

# TEMPORAL FEATURE-DRIVEN TECHNIQUE FOR PRECISION MEDICINE OF INDIVIDUALS AT HIGH-RISK FOR STAGE 3 TYPE 1 DIABETES

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## BACKGROUND

Early identification of individuals at high risk of developing Type 1 diabetes (T1D) is essential for preventing or delaying the clinical onset of the disease. We propose a novel feature-driven technique to identify high-risk individuals for T1D.

## METHODS

We selected 7100 participants (291 developed T1D) over the age between 365 days and 5159 days and more than 5 visits, from the TEDDY cohort [1]. Genetic, demographic, and physical features were considered for analysis. A probabilistic risk-score which is a cumulative, non-decreasing and bounded function of 'autoantibody persistence over time' is proposed (Figure 1). The risk-score was computed for T1D-positive and T1D-negative participants using bootstrap-resampling (Table-1). A time-to-event analysis was performed using risk-score and dataset-specific features. The baseline model was Cox-Proportion Hazard (CPH) Model, which was compared with two non-linear models: Decision Tree (DT) Survival Model, and Random Survival Forest (RSF). Uno's Concordance Index (CI), Mean Temporal Area-under-the-curve (AUC(t)) and Integrated Brier Score (IBS) were used for evaluation.

Train-Test split was 80-20, and Monte-Carlo cross validation ( $n=100$ ) (MCCV) was used for evaluation (Table-2).

$$Score(x^{ab}, T) = \sum_{t=1}^{t=T} x_t^{ab} \cdot f(x_t^{ab}) \cdot f(t) \text{ where,}$$
$$ab \in \{GAD, MIAA, IA2A, ZnT8A, 2^+\}$$

$$x_t^{ab} = \begin{cases} 0, & \text{if } ab \text{ is not persistent at time } t \\ 1, & \text{if } ab \text{ is persistent at time } t \end{cases}$$

$$f(x_t^{ab}) = \Pr(x_t^{ab} | x_{t-1}^{ab}) \text{ i.e., conditional persistence probability at } t$$

$$f(t) = \Pr(t_{previous} \leq t \leq t_{current}) \text{ i.e., Likelihood of age between visits}$$

**Figure 1.**  $Score(x^{ab}, T)$  is the risk-score for individual  $x$  at time  $T$  for autoantibody  $ab$ . Time is measured in days windows.  $2^+ = 2$  or more autoantibodies were observed.

## CONCLUSION

This study proposes a novel feature-driven technique to differentiate high-risk population for Stage 3 type 1 diabetes. The technique is based on treating autoantibody persistence as a temporal phenomenon and the development of probabilistic risk-score that accounts for the variability in autoantibody persistence. The model developed in this study can be used for screening and early detection of Stage 3 type diabetes.

## RESULTS

	T1D-Negative	T1D-Positive
Autoantibody (AAB)	Mean-Score $\pm$ variance	Mean-Score $\pm$ variance
GADA	0.007 $\pm$ 0.049	<b>0.124</b> $\pm$ 0.161
IAA	0.0023 $\pm$ 0.024	<b>0.054</b> $\pm$ 0.105
IA-2A	0.0013 $\pm$ 0.016	<b>0.036</b> $\pm$ 0.071
ZnT8A	0.001 $\pm$ 0.012	<b>0.022</b> $\pm$ 0.048
Multi-AAB	0.0019 $\pm$ 0.019	<b>0.051</b> $\pm$ 0.091

**Table-1:** Mean Risk-Score  $\pm$  variance for T1D-Negative and T1D-Positive individuals. The Mean risk-score is computed using bootstrap resampling ( $n=100,000$ ).

Model \ Metric	CPH	DT	RSF
CI	0.975 $\pm$ 0.015	0.916 $\pm$ 0.024	<b>0.988</b> $\pm$ 0.003
AUC(t)	0.988 $\pm$ 0.009	0.954 $\pm$ 0.014	<b>0.994</b> $\pm$ 0.002
IBS	0.336 $\pm$ 0.123	0.012 $\pm$ 0.002	<b>0.009</b> $\pm$ 0.001

**Table-2:** Model performance of CPH, DT and RSF. We report Mean Performance  $\pm$  standard error estimated using Monte Carlo Cross Validation ( $n=100$ ) across test-set.

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