# ISSN: 2321-2152 **IJJMECE** International Journal of modern electronics and communication engineering

## E-Mail editor.ijmece@gmail.com editor@ijmece.com

www.ijmece.com



www.ijmece .com

Vol 12, Issue.2 April 2024

### CHRONIC KIDNEY DISEASE DETECTION USING MACHINE LEARNING

Mrs.K.Kiranmayee<sup>1</sup> P.Arvind Reddy<sup>2</sup> K.Sai Ram<sup>3</sup> P.Laxmi Priya<sup>4</sup> M.Sai <sup>5</sup>

Assistant Professor/CSE(DS) TKR College of Engineering and Technology Telangana, India kiranreddy511@gmail.com IV Final Year of CSE (DS) TKR College of Engineering and Technology Telangana, India puchalaarvind5@gmail.com IV Final Year of CSE (DS) TKR College of Engineering and Technology Telangana, India viratsai463@gmail.com IV Final Year of CSE (DS) TKR College of Engineering and Technology Telangana, India Jallaphani143@gmail.com IV Final Year of CSE (DS) TKR College of Engineering and Technology Telangana, India Praveenkaluri966@gmail.com

#### ABSTRACT

Chronic kidney disease (CKD) is an important health issue worldwide, with a steady increase. Early recognition and timely intervention are essential to reduce its progression and improve patient outcomes. In this study, we propose a machine learning-based approach for CKD diagnosis using clinical data. Our approach requires the collection of comprehensive patient data, including demographics, medical history, and laboratory test results. Feature selection methods are used to identify informative attributes, followed by machine learning algorithms for classification Using metrics such as accuracy, sensitivity, specificity, and location receiver operating characteristic curve (AUC-ROC) below and evaluates the performance of each algorithm . In order to obtain insightful material, we examine the explanatory power of the models. Our results from the study demonstrate the effectiveness of the proposed method in accurately identifying individuals at risk for CKD. The developed model can make early diagnosis and intervention a valuable tool for healthcare professionals, ultimately improving patient management and leading to better clinical outcomes.

Keywords: : Chronic kidney disease (CKD), machine learning, early recognition, accuracy, sensitivity, specificity, AUC-ROC, healthcare professionals, patient management

#### **INTRODUCTION**

Introduction of a tool for early detection of disease severity and status in patients Defines the nature of the disease for individuals. Machine learning based CKD diagnosis has the potential to revolutionize clinical practice, providing valuable tools for healthcare professionals to make timely decisions providing more accurate diagnostics will lead to personalized treatment planning actually, better patient outcomes, and reduced overall healthcare burden of CKD, providing a useful tool that healthcare professionals can readily use to provide quality care delivery individuals at risk or affected by chronic kidney disease have improved. Silent progression of CKD often results in late

diagnosis, limited treatment options and increased morbidity and mortality.Further it also recommends some of the drugs required by the patients based on their conditions and symptoms.

#### 1. 1. LITERATURE SURVEY

The literature review examines the application of machine learning in the diagnosis, prediction, and management of chronic kidney disease (CKD). Several studies have investigated

the use of machine learning algorithms, such as support vector machines (SVM), random forests, and clustering methods, to accurately identify individuals at risk for CKD Alternative methods have been used to address challenges such class imbalance and material selection as processing, where genetic Performance analysis metrics such as accuracy, sensitivity, specificity, and area under the receiver operating characteristic curve (AUC-ROC) have been used to assess the efficiency of these models by algorithms and broad-feature selection techniques m exist Overall, the review of the literature highlights the potential of machine learning to facilitate early detection and intervention of CKD, ultimately leading to good clinical outcomes occur for patientsLiterature Review Summary.



www.ijmece .com

#### Vol 12, Issue.2 April 2024

The literature review examines the application of machine learning in the diagnosis, prediction, and management of chronic kidney disease (CKD). Several studies have investigated the use of machine learning algorithms, such as support vector machines (SVM), random forests, and clustering methods, to accurately identify individuals at risk for CKD Alternative methods have been used to address challenges such as class imbalance and material selection processing, where genetic Performance analysis metrics such as accuracy, sensitivity, specificity, and area under the receiver operating characteristic curve (AUC-ROC) have been used to assess the efficiency of these models by algorithms and broad-feature selection techniques m exist Overall, the review of the literature highlights the potential of machine learning to facilitate early detection and intervention of CKD, ultimately leading to good clinical outcomes occur for patients

#### **3.PROBLEM DEFINATION**

#### 3.1 Limitations of existing system

Diagnosis of chronic kidney disease (CKD) using machine learning (ML) presents a multifaceted set of challenges and limitations. In particular, the availability and quality of labelled data for training ML models can be limited, potentially leading to biased algorithms or insufficient generalizations, as well as significant challenges in selection and technical aspects from complex datasets requiring domain expertise and careful consideration of clinical relevance , ensuring that the interpretability of ML models, especially for health professionals, is essential for acceptance in clinical practice. However, this often requires a trade-off between transparency and a fair amount of predictive performance. In addition, testing ML models for CKD diagnosis requires the selection of robust validation methods and performance measures to accurately reflect clinical utility as well as, ethical and legal considerations, that patient confidentiality and compliance with healthcare regulations Should be handled with care. Finally, eliminating bias in data and ensuring fairness in model predictions across population

groups is critical to achieving equitable health care. Addressing these challenges requires the concerted efforts of researchers, clinicians, policymakers, and ethicists, as well as ongoing review and refinement of ML models to ensure clinical efficacy and safety in real situations.

#### 3.2 proposed system

Our proposed system levarages advanced ML algorithms to enhance chronic disease detection and prediction accuracy. We formulate a multi-class classification task to predict disease levels [eg : high , medium, low ]. Based on these levels we are going to detect the disease. Based on the patients conditions and their other health reports we are going to detect at which stage the person is having the disease . We classified stage 0 to stage 4 which represents from normal to cause of death. We also introduce drug recommendation system for the people who affected with the kidney related diseases. It gives the suitable drugs for the patients according to their disease in the stages.



#### 4.FIGURES

Figure 1: STAGES OF CHRONIC KIDNEY DISEASE



www.ijmece .com

Vol 12, Issue.2 April 2024



Figure 2: SYSTEM ARCHITECTURE



Figure 3 : USE CASE DIAGRAM

#### **5.MODULES**

Several modules that are intended to support different facts of kidney disease detection are done by using machine learning. These modules meet the various needs of user requirements and eco friendly.

• User Login: This module provides functionality for users to authenticate themselves before accessing the system.

Users typically provide their credentials, such as username and password, which are then validated against a database of registered users. Upon successful authentication, users gain access to the system's features and functionalities tailored to their roles and permissions. User login modules often include features like password recovery, session management, and account registration.



- Admin Login: Similar to the user login module, the admin login module allows administrators to authenticate themselves and access administrative functionalities of the system. Admins typically have elevated privileges compared to regular users, allowing them to manage users, configure system settings, view reports, and perform other administrative tasks. Admin login modules may include additional security measures and auditing capabilities to ensure the integrity and security of the system.
- **Disease Detection:** This module focuses on the core functionality of detecting chronic kidney disease (CKD) using machine learning techniques, as per your project description. It involves collecting and processing clinical data, such as demographic information, medical history, and laboratory test results, to identify individuals at risk of CKD. Machine learning algorithms are applied to the collected data to build predictive models for disease detection. The module may include features for data preprocessing, feature selection, model training, evaluation, and result visualization.
- **Drug Recommendation:** Once chronic kidney disease is detected, the drug recommendation module provides recommendations for suitable medications or treatments based on the patient's condition and medical history. This module may consider factors such as the stage of CKD, comorbidities, medication interactions, and patient preferences. Drug recommendation algorithms may utilize clinical guidelines, drug databases, patient records, and medical expertise to generate personalized treatment recommendations.

These modules collectively form the backbone of this project, enabling users to securely access the system, detect chronic kidney disease using machine learning techniques, and receive personalized drug recommendations for effective disease management.

#### 6.ACKNOWLEDGMENTS

I would like to express my sincere gratitude to Mrs.K.Kiranmayee for their invaluable guidance, mentorship, and support throughout this machine learning project. Their expertise, insightful feedback, and encouragement have been instrumental in shaping the direction and outcomes of this endeavor.

I am deeply thankful to my team members for their collaboration, dedication, and contributions to various aspects of the project. Their collective efforts and ISSN2321-2152

#### www.ijmece .com

#### Vol 12, Issue.2 April 2024

teamwork have enriched the project's development and fostered a conducive environment for innovation and learning.

I extend my appreciation to [TKR College of Engineering & Technology] for providing the necessary resources, facilities, and opportunities that facilitated the execution of this project. Their continued support has been pivotal in our pursuit of excellence and achievement of project milestones.

#### **7.REFERENCES**

**1**. A. N. Muiru et al., "The epidemiology of chronic kidney disease (CKD) in rural east Africa: A population-based study", *PLoS ONE*, vol. 15, no. 3, Mar. 2020.

**2.** C. P. Wen et al., "All-cause mortality attributable to chronic kidney disease: A prospective cohort study based on 462 293 adults in Taiwan", *Lancet*, vol. 371, no. 9631, pp. 2173-2182, Jun. 2008.

**3.** M. A. Hossain, T. A. Asa, M. R. Rahman and M. A. Moni, "Network-based approach to identify key candidate genes and pathways shared by thyroid cancer and chronic kidney disease", *Informat. Med. Unlocked*, vol. 16, Jan. 2019.

**4.** K. Brück et al., "CKD prevalence varies across the European general population", *J. Amer. Soc. Nephrol.*, vol. 27, no. 7, pp. 2135-2147, 2016.

**5.** A. S. Allen, J. P. Forman, E. J. Orav, D. W. Bates, B. M. Denker and T. D. Sequist, "Primary care management of chronic kidney disease", *J. Gen. Internal Med.*, vol. 26, no. 4, pp. 386-392, 2011.

**6.** G. Remuzzi, P. Ruggenenti and N. Perico, "Chronic renal diseases: Renoprotective benefits of renin– angiotensin system inhibition", *Ann. Internal Med.*, vol. 136, no. 8, pp. 604-615, 2002

**7.** M. A. Hossain, T. A. Asa, S. M. S. Islam, M. S. Hussain and M. A. Moni, "Identification of genetic association of thyroid cancer with parkinsons disease osteoporosis chronic heart failure chronic kidney disease



#### www.ijmece .com

#### Vol 12, Issue.2 April 2024

type 1 diabetes and type 2 diabetes", *Proc. 5th Int. Conf. Adv. Electr. Eng. (ICAEE)*, pp. 832-837, Sep. 2019.

**8.** O. J. Wouters, D. J. O'donoghue, J. Ritchie, P. G. Kanavos and A. S. Narva, "Early chronic kidney disease: Diagnosis management and models of care", *Nature Rev. Nephrol.*, vol. 11, no. 8, pp. 491, 2015.

**9.** K.-U. Eckardt et al., "Autosomal dominant tubulointerstitial kidney disease: Diagnosis classification

and management—A KDIGO consensus report", *Kidney Int.*, vol. 88, no. 4, pp. 676-683, 2015.

**10.** T. Fiseha, M. Kassim and T. Yemane, "Chronic kidney disease and underdiagnosis of renal insufficiency among diabetic patients attending a hospital in southern ethiopia", *BMC Nephrol.*, vol. 15, no. 1, pp. 198, Dec. 2014.