

Regeneron WESEF 2023 Finalist



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Deep Neural Network to Predict Progression from Mild to Severe Acute Kidney Injury

Acute Kidney Injury (AKI) is a major clinical complication with an incidence of more than 50% among critical care patients and an observed in-hospital mortality as high as 62%. The early identification of patients at risk of progressing from AKI Stage 1 to AKI Stage 2/3 is vital for allowing clinical intervention prior to the onset of short-term and long-term complications. Few methods have been developed to predict AKI progression or recovery trends, with available methods only predicting recovery from or progression to chronic kidney disease (CKD) or end-stage renal disease (ESRD). The objective of this study was to develop and validate machine learning (ML) prediction models for the early identification of AKI progression (Stage 2/3) or recovery (Stage 0/1) following a Stage 1 onset. A deep learning neural network (DLNN) model was constructed to predict patient progression or recovery. Established models were evaluated by cross-validation, Receiver Operating Characteristics (ROC), Precision-Recall Curves (PRC), Sensitivity, and Specificity. Blood urea nitrogen (BUN) and glomerular filtration rate (GFR) were the most important features in AKI progression or recovery prediction as identified by Area Under the Curve (AUC) metric. The model performed at an AU-ROC of 0.87 and at two decision thresholds had a Sensitivity of 82.5% and Specificity 83.7% respectively. These findings indicate that electronic health record data can be used to predict impending AKI progression or recovery. Furthermore, the real-time use of this model would allow early intervention for those at high risk of moderate-to-severe AKI.