Heart Disease Prediction

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Abstract:

Healthcare expenditures are overwhelming national and corporate budgets due to asymptomatic diseases including cardiovascular diseases. Therefore, there is an urgent need for early detection and treatment of such diseases. Machine learning is one of the trending technologies used in many spheres around the world, including the healthcare industry, for predicting diseases. The aim of this study is to identify the most significant predictors of heart disease and predict the overall risks by using linear regression and logistic regression and compare their accuracy. Thus, the binary logistic model which is one of the classification algorithms in machine learning is used in this study to identify the predictors. Further, data analysis is carried out in Python using Google Colab notebook in order to validate the linear and logistic regression.

Keywords-machine learning, linear regression, logistic regression, classification algorithms, heart disease

1. Introduction

The number of deaths due to cardiovascular diseases and increased by 41% between 1990 and 2013, climbing from 12.3 million deaths to 17.3 million deaths globally. In addition to that, half of the deaths in the United States and other developed countries are due to the same issue. Therefore, early detection of heart diseases is required to reduce health complications. Machine learning has been widely used in the modern healthcare sector for diagnosing and predicting the presence of diseases using data models. Linear and Logistic regression is one such relatively used machine learning algorithm

for studies involving risk assessment of complex diseases. Thus, the study intends to identify the most significant predictors of cardiovascular diseases and predict the overall risk by using linear and logistic regression and analyzing their accuracy.

2. Background of the study

The dataset used for the logistic regression analysis is available on the Kaggle website(https://www.kaggle.com), from ongoing cardiovascular study in Framingham, Massachusetts. The classification goal of this study is to predict whether the patient has a 10-year risk of future heart disease. The Framingham dataset consists of 4238 records of patient data and 15 attributes. The data analysis is carried out in Python programming by using Google Colab which is a more flexible and powerful data science application software.

3. Machine Learning (ML)

Machine learning is widely used in almost many fields in the world including the healthcare sector. Machine learning is an application of artificial intelligence (AI) that the provides systems with ability automatically learn and improve from experience without being explicitly programmed.Further, machine learning at its most basic is the practice of using algorithms to parse data, learn from it, and then make a determination or prediction about something in the world. There are two major categories of problems often solved by machine learning i.e. regression and classification. Mainly, the regression algorithms are used for numeric data and classification problems include binary and multi-category problems. Machine learning algorithms are further divided into two categories such as supervised learning and unsupervised learning. Basically, supervised learning is performed by using prior knowledge in output values whereas unsupervised learning does not have predefined labels hence the goal of this is to infer the natural structures within the dataset. Therefore, the selection of a machine learning algorithm needs to be carefully evaluated.

4. Methodology

4.1 Workflow of Machine Learning ModelBuilding

Figure 3 indicates the steps followed in order to build the linear and logistic regression model in machine learning.

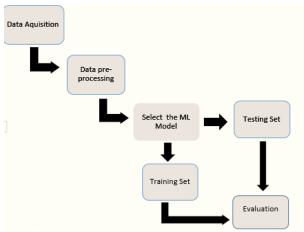


Figure 3: Workflow of Logistic Regression Model

4.1.1 Data Acquisition

The dataset is collected from the Kaggle website.

4.1.2 Data Pre-Processing

In order to build up a more accurate ML model, data preprocessing is required. Data preprocessing is the process of cleaning the data.

This includes the identification of missing data, noisy data and inconsistent data.

4.1.3 Select Machine Learning Model

The pre-processed data are identified using machine learning algorithms.

a) Input Variables of the study

The data set consists of 14 input variables and predicted values. ML model is based on the identification of the dependent variable. First, we have used a linear regression model. Probability is ranged between 0 and 1, where the probability of something certain to happen is 1, and 0 is something unlikely to happen. But in linear regression, we are to predict an absolute number, which can range outside 0 and 1. That's why we need to use binary logistic regression which is one of the classification algorithms due to the target variable being categorical.

Table 1: Input Variables				
Variable Category	Variable Name	Description	Data Type	
Demographic	male	Male or female	Nominal	
	age	Age of the patient	Continuous	
Behavior	currentSmoker	Current smoker or not?	Nominal	
	cigsPerDay	Cigarettes per day?	Continuous	
Medical History	BPMeds	Blood pressuremedication?	Nominal	
	prevalentStroke	Whether previously had stroke?	Nominal	
	prevalentHyp	Whether was hypertensive?	Nominal	
	diabetes	Whether had diabetes?	Nominal	
	totChol	Total Cholesterol Level	Continuous	
	sysBP	Systolic Blood Pressure	Continuous	
Current Medical Status	diaBP	Diastolic Blood Pressure	Continuous	
	BMI	Body Mass Index	Continuous	
	heartRate	Heart Rate	Continuous	
	glucose	Glucose Level	Continuous	
Predicted Variable	TenYearCHD	10-year risk of CHD	Binary	

Table 1: Input Variable

5. Data Analysis

It is carried out using Colab using Python. The following steps were implemented in order to process the linear and logistics regression model.

5.1 Loading Data and Other Required Libraries

It has loaded the heart prediction data using the Framingham CSV file into Google Colab in order to build the linear and logistic regression model. In addition to that, required libraries which are used as supportive applications are loaded. It has removed the education field from the database.

```
import pandas as pd
import matplotlib.pyplot as plt
import numpy as np
import seaborn as sns
from sklearn.model_selection import train_test_split
from sklearn.linear_model import LogisticRegression
from sklearn.metrics import accuracy_score
from sklearn.linear_model import LinearRegression
from sklearn import metrics
from sklearn import preprocessing
import warnings
warnings.filterwarnings('ignore')
```

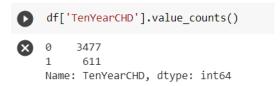
5.2 Identify Missing Values

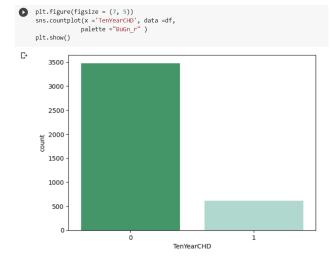
Further, the number of missing values has been identified for cleaning the existing dataset. The summarized total number of missing values based on the attributes are given below.

```
[ ] df.isna().sum()
    male
                           0
    age
                           0
    education
                         105
    currentSmoker
                           0
                          29
    cigsPerDay
                          53
    BPMeds
    prevalentStroke
                           0
    prevalentHyp
                           0
    diabetes
                           0
    totChol
                          50
    sysBP
                           0
    diaBP
                           0
    BMI
                          19
    heartRate
                           1
    glucose
                         388
    TenYearCHD
    dtype: int64
```

Then, the total percentage of missing values in the column was identified using Pandas Dataframe 3.58 % of the entire dataset (rows) with missing values are excluded. It has used the Pandas dropna() method which was used to analyze the drop rows/columns with Null values. In this case, the missing values in the 'glucose' and 'education' column are being filled with the mean value of the non-missing values in that column.

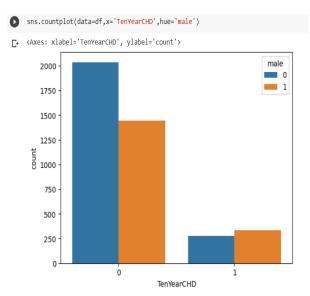
The descriptive figures related to 10-year risk of CHD have indicated below.



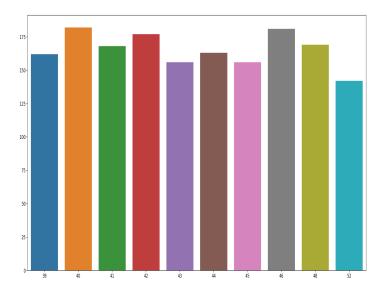


According to the above data, there are 3477 patients with no heart disease and 611 patients with a risk of heart disease.

The x-axis TenYearCHD is a binary variable indicating whether or not a person developed CHD in ten years. The hue male represents the gender of the person.



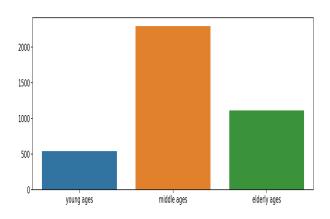
Here we will be checking the 10 ages and their counts.



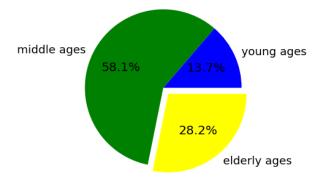
Min Age : 32 Max Age : 70

Mean Age : 49.50440313111546

We can observe that the minimum age of patient in the data set is 32 years and maximum age is 70 years. We should divide the age attribute into 3 parts i.e. young, middle and elder ages.



A pie chart is generated which states that middle-aged people have higher chances to have heart disease.



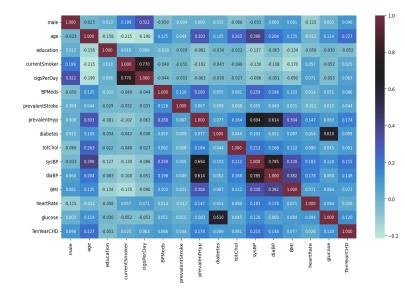
5.3 Implementing Linear Regression

Once we have collected the data, we would use linear regression to build a model that predicts the risk of heart disease based on these risk factors. The model would take the form of a linear equation. We have Calculates the pairwise correlation between columns (variables) of a Pandas DataFrame. The resulting correlation matrix is a square matrix where each element represents the correlation between two columns.

[]	print(correlation['TenYearCHD'		
	male	0.096060	
	200	0 226040	

male	0.096060	
age	0.226849	
education	-0.053270	
currentSmoker	0.025360	
cigsPerDay	0.063060	
BPMeds	0.085618	
prevalentStroke	0.044186	
prevalentHyp	0.173806	
diabetes	0.089132	
totChol	0.080676	
sysBP	0.214921	
diaBP	0.147684	
BMI	0.076643	
heartRate	0.025715	
glucose	0.119826	
TenYearCHD	1.000000	
Name: TenYearCHD,	dtype: float64	

The resulting correlation matrix would provide information on the linear relationships between various risk factors for coronary heart disease (CHD).



On the basis of the correlation matrix, we have chosen the input variables whose correlation with the target variable is positive.

5.3.1 Training and testing set

Data set was separated into training and testing sets for the evaluation process. This has been done using the scikit learn library. Training data is 60% and testing data is 40% and we can train our linear regression model on the training set and evaluate its performance on the testing set.

```
from sklearn.model_selection import train_test_split
X_train, X_test, y_train, y_test = train_test_split(X, y, test_size=0.4, random_state=101)
```

5.3.2 Results

We would use regression analysis to estimate these coefficients based on the data we have collected. We would also assess the model's accuracy by calculating the root mean squared error (RMSE) or R-squared value. Input variables and their corresponding coefficients in the linear regression model.

coeff
0.006744
0.051104
-0.003164
0.003035
0.088497
-0.001765
-0.000029
0.000089
0.000026
0.040136
0.002447
-0.001640
0.001545
-0.066652

MSE measures the average squared difference between the actual and predicted values of the target variable.

$$MSE = \frac{1}{N} \sum_{i=1}^{N} (y_i - \hat{y})^2$$

[44] metrics.mean_squared_error(y_test,prediction

0.11498962079998867

$$RMSE = \sqrt{MSE} = \sqrt{\frac{1}{N} \sum_{i=1}^{N} (y_i - \hat{y})^2}$$

45] np.sqrt(metrics.mean_squared_error(y_test,prediction))

0.33910119551542234

R-squared indicates that the independent variables in the model explain only a small

proportion i.e. 8.09% of the variance in the dependent variable. This means that the linear regression model is not a good fit for the data.

$$R^{2} = 1 - \frac{\sum (y_{i} - \hat{y})^{2}}{\sum (y_{i} - \bar{y})^{2}}$$

```
46] r2 = r2_score(y_test, prediction)
print("R2 score:", r2)
```

R2 score: 0.09385817048036083

This means that approximately 9.38% of the variance in the dependent variable can be explained by the independent variables in the regression model. In other words, the model is able to explain only a small portion of the variation in the dependent variable.

5.4 Implementing Logistics Regression

For pre-processing we are using Standardscaler. This is because some of the features in the dataset, such as age and blood pressure, have a wide range of values that are not bounded between 0 and 1. When using MinMaxScaler to scale such features, the range of values may be compressed and important information may be lost.

Train set: (2452, 8) (2452,) Test set: (1636, 8) (1636,) Training data is 60% and testing data is 40% and we can train our linear regression model on the training set and evaluate its performance on the testing set.

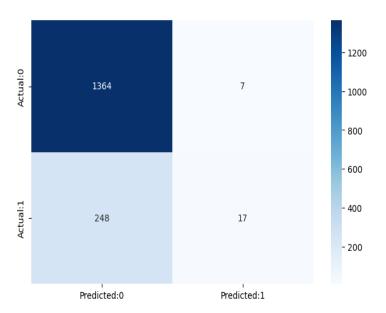
Training a logistic regression model using the input features X_train and corresponding target labels y_train, which will be used to make predictions on new data in the future. The accuracy of the model is 84.413.

5.5 Confusion Matrix Outcomes

This has been used to indicate the summary of prediction results including correct and incorrect on a classification problem.

Further, this was used to not only errors but also types of errors. The segments of the confusion matrix indicate the following parameters. True Positives (TP): cases which are predicted yes (they have the disease), and they do have the disease. True Negatives (TN): cases which are predicted no, and they do not have the disease. False Positives (FP): cases which are predicted yes, but they do not actually have the disease (Type I error). False Negatives (FN): cases which are predicted no, but they actually do have the disease (Type II error). The following outcome indicates the confusion matrix of the dataset.

According to the outcome of the confusion matrix,



Correct predictions (1364+ 17) =1381 Incorrect predictions (248 +7) =255 Therefore.

True Positives:17
True Negatives:1364

False Positives:7(Type I error)
False Negatives:248(Type II error)

Terms	Formula
Accuracy of the model (overall, how often the classifier correct)	(TP + TN) / (TP + TN + FP + FN).
Sensitivity or True Positive Rate (when it is actually yes, how often does it predict yes)	TP / (TP + FP).
The precision of a machine learning model is dependent on both the negative and positive samples.	TP / (TP + FP).
Specificity or True Negative Rate (when it is actually no, how often does it predict no)	TN/(TN+FP)

Table 2: Terms and Formula

With analyzing confusion matrix data, it is evident that the model is more highly specific than sensitive. Further, the negative values in the model are predicted more accurately than the positives.

Accuracy: 0.8441320293398533

Precision: 0.70833333333333334

Recall: 0.06415094339622641

Specificity 0.9948942377826404

6. Conclusion

Linear regression assumes a linear relationship between the dependent variable and the independent variables, which may not be appropriate for binary outcomes. Logistic regression, on the other hand, uses a logistic function to model the probability of a binary outcome based on the independent variables. The aim of this study is to evaluate the risk of 10-year CHD using 14 input variables. The attributes are selected after the backward elimination process considering the P values which are lower than 5%. Therefore, the logistic regression model is derived through P values of the variables < 0.05. According to the logistic regression outcome, men are more susceptible to heart disease than women. Age, number of cigarettes per day and systolic blood pressure are the odds of CHD. However, there is no significant change in the total cholesterol level and the glucose level. But, the level of glucose has a negligible change in odds. The model is more specific than sensitive. Further, the accuracy of the model is 0.84413.

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