# A Progressive Explanation of Inference in Hybrid Bayesian Networks for Supporting Clinical Decision Making

Evangelia Kyrimi
Queen Mary University of London
e.kyrimi@qmul.ac.uk



## Overview

Introduction

Background

Method

Case Study

Conclusion

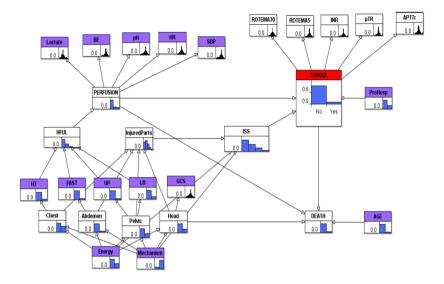
## Introduction

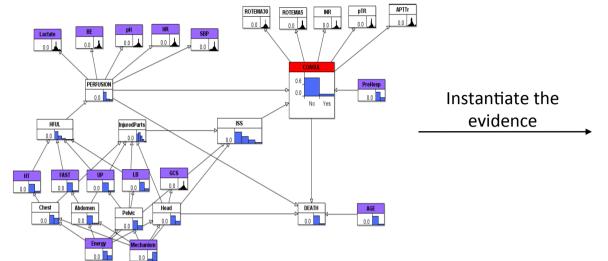
#### Problem:

 Many predictive models have been developed in medicine as decision tools but very few have been trusted and used in practice

#### **Proposed Solution:**

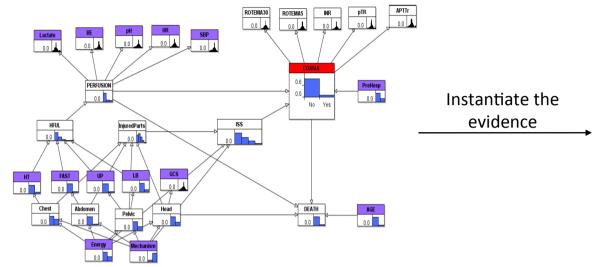
Explain the model's reasoning

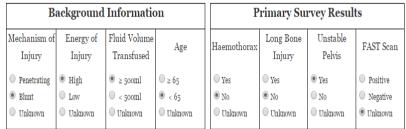


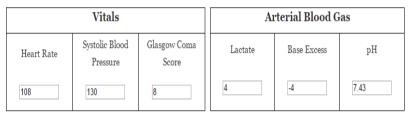


В	Background Information			Primary Survey Results			
Mechanism of Injury	Energy of Injury	Fluid Volume Transfused	Age	Haemothorax	Long Bone Injury	Unstable Pelvis	FAST Scan
<ul><li>Penetrating</li><li>Blunt</li><li>Unknown</li></ul>	<ul><li>High</li><li>Low</li><li>Unknown</li></ul>	<ul><li>≥ 500ml</li><li>&lt; 500ml</li><li>Unknown</li></ul>	<ul><li>≥ 65</li><li>• &lt; 65</li><li>Unknown</li></ul>	● Yes ● No ● Unknown	○ Yes  ● No  Unknown	• Yes • No • Unknown	O Positive Negative Unknown

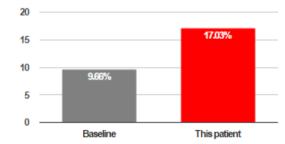
	Vitals		Ai	rterial Blood G	as
Heart Rate	Systolic Blood Pressure	Glasgow Coma Score	Lactate	Base Excess	рН
108	130	8	4	-4	7.43

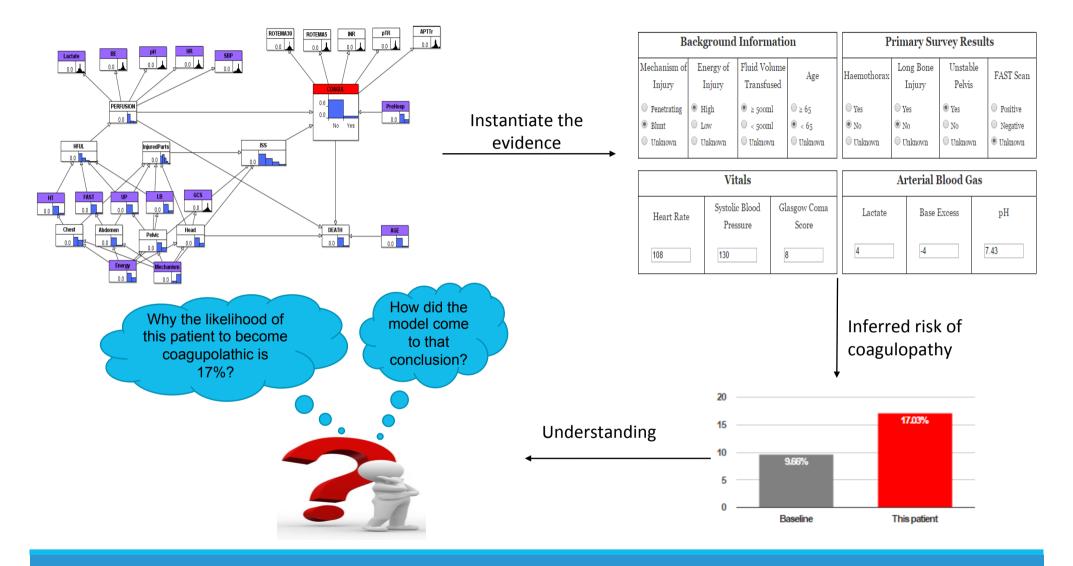






Inferred risk of coagulopathy





# What is an explanation?

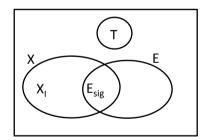
A detailed justification that makes something and its reasons understandable to the receiver of the explanation.

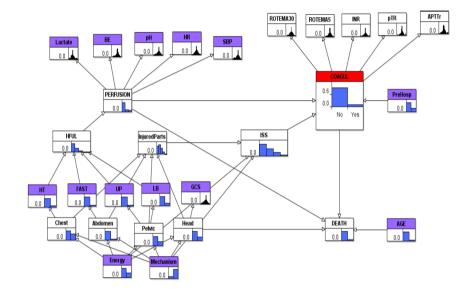
Types of explanation in BNs

- Explanation of the model
- Explanation of the evidence
- Explanation of reasoning

## **Notation**

- T: target variable
- E: set of evidence
- $E_{siq}$ : set of significant evidence
- $\circ X_i$ : set of intermediate variables
- X: set of explanatory variables





# Explanation of reasoning

A 3-level explanation of reasoning:

- Level 1:  $E_{sig}$  that have a significant effect on T
- Level 2: Flow of information from  $E_{sig}$  to T through the unobserved variables  $X_I$
- Level 3: Effect of each  $E_{siq}$  on the unobserved variables  $X_I$

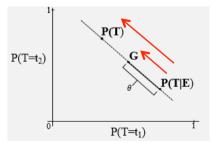
# Level 1: Significant evidence variables

#### Impact:

 $Im \downarrow E(e) \triangleq D \downarrow KL(P(T|E)|PTE \setminus e)$ 

#### Threshold of significance:

∘ Threshold  $\vartheta$ : minimum impact so that  $e \in E_{sig}$  iff  $Im_E(e) \ge \vartheta$ 

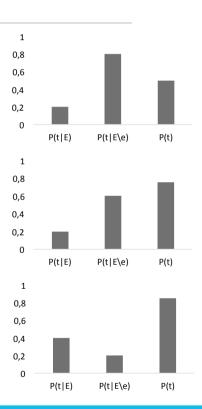


$$G \triangleq PTE - \alpha(PTE - P(T))$$

$$\vartheta \triangleq D \downarrow KL(P(T|E)||G)$$

# Level 1: Conflict analysis

<b>Conflict Category</b>	Direction	Impact
Dominant	D <sub>consitent</sub>	Im <sub>E</sub> (e) > Im <sub>E</sub> (E)
Consistent	D <sub>consitent</sub>	$Im_{E}(e) \leq Im_{E}(E)$
Conflicting	D <sub>conflicting</sub>	n/a
Mixed consistent	D <sub>mixed</sub>	$Im_E(e)_t \mid t \in d_{cons}(e, t) > Im_E(e)_t \mid t \in d_{conf}(e, t)$
Mixed conflicting	$D_{mixed}$	$\operatorname{Im}_{E}(e)_{t} \mid t \in d_{cons}(e, t) \leq \operatorname{Im}_{E}(e)_{t} \mid t \in d_{conf}(e, t)$



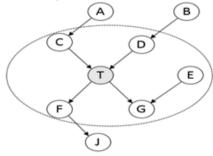
### Level 2: Flow of information

Intermediate variables  $X_i$ 

- $\circ$  Middle step in the reasoning process from  $E_{siq}$  to T
- Unobserved variables

#### Markov Blanket variables

A variable's parents, children and children's other parents



# Level 3: Effect of evidence on the intermediate variables

#### For each variable in $X_i$ :

- Determine the subset of  $E_{siq}$  that are d-connected to  $X_I$
- Carry out a conflict analysis

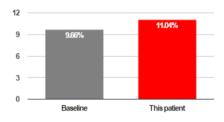
# A complicated real case study

Background Information			
Mechanism of Injury	Energy of Injury	Fluid Volume Transfused	Age
<ul><li>Penetrating</li><li>Blunt</li><li>Unknown</li></ul>	High Low Unknown	<ul><li>● ≥ 500ml</li><li>○ &lt; 500ml</li><li>○ Unknown</li></ul>	<ul><li>≥ 65</li><li>€ &lt; 65</li><li>Unknown</li></ul>

Primary Survey Results			
Haemothorax	Long Bone Injury	Unstable Pelvis	FAST Scan
Yes	○ Yes	○ Yes	<ul><li>Positive</li></ul>
○ No	● No	● No	Negative
Unknown	Unknown	O Unknown	Unknown

Vitals			
Heart Rate	Systolic Blood Pressure	Glasgow Coma Score	
120	168	5	

Arterial Blood Gas			
Lactate	Base Excess	рН	
0.9	-2.2	7.37	



WHY?

### Level 1: $E_{sig}$ that have a significant effect on T

- Threshold of significance
- · Supporting evidence
- Conflicting evidence

Level 2: Flow of information from  $E_{sig}$  to T through the unobserved variables  $X_i$ 

Level 3: Effect of each  $E_{sig}$  on the unobserved variables  $X_i$ 

- Supporting evidence
- Conflicting evidence

#### Level 1

The percentage of change in the uncertainty of Coagulopathy between this patient and an average trauma call patient that is considered insignificant is 50%.

What are the factors that support the above prediction of 'Coagulopathy'? Factors that support the above prediction of 'Coagulopathy' (strongest to least):

- Pre-hospital fluids ≥ 500mls (Very important)
- GCS = 5 (Very important)
- Haemothorax = Yes (Very important)
- Energy of injury = High

What are the factors that do not support the above prediction of 'Coagulopathy'? Factors that do not support the above prediction of 'Coagulopathy' (strongest to least):

- Systolic Blood Pressure = 168
- Long Bone feacture = No
- Lactate = 0.9

#### Level 2

How does the model utilize the above factors to predict 'Coagulopathy'? As the immediate causes of 'Coagulopathy' the model uses:

- (1) 'Tissue Perfusion': 26% increase in risk of having a Normal 'Tissue Perfusion' than an average trauma call patient.
- (2) 'Tissue Injury': 230% increase in risk of having a Severe 'Tissue Injury' than an average trauma call patient.

#### Level 3

(1) Factors that support the prediction of 'Tissue Perfusion':

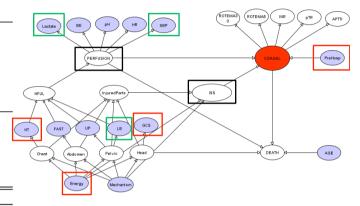
- Systolic Blood Pressure = 168
- Lactate = 0.9
- Long Bone fracture = No

Factors that do not support the prediction of 'Tissue Perfusion':

Haemothorax = Yes

(2) Factors that partially support the prediction of 'Tissue Injury':

- GCS = 5
- Haemothorax = Yes
- Energy of injury = High
- ullet Long Bone feacture = No



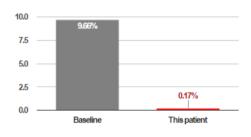
# An easy real case study

Background Information			
Mechanism of	0,	Fluid Volume	Age
Injury	Injury	Transfused	
<ul><li>Penetrating</li></ul>	O High	○ ≥ 500ml	○ ≥ 65
Blunt	Low	• < 500ml	<ul><li>&lt; 65</li></ul>
O Unknown	O Unknown	O Unknown	O Unknown

Primary Survey Results			
Haemothorax	Long Bone Injury	Unstable Pelvis	FAST Scan
○ Yes	○ Yes	○ Yes	<ul><li>Positive</li></ul>
No	No	No	<ul><li>Negative</li></ul>
Unknown	Unknown	Unknown	Unknown

Vitals			
Heart Rate	Systolic Blood Pressure	Glasgow Coma Score	
93	157	15	

Arterial Blood Gas			
Lactate	Base Excess	pH	
2.8	-0.6	7.41	



WHY?

#### Level 1

The percentage of change in the uncertainty of Coagulopathy between this patient and an average trauma call patient that is considered insignificant is 0.1%.

What are the factors that support the above prediction of 'Coagulopathy'? Factors that support the above prediction of 'Coagulopathy' (strongest to least):

- Energy of injury = Low
- Mechanism of injury = Penetrating
- Fast scan = Negative
- Haemothorax = No
- Long Bone fracture = No
- GCS = 15
- Pre-hospital fluids < 500mls
- Systolic Blood Pressure = 157
- Base Excess = -0.6

#### Level 2

How does the model utilize the above factors to predict 'Coagulopathy'? As the immediate causes of 'Coagulopathy' the model uses:

- (1) 'Tissue Perfusion': 32% increase in risk of having a Normal 'Tissue Perfusion' than an average trauma call patient.
- (2) 'Tissue Injury': 78% increase in risk of having a Mild 'Tissue Injury' than an average trauma call patient.

#### Level 3

- (1) Factors that support the prediction of 'Tissue Perfusion':
  - Systolic Blood Pressure = 157
  - Haemothorax = No
  - Fast scan = Negative
  - $\bullet$  Long Bone fracture = No

- (2) Factors that support the prediction of 'Tissue Injury':
  - Energy of injury = Low
  - Mechanism of injury = Penetrating
  - Fast scan = Negative
  - Haemothorax = No
  - $\bullet \ \ \textit{Long Bone fracture} = \textit{No}$
  - GCS = 15

## Conclusion

#### Benefits of an explanation:

- Make the model's prediction more trustworthy
- Potential benefit on the validation of the model's structure

#### **Future Steps**

- Enhance the explanation visually
- Evaluate the benefits of the explanation in real time

Thank you for your attention!