

# The Current State of MetaMap and MMTx

*UMLS Webcast*

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# Outline

- Historical background
- Distribution modes
- MetaMap and MMTx\* similarities
- MetaMap and MMTx differences
- Recent MetaMap development

\*MMTx – MetaMap Transfer



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# Historical Background

- Programs that map biomedical text to a thesaurus
  - CLARIT (*Evans et al., 1991*)
  - SAPHIRE (*Hersh et al., 1990*)
  - **MetaMap** (*Aronson et al., 1994*)
  - Metaphrase (*Tuttle et al., 1998*)
  - **MMT<sub>x</sub>** (*2001*)
  - KnowledgeMap (*Denny et al., 2003*)
  - Mgrep (*2009*)
- Characteristics of MetaMap/MMT<sub>x</sub>
  - Linguistic rigor
  - Flexible partial matching
  - Emphasis on thoroughness rather than speed



# MetaMap/MMTx Example

- PMID – 19529903
- TI – Bile duct stricture due to caused by portal

Stricture of bile duct

Causing

Hepatic

biliopathy: Treatment with one-stage

Administration procedure

One

Phase

portal-systemic shunt and biliary bypass.

Portasystemic shunt

Biliary

Bypass



# MetaMap/MMTx Distribution Modes

**MetaMap Portal**

Home NLM > LHCBC > MetaMap

**Home**

**Announcement (HTML)**

**Prerequisites**

**Downloads**

**Installation**

**Binary Update Installation**

**Un-Install**

**Using MetaMap**

**MetaMap 2008 v2**  
(25 Mar 2009)

**Release Notes (HTML)**

**MetaMap 2008**  
(24 Sep 2008)

**Release Notes (HTML)**

**Readme (HTML)**

**Usage (HTML)**

**MetaMap 2007**  
(24 Sep 2008)

**Readme (HTML)**

**Usage (HTML)**

**Usage Statistics**

**MetaMap** is a highly configurable program developed by Dr. Alan (Lan) Aronson at the National Library of Medicine (NLM) to map biomedical text to the UMLS Metthesaurus or, equivalently, to discover Metthesaurus concepts referred to in text. MetaMap uses a knowledge intensive approach based on symbolic, natural language processing (NLP) and computational linguistic techniques. Besides being applied for both IR and data mining applications, MetaMap is one of the foundations of NLM's Medical Text Indexer (MTI) which is being applied to both semiautomatic and fully automatic indexing of biomedical literature at NLM.

**Avenues to MetaMap:**

<b>Web Access</b>	Our Semantic Knowledge Representation (SKR) website provides both Interactive and Batch facilities that allow users to send text to our internal machines and run various programs including the <b>MetaMap</b> program. The Interactive facility is designed for testing options and running small amounts of text. The Batch facility runs large amounts of text through our Scheduler program which distributes the workload over a large pool of clients.	<a href="#">GO TO SKR</a>
<b>MetaMap</b>	Distributable version of the original Prolog <b>MetaMap</b> program. Currently only includes binary distribution for Solaris and Linux platforms.	<a href="#">GO TO MetaMap</a>
<b>SKR API</b>	Java-based API to the SKR Scheduler facility was created to provide users with the ability to programmatically submit jobs to the Scheduler Interactive and Batch facilities instead of using the web-based interfaces. We have tried to reproduce full functionality for all of the programs under the SKR Scheduler umbrella. The SKR API has been tested on the Solaris, Linux, and Windows XP platforms.	<a href="#">GO TO SKR API</a>
<b>NOTE: MMTx is no longer supported except for major bug fixes. We recommend all users switch to the downloadable MetaMap (described above) if possible.</b>		
<b>MMTx</b>	MetaMap Transfer (MMTx) is a java-based distributable version of the <b>MetaMap</b> program. Includes binary and source distributions and is supported on Solaris, Linux, Windows, and Mac platforms. MMTx was an early attempt at providing a distributable version of MetaMap and is currently being phased out in favor of the original Prolog version of MetaMap. There are two reasons for the phase out of MMTx: 1) The original Prolog version of MetaMap is much faster, especially now with the new speed enhancements (V2). 2) We were never able to make the results the same between MMTx and MetaMap - there was always about a 20% difference in the overall results MMTx would produce.	<a href="#">GO TO MMTx</a>

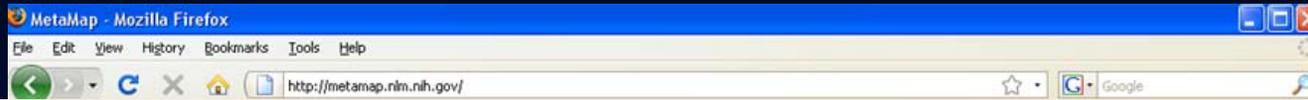
<http://metamap.nlm.nih.gov>



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# MetaMap/MMTx Distribution Modes



## Avenues to MetaMap:

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<http://metamap.nlm.nih.gov>



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# MetaMap and MMTx Similarities

- Same purpose: mapping biomedical text to concepts in the UMLS Metathesaurus
- Same basic algorithm
  - Tokenization and parsing into phrases
  - Variant generation
  - Candidate retrieval
  - Candidate evaluation
  - Final mapping construction



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# MetaMap and MMTx Differences (1/2)

- Algorithmic details
  - Overall organization of the algorithm
  - Tokenization
- Results
  - Occasional differences, MetaMap's generally preferred
- Programming language
  - Prolog/C (MetaMap)
  - Java (MMTx)



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# MetaMap and MMTx Differences (2/2)

- Platform availability
  - MMTx: Solaris, Linux, Windows, OS X
  - MetaMap: Solaris, Linux, Windows (soon), OS X (soon)
- Performance
  - MetaMap is 2-5 times faster than MMTx (as of 2008)



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# Recent/Current MetaMap Development

- Technical algorithm enhancements resulting in at least 3x speedup in MetaMap execution
  - MetaMap is now 3-10 times faster than MMTx (2009)
- Further technical development
  - Migration from Sun/Solaris to Linux environment
  - Update to current Berkeley DB to prepare for
  - Migration from Quintus to SICStus Prolog
- MetaMap now detects negation (via NegEx)
- MetaMap 3D (colorized MetaMap output)



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# MetaMap 3D

MetaMap 3-D - Windows Internet Explorer

http://skr.nlm.nih.gov/3D/sample.html

MetaMap 3-D

PMID- 11070566  
OWN - NLM  
STAT- MEDLINE  
DA - 20001120  
DCOM- 20001120  
LR - 20070214  
PUBM- Print  
IS - 1368-5031 (Print)  
VI - 54  
IP - 7  
DP - 2000 Sep  
TI - Benefits of a standardised feeding regimen during a clinical trial in preterm neonates.  
PG - 429-31  
AB - The feeding regimen was standardised for a trial of erythromycin to reduce the time to reach full feeds (150 ml/kg/day) by 30% in neonates of < or = 32 weeks gestation. No significant improvement was noted in the primary outcome (median time : erythromycin 93.5 vs placebo 104 hours, p = 0.60 ). However, necrotising enterocolitis > or = stage II disappeared and the time to full feeds was reduced by over 50% in all neonates during the 18-month trial, and for more than two years after the trial, when the standardised feeding regimen was adopted as routine policy for feeding neonates of < or = 32 weeks (< 28 weeks : 13 vs 4.8 days, p < 0.05 ; > 28 weeks : 8 vs 3.9 days, p < 0.05 ). This was in contrast to an average of six cases of NEC per year with 45% mortality during the previous five years. The benefits of standardised feeding schedules -- improved detection /treatment of signs /symptoms of feed intolerance -- are emphasised.  
AD - Department of Neonatology, Kirwan Hospital for Women, Queensland, Australia

**Semantic Groups Legend**

- Disorders
- Physiology
- Procedures
- Concepts & Ideas
- Geographic Areas
- Living Beings
- Chemicals & Drugs

**Notes:**

- 1) Underscoring denotes Phrase Head
- 2) | Denotes Phrase Boundary

Show Phrase Boundaries

Done Internet 100%



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# Pointers: Website and Contributors

<http://metamap.nlm.nih.gov>

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