Improving case-based search of clinical trials

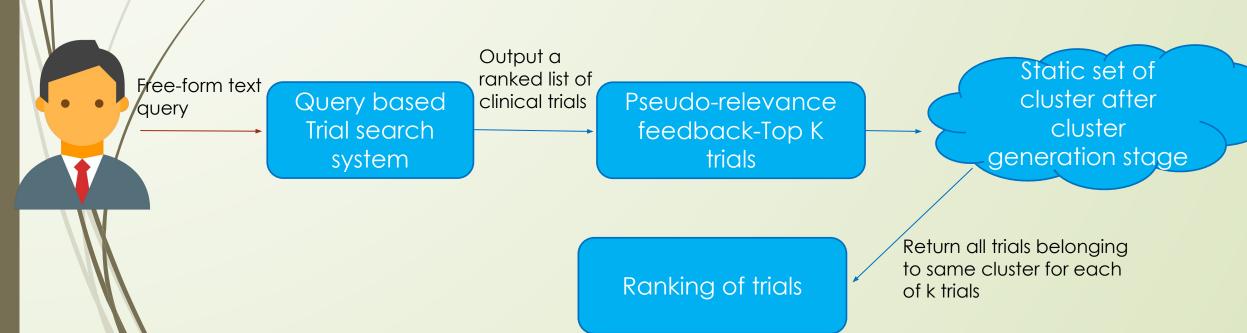
PROBLEM STATEMENT



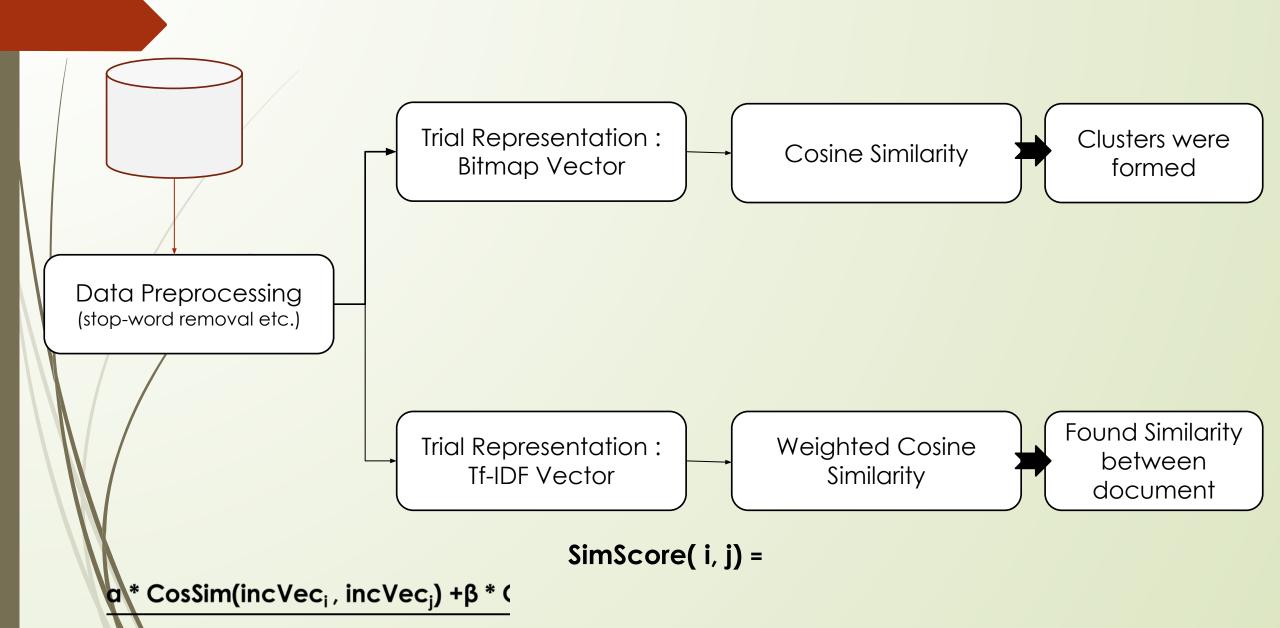
CASE-BASED TRIAL SEARCH SYSTEM

HOW CLUSTERING FIT IN CASES-BASED SEARCH

- 1. DEVELOP OPTIMAL TRIAL REPRESENTATION WHICH BEST IMPROVES CLUSTERING QUALITY.
- 2. BETTER THE CLUSTERING QUALITY BETTER IS OUR CASE BASED SEARCH RETRIEVAL RESULTS
- 3. SINCE GENERAL USER HAS PROBLEM REFORMULATING EFFECTIVE QUERY, WE USE PSUEDO RELEVANCE OF TOP K TRIALS AS USER INPUT.



Previous Work



RESULTS- KNN CLUSTERING

SIMILARITY	TRIAL 1	TRIAL 2
0.9	NCT01977131	NCT01239862
0.8	NCT02066558	NCT01750723
0.9	NCT01971255	NCT01646138
0.7	NCT01813084	NCT01400906
0.9	NCT01711593	NCT01612936
0.7	NCT01651377	NCT01062945
0.8	NCT01489306	NCT01355016
0.9	NCT01405651	NCT01297582

ONLY A FEW CLUSTERS WERE FORMED AND ONLY THE DOCUMENTS WITH COSINE SIMILARITY SCORE CLOSE TO 1 WERE SIMILAR.

ISSUES FACED IN PREVIOUS METHODS

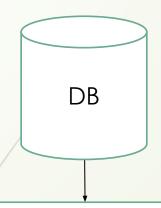
- 1. MEMORY OVERFLOW
- 2. SMALL CLUSTER

POST MIDSEM

METHODS USED

- JC SIMILARITY ON CONDITIONS LIST- KNN CLUSTERING
- JC SIMILARITY ON MESH THESAURUS
- COSINE SIMILARITY ON UMLS MODIFIED TRIAL
- DBSCAN CLUSTERING
- ☐ ABLATION ANALYSIS: K-MEANS CLUSTERING

JC SIMILARITY ON CONDITIONS LIST



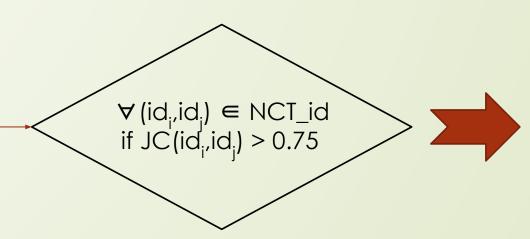
NCT __id1: <condition1, condition2....>

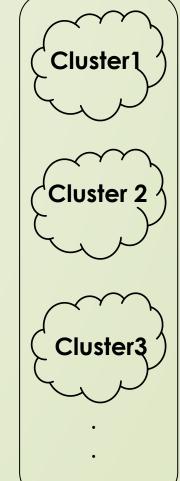
NCT __id2: <condition1, condition2....>

NCT __id3: <condition1, condition2....>

NCT __id4: <condition1, condition2....>

NCT __id5: <condition1, condition2....>







RESULTS

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Safety, Pharmacokinetic and Preliminary Efficacy Study of AC0010MA in Advanced Non Small Cell Lung Cancer

Δ

The safety and scientific validity of this study is the responsibility of the study sponsor and investigators. Listing a study does not mean it has been evaluated by the U.S. Federal Government. Know the risks and potential benefits of clinical studies and talk to your health care provider before participating. Read our disclaimer for details.

ClinicalTrials.gov Identifier: NCT02448251

Recruitment Status 6: Recruiting

First Posted 0: May 19, 2015

Last Update Posted 0: June 19, 2018

See Contacts and Locations

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Risk Factors of Medistinal Metastasis in Endoscopic Staging of Lung Cancer

Α

The safety and scientific validity of this study is the responsibility of the study sponsor and investigators. Listing a study does not mean it has been evaluated by the U.S. Federal Government. Know the risks and potential benefits of clinical studies and talk to your health care provider before participating. Read our disclaimer for details.

ClinicalTrials.gov Identifier: NCT02991924

Recruitment Status 0: Recruiting

First Posted 0: December 14, 2016

Last Update Posted 0: March 30, 2018

See Contacts and Locations

JC SIMILARITY ON CONDITIONS LIST

RESULTS

EVEN THE TRIALS WITH JC=1 WERE NOT SIMILAR IN SOME OF THE CASES.

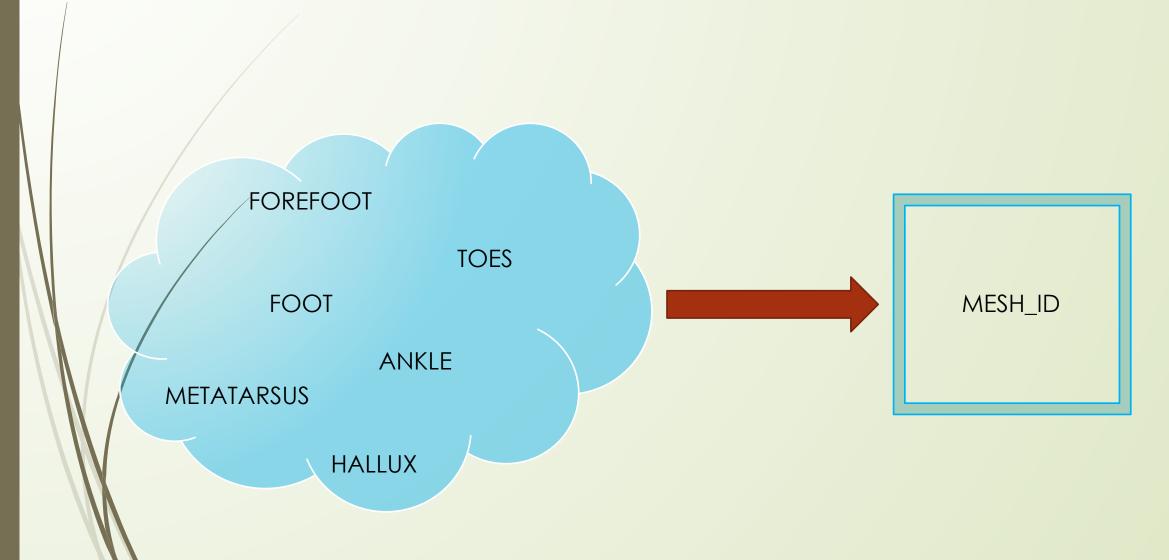
REASON: EACH TRIAL WAS JUST REPRESENTED BY 2-3 CONDITIONS

(#features too low)

INTUTION FOR NEXT APPROACH

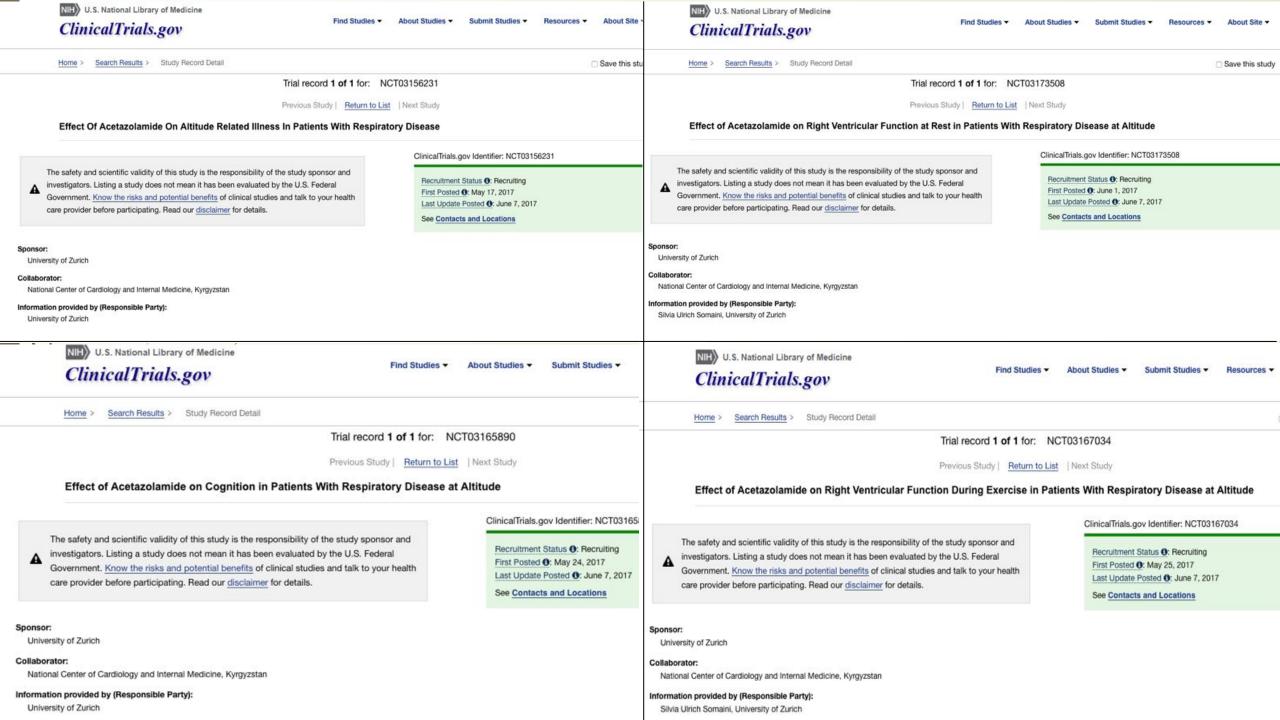
- DIFFERENT TERMS MAY CONVEY THE SAME MEANING IN MEDICAL FIELD
- HENCE WORDS IN TRIALS SHOULD BE COMPARED WITH ITS SYNONYMS.
- USED MeSH THESAURUS TO FIND SYNONYMS.
- MeSH (Medical Subject Headings) IS THE NLM CONTROLLED
 VOCABULARY THESAURUS USED FOR INDEXING ARTICLES FOR PubMed.

JC SIMILARITY ON MESH THESAURUS



JACCARD COEFFICIENT WAS USED TO MEASURE SIMILARITY BETWEEN TWO TRIALS.

☐ TRIALS WITH JC > 0.9 WERE SIMILAR.



RESULTS

Avg. Cluster Size: 9.72

No of outliers : 2016

No of clusters : 3894

Total trials : 25536

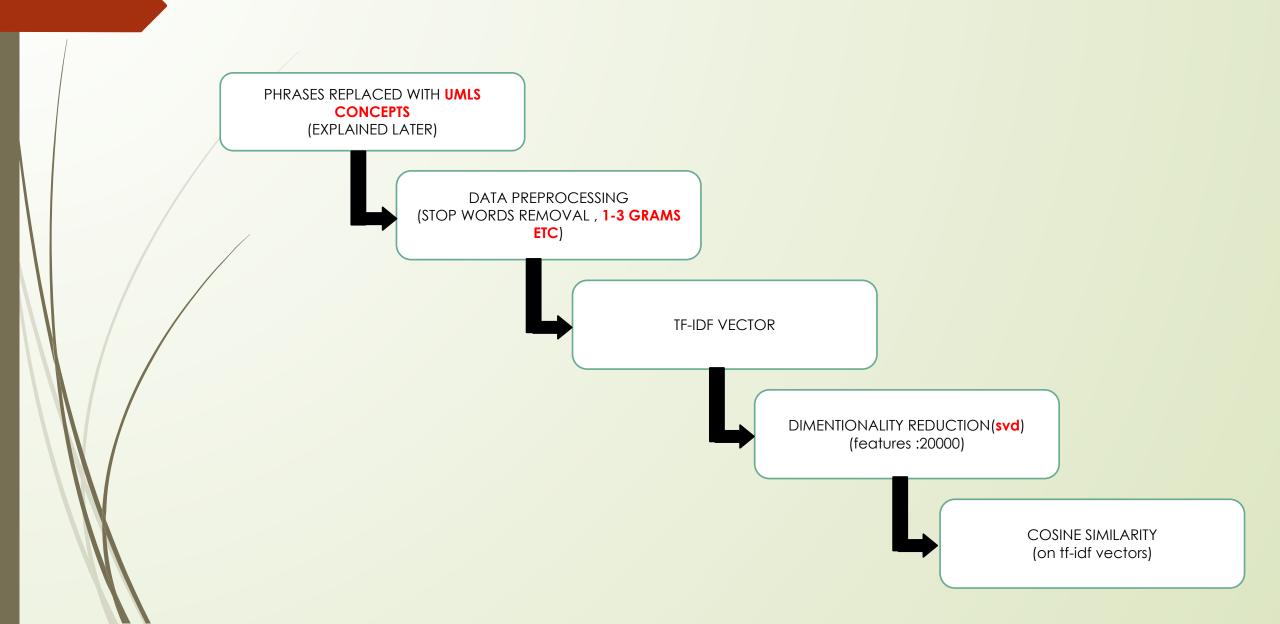
☐ INTUITION:

FROM THE PREVIOUS 2 METHODS WE FOUND:

ONLY MEDICAL TERMS ARE NOT ENOUGH TO REPRESENT TRIAL.

HENCE IN NEXT APPROACH WE CONSIDERED REMAINING TERMS AS WELL.

COSINE SIMILARITY



RESULTS

```
Similarity values via TF_IDF Matrix on Inclusion Criteria using UMLS concepts
No of Trials Similar With Trial NCT02301663
No of Trials Similar With Trial NCT01356966
No of Trials Similar With Trial NCT00300872
                    and Trial: NCT02300649
Trial: NCT02220231
                                            with similarity 0.8127167481271855
Trial: NCT02220231 and Trial: NCT02185430
                                            with similarity 0.6029134183778617
Trial: NCT02220231 and Trial: NCT02288780 with similarity 0.6329534159001815
Trial: NCT02220231 and Trial: NCT02237664
                                            with similarity 0.5710271755055794
Trial:
       NCT02220231
                    and Trial: NCT02185378
                                            with similarity 0.6742721277698331
       NCT02220231
Trial:
                    and Trial:
                              NCT02365311
                                            with similarity 0.9053575664597288
No of Trials Similar With Trial NCT02220231
Trial: NCT02695264
                    and Trial: NCT02284217
                                            with similarity 0.7251673036015771
Trial: NCT02695264
                    and Trial: NCT02772471
                                            with similarity 0.773307957570136
```

Previous Method (Mesh)

Avg. Cluster Size : 9.72

No of outliers : 2016

No of clusters : 3894

Total trials : 25536



Current Method

Avg. Cluster Size : 14.28

No of outliers : 1378

No of clusters : 2214

Total trials : 25536

Trial: NCT02220231 and Trial: NCT02365311 with similarity 0.9053575664597288



Reason:

Inclusion Criteria for NCT02220231

Inclusion Criteria:

- 1. Above 20 years of age.
- 2. American Society of Anesthesiologists (ASA) Physical Status I, II, III.
- 3. Thoracic surgical procedure (video-assisted thoracoscopic extended thymectomy)

Inclusion Criteria for NCT02365311

Inclusion Criteria:

- Above 20 years of age.
- American Society of Anesthesiologists (ASA) Physical Status I and II
- Thoracic surgical procedure (video-assisted)

DBSCAN CLUSTERING

"Intrabronchial Route of Drug Administration" : "C1512914"

"Intracartilaginous Route of Drug Administration" : "C1512917"

"Intracisternal Route of Drug Administration" : "C1512924"

"Intracorneal Route of Drug Administration" : "C1512927"

"LDL-C results documented or reviewed - LDL-C 100-129 mg/dl" : "C2114378"

"LDL-C results documented or reviewed - LDL-C < 100 mg/dl" : "C2114376"

"primary repair of lateral collateral ligament of knee" : "C2091899"

DATA
PREPROCESSING
(stopwords removal etc.)

TF-IDF Vector

Dimentionality
Reduction (SVD)
Features = 20000

DBSCAN (eps=0.7, min_sample =7)

TRIALS FROM SAME CLUSTER WERE NOT FOUND TO BE SAME

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Trial record 1 of 1 for: NCT00156793

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Phase 3 Imaging and Safety Study of Al-700 in Patients With Suspected Coronary Artery Disease Undergoing SPECT Imaging



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> Trial record 1 of 1 for: NCT00939237

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Trial of Lycopene/Ateronon for Secondary Prevention of Coronary Heart Disease

Results

ON 25536 TRIALS):

NO OF CLUSTERS FORMED = 20

AVERAGE SIZE OF CLUSTER = 28

MOST OF THE TRIALS WERE FOUND TO BE IN SAME CLUSTER

NO OF OUTLIERS = 23447

Conclusion:

IT SUPPORTS THE ESTABLISHED IDEA THAT DBSCAN DOES NOT WORK WELL WITH HIGH DIMENSIONAL DATA AND REDUCING THE NUMBER OF DIMENSIONS CAN'T REPRESENT THE TRIAL PROPERLY.

ABLATION ANALYSIS -K MEANS CLUSTERING

- MEDICAL TERMS WERE REPLACED WITH UMLS CONCEPTS.
- TF-IDF VECTOR WAS THEN CREATED TO REPRESENT THE TRIAL.
- K MEANS CLUSTERING WAS APPLIED WITH NO OF CLUSTERS = 100
- VECTOR SIZE = 20000

RESULTS:

For k = 100:

□ No of clusters : 100

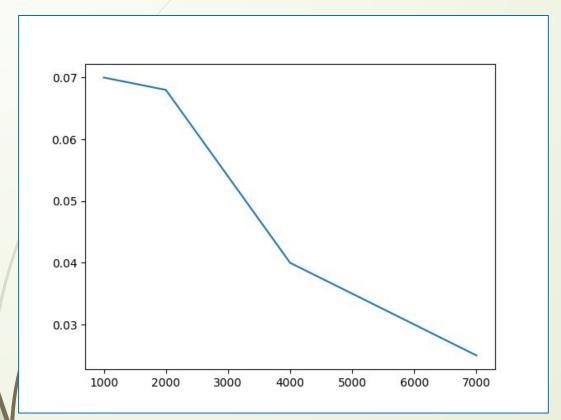
Avg Cluster Size : 189.2

□ No of Trials : 25536

No outliers

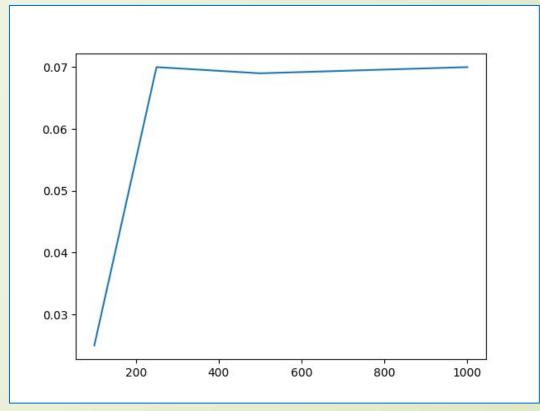
Ablation analysis

Silhouette coefficient vs #Features

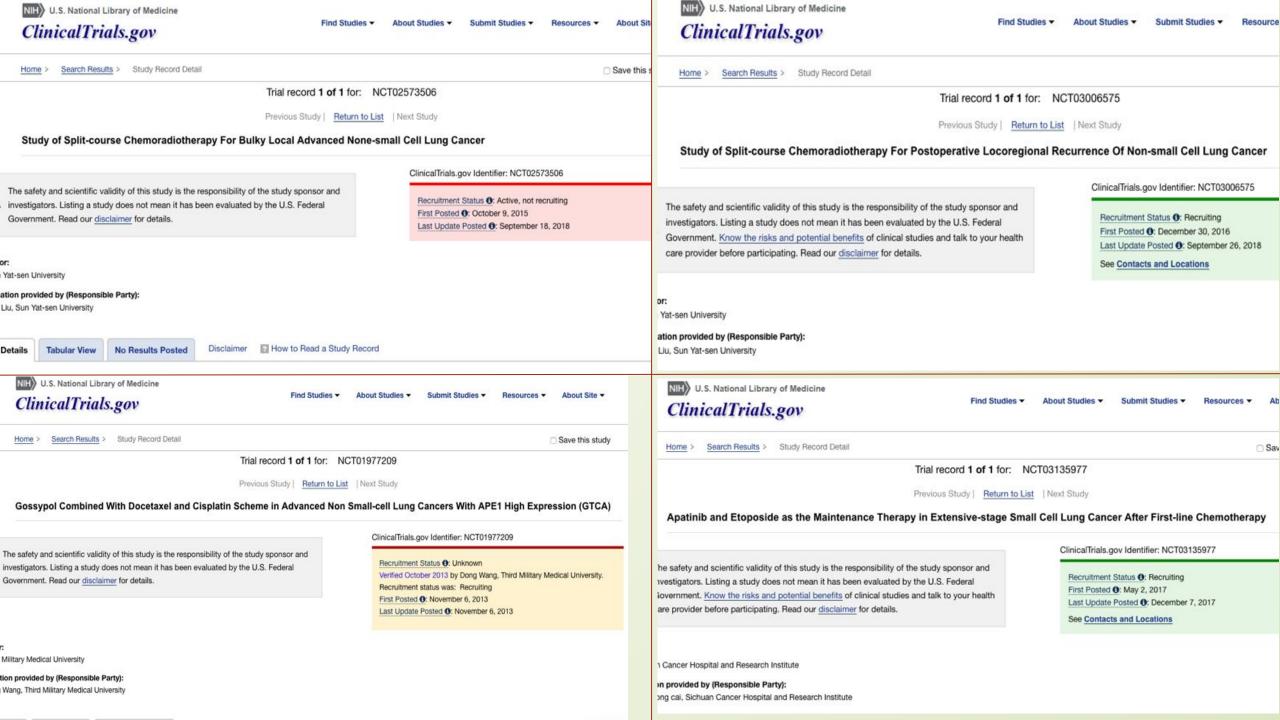


More the no of features, poorer the results.

Silhouette coefficient vs #Clusters



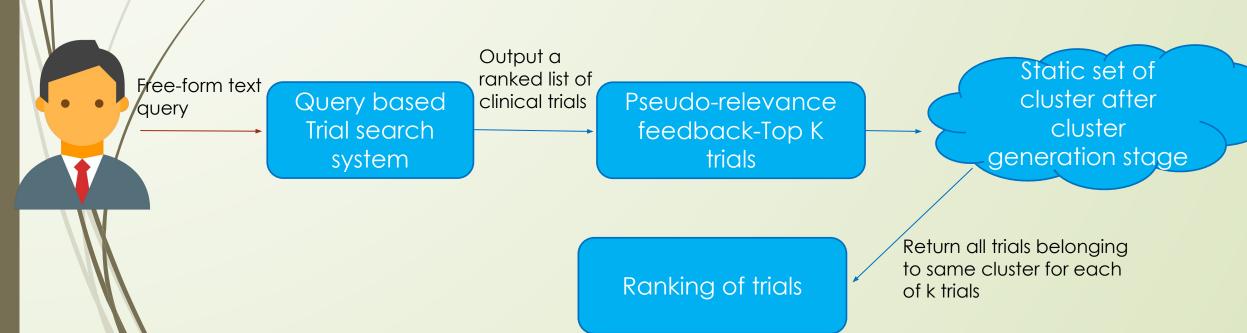
More the no of clusters, better the results.



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THANK YOU