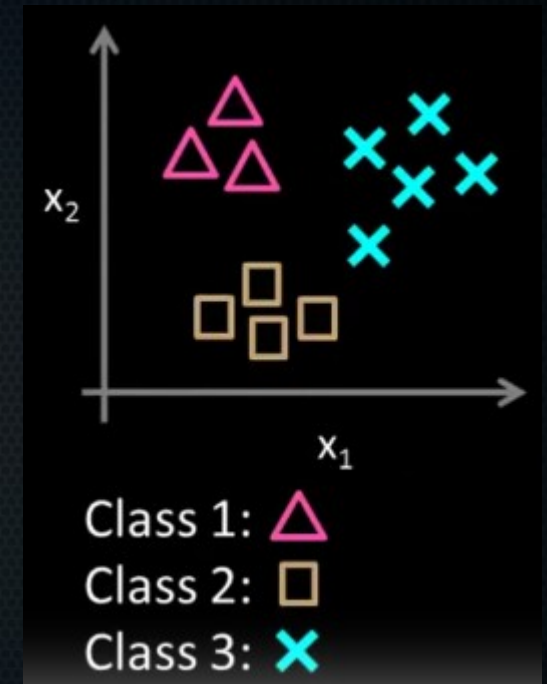


# What if we have more than one class?

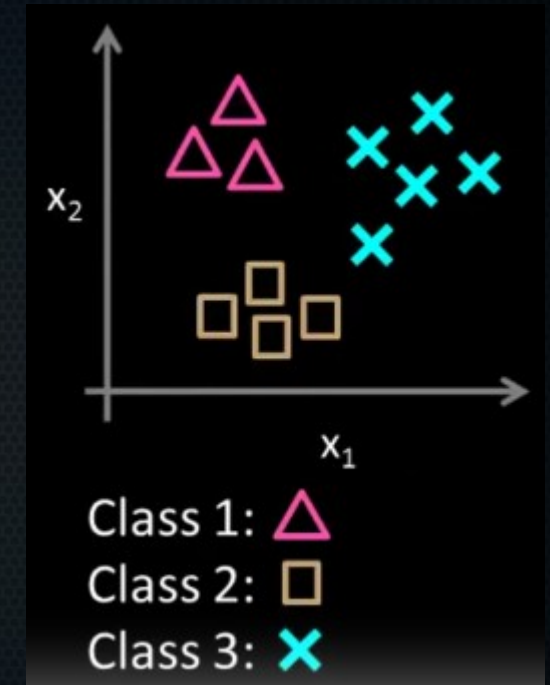
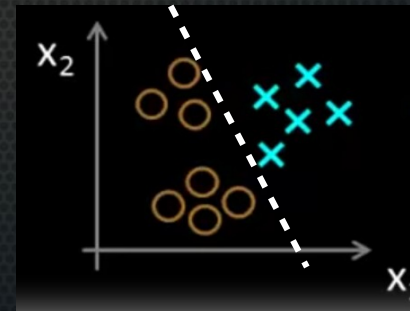
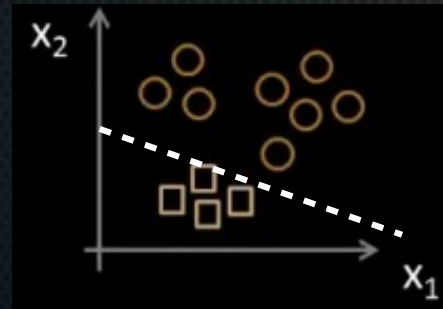
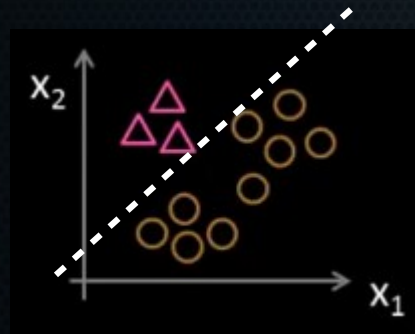
---

- What do you think we could do?



# What if we have more than one class?

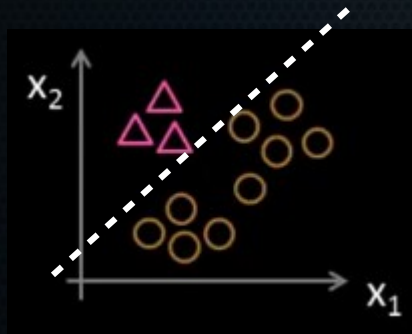
- What do you think we could do?
- Train a separate binary classifier for each instance:





# What if we have more than one class?

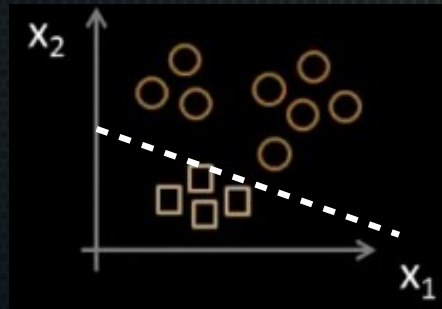
- What do you think we could do?
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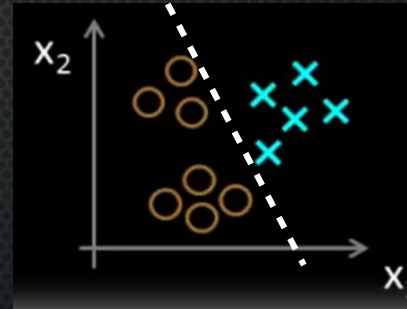
$$h_{\theta}^{(1)}(x)$$

$$P(y=i|x;\theta)$$

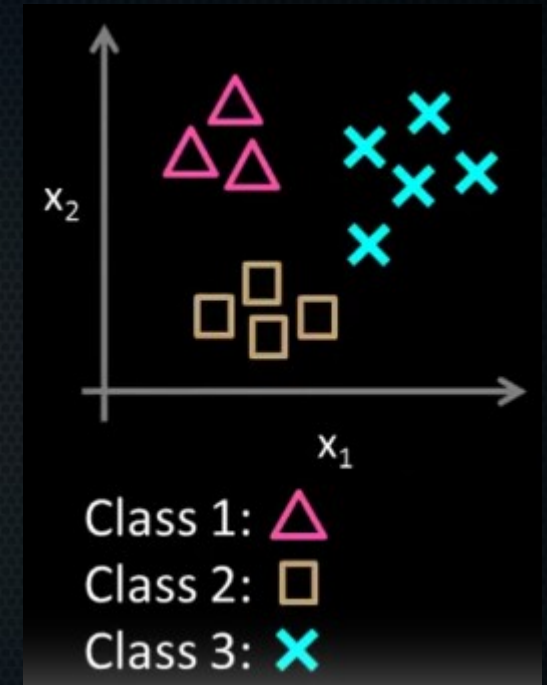
For  $i$  classes, train  $i$  binary classifiers to predict that the point is class  $i$  given the data



$$h_{\theta}^{(2)}(x)$$



$$h_{\theta}^{(3)}(x)$$



# How well are we doing?

---

- We can't use an R-squared here. So what can we use?
- Idea: accuracy.



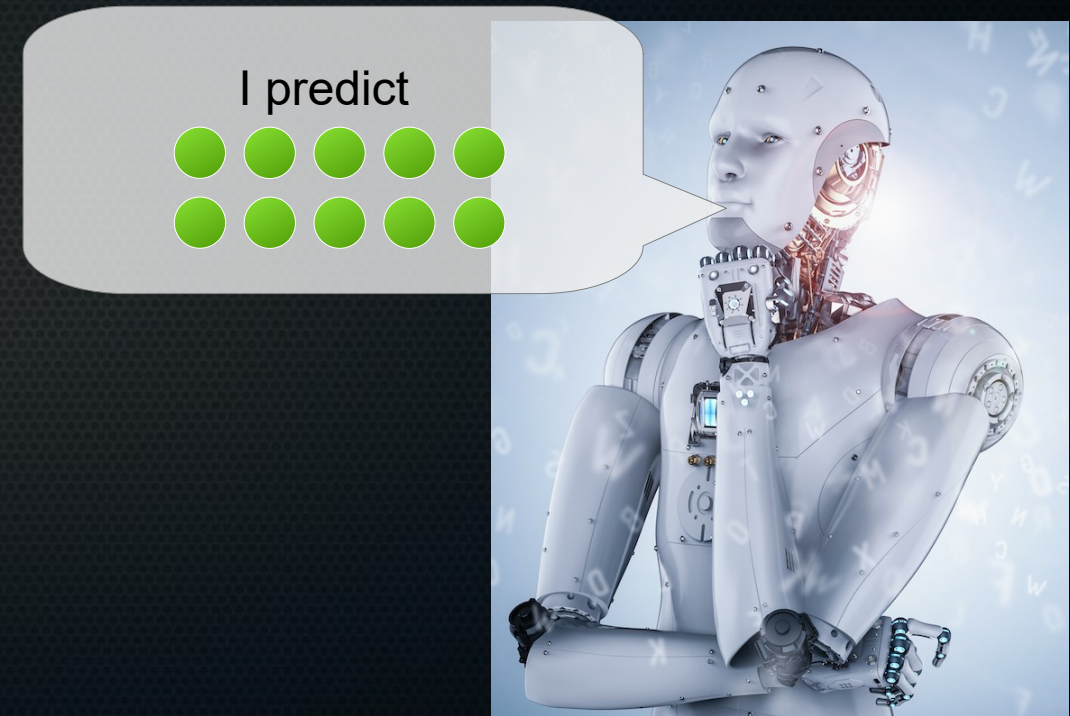
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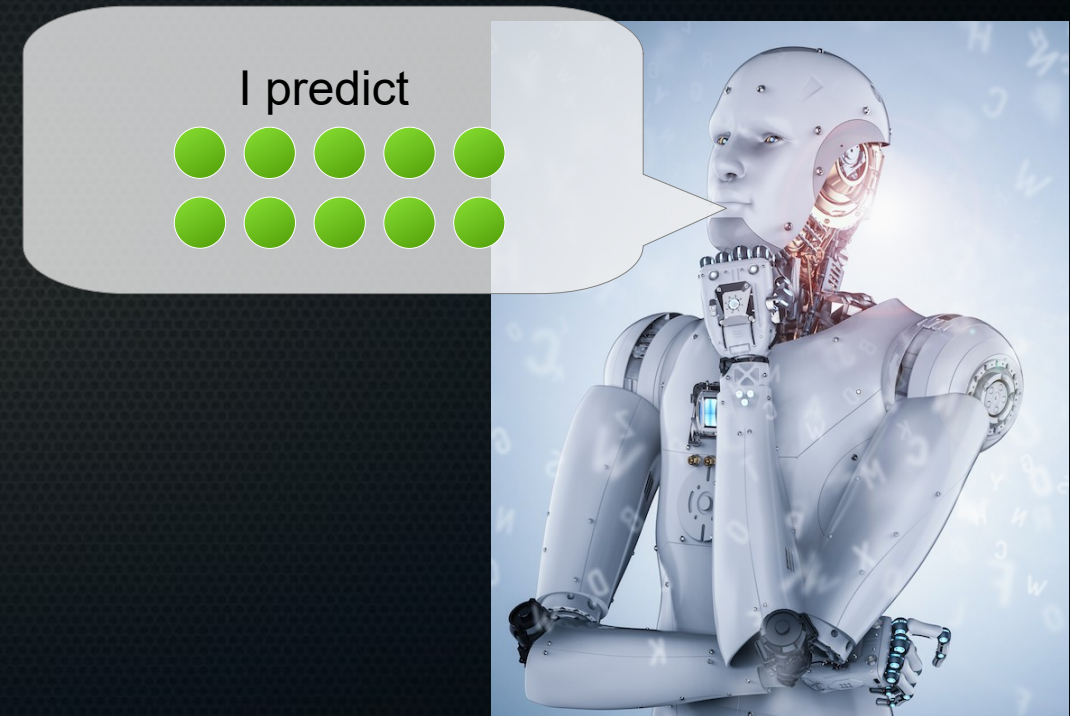


# How well are we doing?

- We can't use an R-squared here. So what can we use?
- Idea: accuracy.



- Accuracy = 90% (9/10 correct).  
→ seems pretty good!

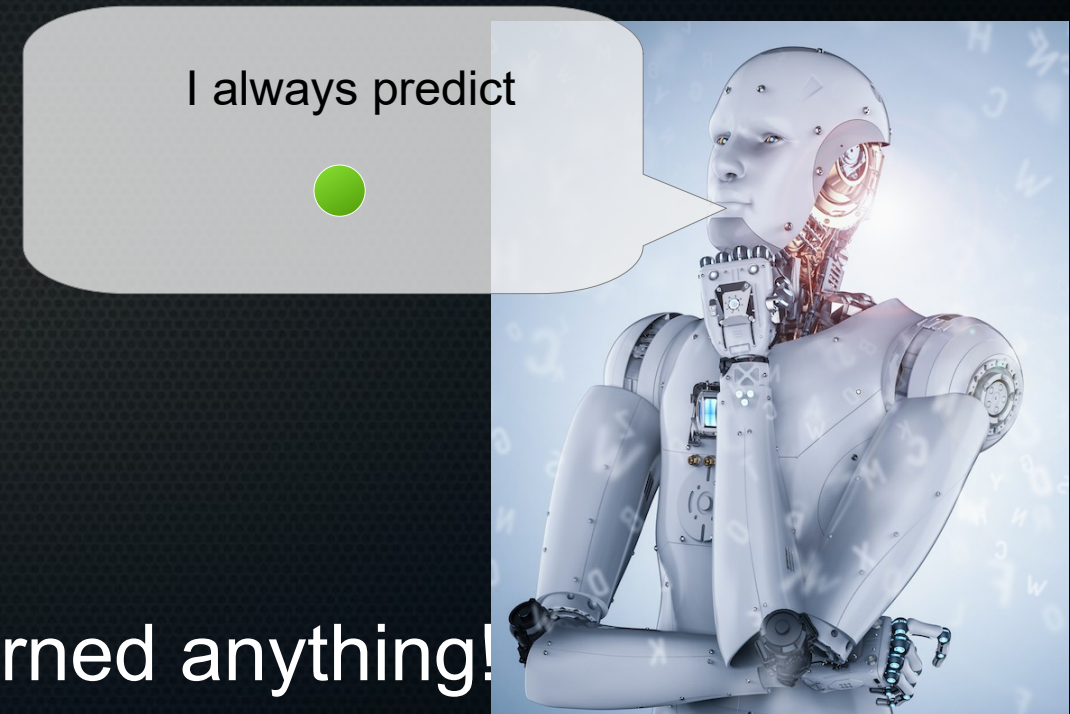


# How well are we doing?

- We can't use an R-squared here. So what can we use?
- Idea: accuracy.



- Accuracy = 90% (9/10 correct).  
→ Lucky break! Classifier hasn't learned anything!





# Need something else to measure performance

---

- Have 4 types of predictions:

		<u>Reality</u>	
		Cancer	Not Cancer
<u>Model Prediction</u>	Cancer	True Positive	False Positive
	Not Cancer	False Negative	True Negative

# Need something else to measure performance

- Have 4 types of predictions:
- We want to know both how many true positives we pick out from the test data (sensitivity) and how many true negatives we correctly classify as negative (specificity).

		<u>Reality</u>	
		Cancer	Not Cancer
<u>Model Prediction</u>	Cancer	True Positive	False Positive
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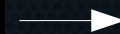
# Need something else to measure performance

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		Cancer	Not Cancer
<u>Model Prediction</u>	Cancer	True Positive	False Positive
	Not Cancer	False Negative	True Negative

Sensitivity (true positive rate)

$$\frac{\text{True Positives}}{\text{True Positives} + \text{False Negatives}}$$



What proportion of positives in the data do we correctly predict?

Specificity (true negative rate)

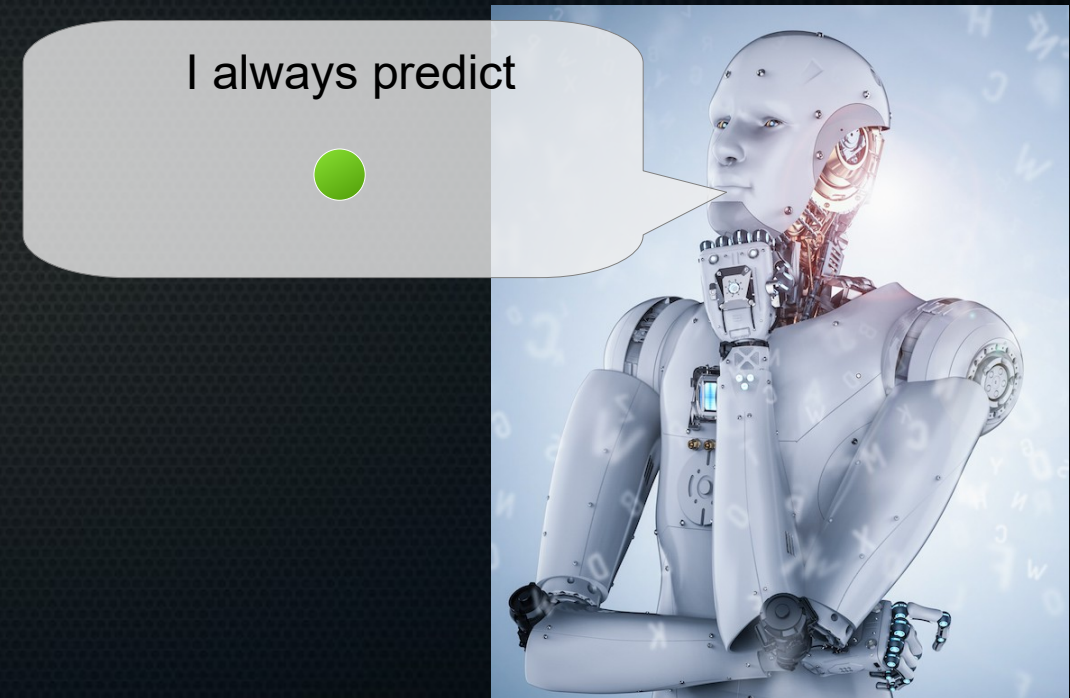
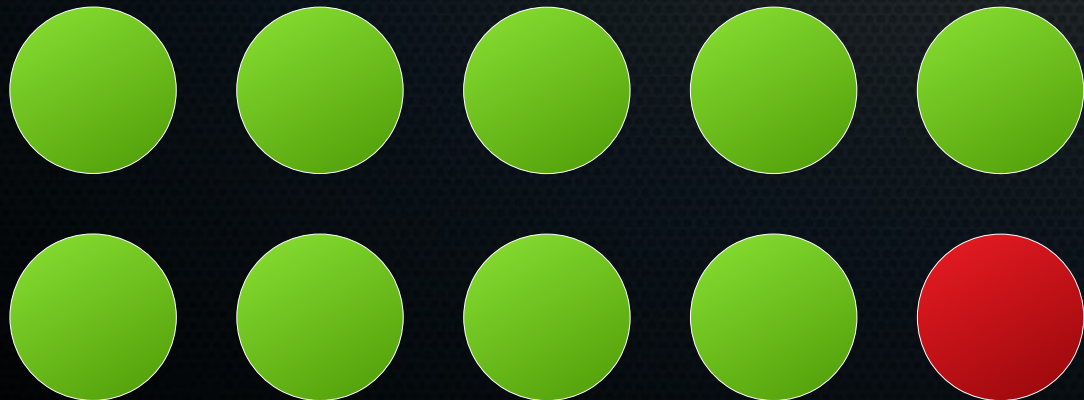
$$\frac{\text{True Negatives}}{\text{True Negatives} + \text{False Positives}}$$



What proportion of negatives in the data do we correctly predict?

# How well are we doing?

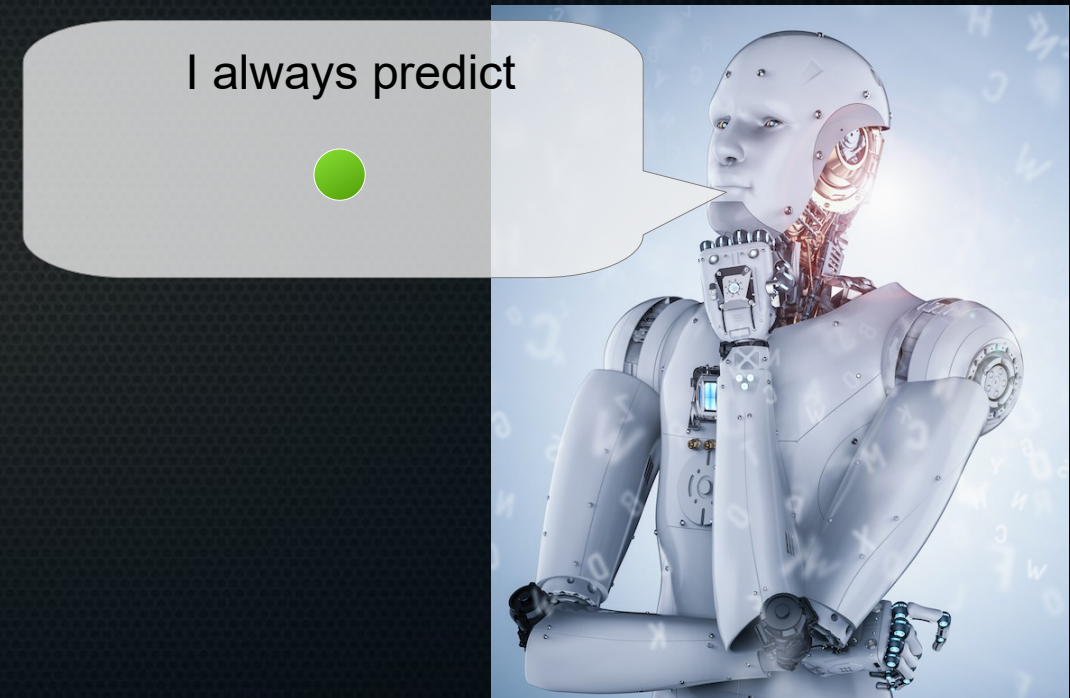
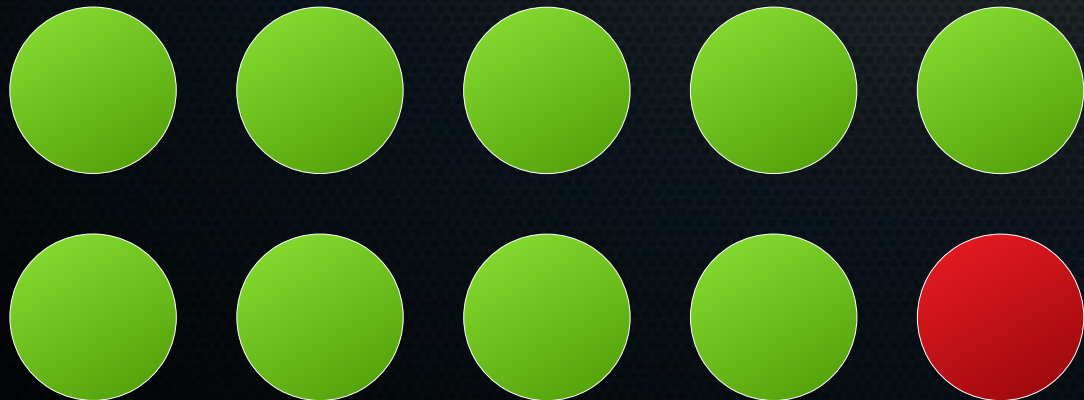
- Accuracy = 90% (9/10 correct).  
→ Lucky break! Classifier hasn't learned anything!
- Sensitivity = 100%
- Specificity = 0%





# How well are we doing?

- Accuracy = 90% (9/10 correct).  
→ Lucky break! Classifier hasn't learned anything!
- Sensitivity = 100% } Found all positives
- Specificity = 0% } By having 0 discerning ability



# ROC curve

- What is the best balance between sensitivity and specificity?

- Depends on your application:

Sensitivity (true positive rate)	$\frac{\text{True Positives}}{\text{True Positives} + \text{False Negatives}}$
Specificity (true negative rate)	$\frac{\text{True Negatives}}{\text{True Negatives} + \text{False Positives}}$

Patient data



**What do you care about  
most in each case?**



No chemo

Chemotherapy

Patient data



No follow-up  
screening

Follow-up  
diabetes



# ROC curve

- What is the best balance between sensitivity and specificity?

- Depends on your application:

Sensitivity (true positive rate)	$\frac{\text{True Positives}}{\text{True Positives} + \text{False Negatives}}$
Specificity (true negative rate)	$\frac{\text{True Negatives}}{\text{True Negatives} + \text{False Positives}}$

Patient data



Don't want to give devastating chemo treatments unnecessarily: care most about specificity!



No chemo

Chemotherapy

Patient data



Don't want to miss early signs diabetes if follow-up tests will confirm or deny: care most about sensitivity!



No follow-up screening

Follow-up diabetes

# ROC curve

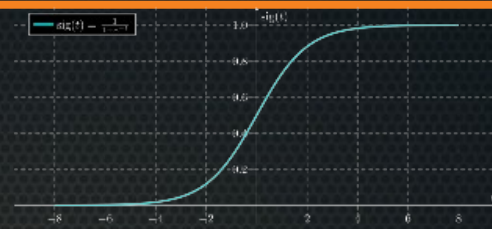
- How do you implement a focus on specificity or sensitivity?

- How do we work with this?  $h_{\theta}(x) = \frac{1}{1 + e^{-(\theta^T \cdot x)}}$

- Interpret outcome of  $h_{\theta}(x)$  as probability that class = 1 given the features. Example:

$$x = \begin{bmatrix} x_0 \\ x_1 \\ x_2 \end{bmatrix} = \begin{bmatrix} 1 \\ \text{Tumor size} \\ \text{Neovascularisation level} \end{bmatrix}$$

$h_{\theta}(x) = 0.8 \longrightarrow$  80% chance of tumor being malignant (class 1)  
100% - 80%  $\rightarrow$  20 % chance of being benign (class 0)

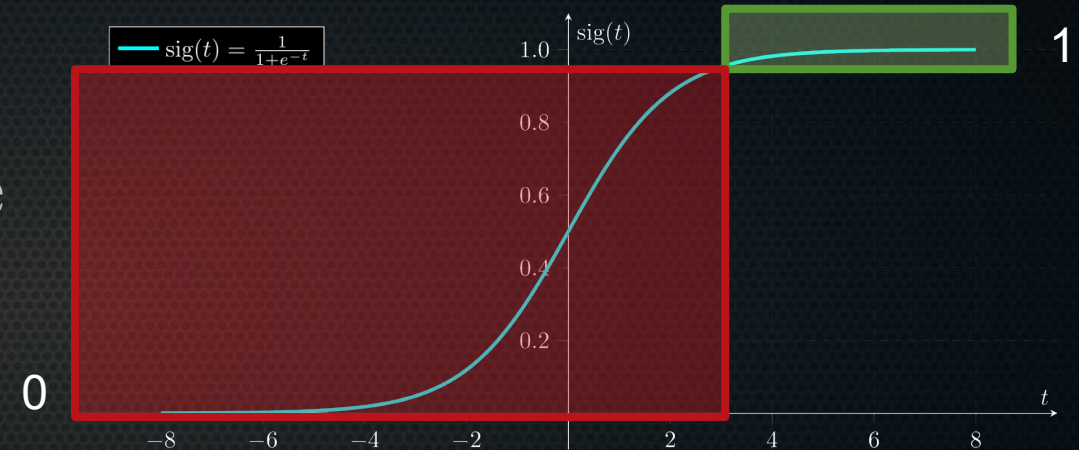
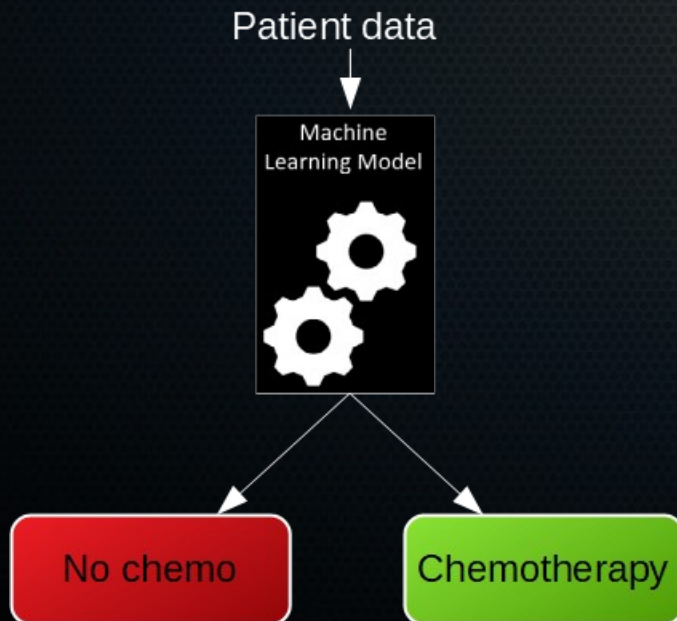




# ROC curve

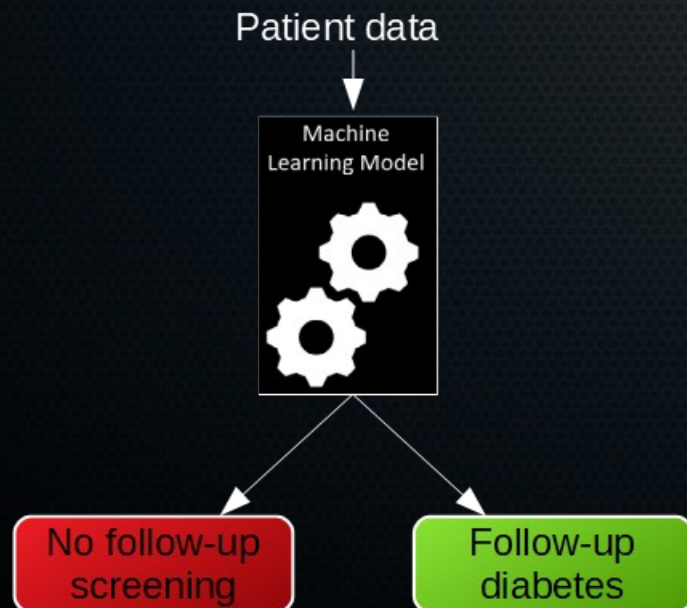
- How do you implement a focus on specificity or sensitivity?
- We could say:

if  $h_{\theta}(x) \geq 0.95$  classify as positive  
else classify as negative



# ROC curve

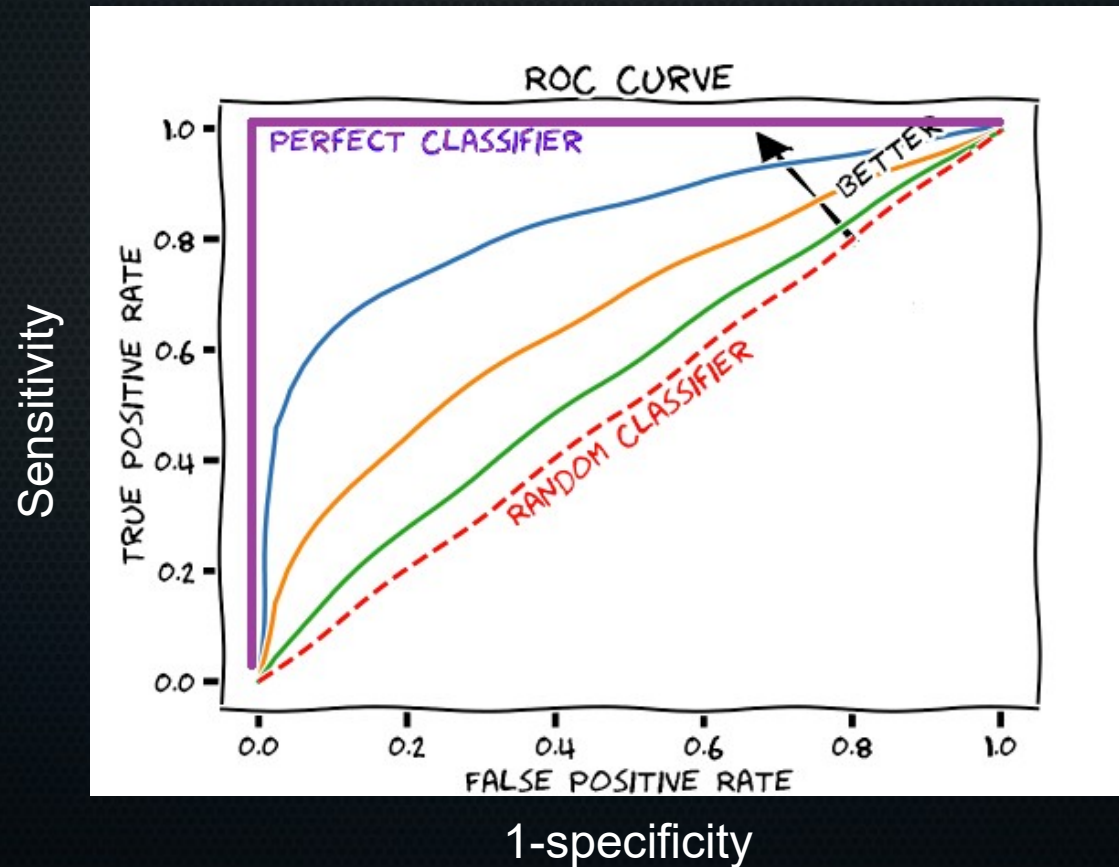
- How do you implement a focus on specificity or sensitivity?
- We could say:  
if  $h_{\theta}(x) \geq 0.3$  classify as positive  
else classify as negative





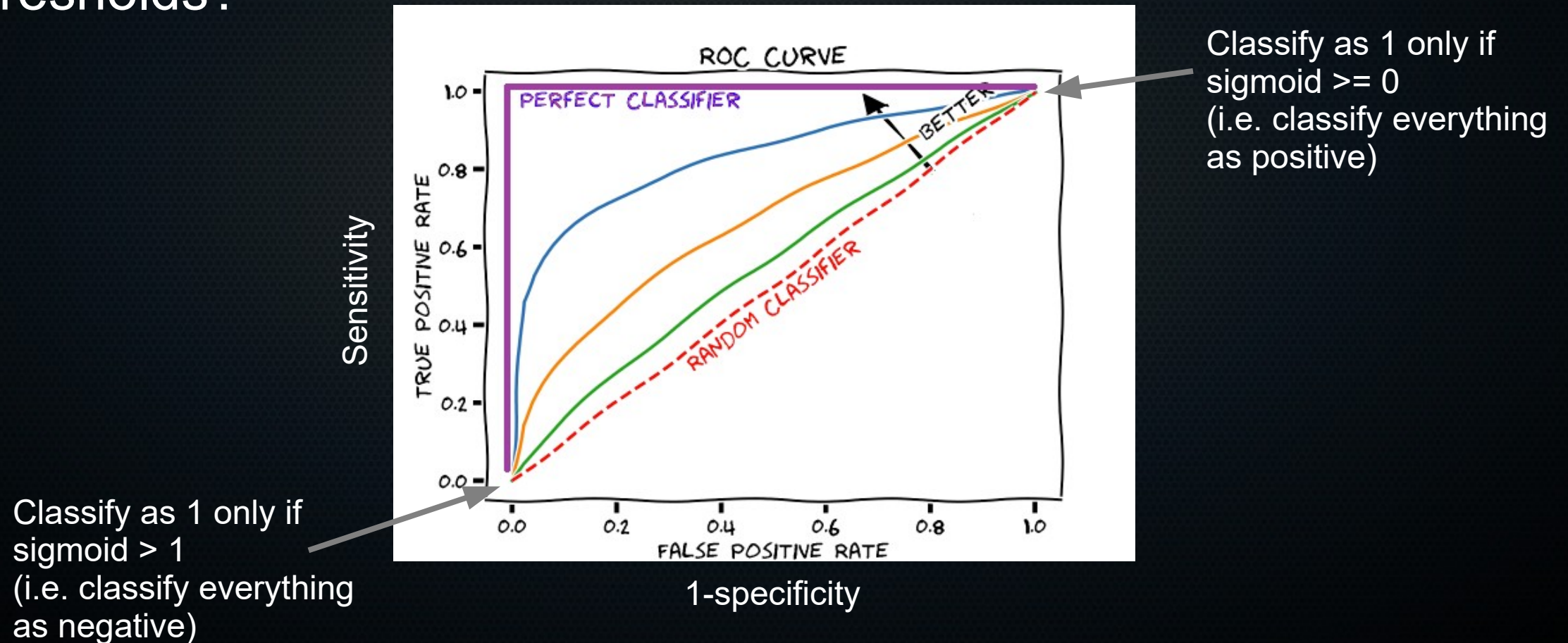
# ROC curve

- What if we see how our classifier performs for all possible thresholds?



# ROC curve

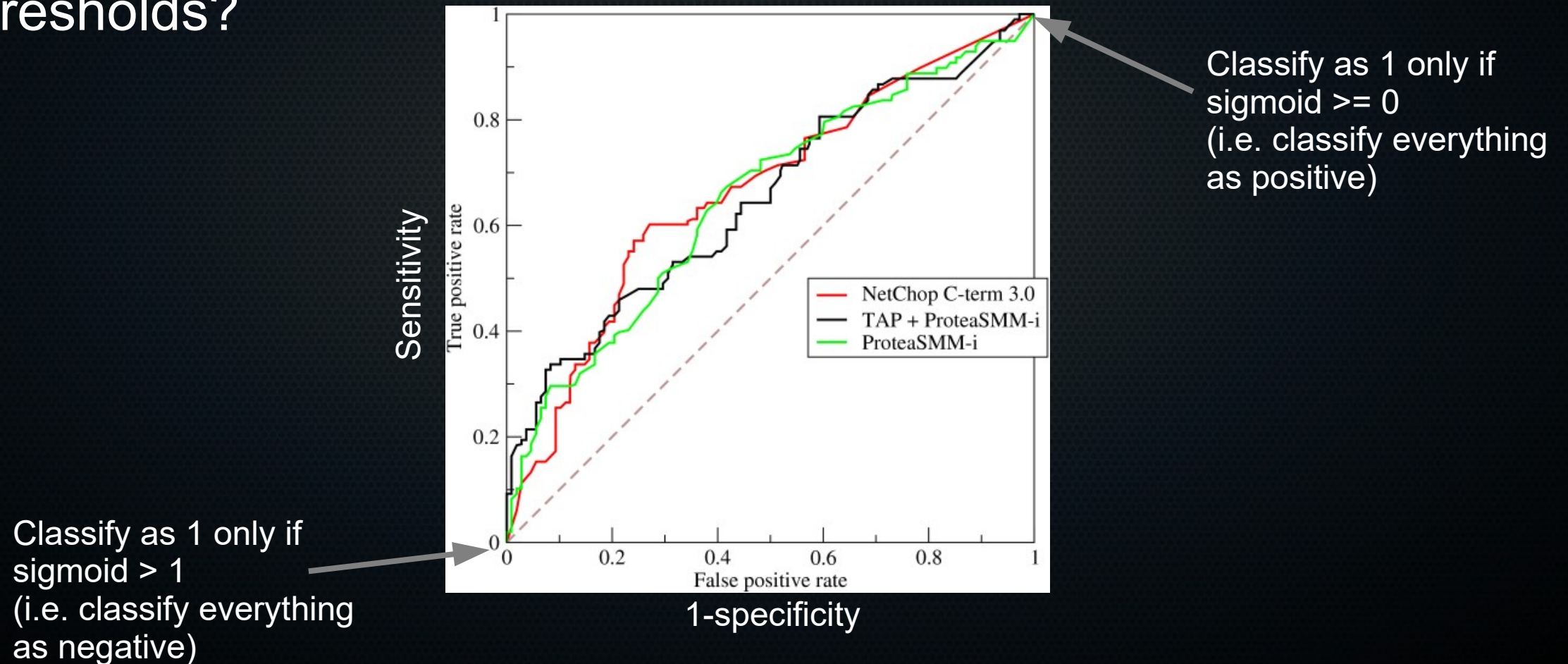
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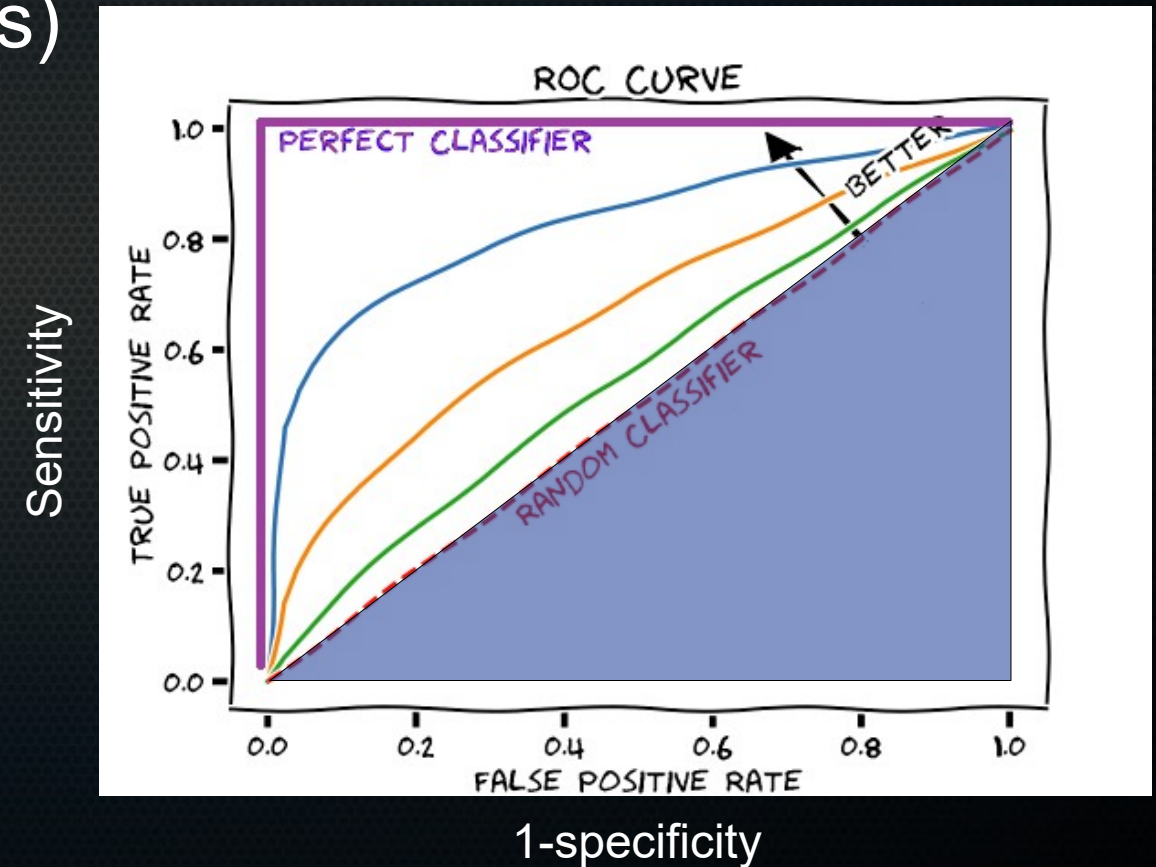
# ROC curve

- What if we see how our classifier performs for all possible thresholds?



# Area under the ROC curve (AUC)

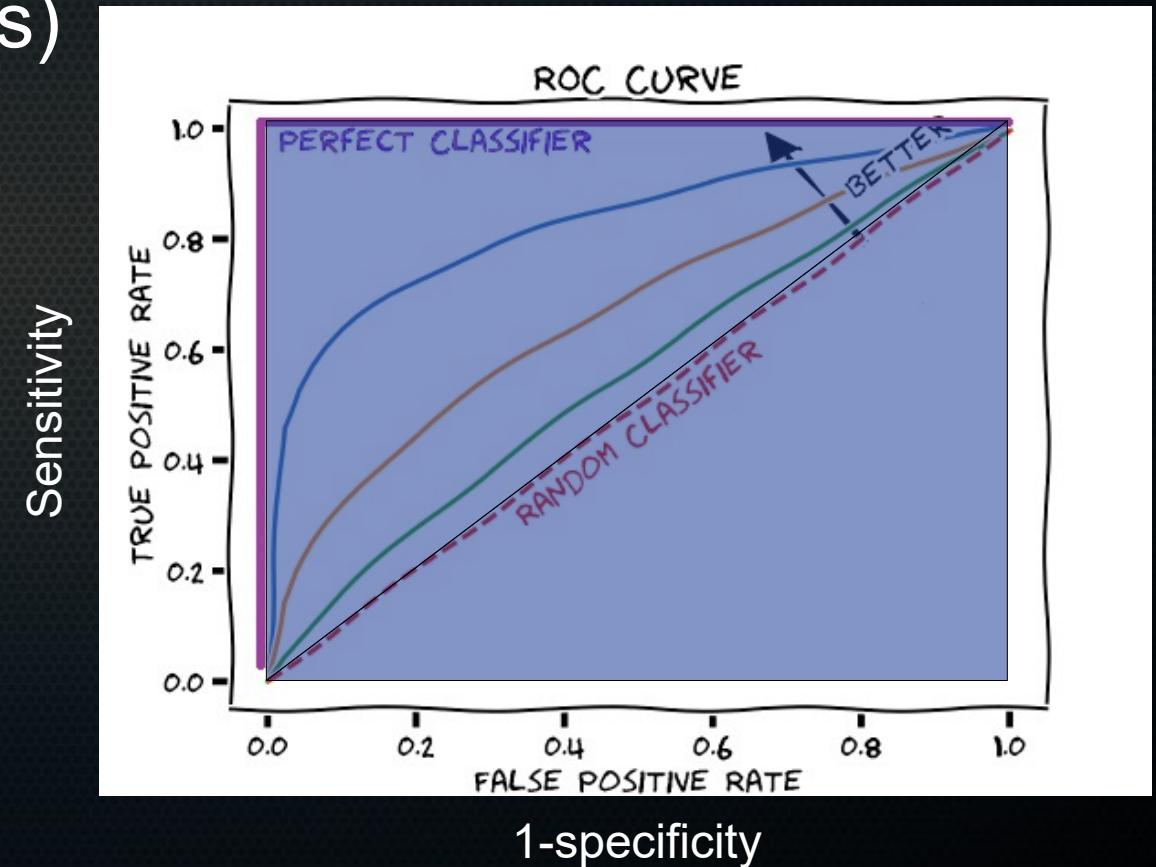
- How to compare classifiers numerically?
- Coin-flip classifier (random guess)  
AUC = 0.5





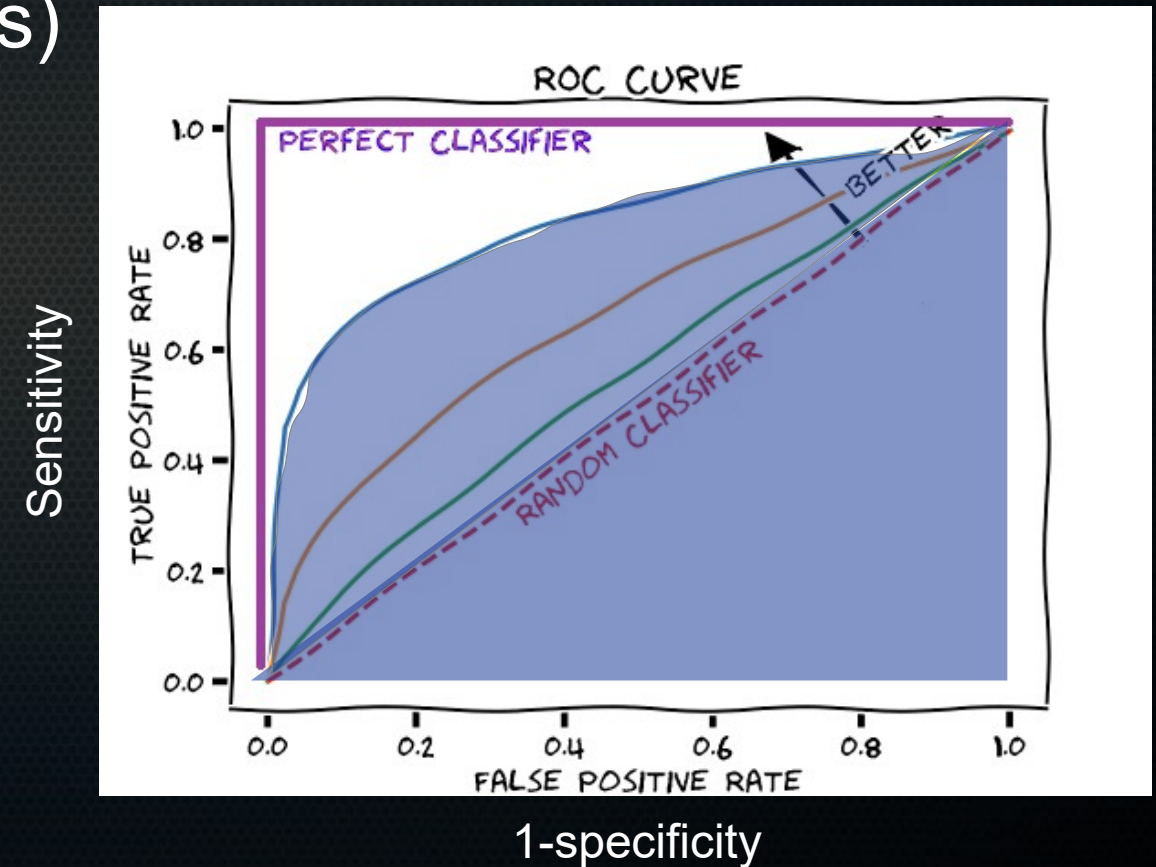
# Area under the ROC curve (AUC)

- How to compare classifiers numerically?
- Coin-flip classifier (random guess)  
AUC = 0.5
- Best possible classifier (positive cases all predicted 1)  
AUC = 1



# Area under the ROC curve (AUC)

- How to compare classifiers numerically?
- Coin-flip classifier (random guess)  
AUC = 0.5
- Best possible classifier (positive cases all predicted 1)  
AUC = 1
- In-between: ~0.8, for instance





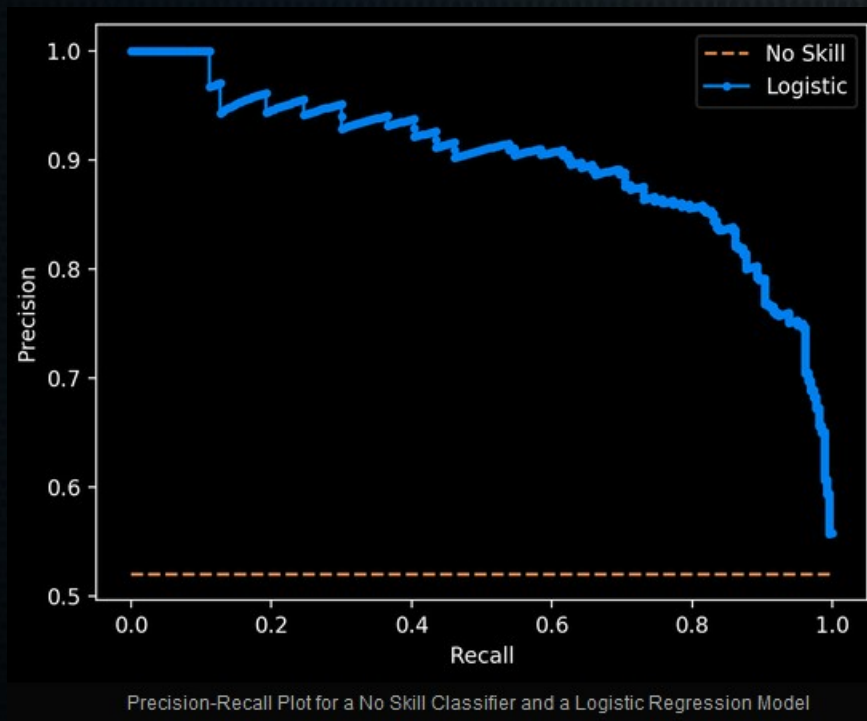
# Pitfall AUC (of ROC curve)

- All these values are determined by ratios
- If data is sampled from general population,  $N_{\text{negative}} \gg N_{\text{positive}}$  for a disease
- For specificity, because true negatives is a *huge number*, more false positives matter much less. Specificity becomes overly optimistic (especially if, later, you run your classifier in a clinical setting where  $N_{\text{negative}}$  is much smaller!)

		Reality	
		Cancer	Not Cancer
Model Prediction	Cancer	True Positive	False Positive
	Not Cancer	False Negative	True Negative
Sensitivity (true positive rate)		$\frac{\text{True Positives}}{\text{True Positives} + \text{False Negatives}}$	
Specificity (true negative rate)		$\frac{\text{True Negatives}}{\text{True Negatives} + \text{False Positives}}$	

# Pitfall AUC (of ROC curve)

- Instead, should then look at precision-recall curve.



Source: <https://machinelearningmastery.com/roc-curves-and-precision-recall-curves-for-classification-in-python/>

- Or make sure to train on balanced data!

		Reality	
		Cancer	Not Cancer
Model Prediction	Cancer	True Positive	False Positive
	Not Cancer	False Negative	True Negative

$$\text{Recall} = \text{Sensitivity (true positive rate)} = \frac{\text{True Positives}}{\text{True Positives} + \text{False Negatives}}$$

$$\text{Specificity (true negative rate)} = \frac{\text{True Negatives}}{\text{True Negatives} + \text{False Positives}}$$

$$\text{Precision} = \frac{\text{True Positives}}{(\text{True Positives} + \text{False Positives})}$$

Precision



# ADD REGULARISATION HERE

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# Summary

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- Multi-class classification: simply train  $n$  independent binary logistical regressors for your  $n$  classes, run them all on the data, pick for each sample the class with the highest probability over the regressors
- Performance metrics: Accuracy, sensitivity and specificity, ROC curve and ROC AUC (or PRC AUC for imbalanced data)
- Regularisation: add a cost to making parameters too large (i.e. fitting them too precisely to the data). Forces the model to only increase those parameters that really improve the fit (less fine-tuning exactly to the training data)!



# BREAK FOR PRACTICAL

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