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A Comparative Study of Machine Learning Approaches for Diabetes Risk Prediction: Insights from SHAP and Feature Importance

Zheyan Liu *, Qimin Zhang, Huili Zheng, Shaohan Chen and Yiru Gong

Department of Biostatistics, Columbia University, New York, NY 10032, USA

* Correspondence: zl3119@caa.columbia.edu

Abstract: This study leverages machine learning models, including Logistic Regression, XGBoost, and Random Forest, to predict diabetes using BRFSS data. XGBoost emerged as the top-performing model, achieving an AUC of 0.83. Feature importance was analyzed using SHAP values, highlighting general health, high blood pressure, and BMI as key predictors. This research demonstrates the potential of machine learning models in identifying individuals at risk of diabetes, aiding in early intervention and improved public health outcomes.

Keywords: Diabetes; Public Health; XGBoost; Logistic Regression; feature importance; SHAP analysis; SMOTE

1. Introduction

Diabetes is a major public health problem in US, affecting millions of people and placing a significant strain on the healthcare system. The chronic condition arises when the body cannot effectively manage blood glucose levels, either due to insufficient insulin production or the inability to use insulin properly[1]. If left unchecked, diabetes can lead to severe complications, including heart disease, vision loss [2], lower-limb amputations, and kidney disease.

As of 2024, the CDC reports that 37.3 million Americans have diabetes, while prediabetes affects around 96 million U.S. adults—a significant rise[3]. However, over 84% of those with prediabetes are unaware of their condition, underscoring the urgent need for early identification methods.

Machine learning models provide a promising approach for early diabetes diagnosis and identifying risk factors[4]. Numerous studies have utilized models like Decision Trees[5], Random Forest, SVMs[6], Gradient Boosting[7], GNNs[8][9], RNNs[10], CNN[11][12], and LSTM[13][14], with strong results in accuracy and predictive performance. Predictive models help healthcare providers identify at-risk individuals and guide lifestyle changes to prevent diabetes[15][16], improving public health.

2. Methods

2.1. Data Source

The final dataset used in this research is cleaned and processed using source data from Behavioral Risk Factor Surveillance System (BRFSS) in 2015[17], a yearly telephone survey focused on health issues, carried out by CDC. The BRFSS collects extensive data on health-related risk behaviors[18][19], conditions of chronic health, and the use of preventive services[20]. For this project, the dataset contains 253,680 cleaned and processed survey records and 21 variables. 7 features are continuous and 14 of them as category variables. The target variable (Diabetes Binary), divides participants into two categories: 0 for those without diabetes and 1 for individuals with either prediabetes or diabetes. It is of importance to stress that the dataset is imbalanced, with a higher proportion of respondents classified as non-diabetic, with the ratio of respondents with class 1 to those with class 0 being 0.16. Necessitating the use of techniques like SMOTE to address this imbalance issue[21].

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2.2. SMOTE Oversampling

Using SMOTE, new synthetic sample is generated along the line segment between x_i and one of its neighbors $x_{i,neighbor}$:

$$x_{\text{new}} = x_i + \lambda \times (x_{\text{neighbor},i} - x_i)$$
 (1)

This creates a new data point x_{new} that lies between x_i and $x_{i,neighbor}$, effectively increasing the number of minority class samples[22][23]. In this study, SMOTE was used to oversample the minority class (class 1) such that the ratio of class 1 to class 0 was increased to 3:1. By balancing the dataset, SMOTE helps machine learning models learn from both classes more effectively[24], reducing bias towards the majority class and improving predictive performance in imbalanced datasets.

2.3. Logistic Regression with L1 Regularization

The Logistic Regression model with L1 regularization is defined as:

$$\hat{y} = \frac{1}{1 + \exp\left(-(\mathbf{X}\boldsymbol{\beta} + \beta_0)\right)} \tag{2}$$

where \hat{y} is the predicted probability, **X** represents the input features, and β are the coefficients. L1 regularization introduces a penalty term to the cost function:

$$C = -\sum_{i=1}^{n} \left[y_i \log(\hat{y}_i) + (1 - y_i) \log(1 - \hat{y}_i) \right] + \lambda \sum_{j=1}^{p} |\beta_j|$$
 (3)

To determine the optimal λ , 5-fold cross-validation is performed, selecting the value that maximizes the AUC. This process ensures the model is tuned for optimal performance on the validation sets[25].

2.4. XGBoost

XGBoost (Extreme Gradient Boosting) builds an ensemble of decision trees sequentially to optimize predictive performance[26]. It is ideal for classification tasks due to its efficiency, scalability, and ability to handle imbalanced datasets[27][28]. In this study, XGBoost was trained with an adjusted class weight of 3 for class 1 to address the imbalance and focus on the minority class. Key hyperparameters, including learning rate, max depth, n estimators, and alpha, were tuned using 5-fold cross-validation to optimize the Area Under the Curve (AUC) and balance predictive accuracy with overfitting prevention. The combination achieving the highest AUC was selected for the final model, ensuring optimal performance.

2.5. Random Forest

Random Forest is an ensemble learning approach generating multiple decision trees that vote for the final prediction. [29]. Every tree is trained on a randomly chosen subset of features, which can help reduce overfitting and improve the generalization of the model capability[30][31]. In this research, the Random Forest model was trained, and crucial hyperparameters such as n estimators, max depth, and min samples split were optimized using 5-fold cross-validation to enhance the Area Under the Curve (AUC).

2.6. SHAP Model Interpretation

SHAP (Shapley Additive Explanations) is an effective approach for explaining machine learning model predictions by quantifying the individual impact of each feature on the final outcome [32]. To be more specific, the Shapley value concept, which fairly distributes the model's prediction among all features, considering their contribution to the model's output[33].

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3. Results

3.1. Model Training

For model training, three machine learning algorithms Logistic Regression, Random Forest, and XGBoost were selected based on their complementary strengths in classification tasks and interpretation. The models were trained on a comparatively balanced dataset, where class imbalance was addressed by applying the Synthetic Minority Over-sampling Technique (SMOTE).[34]. 5-fold cross-validation approach was employed to guarantee the models' robustness and generalizability [35].

3.2. Model Performance Metrics

We split 20% of the data as a test set, and the metrics presented are based on this test set. Among the models evaluated, XGBoost consistently outperformed Logistic Regression and Random Forest, making it the most effective for diabetes prediction.

Based on the metrics shown in Table 1. XGBoost achieved the highest AUC of 0.83, indicating superior discrimination between diabetic and non-diabetic cases. It also led with precision score with 0.87, both higher than those of Logistic Regression (0.83) and Random Forest (0.83). While its recall is slightly lower, XGBoost still relatively outperformed the other models in these metrics, confirming its robustness. Overall, XGBoost's combination of high AUC and precison makes it the most reliable model on the test set.

Table 1. Performance metrics of the models

Model	AUC	F1-score	Accuracy	Precision	Recall
Logistic Regression	0.81	0.84	86%	0.83	0.86
XGBoost	0.83	0.76	80%	0.87	0.72
Random Forest	0.80	0.83	86%	0.83	0.86

3.3. Model Interpretation

To gain insights into the model training process, We interpreted the model using SHAP values, XGBoost feature importance, and Logistic Regression with Lasso significant coefficients to gain a comprehensive understanding of feature importance[36].

Based on the SHAP analysis plot in Figure 1, the model identifies GenHlth (General Health), HighBP (High Blood Pressure), Age, BMI, and HighChol (High Cholesterol) as the most significant risk factors for diabetes [37] [38], with higher values in these features pushing the prediction toward diabetes. Higher income has a protective effect, decreasing the likelihood of being classified as diabetic. Education and PhysActivity show a spread of SHAP values indicating that both low and high values can have varying impacts on diabetes prediction [39], suggesting potential interaction effects with other features.

The XGBoost feature importance plot in Figure 2 emphasizes HighBP (High Blood Pressure) (High Blood Pressure) and GenHlth (General Health) as the most critical predictors of diabetes in the model [40]. While other factors like Heavy Alcohol Consumption, Physical Activity, and Age also play significant roles.

Additionally, from Logistic Regression model Figure 3. HvyAlcoholConsump 1 (Heavy Alcohol Consumption), CholCheck 0 (No Cholesterol Check), HighBP 0 (No High Blood Pressure), and NoDocbcCost 1 (No Doctor Visit due to Cost) have negative coefficients. Heavy alcohol consumption are less likely to be predicted as diabetic in this model, which indicates a more complex relationship or confounding variables. This finding suggests that individuals without a diagnosis of high cholesterol

or high blood pressure are less likely to be predicted as diabetic, which is consistent with established medical understanding, thus validating the model's alignment with real-world medical insights.

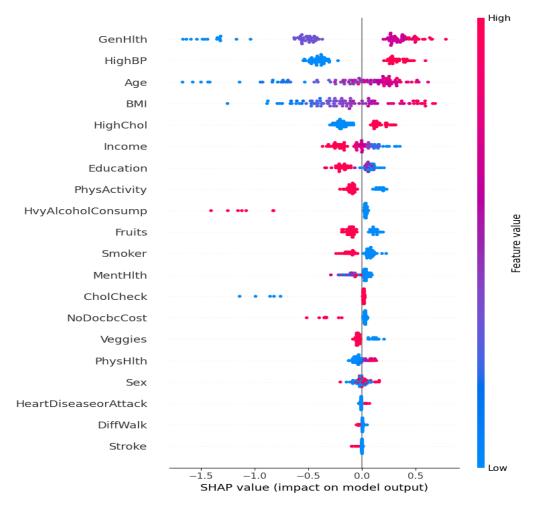


Figure 1. SHAP Analysis Plot

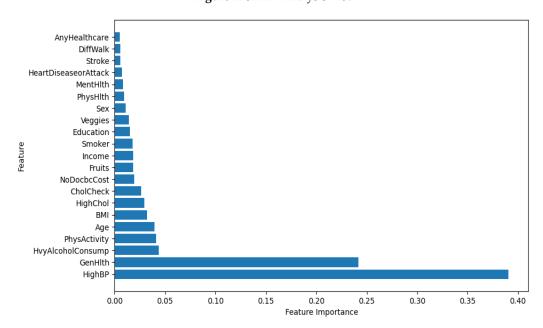


Figure 2. XGBoost Feature Importance

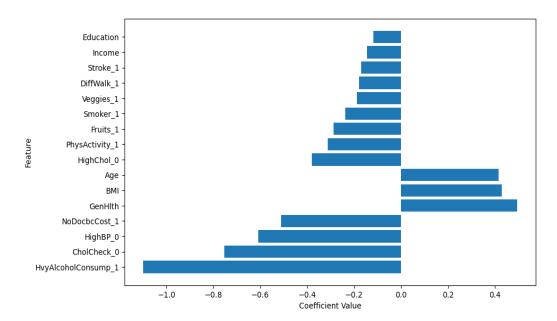


Figure 3. Significant Logistic Regression Coefficients

4. Discussion

Despite its strengths, this study has some limitations. One key limitation is the its inability to establish a causal relationship between the identified risk factors and the onset of diabetes due to cross-sectional nature of the BRFSS data.

Furthermore, the dataset's significant class imbalance required the use of SMOTE oversampling to enhance model performance. However, this method can introduce biases and does not fully mimic the conditions of a naturally balanced dataset.

5. Conclusion

Our study shows the effectiveness of machine learning models in predicting diabetes and identifying key risk factors for public health strategies and individual behavior changes. Among the models, XGBoost outperformed Random Forest and Logistic Regression in AUC and precision, making it the most reliable model for diabetes prediction. [41].

The SHAP analysis and XGBoost feature importance provided valuable insights into the most influential features driving the model's predictions[42]. Key factors such as general health, high blood pressure, age, BMI, and high cholesterol levels were identified as significant risk factors for diabetes. These findings align with existing medical knowledge, reinforcing the validity of the model's predictions.

Logistic Regression highlighted additional factors, like heavy alcohol consumption, lack of cholesterol checks, and skipping doctor visits due to cost, which were less prominent in SHAP and XGBoost analyses but still remain important in understanding diabetes risk[43].

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