

# Use Cases for Imperfect Knowledge in Health Informatics

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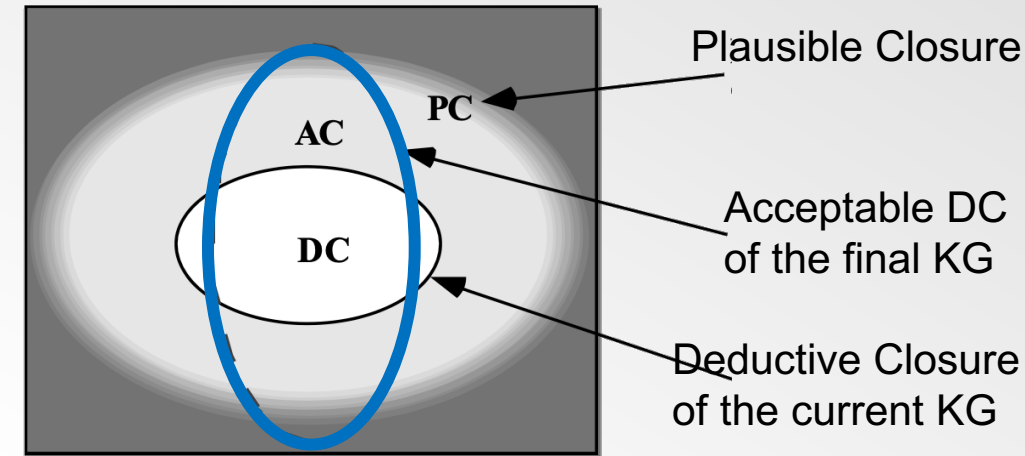
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# Use case: Expanding Closure of Medical KG

- Expand Closure of Medical Knowledge Graphs (KG) [1]

- *Plausible inferencing*: does not guarantee correctness
  - Probabilistic, abductive, inductive, analogical, ..
- Expanding *deductive closure* to *acceptable closure*
  - Knowledge is partially incomplete & incorrect



- Multi-Strategy Semantic Inferencing [2]

- Based on Multi-Strategy, Tutor-based Learning (Tecuci [1])
- **Justification Trees** are presented as answer to a query
  - Integrate deductive closure with plausible inferences for answer
- Explain supporting (plausible) inferences to domain expert
- Tutor paradigm: create AC by generalizing trees & validation by tutor

# Explanation-based generalization

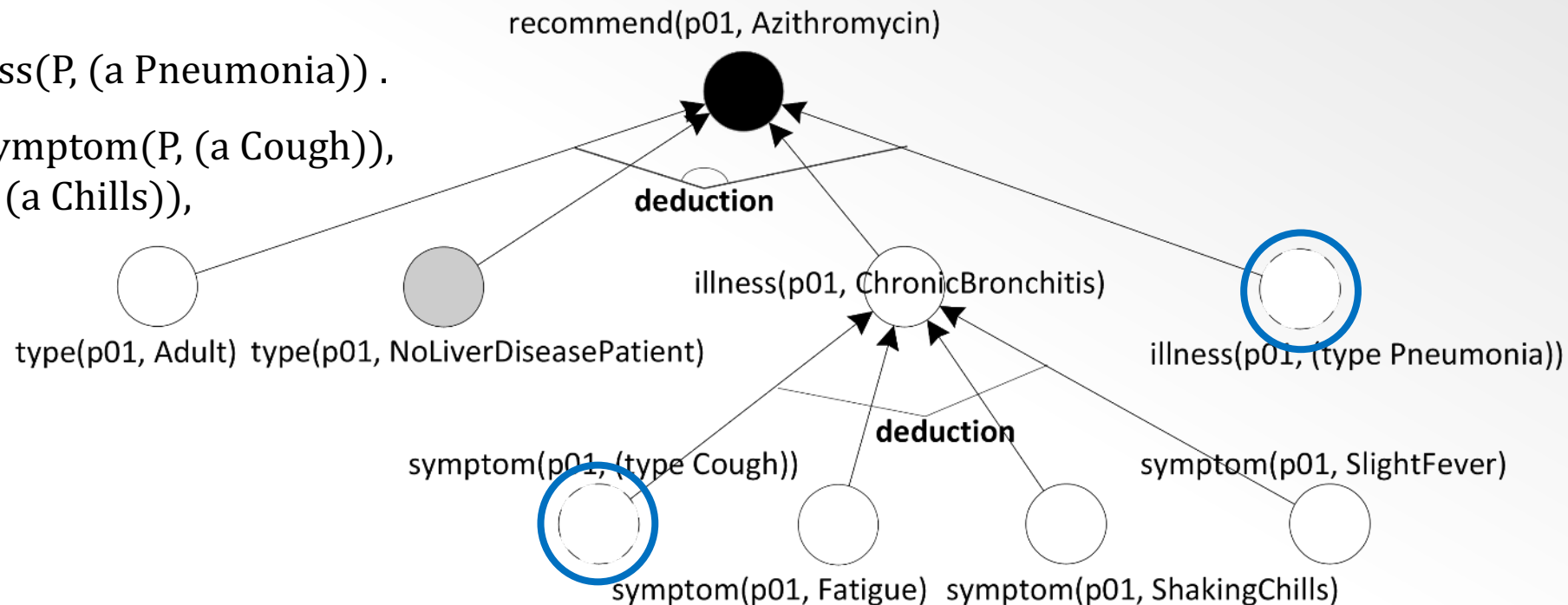
- Step 1: generate deductive justification for queries
  - Implemented via *backward chaining*

Query: **recommend(p01, Azithromycin)**

Initial Justification Tree:

recommend(P, Azithromycin) : – type(P, Adult),  
type(P, NoLiverDisease),  
illness(P, ChronicBronchitis), illness(P, (a Pneumonia)) .

illness(P, ChronicBronchitis) : – symptom(P, (a Cough)),  
symptom(P, Fatigue), symptom(P, (a Chills)),  
symptom(P, SlightFever) .



# Analogy-based Reasoning

- Two entities similar in one aspect, are **likely** similar in another
  - Transfer knowledge from *well-known* entity to *lesser-known* one
- Plausible analogical rules:

`illness(P, (type Pneumonia)) :~ type(P, ReducedImmunityPatient), symptom(P, (type ShortnessOfBreath)),  
symptom(P, (type Fever)), symptom(P, ShakingChills)`

I.e., **if** two patients have *reduced immunity*, share a particular kind of *shortness of breath* & *fever*, and have *shaking chills* **then** they will likely share the same kind of *pneumonia*

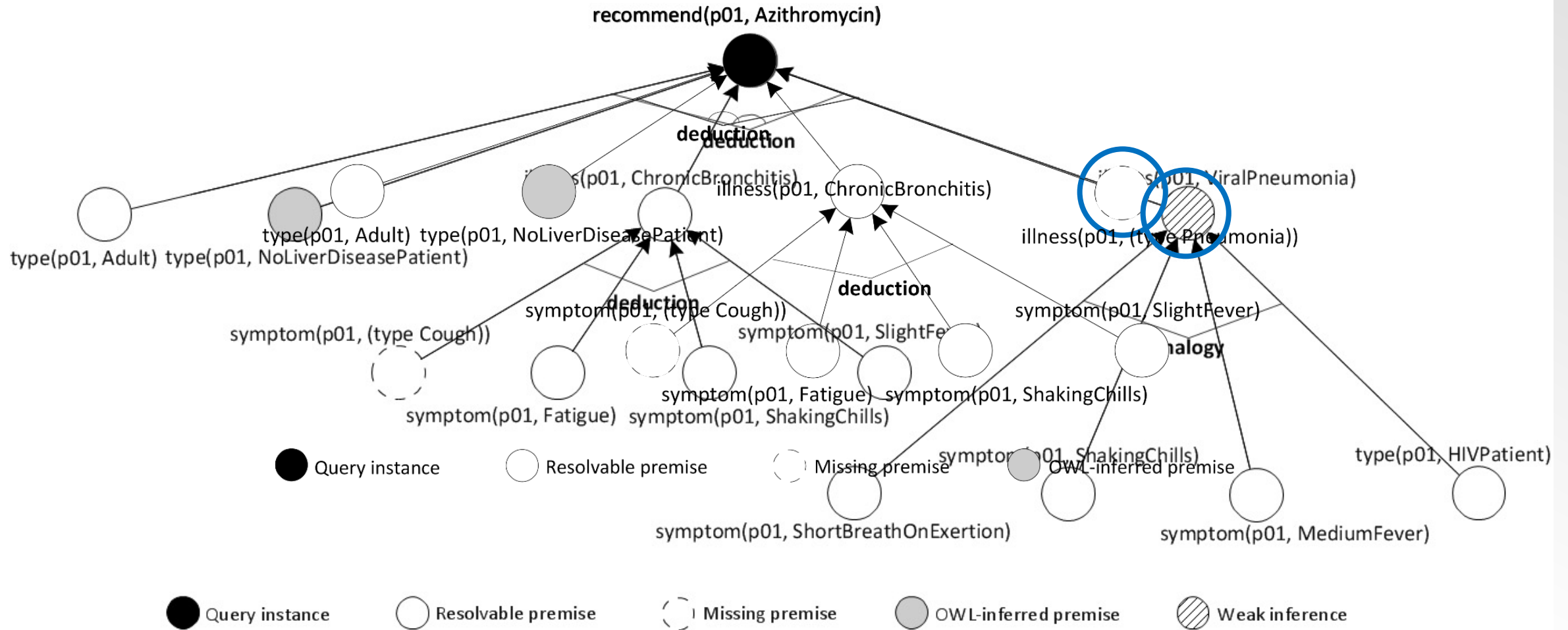
**cds:p07** `rdf:type cds:OrganTransplantPatient ; cds:symptom cds:ShortBreathOnExertion;`

`cds:symptom cds:MediumFever ; cds:symptom cds:ShakingChills ; cds:illness cds:ViralPneumonia`

**cds:p01** `rdf:type cds:HIVPatient ; cds:symptom cds:ShortBreathOnExertion;`

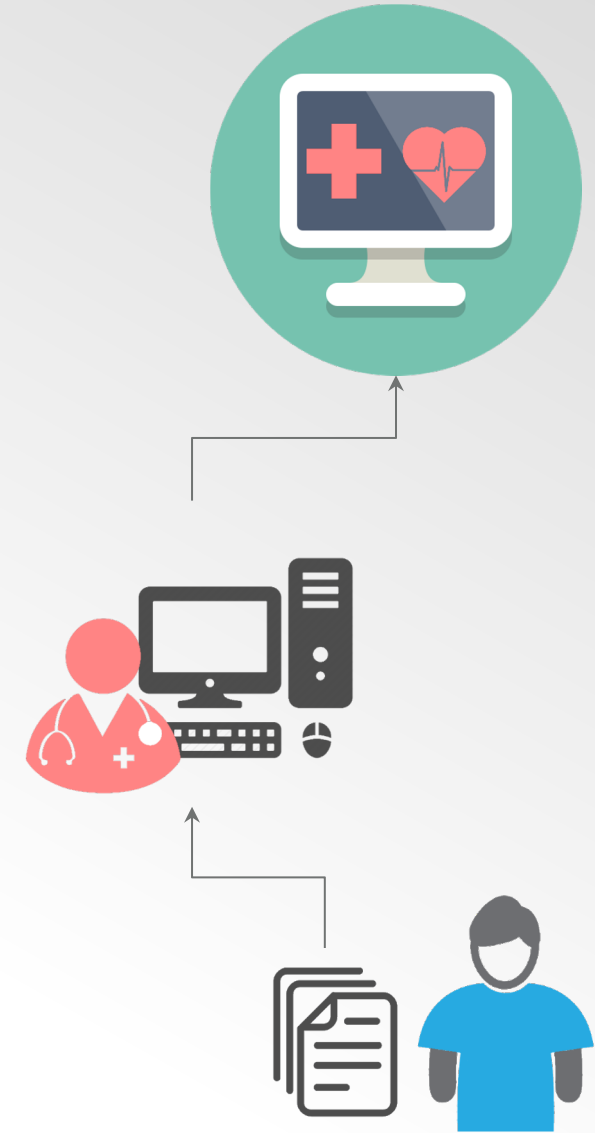
`cds:symptom cds:MediumFever ; cds:symptom cds:ShakingChills → cds:symptom cds:ViralPneumonia`

# Plausible Justification Tree



# Use Case: Plausibly Infer Missing EMR Data

- EMR often show incomplete picture
  - Fragmented and disconnected EMR [3]
    - Different vendors: Telus, QHR, Nightingale, Practimax, Accuro, ..
  - Data input problem from clinician end [3]
    - Hugely increased workloads and burnout using EMR
- Varian Aria Oncology Information System
  - Missing causal associations between diagnoses, treatments
    - It was possible to enter this data in UI but not mandatory (mostly missing)
  - No training data for ML methods
- Use plausible reasoning over medical KG [4]
  - Leverage medical taxonomies (SNOMED-CT, ICD)
  - Plausibly infer causal relations between diagnoses, treatment



# Extract-Transform-Load (ETL) pipeline

- **Transform:** EMR data → EMR KG

- ❑ *Oncology EMR*: OIS ontology linked to taxonomies (ICD, SNOMED)

- Transform free-text into KG terms (e.g., NLP)

- ❑ *Oncology EMR*: free-text treatment sites

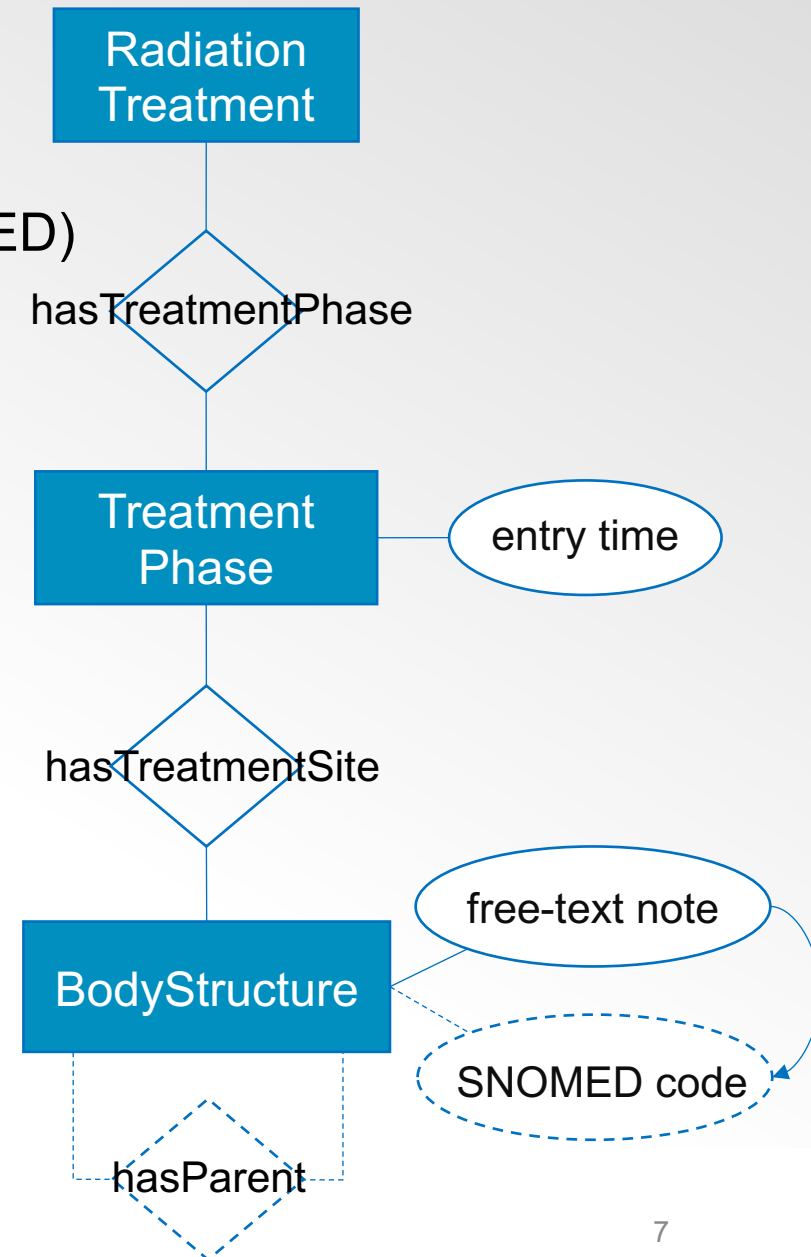
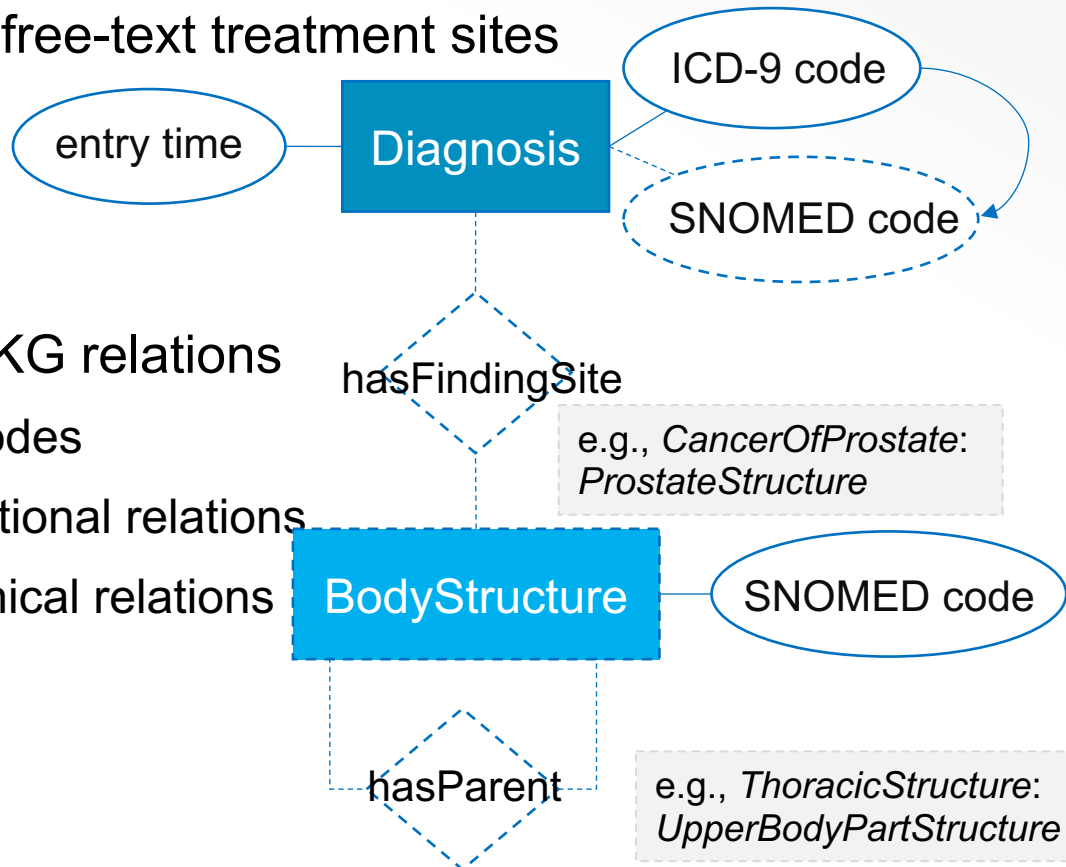
- Enrich with medical KG relations

- Map terminology codes

- Enrich with associational relations

- Enrich with hierarchical relations

→ **SNOMED-CT**





# Plausible Metrics for Causal Associations

- Plausible inference pattern based on semantic similarity

- If some *related concepts* are similar, then *target concepts* are causally related

- Identify related EMR concepts for similarity analysis

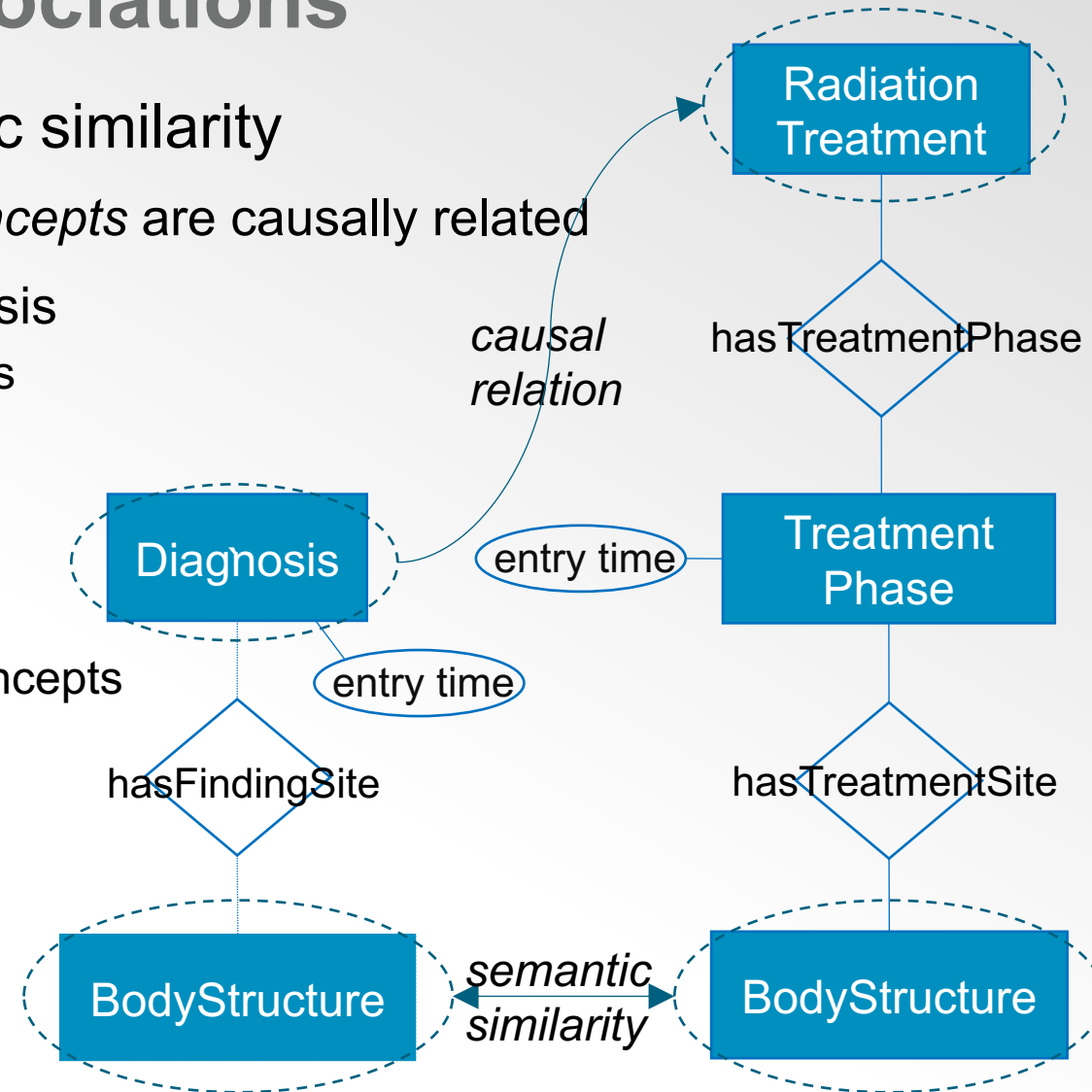
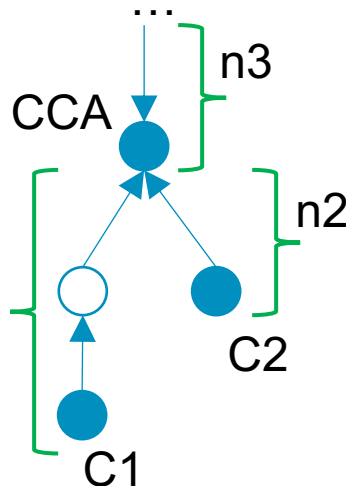
- In EMR KG, concepts have associated body structures

- Apply semantic similarity on related concepts

- Wu-Palmer [5]:  $2 \times n_3 / (n_1 + n_2 + (2 \times n_3))$

- ❖ CD = distance between two concepts and their CCA

- ❖ Same CD for lower concepts is better than higher concepts





# Conclusions

- Two HI use cases for plausible reasoning
  - PhD project: use justification trees to integrate deductive & plausible reasoning
    - Explaining to domain expert why system offers certain answers
  - Industry project: leverage EMR KG & plausible reasoning to solve problem
    - No large-scale dataset available for statistical analysis
- See references for more on these use cases

# Demo: Multi-Strategy Inferencing

# References

- [1] **Multi-Strategy Semantic Web Reasoning for Medical Knowledge Bases.** Van Woensel, W., Mohammadhassanzadeh, H., Abidi, S.R., Abidi, S.S.R.. In: International Workshop on Biomedical Data Mining, Modeling, and Semantic Integration (BDM2I2015). pp. 1–12. CEUR-WS.org, Bethlehem, Pennsylvania (2015).
- [2] **Plausible Justification Trees: A Framework for Deep and Dynamic Integration of Learning Strategies.** Tecuci, G. In: Mach. Learn. 11, 237–261 (1993).
- [3] **A Crisis in Healthcare: A Call to Action on Physician Burnout.** A. K. Jha, A. R. Iliff, et al. In: Massachusetts Medical Society, Massachusetts Health and Hospital Association, Harvard T.H. Chan School of Public Health, and Harvard Global Health Institute.
- [4] **Using Knowledge Graphs to Plausibly Infer Missing Associations in EMR Data.** Van Woensel, W., Rajaratnam, M., Gupta, V., Armstrong, C., Abidi, S.S.R.: In: 31st European Medical Informatics Conference (2021)
- [5] **Verbs semantics and lexical selection.** Wu, Z., Palmer, M. In: 32nd annual meeting on Association for Computational Linguistics. pp. 133–138. Association for Computational Linguistics (1994).