



Clinical Free Text to HPO Codes

Gabrielle Stinton









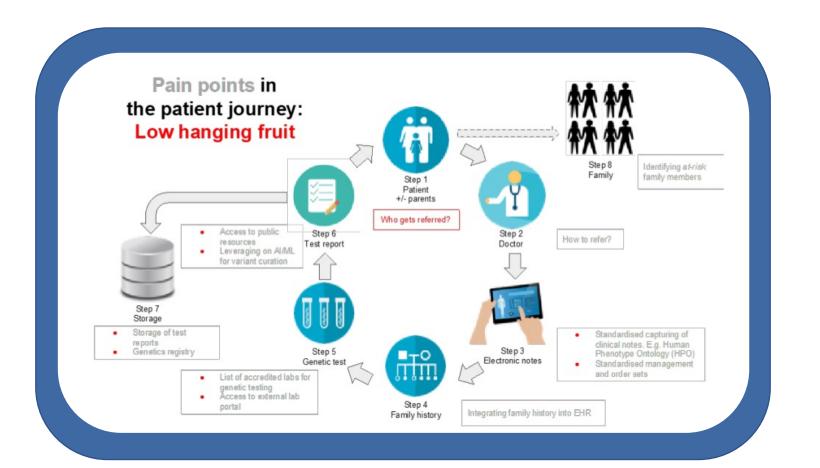
Problem Statement

Rare disease odyssey

Decreasing diagnosis time, increasing diagnosis rates

Clinical Notes

Standardized capturing of clinical notes into a genomic appropriate format e.g., Human Phenotype Ontology (HPO)



Current Methodology



Phenotypes

Global Developmental Delay Hypotonia Cryptorchidism Seizures



HPO Codes

HP:0001263 Global Developmental Delay HP:0001290 Generalized Hypotonia HP:000028 Cryptorchidism HP:0001250 Seizures

Artificial Intelligence (AI)

Data

Data Security

Access was organized by Dr Saumya, with reports de-identified before use

Data Understanding

Average report length ~812 characters with phenotypes scattered in free text

33y woman Medical history: 1. ?Febrile seizure at 4-5y (at TTSH)
2. Right duplex kidney (diagnosed at 13 years old on US kidney due to investigation for abdominal pain and UTI) Chronic tonsillitis s/p tonsillectomy 2011
 Rheumatoid Arthritis f/u pte rheum doctor, diagnosed in 2 years 7 months old Referred by DCD Antenatal history osed incidentally Birth history Full term Em LSCS for poor progress BW 3.05 kg, length 47 cm, HC 34 cm n done detected Medical / Surgical History - short stature- started around 2yrs ago, prior nalysis: nt identified to that between 3-10th centile mother's height 158cm, dad is 165cm - developmental delay- on f/u DCD A 39y - has 12y boy chologist for dyslexia. 36yr old Indian male Suspected porphyria - for consideration for sequencing for cryptic mutation Clinic for ?ADHD. Attended result disclosure with mother Stress has reduced significantly as he has sold his home and businesses and relocating to the X Currently staying with parents Back pain improved significantly since Still gets stomach cramps and vomiting Improves and feels better with Hemin Just had Hemin infusion on Monday 25/04

Challenges, Assumptions, and Limitations

Free Text:

Synonyms, negation, abbreviations, overlapping concepts, numerical values, etc..

E.g., Hypotension (HP:0002615) can be expressed as "drop in blood pressure" and "BP of 79/48"

Sparse Multi-Class Classification Problem:

There are > 13000 different HPO terms that need to be classified

Lack of a large public dataset:

Need large amounts of manually HPO annotated clinical free text to train an ML/DL model

Limited data:

Not able to accrue large amounts of data to train a model from scratch ⇒ pretrained models.

Literature Review

Approach	Tools/Models	Semantic and Syntactic Meaning	Computational Efficiency
Dictionary-based	National Centre for Biomedical Ontology (NCBO) annotator	×	Very high
	> Monarch Initiative Program	×	Very high
	> Cliniphen	×	Very high
	 Open Biological and Biomedical Ontologies (OBO) annotator 	×	Very high
Machine Learning (ML)/	> Neural Concept Recognizer (NCR) [1]	~	Medium
Deep Learning (DL)	> Phenotagger [2]	~	Low
	> PhenoBERT [3]	~	High

Ideation

Key Considerations:

Medical use case means greater consideration on workflow integration

- > Handling model mistakes
- > Responsibility still with the clinician: human-in-the-loop

Pre-trained model + human-in-the-loop

Web Application

A web app built in Streamlit that leverages the two current top performing models:

PhenoBERT and Phenotagger

Clinical Free Text to HPO Codes (Web App)

Phenotagger Web Application

Based on Phenotagger web app (site is currently down)

Customizations



comparison of annotation results with the current state-of-the-art (SOTA) model PhenoBERT



> user selection of identified HPO codes and relevance categories



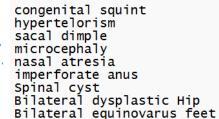
 a search bar for users to enter phenotypes that the models may have missed which uses the Human Phenotype Ontology API [4]

Example CDS Case - Manual

```
6 years old girl accompanied by mother and father
Attending EIPIC
Motor development:
Still walking by herself, within 3 to 4 meter, stable
Speech development:
- will shout for help to get attention.
- Will pull parents hand to point to things she wants through communication.
  ARM rectovestibular - (3 stage repair because of IUGR and cardiac lesion)
- Underwent sigmoid colostomy, PSARP and stoma closure
2) Caudal regression/spinal lipoma operated - 14/11/2011
    Neurogenic constipation on customised enema regimen
4) Dysmorphism / term IUGR / global developmental delay
- Attends EIPIC
- CMA done - Normal
- Planned for WES research
5) Small muscular VSD, small ASD / PFO
- last 2DE Sept 2013
- Bedside 2DE 2017: Small anterior muscular VSD 3mm, left to right flow,
unable to visualize ASD due to gaseous abdomen

6) Bilateral dysplastic hips (resolved) and equinovarus feet (AFOs)
Alert, comfortable, active
Heart S1S2
Lungs clear
Abdomen soft
congenital quint
hypertelorism
sacal dimple
microcephalv
nasal atresia
imperforate anus (s/p repair)
Spinal cyst
Investigation done:
CMA done - Normal
```

Phenotypes



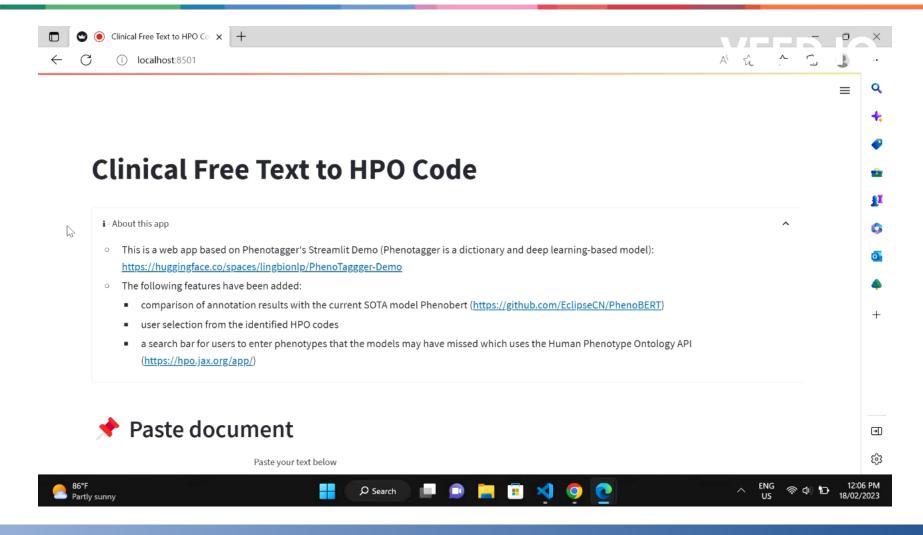




HPO Codes

HP:0000487 Congenital strabismus
HP:0000316 Hypertelorism
HP:0000960 Sacral dimple
HP:0000252 Microcephaly
HP:0010644 Midnasal stenosis
HP:0002023 Anal atresia
HP:0030726 Spinal neurenteric cyst
HP:0001385 Hip dysplasia
HP:0001762 Talipes equinovarus

Example CDS Case - Web App



Web App – Limitations

Abbreviations

Negation

CDS52501

CDS56101

GDD - especially speech

no scoliosis

Misidentification

CDS52801



Detection Failures

CDS53801

Argininosuccinate Lyase Deficiency.

HP:0025630 Argininosuccinic aciduria

Case Study - ChatGPT

An advanced conversational chatbot developed by OpenAI and released on Nov 22 [5]

Web App – Example Case 1

Telehealth on 9th June 2022 1pm (both parents)

Started off conversation wth father Mother joined at 1:07

According to father: Resting better at home Took alot of adjustments to get back to her routines

- Have been monitoring HR, improving, baseline now ~100bpm
- BP improved
- CIC minimal
- · R hand strength improved
- · Coordination improving
- · Still needs some assistance with walking still wobbly

Have not seen psychiatrist Parents keen on cutting back some medications

Discussed about mitochonchondrial disorders - for this particular condition, a higher percentage of heteroplasmy is associated with a probability of being affected However the percentage is not a reflection of disease severity

To continue cardiac monitoring To continue monitoring eyes - possibility of developing retinitis pigmentosa For respi followup, spirometry planned with Dr X

Father enquired if monitoring is for intervention

- · for cardiac monitoring, there are medications that can be helpful, if required
- · for eye, more for monitoring the development of RP. at this time, there are no drug therapies

Menarche April 2021 Weakness noted Dec 2021 Ptosis noted Jan 2022

X is likely considered within the mild to moderate range

Phenobert Results

HPO_id	Given Term	Official Term
HP:0000510	developing retinitis pigmentosa	rod-cone dystrophy
HP:0000508	ptosis	ptosis

Phenotagger Results

HPO_id	Given Term	Official Term
HP:0000510	retinitis pigmentosa	rod - cone dystrophy
HP:0025406	Weakness	asthenia
HP:0000508	Ptosis	ptosis

ChatGPT - Example Case 1

G annotate hpo codes from phenotypes and indicate what text is associated with each hpo

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X is likely considered within the mild to moderate range



- * HP:0000855 Abnormality of blood pressure "BP improved"
- * HP:0003324 Cerebellar ataxia "Still needs some assistance with walking still wobbly"
- * HP:0001290 Hypertonia "R hand strength improved"
- HP:0000962 Ptosis "Ptosis noted Jan 2022"
- HP:0003011 Weakness "Weakness noted Dec 2021"
- * HP:0012637 Abnormality of cardiac function "To continue cardiac monitoring"
- HP:0000486 Visual impairment "To continue monitoring eyes possibility of developing retinitis pigmentosa"
- HP:0011017 Mitochondrial inheritance "Discussed about mitochondrial disorders for this particular condition, a higher percentage of heteroplasmy is associated with a probability of being affected."
- HP:0001607 Respiratory insufficiency "For respi followup, spirometry planned with Dr"

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ChatGPT – Example Case 2

annotate hpo codes from phenotypes and indicate what text is associated with each hpo code:

5 years old boy

Has been well

Attending EIPIC in the afternoons, preschool in the morning - coping well Parent reports that there is improvement but feels that he is not ready for P1 X is on follow up at NUH CDU

On follow up with KKH Cardiology for turbulance in branch PAs On follow up with KKH ENT for bilateral OME and ?high freq HL but mild

Development:

Climbs stairs, with support
Able to jump and hop
Recognises A to Z
Knows color
Speak in short sentences
Able to feed self

Toilet training - still wear diaper at school

O/E:

alert, comfortable, active brachycephaly no ridging of sutures Heart S1S2 ESM Lungs clear Abdomen soft 1. 🛭

HPO code: HP:0000252

Text: Parent reports that X is not ready for P1

HPO code: HP:0001635

Text: Follow-up with KKH Cardiology for turbulence in branch PAs

HPO code: HP:0000380

Text: Bilateral OME (Otitis Media with Effusion)

HPO code: HP:0002618

Text: Mild high-frequency hearing loss

HPO code: HP:0003124

Text: Climbs stairs with support

HPO code: HP:0001638

Text: Able to jump and hop

HPO code: HP:0002011

Text: Able to feed self

* HPO code: HP: toilet training

Text: Still wears diaper at school

2. 🛚

(Sp)

HPO codes:

- Brachycephaly (HP:0000248)
- Abnormal heart sound (HP:0001622)
- Clear lungs (HP:0012827)
- * Soft abdomen (HP:0002027)
- Delayed toilet training (HP:0000746)
- Speech delay (HP:0000750)
- * Abnormality of color vision (HP:0000551)
- * Abnormality of the fontanelles or cranial sutures (HP:0000235)
- * Difficulty climbing stairs (HP:0003551)
- * Difficulty jumping (HP:0001967)
- * Bilateral otitis media (HP:0000388)
- * High frequency hearing loss (HP:0005101)

Future Work/Recommendations

Web App



Fine tuning



Dictionary for abbreviations



Negation



Future models

ChatGPT



Limitations



Future versions

Summary



The automatic conversion of clinical free text to HPO codes is just a small use case on how AI can be leveraged in the medical domain.

Acknowledgements

- > Dr Saumya Shekhar Jamuar
- > Dr Sonny Pham
- > Dr Lim Weng Khong
- > Ms Sylvia Kam
- > Ms Lim Jiin Ying
- > Ms Jasmine Goh
- > Dr Sonia Davila
- > Ms Yasmin Bysltra
- > Ms Simone Ng
- > CIRB 2019/2243





Thank you!

Gabrielle Stinton









References

- [1] A. Arbabi, D. R. Adams, S. Fidler, and M. Brudno, "Identifying clinical terms in medical text using ontology-guided machine learning," JMIR Medical Informatics, vol. 7, no. 2, 2019.
- [2] L. Luo, S. Yan, P.-T. Lai, D. Veltri, A. Oler, S. Xirasagar, R. Ghosh, M. Similuk, P. N. Robinson, and Z. Lu, "Phenotagger: A hybrid method for phenotype concept recognition using human phenotype ontology," Bioinformatics, vol. 37, no. 13, pp. 1884–1890, 2021.
- [3] Y. Feng, L. Qi, and W. Tian, "Phenobert: A combined deep learning method for automated recognition of human phenotype ontology," IEEE/ACM Transactions on Computational Biology and Bioinformatics, pp. 1–1, 2022.
- [4] Human phenotype ontology. [Online]. Available: https://hpo.jax.org/app/. [Accessed: 01-Feb-2023].
- [5] "CHATGPT: Optimizing language models for dialogue," OpenAI, 02-Feb-2023. [Online]. Available: https://openai.com/blog/chatgpt/. [Accessed: 14-Feb-2023].