

Introduction to Machine Learning & Its Application in Healthcare

Lecture 4

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What Is Machine Learning?

- A branch of **artificial intelligence**, concerned with the design and development of algorithms that allow computers to evolve behaviors based on empirical data.
- Arthur Samuel (1959). Machine Learning: Field of study that gives computers the ability to learn without being explicitly programmed.
- Tom Mitchell (1998) Well-posed Learning Problem: A computer program is said to learn from **experience E** with respect to some **task T** and some **performance measure P**, if its performance on T, as measured by P, improves with experience E.

What Is Machine Learning? Example

- “A computer program is said to learn from experience E with respect to some task T and some performance measure P , if its performance on T , as measured by P , improves with experience E .”
- Suppose your email program watches which emails you do or do not mark as spam, and based on that learns how to better filter spam.
 - Classifying emails as spam or not spam ---> Task T
 - Watching you label emails as spam or not spam ---> Experience E
 - The number (or fraction) of emails correctly classified as spam/not spam ---> Performance measure P

ML Applications



The Learning Setting

- Imagine learning algorithm is trying to decide which loan applicants are bad credit risks.
- Might represent each person by n features. (e.g., income range, debt load, employment history, etc.)
- Take sample S of data, labeled according to whether they were/weren't good risks.
- Goal of algorithm is to use data seen so far produce good prediction rule (a "hypothesis") $h(x)$ for future data.

The learning setting example

| % down | recent delinq? | other accts | mmp/inc | high debt? | Good risk? |
|--------|----------------|-------------|---------|------------|------------|
| 10 | N | Y | 0.32 | N | Y |
| 10 | N | N | 0.25 | Y | Y |
| 5 | Y | N | 0.30 | N | N |
| 20 | N | Y | 0.31 | N | Y |
| 5 | N | N | 0.42 | N | N |
| 10 | Y | N | 0.38 | Y | N |
| 10 | N | N | 0.25 | Y | Y |

- Given this data, some reasonable rules might be:
 - Predict YES iff (!recent delinq) AND (%down > 5).
 - Predict YES iff $100 * [\text{mmp/inc}] - 1 * [\% \text{down}] < 25$.
 - ...

Big Questions

- (A) How might we automatically generate rules that do well on observed data? ---> Algorithms

- (B) What kind of confidence do we have that they will do well in the future? ---> Performance Evaluation

The machine learning framework

$$y = f(x)$$

Output Prediction Function Input

- Training:** given a training set of labeled examples $\{(\mathbf{x}_1, y_1), \dots, (\mathbf{x}_n, y_n)\}$, estimate the prediction function f by minimizing the prediction error on the training set
- **Testing:** apply f to a never before seen *test example* \mathbf{x} and output the predicted value $y = f(\mathbf{x})$

ML in a Nutshell

- Every machine learning algorithm has three components:
 - Representation
 - Evaluation
 - Optimization

Representation

- Decision trees
- Sets of rules / Logic programs
- Graphical models (Bayes/Markov nets)
- Neural networks
- Support vector machines
- ...

Evaluation

- Accuracy
- Precision and recall
- Squared error
- Likelihood
- Posterior probability
- Cost / Utility
- Margin
- Entropy
- K-L divergence
- ...

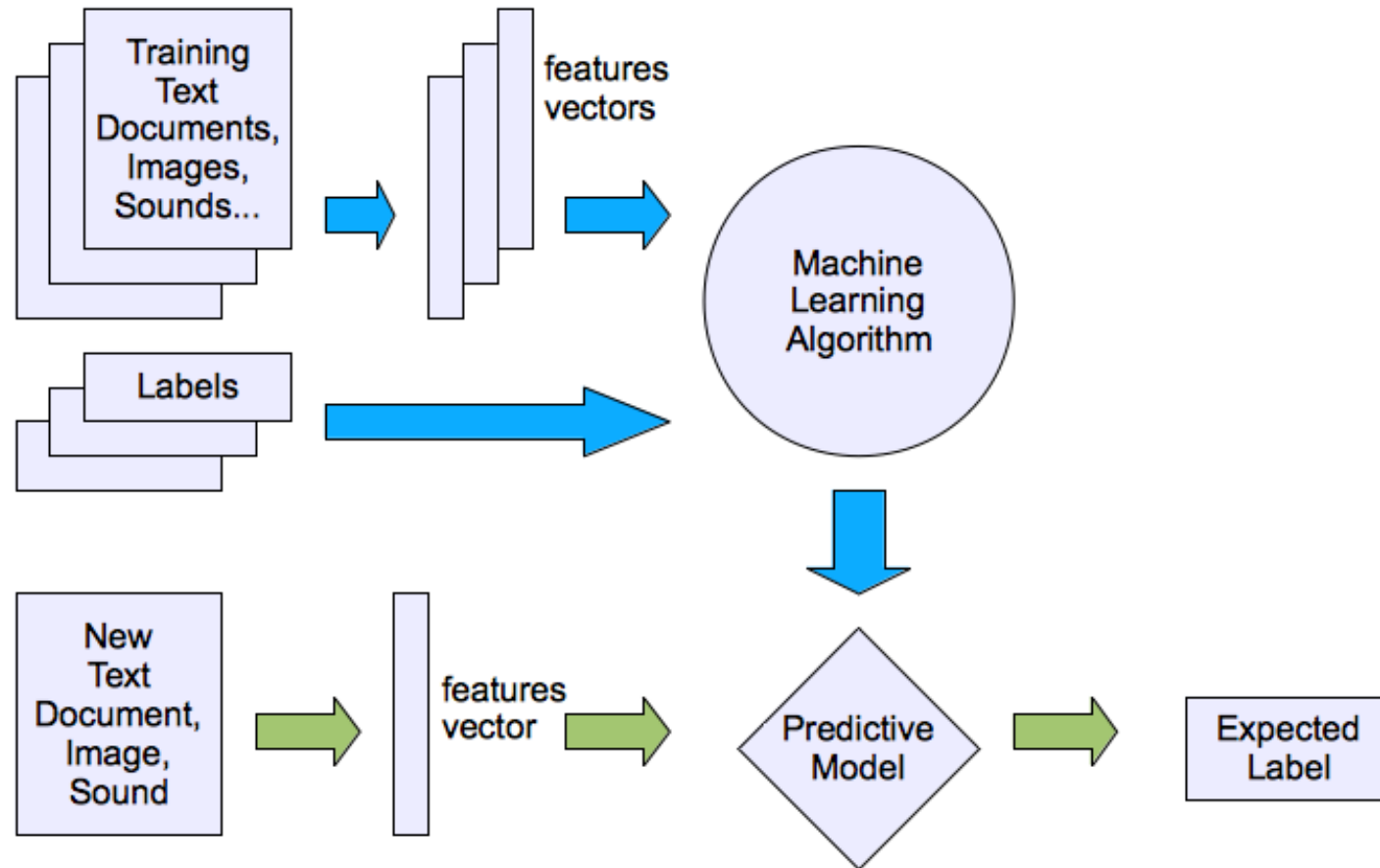
Optimization

- Combinatorial optimization
 - E.g.: Greedy search
- Convex optimization
 - E.g.: Gradient descent
- Constrained optimization
 - E.g.: Linear programming

Machine Learning Algorithms

- Supervised Learning
 - Training data includes desired outputs
- Unsupervised Learning
 - Training data does not include desired outputs
- Semi-supervised learning
 - Training data includes a few desired outputs
- Others: Reinforcement learning, recommender systems

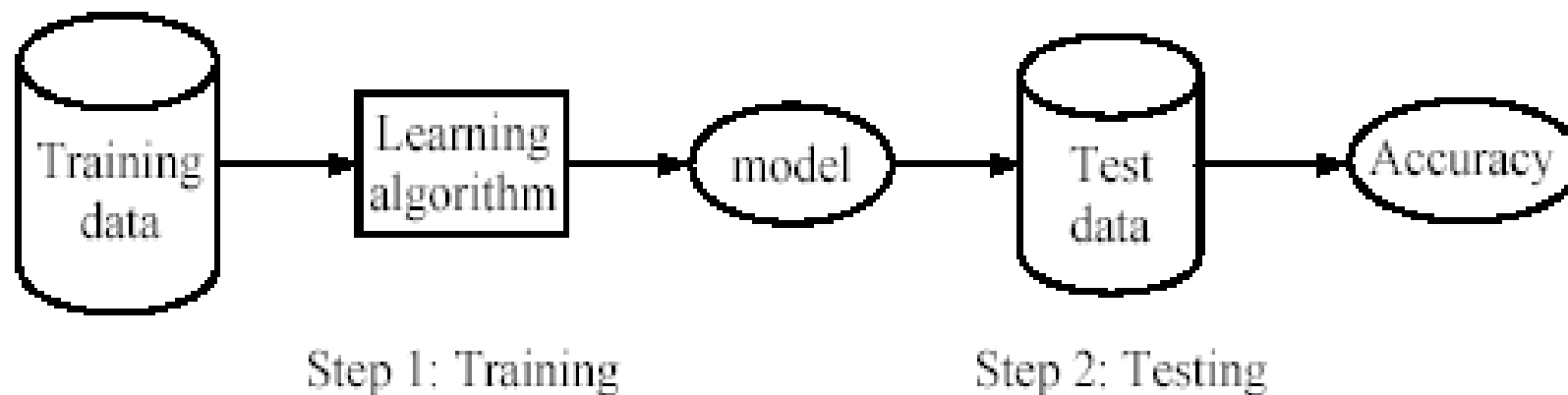
Supervised Learning



Supervised learning process: two steps

- Learning (training): Learn a model using the training data
- Testing: Test the model using unseen test data to assess the model accuracy

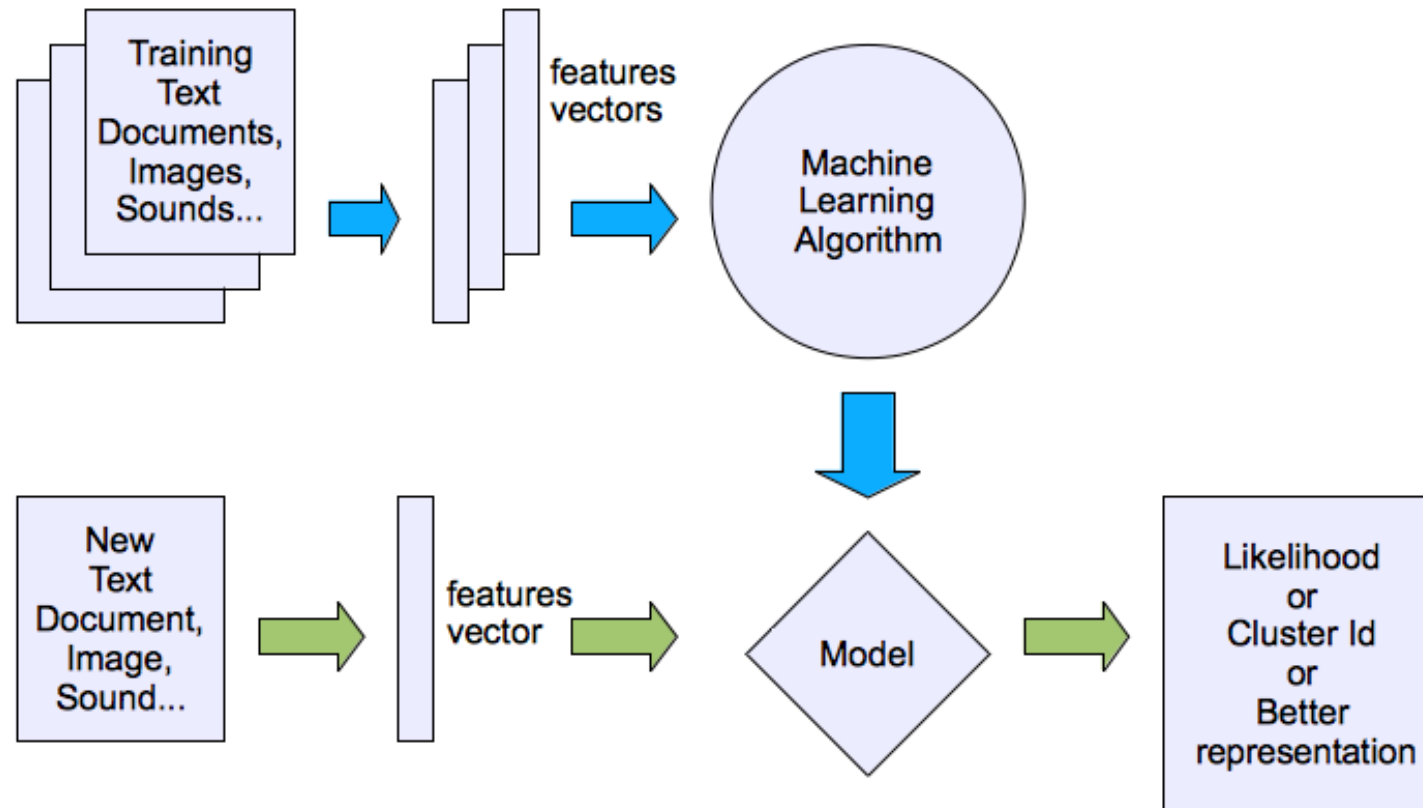
$$Accuracy = \frac{\text{Number of correct classifications}}{\text{Total number of test cases}},$$



Unsupervised Learning

- *Learning patterns from unlabeled data*
- Tasks
 - understanding and visualization
 - anomaly detection
 - information retrieval
 - data compression

Unsupervised Learning (Cont.)



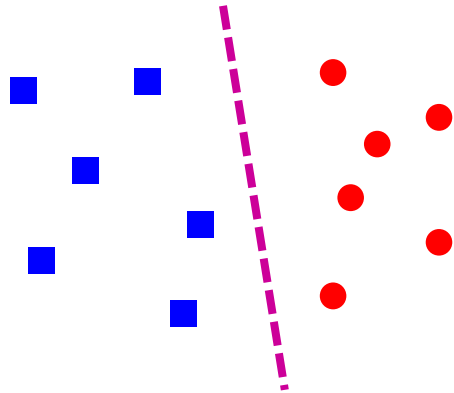
Supervised Learning (Cont.)

- Supervised learning categories and techniques
 - **Linear classifier** (numerical functions)
 - **Parametric** (Probabilistic functions)
 - Naïve Bayes, Gaussian discriminant analysis (GDA), Hidden Markov models (HMM), Probabilistic graphical models
 - **Non-parametric** (Instance-based functions)
 - *K*-nearest neighbors, Kernel regression, Kernel density estimation, Local regression
 - **Non-metric** (Symbolic functions)
 - Classification and regression tree (CART), decision tree
 - **Aggregation**
 - Bagging (bootstrap + aggregation), Adaboost, Random forest

Unsupervised Learning (Cont.)

- Unsupervised learning categories and techniques
 - **Clustering**
 - K-means clustering
 - Spectral clustering
 - **Density Estimation**
 - Gaussian mixture model (GMM)
 - Graphical models
 - **Dimensionality reduction**
 - Principal component analysis (PCA)
 - Factor analysis

Supervised Learning: Linear Classifier

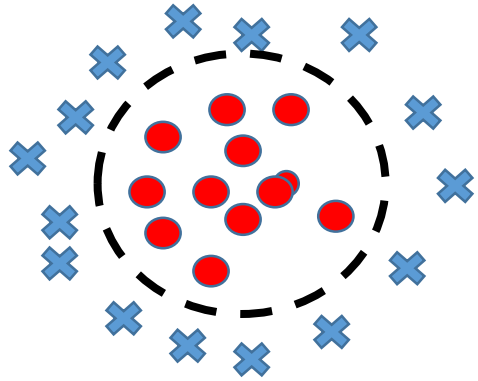


$$g(x_n) = \text{sign}(w^T x_n)$$

, where w is an d -dim vector (learned)

- Find a *linear function* to separate the classes
- Techniques:
 - Perceptron
 - Logistic regression
 - Support vector machine (SVM)
 - Ada-line
 - Multi-layer perceptron (MLP)

Supervised Learning: Non-Linear Classification



$$x_n = [x_{n1}, x_{n2}]$$



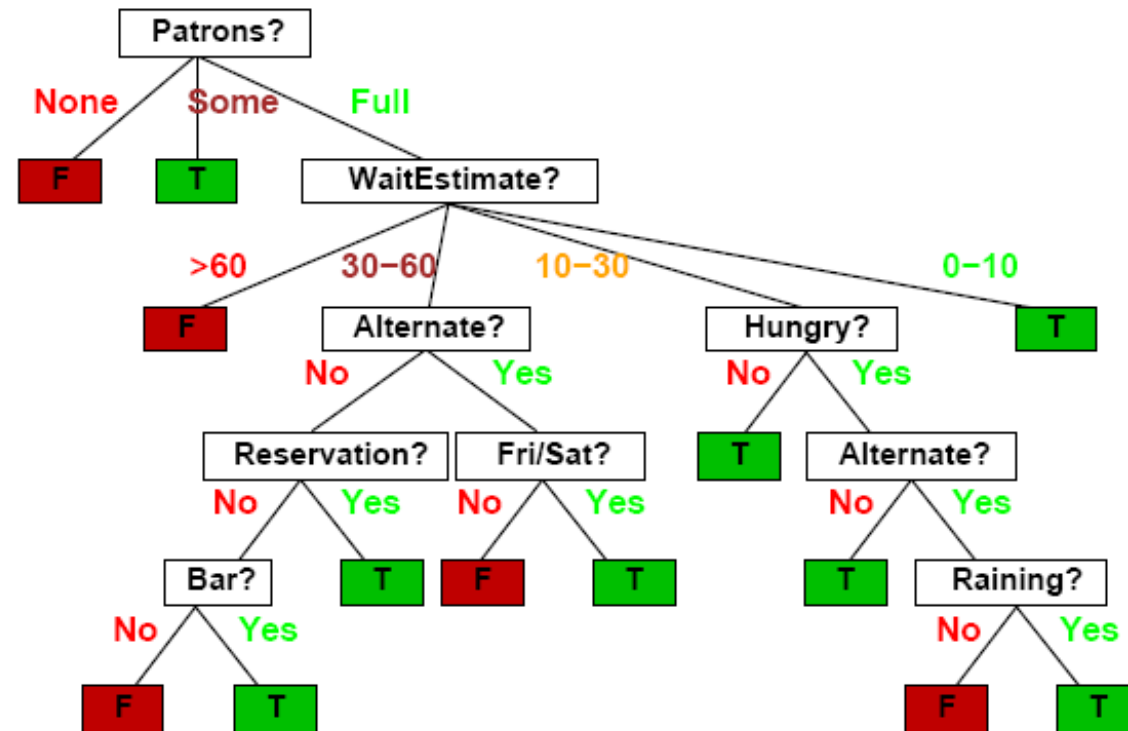
$$x_n = [x_{n1}, x_{n2}, x_{n1} * x_{n2}, x_{n1}^2, x_{n2}^2]$$

$$g(x_n) = \text{sign}(w^T x_n)$$

- Techniques:
 - Support vector machine (SVM)
 - Neural Networks
 - ...

Supervised Learning: Decision Trees

Should I wait at this restaurant?



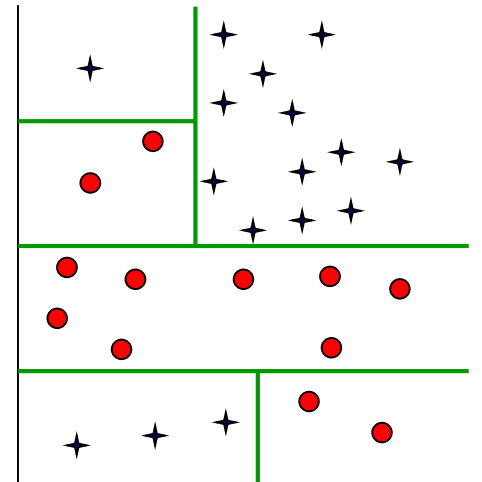
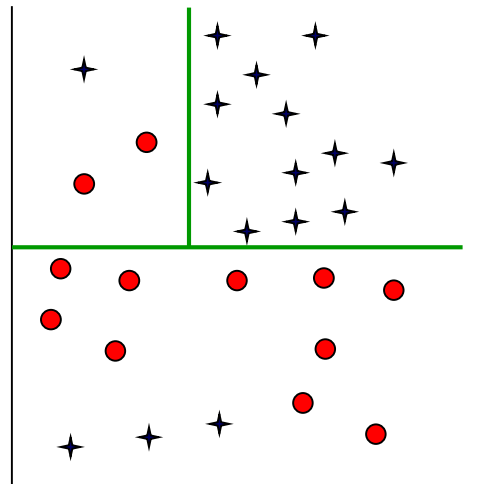
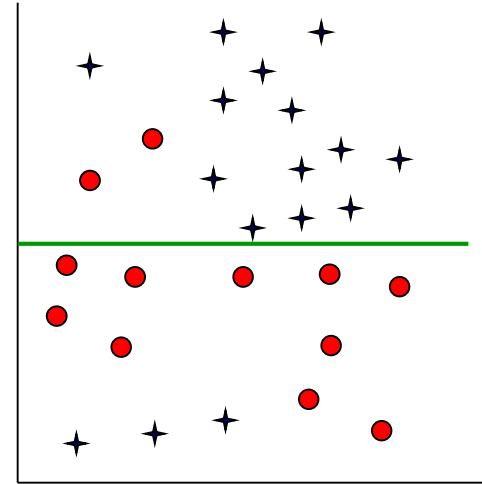
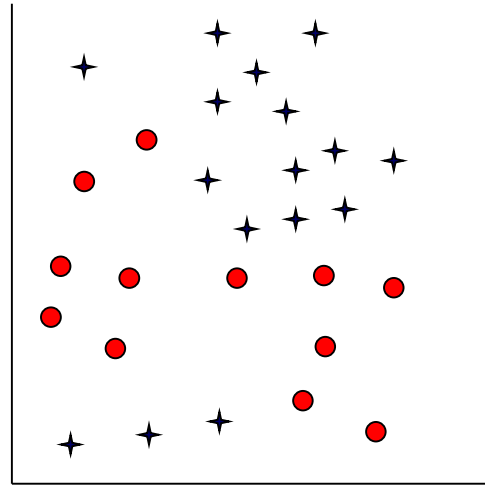
Decision Tree Induction

(Recursively) partition examples according to the *most important* attribute.

Key Concepts

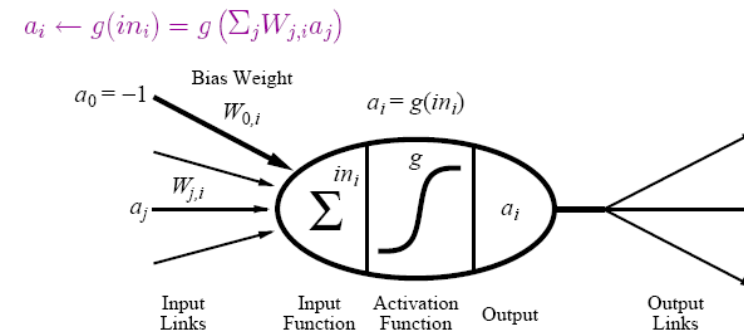
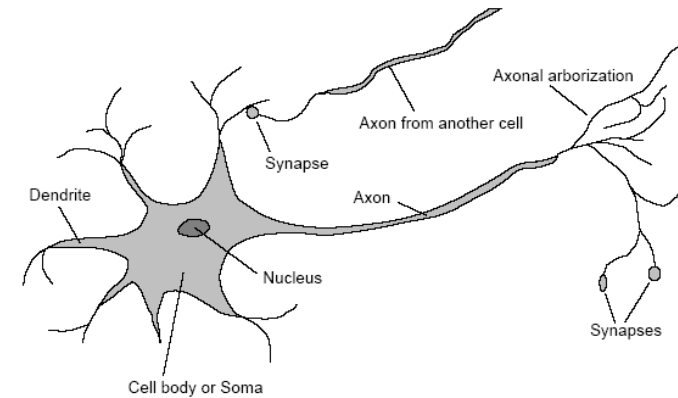
- *entropy*
 - impurity of a set of examples (entropy = 0 if perfectly homogeneous)
 - (#bits needed to encode class of an arbitrary example)
- *information gain*
 - expected reduction in entropy caused by partitioning

Decision Tree Induction: Decision Boundary

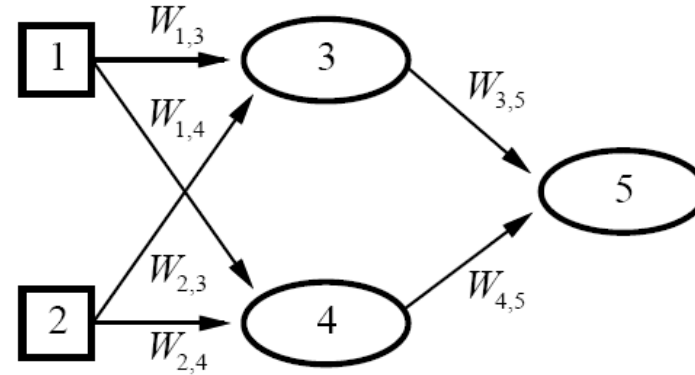


Supervised Learning: Neural Networks

- Motivation: human brain
 - massively parallel (10^{11} neurons, ~ 20 types)
 - small computational units with simple low-bandwidth communication (10^{14} synapses, 1-10ms cycle time)
- Realization: neural network
 - *units* (\approx neurons) connected by *directed weighted links*
 - *activation function* from inputs to output



Neural Networks (*continued*)



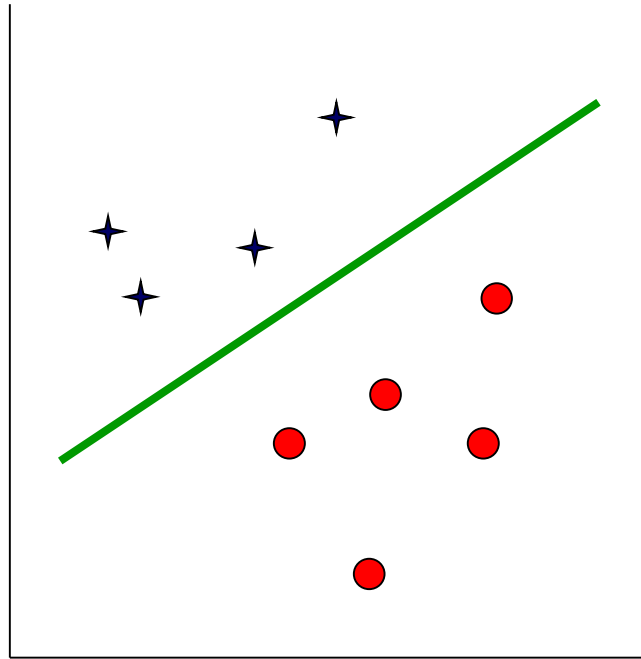
$$\begin{aligned} a_5 &= g(W_{3,5} \cdot a_3 + W_{4,5} \cdot a_4) \\ &= g(W_{3,5} \cdot g(W_{1,3} \cdot a_1 + W_{2,3} \cdot a_2) + W_{4,5} \cdot g(W_{1,4} \cdot a_1 + W_{2,4} \cdot a_2)) \end{aligned}$$

- *Neural Network = parameterized family of nonlinear functions types*

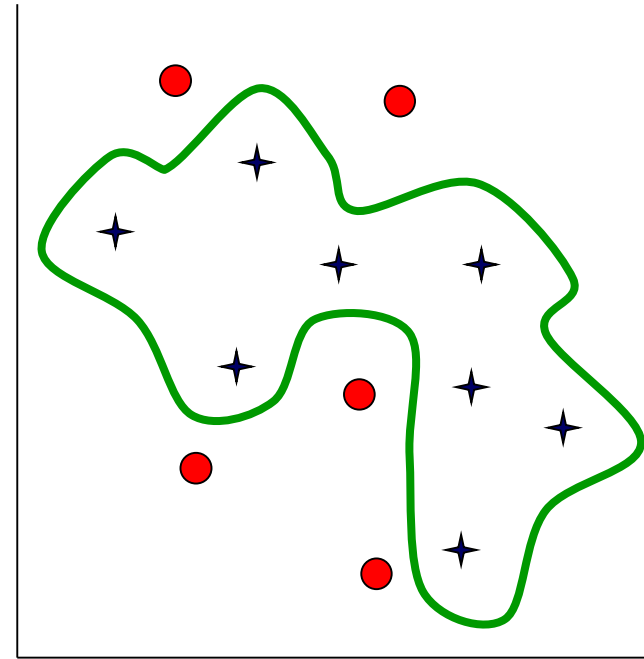
Neural Network Learning

- *Key Idea*: Adjusting the weights changes the function represented by the neural network (*learning = optimization in weight space*).
- Iteratively *adjust weights* to reduce *error* (difference between network output and target output).
- Weight Update
 - *perceptron training rule*
 - *linear programming*
 - *delta rule*
 - *backpropagation*

Neural Network Learning: Decision Boundary



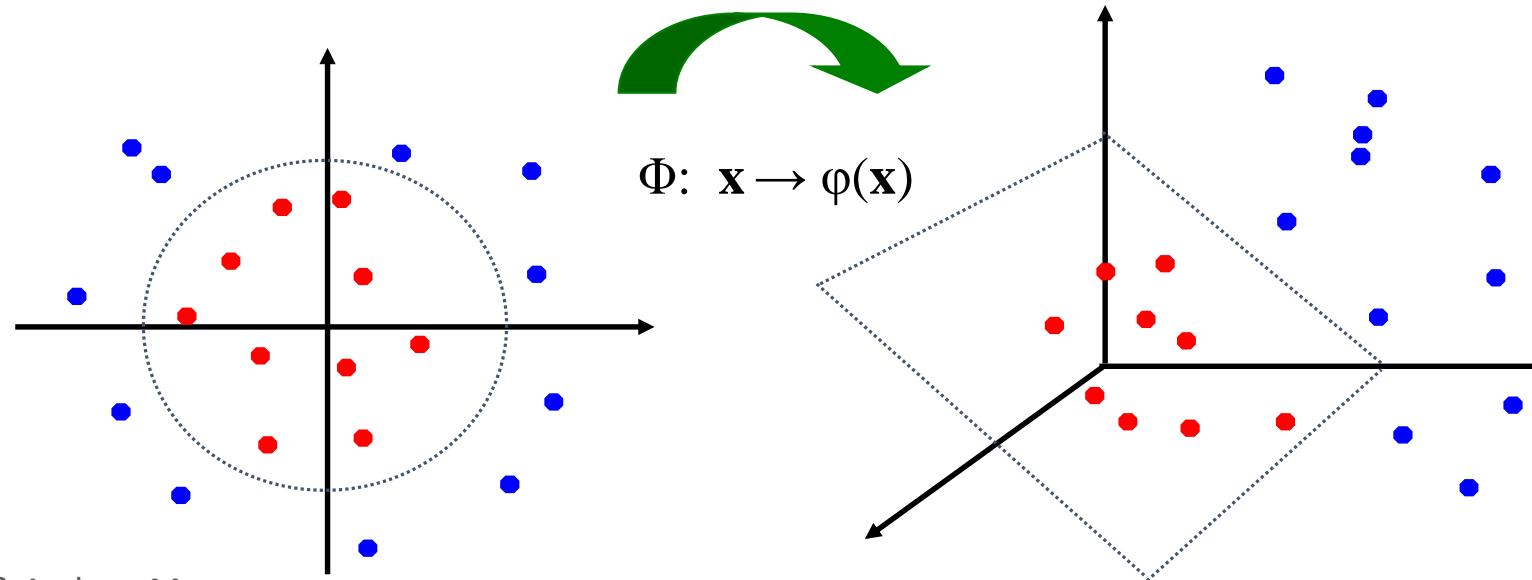
single-layer perceptron



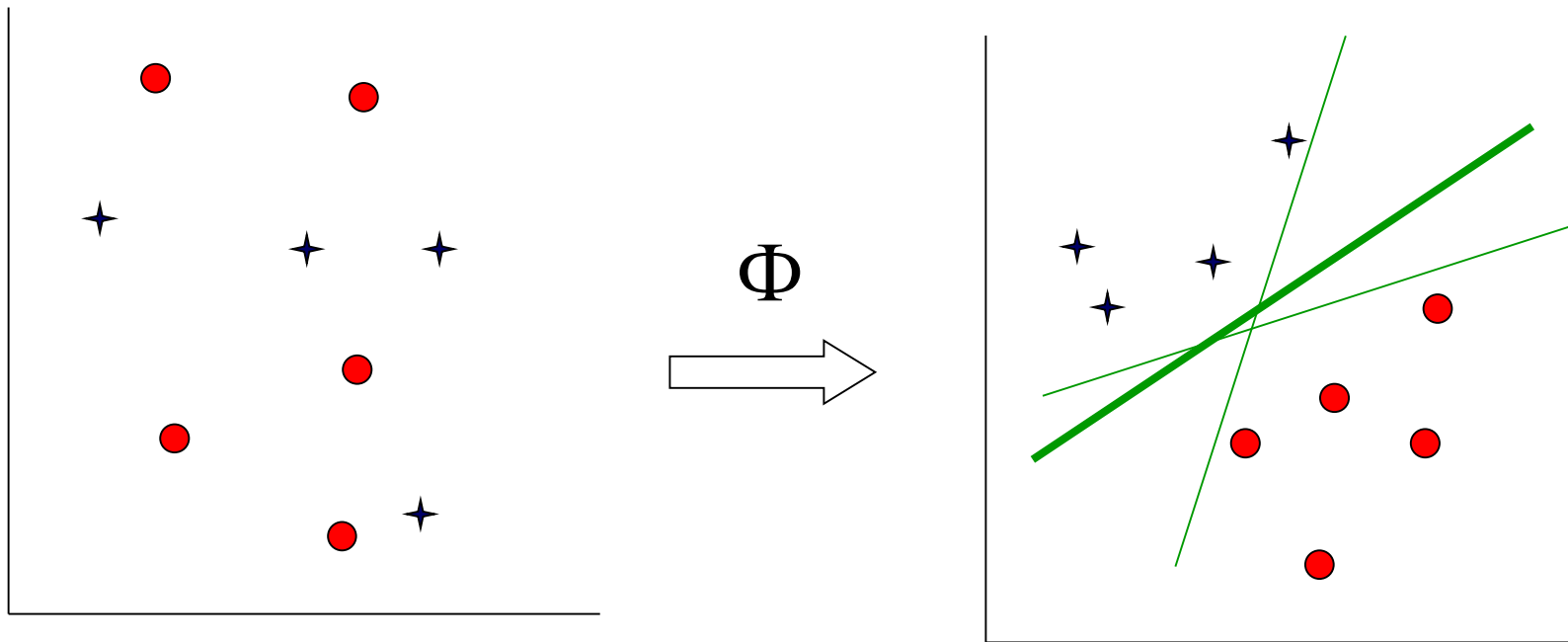
multi-layer network

Supervised Learning: Support Vector Machines

- *Kernel Trick*: Map data to *higher-dimensional space* where they will be *linearly separable*.
- Learning a Classifier : optimal linear separator is one that has the *largest margin* between positive examples on one side and negative examples on the other



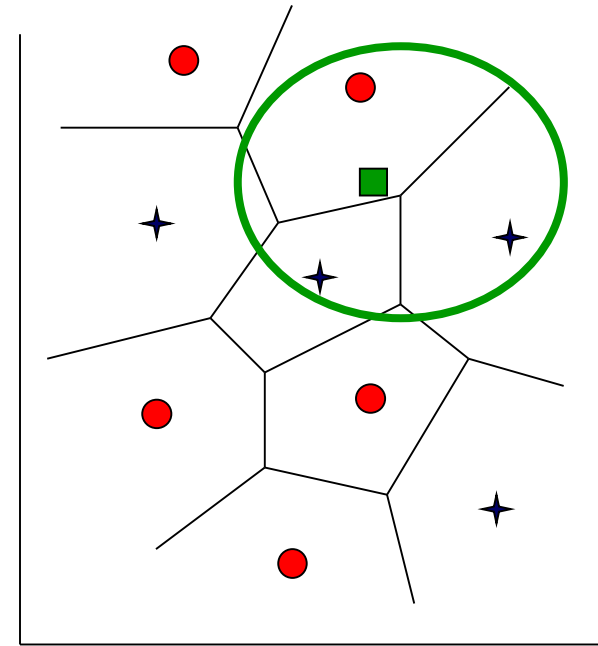
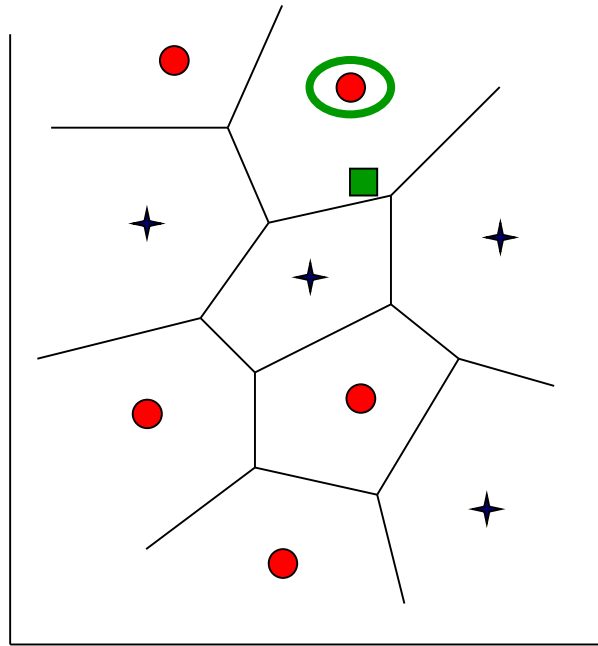
Support Vector Machines: Decision Boundary



Supervised Learning: Nearest Neighbor Models

- *Key Idea*: Properties of an input x are likely to be *similar* to those of points in the *neighborhood* of x .
- *Basic Idea*: Find (k) nearest neighbor(s) of x and infer target attribute value(s) of x based on corresponding attribute value(s).

Nearest Neighbor Model: Decision Boundary



Evaluating classification methods

- Predictive accuracy

$$\textit{Accuracy} = \frac{\text{Number of correct classifications}}{\text{Total number of test cases}},$$

- Efficiency
 - time to construct the model
 - time to use the model
- Robustness: handling noise and missing values
- Scalability: efficiency in disk-resident databases
- Interpretability:
 - understandable and insight provided by the model
- Compactness of the model

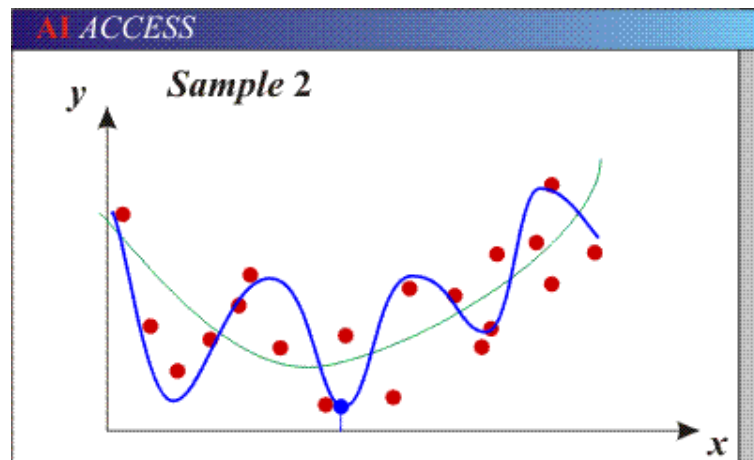
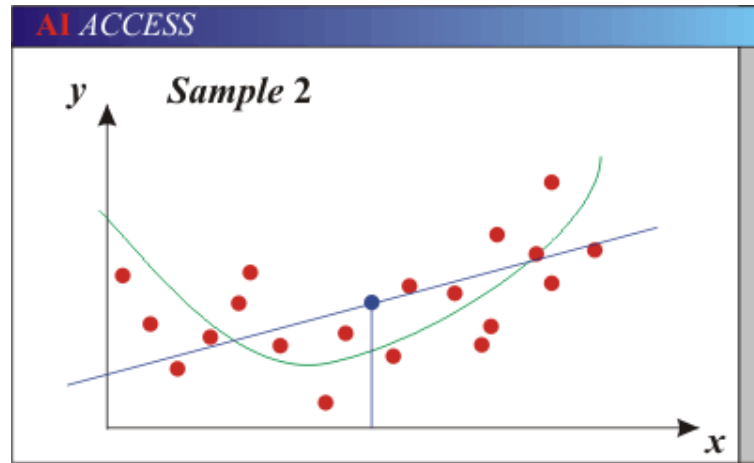
Performance Evaluation

- Randomly split examples into *training set* U and *test set* V .
- Use training set to learn a hypothesis H .
- Measure % of V correctly classified by H .
- Repeat for different random splits and average results.

Generalization

- Components of generalization error
 - **Bias:** how much the average model over all training sets differ from the true model?
 - Error due to inaccurate assumptions/simplifications made by the model
 - **Variance:** how much models estimated from different training sets differ from each other
- **Underfitting:** model is too “simple” to represent all the relevant class characteristics
 - High bias and low variance
 - High training error and high test error
- **Overfitting:** model is too “complex” and fits irrelevant characteristics (noise) in the data
 - Low bias and high variance
 - Low training error and high test error

Bias-Variance Trade-off



- Models with too few parameters are inaccurate because of a large bias (not enough flexibility).
- Models with too many parameters are inaccurate because of a large variance (too much sensitivity to the sample).

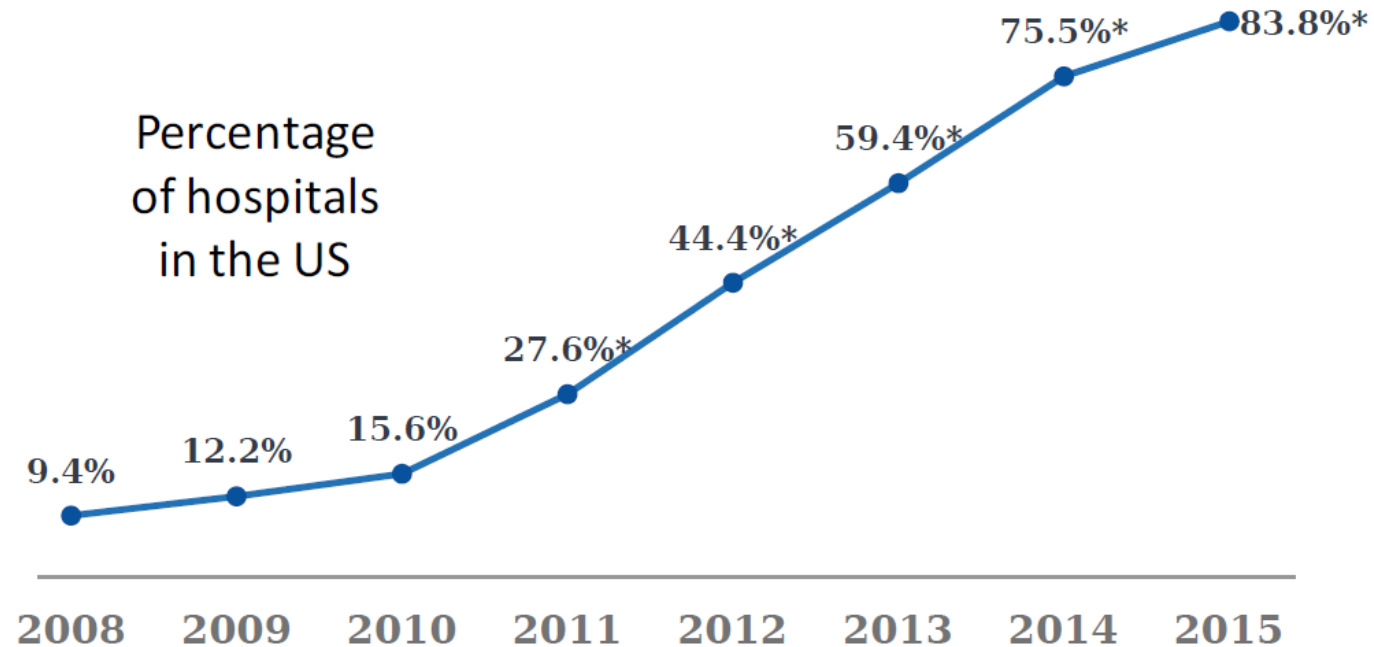
Machine Learning for Healthcare

Applying Machine Learning to Healthcare

- Healthcare sector is being transformed by the ability to record massive amounts of information
- Machine learning provides a way to automatically find patterns and reason about data
- It enables healthcare professionals to move to personalized care known as precision medicine.

Why to use ML?

- Adoption of Electronic Health Records (EHR) has increased 9x since 2008



Why to use ML?

- Large datasets
 - MIT Laboratory for Computational Physiology de-identified health data from ~40K critical care patients
 - Demographics, vital signs, laboratory tests, medications, notes, ...
 - Available data on nearly 230 million unique patients since 1995

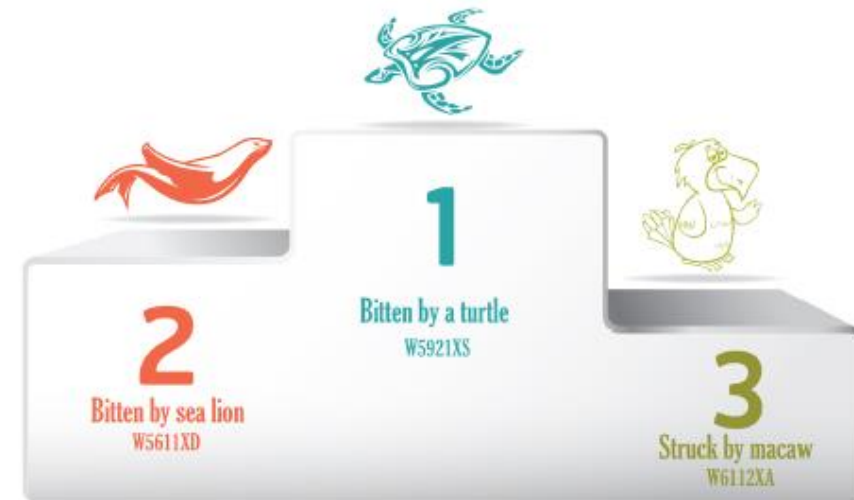
Why to use ML?

- Diversity of digital health data



Why to use ML?

- Standardization
 - Diagnosis codes: ICD-9 and ICD-10 (International Classification of Diseases)
 - Laboratory tests: LOINC codes
 - Pharmacy: National Drug Codes (NDCs)
 - Unified Medical Language System (UMLS): millions of medical concepts



Industry interest in AI & healthcare

The image is a collage of four screenshots from AI healthcare websites:

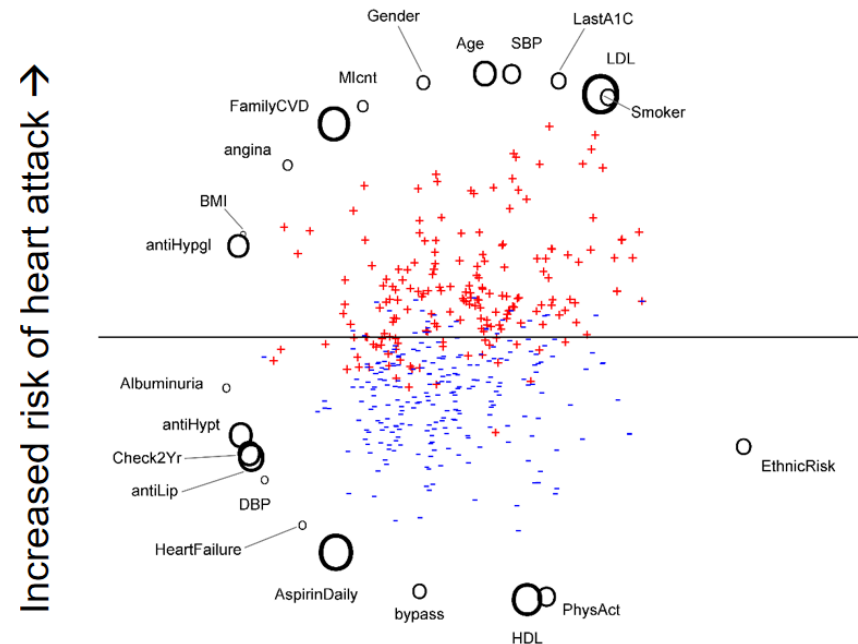
- Google DeepMind Health:** The top-left screenshot shows the Google DeepMind website with a dark blue background. It features the Google DeepMind logo, a heart icon, and the text "DeepMind Health" and "CLINICIAN-LED TECHNOLOGY".
- Enlitic:** The top-right screenshot shows the Enlitic website with a light blue background. It features the Enlitic logo and the text "Deep learning technology can save lives by helping detect curable diseases early".
- IBM Watson for Oncology:** The bottom-left screenshot shows the IBM Watson for Oncology website with a dark background. It features the text "IBM Watson for Oncology" and "Get oncologists the assistance they need to make more informed treatment decisions. Watson for Oncology analyzes a patient's medical information against a vast array of data and expertise to provide evidence-based treatment options."
- Lumiata:** The bottom-right screenshot shows the Lumiata website with a dark background. It features the Lumiata logo and the text "Enabling healthcare to be predictive-first where health + care is proactive, hyper-personalized, and real-time".

What can machine learning do for the healthcare industry?

- Improve accuracy of diagnosis, prognosis, and risk prediction.
- Reduce medication errors.
- Model and predict patient health outcomes.
- Optimize hospital workflow and patient flow.
- Identify patients at risk of hospital readmission.
- Discover new drug targets and potential drug combinations.
- Automate detection of relevant findings in pathology, radiology, etc.

Improve quality of care and population health outcomes, while reducing healthcare costs.

Example Application: Improve accuracy of diagnosis and risk prediction



- New methods are developed for chronic disease **risk prediction** and **visualization**.
- These methods give clinicians a comprehensive view of their patient population, risk levels, and risk factors, along with the estimated effects of potential interventions.

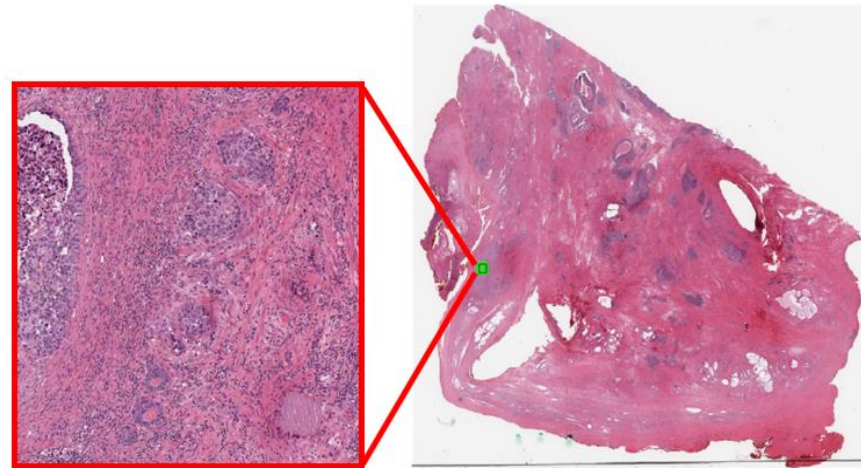
Example Application: Optimize hospital processes



- By early and accurate prediction of each patient's **Diagnosis Related Group (DRG)**, demand for scarce hospital resources such as beds and operating rooms can be better predicted.

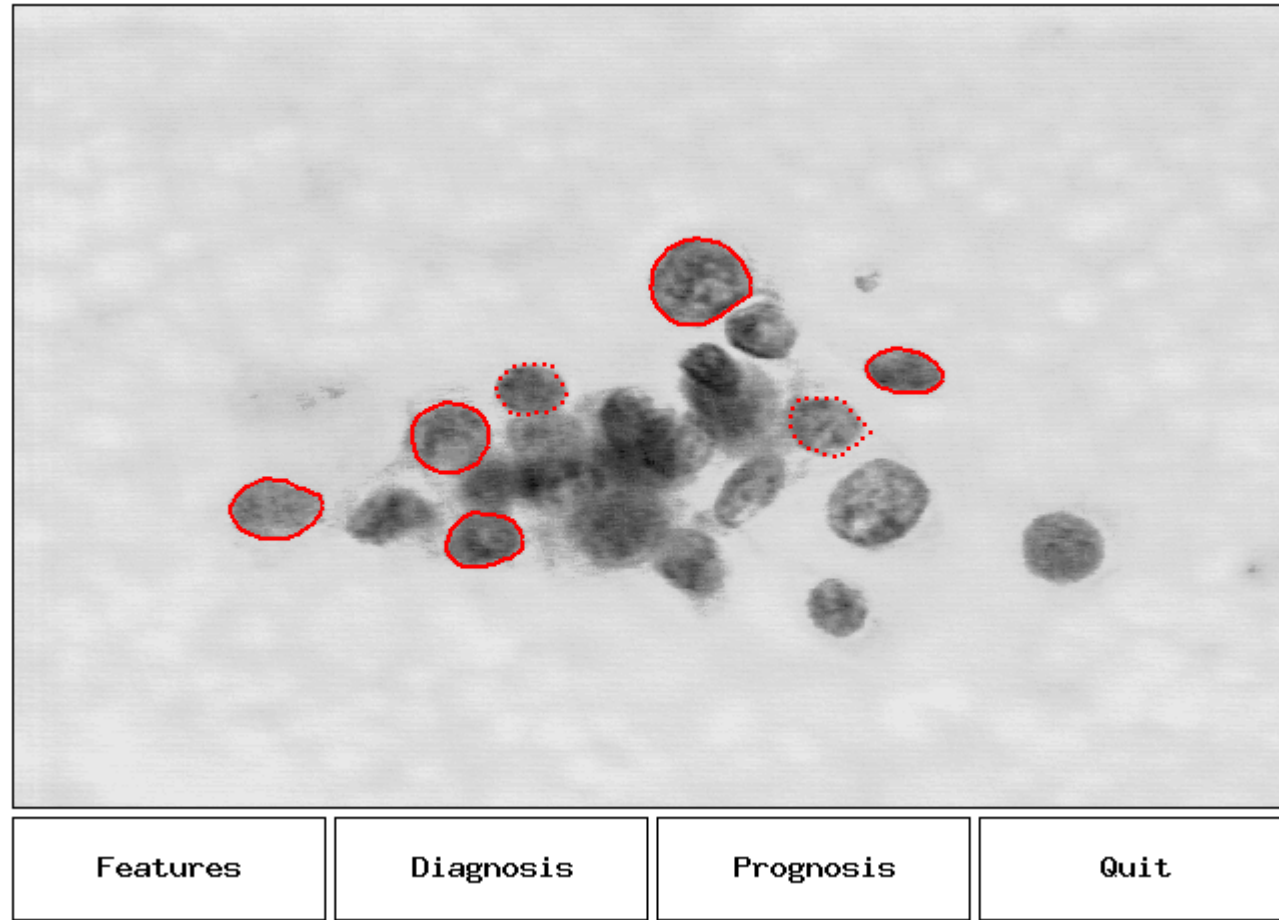
Example Application: Automate detection of relevant findings

- Pattern detection approaches have been successfully applied to detect regions of interest in digital pathology slides, and work surprisingly well to detect cancers.



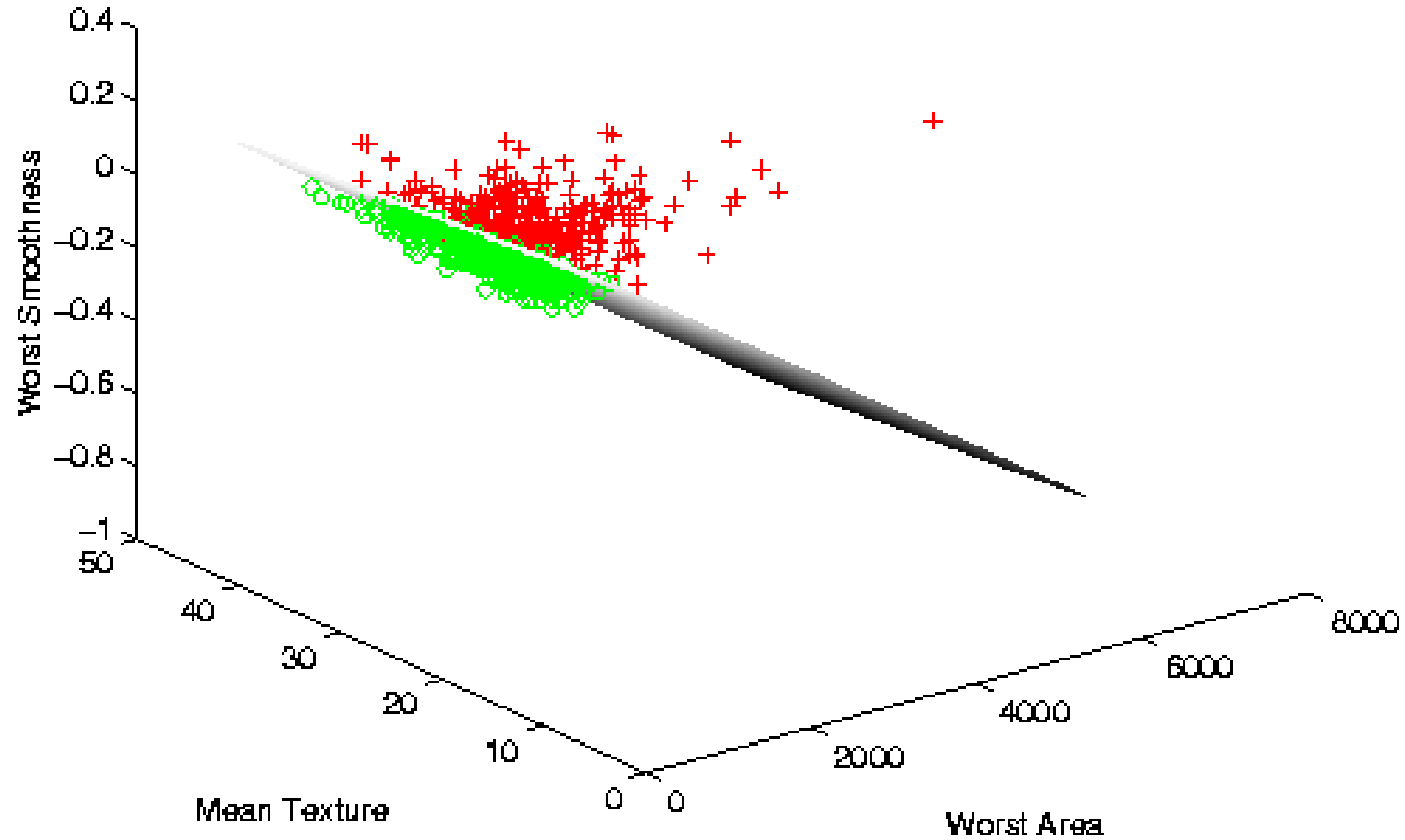
- Automatic detection of anomalies and patterns is especially valuable when the key to diagnosis is a tiny piece of the patient's health data.

Example Application: Breast Cancer Diagnosis



Research by Mangasarian, Street, Wolberg

Breast Cancer Diagnosis Separation



Research by Mangasarian, Street, Wolberg

Example Application: ICU Admission

- An emergency room in a hospital measures 17 variables (e.g., blood pressure, age, etc) of newly admitted patients.
- A decision is needed: whether to put a new patient in an intensive-care unit.
- Due to the high cost of ICU, those patients who may survive less than a month are given higher priority.
- Problem: to predict high-risk patients and discriminate them from low-risk patients.

What is unique about ML in healthcare?

- Life or death decisions
 - Need robust algorithms
 - Checks and balances built into ML deployment
 - (Also arises in other applications of AI such as autonomous driving)
 - Need fair and accountable algorithms
- Many questions are about unsupervised learning
 - Discovering disease subtypes, or answering question such as “characterize the types of people that are highly likely to be readmitted to the hospital”?
- Many of the questions we want to answer are causal
 - Naïve use of supervised machine learning is insufficient

What makes healthcare different?

- Often very little labeled data (e.g., for clinical NLP)
 - Motivates semi-supervised learning algorithms
- Sometimes small numbers of samples (e.g., a rare disease)
 - Learn as much as possible from other data (e.g. healthy patients)
 - Model the problem carefully
- Lots of missing data, varying time intervals, censored labels

What makes healthcare different?

- Difficulty of de-identifying data
 - Need for data sharing agreements and sensitivity
- Difficulty of deploying ML
 - Commercial electronic health record software is difficult to modify
 - Data is often in silos; everyone recognizes need for interoperability, but slow progress
 - Careful testing and iteration is needed