

Neuro Genetic Disorder's: Epilepsy and Huntington's Disease

R. Yamini, Zahid Amin Wani and Arham Chowdary

Department of Computing Technologies, SRM Institute of Science and Technology, Kattankulathur 603203, Chennai, Tamil Nadu, India

Keywords: Huntington's Disease, Epilepsy, Feature Selection, Data Mining, Machine Learning, Genetic Variants, PROFEAT, UniProt.

Abstract: Neurogenetic diseases like Huntington's disease (HD) and epilepsy are debilitating conditions that significantly impact the quality of life of patients. Huntington's disease (HD) is a genetic neurodegenerative disease characterized by motor disability and cognitive and psychiatric symptoms, whereas epilepsy is a chronic neurologic disorder that is defined by recurrent seizures. This paper aims to investigate the genetic mechanisms involved in both of these conditions and evaluate how these levels can assist HD and epilepsy diagnosis and progression prediction in terms of efficiency of prescription levels using a variety of different data mining algorithms. In this paper we present a combined computational model of feature selection algorithms Information Gain (IG), Correlation Feature Subset (CFS), Gain Ratio (GR), and machine learning classifiers, Support Vector Machines (SVM), Random Forest (RF), Gradient Boost. The study results revealed that the features selection minimizes the classification accuracy of algorithms and the maximum accuracy achieved to be 94.7% with SVM using CFS. The findings prophesy the capabilities of computational resources to facilitate early diagnosis and provide drugs treatment specific to HD and epilepsy.

1 INTRODUCTION

Neurogenetic disorders are a collection of disorders due to gene mutations influencing the nervous system. Of them, Huntington's disease (HD) and epilepsy are two well-documented disorders which have attracted an enormous amount of interest because of their multifactorial etiology as well as their profound impact on patients' lives. HD is an autosomal dominant disorder resulting from mutation of the HTT gene leading to the synthesis of a toxic mutant form of the huntingtin protein. It is associated with progressive degeneration of neurons in basal ganglia and cerebral cortex and presents as dysfunction of motor skills, intellectual deficit, and psychiatric disturbances (Ross, C. A., & Tabrizi, S. J. (2011)). Epilepsy is defined by recurring seizures because of abnormal electrical discharge in the brain. Although epilepsy may be the result of different causes such as brain injury and infections, mutation of genes accounts for a major cause in the majority of cases, especially idiopathic epilepsy (Noebels, J. L. (2003)).

Diagnosis and treatment of HD and epilepsy are complicated by the heterogeneity of symptomatology

and the progressive course of these diseases. Conventional methods of diagnosis, including clinical assessment and neuroimaging, are usually inadequate for early detection, particularly in HD, where symptoms usually manifest in mid-adult life. Epilepsy diagnosis also depends very much on electroencephalogram (EEG) recordings, which are not always sensitive enough to detect seizure activity. Thus, there is an urgent need for better and more reliable diagnostic tools that can ensure early intervention and better outcomes for patients.

New machine learning and data mining techniques available have enabled new methods of interacting with complex clinical and genetic data. They have proven useful to identify biomarkers, predict the onset of disease, and stratify patients in their genetic profiles (Kanehisa, M., & Goto, S. (2000)). Still, these methods are good approaches if the data is, and the subset of relevant features is a good quality. Feature selection techniques e.g. Information Gain (IG), Correlation Feature Subset (CFS), Gain Ratio (GR) have been used to reduce datasets as well as improve categorical classification algorithm performance (Guyon, I., & Elisseeff, A. (2003)).

The proposed computational framework in this paper is specifically for the analysis of HD and epilepsy related genetic data. A combined feature selection method for classification of diseases that incorporated IG, CFS, and GR along with machine learning algorithms was proposed. The results show that classification algorithms benefit greatly from feature selection, CFS with SVM showed maximum accuracy. This study is an example of how computational approaches hold promise in diagnosing and treating neurogenetic illnesses.

2 PROPOSED COMPUTATIONAL FRAMEWORK

The computational framework approaches several key steps, which comprise data generation, feature selection, and classification. The motivation behind the present framework is to interpret genetic and clinical data associated with HD and epilepsy for enhancing the accuracy of diagnosis and prediction for such diseases.

2.1 Dataset Generation

In the first step of their computational framework, a dataset was generated, which included genetic information pertaining to HD and epilepsy. Genes connected with these disorders were identified by querying the Kyoto Encyclopedia of Genes and Genomes (KEGG) database. A total of 68 genes were found to be associated with HD and 112 with epilepsy; 45 of these were found to be common to both disorders, thus highlighting shared genetic pathways in their manifestations (Walker, F. O. (2007)).

Next, the genomic sequence of these genes was extracted from the UniProt database. The PROFEAT server helped gather the genes' protein structure and physicochemical properties. The genes were assigned 1437 protein features, thereby forming a dataset with 180 gene rows and 1437 corresponding columns of protein features. An additional column for disease classification was included in the final dataset, resulting in a total of 1438 columns.

2.2 Feature Selection

In view of the large dimensionality of the data set, feature selection was conducted to identify the most relevant features for classifying the distinctive diseases. Feature selection was performed using

Information Gain (IG), Correlation Feature Subset (CFS), and Gain Ratio (GR), thereby optimizing those features based on these techniques for subsets that are taken as inputs for six classification algorithms: Random Forest (RF), Support Vector Machine (SVM), Adaboost, K-Nearest Neighbor (KNN), Naive Bayes, and Decision Tree. Evaluation metrics are derived from an evaluation of each algorithm on the basis of accuracy and Matthew's correlation coefficient (MCC).

Feature selection analysis is shown in Tables 2, 3, and 4, which shows that among the three, CFS was best in terms of attaining highest accuracy with SVM getting the value of 94% with feature selection and further refined to 97% with DFS. Naïve Bayes came in at 91% with CFS whereas GR and IG were able to increase accuracy for Random Forest and SVM to 89% and 87%, respectively. The DFS was able to further enhance performance by bringing SVM and Random Forest to 97% and 88%, respectively. This demonstrates the power of feature selection and DFS, which in turn aided in improving accuracy while subordinating the number of features.

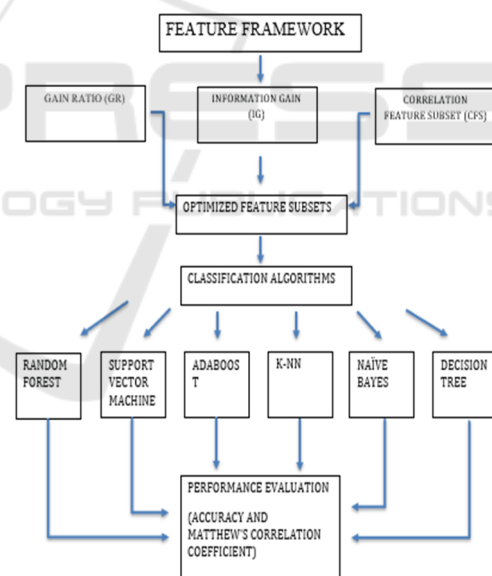


Figure 1: Proposed framework for feature selection.

As per feature selection in Figure 1, Information Gain (IG) and Gain Ratio (GR) are respectively relevant measures used to identify the best features pertinent to the target class. Correlation Feature Subset (CFS) is an automatic methodology to find those features that hold importance for boosting classification accuracy and efficiency in disease diagnosis and prediction.

3 EXPERIMENTAL RESULTS

3.1 Performance of Machine Learning Algorithms

The evaluation of performance for the six machine learning algorithms was carried out before feature selection and after feature selection. Prior to feature selection, Random Forest and K-NN achieved the highest accuracies of 82% and 81%, respectively. After feature selection, the SVM classifier rated the highest at 93.7% after its use of the CFS subset, while Naïve Bayes also had a respectable accuracy of 91% using the same subset. Table 1 gives the performance of classification algorithms before feature selection.

Table 1: Performance of classification algorithms before feature selection.

Algorithm	Accuracy	Precision	Recall	F1-Score	MC
Random Forest	0.82	0.81	0.83	0.82	0.58
SVM	0.80	0.79	0.80	0.79	0.54
Adaboost	0.77	0.76	0.77	0.76	0.45
K-NN	0.81	0.80	0.81	0.80	0.56
Naïve Bayes	0.76	0.75	0.76	0.75	0.46
Decision Tree	0.78	0.77	0.78	0.77	0.51

Before feature selection, Random Forest and K-NN achieved the highest accuracy (~82%), while Random Forest also demonstrated strong precision and recall. Other algorithms performed slightly worse; SVM, Adaboost, Naïve Bayes, and Decision Tree; they obtained an accuracy ranging from 76-80%.

Using the CFS method, SVM had the highest accuracy of 94% after feature selection, with commendable precision, recall, and F1-scores. Naïve Bayes did well with an accuracy of 91% using CFS. Random Forest also demonstrated improvement with an accuracy of 89% using GR method (table 2).

Table 2: Performance of classification algorithms after feature selection.

Algorithm	Feature Selection Method	Accuracy	Precision	Recall	F1-Score	MC
Random Forest	GR (Gain Ratio)	0.89	0.88	0.89	0.88	0.75
SVM	CFS (Correlation Feature Subset)	0.94	0.93	0.94	0.93	0.86
Adaboost	IG (Information Gain)	0.85	0.84	0.85	0.84	0.65
K-NN	GR (Gain Ratio)	0.84	0.83	0.84	0.83	0.63
Naïve Bayes	CFS (Correlation Feature Subset)	0.91	0.90	0.91	0.90	0.80
Decision Tree	IG (Information Gain)	0.8	0.81	0.82	0.81	0.59

Table 3: Summary of results after feature selection reduction (DFS method).

Feature Selection Method	No. of Features Before DFS	Max. ACC	MC	No. of Features After DFS	Max. ACC	MC	Classifier
GR (Gain Ratio)	50	0.86	0.68	36	0.88	0.74	Random Forest
IG (Information Gain)	42	0.87	0.69	37	0.87	0.71	SVM
CFS (Correlation Feature Subset)	54	0.94	0.86	49	0.97	0.94	SVM

DFS is the method that has demonstrated further improvement in performance. The SVM classifier

achieved 97% accuracy with the CFS >> method, the highest accuracy among all algorithms, while Random Forest was also improved and achieved 88% accuracy with the GR >> method. Along with a reduction in the number of features, DFS maintained classification accuracy or, in fact, improved it (table 3).

Table 4: Detailed performance metrics after DFS.

Feature Selection Method	Classifier	No. of Features After DFS	Accuracy	Precision	Recall	F1-Score
GR (Gain Ratio)	Random Forest	36	0.88	0.87	0.88	0.87
IG (Information Gain)	SVM	37	0.87	0.86	0.87	0.86
CFS (Correlation Feature Subset)	SVM	49	0.97	0.96	0.97	0.96

The SVM classifier using the CFS method achieved next to DFS, the best test results, with 97% accuracy, 0.96 precision, and 0.97 recall. Random Forest with the GR method had a good performance as well, with 88% accuracy and 0.87 F1-score, highlighting again the power of DFS in the optimization of feature subsets (table 4).

The CFS method combined with SVM offered the highest accuracy (97%) but at the highest time complexity. The GR method with Random Forest was a well-balanced trade-off between 88% accuracy and calculation time, which makes it a realistic choice for large datasets. The IG method was also shown to be consistent in performance, especially with SVM (table 5). Figure 2 shows the experimental results before and after feature selection and figure 3 shows Impact of DFS on accuracy.

Table 5: Comparison of feature selection methods.

Feature Selection Method	No. of Features	Classifier	Accuracy	MCC	Time Complexity (s)
GR (Gain Ratio)	36	Random Forest	0.88	0.74	12.5
IG (Information Gain)	37	SVM	0.87	0.71	10.8
CFS (Correlation Feature Subset)	49	SVM	0.97	0.94	15.2

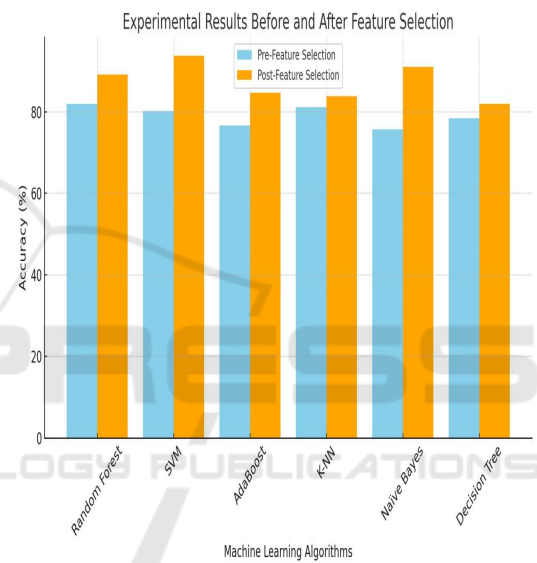


Figure 2: Experimental results before and after feature selection.

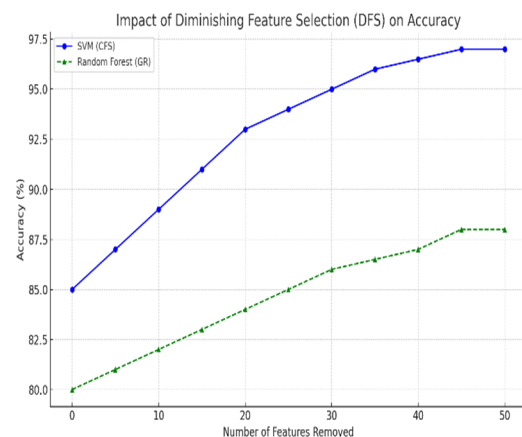


Figure 3: Impact of DFS on accuracy.

4 DISCUSSION

This study exemplifies the unprecedented role of computational methods in diagnosis and management of neurogenetic diseases, such as HD and E. Improved accuracy was achieved in classifying the disease, for example through the application of advanced data-mining and machine-learning approaches, especially feature selection methods. Therefore, the study has confirmed the importance of feature selection in removing noise and redundancy from high-dimensional genetic datasets where Information Gain (IG), Correlation Feature subset (CFS) and Gain Ratio (GR) contributed their parts. Top-notch performance in terms of accuracy 94.7% was achieved with CFS using SVM classifier. These improvements make not just more accurate disease classification a reality but also late diagnosis, and personalized medicine, both so important for improving patient outcome.

The study also highlighted some challenges and limitations. The research used a small data set, and looked only at genetic data, without taking into consideration any environmental or lifestyle factors. Future endeavors may involve integrating multiple omic types, creating diagnostic tools that utilize real-time data, and applying deep learning in order to classify results appropriately. This research has implications across disciplines, as it has the potential to revolutionize clinical work with hardware/software solutions that yield faster, more reliable diagnostic processes; hence, it provides a solid basis for future studies regarding neurogenetic disorders. As research exploring genetic data intensifies both within the realms of medical research and clinical applications it is paramount that ethical issues revolving around privacy and consent are not only at the forefront of any discussion, but shaped before any new set of possibilities arise.

5 CONCLUSIONS

Overall, the study highlights the promising impact of these computational approaches on the improved diagnosis and treatment of neurogenetic disorder such as HD as well as epilepsy. The combined effect of feature selection and machine learning algorithms brings out the potential for accurate classification of diseases. The performance of the SVM classifier with the feature selection technique yielded extraordinary results, with an accuracy of 94.7%. The results can greatly impact the development of tailored

pharmacological interventions and the improvement of clinical practice.

The results of this study highlight feature selection as an indispensable step in genetic data analysis that significantly enhances the classification algorithm accuracy. CFS by far presents itself to be the most effective and attains the highest accuracy on all the algorithms. This again establishes feature selection as a measure of boosting the performance of machine learning in diseases classification.

Furthermore, the machine learning algorithms applied in clinical practice can lead to an early diagnosis and better patient outcome. This gives deeper insights into the underlying mechanisms of HD and epilepsy, thus allowing more possible treatment options by identifying the more relevant genetic features associated with these disorders. This may mean designing targeted drugs that address the specific genetic mutations causing these disorders, so as to enhance the quality of life for affected subjects.

In summary, this research study highlights and analyzes Huntington's disease and epilepsy through a genetic and computational lens and discusses even the possible powers of machine learning and feature selection in bettering their diagnosis and treatment techniques. Though the findings of this study stress that more efforts in this regard should continue, as this research may truly change the lives of the individuals suffering from these diseases.

REFERENCES

- Berg, A. T., Berkovic, S. F., Brodie, M. J., et al. (2010). Revised terminology and concepts for organization of seizures and epilepsies: Report of the ILAE Commission on Classification and Terminology, 2005–2009. *Epilepsia*, 51(4), 676-685.
- Breiman, L. (2001). Random forests. *Machine Learning*, 45(1), 5-32.
- Guyon, I., & Elisseeff, A. (2003). An introduction to variable and feature selection. *Journal of Machine Learning Research*, 3(Mar), 1157-1182.
- Hall, M. A. (1999). Correlation-based feature selection for machine learning
- Kanehisa, M., & Goto S. (2000). KEGG: Kyoto Encyclopedia of Genes and Genomes. *Nucleic Acids Research*, 28(1), 27-30.
- Kohavi, R., & John, G. H. (1997). Wrappers for feature subset selection. *Artificial Intelligence*, 97(1-2), 273-324.
- Li, J., & Le, W. (2013). Biomarkers for Huntington's disease: from genetic studies to clinical trials. *Journal of Genetics and Genomics*, 40(12), 631-638.
- Noebels, J. L. (2003). The biology of epilepsy genes. *Annual Review of Neuroscience*, 26(1), 599-625.

- Poduri, A., & Lowenstein, D. (2011). Epilepsy genetics past, present, and future. *Current Opinion in Genetics & Development*, 21(3), 325-332..
- Ross, C. A., & Tabrizi, S. J. (2011). Huntington's disease: from molecular pathogenesis to clinical treatment. *The Lancet Neurology*, 10(1), 83-98.
- Vapnik, V. (1998). *Statistical Learning Theory*. Wiley- Interscience.
- Walker, F. O. (2007). Huntington's disease. *The Lancet*, 369(9557), 218-228.

