



# Report for the Second Assignment (1<sup>st</sup> Part)

## Data Processes

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# 1. Dataset overview

As it is said in the project, the datasets we will be working on contain information about **patients of breast cancer** and **characteristics associated to their tumors**, as well as information about the **TNM classification of the tumor**.

To begin with and having already a quick view of the first dataset (*breast\_cancer\_data.csv*) after downloading it, we will proceed with a little analysis of the variables to know and comprehend in a better way what the data is telling us and their possible values:

- **ehr**: patient number => *identifier*
- **side**: breast side where the tumor => *right/left/nan<sup>1</sup>*
- **neoadjuvant**: whether a patient received neoadjuvant chemotherapy or not => *yes/no*
- **grade**: grade of the tumor (how quickly the malign cells are replicated) => *1/2/3*
  - **grade '1'**: means the cancer is “well-differentiated” and resembles the tissue of origin
  - **grade '2'**: intermediate grade. Most of the patients had a moderately differentiated tumor
  - **grade '3'**: Cancer cells and tissue look very abnormal. These cancers are considered poorly differentiated since they no longer have an architectural structure or pattern. Grade 3 tumors are considered high grade.
- **er\_positive**: whether the tumor has **estrogen receptors** => *1/0*
- **pr\_positive**: whether the tumor has **progesterone receptors** => *1/0*
- **her2\_positive**: whether the tumor has **HER2 overexpression** => *1/0*
- **ki67**: percentage (cellular marker) for **proliferation** => *%*
  - ⇒ ki67 is an excellent marker to determine the growth fraction of a given cell population and thus is strongly associated with tumor cell proliferation and growth
- **birth\_date**: date of birth of the patient => *yyyy/mm/dd*
- **diagnosis\_date**: date in which the **cancer was firstly diagnosed** => *yyyy/mm/dd*
- **death\_date**: date of death of the patient => *yyyy/mm/dd*
- **recurrence\_year**: year where a previous cancer patient free of cancer get it again => *yyyy*
- **menarche\_age**: age of the patient first menstruation
- **menopause\_age**: age when the patient had first menstruation => *33-58 / nan<sup>1</sup>*
- **pregnancy**: patient number of pregnancies => *0-6 / nan<sup>1</sup>*
- **abortion**: patient number of abortions => *0-3 / nan<sup>1</sup>*
- **birth**: patient number of natural births => *(-1)-6 / nan<sup>1</sup>*
- **caesarean**: patient number of cesareans => *0-2 / nan<sup>1</sup>*
- **hist\_type**: histological type of the cancer => *ductal/lobular/unknown*

<sup>1</sup>*nan* = *unknown*

The second dataset used (*breast\_cancer\_data\_tnm.csv*) will give us the next information:

- **ehr:** patient number => *identifier*
- **n\_tumor:** specific breast tumor identifier (increases for each ehr) => *1-3*
- **t:** T classification value of the breast tumor at diagnosis => *0-4/IS*
  - ⇒ this variable indicates where the tumor outbreak
    - *0*: there is no evidence about the primary tumor (couldn't be located)
    - *IS (in-situ or precancer)*: means that cancer cells are reproducing in the topmost layer of tissue where the tumor originated, without invading deeper tissues.
    - *1 to 4*: describe the size of the tumor and how much it has spread to nearby structures in the body. The greater the T, the larger the tumor size and the greater the spread to nearby tissues.
- **n:** N classification value of the breast tumor at diagnosis => *0-3*
  - ⇒ this variable indicates whether the cancer has spread to nearby lymph nodes.
    - *0*: indicates that nearby lymph nodes do not contain cancer.
    - *1 to 3*: describe the size, location, and number of nearby lymph nodes affected by cancer. The higher the N number, the more cancer spreads to nearby lymph nodes.
- **m:** M classification value of the breast tumor at diagnosis => *0-1*
  - ⇒ this variable indicates whether the cancer has spread (if it has metastasized) to other parts of the body
    - *0*: indicates no distant spread of cancer.
    - *1*: indicates that there is spread to tissues or organs that are distant from where the cancer occurred.
- **t\_after\_neoadj:** T classification value of the breast tumor **after chemotherapy treatment** (neoadjuvant) => *0-4/IS*
- **n\_after\_neoadj:** N classification value of the breast tumor after chemotherapy treatment (neoadjuvant) => *0-3*
- **m\_after\_neoadj:** M classification value of the breast tumor after chemotherapy treatment (neoadjuvant) => *0-1*

## **2. Preprocessing**

Regarding the preparation, cleaning and preprocessing of the data, the first thing that we performed was a thorough analysis of the datasets' files (both excel and csv) in order to have a clear understanding of the whole background of the data as well as the variables contained in them, which represent different features or characteristics. Once having a clear understanding of the data, we had to work with, we decided to start the process of cleaning and preprocessing it thoroughly.

### **2.1. Preprocessing of Breast Cancer datasets**

Firstly, we decided to start working on the data regarding the information about the patients and characteristics associated to their tumors, which is the data presented in the files 'breast\_cancer\_data.xlsx' as well as 'breast\_cancer\_data\_2.xlsx'. In order to do so in a proper way, we decided that the main thing to do before going further was to merge both datasets in one. Indeed, as both datasets contain the same kind of information, we could perform the merge directly without further manipulation. Moreover, apart from deleting duplicated patients, we believed that the first column presented in the dataset (called "Unnamed: 0") was useless in this scenario, so we decided to delete it, since the dataset would have much more sense without it. The resultant dataset, which we will be working on, would be like this:

	side	neoadjuvant	grade	invasive	er_positive	pr_positive	\
ehr							
6849	NaN	no	1.0	1.0	1.0	1.0	
268	NaN	no	NaN	1.0	1.0	1.0	
1458	NaN	no	1.0	1.0	1.0	1.0	
2013	NaN	yes	3.0	1.0	1.0	1.0	
1350	NaN	no	2.0	1.0	0.0	1.0	
...	...	...	...	...	...	...	
6647	NaN	yes	NaN	1.0	1.0	1.0	
768	NaN	no	NaN	NaN	1.0	1.0	
4534	NaN	no	NaN	1.0	NaN	NaN	
7062	NaN	no	NaN	1.0	1.0	1.0	
7066	NaN	yes	2.0	1.0	0.0	0.0	
	her2_positive	ki67	birth_date	diagnosis_date	death_date	\	
ehr							
6849	1.0	NaN	1967-08-08	2016-08-23	NaN		
268	0.0	NaN	1950-03-11	2015-09-05	NaN		
1458	0.0	0.0	1953-09-17	2017-03-01	NaN		
2013	1.0	17.0	1977-08-19	2014-08-31	NaN		
1350	0.0	44.0	1951-04-02	2003-05-24	2022-05-11		
...	...	...	...	...	...		
6647	0.0	NaN	1984-01-29	2014-05-22	NaN		
768	0.0	NaN	1953-03-12	1997-10-25	NaN		
4534	0.0	NaN	1959-06-25	2003-11-10	NaN		
7062	0.0	0.0	1971-03-21	2020-11-07	NaN		
7066	0.0	60.0	1979-03-25	2019-02-19	2017-11-20		
	recurrence_year	menarche_age	menopause_age	pregnancy	abort	birth	\
ehr							
6849	NaN	17.0		51.0	2.0	0.0	2
268	NaN	12.0		NaN	2.0	0.0	2
1458	NaN	11.0		NaN	2.0	0.0	2
2013	NaN	NaN		NaN	NaN	NaN	-1
1350	NaN	14.0		NaN	3.0	NaN	3
...	...	...		...	...	...	...
6647	NaN	12.0		NaN	NaN	NaN	-1
768	2010.0	13.0		NaN	0.0	NaN	-1
4534	NaN	11.0		40.0	2.0	0.0	2
7062	NaN	16.0		NaN	NaN	NaN	-1
7066	2021.0	12.0		NaN	0.0	0.0	0
	caesarean	hist_type					
ehr							
6849	NaN	ductal					
268	NaN	unknown					
1458	0.0	ductal					
2013	NaN	ductal					
1350	NaN	ductal					
...	...	...					
6647	NaN	ductal					
768	NaN	unknown					
4534	NaN	ductal					
7062	NaN	ductal					
7066	NaN	ductal					

[241 rows x 19 columns]

Figure 1: Resultant dataset

Then, we started to divide the variables into 2 types, categorical and numerical variables, for the purpose of creating a homogeneous file and to begin our data wrangling process. Therefore, variables were divided as follows:

- Categorical variables:
  - **Side:** as there was a lot of empty values here, we decided to add a new category called “unknown” if neither “left” or “right” appeared. The reason behind using this approach instead of the Simple Imputer class with a “most\_frequent” strategy was because, as there were not enough values, it would not have made sense to use the “most\_frequent” strategy since it would have changed the proportions of this variable and would have given the dataset a completely different and unreal representation of this variable.

- **Neoadjuvant:** in this case, we chose to apply the Simple Imputer class with a “most\_frequent” strategy since almost all the cells had values, so thanks to this technique we could impute the null values. After that, we concluded to convert the “yes” or “no” values into numerical 1s or 0s, since we thought that, although the original neoadjuvant variable was categorical, we believed that it was better to transform it to numerical, changing these values into 1s and 0s, therefore avoiding to create a new column when the One Hot Encoder was applied.
- **Grade:** as with neoadjuvant, we performed the Simple Imputer class with a “most\_frequent” strategy as there was a great variety of the 3 types of grades (1, 2 or 3).
- **Invasive:** regarding this variable, the only value presented here were 1s, so we decided to impute the null values by adding a 0 in the null values, as we understood invasive as whether the tumor is invasive (1) or not (0).
- **Er\_positive:** here we chose to apply the Simple Imputer class with a “most\_frequent” strategy because almost all the cells had values, so thanks to this technique we could impute the null values.
- **Pr\_positive:** the same procedure was performed as with the “er\_positive” variable.
- **Her2\_positive:** the same procedure was performed as with the “er\_positive” and “pr\_positive” variables.
- **Hist\_type:** regarding this variable, we only had to apply the One Hot Encoder technique (explained below).

Then, for the “side”, “grade” and “hist\_type” variables we decided to apply the One Hot Encoder transformation in order to represent with numerical values each of the categories of the 3 variables.

To achieve this, we previously decided to create a duplicate of the DataFrame “df\_cat” (which contained these variables, the categorical ones) called “df\_aux”, in order to pop the variables which were already modified for the purpose of not applying the One Hot Encoder to them. These variables were: “neoadjuvant”, “invasive”, “er\_positive”, “pr\_positive” and “her2\_positive”.

Finally, we merge the DataFrame “df\_aux” with the one which possessed the categorical values with the One Hot Encoder technique applied (“df\_cat\_ohe”), resulting in a DataFrame that contained all the categorical variables preprocessed (“df\_cat\_def”).

After this process, we decided to analyze and treat some variables before starting to work with the numerical ones. In particular, we decided to swap the variables “birth\_date”, “diagnosis\_date” and “death\_date” by the age at which the patient was diagnosed (“age\_diagnosed”), the time in years they survived since they were diagnosed (“survival\_time”) and the time in years that took for them to fall back again since they were diagnosed (“recurrence\_time”). We chose to make these changes since we thought that they would be of way more use to us when trying to use this date for any predictions. After that, we just deleted from the DataFrame of numerical variables (“df\_num”) the unused variables and merge the new ones.

Moreover, at this point we decided to create a new variable called “survived” (which had the value 1 if the patient was alive or 0 if not), that would become our target variable, since we believe that the most important use of this data would be trying to predict, based on all these features, if a patient with breast cancer survived or not.

Then, continuing with our analysis, we began to work with the other types of variables, the numerical ones, which are explained below.

- Numerical variables:
  - **Ki67**: in this case, as there were plenty of values in this column and it represents a percentage, we decided to apply the Simple Imputer class with a “mean” strategy, for the purpose of imputing the nulls with the mean of all the values.
  - **Menarche\_age**: for this variable, we chose to also apply the Simple Imputer class with a “mean” strategy for those few patients that did not have values. However, as a mean is applied, after this process we rounded up the resulting number, since it does not make much sense to have a 13,48 age value.
  - **Menopause\_age**: the same procedure was performed as with the “menarche\_age” variable.
  - **Pregnancy**: regarding this column, we decided to add the 0 value to that patients which did not have data, since we believed that it would not make sense in this case to apply the mean or the most frequent.
  - **Abort**: the same procedure was performed as with the “pregnancy” variable.
  - **Caesarean**: the same procedure was performed as with the “pregnancy” and “abort” variables.
  - **Birth**: as this variable had all the column with values, the only change we performed was modifying the negatives values (such as -1s) and transforming them to 0, as it would not make sense to have negative births.
  - **Age\_diagnosed**: as explained above, for this variable we calculated through an apply function the age at which the patient was diagnosed with breast cancer.
  - **Survival\_time**: as we said, in this column we introduced the number of years which the patient lasted since they were diagnosed till their death. However, for the values in which the patient did not die, we decided to insert a huge value, for the purpose of clarifying that she is alive.
  - **Recurrence\_time**: as said before, this variable tells the time in years that took for the patient to fall back again in the cancer since the year they were diagnosed. As well as with “survival\_time”, we chose to add a huge value in the cases where the patient did not fall back.



To end up with the numerical values, we need to emphasize that, since we saw some cases in which the number of pregnancies, abortions and births did not compute, meaning that there may have been less or more pregnancies than supposed due to contradictory data, we decided to increment the number of pregnancies for those cases that did not add up. We performed this through an auxiliary function which change the number of pregnancies if it was less or more than the sum of abortions and births.

To finish with this part, after we performed the above operations for both categorical and numerical variables, we merged the two DataFrames in order to have all the variables from the first 2 datasets together. The resulting dataset (“df\_preprocessed”) can be observed below:

	side_left	side_right	side_unknown	neoadjuvant_no	neoadjuvant_yes	\		
ehr								
6849	0.0	0.0	1.0	1.0	0.0			
268	0.0	0.0	1.0	1.0	0.0			
1458	0.0	0.0	1.0	1.0	0.0			
2013	0.0	0.0	1.0	0.0	1.0			
1350	0.0	0.0	1.0	1.0	0.0			
...	...	...	...	...	...			
6647	0.0	0.0	1.0	0.0	1.0			
768	0.0	0.0	1.0	1.0	0.0			
4534	0.0	0.0	1.0	1.0	0.0			
7062	0.0	0.0	1.0	1.0	0.0			
7066	0.0	0.0	1.0	0.0	1.0			
	grade_1.0	grade_2.0	grade_3.0	hist_type_ductal	hist_type_lobular	\		
ehr								
6849	1.0	0.0	0.0	1.0	0.0			
268	0.0	1.0	0.0	0.0	0.0			
1458	1.0	0.0	0.0	1.0	0.0			
2013	0.0	0.0	1.0	1.0	0.0			
1350	0.0	1.0	0.0	1.0	0.0			
...	...	...	...	...	...			
6647	0.0	1.0	0.0	1.0	0.0			
768	0.0	1.0	0.0	0.0	0.0			
4534	0.0	1.0	0.0	1.0	0.0			
7062	0.0	1.0	0.0	1.0	0.0			
7066	0.0	1.0	0.0	1.0	0.0			
	...	ki67	menarche_age	menopause_age	pregnancy	abortion	birth	\
ehr	...							
6849	...	20.465116	17.0	51.0	2.0	0.0	2.0	
268	...	20.465116	12.0	49.0	2.0	0.0	2.0	
1458	...	0.000000	11.0	49.0	2.0	0.0	2.0	
2013	...	17.000000	13.0	49.0	0.0	0.0	0.0	
1350	...	44.000000	14.0	49.0	3.0	0.0	3.0	
...	...	...	...	...	...	...	...	
6647	...	20.465116	12.0	49.0	0.0	0.0	0.0	
768	...	20.465116	13.0	49.0	0.0	0.0	0.0	
4534	...	20.465116	11.0	40.0	2.0	0.0	2.0	
7062	...	0.000000	16.0	49.0	0.0	0.0	0.0	
7066	...	60.000000	12.0	49.0	0.0	0.0	0.0	
	caesarean	age_diagnosed	survival_time	recurrence_time				
ehr								
6849	0.0	49.0	1000.0	1000.0				
268	0.0	65.0	1000.0	1000.0				
1458	0.0	64.0	1000.0	1000.0				
2013	0.0	37.0	1000.0	1000.0				
1350	0.0	52.0	19.0	1000.0				
...	...	...	...	...				
6647	0.0	30.0	1000.0	1000.0				
768	0.0	44.0	1000.0	13.0				
4534	0.0	44.0	1000.0	1000.0				
7062	0.0	49.0	1000.0	1000.0				
7066	0.0	40.0	1000.0	2.0				
[241 rows x 25 columns]								

Figure 2: Resultant dataset after several operations

## 2.2. Preprocessing of TNM datasets

In this part, the main objective of the datasets ‘breast\_cancer\_data\_tnm.csv’ and ‘breast\_cancer\_data\_tnm\_2.csv’ is to give a detailed analysis of the characteristics of the tumors residing in the breast cancer patients. As with the previous set of datasets, we firstly combined them in one in order to work with it efficiently. After that, we erased the duplicated data, as we did before, keeping only the patients with the most severe tumors. The resultant dataset, which we will be working on, would be like this:

ehr	n_tumor	t	n	m	t_after_neoadj	n_after_neoadj	m_after_neoadj
6849	3	2	0.0	0.0	NaN	NaN	NaN
268	3	2	0.0	0.0	NaN	NaN	NaN
2013	1	2	1.0	1.0	1	2.0	0.0
1754	1	1	1.0	0.0	NaN	NaN	NaN
1350	1	1	0.0	0.0	NaN	NaN	NaN
...	...	...	...	...	...	...	...
6647	1	NaN	NaN	NaN	2.0	2.0	0.0
768	1	X	X	1.0	NaN	NaN	NaN
4534	1	2	0	0.0	NaN	NaN	NaN
7062	1	1	0	0.0	NaN	NaN	NaN
7066	1	0	2	0.0	1.0	1.0	0.0

[233 rows x 7 columns]

Figure 3: Resultant dataset for tumors

In contrast with the previous dataset, in which there are great variety of variables, in this dataset we only have 7 variables, the number of tumors a patient has, the TNM classification of a tumor and the TNM classification of a tumor after neoadjuvant. Therefore, we decide to operate with all the variables together, without differentiating between numerical and categorical, since there is only one numerical (“n\_tumor”).

First of all, we preprocessed the TNM and TNM after neoadjuvant variables. The way we performed this was by observing each variable and their dual after the treatment. In this case:

- If the first variable (“t”, “n” or “m”) was not null, it would keep that value
- If the first variable was null but the one after treatment was not, we inserted the value of the latter, meaning that the neoadjuvant treatment did not make any effect in that variable. However, if the variable after neoadjuvant was also null, we would insert a new value representing the category “unknown”, since we believe that it would not make sense to make up values for these variables.

For the values after neoadjuvant:

- If the variable (“t\_after\_neoadj”, “n\_after\_neoadj” or “m\_after\_neoadj”) was not null, it would keep that value

- If the variable was null but the original one (“t”, “n” or “m”) was not, we inserted the value of the original variable, meaning that the TNM values did not change after the neoadjuvant treatment.

After all the variables had imputed the nulls, we performed the One Hot Encoder for the categorical variables (all except “n\_tumor”). In this way, as previously done, we duplicated the DataFrame “df\_tnm” into a new DataFrame called “df\_tnm\_aux” in order to pop the “n\_tumor” variable. Then, after the One Hot Encoder was applied to the rest of the variables, we merge the DataFrame “df\_tnm\_aux” with the One Hot Encoder one, resulting in a DataFrame that contained all the variables preprocessed (“df\_tnm\_def”).

Finally, once the 4 datasets were successfully cleaned, prepared and preprocessed, we decided to merge them, combining the “df\_preprocessed” DataFrame (the one from the 2 first datasets), with the “df\_tnm\_def” DataFrame (the one from the 2 last ones). In order to use all the rows from the 4 datasets, that is, all the data, we chose to use the parameter “how” with “outer” value. The reason behind this decision lies in the fact that there are missing values in both datasets, meaning that there are patients in one dataset that do not correspond to any tumor in the other dataset and vice versa. By default, the merge method uses inner merge, instead of outer, which eliminates those entries that do not have matches on the other dataset. This result can also be achieved by using the join method, instead of merge.

Therefore, after we performed this merge, we decided to apply the Simple Imputer class with a “most\_frequent” strategy in order to impute the nulls for these 14 variables. To end up, the final dataset can be appreciated below:

```

side_left side_right side_unknown neoadjuvant_no neoadjuvant_yes \
ehr
6849 0.0 0.0 1.0 1.0 0.0
268 0.0 0.0 1.0 1.0 0.0
1458 0.0 0.0 1.0 1.0 0.0
2013 0.0 0.0 1.0 0.0 1.0
1350 0.0 0.0 1.0 1.0 0.0
... ...
88 0.0 0.0 1.0 1.0 0.0
5062 0.0 0.0 1.0 1.0 0.0
3412 0.0 0.0 1.0 1.0 0.0
2006 0.0 0.0 1.0 1.0 0.0
7496 0.0 0.0 1.0 1.0 0.0

grade_1.0 grade_2.0 grade_3.0 hist_type_ductal hist_type_lobular ... \
ehr
6849 1.0 0.0 0.0 1.0 0.0 ...
268 0.0 1.0 0.0 0.0 0.0 ...
1458 1.0 0.0 0.0 1.0 0.0 ...
2013 0.0 0.0 1.0 1.0 0.0 ...
1350 0.0 1.0 0.0 1.0 0.0 ...
... ...
88 0.0 1.0 0.0 0.0 0.0 ...
5062 0.0 1.0 0.0 0.0 0.0 ...
3412 0.0 1.0 0.0 0.0 0.0 ...
2006 0.0 1.0 0.0 0.0 0.0 ...
7496 0.0 1.0 0.0 0.0 0.0 ...

t_after_neoadj_unknown n_after_neoadj_0 n_after_neoadj_1 \
ehr
6849 0.0 1.0 0.0
268 0.0 1.0 0.0
1458 0.0 1.0 0.0
2013 0.0 0.0 0.0
1350 0.0 1.0 0.0
... ...
88 0.0 0.0 1.0
5062 0.0 0.0 1.0
3412 0.0 1.0 0.0
2006 0.0 0.0 1.0
7496 0.0 0.0 1.0

n_after_neoadj_2 n_after_neoadj_3 n_after_neoadj_X \
ehr
6849 0.0 0.0 0.0
268 0.0 0.0 0.0
1458 0.0 0.0 0.0
2013 1.0 0.0 0.0
1350 0.0 0.0 0.0
... ...
88 0.0 0.0 0.0
5062 0.0 0.0 0.0
3412 0.0 0.0 0.0
2006 0.0 0.0 0.0
7496 0.0 0.0 0.0

n_after_neoadj_unknown m_after_neoadj_0 m_after_neoadj_1 \
ehr
6849 0.0 1.0 0.0
268 0.0 1.0 0.0
1458 0.0 1.0 0.0
2013 0.0 1.0 0.0
1350 0.0 1.0 0.0
... ...
88 0.0 1.0 0.0
5062 0.0 1.0 0.0
3412 0.0 1.0 0.0
2006 0.0 1.0 0.0
7496 0.0 1.0 0.0

m_after_neoadj_unknown
ehr
6849 0.0
268 0.0
1458 0.0
2013 0.0
1350 0.0
... ...
88 0.0
5062 0.0
3412 0.0
2006 0.0
7496 0.0

```

[247 rows x 60 columns]

Figure 4: Final dataset

### 3. Analysis

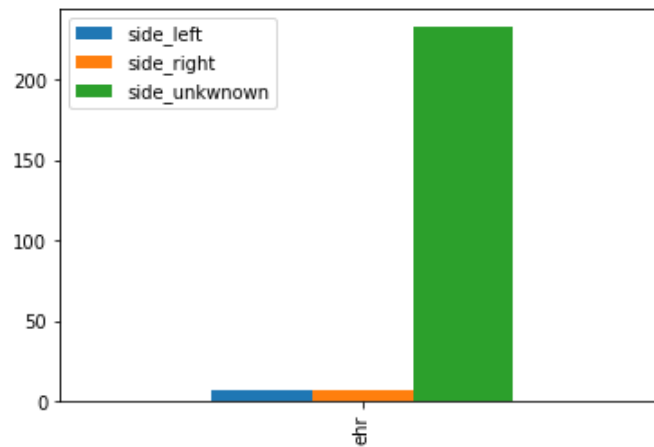
Once having all the data cleared and pre-processed, now we can proceed with the task of generating a descriptive analysis of the latter. For the purpose of being able to visualize the data properly, we will consider the dataset generated before applying the One Hot Encoder, as each variable is contained in only one column. In this analysis we will be exploring each of the variables and commenting on those whose values throw interest insights or don't follow a common distribution. As there are almost 26 columns in the dataset (without considering the one hot encoder transformation which adds even more columns due to the categorical variables), plotting and analyzing all the possible correlations would be incredibly long and probably useless, since clearly not all the combinations will arise useful insights. In order to find and plot those correlations of interest, we will look at the correlation matrix from all the variables. On the graphic below, the correlation matrix between the numerical variables can be seen:

	age	menarche_age	menopause_age	pregnancy	birth	caesarean	age_diagnosed	survival_time	recurrence_time	n_tumor
ehr	1	-0.0640528	-0.0438142	0.0301333	0.0769753	0.0247251	-0.00172283	-0.113833	-0.0647855	0.0416358
neoadjuvant	-0.0640528	1	0.255641	0.110352	-0.0908532	-0.0765498	0.0661226	0.245781	-0.0104501	-0.0858946
grade	-0.0438142	0.255641	1	-0.0860587	-0.0873872	-0.0147611	0.165657	-0.285676	-0.0684022	0.0490713
invasive	0.0301333	0.110352	-0.0860587	1	-0.10855	0.00510332	-0.00250929	-0.0427266	-0.0564544	-0.0623988
er_positive	0.0769753	-0.0908532	-0.0873872	-0.10855	1	0.225398	-0.152569	-0.256832	0.0871775	0.00107371
pr_positive	0.0247251	-0.0765498	-0.0147611	0.00510332	0.225398	1	-0.0209156	-0.190088	0.0573294	0.00451376
her2_positive	-0.00172283	0.0661226	0.165657	-0.00250929	-0.152569	-0.0209156	1	0.137431	0.0260675	0.0391038
ki67	-0.113833	0.245781	0.285676	-0.0427266	-0.256832	-0.190088	0.137431	1	-0.0175581	0.0213562
menarche_age	-0.0647855	-0.0104501	0.0684022	-0.0564544	0.0871775	0.0573294	0.0260675	-0.0175581	1	0.168497
menopause_age	0.0416358	-0.0858946	0.0490713	-0.0623988	0.00107371	0.00451376	0.0391038	0.0213562	0.168497	1
pregnancy	0.0558785	-0.0425636	-0.0952019	0.024306	-0.00126684	-0.0284396	0.0167744	0.189657	0.0857059	-0.0457544
birth	0.0128828	0.0541853	0.0207588	0.00590138	5.44898e-18	0.123747	0.078644	0.218011	0.0716778	-0.006434
caesarean	-0.0661363	-0.0714146	-0.12027	0.0263244	-0.00149237	0.0149041	-0.0110026	0.138132	0.0729249	-0.0513828
age_diagnosed	-0.102928	-0.0212365	-0.100575	-0.0427988	0.00952701	-0.0983778	-0.0502905	-0.10221	-0.00868087	-0.0067814
survival_time	0.0467482	-0.150175	-0.0325041	0.0966704	0.0336751	0.0952347	0.0577711	-0.111803	-0.0976248	-0.0622492
recurrence_time	-0.0734218	-0.0634383	-0.0737271	0.061213	-0.0634383	-0.0288298	0.0445694	0.020331	0.00190633	0.00836932
n_tumor	-0.00845673	-0.0443467	-0.0715076	0.0360979	0.039123	0.0534314	0.0776566	1.31105e-16	0.0295729	0.0655551

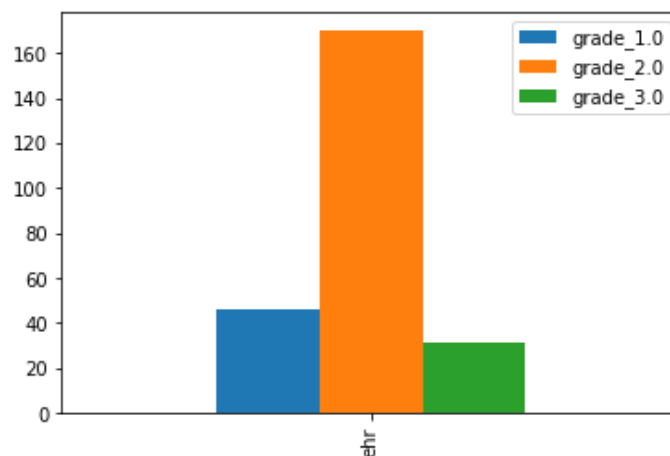
Moreover, on the graphic below, since we changed the categorical variables to numerical with the one hot encoder algorithm, now we are able to see the correlation matrix between all the possible numerical and categorical variables. It's a matrix with 60 rows and 60 columns, so we are showing here just a piece of it:

	age	menarche_age	menopause_age	pregnancy	birth	caesarean	age_diagnosed	survival_time	recurrence_time	n_tumor
ehr	1	-0.0640528	-0.0438142	0.0301333	0.0769753	0.0247251	-0.00172283	-0.113833	-0.0647855	0.0416358
side_left	-0.0640528	1	-0.0291667	-0.696718	-0.0190296	0.0622671	-0.064699	-0.0154303	-0.0506927	0.0520156
side_right	0.115497	-0.0291667	1	-0.696718	-0.0817004	0.0622671	0.00894456	-0.0642931	0.0387437	0.0520156
side_unknown	-0.0335977	-0.696718	-0.696718	1	0.0722889	-0.0893719	0.0400122	0.0572135	0.0085752	-0.0746581
grade_1_0	0.0780194	-0.0190296	-0.0817004	0.0722889	1	-0.710821	-0.181232	-0.0789286	-0.0657514	0.139686
grade_2_0	-0.078642	0.0622671	0.0622671	-0.0893719	-0.710821	1	-0.562902	0.0716047	-0.0456546	0.00683404
grade_3_0	0.018276	-0.064699	0.00894456	0.0400122	-0.181232	-0.562902	1	0.130105	-0.0228526	-0.100309
hist_type_ductal	-0.0343994	-0.0154303	-0.0642931	0.0572135	-0.0789286	-0.0657514	0.130105	1	-0.281594	-0.08904
hist_type_lobular	-0.0204946	-0.0506927	0.0387437	0.0085752	-0.0657514	0.0716047	-0.0228526	-0.281594	1	-0.253134
hist_type_unknown	0.0564166	0.0520156	0.0520156	-0.0746581	0.139686	-0.0456546	-0.100309	-0.08904	-0.253134	1
neoadjuvant	-0.0640528	-0.0237786	-0.0237786	0.0341284	-0.185825	0.00683404	0.209924	-0.00428063	0.0012054	0.0281385
invasive	0.0301333	-0.144206	-0.235019	0.257798	0.130761	-0.116675	0.00947779	0.120149	0.118591	-0.206687
er_positive	0.0769753	-0.0598651	-0.0598651	0.0559244	0.00750538	0.0920942	-0.137583	0.0327697	-0.0749755	-0.0130193
pr_positive	0.0247251	0.0453133	-0.0660537	0.0148844	-0.0493936	0.00750538	-0.137583	-0.0749755	0.0739172	-0.0579968
her2_positive	-0.00172283	-0.0148844	-0.0784084	0.0663647	-0.0550751	-0.0493936	0.00750538	-0.137583	-0.0749755	-0.0579968
ki67	-0.113833	0.0451008	-0.0184762	-0.0248483	-0.191249	-0.0582125	0.025387	0.0776566	-0.0579968	-0.0239017
menarche_age	-0.0647855	-0.0133521	-0.0133521	0.0191642	-0.0582125	0.0158867	0.0461921	-0.0319822	-0.119729	0.0924966

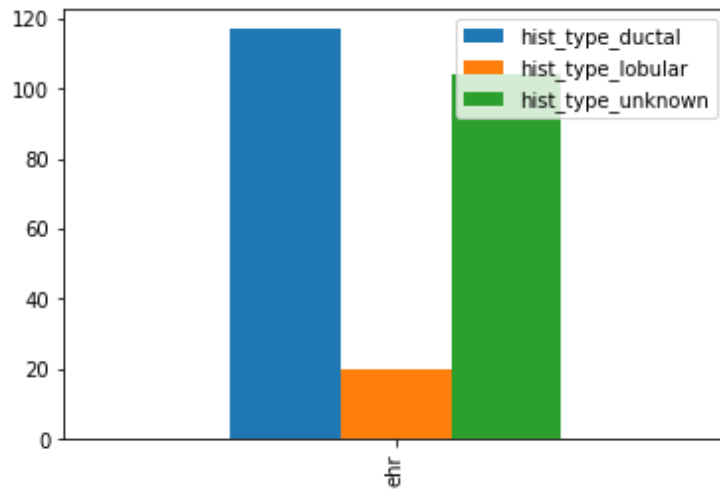
To begin with, as it can be seen in the next bar graphic plot, for most of the patients, the side of the tumor is unknown:



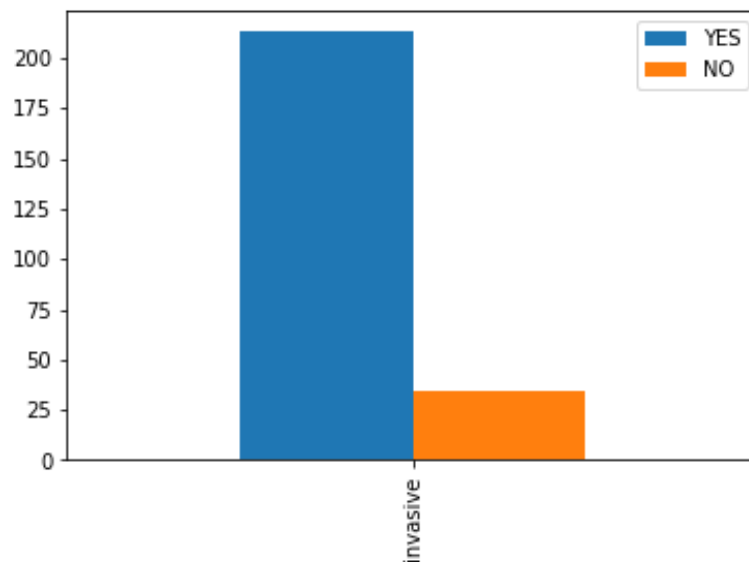
Regarding the grades of the tumors, as it can be appreciated in the next bar graphic plot, most of the patients in this dataset had a 'grade 2' tumor, indicating an intermediate grade, in other words, most of the patients had a moderately differentiated tumor:



Paying attention to the histological type of the cancer of the patients, as it is shown in the next bar graphic plot, for the patients where the histological type was determined, a great majority had a ductal histological type of cancer (117 patients out of 247 in total). On the other hand, it was found that only 20 patients had a lobular histological type of cancer. The rest of values (104), which were unknown, still represent a great percentage with respect to the total, that's the reason why it wasn't worth to apply the Simple Imputer to them. Still, from the bar graphic plot one can realize that many of the unknown histological type could appear to be ductal instead of lobular.

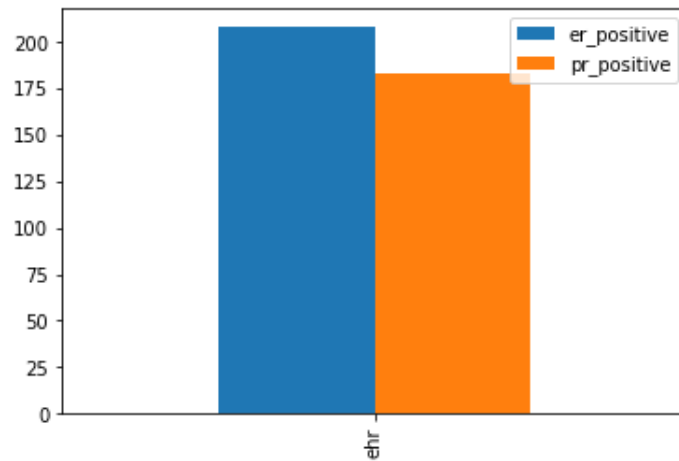


Furthermore, as it can be seen in the next bar graphic plot, it was found that most of the tumors from the patients were invasive, with only an amount of 34 tumors out of 247 not being invasive:

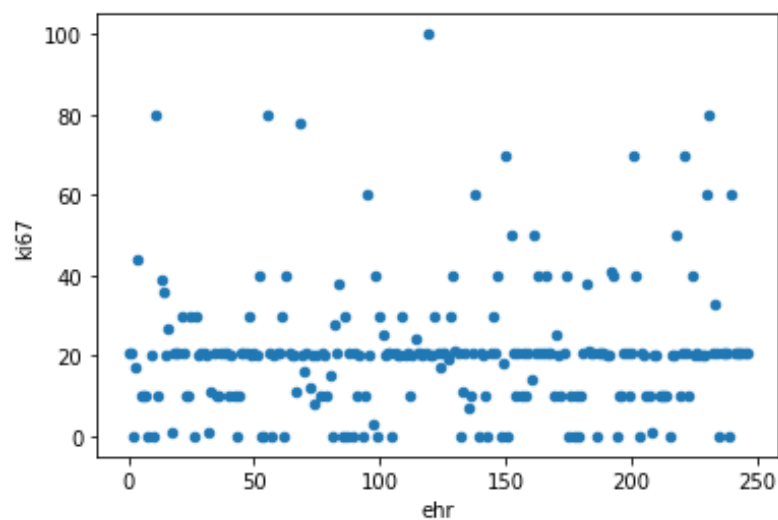


In relation to whether the tumor has any kind of receptors or not, as it can be appreciated in the next bar graphic plot, 208 out of 247 patients were detected estrogen receptors, while 183 patients were also detected progesterone receptors, meaning that both types of receptors were in most of the patients' tumors. In this case, since most of the patients have been detected both receptors, we arrive to the conclusion that both types of receptors are strongly correlated with the proliferation of tumors without further correlation graphics.

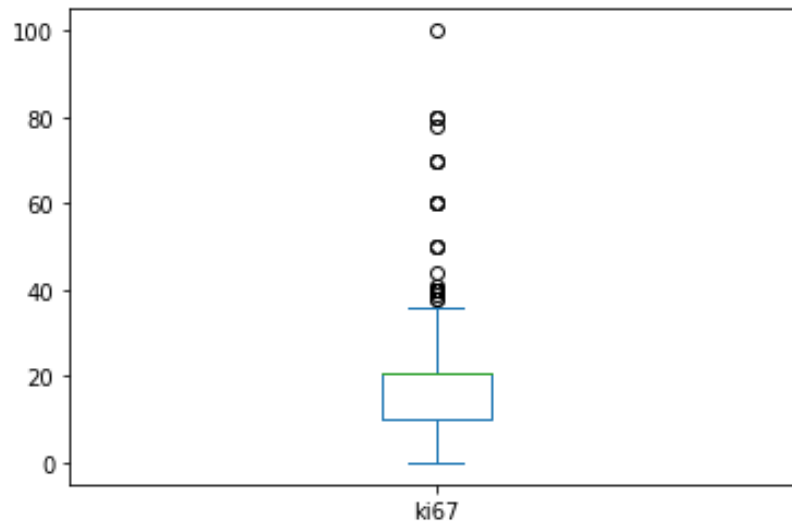




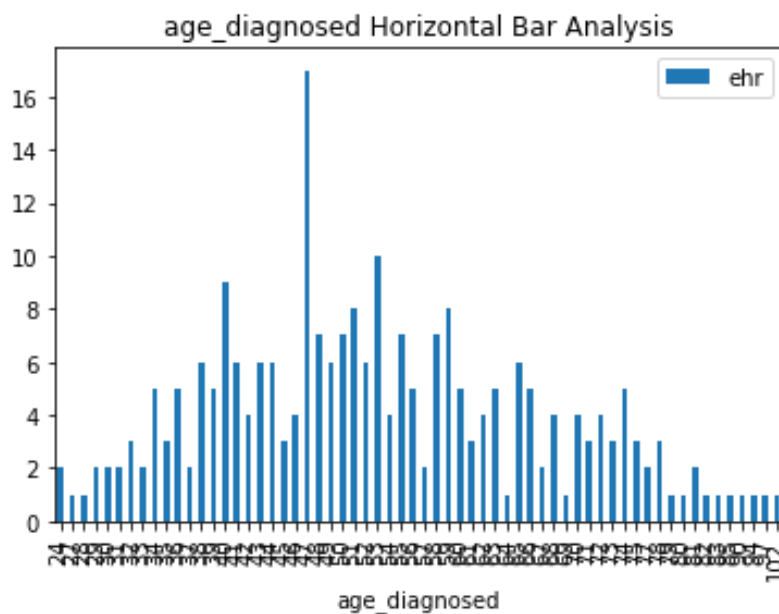
With respect to the percentage of proliferation of the tumor, as it is shown in the next scatter plot graphic, most of the patients have a 20% of proliferation. This means that in many patients, 2 in every 10 cells are dividing, which corresponds to a grade 2 neuroendocrine tumor (NET), meaning that the cells look more likely to grow and spread abnormally (they are also called moderately differentiated tumors).



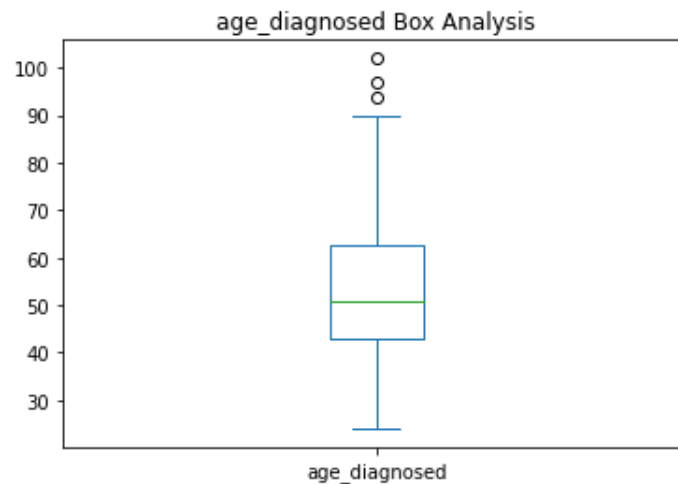
In the next box plot graphic, it can be seen more accurately how the values are distributed. As we were saying before, the mean is close to 20, as most of the values are there, and we can see that the percentiles between 0-40 and values over 40 are more difficult to be seen.



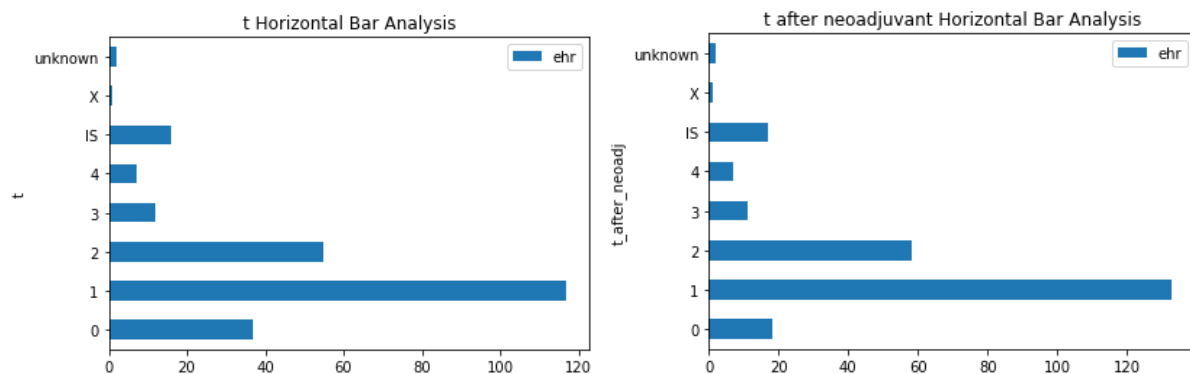
Regarding the age at which the tumor was diagnosed, as it can be observed in the next horizontal bar plot graphic, a great majority of patients (17 in total) were diagnosed at the age of 47. Also, from this graphic it can be deduced that the major part of detections take place at 40 years old and above.



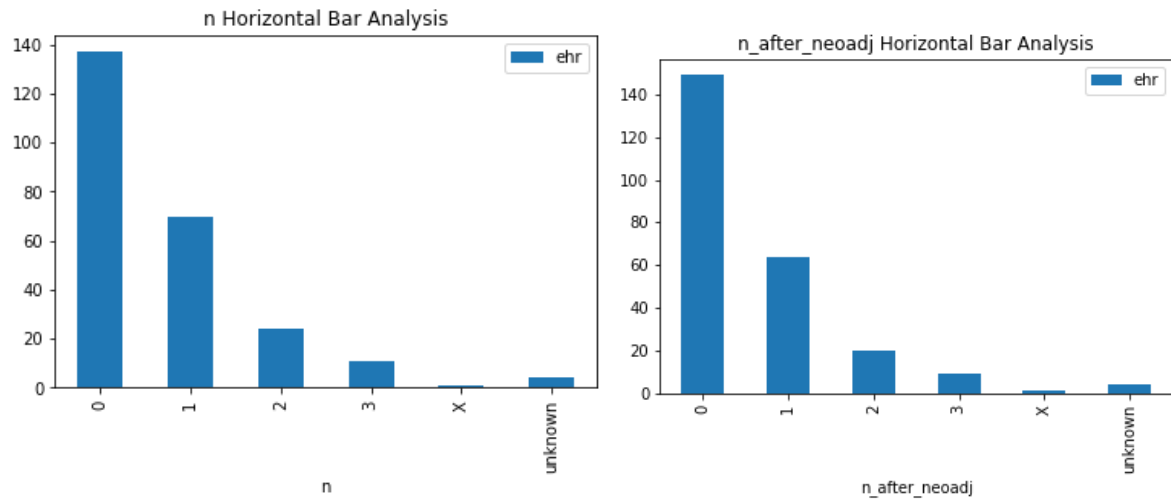
In the next box plot graphic, it can be appreciated more accurately how the values are distributed. As it can be seen, the inter-quartile range corresponds to the age group between 45-65 years old, and the middle quartile correspond approximately to the group of 47 years.



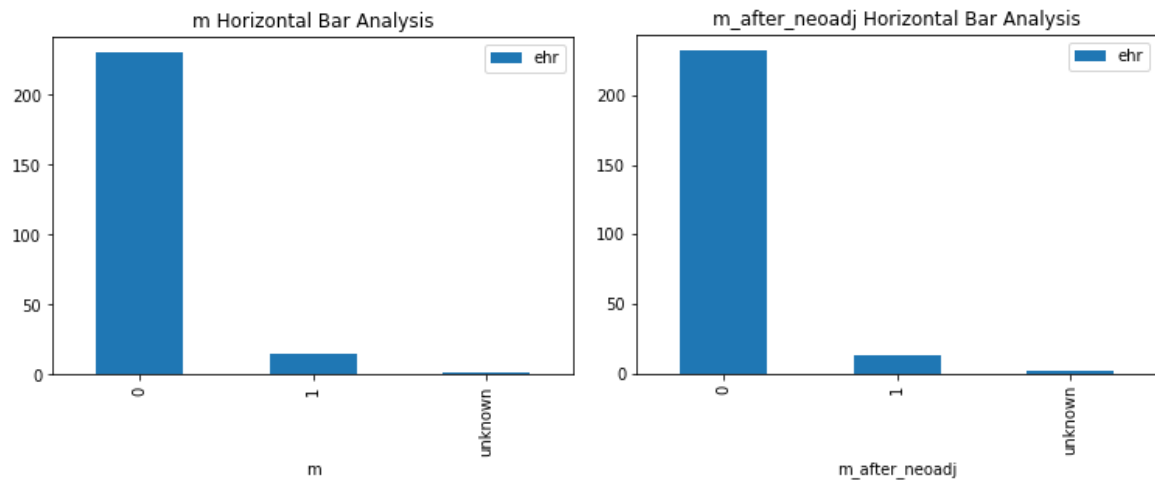
With respect to the T classification value of the tumor of the patient at diagnosis (t), as it can be seen in the horizontal bar plot graphic on the left, a great majority of patients (almost 120) were classified with a type 1 T classification value, which means that for most of the patients, the extent of the main tumor is not so large, at least at the time of diagnosis. The number of patients increases in the graphic of the right, which is the same but this time referring to the T classification value of the tumor of the patient after neoadjuvant chemotherapy treatment. That is expected, since it would mean that the treatment makes a difference for the patients.



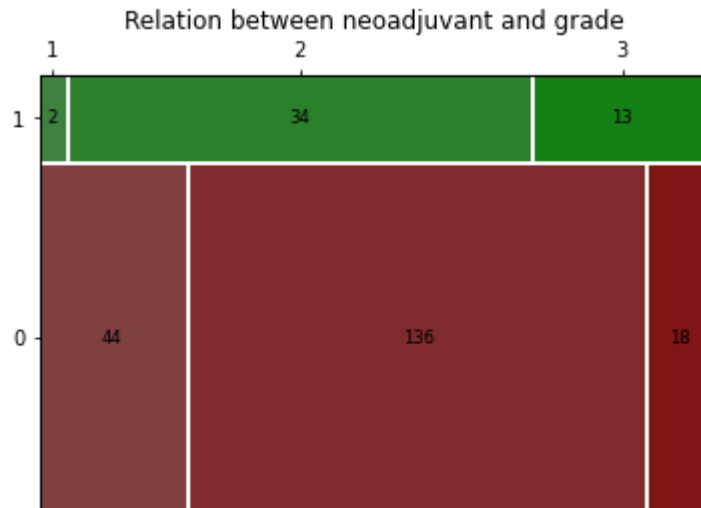
Paying attention to the N classification value of the tumor, as it can be observed in the horizontal bar plot graphic of the left, a great majority of patients (almost 140) were classified with a type 0 N classification value, which means that for most of the patients no lymph nodes have been affected at least at the moment of diagnosis. The number of patients increases in the graphic of the right, which is the same but this time referring to the N classification value of the tumor after neoadjuvant chemotherapy was applied. That makes sense since it would mean that the treatment indeed makes improvement on the patients.



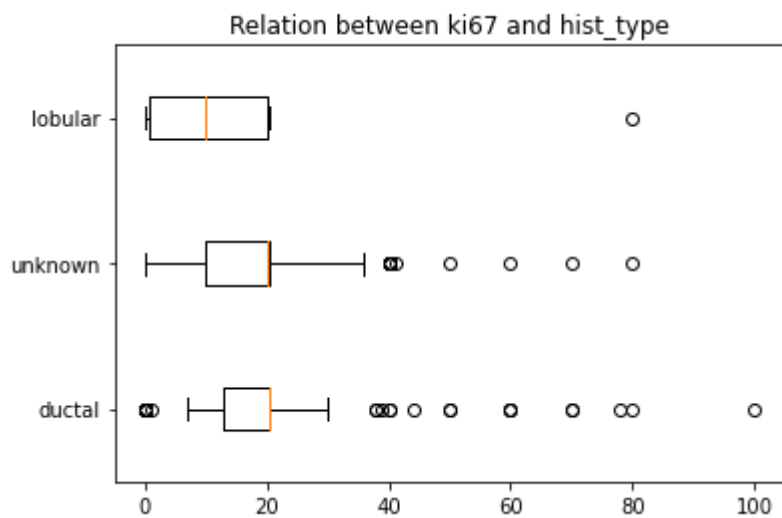
Regarding the M classification value of the tumor of the patient at diagnosis “m”, as it can be seen in the horizontal bar plot graphic of the left, a great majority of patients (almost 230) were classified with a type 0 M classification value, which means that for most of the patients, the cancer has not metastasized at the moment of diagnosis. The number of patients increases in the graphic of the right, which is the same but this time referring to the M classification value of the tumor of the patient after neoadjuvant chemotherapy treatment. As with the previous T and N, this makes sense since it would mean that the treatment actually makes improvement on the patients.



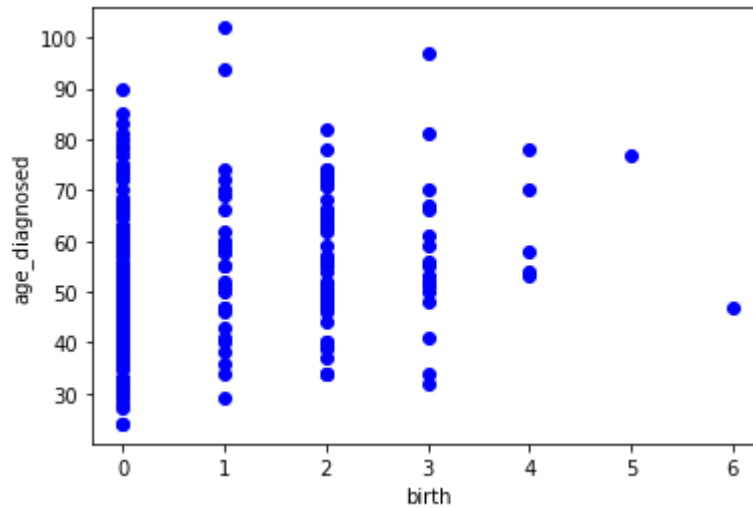
One of the interest correlations that we found was with the patients that received chemotherapy (neoadjuvant) and the grade of the tumors which indicate how quickly the malign cells are replicated. In this case, as it can be seen in the next mosaic graphic plot, the data shows how the patients who received neoadjuvant chemotherapy tend to have a higher grade of replication than the ones who didn't (those represent a 26% from the total against a 9% from the total in those patients who didn't receive chemotherapy).



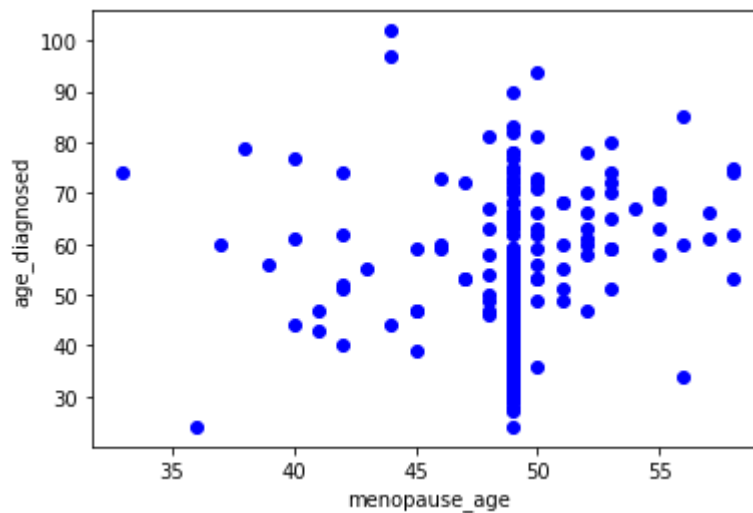
Another interesting correlation we found was between the cellular marker of proliferation (ki67) and the histological type of the cancer of the patient (hist\_type). In this case, as it can be seen in the next box graphic plot, when the histological case of proliferation is lobular, then the cellular marker of proliferation tends to be lower than when the case is ductal or for other cases.



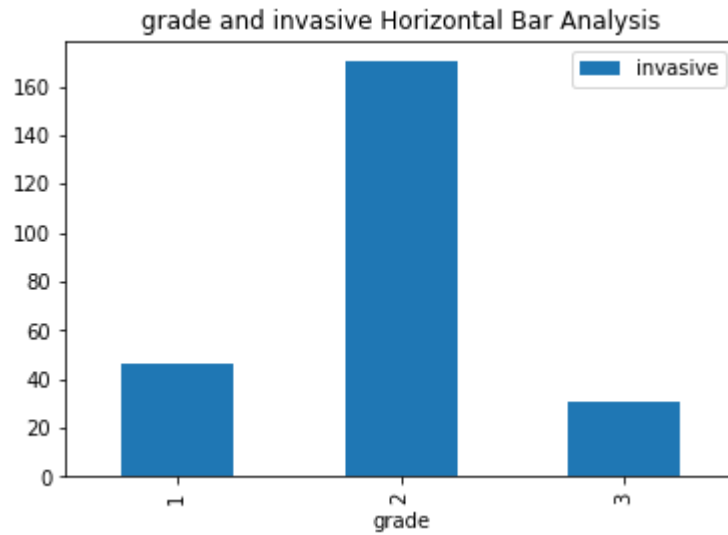
Also, another interesting correlation we found was between the age\_diagnosed of the cancer (age\_diagnosed) and the number of natural births of the patient (birth). In this case, as it can be seen in the next scatter graphic plot, it's not necessary to give birth to develop the cancer and indeed in this dataset most of the cases that were diagnosed didn't give birth. Between the birth values we found that in this dataset from those who gave birth, those who gave birth 2 times are the most propense to develop it.



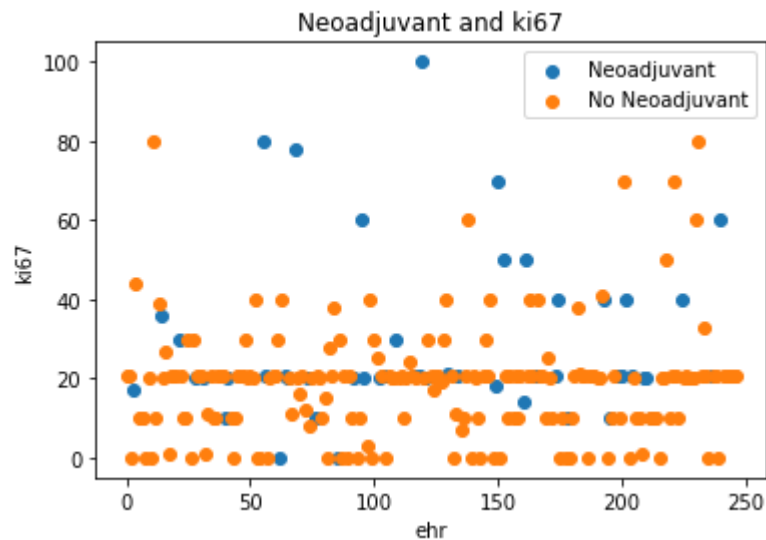
Another interesting correlation we found was between the age diagnosed of the cancer (age\_diagnosed) and the age at which the patient had the menopause (menopauseage). In this case, as it can be seen in the next scatter graphic plot, most of the cases found are found in the median, which is 49, but still from those cases outside the normal, it's more usual in those who have a delayed menopause than an early one.



Another interesting correlation we found was between the grade of the tumor (grade) and whether if it was invasive or not (invasive). In this case, as it can be seen in the next bar graphic plot, from all the invasive cases, the grade of the tumor where most invasive cases were found was the tumor with grade 2.



In conclusion, we would like to include another interesting correlation that we found, which affects whether a patient has received neoadjuvant chemotherapy (neoadjuvant) and the percentage for proliferation (ki67). In this case, as it can be seen in the next scatter graphic plot, a number of patients that received neoadjuvant chemotherapy, can see their percentage of proliferation significantly reduced.



## References

- [Med-Surg Nursing: Tumor Classification & the 5 Types of Cancer - LevelUpRN](#)
- [Estadificación del cáncer \(cancer.org\)](#)
- [Neoadjuvant therapy - Wikipedia](#)