<!-- templates/index.html -->

<!DOCTYPE html>

<html>

<head>

<title>Heart Disease Prediction</title>

<style>

body { font-family: Arial, sans-serif; max-width: 600px; margin: 0 auto; padding: 20px; }

.form-group { margin-bottom: 15px; }

label { display: block; margin-bottom: 5px; }

input { width: 100%; padding: 8px; box-sizing: border-box; }

button { background-color: #4CAF50; color: white; padding: 10px 15px; border: none; cursor: pointer; }

button:hover { background-color: #45a049; }

</style>

</head>

<body>

<h1>Heart Disease Prediction</h1>

<form action="/predict" method="post">

<div class="form-group">

<label for="age">Age:</label>

<input type="number" id="age" name="age" required>

</div>

<div class="form-group">

<label for="sex">Sex (0 = female, 1 = male):</label>

<input type="number" id="sex" name="sex" min="0" max="1" required>

</div>

<div class="form-group">

<label for="cp">Chest Pain Type (0-3):</label>

<input type="number" id="cp" name="cp" min="0" max="3" required>

</div>

<div class="form-group">

<label for="trestbps">Resting Blood Pressure (mm Hg):</label>

<input type="number" id="trestbps" name="trestbps" required>

</div>

<div class="form-group">

<label for="chol">Serum Cholesterol (mg/dl):</label>

<input type="number" id="chol" name="chol" required>

</div>

<div class="form-group">

<label for="fbs">Fasting Blood Sugar > 120 mg/dl (0 = no, 1 = yes):</label>

<input type="number" id="fbs" name="fbs" min="0" max="1" required>

</div>

<div class="form-group">

<label for="restecg">Resting ECG Results (0-2):</label>

<input type="number" id="restecg" name="restecg" min="0" max="2" required>

</div>

<div class="form-group">

<label for="thalach">Maximum Heart Rate Achieved:</label>

<input type="number" id="thalach" name="thalach" required>

</div>

<div class="form-group">

<label for="exang">Exercise Induced Angina (0 = no, 1 = yes):</label>

<input type="number" id="exang" name="exang" min="0" max="1" required>

</div>

<div class="form-group">

<label for="oldpeak">ST Depression Induced by Exercise:</label>

<input type="number" id="oldpeak" name="oldpeak" step="0.1" required>

</div>

<div class="form-group">

<label for="slope">Slope of Peak Exercise ST Segment (0-2):</label>

<input type="number" id="slope" name="slope" min="0" max="2" required>

</div>

<div class="form-group">

<label for="ca">Number of Major Vessels (0-3):</label>

<input type="number" id="ca" name="ca" min="0" max="3" required>

</div>

<div class="form-group">

<label for="thal">Thalassemia (1-3):</label>

<input type="number" id="thal" name="thal" min="1" max="3" required>

</div>

<button type="submit">Predict</button>

</form>

</body>

</html>

<!-- templates/result.html -->

<!DOCTYPE html>

<html>

<head>

<title>Prediction Result</title>

<style>

body { font-family: Arial, sans-serif; max-width: 600px; margin: 0 auto; padding: 20px; }

.result { padding: 20px; margin-top: 20px; border-radius: 5px; }

.disease { background-color: #ffdddd; border-left: 6px solid #f44336; }

.no-disease { background-color: #ddffdd; border-left: 6px solid #4CAF50; }

.probability { margin-top: 15px; font-weight: bold; }

a { display: inline-block; margin-top: 20px; color: #2196F3; text-decoration: none; }

a:hover { text-decoration: underline; }

</style>

</head>

<body>

<h1>Prediction Result</h1>

<div class="result {% if result.prediction == 1 %}disease{% else %}no-disease{% endif %}">

<h2>{{ result.message }}</h2>

<div class="probability">

Probability: {{ "%.2f"|format(result.probability \* 100) }}%

</div>

</div>

<a href="/">Make another prediction</a>

</body>

</html>