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Discovery of Approaches by Various Machine learning Ensemble Model and Features Selection Method in Critical Heart Disease Diagnosis

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Abstract

Heart disease is one of the leading killers that are widely recognized throughout the globe. Large volumes of clinical data are stored in a variety of systems and biological equipment at hospitals. It is essential to grasp the facts of heart disease in order to improve forecast accuracy. In this paper, experimental evaluations have been conducted to assess the effectiveness of models created utilizing classification algorithms and relevant attributes selected using Extra Tree feature selection procedures. Several people suffer originated at heart disease globally. It is necessary to use data mining and machine learning techniques to extract new insights originated at this data. Analyzing medical data sets and diagnostic issues, including heart disease, involved the use of a number of categorization approaches. However, these methods were only performed on small, balanced data; then, the features must be derived originated at trial and error. Additionally, several sectors have made substantial use of feature selection techniques to enhance classification performance. This paper aims to propose a comprehensive approach to enhance the prediction of heart disease using several machine learning methods such as Bagging, Support Vector Machine, Multilayer Perception and Gradient Boost with feature selection methods such as extra tree. The experimental results showed improvements of prediction. Bagging received scores in training model on 80% data sample as 99.08, 73.19, 67.20, 69.20 and 80.66 of accuracy, precision, recall, F1-score and roc respectively. In the experiment, we have tested on 20% data sample for each classifier algorithms and find Bagging classifier model perform higher score for accuracy, precision, recall, F1-score and roc 92.62, 48.44, 39.63, 41.89, 66.82 respectively.

1. Introduction:

Advanced statistical techniques may be used to uncover relevant databases utilizing learning techniques, which are relatively new and promising technologies. Many scholars are interested in the relatively young and emerging field of medical data mining and knowledge exploration (Chauhan et al.).

With greater medical data collection, doctors may be able to make more accurate diagnoses. Cardiovascular illnesses have been shown to have the greatest death rates among these conditions in the majority of nations globally (Fu et al.).

Analysist identify illnesses more accurately from



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disease dataset. Various researchers has been used UCI repository disease dataset. They observed disease features by various features selection techniques and predicted by learning algorithms. Authors used various classifiers for training and testing purpose for gather more information from dataset (Jindal).

The first and most common method for choosing features originated at labeled data is supervised feature selection. The filter, wrapper, and embedding techniques are used in supervised feature selection methods. In the preprocessing step, Extra tree methods are applied regardless of the learning algorithm. This method determines the score based on statistical measures and their dependence on the class label for each characteristic (Gnaneswar and Jebarani).

2. Related Work:

In this research paper, we have studied various previous year research works on different dataset. Various authors used many selected machine learning and deep learning algorithms and test algorithms performance. Some used algorithms are listed in table 1, the literature makes it clear that classifier training using relevant features chosen by various feature selection techniques improves the classifier's accuracy.

3. Methodology:

The ML research community frequently uses the UCI data set. It has 1025 records total, with 14 distinct variables. However, just 14 of the factors [Age. Sex. Chest Pain. Resting Blood Pressure. Cholesterol. Fasting Blood Sugar.

Restecg. Thalach. Exang. Oldpeak. Slope. Ca. Thal. And Class.] Have been found to be significantly associated with heart disease. The descriptions of each variable are shown in table 2.

3.1. Data Description:

The dataset must be preprocessed in order to effectively reflect the data quality. Preprocessing methods used on the dataset include removing missing values originated at features. Data preparation methods like missing value management are used to make a smooth dataset.

3.2. Proposed Work:

With the use of fewer characteristics in a dataset of heart illness, the suggested study aims to improve

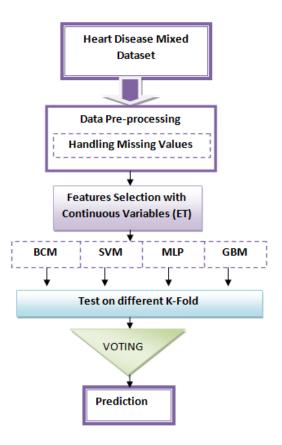


FIGURE 1. Representation of proposed work on heart disease using classifiers

classification accuracy. Figure 1 shows the classification scheme for heart disorders. The components of the recommended framework are described in the sections that follow.

The dataset are organized from UCI repository for training and testing of classifiers. When this dataset was created, there were 14 features and 1025 instances. The label of the output characteristic (num) is separated into two classes, listed in figure 1, The experimental procedure was created to assess how well the search algorithms and strategies worked together when they were applied to the following classification models: Gradient Boost, Multilayer Perception, Support Vector Machine, and Bagging. The results of our application classification models with 10-fold cross validation were given in improvements and decreases in accuracy with respect to epoch values. In the end, we examined the experimentation's outcomes. The primary objective, as previously stated, is to improve the ability to forecast heart disease. But this study also of a helpful manual for picking the optimum feature selection method for various classification models.

Year	Author	Dataset	Techniques		
2019	Ravindhar N et al. (Hasan et	UCI + machine	LR. NB. FK-NN.	BPNN : 98	
	al.)	learning	K-Means. and		
			BPNN.		
2020	Magar R et al. (Ravindhar et	UCI + machine	LR. SVM. NB.	LR:83	
	al.)	learning	And DT.		
2020	Rajdhan A et al. (Rajdhan et			RF : 90	
	al.)	learning	NB.		
2020	Shah D et al. (Rajdhan et al.)			KNN : 90	
		learning	And DT.		
2021	Jindal H et al. (Shah, Patel,			KNN : 89	
	and Bharti)	learning	KNN + LR .		
2021	Pandita A et al. (Pandita et			KNN : 89	
	al.)	learning	NB. And RF.		
2021	Akella A et al. (A. Akella		GLM. DT. RF.	87.64% NN : 93	
	and S. Akella)	learning	SVM. NN. And		
			KNN.		
2022	Gupta, C. et al. (Gupta et al.)		RF. DT. And LR.	LR : 92	
		learning			
2022	Truong, V.T et al. (Truong et		AB. ET. LR.	AB:90	
	al.)	learning	MNB. CART.		
			LDA. SVM. RF.		
			And XGM.		
2022	,	UCI + machine	SVM. NB. And	DT : 90	
	al. (Abdalrada et al.)	learning	DT.		
2022	Singh, N. et al. (N. Singh and		KNN. DT. LR. NB. LR : 92		
	Bhatnagar)	learning	And SVM.		

TABLE 1. Representation of previous work on heart disease using machine learning

3.3. Methods Description:

In this experiment, we have used various classifiers techniques and features selection techniques, describe as below:

3.3.1. Feature Selection Technique:

Without bootstrapping, the Extra Tree Classifier (Isabona et al.) creates randomised multiple decision trees with various sub-samples. [0.24 0.03 0.06 0.110.11 0.030.04 0.10 0.03 0.09 0.05 0.06 0.04 0.02]listed in figure 2.

The issue of over fitting is avoided. The effectiveness of data mining techniques is decreased when inappropriate characteristics are included in the dataset. The best feature combinations must first be correctly identified before the best approaches are determined. It is anticipated that accuracy and other performance measures would increase when the optimum feature combination is applied over the methodologies. The process of creating a new set of features originated at the original features is known as feature extraction. In order to lessen the impact of duplication and inconsistency, it integrates the original characteristics (D. Yadav et al.).

3.3.2. Machine Learning Classifiers:

Data categorization is still a desirable area in machine learning. The next subsections give a quick introduction to some of the recently suggested algorithms that have been studied in a variety of fields, such as Gradient Boost, Multilayer Perception, and Support Vector Machine Bagging.

Support Vector Machine:: The Support Vector Machine technique is used in this research study to forecast human heart disease. We choose the SVM method for the prediction process because, in comparison to other machine learning algorithms, it will provide a higher level of accuracy. A graphical description of the algorithm's accuracy is presented. The results of the provided data are displayed graphically in the

S.No	Variable	Description	
1	Age	Age regarding the person in years	
2	Sex	Gender 1- Male, 0- Female	
3	Chest Pain	1- typical angina, 2- atypical angina, 3- non anginal pain, 4- asympomatic	
4	Resting Blood Pressure	Blood Pressure in mm Hg during hospital admission	
5	Cholesterol	Serum cholesterol in mg/dl	
6	Fasting Blood Sugar (fbs)	If $(fbs>120mg/dl)$ 1 = True, 0 = False	
7	Restecg	Electrocardiography 0- Normal, 1- may be some problem, 2- definite problem	
8	Thalach	Maximum heart rate	
9	Exang	Exercise induced angina 1- Yes, 0- No	
10	Oldpeak	Induced ST depression due to exercise	
11	Slope	Slope regarding the ST segment during peak exercise. 1- Upslop- ing, 2- flat, 3- downsloping	
12	Ca	Number regarding blood vessels coloured by fluoroscopy Values ranges originated at 0 to 3	
13	Thallium Scan	It is a method regarding analysing blood flow to heart muscles. 3= normal, 6= fixed defect, 7= reversable defect	
14	Class	It is the output or dependable variable 0= No heart disease, 1,2,3 and 4 represents the severity regarding the heart disease	

TABLE 2. Representation of heart disease dataset attributes description

section below (Gangwar and G. K. Pal).

Bagging:: This technique used as ensemble method in experiment. It is basically used to increase accuracy level in machine learning algorithms. Bagging technique reduce the over fitting in analysis and generate parallel way for all selected techniques. In statistical analysis bagging generate average accuracy level with low variance (D. Singh, H. Yadav, and Agrawal).

Multilayer Perception Model:: The suggested multilayer perception model was created with the express intention of lowering the confusion matrix and improving the precision of illness grouping based on severity. Originated at this point forward, the work suggests the multilayer perception model. The suggested MLP is set up so that the input layer is in charge of handling the training inputs, the hidden layers are accessible to consider weight modification, and lastly the output nodes are grouping the results into distinct categories (Isabona et al.).

Gradient Boosting:: A traditional feed forward neural network classifier called Gradient Boost uses the output mistakes to train the network. Three levels

of nodes make up Gradient Boost: the input layer, at least one or more hidden layer(s), and the output layer. The hidden layers are connected to the output layer by the input layer. Weighted values are used to process each layer. A Gradient Boost with a single hidden layer is depicted. Gradient Boost is a one-way error propagation method that has been trained and tested using back-propagation techniques (Gangwar and G. Pal).

4. Result:

In this experiment, we have used training sets 80% and testing sets 20%. The 10-fold build models are used for evaluating the accuracy, precision, recall, and F-score. The experimental setup used learning techniques in tables Gradient Boost, Multilayer Perception, Bagging, and Support Vector Machine.

5. Discussion:

shows the performance of all classifiers on different k-folds as k=6, 8 & 10 after applying Extra Tree features selection method. In comparison to the other classifiers, the findings indicated that Bagging had the best performance across all assessment metrics. In the experiment, we find on the k=10, each classi-

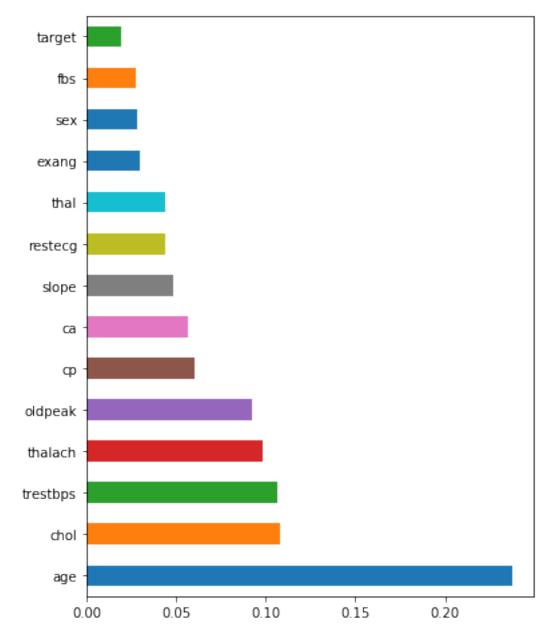


FIGURE 2. Representation of Extra Tree classifier work on heart disease

fiers perform better for accuracy, precision, recall, F1-score and roc. The Bagging classifier model (BCM) perform better compare to all other classifiers. Bagging received scores in training model on 80% data sample as 99.08, 73.19, 67.20, 69.20 and 80.66 of accuracy, precision, recall, F1-score and roc respectively, listed in table 3.

In the experiment, we have tested on 20% data sample for each classifier algorithms and find Bagging classifier model perform higher score for accuracy, precision, recall, F1-score and roc 92.62, 48.44, 39.63, 41.89, 66.82 respectively.

Our suggested methodology provides doctors with basic diagnosis for additional medical care.

We draw the conclusion that the methodology can increase the rate at which individuals with heart disease are identified. As indicated in table 3, a comparison of the top approaches and past research on predicting heart disease was done for this work using the dataset. The comparative findings demonstrated that the Bagging classifier connected with an additional tree feature selection approach as Extra Tree using Bagging as the basis classifier produced the best results.

6. Conclusions:

In this research we have used heart disease dataset with 14 attributes and 1025 instances. In order to

Predicted training model on 80 % sample dataset size of heart disease								
Folds	Classifiers	Accuracy	Precision	Recall	F1-Score	ROC_AUC		
	GBM	91.57	61.58	37.76	45.22	72.35		
V_{-10}	SVM	93.59	59.69	49.21	52.95	62.94		
K=10	MLP	92.49	66.65	64.90	67.21	77.73		
	BCM	99.08	73.19	67.20	69.20	80.66		
	GBM	90.17	61.10	40.58	48.09	64.15		
H O	SVM	89.86	70.96	71.11	70.36	82.19		
K=8	MLP	93.82	62.78	34.82	44.09	63.60		
	BCM	98.68	71.85	68.85	69.65	81.56		
	GBM	87.70	51.86	39.63	43.69	67.28		
	SVM	91.53	60.18	51.51	53.22	69.63		
K=6	MLP	87.28	41.54	41.51	40.52	60.88		
	BCM	93.25	58.30	30.88	37.31	63.91		
Predicted testing model on 20 % sample dataset size of heart disease								
	GBM	86.57	61.58	37.76	47.22	72.35		
K=10	SVM	82.72	41.48	36.51	37.79	62.11		
K =10	MLP	88.85	64.33	22.13	31.66	70.31		
	BCM	92.62	48.44	39.63	41.89	66.82		

TABLE 3. Representation of prediction model using heart disease

improve the diagnosis of heart's disease, this article evaluated the performance of a number of classifiers using additional Extra Tree feature choices. Accuracy, precision, recall, and F-score were some of the assessment criteria that were employed. The accuracy of heart disease prediction increased to 99% as a consequence of the additional tree feature selection approach using Bagging, according to the data. More machine learning and deep learning techniques may be used in the future in conjunction with these feature selection method combinations. To enhance the accuracy of Heart's disease prediction, further characteristics selection techniques may be researched.

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