Machine Learning Engineer Nanodegree

Capstone Proposal -v0.2

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Domain Background

The total number of deaths due to cardiovascular diseases read 17.3 million a year according to the WHO causes of death. Cardiac Arrhythmia is a condition where a person suffers from an irregular or abnormal heart Rhythm where in the electrical activity of the heart is irregular or is faster or slower than normal. It is due to the malfunction in the electrical impulses within the heart that coordinate how it beats. Thus, how to predict cardiac arrhythmia in real life is of great significance.

Irregularity in heart beat may be harmless or life threatening. Hence both accurate detection of presence as well as classification of arrhythmia are important. Arrhythmia can be diagnosed by measuring the heart activity using an instrument called ECG or electrocardiograph and then analysing the recorded data. Different parameter values can be extracted from the ECG waveforms and can be used along with other information about the patient like age, medical history, etc to detect arrythmia. However, sometimes it may be difficult for a doctor to look at these long duration ECG recordings and find minute irregularities. Therefore, using machine learning for automating arrhythmia diagnosis can be very helpful.

There was a similar attempt done at Sanford University for <u>Prediction and Classification of Cardiac Arrhythmia</u> in the past.

By considering the significance of the problem and suitability of applying automation to Cardiac Arrhythmia, <u>UCI Arrhythmia data set</u> is considered to apply various ML algorithms on the data set.

Problem Statement

The aim is to distinguish between the presence and absence of cardiac arrhythmia and to classify it in one of the 13 groups based on a patient's medical record. Classify a patient into one of the Arrhythmia classes like Tachycardia and Bradycardia based on his/her ECG measurements to better understand application of machine learning in medical domain. This is a supervised learning problem. After appropriate feature selection an attempt is made to solve this problem by using Machine Learning Algorithms namely K Nearest Neighbour, Logistic Regression, Naïve Bayes and SVM.

Datasets and Inputs

The dataset for the project is taken from the UCI Repository: Arrhythmia Dataset (https://archive.ics.uci.edu/ml/datasets/Arrhythmia). There are (452) rows, each representing medical record of a different patient. There are 279 attributes like age, weight and patient's ECG related data. General attributes like age and weight have discrete integral values while other ECG features like QRS duration have real values.

Cardiac Arrhythmia Database is described below:

```
1. Number of Instances: 452
2. Number of Attributes: 279
3. Attribute Information:
    -- Complete attribute documentation:
      1 Age: Age in years , linear
2 Sex: Sex (0 = male; 1 = female) , nominal
      3 Height: Height in centimeters , linear
      4 Weight: Weight in kilograms , linear
      5 QRS duration: Average of QRS duration in msec., linear
      6 P-R interval: Average duration between onset of P and Q waves
        in msec., linear
      7 Q-T interval: Average duration between onset of Q and offset
       of T waves in msec., linear
      8 T interval: Average duration of T wave in msec., linear
      9 P interval: Average duration of P wave in msec., linear
     Vector angles in degrees on front plane of:, linear
     10 QRS
     11 T
     12 P
     13 QRST
     15 Heart rate: Number of heart beats per minute ,linear
     Of channel DI:
     Average width, in msec., of: linear
      16 Q wave
      17 R wave
      18 S wave
      19 R' wave, small peak just after R
      20 S' wave
      21 Number of intrinsic deflections, linear
      22 Existence of ragged R wave, nominal
      23 Existence of diphasic derivation of R wave, nominal
      24 Existence of ragged P wave, nominal
      25 Existence of diphasic derivation of P wave, nominal
      26 Existence of ragged T wave, nominal
      27 Existence of diphasic derivation of T wave, nominal
    Of channel DII:
     28 .. 39 (similar to 16 .. 27 of channel DI)
     Of channels DIII:
     40 .. 51
     Of channel AVR:
      52 .. 63
    Of channel AVL:
     64 .. 75
     Of channel AVF:
      76 .. 87
     Of channel V1:
     88 .. 99
    Of channel V2:
      100 .. 111
     Of channel V3:
     112 .. 123
    Of channel V4:
     124 .. 135
     Of channel V5:
     136 .. 147
     Of channel V6:
     148 .. 159
     Of channel DI:
     Amplitude , * 0.1 milivolt, of 160 JJ wave, linear
      161 Q wave, linear
      162 R wave, linear
      163 S wave, linear
      164 R' wave, linear
      165 S' wave, linear
      166 P wave, linear
167 T wave, linear
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168 QRSA , Sum of areas of all segments divided by 10,
         (Area= width * height / 2 ), linear
169 QRSTA = QRSA + 0.5 * width of T wave * 0.1 * height of T
               wave. (If T is diphasic then the bigger segment is
              considered), linear
       Of channel DII:
         170 .. 179
       Of channel DIII:
         180 .. 189
       Of channel AVR:
        190 .. 199
       Of channel AVL:
         200 .. 209
       Of channel AVF:
        210 .. 219
       Of channel V1:
        220 .. 229
       Of channel V2:
        230 .. 239
       Of channel V3:
        240 .. 249
       Of channel V4:
         250 .. 259
       Of channel V5:
        260 .. 269
       Of channel V6:
        270 .. 279
4. Missing Attribute Values: Several. Distinguished with '?'.
5. Class Distribution:
          Database: Arrhythmia
          Class code : Class
                                                                                         Number of instances:
          01 Normal
                   Normal
Ischemic changes (Coronary Artery Disease) 44
Old Anterior Myocardial Infarction 15
Old Inferior Myocardial Infarction 15
Sinus tachycardy
Sinus bradycardy
Ventricular Premature Contraction (PVC) 3
Supraventricular Premature Contraction
Left bundle branch block
Right bundle branch block
1. degree AtrioVentricular block
2. degree AV block 0
3. degree AV block 0
Left ventricule hypertrophy
Atrial Fibrillation or Flutter
Others
          04
                                                                                                      25
          07
          08
                                                                                                            9
          09
                                                                                                           50
          12
13
```

Solution Statement

As specified earlier, planning to use various Machine learning algorithms and recommend suitable Algorithm with best performance to predict Cardiac Arrhythmia by considering their F1 Score or any other relevant metrics as applicable.

Benchmark Model

The aim is to distinguish between the presence and absence of cardiac arrhythmia and to classify it in one of the 16 groups. Class 01 refers to 'normal' ECG classes 02 to 15 refers to different classes of arrhythmia and class 16 refers to the rest of unclassified ones. For the time being, there exists a computer program that makes such a classification. However there are differences between the

cardiolog's and the programs classification. Taking the cardiolog's as a gold standard we aim to minimise this difference by means of machine learning tools.

Test results specified in Stanford research paper on <u>Prediction and Classification of Cardiac Arrhythmia</u>, are considered as benchmark to evaluate the current work planning to carry out.

Evaluation Metrics

The main objective of this project is to develop a Machine learning Model that could robustly detect an arrhythmia. The second objective of this project was to develop a method to robustly classify an ECG trace into one of 13 broad arrhythmia classes. We report our performance for each of the five methods. Results for each algorithm are evaluated to recommend better model.

Project Design

The project workflow would be as follow:

- 1. Download the dataset: The first step of the project will be to download dataset from UCI website: https://archive.ics.uci.edu/ml/datasets/Arrhythmia
- 2. Data Preparation by remove any possible categorical features, addressing missing value for attribute
- 3. Reducing the dimensionality of the problem by applying either of the following:
 - a. Feature selection OR
 - b. Principal Component Analysis is carried out to identify patterns in the data, reduce the number of dimensions
- 4. Then build models using Logistic Regression, KNN (K-Nearest Neighbours), Naive Bayes Classifier and SVM (Support Vector Machines)
- 5. Performance of the models is compared and Model that performs best is considered to be used for arrhythmia detection.

References:

- 1. http://en.wikipedia.org/wiki/Cardiac dysrhythmia
- 2. https://archive.ics.uci.edu/ml/datasets/Arrhythmia
- 3. Stanford research paper on Prediction and Classification of Cardiac Arrhythmia