

# COMP62342

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# What have we learnt?

- Intro to Knowledge Representation
  - Why do this?
- Knowledge Acquisition
  - What do we model?
- Formalisation, Ontology Patterns
  - How to represent things (in OWL)?
- Semantics and Reasoning
  - Models, entailments, tableau
  - What exactly is it we are saying and what are the consequences?
- OWL API
  - Using ontologies in applications.
- SKOS
  - An alternative to OWL using OWL
- Linked Data
  - Using OWL or RDF(S) for data on the Web
- ...next & last: OBISs

# What do we do with ontologies?

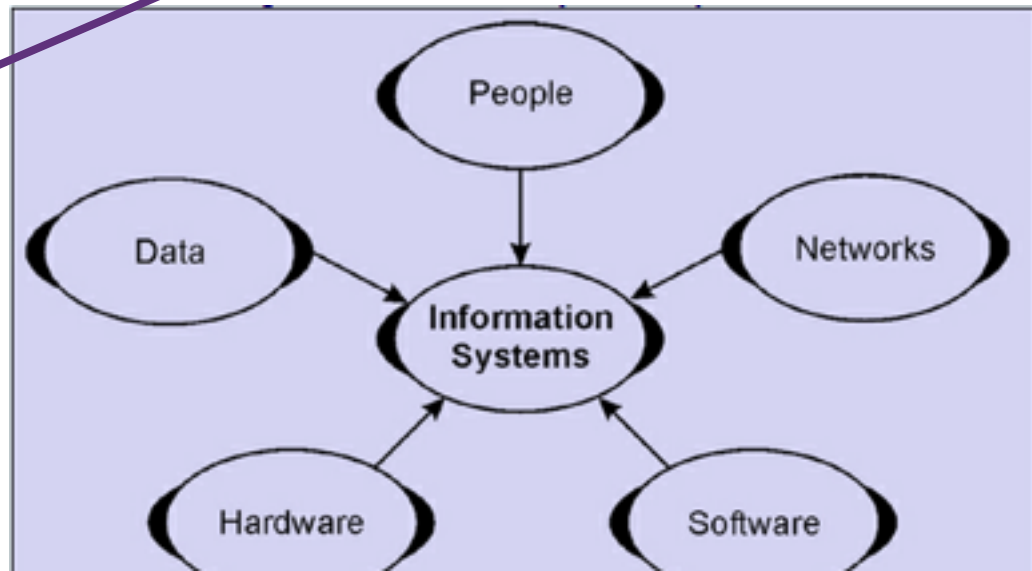
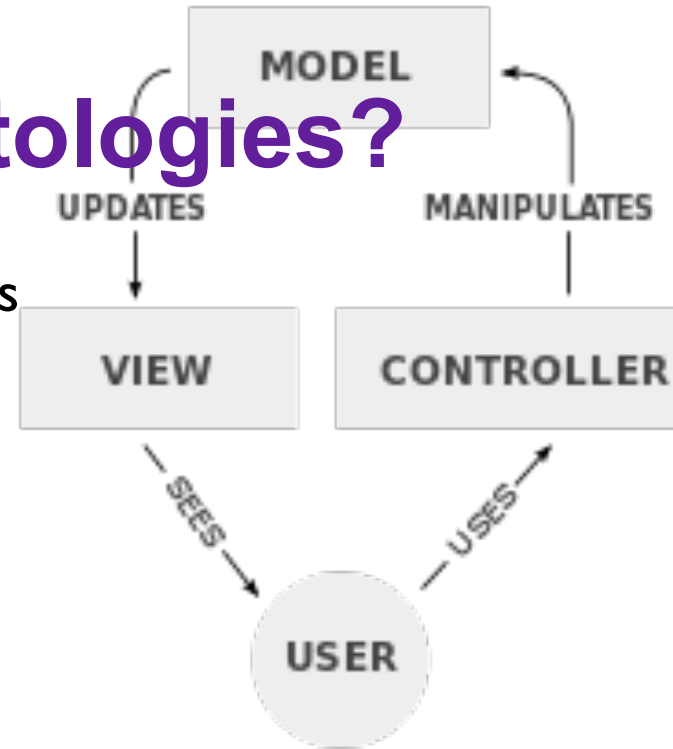
## E.g., Ontology-Based MCQ Generation

- Given that
  - ontology captures rich domain knowledge
  - assessment/MCQ generation is costly & relevant
  - in particular for healthcare & medicine
- why not auto-generate MCQs from ontologies?
- Building on research we have done so far,
  - in particular on how to make **good** MCQs, e.g., control difficulty
- we are now exploring this further with **Elsevier**
  - towards more complex MCQs, e.g., patient cases
- interesting new app with new reasoning problems
  - similarity of concepts and cases

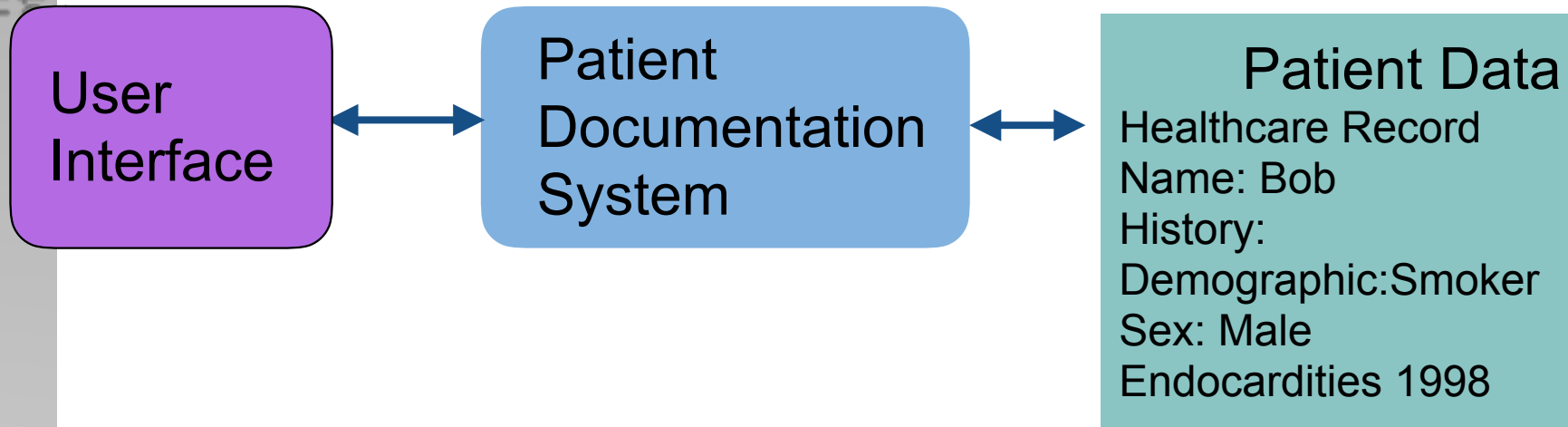
# What do we do with ontologies?

- OBIS: Ontology-Based Information Systems
- Think MVC/Front-End Back-End
- IS needs to store some data, in:
  - relational database
  - no-SQL database
  - files
  - XML docs
  - ...
  - Ontology

Which?

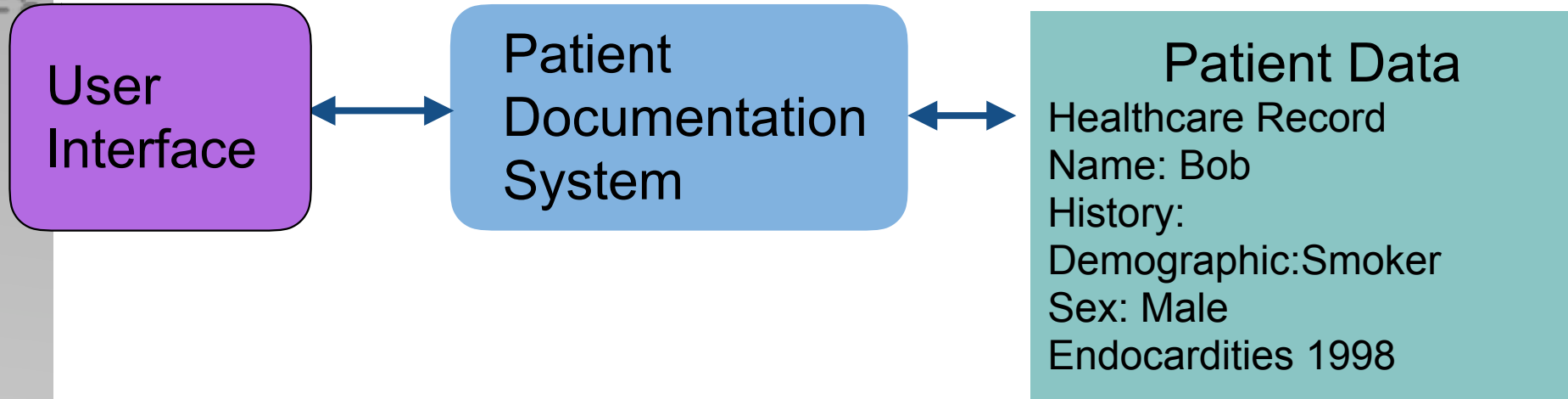


## E.g.: Patient Documentation System



- Information System relies on Patient Data
  - recorded in different systems with possibly different structures
  - recorded by different clinicians with different styles
- Holding Data in DB:
  - many complex queries that need to change with changes in medicin

# E.g.: Patient Documentation System



- Toy example: get all *Parents* from database - get
  - those who have a *known child*
  - those described as *Mother* or *Father*
  - those described as *Grandmother* or *Grandfather*
  - ...

# Why basing ISs on Ontologies?

User  
Interface

Patient  
Doc.  
System

TBox

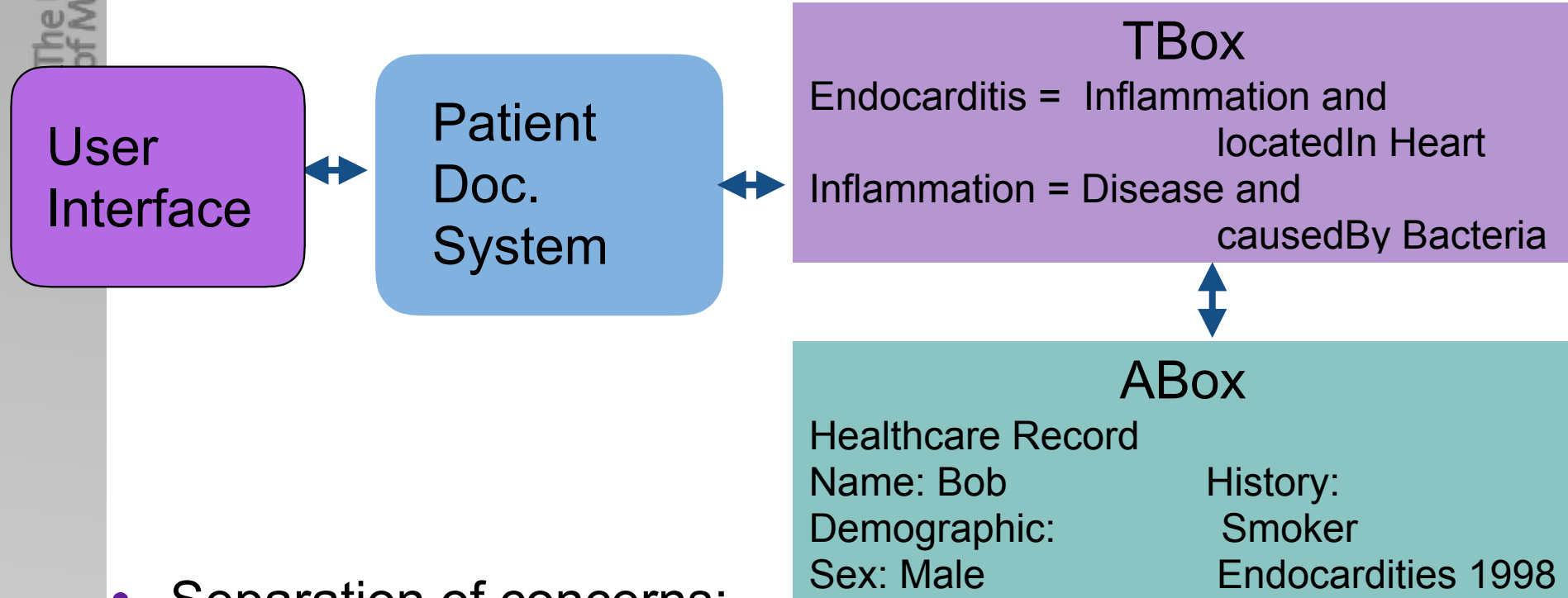
Parent  $\equiv$  Person and hasChild some Person  
 Mother  $\equiv$  Parent and Female  
 Grandparent  $\equiv$  Parent and hasChild some Parent  
 ...

ABox

Healthcare Record  
 Name: Bob                      History:  
 Demographic:                      Smoker  
 Sex: Male                              Endocardities 1998

- Toy example: get all *Parents* from ontology:
  - use suitable TBox and
  - retrieve all those who are **entailed** to be an instance of *Parent*
  - ...

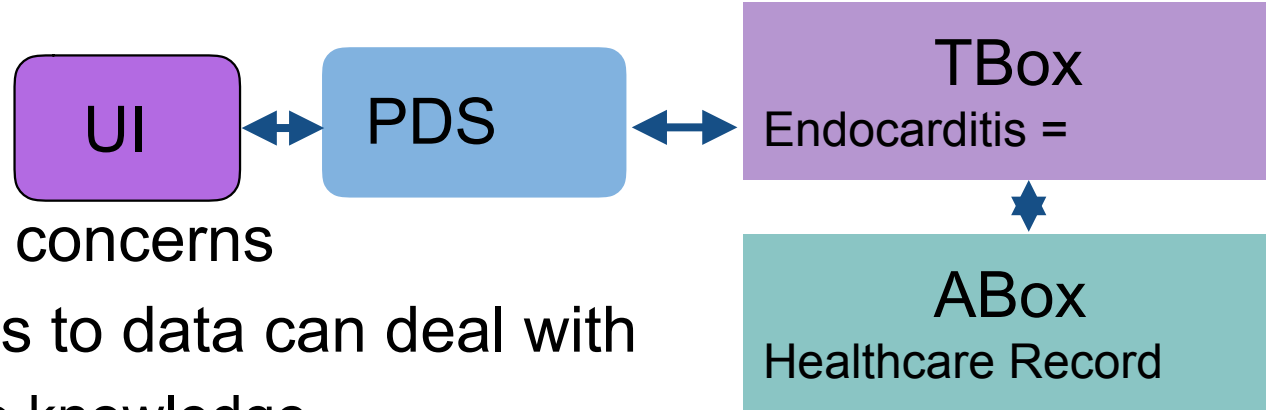
# Why basing ISs on Ontologies?



- Separation of concerns:
  - background knowledge & terminology into ontology
  - data into DB or ABox
  - suitably linked/mapped
  - behaviour into program code

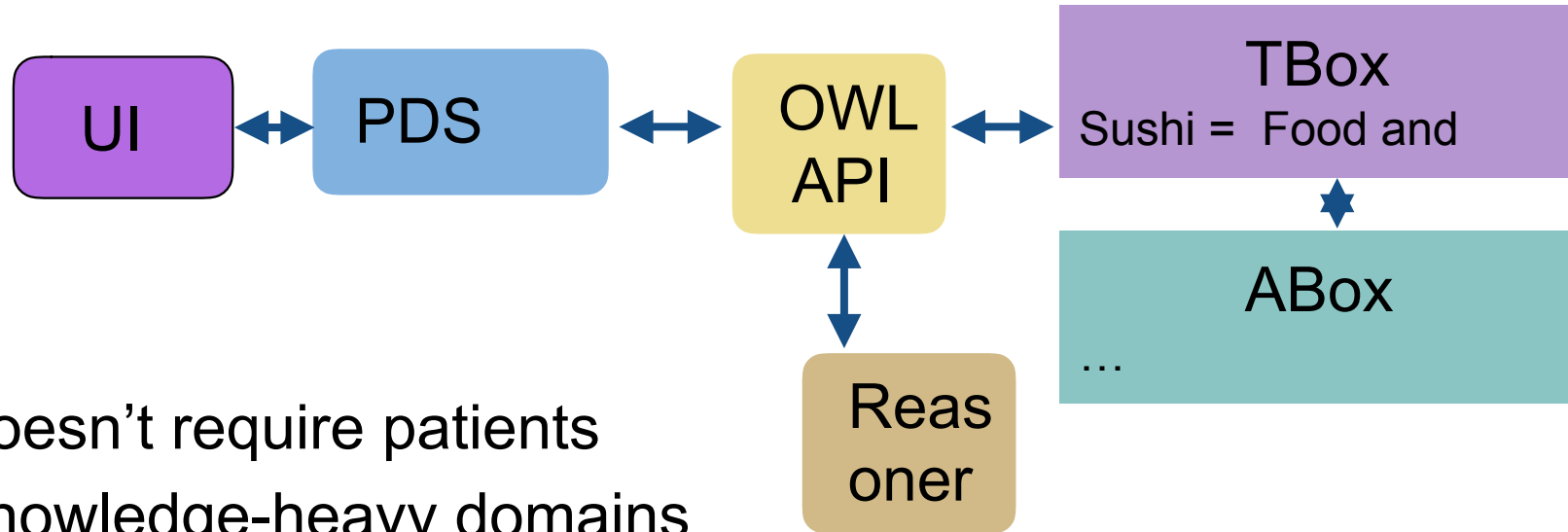


# Why basing ISs on Ontologies?



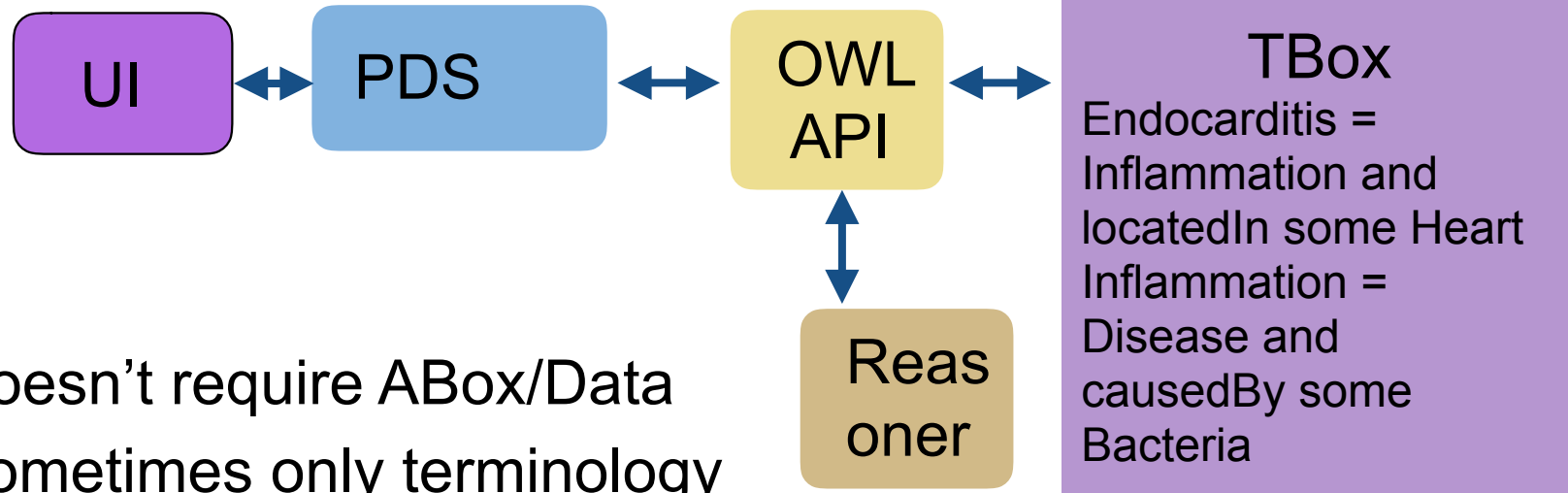
- Separation of concerns
- ✓ flexible access to data can deal with
  - **incomplete** knowledge
  - data coded in different ways
  - complex expressions: post-coordination!
  - data coded & queries on varying levels of granularity
- ✓ via terms as appropriate to IS
  - same data can be linked to different ontologies
- ✓ maintainable
  - changes in background knowledge reflected in updated ontology

# Ontology-Based ISs



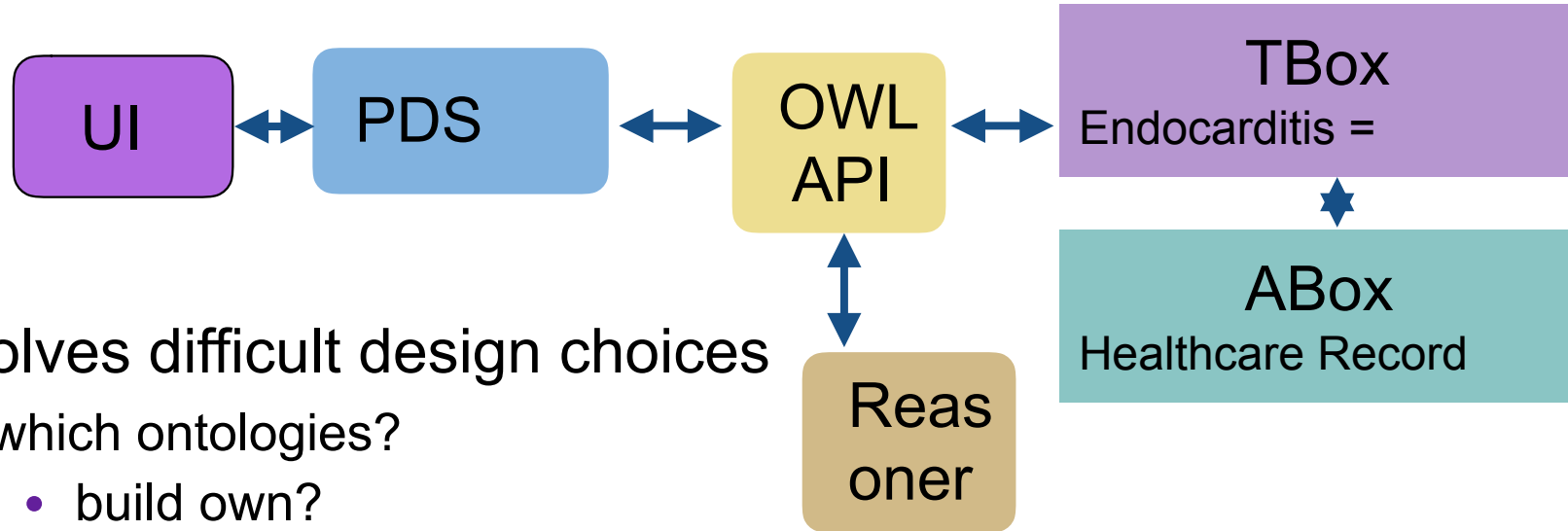
- doesn't require patients
- knowledge-heavy domains
- domains where knowledge changes
- Example:
  - restaurants & food properties: allergies, ethical,...
  - biochemistry
  - defence, intelligence
  - (nano) engineering
  - recruitment/skills management (later more)

# Ontology-Based ISs



- doesn't require ABox/Data
- sometimes only terminology
  - e.g., NCI Thesaurus

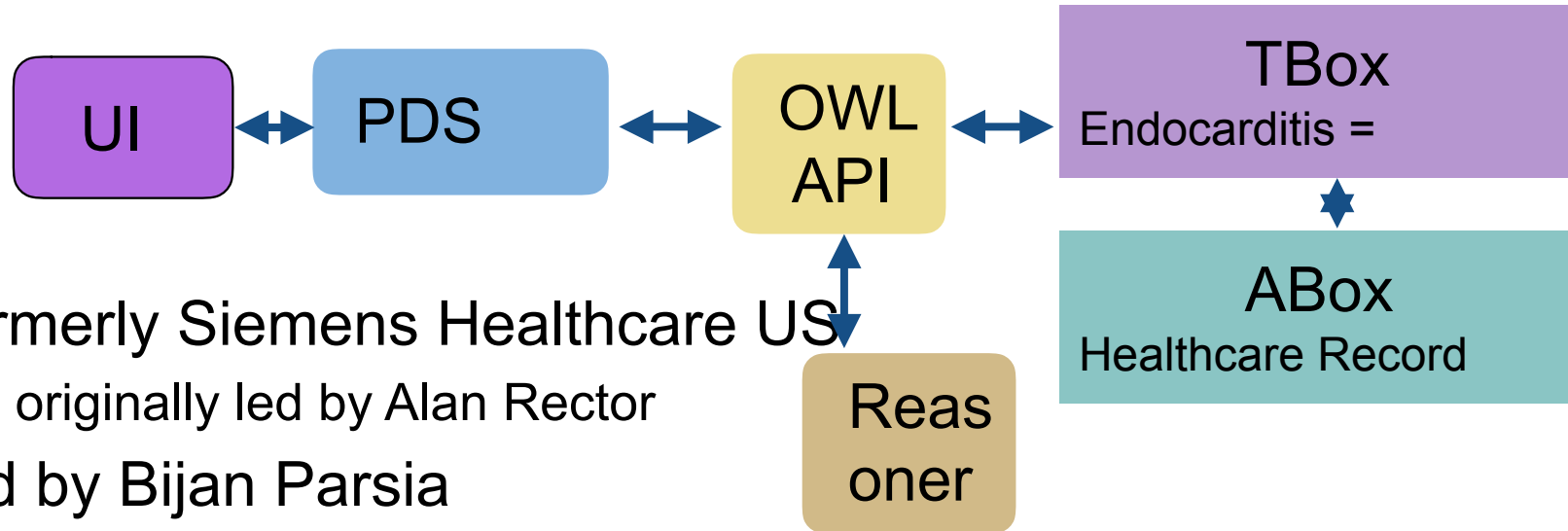
# Building Ontology-Based ISs



- involves difficult design choices
  - which ontologies?
    - build own?
    - reuse/extend/combine others?
  - how to map?
  - what to put in OWL classes or Java classes?
  - how to make it scale?
  - which tools to use?
    - OWL API
    - reasoner

We tried to give you knowledge & understanding to answer these questions

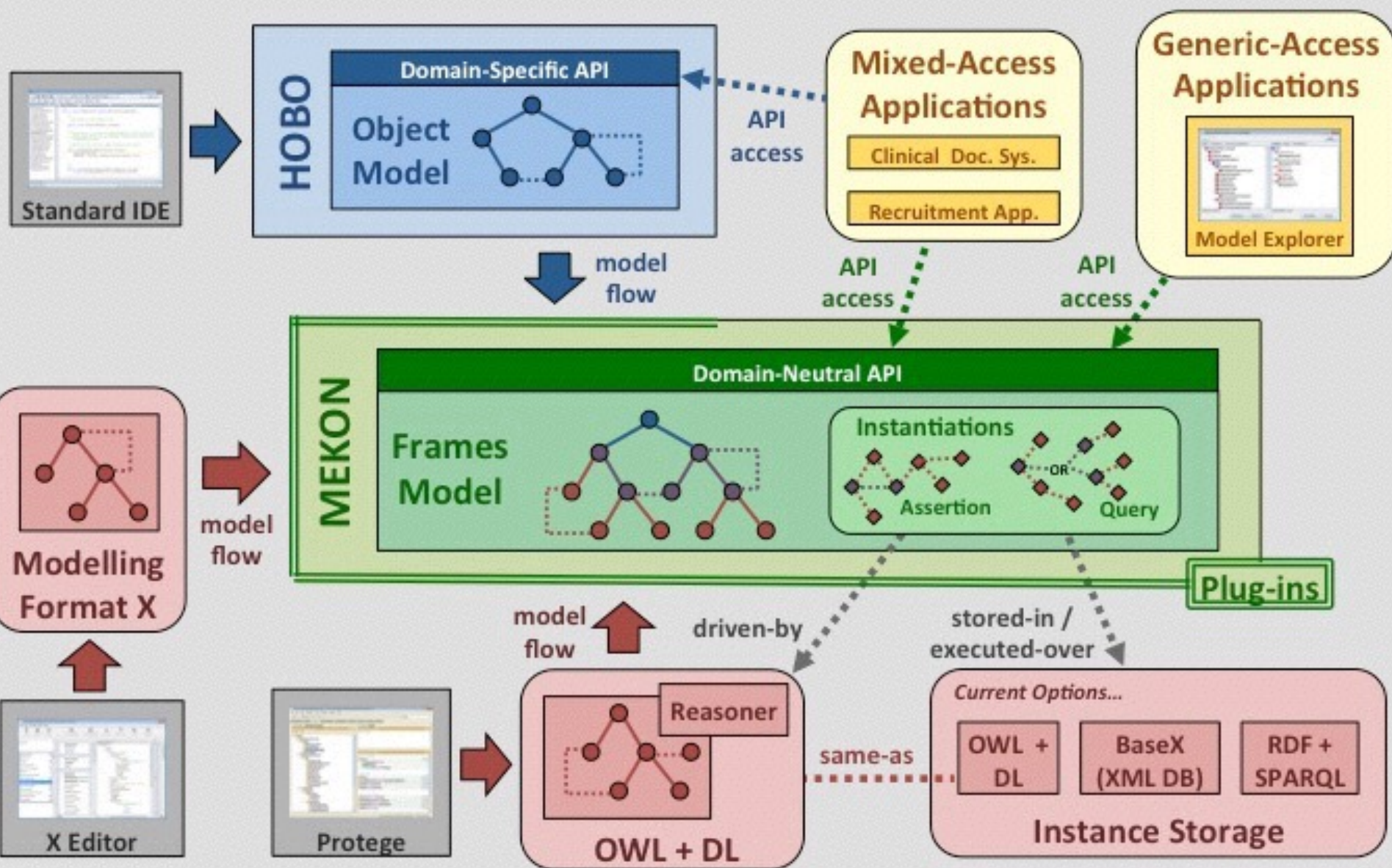
## E.g., Cerner Collaboration



- formerly Siemens Healthcare US
  - originally led by Alan Rector
- led by Bijan Parsia
- concerned with patient documentation systems:
  - given the information about patient we have so far
  - what should we ask/document next?
- fine example where
  - **behaviour** depends on but differs from
  - static knowledge captured in ontology
- led to development of Chiron, Hobo, Mekon,...

# MEKON & HOBO

*Java frameworks for building ontology-driven applications*



# Demo

# Exam

- Online Exam via Blackboard
  - Two hours
  - Multiple Choice Questions
  - Short Essays
  - Answer **all** questions
- 
- ...use Forum for questions!



# Coursework this Week

- Core Task: Sushi Ontology (50% of your coursework mark)
  - Submit your report (individual) Monday, May 15 (65% of CT mark)
  - Submit your ontology (group) Thursday, May 11
  - Peer assess your ontologies (35% of CT mark)
- W5 Query application
  - use the OWL API to query an ontology
- W5 Postcoordination
  - a short essay

# The Sushi Ontology

- An ontology of sushi
- Classes that enable us to represent sushi and answer competency questions like
  - Which sushi are suitable for vegetarians?
  - Which sushi have beef and are not spicy?
  - See BB for more CQs
- Class hierarchy organised using the PIMPS upper ontology.
- Peer assessed
  
- Plus a reflective report on how you built it, interesting aspects of the model