





Design of a diagnosis and follow-up platform for patients with chronic headaches

Kiani Lannoye & Gilles Vandewiele

Supervisors: prof. dr. ir. Sofie Van Hoecke, dr. ir. Vincent Keereman Counsellor: ing. Olivier Janssens

Faculty of Engineering and Architecture







Intro

Current process Ghent University Hospital

Platform requirements

Mobile application

Backend and data exposure

Machine learning

Doctor dashboard

Conclusion & future work

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Headaches









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Headaches

(Headaches)

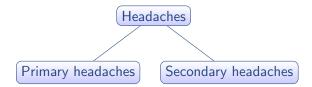






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Headaches



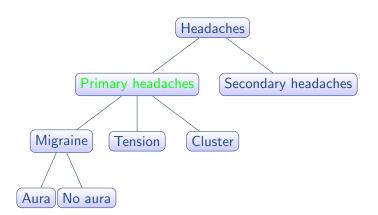






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Headaches











Initial call for appointment

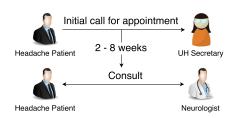


Headache Patient

UH Secretary

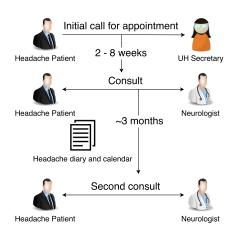






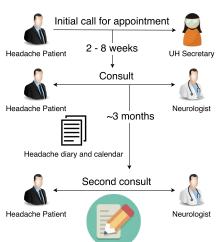


















Current process Ghent University Hospital

Current process at Ghent University Hospital is:

- ► Not digital
- cumbersome
- ► time consuming







So there is need for a better (digital) alternative! This alternative has to:

- ▶ capture at least the same information as current solution
- ▶ be more efficient.
- support doctors in forming a diagnosis







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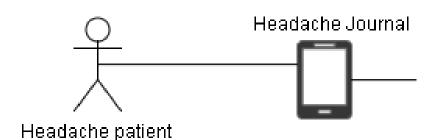
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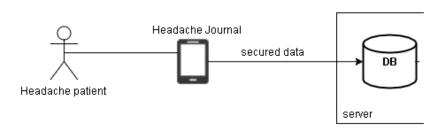










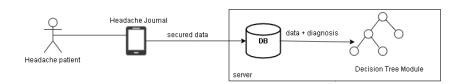








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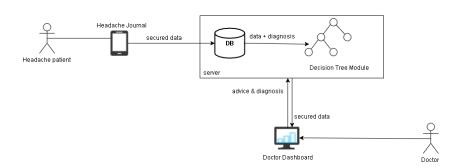








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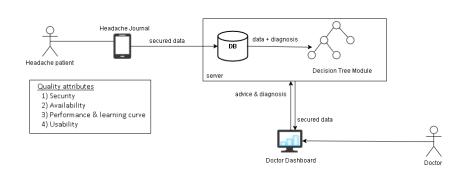








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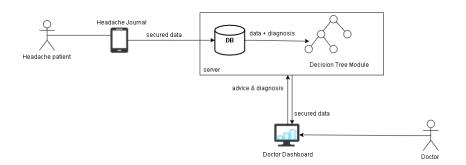






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Mobile Application



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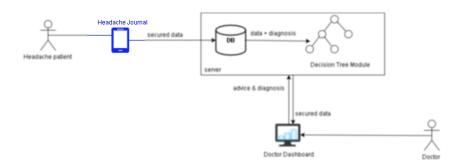






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Mobile Application



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Mobile Application

Why create a new application?

Competition

- ► Migraine Buddy
- ► Headache Diary
- ► Pfizer headache journal

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Mobile Application

Why create a new application?

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- ► Migraine Buddy
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All good, but:

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Mobile Application

Why create a new application?

Competition

- ► Migraine Buddy
- ► Headache Diary
- ► Pfizer headache journal

All good, but:

- ▶ none captures all data needed
- ▶ none offers usable data export

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Cross platform vs Native

	Native	Cross-platform
	+ Native UX	+ 1 language
+	+ device-specific features	+ Write once, run everywhere
	+ Better performance	+ Less maintenance
		- Slower (lower performance)
	- Multiple languages	- Less device specific
-	- Time consuming	features
	(development)	- Harder to release online
		(Play Store/App Store)

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Cross platform vs Native

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Chronicals

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Chronicals







Chronicals





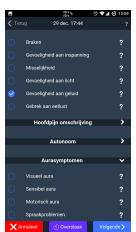




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Chronicals













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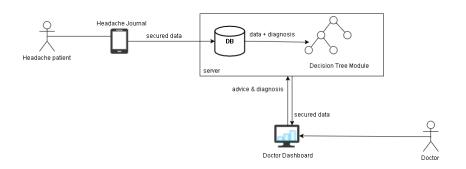
Conclusion & future work







Backend and data exposure

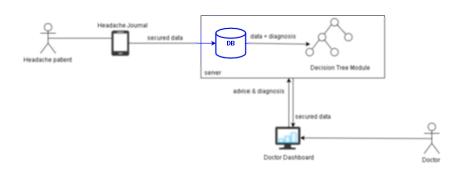








Backend and data exposure



Backend and data exposure







Backend and data exposure

Components

- ► Database
- ▶ Connection to App
- ► Connection to Doctor Dashboard
- ► Connection Machine learning module

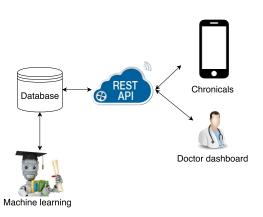






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System



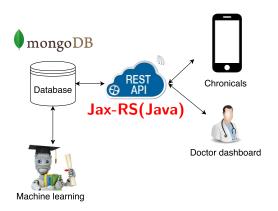






System

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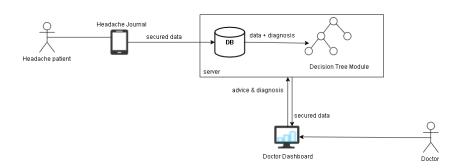
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Machine learning



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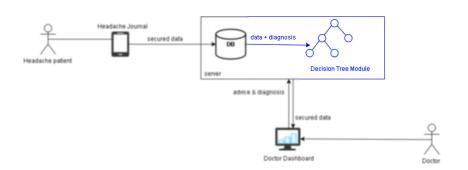






Machine learning

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Machine Learning

Decision support (\neq decision making) \Rightarrow White box model

Possible models

- ▶ Decision trees
- ► Random Forests (Gray box)
- ► Bayesian networks







Machine Learning

Decision support (\neq decision making) \Rightarrow White box model

Possible models

- ▶ Decision trees
- ► Random Forests (Gray box)
- ► Bayesian networks







Many different DT induction algorithms



→ Which tree is the most beautiful?

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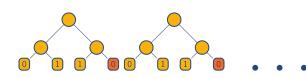


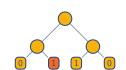




Current ensembles lack interpretability

Boosting, bagging, random forests, etc. require majority voting (classification) or mean calculation (regression) to obtain prediction





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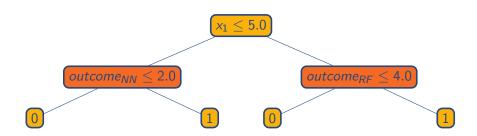






Current ensembles lack interpretability

The final decision tree obtained by **stacking** contains uninterpretable internal nodes



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An ensemble technique WITH interpretability

Current ensemble techniques - Lack comprehensibility - Combine algorithms - Increase classification Convert to Convert to performance Decision Space Decision Space Calculate intersection Convert to Decision Tree Prune







Decision tree \rightarrow decision space

Converting decision trees to decision spaces

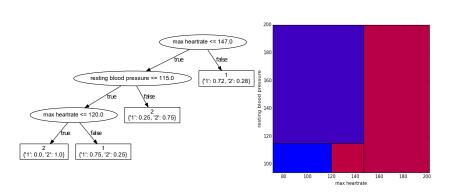
We can define a one-to-one mapping between a decision tree and a set of k-dimensional hyperplanes (k = #features), called **decision space**. Each node in the decision tree corresponds to a hyperplane in the decision space.

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Decision tree \rightarrow decision space



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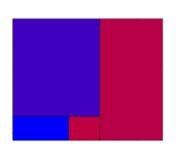


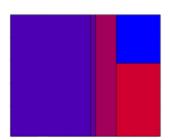




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Merging decision spaces



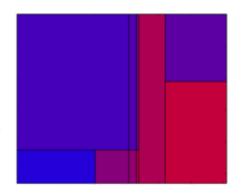








Merging decision spaces

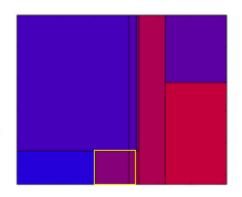








Pruning decision spaces

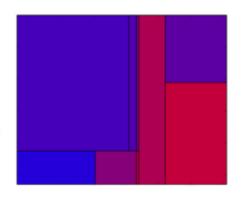








Pruning decision spaces









Decision space \rightarrow decision tree

Converting decision spaces to decision trees

One-to-one mapping from decision tree to space is lost during conversion because the order is lost. Therefore, a **heuristic** approach must be taken, identifying **hyperplane candidates** and calculating a metric to choose the 'best' plane.

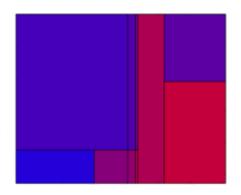
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Decision space \rightarrow decision tree



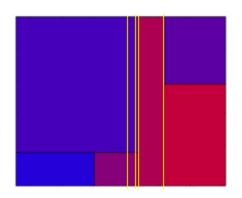
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${\sf Decision \ space} \to {\sf decision \ tree}$



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Decision space \rightarrow decision tree

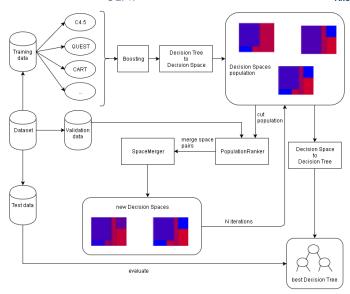
Finding 'best' candidate hyperplane

Apply metric function to each plane, these include:

- ▶ information gain and Gini
- ▶ pick plane from most correlated feature
- ▶ pick plane that divide space in two most equal subspaces
- combination



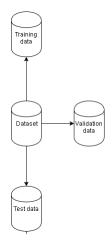








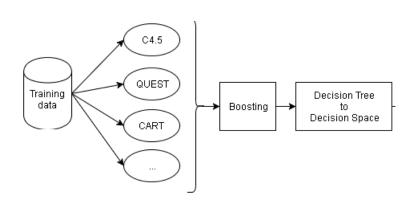
Splitting the data







Generate different decision trees

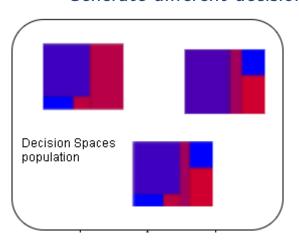


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Generate different decision trees

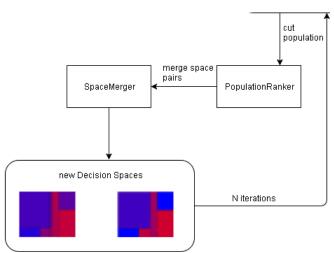


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Genetic merging









PopulationRanker

Fitness function

A high accuracy is the most important property of a decision tree, followed by its' size (\rightarrow comprehensibility). Genetic algorithms are well suited for **multi-objective optimization**.

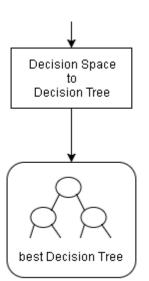
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Final iteration

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Evaluating our algorithm

Evaluating our digoritim

5 datasets from UCI optimal parameters, feature selection when needed and k-fold CV

Name	#Samples	#Disc	#Cont	#Class	Imbalance rate
Heart	270	7	6	2	0.058
Car	1728	6	0	4	0.225
Iris	150	0	4	3	0
Shuttle	14500	0	9	7	0.18308
Nursery	12960	8	0	5	0.1498

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5

10

Nursery



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0.9958

0.9954

C4.5 **CART QUEST Folds** Genetic Dataset 0.8067 0.8067 5 0.78440.7844Heart disease 10 0.8104 0.7732 0.7881 0.7993 3 0.9533 0.9467 0.9467 0.96 Iris 5 0.9467 0.9333 0.9467 0.9533 3 0.9722 0.9693 0.9229 0.9693 Cars 5 0.9711 0.9682 0.9241 0.9786 10 0.9756 0.9751 0.9265 0.9803 3 0.99870.99830.9964 0.9988 Shuttle 5 0.99860.9981 0.9962 0.998810 0.9990 0.99870.99410.9992 3 0.98900.9431 0.91470.9914

0.9918

0.9937

0.9498

0.9568

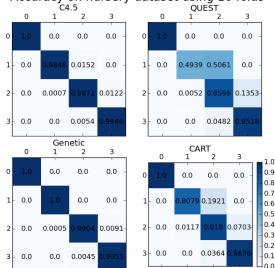
0.9251

0.9259





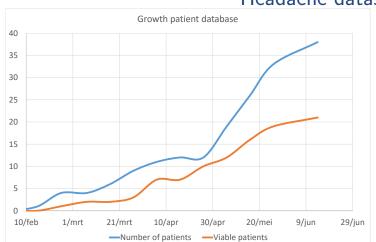
GENT Accuracy on nursery dataset using 10 folds







Headache dataset









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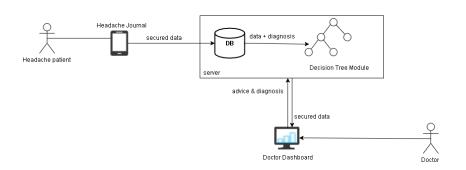
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Doctor dashboard



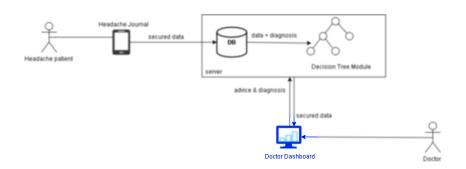
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Doctor dashboard



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Doctor Dashboard

- Web application in order for the doctors to access the data exposed by our REST API
- ► Preferably in the form of visualizations, which allow to process a lot of data in a small amount of time
- ► Developed by Maarten Vanden Berghe

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Conclusion

The current process in the UH of Ghent can be completely digitized:

- ► Collect information using a mobile application
 - \rightarrow More efficient than paper calendars
- ▶ Present the data through a web application
 - → Visualizations allow to process a lot of information quickly

This leads to an increased efficiency and reduced frequency of consults, resulting in lower health care costs.

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Conclusion

A new ensemble technique was developed and tested on very varying datasets:

- ► increases classification performance
- preserves excellent interpretability in contrast to current ones
 - ightarrow Can easily be visualized

When a higher number of headache patients are registered in our system, the resulting decision tree can be used to support physicians in forming a diagnosis

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Future work

- ► Develop native applications for iOS and Android to enhance look-&-feel
- ► Re-evaluate our machine learning models on a larger headache dataset
- ► Implement more induction algorithms and ensemble techniques to create a more diverse initial population
- ► Experiment with other selection techniques and fitness functions
- ► Optimize the heuristic approach to convert decision spaces to decision trees

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Thank you for your attention!

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