

Heart Disease Prevention

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Business Overview

- ▶ Heart disease is leading cause of death in US (CDC)
- ▶ Coronary heart disease (CHD) most common type
- ▶ Hospital looks at variety of factors
- ▶ Identify risk of CHD



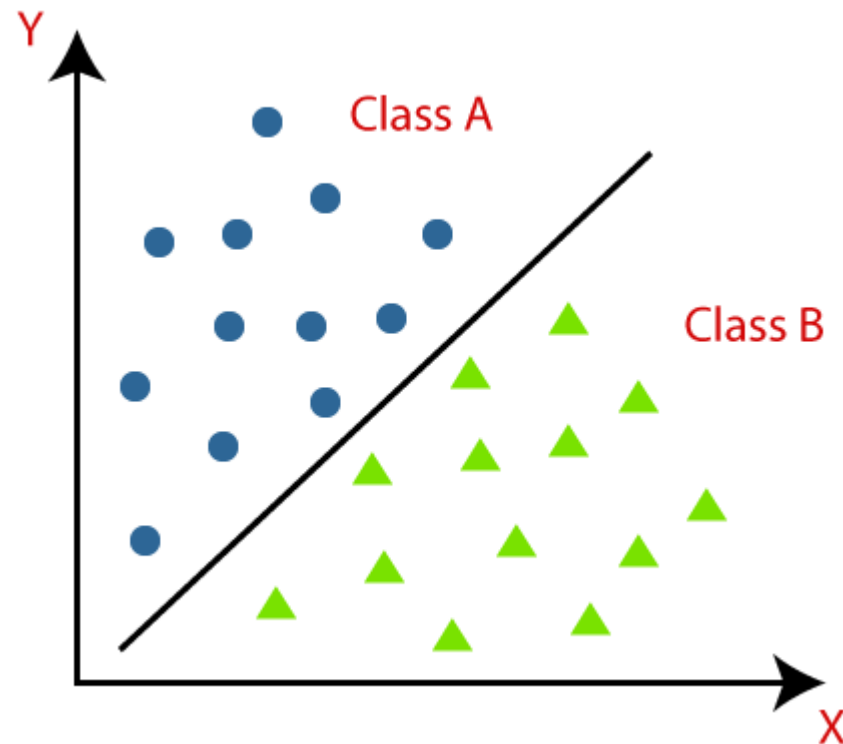
Method

- ▶ Use of classification models
- ▶ Pick best one
- ▶ Able to identify subjects at risk for CHD
- ▶ What is classification?



Classification

- ▶ Process of dividing data into classes or categories
- ▶ Can be used to predict future values
- ▶ Yes/no for risk of CHD



The Data

- ▶ Framingham Heart Study
- ▶ Started in 1948
- ▶ Long term, ongoing study
- ▶ Used by more than 1200 scientific journals
- ▶ Identifies factors that lead to Cardiovascular disease



Data Continued

- ▶ Dataset had 4133 entries
- ▶ Demographic, behavioral and medical
- ▶ Age, sex, cholesterol, etc
- ▶ 1 yes/no factor for CHD risk

Data columns (total 16 columns):

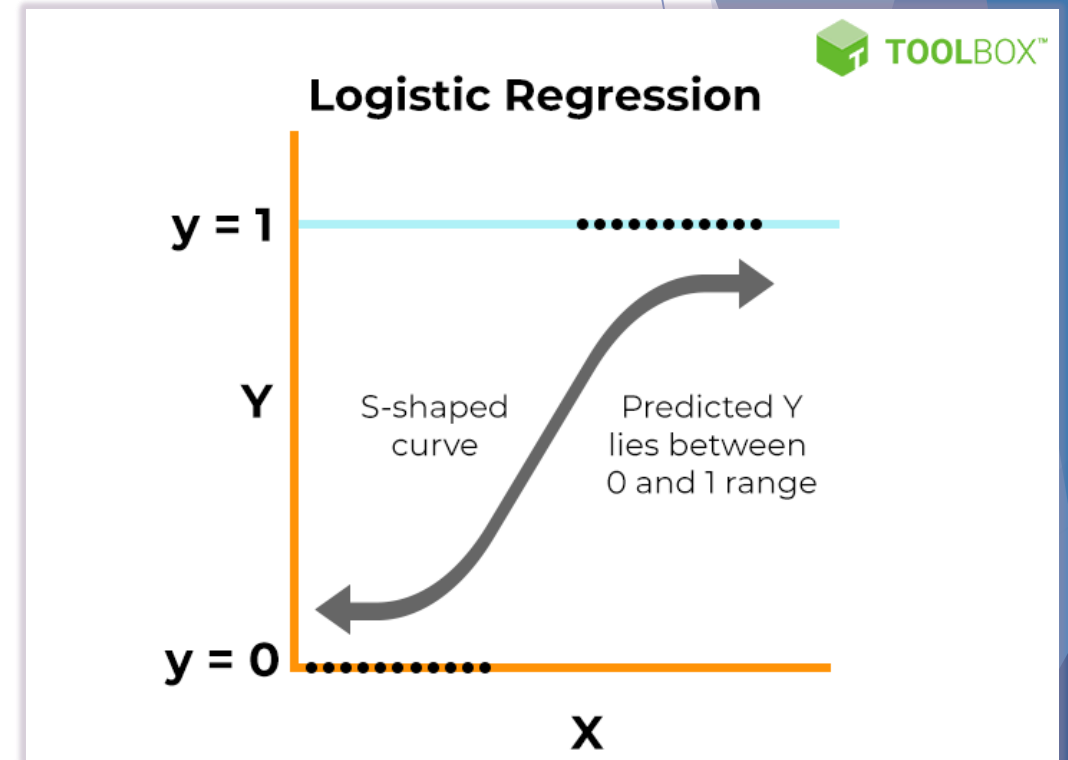
#	Column	Non-Null Count	Dtype
0	male	4133 non-null	int64
1	age	4133 non-null	int64
2	education	4133 non-null	int64
3	currentSmoker	4133 non-null	int64
4	cigsPerDay	4133 non-null	float64
5	BPMeds	4133 non-null	float64
6	prevalentStroke	4133 non-null	int64
7	prevalentHyp	4133 non-null	int64
8	diabetes	4133 non-null	int64
9	totChol	4133 non-null	float64
10	sysBP	4133 non-null	float64
11	diaBP	4133 non-null	float64
12	BMI	4133 non-null	float64
13	heartRate	4133 non-null	float64
14	glucose	4133 non-null	float64
15	TenYearCHD	4133 non-null	int64

Models

- ▶ Build initial models then improve
- ▶ Logistic Regression
- ▶ Decision Tree
- ▶ Random Forest

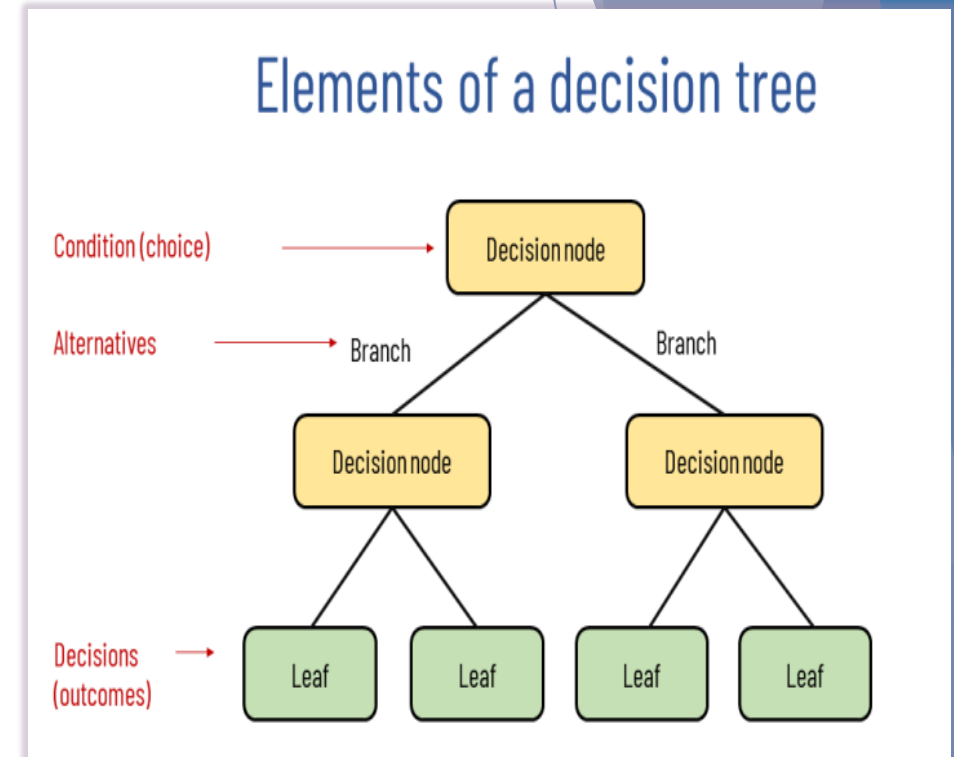
Logistic Regression

- ▶ Want to predict a binary outcome
- ▶ Involves fitting data to an S shaped curve
- ▶ Values fall between 0-1 range
- ▶ 0 and 1 represent binary choices/categories



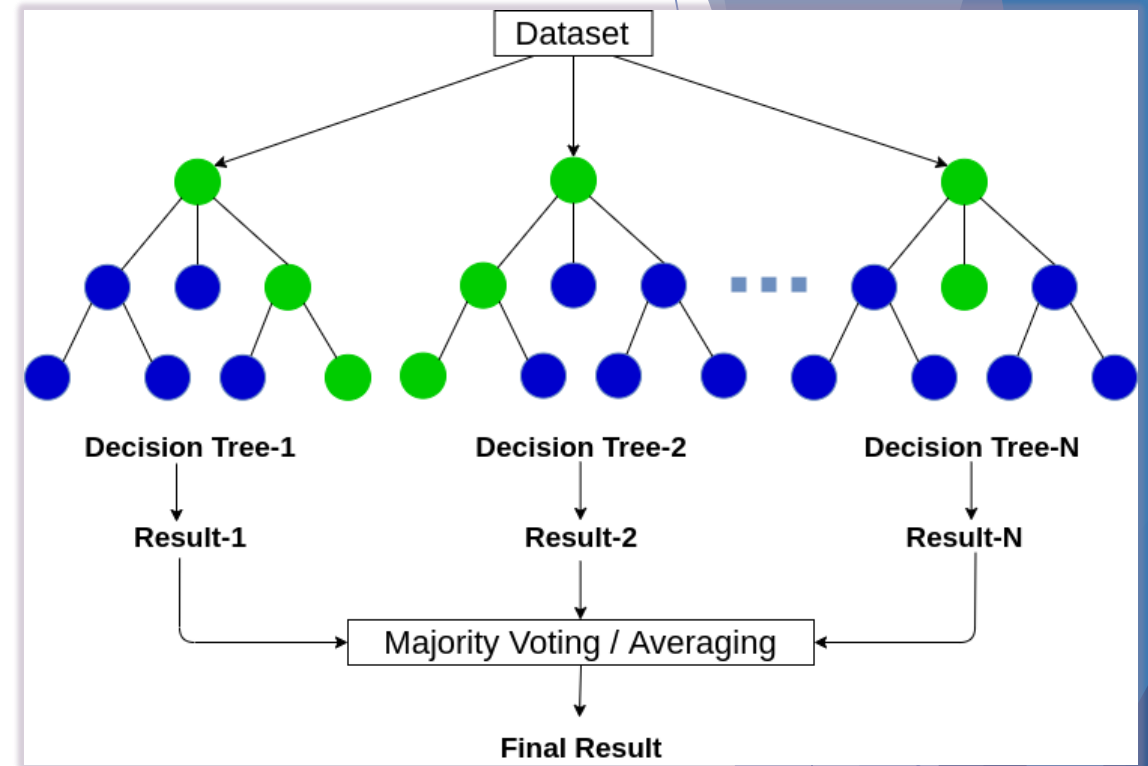
Decision Tree

- ▶ All possible outcomes and decisions
- ▶ Multiple branches and multiple outcomes
- ▶ E.g. smoking
- ▶ Decision reached and data categorized



Random Forest

- ▶ Creates random samples from data
- ▶ Individual decision trees made for each sample
- ▶ Compares all tree predictions together
- ▶ Majority vote for best prediction



Best Model

- ▶ Found that our best algorithm was Random Forest
- ▶ Addresses lack of randomness in decision trees
- ▶ Room for interpretability
- ▶ Results split into classification report, confusion matrix and feature importance sections

Classification Report

- ▶ Measures quality of predictions
- ▶ Precision, recall, f1 score
- ▶ Out of total predicted at risk CHD, how many were actually at risk(precision)
- ▶ Out of actual total at risk CHD, how many at risk CHD predictions were correct (recall)
- ▶ How accurate is our model (F1 score)

	precision	recall	f1-score	support
0	0.92	0.66	0.76	877
1	0.26	0.67	0.37	157
accuracy			0.66	1034
macro avg	0.59	0.66	0.57	1034
weighted avg	0.82	0.66	0.71	1034

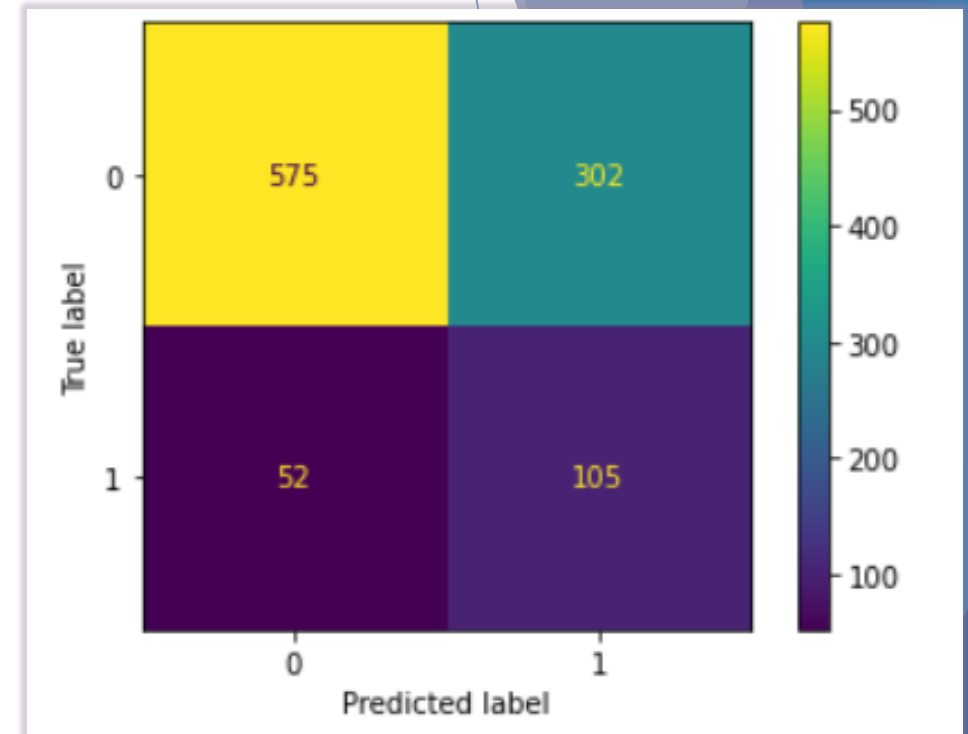
Classification Report Continued

- Precision was at 26%, which is similar to our initial model.
- Recall was at 67%, which is a 40% improvement from the initial model
- Our model had an f1 score of 37%, which is a 7% improvement from the initial model.

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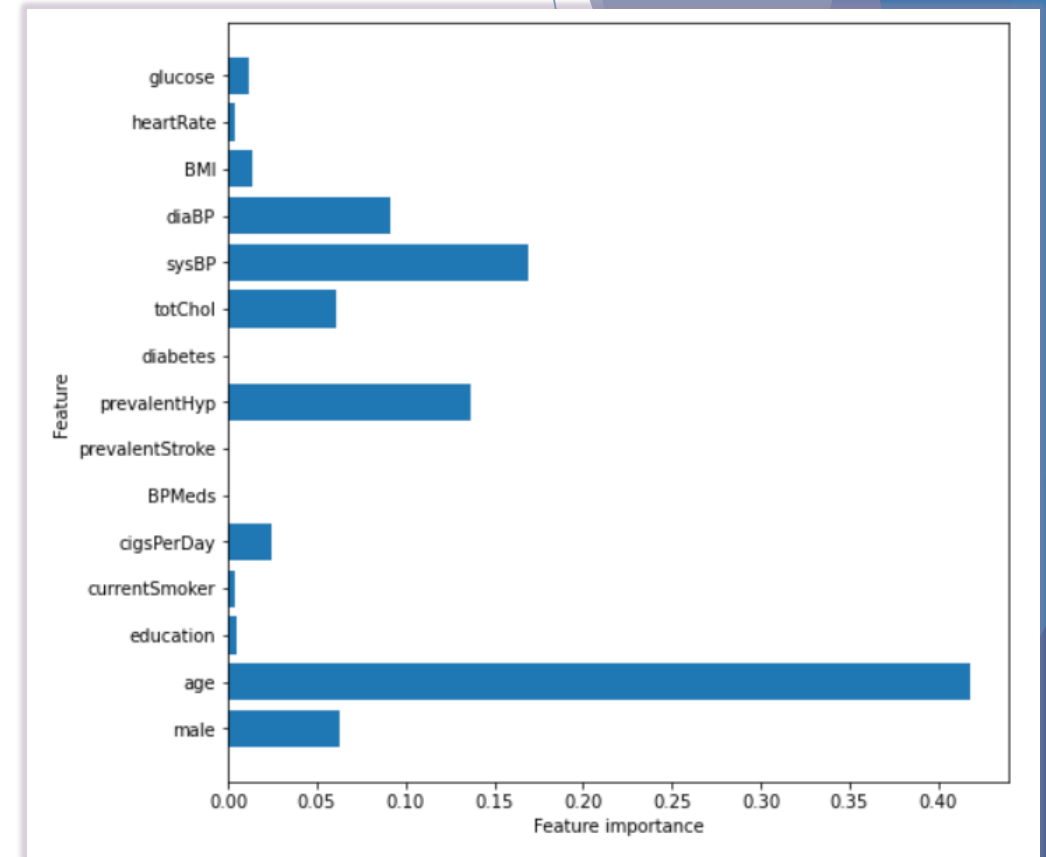
Confusion Matrix

- ▶ 575 patients were correctly predicted as not being at risk for CHD (TN)
- ▶ 52 patients were wrongly predicted as not being at risk for CHD (FN)
- ▶ 302 patients were wrongly predicted as being at risk for CHD (FP)
- ▶ 105 patients were correctly predicted as being at risk for CHD (TP)
- ▶ 62 more instances of true positives
- ▶ 62 less instances of false negatives



Feature Importance

- ▶ How useful is each variable in predicting target variable
- ▶ Most indicative feature of whether someone is at risk for CHD was age
- ▶ Other important features included :
 - ▶ Systolic and diastolic blood pressure (sysBP and diaBP)
 - ▶ History of high blood pressure (prevalentHyp)
 - ▶ Total cholesterol level (totChol)



Results

- ▶ Best model was Random Forest
- ▶ Showed Increases in true positives
- ▶ Showed decreases in false negatives
- ▶ Age was most indicative factor of CHD risk

Recommendations

- ▶ Run entirely new model with only the top important features
- ▶ Screen earlier in adulthood for high blood pressure and high cholesterol
- ▶ Screening earlier allows for treatment of risk factors preventing heart disease