

Health Care Problem

- Chronic diseases: A **chronic disease** is a human health condition or disease that is persistent or otherwise long-lasting in its effects or a disease that comes with time.
- *Chronic:* the course of the disease lasts for more than 3 months.
- Common chronic diseases include:
	- arthritis
	- Asthma
	- Cancer
	- heart failure
	- diabetes
	- hepatitis C
	- HIV/AIDS

Epidemiology

- Chronic diseases constitute a major cause of mortality:
	- WHO: **38 million deaths a year** to non-communicable diseases
	- United States: **25% of adults** have at least two chronic conditions
	- 1 in 2 Americans (**133 million**) has at least one chronic medical condition
	- **61%** of all **deaths** among people older than 65 in the population
- Diabetes:
	- 7th leading cause of death in the US
	- Leading cause of many complications such as kidney failure, non-traumatic lower limb amputations, blindness
	- Major cause of heart disease

Economic impact

- Chronic diseases constitute a major section of medical care spending: (direct costs)
	- **75%** of the **\$2 trillion** spent annually in US medical care (\$1.5 trillion)
	- Diabetes: \$1 in \$3 Medicare expenditure
- (indirect costs)
	- limitations in daily activities
	- loss in productivity
	- loss of days of work
- Diabetes: \$322 billion per year

Nature of Chronic Diseases

Natural Disease Progression

Markov Chains

Data Implementation

Data Implementation

Hidden Markov Models

Hidden Markov Models - Learning

- The parameter learning task in HMMs: given an output sequence or a set of such sequences ===> the best set of state transition probabilities.
- The task is usually to derive the maximum likelihood estimate of the parameters of the HMM given the set of output sequences
- local maximum likelihood can be derived efficiently using the Baum-Welch algorithm

Baum–Welch algorithm

 $\lambda = (A, B, \pi)$

for each sequence

while desired level of convergence not acquired

for $t=1$ to T

for i in S

$$
\alpha_i(t) = P(Y_1 = y_1, Y_2 = y_2, ..., Y_t = y_t | X_t = i, \lambda)
$$

the probability of seeing the $Y_1 = y_1, Y_2 = y_2, ..., Y_t = y_t$ and being in state *i* at time *t*

$$
\beta_i(t) = P(Y_{t+1} = y_{t+1}, Y_{t+2} = y_{t+2}, \dots, Y_T = y_T | X_t = i, \lambda)
$$

the probability of the ending partial sequence $Y_{t+1} = y_{t+1}, Y_{t+2} = y_{t+2}, ..., Y_T = y_T$ given starting state *i* at time *t*

$$
\gamma_i(t) = P(X_t = i | Y, \lambda) = \frac{\alpha_i(t) \cdot \beta_i(t)}{\sum_{j=1}^N \alpha_j(t) \cdot \beta_j(t)}
$$

the probability of being in state i at time t given the observed sequence Y and the parameters λ

$$
\delta_{ij}(t) = P(X_t = i, X_{t+1} = j | Y, \lambda) = \frac{\alpha_i(t) a_{ij} \beta_i(t+1) b_j(y_{t+1})}{\sum_{i=1}^N \sum_{j=1}^N \alpha_i(t) a_{ij} \beta_i(t+1) b_j(y_{t+1})}
$$

the probability of being in state i and j at times t and $t+1$ respectively given the observed sequence Y and parameters λ

update:
$$
\pi_i = \gamma_i(1)
$$
 $a_{ij} = \frac{\sum_{t=1}^{T-1} \delta_{ij}(t)}{\sum_{t=1}^{T-1} \gamma_i(t)}$ $b_i(\nu_k) = \frac{\sum_{t=1}^{T} 1_{\nu_t = \nu_k} \gamma_i(t)}{\sum_{t=1}^{T} \gamma_i(t)}$

Baum–Welch algorithm

References

[1] U. N. Bhat, *An Introduction to Queueing Theory Modeling and Analysis in Applications*, Second. Birkhauser, 2008.

[2] R. M. Feldman and C. Valdez-Flores, *Applied Probability and Stochastic Processes*, Second. Springer, 2010.

[3] R. Sukkar, E. Katz, Y. Zhang, D. Raunig, and B. T. Wyman, "Disease progression modeling using Hidden Markov Models.," *Conf. Proc. IEEE Eng. Med. Biol. Soc.*, vol. 2012, pp. 2845–8, 2012.

[4] P. Srikanth, "Using Markov chains to predict the natural progression of diabetic retinopathy," *Int. J. Ophthalmol.*, vol. 8, no. 1, pp. 132–137, 2015.

[5] L. R. Rabiner, "A Tutorial on Hidden Markov Models and Selected Applications in Speech Recognition," *Proceedings of the IEEE*, vol. 77, no. 2. pp. 257–286, 1989.

[6] H.-C. Shih, P. Chou, C.-M. Liu, and T.-H. Tung, "Estimation of progression of multi-state chronic disease using the Markov model and prevalence pool concept.," *BMC Med. Inform. Decis. Mak.*, vol. 7, p. 34, 2007.

[7] S. Lee, J. Ko, X. Tan, I. Patel, R. Balkrishnan, and J. Chang, "Markov Chain Modelling Analysis of HIV/AIDS Progression: A Race-based Forecast in the United States," *Indian J. Pharm. Sci.*, vol. 76, no. 2, pp. 107–115, 2014.

[8] B. Sandikci, L. M. Maillart, a. J. Schaefer, O. Alagoz, and M. S. Roberts, "Estimating the Patient's Price of Privacy in Liver Transplantation," *Oper. Res.*, vol. 56, no. 6, pp. 1393–1410, 2008.

[9] B. Sandıkçı, L. M. Maillart, A. J. Schaefer, and M. S. Roberts, "Alleviating the Patient's Price of Privacy Through a Partially Observable Waiting List," *Manage. Sci.*, vol. 59, no. 8, pp. 1836–1854, 2013.