

An ontology-based interpretable fuzzy decision support system for diabetes diagnosis

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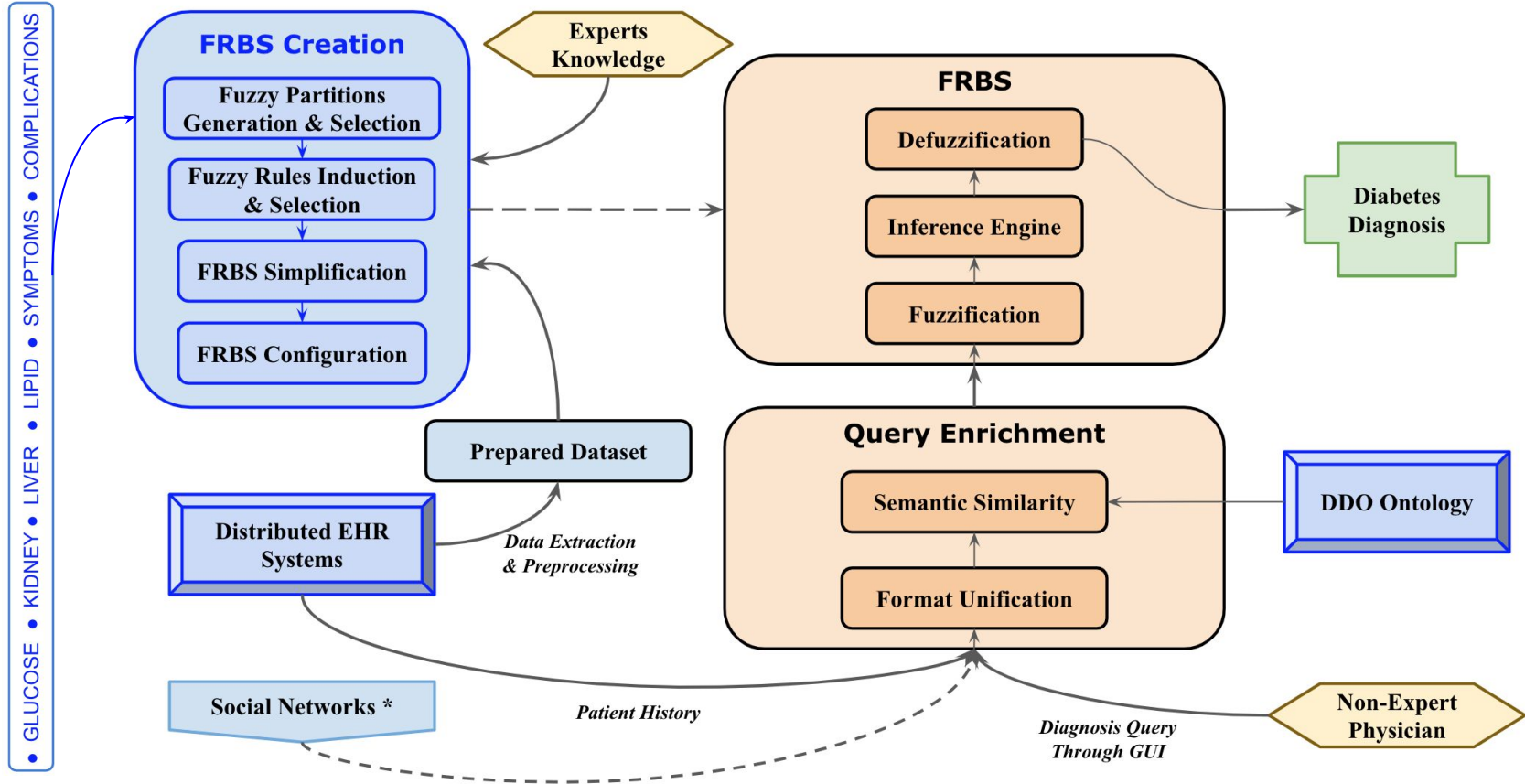


- **Problem Domain:** Clinical Decision Support System (CDSS) for **Diabetes** Mellitus (DM) **Diagnosis**
- **Goals:**
 - Great **accuracy** in the DM Diagnosis.
 - Highly **interpretable and dynamic** Fuzzy Rules and Fuzzy Partitions (medically intuitive).
 - **Semantic Reasoning** to enable interoperability with Electronic Health Records (EHR) systems.
- **Data Sources:**
 - Evaluation Dataset obtained from the **Mansoura University Hospitals (Egypt)** from January 2010 to August 2013.
 - **Distributed EHR Systems** (Patient History) and Experts Knowledge (Interpretability).
 - Connection to **Social Networks** (Future Work).
- **IDSS Scope:**
 - Build an accurate and semantically interpretable hierarchical FRBS that supports the DM diagnosis of non-expert physician's (or patient's) queries (including the creation of a GUI interface).
 - Address the possible isolation of subsystems in the decision making process.
 - Add **ontology reasoning** to improve the semantic expressiveness and interoperability of the CDSS

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➤ **Preprocessing Techniques:**

- Outliers detection, missing data handling, data transformation (categorical features encoding and semantic encoding of medical concepts according to SCT) and feature selection.

➤ **Fuzzy Rule Base Systems (FRBS) Creation:**

- Fuzzy partitioning: K-Means Clustering or Hierarchical Fuzzy Partitioning (HFP) based on the Partition Coefficient (PC), the Partition Entropy (PE) and the Chen Index (CI).
- Fuzzy Rules Induction: Fuzzy Decision Trees (FDT) or Wang and Mendel (WM) methods.
- Rules Weighting: Fuzzy Analytical Hierarchy Process (FAHP).
- FRBS Simplification: Based on HILK++.
- FRBS Configuration and Implementation: Mamdani Inference engine and “Mean of Max” defuzzification.

➤ **FRBS Semantic Extension:**

- Semantic Similarity based on DDO Ontology using the Pellet reasoner and the SNOMED CT Terminology.

- **Comparison among different versions** of the model for each sub-FRBS:
 - {3, 5, 7} Fuzzy partitions (different clustering algorithms e.g. uniform, K-Means and HFP).
 - WM or FDT.
 - With or without FRBS Simplification.
 - Weighted Hierarchical FRBS (with FAHP).
 - Semantically intelligent WH-FRBS.
 - SWH-FRBS after isolating specific Subsystems.
- **Comparison against other ML techniques:** naïve Bayes, support vector machine (SVM), logistic regression, k-nearest neighbor (KNN) with $k = 3$, decision tree based on C4.5, artificial neural network (ANN) and random forest.
- **Evaluation Metrics (averaged over 10-fold cross-validation):**
 - Quality metrics: Accuracy, Precision, Recall and F-Measure.
 - Interpretability Indexes: Rules and Premises.
 - Partition Quality Indexes: PC, PE and CI.

GOOD ACCURACY

MEDICALLY INTUITIVE