

A Supervised Learning Method for the Classification of Heart Failure Using Electronic Health Record-Based Phenotypes

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BACKGROUND

- Current classification schemes fail to capture the broader pathophysiologic heterogeneity in heart failure.
- Electronic health records (EHR) data can be used to phenotype complex diseases.
- We evaluated the performance of a linear support vector machine (SVM) to classify individuals with heart failure (HF) into 2 major HF subtypes using EHR data.

METHODS

- Using the institutional EHR, we identified 7665 patients with HF and extracted 1267 EHR-based features from time of HF diagnosis. Dataset was divided into halves for training and testing.
- We trained an SVM using repeated k-fold cross validation to predict HF subtype, defined as left ventricular ejection fraction < 40% versus > 50%. Model performance was assessed by evaluating accuracy, sensitivity, positive predictive value, negative predictive value, precision, and F1 score. Random forest with bootstrapped resampling was used to identify variable importance.

RESULTS

- The SVM model demonstrated nearly excellent discrimination for the prediction of HF subtype (AUC-ROC 0.79).
- The SVM model predicted 1,896 cases of HFpEF correctly from 2,309 total HFpEF cases and 866 cases of HFrEF correctly from 1,523 total HFrEF cases, resulting in a sensitivity of 82% and positive predictive value of 74%.
- The top five variables contributing to importance for HF subtype classification were systolic blood pressure, high-density lipoprotein cholesterol, diastolic blood pressure, creatinine, total cholesterol.

CONCLUSION

 We demonstrate that a supervised machine learning algorithm using readily clinically available EHR traits can accurately predict the HF subtypes of a broad and heterogeneous population of patients with HF in a large integrated health system.

FIGURES

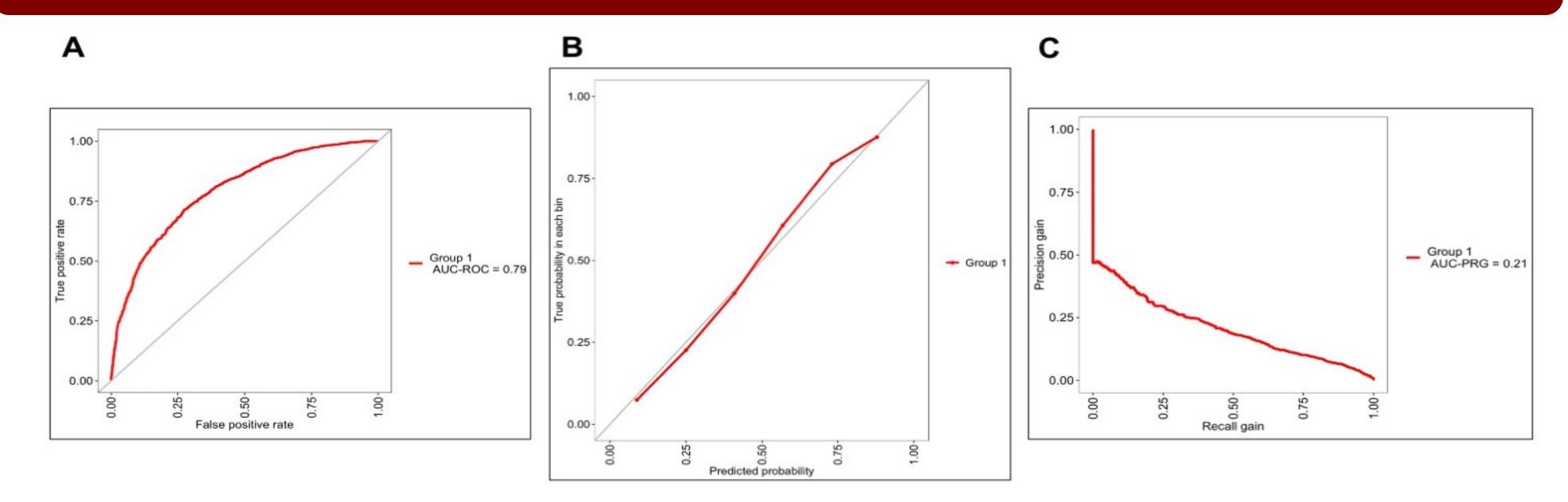


Figure 1. Performance characteristics of linear support vector machine on training dataset. A. Receiver Operating Characteristic Curve. B. Calibration curve. C. Precision gain-recall gain curve.

Variable Importance with Random Forest

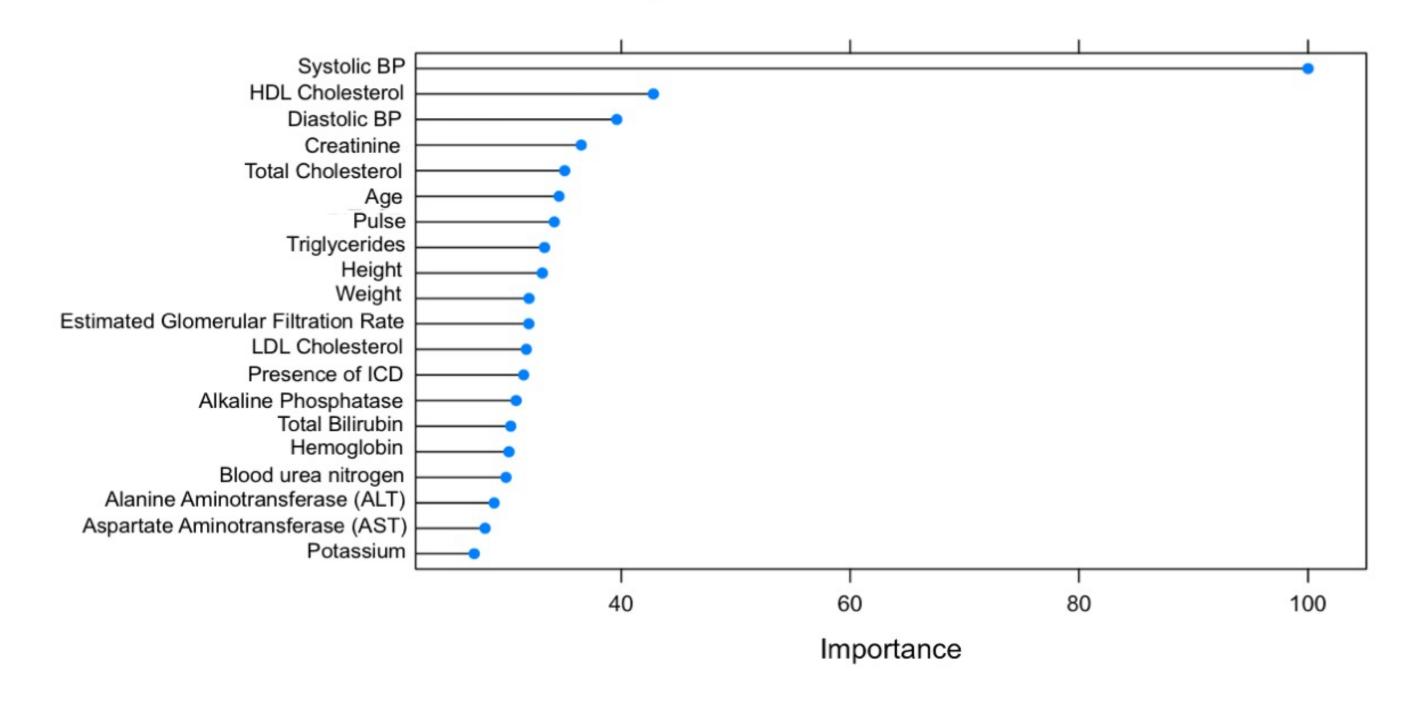


Figure: Plot of variable importance for the prediction of the heart failure subtype in random forest analysis

Abbreviations: BP = blood pressure; HDL = high-density lipoprotein; LDL = low-density lipoprotein; ICD = implantable cardioverter defibrillator

DISCLOSURES

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