

Main project: Bayesian inference with Expectation Maximisation for the characterisation of antibiotic treatment recovery in Cystic Fibrosis

Side project: Estimation of the variability in Cystic Fibrosis patient's FEV1 lung function measurements



Master's thesis of **Tristan Trébaol**



University of Cambridge
Department of Medicine

Academic hosts

- Prof. Andres Floto
- Ph.D. Damian Sutcliffe

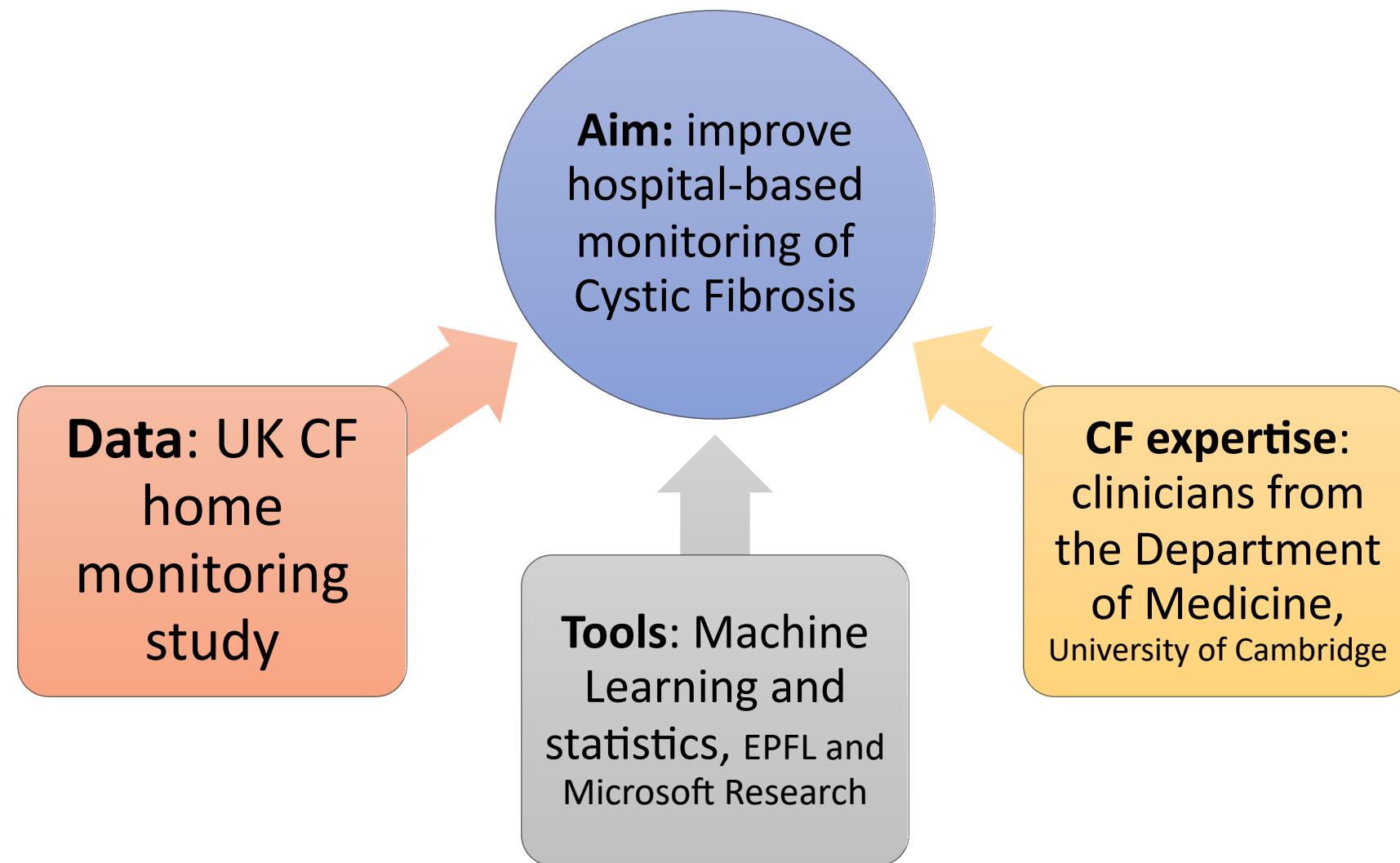
External Expert

- John Winn, Machine Intelligence Group, Microsoft Research

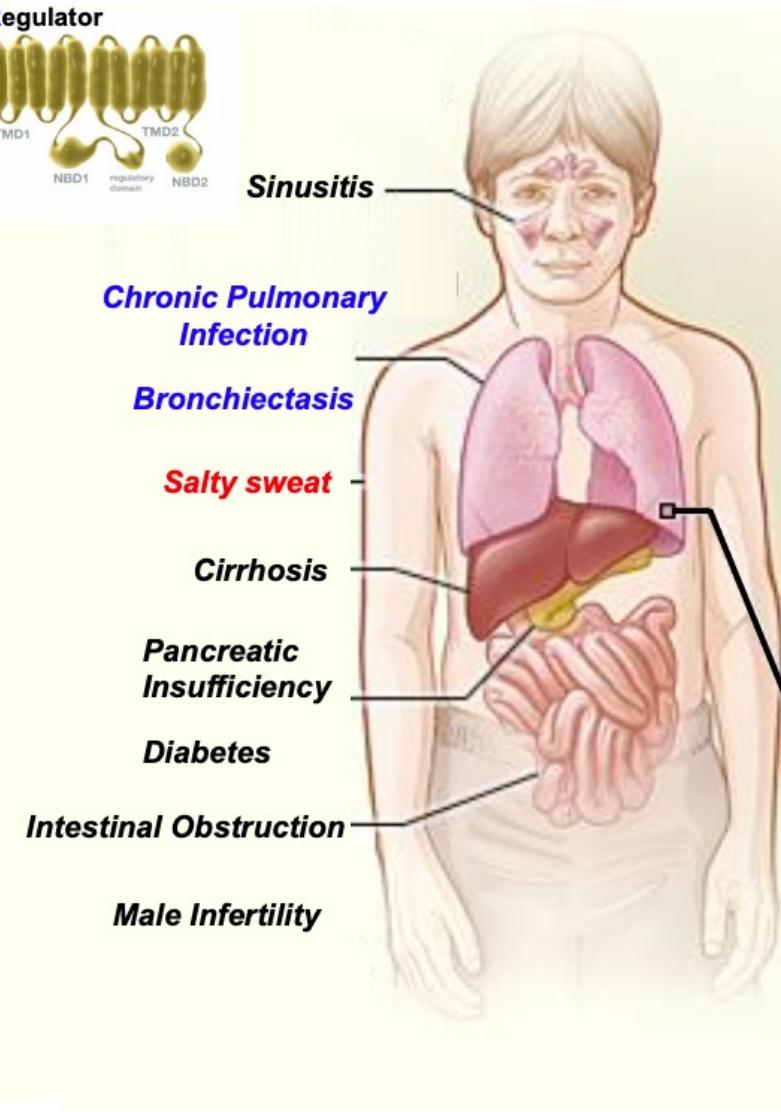
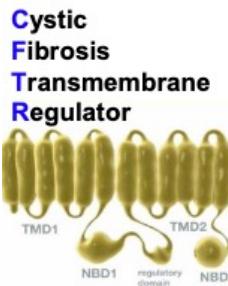
École Polytechnique Fédérale de Lausanne
School of Engineering, School of Computer and Communication Sciences

Supervised by

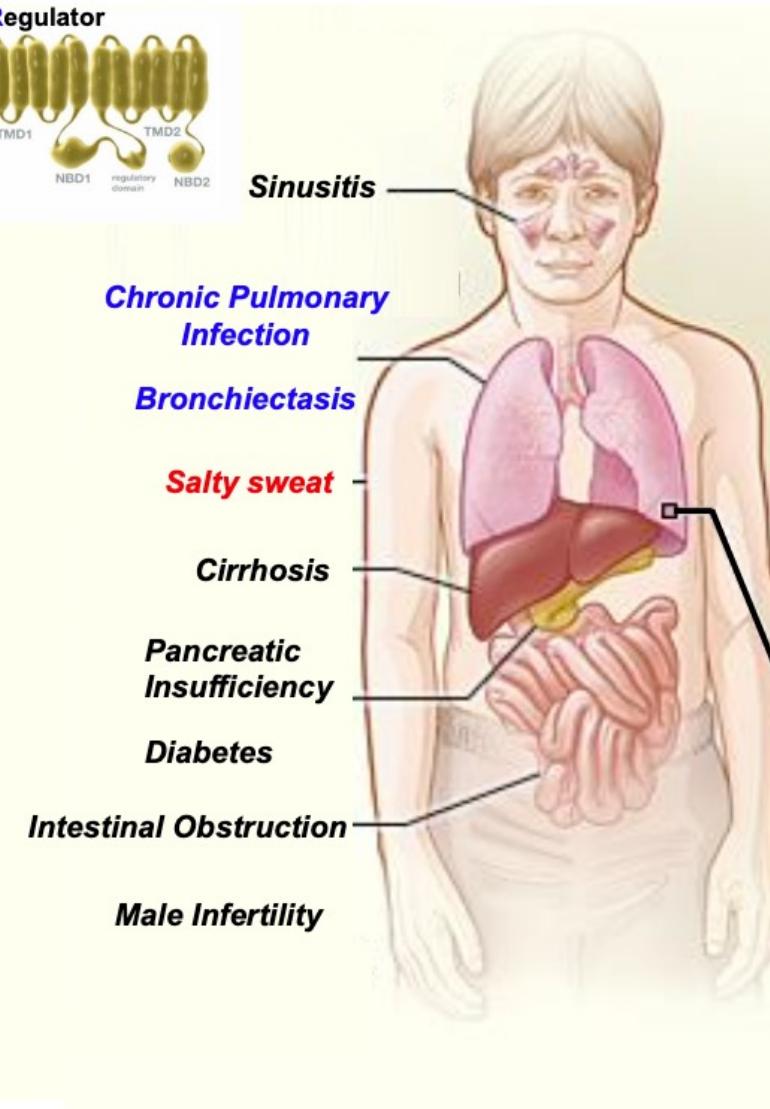
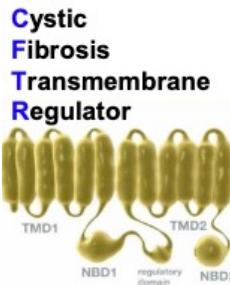
- Prof. Philippe Müllhaupt, School of Engineering
- Prof. Martin Jaggi, Machine Learning and Optimization Laboratory
- Dr. Mary-Anne Hartley, Machine Learning and Optimization Laboratory



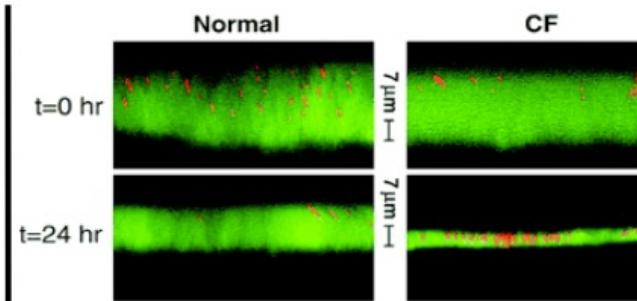
90'000 individuals worldwide



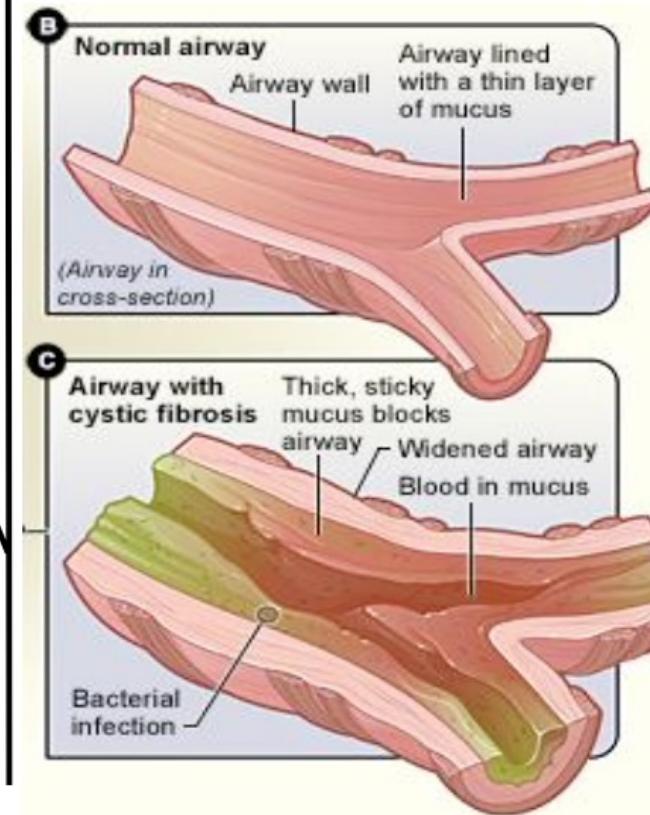
90'000 individuals worldwide



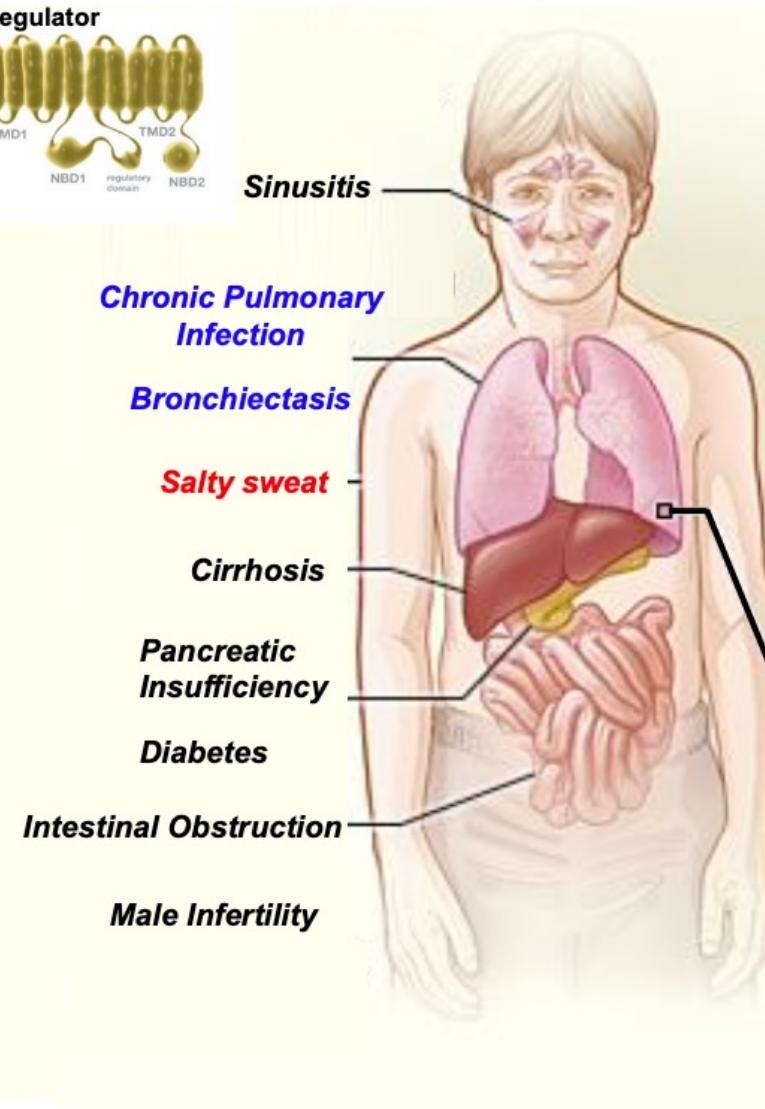
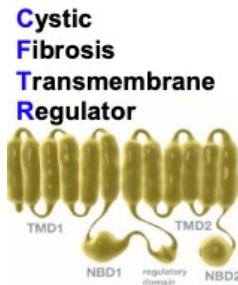
Failure to maintain airway surface liquid



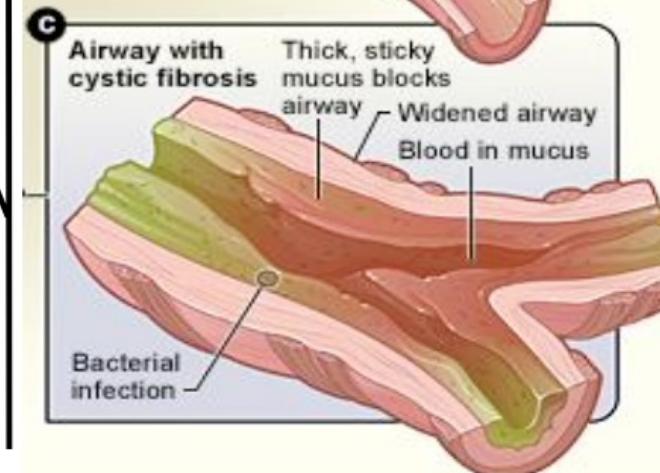
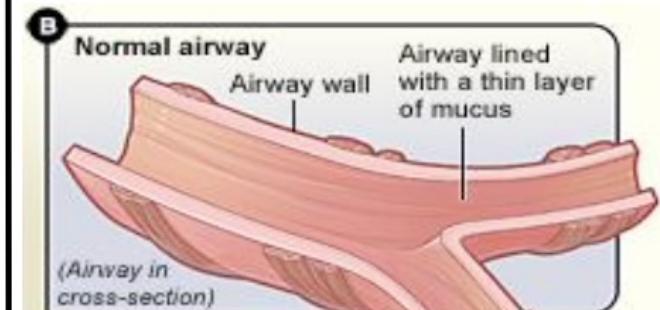
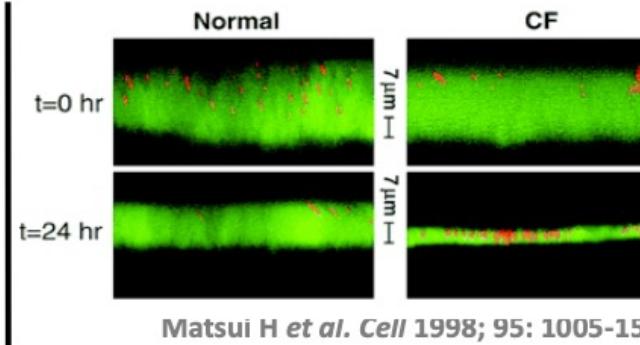
Matsui H et al. Cell 1998; 95: 1005-15



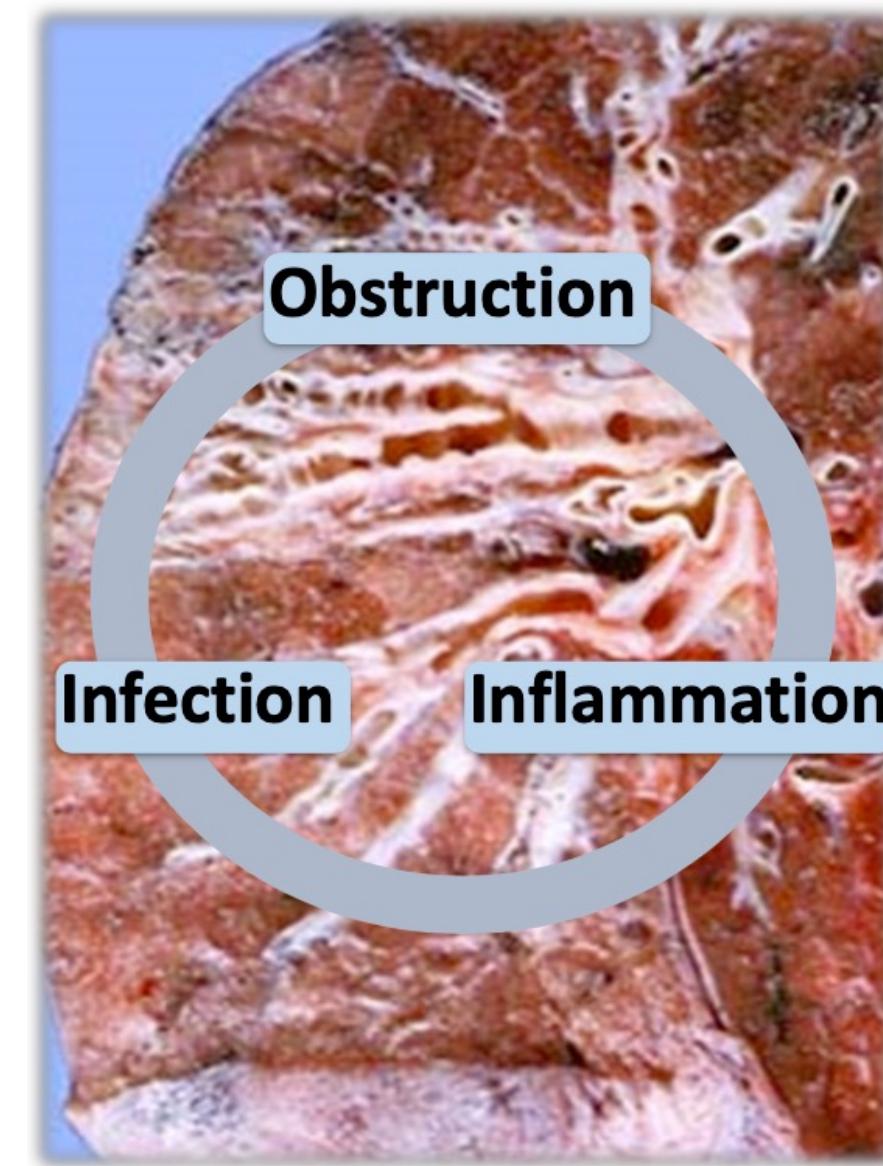
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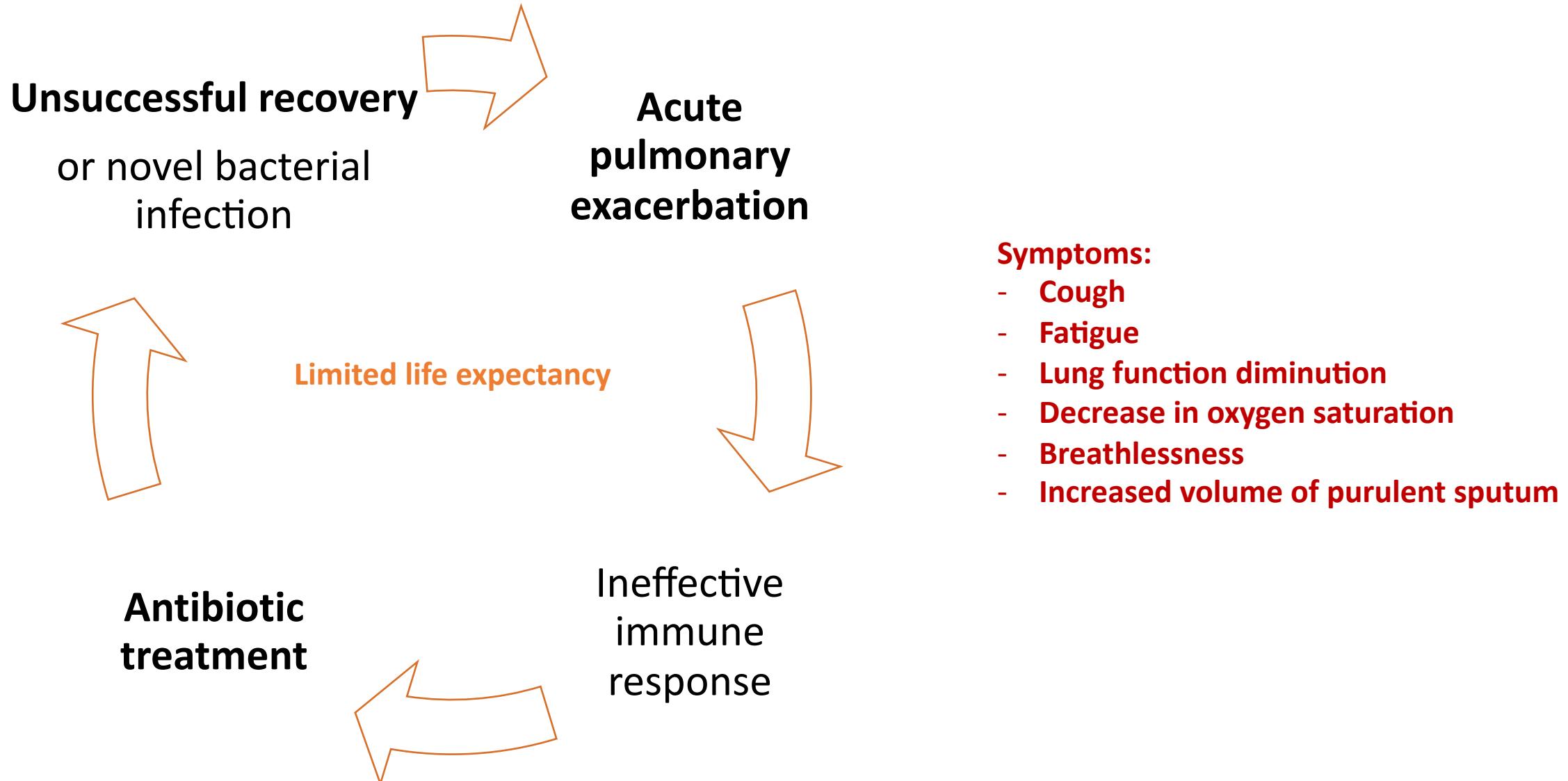


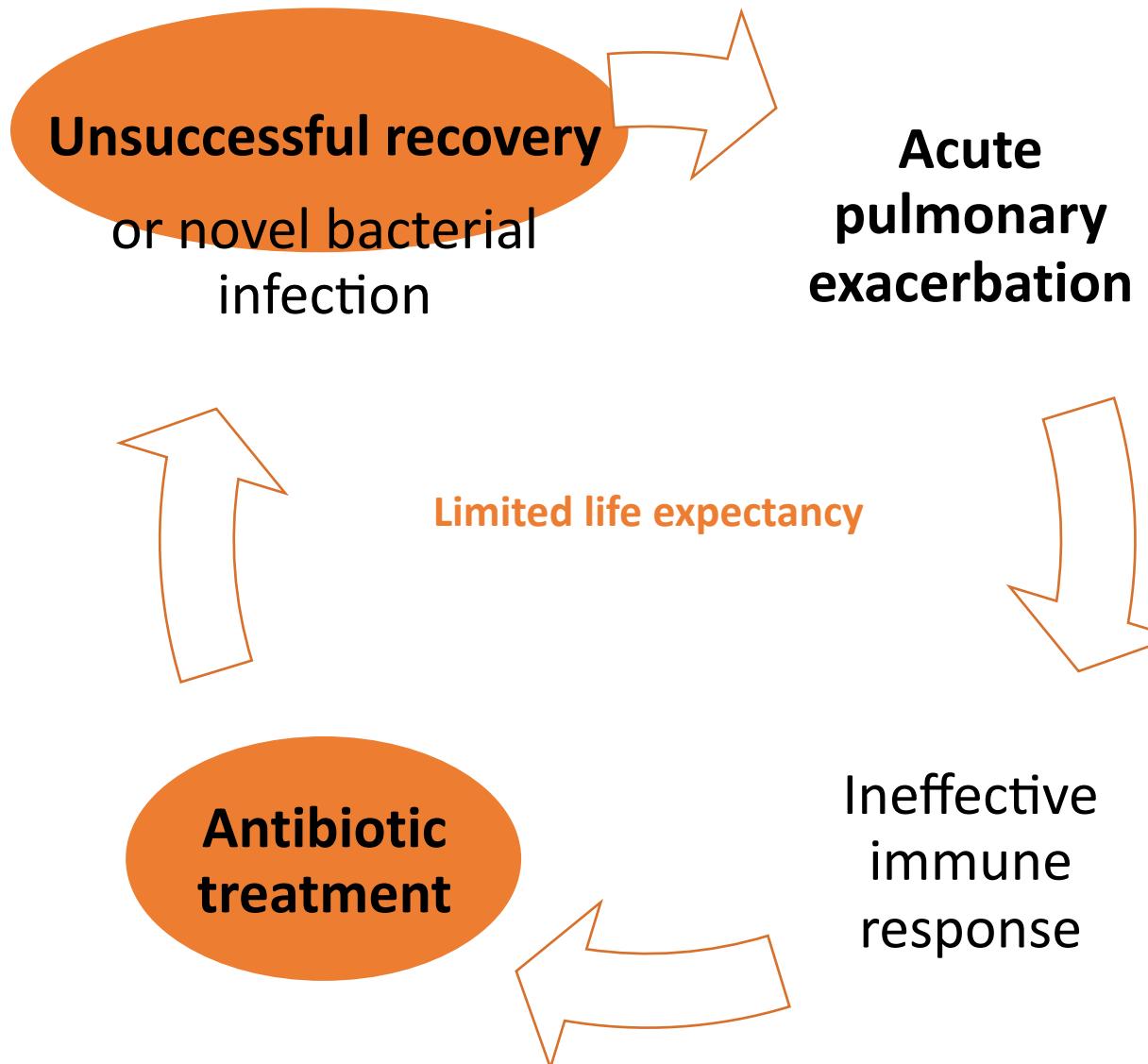
Failure to maintain airway surface liquid



Progressive Inflammatory Lung Damage





**Symptoms:**

- Cough
- Fatigue
- Lung function diminution
- Decrease in oxygen saturation
- Breathlessness
- Increased volume of purulent sputum

Project Breathe biggest CF data set in the world with daily measurements:

1. 2 hospitals in the UK
2. > 300 patients
3. Multidimensional
4. Automatic recording
5. > 500k recordings
6. Ongoing



Smartwatch:

- Calories
- Resting heart rate
- Sleep



Self-reported symptom diary:

- Wellness
- Cough
- Temperature



Weight

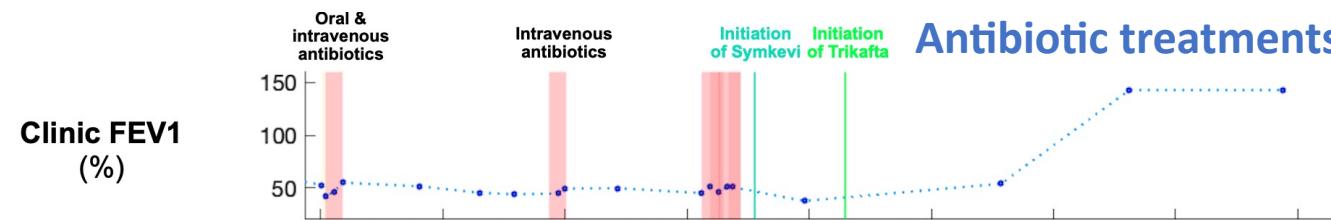
Spirometer + Pulse Oximeter:

- Lung function (FEV₁, FEF₂₅₇₅, ...)
- O₂ saturation
- Pulse rate

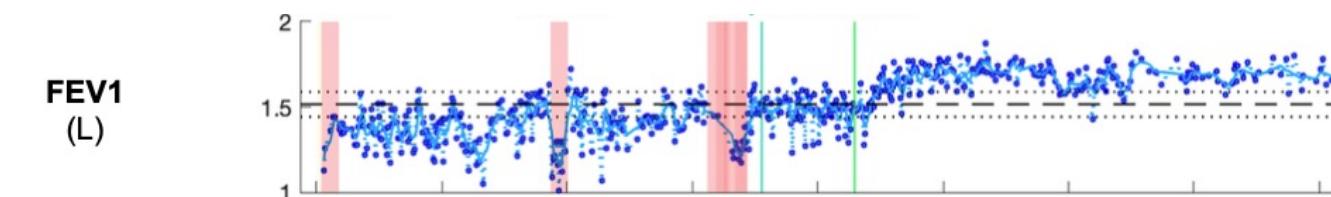
Antibiotic treatments & CFTR modulator therapies

Clinical data:

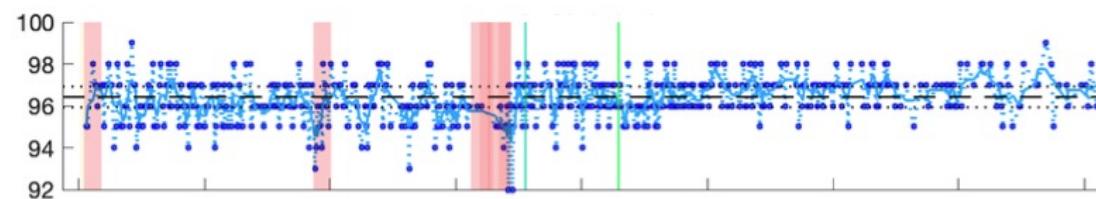
Bimonthly recordings



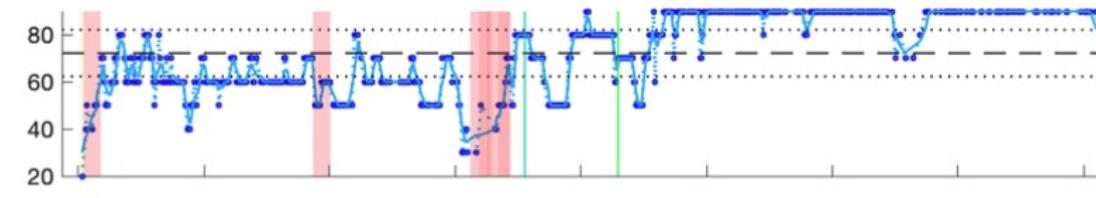
C-reactive protein (mg/L)



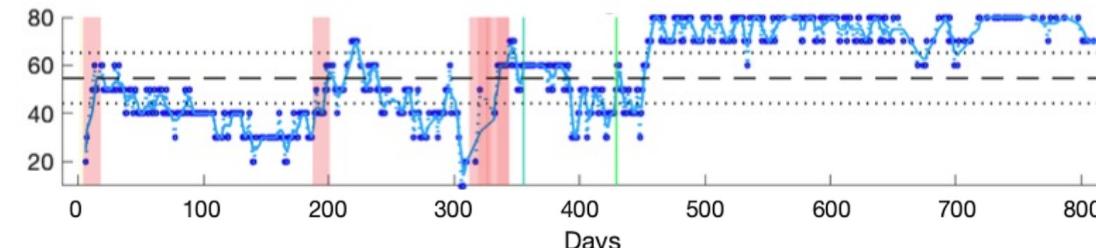
O₂ saturation (%)



Wellness (%)



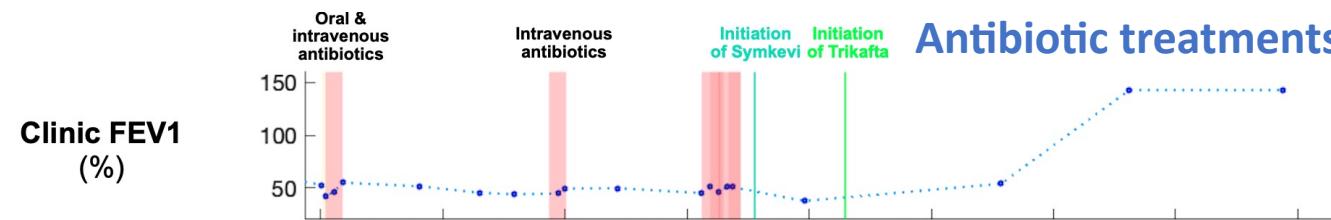
Cough (%)



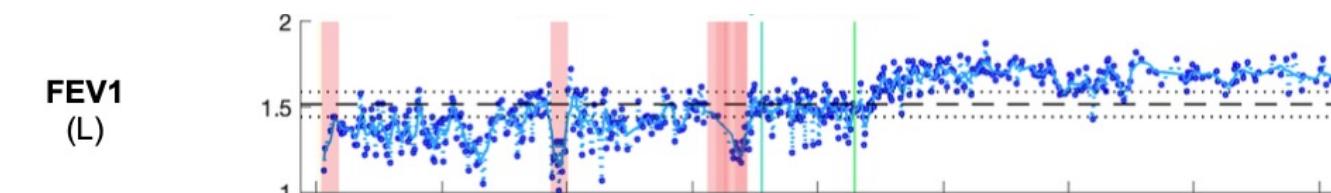
Antibiotic treatments & CFTR modulator therapies

Clinical data:

Bimonthly recordings



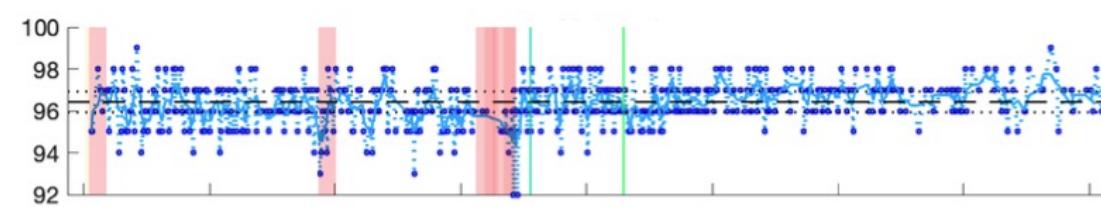
C-reactive protein (mg/L)



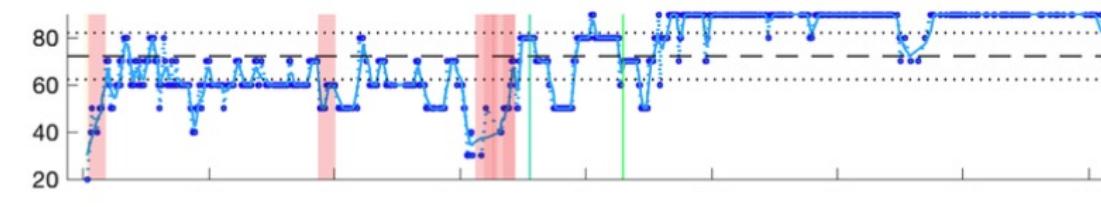
Home monitoring data:
Measurements ~3 times per week

FEV1 (L)

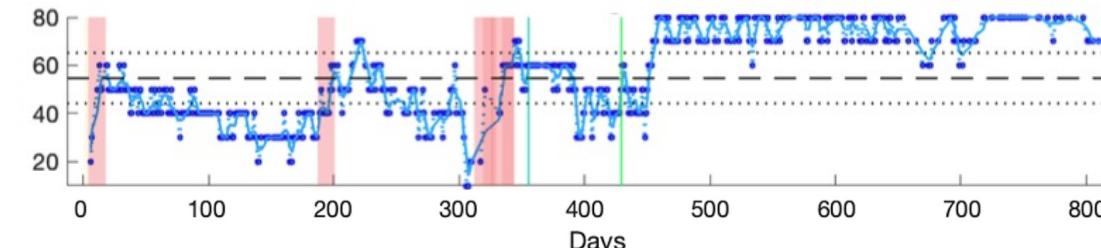
O₂ saturation (%)



Wellness (%)



Cough (%)



Inverted signals:
cough reduction!

Anecdote about me:

95% FEV₁

Started Trikafta

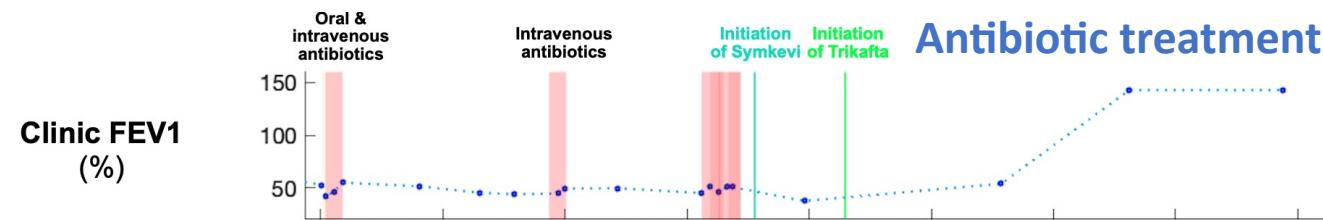
Now:

1. better sleeping
2. 0 cough
3. gained 1h daily treatment
4. 110%

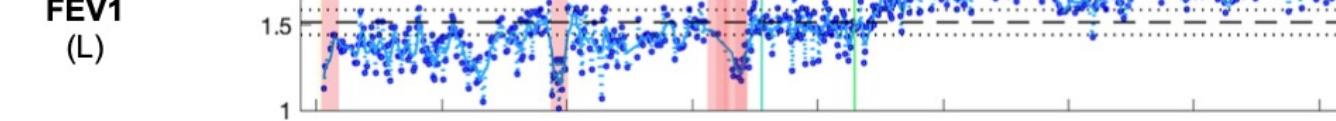
Antibiotic treatments & CFTR modulator therapies

Clinical data:

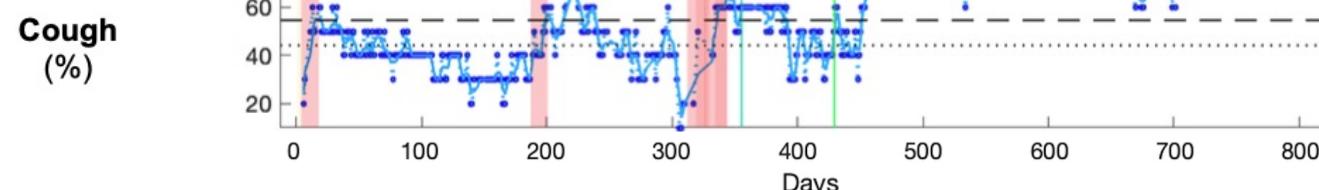
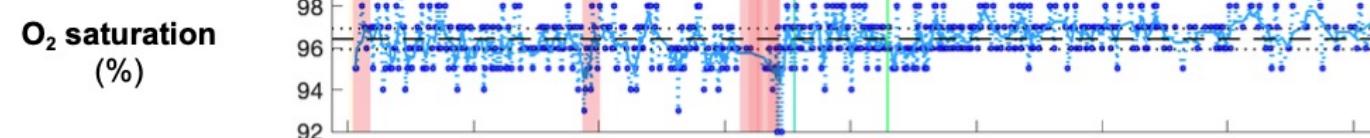
Bimonthly recordings



Home monitoring data:
Measurements ~3 times
per week



Richness => ML

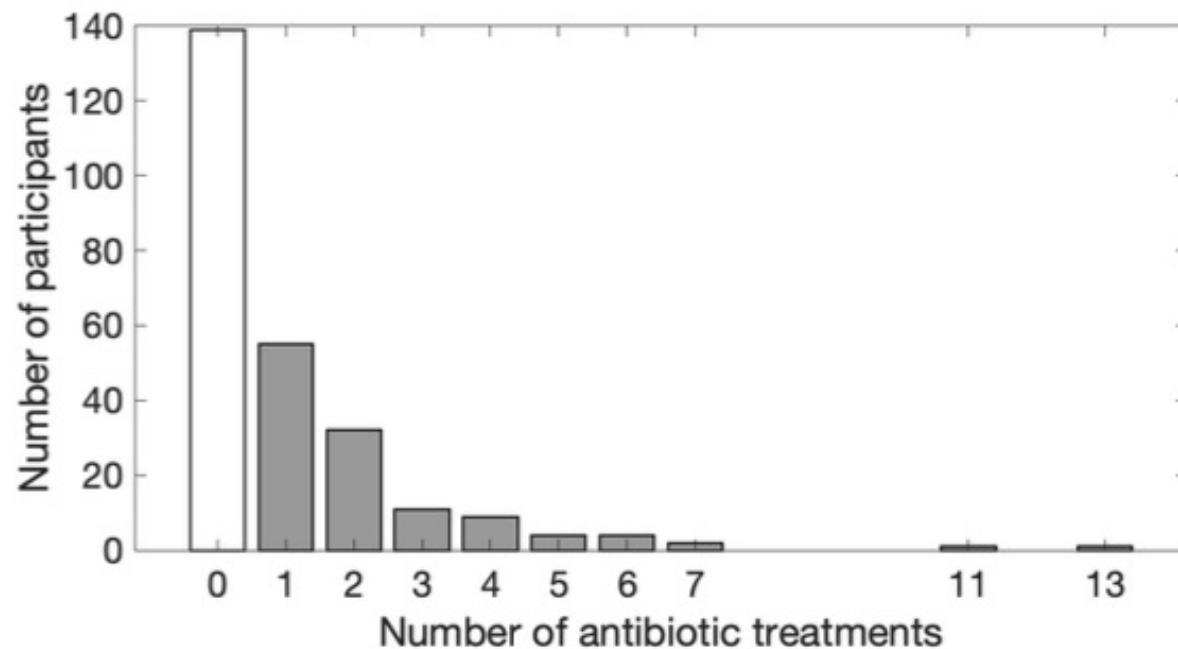


Inverted signals:
cough reduction!



Characteristic	Value (N = 258)
Female	133 (52%)
Age (yr)	31.6 ± 9.7
BMI (kg/m ²)	23.3 ± 3.1
FEV1 (% of predicted)	69.0 ± 22.5
Sub-grouping	
< 40%	20 (8%)
≥ 40% to < 70%	117 (47%)
≥ 70% to < 90%	70 (28%)
≥ 90%	41 (16%)
Genotype	
F508del homozygous	130 (50%)
F508del heterozygous	105 (41%)
Other	23 (9%)
Prescribed CFTR Modulators	
Triple Therapy	178 (69%)
Symkevi	121 (47%)
Ivacaftor	20 (8%)
Okrambi	6 (2%)

Computations of 1) Female, Age, BMI, Genotype, P. CFTR M. with clinical data, 2) FEV1 with home monitoring or clinical data. P. CFTR M. concern any period within the study.



Ask clinical questions

- How does a recovery look like?
- Are there different types of recoveries?

Answer them with Machine Learning

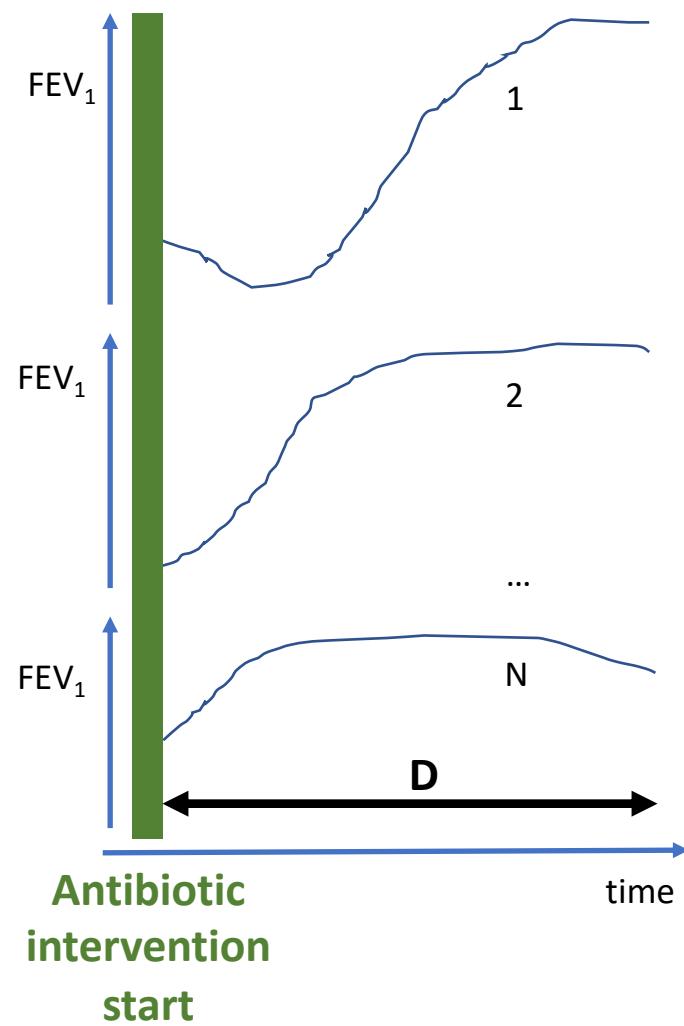
- Bayesian inference algorithm
- Convergence with expectation maximisation

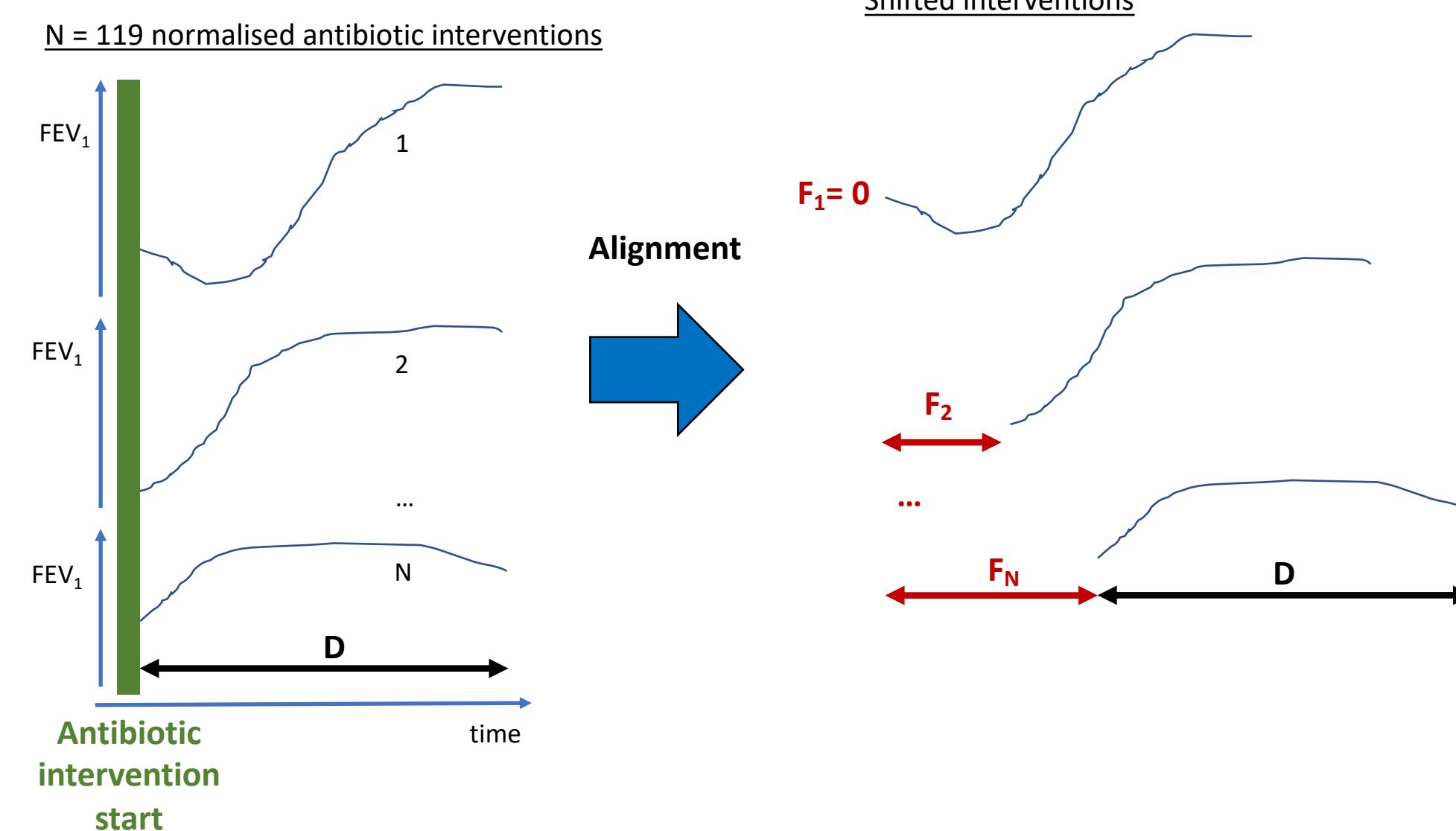
Clinicians feedback:

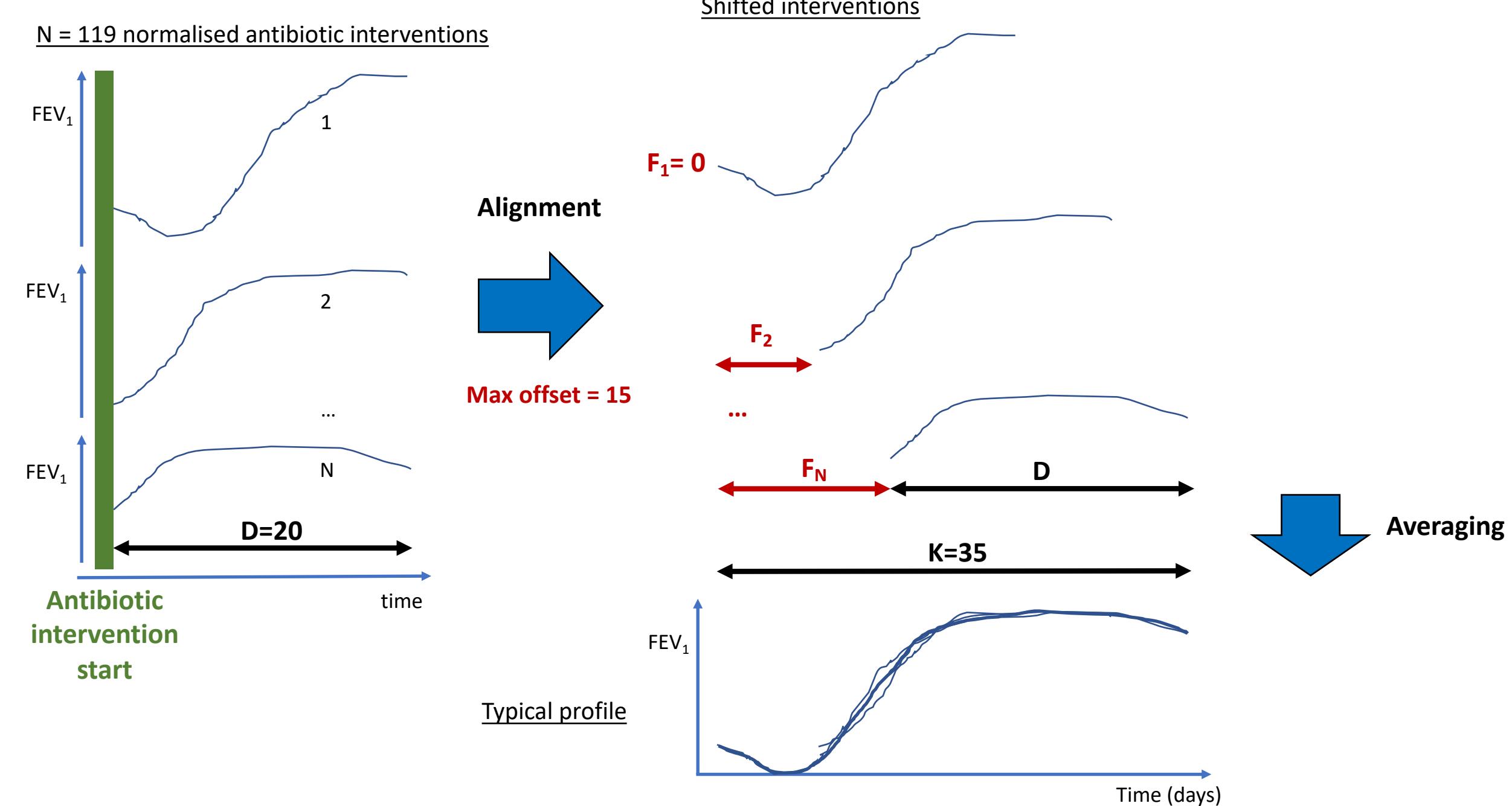
- Royal Papworth Hospital (UK)
- Hôpital Necker (France)
- Arizona Health Sciences Center (US)

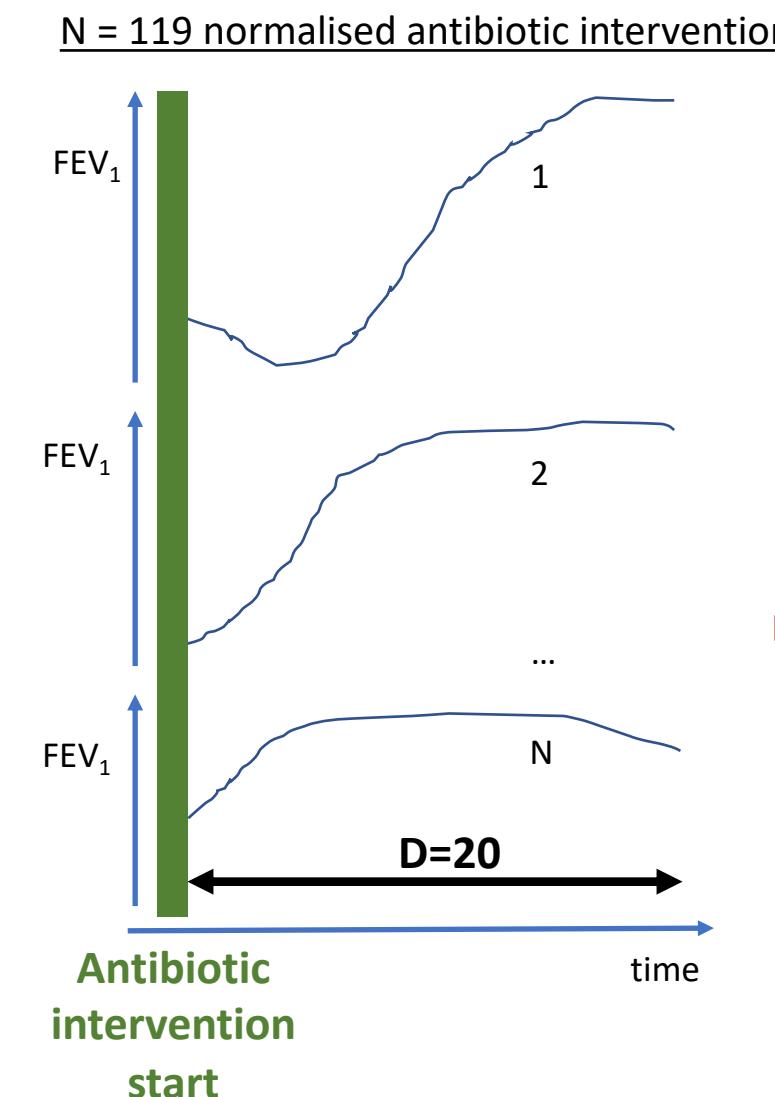
Provide interpretable results to clinicians

N = 119 normalised antibiotic interventions







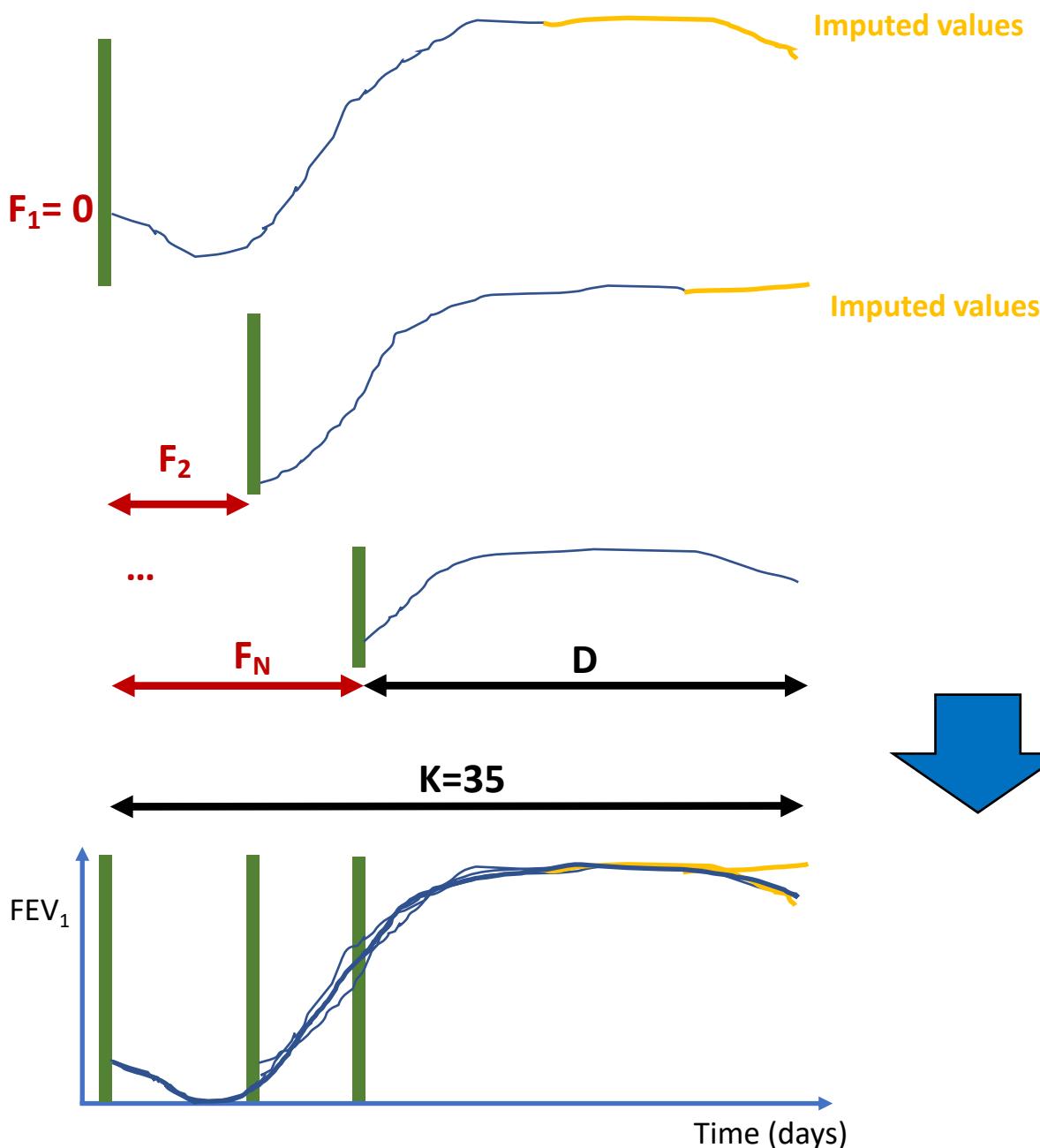


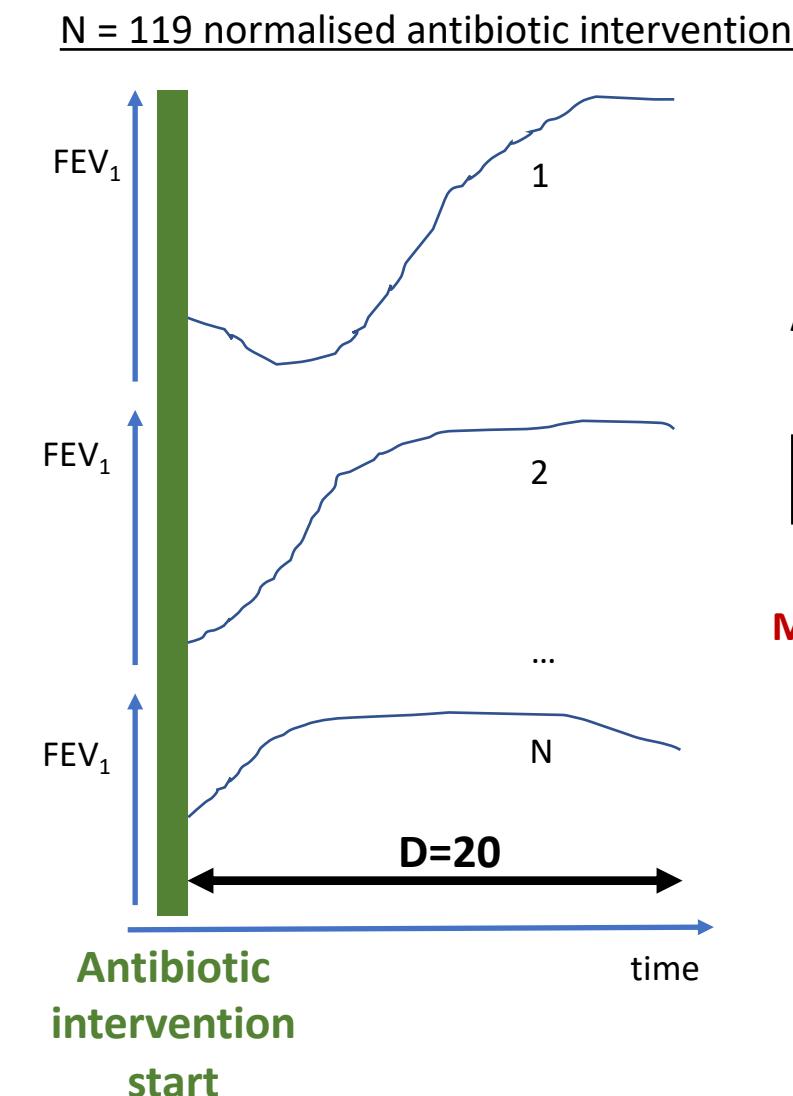
Alignment

Max offset = 15

Typical profile

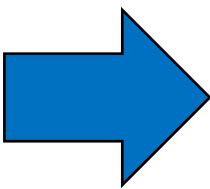
Imputed and shifted interventions





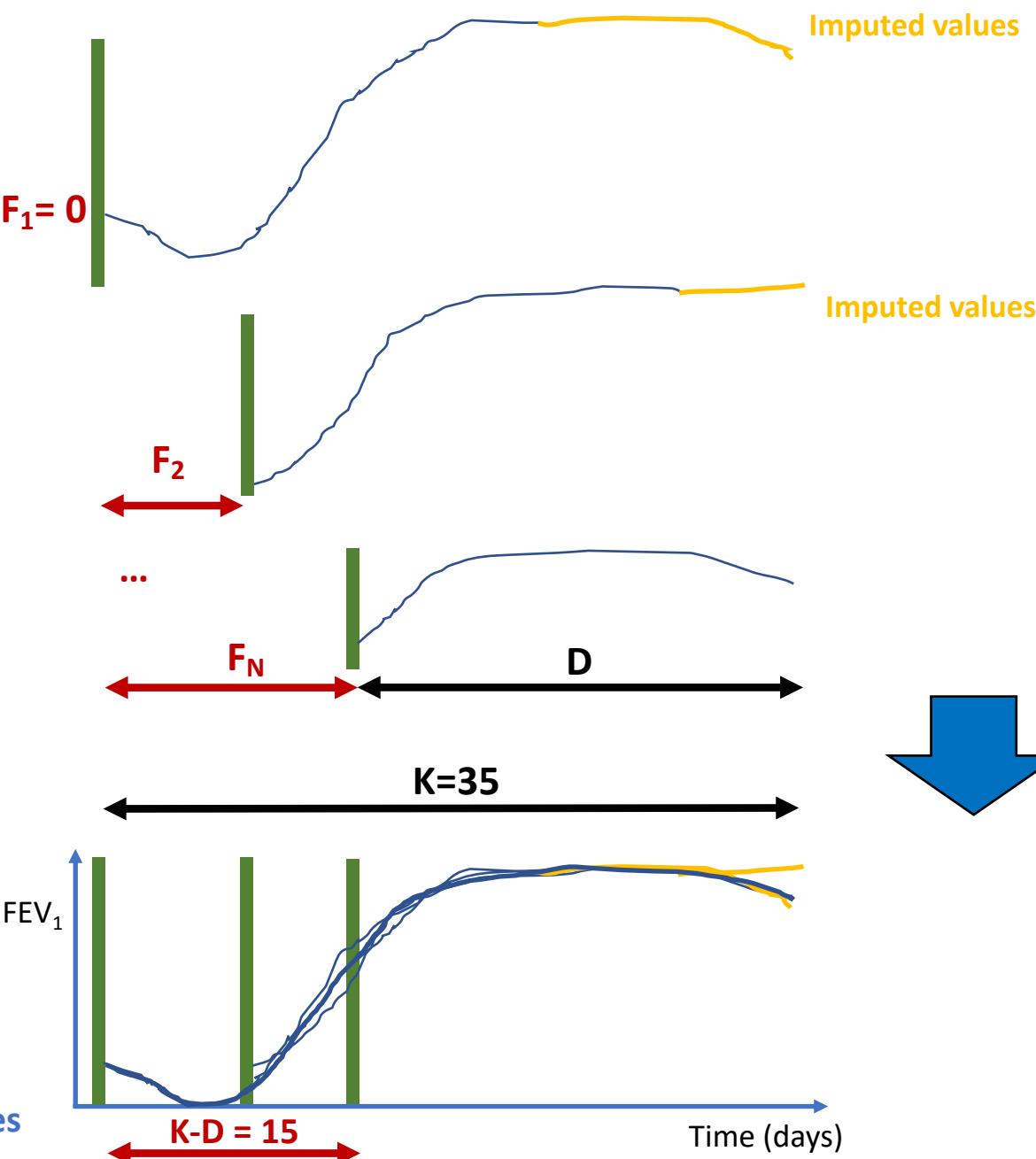
Typical profile
M dimensions (FEV₁, wellness O₂ saturation, etc) give M typical curves

Alignment

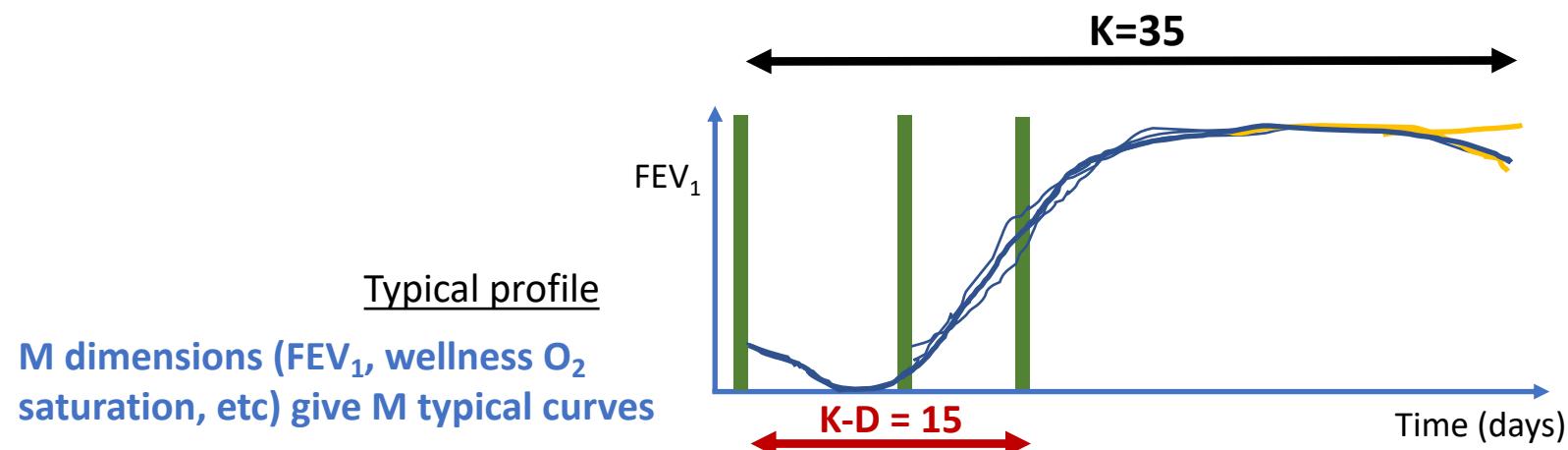


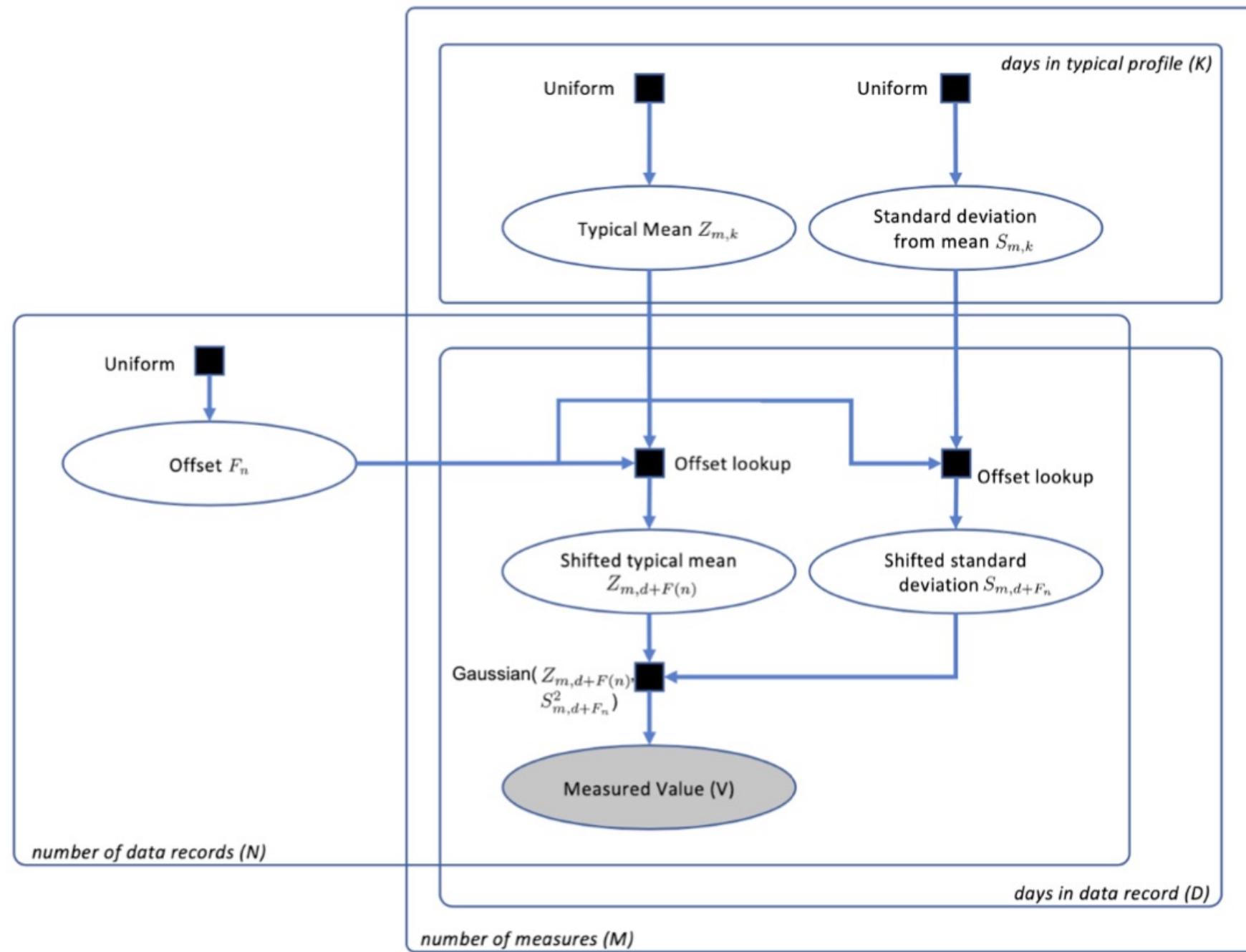
Max offset = 15

Imputed and shifted interventions

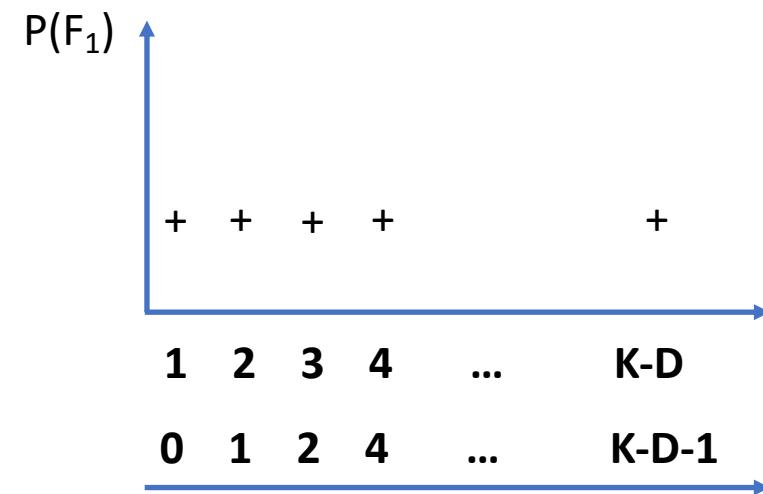


1. For each measure, the recorded values for the period immediately following treatment are a noisy version of a single typical profile.
2. The amount a measured value deviates from this profile is controlled by the position on the profile and is independent from one day to the next.
3. The treatment start can happen anytime between day 1 and the maximum allowed offset ($K-D$).



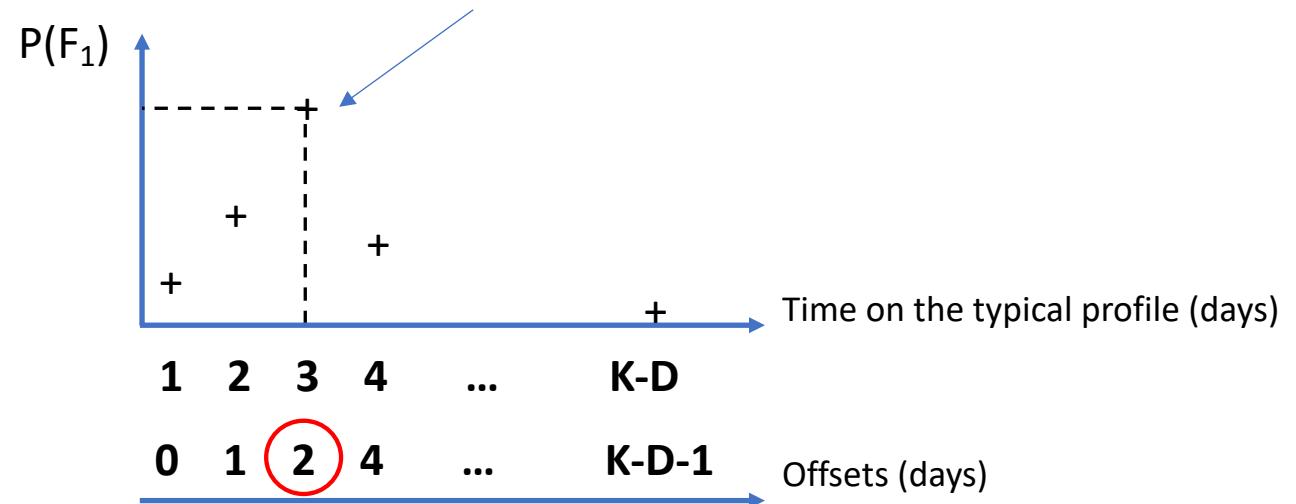
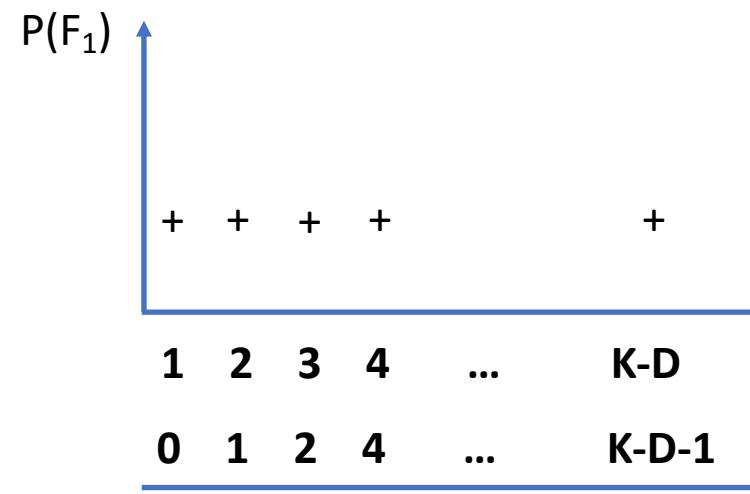


Initialisation: $P(F_N)$ is uniformly initialised over the offsets' span $[0; K-D-1]$



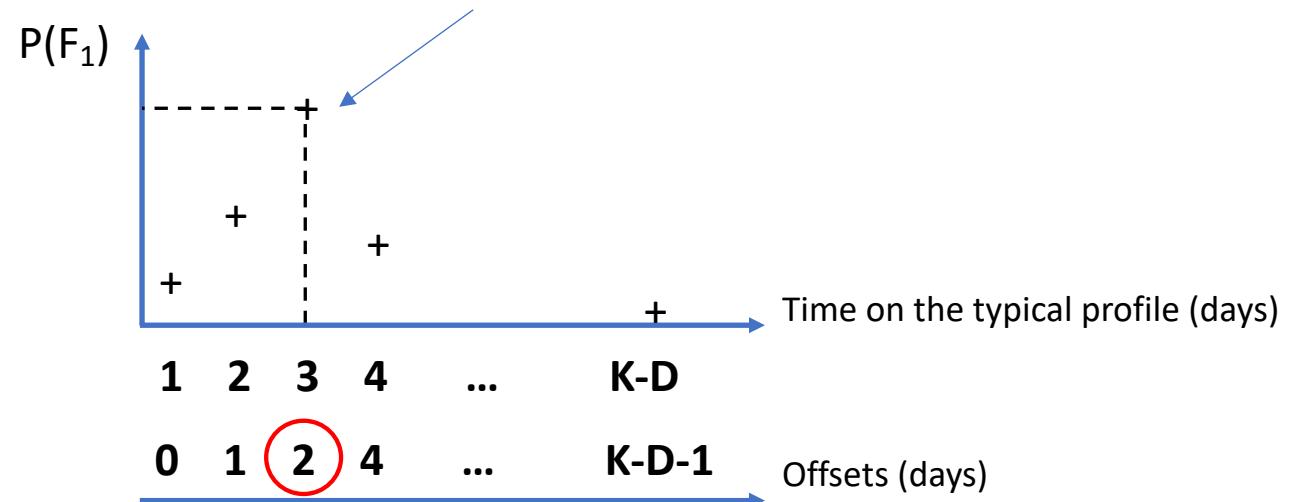
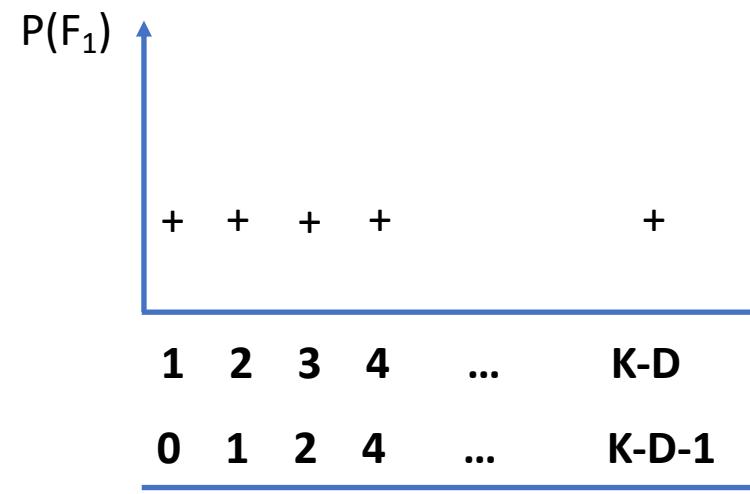
Initialisation: $P(F_N)$ is uniformly initialised over the offsets' span $[0; K-D-1]$

End-state: $\mathcal{F} : [1; N] \xrightarrow[\text{max shift}]{} \text{no shift} [0; K - D - 1], n \longmapsto F_n, F_n = \arg \max_{[1; K-D]} (P(F_n)) - 1$



Initialisation: $P(F_N)$ is uniformly initialised over the offsets' span $[0; K-D-1]$

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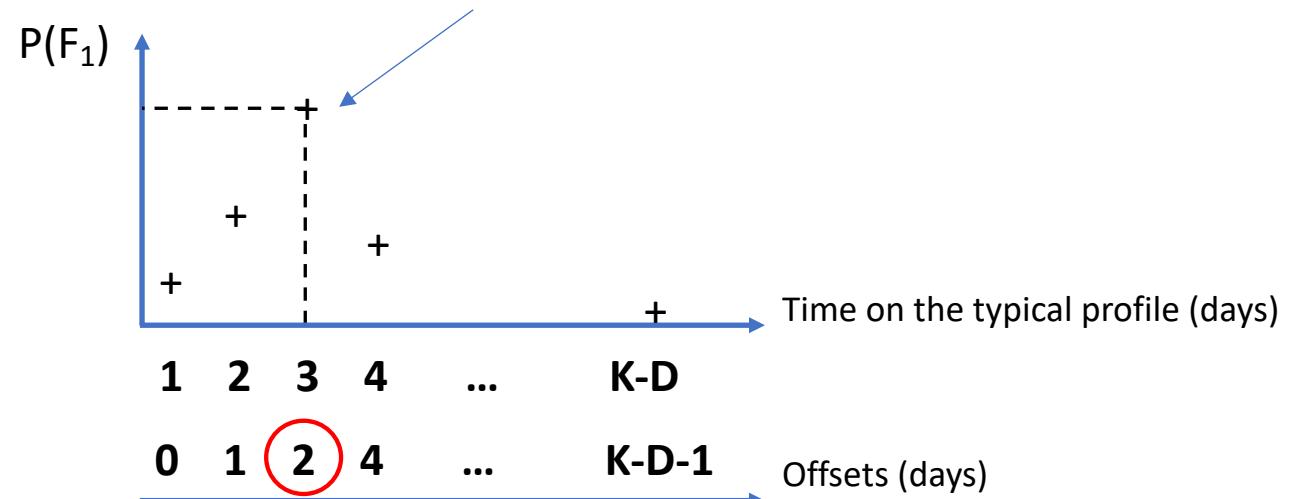
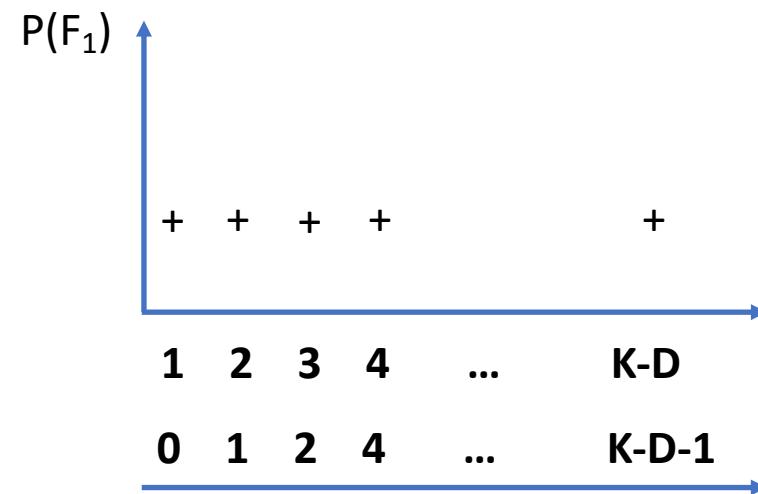


Averaging

$$\forall k \in [1; K], m \in [1; M], \begin{cases} Z'_{m,k} = \frac{\sum_{n=1}^N \sum_{f=0}^{K-D-1} V_{n,m,k-f} \cdot P(f) \cdot W(k,f)}{\sum_{f=0}^{K-D-1} P(f) \cdot W(k,f)} \\ S'_{m,k} = \frac{(\sum_{n=1}^N \sum_{f=0}^{K-D-1} V_{n,m,k-f} \cdot P(f) \cdot W(k,f))^2}{\sum_{f=0}^{K-D-1} P(f) \cdot W(k,f)} - Z'^2_{m,k} \end{cases}$$

Initialisation: $P(F_N)$ is uniformly initialised over the offsets' span $[0; K-D-1]$

End-state: $\mathcal{F} : [1; N] \xrightarrow{\substack{\text{no shift} \\ \text{max shift}}} [0; K-D-1], n \mapsto F_n, F_n = \arg \max_{[1; K-D]} (P(F_n)) - 1$



Expectation-step: $\forall n \in N, Obj_n = \ln(P(F_n | V_n, Z, S)) = \cdot - \frac{1}{2} \cdot \sum_{m=1}^M \sum_{d=1}^D \left[A + \left(\frac{V_{n,m,d} - Z_{m,d+F_n} + B}{S_{m,d+F_n}} \right)^2 \right]$
Update $P(F_n)$

Maximisation-step:

Averaging

$$\forall k \in [1; K], m \in [1; M], \begin{cases} Z'_{m,k} = \frac{\sum_{n=1}^N \sum_{f=0}^{K-D-1} V_{n,m,k-f} \cdot P(f) \cdot W(k,f)}{\sum_{f=0}^{K-D-1} P(f) \cdot W(k,f)} \\ S'_{m,k} = \frac{(\sum_{n=1}^N \sum_{f=0}^{K-D-1} V_{n,m,k-f} \cdot P(f) \cdot W(k,f))^2}{\sum_{f=0}^{K-D-1} P(f) \cdot W(k,f)} - Z'^2_{m,k} \end{cases}$$

Given a set of measured values V_n , Z and S fixed from the previous M-step:

$$P(F_n|V_n, Z, S) = \frac{P(V_n|F_n, Z, S) \cdot P(F_n)}{P(V_n, Z, S)}$$

$$P(F_n|V_n, Z, S) = \prod_{m=1}^M \prod_{d=1}^D P(V_{n,m,d}|F_n, Z_{m,d+F_n}, S_{m,d+F_n})$$

$$\forall n \in N, Obj_n = -\frac{1}{2} \cdot \sum_{m=1}^M \sum_{d=1}^D \left[A + \left(\frac{V_{n,m,d} - Z_{m,d+F_n} + B}{S_{m,d+F_n}} \right)^2 \right]$$

$$A = \ln(2 \cdot \pi) + 2 \cdot \ln(S_{m,d+F_n})$$

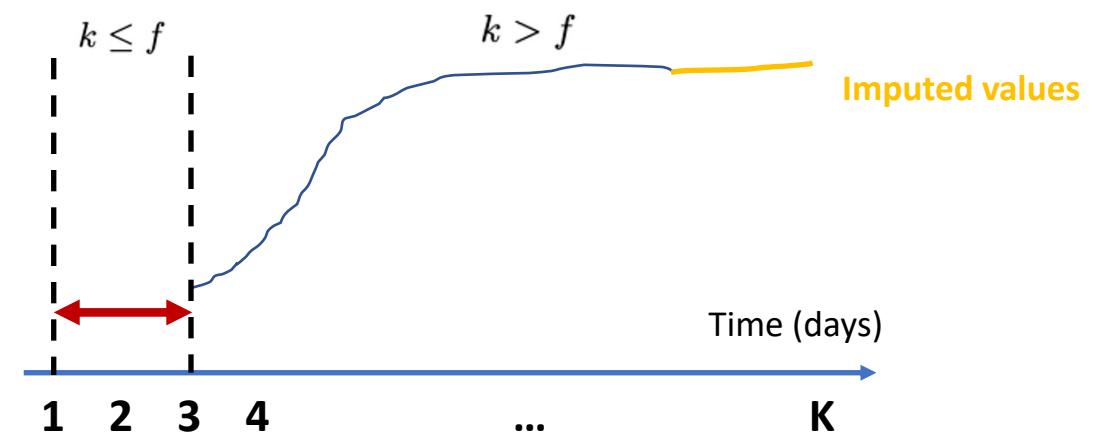
Vertical shift: $B = \begin{cases} \min(\alpha, \bar{V}_{n,m} - \bar{Z}_{m,F_n}), & \text{for } \bar{V}_{n,m} - \bar{Z}_{m,F_n} \geq 0 \\ \max(-\alpha, \bar{V}_{n,m} - \bar{Z}_{m,F_n}), & \text{for } \bar{V}_{n,m} - \bar{Z}_{m,F_n} < 0 \end{cases}$

Given a set of measured values V_n , and the offset probability distribution F_n fixed from the previous E-step:

$$\begin{cases} Z' = \arg \max_Z (P(F_n|Z, V_n)) \\ S' = \arg \max_S (P(F_n|S, V_n)) \end{cases}$$

$$\forall k \in [1; K], m \in [1; M], \begin{cases} Z'_{m,k} = \frac{\sum_{n=1}^N \sum_{f=0}^{K-D-1} V_{n,m,k-f} \cdot P(f) \cdot W(k,f)}{\sum_{f=0}^{K-D-1} P(f) \cdot W(k,f)} \\ S'_{m,k} = \frac{(\sum_{n=1}^N \sum_{f=0}^{K-D-1} V_{n,m,k-f} \cdot P(f) \cdot W(k,f))^2}{\sum_{f=0}^{K-D-1} P(f) \cdot W(k,f)} - Z'^2_{m,k} \end{cases}$$

Yes/no function: $W(k, f) = \begin{cases} 1, & \text{for } k > f \\ 0, & \text{for } k \leq f \end{cases}$



Updated E-step:

- 1) Compute the objective function for all classes and interventions.

$$\forall c \in [1; C], \forall n \in [1; N], Obj_{c,n} = -\frac{1}{2} \cdot \sum_{m=1}^M \sum_{d=1}^D \left[A + \left(\frac{V_{n,m,d} - Z_{c,m,d+F_{c,n}} + B}{S_{c,m,d+F_{c,n}}} \right)^2 \right],$$

where: $A = \ln(2 \cdot \pi) + 2 \cdot \ln(S_{m,d+F_{c,n}})$,

$$B = \begin{cases} \min(\alpha, \bar{V}_{n,m} - \bar{Z}_{m,F_{c,n}}), & \text{for } \bar{V}_{n,m} - \bar{Z}_{m,F_{c,n}} \geq 0 \\ \max(-\alpha, \bar{V}_{n,m} - \bar{Z}_{m,F_{c,n}}), & \text{for } \bar{V}_{n,m} - \bar{Z}_{m,F_{c,n}} < 0 \end{cases}$$

- 2) Assign the data record n to the best matching curve:

$\forall n \in [1; N], \psi_n = \arg \min_{[1; L]} Obj_{c,n}$

Updated E-step:

- 1) Compute the objective function for all classes and interventions.

$$\forall c \in [1; C], \forall n \in [1; N], Obj_{c,n} = -\frac{1}{2} \cdot \sum_{m=1}^M \sum_{d=1}^D \left[A + \left(\frac{V_{n,m,d} - Z_{c,m,d+F_{c,n}} + B}{S_{c,m,d+F_{c,n}}} \right)^2 \right],$$

where: $A = \ln(2 \cdot \pi) + 2 \cdot \ln(S_{m,d+F_{c,n}})$,

$$B = \begin{cases} \min(\alpha, \bar{V}_{n,m} - \bar{Z}_{m,F_{c,n}}), & \text{for } \bar{V}_{n,m} - \bar{Z}_{m,F_{c,n}} \geq 0 \\ \max(-\alpha, \bar{V}_{n,m} - \bar{Z}_{m,F_{c,n}}), & \text{for } \bar{V}_{n,m} - \bar{Z}_{m,F_{c,n}} < 0 \end{cases}$$

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Updated M-step:

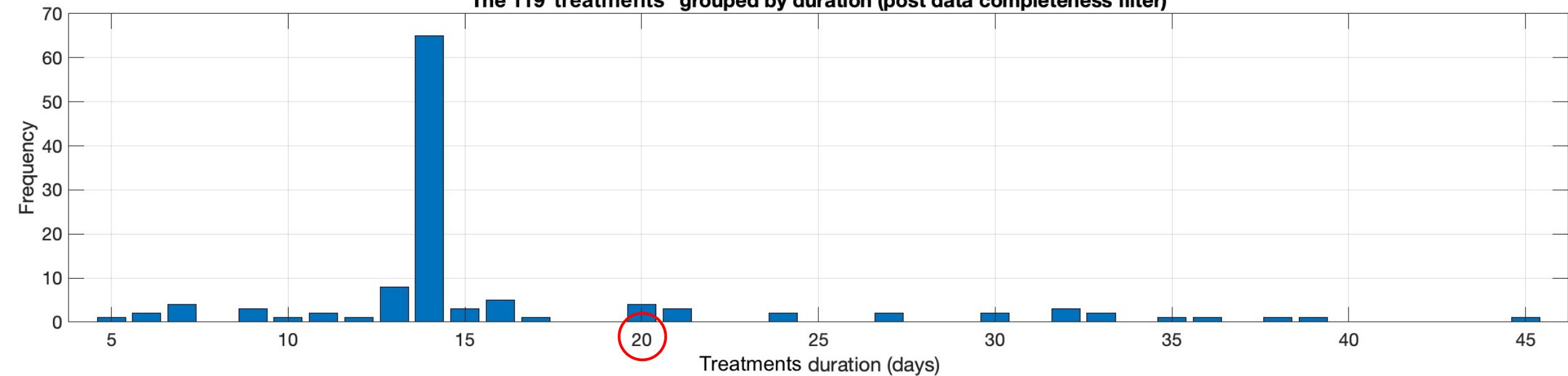
$$\forall k \in [1; K], m \in [1; M], \begin{cases} Z'_{c,m,k} = \Psi(c) \cdot \frac{\sum_{n=1}^N \sum_{f=0}^{K-D-1} V_{n,m,k-f} \cdot P(f) \cdot W(k,f)}{\sum_{f=0}^{K-D-1} P(f) \cdot W(k,f)} \\ S'_{c,m,k} = \Psi(c) \cdot \frac{(\sum_{n=1}^N \sum_{f=0}^{K-D-1} V_{n,m,k-f} \cdot P(f) \cdot W(k,f))^2}{\sum_{f=0}^{K-D-1} P(f) \cdot W(k,f)} - Z'^2_{c,m,k} \end{cases}$$

where

$\Psi(c) = \begin{cases} 1, & \text{for } \psi_n = c \\ 0, & \text{for } \psi_n \neq c \end{cases}$

$$W(k, f) = \begin{cases} 1, & \text{for } k > f \\ 0, & \text{for } k \leq f \end{cases}$$

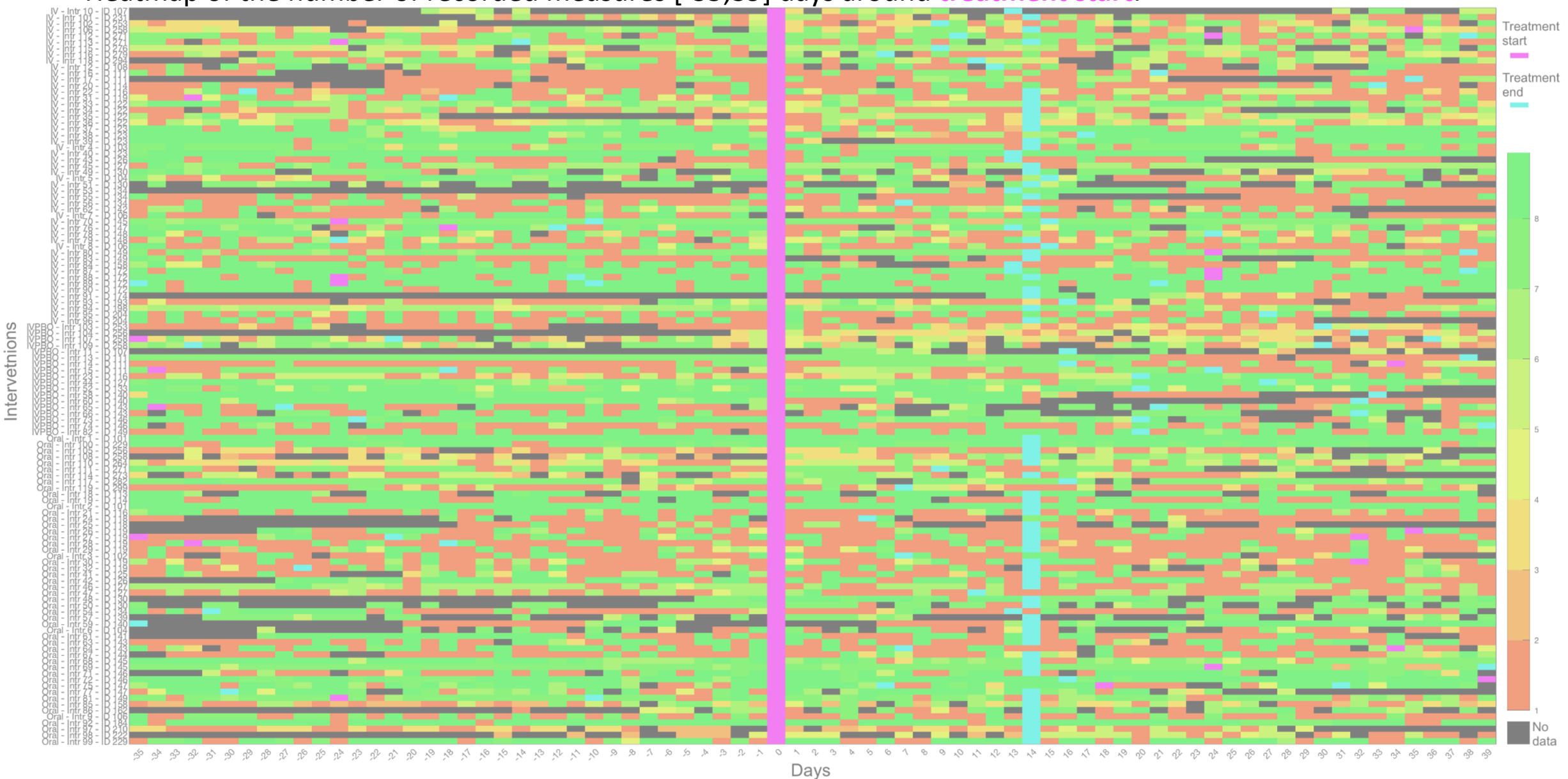
The 119 treatments grouped by duration (post data completeness filter)

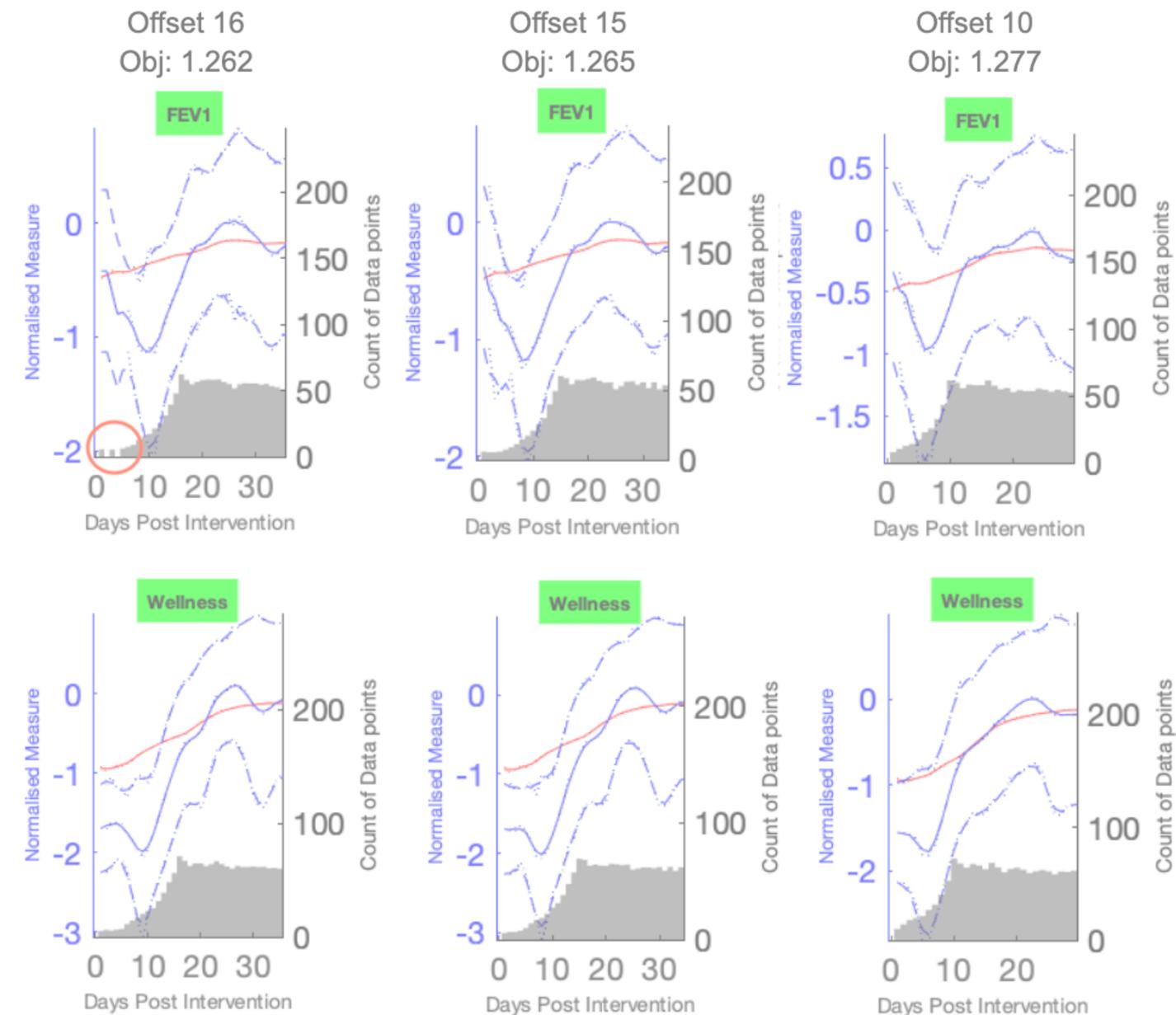


8 measures studied: wellness, cough, FEV1, FEF2575, O₂ saturation, pulse rate, temperature, minutes asleep

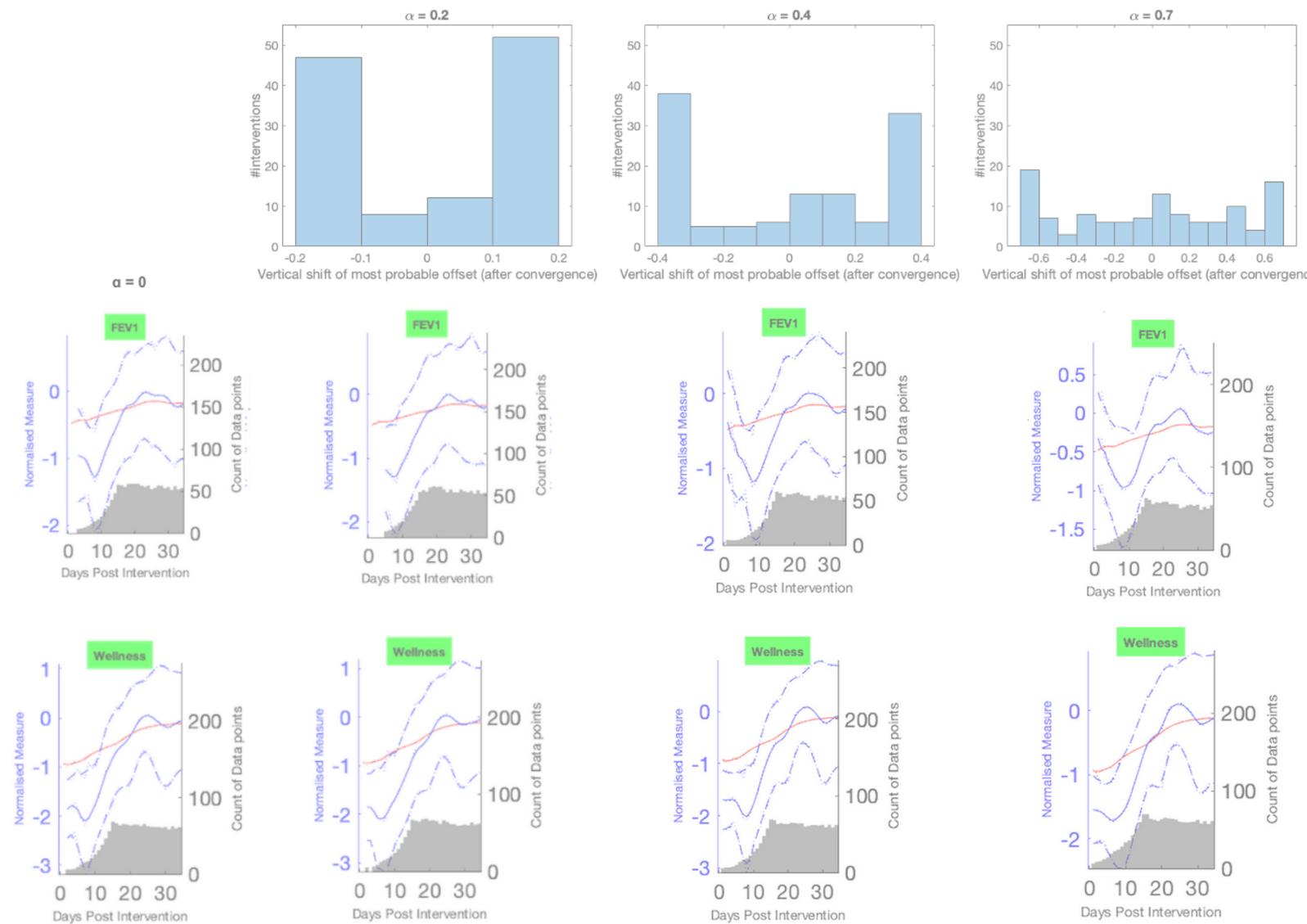
8 measures studied: wellness, cough, FEV1, FEF2575, O₂ saturation, pulse rate, temperature, minutes asleep

Heatmap of the number of recorded measures [-35;39] days around **treatment start**.

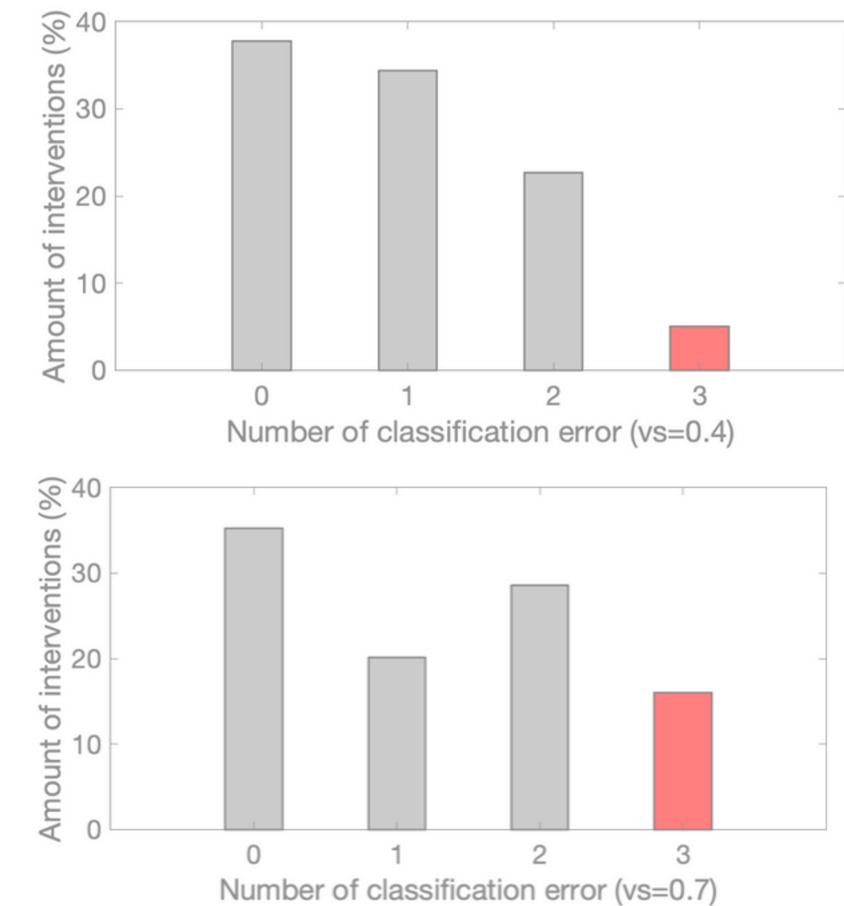


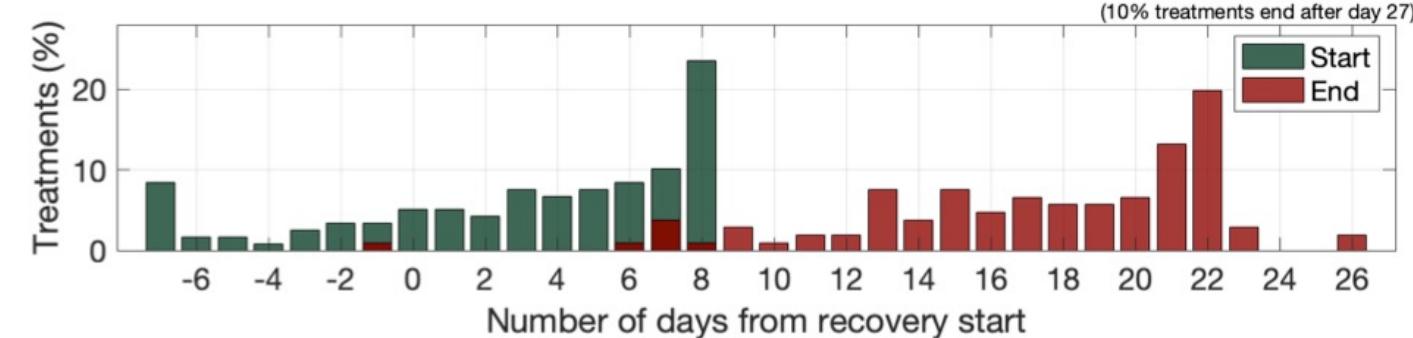
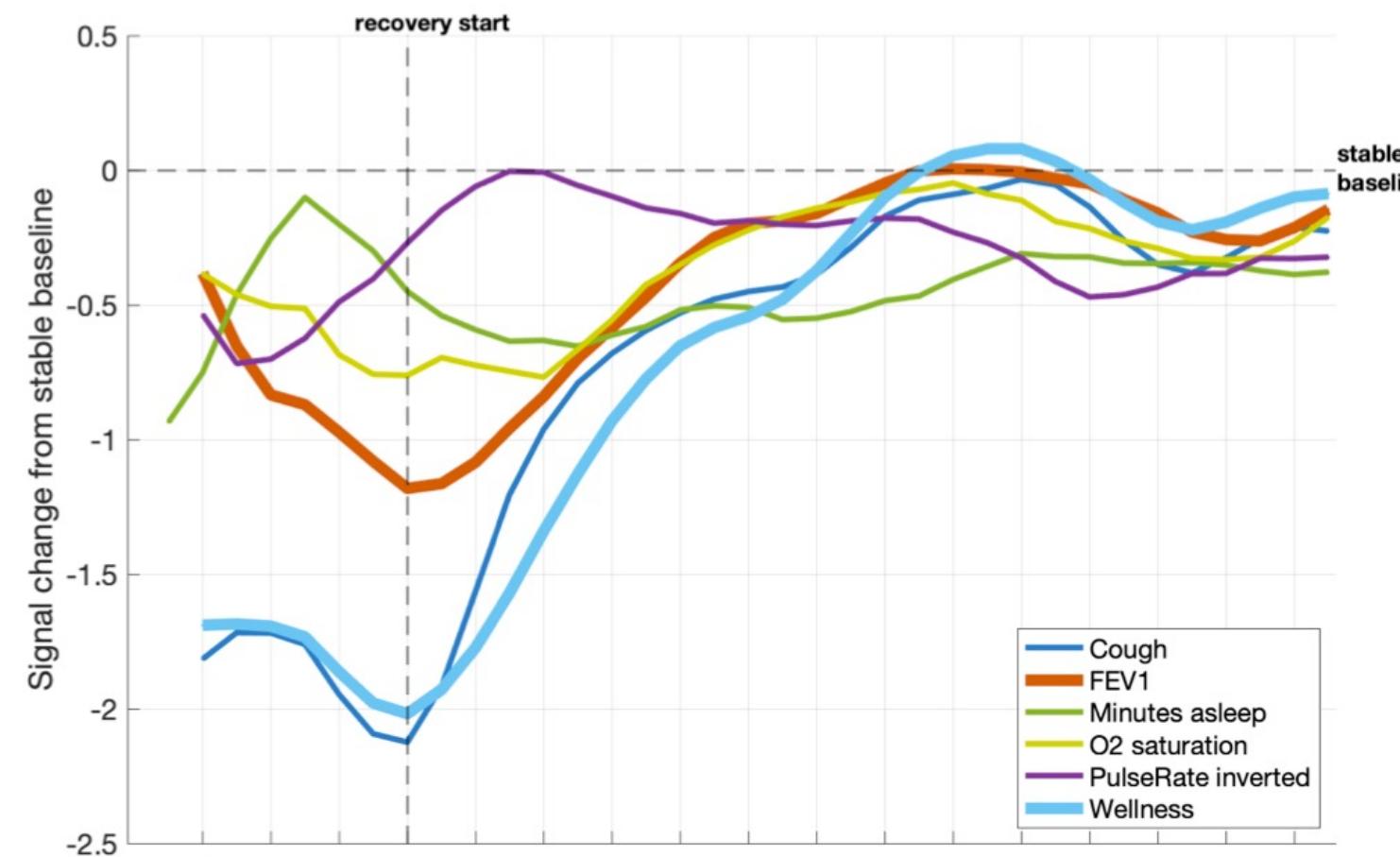


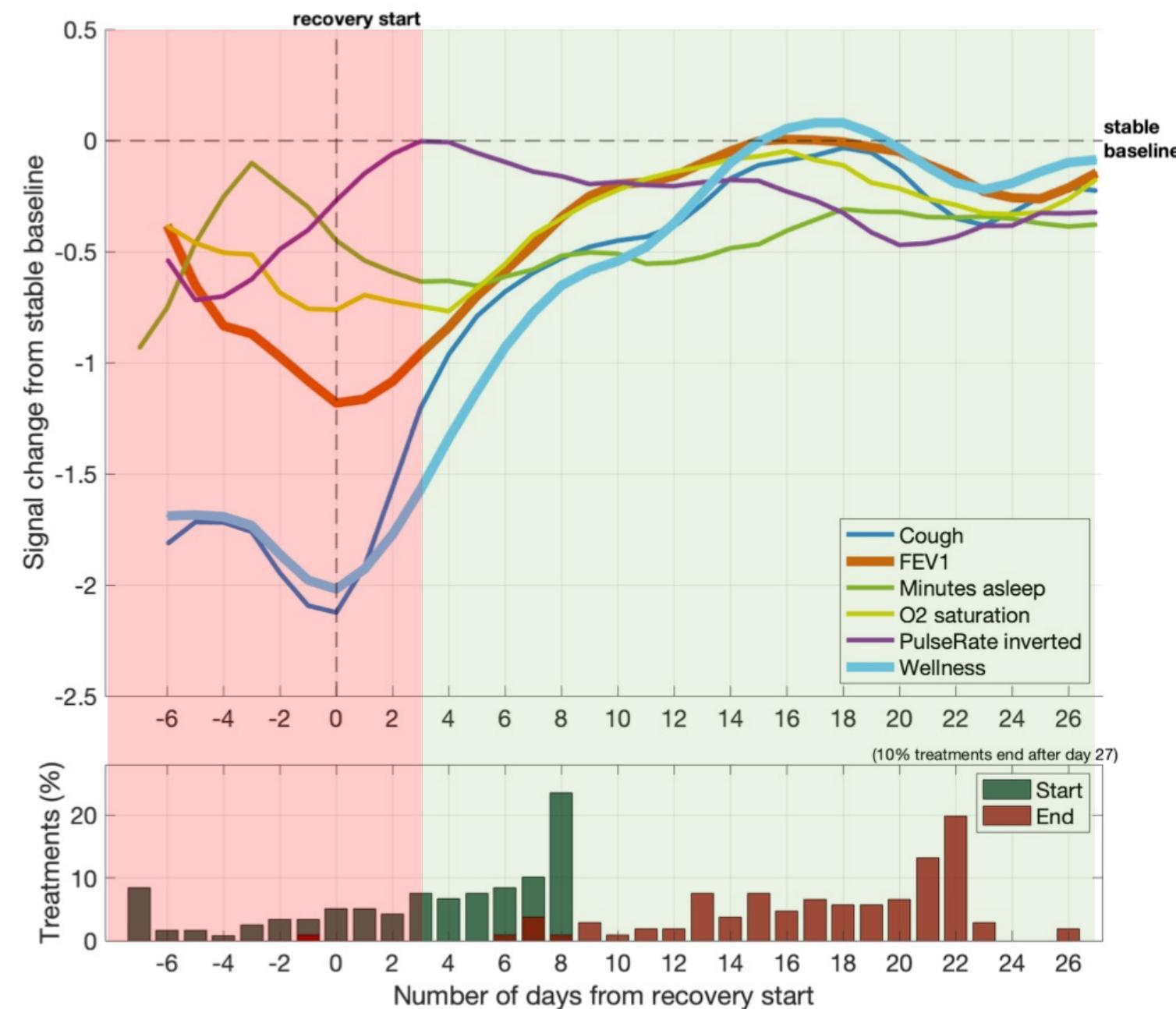
1 latent curve



2 latent curves

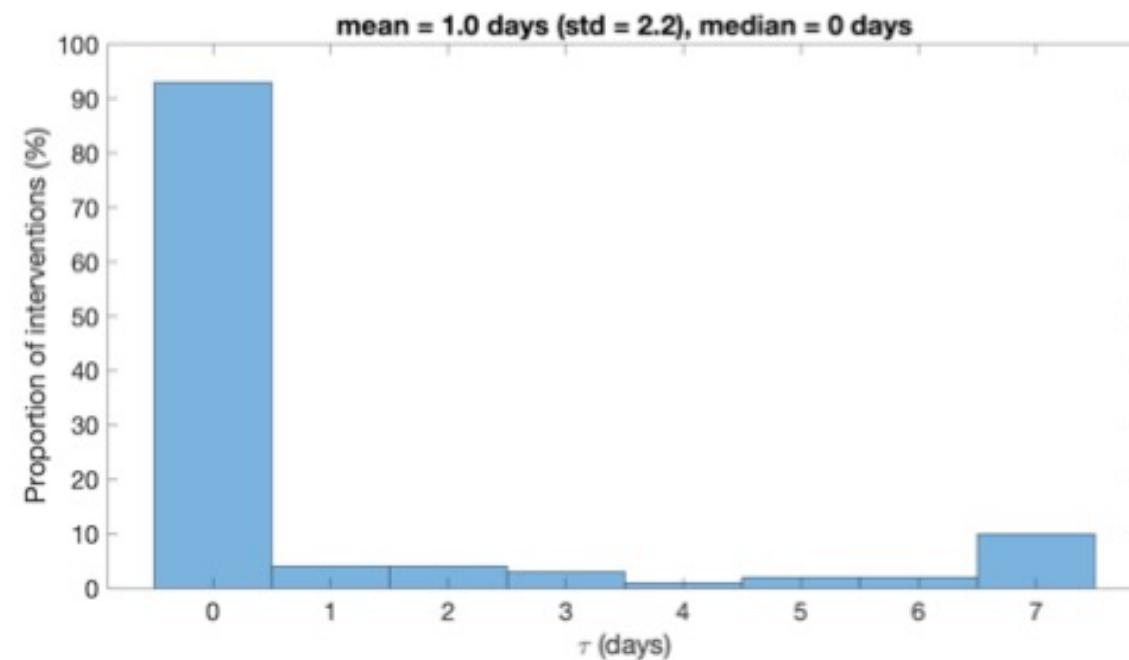




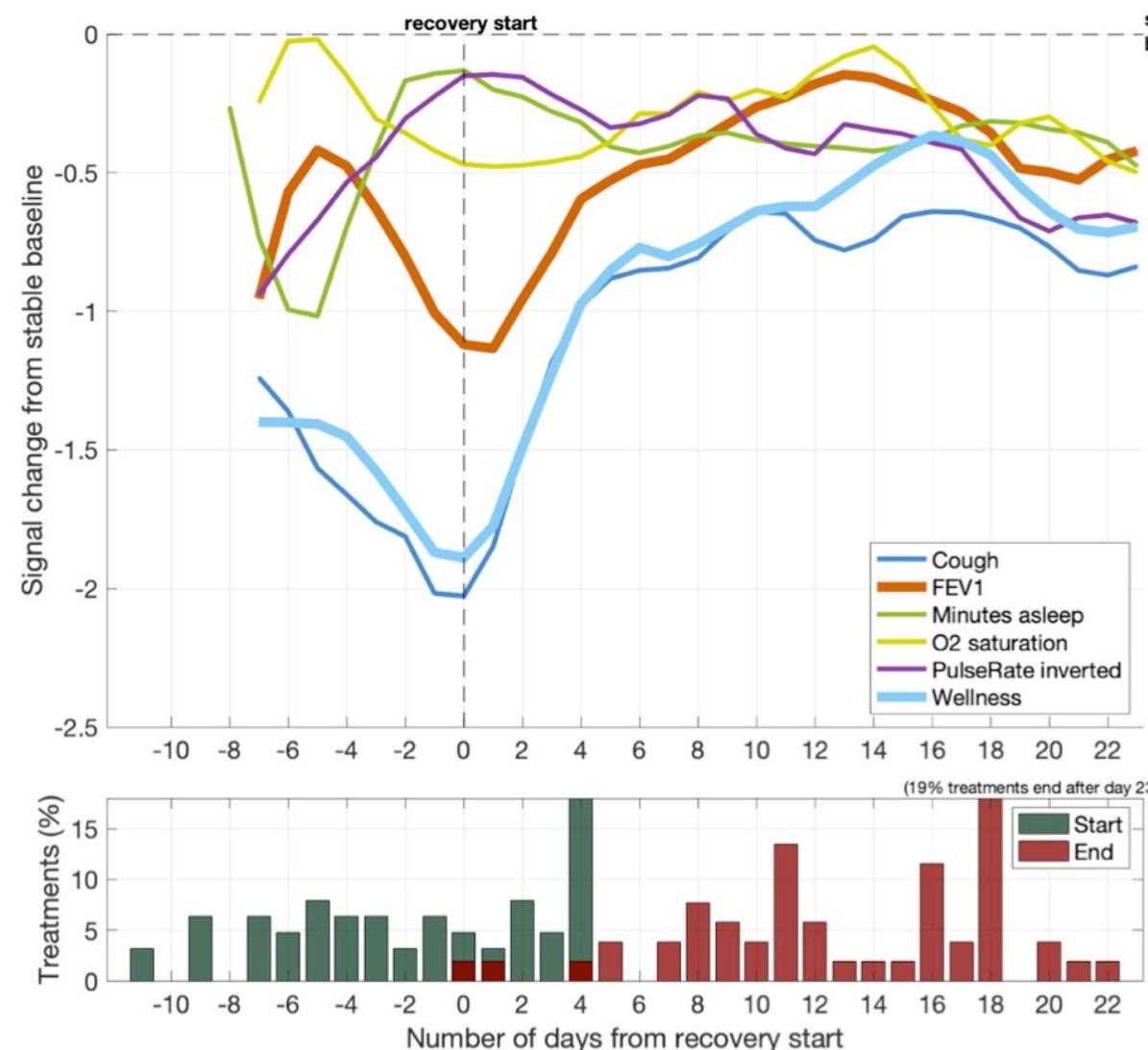


Recovery start - offset

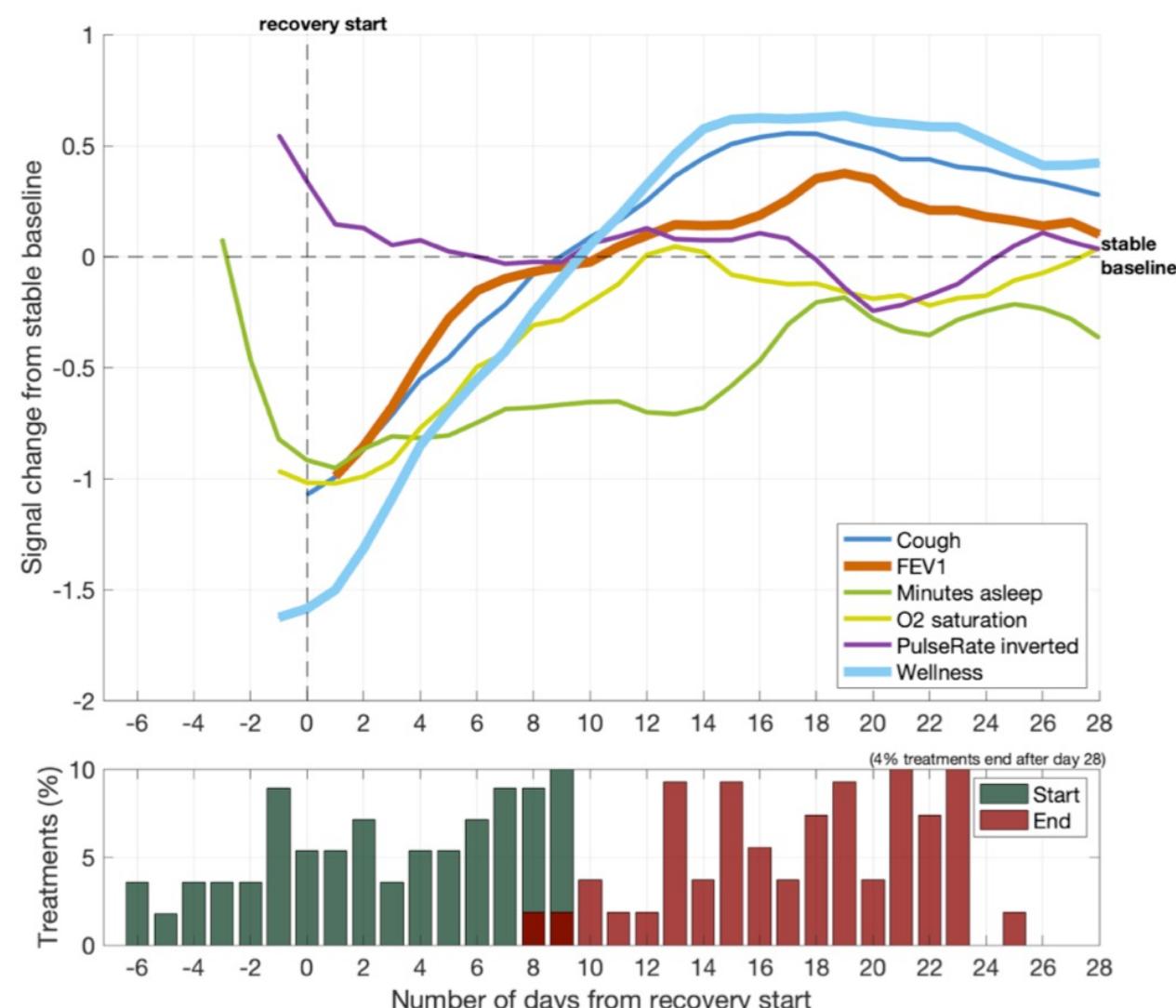
$$\forall n \in N, \tau = \begin{cases} k_R - F_n & \text{for } F_n < k_R \\ 0 & \text{for } F_n \geq k_R \end{cases}$$



Class 1: 53% of antibiotic interventions

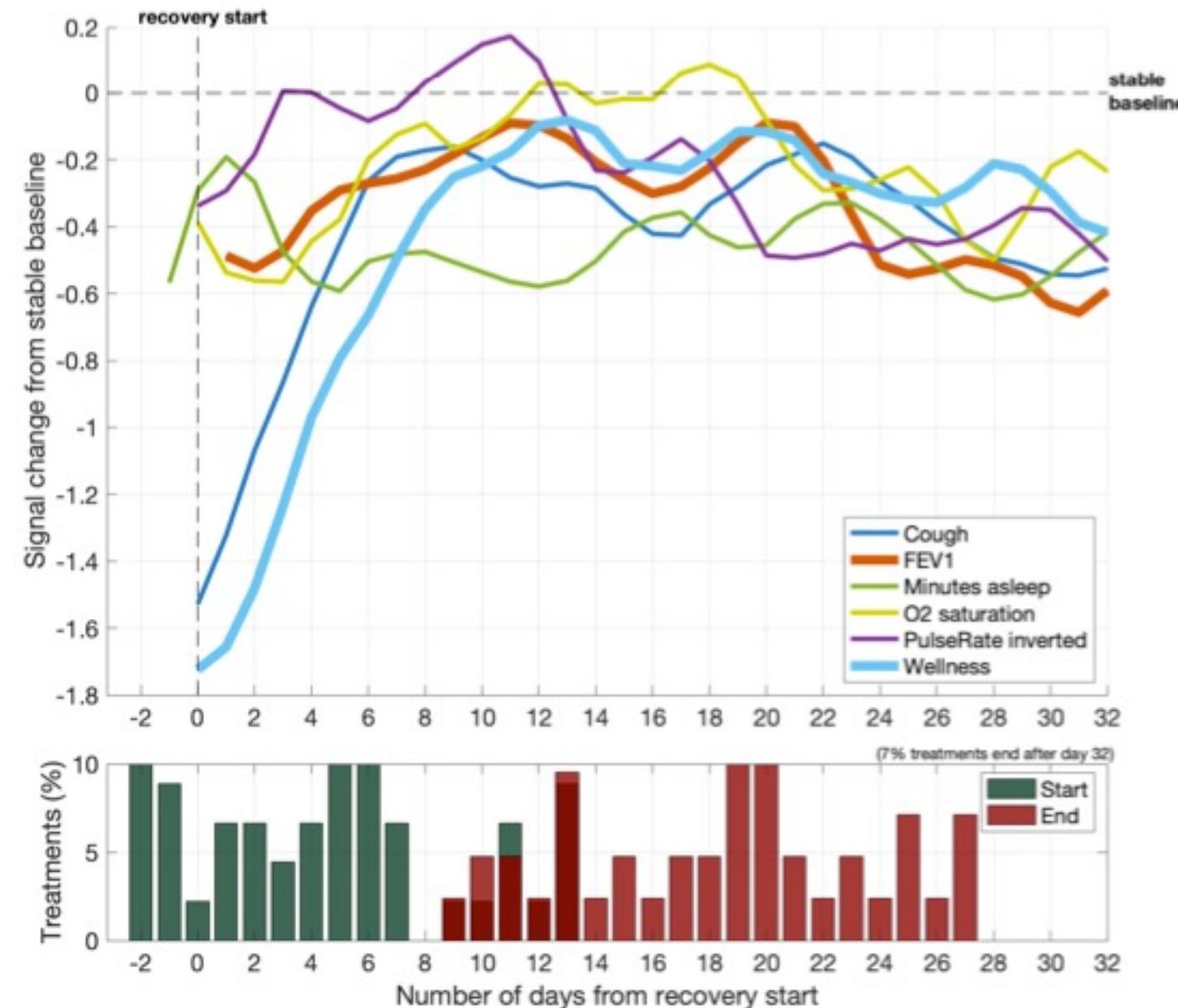


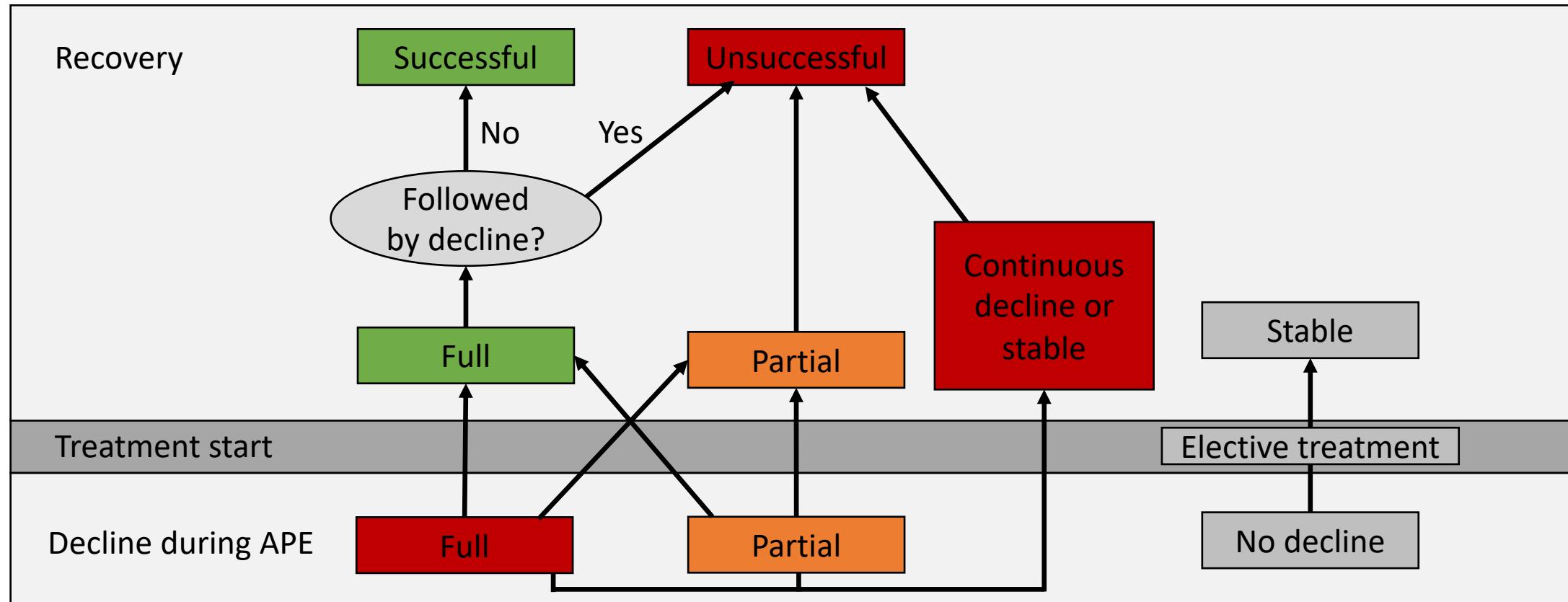
Class 2: 47% of antibiotic interventions



	Exacerbation Class	
	Class 1 (n=57)	Class 2 (n=56)
Stable FEV1 (median ± IQR)	2.2 ± 1	1.9 ± 1.2
p value	0.11	0.11
BMI (median ± IQR)	22 ± 4.5	21 ± 3.8
p value	0.74	0.74
Age (median ± IQR)	32 ± 10	35 ± 11
p value	0.24	0.24
CRP on admission (median ± IQR)	4 ± 14	4 ± 20
p value	0.28	0.28
CRP Stable (median ± IQR)	0 ± 0	0 ± 4
p value	0.15	0.15
Time to treatment response (median + IQR)	1 ± 5	0 ± 0.5
p value	0.001	0.001
Female (%)	56	70
p value	0.03	0.04
Chronic P. aeruginosa infection (%)	65	84
p value	<0.001	0.003
Chronic S. aureus infection (%)	16	20
p value	0.46	0.43
Number of IV treatments (%)	2.5	3.5
p value	0.09	0.004
Number of antibiotic treatments (%)	3.6	4.9
p value	0.02	0.001

30% of antibiotic interventions





Machine Learning can characterise:

- Typical recovery profile
- Different types of recoveries
 - Full recoveries
 - Partial recoveries
 - Recoveries with decline

Actionable information for the clinician

1. Patients with higher amount of treatments are more likely to experience successful recoveries. Already known, hence validates the ML approach
2. Prognosis of recovery quality: A high increase in subjective parameters (cough and wellness) not followed by physiological signals (FEV1, O₂ saturation) can indicate the beginning of an unsuccessful recovery.

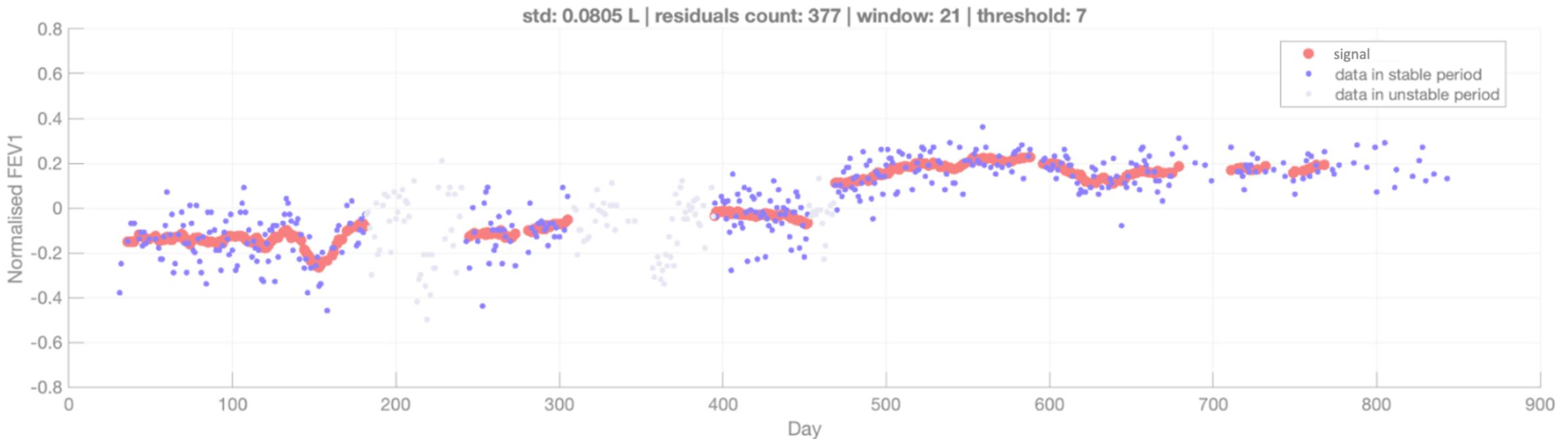
ML promise:

- **More data = more complex relations = more actionable items for clinicians**
- **Model flexibility**

Future work:

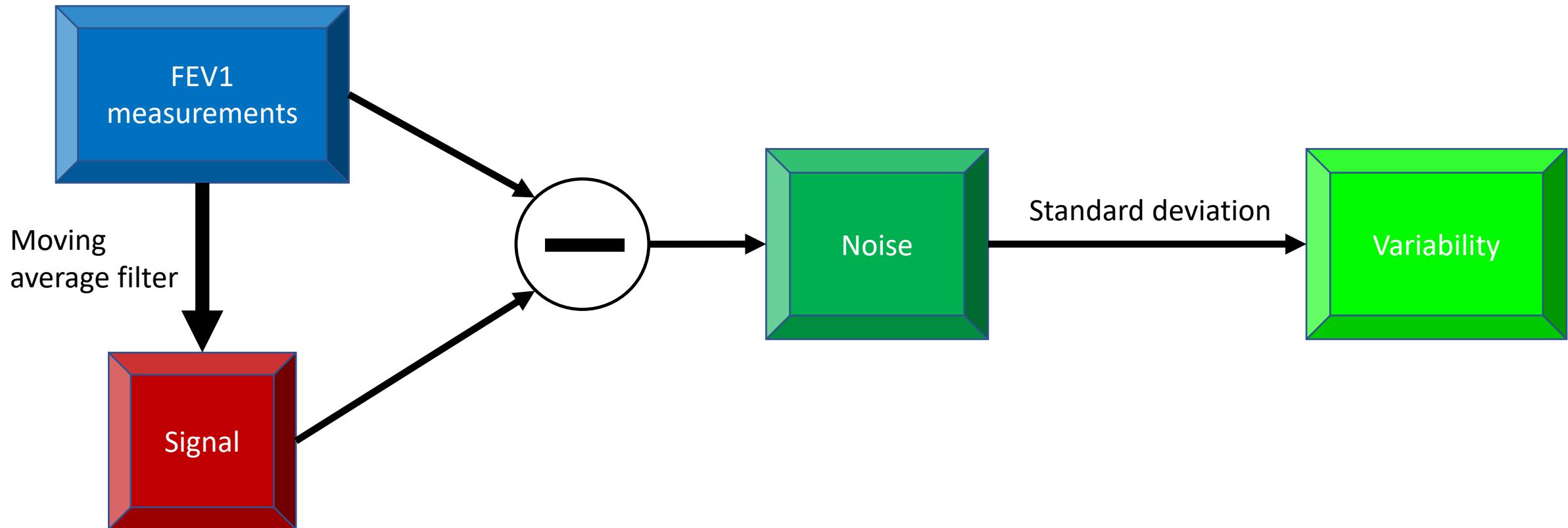
1. Analyse the impact of multiple competing features, including antibiotic choice, patient microbiology on the quality of recovery.
2. Infer long-term outcomes of combined treatments and therapies (*in particular CFTR modulators*).

Side project: Estimation of the variability in Cystic Fibrosis patient's FEV1 lung function measurements



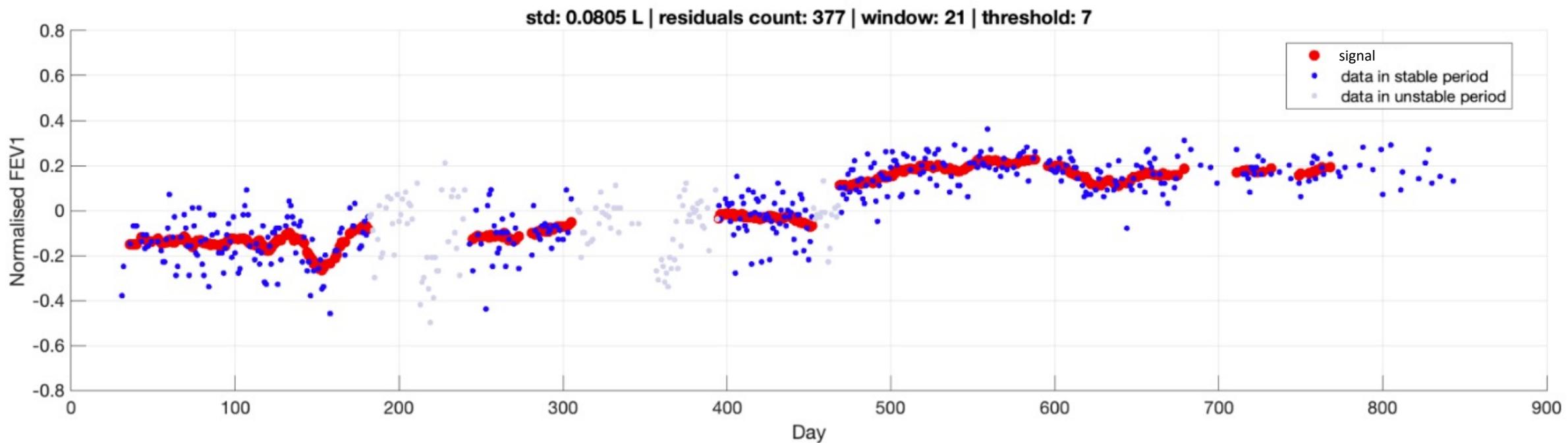
$$\text{measurement} = \text{signal} + \text{noise } (L)$$

$$\text{noise} = \text{measurement} - \text{signal } (L)$$



Model result

	Initial values	Values after stable period filter
Number of patients	226	220
Number of measurements	21036	16517



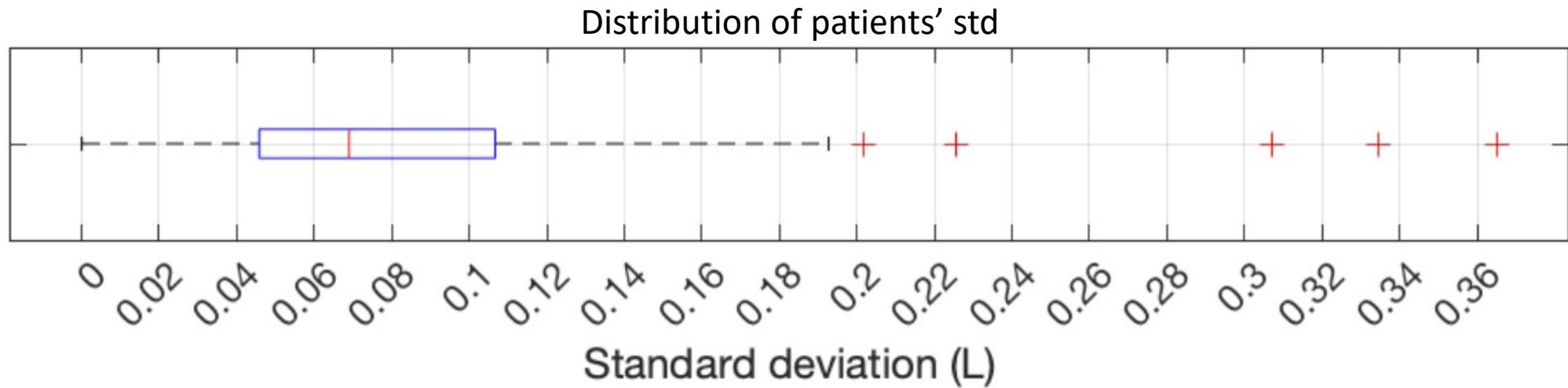
Model result

Variability: 310mL

window size (days)	7	15	21	31	
threshold (days)	3	5	7	10	
threshold/window	43%	33%	33%	32%	
#nonzero r. patients/#stable patients	81%	72%	70%	66%	
#residuals/#stable measurements	77%	79%	76%	74%	max diff (L)
standard deviation (L)	0.067	0.075	0.078	0.080	0.0130
99.5th percentile (L)	0.220	0.234	0.247	0.258	0.0382
0.5th percentile (L)	-0.247	-0.286	-0.287	-0.291	0.0439
97.5th percentile (L)	0.130	0.146	0.149	0.156	0.0261
2.5th percentile (L)	-0.135	-0.153	-0.157	-0.164	0.0288
95th percentile (L)	0.100	0.113	0.118	0.123	0.0229
5th percentile (L)	-0.100	-0.112	-0.117	-0.120	0.0200
std dev. 95% CI lower bound	0.066	0.074	0.077	0.079	
std dev. 95% CI upper bound	0.068	0.076	0.079	0.081	

Distribution of patients' variability

Variability is *extremely diverse* among patients!



Median variability : 276 mL, interquartile range [184; 428] mL

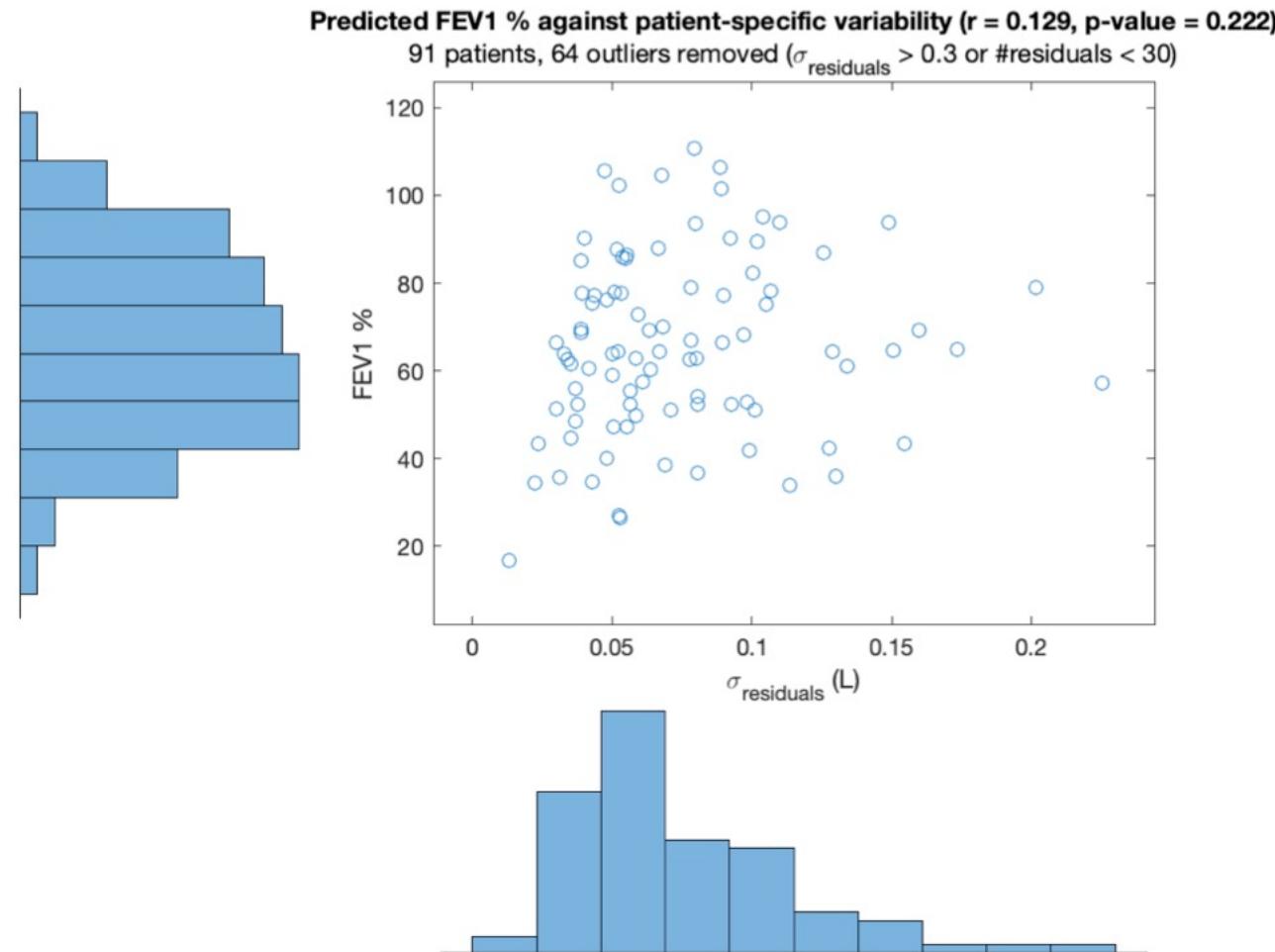
Global variability: 310 mL



Patient specific variability:
[184; 428] mL

Correlation between variability and predicted FEV1%

No correlation



Equality of variance tests:

F-test: $\sigma_1^2 > \sigma_2^2$

Levene's test: $\sigma_1^2 \neq \sigma_2^2$

Effect on CFTR modulators

Group	Measurements	Number of patients	Number of stable residuals	Std dev. (L)
A	Prior Symkevi (no therapy)	76	1151	0.084
B	During Symkevi		3006	0.075
C	During Triple Therapy		1967	0.069
Test	Groups involved	Relative change in std dev.	upper-tail F-test p-value	Levene's test p-value
1	A-C	-17%	<0.001	<0.001
2	B-C	-7%	<0.001	0.0276
3	A-B	-11%	<0.001	0.0695
Test	Measurements	Number of patients	Number of stable residuals	Std dev. (L)
4	Prior Triple Therapy* During Triple Therapy	152	5632 3759	0.079 0.069
5	Prior Symkevi** During Symkevi	95	1388 3440	0.082 0.074

*includes patient histories with no therapy, Symkevi, Orkambi, **includes patient histories with no therapy, Ivacaftor

Trikafta < Symkevi

Significant Trikafta < No therapy

Trikafta < Symkevi + Ivacaftor + Orkambi + No therapy

Not significant

Symkevi < No therapy

Symkevi < Ivacaftor + No therapy

Main project: Bayesian inference with Expectation Maximisation for the characterisation of antibiotic treatment recovery in Cystic Fibrosis

Side project: Estimation of the variability in Cystic Fibrosis patient's FEV1 lung function measurements



University of Cambridge
Department of Medicine

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- Ph.D. Damian Sutcliffe

External Expert

- John Winn, Machine Intelligence Group, Microsoft Research

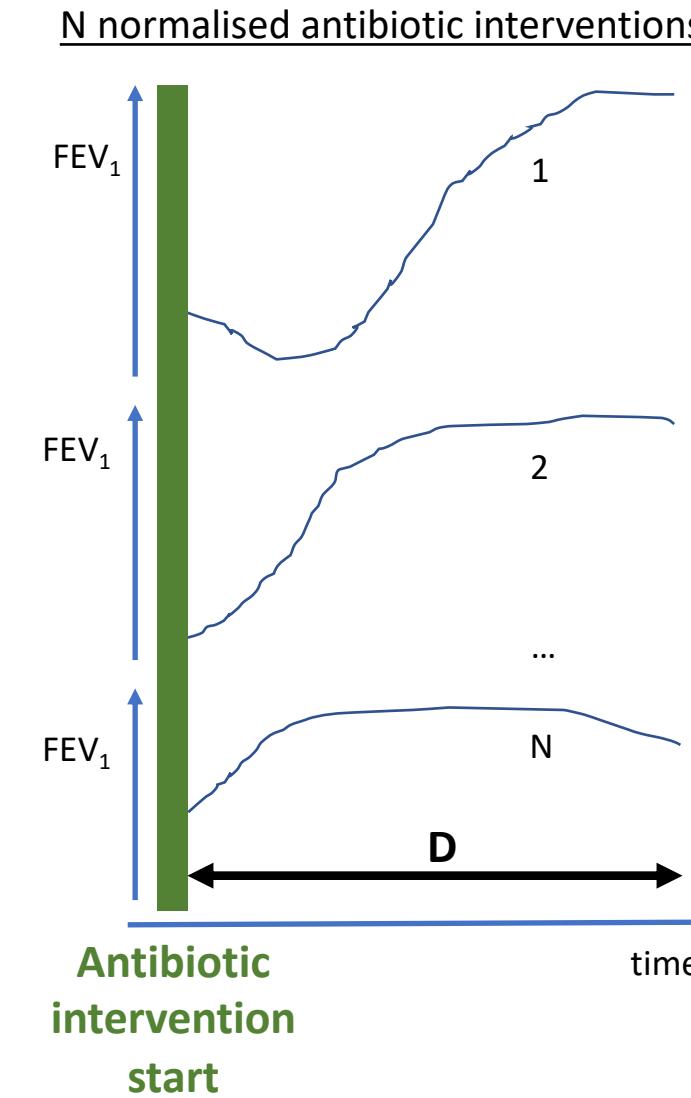
Thank you for your contribution!



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Supervised by

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- Prof. Martin Jaggi, Machine Learning and Optimization Laboratory
- Dr. Mary-Anne Hartley, Machine Learning and Optimization Laboratory



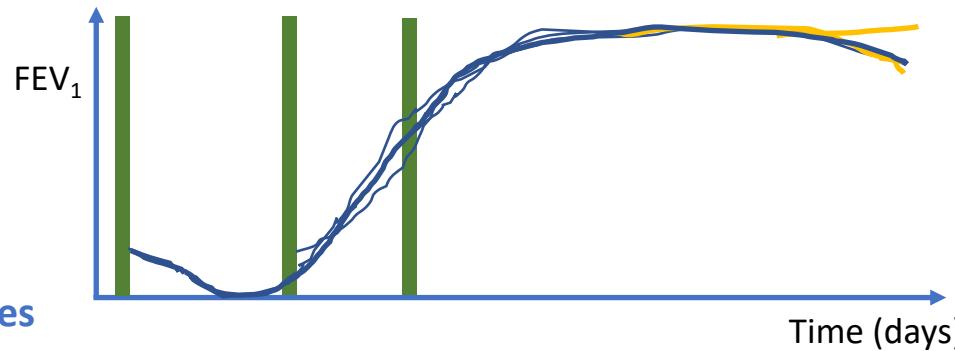
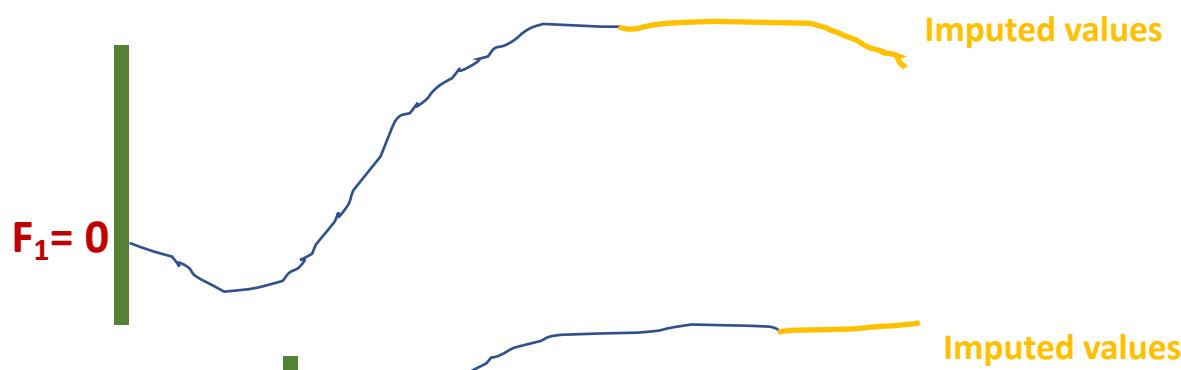
Alignment

Max offset

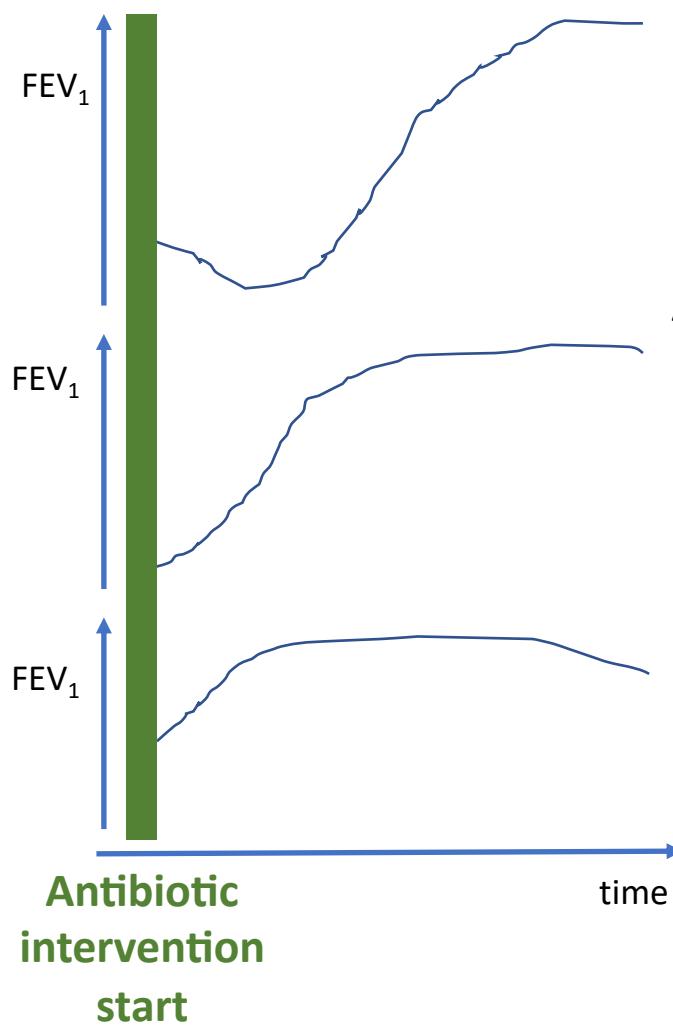
Typical profile

M dimensions (FEV₁, wellness O₂ saturation, etc) give M typical curves

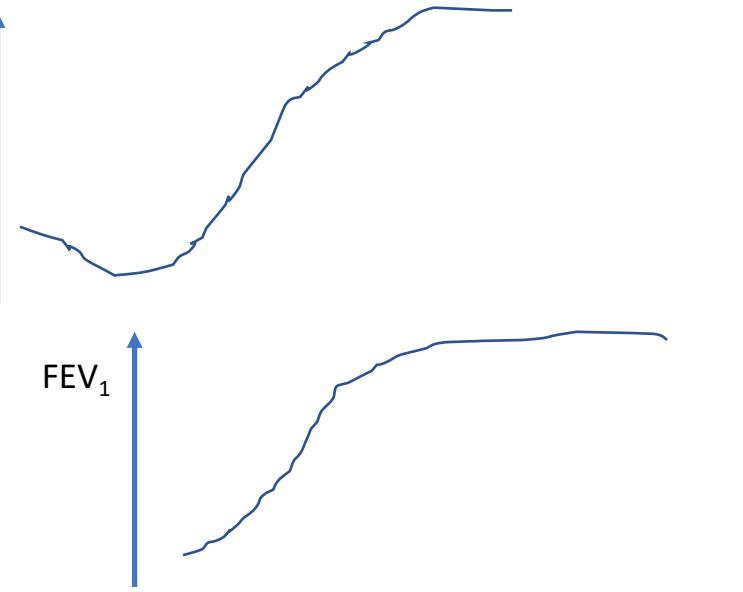
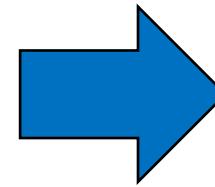
Imputed and shifted interventions



Averaging



Alignment



FEV₁

FEV₁

Averaging

