<u>Summary - Heart Disease Risk</u>

This project analyzes a **heart disease dataset of 920 patients** with 16 demographic, clinical, and diagnostic features. The objective was to explore disease prevalence patterns and uncover key risk indicators through descriptive statistics and visualization.

Key Findings

Demographics

• Gender:

- Around 68% of patients are male and 32% are female.
- Heart disease was more prevalent among men, with ~55% of male patients
 diagnosed compared to ~35% of female patients.

Age:

- Majority of cases fall between 40–65 years (≈70% of the dataset).
- Patients above 60 years account for nearly 25% of all heart disease cases, highlighting age as a strong risk factor.

Chest Pain Type (cp)

- Asymptomatic chest pain dominates in diseased patients (>50% of positive cases).
- Typical angina & atypical angina contribute around 35% combined.
- Non-anginal pain is more common in non-diseased patients, serving as a differentiating marker.

Clinical Parameters

• Cholesterol (chol):

- About 30% of patients recorded cholesterol >250 mg/dl, with the majority of them diagnosed positive.
- Normal-to-borderline levels (<200 mg/dl) are more frequent in disease-free patients.

Resting Blood Pressure (trestbps):

- Nearly 25% of patients have resting BP above 140 mmHg, among which 60% are diseased.
- Fasting Blood Sugar (fbs):
 - Patients with fbs > 120 mg/dl (≈12% of dataset) showed a notably higher rate of disease (~65% positive).

• Maximum Heart Rate (thalach):

- Diseased patients generally achieve a lower thalach.
- 75% of patients with thalach <140 bpm were positive for heart disease.

Diagnostic Parameters

- ECG (restecg):
 - Abnormal ECG (left ventricular hypertrophy or ST-T abnormalities) appears in
 >40% of diseased patients.
- Exercise-Induced Angina (exang):
 - Present in ~33% of patients, with a strong positive correlation to disease.
- ST Depression (oldpeak):
 - Patients with oldpeak ≥2 form ~28% of the dataset, of which nearly 70% are diseased.
- Slope of ST segment:
 - Flat and downsloping slopes are strongly linked with disease, while upsloping is more common in healthy individuals.

Visualization Highlights

- Bar and pie charts reveal the gender disparity and chest pain distribution.
- Histograms clearly show differences in cholesterol and thalach between healthy vs. diseased.
- **Correlation heatmaps** highlight strong associations of age, cholesterol, blood pressure, and thalach with heart disease.

Conclusion

The study underscores that **age**, **male gender**, **high cholesterol**, **hypertension**, **abnormal ECG results**, **and low maximum heart rate** are critical predictors of heart disease. Asymptomatic chest pain and ST segment abnormalities further refine risk stratification.

The visualizations provide a clear narrative: patients above 40, especially males with high cholesterol and abnormal diagnostic tests, are at significantly elevated risk.