engineering and model development.
- Model training and validation.
- Privacy measures implementation and testing.
- Deployment and real-world testing.
- Analysis of results, refinement of models, and final report preparation.

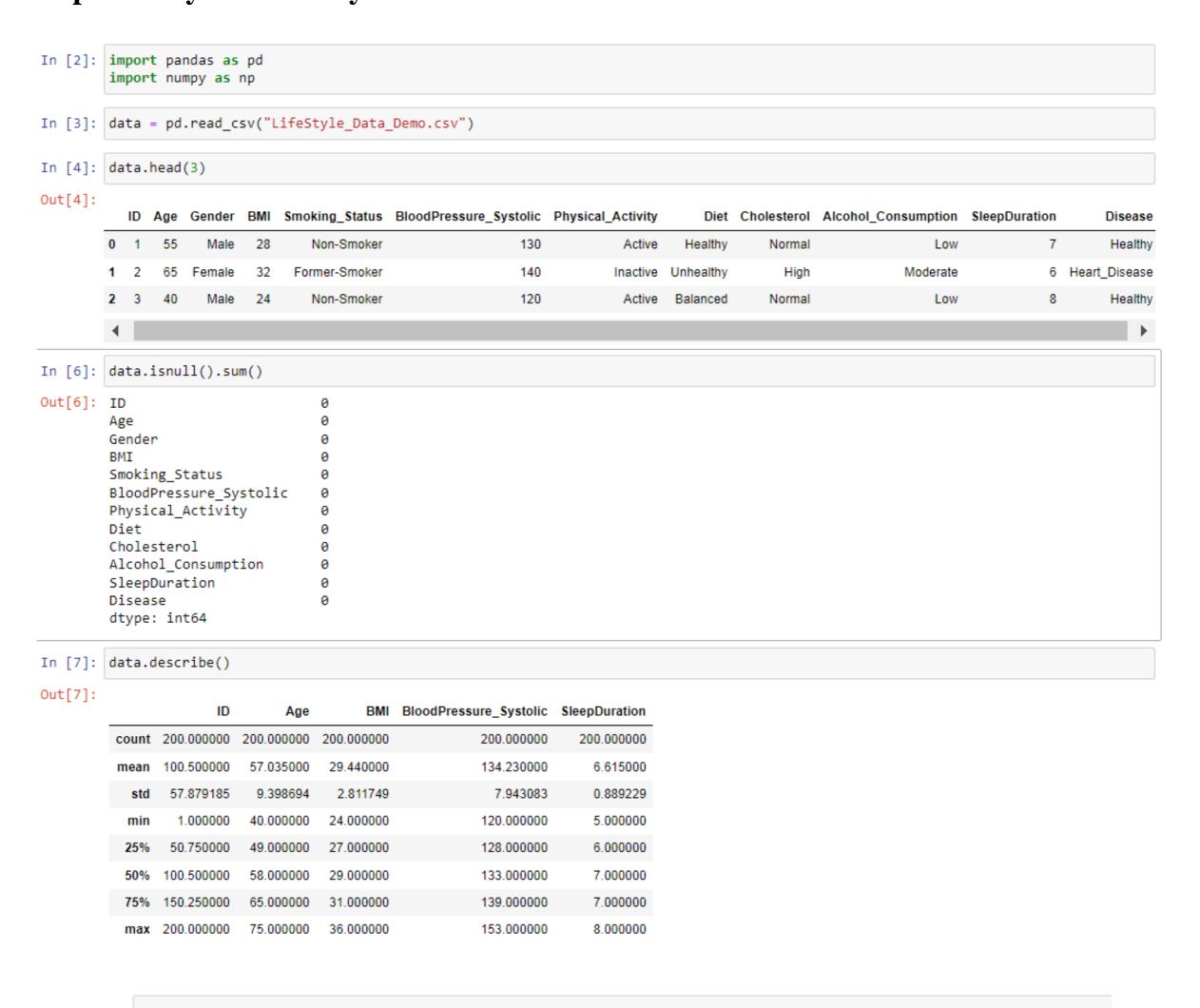
Work Flow:



Data Collection:

| Α | В | С | D | E | F | G | Н | I | J | K | L | M |
|----|-----|--------|-----|------------|--------------|--------------|-----------|-------------|------------|------------|---------------|---|
| ID | Age | Gender | BMI | Smoking_St | BloodPressur | Physical_Act | Diet | Cholesterol | Alcohol_Co | SleepDurat | Disease | |
| 1 | 55 | Male | 28 | Non-Smoke | 130 | Active | Healthy | Normal | Low | 7 | Healthy | |
| 2 | 65 | Female | 32 | Former-Smo | 140 | Inactive | Unhealthy | High | Moderate | 6 | Heart_Disease | |
| 3 | 40 | Male | 24 | Non-Smoke | 120 | Active | Balanced | Normal | Low | 8 | Healthy | |
| 4 | 70 | Female | 35 | Smoker | 150 | Inactive | Unhealthy | High | High | 5 | Heart_Disease | |
| 5 | 60 | Male | 30 | Non-Smoke | 135 | Active | Balanced | Normal | Moderate | 7 | Hypertension | |
| 6 | 50 | Female | 28 | Non-Smoke | 128 | Active | Balanced | Normal | Low | 7 | Healthy | |
| 7 | 75 | Male | 33 | Non-Smoke | 145 | Inactive | Unhealthy | High | Low | 6 | Diabetes | |
| 8 | 58 | Male | 29 | Non-Smoke | 132 | Active | Balanced | Normal | Moderate | 7 | Hypertension | |
| 9 | 68 | Female | 31 | Non-Smoke | 138 | Inactive | Unhealthy | High | Low | 6 | Hypertension | |
| 10 | 43 | Female | 25 | Non-Smoke | 123 | Active | Balanced | Normal | Low | 8 | Healthy | |
| 11 | 57 | Male | 27 | Former-Smo | 128 | Active | Balanced | Normal | Moderate | 7 | Heart_Disease | |
| 12 | 48 | Female | 26 | Non-Smoke | 125 | Active | Balanced | Normal | Moderate | 7 | Healthy | |
| 13 | 53 | Female | 28 | Non-Smoke | 130 | Active | Unhealthy | High | Moderate | 6 | Obesity | |
| 14 | 63 | Male | 31 | Non-Smoke | 137 | Inactive | Healthy | Normal | Low | 7 | Hypertension | |
| 15 | 62 | Female | 29 | Non-Smoke | 134 | Active | Balanced | Normal | Low | 8 | Hypertension | |
| 16 | 42 | Mala | 25 | Smokar | 125 | Activo | Unhoalthy | High | ⊔iah | 5 | Obocity | |

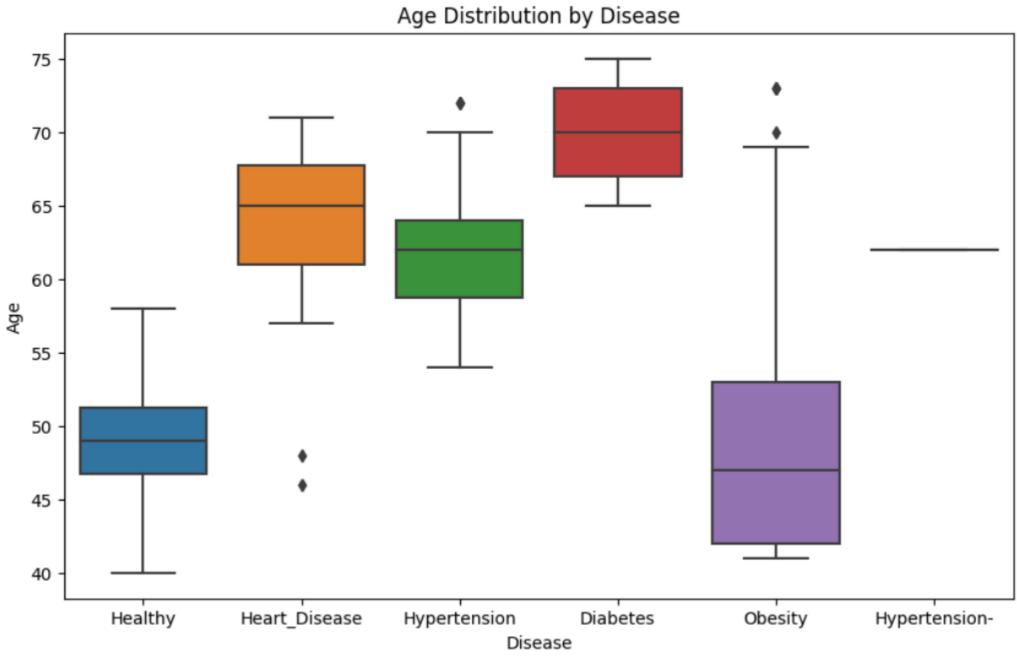
Exploratory Data Analysis:



In [8]: data.shape

Out[8]: (200, 12)

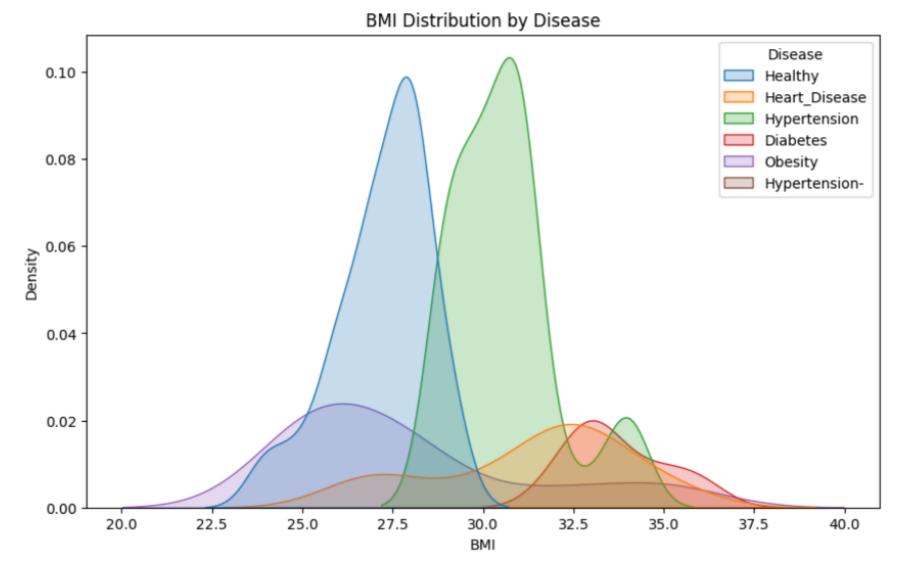
```
In [14]: # Boxplot for age distribution by disease
plt.figure(figsize=(10, 6))
sns.boxplot(x='Disease', y='Age', data=data)
plt.title('Age Distribution by Disease')
plt.show()
```



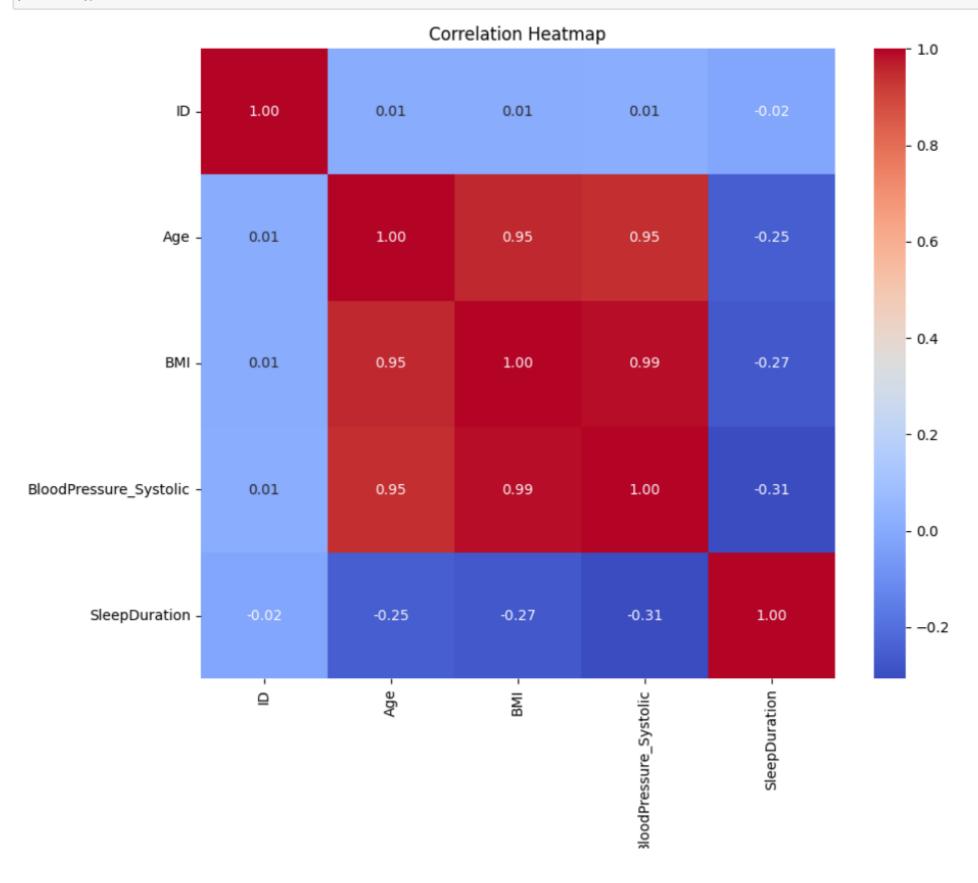


```
In [16]: # Distribution of BMI by Disease
plt.figure(figsize=(10, 6))
sns.kdeplot(x='BMI', hue='Disease', data=data, fill=True)
plt.title('BMI Distribution by Disease')
plt.show()

d:\Users\e3t\anaconda3\lib\site-packages\seaborn\distributions.py:316: UserWarning: Dataset has 0 variance; skipping density es
timate. Pass `warn_singular=False` to disable this warning.
    warnings.warn(msg, UserWarning)
```







Data Preprocessing:

```
In [19]: # Handle missing values (replace with mean for simplicity)
         data.fillna(data.mean(), inplace=True)
         C:\Users\e3t\AppData\Local\Temp\ipykernel 10660\3797966520.py:2: FutureWarning: Dropping of nuisance columns in DataFrame reduc
         tions (with 'numeric_only=None') is deprecated; in a future version this will raise TypeError. Select only valid columns befor
         e calling the reduction.
           data.fillna(data.mean(), inplace=True)
In [ ]: #Data Preprocessing
In [20]: from sklearn.model_selection import train_test_split
         from sklearn.preprocessing import StandardScaler, LabelEncoder
In [21]: # Encode categorical variables (Label Encoding for simplicity)
         label_encoder = LabelEncoder()
         data['Gender'] = label_encoder.fit_transform(data['Gender'])
         data['Smoking Status'] = label encoder.fit transform(data['Smoking Status'])
         data['Diet'] = label_encoder.fit_transform(data['Diet'])
         data['Alcohol_Consumption'] = label_encoder.fit_transform(data['Alcohol_Consumption'])
In [22]: # Split the dataset into features (X) and target variable (y)
         X = data.drop('Disease', axis=1)
         y = data['Disease']
         # Split the dataset into training and testing sets
         X_train, X_test, y_train, y_test = train_test_split(X, y, test_size=0.2, random_state=42)
In [23]: # Standardize numerical features using StandardScaler
         scaler = StandardScaler()
         X_train[['Age', 'BMI', 'BloodPressure_Systolic']] = scaler.fit_transform(X_train[['Age', 'BMI', 'BloodPressure_Systolic']])
         X_test[['Age', 'BMI', 'BloodPressure_Systolic']] = scaler.transform(X_test[['Age', 'BMI', 'BloodPressure_Systolic']])
                                                                                                                            Activate Windows
                                                                                                                            Go to Settings to activat
In [24]: # Display the preprocessed dataset
         print(X_train.head())
         print(X_test.head())
               TD
                        Age Gender
                                          RMT Smoking Status BloodPressure Systolic \
```

Model Building:

Continue.....

7. CONCLUSION

This project aims to significantly contribute to preventive healthcare by leveraging machine learning for early prediction of lifestyle diseases. Through comprehensive data analysis, the model is expected to provide accurate predictions, allowing for timely interventions and cost-effective healthcare.

8.REFERENCES

Books:

- "Introduction to Machine Learning with Python: A Guide for Data Scientists" by Andreas C. Müller & Sarah Guido.
- "Python Machine Learning" by Sebastian Raschka and Vahid Mirjalili.
- "Healthcare Data Analytics" by Chandan K. Reddy, Charu C. Aggarwal, and Hillol Kargupta

Journals and Papers:

- "Machine Learning for Healthcare: On the Verge of a Major Shift in Healthcare Epidemiology" by Alaa M. Ahmed et al.
- "Machine Learning in Medicine: A Practical Introduction" by Thomas H. McCoy Jr. et al.
- "Machine Learning for Predictive Modeling of Health Outcomes" by Rajkomar et al.

Online Resources:

- PubMed Central (PMC) Machine Learning and Healthcare Section.
- arXiv.org Machine Learning (cs.LG)
- Google Scholar
- Wikipedia