Heart Disease Classification: Model Fitting

Carlos Kelaidis

4/12/2021

Read in data set:

Load some libraries:

```
library(tidyverse)
## -- Attaching packages ------ tidyverse 1.3.0 --
## v ggplot2 3.3.5
                                0.3.4
                        v purrr
## v tibble 3.1.6
                        v dplyr
                                1.0.7.9000
## v tidyr
           1.1.4
                        v stringr 1.4.0
## v readr
           1.3.1
                        v forcats 0.4.0
## -- Conflicts ----- tidyverse_conflicts() --
## x dplyr::filter() masks stats::filter()
## x dplyr::lag()
                 masks stats::lag()
library(knitr)
library(ggpubr)
library(tibble)
```

We now have a set of candidate variables.

Those picked through observations:

- ExerciseAngina
- Oldpeak
- MaxHR
- Age
- Cholesterol
- ChestPainType

Then using the Best Susbet Selection method, we picked a 11 variable model including the following variables.

Important to note, that through the model fitting procedure, some factor variables with more than 2 levels, namely **ChestPainType**, are counted as more than one variable to account for the extra levels. Hence, the 11 variable model is actually an 8 variable model (without intercept), 9 with intercept, namely:

- Age
- Sex
- ChestPainType
- Cholesterol
- FastingBS
- ExerciseAngina
- Oldpeak

• ST_Slope

The 7 variable model included, so actually a 6 variable model (without intercept):

- Sex
- ChestPainType
- Cholesterol
- FastingBS
- ExerciseAngina
- ST_Slope

If we notice that some variables are insignificant going forward we can drop them.

Model Fitting and Selection

- Logistic regression
- LDA
- KNN
- Lasso
- SVM
- Classification Tree/Random forest

Logistic Regression

We begin by splitting the data into a train set and a test set:

```
#Split data into train and test set
set.seed(1)
test.sample<-sample(nrow(heart_dat), nrow(heart_dat)/3)#take a third of the data for a the test sample
heart.train<-heart_dat[-test.sample,]
heart.test<-heart_dat[test.sample,]</pre>
```

We fit a logistic regression model on all the variables:

```
#Fit on training set
log.fit.full<-glm(HeartDisease~., data=heart.train, family=binomial)</pre>
summary(log.fit.full)
##
## Call:
## glm(formula = HeartDisease ~ ., family = binomial, data = heart.train)
##
## Deviance Residuals:
##
       Min
                 1Q
                      Median
                                   3Q
                                            Max
## -2.5636
           -0.3817
                      0.1722
                               0.4381
                                         2.5911
##
## Coefficients:
##
                     Estimate Std. Error z value Pr(>|z|)
## (Intercept)
                    -1.158031 1.709467 -0.677 0.498138
## Age
                     0.020012 0.016248
                                           1.232 0.218068
## SexM
                     1.397490 0.350643
                                            3.986 6.73e-05 ***
## ChestPainTypeATA -1.973501 0.423387
                                          -4.661 3.14e-06 ***
```

0.006839

0.328815

ChestPainTypeNAP -1.825604 0.327484 -5.575 2.48e-08 ***

0.001252

-0.003774

1.193504

ChestPainTypeTA -1.448333

RestingBP

FastingBS

Cholesterol

0.520454 -2.783 0.005389 **

0.001329 -2.839 0.004529 **

0.183 0.854738

3.630 0.000284 ***

```
## RestingECGNormal -0.022448
                                0.332244 -0.068 0.946133
## RestingECGST
                    -0.137850
                                0.424071
                                         -0.325 0.745134
## MaxHR
                    -0.002369
                                0.006009
                                         -0.394 0.693413
## ExerciseAnginaY
                     1.138517
                                0.305169
                                           3.731 0.000191 ***
## Oldpeak
                     0.261969
                                0.143755
                                           1.822 0.068406
## ST SlopeFlat
                                0.533557
                                           2.228 0.025884 *
                     1.188740
## ST_SlopeUp
                    -1.150411
                                0.560438
                                         -2.053 0.040102 *
## ---
## Signif. codes: 0 '***' 0.001 '**' 0.05 '.' 0.1 ' ' 1
##
##
  (Dispersion parameter for binomial family taken to be 1)
##
##
       Null deviance: 843.64 on 611 degrees of freedom
## Residual deviance: 403.57
                             on 596
                                     degrees of freedom
## AIC: 435.57
##
## Number of Fisher Scoring iterations: 5
```

From the above summary it appears that a few variables are insignificant:

- Age (don't know why since it clearly affected disease status based on the previous observations)
- RestingBP
- RestingECG
- MaxHR
- Oldpeak

Let's drop the above variables and refit:

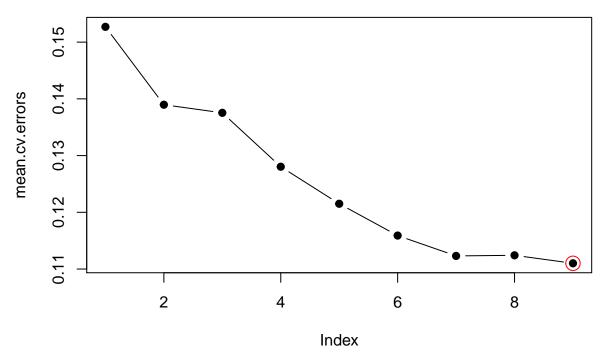
```
log.fit.reduced<-glm(HeartDisease~Sex+ChestPainType+Cholesterol+
                       FastingBS+ExerciseAngina+
                       ST_Slope, data=heart.train, family=binomial)
summary(log.fit.reduced)
##
## Call:
   glm(formula = HeartDisease ~ Sex + ChestPainType + Cholesterol +
##
       FastingBS + ExerciseAngina + ST_Slope, family = binomial,
##
       data = heart.train)
##
## Deviance Residuals:
##
       Min
                 1Q
                      Median
                                    3Q
                                            Max
## -2.5481 -0.3821
                      0.1829
                               0.4361
                                         2.6339
##
## Coefficients:
##
                     Estimate Std. Error z value Pr(>|z|)
## (Intercept)
                     0.372005
                                0.636667
                                            0.584 0.559017
## SexM
                     1.351079
                                0.347129
                                            3.892 9.94e-05 ***
## ChestPainTypeATA -2.085572
                                0.411416 -5.069 3.99e-07 ***
                                          -5.730 1.00e-08 ***
## ChestPainTypeNAP -1.824434
                                0.318403
## ChestPainTypeTA -1.362901
                                0.501833
                                          -2.716 0.006611 **
## Cholesterol
                    -0.003820
                                0.001278
                                          -2.989 0.002799 **
## FastingBS
                     1.229522
                                0.325157
                                            3.781 0.000156 ***
## ExerciseAnginaY
                     1.376880
                                0.280955
                                            4.901 9.55e-07 ***
## ST_SlopeFlat
                     0.759937
                                0.497115
                                            1.529 0.126340
## ST_SlopeUp
                    -1.734498
                                0.497834 -3.484 0.000494 ***
```

```
## ---
## Signif. codes: 0 '***' 0.001 '**' 0.05 '.' 0.1 ' ' 1
## (Dispersion parameter for binomial family taken to be 1)
##
       Null deviance: 843.64 on 611 degrees of freedom
##
## Residual deviance: 410.43 on 602 degrees of freedom
## AIC: 430.43
##
## Number of Fisher Scoring iterations: 5
Variables are all significant, we are hence decided on using the following variables - Sex, ChestPainType,
Cholesterol, FastingBS, ExerciseAngina, ST_Slope.
Let's fit a BSS model using the above variables and use CV to see what size model gets picked:
predict.regsubsets<-function(object, newdata, id,...){</pre>
  form<-as.formula(object$call[[2]])</pre>
  mat<-model.matrix(form, newdata)</pre>
  coefs<-coef(object, id=id)</pre>
  xvars<-names(coefs)</pre>
  mat[,xvars]%*%coefs
library(leaps)
#10-fold CV:
bss.fit2<-regsubsets(HeartDisease~Sex+ChestPainType+Cholesterol+
                        FastingBS+ExerciseAngina+
                        ST_Slope, data=heart_dat, nvmax=15)
k<-10
set.seed(1)
folds<-sample(rep(1:k, length=nrow(heart dat)))</pre>
cv.errors<-matrix(NA, k, 9, dimnames = list(NULL, paste(1:9)))
for(i in 1:k){
  bss.fit<-regsubsets(HeartDisease~Sex+ChestPainType+Cholesterol+
                        FastingBS+ExerciseAngina+
                        ST_Slope, data=heart_dat[folds!=i,], nvmax=15)
 for(j in 1:9){
    preds<-predict.regsubsets(bss.fit, heart_dat[folds==i,], id=j)</pre>
    cv.errors[i,j]<-mean((heart_dat$HeartDisease[folds==i]-preds)^2)</pre>
  }
}
mean.cv.errors<-apply(cv.errors, 2, mean)</pre>
```

points(which.min(mean.cv.errors), mean.cv.errors[which.min(mean.cv.errors)],

plot(mean.cv.errors, pch=19, type="b")+

col=2, cex=2)



integer(0)

-0.0004747709

##

As expected, the best performing model is the one using all the variables, let's compare the one of size 7 though:

```
mean.cv.errors[9]
##
           9
## 0.1110129
mean.cv.errors[7]
##
## 0.1123142
```

So the CV error rate is about the same between the 9 variable model and the 7 variable one.

0.1332335080

```
coef(bss.fit2, 9)
##
        (Intercept)
                                 SexM ChestPainTypeATA ChestPainTypeNAP
##
       0.6098170952
                         0.1599721369
                                          -0.2746092355
                                                            -0.2409557326
##
    ChestPainTypeTA
                                              FastingBS
                                                          ExerciseAnginaY
                          Cholesterol
                                           0.1379010961
      -0.1838422717
                        -0.0004693035
                                                             0.1714461086
##
##
       ST_SlopeFlat
                           ST_SlopeUp
                        -0.3056893520
       0.1094851551
##
coef(bss.fit2, 7)
##
        (Intercept)
                                 SexM ChestPainTypeATA ChestPainTypeNAP
##
       0.6831816536
                         0.1597063670
                                          -0.2492698622
                                                            -0.2183257397
##
        Cholesterol
                            FastingBS
                                        ExerciseAnginaY
                                                               ST_SlopeUp
```

These models use the same variables, the only difference is that the 9 variable model uses more dummies than the 7 variable one. So nothing new to see with regards to variables and we stick with the variables picked for our reduced logistic fit.

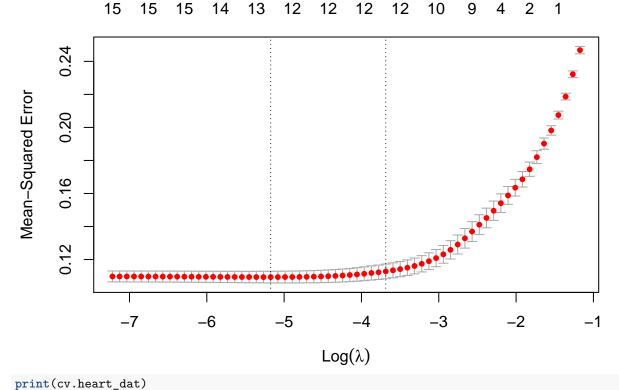
0.1889644545

-0.4037395302

Lasso

One final attempt for the variables. We fit a Lasso model and let it perform variable selection for us. Let's see how it does:

```
library(glmnet)
## Loading required package: Matrix
##
## Attaching package: 'Matrix'
## The following objects are masked from 'package:tidyr':
##
##
       expand, pack, unpack
## Loaded glmnet 4.1-1
#matrix of predictors
X<-model.matrix(HeartDisease~., data=heart_dat)</pre>
#response vector
Y<-heart_dat$HeartDisease
#Use CV to pick tuning parameter
set.seed(1)
cv.heart_dat<-cv.glmnet(X,Y, alpha=1)</pre>
plot(cv.heart dat)
```



```
##
## Call: cv.glmnet(x = X, y = Y, alpha = 1)
##
## Measure: Mean-Squared Error
```

So we see a Lasso model performs no variable selection, it keeps all variables, we can/will further examine the lasso model, but was mainly curious to see whether it would perform variable selection, and if yes on which variables. However, no variable selection was done.

Logistic regression does not make the same normality assumptions as linear regression, so no need to check for heteroscedasticity or normality. We do however check for mulitcollinearity:

Let's test for potential multicollinearity in our variables:

```
library(car)
## Loading required package: carData
##
## Attaching package: 'car'
## The following object is masked from 'package:dplyr':
##
##
       recode
## The following object is masked from 'package:purrr':
##
##
       some
vif(log.fit.reduced)
##
                      GVIF Df GVIF^(1/(2*Df))
## Sex
                  1.049867 1
                                     1.024630
                                     1.028447
## ChestPainType 1.183293 3
## Cholesterol
                  1.091503
                                     1.044750
                           1
## FastingBS
                  1.075821 1
                                     1.037218
## ExerciseAngina 1.124391
                                     1.060373
                           1
## ST_Slope
                                     1.039395
                  1.167137 2
```

All the VIFs < 2.5 (For logistic regression), indicating no issues regarding multicollinearity.

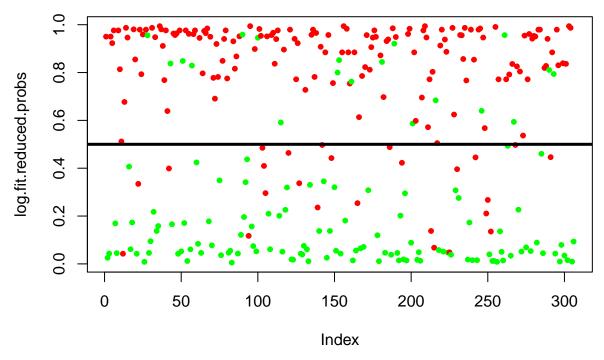
Evaluating the accuracy of the fit

We can now evaluate the accuracy of logistic regression fit using the test MSE:

```
#Probabilities
log.fit.reduced.probs<-predict(log.fit.reduced, heart.test,type="response")
length(log.fit.reduced.probs)#306</pre>
```

```
## [1] 306
```

Let's create a plot and observe how the 0.5 threshold for our posterior probabilities separates the observations:



integer(0)

The observations are separated quite nicely, the 0.5 threshold seems to be appropriate.

```
log.fit.reduced.preds<-rep("0", length(log.fit.reduced.probs))
log.fit.reduced.preds[log.fit.reduced.probs>0.5]<-"1"
#The confusion matrix
table(log.fit.reduced.preds, heart.test$HeartDisease)</pre>
```

The classification error rate:

```
#Test MSE
log.fit.reduced.MSE<-1-mean(log.fit.reduced.preds==heart.test$HeartDisease)
log.fit.reduced.MSE</pre>
```

[1] 0.1437908

Hence, our logistic model fit above will misslcassify patients as having heart disease 14.4% of the time, which is pretty good.

Since Logistic Regression is a more linear approach, let's try one that's a bit less parametric, namely KNN.

The predictors used in the logistic regression are Sex, ChestPainType, Cholesterol, FastingBS, ExerciseAngina and ST Slope.

KNN with K = 5

```
#Cannot run knn with categorical predictors, so need to convert
#all the predictors to numerical data
#Need to convert Sex, ChestPainType, ExerciseAngina and ST_Slope
#View(heart.train)
#Converting Sex
train.num_Sex<-factor(NA, levels=c("1","0"))</pre>
train.num_Sex[heart.train$Sex=="M"]<-"1"
train.num_Sex[heart.train$Sex=="F"]<-"0"</pre>
train.num_Sex<-as.numeric(as.character(train.num_Sex)) #0 is female, 1 is male
#Converting ChestPainType
summary(heart.train$ChestPainType)
## ASY ATA NAP TA
## 337 106 137 32
train.num_ChestPainType<-factor(NA, levels=c("1","2","3","4"))</pre>
train.num_ChestPainType[heart.train$ChestPainType=="ASY"]<-"1"
train.num_ChestPainType[heart.train$ChestPainType=="ATA"]<-"2"</pre>
train.num_ChestPainType[heart.train$ChestPainType=="NAP"]<-"3"</pre>
train.num_ChestPainType[heart.train$ChestPainType=="TA"]<-"4"</pre>
train.num_ChestPainType<-as.numeric(as.character(train.num_ChestPainType))
#Converting ExerciseAngina
summary(heart.train$ExerciseAngina)
##
   N
## 364 248
train.num_ExerciseAngina<-factor(NA, levels=c("1","0"))</pre>
train.num_ExerciseAngina[heart.train$ExerciseAngina=="Y"]<-"1"
train.num_ExerciseAngina[heart.train$ExerciseAngina=="N"]<-"0"
train.num_ExerciseAngina<-as.numeric(as.character(train.num_ExerciseAngina))</pre>
#Converting ST_Slope
summary(heart.train$ST_Slope)
## Down Flat
             Uр
    42 292 278
train.num_STslope<-factor(NA, levels=c("1","0","2"))</pre>
train.num_STslope[heart.train$ST_Slope=="Down"]<-"1"</pre>
train.num_STslope[heart.train$ST_Slope=="Flat"]<-"0"</pre>
train.num_STslope[heart.train$ST_Slope=="Up"]<-"2"</pre>
train.num STslope <- as.numeric (as.character (train.num STslope))
#Now let's add these numeric variables to a matrix
#Need to do the same for test set
#Converting Sex
test.num_Sex<-factor(NA, levels=c("1","0"))
test.num_Sex[heart.test$Sex=="M"]<-"1"
```

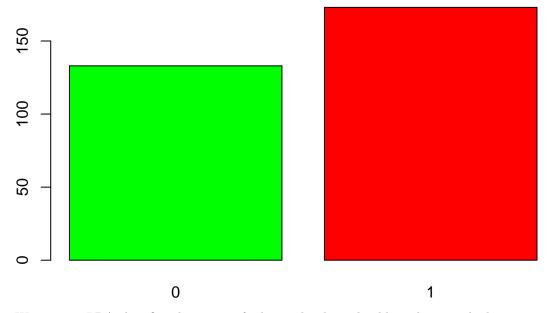
```
test.num_Sex[heart.test$Sex=="F"]<-"0"
test.num_Sex<-as.numeric(as.character(test.num_Sex))#0 is female, 1 is male
#Converting ChestPainType
test.num_ChestPainType<-factor(NA, levels=c("1","2","3","4"))
test.num_ChestPainType[heart.test$ChestPainType=="ASY"]<-"1"
test.num_ChestPainType[heart.test$ChestPainType=="ATA"]<-"2"</pre>
test.num ChestPainType[heart.test$ChestPainType=="NAP"]<-"3"
test.num_ChestPainType[heart.test$ChestPainType=="TA"]<-"4"</pre>
test.num ChestPainType<-as.numeric(as.character(test.num ChestPainType))</pre>
#Converting ExerciseAngina
test.num_ExerciseAngina<-factor(NA, levels=c("1","0"))</pre>
test.num_ExerciseAngina[heart.test$ExerciseAngina=="Y"]<-"1"
test.num_ExerciseAngina[heart.test$ExerciseAngina=="N"]<-"0"
test.num_ExerciseAngina<-as.numeric(as.character(test.num_ExerciseAngina))</pre>
#Converting ST_Slope
test.num_STslope<-factor(NA, levels=c("1","0","2"))
test.num_STslope[heart.test$ST_Slope=="Down"]<-"1"
test.num_STslope[heart.test$ST_Slope=="Flat"]<-"0"
test.num_STslope[heart.test$ST_Slope=="Up"]<-"2"</pre>
test.num_STslope<-as.numeric(as.character(test.num_STslope))</pre>
\#cbind(test.num\ Sex, test.num\ ChestPainType, test.num\ ExerciseAngina, test.num\ STslope,\ heart.test[,c(5,6)]
#Before we run KNN need to set a few variables
train.X<-cbind(train.num_Sex,train.num_ChestPainType,train.num_ExerciseAngina,
               train.num_STslope, heart.train[,c(5,6)])
test.X<-cbind(test.num_Sex,test.num_ChestPainType,test.num_ExerciseAngina,
              test.num_STslope, heart.test[,c(5,6)])
train.Y<-heart.train$HeartDisease</pre>
Now that we have converted everything to numeric variables, we can perform KNN:
library(class)
set.seed(1)
knn.pred<-knn(train.X, test.X, train.Y, k=5)
table(knn.pred, heart.test$HeartDisease)
##
## knn.pred
          0 97 33
##
          1 34 142
##
#The test MSE
knn.testMSE<-1-mean(knn.pred==heart.test$HeartDisease)
knn.testMSE
## [1] 0.2189542
testMSEs<-rbind(c("Logistic Regression", "KNN"),</pre>
                c(round(log.fit.reduced.MSE,3), round(knn.testMSE,3)))
```

Hence, our KNN (with K = 5) fit will misslcassify patients as having heart disease 21.9% of the time. It is hence outperformed by the logistic regression model.

We have now fit a KNN & a logistic regression, since the logistic regression outperformed the KNN model, the decision-boundary could be twoards the more linear side. Hence, next we fit a linear SVM and perhaps also a kernel SVM. Also, LDA sometimes outperforms logistic regression, so we fit a LDA model as well.

LDA

```
library (MASS)
##
## Attaching package: 'MASS'
## The following object is masked from 'package:dplyr':
##
##
       select
lda.fit<-lda(HeartDisease~Sex+ChestPainType+Cholesterol+
                        FastingBS+ExerciseAngina+
                        ST_Slope, data=heart.train)
lda.fit
## Call:
## lda(HeartDisease ~ Sex + ChestPainType + Cholesterol + FastingBS +
##
       ExerciseAngina + ST_Slope, data = heart.train)
##
## Prior probabilities of groups:
##
           0
## 0.4558824 0.5441176
##
## Group means:
          SexM ChestPainTypeATA ChestPainTypeNAP ChestPainTypeTA Cholesterol
##
                     0.32974910
                                        0.3333333
                                                        0.07168459
## 0 0.6738351
                                                                      223.9247
                     0.04204204
                                        0.1321321
                                                        0.03603604
                                                                      177.2853
## 1 0.9099099
     FastingBS ExerciseAnginaY ST_SlopeFlat ST_SlopeUp
                     0.1254480
## 0 0.1075269
                                   0.1827957 0.7813620
## 1 0.3363363
                     0.6396396
                                   0.7237237 0.1801802
##
## Coefficients of linear discriminants:
##
                             LD1
## SexM
                     0.587168536
## ChestPainTypeATA -1.130963259
## ChestPainTypeNAP -1.025739185
## ChestPainTypeTA -0.801288121
## Cholesterol
                    -0.001930109
## FastingBS
                     0.604040849
## ExerciseAnginaY
                     0.856645199
## ST_SlopeFlat
                     0.378939086
## ST_SlopeUp
                    -1.161916307
#Confusion matrix
lda.preds<-predict(lda.fit, heart.test, type="response")</pre>
plot(lda.preds$class, col=ifelse(heart.test$HeartDisease==1, "green", "red"))
```



We can see, LDA classifies observation fairly evenly, there should not be a too high amount of false positives nor false negatives. LDA model should be fairly accurate.

```
table(lda.preds$class, heart.test$HeartDisease)
##
##
             1
         0
##
     0 111
            22
##
     1
        20 153
#Test MSE
lda_testMSE<-1-mean(lda.preds$class==heart.test$HeartDisease)</pre>
lda\_testMSE
## [1] 0.1372549
testMSEs<-rbind(c("Logistic Regression", "KNN", "LDA"),</pre>
                 c(round(log.fit.reduced.MSE,3), round(knn.testMSE,3),
                   round(lda_testMSE, 3)))
```

Hence, our LDA fit will missleassify patients as having heart disease 13.7% of the time, outperforming both KNN and Logistic Regression.

SVMs

Let's begin by fitting a linear SVM (SVC) and use CV to pick the tuning parameters:

##

```
## Parameter tuning of 'svm':
##
## - sampling method: 10-fold cross validation
##
## - best parameters:
## cost
##
##
## - best performance: 0.1404283
##
## - Detailed performance results:
               error dispersion
##
      cost
## 1 1e-03 0.4558435 0.03650012
## 2 1e-02 0.1535167 0.05374642
## 3 1e-01 0.1437070 0.04958856
## 4 1e+00 0.1404283 0.05252013
## 5 5e+00 0.1469064 0.05496121
## 6 1e+01 0.1485457 0.05468272
## 7 1e+02 0.1485457 0.05468272
The lowest CV error (0.1404283) occurs with cost equal to 1.
svc.bestfit<-svc.tune.out$best.model</pre>
summary(svc.bestfit)
##
## Call:
## best.tune(method = svm, train.x = as.factor(HeartDisease) ~ Sex +
       ChestPainType + Cholesterol + FastingBS + ExerciseAngina + ST_Slope,
##
       data = heart.train, ranges = list(cost = c(0.001, 0.01, 0.1,
##
           1, 5, 10, 100)), kernel = "linear")
##
##
## Parameters:
##
      SVM-Type: C-classification
##
    SVM-Kernel: linear
##
          cost: 1
##
## Number of Support Vectors: 215
##
   ( 108 107 )
##
##
##
## Number of Classes: 2
##
## Levels:
## 0 1
The confusion matrix and classification error rate:
svc.bestfit.preds<-predict(svc.bestfit, heart.test)</pre>
#Confusion matrix
table(predict=svc.bestfit.preds, truth=heart.test$HeartDisease)
          truth
## predict
            0
```

Hence, our SVC will misslcassify patients as having heart disease 15.0% of the time, outperforming both KNN but not Logistic Regression and LDA.

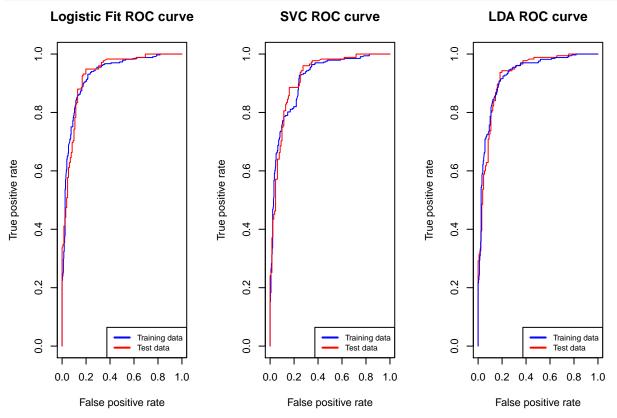
Let's observe our models through some ROC plots: Need to create a ROC plot function first:

```
library(ROCR)
roc_plot<-function(pred, truth, ...){
  predob=prediction(pred, truth)
  perf=performance(predob, "tpr", "fpr")
  plot(perf, ...)
}</pre>
```

Some variable manipulations:

```
#Logisitic fit on test data
log.test.fit<-glm(HeartDisease~Sex+ChestPainType+Cholesterol+
                     FastingBS+ExerciseAngina+ST_Slope,
                   data=heart.test, family=binomial)
\#SVC \ with \ cost = 1
svc.fit.opt<-svm(HeartDisease~Sex+ChestPainType+Cholesterol+
                     FastingBS+ExerciseAngina+ST_Slope,
                 data=heart_dat, kernel="linear", cost=1, decision.values=T)
#SVC fitted on training
svc.train.fitted<-attributes(predict(svc.fit.opt, heart.train, decision.values = T))$decision.values
#SVC fitted on test
svc.test.fitted<-attributes(predict(svc.fit.opt, heart.test, decision.values = T)) $decision.values
#LDA on train
lda.train.preds<-predict(lda.fit, heart.train, type="response")</pre>
lda.train.pr<-prediction(lda.train.preds$posterior[,2],</pre>
                          heart.train$HeartDisease)
lda.train.perf<-performance(lda.train.pr, "tpr", "fpr")</pre>
#LDA on test
lda.test.pr<-prediction(lda.preds$posterior[,2], heart.test$HeartDisease)</pre>
lda.test.perf<-performance(lda.test.pr, "tpr", "fpr")</pre>
```

Now the ROC plots:



We can see all three methods perform pretty accurately on the test data.

Lastly, let's fit a tree-based method.

Random forest

We fit a random forest on all the predictors:

```
library(randomForest)
```

```
## randomForest 4.6-14
## Type rfNews() to see new features/changes/bug fixes.
##
## Attaching package: 'randomForest'
## The following object is masked from 'package:dplyr':
##
## combine
## The following object is masked from 'package:ggplot2':
##
## margin
```

```
set.seed(1)
\#mtry = 3 because sqrt(11) = 3.3 (11 predictors)
rf.class.tree<-randomForest(as.factor(HeartDisease)~., data=heart.train,
                             mtry=3,
                             importance = T)
rf.class.tree
##
## Call:
   randomForest(formula = as.factor(HeartDisease) ~ ., data = heart.train,
##
                                                                                   mtry = 3, importance =
                  Type of random forest: classification
##
                        Number of trees: 500
##
## No. of variables tried at each split: 3
##
##
           OOB estimate of error rate: 13.89%
## Confusion matrix:
##
       0
           1 class.error
## 0 227 52
               0.1863799
## 1 33 300
               0.0990991
The classification error rate of our random forest:
rf.preds<-predict(rf.class.tree, newdata=heart.test, type="class")
#Confusion matrix
table(rf.preds, as.factor(heart.test$HeartDisease))
##
## rf.preds
##
          0 112 18
##
          1 19 157
rf_testMSE<-1-(112+157)/nrow(heart.test)
rf_testMSE
## [1] 0.120915
testMSEs<-rbind(c("Logistic Regression", "KNN", "LDA", "SVC",</pre>
                  "Random Forest"),
                c(round(log.fit.reduced.MSE,3), round(knn.testMSE,3),
                  round(lda_testMSE, 3), round(svc_testMSE, 3),
                  round(rf_testMSE, 3)))
```

Hence, our Random Forest will misslcassify patients as having heart disease 12.1% of the time, outperforming all other models.

Here are all our models' test MSEs:

```
testMSEs
```

```
## [,1] [,2] [,3] [,4] [,5]
## [1,] "Logistic Regression" "KNN" "LDA" "SVC" "Random Forest"
## [2,] "0.144" "0.219" "0.137" "0.15" "0.121"
```

They are all pretty close, by our top three is the **Random Forest**, followed by **LDA**, fo

Important to note, is that the Random Forest uses all the predictors, let's fit a random forest with the predictors that appeared significant for the logistic regression model & LDA, see if this new random forest

has an increased accuracy:

```
set.seed(1)
\#mtry = 3 \ because \ sqrt(11) = 3.3 \ (11 \ predictors)
rf.class.tree2<-randomForest(as.factor(HeartDisease)~Sex+ChestPainType+
                                Cholesterol+FastingBS + ExerciseAngina+
                                ST_Slope,
                              data=heart.train,
                             mtry=3,
                             importance = T)
rf.preds2<-predict(rf.class.tree2, newdata=heart.test, type="class")
#Confusion matrix
table(rf.preds2, as.factor(heart.test$HeartDisease))
##
## rf.preds2
               0
                   1
           0 110
                  22
##
           1
             21 153
#Test MSE
1-(110+153)/nrow(heart.test)
```

[1] 0.1405229

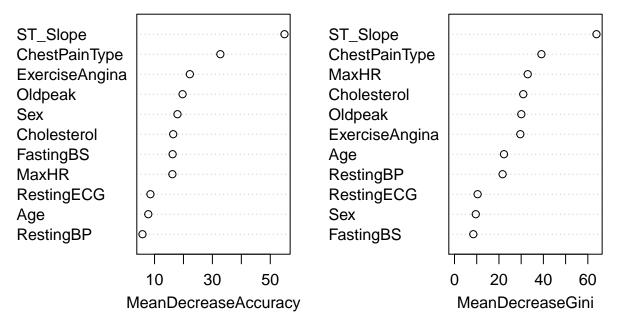
No, so the test MSE of the random forest fit with just the variables present in the logistic regression model and LDA, is of 0.141. Which is actually worse than LDA, but still, although even barely, better than logistic regression.

Let's take a closer look at our optimal random forest (the 1st one fit):

```
importance(rf.class.tree)
```

```
##
                                    1 MeanDecreaseAccuracy MeanDecreaseGini
                   7.606081 3.493711
                                                                   22.274020
## Age
                                                  7.842543
                                                                    9.583371
## Sex
                  12.413726 13.912112
                                                 17.929266
## ChestPainType
                  28.292830 22.116318
                                                 32.748089
                                                                   39.118943
## RestingBP
                   2.268328 5.654022
                                                  5.841480
                                                                   21.646204
## Cholesterol
                  14.756852 8.823478
                                                 16.455033
                                                                   30.947340
## FastingBS
                  9.692856 14.303261
                                                 16.253232
                                                                    8.477526
## RestingECG
                   5.185747 6.881668
                                                  8.587140
                                                                   10.404412
## MaxHR
                   3.361769 16.723785
                                                 16.174928
                                                                   32.952375
## ExerciseAngina 16.127171 16.897771
                                                 22.208088
                                                                   29.621633
## Oldpeak
                  19.065441 9.080074
                                                 19.691733
                                                                   30.075289
## ST_Slope
                  49.352894 34.869290
                                                 54.901592
                                                                   63.888538
varImpPlot(rf.class.tree)
```

rf.class.tree



Based on the random forest, it seems the most important variables in classifying patients as having heart disease or not are **ST_Slope** and **ChestPainType**.

Let's take another look at our top 3 models:

```
log.fit.reduced
```

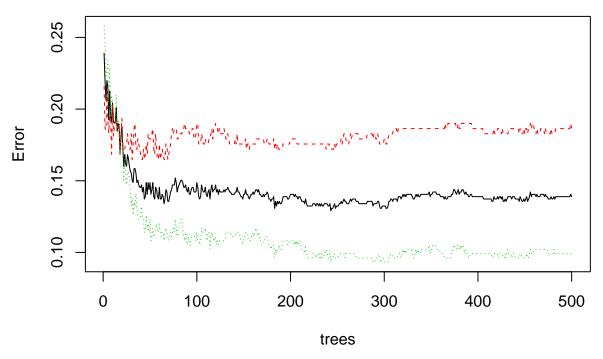
```
##
  Call: glm(formula = HeartDisease ~ Sex + ChestPainType + Cholesterol +
       FastingBS + ExerciseAngina + ST_Slope, family = binomial,
##
##
       data = heart.train)
##
   Coefficients:
                                         {\tt ChestPainTypeATA}
##
        (Intercept)
                                                            {\tt ChestPainTypeNAP}
                                  SexM
            0.37201
                               1.35108
                                                 -2.08557
##
                                                                    -1.82443
    ChestPainTypeTA
                           Cholesterol
                                                FastingBS
                                                             ExerciseAnginaY
##
           -1.36290
                              -0.00382
                                                  1.22952
                                                                     1.37688
##
       ST_SlopeFlat
                            ST_SlopeUp
##
            0.75994
                              -1.73450
##
##
## Degrees of Freedom: 611 Total (i.e. Null); 602 Residual
## Null Deviance:
                         843.6
## Residual Deviance: 410.4
                                 AIC: 430.4
lda.fit
## Call:
  lda(HeartDisease ~ Sex + ChestPainType + Cholesterol + FastingBS +
##
       ExerciseAngina + ST_Slope, data = heart.train)
##
## Prior probabilities of groups:
```

```
## 0.4558824 0.5441176
##
## Group means:
##
          SexM ChestPainTypeATA ChestPainTypeNAP ChestPainTypeTA Cholesterol
                     0.32974910
                                        0.3333333
                                                        0.07168459
## 0 0.6738351
                                                                       223.9247
## 1 0.9099099
                      0.04204204
                                        0.1321321
                                                        0.03603604
                                                                       177.2853
     FastingBS ExerciseAnginaY ST_SlopeFlat ST_SlopeUp
## 0 0.1075269
                      0.1254480
                                   0.1827957 0.7813620
## 1 0.3363363
                      0.6396396
                                   0.7237237 0.1801802
##
## Coefficients of linear discriminants:
                      0.587168536
## SexM
## ChestPainTypeATA -1.130963259
## ChestPainTypeNAP -1.025739185
## ChestPainTypeTA -0.801288121
## Cholesterol
                    -0.001930109
## FastingBS
                     0.604040849
## ExerciseAnginaY
                     0.856645199
## ST_SlopeFlat
                     0.378939086
## ST_SlopeUp
                    -1.161916307
rf.class.tree
##
    randomForest(formula = as.factor(HeartDisease) ~ ., data = heart.train,
                                                                                    mtry = 3, importance =
                  Type of random forest: classification
##
##
                         Number of trees: 500
## No. of variables tried at each split: 3
##
##
           OOB estimate of error rate: 13.89%
  Confusion matrix:
##
           1 class.error
       0
## 0 227
          52
               0.1863799
## 1 33 300
               0.0990991
Our final preferred model is the random forest, as it is the most accurate fit, and also the most interpretable
(sorta, need to understand more myself).
rf.class.tree
##
## Call:
##
    randomForest(formula = as.factor(HeartDisease) ~ ., data = heart.train,
                                                                                    mtry = 3, importance =
                  Type of random forest: classification
##
##
                         Number of trees: 500
## No. of variables tried at each split: 3
##
##
           OOB estimate of error rate: 13.89%
## Confusion matrix:
       0
           1 class.error
## 0 227
         52
               0.1863799
## 1 33 300
               0.0990991
```

##

plot(rf.class.tree)

rf.class.tree

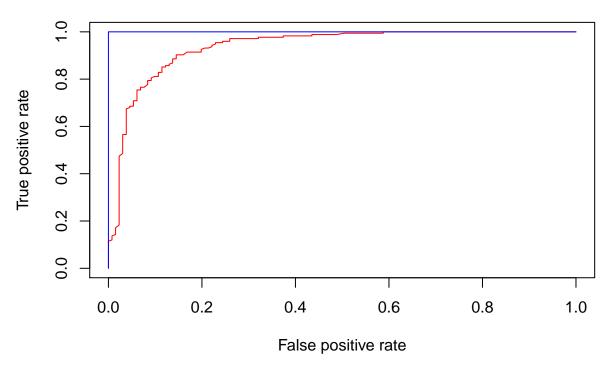


We see as the number of trees increase, the error rate stabilizes. Our Random Forest chose 500 trees.

ROC for random forest:

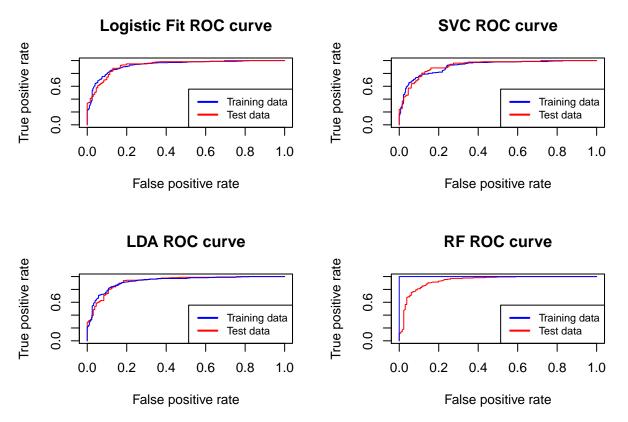
```
#RF on train
rf.train.pr<-predict(rf.class.tree, heart.train, type = "prob")[,2]
rf.train.prediction<-prediction(rf.train.pr, heart.train$HeartDisease)
rf.train.perf<-performance(rf.train.prediction, "tpr", "fpr")
#RF on test
rf.test.pr<-predict(rf.class.tree, heart.test, type = "prob")[,2]
rf.test.prediction<-prediction(rf.test.pr, heart.test$HeartDisease)
rf.test.perf<-performance(rf.test.prediction, "tpr", "fpr")

#The plot
plot(rf.test.perf, col="red")
plot(rf.train.perf, add=T, col="blue")</pre>
```



So we can see the 100% accuracy the random forest achieves on the training data, but also the high accuracy it achieves on the test data, which is what interests us.

```
par(mfrow=c(2,2))
#Log fit
roc_plot(log.fit.reduced\fitted.values, heart.train\final*HeartDisease, col="blue",main="Logistic Fit ROC cur
roc_plot(log.test.fit$fitted.values, heart.test$HeartDisease, add=T,col=2)
legend("bottomright", legend=c("Training data", "Test data"),
       col=c("blue",2), lty=1, lwd=2, cex=.8)
#SVC
roc_plot(svc.train.fitted, heart.train$HeartDisease, col="blue",main="SVC ROC curve")
roc_plot(svc.test.fitted, heart.test$HeartDisease, add=T,col=2)
legend("bottomright", legend=c("Training data", "Test data"),
       col=c("blue",2), lty=1, lwd=2, cex=.8)
#LDA
plot(lda.test.perf, col="red",main="LDA ROC curve")
plot(lda.train.perf, col="blue", add=T)
legend("bottomright", legend=c("Training data", "Test data"),
       col=c("blue",2), lty=1, lwd=2, cex=.8)
#RF
plot(rf.test.perf, col="red",main="RF ROC curve")
plot(rf.train.perf, add=T, col="blue")
legend("bottomright", legend=c("Training data", "Test data"),
       col=c("blue",2), lty=1, lwd=2, cex=.8)
```



So in comparison, we see the all four methods have similar accuracy on the test data, looking at it in more detail we saw the Random Forest performed the best, followed by LDA, then Logistic Regression and then SVC. KNN was not in its ballpark in this study.

testMSEs

```
## [,1] [,2] [,3] [,4] [,5]
## [1,] "Logistic Regression" "KNN" "LDA" "SVC" "Random Forest"
## [2,] "0.144" "0.219" "0.137" "0.15" "0.121"
```

Perhaps if we had more observations, KNN could perform better due to is non-parametric nature, however it is not the case.