TOWARDS TRUSTWORTHY DATA First International Workshop on Knowledge Science March 31, 2022 Eindhoven Artificial Intelligence Systems Institute

Knowledge Science for Al-based biomedical and clinical applications

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Why biomedical AI needs Knowledge Science

- 1. Large amounts of data in non-standard formats which need to be converted, interpreted, and merged into readable formats.
- 2. Heterogeneous and complex data which current ML/AI approaches are processing without context
- 3. Lack of explainability hinders trust



Knowledge Science is key to tackle ALL challenges







Trust in Al

- the user successfully comprehends how the model arrives at an outcome
- the model's outcomes/workings match the user's prior knowledge

Jacovi, Alon, et al. "Formalizing trust in artificial intelligence: Prerequisites, causes and goals of human trust in Al." *Proceedings of the 2021 ACM conference on fairness, accountability, and transparency*. 2021.





Trust in Al

 the user successfully comprehends how the model arrives at an outcome
 represent a model's processes







What happens when data is complex, multi-domain, heterogeneous, incomplete, ambiguous?





Trust in AI for biomedical and clinical applications

 the user successfully comprehends how the model arrives at an outcome
 represent a model's processes







Trust in AI for biomedical and clinical applications

- the user successfully comprehends how the model arrives at an outcome
 represent a model's inputs, outputs and processes

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Trust in AI for biomedical and clinical applications

- the user successfully comprehends how the model arrives at an outcome
 represent a model's inputs, outputs and processes
- the model's outcomes/workings match the user's prior knowledge
 represent the scientific context







Knowledge Science can help mitigate bias in biomedical Al





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Knowledge Science for Trust in Biomedical Al

Assessing trustworthiness requires data, domain and user context

Data context: represent data provenance and transformations/processing

Domain/background knowledge: represent the scientific context of the data and application

User context: different users will trust based on different expectations





Data Context

Augment explanations with the data creation and processing context

- Provide a rich contextual semantic layer to the underlying data using domain ontologies and knowledge graphs.
- Preserve uncertainty and highlight potential ambiguity and incompleteness at the data level







Data Context is key for trust

25% of the works that developed ML approaches to diagnose COVID-19 in adults based on chest X-rays and CT

scans used pediatric (ages 1-5) pneumonia images as control.



COVID-19

<u>10.1016/j.cell.2018.02.0</u> 10



10.1016/j.rxeng.2020.11.0

Roberts, Michael, et al. "Common pitfalls and recommendations for using machine learning to detect and prognosticate for COVID-19 using chest radiographs and CT scans." *Nature Machine Intelligence* 3.3 (2021): 199-217.







Domain Knowledge Context

Contextualize an explanation within existing knowledge

- Include prior knowledge through links to ontologies
- Enrich the contextual semantic layer with links and relations across domains of knowledge







Domain Knowledge Context is key for trust

Term 1	Term 2	Similarity
Gingiva	Gum	0.98

14







Domain Knowledge Context is key for trust







User Context

Trusting an AI outcome depends on the user context: task, prior knowledge, expectation, etc.



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Ontologies, Knowledge Graphs and FAIR data principles can support data, domain and user context.





NextGen Biomedical AI requires integration of complex and diverse data









NextGen Biomedical AI requires integration of complex and diverse data

• 100s of very large files per patient covering genome sequence, mutations, transcriptome, clinical, etc.

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<nte:additional_radiation_therapy preferred_name="new_tumor_event_radiation_tx" display_order="72" cde="34276: ENSG <nte:additional_pharmaceutical_therapy preferred_name="new_tumor_event_pharmaceutical_tx" display_order="73" (ENSG ENSG

>DNA Change Type Consequences </kir Chr12:g.57104752A>G Substitution <rad:chr17:g.58415526T>C Substitution <kir chr7:g.71245386T>C Substitution chr17:g.7674894G>A Substitution chr19:g.774894G>A Substitution chr19:g.79121821A>G Substitution chr12:g.58880858C>T Substitution chr12:g.74023108C>T Substitution chr15:g.74023108C>T Substitution

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Affected Cases in Cohort # Affected Cases Across Missense STAT6 C355R 1 / 1,100.00% 1 / 12 968 Missense RNF43 M18V 1 / 1,100.00% 1 / 12 968 Missense GRM3 I683T 1 / 1,100.00% 1 / 12 968 Missense ZMYM3 N989S 1 / 1,100.00% 1 / 12 968 Stop Gained TP53 R213* 1 / 1,100.00% 89 / 12 968 Missense ABL2 V245A 1 / 1,100.00% 1 / 12 968 VEP Insertion Frameshift CDH10 E641Rfs*18 1 / 1,100.00% Synonymous LRIG3 0508= 1 / 1,100.00% 1 / 12 968 Missense PML R295C 1 / 1,100.00% 1 / 12 968 VEP Missense BCORL1 N1499S 1 / 1,100.00% 1 / 12 968

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iguous	8610971	1995382 1992134							
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0000000005.6	TNMD	protein_coding		1 0.0	328 0.01	103 0.01	12		
0000000419.13	DPM1	protein_coding	2270	1092	1178	91.1118	28.5882	31.2170	
0000000457.14	SCYL3	protein_coding	620 607	584 4.3	638 1.36	592 1.4 <u>9</u>	952		
0000000460.17	Clorf11	2 protein_codi	ing 389	464 513	3.1567	0.9905	1.0816		
0000000938.13	FGR prot	tein_coding 161	78 83	2.3063	0.7236	0.7902			
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0000001460.18	STPG1	protein_coding	732 367	393 4.10	666 1.30	074 1.42	276		
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0000001497.18	LAS1L	protein_coding	4918	2501	2422	18.9770	5.9544	6.5020	
0000001561.7	ENPP4	protein_coding	3211	1598	1615	33.4968	10.5103	11.4768	
0000001617.12	SEMA3F	protein_coding	2358	1179	1182	23.6708	7.4272	8.1102	
0000001626.16	CFTR	protein_coding	38 24	22 0.1	852 0.05	581 0.06	534		
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0000002549.12	LAP3	protein_coding	3298	1630	1668	42.2125	13.2450	14.4630	
0000002586.20	CD99	protein_coding	3905	1850	2055	38.9421	12.2189	13.3425	
0000002586.20	PAR_Y	CD99 protein	coding		0 0.00	000 0.00	00 0.00	000	
0000002587.10	HS3ST1	protein_coding	1988	1013	980 12.9	9536 4.06	645 4.43	382	
0000002726.21	AOC1	protein_coding	193 93	100 2.4	696 0.77	749 0.84	162		
0000002745.13	WNT16	protein_coding		8 0.1	930 0.00	605 0.00	61		
0000002746.15	HECW1	protein_coding	264 163	151 0.9	178 0.28	880 0.31	45		
0000002822 15	MAD111	protein coding	29 20	10 0 10	9/13 0 06	510 0 OF	566		

C Ciências



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What happens when data is complex, multi-domain, heterogeneous, incomplete, ambiguous?





One ontology is not enough

Systems Biology, Systems Medicine and Personalized Medicine require holistic representations

Level	Ontology	Scope
Molecular	ChEBI	Small biomolecules
	ATC	Active ingredients of drugs
	GO	Protein function
Cellular	CL	Cell types
	CLO	Cell lines
Anatomy	UBERON	General anatomy
	FMA	Human anatomy
Phenotype and Disease	HPO	Human phenotypes
	DO	Human diseases
	ICD	Human diseases
Clinical	UMLS	Biomedical and clinical aspects
	SNOMED-CT	Clinical aspects
	LOINC	Laboratory findings
Environmental	ENVO	Environmental factors
Large-scope	KEGG	Biological systems
Research	SBO	Systems biology
	OBI	Biomedical investigation

JD Ferreira, DC Teixeira, C Pesquita. Biomedical Ontologies: Coverage, Access and Use. 2020 Systems Medicine Integrative, Qualitative and Computational Approaches, Academic Press, Elsevier







What do we need to create holistic representations?

Cover multiple domains

Align multiple ontologies

Scalability

Ensure rich semantic integration

Related but not equal domains

Complex relations involving more than one ontology

Provide high quality alignments

Support human interaction

Visualizing the context of a mapping

Balancing cognitive overload and informativeness

MC Silva, D Faria, and C Pesquita. Integrating knowledge graphs for explainable artificial intelligence in biomedicine. Ontology Matching workshop 2021







Rethinking biomedical ontology alignment



MC Silva, D Faria, and C Pesquita. Integrating knowledge graphs for explainable artificial intelligence in biomedicine. Ontology Matching workshop 2021







Holistic Matching with clustering and incremental matching

Can we ensure the scalability of matching tasks with many ontologies?



Silva, M.C., Faria, D. & Pesquita, C. (2022). Matching Multiple Ontologies to Build a Knowledge Graph for Personalized Medicine. ESWC2022 (accepted)





Holistic Matching (CIA) runs in half the time, ensures high recall within similar domains and high precision across domains

1.0

-0.6



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S	trateg	ЗУ	Total Mappings						
	GPA		554547						
CPA-	+anch	oring	442649						
CIA	-anch	oring		417131					
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GPA: global pairwise alignment. CPA: within-cluster pairwise alignment. CIA: within cluster incremental alignment.

Silva, M.C., Faria, D. & Pesquita, C. (2022). Matching Multiple Ontologies to Build a Knowledge Graph for Personalized Medicine. ESWC2022 (accepted)

LASIG excellence



Compound Matching for ontology triples

Can we find mappings involving multiple ontologies using lexical approaches and search space pruning?



Oliveira, D., & Pesquita, C. (2018). Improving the interoperability of biomedical ontologies with compound alignments. J. Biomedical Semantics.





Supporting contextualized ontology alignment validation









Trustworthy biomedical Al requires trustworthy data.





Explainable AI for Personalized Oncology



katy-project.eu







Is this Data Trustworthy?

<shared:tobacco_smoking_history preferred_name="tobacco_smoking_history_indicator" display_order="47" cde="2181650" cde_ver="1.000" xsd_v <clin_shared:year_of_tobacco_smoking_onset preferred_name="tobacco_smoking_year_started" display_order="48" cde="2228604" cde_ver="1.000" <clin_shared:stopped_smoking_year preferred_name="tobacco_smoking_year_stopped" display_order="49" cde="2228610" cde_ver="1.000" xsd_ver= <clin_shared:number_packyears_smoked preferred_name="tobacco_smoking_packyears_smoked" display_order="50" cde="2955385" cde_ver="1.000" <clin_shared:number_packyears_smoked preferred_name="tobacco_smoking_packyears_smoked" display_order="50" cde="2955385" cde_ver="1.000" xsd_ver=" <clin_shared:postoperative_rx_tx_preferred_name="tobacco_smoking_packyears_smoked" display_order="50" cde="2955385" cde_ver="1.000" xsd_ver=" <clin_shared:radiation_therapy_preferred_name="reatment_adjuvant" display_order="55" cde="3397567" cde_ver="1.000" xsd_ver=" <clin_shared:primary_therapy_outcome_success preferred_name="treatment_outcome_first_course" display_order="56" cde="2706737" cde_var="3706737" cde_var=" <kirc_nte:new_tumor_events>

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excellence

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000000003.15	TSPAN6	protein_co	ding	7548	В	3826		3722	2	80.6	148	25.29	945	27.620		
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000001629.10	ANKIB1	protein_co	ding	562	7	281	2	2821		36.8	933	11.57	60	12.640		
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000002549.12	LAP3	protein_co	ding	3298	в	163	3	1668	3	42.2	125	13.24	150	14.4630	0	
000002586.20	CD99	protein_co	ding	390		1856	3	2055		38.9	421	12.21	89	13.342		
000002586.20	PAR_Y	CD99 pr	otein	cod	ing				0.00	00	0.00	00 0	0.00	00		
000002587.10	HS3ST1	protein co	ding	1988	В	101	3	980	12.9	536	4.06	45 4	1.43	82		
000002726.21	AOC1	protein co	ding	193		100	2.4	596	0.77	49	0.84	62				
000002745.13	WNT16	protein_co	ding				0.1	930	0.06	05	0.06	61				
000002746.15	HECW1	protein_co	ding	264	163	151	0.9	178	0.28	80	0.31	45				
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Building a KG for Explainable AI for Personalized Oncology















LASIGE









Ciências

ULisboa





The great barrier to AI adoption in healthcare and biomedical research is lack of trust.

Knowledge Science is the answer.



Acknowledgements

Daniel Faria, LASIGE/Biodata.pt, Portugal

Isabel Cruz, U. Illinois, USA

Ernesto Jimenez-Ruiz, City, U. of London, UK

Daniela Oliveira, Novartis

Patrick Lambrix, U. Linkoping, Sweden

Valentina Ivanova, RISE, Sweden

Booma S. Balasubramani, Microsoft

and many others

https://liseda-lab.github.io/ https://github.com/liseda-lab/ https://github.com/AgreementMakerLight @CPesquita clpesquita@fc.ul.pt Past and present students: Rita Sousa Marta Silva Susana Nunes Ana Guerreiro Patrícia Eugénio Filipa Serrano Beatriz Lima Carlota Cardoso and many others



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This work was supported by FCT through the LASIGEResearch Unit (UIDB/00408/2020 and UIDP/00408/2020). It was also partially supported by the KATY project which has received funding from the European Union's Horizon 2020 research and innovation programme under grant agreement No 101017453.



