



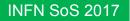
Multivariate analysis and complex networks

5: Complex networks for data-driven medicine

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CNR-ISC, the Institute for Complex Systems

INFN School of Statistics Ischia, May 2017



Introduction

Motivation: Mining knowledge from Medical Records

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Motivation: Mining knowledge from Medical Records Methods: Network Analysis for Case-Features dataset Case-study: Childhood orthodontics

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 new knowledge will simply emerge as plausible patterns from data-mining

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- extend the reach of computers from analysis to hypothesis

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- new questions that must be answered (why that pattern?)

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The aim is to generate knowledge

""Machine Science" James Evans and Andrey Rzhetsky

Science 329. no. 5990, pp. 399 (2010)

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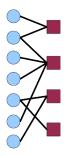
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 - complex network analysis reveals new conceptual classes emerging due to the the interaction among the data

medicine: clinical cases - clinical features 2d cromatography: experiment - substance is (not) detected test/marketing pools: people - answer to question human geography people - locations coauthoring: author - publication textual co-occurrence: word - query/sentence/paragraph/book community matrices: taxa - sample

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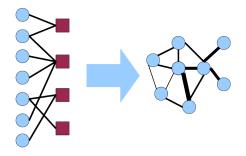
BIPARTITE GRAPH / BINARY MATRICES

Methodology



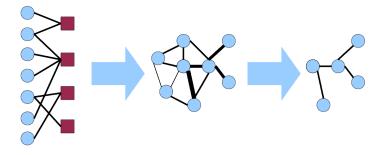
DATA

Methodology



PROJECT

Methodology

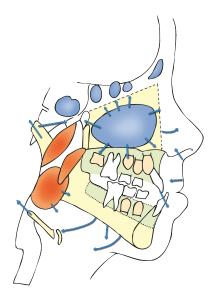


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The Complex Oro-Facial System



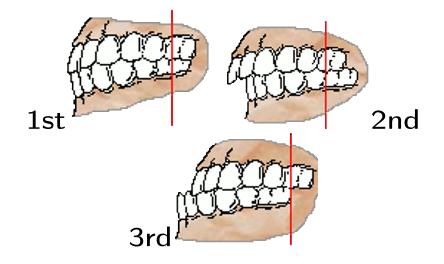
- components
- relations
- interactions

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dynamics

Dental Classes



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Cases

- 97 subjects (49 males, 48 females)
- ▶ age 8-13 (mean 10.2)
- 28 1st class, 44 2nd class, 25 3rd class patients

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Uniform age and gender

Cases

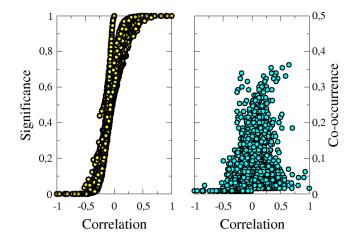
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Features

- 33 clinical, anatomic, functional and radiographic features
- 16 landmarks on the cephalograms
- 17 functional and clinical signs or oral habits
- score from -3 to + 3 = standard deviations from the mean

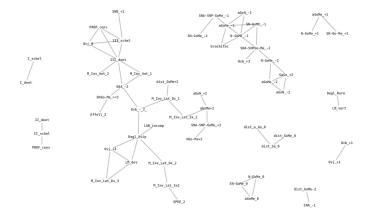
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Correlation vs Co-occurrence



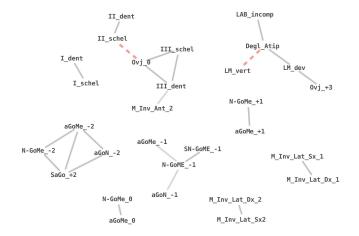
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Positive Correlations >40%



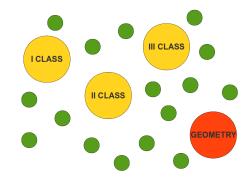
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All Together >50%



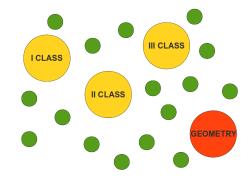
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Emergence of dental classes



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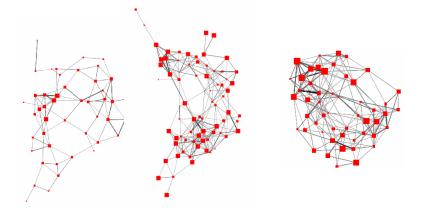
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- Emergence of dental classes
- Emergence of geometrical constraints

Networks for single Classes

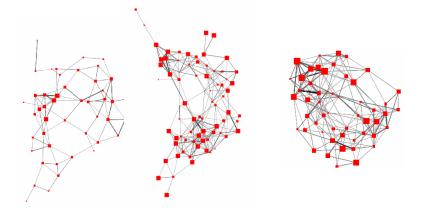
 $\varphi \ge 30\%$ (treshold for medium & high correlations)



 3rd class malocclusion strongly connected but devoid of distinctive peculiar hubs

Networks for single Classes

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- 3rd class malocclusion strongly connected but devoid of distinctive peculiar hubs
- multiple therapeutic attack on the many highly connected nodes

Networks for single classes

	Average Degree	Clustering coefficient	Mean Shortest
1st (normal)	4.04	0.28	3.43
2nd	6.45	0.36	3.13
3rd	7.09	0.31	2.39

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 2nd and 3rd class features are more connected than those of the control patients.

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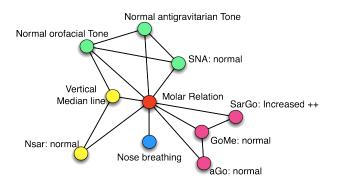
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- 2nd and 3rd class features are more connected than those of the control patients.
- 3rd class patients shows a much higher connection and closeness: this topology allows a high transmission of the bite forces and neuromuscular inputs

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Hubs in 2nd Class

Network local picture (simplified)



peculiar hubs as starting point for an orthodontic selective treatment
 hubs do not necessarily correspond to the most evident clinical signs

Conclusions I

Dental classes emerge as clusters of interrelated feature

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 Features can be considered in the light of the appropriate network specific for a particular malocclusion

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 Valuable tool for evidence-based diagnosis in primary orthodontic care

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- Valuable tool for evidence-based diagnosis in primary orthodontic care
- Could also be applied to other clinical problems

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Conclusions II

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Conclusions II

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Complex Networks can contribute to mine new knowledge

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► ICT for data consolidation, interfaces & algorithms

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ICT for data consolidation, interfaces & algorithms

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- MEDICINE for
 - clinical records
 - designing experiments

Application to medical diagnostic

The classification of human diseases builds on observed correlations between pathological analysis and clinical syndromes (observational skills to define the syndromic phenotype)

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Application to medical diagnostic

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- Problem Classic diagnostic strategy is naturally limited by the lack of sensitivity in identifying pre-clinical disease and by the lack of specificity in defining disease unequivocally
 - GOAL infer syndromic phenotypes from clinical data via complex networks methods