Disease Prediction System using Machine Learning

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Abstract - *With the change in lifestyle of people, chronic* diseases have become very common. And as people are getting exposed to internet and gadgets, a large amount of data associated with their health is generated each day. With the evolution of machine learning algorithm this data can be used to monitor the health and wellbeing of people. With this research we aim at providing a complete solution to assist people in avoiding any future health complications. Proposed model uses machine learning algorithms to predict the possibility of diseases namely Diabetes, Heart disease, Kidney disease, Liver disease and Cancer. Proposed model also help to find the nearest medical facilities and maintain health records of patients. We ran various algorithms on each dataset and determined that Random Forest was the most accurate for Diabetes, with a score of 77.21%. Logistic regression performed the best for heart disease, with an accuracy score of 90.25%. Similarly, Random Forest gave a recall score of 97% for liver disease, and Decision Tree proved to be the best for cancer with 98.62%. Random Forest provided an accuracy score of 96.45% for kidney disease.

Key Words: Chronic disease, Machine learning, Decision Tree Classifier, KNN, SVM, Random Forest Classifier, Data Mining, JavaScript, Flask framework, MySQL, EDA.

1.INTRODUCTION

The covid-19 lockdown proved to be a nightmare for each one of us. None of us could get out of their homes, travel, or do anything at all. Even in medical emergencies, patients were unable to reach hospitals owing to a lack of transportation. Even if they could, they would have to take a mandatory covid test, which took up a significant amount of time for the patients and consequently delayed the procedure for which they were there. We encountered a lot of people who had their test results in hand but couldn't meet with the doctors. This is when we discovered the necessity for intelligent software that might address this problem using Machine Learning and allowing patients to find out if they had an illness or not even at midnight.

To address this issue, we proposed our disease prediction system, in which we take test data from patients and apply machine learning algorithms to them in order to assist them interpret their results. The fact that most people have access to internet 24/7 largely contributed in our solution. Our model now offers analysis for five diseases: liver disease, heart disease, diabetes, kidney disease, and cancer. Our system examines several algorithms like N-Nearest Neighbours, Support Vector Machine, Logistic Regression, Random Forest Classifier and Naïve Bayes classifier for each model and selects the best model for each ailment, as well as providing the findings. Along with the patients, our software could also prove useful for the doctors to confirm their opinions with the previous data sets. This would also aid in an early detection of the disease and could improve the chances for recovery tremendously for the patient. Our proposed software would also assist in giving a free option to those who are unable to visit a doctor due to financial constraints.

2. LITERATURE REVIEW

In this paper, Mr. Santhana Krishnan.J & Dr. Deetha.S [1] have used 2 main machine learning algorithms namely decision tree algorithm and Naive Bayes algorithm. Using these algorithms, they predicted if a person has any heart disease or not. This model uses 13 medical attributes as input and then gives the result. They have compared the accuracy rate of the 2 classifiers (decision tree and naive Bayes classifier) and have concluded that the Decision tree has a higher accuracy rate which is of 91% and the accuracy rate of Naive Bayes algo is 87%. To calculate this accuracy rate they had considered 70% of the dataset as the training set and the remaining 30% was taken as a test dataset.

Here, they are predicting if a person is having any liver disease. The algorithms that they have used are KNN (K-Nearest Neighbour) and CNN (Convolutional Neural Network). The accuracy rate that they have got for CNN is 98.4% and that for KNN is 91%. [2]

In this paper [3] they are predicting if a person has any kidney disease or not. If the person has a kidney disease they would classify the disease into stages and depending on what stage the patient is at and looking at the patient's potassium level, they will provide a balanced diet schedule for him/her.

In 2016, Priyanka Sonar & Prof. K. JayaMalini [4] performed an examination to determine whether or not a person had diabetes. They compared 11 test attributes from the person's test report and used machine learning algorithms such as the decision tree classifier, Support Vector classifier and Logistic Regression. Out of these algorithms, the Support Vector Classifier was more accurate to 82% and confusion matrix was used to evaluate the model.

In 2017, Debadri Dutta, Debpriyo Paul & Prof. Parthajeet Ghosh [5] performed the examination to determine whether or not a person had Cancer disease. They used supervised machine learning algorithms such as the Random Forest classifier and K Nearest Neighbours classifier. Out of these algorithms, Random Forest Classifier was more accurate with a Recall score of 89% and confusion matrix was used to evaluate the model.

K Ashfaq Ahmed, Sultan Aljahdali, Nisar Hundewale & K Ishthaq Ahmed [6] used Support Vector Machine(SVM) and random forest in their model to identify whether an individual has duke, breast or colon cancer. For them, the radial basis function proved to be the best with SVM and in some cases, results were comparable with random forest technique.

Fatima Dilawar Mulla & Naveenkumar Jayakumar [7] used Decision tree, Bayesian network, K-Nearest neighbour and support vector machine to identify if a person has a heart disease or not. In their model, SVM had the highest accuracy followed by KNN. The highest accuracy of SVM was 84.33%.

P. Moksha Sri Sai, G. Anuradha & VVNV Phani kumar [8] used K-mean, KNN and SVM algorithms to identify whether an individual has diabetes disease or not and classified the disease into the correct type. They classified non-insulin-dependent and insulin-dependent diabetes and also provided a balanced diet. In their model, the support vector machine gave the best accuracy score of 94%.

3. SYSTEM ARCHITECTURE

I. Algorithms used

a) K-Nearest Neighbours:

In K-Nearest Neighbours(KNN), K is the number of nearest neighbours. Here the neighbours mean the output classification classes. In the KNN algorithm, the core-deciding factor is the number of neighbours. When the number of classes is two, K is usually an odd number, indicating that the problem is a binary classification problem. The algorithm is known as the nearest neighbour algorithm when K=1. We use Hamming, Euclidean, Manhattan, and Minkowski distance to find the distance between two points.

The steps involved in KNN are:

- a. Calculate distance
- b. Finding the closest neighbouring point
- c. Classifying the dependent feature into yes or no

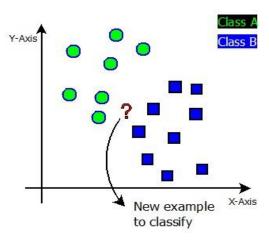


Fig. 1. K-Nearest Neighbour

b) Logistic Regression:

For predicting binary classes, we use statistical methods like logistic regression. The target variable or outcome is binary in nature which means that there are only two possible classes. It calculates the likelihood of an event occurring. It uses a sigmoid function, also called logistic function. The sigmoid function generates an S-shaped curve which can be used to transform any real-valued number between 0 and 1. The v predicted becomes 1 when the curve reaches positive infinity, while y predicted becomes 0 when the curve reaches negative infinity. We can classify the result as 1 or YES if the sigmoid function output is greater than 0.5. We can classify the output of the sigmoid function as 0 or NO if it is less than 0.5. Assuming that we are using Logistic Regression to determine whether or not a person has a diabetic illness, if the output is 0.75, we can assume that a patient has a 75% risk of developing diabetes. The cost function is limited between 0 and 1 by the logistic regression hypothesis. As a result, we can't just rely on linear functions because they can have values more than 1 or less than 0, which isn't feasible according to the logistic regression.

$$0 \le h(x) \le 1$$

LR hypothesis expectation

The sigmoid function comes into play at this point. The sigmoid function is used in machine learning to transform any real number into a value between 0 and 1.

$$f(x) = \frac{1}{1 + e^{-(x)}}$$

Sigmoid function formula

c) Support Vector Machine:

Although SVMs are classified as classification tools, they can also be used to solve regression problems. Support vectors are the data points closest to the hyperplane. By computing margins, these places will aid in defining the separation line. These points are more relevant to the design of the classifier.

Multiple continuous and categorical variables can be handled with ease using SVM. To distinguish various classes. In multidimensional space, SVM builds a hyperplane. The distance between the two lines on the class points that are closest to each other are called as Margins. The perpendicular distance is calculated using the support vectors.

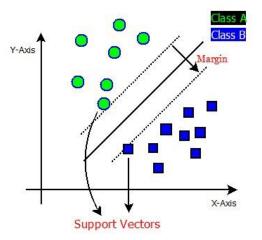


Fig. 2. Support Vector Classifier

d) Decision Tree Classifier:

A decision tree is a flowchart-like tree structure with an internal node representing a feature(or attribute), a branch representing a decision rule, and each leaf node representing the outcome. In a decision tree, the root node is the uppermost node. It learns to partition based on an attribute's value. It partitions the tree recursively, which is known as recursive partitioning. Making judgments is easier with this flowchart-like framework. It's shown as a flowchart diagram, which closely resembles how people think. As a result, decision trees are easy to understand and use.

When we implement the decision tree algorithms, the biggest task is selection of root node. So, to solve this task we have a technique called Attribute selection measure or ASM. Two popular techniques for ASM are:

a)Information Gain

b)Gini Index

Information Gain: It calculates the changes in entropy after the dataset has been segmented by attribute.

Information Gain = Entropy(n) - [(Weighted Average) * Entropy(Each feature)]

Information Gain Formula

Entropy: It measures the impurity in a given dataset.

 $Entropy(n) = -P(yes) * \log 2 P(yes) - P(no) * \log 2 P(no)$

Where,

n = total number of sample in the given datatset

P(yes) = probability of "yes"

P(no) = probability of "no"

Gini Index: It measures the purity or impurity of features while creating the decision tree.

 $Gini = 1 - sum(pi)^2$

Gini index formula

e) Random Forest Classifier:

It's technically a decision tree ensemble method based on a randomly divided dataset. A group of decision tree classifiers is referred to as the forest. An attribute selection indicator such as gain ratio, information gain or Gini index is used to generate individual decision trees for each attribute. Each tree is built using a different random sample. In a classification problem, each tree votes, and the top few classes are chosen as the final result. The final outcome of regression is the average of all tree outputs. It is both simpler and more powerful than previous non-linear classification techniques.

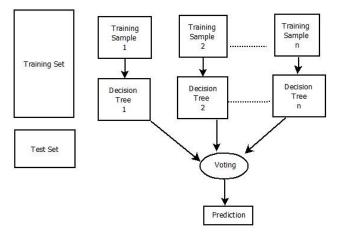


Fig. 3. Random Forest Classifier

II. Architecture Overview

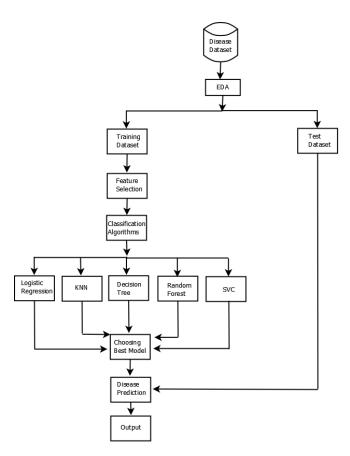


Fig. 4. Proposed Model

For our project, we experimented with various algorithms to build our predictive model the most accurate. Our main aim was to compare and figure out the most perfect predictive algorithm for each disease like Diabetes disease, Cancer disease, Liver disease, Heart disease, and Kidney disease. The first algorithm that we used was KNN. Next, we used Logistic Regression, followed by Support Vector Machines, Decision Tree Classifier, and Random Forest Classifier on every disease. The algorithms were implemented on the Kaggle and UCI datasets. To deliver an accurate and dependable experience to our consumers, we have made sure that we compare all algorithms and choose the best one for each condition in our web app.

We experimented with five different algorithms on every dataset. We have performed hyperparameter tuning and feature scaling on every dataset and out of all the algorithms, the one with the highest accuracy was chosen by us for the prediction. We pickled the best model and then we made our web app using HTML, CSS and JavaScript and integrated this pickled model with our web application using flask framework. We made the user input form to take the input from the user based on his/her test report. For each disease, based on the features present in that particular disease. We created APIs for each disease so that when the user submits the form, we can process the data entered by the user in the backend using the best-fit model for that condition. Then we show the output on the screen and then for confirmation we also email the test result to the user on his registered email address.

In our proposed model, we have planned to incorporate various features like recommending medicines which could give the patient immediate relief. These include some basic medicines like paracetamol, cough syrup, etc. Along with this, we also plan to include some home remedies. We would also recommend a suitable balanced diet which would aid in a faster recovery of the patient. A list of doctors and location along with directions to the hospital has also been added onto our model. In the near future, we would also be able to call the doctors or chat with them directly on our app.

4. RESULTS AND DISCUSSIONS

A) Experimental Setup

All of the experiments were run on a machine with an Intel core i7 processor, Windows 10(64-bit) with 16GB of RAM. For this project, we have used HTML, CSS and JavaScript for the frontend. For the backend, we have used MySQL & flask framework. Along with these, we have also used essential tools like vs code and jupyter notebook.

B) Comparison results & Analysis

<u>Diabetes</u>

We compared five different algorithms namely Gaussian Naïve Bayes, Logistic Regression, K-Nearest Neighbour, Support Vector Classifier and Decision Tree for the diabetes disease. For evaluation of these models we used Accuracy and CV Scores. On comparing these scores for different algorithms, we concluded that KNN gave the highest accuracy of 77.21%. While performing the EDA, there were no null or duplicate values as we fetched the preprocessed datasets[9] for this disease.

<u>Heart</u>

The heart dataset [10] that we have used contained 76 attributes but it did not seem meaningful to use all these features so we performed an extra tree regressor classifier function and selected the top 14 features out of it for a faster prediction. On comparing four algorithms, we figured that the Logistic Regression gave the highest accuracy of 90.25%.

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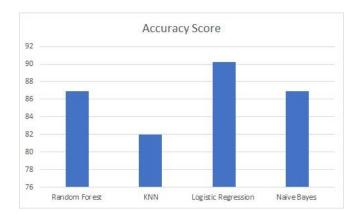


Fig. 5. Heart Accuracy Score comparison

Liver

Since we saw a rise in the cases of liver diseases due to an increase in consumption of alcohol, inhalation of harmful gases and intake of contaminated food, we found it necessary for us to include the liver disease prediction system on our software. The dataset that we used[11] for our prediction contained 416 records of liver patients and 167 records for which the liver disease was not detected. We compared different algorithms using different evaluation criteria like accuracy score, precision, recall and f-1 score and found that Random Forest gave the best prediction for this disease with a recall score of 97%.

<u>Cancer</u>

In this dataset[12], we had 32 features and 569 patient records. Out of these 569 records, 357 were Benign and 212 are Malignant. We performed exploratory data analysis and found that there were no null values in any record. While building the model, we also performed Extra tree regression to explore the most important features for the prediction.

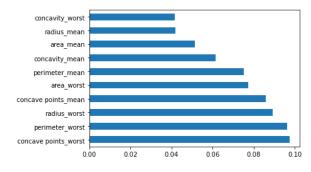


Fig. 6. Extra Tree Classifier

Decision Tree classifier outperformed all the other algorithms like SVC, KNN, LR and Random Forest with an accuracy of 98.62 percent.

<u>Kidney</u>

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This dataset[13] contains 25 features like red blood cell count, white blood cell count, etc. Out of the 25 features we only chose the first 7 features as we observed that the other 18 features had very low importance. This dataset had a lot of null values. We replaced the null values by taking the mode of that feature. We performed OneHotEncoding on various features and encoded various categorical features with 0s and 1s. For an example, we converted Notckd to 0 and ckd to 1. In this model, we observed hat Random forest performed the best with an accuracy score of 96.45%.

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dataset:

dataset:

[9] Diabetes

https://www.kaggle.com/datasets/uciml/pima-indiansdiabetes-database

[10] Heart

https://www.kaggle.com/datasets/johnsmith88/heartdisease-dataset

[11] Liver dataset: https://www.kaggle.com/uciml/indianliver-patient-records

[12] Cancer dataset: https://www.kaggle.com/datasets/uciml/breast-cancerwisconsin-data

[13] Kidney Dataset: https://www.kaggle.com/datasets/mansoordaku/ckdisease