

Meta-Prediction and Machine Learning for Glaucoma Disease Risk

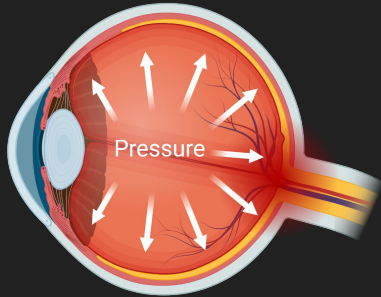
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Introduction

What is glaucoma?

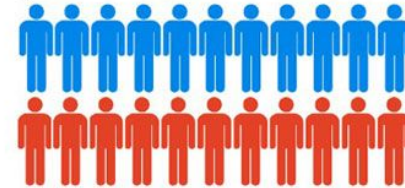
- Damage to the optic nerve
- Leading cause of irreversible blindness
- Early stages are asymptomatic
- Difficult to diagnose



2.2 MILLION

Americans have glaucoma

 = 100,000



50% **don't know** they have it.

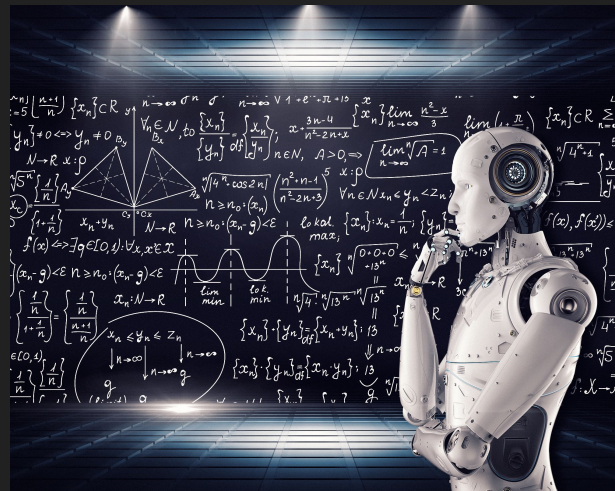
Glaucoma accounts for

9% - 12%

of all cases of blindness in the U.S.

How can data science help?

- Large amounts of phenotypic/genotypic data
 - Use machine learning to recognize patterns
- Predict five-year incident glaucoma risk
- Personalized intervention



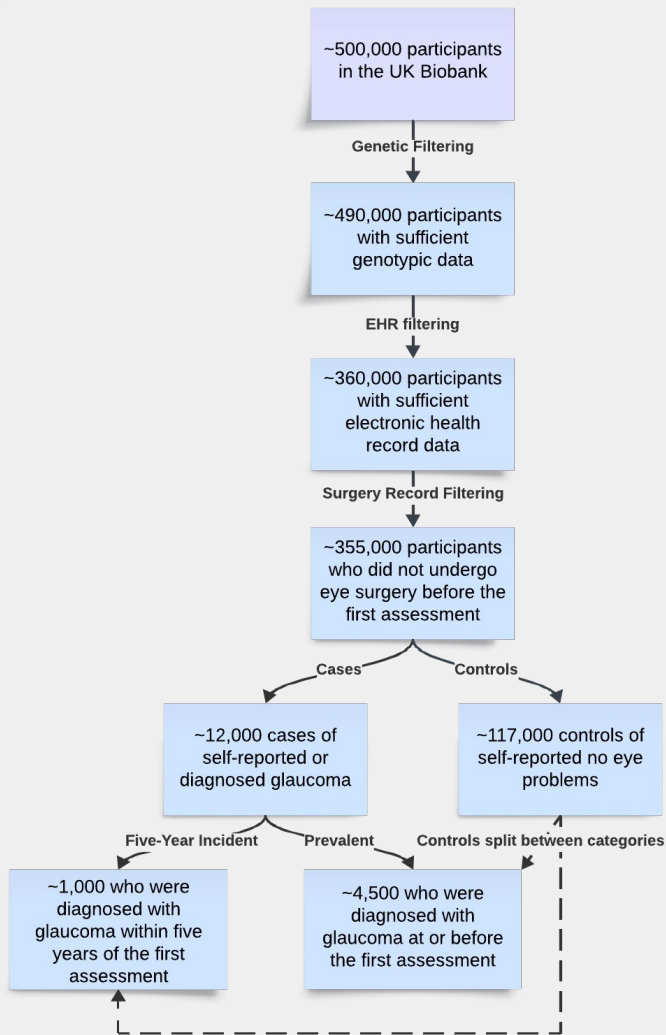
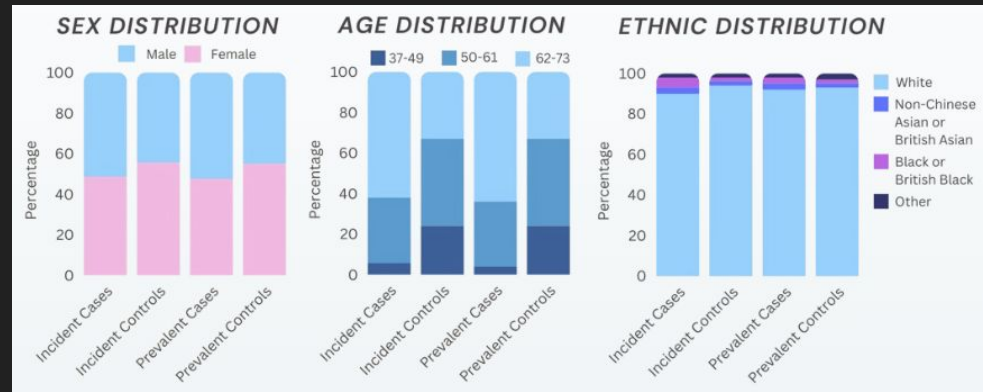
Methods

Creating our Cohorts



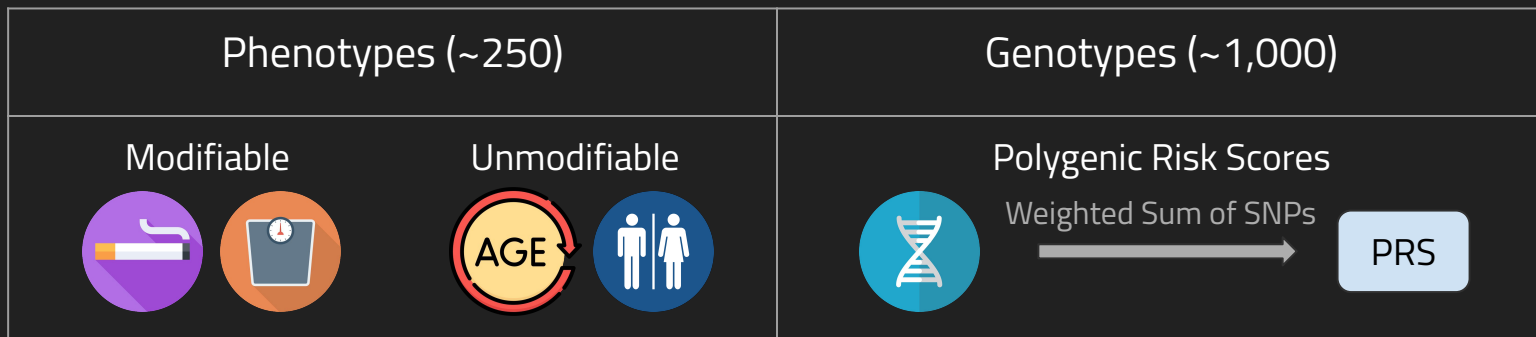
Phenotypic/genotypic data from British participants

Demographic Distributions Across our Dataset Splits



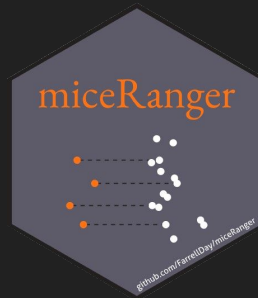
Data Preprocessing

Initial Feature Pool



Imputation

- Data missingness
 - Over 80% in eye-specific variables!



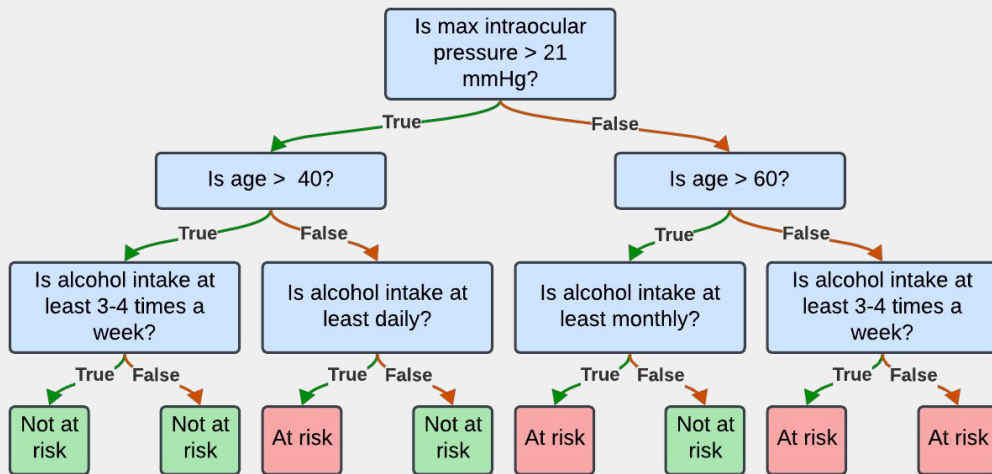
Modeling with Machine Learning

- XGBoost for binary classification
- Ensemble of decision trees

Article

Meta-Prediction of Coronary Artery Disease Risk

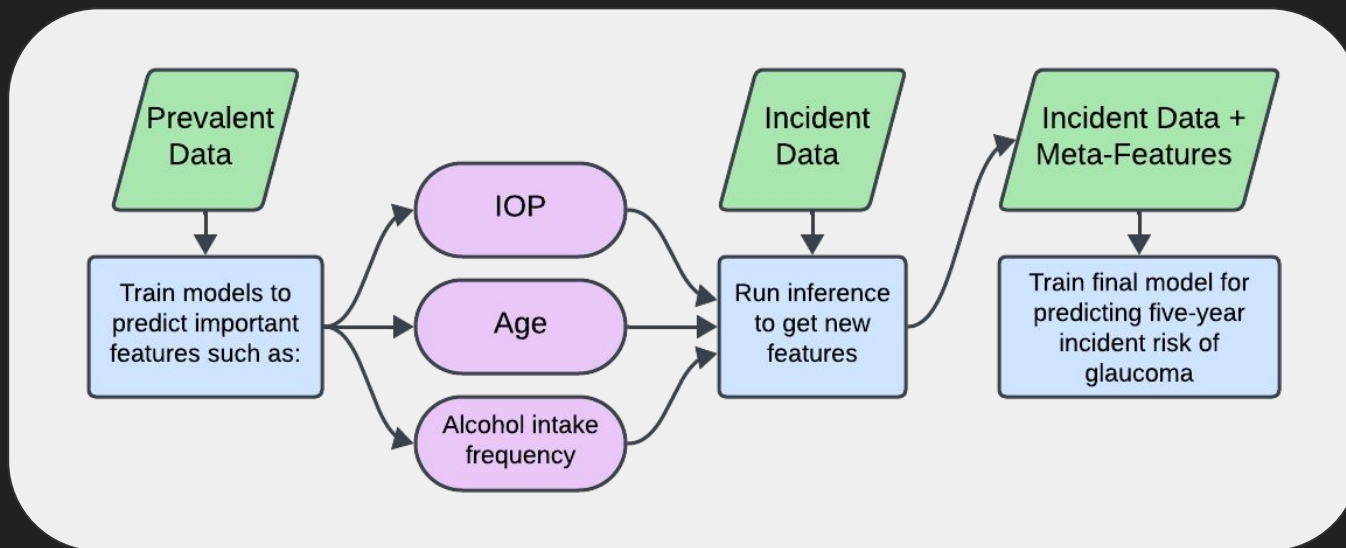
Ali Torkamani, Shang-Fu Chen, Sang Eun Lee, Hossein Sadaei, Jun-Bean Park, and 4 more



XGBoost

Incorporating Meta-Prediction

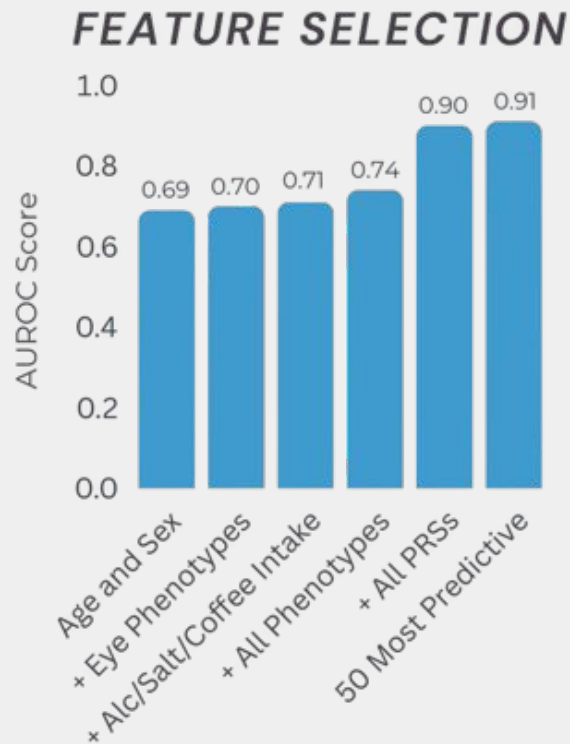
- We are already using incident data
- Can we use our prevalent data?



Results

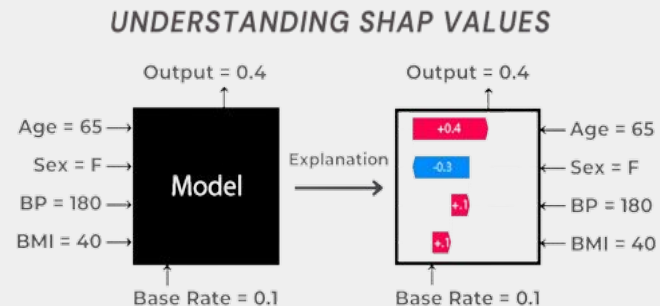
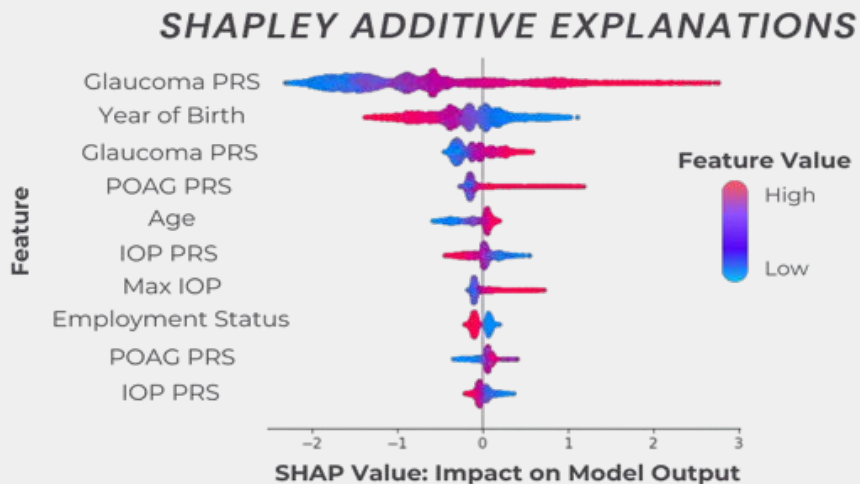
Feature Selection

- Accuracy vs simplicity

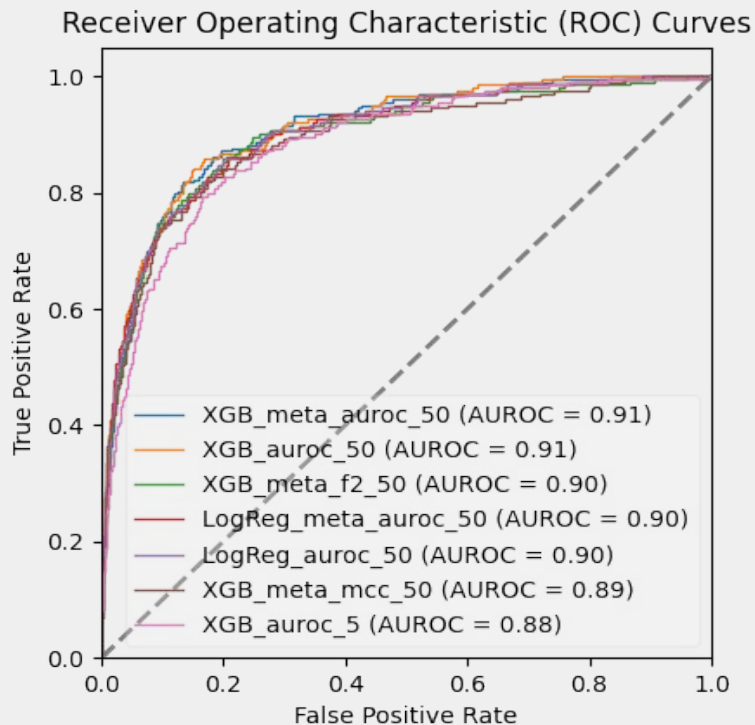


SHAP Values

- Model explainability is key for intervention



Model Evaluation



CONFUSION MATRICES

| | | Predicted | |
|--------|--------------|-----------|----|
| | | 0 | 1 |
| Actual | Maxing AUROC | 0 | 1 |
| | 0 | 4691 | 48 |
| | 1 | 143 | 60 |

| | | Predicted | |
|--------|-----------------|-----------|-----|
| | | 0 | 1 |
| Actual | Maxing F2 Score | 0 | 1 |
| | 0 | 4439 | 300 |
| | 1 | 72 | 131 |

| | | Predicted | |
|--------|------------|-----------|----|
| | | 0 | 1 |
| Actual | Maxing MCC | 0 | 1 |
| | 0 | 4694 | 45 |
| | 1 | 131 | 72 |

$$F_2 = \frac{5}{\frac{4}{Precision} + \frac{1}{Recall}}$$

$$MCC = \frac{TP \times TN - FP \times FN}{\sqrt{(TP + FP)(TP + FN)(TN + FP)(TN + FN)}}$$

Conclusion

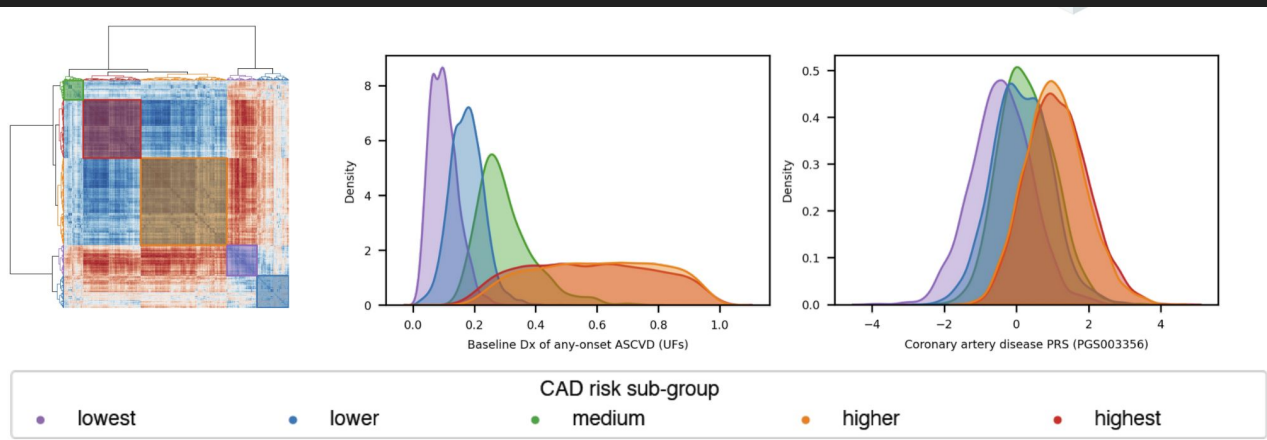
Was our model a success?

- Our models produce very good AUROC scores, however...
- Minority class classification can be improved
- Narrowly out-perform the baseline models



What's next?

- Can we acquire more data?
- Is our model generalizable?
 - External validation on UCSD African American glaucoma cohort
- Risk stratification



Intervention
→



Acknowledgments

- SRTI intern program heads: Theresa Hill, Dr. Laura Nicholson, Dr. Jaiswal
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- Torkamani Lab: Dr. Ali Torkamani, Dr. Shaun Chen, Ahmed, Kaushik, Austin, Shreya

References

- [1] Torkamani, A., Chen, S.-F., et al. Meta- Prediction of Coronary Artery Disease Risk, 20 Dec. 2023, PREPRINT (Version 1) available at Research Square.
- [2] Craig, J.E., et al. Multitrait analysis of glaucoma identifies new risk loci and enables polygenic prediction of disease susceptibility and progression. Nat Genet 52, 160–166 (2020).

Thank you

Questions?