

# Technical Report 2: Heart Failure Risk Prediction in the Smurf Society

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In this technical report, we describe how we predict the risk of heart failure using a nonlinear model. We improve on our previous pipeline by replacing the linear regressor by a support vector machine (SVM) regressor. In addition, we combine the feature selection step and the model selection step for a more robust approach.

**Data pre-processing** We use the same pre-processing steps as in our previous work. Note that the encoding labels for the "profession" variable are assigned randomly, while the encoding labels for the 3 other categorical variables are ordered according to the progression "very low - low - average - high - very high".

**Feature selection** We select the  $k$  features which are the most correlated with the target. The number  $k$  is treated as a hyper-parameter of the model and is thus tuned together with other hyper-parameters in the model selection step.

**Model selection and implementation** We use the SVR model from the python library `scikit-learn`. We choose to tune the following hyper-parameters: the kernel type, the regularization coefficient  $C$ , and the margin of tolerance  $\epsilon$  (no penalty in the loss if error is smaller than  $\epsilon$ ). In order to find the best values for this set of hyper-parameters, we use a grid search with a 5-fold cross validation . We define the search space in Table 1.

Hyper-parameter	Allowed values
$k$	5, 7, 9, 11, 13
kernel	"poly", "rbf", "sigmoid"
$C$	0.01, 0.05, 0.1, 0.5, 1
$\epsilon$	0.01, 0.05, 0.1, 0.5, 1

Table 1: Search space for the grid search.

The best parameters are  $\{k: 9, \text{kernel: "rbf"}, C: 0.1, \epsilon: 0.05\}$ . The mean validation RSME for the best model is 0.072, with a standard deviation of 0.0053. Results were consistent across runs, albeit small variations for the value of  $C$  and/or  $\epsilon$ .

**Results analysis** We retrain a model with the best set of hyper-parameters on the whole training set and then obtain a RMSE of 0.073 on the test set. There are no signs of over-fitting. However, the improvement over linear models is much less than expected. We should really get to work with the heart scans, they must contain some useful information!