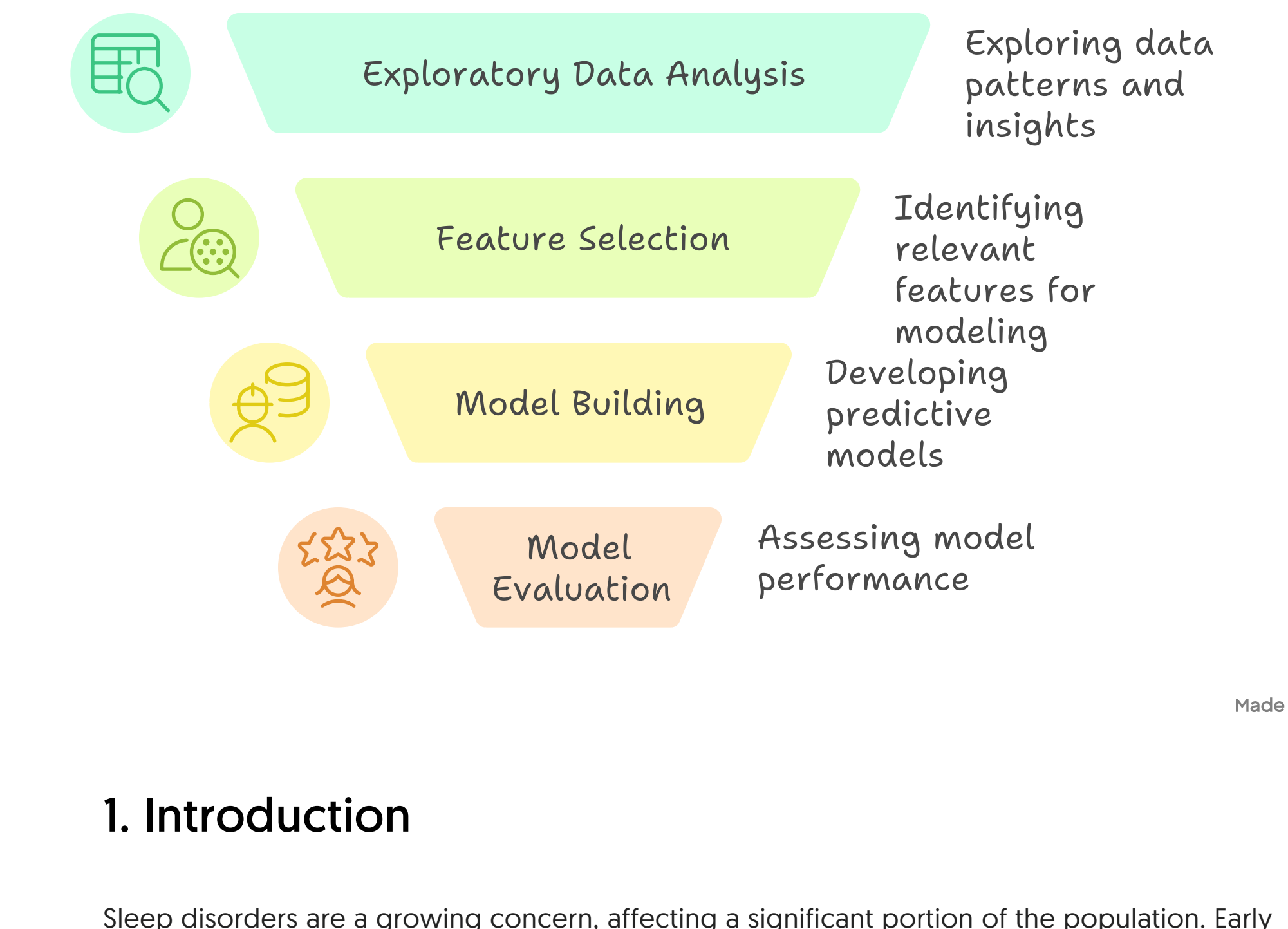




Predictive Modeling of Sleep Disorders

This project focuses on developing a predictive model for identifying various sleep disorders, such as insomnia, sleep apnea, and hypersomnia. By leveraging health and behavioral data, the model aims to provide healthcare professionals with actionable insights into the factors influencing sleep health and to facilitate early detection of these disorders. The project encompasses data preprocessing, exploratory data analysis (EDA), feature selection, and the implementation of classification models like Logistic Regression and Random Forest. Model performance is rigorously evaluated using metrics such as accuracy and confusion matrices.

Predictive Modeling Process for Sleep Disorders



1. Introduction

Sleep disorders are a growing concern, affecting a significant portion of the population. Early detection is crucial for effective management and treatment, but it often poses a challenge. This project addresses this issue by developing a predictive model that can identify individuals at risk of developing sleep disorders based on their health and behavioral characteristics.

2. Problem Statement

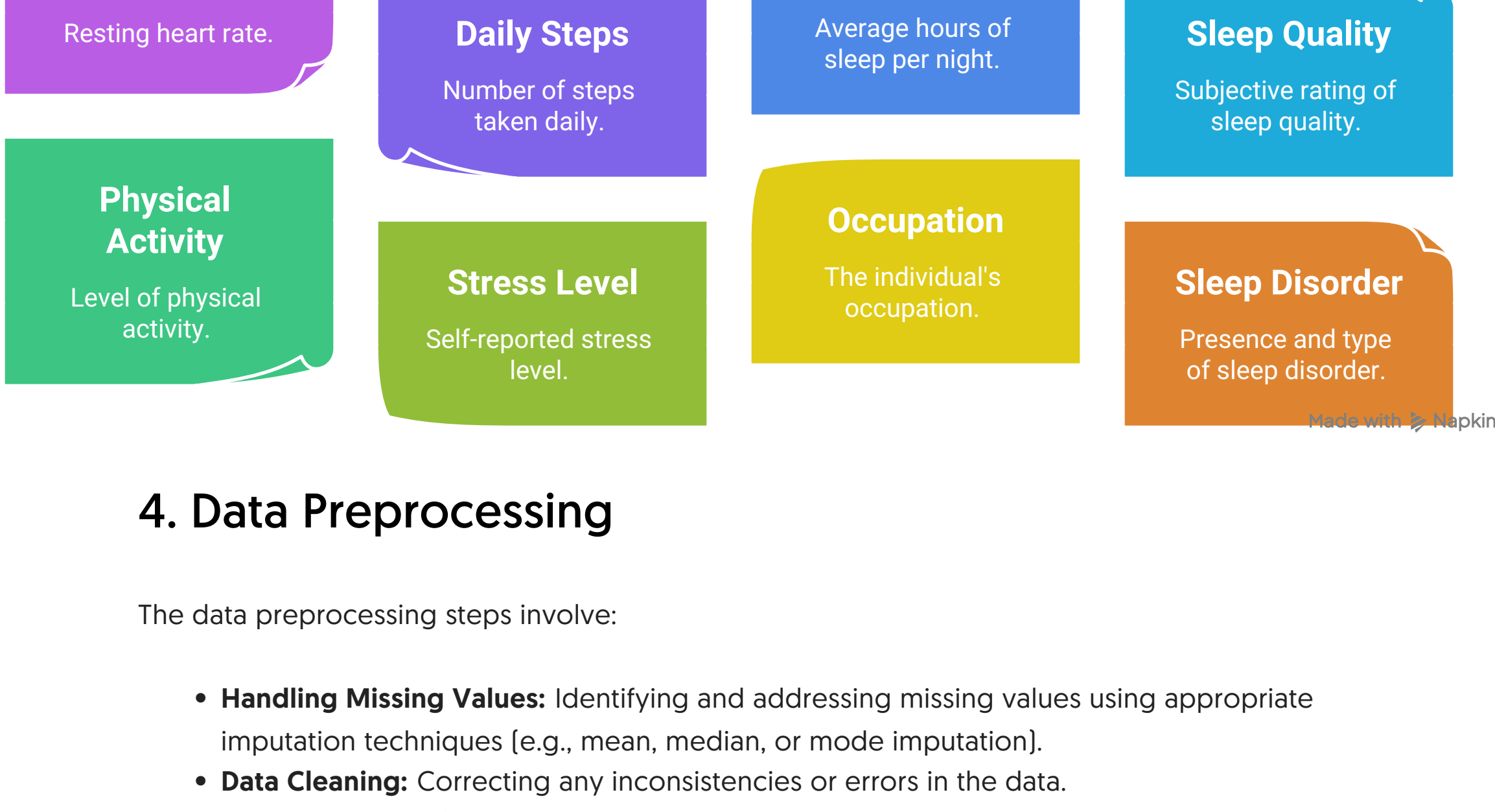
The primary problem is the difficulty in early detection of sleep disorders. Many individuals remain undiagnosed for extended periods, leading to delayed treatment and potential health complications. The goal is to create a model that can accurately predict the likelihood of a sleep disorder using readily available data, thereby enabling timely intervention and improved patient outcomes.

3. Data Acquisition and Description

The dataset used in this project contains a variety of features related to individuals' health and behavior. These features include:

- Age**: The age of the individual.
- Gender**: The gender of the individual [Male/Female].
- BMI**: Body Mass Index, a measure of body fat based on height and weight.
- Blood Pressure**: Systolic and diastolic blood pressure readings.
- Heart Rate**: Resting heart rate.
- Daily Steps**: Number of steps taken daily.
- Sleep Duration**: Average hours of sleep per night.
- Sleep Quality**: Subjective rating of sleep quality (e.g., on a scale of 1-10).
- Physical Activity Level**: Level of physical activity (e.g., Sedentary, Lightly Active, Moderately Active, Very Active).
- Stress Level**: Self-reported stress level (e.g., on a scale of 1-10).
- Occupation**: The individual's occupation.
- Sleep Disorder**: The target variable, indicating the presence and type of sleep disorder (Insomnia, Sleep Apnea, Hypersomnia, None).

Health Factors

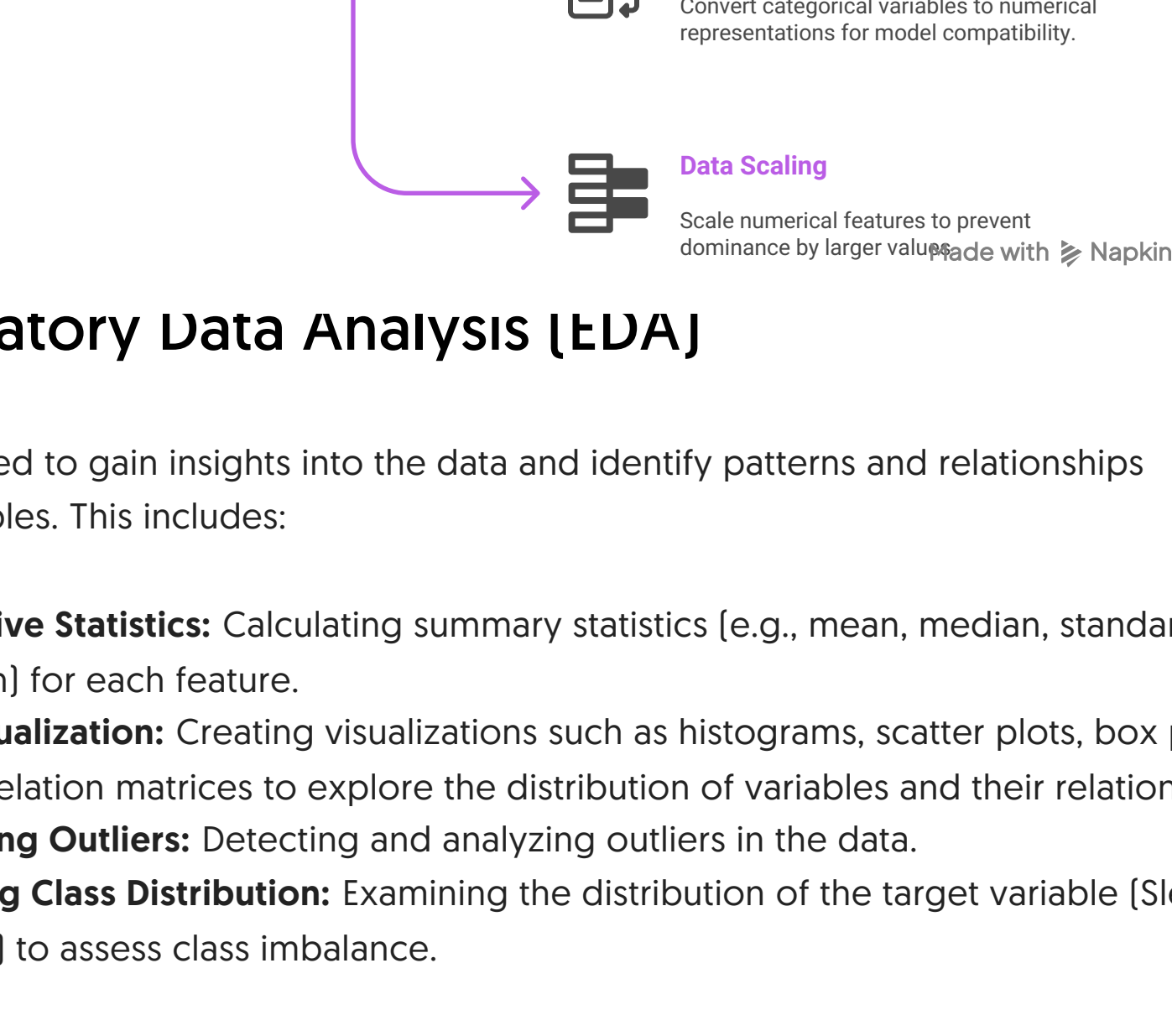


4. Data Preprocessing

The data preprocessing steps involve:

- Handling Missing Values**: Identifying and addressing missing values using appropriate imputation techniques (e.g., mean, median, or mode imputation).
- Data Cleaning**: Correcting any inconsistencies or errors in the data.
- Data Transformation**: Converting categorical variables into numerical representations using techniques like one-hot encoding or label encoding.
- Data Scaling**: Scale numerical features to prevent dominance by larger values.

How to preprocess data for predictive modeling?

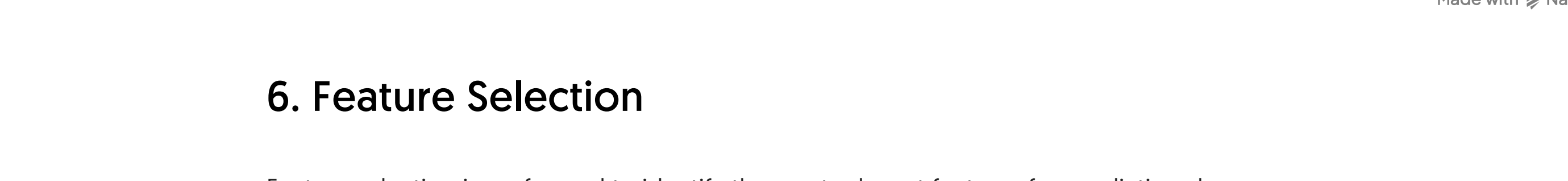


5. Exploratory Data Analysis (EDA)

EDA is performed to gain insights into the data and identify patterns and relationships between variables. This includes:

- Descriptive Statistics**: Calculating summary statistics (e.g., mean, median, standard deviation) for each feature.
- Data Visualization**: Creating visualizations such as histograms, scatter plots, box plots, and correlation matrices to explore the distribution of variables and their relationships.
- Identifying Outliers**: Detecting and analyzing outliers in the data.
- Analyzing Class Distribution**: Examining the distribution of the target variable (Sleep Disorder) to assess class imbalance.

What EDA technique should be used to analyze sleep disorder data?



6. Feature Selection

Feature selection is performed to identify the most relevant features for predicting sleep disorders. This can improve model performance and reduce complexity. Techniques include:

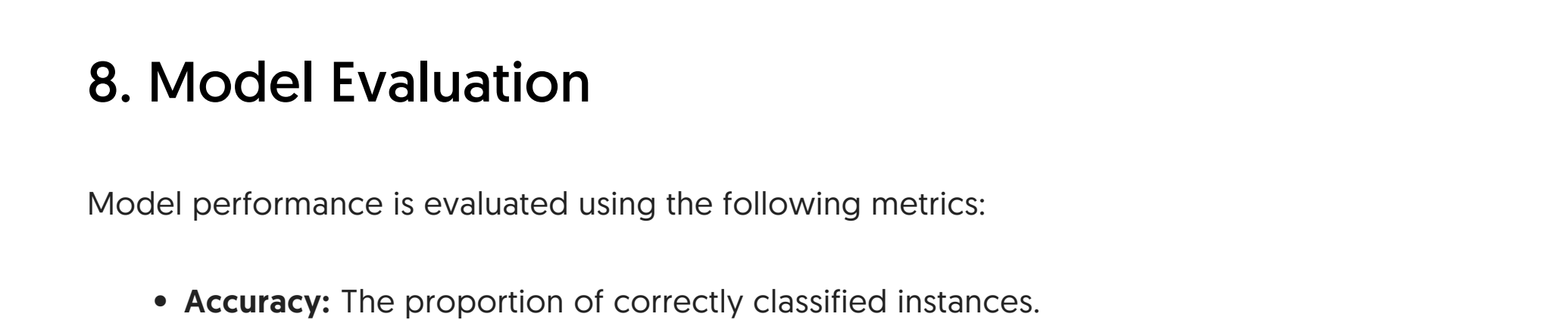
- Univariate Feature Selection**: Selecting features based on statistical tests (e.g., chi-squared test, ANOVA).
- Feature Importance from Tree-Based Models**: Using tree-based models like Random Forest to determine feature importance.
- Recursive Feature Elimination (RFE)**: Iteratively removing features and evaluating model performance.
- Correlation Analysis**: Removing highly correlated features to reduce multicollinearity.

7. Model Building

Several classification models are built and evaluated:

- Logistic Regression**: A linear model that predicts the probability of a binary outcome.
- Random Forest**: An ensemble learning method that combines multiple decision trees to improve accuracy and robustness.
- Support Vector Machines (SVM)**: A powerful model that finds the optimal hyperplane to separate different classes.
- Gradient Boosting Machines (GBM)**: Another ensemble method that builds a model by sequentially adding decision trees.

Which classification model should be used for predicting sleep disorders?

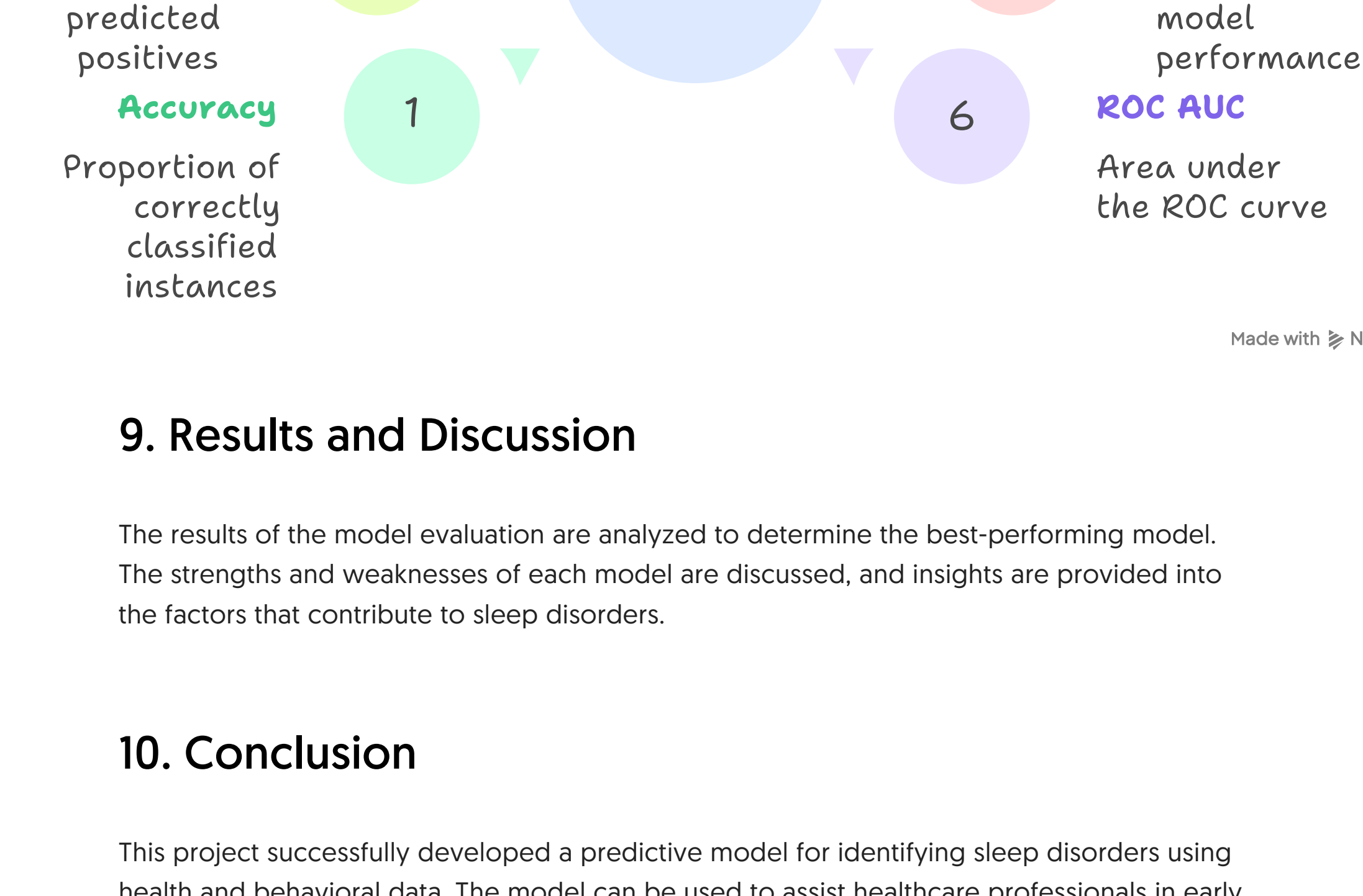


8. Model Evaluation

Model performance is evaluated using the following metrics:

- Accuracy**: The proportion of correctly classified instances.
- Precision**: The proportion of true positives among the instances predicted as positive.
- Recall**: The proportion of true positives among the actual positive instances.
- F1-Score**: The harmonic mean of precision and recall.
- Confusion Matrix**: A table that summarizes the performance of a classification model by showing the counts of true positives, true negatives, false positives, and false negatives.
- ROC AUC**: The area under the Receiver Operating Characteristic curve, which measures the model's ability to distinguish between different classes.

Metrics for Model Performance Evaluation



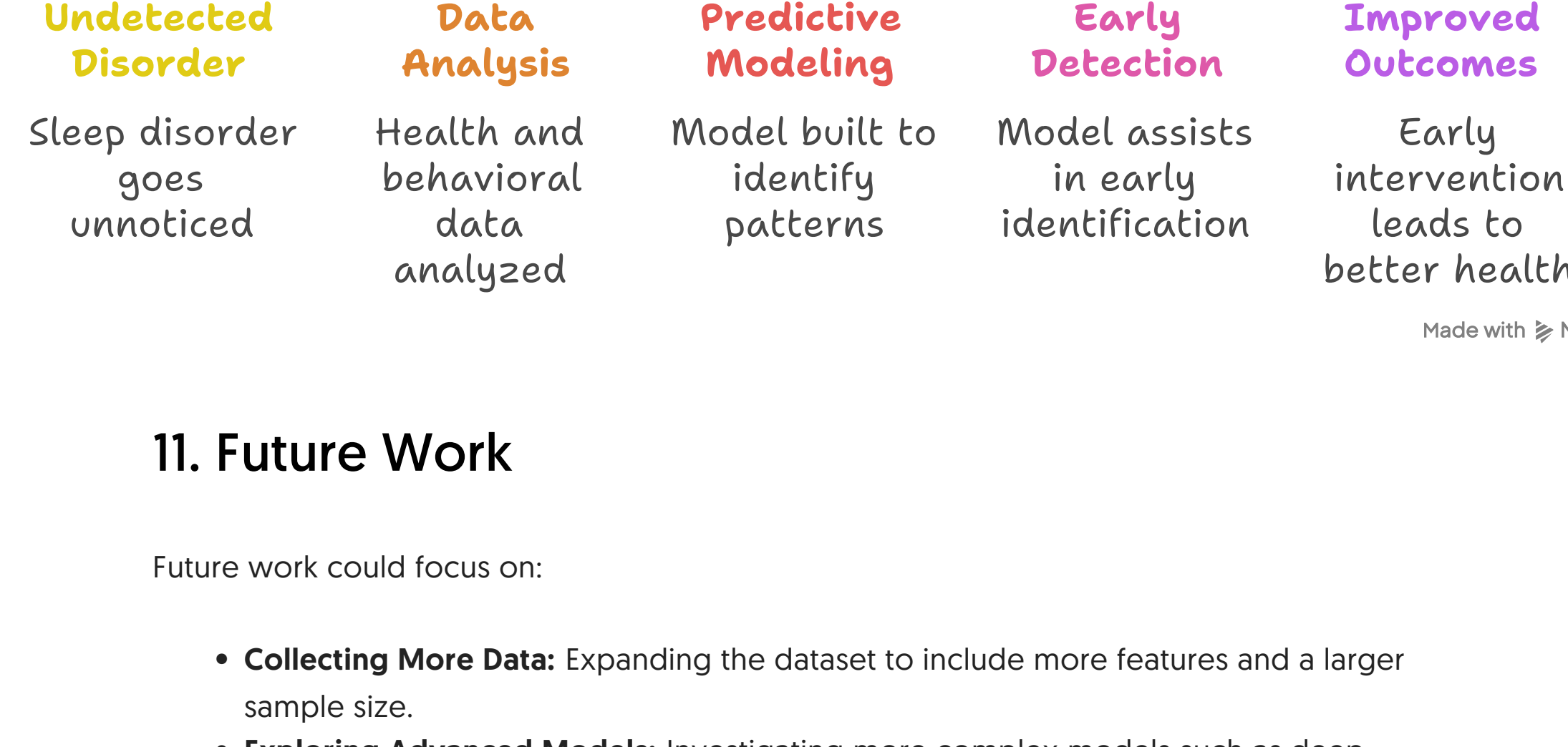
9. Results and Discussion

The results of the model evaluation are analyzed to determine the best-performing model. The strengths and weaknesses of each model are discussed, and insights are provided into the factors that contribute to sleep disorders.

10. Conclusion

This project successfully developed a predictive model for identifying sleep disorders using health and behavioral data. The model can be used to assist healthcare professionals in early detection and intervention, leading to improved patient outcomes.

Early Sleep Disorder Detection



11. Future Work

Future work could focus on:

- Collecting More Data**: Expanding the dataset to include more features and a larger sample size.
- Exploring Advanced Models**: Investigating more complex models such as deep learning models.
- Developing a User Interface**: Creating a user-friendly interface for healthcare professionals to input patient data and obtain predictions.
- Integrating with Electronic Health Records (EHR)**: Integrating the model with EHR systems to automate the prediction process.