

Review of: "Implementing Machine Learning to predict the 10-year risk of Cardiovascular Disease"

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Potential competing interests: No potential competing interests to declare.

While the research project described holds promise in improving CVD risk prediction through machine learning, there are several potential limitations and challenges to consider:

1. A thorough proofreading is suggested.
2. The effectiveness of the ML model heavily depends on the quality and representativeness of the training data. If the data used is not diverse or does not adequately represent the target population, the model's performance may be limited, and its predictions may not generalize well.
3. Handling medical data, especially patient health records, raises significant privacy and ethical concerns. Ensuring the ethical and legal handling of sensitive patient information is critical.
4. Many ML models, particularly complex ones like neural networks, lack interpretability. In a medical context, understanding why a certain prediction was made is essential for healthcare professionals and patients.
5. The abstract mentions superior validation performance compared to traditional models, but it's important to assess how well the ML model generalizes to diverse patient populations and healthcare settings.
6. The choice of features (predictor variables) and feature engineering techniques can significantly impact the model's performance. The abstract does not delve into the details of feature selection, which is a critical aspect of model development.
7. Integrating the ML model into clinical practice and ensuring that healthcare professionals can effectively use it for risk assessment and decision-making is a challenge. It requires consideration of workflow integration and user interface design.
8. Cardiovascular risk is often influenced by changes in health over time. Incorporating longitudinal data and accounting for time dependencies may enhance the model's accuracy but can also add complexity.
9. The abstract doesn't mention methods for explaining the ML model's predictions, which is crucial for building trust among healthcare providers and patients.
10. Implementing ML models in clinical settings may require significant computational resources and expertise, which can be a limitation for smaller healthcare facilities.
11. Adhering to healthcare regulations (e.g., HIPAA in the United States) is essential when dealing with patient data. The research should address how regulatory compliance is ensured.
12. It's important to validate the model's performance on external datasets or in real-world clinical settings to assess its true utility and generalization.

13. The abstract briefly mentions motivating high-risk individuals to change their behavior's, but engaging patients in preventive medicine is a complex challenge that may extend beyond the model's capabilities.
14. CVD risk factors and outcomes can vary among different ethnic and cultural groups. The model's performance should be evaluated across diverse populations.