# Data Mining for Diabetes Readmission Prediction

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## Reproducibility

In order to get the same results, need certain set of packages, as well as setting a pseudo-random seed equal the one I used.

• The following libraries were used for this project:

```
library(caret)

## Loading required package: lattice
## Loading required package: ggplot2

library(randomForest)

## randomForest 4.6-12
## Type rfNews() to see new features/changes/bug fixes.

library(pander)
```

• Here is the seed I set to generate pseudo-random numbers for spliting training and test dataset. (see Preprocessing section)

```
set.seed(12345)
```

# Getting data

# Cleaning data

50

## [1] 101766

The original missing value information can be found in http://www.hindawi.com/journals/bmri/2014/781670/tab1/. For simplicity, only show features which have missing values. (cite)

2%
97%
40%
50%
1%
_

The way I deal with missing values is to delete Weight, Payer code feaures (columns), since both features have more than 50% missing values and they are not relevant to classification. However, Medical speciality was maintained, adding the value "missing" in order to account for missing values. (cite)

```
## [1] 98053 48
```

In general, should split the original data into training and testing first and then deal with the missing values. However, both methods will yield same dimension of data. For simplicity, deal with NAs first here.

# Preprocessing

(Preprocessing is more crucial when using model based algorithms, e.g. Linear Discrimant Analysis, Naive Bayes, Linear Regression...than using non-parametrical algorithms.)

- There are also other ways to impute data, like knnimpute...For convenience, try omitting NA rows first.
- The data has been preprocessed to ensure each encounter has a unique id. However, each patient may have more than one id.

```
length(unique(data$encounter_id))
## [1] 98053
length(unique(data$patient_nbr))
```

## [1] 68630

We thus used only one encounter per patient; in particular, we considered only the first encounter for each patient as the primary admission and determined whether or not they were readmitted within 30 days. (cite)

```
data <- data[order(data[,2]),]
unique_list <- array(TRUE,nrow(data))
for (l in 2:nrow(data)){
   if (data[l,'patient_nbr']==data[l-1,'patient_nbr']){
      unique_list[l]=FALSE
   }
}
data <- subset(data,unique_list)</pre>
```

• Kill the first two features(encounter\_id and patient\_nbr) which are ids for encounted and patients. Also, kill near zero variables, since they are not considered relevant to the outcome. Besides, extract label column, which is the last column of data.

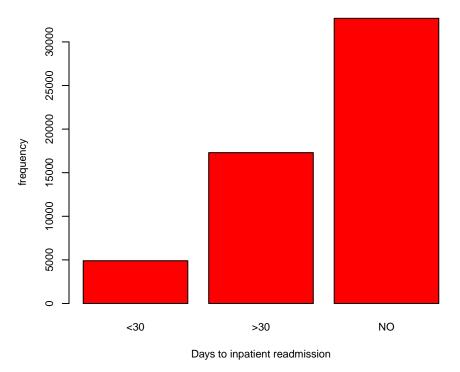
```
data <- data[,c(-1,-2)]
label <- data$readmitted
data <- data[,-46]</pre>
```

• Split this train data into training and test dataset according to the ratio 6:4 (set seed to make partioning reproducible) (Here I don't split validation since without looking data, there is possibility that test and training may not have the same distribution of different classes. Using cross validation is better in this case, though the computational complexity is high.)

```
inTrain <- createDataPartition(label,p=0.8,list=FALSE)
training <- data[inTrain,]
training_label <- label[inTrain]
test <- data[-inTrain,]
test_label <- label[-inTrain]</pre>
```

• Now, let's see if samples of different classes of training dataset are unbalanced.

#### Histogram of different classes



Classes are unbalanced distributed, but not very skewed.

• Kill unimportant features.(nearZero Var diagnoses predictors that have one unique value (i.e. are zero variance predictors) or predictors that are have both of the following characteristics: they have very few unique values relative to the number of samples and the ratio of the frequency of the most common value to the frequency of the second most common value is large.) (cite)

```
NZV <- nearZeroVar(training,saveMetrics = T,freqCut=98/2)
training <- training[,-which(NZV$nzv==TRUE)]</pre>
```

• Kill same features for test dataset without looking inside.

```
test <- test[,-which(NZV$nzv==TRUE)]</pre>
```

- Use background information for all features to analyze which features should be converted to numerical features. (cite)
- Note: Need to combine training and test to a big dataset and then convert to numerical fearutes. If convert seperately, some feature may have some level which has only few points and are all assigned into training or test dataset. This may lead to different dimensions for training and test dataset after conversion.

```
source('~/Documents/2015Fall/EE660/EE660_Project/C2N.R')
data <- rbind(training,test)
for (i in c(1:6,8,15:17,19:29)){
    temp <- as.factor(data[,i])
    data <- cbind(data,C2N(temp))
}
data <- data[,-c(1:6,8,15:17,19:29)]</pre>
```

```
training <- data[1:length(training_label),]
test <- data[(length(training_label)+1):68630,]</pre>
```

• Again, kill unimportant features using nearZeroVar.

```
NZV_2 <- nearZeroVar(training,saveMetrics = T,freqCut=98/2)
training <- training[,-which(NZV_2$nzv==TRUE)]
test<- test[,-which(NZV_2$nzv==TRUE)]</pre>
```

• Normalize data (tried different methods, just write the best one I found here)

```
training <- apply(training,2,as.numeric)
test <- apply(test,2,as.numeric)
training_std <- apply(training,2,function(x) x/sum(x))
test_std <- apply(test,2,function(x) x/sum(x))</pre>
```

## Save training and test into csv file for future use

```
write.csv(cbind(training_std,training_label),'training.csv',row.names = FALSE)
write.csv(cbind(test_std,test_label),'test.csv',row.names = FALSE)
```

Purpose for doing that is R is good for exploratory research, but not good at dealing with large dataset for classification. Use Python to read csv as SFrame for classification will speed up! (cite)