OHDSI NLP WG Monthly Meeting

02/13/2019

Agenda

- Introduction of New Members
- Criteria2Query: a natural language interface to OMOP CDM databases for cohort identification – Chunhua Weng and Chi Yuan
- Ongoing projects
- Other issues

PRESENTATION

Criteria2Query: a natural language interface to OMOP CDM databases for cohort identification

Chunhua Weng and Chi Yuan



Criteria2Query: a natural language interface to OMOP CDM databases for cohort identification

Chi Yuan¹, Patrick B Ryan^{1,2}, Casey Ta¹, Yixuan Guo¹, Ziran Li¹, Jill Hardin², Rupa Makadia², Peng Jin¹, Ning Shang¹, Tian Kang¹, Chunhua Weng¹ ¹Columbia University; ²Janssen Inc.

February 12, 2019

Cohort identification

- Clinical diagnosis of ST-segment elevation acute myocardial infarction
- Must be treated within 12 hours after symptom onset
- Must be able to walk
- Must receive successful primary percutaneous coronary intervention

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	observation	" ^ " /
notes	procedure	
condit	ion	İ

Task breakdown

- Entity recognition: what is being searched for?
- Concept specification: what does it mean here?
- Concept mapping/normalization: how is it coded in a database?
- Phenotyping: what if the concept is implicitly represented?
- Data location: is it in the database? If yes, where? Which source is more reliable or convenient if there is > 1 source?
- Query formulation

- Clinical diagnosis of STsegment elevation acute myocardial infarction
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Ten Translations for One Criterion

e.g., "ambulatory patients seen by Dr. Michael Kahn with diabetes mellitus and essential hypertension between 1/1/2009 and 12/31/2009?"

Table 1: Ten graphical diagrams representing the question: "How many ambulatory patients did I ("Provider = Kahn") see with diabetes mellitus (ICD-9 = 250.xx) and essential hypertension (ICD-9 = 401.xx) between January 1, 2009 and December 31, 2009?" Each diagram, when converted into a database query, returns a different result. N(Pt) = number of patients.



--material from Dr. Michael G Kahn Michael.Kahn@childrenscolorado.org

State of the art



- Clinical diagnosis of ST-segment elevation acute myocardial infarction
- Must be treated within 12 hours after symptom onset
 - Must be able to walk
 - Must receive successful primary percutaneous coronary intervention

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- High cost
- Long waiting time
- Fragmented knowledge
- Limited query reuse and knowledge sharing
- No autonomy for clinician scientist

The goal of Criteria2Query: clinician autonomy with minimal effort



- Must be treated within 12 hours after symptom onset
- Must be able to walk
- Must receive successful primary percutaneous coronary intervention

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Currently focus on information retrieval (anything queryable), not on phenotype knowledge engineering (anything that needs knowledge or inference)

Criteria2Query for reusable and sharable queries

Goal: minimize time needed from clinicians to translate English concepts to codes in ICD-9, SNOMED, LOINC, RxNorm, and etc., used by databases and enables rapid iterative feasibility assessment



Brief demo

https://www.youtube.com/watch?v=EYN2Md-DCR8

The modular pipeline



NER (Named Entity Recognition)

Journal of the American Medical Informatics Association, 2019, Vol. 00, No. 0

Definition Examples Category Entity Condition Conditions are records of a Person suggesting the presence of a Type 2 diabetes mellitus, Alzheimer's disease. disease or medical condition stated as a diagnosis, a sign or a symptom. Drugs are biochemical substances formulated in such ways that Drug Acetaminophen, Furosemide when administered to a person it will exert a certain physiological effect. The standardized examination or testing of a person or person's Serum creatinine, Serum bilirubin Measurement sample. Procedure Procedures are activities or processes on the patient to have a *Chemotherapy*, *Radiotherapy* diagnostic or therapeutic purpose. Observations are clinical facts about a person obtained in the Smoking, drug allergy Observation context of examination, questioning or a procedure. Numeric attributes include but not limited to age range, lab test Attribute Value 30 to 75 years old result, etc. Temporal Temporal constraints imposed on clinical diagnoses, drugs, etc. within 12 months

Table 1. Named entities and attributes recognized by Criteria2Query

Relations Extraction

Table 2. Relationships in Criteria2Query

Relationship	Entity	Attribute	Example
has_temp	Condition Measurement Drug Observation Procedure	Temporal	"thromboembolic disease" has_temp "within the last 3 months"
has_value	Demographic Measurement	Value	"Age" has_value "13-15 years old", "platelet count" has_value "< 100 000"

Entity normalization



Evaluation



Table 3. The evaluation matrix of criteria representation with 95% confidence intervals

Evaluation Matrix	Criteria crawle	d from Clinical Trials	s.gov $(n = 125)$	Criteria Entered by Testers $(n = 52)$			Combined $(n = 177)$				
	Precision	Recall	F1	Precision	Recall	F1	Precision	Recall	F1		
Entity recognition	0.902 (156/173)	0.726 (156/215)	0.804	0.899 (62/69)	0.681 (62/91)	0.775	0.901 (218/242)	0.712 (218/306)	0.795		
	[0.844-0.936]	[0.661-0.777]	[0.760-0.841]	[0.783-0.942]	[0.571-0.758]	[0.694-0.833]	[0.851-0.930]	[0.657-0.758]	[0.758-0.828]		
Relation extraction	0.958 (23/24)	0.676 (23/34)	0.793	1.00 (10/10)	0.714 (10/14)	0.833	0.971 (33/34)	0.688 (33/48)	0.805		
	[0.792 - 1.000]	[0.471-0.794]	[0.576-0.867]		[0.357-0.857]	[0.526-0.923]	[0.824 - 1.000]	[0.521-0.792]	[0.647-0.871]		
Accuracy											
Negation detection	0.985	0.985 (135/137) [0.942-0.993]			0.979 (47/48) [0.896-1.000]			0.984 (182/185) [0.946-0.995]			
Logic detection	0.944	4 (17/18) [0.722-1.00]]	0.500 (2/4) [0.000–0.750]			0.864 (19/22) [0.591-0.955]				
Entity normalization	0.447	7 (51/114) [0.351–0.5	[35]	0.808 (21/26) [0.577-0.885]			0.514(72/140) [0.429-0.586]				
Attribute normalization	0.800	0.800 (16/20) [0.500-0.900]			0.778(7/9) [0.222–0.889]			0.793(23/29) [0.586–0.897]			

Error Analysis

- Imperfect Information extraction results (NER, RelEx, Negation detection)
- Lack of medical knowledge, e.g., anti-inflammatory drugs, for concept normalization
- Incomplete concept coverage in OMOP CDM

Example Errors Regation Absence of documentation of negative tuberculin skin test,

Absence of documentation of negative tuberculin skin test MEASUREMENT

ATLAS											•
🕯 Home	← [C2Q] > [C2Q]negative tuberculin skin tes	st									
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Q Search	Search Import										
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Cohort Definitions										Advanced Optio	ns
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		Show	ing 1 to 8 of 8 er	ntries						Previous 1	Next
🚠 Cohort Pathways		E.	Id 🕴	Code	Name	Class	RC	DRC -	, Domain	Vocabulary	
	▼ Vocabulary	-	44820071	705 51	Nonspecific reaction to tuborculin skin test without active tuborculosis	E-dig billing code	0	() Condition	ICDOCM	
Incidence Rates	CVX (4)	F	44820071	795.51	Nonspecific reaction to tubercular skin test without active tuberculosis	5-dig billing code	0	C.	Condition	ICD9CM	
	Read (1)	5	45539358	R76.11	Nonspecific reaction to tuberculin skin test without active tuberculosis	5-char billing code	0	C) Condition	ICD10CM	
Profiles	ICD10CM (1)	1	44828171	795.5	Nonspecific reaction to tuberculin skin test without active tuberculosis	4-dig nonbill code	0	C) Condition	ICD9CM	
	▼ Class	1	45455042	33213	Tuberculin skin test	Read	0	С) Measurement	Read	
Estimation	CVX (4)	1	40213238	95	tuberculin skin test; old tuberculin, multipuncture device	CVX	0	c) Drug	CVX	
	5-dig billing code (1)	1	40213240	97	tuberculin skin test: purified protein derivative, multipuncture device	CVX	0	c) Drug	CVX	
Prediction	5-char billing code (1)	_	40210240	0,	table of the state	0100	0		Didg	01/1	
	Read (1)	E.	40213239	96	tuberculin skin test; purified protein derivative solution, intradermal	CVX	0	C) Drug	CVX	
	▼ Domain	1	40213237	98	tuberculin skin test; unspecified formulation	CVX	0	C) Drug	CVX	
📽 Configuration	Drug (4) Condition (3)	Show	ing 1 to 8 of 8 er	ntries						Previous 1	Nex

Monouromont (1)

Example Errors



Concurrent anti-inflammatory therapy, including corticosteroid therapy

#	Inclusion Criteria:							
1	concurrent TEMPORAL anti-inflammatory therapy DRUG, including corticosteroids therapy DRUG	YES						
#	Exclusion Criteria:							
No matching records found								
Next	Download							



Preliminary Progress



Article Contents

Abstract

INTRODUCTION

MATERIALS AND METHODS

RESULTS

DISCUSSION

CONCLUSIONS

FUNDING

AUTHOR CONTRIBUTORS

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SUPPLEMENTARY MATERIAL

2/13/19

Criteria2Query: a natural language interface to clinical databases for cohort definition \Im

Chi Yuan, Patrick B Ryan, Casey Ta, Yixuan Guo, Ziran Li, Jill Hardin, Rupa Makadia, Peng Jin, Ning Shang, Tian Kang, Chunhua Weng ⊠

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Abstract

Objective

Cohort definition is a bottleneck for conducting clinical research and depends on subjective decisions by domain experts. Data-driven cohort definition is appealing but requires

https://doi.org/10.1093/jamia/ocy178

Open source resources

Introduction

https://www.youtube.com/watch?v=EYN2Md-DCR8

- Open source: <u>https://github.com/OHDSI/Criteria2Query</u>
- Online system: <u>http://www.ohdsi.org/web/criteria2query/</u>
- Feedback or inquiries: <u>https://gitter.im/Criteria2query/Lobby#</u>

Contributions

- An early natural language interface to clinical database
- An open-source pipeline with modular architecture

Ongoing work for collaboration

- Richer annotated corpus of criterion text
- State of the art NLP methods application
- More intelligent concept set recommendation
- More user-friendly interactive design

Ongoing projects

- Mapping of Note Types to LOINC/standard vocabulary Karthik Natarajan, Ruth Reeves, and Jon Duke
- Landscape Analysis of section identifier systems and proposal of a standard terminology for use – Hua Xu and Karthik Natarajan
- Mapping of CUIs to standard terminology Juan Banda
- Standardization of term_modifiers and values Hua Xu
- Evaluate and revise textual CDM tables by sharing practical issues and lessons learnt during ETL for processing textual data into CDM – Ruth Reeves, others?
- Develop tools (within Atlas) to facilitate uses of NLP data for cohort building/phenotyping : Collaborate with eMERGE consortium:
- Conduct cross-site studies that use textual data
- Continue developing other NLP resources

Other issues

- Meeting formats : Presentation followed by updates on ongoing projects
- Presentation scheduling
 - March 13th Yuan Luo eMERGE collaboration
 - April 10th Jon Duke ClarityNLP
 - May 8th Juan Banda CUI mapping, ongoing work Juan, Stephan Meyestre – tool to evaluate NLP systems
 - June 12th
 - July 10th
- Please let us know if you can present your related work at any of the above meetings.