A Survey on Data Mining Algorithms in Prediction of Psychiatric Disorders

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Abstract: The medical diagnosis and automated decision making process by computer algorithms based on data from our behaviors is fundamental to the digital economy. Researchers have been using various data mining techniques and statistical analysis to improve the disease diagnosis accuracy in medical healthcare. Psychiatric disorder is a highly prevalent condition associated with many adverse health problems. Several data mining algorithms with better classification accuracy will provide more sufficient information to identify the severe psychiatric disorders. The objective of the proposed research is the comparison of different data mining algorithms and to predict the acute psychiatric disordered patients more accurately. After feature analysis, models by five algorithms including C5.0, Neural Network, Support Vector Machine (SVM), K-Nearest Neighbor (KNN) and Naïve bayes developed and validated. C5.0 Decision tree has been able to build a model with greatest accuracy 90.77%, KNN, SVM, Neural Network and Naïve Bayes have been 73.85%, 83.08%, 77.93 and 90.71% respectively.

Keywords: Data mining, Support vector machine, Naive Bayes, Decision tree, K-Nearest Neighbor

1. Introduction

With the advancement of science, the volume of accumulated data in different fields has been increased that it is well known the explosion of information [1]. When analyzing the accumulated data, they could reveal their hidden useful information. Data mining is a process of analyzing and identifying previously unknown and hidden patterns, relationships and knowledge from large datasets that was not possible with traditional techniques [2]. Performing data mining reveals useful relationship existed among data, and this rule can apply for right decision making [3],[4]. Algorithms apply complex techniques and statistics to create models that make decisions. One of the most predictive data mining techniques is classification. Predictive models have the specific aim of allowing us to predict the unknown values of variables of interest given known values of other variables. Neural Network, support vector machine, Naive bayes and decision Tree are different form of classification algorithms [5].

In medical domain, the major challenges that healthcare organizations are facing is provision of quality services. Quality service points to diagnosing a patient accurately and then providing proper treatment. An intelligent computerbased information and decision support system can achieve great accuracy in prediction and classification of psychiatric disorder. Data mining plays an important role in psychiatric field. The study of classification involves the discovery of hidden patterns from existing clinical data to identify the boundary between the psychiatric and healthy individuals [6]. Automated decision making algorithms impact the daily life of those with and without mental illness. Mental Disorder is a very common mental health problem worldwide. The World Health Organization estimates that 121 million people currently suffer from depression, with 5.8% of men and 9.5% of women experiencing a depressive episode in any given year[7]. In light of these high rates of depression, it is a cause for concern that mood disorders are the most common psychiatric condition associated with suicide[8]. This article utilizes district, block and village level data on diagnoses and treatment of mental illness. The study conducted on various sources of public information on mental health and substance use disorder identifies and treatment. Mental illness is not equally distributed across the district, with higher rates of serious psychological stress and major depressive episodes in rural area, as compared to developed area. For this study real world data's are collected from various hospitals in Idukki district.

2. Related Works

There are many challenges during algorithm development. Many algorithms make decisions by finding associations, classifying and predicting. Different machine learning techniques, such as classification and regression tree method, Bayesian hierarchical[9] and Support Vector Mechanism[10] have been used for medical diagnosis process based on the extracted features derived from various attributes. Various algorithms with data extraction, human decision is an essential component of each stage of the development and interpretation, including choosing criteria and defining assumptions, optimization functions, and selecting training data[11,12]. Hlaudi Daniel et al.[13] used various classification algorithms for risk prediction in medical field specifically for heart disease. In this paper J48 has better accuracy of 99.07% when compared to other algorithms like Naive bayes - 97.22% and Bayes Net - 98.14%.Peter and Somasundaram [14] used pattern recognition and data mining techniques for risk prediction in medical field specifically for cardiovascular disease. It is concluded that Naive Bayes has better accuracy as compared to other algorithms. The proposed technique requires the input attribute set in ASCII file format and use of only numerical attributes. Aditya Methailaet al.[15] used various algorithms and combinations for effective heart attack prediction. In this paper Decision Tree has performed with 99.62% accuracy by using 15 attributes compared to Naive Bayes 96.53 % and Artificial Neural Network 88.3%. The researchers [16] used the data mining algorithms decision trees, naive bayes, neural networks, association classification and genetic algorithm for predicting and analyzing heart disease from the dataset.

Many researchers have used decision trees and its combination with other algorithms to solve various biological problems [17]. Srinivas et al. [18] analyzed various data mining techniques including rule-based, decision tree, Naive Bayes and artificial neural network and stated that their proposed system can easily answer the complex queries for the pre-diction of heart attack. The proposed technique used only 15 attributes for prediction, and its accuracy varies from dataset to dataset. Purushottam et al. [19] proposed a heart disease prediction system using various classification algorithms. The proposed system helps medical practitioners in decision making based on various parameters and its accuracy is 86.7%. The accuracy and performance of various well known algorithms on Heart disease data set are SVM -70.59%, C4.5 -73.53% and KNN - 76.47%. Ghumbre et al. [20] presented a heart disease prediction system using radialbased function network structure and support vector machine. The analysis shows that the results obtained from support vector machine algorithm are equivalently as good as radialbased function network. This technique is affected by data acquisition method used for input of dataset.Jabbar et al. [21] used an associative classification algorithm for the prediction of various diseases. The algorithm uses genetic approach for prediction which results in higher accuracy and interestingness. First, an associative classification is used to classify the dataset with labeled classes and rules are collected from the training dataset. These rules are then organized in a form to construct a classifier. The genetic algorithm solves the optimization problems efficiently. Chitra and Seenivasagam [22] adopted a supervised learning algorithm to predict heart disease in a patient at early stage. The proposed classifier is named as cascaded neural network (CNN) with hidden neurons. Nikhar S., [28] presented a review of disease prediction for healthcare system using data mining techniques. Different data mining classification techniques such as Naive Bayes and Decision Tree are used here with better accuracy. Some of the important data mining approaches in health care are given in Table1.

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Table 1: Data Mining	Approaches in H	Healthcare

Table 1. Data Winning Approaches in Heartheare				
		Specif	Sensit	Асси
Author/year/r		icity	ivity	racy
eference	Technique	(%)	(%)	%)
Bashir Saba	Decision tree	85.71	63.16	72.7
et al.	Naive Bayes	92.86	68.42	78.7
2014[23]	Support vector	78.57	73.68	75.7
Ghumbre et	Support vector	88.50	84.06	85.0
al. 2011 [20]	Radial basis	82.10	82.40	82.2

Tu et al. 2009	J4.8 decision tree	84.48	72.01	78.9
[24]	Bagging algorithm	86.64	74.93	81.4
	C5.0	90.9	95.23	93.0
	Support vector	90.9	80.95	86.0
Abdar M. et	K nearest	88.63	88.09	88.3
al. 2015 [25]	Neural network	86.36	73.80	80.2
Chitra et al.	Cascaded neural	87	83	85
2013 [22]	Support vector	77.5	85.5	82
	Gain ratio	81.6	75.6	79.1
Shouman et	Naive Bayes	80.8	78	83.5
al. 2013 [26]	K nearest	85.1	76.7	83.2
Bashir Saba	Naive Bayes	76.82	77.51	76.6
et al. 2014	Support vector	87.94	74.95	78.5

3. Dataset Information

The database is related to the data set of psychiatric patients in different areas of Kerala. The database contains 32 attributes, but we have used only 11 of them in order to obtain the accurate results using less number of feature space. The survey used uniform sample design, field protocol for data collection and physical measurements to facilitate comparability across the state and also to ensure high quality data. The data was collected using a questionnaire. Two types of questionnaire - one at household level and another for individual level were used for the survey. Table2 shows the selected psychiatric patients dataset attributes.

Table 2: Patients Related Data

Variable	Description	Possible Values
Sex	Patients Gender	{Male, Female}
MST	Marital Status	{ single, married, widowed, separated }
LOC	Living Location	{village, town, city}
PAT	Patients Attitude	{positive, negative, neutral}
SAH	Substance Abused Habit	{yes, no}
AGE	Age classification	{ 14 - 29, 30 - 44, 45 - 60, above 60
ELE	Energy Level	{healthy, unhealthy, average}
RCY	Religiosity	{very high, high, medium, low}
BHV	Behavior	{Exhibitionism, Anxiety, silent, violent}
		{middle,High school, secondary, graduate, post-graduate,
PQU	Qualification	higher study}
PFS	Patient family status	{Joint, Individual}
PAI	Family annual income	{ poor, medium, high}

In the light of success for different data mining techniques, and specifically ensemble techniques, it is very beneficial to consider ensemble techniques for the disease diagnosis and prediction. Therefore, we have proposed an ensemble framework based on majority voting scheme that combines individual classifiers and achieves higher accuracy for diagnosis of highly psychiatric.

4. Proposed Framework

The proposed framework is based on a novel combination of two heterogeneous classifiers: Decision Tree and Naïve Bayes. Decision tree is like a flowchart where every non leaf node is test on an attribute, every branch of node represents the outcome of test and every leaf node is class label. Root node represents all data at start [29]. Decision tree classifier does not require any domain knowledge and uses tree like graph. It calculates the conditional probabilities for research analysis and chooses the best alternative traversing from root to leaf and indicates unique class separation [30]. The Naïve Bayes classifier focuses on the rule that presence or absence of a disease depends on a feature itself. It assumes that features ate independent of each other. Supervised learning algorithm can be used to train the probability model of Naive Bayes classifier [31].

4.1 Experiments and Results

We have used five classifiers and trained them using psychiatric dataset to classify them as psychiatric or severe psychiatric. The accuracy, sensitivity and specificity of the classifiers are measured to evaluate the performance of proposed ensemble framework with individual classifiers. Sensitivity indicates the number of persons that are correctly classified healthy in the dataset whereas specificity indicates the proportion of patients that are correctly classified as sick. Mathematically:

Specificity=

True Negatives + False Positives

True Negatives

Accuracy measures the proportion of correct predictions made by proposed framework against actual class label for test data. Mathematically:

Accuracy= TruePositives+TrueNegatives

Decision tree generates crisp rules that are used to classify data into psychiatric or critical psychiatric individuals whereas Naïve Bayes and SVM are first used to train the classifier and then trained classifiers classify test data into two classes. The results of sensitivity, specificity and accuracy for the five individual classifiers are given in Table 3.

5. Results and Discussion

This section presents the experimental results and analysis done for this study. Here we aim to provide a comprehensive evaluation over different classification algorithms including: Decision Tree, Support Vector Machines, k-Nearest Neighbors, Neural Network and Naive Bayes. Data divided into train set and test set. The training set is used to build the classifier and test set used to validate it. Model development is conducted in two main steps including model fitness and model accuracy. To calculate the model fitness criteria we used the data of training set; however, to compute the model accuracy measurements, data of testing set is applied which is merely much more valuable to judge about our models accuracy. Related results of these experiments are demonstrated in Table 3.

Table 3: Comparison of proposed Ensemble Technique

Algorithms	Specifi	Sensitivit	Training
-	city	У	Accuracy
C5.0	98.99 %	71.40 %	90.77 %
SVM	73.31 %	61.11 %	83.08 %
KNN	86.71 %	56.45 %	73.85 %
Naive Bayes	86.71 %	76.50 %	90.71 %
Neural Network	66.7 %	58.5 %	77.93 %

C5.0 Decision tree has been able to build a model with greatest accuracy since the model prediction accuracy is 90.77%. Model accuracies obtained from other classifiers are different as this value for SVM, KNN, Naïve Bayes and Neural network have been 83.08%, 73.85%, 90.71% and 77.93% respectively.

6. Conclusion

The widespread acceptance and growing dependence on technology and decision making, reflect the numerous positive impacts to society. However, people with mental illness may be most vulnerable to the risk related to errors and basics in algorithms. The rapid adaption of technology has blurred traditional boundaries, leaving unresolved what should be public versus private medical versus non-medical data and human versus machine decision making. The purpose of this study is comparison of different machine learning algorithm on prediction of more psychiatric disordered person with more accurately. In this study, KNN, SVM, C5.0, Neural network and Naïve Bayes were implemented on the given dataset of 14 attributes. Inconsistencies and missing values were also resolved before the model construction. Based on investigated methods, decision tree has achieved the best performance. There are different issues that influence the performance of applied models including type of problem and type of input data. Decision trees are able to generate understandable rules and can perform classification without requiring much computation and clearly indicate that which fields are most important for prediction or classification.

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