## Towards Biomedical Neurosymbolic AI: From Semantic Knowledge Infrastructure to Explainable Predictions



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## **Drug discovery**

Goal is to discover a molecule that can efficiently correct/modify an abnormal/undesirable trait associated with minimal adverse effects.

22,000+ human diseases\*, <1000 with approved treatments. Treatments are not always effective.

Much more work is needed to find effective therapeutics across the space of all diseases

Drug discovery and development takes years and lots of \$\$\$. Involves:

- studying the disease mechanism
- identifying candidate targets for intervention
- developing/testing molecules
- performing in vitro/cell/tissue/animal studies
- human validation



## THE CLINICAL-TRIAL CLIFF

Drug companies are removing more compounds from the pipeline at all levels of testing than ever before.

#### Probability to launch



Nature Reviews Drug Discovery 18, 495-496 (2019)



https://doi.org/10.1038/d41573-019-00074-z



To what extent will Al improve the success of developing new treatments?





A new generation of companies (and researchers) are betting on data and AI











## significant effort is needed to find the right data, make <u>sense</u> of them, and <u>use</u> them for a new purpose

## Data scientists could be more productive



What data scientists spend the most time doing

- Building training sets: 3%
- Cleaning and organizing data: 60%
- Collecting data sets; 19%
- Mining data for patterns: 9%
- Refining algorithms: 4%
- Other: 5%











**data** remain challenging to access and reuse:

- difficult to obtain
- poorly described
- in different formats
- hard to integrate with other data

**AI** have significant limitations:

- built from limited, biased, or un-representational data
- aren't robust to different inputs
- have a hard time predicting out of distribution learning
- may not be able to explain or justify outputs

### Translational Failure

# Human Machine collaboration is crucial to our future work



## **Machines**

# need to be able to discover and reuse data (and arguably any digital resource)



high quality, machine accessible, linked, (meta)data from multiple sources and data types Trustworthy, data-oriented, explainable AI models and predictions Translational Success

## **Research Directions**

The totality of (digitized) biomedical knowledge and analytics to:



**i) answer questions** about what we know and what we don't know (*but should*)



ii) create robust models to predict, explain and justify biomedical phenomena



**iii) tools for human-AI collaboration** to create, maintain, correct, and complete knowledge

**Knowledge Infrastructure** 

← →

## **Explainable Predictions**

FAIR Data & Services

Neurosymbolic AI



Open Access Published: 15 March 2016

#### The FAIR Guiding Principles for scientific data management and stewardship

Mark D. Wilkinson, Michel Dumontier, ... Barend Mons 🗠 🛛 + Show authors

Scientific Data 3, Article number: 160018 (2016) Cite this article

827k Accesses 6519 Citations 2248 Altmetric Metrics

This article is in the 99<sup>th</sup> percentile (ranked 37<sup>th</sup>) of the 317,028 tracked articles of a similar age in all journals and the 95<sup>th</sup> percentile (ranked 1<sup>st</sup>) of the 23 tracked articles of a similar age in *Scientific Data* 

#### Box 2 | The FAIR Guiding Principles

#### To be Findable:

- F1. (meta)data are assigned a globally unique and persistent identifier
- F2. data are described with rich metadata (defined by R1 below)
- F3. metadata clearly and explicitly include the identifier of the data it describes
- F4. (meta)data are registered or indexed in a searchable resource

#### To be Accessible:

- A1. (meta)data are retrievable by their identifier using a standardized communications protocol
- A1.1 the protocol is open, free, and universally implementable
- A1.2 the protocol allows for an authentication and authorization procedure, where necessary
- A2. metadata are accessible, even when the data are no longer available

#### To be Interoperable:

- 11. (meta)data use a formal, accessible, shared, and broadly applicable language for knowledge representation.
- 12. (meta)data use vocabularies that follow FAIR principles
- 13. (meta)data include qualified references to other (meta)data

#### To be Reusable:

- R1. meta(data) are richly described with a plurality of accurate and relevant attributes
- R1.1. (meta)data are released with a clear and accessible data usage license
- R1.2. (meta)data are associated with detailed provenance
- R1.3. (meta)data meet domain-relevant community standards



#### EUROPEAN COMMISSION

Press Release Database

database > Press Release detail

European Commission - Statement

#### G20 Leaders' Communique Hangzhou Summit

Hangzhou, 5 September 2016





#### Annex 4: G7 Expert Group on Open Science



http://www.nature.com/articles/sdata201618

## Making FAIR Data

1. Collect	2. Describe	3. Transform	4. Publish
Data	Standardized Metadata	Standardized Data	Findable Accessible Interoperable Reusable
	use standard metadata format	Use standard data format	Data Repository
	use ontologies + vocabularies	use ontologies + vocabularies	Standardized Metadata
	add provenance, license for data + metadata		Persistent Data Identifier Standardized Data

# Communities are publishing recipes to make FAIR data







## How do we know it's FAIR?

- FAIR Enough is a system to perform automated assessment of the technical quality of the FAIRness implementation.
- Uses a collections of metrics, implemented as web services.
- Fast owing to parallel execution
- Keeps track of past assessments to monitor status
- Offers search and query services
- Anybody can extend via service based framework
- Open source and Docker deployable

	Evaluation score: 15/22
	68.18%
	Log level Success, warnings and failures 👻
🔍 Findable	
9 F1 - Data identifier is persistent	,
https://w3id.org/fair-enough/metrics/tests/f1-data-identifier-persisten URL persistence schemas (purl, doi, w3id, identifiers.org).	t - Version: 0.1.0 - Metric to test if the unique identifier of the data resource is likely to be persistent. We test known
Test result URL: https://w3id.org/fair-enough/metrics/metrics/f1-data-	identifier-persistent#https%3A//doi.org/10.34894/Q80QUE/result-2022-06-29T12:33:59+01:00
FAILURE: [2022-10-24T21:13:22] Could no	t find the data URI in the subject metadata.
S F1 - Resource identifier is persistent	、
https://w3id.org/fair-enough/metrics/tests/f1-data-identifier-persistent         URL persistence schemas (purl, doi, w3id, identifiers.org).         Test result URL: https://w3id.org/fair-enough/metrics/metrics/f1-data-         FAILURE:       [2022-10-24T21:13:22]         Could no         F1 - Resource identifier is persistent	t-Version: 0.1.0-Metric to test if the unique identifier of the data resource is likely to be persistent. We test know identifier-persistent#https%3A//doi.org/10.34894/Q80QUE/result-2022-06-29T12:33:59+01:00 t find the data URI in the subject metadata.

https://fair-enough.semanticscience.org



Data Verse <i>NL</i>			About	User Guide	Support	Sign Up	Log In
DataverseNL (DANS)							
<b>di</b> Metrics	3,796,079 Downloads				2	Contact	Share

#### Welcome to DataverseNL

Store, share and publish research data online. Use the slider below to access the dataverses of the DataverseNL partners.

Please use the DataverseNL demo for demonstration, training and testing purposes.

If you have questions about how to use DataverseNL, please contact your institution directly via one of the email addresses on this page.

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#### LINKED DATA

On the web, open license
 Machine-readable data
 Non-proprietary format
 RDF standards
 Linked RDF
 IS YOUR DATA 5 2 ?

## The Linked Open Data Cloud





https://lod-cloud.net/

Linked Devel Sale Cloud Such Industry



Linked Data for the Life Sciences Bio2RDF is an open source project that uses semantic web technologies to make it easier to reuse biomedical data.

It provides Linked Data and a queryable RDF knowledge graph.





# the Triple as a base unit of knowledge representation



## "diclofenac is a drug"



## formalization

## "diclofenac is a drug"



**RDF N-Triples format (standardized, machine interpretable):** 

<https://bio2rdf.org/drugbank:DB00586> <http://www.w3.org/1999/02/22-rdf-syntax-ns#type>

<a href="https://bio2rdf.org/drugbank\_vocabulary:Drug">https://bio2rdf.org/drugbank\_vocabulary:Drug</a>

## **Biomedical Linked Data**

About: Diclofenac [drugbank:DB00586] Goto Sponge NotDistinct Permalink http(s) identifier An Entity of Type : http://bio2rdf.org/drugbank\_vocabulary:Small-molecule, within Data Space : bio2rdf.org associated with source document(s) Type: Small molecule [drugbank\_vocabulary:Small-molecule] V New Facet based on Instances of this Class Attributes Values Drug [drugbank\_vocabulary:Drug] rdf:type drugbank resource [drugbank\_vocabulary:Resource] Small molecule [drugbank\_vocabulary:Small-molecule] semantically typed Diclofenac [drugbank:DB00586] rdfs:label http://www.drugs.com/cdi/diclofenac-drops.html rdfs:seeAlso http://www.rxlist.com/cgi/generic/diclofen.htm http://www.drugbank.ca/drugs/DB00586 Diclofenac [drugbank:DB00586] sameAs Diclofenac dcterms:title A non-steroidal anti-inflammatory agent (NSAID) with antipyretic and analgesic actions. It is primarily available as the sodium salt. [PubChem] dcterms:description drugbank:DB00586 dcterms:identifier void:inDataset http://bio2rdf.org/kegg\_resource:bio2rdf.dataset.kegg.R3 http://bio2rdf.org/drugbank resource:bio2rdf.dataset.drugbank.R3 has detailed provenance http://bio2rdf.org/pharmgkb\_resource:bio2rdf.dataset.pharmgkb.R3 **Bio2RDF** identifier DB00586 **Bio2RDF** namespace drugbank Bio2RDF uri http://bio2rdf.org/drugbank:DB00586 identifiers.org URI Diclofenac [drugbank:DB00586] x bindingdb [drugb...lary:x-bindingdb] http://bio2rdf.org/bindingdb:13066 x chemspider [drug...ary:x-chemspider] http://bio2rdf.org/chemspider:2925 x pdb [drugbank vocabulary:x-pdb] http://bio2rdf.org/pdb:DIF linked to other resources x pubchemcompound ...-pubchemcompound] http://bio2rdf.org/pubchem.compound:3033 x pubchemsubstance...pubchemsubstance] http://bio2rdf.org/pubchem.substance:46504644 absorption [drugba...ulary:absorption] absorption for drugbank:DB00586 [drugbank\_resource:af3a8b347e732d3c3b48a5428a6160e0] Humans and other mammals [drugbank\_vocabulary:e1e572616d493b2affcc653e19cbcd21] affected organism ...ffected-organism] brand [drugbank vocabulary:brand] [drugbank vocabulary:e78186eb12eeaebda8a530a67513beea] Aclonac [drugbank\_vocabulary:6856a4532f20c29e5c1eac027b253a36] rich descriptions calculated propert...lated-properties] Traditional IUPAC Name: diclofenac from ChemAxon [drugbank\_resource:calculated-properties-DB00586-10] Molecular Weight: 296.149 from ChemAxon [drugbank\_resource:calculated-properties-DB00586-11] Monoisotopic Weight: 295.016684015 from ChemAxon [drugbank\_resource:calculated-properties-DB00586-12] SMILES: OC(=O)CC1=CC=CC=C1NC1=C(CI)C=CC=C1CI from ChemAxon [drugbank\_resource:calculated-properties-DB00586-13] Molecular Formula: C14H11Cl2NO2 from ChemAxon [drugbank\_resource:calculated-properties-DB00586-14] »more»

## Bio2RDF is a (Syntactically) Interoperable Biomedical Knowledge Graph



## **Information Retrieval:** Phenotypes of knock-out mouse models for the targets of a selected drug



#### **Custom Knowledge Portal: EbolaKB**



https://doi.org/10.1093/database/bav049

#### **Exploration**: drug-target-disease networks



#### https://doi.org/10.7717/peerj-cs.106

#### **Reproducible ML**: new uses for existing drugs



#### https://doi.org/10.7717/peerj-cs.281

## Knowledge Collaboratory (for small data)

An *AI-powered* (NLP model or GPT) web user interface to annotate biomedical text (NER, RE), create standard-compliant statements (BioLink model) that can be made publicly available as author-signed nanopublications.

## **Collaboratory.semanticscience.org/annotate**

Clonazepam chemicalEntity is useful alone or petit mal variant DiseaseOrPhenotypicFeature ), al	r as an adjunct in the treatment of the kinetic and myoclonic seizures DiseaseO	Lennox-Gastaut syndrome DiseaseOrPhenotypicFeature .	(
2. Define the statements that represent the assertions made in	n the text, you can add properties to provide mor	e context:	
Subject CLONAZEPAM (PUBCHEM.COMPOUND:2802)	Predicate treats (biolink:treats)	Object lennox gastaut syndrome (MONDO:0016532)	Î
+ Add a property to this statement			

## **BioLink Model**

A data model to structure (qualified) biological associations.



"Bisphenol A results in decreased degradation of ESR1 protein" - A Statement where the effect has a direction (decreased)

```
{
  "id": "e0",
  "category": "biolink:ChemicalAffectsGeneAssociation",
  "subject": "CHEBI:16811" # Bisphenol A,
  "predicate": "biolink:affects",
  "qualified_predicate": "biolink:causes",
  "object": "NCBIGene:2099" # ESR1,
  "object_aspect_qualifier": "degradation",
  "object_direction_qualifier": "decreased"
}
```

https://biolink.github.io/biolink-model/



Technology to publish assertions using RDF

Contains RDF triples to specify the <u>assertion</u>, its <u>provenance</u>, and digital object <u>metadata</u>

Digitally signed by agent

TrustyURI hash to provide globally unique, persistent, immutable, verifiable identifier and payload



#### **Nanopub Monitor**

32 nanopub services running on approximately 10 distinct servers





National Center for Advancing Translational Sciences

## **Biomedical Data Translator**



Log In

## Translator finds associations between drugs, genes, and diseases

Select a question and enter a search term to get started

				J
Examples Choose a different que	stion for more example	es. Run a new search with these terms for the m	ost up-to-date results.	*
	-	Chronic Obstructive Pulmonany Disease	Eblers-Daplos Syndrome	

#### **Translator Workflow**



Select a relationship to explore





**Review and select your favorite results** 

Analyze evidence in the workspace



## Robust, Reproducible, Explainable Predictions

## Neurosymbolic Al

NAI aims to combine symbolic reasoning methods (logic-based reasoning & rules) with sub-symbolic methods (neural networks, deep learning) to create models with high predictive performance and explanability.

Specifically:

- Integrate knowledge from different modalities
- Perform **complex reasoning** (e.g. deduction, induction, synthesis)
- Learn from examples/small data and big data
- Robust to noise and nonsense
- Handle cases out of the learning distribution
- Offer **explanations** (e.g. causal account of the phenomenon) and **justifications** (the evidence that supports the claims)

# Predict new drug applications in a documented and reproducible manner

Mol Syst Biol. 2011; 7: 496. Published online 2011 Jun 7. doi: <u>10.1038/msb.2011.26</u> PMCID: PMC3159979

PREDICT: a method for inferring novel drug indications with application to personalized medicine

Assaf Gottlieb,<sup>1</sup> Gideon Y Stein,<sup>2,3</sup> Eytan Ruppin,<sup>1,2</sup> and Roded Sharan<sup>a,1</sup>

AUC 0.90 across all therapeutic indications

Scripts not available. Feature tables available. Not reproducible!

Towards FAIR protocols and workflows: the OpenPREDICT use case

Remzi Celebi<sup>1,\*</sup>, Joao Rebelo Moreira<sup>2,\*</sup>, Ahmed A. Hassan<sup>3</sup>, Sandeep Ayyar<sup>4</sup>, Lars Ridder<sup>5</sup>, Tobias Kuhn<sup>2</sup> and Michel Dumontier<sup>1</sup>

#### **Result: ROCAUC 0.83**



Celebi R, Rebelo Moreira J, Hassan AA, Ayyar S, Ridder L, Kuhn T, Dumontier M. 2020. Towards FAIR protocols and workflows: the OpenPREDICT use case. PeerJ Computer Science 6:e281 <u>https://doi.org/10.7717/peerj-cs.281</u>

## **Explainable Al**

- XAI methods such as SHAP provide information about feature importance for the model and in individual predictions
- When applied to OpenPredict, it's too complicated understand the contributions of derived features
- However, it is clearer when using a single feature predictor

$$\operatorname{Score}(d_r, d_i) = \max_{d_r', d_i' \neq d_r, d_i} \sqrt{S(d_r, d_r') \times S(d_i, d_i')}$$
(2)



Fig. 7: Global explanations of OpenPREDICT model as mean absolute of SHAP value.



**Fig. 9**: Global explanations of XPREDICT Single model as mean absolute of SHAP values.

## **Graph Representation Learning**

We want to automatically discover effective representations needed for classification from data.

In graph representation learning, we encode the topology, node attributes, and edge information into low-dimensional vectors (or embeddings).

These vector can then be used as features to train classifiers for link prediction, node classification, graph classification, etc



## **Graph Neural Networks**

Graph Neural Networks (GNNs) iteratively update node representations by aggregating features from neighbouring nodes and possibly edges.

Several methods (e.g. Saliency Maps) exist to extract a model-wise explanation for link prediction, node/graph classification.



Fig. 2: Interconnections among entities in DRKG [19].

Fig. 3: Explanatory subgraph consisting of only drugs and diseases for (Memantine, treats, Alzheimer) using Graph Attention Network and Saliency Maps.

## But I don't find these explanations salient at all.

They lack the sophistication of a reasoned explanation for the predicted phenomenon

# Building better explanatory subgraphs by combining GNNs + XAI + KGs

Use Graph Neural Networks to capture semantics, graph structure and relationships between nodes

Apply **Saliency Maps** on predictions made by GNNs to **identify relevant nodes** for a specific prediction; this provides valuable insights into the graph's topology and highlights the most important components

Saliency Maps assign a score to each node in the network, which can be used to **rank paths** involving genes, pathways, diseases, and compounds



Algorithm 1 Algorithm used to generate explanations.

- 1: **function** GENERATEEXPLANATORYSUBGRAPH(*SM\_scores, k*) ▷ where *SM\_scores* scores derived from Saliency Maps, *k* number of triples included in the explanation
  - Let  $g_1, g_2, ..., g_n$  be ranked gene entities based on  $SM\_scores$
- RankedTriples = []
- 4: **for**  $g_i = 1$  to n **do**
- 5: PathwayRel = ExtractRelations(g<sub>i</sub>, "ParticipatesIn", "Pathway")
- 6: DiseaseRel = ExtractRelations("Disease", "Associates", g<sub>i</sub>)
- 7: CompoundRel = ExtractRelations("Compound", "BindsTo",  $g_i$ )
- 8: RankedPathwayRel = RankRelations(PathwayRel)
- 9: RankedDiseaseRel = RankRelations(DiseaseRel)
- 10: RankedCompoundRel = RankRelations(CompoundRel)
- RankedTriples.append(RankedPathwayRel[:k], RankedDiseaseRel[:k], RankedCompoundRel[:k])

#### 12: end for

- 13: ExplanatorySubgraph = BuildExplanatorySubgraph(RankedTriples)
  - return ExplanatorySubgraph

#### 14: end function

## **Explanations for Alzheimer's Disease Treatments**

By blocking the NMDA receptor, Memantine protects neurons from excitotoxicity caused by glutamate overstimulation, explaining how it reduces cognitive decline and improves overall function in Alzheimer's patients.



The primary goal of Alzheimer's drugs, including donepezil, is to maintain elevated acetylcholine (ACh) levels, thereby compensating for the loss of functioning cholinergic brain cells. Donepezil binds to acetylcholinesterase (AChE) and butyryl-

cholinesterase (BChE), which are involved in ACh metabolism and thus are important for the cholinergic function in the brain



Figure 2: Explanatory subgraph for (Donepezil, treats, Alzheimer) including relationships from the original KG

### **Compelling scientific justifications for ML model predictions**

The goal is to provide *explanations* for predictions based on the scientific literature to complement model explanations.

Compelling justifications are a set of assertions derived from primary sources which provide evidence, both for and against, the stated assertion, and that reflects on the likelihood of any of those statements to be true and well supported.

We explore the feasibility of using RAG to create these compelling justifications from scientific text and structured knowledge graphs.





Stated fact = "Insulin human DOES NOT HELP to control hyperglycemia in diabetes mellitus." #13

**Mechanisms of action:** Insulin is a hormone that regulates blood sugar levels by allowing cells to take up glucose from the bloodstream and use it for energy or storage. In people with diabetes, either the body does not produce enough insulin (type 1 diabetes) or the body's cells become resistant to its effects (type 2 diabetes), resulting in elevated blood sugar levels. Insulin delivery modalities, such as continuous subcutaneous insulin injection (CSII) and multiple daily injections (MDI), aim to replace or supplement the insulin that the body is not producing or using effectively.

**Evidence-based medicine:** The AHRQ systematic review of randomized clinical trials found that both CSII and MDI demonstrated similar effectiveness on glycemic control and severe hypoglycemia in children and adolescents with T1DM and in adults with T2DM, regardless of insulin delivery modality. In adults with T1DM, the review revealed a stronger reduction in hemoglobin A1c with CSII compared to MDI with low strength of evidence. However, one study heavily influenced these results. The review also highlights advances in insulin delivery and glucose-monitoring systems, practical methods to achieve tight glycemic control and strategies to minimize associated risks, as well as gaps in research and areas that need to be addressed in the future.

**Comparisons with other treatments:** In comparison to other treatments for diabetes, such as oral medications or bariatric surgery, insulin therapy has been shown to be effective in controlling blood sugar levels and reducing complications associated with high blood sugar, such as kidney damage, nerve damage, and blindness. However, insulin therapy can have side effects, such as hypoglycemia (low blood sugar), weight gain, and injection site reactions, which need to be carefully managed by healthcare providers.

Fact: Insulin human DOES help to control hyperglycemia in diabetes mellitus in adults and children with type 1 or type 2 diabetes when administered correctly using appropriate insulin delivery modalities.

**Expert Evaluation:** These selected justifications were then compiled into a survey, and subsequently sent to a board-certified internal medicine physician and cardiac critical care specialist. The physician evaluated each justification on a 5-point Likert scale ranging from excellent to poor for the following metrics:

- **Factuality:** The degree to which the generated justification aligns with established medical knowledge.
- **Completeness:** The extent to which the generated text provides a comprehensive and accurate representation of the question posed, including the inclusion of contraindications as necessary.
- **Relevance:** The degree to which the generated justification directly addresses the specific query or clinical context, avoiding unnecessary information.
- **Consistency:** Ensuring that the generated justification is internally consistent and doesn't contradict itself or established medical knowledge. Accompanying these scores the physician also provided a brief description of the rationale behind their scores for each metric.

Lack o	explicit citation
Plausib	e sounding hallucinations or inconsistencies
Failure	to understand the prompt
Influen	ed generation due to retrieved context
Irreleva	nt retrieved context
Missing	evidence
Missing	minor details



#### 

#### Introduction

Alzheimer's disease is a progressive neurodegenerative disorder characterized by memory loss, cognitive decline, and behavioral changes. One of the pathological features of Alzheimer's is the overactivation of glutamate neurotransmission, leading to neuronal damage through excitotoxicity. Memantine is a medication used to manage moderate to severe Alzheimer's disease by targeting this glutamatergic system.

#### Mechanism of Action

- 1. NMDA Receptor Antagonism: Memantine is an uncompetitive antagonist of the N-methyl-Daspartate (NMDA) receptor, a subtype of glutamate receptor in the brain. Under normal conditions, glutamate binds to NMDA receptors to facilitate learning and memory. However, excessive glutamate release can lead to overactivation of NMDA receptors, causing increased calcium influx and neuronal damage.
- 2. **Regulation of Glutamate Activity**: Memantine selectively blocks NMDA receptors only during excessive stimulation. It attaches to the receptor's ion channel, preventing prolonged calcium influx without disrupting normal synaptic activity. This helps protect neurons from excitotoxicity while preserving essential neurotransmission.

How should the quality of explanations for predictions be properly evaluated?

Trust and Accountability in Knowledge Graph-Based Al for Self Determination Dagstuhl Seminar 25051

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A.

## Schloss Dagstuhl Where Computer Scientists Meet

## Summary

The FAIR principles offer a high level set of requirements to increase productivity datarelated tasks. *It is focused on making data available for software/machine agents.* 

AI depends on ample amounts of high quality data – FAIR data – to train AI models. But *getting the right answer isn't enough* – we need (domain-based) explanations and compelling justifications to judiciously utilise this information.

**Neurosymbolic AI** combines the unreasonable effectiveness of machine learning predictions with the justificatory power of logic-based reasoning.

**LLMs** are rapidly evolving in their natural language understanding and human-like natural language generation – when combined with external knowledge sources (like KGs and NAI), hybrid systems show advanced reasoning capabilities.

Towards **Biomedical Neurosymbolic AI: From Semantic** Knowledge Infrastructure to Explainable **Predictions** 

Knowledge Infrastructure FAIR data & services Neurosymbolic AI

**Trustworthy Al** 

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