

# Detecting Communities among COVID-19 Patients with a Quantum-Ready Method

Michael Liebman, IPQ Analytics

Stefania Pieroni, Istituto di Fisiologia Clinica, (CNR- Pisa)

Mark Wainger, Steve Reinhardt, Quantum Computing Inc.

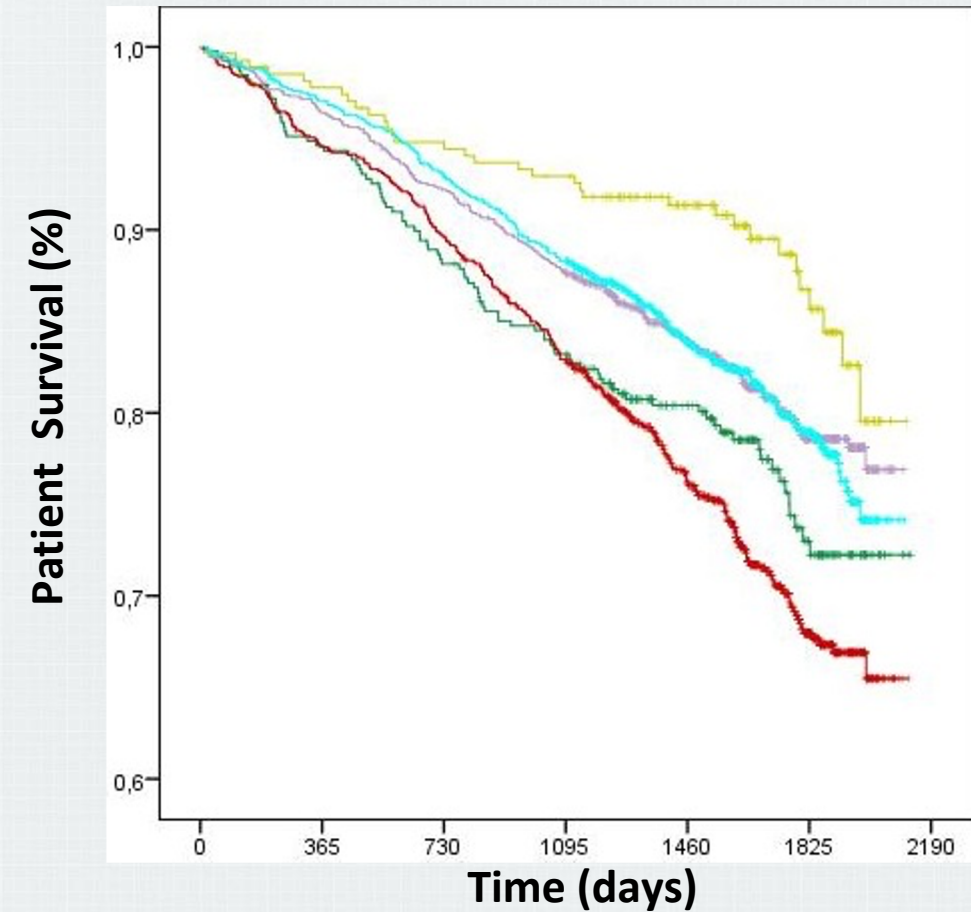
SReinhardt

at [QuantumComputingInc.com](https://www.QuantumComputingInc.com)

We are quickly getting strong results from community detection for COVID-relevant use cases and will shortly add quantum execution.

# Motivation: Unsuccessful Trial of Heart-failure Drug

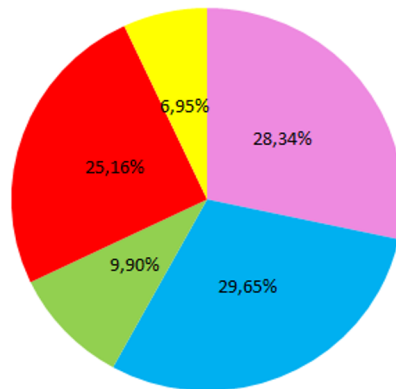
- Trial with 4,000 patients over 6 years
- Total development+trial cost close to \$1B
- No benefit found so drug not approved
- Community Detection identified sub-groups of patients that benefitted, where statistical clustering failed



Liver and kidney community distribution

**Yellow Community characteristics**  
 KIDFUN-NOR  
 CREAT-L  
 <60  
 BUN-L  
 #patients = 272

**Red Community characteristics**  
 ALT-N  
 BUN-H  
 KIDFUN-MOD  
 CREAT-H  
 >=80  
 BILI-H  
 K-H  
 KIDFUN-SEV  
 BMI-L  
 # = 990



**Green Community characteristics**  
 AST-N  
 BMI-N  
 SOD-L  
 # = 390

**Pink Community characteristics**  
 K-N  
 BILI-N  
 FEMALE  
 60-69  
 BMI-H-OB  
 BMI-H-OB\*  
 ALT-H  
 AST-H  
 SOD-H  
 # = 1115

**Cyan Community characteristics**  
 SOD-N  
 CREAT-N  
 BUN-N  
 KIDFUN-MIL  
 70-79  
 BMI-H-OV  
 MALE  
 BILI-L  
 K-L  
 # = 1168



# Implementation/Use of Community Detection

- Need good community assignments quickly for problems with many more dimensions
- Implemented Girvan-Newman modularity-maximizing algorithm, in quantum-ready form due to Negre et al.\*, in QCI NetworkX
- Solves via classical sampler (for now)
- Computation grows as  $f(\text{\#medical variables})$ , not  $f(\text{\#patients})$
- Validate results with earlier heart-failure analysis
- Tweak modularity calculation to reflect bipartite graph representation
- Tweak algorithm to support medical variables not in a community



# Results

## Heart-failure data

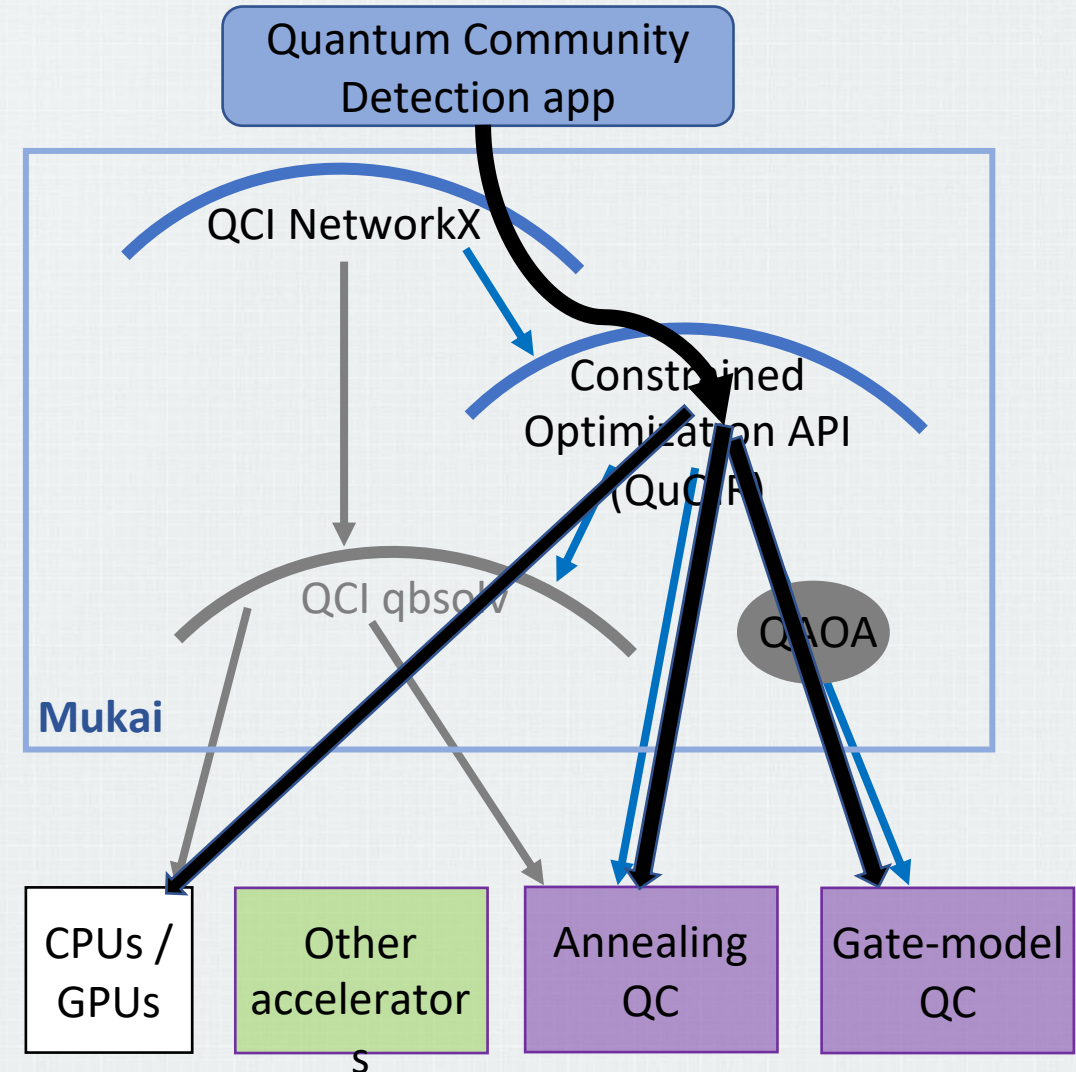
- Comparing with 2015 Gephi-generated results
- Two measures
  - Bipartite modularity: Gephi 0.086, QCI NetworkX 0.141
  - Percent of patients properly assigned, given medical variables: Gephi 51.6%, QCI NetworkX 98.2%
- QNX chose 3 communities
- Runtime: <10 minutes
- Potential impact: improve patient management, enhance drug development, and improve clinical trial success and efficiency

## VHA COVID data

- Data for 118K patients; diagnoses, treatments, medications, expenses, and outcomes (e.g., ventilator- and ICU-days)
- So far, ~40 of 300 medications are relevant to COVID and their effects need to be modeled
- Work in progress

# Implications

- Community detection (CD) can work in an unsupervised way to select the number of communities and which dimensions of data are most useful
- Starting from a knowledge graph, CD can help identify missing but valuable dimensions of data from the top down
- Want to use on bigger graphs; the computational cost of CD grows exponentially / NP-hard
- Hybrid quantum/classical execution coming soon. Quantum acceleration when? Mukai enables simple comparison of QPUs for high-level task.
- Other graph kernels: partitioning, clique cover, maximum independent set, ...



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