







Discovery

Diagnosis

Prognosis

Care

Deep learning for biomedicine



Seoul, Nov 2017



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@truyenoz

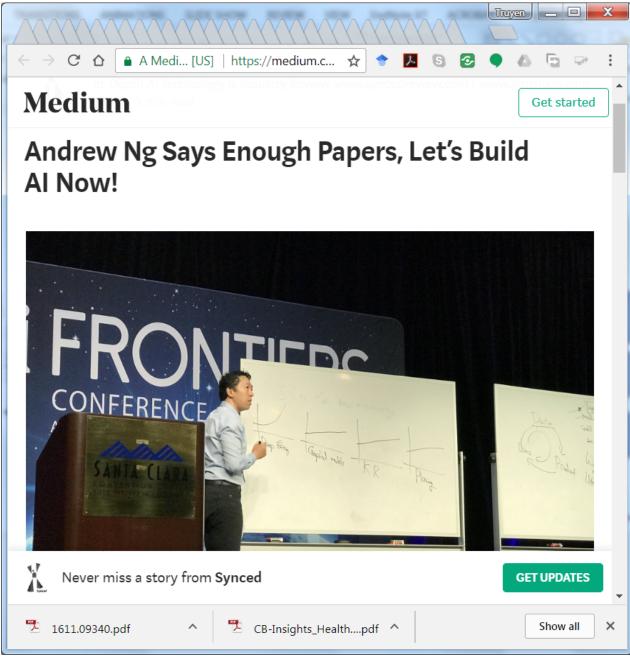


letdataspeak.blogspot.com



goo.gl/3jJ100





"We have enough papers. Stop publishing, and start transforming people's lives with technology!"

We will quickly solve "easy" problems of the form:

 $A \rightarrow B$

BUT ... Should we solve all problems of and for those Internet giants like Google, Facebook & Baidu?

Resources

Slides and references:

https://truyentran.github.io/acml17-tute.html

Key survey paper (updated frequently):

 Ching, Travers, et al. "Opportunities And Obstacles For Deep Learning In Biology And Medicine." bioRxiv (2017): 142760

The Team









































Agenda

Topic 1: Introduction (20 mins)

Topic 2: Brief review of deep learning (25 mins)

- Classic architectures
- Capsules
- Graphs
- Memory-augmented nets

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- Nanopore sequencing
- Genomics modelling

QA (10 mins)



Break (20 mins)

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- Few-shot learning
- Generative models
- Drug design
- Future outlook

QA (10 mins)

Biomedicine is ripe for ML/DL/AI – (or other way around?)

ML that matters

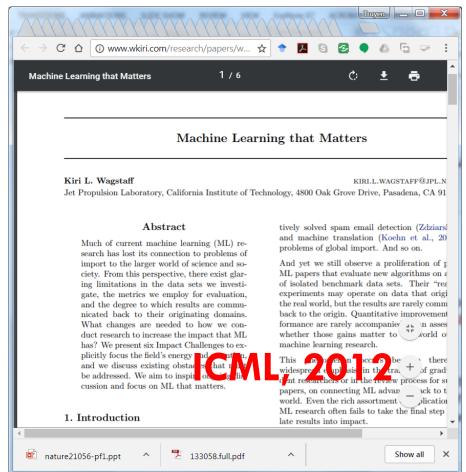
- E.g., huge successes in radiology with off-the-shell CNNs
- Big business opportunities, e.g., IBM Watson for Health

Excellent testbed for machine learning techniques

- Any modality: 2D-4D vision, time-series, 1D signals, sound, text, social network, graphs.
- For DL, any neural architectures: CNN/CapsNet, RNN, Memory, DBN/VAE/GAN
- An excellent escape from the UCI datasets!

Excellent sources of new problems

- Metric scale from nano-meter (atoms) to meters (human body and brain).
- Time scale from mini-seconds (ion channels) to 100 years.
- Complexity unimaginable (e.g., brain, DNA, cell networks).

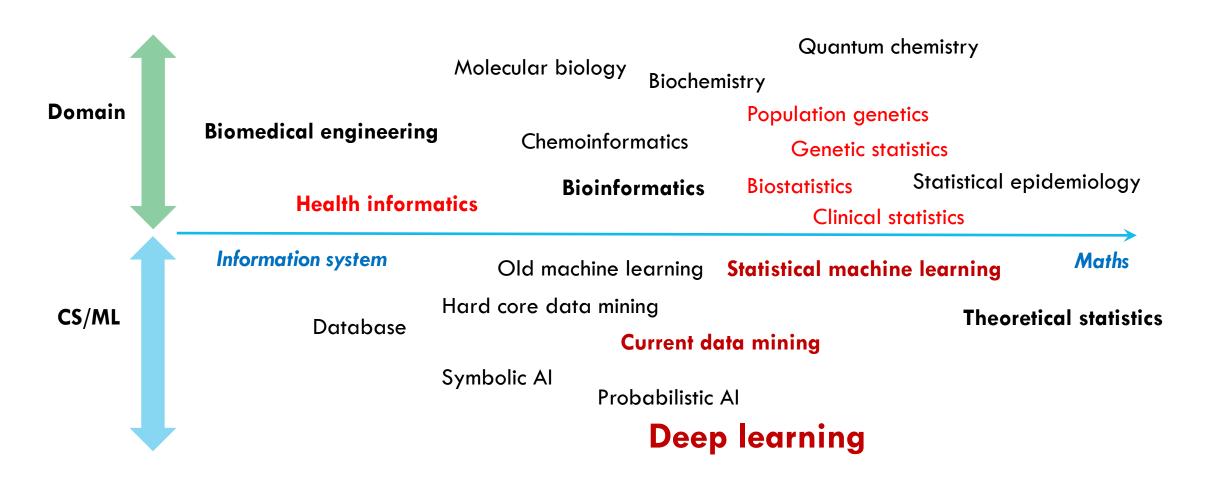




Big Rooms in Biomedicine

marketingland.com

First thing first: Speak their languages



Using intuition and domain knowledge

Intuition is important.

- There are infinite number of hypotheses
- We need to search for some highly probably ones!

But it can be deadly wrong!

- A recently discharged patient can be readmitted right away (just like not treated).
- A good doctors can be associated with high rate of mortality and readmission.

Domain knowledge is critical

- Check the literature. Obey the laws. Follow protocols.
- Do the home work, e.g., pregnancy diabetes; women with prostate cancer; men with breast cancer.
- Choose right neural architectures!

But ... a lot of data can support any dump tricks!

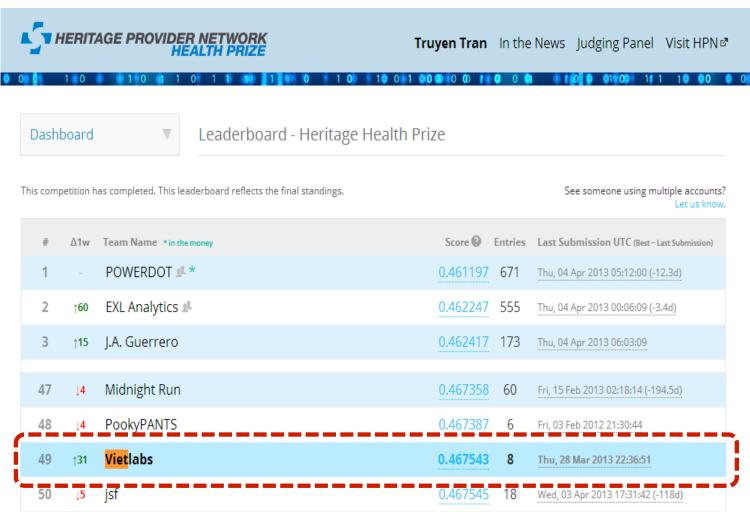
Big data mitigate the need of domain expertise

\$3M Prize, 3 years

170K patients, 4 years worth of data

Predict length-of-stay next year

Not deep learning yet (early 2013), but strong ensemble needed → suggesting dropout/batch-norm



Let's be warned!

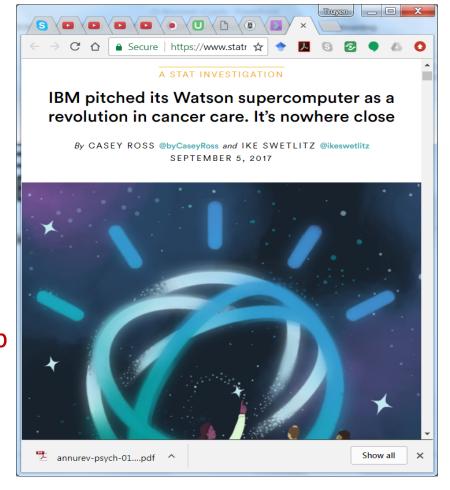
2011

2017



"He said later that the background information Watson provided, including medical journal articles, was helpful, giving him more confidence that using a specific chemotherapy was a sound idea.

But the system did not directly help him make that decision, nor did it tell him anything he didn't already know."



What make biomedicine hard for deep learning?

Great diversity but may be small in size

High uncertainty, low-quality/missing data

Reusable models do not usually exist

Human doesn't know how to read biomedicine (Brendan Frey, U of Toronto)

Require deep thinking for a reasonable deep architecture

However, at the end of the day, we need only a few generic things:

- Vector → DNN (e.g., highway net) | Sequence → RNN (e.g., LSTM, GRU)
- Repeated motifs → CNN | Set → Attention
- Graphs → Conv graphs; Column Networks

Health data is exceptionally hard to model

Many diseases are not fully understood

Cancers, mental health

Many treatments have little or unknown effects

Care processes are complex: Protocols, regulations, multiple stakeholders (patients, family, nurse, doctor, hospital, community, government, the public).

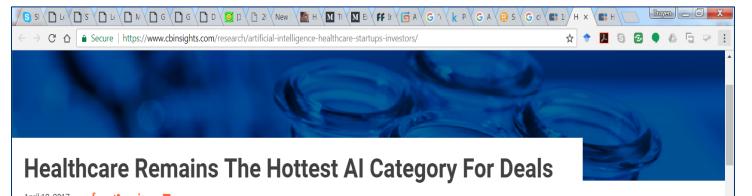
Data is (usually) small, biased, noisy, irregular/episodic, missing with external interventions

Data is not shared, due to privacy and ethical concerns

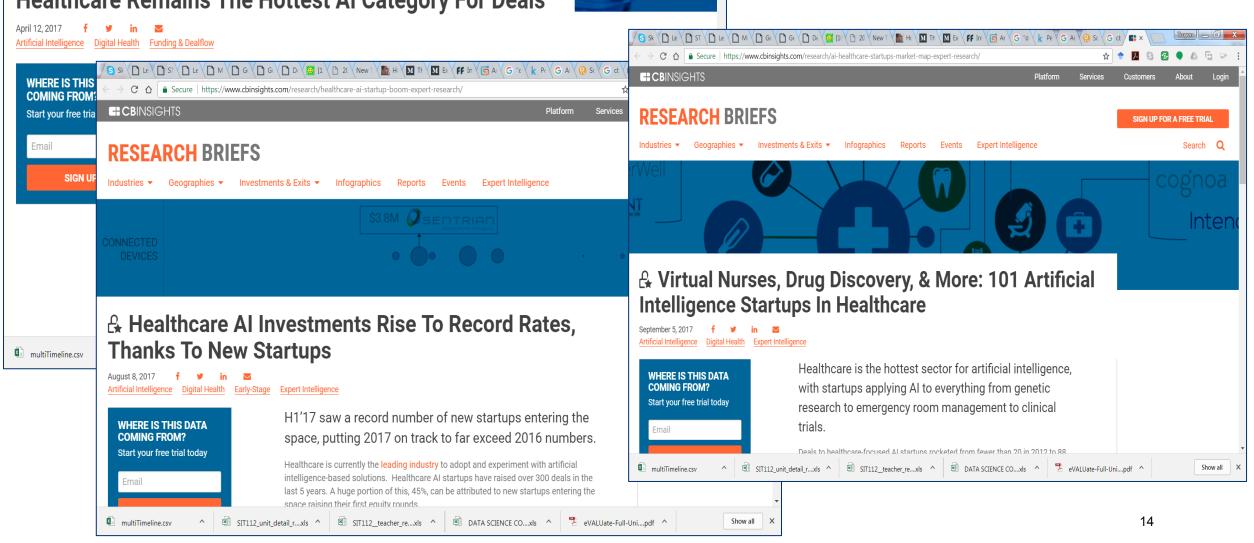
Predicting into future isn't like finding out what is there (e.g., classification)

Decision making is complex.

Doctors are rightfully sceptical of what is new.

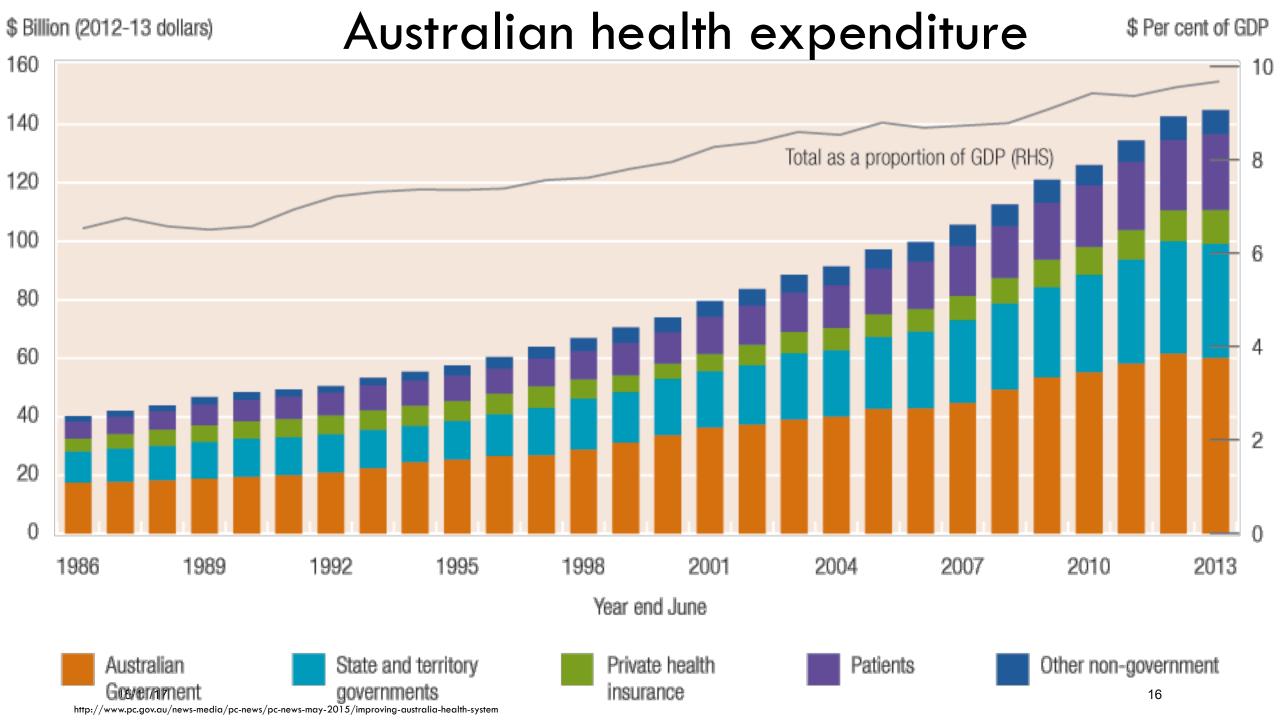


Then the good news



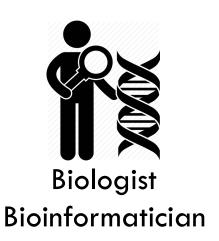




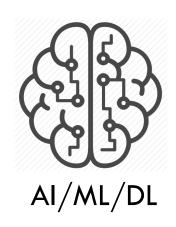


It has just started.

Lineuporvised learning Supervised learning Anywhere in between: semi-(mostly machin nan) supervised learning, reinforcement learning, $(\mathbf{v}) \sim P_{model}(\mathbf{v})$ $(\mathbf{v}) \approx P_{data}(\mathbf{v})$ lifelong learning, metalearning, few-shot learning, knowledge-based ML Will be quickly solved for easy problems (Andrew Ng)







How does deep learning work for biomedicine?









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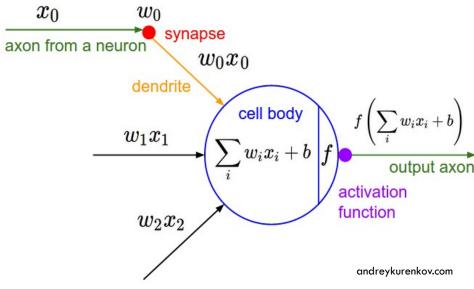
QA (10 mins)

What is deep learning?

Quick answer: multilayer perceptrons (aka deep neural networks) of the 1980s rebranded in 2006

- Same backprop trick, as of 2017.
- Has a lot more hidden layers (100-1000X).
- Lots of new arts (batch-norm, Adam/ RMSProp, skip-connections, Capsnet, external memory, GPU/TPU).
- Much bigger labelled datasets.
- Lots more people looking at lots of things





Feature learning

In typical machine learning projects, 80-90% effort is on <u>feature</u> engineering

 A right feature representation doesn't need much work. Simple linear methods often work well.

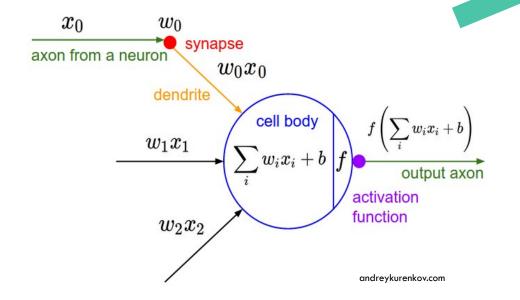
Text: BOW, n-gram, POS, topics, stemming, tf-idf, etc.

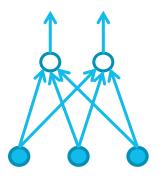
Software: token, LOC, API calls, #loops, developer reputation, team complexity, report readability, discussion length, etc.

Try yourself on Kaggle.com!

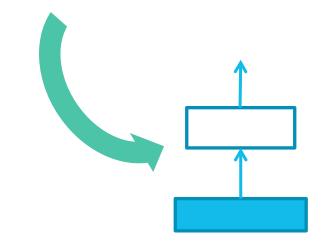
Deep learning as feature learning

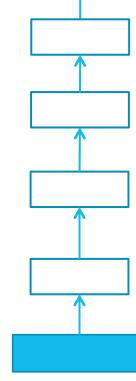
Integrate-and-fire neuron



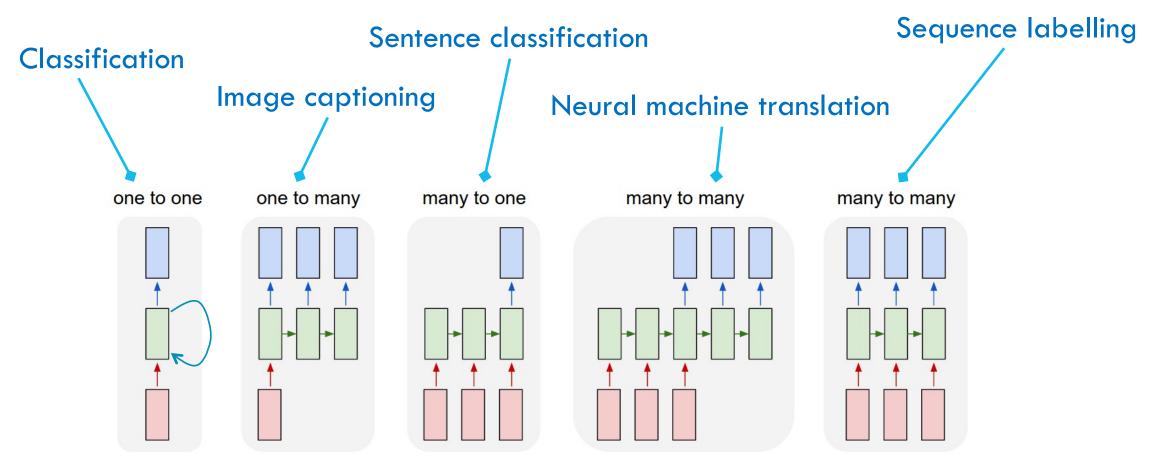


Feature detector



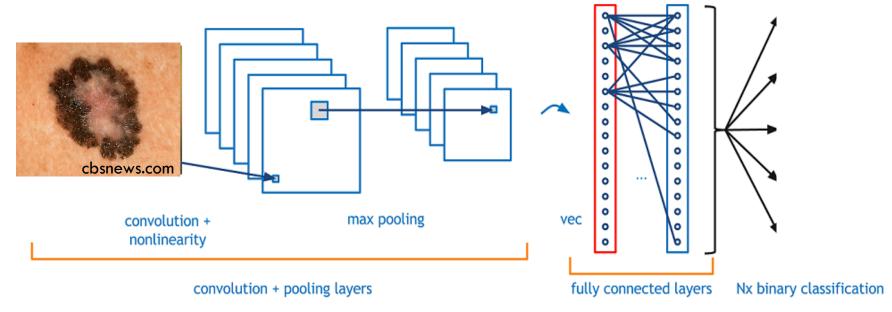


Recurrent neural networks



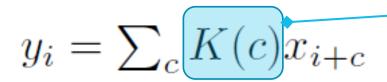
Source: http://karpathy.github.io/assets/rnn/diags.jpeg

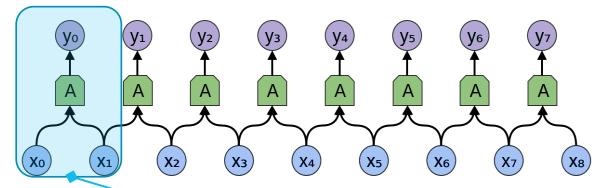
Convolutional nets



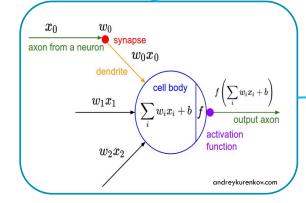
adeshpande3.github.io

Learnable convolution

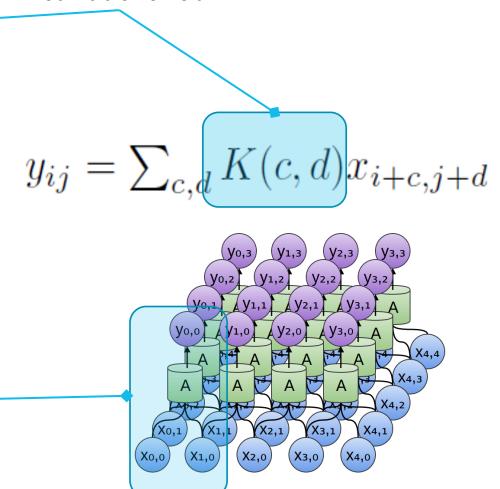




http://colah.github.io/posts/2015-09-NN-Types-FP/

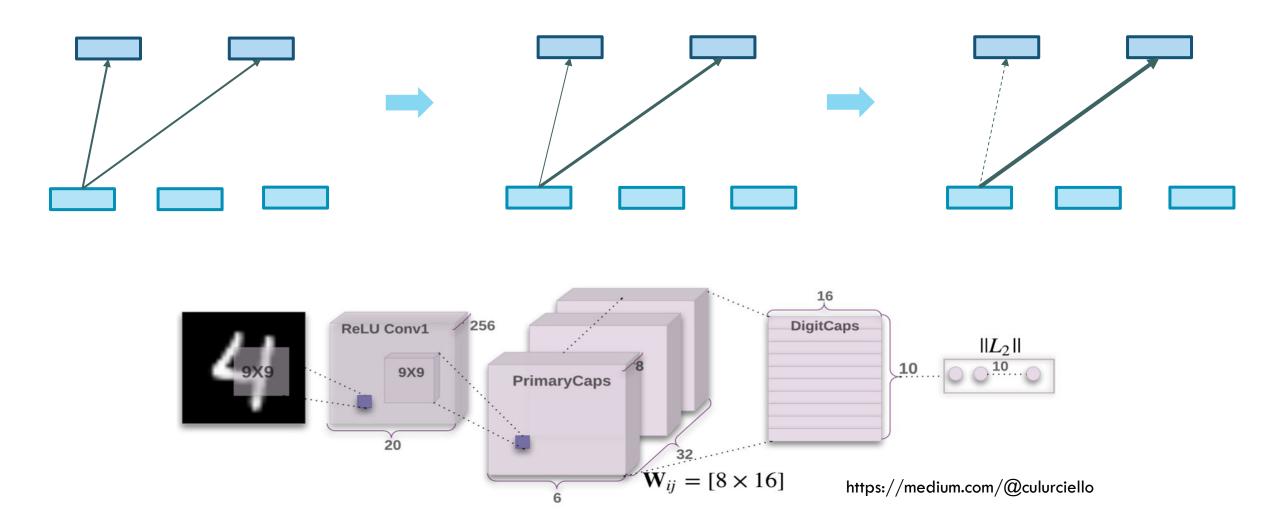


Feature detector, often many



Learnable kernels

CapsNet (Hinton's group)



Graphs

Goal: representing a graph as a vector

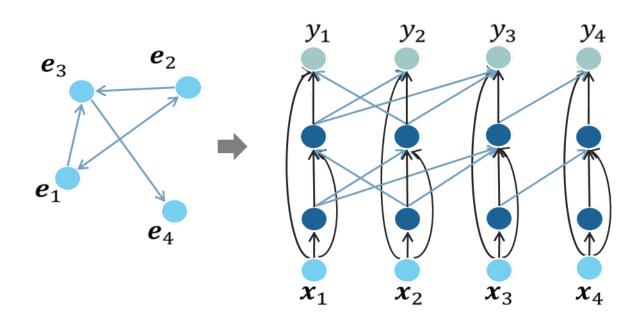
Many applications

- Drug molecules
- Object sub-graph in an image
- Dependency graph in software deliverable

Recent works:

- Graph recurrent nets, column nets (Pham et al, 2017).
- Graph variational autoencoder (Kipf & Welling, 2016)
- Graph convolutional nets (LeCun, Welling and many others)

Column networks



Relation graph

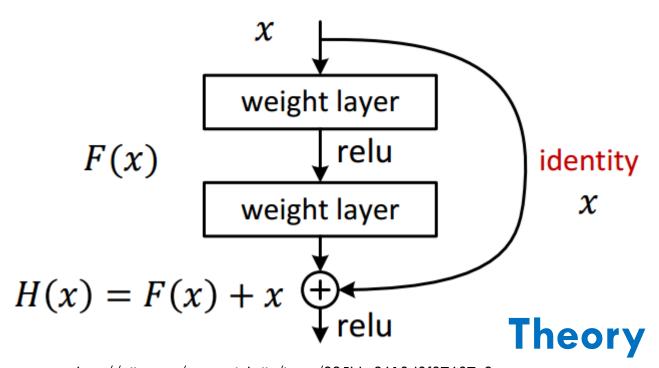
Stacked learning

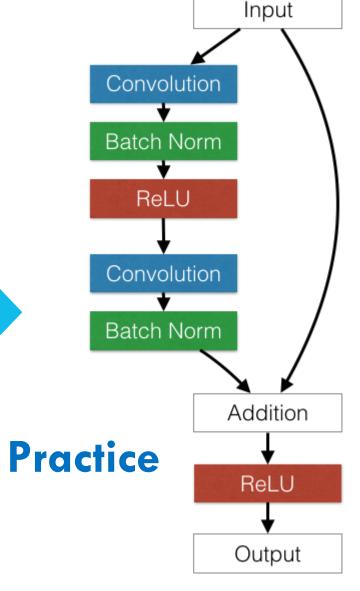
#REF: Pham, Trang, et al. "Column Networks for Collective Classification." *AAAI*. 2017.

Thin column y_2 y_1 h^2 h^1 \boldsymbol{x}_1 \boldsymbol{x}_2 \boldsymbol{x}_3 \boldsymbol{x}_4 Column nets

Skip-connections

Residual net





http://qiita.com/supersaiakujin/items/935bbc9610d0f87607e8

http://torch.ch/blog/2016/02/04/resnets.html

MANN: Memory-augmented neural networks

Long-term dependency

- E.g., outcome depends on the far past
- Memory is needed (e.g., as in LSTM)

Complex program requires multiple computational steps

Each step can be selective (attentive) to certain memory cell

Operations: Encoding | Decoding | Retrieval

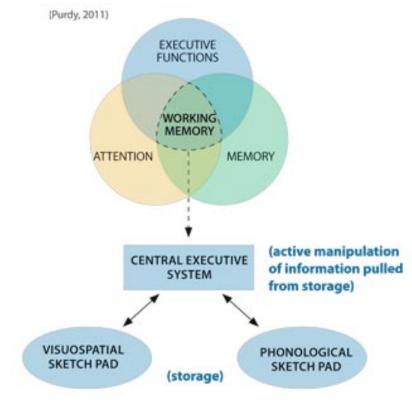
Memory types

Short-term/working (temporary storage)

Episodic (events happened at specific time)

Long-term/semantic (facts, objects, relations)

Procedural (sequence of actions)



http://www.rainbowrehab.com/executive-functioning/

Attention mechanisms

Need attention model to select or ignore certain inputs

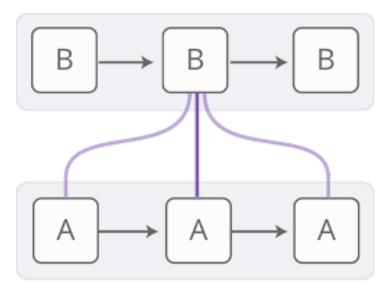
Human exercises great attention capability – the ability to filter out unimportant noises

Foveating & saccadic eye movement

In life, events are not linear but interleaving.

Pooling (as in CNN) is also a kind of attention

Routing (as in CapsNet) is another example.



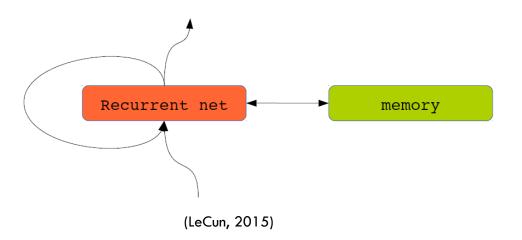
http://distill.pub/2016/augmented-rnns/

MANN: examples

Memory networks of Facebook: (Weston et al, Facebook, 2015); (Sukhbaatar et al, 2015) – associative memory

Dynamic memory networks of MetaMind: (Kumar et al, 2015) – episodic memory

Neural Turing machine and Differential Neural Computer of DeepMind (Graves et al. 2014, 2016) -- tape



Supervised deep learning: steps

Step 0: Collect LOTS of high-quality data

Corollary: Spend LOTS of time, \$\$ and compute power

Step 1: Specify the **computational graph** Y = F(X; W)

Step 2: Specify the loss L(W; D) for data D = $\{(X1,Y1), (X2,Y2), ...\}$

Step 3: Differentiate the loss w.r.t. W (now mostly automated)

Step 4: Optimize the loss (a lot of tools available)

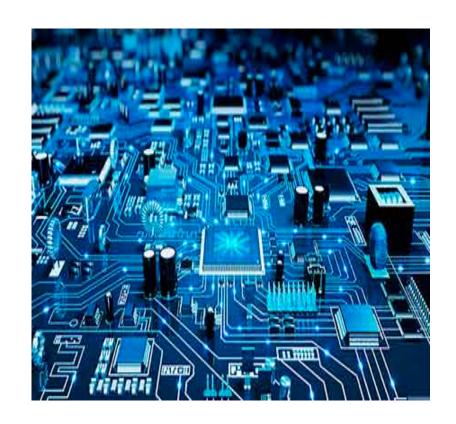
Deep learning as new electronics (or LEGO?)

Analogies:

- Neuron as feature detector → SENSOR, FILTER
- Multiplicative gates → AND gate, Transistor, Resistor
- Attention mechanism → SWITCH gate
- Memory + forgetting → Capacitor + leakage
- Skip-connection → Short circuit
- Computational graph → Circuit
- Compositionality → Modular design

Relationships

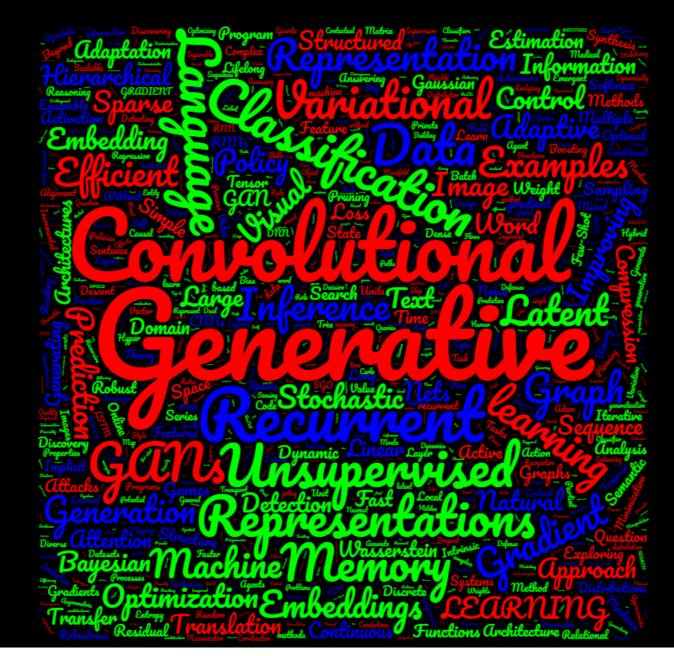
- Now: Electronics redesigned to support tensors in deep learning
- Prediction: Deep learning helps to design faster electronics



ICLR18 submissions

~1000 submissions

Doubles the number submitted to ICLR17



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15/11/17

Human genome

3 billion base-pairs (characters), 20K genes, 98% non-coding regions

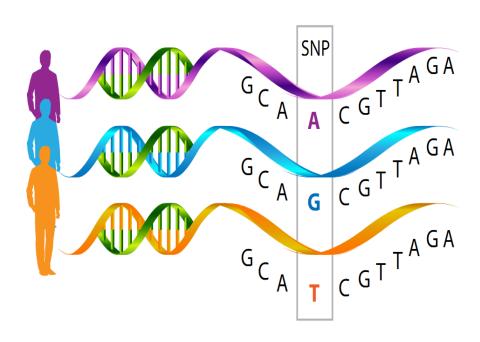
Any two random persons share 99.9% genome

The 0.1% difference is thought to account for all variations between us

- Appearance: Height (80% heritable), BMI, hair, skin colors
- IQ, education levels
- Genetic disorders such as cancers, bipolar, schizophrenia, autism, diabetes, etc.

Any two random persons share about 60% variations (SNV/SNP)

As we age, there are small mutations within our cells

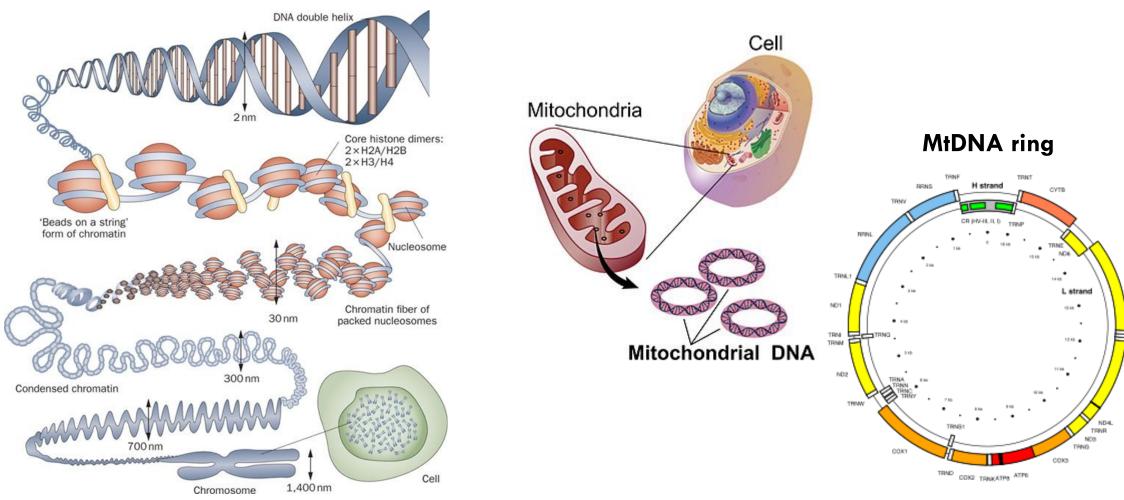


https://neuroendoimmune.files.wordpress.com

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The cell, nuclear DNA & MtDNA



Sequencing

The first step is to read (sequence) the DNA/MtDNA, and represent the information as string of characters (A,C,G,T) in computer.

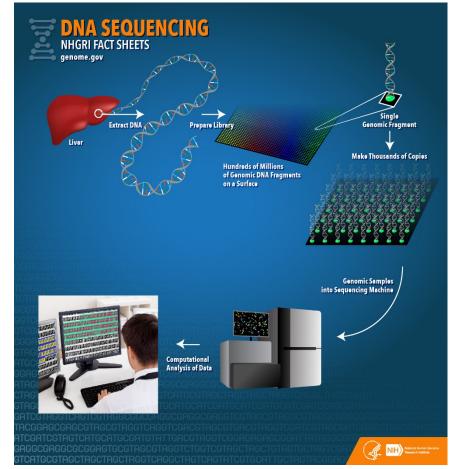
The most popular technique these days read short sequences (hundreds of characters), and align.

Each position is read typically at least 30 times to get enough confidence → Huge storage!!!

String alignment is then the key to final sequence → Need supercomputer to do this fast.

A DNA sequence is compared against the reference genome. Only the difference (0.1%) need to be stored.

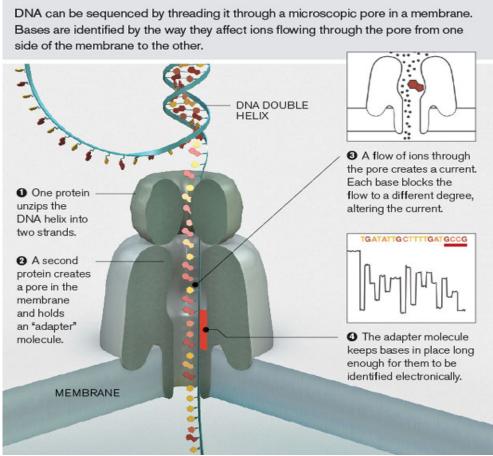
 This does not usually apply for MtDNA, as each cell has as many as 500 MtDNAs, they are slightly different! More different as we age.



Source: https://www.genome.gov

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The latest: nanopore sequencing (electrical signals \rightarrow A|C|G|T)





Continuous segmentation & labelling

Source: technologyreview.com

Deep architectures for nanopore sequencing

Aimed at real time recognition

The setting is similar to speech recognition!

• → The early days used HMMs. Now LSTMs.

We will briefly review the latest:

Chiron (Teng et al., August 2017, UQ, Australia)

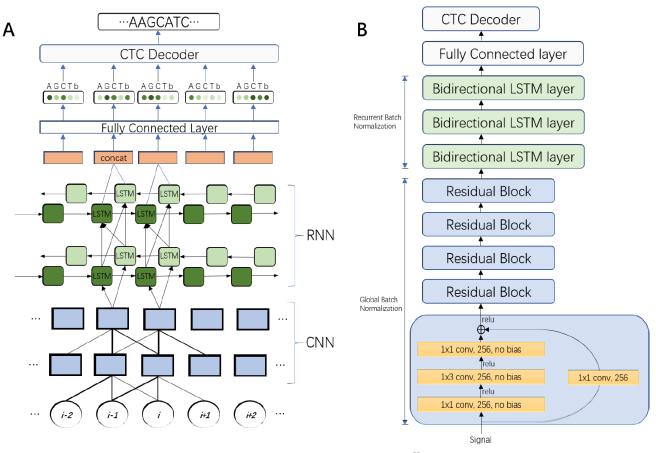
Other GRU/LSTM variants

- Nanonet (Oxford Nanopore Technologies, 2016)
- BasecRAWller (Stoiber & Brown, May 2017)
- DeepNano (Boza et al., June 2017, Comenius University in Bratislava, Slovakia)

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Chiron

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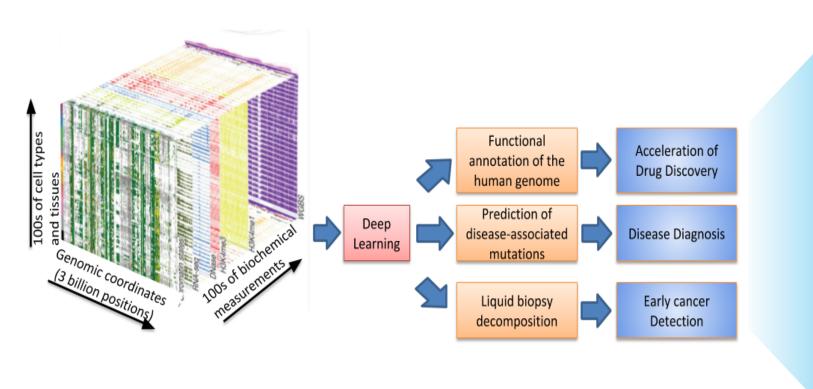


Dataset	Basecaller	Identity Rate
	Metrichor	0.8650 (-0.0246)
	Albacore	0.8896
Lambda	BasecRAWller	0.8154 (-0.0742)
	Chiron	0.8776 (-0.012)
	Metrichor	0.8864 (-0.0193)
	Albacore	0.901 (-0.0047)
E. coli	BasecRAWller	0.8254 (-0.0803)
	Chiron	0.9057
	Metrichor	0.8802 (-0.0117)
	Albacore	0.8919
M. tuberculosis	BasecRAWller	0.8241 (-0.0678)
	Chiron	0.8851 (-0.0068)
	Metrichor	0.794 (-0.0446)
	Albacore	0.8386
Human	BasecRAWller	0.8149 (-0.0237)
	Chiron	0.8154 (-0.0232)

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#REF: Teng, Haotien, et al. "Chiron: Translating nanopore raw signal directly into nucleotide sequence using deep learning." bioRxiv (2017): 179531.

Opportunities for Deep Learning in Genomics



Genetic diagnostics Refining drug targets **Pharmaceutical** development Personalized medicine Better health insurance Synthetic biology

Some Al problems

DNA is a book, easy to read (costs less than \$1K to sequence), extreme difficult to comprehend.

- It has 3B characters (A,C,T,G), 46 volumes (chromosomes), 20K chapters.
- The longest book has less than 10M characters, 13 volumes ("A la recherche du temps perdu" (In Search of Lost Time), by Marcel Proust, 2012) – as recognized by Guinness World Records.

Short sequences (100 chars) are predictive of protein binding, also gene start/end.

Proteins are big 3D graphs interacting with the 1D-2D strings (DNA, RNA), and other proteins & drugs (which are graphs themselves).

Long chains of influence, from SNP to cell, tissue and organ functions.

Viruses can be generated/edited on computer, hence discrete sequence generation problem.

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Filling the genotypes \rightarrow phenotypes gap

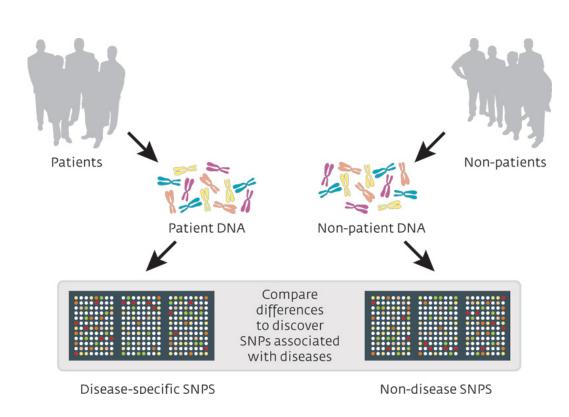
Ultimate goals:

- Estimating explained variance in inheritability
- Discover risk factors
- Predicting individual phenotypes: Height, Glucose, BMI, IQ, Edu, Mental, Cancers...

Some paths under investigation

- Predicting the bio of the cells, DNA + MtDNA, and more
- Statistical modeling of genetic architectures, e.g., Bayesian, mixed linear models, Gaussian Processes.
- Motif modeling with DNA/RNA/protein, e.g., predict binding sites
- Developing data-efficient techniques for genomics
- Integrating multimodalities

GWAS: Genome-Wide Association Study



Setting:

- For each DNA, only differences from a reference genome are recorded.
- The differences are SNPs, one per dimension.

Problems

- Very high dimensional (typically hundreds of thousands), low sample size (typically hundreds)
- Missing/unreliable data
- Typically very weak association
- Combating the False Discovery Rate (FDR) due to multiple parallel hypotheses: Individual p-value must be extremely small, e.g. 5×10e-8

Diet networks for GWAS

#REF: Romero, Adriana, et al. "Diet Networks: Thin Parameters for Fat Genomic." *arXiv preprint arXiv:1611.09340* (2016).

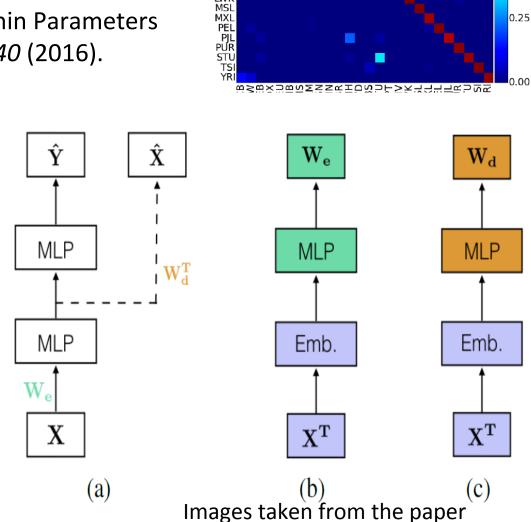
Use a "hypernet" to generate the main net.

Features are embedded (not data instance).

Unsupervised autoencoder as regularizer.

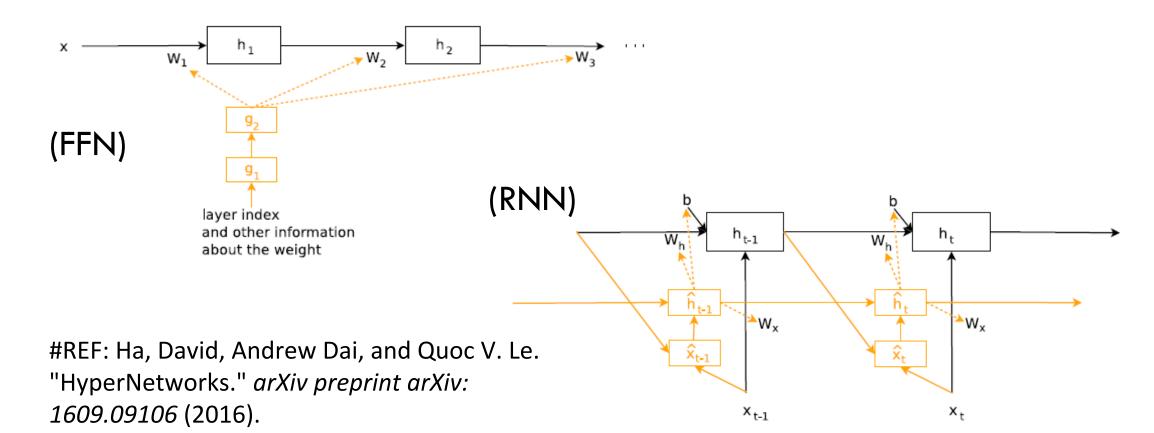
Works well on country prediction on the 1000 Genomes Project dataset.

• But this is a relatively easy problem. PCA, even random subspace can do quite well!



0.75

HyperNetworks: Network to generate networks



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GWAS: Challenges

We are detecting rare events!!!

Results hard to replicate across studies.

• Model stability?

 $SNP \rightarrow phenotypes seem impossible.$

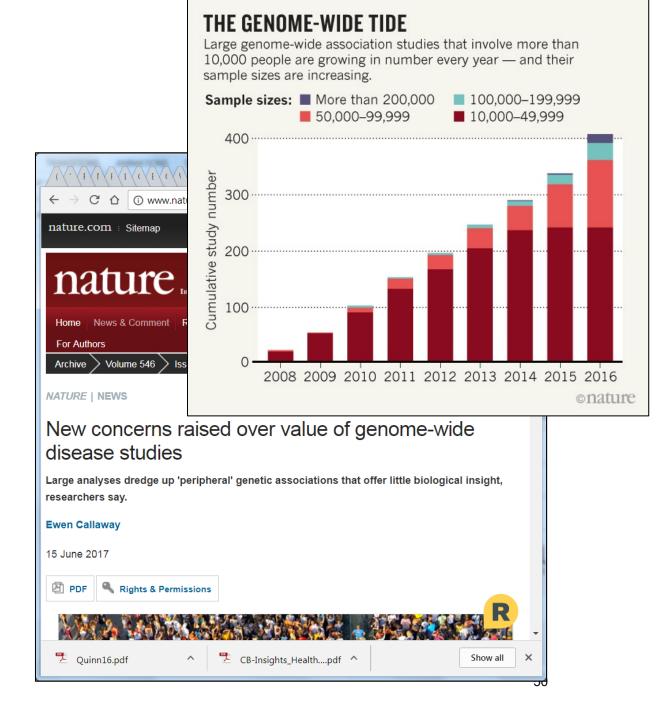
If it is (e.g., race prediction), little insights can be drawn upon.

The pathway is deep and complex

Room for deep learning?

Room for structured models

- SNP annotations
- Spatial relationships
- Evolutionary trees



Rooms for deep learning

Bridge the genotype-phenotype gap

- Incorporating HUGE amount of data
- Modelling the multiple layers of complex biological processes in between.
- Starting from the DNA and its immediate functions, e.g., protein binding, gene start, alternative splicing, SNP annotations.

Deep learning has shown to work well in cognitive domains, where human can perform in less than a second.

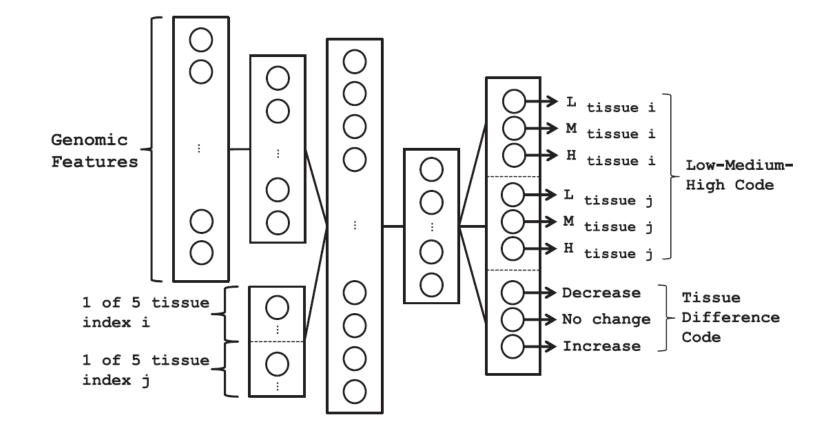
We need to be super-human to bridge the gap.

New models for 2% of coding part, as well as 98% non-coding (probably having regulatory functions)

Incorporating biological understanding into model, not the black-box.

Use of feedforward nets: Tissue-regulated splicing code

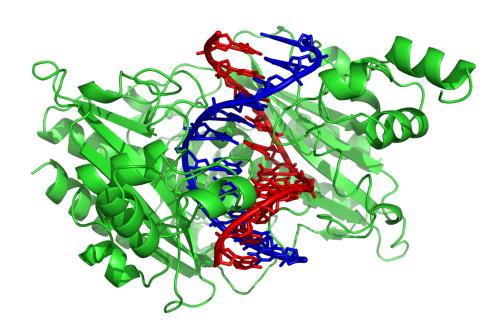
#REF: Leung, Michael KK, et al. "Deep learning of the tissue-regulated splicing code." *Bioinformatics* 30.12 (2014): i121-i129.



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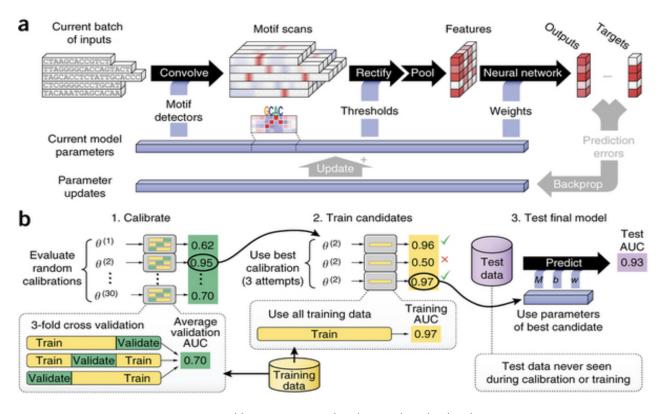
Use of CNNs: Discovery of DNA motifs

DeepBind (Alipanahi et al, Nature Biotech 2015)



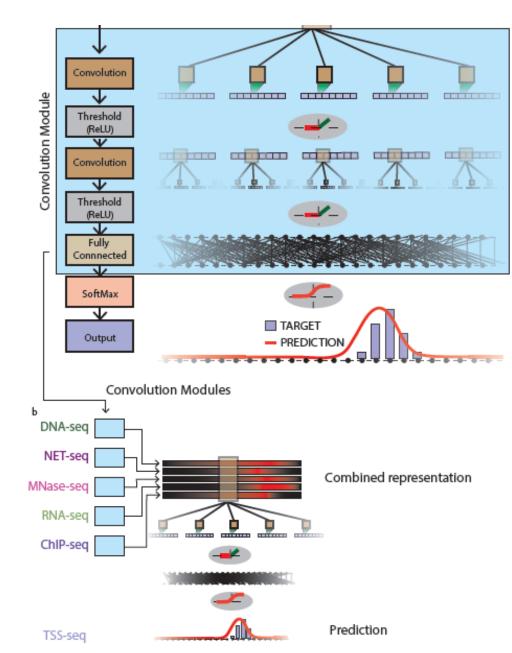
The restriction enzyme EcoRV (green)

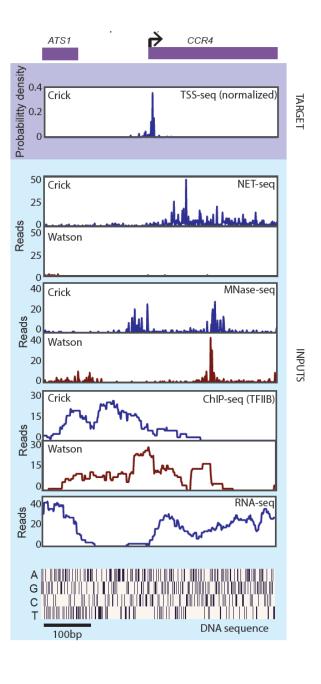
Source: wikipedia.org/wiki/DNA-binding_protein



Use of CNNs: FIDDLE

#REF: Eser, Umut, and L. Stirling Churchman. "FIDDLE: An integrative deep learning framework for functional genomic data inference." bioRxiv (2016): 081380.

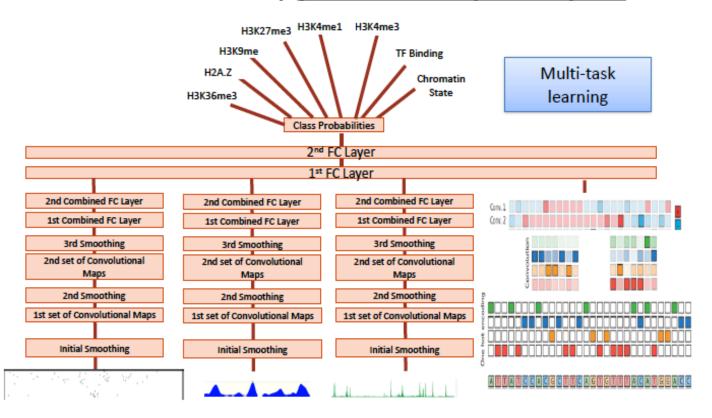




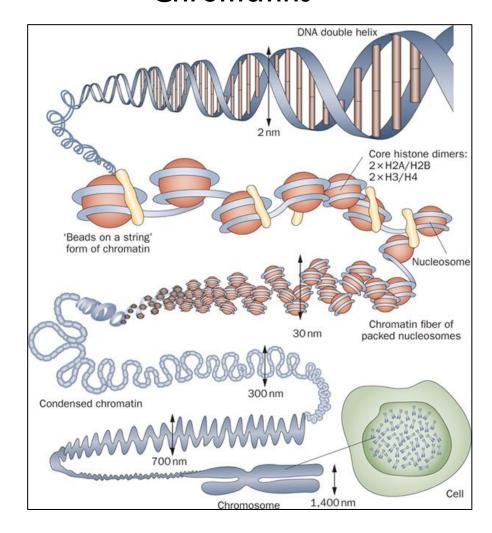
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THE CHROMPUTER

Integrating multiple inputs (1D, 2D signals, sequence) to simulatenously **predict multiple outputs**

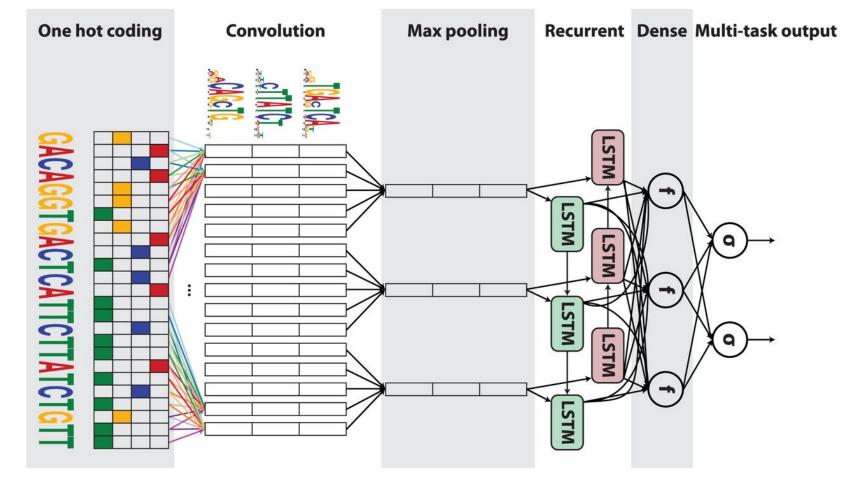


Chromatins



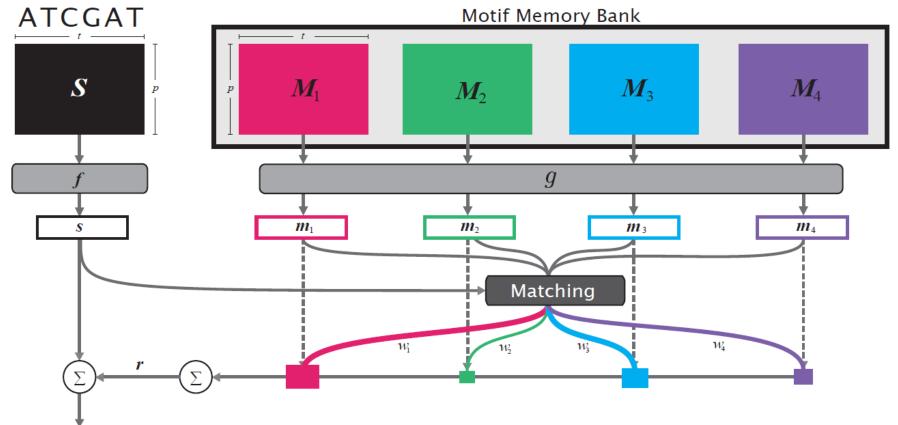
User of CNN+RNNs: DanQ

#REF: Quang, Daniel, and Xiaohui Xie. "DanQ: a hybrid convolutional and recurrent deep neural network for quantifying the function of DNA sequences." *Nucleic acids research* 44.11 (2016): e107-e107.



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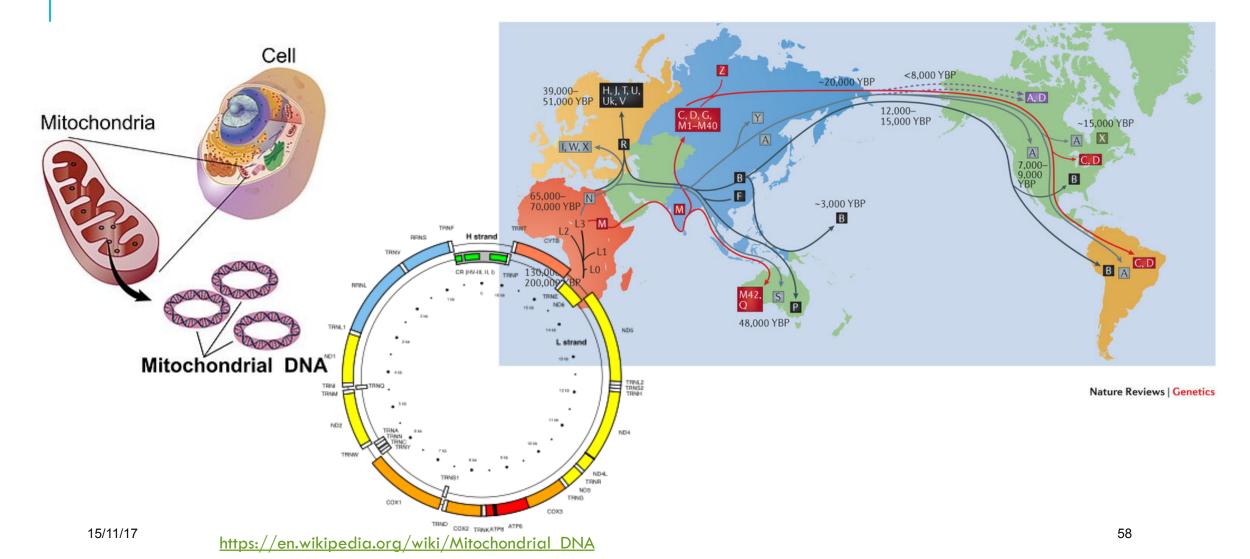
Use of MANN: Matching nets



Output

#REF: Lanchantin, Jack, Ritambhara Singh, and Yanjun Qi. "Memory Matching Networks for Genomic Sequence Classification." arXiv preprint arXiv: 1702.06760 (2017).

Mitochondrial DNA



MtDNA versus aging

(on going work @PraDA/Deakin)

On average, 500 copies per cell

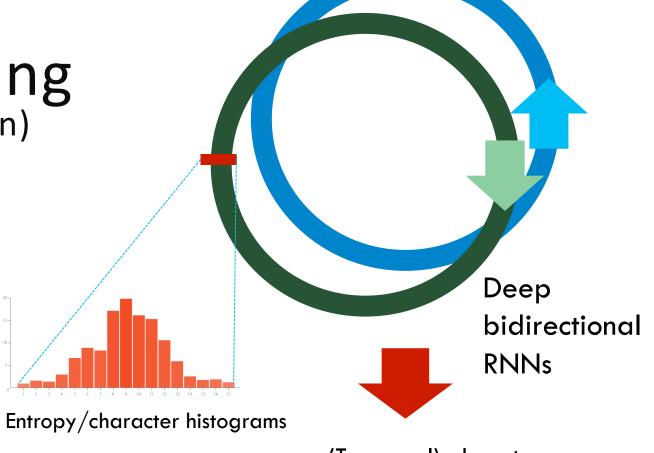
Reading is per shot segments

Suggests multiple instance learning

The entire MtDNA is a ring

Suggests Bidirectional RNNs

For aging, the entropy at each location seems to matter



(Temporal) phenotypes:

- Age
- BMI
- Glucose
- Diseases

More models/frameworks

DragoNN

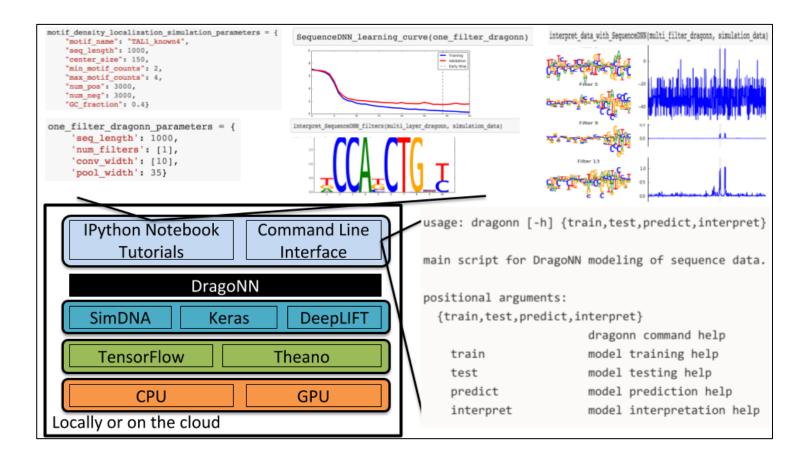
DeepChrome

DeepSEA

Basset

DeepBound

...



http://kundajelab.github.io/dragonn

The outlook

Read an extremely long book and answer any queries about it

- Memory-augmented neural networks (MANN), and
- Multiple hierarchical attentions and grammars

Instead of read, write (DNA/viruses/RNA/proteins)

Supper-rich genome SNP annotation

The society of things (DNA/RNA/protein)

Transfer learning between cell types, tissues and diseases

Biology-driven deep nets (e.g., knowledge as memory)

Handling rare events (e.g., the role of memory)



and break

We're hiring

PhD & Postdocs truyen.tran@deakin.edu.au