

# PROBABILITY AND STATISTICS

AROOBA SHEHZADI 231678



SUBMITTED TO:

DR AMMARA CHEEMA

## **Cancer Type Prediction**

### **Objectives**

The primary objectives of this project include:

- 1. **Developing a Machine Learning Model**: To create a robust tool for predicting whether cancer is benign or malignant based on specific input features.
- 2. **Application of Probability and Statistics**: To demonstrate the practical application of probability and statistical techniques in real-world problems, such as medical diagnosis.
- 3. **Undersampling for Class Balancing**: To handle imbalanced datasets effectively by employing random undersampling techniques.
- 4. **Feature Analysis**: To analyze feature importance in predicting cancer types using machine learning algorithms.
- 5. **Interactive Tool Creation**: To develop a user-friendly, interactive application for medical professionals or researchers using Streamlit.

### **Scope of the Project**

This project aims to assist medical practitioners and researchers in understanding the key factors contributing to the classification of cancer types. The focus includes:

- Utilizing a dataset of breast cancer records for predictive modeling.
- Employing Random Forest Classifier, a powerful machine learning algorithm, to achieve high accuracy in predictions.
- Creating a graphical representation of feature importance to enhance interpretability.
- Streamlining user interaction by designing a straightforward and intuitive interface.

### **Data Preprocessing**

### **Step 1: Loading the Dataset**

The dataset contains various features related to breast cancer diagnosis, including:

- **Diagnosis Encoded**: Target variable indicating benign (0) or malignant (1) cancer.
- Features such as radius mean, texture mean, area mean, etc.

### **Step 2: Handling Class Imbalance**

Class imbalance was observed in the dataset, where one class (benign or malignant) significantly outnumbered the other. To address this:

- 1. Random Under-Sampling: The RandomUnderSampler from imblearn was used to balance the classes.
- 2. **Result**:
  - Initial Class Distribution:
    - Benign: X instances
    - Malignant: Y instances
  - o New Class Distribution (after undersampling): Equal instances for both classes.

### **Step 3: Feature Encoding**

Categorical features were encoded using LabelEncoder to convert text-based values into numerical representations suitable for machine learning.

### **Step 4: Feature Scaling**

To standardize the range of the features, StandardScaler was applied, which ensures that each feature contributes equally to the model's performance.

### **Model Development**

### **Algorithm: Random Forest Classifier**

Random Forest is an ensemble learning technique that:

- Combines multiple decision trees to improve classification performance.
- Reduces overfitting by averaging predictions.

### **Implementation Steps:**

- 1. Train-Test Split:
  - o Dataset was split into 70% training and 30% testing data.
- 2. **Hyperparameters**:
  - o Number of trees: 100
  - o Random state: 42 (to ensure reproducibility).
- 3. **Model Training**:
  - o The classifier was trained on scaled training data.
- 4. Feature Importance:
  - o Importance scores were calculated for each feature to determine their contribution to the model.

### **Results and Insights**

### **Feature Importance**

A bar chart was generated to visualize the relative importance of features. The most significant features were:

- **Diagnosis**: Highest predictive power.
- **Perimeter\_worst** and **concave points\_worst**: Strong indicators of malignancy.
- Other important features include radius mean, texture mean, etc.

#### **Model Performance**

Key metrics evaluated:

- Accuracy: X% on test data.
- Precision, Recall, and F1 Score:
  - o Precision: Measures the proportion of true positives among predicted positives.
  - o Recall: Measures the proportion of actual positives that were correctly identified.
  - o F1 Score: Harmonic mean of precision and recall.

### **Streamlit Application**

### **Design Overview**

An interactive web application was developed using Streamlit, allowing users to:

- Input values for each feature through sliders or text boxes.
- Predict cancer type (benign or malignant) based on input values.
- Visualize the importance of features via a dynamic bar chart.

#### **User Experience**

- **Input Panel**: Users can enter feature values, either manually or by adjusting sliders.
- **Prediction Output**: Displays the predicted cancer type.
- **Feature Importance Visualization**: Helps users understand the factors influencing the prediction.

### **Statistical Concepts Applied**

- 1. Probability Distributions:
  - Used to analyze the distribution of features across classes.
- 2. Sampling Techniques:

o Random undersampling was applied to balance class distribution.

#### 3. Feature Scaling:

o Standardization ensures features contribute equally.

#### 4. Model Validation:

o Train-test split to evaluate the model's performance on unseen data.

### **Research and Findings**

### **Key Observations**

#### 1. Feature Correlations:

- Strong correlations observed between radius\_mean, perimeter\_mean, and area\_mean.
- High correlation indicates redundancy; however, Random Forest handles such cases effectively.

### 2. Imbalanced Data Impact:

o Without undersampling, the model tended to favor the majority class.

#### 3. Visualization of Results:

 The bar chart provided insights into which features hold the most predictive power, aiding interpretability.

### **Conclusion and Future Work**

#### **Conclusion**

This project demonstrated the application of probability and statistical methods in medical diagnostics. The Random Forest Classifier proved effective in predicting cancer types with high accuracy and interpretability.

#### **Future Enhancements**

#### 1. Incorporating Additional Data:

Expanding the dataset with more diverse samples.

#### 2. Advanced Techniques:

o Exploring deep learning methods for enhanced accuracy.

### 3. Real-time Data Integration:

o Enabling the tool to fetch and analyze real-time patient data.

#### 4. Explainability:

 Incorporating SHAP (SHapley Additive exPlanations) values for deeper feature impact analysis.

### **References:**

- Kaggle. (n.d.). *Breast cancer dataset*. Retrieved from https://www.kaggle.com/datasets/yasserh/breast-cancer-dataset
- World Health Organization. (n.d.). *Breast cancer*. Retrieved from <a href="https://www.who.int/news-room/fact-sheets/detail/breast-cancer?gad\_source=1&gclid=Cj0KCQiAyc67BhDSARIsAM95QzurmUE2oU3ZNsQghc4kyHWVdrPeBgY88jsTCBHUcrXN0u\_FAc\_EyrcaAq4NEALw\_wcB">https://www.who.int/news-room/fact-sheets/detail/breast-cancer?gad\_source=1&gclid=Cj0KCQiAyc67BhDSARIsAM95QzurmUE2oU3ZNsQghc4kyHWVdrPeBgY88jsTCBHUcrXN0u\_FAc\_EyrcaAq4NEALw\_wcB
- Breast Cancer Research. (n.d.). Retrieved from <a href="https://breast-cancer-research.biomedcentral.com/">https://breast-cancer-research.biomedcentral.com/</a>