Text mining for exploration of COVID-19 severity factors

LAI Khang Duy
Mariia KLIMINA

Université Paris Cité
UFR des Sciences Fondamentales et Biomédicales

Université
Paris Cité

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Contents

1 Abstract

COVID-19 is the disease caused by the Sar-COV-2 virus that originated in China at the end of the year 2019. Over the time, studies have shown that there is some form of background diseases and risk factors that can hugely affect the severity cases rate of COVID-19. This project will apply NLP and text mining methods in order to explore the CORD-19 dataset and extract background diseases and risk factors.
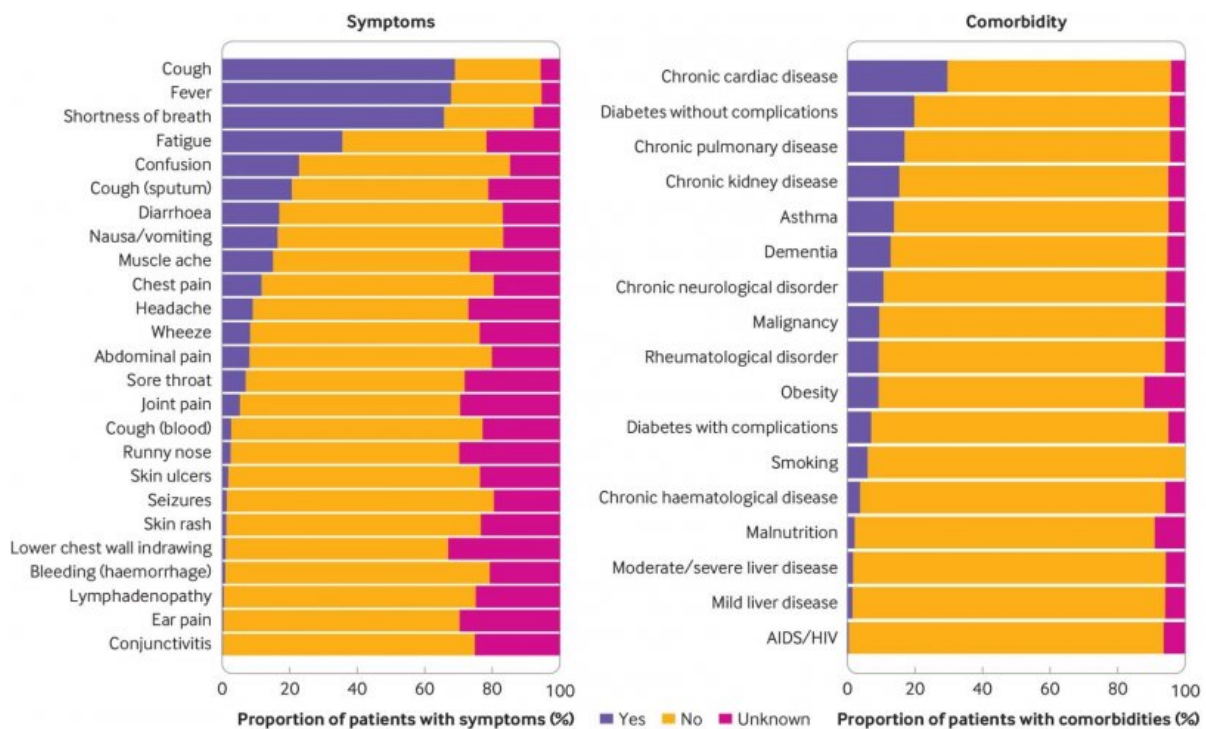

Figure 1: Cormobilities and symtoms of COVID-19 cases

2 State of the art

In this project we used multiple state of the art NLP and Data Science libraries.

- Numpy, Pandas: Formatting the data the and calculations.

- Matplotlib: Library for drawing the charts and figures.

- Scikitlearn: LDA and TSNE models.

- Spacy, Gensim and NLTK: Important NLP libraries.

- Scispacy: NER, Spacy model for science papers.

- Bokeh: A library for drawing interacted charts.

3 Data flow

During this project we worked CORD-19 dataset. CORD-19 is a data collection of over one million scholarly articles, including over 350,000 with full text, about COVID-19, SARS-CoV-2, and related coronaviruses. The amount of data collected in CORD-19 is providing us an opportunity for a deep and various analysis, and allowinh us to apply different NLP techniques such as LDA (Latent Dirichlet Allocation) and NER (Named-entity recognition). The main goal of this part is to present a structure of the project.

The coding process consisted of 4 parts: Data Exploration, Preprocessing, Data selection, Named-entity recognition application.

- Data Exploration

- Preprocessing

  - Reformating the json data to csv dataframe.
  - Removing all non-english paper.
  - Tokenizing.
  - Removing stopwords.
  - Stemming.
  - Lemmatisation.

- Data selection

  - Selecting articles with risk factors and severity key-words.
  - Clustering using Latent Dirichlet Allocation.

- Applying NER (Named-entity recognition).

4 Data exploration

In this part we will cover the main features that we discovered during the data exploration. The successful outcome of this block helped us to apply preprocessing and understood the data we were working with. It is important to mention, that in this part we used only metadata dataset which contained all useful information for the analysis.
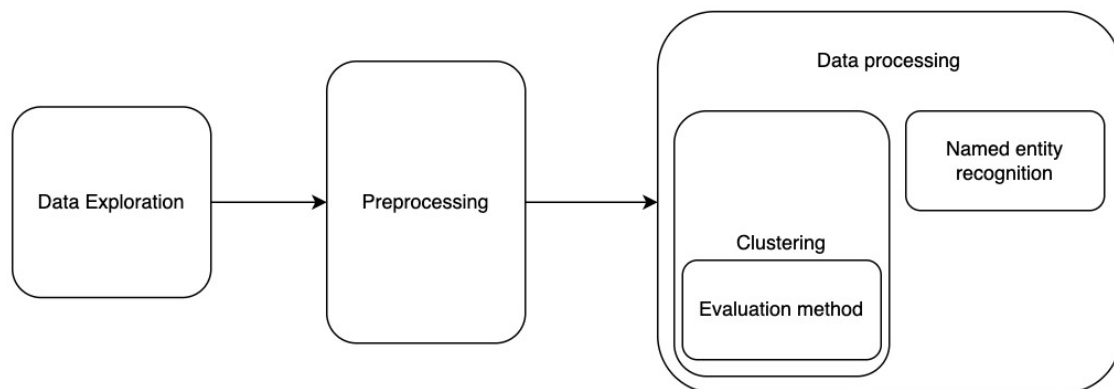
Figure 2: Data processing flow

4.1 Dataset information

This block is divided by two parts: the general information of a dataset and a language specificity.

- First of all, as we can see on a picture, at our disposal are more than one milion papers.

Figure 3: Paper's number

- Secondly, the metadata data collection consists of following columns.

```
1  ['cord_uid', 'sha', 'source_x', 'title', 'doi', 'pmcid', 'pubmed_id',
2  'license', 'abstract', 'publish_time', 'authors', 'journal', 'mag_id',
3  'who_covidence_id', 'arxiv_id', 'pdf_json_files', 'pmc_json_files',
4  'url', 's2_id']
```

For a better data collection understanding, it is crucial to know its components and its structure:

- `cord_uid`: A `str`-valued field that assigns a unique identifier to each CORD-19 paper.

- `sha`: A `List[str]`-valued field that is the SHA1 of all PDFs associated with the CORD-19 paper.

- `source_x`: A `List[str]`-valued field that is the names of sources from which we received this paper.

- `title`: A `str`-valued field for the paper title

- `doi`: A `str`-valued field for the paper DOI

- `pmcid`: A `str`-valued field for the paper's ID on PubMed Central.

- `pubmed_id`: An **int**-valued field for the paper's ID on PubMed.

- `license`: A `str`-valued field with the most permissive license we've found associated with this paper.

- **abstract**: A `str`-valued field for the paper's abstract

- `publish_time`: A `str`-valued field for the published date of the paper. This is in `yyyy-mm-dd` format.

- `authors`: A `List[str]`-valued field for the authors of the paper.

- `journal`: A `str`-valued field for the paper journal.

- `who_covidence_id`: A `str`-valued field for the ID assigned by the WHO for this paper.

- `arxiv_id`: A `str`-valued field for the arXiv ID of this paper.

- `pdf_json_files`: A `List[str]`-valued field containing paths from the root of the current data dump version to the parses of the paper PDFs into JSON format.

- `pmc_json_files`: A `List[str]`-valued field. Same as above, but corresponding to the full text XML files downloaded from PMC, parsed into the same JSON format as above.

- `url`: A `List[str]`-valued field containing all URLs associated with this paper.

- `s2_id`: A `str`-valued field containing the Semantic Scholar ID for this paper.

To be more clear, the number of files that we can work with in the directory is approximately over 300000 json files, not one million. The explanation for this is that some papers in the metadata dataset is not available in the json format for us to process and some of them are duplicated.

4.2 Language status of the dataset

During this project, we agreed to work only with english-written articles. That is why we made an analysis that you can see on an image below. As can be observed most of the articles are meeting the requirements. However, papers that do not respond to the criteria will be deleted in the preprocessing part.

	cord_uid	sha	source_x	title	doi	pmcid	pubmed_id	license	abstract	publish_time	author
0	ug7v899j	d1aafb70c066a2068b02786f8929fd9c900897fb	PMC	Clinical features of culture-proven Mycoplasma...	10.1186/1471-2334-1-6	PMC35282	11472636	no-cc	OBJECTIVE: This retrospective chart review des...	2001-07-04	Madani, Tari A; Al-Ghamd Aisha
1	02tnwd4m	6b0567729c2143a66d737eb0a2f63f2dce2e5a7d	PMC	Nitric oxide: a pro-inflammatory mediator in l...	10.1186/rr14	PMC59543	11667967	no-cc	Inflammatory diseases of the respiratory tract...	2000-08-15	Vliet, Alber van de Eiserich, Jaso P; Cros.
2	ejv2xln0	06ced00a5fc04215949aa72528f2eeaae1d58927	PMC	Surfactant protein-D and pulmonary host defense	10.1186/rr19	PMC59549	11667972	no-cc	Surfactant protein-D (SP-D) participates in th...	2000-08-25	Crouch, Erik
3	2b73a28n	348055649b6b8cf2b9a376498df9bf41f7123605	PMC	Role of endothelin-1 in lung disease	10.1186/rr44	PMC59574	11686871	no-cc	Endothelin-1 (ET-1) is a 21 amino acid peptide...	2001-02-22	Fagan, Kare A; McMurtry Ivan F Rodman, Davi
4	9785vg6d	5f48792a5fa08bed9f56016f4981ae2ca6031b32	PMC	Gene expression in epithelial cells in respons...	10.1186/rr61	PMC59580	11686888	no-cc	Respiratory syncytial virus (RSV) and pneumoni...	2001-05-11	Domachowske Joseph E Bonville Cynthia A Ro.

Figure 4: Head of the metadata

In order to detect english-written papers, we used a library called `langdetect`. To speed up the language detecting process we used only first 50 words from a body text. The practice shows that this amount of words is enough for algorithm to understand if it's english language or not.

- This part of the code is trying to analyse the first 50 words of the body text, however if the number of words is lower than 50, the whole text is analysed.

```
1  if len(text) > 50:
2          lang = detect(" ".join(text[:50]))
3  elif len(text) > 0:
4          lang = detect(" ".join(text[:len(text)]))
```

- If the detection of the language is impossible when using the body part, the algorithm will try to do the same job but with an abstract.

```
1  try:
2          lang = detect(df.iloc[ii]['abstract_summary'])
3  except Exception as e:
4          lang = "unknown"
```

- In other case, the language marked as unknown.

For the final dataframe we randomly picked 10000 english-written papers. It is obviously that the most out of dataset is written in English.
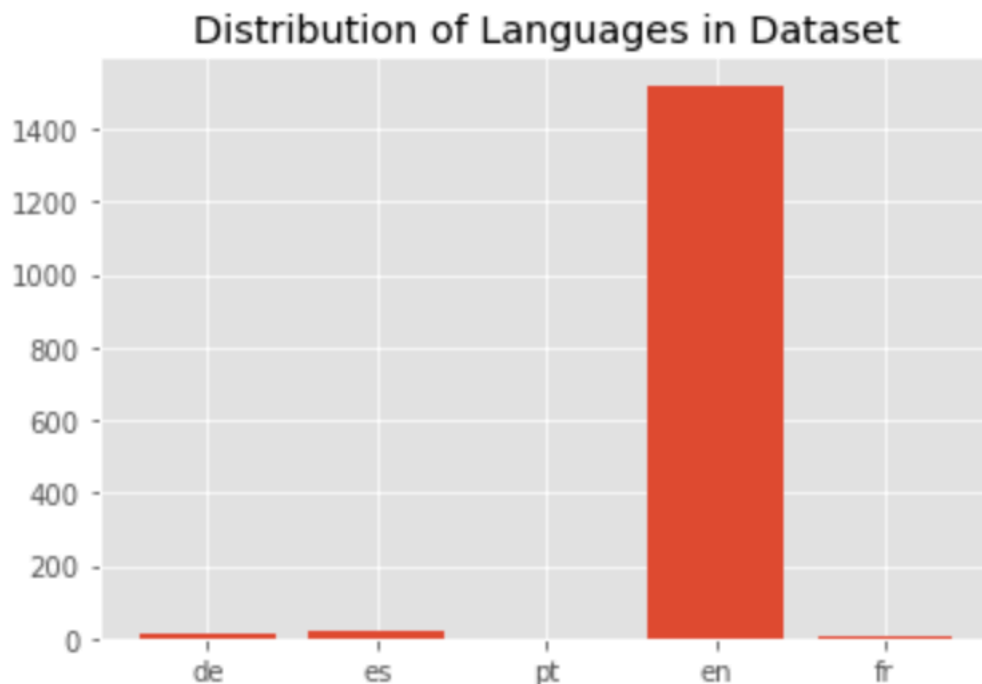
Figure 5: Language percentage in the dataset

5 Data preprocessing

The second part of this project is data preprocessing. It's important to mention, that at this step, we are using not only the metadata dataset, but also we are working with full collection of articles.

- Filter necessary information from metadata and body_text in JSON files.
- Dropping non-english papers
- Cleaning the data

  - Removing special characters
  - Removing numbers
  - Tokenization
  - Lemmatisation
  - Stemming

- Removing rows with duplicated and empty abstracts

5.1 Handling multiple languages

As we mentioned earlier, approximately 95% of papers are written in English. To sort them out we created a new column in our dataframe named `language` and then used the code below for creating a new dataset only with english-written papers.

```
1  df = df_covid[df_covid['language'] == 'en']
```

5.2 Transfering the JSON to Pandas Dataframe format

The original data is collected in json format, where each file is a representation of an article. However, it is impossible to use python preprocessing libraries on json artciles. We solved this issue by transfering all data from json collection into Pandas Data Frame.

5.3 Removing special characters and numbers

In this part of data preprocessing we removed all numbers and special characters(dots, commas, etc) using the python `regex` library.

```
1  text = re.sub(r'[^\w\s]', '', str(text).lower().strip())
2      pat = r'\d+'
3      text = re.sub(pat, '', text)
```

5.4 Tokenization

A tokenization process divides data into chunks of information that can be considered as discrete elements. The token occurrences in a document can be used directly as a vector representing that document.

In this case we used `split()` method to tokenize the data.

5.5 Stemming

Stemming is a natural language processing technique that lowers restore words to their root forms, hence aiding in the preprocessing of text, words, and documents for text normalization. The performance of NLP might be affected with out stemming.

```
1  if flg_stemm == True:
2          ps = nltk.stem.porter.PorterStemmer()
3          lst_text = [ps.stem(word) for word in lst_text]
```

5.6 Lemmatisation

Lemmatization is aslo a NLP technique which is used to reduce words to a normalized form.

```
1  if flg_lemm == True:
2          lem = nltk.stem.wordnet.WordNetLemmatizer()
3          lst_text = [lem.lemmatize(word) for word in lst_text]
```

5.7 Risk factor and severe paper filtering

Before applying NER, we sorted papers in a dataframe with a common topic, such as severe symptoms and risk factors. In order to do it right and in an objective way, we filtered out papers that contained one of the words that was related to risk factors or severity in a predefined dictionary. You can observe the key-words in a word cloud below.

Figure 6: WordCloud of significant word in filtered list of paper

5.8 Data processing

At this point of our project, the data is clean and sorted. It means that it is suitable for NLP-training.

The first thing we did was Topic Modeling using Latent Dirichlet Allocation(LDA). LDA is a generative statistical model that allows sets of observations to be explained by unobserved groups that explain

why some parts of the data are similar. It was crucial for us to use LDA because by using topic modeling we discovered a range of articles that was very close to our project theme: risk factors, severity, severe,etc. After successfully applying LDA and choosing the right topic, we fitted our model with the NER. NER — (Named Entity Recognition) is a subtask of information extraction that seeks to locate and classify named entities mentioned in unstructured text into predefined categories such as person names, organizations, locations, medical codes, time expressions, quantities, monetary values, percentages, etc.

Our NER model is special because it can detect diseases that are in science papers.

6 Topic modeling

This is how LDA works.

- Providing to an algorithm a certain number of topics.
- The algorithm is assigning every word to a temporary topic.
- The algorithm is checking and updating topic assignments.

To choose the appropriate number of topic, we need to run in every topic number and use a method to evaluate. We will use cv coherence score in this case.

6.1 Evaluation method: coherence score

For the evaluation method we used the coherence score. Coherence score in topic modeling is a measure of how interpretable the topics are to humans. In this case, topics are represented as the top N words with the highest probability of belonging to that particular topic.
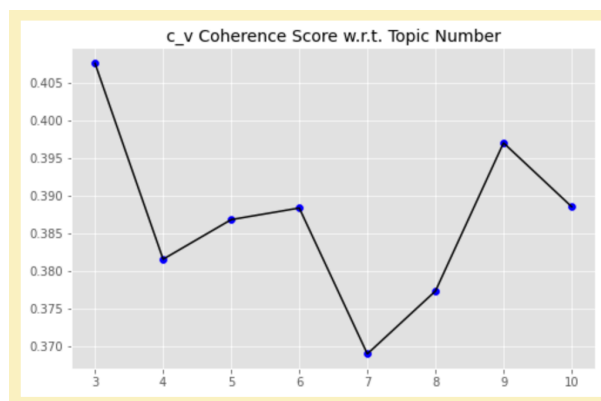

Figure 7: LDA iteration=50

Briefly, the coherence score measures how similar these words are to each other. The higher the c_v coherence score is, the more suitable the topic number should be.
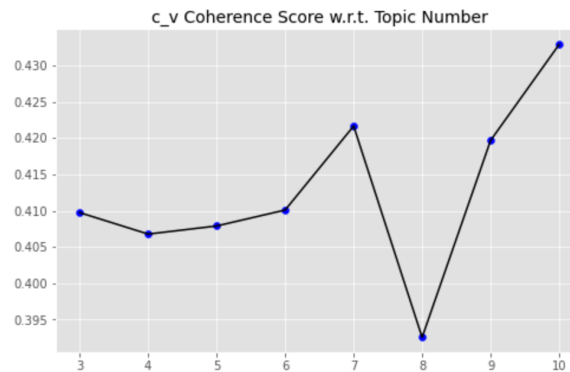

Figure 8: LDA iteration=30

We will try to run it in the range of 3 to 11 topics and see which of the number of topics perform the best.

Each time we iterate the c_v coherence score, the value varies. However, for the next step, we decided to work with the data from topic 6.

6.2　Final dicision in applying Latent Dirichlet Allocation

Run LDA with topic number == 6.

```
1  lda_model = LdaMulticore(corpus=corpus_risk_article,
2                           id2word=id2token_risk_article,
3                           num_topics=6,
4                           random_state=98,
5                           chunksize=100,
6                           passes=10,
7                           iterations=50,
8                           decay=0.5,
9                           per_word_topics=True,)
```

Top of the keyword for each topic.

After examination of the most significant keywords, we made the conclusion that topic 3 was the closest to severity symptoms. Topic 3 has the following keywords: 'mortality', 'high', 'risk', 'patient', 'case', 'severe', etc. Then, we extracted all documents from the topic 3. Having all papers filtered, we can transfer them to the NER model.

By extract the document's topic by using `get_document_topics` method, we have the percentage of each topic contain in the document. We label the document by the highest percentage of a topic
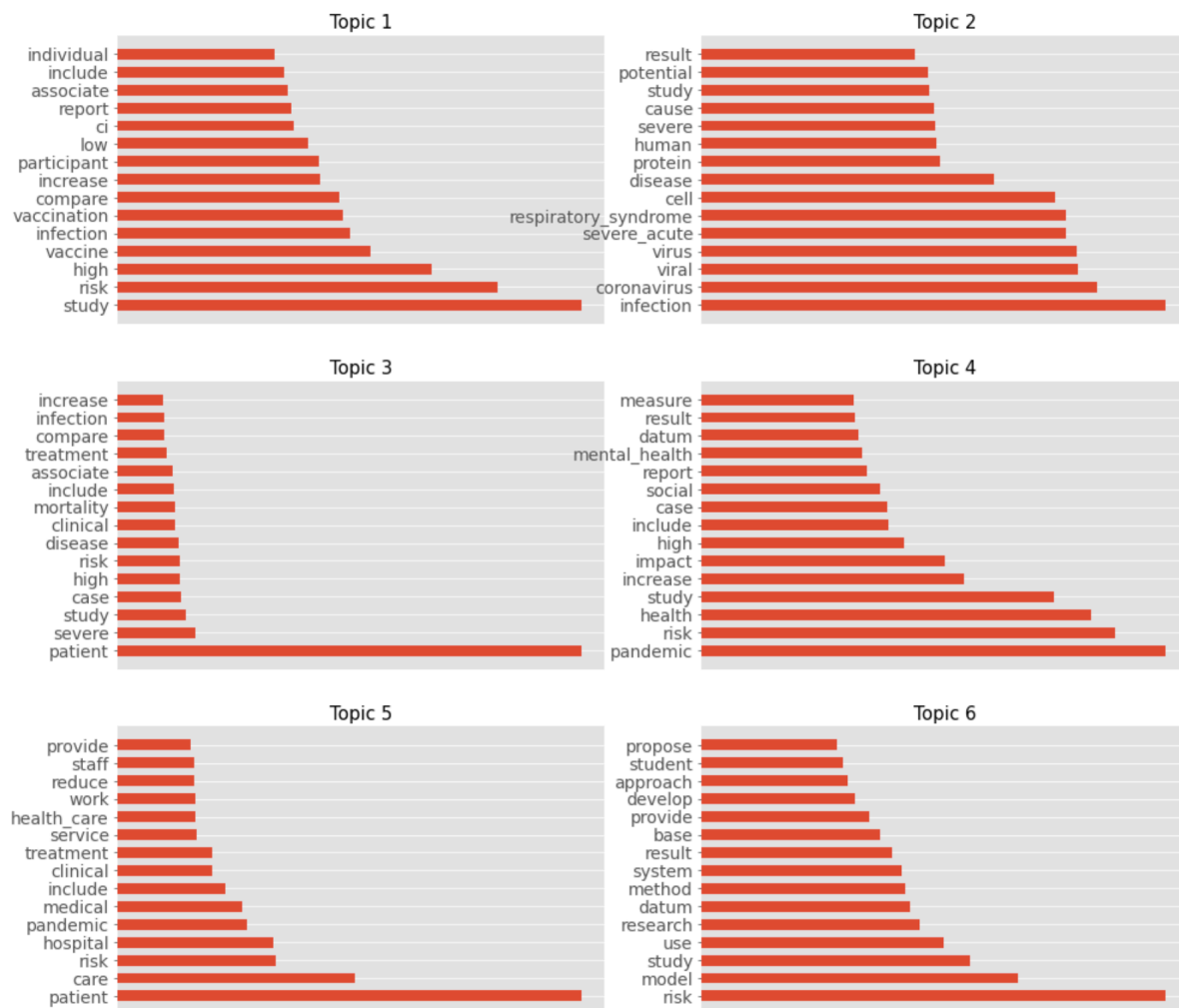
Figure 9: Top keywords for each cluster

that contain in the document.

```
1  document_topic = lda_model.get_document_topics(corpus_risk_article[i])
2  document_topic_distribution.append(document_topic)
3  for idx,document_topic in enumerate(document_topic_distribution):
4      for topic_idx,prob in document_topic:
5          document_topic_matrix[idx][topic_idx] = prob
```

7 Named-identity recognition

Scispacy is a library with different SpaCy models for biomedical text processing. In this step, we used a pretrained model based on BC5CDR corpus. This model can be installed through Scispacy with en_ner_bc5cdr_md.

```
1  import scispacy
2  import spacy
3  nlp_model_bc5cdr = spacy.load("en_ner_bc5cdr_md")
```

- Load in en_ner_bc5cdr_md.

```
1  entities = []
2  labels = []
3  position_start = []
4  position_end = []
5
6  for body_text in tqdm(df['body_text_clean'][:200]):
7      doc = nlp(body_text)
8
9
10     for ent in doc.ents:
11         entities.append(ent.text)
12         labels.append(ent.label_)
13         position_start.append(ent.start_char)
14         position_end.append(ent.end_char)
15
16     named_entities_df = pd.DataFrame({'Entities':entities,'Labels':
           labels,'Position_Start':position_start, 'Position_End':
           position_end})
```

- Create dictionary that contains extracted entities.

```
1  df_disease = named_entities_df.drop_duplicates(subset=['Entities'])
```

- Exporting the final file with only the DISEASE tag.

```
1  df_disease = df_disease[df_disease['Labels'] == 'DISEASE]
```

```
2  df_disease.to_csv('disease.csv')
```

8 Result

As a final result we extracted the most common diseases that are connected with COVID-19. In order to make it more presentable, the table with a list of diseases was generated.

Head of the file `disease.csv`

0	chronic obstructive pulmonary disease copd	DISEASE
1	death	DISEASE
3	copd	DISEASE
9	dyspnea	DISEASE
10	cough	DISEASE
11	copd pulmonary function	DISEASE
13	respiratory tract infection	DISEASE
14	chronic unstable disease system malignancy	DISEASE
19	obstructive pulmonary disease	DISEASE
21	copd airflow	DISEASE
25	hypertension	DISEASE
26	atherosclerotic heart disease	DISEASE
27	bronchiectasis	DISEASE
43	respiratory doctor small number	DISEASE
45	critically ill	DISEASE
46	chronic disease community	DISEASE
47	chronic disease	DISEASE
57	respiratory muscle reset sensitivity respiratory center co improve sleep quality	DISEASE
60	hypercapnia	DISEASE
65	copd p	DISEASE
69	pneumococcal disease	DISEASE

0	chronic obstructive pulmonary disease copd	DISEASE
72	hypertension diabetes copd	DISEASE
73	pneumonia	DISEASE
80	copd asthma steroidrelated	DISEASE
84	cellsµl	DISEASE
103	reduction ae frequency helped maintain lung function	DISEASE
112	coronavirus disease	DISEASE
113	covid selflimiting disease	DISEASE
115	acute respiratory syndrome coronavirus sarscov nucleic acid	DISEASE
116	fever cough shortness breath	DISEASE
117	infection	DISEASE
118	presymptomatic severe presymptomatic covid	DISEASE
119	presymptomatic nonsevere presymptomatic covid	DISEASE
123	coronavirus pneumonia	DISEASE
127	respiratory distress	DISEASE
131	respiratory failure	DISEASE
132	shock	DISEASE
133	organ failure	DISEASE
134	hypertension diabetes cardiovascular disease cerebrovascular disease cancer chronic obstructive pulmonary disease	DISEASE
135	kidney disease	DISEASE
136	liver disease immunodeficiency	DISEASE
138	illness respectively commonest symptom symptomatic patient disease	DISEASE
139	admission fever n cough n shortness breath	DISEASE
140	respiratory distress fatigue	DISEASE
141	muscle soreness	DISEASE
142	diarrhea	DISEASE
143	headache	DISEASE
144	dizziness	DISEASE

0	chronic obstructive pulmonary disease copd	DISEASE
145	nausea n vomiting	DISEASE
148	hypertension diabetes	DISEASE
149	groundglass opacity	DISEASE
150	pleural thickening	DISEASE
151	pleural effusion	DISEASE
155	liver kidney common	DISEASE
156	heart liver function	DISEASE
160	lymphocytopenia	DISEASE
163	nonseverely ill	DISEASE
164	pandemic sarscov infection	DISEASE
166	heart liver kidney	DISEASE
167	abnormal c abnormal rate organ including heart liver kidney fold normal range d value laboratory indicator admission vertical axis indicates	DISEASE
169	respiratory distress syndrome	DISEASE
170	sepsis congestive heart failure	DISEASE
172	lower respiratory tract infection	DISEASE
173	bacterial spectrum pulmonary coinfections superinfection	DISEASE
176	tumor necrosis	DISEASE
177	presymptomatic nonsevere presymptomatic patient based laboratory	DISEASE
178	stage disease	DISEASE
179	bronchopulmonary dysplasia	DISEASE
180	neurodevelopmental impairment	DISEASE
181	lung injury alveolar growth arrest	DISEASE
184	fibrosis	DISEASE
189	death bpddeath	DISEASE
192	chorioamnionitis	DISEASE
193	infection sepsis	DISEASE

These are the final disease that our method pulled out from the CORD-19 dataset.

9 Future improvement

Speaking of future improvements, it is important to emphasize two things.

First of all, it would be crucial to create a knowledge graph in order to see the relationships between different symptoms and diseases. We are sure that constructing a knowledge graph may give us a more profound and deep image of connections between severity cases and symptoms. It is a very powerful technique and can be used by researchers in order to prevent some severe cases by knowing that some diseases can lead to severe covid.

Secondly, while working on this project, we found out that, in order to make this project more complex, it is important to calculate the severity rate in order to know which disease is less or more severe. To sum it up, we are hoping to continue to work on this project and implement all this improvement in future.