

## Classifying Ear Disorders Using Support Vector Machines

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### Abstract

*One of the most significant causes of iatrogenic injury, death and costs in hospitals is medication errors. A medical decision-support system can help physicians to improve the safety, quality and efficiency of healthcare. In this paper we focus on development of a decision-support system for diagnosis of ear disorders. For this purpose, a dataset obtained from an otolaryngology clinic. Then two machine learning algorithms, Multi-layer perceptron neural network and support vector machine, were applied to classify ear disorders. The results show that support vector machine is considerably more accurate technique for classifying high dimensional data.*

### 1. Introduction

Making true medical decisions is an essential task in the medical world. In the US, it is estimated that over 770000 people are injured or die each year in hospitals as a result of medication errors [1]. Nowadays, many publicly available diagnostic means exist. But these means provide a very large scope of initial diagnostic data, so a physician needs profound understanding of the medical literature and many years of clinical experience for interpreting them. Although the intuition of a human can never be replaced, machine learning techniques can help physicians in making true medical decisions. Medical decision making can be restated as a classification problem. A physician classifies the symptoms of a patient to certain disease group on the basis of their knowledge, and machine learning tools provide advanced methods for classification of patient symptoms. This justification can be adequate to enhance the medical diagnosis using machine learning. Therefore, medication errors can be reduced considerably. Multi-layer perceptron (MLP) neural

networks and support vector machines (SVM) are such machine learning algorithms that are very attractive in classification tasks. In this paper, we discuss the use of these two methods to achieve the classification of the most common ear disorders under six categories.

The rest of this paper is organized as follows. The next section briefs some previous done works on intelligent diagnosis of ear disorders. Collected dataset and applied intelligent methods will be discussed in section 3. Section 4 discusses the results and discussions of the modeling stage. The conclusion will be presented in section 5.

### 2. Former studies

A.A. Bakar and et al. 2009 developed a diagnosis knowledge model of the level of hearing loss in the audiology clinic patients using rough set theory. The classifier was used to classify the level of hearing loss and the experiment showed promising results with 76% accuracy [2]. S. Cox and et al. 2004 used the chi-squared test and self-organizing map algorithms to discover associations between various fields in 20,000 patient audiology records. In their study, the focus was on search for associations between features of audiology records and degree of hearing aid benefit [3]. T. Thompson and et al. 2007 showed that C4.5 algorithm is a promising and useful data mining technique for the discovery of new knowledge related to tinnitus causes and cures [4].

### 3. Materials and methods

#### 3.1. Dataset

150 cases were collected using patient visits in an otolaryngology clinic. Dataset includes 14 important variables from six categories namely, serous otitis

media, otitis media, conductive fixation, cochlear-age, cochlear- noise and normal. These variables consist of replies to questions that concern a patient’s symptoms, and the results of laboratory tests. Table 1 shows all variables and their linguistic values and representation values in the dataset. The six diagnostic categories are listed in table 2 with their quantities and their assigned labels. In our experiments, the classification of data is conducted by MLP and SVM algorithms. In the next section we briefly describe these two methods.

**Table1. Features and their representation values in the dataset**

No	Variable	Linguistic Value	Representation value	
			MLP	SVM
1	Air	Normal	1	1
		Mild	0.5	0.8
		Moderate	0.25	0.6
		Severe	-0.5	0.4
		Profound	-1	0.2
2	AirBoneGap	Yes	1	1
		No	-1	0
3	Bone	Normal	1	1
		Mild	0.5	0.8
		Moderate	0.25	0.6
		Severe	-0.5	0.4
		Profound	-1	0.2
4	MixHL (Mix hearing loss)	Yes	1	1
		No	-1	0
5	Sex	Female	1	1
		Male	-1	0
6	Age-gt-50 (Age greater than 50)	Yes	1	1
		No	-1	0
7	History-Buzzing	Yes	1	1
		No	-1	0
8	History-Fluctuating	Yes	1	1
		No	-1	0
9	Tympanometry	A	1	1
		Ad	-0.25	0
		As	-0.5	0.4
		B	0.5	0.8
		C	0.25	0.6
10	SNHL-Lt-2KH (Sensorineural hearing loss lower than 2KHZ)	Yes	1	1
		No	-1	0
11	CHL (Conductive hearing loss)	Yes	1	1
		No	-1	0
12	History-Hereditiy	Yes	1	1
		No	-1	0

13	History-Noise	Yes	1	1
		No	-1	0
14	Notch-at-4KH	Yes	1	1
		No	-1	0

**Table2. Absolute frequencies and assigned labels of the six classes in the dataset**

Diagnostic category	Number	Assigned label	
		MLP	SVM
Normal	21	1	1
Cochlear-noise	24	0.5	2
Cochlear-age	36	0.25	3
Conductive fixation	26	-0.25	4
Otitis media	23	-0.5	5
Serous otitis media	20	-1	6

### 3.2. Multilayer perceptron neural network

Multi-layer perceptron (MLP) neural network or standard back-propagation is a very popular artificial neural network algorithm and have been successfully applied in many applications, like our previous research [5]. The MLP is characterized by a set of input units, a layer of output units and a number of hidden layers. The input to each unit is given by the summation of all the individual weighted outputs passed from the previous layer. The output is then a function of the summation of these inputs. The network training is accomplished by varying the connection weights and the neuron threshold values using the back-propagation learning algorithm. In this study, for simulating the run of MLP algorithm on training set, it was implemented using C programming language. In this implementation, the k-fold cross validation approach was used for selecting the best model. In the whole of our experiments, a network structure with one hidden layer was applied. The main practical stage in the design MLP classifier was selecting proper number of neuron in the hidden layer and the number of epochs that algorithm must be train.

### 3.3. Support vector machine

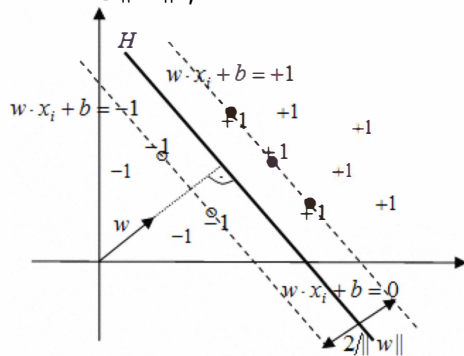
Support vector machines (SVM) are a group of supervised learning methods that can be applied to classification or regression. SVM methods were originally defined for the classification of linearly separable classes of objects. For any particular set of two-class objects, an SVM finds the most distant hyperplane from both sets. The Intuition of finding a decision boundary with maximum margin is relatively simple. Among several hyperplanes that can separate

data completely, there is only one hyperplane with maximum margin. The hyperplane with maximum margin is less prone to noise and fluctuations of training data. So selecting this particular hyperplane will correctly separate even noisy patterns and maximize prediction accuracy for previously unseen data.

Let  $x_i$  be a vector in a vector space, a separating hyperplane is characterized with

$$w \cdot x_i + b = 0$$

In this formulation  $w$  is a vector orthogonal to the hyperplane and  $b$  is the bias term. As the figure 1 shows, for two-dimensional objects that belong to two classes (class +1 and class -1), the margin of optimum linear classifier is  $2/\|w\|$ . So the wider margin is obtained by maximizing  $2/\|w\|$ , which is equivalent to minimizing  $\|w\|^2/2$ .



**Figure1. Separating hyperplane with maximum margin for two dimensional objects**

SVMs can also be used to separate classes that cannot be separated with a linear classifier. In such cases, the coordinates of the objects are mapped into a high-dimensional feature space using kernel functions and thus they can be separated with a linear classifier.

Finding the optimum separation hyperplane is a quadratic programming problem. Given training vectors  $x_i \in R^n, i=1, \dots, l$  in two classes and a vector  $y \in R^n$  such that  $y_i \in \{1, -1\}$ , C-SV classifier solves the following primal problem:

$$\begin{aligned} \min_{w, b, \epsilon} & \frac{1}{2} W^T W + C \sum_{i=1}^l \epsilon_i \\ y_i (w^T \Phi(x_i) + b) & \geq 1 - \epsilon_i \\ \epsilon_i & \geq 0, i=1, \dots, l. \end{aligned}$$

Its dual is:

$$\begin{aligned} \min_{\alpha} & \frac{1}{2} \alpha^T H \alpha - e^T \alpha \\ 0 & : \alpha_i \leq C, \quad i=1, \dots, l \\ \sum_{i=1}^l \alpha_i y_i & = 0 \end{aligned}$$

Where  $e$  is the vector of all one,  $C > 0$  is the parameter that either increase or decrease the penalty for classification error and can be adjusted by user,  $H$  is a  $l$  by  $l$  matrix,  $H_{i,j} \equiv y_i y_j K(x_i, x_j)$  and  $K(x_i, x_j) \equiv \Phi(x_i)^T \Phi(x_j)$  is the kernel [6], [7].

SVMs are originally binary classifiers. This is a limitation in some cases when three or more classes of patterns are present in the training set. Several approaches have been suggested for multi-class SVM classifications which solve this problem by decomposing the training set into several two-class problems. In this study, the LIBSVM software was used for applying SVM algorithm to available data. This implementation for multi-classification problems uses one-against-one approach [8]. We used RBF function as kernel and determined the best  $C$  and kernel parameter  $\gamma$  using k-fold cross validation method.

#### 4. Experiments and results

Selecting the optimal parameters for SVM and MLP algorithms were done via k-fold cross validation technique. This approach avoids from overfitting the training examples and increases generalization accuracy over test data. In k-fold cross validation, our 150 training examples are partitioned into  $k$  subsets. In each fold, one subset is used for validation and the combination of the other subsets is used for training and the errors are then averaged. For the MLP algorithm, a three layers network structure with fourteen neurons in input layer (number of ear disorder symptoms) and one neuron in the output layer was configured. The number of neurons in hidden layer and the number of optimal iterations for training were determined via 6-fold cross validation. For this stage, in each fold, the number of iterations that satisfy at least one of the following two conditions on validation set is selected as the best, one is the sum of squared error (SSE) becomes lower than a desired error (supposed as 0.05 in our experiments) and the other is the difference between current epoch error and previous epoch error becomes greater than a predetermined threshold (supposed as 0.005 in our experiments). The second condition prevents from stopping training too soon when the validation set error begins to increase due to overfitting training examples [9]. After that, the mean of estimated iterations and their error rates are calculated. Finally the iteration mean is returned as optimal iteration and the error mean is returned as the error of cross validation (See table 3). As table 4 shows, the optimal node number in hidden layer is obtained 4 that yield the smallest cross validation error of 0.061 and respectively the optimal

iteration is obtained 147 epochs. So a final run of back-propagation is performed by training on all examples with the 4 nodes in hidden layer and 147 epochs.

For the SVM method, some values for C and  $\gamma$  parameters were chosen randomly. Then 10-fold cross validation was performed to select the best values of parameters. The optimal C and gamma are those that yield least cross validation error. Finally, training on whole training set was carried out using obtained optimal parameters. As table 5 shows, optimal parameters were found at C = 48 and gamma = 0.055, yielding the cross validation error of 0.014.

After the training phase, the performance of two algorithms was evaluated using test data (previously unseen data). The result indicates that the MLP method diagnoses disorders with a 77.5% accuracy rate whereas the SVM algorithm has the accuracy of 92.5%. It can be seen that MLP does not work as well as SVM on the dataset with fourteen dimensionalities. Therefore, with using SVM model, the error rate can be decreased considerably and obtained more accurate classifier for classifying ear disorders.

**Table3. Estimating the optimal epoch number of MLP with 5 neurons in hidden**

fold	epoch	SSE
1	148	0.049
2	23	0.121
3	35	0.131
4	37	0.049
5	735	0.061
6	171	0.179
<b>Average =</b>	<b>191</b>	<b>0.098</b>

**Table4. Selecting optimal neurons in hidden layer and epoch number via 6-fold cross validation**

Neurons in hidden layer	Estimated epoch	Cross validation error
3	37	0.107
<b>4</b>	<b>147</b>	<b>0.061</b>
5	191	0.098
7	115	0.108
10	21	0.152

**Table5. Selecting optimal C and gamma for SVM via 10-fold cross validation**

C	Gamma	Cross validation error
10	0.01	0.054
10	0.1	0.02
10	0.5	0.027

20	0.03	0.02
40	0.03	0.027
42	0.042	0.02
<b>48</b>	<b>0.055</b>	<b>0.014</b>
48	0.06	0.02

## 5. Conclusion

The main contribution of this work was design of an accurate machine learning system for diagnosis six common ear disorders. Two popular machine learning methods were used, multi-layer perceptron neural network and support vector machine. The result showed that SVM achieved accuracy of 92.5% that is comparable to MLP with 77.5% accuracy. This shows that MLP does not work as well as SVM on high dimensional data. In the future, we are going to use a hybrid model for improving the performance of MLP algorithm on high dimensional data. Also applying machine learning algorithms to unknown problems would be interesting as the future works.

## 6. References

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