

ARTIFICIAL INTELLIGENCE BASED DATA GOVERNANCE FOR CHINESE ELECTRONIC HEALTH RECORD ANALYSIS

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ABSTRACT

Electronic health record (EHR) analysis can leverage great insights to improve the quality of human healthcare. However, the low data quality problems of missing values, inconsistency, and errors in the data set severely hinder building robust machine learning models for data analysis. In this paper, we develop a methodology of artificial intelligence (AI)-based data governance to predict the missing values or verify if the existing values are correct and what they should be when they are wrong. We demonstrate the performance of this methodology through a case study of patient gender prediction and verification. Experimental results show that the deep learning algorithm of convolutional neural network (CNN) works very well according to the testing performance measured by the quantitative metric of F1-Score, and it outperforms the support vector machine (SVM) models with different vector representations for documents.

KEYWORDS

EHR Analysis, Data Governance, Vector Space Model, Word Embeddings, Machine Learning, Convolutional Neural Networks, Deep Learning.

1. INTRODUCTION

Electronic health record (EHR) analysis can leverage great insights from the big data to improve the quality of human healthcare and it is one of the approaches to accomplishing precision medicine. However, there are a lot of challenges in analyzing such massive data sets. One of the most challenging problems for our big Chinese EHR data analysis is its low data quality. The typical issues include missing values, inconsistency, and errors in the data columns, which hinder building robust machine learning models for data analysis. Since for such massive data sets it is impossible to do the data correction in a manual way, it is very desirable to develop some automatic algorithms which can make corrections and verifications for the individual problems in the big data. In this paper, we develop an artificial intelligence (AI)-based data governance strategy trying to leverage the power of AI algorithms in analyzing big data, patients' clinic profiles. This strategy can be used to predict the missing values or verify if the existing values are correct or what they should be when they are wrong. We develop natural language processing (NLP), traditional machine learning and deep learning techniques for gender prediction and verification as a case study. Although it is only used for patients' gender prediction here, the underlying fundamental principles of this methodology can be applied to the prediction of other kind of missing values and the verification of other kinds of existing values. Also, the task of gender prediction from modeling Internet user behavior profile plays a significant role in targeting and personalized product recommendation in digital advertising of e-Commerce. For

EHR analysis, patients' gender information plays a very important role in referring some useful information. However, in the Chinese EHRs we obtained, the gender information in many cases is either missed or not correct. Even if we can use the patients' Chinese identity (ID) information to extract the gender information, however, for privacy consideration, the ID information is usually hidden and not accessible for data analysis. So, we need to develop an effective solution without using the patients' ID information. We also agree the point that it is possible to guess the patient's gender information with a pretty high accuracy from his/her name without resorting to the sophisticated AI algorithms, but we would like to emphasize that we are developing a general methodology for data governance with AI algorithms to predict all kinds of missing values or verifying all existing values, not only for the specific gender prediction problem. For example, we are using this strategy to predict the category of each patient's individual diseases according to the Chinese national medical coding standard.

Generally, there are four basic components in the data governance system. The first one through information fusion, we need to construct each patient's clinic profile from the heterogeneous and scattered tables of patients' information, symptom description, medical treatment process, inpatient and outpatient records, lab tests, together with the doctor's prescription data according to the domain knowledge of medical informatics. The second one is that we need to extract the relevant information from the clinic profiles according to the data to be governed. This needs the domain knowledge. If the extracted information is the numerical vectors, it can be easily used as the input for machine learning. On the other hand, if the extracted information is the unstructured text data, like that in this case study, we can take them as documents, and use NLP techniques to convert the text data into structured vector representations. The third one is the feature engineering work to represent the extracted information, and the last one is the supervised machine learning with both/either traditional machine learning and/or deep learning algorithms. For using machine learning algorithms to analyze text data, we take the extracted text data as the documents and get each document's vector representation. We have compared 4 different vector representations: the bag of words (BOW) vectors with both TF-IDF weighting and binary representation for tokens, the averaged word embeddings of words in the document pretrained with the word2Vec [2] algorithm, and the document vector obtained with the doc2Vec [3] algorithm. For supervised machine learning algorithms, we have tried the multi-class support vector machine (SVM) [5], one of the most efficient traditional machine learning algorithms for classification, and the convolutional neural networks (CNN) [6, 7] of deep learning. For multi-class SVM, we have tried the 4 different vector representations for documents as the feature vectors, trying to get its best classification performance. Experimental results show that the CNN with inputs of word embeddings works best according to the testing performance based on the quantitative metric of F1-Score. The CNN algorithm outperforms SVM with different document vector representations. To our best knowledge, this is the first work in using NLP and deep learning for data governance for EHR analysis, especially for patient gender prediction from clinic profile.

Our contributions lie in the following aspects:

- We develop AI-based data governance strategy for EHRs. The AI algorithms include NLP, machine learning and deep learning algorithms.
- We construct patients' clinic profiles by using information fusion methodology from heterogeneous tables and records in the EHRs according to the domain knowledge of medical informatics.

- We propose to extract the relevant information to the data columns that needs data governance from the constructed clinic profile, and the data governance problem is converted into the prediction or forecasting problem with AI algorithms.
- The success of this methodology can be applied to the prediction of any other missing values.

The rest of the paper is organized as follows. In Section 2, we discuss data preparation for analysis, relevant data extraction for data governance, and feature vector representations for documents. Section 3 investigates training the SVM modes and CNN model for text classification. In Section 4, we present the experimental results. We conclude the paper with discussions and future work in section 5.

2. DATA PREPARATION AND REPRESENTATIONS

When building the AI-based data governance system, it is very important to define the problem, prepare and represent the data so that AI algorithms can be used to leverage the insights from the big data.

2.1 DATA PREPARATION THROUGH INFORMATION FUSION

The Chinese EHRs used in our projects consist of 179 heterogeneous tables. However, since creating EHRs is still at the beginning stage in China and in most of the time, doctors are more willing to write the paper notes for their patients rather than leave electronic notes in the computer system. So, in the 179 tables, many of them do not have much useful information with the empty columns in the tables. After preprocessing, we get 85 tables, but even in these 85 tables, many records still have missing values and we need to do additional filtering process to remove the useless records. Furthermore, it is impossible to directly use these scattered and heterogeneous 85 tables, so we propose to construct individual clinic profiles from these 85 tables through information fusion process with the domain knowledge of medical informatics. The constructed clinic profiles consist of patients' clinic information about individual office visits or treatments with timestamp, patient's personal information, doctor's information, symptom descriptions, lab tests, doctor's treatment plans, and prescriptions for medications, and so on. Only when the scattered and heterogeneous tables are organized into such meaningful clinic profiles, they are useful for the data analytical tasks.

2.2 PROBLEM DEFINITION FOR GENDER PREDICTION AND VERIFICATION

For any AI-based data governance system, we need to collect data from the database according to the column to be governed. This needs the domain knowledge to figure out which columns have the association with the column to be governed so that we can extract these columns for predicting the column's missing value or verifying if the column's existing value is reasonable or not. For the EHR data set, when the column to be governed is the gender information of the patients, it makes sense to make the prediction and verification from such text data as the patient's symptom description, doctor's treatment plan, lab test result, doctor's prescription for medication, and so on, in each patient's clinical profile. So, we concatenate these text data and take the concatenate text data as a document for analysis using NLP and machine learning algorithms. Our motivation is to make full use of the massive clinic data for AI algorithms to reasonably and accurately predict the patients' gender information.

2.3 VECTOR REPRESENTATIONS FOR DOCUMENTS

When analyzing the Chinese documents with machine learning algorithms, we first tokenize each document into a collection of terms. For this, we use Han LP[1], an open source software, for the Chinese document tokenization. Then we generate a vector representation for each document with different ways, which include the TF-IDF weighting method for tokens, binary representation for tokens, the averaged word embeddings from word2Vec[2] for words in the document, and the doc2Vec [3] for individual documents.

2.3.1 THE BAG OF WORDS (BOW) METHOD

The BOW method makes use of tokenized individual words and/or N-Grams ($N \geq 1$) in a corpus as features for a document's vector representation, which is usually called a feature vector in machine learning and pattern recognition. All N-Grams constitute the vocabulary of the corpus. If N is equal to 1, the N-Grams is called unigram. Usually at most we use bi-Grams or triple-Grams due to the practical considerations. For individual tokens, we usually have both binary representation and TF-IDF weighting representation to get the feature values. The binary representation only considers the presence and absence of individual tokens without counting the number of occurrences of them. If a token is present in the document, the vector's corresponding feature value is 1, otherwise 0. On the other hand, the TF-IDF weighting method takes the product of two statistics, the term frequency and inverse document frequency. The term frequency is simply the number of times that the term t appears in a document d . It assumes that the more frequent a token appears in the document, the more important it is for the topics of the document and it is usually calculated in the following augmented way [4]:

$$tf(t, d) = 0.5 + 0.5 * \frac{f_{t,d}}{\max\{f_{t',d} : t' \in d\}} \quad (1)$$

Where $f_{t,d}$ denotes the frequency of term t in document d . At the same time, the inverse document frequency is calculated in the following way [4]:

$$idf(t, D) = \log\left(\frac{N}{|\{d \in D : t \in d\}| + 1}\right) \quad (2)$$

With

- N the total number of documents in the corpus D , $N = |D|$
- The denominator $|\{d \in D : t \in d\}| + 1$ is the number of documents where the term t appears.

The inverse document frequency is used to offset the impact of common words without having specialty. But the BOW method usually suffers from the following problems:

- Sparsity, most of the documents usually have only a small fraction of the vocabulary, and most of the words in the vocabulary are absent from individual documents, resulting in the term-document matrix with a lot of unwanted zeros.
- Does not take the word order information into account and only considers the occurrence of a word independent of the others, which is not true from both semantic and syntactic point of view. So, documents with different semantic meanings may be taken to be similar only if they contain the same words.

- High dimensionality. Corpora generally have at least thousands of words (features). In addition to this, if the 2-grams and 3-grams are included, the number of features per document increases significantly. It could generate an even more sparse term-document matrix leading to insufficient RAM problem when we try to hold the entire matrix into the RAM. Not all features are important and modeling the data with such features needs a huge number of annotated samples for training, and it tends to lead to the overfitting problem for supervised learning when no sufficient annotated samples are provided. The high dimensionality of data challenges very much supervised machine learning algorithms for the curse of dimensionality, and in most of the time, we need to do dimensionality reduction for the BOW vector representations. But it is very critical in dimensionality reduction to preserve the structural information of the data.

2.3.2 WORD2VEC

The BOW-based vector representation is not efficient to capture the semantic information from documents with the limitations of high dimensionality and sparsity. Researchers have proposed different methods to represent documents and words in an embedded low-dimensional continuous vector space and the word2Vec [2] generates the state-of-the-art results. The Word2vec algorithmis such a distributed representation learning algorithm to extract both semantic and syntactic information for individual words in a sentence. It consists of a bunch of related models that are used to produce the distributed representation of word embeddings. These models are the continuous bag-of-words (CBOW) and the skip-gram as shown in Figure 1. The CBOW model predicts the current word from its surrounding context words within a window centered at the current word, while the skip-gram model predicts the surrounding context words within a window for this current word. The Word2vec model is an unsupervised learning algorithm which can be trained with the hierarchical softmax and/or negative sampling method to reduce the computational complexity and make the learning process practical.In the hierarchical softmax method, a binary Huffman treeis constructed for the terms in a corpus according to their frequencies to reduce the computational complexity in updating the vectors of the terms. The benefits of using the Huffman tree is that all words in the dictionary are the leaf nodes in the tree, and high frequency words have short paths from the root of the tree to such leaf nodes and low frequency words have long paths. In the iterative backpropagation process, for updating each word's vector, we do not need to update the vectors of all other words in the vocabulary, but only need to update the vectors of the nodes in the path from the root of the tree to the leaf node in the tree. If the word is a frequent word, its corresponding path is short and the further reduction of the computational complexity is accomplished. On the other hand, for the negative sampling method, it accomplishes this goal and improves the vector quality of low-frequency words byonly sampling a few negative samples from the vocabulary for updating their vectors. For this end,in the negative sampling method, the high-frequency words are down-sampled and the low-frequency words are up-sampled by lifting the low-frequencies.

These models are the two-layer shallow neural networks. Word2vec takes as its inputs the highdimensional one-hot vectors of the words in the corpus and produces a vector space of several hundred dimensionswhich are much smaller than the size of the vocabulary, such that each unique word in the corpus is represented by a continuous dense vector in the embedded vector space. A very salient feature of this kind of vector representation with the word embeddings is that word vectors are such points in the vector space that for semantically similar words, their vectors are close to each other. This offers great benefits that we can infer the semantically similar words from the vector space. However, the word embeddings still have a

limitation for representing documents. The usual way of using the word vectors is to take the averaged word embeddings of words in a document for document classification, but for most of the documents composed of syntactic sentences, this kind of averaging operation will introduce noise to the average result, making it deviate from the actual topic of the document.

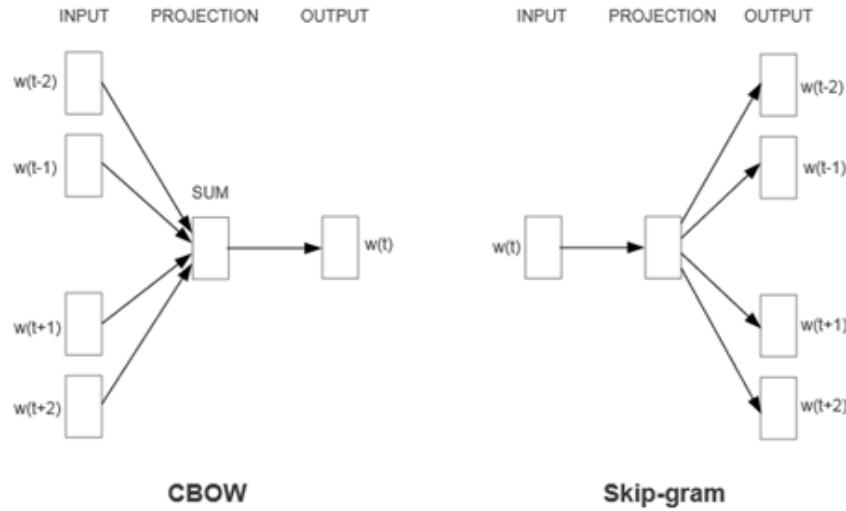


Figure 1. The illustration of CBOW and Skip-gram models in Word2Vec with courtesy of Mikolov etc. [2]

2.3.3 DOC2VEC

The Doc2Vec algorithm [3] is an extension of Word2Vec for representing a document or a paragraph with a single unique real-valued dense vector learned together with the process of generating the vectors for individual words in the corpus. This is accomplished by assigning a unique document tag to each document, and the vector of this added document tag is learned together with all other words in the same document. When the learning process is done, the vector of the document tag is obtained and it is used for document analysis. Also, this model can be used to infer the document vectors for new documents. Just like word vectors generated by word2Vec, which provide semantic inference for individual words, a document vector generated by doc2Vec as shown in Figure 2, can be thought of reflecting some semantic and topic information of the document. As a result, the document vectors of similar documents tend to be close to each other in the vector space and they are very useful for document classification or clustering analysis.

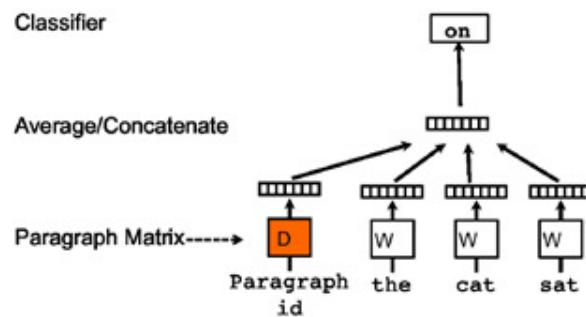


Figure 2. A framework for learning paragraph vector with courtesy of Quoc Le, etc. [3]

3. TRAIN MACHINE LEARNING MODELS

We train both traditional machine learning models and deep learning modelsto analyze patients' clinical profilesto see which one works better for gender prediction and verification. In the EHRs, many patients' clinical profilesdo not have clear gender implications, it is very hard to predict the patients to be male or female. As a result, we add one more class of "unknown" in addition to the two classes of "male" and "female", forming a 3-class classification problem.

3.1 TRAINING THE MULTI-CLASS SVMCLASSIFIER FOR TEXT CLASSIFICATION

The traditional machine learning algorithm of multi-class SVM [5] is trained as the baseline model. Although SVM belongs to the traditional machine learning models, it is very different from many of the other models like artificial neural network, decision tree, and Bayesian models for which the goal is to minimize the empirical learning risk, represented by the sum of the mean squared errors of the training samples with respect to their predicted values by the corresponding model. But for SVM [5], its goal is to minimize the structural risk by maximizing the margin between the two classes of the training samples. Minimizing the empirical learning risk does not have the guarantee for the model to generalize well to the unseen samples, but as shown in Figure 3, minimizing the structural risk by maximizing the margin between the two classes has the guarantee for SVM to generalize well tothe unseen samples, and this is what we are pursuing in training machine learning models.

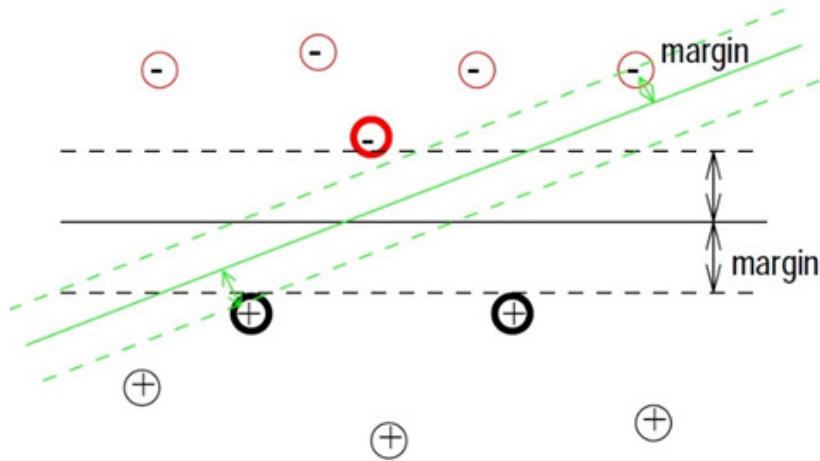


Figure 3. The illustration of the maximum margin for SVM

When training machine learning models, we not only want our model to work well on the training data, but also, we want the model to work well on the unseen data in the future. The SVM model matches our goal totrain machine learning models. In Figure 3, we have two classes of samples denoted by empty red circles, and black circles, respectively, for classification and there are two possible margins for the hyperplane to be placed to separate the two classes of samples. One hyperplaneis labeled with the green color and the other is labeled with the black color. We can clearly see that the black hyperplane can generalize better than the green one because it has a wider margin. To train the SVM model, its input feature vectors of documents are from either doc2Vec [3], or the averaged word embeddings of all words in the document with word2Vec [2], or the TF-IDF vectors, or the binary vectors of tokens, respectively. Furthermore, in our experiment,only linear SVM is used and no kernel SVM is used for the fact that the

dimensionality of the feature vector is already high. For the implementation of the multi-class SVM, we use the Python tool of Scikit-learn, which is a free software of machine learning library in Python programming language. We use the grid search method to optimize the hyperparameters of SVM.

3.2 TRAINING THE CNN MODEL FOR TEXT CLASSIFICATION

CNN is one of the deep learning algorithms and it integrates the automatic feature extraction and feature selection together with pattern classification in a single architecture. It has been widely used for text classification [6] and computer vision [7]. As outlined by Figure 4, for both computer vision and text classification, different channels of the data can be used as inputs of the CNN architecture for convolutional feature extraction. For computer vision and image recognition applications, the R, G, B colors of an image can be the inputs of the CNN. For text classification, the CNN usually takes as inputs the matrix of the word embeddings of the sentence by stacking the words' vectors according to the order of the words in the sentence. The embeddings can be either from word2Vec, one-hot representation or other vector representations of words in a sentence, forming different channels of representation for the text data. With the CNN architecture, each channel of the texts can be represented as a matrix, in which, the rows represent the sequence of tokens or words in a sentence, and each row is a word's embedding vector. The matrix is convolved with some filters of different sizes such as 3, 4, 5, but with the same dimension as the words' embedding vectors.

The main idea of CNN for text classification with different sizes of filters is to extract the semantic features of N-Grams by the filters. The different filter sizes correspond to different numbers of the N in N-Grams. The words' vectors can be either from the pre-trained word embeddings such as those of word2Vec from large corpus, or randomly initialized. For the latter case, the word vectors are iteratively updated in the backpropagation process in the training stage until the model is learned. After the CNN is trained, the word vectors become the side effects of the CNN and this is another way of representation learning. Let's assume the filter size is m , sentence length is l , dimensionality of word embeddings is d , then the sentence matrix $x \in R^{l \times d}$ and the filter can be represented as a matrix $w \in R^{m \times d}$. During the convolution process, each of the filters gradually moves down one word at a time along the sequence of words. At each position, the filter covers a portion of the words' vector matrix, i.e., m words' vectors in the matrix, and the pointwise multiplication of the filter with the covered vector matrix is taken, and the multiplication results are summed up. This sum is then taken by the rectified linear unit (Relu) activation function together with a biased term $b \in R$ to generate a feature value mathematically represented in the following formula:

$$c_i = f(w \cdot x_{i:i+m-1} + b) \quad (3)$$

where the dot operation between matrix w and x is the element-wise multiplication operation. After the convolution process is done for one filter, a list of feature values is obtained like $c = [c_1, c_2, c_3, \dots, c_{l-m+1}]$, which is regarded as the feature map of the filter. Finally, the max-pooling operation continues to take the maximum value from the feature map as the feature value of the filter's convolutional result with the sentence. When all filters are applied for convolution with the sentence's vector matrix, we can get a list of feature values as the feature vector representation for the input sentence data. This feature extraction process with the max-pooling operation makes the length of the final feature vector independent of the input sentence length and the filter sizes. The length of the final feature vector is only dependent on the number of

filters used for convolution. The final step in the CNN architecture is a full connection including the dropout strategy, regularization, and the Relu activation function from the final feature vector to the output layer. This full connection layer is fundamentally like the conventional neural network. The classification result of a sample is obtained by the softmax function applied to the output layer for multi-class classification. The number of neurons in the output layer depends on the number of classes for the output.

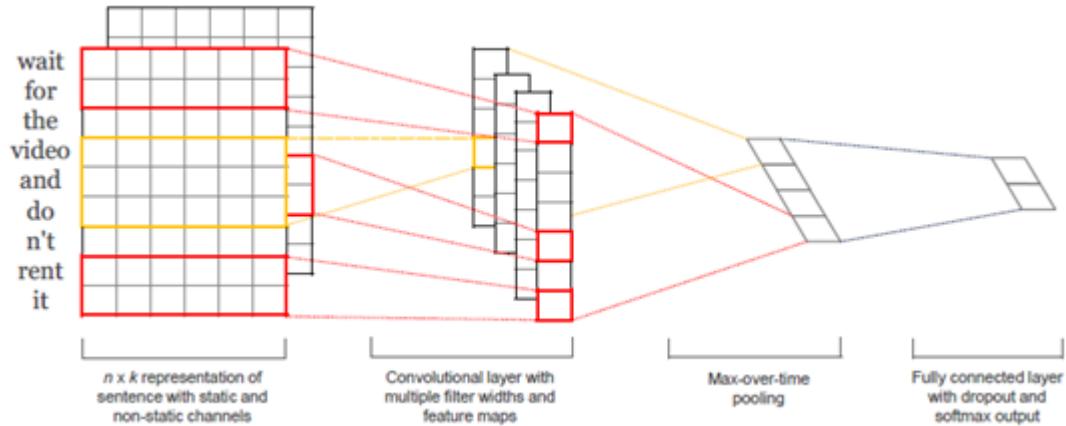


Figure 4. The CNN architecture for text classification with courtesy of Yoon Kim [6].

The CNN is used for a 3-class classification problem. The Tensorflow's Python implementation of the CNN is used in this work. The inputs of the words' vectors for the CNN are the pretrained word embeddings of word2Vec. We use 100 filters for each filter size for feature extraction in the convolutional process. The corpus for training the word2Vec algorithm to get the word embeddings is obtained from the crawled Chinese medical documents. For the hyperparameters of CNN, through grid search, we set batch size 20, epochs size 40, the dimension of word embeddings 200, dropout 0.5, and l_2 -norm is used as the regularization. Additionally, a threshold is set 3 for clipping the gradient magnitude.

4. EXPERIMENTAL RESULTS AND ANALYSIS

In the experiment, we compare CNN with SVM, one of the most popular traditional machine learning algorithms. Also, 4 different vector representations for documents are used as the input feature vectors for SVM. When obtaining the pre-trained word vectors with word2Vec, we have tried 4 models:

- CBOW + hierarchical softmax,
- CBOW + negative sampling,
- Skip-Gram +hierarchical softmax, and
- Skip-Gram + negative sampling.

For our dataset, the CBOW+negative sampling works best and it is selected to generate the word embeddings for CNN's inputs, and the averaged word embeddings for the SVM. In this paper, the quantitative metrics used for measuring the performance of the models are the precision (accuracy), recall, and F1-score and they are calculated in the following way [8]:

$$\text{Precision} = \frac{tp}{tp+fp} \quad (4)$$

$$\text{Recall} = \frac{tp}{tp+fn} \quad (5)$$

$$F_1\text{-score} = 2 \cdot \frac{\text{precision} \cdot \text{recall}}{\text{precision} + \text{recall}} \quad (6)$$

Where tp denotes true positives, fp denotes false positives, and fn denotes false negatives. The prediction results of CNN with word embeddings as inputs are listed in Table 1.

For training the SVM model, we have compared the binary BOW vector with the TF-IDF BOW vector. However, it is found out that the performance of SVM with the TF-IDF vector representation is far below that with the binary BOW vector representation, so its result is not listed in Table 2 and only the binary vector representation is used as the method of BOW vectors. Our analysis figures out that the vector representation based on TF-IDF weighting method calculated with formula (1) and (2) is suitable for long documents with many words because it introduces some additional “smoothing” effect, but for our short documents, the binary vector representation makes more sense to represent them. The experimental results with comparative studies show that the CNN works best and it outperforms the SVM model with different feature vectors for document representation. We think this is mainly for the following reasons. The vector representation of a document with the doc2Vec is trying to summarize the document’s topic, but for our documents, it cannot extract very much topic information because the documents are very short and they are composed of only a list of words about the symptoms of the disease from different aspects without containing any syntactic information. The fact that the averaged word embeddings of word2Vec accomplishes better performance than the doc2Vec for SVM, is that the words in each document are related to each other about the disease, and to some extension, they can be regarded as the synonyms of each other in our EHR corpus, and their vector representations in the embedded vector space are close to each other. As a result, when each of our documents does not have any syntactic information and is only composed of such words, the averaged vector of these words’ vectors will still be close to the vectors of these words and it can be roughly taken to be the “center” of these words’ vectors. So, for our documents, the averaged word embeddings represents each document better than the document vector obtained with the doc2Vec algorithm. But since we still do not have very sufficient data to train the word2Vec algorithm for generating high-quality word embeddings, its performance with SVM is still lower than that of SVM with the binary BOW vector. It is reported that for generating the high-quality word embeddings with word2Vec [2], a very huge corpus of 100 billion words from Google news is used for training, so, their obtained word vectors can sufficiently capture the semantic information of words. Furthermore, for the deep learning structure CNN, it further extracts effective features from the input word embeddings for classification by using different sizes of filters to extract the N-Grams semantic information in the texts, nonlinear activation functions, max-pooling operations, dropout sampling for preventing the correlations in features, and an additional learning layer through the full connection with the output layer. As a result, even if the deep learning architecture in this paper is only the shallow CNN, it could accomplish the best performance among all these models. But for the multi-class SVM with different document’s vector representations as inputs, it simply takes what is provided as the feature vector for learning, and there is no additional feature engineering work as done in CNN to re-extract and re-select the most effective features from the input features for classification.

Table 1. The prediction results of CNN with word embeddings as inputs.

Input Vectors	F1-Score	Accuracy	Recall
Word2Vec	0.96	0.94	0.97

Table 2. The prediction results of SVM with different feature vectors for document representation.

Input Vector(s)	F1-Score	Accuracy	Recall
Binary BOW	0.93	0.97	0.90
Avg. Word2Vec	0.91	0.97	0.86
Doc2Vec	0.66	0.60	0.74

5. CONCLUSION AND FUTURE WORK

In this paper, we develop an AI-based data governance strategy for the Chinese EHR analysis and demonstrate its effectiveness in gender prediction. Two kinds of machine learning algorithms are investigated. They are the traditional machine learning algorithm SVM and the deep learning algorithm CNN. Four kinds of vector representations are investigated for document's vector representation for the multi-class SVM and the word embeddings from word2Vec are used for CNN. From our experimental results, the deep learning CNN algorithm outperforms the state-of-the-art traditional machine learning algorithm SVM. This general AI-based data governance strategy can be used to any data prediction and verification problem to improve the data quality to leverage great insights from the big data. In the next step, we will continue to investigate the deep learning classification algorithm by either adding more layers of convolutions into the current shallow CNN structure or using other deep learning architectures such as the LSTM for document representation. Also, we hope to be able to get more data from the hospitals to completely demonstrate the power of AI in big EHR analysis.

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