

Capstone: Improve heart prognosis for patients

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I. Overview

Princess Margret Hospital (in partnership with the UHN Echocardiography Lab) aims to save lives through early detection of heart murmur. With the heart murmur dataset provided by the Hospital, Researchers aim to detect early signs of heart murmur. In the hopes that this study would lead to better preparation and precaution for identified patients.

The objective of this project is to identify a pre-diagnosis of potential heart issues in potential patients. If Princess Margret can easily detect and diagnose these patients, it would result in increased awareness and prevention, and ultimately a reduced mortality rate for cardio-pulmonary patients.

Key Questions



Key Questions and Scorecard



1. What features are important in the model?



2. What is the criteria for selecting these features?



3. How to evaluate the model performance?

Scorecard					
Perspective	KPI	Measure	Threshold	Priority	
Model Performance	Overall model accuracy	Precision Recall	87%	Н	
Feature Importance	Permutation importance	Ranking	n/a	Н	

Data Analysis



Data Preparation







The following are known characteristics of the data:

- ✓ Categorical data
- ✓ 5011 patients
- √ 40 heart valve measurements (x1 to x40)
- √ 450 missing values
- √ 9 duplicate rows
- ✓ Class 0 No Heart Ailment
- ✓ Class 1 Heart Ailment (Congenital Defect or Heart Valve Defect)
- ✓ Represents approximately 10% of the current dataset



Data Preparation



Pre-process the data:

- 1. Identified and removed 450 missing values
- 2. Identified and removed 742 Outliers care of Turkey Method¹
- 3. Identified class imbalance and performed class balance care of Synthetic Minority Oversampling Technique (SMOTE)². From an original class ratio of 1:2 (Class 0 1438: Class 1 2820) to an improved class ratio of (Class 0 2256: Class 1 2256)



Data Preparation



Lastly, the following observations were evident in the dataset when the dataset was visualized:

- 1. Extreme fluctuations in correlations from features X1 to X20, feature from high to lows correlations. While all other features, namely X21 to X40, remain relatively low in terms of correlation.
- 2. The dataset is normally distributed. Although there seems to be a sharp spike in 0.40 and -0.5 measurements in the dataset.



Assumptions and Constraints



1. The data has been vetoed and cleaned



2. The data is based on valid individual patient data



3. The data is normally distributed



Constraints	Туре
1. The dataset cannot be increased	Hard
2. The dataset cannot have additional features	Hard
3. Limited knowledge of the dataset	Soft



Logistic Regression

Decision Tree

Random Forest

Logistic Regression is a linear model that is designed for binary variables. For this report, the logistic regression is the base model used to compare the other models, primarily due to its performance in the learning curve¹ and metrics. Logistic regression has

The Logistic Regression learning curve indicates a good bias-variance trade-off, see figure 1. In addition, Logistic regression assumes the following characteristics of the data:

- 1. Binary Heart murmur is binary (Class 0 and 1)
- 2. A linear relationship between the independent variables and the link function²
- 3. The dependent variable ("Class") is mutually exclusive and exhaustive

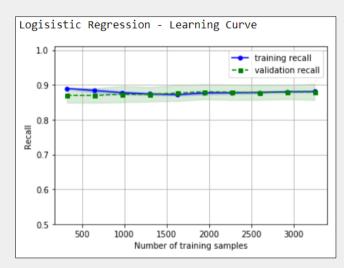


Figure 1



Logistic Regression Decision Tree Random Forest

To focus more on important features, Researchers have decided to utilize key features identified by the SelectFromModel¹ function, Figure 2 below shows the results of this function. *Moving forward, the results are solely based on the attributes indicated below for the 5512 patients.*

Figure 2



Logistic Regression

Decision Tree

Random Forest

A decision tree is a type of supervised learning algorithm that can be used for both regression and classification problems. It works for both categorical and continuous input and output variables.

Unlike the logistic regression this algorithm does not consider any assumptions about the data and requires minimal data pre-processing. Although one drawback of this algorithm is that it is prone to overfit. The result of the decision tree is in figure 1, we can identify that there is high variance in the model.

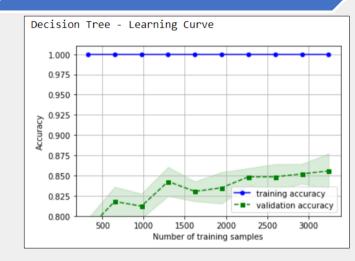


Figure 1



Logistic Regression

Decision Tree

Random Forest

The random forest algorithm is a type of ensemble model consisting of multiple decisions trees. The algorithm then derives an overall output that is more accurate. Many decision trees are trained, but each tree only receives a bootstrapped¹ sample of observations. The dataset is resampled with replacement repeatedly.

Like decision tree, the algorithm has overfitted the model (see figure 1).

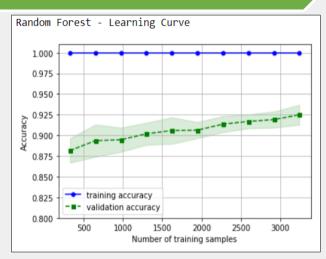


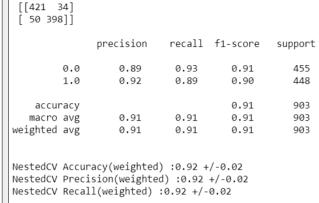
Figure 1



Model Comparison

[[436 16] [91 360]]						
	precision	recall	f1-score	support		
Outcome 0	0.83	0.96	0.89	452		
Outcome 1	0.96	0.80	0.87	451		
accuracy macro avg weighted avg	0.89 0.89	0.88 0.88	0.88 0.88 0.88	903 903 903		
NestedCV Accuracy(weighted) :0.88 +/-0.01 NestedCV Precision(weighted) :0.89 +/-0.01 NestedCV Recall(weighted) :0.88 +/-0.01						

[[401 5 [75 373	_					
		precision	recall	f1-score	support	
	0.0	0.84	0.88	0.86	455	
	1.0	0.87	0.83	0.85	448	
accur	racy			0.86	903	
macro	avg	0.86	0.86	0.86	903	
weighted	avg	0.86	0.86	0.86	903	
NestedCV Accuracy(weighted) :0.86 +/-0.03						
		0 0.84 0.88 0.86 455 0 0.87 0.83 0.85 448 y 0.86 903 g 0.86 0.86 0.86 903 g 0.86 0.86 0.86 903				



Logistic Regression

Decision Tree

Random Forest

From the 3 algorithms discussed, the random forest algorithm has the highest nested CV¹ precision and recall score at 0.92. Although discussed earlier, Random Forest is prone to overfit.



Model Comparison

Logistic Regre	Logistic Regression Decision Tree			Random Forest			
Permutation Importance			Permutation Importance		e	Permutation Importance	
Weight 0.0501 ± 0.0188	Feature x11						
0.0405 ± 0.0175	x10	v	/eight	Feature		Weight	Feature
0.0310 ± 0.0141 0.0292 + 0.0149	x9 x17	0.1132 ± 0		x11		0.1010 ± 0.0191	x11
0.0235 ± 0.0169	x6	0.0709 ± 0		x10		0.0558 ± 0.0143	x10
0.0193 ± 0.0116 0.0184 ± 0.0096	x15 x5	0.0611 ± 0		x9		0.0456 ± 0.0129	x12
0.0184 ± 0.0096 0.0173 ± 0.0140	x5 x12	0.0538 ± 0		x6		0.0332 ± 0.0074	x9
0.0146 ± 0.0118	x13	0.0383 ± 0	.0154	x12		0.0244 ± 0.0051	x17
0.0126 ± 0.0030 0.0124 ± 0.0069	x16 x4	0.0312 ± 0	0.0118	x17		0.0217 ± 0.0057	x16
0.0124 ± 0.0069 0.0100 ± 0.0061	x4 x18	0.0175 ± 0	.0051	x7		0.0166 ± 0.0056	x6
0.0042 ± 0.0033	x19	0.0168 ± 0	.0078	x15		0.0166 ± 0.0070	x15
0.0042 ± 0.0035 0.0031 ± 0.0065	x8 x32	0.0151 ± 0	.0080	x13		0.0166 ± 0.0142	x5
0.0031 ± 0.0065 0.0029 ± 0.0030	x26	0.0146 ± 0	.0098	x16		0.0157 ± 0.0068	x7
0.0029 ± 0.0033	x22	0.0137 ± 0	.0069	x5		0.0117 ± 0.0089	x13
0.0029 ± 0.0142	x7	0.0078 ± 0	.0054	x3		0.0095 ± 0.0095	x4
0.0029 ± 0.0023 0.0022 ± 0.0037	x3 x39	0.0073 ± 0	.0033	x18		0.0091 ± 0.0088	x18
20 more		0.0058 ± 0	.0055	x4		0.0033 ± 0.0046	x3

Based on the results of the permutation importance, heart measurement x11 and x10 have consistently ranked 1st and 2nd in among the three algorithms.

Comparative feature selection models



Key Findings

Random forest has the best results, but these results need to be proceeded with caution because of the current overfitted results from the learning curve. The Decision tree had the lowest results and prone to overfit. These first two models generalize the model, by not accounting training data. While Logistic regression had better precision and recall scores that wasn't prone to overfitting or underfitting.

Lastly, Features x11 and x10 have scaled the highest in feature importance for heart measurements.

Conclusion and Next Steps



Conclusion

In conclusion, an ensemble model like random forest performed the best amongst the three models. Although prone to overfitting, Analyst could investigate more in revising the hyperparameter tuning method of the algorithms and include more relevant training data. Features x11 and x10 have consistently been ranked as the most important feature for heart measurements. In other words, slight fluctuations in these heart measurements would be critical to a patient's heart diagnosis.

Cannot definitively conclude the criteria for feature importance, however, there is evidence that once attribute x11 and x10 are reshuffled – this significantly decreases the predicting power.



Next Steps

- 1. What are the x11 and x10 heart measurements?
- 2. Can the hospital recreate this model in a larger scale? Since the current dataset represents only 10% of the entire data.
- 3. Is it feasible for the hospital to execute this model? Do they have enough resources and skillset to implement this model?

Appendix



Appendix



Appendix A



Appendix B

Thank you!