

# NAM Digital Learning Collaborative: Practical Challenges for AI/ML Development, Spread, and Scale

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# Model Explainability

- Machine learning methods
  - Lauded for achieving higher accuracy than traditional statistical methods
  - Criticized for being ‘black boxes’ that are not explainable or interpretable
- One of the key limitations in scale and spread of ML methods has been in areas where transparency and explainability are needed

# Rise of Demand for Explainability

- Pivotal Moment: European Union passing General Data Protection Regulations that specifically cover requirements for transparency in automated modeling set to be law in 2018
- DARPA Explainable Artificial Intelligence (2016) RFA/Announcement

# Explainable to Whom? How? For What?

- What is explainability, really?
- Whole notion of allowing data science to determine interactions and relationships in the data that are not discernable to humans is core to the discipline
- Not all models have to be interpretable to achieve the desired effect
- Complex ‘traditional statistical’ models are not necessarily easily explainable

# Explainability

- Who needs the explanation, and for what:
  - Medical Professional
    - needs to know what is modifiable in the clinical context
    - Needs to know likely impact of using the data - change in outcome(s)
  - Patient
    - needs to trust that the model is not discriminatory (race, SES, gender, sexual orientation, sensitive clinical conditions, etc)
    - Needs to be able to which of their characteristics were important in the modeling and resulting care decisions
  - Medical Societies
    - Needs to know that care supported by modeling is consistent with best practice guidelines and care recommendations

# Active Areas of Research

- Methods for visualizing model outputs in a way that are clinically interpretable
- Use of simpler models on top of ML to provide interpretation
- explaining individual prediction versus overall model (parameters, etc)

# Overall Model Performance

- How much accuracy is needed for clinical implementation?
- Application & Context Dependent
  - Population Health Care Management
  - Point of Care Management
- Knowing when it is sufficient to use a model to separate a 'yes' from a 'no' (discrimination) and when do you need a range of probabilistic predictions (calibration)

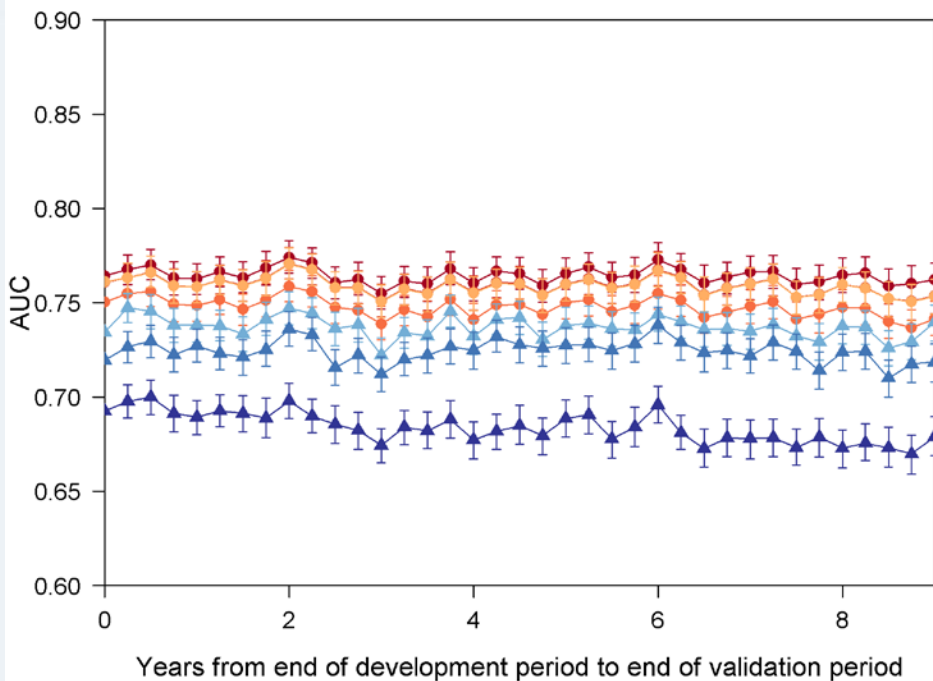
# Challenges in Re-Use (Spread) of Models

- Immediately, external application of models face:
  - Variation in underlying data collection
  - Variation in implementation of features
  - EHR Implementation: Real-Time Data changes ('dirty production data')
- Performance Over Time:
  - Changes in clinical practice
  - Changes patient case mix and outcome rates
  - Changes in data collection practices

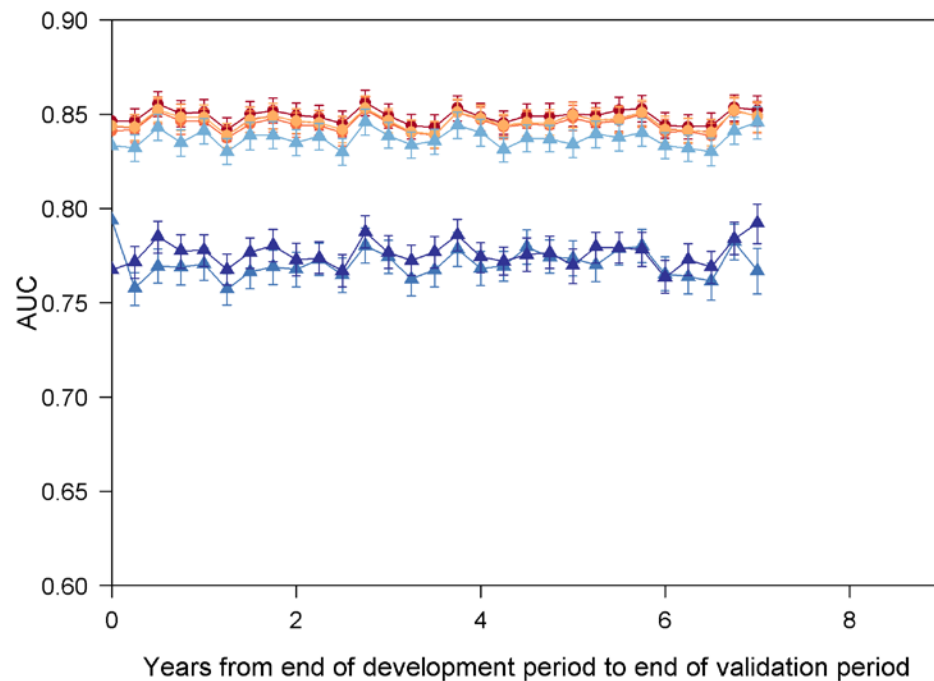


# Discrimination Over Time

## Acute Kidney Injury



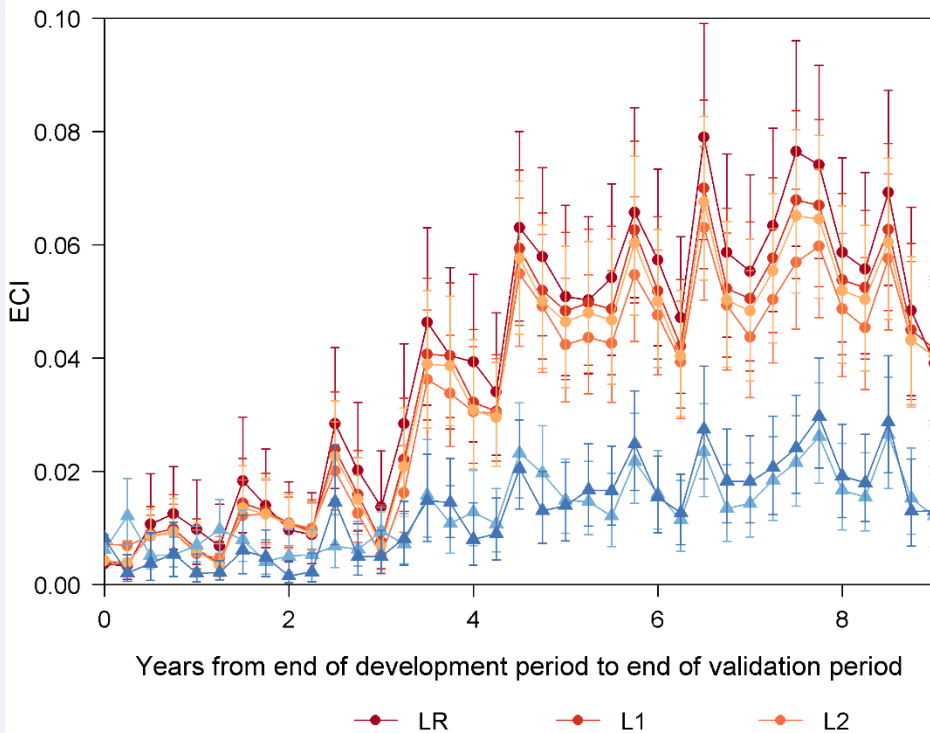
## 30-Day Mortality



● LR    ● L1    ● L2    ● L1-L2    ▲ RF    ▲ NN    ▲ NB

# Calibration Over Time: Estimated Calibration Index

## Acute Kidney Injury



## 30-Day Mortality

