

GENERATION AND USE OF ONE ONTOLOGY FOR INTELLIGENT INFORMATION RETRIEVAL FROM ELECTRONIC RECORD HISTORIES

Miguel A. Prados de Reyes, M. Carmen Peña Yañez, M. Amparo Vila Miranda,
M. Belen Prados Suarez

Computer Science and A.I. Department. University of Granada, Computer Science Department. San Cecilio Hospital, Granada, Computer Science and A.I. Department. University of Granada, Computer Science Department. University of Jaen

Keywords: Information Retrieval System, Semantic Information, Semantic Organization, Ontology, Electronic Healthcare Record.

Abstract: This paper analyzes the terminology used in the diagnosis, treatment, exploration, and operation descriptions entered by doctors in the electronic healthcare record. From this, expression stability (and the use of a sufficiently limited and controlled language) is shown, which is therefore reasonably valid for a conceptualization process to be employed on it. This conceptualization process is performed by the generation of an ontology which proposes semantic classes according to the different medical concepts to be used on database query profiles. By way of summary, we shall propose a semantic organizational method so that classes, attributes and properties in the ontology may act as links between the database and the users, both in information incorporation processes and in queries. It offers a wide range of benefits by extending and making information management possibilities more flexible, and enabling the application of traditional data mining techniques.

1 INTRODUCTION, STARTING HYPOTESYS

Existing Medical Information Retrieval Systems (MIRS) present certain problems and drawbacks as they usually require deterministic query profiles which use structured data sets that do not always meet the real requirements of the staff accessing the medical information database (Prados, 2003). This is why documentary searches are not very thorough and have a lot of noise (Noy, 2003). In the majority of cases, the most interesting medical information is to be found in the doctor's own notes, but queries on these are not always successful as the information is unstructured and there are the usual problems of natural language and its formalization.

An observation of the expressions describing diagnoses, treatments, interventions and explorations reveals the following characteristics: They are short; They contain the most relevant medical aspects; They are repetitive and have a limited language.

These characteristics suggest that it is possible to analyze the terminology used, the composition and the structure of these phrases in greater depth,

thereby demonstrating that: its terminological domain is limited; the conceptual domain is sufficiently strict and categorized; phrase composition and structure is stable.

This leads us to approach the generation of an ontology by establishing a conceptualization based on an in-depth analysis of the language and the terms used, and this can be used in the data capture and information retrieval process. The ontology must be constructed in such a way that it can characterize the diverse semantic contents that an expression entails.

2 BACKGROUND

The background deals with two closely related topics. Traditional "documentary techniques" generate an entire set of techniques and tools in their digital management which is the object of documentary computer science (Maniez, 1992).

Nowadays, there is a wider opinion about the problem which is based on so-called "Text Mining" (TM), specially motivated by interest in the "seman-

tic web". Like the data mining definition, text mining may be defined as: "The entire process of extracting relevant information that is not explicitly present in a document collection". There is a clear distinction between this and documentary computer science, which only attempts to show explicitly present concepts (Delgado, 2002).

In text mining, it should be remembered that we are dealing with information which is not particularly structured, and therefore traditional data mining techniques cannot be applied. This lack of structure is the biggest problem for TMs and requires the texts to be preprocessed and converted into an "intermediate form" so that the algorithms and methods (classification, association, etc.) being used may be applied to them.

Current study of ontologies and their design and development tools (Lambrix, 2003) has produced new methods and techniques, but mainly a wider, more ambitious vision in textual data processing, since they make action possible on previously conceptualized domains. This is particularly interesting as here there is an intermediate element that can be used as a link between the "gross" textual information and its preprocessing and subsequent treatment using usual data mining techniques. More specifically, the ontology is particularly important in information retrieval systems since they provide the connection between final user applications and databases and, contrariwise, in visualization processes (Guarino, 1998).

In short, it is clear that this is an interdisciplinary field which includes elements, methods and techniques from documentary computer science, linguistics, and data mining, with their contributions relating to information retrieval, information extraction, clustering, categorization and automatic learning (among others) (Prados, 2004).

3 WORK DESCRIPTION

The basic idea behind this work is that the medical language used in diagnostic expressions and determinations (based on natural language) is sufficiently controlled and strict with an adequately formal grammar as to be worth using in data processing and documentary searches which could be applied directly on the medical language without the need for code systems. This would make documentary searches more powerful by enabling descriptive and qualifying aspects to be included in the pathology or treatment, and not merely unqualified searches on the diagnosis (Shankar, 2002). A diagnostic expression comprises terms with a semantic content which are relevant for diagnosis. It is first necessary to

analyze the semantic typology of these terms and to establishing the different classes to which a lexical unit can belong.

Our aim in this paper is to show that this is possible. In order to do so, we have considered four classes of term sets: identifiers, locators, qualifiers, and etiologicals. From this first semantic structure, we can extract an ontology which conceptually describes the domain of the medical diagnosis, and propose a methodology for information storage and retrieval, extending the restrictive possibilities of traditional searches on the electronic healthcare record using the defined ontology.

Our first objective is to define what we call the "*semantic classes*", each of which represents a kind of concept used by doctors in their descriptions. Our second objective is to check that the medical expressions in natural language are in keeping with the element coordination of each semantic class. Our third objective is to confirm the hypothesis that the constituent elements of each semantic class represent a perfectly determinable and controllable set. A class may have superclasses which offer a medical meaning membership from one given concept to another with a more general meaning (Dameron, 2004).

We also define what we call the "*semantic class sequence*" (SCS) as the sequence obtained in the identification of the semantic classes from an expression, and their sequence of presentation. By way of example, the SCS "I-E-L" means "*identifier-etiological-locator*". Although the purpose of these SCSs is to check stability in expression composition, they will also be useful in both the data acquisition process and the documentary search process from the data structures of the semantic classes.

The system is enriched by extracting the corresponding ontology (ONTOARCHINET), its hierarchies and properties, with it having a welldefined conceptual environment and making its use available for the documentary search.

We shall also discuss whether this proposal is worthwhile and if it is possible to construct a set of data structures representing the members of each semantic class and their properties (associations, frequency, medical environment, etc.) so that under the analyzed (cleaned and filtered) documentary search, the SCS can be recognized. Its components are then extracted in order to perform the search, focusing or extending it according to the semantic components in the ontology.

4 PREVIOUS MEDICAL TERMINOLOGY RESULTS: EXAMPLE OF CARDIOLOGY

A search was performed on our electronic healthcare record system (relating to admissions between 2000 and 2004) for medical records listing cardiology in their documentary profile. The number total of expressions found in the period of time is, 433.492; Related to cardiology 39.781; and syntactically different 1.656.

Two expressions are considered syntactically different when there is some variability in the terms they comprise or in their order. At this point, we should introduce the concept of "medically different expressions". By syntactically grouping different expressions according to this criteria, we obtain 627 medically different expressions. On examination of the results obtained, we find that the number of high frequency expressions is greatly reduced, and that the frequencies of the others are less relevant. This suggests that the language is unified to a large extent.

In order to provide our system with a value representing the differentiation degree of expressions, we define an index (which we call the "*diversification index*") as the quotient between the number of syntactically different expressions and the number of different medical expressions. By analyzing the results, we can extract the following fundamental considerations:

The number of medically different expressions does not obviously differ from the number of syntactically different expressions. This confirms the previously indicated language unification.

As the number of expressions increases, diversification tends to decrease or to stabilize. This suggests that the system is stable: if we increase the size of the study period, the obtained results regarding differentiation would not be significantly different from the ones presented here.

In the second stage, the semantic composition of the expressions is analyzed by studying the terms comprising them. This analysis suggests the existence of a small number of the following specific semantic categories:

Identifiers: Description terms with maximum rank within the expression, absence of which determines its lack of logical sense. Such a descriptor necessarily refers to a pathological process, operation or exploration.

Qualifiers: Secondary terms that specify the meaning of the identifier. On their own, they have no clinical meaning but they indicate a medical qualification: "serious", "acute", "spontaneous", etc. These qualifiers can, in turn, have different typolo-

gies such as those qualifying severity, time, compensation or location.

Etiologicals: Terms representing the origin or causes of the pathological process (when it exists). Some examples we can mention are accidental poisoning, infections or age, and these appear in the main diagnosis as the cause.

Locators: These represent the anatomical place of the human organism where the damage or injury appears and the identifier takes place (such as auricle, ventricle, or myocardium, etc. for the specialty that this work focuses on).

The number of descriptors found for each category is: 115 for identifiers, 167 for qualifiers, 29 for etiologiclas, and 95 for locators.

The vocabulary is clearly small enough for data management not to be excessively difficult. Although we have considered the possibility of ignoring very low frequency descriptors, we do not believe this to be appropriate since there are pathologies with a very low frequency but with a very high medical interest. In addition, a kernel of high frequency members can be seen, with a considerably different frequency regarding the classes outside this kernel. The border comprises a much reduced number of members.

5 "ONTOARCHINET" ONTOLOGY EXTRACTION

According to the terminological study undertaken, it is necessary to establish which the classes of the ontology and their possible hierarchizations are in accordance with the generality character. For this purpose, utility character must prevail in order to offer access to the information depending on the elements in each class and their possible priorities. The ontology focuses on documentary search using the concepts contained in the free-text diagnosis descriptions used by doctors.

The stages of the ontology construction process are: Determination of domain and scope; Definition of domain concepts (classes); Hierarchical classification of concepts (subclasses–superclasses hierarchy) Definition of class properties (slots) and their value restrictions; Definition of instances, according to the defined properties.

5.1 Scope and Domain Determination

As seen before, the domain is limited to diagnosis expressions: summary representations relating to a diagnosis, treatment, operation or exploration de-

terminated by doctors involved in a health care process (consultation, clinical admission, urgent assistance, etc.). There may be several expressions within any process. The domain of this ontology reaches expressions such as "aborted myocardial infarction" or "previous acute extensive myocardial infarction". Several queries may be done in this field like:

- Could we determine the characteristics for a given identifier?
- Is a given descriptor cause or effect?
- Which patients have suffered an identifier

for a severity qualifier?

- Does a given semantic class have the etiological as a secondary associated cause?

The role of the ontology is two-fold: firstly, it is a place to store expressions which it has classified terminologically and semantically, according to the established classes and hierarchies; and secondly, it enables documentary search in accordance with the established semantic classes and their corresponding hierarchies and properties.

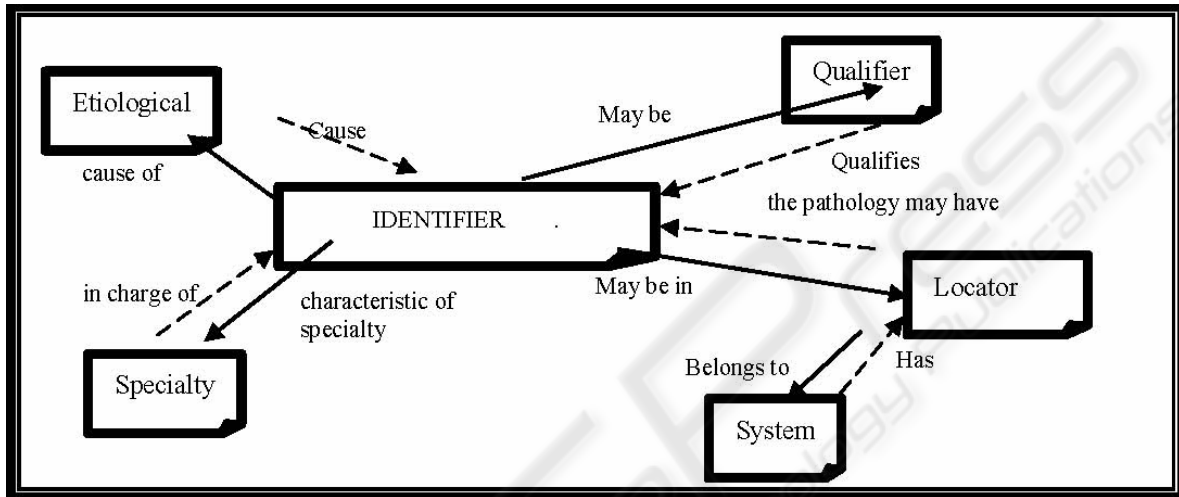


Figure 1: Relationship general scheme.

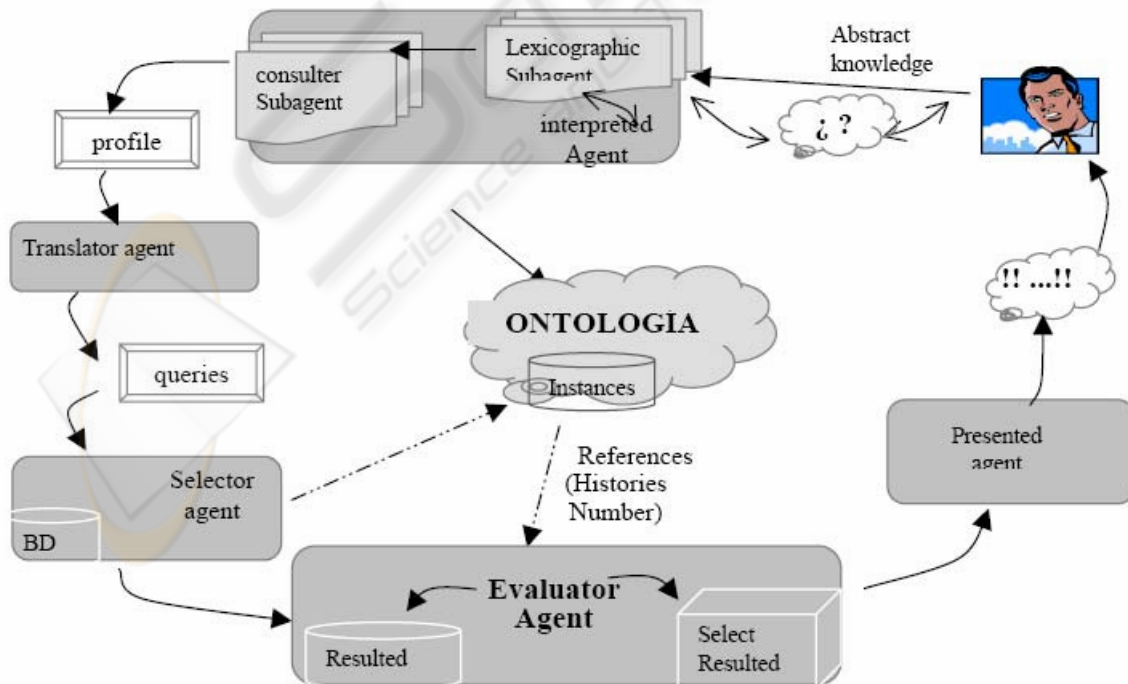


Figure 2: General query scheme.

5.2 Concept Definition in the Domain (classes)

These concepts must be those used in diagnosis expressions and also those delimiting the scope of the medical specialty. In addition, the concept of descriptor type according to the established categories mentioned in the previous section must also be introduced.

It is clearly of clinical interest to consider essential factors describing a pathology which is accompanied by relevant descriptions. In this regard, the categories established for terminological study seem appropriate: identifiers, qualifiers, etiologics and locators (Figure 1).

The target of these main classes is to define semantic concepts. However, it is possible to establish other classes which are useful for the documentary search and acquisition process in addition to others which are directed towards the structuring of different medical fields such as: Medical specialty, System (human anatomy) and Infraconcepts (some terms that become representative when others are present).

5.3 Hierarchical Classification of Concepts

Although, in principle, hierarchies are established according to the generality levels of each descriptor's semantic concept, the generalist nature we may encounter might require character "subtype" sub-classes to be defined.

For each class, we have established the levels we consider strictly necessary, thereby avoiding their proliferation which could make ontology management uncomfortable. In the following sections, we shall present the hierarchization for each of the main classes considered.

Identifiers: In this case, the hierarchy is strictly set according to a sense of generalization or specialization from a strictly clinical point of view.

Qualifiers: This class suggests the existence of "subtype" members: qualifier classes established according to the character they qualify. We can then find qualifiers such as: *Severity*: qualifies how the pathology affects the patient; *Relevance*: qualifies the degree to which the pathology is present; *Compensation*: stability in development and presentation; *Clinical*: qualifies the existence of associated pathologies such as "obstructive ischemia"; *Timing*: qualifies the chronicity level.

From this first level including different qualifier sub-types, hierarchies are established according to the level of generality.

Etiologics.- Similarly, we should examine the different types of causes producing the illness. We should consider three initial subtypes: *external causes*, *secondary* (to other pathologies) *causes*, and *internal causes* (metabolic, physiologic). In order to avoid an excessive number of levels in the ontology, internal causes have been included in the secondary causes. External causes have a wide typology depending on whether they refer to habits, accidents, external agents, etc.

Locator: The purpose of this class is to define the affected anatomical area; the anatomical areas must then be classified. It is then necessary to decide which of the commonly used hierarchization criteria to follow. From the point of view of the ontology, this is a secondary topic since what we want to identify is an area rather than its function (this might be a property in the ontology).

Infraconcepts: Because of the usefulness and ease of use of the ontology, we consider this class in order to clarify the meaning of the concepts represented by other classes in the ontology. Initially, we only considered one kind of infraconcept (the so called *infralocator*) that enables us to precisely determine an anatomical location (e.g. the "internal side" of a given anatomical locator). The *infralocator* name is given by the ambiguous meaning, and needs to be joined to a locator class member in order to have a specific meaning, such as in "ventricle internal side".

The existence of more infraconcepts is an open topic in the ontology, since we have only considered the *Infralocator* infraconcept.

Once concepts have been defined according to the class structure outlined above, we propose an implementation in "Protégé", the tool used to define our ontology.

5.4 Definition of Class Attributes and Properties (slots), and Restrictions on Their Values

The properties (intrinsic properties) represent value relationships with other classes (Figure 1). There may also be extrinsic properties which provide added values for the corresponding instances which are meaningful from the clinical or medical management point of view.

Looking at the intrinsic properties, the slots in the class definition describe the class instance attributes and relationships with other instances. By way of example, each identifier is then related to a cause and anatomical area. An anatomical location may also be linked to a certain qualification. The purpose of these slots is to establish relationships and restrictions between the different class instances. This

enables class hierarchy navigation in the documentary search but assuming restrictions which give coherence to the possible profiles designed.

Designing these properties and relationships is laborious and complex since they refer to objects from other classes. So far, we have been referring to intrinsic or extrinsic properties.

5.5 Instance Definition

Instances are each of the terms extracted during previous linguistic analysis once the class they belong to has been typified. As mentioned previously, the set is small enough for it to be managed easily. Class-subclass hierarchization facilitates this by reducing the number of direct final instances obtained.

Two problems arise when these instances are defined. The first problem is the need for medical knowledge in order to define an instance membership to a given class-subclass, particularly in the identifier class. This is important since a wrong definition would imply loss of exhaustiveness in the documentary search. In such a case, the only solution is technical criteria. According to the method we have developed, however, instantiation comes from the very terminology and phrases used by doctors and their classification according to ICD-9-OMS. All of this reduces the error possibilities to a minimum, and these are no greater than the differences that we would find if two specialists were to construct the class-subclass instance structure. The second problem is the treatment of documentary synonymy. In order to solve this problem, before defining the ontology, a previous and exhaustive lexical analysis is needed (as we have done), whereby this synonym is established using medical supervision criteria.

6 USAGE METHODOLOGY

The use of the ONTOARCHINET ontology has three levels of interest: acquisition process and data storage; documentary query; moving through the ontology

6.1 Acquisition Process and Data Storage

Using the expression in natural languages, once it has been filtered and cleaned, the terms with semantic meaning can be matched to concepts in the ontology. In this process, the expression is expressed

using the concepts in the ontology and adding the additional information stored in the ontology.

In the matching process, we also obtain a sequence of semantic SCS classes. These can be stored in the database and used to calculate concept relation frequencies and the depth of each concept in the ontology. By way of example, let us suppose the expression in natural language: "Congestive cardiac insufficiency due to acute lung edema". We would obtain two expressions from this in the lexicographic analysis: "Congestive cardiac insufficiency due to acute lung edema" and "acute lung edema", which would be described by means of the classes: I=Insufficiency, L=Heart, C=Congestive, E=Edema, C=Acute, L=Lung with SCS = ICLECL; and I=Edema, C=Acute, L=Lung, with SCS=ICL, for the second expression. Both the structured data and the expression in natural language would be stored in the database.

6.2 Documentary Query

The documentary query acquires the capacity of multiple flexible queries which are very useful for users. The process attempts to establish the concepts contained in a query profile. Once these concepts have been determined, selection on the database will be made according to the profiles generated using the hierarchical structure of classes and properties in the ontology. This provides the query process with flexibility and exhaustiveness and also frees it of noise. The general scheme of user access is shown in Figure 2, together with the different agents involved in the query. Rather than exploring the reading possibilities in the query, or profiles of forced sequences, exact or generic searches, we shall simply say that all of them are perfectly feasible.

6.3 Moving through the Ontology

The possibility of moving through the structure of the ontology is the first objective of the link with the database, but it can also contribute to knowledge about the relations and properties contained in the ontology, which represents a way to access the data structure and therefore build profiles by selecting members and properties from the ontology. Depending on the extrinsic properties included, the ontology will be able to answer a certain type of query, and not only act as a link with the database. The great advantage of the proposed method is that it does not require a totally built or static initial ontology, and therefore it can be improved as new expressions, terms, concepts and relations arise, and this requires

there to be an interface for the user specializing in the maintenance work.

7 CONCLUSIONS

Our main objective was to establish the foundations for developments that would allow information to be processed using natural language. In our opinion, this could then be used for terminology in the area of cardiology:

- The structured sample is representative of the system since the diversification index tends to become stabilized as the number of cases increases, and diversification is not excessively high for the heads of series studied.
- By classifying the terms, the size of the classes allows comfortable indexation of the terms. Structures of classes-subclasses can be generated
- The physical data model can easily be generated in the computer system by means of the corresponding class tables.
- The classes and instances are enriched by means of properties offering a greater richness of semantic interpretation and more possibilities to focus on the queries or extend them.
- The classes are sufficiently short and controllable, thereby ensuring process execution efficiency
- The system allows an appreciably more powerful documentary search than the traditional access system using ICD-OMS codes. The tedious process of codifying each expression is not necessary
- Redundant fields in the tables are not needed to codify contents which are already in expressions provided by the doctor.
- Class and member properties can be added so that the search process can be enriched by howing these properties or using them in decision processes.
- The system can be enhanced by the incorporation of new terms and expressions. In order to consider more classes than those presented in this paper, the semantic richness of the system would be increased.

REFERENCES

- Dameron O., Gibaud B., & Musen M. A. 2004. *Using semantic dependencies for consistency management of an ontology of brain-cortex anatomy*. First International Workshop on Formal Biomedical Knowledge Representation KRMed04, Whistler, Canada.
- Delgado M., Martin-Bautista M.J., Serrano J.M., Sanchez D., Vila M.A., 2002. Association Rules extraction for Text Mining. *Lectures Notes in Artificial Intelligence V. 2522 pp.154-162*
- Guarino N., 1998. Formal Ontology and Information Systems. *Formal Ontology in Information Systems. pp. 3-15. (FOIS 98). Trento (Italia)*. IOS Press *Weaving the Biomedical Semantic Web with the Protégé OWL Plugin*. First International Workshop on Formal Biomedical Knowledge Representation, Whistler, Canada.
- Lambrix P., Habbouche M., Perez M., 2003. Evaluation of ontology development tools for bioinformatics. *Bioinformatic Vol. 19, n.12 pag 1564-1571*.
- Maniez J., 1992. *Los lenguajes documentales y de indización*. Fundación Germán Sánchez Ruperez. Pirámide, Madrid.
- Martin-Bautista M.J., Sanchez D, Chamorro-Martinez J., Serrano J.M., Vila M.A. 2004. Mining Web Documents To Find Additional Query Terms Using Fuzzy Association Rules. *Fuzzy Sets and Systems V.148 pp. 85-1104*.
- Noy N., Tu S., 2003. Developing Medical Informatics Ontologies Using Protégé *Tutorial materials for AMIA 2003 tutorial*.
- Prados M., Peña M.C. 2003, *Sistemas de Información hospitalarios. Organización y gestión de Proyectos*. EASP (Escuela Andaluza de Salud Pública), Granada, 1nd edition.
- Prados M., Peña M.C., Prados M.B., Garrido J.M. 2004, *Gestión de conocimiento en el ámbito hospitalario*. EASP (Escuela Andaluza de Salud Pública), Granada, 1nd edition.
- Shankar R. D., Tu S. W., & Musen M. A., 2002. *Use of Protégé-2000 to Encode Clinical Guidelines*. SMI-2002-0944.(<http://protege.stanford.edu/doc>)