

Thyroid Cancer Prediction

Decision Tree Classification & Patient Phenotype Discovery

Data Mining Project

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The Challenge

→ Key Facts:

Thyroid cancer is one of the **fastest-growing cancers** worldwide. Where its incidence in **Algeria** has **increased significantly** between 1993 and 2013.

It accounts for **88% of all endocrine cancers**, making it the most common endocrine malignancy. Like in most countries, thyroid cancer in Algeria affects **women far more than men (94.7%)**.

Regional Studies (Oran, Tlemcen, Béjaïa, Tizi Ouzou) reported Increasing diagnosis of **papillary thyroid carcinoma** in the last **10 years**.

- Reference: [Thyroid Cancer in Western Algeria: Histopathological and Epidemiological Study](#)

The Challenge

Early and accurate detection is crucial for better patient outcomes and saving lives.

Resources:

213k

Patients in Dataset

15

Clinical Features

50/50

Balanced Classes

Our Solution: A Two-Part System

→ Part 1: Supervised Learning

- Decision Tree Classifier

Predicts if thyroid is:

- Benign (non-cancerous)
- Malignant (cancerous)

Provides confidence score

→ Part 2: Unsupervised Learning

- K-Means Clustering

Groups patients into 6 types:

- Young Healthy
- Elderly Low-Hormone
- High-Risk Nodular
- And 3 more patterns

Helps understand patient profile

How It Works: Simple 3-Step Process

1

Collect Patient Data

Age, hormones (TSH, T3, T4), nodule size, medical history

2

Model Analyzes the Data

Decision tree examines patterns to predict cancer risk

3

Get Comprehensive Results

Diagnosis + Patient type + Risk zones for each feature

The 6 Patient Types We Discovered

Each patient is automatically assigned to one of these groups

Type 0

Young Healthy

34 yrs

Small nodules, balanced hormones

Type 1

Elderly Low-Hormone

70 yrs

Reduced thyroid function

Type 2

Young High-Risk

40 yrs

Large nodules - needs attention!

Type 3

Hypothyroid Nodular

43 yrs

High TSH, large nodules

Type 4

Elderly Hyperthyroid

69 yrs

Elevated hormone levels

Type 5

Mature T4-Dominant

56 yrs

Very high T4, low T3

What Data Do We Use?

→ Lab Results (Numerical)

- Age: Patient's age
- TSH Level: Thyroid stimulating hormone
- T3 & T4: Thyroid hormones
- Nodule Size: Size in cm

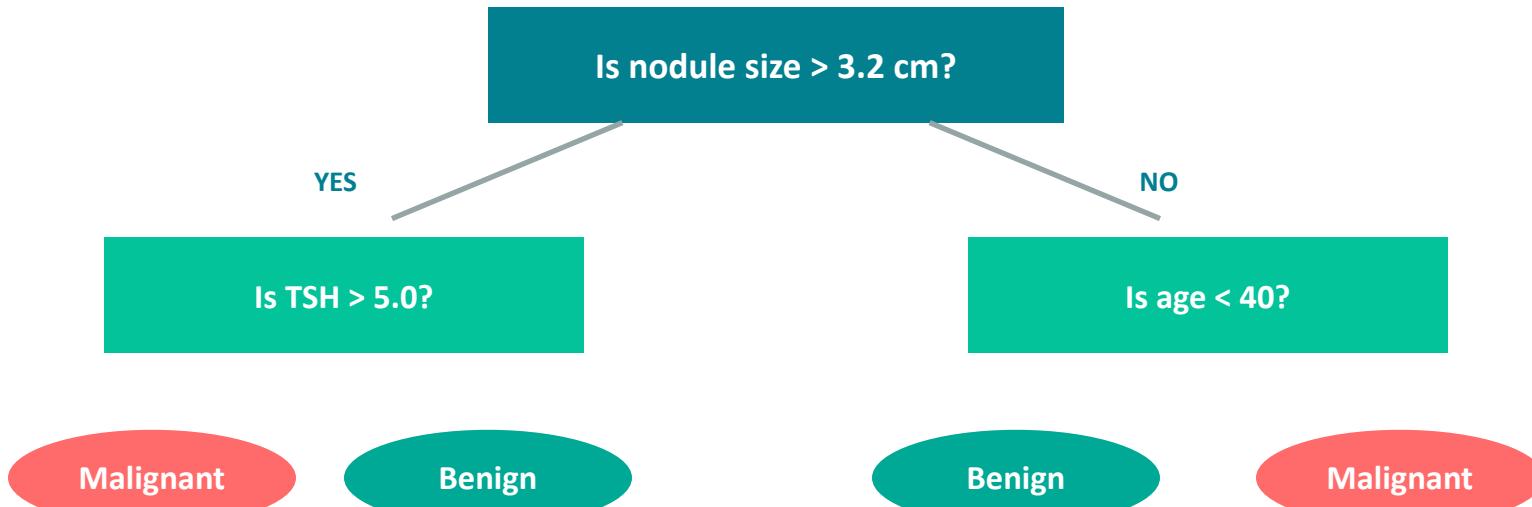
→ Patient Information (Categorical)

- Gender: Male/Female
- Family History: Thyroid disease
- Radiation: Past exposure
- Risk Factors: Smoking, obesity

Total: 15 Clinical Features

Decision Tree: How We Make Predictions

Think of it like a flowchart that asks questions:



The tree keeps asking questions until it reaches a prediction

Danger Zones: Understanding Your Risk

We identify specific risk thresholds for each measurement

TSH Level	Low Risk < 0.48	Moderate $0.48 - 9.97$	High Risk ≥ 9.97	<i>16 zones</i>
Nodule Size	Low Risk $< 0.27 \text{ cm}$	Moderate $0.27 - 4.58 \text{ cm}$	High Risk $\geq 4.58 \text{ cm}$	<i>13 zones</i>
Age	Low Risk $< 23 \text{ yrs}$	Moderate $23 - 86.5 \text{ yrs}$	High Risk $> 86.5 \text{ yrs}$	<i>13 zones</i>
T4 Level	Low Risk < 4.51	Moderate $4.51 - 11.76$	High Risk > 11.76	<i>19 zones</i>
T3 Level	Low Risk < 4.51	Moderate $4.51 - 11.76$	High Risk > 11.76	<i>18 zones</i>

Example of Real-Time Prediction from Our Website

→ Patient Information :

Clinical & Demographic Data

Patient Age	Gender	Ethnicity
45	Female	African
Family History	Radiation Exposure	Iodine Deficiency
No	No	No
Smoking	Obesity	Diabetes
No	No	No
Thyroid Cancer Risk		
High		

Laboratory Measurements

TSH Level (mIU/L)	T3 Level (ng/dL)	T4 Level (μ g/dL)
2.0	2.0	10.0
Nodule Size (cm)		
1.0		

→ Prediction Result :

Primary Diagnosis

MALIGNANT

Confidence Level: 88.44%

The assessment suggests potential malignancy. Immediate consultation with an oncologist and further diagnostic testing is strongly recommended.

Patient Phenotype Profile

Profile Classification: Cluster 5
higher age, higher TSH, lower T3, higher T4, lower nodule size; typical risk: Low

Gender Female	Iodine Deficiency No ✓	Radiation Exposure No ✓	Family History No ✓
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Clinical Risk Zone Assessment

Detailed analysis of individual risk factors and their contribution to overall assessment

Tsh Level 2.0 ↔ Moderate Risk	T4 Level 10.0 ↔ High Risk	Nodule Size 1.0 ↔ Moderate Risk	T3 Level 2.0 ↔ Moderate Risk
Age 45.0 ↔ Moderate Risk			

What We Achieved

Interpretable Model

Decision tree with clear rules doctors can understand

Risk Thresholds

79 data-driven cutoff values across 5 key features

6 Patient Types

Discovered distinct patterns helping personalize treatment

Comprehensive System

Combines diagnosis, phenotyping, and risk assessment

Why This Matters for Healthcare

→ For Doctors

- See WHY the AI predicted
- Get specific risk markers
- Understand patient profile
- Make informed decisions

→ For Patients

- Earlier cancer detection
- Personalized treatment
- Better risk understanding
- More confidence

→ For Healthcare

- Reduce unnecessary procedures
- Improve screening efficiency
- Data-driven guidelines
- Better resource use

Technical Approach

→ Dataset

- 98,990 patient records
- Balanced 50/50
- 15 clinical features
- 80/20 split

→ Model

- Decision Tree (depth=7)
- StandardScaler + One-Hot
- K-Means ($k=6$)
- Sklearn pipeline

→ Features

- **Numerical:** Age, TSH, T3, T4, Nodule
- **Categorical:** Gender, History, Factors
- No manual selection

→ Validation

- Stratified train-test
- Threshold extraction
- Unsupervised discovery

Current Model Limitations

Balanced Dataset assumption

The model was trained on a balanced benign/malignant dataset which may not reflect real-world class distributions and could affect performance in practice .

Recall-Focused Tradeoff

Emphasizing high recall increases detection of malignant cases but may lead to more false positives, reducing overall precision .

Limited Model Complexity

The Decision Tree depth (7) was restricted to maintain interpretability, which may limit the model's ability to capture more complex patterns .

Next Steps & Future Improvements

Short Term

- External dataset testing
- Radiologist comparison
- User interface

Medium Term

- Add ultrasound images
- Temporal patient data
- Mobile app

Long Term

- EHR integration
- Multi-center trials
- FDA approval

Key Takeaways

- Built interpretable AI for thyroid cancer prediction
- Discovered 6 distinct patient phenotypes automatically
- Extracted 79 data-driven risk thresholds
- Created comprehensive tool: diagnosis + phenotype + risk
- Ready for validation and clinical testing

Thank You!
Questions?