

Abstract Submission No.: A-1028

Machine learning-based utilization of lipid panels improves the predictability of kidney dysfunction

Soie Kwon¹, Donghwan Yoon², Sehoon Park², Yong Chul Kim², Dong Ki Kim², Kook-Hwan Oh², Kwon Wook Joo², Yon Su Kim², Seung Seok Han²

¹Department of Internal Medicine-Nephrology, Chung-Ang University Hospital, Korea, Republic of

²Department of Internal Medicine-Nephrology, Seoul National University Hospital, Korea, Republic of

Objectives : Dyslipidemia poses a risk for atherosclerotic cardiovascular disease, but its association with kidney dysfunction varies depending on the patient or kidney status. Herein, we used a machine learning model to select lipid panels, aiming to enhance the prediction accuracy of kidney dysfunction.

Methods : 9,403 patients who examined lipid panels, including low-density lipoprotein subfraction scores, were enrolled. The primary outcome was kidney outcome, defined as either a decrease in kidney function by half or the development of end-stage kidney disease. The secondary outcome was the composite outcome, defined as the occurrence of either the kidney outcome or death from any cause. Five machine learning models were utilized to predict outcomes at 1- and 3-year intervals. Feature ranking was used to identify the factors that highly contributed to the model performance.

Results : At 3 years, 117 (1.2%) patients experienced a kidney outcome, while 691 (7.4%) experienced a composite outcome. All models utilizing all features showed high predictive power, achieving an area under the receiver operating characteristics curve exceeding 0.85. When selectively using lipid panels, the multi-layer perceptron and light gradient boosting models demonstrated higher performance in predicting kidney outcome than other models (Table 1). Feature ranking analysis revealed that apolipoprotein A1 and B, as well as low-density lipoprotein cholesterol, were significant contributors to model performance. Grouped analysis of lipid parameters showed their substantial contribution to the 3-year prediction model (Figure 1).

Conclusions : The present machine learning models incorporating lipid panels show success in predicting the risk of kidney dysfunction. This advancement will assist clinicians in precisely identifying patients at risk of kidney dysfunction through the utilization of lipid panels.

ML_Lipid_Table1.png

| Models | Outcomes | Kidney outcome | | | | Composite outcome | | | |
|---------------------|----------|----------------|-------|---------|-------|-------------------|-------|---------|-------|
| | | Model 1 | | Model 2 | | Model 1 | | Model 2 | |
| | | AUROC | AUPRC | AUROC | AUPRC | AUROC | AUPRC | AUROC | AUPRC |
| Logistic regression | 1 year | 0.927 | 0.399 | 0.781 | 0.071 | 0.878 | 0.235 | 0.681 | 0.094 |
| | 2 year | 0.919 | 0.421 | 0.894 | 0.219 | 0.853 | 0.360 | 0.709 | 0.212 |
| | 3 year | 0.889 | 0.358 | 0.787 | 0.252 | 0.854 | 0.423 | 0.701 | 0.251 |
| LGBM | 1 year | 0.828 | 0.149 | 0.924 | 0.184 | 0.877 | 0.258 | 0.704 | 0.125 |
| | 2 year | 0.887 | 0.248 | 0.886 | 0.272 | 0.849 | 0.384 | 0.718 | 0.183 |
| | 3 year | 0.885 | 0.358 | 0.850 | 0.280 | 0.860 | 0.511 | 0.729 | 0.285 |
| Random Forest | 1 year | 0.981 | 0.373 | 0.877 | 0.217 | 0.869 | 0.209 | 0.682 | 0.098 |
| | 2 year | 0.967 | 0.390 | 0.868 | 0.327 | 0.863 | 0.393 | 0.733 | 0.222 |
| | 3 year | 0.897 | 0.302 | 0.847 | 0.290 | 0.859 | 0.449 | 0.733 | 0.292 |
| RNN | 1 year | 0.961 | 0.347 | 0.841 | 0.082 | 0.867 | 0.289 | 0.718 | 0.117 |
| | 2 year | 0.946 | 0.377 | 0.898 | 0.241 | 0.858 | 0.381 | 0.756 | 0.215 |
| | 3 year | 0.881 | 0.277 | 0.861 | 0.276 | 0.865 | 0.455 | 0.743 | 0.286 |
| MLP | 1 year | 0.971 | 0.441 | 0.936 | 0.288 | 0.887 | 0.308 | 0.734 | 0.141 |
| | 2 year | 0.967 | 0.381 | 0.902 | 0.262 | 0.867 | 0.385 | 0.760 | 0.204 |
| | 3 year | 0.913 | 0.379 | 0.874 | 0.345 | 0.867 | 0.485 | 0.755 | 0.290 |

Model 1: all the features are used, Model 2: serum creatinine and lipid panels are used.
AUROC, area under the receiver operating characteristics curve; AUPRC, area under the precision-recall curve; LGBM, light gradient boosting; RNN, recurrent neural network; MLP, multi-layer perceptron.

ML_Lipid_Table1.png

