

Case Study: Natural-Language-Processing (NLP) with Open Data for Drug Repositioning on Glioblastoma Therapy

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Agenda

- Introduction
- Methodology
- Results & Discussion
- Limitations & Further research

Introduction

Speaker Introduction

Curdin Marxer

- BSc. Information Science
- MSc. in Business Administration: Information and Data Management
- Research assistant at the Centre for Data Analytics, Visualization and Simulation (DAViS) of the University of Applied Sciences of the Grisons in Chur, Switzerland



Introduction

Background of our research

- Part of a collaborate research project between the DAViS Centre and two neurosurgeons of the Cantonal Hospital of Winterthur
- CUSP9v3 - an innovative combined regimen of nine repurposed non-oncological drugs with metronomic temozolomide for the treatment of glioblastoma (malignant brain tumor)
- Our overarching research goal is to predict new possible drug candidates for repositioning by harvesting multiple different data sources using ML/DL techniques
- This research started as a master's thesis with the main research question:

How can unstructured text data be used to identify new drug repositioning candidates and how can they complement databases?

Introduction

Drug development and the role of drug repositioning

- The development and discovery of new drugs is costly, risky and takes a lot of time
- The success rate of a newly developed drug to be clinically approved and to reach world-wide markets is below 10%
- Many newly developed medical compounds end up abandoned
- **Drug repositioning/repurposing** describes the process of identifying and developing new uses for already existing drugs or known active compounds
- Discover new use cases of known drugs by harvesting knowledge of previous research
- Highly beneficial (commercially and for patients), especially for rare diseases

Introduction

Some strategies for drug repositioning

- **side-effect-based approaches**

- based on the idea that therapeutically observed side effects of already developed drugs can also provide information about possible alternative uses

- **similarity-based approaches**

- similarity between two drugs can be determined based on the culmination of multiple similarities in chemical structure, overlap of molecular target structures and side effects.
- similarities between diseases can be concluded through ontologies or shared treatment profiles

Introduction

Challenges of working with drug data

- Highly complex and strongly interconnected data
- Amounts of biomedical data on drugs and the number of available repositories and databases are constantly increasing
- Data of these repositories or databases differ significantly in terms of scope, quality and reliability – causing inconsistencies
- Raise the challenge in selecting the adequate database(s) containing the required information

Introduction

Examples of these inconsistencies based on our Case Study

Drugs used to treat Glioblastoma Multiforme

The following list of medications are in some way related to or used in the treatment of this condition.

All drug classes Show filters

Drug name	Rating	Reviews	Activity	Rx/OTC	Preg	CSA	Alcohol
Avastin	8.3	7 reviews	<div style="width: 100%;"></div>	Rx	C	N	
Temodar	9.0	1 review	<div style="width: 100%;"></div>	Rx	D	N	
temozolomide	9.0	2 reviews	<div style="width: 100%;"></div>	Rx	D	N	
bevacizumab	8.5	8 reviews	<div style="width: 100%;"></div>	Rx	C	N	
Matulane	Rate	Add review	<div style="width: 100%;"></div>	Rx	D	N	X
hydroxyurea <small>Off-label</small>	Rate	Add review	<div style="width: 100%;"></div>	Rx	D	N	
BiCNU	Rate	Add review	<div style="width: 100%;"></div>	Rx	D	N	
Gliadel	Rate	Add review	<div style="width: 100%;"></div>	Rx	D	N	
carmustine	Rate	Add review	<div style="width: 100%;"></div>	Rx	D	N	
Mvasi	Rate	Add review	<div style="width: 100%;"></div>	Rx	C	N	
procarbazine	Rate	Add review	<div style="width: 100%;"></div>	Rx	D	N	X
Zirabev	Rate	Add review	<div style="width: 100%;"></div>	Rx	C	N	
Allymsy	Rate	Add review	<div style="width: 100%;"></div>	Rx	C	N	

drugs.com



DRUG	DRUG NAME
DB00262	Carmustine
DB00762	Irinotecan
DB06192	Nimotuzumab
DB00853	Temozolomide

Showing 1 to 4 of 4 entries

go.drugbank.com

(4 “drug” indications and 316 “drug trial” indications)

Drug results: 7

temozolomide	Temozolomide is not directly active but undergoes rapid nonenzymatic DNA.
bevacizumab	An anti-VEGF humanized murine monoclonal antibody. It inhibits VEGF.
carmustine	A cell-cycle phase nonspecific alkylating antineoplastic agent. It is listed as a carcinogen according to the Fourth Annual Report on Carcinogens.
lomustine	An alkylating agent of value against both hematologic malignancies and solid tumors.
irinotecan	Irinotecan is a derivative of camptothecin. Camptothecins act as topoisomerase I inhibitors which block the DNA replication fork and are responsible for the cytotoxicity against tumor cell lines.
vincristine	An antitumor alkaloid isolated from VINCA ROSEA. (Merck, 11th ed.)
procarbazine	An antineoplastic agent used primarily in combination with mechlorethamine.

drugcentral.org

Introduction

The potential of text data

- A huge amount of exclusive medical knowledge is hidden in various types of unstructured text data such as clinical reports, scientific research documents or journals
- Especially clinical reports provide new knowledge that is not yet recorded in standardized databases or summarized medical literature, e.g., on new side effects of individual drugs or drug-drug interactions
- Potential buried information on abandoned medical compounds

Introduction

Goal of this research

- Test and evaluate different approaches and methods to predict new drug repositioning candidates using NLP on open and publicly available unstructured text data
- Determine the potential of unstructured text data to combat database inconsistencies by filling existing data gaps
- Development of two different workflows to identify drug repositioning candidates for possible therapeutic use for glioblastoma
 - **Combined use of pre-trained biomedical Named Entity Recognition (NER) models to identify possible relationships between biomedical entities**

Methodology

Tools

- ScispaCy v0.5.1
- Provides fast, easy-to-use and robust biomedical NER-models
- Offers four different specialized biomedical NER models which enable a wide subject-specific scope of applications

Methodology

Selection of open text data

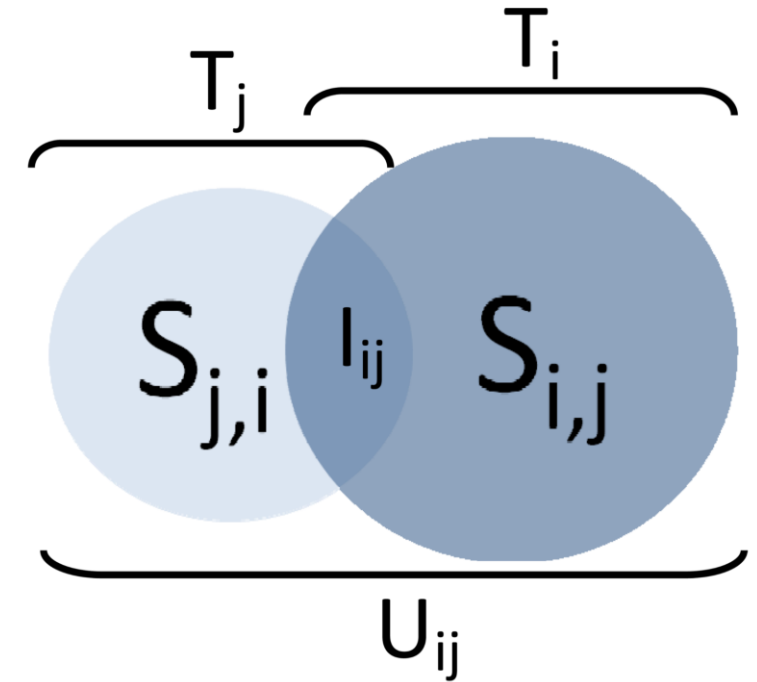
- Extracted by using the term “Neuroectordermal Tumors” of the controlled vocabulary MeSH
- 6’741 clinical studies from ClinicalTrials.gov
- Supplemented with 3’259 abstracts from PubMed
- resulting test data set of 10’000 documents

- [-] Neoplasms
 - [+] Cysts
 - [+] Hamartoma
 - [-] Neoplasms by Histologic Type
 - [+] Histiocytic Disorders, Malignant
 - [+] Leukemia
 - [+] Lymphatic Vessel Tumors
 - [+] Lymphoma
 - [+] Neoplasms, Complex and Mixed
 - [+] Neoplasms, Connective and Soft Tissue
 - [+] Neoplasms, Germ Cell and Embryonal
 - [+] Neoplasms, Glandular and Epithelial
 - [+] Neoplasms, Gonadal Tissue
 - [-] Neoplasms, Nerve Tissue
 - Meningioma
 - [+] Nerve Sheath Neoplasms
 - [-] Neuroectodermal Tumors
 - Craniopharyngioma
 - [-] Neoplasms, Neuroepithelial
 - Ganglioneuroma
 - [-] Glioma
 - [-] Astrocytoma
 - Glioblastoma
 - Diffuse Intrinsic Pontine Glioma
 - [+] Ependymoma
 - Ganglioglioma
 - Gliosarcoma
 - Medulloblastoma
 - Oligodendroglioma
 - Optic Nerve Glioma
 - Neurocytoma
 - [+] Neuroectodermal Tumors, Primitive
 - Pinealoma
 - Retinoblastoma
 - Neuroectodermal Tumor, Melanotic
 - [+] Neuroendocrine Tumors

Methodology

Method 1: Co-occurrence analysis

- Method 1: Co-occurrence analysis based on the “Guilt by Association (GBA)” principle
- Using the co-occurrence of NER-extracted biomedical entities to determine most similar document pairs
- Use these most similar document pairs to extract and associate new drug-disease pairs



"Guilt by Association" scheme for the discovery of new uses for known drugs
(Chiang & Butte, 2009)

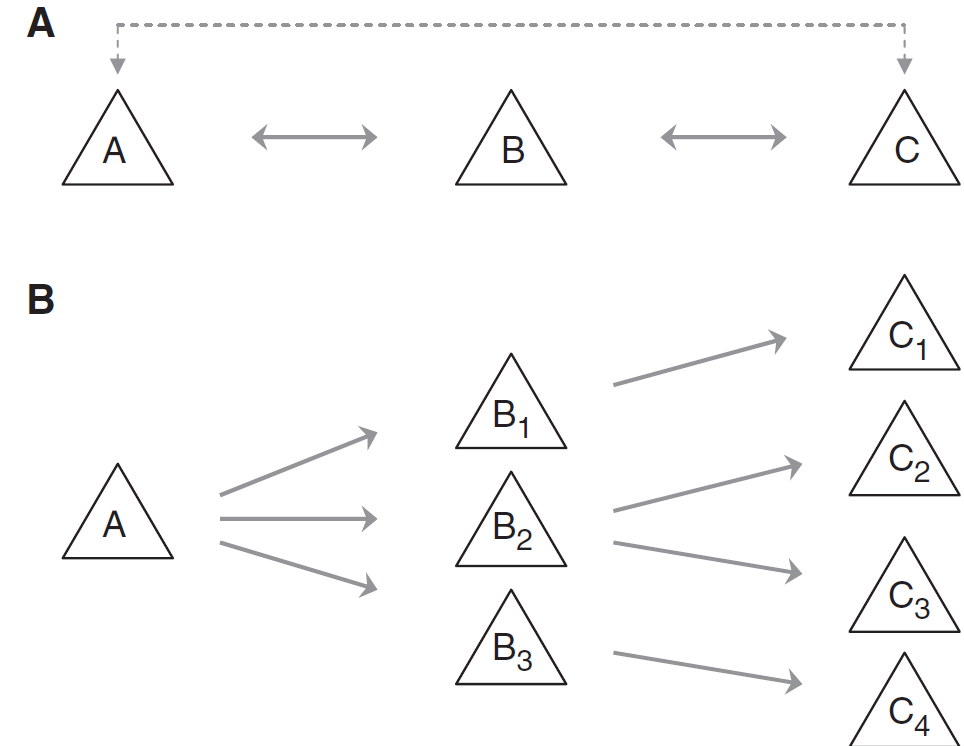
TABLE I
METHOD 1: VARIATIONS WITH THE RESPECTIVE USED LABELS OF
DIFFERENT SCISPACY NER MODELS

ScispaCy NER Model	Variations and used labels			
	<i>Biomedical Entities</i>	<i>Genes, genomes, gene products</i>	<i>Diseases, symptoms, side-effects</i>	<i>Cell- types, lines, components</i>
en_core_sci_lg	ENTITY			
en_ner_craft_md		GO, SO, GGP		CL
en_ner_jnlpba_md				CELL_TYPE, CELL_LINE
en_ner_bc5cdr_md			DISEASE	
en_ner_bionlp13cg_md		GENE_OR_ GENE_PRO DUCT	CANCER, PATHO LOGICAL_ FORM ATION	CELL, CELLULAR_ COMPONENT

Methodology

Method 2: Chains of association

- Method 2: Chains of association using “Swanson’s ABC-model”
- By building association chains to identify new possible transitive relations to determine new repurposing candidates
- Extraction of A-B relations from state-of-the-art biomedical databases
- Using extracted B-terms as search terms for the text data, identify hit documents, determine entity type C as possible repurposing candidate for A



"Swanson's ABC model" (Andronis et al., 2011)

TABLE II
METHOD 2: VARIATIONS OF CHAINS OF ASSOCIATION USING SWANSON’S
ABC MODEL

Association chain Type A-B-C-D	Entity relation type and used databases	
	A-B	B-C
“disease-gene-drug”	disease-gene from OpenTargets [37]	
“disease-gene_variant-drug”	disease-gene_variant from DisGeNET [38]	
“disease-symptom-drug”	disease-symptom from Human Phenotype Ontology (HPO) [39]	
“disease-drug-sideeffect-drug”	disease-drug from DrugBank [40]	drug-sideeffect from SIDER [41]
“disease-drug-cell_lines-drug”	disease-drug from DrugBank [40]	drug-cell_lines from Genomics of Drug Sensitivity in Cancer (GDSC) [42]

Results & Discussion

Our predicted candidates for repurposing

- Types and examples of results as predicted candidates for repurposing on glioblastoma therapy:
 - **Chemical elements:** calcium, indium
 - **Chemical compounds:** most observed type, e.g., O6-benzylguanine
 - **Experimental vaccines:** “DNX-2401” (tasadenoturev)
 - **Hormones:** estrogen, steroids
 - **Various therapeutics:** TT-Fields

Results & Discussion

Our evaluation of candidates

- Predicted repurposing candidates labeled in three categories for evaluation:
 - **“Known in DrugBank”**
 - **“Potential unknown candidates”**
 - **“Invalid”**

Method 1: Co-occurrence Method 2: Chains of association

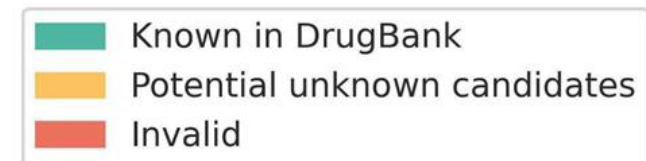
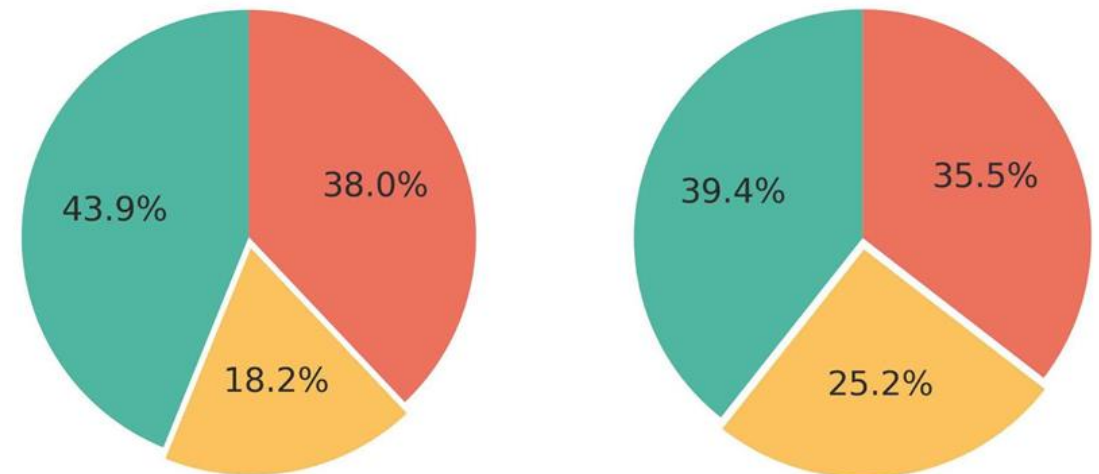


TABLE III
METHOD 1: SUMMARY OF RESULTS OF ALL EMPLOYED VARIATIONS

	<i>Biomedical Entities</i>	<i>Genes, genomes, gene products</i>	<i>Diseases, symptoms, side-effects</i>	<i>Cell- types, lines, components</i>
<i>Maximum pairwise cosine distance between documents</i>	< 0.35	< 0.2	< 0.2	< 0.2
<i>Total number of predicted drug candidates</i>	2734	6865	3898	22025
<i>“Known in DrugBank” ratio</i>	38.40%	60.13%	45.31%	39.21%
<i>“Potential unknown candidates” ratio</i>	20.56%	8.91%	16.47%	21.08%
<i>“Invalid” ratio</i>	41.04%	30.96%	38.22%	39.71%

TABLE IV

METHOD 2: SUMMARY OF RESULTS OF ALL EMPLOYED VARIATIONS

	<i>“disease-gene-drug”</i>	<i>“disease-gene_variant-drug”</i>	<i>“disease-symptom-drug”</i>	<i>“disease-drug-sideeffect-drug”</i>	<i>“disease-drug-cell_line-drug”</i>
<i>Number of extracted search terms from the selected database</i>	118	291	24	200	68
<i>Total number of predicted drug candidates</i>	2226	8	975	7021	47
<i>“Known in DrugBank” ratio</i>	38.63%	0%	39.90%	39.52%	44.68%
<i>“Potential unknown candidates” ratio</i>	20.44%	37.50%	24.51%	26.81%	14.89%
<i>“Invalid” ratio</i>	40.93%	62.50%	35.59%	33.67%	40.43%

Results & Discussion

Some conclusions

- The analysis of unstructured text data can enable a more comprehensive overview of potential repurposing candidates
- Case examples, like "Cixutumumab" and "Paracetamol" were identified as possible repurposing candidates. However, these compounds are currently not listed in DrugBank, although they have been part of clinical trials for the treatment of glioblastoma
- Using overlapping genes as markers showed most reliable potential candidates for repositioning through our methods and use case
- Rarely any gene variants or cell-lines were documented in our selected text data, so only symptoms, side-effects or genes seem suitable as possible embeddings for future analyses of text data

Limitations & Further research

Limitations

- Publicly available clinical text data are mostly only provided as short summaries or abstracts
- Lack of an objective qualitative assessment of our identified repositioning candidates
- Vague association approach, prone to false positives
 - most associations were not analyzed based on their exact semantic connections, such as their possible causalities and their positive or negative relationships
- Poor performance in precision and recall of ScispaCy NER-models in comparison to models from other biomedical NER-Taggers, e.g., “Stanza” (StanfordNLP) or “SparkNLP”

Limitations & Further research

Further research


- Use of better specialized NER models, continued training of available models on new data via Transfer Learning through SparkNLP
- Focus on the use of more full text data from PubMed-Central, scope not solely limited to “Neuroectodermal tumors” for “soft-repurposing”
- Extract drug combinations and regimen and profiling them with scores based on multiple data sources on side-effects, drug-drug interactions and drug-characteristics

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**Thank you very for your attention.
Feel free to ask any questions!**

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