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Predicting 'Attention Deficit Hyperactive Disorder' using large scale child data set

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**Predicting 'Attention Deficit Hyperactive Disorder' using large scale child
data set**

A Writing Project Report

Presented to

The Faculty of the Department of Computer Science

San Jose State University

In Partial Fulfillment

Of the Requirements for the Degree

Master of Science

By

Arpi Shah

Dec 2015

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The Designated Project Committee Approves the Project Titled
Predicting 'Attention Deficit Hyperactivity Disorder' using large scale child data
set

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SAN JOSE STATE UNIVERSITY

DEC 2015

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ABSTRACT

Attention deficit hyperactivity disorder (ADHD) is a disorder found in children affecting about 9.5% of American children aged 13 years or more. Every year, the number of children diagnosed with ADHD is increasing. There is no single test that can diagnose ADHD. In fact, a health practitioner has to analyze the behavior of the child to determine if the child has ADHD. He has to gather information about the child, and his/her behavior and environment. Because of all these problems in diagnosis, I propose to use Machine Learning techniques to predict ADHD by using large scale child data set. Machine learning offers a principled approach for developing sophisticated, automatic, and objective algorithms for analysis of disease. Lot of new approaches have emerged which allows to develop understanding and provides opportunity to do advanced analysis. Use of classification model in detection has made significant impacts in the detection and diagnosis of diseases.

I propose to use binary classification techniques for detection and diagnosis of ADHD.

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INTRODUCTION

Attention deficit hyperactivity disorder (ADHD) is one of the most common mental disorders diagnosed in the children. It affects around 9% of American children every year. It has been diagnosed in 5.9 million children till date. The cause of ADHD is not known. Some say that heredity, chemical imbalance; change in brain, poor nutrition or toxins cause it.

Symptoms of ADHD can be grouped into three categories, namely Inattention, Hyperactivity and Impulsivity. If a child is careless, cannot concentrate, doesn't listen and is easily distracted, or if the child easily loses things and forgets about tasks and daily activities, then he likely has ADHD. If the child shows the sign of hyperactivity such as not being able to sit at one place, talking excessively or squirming, then he might have ADHD. If the child is having trouble waiting for his turn, answers abruptly or interrupts others or shows impulsivity, then he has ADHD.

Many symptoms of ADHD can be managed with stimulants or by imparting special education and training

Diagnosis of ADHD is one major challenge facing the country today. There is no single test that can diagnose ADHD. A patient's healthcare team might include a doctor, a psychoanalyst and a social worker. The doctor may want to interview parents, relatives, teachers and family members, observe personality trends in child's behavior, and administer questionnaires or rating scales to measure symptoms of ADHD. He might also conduct psychological tests if needed. This gives the doctor insight into how symptoms of ADHD affect daily moods, behavior, productivity, and lifestyle habits. Doctors may also ask for CT scan and MRI for brain abnormalities, blood test for lead levels and thyroid disease detection, hearing and eyesight test. This might consume lot of time and the situation of child may worsen over time.

I propose to detect ADHD by using machine learning binary classification technique. This will speed up diagnosis of ADHD.

BACKGROUND

ADHD is a neurobehavioral disorder commonly found among children. Children with ADHD show symptoms of impulsivity, inattention, distractibility and hyperactivity. There is no single laboratory test to detect ADHD which makes it difficult to diagnose it. For a child to be diagnosed by ADHD, he must meet the official symptom guidelines. The child is also analyzed over his behavior and reactions in different situations. Doctors also obtain information about the child's behavior from teachers and parents. The child might also have to undergo several tests as guided by the doctor. Even after doing all this, doctors believe that defect is either over diagnosed or under diagnosed in several children. All these problems led me to use machine learning techniques to detect if a child has ADHD or not.

Machine learning is a process of analyzing data to generate a model. This model represents known patterns and knowledge which is applied to new data for detection of a disease. In the project, data is labeled according to the positively diagnosed ADHD records and negatively diagnosed ADHD records. Data is present in the form of text. It is divided into training and test sets. Training set consists of training examples which is used to learn the classification model and test set consist of test examples which is used to test the trained model.

The trained, tested and evaluated model is then used to predict if a child has ADHD or not. This type of learning is called supervised machine learning and I am going to employ the same in my project. I have used two machine learning algorithms in project.

Naive Bayes is a generative model as it estimates joint probability for the features and label from the training data. It works well when there is no correlation between the data.

Logistic regression, on the other hand is discriminative model which computes individual probability for the features and label from the training data overcoming the drawback of dependence in features.

Models are built on Weka and Apache Spark. Weka provides a framework with a collection of machine learning algorithms which can be applied conveniently to the dataset. Apache Spark is a fast and general engine for big data processing, with built-in modules for machine learning. Machine learning has been performed on Amazon Web Services - Elastic Map Reduce which provides convenient way to create and manage clusters and develop and run Spark applications over it.

PROBLEM

The problem is to predict if a child will have ADHD or not. To detect whether the patient has ADHD or not is a challenging task. Diagnosing ADHD is difficult during the initial stages because many of the early symptoms can be caused by other more common health conditions. There's no single test for ADHD, and diagnosis is done by observing person's symptoms and behavior. There can be delays in diagnosis as sometimes the doctors themselves need some time and observation to be sure of the situation, particularly in cases where the condition progresses very slowly. Thus, there is a need for mechanism that can accurately detect ADHD.

It is a Machine Learning problem, chosen to be solved using Supervised Learning techniques. The problem of detection of whether or not a child has ADHD belongs to binary classification domain where the result is either yes or no.

Dataset used in the project is obtained from Vaccine Adverse Event Reporting System (VAERS) which is a nation vaccine surveillance program which collects and shares information about adverse events following immunization. Dataset contains patient's symptom stories. The problem is the presence of random

textual data and phrases, which makes the task of prediction very challenging. Moreover, the dataset requires being cleaned, filtered and restructured to make it useful. Special characters, language specifics and repetitions in data need to be dealt with carefully. There are some columns in the dataset which does not contribute to the purpose of detection and hence needs to be removed.

3.1 Dataset

Dataset is in the form of CSV files over the year range 1991 - 2015.

Dataset consists of attributes out of which attributes having primary importance are following:

Vaers_id:

The VAERS identification number is a sequentially assigned number used for identification purposes. It serves as a link between the data files.

Type - Numeric

Example - 66341

Symptoms:

Symptom text is recorded here. MedDRA Terms are derived from this text and placed in the VAERS Symptoms.

Type - String

Example - "12 hrs p/vax pt was having severe pain & swelling of left arm;
inflammation inc in size from elbow to back of scapula, (red, & hot to touch);
family MD treated w/DPh & PCN & APAP & ice packs;"

Sample instances of the dataset looks like below:

Vaers_id	symptom_text
66341	12 hrs p/vax pt was having severe pain & swelling of left arm; inflammation inc in size from elbow to back of scapula, (red, & hot to touch); family MD treated w/DPh & PCN & APAP & ice packs;
67305	pt recvd vax & had severe headache on same eve x 4-5 days;
68133	pt recvd vax; no outwards signs, just inc szs, ADHD, allergic to all foods, tics, loss of balance enuresis. Tourette's synd, diarrhea, some autistic tendencies, inmed sxs minimal;

Figure 1 : Sample of Dataset

The size of dataset is around 1.5 GB.

PROPOSED SOLUTION

4.1 Architecture of proposed solution

The process flow for predicting ADHD using Machine Learning is depicted below

Figure 2: Architecture of the proposed solution

Initially, the dataset is collected from VAERS in the **Data Acquisition** phase.

Dataset is in CSV format which can be easily used in Apache Spark. It is converted into text format to be used in Weka. During **Data Cleansing** phase, redundant and unnecessary information and noise is removed. Column for label/class is added according to be used in the machine learning algorithm. In all, dataset is cleansed and amended so that it can be easily consumed by different machine learning algorithms and framework. After data cleansing, cleaned dataset is divided into 2 parts, namely training data and test data.

Training data contains the training instances which are used to train the model.

Testing data contains data which is used to test the model after it has been trained. Testing data does not contain the resultant column. Training set contains 66% of dataset instances whereas testing dataset contains 34% of dataset instances. Once train set is obtained, features are extracted and the model is trained over training set. After training the model, it is tested using test set. If the model does not produce satisfactory results, it is trained again by tuning the parameters. The process of **model testing** is continued until a satisfactory model is generated. After the **model** is tested over several iterations, it is delivered.

4.2 Data Acquisition

To satisfy the goal of predicting ADHD using machine learning techniques, it was important to find a data source which had data lying over a wide date range.

VAERS has data ranging over span of approximately 25 years specifically from 1990 to 2015. Dataset obtained from VAERS was available in the form of CSV files, spreadsheets and text files. To load data into the machine learning framework for processing, it was necessary to integrate and transform the data. This is the next phase in the process.

4.3 Data Cleaning

Data cleaning is a process of converting messy data into tidy data. About 60% of time is spent in cleaning the data. It might seem to come earlier in the process but it is actually an iterative approach. Even after applying model, there might be a need to cleanse the data again. In that case, dataset need to be restructured again in the middle of machine learning process. Data cleansing is one of the crucial steps in the process. It involves 3 steps: selecting the data, preprocessing the data and transforming the data. Once the data has been selected, it needs to be formatted, cleaned and sampled. Final step in cleansing data is transforming data. The knowledge of problem domain and the algorithm choice will influence in transforming data. There might be a need to revisit and re cleanse the data if need arises in between machine learning processing. Scaling and aggregation is performed to cleanse the data.

4.4 Training Data and Test Data

The cleansed data obtained from above step is divided into 2 sets namely Training set and Test set. Training set is implemented to build a model and test set is used to validate the trained model. Data points of training set are excluded from the test set. It is important to create training and test set with care so that one type of data points do not go in one set. To avoid that, the data points should be randomly added to the two sets.

For the purpose of making strong training and test set, sorting of records in the CSV file is done followed by selection of records randomly for sampling.

N-fold cross validation is also used to randomize the data set and create N folds equally sized. N-1 folds are used for training and 1 fold is used for testing. This also avoids the problem of over fitting by disregarding noise.

The fields in training and test data are different. Training data will have field 'Label' or will be organized in directory 'negative' or 'positive'. Test set will not have any recognition for the class it belongs to as that is to be evaluated.

```
cut -d testData_Label01.csv > testData_Label02.csv
```

4.5 Model Building

To build the model, supervised learning algorithms are used. As described before, training sets consist of a set of attributes including the 'class' or the 'label' attribute. The prediction algorithm learns about the connectivity of predictor variable and the resultant variable from the training data. This will result in a classification/prediction model. New data is fed to this model to make predictions.

Figure 3: Model Building

Typical steps in Machine Learning are Featurization, Training and Model Evaluation. Feature vectors are created from training data. These vectors are

then used for training the model. Model is generated which is then evaluated in the next phase to get the best model.

Figure 4: Typical steps in machine learning

The 'class' label is very important to be present in the training model for learning purposes. The 'class' or 'label' field tells if a patient has ADHD or not. In the project, it has values in the form of 0 and 1.

28030	Given dose 1 of vax 24JUL90; Next morning had sx of cervical myelitis,1	1
28033	Reporting nurse indicated several vaccinees have c/o pain on inject,1	1
28036	Vaccinee rec'd a 1st dose of vax 22AUG90; Events occurred w/in 24 hrs of inject; Recovered fully w/in days,1	1
28038	Flu-like sx ("similar to when taking INH plus RIFAMPIN") /p 1st dose vax givn AUG90-aches & pains being treated w/aspirin or Tylenol; sx persist- "still	1
28040	Vaccinee rec'd Engerix-B series according to 0,1	1
28043	Vaccinee completed an initial series of 3 Engerix-B vax according to 0,1	1
28045	1PM TC fr mom states site of inject & remainder lt leg swollen,1	1
28047	"Red,1	1
28049	Began having high pitched crying at 8PM could not be consoled. Seen by FMD dx adverse rxn given tylenol; crying lasted x 24hrs.	1
28051	Child began high pitched cry 4 hrs p/#1 DTP given. Cry lasted for 1 hr; Low-grade fever & soreness at inject site present for 1st day.	1
28052	Partial complex sz,1	0
66341	12 hrs p/vax pt was having severe pain & swelling of left arm; inflammation inc in size from elbow to back of scapula,0	0
71550	mom states pt exp chest pain/tightness/SOB 1-2 hrs p/vax given; MD's suggested Advil,0	0
73319	parents report that pt had low grade fever & two szs w/in about five hrs of receiving vax & that following this had severe regression in deve from which p	0
77553	pt was given DT because mom reports pt was stiff in the playpen for 2 days p/vax;	0
89313	pt recv vax & went to sit w/mom;In 1-2 min said did not feel well & was slow to respond to questions;face became red,0	0
99554	later that day pt exp soreness in arm & motion sickness feeling;the next AM motion sickness feeling worsened,0	0
101859	significant pain & swelling @ site of inj & distally in elbow;	0
102115	the day p/vax pt exp a large painful red bump in the breast on the same side vax given it lasted 4 days;	0
102254	approx 5Pm pt began c/o nausea & stomach hurt;c/o didn't sleep all noc;vomited in the morning when got up;cont to vomit the next day w/each attempt	0
102350	pt recv vax 2SEP97 & evening of 3SEP97 found by parents to be incontinent & w/ thick white foam in mouth shivering too but no observed tonic clonic mc	0
102933	well child exam 9SEP97 pt recv vax 22SEP97 seen w/petechiae bruises;	0
103119	confluent hives & target lesions over trunk,0	0
104650	stomachache shortly p/vax & rash;w/in 3 days rash covered entire body-felt flush-hot but not temp;stomach bothered pt for quite a few days & sleep wa	0

Figure 5: Dataset with label

Figure 6: Machine learning with label

After attaching the label with the data, it can be fed to a machine learning algorithm to build the model.

In the project, Logistic Regression and Naive Bayes machine learning algorithms are used. Logistic regression is a form of regression where the outcome variable is dependent and other predictor variables in input are independent. It makes predictions using probability. Logistic regression is used when the expected output should be binary. In logistic regression, input is multiplied by a coefficient, then the result is summed up, and a constant is added. The output is the log of

the odds ratio. Odds ratio is the odds that person has ADHD divided by odds that person does not have ADHD.

Area under ROC curve is the measure of the quality of the classification model. AUC for a perfect classifier is 1 and AUC for most classification models lay between 0.5 and 1.

Naive Bayes classifier is based on Bayes' theorem and categorized as a probabilistic classifier. It assumes that variables are independent even if they are actually not. That is why it is also termed as naive as it assumes variable independence but might not necessarily have it.

4.6 Model Testing

After training a model using training set and checking its error on training set, it is important to see how effective the model reacts on test set. Because data points present in validation set is not present in test set, that is why it is an unseen world for the model and hence it is important to record the performance of model on test set. If model testing does not yield sound results, then entire process of training, parameter tuning and testing should be redone until a sound model is developed.

Measurement of accuracy and performance of a model varies from algorithm to algorithm.

4.7 Model

Once the model is trained and tested, then it can be delivered.

IMPLEMENTATION

5.1 Data Cleaning

Data cleaning is one of the most crucial steps in machine learning. To clean the data, the removal or fixing of missing information is crucial. Some instances having no or incomplete information might also need to be removed. Moreover, there are lots of fields in the dataset which is of no use to us and hence needs to be removed. The fields that are of primary importance: `Vaers_id` and `symptom_text`. Data cleaning involves 3 steps: selecting the data, preprocessing the data and transforming the data. Once the data has been selected, it needs to be formatted, cleaned and sampled.

In formatting, the data needs to be formatted according to the algorithmic and framework requirement.

Therefore, for the data to be used in Weka, it was necessary to convert the dataset into directories containing text files. For processing in Weka, the directory was organized in the following form:-

Data -> positive -> Files containing symptoms of patients having ADHD -

pos_[VAERS ID].txt

Data -> negative -> Files containing stories of patients not having ADHD -

neg_[VAERS ID].txt

Moreover, it was more convenient to embed data in the form of one single CSV file while using Spark. For that purpose, all the CSV files were concatenated into one CSV file first. So the files present in both positive and negative directories, concatenation are performed. Validation is also done so that information is not lost in concatenation. This is done by counting no of lines in all the files and comparing it with the no of lines in concatenated file.

A terminal window on a Linux system showing the process of concatenating CSV files. The user is in the directory ~/Downloads/02 Neg and Pos csvs/negative. They list files, concatenate them into newfile.csv, and then use the wc command to count lines in each file and the total. The output shows 16 individual files with line counts ranging from 9935 to 32656, and a total of 32656 lines for the concatenated newfile.csv.

```
arpi@arpi-Lenovo-G510: ~/Downloads/02 Neg and Pos csvs/negative
arpi@arpi-Lenovo-G510:~/Downloads/02 Neg and Pos csvs/negative$ ls
1991VAERSDATA.csv  1996VAERSDATA.csv  1998VAERSDATA.csv  2001VAERSDATA.csv  2005VAERSDATA.csv  2013VAERSDATA.csv
1993VAERSDATA.csv  1997VAERSDATA.csv  1999VAERSDATA.csv  2004VAERSDATA.csv  2011VAERSDATA.csv
arpi@arpi-Lenovo-G510:~/Downloads/02 Neg and Pos csvs/negative$ cat *.csv > newfile.csv
arpi@arpi-Lenovo-G510:~/Downloads/02 Neg and Pos csvs/negative$ ls
1991VAERSDATA.csv  1996VAERSDATA.csv  1998VAERSDATA.csv  2001VAERSDATA.csv  2005VAERSDATA.csv  2013VAERSDATA.csv
1993VAERSDATA.csv  1997VAERSDATA.csv  1999VAERSDATA.csv  2004VAERSDATA.csv  2011VAERSDATA.csv  newfile.csv
arpi@arpi-Lenovo-G510:~/Downloads/02 Neg and Pos csvs/negative$ wc -l *.csv
 9935 1991VAERSDATA.csv
10146 1993VAERSDATA.csv
10768 1996VAERSDATA.csv
10972 1997VAERSDATA.csv
 9947 1998VAERSDATA.csv
12234 1999VAERSDATA.csv
13353 2001VAERSDATA.csv
15301 2004VAERSDATA.csv
15552 2005VAERSDATA.csv
25340 2011VAERSDATA.csv
29730 2013VAERSDATA.csv
163278 newfile.csv
32656 total
arpi@arpi-Lenovo-G510:~/Downloads/02 Neg and Pos csvs/negative$
```

Figure 7: Concatenating negative and positive ADHD records separately

Similarly, newfile.csv is also created for all the files present in directory 'positive'.

The data in the newfile.csv will look like:

VAERS_ID	SYMPTOM_TEXT
27274	Pt vaccinated with Hib ster developed meningitis & uveitis within 12 hours. Infection resolved w/Antibiotic therapy.
27275	Pt vaccinated with FLUOGEN apparent cardiac arrest - no breath/pulse BPM - CPR initiated - transported to hosp where he expired.
27276	027315 "Pt vaccinated with FLUOGEN developed severe headache approx 15 hrs after injection. Numbness & "drawing" of rt side of face 3 days later. Bef's Palsy.
27316	Pt vaccinated with FLUOGEN developed rash over trunk w/intense itching 13 hrs after injection. Felt "very bad". Myalgia.
27317	027372 "Pt vaccinated with MMR developed red spots on lt arm from elbow to axilla & lt side of upper body from axilla to waist. Family DR dx as "shingles".
27373	027449 "Information 4" @ site. Physician gave 1st normal dose as a similar local response was noted on last shot.
27450	027473 "developed hives & headache after initial doses. Treated w/Steroids. Finished series about 3 yrs ago & continue to have "bad" headache & stomach is messed-up. Was started on vaccine about 2 mo ago when exposed to proven rabid bobcat.
27474	027482 "Bones felt like truck ran over them". Occurred after each injection. Also migraine headaches & breathing problems & now has chronic bronchitis. Also having a lot of food & environmental allergies.
27483	027531 "JAN91 received message to contact MD about possible meningitis case. SJAN91 follow-up call was told to "get our lawyers." No other information.
27533	Pt vaccinated w/MMR/HIB & 4 yrs later developed aplastic anemia.
27534	027610 "Pt vaccinated w/OPV/DTP/HIB w/in 6 hrs pt developed "H" fever & became extremely irritable. Screamed for 1 hr. Legs became swollen then arms became red all over. Treated w/Benadryl & Tylenol resolution w/in 24 hrs.
27611	Pt vaccinated w/DTP/OPV/HIB/TBMMR evening of immunization pt had a seizure & fever of 104 & was treated at Hosp.
27612	Pt vaccinated w/Engerix-B at 1PM 11JAN91 approx 1AM 11JAN91 had severe dyspnea & laryngospasm for approx 10 min. Able to barely inhale enough air to maintain consciousness. Laryngospasm subsided enough to breath p/10 mins. Continued to
27613	Pt vaccinated w/TOTX arm swollen w/area of induration approx size of soft ball.
27614	027623 "Child started "jumping" & mom could not get child's mouth open. Seen at ER had temp of 103.9. Given Tylenol. Improving w/o further complications on 11Jan91.
27624	Vaccinated w/MMR developed diffuse arthralgia & myalgias. Tx anti-inflammatory meds. Bed rest.
27625	Pt had one grand-mal sz. shortly after receiving vax. Pt has a known sz. disorder & is on Tegretol. Also had arthralgias in arms. No specific treatment given. 1 mo flu still clo arthralgia.
27626	Pt became apathetic.
27627	Pt had 1 pre-eching home in 1/2 hr. Sz. tp receiving DTP & was taken to ER. Enesia x 1. Seizure by mothers description as shaking all over the body for a few min then she became limp. DIC from hosp after two days.
27628	Became fussy & had runny nose 20DEC. T @ MD office 100-101(R). On Fri night 21DEC developed a rash w/hives. 22DEC adm to hosp. Rx'd for Bronchitis & an infection in bowel caused by Brachispira. Generalized bacterial infect.
27629	4JAN91 Hives. SJAN91 Swollen ears. MD prescribed Benadryl.
27630	Continuous crying for 3 hrs. High pitched cry.
27631	DTP given 17NOV91.
27632	027636 "1 of 3 nurses who received Engerix-B experienced headache ("Pressure on top of head like head was going to explode"). Experienced "immediately" p/1st of a series of 3 injections. Treated w/Tylenol & headache went away.
27637	1 of 3 nurse who rec'd Engerix-B experienced headache ("pressure on top of head like head was going to explode"). Experienced "immediately" p/1st of a series of 3 injects. Tx Tylenol & headache went away.
27638	Reporter indicates "significant failures in HB vax of employees (ages 30-50) p/switching fr Recombivax to Engerix-B were running approx 93% conversion w/Recombivax. Rate w/Engerix-B is estimated to be about 50%.
27639	027647 "Nauseated x 5 days following 2nd inject. No problems p/1st inject. Reporter indicates "in my opinion vax was not due to vax - rather obtained virus at the same time."
27648	027652 "Vaccinee experienced ... failure to achieve antibody titers p/3 doses of Engerix-B."
27653	Vaccinee experienced ... failure to achieve antibody titers p/3 doses of Engerix-B."
27654	Vaccinee experienced ... failure to achieve antibody titers p/3 doses of Engerix-B."
27655	Vaccinee experienced ... failure to achieve antibody titers p/3 doses of Engerix-B."
27656	Vaccinee experienced ... failure to achieve antibody titers p/3 doses of Engerix-B."
27657	Vaccinee experienced ... failure to achieve antibody titers p/3 doses of Engerix-B."
27658	Vaccinee experienced ... failure to achieve antibody titers p/3 doses of Engerix-B."
27659	Vaccinee experienced ... failure to achieve antibody titers p/3 doses of Engerix-B."
27660	027601 "Vaccinee rec'd two boosters ("which may have been Engerix-B" indicates has not yet responded.
27602	027603 "Vaccinee dev. a vaginal yeast infect ... about 2 days p/inject" & defoid 20JUL90 & 19AUG90 sx treated w/Terazol vaginal suppository & cleared p/2-3 days. Vaccinee plans to take 3rd vax in series.

Figure 8: Concatenated data

We require three fields in our dataset namely: VAERS_ID, SYMPTOM_TEXT, LABEL

Organizing data in the form of negative and positive directories in Weka eliminates the need of adding external field 'label'/'class' which is used in Spark.

To select VAERS_ID and SYMPTOM_TEXT from the newly created concatenated CSV file and create a new file called abc.csv, cut command is

used. Thereafter, the results are sorted to remove duplicate header information by using sort command. Validation is also done to ensure data is not lost during the process.

A terminal window on a Linux system showing a series of commands and their outputs. The user is in the directory ~/Downloads/02 Neg and Pos csvs/negative. The commands include creating a new file, listing files with wc -l, sorting files with sort -u, and another wc -l command. The outputs show the number of lines in each file and the total number of lines. The terminal has a dark purple background and a red sidebar with application icons.

```
arpi@arpi-Lenovo-G510: ~/Downloads/02 Neg and Pos csvs/negative
arpi@arpi-Lenovo-G510:~/Downloads/02 Neg and Pos csvs/negative$ cut -d, -f1,9 newfile.csv > abc.csv
arpi@arpi-Lenovo-G510:~/Downloads/02 Neg and Pos csvs/negative$ wc -l *.csv
9935 1991VAERSDATA.csv
10146 1993VAERSDATA.csv
10768 1996VAERSDATA.csv
10972 1997VAERSDATA.csv
9947 1998VAERSDATA.csv
12234 1999VAERSDATA.csv
13353 2001VAERSDATA.csv
15301 2004VAERSDATA.csv
15552 2005VAERSDATA.csv
25340 2011VAERSDATA.csv
29730 2013VAERSDATA.csv
163278 abc.csv
163278 newfile.csv
489834 total
arpi@arpi-Lenovo-G510:~/Downloads/02 Neg and Pos csvs/negative$ sort -u abc.csv -o abc1.csv
sort: invalid option -- '0'
Try 'sort --help' for more information.
arpi@arpi-Lenovo-G510:~/Downloads/02 Neg and Pos csvs/negative$ sort -u abc.csv -o abc1.csv
arpi@arpi-Lenovo-G510:~/Downloads/02 Neg and Pos csvs/negative$ wc -l *.csv
9935 1991VAERSDATA.csv
10146 1993VAERSDATA.csv
10768 1996VAERSDATA.csv
10972 1997VAERSDATA.csv
9947 1998VAERSDATA.csv
12234 1999VAERSDATA.csv
13353 2001VAERSDATA.csv
15301 2004VAERSDATA.csv
15552 2005VAERSDATA.csv
25340 2011VAERSDATA.csv
29730 2013VAERSDATA.csv
163268 abc1.csv
163278 abc.csv
163278 newfile.csv
653102 total
arpi@arpi-Lenovo-G510:~/Downloads/02 Neg and Pos csvs/negative$
```

Figure 9: Removing redundant information

Header information is removed as it is not required for processing in Apache Spark as a class is created in Spark while loading the data. grep is used to search if header line exists; if so it is removed using sed.

```

arpi@arpi-Lenovo-G510: ~/Downloads/02 Neg and Pos csvs/negative$ wc -l *.csv
9935 1991VAERSDATA.csv
10146 1993VAERSDATA.csv
10768 1996VAERSDATA.csv
10972 1997VAERSDATA.csv
9947 1998VAERSDATA.csv
12234 1999VAERSDATA.csv
13353 2001VAERSDATA.csv
15301 2004VAERSDATA.csv
15552 2005VAERSDATA.csv
25340 2011VAERSDATA.csv
29730 2013VAERSDATA.csv
163268 abc1.csv
163278 abc.csv
163278 newfile.csv
653102 total
arpi@arpi-Lenovo-G510:~/Downloads/02 Neg and Pos csvs/negative$ grep VAERS_ID abc1.csv
VAERS_ID,SYMPTOM_TEXT
arpi@arpi-Lenovo-G510:~/Downloads/02 Neg and Pos csvs/negative$ sed '/VAERS_ID/d' abc1.csv > abc2.csv
arpi@arpi-Lenovo-G510:~/Downloads/02 Neg and Pos csvs/negative$ wc -l *.csv
9935 1991VAERSDATA.csv
10146 1993VAERSDATA.csv
10768 1996VAERSDATA.csv
10972 1997VAERSDATA.csv
9947 1998VAERSDATA.csv
12234 1999VAERSDATA.csv
13353 2001VAERSDATA.csv
15301 2004VAERSDATA.csv
15552 2005VAERSDATA.csv
25340 2011VAERSDATA.csv
29730 2013VAERSDATA.csv
163268 abc1.csv
163267 abc2.csv
163278 abc.csv
163278 newfile.csv
816369 total
arpi@arpi-Lenovo-G510:~/Downloads/02 Neg and Pos csvs/negative$ grep VAERS_ID abc2.csv
arpi@arpi-Lenovo-G510:~/Downloads/02 Neg and Pos csvs/negative$

```

Figure 10: Removing header information

A column 'label' is added which holds value 0/1 to represent positive and negative data.

For positive CSVs: `awk -F"," 'BEGIN {OFS = ","} {$3=0; print}' abc2.csv > abc3.csv`

for negative CSVs: `awk -F"," 'BEGIN {OFS = ","} {$3=1; print}' abc2.csv > abc3.csv`

```

arpi@arpi-Lenovo-G510: ~/Downloads/02 Neg and Pos csvs/negative
arpi@arpi-Lenovo-G510:~/Downloads/02 Neg and Pos csvs/negative$ wc -l *.csv
9935 1991VAERSDATA.csv
10146 1993VAERSDATA.csv
10768 1996VAERSDATA.csv
10972 1997VAERSDATA.csv
9947 1998VAERSDATA.csv
12234 1999VAERSDATA.csv
13353 2001VAERSDATA.csv
15301 2004VAERSDATA.csv
15552 2005VAERSDATA.csv
25340 2011VAERSDATA.csv
29730 2013VAERSDATA.csv
163268 abc1.csv
163267 abc2.csv
163278 abc.csv
163278 newfile.csv
816369 total
arpi@arpi-Lenovo-G510:~/Downloads/02 Neg and Pos csvs/negative$ awk -F"," 'BEGIN { OFS = "," } {$3="negative"; print}' abc2.csv > abc3.csv
arpi@arpi-Lenovo-G510:~/Downloads/02 Neg and Pos csvs/negative$
arpi@arpi-Lenovo-G510:~/Downloads/02 Neg and Pos csvs/negative$ wc -l *.csv
9935 1991VAERSDATA.csv
10146 1993VAERSDATA.csv
10768 1996VAERSDATA.csv
10972 1997VAERSDATA.csv
9947 1998VAERSDATA.csv
12234 1999VAERSDATA.csv
13353 2001VAERSDATA.csv
15301 2004VAERSDATA.csv
15552 2005VAERSDATA.csv
25340 2011VAERSDATA.csv
29730 2013VAERSDATA.csv
163268 abc1.csv
163267 abc2.csv
163267 abc3.csv
163278 abc.csv
163278 newfile.csv
979636 total
arpi@arpi-Lenovo-G510:~/Downloads/02 Neg and Pos csvs/negative$

```

Figure 11: Adding Label to the data

Sampling is also very important while performing experiments. It is not possible to load entire data in experimentation. The reason is that, it might consume lot of time and our focus might shift to handling data rather than working with data.

```
sort -k2,2n -k1,1n negative.csv > negative2.csv
```

```
head -1019 negative2.csv > negative_data.csv
```

```
head -1019 positive2.csv > positive_data.csv
```

```
Total Data: cat *_data.csv > data_label01.csv
```


5.2 Training Set and Test Set

Training and test set can be created from the dataset obtained after data cleaning. In the project 66% of data is training data and 34% of data is test data. For example for the above created sample of data, training and test set can be created by selecting random records from the data. The CSV file can be sorted so there is no need to randomly pick record.

```
sort -k2,2n -k1,1n positive.csv > positive_data.csv
```

```
sort -k2,2n -k1,1n negative.csv > negative_data.csv
```

Training and test set for the sample can be created as follows:

```
head -673 positive_data.csv > training_positive.csv
```

```
head -673 negative_data.csv > training_negative.csv
```

```
tail -346 negative_data.csv > test_negative.csv
```

```
tail -346 positive_data.csv > test_positive.csv
```

```
wc -l training_*.csv test_*.csv
```

```
cat test_*.csv > testData_Label01.csv
```

```
cat training_*.csv > trainingData_Label01.csv
```

Thus, we have 2 sets, one called training set and the other is test set.

5.3 Model Building

The goal is to build a supervised machine learning model from known data and known responses to predict if the child has ADHD or not.

Figure 12: Model building and predicting responses

New data is then fed in the model to get predicted responses.

Two machine learning algorithms have been used in the project namely Naive Bayes and Logistic Regression. They predict if a child will have ADHD or not primarily on the basis of the symptom stories recorded by the nurses and doctors. Since, it is a classification problem, the primary thing is to assign a variable 'class' or 'label' which will hold values 0 and 1 or positive and negative.

5.3.1 Weka

Weka is a collection of machine learning algorithms for data mining tasks. The algorithms can be applied directly to build a model in it. Weka can also be used to develop new machine learning algorithms schemes.

Data needs to be loaded in Weka so that processing can be performed. As mentioned earlier, data has been organized in the form of directories: negative and positive. Directory labeled 'negative' contains all the files containing symptom stories of patients not having ADHD and directory labeled 'positive' holds all the symptom stories for patients diagnosed with ADHD.

Data needs to be loaded in Weka. For that, TextDirectoryLoader is used which loads the directory in ARFF file. ARFF is attribute relation file format that describes a list of instances sharing a set of attributes.

```
java weka.core.converters.TextDirectoryLoader -D -dir /home/arpi/Desktop/data/ >
/home/arpi/Desktop/ADHD.arff
```

First path is the path containing the directory of positive and negative symptoms.

Second path is the path where we want to create ADHD.arff. Using Weka

StringToWordVector, text is transformed into document vectors.

It is important to consider following parameters while building Naive Bayes Classifier in Weka.

1. WordsToKeep

This is the total number of words that is to be kept for building the model. It has huge impact while building a good machine learning model. It can be a 6 digit number as well.

2. outputWordCounts

If this is set to true, then the output is in the form of number of times a word occurs in the document

3. DoNotOperateOnPerClassBasis

If this is set to true, then the number of words are calculated irrespective of the class or label of the document.

4. TF - IDF

If TF-IDF computation is necessary to build the model, then it can be set to true.

TF - IDF is "Term Frequency - Inverse Document Frequency" is a way to score a word in the text. The computation is based on the frequency of words appearing across multiple documents. It can be said that, if a word appears frequently in a

document, it is important. That word will have high score. But if the term appears in many documents, it is not a unique identifier. In that case, word will have low score.

5. normalizeDocLength

Normalization refers to measurements taken on different scales and re-measuring them on a common scale. For example two documents contain 100 and 150 words each and the word "experiment" appears 5 times in both the documents. But the normalization value of "experiment" for doc1 will be more than in doc2 because doc1 has less words and effect of "experiment" is more in doc1.

6. Stemming

Stemming uses word by breaking them down into smaller words called stem. In some cases, this enhances the result.

7. Stopwords

There are some words in document collection that appear most-as-is and are irrelevant for classification. Such words are called stopwords. Sometimes excluding them yields better result.

8. Tokenizer

Tokenizer splits up text into tokens which helps in further processing and feature extraction. There are lots of tokenizer available that can be utilized while training the model.

9. minTermFrequency

It specifies that word should appear at least minimum number of times specified to be considered for further processing. For example, if it is set to 3, then word would have to appear at least three times to be considered as an attribute.

10. lowerCaseTokens

If it is set to off, then the words will be case sensitive. If it is turned-on, then the attributes with different cases are considered same.

On setting the following parameter values,

IDF Transform -> True

TFTransform -> True

doNotOperateOnPerClassBasis -> True

InvertSelection -> False

lowerCaseTokens -> False

minTermFreq -> 1

normalizeDocLength -> Normalize all data

wordsToKeep -> 500

And after applying the settings, data looks like below

[illegible]

Figure 14: Data after parameter tuning in Weka

On applying **Naive Bayes** classifier, accuracy (Correctly classified instances) = 85.3%

On changing tokenizer from word tokenizer -> alphabetic tokenizer, accuracy improves. This removes unnecessary tokens with numbers which were approx 40 out of 500.

To improve the model's accuracy, several parameters have been changed and tested to perform enhancements. By changing `lowerCaseTokens -> true`, accuracy improves as it reduces the duplicity. The settings are as below:

IDF Transform -> True

TFTransform -> True

doNotOperateOnPerClassBasis -> True

InvertSelection -> False

lowerCaseTokens -> True

minTermFreq -> 1

normalizeDocLength -> Normalize all data

outputWordCounts -> True

stemmer -> NullStemmer

tokenizer -> Word Tokenizer

usestoplist -> True

wordsToKeep -> 500

On applying **Naive Bayes** classifier, accuracy (Correctly classified instances) =

86.9%

There were 121156 instances. Confusion matrix for the result is as below

	neg	pos
neg	120187	969
Pos	30774	90382

This explains that True negative is 120187, True positive is 90382, False negative is 969 and False positive is 30774.

5.3.2 Apache Spark

Apache Spark is a fast engine for big data processing with built in module for machine learning. It provides in memory caching abstraction and stores datasets in memory so they do not need to be read from disk for each operation.

Figure 15: Apache Spark's cluster architecture

Spark application run as independent processes on the cluster. Main program provides spark context object which coordinates the processing. Spark object connects to cluster manager which communicates with worker nodes. Executor is a process in worker node which processes the task and saves result to either cache/disk.

Spark is run over Amazon Web Services Elastic Map Reduce framework (AWS EMR). EMR is a web service which can process large amounts of data. Apache Spark over AWS EMR uses a directed acyclic graph (DAG) execution engine. Spark uses in-memory, fault-tolerant resilient distributed datasets (RDDs), keeping intermediates, inputs, and outputs in memory instead of on disk.

Figure 16: Data flow in Amazon Elastic Map Reduce

On the master node in Amazon EC2 instances, Apache Spark is installed. These instances belong to special Amazon EMR Clusters designed for big data processing. Data is accessed in and out from Amazon Simple Storage Service (S3).

First, connection to cluster's master node is established. SparkContext variable 'sc' is provided by the driver program running on master node.

```

arpi@arpi-Lenovo-G510:~/aws$
arpi@arpi-Lenovo-G510:~/aws$ ssh hadoop@ec2-54-215-128-110.us-west-1.compute.amazonaws.com -i ./keyncala.pem
The authenticity of host 'ec2-54-215-128-110.us-west-1.compute.amazonaws.com (54.215.128.110)' can't be established.
ECDSA key fingerprint is 31:37:cd:94:aa:ab:f4:ea:97:b3:14:b2:be:e3:8c:b7.
Are you sure you want to continue connecting (yes/no)? yes
Warning: Permanently added 'ec2-54-215-128-110.us-west-1.compute.amazonaws.com,54.215.128.110' (ECDSA) to the
list of known hosts.
Last login: Fri Oct 9 21:35:24 2015

  _| _|_ )
  _| ( _| /  Amazon Linux AMI
  __| \__|__|

https://aws.amazon.com/amazon-linux-ami/2015.03-release-notes/
No packages needed for security; 1 packages available
Run "sudo yum update" to apply all updates.
Amazon Linux version 2015.09 is available.

EEEEEEEEEEEEEEEEEEEE MMMMMMMM MMMMMMMM RRRRRRRRRRRRRRR
E::::::::::::::::::E M::::::::M M::::::::M R::::::::::::R
EE::::::::::::::::::E M::::::::M M::::::::M R::::::::RRRRR::::R
E:::E EEEEE M::::::::M M::::::::M RR:::R R:::R
E:::E M::::::::M M::::::::M R:::R R:::R
E:::EEEEEEEEEE M:::M M:::M M:::M M:::M R:::RRRRR::::R
E::::::::::::E M:::M M:::M M:::M R:::::::::RR
E:::EEEEEEEEEE M:::M M:::M M:::M R:::RRRRR::::R
E:::E M:::M M:::M M:::M R:::R R:::R
E:::E EEEEE M:::M MMM M:::M R:::R R:::R
EE::::::::::::E M:::M M:::M R:::R R:::R
E::::::::::::E M:::M M:::M RR:::R R:::R
EEEEEEEEEEEEEEEEEEEE MMMMMMMM MMMMMMMM RRRRRRR RRRRRR

[hadoop@ip-172-31-4-168 ~]$

```

Figure 17: Logging in master node of cluster

```

import sqlContext.implicits._

import org.apache.spark.sql._
val sqlContext = new org.apache.spark.sql.SQLContext(sc)
val trainData = sc.textFile("s3://data/trainingData_Label01.csv")

```

First, the data is stored in Amazon S3 Bucket. Then it is fetched from there for further processing. After data is loaded it is converted in the form of data frames.

```

case class ADHDTrain(vaers_id: String, symptom_text: String,
label: Double)

val adhdtrain = trainData.map(_.split(",")).map(p =>
ADHDTrain(p(0),p(1),p(2).toDouble))

val adhdtrain_DF = adhdtrain.toDF()

```

Data is in the form of patient's symptom stories, hence to perform text classification, features must be extracted. This can be done in 2 steps: Tokenizer and Hashed Term Frequency.

```
import org.apache.spark.ml.Pipeline

import org.apache.spark.ml.classification.LogisticRegression

import org.apache.spark.ml.feature.{HashingTF, Tokenizer}

import org.apache.spark.mllib.linalg.Vector

import org.apache.spark.sql.Row

val tokenizer = new Tokenizer().setInputCol("symptom_text").
setOutputCol("symptom_words")

val hashingTF = new HashingTF() .setNumFeatures(1000).
setInputCol(tokenizer.getOutputCol).setOutputCol("features")
```

Tokenizer breaks the text into bunch of words. So this is appending a new column called “Words” to this DataFrame. That DataFrame is passed to the next module “Hashed Term Freq.” and it outputs a new column called “Features” which is a fixed length vector. The vector is numerical and easily understood by machine learning algorithms.

```

import org.apache.spark.ml.Pipeline
import org.apache.spark.ml.classification.LogisticRegression
import org.apache.spark.ml.feature.{HashingTF, Tokenizer}
import org.apache.spark.mllib.linalg.Vector
import org.apache.spark.sql.Row

val tokenizer = new
Tokenizer().setInputCol("symptom_text").setOutputCol("symptom_wor
ds")

val hashingTF = new
HashingTF().setNumFeatures(1000).setInputCol(tokenizer.getOutputC
ol).setOutputCol("features")

```

Training module selects columns 'label' and 'features' and train on those to produce Logistic Regression Model which makes predictions on the new data.

```

val lr = new
LogisticRegression().setMaxIter(10).setRegParam(0.01)

```

Pipeline is created which is the combination of the three abstractions :

- a. Tokenizer
- b. Hashed Term Frequency
- c. Logistic Regression

These 3 can be wrapped into single object for reusability.

```

val pipeline = new
Pipeline().setStages(Array(tokenizer, hashingTF, lr))

val model = pipeline.fit(adhdtrain_DF)

val predictions = model.transform(adhdtrain_DF)

```

```
scala> val predictions = model.transform(adhdtrain_DF)
predictions: org.apache.spark.sql.DataFrame = [vaers_id: string, symptom_text: s
string, label: double, symptom_words: array<string>, features: vector, rawPredict
ion: vector, probability: vector, prediction: double]
```

Figure 18: Generating prediction in Apache Spark

Predictions look like below:

```
["itching all over,0.0,0.0]
[fever 105 dizzy Headache Hallucinations,0.0,0.0]
["Left upper thigh red,0.0,0.0]
["Difficulty Breathing,0.0,0.0]
```

Figure 19: Prediction in Apache Spark

Logistic regression takes the regularization parameter, Hashed term frequency takes various parameters such as length of the representation of feature vector.

CrossValidator, provided by ML API is used to manage all the different parameters.

It takes an **estimator** (the pipeline), **Parameter Grid** and an **Evaluator** (to compare models). It then automatically finds the best parameters.

```
import org.apache.spark.ml.evaluation.RegressionEvaluator
import org.apache.spark.ml.regression.LinearRegression
import org.apache.spark.mllib.util.MLUtils
import org.apache.spark.ml.tuning.ParamGridBuilder
import org.apache.spark.ml.tuning.CrossValidator
import
org.apache.spark.ml.evaluation.BinaryClassificationEvaluator
```

```

val paramGrid = new
ParamGridBuilder().addGrid(hashingTF.numFeatures,
Array(1000,10000)).addGrid(lr.regParam, Array(0.05,0.2)).build()

val crossval = new
CrossValidator().setEstimator(pipeline).setEvaluator(new
BinaryClassificationEvaluator).setEstimatorParamMaps(paramGrid).setNumFolds(2)

val cvModel = crossval.fit(adhdtrain_DF)

val evaluator = new
BinaryClassificationEvaluator().setMetricName("areaUnderROC")

evaluator.evaluate(cvModel.transform(adhdtrain_DF))

```

```

15/09/24 20:24:25 INFO DAGScheduler: ResultStage 258 (aggregate at AreaUnderCurve.scala:45) finished in 0.003 s
15/09/24 20:24:25 INFO TaskSchedulerImpl: Removed TaskSet 258.0, whose tasks have all completed, from pool
15/09/24 20:24:25 INFO DAGScheduler: Job 184 finished: aggregate at AreaUnderCurve.scala:45, took 0.010203 s
15/09/24 20:24:25 INFO MapPartitionsRDD: Removing RDD 430 from persistence list
15/09/24 20:24:25 INFO BlockManager: Removing RDD 430
res17: Double = 0.9989998432425392

```

Figure 20: Evaluation of model

Train data accuracy is 99.89%

For test data, result is 91.91%

```

15/09/24 20:22:03 INFO TaskSchedulerImpl: Removed TaskSet 247.0, whose tasks have all completed, from pool
15/09/24 20:22:03 INFO DAGScheduler: ResultStage 247 (aggregate at AreaUnderCurve.scala:45) finished in 0.005 s
15/09/24 20:22:03 INFO DAGScheduler: Job 180 finished: aggregate at AreaUnderCurve.scala:45, took 0.009264 s
15/09/24 20:22:03 INFO MapPartitionsRDD: Removing RDD 414 from persistence list
15/09/24 20:22:03 INFO BlockManager: Removing RDD 414
res15: Double = 0.9193591499883049

```

Figure 21: Accuracy of test set

CONCLUSION AND FUTURE WORK

Naive Bayes and Logistic Regression models have been built in Weka and Apache Spark. Model based on logistic regression performs better than model built using Naive Bayes classifier. Hence, if the model is used in real world scenario then it can prove to solve some diagnostic problems of ADHD.

Any model built using classification techniques can be deployed over Amazon web services EMR as it can handle more load and requests.

The data set used in project contains textual information. Other types of datasets including numeric observation, images and videos can be used to develop other models which can be integrated with the model created in this project to produce better results.

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[qid=155d2ed1-b112-419e-80cb- 1a285d11aca0&v=default&b=&from_search=5](http://www.slideshare.net/GirishKhanzode/supervised-learning52218215?qid=155d2ed1-b112-419e-80cb-1a285d11aca0&v=default&b=&from_search=5)

(accessed Oct 2015)