# Mental Illness Diagnoses and Mortality Rate

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# Motivation

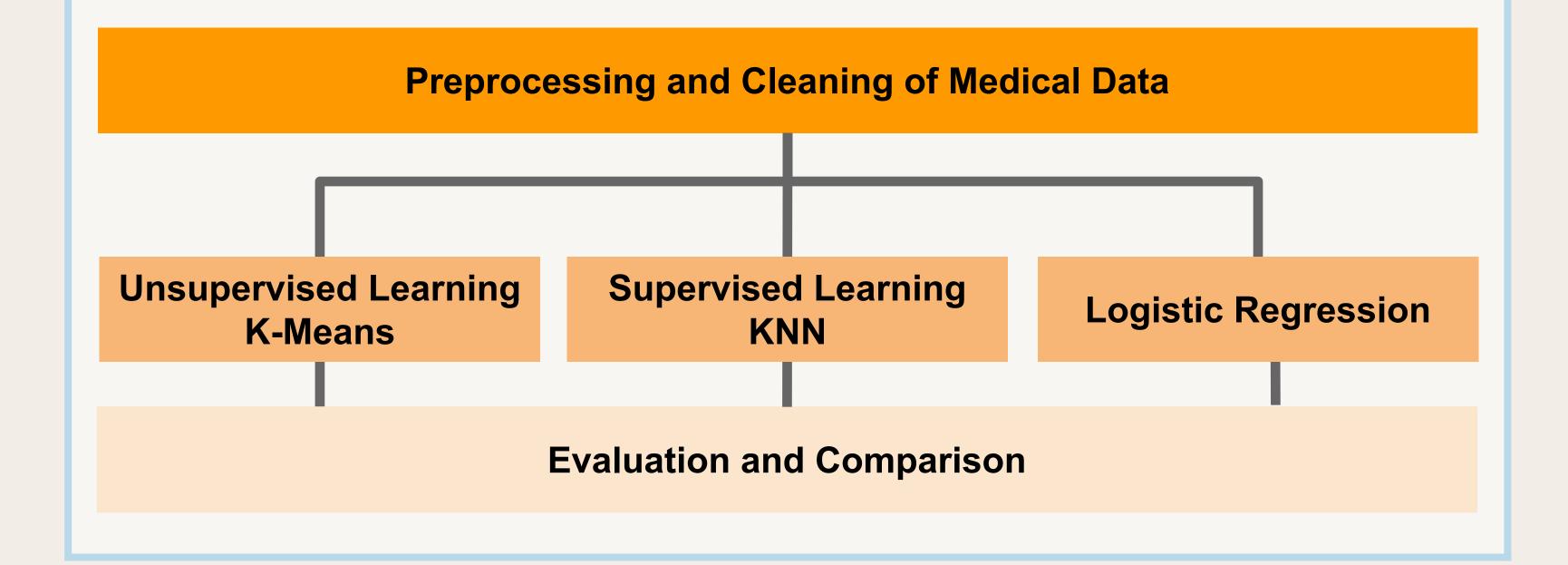
- We are interested in investigating the possible relationship between mental illnesses and aggregate death rates. • Challenges:
  - 4.2% of the data are dead patients
  - Ambiguous data due to HIPAA regulations
  - Large amount of **missing data**

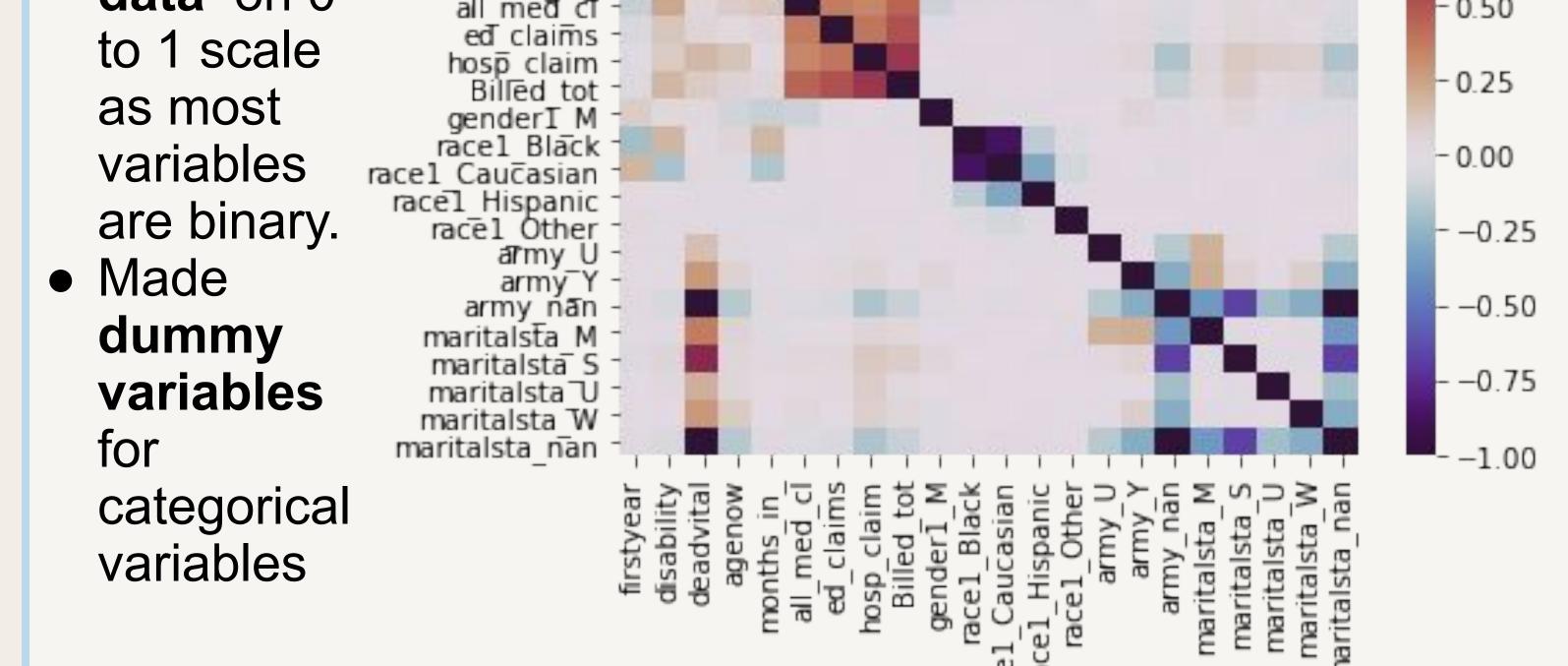
#### **Data Analysis Workflow**

### **Medical Data**

- 6,000 Medicaid patients in Delaware.
- 252 patient deaths recorded
- Lists each patient's cause of death, demographic information, and Medicaid usage information.
- Variables recorded once a patient was deceased: cause of death, year of death, type of death facility, autopsy status, military status, and marriage status.
- Scaled numerical data on 0

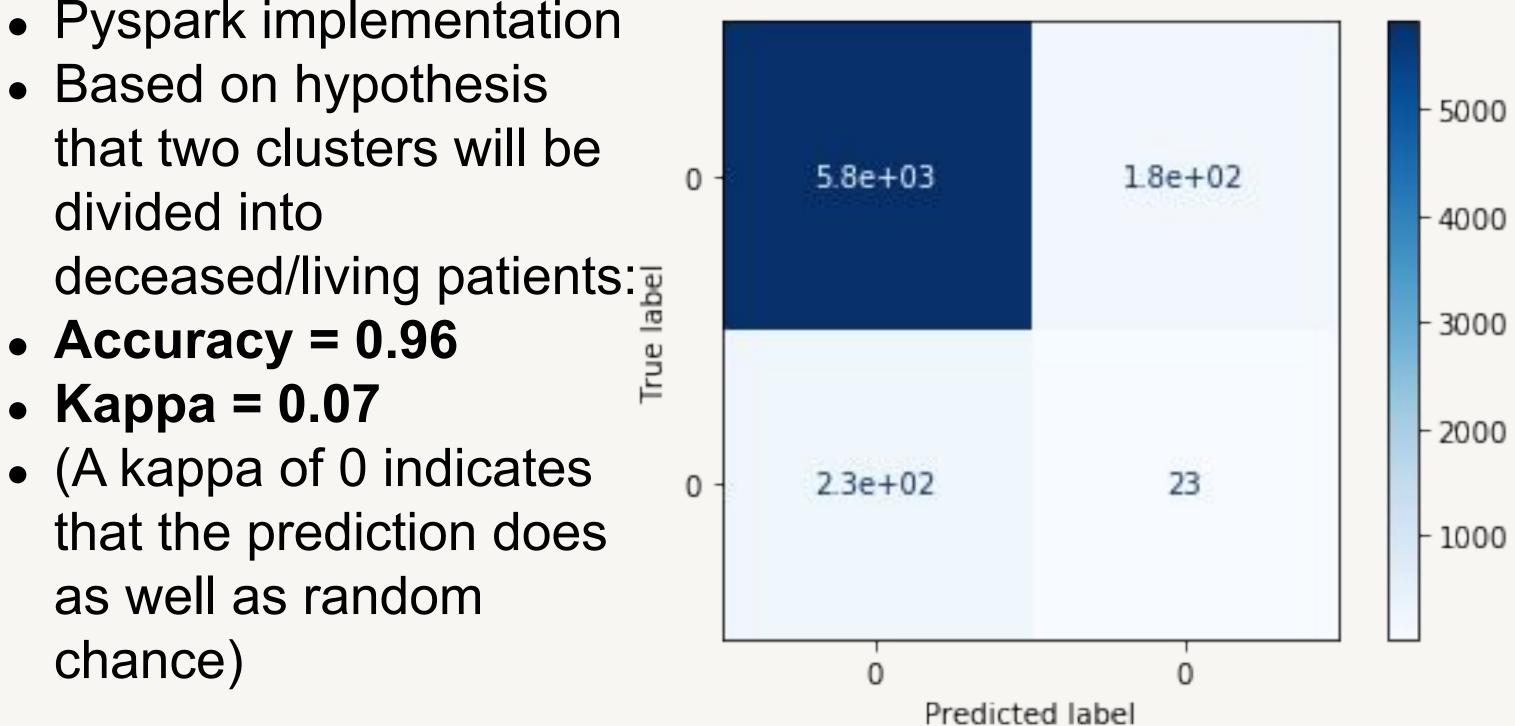






**K-Means** 

- Pyspark implementation
- that two clusters will be

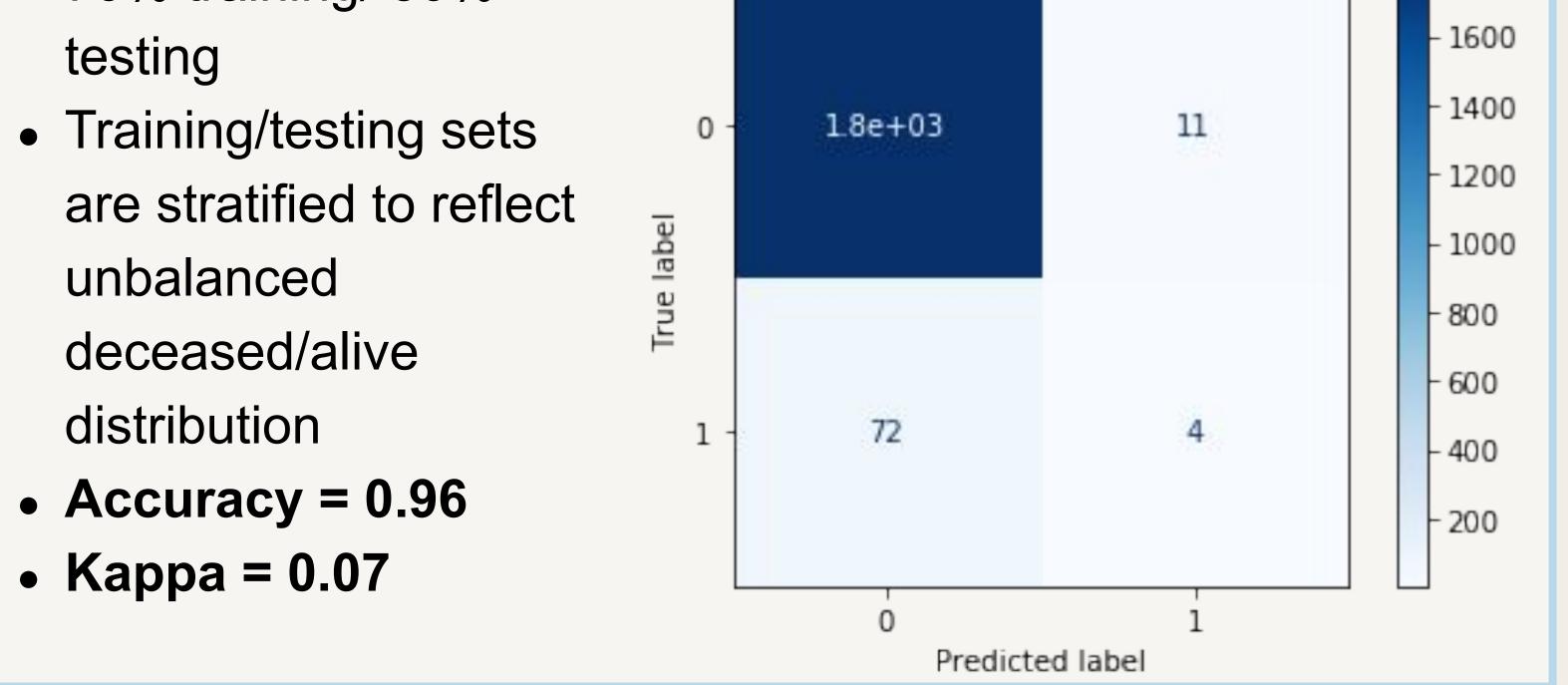


# **Logistic Regression**

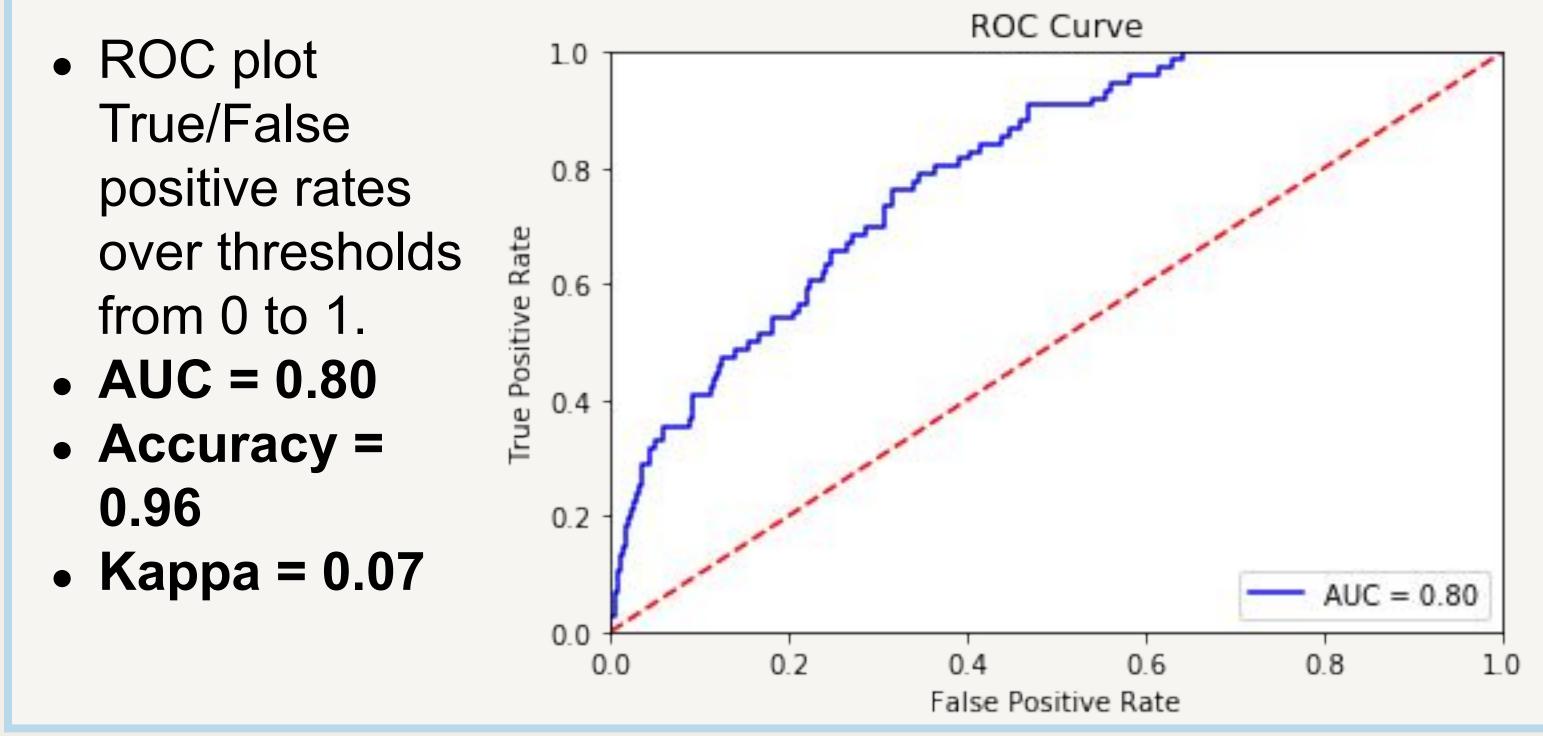
- Predict Mortality Class (1 = deceased, 0 = alive)
- skLearn implementation
- Predicted probability that individual belongs to positive class,

**KNN** 

- Goal: Predict Mortality class (1 = deceased, 0 = alive)
- skLearn implementation of KNN
- 70% training/ 30% testing



then individual is assigned class based on threshold value



# **Evaluation and Conclusions**

• Our accuracy rates of 0.96 were inflated due to the large proportion of living patients and high probability of all algorithms to classify an individual as living. • We used Cohen-Kappa metric to compare these success rates to random chance. Our Kappa metrics of 0.07 are near 0, indicating that our models did not predict much better than random chance. • In order to benefit from our methods, there is a need for a larger, more balanced dataset including a larger population of deceased patients.



#### **Citations**:

Pedregosa, F., Varoquaux, Ga"el, Gramfort, A., Michel, V., Thirion, B., Grisel, O., ... others. (2011). Scikit-learn: Machine learning in Python. Journal of Machine Learning Research, 12(Oct), 2825-2830.