DEVELOPING CLASSIFICATION MODELS TO PREDICT DIABETES

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AGENDA



Q INTRODUCTION



METHODOLOGY



RESULTS



DISCUSSION

Q INTRODUCTION

Diabetes and Prediabetes

- Metabolic condition that affects millions of people globally
- 8th leading cause of death in United States
- Types of Diabetes
 - Type I
 - Type 2
 - gestational diabetes
- Prediabetes
 - Higher than normal blood glucose levels
 - Early identification can allow individual to implement prevention strategies

Models to Facilitate Diabetes Prevention

- Identify individuals who are at risk or already affected by diabetes
- Use classification models to predict the likelihood of individuals have diabetes or prediabetes
 - Decision tree
 - Logistic regression
 - K-nearest neighbor
 - Naïve Bayes classifier
 - Linear discriminant analysis



METHODOLOGY

Cleaning the Dataset

- Dataset sourced from Kaggle
 - Health indicators
 - Demographics
 - Lifestyle attributes
- Cleaned each column to contain only numeric values
 - Scaled by ranges
 - Boolean features
- Target Classification Prepressing
 - 0 = no diabetes
 - I = prediabetes
 - 2 = diabetes

Model Variation Selection

- Decision Tree
 - Entropy/Gini Criterion
 - Maximum depth
- Logistic Regression
 - SAG/SAGA solver
 - L2 penalty or None
- K-Nearest Neighbor
 - K values
 - Uniform/Distance weight
- Naïve Bayes Classifier
 - Gaussian/Bernoulli
- Linear Discriminant Analysis

Evaluation and Comparison

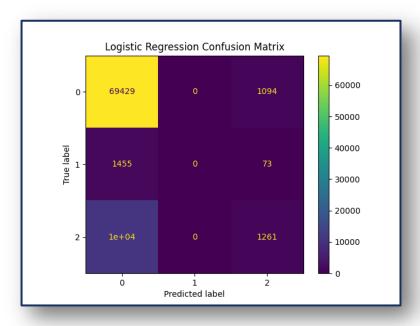
- Accuracy
 - Overall correctness
- Precision
 - Correctness when predicting a specific classification
- Confusion Matrices
 - Visualize FP, TP, FN, FP
- ROC Curves
 - Rank models on performance
- Cross Validation
 - General accuracy and precision

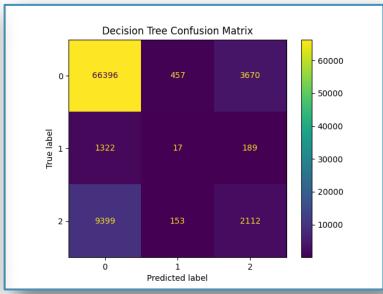
RESULTS

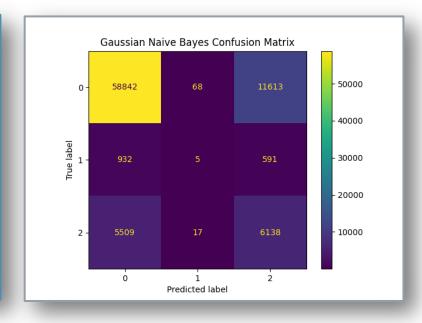
- Decision Tree
 - Gini Impurity Index
 - No maximum constraint
- Logistic Regression
 - Stochastic Average Gradient Descent (SAGA)
 - No penalty
- KNN
 - K = 25
 - Weighted distance using Euclidean
- Naïve Bayes
 - Gaussian
 - Bernoulli
- Linear Discriminant Analysis
 - Singular Value Decomposition (SVD)

Model	Accuracy	Precision 0	Precision 1	Precision 2
Decision Tree	0.785	0.833	0.014	0.361
Logistic Reg.	0.815	0.826	0.	0.521
KNN	0.814	0.826	0.	0.502
Gaussian NB	0.739	0.875	0.018	0.341
Bernoulli NB	0.797	0.833	0.	0.392
LDA	0.814	0.830	0.	0.497
TABLE I				
MODEL ACCURACY AND PRECISION				

- Greatest Accuracy: Logistic Regression
- Greatest Precision: Gaussian Naïve Bayes







Accuracy	.815		
Precision	.826	.0	.521

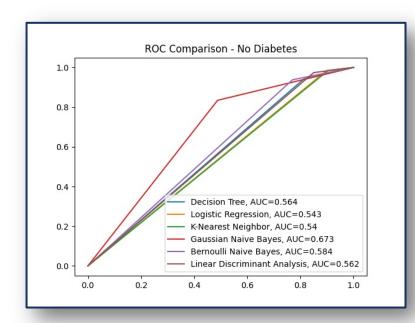
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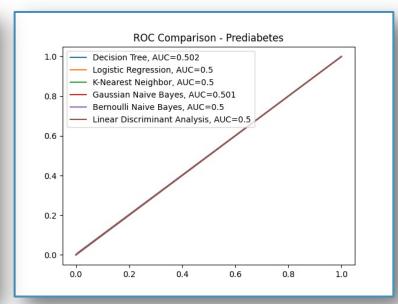
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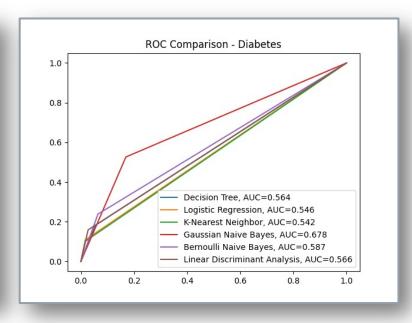


Confusion Matrices

Receiver Operating Characteristics Curves









Rank	No Diabetes	Prediabetes	Diabetes	
1	Gaussian NB	Decision Tree	Gaussian NB	
2	Bernoulli NB	Gaussian NB	Bernoulli NB	
3	Decision Tree	-	Decision Tree	
4	LDA	-	LDA	
5	Logistic Reg.	-	KNN	
6	KNN	-	Logistic Reg.	
TABLE II				
MODEL RANKINGS BASED ON AUC				



- Gaussian naïve Bayes classifier proved to be the best classification model for predicting diabetes
- Accuracy versus Precision
 - When dealing with datasets with high imbalance, precision is a better performance indicator
 - High precision indicates fewer false positive predictions
 - High cost for misdiagnosis
- Addressing the dataset's imbalance to achieve better performing classification models
 - Resampling the data
 - Boosting or tree-based models
 - Collect more data

Model	Mean Accuracy	Standard Dev.		
Decision Tree	0.820	0.003		
Logistic Reg.	0.843	0.005		
KNN	0.843	0.001		
Gaussian NB	0.775	0.009		
Bernoulli NB	0.824	0.002		
LDA	0.841	0.005		
TABLE III				

10-FOLD CROSS VALIDATION ACCURACY

Model	Mean Precision	Standard Dev.		
Decision Tree	0.010	0.005		
Logistic Reg.	0.000	0.000		
KNN	0.000	0.000		
Gaussian NB	0.298	0.399		
Bernoulli NB	0.000	0.000		
LDA	0.000	0.000		
TABLE IV				

10-FOLD CROSS VALIDATION PRECISION OF PREDICTING PREDIABETES

CITATIONS

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