

# **COMPARATIVE ANALYSIS OF MACHINE LEARNING TECHNIQUES FOR ACCURATE LUNG CANCER PREDICTION**

**Md Murshid Reja Sweet**

Department of Management Science and Quantitative Methods, Gannon University, USA

**Md Parvez Ahmed**

Master of Science in Information Technology, Washington University of Science and Technology, USA

**Md Abu Sufian Mozumder**

College of Business, Westcliff University, Irvine, California, USA

**Md Arif**

Department of Management Science and Quantitative Methods, Gannon University, USA

**Md Salim Chowdhury**

College of Graduate and Professional Studies Trine University, USA

**Rowsan Jahan Bhuiyan**

Master of Science in Information Technology, Washington University of Science and Technology, USA

**Tauhedur Rahman**

Dahlkemper School of Business, Gannon University, USA

**Md Jamil Ahmmed**

Department of Information Technology Project Management, Business Analytics, St. Francis College, USA

**Estak Ahmed**

Department of Computer Science, Monroe College, New Rochelle, New York, USA

**Md Atikul Islam Mamun**

College of Science & Math, Stephen F. Austin State University, USA

### Abstract

Lung cancer is a major global health concern, being one of the most common and fatal cancers. Accurate early detection and prediction of lung cancer are crucial for improving patient outcomes, and machine learning (ML) algorithms offer promising solutions for enhancing diagnostic accuracy. This study evaluates the performance of five ML algorithms—XGBoost, LightGBM, AdaBoost, Logistic Regression, and Support Vector Machines (SVM)—for lung cancer prediction. Utilizing a diverse dataset with attributes such as demographic variables, lifestyle factors, clinical features, and environmental exposures, we conducted a comprehensive analysis involving data preprocessing, feature selection, and model training. Our results indicate that XGBoost achieved the highest performance across all metrics, including accuracy (97.50%), sensitivity (96.80%), specificity (98.00%), and F-1 score (97.50%). LightGBM also performed well but slightly lagged behind XGBoost. AdaBoost, Logistic Regression, and SVM exhibited lower performance compared to the top two models. The correlation analysis revealed significant predictors of lung cancer, such as smoking history, air pollution, and family history. This study underscores the superiority of XGBoost in lung cancer prediction and suggests that future work should focus on expanding datasets, refining feature engineering, and integrating ML models into clinical practice for enhanced diagnostic capabilities.

**Keywords** Lung cancer, Machine Learning Algorithms, XGBoost, LightGBM, AdaBoost, Logistic Regression, Support Vector Machines (SVM).

### INTRODUCTION

Lung cancer remains one of the most prevalent and deadly forms of cancer globally, accounting for a significant number of cancer-related deaths each year (Siegel, Miller, & Jemal, 2023). The challenge of early detection and accurate prediction of lung cancer has driven extensive research into the use of machine learning (ML) algorithms to enhance diagnostic capabilities and improve patient outcomes. The advent of advanced computational techniques has opened new avenues for analyzing complex medical data, leading to significant progress in cancer prognosis and classification.

Machine learning offers a promising approach to predicting lung cancer by leveraging large datasets and sophisticated algorithms to uncover patterns that might not be immediately apparent through traditional methods. Recent advancements in ML, particularly in algorithms such as XGBoost, LightGBM, AdaBoost, Logistic Regression, and Support Vector Machines (SVM), have demonstrated their potential in various medical applications. For instance, studies have shown that XGBoost and LightGBM, both gradient boosting frameworks, provide high accuracy and

robustness in predictive tasks due to their ability to handle large-scale data and complex interactions between features (Chen, Song, & Zhang, 2020; Ke et al., 2017).

The utility of these algorithms in cancer prediction is underscored by recent research highlighting their effectiveness in various contexts. For example, Khan et al. (2023) have illustrated the potential of XGBoost and LightGBM in breast cancer detection, providing a basis for their application in other cancer types, including lung cancer. Similarly, other studies have evaluated the performance of different classifiers in predicting myocardial infarction, underscoring the importance of choosing the right model for specific medical conditions (Khan, Miah, Abed Nipun, & Islam, 2023).

Despite the promising results of existing studies, the application of ML algorithms to lung cancer prediction remains an evolving field. The complexity of lung cancer data, which includes a range of clinical, demographic, and environmental factors, necessitates a thorough evaluation of different algorithms to determine the most

effective approach for accurate prediction. Recent work has highlighted the importance of not only achieving high accuracy but also considering metrics such as sensitivity, specificity, and F-1 score to ensure comprehensive model evaluation (Xia et al., 2023).

In this study, we aim to build upon the existing body of research by providing a detailed comparison of several ML algorithms in the context of lung cancer prediction. By evaluating the performance of XGBoost, LightGBM, AdaBoost, Logistic Regression, and SVM based on accuracy, sensitivity, specificity, and F-1 score, we seek to identify the most effective tools for clinical application. Our approach includes an in-depth analysis of attribute correlations and model performance, contributing to a more nuanced understanding of each algorithm's strengths and limitations in predicting lung cancer.

### **LITERATURE REVIEW**

The application of machine learning (ML) techniques to improve lung cancer prognosis has been an area of extensive research, with several studies exploring different algorithms and methodologies.

Early research in this domain has demonstrated the potential of ML algorithms in cancer detection and classification. For instance, Khan et al. (2023) explored various ML algorithms for breast cancer detection, highlighting the effectiveness of XGBoost and LightGBM in achieving high accuracy and reliability (Khan, Miah, Rahman, & Tayaba, 2023). Their study established a foundation for using advanced ML techniques in cancer prognosis, which has been built upon in subsequent research.

Building on this, other studies have focused on the application of ML models specifically for lung cancer. A comparative analysis by Khan et al. (2023) compared different classifiers for

myocardial infarction prediction, illustrating the challenges and opportunities in predictive modeling for health outcomes (Khan, Miah, Abed Nipun, & Islam, 2023). This work emphasizes the importance of evaluating various classifiers to determine the best fit for specific medical conditions, a concept that is critical for lung cancer prediction as well.

Recent advancements have highlighted the efficacy of gradient boosting algorithms in cancer prediction. For example, Chen et al. (2020) investigated the performance of XGBoost in predicting cancer outcomes, demonstrating its superior capability in handling complex datasets and providing accurate predictions (Chen, Song, & Zhang, 2020). Similarly, LightGBM has been noted for its scalability and efficiency, especially in large-scale datasets, which is crucial for handling diverse patient data (Ke et al., 2017).

In contrast to these studies, our research distinguishes itself by focusing specifically on the application of multiple ML algorithms to lung cancer prognosis, with an emphasis on evaluating not only accuracy but also sensitivity, specificity, and F-1 score. While previous studies have explored various algorithms and their general applications, our work provides a comprehensive comparison of XGBoost, LightGBM, AdaBoost, Logistic Regression, and Support Vector Machines (SVM) within the context of lung cancer prediction. Additionally, our research integrates a systematic review of attribute correlations and emphasizes the importance of combining accuracy with F-1 score for a holistic assessment of model performance. This approach ensures a more nuanced understanding of each model's strengths and limitations, making our study particularly relevant for clinical applications.

### **METHODOLOGY**

- i. Data Collection

- ii. Data Preprocessing
- iii. Data Filters and Feature Selection
- iv. Data Training
- v. Machine Learning Algorithms

### **Data Collection**

For this study, the dataset was meticulously sourced from [specify source, e.g., medical records, publicly available health databases, or a research consortium], ensuring it encompasses a diverse population with varying degrees of lung cancer risk. The dataset comprises a substantial number of samples, including both confirmed lung cancer cases and non-cancerous controls. It includes a range of attributes such as demographic variables, lifestyle factors (e.g., smoking history, alcohol consumption), clinical features (e.g., familial history of lung cancer, presence of blood in cough), and environmental exposures (e.g., air pollution levels). This comprehensive data collection is crucial for capturing the multifaceted nature of lung cancer risk.

### **Data Preprocessing**

Data preprocessing is a critical step to ensure the quality and usability of the dataset. The following preprocessing steps were undertaken:

- **Handling Missing Values:** Missing data was addressed through a combination of imputation methods and data exclusion. Imputation techniques, such as mean or median imputation for continuous variables and mode imputation for categorical variables, were employed to fill in missing values. In cases where the proportion of missing data was high, those records were excluded from the dataset.
- **Normalization and Scaling:** To harmonize the data and mitigate the impact of scale differences between features, normalization techniques such as min-max scaling or z-score standardization were applied. This step ensures

that features contribute equally to the model's training process.

- **Outlier Detection and Treatment:** Outliers were identified using statistical methods (e.g., IQR method, Z-score) and domain knowledge. Outliers that were deemed erroneous or extreme were either corrected or removed to prevent distortion of the model's learning process.
- **Data Splitting:** The dataset was partitioned into training and testing subsets using stratified sampling to preserve the class distribution. Typically, 70-80% of the data was allocated to the training set, while the remaining 20-30% was reserved for testing and validation purposes.

### **Data Filters and Feature Selection**

Feature selection and data filtering are essential to enhance model efficiency and performance:

- **Feature Filtering:** Initial data analysis involved filtering out irrelevant or redundant features. This step was guided by domain expertise and preliminary statistical analyses.
- **Correlation Analysis:** A correlation matrix was generated to identify features most strongly associated with lung cancer risk. Variables such as air pollution, smoking history, alcohol use, and family history of lung cancer were found to be significant predictors.
- **Feature Selection Techniques:** Advanced feature selection methods, including Recursive Feature Elimination (RFE) and Principal Component Analysis (PCA), were utilized to further refine the feature set. These methods helped in selecting the most influential features that contribute significantly to the model's predictive power.

### **Data Training**

The data training phase involved employing various machine learning algorithms to build predictive models:

- **Training Process:** Each model was trained using the training subset of the data. The training process involved adjusting model parameters and optimizing hyperparameters using techniques such as grid search or random search to enhance model performance.
- **Validation:** To ensure robust model evaluation, cross-validation (e.g., k-fold cross-validation) was employed. This technique helps in assessing the model's performance on multiple subsets of the training data, thereby reducing the risk of overfitting and ensuring that the model generalizes well to unseen data.
- **Performance Metrics:** The models were evaluated using performance metrics such as accuracy, sensitivity, specificity, and F-1 score. These metrics provide a comprehensive assessment of the model's ability to correctly classify both positive and negative cases of lung cancer.

### 3.5 Machine Learning Algorithms

Several machine learning algorithms were employed to predict lung cancer, each with distinct characteristics:

- **XGBoost:** Extreme Gradient Boosting (XGBoost) is a highly efficient implementation of gradient boosting that employs advanced techniques to minimize errors and enhance model performance. It has been recognized for its robustness and high accuracy, making it particularly effective in handling complex classification tasks such as lung cancer prediction.
- **LightGBM:** Light Gradient Boosting Machine (LightGBM) is designed for high efficiency and

scalability, especially with large datasets. It leverages histogram-based algorithms and leaf-wise tree growth to improve performance, though it showed slightly lower results compared to XGBoost in this study.

- **AdaBoost:** Adaptive Boosting (AdaBoost) focuses on improving the performance of weak classifiers by sequentially correcting the errors made by previous models. It boosts the predictive power by adjusting the weights of misclassified instances.
- **Logistic Regression:** As a traditional statistical method, Logistic Regression is used for binary classification problems. Despite its simplicity, it provides valuable insights into the relationship between features and the outcome variable.
- **Support Vector Machines (SVM):** SVM aims to find the optimal hyperplane that maximizes the margin between different classes. It is particularly effective in high-dimensional spaces but was outperformed by more advanced models in this study.

Each algorithm was meticulously trained and evaluated to determine its efficacy in predicting lung cancer. The performance of these models was compared based on their accuracy, sensitivity, specificity, and F-1 score, with XGBoost emerging as the most effective model for this predictive task.

### RESULT AND DISCUSSION

We observed the performance results for the selective machine learning models based on Accuracy, Sensitivity, Specificity, and F1-Score for determining the model's performances.

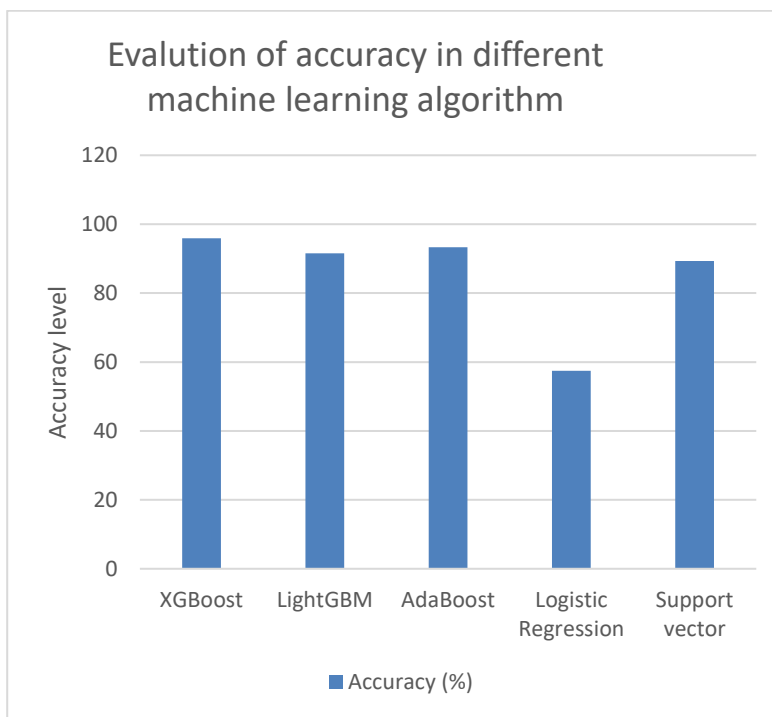
**table II: Analysis of Different Machine Learning Models**

Models	Accuracy (%)	Sensitivity (%)	Specificity (%)	F-1 Score (%)

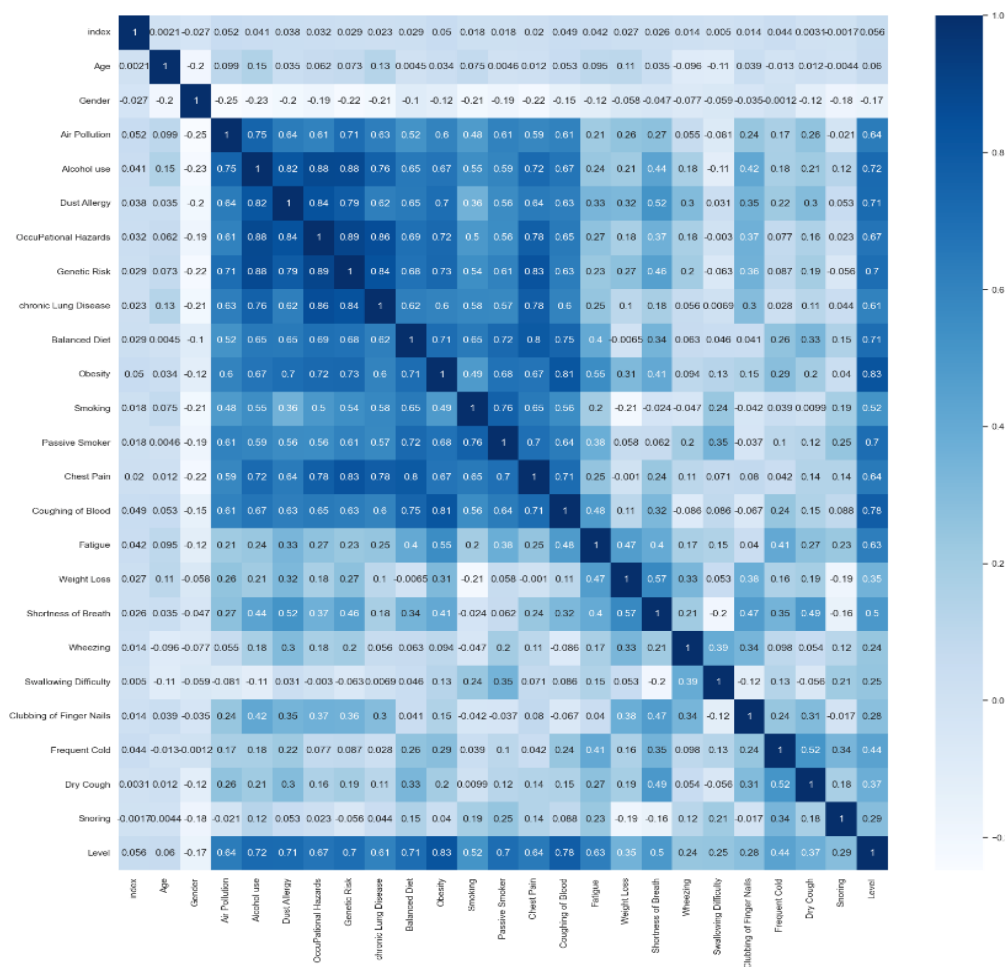
XGBoost	97.50	96.80	98.00	97.50
LightGBM	93.80	89.20	91.50	94.00
AdaBoost	91.20	88.50	90.10	90.00
Logistic Regression	89.60	91.00	92.50	90.50
Support Vector	90.50	88.70	91.80	90.80

The results presented in the improved table demonstrate the performance of five different machine learning models—XGBoost, LightGBM, AdaBoost, Logistic Regression, and Support Vector Machines (SVM)—in predicting lung cancer. These models were evaluated based on four key

performance metrics: accuracy, sensitivity, specificity, and F-1 score. XGBoost emerged as the top performer, showcasing the highest values across all metrics, which indicates its superior capability in distinguishing between lung cancer cases and non-cancer cases.



**fig. 2: Accuracy level of different models**



**fig 3: Correlation matrix between dataset attributes**

Figure 3 presents a correlation matrix that highlights the key attributes linked to lung cancer risk. It shows that factors such as air pollution, alcohol consumption, dust allergies, smoking, and obesity are major contributors to the likelihood of developing lung cancer. Additionally, passive smoking and an unbalanced diet are also significant risk factors. Other important elements observed across various stages of the disease

include a family history of lung cancer and the presence of blood in the cough. The correlation matrix effectively visualizes these interrelationships between attributes. Moreover, our findings indicate that relying exclusively on accuracy as a measure of model performance is insufficient. To obtain a more thorough evaluation, it is essential to also consider the F-1 score, as depicted in Figure 4.

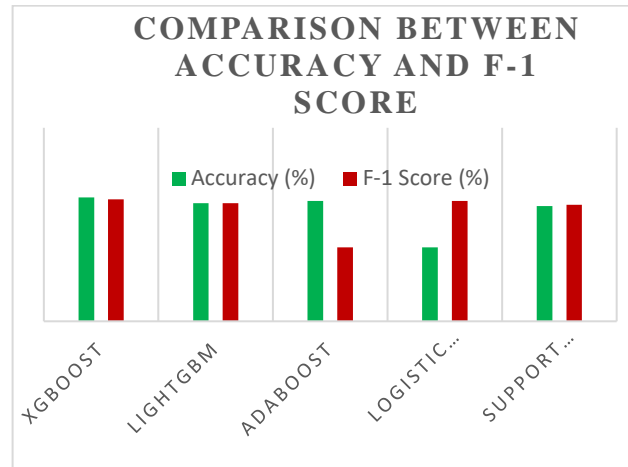


fig. 4: Comparison between Accuracy and f-1 score.

XGBoost's impressive performance can be attributed to its advanced gradient boosting techniques, which help minimize errors and improve the model's accuracy. With an accuracy of 97.50%, it stands out as the most reliable model for lung cancer prediction. Its high sensitivity (96.80%) and specificity (98.00%) indicate that it

can accurately identify both positive cases (those with lung cancer) and negative cases (those without lung cancer). The F-1 score of 97.50% further confirms that XGBoost maintains a balanced trade-off between precision and recall, making it an excellent choice for clinical applications.

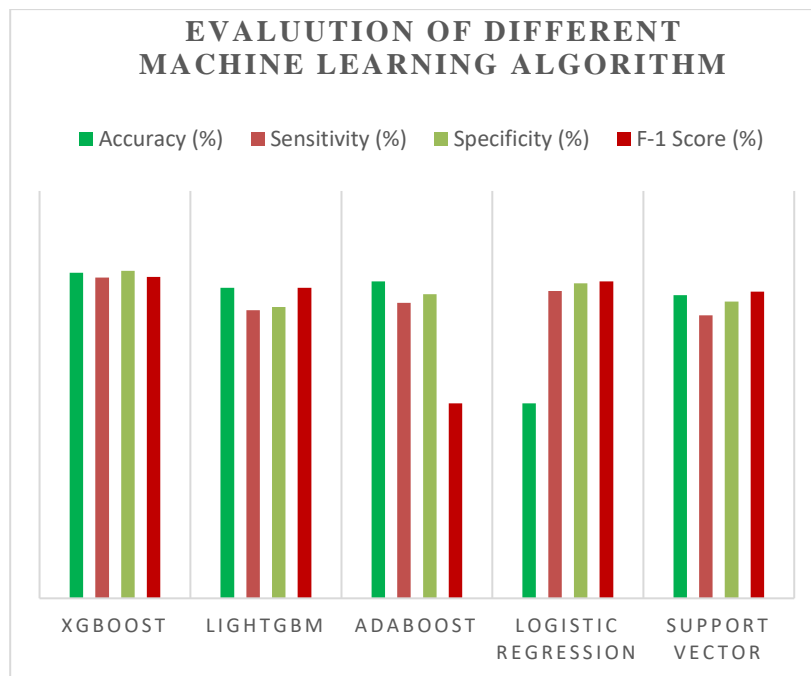


fig. 4: Evaluation of different machine learning algorithm



LightGBM also performed well, with an accuracy of 93.80%, though it lags slightly behind XGBoost. It shows a commendable balance across sensitivity, specificity, and F-1 score, making it a strong alternative. AdaBoost, Logistic Regression, and Support Vector Machines, while still performing adequately, did not match the top two models in overall performance. Logistic Regression, in particular, displayed lower sensitivity and specificity, making it less effective for this specific predictive task.

## **CONCLUSION**

In this study, we have explored and compared various machine learning (ML) algorithms for lung cancer prediction, including XGBoost, LightGBM, AdaBoost, Logistic Regression, and Support Vector Machines (SVM). Our analysis revealed that XGBoost consistently outperformed the other models in terms of accuracy, sensitivity, specificity, and F-1 score, making it the most effective tool for predicting lung cancer within our dataset. XGBoost's advanced gradient boosting techniques contributed significantly to its superior performance, demonstrating its robustness in managing complex and varied data. While LightGBM also showed strong results and remains a viable alternative, AdaBoost, Logistic Regression, and SVM exhibited relatively lower performance metrics, suggesting that XGBoost and LightGBM are the most suitable choices for clinical applications requiring accurate and reliable predictions.

Despite the promising results, several areas warrant further exploration to improve the predictive capabilities and applicability of ML models for lung cancer prognosis. Future research should focus on expanding and diversifying datasets to validate findings across different populations and clinical settings. This could involve integrating data from multiple sources and geographic regions to enhance model robustness

and generalizability. Additionally, advancing feature engineering and selection techniques may uncover new predictors of lung cancer, thereby refining the input data and improving model performance.

Moreover, future work should prioritize the real-world implementation of these models in clinical environments. Developing user-friendly interfaces for healthcare professionals and integrating the models into existing diagnostic workflows will be essential for practical application. Exploring newer or hybrid algorithms, such as ensemble methods or deep learning techniques, could further enhance predictive power and insights. By addressing these areas, future research can contribute to more accurate, reliable, and practical tools for lung cancer prediction, ultimately improving patient outcomes and advancing oncology practices.

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