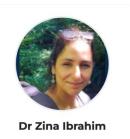
Patient Trajectories with Al: from Generation to Insight

Zina Ibrahim

Department of Biostatistics & Health Informatics, IOPPN

https://mai-research.github.io/





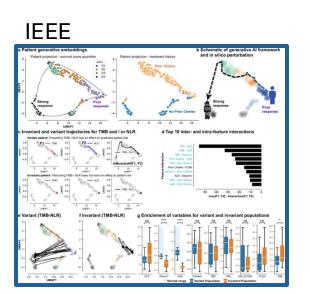


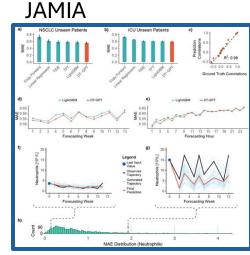


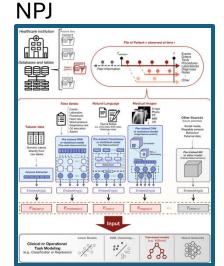


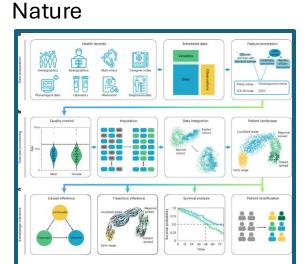
Al In Medicine: Patient Trajectory Prediction

- Trust
- Bias
- Fairness
- Skewed predictions
- Robustness
- Data requirements
- Etc..
- Etc..
- Etc...





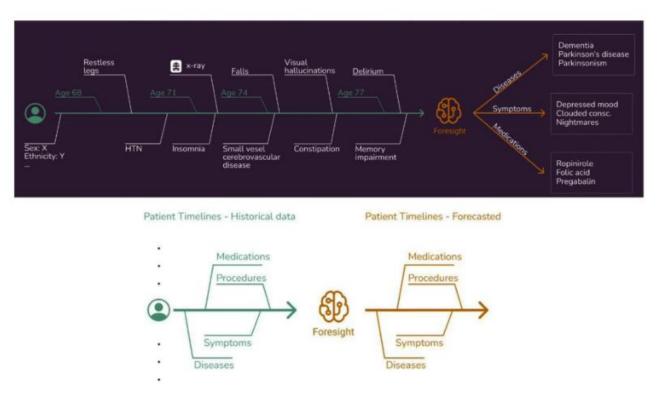




Foresight



THE LANCET



Foresight: GPT-based Forecasting Pipeline





Aim: Evaluate Foresight's ability to serve as a tool for early recognition of IHCA from general wards data.

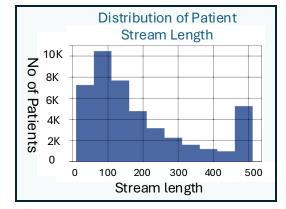
- IHCA is complex & multifaceted
- General ward patients are diverse
 - Long-term and short-term symptoms, diagnoses, procedures etc...
- General wards are sparsely monitored
 - Vital signs and lab tests (numerical) & observations (text)

Aim: Evaluate Foresight's ability to serve as a tool for early

recognition of IHCA from general wards data.

1. Statistical bias: Foresight is good with patients with long trails of documents.

Most patients have less documents (younger patients, patients with less comorbidities, etc)

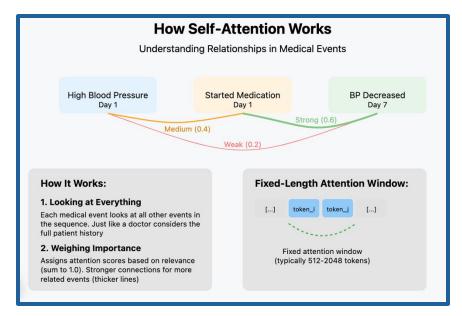


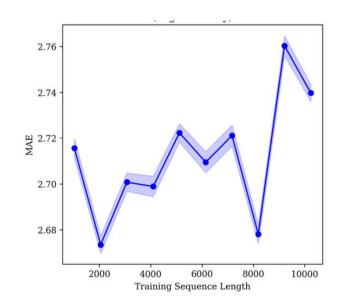
Aim: Evaluate Foresight's ability to serve as a tool for early

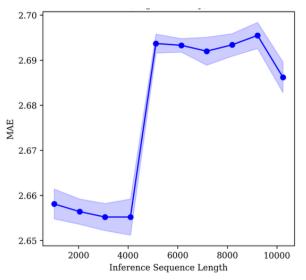
recognition of IHCA from general wards data.

Statistical bias: Foresight is good with patients with long trails of documents.

> Most patients have less documents (younger patients, patients with less comorbidities, etc)







Z 0

Patients

2K

Distribution of Patient Stream Length

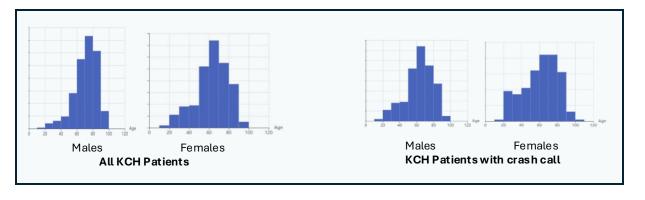
200

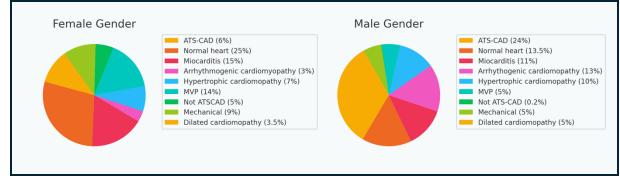
300 Stream length

100

Aim: Evaluate Foresight's ability to serve as a tool for early recognition of IHCA from general wards data.

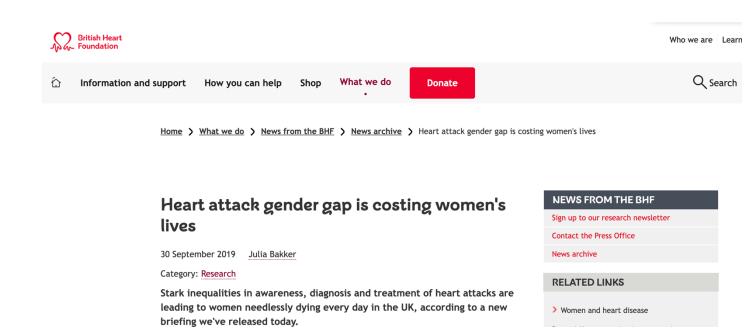
- 1. Statistical bias: Foresight is good with patients with long trails of documents.
- 2. Structural bias: Foresight's forecasts carry along the clinical and documentation bias within its training data





Aim: Evaluate Foresight's ability to serve as a tool for early recognition of IHCA from general wards data.

- 1. Statistical bias: Foresight is good with patients with long trails of documents.
- Structural bias: Foresight's forecasts carry along the clinical and documentation bias within its training data



What we did not do ...

- Train on more data..
 - The status quo
 - It will not help with structural bias

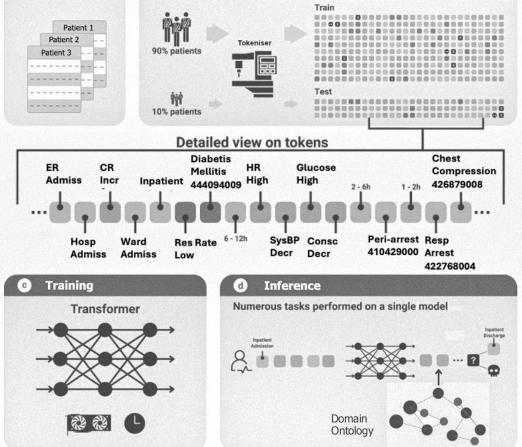
- 1. Statistical bias: Foresight is good with patients with long trails of documents.
- 2. Structural bias: Foresight's forecasts carry along the clinical and documentation bias within its training data

Tokenisation

EHR-oriented representation of medical events

Modified EHR-aligned architecture

Addresses statistical bias



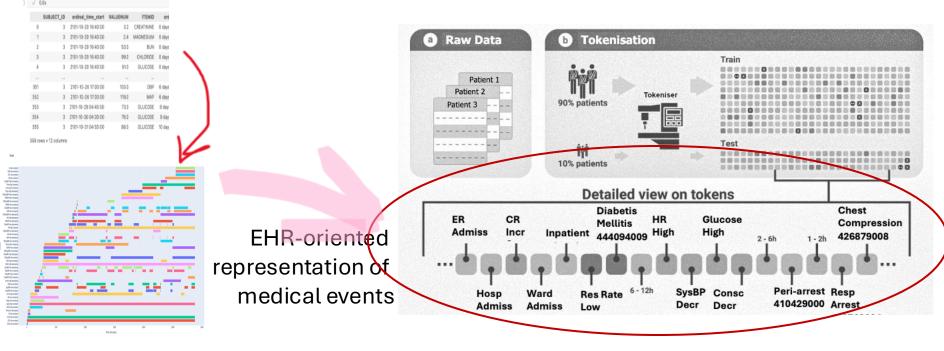
Alignment with medical knowledge/guidelines

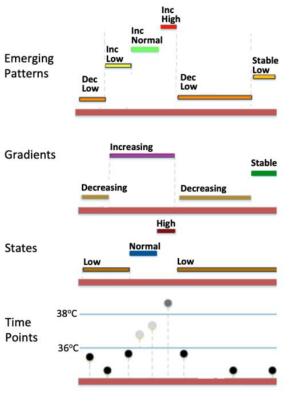
Addresses structural bias

PHASE I

Raw Data

PHASE II



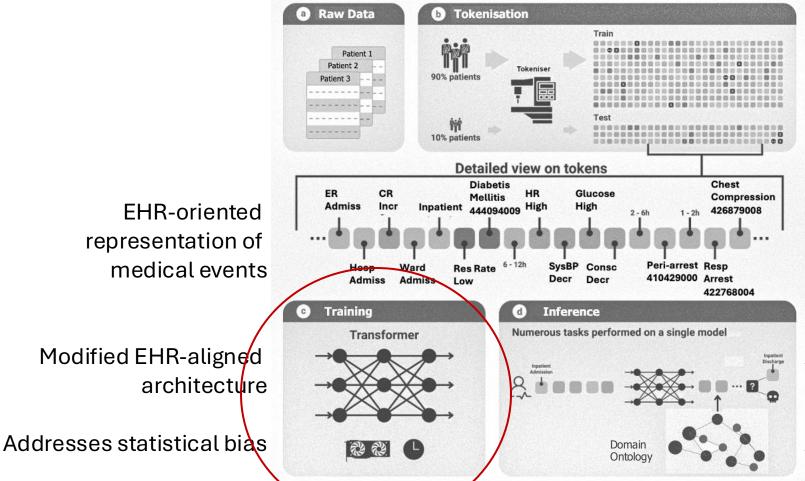


Modeling Rare Interactions in Time Series Data Through
Qualitative Change: Application to Outcome Prediction
in Intensive Care Units

ECAI 2020
G.D. Giacomo et al. (Edx.)
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doi:10.3233/FAIA200298

Modeling Rare Interactions in Time Series Data Through
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Zina Ibrahim 1 and Honghan Wu 2 and Richard Dobson 3



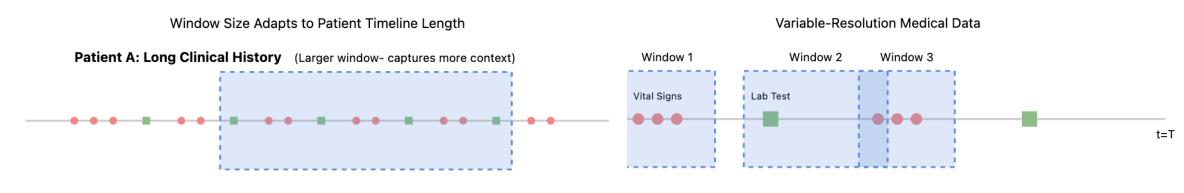
PHASE II

PHASE

Alignment with medical knowledge/guidelines

Addresses structural bias

Phase I: METHOD Architecture- Adaptive Sliding Window Attention





Window size grow with available patient history Balances local & global dependencies

Window size adapts to data density

Handles discrepancies in recording patterns of clinical variables

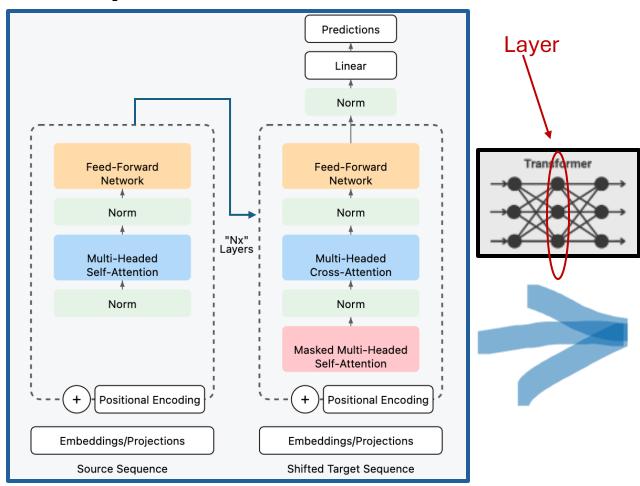
Slides across timeline to capture local temporal relationships



Dr. Linglong Qian

Phase I: Method's Architecture - U-Net Inspired

Skip Attention



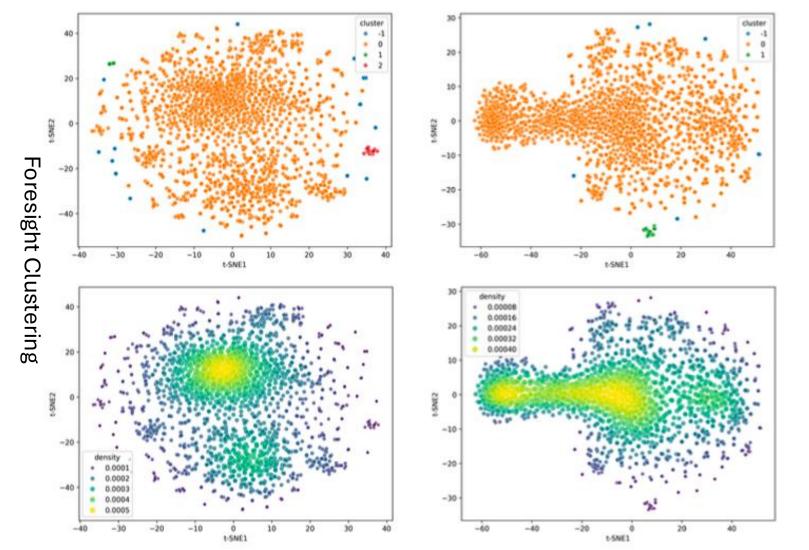
Predictions Linear Norm Feed-Forward Feed-Forward Network Network Norm Norm Lavers Multi-Headed Multi-Headed Self-Attention Cross-Attention Norm Norm Masked Multi-Headed Self-Attention Positional Encoding Positional Encoding Embeddings/Projections Embeddings/Projections Source Sequence Target Sequence

U-Net inspired architecture with dynamically (learnable) stored skip connections: multiscale feature propagation across layers.

Traditional transformer handles information in a sequential fashion

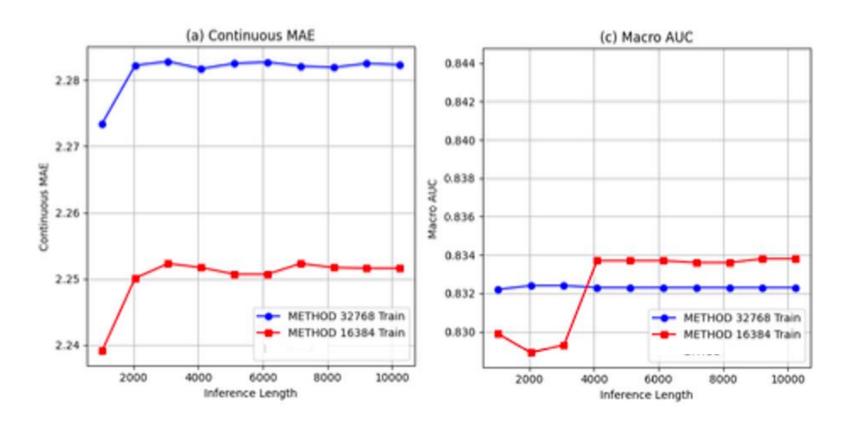
Clustering Results –

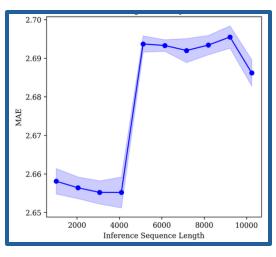
METHOD better separates diversity in CA samples



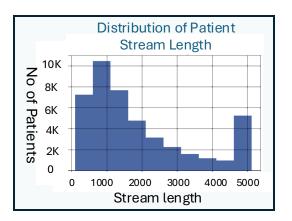
METHOD Clustering

Result: Impressive ability to use 'short sequence' data to perform inference





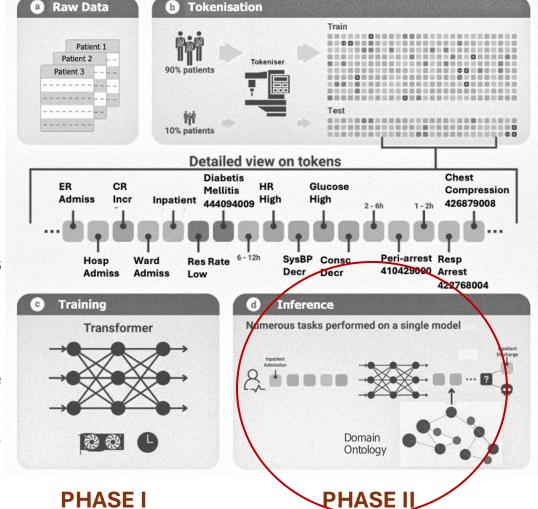
FORESIGHT



EHR-oriented representation of medical events

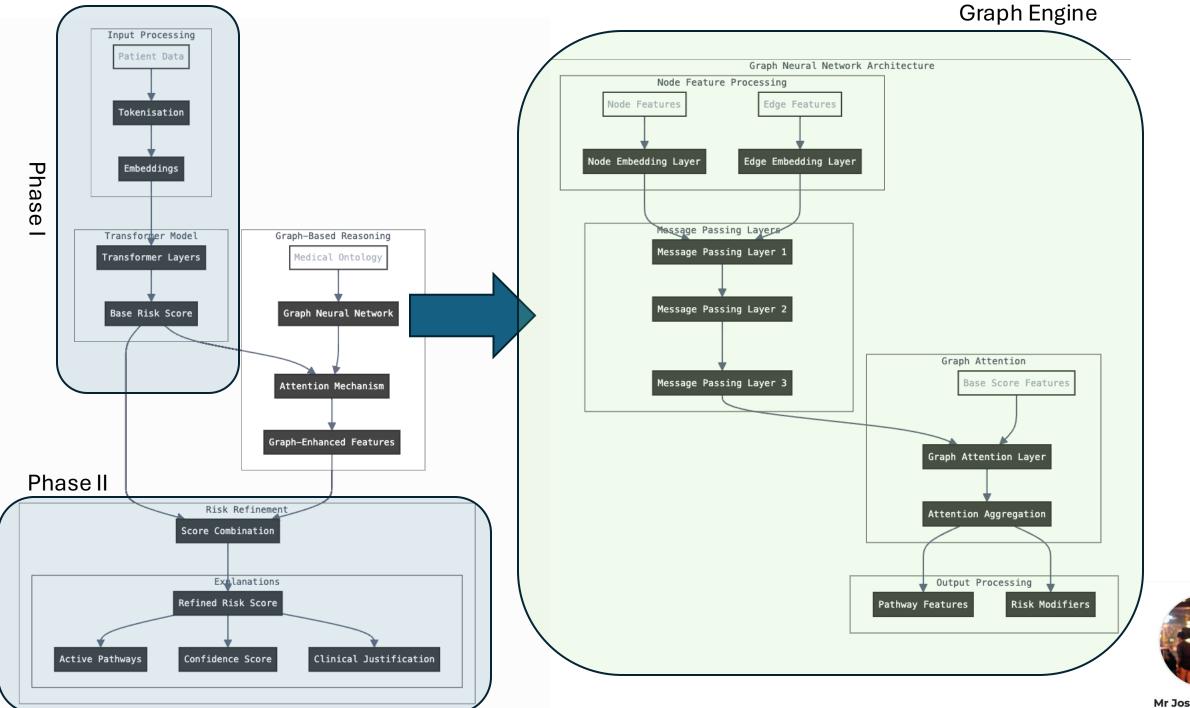
Modified EHR-aligned architecture

Addresses statistical bias



Alignment with medical knowledge/guidelines

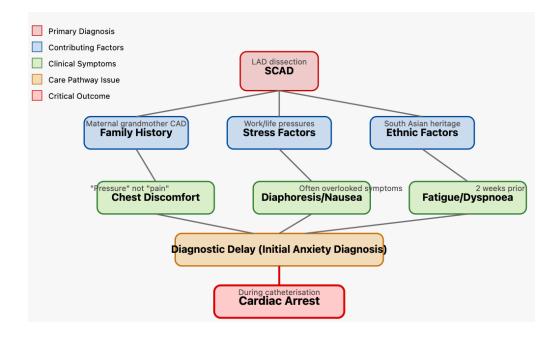
Addresses structural bias





Mr Joseph Arul Raj

Sample Case Analysis



- 32-year-old South Asian female
- No prior cardiovascular history
- BMI: 23.4 (normal range)
- Non-smoker, social alcohol use
- Regular yoga practitioner (3x weekly)
- Family history: Maternal grandmother with premature coronary artery disease (age 49)
- Presenting Symptoms
- Sudden onset chest discomfort (described as "pressure" rather than pain)
- Fatigue and dyspnoea for 2 weeks prior
- Initially dismissed by primary care as anxiety/stress
- No classic male-pattern radiation of pain
- Diaphoresis and nausea present
- Initial ECG: Subtle ST-segment elevation in anterior leads
- Initial troponin: Borderline elevated (0.08 ng/ml)

Take-home Messages

 Off-the-shelf Transformer architectures are less than ideal for EHRs

- Talk to me about:
 - Data-driven (generative) models are not the best we can do!