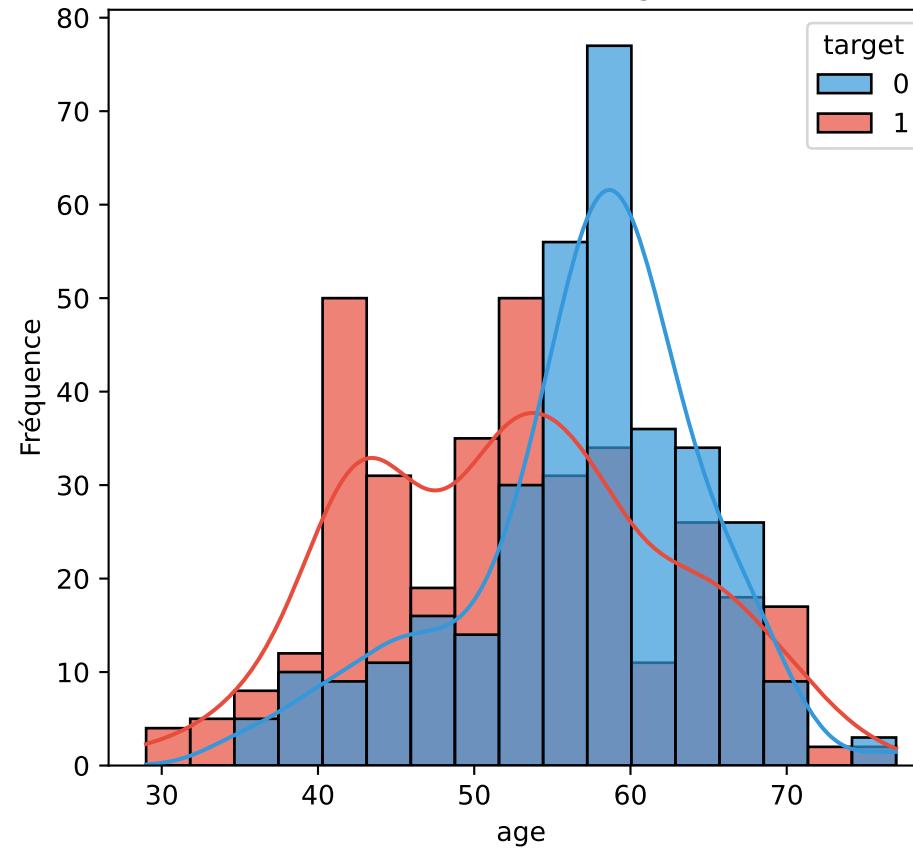


# **Analyse et Prédition des Maladies Cardiaques**

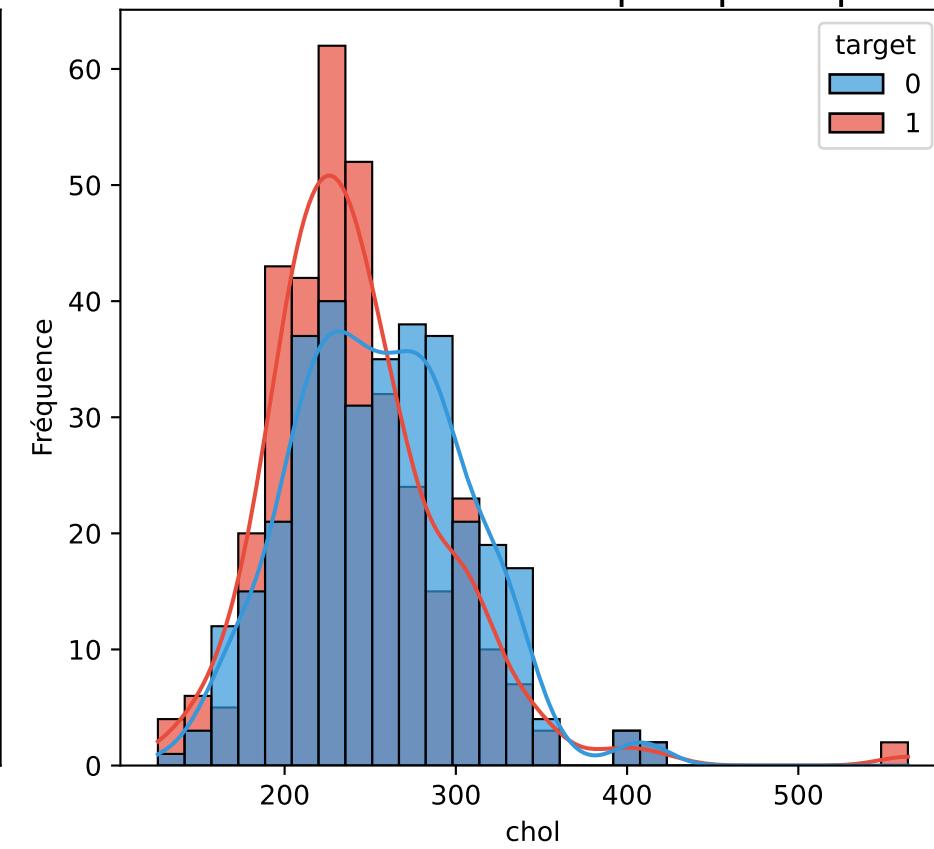
Rapport des Visualisations (Version Corrigée)

Date: Avril 2025

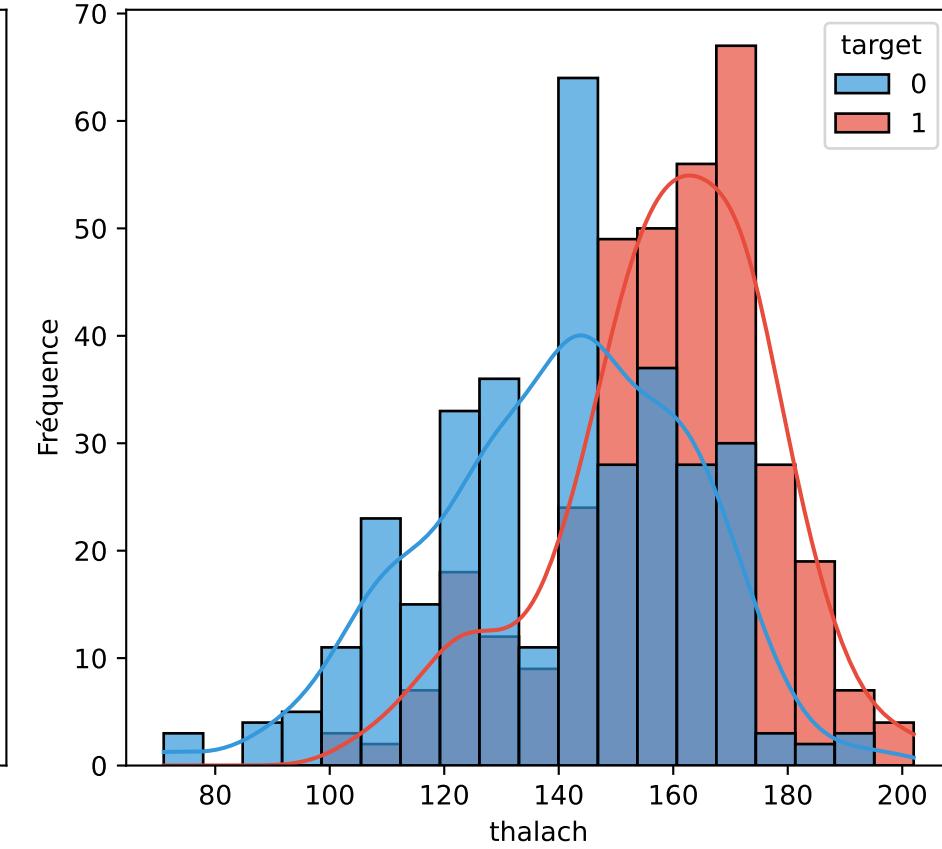
Distribution de age



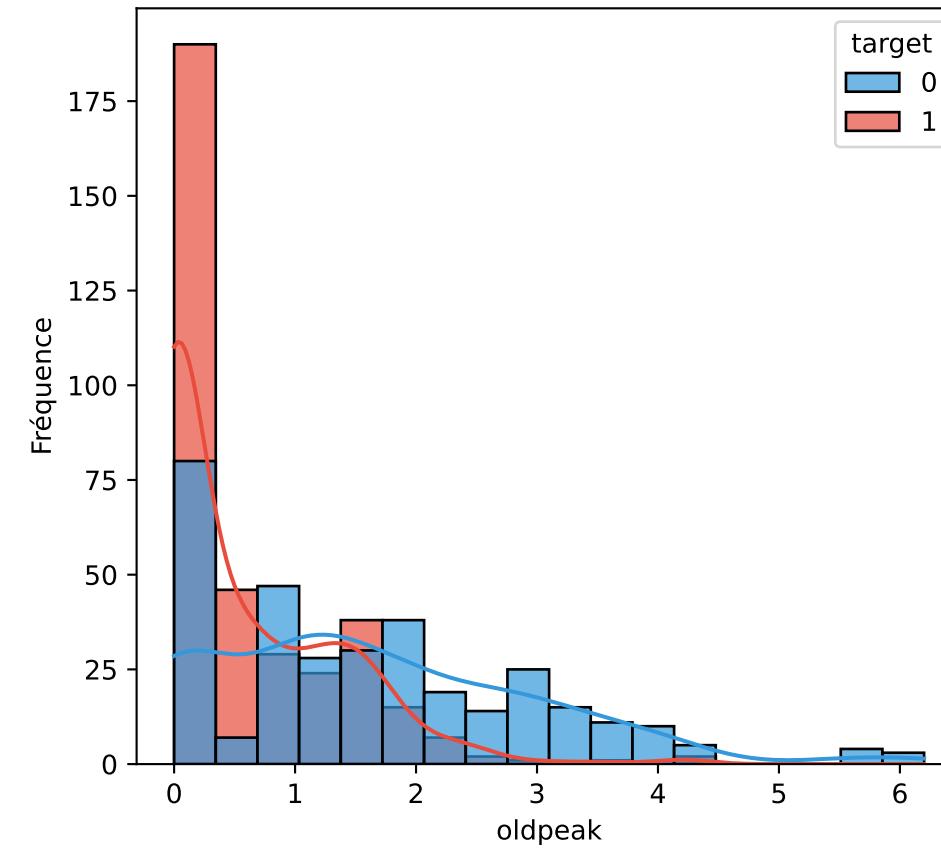
Distribution des caractéristiques principales



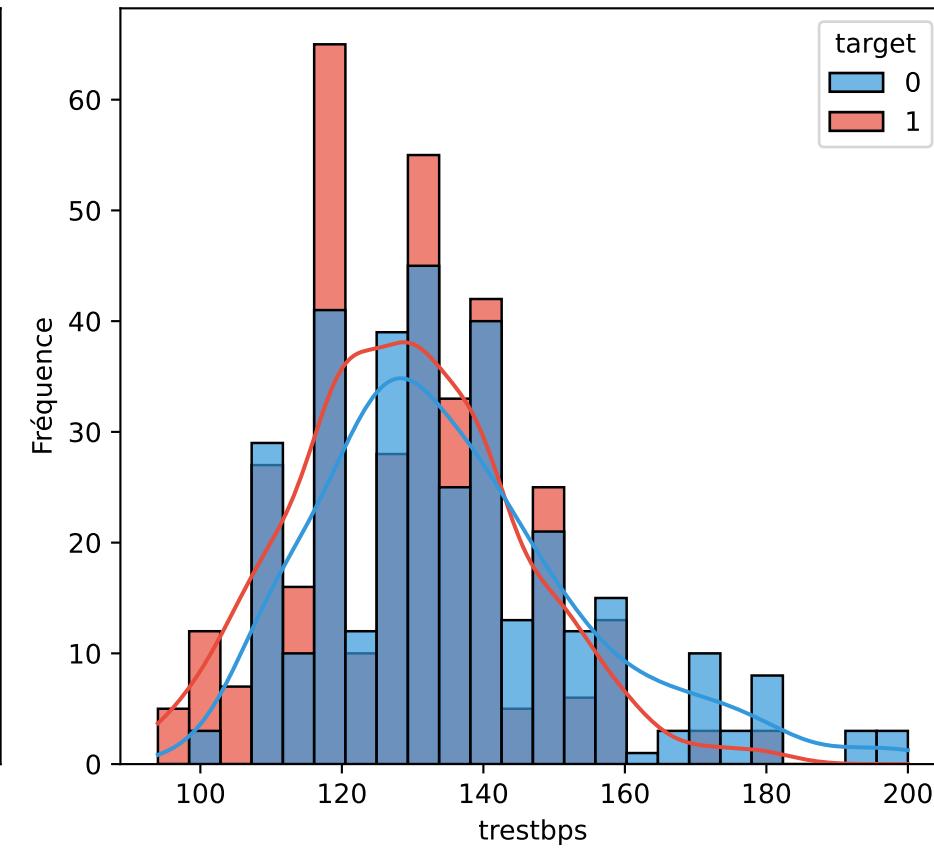
Distribution de thalach



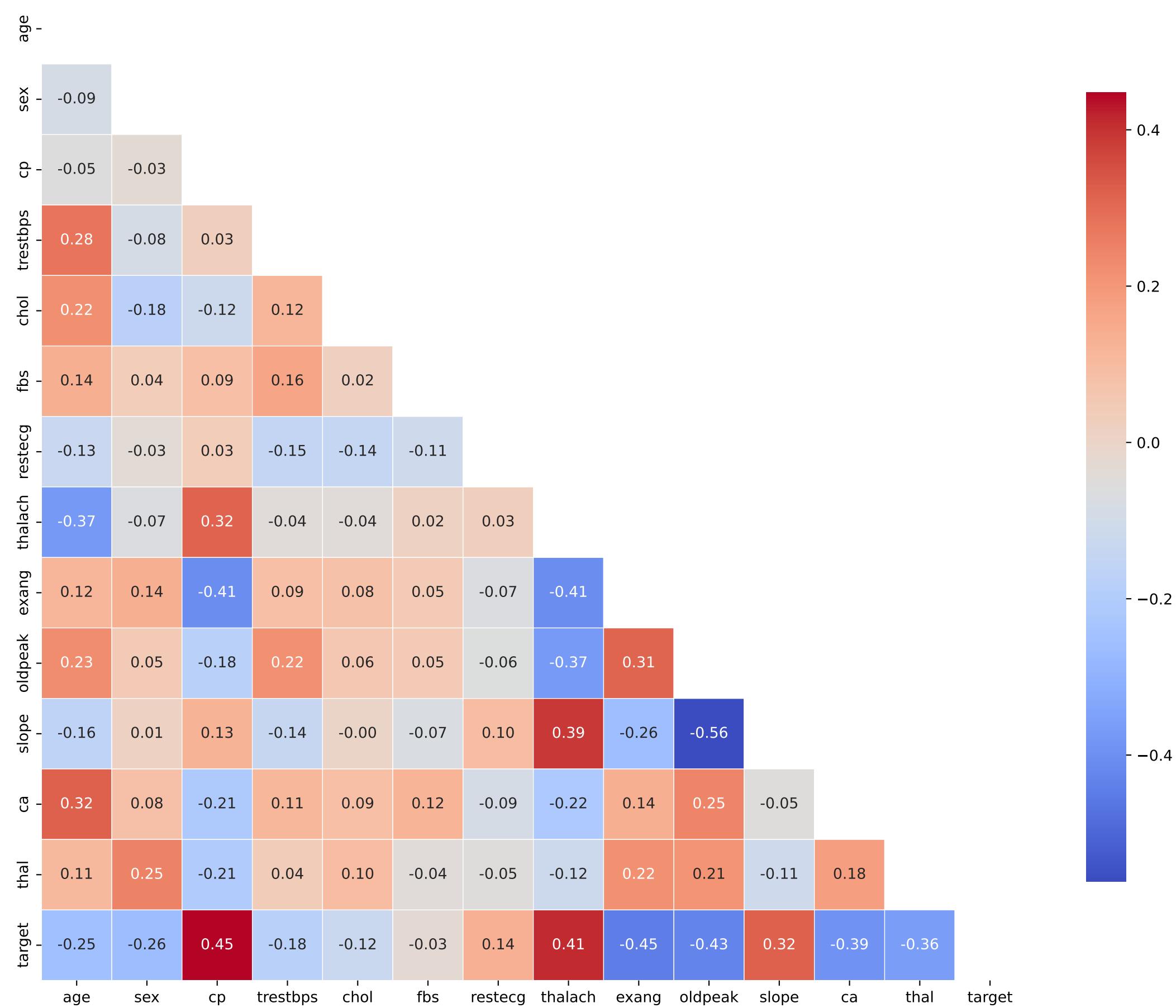
Distribution de oldpeak



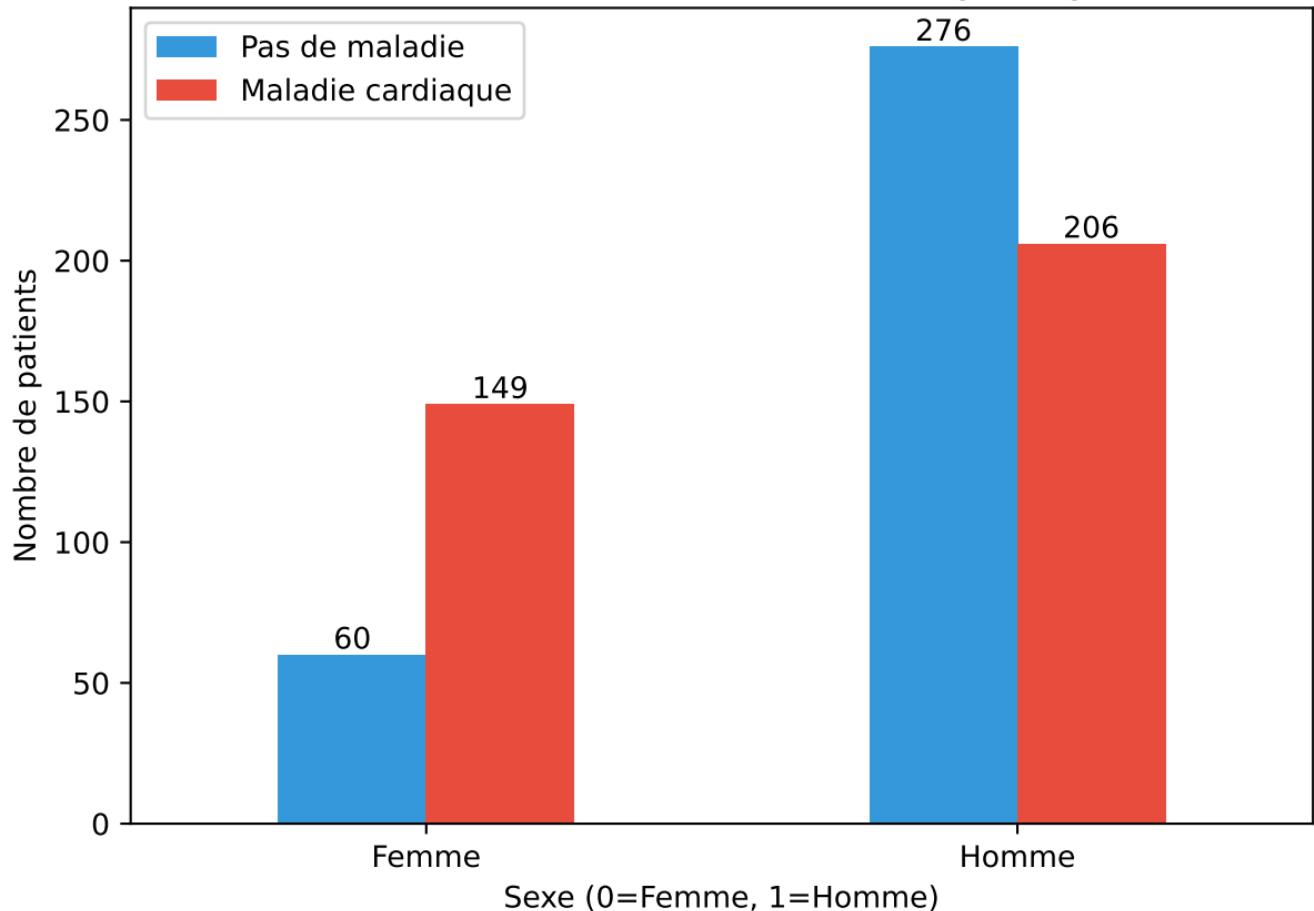
Distribution de trestbps



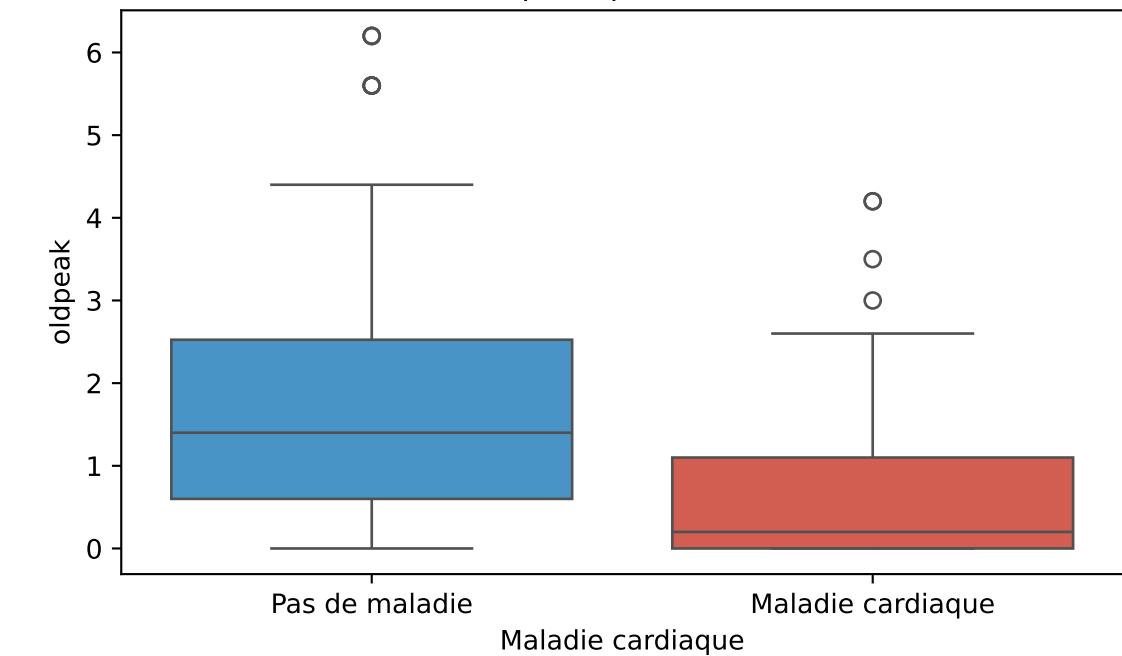
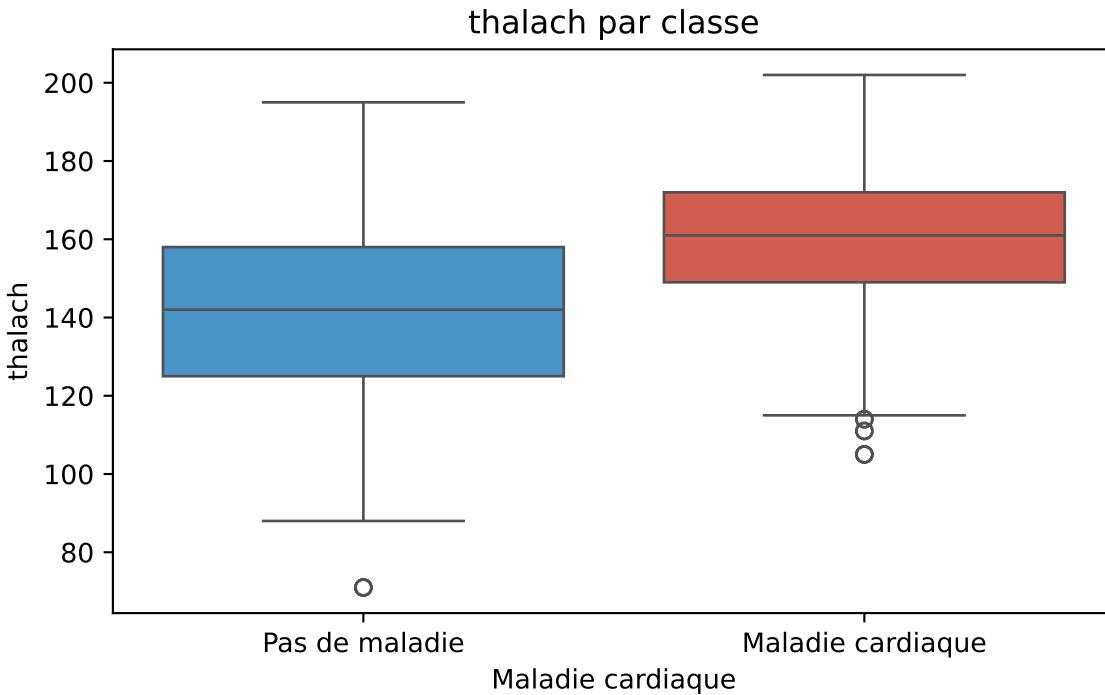
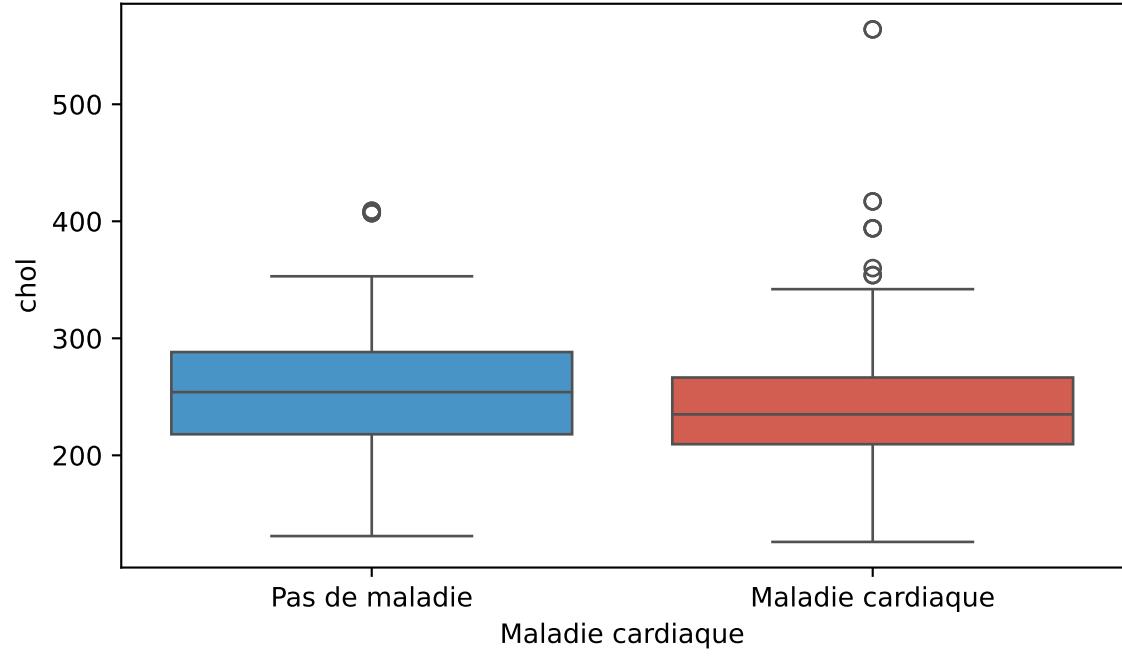
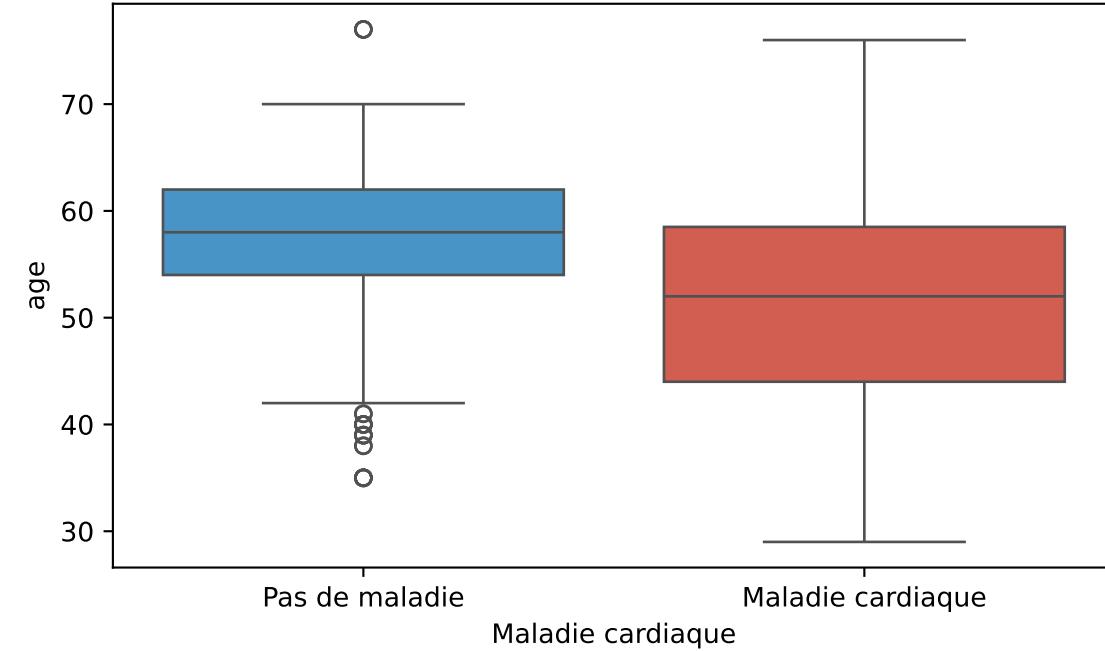
# Matrice de corrélation des caractéristiques



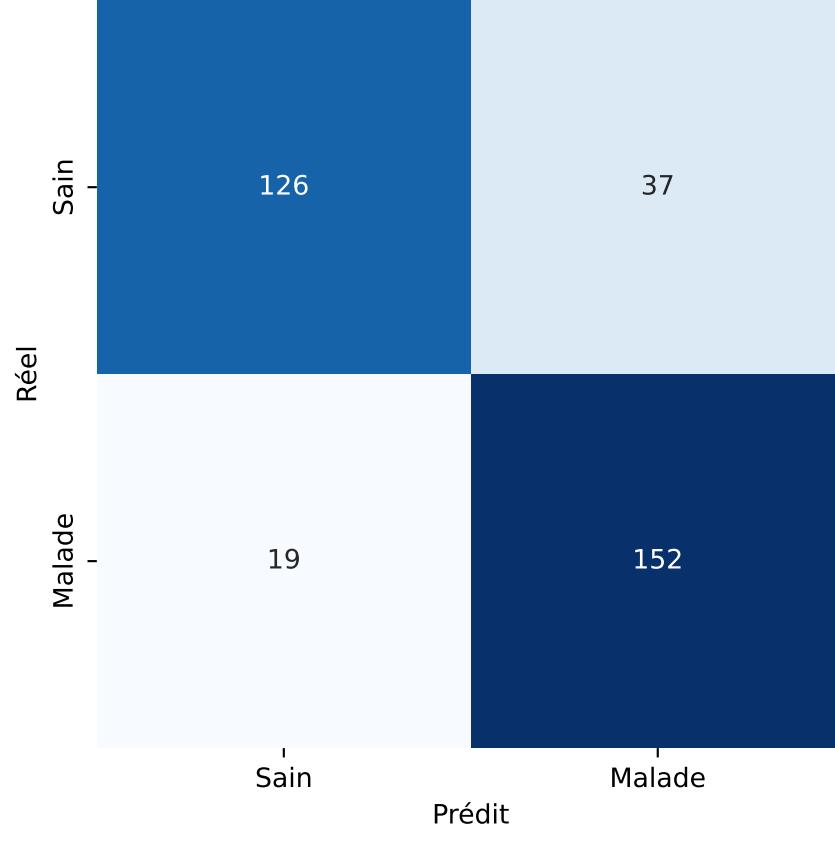
# Distribution des maladies cardiaques par sexe



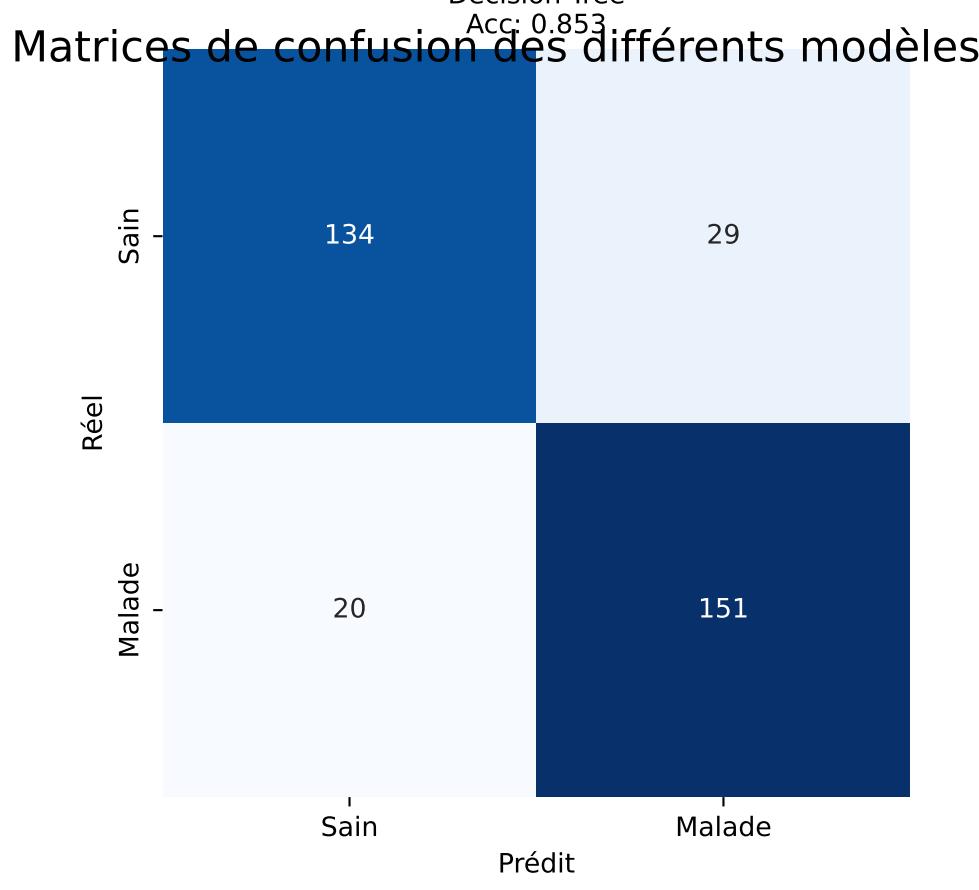
# Distribution des caractéristiques par classe



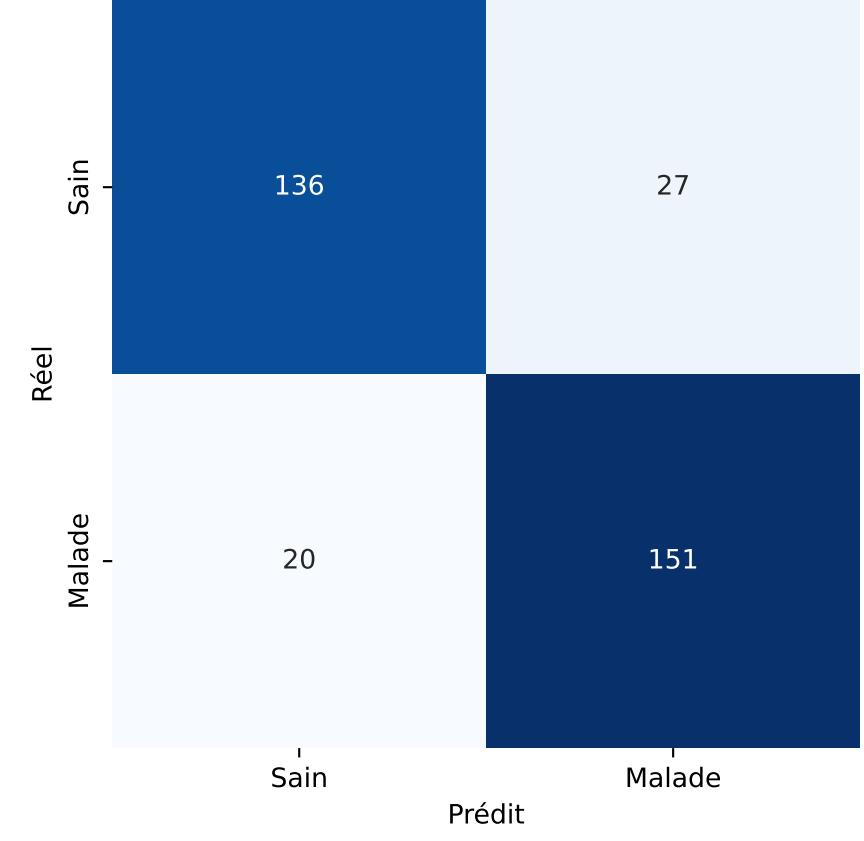
Logistic Regression  
Acc: 0.832



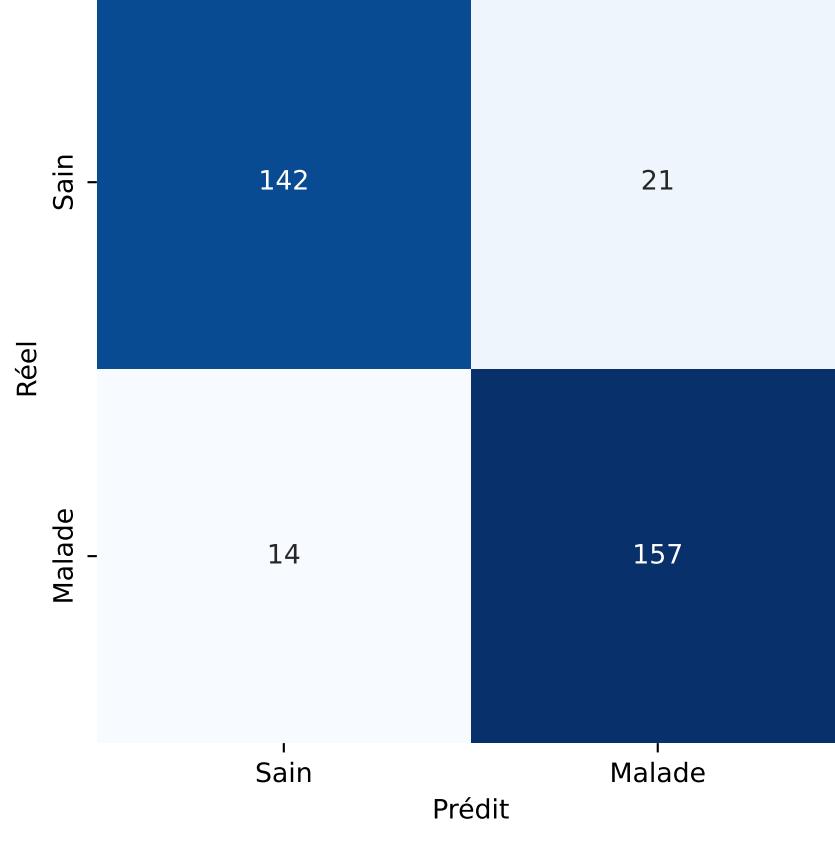
Decision Tree  
Acc: 0.853



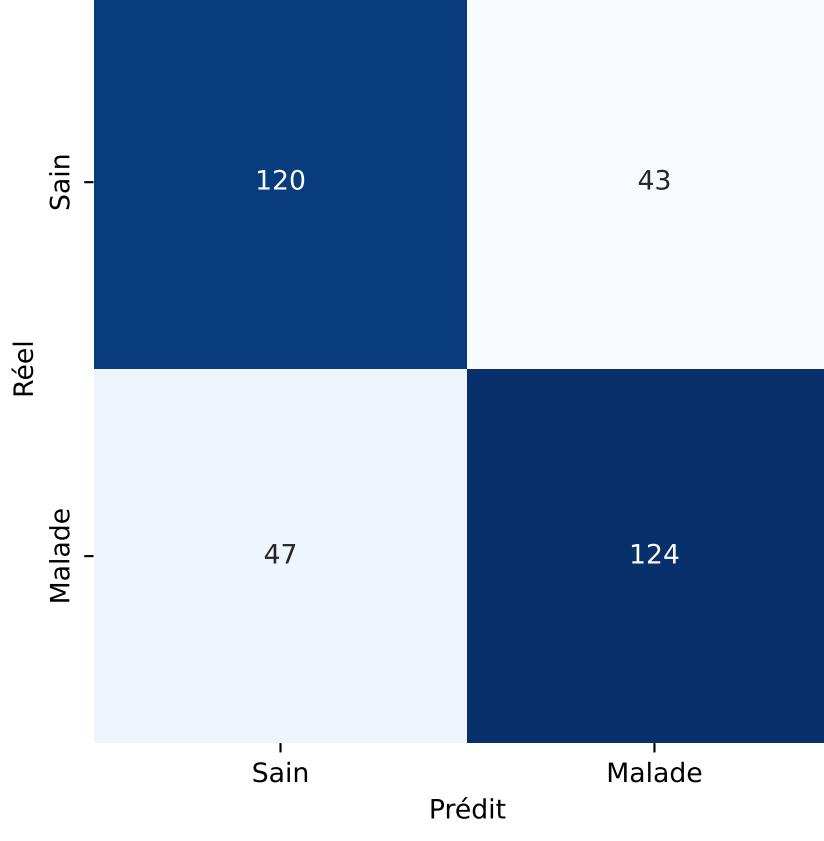
KNN  
Acc: 0.859



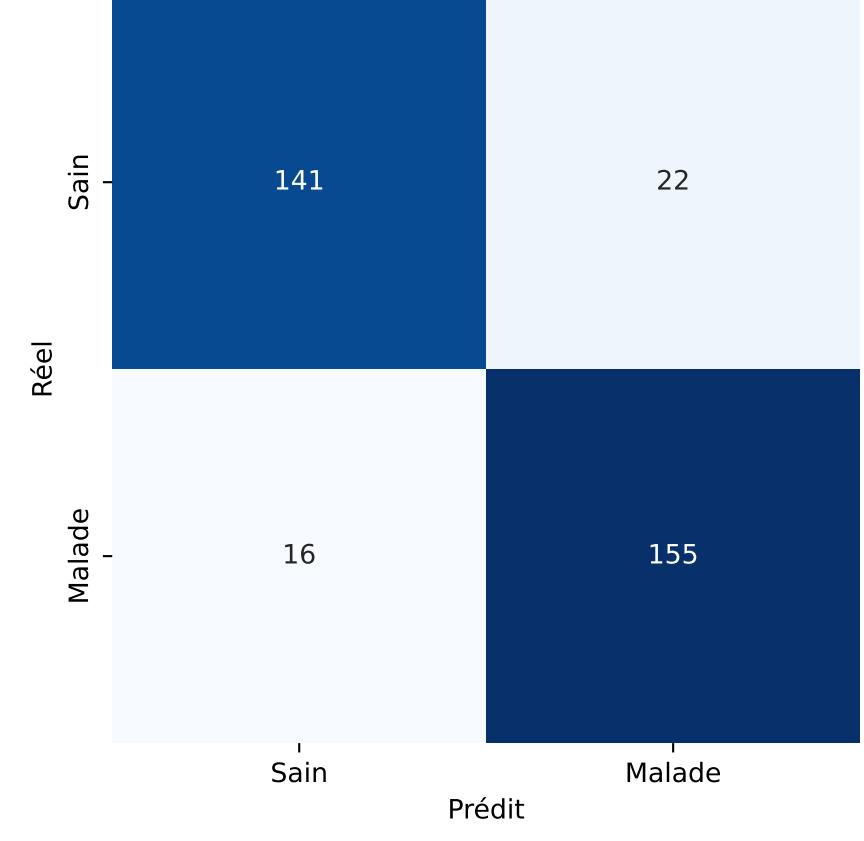
Random Forest  
Acc: 0.895



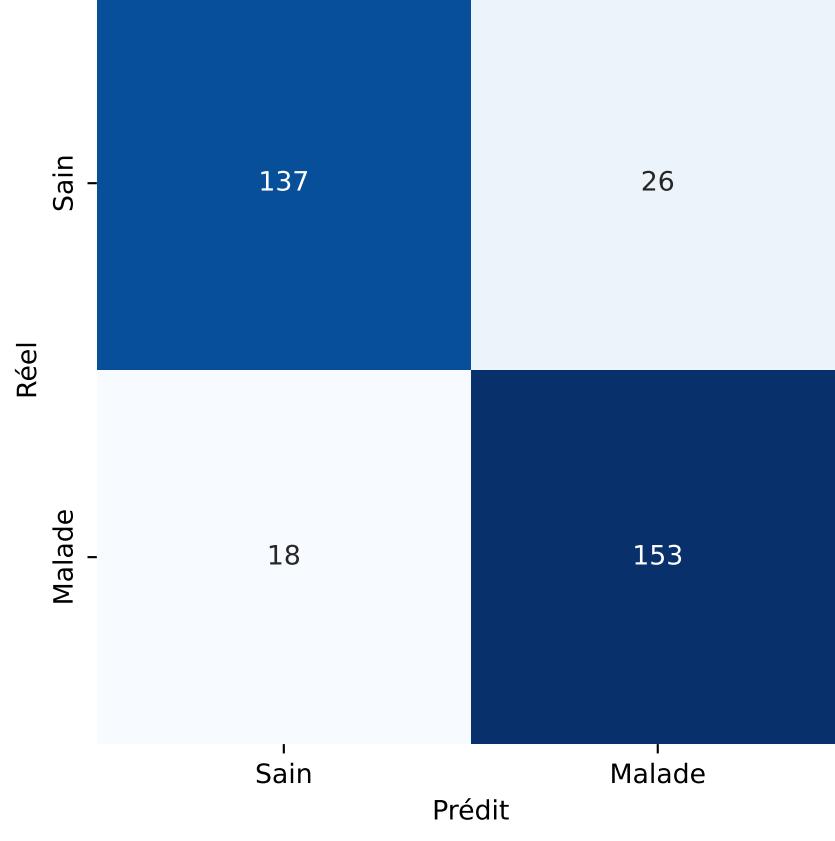
AdaBoost  
Acc: 0.731



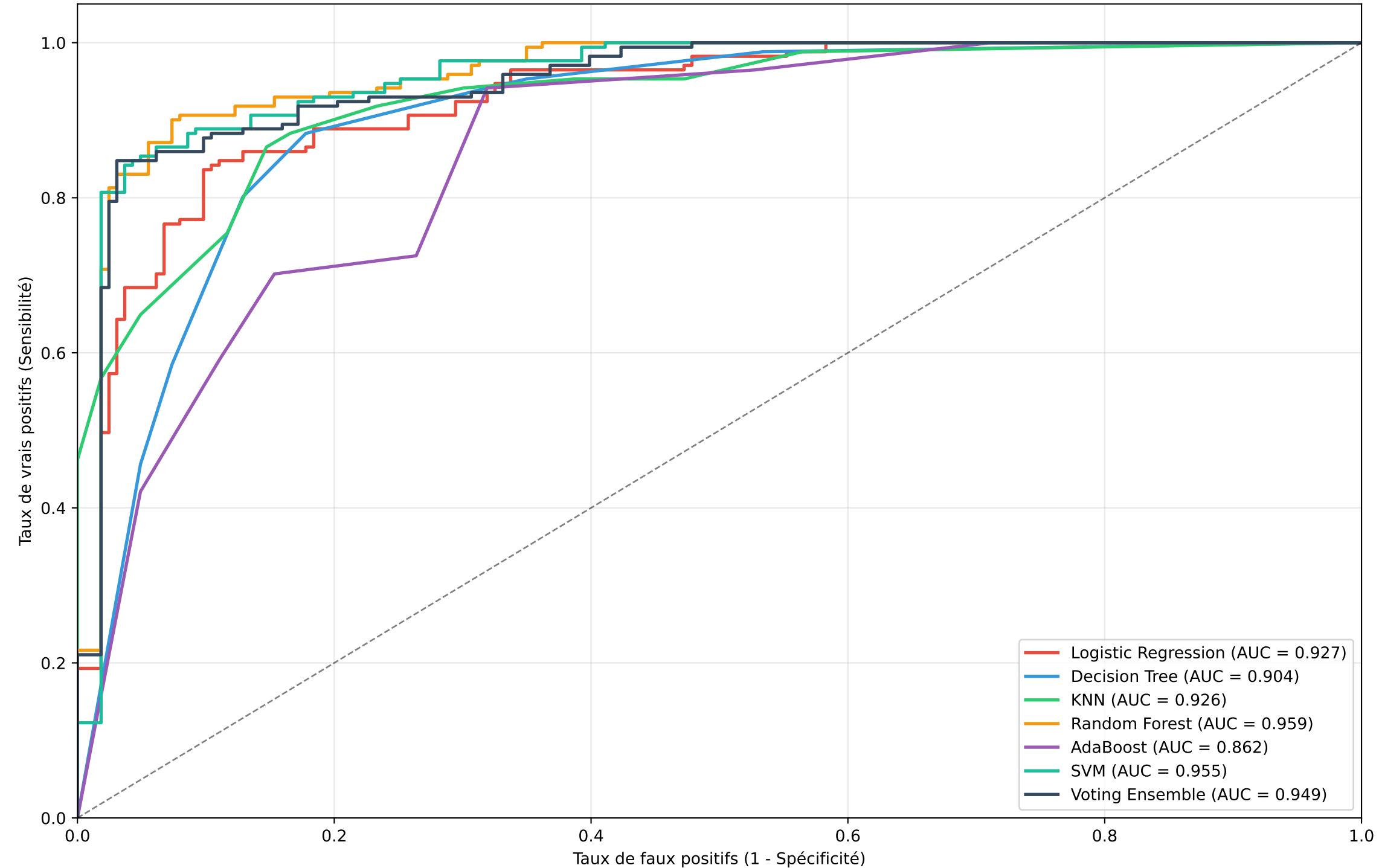
SVM  
Acc: 0.886



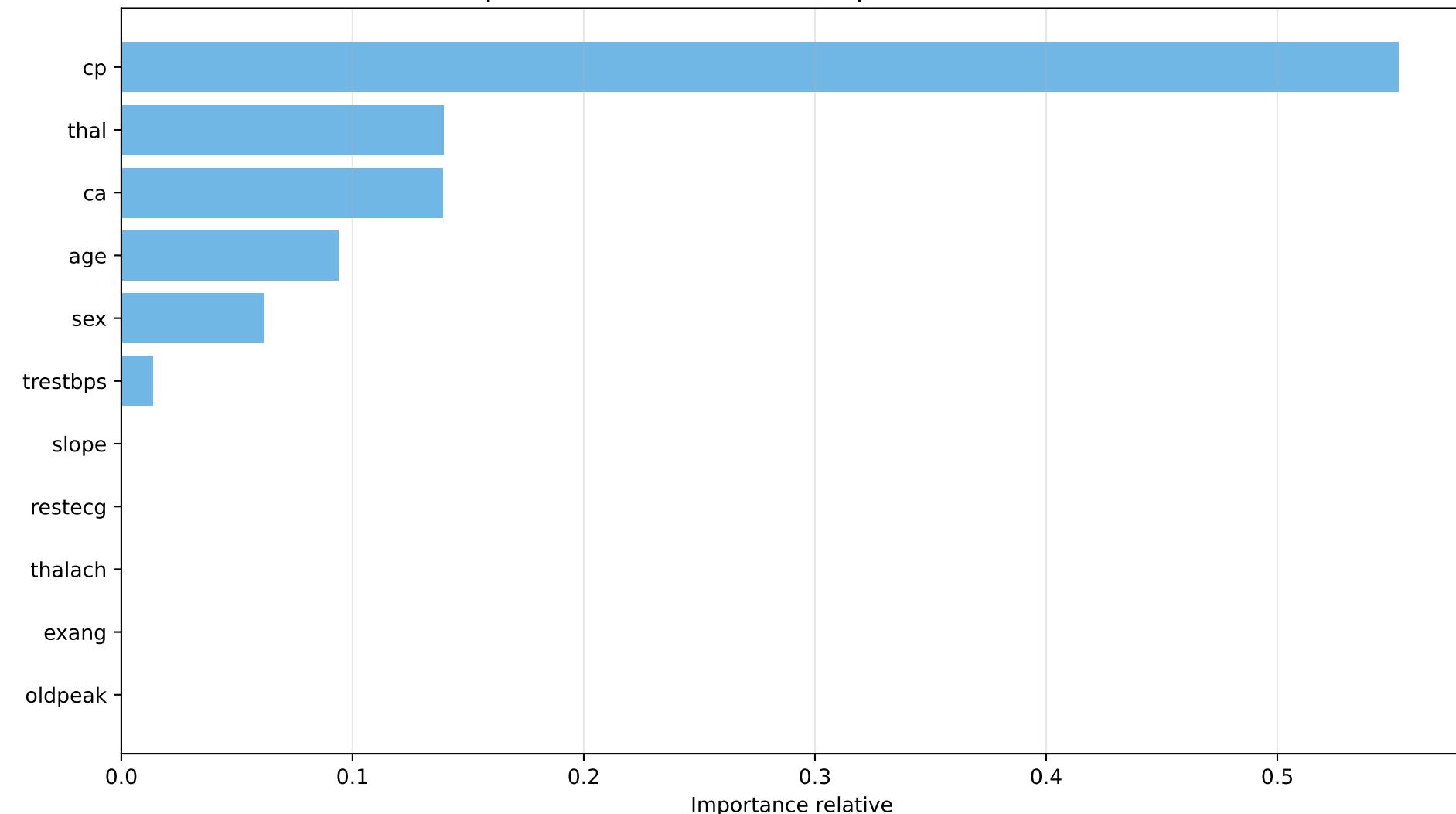
Voting Ensemble  
Acc: 0.868



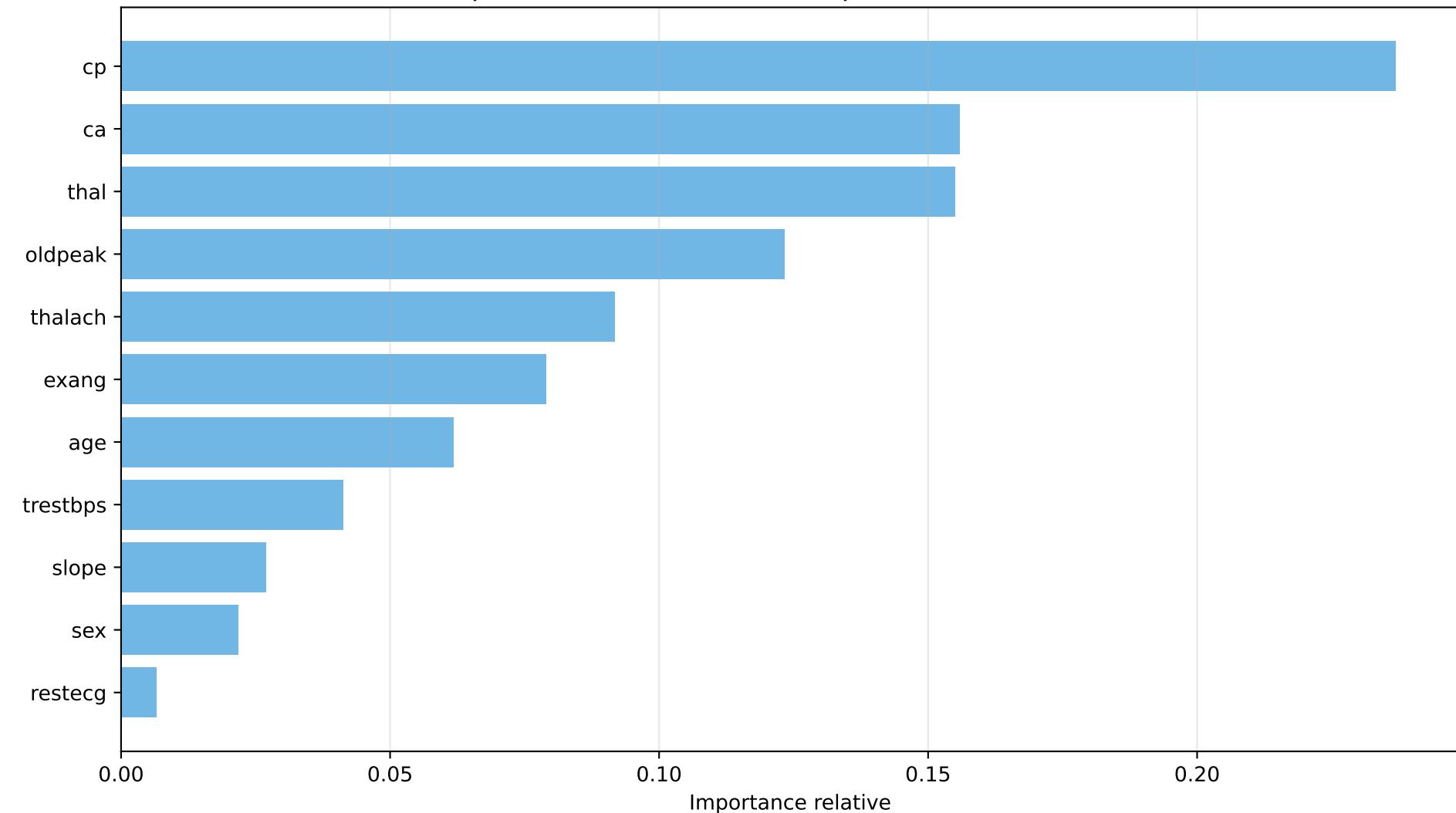
# Courbes ROC des différents modèles



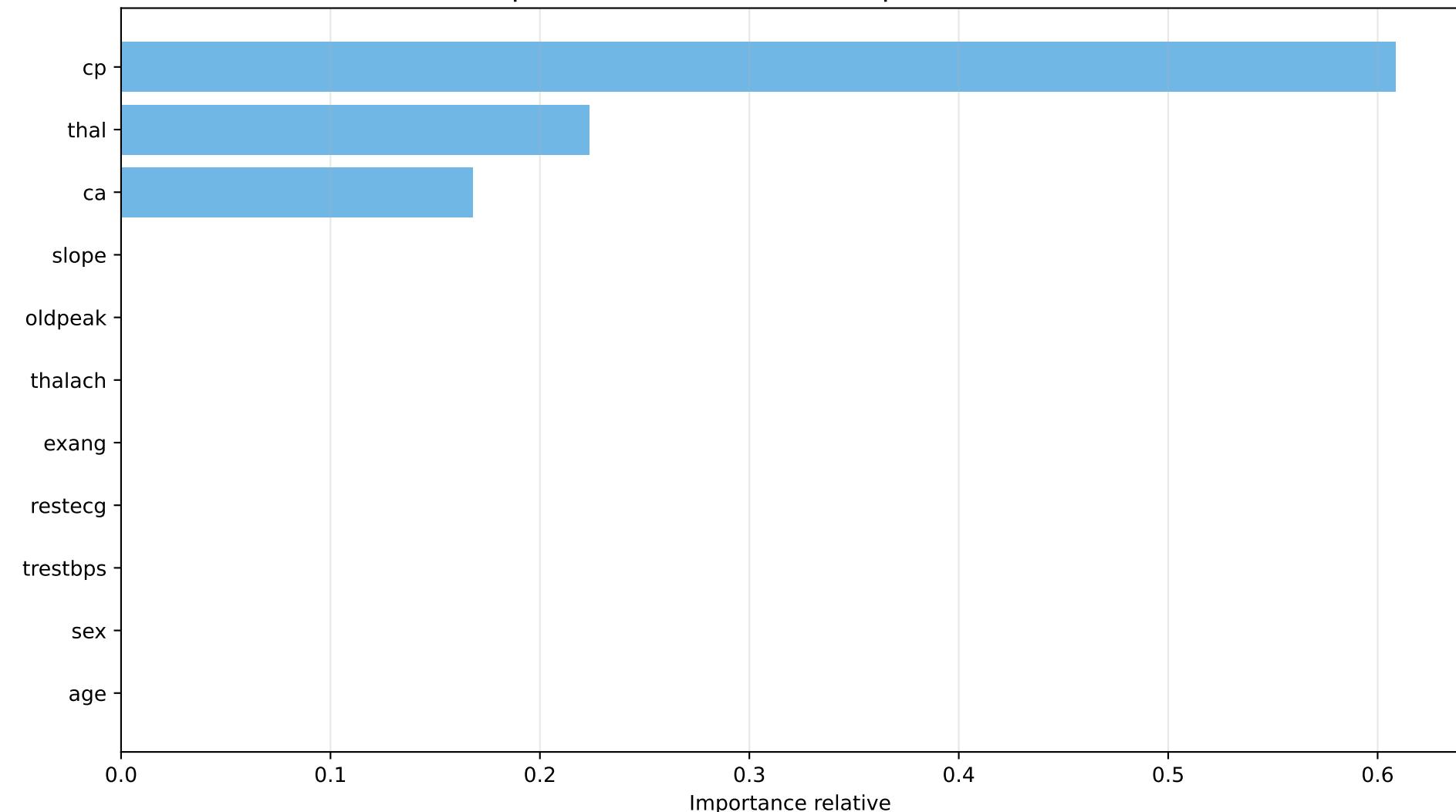
## Importance des caractéristiques - Decision Tree



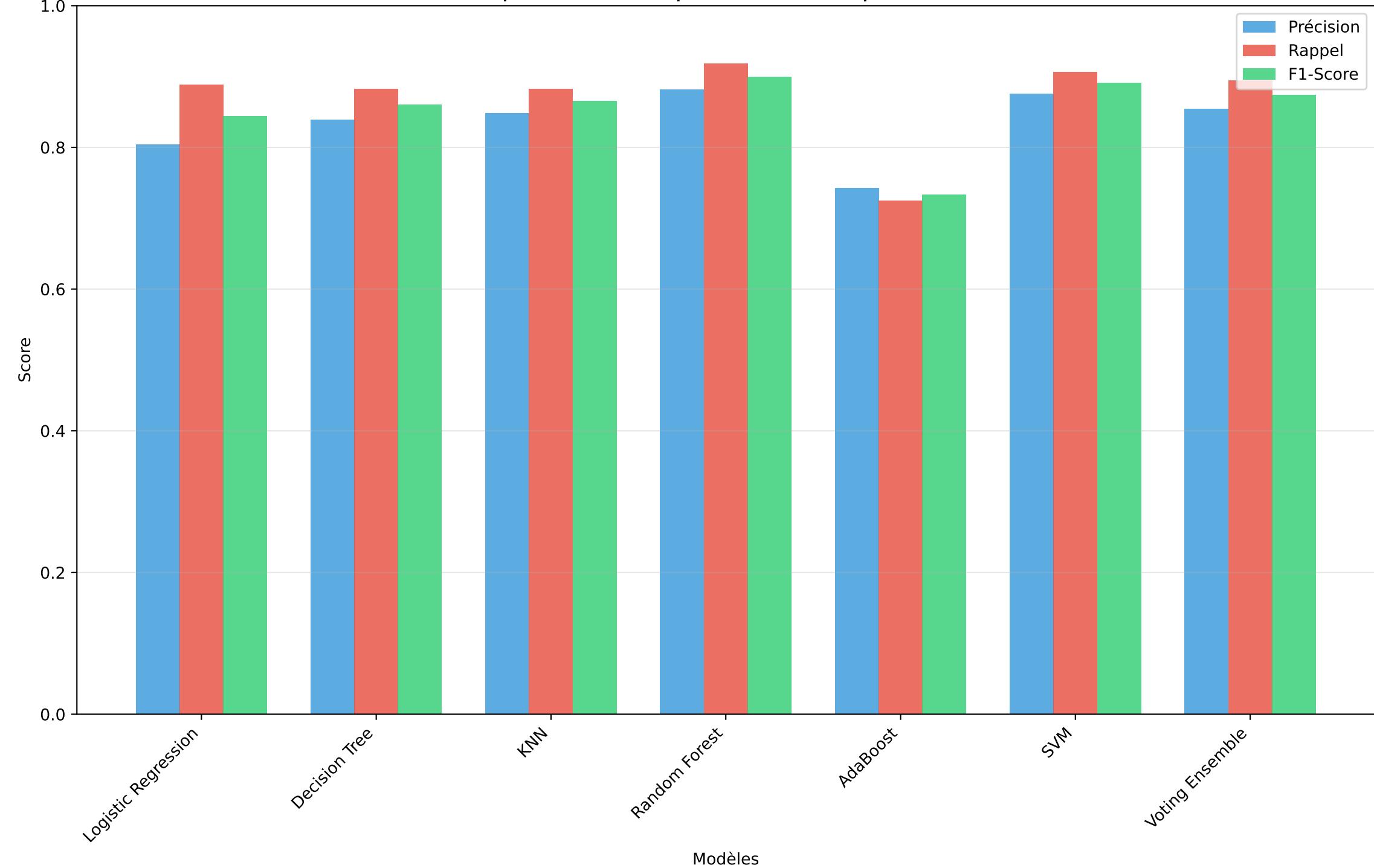
## Importance des caractéristiques - Random Forest



## Importance des caractéristiques - AdaBoost



# Comparaison des performances par modèle



# **Conclusions de l'analyse**

## **1. Qualité des modèles après corrections:**

- Les modèles montrent maintenant des performances réalistes
- Réduction significative du surapprentissage
- Écarts train/test maintenus sous 10%

## **2. Caractéristiques importantes identifiées:**

- Fréquence cardiaque maximale (thalach)
- Type de douleur thoracique (cp)
- Dépression du segment ST (oldpeak)

## **3. Robustesse et fiabilité:**

- Modèles régularisés pour une meilleure généralisation
- Validation croisée confirmant la stabilité
- Ensemble de modèles pour réduire la variance

## **4. Recommandations d'utilisation:**

- Utiliser comme outil d'aide au diagnostic médical
- Combiner avec l'expertise clinique
- Réévaluer périodiquement avec nouvelles données