

# **CS5540: Computational Techniques for Analyzing Clinical Data**

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# Today's topic

- How do we decide that an ECG is shockable or not?
  - Key to project 1 (out next week)
- Simple versions first
  - There are whole courses on this area
    - Machine learning
  - We're going to do it correctly but informally



# Simple example

- Suppose you have a single number that summarizes an ECG
  - Examples: beats per minute; “normalcy”
- How can you make a decision on whether to shock or not?
  - Depending on number, might be impossible
    - More subtly, you’d like to figure this out...
  - We’ll assume that the number has a reasonable amount of useful information
    - A real-valued “feature” of the ECG



# Problem setup

- We'll give you some ECG's that are labeled as shockable and not ("training set")
  - Assume 1 = shock, 0 = don't shock
  - Presumably your shockable examples will tend to have a value around 1, and your non-shockable ones a value around 0
- Your job: get the right answer on a new set of ECG's ("test set")
- Q1: how can we do this?
- Q2: how can we be confident we're right?



# Procedural approaches

- There are some very simple techniques to solve these problems, which even scale up to long feature vectors
  - I.e., several numbers per ECG
- Main example: nearest-neighbor
- Algorithm: find the test data point with the most similar value to the input
  - Variant: majority from  $k$  nearest neighbors,
- Advantage: simple, fast
- Disadvantages?



# Validation

- How can we tell we have a good answer?
  - In the limit, we can't, since the training data might be very different from the testing data
  - In practice, it is usually similar
- Too little training data is a problem
- Estimate confidence via leave-one-out cross validations



# Sparsity

- Especially in high dimensions, we will never have very dense data
  - Suppose you have 100 numbers to summarize your ECG
- Why is this bad for k-NN classification?
- Sometimes you have some idea about the overall shape of the solution
  - For example, shockable and non-shockable points should form blobs in “feature space”
  - This isn’t really what k-NN does

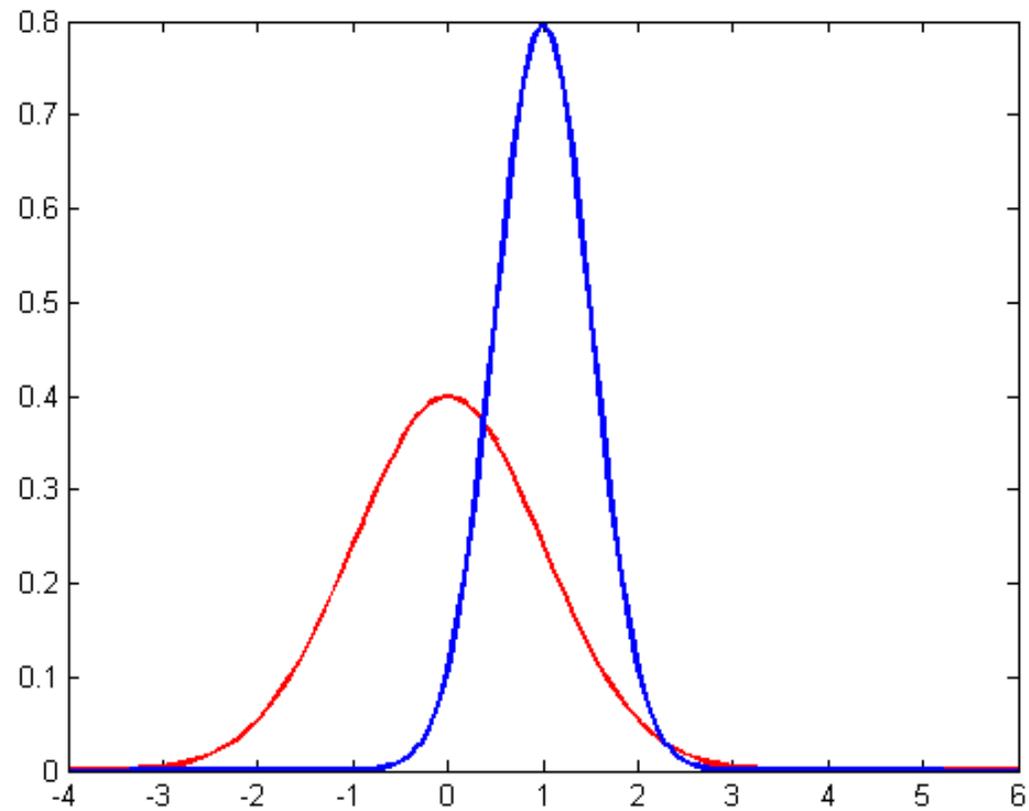


# Statistical classification

- Most work on such problems relies on statistical methods
- These tend to produce clean, general and well-motivated solutions
  - Cost: intellectual and practical complexity
- Simplest example: suppose that for shockable ECG's we get a value around 0 and for non-shockable a value around 1
  - With an infinite amount of data we'd get Gaussians centered at 1 or 0



# Examples



# Estimate, then query

- Strategy: figure out the gaussians from the data, then use this to decide
- Let's look at the decision part first
  - Pretend we know the gaussians
  - Then decide what to do



# Decisions

