Deep learning aiding Health Informatics in Drug discovery

Malvika Jasrotia^{1*}, Prabhpreet kaur²

^{1,2}Dept. of computer engineering and technology, Guru Nanak Dev University, Amritsar, India

Corresponding Author: Malvikajasrotial1@gmail.com

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Abstract- The changes that occur are exciting and more challenging in our industry. There has been a massive increase in the amount of data in health informatics in the last decade. Over the years, deep learning is raising with its extraordinary success in the research areas of artificial intelligence. If we form larger neural network and then we train it with more available data and fast enough computers their performance then continues to arise. Earlier, machine-learning tools such as QSAR (quantitative structure-activity relationship) modeling have been used to identify potential biological active molecules from millions candidate compounds for drug discovery. But, in this era of big data machine learning approaches lack efficiency. Hence, deep learning evolved as a solution to the problem of big data. In this paper we discuss various deep learning approaches studied for various applications of health informatics with special reference to drug discovery.

Keywords- Deep learning, Deep neural network, Convolutional neural network, Recurrent neural network, Deep Autoencoder, Health informatics

I. INTRODUCTION

The volume of digital data in the world is increasing epidemically. In fact, 90% of the world's existing data has been created in the last two years - a dozen or so 2.5 billion bytes of subsidiary data have been created [1]. Machine learning algorithms such as deep learning have been used due to increasing data and strong demand for control. Number of applications such as colorization of black and white images, generation of image captions, character text generation, automatic play, automatic translation, natural language processing, Bio informatics etc. [2]. As a result of these advances, the monopoly of life sciences has experienced an unplanned growth of the bulk of achievable composite activities and biomedical data to bring out trends and technologies. As the data is large scale, this requires its excavation for drug discovery. Machine learning methods such as neural networks, support vector machines, and random forests were used to improve the QSAR model, deep learning, and matrix factorization. There is a steady increase in the power of the computer and the amount of data that is conducive to deep learning [3]. Deep learning (DL) is better than other machine learning methods because of the flexible nature of neural network architecture in deep approaches. This review includes convolutional neural networks (CNNs), recurrent neural networks (RNNs), and fully connected wireless networks. For a long time, single layer neural networks have been used in QSAR modeling. In addition, data size and estimation power have increased, making multilayer networks unstable for divination of bioactivity.

1.1 Axioms of deep learning

Deep learning is about how we learn and process information. Every action we do or the memory we have is controlled by our nervous system. We use Artificial neural networks to learn the representation of the data [5]. In Artificial neural network we have one well known technique- Deep neural network which consist of no. of layers between the input layer and the output layer with a certain level of complexity. It uses mathematical modeling for the processing of the data in complex ways. The basic structure of modern artificial neural networks is illustrated in Figure 1. When the network moves across the layers it calculates the output. Basically, there are 3 layers in an ANN: the input layer, the hidden layer and the output layer. The nodes that are present in the network are either fully or partially connected and are also called neurons. The nodes have values from 0.0 to 1.0 where 1 represents the value "fully active" and 0 completely deactivates with the other values between 0 and 1. In the network, the nodes are linked by connections where each connection to a "weight". represented by "w". These signal values then procreate from the finished inputs the connection weights "w" to the hidden nodes and then pass through more connection

weights to the output nodes [6]. The probability between the input and output values of a hidden unit can be symbolized in Figure 2.

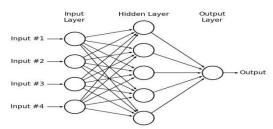


Figure 1: Artificial neural network.

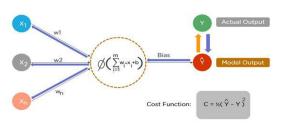


Figure 2: Calculation of output values from input values using cost function

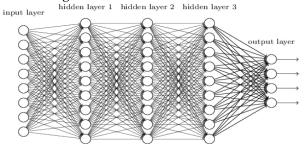


Figure 3: Deep learning using large number of hidden layers

Back propagation method is followed to refine the errors between the true and predicted value. In the learning process of ANN, the weight values in the network are adjusted imperatively. In the network, the gradient which is required for the calculation of the weights to be used in the network is calculated by the back propagation. In the learning environment, the gradient descent optimization algorithm uses backward propagation by computing the gradient of the loss function to adjust the weight of the neurons. This technique is also known as inverse error propagation because the error is calculated at the output and, if necessary, is redistributed across the network layers. Using a cost function, the error in the network is calculated [7]. The neural network implements any type of deep learning algorithm such as CNN, RNN that will be discussed in this review. The modern structure of the artificial neural network algorithm was developed in the 1960s to 1980s and the number of applications appeared

while the traditional structure of artificial neural networks encountered problems such as overfitting etc was predominantly regained by machine learning algorithm such as support vector machine [8] and RF [9]. There are many differences between deep learning and the traditional artificial neural network. Traditional ANNs can result in one or two hidden layers, while deep learning uses a large number of hidden layers, as shown in Figure 3. In case of deep learning no. nodes can be used in each layer due to the appearance of more efficient CPU and GPU hardware. In deep learning methods and DropConnect to solve problems, a linear rectified and adjusted unit is applied to avoid leakage gradients. Most of the time, DL packages are opensource [10]. The NN architectures used in deep learning are DNN, CNN, and RNN. DNN stands for deep neural network (Figure 3), which is an artificial neural network which is consist of multiple layers between input and output layers. DNNs may include a non-linear mosaic relationship. As data do not travel back in DNN and travels from input to the output layers, so these networks are considered as the safe networks. DNN can retrieve entities at different hierarchical levels [11]. Second technique under artificial neural network is the convolutional neural network (CNN or ConvNet) (Figure 4). These use small scale pre-processing compared to all other preprocessing algorithms. CNNs are mainly used to analyze visual images. The structure of CNN consists of several layers of convolution and subsampling. The convolutional layers apply the convolution operation to the input. Each convolutional neuron tracks data only for its receptive field. The convolutional layer in CNN consists of kernels with learnable parameters and a small receptive field where the kernel convulsed over the height and width of the input volume, then calculates the dot product between the kernel inputs produces a map. features that is 2D of this kernel. The size of the feature map decreases with depth, CNN layers near the input layer will have fewer filters, while layers that are far apart will have more filters in comparison. If we want to equalize the computation at each layer, the product of the position x pixel of the function must be kept almost constant on all the layers. The number of feature maps depends on the number of available examples and the complexity level of the task, as well as the capacity. The common filter forms are chosen based on the dataset and the challenge is to find the right level of granularity in order to create an appropriate abstraction for chosen or given dataset. There the are three hyperparameters: the deep, stride and zero fill that controls the size of the output volume of the convolutional layer. The number of neurons in the layer that connects to the same region of the input volume is controlled by the depth of the output volume. The allocation of depth columns around spatial dimensions is controlled by the stride. One pixel at a time is moved when the stride is "1" and when it is "2", two pixels at a time are moved. The size of the padding is a third parameter, it controls the spatial size of

the output volume. Finally, the feature maps are concatenated into fully connected layers where the neighboring neurons of the network are connected like the traditional ANNs and give the final output value. CNN reduces memory consumption and increases learning speed [12].There is a variant of an artificial neural network: RNN (Figure 5). In this network, there is a connection between the nodes that form a directed graph with the sequence in a successive layer format. These networks use their memory for input processing in order, making it relevant for tasks such as voice recognition, handwriting recognition, and so on [13]. LSTM combined with CNN has improved in the field of automatic captioning of images. The problem of the disappearance gradient is reduced by this network

[14]. The network of Figure 6 is called auto-encoder (AE), used to learn an illustration for a set of data to reduce dimensionality. It compresses the data from the input layer to the abbreviated code and then decompresses the code into something that matches the data that is original [15]. Automatic encoders can be stacked on top of each other to create a deep automatic encoder architecture. It is also confronted with the problem of the disappearance of gradients during training. Many variations have been proposed for the learned representations to be robust or stable in the case of small variations in the pattern of entry. Finally, convolutional auto coding was the solution to this problem, which dealt with two-dimensional images and effectively preserved the spatial locality [16].

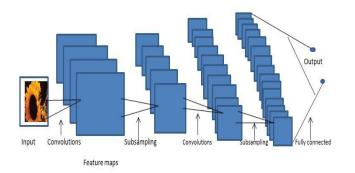


Figure 4: Convolutional neural network

II. APPLICATION AREAS OF HEALTH INFORMATICS

Health informatics is information engineering applied to the field of health care, generally the management and use of information relating to the care of patients. It is a multidisciplinary field that involves disciplines such as information science, computer science, social sciences, behavioral sciences, management sciences and others. It applies to the areas of nursing, clinical medicine, dentistry, pharmacy, public health, occupational therapy,physiotherapy, etc. The massive growth and widespread availability of digital health data over the past decade has led to increased research activity in the health care field. Traditional approaches to health data management have had limited success because they are unable to handle the large amount of complex data with high volume, high speed, and variety. The table1 describes the use of deep learning in various health informatics applications

III. LITERATURE SURVEY

With a massive influx of multimodal data, the role of data analysis in health informatics has grown rapidly over the last decade. This has also generated a growing interest in the production of data-driven analytical models based on machine learning in health informatics. Deep learning, a technique based on artificial neural networks, is becoming in recent years a powerful tool for machine learning, promising to reshape the future of artificial intelligence. The theoretical underpinnings of deep learning are well anchored in the literature on classical neural networks. But, unlike the more traditional use of NNs, deep learning explains the use of many hidden neurons and layers, usually more than two, as an architectural benefit ass provides a high level of abstraction that makes the feature sets automatic.

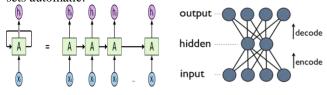


Figure5:RNN

Figure6:Auto-encoder

In areas such as health informatics, the generation of this automatic set of features without human intervention has many advantages. For example, in medical imaging, it can generate more sophisticated features that are difficult to develop by descriptive means. Neural convolution networks (CNN) have had the greatest impact in the field of health informatics. Other plausible architectures for deep learning include those based on Restricted Boltzmann (RBM) machine compositions such as Deep Belief Networks (DBNs), stacked auto-encoders that function as deep autoencoders. Table 1 presents various health informatics studies that have used deep learning in health informatics. Deep CNNs are the subclass of the deep neural network that have been used in drug discovery for the prediction of ligand-based bioactivity and QSAR. AtomNet is the first CNN system-based system designed to predict the bioactivity of small molecules for drug discovery applications. The functioning of biological systems can

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only occur when there is a physical interaction between the molecules. It is essential for the discovery of new drugs that, in the case of molecular linkage and contempt, three decades of business computing are still too imprecise for the prediction of routine binding. If the ability to predict molecular binding will be accurate and efficient, it will reduce the time needed to discover new treatments. In case of development, the toxic molecules can be eliminated in the early stages and can guide the efforts of medicinal chemistry. For speech and vision, the deep convolutional neural networks are best for prediction. It constrains its model architecture to capture the temporal and spatial structure of its domain, reducing the problem of overadjustment. A deep neural network has been established -RF (random forest) and SVM (carrier vector machine) for virtual screening based on QSAR and ligands. Dahl et al. introduced an architecture for kagglemerk molecular activity challenge that was a multi-tasking deep neural network that forms a unique neural network architecture with a number of output neurons. These multiple output neurons predict the activity of the input molecule in a different evaluation. As the molecules are tested in a number of different estimates, the multi-task deep neural network merges proof of training into almost identical prediction tasks. He used a large number of 2D topological descriptors and DNN showed slightly better performance in 13 of the 15 targets than the standard RF method. Ramsundar et al. methodical study accomplished to build multi-tasking DNN models. His study shows that deep multi-task neural networks work or work better than the ociated with new training paradigms. It single task. Therefore, the multi-tasking DNN is very efficient and gives better results. Koutsoukas et al. studied and compared a deep neural network model with automatic learning methods such as SVM, RF, on seven ChEmBL datasets. Deep neural networks have been found by performing other methods of machine learning. Aliper et al. Constructs a deep neural network for predicting the pharmacological properties of drugs and for drug reprocessing by dragging the LINCS project's metabolomic data as well as lane information. The conclusion is that the DNN model has achieved great accuracy in predicting drug indications. As previously discussed about AtomNet, which is the first structure-based deep convolution neural network designed for the prediction of small molecule bioactivity for drug discovery applications. Atomnet can predict new active molecules for targets without modulators. He showed unexpected results on the structure-based benchmark.

| Table 1 | Application of Health Informatics |
|---------|-----------------------------------|
|---------|-----------------------------------|

| AREA | APPLICAT | DATA | TECHNIQU | REFERE |
|-----------|------------|------------|--------------|------------|
| | IONS | SOURCE | E | NCE |
| Bioinform | Cancer | Gene | Deep | [34], |
| atics | diagnosis, | | autoencoder, | |
| | Gene | Microarray | Deep neural | [36], [37] |
| | variants, | data, | networks, | |

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| | DNA | | D 1 | |
|-----------|---------------|-------------|---------------|---------|
| | DNA | | Deep neural | |
| | methylation, | /DNA | networks, | |
| | Drug design | sequences, | Deep neural | |
| | | Molecule | networks | |
| | | compounds | | |
| Medical | Neural cell | , | Convolution | [38-41] |
| imaging | classificatio | ET-scans,X- | al neural | [42-43] |
| | n, Tumor | ray images | networks,De | |
| | detection | | ep neural | |
| | | | networks | |
| Pervasive | Human | Video | Convolution | |
| sensing | activity | | | [44-47] |
| | recognition, | | networks,De | |
| | Food intake | able | ep neural | [48] |
| | energy | device,RGB | | |
| | expenditure | image,mobil | Convolution | [49] |
| | | e device | al neural | |
| | | | networks,De | [50] |
| | | | ep neural | |
| | | | networks | |
| Medical | Prediction of | Electronic | Convolution | [51] |
| informati | disease,Data | health | al neural | [52-53] |
| cs | mining | records,Blo | networks,de | [54-55] |
| | | od/lab test | ep | [52,56] |
| | | | autoencoder, | |
| | | | deep neural | |
| | | | network,Rec | |
| | | | urrent neural | |
| | | | networks | |
| Public | Predicting | Social | Deep | [57] |
| health | demographi | media | autoencoder, | [58-61] |
| | c | data,text | deep neural | |
| | information, | messages | network | |
| | air pollutant | _ | | |
| | prediction | | | |

IV. RESEARCH GAPS

In this era of digital data, health informatics has certainly become an important field of interest. There are countless application areas of health informatics out of which drug discovery was the one under consideration for this review paper.

Initially, the study of drug discovery started with machine learning's QSAR model which included SVM and RF. ANN's were sometimes used utilized with QSAR. With increase in data, demand for more effective methods increased. This is when deep learning cane into play. Undoubtedly deep learning has been very much successful in drug discovery but still there are various loopholes. To begin with, there is lack of knowledge and interest among the pharmaceutical and stakeholders in drugs. Adding to that is the lack of knowledge about diseases. And at that, the deep learning approaches CNNs, RNNs, Deep Autoencoders have their own limitations. These architectures are certainly not suitable for smaller datasets. They face a problem while dealing with compounds of similar structure and different activities. Some of these, fail to handle temporal healthcare data. Many other problems can be stated. But, the focus should be laid on generating targeted medicines as bringing medicines into the market is an expensive task. Moreover, combination of deep learning approaches with other machine learning methods should be tried to achieve better performances and better drug discovery.

V. CONCLUSION AND FUTURE SCOPE

Deep learning has gained immense popularity in the field of machine learning and pattern recognition. However, deep learning generally requires large sets of data for training purposes. The question is how to learn with the small amount of data available. Medicinal chemists typically work with a limited amount of data at their disposal with new targets, which is relevant to the one-time method of learning drug discovery. Lately, deep learning has used a new type of architecture, namely augmented memory neural networks, the first version being the neural cutting machine that has been significantly improved with a differentiable neural computer (DNC). Then, the DNCs were applied to find the shortest paths and answer the questions. However, these have not yet been used in drug discovery. In-depth learning enables the development of data-driven solutions in health informatics by enabling the automatic generation of entities that reduce the amount of human interference. This has proven advantageous for produced by medical imaging, unstructured data bioinformatics, medical informatics, etc. Nevertheless, deep learning can-not be considered the only solution to increase data in health informatics. But if one wants the studies to be considered, deep learning has proven to be better than another method of machine learning. Nevertheless, deep learning cannot be considered the only solution to increasing data in health informatics.

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