

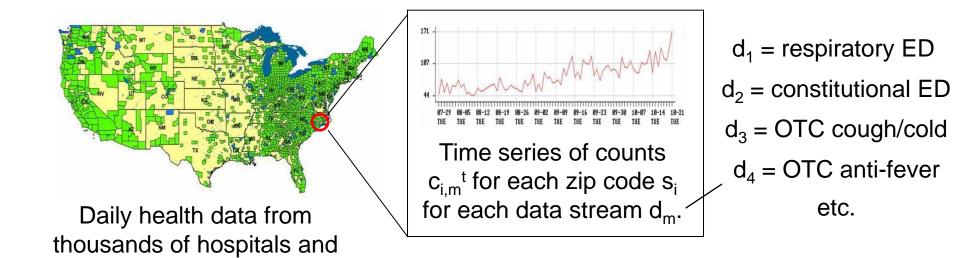


# **Generalized Fast Subset Sums for Bayesian Detection and Visualization**

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This work was partially supported by NSF grants IIS-0916345, IIS-0911032, and IIS-0953330.

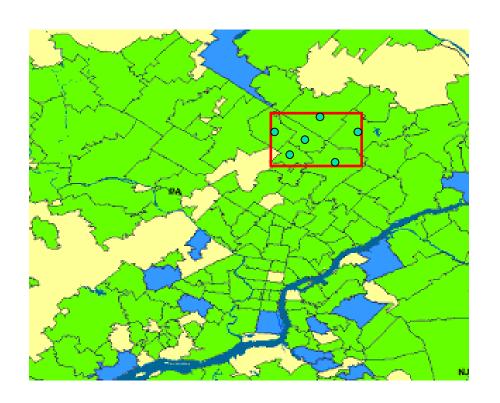
#### Multivariate event detection



Given all of this nationwide health data on a daily basis, we want to obtain a complete <u>situational awareness</u> by integrating information from the multiple data streams.

pharmacies nationwide.

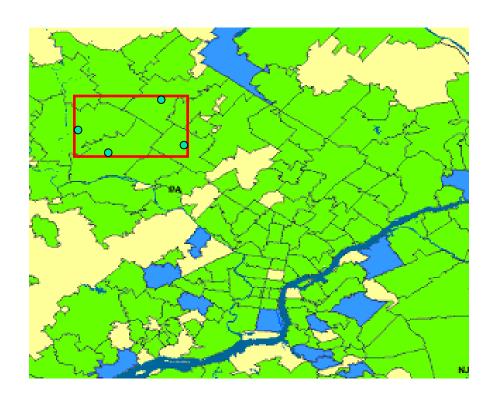
More precisely, we have three main goals: to <u>detect</u> any emerging events (i.e. outbreaks of disease), <u>characterize</u> the type of event, and <u>pinpoint</u> the affected areas.



(Kulldorff, 1997; Neill and Moore, 2005)

To detect and localize events, we can search for <u>space-time</u> regions where the number of cases is higher than expected.

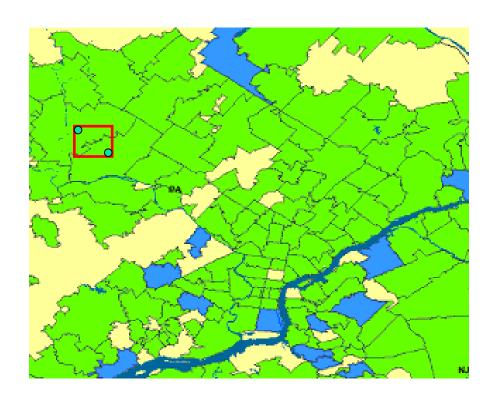
Imagine moving a window around the scan area, allowing the window size, shape, and temporal duration to vary.



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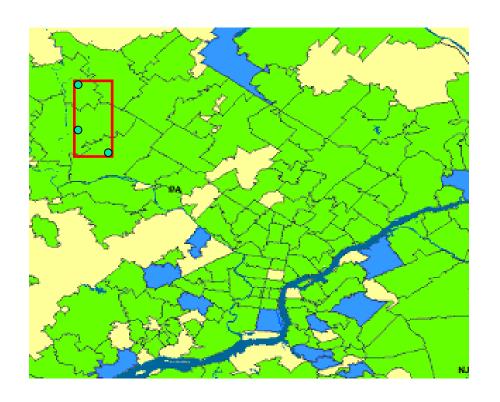
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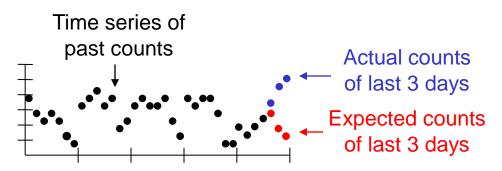


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For each subset of locations, we examine the aggregated time series, and compare actual to expected counts.



#### Overview of the MBSS method

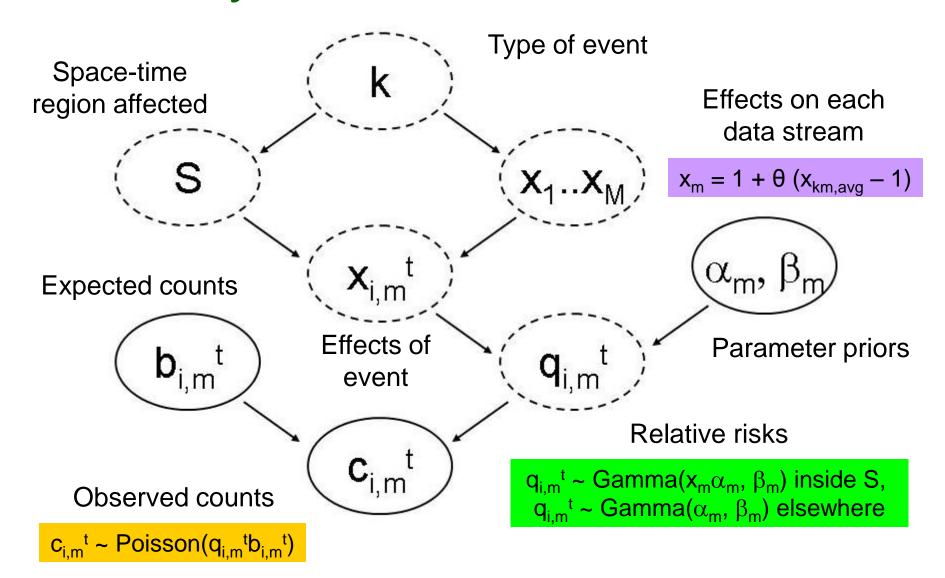


Given a set of event types  $E_k$ , a set of space-time regions S, and the multivariate dataset D, MBSS outputs the <u>posterior probability</u>  $Pr(H_1(S, E_k) \mid D)$  of each type of event in each region, as well as the probability of no event,  $Pr(H_0 \mid D)$ .

We must provide the <u>prior probability</u>  $Pr(H_1(S, E_k))$  of each event type  $E_k$  in each region S, as well as the prior probability of no event,  $Pr(H_0)$ .

MBSS uses <u>Bayes' Theorem</u> to combine the data likelihood given each hypothesis with the prior probability of that hypothesis:  $Pr(H \mid D) = Pr(D \mid H) Pr(H) / Pr(D)$ .

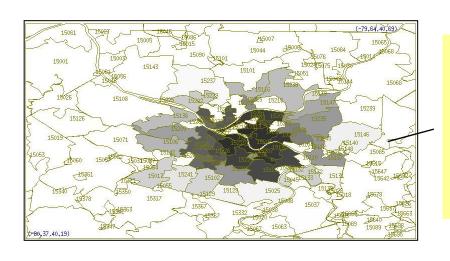
# The Bayesian hierarchical model



## Interpretation and visualization

MBSS gives the total posterior probability of each event type  $E_k$ , and the distribution of this probability over space-time regions S.

<u>Visualization</u>:  $Pr(H_1(s_i, E_k)) = \sum Pr(H_1(S, E_k))$  for all regions S containing location  $s_i$ .



#### Posterior probability map

Total posterior probability of a respiratory outbreak in each Allegheny County zip code.

Darker shading = higher probability.

# MBSS: advantages and limitations

MBSS can detect faster and more accurately by integrating multiple data streams.

MBSS can model and differentiate between multiple potential causes of an event.







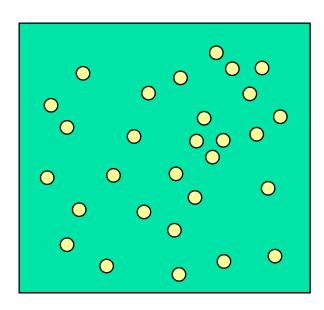
MBSS assumes a uniform prior for circular regions and zero prior for non-circular regions, resulting in low power for **elongated** or **irregular** clusters.

There are too many subsets of the data (2<sup>N</sup>) to compute likelihoods for all of them!

How can we extend MBSS to **efficiently** detect irregular clusters?

We define a non-uniform prior  $Pr(H_1(S, E_k))$  over all  $2^N$  subsets of the data.

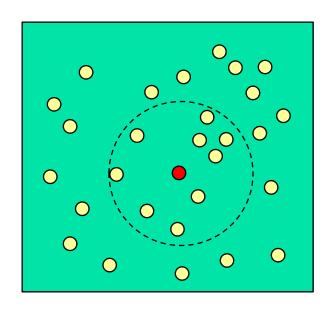
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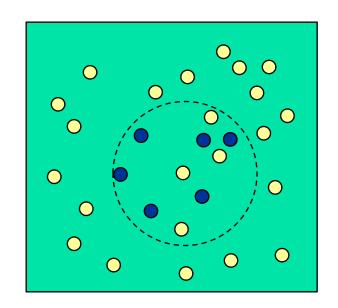
- 1. Choose **center location**  $s_c$  from  $\{s_1...s_N\}$ , given multinomial  $Pr(s_i)$ .
- 2. Choose **neighborhood size n** from {1...n<sub>max</sub>}, given multinomial Pr(n).



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- 3. For each  $s_i \in S_{cn}$ , include  $s_i$  in S with probability p, for a fixed 0 .



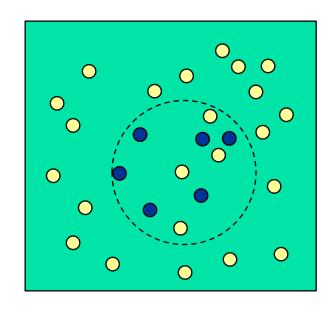
This prior distribution has non-zero prior probabilities for any given subset S, but more compact clusters have larger priors.

Parameter p controls the sparsity of detected clusters. Large p = compact clusters. Small p = dispersed clusters.

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p = 0.5 corresponds to the original Fast Subset Sums approach described in (Neill, 2010), assuming that all subsets are equally likely given the neighborhood.

**p** = 1 corresponds to MBSS, searching circular regions only.

Naïve computation of posterior probabilities using this prior requires summing over an exponential number of regions, which is infeasible.

However, the total posterior probability of an outbreak,  $Pr(H_1(E_k) \mid D)$ , and the posterior probability map,  $Pr(H_1(s_i, E_k) \mid D)$ , can be calculated efficiently **without** computing the probability of each region S.

In the original MBSS method, the **likelihood ratio** of spatial region S for a given event type  $E_k$  and event severity  $\theta$  can be found by multiplying the likelihood ratios  $LR(s_i | E_k, \theta)$  for all locations  $s_i$  in S.

In GFSS, the **average likelihood ratio** of the  $2^n$  subsets for a given center  $s_c$  and neighborhood size n can be found by multiplying the quantities (p x LR( $s_i$  |  $E_k$ ,  $\theta$ ) + (1-p)) for all locations  $s_i$  in S.

Since the prior is uniform for a given center and neighborhood, we can compute the posteriors for each s<sub>c</sub> and n, and marginalize over them.

### Evaluation

- We injected simulated disease outbreaks into two streams of Emergency Department data (cough, nausea) from 97 Allegheny County zip codes.
- Results were computed for ten different outbreak shapes, including compact, elongated, and irregularly-shaped, with 200 injects of each type.
- We evaluated GFSS (with varying p) in terms of run time, timeliness of detection, proportion of outbreaks detected, and spatial accuracy.

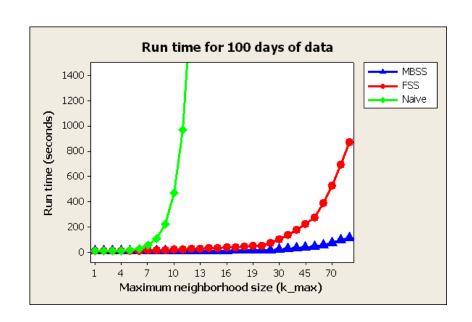
# Computation time

We compared the run times of MBSS, GFSS, and a naïve subset sums implementation as a function of the maximum neighborhood size  $n_{max}$ .

Run time of MBSS increased gradually with increasing  $n_{\text{max}}$ , up to 1.2 seconds per day of data.

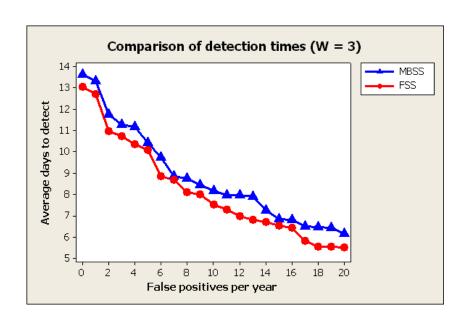
Run time of Naïve Subset Sums increased exponentially, making it infeasible for  $n_{max} \ge 25$ .

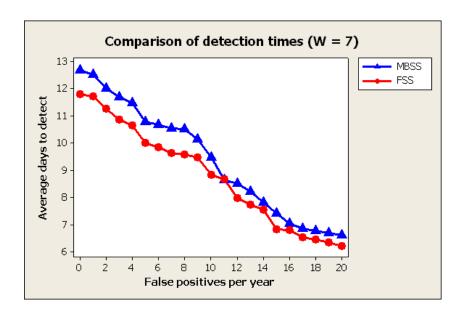
Run time of GFSS scaled quadratically with  $n_{max}$ , up to 8.8 seconds per day of data.



Thus, while GFSS is approximately 7.5x slower than the original MBSS method, it is still extremely fast, computing the posterior probability map for each day of data in under nine seconds.

### Timeliness of detection

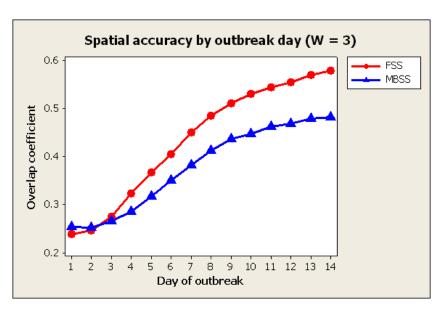


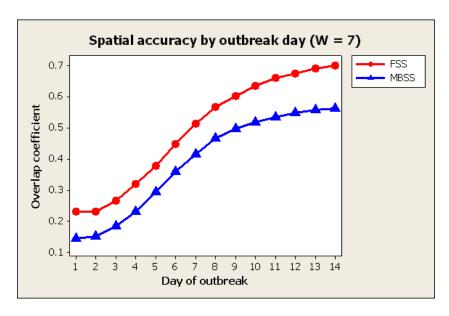


With p = 0.5, GFSS detected an average of **one day earlier** than MBSS for maximum temporal window W = 3, and **0.54 days earlier** for W = 7, with less than half as many missed outbreaks.

Both methods achieve similar detection times for compact outbreak regions. For highly elongated outbreaks, GFSS detects 1.3 to 2.2 days earlier, and for irregular regions, GFSS detects 0.3 to 1.2 days earlier.

# Spatial accuracy





As measured by the overlap coefficient between true and detected clusters, GFSS outperformed MBSS by 10-15%.

For elongated and irregular clusters, GFSS had much higher precision and recall. For compact clusters, GFSS had higher precision, and MBSS had higher recall.

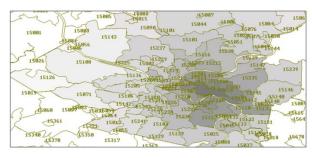
# Posterior probability maps

GFSS has much higher spatial accuracy than MBSS for elongated clusters.

#### True outbreak region

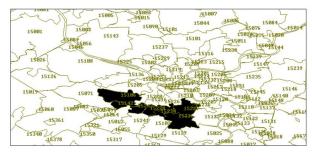


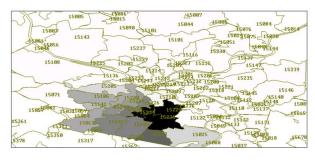
MBSS (p = 1)

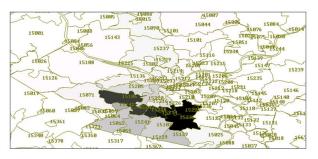


GFSS (p = 0.5)











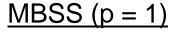




# Posterior probability maps

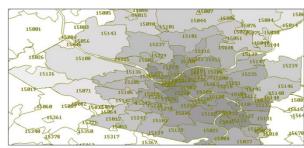
GFSS was better able to capture the shape of irregular clusters.

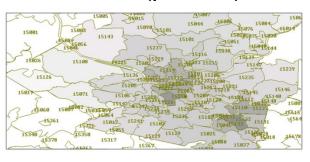
#### True outbreak region



GFSS (p = 0.5)



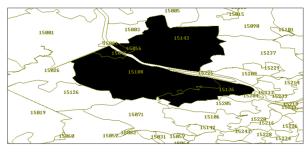


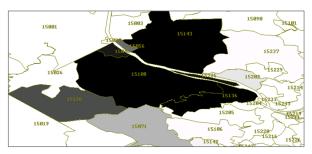


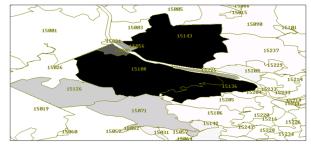




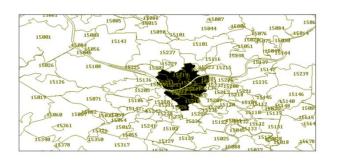








Optimization of the sparsity parameter p can substantially improve the detection performance of the GFSS approach.



#### **Compact cluster:**

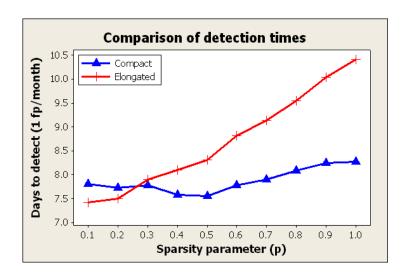
Detection time minimized at p = 0.5; spatial accuracy maximized at p = 0.7.

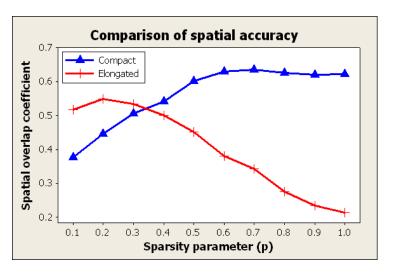


#### Highly elongated cluster:

Detection time minimized at p = 0.1; spatial accuracy maximized at p = 0.2.

Optimization of the sparsity parameter p can substantially improve the detection performance of the GFSS approach.





For elongated clusters, p = 0.2 improves detection time by 0.8 days and spatial accuracy by ~10%, as compared to p = 0.5.

### Conclusions

GFSS shares the essential advantages of MBSS: it can integrate information from **multiple data streams**, and can accurately distinguish between **multiple outbreak types**.

As compared to the MBSS method, GFSS substantially improves accuracy and timeliness of detection for elongated or irregular clusters, with similar performance for compact clusters.

While a naïve computation over the exponentially many subsets of the data is computationally infeasible, GFSS can **efficiently** and **exactly** compute the posterior probability map.

We can also **learn** the prior distributions over centers and neighborhoods and the sparsity parameter p for each event type using a small amount of training data. This enables us to better differentiate between multiple, similar types of outbreak.

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