

Building comprehensive searches through a Machine Learning approach for

systematic reviews

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Background and aims

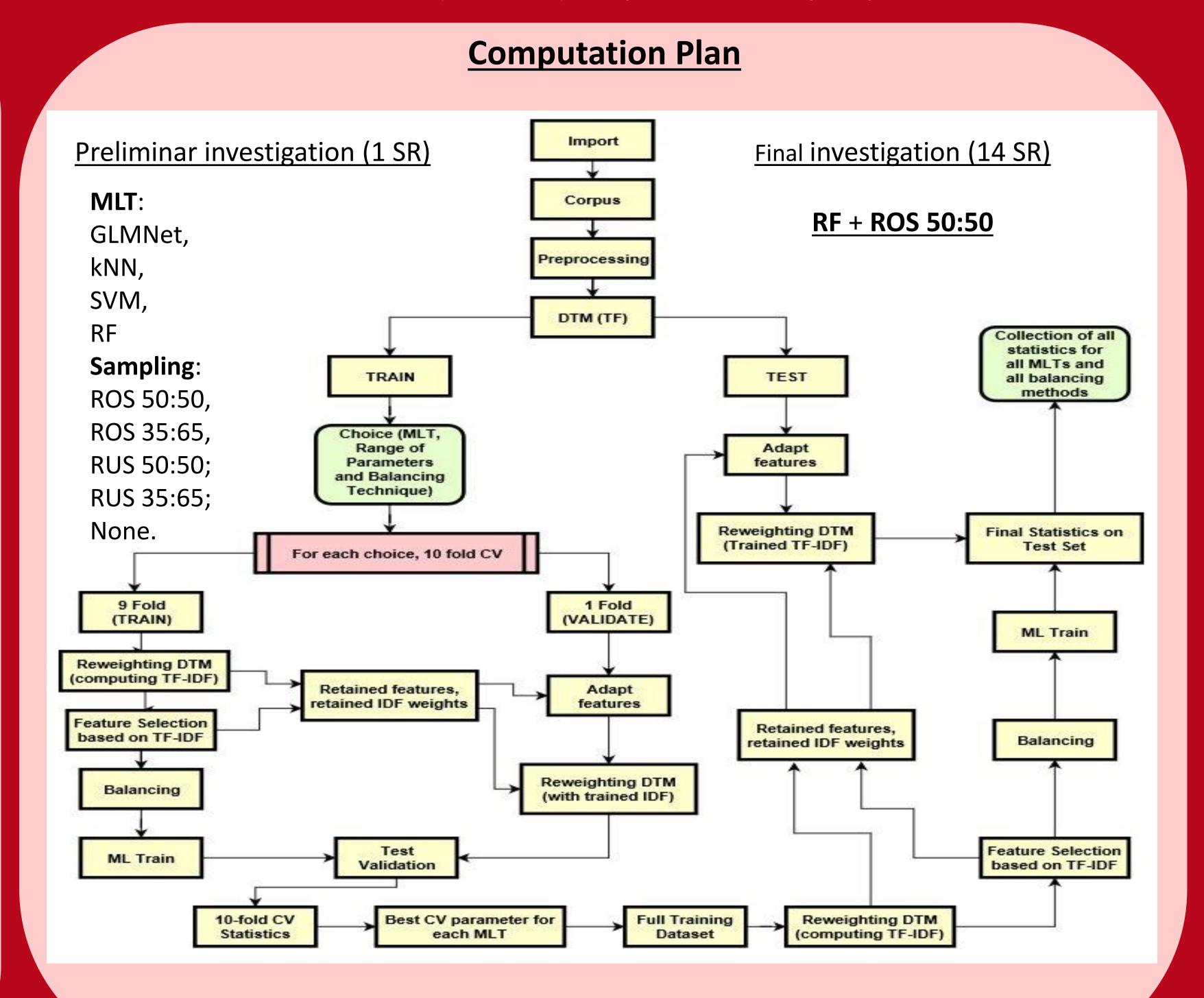
Clinical trial registries are important literary sources that contribute to a medicine based on up-to-date evidence. Despite their significant role, their use is not frequent in systematic reviews and meta-analyses, probably because of difficulties in managing records.

Main purpose: Our goal was to propose an automated approach to identify relevant information on a clinical trials registry. We used text mining and machine learning techniques to train a classifier able to detect relevant records on registry database, once a search has already been performed on standard data source (e.g. PubMed)

<u>Challenges:</u> Ensure that text data can be used to train and predict on different data sources taken in different time and from different kind of databases. Also, be able to deal with highly unbalanced sets of data, with which most classifiers are biased towards the majority class performing poorly on minority ones.³

Motivating example(s): The 14 Systematic reviews and Metaanalyses re-analyzed by BMJ. ¹

Methods: We explored the combinations of five balancing methods (including unbalanced and randomized sampling with both 50:50 and 35:65 Negative Records) and four MLTs (within GLMNet, kNN, SVM, and RF). One Systematic Review was used to select the best combination to implement in general. The best one was later used for a pool of fourteen studies for which both original and improved (by BMJ) results are available. For each study, the selected technique was trained on Positive PubMed records and on a series of random negative records all "out of" the PubMed string search used by the Sistematic Reviews' authors, with a 1/20 ratio up to a multiple of 200 records. The text was processed by lowering, removing the numbers and punctuations and augmented with the bi-gram tokens. The trainings were 10 Fold Cross-Vlidated for each of value of a set of three random parameters for the MLT and each one included reweighting processes with TF-iDF, feature selection (down to 4% of the top TF-iDF records) and balance. The best validated parameter was used to teach the final classifier, tested on an independent set consisting of the records from ClinicalTrial.gov proposed by Baudard et al. and a set of negative random records (different for each study) to form a 100 records test-set for each study. Validation and test DTMs have been adapted each time on the specifications requested by the applied machine.



Results

Median AUC				0.798					
Median SENS & RECALL				1					
Medi	0.596								
SI	train_pos	train_neg	test_pos	test_neg	AUC	PPV	PREV	SENS	SPEC
Yang Meng Segelov Li Lv Wang Zhou Liv	9 9 13 14 6 6 7 12 32 1 9	200 400 800 200	1 2 1 1 1 1 21	99 98 99 99 99	NA 0.677 0.770 0.859 0.798 0.909 0.803 0.918		NA 0.01 0.02 0.01 0.01 0.01 0.01	NA 1 1 1 1 1 1	NA 0.354 0.541 0.717 0.596 0.818 0.606 0.835
Douxfils Kourbeti Li Cavender Chatterjee	13 15 16 17 17 18 18	400	1 4 2 1 1	99 96 98 99 99	0.606 0.854 0.592 NA 0.515	0.013 0.125 0.024 NA 0.010	0.01 0.04 0.02 NA 0.01	1 1 1 NA 1 NA	0.212 0.708 0.184 NA 0.030

Discussion

The proposed procedure has led to the identification, for each systematic review, of all the additional records identified by the Baudard et al. study, and also leads to discreetly high AUC values as a proof of non-triviality. Positive Predictive Values (PPV) have been reported despite they are highly biased by the arbitrarily small prevalence of positive cases into the test set.

The validity of application of Text-Mining techniques in synergy with Machine Learning ones to meet the needs of researchers involved in systematic reviews had already been positively examined.⁴ Our study solves, first, the limitation highlighted above of a limited number of different test studies tested, on the other hand, not only improves the previous performance but also exerts the applicability not only of reducing manual labor but also of using very important but scarcely used resources so far.

References

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