

Development of

Clinically Informing application based on Recurrent Neural Network (CIReNN)

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Background

- Risk prediction for individual patient has been one important themes in clinical research and patient care.
- Traditional approaches usually have used regressionsuch as the logistic model and the Cox model. These model clinically useful and widely accepted because they use of variables which can be easily obtained in clinical prac these models cannot represent more complex relation individual predictors and do not model their temporal relations
- The Recurrent Neural Network (RNN) model can represent and non-linear relationship among high-dimensional feat

Purpose

- The objective is to build a predictive model based on a result network by using temporal features extracted from database: **CIRENN** (Clinically Informing application based Neural Network).
- **CIRENN** is expected to facilitate prediction of important by analyzing flexible and temporal relationships in health

Model

- The whole process of model has 5 steps:
- 1. Create the risk and outcome cohort by using ATLAS

N-dimensional vectors -(sparse array)

Time span 1 (-1800~1770 Time span 2 (-1770~1740

Time span 50 (-30~ index

Fig 1. The structure of data containing temporal

- 3. Create model settings
- 4. Fitting the model
 - By using Keras with tensorflow backend in R, an RNN model is trained to predict the binary outcome.
- 5. Evaluate the model

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Experiment

e of the most -based models, odels have been a small number ctice. However, ionship among lationship. esent temporal tures.	 Objective of experiment is to predict 5 elderlies. Database National health insurance service (NH into OMOP-CDM version 5 This database contains consecutive of one million general Korean population Cohort Target cohort at risk: Subjects who we (2009-01-01) Outcome cohort: Subjects who died b
recurrent neural m OMOP-CDM ed on Recurrent t clinical events h care data.	 cause -Among 89,391 target subjects at risk, developed outcome from 2009 to 201. Train, validation and test set were divided respectively. Hyper-parameters of RNN model in the -RNN model: single-layer GRU -drop-out rate: 0.2 -activation function: sigmoid -optimizer: RMSProp

2. Extract temporal features from the cohort by using temporal_features branch of the feature extraction package The following information is extracted from OMOP-CDM: age, sex, observation, diagnosis history and drug history. For each patient, multi-hot label vectors are generated for representing the patient's medical history as shown in Fig 1. N-dimensional vector

day): Fever, Cough[condition], Tylenol[drug]	[<mark>1</mark> ,1,0,0,
day): Pneumonia [condition], Tylenol, Amoxicillin[drug]	
day): Diabetes mellitus [condition], Insulin[drug]	
features, which fed to RNN model	

The model basically use gated recurrent units (GRU), because GRU usually requires less amount of data compared with LSTM. Greedy search algorithm was applied to recommend the best hyper-parameter options by using validation data set.

5 year mortality in Korean general

- HIS) sample cohort was converted
- bservation for randomly sampled from 2002 to 2013
- vere 65 year or older at index date
- between 2009 and 2013 by any
- total of 15,754 (17.6%) ided by 0.7, 0.1 and 0.2 ratio,
- e experiment

-),0,...0,0,<mark>1</mark>,0]
-),0,...0,0,**1**,**1**]
- ,0,...0,<mark>0</mark>,1,1]

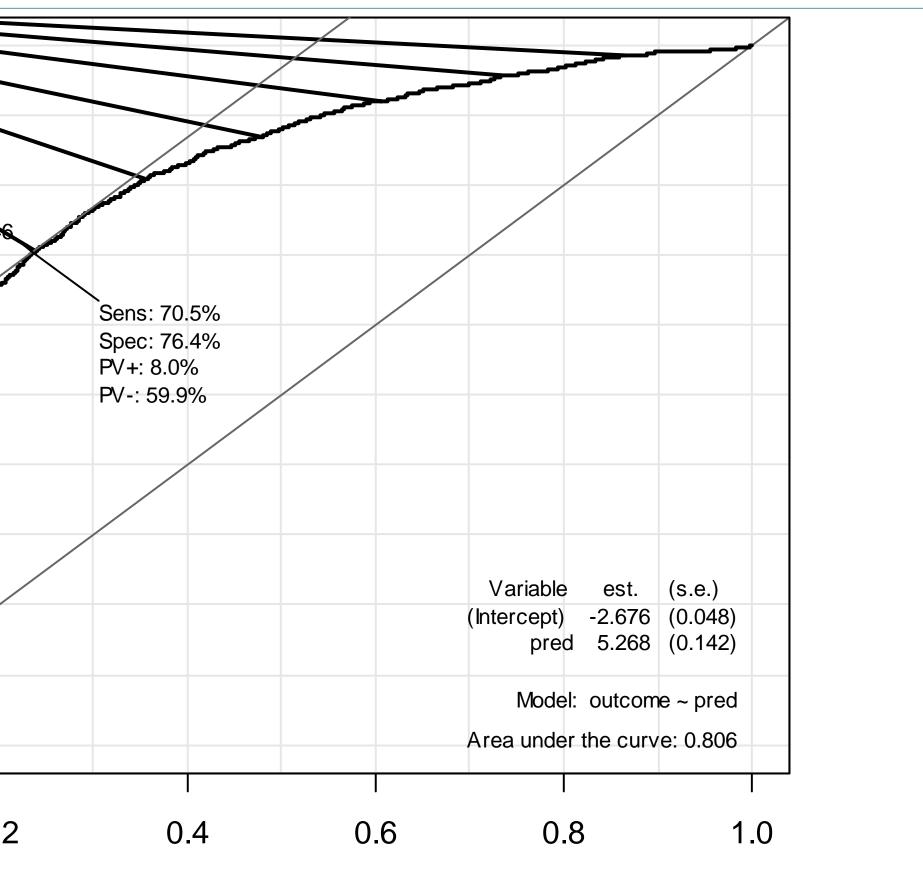
Experimental result 0.8 nsitivity Ñ 4 0.2 0.0 (AUROC = 0.806)**Fig 3.** Box plot for prediction value from the model between cohort with and without outcome

- elderlies (**Fig 3**).

Conclusion

- future





1-Specificity

Fig 2. ROC curve for predicting 5-year mortality in elderlies

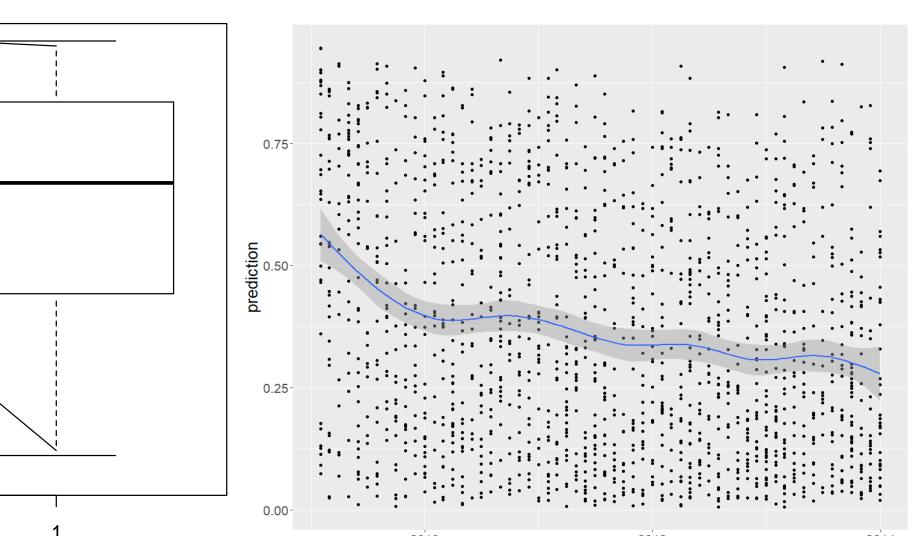


Fig 4. Prediction value for only subjects who died according the death year

• The Area under the ROC curve (AUROC) was 0.8. By taking the optimal cut-off value, positive predictive value and negative predictive value are 0.37 and 0.93, respectively (Fig 2).

The box plot demonstrates that the prediction value from the model has discriminative power to predict 5-year mortality in

The predicting power of model decreases as outcome develops later in the target cohort at risk as shown in **Fig 4**.

We developed a recurrent neural network model, called **CIRENN** for the prediction of future events based on OHDSI platform.

The feasibility of CIReNN was demonstrated in the experiment, which predicted 5-year mortality in elderlies.

CIReNN will be integrated into PatientLevelPrediction package in the