

# Predicting Heart Disease

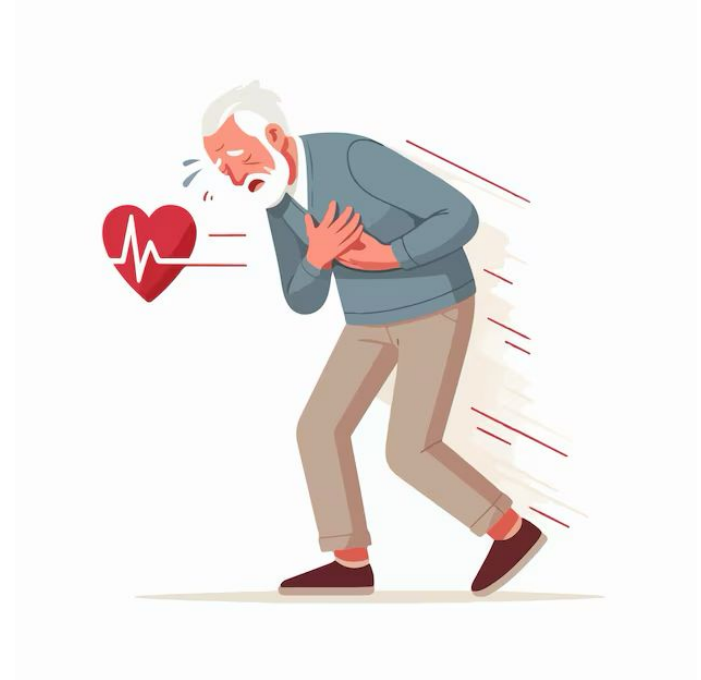
Implementations of Logistic Regression Models

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**Scientific Data Analysis – 5062SCDA6Y**  
Group Assignment – Project Group 9  
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# Motivation

- One of the leading causes of death (World Health Organization, 2021)
- Understanding risk factors to help research



# Dataset

- 300.000+ rows
- ~20 variables
- Heart disease as dependent variable

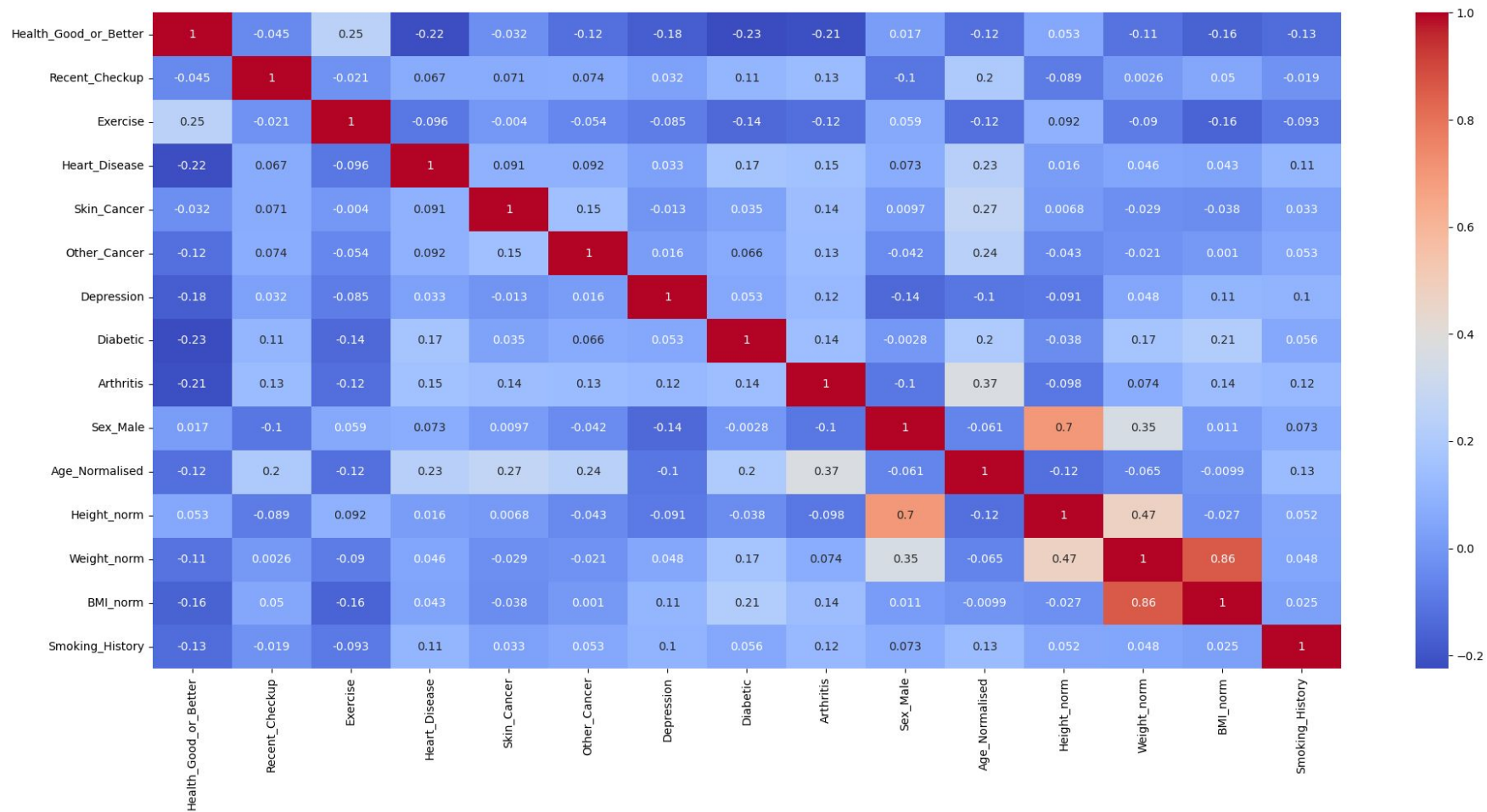


**U.S. CENTERS FOR DISEASE  
CONTROL AND PREVENTION**

# Dataset

## Limitations

- Processing:
  - Loss of variability through grouping certain categories as binary
- Biases:
  - USA based dataset
  - Relatively uneven distribution of age among participants

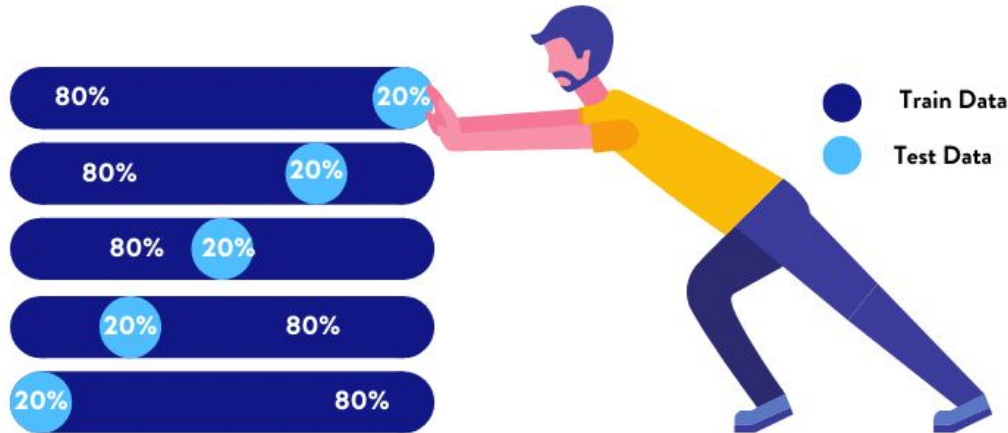


# Research Questions and Hypothesis

- **RQ1:** Which features are the most predictive of heart disease when implementing a logistic regression model?
- **RQ2:** Does a logistic regression model based on PCA-generated components predict with higher accuracy than a logistic regression model fit on the 'clean' data?
  - **H<sup>2-0</sup>:** A logistic regression model using PCA-generated components does not achieve significantly higher accuracy compared to a logistic regression model using the original 'clean' data.
  - **RQ2<sup>sub-1</sup>:** What implications do these components have on the interpretation of the predictive capacity of the features?
  - **RQ2<sup>sub-2</sup>:** Does the usage of PCA components introduce any bias into the model?
- **RQ3:** Can we extract how many variables – and which – contribute to a high model accuracy?

# Methods

- Logistic Regression
- Principal Component Analysis
- K-Fold Cross-Validation
  - Comparing PCA to Fully Fitted Model
  - Comparing Models With Select Variables



# Methods: Coefficient Predictability

- RQ1: Which features are the most predictive of heart disease when implementing a logistic regression model?
  - Logistic regression predicts a binary outcome: heart disease (yes/no).

Use training set (75%) for regression  
model

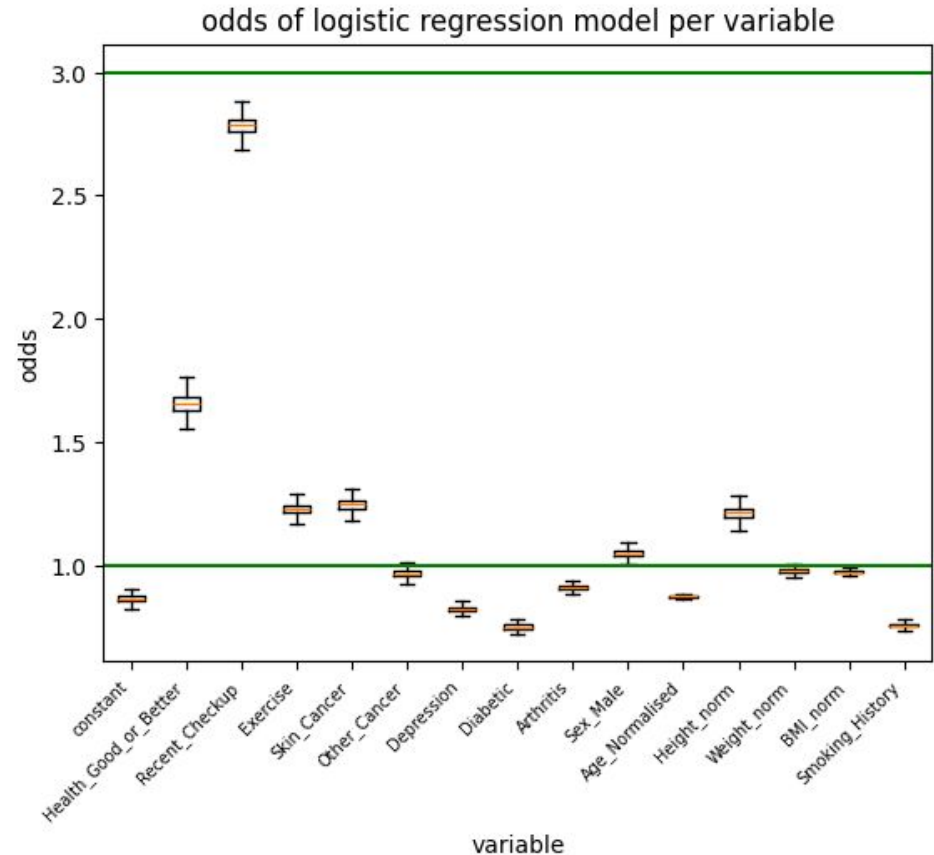
Test regression model → 0.75  
accuracy

Calculate odds



# Results: coefficient predictability

- $< 1$ : low risk
- 1 -3 moderate risk
- $> 3$ : high risk



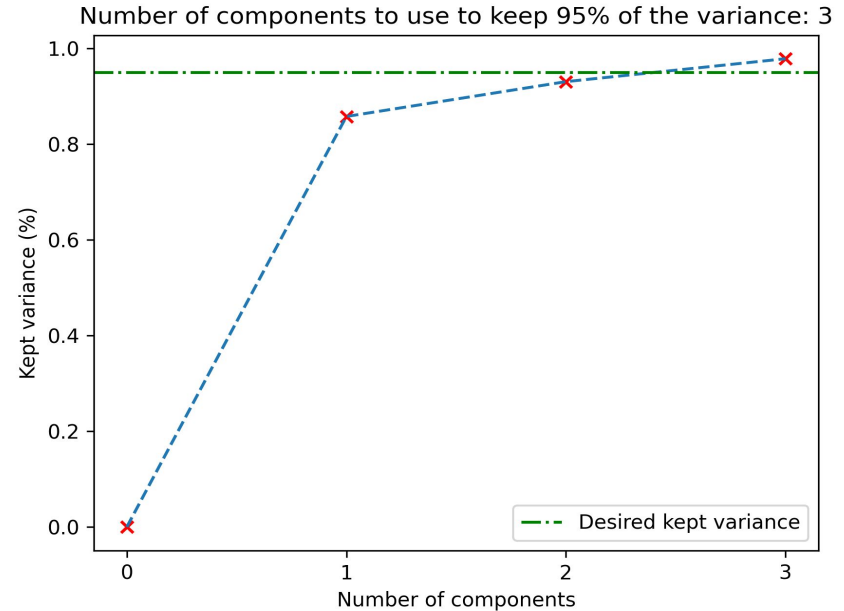
# Limitations: coefficient predictability

- Interaction effects
- Multicollinearity
  - Weight, BMI, height
- Interpretation:
  - Recent checkups, exercise

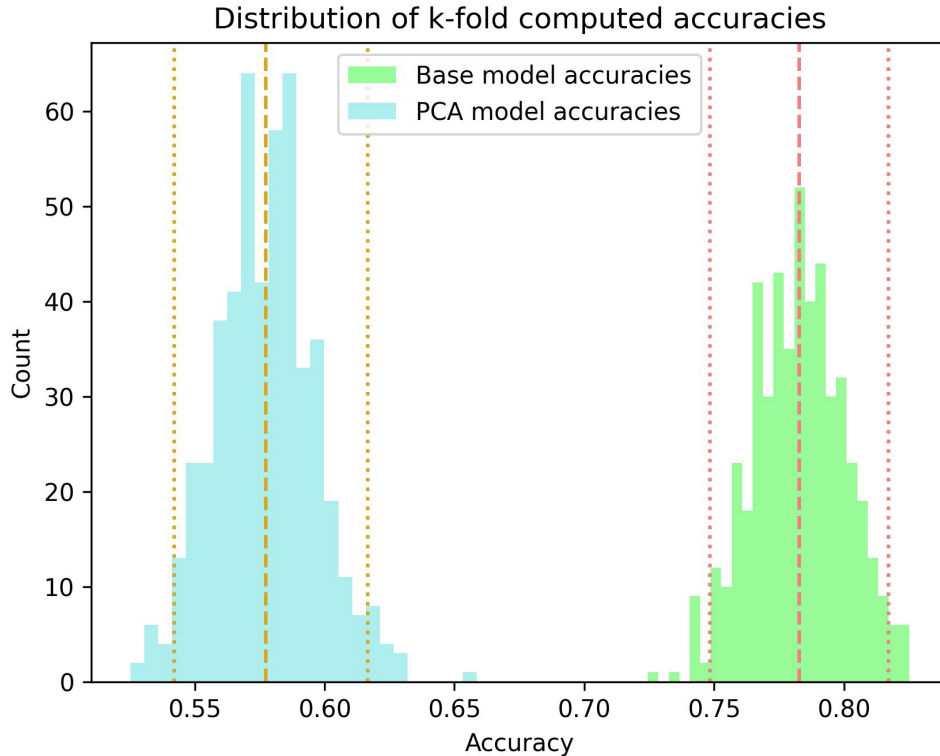
# Principal Component Analysis

- 'Summary' of the dataset
- 3 Components for retainment of 95% of the variance

- PC 1: BMI, weight, height
- PC 2: Height, weight
- PC 3: Age



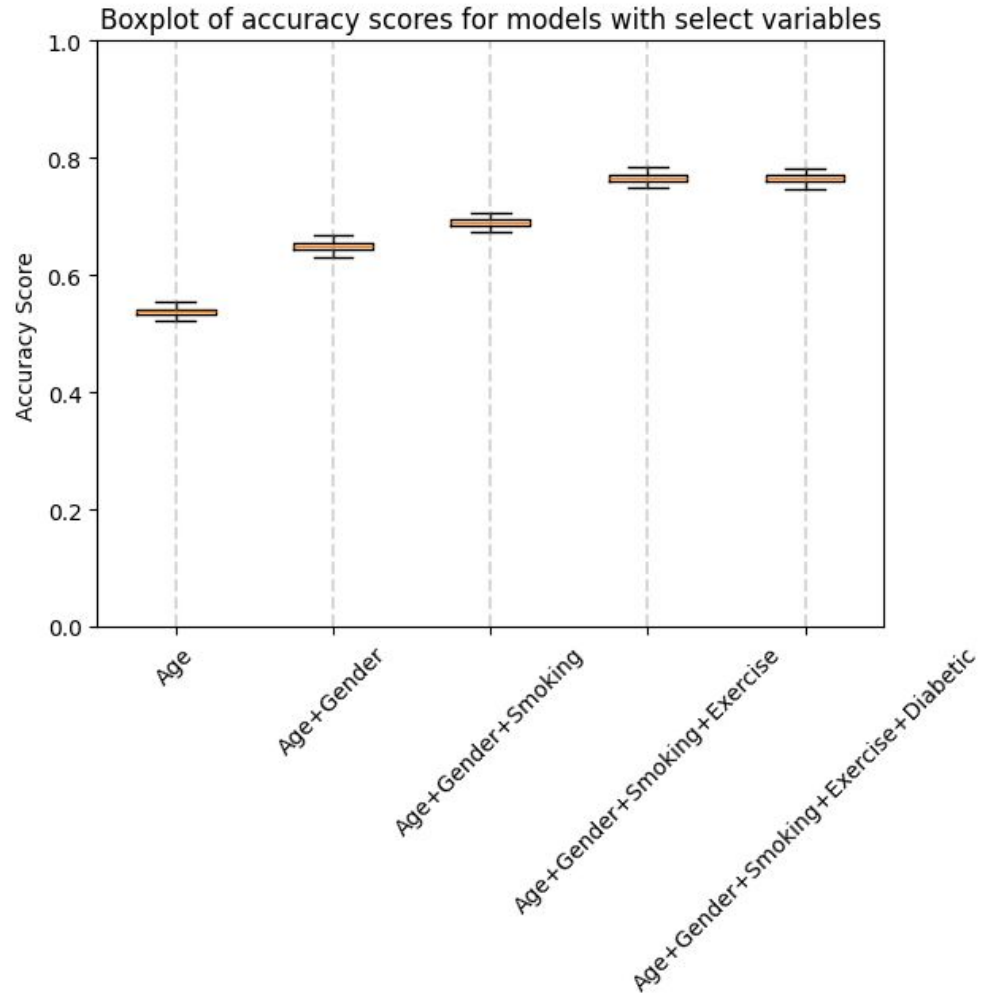
# Results: Cross-Validation I



- We fail to reject our null-hypothesis
- Can we answer **RQ2**?
- Product of overfitting?
- AIC suggests this is not the case

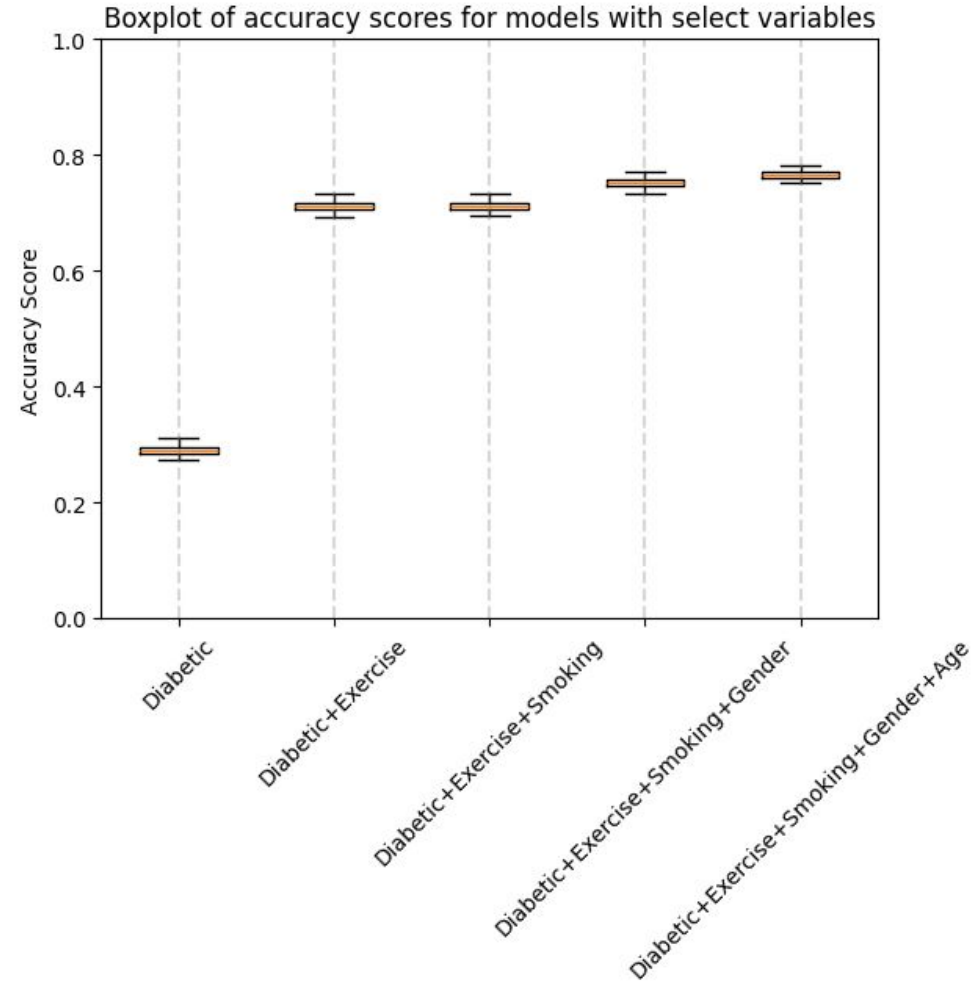
## Results: Cross-Validation II

- **RQ3:** Can we extract how many variables – and which – contribute to a high model accuracy?
- Variable selection based on literature
  - Age
  - Gender
  - Smoking
  - Exercise
  - Diabetes
- Arbitrary order



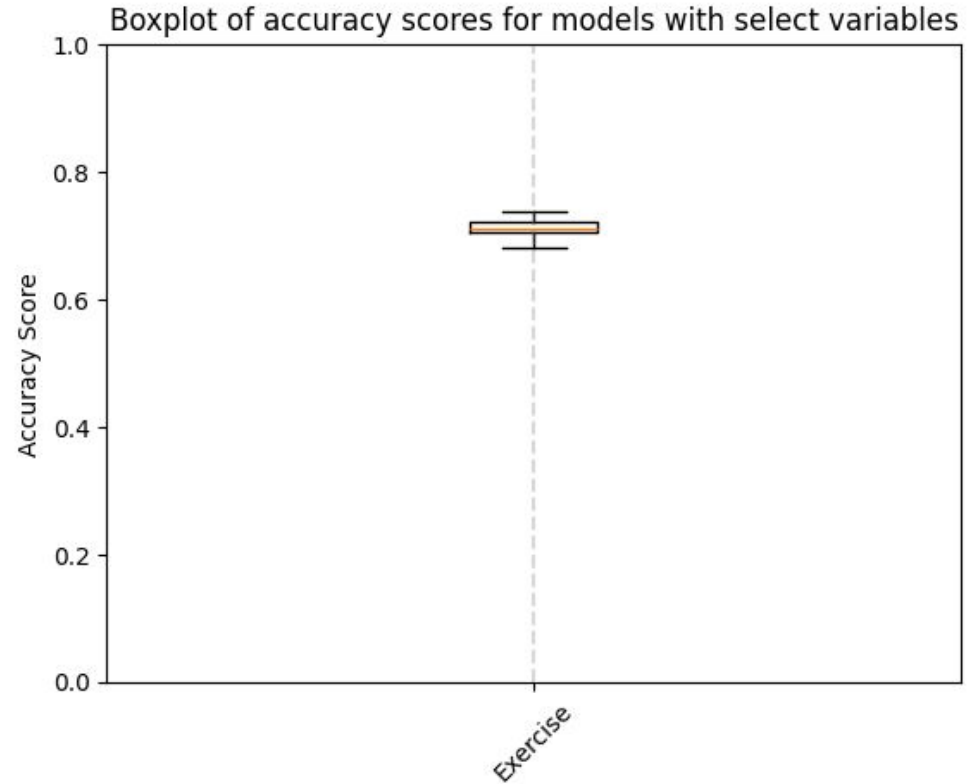
## Results: Cross-Validation II

- Reversed order of variables



## Results: Cross-Validation II

- Is exercise *that* predictive?
- It seems like it, but we cannot say for certain.



# Conclusion and Limitations

- Some insights into variable predictability
- PCA did not yield better results



# Conclusion and Limitations

- Potential overfit
- No analysis of potential collinearity
- Correlation  $\neq$  causation

# Predicting Heart Disease

Implementations of Logistic Regression Models

# Thank you for listening

Any questions?

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