

EnuwaJGX: Machine Learning Gene Prediction Software Application Model - An Innovative Method to Precision Medicine and Predictive Analysis of Visualising Mutated Genes Associated to Neurological Phenotype of Diseases

Daniel F. O. Onah^a

*Department of Information Studies, University College London, London, U.K.
d.onah@ucl.ac.uk*

Keywords: Gene, Disease, Phenotype, Prediction, Mathematical Model, Machine Learning, Decision Tree, Search Engine, Visualization.

Abstract: This research investigates an aspect of precision medicine related to genes and their association with diseases. Precision medicine is a growing area in medical science research. By definition precision medicine is an approach that allows the selection of treatments that are most likely to help treat patients based on the genetic understanding of their diseases. This approach proposes the customization of a medical model for healthcare, treatment, medical decision making about genetic diseases and develop models that are tailored to individual patient. There are readily available datasets provided by Genomics England related to diseases and the genes that cause these diseases. This research presents a predictive technique that scores the possibilities of a mutated gene causing a neurological phenotype. There are over a thousand genes associated with 26 subtypes of neurological diseases as defined by Genomics England capturing genetic variation, gene structure and co-expression network. The gene prediction was performed with search algorithms and methods that sequentially looped through the database for true match. Linear search algorithm was applied along index search method to perform the prediction matching of gene(s) that are associated to the disease(s). The prediction algorithm was formulated based on a Mathematical/probabilistic concept that was used to design the model for processing the data-set ready for gene prediction. It became apparent that over half a million (> 500,000) genes were predicted in this study that were associated to the neurological phenotype of the diseases in this research work.

1 INTRODUCTION


This study covers an innovative method to precision medicine and predictive analysis of visualizing mutated genes that are associated to neurological phenotype of diseases. A gene prediction study has recently been explored in medical science research for conducting gene analysis and how mutated genes are associated to diseases.

The study applied a decision tree approach of machine learning and integrated this into the initial pre-processing technique to generate each of the diseases and their associated genes. This study's hypothesis is to predict that genes with higher frequency probabilities of mutation in healthy individuals will be more likely to cause the diseases. Previous studies revealed that the ageing of the immune system of healthy adult and the environment could be attributed to causation

of neurodegenerative diseases (Lagouge and Larsson, 2013; Sanchez-Guajardo et al., 2013).

This study covers primarily the area of Natural Language Processing specifically in text segmentation and processing. A broader method was developed as a testable model to automatically analyse datasets extracted from Genome England and other medical data related to genes and diseases. The model was used to explore the initial process of applying NLP techniques and Machine learning approaches such as text extraction, decision tree algorithm and probability in precision medicine for conducting gene search predictions. There are very few medical software applications developed to perform this gene search and prediction. This proposed research extension has led to the development of a gene application system.

Gene prediction and expression has not been well explored or done this way in medical research. This

^a  <https://orcid.org/0000-0001-6192-6702>

proposed new way of presenting gene prediction deficiencies or mutations using machine learning supervised and decision tree techniques that lead to specific diseases is useful in making visualizing and searching for these genes much easier. Applying Machine Learning (ML) and a Natural Language Processing (NLP) research approach is a novel ground in modern medical science research.

EnuwaJGX: Is a machine learning gene prediction software web application model. It is a novel web application model used for displaying search results from a static data preprocessed for the gene predictive analysis. The datasets stored in the web-database captures innovative method to precision medicine and also the visualisation of mutated genes that are associated to neurological phenotype of diseases. There are several open source datasets that are related to neurological phenotype of diseases and their associated mutated genes that are available and provided by Genomics England ¹.

1.1 Research Hypothesis

- If a predicted gene has a probability greater than or equal to the specified threshold, then the gene is associated with the selected disease or diseases.
- If a predicted gene has a probability, less than the specified threshold, then the gene is not associated with the selected disease or diseases.

2 RELATED RESEARCH

Gene expression has been done with gene-specific features capturing genetic variation, gene structure and tissue-specific expression and co-expression. Previously, genes were randomly re-sampled with no known disease association. Other studies have looked at gene-phenotype predictions and generating genes of distinct transcripts (Botía et al., 2018). One of the main challenges of gene predictions is in finding an optimal approach of combining the sources of information extrinsic and intrinsic that could be associated to gene mutation that are related to the genome of interest (Bruna et al., 2020).

A study by Liu et al. (2018a) shows that thorough approach in incorporating adequate evidence from ‘transcriptomes, machine learning tools, homology to known sequences’ has proven challenging. Research revealed that repetitive regions of gene sequences are commonly a major issue when removed prior to gene prediction. This sometimes led to multi-copy genes

being misidentified as repeats in the analysis and excluded from the final result predictions (Chen et al., 2020, 2019).

A related research study identified one of the causative factors of gene mutation is as the result of alteration of the ‘*immunosenescence*’ defence mechanism caused by ageing (Chong et al., 2003).

2.1 Data Representativeness

According to Sikibi (2022), the first step of data preparations is the collection, exploration and discovery of all the data from the potential sources and identify patterns, relationships, annotation, missing data features, etc. The data cleaning process helps to identify errors within the datasets which could be corrected in the process of restructuring and formatting the datasets. According to de Araujo et al. (2022), data cleaning includes removing duplicated data, unwanted data, making unstructured data to structured format and filtering-out any personal data that would not be relevant for the analysis. This study applied a systematic data preprocessing and representativeness approach. Mathematical and probability algorithms were constructed using Python programming language and algorithm models to perform this data representativeness and preprocessing.

3 RESEARCH METHODS

In this section, the research model is described. The model in this study is to illustrate the hypothesis and support the implementation of the system to answer the study’s research questions.

Gene prediction is one of the most fascinating problem to solve in computational biology (Flicek, 2007). In the study, supervised Machine learning technique was applied to generate disease-gene specific classifiers. Decision tree classifiers were applied at the initial data-set collection process. A supervised machine learning (ML) approach was used to create a model of gene phenotype revealing the associations of the generated classifiers that could be classified and distinguished between genes that have relative association with other neurological phenotype and those that do not. Genes that show this relationship to specific neurological phenotype are generally linked to the causation of the disease than those with no direct association to the neurological phenotype (Botía et al., 2018).

¹<https://www.genomicsengland.co.uk/>

3.1 Supervised Learning

Several machine learning applications require a model in order to make accurate predictions on test data samples that are distributionally different from training dataset. In order to enable web based electronic data prediction, there is a need for automated methods of data analysis. Machine learning provides these developing methods that can automatically detect patterns in data and then use the uncovered patterns to perform data prediction (Murphy, 2012). This research applied a probabilistic approach of supervised learning to data processing, analyses and prediction. Several supervised machine learning methods have been widely used to predict disease genes (Asif et al., 2018). Gene expression data required high-capacity of machine learning methods that are capable of identifying disease association (McDermott et al., 2019) and developing models to perform related gene prediction to identify disease candidate bio-markers in gene classification (Lyu and Haque, 2018).

3.2 Mathematical Model & Probability Algorithm

In order to formulate the domain, a special mathematical model was developed for the data processing that considered the limitations of the datasets and original structures. The model introduces the basic terms, specific features from the processed data. This study proposes a probabilistic model for data pre-processing, normalisation and transformation (Lai et al., 2004) that enabled the identification of genes that are closely associated to diseases (see equation 1).

$$Prob_{pred} = \sum_i^n \frac{count(TP_{cl})}{count(TP_{cl}) + count(FP_{cl})} \quad (1)$$

where

- **TP** = True positive
- **FP** = False positive
- **cl** = Decision tree classifier

3.3 Hypothesis Testing

Hypothesis. In order to decide the precision of the gene prediction, we applied the **if single-selection statement** approach within the algorithm. This approach allows us to choose among the alternative course of actions that would successfully meet the condition of our gene and disease predictive association. In this study, the threshold decided was 0.99

(99% confident interval). The equation applied within the algorithm predicts the gene(s) that are associated to the disease(s) if the threshold condition is **true** and otherwise non-association to the disease(s) (as seen in 2 and 3).

$$Disease_{pred} = Prob_{pred} \geq Prob_{Threshold} \quad (2)$$

$$Non - Disease_{pred} = Prob_{pred} < Prob_{Threshold} \quad (3)$$

The threshold mark when varies may affect the precision accuracy of the gene prediction. In order to reach a more accurate prediction, the threshold mark decided should be closer to a perfect probability. In this case, we considered 0.99 to 1 (99% - 100%) as the precision probability for a perfect gene prediction in this study.

Precision. In this study, precision within the gene prediction is very important for the accuracy of the final predictions. Precision was considered based on the number of true positive over or divided by the total of true positive and false positive (equation 4).

$$Precision = \sum \left(\frac{TP}{TP + FP} \right) \quad (4)$$

TP: This is the true positive Boolean value in the dataset that represent the frequency count of the true variable response from the decision tree classifiers.

FP: This is the false positive Boolean value in the dataset that does not include the true response but false within the decision tree classifiers of the dataset.

In processing the data, the first two columns of the dataset were excluded from the pre-processing stage as these contains the serial numbers and the gene columns. The equation 5 below shows how this was avoided.

$$Precise_{rn} = \sum (Rn) - 2 \quad (5)$$

Rn is the number of classifier in a data row in the dataset.

The above equation was introduced to calculate the precise classifier in the dataset row by avoiding the first two columns. This is then fed into the next equation 6 for the accurate pre-processing of the gene prediction within the dataset.

$$Precision_{prob} = \sum \frac{TP}{Precise_{rn}} \quad (6)$$

This equation calculates and processes the data of interest without the first two columns and rows within the dataset. We are only interested in the 200

responses of the decision tree classifier. We do not need to process these first two columns because they contain the serial number in the first column and the genes in the second column.

3.4 Gene Annotation

Each gene is annotated separately within the associated disease files. This individual gene annotation makes the search for mutated genes and its association to be possible within the disease database. This process enable the serialization of the gene prediction data and the precision accuracy of the output prediction. For example, in Table 1, **UQCRC1** is identified as a mutated gene likely to cause neurological phenotype of **Allinone** disease. Suppose, there are no gene annotation, then the precision of the gene result prediction could have been hampered in this study. The annotation of mutated gene association led to probabilistic prediction of genes and association or causation leading to a disease. This process of gene annotation is performed in sequential order during each data processing stages. During the gene search, the program retrieve predicted gene data sequentially from the data-set by starting from the beginning of the file and reading all the data consecutively until the desired gene(s) information and association is found. The action applied is to identify the true gene value in the data-set that are associated to the disease(s) and not taking into consideration the false value.

3.5 Linear Search Method

This research applied linear search methods for the prediction of the processed data-set. The linear search algorithm searches each gene in the database sequentially. If the search key is associated to a gene then there will be a true prediction. However, if the search key does not match any gene after reaching the end of the data-set stored in the database then this will output a statement that the search gene is not found. Therefore, the search algorithm determine that the gene key entered does not match any gene sequentially and in this case returns no result. In addition, if the search gene is found in the database, the algorithm tests and compares all genes associated with the search gene until it finds one or all that matches the search and returns that gene(s) and the associated disease(s).

3.6 Index Search Method

Another search method that was used in the early stage of the search engine development was the index search method. This method was considered as

well because of it's similarity with the linear search method. The algorithm receives a gene to search for from the database and the search key. The algorithm loops through the genes in the database and compares each with the search gene key. If the values are equal or true is return, then the algorithm returns the index of the search gene. However, if there are duplicate genes in the database, the search returns the index of the first gene in the database sequentially that matches the search key. But, if the search ends without any true match return, then the algorithm will output no gene found or processed in the database.

3.7 Raw Dataset

The dataset for this research are in an unstructured state that need to be processed. These are made up of 26 Neurological Phenotype of diseases. These are made up of combination of Boolean values of *True* and *False* distributed in the rows and columns of the datasets. The rows are made up of over **>17,000** genes and columns hold **200** decision tree classifiers for each disease file as shown in the sample Figure 1.

```

"UQCRC1", "TSPN0", "TSPN1", "TSPN2", "TSPN3", "TSPN4", "TSPN5", "TSPN6", "TSPN7", "TSPN8", "TSPN9", "TSPN10", "TSPN11", "TSPN12", "TSPN13", "TSPN14", "TSPN15", "TSPN16", "TSPN17", "TSPN18", "TSPN19", "TSPN20", "TSPN21", "TSPN22", "TSPN23", "TSPN24", "TSPN25", "TSPN26", "TSPN27", "TSPN28", "TSPN29", "TSPN30", "TSPN31", "TSPN32", "TSPN33", "TSPN34", "TSPN35", "TSPN36", "TSPN37", "TSPN38", "TSPN39", "TSPN40", "TSPN41", "TSPN42", "TSPN43", "TSPN44", "TSPN45", "TSPN46", "TSPN47", "TSPN48", "TSPN49", "TSPN50", "TSPN51", "TSPN52", "TSPN53", "TSPN54", "TSPN55", "TSPN56", "TSPN57", "TSPN58", "TSPN59", "TSPN60", "TSPN61", "TSPN62", "TSPN63", "TSPN64", "TSPN65", "TSPN66", "TSPN67", "TSPN68", "TSPN69", "TSPN70", "TSPN71", "TSPN72", "TSPN73", "TSPN74", "TSPN75", "TSPN76", "TSPN77", "TSPN78", "TSPN79", "TSPN80", "TSPN81", "TSPN82", "TSPN83", "TSPN84", "TSPN85", "TSPN86", "TSPN87", "TSPN88", "TSPN89", "TSPN90", "TSPN91", "TSPN92", "TSPN93", "TSPN94", "TSPN95", "TSPN96", "TSPN97", "TSPN98", "TSPN99", "TSPN100", "TSPN101", "TSPN102", "TSPN103", "TSPN104", "TSPN105", "TSPN106", "TSPN107", "TSPN108", "TSPN109", "TSPN110", "TSPN111", "TSPN112", "TSPN113", "TSPN114", "TSPN115", "TSPN116", "TSPN117", "TSPN118", "TSPN119", "TSPN120", "TSPN121", "TSPN122", "TSPN123", "TSPN124", "TSPN125", "TSPN126", "TSPN127", "TSPN128", "TSPN129", "TSPN130", "TSPN131", "TSPN132", "TSPN133", "TSPN134", "TSPN135", "TSPN136", "TSPN137", "TSPN138", "TSPN139", "TSPN140", "TSPN141", "TSPN142", "TSPN143", "TSPN144", "TSPN145", "TSPN146", "TSPN147", "TSPN148", "TSPN149", "TSPN150", "TSPN151", "TSPN152", "TSPN153", "TSPN154", "TSPN155", "TSPN156", "TSPN157", "TSPN158", "TSPN159", "TSPN160", "TSPN161", "TSPN162", "TSPN163", "TSPN164", "TSPN165", "TSPN166", "TSPN167", "TSPN168", "TSPN169", "TSPN170", "TSPN171", "TSPN172", "TSPN173", "TSPN174", "TSPN175", "TSPN176", "TSPN177", "TSPN178", "TSPN179", "TSPN180", "TSPN181", "TSPN182", "TSPN183", "TSPN184", "TSPN185", "TSPN186", "TSPN187", "TSPN188", "TSPN189", "TSPN190", "TSPN191", "TSPN192", "TSPN193", "TSPN194", "TSPN195", "TSPN196", "TSPN197", "TSPN198", "TSPN199", "TSPN200"

```

Figure 1: Raw dataset with decision tree Boolean classifiers.

3.8 Prediction

In order to make an accurate prediction in this study, a threshold of 0.99 (99%) was decided so as to closely relate to a perfect probability to perform the final gene prediction. Here, we use the calculation of the precision probability to perform the prediction as illustrated in the above (equation 4).

Similarity Prediction. In this study, similarity was performed between disease predictions. The result from gene predictions associated to specific selected diseases was used as the control sample to perform search prediction of the other diseases. The equation 7 below allows the selection of the first 10 genes that passed the threshold in ascending order. Within these 10 genes, selection of those that met perfect probability of the value 1 (one) are used to search the database for whether they are associated to the other remaining

diseases in the database. Within the study, selection of two diseases were used as the control or gold standard experiment to conduct the similarity search as seen in Table 1 and Table 2.

$$Precision_{prob} \geq Threshold \quad (7)$$

Where:

Threshold = 0.99

The mathematical model and algorithm was translated into a simple Python programming construct as illustrated in screenshot image in Figure 2 for the pre-processing and prediction of the results.

```
import csv
csvfile= open("Parkinson_Disease_and_Complex_Parkinsonism_(PD).csv", 'r').readlines()
reader = csv.reader(csvfile, delimiter=',')
for row in reader:
    'TRUE' in row
    #if row>0:
    if row[1] == 'gene':
        probT = float(row.count("TRUE"))/float(len(row))
        Total_counts = (len(row) - 2)
        genes=row[1]
        Gene, Prediction = row[1], float(row.count("TRUE")) / Total_counts
        print (Gene, Prediction)
```

Figure 2: Mathematical model and algorithm transformed into python construct for preprocessing the data and gene prediction.

4 RESEARCH PIPELINE

Figure 3 illustrates the various sequential steps introduced in the data processing pipeline for this study. In order to process the data for accurate supervised gene predictions, the steps within the pipeline must be sequentially followed, that is from one preceding step to the other.

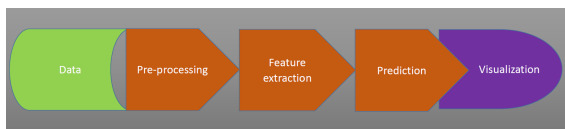


Figure 3: Machine Learning data processing pipeline.

Data Collection: The datasets for this study are made up of 26 unstructured neurological phenotype disease data with 200 decision tree classifiers that were used to classify the response information contained in it. These data were extracted from Genome England database. Some of the datasets are currently available as open source.

Figure 4 is the flowchart that illustrates the stages involved in the data processing and prediction within this research study.

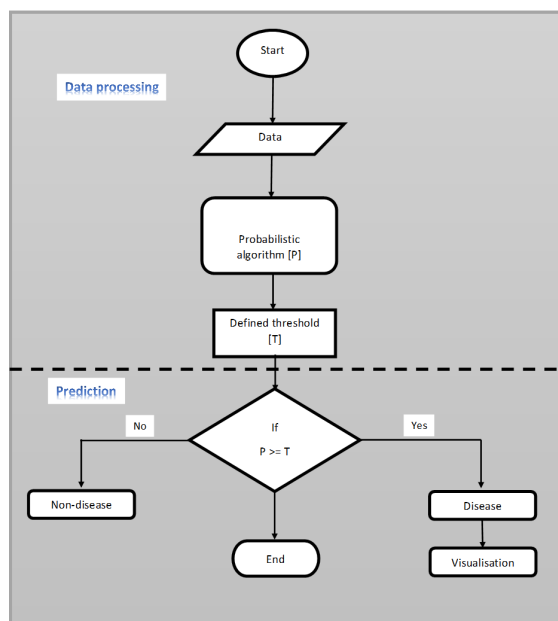


Figure 4: Flowchart algorithm illustrating the data processing method and predictions.

Preparation and Preprocessing: Although, the dataset that was extracted were in an unstructured state, a probabilistic algorithm was designed to perform the initial preprocessing and cleaning of the data for easy extraction of relevant genes for the predictions.

Figure 5 presents the predicted result from the pre-processed raw dataset. There are over half-a-million (> 500,000) genes predicted in this study. These results are stored in the *PostgreSQL* database for the Machine Learning gene prediction web-based application designed using *Python – Django* application programming interface (API) framework model as presented in this study.

Feature Extraction: The next process was to perform feature extraction as related to genes and diseases. Feature extraction was the second to the last processes before the gene predictive analysis and data visualisation was done. In this step, genes of interest were selected from the pre-processed data that met the condition of the stringency threshold specified in the study.

Prediction: This allowed the extraction of common genes in association with multiple diseases that could help in the visualisation of the results.

Visualisation: This was the final process of the pipeline, which then led to the research results, analysis and visualisation of the predictions. The predicted results can be downloaded as comma-separated values(CSV) and also as images.

ITSPAN6	0.10
TNPO	0.33
SCYL3	0.48
C1orf112	0.69
FGR	0.49
CFH	0.89
FUCA2	0.68
GCLC	0.87
NFYA	0.12
STPG1	0.13
NIPAL3	0.32
ENPP4	0.34
SENA3F	0.75
CFTR	0.26
ANKIB1	0.85
CYP51A1	0.87
RAD52	0.59
BAD	0.26
LAP3	0.55
HS3ST1	0.23
AOC1	0.12
NNT16	0.02
HECW1	0.97
MAD1L1	0.63
LASP1	0.78
SNX11	0.27
TMEM176A	0.46
MOPR	0.30
KLHL13	0.85
CYP26B1	0.22
ICAI	0.76
DBNDD1	0.06
CASP10	0.22
CFLAR	0.89
TFPI	0.76
NDUFA7	0.29
RBM5	0.83
MTRR7	0.52
SLC7A2	0.85
ARFS	0.36
SARM1	0.35
POLDIP2	0.86
PLXND1	0.83
AK2	0.56
CD38	0.41
FKBP4	0.32
RBN6	0.87
CAMKK1	0.72
RECQL	0.99
VPS58	0.68
HSPB6	0.18
ANKRD32	0.43

Figure 5: A sample of a preprocessed dataset gene prediction.

4.1 Control Disease for Experiment

Two neurological disease samples were selected from 26 diseases for this experiment as indicated in Table 1 and Table 2.

Table 1: Allinone disease as gold-standard control experiment I.

Allinone disease	
Gene	Prediction
UQCRC1	1.000
KCNMA1	1.000
ABCC9	1.000
ACACB	1.000
PDLIM5	1.000
CEP192	1.000
WWC2	1.000
IMMT	1.000
BZW2	0.995
DST	0.995

Table 2: Parkinson disease as gold-standard Control experiment II.

Parkinson disease and complex Parkinsonism	
Gene	Prediction
SLC41A2	1.000
IMMT	0.995
AKAP6	0.995
MED24	0.990
CD22	0.990
VPS13C	0.990
MEIS2	0.990
RAP1GDS1	0.990
PAM	0.990
ALAD	0.990

5 RESULTS & FINDINGS

Table 3 describes the predicted data from the machine learning gene prediction model. These predictions are based on the probability of classifiers that was predicted. The gene search for is either associated to a disease(s) or not. The table shows and describes further statistical analysis to present the standard deviation, the minimum and maximum gene prediction and the interquartile range of 25%, 50% and 75%.

Table 3: Mutated Genes standard deviation.

Probability of classifiers that voted "disease" or "non-disease"	
count	121.000000
mean	0.525702
std	0.255633
min	0.040000
25%	0.360000
50%	0.540000
75%	0.720000
max	0.990000

Figure 6 describes further the result by illustrating the probability level of the mutated genes using a histogram.

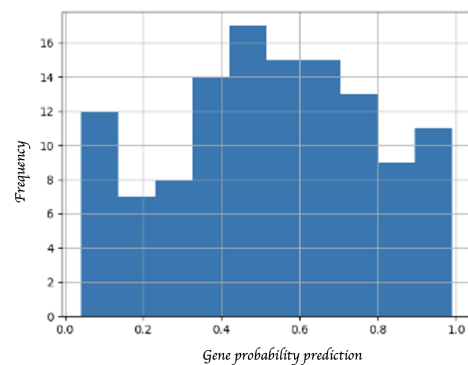


Figure 6: Described the frequency of the search genes.

5.1 Mutated Genes and Associated Diseases

This section illustrates the visualization of mutated genes that are associated with the neurological phenotype of diseases in this study. Preliminary studies revealed that using the control genes from experiment I and II on the machine learning web-based application model helped to understand whether there are any correlations or similar results from other diseases within the database model. In the first control experiment, the study applied the full threshold of **0.99** probability. The result is displayed in Figure 7. The 10 most genes associated with **Allinone disease**, include *UQCRC1*, *KCNMA1*, *ABCC9*, *ACACB*, *PDLIM5*, *CEP192*, *WWC2*, *IMMT*, *BZW2*, *DST*. However, gene *IMMT* is also associated with **Parkinson and Complex Parkinsonism disease** but with different level of predictions. This predictive level comparison indicated that gene *IMMT* is more directly associated to *Allinone disease* as compare to *Parkinson and complex Parkinsonism disease* as seen in the Table 1 and Table 2 control experiment results.

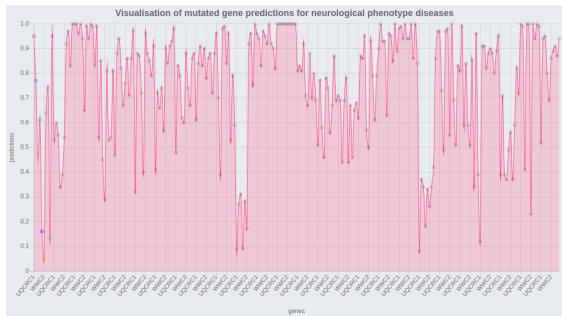


Figure 7: Results showing other diseases with similar mutated genes that were associated to allinone disease.

In the second control experiment II, we applied the same threshold stringency probability of **0.99** within the database model in order to observe the result. In this study, our chosen assumption of good measure probability was from **0.99** and above. Both control experiments revealed some similarities between genes mutation within other neurological phenotype diseases within this study. The study was able to predict genes that are related to each other within several diseases. Figure 8 shows the results from the control experiment II. The 10 most genes associated with **Parkinson and Complex Parkinsonism disease**, include *SLC41A2*, *IMMT*, *AKAP6*, *MED24*, *CD22*, *VPS13C*, *MEIS2*, *RAP1GDS1*, *PAM*, *ALAD* as seen in Table 2. Parkinson disease causation is widely associated to ageing immune cells (Lagouge and Larsson, 2013) and the environmental factors that could lead to the gene mutation in healthy humans

(Niccoli and Partridge, 2012). There are also several pathogenic missense mutations that segregate in families that could also be associated to Parkinson's disease (Paisán-Ruiz et al., 2004; Zimprich et al., 2004; Liu et al., 2018b).

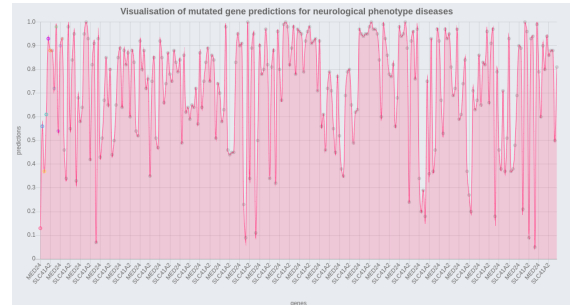


Figure 8: Results showing other diseases with similar mutated genes that were associated to Parkinson and Complex Parkinsonism disease.

Table 4 shows a few selected diseases with similar mutated genes from the results of the control experiment I and II in this study.

6 HARD COMPUTATION PROBLEM

Although several tests were performed on the algorithm model to ascertain the performance and the precision accuracy of the gene prediction model. One of the most difficult challenges of this machine learning model is designing an optimization search engine mechanism that will enable the precision of the gene prediction search from the database.

6.1 Machine Learning Web-App: Gene Search Engine Optimization

In the study, a proposed machine learning web-app known as *EnuwaJGX* was developed to allow the searching of predicted genes that are associated to these diseases. The users are able to enter multiple genes as input into the gene application web search interface, separated with a comma and all capital letter entry. The flowchart in Figure 9 illustrates the process of searching and the display of only relevant genes that are associated with these diseases. In this study, we are only interested in the genes that are mutated and that causes these neurological phenotype of the diseases. Further research work will be conducted using natural language processing (NLP) techniques to explore more of the predicted genes that are associated with multiple diseases in the future study.

Table 4: Mutated Genes from control experiment I & II revealing similarities with a few selected diseases.

Disease	Gene (from control Exp. I)	Disease	Gene (from control Exp. II)
Epileptic Encephalopathy (EE)	KCNMA1	Early Onset Dementia Encompassing Fronto Temporal Dementia and Prion Disease (EODM FTD PrD)	MEIS2, ALAD
Congenital Myopathy (CMP)	UQCRC1, ACACB, IMMT, PDLIM5, ABCC9, KCNMA1	Epileptic Encephalopathy (EE)	MED24, CD22, MEIS2, PAM
Skeletal Muscle Channelopathies (SMC)	ACACB	Congenital Myopathy (CMP)	VPS13C, IMMT, MEIS2, PAM, AKAP6
Inherited White Matter Disorders (IWMD)	BZW2	Congenital Muscular Dystrophy (CMD)	MED24
Epilepsy Plus (EP)	KCNMA1	Hereditary Ataxia (HA)	MED24
Limb Girdle Muscular Dystrophy (LGMD)	PDLIM5	Inherited White Matter Disorders (IWMD)	IMMT, AKAP6
Arthrogryposis (AMC)	ACACB, ABCC9	Epilepsy Plus (EP)	MED24, CD22, MEIS2, PAM
Rhabdomyolysis and Metabolic Muscle Disorders(RMMD)	ACACB, IMMT, PDLIM5, ABCC9	Limb Girdle Muscular Dystrophy (LGMD)	MED24, IMMT, AKAP6
Structural Basal Ganglia Disorders (SBGD)	PDLIM5	Allinone (A)	VPS13C, IMMT, MEIS2, PAM, AKAP6
Congenital Myaesthesia (CMS)	ACACB	Early Onset Dystonia (EODS)	MED24, CD22, IMMT, MEIS2,SLC41A2, RAP1GDS1,PAM, ALAD
Distal Myopathies (DM)	UQCRC1, ACACB, IMMT, BZW2, PDLIM5, ABCC9, KCNMA1	Hereditary Spastic Paraplegia (HSP)	MED24
-	-	Arthrogryposis (AMC)	VPS13C, IMMT
-	-	Rhabdomyolysis and Metabolic Muscle Disorders(RMMD)	MED24, CD22, VPS13C, IMMT,RAP1GDS1, PAM, AKAP6
-	-	Brain Channelopathy (BC)	RAP1GDS1, AKAP6
-	-	Structural Basal Gangila Disorders (SBGD)	MED24, IMMT, MEIS2, SLC41A2, AKAP6
-	-	Cerebrovascular Disorders (CD)	MEIS2,RAP1GDS1, PAM
-	-	Intracerebral Calcification Disorders (ICD)	SLC41A2
-	-	Distal Myopathies (DM)	MED24, IMMT, MEIS2, RAP1GDS1,PAM, AKAP6
-	-	Charcot Marie Tooth Disease	VPS13C, MEIS2

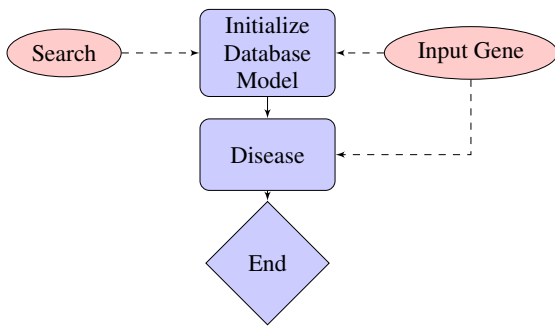


Figure 9: Flowchart illustrating the gene search process.

Figure 10 illustrate the overarching search optimization process and the return mechanism that present a notification that a gene search for does not exist in the database or has not been in the list of process genes for the study. This provide the user with another opportunity to perform a new gene search action and the system will then optimise the search engine from the beginning following through the same linear search process until a true search result is identified or the search process ends.

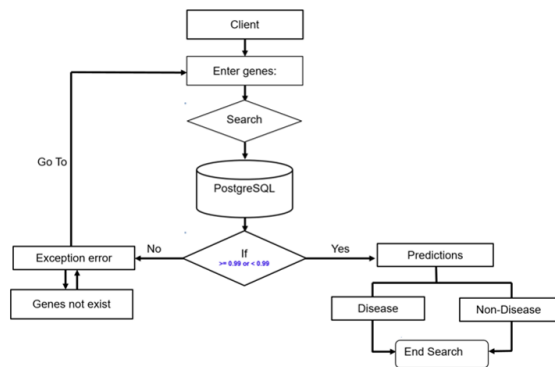


Figure 10: Client application interface search process.

6.2 Web App: EnuwaJGX

EnuwaJGX² is a web-based tool that allows life scientists, biomedical researchers, system biologist, bioinformaticians, data scientists and medical sciences professionals to take advantage of this novel machine learning gene prediction application with powerful function and class of techniques in an appropriate user interface. Large complex models of data processing and storage are built and analysed through a graphical user interface. It is an ongoing tool development for research to allow the large scale prediction of genes and their associated diseases. Results from the search genes and associated diseases can be down-

²<http://35.176.149.24:8000/gene/>

loaded freely from the application database to enable researchers conduct further analysis. The future plans is to allow for the analysis of genome-scale gene and disease models visualization.

The Machine Learning System Design Architecture: Figure 11 describes the flow diagram and construct of the Machine Learning web-based application architecture for this study.

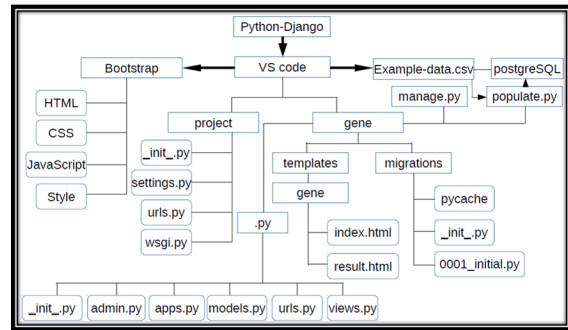


Figure 11: Machine Learning system application design architecture.

6.3 EnuwaJGX System Application: Testing & Evaluation

The *EnuwaJGX* web-based software application system has been tested and evaluated for the validity of the predictions by Clinicians, Geneticist, Biologist and Bioinformaticians. They were all able to identify gene causation and predictions associated to the neurological phenotype of diseases for which they are investigating. A cross testing of expert review on mutated genes and diseases causation was conducted using the datasets from *PanelApp* (325 panels)³. This evaluation reviewed similar predictive genes that are associated to the subtypes of neurological phenotype of diseases predicted in the *EnuwaJGX* application system. We conducted validity of our gene prediction application results with other existing expert verified results. For example, testing the gene *ACTB* which has been reviewed to be the top cause of **Early onset dystonia** disease in the *PanelApp*. The *EnuwaJGX* system also predicted the same result with 95% confident interval, revealing that the mutation of *ACTB* gene caused the **Early onset dystonia** disease.

7 CONCLUSION

This study used a Machine Learning model to predict genes that are directly associated to known diseases. The findings presented results from the gene

³<https://panelapp.genomicsengland.co.uk/panels/>

predictions that revealed disease causation genes. The datasets were able to show relative genes that are associated to specific neurological diseases.

The predictions from this research has shown distinctive gene predictions and predict distinct genes closely associated to the selected diseases.

The most interesting and novel area for further study is to apply Natural Language Processing techniques to develop a different model with new sources of data and compare the findings with the previous results of the ground truth from the research of the Machine Learning(ML) and probabilistic models used to predict the genes associated to diseases in this study. By combining these two research approaches and conducting the comparisons, this will provide us with a more clear understanding of the accuracy of the gene predictions.

This research has associated mutated genes causation to neurodegenerative phenotype of diseases. One of the main factors of gene mutation was associated to both ageing, environment and life style of humans.

Further research will be done on applying NLP and ML approach on the most recent medical datasets (text based) related to genes and diseases.

7.1 PubMed-PMC Key Term Search

Initial searching of PubMed central - PMC (US National Library of Medicine National Institutes of Health) databases using key words of genes and diseases produces over 600 and 20,000 journal papers respectively. This proposed extended research will compare the analysis of the ground truth as defined from within the extracted articles and the initial gene prediction results from the machine learning gene prediction model in order to confirm the correlation and similarities within the datasets. This extended research will be applying a TextRank algorithm, which is popular for conducting similarity matrix of multiple datasets extraction and automated summarization. In this proposed phase of the research, the study will be using this algorithm within the extracted journal datasets from PubMed-PMC and the previous Genomic datasets analysed from the Phase 1 of this research.

7.2 Extended Research Pipeline

The early phase of this extended research pipeline architecture has been completed from a computer programming ‘code perspective’, that enabled the initial gene predictions using the console of the operating system. The back-end and interface is the next ongoing proposed Phase 2. This Phase will continuously

apply the proposed hypothesis in the system design (see Figure 12).

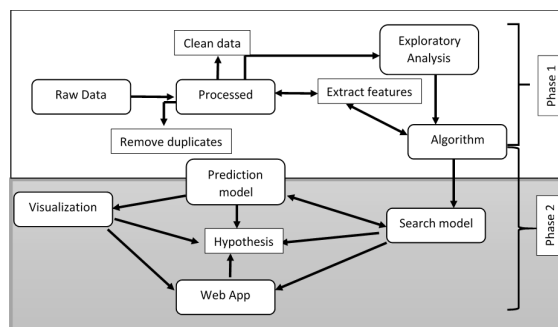


Figure 12: Full extended gene prediction pipeline.

REPRODUCIBILITY AND ONLINE RESOURCES

Data and Code Availability

The datasets analysed in this study with all the codes for the data preprocessing, model implementation, design web-based deployment architecture for the the disease and gene prediction and all algorithms are made available at a *GitHub repository*⁴. Additionally, this repository also contains the full web development using Django platform that supported the Python programming code and the database that was restructured or converted from SQLite3 to PostgreSQL in order to store the large volume of the processed gene and disease data for the study. The author is fully committed to maintaining continuously the repository in terms of both updating with new models or codes that changes the performance, functionality and ease of use of the *EnuwaJGX* website, and actively monitoring any issues within GitHub. *EnuwaJGX* Machine Learning genes and diseases prediction web resources and database are available within the *GitHub repository*.

AUTHORS' CONTRIBUTIONS

This research was conducted by a single author. The author analysed and processed the datasets retrieved from Genomics England database. All Mathematical algorithm models and code for the preprocessing of the datasets were developed solely by the author. The author developed a web-based semantic software

⁴<https://github.com/DanFON/machinelearningpredictgene/>

application system for the gene and disease predictions. The software application model was developed using *Python – Django* platform environment and a *PostgreSQL* database. This can be found in the *EnuwaJGX* web-based application. The findings and results from this research were analysed by the main author of this paper.

ACKNOWLEDGEMENTS

The Author wish to acknowledge funding from the *JWECT* for awarding the grant to continue this research. Thanks to UCL Institute of Neurology for testing the prototype Machine Learning gene prediction web-based application and *Genomics England* for providing the initial Dataset. A big thank you to Dr Elaine Pang for proofreading the manuscript.

REFERENCES

- Asif, M., Martiniano, H. F., Vicente, A. M., and Couto, F. M. (2018). Identifying disease genes using machine learning and gene functional similarities, assessed through gene ontology. *PLoS one*, 13(12):e0208626.
- Botía, J. A., Guelfi, S., Zhang, D., D'Sa, K., Reynolds, R., Onah, D., McDonagh, E. M., Martin, A. R., Tucci, A., Rendon, A., et al. (2018). G2p: Using machine learning to understand and predict genes causing rare neurological disorders. *bioRxiv*, page 288845.
- Bruna, T., Lomsadze, A., and Borodovsky, M. (2020). Genemark-ep+: eukaryotic gene prediction with self-training in the space of genes and proteins. *NAR Genomics and Bioinformatics*, 2(2):lqaa026.
- Chen, Y., González-Pech, R. A., Stephens, T. G., Bhattacharya, D., and Chan, C. X. (2020). Evidence that inconsistent gene prediction can mislead analysis of dinoflagellate genomes. *Journal of phycology*, 56(1):6–10.
- Chen, Y., Stephens, T. G., Bhattacharya, D., González-Pech, R. A., and Chan, C. X. (2019). Evidence that inconsistent gene prediction can mislead analysis of algal genomes. *bioRxiv*, page 690040.
- Chong, Y., Ikematsu, H., Yamaji, K., Nishimura, M., Kashiwagi, S., and Hayashi, J. (2003). Age-related accumulation of ig v_H gene somatic mutations in peripheral b cells from aged humans. *Clinical & Experimental Immunology*, 133(1):59–66.
- de Araujo, A. L., Hardell, C., Koszek, W. A., Wu, J., and Willemink, M. J. (2022). Data preparation for artificial intelligence. In *Artificial Intelligence in Cardiothoracic Imaging*, pages 37–43. Springer.
- Flicek, P. (2007). Gene prediction: compare and contrast. *Genome biology*, 8(12):233.
- Lagouge, M. and Larsson, N.-G. (2013). The role of mitochondrial dna mutations and free radicals in disease and ageing. *Journal of internal medicine*, 273(6):529–543.
- Lai, Y., Wu, B., Chen, L., and Zhao, H. (2004). A statistical method for identifying differential gene–gene co-expression patterns. *Bioinformatics*, 20(17):3146–3155.
- Liu, H., Stephens, T. G., González-Pech, R. A., Beltran, V. H., Lapeyre, B., Bongaerts, P., Cooke, I., Aranda, M., Bourne, D. G., Forêt, S., et al. (2018a). Symbiodinium genomes reveal adaptive evolution of functions related to coral-dinoflagellate symbiosis. *Communications biology*, 1(1):1–11.
- Liu, Z., Bryant, N., Kumaran, R., Beilina, A., Abeliovich, A., Cookson, M. R., and West, A. B. (2018b). Lrrk2 phosphorylates membrane-bound rabs and is activated by gtp-bound rab71 to promote recruitment to the trans-golgi network. *Human Molecular Genetics*, 27(2):385–395.
- Lyu, B. and Haque, A. (2018). Deep learning based tumor type classification using gene expression data. In *Proceedings of the 2018 ACM international conference on bioinformatics, computational biology, and health informatics*, pages 89–96.
- McDermott, M. B., Wang, J., Zhao, W.-N., Sheridan, S. D., Szolovits, P., Kohane, I., Haggarty, S. J., and Perlis, R. H. (2019). Deep learning benchmarks on 11000 gene expression data. *IEEE/ACM transactions on computational biology and bioinformatics*, 17(6):1846–1857.
- Murphy, K. P. (2012). *Machine learning: a probabilistic perspective*. MIT press.
- Niccoli, T. and Partridge, L. (2012). Ageing as a risk factor for disease. *Current biology*, 22(17):R741–R752.
- Paisán-Ruiz, C., Jain, S., Evans, E. W., Gilks, W. P., Simón, J., Van Der Brug, M., De Munain, A. L., Aparicio, S., Gil, A. M., Khan, N., et al. (2004). Cloning of the gene containing mutations that cause park8-linked parkinson's disease. *Neuron*, 44(4):595–600.
- Sanchez-Guajardo, V., Barnum, C. J., Tansey, M. G., and Romero-Ramos, M. (2013). Neuroimmunological processes in parkinson's disease and their relation to α -synuclein: microglia as the referee between neuronal processes and peripheral immunity. *ASN neuro*, 5(2):AN20120066.
- Sikibi, M. (2022). Use data mining cleansing to prepare data for strategic decisions. In *Data Mining-Concepts and Applications*. IntechOpen.
- Zimprich, A., Biskup, S., Leitner, P., Lichtner, P., Farrer, M., Lincoln, S., Kachergus, J., Hulihan, M., Uitti, R. J., Calne, D. B., et al. (2004). Mutations in *lrrk2* cause autosomal-dominant parkinsonism with pleomorphic pathology. *Neuron*, 44(4):601–607.