Teleinformatics Engineering Department, Federal University of Ceará

Bayesian Inference of Disease Mappings with Gaussian Processes

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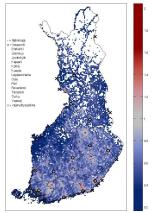
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Introduction



Introduction Disease Mapping

\rightsquigarrow What it is and what we can do with it?



Definition

A **disease map** is a collection of objects (e.g. the count of occurrences in a group of individuals) in their geographical position (Lawson et al., 2001).

With disease mapping we can (Best et al., 2005):

- Identify **disease patterns** in space.
- Obtain clues as to the **disease aetiology** and highlight areas of **elevated risk**.
- Define the likelihood of a disease.

Our objetive is to infer the spatial distribution of the risk of a disease

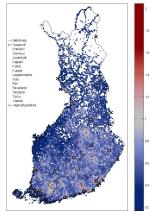
Given its incidence.

Figure by Vanhatalo, Mäkelä, et al. (2010).



Introduction Disease Mapping

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Mapping the risk of a disease allows us to identify potential risk factors and to develop public policies to mitigate their effects.

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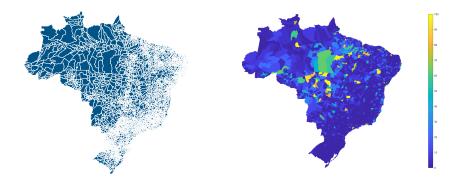
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\rightsquigarrow Our problem: Leprosy in Brazil

In this work, the **risk of Leprosy**, a neglected tropical disease, is studied.

- For each municipality, the number of **notified cases** is available.
- The data are collected by the National Health System (SUS).
- We use data relative to the period 2001-2019.

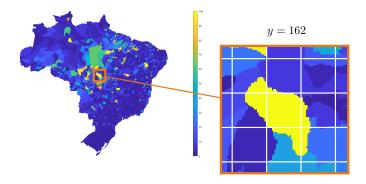




\rightsquigarrow Our problem: Leprosy in Brazil

On a grid over Brazil, we associate to the *n*-th cell the corresponding cases y_n .

• We use **Bayesian inference** to determine the risk μ_n in each cell.



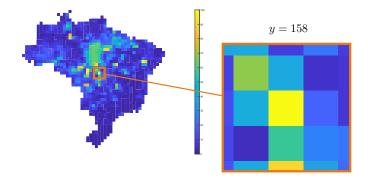
In the figure, municipality of Querência, state of Mato Grosso.



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Bayesian Inference



Bayesian Inference Defining inference

 \rightsquigarrow What is inference?



- We're interested in the **process** that has generated the **observed data** y.
- We assume a **model** that depends on some **unobserved parameters**.

We assume that the disease occurrence y depends on the hidden risk μ.
We want to estimate μ, given y and given the model.



→ What is *Bayesian* inference?

To model the variables in our problem (y, μ) , we use **probability distributions**.

We combine the knowledge about the data (likelihood) with knowledge about the parameters (prior), to get an updated knowledge about parameters (posterior).

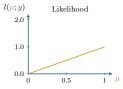


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 $p(y|\mu)$



The likelihood l expresses how the **probability** $p(y|\mu)$ of the data varies for different values of the **parameter** μ .

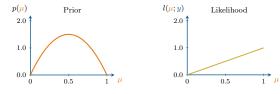


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The **prior** expresses the **probability** $p(\mu)$ of the parameter, before observing the data y.

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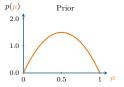
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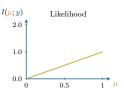
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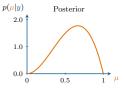
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The **posterior** $p(\mu|y)$ combines these probabilities and updates the prior using the observed data.



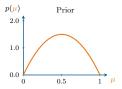
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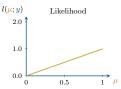
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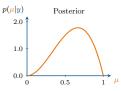
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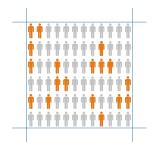
\rightsquigarrow How to model the disease cases?

Let α be the probability of an individual (in a cell) to be positive to the disease.

If we test m individuals (gray), then the probability of y of them being sick (orange) is

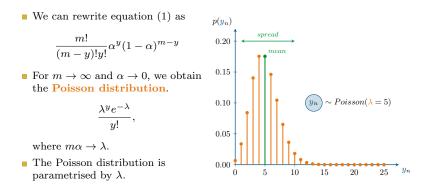
$$\binom{m}{y} \alpha^y (1-\alpha)^{m-y}.$$
 (1)

A Binomial distribution.









We assume that in each cell n the number of occurrences y_n follows a Poisson distribution with parameter λ_n , which is thus the expected number of cases.



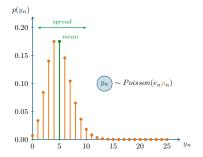
\rightsquigarrow How to count the disease cases?

The expected number of cases in cell n is also given as weighted number of cases $\lambda_n = e_n \mu_n$, where the standardised cases e_n are weighted by the risk μ_n .

The standardised cases are

$$e_n = \frac{\text{total cases}}{\text{population}} \times p_n$$

 p_n is the cell population.





Our goal is to infer the risk μ_n given the observed cases y_n , for the whole country.

- We model each y_n as an independent Poisson variable with mean $e_n \mu_n$.
- The risks are **positive variables**, to jointly model them as Gaussian Process we transform them

 $f_n = \log \mu_n$

The resulting Gaussian Process is

 $f_1, \ldots, f_n | \theta \sim \mathcal{GP}(m(\mathbf{x}), k(\mathbf{x}, \mathbf{x}' | \theta))$

Because of this model, each risk μ_n is connected with all the other risks, and thus they relate to each other.





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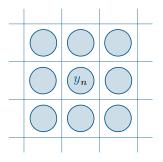
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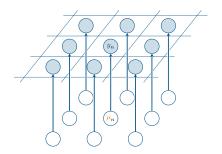
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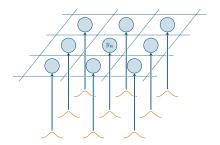
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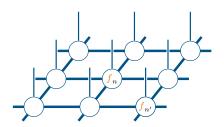
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The strength of the relation between cells n and n' will depend on their distance

$$|\mathbf{x} - \mathbf{x}'|$$

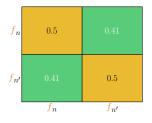


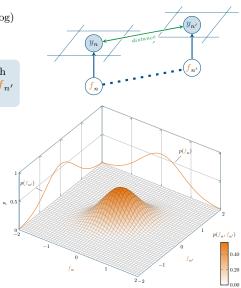




A covariance matrix encodes how (log) risks f_n and $f_{n'}$ relate to each other.

When cells n and n' are **near** to each other, the covariance relating f_n and $f_{n'}$ will be large and small otherwise.





Bayesian Inference of Disease Mappings with GP

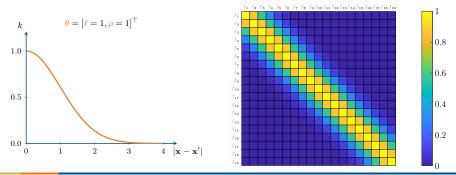


 \rightsquigarrow Creating covariance matrices with covariance functions...

Covariance matrices are obtained from covariance functions (CF)

• CFs model the relation between f_n and $f_{n'}$.

$$k_{\rm SE}(\mathbf{x},\mathbf{x}') = \rho^2 \exp\left(-\frac{|\mathbf{x}-\mathbf{x}'|^2}{2\ell^2}\right)$$



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Bayesian Inference of Disease Mappings with GP

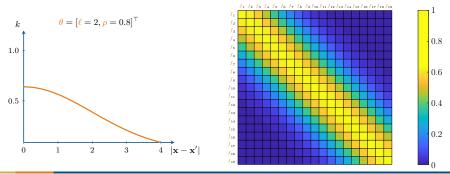


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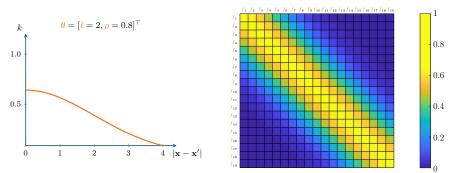


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$$k_{\mathrm{SE}}(\mathbf{x}, \mathbf{x}') =
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The covariance functions are also **parametrised** by a set of random variables θ .

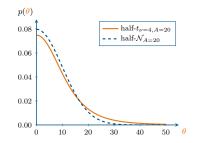
 $\blacksquare \ \theta = [\ell, \rho]$ are parameters, the length-scale and magnitude.



\rightsquigarrow The parameters of the CF's are also random variables

Each element of θ is modeled with a half-Student's t distribution, which is a weakly informative hyperprior

Distributions with large variance are called weakly informative.

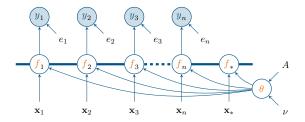




$\rightsquigarrow {\bf A \ graphical \ representation}$

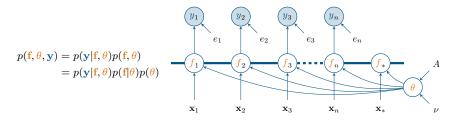
The probabilistic model of the disease mapping problem is

$$\begin{split} y_1, \dots, y_n | \mu_1, \dots, \mu_n &\sim \prod_{n=1}^N Poisson(e_n \mu_n) & (\text{Observation model}) \\ \mu_n &= \exp(f_n), \quad \forall n & (\text{log-Gaussian transform}) \\ f_1, \dots, f_n | \theta &\sim \mathcal{GP} \left(m(\mathbf{x}), k(\mathbf{x}, \mathbf{x}' | \theta) \right) & (\text{GP prior}) \\ \theta &\sim \text{half-Student's } t(A, \nu) & (\text{Hyperprior}) \end{split}$$



Conducting the inference

Conducting the inference



We are interested in the distribution of the risk given data, the **posterior** $p(\mathbf{f} | \mathbf{y})$

$$p(\mathbf{f} \mid \mathbf{y}) = \int p(\mathbf{f}, \theta \mid \mathbf{y}) d\theta = \frac{1}{Z_p} \int \underbrace{p(\mathbf{y} \mid \mathbf{f})}_{\text{GP Prior Model}} \underbrace{p(\mathbf{f} \mid \mathbf{X}, \theta)}_{\text{GP Prior Model}} \underbrace{p(\theta)}_{\text{for a star of the star of th$$

where **X** are the cells' position $\mathbf{X} = [\mathbf{x}_n]_{n=1}^N$, $\mathbf{f} = [f_n]_{n=1}^N$, $\mathbf{y} = [y_n]_{n=1}^N$ and Z_p

$$Z_p = \iint p(\mathbf{y} \mid \mathbf{f}) p(\mathbf{f} \mid \mathbf{X}, \theta) p(\theta) d\theta d\mathbf{f}.$$

This problem is **not solvable analytically** and we need to simplify it.



 \rightsquigarrow Pretend it is fully Bayesian...

When the marginal posterior $p(\theta \mid \mathbf{y})$ is smooth near its mode $\hat{\theta}$, we can use its evidence approximation, also known as the empirical Bayes approximation*

$$p(\mathbf{f} \mid \mathbf{y}) \approx p(\mathbf{f} \mid \mathbf{y}, \hat{\theta}), \quad \text{where } \hat{\theta} = \arg \max_{\theta} p(\theta \mid \mathbf{y}).$$

In a **fully Bayesian** approach, we **consider** all the possible values of θ , whereas in empirical Bayes we **rank** them and choose $\hat{\theta}$, as the "**best** one" among them.

• The marginal posterior is obtained using the Bayes' rule

$$p(\theta \mid \mathbf{y}) \propto p(\theta) p(\mathbf{y} \mid \theta) = p(\theta) \int p(\mathbf{y} \mid \mathbf{f}) p(\mathbf{f} \mid \mathbf{X}, \theta) d\mathbf{f}$$

The posterior of the risk becomes

$$p(\mathbf{f} \mid \mathbf{y}, \hat{\theta}) = \frac{p(\mathbf{y} \mid \mathbf{f}) p(\mathbf{f} \mid \mathbf{X}, \hat{\theta})}{\int p(\mathbf{y} \mid \mathbf{f}) p(\mathbf{f} \mid \mathbf{X}, \hat{\theta}) d\mathbf{f}}$$

*See D. J. MacKay (1992) for a more detailed discussion.



To compute $\hat{\theta}$, we maximise $\int p(\mathbf{y} | \mathbf{f})p(\mathbf{f} | \mathbf{X}, \theta) d\mathbf{f}$ after approximating it with an **unnormalised Gaussian distribution** using second order Taylor expansions^{*}.

We approximate the integral in the computation of the posterior in a similar way.

As a result, we obtain

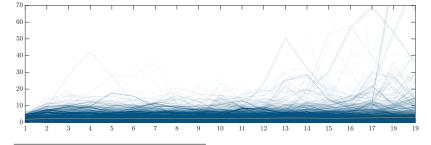
Approximated Posterior

$$p(\mathbf{f} \mid \mathbf{y}, \hat{\theta}) \approx \mathcal{N}\left(\mathbf{f} \mid \hat{\mathbf{f}}, \mathbf{H}^{-1}\right)$$
where $\hat{\mathbf{f}} = \arg \max_{\mathbf{f}} p(\mathbf{f} \mid \mathbf{y}, \hat{\theta}), \mathbf{H}^{-1} = -\nabla_{\mathbf{f}}^2 \log p(\hat{\theta} \mid \mathbf{y}, \hat{\theta}) \text{ and } \hat{\theta} = \arg \max_{\theta} p(\theta \mid \mathbf{y}).$

*Details in Vanhatalo, Pietiläinen, et al. (2010).

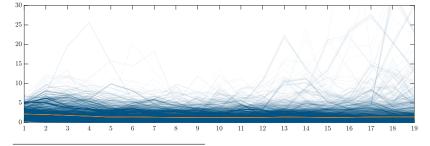
Results





Each cell is $43\times43~\mathrm{km}$





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