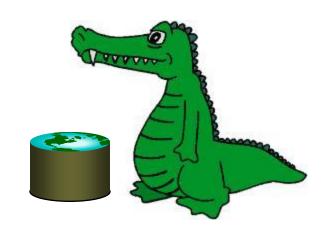
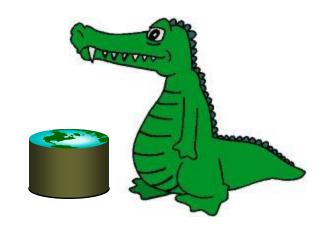
# CAP4770/5771 Introduction to Data Science Fall 2015

University of Florida, CISE Department Prof. Daisy Zhe Wang



## NLP and cTAKES for Biomedical Text Analysis

Biomedical Challenges
NLP techniques
cTakes and applications



Based on slides from Dr. Guergana K. Savova from Boston Children's Hospital/Harvard Medical School and Pei Chen from Apache cTAKES



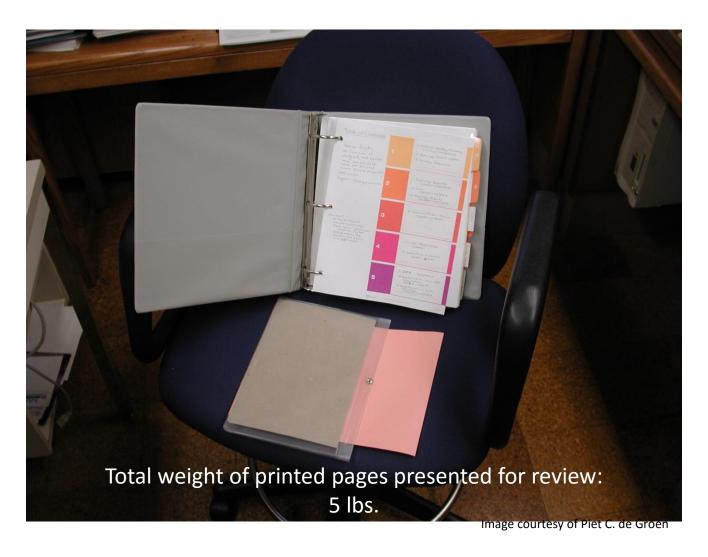
- Current Healthcare Challenges
- Computer Science concepts and techniques (e.g., IR, NLP, IE, DB)
- Apache cTAKES Overview and Applications
- Technical details



- Current Healthcare Challenges
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### Patient January 16, 2006





### Patient January 16, 2006



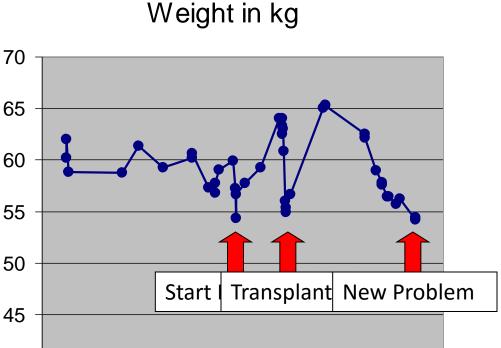
- What is exactly the patient's problem?
  - Are liver tests and weight loss due to Lipitor?
  - When did she use Lipitor?
  - What was the weight on what date?
- Impossible to review all notes!
  - Which notes are relevant to current symptoms?
  - Which have notes have weights and drug information?



## EHR/Data Warehouse to the rescue!

40

- Structured Data
- Demographics
- ICD9 Codes
- Patient Vitals
  - weight



1996 1997 1998 1999 2000 2001 2002 2003 2004 2005

Slide courtesy of Piet C. de Groen



### What happened to Cholesterol?

- She was on Lipitor, but:
  - When was it discontinued?
  - Did it do anything to her lipid levels?

## NLP to the rescue!

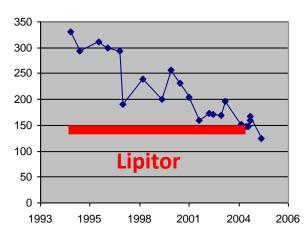
- Sort 33 identified Clinical Notes on date
- First note is from 1997
  - Lipitor is highlighted in the note
  - ...Dr. X recommended discontinuation of Pravachol and initiation of Lipitor ... have written a prescription for Lipitor ...
- Last note is from 2005
  - Lipitor was discontinued in 2004 ...
  - March 2004 note confirms discontinuation



### **Complete Picture**

- Demographics
  - Paitent ID #
- Tests
  - Cholesterol exists
- Clinical Notes
  - "Lipitor"
- Result
  - 22 cholesterol levels
  - 243 notes: 33 mentioned "Lipitor"

#### Cholesterol in mg/dL



Slide courtesy of Piet C. de Groen



- Current Healthcare Challenges
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- Information Extraction (IE)
  - Extracting existing facts from unstructured or loosely structured text into a structured form
- Information Retrieval (IR)
  - Finding documents relevant to a user query
- Named Entity Recognition (NER)
  - Discovery of groups of textual mentions that belong to certain semantic class
- Natural Language Processing (NLP)
  - Computational methods for text processing based on linguistically sound principles
  - Clinical NLP NLP for the clinical narrative
  - Biomedical NLP NLP for the clinical narrative and biomedical literature



### **Problem Space**

- Structured information
  - Relational databases
  - Easy to extract information from them
- Semi-structured information
  - Loosely formatted XML, CSV tables
  - Not challenging to extract information
- Unstructured information
  - Scholarly literature, clinical notes, research reports, webpages
  - Majority of information is unstructured!!
  - Real challenge to extract the information



### **NLP Areas of Research**

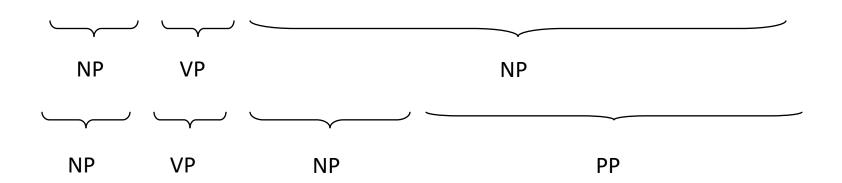
- Part of speech tagging
- Parsing constituency and dependency
- Predicate-argument structure (semantic role labeling)
- Named entity recognition
- Word sense disambiguation
- Relation discovery and classification
- Discourse parsing (text cohesiveness)
- Language generation
- Machine translation
- Summarization
- Creating datasets to be used for learning
  - a.k.a. computable gold annotations
  - Active learning



I saw the man with the telescope.

w1 w2 w3 w4 w5 w6 w7

pronoun verb article noun prep article noun



## NLP methods

- Rule-based
  - Regular Expression Pattern matching (e.g., "\b(lipitor|Lipitor)\b")
  - Dictionaries (e.g., drug names, ICD10 codes)
- Statistical Machine Learning
  - HMM: Hidden Markov Models
  - Linear-CRF: Linear-Chain Conditional Random Fields
  - Viterbi algorithms
- Hybrid



### Why NLP? Understand semantics

- From keyword search to language understanding
  - Negation (and any other similar context)
     The patient denies headache, earache, sore throat, fever, rash, hallucinations, stomachache, cough and any pneumonia-related symptoms
  - Inverted syntax
     Colon, ascending and descending, biopsy
  - Relation discovery
     Tamoxifen is used in the treatment of breast cancer.
  - Morphologic variations
     runs, running, ran, run -> mapped to the same base form
  - Higher level discourse phenomena: synonyms, anaphora relations, temporal relations, document summarization



- Current Healthcare Challenges
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### cTAKES Overview

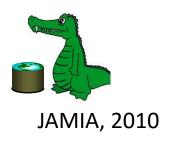
- Release 1.0 developed at Mayo (~2010)
- Goal:
  - Phenotype extraction
  - Generic to be used for a variety of retrievals and use cases
  - Expandable at the information model level and methods
  - Modular
  - Cutting edge technologies best methods combining existing practices and novel research with rapid technology transfer
  - Best software practices (80M+ notes)



### **Recent Developments**

#### cTAKES

- Top-level Apache Software Foundation project (as of March 22, 2013)
- many new components for semantic processing
- multi-institutional contributions (not an exhaustive list and in no particular order)
  - Boston Childrens Hospital
  - Mayo Clinic
  - University of Colorado
  - MITRE
  - MIT
  - Seattle Group Health Cooperative
  - University of California, San Diego
  - ...



► Additional tables and appendices are published online only. To view these files please visit the journal online (http:// jama.bmi.com).

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The annotation guidelines will be made available at http://www.ohnlp.org after manuscript publication. The clinical corpus created from Mayo Clinic notes is not released with cTAKES. For model-building purposes, that corpus was anonymized per Safe Harbor Health Insurance Portability and Accountability Act<sup>76</sup> guidelines. Technical details and discussions on technical topics related to cTAKES are posted on the Forums at http://www.ohnlp. org.

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#### Mayo clinical Text Analysis and Knowledge Extraction System (cTAKES): architecture, component evaluation and applications

Guergana K Savova, <sup>1</sup> James J Masanz, <sup>1</sup> Philip V Ogren, <sup>2</sup> Jiaping Zheng, <sup>1</sup> Sunghwan Sohn, <sup>1</sup> Karin C Kipper-Schuler, <sup>1</sup> Christopher G Chute <sup>1</sup>

#### ABSTRACT

We aim to build and evaluate an open-source natural language processing system for information extraction from electronic medical record clinical free-text. We describe and evaluate our system, the clinical Text Analysis and Knowledge Extraction System (cTAKES), released open-source at http://www.ohnlp.org. The cTAKES builds on existing open-source technologies—the Unstructured Information Management Architecture framework and OpenNLP natural language processing toolkit. Its components, specifically trained for the clinical domain, create rich linguistic and semantic annotations. Performance of individual components: sentence boundary detector accuracy=0.949; tokenizer accuracy=0.949; part-ofspeech tagger accuracy=0.936; shallow parser Fscore=0.924; named entity recognizer and system-level evaluation F-score=0.715 for exact and 0.824 for overlapping spans, and accuracy for concept mapping, negation, and status attributes for exact and overlapping spans of 0.957, 0.943, 0.859, and 0.580, 0.939, and 0.839, respectively. Overall performance is discussed against five applications. The cTAKES annotations are the foundation for methods and modules for higher-level semantic processing of clinical free-text.

#### INTRODUCTION

The electronic medical record (EMR) is a rich source of clinical information. It has been advocated that EMR adoption is a key to solving problems related to quality of care, clinical decision support, and reliable information flow among individuals and departments participating in patient care.<sup>1</sup> The abundance of unstructured textual data in the EMR NLP system designed to process and extract semantically viable information to support the heterogeneous clinical research domain and to be sufficiently scalable and robust to meet the rigors of a clinical research production environment. This paper describes and evaluates our system—the clinical Text Analysis and Knowledge Extraction System (cTAKES).

#### BACKGROUND

The clinical narrative has unique characteristics that differentiate it from scientific biomedical literature and the general domain, requiring a focused effort around methodologies within the clinical NLP field.2 Columbia University's proprietary Medical Language Extraction and Encoding System (MedLEE)3 was designed to process radiology reports, later extended to other domains.4 and tested for transferability to another institution.5 MedLEE discovers clinical concepts along with a set of modifiers. Health Information Text Extraction (HITEx)6 7 is an open-source clinical NLP system from Brigham and Women's Hospital and Harvard Medical School incorporated within the Informatics for Integrating Biology and the Bedside (i2b2) toolset.8 IBM's BioTeKS9 and MedKAT10 were developed as biomedical-domain NLP systems. SymText and MPLUS11 12 have been applied to extract the interpretations of lung scans13 to detect pneumonia14 and central venous catheters mentions.15 Other tools developed primarily for processing biomedical scholarly articles include the National Library of Medicine MetaMap,16 providing mappings to the Unified Medical Language System (UMLS) Metathesaurus concepts,17 is those from the National Center for Text Mining (NaCTeM),19 JULIE lab,20 and



#### **JAMIA**, 2013

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### Towards comprehensive syntactic and semantic annotations of the clinical narrative

Daniel Albright, <sup>1</sup> Arrick Lanfranchi, <sup>1</sup> Anwen Fredriksen, <sup>1</sup> William F Styler IV, <sup>1</sup> Colin Warner, <sup>2</sup> Jena D Hwang, <sup>1</sup> Jinho D Choi, <sup>3</sup> Dmitriy Dligach, <sup>4</sup> Rodney D Nielsen, <sup>1,5</sup> James Martin, <sup>3</sup> Wayne Ward, <sup>3</sup> Martha Palmer, <sup>1</sup> Guergana K Savova <sup>4</sup>

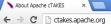
#### ABSTRACT

Objective To create annotated clinical narratives with layers of syntactic and semantic labels to facilitate advances in clinical natural language processing (NLP). To develop NLP algorithms and open source components. Methods Manual annotation of a clinical narrative corpus of 127 606 tokens following the Treebank schema for syntactic information, PropBank schema for predicate-argument structures, and the Unified Medical Language System (UMLS) schema for semantic information. NLP components were developed. **Results** The final corpus consists of 13 091 sentences containing 1772 distinct predicate lemmas. Of the 766 newly created PropBank frames, 74 are verbs. There are 28 539 named entity (NE) annotations spread over 15 UMLS semantic groups, one UMLS semantic type, and the Person semantic category. The most frequent annotations belong to the UMLS semantic groups of Procedures (15.71%), Disorders (14.74%), Concepts and Ideas (15.10%), Anatomy (12.80%), Chemicals and Drugs (7.49%), and the UMLS semantic type of Sign or Symptom (12.46%). Inter-annotator agreement results: Treebank (0.926), PropBank (0.891-0.931), NE (0.697–0.750). The part-of-speech tagger, constituency parser, dependency parser, and semantic role labeler are built from the corpus and released open source. A significant limitation uncovered by this project is the need for the NLP community to develop a widely agreed-upon schema for the annotation of clinical concepts and their

**Conclusions** This project takes a foundational step towards bringing the field of clinical NLP up to par with NLP in the general domain. The corpus creation and NLP components provide a resource for research and application development that would have been previously impossible.

other), the level of certainty associated with an event (confirmed, possible, negated) as well as textual mentions that point to the same event. We describe our efforts to combine annotation types developed for general domain syntactic and semantic parsing with medical-domain-specific annotations to create annotated documents accessible to a variety of methods of analysis including algorithm and component development. We evaluate the quality of our annotations by training supervised systems to perform the same annotations automatically. Our effort focuses on developing principled and generalizable enabling computational technologies and addresses the urgent need for annotated clinical narratives necessary to improve the accuracy of tools for extracting comprehensive clinical information. These tools can in turn be used in clinical decision support systems, clinical research combining phenotype and genotype data, quality control, comparative effectiveness, and medication reconciliation to name a few biomedical applications.

In the past decade, the general natural language processing (NLP) community has made enormous strides in solving difficult tasks, such as identifying the predicate-argument structure of a sentence and associated semantic roles, temporal relations, and coreference which enable the abstraction of the meaning from its surface textual form. These developments have been spurred by the targeted enrichment of general annotated resources (such as the Penn Treebank (PTB)<sup>2</sup>) with increasingly complex layers of annotations, each building upon the previous one, the most recent layer being the discourse level.<sup>3</sup> The emergence of other annotation standards (such as PropBank<sup>4</sup> for the annotation of the sentence predicate-argument structure) has brought new progress in the annotation of semantic informa-





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Welcome to Apache cTAKES

Apache clinical Text Analysis and Knowledge Extraction System (cTAKES) is an open-source natural language processing system for information extraction from electronic medical record clinical free-text. It processes clinical notes, identifying types of clinical named entities from various dictionaries including the Unified Medical Language System (UMLS) - medications, diseases/disorders, signs/symptoms, anatomical sites and procedures. Each named entity has attributes for the text span, the ontology mapping code, subject (patient, family member, etc.) and context (negated/not negated, conditional, generic, degree of certainty). Some of the attributes are expressed as relations, for example the location of a clinical condition (locationOf relation) or the severity of a clinical condition (degreeOf relation).

Apache cTAKES was built using the Apache UIMA Unstructured Information Management Architecture engineering framework and Apache OpenNLP natural language processing toolkit. Its components are specifically trained for the clinical domain out of diverse manually annotated datasets, and create rich linguistic and semantic annotations that can be utilized by clinical decision support systems and clinical research. cTAKES has been used in a variety of use cases in the domain of biomedicine such as phenotype discovery, translational science, pharmacogenomics and pharmacogenetics.

Apache cTAKES employs a number of rule-based and machine learning methods. Apache cTAKES components include:

- 1. Sentence boundary detection
- 2. Tokenization (rule-based)
- 3. Morphologic normalization
- POS tagging
- 5. Shallow parsing
- 6. Named Entity Recognition
  - Dictionary mapping
  - Semantic typing is based on these UMLS semantic types: diseases/disorders, signs/symptoms, anatomical sites, procedures, medications
- 7. Assertion module
- 8. Dependency parser
- 9. Constituency parser
- 10. Semantic Role Labeler
- 11. Coreference resolver
- 12. Relation extractor
- 13. Drug Profile module 14. Smoking status classifier

The goal of cTAKES is to be a world-class natural language processing system in the healthcare domain. cTAKES can be used in a great variety of retrievals and use cases. It is intended to be modular and expandable at the information model and method level. The cTAKES community is committed to best practices and R&D (research and development) by using cutting edge technologies and novel research. The idea is to quickly translate the best performing methods into cTAKES code.

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ctakes.apache.org



### cTAKES: Components

- Sentence boundary detection (OpenNLP technology)
- Tokenization (rule-based)
- Morphologic normalization (NLM's LVG)
- POS tagging (OpenNLP technology)
- Shallow parsing (OpenNLP technology)
- Named Entity Recognition
  - Dictionary mapping (lookup algorithm)
  - Machine learning (MAWUI)
  - types: diseases/disorders, signs/symptoms, anatomical sites, procedures, medications
- Negation and context identification (NegEx)
- Dependency parser
- Constituency parser
- Dependency based Semantic Role Labeling
- Relation Extraction
- Coreference module
- Drug Profile module
- Smoking status classifier
- Clinical Element Model (CEM) normalization module



### cTAKES Technical Details

- Open source
  - Apache Software Foundation project
  - Java 1.6 or higher
  - Dependency on UMLS which requires a UMLS license (free)
- Framework
  - Apache Unstructured Information Management Architecture (UIMA) engineering framework
- Methods
  - Natural Language Processing methods (NLP)
  - Based on standards and conventions to foster interoperability
- Application
  - High-throughput system



### What is UIMA (you - eee -muh)?

 Unstructured Information Management Architecture from IBM Research

- Open source scalable and extensible platform
- Create, integrate and deploy unstructured information management solutions

Many Open Source projects based on UIMA

## Why UIMA?

- Interoperability Many developers adopting UIMA
  - Easy to share and re-use resources
- Precisely controlled work flow
- Good scalability abilities
- Easy to utilize modules created by 3<sup>rd</sup> party developers
- Ongoing active development on new resources



#### Medication CEM template

associatedCode Change\_status Conditional

Dosage Duration End date

Form

Frequency Generic

Negation\_indicator

Route Start\_date Strength Subject

Uncertainty indicator

#### Procedure CEM template

associatedCode Body laterality

Body location

Body\_side

Conditional

Device

End\_date

Generic Method

Negation\_indicator

Relative\_temporal\_context

Start\_date Subject

Uncertainty\_indicator

#### Sign/Symptom CEM template

Alleviating\_factor associatedCode Body\_laterality Body\_location

Body\_side

Conditional

Course

Duration End time

Exacerbating\_factor

Generic

Negation\_indicator

Relative\_temporal\_context

Severity

Start\_time Subiect

Uncertainty indicator

#### Lab CEM template

Abnormal\_interpretation associatedCode

Conditional

Delta flag

Estimated\_flag

Generic

Lab value

Negation\_indicator

Ordinal\_interpretation

Reference\_range\_narrative

Subject

Uncertainty\_indicator

#### Disease/Disorder CEM template

Alleviating factor

Associated\_sign\_or\_symptom

associatedCode

Body\_laterality

Body\_location

Body\_side

Conditional

Course

Duration

End\_time

Exacerbating\_factor

Generic

Negation\_indicator

Relative\_temporal\_context

Severity

Start\_time

Subject

Uncertainty\_indicator

#### Anatomical Site CEM template

associatedCode

Body\_laterality

Body\_site

Conditional

Generic

Negation\_indicator

Subject

Uncertainty\_indicator