

Semifinal Results of a Research Project Involving Algorithmic Complexity Estimation and Machine Learning

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Abstract. In recent years, the intersection of algorithmic complexity and machine learning has opened new avenues for analyzing continuous biomedical data. This paper presents the semifinal results of a research project focused on estimating Kolmogorov-Chaitin Complexity (KCC) using the Block Decomposition Method. KCC serves as a core feature for machine learning models aimed at predicting sepsis and epileptic seizures. The results highlight the efficacy of these models, with promising performance metrics, and underscore the utility of algorithmic complexity measures in enhancing machine learning models for biomedical applications. By leveraging the inherent complexity in biomedical signals, these models achieve superior predictive performance.

Methodology. Kolmogorov-Chaitin Complexity (KCC) [1] is a measure of the randomness or information content of a data sequence. Estimating KCC for continuous biomedical signals involves the Block Decomposition Method, which breaks down data into manageable blocks to approximate complexity.

The KCC values derived from biomedical data are used as primary features in various machine learning models. The objective is to predict medical conditions—specifically, sepsis with a 4-hour horizon and epileptic seizures.

Data and Experimentation. Real-world biomedical data were sourced from international competitions, including time-series data relevant to sepsis

and epilepsy. These datasets provided a robust foundation for training and testing machine learning models.

Several models, including neural networks, gradient boosting machines, generalized linear models, and others, were trained using the KCC features.

Results

Table 1. The machine learning models with the highest performance [2].

| Data set | ML model | Performance by AUC |
|-------------------|---------------------------|--------------------|
| Epileptic EEG set | Word2Vec | 96.8% |
| Sepsis set | Gradient Boosting Machine | 95.3% |

Note: AUC – area under the ROC curve

Discussion. The results underscore the utility of algorithmic complexity measures in enhancing machine learning models for biomedical applications. By leveraging the inherent complexity in biomedical signals, these models achieve superior predictive performance.

Conclusion. This research project demonstrates the effectiveness of combining algorithmic complexity estimation with machine learning to predict sepsis and epileptic seizures. With AUC scores of 95.3% and 96.8%, respectively, the models show significant promise for real-world medical applications. Further refinement and validation could enhance their utility in clinical practice.

References

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