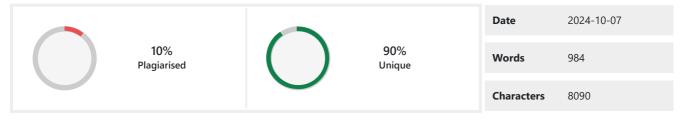


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Comparison of different Machine Learning algorithms for Parkinson's disease detection

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patients or healthy controls.

Abstract— Parkinson's disease (PD) is a progressive neurodegenerative condition that affects millions worldwide, and early diagnosis remains critical for effective treatment. Over the past few years, multiple innovative types of machine learning approaches have been developed for PD diagnosis based on data in the form of speech patterns, handwriting samples, sensor data, and many more. However, the performance of these algorithms varies significantly with the choice of data and features used.

In this paper, authors have compared the performance of a number of machine learning algorithms to diagnose Parkinson's disease. The dataset for this study was acquired from Oxford UCI Machine repository. We obtained the dataset for the study from the Oxford UCI Machine repository. After preprocessing the data and extracting relevant features, we applied various algorithms, including logistic regression, support vector machines, random forests to classify individuals as either PD

The performance evaluation parameters, including accuracy, precision, recall, F1 score, and Precision-Recall curve (PR curve), were used to compare the algorithms. Our findings revealed that random forests achieved the highest accuracy and other performance metric scores, while logistic regression and support vector machines offered greater interpretability. Overall, our research underscores the potential of machine learning in early PD detection and emphasizes the importance of comprehensive datasets and effective feature selection. The long-term goal of this work is to increase the sensitivity and specificity diagnostic methods and potentially improve the quality of life for individuals with Parkinson's disease along with better patient outcomes.

Comparison of the classification results of Logistic Regression, Decision Tree, Random Forest, Support Vector Machine, KNN, Gaussian Naive Bayes, and Bernoulli Naive Bayes led to the conclusion of Random Forest as an ideal machine learning (ML) technique for the detection of Parkinson's Disease. The detection accuracy of the Random Forest model is 98.3051%

Keywords — Classification Algorithms, Data Analysis, Machine Learning, Parkinson's Disease.

I.INTRODUCTION

Parkinson's disease has destroyed the lives of 10 million people around the world and is the second most deadly neurodegenerative disease after Alzheimer's disease. The symptoms include: "frozen" facial expression, bradykinesia or slowness of movement, akinesia or impairment of voluntary

movement, tremor, and impairment of the voice. By the time a diagnosis is made, typically 60% of nigrostriatal neurons have degenerated, as does 80% of striatal dopamine. There is no single test in which this condition can be diagnosed. Doctors must perform careful clinical analysis of the patient's medical history. However, this result was inaccurate. According to the National Institute of Neurological Disorders, early diagnosis (with symptoms for \leq 5 years) is only 53% accurate. This is hardly much better than expected, but early diagnosis makes all the differences in the world for effective treatment.

These problems motivated us to investigate a machine learning approach to accurately diagnose Parkinson's, using a dataset of various speech features (a non-invasive yet characteristic tool) from the University of Oxford.

The purpose of this project is to discover a machine learning technique that can be effectively used for the

prediction of Parkinson's disease using relevant data. This study will conduct a comparative analysis of feature selection and representation techniques to identify the most relevant and enlightening features from the available data useful in the treatment of patients.

II.METHODOLOGY

➤ Datase

We have collected the required Parkinson's disease dataset, created by the University of Oxford, called the Oxford Parkinson's Disease Detection dataset, containing 197 recordings and 23 features, created by Max Little from the University of Oxford, along with the National Centre for Voice and Speech, Denver, Colorado, who recorded the speech signals.

The data contains biomedical voice recordings from 31 individuals, 23 of whom had Parkinson's disease (PD). Each column in the table is a voice measurement, and each row corresponds to one of the 195 voices recorded by that individual ("name row"). For patients with Parkinson's disease, the "Status" column is set to 0 for healthy patients and 1 for Parkinson's disease. The file is in ASCII CSV format. The rows of the CSV file contain examples for a recording. There are approximately six entries for each patient, and the patient's name is identified in the first row.

TABLE I. OVERVIEW OF VOCAL ANALYSIS ATTRIBUTES AND THEIR PURPOSES

Attribute Purpose

Name Data is stored in ASCII CSV format where patient name and recording number is stored

MDVP:

Fo (Hz)

Fundamental frequency of pitch period MDVP: Fhi (Hz) Upper limit of fundamental frequency or maximum threshold of voice modulation MDVP: Flo (Hz) Lower limit or minimal vocal fundamental frequency MDVP: Jitter, Abs, RAP, PPQ, DDP Various measures from Kay Pentax's multi-dimensional voice program (MDVP), assessing frequency of vibrations in vocal folds at pitch periods Jitter and Shimmer Measures of absolute difference between frequencies of each cycle, after normalizing the average NHR and HNR Signal to noise and tonal ratio measures that indicate robustness of the environment to noise Status 0 indicates healthy person while 1 indicates person with Parkinson's disease (PWP) D2 Correlation dimension used to identify dysphonia in speech using fractal objects; a nonlinear, dynamic attribute RPDE Recurrence Period Density Entropy quantifies the extent to which the signal is periodic DFA Detrended Fluctuation Analysis measures the extent of stochastic self-similarity of noise in speech signals PPE Pitch Period Entropy is used to assess abnormal variations in speech on a logarithmic scale Spread1, Spread2

Analysis of extent or range of variations in speech with

respect to MDVP: Fo (Hz)

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