

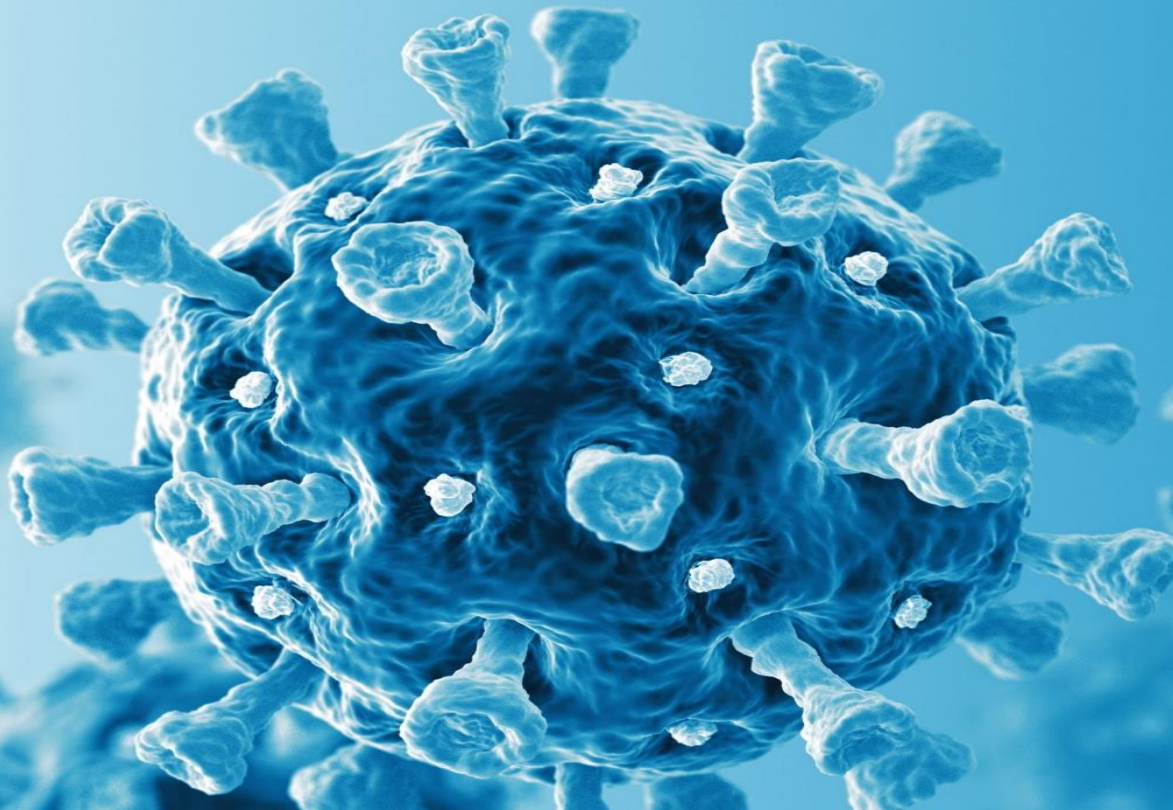
Covid 19 Analysis and Risk Prediction

Presented to you by:

Raed Habib

Under Supervision of:

Dr. Doaa Mahmoud



Agenda

- 📍 Introduction
- 📍 Dataset Overview
- 📍 Initial Questions to be Answered
- 📍 Exploratory Data Analysis
- 📍 Data Pre-processing and Problems
- 📍 Modeling and Results
- 📍 Conclusion



Introduction

Coronavirus disease (COVID-19) is an infectious disease caused by a newly discovered coronavirus. Most people infected with COVID-19 virus will experience mild to moderate respiratory illness and recover without requiring special treatment. Older people, and those with underlying medical problems like cardiovascular disease, diabetes, chronic respiratory disease, and cancer are more likely to develop serious illness.



Introduction

During the entire course of the pandemic, one of the main problems that healthcare providers have faced is the shortage of medical resources and a proper plan to efficiently distribute them. In these tough times, being able to predict what kind of resource an individual might require at the time of being tested positive or even before that will be of immense help to the authorities as they would be able to procure and arrange for the resources necessary to save the life of that patient.



Project goal

The main goal of this project is to build a machine learning model that, given a Covid-19 patient's current symptom, status, and medical history, will predict whether the patient is at high risk or not.



Dataset Overview

The dataset is obtained from Kaggle at the following link:

<https://www.kaggle.com/datasets/meirnazri/covid19-dataset>, and was provided by the Mexican government, which can be found at this link:

<https://datos.gob.mx/busca/dataset/informacion-referente-a-casos-covid-19-en-mexico>

This dataset contains an enormous number of anonymized patient-related information including pre-conditions. The raw dataset consists of 21 unique features and 1,048,576 unique patients. In the Boolean features, ****1 means "yes" and 2 means "no". values as 97 and 99 are missing data****.

Dataset Overview

sex: 1 for female and 2 for male.

age: of the patient.

classification: Covid test findings. Values 1-3 mean that the patient has Covid in different degrees. 4 or higher means that the patient is not a carrier of Covid or that the test is inconclusive.

patient type: type of care the patient received in the unit. 1 for returned home and 2 for hospitalization.

pneumonia: whether the patient already have air sacs inflammation or not.

pregnancy: whether the patient is pregnant or not.

diabetes: whether the patient has diabetes or not.

Dataset Overview

copd: Indicates whether the patient has Chronic obstructive pulmonary disease or not.

asthma: whether the patient has asthma or not.

inmsupr: whether the patient is immunosuppressed or not.

hypertension: whether the patient has hypertension or not.

cardiovascular: whether the patient has heart or blood vessels related disease.

renal chronic: whether the patient has chronic renal disease or not.

other disease: whether the patient has other disease or not.

Dataset Overview

obesity: whether the patient is obese or not.

tobacco: whether the patient is a tobacco user.

firusmr: Indicates whether the patient treated medical units of the st, second or third level.

medical unit: type of institution of the National Health System that provided the care.

Intubed: whether the patient was connected to the ventilator.

icu: Indicates whether the patient had been admitted to an Intensive Care Unit.

date died: If the patient died indicate the date of death, and 9999-99-99 otherwise.



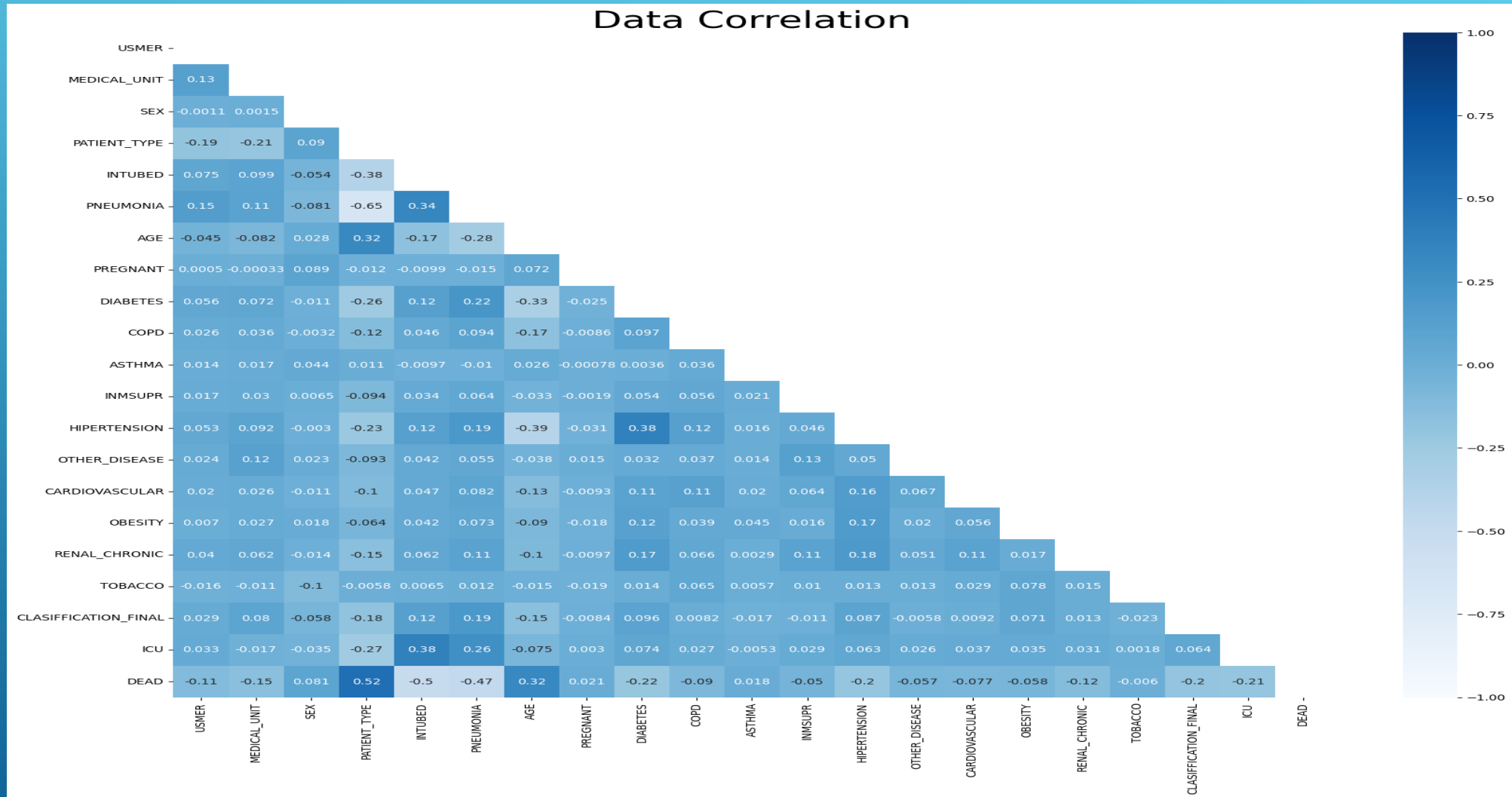
Initial Questions to be Answered:

Initial Questions to be Answered:

- 1- How many people have died?
- 2- And, did they all have the same results?
- 3- Is it true that age has some impact?
- 4- Does Obesity have any impact
- 5- Does gender have any impact?
- 6- How do other diseases affect the patient classification?
- 7- How many patients were diagnosed with Covid 19 of 1st, 2nd, or 3rd degrees?
- 8- How many of them have died?
- 9- How many patients were hospitalized?
- 10- How many of them have died?
- 11- How many patients had been admitted to an Intensive Care Unit?
- 12- How many of them have died?

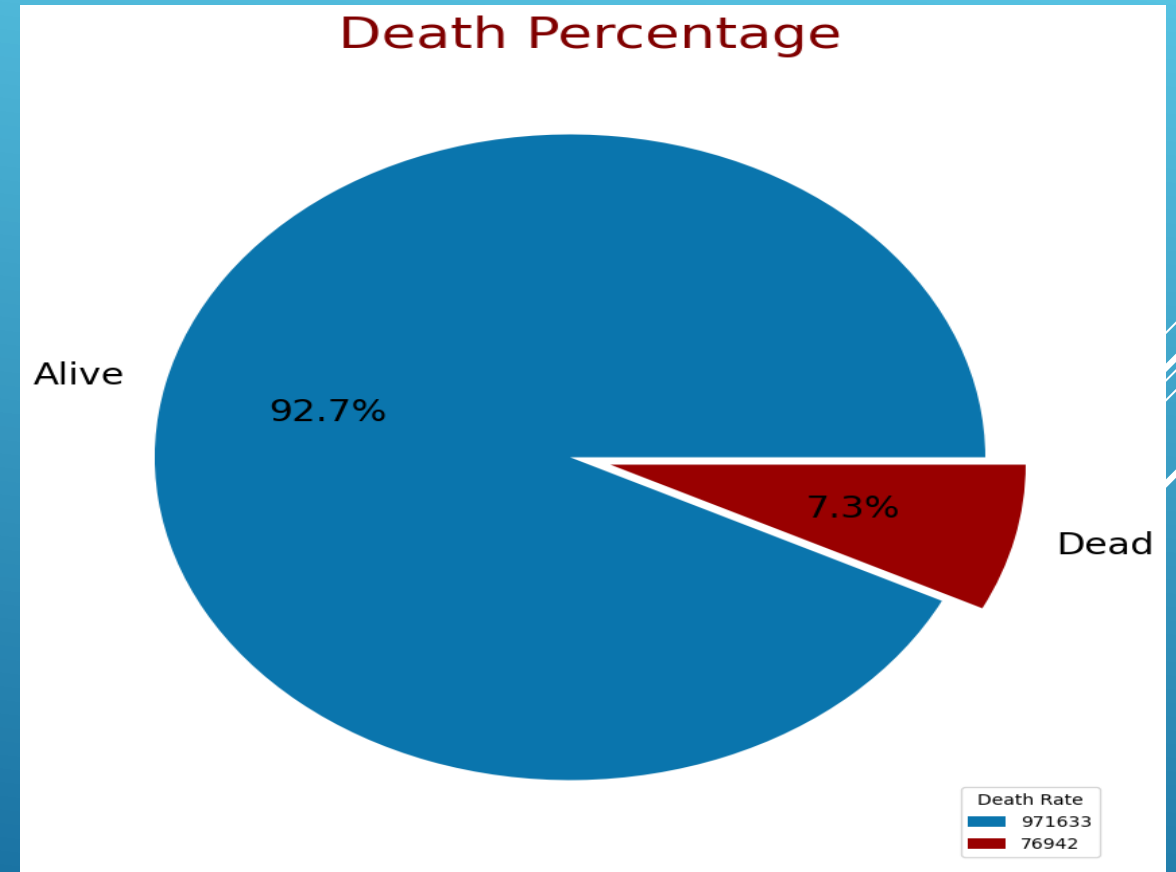
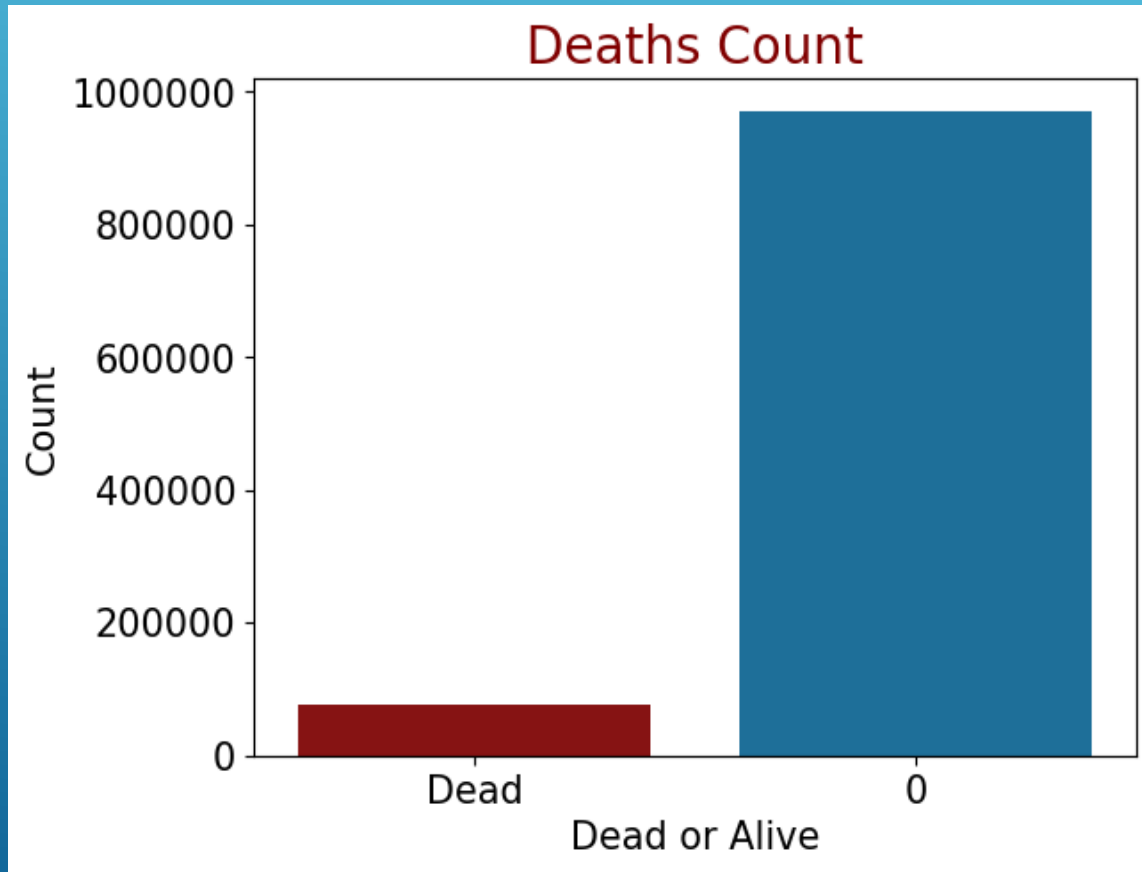


Exploratory Data Analysis



Exploratory Data Analysis

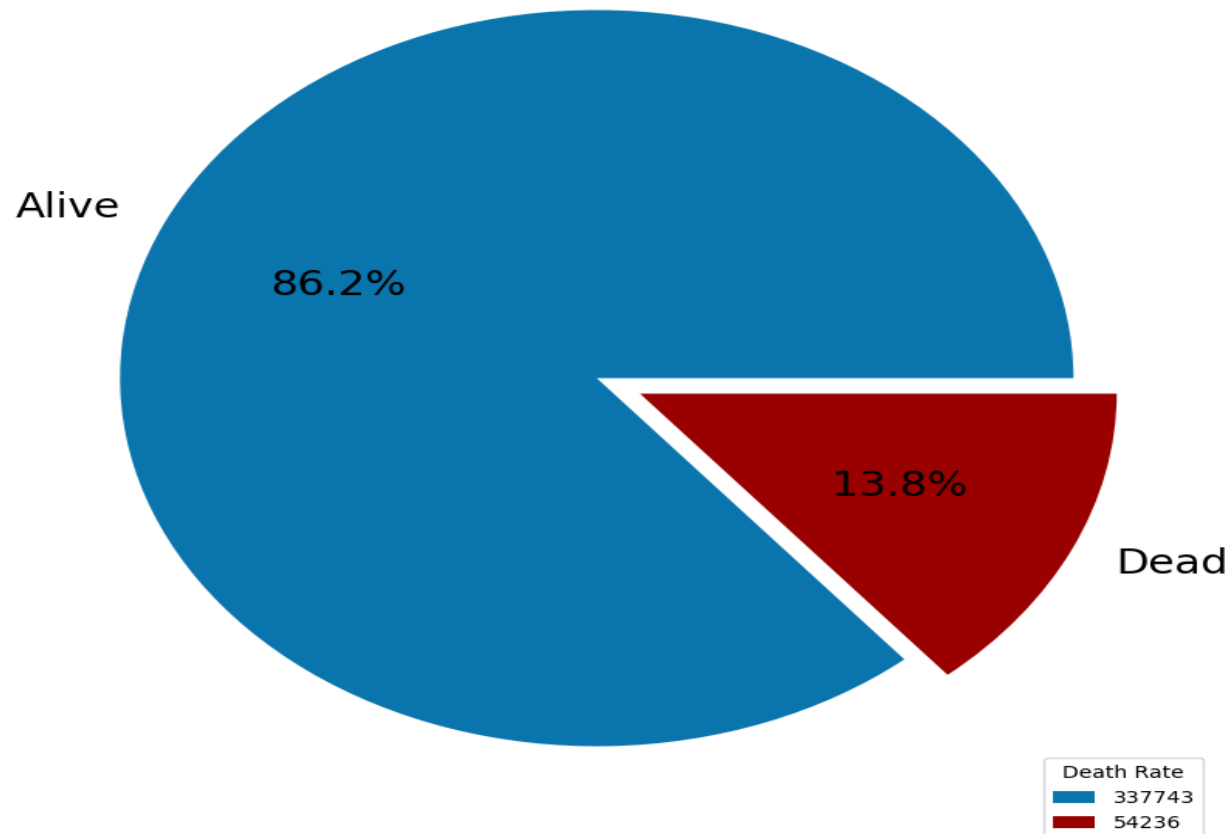
Death statistics



Exploratory Data Analysis

Death statistics

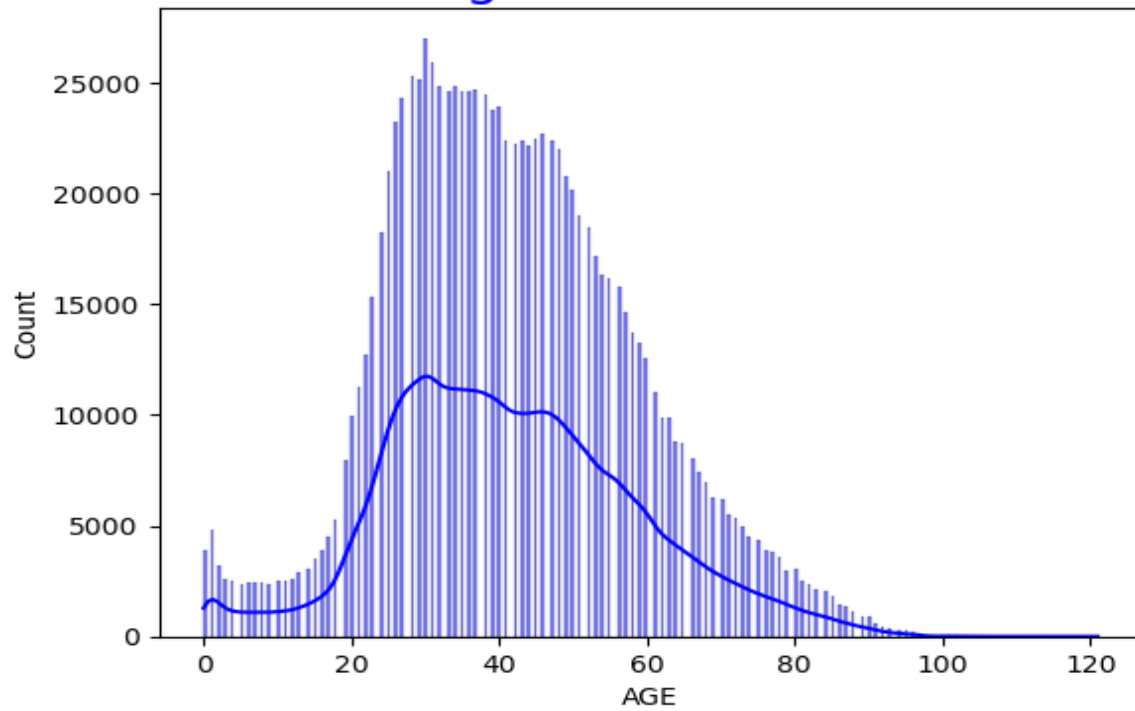
Death Percentage among Covid Carriers



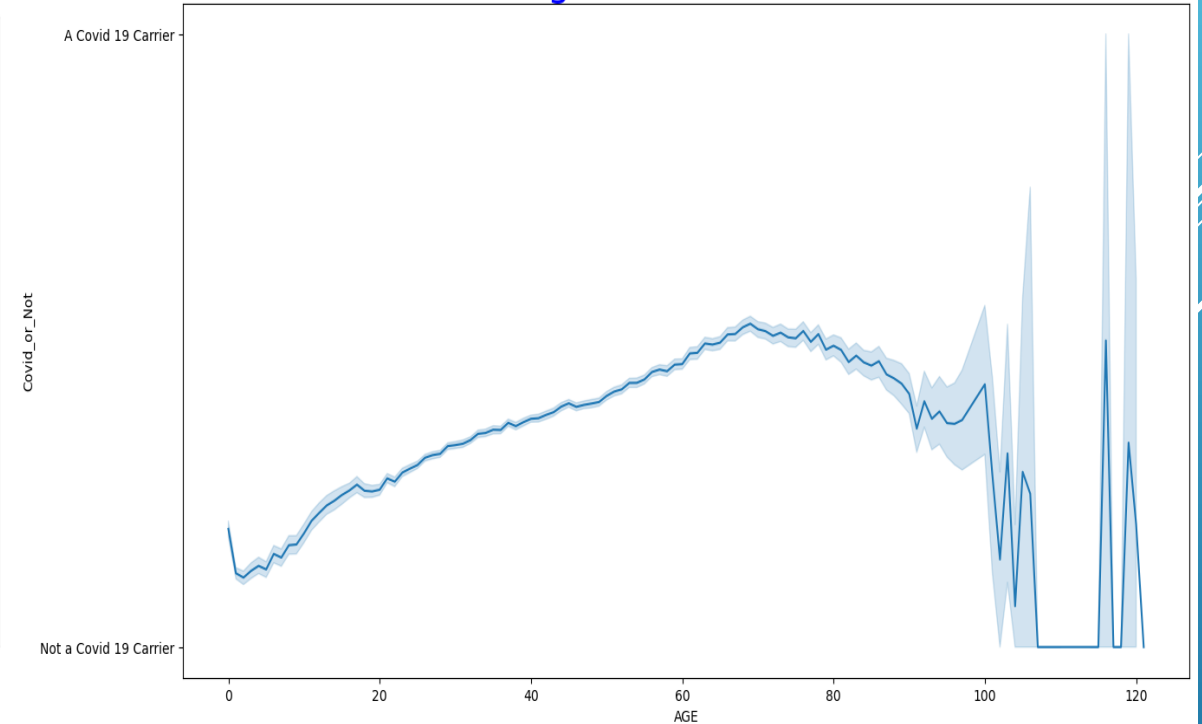
Exploratory Data Analysis

Death statistics

Age Distribution



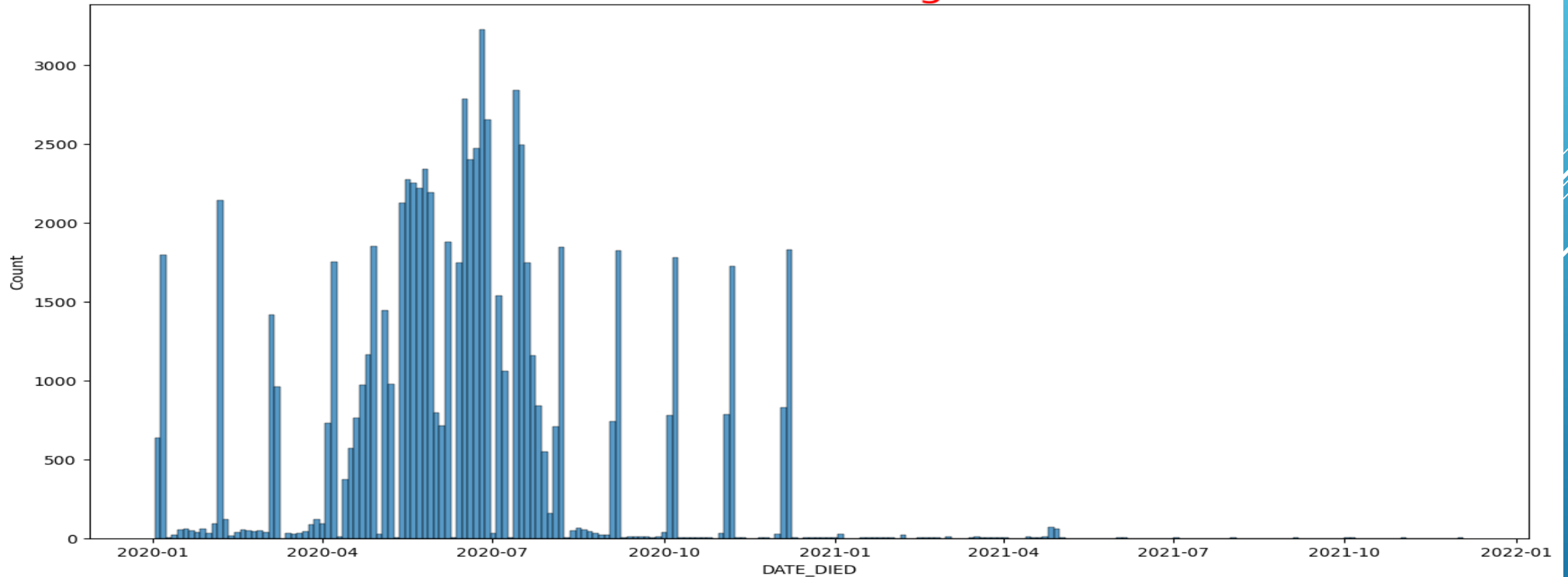
Effect of Age on Covid Classification



Exploratory Data Analysis

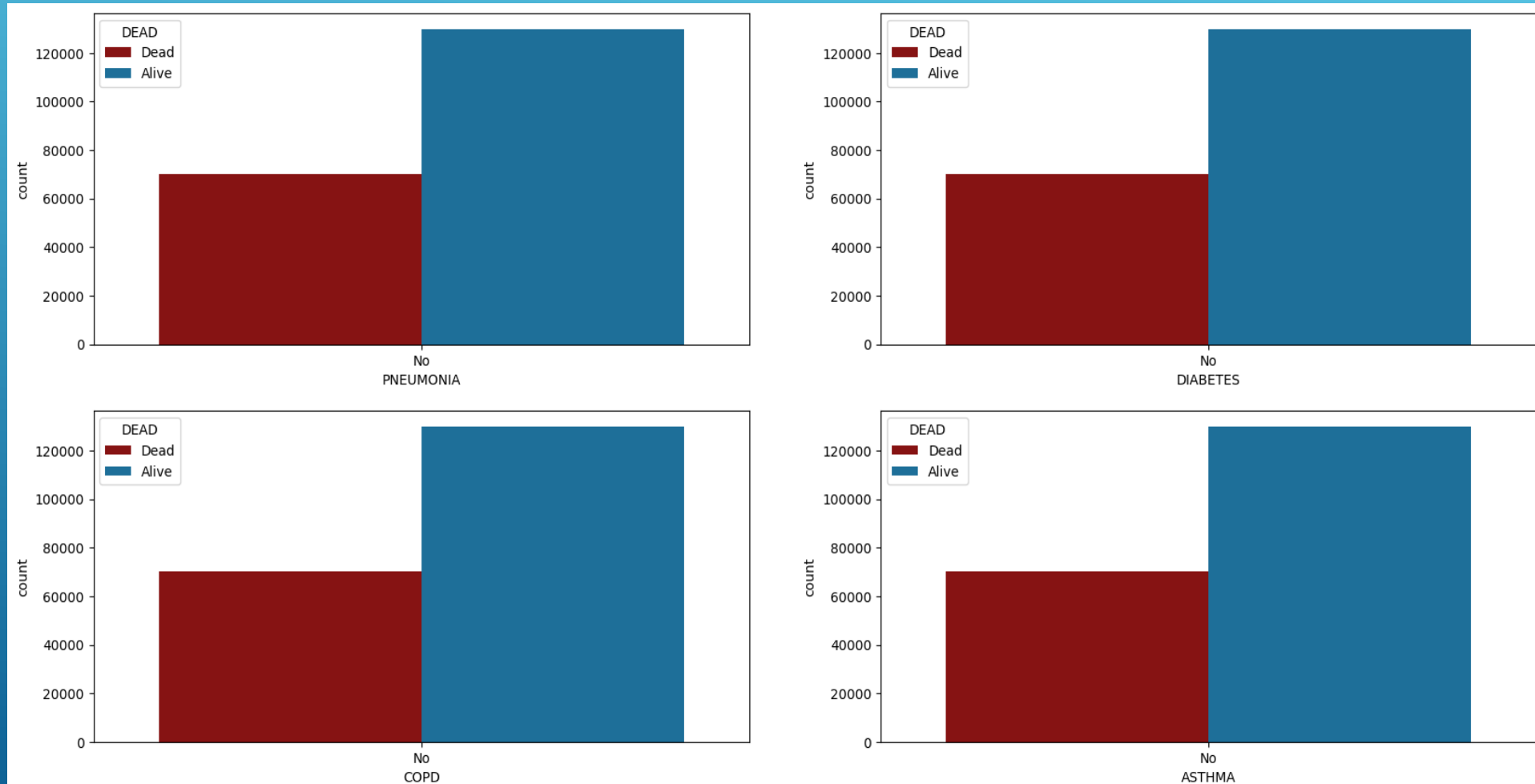
Death statistics

Death Trend through Time



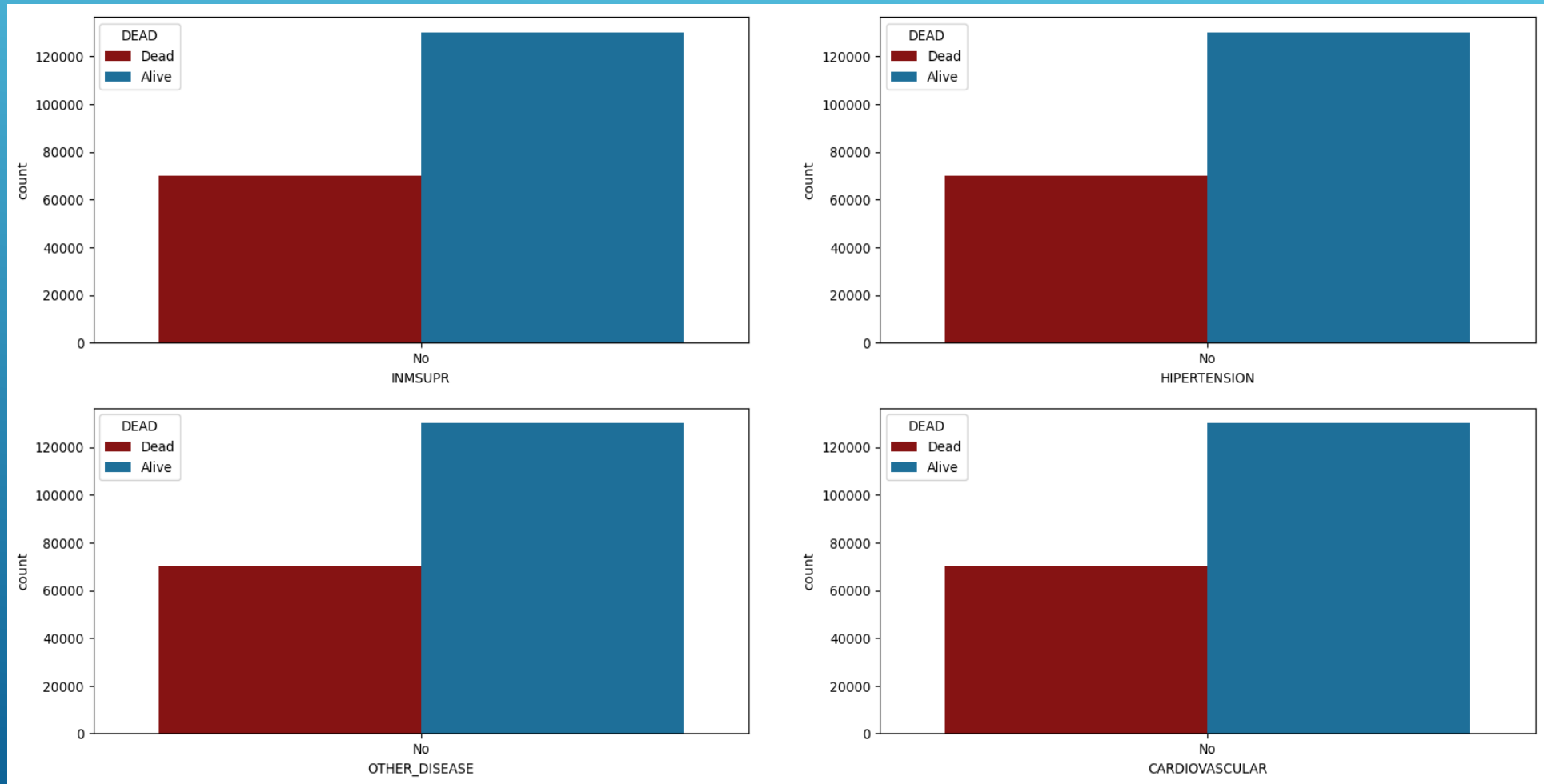
Exploratory Data Analysis

Effect of diseases on Death



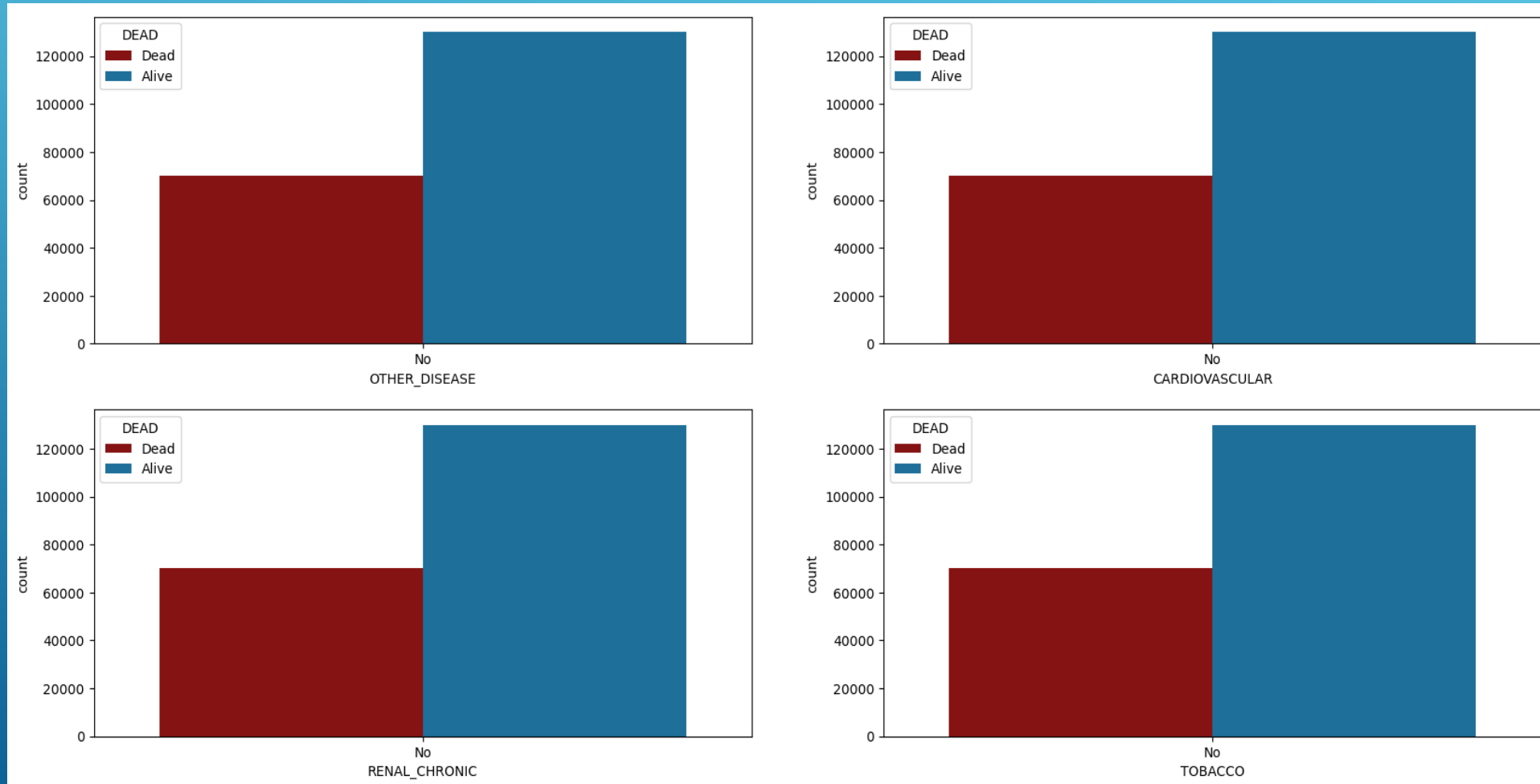
Exploratory Data Analysis

Effect of diseases on Death



Exploratory Data Analysis

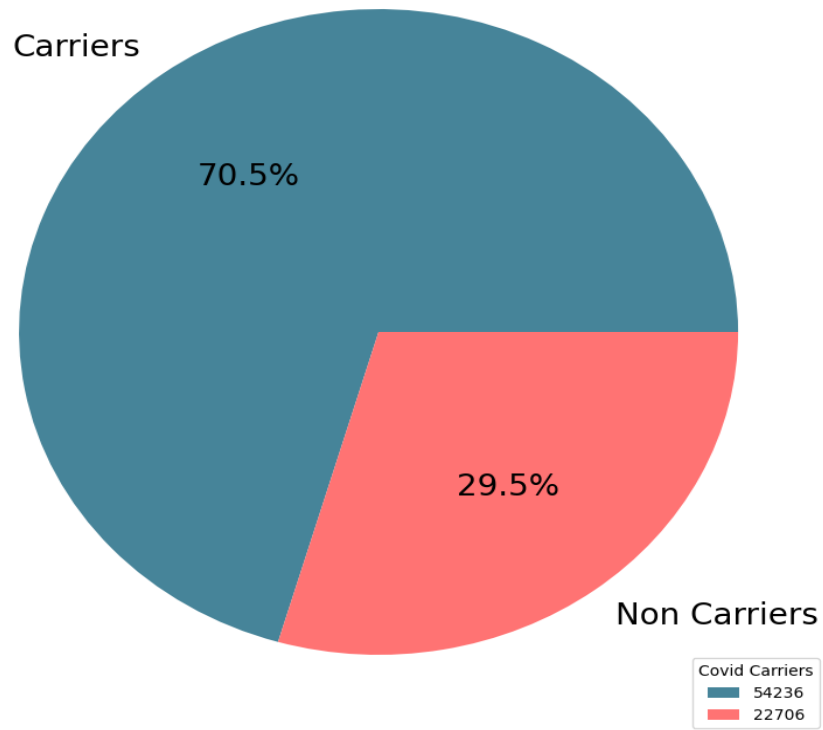
Effect of diseases on Death



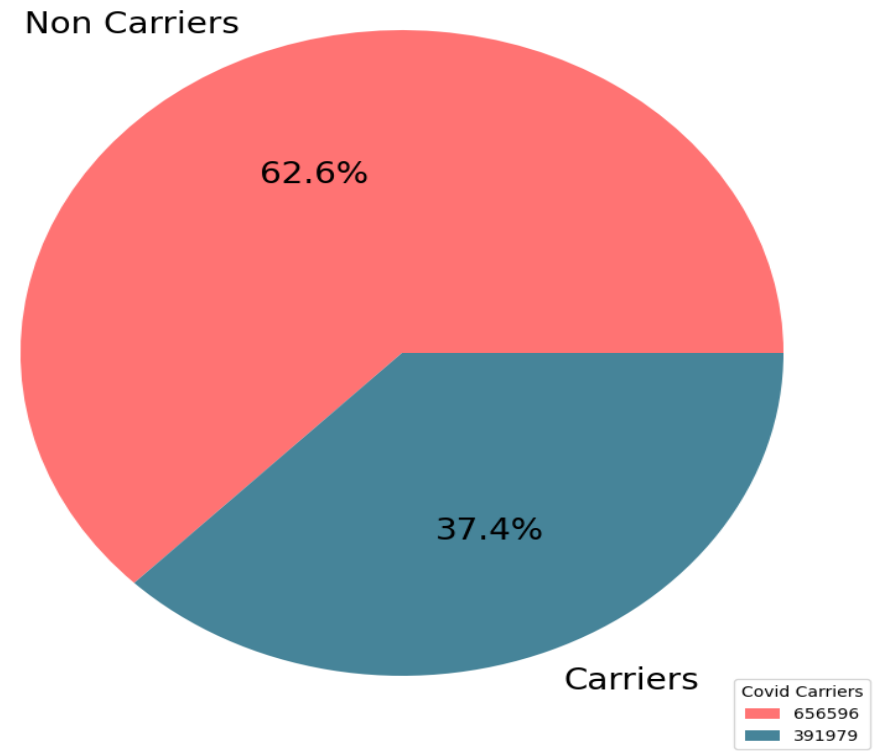
Exploratory Data Analysis

Covid statistics

Covid Carriers Percentage among Dead Patients



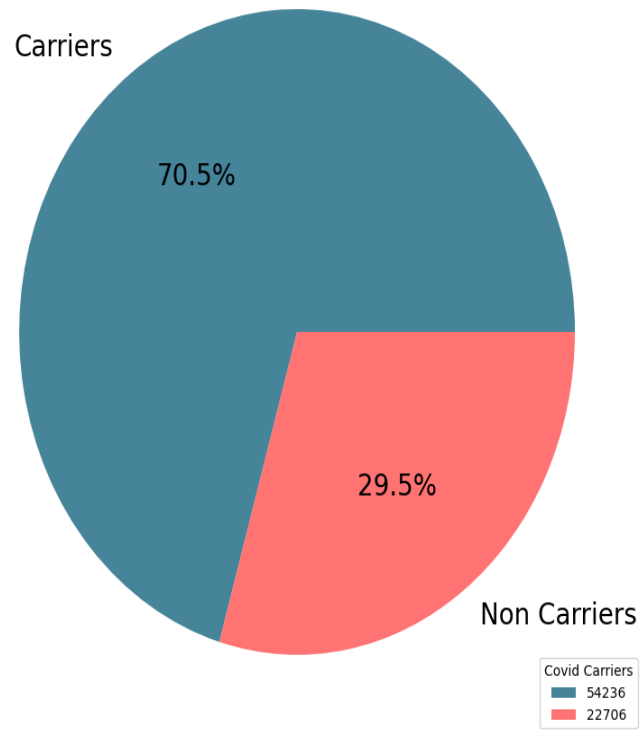
Covid Carriers Percentage among All Patients



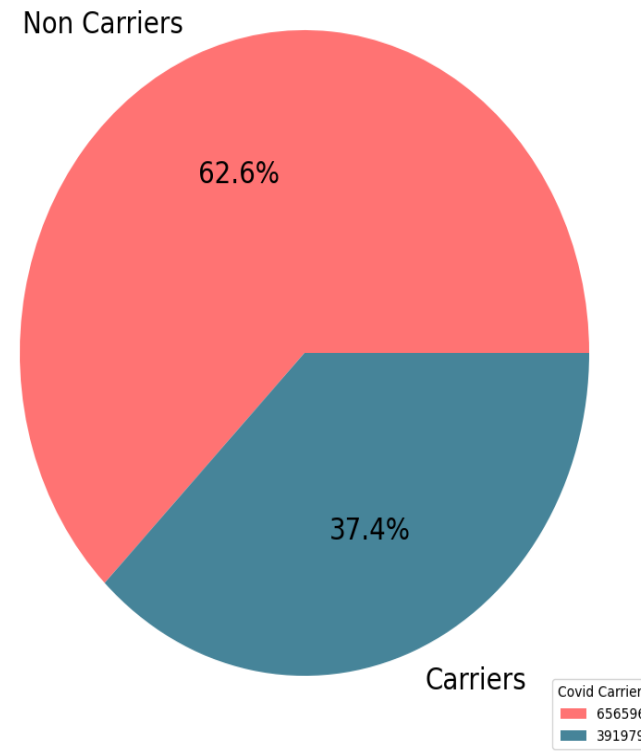
Exploratory Data Analysis

Covid statistics

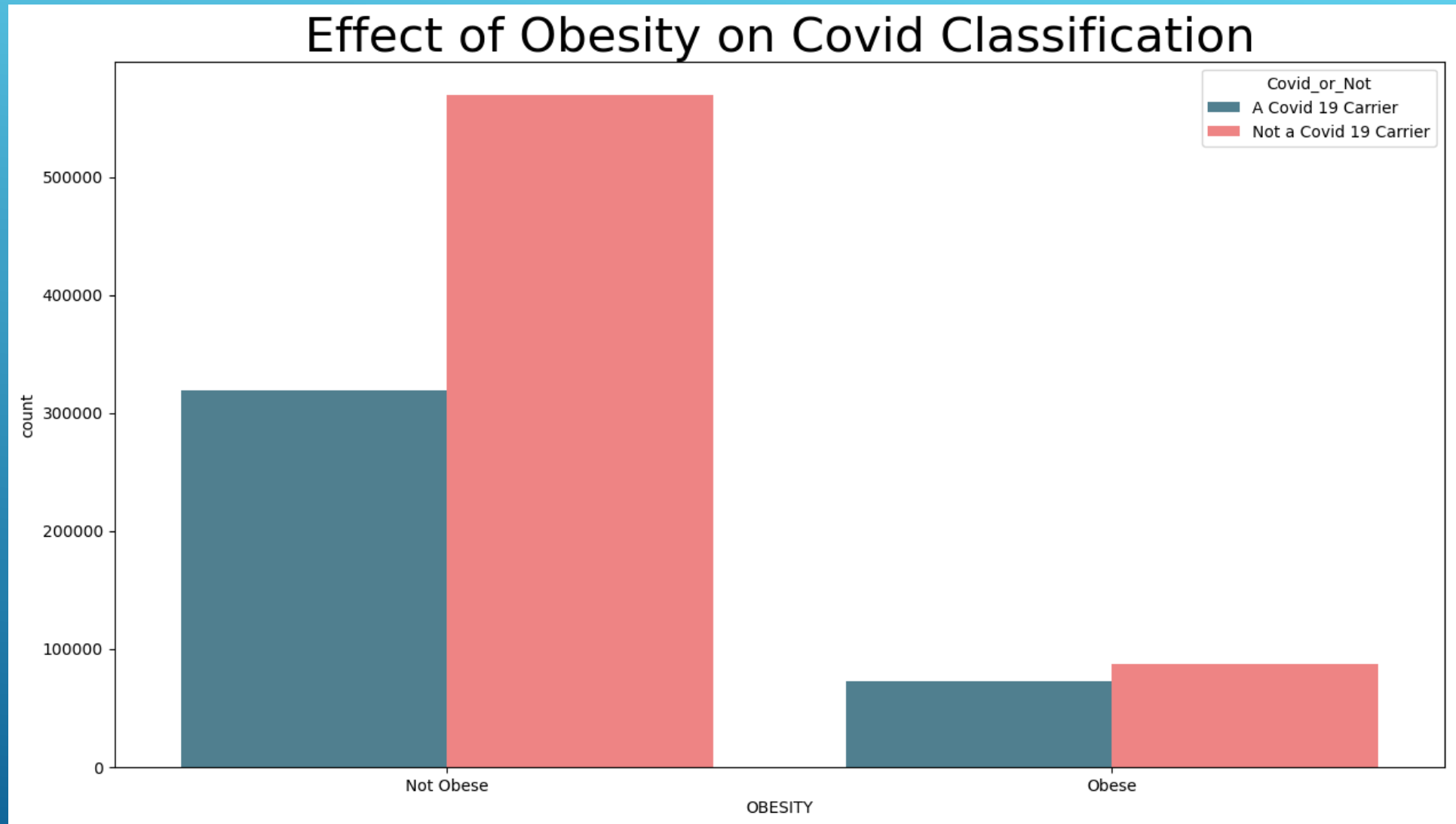
Covid Carriers Percentage among Dead Patients



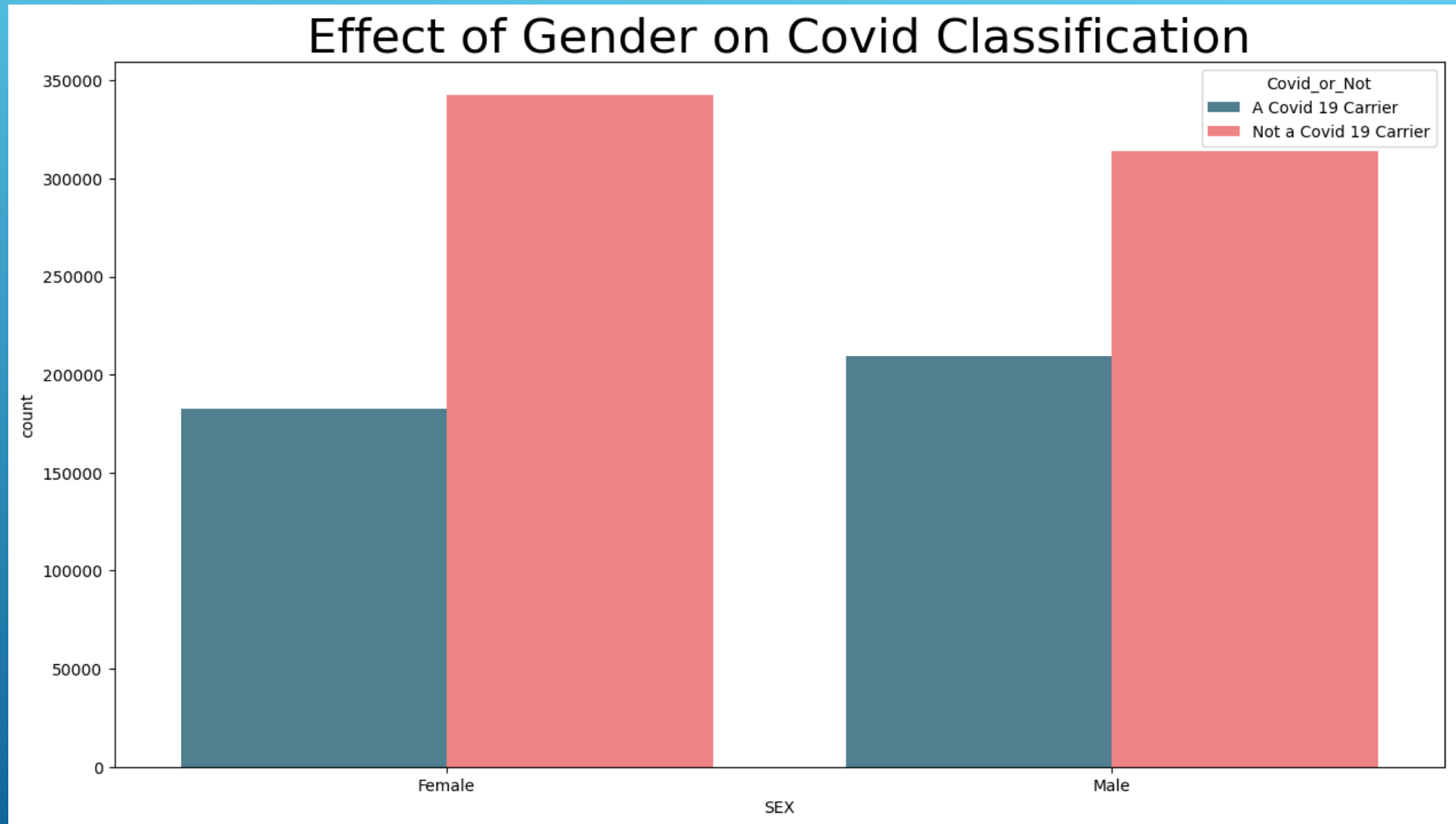
Covid Carriers Percentage among All Patients



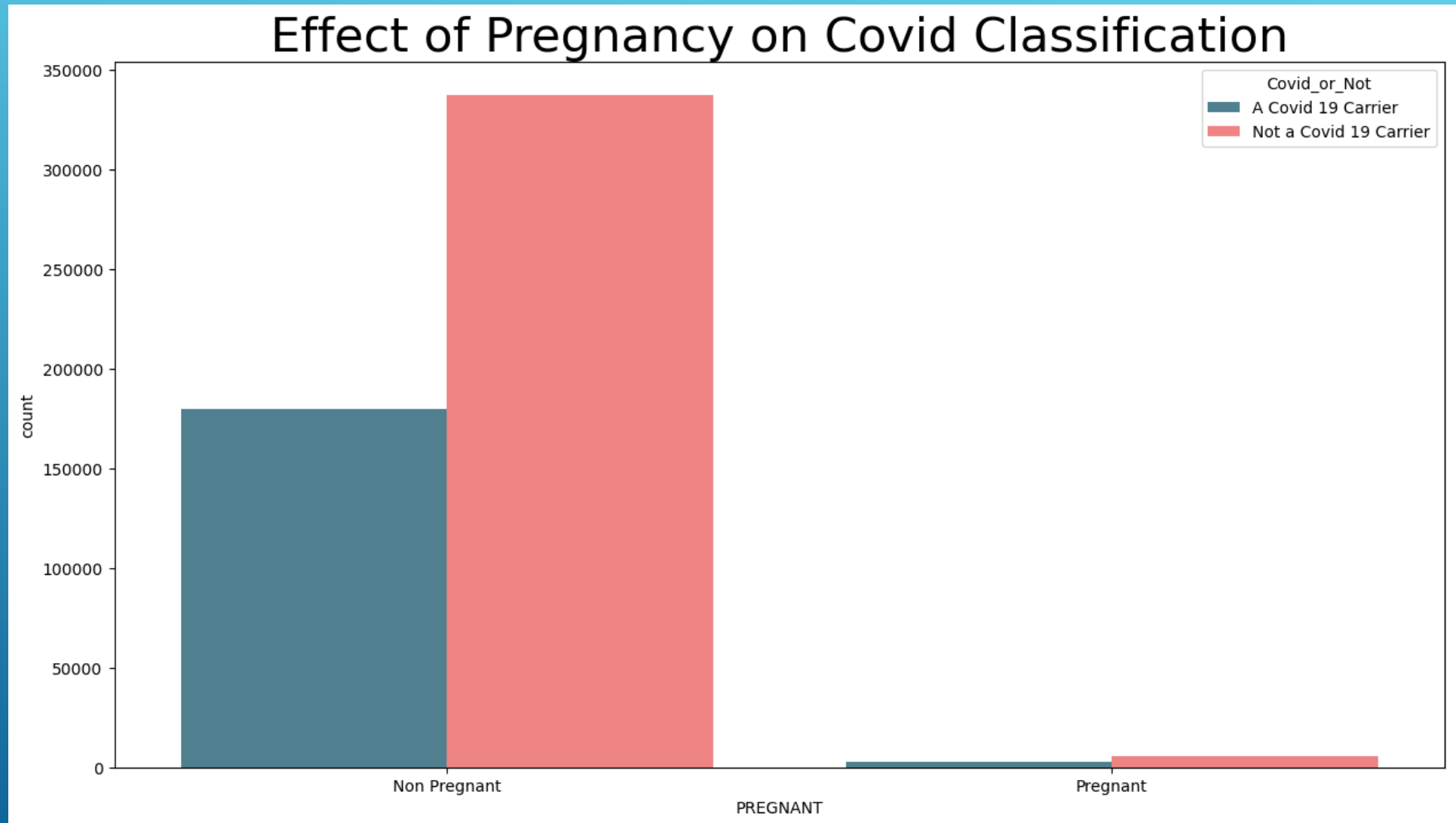
Exploratory Data Analysis



Exploratory Data Analysis

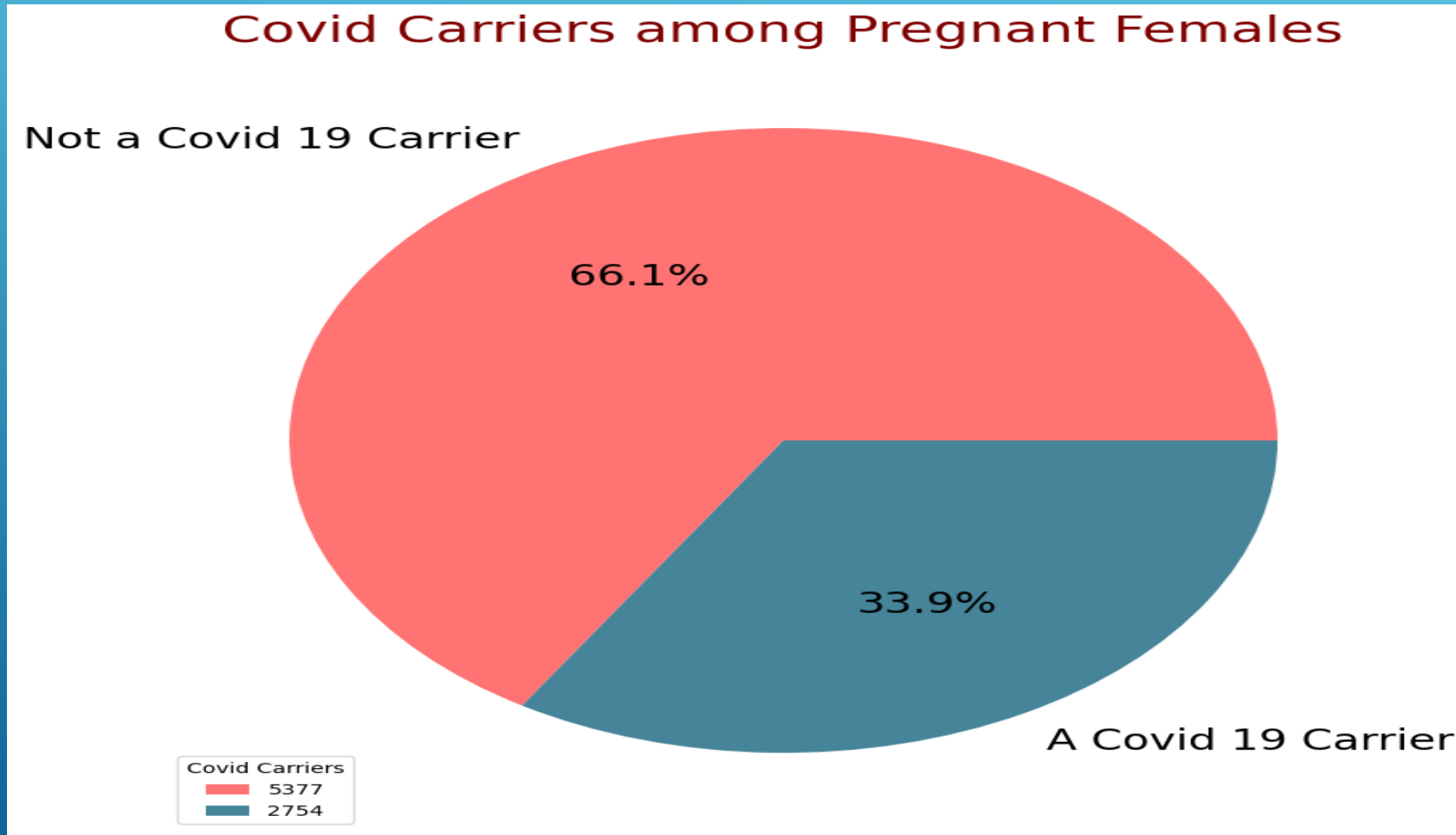


Exploratory Data Analysis



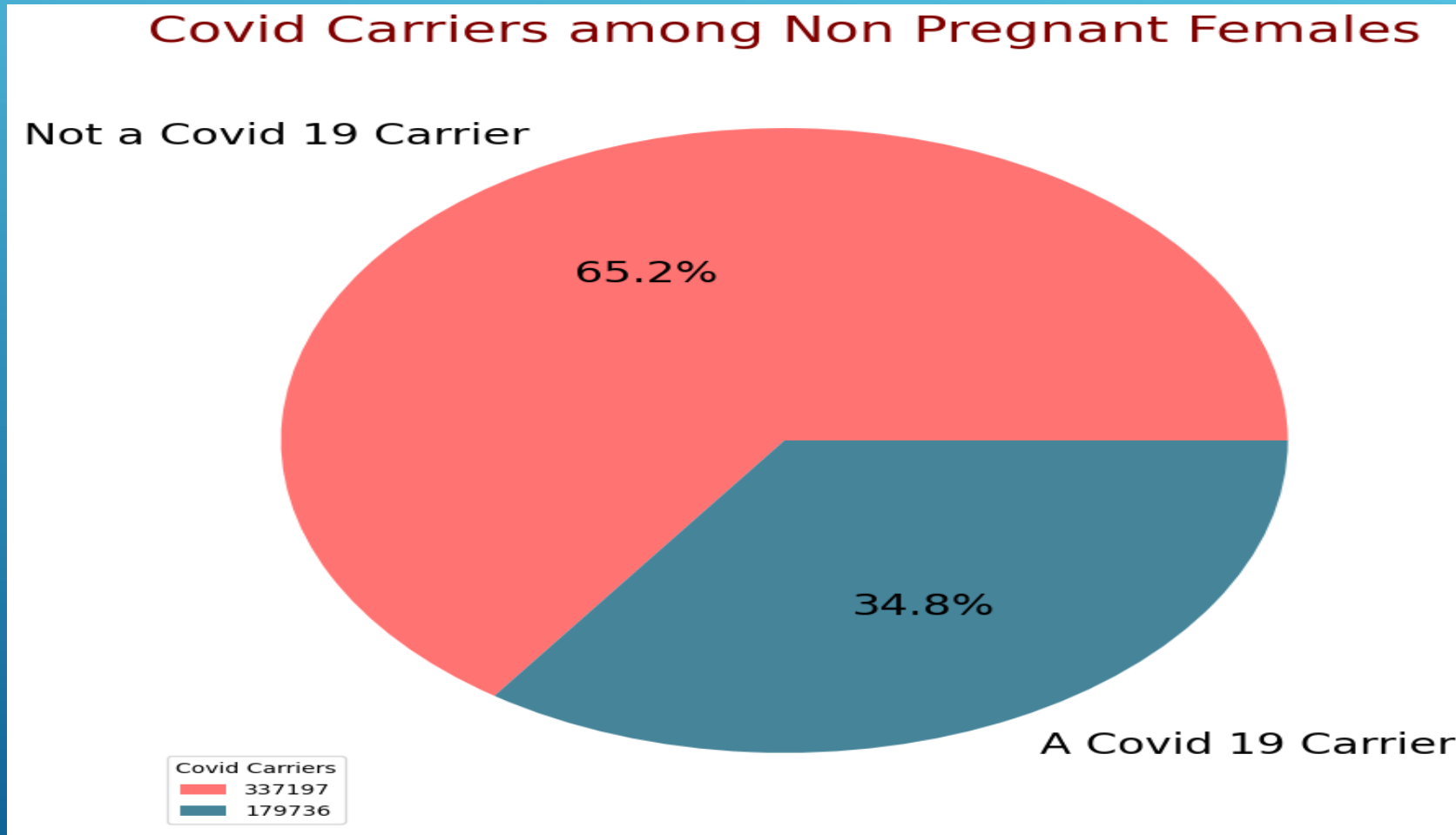
Exploratory Data Analysis

Covid statistics



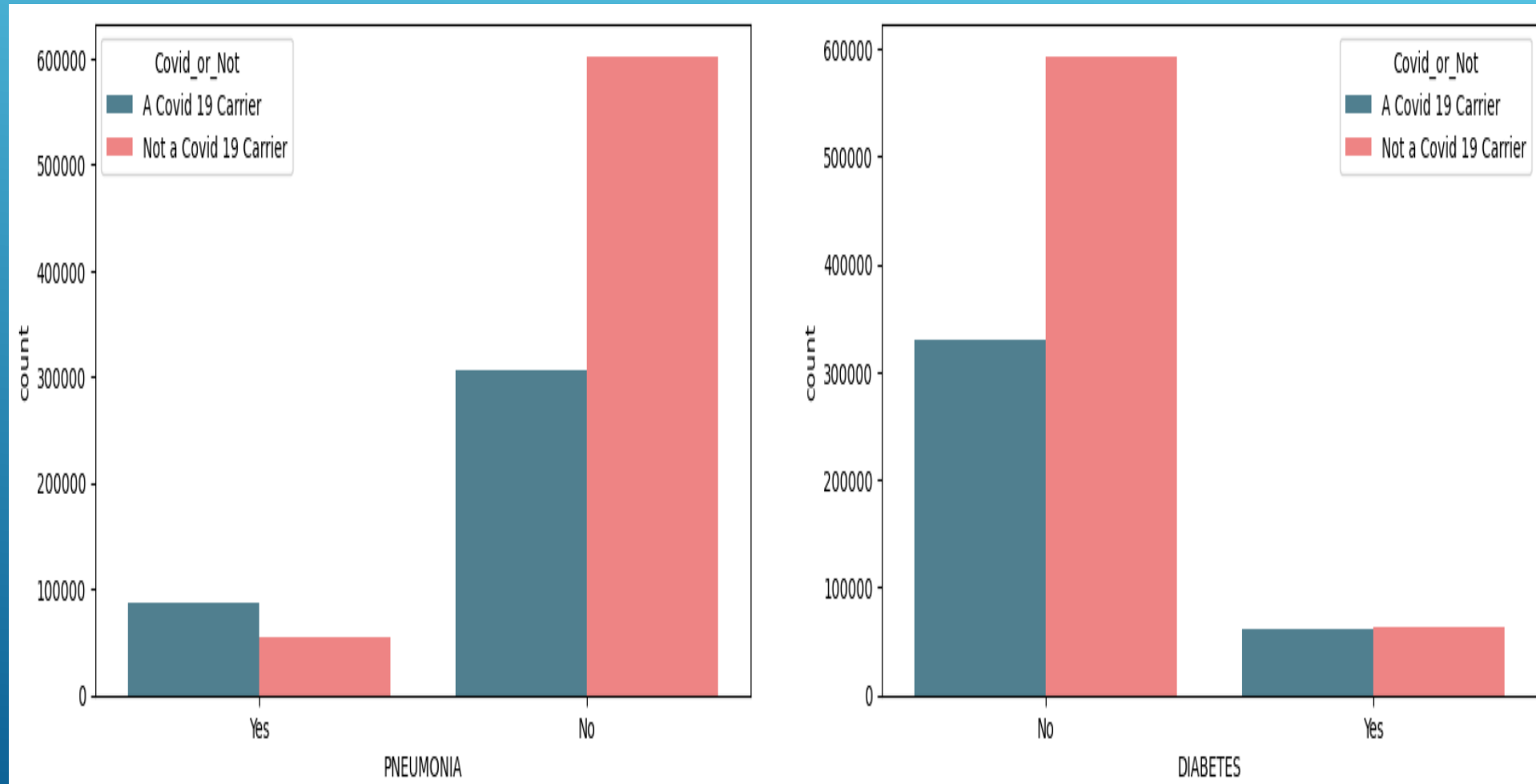
Exploratory Data Analysis

Covid statistics



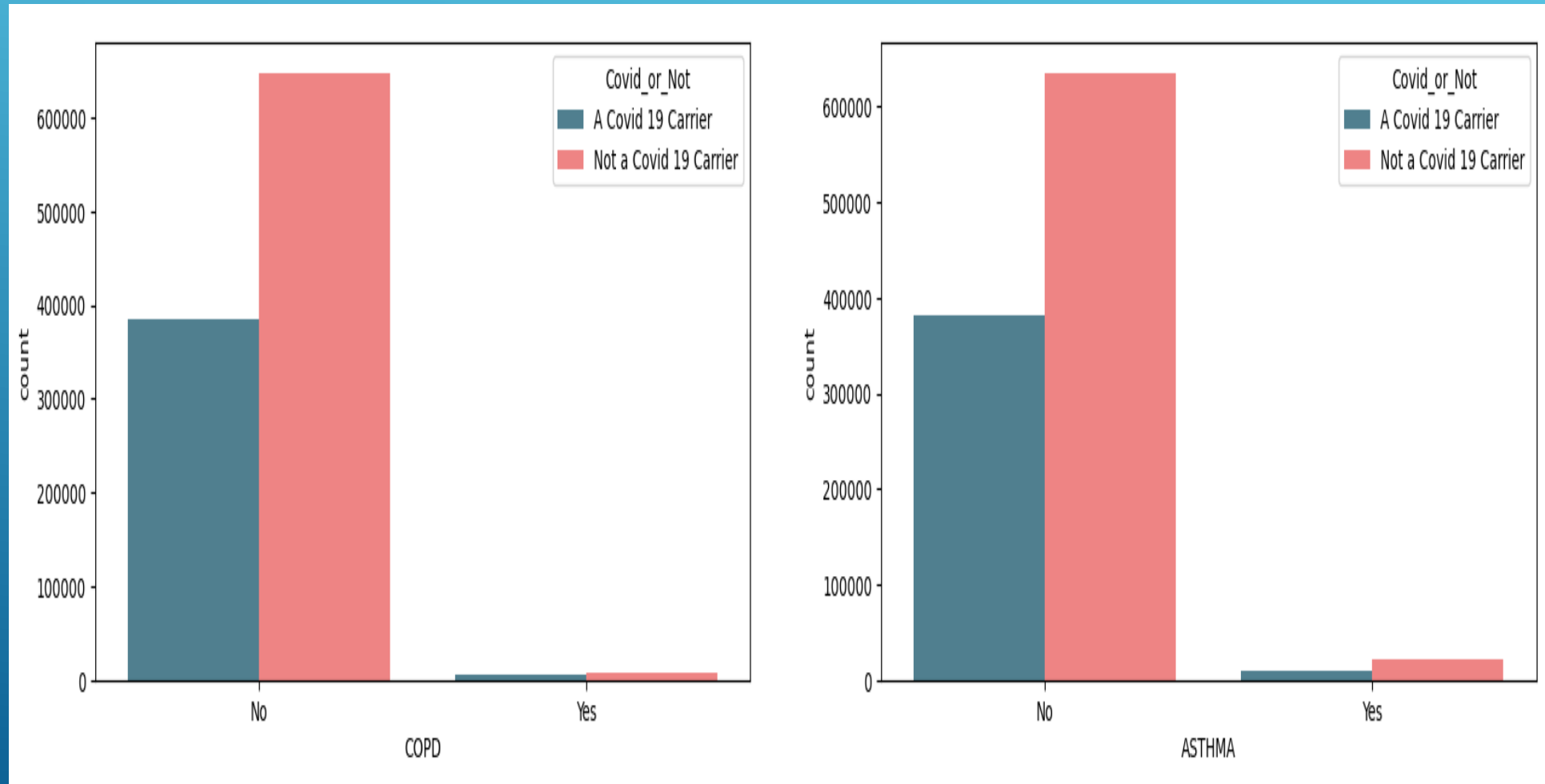
Exploratory Data Analysis

Effect of diseases on Covid



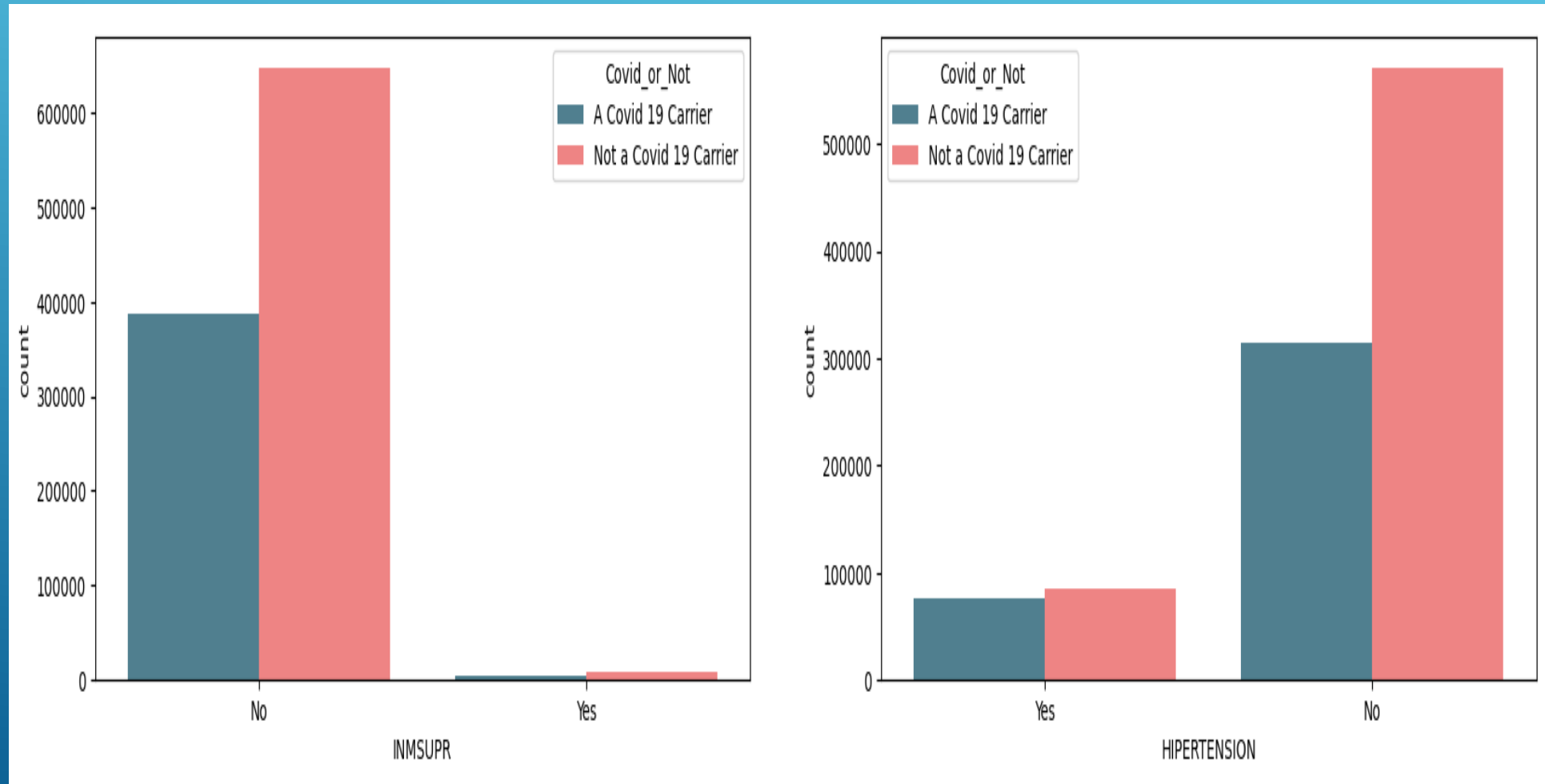
Exploratory Data Analysis

Effect of diseases on Covid



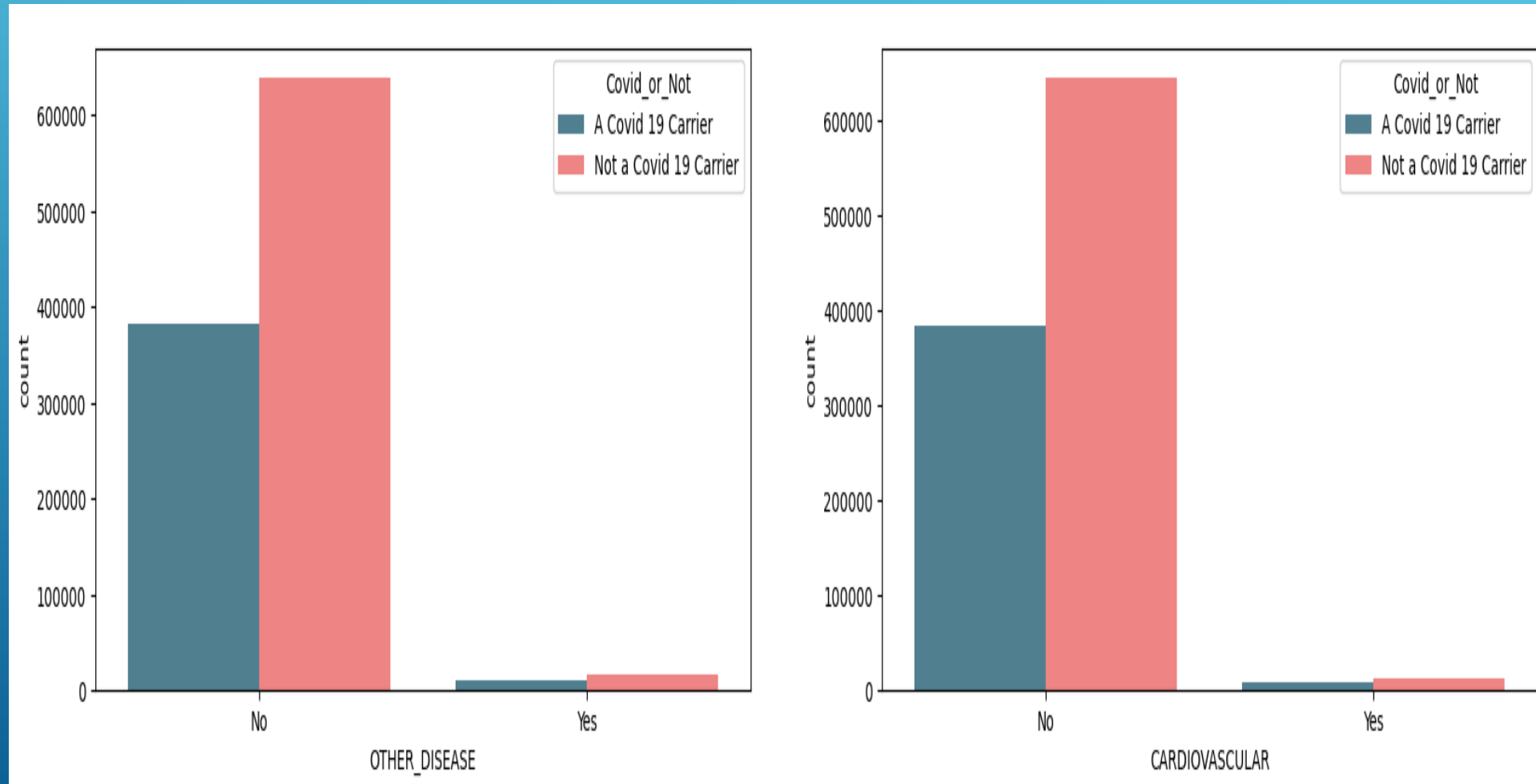
Exploratory Data Analysis

Effect of diseases on Covid



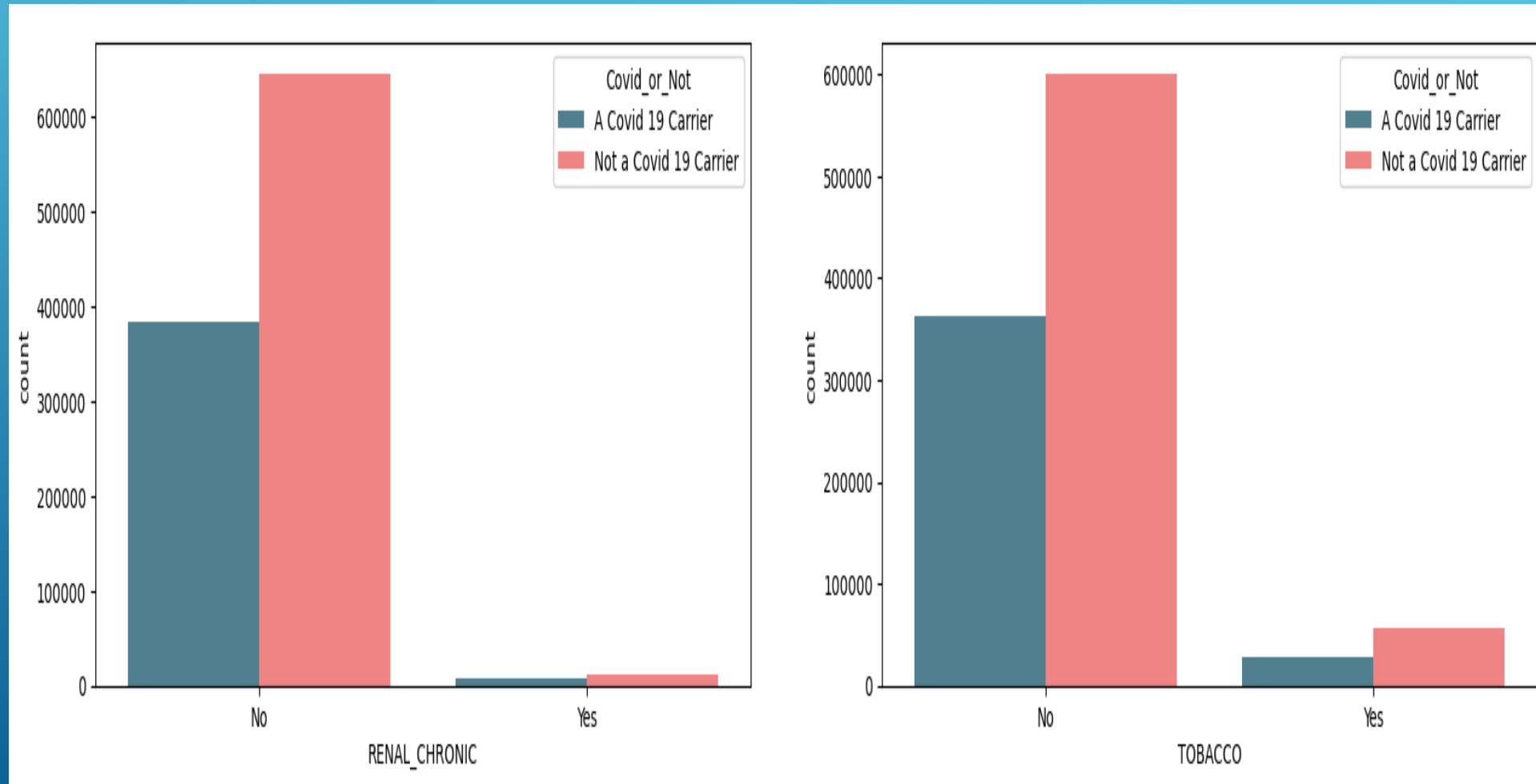
Exploratory Data Analysis

Effect of diseases on Covid



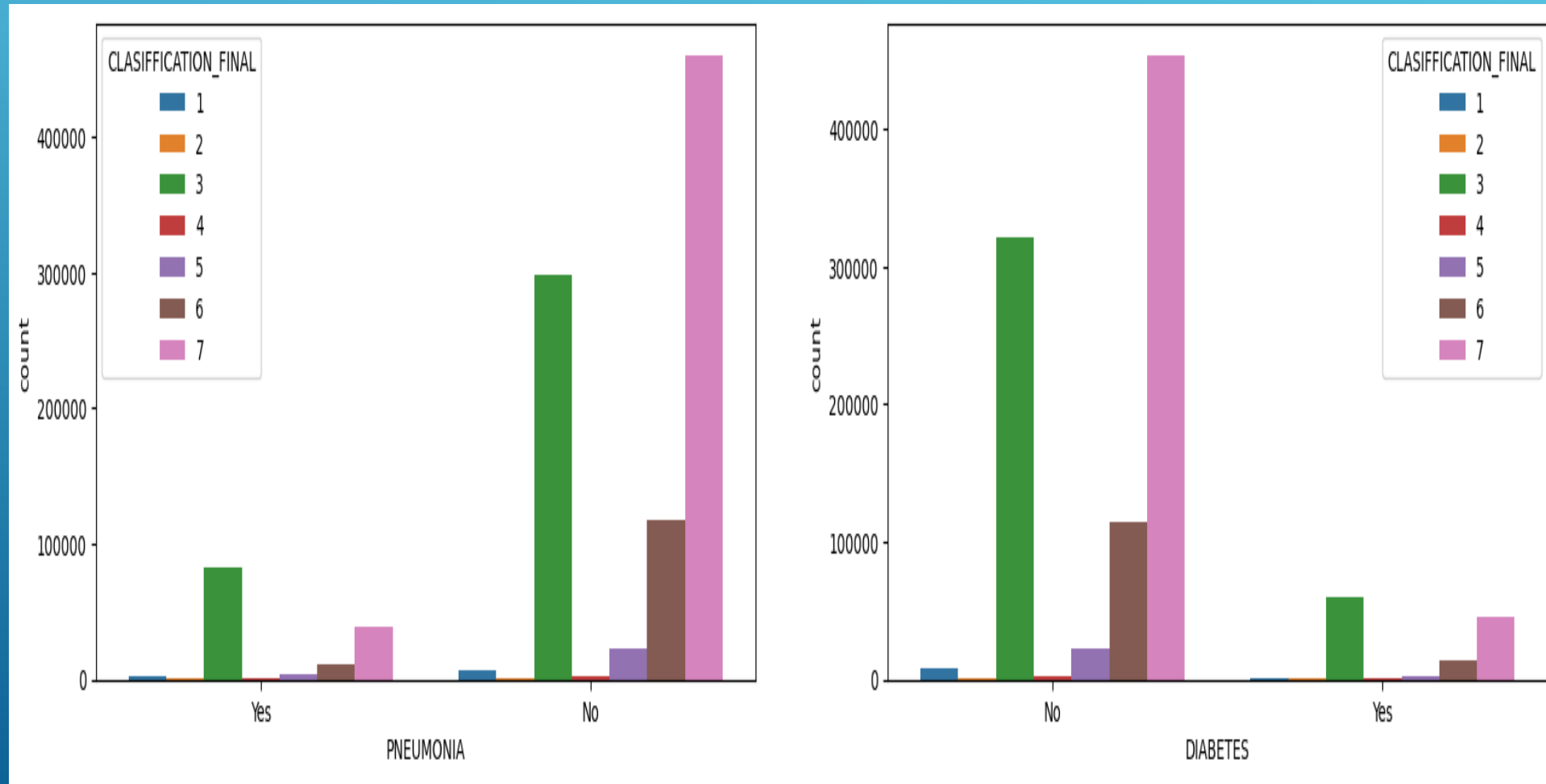
Exploratory Data Analysis

Effect of diseases on Covid



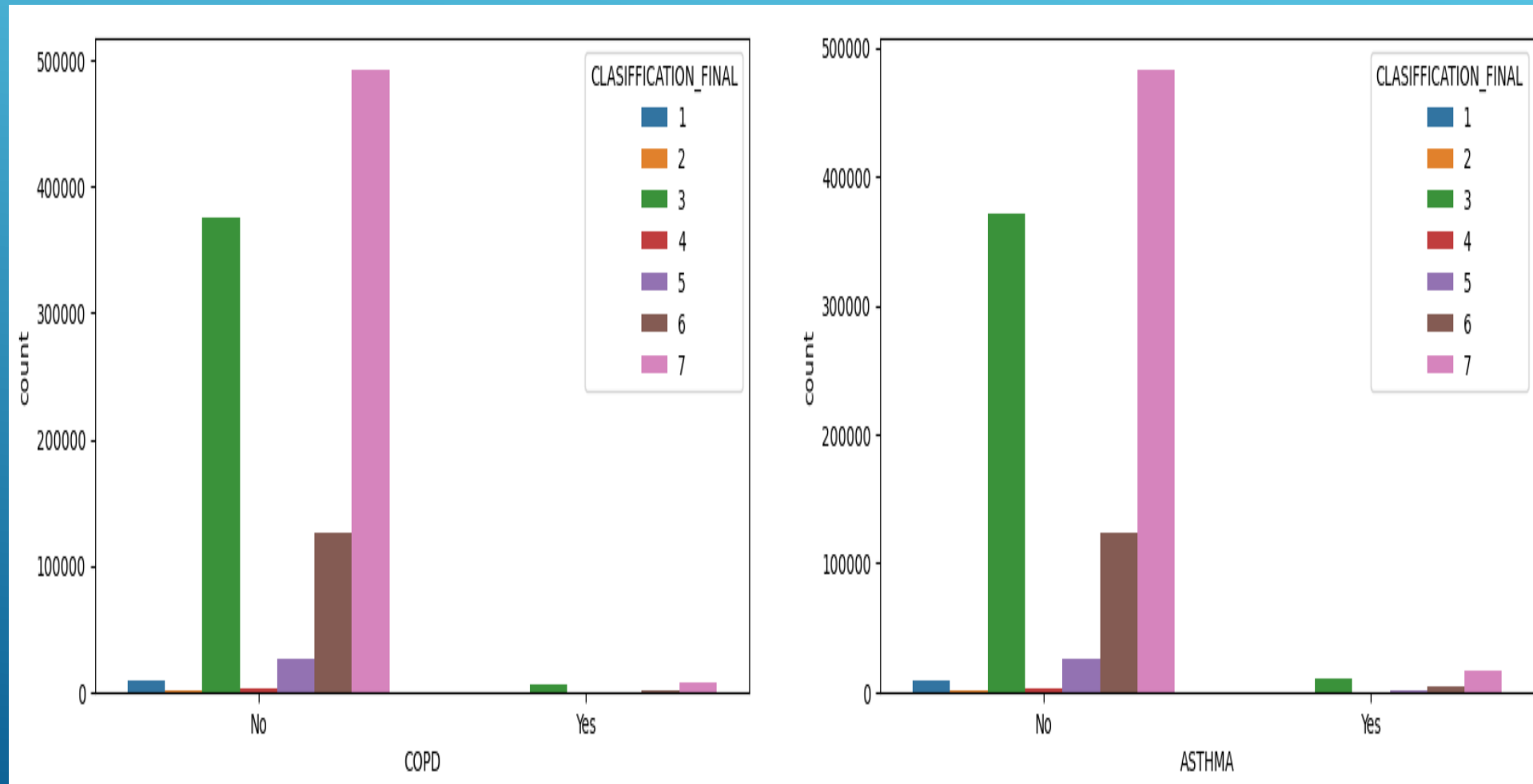
Exploratory Data Analysis

Effect of diseases on Covid Classification



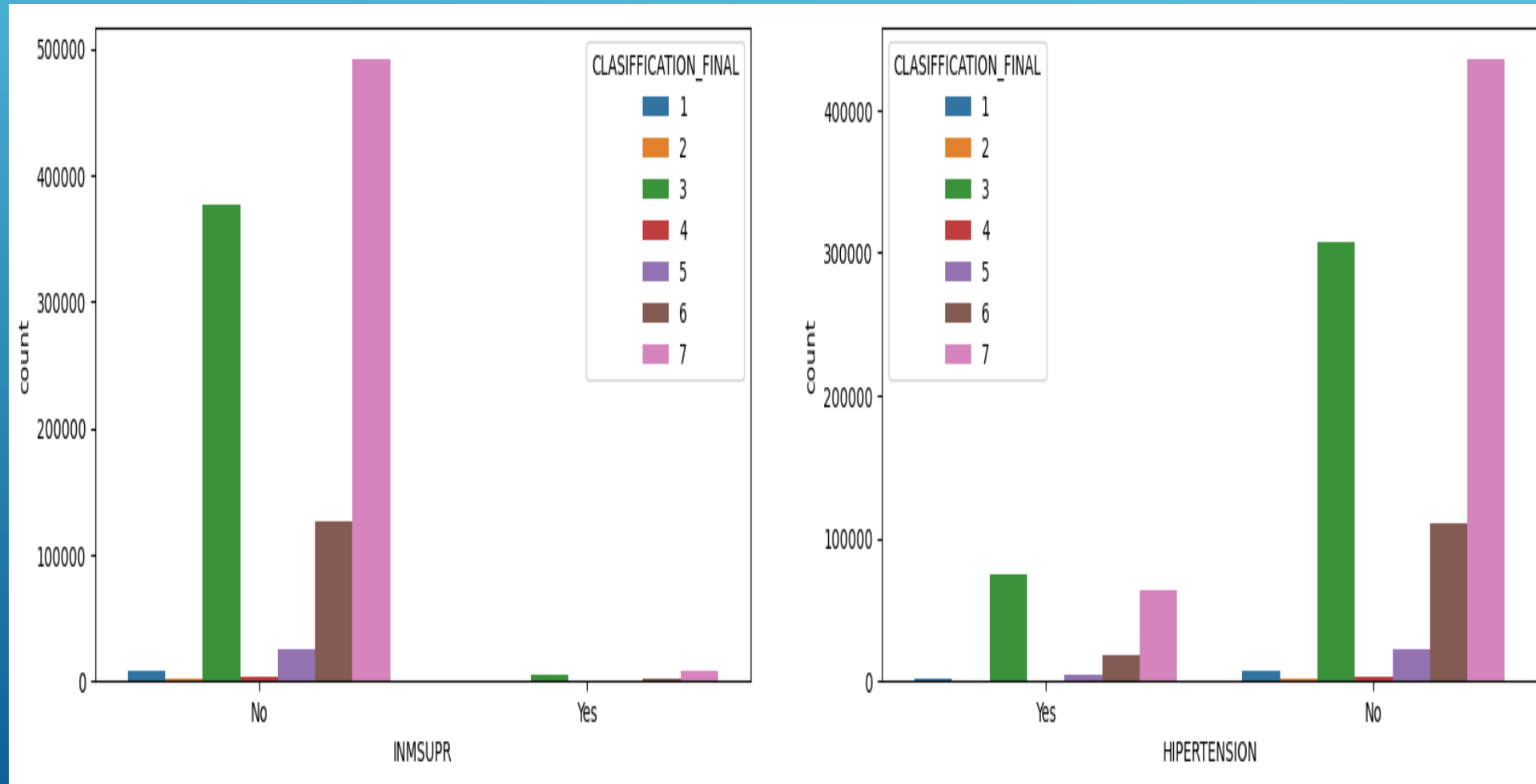
Exploratory Data Analysis

Effect of diseases on Covid Classification



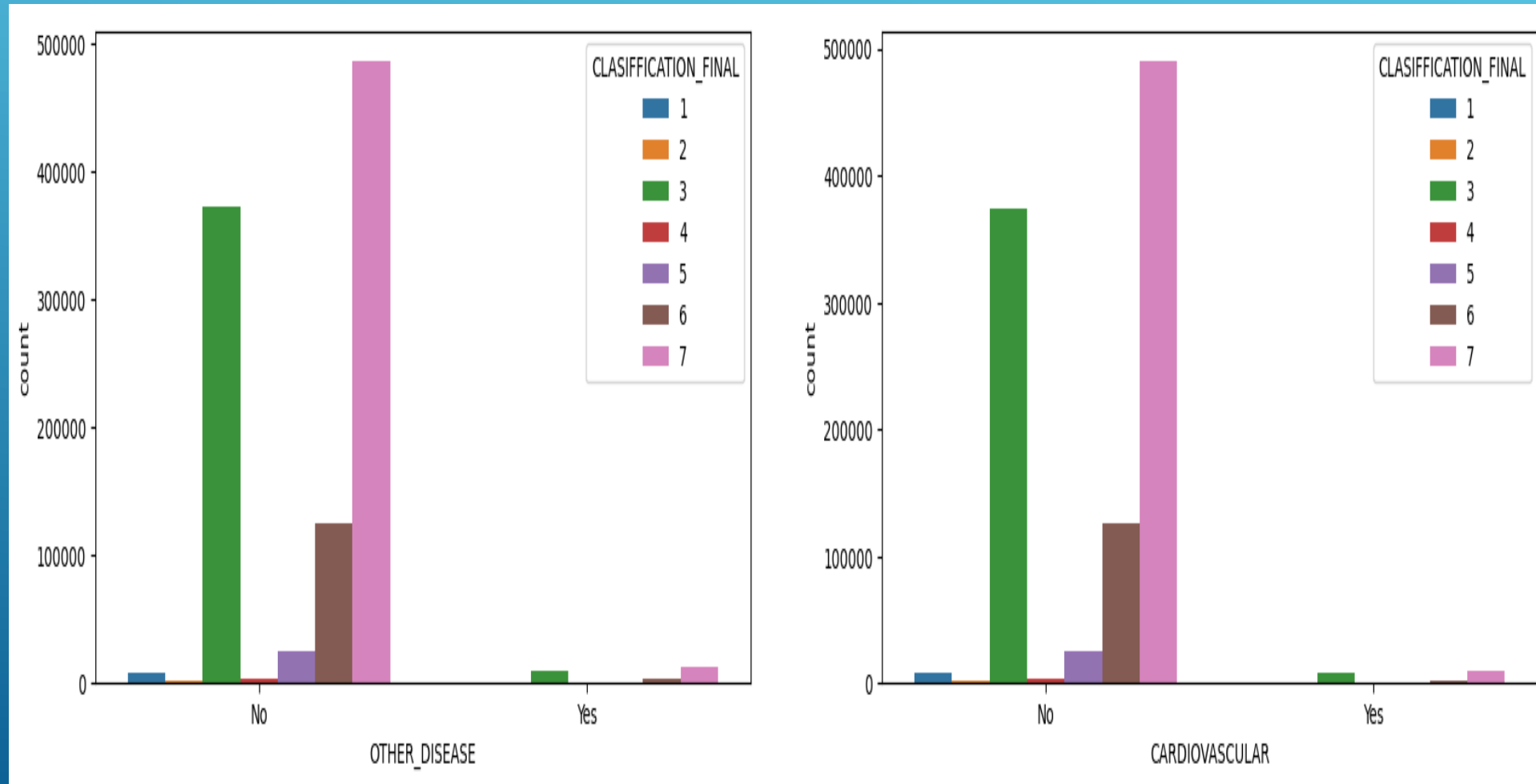
Exploratory Data Analysis

Effect of diseases on Covid Classification



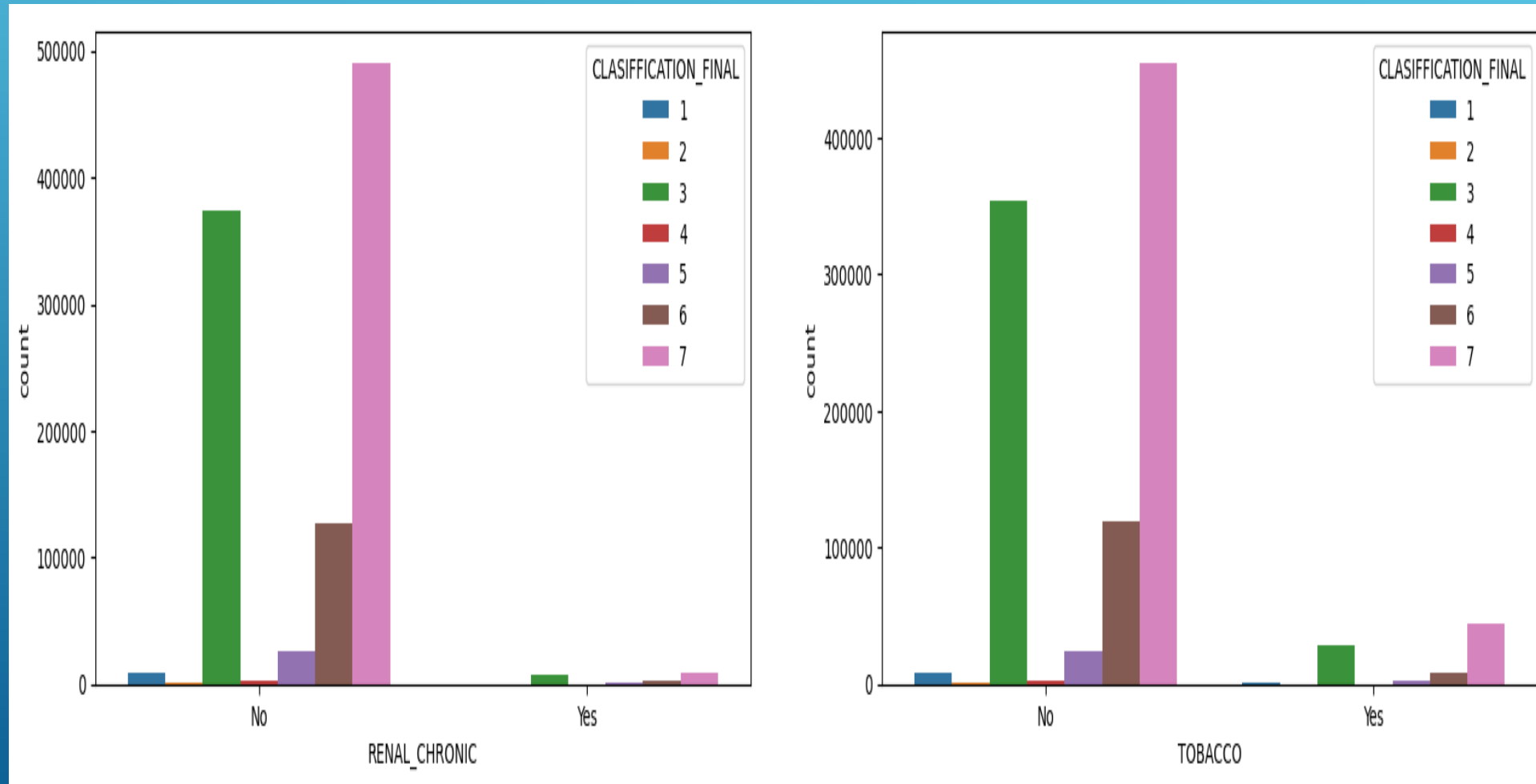
Exploratory Data Analysis

Effect of diseases on Covid Classification



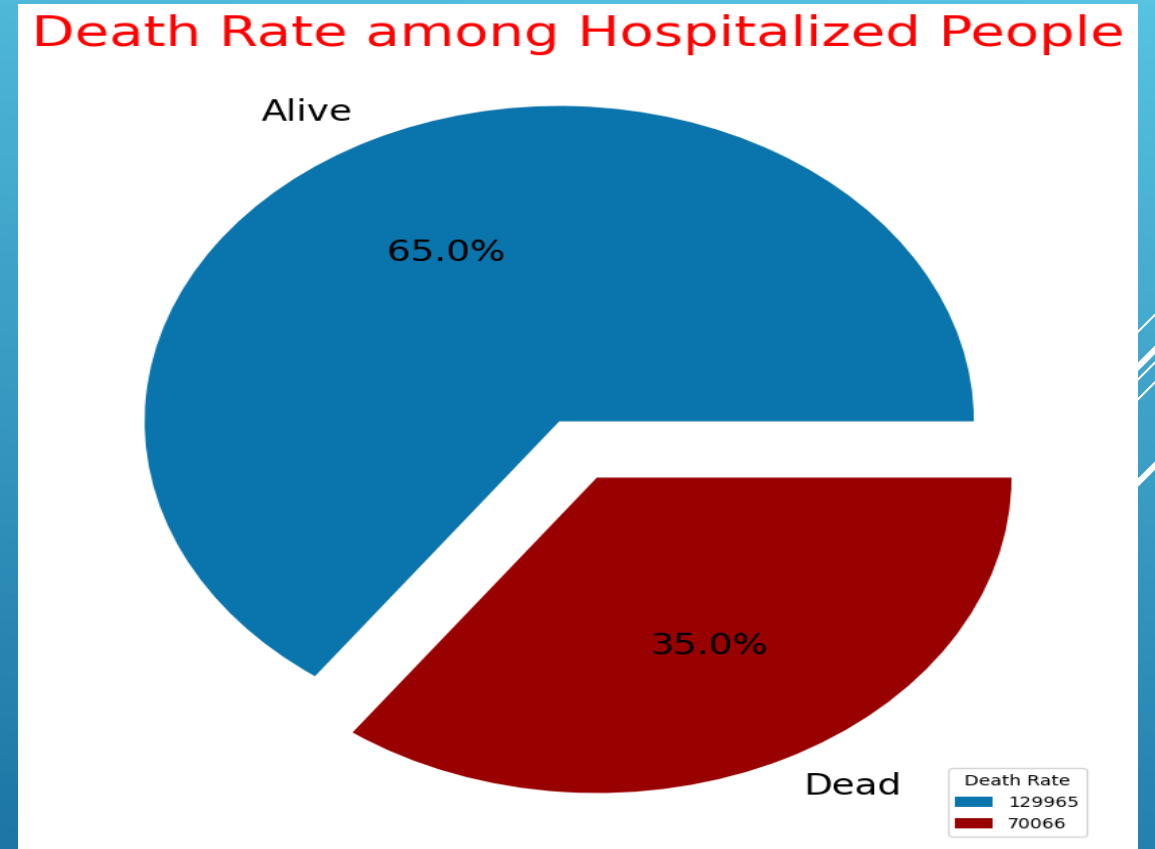
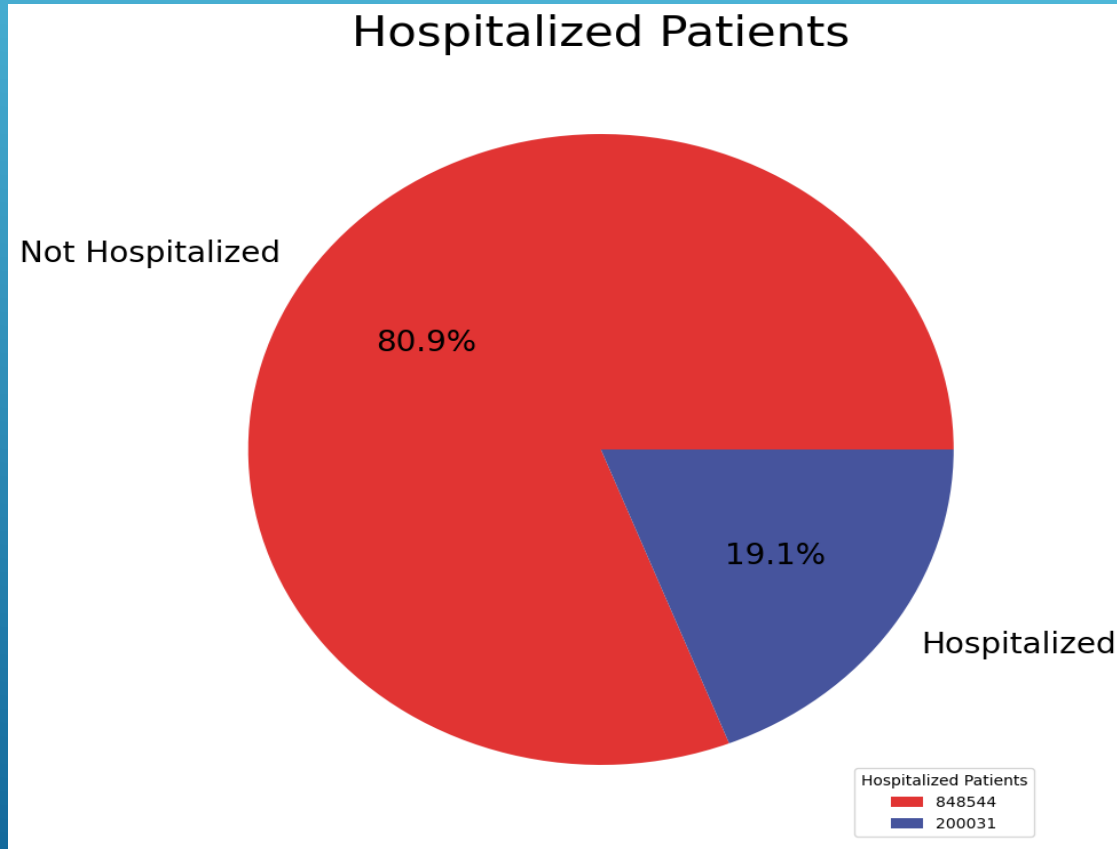
Exploratory Data Analysis

Effect of diseases on Covid Classification



Exploratory Data Analysis

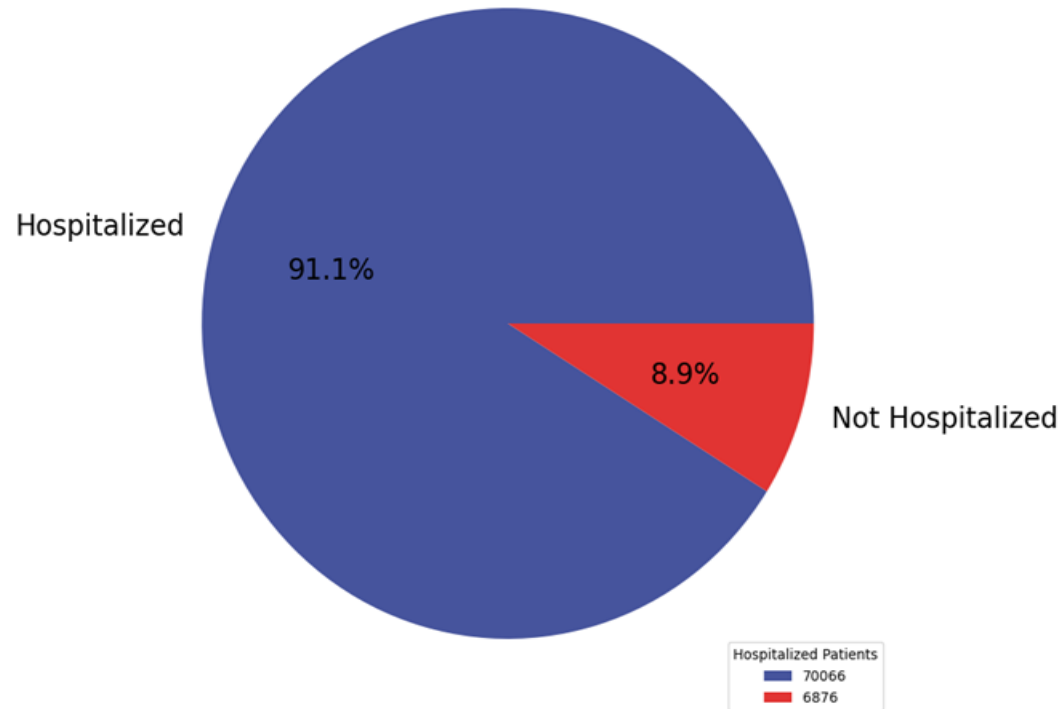
Hospital statistics



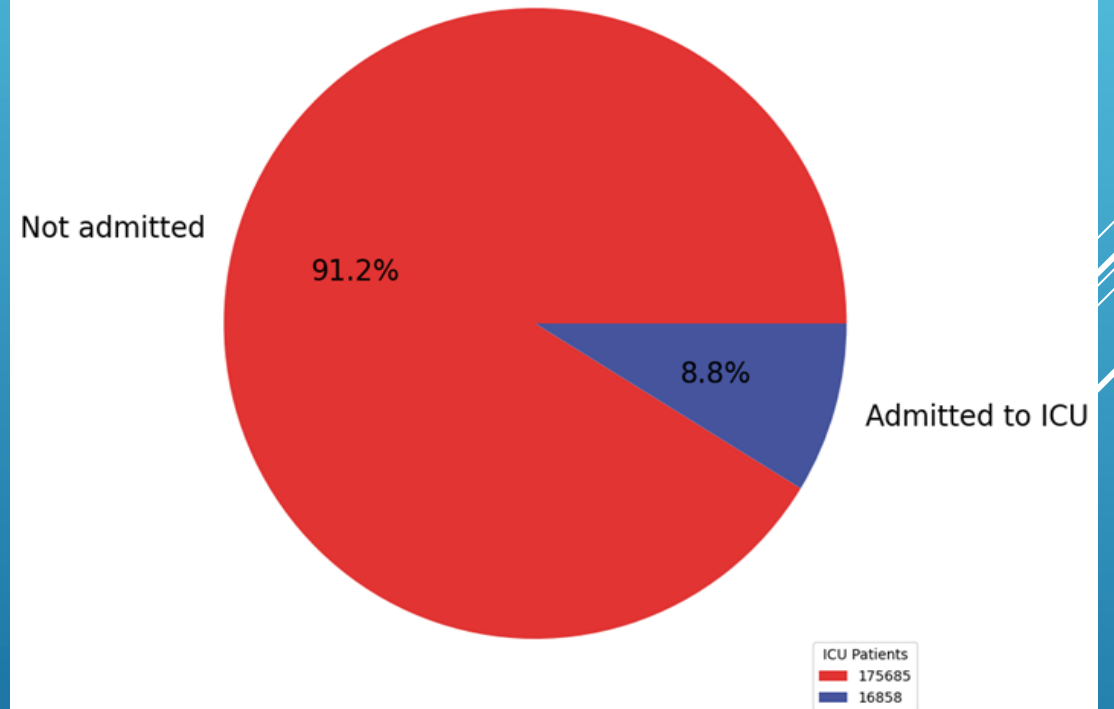
Exploratory Data Analysis

Hospital statistics

Hospitalized Patients Percentage among the Dead



ICU Admitted Patients

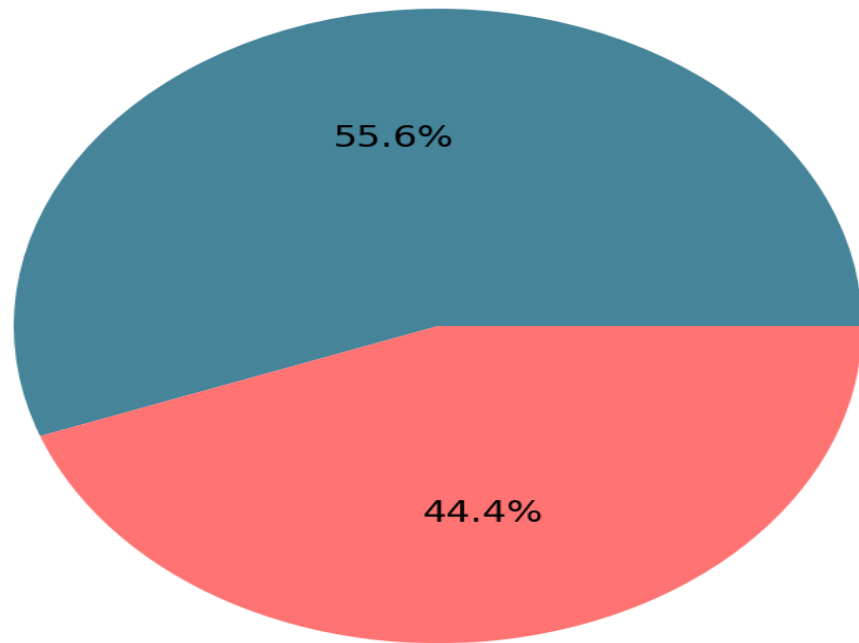


Exploratory Data Analysis

Hospital statistics

Covid Carriers among ICU Patients

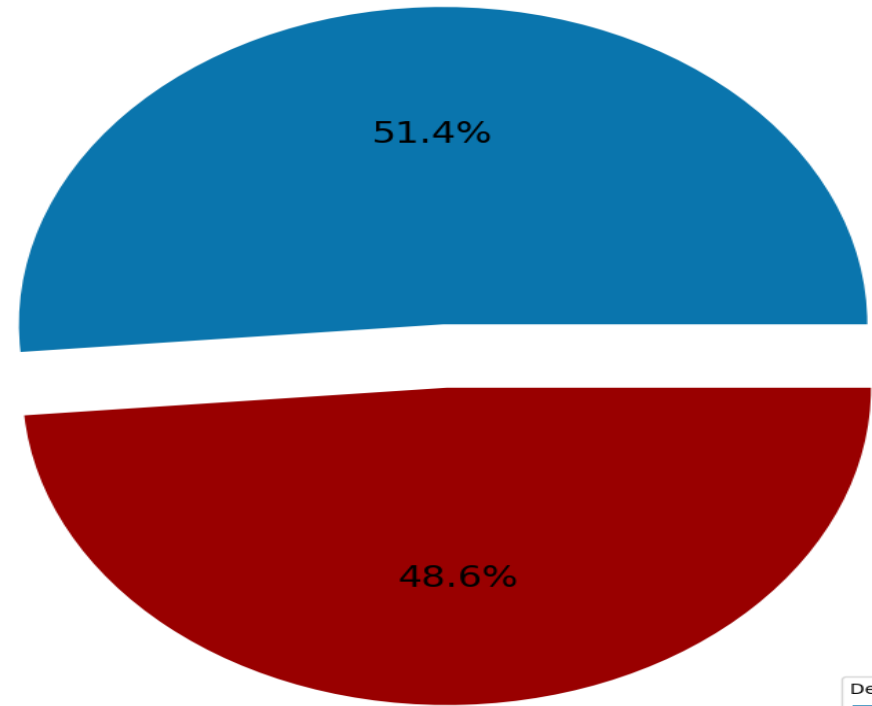
A Covid 19 Carrier



Not a Covid 19 Carrier

Death Rate among ICU Patients

Alive



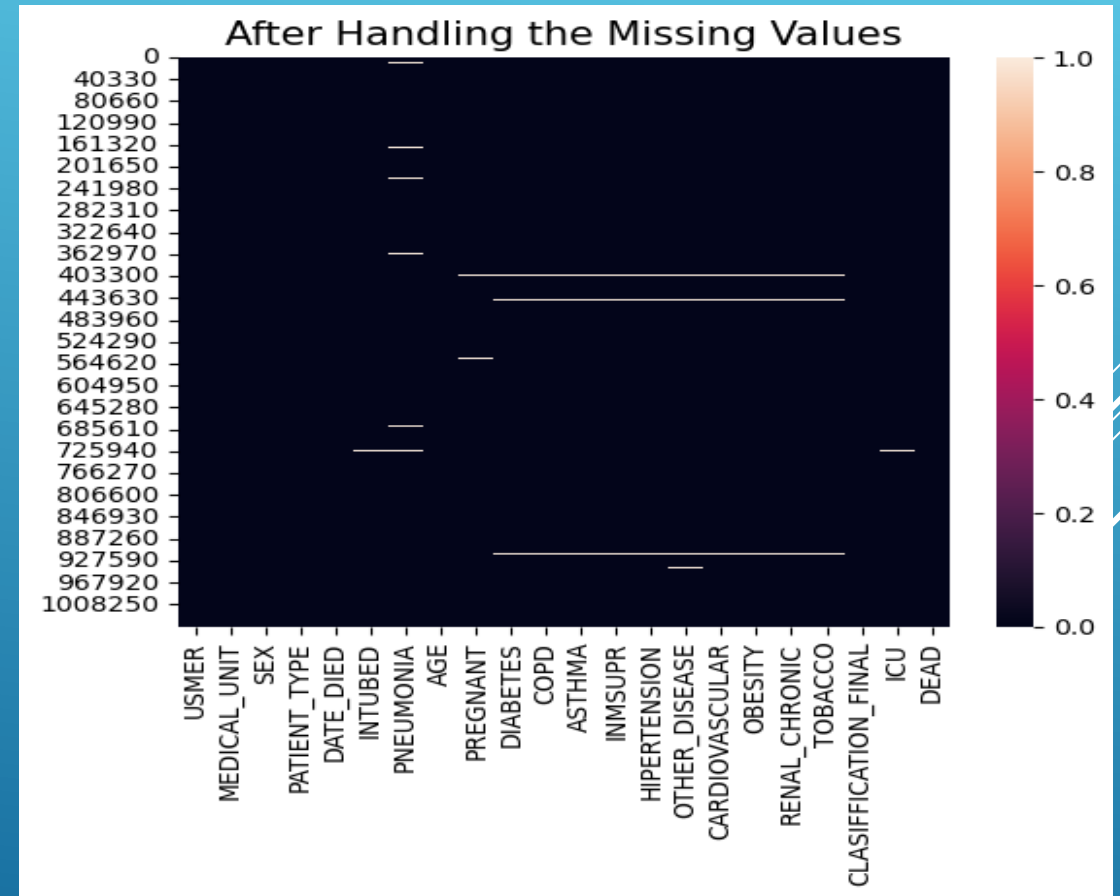
Dead

Data Pre-processing and Problems



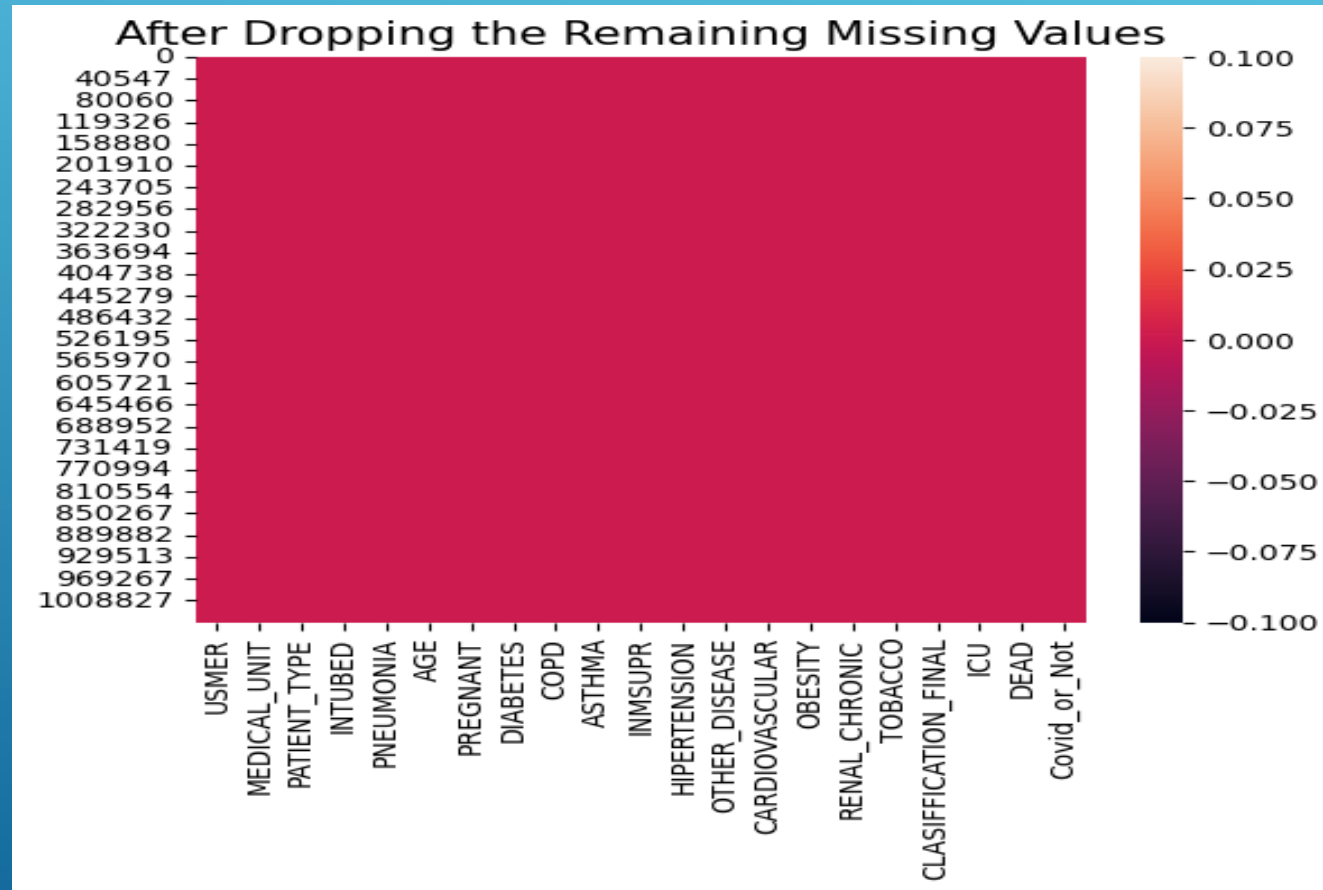
Data Pre-processing and Problems

Handling Missing Values



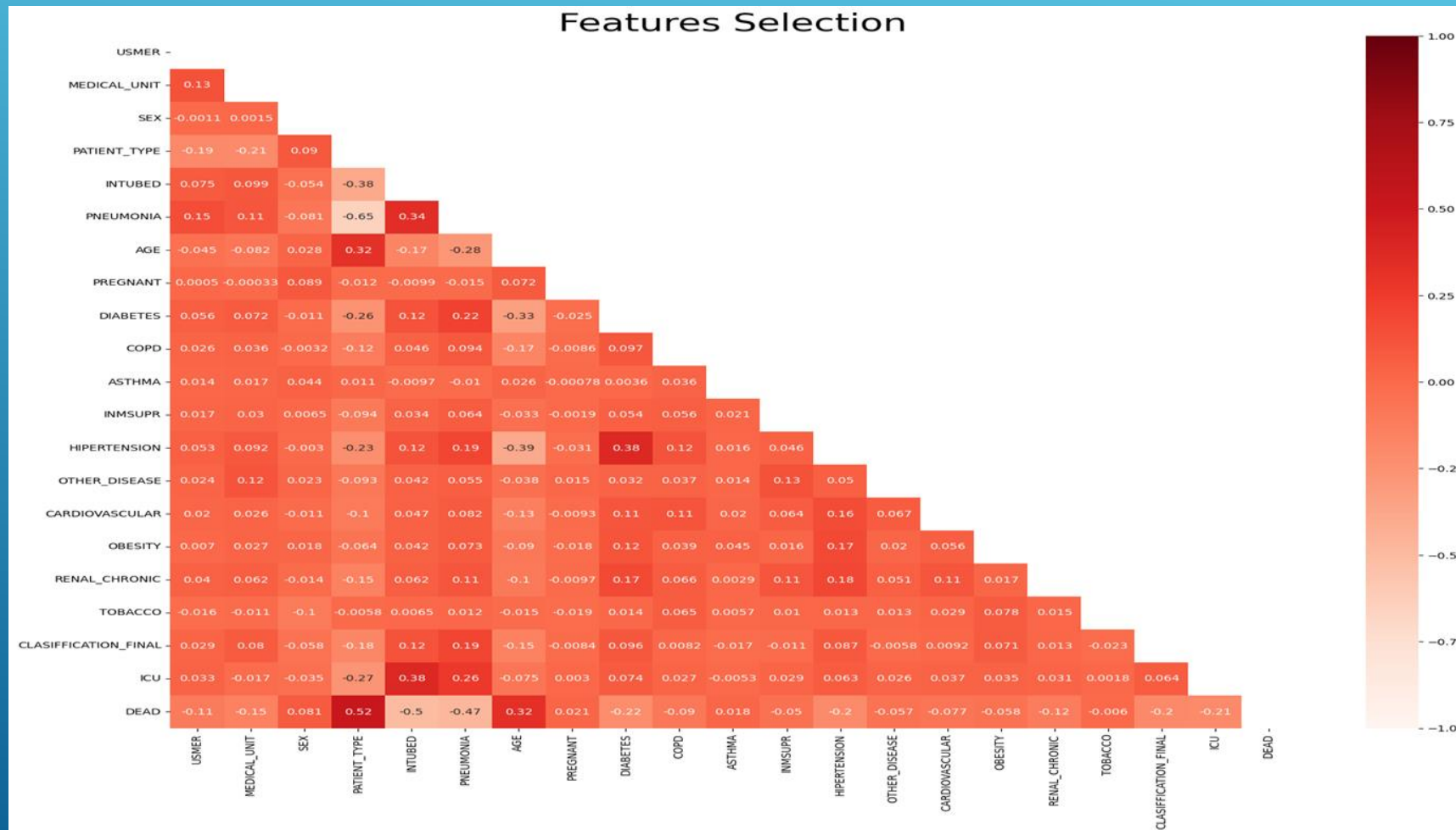
Data Pre-processing and Problems

Handling Missing Values



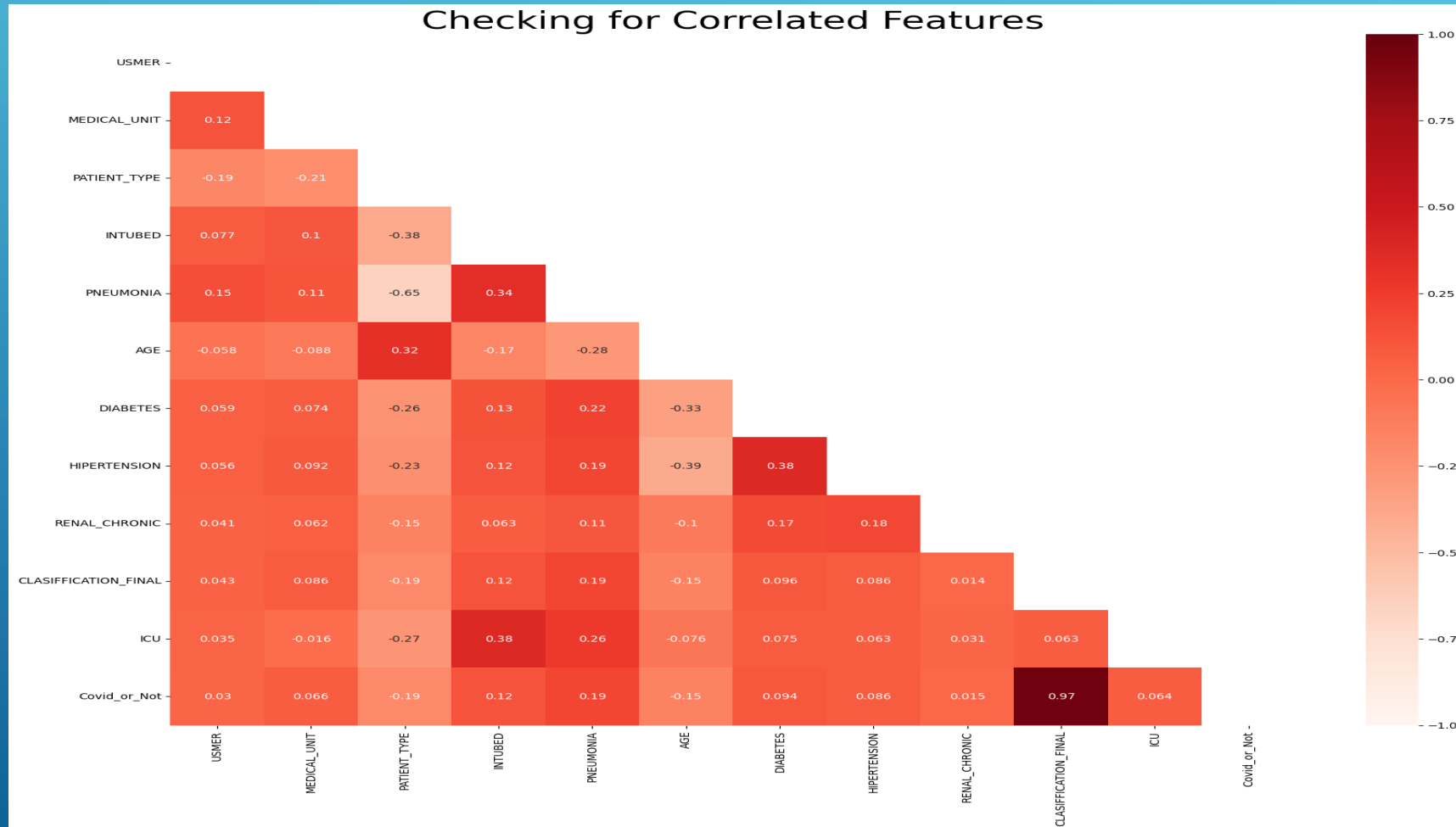
Data Pre-processing and Problems

Features Engineering



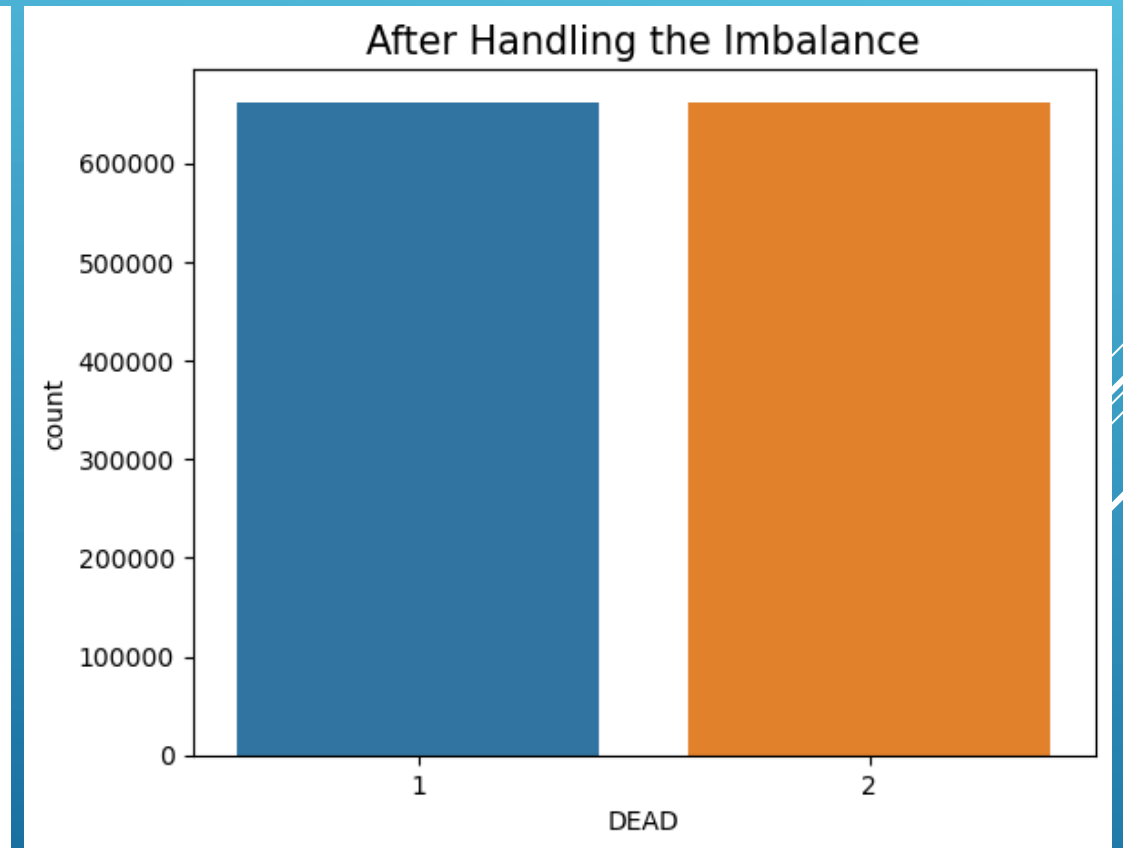
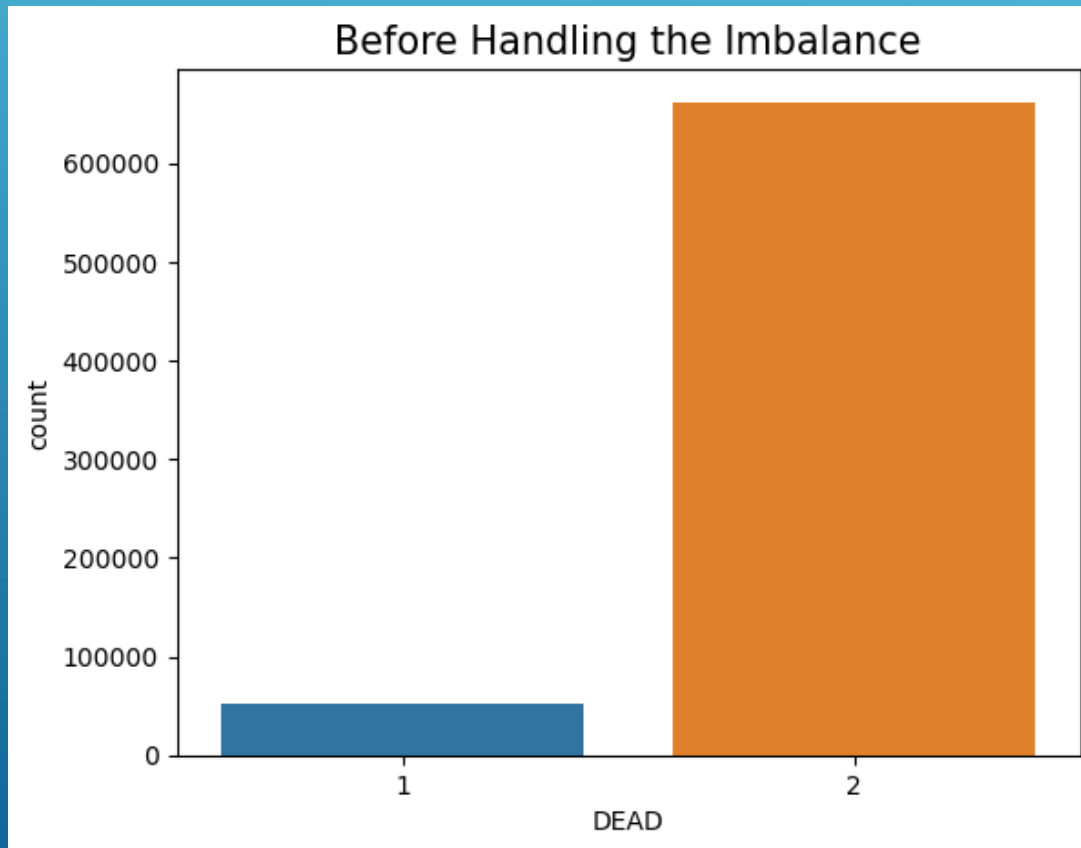
Data Pre-processing and Problems

Features Engineering



Data Pre-processing and Problems

Handling Imbalance



Modeling and Results

Algorithm Used (Model)	Accuracy	Recall (Lowest)
Logistic Regression	90%	90%
Decision Tree	92.3%	66%
Random Forest	91.5%	78%
Naive Bayes	88.1%	88%
XGBoost	92%	83%

Modeling and Results

For more details, here are the classification reports for these models:

Logistic Regression

Logistic Regression Classification Report:

	precision	recall	f1-score	support
Not Dead	0.99	0.90	0.94	284090
Dead	0.41	0.91	0.56	21752
accuracy			0.90	305842
macro avg	0.70	0.91	0.75	305842
weighted avg	0.95	0.90	0.92	305842

Decision Tree

Decision Tree Classification Report:

	precision	recall	f1-score	support
Not Dead	0.97	0.94	0.96	284090
Dead	0.47	0.66	0.55	21752
accuracy			0.92	305842
macro avg	0.72	0.80	0.76	305842
weighted avg	0.94	0.92	0.93	305842

Modeling and Results

For more details, here are the classification reports for these models:

Random Forrest

Random Forest Classification Report:

	precision	recall	f1-score	support
Not Dead	0.98	0.93	0.95	284090
Dead	0.45	0.78	0.57	21752
accuracy			0.92	305842
macro avg	0.71	0.85	0.76	305842
weighted avg	0.94	0.92	0.93	305842

Naive Bayes

Naive Bayes Classification Report:

	precision	recall	f1-score	support
Not Dead	0.99	0.88	0.93	284090
Dead	0.36	0.88	0.51	21752
accuracy			0.88	305842
macro avg	0.68	0.88	0.72	305842
weighted avg	0.94	0.88	0.90	305842

Modeling and Results

For more details, here are the classification reports for these models:

XGBoost

XGBoost Classification Report:

	precision	recall	f1-score	support
Not Dead	0.99	0.93	0.96	284090
Dead	0.47	0.83	0.60	21752
accuracy			0.92	305842
macro avg	0.73	0.88	0.78	305842
weighted avg	0.95	0.92	0.93	305842

Conclusion

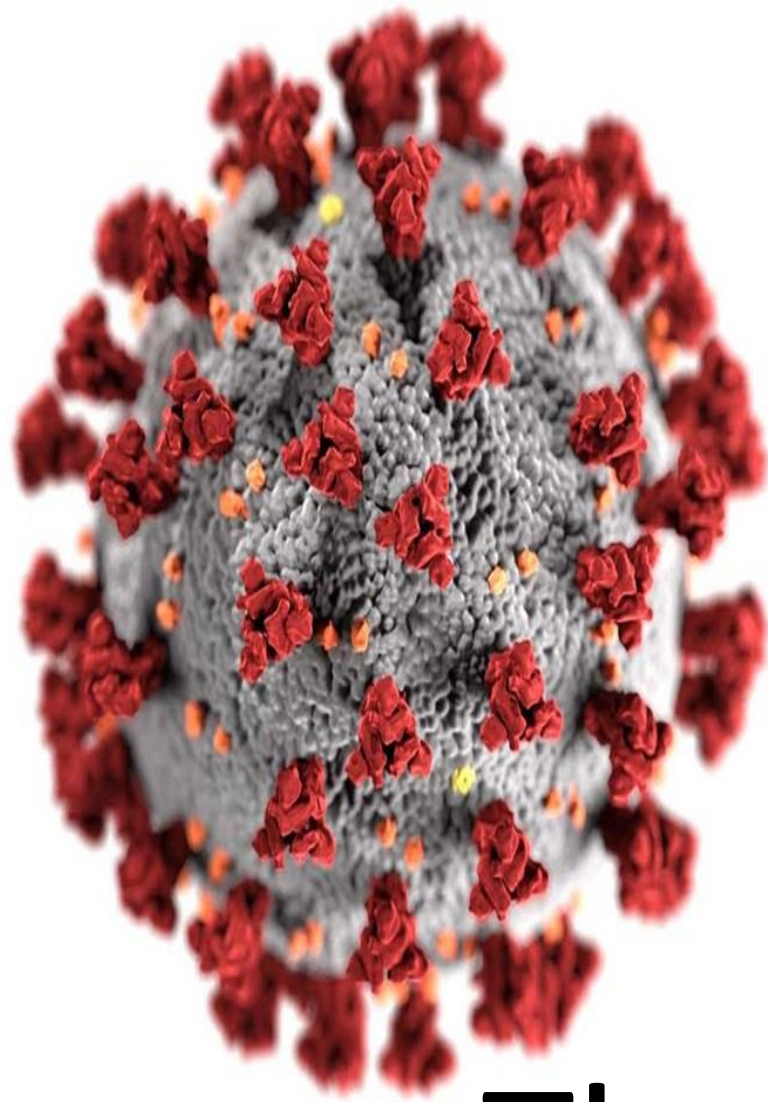
- Unfortunately 7.3% of the total patients have died, with about 70.5% of them were Covid Carriers
- As for the total carriers they were about 37.5% out of the total patients.
- About 14% of those carriers have died.
- We found that age has a significant impact; as it increases chances of getting the virus increases.
- We also found that people who are suffering from obesity are more likely to carry the virus.
- As for pregnancy, we couldn't find any impact on Covid classification.
- We noticed that patients with "Pneumonia", "Hypertension", "Diabetes" and tobacco users have a great chance of getting the virus with "Pneumonia" patients being the most.

Conclusion

- We also noticed that there's a positive correlation between having "Hypertension" and "Diabetes" diseases; as most patients with one of those two diseases are subjected to get the other.
- We saw that among all the patients of these diseases the patients classified with 3rd degree of Covid are the highest by far
- About 19% of the total patients were hospitalized, with a death percentage of 35%.
- The "Pneumonia" disease has the greatest impact on that percentage (35%).
- About 91% of the dead patients were hospitalized
- About 9% out of the hospitalized patients were admitted to the ICU, with about 56% of them being classified as Covid carriers, and with a great percentage of death of about 49%.

Conclusion

- The death was very trending during mid 2020 starting from April up till August.
- As for our modeling, we got the highest accuracy of **92%** using both "**Random Forest**" and "**Decision Tree**" algorithms, but when checking the recall we found that those accuracies are misleading. So, we settled with the "**Logistic Regression**" that achieved great scores regarding both accuracy and recall with about **90%**.



Thank You!