

# The Impact of Hallucinations in Synthetic Health Data on Prognostic Machine Learning Models

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# Agenda

## Hallucinations in Generative Modeling

1

What are generative models and hallucinations?

## Methodology

2

How to generate synthetic health data and measure hallucinations?

## Results

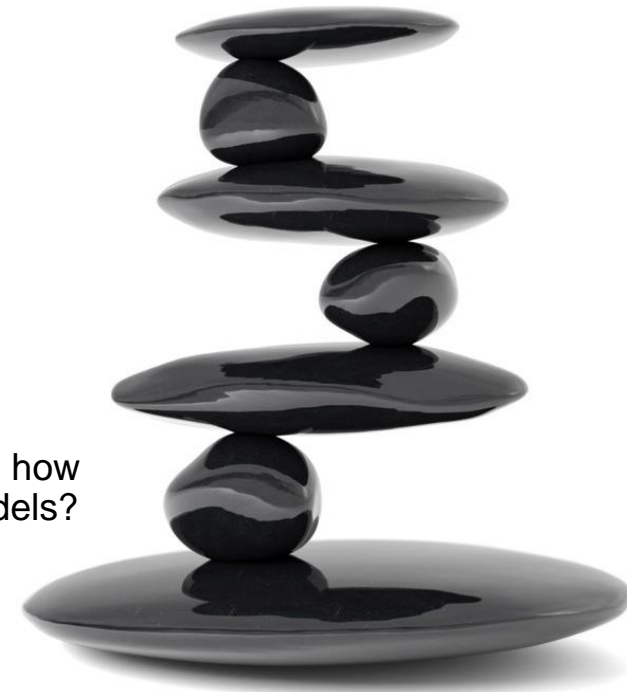
3

When do hallucinations occur and how do they impact prognostic ML models?

## Conclusions

4

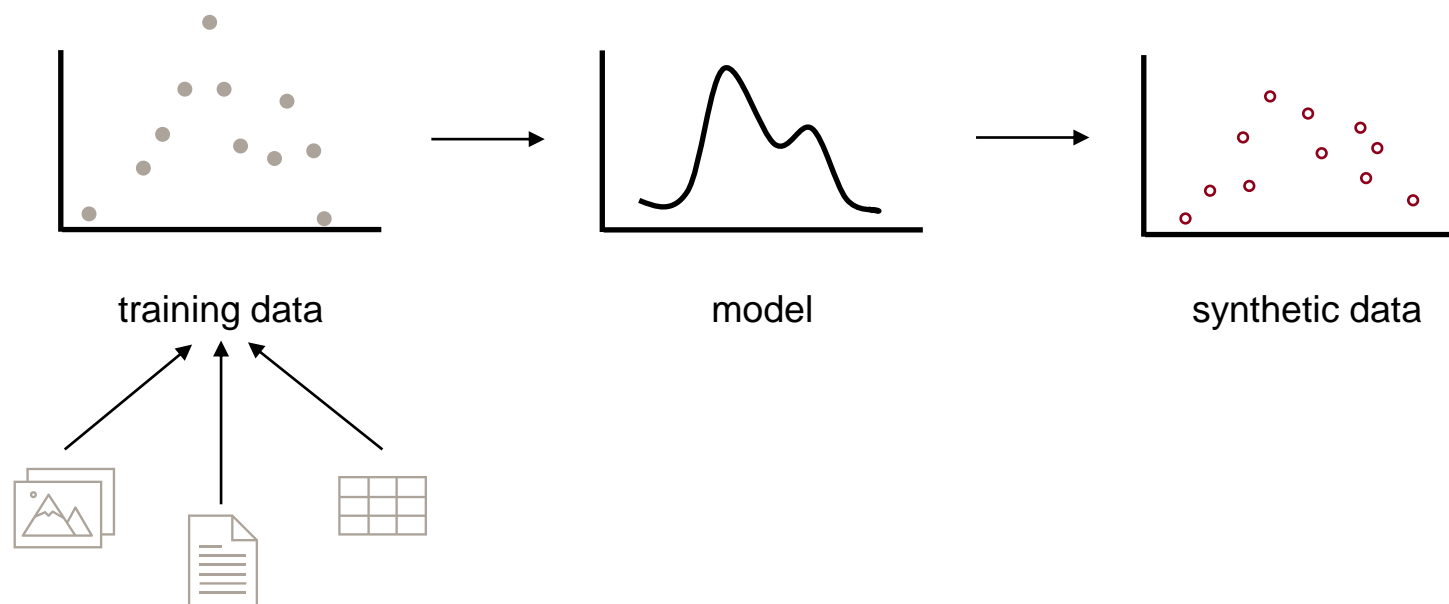
Understanding the implications and limitations of our results



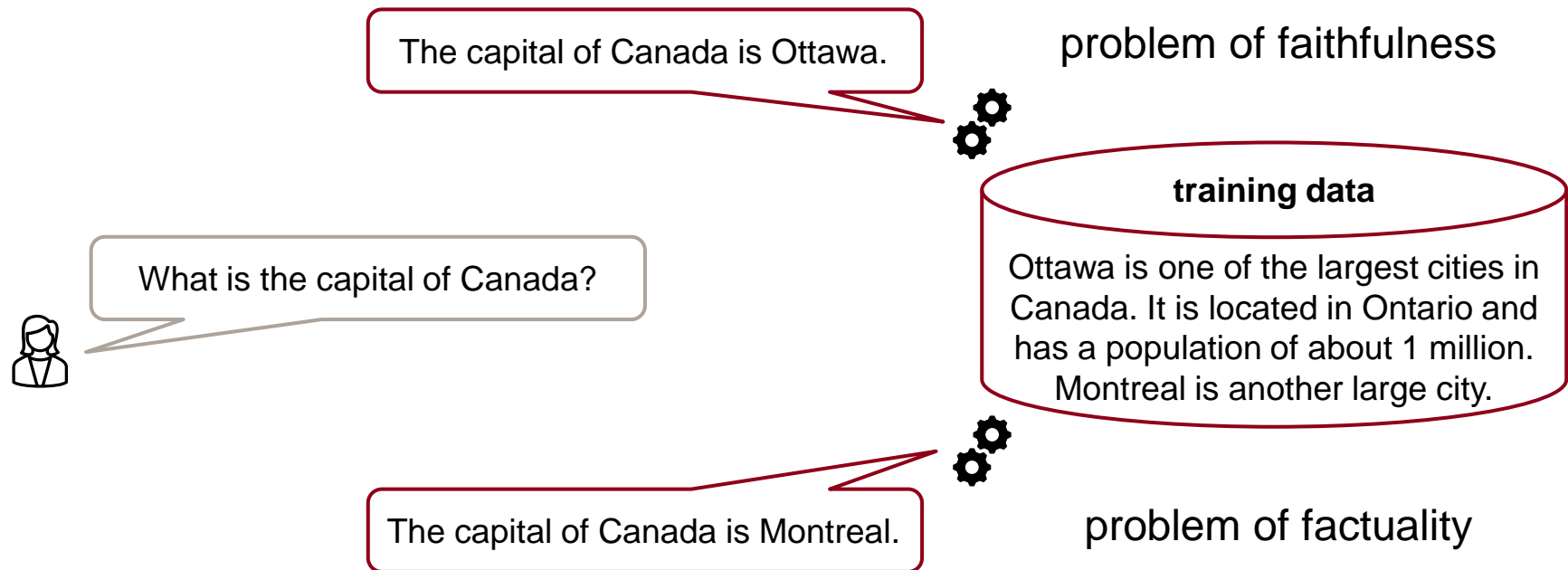
# HALLUCINATIONS IN GENERATIVE MODELING



# Generative Modeling

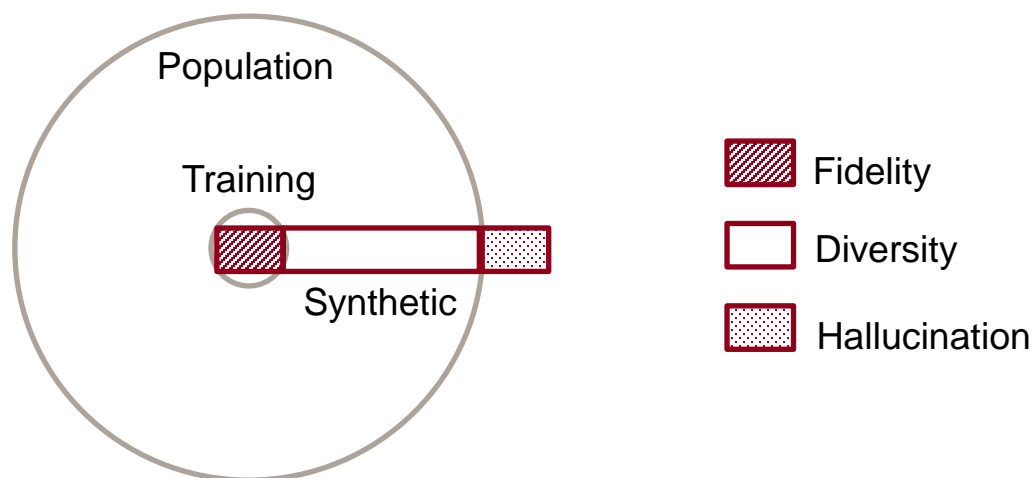


# Hallucinations in Text Generation



# Hallucinations in Tabular Synthetic Health Data

- Problem of factuality: Hallucinated patients are synthetic patients that are non-existent (or implausible) in the reference population.



# The Impact of Hallucinations in Synthetic Health Data on Prognostic ML Models

1

What is the hallucination rate (HR) during tabular synthetic health data generation (SDG)?

2

Does the magnitude of the HR in synthetic health data affect the performance of downstream prognostic ML models?

# METHODOLOGY





# Identification of Hallucinated Patients

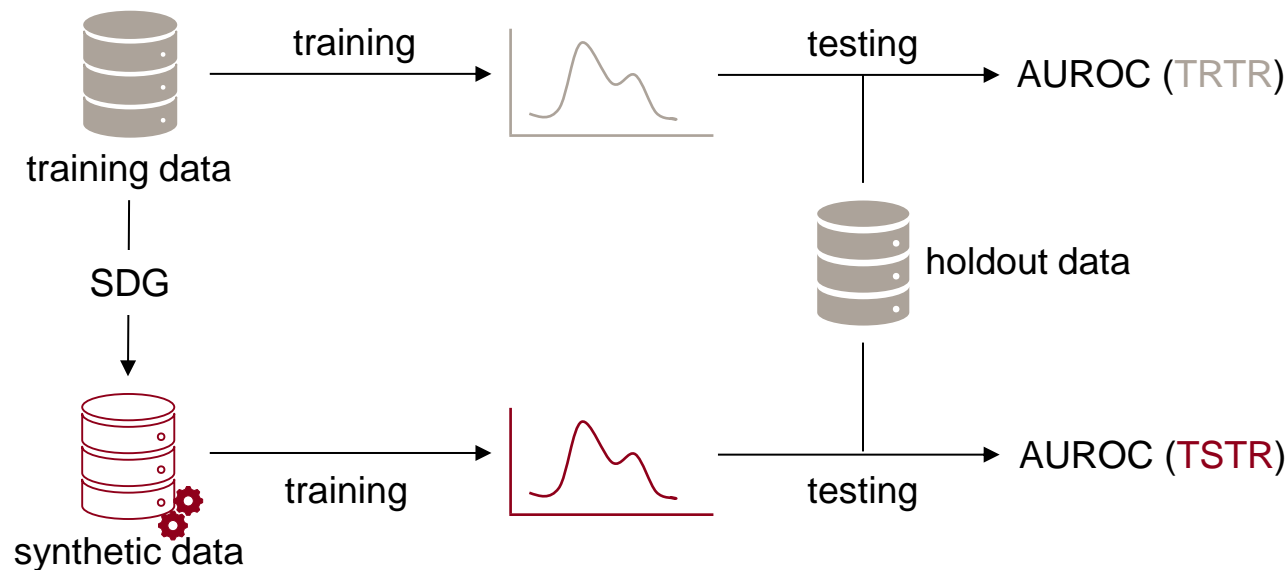
- Hallucinations are synthetic patients (i.e.,  $x_s$ ) that are non-existent in the population, meaning that they have a non-zero (i.e.,  $\tau = 0$ ) distance from all population records (i.e.,  $x_r$ ).

$$\min d(x_s, x_r) > \tau$$

- The hallucination rate (HR) is the proportion of hallucinated patients among all synthetic patients.

# Downstream Utility: Prognostic AI/ML Modeling

- Train-synthetic-test-real (TSTR) is when a prognostic AI/ML model is trained on the synthetic data and then tested on unseen real records.
- Train-real-test-real (TRTR) is when a prognostic AI/ML model is trained on the (real) training data and then tested on unseen real records.



# Study Set Up

- 12 real world health datasets
  - 6,354 population variants with varying complexity by changing the number and type of variables included
- 1 SDG model (“generator”): Sequential Trees (ST)
  - 1 trained SDG model per population variant
  - 10 synthetic health datasets per trained SDG model
- 1 prognostic AI/ML model: light gradient boosting machine
  - AUROC (TRTR)
  - $\text{AUROC}_{\text{avg}}(\text{TSTR})$
- Mixed-effect models were used to estimate the fixed effect of HR on AI/ML model performance with the specific health dataset as random effect.

# RESULTS



1

# The Hallucination Rate in Synthetic Health Data

- Mean HR was 88.5% (SD 20.7%) in SDG via ST.
- Odds for hallucinations were higher with increasing complexity in SDG via ST. The large majority of health datasets (90.1%) were highly complex.

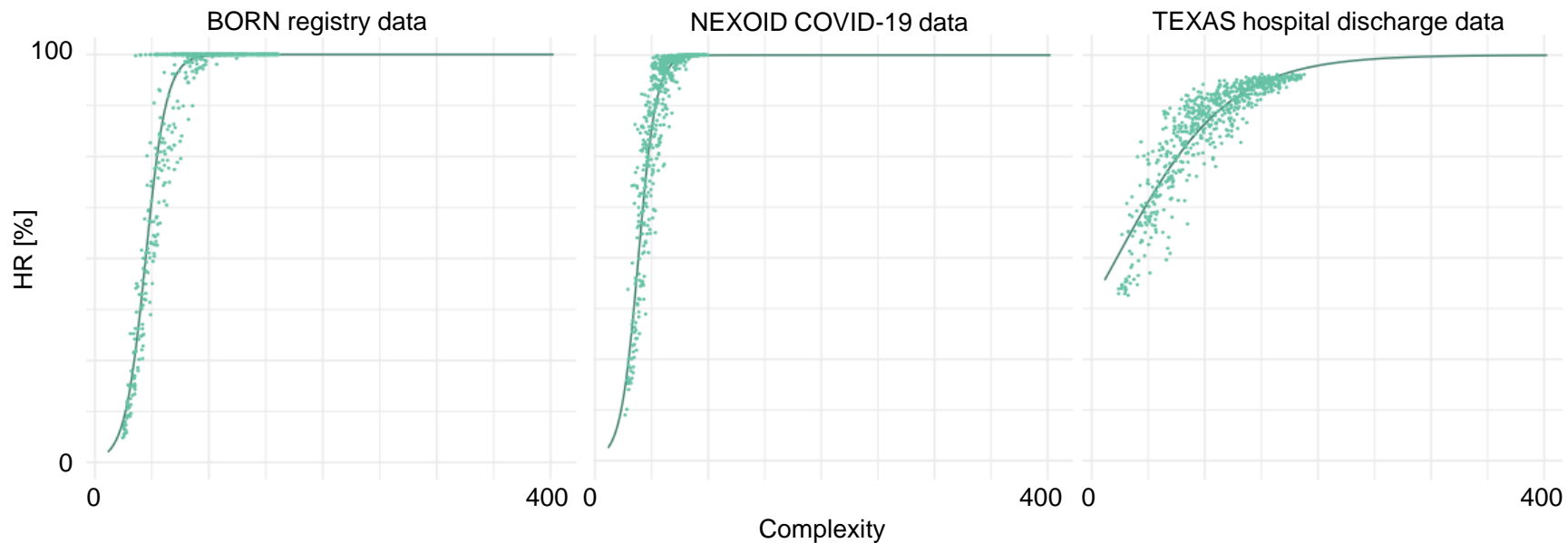


Figure 1. Exemplar mixed-effect model with the health dataset as random effect and complexity as fixed effect and HR as outcome for the ST SDG model. 3 out of 12 health datasets are shown as examples.

2

## The Impact of Hallucinations on Prognostic ML Models

- AUROC (TRTR) – AUROC (TSTR) was 0.05 on average in SDG via ST.
- AUROC (TSTR) did not change with increasing HR in SDG via ST.

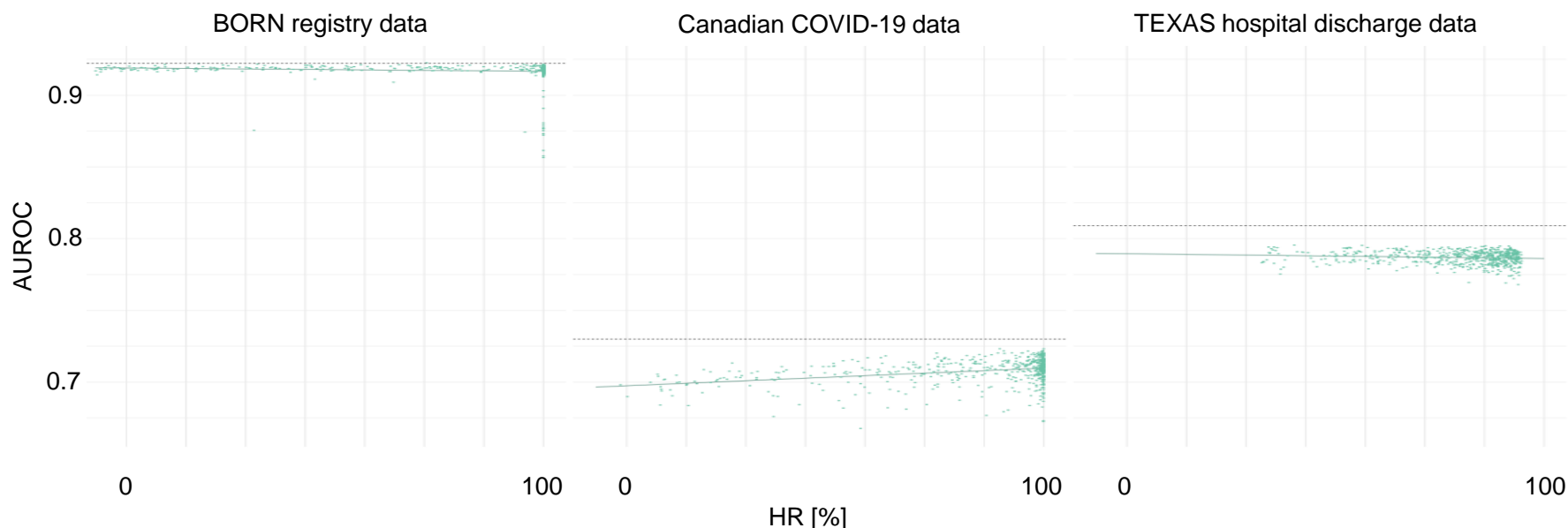


Figure 2. Exemplar mixed-effect model with the health dataset as random effect and HR as fixed effect and TSTR as outcome for the ST SDG model. 3 out of 12 health datasets are shown as examples. TRTR is indicated as dashed line.

# CONCLUSIONS



# The Impact of Hallucinations in Synthetic Health Data on Prognostic ML Models

1

What is the hallucination rate (HR) during tabular synthetic health data generation (SDG)?

Hallucinated patients can make up 100% of the synthetic dataset if the health dataset is highly complex.

2

Does the magnitude of the HR in synthetic health data affect the performance of downstream prognostic ML models?

Hallucinated patients do not necessarily impact prognostic ML model performance.

Does **1** or **2** vary across different SDG or prognostic ML models?



# Limitations

- The results were from one SDG model, other SDG models may present with different HR and different impact on prognostic ML modeling.
- Most health care datasets were highly complex. Different complexity and correlational structures are very likely to impact the HR.
- Definition of hallucinated patients that are based on distribution shifts or correlational structures can produce very different results.
- The HR did not impact prognostic ML models but can still erode trust and may be a challenge for other downstream task (e.g. inference, propensity-score matching)



# Thank you for listening !

And special thanks to ...

- ... Samer El Kababji
- ... Dan Liu
- ... Khaled El Emam

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