Learning Temporal Rules to Forecast Instability Auton Carnegie Mellon Lab Mathieu Guillame-Bert



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- Cardio-respiratory instability can be life threatening in critically ill patients.
- Monitoring devices which track single vital sign (VS) signals independently to observe VS deviations and detect instability are problematic
 - True instability is rarely a single-parameter abnormality
 - Unstable patients can deteriorate quickly → need to rapidly (yet reliably) detect onset of instability
 - Forecasting is more useful but more difficult than detection
- Hypothesis

It is best to simultaneously use multiple vital signs, even though models tend to get complex (hard to interpret) when multivariate data is sparse and noisy.

• Our goal

Learn human-interpretable multivariate models to forecast instability.



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Extracting features

Input

The heart rate, respiratory rate, SpO₂ level (every 20s) and blood pressure (every ~30min) for three patientyears of monitoring data duration. We censored data after the first instability of each patient, leaving 1.43 patient-years of data including 130 episodes of instability.

Processing

A large number of features is extracted from raw data: Moving averages (uniform, triangular, exponential), median, standard deviation, ranges, derivatives, cumulative sums, hysteresis with various thresholds, quality of signal, MACD derivatives, calendar events (hours, days, etc.).

Output

Symbolic and scalar time sequences:

- ~ 7,400 types of secondary observations (features) per each instance of time and patient
- ~ 32,300,000 such instances





TITARL (Temporal Interval Tree Association Rule Learner)

- **TITARL** is a data mining algorithm designed to extract temporal association rules from symbolic and scalar event sequences*
- Example rule extracted with TITARL (cross-validated):



• Example of a condition:

RR < 12 for last 5mn up 80% = « RR has been below 12 for more than 80% of the last 5min »

* New Approach on Temporal Data Mining for Symbolic Time Sequences: Temporal Tree Associate Rules, 2011 IEEE 23rd International Conference on Tools with Artificial Intelligence.



Results 1/2: Forecasting ability



We compare 3 variants of **rule-based forecasting models** (direct use of multiple rules, and two methods of rule fusion) vs. **direct use of vital signs**, and random predictors. We observed a **multi-fold improvement** of **recall** of the episodes of instability.

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Results 2/2: Recall vs. forecasting horizon



time to detection (s)

1 false alert every 20 hours	Technique	Recall	Avg. time to detection
	Fusion of rules	46%	10mn 38s (638s)
	Selection of rules	52%	6m 13s (373s)
	Direct use of rules	45%	5m 59s (359s)
	Heart rate	8%	2m 44s (164s)
	Random (HB)	4%	1m 32s (92s)
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The three types of rule based models show comparable recall.

However, fusion method (the most advanced technique), shows a large improvement of the average lead detection time.