

USING THE MOST ADVANCED COMPUTERS TO SOLVE THE HARDEST PROBLEMS



EXASCALE DEEP LEARNING ENABLED PRECISION MEDICINE FOR CANCER



THOMAS BRETTIN
Strategic Program Manager
Argonne National Laboratory
University of Chicago



Argonne National Laboratory is a
U.S. Department of Energy laboratory
managed by UChicago Argonne, LLC.

Thursday June 20th, 9:00 am – 4:00 pm.
Deep Learning for Science, ISC2019

ACKNOWLEDGEMENTS

Materials in this presentation comes from **Argonne, Oak Ridge, Livermore and Los Alamos National Laboratories, National Cancer Institute, Frederick National Laboratory for Cancer Research, and the University of Chicago**

Special thanks to:

Gina Tourassi (ORNL). Fred Streitz and Brian Van Essen (LLNL). Tanmoy Bhattacharya and Jamal Mohd-Yusof (LANL). Eric Stahlberg and George Zaki (NCI). Rick Stevens, Fangfang Xia and Arvind Ramanathan (ANL)



THE 15 SECOND OVERVIEW

- What is the motivating problem
 - Cancer
- What is CANDLE
 - It is an exascale computing project application
 - It is a framework for executing computational (DL) experiments
- Results
 - It scales and is enabling discovery
- Next steps
 - Bigger challenge problems

Medical Sure presents an infographic look at

CANCER

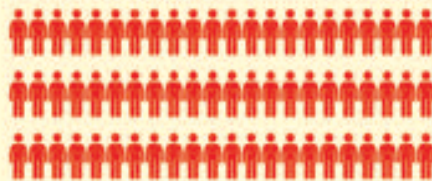


**1 in 4 of us will die from
CANCER**

In the United States, the cancer death rate of 59% (Cancer) Although this rate has been decreasing steadily since the peak in 1991 when 215 people died from one form of cancer or another per 100,000 US residents.



1 in 4 people in the USA will die from cancer



Approximately 1500 people die every day from a form of cancer

Cancer death rates (USA)



Heart and soft tissue
Death Rate: 42%



Brain and nervous system
Death Rate: 10%



Digestive system
Death Rate: 82%



Lung and respiratory system
Death Rate: 82%



Eye and orbit
Death Rate: 13%



Bones and joints
Death Rate: 49%



Prostate and male genital system
Death Rate: 14%

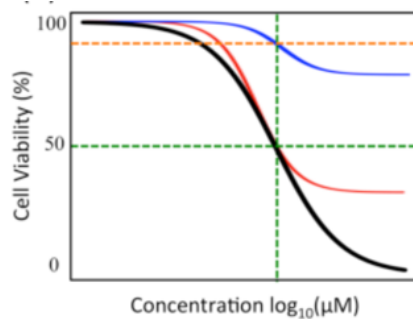


Female genital system
Death Rate: 30%

www.medicare.gov

CANDLE (CANCER DISTRIBUTED LEARNING ENVIRONMENT)

The National Cancer Institute challenges which CANDLE addresses



- understanding the molecular basis of key Ras protein interactions
- developing predictive models for tumor response to drug treatments
- extracting information from cancer patient records to determine optimal cancer treatment strategies

CANDLE IS A DOE EXASCALE COMPUTING PROJECT APPLICATION



Exascale Systems 2021 - 2022



ANL

Frontier

ORNL

El Capitan

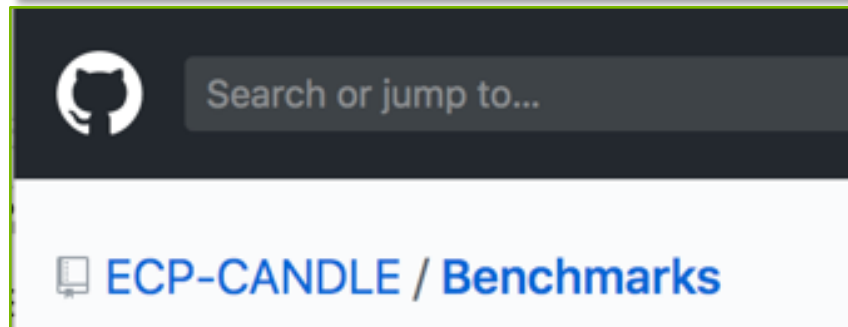
LLNL

ECP's work encompasses the development of an entire exascale ecosystem: applications, system software, hardware technologies and architectures, along with critical workforce development.

PROGRESS

Updates since SC18, Dallas TX

Hyperparameter Sweeps, Data Management (e.g. DIGITS, Swift, etc.)	<i>Workflow</i>
Network description, Execution scripting API (e.g. Keras, Mocha)	<i>Scripting</i>
Tensor/Graph Execution Engine (e.g. Theano, TensorFlow, LBANN-LL, etc.)	<i>Engine</i>
Architecture Specific Optimization Layer (e.g. cuDNN, MKL-DNN, etc.)	<i>Optimization</i>



- **Milestone 10** – CANDLE library released
- **Milestone 11** – New benchmarks released
- **Milestone 12** – CANDLE v0.2.0 released

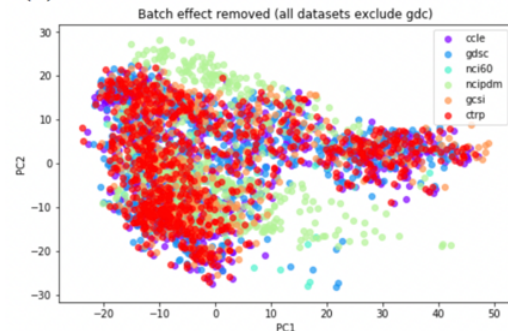
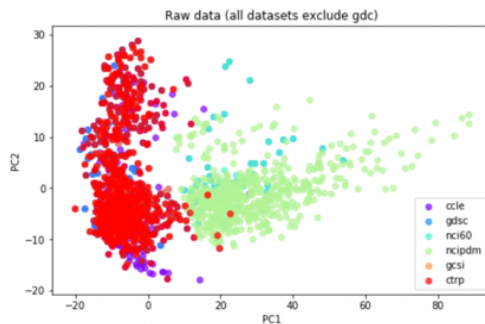
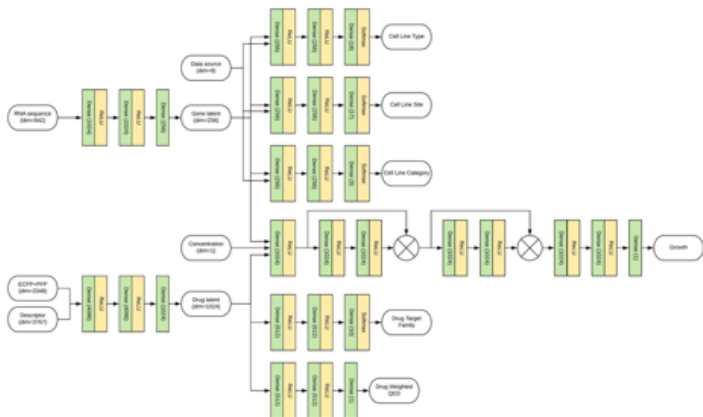
MULTI MODAL MULTI TASK DRUG RESPONSE MODEL

New CANDLE Benchmark

we proposed a new formulation of the dose response prediction problem that unified single and paired drug screening data

Data Source	# Tumor Samples	# Drugs	# Dose Response Samples	Treatment Type
NCI-ALMANAC	60	104	3,686,475	Drug pair
CCLC	504	24	93,251	Single drug
CTRPv2	887	544	6,171,005	Single drug
gCSI	409	16	58,094	Single drug
GDSC	1,075	249	1,894,212	Single drug
NCI	60	52,671	18,862,308	Single drug
GDC	11,081	N/A	N/A	N/A
NCI-PDM	1,198	12	518*	Single and paired drugs

* PDM drug response were measured differently from cell line dose response data.



MULTI-TASK HIERARCHICAL CNN WITH ATTENTION FOR INFORMATION EXTRACTION

New CANDLE Benchmark

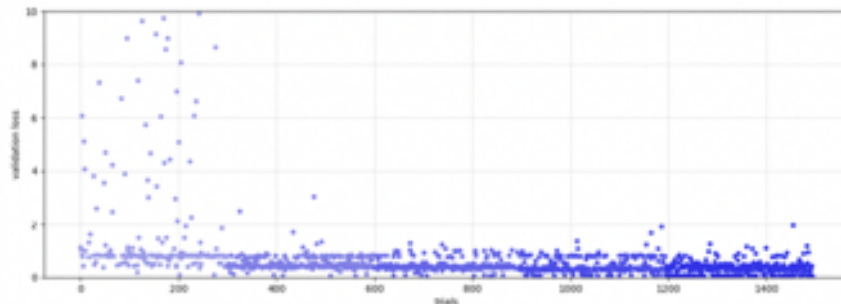
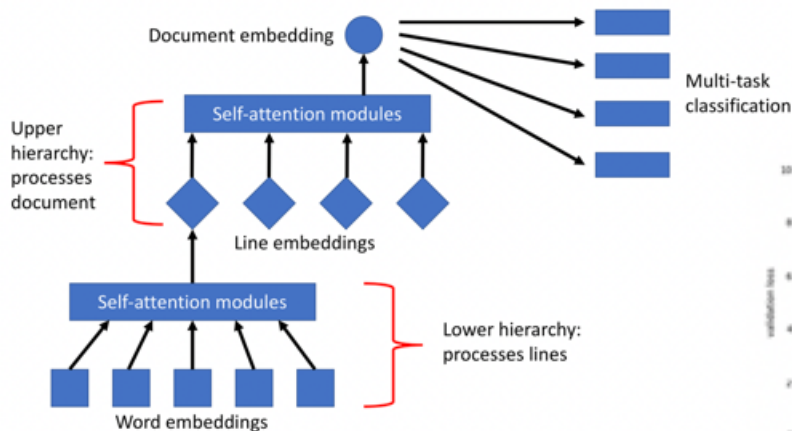


Figure 1: Multi-task hierarchical convolutional attention network (MT-HCAN) architecture

Clinical Task	Micro-F1 (MT-CNN)	Micro-F1 (MT-HCAN)	Macro-F1 (MT-CNN)	Macro-F1 (MT-HCAN)
Subsite	0.975	0.986	0.963	0.980
Laterality	0.966	0.981	0.965	0.980
Behavior	0.988	0.992	0.971	0.980
Grade	0.966	0.970	0.963	0.967

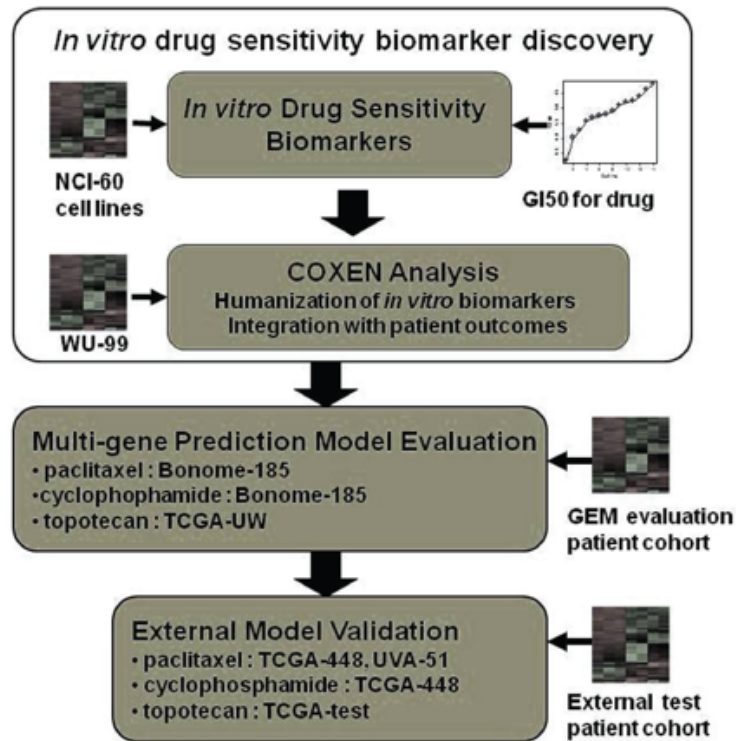
DRUG RESPONSE CROSS STUDY VALIDATION

Candle Demonstration, Release v0.2

- Train on one study, predict on the others
- Perform feature selection based on cross-correlation
- Use biological knowledge derived features as control
- Perform hyperparameter optimization for different feature sets
- Train N best models
- Infer on other studies
- Investigate model uncertainty

FEATURE SELECTION

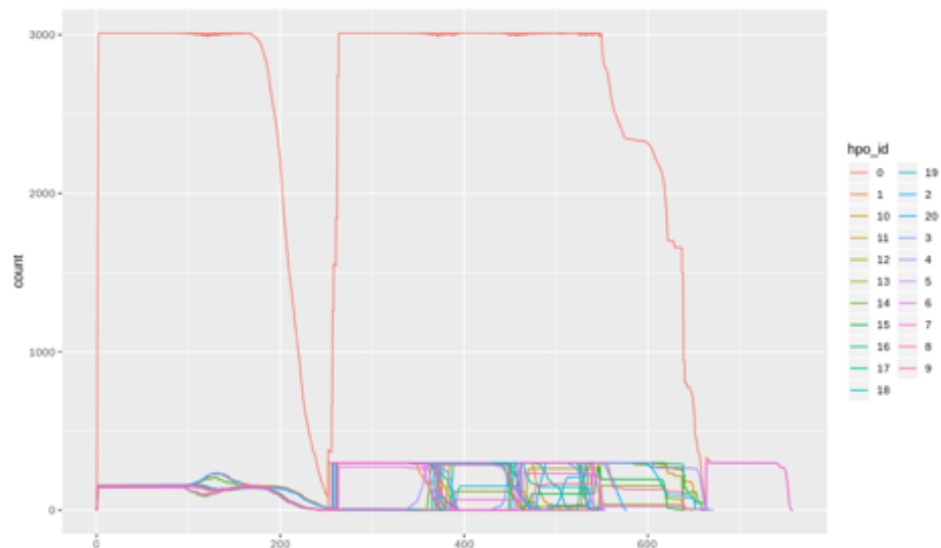
- CO-eXpression Extrapolation (COXEN) algorithm
 - identify the genes whose expression in one study was related to drug sensitivity and then determined which of these genes maintained *concordant expression* in a second study.
- Lincs 1000
 - 1,000 landmarks genes sufficient to impute 82% of the remaining gene expression levels



HYPERPARAMETER OPTIMIZATION

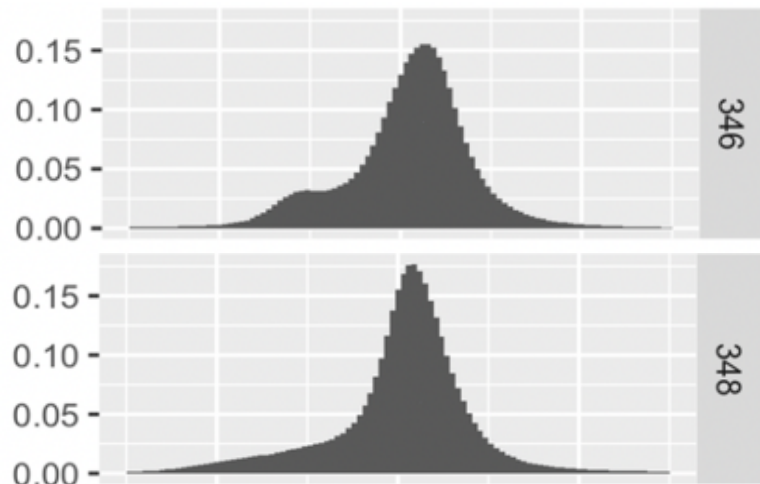
Concurrent experiments

- Perform 25 hyperparameter optimization experiments
 - 20 COXEN selected feature sets
 - F5 Lincs1000 selected feature sets
- Structural and learning parameters examined
 - network depth
 - network width
 - optimizers
 - activations
 - etc



INFERRENCING

		Testing set				
		NCI60	CTRP	GDSC	CCLE	gCSI
Training set	NCI60	R2 = 0.81 MAE = 17.1	R2 = 0.38 MAE = 32.2	R2 = 0.24 MAE = 35.3	R2 = 0.48 MAE = 33.4	R2 = 0.46 MAE = 33.4
	CTRP	R2 = 0.44 MAE = 29.8	R2 = 0.68 MAE = 22.7	R2 = 0.23 MAE = 34.4	R2 = 0.61 MAE = 28.3	R2 = 0.60 MAE = 28.5
	GDSC	R2 = 0.32 MAE = 34.0	R2 = 0.25 MAE = 36.7	R2 = 0.53 MAE = 27.2	R2 = 0.50 MAE = 32.6	R2 = 0.60 MAE = 29.2
	CCLE	R2 = 0.27 MAE = 36.9	R2 = 0.20 MAE = 39.2	R2 = 0.11 MAE = 38.9	R2 = 0.68 MAE = 25.4	R2 = 0.39 MAE = 34.2
	gCSI	R2 = 0.00 MAE = 44.9	R2 = 0.11 MAE = 43.1	R2 = 0.05 MAE = 42.8	R2 = 0.33 MAE = 40.6	R2 = 0.80 MAE = 192



CROSS STUDY VALIDATION

- Best results to date
- Room for improvement

UNCERTAINTY QUANTIFICATION

- Normalized error for 450 models
- Exploring how to compare models

CANDLE DEMONSTRATION

Milestone 12 – CANDLE v0.2.0 released

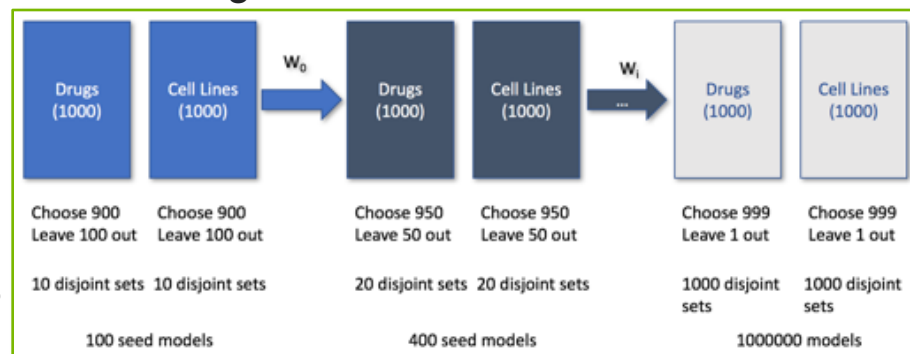
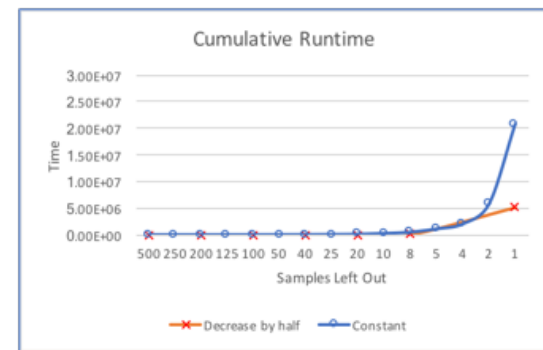
Stage	Quantity Description
Data Pre-Processing	20 Feature selected data sets, one control (LINCS 1000)
HPO Searches	25 HPOS (21,300 models searched)
Model Training	450 Models trained
Cross-Study Validation	450 Models screened

Summit	
Inferences/node	82,782,891
Inferences/hr/node	6,898,574
Inferences/sec/node	1,916
Nodes	450
Total Inferences	37,252,301,160
Total Inferences/hr	3,104,358,430

ACCELERATED DNN TRAINING METHODOLOGY

August 2019

- Develop accelerated training methodology
 - small portion of predictors will be trained from scratch
 - utilize pre-trained weights to speed-up model convergence for large number of models
 - explore recent advancements such as parameter sharing and pruning, and low-rank factorization
- Design learning rate schedulers
 - learning rate schedulers that allow models to converge when trained with pre-trained weights
- Explore DNN architectures
 - test pre-trained weights with various architectures that require long time to converge
 - include attention-based neural networks i.e. dot-product and multi-head attention





GITHUB AND FTP

- **ECP-CANDLE GitHub Organization:**
 - <https://github.com/ECP-CANDLE>

- **ECP-CANDLE FTP Site:**
 - The FTP site hosts all the public datasets for the benchmarks from three pilots
 - <http://ftp.mcs.anl.gov/pub/candle/public/>

Thank You

Dear DLS speakers,

Thanks again for your coming presentation at the Deep Learning for Science workshop at ISC'19, June 20th, Frankfurt Germany.

We have posted a tentative program at <https://dlonsc.github.io/>, please let me know if you need to present at a different slot.

Best,
Zhao, Vali, Ian