

# Stroke Predictor

**Analysis and  
Classification of Strokes**

# Motivation and Stakeholders

- Stroke: medical emergency caused by a lack to oxygen to the brain, often due to a blocked or ruptured artery
- Strokes are a leading cause of disability and death worldwide
- Damage/death may already be done before a treatment can be administered

Thus,

- Large benefit if medical advisors were able to predict which patients were the most at-risk for having a stroke
- Allow them to make recommendations for preventative medicines and lifestyle choices

# Data Overview

Each row in this dataset corresponds to information regarding an individual patient. This included some medical and lifestyle information.

Only around 1 in 20 patients experienced a stroke.

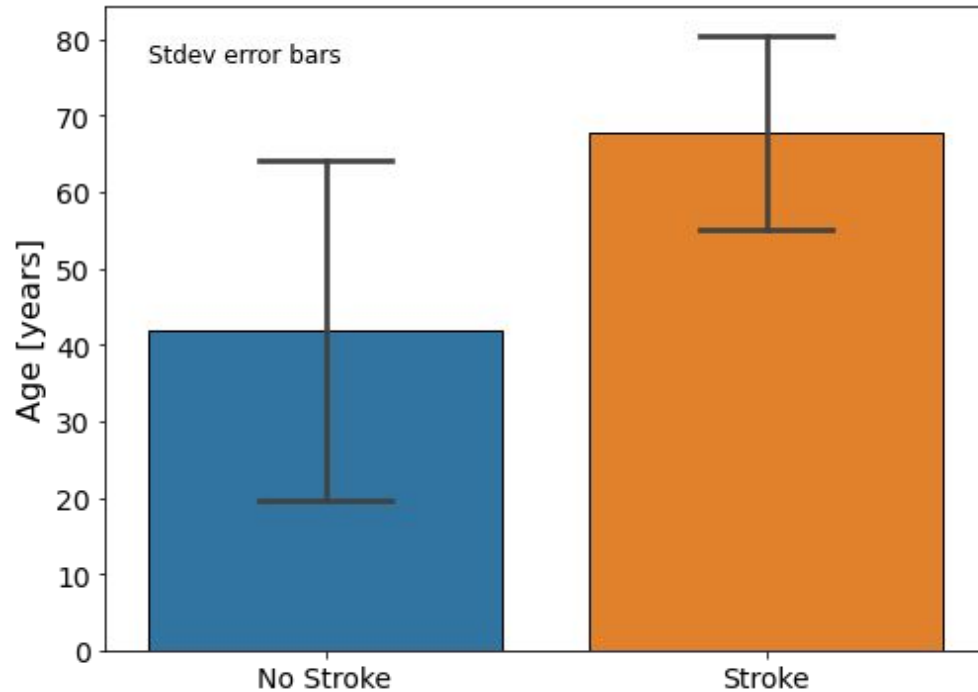
## Attribute Information

- 1) id: unique identifier
- 2) gender: "Male", "Female" or "Other"
- 3) age: age of the patient
- 4) hypertension: 0 if the patient doesn't have hypertension, 1 if the patient has hypertension
- 5) heart\_disease: 0 if the patient doesn't have any heart diseases, 1 if the patient has a heart disease
- 6) ever\_married: "No" or "Yes"
- 7) work\_type: "children", "Govt\_jov", "Never\_worked", "Private" or "Self-employed"
- 8) Residence\_type: "Rural" or "Urban"
- 9) avg\_glucose\_level: average glucose level in blood
- 10) bmi: body mass index
- 11) smoking\_status: "formerly smoked", "never smoked", "smokes" or "Unknown"
- 12) stroke: 1 if the patient had a stroke or 0 if not

\*Note: "Unknown" in smoking\_status means that the information is unavailable for this patient

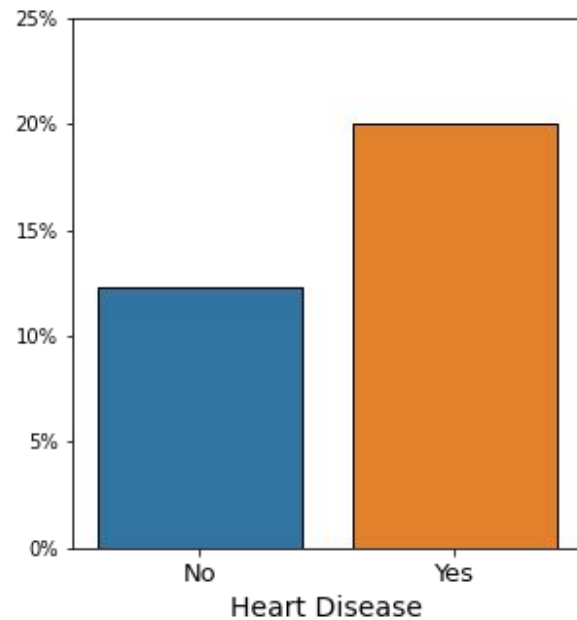
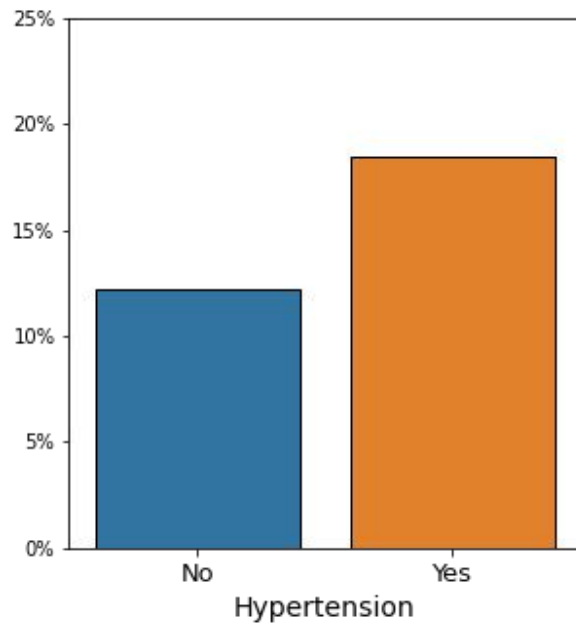
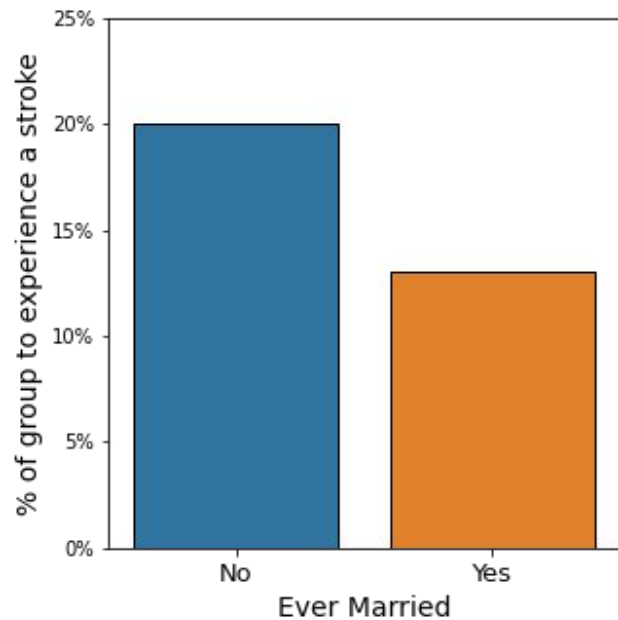
# Key Findings

**How does age correlate with having a stroke?**



# Key Findings

## 3 Influential Stroke Risk Factors for People over 60 years old



# Model Performance

## Model developer decision:

- False negative are likely more costly than false positives

## Caveat:

- Model was not able to train on many positive cases due to class imbalance

## Outcome:

- Model greatly over predicts that the patient will have a stroke (see precision)
- There are still some false negative predictions (see recall)

Metric	Value
Recall	0.81
Precision	0.13
Accuracy	0.74

0 is worst, 1 is best

# Recommendations

- Model predicts too many false negatives and false positives for it to be an extremely effective and high confidence tool
- Depending on the risks of the preventative medications and treatments, this model should not be used to prescribe
- That said, it could be used by a physician as an internal "at-risk" marking tool, allowing them to keep a closer eye on patients that may have a higher risk strokes
- This may led to more extensive screenings to the extremely at-risk group which could potentially save lives.