Machine Learning Algorithms for Predicting Chronic Obstructive Pulmonary Disease from Gene Expression Data with Class Imbalance

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Keywords: Microarray Data, Gene Expression, COPD, Machine Learning, Class Imbalance.

Abstract: Chronic obstructive pulmonary disease (COPD) is a progressive inflammatory lung disease that causes breathlessness and leads to serious illness including lung cancer. It is estimated that COPD caused 5% of all deaths globally in 2015, putting COPD as the three leading causes of death worldwide. This study proposes methods that utilize gene expression data from microarrays to predict the presence or absence of COPD. The proposed method assists in determining better treatments to lower the fatality rates. In this study, microarray data of the small airway epithelium cells obtained from 135 samples of 23 smokers with COPD (9 GOLD stage I, 12 GOLD stage II, and 2 GOLD stage III), 59 healthy smokers, and 53 healthy non-smokers were selected from GEO dataset. Machine learning and regression algorithms performed in this study included Random Forest, Support Vector Machine, Naïve Bayes, Gradient Boosting Machines, Elastic Net Regression, and Multiclass Logistic Regression. After diminishing imbalance data effect using SMOTE, classification algorithms were performed using 825 of the selected features. High AUC score was achieved by elastic net regression and multiclass logistic regression with AUC of 89% and 90%, respectively. In the metrics including accuracy, specificity, and sensitivity, both classifiers also outperformed the others.

1 INTRODUCTION

Chronic obstructive pulmonary disease (COPD) is a progressive inflammatory lung disease that restricts airflow from the lung and imposes a significant burden on daily patient's lives. COPD becomes one of the significant risk factors for developing lung cancer (Sekine et al., 2012). According to WHO, COPD caused 5% of all deaths globally in 2015 and in 2020, it is estimated that 4.7 million out of 68 million deaths worldwide will be caused by COPD (Lopez-Campos et al., 2016). COPD is often noticed when the condition has caused major lung damage. It is difficult to detect COPD in the early stage because the symptoms only appear after significant lung damage has occurred. With current computational technologies, developing machine learning algorithms, and better access to health and disease-related data, opportunities for detecting COPD in the early stage will be improved. Anakal, S. & Sandhya, P. (2017) highlighted the need of employing machine learning algorithm in designing Clinical Decision Support Systems to classify the different stages of COPD in patients. By employing machine learning algorithms, Yao, Yangwei, et al (2019) identified 38 genes which associated with the pathogenesis of COPD and ILD (interstitial lung disease). The identified genes can be used to assist in determining better treatments for COPD and ILD.

Studies of diseases are commonly conducted by using gene expression data which can reveal components of the genome that are significantly changed to help us understand which biological processes are affected (e.g., Qian et al., 2014). However, gene expression data analysis and handling are complex and difficult tasks since the number of experiments is less than the number of genes or probes which usually used as features. Furthermore, platform differences resulting in batch effects, different experimental conditions, and the lack of uniformity in experimental annotation become the major challenge.

What makes this challenge even more difficult is that the presence of class imbalance, i.e., the number

Mahmudah, K., Purnama, B., Indriani, F. and Satou, K.
Machine Learning Algorithms for Predicting Chronic Obstructive Pulmonary Disease from Gene Expression Data with Class Imbalance.
DOI: 10.5220/0010316501480153
In *Proceedings of the 14th International Joint Conference on Biomedical Engineering Systems and Technologies (BIOSTEC 2021) - Volume 3: BIOINFORMATICS*, pages 148-153
ISBN: 978-989-758-490-9

of data represented in one class is smaller than other classes. The minority class is usually the main interest since classifiers will degrade their performance on this class while biased towards the majority class. Class imbalance problem has become an important issue in the field of machine learning and remains as one of the major difficulties in intelligent computer systems. Researchers in this field have developed techniques to solve this problem. One of the methods to deal with class imbalance is by resampling the original dataset either by oversampling or undersampling (Chawla et al., 2002).

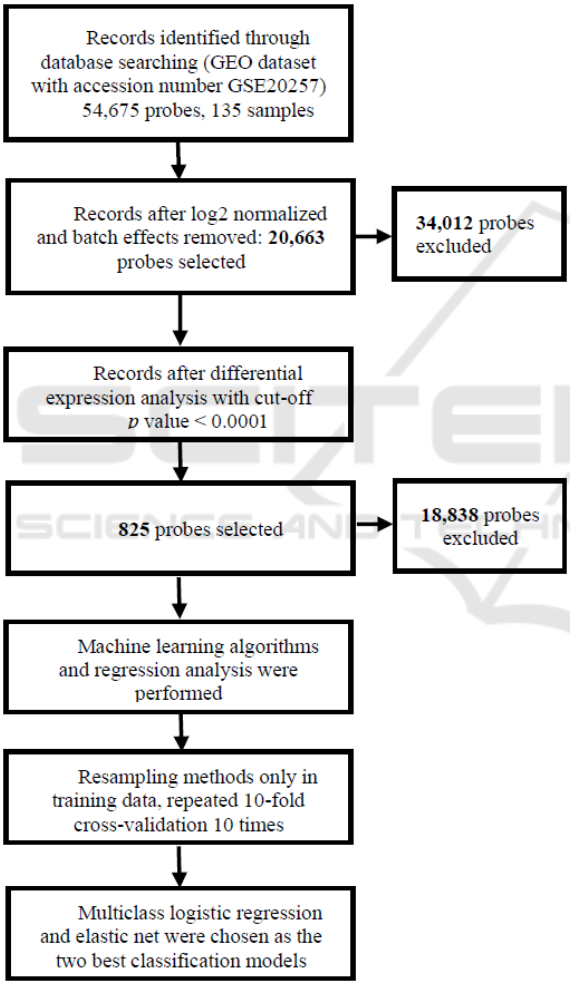

Figure 1: Flowchart of this study plan.

This study was designed to solve the problem using some machine learning algorithms by dealing with class imbalance using synthetic minority oversampling technique (SMOTE). For comparison, we also performed other different resampling methods of the "caret" package. The flowchart of this study is shown in Figure 1.

The rest of this document describes our methods in detail. In section 2, we describe the material and methods used for this study. It briefly discusses data selection methods to increase model performance. We briefly describe machine learning and regression algorithms suitable for this analysis and the evaluation metrics used for assessing the performance of our proposed method. Section 3 discusses the experiment and result. Finally, section 4 concludes this paper.

2 MATERIAL AND METHODS

2.1 Dataset

We used microarray dataset of the small airway epithelium (SAE) provided by the Gene Expression Omnibus (GEO) database, https://www.ncbi.nlm.nih.gov/geo/, with accession number GSE20257. It is a series of GPL570 platform which described as Smoking-induced Disarray of the Apical Junctional Complex Gene Expression Architecture in the Human Airway Epithelium. The airway epithelial cells were obtained by bronchoscopy and brushing which were done by Crystal Laboratory of Department of Genetic and Medicine, Weill Cornell Medical College. The data were originally collected on June 27, 2011 and were updated recently on March 25, 2019. The gene expressions are arranged in GeneChip HG-U133 Plus2.0 arrays, a single array representing around 14,500 well-characterized human genes that can be used to explore human biology and disease processes (ThermoFisher, 2001).

The dataset contains gene expression data of 135 human subjects with the total number of 54,675 probes. Out of 135 subjects, 23 subjects are smokers with COPD (9 GOLD stage I, 12 GOLD stage II, and 2 GOLD stage III), 59 subjects are healthy smokers, and 53 subjects are healthy nonsmokers.

The data were log2 normalized, removing batch effects using "affy" and "biobased" R packages provided by Bioconductor. Differential expression analysis was then performed using "Limma" package to select probes that were significantly changed in healthy non-smokers compared to COPD patients. These selected probes were then used in the machine learning algorithms. The probe selection is aimed at reducing the dimension of the dataset, which is essential to reduce the computational cost

of modelling. Furthermore, removing unneeded, irrelevant, and redundant attributes that statistically do not contribute to the accuracy and other evaluation metrics of a predictive model can improve the model's performances.

2.2 Machine Learning (ML)

We employed various machine learning models including support vector machine (SVM), naïve bayes, random forest, gradient boosting machine (GBM), and regression models included elastic net regression and multiclass logistic regression (LR) for the classification task. All ML and regression methods were applied using "caret", "e1017", "nnet", and "naivebayes" R packages.

Elastic net is one of regularized regression models which use a linear combination penalty of L_1 and L_2. It combines the strength of the other two regularized regression models, ridge and lasso regression. Parameter α in elastic net regression has a value between 0 and 1. The aim of the elastic net regression model was to minimize the loss function.

Multiclass LR is an extension of binary logistic regression. This model allows us to predict categorical response variable which has more than two outcomes. This model aims at capturing the linear relationship between the response variables and the independent variables.

2.3 Synthetic Minority Over-sampling Technique (SMOTE)

A dataset is called imbalanced if the classes are not approximately equally distributed. Imbalance is a challenging problem for classification algorithms because the classifier's decision is biased toward the majority class. Dominating effects of the majority class exert severe impact on the value and meaning of most of the evaluation metrics (Luque et.al. 2019).

One of the prominent methods to solve class imbalance is to resample the original dataset either by oversampling the minority class and/or undersampling the majority class (Chawla et al., 2002). SMOTE utilizes a *k*-nearest neighbor algorithm to create synthetic samples based on the existing minority samples.

2.4 Evaluation Metrics of Predictive Models

To evaluate the performance of the proposed classification models, the mean accuracy, AUC, sensitivity, and specificity were calculated for each model. Sensitivity and specificity are important evaluation metrics for evaluating a model's ability to recognize positive and negative outcomes of a disease-related dataset. (Trtica-Majnaric et al., 2010).

Various evaluation metrics such as accuracy, sensitivity, and precision are derived from confusion matrix. Table.1 shows the possible nine outputs of classification models for three classes 1,2, and 3. It represents the elements of a 3×3 confusion matrix as described in Tharwat A. (2018).

In Table 1, the columns represent the predicted classes, and the rows represent the actual classes. We then have the numbers of nine cases where TP_1 is the case for which the classifier predicted as class-1 and the sample were actually class-1, and E_{12} is a sample from class-1 that misclassified as class-2. Thus, the false negative in the class-1 (FN_1) is the sum of E_{12} and E_{13} $(FN_1 = E_{12} + E_{13})$ which indicates the sum of all samples that were actually class-1 but were misclassified as class-2 or class-3. Whereas the false positive in the class-1 (FP_1) is the sum of E_{21} and E_{31} $(FP_1 = E_{21} + E_{31})$ which indicates the sum of all sample that actually were not class-1 but were misclassified as class-1.

Table 1: An illustrative example of the confusion matrix for a 3-class classification test.

Predicted Class \ True Class	1	2	3
1	**TP_1**	E_{21}	E_{31}
2	E_{12}	**TP_2**	E_{32}
3	E_{13}	E_{23}	**TP_3**

In the "caret" packages, the accuracy is defined as the overall accuracy using the predicted classes, while sensitivity and specificity are defined as the averages of the "one versus all" statistics. As described in Ballabio et al., (2018), the overall accuracy is computed as follows:

$$Acc = \frac{\sum_{i=1}^{l} TP_i}{n} \quad (1)$$

where TP_i is the number of true positive samples in class-*i*, and n is the total number of samples. Accuracy shows how accurate our classification model is able to predict the class labels given in the

problem statement. In other word, the best selected model has the highest accuracy.

Sensitivity for multiclass classification is computed as follows:

$$Sn = \frac{\sum_{i=1}^{g} Sn_i}{g} \quad (2)$$

where Sn_i is sensitivity for class-i and g is the total number of classes. Sn_i can be calculated as follows:

$$Sn_i = \frac{TP_i}{TP_i + FN_i} \quad (3)$$

On the other hand, specificity for multiclass classification is computed as follows:

$$Sp = \frac{\sum_{i=1}^{g} Sp_i}{g} \quad (4)$$

where Sp_i is specificity for class-i. Sp_i can be calculated as follows:

$$Sp_i = \frac{\sum_{k=1}^{g} (n_k - E_{ik})}{n - n_i} \quad (5)$$

Sensitivity shows the ability of a model in correctly identifying positive data out of all actual positives data. In contrast, specificity shows the ability of a model in correctly identifying negative data out of all actual negative data. The higher the sensitivity and specificity, the better the model in correctly identifying data that belong to a certain class as well as a data that do not belong to the class.

To calculate AUC score, we used `multiclass.roc` function from pROC packages which computed multiclass AUC as an average AUC defined by Hand and Till (2001). For multiple classes labelled as $0,1,2,\ldots,(c-1)$ with $c > 2$, the separability between class *i* and *j* or *auc* is defined as follows:

$$auc = \frac{\hat{A}(i|j) + \hat{A}(j|i)}{2} \quad (6)$$

where $\hat{A}(i|j)$ is the probability shows that if we draw a member of class *j* randomly, the estimated probability of *j* belongs to class *i* will be lower than if if we randomly draw a member of class *i* instead. This also applies to the reverse case. For multiclass case $\hat{A}(i|j) \neq \hat{A}(j|i)$.

$$AUC = \frac{2}{c(c-1)} \sum aucs \quad (7)$$

with aucs all the pairwise roc curves.

The best model is selected based on the highest value of the four evaluation metrics. The higher the AUC, the better the model in distinguishing a positive example from a negative one.

2.5 Evaluation of Resampling Methods

In the experiment, we performed SMOTE algorithm using two different CRAN packages "DMwR" and "smotefamily". We also performed down-sampling and up-sampling for comparison. Up-sampling works by randomly sampling a dataset so that all classes have the same number of samples as majority class. On the contrary, down-sampling will randomly sample a data set so that all classes have the same number of samples as the minority class.

To evaluate the performance of all the classifiers, we performed repeated *k*-fold cross-validations as it is a very common technique used for this purpose. This evaluation technique improves the performance of machine learning algorithms and regression by repeating the *k*-fold cross-validation procedure *n* times and reporting the mean result of all folds from all runs. Filzmoser (2009) shows that repeated cross validation is a good strategy for optimizing the complexity of regression models as well as machine learning models.

3 EXPERIMENTS AND RESULT

The gene expression data usually contain unneeded, irrelevant, and redundant attributes during the collection process of the data. In the first step before performing classification model, we removed unneeded attributes so that our proposed classification method will be more accurate. In this data pre-processing, the raw data downloaded from GOE dataset were log2 normalized using "biobased" R package, removed batch effects and unwanted variation using "affy" package, and compared statistically or analysed for differential expression using "Limma" package.

After removing batch effects in the data pre-processing, 20,663 probes were selected out of 54,675 probes. We then identified 825 probes which were significantly changed with p value < 0.0001 in COPD subjects compared to healthy non-smoker subjects as shown in Figure 2.

The dataset was splitted into training and test set with percentage of 80% and 20% respectively. We then applied SMOTE only in the training data to resample the data. The oversampled data were included in machine learning and regression modelling approaches with repeated 10-fold cross-validations 10 times.

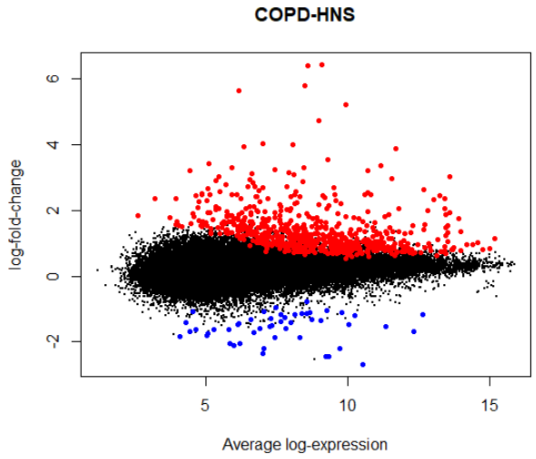

Figure 2: Mean difference (MD) plot displays log2 fold change versus average log2 expression values for all the 54,675 probes. Highlighted genes are significantly differentially expressed in COPD compared to healthy non-smoker (red = upregulated, blue = downregulated).

3.1 Comparison of Machine Learning Algorithm and Regression Analysis

Table 2 shows the accuracy and AUC score of the machine learning models of SVM, naïve bayes, random forest, GBM, and regression model of elastic net regression and multiclass LR with and without applying SMOTE to deal with class imbalance.

Table 2: Accuracy and AUC for different models.

Classifier	Accuracy (%)	AUC (%)
SVM	68	73
+*SMOTE*	68	85
Naïve Bayes	48	70
+*SMOTE*	64	76
Random Forest	48	60
+*SMOTE*	64	81
GBM	64	81
+*SMOTE*	56	70
Elastic Net	64	71
+*SMOTE*	76	89
Multiclass LR	72	82
+*SMOTE*	80	90

Based on repeated 10-fold cross-validations 10 times, all the performance increased in the models with SMOTE compared to those without SMOTE except for GBM. This indicated that SMOTE is effective when dealing with class imbalance.

The best performance is obtained by multiclass LR with SMOTE with the highest overall accuracy score and AUC of 80% and 90%, respectively. This model also has the highest sensitivity and specificity value of 0.80 and 0.89, respectively, as shown in Table 3. This high sensitivity and specificity in the model indicate that the model can be used to correctly classify subjects that belong to a certain class as well as a subject that did not belong to the class.

The second-best model based on the evaluation metrics is elastic net regression which obtained a slightly different of accuracy and AUC score from that of multiclass LR with 76% and 89%, respectively.

Table 3: Average sensitivity and specificity for different models.

Classifier	Sensitivity	Specificity
SVM	0.53	0.81
+SMOTE	0.70	0.82
Naïve Bayes	0.44	0.71
+SMOTE	0.67	0.80
Random Forest	0.37	0.69
+SMOTE	0.61	0.81
GBM	0.57	0.80
+SMOTE	0.50	0.76
Elastic Net	0.56	0.80
+SMOTE	0.76	0.87
Multiclass LR	0.67	0.84
+SMOTE	0.80	0.89

3.2 Comparison of Resampling Methods

Table 4: AUC for multiclass LR with different resampling methods.

Resampling methods	AUC of Multiclass LR (%)
Without resampling	82.4
SMOTE from “DMwR”	90.1
SMOTE from “smotefamily”	89.3
upSample	87.4
downSample	78.1

We performed different resampling methods in multiclass LR to see the effect of those on the model performances. We employed two SMOTE functions from two different packages. The difference between SMOTE of “DMwR” and “smotefamily” packages is that SMOTE in “DMwR” uses a combination of SMOTE and under-sampling of the majority class while in “smotefamily” do not. So that, in “DMwR” we need to tune the two parameters `perc_over` and `perc_under` in the smote function until we get an acceptable sample size. In this function, we set `perc_over` to 200 and `perc_under` to 300. For

comparison, we also performed up-sampling and down-sampling.

By dividing 80% of the dataset as training data and 20% as validation data, 110 out of 135 data samples were used as training data which consist of 43 samples of healthy non-smokers, 48 samples of healthy smokers, and 19 samples of COPD. `upSample` function of "caret" package randomly samples the dataset so that all classes have 48 samples, while `downSample` randomly samples the dataset so that all classes have 19 samples.

Table 4 shows the AUC values for multiclass LR of different resampling methods. The AUCs of SMOTE from both "DMwR" and "smotefamily" are quite similar with the difference of only 0.8%. Considering that both packages give insignificantly different outcomes, we can randomly choose to use one of the SMOTE functions from both packages. As comparison, resampling the dataset using `upSample` function increased the AUC performance by 5% while `downSample` decreased the performance by 4.3%. However, the AUC performance of upSample function is still lower than that of SMOTE either using "DMwR" or "smotefamily". The models trained with SMOTE outperformed the models without SMOTE in the four evaluation metrics.

4 CONCLUSION

In this study, we used microarray dataset to predict the presence of COPD by dealing with the class imbalance at first. Prior study on this dataset have tried to predict the presence of COPD regardless of the existence of class imbalance.

The model we proposed can predict the presence of COPD with an overall accuracy and AUC score of 80% and 90% respectively, based on repeated 10-fold cv 10-times. The outcomes indicate that by dealing with class imbalance before performing machine learning algorithms and regression analysis can be used to predict the presence of COPD more accurately. Our proposed methods also have higher sensitivity and specificity values than that without dealing with class imbalance. It shows that the selected model can be used to correctly classify subjects that belong to a certain class as well as a subject that did not belong to the class. The proposed method in this study can be used to assist in determining better treatments to lower the fatality rates caused by COPD.

In the future study, we are considering to employ more recent and advanced resampling methods to achieve a better performance.

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