DESIGNING HEART DISEASE PREDICTION DASHBOARD

PORTFOLIO MACHINE LEARNING

- ERIKA BUDIARTI -





- Heart Disease Project -



An alarming number of patients are diagnosed with various cardiac symptoms. As data scientists, we aim to create a Machine Learning model to train our AI in classifying patients as either positive or negative for heart disease.



Problem Identification

Objective:

The goals to predict the likelihood of a patient being diagnosed with heart disease, a task involving a binary outcome:

Positive (+) = 1: Indicates that the patient has been diagnosed with heart disease.

Negative (-) = 0: Denotes that the patient has not been diagnosed with heart disease.

We will explore multiple Classification Models and determine which one yields the highest accuracy. Our analysis will involve scrutinizing patterns, analyzing trends, and identifying correlations present in the dataset. The ultimate objective is to pinpoint the crucial features contributing to the positive/negative diagnosis of heart disease.



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Data Understanding (1/2)

Data obtained from the "Heart Disease dataset" by UCIML. (https://archive.ics.uci.edu/dataset/45/heart+disease)
Let's look at the first 5 rows and the last 5 rows

	age	sex	ср	trestbps	chol	fbs	restecg	thalach	exang	oldpeak	slope	ca	thal	target
0	52	1	0	125	212	0	1	168	0	1.0	2	2	3	0
1	53	1	0	140	203	1	0	155	1	3.1	0	0	3	0
2	70	1	0	145	174	0	1	125	1	2.6	0	0	3	0
3	61	1	0	148	203	0	1	161	0	0.0	2	1	3	0
4	62	0	0	138	294	1	1	106	0	1.9	1	3	2	0

	age	sex	ср	trestbps	chol	fbs	restecg	thalach	exang	oldpeak	slope	ca	thal	target
1020	59	1	1	140	221	0	1	164	1	0.0	2	0	2	1
1021	60	1	0	125	258	0	0	141	1	2.8	1	1	3	0
1022	47	1	0	110	275	0	0	118	1	1.0	1	1	2	0
1023	50	0	0	110	254	0	0	159	0	0.0	2	0	2	1
1024	54	1	0	120	188	0	1	113	0	1.4	1	1	3	0

```
<class 'pandas.core.frame.DataFrame'>
RangeIndex: 1025 entries, 0 to 1024
Data columns (total 14 columns):
    Column
              Non-Null Count
                              Dtype
              -----
              1025 non-null
                              int64
    age
              1025 non-null
                              int64
    sex
                              int64
              1025 non-null
    Ср
              1025 non-null
                              int64
    trestbps
    chol
              1025 non-null
                              int64
    fbs
                              int64
              1025 non-null
                              int64
              1025 non-null
    restecq
                              int.64
    thalach
              1025 non-null
              1025 non-null
                              int64
    exang
                              float64
    oldpeak
              1025 non-null
                              int64
    slope
              1025 non-null
              1025 non-null
                              int64
    thal
            1025 non-null
                              int64
    target
              1025 non-null
                              int64
dtypes: float64(1), int64(13)
memory usage: 112.2 KB
```

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Data Understanding (2/2)

The target (Y) – "Positive or Negative diagnosis of Heart Disease" is determined by 13 features (X):

- 1. **age** (Continuous)
- 2. **sex** (*Binary*) : 1= Male, 0= Female
- 3. **cp** (chest pain) (*Ordinal* with 4 values) 1: typical angina 2: atypical angina 3: non-anginal pain 4: asymptomatic
- 4. **trestbps** (resting blood pressure) (*Continuous*)
- 5. **chol** (serum cholesterol) in mg/dl (*Continuous*)
- 6. **fbs** (fasting blood sugar > 120 mg/dl (Binary): 1 = true, 0 = false
- 7. **restecg** (resting electrocardiography results) (*Ordinal* with 3 values) 0: normal 1: ST-T wave abnormalities 2: left ventricular hypertrophy
- 8. **thalach** (maximum heart rate achieved) (*Continuous*)
- 9. **exang** (exercise induced angina (binary) (Binary) : 1 = yes; 0 = no
- 10. **oldpeak** (ST depression induced by exercise relative to rest) (*Continuous*)
- 11. **slope** (slope of the peak exercise ST segment (*Ordinal* with 3 values) 1: up sloping 2: flat 3: down sloping)
- 12. **ca** (number of major vessels) (*Ordinal* with 4 values) colored by fluoroscopy 0, 1, 2, 3
- 13. **thal** (result of thallium test) (*Ordinal* with 3 values) 1: normal 2: fixed defect 3: reversible defect

live

The Tools Used



Google Colaboratory Tools for data analysis, machine learning, deep learning that allows you to execute Python code.



Python An interpreted, object-oriented, high-level programming language.



Visual Studio Code Powerful source code editor runs on your desktop and on the web.



Anaconda An open-source distribution used for data science, machine learning, deep learning, etc.



array-processing library.Pandas is a powerful,



Pandas is a powerful, flexible and easy to use data analysis and manipulation tool library.

NumPy is a general-purpose



Matplotlib is a comprehensive library for creating static and interactive visualizations.



Seaborn is a library for data visualization and exploratory data analysis.



Scikit-Learn is an efficient library for predictive data analysis and machine learning.



Streamlit is a library to create and share beautiful, custom web apps for machine learning.

Data Quality (1/3)

Checking Categorical Data Information

```
for i in categorical col:
    print("Feature {} with {}".format(i, data[i].unique()))
    print()
```

Output:

```
Feature sex with ['Male' 'Female']
Feature cp with ['typical angina' 'atypical angina' 'non-anginal pain' 'asymtomatic']
Feature fbs with ['No' 'Yes']
Feature restecq with ['normal' 'probable or definite left ventricular hypertrophy'
'ST-T Wave abnormal']
Feature exang with ['No' 'Yes']
Feature slope with ['upsloping' 'downsloping' 'flat']
Feature ca with ['Number of major vessels: 2' 'Number of major vessels: 0'
'Number of major vessels: 1' 'Number of major vessels: 3' 4] 🥒
Feature thal with ['reversable defect' 'fixed defect' 'normal' 0]
Feature target with ['No disease' 'Disease']
```

Handling Variable:

- Feature 'ca' has 5 values ranging
- 7 from 0 to 4. therefore the value "4" is substituted with "NaN" (as it shouldn't exist) compare to the explanation on Data Understanding section
- Feature 'thal' has 4 values ranging from 0 to 3. therefore the value 0 is substituted with NaN (as it shouldn't exist) compare to the explanation on Data Understanding section

Data Quality (2/3)



Checking Missing Value

data.isna().sum()

Output:

age sex ср trestbps chol fbs restecg thalach exang oldpeak 0 slope ca thal target

dtype: int64

Result:

No Missing Value

Checking Duplicate Data

data.duplicated().sum()

Output:

723

Drop Duplicate Data

data.drop duplicates(keep="first", inplace=True)

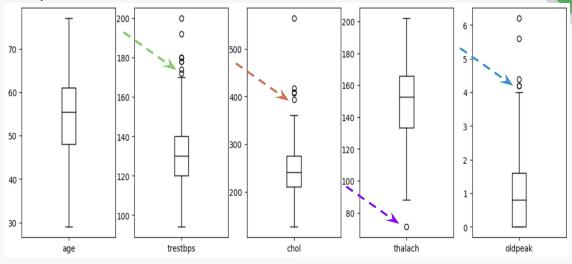


Data Quality (3/3)

Checking Outlier Using Box Plot

```
data.plot(kind = 'box',
          subplots = True,
          layout = (2,7),
          sharex = False,
          sharey = False,
          figsize = (20, 10),
          color = 'k')
plt.show()
```

Output:

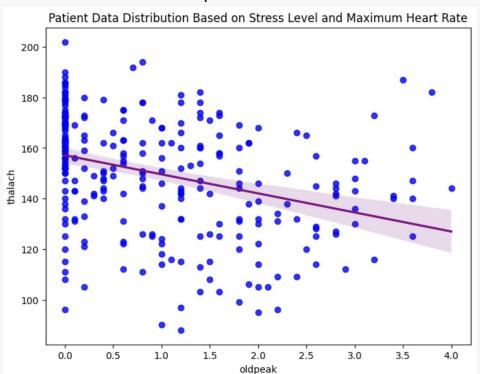


Data that has outliers can be replaced using:

- Maximum Value: Q3 + 1.5 IQR
- Minimum Value: Q1 1.5 IQR

Data Analysis (1/5)

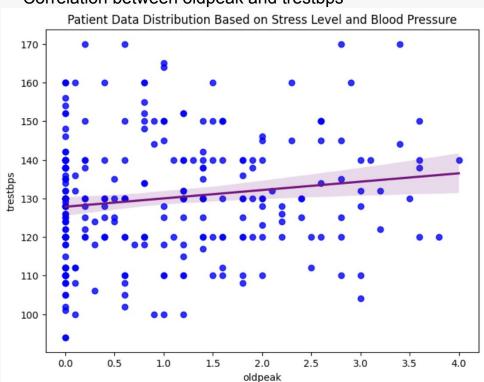
Correlation between oldpeak and thalach



From the scatter plot, we can find the Negative Correlation between patient stress level (oldpeak) and maximum heart rate (thalach). It means that as stress level increases, the maximum heart rate tends to decrease, and vice versa. This relationship can be explained by the physiological response of the body to stress. Stress, particularly psychological or emotional stress, triggers the release of stress hormones such as cortisol and adrenaline (epinephrine). These hormones prepare the body for a "fight or flight" response, which is an evolutionary adaptation to handle threats or challenges. However, chronic or prolonged stress can have negative effects on the body, including the cardiovascular system.

Data Analysis (2/5)

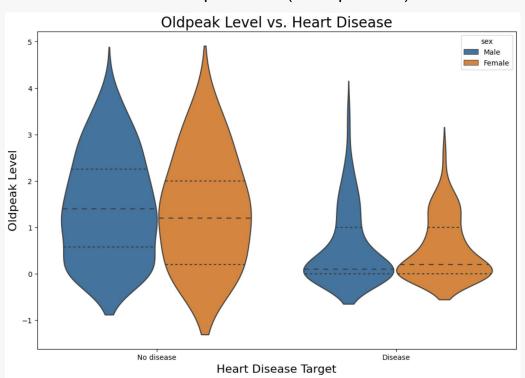
Correlation between oldpeak and trestbps



From the scatter plot, we can find the Positive Correlation between patient stress level (oldpeak) and blood pressure (trestbps). When a person experiences stress, whether it's due to emotional, psychological, or physical factors, their body undergoes a series of changes known as the "fight or flight" response. However, when this stress response is triggered frequently or for prolonged periods due to chronic stress, it can lead to consistent elevation of blood pressure. The increased heart rate and the narrowed blood vessels result in higher resistance against blood flow, which in turn leads to higher blood pressure levels.

Data Analysis (3/5)

Correlation between oldpeak level (ST depression) and heart disease

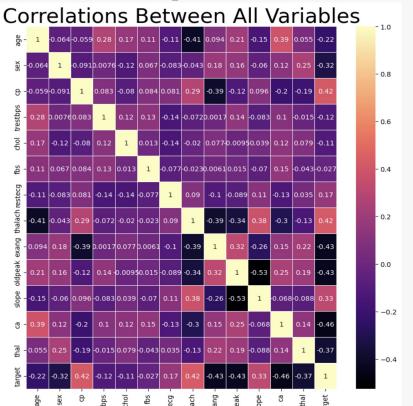


We can see that the overall shape & distribution for negative & positive patients differ vastly. Positive patients exhibit a lower median for ST depression level & thus a great distribution of their data is between 0 & 2, while negative patients are between 1 & 3. In addition, we don't see many differences between male & female target outcomes.

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Data Analysis (4/5)





Looking for the positive correlation and negative correlation

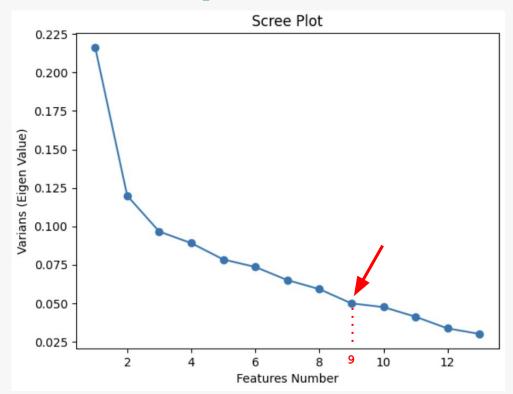
The strongest positive correlation is between heart rate (thalach) and target. This makes sense because elevated heart rates are often associated with increased sympathetic nervous system activity, chronic stress, hypertension, inflammation, arrhythmias, and metabolic imbalances. These factors contribute to the development

and progression of heart diseases.

The strongest negative correlation is between number of major blood vessel (ca) and target. This makes sense because as the number of major vessels with blockages increases, individuals tend to respond more aggressively to mitigate the risk of heart disease-related complications. This includes adopting healthier lifestyles, adhering to prescribed medications, etc.

Data Analysis (5/5)





Among the 13 features in this dataset, we have identified that 9 features show strong correlation, while 4 features show weak correlation. As the next step, we will proceed Data Modelling with 9 features.



Data Modelling (1/9)

Model 1: "Logistic Regression"

The Classific	ation Report	of Logis	tic Regress	sion Classifier
	precision	recall	f1-score	support
0	0.73	0.83	0.78	23
1	0.87	0.79	0.83	34
accuracy			0.81	57
macro avg	0.80	0.81	0.80	57
weighted avg	0.81	0.81	0.81	57



Data Modelling (2/9)

Model 2: "Random Forest"

The Class	sific	ation Report	of Rando	m Forest Cl	assifier
		precision	recall	f1-score	support
	0	0.82	0.78	0.80	23
	1	0.86	0.88	0.87	34
accui	racy			0.84	57
macro	avg	0.84	0.83	0.83	57
weighted	avg	0.84	0.84	0.84	57



Data Modelling (3/9)

Model 3: "Decision Tree"

The Classific	ation Report	of Decis	ion Tree Cl	assifier
	precision	recall	f1-score	support
0	0.75	0.65	0.70	23
1	0.78	0.85	0.82	34
accuracy			0.77	57
macro avg	0.77	0.75	0.76	57
weighted avg	0.77	0.77	0.77	57



Data Modelling (4/9)



Model 4: "K-Nearest Neighbors"

The Classific	ation Report	of K_Nea	rest Neighb	ors Classifier
	precision	recall	f1-score	support
0	0.77	0.74	0.76	23
1	0.83	0.85	0.84	34
accuracy			0.81	57
macro avg	0.80	0.80	0.80	57
weighted avg	0.81	0.81	0.81	57



Data Modelling (5/9)

Model 5: "Support Vector Machine"

The Classific	ation Report	of Support	Vector	Machine Classifier
	precision	recall f	1-score	support
0	0.76	0.83	0.79	23
1	0.88	0.82	0.85	34
accuracy			0.82	57
macro avg	0.82	0.82	0.82	57
weighted avg	0.83	0.82	0.83	57



Data Modelling (6/9)

Model 6: "Naives Bayes"

The Classifi	cation Report	of Naive	s Bayes Cla	assifier
	precision	recall	f1-score	support
0	0.70	0.83	0.76	23
1	0.87	0.76	0.81	34
accuracy			0.79	57
macro avg	0.79	0.80	0.79	57
weighted avg	0.80	0.79	0.79	57



Data Modelling (7/9)

Model 7: "XG Boost"

The Classific	ation Report	of XG Bo	ost Classif	ier
	precision	recall	f1-score	support
0	0.75	0.78	0.77	23
1	0.85	0.82	0.84	34
accuracy			0.81	57
macro avg	0.80	0.80	0.80	57
weighted avg	0.81	0.81	0.81	57



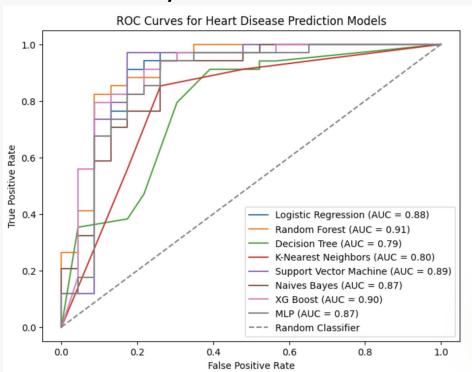
Data Modelling (8/9)

Model 8: "MLP Classifier"

The Classific	ation Report	of MLP C	lassifier	
	precision	recall	f1-score	support
0	0.70	0.83	0.76	23
1	0.87	0.76	0.81	34
accuracy			0.79	57
macro avg	0.79	0.80	0.79	57
weighted avg	0.80	0.79	0.79	57

Data Modelling (9/9)

AUC - ROC Analysis



AUC-ROC for Logistic Regression: 0.8849104859335037 AUC-ROC for Random Forest: 0.9143222506393862 AUC-ROC for Decision Tree: 0.7851662404092071 AUC-ROC for K-Nearest Neighbors: 0.8005115089514067 AUC-ROC for Support Vector Machine: 0.8938618925831202 AUC-ROC for Naives Bayes: 0.870843989769821 AUC-ROC for XGBoost: 0.9028132992327366 AUC-ROC for MLP: 0.8721227621483376

The best performance of this Machine Learning Model is "the Random Forest", indicated by the highest accuracy value in the classification report, which is 84%, and the largest AUC-ROC score compared to the other 7 models, which is 91%.







Interactive Dashboard

Deploy Machine Learning Model



Streamlit



Welcome to **ERIKA**'s Machine Learning Dashboard

This app predicts the Heart Disease.



man-heart-attack.ipg



woman-heart-attack.jpg

	ср	thalach	slope	oldpeak	exang	ca	thal	sex	age
0	2	80	1	1	1	1	1	0	30

Prediction:

Prediction of this app is Yes Heart Disease





Conclusion

- 1. Among the 13 distinct attributes that were under scrutiny, our analysis identified the leading 9 features that played a pivotal role in distinguishing between positive and negative diagnoses. These differentiating features encompassed chest pain type (referred to as 'cp'), maximum heart rate achieved during exercise (referred to as 'thalach'), count of major blood vessels (referred to as 'ca'), the extent of ST depression induced by exercise in comparison to the resting state (referred to as 'oldpeak'), slope of the peak exercise ST segment (referred to as 'slope'), exercise induced angina (referred to as 'exang'), the result of thallium test (referred to as 'thal'), sex and age.
- 2. Our machine learning algorithm has now reached a proficient stage where it can accurately categorize patients afflicted with Heart Disease. This breakthrough enables us to provide precise diagnoses and facilitate the delivery of timely intervention and care that is essential for patient recovery. The ability to identify these crucial indicators at an early stage holds the potential to avert the escalation of symptoms and the emergence of more severe conditions in the future.
- 3. In the realm of accuracy metrics, our implementation of the Random Forest algorithm showcased an impressive performance, achieving a notable accuracy rate of 84%. While a threshold of 70% accuracy is generally considered commendable, it's essential to exercise caution, as excessively high accuracy values could indicate a phenomenon known as overfitting, where the model becomes too tailored to the training data. Therefore, an accuracy range of 70% to 80% is regarded as the optimal balance that indicates reliable model performance.





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Kanky,