# TD: Introduction to Machine-Learning Briefing & Correction

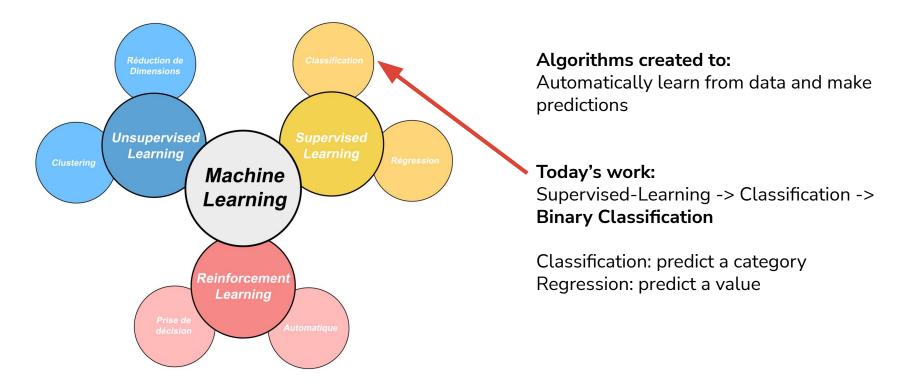
Corentin Meyer 2nd Year PhD Student - CSTB iCube corentin.meyer@etu.unistra.fr Presentation on 04/10/2021

@ ESBS 3A Biotech

**UE: Traitement et Flux de données** 

Briefing Data Prep. ML Model Stall

## What's ML and today's goal



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# **Your Coding Environnement**

# **Easy Way**



**Google Collaboratory** 

## **Conventional Hard Way**









# The Data you will use

## **Stroke Prediction Dataset**

-> **Predict** whether a patient is likely to get **stroke** 

**Using 11 parameters:** age, BMI, Glucose level, lifestyle, smoke status...

## **TD Workflow**

#### Data Prep

- Import & Explore the Data
- Transform data to numeric
- Train / Test set split

#### ML Model

- Choose and create your first model
- Basic evaluation
- Issues Correction

#### Model Eval

- Learn all metrics commonly used
- Compare & select models

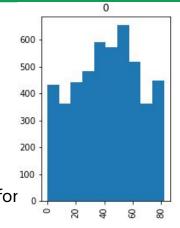
End or Bonus!

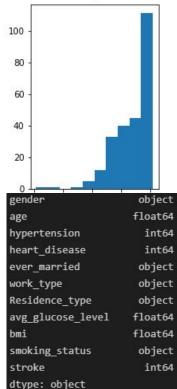
# **Explore the data**

## **Questions:**

- 1. How many entries (patients) are in the dataset? 5110 rows in the dataset
- 2. How many columns (features)?
- 3. Plot the histogram of the age feature. Do separate histogram for stroke vs non-stroke patients
- 4. What is the percentage of the patients that had a stroke? 95%/5%
- 5. Show the type of data in each columns. What type of processing will we have to do for each type?

Float -> Scaling ; Objects (text) -> One-Hot Encoding Int (0/1) -> Nothing to do





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#### Format the data to numeric

## **Questions**

1. What columns are categorical data, what columns are numeric.

Numeric: age, avg\_glucose\_level, bmi Categorical: gender, ever married, work type, Residence type, smoking status

- 2. What columns are already ready to be used and needs no change. Ready: hypertension, heart\_disease, stroke
- 3. What type of processing do you need to do on categorical data and why Text to numeric -> Vectors -> One-Hot Encoding
- 4. What type of processing do you need to do on numeric data and why Numeric between any values -> Numeric between 0 and 1 or -1/+1 or Z-score!
- 5. What columns contains missing data? What type of processing do you need to do in this case. BMI contains missing data, we need either to removes rows or impute them (predict)

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# Train / Test data spliting

#### **Questions**

1. What train/test ratio should you use.

Something between 20% and 40% is fine

2. How many entries are in your train dataset and in your test dataset.

For 40% I get 3066 entries in training, 2044 in testing set

- 3. Verify that you have the same stroke / no-stroke ratio between train and test dataset.
- 4.8% of stroke in training set
- 5.5% of stroke in testing set, so it's fine!

## **Model Choice & Evaluation**

## **Questions:**

1. Which model did you choose and why? Have you set any particular (hyper)parameters?

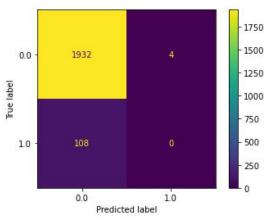
I choose a RandomForest, because it is widely used in biology and works well. I used class\_weight="balanced" to try to go against the imbalanced dataset.

2. What accuracy-score do you get and what conclusion can you take?

94% Accuracy! Looks great!

3. What do you observe on the confusion matrix and what conclusion can you take ?

Actually, almost all testing data has been classified as "no-stroke", not so good...



## **Model Choice & Evaluation**

## **Questions:**

1. What accuracy-score do you get with the new model and what conclusion can you take.

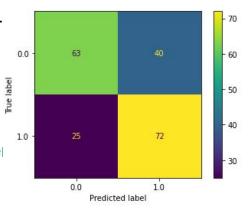
67.5% Accuracy, looks worse than before!

2. What do you observe on the confusion matrix and what conclusion can you take.

At least now we actually predicted 72 patients strokes!

3. What's the shape of the prediction probability output? Is there a high variance between the different test entries in probability?

Shape: n entries x 2 columns. Some data points are almost 50% / 50% proba, other are 95% / 5%. We need to set a threshold of confidence for each prediction!



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# All commonly used metrics

#### **Questions:**

- 1. Which model have the best accuracy?

  Basic one for the basic accuracy, downsampled one for the balanced accuracy!
- 2. What's ROC-Curve ? Which model have the best area under the curve (AUC) for the ROC-curve ?

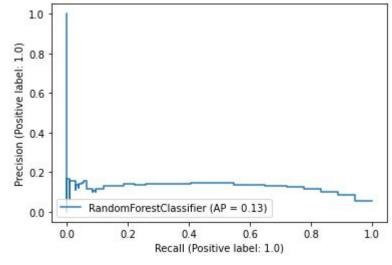
ROC is the TPR (true positive rate) vs FDR (false discovery rate) for all prediction probathreshold. Basic model has a better AUC for the roc-curve (only by a very little margin)

- 3. What's F1-Score ? Which model have the best F1-Score and sensitivity ? F1-Score is the harmonic mean between precision and recall! Down-sampled models has a way, way, better F1-Score
- 4. Eventually, which model is better according to you based on the metrics? Downsampled in the end, looks better due to huge gap in F1-Score

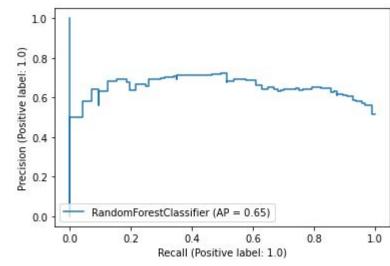
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# **Models Comparison**

	Balanced-Accuracy	Accuracy	F1-Score	Sensitivity (Recall)	Specificity	Precision	TP	TN	FP	FN
CLF	0.498967	0.945205	0.000000	0.000000	0.997934	0.000000	0	1932	4	108
CLF DownSampled	0.676959	0.675000	0.688995	0.742268	0.611650	0.642857	72	63	40	25



Initial Model Precision Recall Curve



Downsampled Model Precision Recall Curve

#### **Bonus Answers!**

#### **Questions:**

1. What is the point of cross-validation? Did it increase performance? If not, what is it useful for?

It does not increase performance. It just calculate X models on X differents test/train splits! Actually it is used to give a **confidence interval** on accuracy and other performances as you have now X accuracy values for your model on you dataset! Makes your models results more robusts!

#### **Questions:**

1. What are the best parameters detected ? Are your best parameters different from the one of other students ? Why ?

Yes they are different because it is a stochastic exploration with a limited number of trials!

2. Did the metrics improved ? Was the optimisation useful ? We wanted to maximize F1-Score and it improved a little bit! (As well as other metrics)

```
Best trial:

Score: 0.8306905059398083

Params:

n_estimators: 187

criterion: entropy

max_depth: 12

min_samples_split: 29

min_samples_leaf: 6

max_features: None

bootstrap: True

oob_score: False

n_jobs: -1

class_weight: None
```