

Interactive Medical Word Sense Disambiguation with Instance and *Feature* Labeling

S16: Sub-language and Multi-lingual NLP

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Disclosure



I and my spouse/partner have no relevant relationships with commercial interests to disclose.

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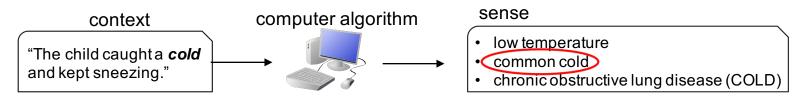
Word sense disambiguation (WSD)



Words have multiple meanings (senses)

cold: (1) low temperature; (2) common cold; (3) chronic obstructive lung disease (COLD)

Given ambiguous word in **context**, automatically assign a **sense** from a given set



Critical step for many medical NLP applications

Document indexing & classification; named entity extraction; computer-assisted review

WSD solutions



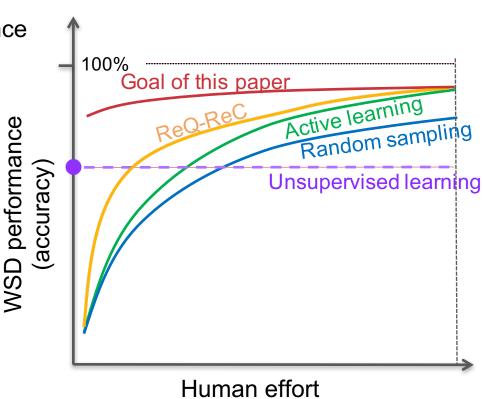
Human effort vs. algorithm performance

Learning curve

Machine learning algorithms

- Unsupervised learning
- Supervised learning
 - labeling instances

Can we make better use of expert's domain knowledge?



Beyond instance labels



```
"cold" Chronic Obstructive Lung Disease
Common Cold
Low Temperature
```

Indicative words:

- Chronic Obstructive Lung Disease:
 "COLD", "chronic", "obstructive", "lung", ...
- Common Cold: "common", "cough", "sneeze", ...
 - Unified
 - **Medical**
 - Language
 - System



"I know it when I see it":

Rationale behind a sense label

```
"The tissue was exposed to a cold environment (5 degrees C)."

(Low Temperature)
```

Capture WSD domain knowledge



(1) Type in indicative words

Chronic Obstructive Lung Disease

COLD, chronic, obstructive, lung

Common Cold

common, cough, sneeze

(2) Highlight contextual cues when labeling

The tissue was exposed to a cold environment (5 degrees C).

- Chronic Obstructive Lung Disease
- Common Cold
- Low Temperature



[textual pattern, sense] pairs

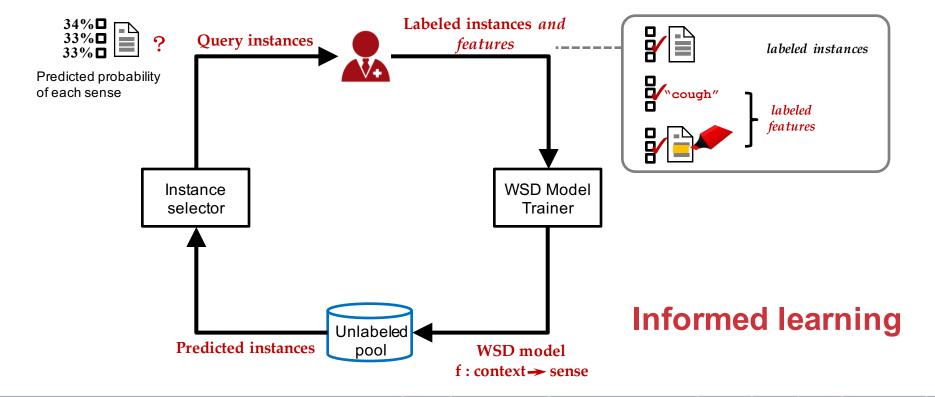
labeled features

["COLD" (all-cap), ["chronic", ["obstructive", ["common", ["cough", ["sneeze", ["<digit> degrees C", Chronic Obstructive Lung Disease]
Chronic Obstructive Lung Disease]
Chronic Obstructive Lung Disease]
Common Cold]
Common Cold]
Common Cold]

Low Temperature]

Workflow





Experimental setup

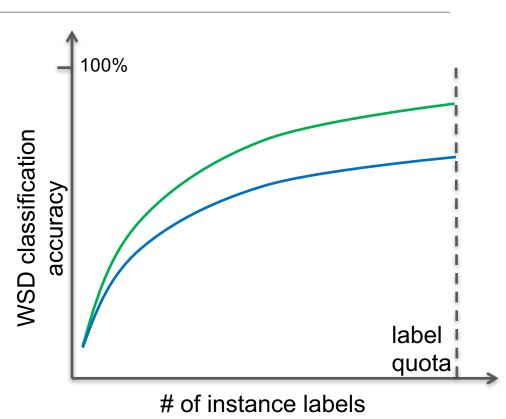


Evaluation metric

- Learning curves
 - Labeled features only used at the first iteration
- Area under learning curve (ALC)

Compared methods

- Random sampling
- Active learning
- ReQ-ReC
- Informed learning



Evaluation Corpora



MSH: ambiguous words and abbreviations in MEDLINE abstracts

UMN: ambiguous clinical abbreviations, Univ. of Minnesota Fairview Hospital

VUH: ambiguous clinical abbreviations, Vanderbilt Univ. Hospital

	#ambiguous words	#sense/ word	#contexts/ word	#tokens/ context	majority guess accuracy
MSH	198	2.1	190	203	54.0%
UMN	75	5.4	500	61	73.8%
VUH	24	4.3	194	19	78.3%

Simulated human expert inputs



Provide labeled instances in active learning

Sense labels in the corpora

Provide labeled features per sense (only at the first iteration)

Words with top information gain

Chronic Obstructive Lung Disease	Common Cold	Low Temperature
obstructive	common	degrees
chronic	cough	C
lung	colds	temperatures
COLD	nasal	temperature
pulmonary	over-the-counter	exposure
COPD	OTC	gene

Simulated human expert inputs



Provide labeled instances in active learning

Sense labels in the corpora

Provide labeled features per sense (only at the first iteration)

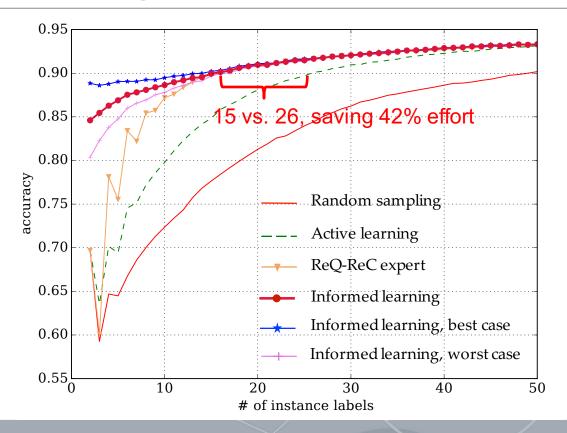
- Words with top information gain
- Making it more realistic:
 - Provide the best, 5th best, 10th best contextual words upfront
 - Highlight the best, 2nd best, 3rd best contextual words in a given instance

"Best-case scenario"

"Worst-case scenario"

MSH: 198 ambiguous words in MEDLINE

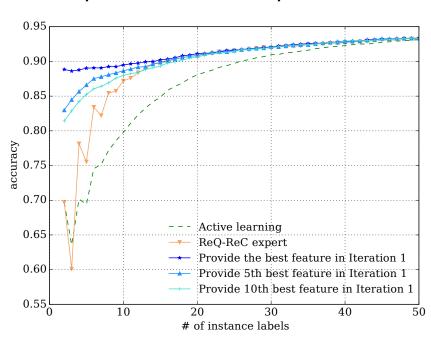




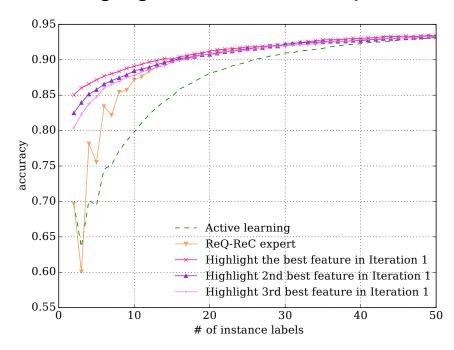
MSH drill-down analysis



provide features upfront

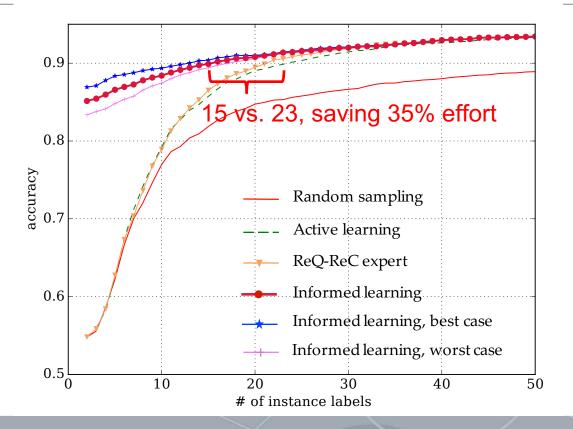


highlight features in examples



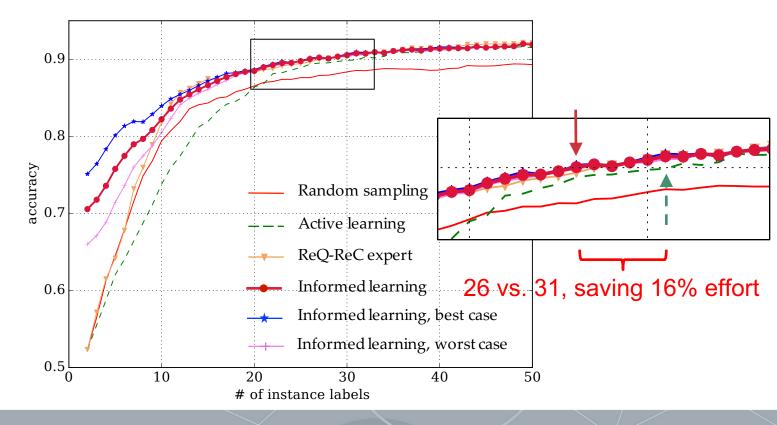
UMN: 75 ambiguous clinical abbreviations





VUH: 24 ambiguous clinical abbreviations





Area under learning curve (ALC)



	MSH	UMN	VUH
Random	0.816	0.817	0.831
Active learning	0.868	0.854	0.831
ReQ-ReC expert	0.893	0.857	0.852
Informed learning	0.909*†	0.909*†	0.871*

Wilcoxon signed rank test

'*': significant w.r.t. "Active learning" at $\alpha=0.01$.

'†': significant w.r.t. "ReC-ReQ expert" at $\alpha = 0.01$.

Conclusion



Learning from labeled features is more efficient use of expert knowledge and time

- Labeling instances → providing/highlighting features
- Less human effort to reach desirable accuracy
- Even noisy feature labels are useful

Future work

Inviting human experts in real-time evaluation

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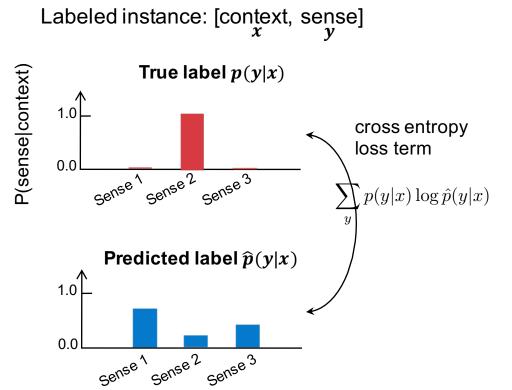


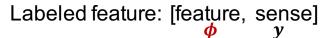
THANKS

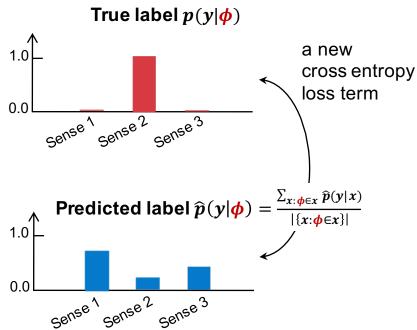


Training WSD model with labeled instances & features



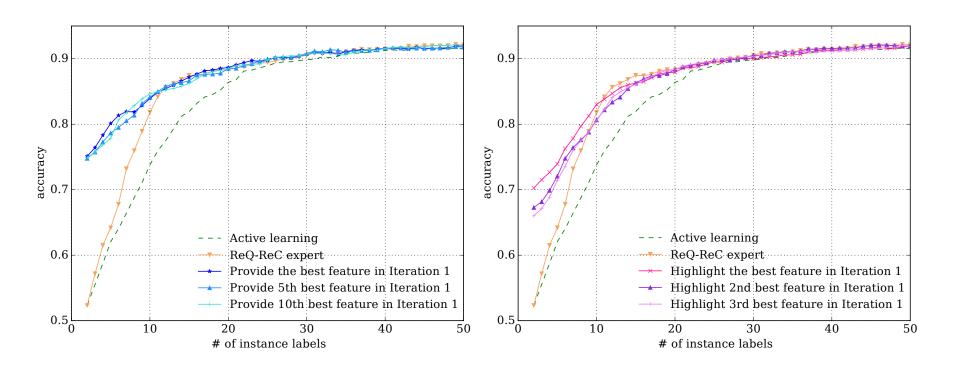






VUH drill-down analysis





UMN drill-down analysis



