Early prediction for chronic kidney disease detection: a progressive approach to health management

INTRODUCTION

1.10VERVIEW

- Chronic Kidney Disease (CKD) is a major medical problem and can be cured if treated in the early stages. Usually, people are not aware that medical tests we take for different purposes could contain valuable information concerning kidney diseases.
- Consequently, attributes of various medical tests are investigated to distinguish which attributes may contain helpful information about the disease. The information says that it helps us to measure the severity of the problem, the predicted survival of the patient after the illness, the pattern of the disease and work for curing the disease.
- In todays world as we know most of the people are facing so many disease and as this can be cured if we treat people in early stages this project can use a pretrained model to predict the Chronic Kidney Disease which can help in treatments of peoples who are suffer from this disease.
- National kidney foundation classifies stages of CKD into five based on the abnormal kidney function and reduced Glomerular Filtration Rate (GFR), which measures a level of kidney function,. Te mildest stage (stage 1 and stage 2) is known with only a few symptoms and stage 5 is considered as end-stage or kidney failure. Te Renal Replacement Therapy (RRT) cost for total kidney failure is very expensive. Te

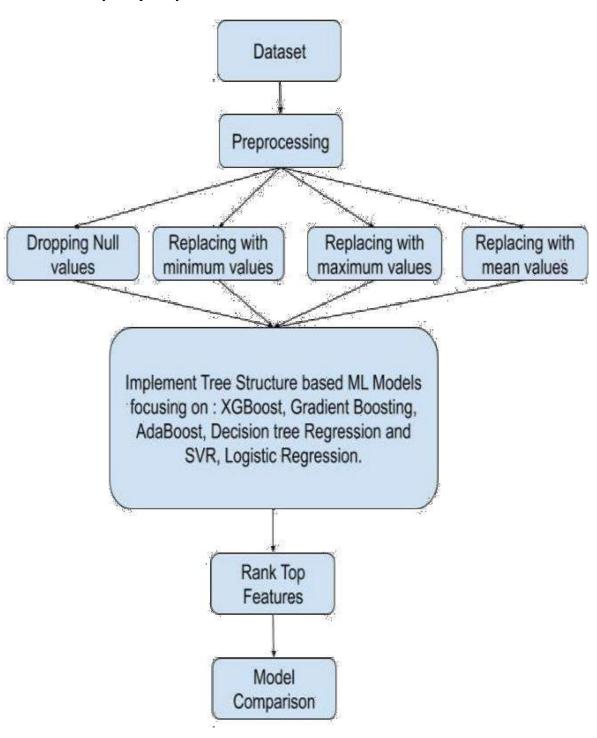
treatment is not also available in most developing countries like Ethiopia. As a result, the management of kidney failure and its complications is very diffcult in developing countries due to shortage of facilities, physicians, and the high cost to get the treatment

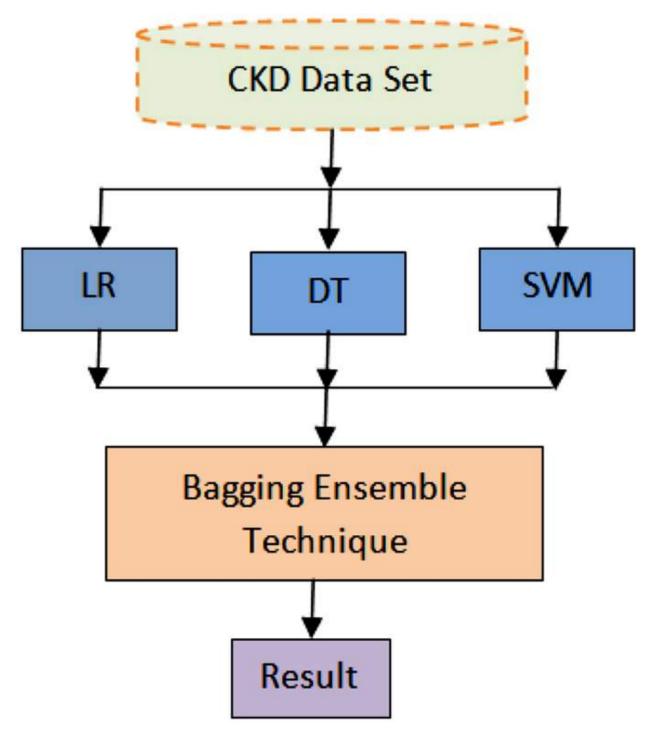
1.2PURPOSE

- Early prediction is very crucial for both experts and patients to prevent and slow down the progress of chronic kidney disease to kidney failure. In this study three machinelearning models RF, SV, DT, and two feature selection methods RFECV and UFS were used to build proposed models.
- The evaluation of models were done using tenfold crossvalidation. First, the
 four machine learning algorithms were applied to original datasets with all
 19 features. Applying the models on the original dataset, we have got the
 highest accuracy with RF, SVM, and XGBoost.
- The accuracy was 99.8% for the binary class and 82.56% for five-class. DT produced lowest performance compared to RF. RF also produced the highest f1_score values. SVM and RF with RFECV produced the highest accuracy of 99.8% for binary class.
- XGBoost has 82.56% accuracy for fve-class datasets which is the highest.
 Hencewe believe that multi classification work was very important
 Debal and Sitote Journal of Big Data (2022) 9:109 Page 18 of 19 to know the
 stages of the disease and suggest needed treatments for the patients in
 order to save their lives.

2.problem definition & design thinking

2.1 empathy map





2.2 ideation & brainstorming map

3. Result



INPUT - NOW, THE USER WILL GIVE INPUTS TO GET THE PREDICTED RESULT AFTER CLICKIN GONTO THE SUBMIT BUTTN ON.



Prediction: Oops! You have Chronic Kidney Disease.



Chronic Kidney Disease A Machine Learning Web Apd, Built with Plask

1 1 NO V NO V NO V NO V NO V Predict

Chronic Kidney Disease A Machine Learning Web Apt. Bull with Flack

Prediction: Great! You DON'T have Chronic Kidney Disease



4. Trailhead profile public URL

Team leader -http://trailblazer.me/id/nit53

Team member 1 -http://trailblazer.me/id/naresh1907

Team member 2 -http://trailblazer.me/id/naresh1737

Team member 3 -http://trailblazer.me/id/keerb30

5. advantages & disadvantages

Advantages:

- National kidney foundation classifes stages of CKD into fve based on the abnormal kidney function and reduced Glomerular Filtration Rate (GFR), which measures a level of kidney function,.
- The mildest stage (stage 1 and stage 2) is known with only a few symptoms and stage 5 is considered as end-stage or kidney failure.
- Te Renal Replacement Terapy (RRT) cost for total kidney failure is very expensive. Te treatment is not also available in most developing countries like Ethiopia.
- As a result, the management of kidney failure and its complications is very difcult in developing countries due to shortage of facilities, physicians, and the high cost to get the treatment

Feature selection

Identify subset of relevant predictive features is important for quality result . Feature selection is the process of selecting most important predictive features to use them as input for models. It is important preprocessing step to deal with the problem of high dimensionality. Hence, the main aim of feature selection is to select the subset of features that are relevant and independent of each other for training the model . Similarly, feature selection is crucial to develop chronic kidney disease predictive model. This reduces the dimensionality and complexity of the data and makes the model be faster, more effective and accurate. Hence, feature selection algorithm have been used to select relevant features after the construction of the dataset

Disadvantages:

- Some of the common health problems caused by kidney disease include gout, anemia, secondary hyperparathyroidism(SHPT), bone disease, heart disease and fluid buildup.
- There are treatments to help manage health problems caused by kidney disease.

6.APPLICATIONS

Purpose of review:

The universal adoption of electronic health records, improvement in technology and the availability of continuous monitoring has generated large

quantities of health care data. Machine learning is increasingly adopted by nephrology researchers to analyze this data in order to improve the care of their patients.

Recent findings:

Researchers have demonstrated the ability of machine learning to read kidney biopsy samples, identify patient outcomes from unstructured data, identify subtypes in complex diseases, and discuss the potential benefits on drug discovery.

7. CONCLUSION

In this paper we have studied different machine learning algorithms. We have analysed 14 different attributes related to CKD patients and predicted accuracy for different machine learning algorithms like Decision tree and Support Vector Machine.

- From the results analysis, it is observed that the decision tree algorithms gives the accuracy of 91.75% and SVM gives accuracy of 96.75%. When considering the decision tree algorithm it builds the tree based on the entire dataset by using all the features of the dataset.
- The advantage of this system is that, the prediction process is less time consuming. It will help the doctors to start the treatments early for the CKD patients and also it will help to diagnose more patients within a less time period.
- ➤ Limitations of this study are the strength of the data is not higher because of the size of the data set and the missing attribute values. To build a machine learning model targeting chronic kidney disease with overall accuracy of 99.99%, will need millions of records with zero missing values.
- Early prediction is very crucial for both experts and patients to prevent and slow down the progress of chronic kidney disease to kidney failure. In this study three machinelearning models RF, SV, DT, and two feature selection methods RFECV and UFS were used to build proposed models.
- ➤ The evaluation of models were done using tenfold crossvalidation. First, the four machine learning algorithms were applied to original datasets with all 19 features. Applying the models on the original dataset, we have got the highest accuracy with RF, SVM, and XG Boost.
- ➤ The accuracy was 99.8% for the binary class and 82.56% for five-class. DT produced lowest performance compared to RF. RF also produced the highest f1_score values. SVM and RF with RFECV produced the highest accuracy of 99.8% for binary class. XG Boost has 82.56% accuracy for five-class datasets which is the highest. Hence we believe that multi classification work was very important know the stages of the disease and suggest needed treatments for the patients in order to save their lives

8.FUTURE SCOPE

This study used a supervised machine-learning algorithm, feature selection methods to select the best subset features to develop the models. It is better to see the difference in performance results using unsupervised or deep learning algorithms models. Te proposed model supports the experts to give the fast decision, it is better to make it a mobile-based system that enables the experts to follow the status of the patients and help the patients to use the system to know their status

Acknowledgements

Not applicable

Author contributions

The development of the basic research questions, identifying the problems and selecting appropriate machine learning algorithms, data collection, data analysis, interpretation, and critical review of the paper have been done by DA. The edition of the overall progress of the work was supported and guided by TM. Both authors read and approved the final manuscript.

Availability of data and materials

The data to conduct this research was collected from the patient history data attends their treatment or died during a period 2018 to 2019 from St. Paulo's Hospital. There are no restrictions on the availability of data and the authors are willing to provide the code as well.

Funding

Not applicable

SOURCE CODE:

Importing Libaries import pandas as pd #used for data manipulation import numpy as np #used for numerical analysis from collections import Counter as c # return counts of number of classess import matplotlib.pyplot as plt #used for data Visualization import seaborn as sns #data visualization Library import missingno as msno #finding missing values from sklearn.metrics import accuracy_score, confusion_matrix#model performance from sklearn.model_selection import train_test_split #splits data in random train and test array from sklearn.preprocessing import LabelEncoder #encoding the levels of categorical features from sklearn.linear_model import LogisticRegression #Classification ML algorithm import pickle #Python object hierarchy is converted into a byte stream,

```
data['blood glucose random'].fillna(data['blood glucose random'].mean(),inplace=True)

data['blood_pressure'].fillna(data['blood_pressure'].mean(),inplace=True)

data['blood_urea'].fillna(data['blood_urea'].mean(),inplace=True)

data['hemoglobin'].fillna(data['hemoglobin'].mean(),inplace=True)

data['packed_cell_volume'].fillna(data['packed_cell_volume'].mean(),inplace=True)

data['potassium'].fillna(data['potassium'].mean(),inplace=True)

data['red_blood_cell_count'].fillna(data['red_blood_cell_count'].mean(),inplace=True)

data['serum_creatinine'].fillna(data['serum_creatinine'].mean(),inplace=True)

data['sodium'].fillna(data['sodium'].mean(),inplace=True)

data['white_blood_cell_count'].fillna(data['white_blood_cell_count'].mean(),inplace=True)
```

```
data['age'].fillna(data['age'].mode()[0],inplace=True)

data['hypertension'].fillna(data['hypertension'].mode()[0],inplace=True)

data['pus_cell_clumps'].fillna(data['pus_cell_clumps'].mode()[0],inplace=True)

data['appetite'].fillna(data['appetite'].mode()[0],inplace=True)

data['albumin'].fillna(data['albumin'].mode()[0],inplace=True)

data['pus_cell'].fillna(data['pus_cell'].mode()[0],inplace=True)

data['red_blood_cells'].fillna(data['red_blood_cells'].mode()[0],inplace=True)

data['coronary_artery_disease'].fillna(data['coronary_artery_disease'].mode()[0],inplace=True)

data['bacteria'].fillna(data['bacteria'].mode()[0],inplace=True)

data['anemia'].fillna(data['anemia'].mode()[0],inplace=True)

data['diabetesmellitus'].fillna(data['diabetesmellitus'].mode()[0],inplace=True)

data['pedal_edema'].fillna(data['pedal_edema'].mode()[0],inplace=True)

data['specific_gravity'].fillna(data[ 'specific_gravity'].mode()[0],inplace=True)
```

Labeling Encoding of Categorical Column #'specific_gravity', 'albumin', 'sugar'(as these columns are numerical it is removed) catcols=['anemia', 'pedal_edema', 'appetite', 'bacteria', 'class', 'coronary_artery_disease', 'diabetesmellit 'hypertension', 'pus_cell', 'pus_cell_clumps', 'red_blood_cells'] #only considered the text class columns from sklearn.preprocessing import LabelEncoder #imorting the LabelEncoding from sklearn for i in catcols: #looping through all the categorical columns print("LABEL ENCODING OF:",i) LEi = LabelEncoder() # creating an object of LabelEncoder print(c(data[i])) #getting the classes values before transformation data[i] = LEi.fit_transform(data[i])# trannsforming our text classes to numerical values print(c(data[i])) #getting the classes values after transformation print("*"*100)

In the above code we are looping through all the selected text class categorical columns and performing label encoding.

```
LABEL ENCODING OF: anemia

Counter({'no': 348, 'yes': 68})

Counter({8: 348, 1: 68})

LABEL ENCODING OF: pedal_edema

Counter(('no': 324, 'yes': 76})

Counter((8: 324, 1: 76))
```

```
contcols=set(data.dtypes[data.dtypes!='0'].index.values)# only fetech the float and int type columns

#cantcols=pd.DataFrame(data,columns=contcols)
print(contcols)

('blood_urea', 'serum_creatinine', 'albumin', 'blood_pressure', 'blood_glucose random', 'sugar', 'sodium', 'hemoglobin', 'specific_gravit y', 'age', 'potassium')
```

Same as we did with categorical columns, we are majing use of **dtypes** for finding the continuous columns

```
for i in contcols:
    print("Continous Columns :",i)
    print(c(data[i]))
    print('*'*128+'\n')
```

If we observe the output of the above code we can observe that some columns have few values or you can say classes which can be considered as categorical columns. So, let's remove it and add the columns which we observed into their respective

So, let's remove it and add the columns which we observed into their respective variables.

```
contcols.remove('specific_gravity')
contcols.remove('albumin')
contcols.remove('sugar')
print(contcols)
```

With the help of add() function we can add an element.

```
contcols.add('red_blood_cell_count') # using add we can add the column
contcols.add('packed_cell_volume')
contcols.add('white_blood_cell_count')
print(contcols)

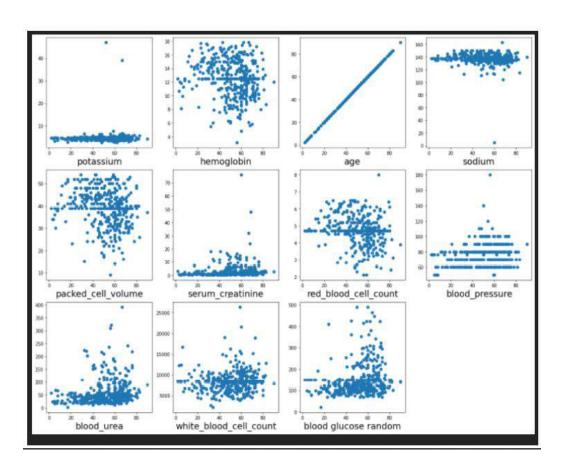
{'blood_urea', 'serum_creatinine', 'packed_cell_volume', 'blood_pressure', 'blood_glucose random', 'sodium', 'hemoglobin', 'red_blood_cell_count', 'age', 'potassium', 'white_blood_cell_count')
```

```
catcols.add('specific_gravity')
catcols.add('albumin')
catcols.add('sugar')
print(catcols)

{'hypertension', 'class', 'albumin', 'coronary_artery_disease', 'anemia', 'sugar', 'red_blood_cells', 'specific_gravity', 'bacteria', 'ped al_edema', 'appetite', 'pus_cell', 'diabetesmellitus', 'pus_cell_clumps'}
```

In our data some columns some unwanted classes so we have to rectify that also for

Age vs all continuous columns



Compare the model

```
from sklearn import model_selection
```

```
dfs = []
models = [
          ('LogReg', LogisticRegression()),
          ('RF', RandomForestClassifier()),
          ('DecisionTree',DecisionTreeClassifier()),
results = []
   names = []
    scoring = ['accuracy', 'precision_weighted', 'recall_weighted', 'f1_weighted', 'roc_auc']
    target names = ['NO CKD', 'CKD']
    for name, model in models:
        kfold = model_selection.KFold(n_splits=5, shuffle=True, random_state=90210)
        cv results = model selection.cross validate(model, x train, y train, cv=kfold, scoring=scoring)
       clf = model.fit(x_train, y_train)
       y_pred = clf.predict(x_test)
        print(name)
        print(classification_report(y_test, y_pred, target_names=target_names))
        results.append(cv results)
        names.append(name)
        this_df = pd.DataFrame(cv_results)
        this df['model'] = name
        dfs.append(this_df)
final = pd.concat(dfs, ignore_index=True)
return final
```



```
bootstraps = []
for model in list(set(final.model.values)):
    model_df = final.loc[final.model == model]
    bootstrap = model_df.sample(n=30, replace=True)
    bootstraps.append(bootstrap)

bootstrap_df = pd.concat(bootstraps, ignore_index=True)
    results_long = pd.melt(bootstrap_df,id_vars=['model'],var_name='metrics', value_name='values')
    time_metrics = ['fit_time', 'score_time'] # fit time metrics
    ## PERFORMANCE METRICS
    results_long_nofit = results_long.loc[~results_long['metrics'].isin(time_metrics)] # get df without fit data
    results_long_nofit = results_long_nofit.sort_values(by='values')
## TIME METRICS
    results_long_fit = results_long.loc[results_long['metrics'].isin(time_metrics)] # df with fit data
    results_long_fit = results_long_fit.sort_values(by='values')
```

Saving the best model after comparing its performance using different evaluation metrics means selecting the model with the highest performance and saving its weights and configuration. This can be useful in avoiding the need to retrain the model every time it is needed and to be able to use it in the future.

```
pickle.dump(lgr, open('CKD.pkl','wb'))
```

data.isnull().any() #it will return true if any columns is having null values True age blood_pressure True specific_gravity True albumin True sugar True red_blood_cells True True pus_cell_clumps True bacteria True blood glucose random True blood_urea True serum_creatinine True sodium True potassium True hemoglobin True packed cell volume True white_blood_cell_count red_blood_cell_count True hypertension True diabetesmellitus True coronary_artery_disease True appetite True pedal_edema True anemia True

class

dtype: bool

False

```
data.info() #info will give you a summary of dataset
MangeIndex: 400 entries, 0 to 300
Data columns (total 25 columns):
                            Non-Null Count Dtype
# Column
                                            floats4
                            391 non-null
    age
    blood_pressure
                            388 non-null
                                            floats4
    specific gravity
                            353 non-null
    albumin
                            351 non-null
    sugar
    red_blood_cells
    pus cell clumps
                            396 non-null
                                           object
    bacteria
                            396 non-null
                                           object
    blood glucose random
                            356 non-null
                                           float64
 10
    blood ures
                            381 non-null
                                           floats4
 11 serum_creatinine
                            383 non-null
                                           floats4
 12 sodium
                            313 non-null
                                            floats4
    hemoglobin
                            ase non-null
 17 red_blood_cell_count
                            270 non-null
                                           object
 18 hypertension
                            398 non-null
                                           object
 19 diabetesmellitus
                            398 non-null
                                           object.
28 coronary_artery_disease 398 non-null
                                           object
 21 appetite
                            399 non-null
                                           object
 22 pedal_edema
                            399 non-mull
memory usage: 78-2+ KB
```