



## Health Seekers Understanding Medical Terminology from the Health Care Experts

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### Abstract

The patients are looking the online health care suggestion and the solution for the first rendered to an injured person before treatment by a doctors. The patients need for the health care from the worldwide doctors about their health. The doctors communicate with the patients about their health and any type of health questions. The doctors are suggesting them over the complex and the complicated of the patients. Happening in the near future the people using external dictionary for the related medical words that really wasn't enough for helping the patients at online services. Local mining approach attempts to the people who ask any type of questions that can be viewed and replayed from the number of healthcare experts. The forward offer suggest scheme consists of two mutually reinforced components, the names are, local mining and the global learning. The local mining methods of working in any art that using for the particular medical records for explain the overall benefit and conclusion regarding particular health mapping by authentication terminology. The database of the local Mining is getting and update the through data of the global learning, which collects the related medical data. This attempt is the particular pair of Q&A independently over the concept of medical extraction from pairing it through Q&A and maps it through the terminologies of authentication. This research work a novel scheme is put forward which will be able to the code medical records with corpus-aware terminologies. As the first of its kind on automatically coding the community generated health data using the concept entropy of the impurity approach to comparatively for detect and normalize the medical concepts locally, naturally construct a corpus-aware terminology vocabulary with the help of external knowledge. Also it construction a novel from the global learning model to working in unity with enhance the local coding results. The joining line formed when the another kind information cues. For the making a communication between the gaps, it is being described over here about the label of Question and Answer by joining and utilizing the approaches of global learning and the local mining. This research also presents the new approach that provides the health seeker convert the medical terminologies into the local languages and they can easily understand the Information.

**Keywords:** Natural Language Processing (NLP), Automatic Term Recognition (ATR), Support Vector Machine (SVM), Hidden Markov Model (HMM), Local Mining, Global Mining.

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### Introduction

The tendency in recent decades to computerize the process of disease treatment ensures a more rapid accumulation of medical information. Information technologies are actively used in the sector of health protection. National electronic health records systems and medical imaging archives are implemented all over the world. Health care institutions implement and deploy hospital information systems (HIS), radiological picture reviewing and archiving systems (PACS), laboratory information systems (LIS), and others. Medical information systems (hereinafter – MIS) accumulate a

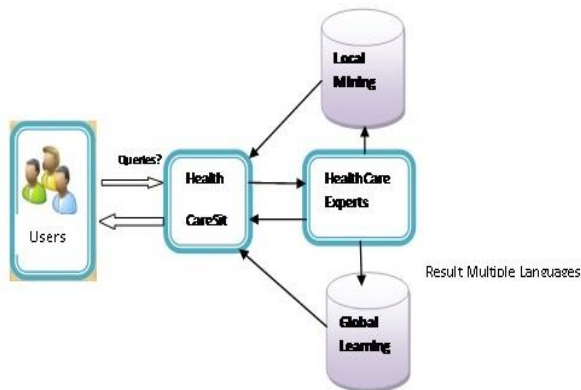
structured medical history of a patient which includes classified attributes, such as diagnosis, patient demographic data, vital functions, test results, and unstructured data, such as images and video files. Analysis and mining of this data are strategically significant to the health sector and important to each patient. An intellectual analysis of the accumulated data offers new instruments for the following tasks: faster patient diagnosis, selection of optimal treatment, prediction of treatment duration and its outcome, determination of complication risks, and optimization of healthcare facility resources.

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## System Architectural of Proposed system



**Figure 1.** Proposed Method Architecture

### Architectural Overview

Local mining approach suffers from three limitations: information loss, lower precision and overwidened terminology space problems. The information loss is caused by some missing key concepts of the given medical record. They, however, are probably present in the semantically similar neighbors. Supposing  $t_j$  denotes the terminology corresponding to the missing key concept  $c_j$  in the given medical record  $q_i$ .

According to our pseudo label estimation, the relevance score between feature vector and Gaussian similarity will be initialized very high, because most of samples in are comparatively similar to feature vector. The empirical loss function term in our model forces the learning relevance probabilities to approach estimate the relevance. In addition, the first regularize term in our model also ensures that the relevance score between  $t_j$  and feature vector should be close to the scores between Gaussian similarity and the neighbors of feature vector. Consequently, the global learning is able to discover the missing key concepts from underlying connected medical data and strongly link them to the given medical record.

The presence of irrelevant concepts results in the lower precision. Typically, these irrelevant medical concepts have grammatical meaning for communication between humans to help understand their intent, but they have less medical highlights and sparsely distribute in semantically similar data space. Even though estimated relevance is initialized to be 1 and the empirical loss function attempts to make approaching 1, the first regularize term will bring the relevance score down. This is able to keep off these irrelevant concepts from the global learning.

### Proposed Approach

#### INTEGRATE A GREEDY APPROACH FOR BRIDGING INFORMATION GAP

In this approach machine learning is achieved by use of Global learning and local mining techniques. Normally user gets result from local mining database. If user requested query answer is not matched with local mining database, the result checking process will be happen in the global learning database[1]. Global learning database is a large collection of medical related resources; it helps to get the exact result based on the query keyword.

### Algorithm

#### Input

Source Domain Dataset  $D^s$ ,  
Target Domain Dataset  $D^t$ ,  
Knowledge base  $K$ ,  
Terminating threshold  $t$ ,

#### Output

A subset  $D$  from  $K$

#### Initialize

Set  $D=0$

#### Preprocess

Set  $D_0 = \text{select}(D^s, D^t, K)$   
Where  $D^s \cup D^t = 1$ ,  
If  $D^s \cup D^t = 1$   
While  $D_0 \neq 0$  do  
For  $j=1$  to  $k$  do  
Select  $D^t$  from  $D^s$   
End

#### Output $D$

End if

Convert  $D$  to Multiple local Languages.

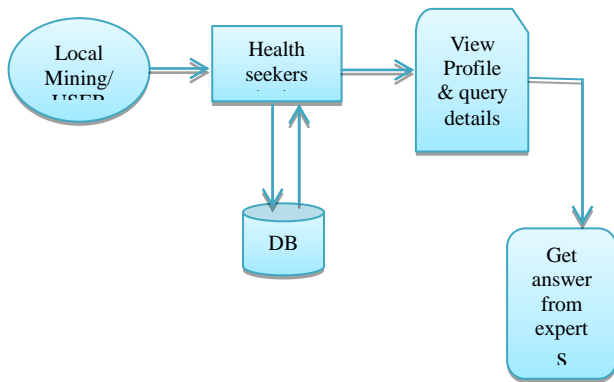
Stored in Global Data Pool.

End

This search process is a completely indexed and retrieval time of query result is faster. In case if the result is not provides due to the resource insufficiency, the query will be moved to the expert. Once experts arrives, they reviewed the query result and send that result to user and also updates that result to the local mining database for future search.

### Local Mining

The Local mining the health seeking persons get the answers from their queries from health experts.[2] Then accomplish this task to establish a tri-stage frame work, that given medical record to be analyzed and store the important medical terms into multiple languages.



**Figure II.** Local Mining Approach

**Noun Phrase Extraction to the Phases**

To essence drawn all the noun phrases, initially assigned the part of speech and tags to each word in the given on the medical record by the Stanford POS tagger. Then the pull out of the sequences that match a fixed pattern of the noun phrases.

Since the following complex sequence are can be the extracted as a noun phrase: (ie)the lung cancer disease are spreading the germs to theterminal treatment”.The addition to simply pulling out the phrases, this also do some simple post processing to link the various of the,such as singularizing of the plural variants.

**Medical Code Normalization**

Medical code are defined the medical domain to specific the noun phrases; this cannot ensure that they are standardized terminologies. Take the “birth control” (ex), it is know again as the medical concept by the approach, but it is not an authenticated terminology. Therefore, it is essential to normalize the detect to the medical concepts according to the standardized dictionary and the external

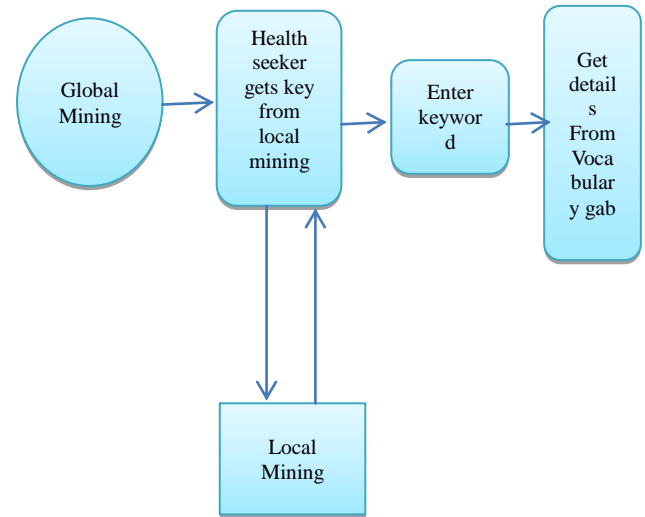
Normalization of the this key to bridg to the vocabulary gap. Take the ICD an (example) it is typically used for the external reporting and the requirements or other uses where the data aggregation is advantageous.

The local mining, here use SNOMED CT since, the core provides general terminologies for the electronic health record and formal logic-based hierarchical structure.

**Global Learning**

The main target of this global mining learn appropriate terminologies from the global terminology space T to annotate the each medical record q in Q. Among the existing machine learning methods, graph-based on the learning achieves promising performance. This also the explore of the graph-based learning model to accomplish in this terminology selection to the task, and the expect of this model is able to simultaneously

consider by the various heterogeneous cues, that include the medical record content by the analysis, terminology-sharing the networks, and the inter-expert as well as the inter-terminology to the relationships. The first introduce relationship identification and then the detail how to use this proposed model to link the underlying connected medical records[3]. Next, to present the optimal solution for this learning model followed by the label bias estimation. Finally, the scalability of this proposed method.



**Figure III.** Global Learning Approach

**Experimental Results**

The document retrieval the module can retrieve the locally stored by the documents; it is remote facility retrieving the relevant documents from the medical websites using the Google search for service. This medical websites are sorted from the previously defined medical website and the classification. This medical website classification is performing before the real-time execution for the Google search engine and the consists of defining the different medical website classes where the system can retrieve the medical documents. Document retrieval engine can start retrieving those the relevant documents and the medical websites whether there exists or not the association between the searched the question and the medical websites.[4]When the treated generic question has been the related to the one medical websites class then the Google search engine retrieveing the relevant documents according to the question keywords in these medical websites.

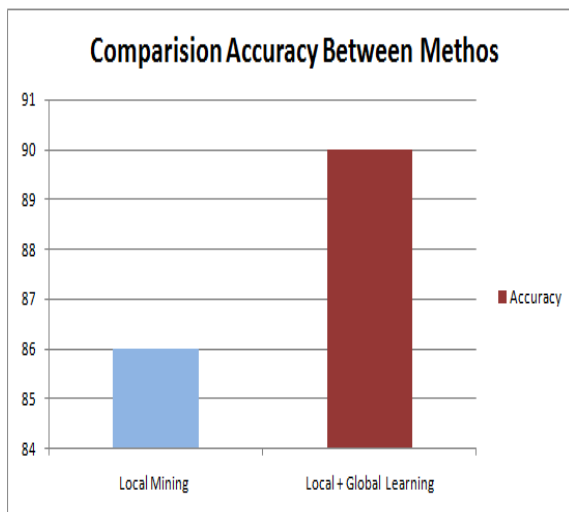


Figure IV. Accuracy Comparison

The graph represents evaluation results. When compare to local mining global learning separately, the combine approach of the local network and global network is producing good results within the performance parameters like Precision, Recall and Accuracy data.

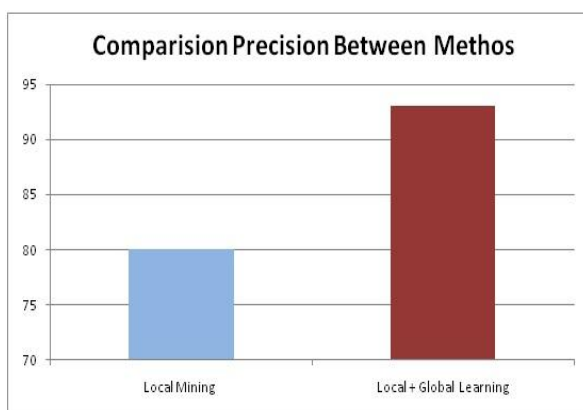


Figure V. Precision Performance between Approaches

This approach is not keep up patient history. So algorithm implemented patient history maintenance process. The system proposes three-fold approach based on data fragmentation, database websites clustering and intelligent data distribution. This approach reduces the amount of data migrated between websites during execution; achieves cost-effective communications during processing and improves response time and throughput. This data communication approach intends to decrease the data increase system throughput, data integrity, reliability, and data availability. The web sites are grouped into clusters by using this clustering service technique in a phase prior to data allocation. The purpose in this clustering to reduce for the data communications cost needed for data allocation.

This approach gives balance between information sharing between health seekers health care experts.[5] Some approach gives only English dictionary

conversion from the data set but it's not very effective whether all health seekers not well known in English pronouncing person while this approach has given dataset to some of multiple local languages that can be very easy to under stable manner to the health seekers.

This approach presents a medical terminology assignment scheme to bridge the language gap between health seekers and healthcare knowledge. The schedule compare between the two components, of the local mining and the global learning. The establishes former tri-stage framework to locally to the medical record. Ever the local mining approach may be suffer like from information loss and low precision, which are the caused by the absence of key medical concepts and the presence of the irrelevant medical concepts. The propose a global learning approach motivates to the compensate for the insufficiency of local coding approach.

The second one is the component work in unity with learns and propagates terminologies among the underlying to the connect medical records. It is enables to the integration of the heterogeneous message. Extensive evaluations on a real-world dataset demonstrate that this scheme is able to produce promising performance as compared to the prevailing coding methods. More importantly, the whole process of proposed approach is unsupervised and holds potential to handle large-scale data.

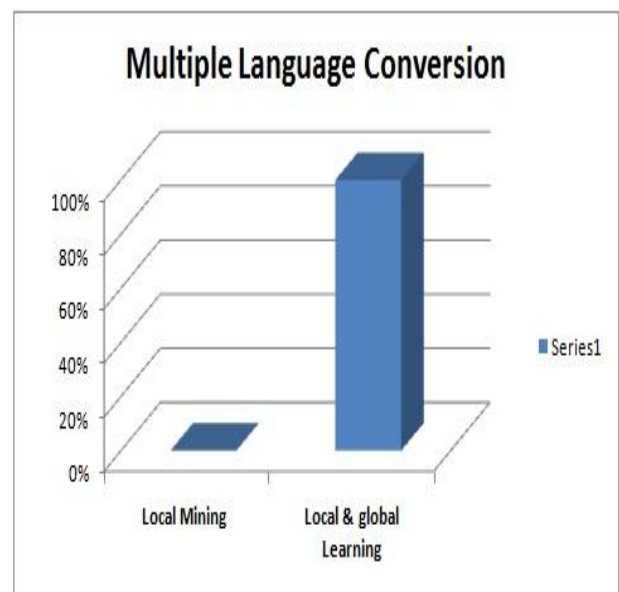


Figure VI. Multiple Language Conversion between Approaches

Machine learning in this Approach is achieved by the use of Local Mining and Global Learning techniques. The Local Mining database gets to updated like the Global learning data from once user posts a newer Kind of Query to the Answering System. The Global learning Compare a large collection of Medical Related Resources in its backend which helps to retrieve a related resource to the Query based on terminology keywords. This Search is completely indexed and thus

the retrieval time is faster. The Query and the Question will be left the resource insufficiency and pending state till an expert arrives. Once Experts reviewed the query the answers not only dispatches to the Medical Seekers and it updates the Local Mining Database for future Question and its retrieval to the related Queries from other Users.

The local mining approach may suffer from information loss and low precision, which that cause by the absence key of the medical concepts and the presence of mismatch medical concepts. This motivation propose to the global learning approach to the h compensate is not enough of local coding approach.[6]The second one is the collaboratively learns and propagates terminologies among like underlying connected to the medical records. It enables to the integration of the heterogeneous information. Extensively evaluations of the real-world dataset and the database demonstrate of our scheme that is able to produce promising performance as compared to the prevailing coding methods. Most importantly, to the complete process of our approach is an unsupervised and the holds potential to the handle large-scale data. Local Mining Gives direct Answers and Global Learning is implemented as a Search Engine

### Conclusion and Future Work

The proposed approach is primarily bearing in mind over the concept of shared approach of local mining and global learning. This shared approach is serving the patients to get benefit by the expert's implication, the patients are also not able to get the health care experts always and health care experts also haven't all the records of any particular patient, every health care expert have more number of patients. The proposed approach consist of a combined approach within the local mining and global learning, where the corpus aware terminology is being used for making a communication between the medical support seeker and the medical care providers. The corpus terminology is having the combined approaches of local mining and global learning, where the approach of local mining undergoes within the process of stemming, noun phrase extraction, spell check, normalization and detection of medical concept. The global learning maps the query against the indexed text or keyword that is pertinent to the medical records. The query is being mapped within the local database and health seekers. The output is being formed based on the patients query and construct no of local languages. In the future, search can be conceded out on how to flexibly organize the unstructured medical content into user needs-aware ontology by leveraging the recommended medical terminologies.

### References

1. Terol RM, Martinez-Barco P, Palomar M. "A knowledge based method for the medical question answering problem". *Computers in Biology and Medicine*. 2007; 37(10):1511-21.
2. Niu Y, Hirst G. "Analysis of semantic classes in medical text for question answering". *Proceedings of the ACL 2004 Workshop on Question Answering in Restricted Domains*. 2004; p. 1-8.
3. G. Leroy and H. Chen, "Meeting medical terminology needs-the ontology-enhanced medical concept mapper," *IEEE Trans. Inf. Technol. Biomed.*, vol. 5, no. 4, pp. 261–270, Dec. 2001.
4. G. Zuccon, B. Koopman, A. Nguyen, D. Vickers, and L. Butt, "Exploiting medical hierarchies for concept-based information retrieval," in *Proc. Australasian Document Comput. Symp.*, 2012, pp. 111–114.
5. E. J. M. Lauria and A. D. March, "Combining Bayesian text classification and shrinkage to automate healthcare coding: A data quality analysis," *J. Data Inf. Quart.*, vol. 2, no. 3, p. 13, 2011.
6. L. Yves A., S. Lyudmila, and F. Carol, "Automating ICD-9-cmencoding using medical language processing: A feasibility study," in *Proc. AMIA Annu. Symp.*, 2000, p. 1072.