# Diabetes Early Detection and Risk Factors Ramón Romero Intelligent Systems

## Introduction

Since 2000, diabetes mellitus is the first cause of death in women and the second in men in México.[1]

The diabetes is a deceseas where the glucose in blood is discomposed this is because of the lack or unoptimized use of the insulin, an hormone which regulates the metabolism of carbohydrates, fats and protein by promoting the absorption of nutrients to the cells[2][3]

#### **Purpose**

Develop a diagnostic evaluation tool which can lead to develop consciousness in the population of Mexico about its actual situation and take actions in order to solve it.

#### The dataset

Based on data retrieved from Health Services of the State of Querétaro (SESEQ) from its Department of Epidemiology, the model will be generated by trying different supervised learning algorithms to find the best approach to the factors and its weight related to the detection of diabetes.

For this project, advice from doctors with field experience in the area of early detection of chronic diseases and epidemiological factors was implemented.



## Research

After reading the similar cases where Machine Learning has been useful in order to predict the possibility, a model that has been useful with a decent level of prediction has been the Probabilistic Neural Network, proposed by Specht in 1990 [4].

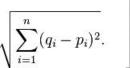
All probabilistic models have a similar structure to the one presented by Specht:

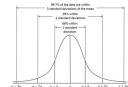
## Input layer

• Where the data is normalized.

## Pattern layer

- Based on the input received from the input layer, the data is evaluated in order to find likelihood inside each of the elements of the dataset.
- The most common of the likelihood metrics is the **Euclidean distance** (RBF Kernel) based on a **Gauss Standard Distribution**





## • Summation Layer

 From the weight generated from the pattern layer, it sums the value of each of the features and its corresponding weights

# Output layer

 Based on the summation layer, it is usually a max function where the output is the class or label with the most likelihood.

# **Development**

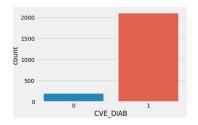
## **Data Analysis and Encoding**

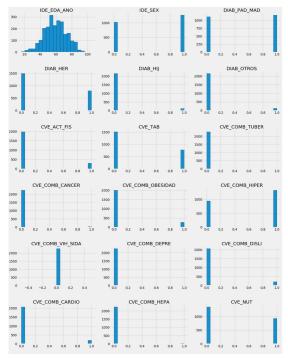
The purpose of the info is to have a medical record of the people who attends to the public hospitals in the city, because of that, features as the name or social number were removed.

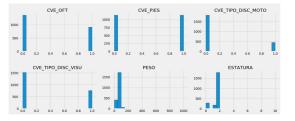
The remaining features were the following.

- Age
- Sex
- Weight
- Height
- Diabetic Familiars
- Addictions and habits
- Chronical Diseases
- Disabilities

## **Label Distributions**







#### Models

Looking for the best model to predict, the following models were tested.

- Non-probabilistic binary classifiers
  - K Nearest Neighbor (Euclidean)
  - o DecisionTreeClassifier
  - Supporting Vector Machines
    - OneClass (Outlier Detection)
    - Linear (Line)
    - Radial (Euclidean)
- Probabilistic binary classifiers
  - o Logistic Regression

# **Implementation**

The data set was splitted in 2 subsets, the training set and test set (80 % and 20%)

The learning implementation was done by using python and the scikit-learn toolbox, with the following initial results

#### Accuracy

Linear Svm	0.917688
Radial Svm	0.917688
Logistic Regression	0.917688
KNN	0.900175
Decision Tree	0.856392
One Class SVM	0.374781

In order to improve the models, another algorithm was added to the sequence: Random Forest Classifier, which is in some point of view similar to a Decision Tree with the main difference that it takes random attributes from the data set in order to find the "nodes" with more impact on the final results.

This is the impact that each attribute has on the final output

IDE EDA ANO	0.239019
PESO	0.199133
ESTATURA	0.172647
CVE_PIES	0.038522
DIAB_PAD_MAD	0.036138
CVE_TAB	0.034914
IDE_SEX	0.034190
CVE_COMB_HIPER	0.033660
CVE_TIPO_DISC_VISU	0.024768
DIAB_HER	0.024485
CVE_TIPO_DISC_MOTO	0.020350
CVE_NUT	0.019867
CVE_COMB_OBESIDAD	0.019645
CVE_OFT	0.018554
CVE_COMB_CARDIO	0.017544
CVE_ACT_FIS	0.015581
DIAB_OTROS	0.013441
CVE_COMB_DISLI	0.010975
CVE_COMB_HEPA	0.009740
DIAB_HIJ	0.006411
CVE_COMB_CANCER	0.006056
CVE_COMB_DEPRE	0.003750
CVE_COMB_TUBER	0.000609
CVE_COMB_VIH_SIDA	0.000000

For the next implementation was only considered the first three attributes as it they have the most relevant impact on the output.(height, weight and age)

	New Accuracy	Accuracy	Increase
Linear Svm	0.917688	0.917688	0.000000
Radial Svm	0.917688	0.917688	0.000000
Logistic Regression	0.917688	0.917688	0.000000
KNN	0.910683	0.900175	0.010508
Decision Tree	0.858144	0.870403	-0.012259
One Class SVM	0.478109	0.374781	0.103327

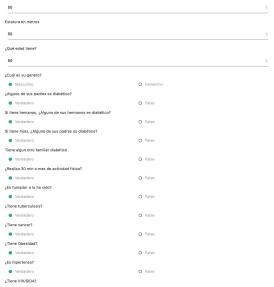
## **Deployment**

After training the models, the weight and normalizers are stored. (learn.py -> outputs)

This models are useful for us as can be easily re-implemented in another form, in this case the models will be used as back-end for an app developed using Flask.

The app consist of 2 elements-views:

# • A test: Peso en KG



#### The results and recommendations

Based on selected logistic regression

¿Cómo puedo prevenir o retrasar la aparición de la diabetes tipo 2?

Si está en riesgo de desarrollar diabetes, es posible que pueda evitarla o retrasarla. La mayoría de las cosas que debe hacer implican un estilo di vida más saludable. Si realiza estos cambios, obtendrá además otros beneficios de salud. Puede reducir el riesgo de otras entermedades y probablemente es esienta mejor y tenga más enterpla. Los cambios son:

Perder peso y mantenerto. El control del peso es una parte importante de la prevención de la diabetes. Es posible que pueda prevenir o retrasar a diabetes al perder entre el cinco y el 10 por Centro de su pesa actual. For ejembo, si pesa 200 libras (300 Tibras), su adejetivo serás perder entre personar entre el control de la composición de la composi

es processás

si processás si proce

NIH: Instituto Nacional de la Diabetes y las Enfermedades Digestivas y Renales

## **Observations and improvements**

The logistic regression result is shown as an output to the test because different to the other algorithms it output us probability distribution, not only the binary classification.(Result for other models are shown on the bottom part of the results page)

By the show in the tests, and also live testing of the app, it seems that the mexican have an added bias to the probability of being diabetic, it is because of the living style (habits and food)

Having a bigger data set may improve the knowledge of the less important features and its impact.

Based on the medical practice, the Random forest algorithm for feature selection correctly predicted the most important aspect to evaluate a possible diabetic patient as were the height, weigh and age. Aspects used to calculate body mass index and it classification and predisposition to also other chronic diseases.

## From presentation:

The Outlier was the worst of the models it seems that the data is too similar to find a shape that can separate the ones who are diabetic to the ones which are not

Ridiculous examples that would suggest a clear predisposition to diabetes such as extreme high weight, age and short height, was classified as outlier as they seem not similar to the common population.

#### References

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