Diabetes Prediction

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Introduction



768 Datas of

Diabetic and Non-diabetic **Individuals**

Diabetes Dataset

Data Card Code (212) Discussion (3)

New Notebook

About Dataset

Context

This dataset is originally from the National Institute of Diabetes and Digestive and Kidney Diseases. The objective is to predict based on diagnostic measurements whether a patient has diabetes.

Content

Several constraints were placed on the selection of these instances from a larger database. In particular, all patients here are females at least 21 years old of Pima Indian heritage.

- · Pregnancies: Number of times pregnant
- · Glucose: Plasma glucose concentration a 2 hours in an oral glucose tolerance test
- · BloodPressure: Diastolic blood pressure (mm Hg)
- · SkinThickness: Triceps skin fold thickness (mm)
- Insulin: 2-Hour serum insulin (mu U/ml)
- BMI: Body mass index (weight in kg/(height in m)^2)
- · DiabetesPedigreeFunction: Diabetes pedigree function
- Age: Age (years)
- Outcome: Class variable (0 or 1)





Why Are We Interested In Diabetes?

The International Diabetes Federation (IDF) reports that about 537 million people worldwide have diabetes.

The number of cases has been increasing over the past few decades, and the IDF predicts 783 million people will have diabetes by 2045 — an increase of 46%.



Problem Statement

To devise a **method for early detection** of diabetes to prevent diabetic complications, using **diagnostic measurements to predict** whether an individual is likely to have diabetes.



Data Preparation &

Exploratory Analysis

Preliminary Exploration

Number of NULL values for	each attribute:
Pregnancies	0
Glucose	5
BloodPressure	35
SkinThickness	227
Insulin	374
BMI	11
DiabetesPedigreeFunction	0
Age	0
Outcome	0
dtype: int64	

- Replaced zeros to NULL
- 30% of data for **Skin Thickness** and **Insulin** attribute each, is missing.

	Pregnancies	Glucose	BloodPressure	SkinThickness	Insulin	ВМІ	DiabetesPedigreeFunction	Age	Outcome
Pregnancies	1.000000	0.129459	0.141282	-0.081672	-0.073535	0.017683	-0.033523	0.544341	0.221898
Glucose	0.129459	1.000000	0.152590	0.057328	0.331357	0.221071	0.137337	0.263514	0.466581
BloodPressure	0.141282	0.152590	1.000000	0.207371	0.088933	0.281805	0.041265	0.239528	0.065068
SkinThickness	-0.081672	0.057328	0.207371	1.000000	0.436783	0.392573	0.183928	-0.113970	0.074752
Insulin	-0.073535	0.331357	0.088933	0.436783	1.000000	0.197859	0.185071	-0.042163	0.130548
ВМІ	0.017683	0.221071	0.281805	0.392573	0.197859	1.000000	0.140647	0.036242	0.292695
DiabetesPedigreeFunction	-0.033523	0.137337	0.041265	0.183928	0.185071	0.140647	1.000000	0.033561	0.173844
Age	0.544341	0.263514	0.239528	-0.113970	-0.042163	0.036242	0.033561	1.000000	0.238356
Outcome	0.221898	0.466581	0.065068	0.074752	0.130548	0.292695	0.173844	0.238356	1.000000

Preliminary Exploration

Before

Number of NULL values for	each attribute:
Pregnancies	0
Glucose	5
BloodPressure	35
SkinThickness	227
Insulin	374
BMI	11
DiabetesPedigreeFunction	0
Age	0
Outcome	0
dtype: int64	

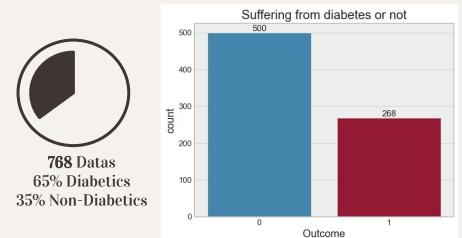
After

Number of NULL values for	each attribute:
Pregnancies	0
Glucose	0
BloodPressure	0
BMI	0
DiabetesPedigreeFunction	0
Age	0
Outcome	0
dtype: int64	

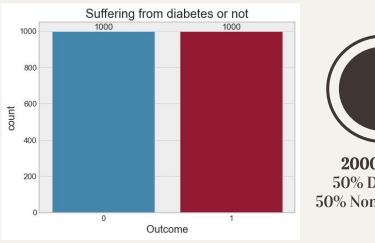
- Dropped Skin Thickness and Insulin
- Replaced NULL values with **median**

Upsampling

Before



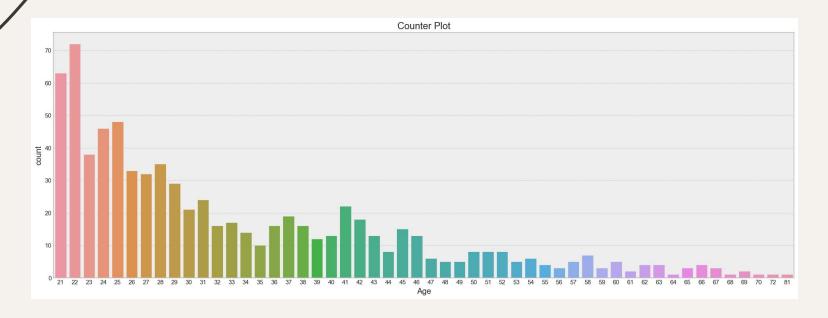
After





- Scikit resampling function
- Applied to some models elaborated subsequently

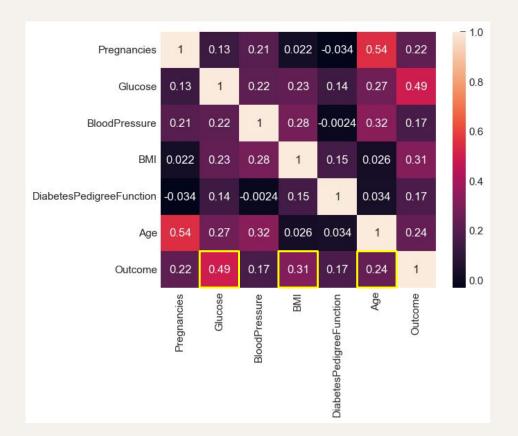
Analytic Visualisation



68% of individuals in our dataset is between the age of **21 to 44 years old**.

Boxplot For Each Attribute Outcome 2.5 5.0 100 200 12.5 15.0 17.5 Pregnancies Glucose Outcome BMI Outcome Outcome BloodPressure DiabetesPedigreeFunction

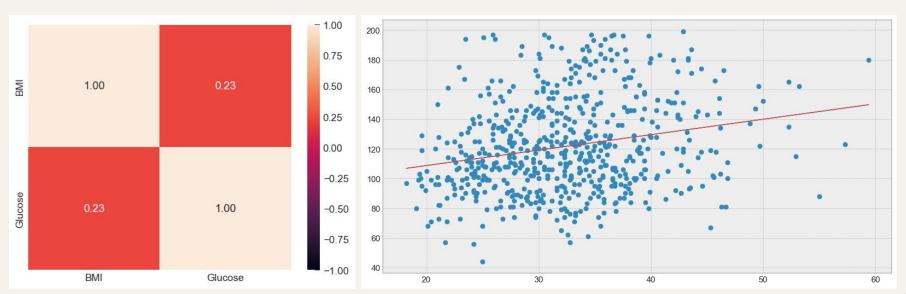
Correlation



Data Analysis

Linear Regression

BMI & Glucose:

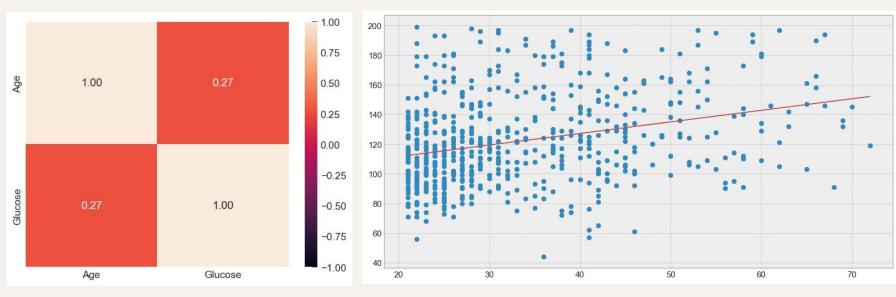


Score: 0.0847

Mean & Median: 31.99, 32

Linear Regression

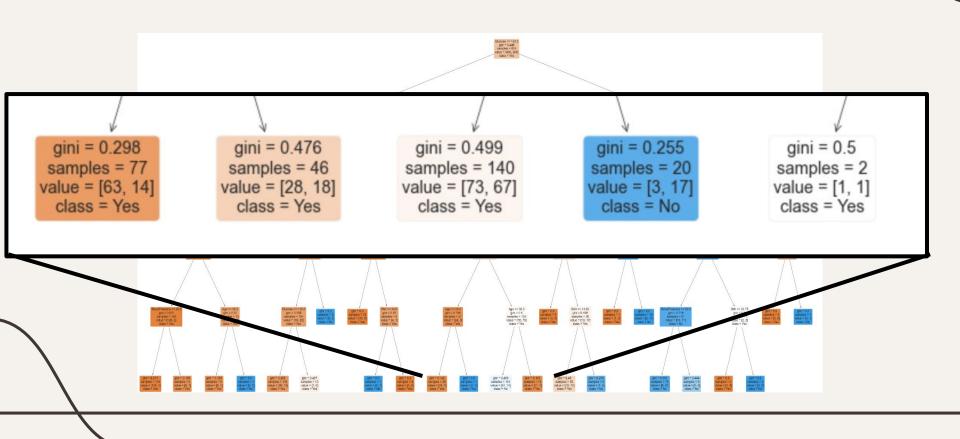
Age & Glucose:



Score: 0.1068

Modeling

Decision Tree Classifier



Decision Tree Classifier

Train

Train data:

Classification Accuracy : 0.8078175895765473

TN: 328 FN: 40 TP: 168 FP: 78

True Positive Rate: 0.8076923076923077 False Positive Rate: 0.1921182266009852



Test

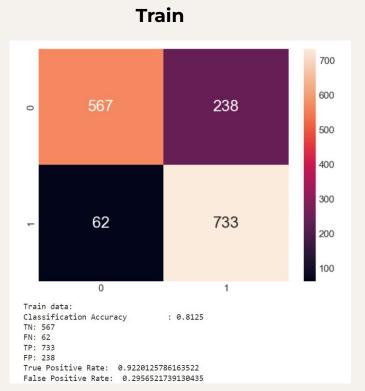
Test data:

Classification Accuracy : 0.7337662337662337

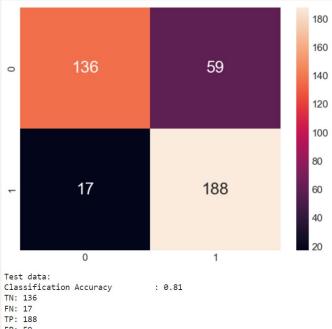
TN: 72 FN: 19 TP: 41 FP: 22



Decision Tree Classifier (With balanced class)



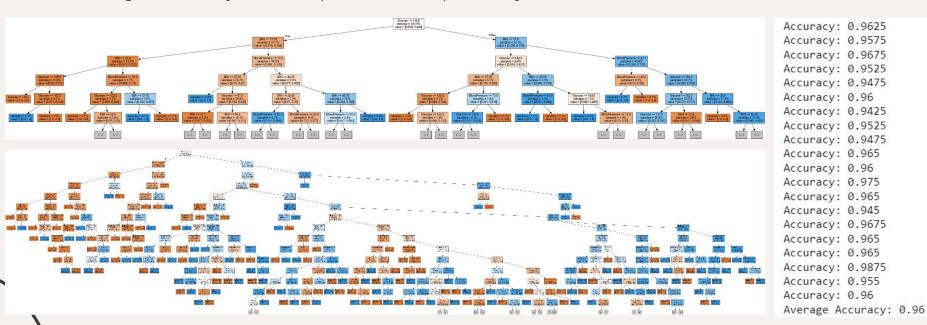




True Positive Rate: 0.9170731707317074 False Positive Rate: 0.08292682926829269

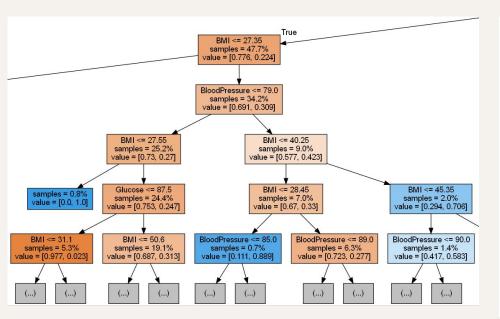
Random Forest

Average Accuracy: 0.96. Depth 5 & 14 respectively:

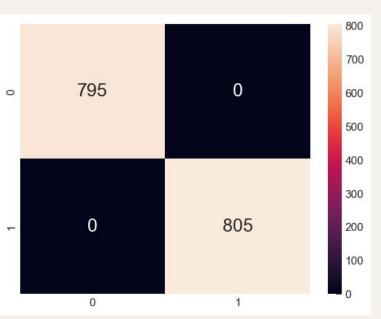


Random Forest

Depth 5 Zoomed in:

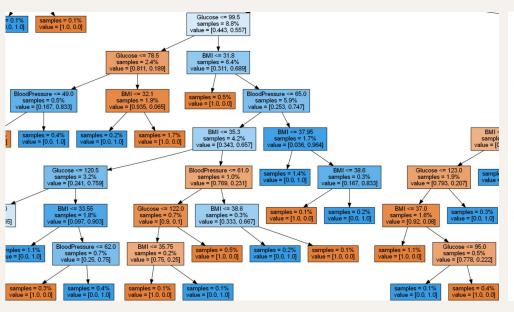


Heatmap:

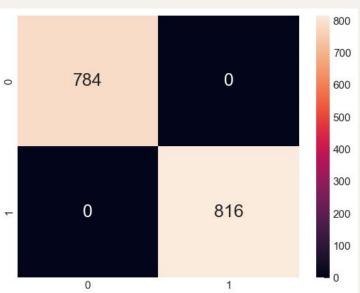


Random Forest

Depth 14 Zoomed in:



Heatmap:



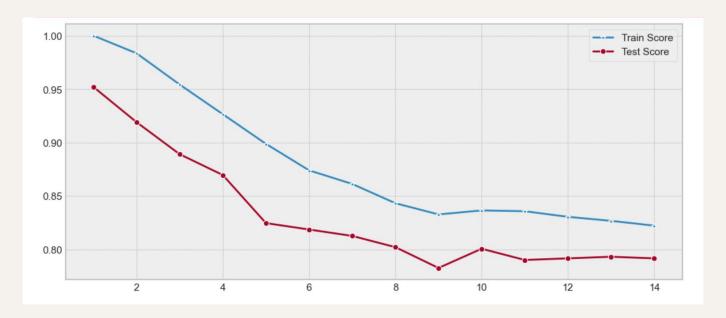
K-Nearest Neighbors (KNN)

- 1. The algorithm is simple and easy to implement.
- There's no need to build a model, tune several parameters, or make additional assumptions.

However,

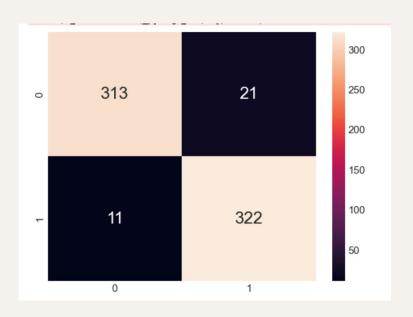
 The algorithm gets significantly slower as the number of examples and/or predictors/independent variables increase.

K-Nearest Neighbors (KNN)



Choose a value K with the highest accuracy. (In this case 1)

K-Nearest Neighbors (KNN)



Test data:

Classification Accuracy : 0.952023988005997

TN: 313 FN: 11 TP: 322 FP: 21

True Positive Rate: 0.966966966966969 False Positive Rate: 0.03303303303303303

Comparing accuracy of all Models

Decision tree without class balancing:

Random Forest:

```
test data:
Classification Accuracy : 0.99
TN: 193
FN: 0
TP: 203
FP: 4
True Positive Rate: 1.0
False Positive Rate: 0.02030456852791878
```

Decision tree with class balancing:

Test data:
Classification Accuracy : 0.81
TN: 136
FN: 17
TP: 188
FP: 59
True Positive Rate: 0.9170731707317074
False Positive Rate: 0.08292682926829269

K-Nearest Neighbors:

```
Test data:
Classification Accuracy : 0.952023988005997
TN: 313
FN: 11
TP: 322
FP: 21
True Positive Rate: 0.9669669669669
False Positive Rate: 0.03303303303303
```

Insights & Recommendations



Insights & Recommendations

1. **Glucose** has the **highest correlation** with diabetic outcome. The root of decision tree utilizes glucose to split the node.

- 2. **Upsampling** imbalanced data **improved the model performance** especially on the non-diabetic class.
- Random forest tree would be the best classifier to determine whether a person is likely to have diabetes with an accuracy of 99%.

Conclusion



• There are **other factors** such as lifestyle and environmental factors that could also influence risk of diabetes.

• The insights gained from this project can help **promote changes** in diet and lifestyle to reduce risk of diabetes.

 With data science and artificial intelligence, it is possible to detect diabetes early with reasonable accuracy using models.



New Things We Learnt

- Class imbalance can affect the accuracy of the model
- Going back to clean dataset after modelling can help improve accuracy
- Modelling sometimes requires us to go back to the start to clean our dataset to improve our models
- Using other models like random forest and KNN can help to produce more accurate models

Thank You

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