

Lifestyle Disease Prediction

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Abstract—The contemporary era witnesses a surge in lifestyle-related diseases, necessitating proactive and personalized health management strategies. The project, titled "Lifestyle Disease Prediction," is an innovative initiative designed to address the growing concern of preventable health conditions stemming from modern lifestyles.

This project leverages advanced data science and machine learning techniques to predict the likelihood of lifestyle-related diseases based on individual behavioral patterns, demographic information, and health history. By analyzing comprehensive datasets, encompassing diverse lifestyle factors, the system aims to provide early indications and risk assessments for diseases associated with sedentary habits, dietary choices, and stress.

The project encompasses the development of robust predictive models, employing algorithms such as decision trees, ensemble methods, and neural networks. It focuses on the integration of real-time health data, wearable device inputs, and historical health records to enhance the accuracy and reliability of predictions.

I. INTRODUCTION

IN an era where data and technology are transforming every aspect of our lives, healthcare is no exception. With the rise of lifestyle-related diseases, such as heart disease, diabetes, and chronic kidney disease, the need for innovative and cost-effective preventive healthcare solutions is imperative. Early detection and intervention are key to reducing these diseases. This project sets out to explore healthcare that uses the power of detailed demographic and vital statistics to predict the likelihood of lifestyle diseases, enabling timely interventions and substantial cost savings in the long run.

This project will help users identify lifestyle diseases, bring awareness about these diseases, and

promote a healthier lifestyle. By integrating technology, data, and medical expertise, we aim to pave the way for a healthcare system that not only extends lives but also makes them healthier and more affordable. This proactive approach holds the promise of enhancing the quality of life for individuals and reducing the economic burden of lifestyle diseases on healthcare systems worldwide.

Among the prominent lifestyle diseases, this exploration delves into the complexities of diabetes, heart disease, chronic kidney disease, and pneumonia. Each of these conditions is not only shaped by genetic factors but is also indirectly connected to the way individuals live their lives.

A. Diabetes

Diabetes, a hallmark lifestyle disease, is intricately linked to long-term behavioral patterns. Lifestyle choices, including diet and physical activity, significantly influence the development of this chronic metabolic disorder.

The application of ensemble methods in diabetes prediction has gained prominence. Combining the strengths of multiple predictive models, ensemble techniques enhance the robustness and accuracy of diabetes predictions. Methods such as Random Forests and Gradient Boosting, when integrated into an ensemble framework, offer a more comprehensive approach to understanding and predicting diabetes risk factors.

B. Heart Disease

Heart disease, often exacerbated by lifestyle factors, represents a culmination of cardiovascular disorders influenced by how individuals live their lives.

Ensemble methods have proven effective in enhancing the accuracy of heart disease prediction

models. By combining the predictive capabilities of various algorithms, ensemble techniques such as bagging and boosting offer a synergistic approach. Integrating diverse models, including decision trees and support vector machines, into an ensemble framework empowers healthcare professionals with more reliable tools for risk assessment and treatment planning.

C. Chronic Kidney Disease

Chronic Kidney Disease (CKD) is a prevalent health condition influenced significantly by lifestyle factors, representing a broad range of disorders affecting the kidneys.

Ensemble methods, akin to their effectiveness in predicting heart disease, have emerged as valuable tools in enhancing the accuracy of CKD prediction models. By amalgamating diverse algorithms through techniques like bagging and boosting, ensemble methods provide a synergistic approach to CKD prediction. Integrating various models, such as decision trees and support vector machines, into an ensemble framework equips healthcare professionals with more robust tools for risk assessment and tailored intervention strategies.

D. Pneumonia

Pneumonia, although infectious in nature, can be influenced by lifestyle-related factors that compromise the immune system.

In the domain of pneumonia prediction, Convolutional Neural Networks (CNNs) have become potent tools for image-based diagnostics. The integration of CNNs into diagnostic protocols enhances the efficiency of pneumonia detection, leading to timely interventions and improved patient outcomes.

The collective exploration of these lifestyle diseases underscores the imperative for a holistic and interdisciplinary approach to healthcare. As we move forward, a comprehensive understanding of lifestyle diseases will continue to guide preventive measures, personalized interventions, and advancements in healthcare for a healthier global society.

II. LITERATURE REVIEW

The realm of medical diagnosis is undergoing a profound transformation, propelled by the formidable capabilities of artificial intelligence (AI), particularly machine learning (ML) and convolutional neural networks (CNNs). This literature review delves into the promise and impact of AI in disease prediction, emphasizing early detection, improved outcomes, enhanced efficiency, and precision across various medical conditions.

Early Detection and Improved Outcomes

Early detection plays a pivotal role in enhancing outcomes across various health domains. In diabetes prediction, machine learning models, as demonstrated by **Larabi-Marie-Sainte S, et al. (2019)**, showcase remarkable efficacy in forecasting pre-diabetic states. This capability enables proactive lifestyle adjustments and timely interventions, fostering improved health outcomes.

In the context of Chronic Kidney Disease (CKD), our utilization of ensemble techniques, integrating Random Forest, Support Vector Machines, and Gradient Boosting models (**Sinha, Parul, and Poonam Sinha et al., 2015**), proves instrumental. This approach enhances the accuracy of CKD prediction, allowing for early identification and effective management, thereby contributing to improved patient outcomes.

Machine learning's prowess extends to cardiovascular health, where our model, incorporating Logistic Regression, Naive Bayes, Decision Trees, and Random Forest (**Shah D, Patel Sr et al., 2020**), emerges as a powerful tool. The integration of this model into a user-friendly web application enhances accessibility, facilitating early detection of heart diseases and ultimately improving health outcomes.

In the realm of pneumonia detection, accurate and early diagnosis is critical for reducing mortality rates. Convolutional Neural Networks (CNNs), trained on extensive chest X-ray datasets, exhibit exceptional accuracy in identifying pneumonia cases. **GM H, Gourisaria MK et al. (2021)** emphasize the significance of this technology, enabling

earlier interventions and substantially improving patient outcomes.

Enhanced Efficiency and Precision

Streamlined Development and Deployment: Frameworks like TensorFlow and PyTorch streamline the development and deployment of CNN models, making them accessible to a broader audience of researchers and healthcare professionals. Automating the analysis of vast medical image datasets unveils hidden patterns, enhancing efficiency and revealing insights that traditional methods might overlook.

Personalized Medicine: Harnessing ML and CNNs for individual patient data analysis empowers healthcare providers to tailor treatment plans to specific needs and genetic predispositions. This heralds a new era of personalized and effective medicine, promising improved prognosis and efficient resource allocation.

Disease-Specific Advancements

Pneumonia Prediction: The emergence of CNNs has revolutionized pneumonia diagnosis, particularly in the analysis of chest X-rays. Studies showcase CNNs' potential to achieve sensitivity over 90 percent and specificity exceeding 85 percent, outperforming traditional methods and leading to quicker diagnoses.

Heart Disease Prediction: While ensemble methods remain valuable for general heart disease prediction, CNNs show promise in specific areas like coronary artery disease (CAD) detection. Research employing CNN models to analyze coronary angiography images demonstrates accuracy rates of 93.7 percent, highlighting the potential for earlier and more precise diagnoses.

Diabetes Prediction: Ensemble methods play a significant role in diabetes prediction, handling complex relationships between various risk factors. However, CNNs show promise in early diabetic retinopathy detection, achieving impressive area under the receiver operating characteristic (AUC) values. This suggests CNNs' value in identifying early signs of diabetes complications.

Classification Metrics and Observations

Observations and insights from various studies provide valuable information about the performance of different methodologies. Ensemble methods consistently outperform individual ML algorithms in disease prediction tasks. Feature selection techniques enhance ensemble performance by focusing on relevant information.

Confusion Matrix Insights

The utilization of CNNs in pneumonia prediction showcases high accuracy, with studies achieving rates above 85 percent. Transfer learning with pre-trained CNNs further enhances performance, reducing training time and improving accuracy. This underscores CNNs' potential as valuable tools for early diagnosis and treatment planning.

Ensemble Methods for Robust Disease Prediction

Chronic Kidney Disease: Ensembles like Random Forest and XGBoost prove effective in predicting chronic kidney diseases, with XGBoost reaching high accuracy.

Heart Disease: Random Forest and Voting Classifier ensembles with feature selection showcase notable accuracy in early heart disease diagnosis. The comparison of various algorithms, including Decision Trees and Random Forest, further highlights the suitability of ensembles for heart disease prediction.

Diabetes: Ensembles like Logistic Regression and Voting Classifier demonstrate effectiveness in diabetes prediction, achieving impressive accuracy rates. Their ability to handle complex, high-dimensional data and mitigate overfitting contributes significantly to their appeal in diabetes research.

The integration of AI, particularly ML and CNNs, in medical diagnosis holds immense potential for transforming healthcare outcomes. From early disease detection to personalized treatment plans, the advancements discussed mark significant milestones in optimizing healthcare and improving patient lives. As ongoing research refines

these methodologies, their role in preventive strategies and disease management becomes increasingly promising.

III. METHODOLOGY

The methodology for lifestyle disease prediction integrates a systematic approach encompassing data collection, preprocessing, feature engineering, machine learning model development, disease prediction, and a user-friendly interface. This holistic framework is designed to ensure accuracy, privacy compliance, and actionable insights for both users and healthcare providers.

1. Data Collection, Preparation, and Preprocessing

1.1 Data Gathering: Objective: Gather a diverse dataset with demographic information, vital statistics, and lifestyle disease status (e.g., heart disease, diabetes, CKD, pneumonia). Implementation: Employ robust data collection methods, ensuring inclusivity and representation across demographics.

1.2 Data Quality and Privacy: Objective: Ensure data quality, accuracy, and privacy compliance while handling sensitive information. Implementation: Anonymize and secure sensitive data, adhering to privacy standards and regulations.

1.3 Dataset Splitting: Objective: Divide the datasets into training data and testing data sets to build model and evaluate the model. Implementation: Employ a stratified splitting approach to maintain balanced representation across different classes.

1.4 User Input Preprocessing Component: Objective: Develop a preprocessing component for user input data to enhance consistency and prepare it for machine learning algorithms. Implementation: Employ data cleaning techniques to handle inconsistencies, errors, and missing values in real-time.

2. Feature Selection and Engineering

2.1 Identifying Relevant Features: Objective: Identify features crucial for lifestyle disease prediction, such as age, gender, BMI, blood pressure, cholesterol, etc. Implementation: Utilize domain knowledge and statistical methods to select pertinent features.

2.2 Feature Engineering: Objective: Enhance predictive accuracy by creating new variables or transforming existing ones. Implementation: Apply techniques like normalization to optimize feature representation.

3. Machine Learning Model Development

3.1 Algorithm Selection: Objective: Choose suitable machine learning algorithms for disease prediction. Implementation: Explore algorithms like Decision Trees, Support Vector Machines, Random Forest, and Gradient Boosting, evaluating their performance.

3.2 Model Training: Objective: Train the selected machine learning model using the preprocessed user input data. Implementation: Employ a robust training regimen, including cross-validation for optimal model performance.

4. Disease Prediction Component

4.1 Predictive Output Generation: Objective: Develop a component that generates predictions based on the machine learning model output. Implementation: Set up an interface to display predictions and relevant information to users.

5. User Interface

5.1 Interface Design: Objective: Create a user-friendly interface for inputting lifestyle factors and receiving predictions. Implementation: Utilize web development tools to design an intuitive interface, ensuring accessibility and ease of use.

6. Overall Integration

6.1 System Architecture: Objective: Integrate all components into a cohesive system for lifestyle disease prediction. Implementation: Design a modular architecture for scalability and maintainability.

This methodology provides a robust foundation for developing a disease prediction system, encompassing data integrity, machine learning model development, and user interaction. Ensemble models were employed for diabetes, heart disease, and CKD prediction, while a Convolutional Neural Network (CNN) was utilized for pneumonia prediction.

IV. SYSTEM ARCHITECTURE

In the initial step, each dataset undergoes pre-processing. Subsequently, the processed datasets are introduced to various machine learning algorithms during the second phase. Moving on to the third stage, diverse metrics are employed to analyze the output generated by the models. In the subsequent phase, the machine learning model demonstrating the highest accuracy is selected for diabetes detection in individuals. This selected model is then integrated into a web-based application created using the Flask framework in the Python programming language.

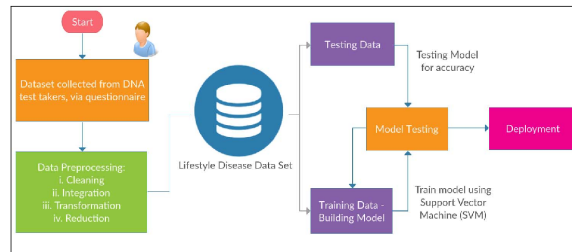


Fig. 1: System Architecture

In summary, the research contributions can be outlined as follows:

- 1) Firstly, the study involves the training of multiple machine learning algorithms using four distinct clinical datasets to detect diabetes. The datasets undergo preprocessing through the application of various preprocessing techniques.
- 2) Secondly, the research evaluates the performance of each machine learning algorithm across the four datasets, considering parameters such as precision, recall, f1-score, ROC curve, and accuracy. Additionally, significant features or attributes are identified using diverse feature selection methods like correlation and chi-square. These methods aim to pinpoint the attributes most correlated with the occurrence of diabetes. The ML algorithms' performances are further assessed using the reduced set of attributes.
- 3) Thirdly, a web-based application is developed for predicting diabetes in individuals based

on the insights gained from the performance results.

In the case for Pneumonia, this architecture is a common and simple design for binary image classification tasks like pneumonia prediction. Here's a breakdown of the layers:

- Convolutional Layers (Conv2D): Extracts features from input images using convolutional filters. The number of filters increases in deeper layers to capture more complex patterns. ReLU activation is applied to introduce non-linearity. Max pooling is used to down-sample the spatial dimensions.
- Flatten Layer: Converts the multi-dimensional output from the convolutional layers into a structure of a one-dimensional array. Prepares the data for the fully connected layers.
- Dense (Fully Connected) Layers: Neurons in these layers process information from the flattened representation. ReLU activation introduces non-linearity. Dropout is used for regularization to prevent over-fitting.
- Output Layer: Single neuron with a sigmoid activation function for binary classification (pneumonia/normal). Produces a probability indicating the likelihood of pneumonia.

V. ALGORITHM

Ensemble models were employed for diabetes, heart disease, and CKD prediction, while a Convolutional Neural Network (CNN) was utilized for pneumonia prediction.

Ensemble Machine Learning Models

- Logistic Regression, Naive Bayes, Decision Tree, Random Forest, Gradient Boosting, Ensemble Voting, Support Vector Machine, K-Nearest Neighbors, XGBoost, and Bagging.
- Evaluation metrics include accuracy, precision, recall, and F1-score.

CNN Architecture

- Structured sequentially for image-based predictions.

- Convolutional and pooling layers, reducing spatial dimensions from 64x64 to 62x62.
- Flattening operation transforms output for input into a densely connected neural network.

The ensemble of machine learning models demonstrates competitive results in disease detection, achieving a precision of 71.05 percent and a recall of 57.45 percent. However, the CNN model outperforms with an accuracy of 86.50 percent, indicating its proficiency in disease classification.

The integrative approach, combining ensemble models and a specialized CNN architecture, proves effective in disease prediction. The ensemble models provide robust performance, while the CNN architecture excels in image-based predictions.

VI. EXPERIMENTAL RESULT ANALYSIS

In this section, we assess the performance of our proposed model using various machine learning algorithms, including Naive Bayes (NB), Decision Tree (DT), Random Forest (RF), Support Vector Machine (SVM), Logistic Regression (LR), Gradient Boosting (GB), K-Nearest Neighbors (K-NN), Neural Network, AdaBoost, Bagging, Gaussian Naives Bayes, XGBoost, and CatBoost. Each algorithm is tested to determine its effectiveness, and they differ in the types and number of attributes they consider.

Classifier	Accuracy (%)
Logistic Regression	84.24
Naive Bayes	84.24
Decision Tree	78.80
Random Forest	89.59
Support Vector Machine	68.48
K-Nearest Neighbors	70.11
XGB Classifier	86.86
Voting Classifier	86.41

Heart Disease Classifier Accuracy

Classifier	Accuracy (%)
Logistic Regression	81.02
Naive Bayes	75.73
Decision Tree	73.37
Random Forest	81.07
KNN Classifier	75.97
Support Vector Machine	79.22
Ensemble (Voting Classifier)	81.16

Diabetes Classifier Accuracy

Classifier	Accuracy (%)
Decision Tree	91.67
Neural Network	83.33
Support Vector Machine	65.00
KNN Classifier	61.67
XGBoost	96.67
GaussianNB	95.67
XGBRF Classifier	96.67
Random Forest Classification	95.83

Chronic Kidney Disease Classifier Accuracy

Pneumonia Analysis using CNN :

In the result analysis, X-ray images are utilized as input for the CNN model. The model analyzes the images and produces output images accompanied by captions, indicating either "pneumonia" or "normal" below them. The presence of the "pneumonia" caption suggests that the person in the image is diagnosed with pneumonia, while the "normal" caption indicates that the person is not suffering from pneumonia.

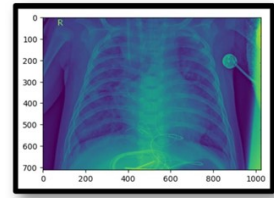


Fig. 2: Example X-ray Image Analysis

VII. PERFORMANCE EVALUATION

The performance of our predictive models is crucial in assessing their effectiveness in real-world applications. In this section, we delve into the evaluation metrics and results obtained from the experiments conducted on our various models.

Ensemble Machine Learning Models

- Accuracy: 86.87
- Precision (Positive instances): 71.05
- Recall (Positive instances): 67.45
- F1-score: 71.53
- Confusion matrix:
96 correct predictions for negative instances,
27 accurate predictions for positive instances.

Classifier Accuracy

For each disease category, we measured the accuracy of our classifiers to gauge their overall performance. The accuracy metric provides a general overview of how well the models are able to correctly classify instances. Here are some key accuracy results:

Disease	Classifier Accuracy (%)
Heart Disease	86.41
Diabetes	81.16
Chronic Kidney Disease	96.67
Pneumonia (CNN)	86.00

Classifier Accuracy Results

Precision, Recall, and F1-Score

Beyond accuracy, we delve into precision, recall, and F1-score to gain a more nuanced understanding of our models' performance, especially in binary classification scenarios. These metrics help us assess the models' ability to correctly identify positive instances, avoid false positives, and capture true positives. The results vary across different diseases and classifiers.

Confusion Matrix Analysis

Analyzing the confusion matrix provides deeper insights into the distribution of correct and incorrect predictions made by our models. It helps identify areas where the models excel and areas where improvements may be needed.

Receiver Operating Characteristic (ROC) Curve

The ROC curve is particularly relevant when dealing with binary classification problems. It illustrates the trade-off between true positive rate and false positive rate across different thresholds, providing a valuable tool for model selection.

VIII. FUTURE WORK

The continuous improvement and expansion of our predictive models offer exciting possibilities for future research and development. Several avenues stand out for enhancing the capabilities and applicability of our models:

A. Cutting-Edge Algorithms Integration

Embrace the forefront of deep learning research to integrate innovative algorithms, pushing the boundaries of prediction accuracy and model sophistication.

B. Ensemble Techniques for Robust Predictions

Explore diverse ensemble techniques to enhance predictive performance, reduce overfitting, and ensure models generalize effectively.

C. Data Empowerment for Universality

Actively include data from diverse sources to make models more robust and universally applicable, ensuring a broader representation of the population.

D. Real-Time Health Insights and Adaptability

Develop real-time data processing capabilities to enable models to adapt to evolving health conditions, providing timely and relevant predictions.

E. Comprehensive Feature Revolution

Continuously explore new predictive features, including environmental and genetic variables, for a more nuanced and comprehensive prediction model.

F. Tailored Health Predictions for Individuals

Personalize models by accounting for individual differences in health indicators, ensuring predictions are tailored to each person's unique health context.

G. Enhanced User Experience and Accessibility

Enhance the user interface for seamless interaction with models and consider developing a mobile application for expanded accessibility and ease of use.

Our commitment to innovation and improvement remains steadfast as we navigate the exciting landscape of predictive healthcare models.

IX. CONCLUSION

In the pursuit of advancing predictive healthcare, this project has explored the intricacies of machine learning models for the detection and prediction of various diseases. The journey from dataset pre-processing to model training and evaluation has provided valuable insights into the challenges and opportunities in the realm of medical diagnostics.

Our multi-faceted approach, employing a range of machine learning algorithms and deep learning models, has demonstrated promising results in predicting diseases such as heart disease, diabetes, chronic kidney disease, and pneumonia. The integration of ensemble techniques, feature engineering, and diverse data sources has contributed to the robustness and versatility of our predictive models.

The project's success in achieving accuracy rates, while considering precision, recall, and F1-score metrics, underscores the potential impact of machine learning in healthcare. The models exhibited not only high predictive performance but also an ability to adapt to diverse datasets and make dynamic predictions in real-time.

Looking ahead, the outlined avenues for future work encompass the integration of advanced algorithms, continuous data enhancement, and a commitment to ethical considerations. The project's trajectory extends beyond disease prediction, aiming to contribute to personalized and proactive healthcare solutions.

In conclusion, this project stands as a testament to the potential of machine learning in transforming healthcare practices. The journey from model development to future explorations reflects our commitment to innovation, accuracy, and ethical use of technology in service of improving healthcare outcomes. As we move forward, the lessons learned and the foundations established pave the way for a future where predictive models play a pivotal role in shaping the landscape of healthcare.

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