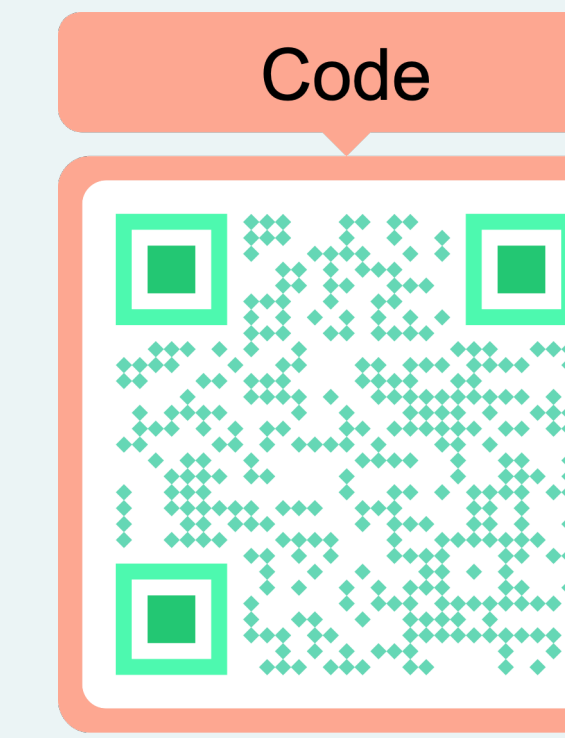


GraphCare: Enhancing Healthcare Predictions with Personalized Knowledge Graphs

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Introduction

1. Personalized KG is needed for personalized treatment.

2. Existing works mainly focus on

- 1) simple hierarchical relations
- 2) the inner graphical structure of EHR while there are many external biomedical KGs



Q1: How to construct personalized KGs utilizing external knowledge bases?

A1: We construct medical concept-specific KGs

Q2: How to improve time-series clinical (EHR) predictions with those KGs?

A2: We treat personalized knowledge graphs as patient representations

Performance of GraphCare on MIMIC-III/IV across 4 tasks

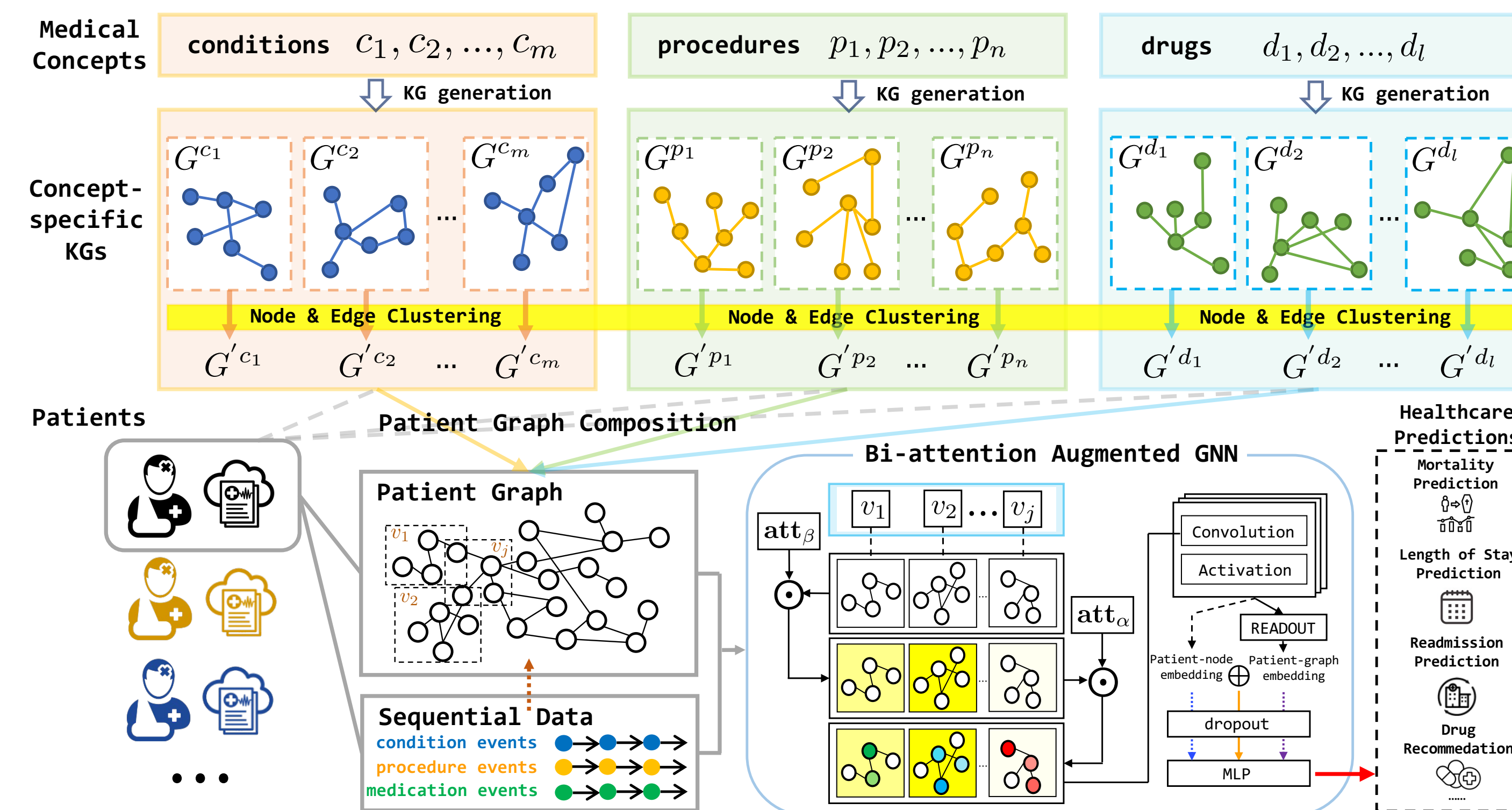
Model	Task 1: Mortality Prediction				Task 2: Readmission Prediction				
	MIMIC-III		MIMIC-IV		MIMIC-III		MIMIC-IV		
	AUPRC	AUROC	AUPRC	AUROC	AUPRC	AUROC	AUPRC	AUROC	
GRU	11.8(0.5)	61.3(0.9)	4.2(0.1)	69.0(0.8)	68.2(0.4)	65.4(0.8)	66.1(0.1)	66.2(0.1)	
Transformer	10.1(0.9)	57.2(1.3)	3.4(0.4)	65.1(1.2)	67.3(0.7)	63.9(1.1)	65.7(0.3)	65.3(0.4)	
RETAIN	9.6(0.6)	59.4(1.5)	3.8(0.4)	64.8(1.6)	65.1(1.0)	64.1(0.7)	66.2(0.3)	66.3(0.2)	
GRAM	11.4(0.7)	60.4(0.9)	4.4(0.3)	66.7(0.7)	67.2(0.8)	64.3(0.4)	66.1(0.2)	66.3(0.3)	
DeepR	13.2(1.1)	60.8(0.4)	4.2(0.2)	68.9(0.9)	68.8(0.9)	66.5(0.4)	65.6(0.1)	65.4(0.2)	
AdaCare	11.1(0.4)	58.4(1.4)	4.6(0.3)	69.3(0.7)	68.6(0.6)	65.7(0.3)	65.9(0.0)	66.1(0.0)	
GRASP	9.9(1.1)	59.2(1.4)	4.7(0.1)	68.4(1.0)	69.2(0.4)	66.3(0.6)	66.3(0.3)	66.1(0.2)	
StageNet	12.4(0.3)	61.5(0.7)	4.2(0.3)	69.6(0.8)	69.3(0.6)	66.7(0.4)	66.1(0.1)	66.2(0.1)	
GRAPHCARE	w/ GAT	14.3(0.8)	67.8(1.1)	5.1(0.1)	71.8(1.0)	71.5(0.7)	68.1(0.6)	67.4(0.4)	67.3(0.4)
	w/ GINE	14.4(0.4)	67.3(1.3)	5.7(0.1)	72.0(1.1)	71.3(0.8)	68.0(0.4)	68.3(0.3)	67.5(0.4)
	w/ EGT	15.5(0.5)	69.1(1.0)	6.2(0.2)	71.3(0.7)	72.2(0.5)	68.8(0.4)	68.9(0.2)	67.6(0.3)
	w/ GPS	15.3(0.9)	68.8(0.8)	6.7(0.2)	72.7(0.9)	71.9(0.6)	68.5(0.6)	69.1(0.4)	67.9(0.4)
	w/ BAT	16.7(0.5)	70.3(0.5)	6.7(0.3)	73.1(0.5)	73.4(0.4)	69.7(0.5)	69.6(0.3)	68.5(0.4)

Model	Task 3: Length of Stay Prediction				Task 4: Drug Recommendation				
	MIMIC-III		MIMIC-IV		MIMIC-III		MIMIC-IV		
	AUROC	Kappa	Accuracy	F1-score	AUROC	Kappa	Accuracy	F1-score	
GRU	78.3(0.1)	26.2(0.2)	40.3(0.3)	34.9(0.5)	78.7(0.1)	26.0(0.1)	35.2(0.1)	31.6(0.2)	
Transformer	78.3(0.2)	25.4(0.4)	40.1(0.3)	34.8(0.2)	78.3(0.3)	25.3(0.4)	34.4(0.2)	31.4(0.3)	
RETAIN	78.2(0.1)	26.1(0.4)	40.6(0.3)	34.9(0.4)	78.9(0.3)	26.3(0.2)	35.7(0.2)	32.0(0.2)	
GRAM	78.2(0.1)	26.3(0.3)	40.4(0.4)	34.5(0.2)	78.8(0.2)	26.1(0.4)	35.4(0.2)	31.9(0.3)	
DeepR	77.9(0.1)	25.3(0.4)	40.1(0.6)	35.0(0.4)	79.5(0.3)	26.4(0.2)	35.8(0.3)	32.2(0.1)	
StageNet	78.3(0.2)	24.8(0.2)	39.9(0.2)	34.4(0.4)	79.2(0.3)	26.0(0.2)	35.0(0.2)	31.3(0.3)	
GRAPHCARE	w/ GAT	79.4(0.3)	28.2(0.2)	41.9(0.2)	36.1(0.4)	80.3(0.3)	28.4(0.4)	36.2(0.1)	33.3(0.3)
	w/ GINE	79.2(0.2)	28.3(0.3)	41.5(0.3)	36.0(0.4)	79.9(0.2)	27.9(0.3)	36.3(0.3)	32.8(0.2)
	w/ EGT	80.3(0.3)	28.8(0.2)	42.8(0.4)	36.3(0.5)	80.5(0.2)	28.7(0.3)	36.7(0.2)	33.5(0.1)
	w/ GPS	80.9(0.3)	28.8(0.4)	43.0(0.3)	36.8(0.4)	80.7(0.3)	28.8(0.4)	36.7(0.3)	33.9(0.3)
	w/ BAT	81.4(0.3)	29.5(0.4)	43.2(0.4)	37.5(0.2)	81.7(0.2)	29.8(0.3)	37.3(0.3)	34.2(0.3)

Model	Task 3: Length of Stay Prediction				Task 4: Drug Recommendation				
	MIMIC-III		MIMIC-IV		MIMIC-III		MIMIC-IV		
	AUPRC	AUROC	F1-score	Jaccard	AUPRC	AUROC	F1-score	Jaccard	
GRU	77.0(0.1)	94.4(0.0)	62.3(0.3)	47.8(0.3)	74.1(0.1)	94.2(0.1)	60.2(0.2)	44.0(0.4)	
Transformer	76.1(0.1)	94.2(0.0)	62.1(0.4)	47.1(0.4)	71.3(0.1)	93.4(0.1)	55.9(0.2)	40.4(0.1)	
RETAIN	77.1(0.1)	94.4(0.0)	63.7(0.2)	48.8(0.2)	74.2(0.1)	94.3(0.0)	60.3(0.1)	45.0(0.1)	
GRAM	76.7(0.1)	94.2(0.1)	62.9(0.3)	47.9(0.3)	74.3(0.2)	94.2(0.1)	60.1(0.2)	45.3(0.3)	
DeepR	74.3(0.1)	93.7(0.0)	60.3(0.4)	44.7(0.3)	73.7(0.1)	94.2(0.1)	59.1(0.4)	43.8(0.4)	
StageNet	74.4(0.1)	93.0(0.1)	61.4(0.3)	45.8(0.4)	74.4(0.1)	94.2(0.0)	60.2(0.4)	45.4(0.4)	
SafeDrug	68.1(0.3)	91.0(0.1)	46.7(0.4)	31.7(0.3)	66.4(0.5)	91.8(0.2)	56.2(0.4)	44.3(0.3)	
MICRON	77.4(0.0)	94.6(0.1)	63.2(0.4)	48.3(0.4)	74.4(0.1)	94.3(0.1)	59.3(0.3)	44.1(0.3)	
GAMENet	76.4(0.0)	94.2(0.1)	62.1(0.4)	47.2(0.4)	74.2(0.1)	94.2(0.1)	60.4(0.4)	45.3(0.3)	
MoleRec	69.8(0.1)	92.0(0.1)	43.1(0.3)	43.1(0.3)	68.6(0.1)	92.1(0.1)	56.3(0.4)	40.6(0.3)	
GRAPHCARE	w/ GAT	78.5(0.2)	94.8(0.1)	64.4(0.3)	49.2(0.4)	74.7(0.5)	94.4(0.3)	60.4(0.3)	45.7(0.4)
	w/ GINE	78.2(0.1)	94.7(0.1)	63.6(0.4)	47.9(0.3)	74.8(0.3)	94.6(0.1)	60.6(0.4)	46.1(0.4)
	w/ EGT	79.6(0.2)	95.3(0.0)	66.4(0.2)	49.6(0.4)	75.4(0.4)	95.0(0.1)	61.6(0.3)	47.3(0.3)
	w/ GPS	79.9(0.3)	95.9(0.1)	66.2(0.3)	49.8(0.4)	75.9(0.5)	94.9(0.1)	62.1(0.3)	46.8(0.4)
	w/ BAT	80.2(0.2)	95.5(0.1)	66.8(0.2)	49.7(0.3)	77.1(0.1)	95.4(0.2)	63.9(0.3)	48.1(0.3)

1. GraphCare consistently outperforms other methods on all tasks/datasets.
2. BAT outperforms other GNNs and graph transformers.

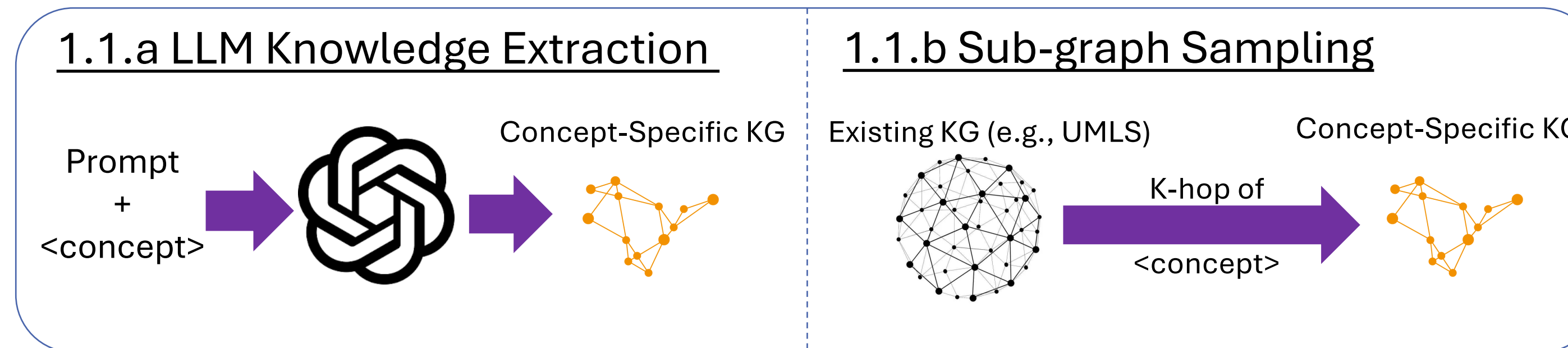
Method Overview



GraphCare Framework – Constructing Personalized Knowledge Graph for Various Healthcare Predictions.

Step 1:

1.1 Generate concept-specific KGs for every medical concept using LLM prompts and by subsampling from existing KGs.



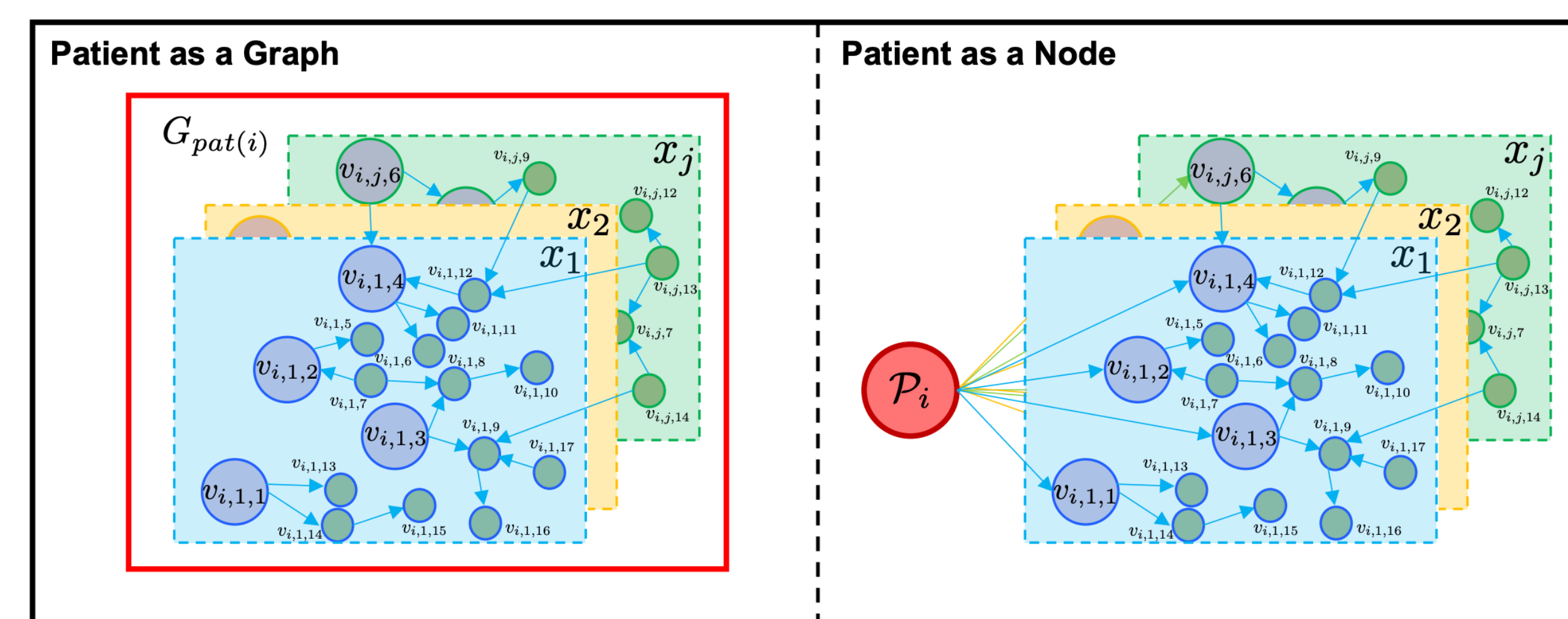
1.2 Perform node/edge clustering on across KGs.

Step 2:

For each patient, merge relevant concept-specific KGs to form a personalized KG.

Step 3:

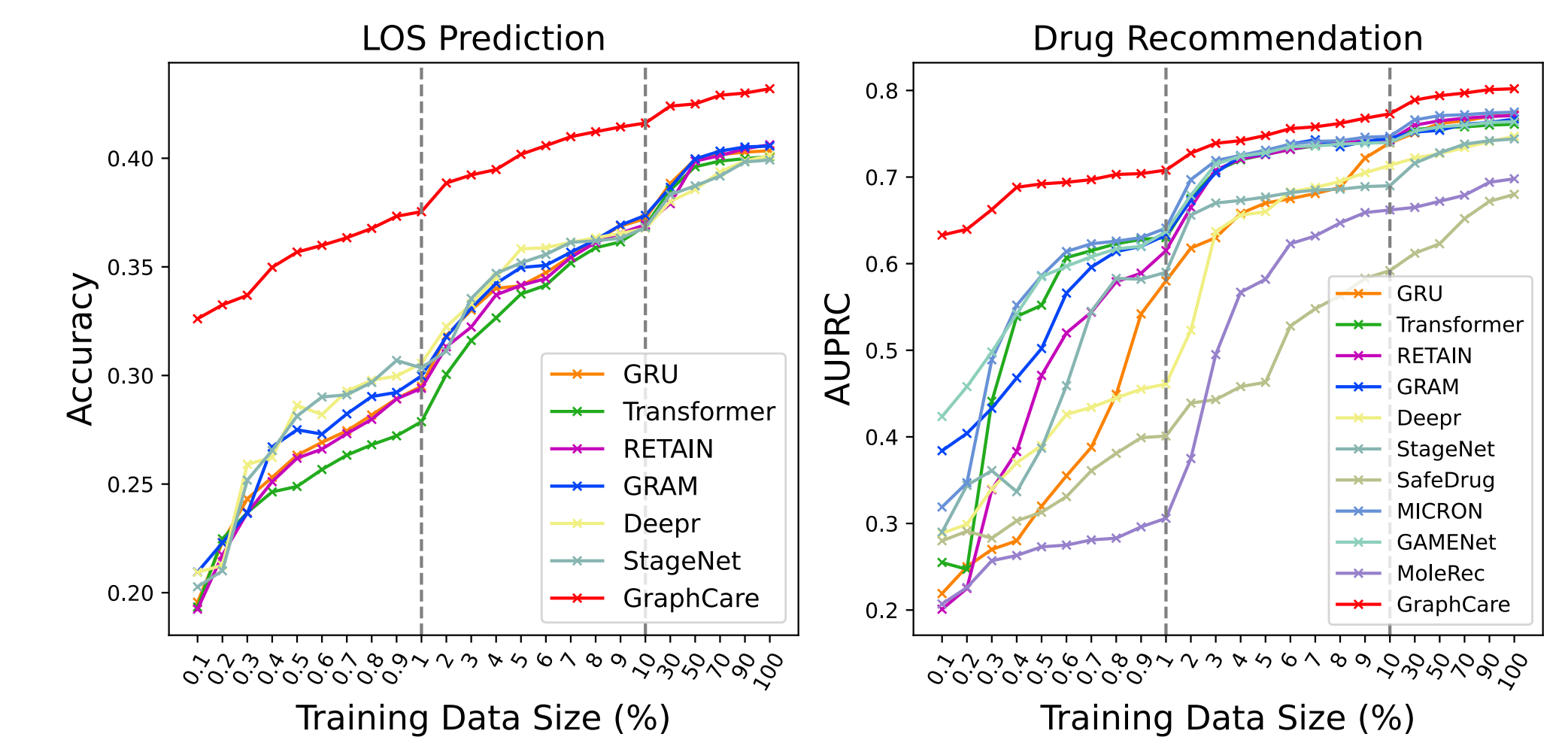
Employ Bi-attention Augmented (BAT) Graph Neural Network (GNN) to predict based on the personalized KGs.



$$h_i^{G_{pat}} = \text{MEAN}(\sum_{j=1}^J \sum_{k=1}^{K_j} h_{i,j,k}^{(L)}), \quad h_i^P = \text{MEAN}(\sum_{j=1}^J \sum_{k=1}^{K_j} \mathbb{1}_{i,j,k}^\Delta h_{i,j,k}^{(L)}),$$

$$z_i^{\text{graph}} = \text{MLP}(h_i^{G_{pat}}), \quad z_i^{\text{node}} = \text{MLP}(h_i^P), \quad z_i^{\text{joint}} = \text{MLP}(h_i^{G_{pat}} \oplus h_i^P)$$

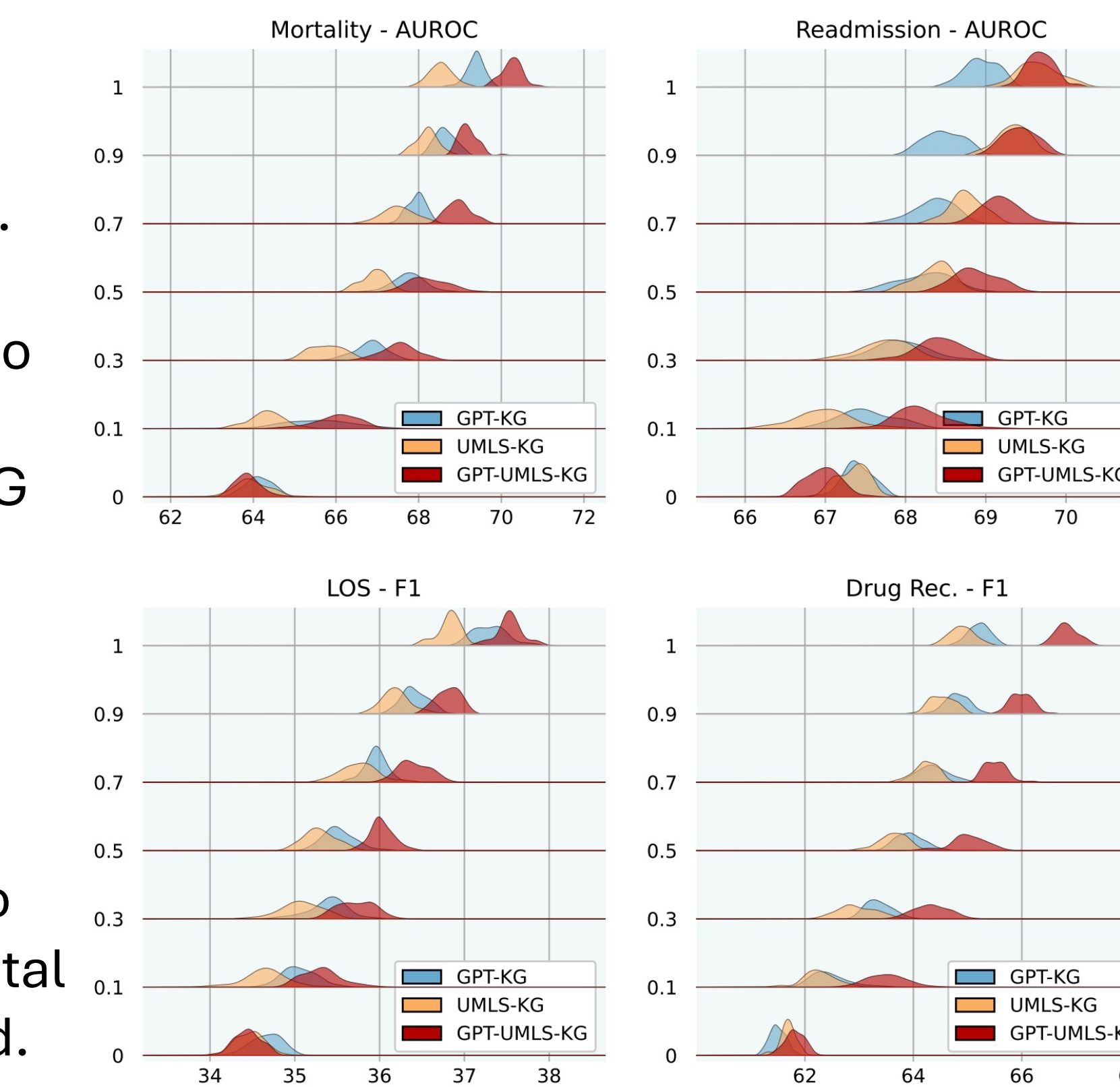
Performance vs. EHR Training Data



1. GraphCare exhibits a considerable edge over other models when confronted with scarce EHR training data.
2. Other graph-augmented methods (e.g. GRAM, GAMENet) also show a certain level of resilience against scarce data.

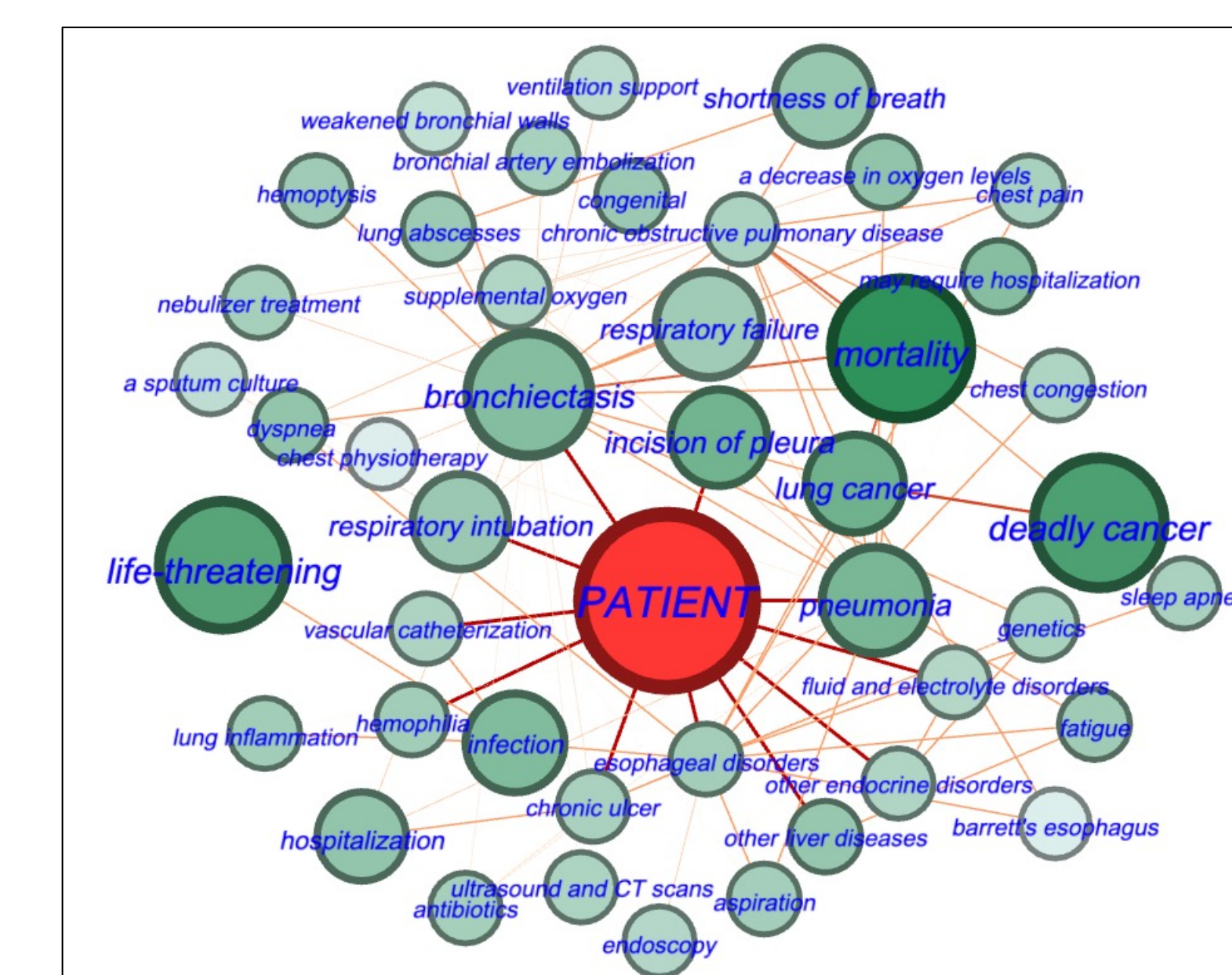
Performance vs. Knowledge Graph Size

1. Combined GPT-UMLS-KG outperforms both GPT-KG and UMLS-KG consistently.
2. GPT-KG contributes more to mortality and LOS predictions, while UMLS-KG edges out in readmission prediction.
3. Lower KG ratios are associated with larger standard deviations, due to the reduced likelihood of vital knowledge being contained.



Visualization of Personalized KG

Removing the indirect node “lung cancer” connecting crucial nodes “mortality” and “deadly cancer” results in a failure of mortality prediction.



Emphasizes the value of comprehensive health data and considering all potential health factors

Personalized KG is important!