QUT IElab at CLEF 2018 Consumer Health Search Task: Knowledge Base Retrieval for Consumer Health Search

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Abstract. In this paper we describe our participation to the CLEF 2018 Consumer Health Search Task, sub task IRTask1. This track aims to evaluate and advance search technologies aimed at supporting consumers to find health advice online. Our solution addressed this challenge by extending the Entity Query Feature Expansion model (EQFE), a knowledge base (KB) query expansion method. In previous work we showed that Wikipedia, UMLS and CHV can be effective as basis for CHS query expansions within the EQFE model. To obtain the query expansion terms, first, we mapped entity mentions to KB entities by performing exact matching. After mapping, we used the Title of the mapped KB entities as the source for expansion terms. For our first three expanded query sets, we expanded the original queries sourcing expansion terms from each of Wikipedia, the UMLS, and the CHV. For our fourth expanded query set, we combined expansion terms from Wikipedia and CHV.

1 Introduction

The CLEF 2018 Consumer Health Search (CHS) Task aims to retrieve information relevant to people seeking health advice on the web [9, 11]. To address this task we applied and extended the Entity Query Feature Expansion model (EQFE), a knowledge base (KB) query expansion method [2], which we have recently found performing competitively on the previous CLEF e-Health IR challenges [4]. By producing query expansions using EQFE, we seek to overcome the common issue of poor query formulation in CHS: EQFE does so by reformulating the consumer’s health query with more effective terms (e.g., less ambiguous, synonyms, etc.).

One of the major challenges in CHS is the vocabulary mismatch between people’s query terms and the terms used in high quality health web resources. One source of high quality health related terms is the Unified Medical Language System (UMLS) [1] – in our approach we use the UMLS as one of the sources for query expansion. However, UMLS concepts are rarely mentioned in consumer
health queries: Keselman et al. [5] showed that only 8.1% of the possible n-grams constructed from consumer queries can be mapped (i.e., exact match) to UMLS concepts.

In contrast, Wikipedia is a crowdsourced, general purpose KB allowing people to promote and describe new concepts or augment existing concepts. While general purpose, Wikipedia contains considerable and detailed health information that has been effectively used in health related information retrieval [4, 7] – in our approach we use Wikipedia as one of the sources for query expansion.

In addition to UMLS and Wikipedia, we also used the Consumer Health Vocabulary (CHV) [10, 5] which was built to provide a mapping between consumer health terms and UMLS concepts. This mapping was constructed by extracting n-grams from MedlinePlus queries and various health-focused bulletin boards; then, automatically mapping these n-grams to UMLS via exact match comparison. Any un-mapped n-grams are then manually mapped to the UMLS [5]. From 2007, the CHV is available as part of the UMLS entries with CHV” as source (i.e., tuples in table MRCONSO with attribute “SAB” equal to “CHV”).

2 Our KB Query Expansion Model for CLEF 2018

We implemented the Entity Query Feature Expansion model for retrieval on the Wikipedia, UMLS, and CHV as the KB. For the Wikipedia KB, a single entity is represented by a single Wikipedia page (the page title identifies the entity). Beyond titles, Wikipedia also contains many page features useful in a retrieval scenario: entity title (E), categories (C), links (L), aliases (A), and body (B).

As for the UMLS and CHV KBs, a single entity is represented by the most frequently used terms for a single concept unique identifier (CUI). Features of a UMLS and CHV KB entity are aliases (A), body (B), parent concepts (P), and related concepts (R). Figure 1 shows the features we used for mapping the
<table>
<thead>
<tr>
<th>Run Id</th>
<th>Source of Expansion Terms</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>The title of Wikipedia KB entities</td>
</tr>
<tr>
<td>2</td>
<td>The title of UMLS KB entities</td>
</tr>
<tr>
<td>3</td>
<td>The title of CHV KB entities</td>
</tr>
<tr>
<td>4</td>
<td>The combination of expansion terms from Wikipedia and CHV KBs</td>
</tr>
</tbody>
</table>

Table 1. Summary of the runs submitted to CLEF 2018 CHS, IRTask1.

queries to entities in the KB and as the source of expansion terms. We formally define the query expansion model as:

\[
\hat{\vartheta}_q = \sum_{M} \sum_{f} \lambda_f \vartheta_{f(EM,SE)}
\]

(1)

where \( M \) are the entity mentions and contain uni-, bi-, and tri-gram generated from the query; \( f \) is a function used to extract the expansion terms. \( \lambda_f \in (0, 1) \) is a weighting factor. \( \vartheta_{f(EM,SE)} \) is a function to map entity mention \( M \) to the KB features \( EM \) (e.g., “Title”, “Aliases”, “Links”, “Body”, etc.) and extract expansion terms from source of expansion \( SE \) (e.g., “Title”, “Aliases”, etc.).

**Description of Runs**

We submitted 4 runs as described in Table 1. To produce this submission, we indexed the CLEF2018 corpus using Elasticsearch 5.1.1, with stopping and Porter stemming. As underlying retrieval model we used BM25F, with \( b_{title} = 0.90 \), \( b_{body} = 0.45 \) and \( k1 = 1.2 \) as these settings were found to be optimal for the CLEF 2016 eHealth collection. Further, BM25F allows to specify boosting factors for matches occurring in different fields of the indexed web page. We consider only the title field and the body field, with boost factors 1 and 3, respectively. These were found to be the optimal weights for BM25F for the CLEF 2016 eHealth collection [3] – and we hope these values do translate well into the new CLEF 2018 CHS collection.

To obtain **Run 1**, we:
1. indexed Wikipedia pages with Medicine infobox type and pages with infobox containing links to medical terminologies such as Mesh, UMLS, SNOMED CT, etc.
2. extracted uni-, bi-, tri-grams of the original query that matched CHV entities.
3. exact matched the extracted n-grams to the Wikipedia’s aliases.
4. used the title of the matched entities as expansion terms

To obtain **Run 2**, we:
1. indexed all English and non-obsolete UMLS concepts.
2. extracted uni-, bi-, tri-grams of the original query that matched entities in the UMLS (via QuickUMLS [8]).
3. exact matched the extracted n-grams to the UMLS’s aliases.
4. used the title of the matched entities as expansion terms.

To obtain **Run 3**, we:

1. indexed English and non-obsolete CHV concepts that associated to the four key aspects of medical decision criteria (i.e., symptoms, diagnostic test, diagnoses, and treatments) as used in [6].
2. extracted uni-, bi-, tri-grams of the original query that matched entities in the CHV.
3. exact matched the extracted n-grams to the CHV’s aliases.
4. used the title of the matched entities as expansion terms.

To obtain **Run 4**, we combined expansion terms obtained from the Wikipedia and CHV KBs (run 1 and run 3). Using CLEF 2016 collection, we found that this combination performed the best effectiveness when compared to other possible combinations.

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**References**

