



XVIII IPOPI GLOBAL PATIENTS' MEETING

an **IPOPI** event

16-19 OCTOBER 2024
MARSEILLE, FRANCE

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Reducing the diagnosis wandering: the example of Dr Warehouse

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Disclosure

Co funder of CODOC, Spin Off of Imagine Institute
Scientific advisor for Takeda

Objective: To find patients with rare diseases in hospitals who have not been diagnosed.

Conditions to success:

No additional work for the physicians => Based on raw data collected in hospitals

Ability to screen all the patients of a hospital

⇒ What type of data should we use?

⇒ How to access all the data of all the patients?

⇒ How to compute the data to find the patients?

⇒ How to find the patients? Especially with few patients

Getting access to all data through an hospital data warehouse

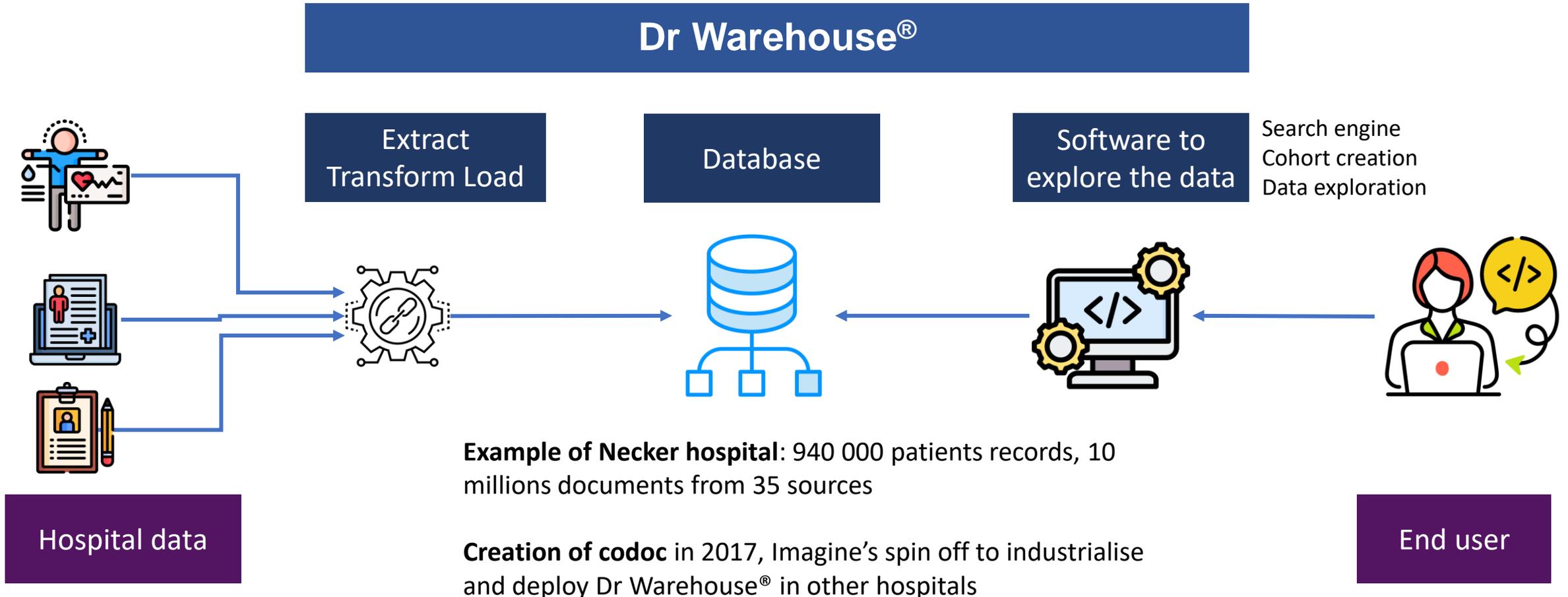
Patients data in hospitals:

- Administrative data
- Clinical reports (free text): consultation, hospitalisation, imaging, etc
- Lab results: structured data
- Specific forms

⇒ Most of the phenotypic information are only in free texts (Neuraz et al 2020)

⇒ We built in 2014, **the first data warehouse oriented toward documents**, inspired by Google search engine, to help physicians to easily search for patients: **Dr Warehouse®**.

Getting access to all data through an hospital data warehouse



Recherche

Population 4 651 4 651 dans l'EDS

A Critère Textuel 78 78 dans l'EDS

Pour rechercher la phrase complète, ajoutez des guillemets.

Étendre aux synonymes

[Filtres avancés](#)

[Ajouter un critère](#)

Résultats Ajouter à la bibliothèque

Récapitulatif de la recherche

A Documents contenant **"rett syndrome" OR FOXG1**, en excluant les négations.

Dossiers patients Démographie Biologie PMSI

Alimenter une cohorte

- GILLETTE Rebecca**
F, 39
Née le 10/08/1959 - 63 ans

Brain & development, le 01/11/2008, par Dr Harada Koto...
Hypoplastic hippocampus in atypical Rett syndrome with a...

Proceedings of the National Academy of Sciences of the...
sensitivity in a rat model of **Rett syndrome**. Children with

Advances in experimental medicine and biology, le...
gentle transactivation of the **Foxg1** transcription factor gene,...

[Afficher plus](#) 7
- KNOWLES James**
H, 40
Né le 29/01/1954 - 69 ans

Stem cell investigation, le 14/04/2012, par Dr Gomathi...
Novel therapeutic approaches: **Rett syndrome** and human...

Developmental neurorehabilitation, le 15/06/2007, par D...
Early development in **Rett syndrome** - the benefits and...

Epilepsia, le 30/03/2007, par Dr Lim Zhan - Pubmed
ting with features similar to **Rett syndrome**. Cardinal features ...

[Afficher plus](#) 7
- LEE David**
H, 41

Current biology : CB, le 14/04/2012, par Dr Franco Luis M ...
ired inhibition in autism and **Rett syndrome**, these findings...

Stem cell research, le 14/04/2012, par Dr Hunihan Lisa - ...
he mutant **MECP2** allele from a **Rett Syndrome** patient fibrobl...

Brain & development

Le 01/11/2008 par Dr Harada Kotoha
GILLETTE Rebecca - Née le 10/08/1959 (63 ans)

Hypoplastic hippocampus in atypical **Rett syndrome** with a novel **FOXG1** mutation.

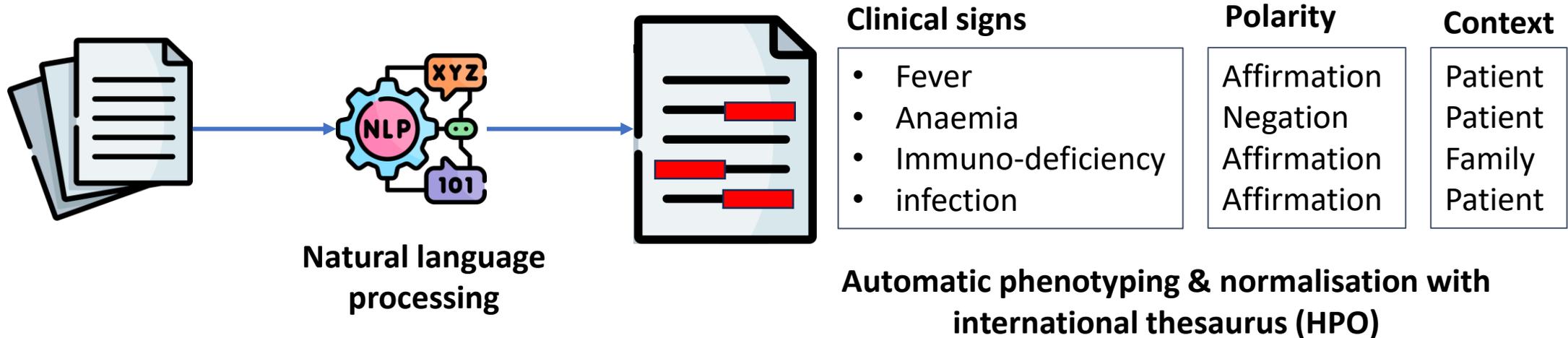
The forkhead box G1 (FOXG1) gene encodes a brain-specific transcription factor and is associated with a congenital variant of atypical Rett syndrome (RTT); several FOXG1 mutations have been identified. The congenital variant of RTT shows a hypoplastic corpus callosum, delayed myelination, and frontal and temporal atrophy. Although no report has described a hippocampal abnormality in humans, the current study suggests that FOXG1 also regulates neurogenesis in the postnatal hippocampus. In the present case, severe developmental delay was observed in a patient with a congenital variant of RTT from about 4months, in conjunction with acquired microcephaly, hypotonia, limited motor function, absent purposeful hand use, and repetitive jerky movements of the upper limbs. A novel missense mutation was identified in FOXG1 on gene analysis (c. 569T>A, p. Ile190Asn). The patient showed not only the typical cerebral abnormalities of a congenital variant of RTT, but also a hypoplastic hippocampus. This

Using AI to improve search (negation detection and family history)

Capture Suite codoc, Example with fake data

How to make free text machine-readable (and human-readable) ?

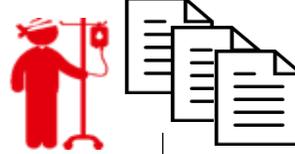
Automatic extraction of clinical signs and diagnosis from hospital reports



- Each patient is represented by a list of **clinical signs, phenotypes, diagnosis** extracted from their reports
- With **frequencies** of the phenotypes, **age** at first mention, **polarity** and **context**.
- In Necker Hospital we extracted a total of **50 millions phenotypes** from 5 millions hospital reports.

Reducing diagnosis wandering through phenotypic similarity

Diagnosed patient



Concepts	Certainty
Lowe syndrome	1
Anemia	-1
Kidney failure	1
Cataract	1

Evaluation on 5 rare diseases: Lowe Syndrome, Dystrophic Epidermolysis Bullosa, Activated PI3K delta Syndrome, Rett Syndrome, Dowling Meara

In average 51% patients with same rare disease in top30

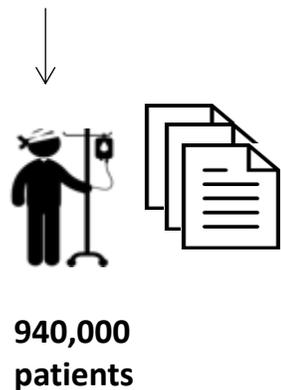
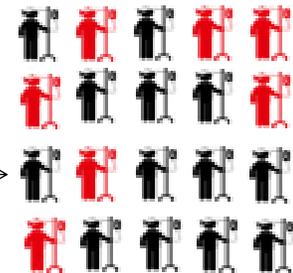
Improvement of the methods on ciliopathies with the C'IL-LICO project (Faviez & Chen)

In Necker Hospital data warehouse



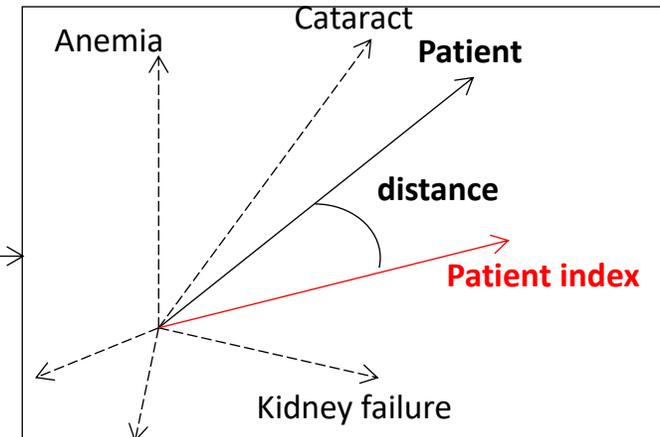
Similarity : cosine

Top30 similar patients



Concepts	Nb	TF-IDF
Diabetis	2	0.02
Cataract	4	0.2
Fever	5	0.001
Proteinuria	3	0.02
Cytopenie	2	0.03
Asthenia	1	0.01

if $\geq k$ concepts in common



Similarity algorithm available for Physicians in the hospital

Genetics
inMedicine

www.nature.com/gim



BRIEF COMMUNICATION

Deep phenotyping unstructured data mining in an extensive pediatric database to unravel a common *KCNA2* variant in neurodevelopmental syndromes

Marie Hully¹, Tommaso Lo Barco¹, Anna Kaminska^{1,2}, Giulia Barcia^{1,3}, Claude Cancès⁴, Cyril Mignot⁵, Isabelle Desguerres¹, Nicolas Garcelon^{6,7}, Edor Kabashi⁸ and Rima Nabbut^{1,8}

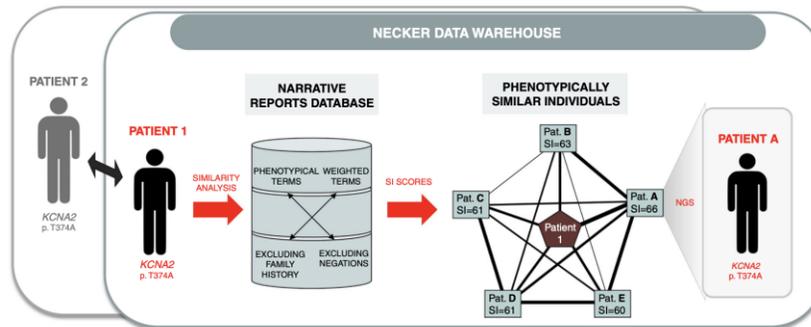


Fig. 1 Display of the two patients (patient 1 from our institution and patient 2 from another institution in our reference center network) sharing the same phenotype and the same *KCNA2* variant. Similarity analysis with all data warehouse narrative reports was performed, yielding a high similarity index (SI) in five patients (patients A-E). Exome sequencing validated that patient A, who had the highest SI, harbored the same *KCNA2* variant. NGS next-generation sequencing.

SPRINGER NATURE

Genetics in Medicine _#####_

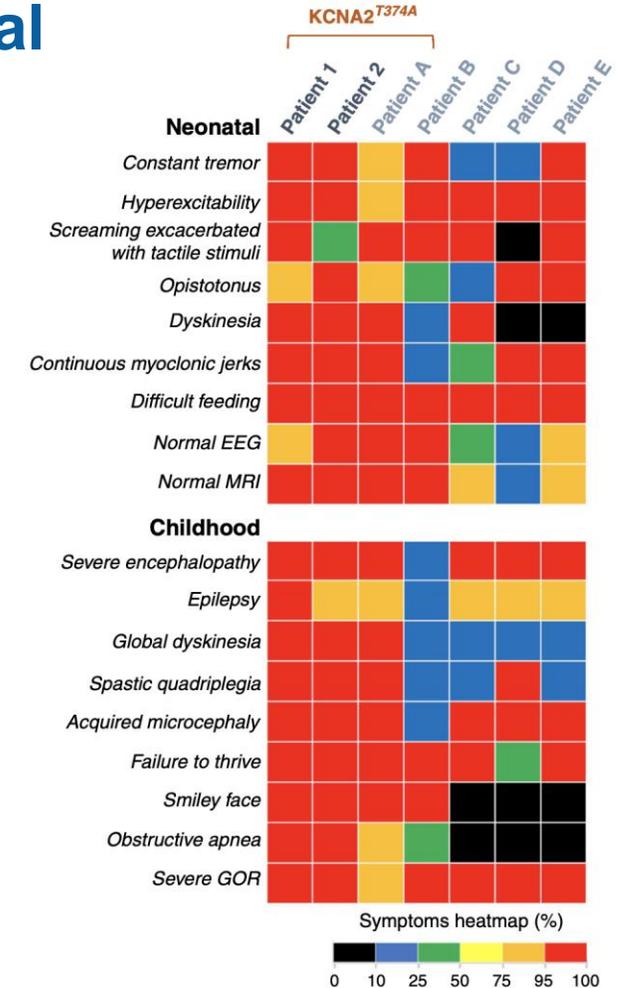


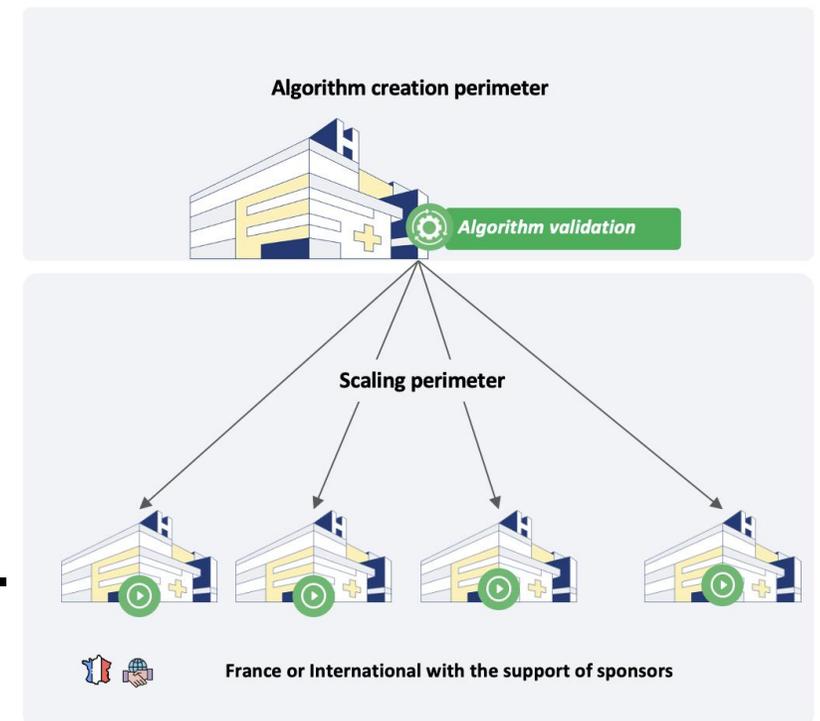
Fig. 2 Clinical heatmap describing the detailed characteristics of the patients in this study. Heatmap for patient 1 and 2 with

How to export this concept in other hospitals ?

Spin off **codoc** has **industrialised** Dr Warehouse and already **deployed** it in **several hospitals in France and Belgium**.

We want to use this **network** to **apply the similarity algorithms** in these hospitals.

But we cannot use real patients (confidentiality, ethic).



Build an archetypal patient for a specific disease

Instead of computing similarity with an existing patient, creation of **a disease specific archetype**

Based on:

- Experts and physicians
- Knowledge databases (Orphanet, OMIM etc)
- Real world data (health reports)
- Patient knowledge

The screenshot shows the IPOPI web application interface. The top navigation bar includes links for Home, Search engine, My queries, My Cohorts, Tools, My ecrf, Patient (with a dropdown for patient name or ID), and Notifications. The main content area is divided into two columns.

The tools (left column):

- Structured data repository
- Find PPI of patients
- Similarity on virtual patient
- Patient Comparison
- Cohort comparator
- Multimodal PheWAS
- phenotypage temporel

Similarity on archetypal patient (right column):

Create an archetypal patient

Choose the medical concepts

search concept [dropdown]

Add demographic criteria

Sex : F M

now aged : Between [] years and [] years

Age at onset : Min [] , Max []

Choose a virtual patient

APDS NEW plus de concepts [dropdown]

List of selected concepts

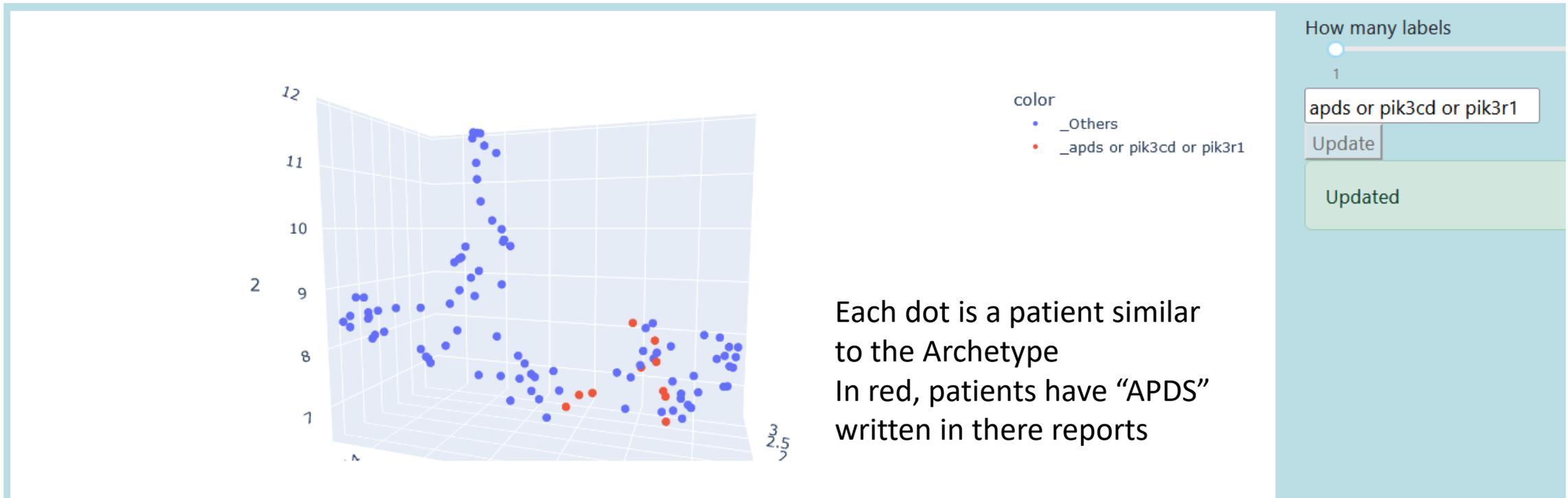
- deficit immunitaire [1] x
- syndrome hyper igm [1] x
- infection [1] x
- Adenopathie [1] x
- Lymphopenie [1] x
- Hyperplasie [1] x
- Otite [1] x
- Pneumopathie [1] x
- Bronchite [1] x
- Otite [1] x
- dilatation des bronches [1] x
- lymphoproliferation [1] x
- igm augmentees [1] x
- augmentation des immunoglobulines [1] x
- Adenopathie axillaire [1] x
- Conjonctivite chronique [1] x
- Rhinorhee purulente [1] x
- Toux productive [1] x
- Hepatosplenomegalie [1] x
- INFECTION PULMONAIRE [1] x
- Toux persistante [1] x
- hypertrophie des amygdales [1] x
- Toux chronique [1] x
- Splenomegalie [1] x
- Surinfection [1] x
- engorgement bronchique [1] x
- Hypogammaglobulinemie [1] x
- infection chronique [1] x

At the bottom of the interface, there are buttons for **CALCULER**, **OPTIONS**, **SAVE THE VIRTUAL PATIENT**, and **MANAGE YOUR VIRTUAL PATIENTS**.

Example of APDS, built with Dr Nizar Mahlaoui

Screen all patients in a hospital data warehouse

Display the top 100 most similar patients, and cluster on the results



Conclusion

Aim : to find undiagnosed patient in hospitals

- 1) Build a data warehouse to gather all the data in several hospitals 
- 2) Transform patient data to make it computable : natural language processing methods to extract clinical signs 
- 3) Create an archetype for specific diseases (e.g. APDS) 
- 4) Develop an algorithm to compute similarity between the archetype and all the patients of a hospital data warehouse  but to adapt and evaluate for each disease
- 5) Apply the algorithm in hospitals and explore the top N patients maybe undiagnosed 

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