

Hello

# Doron Man

✉ doronman@mac.com 🌐 doronman.com 📞 +61487237164

## Summary 📄

I'm a visual-effects supervisor with more than 20 years of experience in high-end post-production.

I had the opportunity to work on some blockbuster feature films, for some of the best production companies in the world.

I used to Nurture projects, engaging directors and agency creatives from initial concept right through to final delivery.

## Experience 🧰

Freelance - Flame Artist /  
VFX Supervisor  
2007 - Current

Gravity Int Toronto, Canada  
Jan. 2005 - May 2007  
Senior Flame Artis

Gravity Tel Aviv, Israel  
Jan. 1998 - Jan 2005  
Flame Artist

## Education 🎓

Institute of Data Jun-Sep 2020  
Data Science

Interaction Design Foundation Mar-2020  
UX Design

Sela College Tel Aviv, Israel 1995 – 1998  
Programming and UNIX environment

Camera Obscura Art School Tel Aviv,  
Israel 1992 – 1995

## Hobbies ❤️

Photography

Art / Film

Reading

Sport

technology

# Cervical Cancer Risk Factors in Low – Income Countries

# STRUCTURE

Background / Problems / Hypothesis

- 

Exploratory data analysis (EDA)

- 

Models

- 

Conclusion

- 

Pros/Cons

- 

Where Next

# Background

- Cervical cancer is the second most common cancer in women worldwide.
- The vast majority of deaths occur in women living in low- and middle-income countries.

WHY?

Cytology screening is the oldest and most widespread cancer screening technique and one of the most successful disease-prevention programmes.

# Problems Implementing Cytology tests In low-income countries

- Highly trained health care professionals.
- Efficient and high-quality infrastructure and laboratory services.
- Quality control of cytology reading.
- A means to rapidly transport smears to the laboratory
- Requires repeat testing and visits to identify women who need treatment.

Consequently, the implementation and execution of the whole process is too complex and expensive.



Visual inspection tests appear to be a satisfactory alternative screening approach to cytology.

# Problems Implementing Visual inspection tests

- Dependent on the skill of the healthcare provider.
- Lacks reliable quality assurance control.
- May result in over-referral.

Can Machine learning improve the  
process?

# Hypothesis

Visual inspection tests combined with Machine learning can provide:

- Reliable quality control tool for healthcare providers.
- Simple to learn.
- Raise the confidence level of the healthcare provider.
- Reduce the reliance on infrastructure.
- Reduce the numbers of over-referrals

The dataset was collected at 'Hospital Universitario de Caracas' in Caracas, Venezuela. The dataset comprises demographic information, habits, and historic medical records of 858 patients.

# The data features are:

Age in years

Number of sexual partners

First sexual intercourse (age in years)

Number of pregnancies

Smoking yes or no

Smoking (in years)

Hormonal contraceptives yes or no

Hormonal contraceptives (in years)

Intrauterine device yes or no (IUD)

Number of years with an intrauterine device (IUD)

Has patient ever had a sexually transmitted disease (STD) yes or no

Number of STD diagnoses

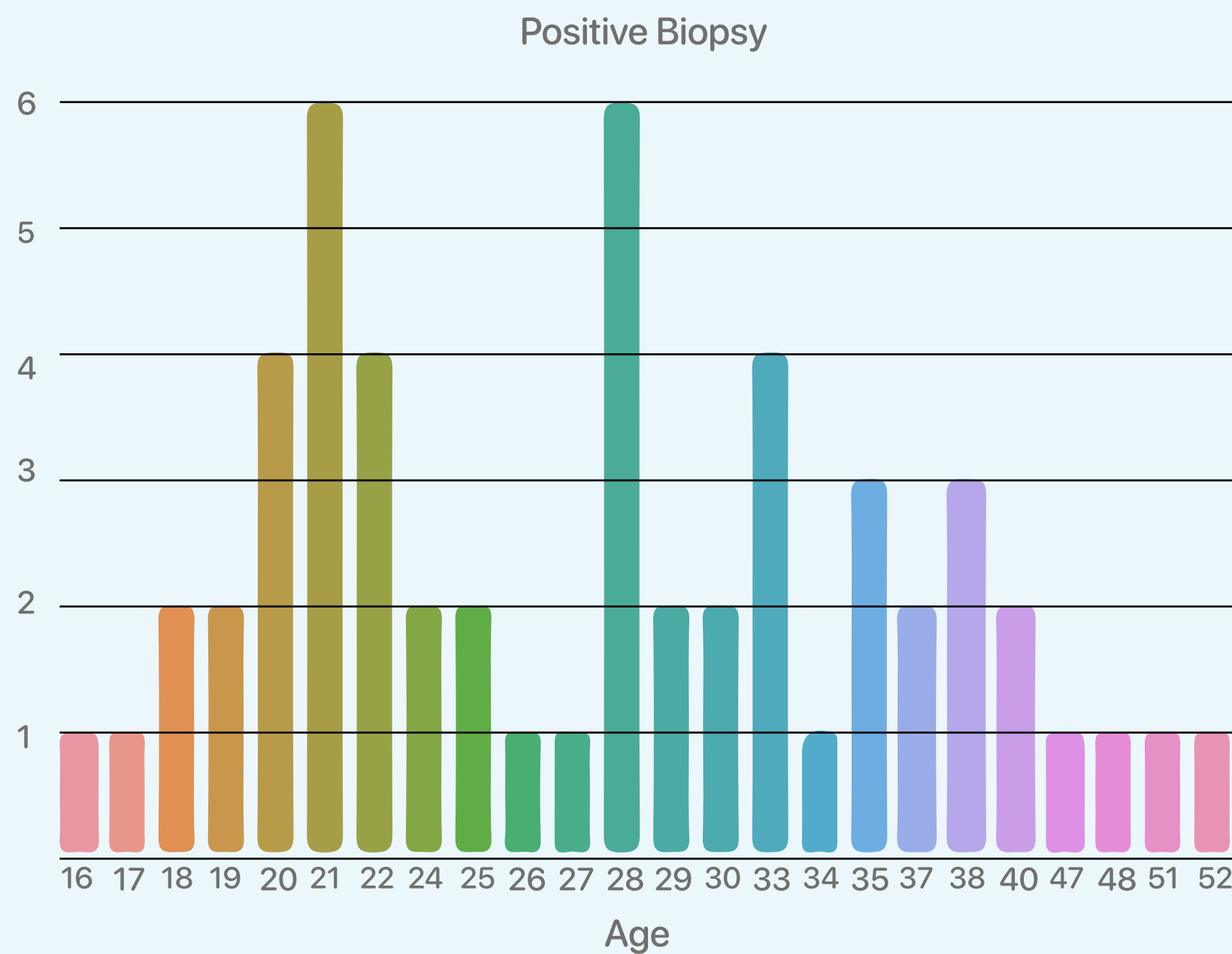
Schiller's test

Hinselmann test

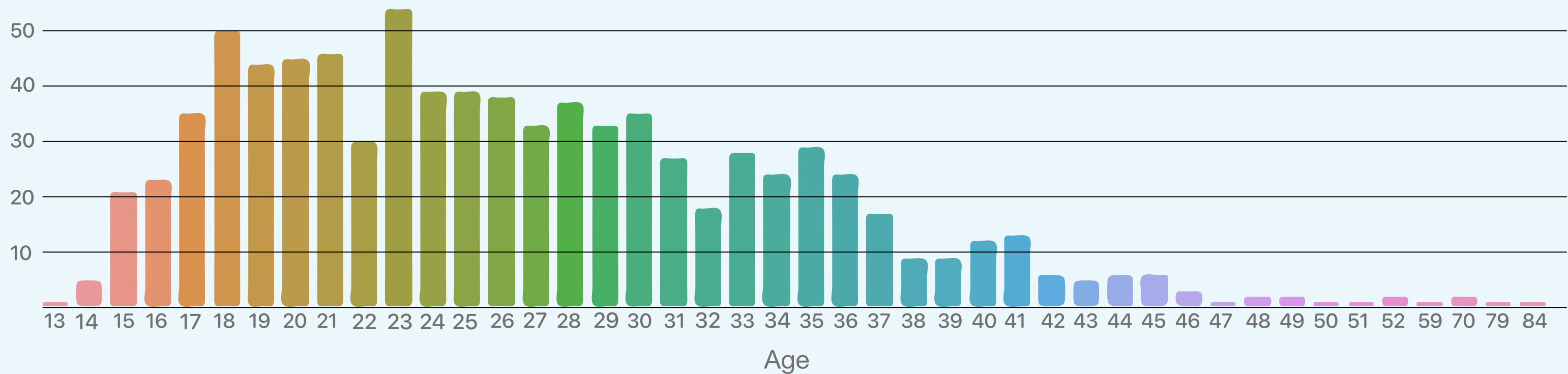
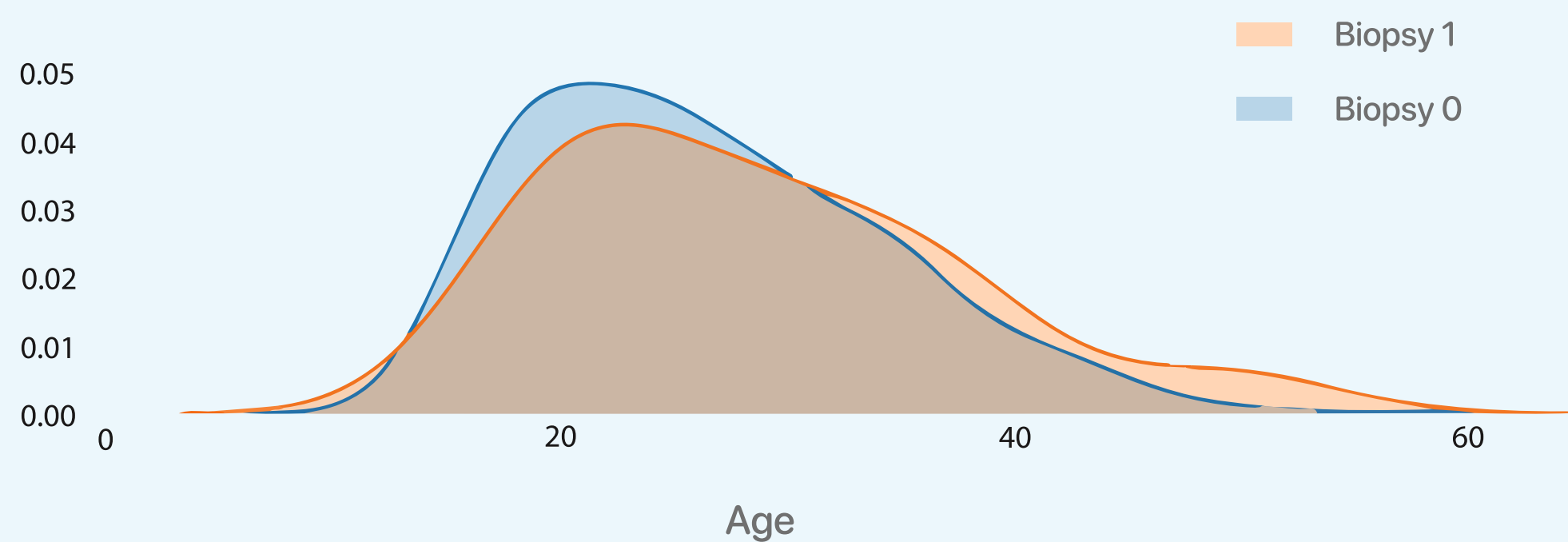
Cytology test

**Biopsy - Target**

# Women Age 20 -35 at HIGHEST RISK



Negative = 803  
Positive = 55



# Strongest Predictors

Target - Biopsy

0.73 Schiller	}	Tests
0.55 Hinselmann		
0.33 Cytology		
0.16 DX: Cancer		
0.16 DX:HPV		
0.16 DX		
0.13 STDs: genital herpes		
0.13 STDs: HIV		



# Strongest Predictors

Target - Biopsy

0.73 Schiller

visual examination using Lugol iodine

0.55 Hinselmann

visual examination using acetic acid

0.33 Cytology

colposcopy using Lugol iodine

Machine Learning is an application that provides computers the ability to learn from Data.

77% of the data used for training and 33% for testing the models.

# Iteration 1

## All Features

- Age
- Number of sexual partners
- First sexual intercourse
- Number of sexual partners
- Number of pregnancies
- Smoking
- First sexual intercourse
- Hormonal contraceptives
- Number of STD diagnoses
- Intrauterine device
- Schiller's
- Hinselmann
- Cytology



## Target / Classes

### Classifiers

- Logistic Regression Model
- Tree Base Models
- Support Vector Machines

- Biopsy =1
- Biopsy =0

# Iteration 1 - Results

The Winner : Tree Base Models

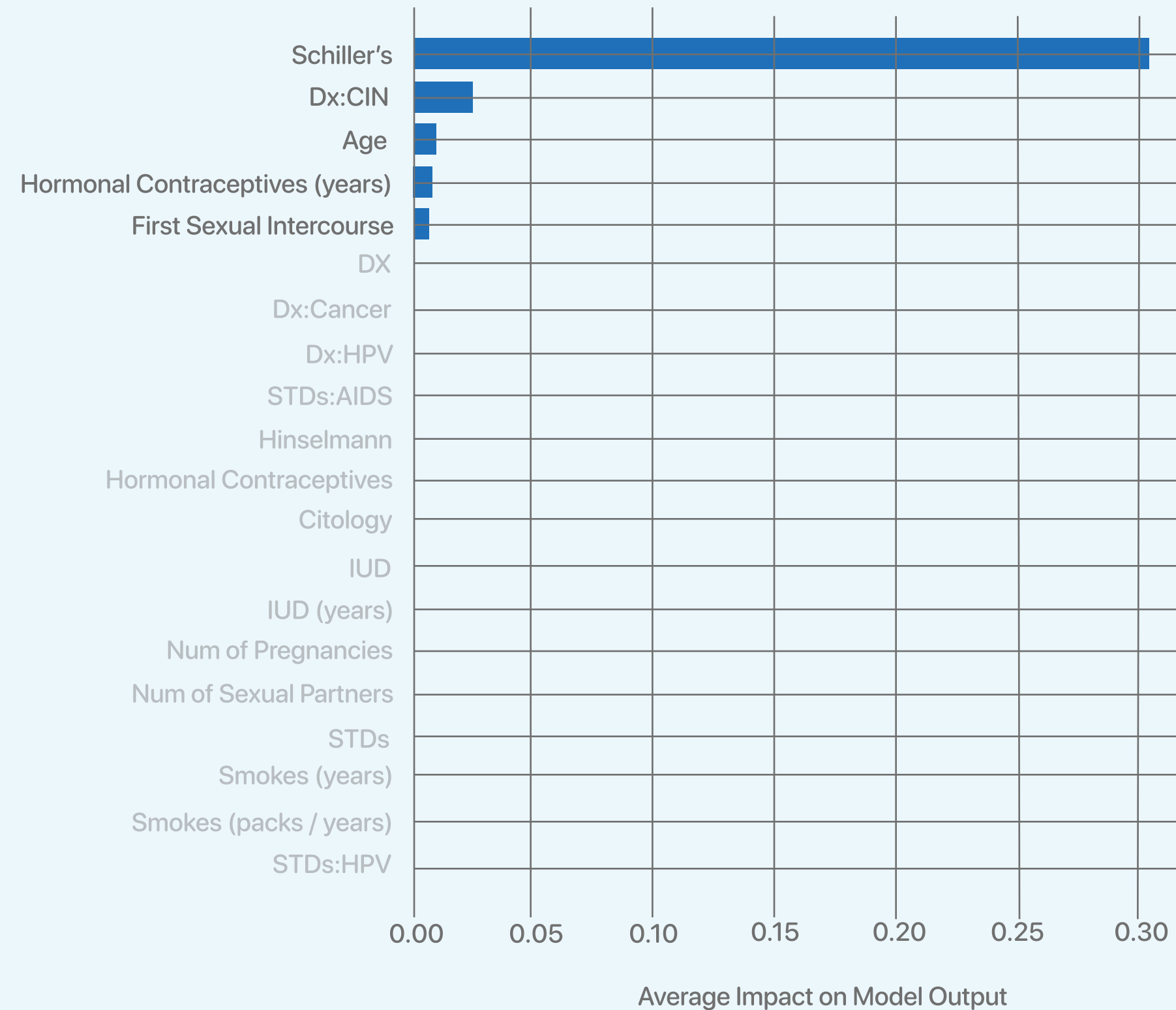
---

XGboost model was able to “find” **83%** of the women with cancer (recall),  
and **68%** of its predictions of cancer were correct (precision).

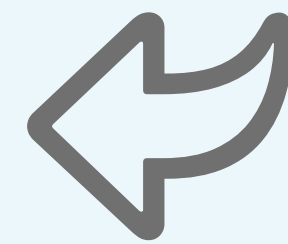
It incorrectly indicated **3** women with cancer, as with no cancer,  
and **7** women with no cancer, as with cancer.

# Features Contribution to Prediction

## Explaining XGBoost model



The goal of SHAP  
is to explain the prediction by computing the  
contribution of each feature to the prediction



# Iteration 2

Reduced Features

⚙️ ML

Target / Classes

## Classifiers

Schiller's  
Dx:CIN  
Age  
Hormonal Contraceptives (years)  
First Sexual Intercourse

Logistic Regression Model  
Tree Base Models  
Support Vector Machines

Biopsy =1  
Biopsy =0

# Iteration 2- Results

The Winner : Tree Base Models

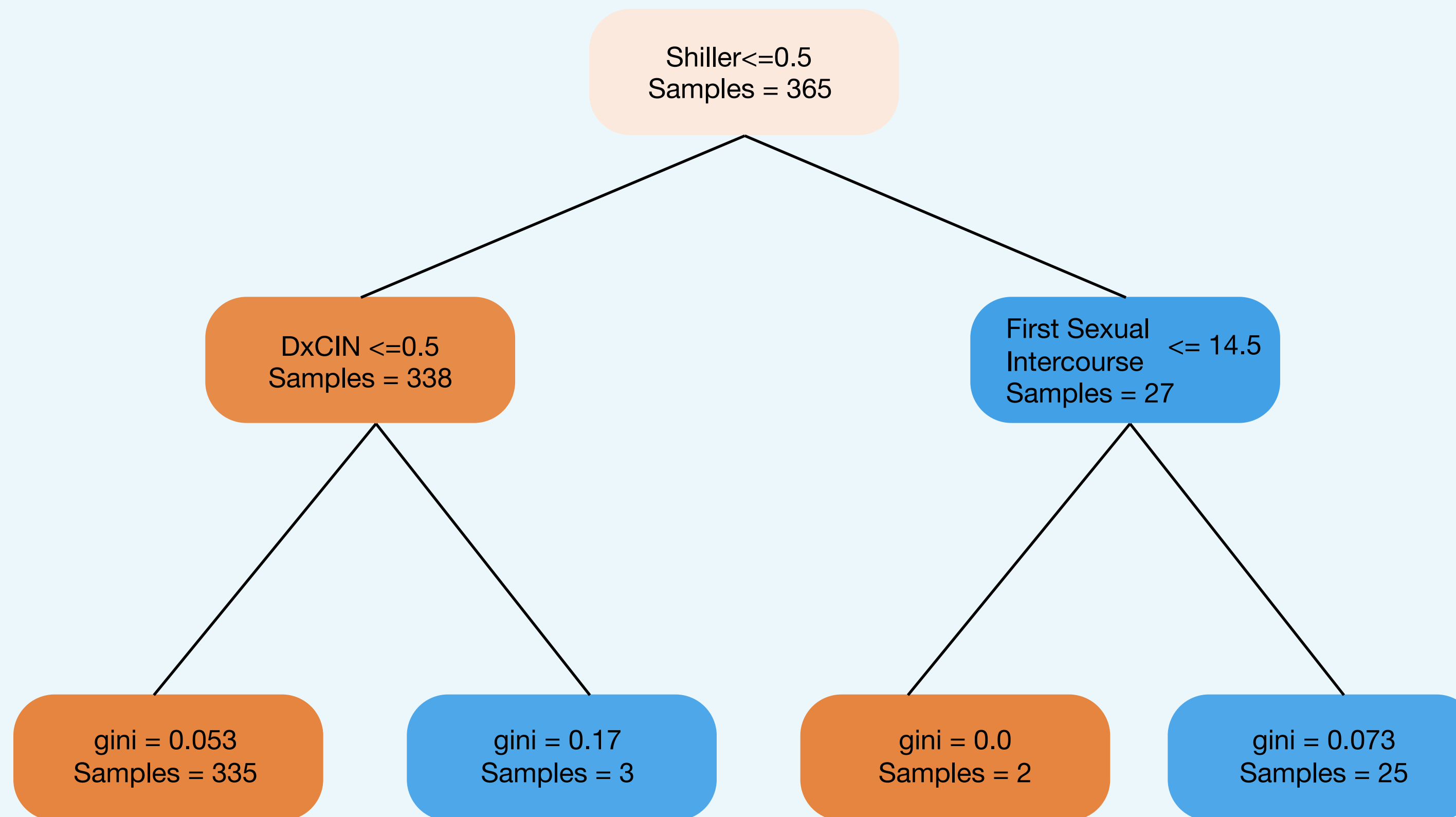
---

Random Forest model was able to “find” **89%** of the women with cancer (recall), which is **6%** improvement and **70%** of its predictions of cancer were correct (precision) **2%** improvement.

It incorrectly indicated **3** women with cancer, as with no cancer, and **7** women with no cancer, as with cancer.



# Best performing decision tree





# Iteration 3- Results

The Winner : MLPClassifier

---

The Artificial Neural Network model with reduced features was able to “find” **89%** of the women with cancer (recall) and **70%** of its predictions of cancer were correct (precision).

It incorrectly indicated **2** women with cancer, as with no cancer, and **7** women with no cancer, as with cancer.

# Summery

⚙️Classifiers	Accuracy	Precision	Recall	ROC_AUC	LOG_LOSS
Logisic Regression	0.95	0.68	0.61	0.79	0.13
SVC	0.95	0.63	0.77	0.90	0.25
XGboost	0.96	0.68	0.83	0.93	0.25
Random Forest	0.96	0.69	0.88	0.93	0.28
MLP Classifier	0.96	0.69	0.88	0.93	0.08

## Conclusion

---

The Artificial Neural Network model performed very well and can improve, complement and enhance the visual screening process.

## Pros of using Schiller's test and ML

---

- Reduce the reliance on infrastructure.
- Simple, easy-to-learn.
- Wide range of health care providers can perform the procedure.
- Serves as a valuable quality control tool.
- Reduce the number of over-referrals.

## Cons of using Schiller's test and ML

---

- False negative score.
- Less accurate when used in post-menopausal women.

## Where Next ?

- Reducing the number of false negatives .
- Increase accuracy.
- Develop deep-learning models, to classify cervical images, using affordable, low maintenance and easy to use imaging systems.

"Cancer does not have a face until it's  
yours or someone you know"

Anthony Del Monte



# Doron Man

✉ ——— doronman@mac.com

🌐 ——— doronman.com

📱 ——— +61 487 237 164