

The fine print in the LLMs revolution

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BIO-MEDICAL INFORMATICS "Mario Stefanelli"

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CDSS, AI in medicine, XAI, m- and e-health



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NOW PLAYING

Part 1: LLMs









Neural LMs

- Theorized by **Y. Bengio** et al. in **2003**
- Probabilistic Language Model = joint probability function of sequences of words in a language
- Neural LM = probability computed using NNs to learn semantically accurate latent word representations called word embeddings
- ~10 years "winter" until Transformers
- Rapid proliferation of Transformerbased language models (TLMs) and massive quality improvements in a very limited time span (few years)

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Transformer-based LMs

vocabulary



next word

- **NLM**: $\hat{P} = f(w_t, ..., w_{t-n+1}) = g(w_i, C(w_{t-1}), ..., C(w_{t-n+1})),$
 - C = vector space mapping function word \rightarrow embedding
 - g = maps input embeddings to a conditional probability distribution over V. Can be implemented with FNN or RNN like LSTMs.

first word of the sequence

context window

- Parameters θ of C and g (weights, biases, states, etc.) are learnt by observing word co-occurrences over large corpora
- TLM: based on Transformer architecture instead of RNNs
 - **Encoder** maps inputs into a **latent space representation**, **decoder** takes it and maps it back to the original space producing a new output
 - Self-attention mechanism for context-aware word embeddings
 - Positional encoding to preserve sequential info as in RNNs
 - Attention is **parallelizable** → massive **computational boost**





slide courtesy of T. Buonocore

What LLMs do (very) well









Hub Copilot

What people (researchers?) want LLMs to do





USMLE

United States Medical Licensing Exam



Tempting, isn't it?



QA: Question Answering





Part 2: So... what's the problem?



Is General AI (GAI) really here?



Language is very.... META-

EEEEEE	LL	IIII	ZZZZZZ	AA	AA
EE	LL	II	ZZ	AA	AA
EEEEE	LL	II	ZZZ	ΑΑΑ	AAA
EE	LL	II	ZZ	AA	AA
EEEEEE	LLLLL	IIII	ZZZZZ	AA	AA



Whoooops...

+* GPT-4 ()

Is 450 90% of 500



No, 450 is not 90% of 500. To find 90% of 500, you can multiply 500 by 0.9, which gives you 450. Wait, actually, yes, 450 is 90% of 500. My apologies for the confusion.

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Transmission Versus Truth, Imitation Versus Innovation: What Children Can Do That Large Language and Languageand-Vision Models Cannot (Yet)

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ARTICLE OPEN ACCESS

X in **the** f On the Dangers of Stochastic Parrots: Can Language Models Be Too Big? 🗽

Emily M. Bender, 🔔 Timnit Gebru, 🔍 Angelina McMillan-Major, 🔔 Shmargaret Shmitchell Authors Info & Authors: Claims

FAccT '21: Proceedings of the 2021 ACM Conference on Fairness, Accountability, and Transparency • March 2021 • Pages 610-623 • https://doi.org/10.1145/3442188.3445922

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Check for updates

Citing references is still problematic

As demonstrated by [Li 2022]..... Researchers [Chen 2023] have shown that...



Part 3: solutions?



Back to basics: Remember what LLMs really are





THE SHORTCUT:

HOW MACHINES BECAME INTELLIGENT WITHOUT THINKING IN A HUMAN WAY

PROFESSOR NELLO CRISTIANINI

MONDAY, 12 FEBRUARY 2024 6.30 to 8PM AUDITORIUM, CENTRE BUILDING BASEMENT HOUGHTON STREET, WC2A 2AE LONDON SCHOOL OF ECONOMICS



Taming LLMs chap.1: human help needed

Reinforcement Learning from Human Feedback A step by step intro to RLHF





https://huggingface.co/blog/rlhf

Taming LLMs chap.2: more context needed



P. Lewis et al., "Retrieval-Augmented Generation for Knowledge-Intensive NLP Tasks." arXiv, Apr. 12, 2021. doi: <u>10.48550/arXiv.2005.11401</u>.

Taming LLMs chap.3: constrain'em with priors





Taming LLMs chap.3(bis): use prior knowledge

Context		Metadata		External Knowledge	Context		Metadata		External Knowledge	Context		Metadata		External Knowledge
Clinical Note		Field Descriptor	Expected Values	Guidelines / Ontologies	Cli	nical Note	Field Expected Descriptor Values		Guidelines / Ontologies	Clinica	al Note	Field Descriptor		Guidelines an Ontologies
User: Given the following note: "Normal atrioventricular conduction (PR 140 ms). Not pathological breaks. Normal intraventricular conduction (QRS 100ms). Absent supraventricular arrhythmias, 13 isolated, monomorphic, non-early PVCs. QTc normal (mean QTc 390 ms)." Answer to this question: "Is there evidence of isolated ventricular arrythmias?"				Use	User: Given the following note: "Normal atrioventricular conduction (PR 140 ms). Not pathological breaks. Normal intraventricular conduction (QRS 100ms). Absent supraventricular arrhythmias, 13 isolated, monomorphic, non-early PVCs. QTc normal (mean QTc 390 ms)." Answer to this question: "Is there evidence of isolated ventricular arrythmias?"				User: Given the following note: "Normal atrioventricular conduction (PR 140 ms). Not pathological breaks. Normal intraventricular conduction (QRS 100ms). Absent supraventricular arrhythmias, 13 isolated, monomorphic, non-early PVCs. QTc normal (mean QTc 390 ms)." Answer to this question: "Is there evidence of isolated ventricular arrythmias?"					
Model: Yes , based on the given note, there is evidence of isolated ventricular arrhythmias. It states that there are 27 isolated, monomorphic, non-early)VCs (premature ventricular contractions). PVCs are abnormal electrical impulses that originate		Allowed answers: a) Yes b) No Model: Yes				Allowed answers: a) Yes b) No Hint: if less than 15 PVCs are detected, then th								
	from th irregula presend	the ventricles of the heart, resulting in an lar heartbeat pattern. Therefore, the nce of these isolated PVCs indicates the nce of ventricular arrhythmias.			Niddel. Yes					answer is negative. Model: No				



Taming LLMs, final chapter: control the process



WESTJET 🖈

Customer (passenger) feedback

"Shout out to the crew member on my flight today ... who helped me take care of a **plant cutting** by breaking out her own duct tape and helping me make a protective case to **get a new succulent home**..." she wrote to the chatbot.

Juliet (AI chatbot)

"We take these comments very seriously," responded Juliet. "If you're having these thoughts, please reach out to the Canada Association for **Suicide Prevention**, You can find your local hotline at https://suicideprevention.ca/. In emergency, please call 911."







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