Understanding Model Predictions

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Interpretable versus Explainable

Interpretable versus Explainable

An *interpretable* model:

It is easy to for us to understand why the model makes the predictions that it makes.

An *explainable* model:

One or more techniques can be used to provide a human-friendly explanation for each model prediction.

Interpretable

Explainable



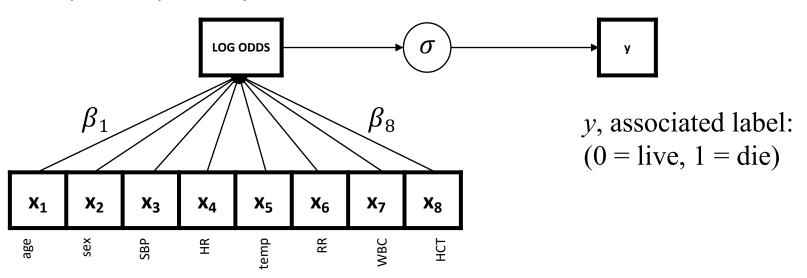


We can interpret APACHE III

- Suppose a new patient is transferred to the ICU, and the (logistic regression) model predicts their mortality risk is high.
- **Q:** Is it hard to figure out why it made that prediction?

We can interpret APACHE III

- Suppose a new patient is transferred to the ICU, and the (logistic regression) model predicts their mortality risk is high.
- **Q:** Is it hard to figure out why it made that prediction?
- **A:** No. You can look at the coefficients to see which variables increased and decreased the predicted probability.

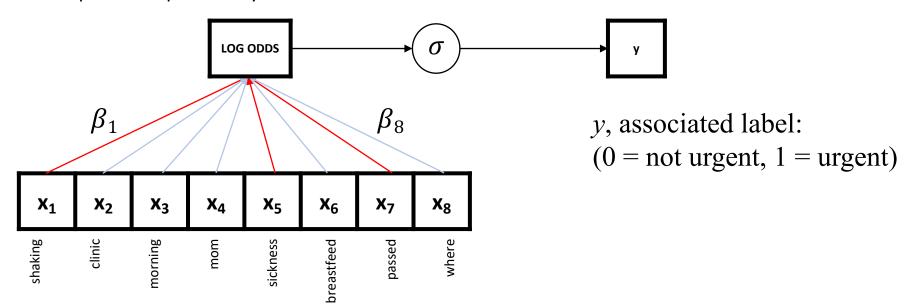


We can interpret a count-based NLP model

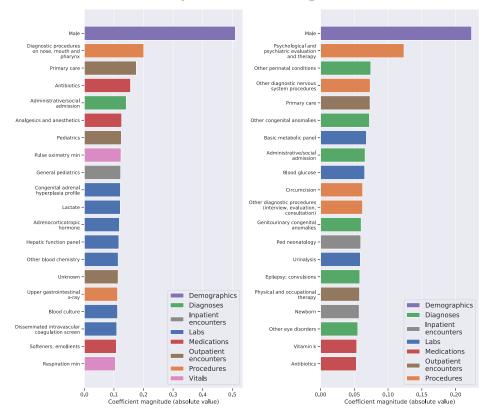
- Suppose you use logistic regression with count-based features, and your model predicts that that an SMS you receive is urgent.
- **Q:** Is it hard to figure out why it made that prediction?

We can interpret a count-based NLP model

- Suppose you use logistic regression with count-based features, and your model predicts that that an SMS you receive is urgent.
- **Q:** Is it hard to figure out why it made that prediction?
- **A:** No. You can look at the coefficients to see which words increased and decreased the predicted probability.



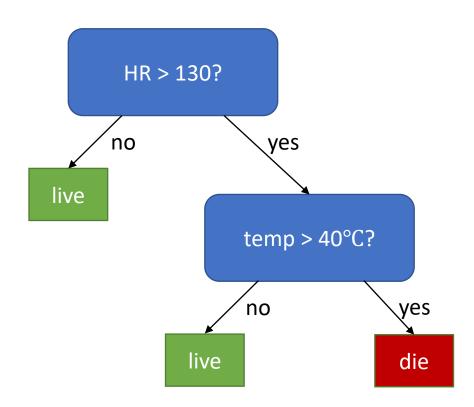
In linear models, parameter values show the effect of the corresponding feature.



Other Interpretable Models?

Other Interpretable Models?

• Decision Tree



Can we interpret a deep learning NLP model?

- Suppose you apply a deep neural network to a sequence of word vectors, and your model predicts that that the SMS you receive is urgent.
- **Q:** Is it hard to figure out why it made that prediction?

Can we interpret a deep learning NLP model?

- Suppose you apply a deep neural network to a clinical note, and your model predicts it is describing a pulmonary embolism.
- **Q:** Is it hard to figure out why it made that prediction?

Chief Complaint: Shortness of breath History of the Present Illness: Mr. is a previously healthy 56-year-old gentleman who presents with a four day history of shortness of breath, hemoptysis, and right-sided chest pain. He works as a truck driver, and the symptoms began four days prior to admission, while he was in Jackson, MS. He drove from Jackson to Abilene, TX, the day after the symptoms began, where worsening of his dyspnea and pain prompted him to go to the emergency room. There, he was diagnosed with pneumonia and placed on Levaquin 500 mg daily and Benzonatate 200 mg TID, which he has been taking for two days with only slight improvement. He then drove from Abilene back to Greensboro, where he resides, and continued to experience shortness of breath, right sided chest pain, and hemoptysis. He presented to an urgent care office in town today, and was subsequently transferred to the Moses Cone ER due to the provider's suspicion of PE. The right-sided pain is located midway down his ribcage, below the axilla. This pain is sharp, about 7/10 in severity, and worsens with movement and cough. Pressing on the chest does not recreate the pain. He feels that the pain has improved somewhat over the past two days. The hemoptysis has been unchanged since it began; there is not frank NI P blood, but his sputum has been consistently blood-tinged. The blood seems redder at pulmonary night. The dyspnea has been severe, and it is difficult for him to walk more than across a room. He states that he feels as though there is a "rattling" in his chest. At baseline, he Encoder embolism experiences no dyspnea on exertion and has no history of COPD or other respiratory logistic problem. He is a smoker, smoking a little less than a pack a day for thirty-five years. Past history is notable for the fact that he experienced transient left lower leg swelling regression from below the knee down - and pain several weeks ago during a cross-country haul. He also notes a four day history of decreased appetite, poor sleep, and subjective fever and chills, with a measured fever of 103 in the hospital in Abilene. He had a bout of pneumonia about two months ago, but has been healthy for the most part and denies any chronic medical conditions. Currently he is fairly comfortable, with morphine helping with the pain. He has no history of a clotting disorder, no cardiac history, and denies any label chest trauma or aspiration. He has had no sick contacts. Past Medical History: 2. Bilateral thumb surgeries, secondary to two separate injuries sustained while working with machinery No regular medications, over-the-counter medications, or supplements. Has taken two days of the medications prescribed by the ER in Abilene: Levaquin 500 mg vector of daily and Benzonatate 200 mg TID. document attributes document

Can we interpret a deep learning NLP model?

- Suppose you apply a deep neural network to a sequence of word vectors, and your model predicts that the SMS you receive is urgent.
- **Q:** Is it hard to figure out why it made that prediction?
- **A:** Yes, it's hard to figure out, because the effect of a given word on model predictions depends on the rest of the document.
- So, we can't directly interpret the model's predictions.
- However, we have ways of asking the model to explain itself.

Feature importance in complex models

• Permutation importance

If I shuffle around the patients' ages, how much do model predictions change?

Gradient-based methods

As I slowly change the patients' ages, how quickly do model predictions change? (saliency maps)

As I change the patient's age to a <u>baseline</u> value, how much do model predictions change?

(integrated gradients)

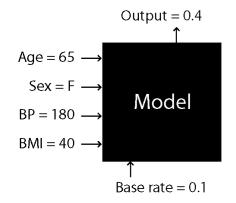
SHAP Values

If I excluded age from the model, how much would the prediction change?

Most common: SHAP Values

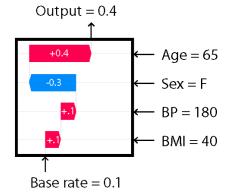
Key differences compared to interpretation:

- 1. Explanations apply to <u>individual</u> <u>predictions</u>, not the model as a whole
- 2. Computing them can be computationally expensive

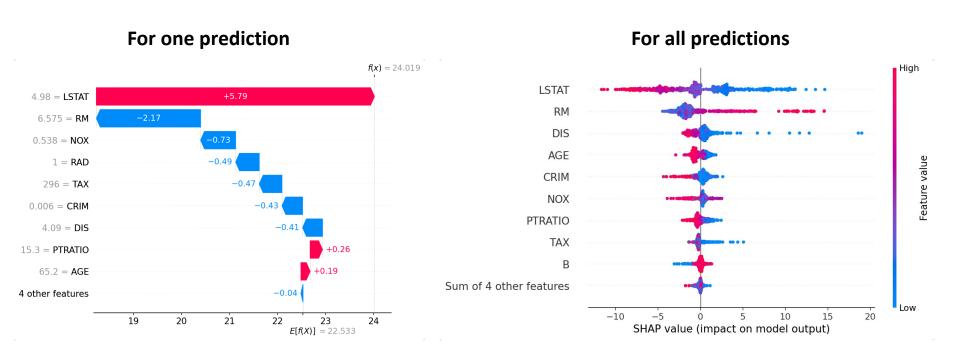




Explanation



SHAP Values



https://github.com/slundberg/shap

We can explain a CNN's predictions

- Suppose you apply a CNN to images of animals, and the model predicts that an animal is a meerkat.
- **Q:** Is it hard to figure out why it made that prediction?
- A: Yes, an explanation can be provided:









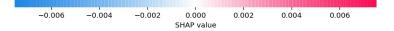




 Similarly, we can identify passages within a text document that would change predictions most if they were removed.

Caveats:

- This is for a single example; not clear how to summarize across all examples for images and text
- Can be very computationally expensive



Natural Language Processing: Which Text is Predictive?

Passage (from note) | Change in predicted autism dx log-odds

subjective intake chief complaint problems with sleep, inattention, and behavioral concerns both in the home and school setting. DATE, recently more anger and recent tic like behavior

psychologist presenting problem NAME is a 3 year, 4 month old female who was referred for a neurodevelopmental assessment due to concerns regarding her overall development, behavior, and social emotional functioning and to assess for autism spectrum disorder



Developmental and behavioral concerns are highly predictive

problem list diagnosis • disruptive behavior disorder • impaired speech articulation • daytime enuresis • other subjective visual disturbances • hypermetropia of both eyes • adhd attention deficit

problem list diagnosis • anemia of prematurity • history of colitis • meconium tox for the • extreme immaturity of newborn, 27 completed weeks • nasal congestion of newborn • presumed



complications are also highly predictive

Premature birth and perinatal

motor delay DATE • hypotonia DATE • clasped thumb DATE • polydactyly +6.74 DATE • developmental

therapy NAME was seen for developmental support during rop eye exam today. +6.65 the

Subramanian V, Engelhard MM, Berchuck SI, Chen L, Carin L. SpanPredict: Extraction of Predictive Document Spans with Neural Attention. NAACL 2021

Saliency maps from Esteva et al.

a. Malignant Melanocytic Lesion





d. Benign Melanocytic Lesion





Inflammatory Condition





Saliency maps show gradients for each pixel with respect to the CNN's loss function. Darker pixels represent those with more influence.

b. Malignant Epidermal Lesion





e. Benign Epidermal Lesion





h. Genodermatosis





c. Malignant Dermal Lesion





f. Benign Dermal Lesion





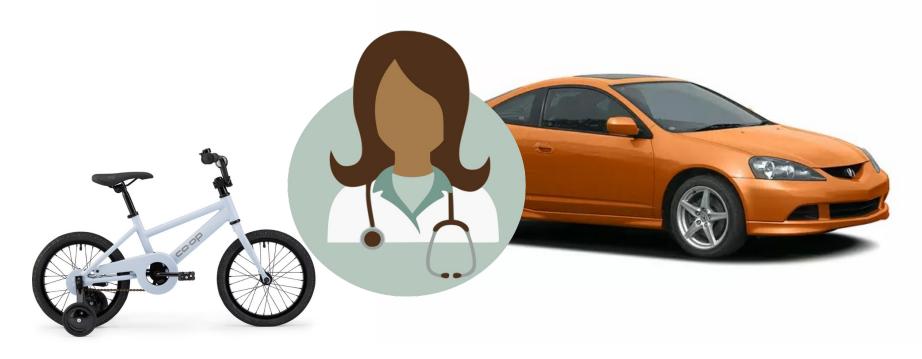
i. Cutaneous Lymphoma





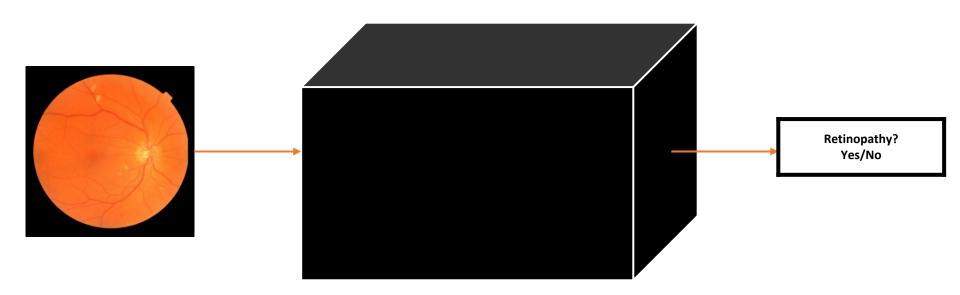
How would this compare to a dermatologist's explanation?

Interpretable ? Explainable where does clinician decision-making fall on this spectrum?

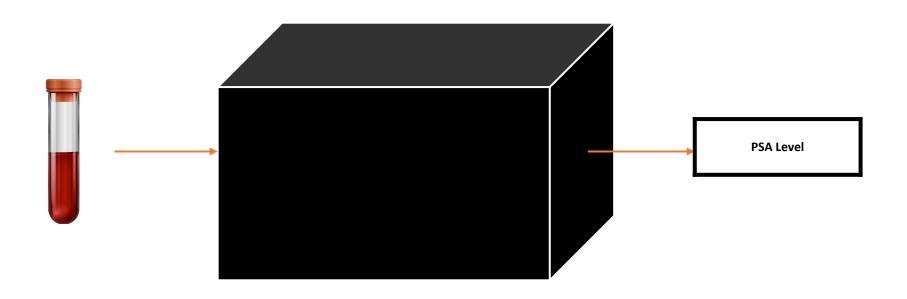


Perspectives on Interpretability

Compared to simpler models, DNNs are a black box. We can explain model predictions, but it's case by case.



Is PSA measurement a black box?



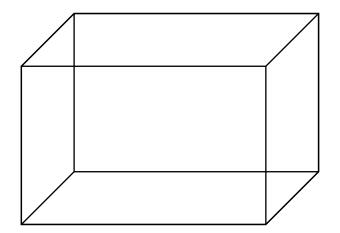
Is clinician decision-making a black box?



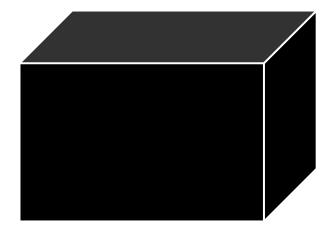
Two competing perspectives

Interpretability will be central to FDA regulation of clinical decision support.

We can only use tools if we fully understand how they work



We just need to make sure our tools are *valid* and *reliable*



Conclusions

- A predictive model is *interpretable* if it's easy to understand how it works in other words, the effect of features on model predictions
- Neural networks are not *interpretable*, but we have techniques that can quantify the effect of features on each individual prediction in other words, *explain* the prediction
- There are a wide range of perspectives on the importance of interpretability and explainability. However, it appears the FDA regulation of clinical decision support will turn on whether the tool is interpretable.
- Interpretable models still do not tell us anything about causation.