



האוניברסיטה
העברית
בירושלים
THE HEBREW
UNIVERSITY
OF JERUSALEM

Artificial Intelligence in Medicine

Real-life data

Nir Friedman and Tommy Kaplan

2/1/23

BULLETIN OF
MATHEMATICAL BIOPHYSICS
VOLUME 5, 1943

A LOGICAL CALCULUS OF THE IDEAS IMMANENT IN NERVOUS ACTIVITY

WARREN S. MCCULLOCH AND WALTER PITTS

FROM THE UNIVERSITY OF ILLINOIS, COLLEGE OF MEDICINE,
DEPARTMENT OF PSYCHIATRY AT THE ILLINOIS NEUROPSYCHIATRIC INSTITUTE,
AND THE UNIVERSITY OF CHICAGO

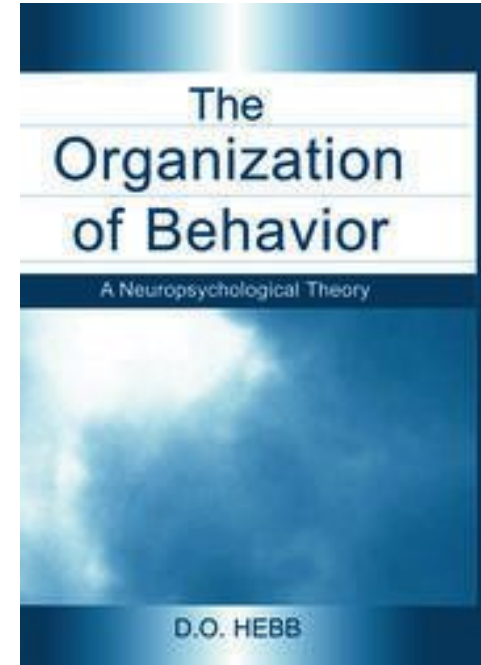
Because of the “all-or-none” character of nervous activity, neural events and the relations among them can be treated by means of propositional logic. It is found that the behavior of every net can be described in these terms, with the addition of more complicated logical means for nets containing circles; and that for any logical expression satisfying certain conditions, one can find a net behaving in the fashion it describes. It is shown that many particular choices among possible neurophysiological assumptions are equivalent, in the sense that for every net behaving under one assumption, there exists another net which behaves under the other and gives the same results, although perhaps not in the same time. Various applications of the calculus are discussed.

J. Physiol. (1959) 148, 574–591

RECEPTIVE FIELDS OF SINGLE NEURONES IN THE CAT'S STRIATE CORTEX

BY D. H. HUBEL* AND T. N. WIESEL*

*From the Wilmer Institute, The Johns Hopkins Hospital and
University, Baltimore, Maryland, U.S.A.*



1949

J. Physiol. (1962), 160, pp. 106–154

RECEPTIVE FIELDS, BINOCULAR INTERACTION AND FUNCTIONAL ARCHITECTURE IN THE CAT'S VISUAL CORTEX

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*From the Neurophysiology Laboratory, Department of Pharmacology
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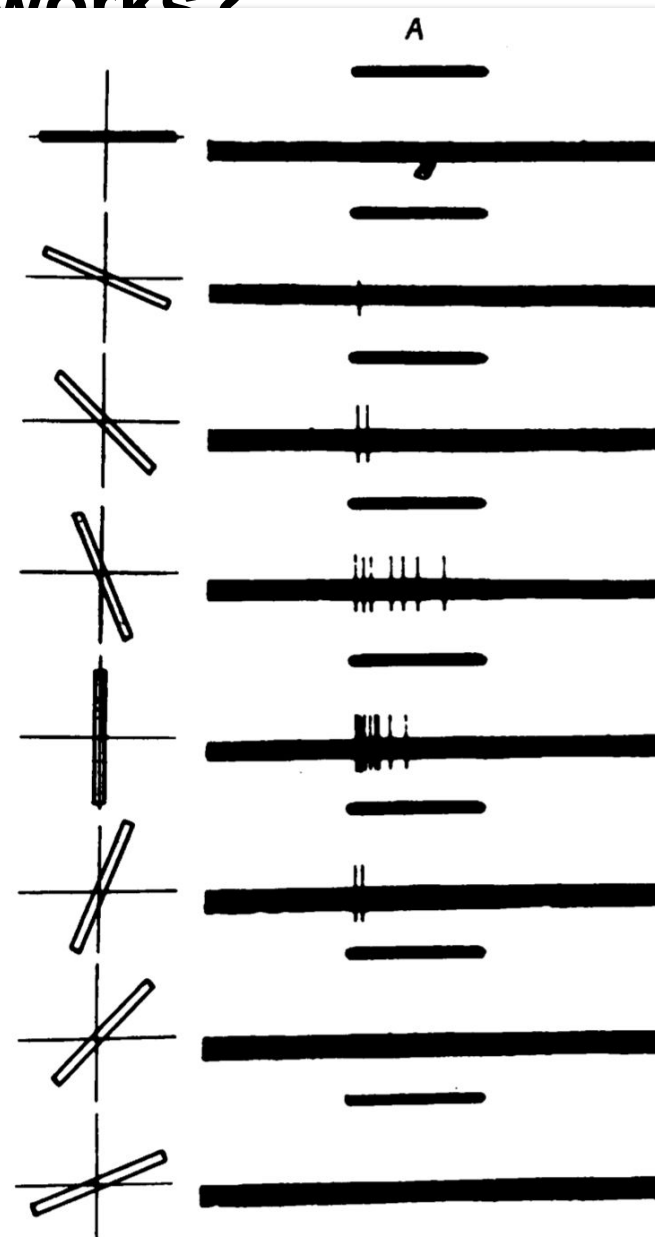
Why neural networks?

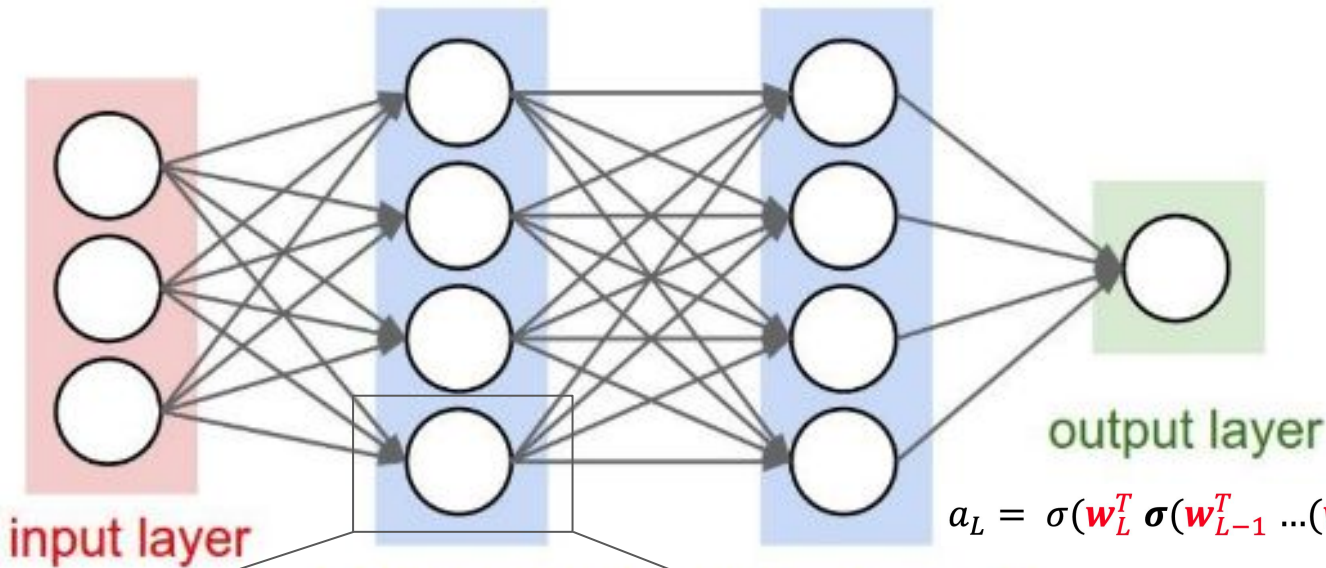
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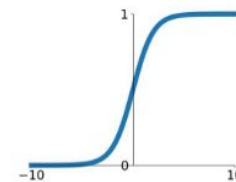
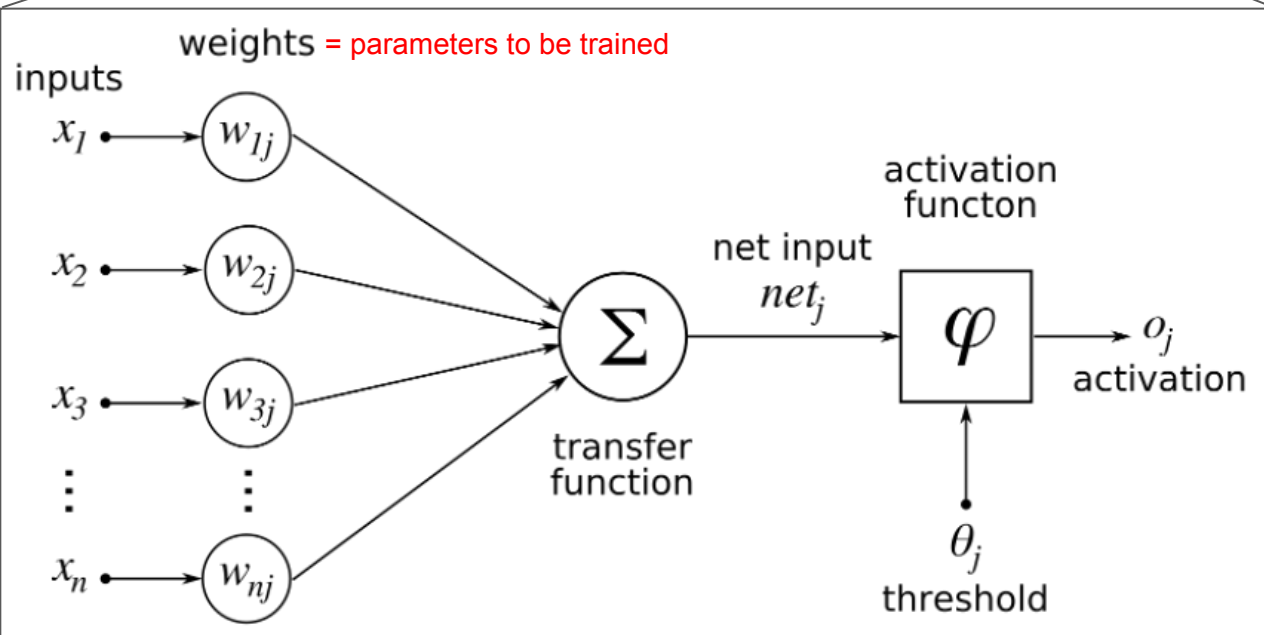
From the Ne

Harva



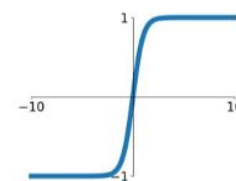


$$a_L = \sigma(\mathbf{w}_L^T \sigma(\mathbf{w}_{L-1}^T \dots (\mathbf{w}_1^T \mathbf{x} + b_1) \dots) + b_L)$$



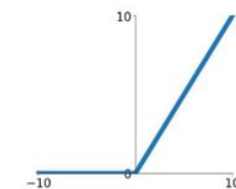
Sigmoid

$$\sigma(x) = \frac{1}{1+e^{-x}}$$



tanh

$$\tanh(x)$$



ReLU

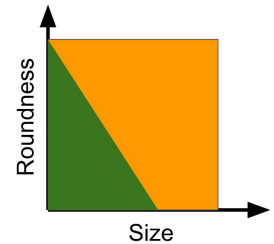
$$\max(0, x)$$

“Neuron” \approx linear classifier

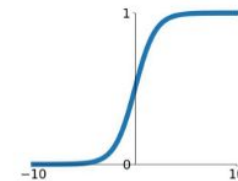
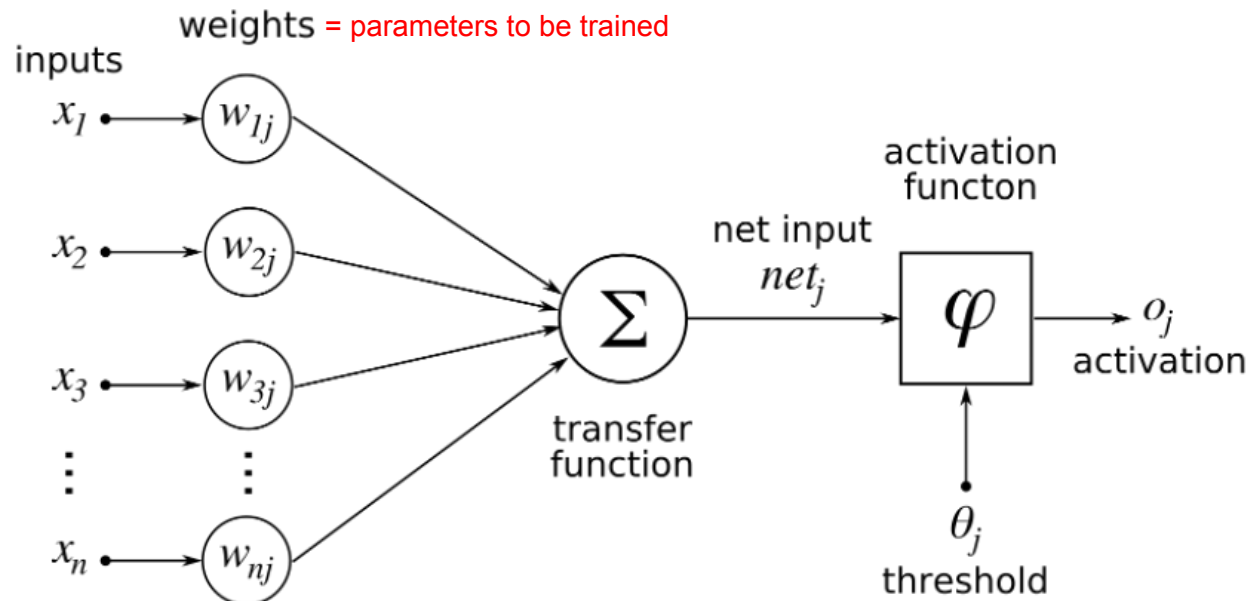
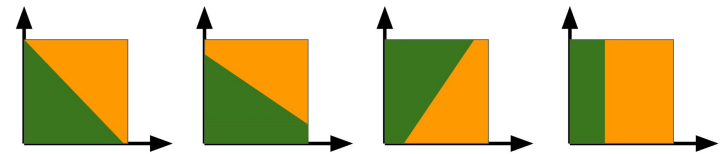
- Smoothed non-binary output
- No temporal dynamics
- Parameter learning \approx Hebbian learning

Linear classifier

```
if 2*size + 5*round > 100 then  
  "orange"  
else  
  "apple"
```

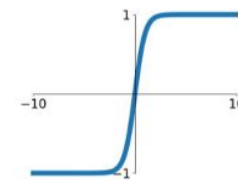


Wider range of hypotheses



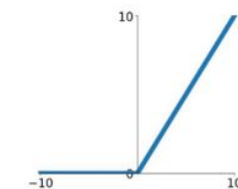
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tanh

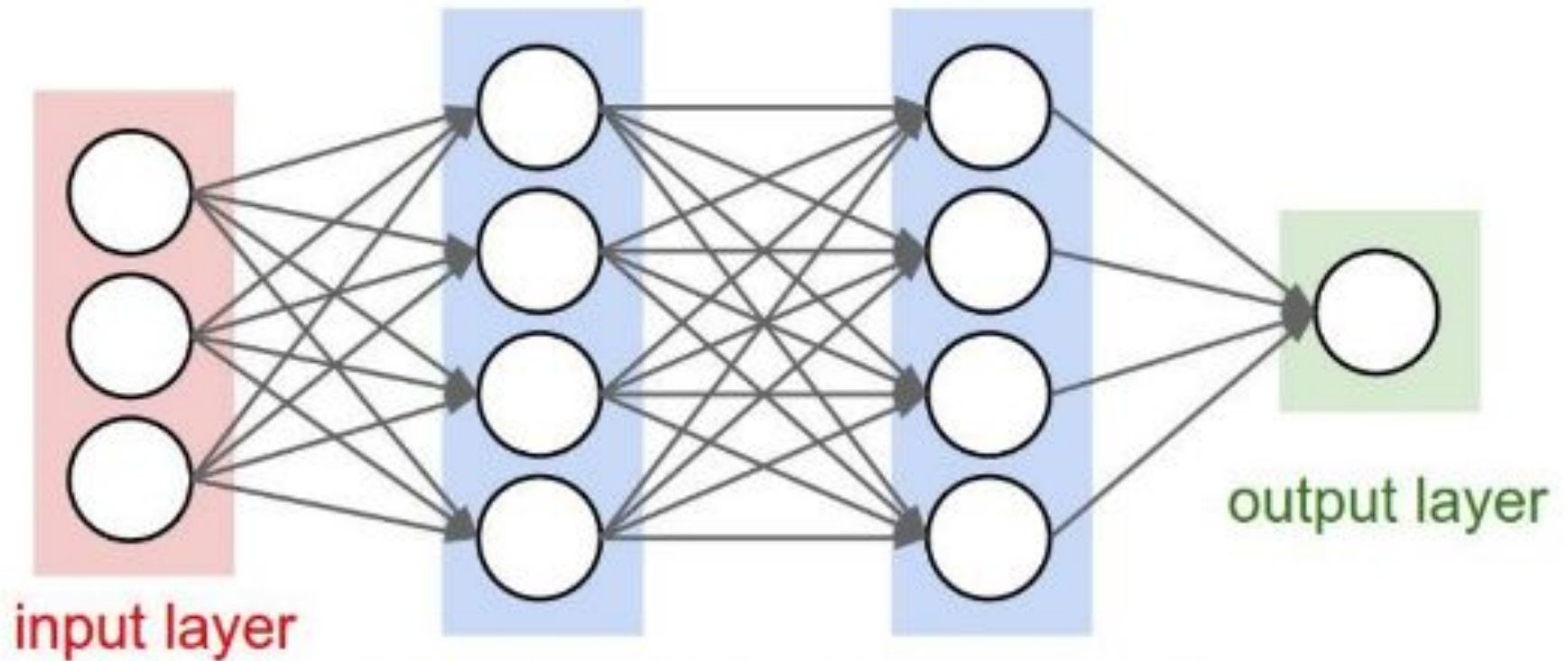
$$\tanh(x)$$



ReLU

$$\max(0, x)$$

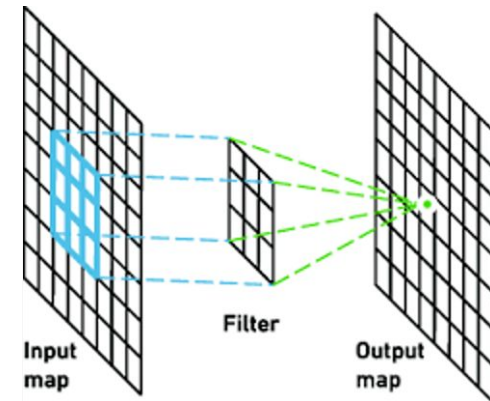
Fully connected network



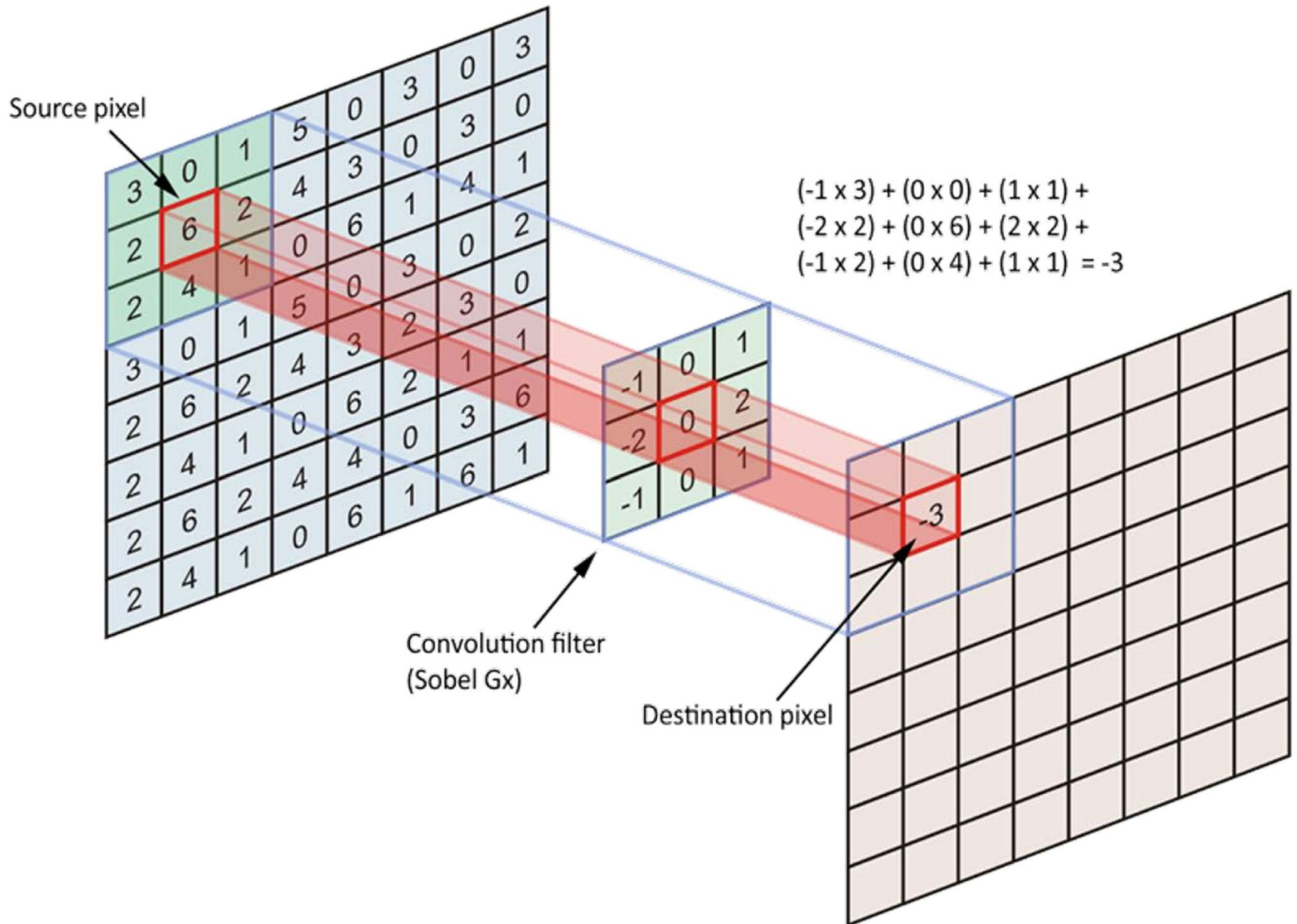
Convolutional neural network

Few changes from fully connected networks

1. A neuron is not connected to all neurons (in prev. layer)
2. Keep it local
3. Use the same filter across all regions



Convolutional neural network - filters



Convolutional neural network - filters



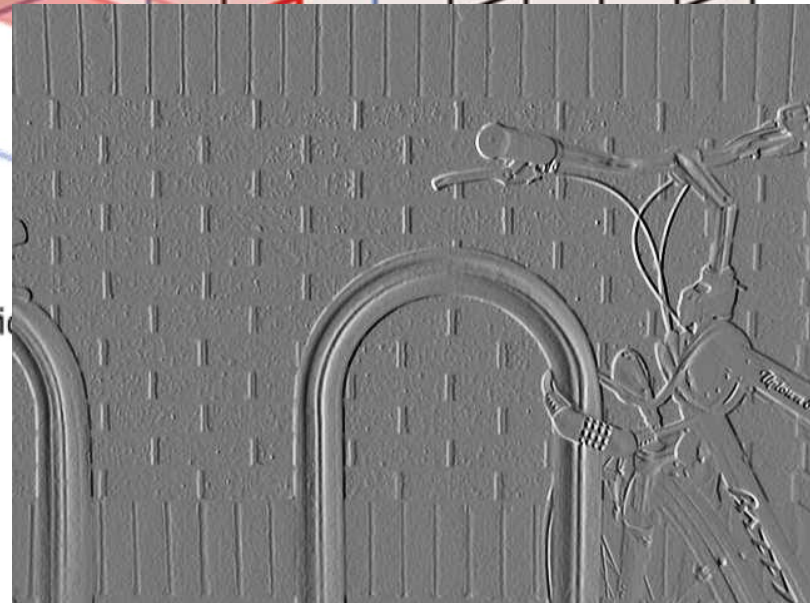
2	4	1	4	4	0	6	1
2	6	2	4	6	1	6	1
2	4	1	0	6	1	6	1

Convolution filter
(Sobel Gx)

-1	0	1
-2	0	2
-1	0	1

Destination

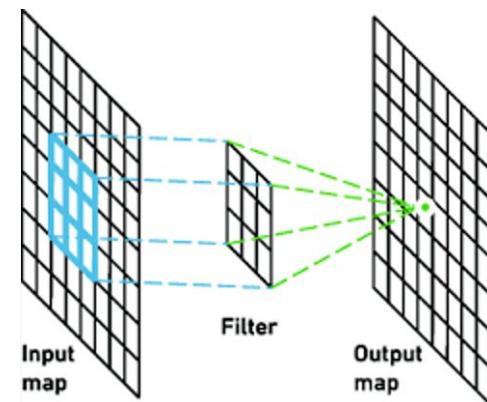
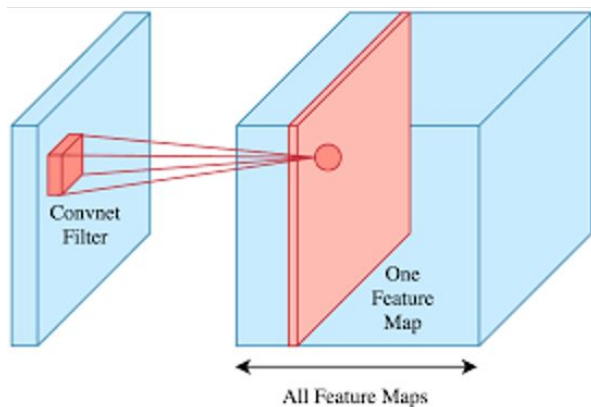
$$\begin{aligned} &(-1 \times 3) + (0 \times 0) + (1 \times 1) + \\ &(-2 \times 2) + (0 \times 6) + (2 \times 2) + \\ &(-1 \times 2) + (0 \times 4) + (1 \times 1) = -3 \end{aligned}$$



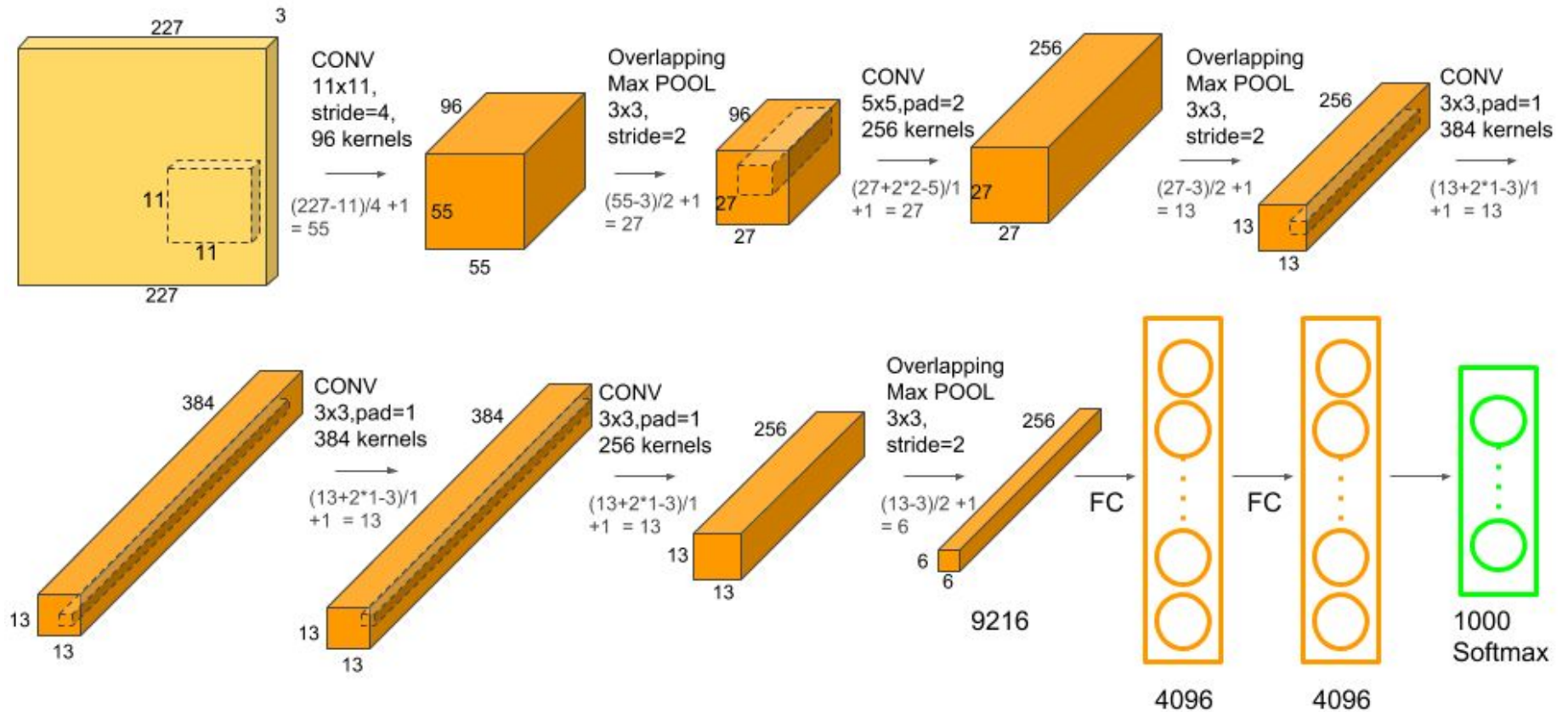
Convolutional neural network

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3. Use the same filter across all regions
4. Use more than one filter



Convolutional neural network - architecture



From engineering to learning to deep learning

Manual modeling



Features
intensity, texture
shape, location

MANUAL



Relations
Boundary
differences, ...

MANUAL

Machine learning

Features
intensity, texture
shape, location

MANUAL

Relations
Derived by
regression, SVM,...

AUTOM

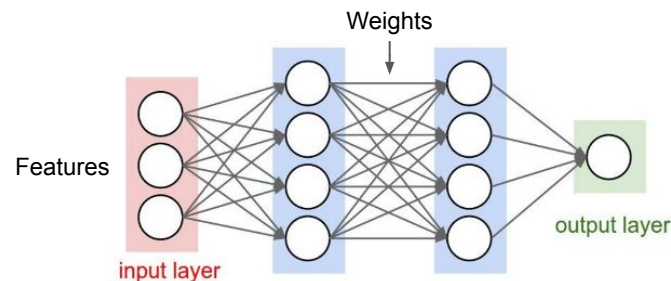
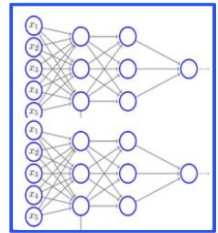
Deep learning

Features
Derived from data
Implicit

AUTOM

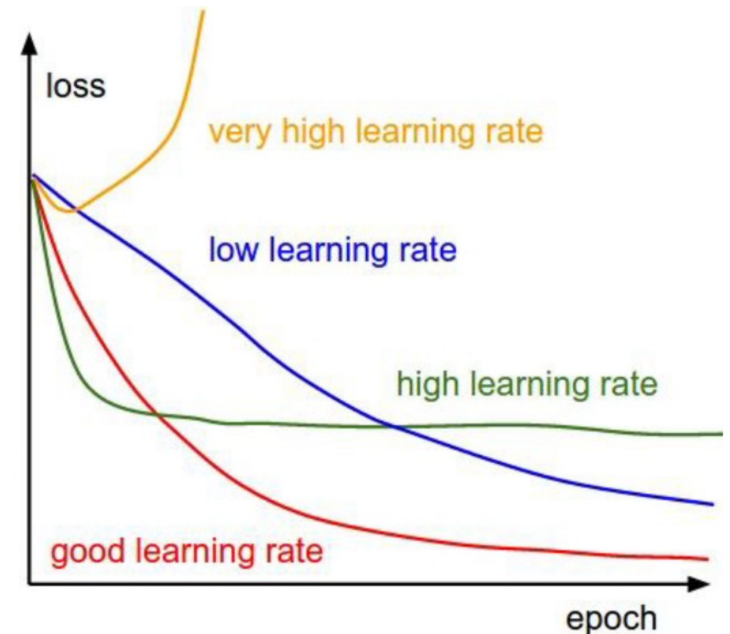
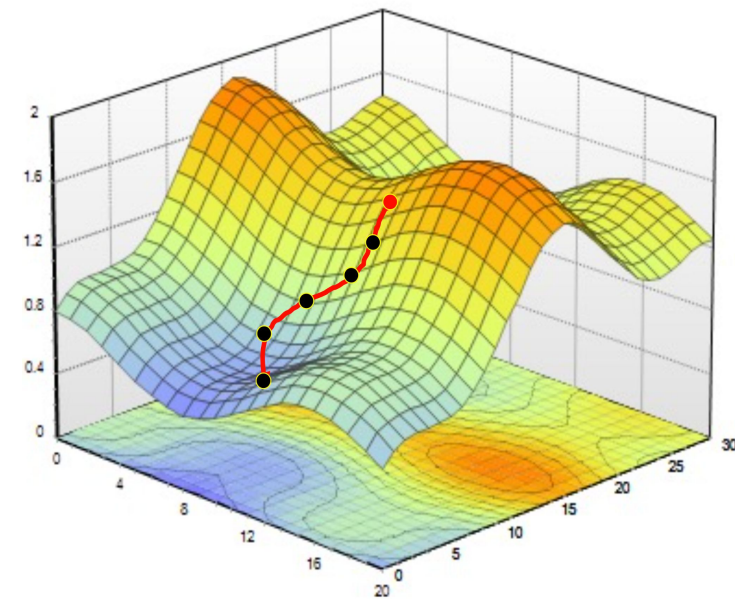
Relations
Derived from data
Implicit

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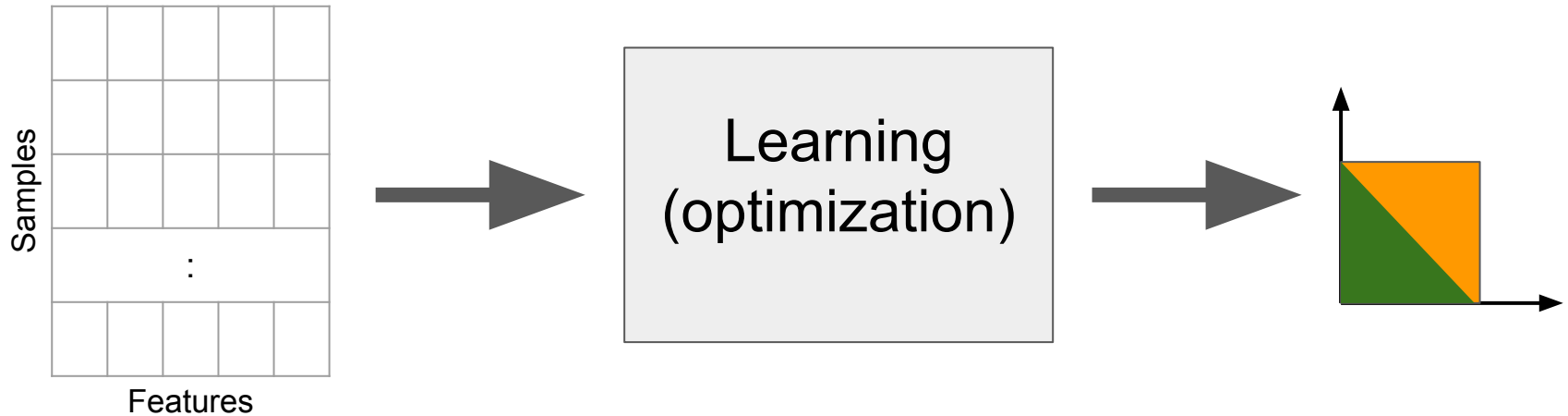


Stochastic Gradient Ascent

- Iteratively, approximate the direction at each optimization step using a small subset of samples (mini-batch)
- Epoch: a series of steps, using all training data
- Learning rate = step size
- Too large and you're over the mountain
- Too small and you won't get far



Revisiting our assumptions



Training set

- Training set - Samples X Features
- Every sample has value for all the features

Missing Data

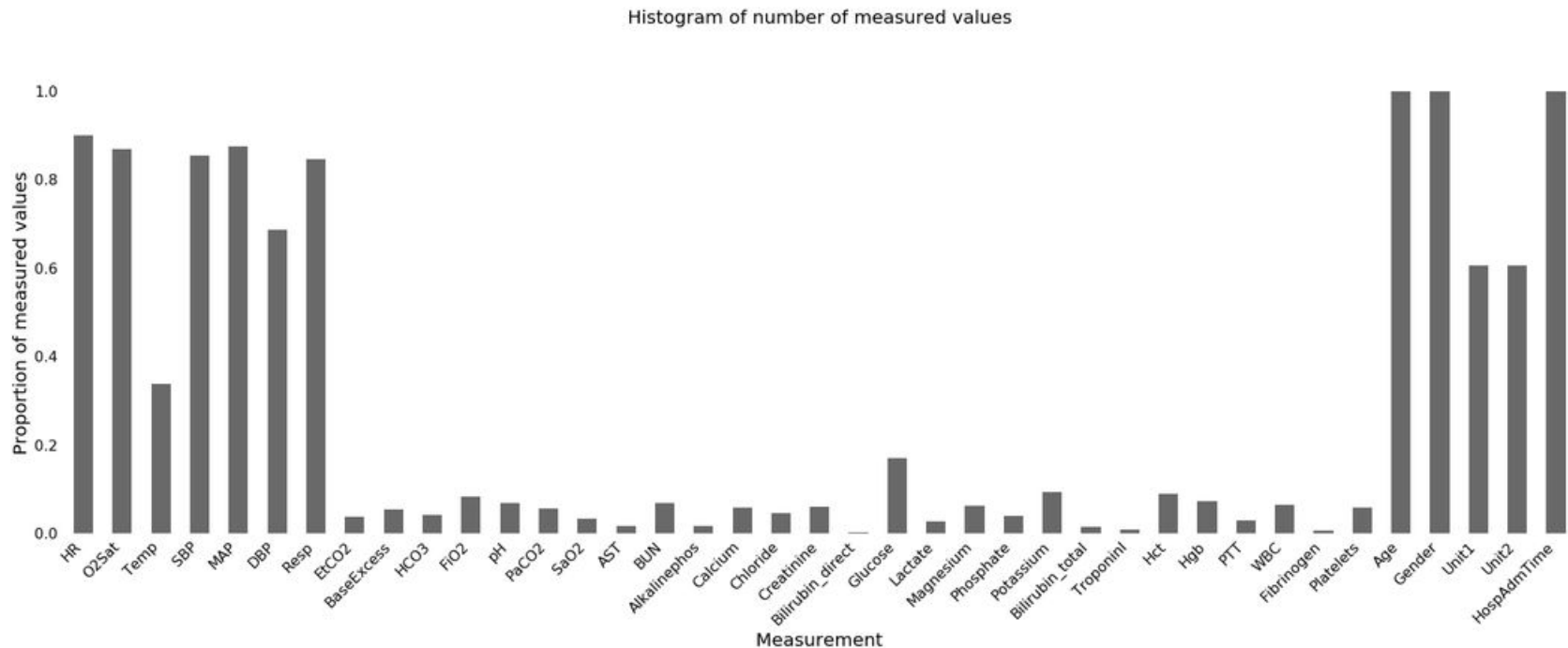
Training set contains “?”

Samples	1	5	?	23	?
	12	7	8	?	10
	5	4	12	20	12
	:				
	1	?	10	21	8
Features					

Missing Data

Example:

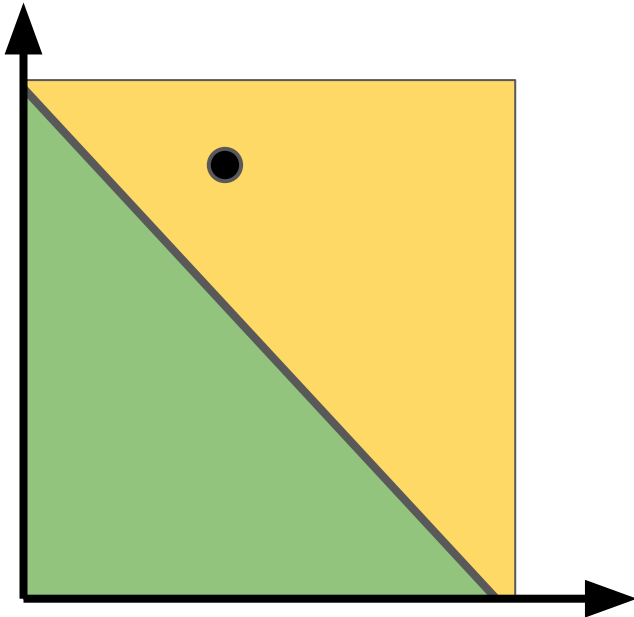
- Basic parameters & blood works of patients in ER



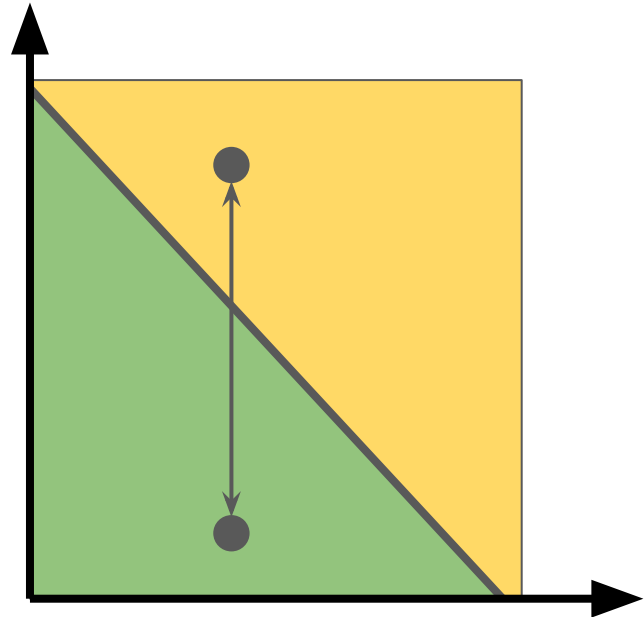
Missing Data

Why is that a problem?

Complete data - (10, 24)



Missing data - (10, ?)



Sources of Missing Data

- Missing completely at random
Random “mechanism” removes values
 - Patients miss ~5-10% of questions on the form, each person different ones
 - Measurement device is flaky and not all results are measured

Sources of Missing Data

- Missing completely at random
- Missing specific values

Hiding mechanism depends on actual value

- Overweight people often do not report their weight
- Only abnormal temperatures are recorded

Sources of Missing Data

- Missing completely at random
- Missing specific values
- Missing specific cases

Other aspects of the sample determine whether the value is observed

- Pathology report only when colonoscopy had positive findings

Sources of Missing Data

- Missing completely at random
- Missing specific values
- Missing specific cases
- Complex mechanism
 - Creatinine is typically measured for patients with potential kidney problems
 - Employees who fear their manager do not report their job satisfaction

Issues to consider

- Observed/missing status - is it informative?
 - Should we count it as another feature?
- Distribution of “missing values” - different than observed?
-

Approaches to Missing Data

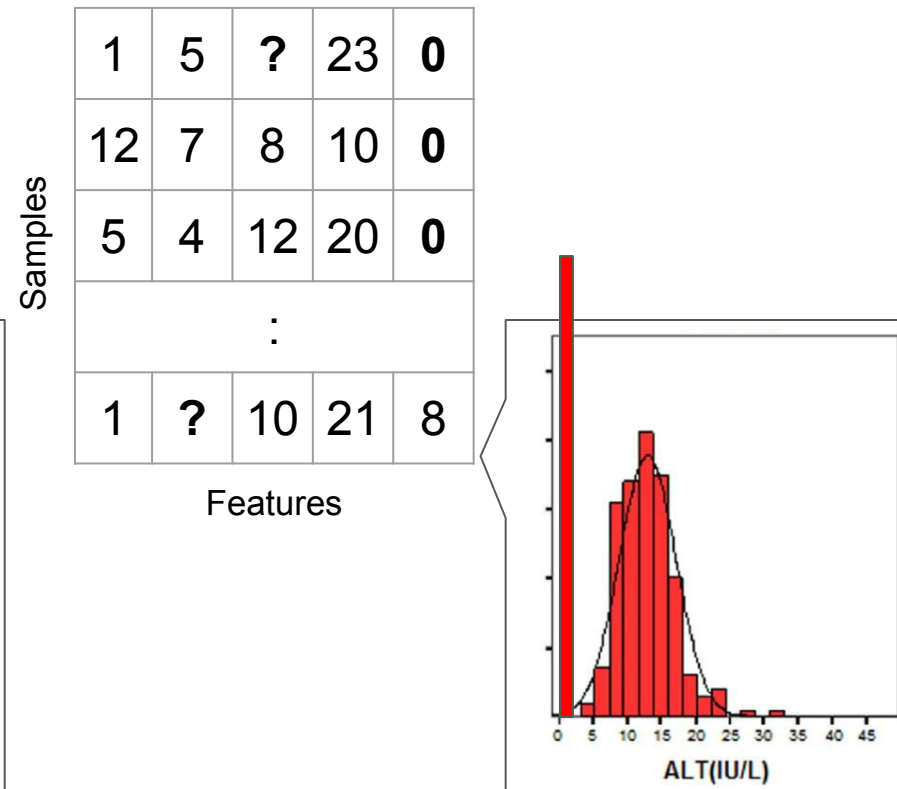
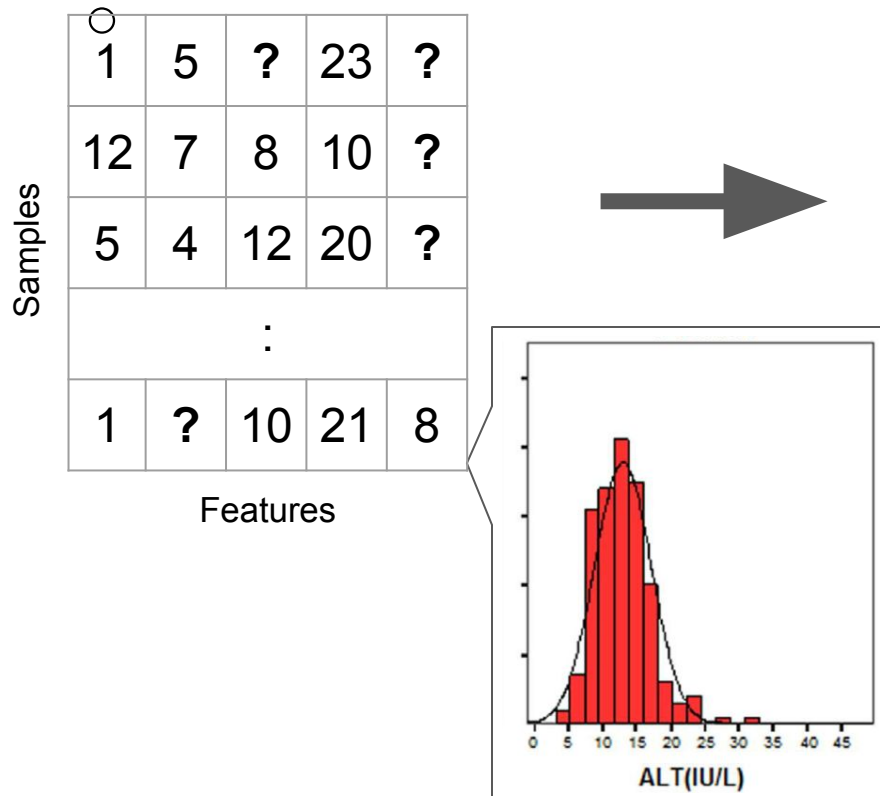
New value that stands for “missing” or “unknown”

- Enables reasoning about the implications of not observing the values
- Can complicate the learning procedure

Approaches to Missing Data

Special value: Danger of artifacts

- Missing weight value denoted as 0
- Mean / variance estimates are skewed
- Regression model treats it as another number



Approaches to Missing Data

Fill in missing values

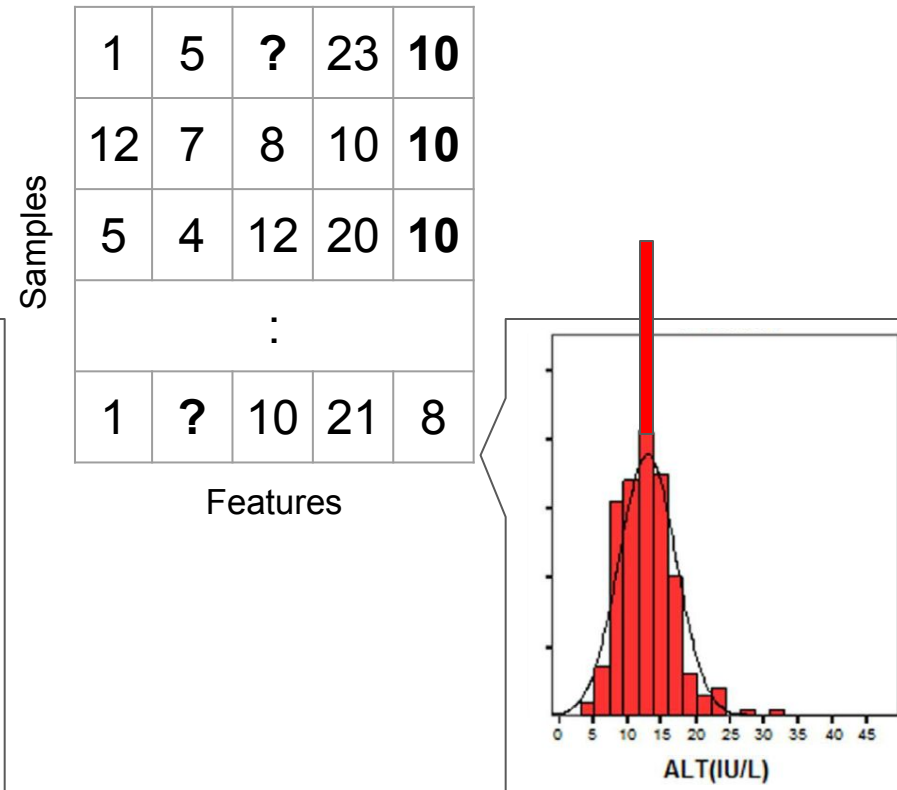
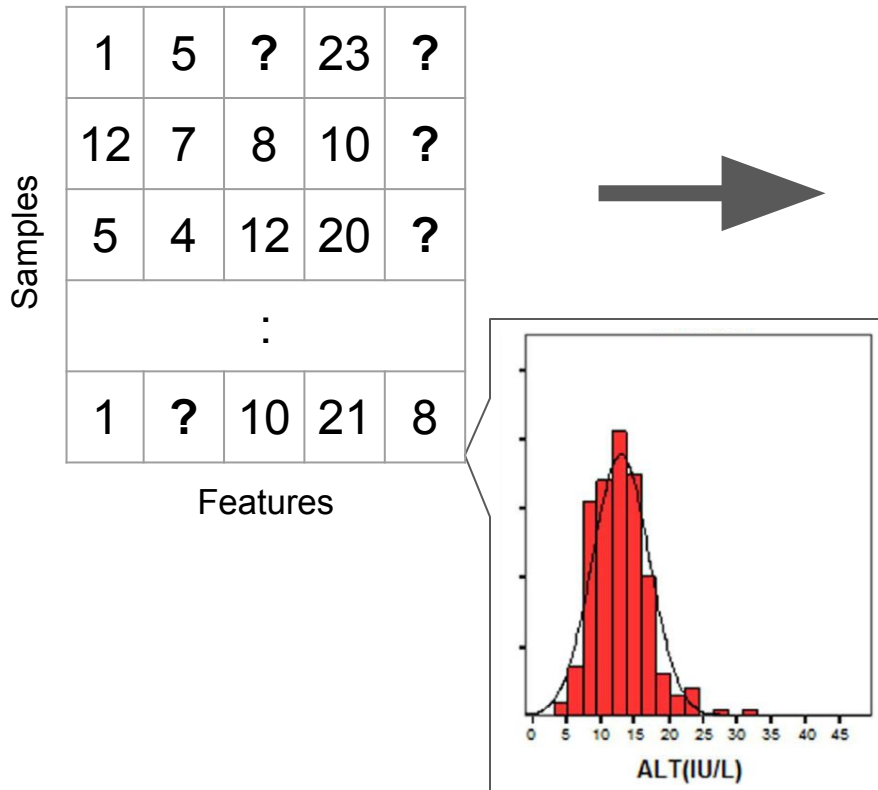
- Use existing algorithms and procedures
- “Shields” the learning procedure from missing data
- Ignores information in observed/missing status

Issue - what values to fill in?

Imputation - Fill in the blanks

Default value

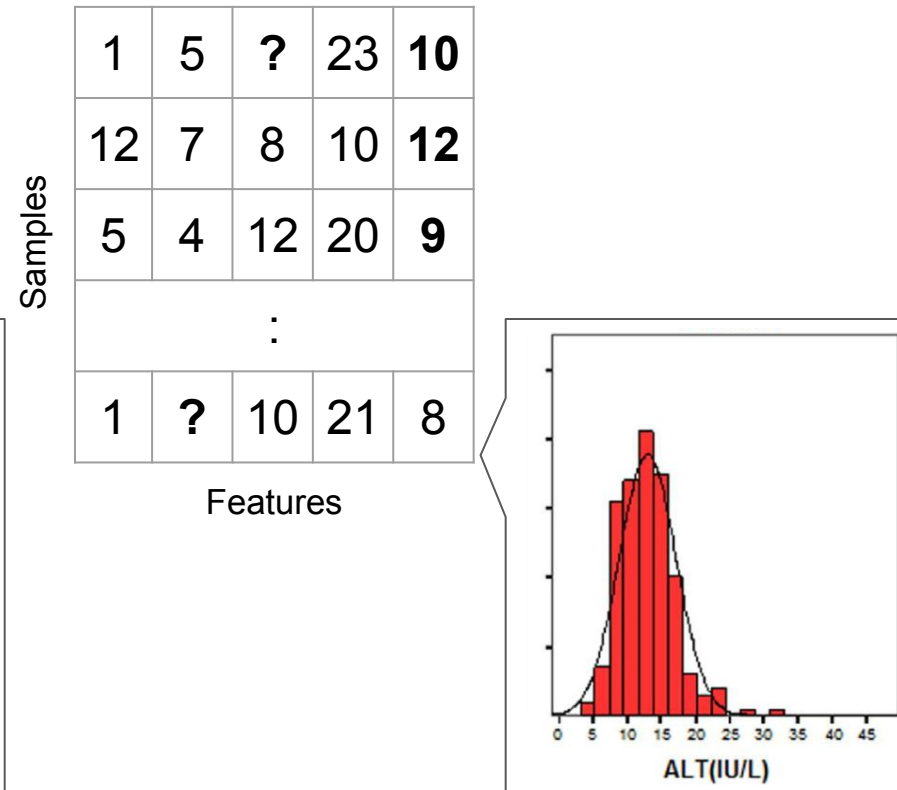
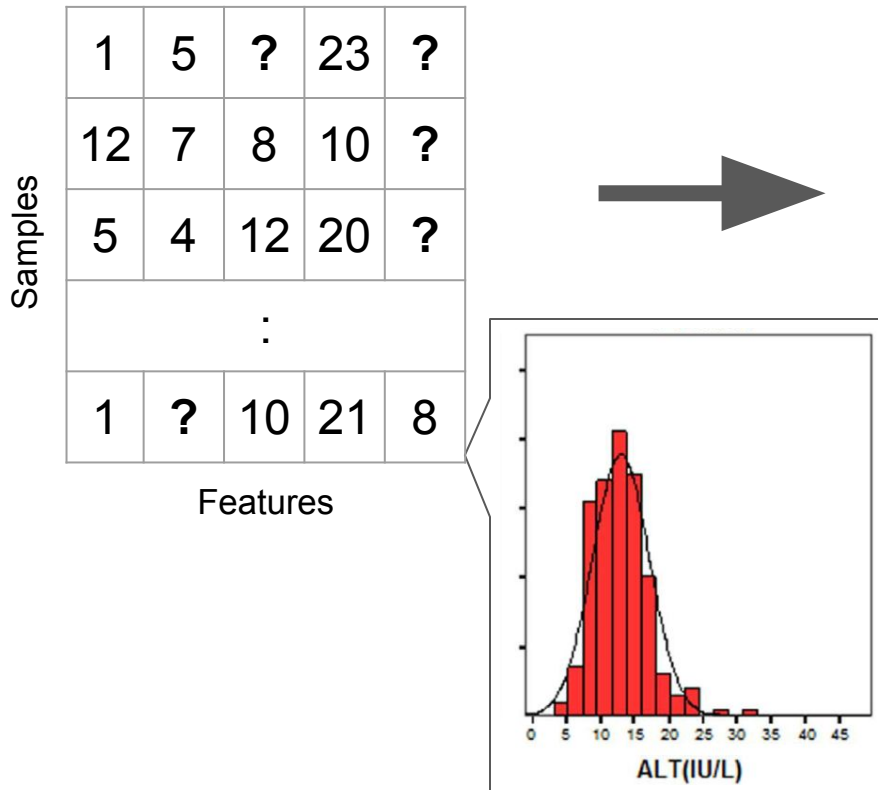
- Skews the distribution of values
- Underestimation of variance



Imputation - Fill in the blanks

Use randomization

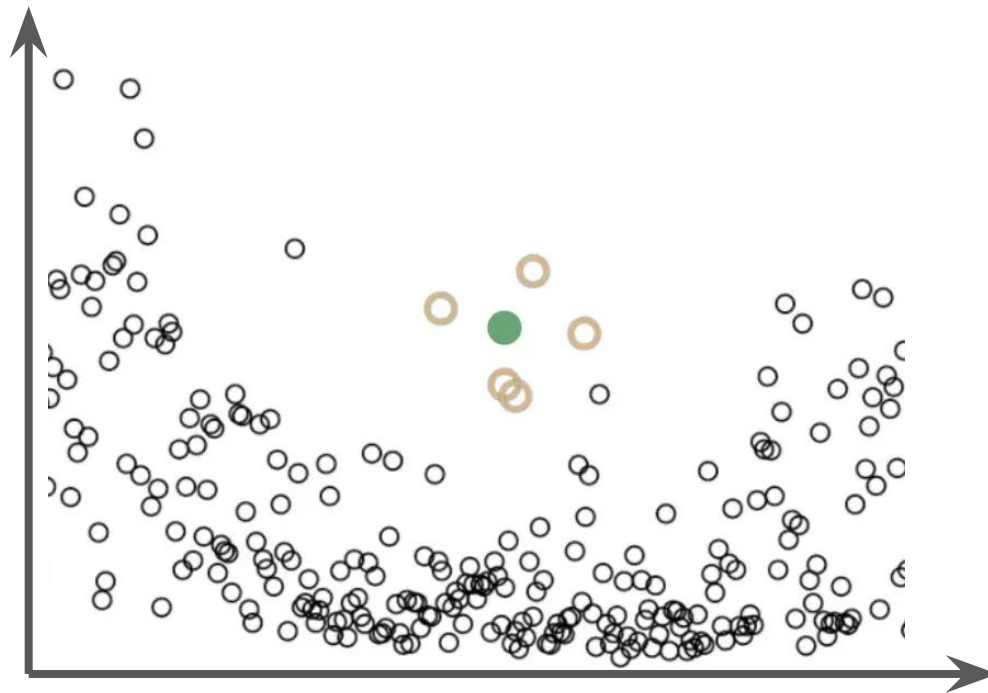
- Fixed distribution
- Empirical distribution



Imputation - Fill in the blanks

More advanced methods

- Classifier to predict based on other examples
- Use nearest neighbors to predict missing values



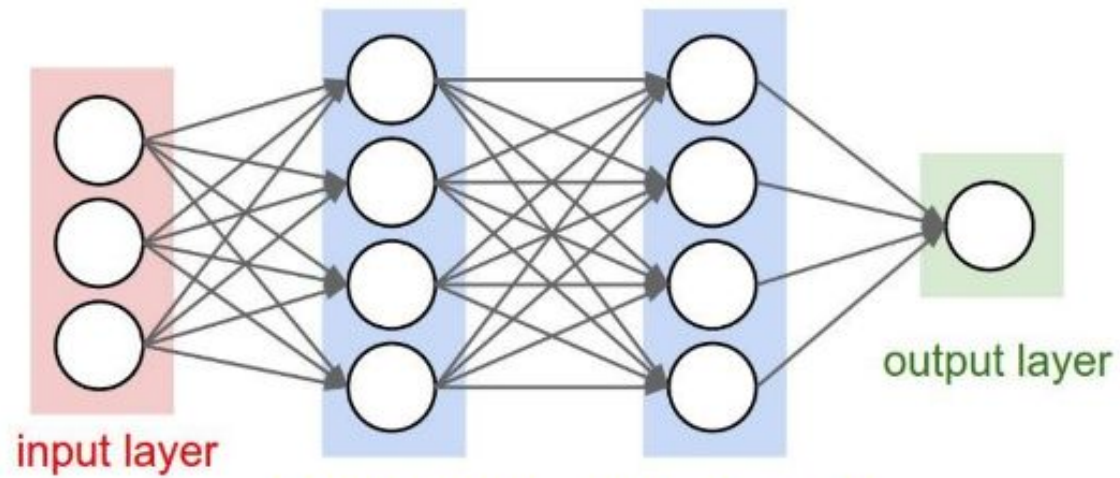
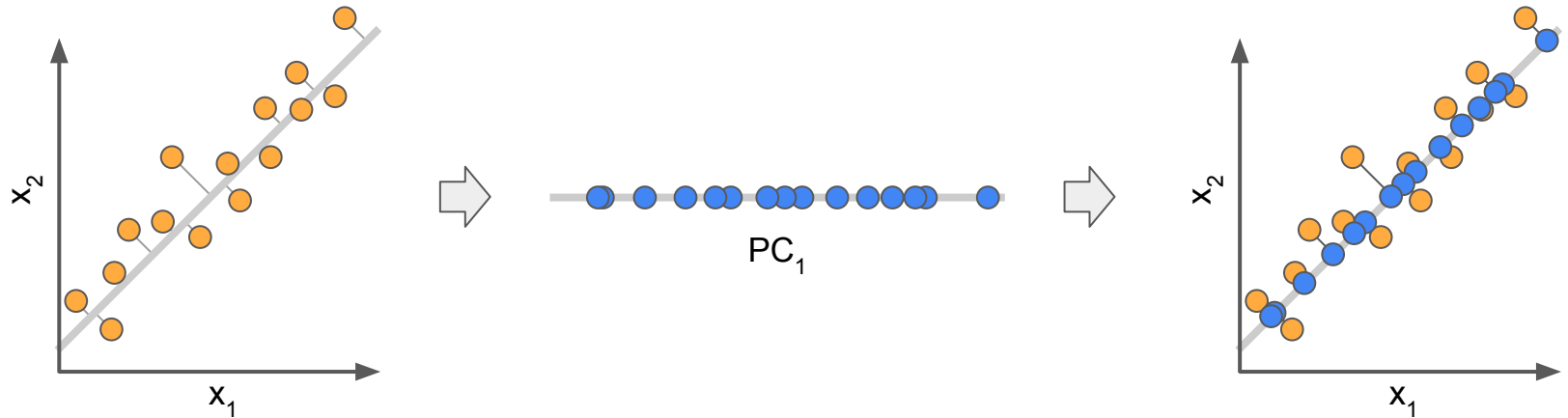
Skewed and imbalanced data

Remind the iid assumption (graphically)

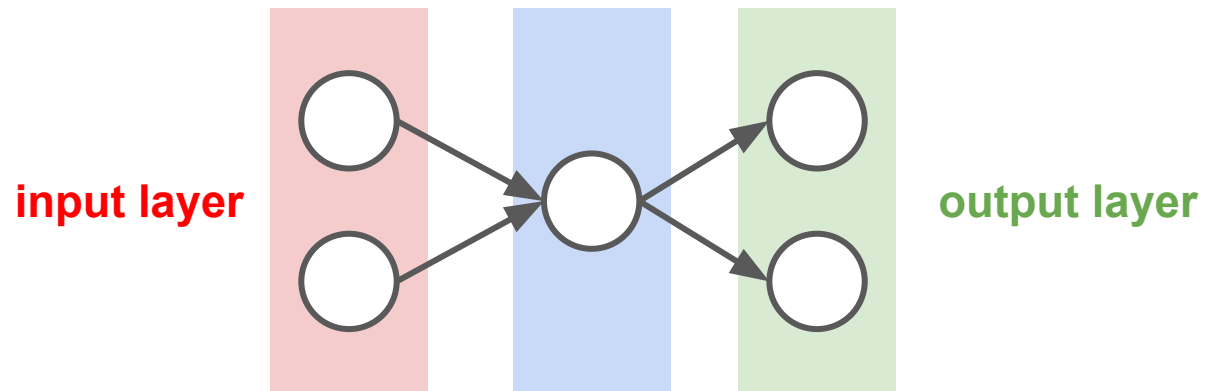
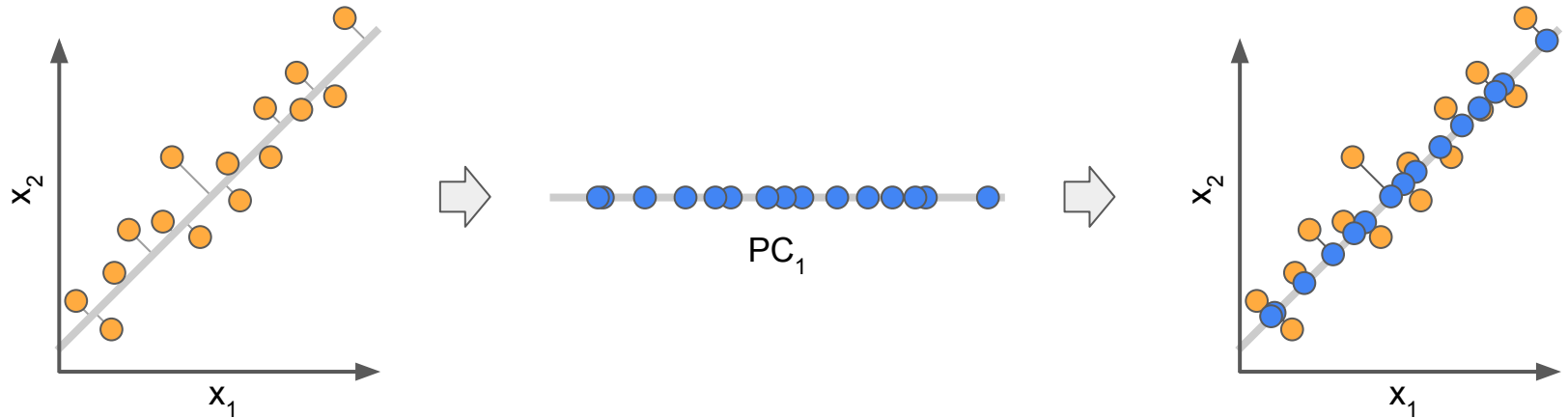
Situations where this might not hold:

- Skewed probability of classes (only 2% are positive)
→ increased representation of rare cases
- Distribution in training cohort differs from test cohort
- Not all samples are independent of each other

Remember PCA?

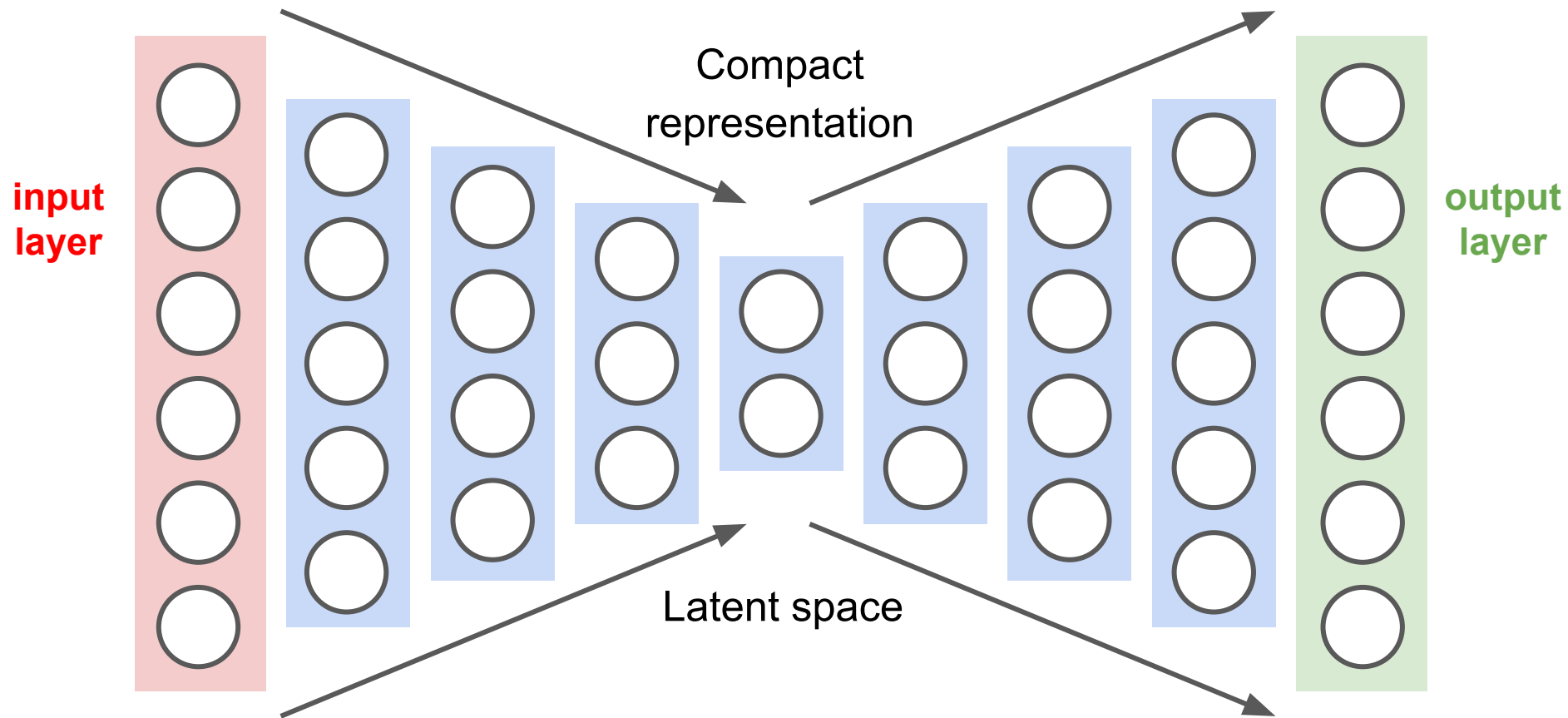


Remember PCA?



Auto-encoders

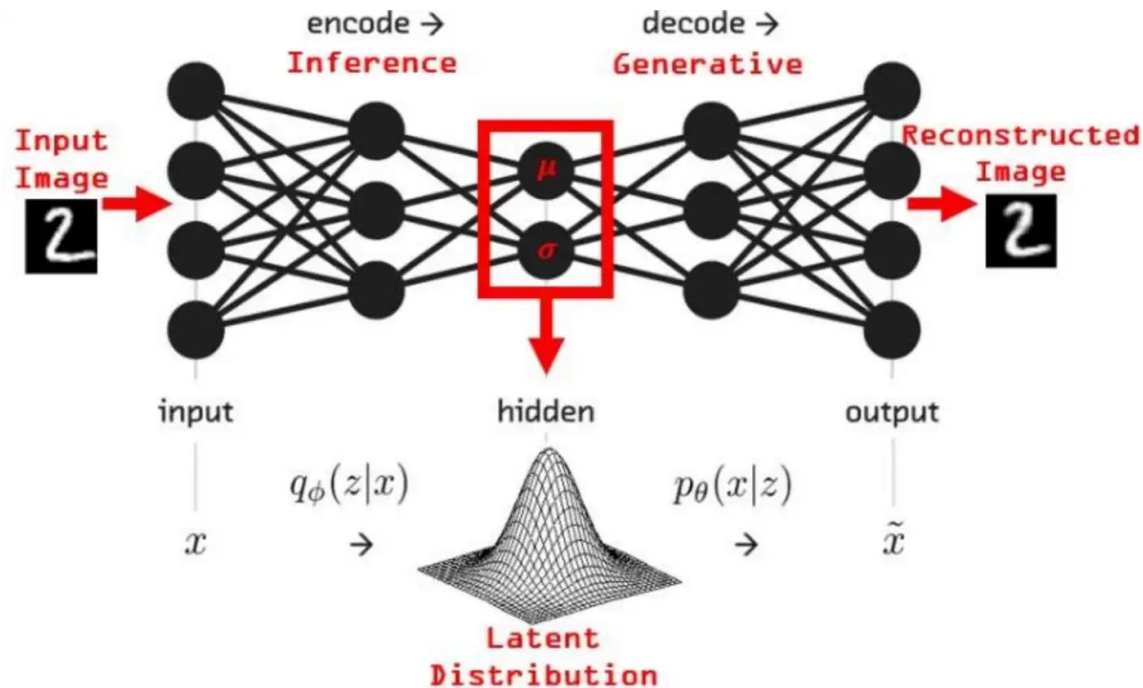
“Compress” data to lower dimension



then, “decompress” back to original dimension

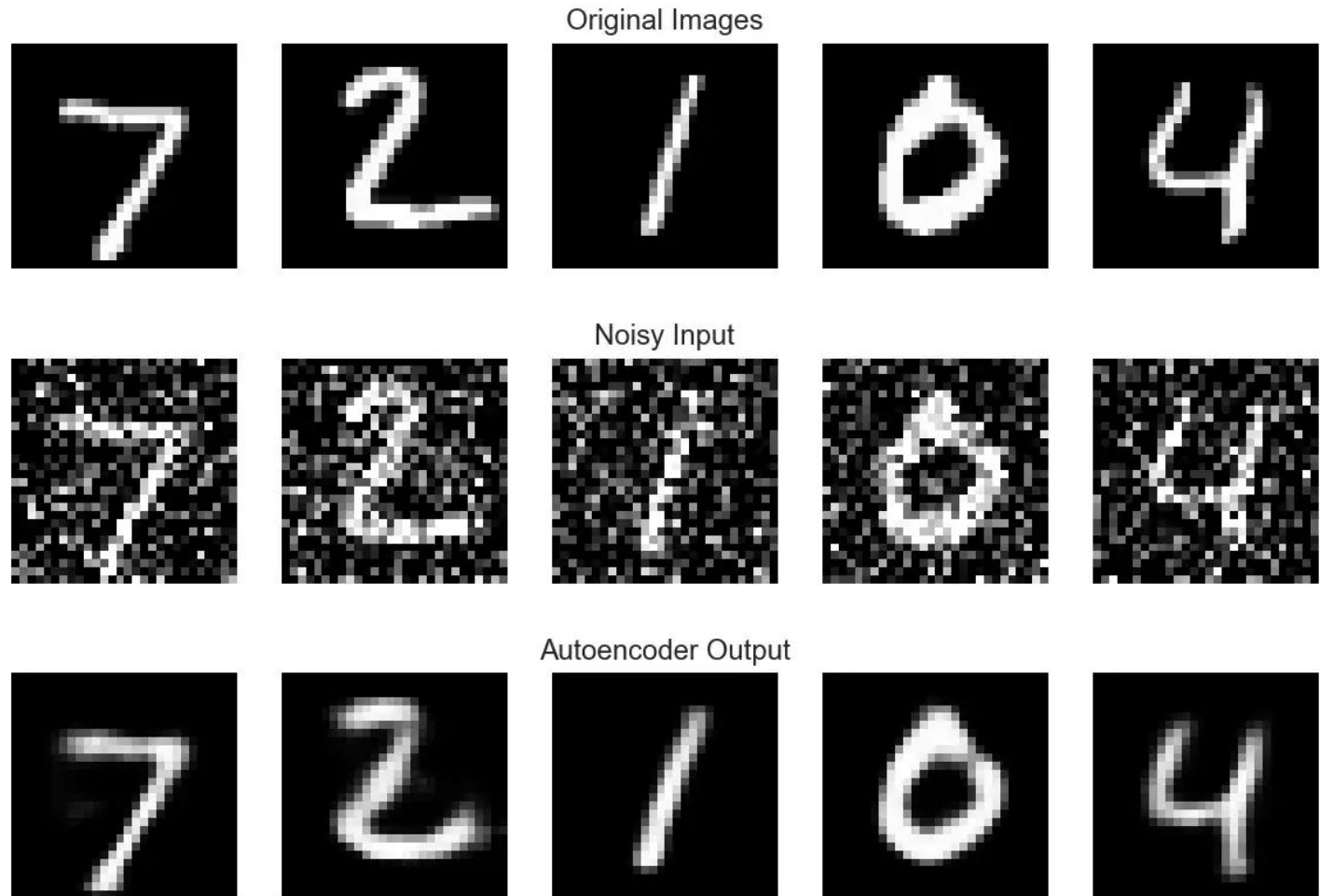
Why?

- Learn hidden dependencies or patterns in data
- Denoise



Why?

- Learn hidden dependencies or patterns in data
- Denoise



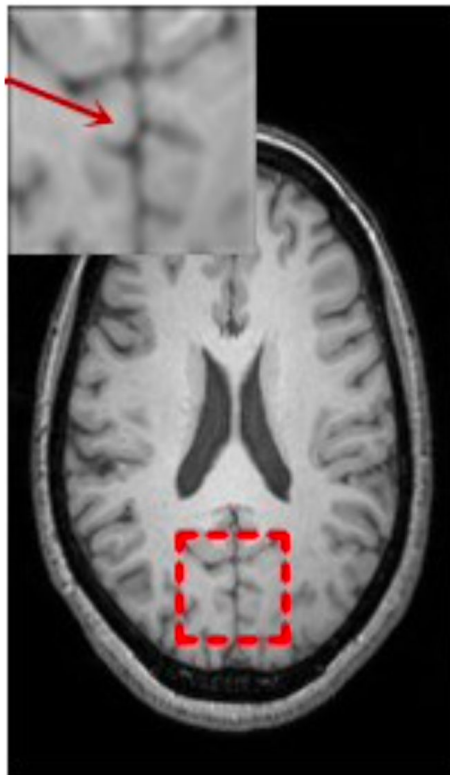
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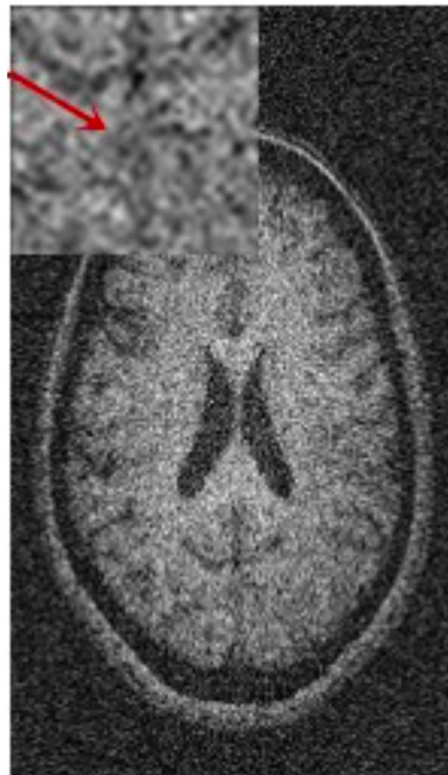
Denoising of 3D Magnetic Resonance Images Using a Residual Encoder-Decoder

Wasserstein Generative Adversarial Network

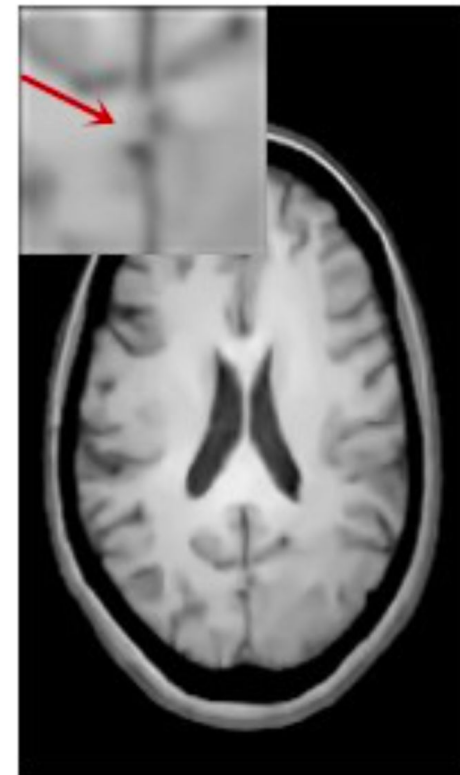
Maosong Ran¹, Jinrong Hu², Yang Chen^{3,4,5}, Hu Chen¹, Huaiqiang Sun⁶, Jiliu Zhou¹, Yi Zhang^{1,7,*}



(a)



(b)



(c)

Why?

- Learn hidden dependencies or patterns in data
- Denoise
- Impute

Extracting and Composing Robust Features with
Denoising Autoencoders

Pascal Vincent, Hugo Larochelle, Yoshua Bengio, Pierre-Antoine Manzagol

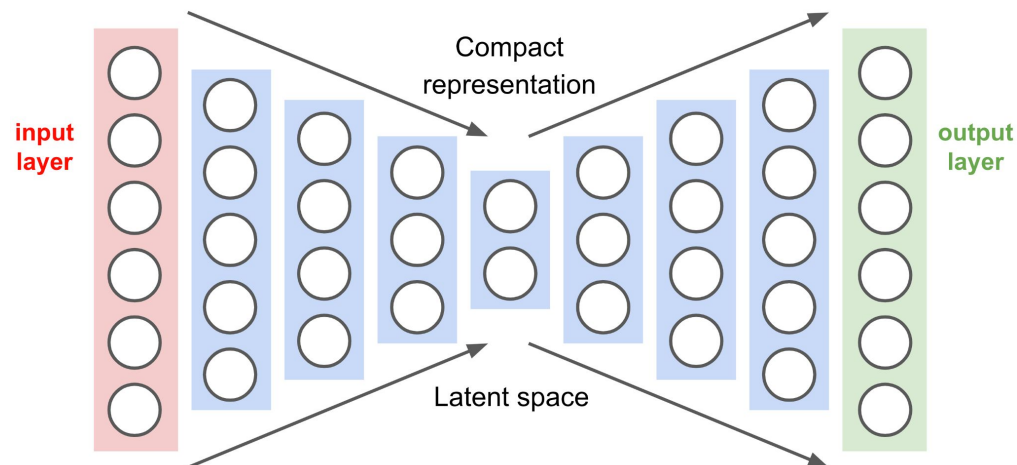
MISSING DATA IMPUTATION IN THE ELECTRONIC HEALTH RECORD USING DEEPLY LEARNED AUTOENCODERS*

BRETT K. BEAULIEU-JONES

*Genomics and Computational Biology Graduate Group, Computational Genetics Lab, Institute for Biomedical Informatics, Perelman School of Medicine, University of Pennsylvania, 3700 Hamilton Walk, Philadelphia PA, 19104
Email: brettbe@med.upenn.edu*

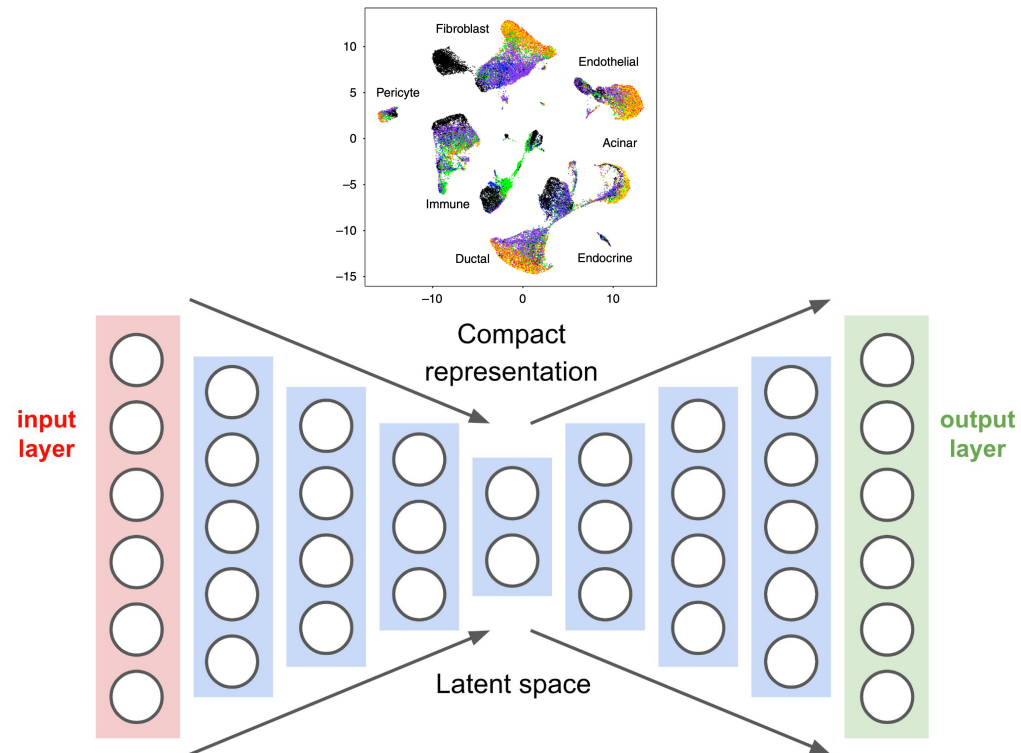
JASON H. MOORE

*Computational Genetics Lab, Institute for Biomedical Informatics, University of Pennsylvania, 3700 Hamilton Walk, Philadelphia PA, 19104
Email: jhmoore@exchange.upenn.edu*



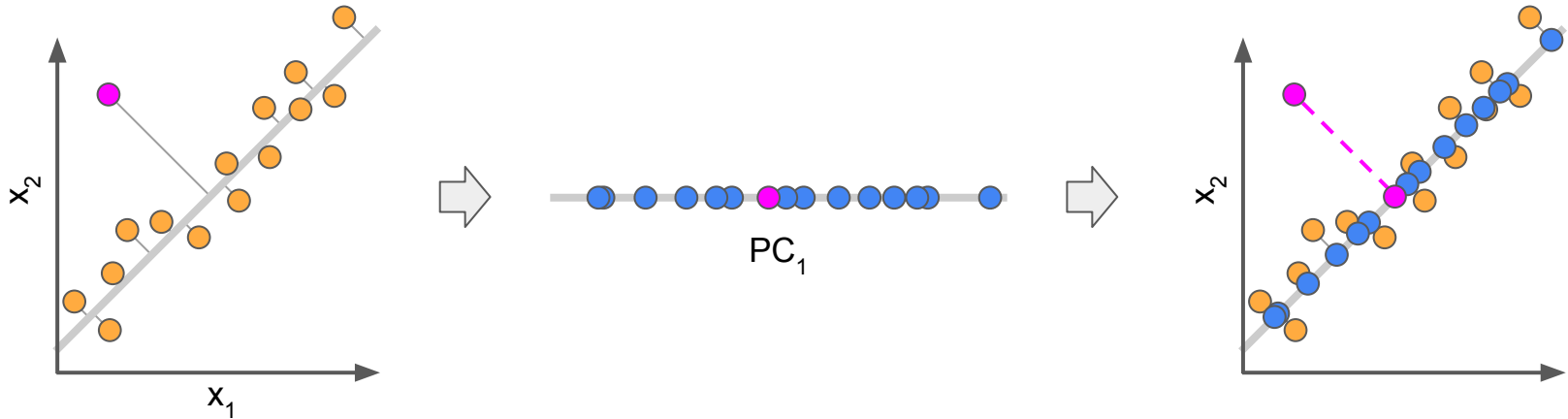
Why?

- Learn hidden dependencies or patterns in data
- Denoise
- Impute
- Visualize / cluster data in latent space



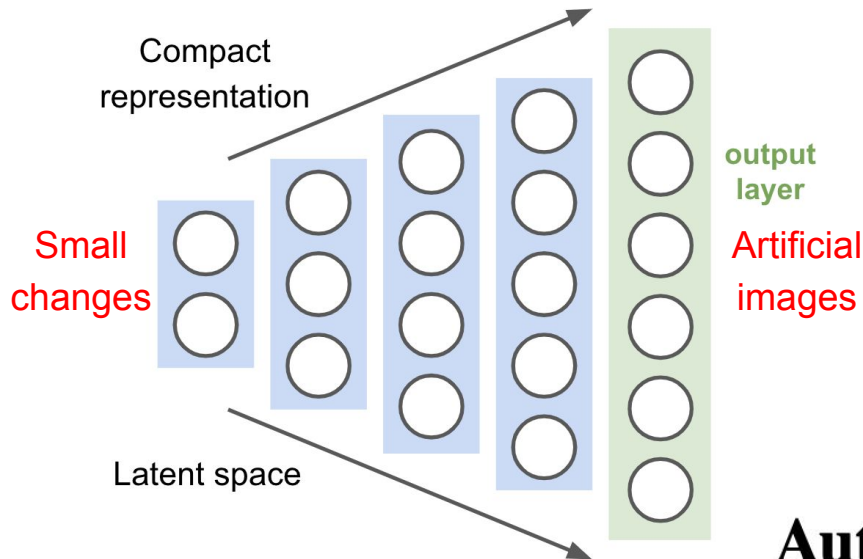
Why?

- Learn hidden dependencies or patterns in data
- Denoise
- Impute
- Visualize / cluster data in latent space
- Anomaly detection (= reconstruction failures)



Why?

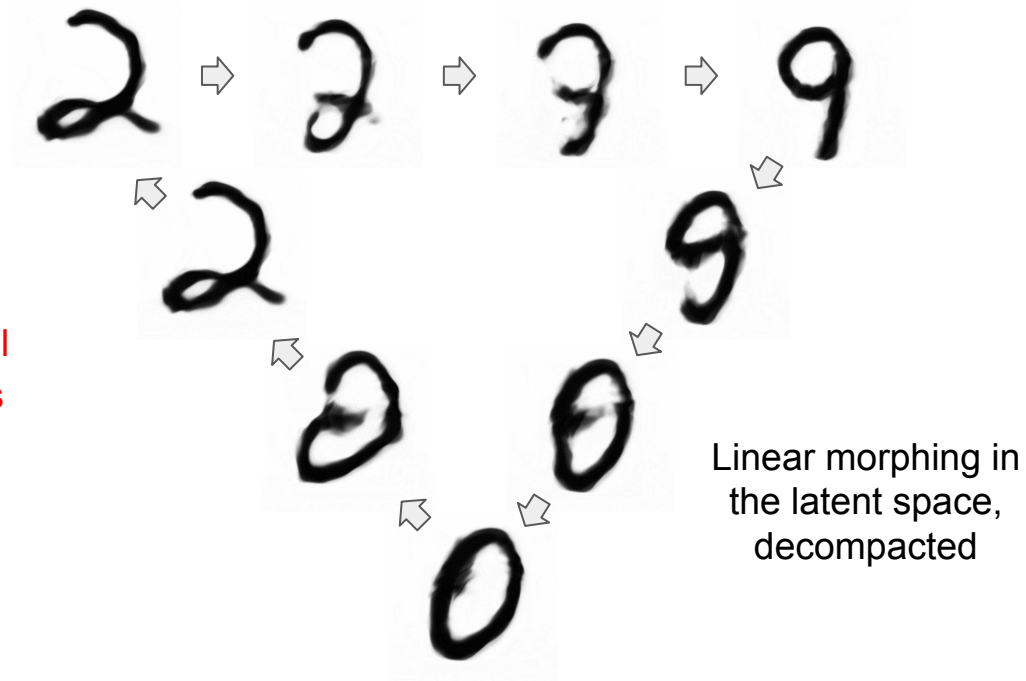
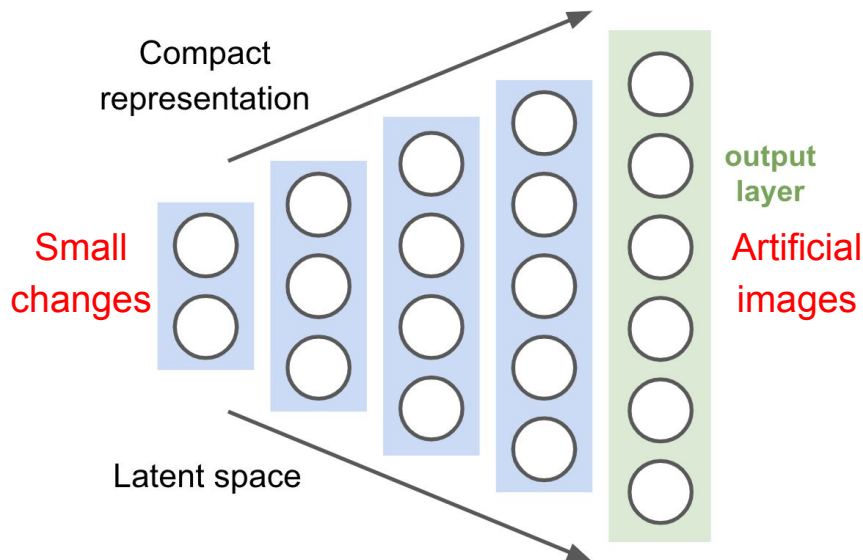
- Learn hidden dependencies
- Denoise
- Impute
- Visualize / cluster data in latent space
- Anomaly detection (= reconstruction error)
- Data generation



(b) VAE generated MNIST images.

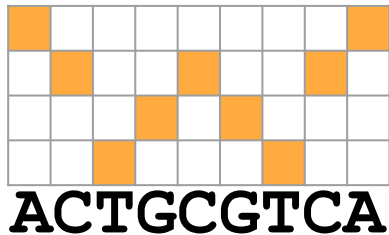
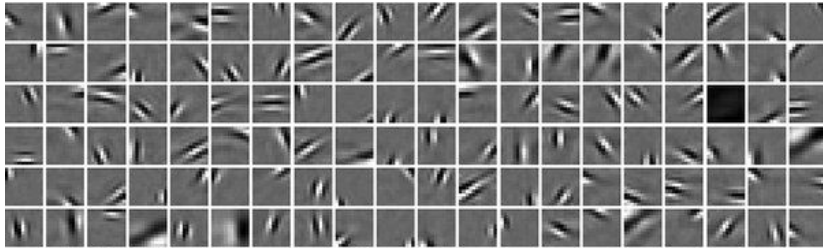
Why?

- Learn hidden dependencies or patterns in data
- Denoise
- Impute
- Visualize / cluster data in latent space
- Anomaly detection (= reconstruction failures)
- Data generation



Transfer learning

- Re-use parts of a trained network
(e.g., early filters/features)



Transfusion: Understanding Transfer Learning for Medical Imaging

Maithra Raghu*
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Samy Bengio†
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Manual modeling

Features
intensity, texture
shape, location

MANUAL

Relations
Boundary
differences, ...

MANUAL

Machine learning

Features
intensity, texture
shape, location

MANUAL

Relations
Derived by
regression, SVM, ...

AUTOM

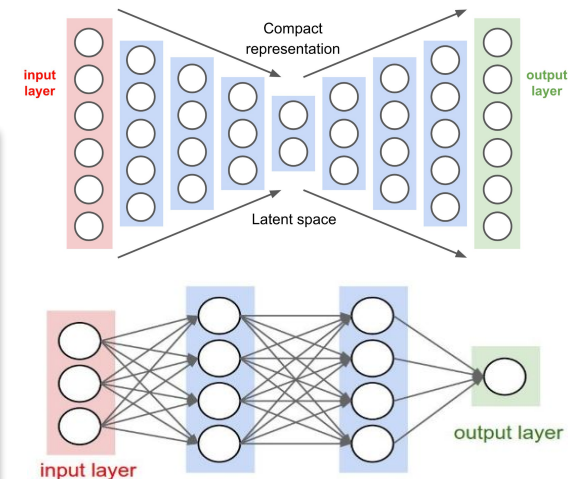
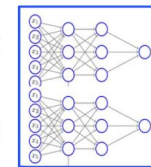
Deep learning

Features
Derived from data
Implicit

AUTOM

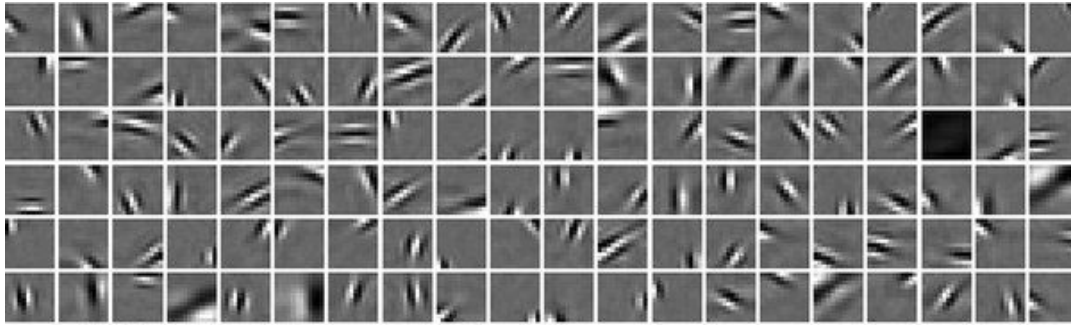
Relations
Derived from data
Implicit

AUTOM



Transfer learning

- Re-use parts of a pre-trained network
(early filters = basic visual features)



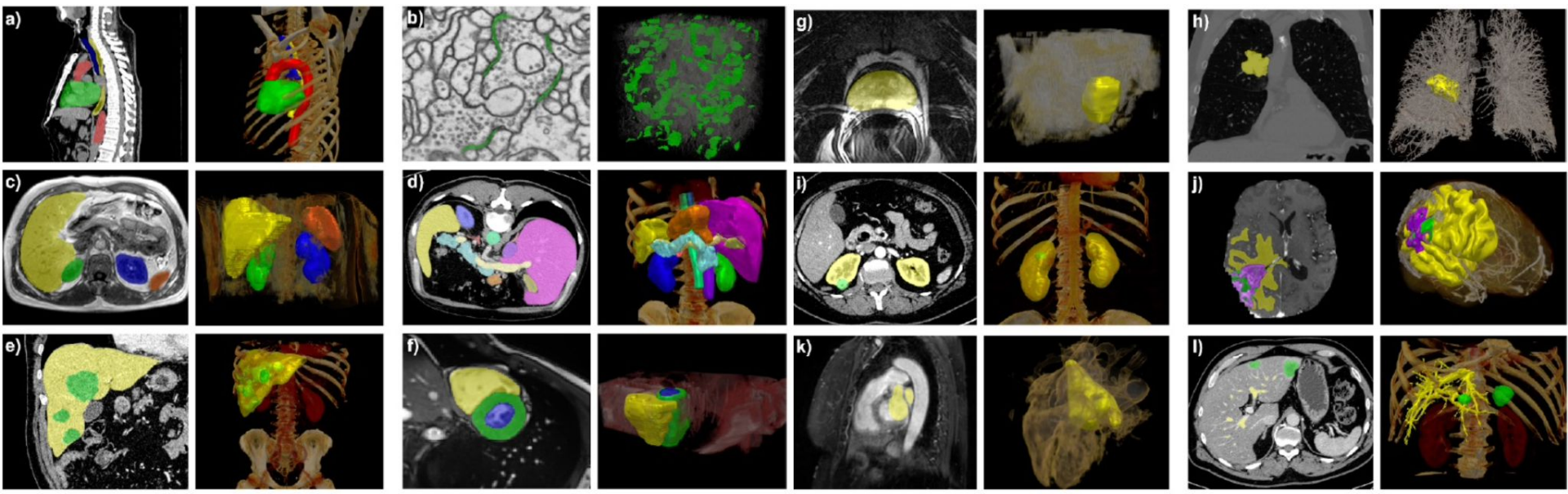
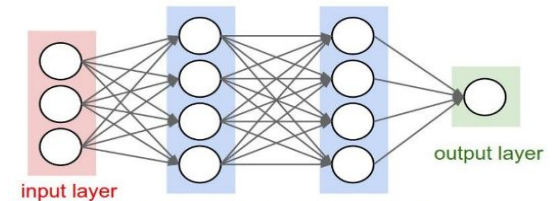
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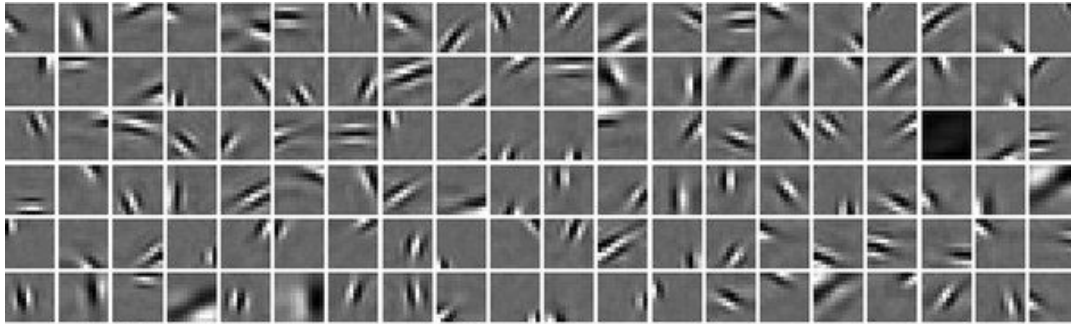
Jon Kleinberg†
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Samy Bengio†
Google Brain
bengio@google.com



Transfer learning

- Re-use parts of a pre-trained network
(early filters = basic visual features)



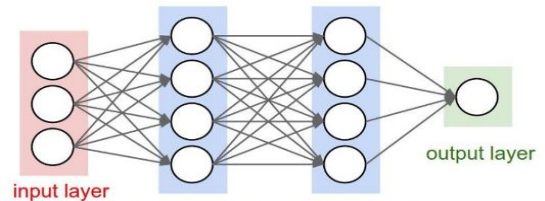
Transfusion: Understanding Transfer Learning for Medical Imaging

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“Vanilla”
images

Manual modeling



Features
intensity, texture
shape, location

MANUAL



Relations
Boundary
differences, ...

MANUAL

Machine learning

Features
intensity, texture
shape, location

MANUAL

Relations
Derived by
regression, SVM, ...

AUTOM

Deep learning

Features
Derived from data
Implicit

AUTOM

Relations
Derived from data
Implicit

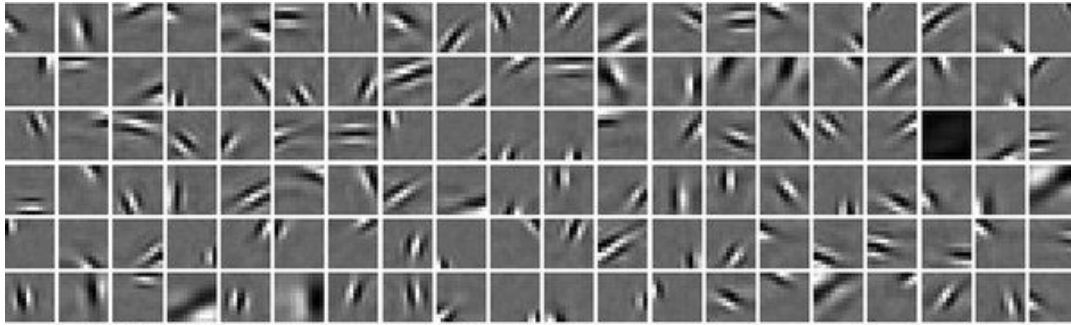
AUTOM

Medical
images



Transfer learning

- Re-use parts of a pre-trained network
(early filters = basic visual features)



Narrow AI – long time and high costs!

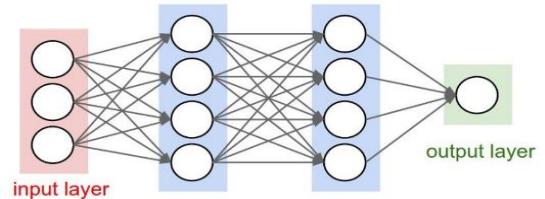
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images

Slide: K Dreyer

Specialty	AI USE CASES IN DIAGNOSTICS							Modality	Findings
	COMPUTED TOMOGRAPHY	MAGNETIC RESONANCE	POSITRON EMISSION	RADIOGRAPHY	ANGIOGRAPHY	ULTRASOUND	FLUOROSCOPY		
ABDOMINAL IMAGING									FINDINGS
BREAST IMAGING						tumors			FINDINGS
CARDIAC IMAGING									FINDINGS
EMERGENCY IMAGING				pneumonia					FINDINGS
MUSCULOSKELETAL									FINDINGS
NEURORADIOLOGY									FINDINGS
NUCLEAR MEDICINE									FINDINGS
PEDIATRIC IMAGING									FINDINGS
THORACIC IMAGING									FINDINGS
INTERVENTIONAL									FINDINGS

ANATOMY ANATOMY ANATOMY ANATOMY ANATOMY ANATOMY ANATOMY

Not cost-effective for the vast majority of common conditions!

learning

Deep learning

MANUAL
Texture
ation

AUTOM
s
by
VM,...

Features
Derived from data
Implicit

Relations
Derived from data
Implicit

AUTOM

AUTOM

Medical
images

What have we learned?

- Convolutional neural networks
- Missing data
- Imputation
- Auto-encoders
- Learning latent representations
- Multiple uses of latent representations
- Transfer learning

Medical AI idea competition

- Medical need
- Impact on individual
- Population size
- Machine Learning technique
- How will you get the data for the project?
- Similar works (and how are you different?)
- Supplementary material
- Team members
- Top projects to be presented in the last lesson

Syllabus

1. Introduction
2. Classification
3. Learning 1
4. AI in ophthalmology (Prof. Itay Chowers)
5. Learning 2
6. Regression
7. Clustering
8. Visualization (and dimensionality reduction)
9. Deep learning in image analysis (Prof. Leo Joskowicz)
10. Missing data, statistical dependencies
11. Decisions (utility)
12. Natural language in medicine (Dr. Gabi Stanovsky)
13. Longitudinal Data / Projects