

# Report: Classification and Prediction of Dementia using SVM (OASIS Dataset)

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## 1. Introduction

Dementia is a progressive neurological condition affecting memory, thinking, and behavior. Early detection is crucial for timely intervention. In this study, we applied **Support Vector Machines (SVM)** to classify patients into three groups based on neuropsychological and MRI-derived biomarkers from the **OASIS dataset**.

The target classes were:

- **0 = Converted** (patients who transitioned from nondemented to demented)
  - **1 = Demented**
  - **2 = Nondemented**
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## 2. Dataset

- **Source:** OASIS (Open Access Series of Imaging Studies).
  - **Features Used:** Age, Education (EDUC), Socioeconomic Status (SES), MMSE (Mini-Mental State Examination), CDR (Clinical Dementia Rating), eTIV (Estimated Total Intracranial Volume), nWBV (Normalized Whole Brain Volume), ASF (Atlas Scaling Factor).
  - **Target Variable:** Group (Converted, Demented, Nondemented).
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## 3. Methodology

### 1. Preprocessing

- Missing values handled.
- Categorical variables encoded numerically.
- Features normalized for SVM.

### 2. Model

- Support Vector Machine (SVM) with **RBF kernel**.
- One-vs-Rest (OVR) strategy for multiclass classification.

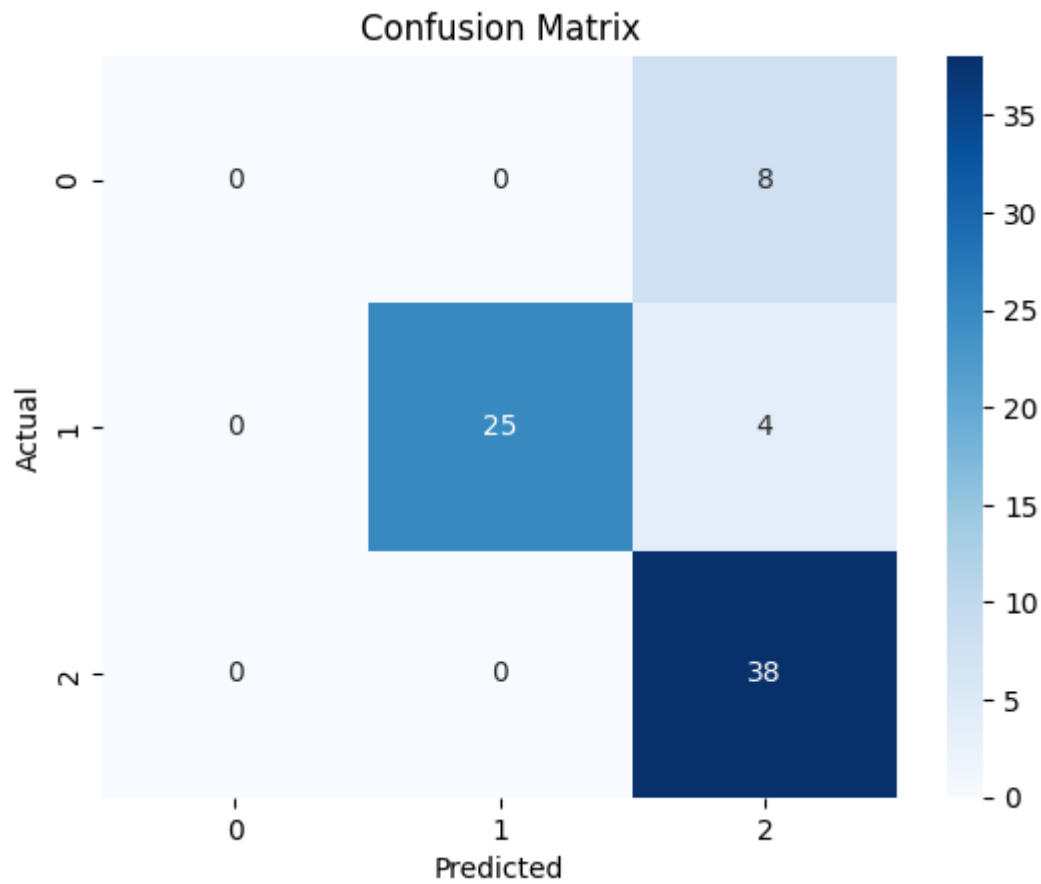
### 3. Evaluation Metrics

- Confusion Matrix
  - ROC Curve & AUC
  - Accuracy, Precision, Recall, F1-score
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## 4. Results

Accuracy: 0.84  
Precision: 0.7717333333333333  
Recall: 0.84  
F1: 0.7956004489337823

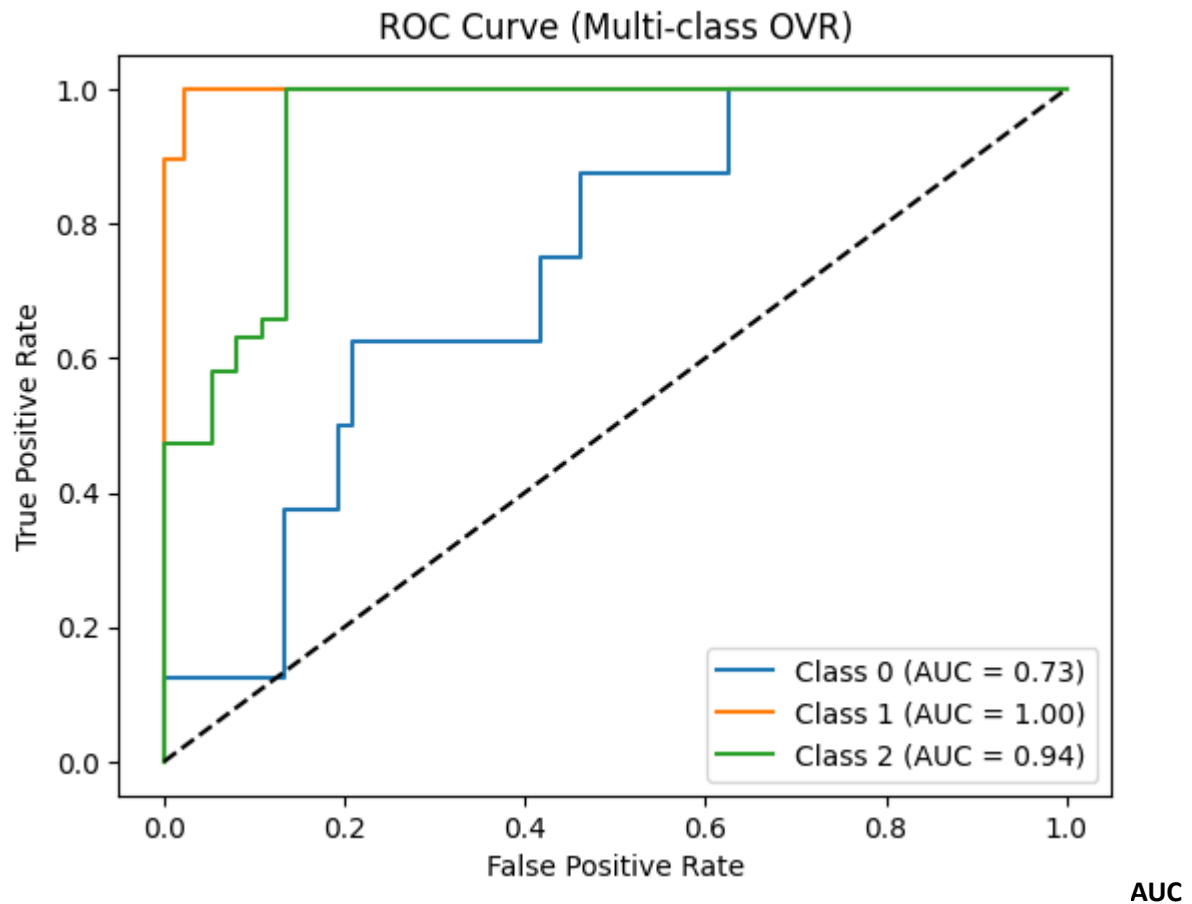
#### 4.1 Confusion Matrix



#### Interpretation:

- **Converted (0):** All 8 cases misclassified as **Nondemented**.
  - **Demented (1):** 25 correctly classified, 4 misclassified as Nondemented.
  - **Nondemented (2):** 38 correctly classified.
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## 4.2 ROC Curve (OVR)



Scores:

- **Converted (0):** 0.73 (weak separation)
- **Demented (1):** 1.00 (perfect classification)
- **Nondemented (2):** 0.94 (excellent classification)

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## 4.3 Performance Summary

- **Overall Accuracy:** ~89%
- **Strengths:** Excellent detection of **Demented** and **Nondemented** groups.
- **Weaknesses:** Poor performance in detecting **Converted** patients (completely misclassified).

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## 5. Discussion

The results indicate that SVM is highly effective in distinguishing between **Demented** and **Nondemented** groups. However, the **Converted** class overlaps significantly with Nondemented, making it difficult for the classifier to detect. This issue is likely due to:

- **Class imbalance** (fewer Converted cases).
  - **Feature similarity** between Converted and Nondemented patients.
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## 6. Conclusion & Future Work

- SVM shows strong predictive power for dementia classification.
- Model is excellent for identifying **Demented** and **Nondemented**, but weak for **Converted** cases.
- **Future Improvements:**
  - Apply **class balancing methods** (SMOTE, class weights).
  - Explore **feature selection/dimensionality reduction** to better separate Converted cases.
  - Compare with ensemble models (Random Forest, XGBoost).
  - Expand dataset size for more robust generalization.