

Original article

*Application of Artificial Intelligence in prediction type 2 diabetes mellitus:
A Systematic Review*

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Abstract

Artificial Intelligence (AI) refers to the simulation of human intelligence in machines that are programmed to think like humans and mimic their actions. The healthcare industry produces large amount of healthcare data daily that can be used to extract information for predicting disease or disease diagnosis. Diabetes is chronic disease occurs due to insulin imbalance secretion. This present study was conducted with primary objective to review and evaluate the literature available on development of diabetes risk prediction models using Artificial Intelligence. In proposed review article, published original articles based on Artificial Intelligence in prediction diabetes mellitus were collected. The collected articles were scrutinized and selected articles of diagnosis of diseases or prediction of disease were included in the study. A total of 34 articles were included in the study. Different Artificial Intelligence algorithms and models were used in prediction of diabetes like Support vector machine, Decision tree, Naïve Baye, k-Nearest Neighbour, Random Forest, Logistic regression and Artificial Neural Network are the most useful prediction models for diabetes. Diagnosis of diseases at early stage is helpful for prevention and control the chronic diseases; such prediction of diseases is possible by the use of Artificial Intelligence. Artificial Intelligence can be used in the diagnosis of diabetes with higher prediction accuracy. Artificial Intelligence is helpful in prediction of diabetes at early stage by considering most common risk factors of Diabetes Mellitus.

Key words: Artificial Intelligence, Prediction of diabetes, Artificial Neural network, Prediction Model, Diagnosis of Diabetes.

Introduction

Artificial intelligence (AI) is a new technology that simulates and extends human intelligence in machines that are programmed to mimic human actions¹. Artificial intelligence is the ability of computer to complete the tasks such tasks usually done by humans with reasonable accuracy which eliminate human errors. Artificial Intelligence (AI) in healthcare is an overarching term used to describe the use of machine-learning algorithms and software to mimic human cognition in the analysis, presentation, and comprehension of complex medical and health

care data. AI applications provide results with greater accuracy, efficiency and ease of use.

The healthcare industry produces large amount of healthcare data daily that can be used to extract information for prediction of diseases. AI can assist doctors, nurses, and other healthcare workers in their daily work. AI in healthcare can enhance preventive care and quality of life, produce more accurate diagnoses and treatment plans, and lead to better patient outcomes overall. AI can also predict and track the spread of infectious diseases by

analyzing data from a government, healthcare, and other sources. Applications of Artificial Neural Network (ANN) in health care include clinical Prediction, prediction of cancer, prediction of length of stay, image analysis and interpretation (e.g., automated electrocardiographic (ECG) interpretation used to diagnose myocardial infarction, and drug development².

Diabetes is chronic disease occurs due to insulin imbalance secretion. The prevalence of diabetes mellitus is rising rapidly throughout the world, and India is no exception. The International Diabetes Federation reported that 537 million adults (20–79 years old) are living with diabetes, or 1 in 10. This number is predicted to rise to 643 million by 2030 and 783 million by 2045³. Diabetes is responsible for 6.7 million deaths in 2021—1 in every 5 seconds³. The prevalence of diabetes has significantly risen in recent decades in India, which varies in rural and urban parts of the country. Type 2 diabetes is the most common type of diabetes in India. The burden of diabetes is rising rapidly in India and throughout the world. The prevalence of diabetes in India has risen from 7.1% in 2009 to 8.9% in 2019⁴. India is referred to as the "Diabetes Capital of the World" due to its increased prevalence of diabetes⁵. Undiagnosed diabetes is the major cause of chronic conditions. Some studies have reported that the prevalence of undiagnosed diabetes is more than 50% in India, whereas more than 75% of people around the world live with undiagnosed diabetes^{3,4}. In India, an estimated 77 million people above the age of 18 are suffering from diabetes (type 2), and nearly 25 million are prediabetics (at a higher risk of developing diabetes in the near future)⁶. According to reports of World Health Organization (WHO), about 422 million people worldwide have diabetes, the majority living in low-and middle-income countries, and 1.5 million deaths are directly attributed to diabetes each year⁷. WHO reported that 3% increase in mortality rate due to diabetes between year 2000 to 2019⁷.

In recent days various methods have been used for Prediction of diseases such as decision trees, the naïve Bayesian classifier, the support vector machine algorithm, random forest, multiple linear regression, the ANN algorithm, boosting and bagging algorithms, logistic regression and k-nearest neighbor etc. Risk prediction of disease at early stage of development will be helpful in prevention and management of chronic disease such as diabetes, cancer, heart disease, chronic kidney disease etc. Hence, this study was undertaken with the primary objective of reviewing and evaluating the literature available on the development of diabetes risk prediction models using Artificial Intelligence in India.

Methods

In the present research work, published original articles based on Artificial Intelligence in prediction of type 2 diabetes mellitus were collected. The articles were systematically searched on PubMed, Medline, Google scholar, Science Direct databases. The search keywords used on these databases as "Artificial Intelligence in Prediction of Diabetes", "Risk prediction models for diabetes", "Diabetes prediction using ANN" and "Prediction model for Diabetes". The collected articles were scrutinized and the relevant articles were included in the study.

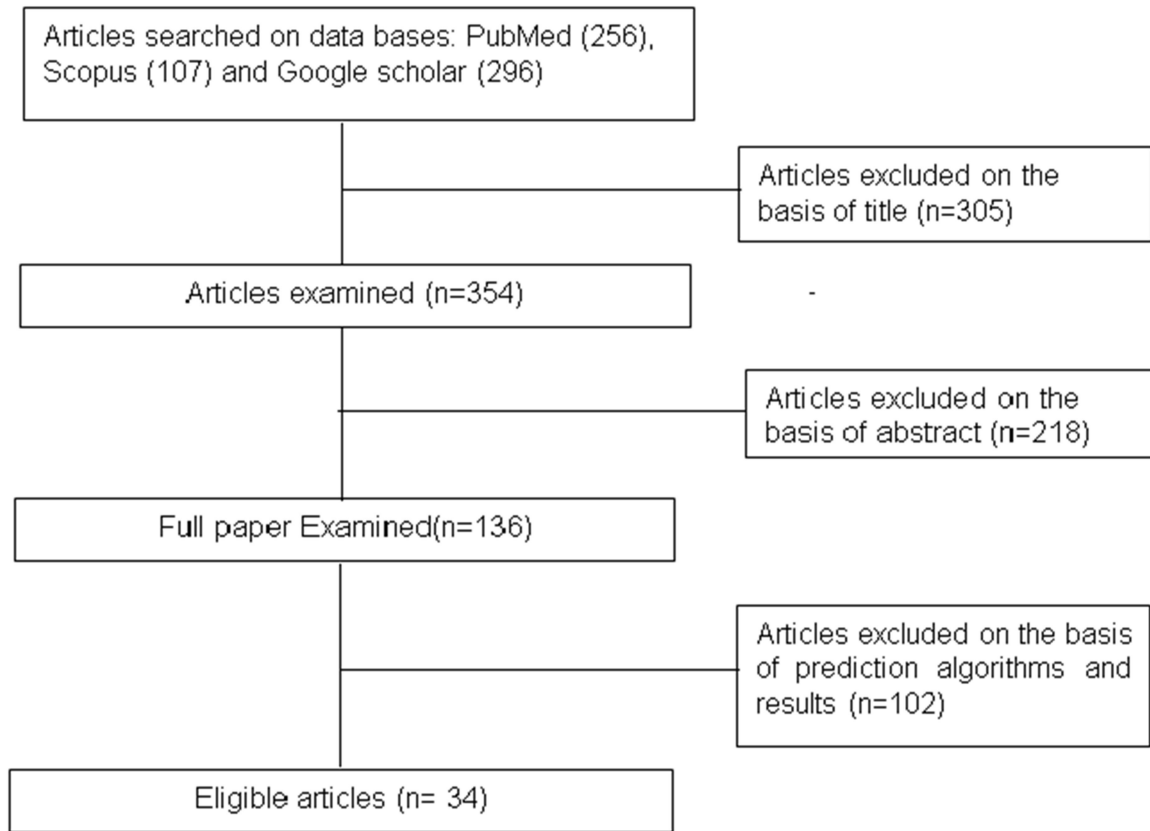
Inclusion Criteria

The articles which satisfy the following criteria were included in the study: 1) articles published in peer-reviewed journals, 2) age of participants more than 18 years or older of both the gender, 3) use artificial intelligence in prediction of type 2 diabetes.

Article selection

The articles which consider development of prediction models for Prediction of type 2 diabetes. The summarized results of included articles were tabulated and presented. A total of 700 abstracts and original articles were scanned throughout the world and 34 articles were included in the final study.

Figure 1:



From figure-1, In this literature we found total 659 articles on PubMed, Scopus, Google Scholar and Science direct. Then 305 articles were excluded from the study based on the title of the research. A total of 354 abstracts were examined and 218 articles were excluded based on abstracts. A total of 136 full articles were examined and 102 articles were excluded based on methodology, prediction algorithms and statistical results and finally 34 Indian articles which consider development of prediction algorithms for type 2 diabetes were reviewed in the present research work.

Results

Figure 2: Year-wise publication on use artificial intelligence in prediction of type-2 diabetes

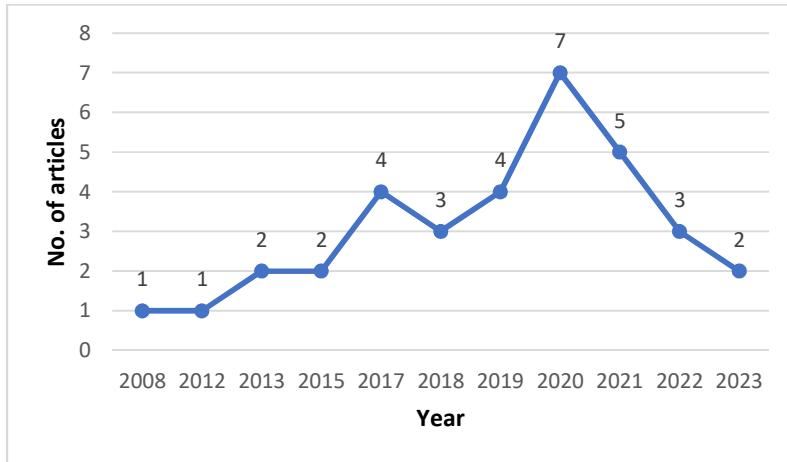


Figure-2, We found total 34 research articles in Indian literature which consider development of risk prediction models. The first article on prediction of diabetes was published in year 2008 by Rajeeb Dey et al., they used ANN model for prediction and recent publications were done in 2023. The maximum 7 articles were found in year 2020 and 2 articles were published recently in 2023 on diabetes prediction using artificial intelligence.

Figure 3: Risk parameter used in prediction of diabetes

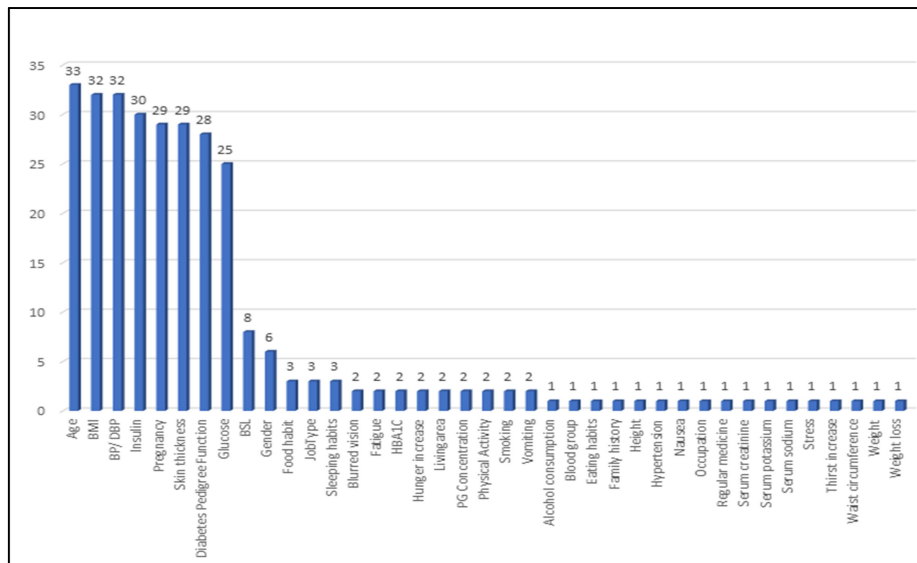
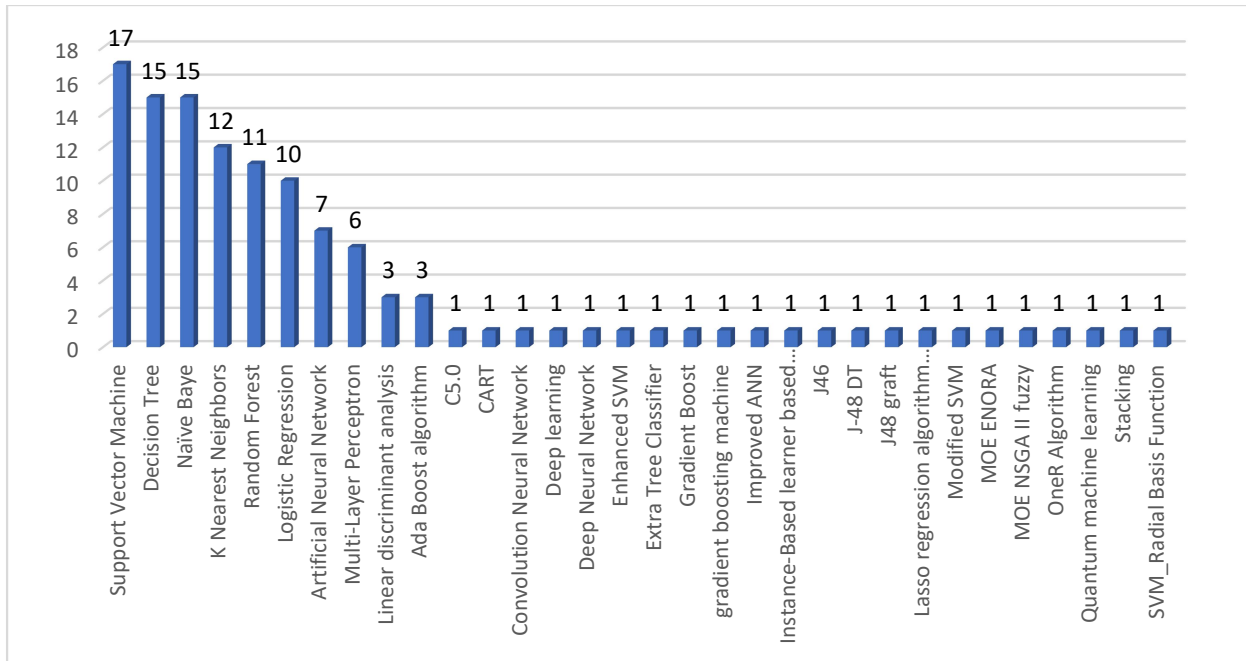


Figure-3 : The prediction models based on Pima Indian Diabetes Database used 8 risk parameters as no. of Pregnancy, BMI, Insulin level, Age, Blood pressure, Skin thickness, Glucose, Diabetes pedigree function. One researcher used 7 risk parameters from Pima Indian Diabetes Database as predictor in development of risk models based. Blood pressure (Systolic or diastolic) and Age used by all researcher in their prediction model. BMI and Insulin used by 32 and 30 researchers respectively in their prediction model. Skin fold thickness used as predictor by 27 authors in their research models. Pima Indian Diabetes database consist of diabetes pedigree function which was used by 28researchers in their prediction models. Pima Indian Diabetes Database consists of 768 female patients' data of which 26 researcher used no. of pregnancies as risk in the model development. Gender, Plasma

Glucose, HBA1C, hours of sleep, Serum creatinine, serum potassium, smoking, job type as other risk predictors in the prediction model development.

Figure 4: Most commonly used AI prediction model in prediction of diabetes



Support vector machine, Decision tree, Naïve Baye, k-Nearest Neighbour, Random Forest, Logistic regression and ANN are the most common used prediction models for diabetes.

Table 1: Details of eligible articles

Sr.no.	Study (First Author)	Year	Data Source	Sample size	No. of attribute	Highest Accuracy	Highest Accuracy Model
1	Rajeeb Dey ⁸	2008	Manipal Institute of Medical Sciences Hospital, Sikkim	530	6	93%	ANN
2	Sonu Kumari ⁹	2012	Survey	100	13	93%	ANN
3	Ms. Divya ¹⁰	2013	PIDD	768	8	Sen=88%	ANN
4	V. Anuja Kumari ¹¹	2013	PIDD	460	8	78%	SVM
5	Ayush Anand ¹²	2015	Self-Collected	180	6	75%	CART
6	Veena Vijayan V ¹³	2015	PIDD, Self-Generated for Validation	768,200	8, 6	81%	Adaboost
7	S. Selvakumar ¹⁴	2017	PIDD	100	7	80%	KNN
8	P. Suresh Kumar ¹⁵	2017	Diagnosis Lab located in Warangal, India	650	14	99%	RF

9	N. Yuvaraj ¹⁶	2017	National Institute of Diabetes	75664	7	94%	RF
10	Vaishali R ¹⁷	2017	PIDD	768	8	83%	MOE NSGA II fuzzy
11	Deepti Sisodia ¹⁸	2018	PIDD	768	8	76%	NB
12	Suyash Srivastava ¹⁹	2018	PIDD	768	8	92%	ANN
13	Debadri Dutta ²⁰	2018	PIDD	262	7	84%	RF
14	N. Sneha ²¹	2019	archive.ics.uci.edu secondary data	2500	15	78%	SVM
15	Aishwarya Mujumdar ²²	2019	Data Collected, PIDD	800	10	96%	LR
16	Jatin N Bagrecha ²³	2019	PIDD	768	8	84%	CNN
17	P. Prabhu ²⁴	2019	PIDD	768	8	81%	DBN
18	Huma Naz ²⁵	2020	PIDD	768	8	99%	DL
19	Neha Prerna Tiggaa ²⁶	2020	Self-collected/ generated, PIDD	952 Self, 768(PIDD)	16	93%	RF
20	Mitushi Soni ²⁷	2020	PIDD	768	8	77%	RF
21	Abdulhakim Salum Hassan ²⁸	2020	PIDD	768	8	90%	SVM
22	Jitranjan Sahoo ²⁹	2020	PIDD	768	8	79%	LR
23	Naveen Kishore G ³⁰	2020	PIDD	768	8	75%	RF
24	S. Thenappan ³¹	2020	PIDD	768	8	97%	SVM
25	P. Nagaraj ³²	2021	PIDD	768	8	98%	Enhanced SVM, DNN
26	Namrata Nerkar ³³	2021	PIDD	768	8	85%	ANN
27	R. Usharani ³⁴	2021	PIDD	768	8	79%	LR
28	Satish Kumar Kalagotla ³⁵	2021	PIDD	639	8	80%	Stacking
29	Radhanath Patra ³⁶	2021	PIDD	768	8	83%	KNN
30	T. Madhubala ³⁷	2022	PIDD	768	8	79%	ANN
31	SalliahShafi Bhat ³⁸	2022	Self-collected/ generated	403	11	98%	RF

32	Himanshu Gupta ³⁹	2022	PIDD	768	8	95%	DL
33	Aakash Shewani ⁴⁰	2023	PIDD	1547	8	99%	ANN
34	Yogendra Singh ⁴¹	2023	PIDD	768	8	93%	lasso regression with ANN

PIDD- Pima Indian Diabetes Database, ANN- Artificial Neural Network, SVM- Support Vector Machine, KNN- k-Nearest Neighbour, RF- Random Forest, LR- Logistic Regression, NB- Naïve Bayes Classifier, CART- Classification and Regression Trees, DL- Deep Learning, DNN- Deep Neural Network, DBN-Deep Belief Networks, CNN- Convolution Neural Network

Table-1, Author Aakash Shewani developed highest accuracy model of ANN based on PIDD. The maximum 16 predictor variables were used by Neha Prerna Tiggaa in their prediction model. Maximum sample size was 75664 and minimum sample size was 100 used by researcher in the model development.

Discussion

Total 34 original research articles were found in literature survey on prediction of Diabetes using AI in the Indian diabetic patients. The PIMA Indian Diabetes consists of female patient data with sample size n=768 of which 500 patients were non-diabetic and 268 were diabetic. There were 9 attributes in the in the Pima Indian Diabetes Database⁶. N. Yuvaraj¹⁶ et al. published article based on prediction of diabetes, they have collected secondary data from National Institute of Diabetes of sample size n-75664 with 7 attributes. They used Support Vector Machine, Naïve Bayes, Decision tree, Random Forest, Neural Network models for prediction of diabetes and they observed highest accuracy for Random Forest with 94%. Rajeeb Dey⁷ et al. collected 530 patient data from Hospital of Manipal Institute of Medical Sciences, Sikkim and used 6 attributes in model development of prediction of type 2 diabetes mellitus. They used ANN model for prediction purpose and found the accuracy of prediction was 93%. Aishwarya Mujumdar²² et al. collected the data of 800 patients with 10 attributes and they used Random Forest Classifier, Decision Tree Classifier, Extra Tree Classifier, Ada Boost algorithm, Perceptron, Linear Discriminant Analysis algorithm, Logistic regression, K-Nearest Neighbour, Gaussian NB, Bagging algorithm, Gradient Boost Classifier algorithms in model. They found logistic regression algorithm is the highest accuracy algorithm with accuracy of 96%. Neha Prerna Tiggaa²⁶ et al. developed prediction model based on Pima Indian

Diabetes database as well as self-collected database. They used 16 predictors in model and found highest accuracy for Random Forest with accuracy 93%. Sonu Kumari⁹ et al. published paper in 2012 on 100 patient's dataset and they used 13 predictor variables in model as Gender, Age in years, Weight in kilograms, Height in feet's, Weight loss, Thirst increase, Hunger increase, Appetite increase, Nausea, Fatigue, Vomiting, Bladder-Vaginal infections, Blurred vision in their model. They have applied ANN and found 92.80% prediction accuracy of ANN algorithm. Ayush Anand¹² et al developed prediction model based on dataset of 180 patients, they used 6 risk predictors as Eating habits, sleeping habits, physical activity, BMI, waist circumference in their model of Classification and Regression Tree and their model achieved the accuracy of 75%. Total 25 researcher developed prediction models based PIDD and the Highest accuracy was observed 99% for ANN Model. Aakash Shewani³⁹ et al. used PIDD for model with sample size n=1547 and used simulation technique to increase sample size. Debadri Dutta²⁰ et al. used only 7 predictors and consider 262 patient's data from PIDD in their model and excluded no. of pregnancies. They found random forest as highest accuracy model. Maximum risk predictor variables were considered by Neha Prerna Tiggaa²⁶ et al. and they consider 16 variables in prediction model. Minimum 6 risk predictors were considered by Ayush Anand¹² et al. and Rajeeb Dey⁷ et al. Author V. Anuja Kumari¹¹ used 460 patient's data in the prediction model and excluded missing values and

outliers from PIDD and found accuracy of 78% from Support Vector Machine classifier. Some researcher who used PIDD replaced the missing values with mean values in the respective predictor. As we found PIDD consists of missing values in Glucose level, Blood pressure Skinfold thickness, Insulin and BMI. Maximum missing values were for Insulin and Skinfold thickness with 374 and 227 respectively in PIDD.

Conclusion

Prediction of diseases at early stage is helpful for prevention and control the chronic diseases, such prediction of diseases is possible by the use of Artificial Intelligence. Artificial Intelligence can be

used in the Prediction of diabetes with higher prediction accuracy by considering most common risk factors of Diabetes Mellitus.

From last one-decade Artificial Intelligence is used in the prediction of diabetes. The different models and algorithms were used for prediction purpose of diabetes by various researcher. Most responsible factors for diabetes were found as age, BMI, hypertension, parental history, and skin fold thickness. We hope that this systematic review of prediction of diabetes mellitus will also provide guidance to research in this new emerging sector of prediction of diabetes.

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