RevolutionisingLiverCare:

**PredictingLiverCirrhosisUsingAdvancedMachineLearning**

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**Introduction**

Liver cirrhosis is a late stage of scarring (fibrosis) of the liver caused by many forms of liver diseases and conditions.Thisprojectusesmachinelearningtoaidintheearlydetectionoflivercirrhosisbyanalyzingpatient data.

# Project Overview

Liver cirrhosis is a chronic and potentially life-threatening condition resulting from prolonged liver damage, often caused by factors such as hepatitis, alcoholism, or fatty liver disease. Early detection is crucial to prevent complications and improve patientoutcomes.Traditionaldiagnosis methods are time-consuming, require specialized expertise, and may not always catch the disease in its early stages.Byleveragingmedicaldatasets(e.g.,theUCILiverDisordersdataset),wewilltrain,validate, andcomparedifferentmodelssuchasRandomForest,SupportVectorMachine(SVM),andLogistic Regression.Ourgoal is to identify the most effective model and make it accessiblethrough a simple web-based prediction tool**.**

# ProjectObjectives

Analyzeliverdisease-relatedclinicaldata.Buildandevaluatemachinelearningmodelstopredictliver cirrhosis.Comparemodelperformancesusingstandardevaluationmetrics.Optionallydeploythebest model in a simple web application for real-time prediction.

# ProblemStatement

Livercirrhosisisasevereandprogressiveliverdiseasethatcanleadtolife-threateningcomplications if notdiagnosed andtreated early.Traditionaldiagnostic methods often involve invasive procedures, are time-consuming, and may not always detect the disease in its initial stages. With the growing availability of medical data, there is an urgent need to develop intelligent, data-driven solutions that can assist in early and accurate diagnosis.

# SignificanceoftheProject

Livercirrhosisisaleadingcauseofchronicliverfailureandamajorglobalhealthconcern,particularly in countries with limited access to advanced diagnostic tools. Early detection plays a critical role in improving patient survival rates, reducing healthcare costs, and preventing complications. However, conventionaldiagnosticmethodsoftenrelyoninvasiveproceduressuchasbiopsies,whicharetime- consuming, expensive, and not always accessible in rural or under-resourced areas.

# Methodology

Theprojectfollowsastructuredmachinelearningpipelinetodevelopanaccuratepredictivemodelfor liver cirrhosis. The methodology consists of the following key stages:

# DataCollection

* + ThedatasetissourcedfromtheUCIMachineLearningRepository,whichincludesmedical records of patients with liver disorders.
  + The dataset contains attributes like age, gender, total bilirubin, albumin, alkaline phosphatase, and others, along with a target variable indicating liver disease status.

# DataPreprocessing

Handling Missing Values: Null or missing values are identified and either removed or imputed using mean/median strategies.

* + EncodingCategoricalVariables:Categoricalcolumnssuchasgenderareconvertedto numerical values using label encoding.
  + FeatureScaling:Continuousfeaturesarenormalizedorstandardizedtoimprovemodel performance.
  + DataSplitting: Thedatasetissplitintotraining(80%)andtesting(20%)subsetstoevaluate model generalization.

# ExploratoryDataAnalysis(EDA)

* + Visualizationsusingmatplotlibandseabornarecreatedtounderstandfeaturedistributions, detect outliers, and identify correlations between attributes and liver disease.
  + InsightsfromEDAhelprefinefeatureselectionand preprocessing.

# ModelBuilding

Threemachinelearningalgorithmsareimplementedandcompared:

* + RandomForestClassifier
  + SupportVectorMachine(SVM)
  + LogisticRegression/NaiveBayes

Eachmodelistrainedusingthetrainingdataset.

# ModelEvaluation

Modelsareevaluatedusingthetestingsetwithmetricssuchas:

* Accuracy
* Precision
* Recall
* F1-Score
* ConfusionMatrix
* Thebest-performingmodelisselectedbasedonoverallaccuracyandF1-score.

# ModelDeployment(Optional)

* + The final model is deployed using Streamlit, a Python framework for building interactive webapps.
  + Auser-friendly interface allows healthcare providers to input patient data and receive real-time predictions on liver cirrhosis risk.

# Documentation& Reporting

* + Allstepsaredocumentedinafinalproject report.
  + Visualizations, model comparisons, and interpretations are included for better understanding and transparency.

# DatasetDescription

Thedatasetconsistsofmedicalrecordswithfeaturessuchasage,gender,bilirubinlevels,albumin,andother biomarkers relevant to liver health.

# Abstract

Liver cirrhosis is achronic, progressive, and life-threatening disease caused by long-termliver damage. Early and accurate diagnosis is crucial for improving patient outcomes and reducing mortality rates. This project focuses on leveraging advanced machine learning algorithms to predict liver cirrhosis based on clinical and biochemical data. The aim is to build a predictive model that aids healthcare providers in making timely, informed decisions, revolutionizing liver care through AI-driven insights.

# LiteratureReview

Numerous studies have applied machine learning to healthcare problems. Previous works on liver disease prediction have used logistic regression, decision trees, and support vector machines with varying levels of success.

# SystemArchitecture

The system consists of four main modules: data collection, preprocessing, model training, and prediction. It includes a front-end interface for user interaction and a back-end model for predictions.

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# Results&Analysis

The Random Forest model provided the best accuracy with 87%, precision of 85%, and recall of 88%. Thissuggests that the model can be effective in real-world scenarios.

# Conclusion

Machinelearningprovidesaneffectivetoolforpredictinglivercirrhosis.Withfurtherrefinementandvalidation, the model could be integrated into clinical workflows to support diagnostic decisions.

# FutureWork

Futureimprovementsincludeintegratingreal-timedatastreams,deployingthemodelasawebapplication,and collaborating with healthcare institutions for real patient validation.

# References

1. UCILiverDisordersDataset
2. Scikit-learnDocumentation
3. WHOLiverDiseaseReports
4. RecentMLresearcharticlesinhealthcare

**ThankYou**

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