2020-2025 JSPS A3 Foresight Program (Grant No. JPJSA3F20200001)

Health Data Analysis by Causal Discovery for Supporting Policy Formation and Municipal Problem-Solving





Networked Information Systems Laboratory(NISLAB), Waseda University



Why Need Causal Discovery in Healthcare Research?

- Too expensive or difficult, or ethically impossible to perform certain controlled experiments.
- To identify the underlying causal relationships between variables, such as the relationship between a particular risk factor and a disease outcome.
- Help to identify new and unexpected relationships between variables that may have gone unnoticed in traditional research methods.



Related Causal Discovery Work for Japan Healthcare	Data				
PLOS ONE		Data: • Health checkup data (anonymized) of			
COPEN ACCESS DEER-REVIEWED	Osal • Targ 30k-	 Osaka prefecture during 2012-2017 Target 60s/70s/80s age groups with 30k+ samples each 			
Causal relations of health indices inferred statistically using the DirectLiNGAM algorithm from big data of Osaka prefecture health checkups		Age	Men	Woman	
Jun'ichi Kotoku 🔄, Asuka Oyama, Kanako Kitazumi, Hiroshi Toki, Akihiro Haga, Ryohei Yamamoto, Maki Shinzawa, Miyae Yamakawa, Sakiko Fukui, Keiichi Yamamoto, Toshiki Moriyama Published: December 23, 2020 • https://doi.org/10.1371/journal.pone.0243229		50-59	20,316	26,654	
Mathadi		60-69	69,892	109,529	
Direct LiNGAM [1]		70-79	97,327	131,036	
(Linear Non-Gaussian Acyclic Model)	1.	80-89	32,594	46,906	
Target health concerning variables: • Selected 11 indicators [2] for elders [1] Shimizu, Y., et al. A linear no	n-Gaussian ac	yclic model f	or causal disc	covery. Journal of	

[2] J. Kotoku et al. Causal relations of health indices inferred statistically using the DirectLiNGAM algorithm from big data of Osaka prefecture health checkups. PLOS ONE, 15(12), 2020

Most Critical Diseases in the Elderly Population

The basis for selecting the aforementioned 11 indicators for causal discovery is grounded in prior knowledge, specifically from investigations into elderly populations residing in Osaka.



11 selected indicators	Chinese	Korean	What's it?
Systolic blood pressure (sBP)	收缩压	시스토릭 혈압	The highest pressure reaches the arteries when the heart beats and pumps blood. Normal: <120mmHg and Elevated: >140mmHg.
Low-density lipoprotein cholesterol (LDL)	低密度脂蛋白 胆固醇	저밀도 지질 콜레스테롤	A type of blood fat called " bad cholesterol " deposits on blood vessels' walls to increase the risk of <u>cardiovascular disease</u> .
High-density lipoprotein cholesterol (HDL)	高密度脂蛋白 胆固醇	고밀도 지질 콜레스테롤	A type of blood fat called " good cholesterol " removes other fats, particularly the LDL.
Triglyceride (TG)	甘油三酯	트리글리세라이드	A type of blood fat to store excess energy . High-level TG increases the risk of <u>heart disease and stroke</u> .
Glutamic Oxaloacetic Transaminase (GOT)	谷氨酸草酸转 氨酶	글루타믹 옥사로아세틱 트랜사민에이즈	Blood biochemical marker; an important indicator of liver health . Elevated GOT levels indicate <u>liver disease</u> or other organ damage.
Gamma-glutamyl transpeptidase (yGT)	γ-谷氨酰转 换酶	감마 글루타믹 트랜스펩 타다이즈	Another important indicator of liver health , also concerning with cardiovascular disease, type 2 diabetes, and certain types of cancer.
Glutamic Pyruvic Transaminase (GPT)	谷氨酸丙酮转 氨酶	글루타믹 프루비카 트랜 사민에이즈	Another important indicator of liver health . Elevated GPT levels indicate liver disease or other organ damage.
Body Mass Index (BMI)	体质指数	체질 지수	An indicator of fatness to evaluate the risk of <u>heart disease, stroke,</u> and diabetes. Normal BMI in the range [18.5, 24.9].
Fasting blood glucose level (fBG)	空腹血糖水平	식전 혈당 수치	Glucose (sugar) in blood after fastening(typically 8 hr) to diagnose diabetes and pre-diabetes.
Hemoglobin A1c (HbA1c)	血红蛋白A1c	헤모글로빈 A1c	2 to 3 months average blood glucose level to diagnose and monitor diabetes and assess a person's glucose control.
Height	身高	신장	Serve other indicators in analysis.





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Conclusion with Causal Relationship fundings



Causal graph sample of age 70s women, by Direct LiNGAM For samples of 20,000 or smaller, errors in causality become large. The causality relations become fragile.

PLOS ONE

ture health checkung

Causal relations of health indices inferred statistically using he DirectLiNGAM algorithm from big data of Osaka

The role of HDL on BMI and TG (the dark blue thick arrows in the figure) is quite important and true for all age groups, both men and women. However, the role of LDL on other indices is small.

Several interesting causal relations were found to be quite robust:

- HDL strongly influences BMI and TG; this relation is robust in all age groups.
 - LDL is quite independent.
 - sBP influences BMI.

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- BMI influences fBG (HbA1c) and GPT (yGP).
- TG influences GPT (γGP).

fBG and HbA1c are correlated strongly, but the causal order is fragile.

GOP is influenced both by GPT and by **y**GP.

Note: some fundings need assess in greater detail by specifically examining these indices using other statistical methods.

Next Work: Do Further beyond Causal Diagram

Review this research PJ title, which

cooperates with local government.

(What) Position: Health Data Analysis

(How) Method: by Causal Discovery

(Why) Purpose: for <u>Supporting</u> Policy Formation and <u>Municipal Problem-Solving</u>

Research PJs comparison	Osaka	Minano
Scale	Metropolitan	Local town
Population	About 8,823,000	About 9,000
Data	Health checkup data only Selected groups and indicators	All health-related data All citizens
Causal discovery purpose	Causal graph	Causal graph, Tracing, Simulating etc
Project	Academic independed	Academic co-work with local government
Support policy formation	Possible, but week	Possible, might be strong
Municipal problem solving	Possible, but week	Possible, aiming to resonable effect
Extended social experiment	No	Yes
Duration	Half year (Finished in 2020)	Three years (Started in Nov, 2022)



Resource: Minano Tourism Association https://www.minano.gr.jp/en/ 13



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Resource: Minano Tourism Association https://www.minano.gr.jp/en/

Minano-machi, Japan

https://youtu.be/UruJDhMHAM0





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Resource: Minano Tourism Association https://www.minano.gr.jp/en/ 15

Health Data Analysis by Causal Discovery for Supporting Policy Formation and Municipal Problem-Solving



Phrase-I: Da	ata preparati	on <u>General processes</u>	 All data is personal data, managed by
NHI(KDB)	Data source	National Health Insurance Organizations (NHI) (Medical, Diagnosis Proceduer Combination (DPC), Dental, and Dispensing)	 individual social insurance numbers. A lot of the data is input manually by healthcare execution organizations with unavoidable errors
(National DB,	Data duration	2016-2022 (7 years)	 Many sub-databases can not organize
the central government)	Record amount	230,000 records (Medical only) 30,000 records (Health checkup, etc)	data automatically. • Other problems.
	Main info	Insured information, Injury/Disease information, Medical information	 Data washing Data master files Anonymized processes
	Data source	Municipal Health Management System (HMS)	
MUNICIPAL HMS	Data duration	2016-2022 (7 years)	
(Local DB,	Record amount	6,500 records	
managed by the local government)	Main info	Basic health checkup information, Osteoporosis checkup results, etc.	Local DB for analyzing (build new)

managed by the PJ research team.





Local Problems: requests from the elder healthcare frontline

Key risks of elders	Chinese	Korean	Japanese
Dementia	痴呆症	치매	認知症
Osteoporosis	骨质疏松症	골절마비증	骨粗しょう症
Diabetes	糖尿病	당뇨	糖尿病
Diabetic nephropathy	糖尿病肾病	당뇨성 신염	糖尿病性腎症
Cardiovascular and cerebrovascular	心脑血管疾病	심혈관질환, 뇌혈관질환	心脳血管疾患

The above diseases concern:

etc.

- Do people with ***** also suffer from some specific diseases?
- How do lifestyle and family situations affect *****?
- What's the effective early intervention for ****** prevention?
 - The frontline healthcare financial control concerns:
 How to deduce the necessity of going to the hospital?
 How does a family start a suitable early intervention?

How Causal Discovery Helps Healthcare?

(6) 慢性透析患者 年齢分布の推移, 1982-2021年(図6)



In 2021, the number of dialysis therapy clients was 349,700 in Japan.

2786 people per million population.

67% of them are over 65-yr-old. The average age is 69.7 yr-old.



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Resource: The Japanese Society for Dialysis Therapy (JSDT). 2021 21

Diabetic Nephropathy Severe Exacerbation Prevention Program (DNSEP Program)

For new dialysis therapy clients, 40.2% result from dialysis nephropathy. (JSDT Renal Data Registry. 2021) JSDT: The Japanese Society for Dialysis Therapy

If one dialysis therapy client can be controlled to stay in the early stages, save the huge national medic budget, max to near JPY5m (USD400k) per year per person.



JPY 5m/yr (USD 400k/yr)

JPY 500k/yr (USD 40k/yr)

JPY 250k/yr (USD 20k/yr)

JPY 50k/yr (USD 4k/yr) V Dialysis therapy stage

IV Renal end-stage

III Manifest renal stage

II Early renal stage I No complications

National burden portion of medical expenses per person per year. Diabetic nephropathy related.

Resource: Ministry of Health, Labor, and Welfare of Japan. 2017



(To be continued...)

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