

queryMed package: how to display drug interactions

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Context

In the area of massive open-data access and big data in general, pharmaco-epidemiology and public health sciences are in need for computational tools. Researchers can now query large medical information systems such as medico-administrative databases and claim databases. Although those information systems are often well structured, their contents are highly codified with several medical terminologies and ontologies, which might be difficult to analyze by non-expert. Pharmaco-epidemiologists and public health scientists thus need batch translation of diverse medical codes like diagnostic codes (based on ICD9 or ICD10), medical procedures or drugs codes (based on ATC nomenclature). In addition to the translation of those codes, their annotation can help making the most of medico-administrative and claim databases analysis by public health researchers. For instance, in a patient care trajectory it might help identifying critical drug interactions that might impair the patient safety. It might also be used to predict evitable hospitalization due to inappropriated care trajectory.

Using ontologies in R has proven to be efficient and useful[Kurbatova et al., 2011], notably in *omic fields of research. For example, many genomes (including the Human genome) are available for download through the BioConductor repository. Those genomes are annotated and statistical analyses of enrichment of standardised terms (common or closely related) within part of living organisms have help discovering new or impaired functions.

Simimilarly, knowledges in pharmacoepidemiology, drug interactions, indications and contraindications have been combined for clinical data analyzes [Pathak et al., 2013]. However, while works like the Drug Indication Database (DID) and Drug Interaction Knowledge Base (DIKB) have pooled different sources of medical knowledge from the Web of Data [Ayvaz et al., 2015, Sharp, 2017], the use and merging of knowledge is still non trivial to perform due to the multitude of medical classifications and sources of knowledge.

Today the Linked Open Data and the Semantic Web provide technical solutions for the integration of distributed data, their interrogation and their interpretation. For instance, the Ressource Description Framework (RDF) standardise the representation of data and knowledge, and thus allows their sharing and reuse. Furthermore, SPARQL, an other standard from the Semantic Web, provides a way to query these structured data. So these technologies allow reasoning through shared knowledge in the form of ontologies, classifications, and medical thesauri. Although, querying Linked Data in R with SPARQL is feasible, it requiers expertise in the SPARQL language and data schema.

To facilitate this step, we propose a tool to integrate medical ontologies programmatically in the R environment. The queryMed package provides functions and algorithms to query the different sources of medical knowledge representations from the Web of data and to link them to the main medical classifications, for the enrichment and the analysis of medical data. The proposed functions are of two sort: for expert and non-expert. In this vignette, we illustrate the interest of our package to display drug interactions as graphs and explore ATC structure and information.

Applications

To illustrate how to visualize drug interactions with queryMed we explore the drugs that are listed to interact with the platelet antiaggregant CLOPIDOGREL.

First we load queryMed and the DIKB dataset that lists drug interactions gathered from various knowledge databases.

```
library(queryMed)
```

```
##
## Attaching package: 'queryMed'
## The following object is masked from 'package:base':
##
##      search
```

```
data(DIKB)
head(DIKB, n=3)
```

```
##      drug2      drug1      object precipitant contraindication ddiPkMechanism
## 1 DB00001 DB00636 CLOFIBRATE  LEPIRUDIN          FALSE          <NA>
## 2 DB00001 DB06605  APIXABAN   LEPIRUDIN          FALSE          <NA>
## 3 DB00001 DB00822 DISULFIRAM LEPIRUDIN          FALSE          <NA>
##      effectConcept label precaution severity          uri
## 1          <NA> <NA>      TRUE      <NA> http://rest.kegg.jp/ddi/D00279
## 2          <NA> <NA>      TRUE      <NA> http://rest.kegg.jp/ddi/D03213
## 3          <NA> <NA>      TRUE      <NA> http://rest.kegg.jp/ddi/D00131
##      source evidenceStatement      atc1      atc2
## 1      Keggs          <NA> C10AB01 B01AE02
## 2      Keggs          <NA> B01AF02 B01AE02
## 3      Keggs          <NA> N07BB01 B01AE02
```

We subset the dataset and select only the rows where the object (drug of interest) is the CLOPIDOGREL.

```
clopData <- DIKB[DIKB$object=="CLOPIDOGREL",]
dim(clopData)
```

```
## [1] 5096 15
```

```
# unique interactions
dim(unique(clopData[,c("object", "precipitant")]))
```

```
## [1] 130 2
```

Overall 5096 rows are selected. Although, some interactions are reported by more than one source, thus it corresponds to 130 unique interactions. The sources are:

```
table(clopData[, "source"])
```

```
##
##      CredibleMeds      DDI-Corpus-2011      DDI-Corpus-2013
##          1              0              1
##      Drugbank      FrenchDB              HEP
##          13              6              0
##          HIV      NDF-RT      NLM-Corpus
##          0              0              6
##      ONC-HighPriority ONC-NonInterruptive      OSCAR
##          0              2              0
##          PK-Corpus      World-Vista      Keggs
##          0              12             119
```

To visualize the interactions we propose to use network representation. Currently, one can look at one drug (object) and its precipitants at a time. The circle layout positionned the object of interest at the center (see Figure below). The thickness of the edge represents the fact that some interactions are reported by more than one source. The graphs below display the interactions listed by at least 2 sources (nbinteractions=2). Some drugs belong to the same ATC family and are represented by the same vertex color. When considering more

general classes of the ATC nomenclature, the interactions concern 11 and 15 classes, respectively (Fig1B, Fig1C). Again some classes are characterized by a high number of interactions (size of the vertex) and sources (thickness of the edge), notably the anti-thrombotic and gastro-esophageal family. In the context of pharmacovigilance, one could then make assumptions about the value of expanding the study of interactions between clopidogrel and the 26 known drugs to those between clopidogrel and the families they belong to.

```
par(mfrow=c(2,2), mar=c(2,2,2,2))
pddi_plot("CLOPIDOGREL", level=5, nbinteractions=2)
```

```
##      atc4                      label5 n mypalette
## 1  A01AD acetylsalicylic acid 3   #9E0142
## 2  A02BC                omeprazole 3   #D53E4F
## 3  A02BC                pantoprazole 2   #D53E4F
## 4  A02BC                lansoprazole 2   #D53E4F
## 5  A02BC                esomeprazole 5   #D53E4F
## 6  A10BX                repaglinide 2   #F46D43
## 7  B01AA                acenocoumarol 2   #FDAE61
## 8  B01AD                alteplase 2   #FEE08B
## 9  B01AE dabigatran etexilate 3   #FFFFBF
## 10 B01AF                rivaroxaban 4   #E6F598
## 11 B01AF                apixaban 3   #E6F598
## 12 J05AG                etravirine 2   #ABDDA4
## 13 L01XX                anagrelide 2   #66C2A5
## 14 M03BX                pridinol 3   #3288BD
## 15 N03AB                phenytoin 2   #5E4FA2
```

```
text(-1.5,1,"A", cex=2)
pddi_plot("CLOPIDOGREL", level=4, nbinteractions=2)
```

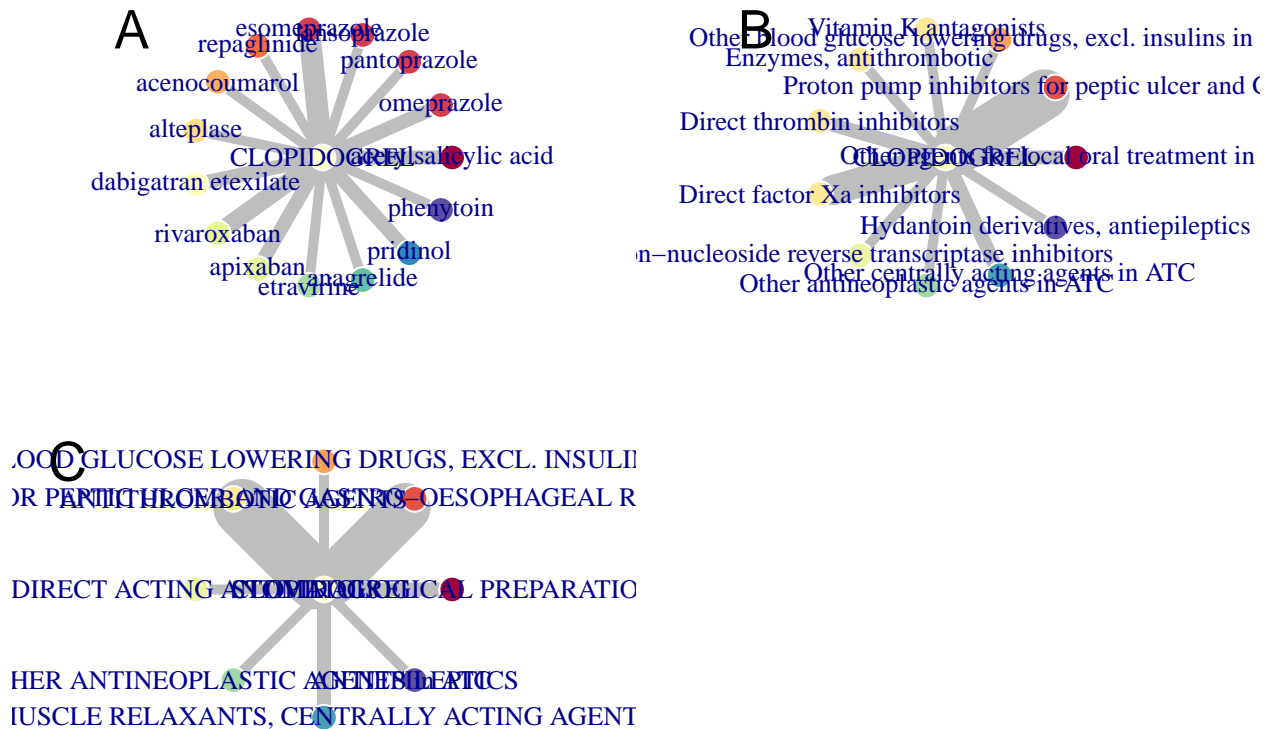
```
##      atc3                      label4 n
## 1  A01A                Other agents for local oral treatment in ATC 3
## 2  A02B                Proton pump inhibitors for peptic ulcer and GORD 12
## 3  A10B Other blood glucose lowering drugs, excl. insulins in ATC 2
## 4  B01A                Vitamin K antagonists 2
## 5  B01A                Enzymes, antithrombotic 2
## 6  B01A                Direct thrombin inhibitors 3
## 7  B01A                Direct factor Xa inhibitors 7
## 8  J05A                Non-nucleoside reverse transcriptase inhibitors 2
## 9  L01X                Other antineoplastic agents in ATC 2
## 10 M03B                Other centrally acting agents in ATC 3
## 11 N03A                Hydantoin derivatives, antiepileptics 2
```

```
##      mypalette
## 1  #9E0142
## 2  #E25249
## 3  #FBA45C
## 4  #FEE899
## 5  #FEE899
## 6  #FEE899
## 7  #FEE899
## 8  #EDF7A3
## 9  #A1D9A4
## 10 #48A0B2
## 11 #5E4FA2
```

```
text(-1.5,1,"B", cex=2)
pddi_plot("CLOPIDOGREL", level=3, nbinteractions=2)
```

```
## atc2 label3
## 1 A01 STOMATOLOGICAL PREPARATIONS
## 2 A02 DRUGS FOR PEPTIC ULCER AND GASTRO-OESOPHAGEAL REFLUX DISEASE (GORD)
## 3 A10 BLOOD GLUCOSE LOWERING DRUGS, EXCL. INSULINS
## 4 B01 ANTITHROMBOTIC AGENTS
## 5 J05 DIRECT ACTING ANTIVIRALS
## 6 L01 OTHER ANTINEOPLASTIC AGENTS in ATC
## 7 M03 MUSCLE RELAXANTS, CENTRALLY ACTING AGENTS
## 8 N03 ANTIEPILEPTICS
## n mypalette
## 1 3 #9E0142
## 2 12 #E25249
## 3 2 #FBA45C
## 4 14 #FEE899
## 5 2 #EDF7A3
## 6 2 #A1D9A4
## 7 3 #48A0B2
## 8 2 #5E4FA2
```

```
text(-2,1,"C",cex=2)
```



```
sessionInfo()
```

```
## R version 3.5.0 (2018-04-23)
## Platform: x86_64-apple-darwin15.6.0 (64-bit)
## Running under: macOS High Sierra 10.13.6
##
## Matrix products: default
## BLAS: /Library/Frameworks/R.framework/Versions/3.5/Resources/lib/libRblas.0.dylib
## LAPACK: /Library/Frameworks/R.framework/Versions/3.5/Resources/lib/libRlapack.dylib
##
## locale:
```

```
## [1] fr_FR.UTF-8/fr_FR.UTF-8/fr_FR.UTF-8/C/fr_FR.UTF-8/fr_FR.UTF-8
##
## attached base packages:
## [1] stats      graphics  grDevices  utils      datasets  methods   base
##
## other attached packages:
## [1] queryMed_0.1
##
## loaded via a namespace (and not attached):
## [1] zip_1.0.0           Rcpp_0.12.17        compiler_3.5.0
## [4] pillar_1.2.3        RColorBrewer_1.1-2  plyr_1.8.4
## [7] bindr_0.1.1         bitops_1.0-6        tools_3.5.0
## [10] digest_0.6.15       jsonlite_1.5        evaluate_0.10.1
## [13] tibble_1.4.2        pkgconfig_2.0.1     rlang_0.2.1
## [16] openxlsx_4.1.0      igraph_1.2.1        yaml_2.1.19
## [19] bindrcpp_0.2.2      rJava_0.9-10        httr_1.3.1
## [22] stringr_1.3.1       dplyr_0.7.6         knitr_1.20
## [25] rprojroot_1.3-2     tidyselect_0.2.4    glue_1.2.0
## [28] data.table_1.11.4   rrdif_2.2.0         R6_2.2.2
## [31] tcltk_3.5.0         rmarkdown_1.10      purrr_0.2.5
## [34] tidyr_0.8.1         magrittr_1.5         rrdiflibs_1.4.1
## [37] backports_1.1.2     htmltools_0.3.6     assertthat_0.2.0
## [40] stringi_1.2.3       RCurl_1.95-4.11
```

References

- Serkan Ayvaz, John Horn, Oktie Hassanzadeh, Qian Zhu, Johann Stan, Nicholas P. Tatonetti, Santiago Vilar, Mathias Brochhausen, Matthias Samwald, Majid Rastegar-Mojarad, Michel Dumontier, and Richard D. Boyce. Toward a complete dataset of drug–drug interaction information from publicly available sources. *Journal of Biomedical Informatics*, 55:206–217, June 2015. ISSN 15320464. doi: 10.1016/j.jbi.2015.04.006. URL <http://linkinghub.elsevier.com/retrieve/pii/S1532046415000738>.
- N. Kurbatova, T. Adamusiak, P. Kurnosov, M. A. Swertz, and M. Kapushesky. ontoCAT: an R package for ontology traversal and search. *Bioinformatics*, 27(17):2468–2470, September 2011. ISSN 1367-4803, 1460-2059. doi: 10.1093/bioinformatics/btr375. URL <https://academic.oup.com/bioinformatics/article-lookup/doi/10.1093/bioinformatics/btr375>.
- Jyotishman Pathak, Richard C. Kiefer, and Christopher G. Chute. Using linked data for mining drug-drug interactions in electronic health records. *Studies in Health Technology and Informatics*, 192:682–686, 2013. ISSN 0926-9630.
- Mark E Sharp. Toward a comprehensive drug ontology: extraction of drug-indication relations from diverse information sources. *Journal of Biomedical Semantics*, 8(1), December 2017. ISSN 2041-1480. doi: 10.1186/s13326-016-0110-0. URL <http://jbiomedsem.biomedcentral.com/articles/10.1186/s13326-016-0110-0>.