

Artificial Intelligence Solutions for Healthcare Decision Making



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Summary

- hSITE's Original Agenda: our progress towards those aims
- overview of research conducted with my graduate students
- next steps

hSITE Agenda

- Theme 1: Information Flow
 - Bolstered by Theme 2 (Sensing) and Theme 3 (Networking)
- Three Contexts: Home Healthcare, Emergency and Critical; Decision Support
- hsite Mantra: Right Information, Right Person, Right Time
- Artificial Intelligence Algorithms

Context I -- Home Healthcare

- John Champaign PhD (May 2012)
- social networks of users: appropriate selection of content (web documents, videos, simulations, etc.)
- peer-based intelligent tutoring approach (similarity, benefit) using past interactions, simulated learning, user study (autism care)

Context II -- Emergency and Critical Care

- Hadi Hosseini and John Doucette
- multiagent resource allocation: doctors, equipment to patients
 - concern about both costs, pre-emption; scheduling, multiple resources
- user modeling, transfer of control strategies; Markov Decision processes and auctions

Context III -- Decision Making Support

- Atif Khan and John Doucette
- question answering re treatment administration in real-time with multiple knowledge repositories
- combination of ontologies and machine learning (missing data)

Home healthcare: a peer-based tutoring approach - John Champaign (PhD)

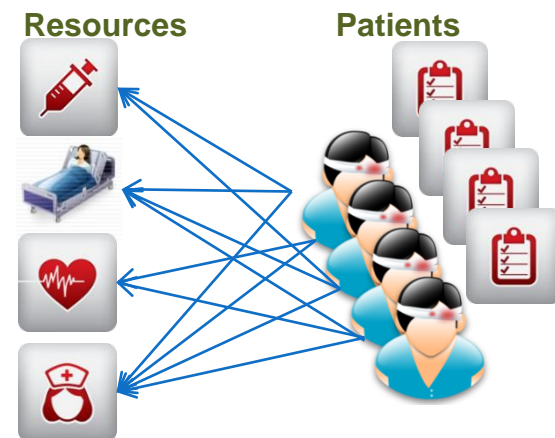
- Allowing patients or caregivers to learn how to manage health
 - through learning objects (texts, videos) in repositories of knowledge
 - using experiences of and advice from peers
 - a style of peer-based intelligent tutoring
- Human study: personalized information for parents as primary caregivers for children on the autism spectrum (objects chosen by our algorithms led to greater learning gains)
- Find appropriate peers and learning objects
- Approach: similarity of peers, past benefits to peers, allow peer contributions to the repository
- Provides for patient-led care by streamlining vast stores of documents

Models and Solutions

- Curriculum Sequencing
 - Ordering of learning objects based on experiences of similar peers
 - Validated by simulation and preliminary human study
- Annotations
 - Intelligently showing messages left by previous students
 - modeling reputation of annotation and annotator
 - validated by simulations: even when poor annotators are present and qualitative human study
- Corpus Divisions
 - peers can propose new, divided learning objects
 - validated: those preferring shorter objects, even if poor dividing skill and qualitative human study

Dynamic Multiagent Patient Scheduling – Hadi Hosseini (PhD)

- Issues in patient scheduling, medical resource allocation
 - Dynamic patient arrivals
 - Uncertainty in medical tasks (treatment, diagnosis, test, etc.)
 - Stochastic resource demands
 - Health model, different progression/diseases
 - Health state of patients as a measure of success
 - Temporal dependencies: Sequence in medical tasks (resources)
- Our approach
 - Market-inspired allocation mechanism for coordinating decentralized Markov decision processes (MDPs)
 - MDPs for planning efficiently under uncertainty considering future expected outcomes



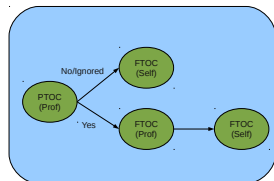
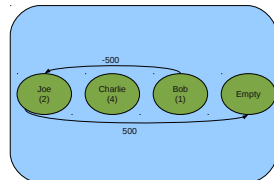
Dynamic Multiagent Patient Scheduling – Hadi Hosseini (PhD)

- Stochastic Resource Planning Through Auctioned MDPs
 - Efficiency is defined in terms of maximizing social welfare (utility of agents)
 - Utility is based on health state of patients
 - Patients are represented as independent MDPs
 - Market-inspired mechanism to reach approximate global optima: through auction-based coordination to minimize **regret**
 - Scalable to large number of resources/agents: up to 100 agents and 30 resources
- Connections to other themes
 - context aware, smart sensing systems (**Theme II**): sensors essentially are shaping perception by updating state/observation models in MDP/POMDP models
 - Auto configuration of the network system (**Theme III**):
 - Auto adaptation to adjust resources in the network by changes in the demand
 - Ensures privacy as only patient agents know about their local conditions



Transfer of Control Strategies for Multiagent Resource Allocation in Mass Casualty Scenarios **John A. Doucette (Masters)**

- Finding optimal assignments is NP-Hard.
 - maximize overall utility
- Existing Multi-Agent Resource Allocation methods overestimate the costs of preemption.
 - myopic view of utility: does not reassign resources
- Using Transfer-of-Control strategies to make contingency plans can provide a better approximation. (Cohen, et al. 2010)
 - reason about bother and likelihood of response
 - more optimistic about recouping utility



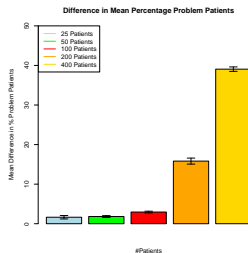
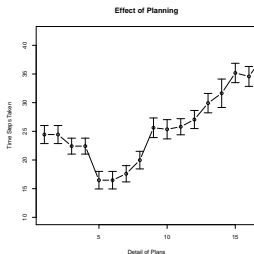
Optimal Doctor/Patient Assignments

Completed Work:

- Detailed Implementations ✓
- Adaptive (learning) agents ✓
 - Learning: demand for resources, how dynamic environment is
- Improvements over existing systems confirmed in simulations ✓

Future Work:

- Simulations with more real-world data.
- Stronger learning models.



Holmes – hybrid ontological-machine learning decision support system

Atif Khan (PhD), John Doucette (Masters)

Scenario



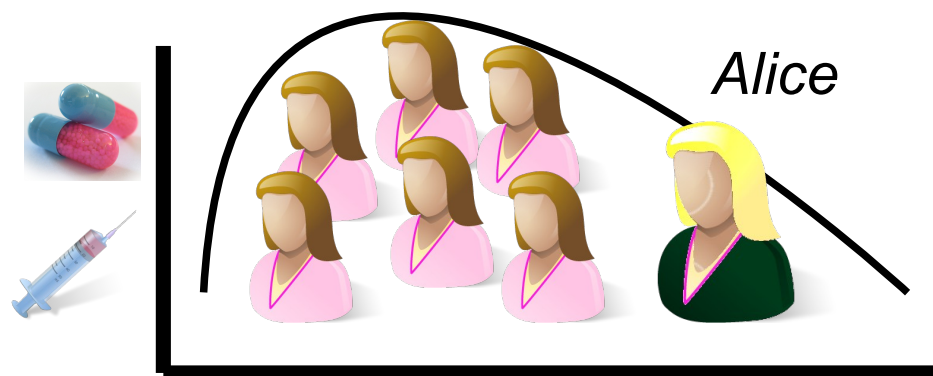
Considerations

1. black swan theory
2. Alice's medical history
3. nature of the prescription
4. who is administering the drug?
5. time constraints

Objectives

1. patient centric evidence based
2. automated/machine processable
3. operate in constrained environments
4. decisions are easy to explain & verify
5. tolerant to noise in patient data

→ **“information challenge”**



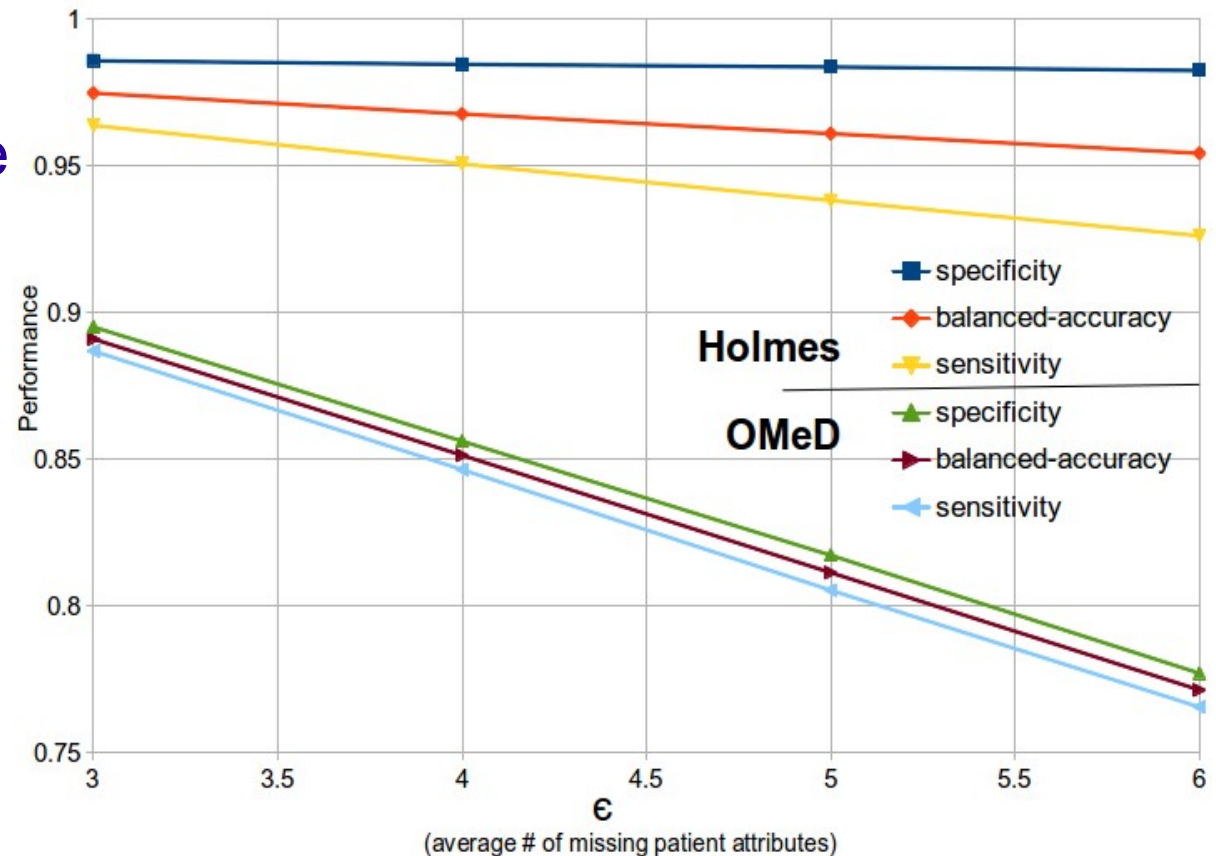
Details of Holmes

Construction

- knowledge-based decision support engine
 - ontological data representation
 - semantic reasoner for decision making
- augmented with machine learning techniques
 - to cope with the “information challenge”
 - predict values for missing attributes

Evaluation

- “sleeping pill prescription” with real world datasets
 1. BRFSS-2010 patient data
 2. Mayo clinic sleep prescription protocol,
 3. Drug.com drug registry



Conclusion

- Information used most effectively when intelligently reasoning about its use
- All 3 contexts
- All parts of the hSITE mantra