

Challenges in Deploying and Managing Large Terminologies: NCI Thesaurus

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Challenge Topics



- Background
 - EVS, NCI Thesaurus, Vocabulary Development, Distribution Methods
- Core Challenges
 - Content, many users and uses
 - Support, Properties, Provenance
 - Editing Tool Requirements
 - Shared Data and Distributed Editing
 - Simplified GUI, Reasoning, Rule Enforcement, etc.
- Other Issues/ Challenges
 - Training and Maintaining pool of domain expert editors
 - Modeling Consistency
 - QA
 - Collecting Input from end users and collaborators

Background



- NCI Enterprise Vocabulary Services
 - Support
 - Products
- Distribution
 - LexEVS Terminology Server
 - Web Browsers (Bioportal, NCI Thesaurus and Metathesaurus)
 - FTP site (OWL and other formats)
- Production Cycle



NCI Enterprise Vocabulary Services

Goal – Integration by Meaning

- EVS provides services and resources that assists to:
 - Integrate different conceptual frameworks for clinical, basic and translational research,
 - Create terminological and taxonomic conventions across systems
- Controlled Terminology Products
 - NCI Thesaurus an ontology-like cancer-centric controlled terminology
 - NCI Metathesaurus maps biomedical vocabularies
 - External vocabularies maintained and served: MedDRA, HL7, NDF-RT, LOINC, GO, Zebrafish, RadLex, etc.
 - BiomedGT (Biomedical Grid Terminology new)
- Further info, see: https://wiki.nci.nih.gov/display/EVS/EVS+Wiki



Vocabulary Support Guidelines

- Enable appropriate use of multiple terminologies and mappings between them.
- Leverage existing sources where appropriate
 - VA NDF-RT, RxNorm, LOINC, etc. ...
 - Develop unique content where needed (Cancer genes and diagnoses, drugs and therapies, molecular abnormalities, clinical trial standard terminology etc.)
- Link to other information sources and standards using URLs as possible
 - GO, Swissprot, drug formularies, trial protocols etc.
- Merge with or map as needed to other standard terminology to ensure interoperability



Products: NCI Thesaurus



- Reference Terminology for NCI, caBIG, Partners
 Underpins caCORE, caGRID semantics
- A Federal Standard Terminology
- About 80,000 "Concepts" hierarchically organized into domains
- **Broad coverage** of the cancer research and clinical domain including prevention and treatment trials

 Neoplastic and other Diseases

 - Findings and Abnormalities

 - Anatomy, Tissues, Subcellular Structures
 Agents, Drugs, Chemicals
 Genes, Gene Products, Biological Processes
 - Animal Models Mouse, other
 - Research techniques and management, apparatus, clinical and lab, radiology, imagery
- Published Monthly



Products: NCI Thesaurus (2)

- Public domain, open content license
- **Description-logic based**
- **Concept History**
- Distributed in multiple ways:
 - By download (OWL, Ontylog XML, flat files)
 - Through LexEVS 3.2 (in deprecation), LexEVS 4.2 and LexEVS 5.0 server and caGRid terminology node
 - As a source in NCI Metathesarus and UMLS Metathesaurus
 - Online Via Browsers
 - NCI Bioportal: <u>http://bioportal.nci.nih.gov/ncbo/faces/index.xhtml</u>
 Brand New: http://ncit.nci.nih.gov (NCIt specific browser)



Distribution: LexEVS



- What is LexEVS?
 - LexEVS is a collection of APIs that provide access to controlled terminologies.
 - The controlled terminologies hosted by the NCI EVS Project are published via the Open-Source LexEVS Terminology Server.



Distribution: LexEVS 5.0

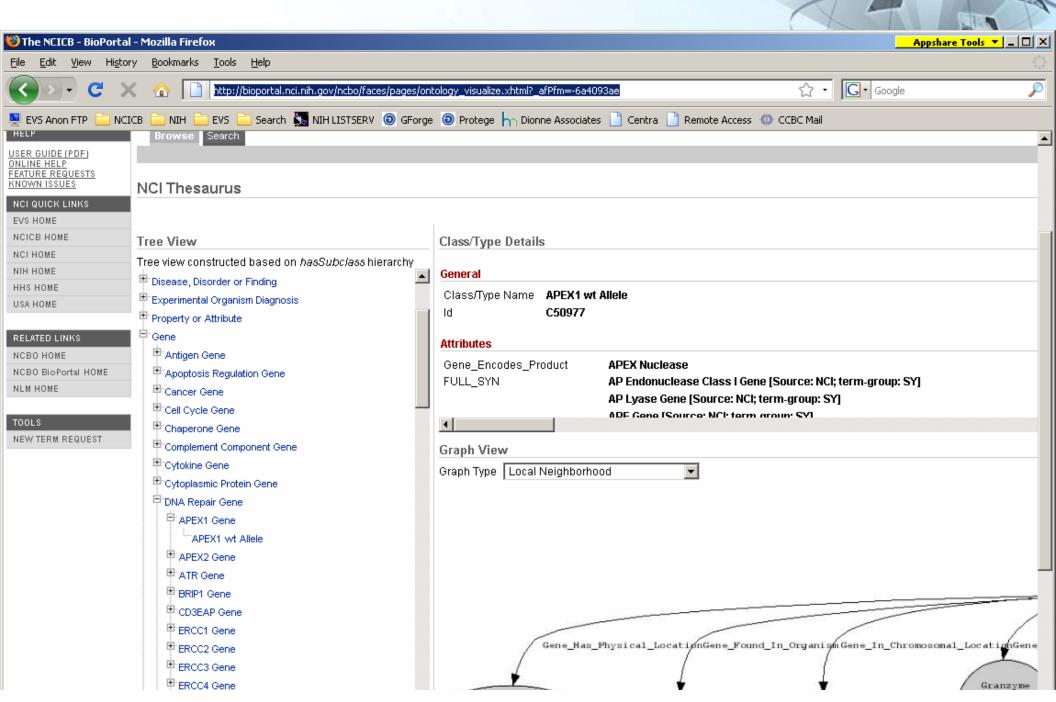


The LexEVS 5.0 Release includes the following components:

- Java API A Java interface based on the LexGrid 5.0 Object Model
- REST/HTTP Interface Offers an HTTP based query mechanism.
 Results are returned in either XML or HTML formats
- SOAP/Web Services Interface Provides a programming language neutral Service-Oriented Architecture (SOA)
- Distributed LexBIG (DLB) API A Java interface based on the LexGrid 2009/01 data model and relies on a LexEVS Proxy and Distributed LexEVS Adapter to provide remote clients access to the native LexEVS API
- LexEVS 5.0 Grid Service An interface which uses the caGRID infrastructure to provide access to the native LexEVS API via the caGRID Services
- See: https://cabig-kc.nci.nih.gov/Vocab/KC/index.php/LexBig_and_LexEVS for information and

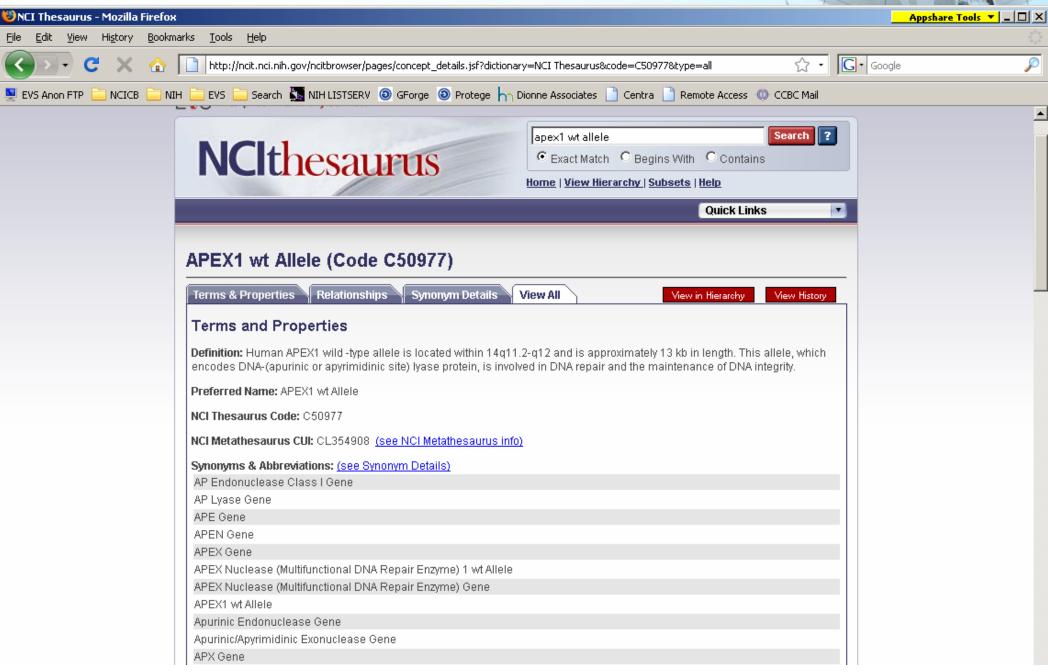


NCI Thesaurus in NCI Bioportal



NCI Thesaurus Browser





EVS Products & Services Are Open

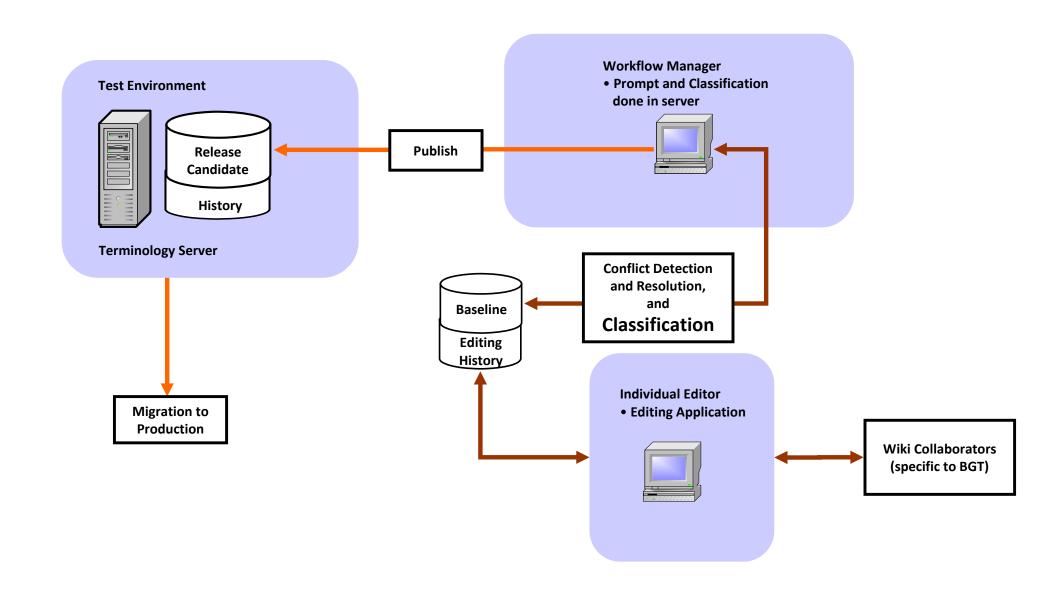
- NCI Thesaurus and BiomedGT Are Open Content <u>ftp://ftp1.nci.nih.gov/pub/cacore/EVS/NCI Thesaurus/ThesaurusTermsofUse.htm</u>
- NCI Metathesaurus is Mostly Open Source
 See Each Source's License
 http://ncimeta.nci.nih.gov/MetaServlet/GenerateSourcesServlet
- NCI EVS Servers Are Freely Accessible
 - On the Web:

http://ncit.nci.nih.gov, http://bioportal.nci.nih.gov/ncbo/faces/index.xhtml, and http://ncimeta.nci.nih.gov

- Via API or caGRID: See: https://cabig-kc.nci.nih.gov/Vocab/KC/index.php/LexEVS_5.0_Components Read Me file for API urls.
- All Software Developed by NCI EVS is Public Open Source: http://ncicb.nci.nih.gov/download/cacoreevsapilicenseagreement.jsp



Current NCIT and BGT Production Environment



Core Challenges



- Content: many domains, users and uses
- Support, Use of Properties, Tracking Provenance
- QA and Editing Consistency
- Editing Tool Requirements
 - Shared Data and Distributed Editing
 - Simplified GUI
 - Editing Consistency
 - Reasoning,
 - Rule Enforcement, etc.

Many NCIt Users and Uses



- Content Challenges: Wide variety of users being supported simultaneously:
 - NCIt provides the foundation for semantics in caBIG (NCI and partners), used by caDSR and by applications to annotate metadata and data
 - Used by FDA and CDISC, to develop and distribute terminology subsets for Structured Product Labels, Study Data Tabulation Model, etc.
 - Used as standalone by number of applications



Additional Use Cases



- Coding and Data (Drug / Clinical) Integration
 - Agents, Clinical Trials and Adverse Events
 - CTEP and DCP clinical trials, unambiguous identifiers
 - PDQ Cancer Clinical Trials Registry & NCI Drug Dictionary
 - Federal Medication Terminologies (FMT)
 - FDA Structured Product Labeling, e.g. pill shape
- Semantic Interoperability in caBIG
 - caTIES/caTissueCore/caMOD/caNanolab
- Harmonization (CDISC/ FDA/ BRIDG/ ISO DT)
- We don't know all the users!



Newer Use Cases



- Query and reasoning against instance data on the Grid
- Federation of ontologies and subontologies (BiomedGT)



Challenge: Supporting Different Requirements with Annotations



- Annotations used to record concept info:
 - Provenance (history tracking, contributors)
 - Lexical information (terms, definitions)
 - Support of external programs (vocab subsets)
 - Authoritative information (e.g. OMIM, NSC)
 - Usage (scope notes)
- Challenge: standard terminology?
 - alt_term, synonym, full_syn
 - definition, def, comments
 - SKOS gaining traction, but lacking in some areas (provenance)

Challenge: Editing Consistency

- Modeling consistency
- Description Logic
 used to construct better hierarchies
- Editor Guide
- Design Guide
- Programmatic support to enforce edit checks and business rules
- QA performed at various stages in the production cycle



Quality Assurance



- Combination of Manual and Automated Processes
 - Consistency checking with reasoner
 - Edit checks built into software
 - Editing and Design documents reviewed and updated periodically
 - Edit checks built into production cycle
 - Internal (ongoing) and External (Periodic) reviews
- See: Journal of Biomedical Informatics 42 (2009) 530–539. The NCI Thesaurus quality assurance life cycle Sherri de Coronado, Lawrence W. Wright, Gilberto Fragoso, Margaret W. Haber, Elizabeth A. Hahn-Dantona, Francis W. Hartel, Sharon L. Quan, Tracy Safran, Nicole Thomas, Lori Whiteman



Edit Checks Configured into SW

Table 1 – Selected edit checks built or configured into the software

Edit Check Entity	Description
Concept Name	Cannot be changed (although preferred term can be); it must begin with letter or underscore.
Preferred Name	Concept must have one and only one Preferred Name; it must match the fully qualified synonym with group PT and source NCI.
Duplicates	Duplicate parents, roles and properties are not allowed.
Definition	Each must have 1 review date, 1 review name, 0 or 1 attributes; no characters less than utf-8 32 allowed; !,? or @ allowed, single spaces only in definitions unless preceded by these special characters.
Retired Concept	Only lead editor can retire concepts, although editors can pre- retire concepts. An editor's note should explain the retirement.
Merged Concept	Only lead editor can merge concepts, although editors can premerge concepts, and pre-merged concept must include an editor note with value of pre-merge annotation and an explanation if needed.
Split Concept	Check that newly created concept is a valid concept. All checks made during normal create are made during a split.
Other	Cannot create or maintain a restriction relationship that points at a retired, pre-retired or pre-merged class.

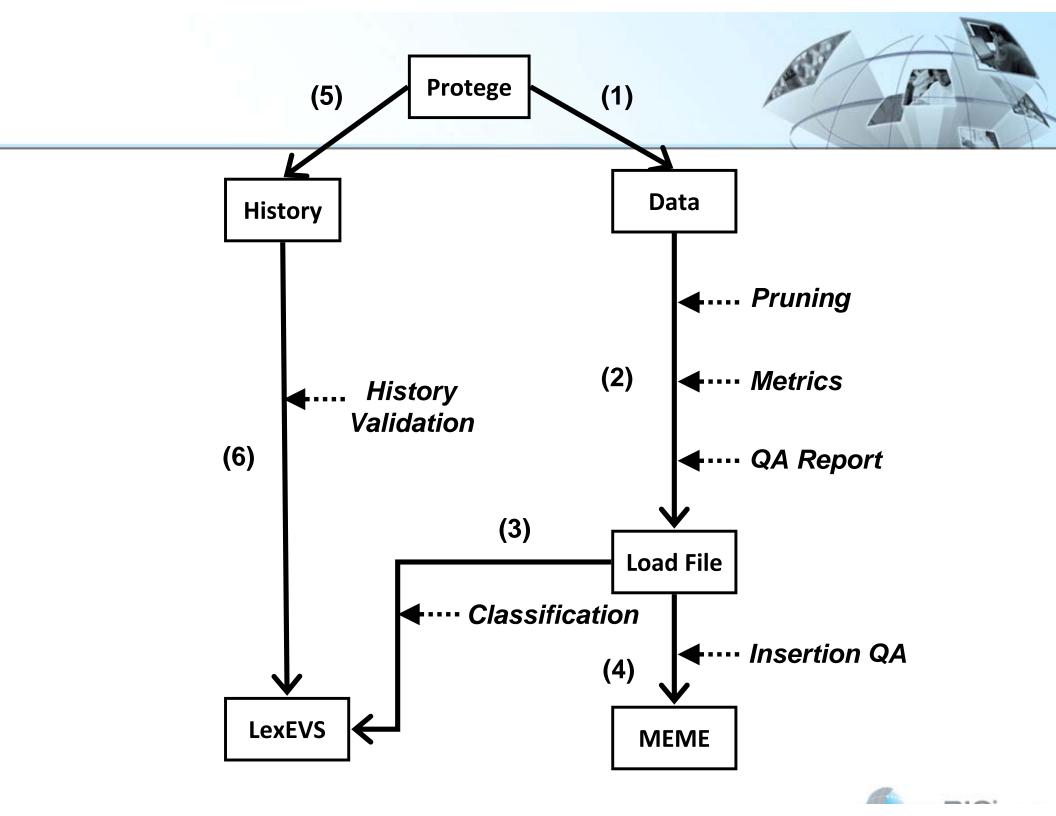


Table 2: QA check steps during history processing

Check Description

Write a log file to characterize edits as create, merge, retire, modify for concept history file.

Sample output (condensed)
674642|C73624|create|30-APR-08|(null)
674643|C38019|split|30-APR-08|C38019

674642|C73024|Cleate|30-AFR-08|(Iluff) 674643|C38019|split|30-APR-08|C38019 674644|C38019|split|30-APR-08|C73624 674659|C3279|modify|30-APR-08|(null) 674661|C72063|modify|30-APR-08|(null) QA Steps During Processing



Check for concepts that have appeared but have no create record. Check for concepts that have disappeared.

(No error example found.)

C67256

Check for history records that don't have matching concepts.

New concepts not found in BSLN2

(C:\...\TDEByNameForProduction-08.08d.xml):

C75530|Hyperimmune_State

Check for invalid merge codes.

(no examples, caught by edit filters)

Check for concepts created and retired within an editing period.

WARNING: New codes created, then retired, but still found in BSLN2:(to be edited manually)

C75602|Motion

687348|C75602|Motion|New|2008-08-22 04:08:12.0|<editor etc>

Multiple modifies of a concept for period combined into 1 history record.

List of all discarded records:

687355|C75604|IDS_Gene|Modify|2008-08-25 10:08:27.0|<editor etc>

Editor identity information removed from records.

687347|C2558|Glufanide_Disodium|Modify|2008-08-22 02:08:04.0|<editor etc>

687348|C75602|Motion|New|2008-08-22 04:08:12.0|<editor etc> 687349|C75603|Artifact|New|2008-08-22 04:08:20.0|<editor etc>

687347|C2558|modify|12-SEP=08|(null) 687348|C75602|create|12-SEP=08|(null) 687349|C75603|create|12-SEP=08|(null)

Discard modify records on new concepts.

Modify records correponding to new codes are discarded:

687355|C75604|IDS_Gene|Modify|2008-08-25 10:08:27.0|<editor etc> 687358|C75604|IDS_Gene|Modify|2008-08-25 10:08:48.0|<editor etc>

Discard modify records on merged concepts.

Modify records correponding to merged codes are discarded:

688366|C15721|Epidemiology_Research|Modify|2008-09-03 09:09:21.0|<editor etc> 688367|C71483|Epidemiologic_Study|Modify|2008-09-03 09:09:23.0|<editor etc>

Editing Tool Requirements



- Shared Data and Distributed Editing
- Reasoning
- GUI for Domain Experts (not ontologists)
- Editing Consistency
 - basic content preferred and alternative terms, definition
 - number and types of restrictions needed
- Complex Operations
 - merge
 - split
 - retirement
- Rule Enforcement & Guidance
 - no duplicate restrictions
 - definition, semantic type

Other Issues/ Challenges



- Training and Maintaining pool of domain expert editors
- Modeling Consistency
 - Description Logic
 - Use to catch errors in model/modeling
 - URU properties
 - However, guidelines and consensus are still necessary
 - are concepts modeled "fully" or
 - are concepts modeled just enough to make them defined
- QA
 - We modify QA process as new issues arise
- Collecting Input from end users and collaborators
 - Not everybody is an ontologist, simple interfaces are necessary, allow domain experts to work on what they know



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 - Larry Wright
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 - Laura Roth, Lori Whiteman,
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- Terminology Servers
 - Mayo, Northrup-Grumman

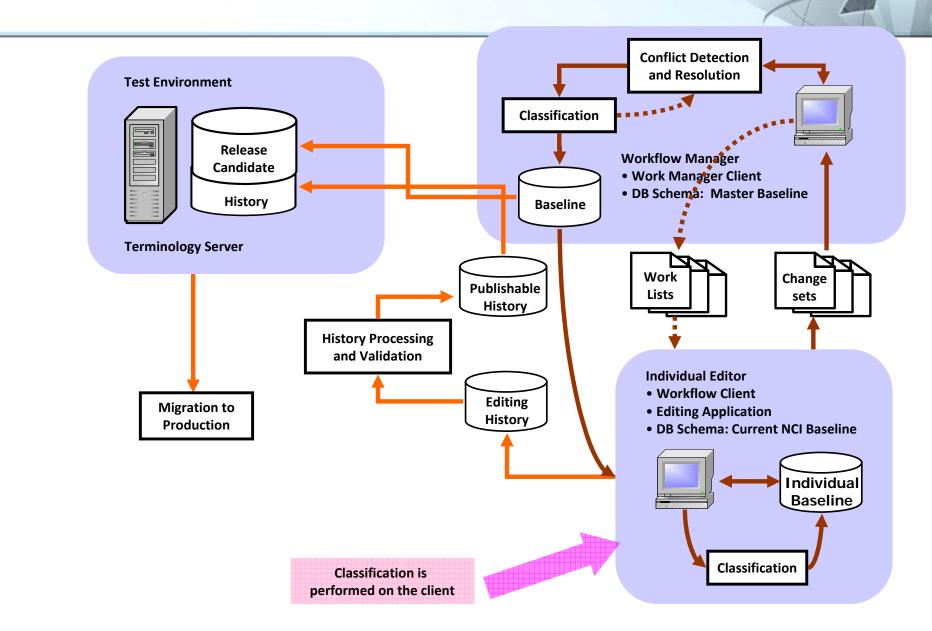
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- Protégé/ NCI Protégé programmers
 - Stanford BMIR staff
 - Dionne Associates
 - Northrup Grumman
 - Clark & Parsia

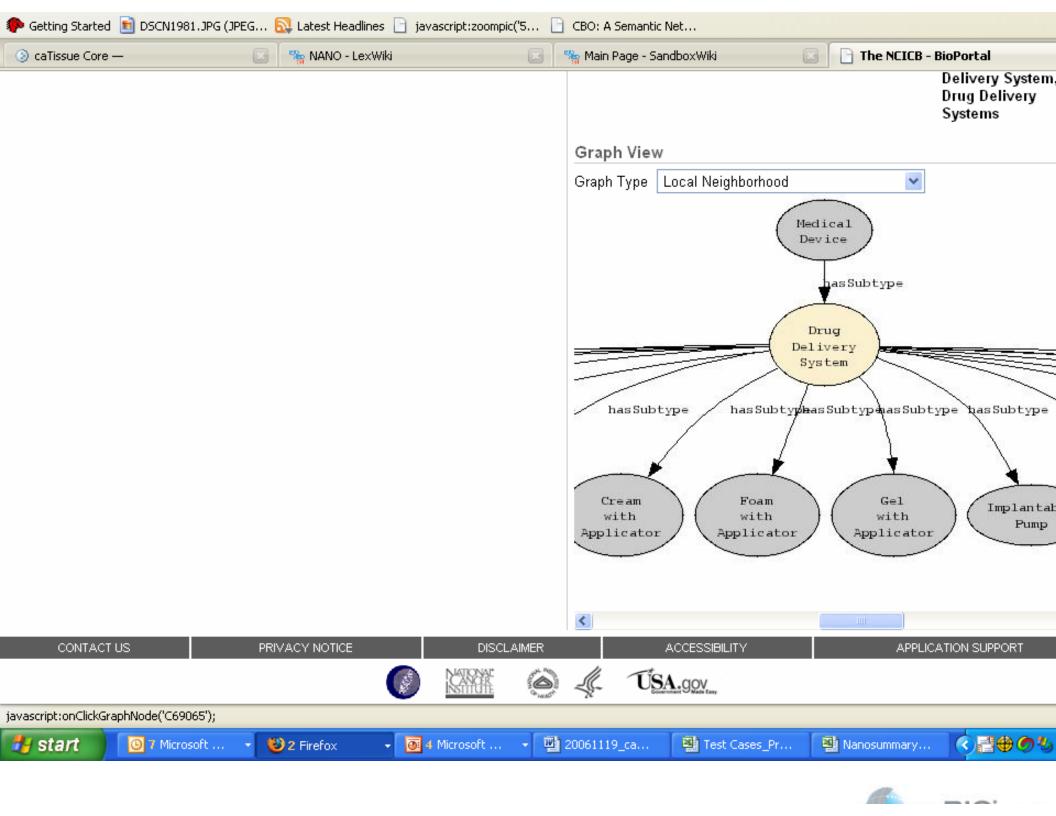


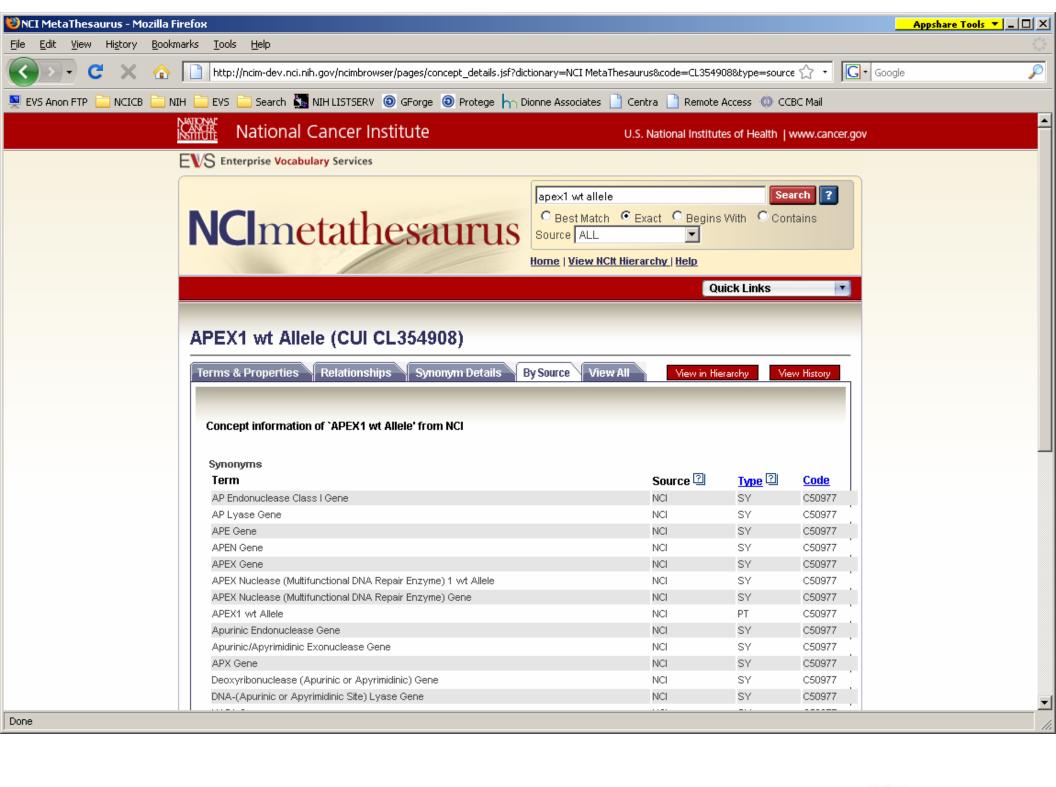


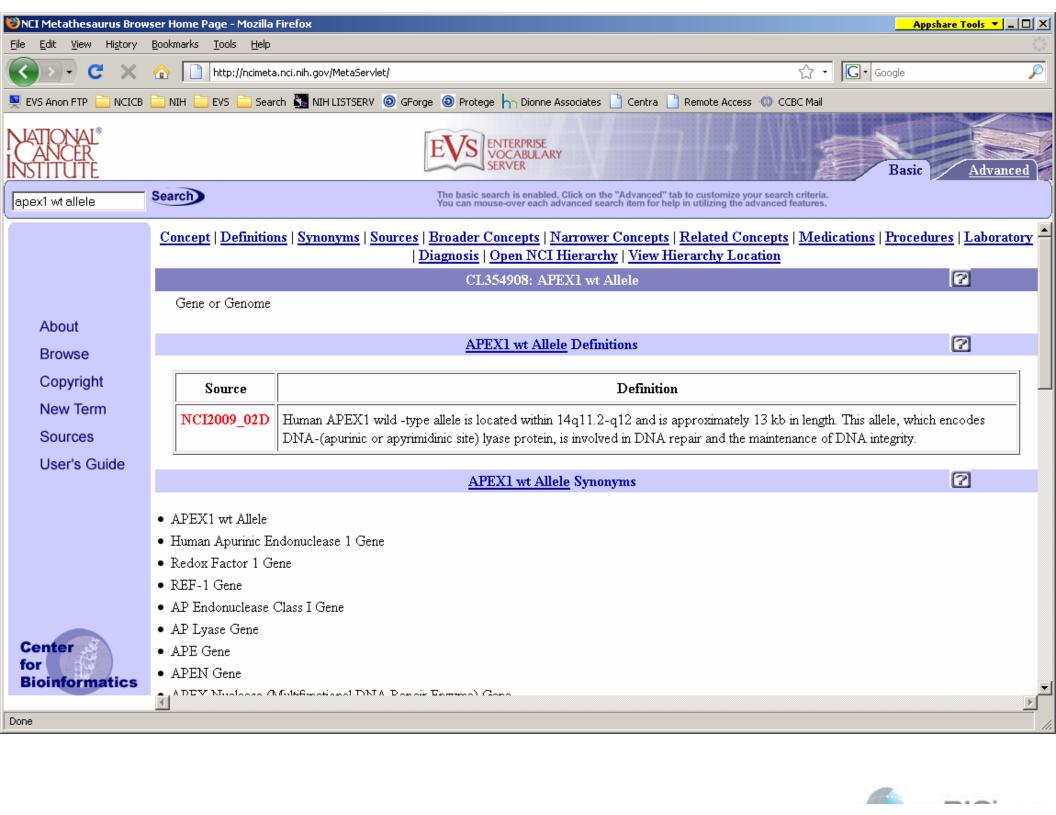
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NCIT Production Environment









NCIt: Example Concept (1 of 2)

Preferred Name: Gastric Mucosa-Associated Lymphoid Tissue Lymphoma

Code: C5266

Semantic Type: Neoplastic Process

Parent Concepts: Extranodal Marginal Zone B-Cell Lymphoma of Mucosa-Associated

Lymphoid Tissue

Gastric Non-Hodgkin's Lymphoma

Synonyms & Gastric MALT Lymphoma

Abbreviations: Gastric MALToma

(subset) MALT Lymphoma of the Stomach

MALToma of the Stomach

Primary Gastric MALT Lymphoma

Primary Gastric B-Cell MALT Lymphoma

Primary MALT Lymphoma of the Stomach

Definition: A low grade, indolent B-cell lymphoma, usually associated with Helicobacter Pylori infection. Morphologically it is characterized by a dense mucosal atypical lymphocytic (centrocyte-like cell) infiltrate with often prominent lymphoepithelial lesions and plasmacytic differentiation. Approximately 40% of gastric MALT lymphomas carry the t(11;18)(q21;q21). Such cases are resistant to Helicobacter Pylori therapy.

NCIt: Example Concept (2 of 2)

Role Relationships (subset) for Gastric Mucosa-Associated Lymphoid Tissue Lymphoma:

Molecular abnormalities:

Disease_May_Have_Cytogenetic_Abnormality: Trisomy 3
Disease_May_Have_Cytogenetic_Abnormality: Trisomy 18

Role group 1:

Disease_May_Have_Cytogenetic_Abnormality: t(11;18)(q21;q21)

Disease_May_Have_Molecular_Abnormality: AP12-MLT Fusion Protein Expression

Histogenesis:

Disease_Has_Normal_Cell_Origin: Post-Germinal Center Marginal Zone B-Lymphocyte

Pathology:

Disease_Has_Abnormal_Cell: Centrocyte-Like Cell

Disease_May_Have_Abnormal_Cell: Neoplastic Monocytoid B-Lymphocyte

Disease_May_Have_Abnormal_Cell: Neoplastic Plasma Cell Lymphoepithelial Lesion

Anatomy:

Disease_Has_Primary_Anatomic_Site: Stomach

Disease_Has_Normal_Tissue_Origin: Gut Associated Lymphoid Tissue

Clinical information:

Disease_Has_Finding: Primary Lesion

Disease_May_Have_Finding: Indolent Clinical Course

Disease_May_Have_Associated_Disease: Hepatitis C