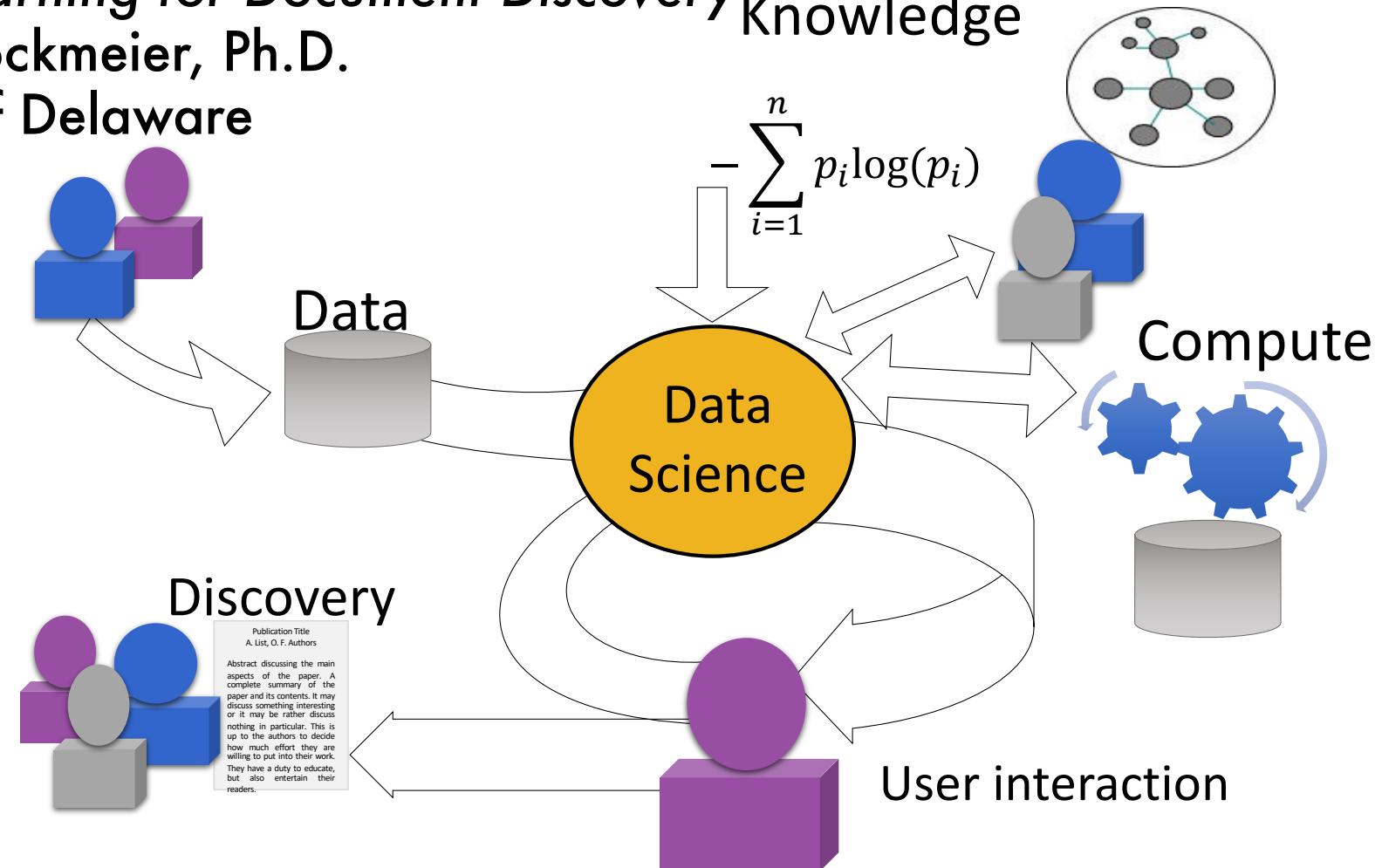
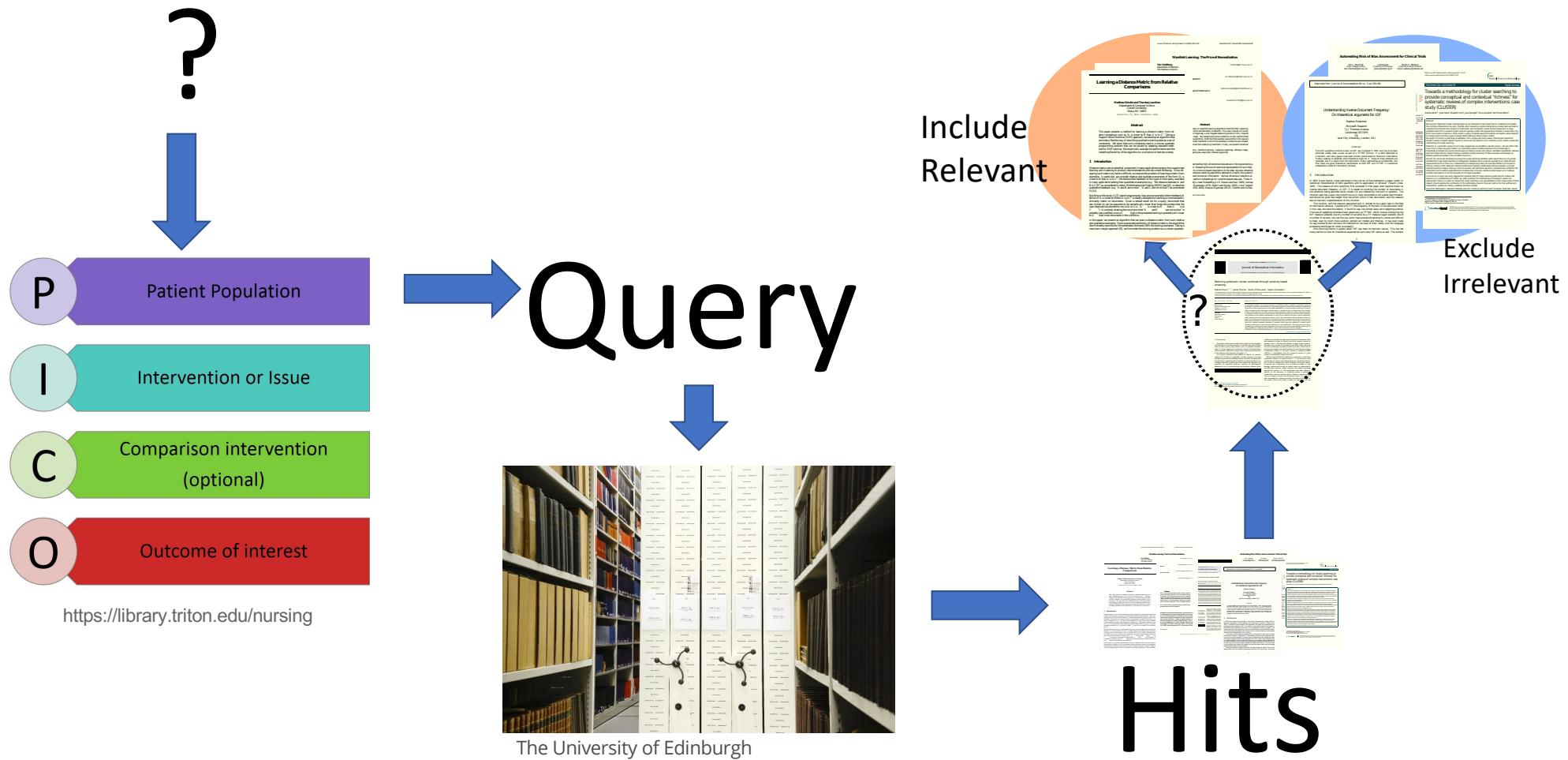


Machine Learning for Document Discovery

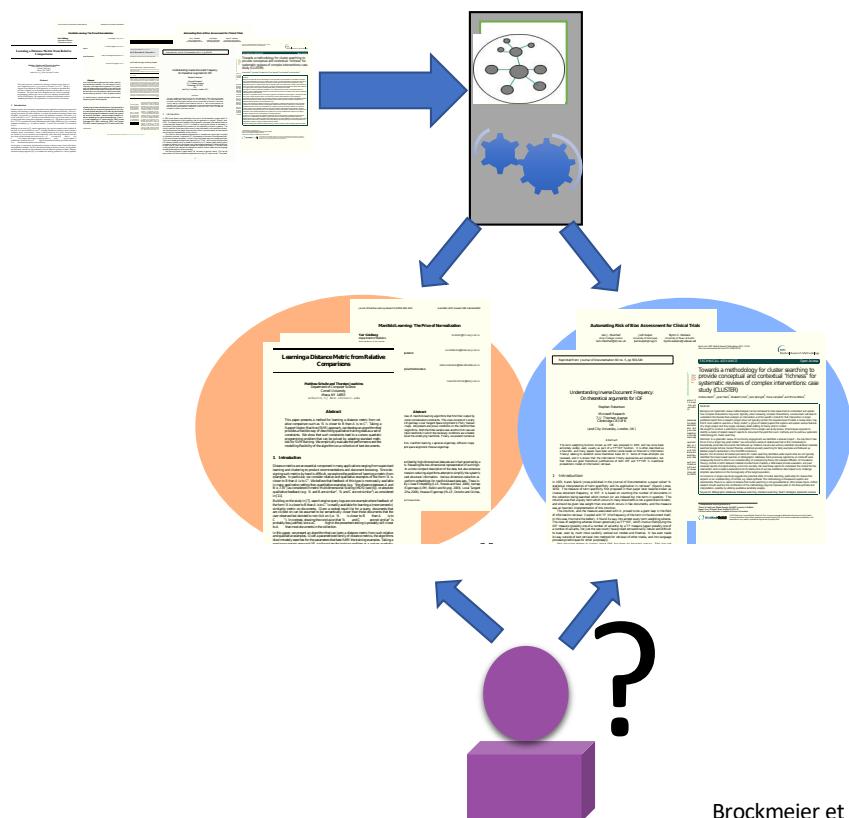
Austin J. Brockmeier, Ph.D.
University of Delaware



Systematic reviews: Evidence based research

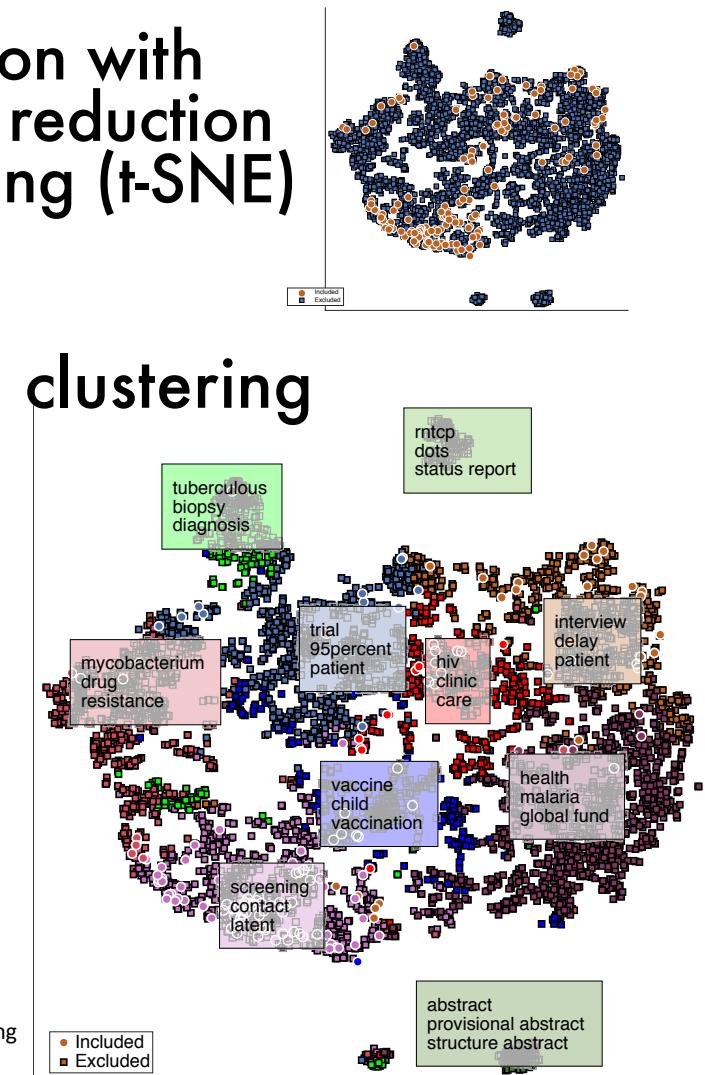


Clustering



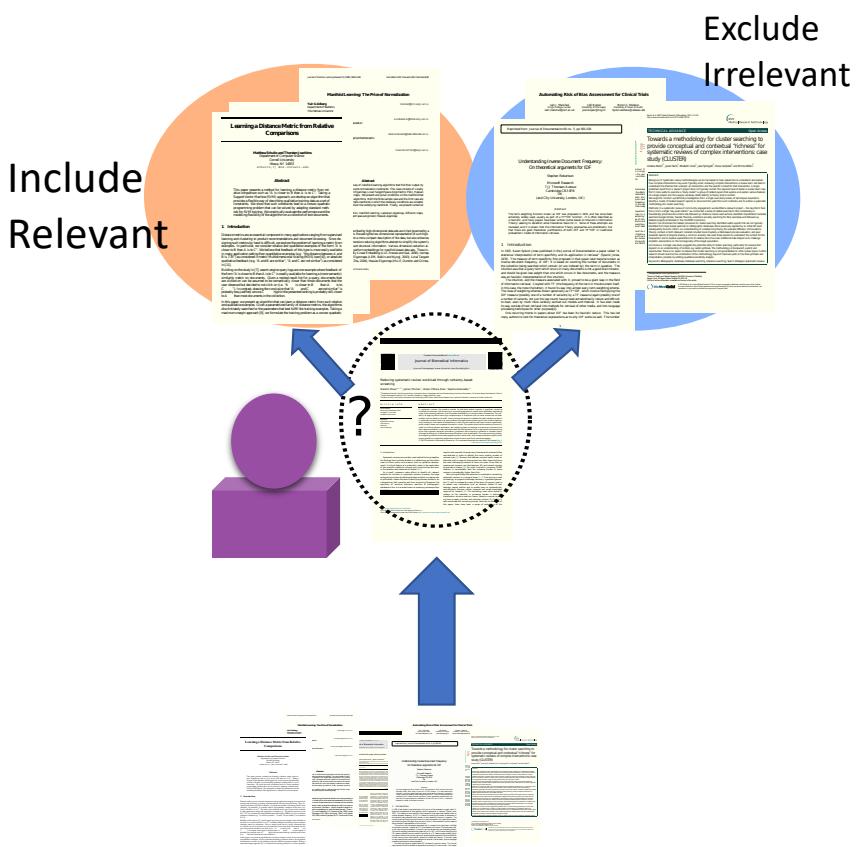
Brockmeier et al., "Self-Tuned Descriptive Document Clustering Using a Predictive Network," in *IEEE TKDE*
doi: 10.1109/TKDE.2017.2781721.

Visualization with dimension reduction / embedding (t-SNE)



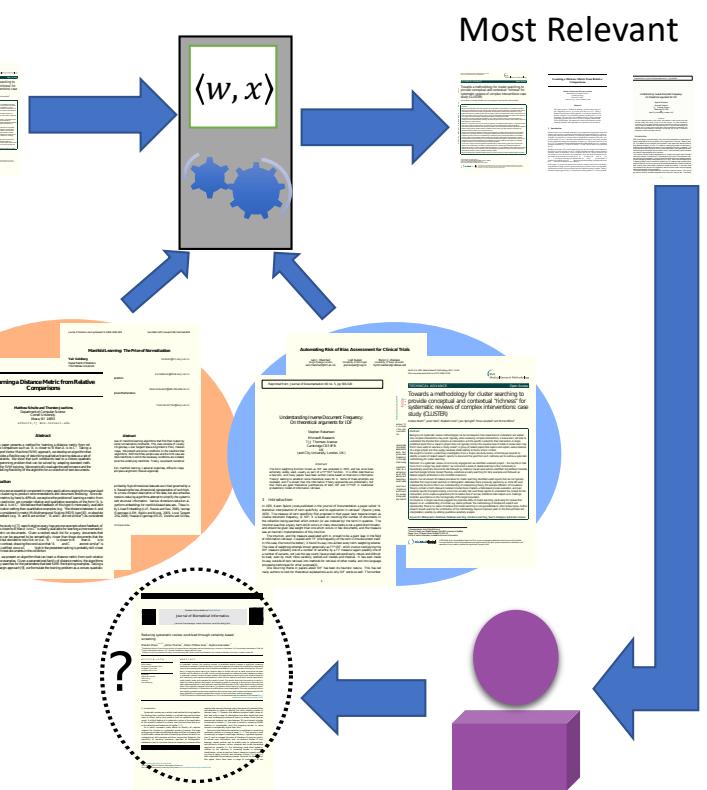
Active Learning

Initial training



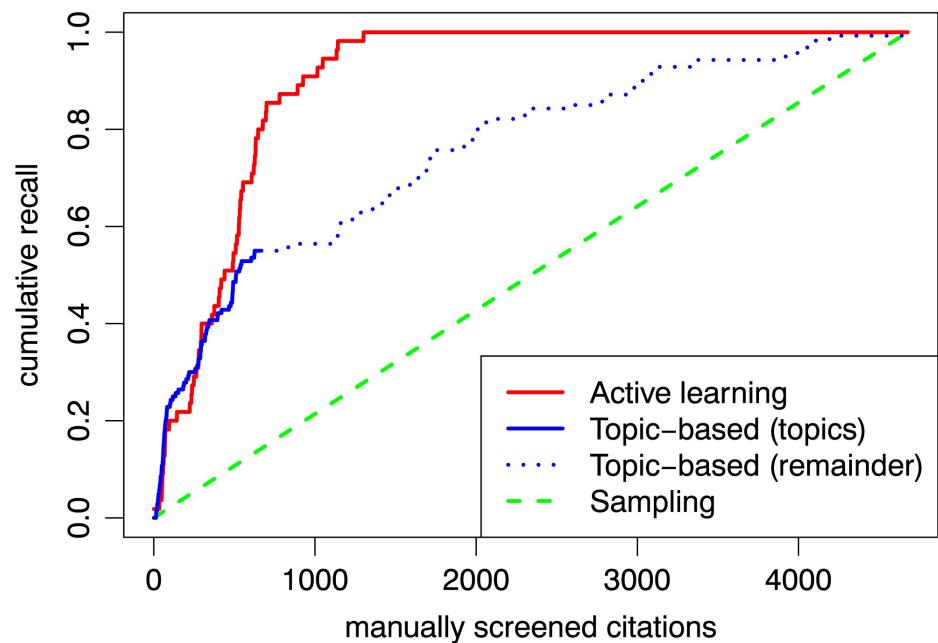
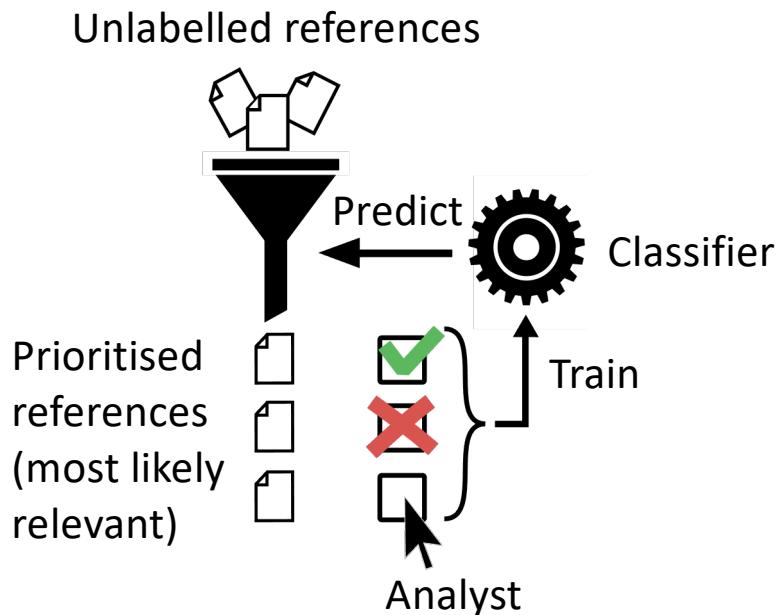
Exclude
Irrelevant

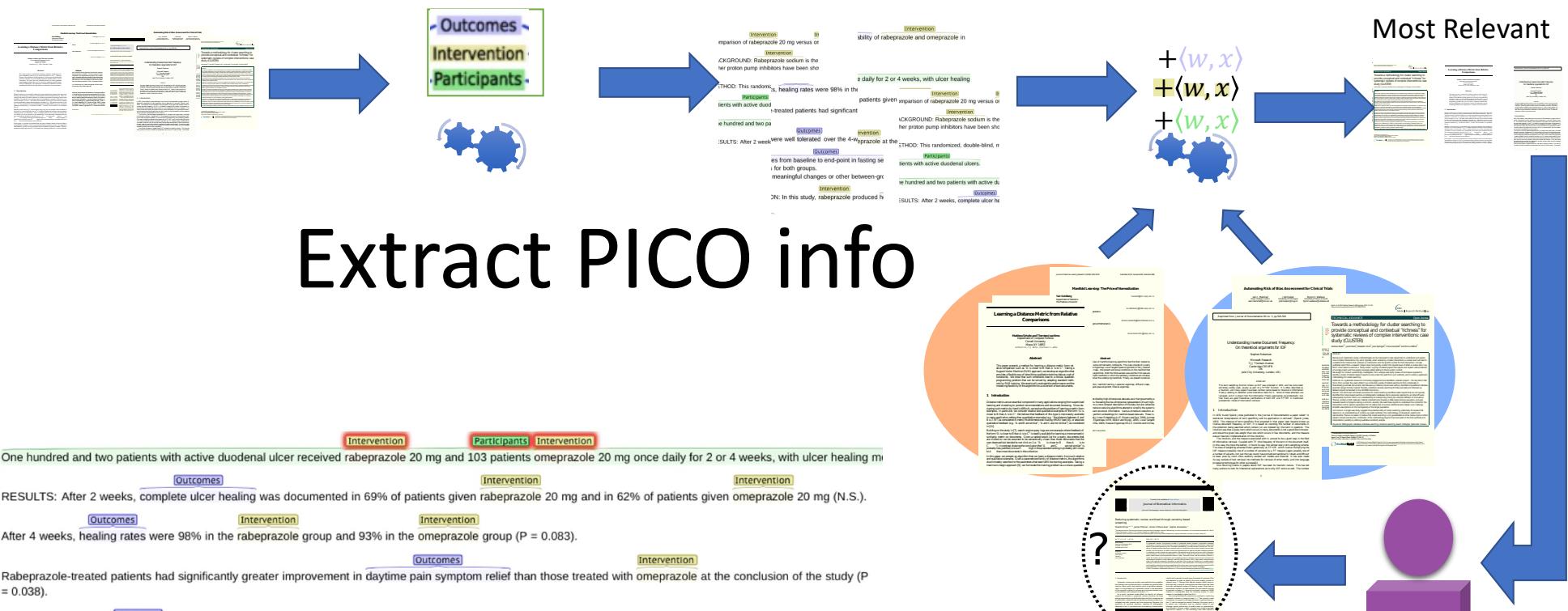
Include
Relevant



Most Relevant

Identify the majority of relevant references while only manually screening a portion





- 5 One hundred and two patients with active duodenal ulcer received rabeprazole 20 mg and 103 patients omeprazole 20 mg once daily for 2 or 4 weeks, with ulcer healing measured.
Outcomes Intervention Participants Intervention

6 RESULTS: After 2 weeks, complete ulcer healing was documented in 69% of patients given rabeprazole 20 mg and in 62% of patients given omeprazole 20 mg (N.S.).
Outcomes Intervention Intervention

7 After 4 weeks, healing rates were 98% in the rabeprazole group and 93% in the omeprazole group ($P = 0.083$).
Outcomes Intervention

8 Rabeprazole-treated patients had significantly greater improvement in daytime pain symptom relief than those treated with omeprazole at the conclusion of the study ($P = 0.038$).
Outcomes Intervention

9 Both drugs were well tolerated over the 4-week treatment period.
Outcomes Intervention

10 Mean changes from baseline to end-point in fasting serum gastrin were significantly greater in the rabeprazole group, but at end-point mean values were well within normal limits for both groups.
Intervention Outcomes Intervention

11 No clinically meaningful changes or other between-group differences were observed in laboratory parameters.
Intervention Outcomes Intervention

12 CONCLUSION: In this study, rabeprazole produced healing rates equivalent to omeprazole at weeks 2 and 4, and provided significantly greater improvement in daytime pain.
Outcomes Intervention

13 Both treatments were well tolerated.
Outcomes

Brockmeier et al. "Improving reference prioritisation with PICO recognition". *BMC Med Inform Decis Mak* **19**, 256 (2019). <https://doi.org/10.1186/s12911-019-0992-8>

When human experts fail

- Biased
 - Becomes rare with enough **training**
- Ambiguous cases
 - Need second opinion or more data
- Out of distribution
 - Outside of expertise

When statistical models fail

- Systematic error
 - Becomes rare with enough **correct** training data
- Ambiguous cases
 - Expert also needs to be careful
- Out of distribution
 - Corrupted or unseen case
 - Expert can easily recognize

Human-machine systems fail when

- they propagate/exacerbate biases
 - machine as a productivity multiplier
- excessive trust is given to machine
 - loss of vigilance
- insufficient data is collected to improve future versions
 - acquire more unbiased labeled data to validate

Need intelligent infrastructure for Artificial Intelligence

- Improve synergistic performance of the machine and human experts
- maintain vigilance and even heighten the performance of groups of experts
- collect training data for the future model instances

