

Alzheimer's Disease Prediction App

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Introduction

The aim of this project is to predict the likelihood of Alzheimer's Disease by taking a variety of different aspects into account. It is therefore a classification model that makes use of binary output. Using Python, a machine learning model was built that

allows the user to select one of three models to use in training and to evaluate the accuracy of the different methods.

Background

A progressive neurodegenerative disease, called Alzheimer's Disease, can result in devastating symptoms and standard of living. The outcomes can be reduced or even prevented when detected and diagnosed early on (Leifer, 2003). That is what this model aims to achieve by providing the user, preferably a doctor, to enter patient information into the web application, where the model will predict the diagnosis (Alzheimer's or not).

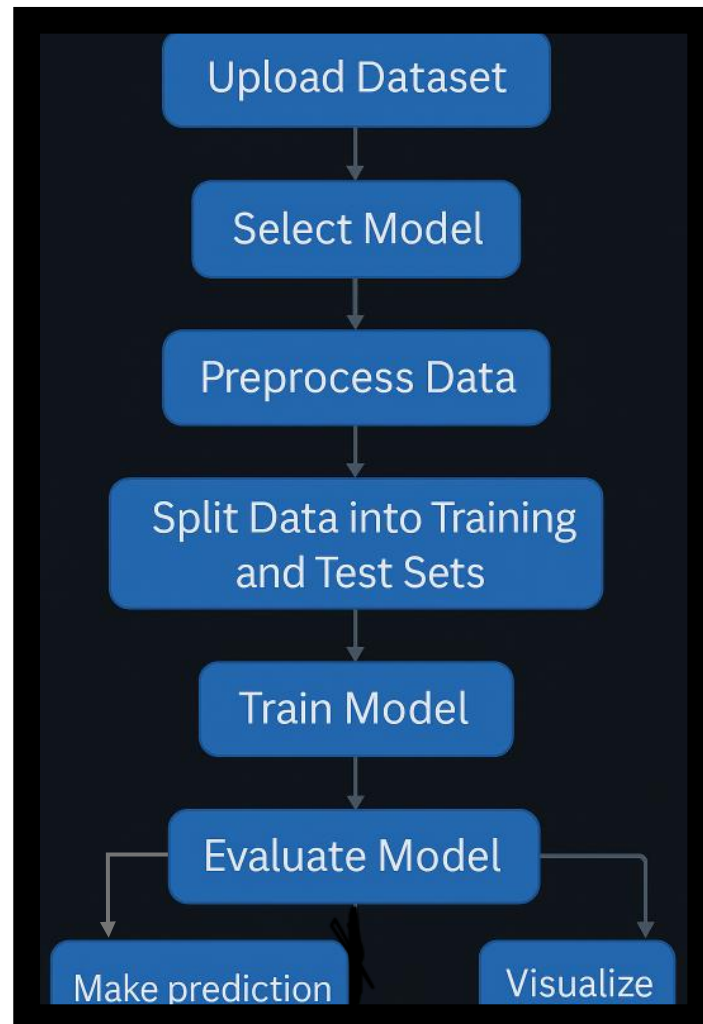
Materials and Methodology

Materials

The data used to train and test the model is all simulated and exported from [www.Kaggle.com](https://www.kaggle.com). The dataset contains 2149 patients' detailed medical and lifestyle information. Each patient has a diagnosis status, with the value 1 if they are likely to have Alzheimer's Disease, and 0 if not. The numerical and categorical variables consist of:

- Demographics: Age, Gender, Ethnicity and Education Level.
- Lifestyle Factors: BMI, Smoking, Alcohol consumption and Physical activity.
- Medical History: Diabetes, Hypertension, Depression and Head injury.
- Clinical Measurements: Systolic/Diastolic Blood pressure and Cholesterol levels.
- Cognitive Assessments: MMSE, Functional score and Memory complaints.
- Symptoms: Confusion, Disorientation, Forgetfulness, etc.
- Target Variable: Diagnosis (Binary Classification).

Method



The data was pre-processed before training, applying the following steps:

- Dropped non-feature columns, such as DoctorInCharge and PatientID, which is not required for predicting diagnosis.
- Diagnosis was used for the target variable, which results in 0 if Alzheimer's Disease is not likely and 1 if otherwise.
- All the numerical features in the dataset were standardized using StandardScaler to implement uniform scaling across all features.
- Using `train_test_split()`, the dataset was split into eighty percent for training and twenty percent for the purpose of testing.

The user can select the model that will be used to train the model. The accuracy of each model is displayed, to allow users to compare the different classifiers and ultimately choose the best-performing model.

- Random Forest Classifier is good with feature importance and was given the parameter: random_state=42.
- Logistic Regression is also an option if the user prefers a linear baseline model. It was provided with the parameters: max_iter=2000 and random_state=42.
- Support Vector Machine is a kernel-based classification that was given parameters: probability=True and random_state=42.

The trained models were trained using a standardized training set and the predictions were evaluated using the test data. The model was evaluated using the following metrics:

- Accuracy, which is the number of correct predictions overall.
- Precision, providing the proportion of true positives out of all the predicted positives.
- Recall, which is the proportion of actual positives that was predicted correctly.
- F1-Score, representing the mean of precision and recall.
- ROC Curve, providing the user with a visual performance across the thresholds.
- AUC Score, which is the area under the ROC curve. The higher this score, the better the discrimination ability.

To develop this model, Python 3.11 was used, along with streamlit for building the interactive web dashboard. Libraries, such as pandas and numpy, was implemented for data manipulation, scikit-learn for model training, evaluation and preprocessing and seaborn and matplotlib for data and evaluation visualization.

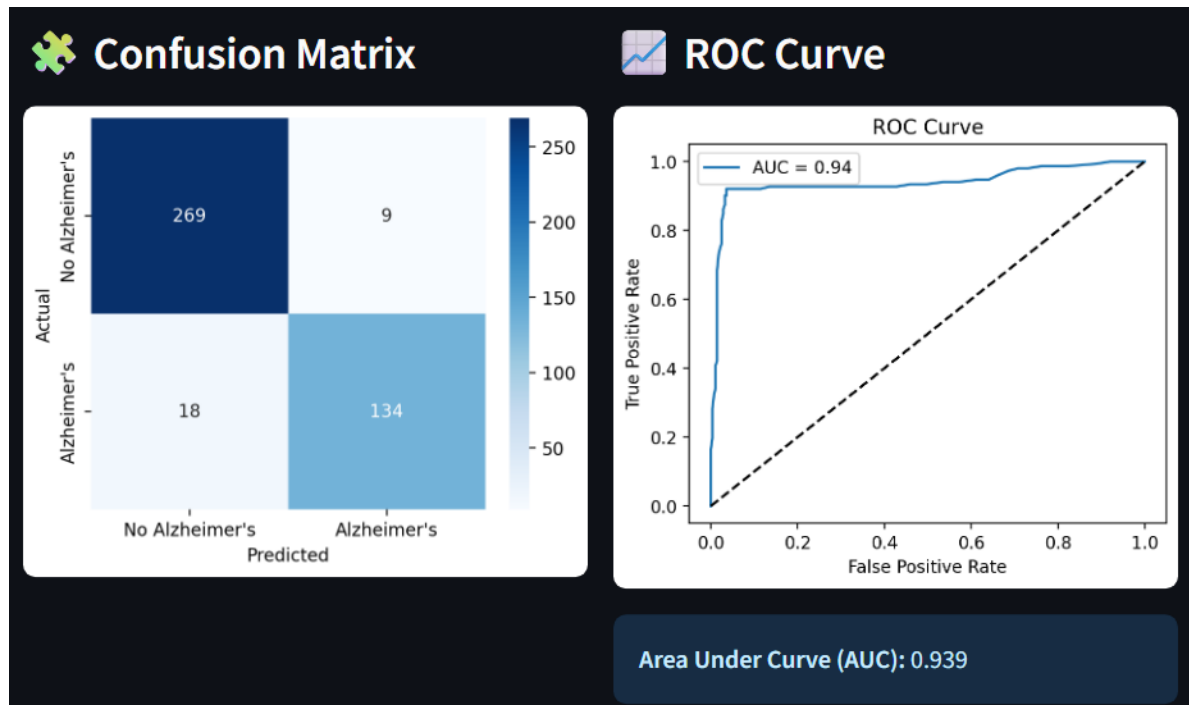
Results and Evaluation

Random Forest Classifier Model

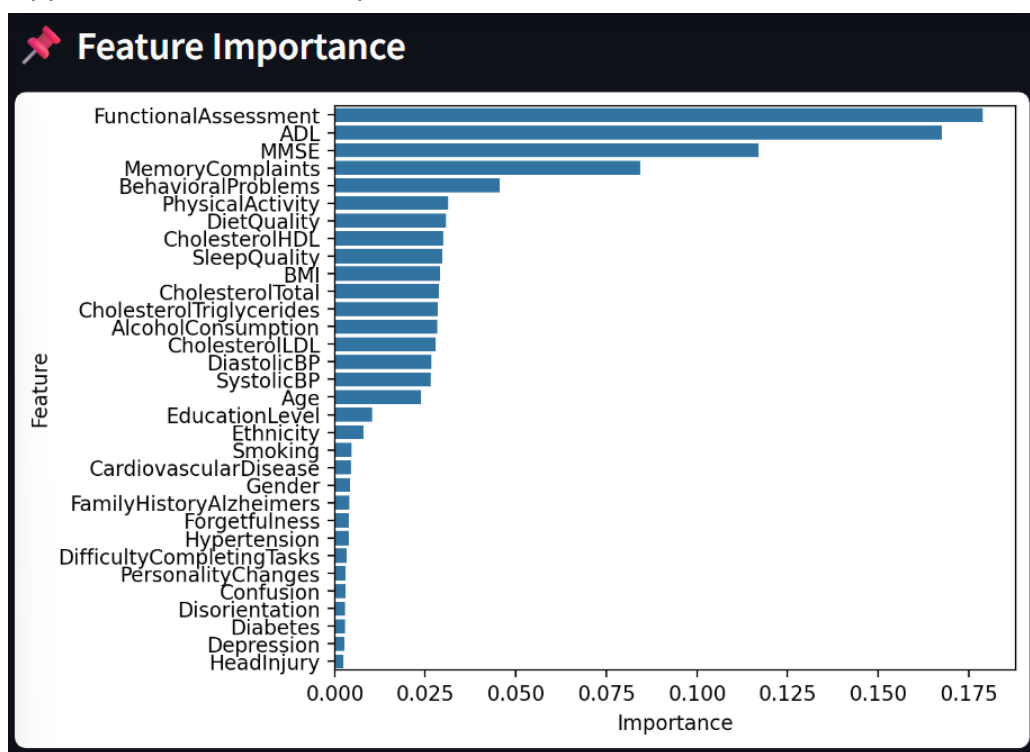
For the Random Forest Classifier, the model performance table is as follows:

⚙️ Select a Machine-Learning Model				
Choose classifier				
Random Forest				
✅ Model trained – accuracy 93.72%				
📄 Classification Report (Precision • Recall • F1-Score)				
	precision	recall	f1-score	
0		0.937	0.968	0.952
1		0.937	0.882	0.908
accuracy		0.937	0.937	0.937
macro avg		0.937	0.925	0.93
weighted avg		0.937	0.937	0.937
Overall Accuracy		F1 (AD)	Recall (AD)	
0.937		0.908	0.882	

As displayed, the model has an accuracy of 93.72%. Its F1 value is 0.908 and has a Recall value of 0.882. According to the confusion matrix, when the actual diagnosis was 'No Alzheimer's' it predicted 269 of the diagnosis correctly and when the actual diagnosis was 'Alzheimer's', it predicted 134 correctly. This means it is not only accurate, but also sensitive to Alzheimer's detection. According to the ROC curve this model has a very strong performance level as the blue line (AUC) is sharp. An AUC of 94% indicates that there is a 94% chance that the model will correctly classify a randomly chosen patient.

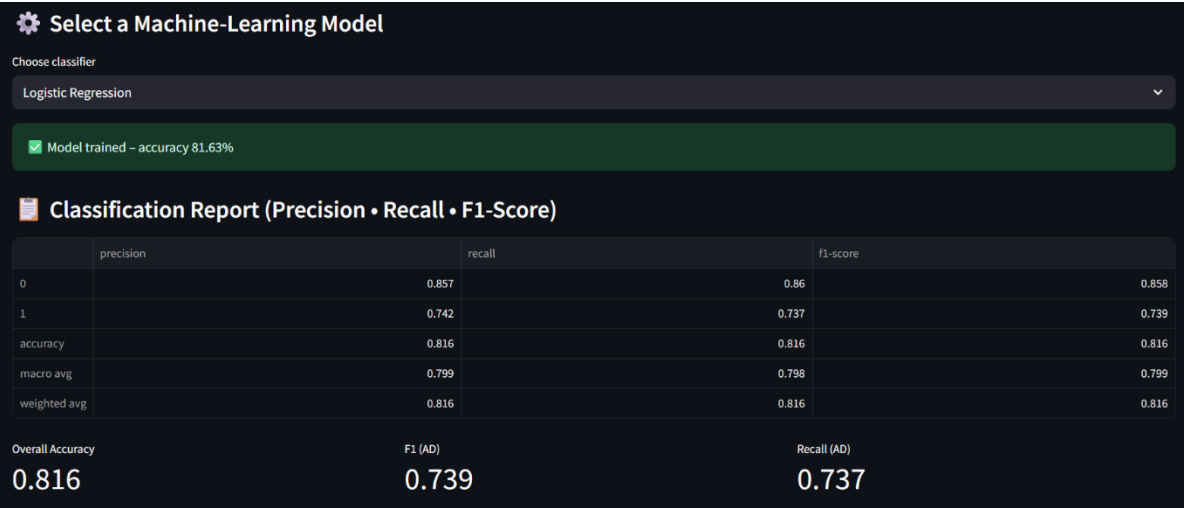


The importance of all the different features in a random forest classifier model is applicable and therefore presented.

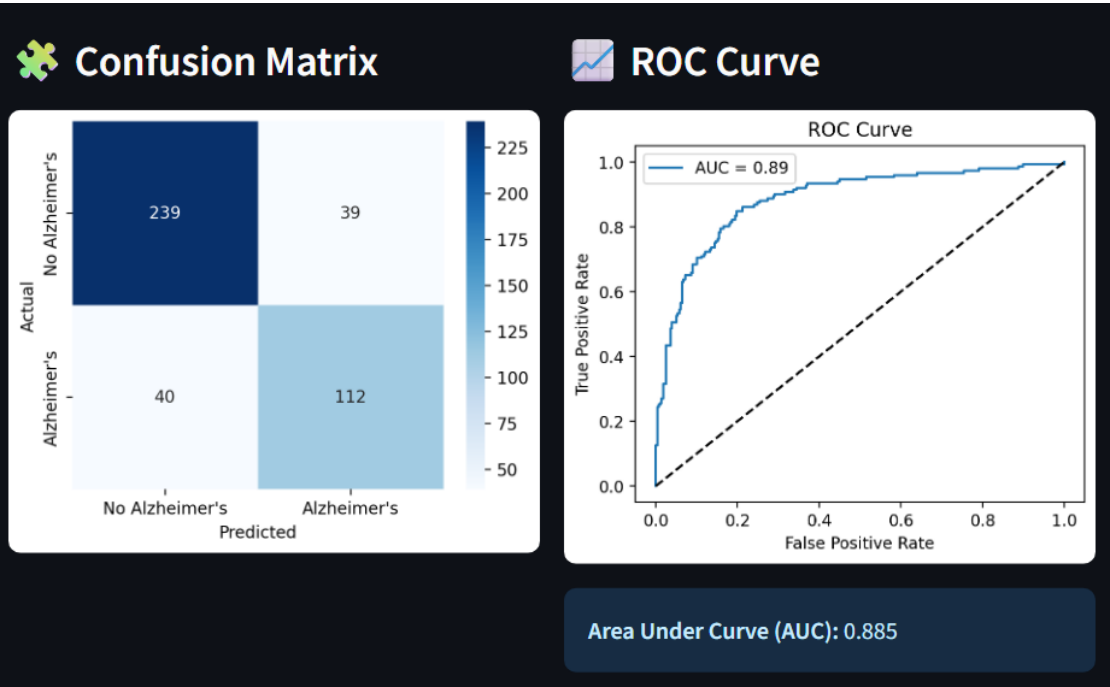


Logistic Regression Model

For the Logistic Regression model, it displayed the following performance table:

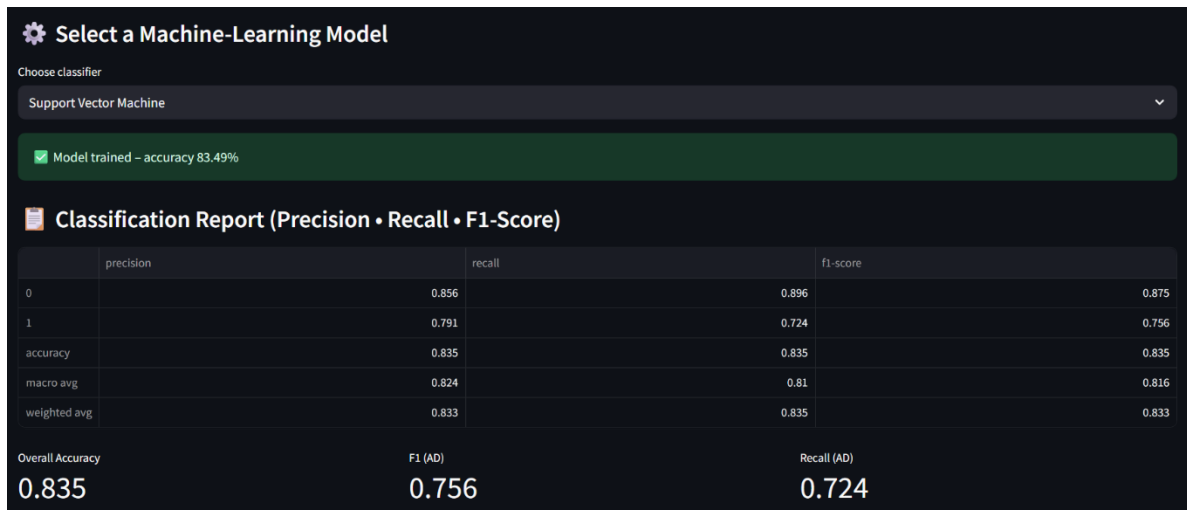


The results show an accuracy of 81.63%, with a 0.739 F1 value and 0.737 recall value. The confusion matrix table indicates that 239 patients was correctly diagnosed by the model when their actual diagnosis was ‘No Alzheimer’s’. 112 patients were correctly diagnosed when their actual diagnosis was ‘Alzheimer’s’. The AUC value indicates that the model can distinguish Alzheimer’s diagnosis from non-Alzheimer’s cases 88.5% of the time.

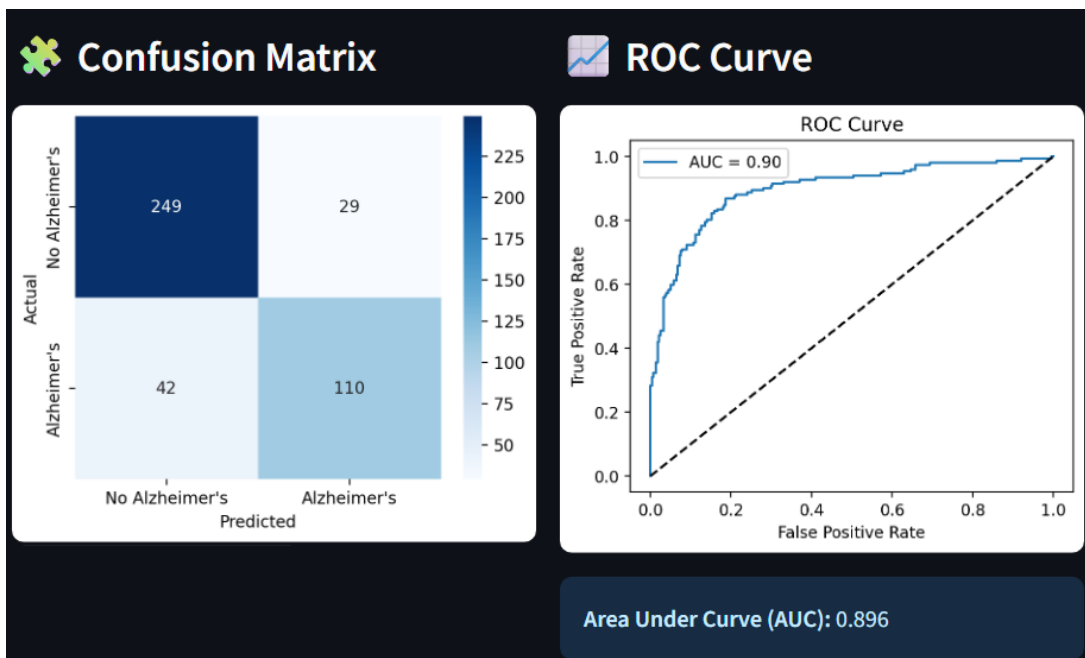


Support Vector Model

Lastly, the support vector machine presented the following classification report:



According to this table, this model has an accuracy of 83.49%. It has an F1 value of 0.756 and 0.724 as its Recall value. According to this confusion matrix, it correctly diagnosed 249 ‘No Alzheimer’s’ cases and 110 ‘Alzheimer’s’ cases. The ROC curve and AUC displays similar results as the logistic regression model and therefore successfully diagnose patients 90% of the time.



Conclusion

The Random Forest classification model was proven most successful for this specific dataset as it has an accuracy of 93.72%. It also has an F1 of 0.908, where the other models have values of only 0.739 and 0.756. The AUC for the Random Forest model is closest to 1.0, with a value of 0.939. The other models have a lower accuracy, AUC, F1 and Recall values, highlighting the most applicable model to be the random forest model.

How to run the web application

1. Download the zip folder named 'AI Individual Project'.
2. Extract the folder
3. Open Visual Studio Code
4. Select 'Open Folder '
5. Select the folder 'AI Individual Project'
6. In the terminal of the root folder of the project run:

```
python --version
```

7. If Python is not found, install it from <https://www.python.org/downloads/>
8. Finally run these commands:

```
pip install -r requirements.txt  
streamlit run app.py
```

How to use the Model

1. Upload the .csv file that is located in the extracted folder named 'AI Individual Project'.
2. Select the model (Random Forest, Logistic Regression and Support Vector Machine)
3. Scroll down to view the Classification Report, Confusion Matrix and ROC Curve graph, Feature Importance (If applicable), Explore Variables section and enter information for a new patient to predict diagnosis.

References

Leifer, B.P., 2003. Early diagnosis of Alzheimer's disease: clinical and economic benefits. *Journal of the American Geriatrics Society*, 51(5s2), pp. S281-S288.