Mining online data for public health surveillance Vasileios Lampos (a.k.a. Bill)

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Structure

Using online data for health applications

From web searches to syndromic surveillance

- i. Google Flu Trends: original failure and correction
- ii. Better feature selection using semantic concepts
- iii. Snapshot: Multi-task learning for disease models

Online data













amazon.com





When & why?

How?



When & why?

coveragespeedcost

How?



When & why?

coveragespeedcost



— collaborate with experts

- access to user activity data
- machine learning
- natural language processing

Evaluation?

When & why?

coverage
speed
cost



— collaborate with experts
— access to user activity data
— machine learning

natural language processing

Evaluation?

(partial) ground truth
model interpretation

- real-time

google.org Flu Trends

Language: English (United States)

-

Google.org home

Dengue Trends

Flu Trends

Home

Select country/regior 🗘

How does this work?

<u>FAQ</u>

Flu activity

Intense

High

Moderate

Low

Minimal

Explore flu trends around the world

We've found that certain search terms are good indicators of flu activity. Google Flu Trends uses aggregated Google search data to estimate flu activity. Learn more »



Google Flu Trends (discontinued)

google.org Flu Trends Language: English (United States) Flu Detector - Home Home About Docs Google.org home Explo **Dengue Trends** We've fou to estima **Flu Trends** GRAPH Home Select country/regior \$ Influenza-Like Illness Rate per Day How does this work? 150 Google/ FAQ England 100 Flu activity Intense 50 High 0 Moderate Low -50 2009 2011 2013 2015 2017 Minimal Data Filtering DATE RANGE Start End Resolution Smoothing 2018-02-02 2008-09-01 Week No smoothing \$ Only show data collected on or after this Only show data collected before (not How many data points to show Smooth the data to avoid overly spiky date including) this date results

Flu Detector, fludetector.cs.ucl.ac.uk



Health Map, healthmap.org

Health intervention



Impact?

Health intervention



Google

Impact?

Vaccinations against flu



Lampos, Yom-Tov, Pebody, Cox (2015) doi:10.1007/s10618-015-0427-9 Wagner, Lampos, Yom-Tov, Pebody, Cox (2017) doi:10.2196/jmir.8184

Google Flu Trends (GFT)



2008

Google Flu Trends (GFT)



GFT — Supervised learning

Regression

- Observations (X): Frequencies of n search queries for a location L and m contiguous time intervals of length T
- Targets (y): Rates of influenza-like illness (ILI) for L and for the same m contiguous time intervals, obtained from a health agency
- Learn a function **f** such that $f: X \in \mathbb{R}^{n \times m} \longrightarrow y \in \mathbb{R}^{n}$

GFT — Supervised learning

frequency of $q_i = \frac{\text{count of } q_i}{\text{total count of all queries}}$

Regression

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$$logit(P) = \beta_0 + \beta_1 \bigotimes_{O}^{\frac{1}{10}} logit(Q) + \varepsilon$$

Q P β₀

3

Aggregate frequency of a set of search queries Percentage (probability) of doctor visits Regression bias term Regression weight (one weight only)

independent, zero-centered noise

Q P β₀

3

Aggregate frequency of a set of search queries

Percentage (probability) of doctor visits

Regression bias term

Regression weight (one weight only)

independent, zero-centered noise



$$logit(P) = \beta_0 + \beta_1 \bigotimes_{\Theta}^{\frac{1}{1}} logit(Q) + \varepsilon$$

Q P β₀

3

Aggregate frequency of a set of search queries Percentage (probability) of doctor visits Regression bias term **Regression weight (one weight only)**

independent, zero-centered noise



GFT v.1 — "Logit", why?



12

values close to 0.5 are "**squashed**" border values (close to 0 or 1) are "**emphasised**"

GFT v.1 — Data

9 US regions considered

50 million search queries (*most frequent*) geolocated in these 9 US regions

Weekly ILI rates from CDC

170 weeks, 28/9/2003 to 11/5/2008 with ILI rate > 0

First 128 weeks: Training, 9 x 128 = 1,152 samples

Last 42 weeks: Testing (per region)

GFT v.1 — Feature selection (1/2)

- 1. Single query flu models are trained for each US region 50 million queries x 9 US regions = 450 million models
- Inference accuracy is estimated for each query using linear correlation (Pearson) as the metric
- 3. Starting from the best performing query, adding up one query each time, a new model is trained and evaluated

GFT v.1 — Feature selection (1/2)

Single query flu models are trained for each US region
 50 million queries x 9 US regions = 450 million models



GFT v.1 — Feature selection (2/2)

Search query topic	Top 45 queries	
	n	Weighted
Influenza complication	11	18.15
Cold/flu remedy	8	5.05
General influenza symptoms	5	2.60
Term for influenza	4	3.74
Specific influenza symptom	4	2.54
Symptoms of an influenza	4	2.21
complication		
Antibiotic medication	3	6.23
General influenza remedies	2	0.18
Symptoms of a related disease	2	1.66
Antiviral medication	1	0.39
Related disease	1	6.66
Unrelated to influenza	0	0.00
Total	45	49.40

GFT v.1 — Performance (1/2)

- Evaluated on 42 weeks (per region) from 2007-2008
- Evaluation metric: Pearson correlation
- μ(r) = .97 with min(r) = .92 and max(r) = .99
- Performance looked great at the time, but this is not a proper performance evaluation!

Why?

Potentially *misleading metric* (not the loss function here) and rather *small testing time span* (< 1 flu season)

GFT v.1 — Performance (2/2)



Mid-Atlantic US region Pearson correlation, r = .96

GFT v.2 — Data & evaluation

- weekly frequency of 49,708 search queries (US)
- filtered by a relaxed health topic classifier, intersection of frequent queries across all US regions
- from 4/1/2004 to 28/12/2013 (521 weeks)
- corresponding weekly US ILI rates from CDC
- test on 5 flu seasons, 5 year-long test sets (2008-13)
- train on increasing data sets starting from 2004, using all data prior to a test period

GFT v.1 was simple to a (significant) fault



GFT v.1 was simple to a (significant) fault



- "symptoms of pneumonia" 6%
- "upper respiratory infection" -4%

$$\operatorname{argmin}_{\mathbf{w},\beta} \left(\sum_{i=1}^{n} \left(\mathbf{x}_{i} \mathbf{w} + \beta - y_{i} \right)^{2} \right)$$

Least squares

$$\operatorname{argmin}_{\mathbf{w},\beta} \left(\sum_{i=1}^{n} \left(\mathbf{x}_{i} \mathbf{w} + \beta - y_{i} \right)^{2} \right)$$

Least squares

 $\mathbf{X} \in \mathbb{R}^{n \times m}$ frequency of *m* search queries for *n* weeks $\mathbf{x}_i \in \mathbb{R}^m, i \in \{1, \dots, n\}$... for week *i*

$$\operatorname{argmin}_{\mathbf{w},\beta} \left(\sum_{i=1}^{n} \left(\mathbf{x}_{i} \mathbf{w} + \beta - y_{i} \right)^{2} \right)$$

Least squares

 $X \in \mathbb{R}^{n \times m}$ frequency of *m* search queries for *n* weeks $\mathbf{x}_i \in \mathbb{R}^m, i \in \{1, \dots, n\}$... for week *i* $\mathbf{y} \in \mathbb{R}^n$ ILI rates from CDC for *n* weeks $y_i \in \mathbb{R}$... for week *i*

$$\operatorname{argmin}_{\mathbf{w},\beta} \left(\sum_{i=1}^{n} \left(\mathbf{x}_{i} \mathbf{w} + \beta - y_{i} \right)^{2} \right)$$

Least squares

 $\mathbf{X} \in \mathbb{R}^{n \times m}$ frequency of m search queries for n weeks $\mathbf{x}_i \in \mathbb{R}^m, i \in \{1, \dots, n\}$... for week i $\mathbf{y} \in \mathbb{R}^n$ ILI rates from CDC for n weeks $y_i \in \mathbb{R}$... for week i $\mathbf{w} \in \mathbb{R}^m$ weights for the m search queries $\beta \in \mathbb{R}$ intercept term
GFT v.2 — Linear multivariate regression



Least squares regression is **not** applicable here because we have **very few training samples** (*n*) but **many features** (search queries; *m*).

Models derived from least squares will tend to overfit the data, resulting to bad solutions.

intercept term

$$\operatorname{argmin}_{\mathbf{w},\beta} \left(\sum_{i=1}^{n} \left(\mathbf{x}_{i} \mathbf{w} + \beta - y_{i} \right)^{2} + \lambda_{1} \sum_{j=1}^{m} |w_{j}| + \lambda_{2} \sum_{j=1}^{m} w_{j}^{2} \right)$$

$$\underset{\mathbf{w},\beta}{\operatorname{argmin}} \left(\sum_{i=1}^{n} \left(\mathbf{x}_{i} \mathbf{w} + \beta - y_{i} \right)^{2} + \lambda_{1} \sum_{j=1}^{m} |w_{j}| + \lambda_{2} \sum_{j=1}^{m} w_{j}^{2} \right)$$

least squares

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least squares



L1 & L2-norm regularisers for the weights

$$\underset{\mathbf{w},\beta}{\operatorname{argmin}} \left(\sum_{i=1}^{n} \left(\mathbf{x}_{i} \mathbf{w} + \beta - y_{i} \right)^{2} + \lambda_{1} \sum_{j=1}^{m} |w_{j}| + \lambda_{2} \sum_{j=1}^{m} w_{j}^{2} \right)$$

least squares



L1 & L2-norm regularisers for the weights

- Encourages sparse models (feature selection)
- Handles collinear features (search queries)
- Number of selected features is not limited to the number of samples (n)

$$\operatorname{argmin}_{\mathbf{w},\beta} \left(\sum_{i=1}^{n} \left(\mathbf{x}_{i} \mathbf{w} + \beta - y_{i} \right)^{2} + \lambda_{1} \sum_{j=1}^{m} |w_{j}| + \lambda_{2} \sum_{j=1}^{m} w_{j}^{2} \right)$$

least squares

many weights will be set to zero!



- L1 & L2-norm regularisers 10-
- Encourages sparse models (feature selection)
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- Number of selected features is not limited to the number of samples (n)

GFT v.2 — Feature selection

- 1st layer: Keep search queries that their frequency time series has a ≥ 0.5 Pearson correlation with the CDC ILI rates (*in the training data*)
- 2nd layer: Elastic net will assign weights equal to 0 to features (search queries) that are identified as statistically irrelevant to our task

μ	(σ)	# C	luerie	es se	lected	d acro	oss all	training	data sets

# queries	r ≥ 0.5	GFT	Elastic net
49,708	937 (334)	46 (39)	278 (64)

GFT v.2 — Evaluation (1/2)

Target variable: $y = y_1, \ldots, y_N$ Estimates: $\hat{y} = \hat{y_1}, \ldots, \hat{y_N}$

Mean Squared Error:

Mean Absolute Error:

$$MSE(\hat{\mathbf{y}}, \mathbf{y}) = \frac{1}{N} \sum_{t=1}^{N} (\hat{y}_t - y_t)^2$$

$$\text{MAE}\left(\hat{\mathbf{y}}, \mathbf{y}\right) = \frac{1}{N} \sum_{t=1}^{N} |\hat{y}_t - y_t|$$

Mean Absolute Percentage of Error:

MAPE
$$(\hat{\mathbf{y}}, \mathbf{y}) = \frac{1}{N} \sum_{t=1}^{N} \left| \frac{\hat{y}_t - y_t}{y_t} \right|$$

GFT v.2 — Evaluation (2/2)



GFT v.2 — Evaluation (2/2)



GFT r = .89, MAE = $3.81 \cdot 10^{-3}$, MAPE = 20.4%**Elastic net** r = .92, MAE = $2.60 \cdot 10^{-3}$, MAPE = 11.9%



US ILI rates (CDC) ~ freq. of query 'flu'



US ILI rates (CDC) ~ freq. of query 'flu medicine'



US ILI rates (CDC) ~ freq. of query 'how long is flu contagious'



US ILI rates (CDC) ~ freq. of query 'how to break a fever'



US ILI rates (CDC) ~ freq. of query 'sore throat treatment'

GFT v.2 — Gaussian Processes (1/4)

$$f(\mathbf{x}) \sim \mathcal{GP}\left(m(\mathbf{x}), k(\mathbf{x}, \mathbf{x}')\right), \ \mathbf{x}, \mathbf{x}' \in \mathbb{R}^m, \ f: \mathbb{R}^m \to \mathbb{R}$$

- A Gaussian Process (GP) learns a distribution over functions that can explain the data
- Fully specified by a mean (m) and a covariance (kernel) function (k); we set m(x) = 0 in our experiments
- Collection of random variables any finite number of which have a multivariate Gaussian distribution

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inference $f^* \sim \mathcal{N}(0, \mathbf{K}), \ (\mathbf{K})_{ij} = k(\mathbf{x_i}, \mathbf{x_j})$

GFT v.2 — Gaussian Processes (2/4)

Common GP kernels (covariance functions)



GFT v.2 — Gaussian Processes (3/4)

Adding or multiplying GP kernels produces a new valid GP kernel



GFT v.2 — Gaussian Processes (4/4)

(x,y) pairs with obvious nonlinear relationship



GFT v.2 — Gaussian Processes (4/4)

least squares regression (poor solution)



GFT v.2 — Gaussian Processes (4/4)

sum of 2 GP kernels (periodic + squared exponential)



GFT v.2 — k-means and GP regression

- Clustering queries selected by elastic net into C clusters with k-means
- Clusters are determined by using cosine similarity as the distance metric (on query frequency time series)
- Groups queries with similar topicality & usage patterns

$$k(\mathbf{x}, \mathbf{x}') = \left(\sum_{i=1}^{C} k_{\text{SE}}(\mathbf{x}_{c_i}, \mathbf{x}'_{c_i})\right) + \sigma^2 \cdot \delta(\mathbf{x}, \mathbf{x}') \text{ noise}$$
$$\mathbf{x} = \{\mathbf{x}_{c_1}, \dots, \mathbf{x}_{c_{10}}\}$$
$$k_{\text{SE}}(\mathbf{x}, \mathbf{x}') = \sigma^2 \exp\left(-\frac{\|\mathbf{x} - \mathbf{x}'\|_2^2}{2\ell^2}\right)$$
clusters

GFT v.2 — Performance



GFT v.2 — Performance



Elastic net r = .92, MAE = $2.60 \cdot 10^{-3}$, MAPE = 11.9%GP r = .95, MAE = $2.21 \cdot 10^{-3}$, MAPE = 10.8%

GFT v.2 — Queries' added value



- Autoregression: Combine CDC ILI rates from the previous week(s) with the ILI rate estimate from search queries for the current week
- Various week lags explored (1, 2,..., 6 weeks)

GFT v.2 — Performance



GFT v.2 — Performance

1-week lag for the CDC data AR(CDC) r = .97, MAE = $1.87 \cdot 10^{-3}$, MAPE = 8.2%**AR(CDC,GP)** r = .99, MAE = $1.05 \cdot 10^{-3}$, MAPE = 5.7%

2-week lag for the CDC data AR(CDC) r = .87, MAE = $3.36 \cdot 10^{-3}$, MAPE = 14.3%**AR(CDC,GP)** r = .99, MAE = $1.35 \cdot 10^{-3}$, MAPE = 7.3%

GP r = .95, MAE = $2.21 \cdot 10^{-3}$, MAPE = 10.8%

011-10-30 2012-01-29 2012-04-29 2012-07-29 2012-07-29 2012-10-28 2013-01-27 2013-04-28 2013-07-28 2013-10-2

GFT v.2 — Non-optimal feature selection

- Queries irrelevant to flu are still maintained, e.g. "nba injury report" or "muscle building supplements"
- Feature selection is primarily based on correlation, then on a linear relationship
- Introduce a semantic feature selection
 - enhance causal connections (implicitly)
 - circumvent the painful training of a classifier

GFT v.3 — Word embeddings

- Word embeddings are vectors of a certain dimensionality (usually from 50 to 1024) that represent words in a corpus
- Derive these vectors by predicting contextual word occurrence in large corpora (word2vec) using a shallow neural network approach:

 Continuous Bag-Of-Words (CBOW): Predict centre word from surrounding ones
 skip-gram: Predict surrounding words from centre one
- Other methods available: GloVe, fastText

GFT v.3 — Word embedding data sets

Use **tweets** geolocated in the UK to learn word embeddings that may capture

- informal language used in searches
- British English language / expressions
- cultural biases

(a) 215 million tweets (February 2014 to March 2016), CBOW, 512 dimensions, 137,421 words covered

https://doi.org/10.6084/m9.figshare.4052331.v1

(b)1.1 billion tweets (2012 to 2016), skip-gram, 512 dimensions, 470,194 words covered

https://doi.org/10.6084/m9.figshare.5791650.v1

GFT v.3 — Cosine similarity



word embeddings



GFT v.3 — Cosine similarity

$\cos(\mathbf{v}, \mathbf{u}) = \frac{\mathbf{v} \cdot \mathbf{u}}{\|\mathbf{v}\| \|\mathbf{u}\|} = \frac{\sum_{i=1}^{n} v_i u_i}{\sqrt{\sum_{i=1}^{n} v_i^2} \sqrt{\sum_{i=1}^{n} u_i^2}}$

word embeddings

 $\max_{\mathbf{v}} \left(\cos(\mathbf{v}, \text{`king'}) + \cos(\mathbf{v}, \text{`woman'}) - \cos(\mathbf{v}, \text{`man'}) \right) \Rightarrow \mathbf{v} = \text{`queen'}$

$$\max_{\mathbf{v}} \left(\frac{\cos(\mathbf{v}, \text{`king'}) \times \cos(\mathbf{v}, \text{`woman'})}{\cos(\mathbf{v}, \text{`man'})} \right) \Rightarrow \mathbf{v} = \text{`queen'}$$

where $\cos(\cdot, \cdot) = (\cos(\cdot, \cdot) + 1)/2$

GFT v.3 — Cosine similarity



word embeddings





Negative context = $(\cos(\cdot, \cdot) + 1)/2$
The	for	not the	is ?
woman	king	man	2
him	she	he	2
better	bad	good	2
England	Rome	London	
Messi	basketball	football	\sim
Guardian	Conservatives	Labour	
Trump	Europe	USA	
rsv	fever	skin	?

The	for	not the	is ?
woman	king	man	queen
him	she	he	
better	bad	good	2
England	Rome	London	2
Messi	basketball	football	
Guardian	Conservatives	Labour	
Trump	Europe	USA	
rsv	fever	skin	?

The	for	not the	is ?
woman	king	man	queen
him	she	he	her
better	bad	good	
England	Rome	London	
Messi	basketball	football	2
Guardian	Conservatives	Labour	
Trump	Europe	USA	
rsv	fever	skin	?

The	for	not the	is ?
woman	king	man	queen
him	she	he	her
better	bad	good	WOrse
England	Rome	London	Italy
Messi	basketball	football	Lebron
Guardian	Conservatives	Labour	Telegraph
Trump	Europe	USA	Farage
rsv	fever	skin	flu

GFT v.3 — Better query selection (1/3)

- 1. Query embedding = Average token embedding
- Derive a concept by specifying a positive (P) and a negative (N) context (sets of n-grams)
- Rank all queries using their similarity score with this concept

GFT v.3 — Better query selection (1/3)

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- Derive a concept by specifying a positive (P) and a negative (N) context (sets of n-grams)
- Rank all queries using their similarity score with this concept

$$S\left(\mathcal{Q}, \mathcal{C}\right) = \frac{\sum_{i=1}^{k} \cos\left(\mathbf{e}_{\mathcal{Q}}, \mathbf{e}_{P_{i}}\right)}{\sum_{j=1}^{z} \cos\left(\mathbf{e}_{\mathcal{Q}}, \mathbf{e}_{N_{j}}\right) + \gamma}$$

GFT v.3 — Better query selection (1/3)

- 1. Query embedding = Average token embedding
- Derive a concept by specifying a positive (P) and a negative (N) context (sets of n-grams)
- Rank all queries using their similarity score with this concept

query embedding

$$S\left(\mathcal{Q}, \mathcal{C}\right) = \frac{\sum_{i=1}^{k} \cos\left(\mathbf{e}_{\mathcal{Q}}, \mathbf{e}_{P_{i}}\right)}{\sum_{j=1}^{z} \cos\left(\mathbf{e}_{\mathcal{Q}}, \mathbf{e}_{N_{j}}\right) + \gamma}$$

embedding of a negative _____ constant to avoid concept n-gram _____ division by 0

GFT v.3 — Better query selection (2/3)

Positive context	Negative context	Most similar queries
#flu fever flu flu medicine gp hospital	bieber ebola wikipedia	cold flu medicine flu aches cold and flu cold flu symptoms colds and flu
flu flu gp flu hospital flu medicine	ebola wikipedia	flu aches flu colds and flu cold and flu cold flu medicine

GFT v.3 — Better query selection (3/3)



Given that the **distribution** of concept similarity scores appears to be **unimodal**, we standard deviations from the mean ($\mu_S + \theta \sigma_S$) to determine the selected queries

GFT v.3 — Hybrid feature selection

- Embedding based feature selection is an unsupervised technique, thus non optimal
- If we combine it with the previous ways for selecting features, will we obtain better inference accuracy?

We test 7 feature selection approaches:

- similarity \rightarrow elastic net (1)
- correlation \rightarrow elactic net (2) \rightarrow GP (3)
- similarity \rightarrow correlation \rightarrow elastic net (4) \rightarrow GP (5)
- similarity \rightarrow correlation \rightarrow GP (6)
- correlation \rightarrow GP (7)

GFT v.3 — GP model details

Skipped in the interest of time!

If you're interested, check Section 3.1 of https://doi.org/10.1145/3038912.3052622

GFT v.3 — Data & evaluation

- weekly frequency of 35,572 search queries (UK)
- from 1/1/2007 to 9/08/2015 (449 weeks)
- access to a private Google Health Trends API for healthoriented research
- corresponding ILI rates for England (Royal College of General Practitioners and Public Health England)
- test on the last 3 flu seasons in the data (2012-2015)
- train on increasing data sets starting from 2007, using all data prior to a test period

GFT v.3 — Performance (1/3)

- (a) similarity \rightarrow elastic net
- (b) correlation \rightarrow elactic net
- (c) similarity \rightarrow correlation \rightarrow elastic net



GFT v.3 — Performance (1/3)

- (a) similarity \rightarrow elastic net
- (b) correlation \rightarrow elactic net
- (c) similarity \rightarrow correlation \rightarrow elastic net



GFT v.3 — Performance (2/3)

Elastic net with and without word embeddings filtering



GFT v.3 — Performance (2/3)

Elastic net with and without word embeddings filtering



ratio over highest weight

prof. *surname* (70.3%), *name surname* (27.2%), heal the world (21.9%), heating oil (21.2%), *name surname* recipes (21%), tlc diet (13.3%), blood game (12.3%), swine flu vaccine side effects (7.2%)

GFT v.3 — Performance (3/3)

(a) correlation → GP
(b) correlation → elastic net → GP
(c) similarity → correlation → elactic net → GP
(d) similarity → correlation → GP



GFT v.3 — Performance (3/3)

(a) correlation → GP
(b) correlation → elastic net → GP
(c) similarity → correlation → elactic net → GP
(d) similarity → correlation → GP



Multi-task learning

- *m* tasks (problems) t_1, \ldots, t_m
- observations $X_{t_1}, y_{t_1}, \dots, X_{t_m}, y_{t_m}$
- learn models f_{t_i} : $X_{t_i} \rightarrow y_{t_i}$ jointly (and not independently)

Why?

- When tasks are related, multi-task learning is expected to perform better than learning each task independently
- Model learning possible even with a few training samples

Multi-task learning for disease modelling

• m tasks (problems) t_1, \ldots, t_m

• observations $\mathbf{X}_{t_1}, \mathbf{y}_{t_1}, \dots, \mathbf{X}_{t_m}, \mathbf{y}_{t_m}$

• learn models f_{t_i} : $X_{t_i} \rightarrow y_{t_i}$ jointly (and not independently)

Can we **improve disease models** (*flu*) from online search:

- when sporadic training data are available?
- across the geographical regions of a country?
- across two different countries?

Multi-task learning GFT (1/5)



Can multi-task learning across the 10 US regions help us improve the national ILI model?

Multi-task learning GFT (1/5)

Can multi-task learning across the 10 US regions help us improve the national ILI model?



Multi-task learning GFT (1/5)

Can multi-task learning across the 10 US regions help us improve the national ILI model?



Multi-task learning GFT (2/5)

Can multi-task learning across the 10 US regions help us improve the regional ILI models?



Multi-task learning GFT (3/5)

- Can multi-task learning across the 10 US regions help us improve regional models under sporadic health reporting?
- Split US regions into two groups, one including the 2 regions with the highest population (4 and 9 in the map), and the other having the remaining 8 regions
- Train and evaluate models for the 8 regions under the hypothesis that there might exist sporadic health reports
- Start downsampling the data from the 8 regions using burst error sampling (random data blocks removed) with rate γ (1 no sampling, 0.1 10% sample)

Multi-task learning GFT (3/5)



 Start downsampling the data from the 8 regions using burst error sampling (random data blocks removed) with rate γ (1 no sampling, 0.1 10% sample)

Multi-task learning GFT (4/5)

- Correlations between US regions induced by the covariance matrix of the MT GP model
- Multi-task learning model seems to be capturing existing geographical relations



Multi-task learning GFT (5/5)

5 years of training data

e r

Can multi-task learning across countries (US, England) help us improve the ILI model for England?

MAE



Multi-task learning GFT (5/5)

Can multi-task learning across countries (US, England) help us improve the ILI model for England?



Conclusions

- Online (user-generated) data can help us improve our current understanding about public health matters
- The original Google Flu Trends was based on a good idea, but on very limited modelling effort, resulting to major errors
- Subsequent models improved the statistical modelling as well as the semantic disambiguation between possible features and delivered better / more robust performance
- Multi-task learning improves disease models further
- Future direction: Models without strong supervision

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