



IN APPLIED SCIENCE & ENGINEERING TECHNOLOGY

Volume: 12 Issue: V Month of publication: May 2024

DOI: https://doi.org/10.22214/ijraset.2024.62600

www.ijraset.com

Call: 🕥 08813907089 🔰 E-mail ID: ijraset@gmail.com



Diabetes Prediction and Management using Machine Learning Algorithms

Aaron Sharon Dsouza¹, Dhrishya Shetty², Missbah Banu Muneer³, Peter Caetano Joao⁴ Shri Madhwa Vadiraja Institute of Technology and Management

Abstract: Our research introduces a multifaceted diabetes prediction and management system, employing two distinct methodologies: one based on fasting and postprandial blood sugar levels, ie, without the datasets, and the other incorporating additional health parameters like glucose levels, blood pressure, BMI, and age, with datasets utilizing logistic regression. Evaluation of both approaches demonstrated robust predictive capabilities. A user-friendly website interface facilitates seamless data input, enhancing accessibility for users. Complementing predictive features, an online community platform was established to foster peer support and information exchange among individuals managing diabetes, promoting a sense of community and shared experience. Moreover, the system generates personalized diet plans tailored to users' diabetes status, providing actionable dietary guidance to support health management goals. By integrating predictive analytics, user engagement, and personalized dietary support, our system aims to empower individuals with diabetes, facilitating better health outcomes and fostering a supportive environment for effective disease management.

I. INTRODUCTION

Diabetes mellitus, a chronic metabolic disorder characterized by elevated blood glucose levels, poses a significant global health challenge. With its prevalence steadily increasing worldwide, effective strategies for early detection, management, and prevention are essential. In response to this urgent need, we present a comprehensive research endeavor focused on the development and implementation of a novel diabetes prediction and management system. Our research aims to address the multifaceted aspects of diabetes care by leveraging advanced technology, personalized interventions, and community support.



Fig.1 Landing page of our Website

The cornerstone of our research lies in the creation of a user- friendly web-based platform designed to empower individuals in understanding and managing their diabetes risk. This platform offers two primary methods for predicting diabetes: the first method involves inputting fasting blood sugar and postprandial blood sugar levels, while the second method incorporates broader health parameters such as glucose levels, blood pressure, body mass index (BMI), and age. Through the integration of sophisticated algorithms, including logistic regression, we aim to provide accurate and personalized predictions tailored to each individual's health profile.

Empowering Health, One Test at a Time. Once the second se	Failing Bood Sugar (Ing/U)
@ Duick	Post Prandal Blood Sugar (mg/dl):
© Eavy	
Simple	
C temediate Abrice	
Choose File No file chosen	Predict
Linkows	

Fig.2 Type 1 Prediction



International Journal for Research in Applied Science & Engineering Technology (IJRASET) ISSN: 2321-9653; IC Value: 45.98; SJ Impact Factor: 7.538

Volume 12 Issue V May 2024- Available at www.ijraset.com

Beyond mere diagnosis, our system places a strong emphasis on proactive management and support. Upon diabetes identification or risk assessment, personalized diet plans, meticulously curated by healthcare professionals, are generated to promote healthier lifestyle choices and improve blood sugar control. Moreover, recognizing the importance of social support diabetes management, our platform features a robust community component where users can connect with peers, share experiences, and seek guidance. This collaborative approach fosters a sense of belonging and empowerment, enhancing user engagement and adherence to recommended interventions.



Fig.3 Type 2 Prediction

Chat	Community Members			
		Peer	852004, 154 15 pr	
	aron N	15/2024, 1 Se 15 pm		
	Peter has entered the chat	152204.154.15 pm		
	Type Message here.			*
	Fig.	$2 \times 0 \Pi \Pi \Pi \Pi \Pi \Pi$	/	
	J			
let connected in	offu a or social retriente:			
Bet connected to	with us on social redworks:	COMMUNITY Enter par name	CONTACT Name	
Det connected a	who are ascall retrieves: GUICOGALAXY Mitcher you'r bioding to sasses your rhik of sabates or seeding support in anwaging your controllo, couldwaigh i here to help you controllo, couldwaigh i here to help you en erey step of the say.	COMMUNITY Enter your new Enter name Join	CONTACT Name E-mat Message	
Del connected a	where an acceleratoric in the series of the	COMMUNITY Enter part rane Enter rane Xot	CONTACT Name Ernat Message Gabert	
û de sonnested w	where are associal antiworks: GUICOGALAXY Mitheline yorks tracking to passess pour finit proceedings, conclusionary in terms to beep proceedings, conclusionary in terms to beep proceedings, conclusionary in terms to beep	COMMUNITY Enter par name Enter name Join	CONTACT Name E-mail Message E-bane	



International Journal for Research in Applied Science & Engineering Technology (IJRASET) ISSN: 2321-9653; IC Value: 45.98; SJ Impact Factor: 7.538 Volume 12 Issue V May 2024- Available at www.ijraset.com

In this paper, we elucidate the methodology employed in the development and implementation of our diabetes prediction and management system. We outline the system architecture, data collection procedures, algorithmic approaches, and integration of community features. Furthermore, we discuss the ethical considerations inherent in conducting research of this nature, emphasizing the importance of user privacy, data security, and regulatory compliance. Through rigorous evaluation and feedback mechanisms, we endeavor to assess the efficacy, usability, and impact of our system on diabetes care, with the ultimate goal of improving health outcomes and enhancing the quality of life for individuals affected by diabetes.

II. PROPOSED MODEL

This research adopts a multifaceted approach to develop and evaluate a comprehensive diabetes prediction and managementsystem. The methodology encompasses the design, implementation, and assessment of various components, including data collection procedures, algorithm development, personalized intervention generation, community integration, and system evaluation.

A. Type 1

This section details the development of our automatic diabetes prediction system using machine learning techniques. As depicted in Figure 1, we began by collecting and preprocessing the dataset, addressing issues like missing values and class imbalances. Subsequently, we divided the dataset into training and testing sets using holdout validation. Then, various classification algorithms were tested to identify the most effective one for our dataset. Finally, the top-performing prediction model was integrated into our website and smartphone application framework for deployment.

1) Dataset

For our diabetes prediction and management system, we utilized the Pima Indian Diabetes Dataset, a widely recognized repository in the field of diabetes research. This dataset contains valuable information collected from Pima Indian women, providing insights into diabetes prevalence and risk factors within this population. While the dataset originally includes various features such as pregnancies, skin thickness, diabetes pedigree function, and insulin levels, we focused specifically on key parameters essential for diabetes prediction: glucose levels, blood pressure (BP), body mass index (BMI), and age.

regnancies number)	Glucose (mg/dl)	Blood pressure (mmHg)	Skin thickness (mm)	Insulin (mu U/dl)	BMI (kg/m ²)	Diabetes pedi- gree function	Age (yr)	Outcome
	148	72	35	0	33.6	0.627	50	1
	85	66	29	0	26.6	0.351	31	0
	183	64	0	0	23.3	0.672	32	1
	89	66	23	94	28.1	0.167	21	0
	137	40	35	168	43.1	2.288	33	1
	116	74	0	0	25.6	0.201	30	0
	78	50	32	88	31	0.248	26	1
0	115	0	0	0	35.3	0.134	29	0
	197	70	45	543	30.5	0.158	53	1
	125	96	0	0	0	0.232	54	1
	110	92	0	0	37.6	0.191	30	0
0	168	74	0	0	38	0.537	34	1
0	139	80	0	0	27.1	1.441	57	0
	189	60	23	846	30.1	0.398	59	1
	166	72	19	175	25.8	0.587	51	1
	100	0	0	0	30	0.484	32	1
	118	84	47	230	45.8	0.551	31	1
	107	74	0	0	29.6	0.254	31	1
	103	30	38	83	43.3	0.183	33	0
					-			

Fig. 5 Pima Indian Diabetes Dataset

	Glucose	BloodPressure	BMI	Age	Outcome
0	148	72	33.6	50	1
1	85	66	26.6	31	0
2	183	64	23.3	32	1
3	89	66	28.1	21	0
4	137	40	43.1	33	1

Fig.6 Attributes taken in our Project

These features were selected based on their clinical relevance and established correlations with diabetes onset and progression. By narrowing our focus to these essential predictors, we aimed to streamline our predictive model while ensuring its accuracy and efficiency. Additionally, our decision to utilize the Pima Indian Diabetes Dataset aligns with previous research efforts, enabling comparability and validation of our findings within the broader scientific community. Furthermore, the availability of a well-established dataset facilitated the development and testing of our predictive algorithms, ensuring robustness and reliability in our system's performance. Overall, by leveraging the rich insights provided by the Pima Indian Diabetes Dataset and focusing on key predictive features, we aimed to enhance the effectiveness and applicability of our diabetes prediction and management system for improved patient outcomes and healthcare delivery.



International Journal for Research in Applied Science & Engineering Technology (IJRASET)

ISSN: 2321-9653; IC Value: 45.98; SJ Impact Factor: 7.538 Volume 12 Issue V May 2024- Available at www.ijraset.com

2) Algorithm Selection & Implementation

By following these methodology steps, we aimed to develop a robust diabetes prediction and management system that effectively addresses the needs of users while upholding ethicalstandards and promoting user engagement and empowerment.



Fig.7 Flowchart of our Working Model

3) Model Deployment

After rigorous experimentation, logistic regression emerged as the most effective algorithm for diabetes prediction, yielding the highest accuracy score among the various classification algorithms tested. Leveraging its simplicity and interpretability, we adopted logistic regression as the cornerstone of our diabetes prediction system.

To make our system accessible to a wide audience, we opted for deployment as a website. We utilized HTML and CSS for the frontend development, ensuring a user-friendly interface for seamless interaction with the prediction system. This choice allows individuals to easily input their health data and receive predictions regarding their diabetes status in a clear and intuitive manner.

The development and testing of our prediction model were facilitated by the use of Google Colab, a cloud-based Jupyter notebook environment. This platform provided us with computational resources and collaborative tools, enabling efficient code development, experimentation, and refinement. By leveraging Google Colab, we streamlined the development process and ensured the reliability and scalability of our diabetes prediction system for deployment on the web.









Diabetes Advice

You are Free from diabetes. Maintain a Healthy Weight: Excess weight, especially around the abdomen, increases the risk of developing type 2 diabetes. Aim for a healthy weight through a balanced diet and regular exercise. Risk Factors: normal glucose, high BMI

Fig.9 One of the result of this prediction

B. Type 2

In this method, we don't use any existing dataset for training andtesting. It's a simple prediction model that tells us if people are at risk of diabetes. People can directly input their fasting bloodsugar (FBS), postprandial blood sugar (PPBS), and body mass index (BMI) into our system. This means they don't have to relyon existing datasets. Instead, they get personalized predictions about their diabetes risk based on their own health info. This makes it easier for everyone to use our system, and the predictions are more accurate because they're based on each person's unique health details. By doing this, we encourage people to take control of their health and make informed decisions. It also helps us avoid biases or limitations that might come from using old datasets. Our goal is to help people understand their diabetes risk better and take steps to stayhealthy.

	Fasting Blood Sugar (mg/dl):
	150
1	Post Prandial Blood Sugar (mg/dl):
	180
	Predict
	Ficult
Fi	g.10 Prediction without using Dataset
	Diabetes Advice
	"(This content might differ. We support you to consult a doctor.)"
ig.1	You are Free from diabetic. 1 Result when the person has no Diabetes
	Diabetes Advice
	"(This content might differ. We suggest you to consult a doctor.)"
Ye	ou are prediabetic. Take actions immediately to prevent diabetes.
Do's:	
Exercise Re	egularly: Engage in 30 minutes of brisk walking every day or practice Yoga to maintain physical fitness and overall well-be
entioxidants	reen Leasy vegetaces: incorporate green leasy vegetables into your daily diet as they are rich in essential nutrients, fiber, crucial for optimal health.
Reduce Su	gar Intake: Cut down on sugar consumption to maintain stable blood sugar levels and support a healthy lifestyle.
Include Ami	a in Your Diet: Amla, also known as Indian gooseberry, is beneficial for controlling blood sugar levels due to its high vitami
Include Ami	ta in Your Diet: Amla, also known as Indian gooseberry, is beneficial for controlling blood sugar levels due to its high vitami antioxidiant properties.
Include Ami content and a Consume F ibundance o	is in Your Diet Annia, also known as Indian gooseberry, is beneficial for controlling blood sugar levels due to its high vitam antioxidant properties. Yeah Fhuits: Incorporate finals such as apples, oranges, musambi (sweet lime), and watermelon into your diet for their y dramins, mineraes, and hydration.
Include Ami content and a Consume F ibundance o Manage Str	ias h Your (DRI: Andia, alloi known as Indian gooseberry; is beneficial for controlling blood sugar levels due to its high vitan includes propriet in the state of the state Probe Prube: Incorporate Fully such as applies, oranges, musanetic (seveel line), and watermeton Into your diet for their of klamine, instrume, and hydrautoni.



ISSN: 2321-9653; IC Value: 45.98; SJ Impact Factor: 7.538 Volume 12 Issue V May 2024- Available at www.ijraset.com

Diabetes Advice

'his content might differ. We suggest you to consult a doctor.)*

You are diabetic. Strictly consult a doctor. You need to follow a specific strict diet plan along with medications and lifestyle modifications.

- Vegetables: Green Leafy Vegetables, Cabbage, Cauliflower, Cucumber, Tomato, Beans, Onion, Carrot, Rasam

- Fruits: Apple, Orange, Musambi, Papaya, Watermelon

- Juices: Coconut water, Fresh Lime Juice, Thin Butter Milk, Tea or Coffee without Sugar - Non-veg: Egg, Fish, 1 piece of Chicken

Foods Not Permitted:

- Vegetables: Potato, Sweet Potato, Beetroot, Tapioca
 - Fruits: Sugarcane, Chikoo, Mango, Banana, Pineapple, Jackfruit, Black Grapes
 - Food, Dry Fruits, Sugar, Honey, Jaggery, Jelly, Ground Nut, Cashew Nut, Cheese, Paneer, Ice cream, Ghee, Cocconut Oil
 - Non-vec: Beef, Pork, Mutton

Special Instructions:

Do not skip meals. Do not overeat. Have them at the proper time and avoid all fatty food and sweets in food.
Drink 2-3 L of water daily.
Avoid smoking and other forms of tobacco intake.
Avoid soft drinks and liquors of all kinds.

Lifestyle Modifications:

Stick to the above mentioned Diabetic Diet.
 Have good physical exercise – Brisk walk for 30 minutes / daily for 5-6 days a week
 Maintain desirable weight.
 Have adequate rest and avoid food and tension.
 Have good mental exercise – Yoga and Meditation regularty
 Have periodic medical check-up to have your sugar levels in control.

Please consult with a healthcare professional before making any significant changes to your diet or exercise routine, especially if you have any underlying health conditions.

Fig.13 Result when the person has Diabetes

In our mission to address the challenges of diabetes, we've developed a user-friendly system aimed at predicting and managing the condition effectively. Picture logging into a website where you can input crucial health information. For some, this entails entering details like fasting blood sugar and postprandial (after-meal) blood sugar levels. For others, it involves providing data such as glucose levels, blood pressure, body mass index (BMI), and age.

1) Let's dive into how our system operates.

For the first group, the process uses the Pima Indian Dataset. Here, our system utilizes an algorithm called logistic regression, which, among other algorithms, we've found to be the most accurate. While it may sound complex, it essentially analyzes multiple factors (Glucose levels, BMI, Blood Pressure and Age.) to predict the likelihood of developing or having diabetes. Users will get to know about their diabetes condition, either 1 (has diabetes) or 0 (do not have diabetes) along with an advice on what to do.

For the second group, after inputting their fasting blood sugar and post prandial blood sugar levels, our system generates output based on established medical guidelines, instantly providing feedback on whether the person is free from diabetes, pre-diabetic, or diabetic. It's akin to having a virtual assistant guiding you through your health journey, and a diet plan trustedby doctors is generated accordingly. However, our system extends beyond mere diagnosis. It's about empowering individuals to take control of their health. For those identified as at-risk or diagnosed with diabetes, personalized diet plans are created. These plans, trusted by doctors, are designed based on individual health parameters to promote healthier eating habits and better management of blood sugar levels. Furthermore, we understand that dealing with diabetes be overwhelming. Hence, we've integrated a community feature into our platform. Users can connect with others facing similar challenges, share experiences, and seek advice. It's important to having a support group at your fingertips, offering encouragement and understanding every step of the way. Sometimes, seeking help from a doctor is the best course of action.



International Journal for Research in Applied Science & Engineering Technology (IJRASET) ISSN: 2321-9653; IC Value: 45.98; SJ Impact Factor: 7.538 Volume 12 Issue V May 2024- Available at www.ijraset.com

In essence, our system isn't solely about numbers and data; it's about people. It's about leveraging technology to empowerindividuals to make informed decisions about their health. By providing personalized insights, diet plans, and a supportive community, we strive to make the journey with diabetes a littleeasier and a lot more manageable for everyone involved, to enhance the quality of life for all.

III. FUTURE SCOPE

As we strive to improve our diabetes prediction and management system, we're exploring new avenues to make it even more effective and user-friendly. These enhancements aim to empower individuals in managing their health and enhancing their wellbeing. Below, we outline key areas for future development

- 1) Enhanced Algorithmic Models: Explore the integration of advanced machine learning algorithms, such as ensemble methods or deep learning techniques, to further improve prediction accuracy and robustness.
- 2) *Mobile Application Development:* Develop a mobile application companion to the website, allowing users to access predictive services on-the-go and receive real-time alerts and reminders for health management tasks.
- *3) Integration of Wearable Devices:* Integrate wearabledevices, such as continuous glucose monitors or fitness trackers, to capture real-time health data and enhance the accuracy of predictive models.
- 4) *Expansion of Community Features:* Enhance the community platform by incorporating additional features such as discussion forums, expert-led webinars, and peer- to-peer mentoring programs to foster a supportive and informative environment for individuals managing diabetes.
- 5) Refinement of Upload Feature: Address the inconsistency in the upload PDF feature's functionality by implementingrobust data extraction techniques and improving compatibility with various file formats. Explore the integration of optical character recognition (OCR) technology and data preprocessing algorithms to enhance the system's ability to accurately extract and interpret values from uploaded documents. Additionally, conduct rigorous testing and validation procedures to identify and rectify any underlying issues causing intermittent failures in data extraction, ensuring seamless functionality and reliability of the upload feature.

IV. CONCLUSION

Diabetes is a serious condition that can lead to various health complications if not managed properly. Our aim is to empower individuals to detect and manage diabetes early, thus preserving their health and quality of life.

To achieve this, we've developed a reliable and accessible test that individuals can take to assess their risk of diabetes. Our research represents a significant advancement in the field of diabetes prediction and management. It integrates cutting-edgetechnology with personalized interventions and community engagement. Our intuitive web-based platform serves as a user- friendly interface for individuals to access accurate predictions about their diabetes risk. Through meticulous development and implementation, we have demonstrated the effectiveness of leveraging advanced algorithms to provide precise diabetes prognostications based on a comprehensive range of health parameters.

Furthermore, our commitment to proactive management is evident in the formulation of customized dietary regimens. These tailored plans are designed to support individuals in making healthy lifestyle choices and managing their diabetes effectively. In addition to personalized support, our online community fosters a sense of solidarity and support among individuals facing similar challenges with diabetes.

As we continue to refine and expand our system, guided by ethical principles and user feedback, our dedication to improving health outcomes and enhancing the quality of life for those affected by diabetes remains unwavering. Through ongoing innovation and collaboration, we strive to make a meaningful impact in the lives of individuals navigating the complexities of diabetes management.

REFERENCES

- [1] American Diabetes Association. (2020). Standards of medical care in diabetes—2020. Diabetes Care, 43(Supplement1), S1-S212.
- [2] Smith, J. A., & Johnson, R. B. (2018). Diabetes predictionand management: A comprehensive approach. Journal of HealthInformatics, 10(2), 123-135.
- [3] Brown, C., & Williams, S. (2019). Leveraging machine learning for diabetes prediction: A review of current methodologies. International Journal of Medical Informatics, 45(3), 210-225.
- [4] Patel, R., & Jones, M. (2020). Development and deployment of a web-based diabetes prediction system. Proceedings of the International Conference on Health Informatics, 78-85.
- [5] Khunti, K., Davies, M., Majeed, A., & Thorsted, B. L. (2019). Prevalence and management of diabetes in the UK 1998–2017: A systematic review. BMJ Open, 9(9), e025339.

© IJRASET: All Rights are Reserved | SJ Impact Factor 7.538 | ISRA Journal Impact Factor 7.894 |

International Journal for Research in Applied Science & Engineering Technology (IJRASET)



ISSN: 2321-9653; IC Value: 45.98; SJ Impact Factor: 7.538 Volume 12 Issue V May 2024- Available at www.ijraset.com

- [6] Lin, Y. K., Chen, L. K., & Chen, Y. M. (2020). The pidemiology of diabetes mellitus in the Asia-Pacific region: The epidemiology of diabetes mellitus in the Asia-Pacific region: The epidemic and the association with chronic diseases. Current Diabetes Reports, 20(6), 1-8.
- [7] Menke, A., Casagrande, S., Geiss, L., & Cowie, C. C. (2015). Prevalence of and trends in diabetes among adults in the United States, 1988–2012. JAMA, 314(10), 1021-1029.
- [8] NCD Risk Factor Collaboration. (2016). Worldwide trends in diabetes since 1980: A pooled analysis of 751 population- based studies with 4.4 million participants. The Lancet, 387(10027), 1513-1530.
- [9] Saeedi, P., Petersohn, I., Salpea, P., Malanda, B., Karuranga, S., Unwin, N., ... & Shaw, J. E. (2019). Global and regional diabetes prevalence estimates for 2019 and projections for 2030and 2045: Results from the International Diabetes Federation Diabetes Atlas, 9th edition. Diabetes Research and Clinical Practice, 157, 107843.











45.98



IMPACT FACTOR: 7.129







INTERNATIONAL JOURNAL FOR RESEARCH

IN APPLIED SCIENCE & ENGINEERING TECHNOLOGY

Call : 08813907089 🕓 (24*7 Support on Whatsapp)