

The Effect of Neural Network Models on Diagnosis of Bipolar Disorder

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Abstract – Now neural networks are used in several domains. One important application is the diagnosis process. This paper by using the neural networks can be taken a step in the diagnosis of bipolar disorder. Of the many ways such as interviews, patient records, relevant articles, books psychiatric. Etc. Parameters of this disorder have been identified. After identifying the parameters of bipolar disorder, the implementation of neural network models are discussed. MLP and RBF have models that used in this paper. At the end, the comparison between the results of the two models is done. And conclude the MLP model with the lower error (13.33%) than RBF model, can diagnosis the bipolar disorder.

Keywords – Bipolar disorder, ANN, Multilayer Perceptron, Radial Basis Function.

I. INTRODUCTION

Neural networks are very good at a wide variety of problems, most of which involve finding trends in large quantities of data [1]. To streamline the diagnostic process in daily routine and avoid misdiagnosis, artificial intelligence Methods (especially computer aided diagnosis and artificial neural networks) can be employed. These adaptive learning algorithms can handle diverse types of medical data and integrate them into categorized outputs [2]. One of the application of neural network is the diagnosis of medicine. This is in their proof-of-concept stage, with the acceptance of a neural network that will decide whether or not to grant a loan, something that has already been used more successfully than many humans [20]. Mental disorders as a broad category of diseases known [3]. It is a group of diagnoses in the Diagnostic and Statistical Manual of Mental Disorders (DSM IV TR) classification system where a disturbance in the person's mood is hypothesized to be the main underlying feature [7]. Depression Types are a mood disorder classification [6], bipolar disorder is the subset of depression []. It also has a few actions in the diagnosis of bipolar disorder using neural networked done that so far have not had satisfactory results in this context. Here are a few of them are mentioned: In [14], the author presented a neuro-fuzzy approach-based classification algorithm, which distinguishes patients with depression from controls by a neuro-fuzzy network with a weighted fuzzy membership function (NEWFM) using the two times domain and four frequencies domain features of HRV. With a reliable accuracy rate of 95%, in this work the six HRV features were extracted and used as NEWFM input features for depression classification. Which indicates a significant

association between depression and the autonomic nervous system. In [15], utilize ontologies and Bayesian networks techniques to build the inference model for inferring the possibility of depression. The author proposed an ontology model to build the terminology of depression and utilize the Bayesian networks to infer the probability of depression. In addition, the paper also proposes an agent-based platform and addresses the implementation issue. The result shows that it can be well-inferring in the depression diagnosis. In [16], ten different types of classification algorithms are applied to depression diagnosis and their performance is compared, through a set of experiments on SMRI brain scans. In the experiments, a procedure is developed to measure the performance of these algorithms and an evaluation method is employed to evaluate and compare the performance of the classifiers. In [17], a machine learning method is proposed for automatically finding psychiatric diagnostic rules. It is proposed that a genetic algorithm (GA) system can find symbolic, easily readable rules that could be used by psychiatric clinicians. Diagnosis of major depressive disorder is considered. A sample of 320 subjects with symptom information and pre-assigned diagnosis is used to train a GA model and two other statistical models, discriminant analysis and logistic regression. Each model is able correctly to classify more than 91% of cases. The GA model performs best of the three methods and yields readable, non-numeric rules. In [18], presents psyche system, a personal, cost-effective, multi-parametric monitoring system based on textile platforms and portable sensing devices for the long term and short term acquisition of data from selected class of patients affected by mood disorders. The acquired data will be processed and analysed in the established platform that takes into account the Electronic Health Records (EHR) of the patient, a personalized data referee system, as well as medical analysis in order to verify the diagnosis and help in prognosis of the illness.

In this paper trying has been considering a number of parameters for diagnosis of bipolar disorder and the data already prepared, paid to design a neural network by using the MLP and RBF models, that are of the most widely used models. Of the parameters that using in this paper, it can be noted to "Depressed mood", "Disruption of appetite", "Feeling of guilty", "Lake of concentration", "Lake of decision-making power", "Decreasing of libido". Neural network training is designed with different percentages. The error of training different percentages is achieved for comparison with together. For training and test network uses the patient's record. And show that each

each models (MLP & RBF), the comparison of these errors is discussed, then selecting the optimization model for diagnosis bipolar disorder. That, if the error of MLP model is lowest of the error of RBF model can be select the MLP model for training. Else if the error of MLP model is bigger than RBF model, selecting the RBF model for diagnose.

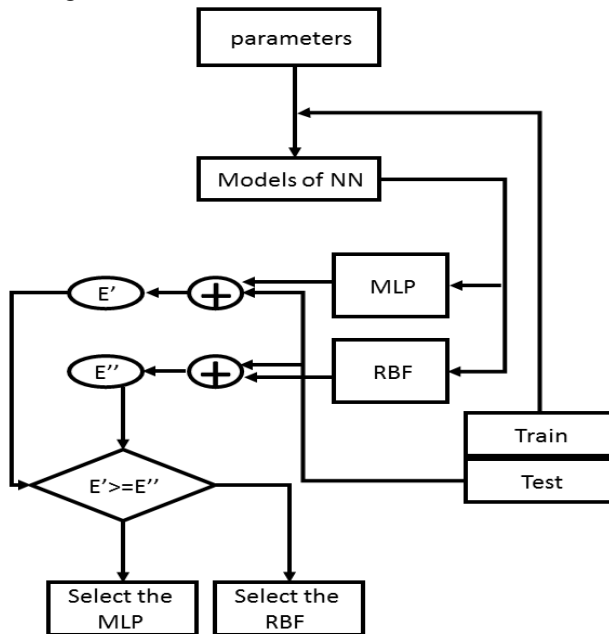


Fig.3. View of the diagram

V. MAIN RESULTS

Due to the structure of each of the models used in this article (MLP& RBF) and the parameters required for the diagnosis of bipolar disorder, we have discussed the implementation of neural network. Implementation of neural network models in the MATLAB have been done.

We have training each of the models with different percentages of data. As can be seen from the results, while 70 percent of data used for training the network we will be faced with fewer errors.

5.1. Results MLP

Define This model uses 10 input neurons, 5 neurons in the middle and four output neurons for the four classes defined (depression, bipolar □, depression, bipolar □□, secondary depression and healthy), has been implemented. Also, the data that are used to train the network, are determined by the user. The data selected for training the network with respect to the user input, the command Randperm are determined. In "Fig. 4" the percentage error with respect to the training of the network stated. As can be seen in 70% of training percentage, happen the minimum error for MLP model. And for 40% training percentage the worst error appears. Regression graph of MLP model in the "Fig. 5" is visible. A regression graph or chart to determine the purpose of the simulation is to answer the y-axis and x A simulation solution of the target. Slope of the regression say. The mean square error compared to the same period as the Epoch shows. Training

Chart Red Green Blue Test and Evaluation and Early stopping point is called the point shown by the amount of the assessment error is minimized.

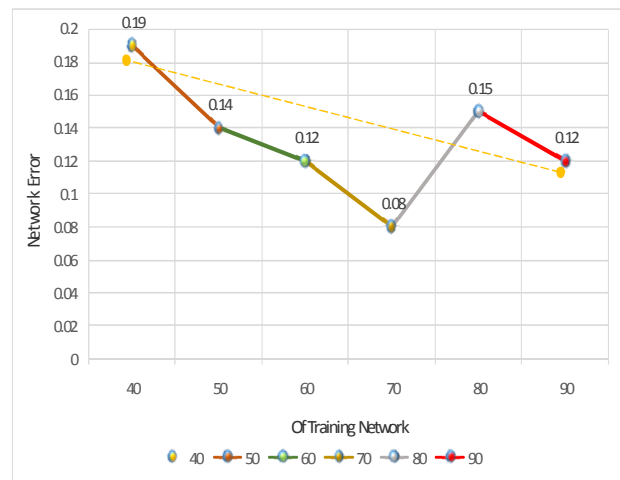


Fig.4. Network error of MLP model

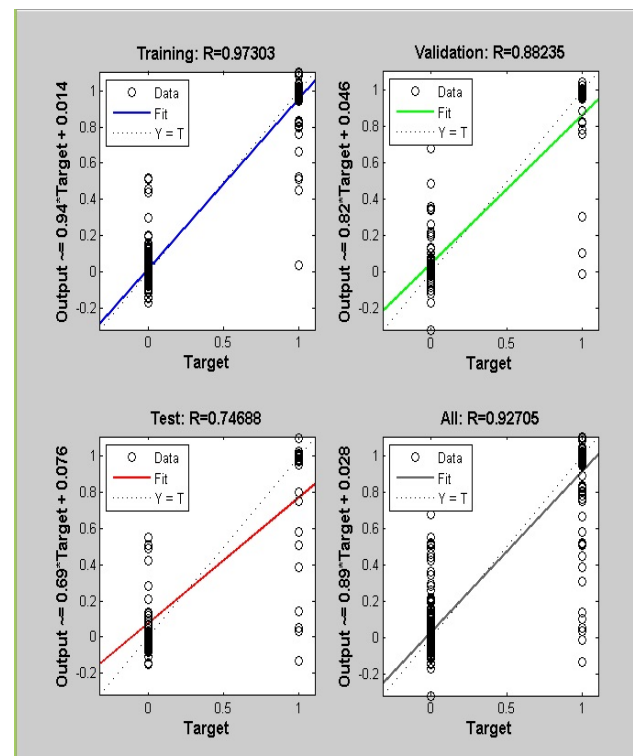


Fig.5. Regression graph of MLP model

4.2. Results by using RBF model

This model uses the coefficient of expansion (spread) the first one, add the number of neurons to display the target amount equal to 25 times the mean square error is zero, default values are the model has been implemented, as well, the percentage of data that Learning networks are used, are determined by the user. The data selected for training the network with respect to the user input, the command Randperm are determined. Regression graph of RBF model in the "Fig. 6" is visible. A regression graph or chart to determine the purpose of the simulation is to answer the y-axis and x A simulation solution of the

target. Slope of the regression say. The mean square error compared to the same period as the Epoch shows. Training Chart Red Green Blue Test and Evaluation and Early stopping point is called the point shown by the amount of the assessment error is minimized. In "Fig.7", the percentage error with respect to the training of the network stated. As can be seen in 70% of training percentage, happen the minimum error for RBF model. And for 50% training percentage the worst error appears.

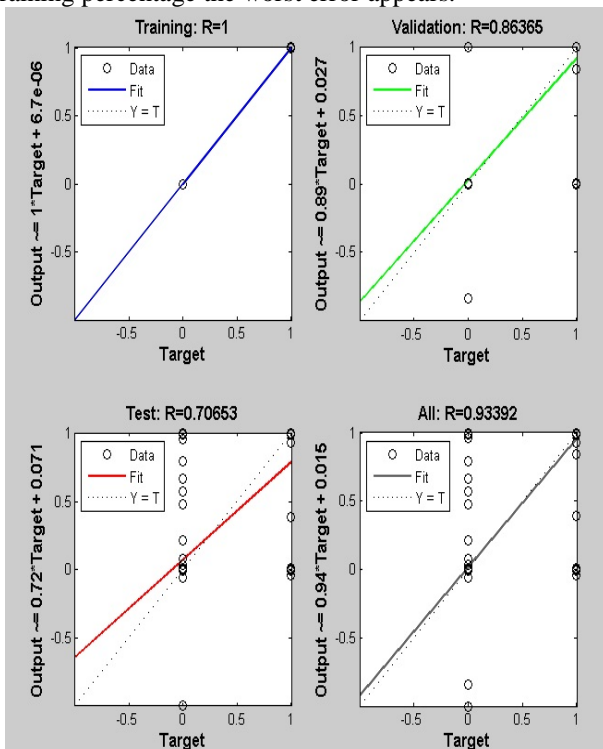


Fig.6. Regression graph of RBF model

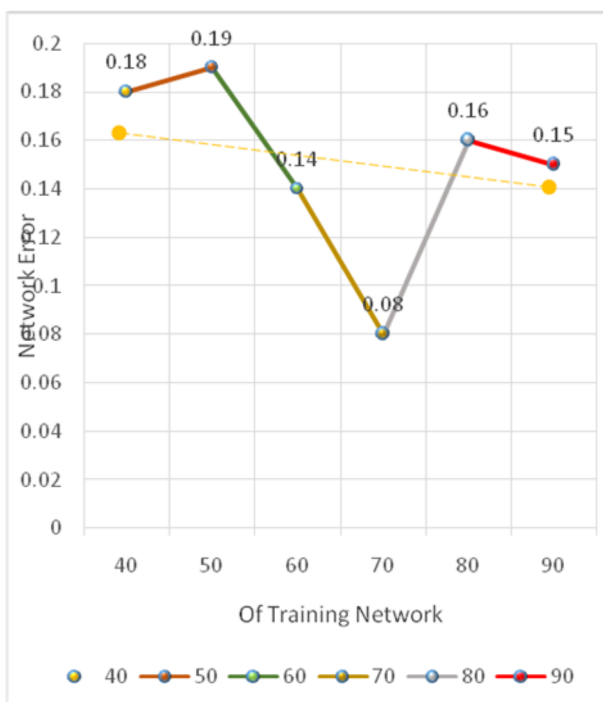


Fig.7. Network error of RBF model

4.3. Compare results

As a comparison between models can be occurred out errors in the model used. Here, we use this method for comparison between MLP & RBF models. "Table 1" shows a comparison between the models, and can be seen that, with using the MLP for training have the better detection for bipolar disorder. MLP model can diagnose with 13.3% error, while the RBF model has the 15% error in this disorder.

Table 1: compare errors of models

Error Network	Model
13.3%	MLP
15%	RBF

VI. CONCLUSION

This article has attempted to use the neural network models for diagnosis of bipolar disorder. The diagnosis is one of important applications of these networks have been investigated. After discovering the important parameters identified in this disorder, we have discussed the application of neural network models. Then compare the two models of neural networks to implement this disorders discussed. And conclude with 12 parameters of bipolar disorder and using the MLP model have the better diagnosis and error of this model is 13.3%. In fact, the goal of this article is a small step toward recognition powerful of neural network in diagnosis of metal illness.

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