A Knowledge Discovery Pipeline to Describe the High Cholesterol Profile in Young People Using GA for Feature Selection

Daniel Rocha Franca¹[®]^a, Caio Davi Rabelo Fiorini²[®]^b, Ligia Ferreira de Carvalho Gonçalves²[®]^c, Marta Dias Moreira Noronha³[®]^d, Mark Alan Junho Song³[®]^e and Luis Enrique Zárate Galvez³[®]^f

¹Bach. Computer Science, Pontificia Universidade Católica de Minas Ĝerais, Rua Claudio Manuel, Belo Horizonte, Brazil

²Bach. Data Science and Artificial Intelligence, Pontificia Universidade Católica de Minas Gerais,

Rua Claudio Manuel, Belo Horizonte, Brazil ³Institute of Exact Sciences and Computer Science, Pontificia Universidade Católica de Minas Gerais,

Rua Claudio Manuel, Belo Horizonte, Brazil

Keywords: Hypercholesterolemia, Young Population, Machine Learning, Decision Tree, Genetic Algorithm, Data Mining, National Health Survey, Risk Factors, Data Preprocessing, Health Informatics, CAPTO.

Abstract: Understanding the risk factors associated with hypercholesterolemia in young individuals is crucial for developing preventive strategies to combat cardiovascular diseases. This study proposes a data mining pipeline employing machine learning techniques to profile high cholesterol in Brazilian youth aged 15 to 25, utilizing the 2019 National Health Survey (PNS) dataset. The PNS-2019 database has 1,088 attributes organized into 26 modules and 293,726 anonymized records. The Knowledge Discovery in Databases (KDD) process was implemented, incorporating a novel CAPTO-based conceptual attribute selection followed by feature selection using a Non-dominated Sorting Genetic Algorithm II (NSGA-II). A decision tree classifier was optimized and evaluated, achieving an F1 Score of 66%, demonstrating reasonable predictive power despite data limitations. The results highlight the significant impact of dietary habits, particularly high sugar and fat intake, on hyper-cholesterolemia risk. The study emphasizes the potential for early identification and targeted interventions, contributing to public health improvements and laying the groundwork for future research with advanced models and additional data sources.

1 INTRODUCTION

The knowledge of factors associated with diseases affecting the inhabitants of a nation is one of the greatest steps toward advancing the quality of health in a country. This knowledge enables public health authorities to guide and protect their population. In Brazil, health authorities strive to better understand hypercholesterolemia, more commonly known as high cholesterol, one of the most prevalent and common dyslipidemias (Pirillo et al., 2021). In Brazil, the prevalence of high cholesterol increased from 12.5% in 2013 to 14.6% in 2019 (Nogueira de Saét al., 2022).

Dyslipidemias metabolic disorders are characterized by alterations in the serum levels of main lipoproteins in the bloodstream. the Hypercholesterolemia contributes to various cardiovascular diseases that affect a large portion of Brazilians. In 2022, a set of 18 cardiovascular diseases caused the death of approximately 400,000 people in Brazil, equivalent to the death toll of the coronavirus in 2021, the worst year of the pandemic (Mensah et al., 2023).

In Proceedings of the 27th International Conference on Enterprise Information Systems (ICEIS 2025) - Volume 1, pages 805-812 ISBN: 978-989-758-749-8; ISSN: 2184-4992

Proceedings Copyright © 2025 by SCITEPRESS - Science and Technology Publications, Lda.

^a https://orcid.org/0009-0008-9457-1221

^b https://orcid.org/0009-0005-3606-7623

^c https://orcid.org/0009-0000-7601-2938

^d https://orcid.org/0000-0002-2992-8422

^e https://orcid.org/0000-0001-7315-3874

fo https://orcid.org/0000-0001-7063-1658

Franca, D. R., Fiorini, C. D. R., Gonçalves, L. F. C., Noronha, M. D. M., Song, M. A. J. and Galvez, L. E. Z.

A Knowledge Discovery Pipeline to Describe the High Cholesterol Profile in Young People Using GA for Feature Selection.

DOI: 10.5220/0013294800003929

Paper published under CC license (CC BY-NC-ND 4.0)

Hypercholesterolemia is often exclusively associated with adults and the elderly, where the proportions of this disease are much higher. However, this condition is neglected among younger groups. The article (Calliari et al., 2019) conducted a study with a sample of 272 children and adolescents in the city of Marau, in the State of Rio Grande do Sul (RS), Brazil, on the presence of dyslipidemias. The study found that 34.7% of participants had hypercholesterolemia. The study also points out, through a literature review, that similar results were found in other parts of Brazil, indicating that juvenile hypercholesterolemia is not endemic.

There is extensive literature ensuring that through the use of data science techniques and the application of machine learning algorithms, it is possible to better understand hypercholesterolemia and characterize patient profiles. In the work of (Dritsas and Trigka, 2022), various classifiers are compared to characterize patients with hypercholesterolemia using data from the ELSA (English Longitudinal Study of Aging) study. The ELSA contains data such as age, gender, dietary habits, lifestyle, among many other pieces of information.

The article (Banda et al., 2019) demonstrates the application of a Random Forest classifier to identify patients at higher risk of hypercholesterolemia, using data from Stanford University's electronic health system. After training, the model was tested using data from the American company Geisinger health system, correctly classifying 84% of instances.

In the Brazilian context, the work of (Albuquerque et al., 2023) applies supervised machine learning techniques, specifically a logistic regression model, to diagnose familial hypercholesterolemia (FH) as a marker for cardiometabolic risk. The study utilized data from the HipercolBrasil cohort, which included genetic and clinical information from 940 individuals referred to lipid clinics. The dataset incorporated a range of variables, including metabolic indicators such as LDLc, HDLc, and triglycerides, as well as behavioral and clinical factors like smoking habits, age, hypertension, and premature cardiovascular disease. The logistic regression model demonstrated robust performance, achieving an AUROC of 0.82 and an AUPRC of 0.72.

The objective of this work is to identify risk factors for hypercholesterolemia in the young Brazilian population (ages 15 to 25) through a data mining process and machine learning models. For this purpose, the recent study by the Brazilian Institute of Geography and Statistics (IBGE), the National Health Survey (PNS) 2019, will be considered. This survey was conducted through questionnaires in 2019 across the entire Brazilian territory using sampling (https://www.pns.icict. fiocruz.br/). The PNS-2019 database has 1,088 attributes organized into 26 modules and 293,726 anonymized records.

A decision tree-based model is developed, representative and generalizable, following a rigorous Knowledge Discovery in Databases (KDD) process. The process involves several stages, emphasizing the initial phase of conceptual attribute selection, through the application of the CAPTO method to understand the problem domain (Zarate et al., 2023). This phase, which can be considered novel in a KDD process, allows for the conceptual selection of attributes based on prior domain knowledge. After data preparation and transformation, a genetic algorithm-based feature selection process is applied to identify the best features for domain representation through learning models. The results aim to improve the understanding of hypercholesterolemia in young people aged 15 to 25.

2 MATERIALS AND METHODS

2.1 Problem Domain Understanding

The initial step for any properly executed data science project should be understanding the problem domain through tacit and explicit knowledge, subsequently leading to a search for representative datasets. A wellconstituted dataset, derived from problem understanding, enables the construction of more accurate and representative machine learning models (Zarate et al., 2023).

In this work, an initial stage of conceptual attribute selection from the main attributes highlighted by the literature as relevant factors associated with high cholesterol is proposed, using the CAPTO method. During the application of the method, a problem mapping was conducted using informative literature sources and domain specialists, aiming to gain new perspectives, dimensions, and aspects of the problem domain.

The five main dimensions highlighted in the problem understanding process were: health habits, dietary habits, socioeconomic conditions, individual characteristics, and genetics. The conceptual model can be seen in Figure 1. Based on these dimensions, aspects related to the problem domain were selected. Then, attributes are associated with each of these aspects.

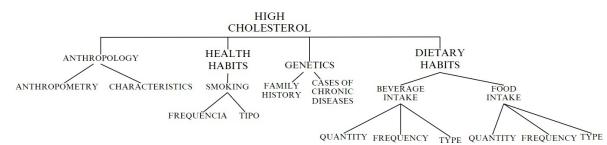


Figure 1: Cholesterol Conceptual Model.

2.2 Conceptual Attribute Selection

The 2019 National Health Survey (PNS) provides a comprehensive view of the health conditions of the Brazilian population, including demographic, socioeconomic, lifestyle, chronic disease, and healthcare access data. The original dataset contains 293,726 records and 1,088 attributes organized into 26 modules of the original questionnaire. For this work, only data instances within the 15 to 25 age range, without null values for the high cholesterol diagnosis attribute (Q060, see Table 1), were selected, resulting in only 391 cases. The number of fully healthy individuals was 8,997, resulting in an initial dataset comprising 9,388 records.

As indicated by the CAPTO method, attributes identified by the conceptual model were used as references to search for a representative dataset for the problem, in this case, the PNS 2019. After selecting attributes mapped by CAPTO, 150 initial attributes were identified, which, after data treatment and preparation, resulted in 26, as shown in Table 1.

2.3 Preprocessing Steps

The first preprocessing step, after the conceptual attribute selection mentioned earlier, was a correlation analysis to identify possible attributes strongly correlated to high cholesterol, which could contribute redundantly to describing the profile of individuals with the disease. For the correlation analysis, a moderate correlation threshold ranging from 40% to 69% was used (Schober et al., 2018). No relevant correlations were found among the attributes present in the dataset.

It is important to note that although the age attribute (C008) was selected, it was not used since the model was built for a predefined age range.

Next, in the second preprocessing step, missing data handling techniques were applied. After identifying the exact number of null values per attribute, an individual analysis was conducted to decide the strategy to apply, considering aspects such as attribute relevance, the proportion of null values relative to the number of instances in the dataset, and the relationship between attributes with their respective questionnaire questions. Strategies employed included imputing missing data and removing instances. Imputation was applied in cases where questionnaire questions were left blank because they did not apply to the participant but could be replaced based on correct responses from other questions. Additionally, to ensure data integrity and quality, specific instances containing multiple null attributes were removed.

The third step consisted of merging the attributes height and weight, resulting in the BMI (Body Mass Index). The calculation for BMI is presented in Equation (1). The attribute fusion process helps reduce dimensionality and improves model interpretation.

BMI = $P00103(Weight)/P00403(Height)^2$ (1)

The fourth preprocessing step consisted of outlier identification, calculated using the lower limit, upper limit, and interquartile range, represented in Equations (2), (3), and (4). The analysis was performed only on BMI, which is the only continuous numerical variable in the dataset.

Lower Limit = $Q1 - 1.5 \times IQR$ (2)

Upper Limit =
$$Q3 + 1.5 \times IQR$$
 (3)

$$IQR = Q3 - Q1 \tag{4}$$

The number of outliers found was 220, equivalent to 2% of the dataset, considered relatively small and acceptable, as they would not significantly distort the model's outcome.

The fifth step involved data encoding. For nominal data, the One Hot Encoding technique was used, avoiding interpretation issues of nonexistent orders and hierarchies, maintaining category independence, and ensuring that machine learning algorithms received the data in an appropriate format for training and prediction. For ordinal categorical data, ranking encoding was used. For continuous

Variable Code	Variable Content	Response Values
C006	Gender	1: Male, 2: Female
C008	Age	Age (years)
Q060	High cholesterol diagnosis?	1: Yes, 2: No, 9: Ignored
P00901	Frequency of vegetable/legume consumption	1-7: Number of days, 9: Ignored
P01101	Frequency of red meat consumption	1-7: Number of days, 9: Ignored
P013	Frequency of chicken consumption	1-7: Number of days, 9: Ignored
P018	Frequency of fruit consumption	1-7: Number of days, 9: Ignored
P02002	Frequency of soda consumption	1-7: Number of days, 9: Ignored
P023	Frequency of milk consumption	1-7: Number of days, 9: Ignored
P02601	Level of salt consumption	1: Very high, 2: High, 3: Adequate, 4: Low, 5: Very low, 9: Ignored
P02602	Frequency of meal substitution for snacks	1-7: Number of days, 9: Ignored
P02501	Frequency of sweet food consumption	1-7: Number of days, 9: Ignored
P015	Frequency of fish consumption	1-7: Number of days, 9: Ignored
P02001	Frequency of juice box consumption	1-7: Number of days, 9: Ignored
P034	Physical exercise or sports practice	1: Yes, 2: No, 9: Ignored
P035	Frequency of physical exercise or sports practice	1-7: Number of days, 9: Ignored
P036	Type of physical exercise or sport	01-17: Types of exercises, 99: Ignored
P02801	Frequency of alcohol consumption	1-7: Number of days, 9: Ignored
P027	Frequency of alcohol consumption	1: I don't drink, 2: Less than once a month, 3: Once or more per month, 9: Ignored
P050	Current tobacco use	1: Yes, daily, 2: Yes, less than daily, 3: No, 9: Ignored
P051	Past tobacco use	1: Yes, 2: No, 9: Ignored
P052	Past daily tobacco use	1: Yes, daily, 2: Yes, less than daily, 3: No, 9: Ignored
P00103	Weight (kg)	1-599: Kilograms
P00403	Height (cm)	1-299: Centimeters, 999: Ignored

Table 1: Attribute Table.

Table 2: Number of instances per class at each stage.

Class	Original Base	Post-processed Base	Training Base
High Cholesterol	391	322	222
No High Cholesterol	8997	7095	222
Sum	9388	7417	444

numerical data, a data discretization technique was applied using the BMI thresholds from the World Health Organization (WHO), to reduce noise in the model.

BMI < 18.5	: Underweight
$18.5 \leq BMI < 24.9$: Normal weight
$25.0 \le BMI < 29.9$: Overweight
$30.0 \leq BMI < 34.9$: Obesity grade I
$35.0 \leq BMI < 39.9$: Obesity grade
II BMI ≥ 40.0	: Obesity grade
III	

Noise can result from small numerical variations present in continuous data, and when removed, it can benefit the decision tree model's ability to find its thresholds, allowing the creation of more meaningful decision intervals.

The sixth step removed instances that resulted in identical records. After the six previous preprocessing steps, 47 attributes and 7,417 records remained in the dataset, as shown in Table 2.

The seventh step involved splitting the data into training and test sets. The proportion used was 70% for training and 30% for testing.

The eighth and final step was data balancing in the training set, performed using undersampling to reduce the majority class and balance the target class distribution in the dataset. This process resulted in a total of 444 instances in the training set. Table 2 shows the number of instances per class at each step.

2.4 Decision Tree Model

The Decision Tree is a supervised learning model that uses a directed acyclic graph structure to make decisions based on data features. A decision tree was chosen for this classification task because of its parametric simplicity, efficiency, and high interpretability. The model underwent hyperparameter optimization through iterative experiments focusing on the most relevant parameters, as suggested in the literature (Shetty et al., 2024). The following hyperparameters were adjusted:

- criterion: Quality criterion used in the nodesplitting function. The supported criteria are 'gini' (Gini index) and 'entropy' (information gain measure).
- **max depth:** Maximum depth of the tree. A higher value allows the tree to grow deeper, capturing more attributes and variability in the data. Values explored were 5, 10, 20, and 50.
- min samples split: Minimum number of

instances required to split a node. Values explored were 2, 5, 10, 20, 30, and 50.

• min samples leaf: Minimum number of samples required to be present in a leaf node. Values explored were 1, 5, 10, 20, 30, and 50.

The best parameters identified for the Decision Tree model were: splitting criterion set as 'gini,' maximum tree depth limited to 5, a minimum of one sample per leaf, and a minimum of two samples needed to perform a split.

2.5 Multi-Objective Genetic Algorithm

In this study, the Non-dominated Sorting Genetic Algorithm II (NSGA-II) was used to identify the best attribute sequence characterizing the dataset. This algorithm uses two main criteria: (a) error minimization, increasing reliability; and (b) minimization of the number of attributes to represent the domain. To achieve this, two guidelines were considered: maximizing accuracy using the Decision Tree classification algorithm and minimizing the number of attributes, a task implicitly performed by NSGA-II. At the end of each run, the algorithm returns the ideal subset of individuals containing 10 chromosomes. The best individual is chosen based on the attribute ranking among the experiments.

2.6 Representativity

Inspired by genetic evolution, NSGA-II explores attributes by creating individuals to compose a population subjected to mutation and recombination processes. Each individual is represented by a binary vector, where attributes are coded as 0's and 1's, indicating the presence or absence of an attribute, as shown in Figure 2. The performance evaluation of each individual is carried out by the Fitness function, which ranks its performance according to the proposed problem.

2.7 Fitness Function

The Fitness function acts as a natural selection mechanism, evaluating each individual and guiding

the evolutionary process to favor those with better performance. In the context of this Machine Learning algorithm, the decision tree was chosen as the base model due to its ability to mitigate overfitting and efficiency in problems with a large number of attributes. Although NSGA-II tends to reduce the number of attributes, chromosomes generated may not always have a reduced attribute count. These factors justify using the decision tree in the Fitness function. The F1-Measure was used as the evaluation metric, prioritizing precision to minimize errors.

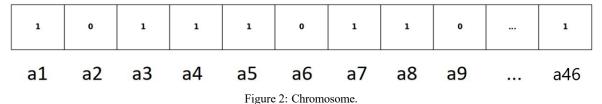
3 EXPERIMENTS AND RESULT ANALYSIS

3.1 Ga Parameters

The genetic algorithm (GA) explores the search space and, with each new generation, adjusts the search direction. To maximize the search space, seeds were selected to generate the first population within an interval of 2⁴⁷, encompassing all possible attribute combinations. Five seeds were used, defining the population size and generations within an interval of 200 and 400. For other parameters, such as crossover probability (PC) and mutation probability (PM), a range of 0.7 to 0.9 was used for PC, and for PM, a range of 0.1 to 0.3 was used. Using intervals for these parameters aims to cover the search space more broadly, creating a possibility to expand the search area and improve the obtained results. Table 3 summarizes these parameters:

3.2 Cut-off Criterion for Attribute Selection

The cut-off point criterion for attribute selection was based on the idea of intersections, as proposed in the article (Reis et al., 2023). This approach allows for an analysis of values in descending order, following the established ranking. To define the cut-off point, attributes with frequencies below half the total were excluded, aligning with the algorithm's convergence line.



Parameters	Values
Seeds	134823916307688; 122466519533640; 11816952573039;
	58264536736136; 6213547046596
Population	204; 404
Generations	200
CrossOverFactor	0.7; 0.9
TournamentSize	2
MutationRate	0.1; 0.3
ElitismFactor	1

Table 3:	Parameters	and their	values.
----------	------------	-----------	---------

Table 4: Decision Tree Rules and Case Distribution.

Rule Description	High Cholesterol Cases	No High Cholesterol Cases	Total Cases
If fruit consumption is low, soda consumption is high, and alcohol consumption frequency is moderate, then the individual has high cholesterol.	25	13	38
If fruit consumption is low, soda consumption is low, and chicken consumption is high, then the individual has high cholesterol.	8	1	9
If fruit consumption is low, soda consumption is moderate, and chicken consumption is low, then the individual does not have high cholesterol.			68

3.3 Experiments

Forty experiments were conducted to find the best result, based on the combinatorial analysis of all parameters. That is, a seed will be combined with each of the population, generation, crossover, and mutation values. After completing all the experiments, an analysis of the frequency of attribute appearances in the resulting subsets was performed, ordering them from the most to the least frequent.

As the algorithm converges, certain attributes tend to recur, enabling descending classification based on frequency. The best attributes were selected using a cut-off point based on the difference of four recurring attributes, opting to draw the cut-off between the attributes "Walking" and "Bicycle or exercise bike," where the difference indicates the ideal cut-off point. In the end, a total of 20 attributes were obtained, leading the decision tree model to achieve 53.78% accuracy when analyzing the best fold resulting from cross-validation.

After analyzing the generated decision tree, it was

observed that only 11 attributes were utilized: P051 2.0, Milk Consumption, P051 1.0, Chicken Consumption, Soda Consumption, Water Aerobics, Physical Exercise in the Last 3 Months, Weightlifting, Exercise Frequency, Fruit Consumption, Dance Class, prompting another experiment based solely on these 11 attributes. After performing the second attribute selection experiment, a total of 6 attributes were selected: Fruit Consumption, Milk Consumption, Soda Consumption, Alcohol Consumption Frequency and Chicken Consumption.

3.4 Result Analysis

After applying the conceptual selection together with attribute selection using the GA, a decision tree model with an F1 Score of 66% was obtained, indicating that despite the limitations found in the available data quantity, it was still possible to generate a model with a reasonable result in classifying young individuals with high cholesterol. From the generated tree, rules were extracted and are represented in Table 4.

Considering the highlighted rules, it can be concluded that one of the main factors for a young individual to have high cholesterol is diet. It is evident that a balanced diet, such as one rich in fruits, is associated with a lower probability of having high cholesterol. This aligns with the findings of (Liu et al., 2021), a study that analyzes the association between fruit consumption and lipid profile among children and adolescents in China. Both highlight that moderate fruit consumption is associated with lower odds of lipid disorders, particularly in younger participants. However, other aspects, such as high sugar and fat consumption, are more decisive factors. The prominence of fat and sugar in the development of high cholesterol becomes clear when observing that all three rules identify low fruit consumption as a factor, but the decisive element is the consumption of animal meat and soda. Similarly, (Sakaki et al., 2022) supports this by analyzing the sugar-sweetened beverage consumption of a sample of 9,043 participants aged between 9 and 16 years. The study indicates that sugar-sweetened beverage intake is associated with hyperlipidemia, whereas like in this work fruit juice consumption is not. Based in the comparison with previous work, the validation of the rules is evident. Furthermore, other factors, such as frequent alcohol consumption, can also influence, especially when combined with high-fat foods, as high consumption of animal fats, like milk and chicken, is widely recognized for significantly increasing the probability of developing hypercholesterolemia.

4 CONCLUSIONS

The results of this study demonstrate that applying machine learning models can effectively help characterize individuals aged 15 to 25 with high cholesterol using data from the 2019 National Health Survey (PNS), despite highlighting the various challenges to achieving this goal. The generated decision tree model presented an F1 Score of 66%, indicating reasonable performance in identifying young people with high cholesterol. This accuracy indicates significant potential to assist in initial screenings, allowing for the early identification of individuals at risk. This could, for example, direct preventive efforts and educational interventions focused on dietary habits and healthy practices among the young population, helping to reduce cardiovascular disease rates in the long term. It contributes to the literature on developing machine characterizing learning models aimed at

dyslipidemias with a combination of techniques of feature selection, expanding the discussion of which variables can be used and how they should be treated. Furthermore, this work explores the understanding of characteristics of individuals with high cholesterol in the PNS (National Health Survey), in an age group that has been underexplored to date and has been growing over the years. Since this work deals with a specific group of individuals in a Brazilian dataset, it is necessary to exercise caution when trying to generalize the conclusions obtained. Even with the dataset being selected based on features related to the problem, the model still suffers from leakage of some attributes, and instances which was re-ally affected by the imbalance of the dataset. It is important to emphasize that this result was achieved in the best fold of crossvalidation, suggesting that despite the model's potential, caution is needed regarding data variability and possible generalization limitations. For future studies, it is recommended to explore additional preprocessing techniques to address the challenges identified in this study, particularly concerning data imbalance and potential attribute leakage. Advanced methods like SMOTE (Synthetic Minority Oversampling Technique) could be applied to mitigate the effects of imbalanced datasets. Furthermore, adopting more sophisticated feature engineering approaches, like the ones presented in this work, could enhance the model's ability to generalize and improve its performance across different datasets. Considering the limitations of the current decision tree model, integrating more advanced machine learning models, such as ensemble methods (e.g., Random Forest, Gradient Boosting) or deep learning techniques, holds promise. In addition, expanding the dataset by including longitudinal data could help capture temporal patterns in dietary habits and cholesterol levels, enabling models to better predict long-term risks. Using and incorporating specific datasets, made to fullfill the feature and instances necessity of the problem. Building on the insights from this study and previous research, future work could delve deeper into diet-related factors. For instance, exploring the relationship between a more precise and complex dietary data and high cholesterol. Validating the rules identified in this study, such as the decisive role of soda and animal meat consumption, through controlled experiments or observational studies in similar age groups, would help confirm their relevance and strengthen their use in predictive models. Contributing to the advancement of data science in healthcare and improving the population's quality of life.

ACKNOWLEDGEMENTS

The authors thank The National Council for Scientific and Technological Development of Brazil (CNPQ); The Coordination for the Improvement of Higher Education Personnel - Brazil (CAPES) (Grant PROAP 88887.842889/2023-00 – PUC/MG, Grant PDPG 88887.708960/2022-00 – PUC/MG -INFORMAT-ICA and Finance Code 001); Minas Gerais State Research Support Foundation (FAPEMIG) under grant number APQ-01929-22, and the Pontifical Catholic University of Minas Gerais, Brazil.

REFERENCES

- Albuquerque, J., Medeiros, A. M., Alves, A. C., Jannes, C. E., Mancina, R. M., Pavanello, C., Chora, J. R., Mombelli, G., Calabresi, L., da Costa Pereira, A., Krieger, J. E., Romeo, S., Bourbon, M., and Antunes,
- M. (2023). Generation and validation of a classification model to diagnose familial hypercholesterolaemia in adults. *Atherosclerosis*, 383:117314.
- Banda, J. M., Sarraju, A., Abbasi, F., Parizo, J., Pariani, M., Ison, H., Briskin, E., Wand, H., Dubois, S., Jung,
- K., Myers, S. A., Rader, D. J., Leader, J. B., Murray, M. F., Myers, K. D., Wilemon, K., Shah, N. H., and Knowles, J. W. (2019). Finding missed cases of familial hypercholesterolemia in health systems using machine learning. *NPJ Digit. Med.*, 2(1):23.
- Calliari, S. S., Grando, L. G., Bertol, C. D., and Siqueira, L.d. O. (2019). Dislipidemia em crianc, as e adolescentes do município de maraurs [dyslipidemia in children and adolescents from the municipality of maraurs]. *Cadernos Saúde Coletiva*, 27(4):368–373.
- Dritsas, E. and Trigka, M. (2022). Machine learning methods for hypercholesterolemia long-term risk prediction. *Sensors*, 22(14):5365.
- Liu, J., Li, Y., Wang, X., Gao, D., Chen, L., Chen, M., Ma, T., Ma, Q., Ma, Y., Zhang, Y., Jiang, J., Zou, Z., Wang, X., Dong, Y., and Ma, J. (2021). Association between fruit consumption and lipid profile among children and adolescents: A national cross-sectional study in China. *Nutrients*, 14.
- Mensah, G. A., Fuster, V., Murray, C. J., and Roth, G. A. (2023). Global burden of cardiovascular diseases and risks, 1990-2022. *Journal of the American College of Cardiology*, 82(25):2350–2473.
- Nogueira de Sá, A. C., Gomes, C. S., Moreira, A. D., Velasquez-Melendez, G., and Malta, D. C. (2022).
 Prevalência e fatores associados ao diagnóstico autorreferido de colesterol alto na população adulta brasileira: Pesquisa nacional de saúde 2019 [prevalence and factors associated with self-reported diagnosis of high cholesterol in the brazilian adult population: National health survey 2019]. *Epidemiologia e Serviços de Saúde*, 31(spe1).

- Pirillo, A., Casula, M., Olmastroni, E., Norata, G., and Catapano, A. (2021). Global epidemiology of dyslipidaemias. *Nature Reviews Cardiology*, 18:689 – 700.
- Reis, D. R., Santos, B. C., Bleicher, L., Zárate, L. E., and Nobre, C. N. (2023). Prediction of enzymatic function with high efficiency and a reduced number of features using genetic algorithm. *Computers in Biology and Medicine*, 158:106799.
- Sakaki, J. R., Gao, S., Ha, K., Chavarro, J., Chen, M.-H., Sun, Q., Hart, J., and Chun, O. K. (2022). Childhood beverage intake and risk of hypertension and hyperlipidaemia in young adults. *International Journal of Food Sciences and Nutrition*, 73:954 – 964.
- Schober, P., Boer, C., and Schwarte, L. A. (2018). Correlation coefficients: Appropriate use and interpretation. *Anesthesia amp; Analgesia*, 126(5):1763–1768.
- Shetty, A. M., Aljunid, M. F., Manjaiah, D. H., and Shaik Afzal, A. M. S. (2024). Hyperparameter optimization of machine learning models using grid search for amazon review sentiment analysis. In Nanda, S. J., Yadav, R. P., Gandomi, A. H., and Saraswat, M., editors, *Data Science and Applications*, pages 451–474, Singapore. Springer Nature Singapore.
- Zarate, L., Petrocchi, B., Dias Maia, C., Felix, C., and Gomes, M. P. (2023). Capto - a method for understanding problem domains for data science projects: Capto - um método para entendimento de domínio de problema para projetos em ciência de dados. *Concilium*, 23(15):922–941.