## 2016 CEGS N-GRID Shared-Tasks and Workshop on Challenges in Natural Language Processing for Clinical Data Michele Filannino, Amber Stubbs, Özlem Uzuner https://www.i2b2.org/NLP/RDoCforPsychiatry/









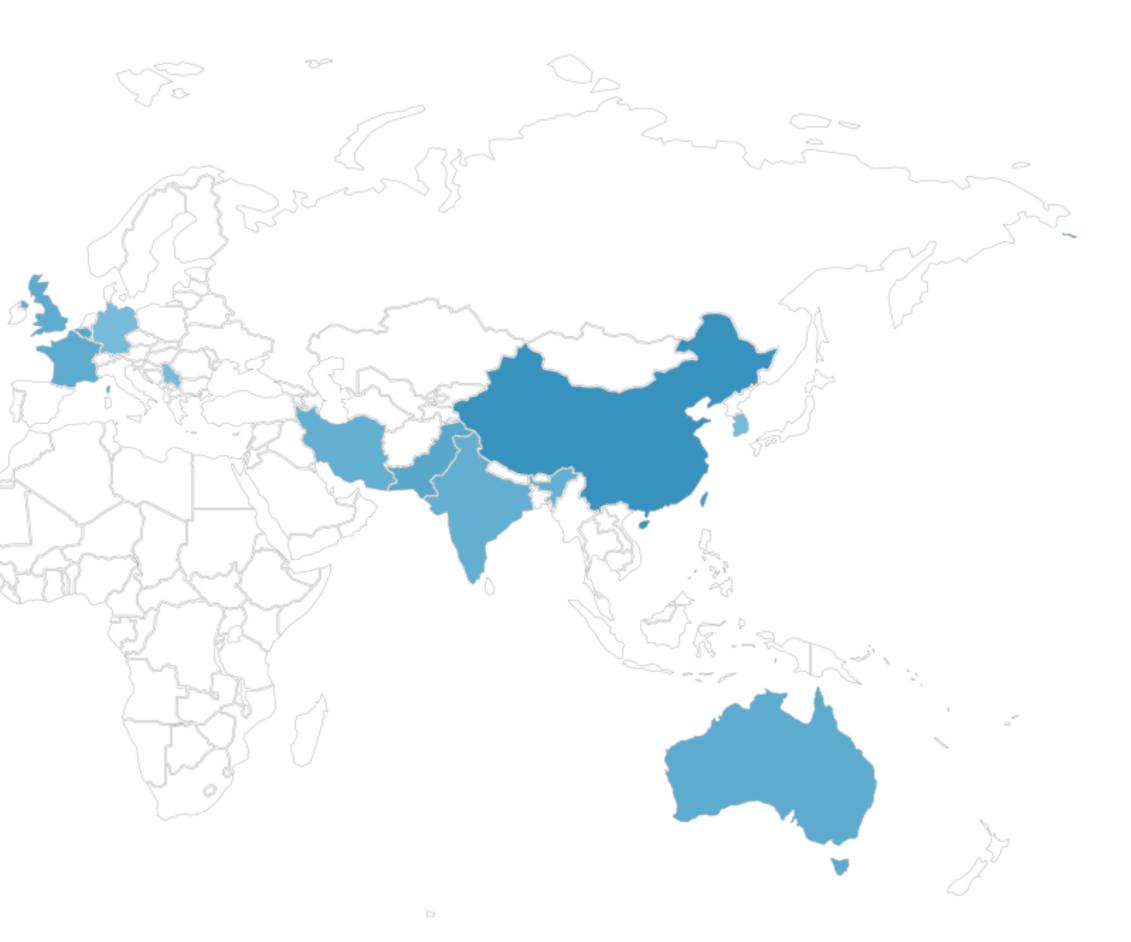




## participation

- 15 countries
- 50 teams
- 65 institutions
- 154 researchers







## CEGS N-GRID 2016: de-identification in 2 flavors

- Track 1.A sight-unseen:
  - running existing de-id systems on the data "as they are"
  - how well do systems generalize to new data?
- Track 1.B regular:
- Best performing runs:
  - Track 1.A: F1\* 79.56%
  - Track 1.B: F1\* <u>91.43%</u>

Subject: Patient Initial Visit Note -Identifying Information Date of Service:

09/14/2067 CPT Code: 90792: With medical services Age:

43Sex: Female Interpreter Used: None needed Chief Complaint / HPI Chief Complaint (Patients own words)

<mark>a</mark> is a <mark>43-year</mark> old female with a past psychiatric history significant for an underlying depressive disorder, anxiety disorder, binge eating disorder, no history of prior inpatient psychiatric hospitalizations, no history of prior suicide attempts, no known history of selfinjurious behavior, no history of EtOH or illicit-substance use and a past medical history significant for DVT (8-years ago while on OCP) who presents to the EDCRP for continued psychopharmacologic care following her transfer from Dr. Yvonne Ellison's practice. Per alentina, "I just need to continue these medications...they have been so helpful."

History of Present Illness and Precipitating Events

• design new systems (2 months, 60/40 training/test split) a daily basis in the context of a number of stressors/transitions, including the birth of her and ensuing conflicts with her mother as a result of the marriage. She notes that at that at that at that at that the second seco • advancing the state of the art in medical rec. de-identified to a which steadily led to a marked increase in a 30-pound weight gain and two advancing the states that she would binge in secret from her husband and two advances and states that following each binge daily, which steadily led to a marked increase in a 30-pound weight gain and two advances and states that following each binge daily, which steadily led to a marked increase in a 30-pound weight gain and two advances and states that following each binge daily, which steadily led to a marked increase in a 30-pound weight gain and two advances and states that following each binge daily which states that following each binge daily which states that following each binge daily advances and two advances and states that following each binge daily advances and states that following each binge daily advances and states advances ad

Valentina describes that she first presented for binge-eating disorder treatment tes that following each binge she felt "awful...ashamed." As a result, she states that her mood started to precipitously decline and states that she ultimately realized that she "could no longer fun from this...I had to seek treatment."

In an effort to seek treatment, she began seeing dietician, Frida Gibbons in Hubert, who she states was "helpful, but not enough." She subsequently purchased a diet book and worked through the exercises in the book and states that that, too, was helpful, but not enough. She ultimately contacted one of the authors of the book and arranged to undergo therapywithher via Skype. She states that that was helpful for approximately 6-months, at which time her therapist suggested that she seek local ED-specific care. As such, she underwent an evaluation with Dr. Deon Yarbrough 6/2066 and was subsequently referred to Dr. Tonya Alston for a 20-week course of CBT-E. Valentina states that her treatment with Dr. Alston was "phenomenal...it was exactly what I needed." She concurrently began seeing Dr. Yvonne Ellison for psychopharmacologic treatment of her underlying depressive/anxiety disorder and BED. She has since responded well to her current regimen of Zoloft, Vyvanse, and Topamax.



## CEGS N-GRID 2016: symptom severity classification

- RDoC: framework for studying mental disorders
  - integrates many levels of information (from genomics to Valentina is a 43-year old female with a past psychiatric history significant for self-report) to understand the basic dimensions of hum sychiatric hospitalizations, no history of prior suicide a pase of a pase of the basic dimensions of hum significant for DVT (8-years ago while on OCP) who presents to he have been a pase of the basic dimension of the basic dimensions of hum significant for DVT (8-years ago while on OCP) who presents to he have basic dimensions of the basic dimension of th behavior (from normal to abnormal)
  - 5 domains: POSITIVE VALENCE\*, NEGATIVE VALENCE, COGNITIVE describes that she first presented approximately one-year prior to current presentation of the second s SOCIAL PROCESSES, AROUSAL AND REGULATORY SYSTEMS
  - how good systems are at predicting patients' symptom within 4-months. She states that she would be added by the states that following each binge states and states that following each binge states and states that following each binge states are added by the states that following each binge states are added by the states and states that following each binge states are added by the states and states that following each binge states are added by the states and states and states that following each binge states are added by the states and states are added by the states are added by the states and states and states are added by the states and states are added by the stat severity, based on initial psychiatric evaluation records?
- Best performing run:
  - INMAE<sup>M+</sup> 86.30%

\* Systems primarily responsible for responses to positive motivational situations or contexts, such as reward seeking, consummatory behavior, and reward/habit learning (alcohol, drink, abuse, repetitive, stereotypy, drug, gamble, count, craving, compulsive) + Inverse Normalized Mean Absolute Error, Macro-Averaged



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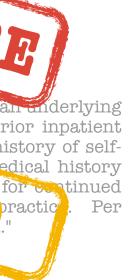
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