

Harnessing Data Science for Diagnosis in Health

ISMP DATA SCIENCE SCHOOL BENIN, 2022



Short bio



- PhD in computer science and networks
- Associate professor at Université Alioune Diop, Senegal
- Member of the Medical Informatics and ICTL research group
- Holding and co-coordinating the AI4CARDIO project funded by AFD
- Project Engineer in the Responsible AI Lab hosted by KNUST and funded by IRDC and SIDA

Healthly vs. Unhealthly





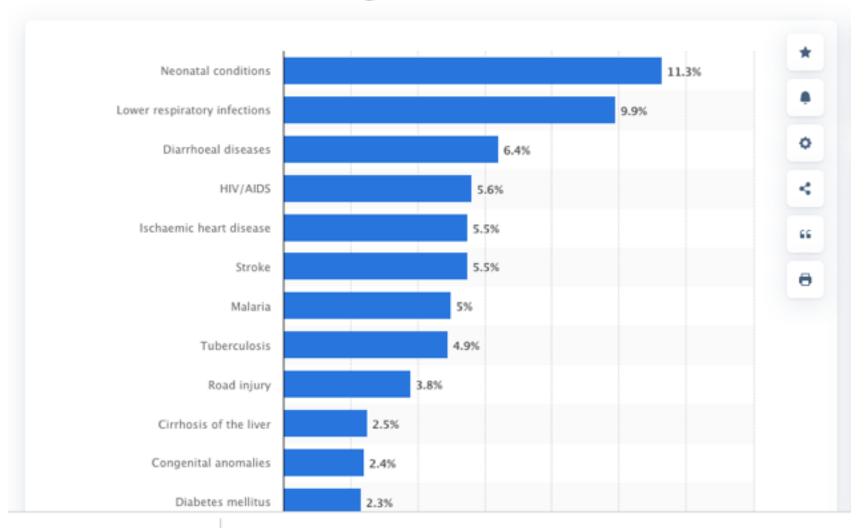


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But diseases are always there

Distribution of the leading causes of death in Africa in 2019



Source: https://www.statista.com/statistics/1029337/top-causes-of-death-africa/

Diagnosis is a key in disease identification and treatment

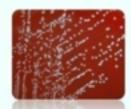
Early and accurate diagnosis of infectious disease is critically important because:

- Diagnosis can improve the effectiveness of treatments and avoid long-term complications for the infected patient.
- Undiagnosed patients can unknowingly transmit the disease to others. Early diagnosis can help to prevent or stop an outbreak.
- Widespread overuse and misuse of antibiotics contribute to antibiotic resistance. Diagnostic tests can determine when antibiotics are an appropriate treatment—and when they are not.

(Source : MEDICAL TECHNOLOGY life changing innovative)

Types of diagnostic methods





Isolation and identification of agent

Tests:

- Isolation of bacteria on media/ virus in cell culture
- ·Biochemical tests for bacteria/ Neutralization assays for virus

Merits and Demerits:

- . Gold standard test for most of the pathogens
- ·Labour intensive, time consuming, less sensitive

Nanotechnology based test

- Nanoarrays and nanochips
- Several pathogens with similar signs can be screened in a single chip

Techniques used: gold nanoparticles, nanobarcodes, quantum dots

- *Detects antigen or antibody
- •Common transducers:
- Needs high skilled persons
- High cost and sample processing charge

Serological tests

Tests:

•RBPT, STAT, ELISA, MRT

Merits and Demerits:

- Mass screening of animals
- ·Most tests are rapid and simple
- Specificity and sensitivity-less
- ·Cross reaction possible





Nucleic acid hybridization assay

- Radioactive probes- High sensitivity
- Short half life, risk of biohazard
- *Digoxigenin- non-radioactive probe
- •FISH- used to locate pathogens in the

Nucleic acid amplification

.PCR, RT-PCR, qPCR and other versions of PCR

Merits and Demerits:

- *Rapid, specific and sensitive
- ·Multiplex PCR- can aid in detection of multiple pathogens
- Requires post amplification protocols
- •Requires costly instruments and skilled workers

Biosensors

- ·Electrochemistry, fluorimetry, reflectometry

Pen-side test

Diagnosis of

disease

Tests:

·LAMP, LFA

Merits and Demerits:

- ·Easy to perform at field level
- ·Rapid, sensitive and specific
- No need of post amplification protocols

Recombinant antigen-based test

- ELISA, dipstick assay, LFA
- Sensitive and Specific
- ·Biosafety issues



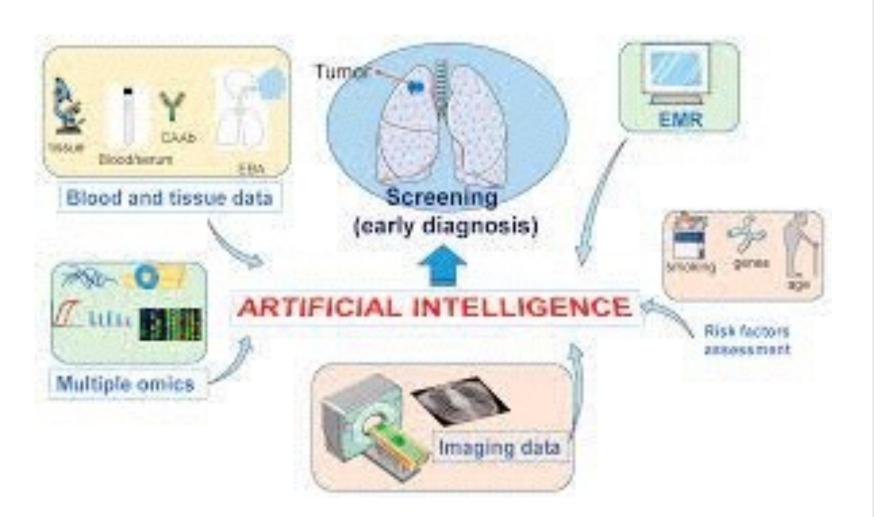


Challenges of the diagnosis of diseases in Africa

- Lack of appropriate diagnosis tools
- Lack of enough or well trained specialists



Al-based disease diagnosis



Outline





Use cases



Data Sources



Analysis methodology & Data Science Tools



Prediction of Malaria



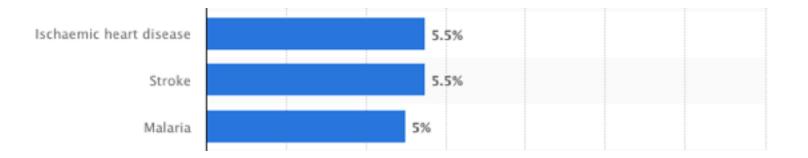
Prediction of risk factors for CVDs



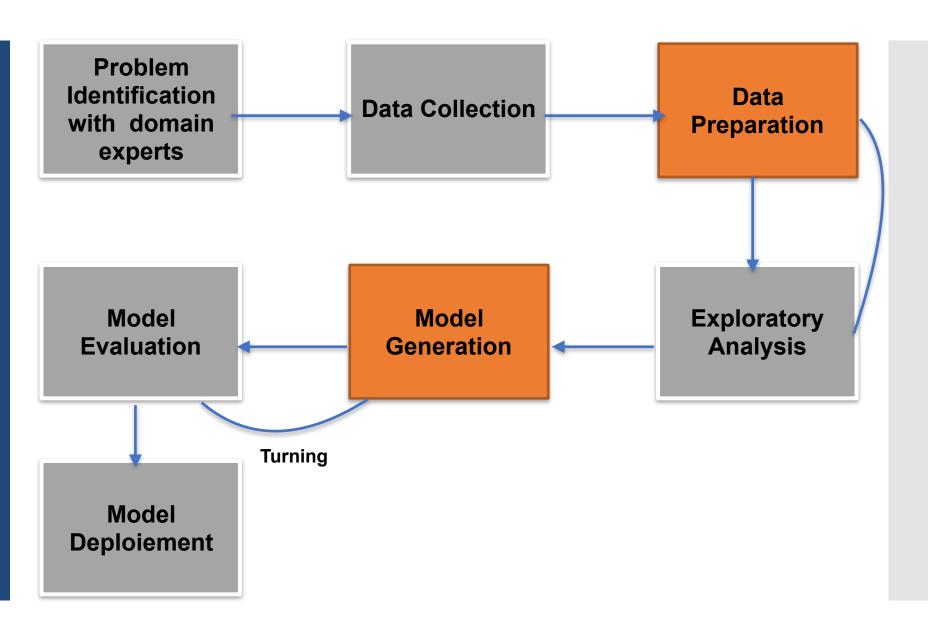
Challenges

Use cases

- Prediction of Malaria using ML algorithms
- Prediction of stoke



Analysis Methodology



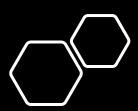




Used Data Science Tools





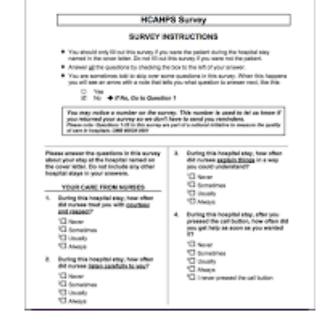


Data Sources

Two main data sources



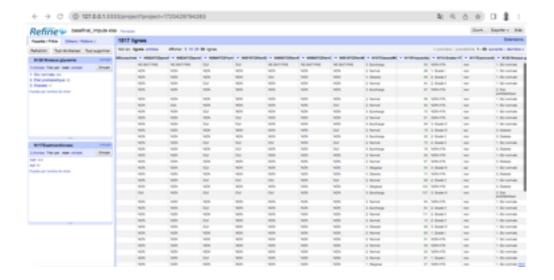
Existing patient records on registries



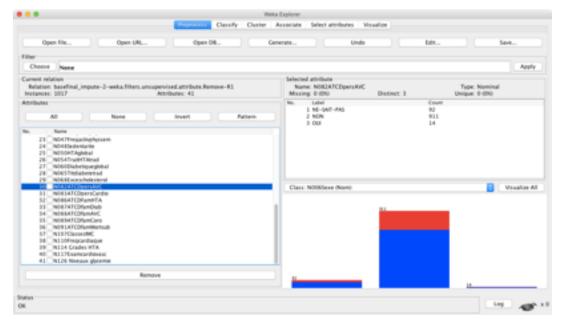
Surveys



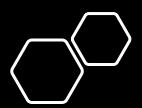
Demo



OpenRefine for data preprocessing (https://openrefine.org/)



Weka for exploratory analysis & Model Generation (https://www.cs.waikato.ac.nz/ml/weka/)



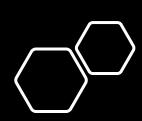
Can we do better with ML models than Rapid Diagnostic Test using sign and symptom data?



Data description

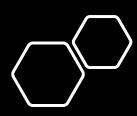
Variables	Observations	Variables types		Classes	
		Numeric	Boolean	Malaria	Not Malaria
16	21083	2	14	614	20469

Table 1. Main characteristics of our real-world dataset of patients in Senegal



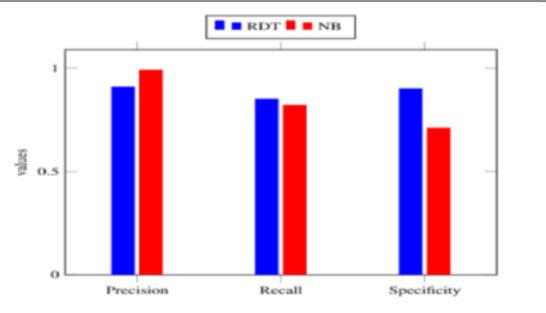
Data preparation

- Data cleaning and normalization
- Feature extraction based on experts of the domain
- Missing data imputation
- Over-sampling of data

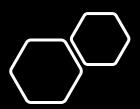


Models and performance

ML Algorithms	Precision	Recall	F1-score	AUC	Specificity
Decision Tree	0.99	0.84	0.91	0.76	0.58
Random Forest	0.99	0.84	0.91	0.76	0.60
Logistic Regression	0.90	0.78	0.88	0.84	0.75
Naive Bayesian	0.99	0.82	0.90	0.84	0.71
Support Vector Machine	0.99	0.86	0.92	0.80	0.62
Artificial Neural Networks	0.99	0.84	0.91	0.79	0.65

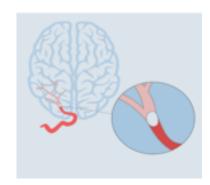


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Can we predict accurately the type of stroke based on risk factors with ML?

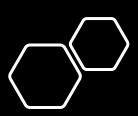






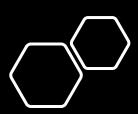
Data description

Name	Value
Rows	1,018
Columns	43
Discrete columns	32
Continuous columns	11
All missing columns	0
Missing observations	1,210
Complete Rows	543
Total observations	43,774



Data preparation

- Removal of useless attributes
- Data values normalization
- Missing data imputation
- Handling inconsistencies



Models & Performance

Algorithm	Accuracy (%)		
K-Nearest Neighbors	95		
Random Forest	93		
Decision Tree	86		

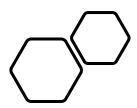
General Challenges

Deploiement and use:

- Design the physical equipment that will host the model
- Evaluate the model in a real condition
- Train doctors

Other challenges:

- The lack of in-domain datasets.
- Sharing the data and privacy.
- Interpretability of the models.
- Sensitivity of medical scenarios



Thanks Any questions?

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https://sites.google.com/a/uadb.edu.sn/mlba/

