

Heart Disease Prediction

(PROJECT FILE)

OPERATING SYSTEMS

Course Instructor – Ms. Somiya (ECAM – 2)

NAME OF THE STUDENT	UNIVERSITY ROLL
-	

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INTRODUCTION

In this project, we aim to predict the presence of heart disease in patients using machine learning techniques. Heart disease is a leading cause of death worldwide, and early detection and diagnosis of this condition can significantly improve patient outcomes. We will evaluate several popular machine learning algorithms such as Logistic Regression, SVC, Decision Tree, KNN, Xgboost, GaussianNB, and Random Forest to determine which model performs the best in predicting heart disease. The accuracy of each model will be compared, and the results will be presented in an accuracy comparison graph. The main objective of this project is to develop an accurate and reliable machine learning model for heart disease prediction that can assist medical professionals in making timely and accurate diagnoses.

METHODOLOGY

Heart disease prediction using machine learning methodologies has gained significant attention in recent years due to its potential to aid in early diagnosis and prevention of cardiovascular diseases, which are the leading cause of death worldwide

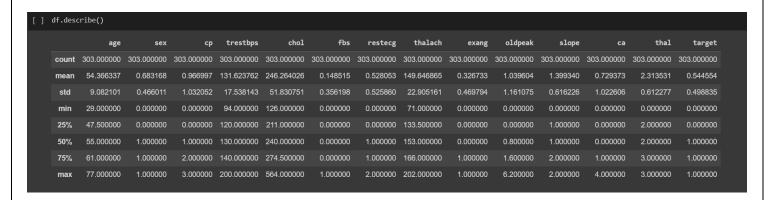
The machine learning model for heart disease prediction was developed using the following process:

- **Data preprocessing:** The Cleveland Heart Disease dataset was preprocessed to handle missing values, categorical features, and feature scaling.
- **Feature selection:** The dataset was analyzed to select relevant features for heart disease prediction.
- **Model selection:** Several machine learning algorithms were tested, includingLogistic Regression, SVC, decision tree, KNN, Xgboost, GaussianNB and random forest. The performance of each algorithm was evaluated using accuracy.
- **Model evaluation:** The final model was evaluated using cross-validation and tested on a separate test set.

Dataset & its Features

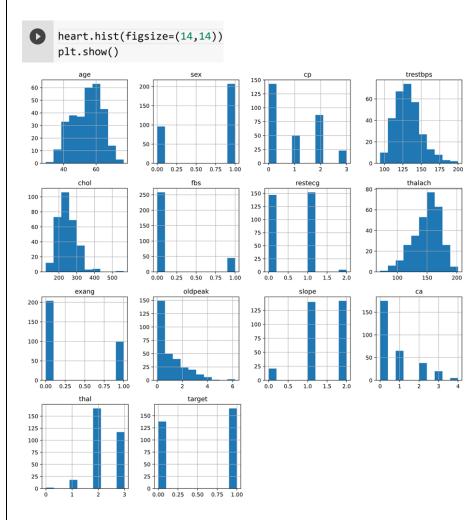
The Cleveland Heart Disease dataset was used for this project. It contains 303 records of patients, with 14 clinical and non-clinical features. The features are as follows:

- 1. age: age in years
- 2. sex: sex (1 = male; 0 = female)
- 3. cp: chest pain type (1 = typical angina; 2 = atypical angina; 3 = non-anginal pain; 4 = asymptomatic)
- 4. trestbps: resting blood pressure (in mm Hg on admission to the hospital)
- 5. chol: serum cholesterol in mg/dl
- 6. fbs: fasting blood sugar > 120 mg/dl (1 = true; 0 = false)
- 7. restecg: resting electrocardiographic results (0 = normal; 1 = having ST-T; 2 = hypertrophy)
- 8. thalach: maximum heart rate achieved
- 9. exang: exercise induced angina (1 = yes; 0 = no)
- 10. oldpeak: ST depression induced by exercise relative to rest
- 11. slope: the slope of the peak exercise ST segment (1 = upsloping; 2 = flat; 3 = downsloping)
- 12. ca: number of major vessels (0-3) colored by fluoroscopy
- 13. thal: 3 = normal; 6 = fixed defect; 7 = reversible defect
- 14. target: presence of heart disease (0 = no disease; 1 = disease)



Visualization using Different Libraries

1. Histogram Visualizer



Observations from the above plot: 1.cp {Chest pain}: People with cp 1, 2, 3 are more likely to have heart disease than people with cp 0.

2.restecg {resting EKG results}: People with a value of 1 (reporting an abnormal heart rhythm, which can range from mild symptoms to severe problems) are more likely to have heart disease.

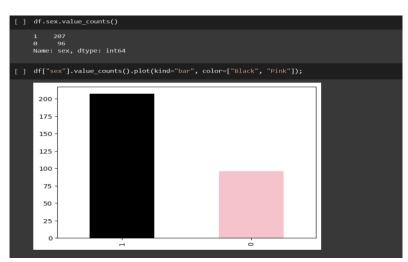
3.exang {exercise-induced angina}: people with a value of 0 (No ==> angina induced by exercise) have more heart disease than people with a value of 1 (Yes ==> angina induced by exercise)

4.slope {the slope of the ST segment of peak exercise}: People with a slope value of 2 (Downslopins: signs of an unhealthy heart) are more likely to have heart disease than people with a slope value of 2 slope is 0 (Upsloping: best heart rate with exercise) or 1 (Flatsloping: minimal change (typical healthy heart)).

5.ca (number of major vessels (0-3) stained by fluoroscopy): the more blood movement the better, so people with ca equal to 0 are more likely to have heart disease.
6.thal {thalium stress result}: People with a thal value of 2 (defect corrected: once was a defect but ok now) are more likely to have heart disease.

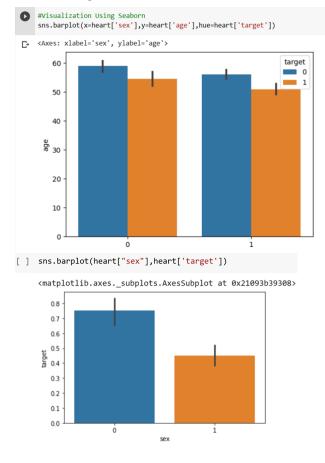
Finding class

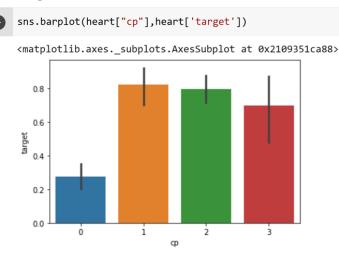




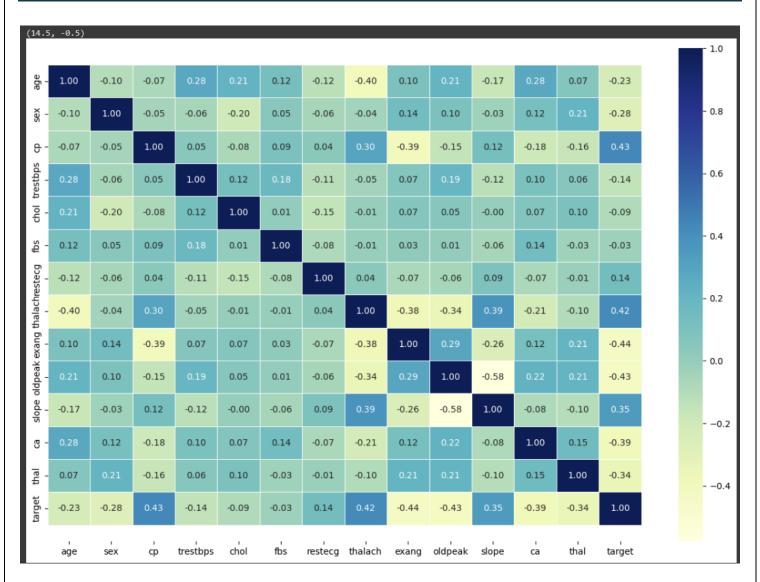
2. Visualization using Seaborn

Here target =0, don't have Heart Disease, Target =1, have Heart Disease

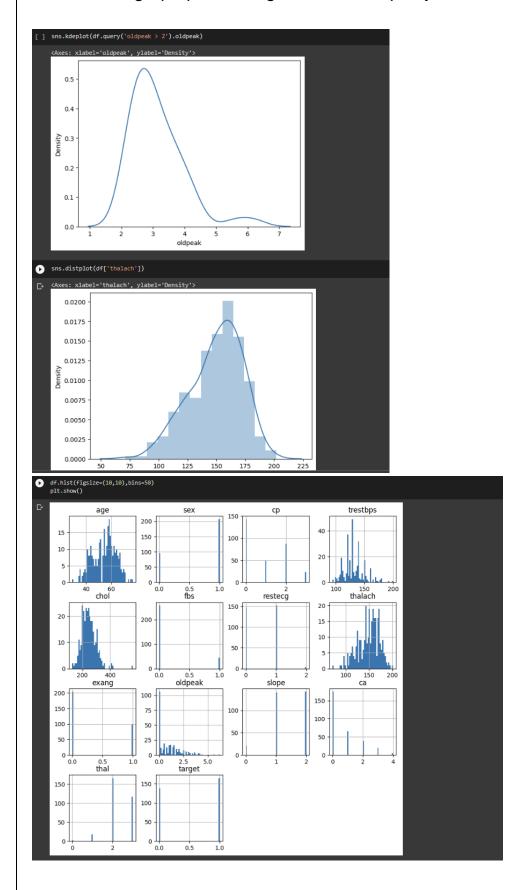




3. Visualization Heatmap



Some more graph plots using seaborn and plotly

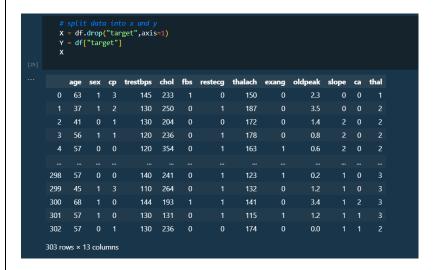


DATA PREPROCESSING

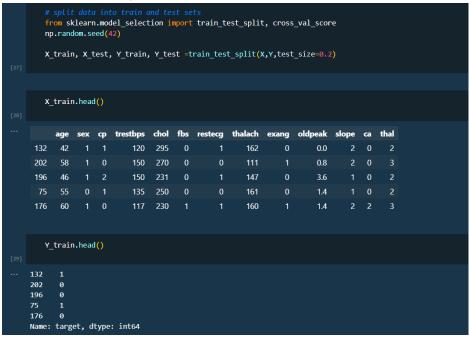
After exploring the dataset, we can observe that we need to convert some categorical variables to dummy variables and scale all values before training the machine learning models.

We preprocess the data before passing it to the machine learning models before training.

Here we store the data into x & y variables. And we split the data in X train & Y train.



Now let's split the data into training and test sets. I will split the data into 70% training and 30% testing.



MODEL BUILD

(Training & Testing)

1. KNN Classifier

We import standardScaler which will be required in KNN(In this values are going to scale down).

```
from sklearn.neighbors import KNeighborsClassifier
    model = KNeighborsClassifier(n_neighbors=3)
    model.fit(X_train,Y_train)
    y_pred = model.predict(X_test)

    from sklearn.metrics import accuracy_score
    print("Accuracy Score:",accuracy_score(Y_test,y_pred))

**Accuracy Score: 0.6557377049180327
```

2. Decision Tree Classifier

```
from sklearn.tree import DecisionTreeClassifier
    model = DecisionTreeClassifier(criterion='entropy',random_state=7)
    model.fit(X_train,Y_train)
    y_pred = model.predict(X_test)
    from sklearn.metrics import accuracy_score
    print("Accuracy Score:",accuracy_score(Y_test,y_pred))

***

**Accuracy Score: 0.819672131147541
```

Feature Importance in Decision Tree

```
Feature importances:\n{}".format(dt.feature_importances_))

Feature importances:
[0.05482313 0.0283698 0.32392476 0.08347568 0.08976649 0.
0.0129521 0.08523154 0.04724994 0.07006015 0.08617213 0.10975468
0.0082196 ]

def plot_feature_importances_diabetes(model):
    plt.figure(figsize=(8,6))
    n_features = 13
    plt.barh(range(n_features), model.feature_importances_, align='center')
    plt.yticks(np.arange(n_features), X)
    plt.xlabel("Feature importance")
    plt.ylabel("Feature)
    plt.ylim(-1, n_features)
    plot_feature_importances_diabetes(dt)
    plt.savefig('feature_importance')
```

3. Logistic Regression Model

```
Using Logistic Regression:

    from sklearn.linear_model import LogisticRegression
    model = LogisticRegression()
    model.fit(X_train,Y_train)
    Y_pred = model.predict(X_test)

    from sklearn.metrics import accuracy_score,confusion_matrix
    print("Accuracy Score:",accuracy_score(Y_test,Y_pred))

***    Accuracy Score: 0.8688524590163934

confusion_mat = confusion_matrix(Y_test,Y_pred)
    print(confusion_mat)

[25]

***    [[25] 4]
    [4] 28]]
```

5. <u>SVC</u>

```
from sklearn.svm import SVC
model = SVC()
model.fit(X_train,Y_train)
pred_y = model.predict(X_test)

from sklearn.metrics import accuracy_score
print("Accuracy Score:",accuracy_score(Y_test,pred_y))

**Accuracy Score: 0.5409836065573771
```

6. GaussianNB & Random Forest Model

```
Using GaussianNB:

from sklearn.naive_bayes import GaussianNB
  model3 = GaussianNB()
  model3.fit(X_train,Y_train)
  y_pred3 = model3.predict(X_test)

from sklearn.metrics import accuracy_score
  print("Accuracy Score: ",accuracy_score(Y_test,y_pred3))

Accuracy Score: 0.8688524590163934

Using RandomForest:

from sklearn.ensemble import RandomForestClassifier
  model2 = RandomForestClassifier(random_state=1)
  model2.fit(X_train, Y_train)
  y_pred2 = model2.predict(X_test)

from sklearn.metrics import accuracy_score
  print("Accuracy Score: ",accuracy_score(Y_test,y_pred2))

Accuracy Score: 0.7540983606557377
```

7. Xgboost

```
import xgboost as xgb
    model5 = xgb.XGBClassifier(random_state=1)
    model5 = xgb.XGBClassifier(random_state=1)
    model5.fit(X_train, Y_train)
    y_pred5 = model5.predict(X_test)

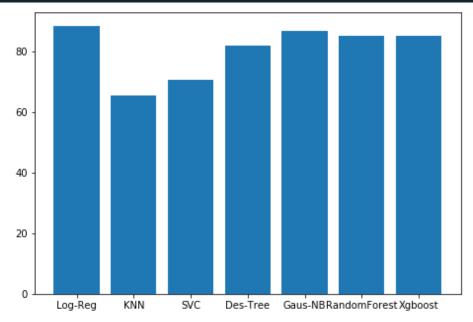
    from sklearn.metrics import accuracy_score
    print("Accuracy Score:",accuracy_score(Y_test,y_pred5))

... [15:53:47] WARNING: C:/Users/Administrator/workspace/xgboost-win64_release_1.3.0/src/learner.cc:1061: Starting in XGBoost 1.3.0,
    Accuracy Score: 0.819672131147541
```



The accuracy comparison of Logistic Regression, SVC, Decision Tree, KNN, Xgboost, GaussianNB and Random Forest models for heart disease prediction showed that the *Logistic Regression model* achieved highest accuracy (86.885245%) when compared to any other model. The accuracy graph shows a clear difference in the performance of these models, with Logistic Regression outperforming other models. This suggests that Logistic Regression is a more suitable algorithm for this problem. The graph of the accuracies is provided below:

```
fig = plt.figure()
ax = fig.add_axes([0,0,1,1])
langs = ['Log-Reg', 'KNN', 'SVC', 'Des-Tree', 'Gaus-NB', 'RandomForest', 'Xgboost']
students = [88.52,65.57,70.49,81.96,86.88,85.24,85.24]
ax.bar(langs,students)
plt.show()
```



<u>CONCLUSION</u>

In conclusion, we have evaluated multiple machine learning models such as **Logistic Regression**, SVC, Decision Tree, KNN, Xgboost, GaussianNB, and Random Forest for the prediction of heart disease. Our results showed that the Logistic Regression model achieved the highest accuracy (86.89%), outperforming other models. The accuracy comparison graph showed a clear difference in the performance of these models, with Logistic Regression being the most suitable algorithm for this problem. Our results suggest that machine learning can be an effective tool for predicting heart disease, and the Logistic Regression model can be a useful tool for early detection and diagnosis of this life-threatening condition. Further optimization and improvement in these models could lead to even better performance and could potentially help medical professionals in making timely and accurate diagnoses