

# Heart Disease Risk Prediction: Logistic Regression vs. Random Forest

A Comparison of Logistic Regression & Random Forest

Dataset: Kaggle Heart Disease



# Problem Statement & ML Objective

Our primary objective is to accurately predict binary heart disease risk (0/1) in patients. This involves generating a probability score  $P(HeartDisease = 1 | \text{features})$  rather than a simple classification.

Why probabilities matter in medical decision-making:

- Quantifying uncertainty for clinicians.
- Facilitating stratified treatment plans.
- Enabling early intervention based on risk thresholds.



Evaluation Objective: Accuracy + Calibrated Risk + Interpretability

# Linear Regression: A Brief Overview

Linear Regression, while foundational, is primarily designed for continuous outcome prediction. Its core equation models a linear relationship between features and target:

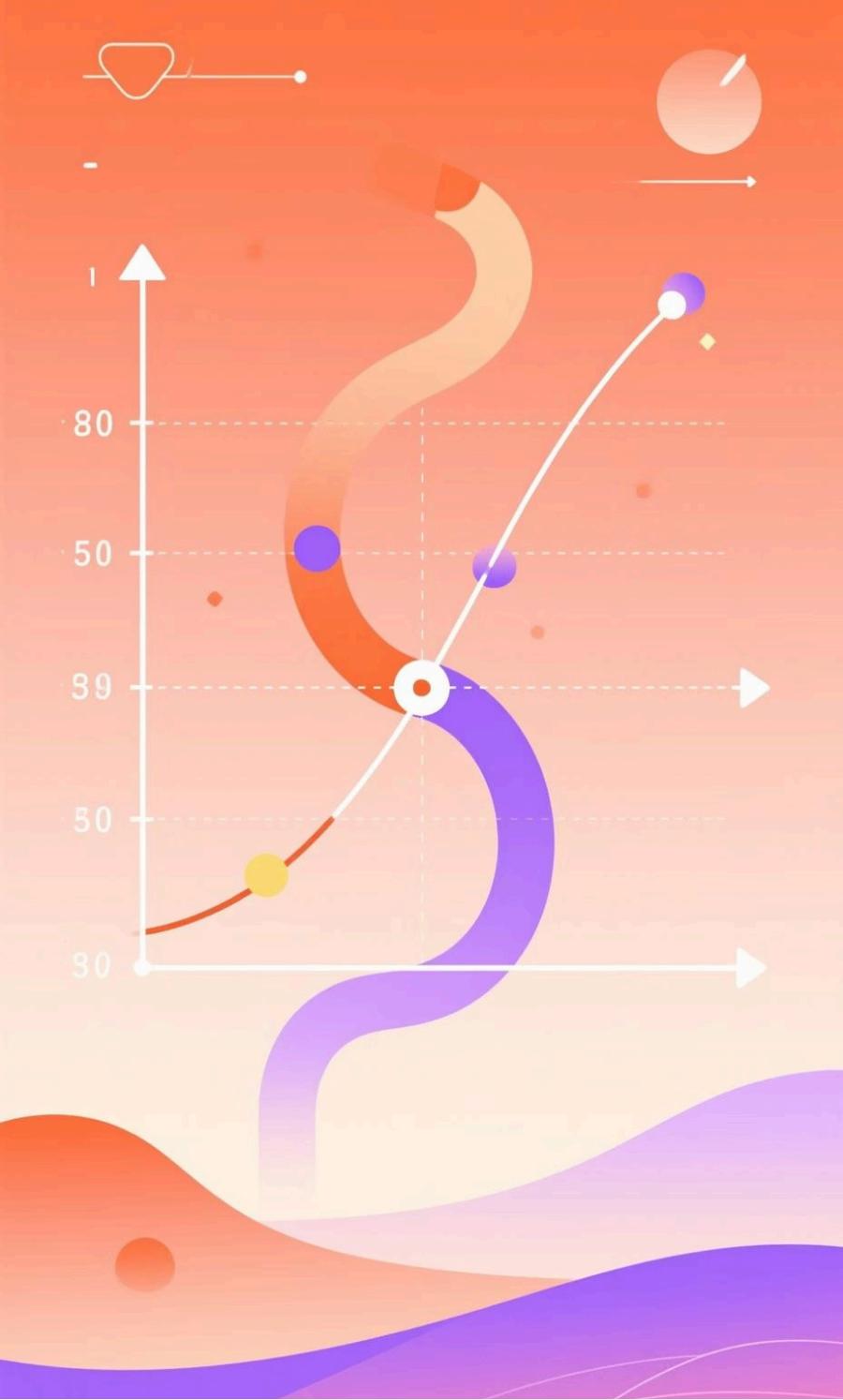
$$\hat{y} = \beta_0 + \beta_1 x_1 + \cdots + \beta_n x_n$$

The model minimises the Mean Squared Error (MSE) to find optimal coefficients:

$$MSE = \frac{1}{N} \sum_{i=1}^N (y_i - \hat{y}_i)^2$$



- ❑ **Why it fails for binary classification:** Linear regression outputs real values  $(-\infty, \infty)$ , which cannot be directly interpreted as probabilities  $[0, 1]$ . It also lacks a natural decision boundary for classification.



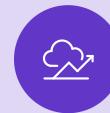
# Logistic Regression: Core Idea



## Sigmoid Transformation

The logistic function, or sigmoid, transforms linear outputs into probabilities [0, 1].

$$\sigma(z) = \frac{1}{1 + e^{-z}}$$



## Prediction Example

If  $z = \beta_0 + \beta_1x \dots \beta_nx$ , then  $P(Y = 1|X) = \sigma(z)$ .

For example,  $\sigma(0) = 0.5$ ,  $\sigma(3) \approx 0.95$ .



## Decision Boundary

A threshold (e.g., 0.5) on the probability defines the classification decision boundary, separating classes.

# Logistic Regression: Mathematics + Derivation

The logistic hypothesis maps any real-valued input to a probability:

$$h_{\theta}(x) = \sigma(\theta^T x) = \frac{1}{1 + e^{-\theta^T x}}$$

The logit transformation connects probability  $p$  to a linear model:

$$\text{logit}(p) = \log \left( \frac{p}{1 - p} \right) = \theta^T x$$

The Log-Likelihood function for  $N$  observations is maximised to find optimal  $\theta$ :

$$L(\theta) = \sum_{i=1}^N [y_i \log(h_{\theta}(x_i)) + (1 - y_i) \log(1 - h_{\theta}(x_i))]$$

Minimising the negative Log-Likelihood (Cross-Entropy Loss):

$$J(\theta) = -\frac{1}{N} \sum_{i=1}^N [y_i \log(h_{\theta}(x_i)) + (1 - y_i) \log(1 - h_{\theta}(x_i))]$$

Gradient Descent Update Rule for each parameter  $\theta_j$ :

$$\theta_j := \theta_j - \alpha \sum_{i=1}^N (h_{\theta}(x_i) - y_i) x_{i,j}$$

# Logistic Regression Metrics & Interpretation

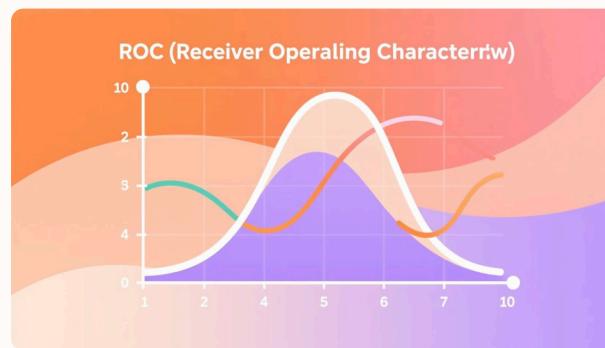
## Confusion Matrix

Evaluates model performance by summarising true positives, true negatives, false positives, and false negatives.



## Key Metrics

- Precision:**  $TP/(TP + FP)$
- Recall:**  $TP/(TP + FN)$
- F1-score:** Harmonic mean of precision & recall.
- AUC-ROC:** Probability that model ranks a random positive sample higher than a random negative sample.



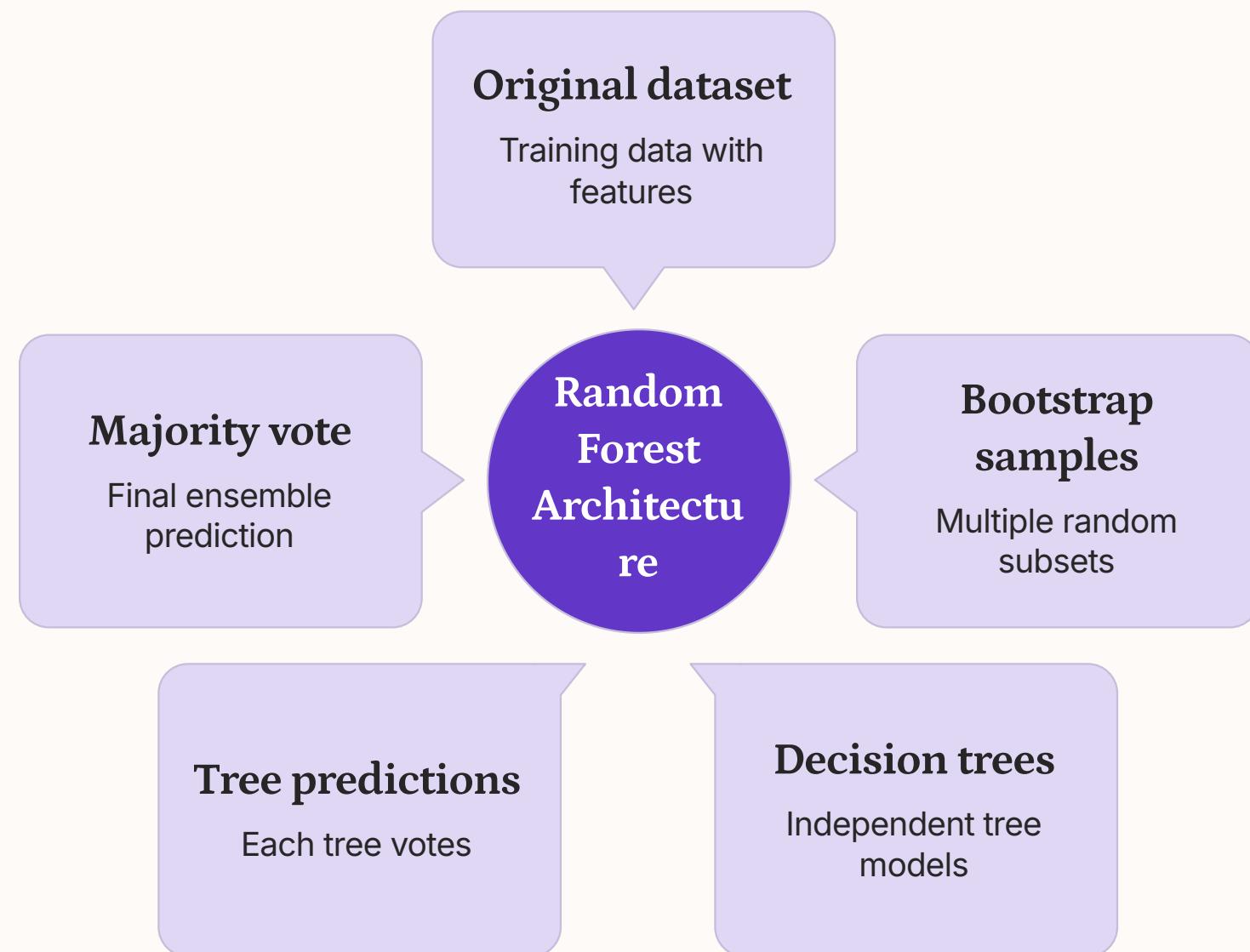
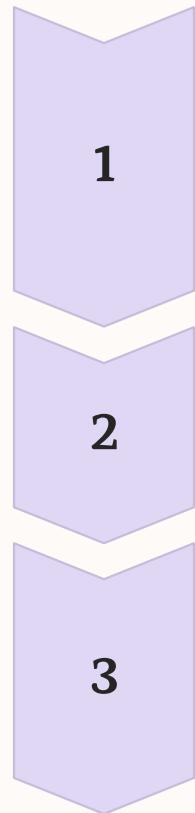
## Odds Ratio Interpretation

$e^{\beta_j}$  represents the change in odds of heart disease for a one-unit increase in  $x_j$ , holding other features constant. Crucial for clinical interpretability.

**Example:** An Odds Ratio of 1.5 for "Smoking" means smokers have 1.5 times the odds of heart disease compared to non-smokers.

# Random Forest: Concept & Architecture

Random Forest is an ensemble learning method that constructs a multitude of decision trees during training. For classification tasks, the output is the class selected by most trees (majority vote).



# Random Forest Mathematics

## Gini Impurity

Measures the probability of misclassifying a randomly chosen element in the dataset if it were randomly labeled according to the distribution of labels in the subset.

$$G = 1 - \sum_{k=1}^K p_k^2$$

## Entropy

Measures the disorder or uncertainty in a dataset. A split aims to maximise Information Gain (reduction in entropy).

$$H = - \sum_{k=1}^K p_k \log_2(p_k)$$

## Feature Selection

At each node,  $\sqrt{N_{\text{features}}}$  random features are considered for splitting to decorrelate trees.

Aggregated Prediction (for classification):

$$\hat{y} = \text{mode}(\text{Tree}_1(x), \dots, \text{Tree}_K(x))$$

Bias-Variance Tradeoff:

$$\text{Error} = \text{Bias}^2 + \text{Variance} + \text{Irreducible Error}$$

Out-of-Bag (OOB) Error: The error estimated by using samples not included in a tree's bootstrap. Provides an unbiased estimate of generalisation error.

# Random Forest Strengths for Heart Disease Prediction



## Non-linearity Handling

Effectively captures complex, non-linear relationships between medical features and heart disease risk, which linear models often miss.



## High Accuracy

Generally achieves higher predictive accuracy on complex medical datasets due to ensemble averaging, reducing overfitting compared to single decision trees.



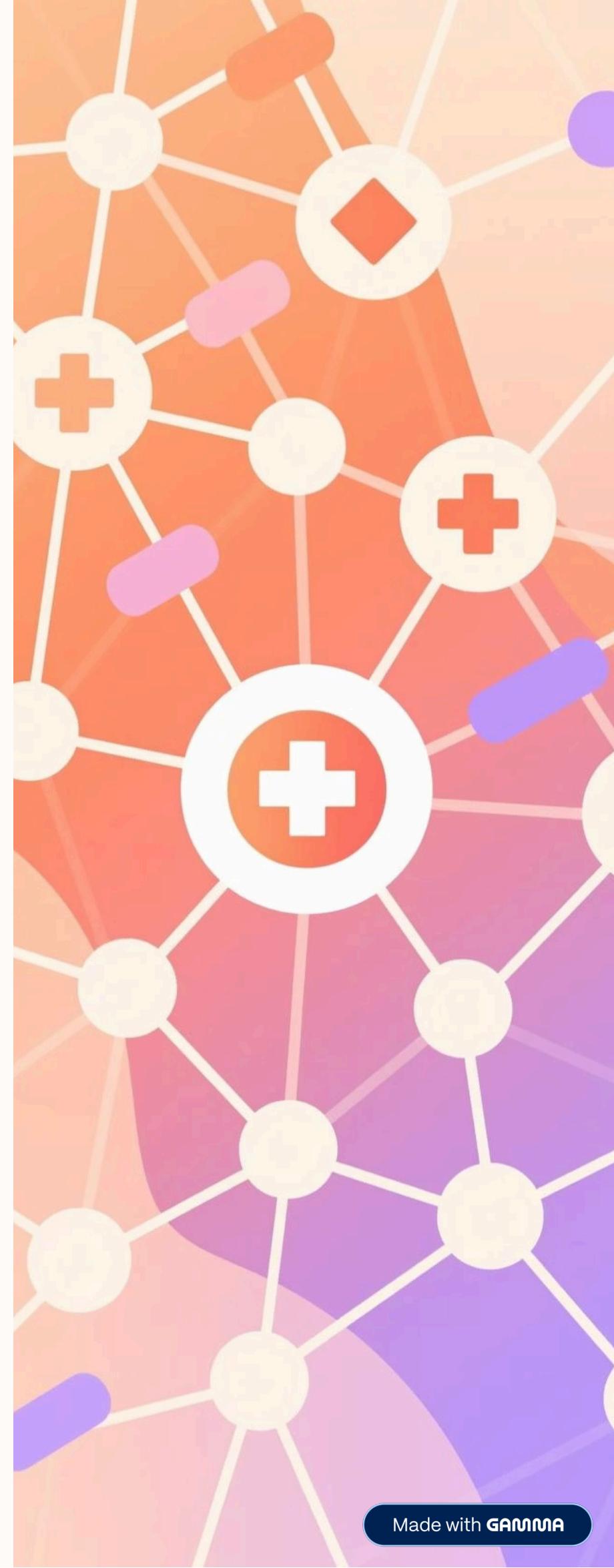
## Feature Importance

Provides quantifiable feature importance scores, highlighting which physiological parameters are most influential in heart disease prediction for clinical insights.



## Robustness

Resilient to noise and missing values, making it suitable for real-world clinical data that often contain imperfections.



# Final Model Choice: A Hybrid Approach

## Primary Model: Logistic Regression

- **Interpretable Coefficients:** Direct clinical interpretation of feature impact (odds ratios).
- **Probability Output:** Provides well-calibrated risk probabilities essential for patient counselling.
- **Suitable for Clinical Documentation:** Transparent and explainable, aligning with regulatory requirements and medical best practices.

## Secondary Model: Random Forest

- **Validates Predictions:** Acts as a robust second opinion, confirming or highlighting discrepancies in Logistic Regression's output.
- **Captures Nonlinearities:** Identifies complex interactions and patterns missed by the linear assumptions of Logistic Regression.
- **Higher Accuracy:** Utilised for scenarios demanding peak predictive performance and identifying subtle risk factors.

