

# Healthcare Analytics

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# Expectations from Bootcamp

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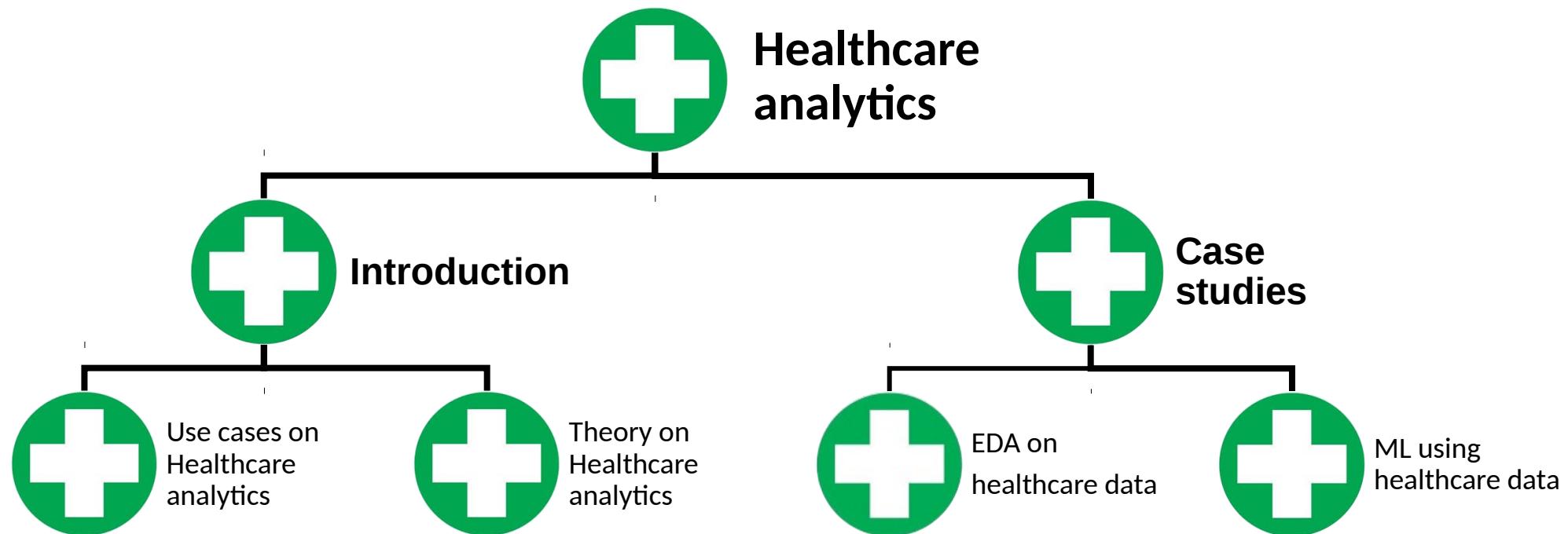
- This is an add on course
- Not meant for any kind certification per-se
- Expand your knowledge on how one can apply Analytics in Healthcare domain
- Participants expected to know/learn the algorithms and their properties
- The focus is on using and building applications for healthcare not on theory
- Expect you can code in Python and work with Tableau
- Drop mails for queries that haven't been answered during the session

# Speaker

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Healthcare analytics SME

# Case study structure



# Healthcare Analytics Sessions

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Session	Topic	Tools / Materials
1	Introduction to Healthcare analytics	Pre-reads
2	EDA using TB dataset	Tableau
3	Regression analysis to predict Heart disease	Python
4	Decision tree analysis to categorize high risk patients	Python

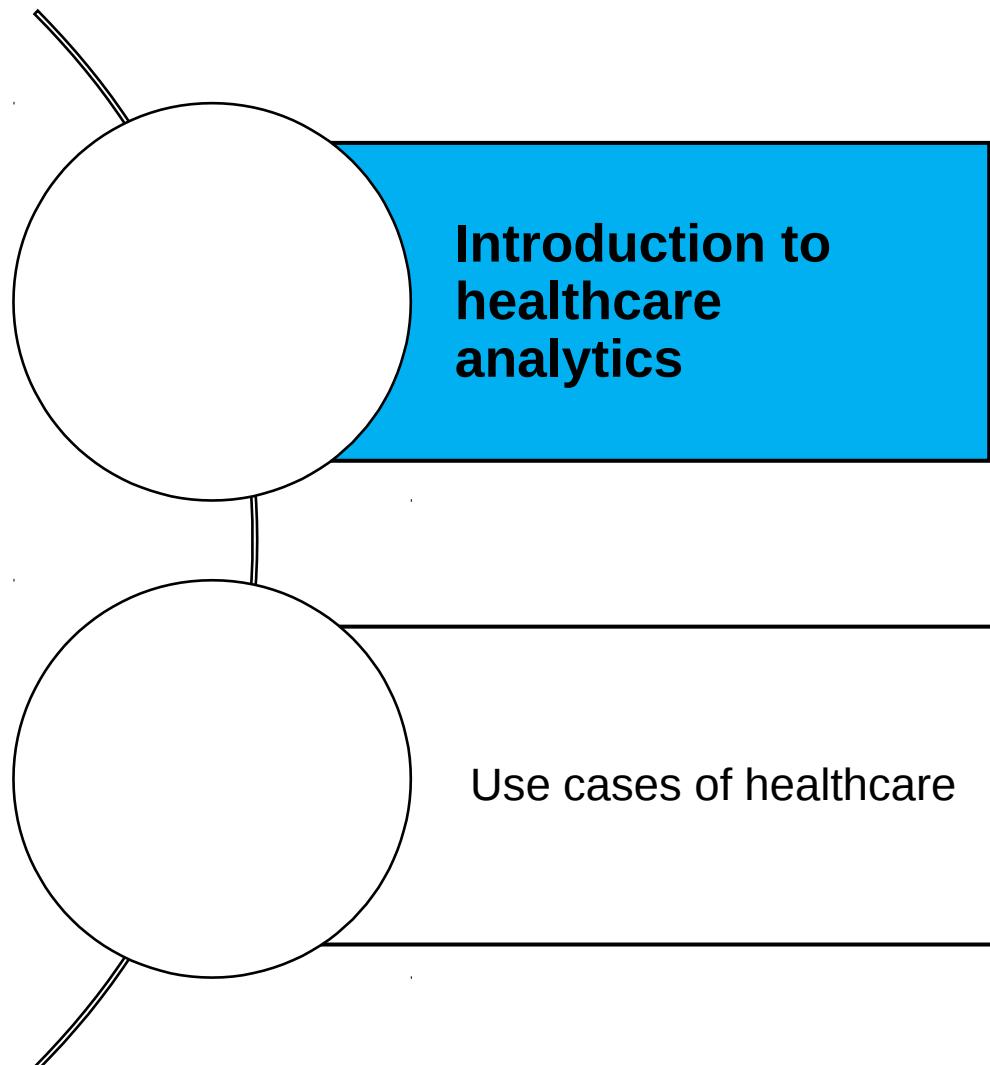
# Scope of Health care analytics

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In this Bootcamp we will use healthcare data to develop Machine Learning solutions which helps us predict onset of diseases of heart disease and identify high risk patients.

# Agenda

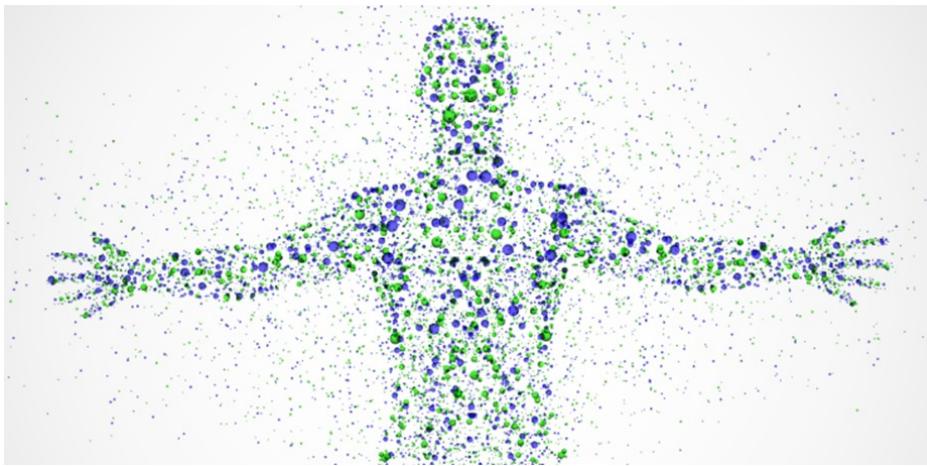
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# Healthcare Analytics

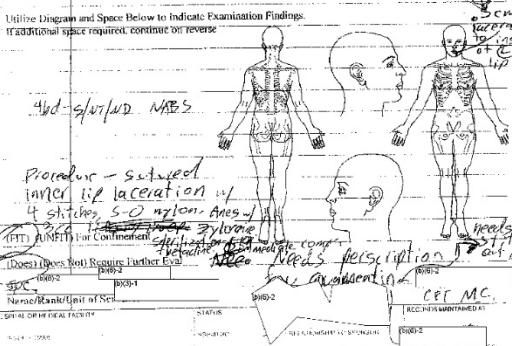
# What is healthcare?

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**Healthcare** allows improvement of health via the prevention, diagnosis, and treatment of disease.

# Healthcare - just 10 years back

MEDICAL RECORD		CHRONOLOGICAL RECORD OF MEDICAL CARE	
DATE		SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION (Sign each entry)	
24 Oct 03	46 yr old male	Diabetic ulceration Pt. was lying on the floor	
Pt. 67		Conscious & alert Pt's vital signs fine. Pt.	
B. 24		takes ASA 80 mg & Metformin 1000 mg PO. Pt. always carries his glucose meter (in case of hypoglycemia) & 2 L of water.	
BP 130/80		Treatment: stopped insulin at med point	
T.		asking about cholesterol. During intake Pt. said he had a stroke	
03 06		more likely to have had a stroke because he has a history of hypertension. Pt. fell when he only took crackers & liquids	
Medic prior to US:		Collapsed. Pt. fell when he only took crackers & liquids	
Current week:		Medic prior to US:	
Afternoon today DD		Medic prior to US:	
03 06		prisoner. Pt. acted like he wanted to be seen with eyes open. He did not even want to be treated because he thinks he was taking Pt. was again instructed that	
21 Oct 03	46 yr old male	was lying on the floor. Pt. has high cholesterol. Status: Cholesterol is high. He is not taking any medications and since he has a history of hypertension and high cholesterol status he will begin taking oral medication next week.	
2004		Medication Allergies: (NO) (YES) List: Started 2-3 days ago	
2004		Current Medications: (Name/Dose/Frequency/Last Taken) (NONE) Transistor available	
21/12/04		Recent Injuries (NO) (YES) Describe:	
Normal Physical Exam		Exam Findings: BP: 120/100 Pulse: 80 Resp: 18	
Physical Exam		Utilize Diagram and Space Below to Indicate Examination Findings. If additional space required, continue on reverse	
Family History			
Test Results		Procedure - Sutured inner lip laceration w/ 4 stitches, 5-0 nylon. Anes - 1/2% lidocaine with epinephrine. No further treatment required. Next prescription: Cef. MC. Rec'd from Dr. [Signature]	
Comments		Date: 2004-12-21	
Medic Record		CHRONOLOGICAL RECORD OF MEDICAL CARE	
STHAR/DR/DRM 600 (REV 6/97)		STHAR/DR/DRM 600 (REV 6/97)	
TMF-1 (15 Nov 2013) 2013		TMF-1 (15 Nov 2013) 2013	
Page 31		Page 31	
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ACLU-RDI 1088 p.1

ACLU-RDI 1073 p.1

## Healthcare had limited/Restricted access to data

- Only patient data, like lab/doctor reports
- Data was recorded manually
- Realtime analysis was missing
- Treatment was based primarily on Doctors judgement

# Major care providers have recognized data value

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TMC

A vertical line composed of small blue dots, positioned between the TMC logo and the Texas Medical Center text.

TEXAS  
MEDICAL  
CENTER



Mount  
Sinai  
Hospital

# Major care providers have recognized data value



**aetna**<sup>SM</sup>

Anthem

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**MetLife**<sup>®</sup>

**Humana**<sup>®</sup>

**AARP**<sup>®</sup>



ASSURANT

**PROGRESSIVE**<sup>®</sup>



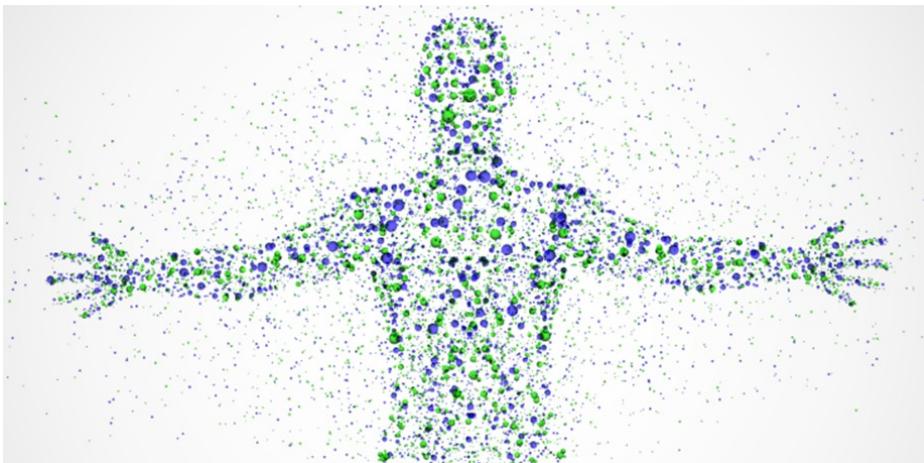
USAA<sup>®</sup>



KAI SER PERMANENTE<sup>®</sup>

UnitedHealthcare<sup>®</sup>

# What is healthcare analytics?

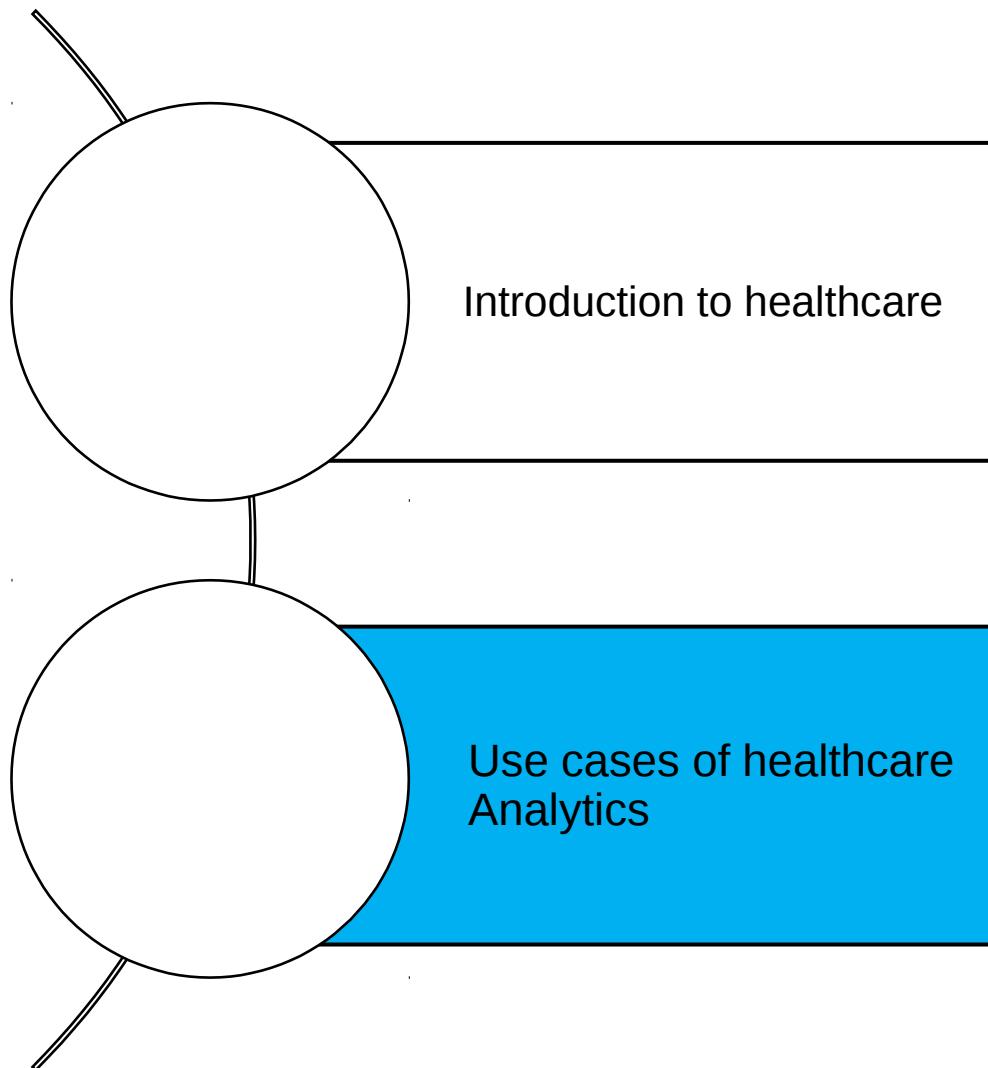


## Healthcare analytics now allows

- Collecting both Health, Behavioral data
- Identify best treatments for diseases
- Reduce excessive spending on health care
- Improve overall health for individual patients
- Identify preventive measures against illnesses

# Agenda

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# Healthcare Analytics

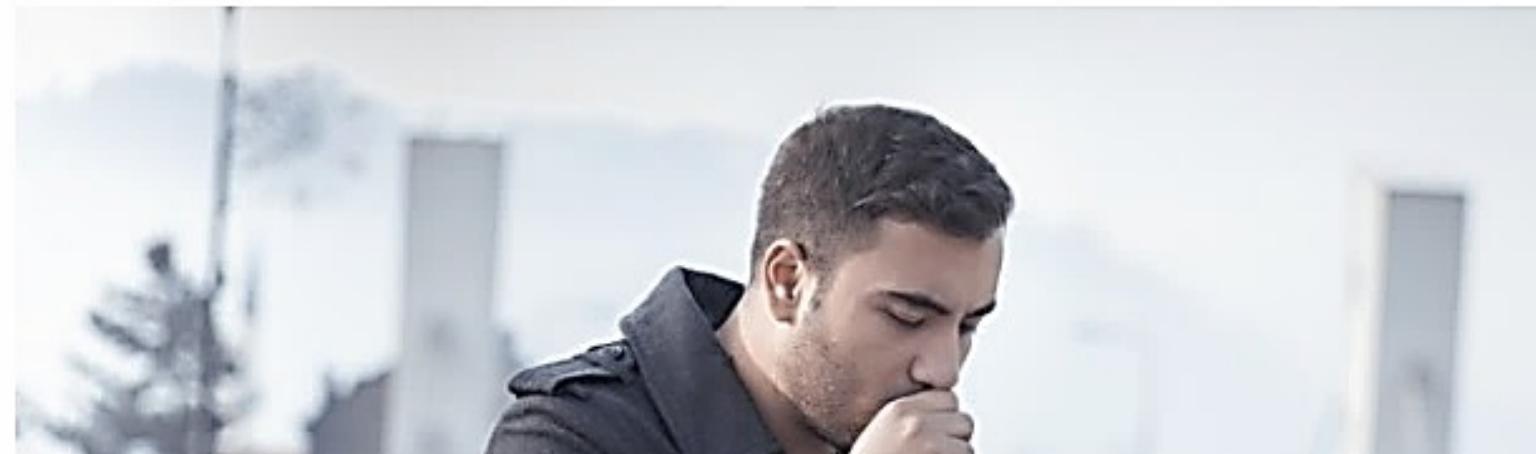
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# Use Case 1

## What's the Best Medicine for a Cough?

**Ask Well**

By RICHARD KLASCO, M.D. APRIL 6, 2018



The  
New York  
Times

# Symptoms of a cough & cold

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- Stuffy nose
- Sore throat
- Shortness of breath
  
- Lasts up to a week
- In severe case months

# Over the counter medication



In most cases you end up buying generic cough / cold medication

Which may only alleviate some symptoms

**Little evidence** that these medications are effective for all!

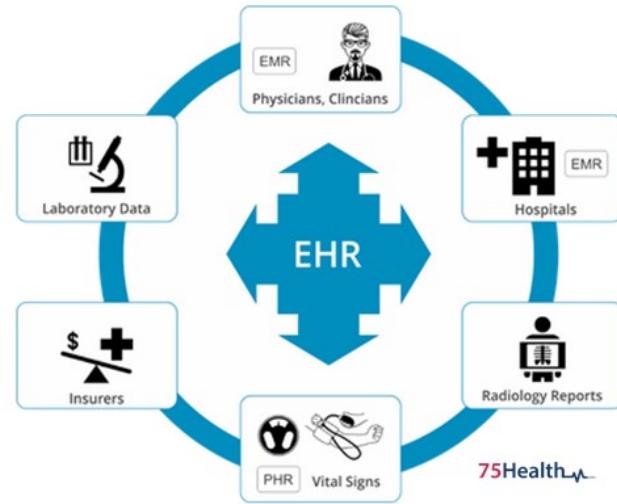


So, how can data and analytics can help us seek medication suitable for our personal profile for commonly occurring illnesses?



The insights depends on which **data** is available from you personal medical history, on your location, online behavior, recent climatic trends etc.

# Data from your personal health records

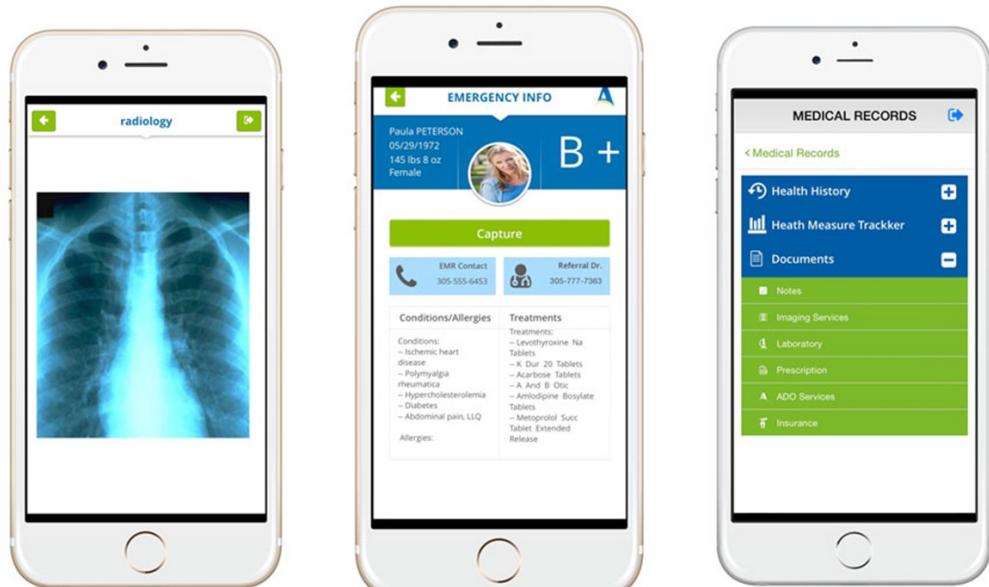


Electronic health records give information on your Personal Health profile



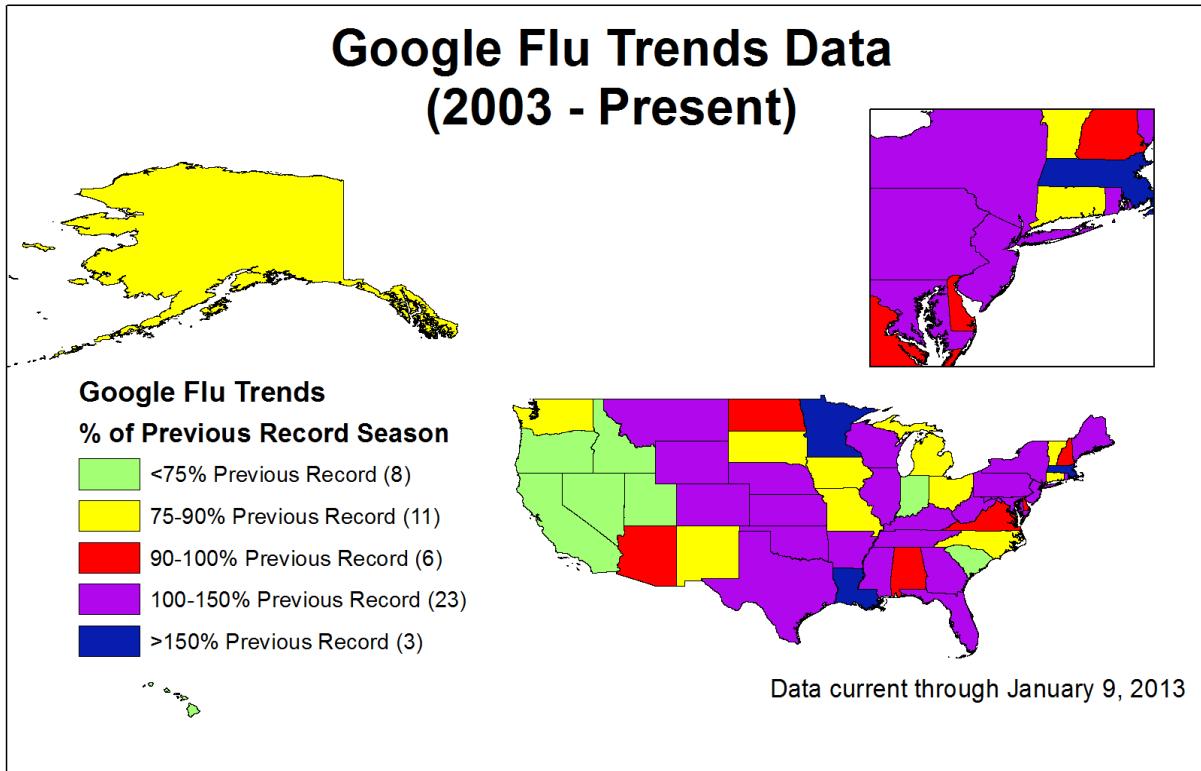
Behavioral data allows segmenting people, understanding and predicting their health care needs

# Example of personal medical data



- Allergies
- Laboratory test results
- Prescription record
- Vaccinations

# Behavioral data of all people can be used



- Based on user purchases of medication online
- User search analysis for medication online
- Based on **local weather conditions**
- Based on **epidemiology trends**
- Current disease spread (**e.g. Bird flu**)



Use this data healthcare applications  
can prescribe preventive measures

# Your personal Healthcare apps could....



- Update you on **local health trends**
- Inform on **preventive measures** on common ailments
- Inform on active exercises and diet changes
- Inform on **suitable cough / cold medicine** for your profile
- Alleviate the symptoms to the maximum extent possible

# In severe cases physicians could....



- Validate your symptoms
- Prescribe treatment actions
- Prescribe targeted cough / cold medications

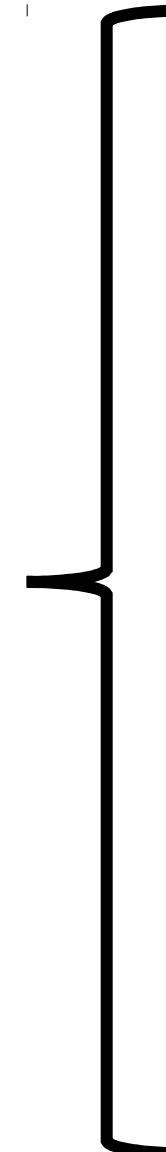
# Prevention is better

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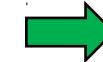


Insights from health care analytics not only provide information on effective medication to allow targeted treatment, but also allow predict & prevent contracting ailments

# Healthcare apps that you can examine



Prescription advice  
Validating Symptoms



**Medscape** **WebMD<sup>SM</sup>**

Health diet and  
exercise recommendations



Mental health improvement

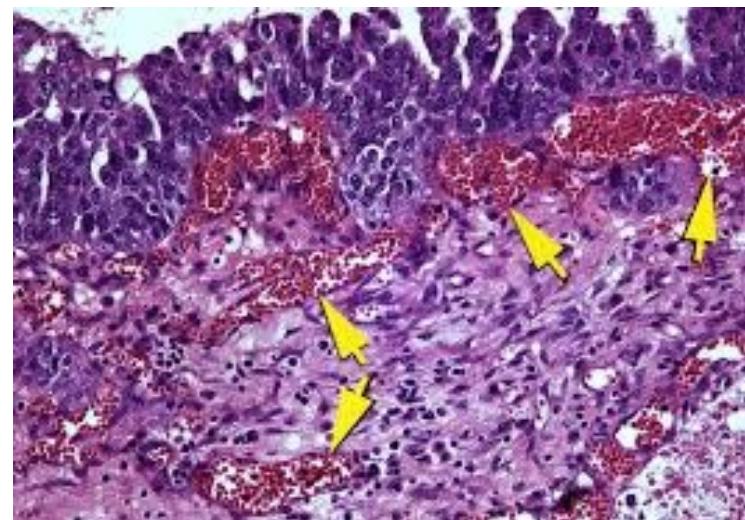


**happify**  
**D A I L Y**

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# Use Case 2

# Predictive screening in healthcare



About 10 of every 100 women who develop **ovarian cancer** will have a BRCA1 or BRCA2 mutation. For women who have a BRCA1/2 mutation, the risk for early **breast cancer and ovarian cancer** is greatly increased. In some families **breast cancer** or **ovarian cancer** will occur due to inherited mutations in genes other than BRCA1/2. Jun 17, 2014

# Predictive screening in healthcare



**1 in 8** women will develop breast cancer at some point in her lifetime. **1 in 75** will develop ovarian cancer.

**Bright Pink** created this tool to help you assess **your personal risk level** for breast and ovarian cancers. The more you know, the better prepared you are to take **actions** that can help reduce your risk.

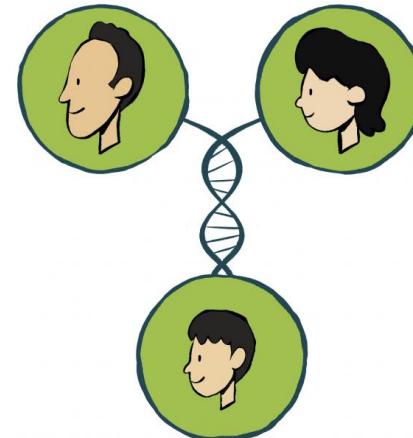
Your body. Your life.  
Don't leave it up to chance.

[ASSESS YOUR RISK](#)

# Healthcare and lifestyle data is used for prediction

## Collect data concerning

- Personal health (symptoms)
- Clinical tests results
- Family health history
- Ancestry
- Behavioral data (Drinking, Smoking habits)

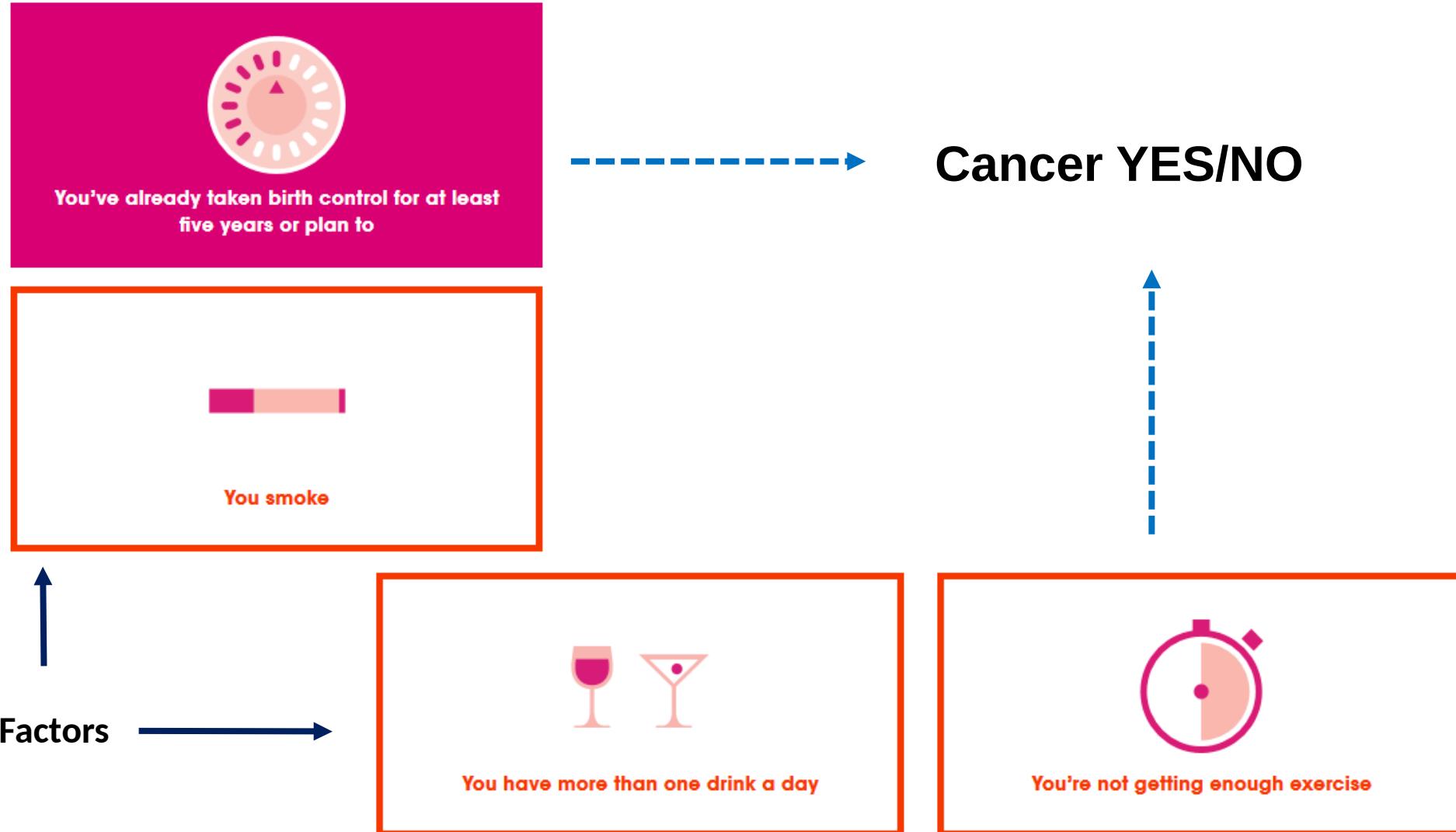


**Do you smoke?**

YES

NO

# Following Cancer risk factors are analyzed



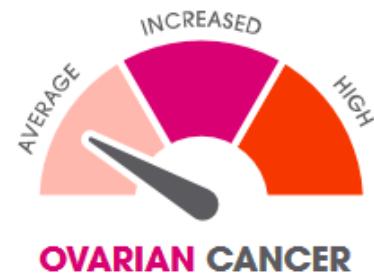
# Risk is calculated by predictive tools

## Baseline Risk for Breast Cancer



Your answers to our personal and family health history questions suggest that you are at average baseline risk for breast cancer — meaning you have up to a **12% chance** of developing breast cancer in your lifetime. It's important to note, however, that 75% of breast cancers are diagnosed in average-risk women. It's great that you've taken the first step in being proactive about your health by assessing your risk: knowing the modifiable risk factors for the disease and maintaining a healthy lifestyle are still important even when your risk is average.

## Baseline Risk for Ovarian Cancer



Your answers to our personal and family health history questions suggest that you are at average baseline risk for ovarian cancer — meaning you have up to a **1.3% chance** of developing ovarian cancer in your lifetime. It's important to note, however, that 75% of ovarian cancers are diagnosed in average-risk women. It's great that you've taken the first step in being proactive about your health by assessing your risk: knowing the modifiable risk factors for the disease and maintaining a healthy lifestyle are still important even when your risk is average.

# Allows generating actionable insights

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**Take These Results With You**

**EMAIL TO YOUR DOCTOR**

**EMAIL TO YOURSELF**

**DOWNLOAD A PDF**



**Take immediate action!**

# Suggest life style changes

## YOUR RISK MANAGEMENT PLAN

### Be Proactive About Your Health

Finding out your baseline risk level is the first step in being proactive. Now it's time to turn that awareness into action. Talk to your healthcare provider about these guidelines to determine which strategies are best for you.

### About Genetic Counseling and Testing

If you want to confirm that your baseline risk truly is average, consider talking with your healthcare provider or a genetic counselor about whether genetic testing is right for you. If you need help finding a genetic counselor to talk to in person or on the phone, visit the [National Society of Genetic Counselors](#) for more information.

[About Genetic Counseling and Testing](#)

### Keep Up with Well-Woman Exams

These annual exams, which are covered in all insurance policies, should include:

- Clinical breast and pelvic exams starting at age 20
- Pap smear — though it's important to know that these check for cervical cancer, not for ovarian cancer, and you may not get one every year
- Mammograms yearly beginning at age 40

[More about well-woman exams](#)

### Know Your Normal

Knowing what's normal for your body is key to early detection, since it will help you notice when something out of the ordinary is happening. To start with, get to know the typical look and feel of your breasts – everybody's breasts are different! While you do this, also make sure to learn the signs and symptoms of breast cancer so you can recognize when something that's not normal for you might be problematic. The same is true for knowing how your body typically reacts with menstruation and what sort of digestive fluctuations are normal for you, along with the signs and symptoms of ovarian cancer. If you do notice an atypical change in your breasts or in your digestion or menstruation and it persists for 2-3 weeks, be sure to bring it to your healthcare provider's attention.

[More about breast and ovarian self-awareness](#)

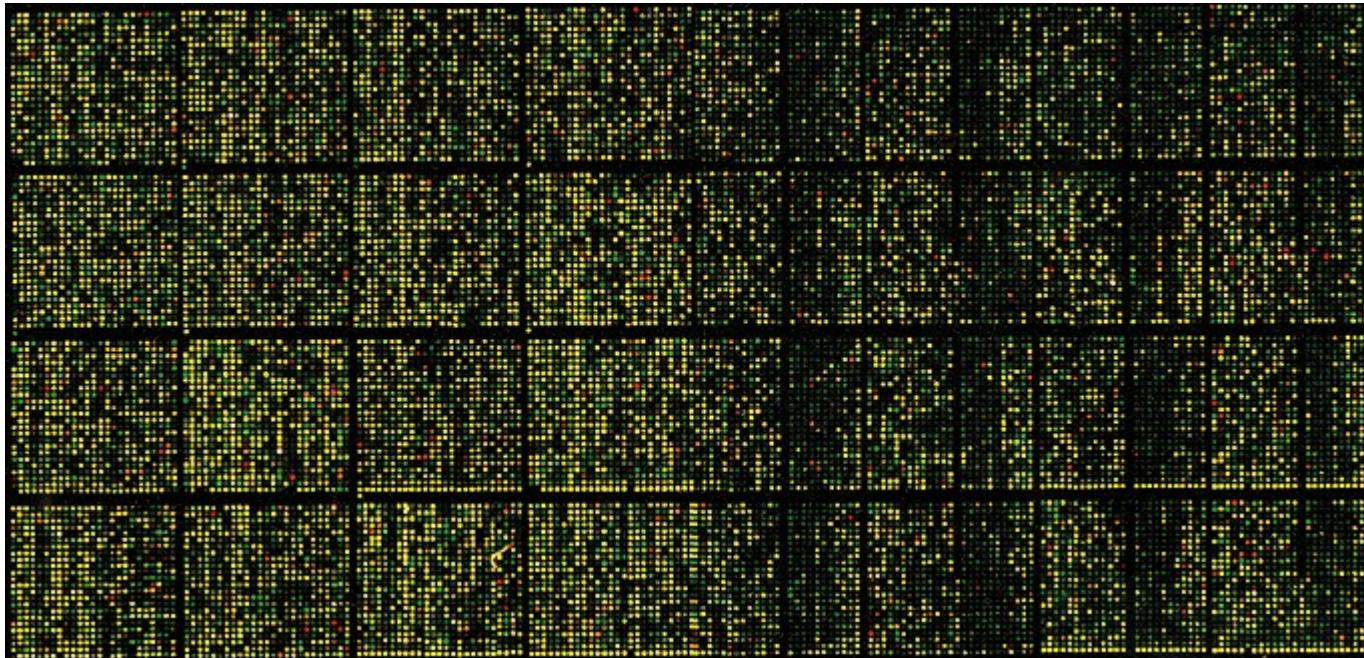
### Risk Reduction Options

Your best risk reduction options center on maintaining a healthy lifestyle. Improving your overall health can improve your overall risk level. Review the "How Life Affects Risk" section above to learn ways you can make a difference.

[More about lifestyle risk reduction](#)

Which other fields apply healthcare analytics?

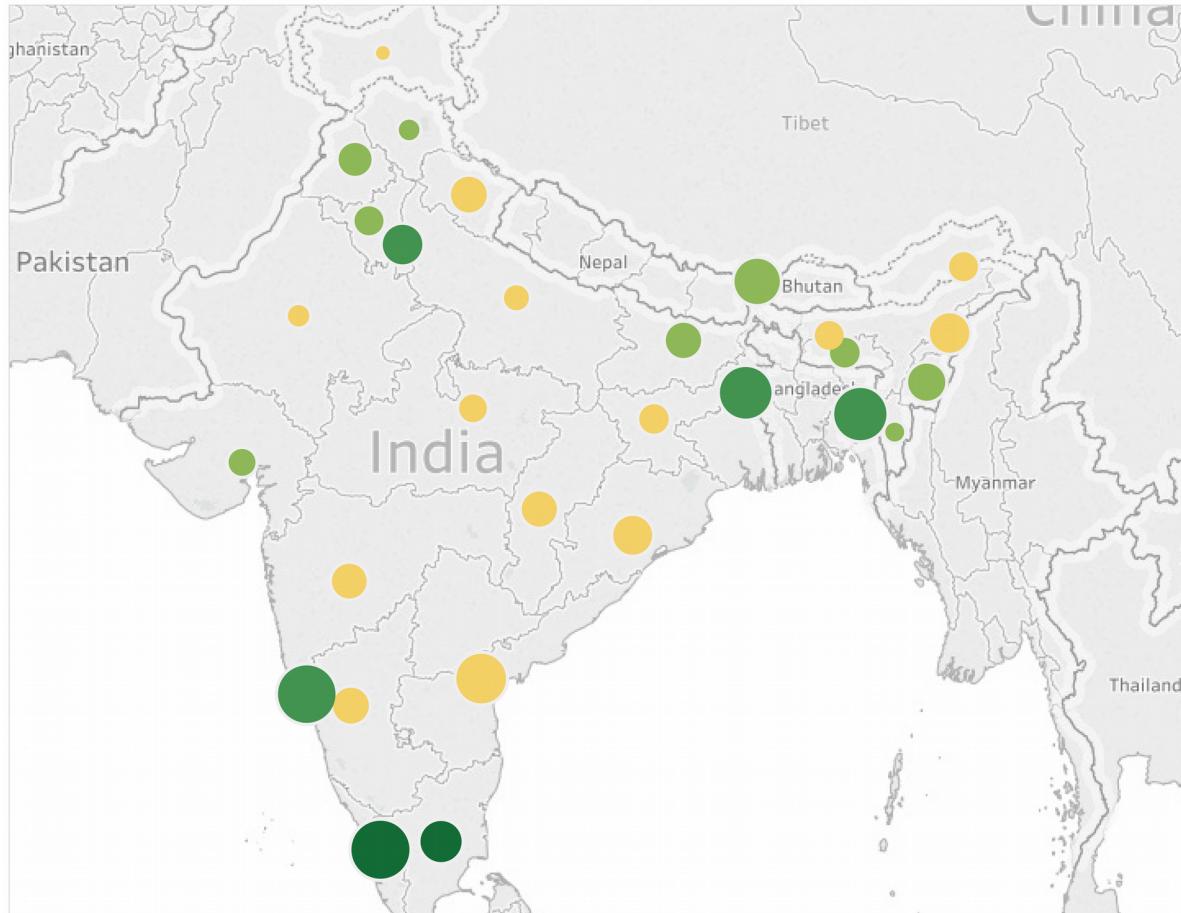
# In which fields healthcare analytics is applied?



## Medical Screening

Identifying risk of cancer  
or heart disease in you family

# In which fields healthcare analytics is applied?

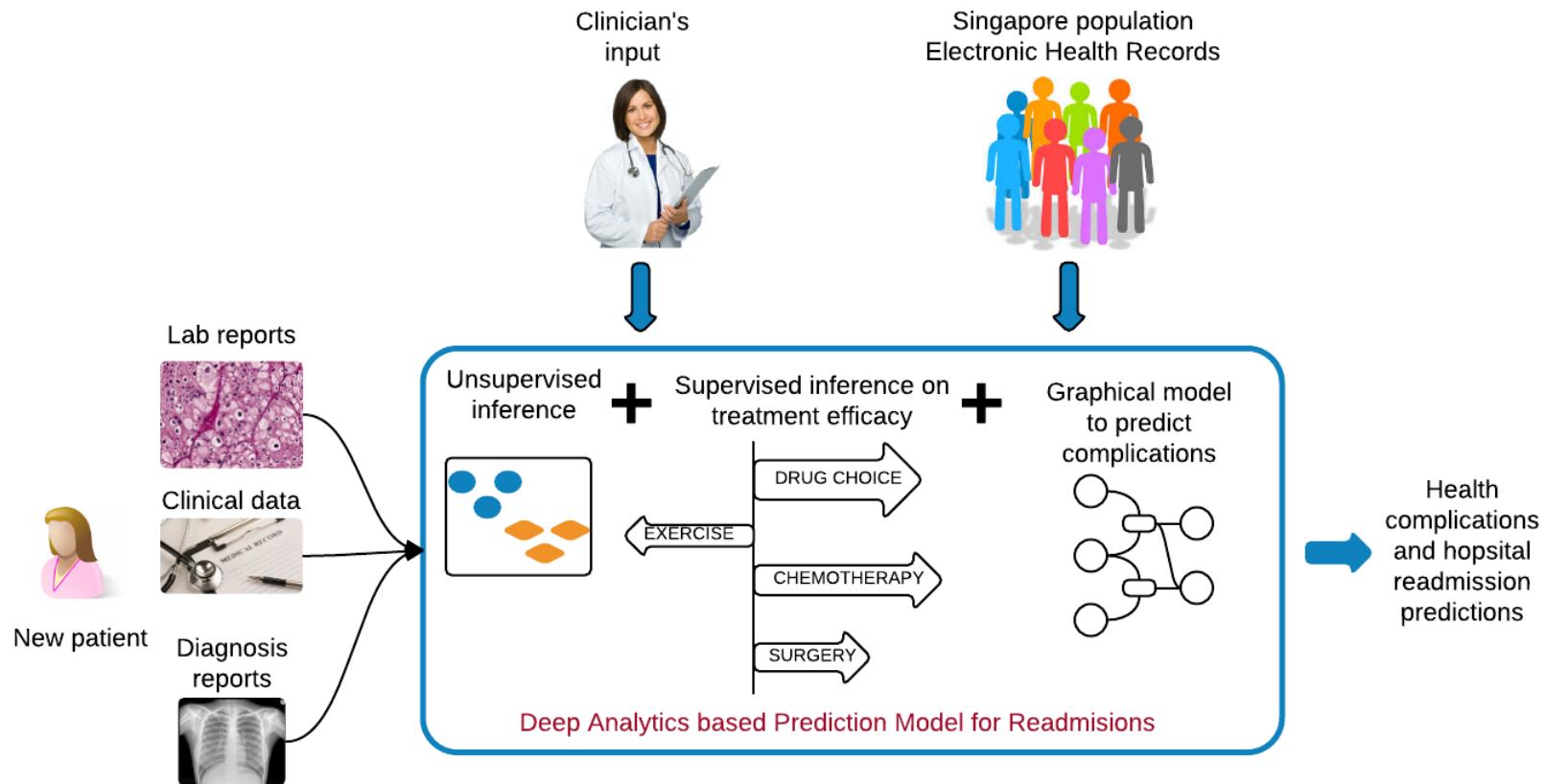


Map based on Longitude (generated) and Latitude (generated). Color shows NFHS III(2005-06)-Number of women in age group 15-49 per 100,000 reported Diabetes-Total. Size shows NFHS III(2005-06)-Number of men in age group 15-49 per 100,000 reported Diabetes-Total. Details are shown for India/States/UTs.

## Epidemiology

Understanding why more Indians are becoming diabetic

# In which fields healthcare analytics is applied?



**Clinical analytics**  
Providing better treatment

# Summary of use cases

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- Healthcare analytics is a discipline which uses patient data to develop solutions for betterment of health
- Various products like mobile apps to web applications use past data to provide healthcare insights (**prescriptive and predictive insights**)
- The data collected can be coming from individual medical records and from behavioral data

# **Session 1 – part 2**

# Agenda

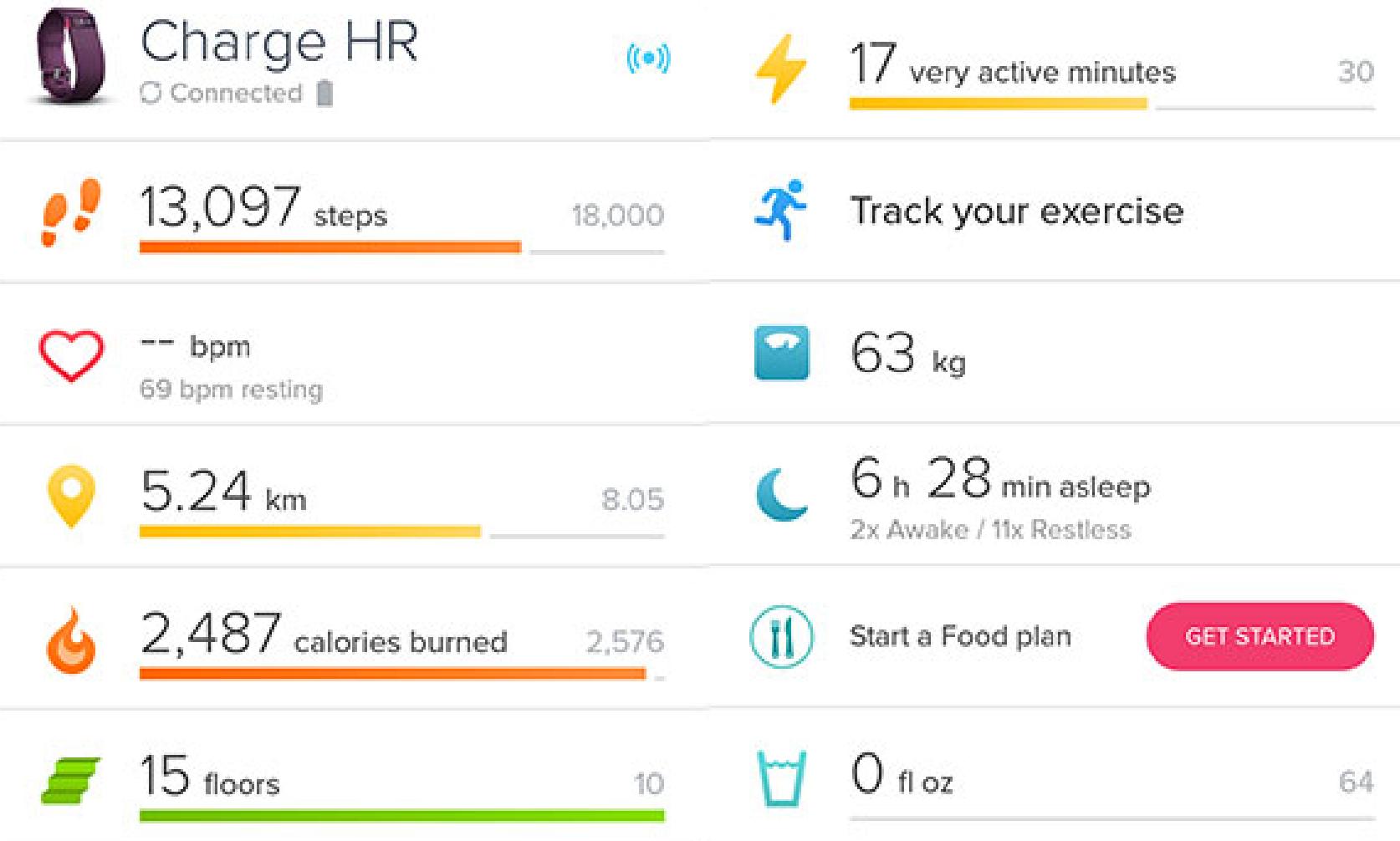
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# Healthcare Analytics



So what is the nature of data we are dealing  
in health care analytics scenario?

# Structured data



# Structured data

Variable/Attribute		Variable/Attribute										Good Range
Analyte name		8/31/2009	9/8/2009	9/14/2009	9/21/2009	9/28/2009	10/5/2009	10/19/2009	10/27/2009	11/3/2009	12/16/2009	
White blood cell count		8.30	6.70	10.30	11.10	8.70	8.30	8.40	11.70	9.10	8.20	3.8-10.8
Red blood cell count		4.56	4.26	4.39	4.45	4.39	4.62	4.49	4.70	4.40	5.07	4.2-5.8
Hemoglobin		16.20	15.00	15.60	15.60	15.60	16.40	16.00	15.90	15.00	15.50	13.2-17.1
Hematocrit		48.90	45.00	46.60	46.00	45.90	48.70	46.30	47.00	42.30	46.40	38.5-50.0
MCV		107.30	105.60	106.10	103.40	104.50	105.40	103.20	100.00	96.10	91.50	80-100
MCH		35.60	35.30	35.40	35.10	35.50	35.60	35.80	33.80	34.10	30.50	27-33
MCHC		33.20	33.40	33.40	34.00	33.90	33.80	34.60	33.80	35.50	33.30	32-36
RDW		24.00	22.50	21.90	20.80	19.40	18.30	16.50	14.10	15.50	15.30	11.0-15.0
Platelet count		281.00	182.00	302.00	302.00	239.00	242.00	284.00	323.00	386.00	304.00	140-400
Glucose		144.00	103.00	100.00	79.00	93.00	78.00	80.00		94.00	87.00	65-99
Absolute Neutrophils		6242.00	4945.00	8106.00	8381.00	5672.00	5212.00	5552.00				1500-7800
Absolute Lymphocytes		1552.00	1253.00	1751.00	1943.00	2445.00	2415.00	2184.00				850-3900
Absolute Monocytes		465.00	482.00	402.00	677.00	479.00	564.00	554.00				200-950
Absolute Eosinophils		25.00	7.00	21.00	78.00	87.00	83.00	76.00				15-500
Absolute Basophils		17.00	13.00	21.00	22.00	17.00	25.00	34.00				0-200
Neutrophils %		75.20	73.80	78.70	75.50	65.20	62.80	66.10		64.00	67.00	
Lymphocytes %		18.70	18.70	17.00	17.50	28.10	29.10	26.00	26.00	25.00	22.00	
Monocytes		5.60	7.20	3.90	6.10	5.50	6.80	6.60	11.00	9.00	8.00	
Eosinophils %		0.30	0.10	0.20	0.70	1.00	1.00	0.90	1.00	1.00	2.00	
Basophils %		0.20	0.20	0.20	0.20	0.20	0.30	0.40	0.00	1.00	1.00	
Creatinine		0.78	0.66	0.66	0.70	0.88	0.80	0.73		0.80	0.80	0.76-1.46
Sodium		135.00	137.00	137.00	137.00	138.00	140.00	142.00		137.00	140.00	135-146
Potassium		4.10	4.00	4.20	3.90	3.80	3.70	4.30		4.00	3.80	3.5-5.3
Chloride		96.00	100.00	100.00	100.00	100.00	98.00	101.00		105.00	101.00	98-110
Carbon Dioxide		24.00	24.00	26.00	24.00	26.00	28.00	26.00		29.00	21.00	21-33
Calcium		8.60	8.90	9.00	8.90	9.00	9.20	9.00	9.50	9.20	9.50	8.6-10.2
Protein		6.80	7.00	7.00	6.70	6.60	6.80	7.10		6.90	7.20	6.2-8.3
Albumin		3.90	3.70	4.10	4.10	4.10	4.10	4.00		3.10	3.40	3.6-5.1
Globulin		2.90	3.30	2.90	2.60	2.50	2.70	3.10		3.80	3.80	2.1-3.7
AST		22.00	35.00	18.00	27.00	28.00	27.00	34.00		27.00	49.00	10.0-35.00
ALT		42.00	46.00	32.00	25.00	24.00	23.00	23.00		18.00	21.00	9.00-60.00
BUN										5.00	6.00	7.00-25.00

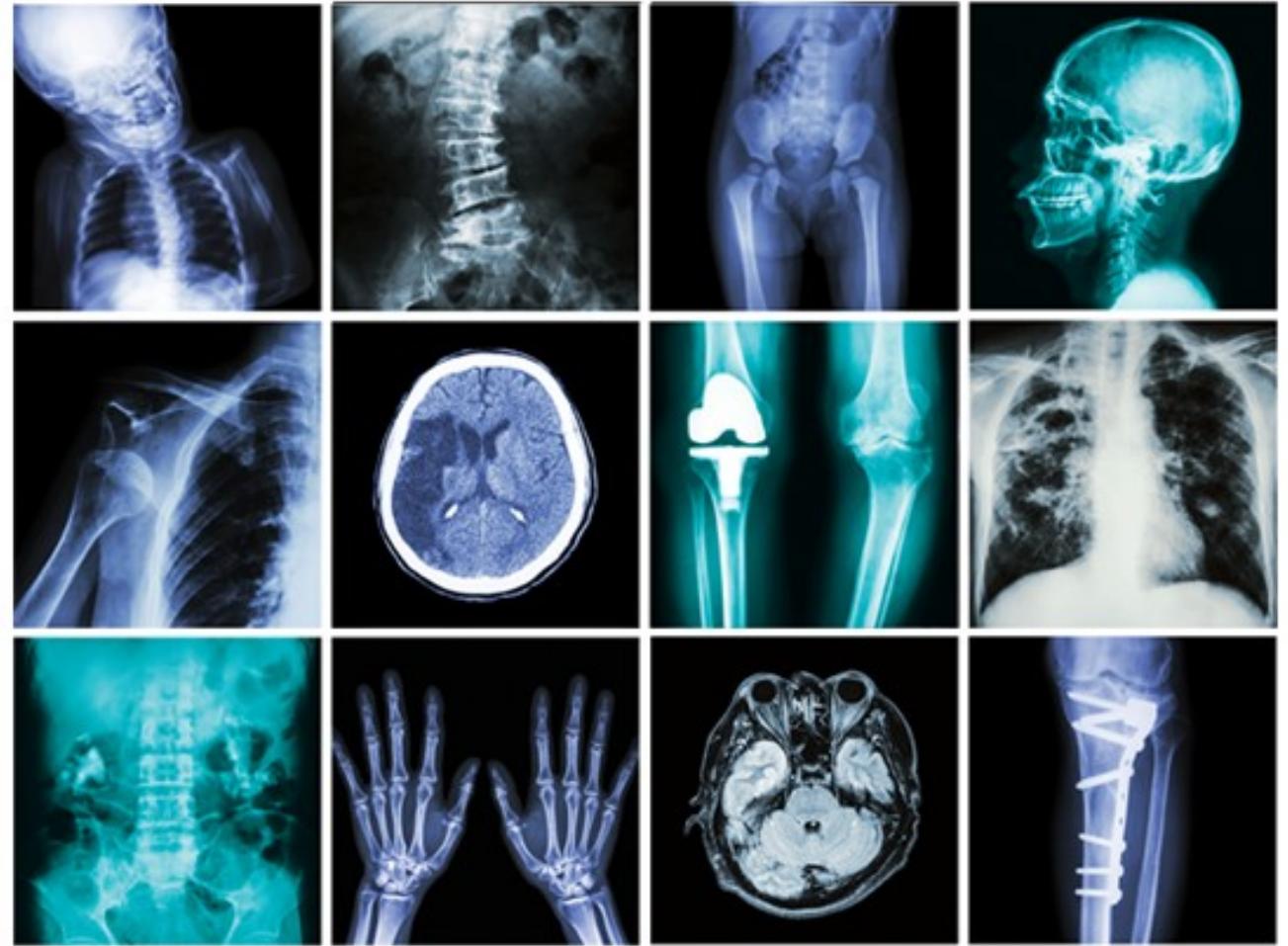
Variable/Attribute

Observations/Cases



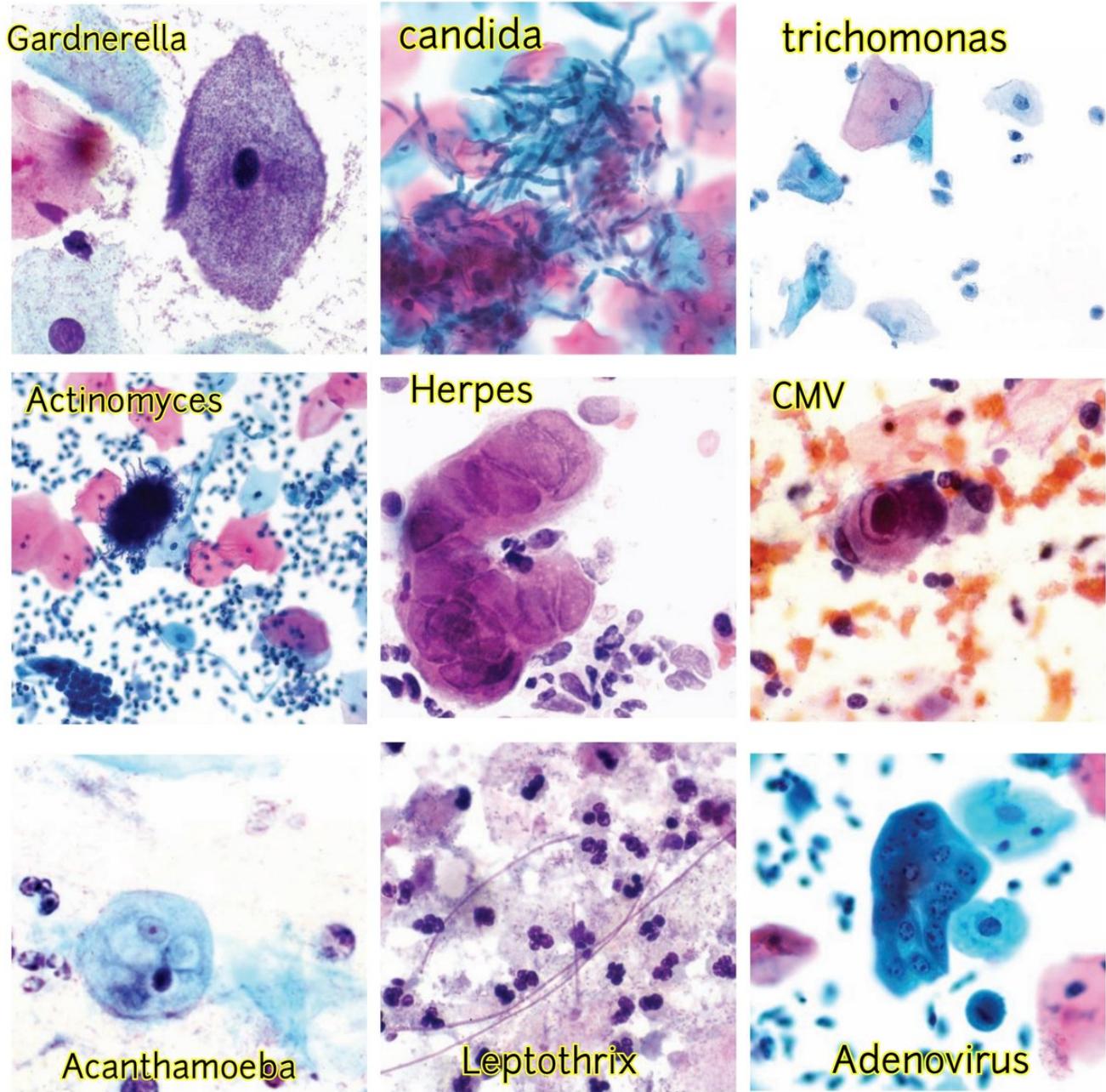
**80% of all clinical data is unstructured**

# Unstructured data (radiology images)

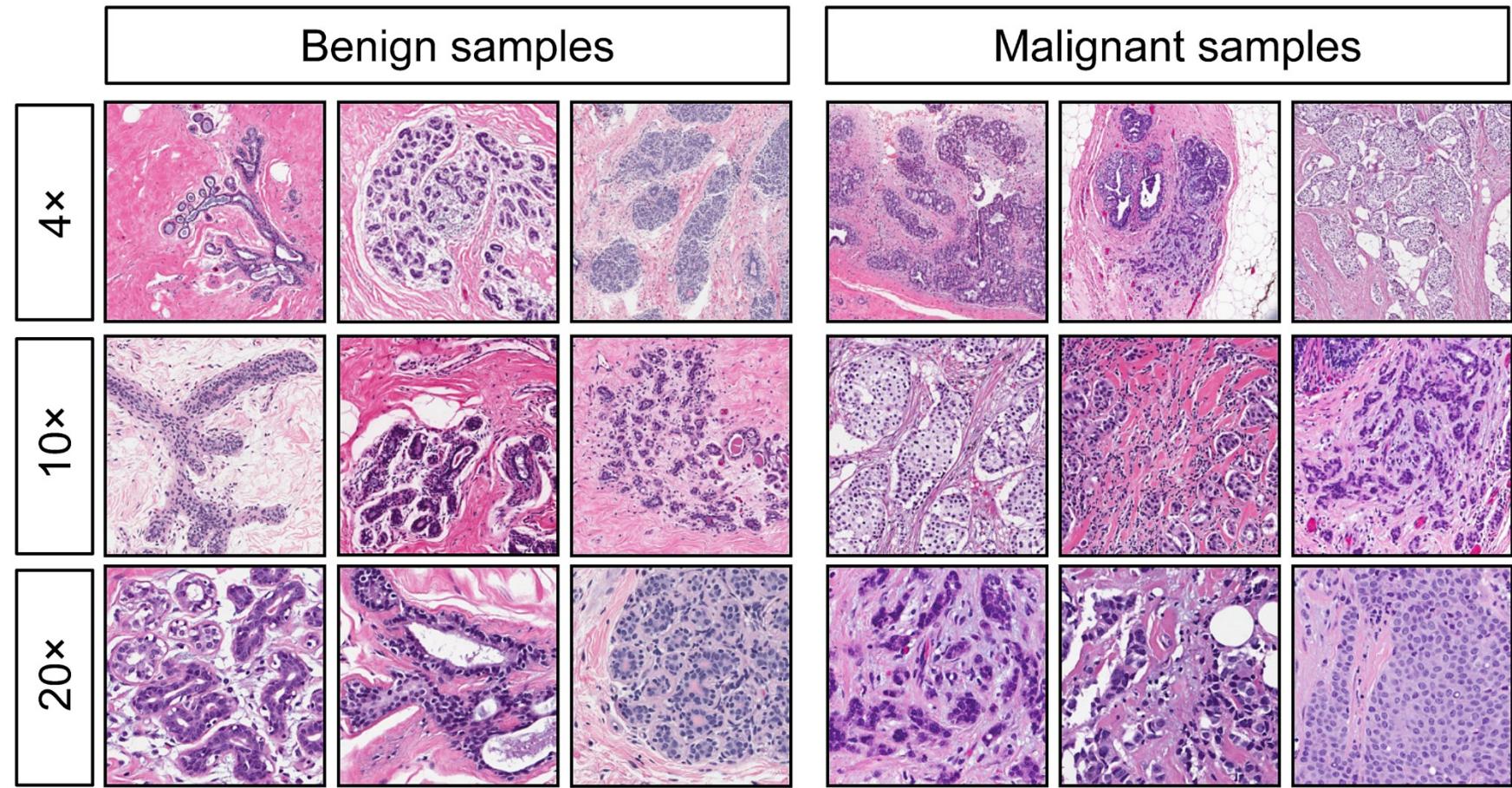


# Unstructured data

(microscopic image data)

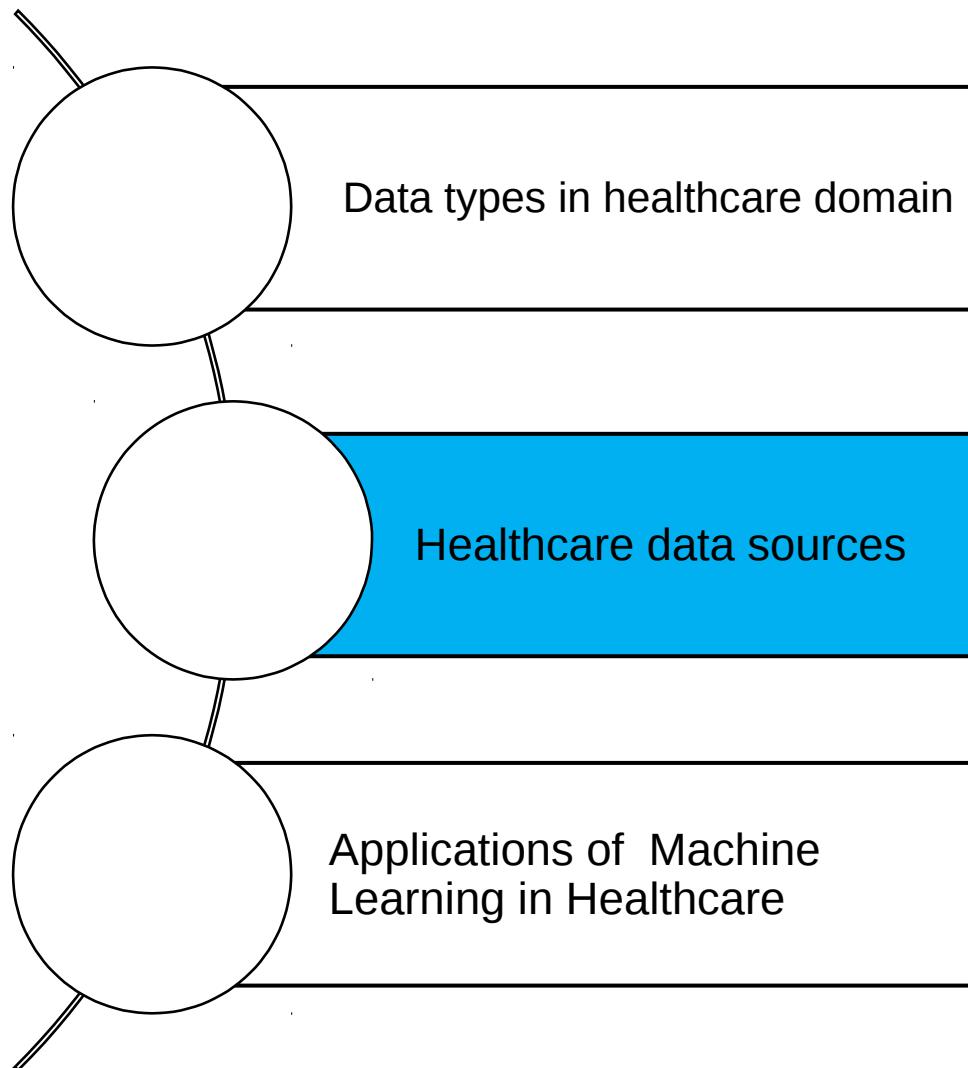


# Unstructured data (pathology/histology)



# Agenda

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# Healthcare Analytics



What are the sources of healthcare data?

# Example of Primary data sources

## Clinical

- EMR
- Clinical notes
- Lab reports
- XRAYS
- Medical tests

## Pharmaceutical

- Clinical trials
- Patient drug history

## Insurance

- Patient Medical claims

## Behavior

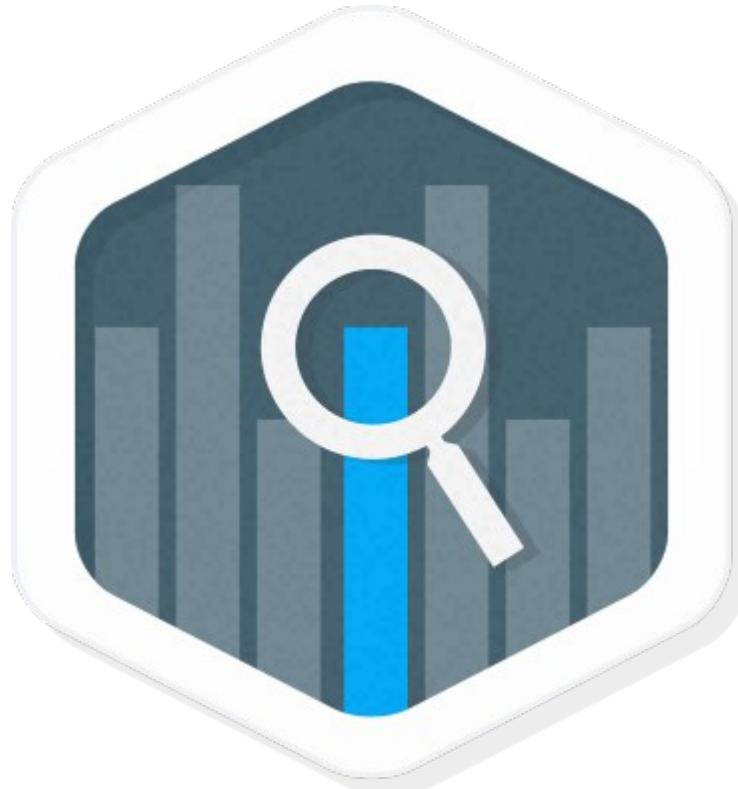
- Health questionnaire
- Exercise data
- Patient responses
- Social media data



What secondary sources of data do we have?

# Secondary data sources

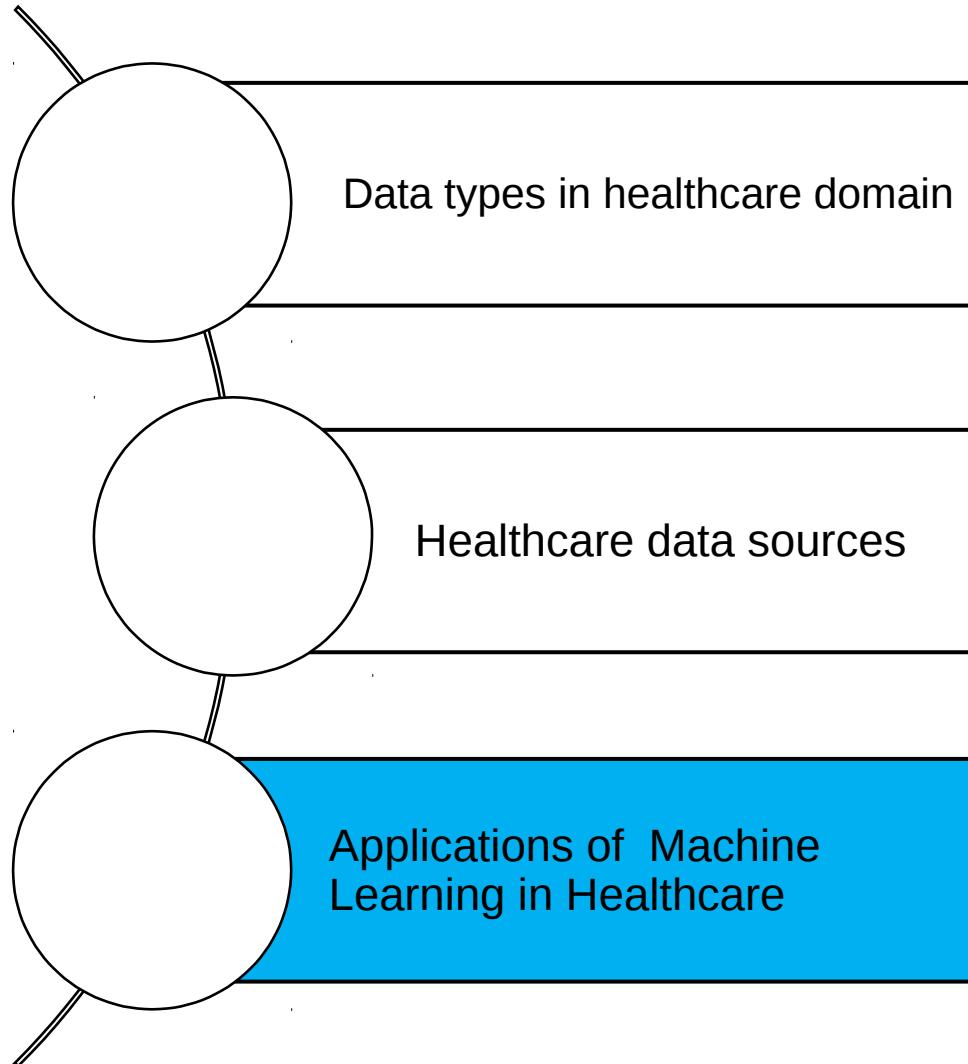
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- Hospital operations data
- Insurance claim data (blinded)
- External market research data
- Population studies data

## Agenda

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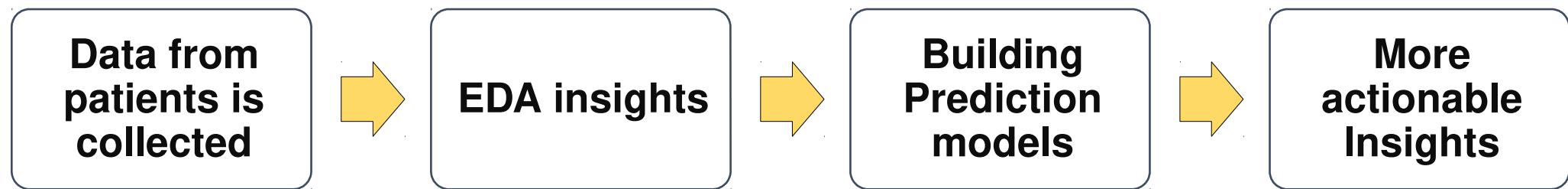
# Healthcare Analytics



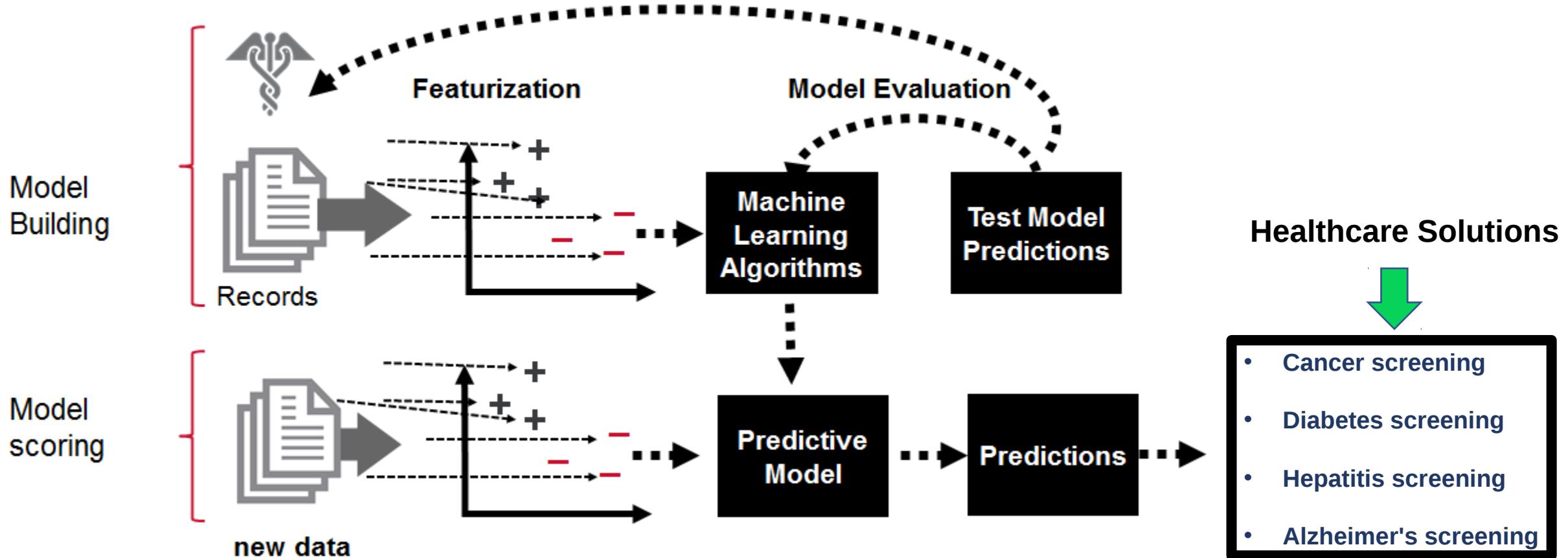
How do we develop ML solutions using  
health-care data?

# How does ML help with more insights?

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# Developing Healthcare Analytics products



# Summarizing

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## Data types

- Health care data is both structured & unstructured



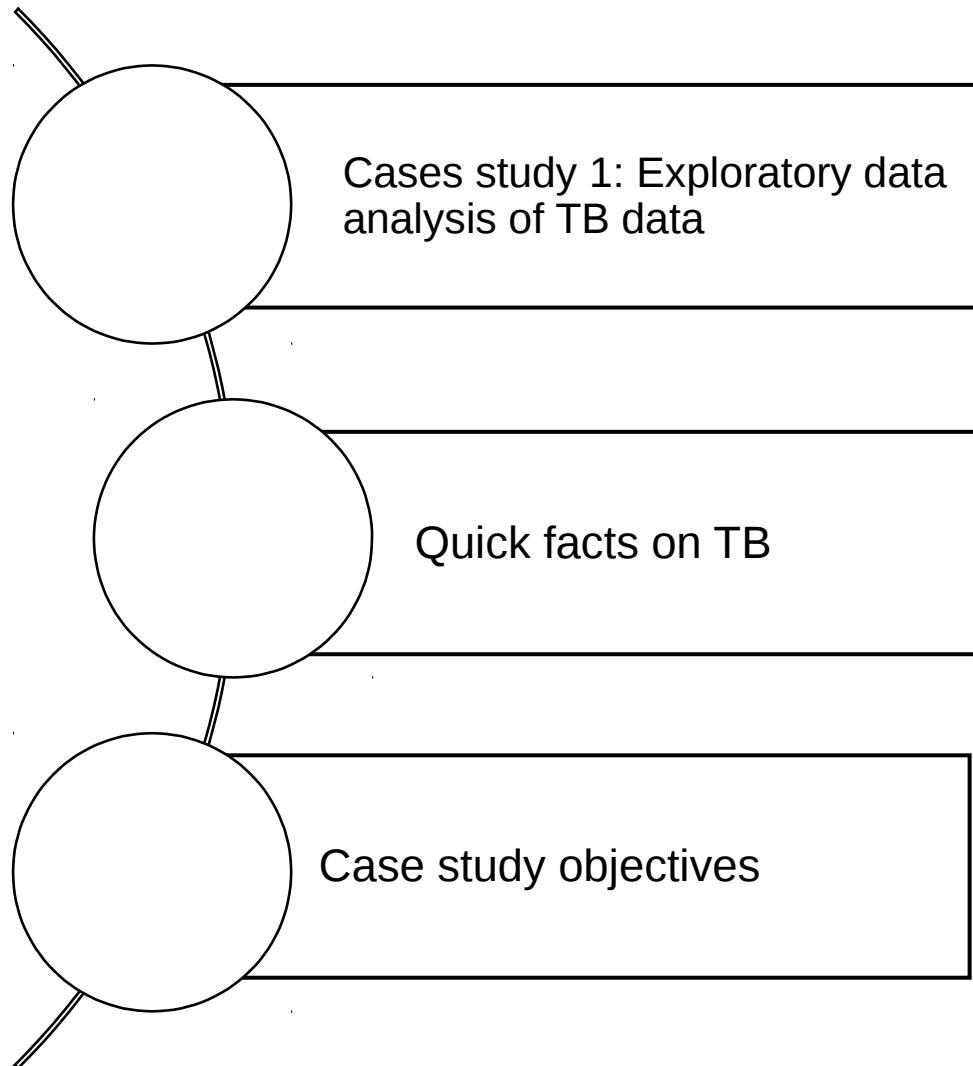
## Application of ML solutions

- Disease risk prediction
- Targeted medical treatments

# **Session 2**

## Agenda

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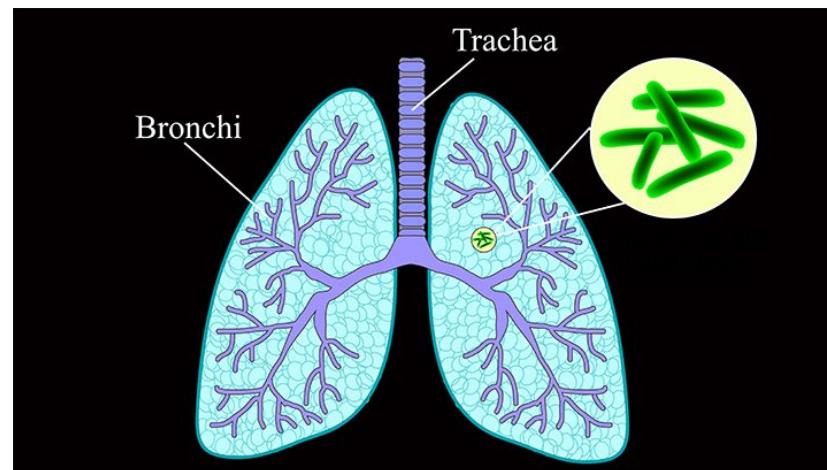


# Healthcare Analytics

## Case study 1

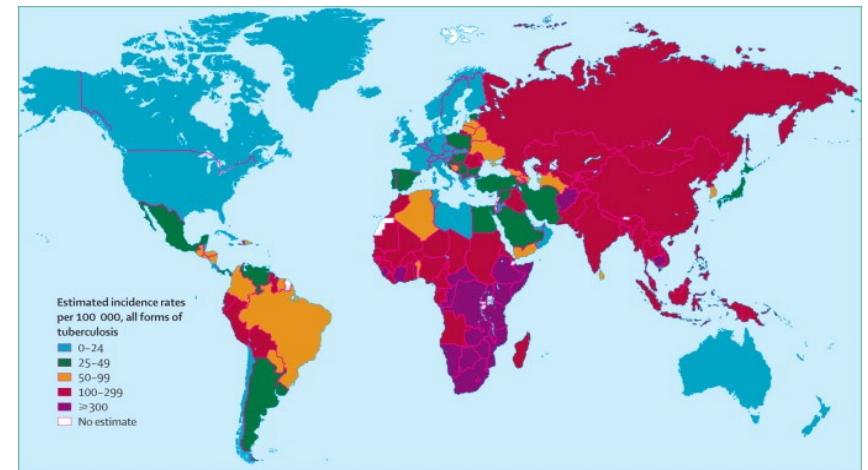
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**Perform EDA on burden of Tuberculosis globally**



# Quick facts about Tuberculosis

- Approx 25% of the world's population infected
- 1.4 million TB-related deaths in 2016



# Economic cost is rising significantly

## MDR-TB treatment could cost up to 25L in Mumbai, says study

*Some forms of tuberculosis are so expensive to treat that an average Mumbai family could spend over half its annual income on a single patient.*

Malathy Iyer | TNN | October 03, 2016, 06:09 IST



# Exploring the TB dataset

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The dataset contains **15+** variables containing  
Over **5000** observations from years **1990 – 2013**  
of **50+** countries



[who.int/tb/en/](http://who.int/tb/en/)

# Objectives of the case study

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- ❖ Analyse Global trends of TB burden
- ❖ Find active geographical hotspots
- ❖ Find regions where mortality rates have dropped down
- ❖ Analyse how do HIV patients fare when infected with TB

# Key findings example summary

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- Globally in 2013, almost \_\_\_\_\_ million people fell ill with TB and \_\_\_\_\_ million died due to TB and TB/HIV.
- In 2013, the largest number of new TB cases occurred in the \_\_\_\_\_
- TB is a leading killer of HIV-positive people causing \_\_\_\_\_ one fourth of all HIV-related deaths.
- The estimated number of people falling ill with TB each year (new cases or incidence case rate) is \_\_\_\_\_
- The TB death rate dropped by \_\_\_\_\_ between 1990 and 2013
- The TB incidence rate in many countries of the World has \_\_\_\_\_

# **Session 3**

## Case study 2

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# Regression analysis to predict risk of heart disease



National Heart, Lung,  
and Blood Institute

# What factors are responsible for heart risk?



The death of **US President Roosevelt** while in office initiated the studies to understand Heart diseases better.

The Framingham heart study allowed identifying **Multiple risk factors** which directly contributed for Heart disease using data from cohorts of patients over a couple of years

# Following risk factors were identified



## Predictors

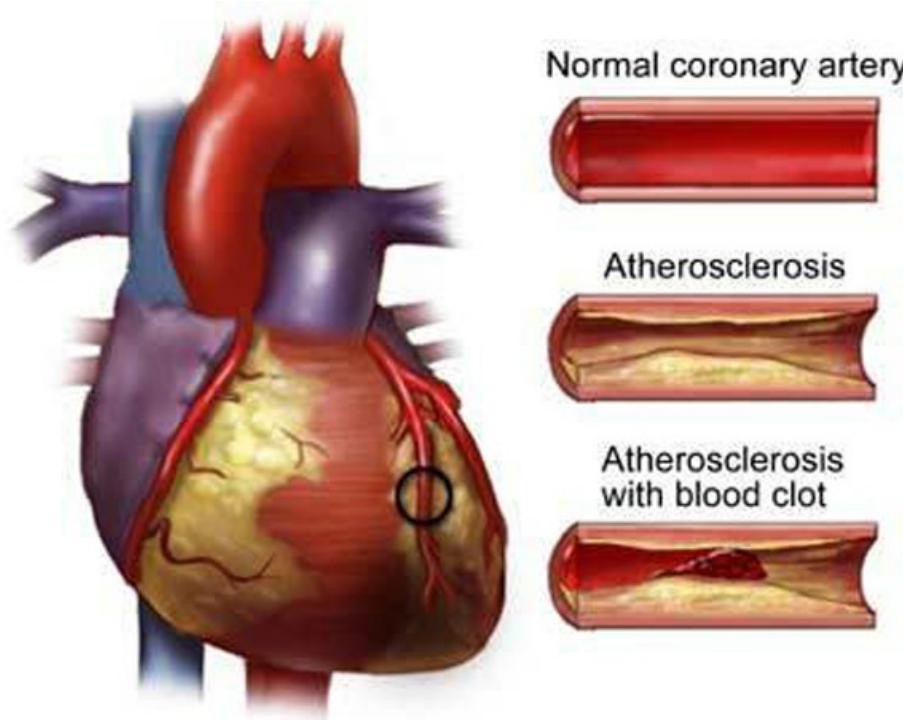
- Male Sex
- Age
- Systolic Blood Pressure (SBP)
- Use of Antihypertensive treatment (yes/ no)
- Smoking
- Diabetes mellitus
- Total cholesterol
- HDL cholesterol
- BMI replacing lipids in a simpler model

# Objectives of the case study

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- ❖ Perform EDA of the heart risk data set
- ❖ Develop a classification model in Python to train and test the model
- ❖ Determine the accuracy of predictions on heart disease
- ❖ Develop a treatment plan for high risk patients

# Exploring the Heart disease screening dataset

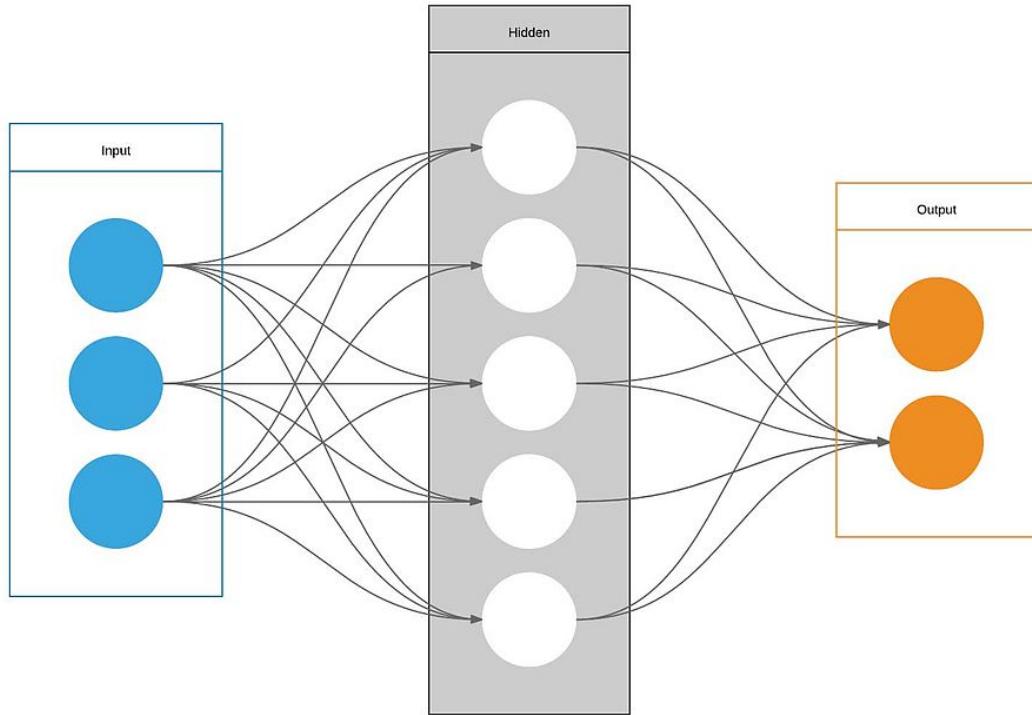


Contains 16 variables about  
Heart Risk factors and over  
4000 observations



Machine learning model like Logistic regression can be used to predict risk of heart disease

# How do we build a predictive model?



- Randomly split patients data into training and testing sets
- Use logistic regression **on training set** to predict whether or not a patient experienced CHD within 10 years of first examination
- Evaluate predictive power of model on **test set**

Data Input —→ Model —→ PREDICTION

Case study 2

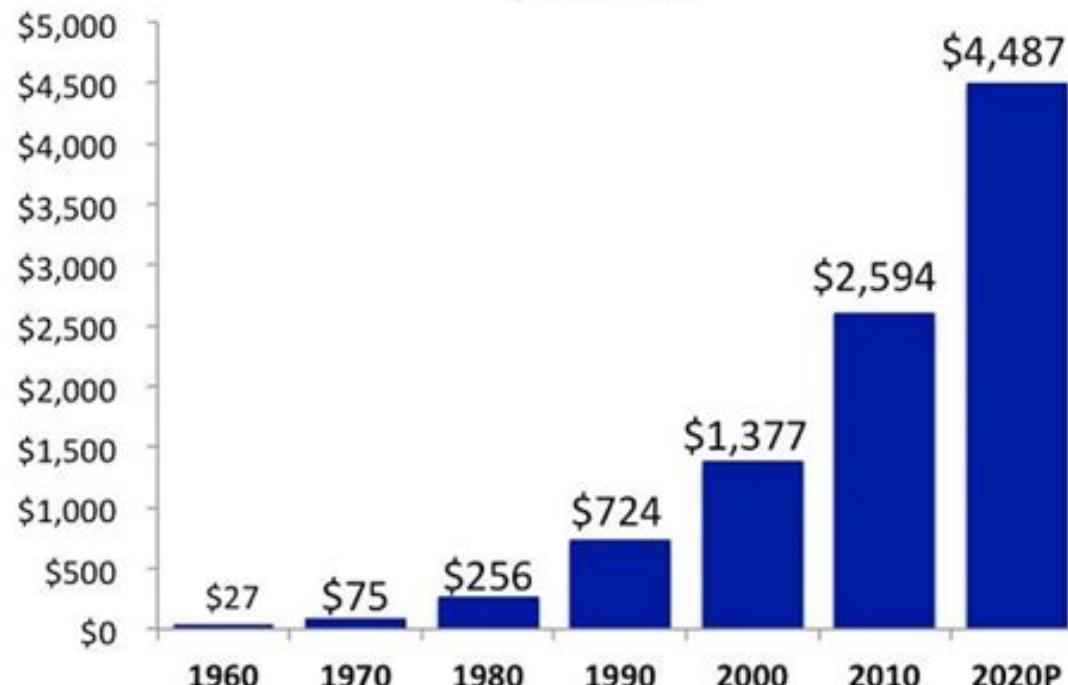
# **Session 4**

# Reducing health care costs using Decision Trees

# Objectives of the case study

## Healthcare Costs 1960 – 2020

(In Billions)



Centers for Medicare and Medicaid Services 2012 California Healthcare Foundation

Healthcare costs are a major expense for insurance providers and governments



Lets consult **Scion healthcare mgmt.**  
company identify high risk patients  
to lower healthcare costs

# Objectives of the case study

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## Goal: improve the quality of cost prediction

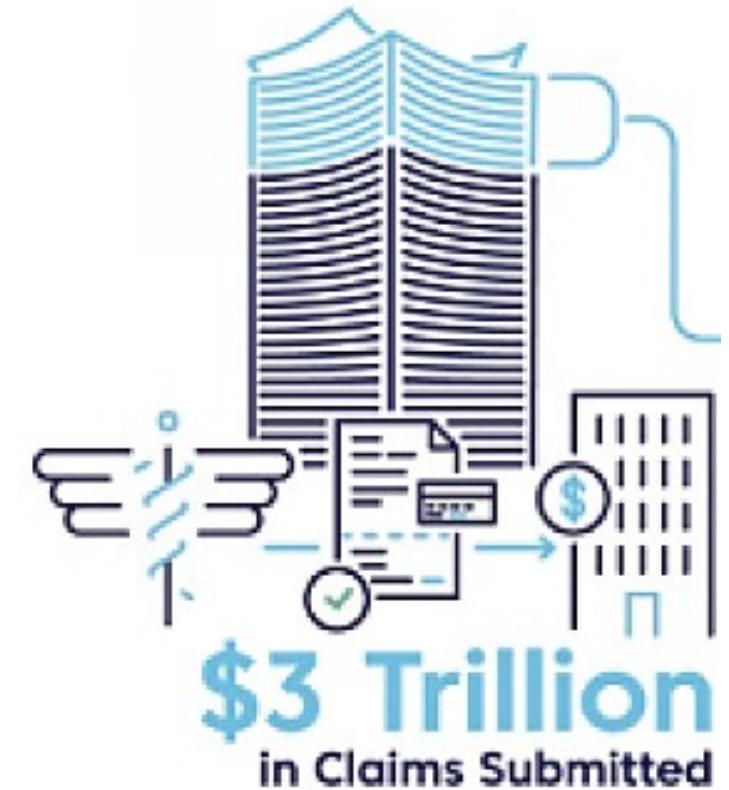
- Predicting high-risk patients chances of developing disease
- Identify factors necessary for classification of patients into risk categories
- **Category 5 high risk □ Category 1 Low risk**, on a scale of 1 to 5
- Allows the insurer to serve the patients much better



# Description of claims dataset

## Past Claims data

Contains 16 variables and  
above 45 thousand observations



Any queries ? Now or any time in future, please write to

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If it's a technical issue **please attach a screenshot** of the problem description  
and inform the exact details



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