

From Fuzzy Questions to Validated Facts

Multi-agent biomedical research grounded in canonical identifiers, powered by MCP



ORCHESTRATION

lifesciences-deepagents

LangGraph supervisor + 7 specialist subagents

DATA LAYER

lifesciences-research

12 MCP servers, 34+ tools, 691 tests

The Problem: LLMs Hallucinate in Biomedicine

- LLMs invent trial IDs, fabricate drug mechanisms, conflate gene symbols
- In biomedicine, wrong answers have real consequences
- Core issue: no grounding in canonical identifiers (CURIEs)

WHAT THE LLM SAYS

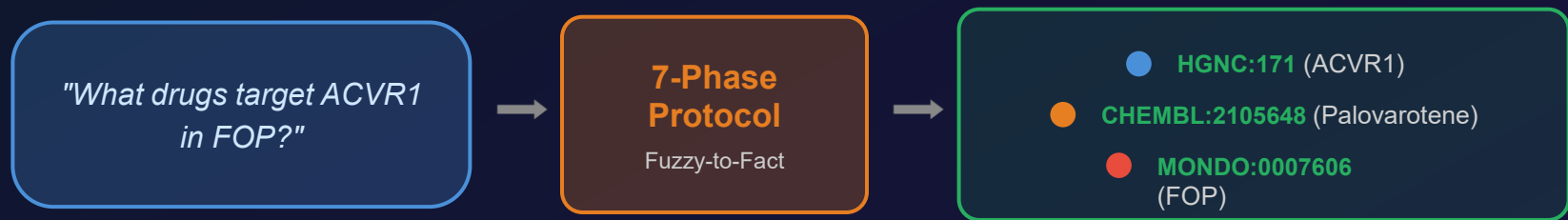
ACVR1 inhibitor Saracatinib (Phase 3)

WHAT THE DATABASE SAYS

Saracatinib: Src/ABL inhibitor, FOP Phase 2 (NCT04307953)

Every unchecked claim is a potential patient safety risk

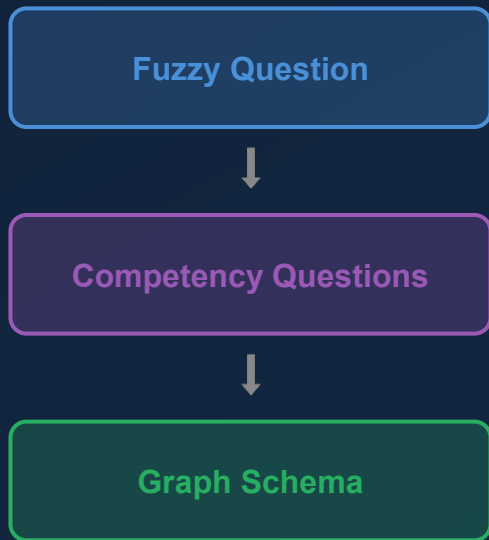
The Vision: Every Claim Traceable



Every node has a CURIE. Every edge has a source. Every claim is verifiable.

What Are Competency Questions?

- A CQ is a natural-language question that defines what the system **MUST** be able to answer
- From ontology engineering — like unit tests for a knowledge graph
- Analogy: A restaurant DB needs CQs like "Which restaurants serve Italian within 2 miles?" to know what nodes/edges to build
- CQs bridge fuzzy user intent and graph schema



CQs Applied: ACVR1 / FOP

"What drugs target the ACVR1 pathway in FOP?"

ANCHOR

What is the canonical ID for ACVR1?

ENRICH

What protein does it encode?

EXPAND

What proteins interact with it?

TRAVERSE_DRUGS

What drugs target ACVR1 or its pathway?

TRAVERSE_TRIALS

Are there active clinical trials?

VALIDATE

Can we verify each fact?

15 CQs in catalog — each maps to one or more protocol phases

CQs as Acceptance Criteria



PASS — Generated graph matches gold standard

How It Works

Each competency question defines a gold standard path — the expected chain of entities and relationships with canonical CURIEs.

After the system runs, compare the generated graph against the gold standard. This transforms subjective evaluation into measurable pass/fail tests.

15 CQs in our catalog cover drug mechanisms, gene networks, clinical trials, and safety profiling.

Two Repositories, One Protocol

lifesciences-deepagents

Brain: Orchestration + Reasoning

- LangGraph supervisor
- 7 specialist subagents
- React UI
- think_tool reflection



MCP
(JSON-RPC)

lifesciences-research

Backbone: 12 MCP Servers

- 34+ tools
- 691 tests
- FastMCP Cloud gateway
- Fuzzy search → CURIE resolution

Separation of concerns: API volatility isolated at the MCP boundary

The MCP Data Layer: 12 Databases

Each server: fuzzy search → candidate ranking → strict CURIE lookup

● HGNC

Fast, reliable

● UniProt

Protein data

● STRING

1 req/s limit

● BioGRID

0.5s delay

● ChEMBL

Unreliable (500s)

● PubChem

Chemical data

● IUPHAR

Pharmacology

● Open Targets

ChEMBL fallback

● ClinicalTrials.gov

v2 API, stable

● WikiPathways

Pathway data

● Ensembl

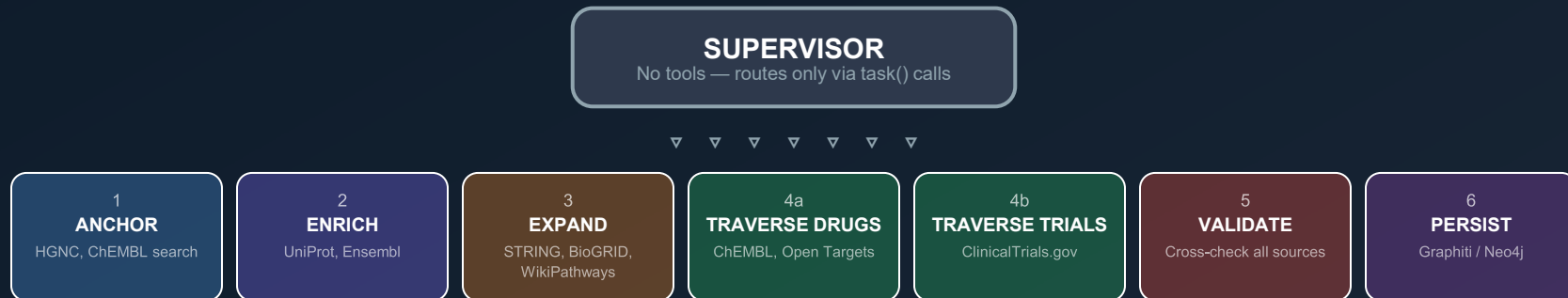
Genomic data

● Entrez / PubMed

Literature

Gateway composes all 12 into single FastMCP Cloud endpoint

Supervisor + Specialist Pattern



think_tool forces reflection after each API call (Think-Act-Observe)

ANCHOR — What are we talking about?

- Resolve fuzzy terms to canonical identifiers
- HGNC is always the first call (fastest, most reliable)
- Max 3 search attempts per entity
- If ChEMBL fails → fall back to Open Targets

RESOLUTION EXAMPLE

"ACVR1" → HGNC:171

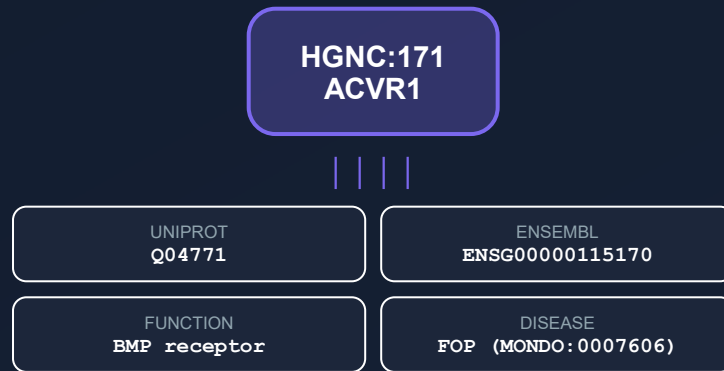
"Saracatinib" → ChEMBL:217092

"FOP" → MONDO:0007606

PHASE 2

ENRICH — What do we know about these?

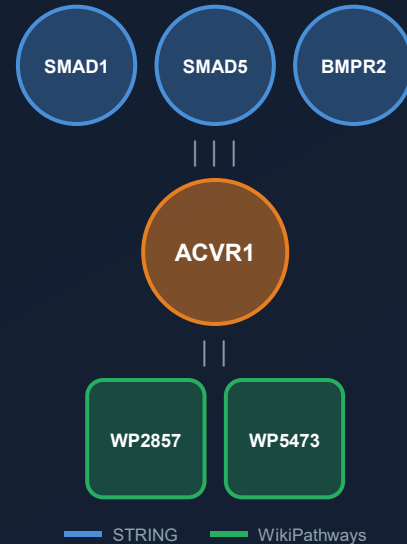
- HGNC:171 → UniProt [Q04771](#), Ensembl [ENSG00000115170](#)
- Function: BMP type-1 receptor serine/threonine kinase
- FOP: ultra-rare, gain-of-function ACVR1 mutations
- Cross-database ID mapping builds the entity profile



PHASE 3

EXPAND — What connects to ACVR1?

- **STRING:** ACVR1 phosphorylates SMAD regulators
- **WikiPathways:** Mesodermal commitment (WP2857), Cytokine receptor interaction (WP5473)
- **BioGRID:** Physical + genetic interactions
- Network grows from single node to full neighborhood



PHASE 4A

TRAVERSE DRUGS — What drugs target this network?

ChEMBL API call

→ 500 Error

Open Targets GraphQL

Think-Act-Observe loop evaluates sufficiency

DRUG CANDIDATES

Palovarotene

CHEMBL:2105648

RAR-gamma agonist — **Approved**

Eptotermin Alfa

ACVR1 agonist — **Phase 2**

Dibotermin Alfa

ACVR1 agonist — **Phase 2**

ChEMBL unreliable → Open Targets is the automatic fallback

TRAVERSE TRIALS — Are these in clinical trials?

- Drug names + disease context: "Palovarotene AND FOP"
- ClinicalTrials.gov v2 API: stable, structured JSON
- No FOP trials for Eptotermin / Dibotermin
- *Absence of evidence identifies repurposing gaps*

SEARCH RESULTS

Palovarotene + FOP

NCT04307953
(Phase 2)



Palovarotene + FOP

NCT03312634
(Phase 3)



Eptotermin Alfa + FOP

No results



Dibotermin Alfa + FOP

No results



PHASE 5

VALIDATE — Can we verify every claim?

- NCT ID verification against ClinicalTrials.gov
- Mechanism cross-checks across ChEMBL + Open Targets
- PubMed literature confirmation
- **Caught 2 hallucinated identifiers in actual run**
- Each fact: **VALIDATED** or **INVALID** with reason

VALIDATION CHECKLIST

HGNC:171 = ACVR1 ✓ **VALIDATED**

NCT04307953 exists ✓ **VALIDATED**

NCT03312634 exists ✓ **VALIDATED**

CHEMBL:999999 ✗ **INVALID — not found**

Mechanism match ✓ **VALIDATED**

PERSIST — Save to Knowledge Graph

- Structure findings as typed nodes and edges
- Save to Graphiti/Neo4j with full provenance
- System fails soft if Graphiti unavailable
- Validated answer complete after Phase 5
- Enables cross-query knowledge accumulation

ACVR1 (Gene)

Palovarotene (Drug)

FOP (Disease)

ACVR1 → targets → FOP

Palovarotene → treats → FOP

Palovarotene → modulates → ACVR1



Save to Neo4j

The React UI: Transparency at Every Step

Real-Time Status

SubAgentIndicator shows which specialist is active

Phase progress visible throughout run

Tool Transparency

Expandable tool call args and results

See exactly what APIs were called

Human-in-the-Loop

Approve, reject, or edit tool arguments

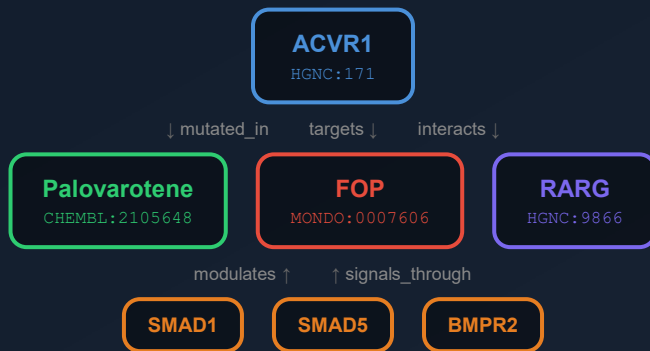
Interrupt handling via `resumeInterrupt()`

Thread Persistence

Thread ID in URL via `nuqs`

Resume conversations across sessions

Final Output: The Validated Knowledge Graph



6 entities resolved

3 drugs found

4 trials checked

5 facts validated

Run time: ~3.5 min

Cost: ~\$0.49

Every claim traces to HGNC, Open Targets, WikiPathways, or PubMed

Ecosystem: Three Implementations

Claude Code Skills

ORCHESTRATION

Skill scripts

DURABILITY

Session-only

UI

Terminal

BEST FOR

Prototyping

Deep Agents

CURRENT

ORCHESTRATION

LangGraph

DURABILITY

Thread persistence

UI

React

BEST FOR

Interactive research

Temporal Workflows

ORCHESTRATION

Temporal

DURABILITY

Built-in replay

UI

Dashboard

BEST FOR

Production pipelines

All share the same [lifesciences-research MCP](#) data layer

Key Takeaways

1 Grounding in CURIEs is non-negotiable in biomedicine

2 Competency questions = measurable acceptance criteria for knowledge graphs

3 Supervisor + specialist pattern with tool isolation prevents cross-contamination

4 MCP decouples agent logic from API volatility