

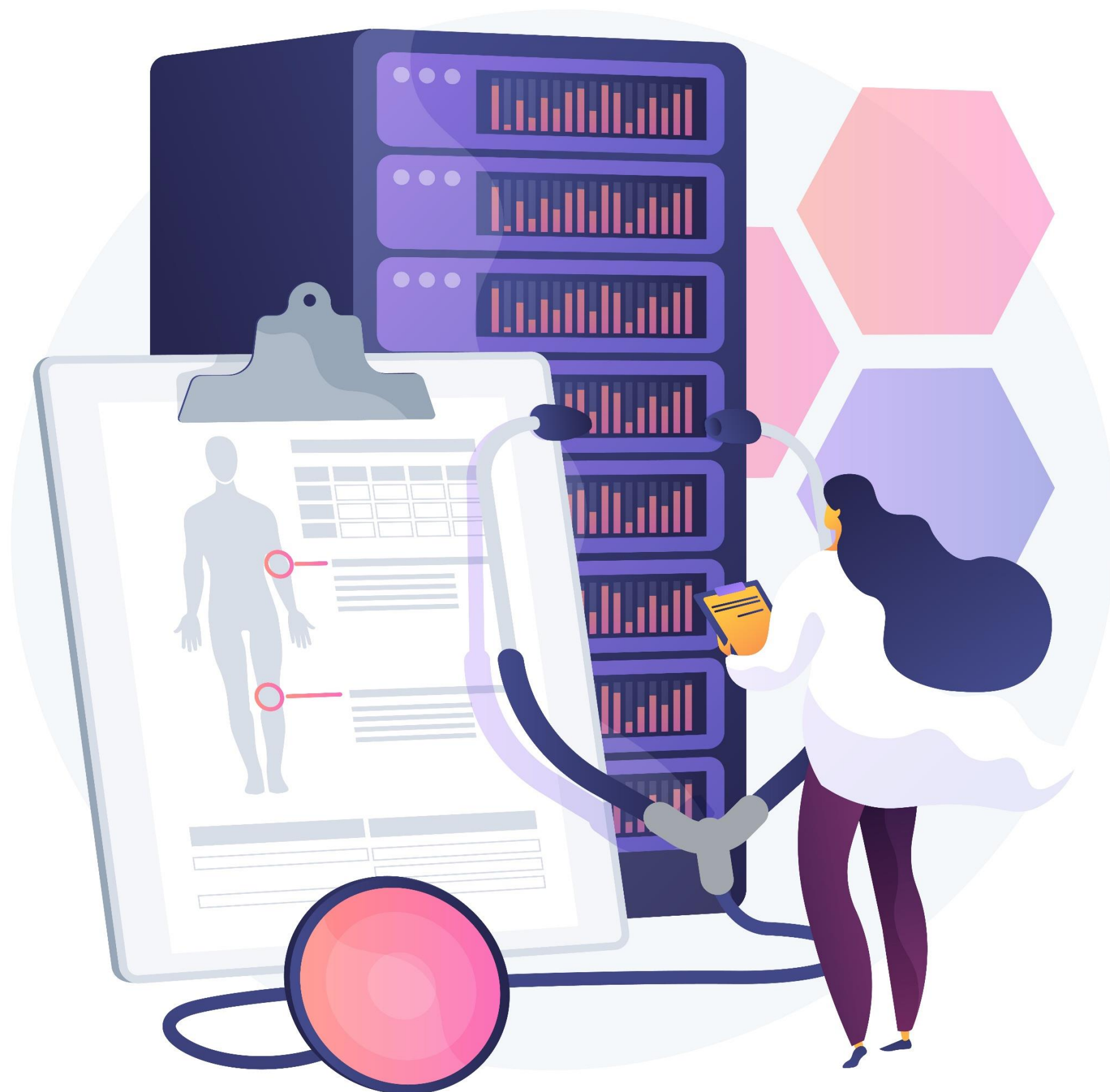
Utilisations de l'intelligence artificielle dans la recherche clinique en oncologie

Ateliers Recherche Clinique DSRC OncoPaca-Corse - 9 Avril 2026

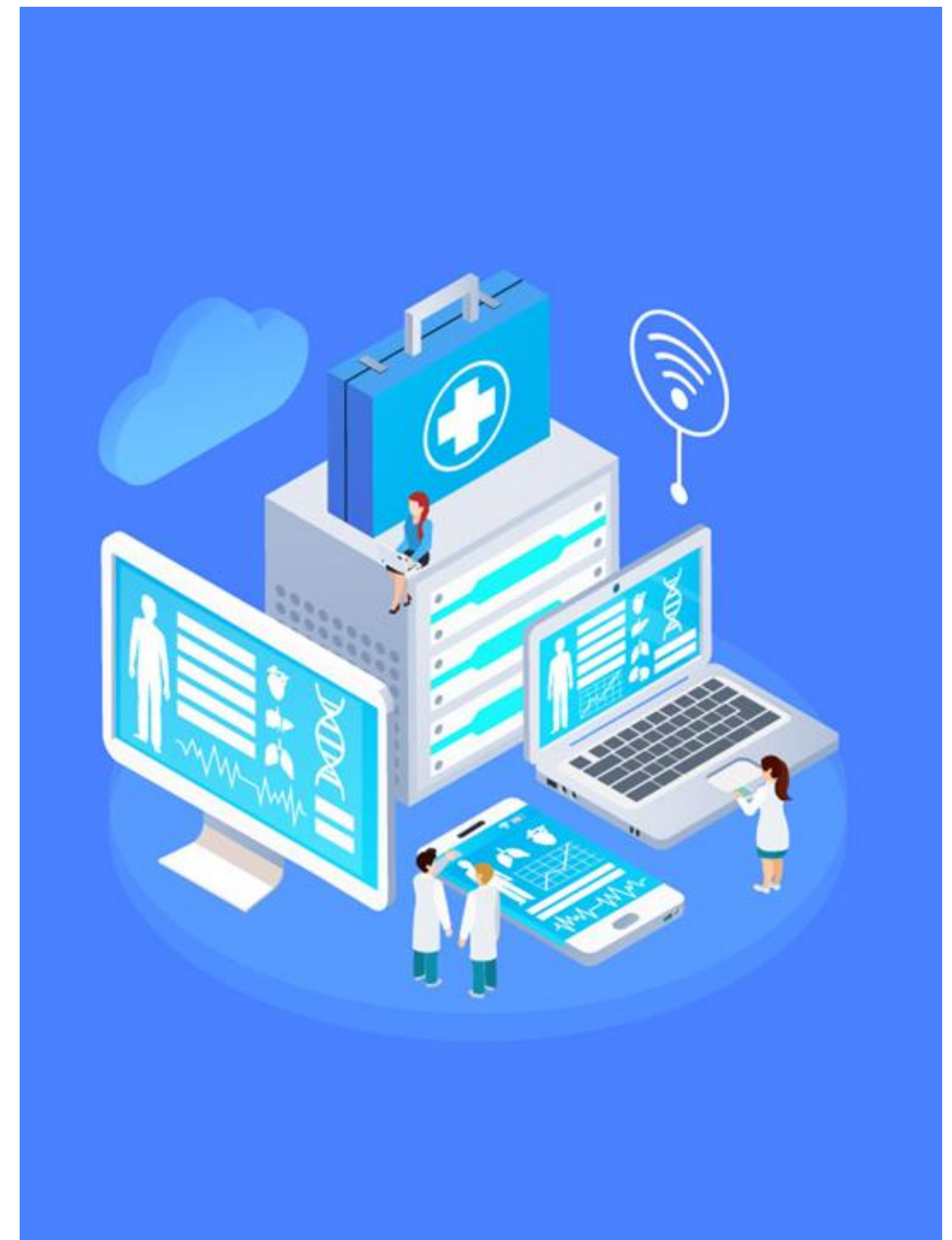
Renaud Schiappa – Responsable Adjoint

Département d'Epidémiologie, Biostatistique et Données de Santé – Pr Chamorey

Comment sélectionner les patients ?



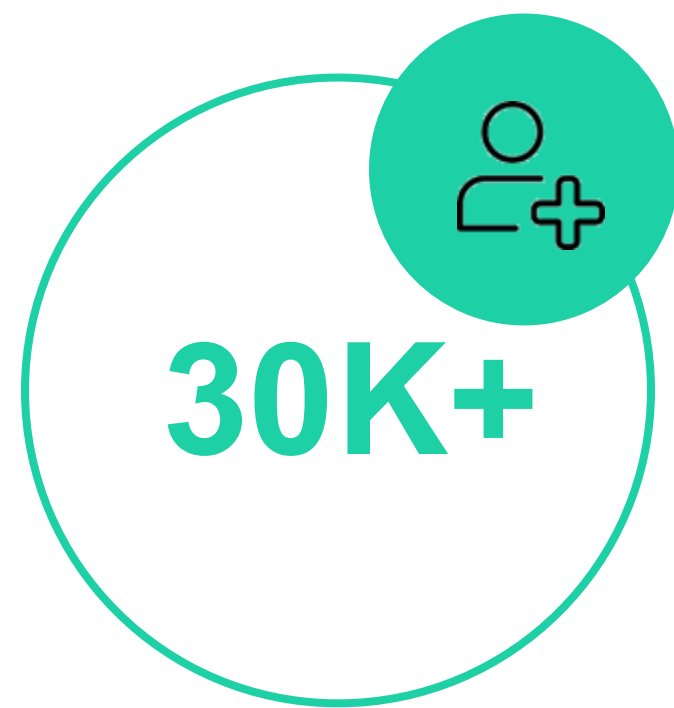
Applications pour la recherche clinique



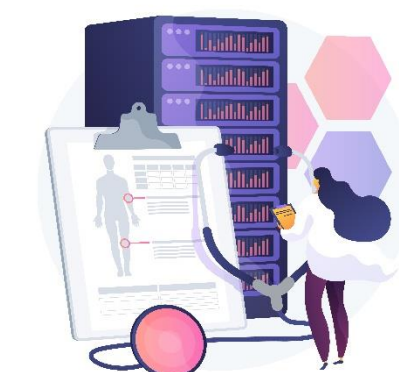
Comment sélectionner les patients ?



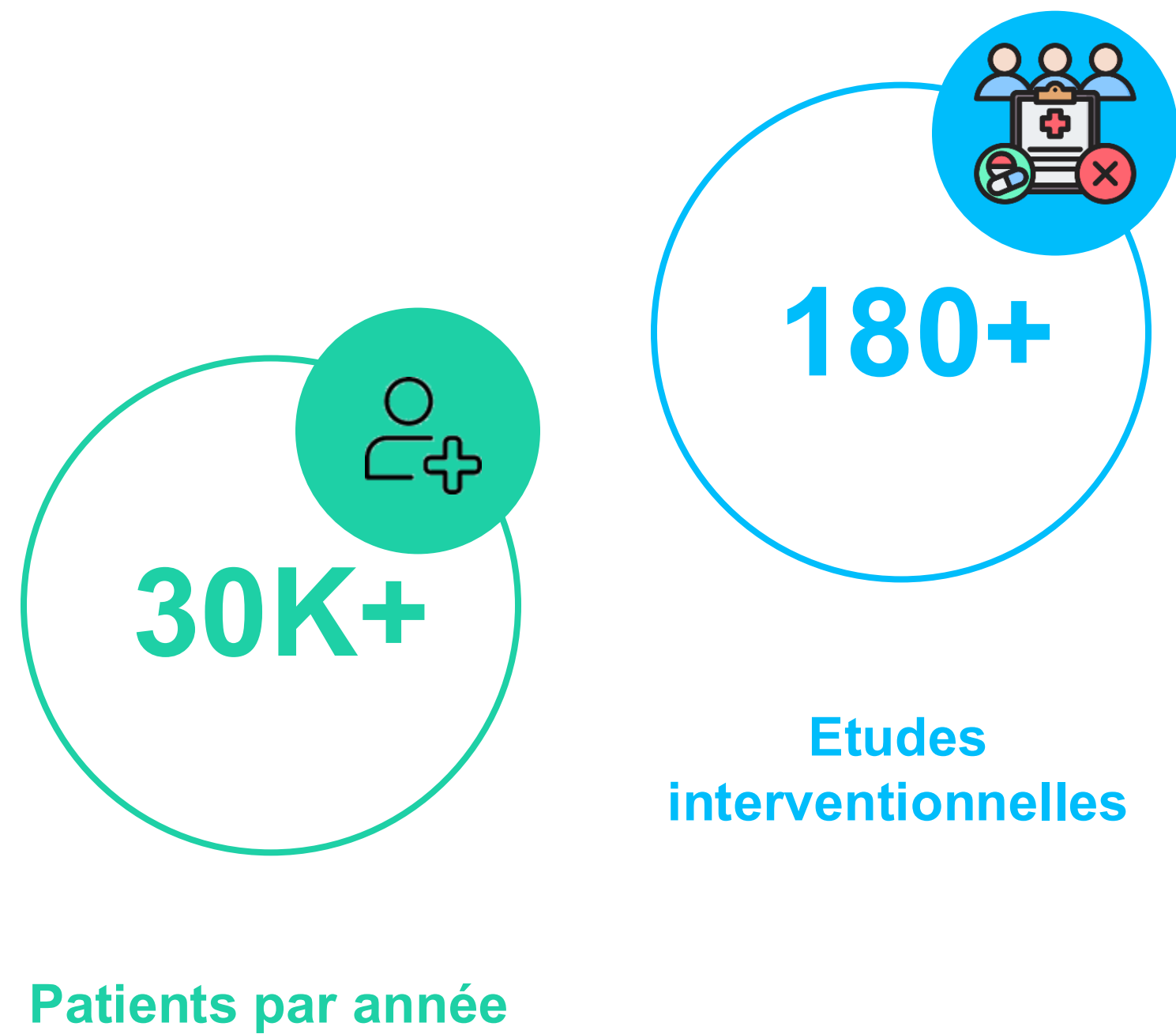
Comment sélectionner les patients ?



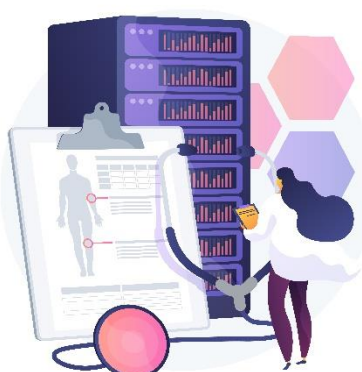
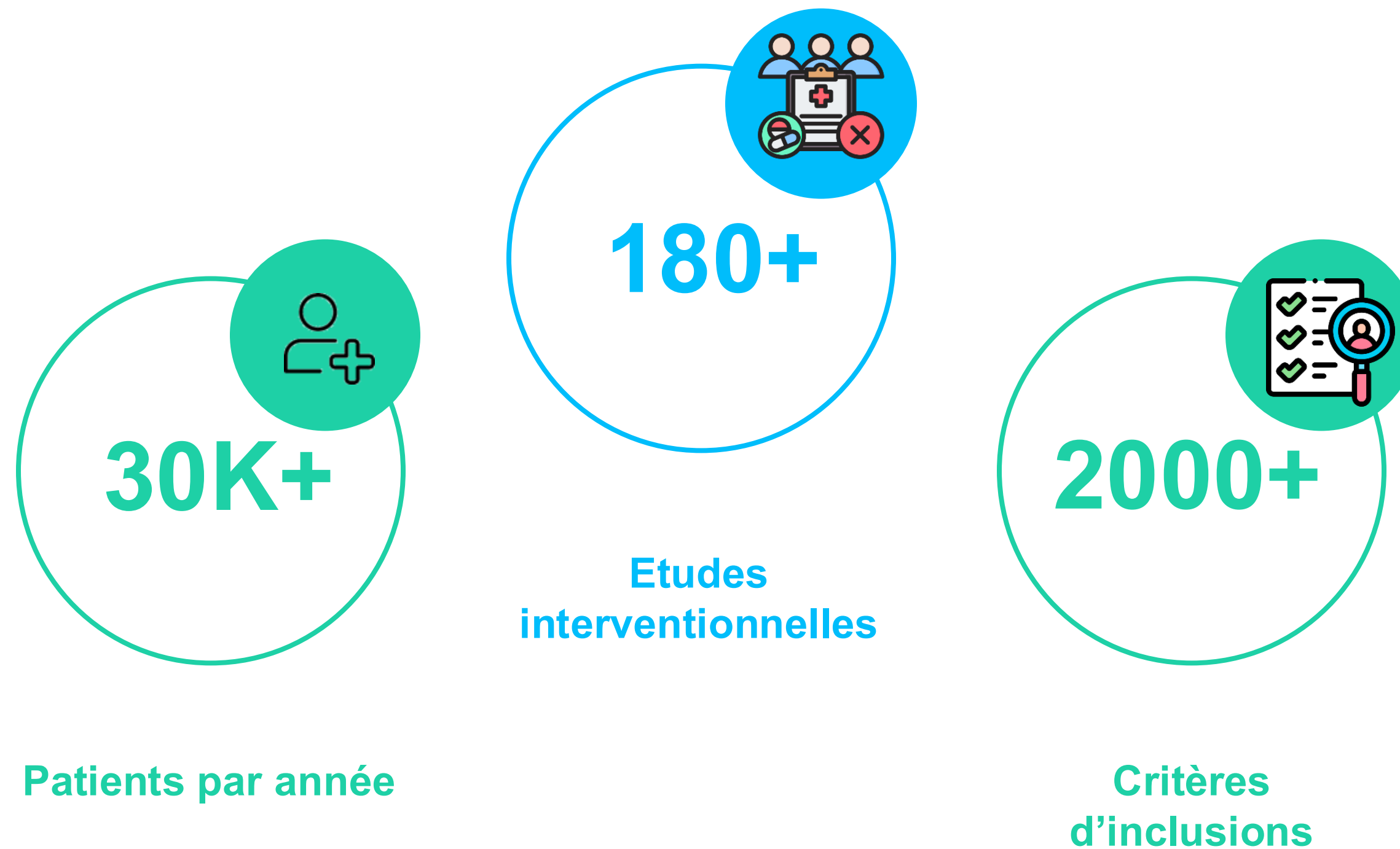
Patients par année



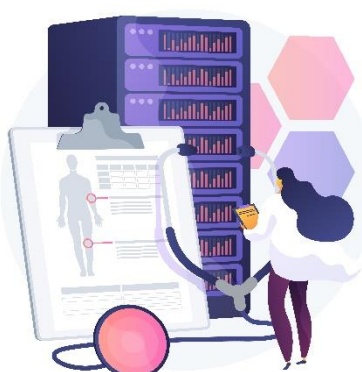
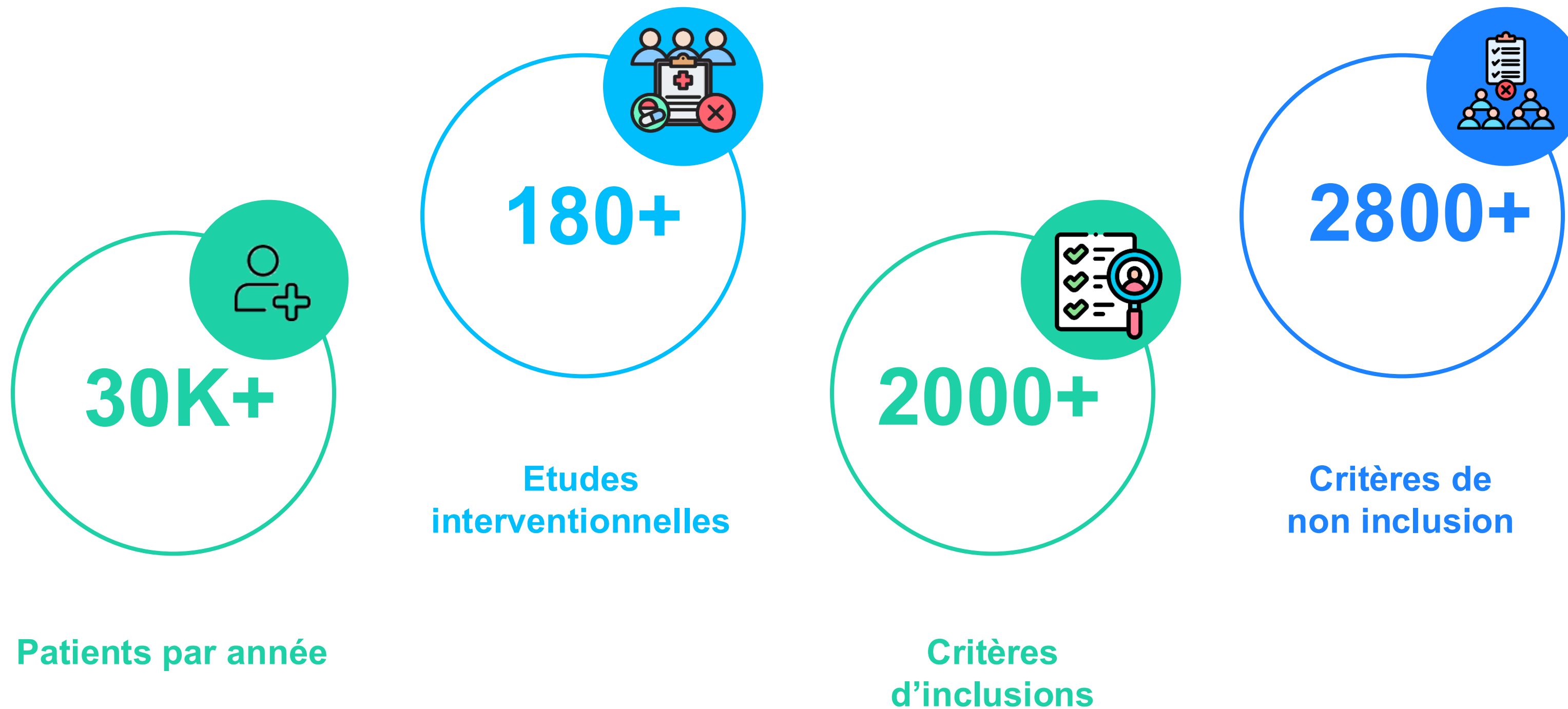
Comment sélectionner les patients ?



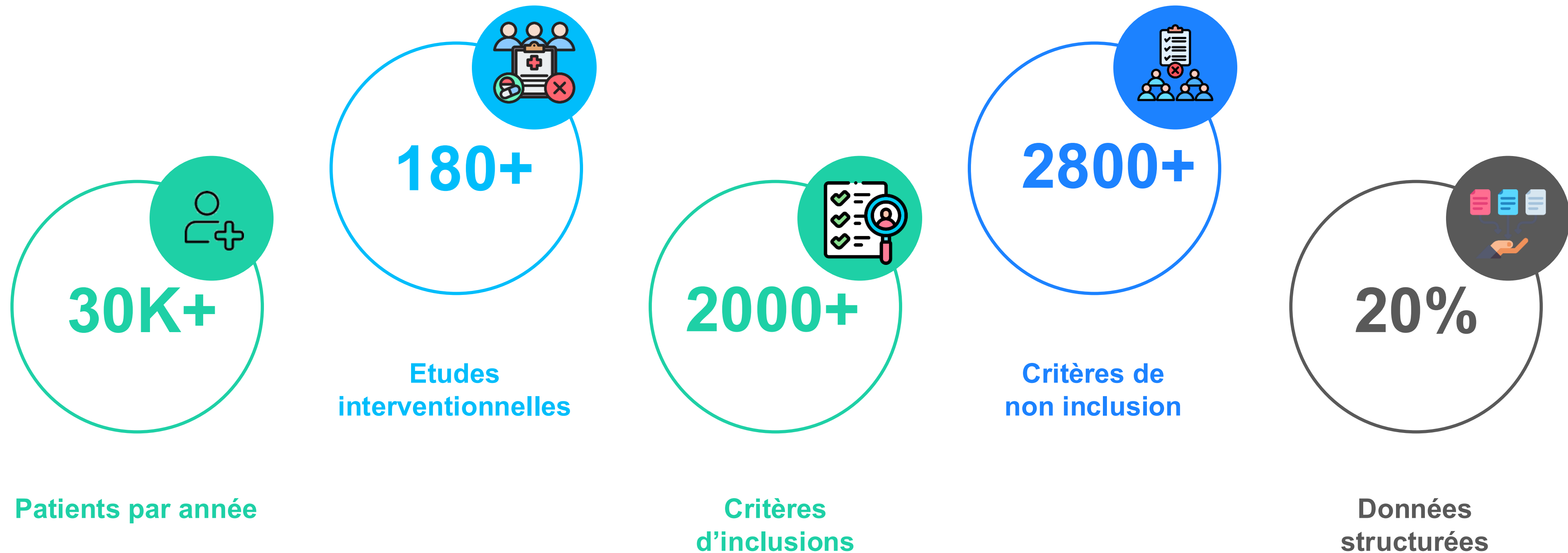
Comment sélectionner les patients ?



Comment sélectionner les patients ?



Comment sélectionner les patients ?



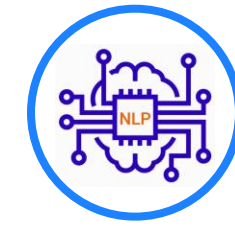
Comment sélectionner les patients ?



Manuellement



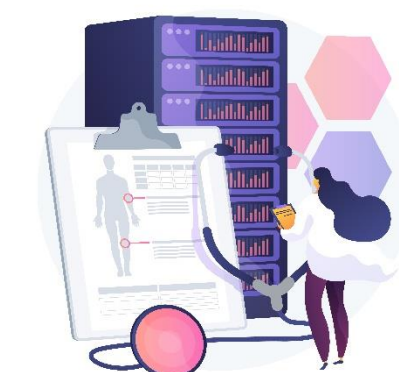
RegEx



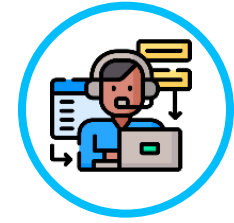
NLP



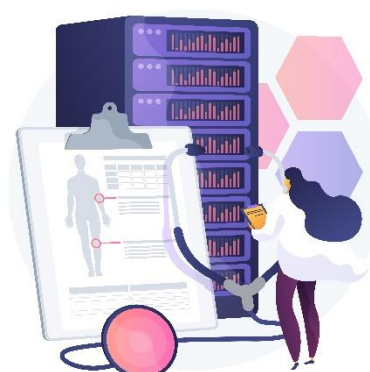
LLM



Comment sélectionner les patients ?



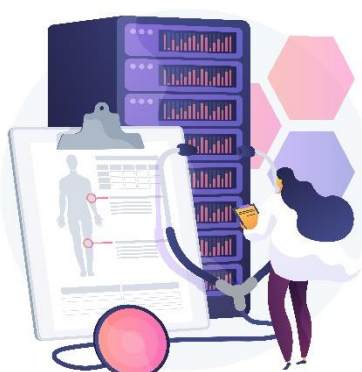
Manuellement



Comment sélectionner les patients ?



« une expression régulière est une chaîne de caractères qui décrit, selon une syntaxe précise, un ensemble de chaînes de caractères possibles. »



Comment sélectionner les patients ?



« une expression régulière est une chaîne de caractères qui décrit, selon une syntaxe précise, un ensemble de chaînes de caractères possibles. »

Valeur brute dans le texte

ECOG : 0

ECOG 2

IK : 90%

OMS = 0

OMS 0

OMS :0

Performance status 2

PS = 2

PS à 0



Comment sélectionner les patients ?



RegEx

« une expression régulière est une chaîne de caractères qui décrit, selon une syntaxe précise, un ensemble de chaînes de caractères possibles. »

Valeur brute dans le texte

ECOG : 0

ECOG 2

IK : 90%

OMS = 0

OMS 0

OMS :0

Performance status 2

PS = 2

PS à 0

"PS[]*[:=àa]?[]*[0-5]"

"perform[ae]nce[]*status[]*[:=àa]?[]*[0-5]"

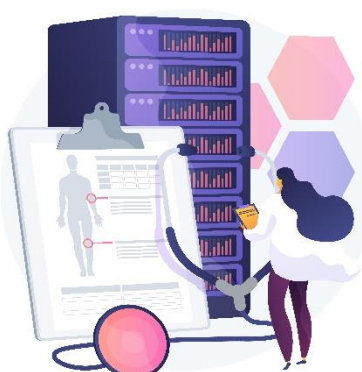
"ecog[]*[:=àa]?[]*[0-5]"

"oms[]*[:=àa]?[]*[0-5]"

"i?n?d?i?c?e?[]*d?e?[]*karnofsky[]*[:=àa]?[]*[0-9][0-9]?%"

"IKA?[]*[:=aà]?[]*[0-9][0-9]?%"

"KPS[]*[:=àa]?[]*[0-9][0-9]?%"



Comment sélectionner les patients ?



RegEx

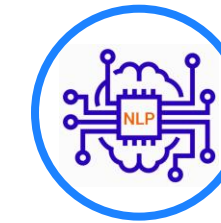
« une expression régulière est une chaîne de caractères qui décrit, selon une syntaxe précise, un ensemble de chaînes de caractères possibles. »

Valeur brute dans le texte		Valeur Base de données
ECOG : 0	"PS[]*[:=àa]?[]*[0-5]"	0
ECOG 2	"perform[ae]nce[]*status[]*[:=àa]?[]*[0-5]"	2
IK : 90%	"ecog[]*[:=àa]?[]*[0-5]"	0
OMS = 0	"oms[]*[:=àa]?[]*[0-5]"	0
OMS 0	"i?n?d?i?c?e?[]*d?e?[]*karnofsky[]*[:=àa]?[]*[0-9][0-9]?%"	0
OMS :0	"IKA?[]*[:=aà]?[]*[0-9][0-9]?%"	0
Performance status 2	"KPS[]*[:=àa]?[]*[0-9][0-9]?%"	0
PS = 2		2
PS à 0		2
		0

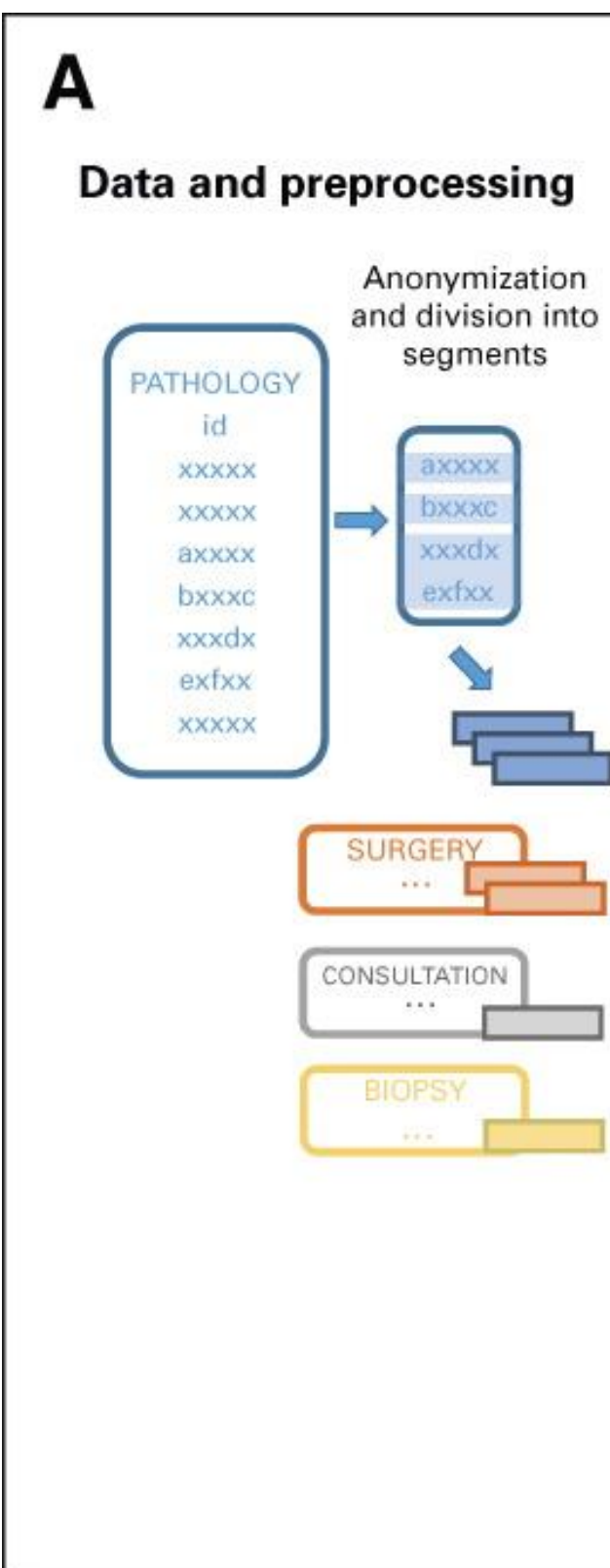


Comment sélectionner les patients ?

Capacité à traiter le langage naturel



NLP

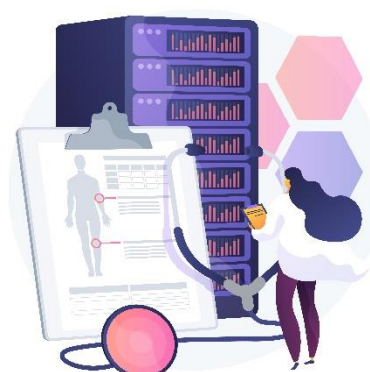


Schiappa et al., RUBY: Natural Language Processing of French Electronic Medical Records for Breast Cancer Research. *JCO Clin Cancer Inform*, 2022

Schiappa et al., Validation of RUBY for Breast Cancer Knowledge Extraction From a Large French Electronic Medical Record System. *JCO Clin Cancer Inform*, 2023

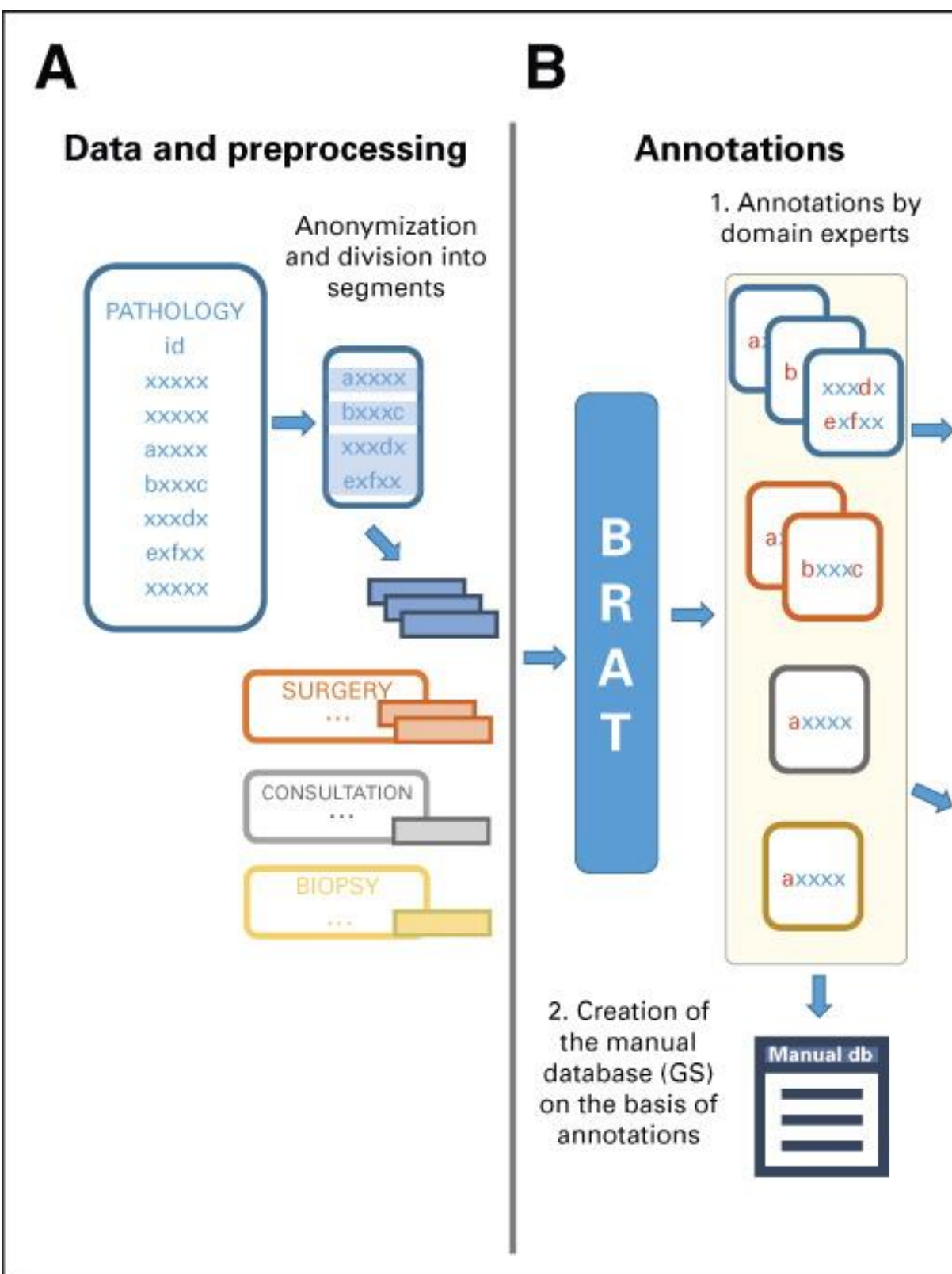
Culie et al, Enhancing Thyroid Pathology With Artificial Intelligence: Automated Data Extraction From Electronic Health Reports Using RUBY. *JCO Clin Cancer Inform*, 2024

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Comment sélectionner les patients ?

Capacité à traiter le langage naturel

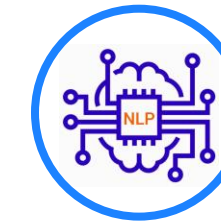


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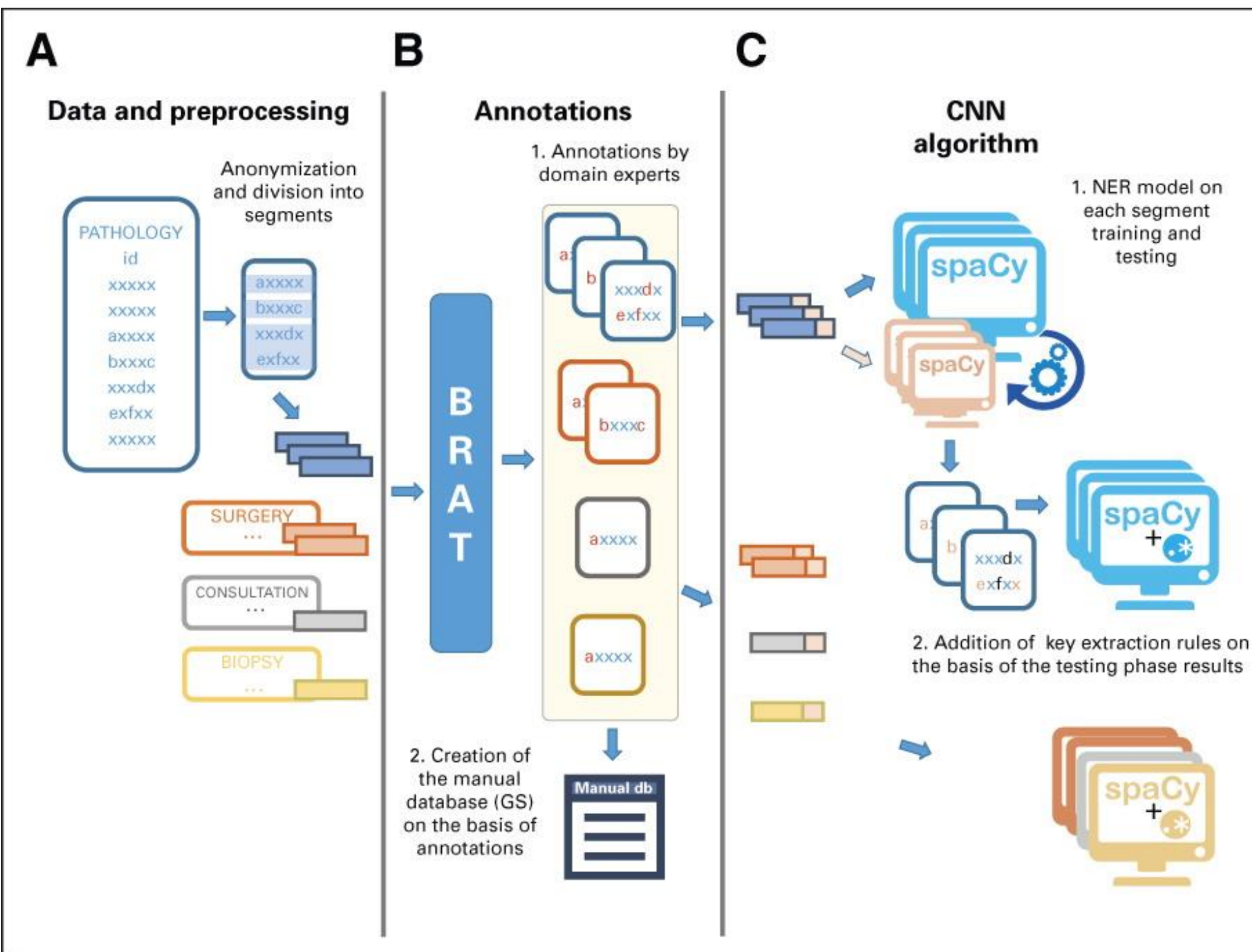


Comment sélectionner les patients ?

Capacité à traiter le langage naturel



NLP

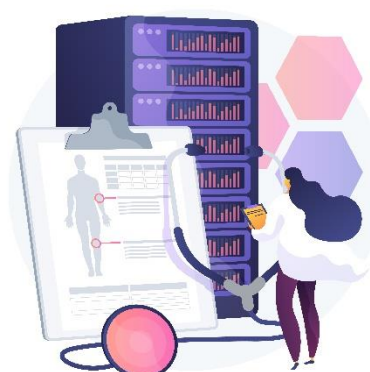


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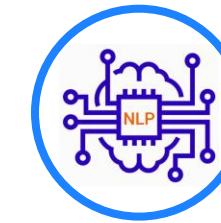
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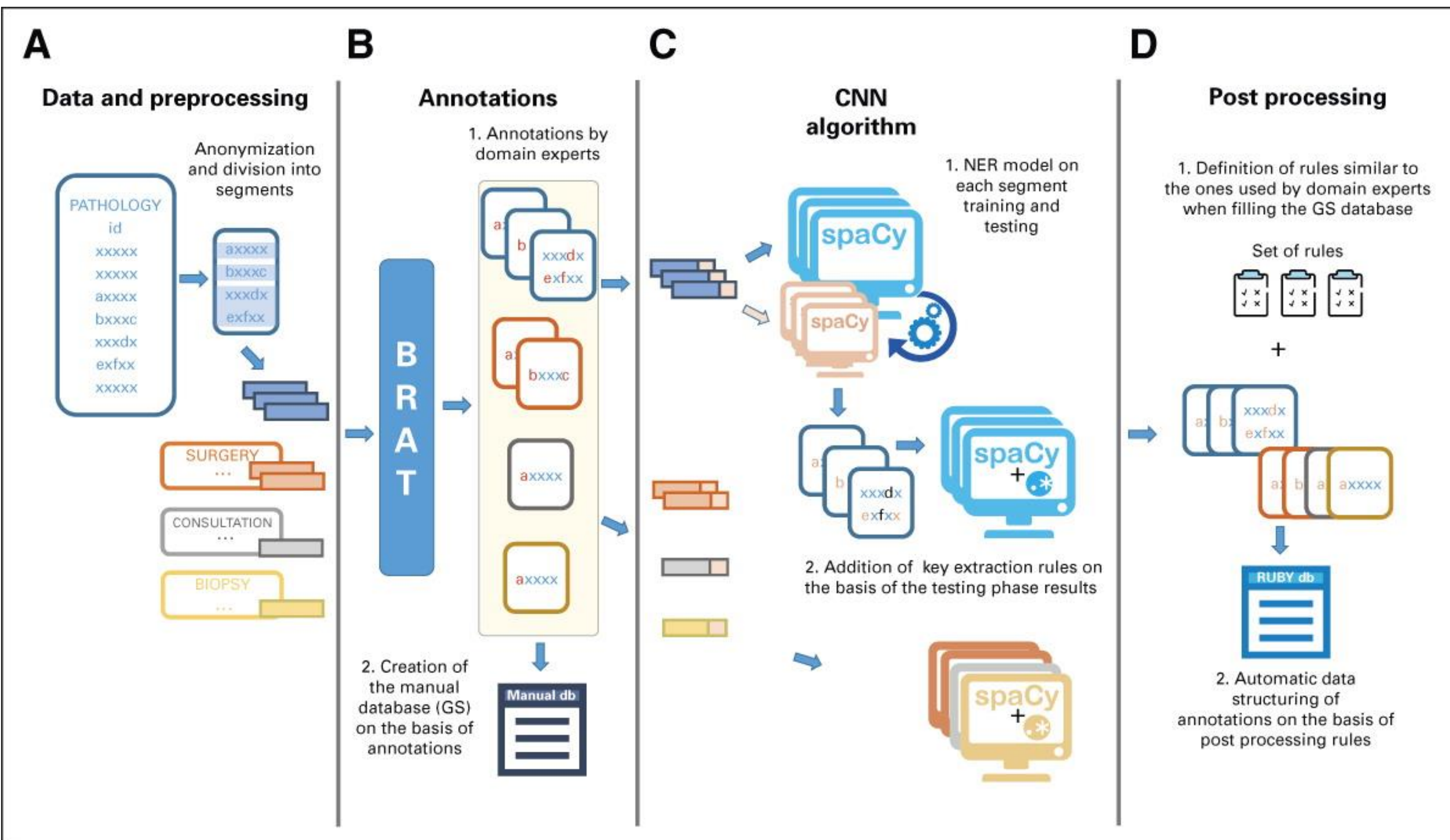


Comment sélectionner les patients ?

Capacité à traiter le langage naturel



NLP

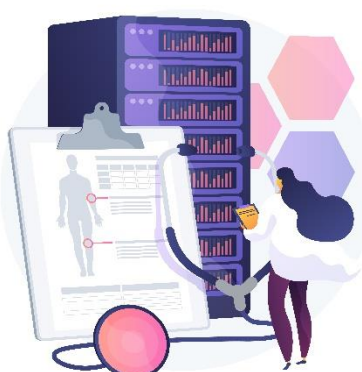


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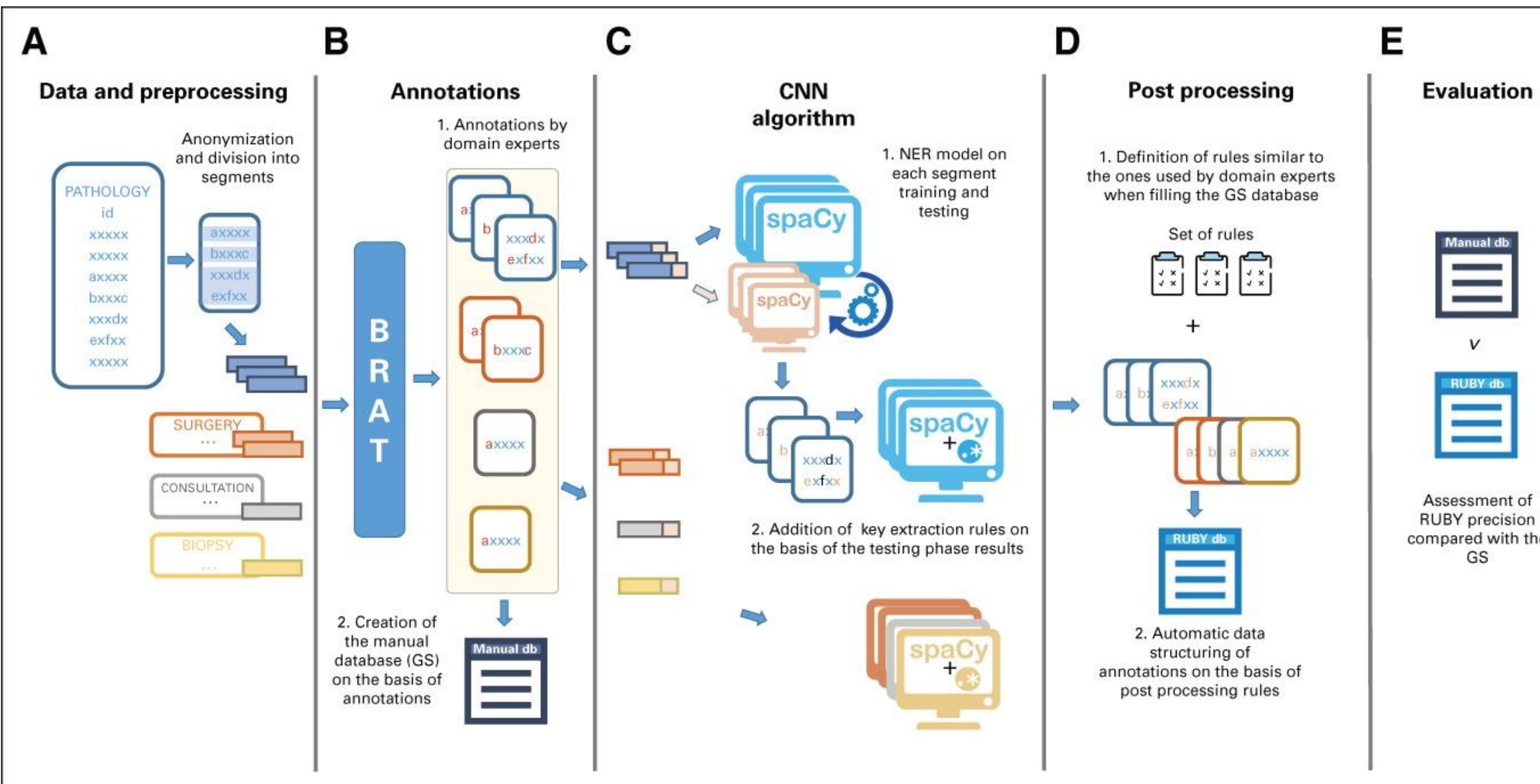
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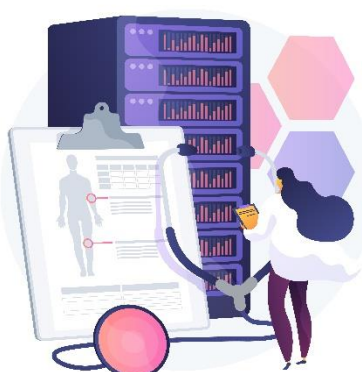


Comment sélectionner les patients ?

Capacité à traiter le langage naturel



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Comment sélectionner les patients ?

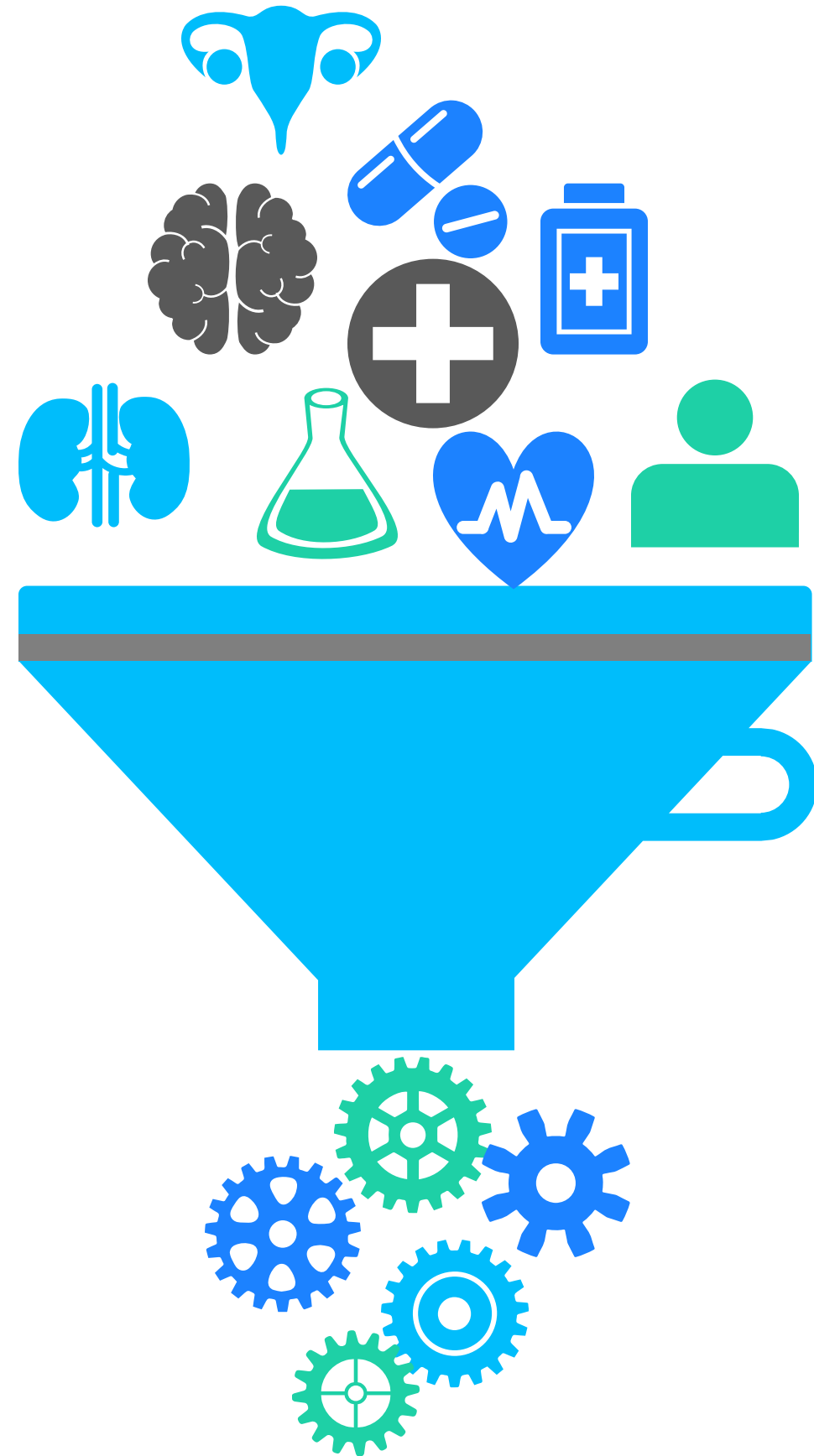
*Capacité à comprendre, résumer, générer
et prédire de nouveaux contenus*



LLM



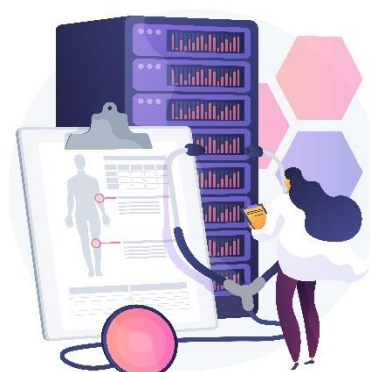
Comment sélectionner les patients ?



*Capacité à comprendre, résumer, générer
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LLM



Comment sélectionner les patients ?



*Capacité à comprendre, résumer, générer
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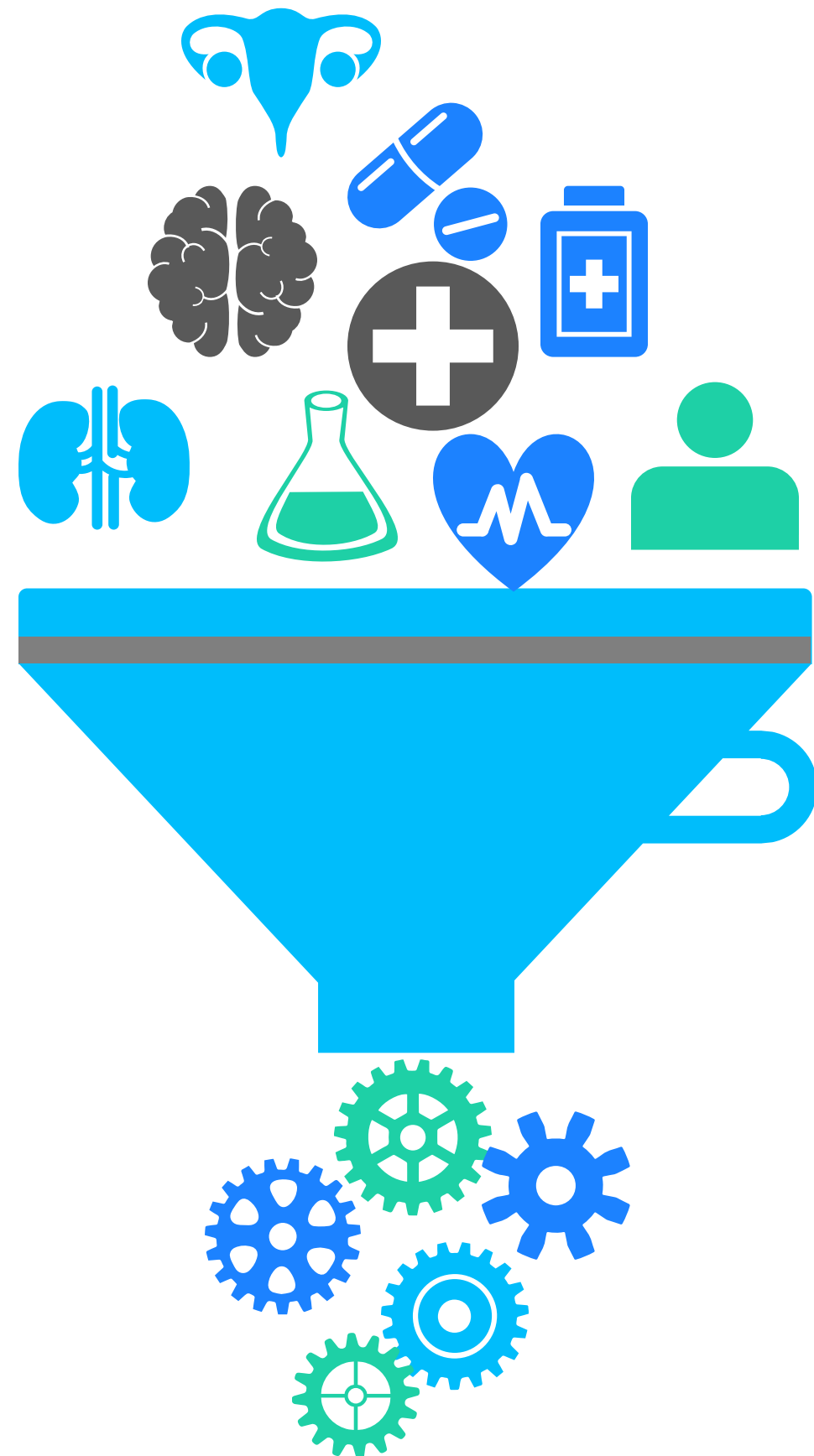
LLM



*Côté de la tumeur ?
Quel est le stade de la maladie ?
Statut ménopausique ?
Type histologique ?*



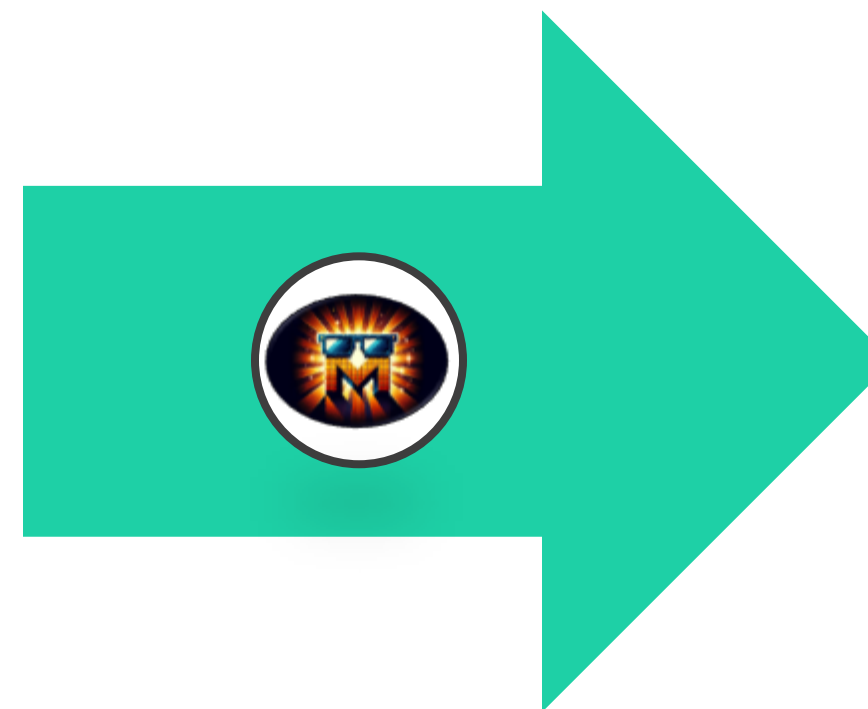
Comment sélectionner les patients ?



Capacité à comprendre, résumer, générer et prédire de nouveaux contenus



LLM



Patient	Consultation						Biopsy				...
	Date	Side	T	N	M	Menopause	Biopsy	Date	Side	Type	
1	06/07/2015	LEFT	1	0	0	NO	YES	06/08/2015	LEFT	NST	...
1	04/06/2017	LEFT	2	1	1	YES	YES	06/07/2017	LEFT	LOBULAR	...
2	01/01/2012	RIGHT	3	0	0	YES	YES	01/02/2012	RIGHT	MIXED	...
2	10/05/2012	LEFT	4	1	1	YES	YES	08/06/2012	LEFT	NST	...

*Côté de la tumeur ?
 Quel est le stade de la maladie ?
 Statut ménopausique ?
 Type histologique ?*



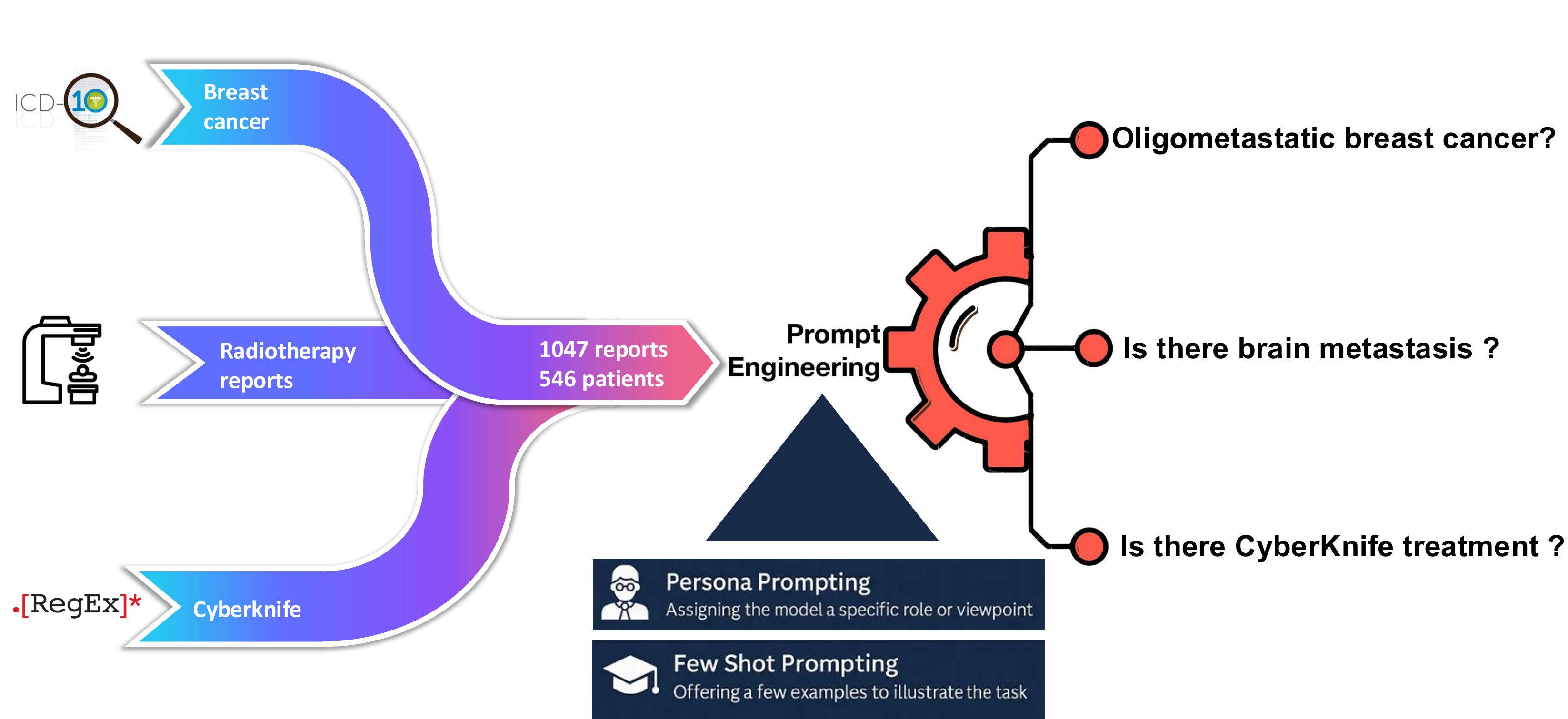
Leveraging Large Language Models for Identifying CyberKnife Radiotherapy in Oligometastatic Breast Cancer: A Time-Saving Tool for Retrospective Studies

R. Schiappa¹, S. Ben Dhia², S. Contu¹, E. Chamorey¹

¹Departement of Epidemiology, Biostatistics and Health Data - Centre Antoine Lacassagne, Nice, France,

²Radiotherapy - Centre Antoine Lacassagne, Nice, France

Large Language Models (LLMs) have the potential to streamline retrospective oncology research by extracting structured insights from free-text clinical reports. At the Centre Antoine Lacassagne (CAL), in Nice, where precise manual selection is time-consuming and resource-intensive, we explored their use for identifying breast cancer patients who received CyberKnife radiotherapy, in an oligometastatic context without brain metastasis.



Model	Precision	Recall	F1 Score
Gemma 3	0.83	0.77	0.75
MISTRAL AI_8X7	0.94	0.93	0.93
LLaMA 7b by Meta	0.83	0.77	0.75
Gemma 3	0.84	0.81	0.82
MISTRAL AI_8X7	0.81	0.78	0.79
LLaMA 7b by Meta	0.84	0.80	0.82
Gemma 3	0.85	0.84	0.84
MISTRAL AI_8X7	0.83	0.80	0.79
LLaMA 7b by Meta	0.85	0.84	0.84

VS

Gold standard
Radiation oncologist evaluation

LLMs, while not flawless, offer a valuable balance between performance and efficiency for retrospective studies. Their use can significantly reduce manual workload in identifying patients, especially when high recall is less critical than filtering relevance.



Comment sélectionner les patients ?



Manuellement











RegEx



NLP



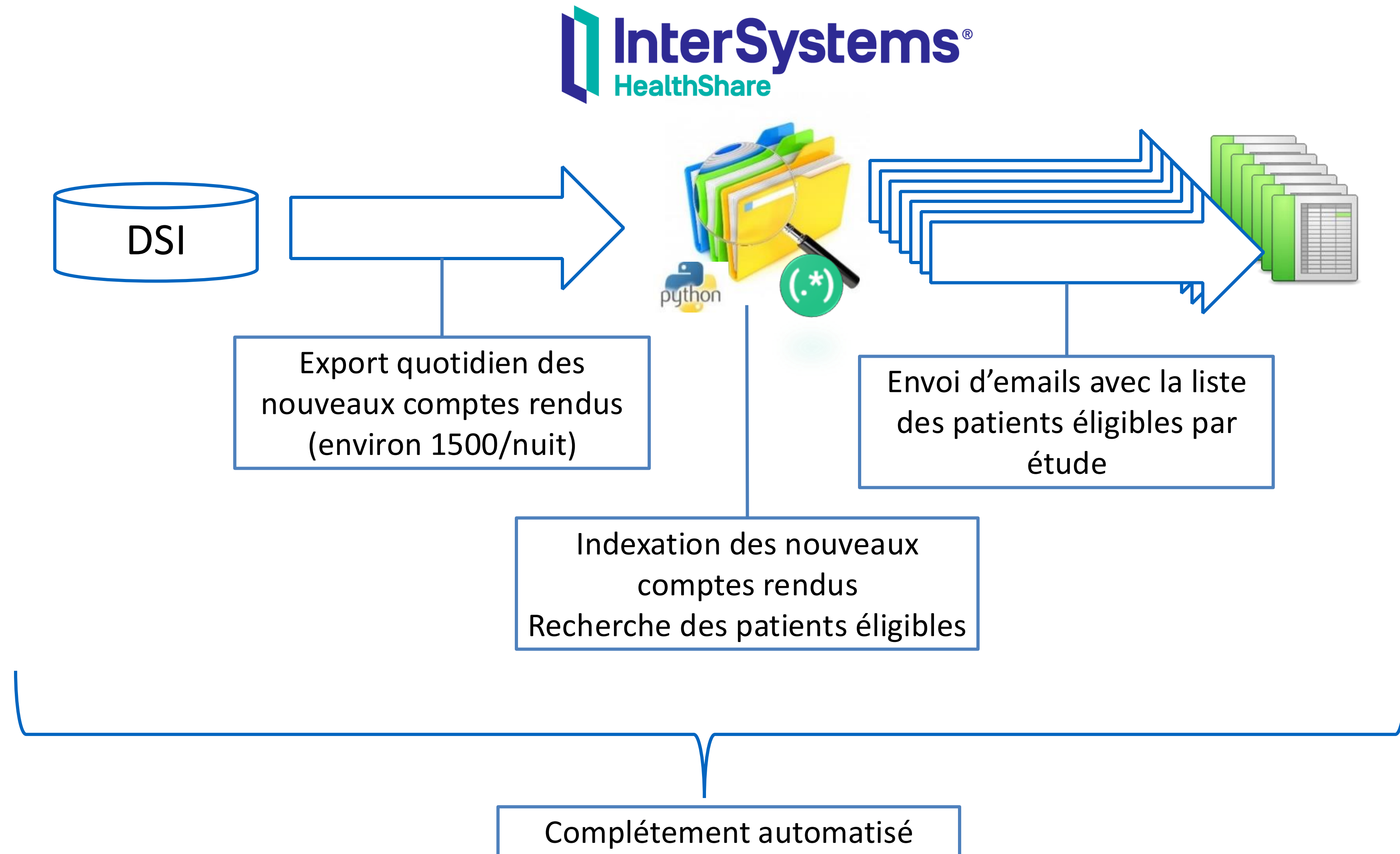
LLM

	Manual	RegEx	NLP	LLM
Temps			 	
Précision				
Sensibilité				





Applications



EMBER-4

A Randomized, Open-Label, Phase 3 Study of Adjuvant Imlunestrant vs Standard Adjuvant Endocrine Therapy in Patients who have Previously Received 2 to 5 years of Adjuvant Endocrine Therapy for ER+,HER2- Early Breast Cancer with an Increased Risk of Recurrence

TRAK-ER

A randomised trial of early detection of molecular relapse with circulating tumour DNA tracking and treatment with palbociclib plus fulvestrant versus standard endocrine therapy in patients with ER positive HER2 negative breast cancer



Applications - Cohorting

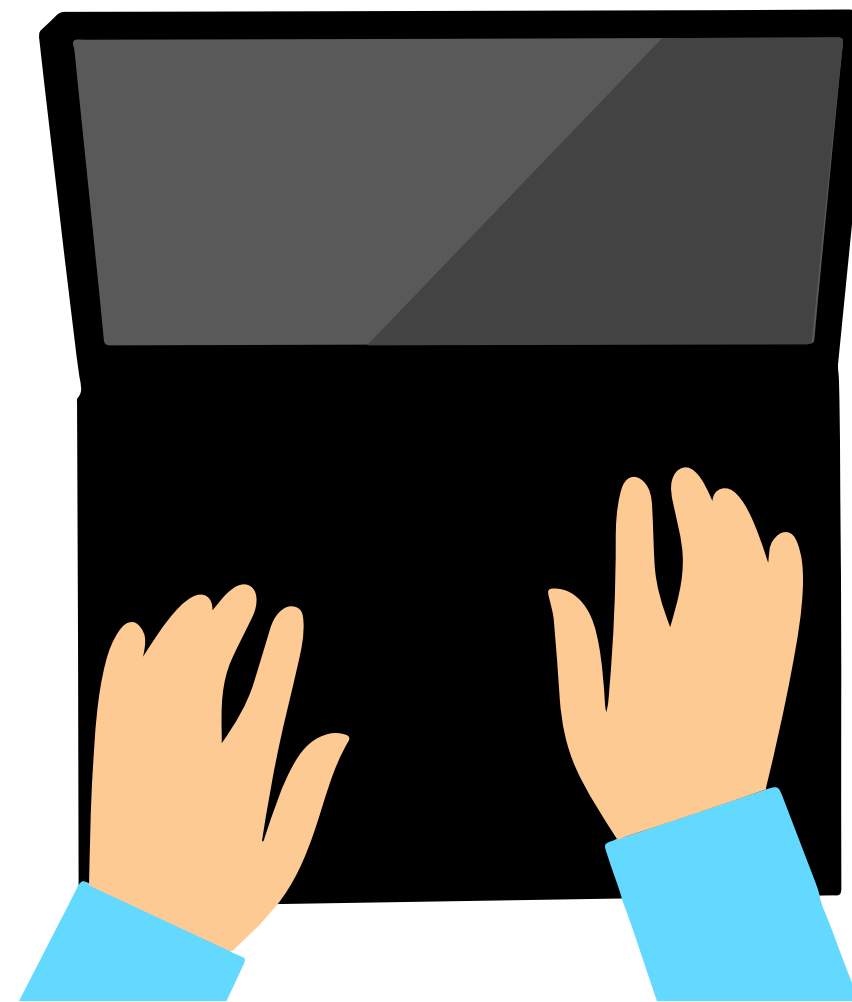
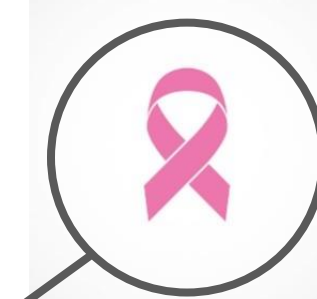
EMBER-4

Breast cancer patients



TRAK-ER

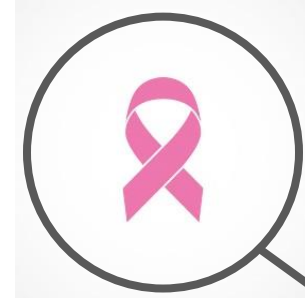
Breast cancer patients



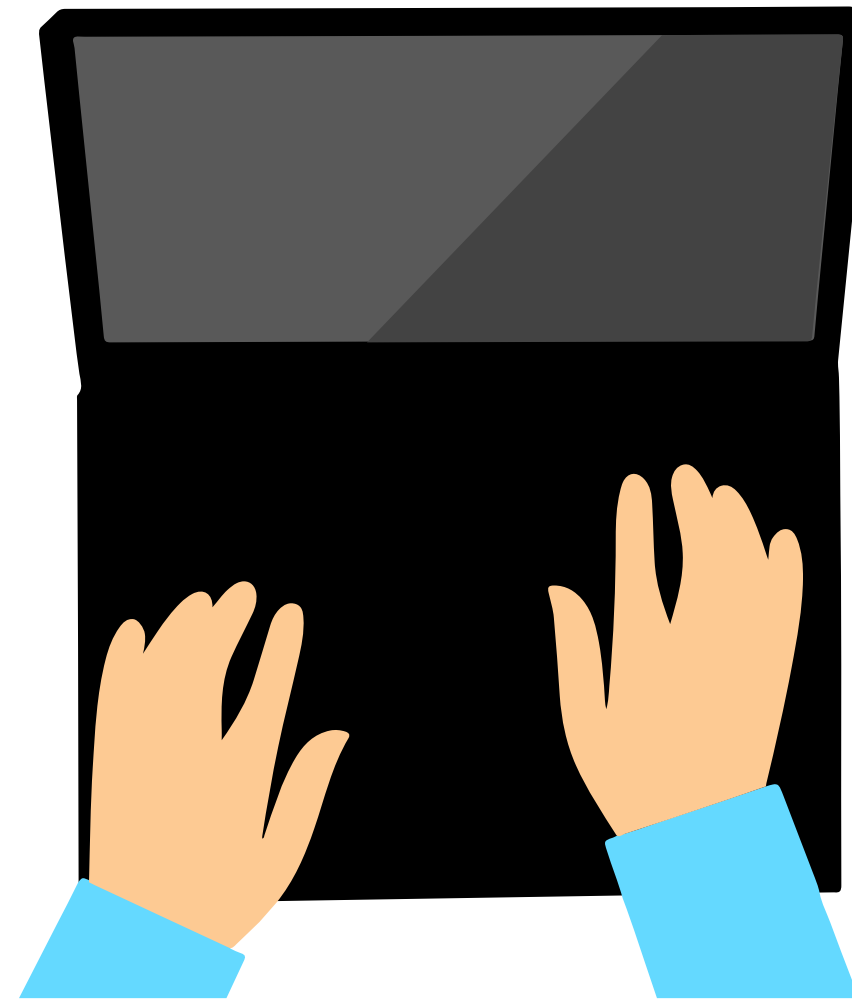
Applications - Cohorting

EMBER-4

Breast cancer patients

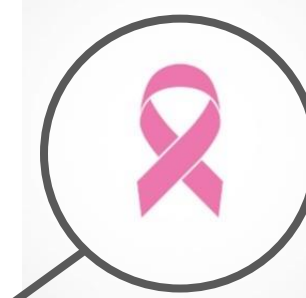


Surgery validated by bMDT between 2017 and 2022



TRAK-ER

Breast cancer patients



Surgery validated by bMDT between 2017 and 2022



Applications - Cohorting

EMBER-4

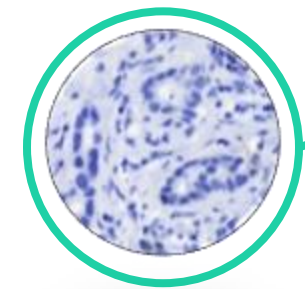
Breast cancer patients



Surgery validated by bMDT between 2017 and 2022

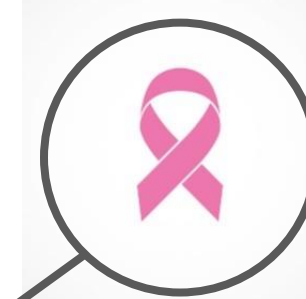


ER+, HER2-, early-stage



TRAK-ER

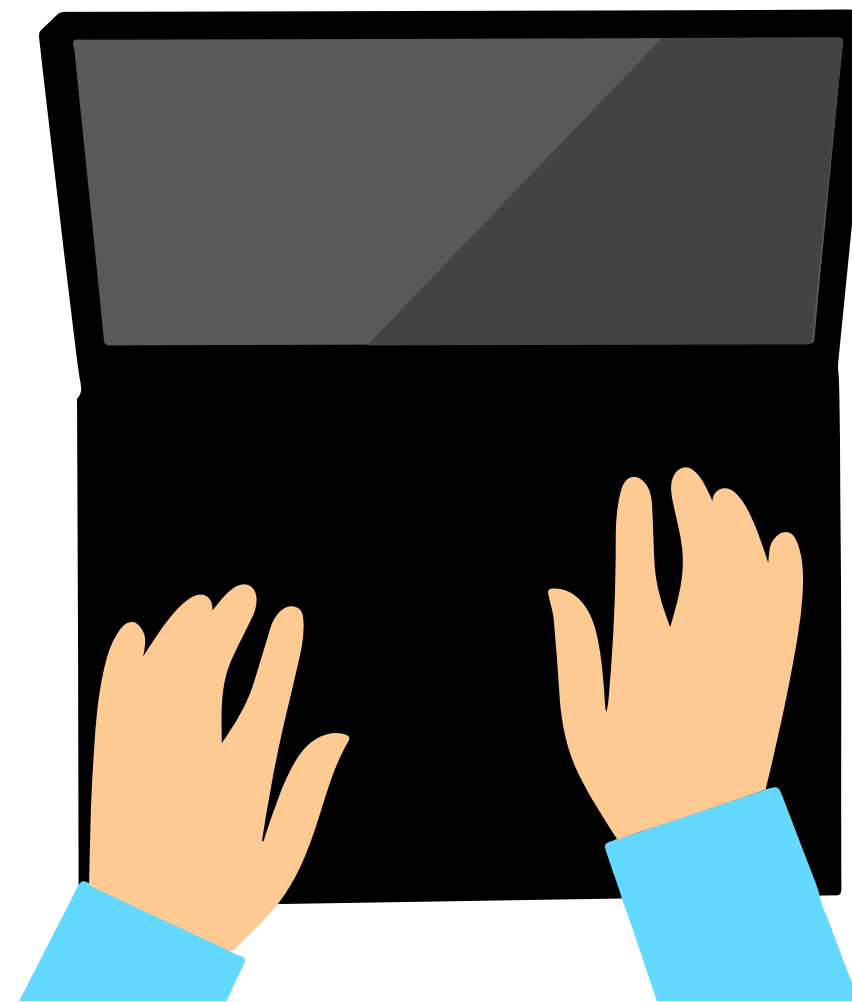
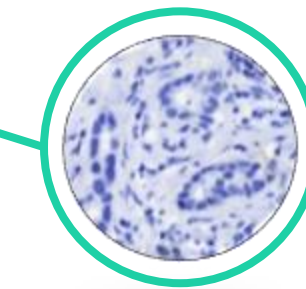
Breast cancer patients



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ER+, HER2-, early-stage



Applications - Cohorting

EMBER-4

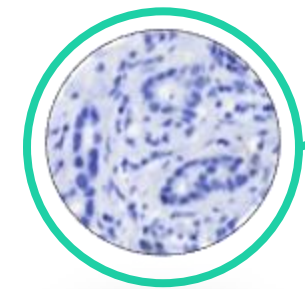
Breast cancer patients



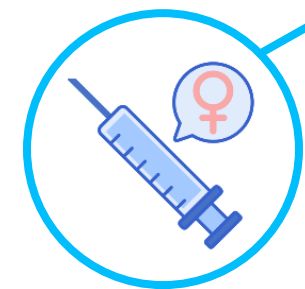
Surgery validated by bMDT between 2017 and 2022



ER+, HER2-, early-stage

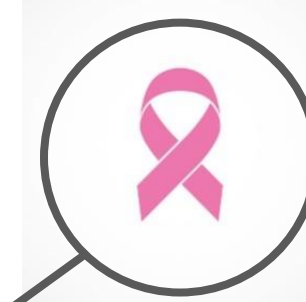


Standard endocrine therapy



TRAK-ER

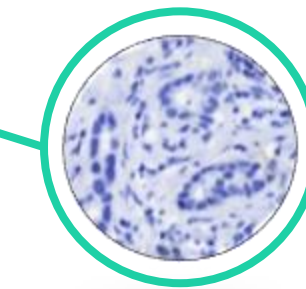
Breast cancer patients



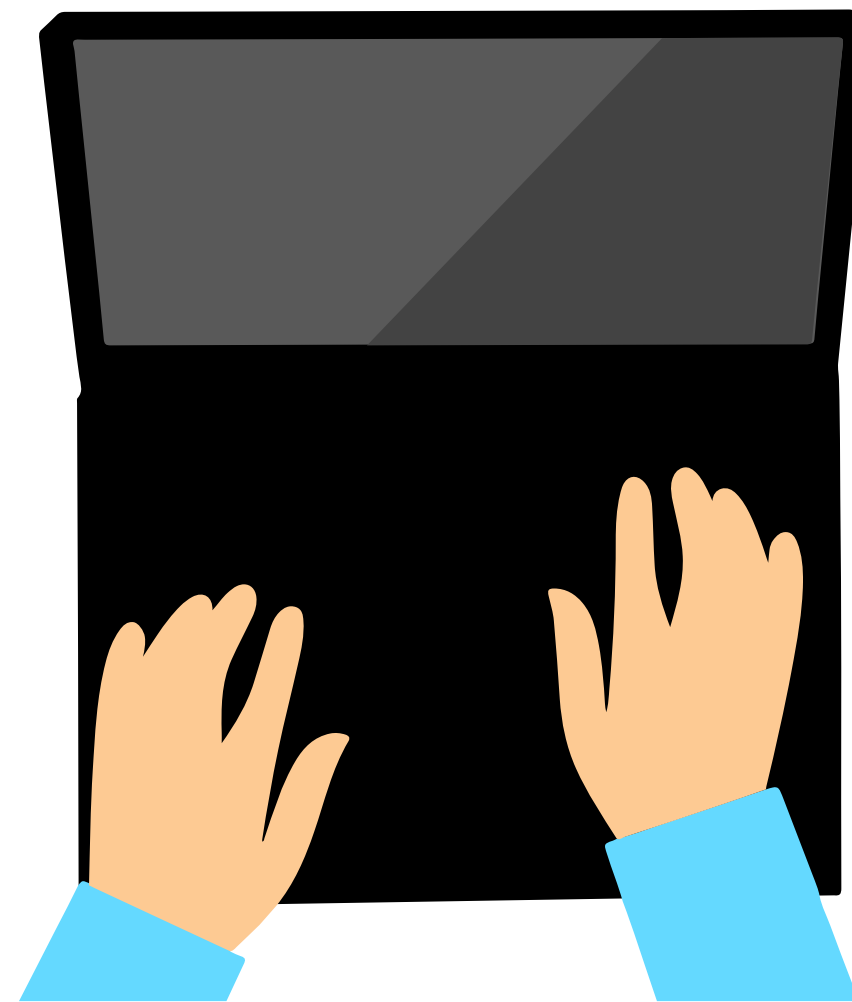
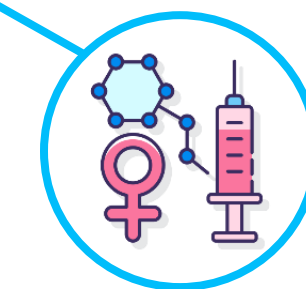
Surgery validated by bMDT between 2017 and 2022



ER+, HER2-, early-stage



Standard endocrine therapy and no CDK4/6 inhibitor



Applications - Cohorting

EMBER-4

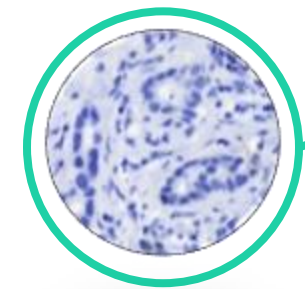
Breast cancer patients



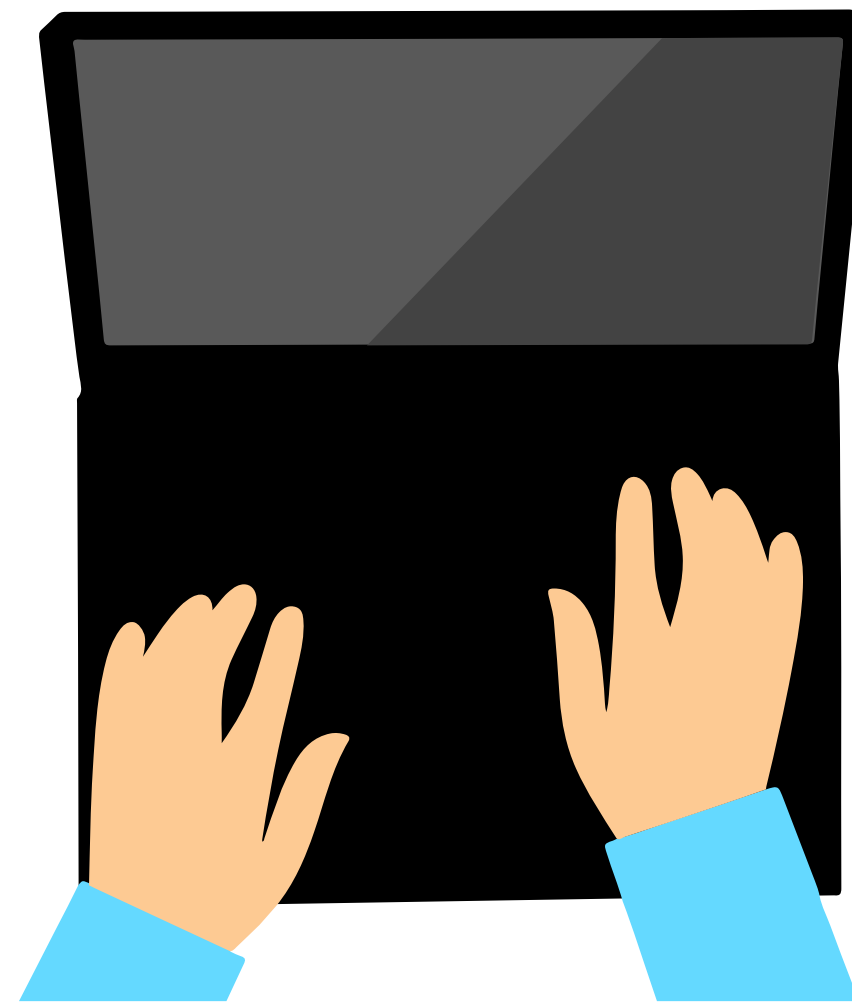
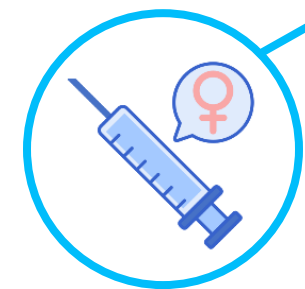
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ER+, HER2-, early-stage



Standard endocrine therapy



TRAK-ER

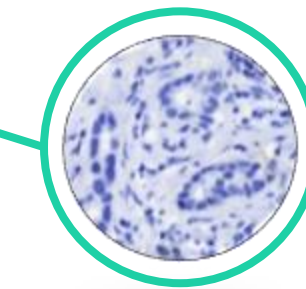
Breast cancer patients



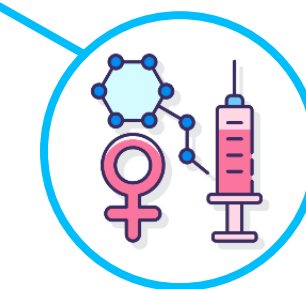
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ER+, HER2-, early-stage



Standard endocrine therapy and no CDK4/6 inhibitor



Applications - Cohorting

EMBER-4

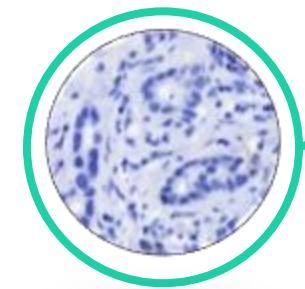
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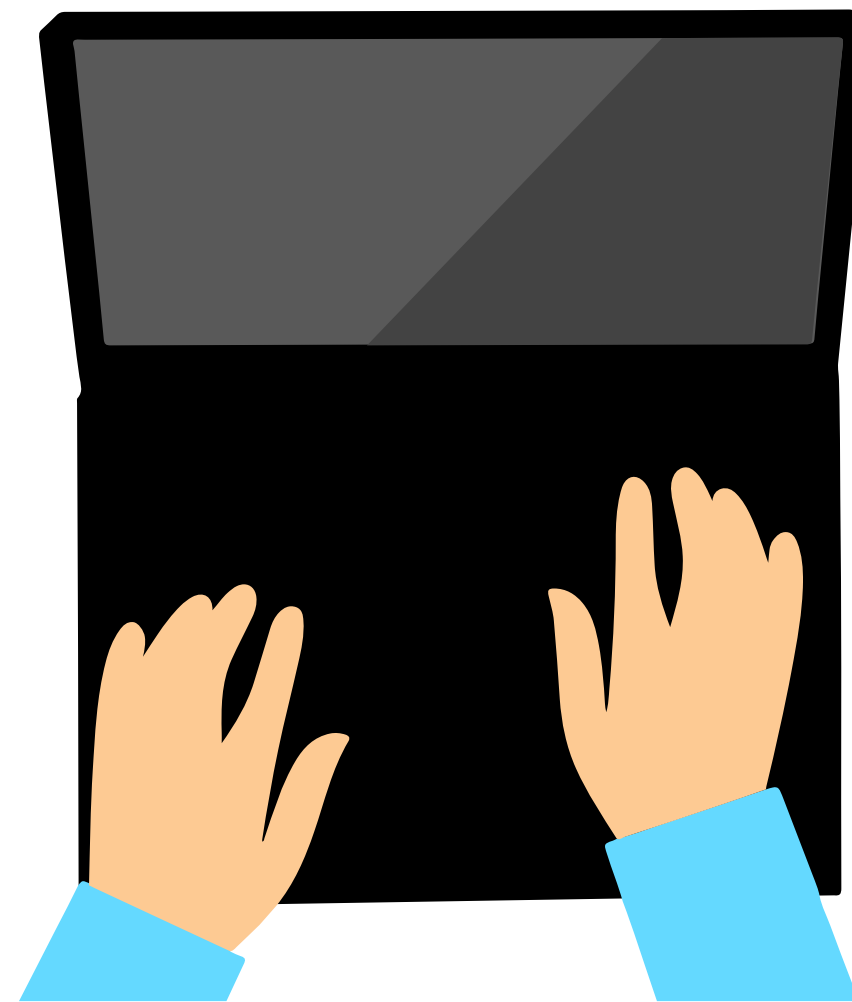
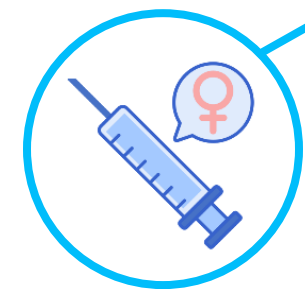
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Standard endocrine therapy



TRAK-ER

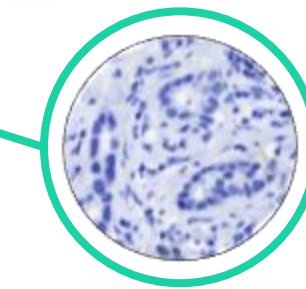
Breast cancer patients



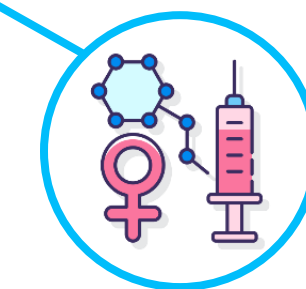
Surgery validated by bMDT between 2017 and 2022



ER+, HER2-, early-stage



Standard endocrine therapy and no CDK4/6 inhibitor



Applications - Cohorting

EMBER-4

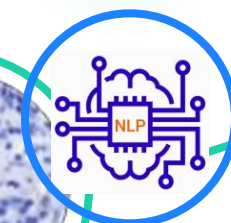
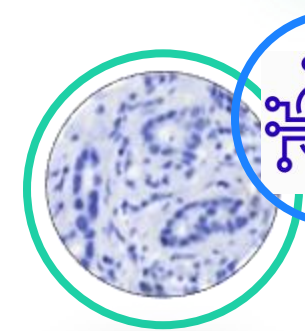
Breast cancer patients



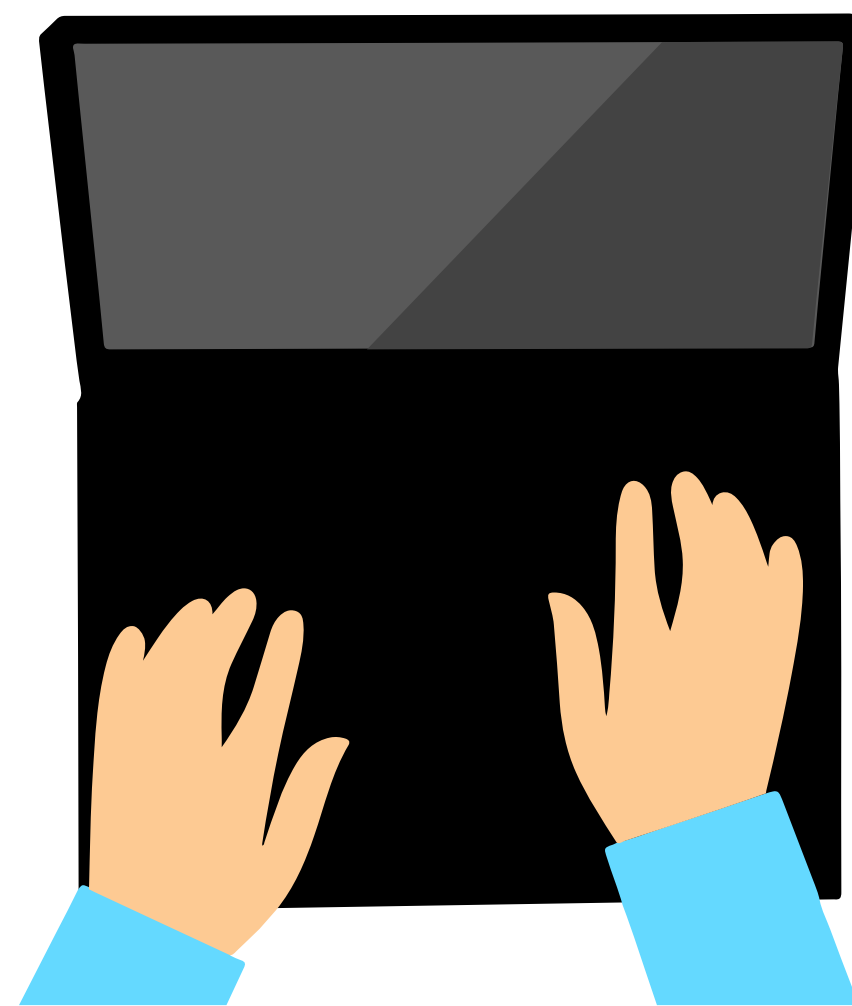
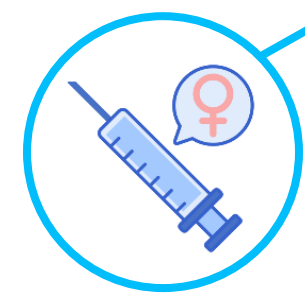
Surgery validated by bMDT between 2017 and 2022



ER+, HER2-, early-stage



Standard endocrine therapy



TRAK-ER

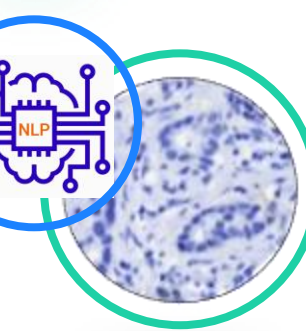
Breast cancer patients



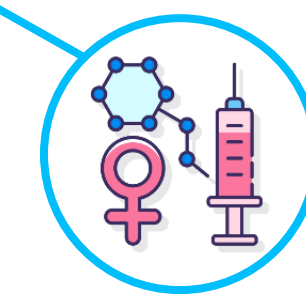
Surgery validated by bMDT between 2017 and 2022



ER+, HER2-, early-stage



Standard endocrine therapy and no CDK4/6 inhibitor



Applications - Cohorting

EMBER-4

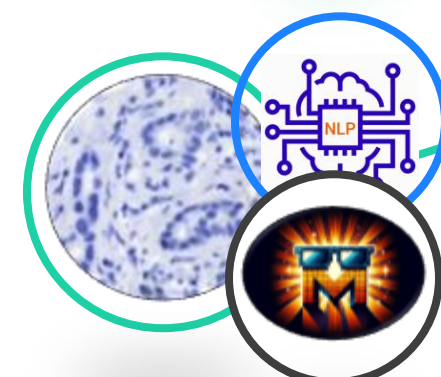
Breast cancer patients



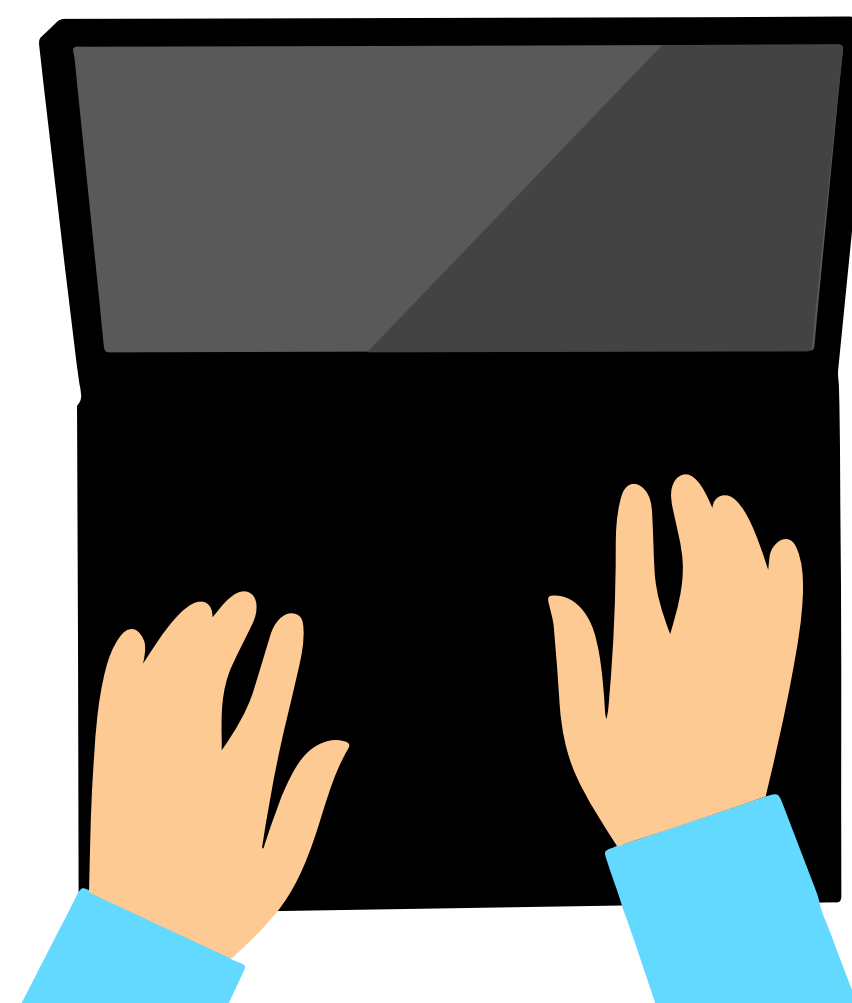
Surgery validated by bMDT between 2017 and 2022



ER+, HER2-, early-stage



Standard endocrine therapy



TRAK-ER

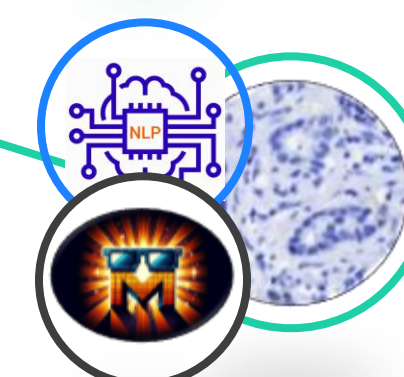
Breast cancer patients



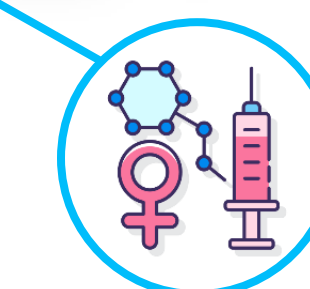
Surgery validated by bMDT between 2017 and 2022



ER+, HER2-, early-stage



Standard endocrine therapy and no CDK4/6 inhibitor



Applications - Cohorting

EMBER-4

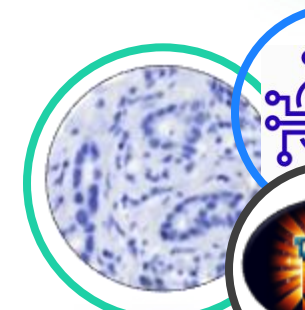
Breast cancer patients



Surgery validated by bMDT between 2017 and 2022



ER+, HER2-, early-stage



Standard endocrine therapy



TRAK-ER

Breast cancer patients



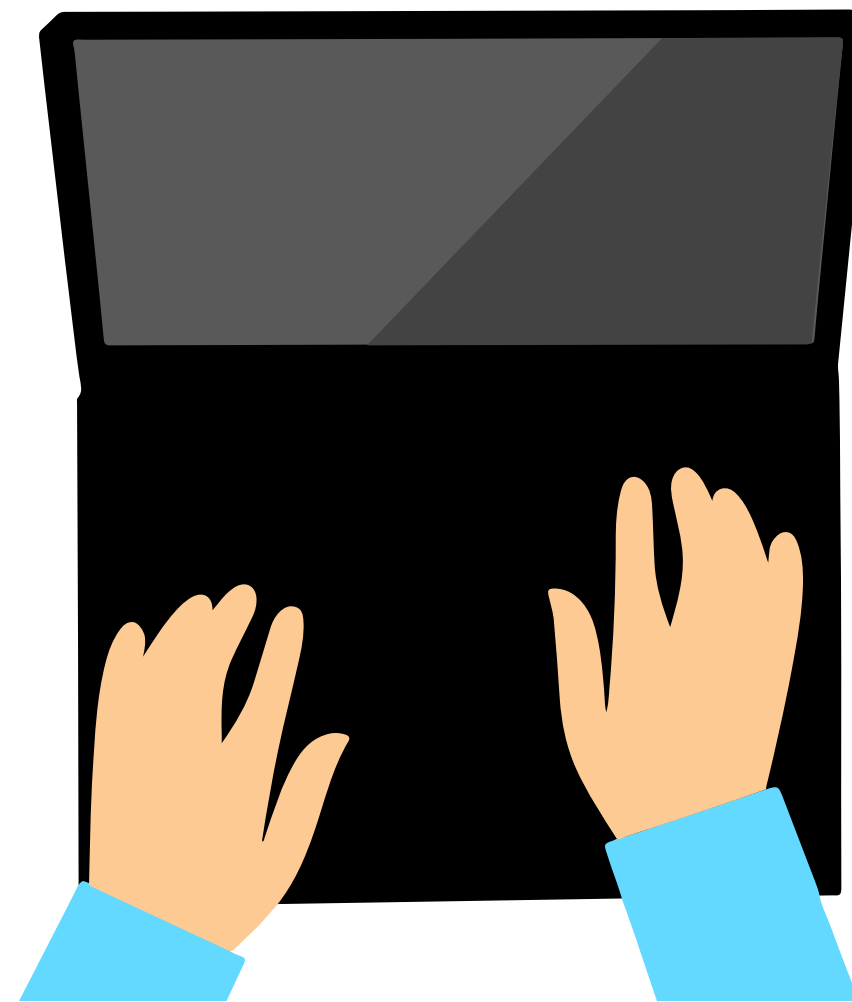
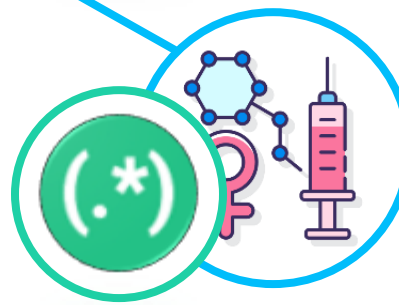
Surgery validated by bMDT between 2017 and 2022



ER+, HER2-, early-stage

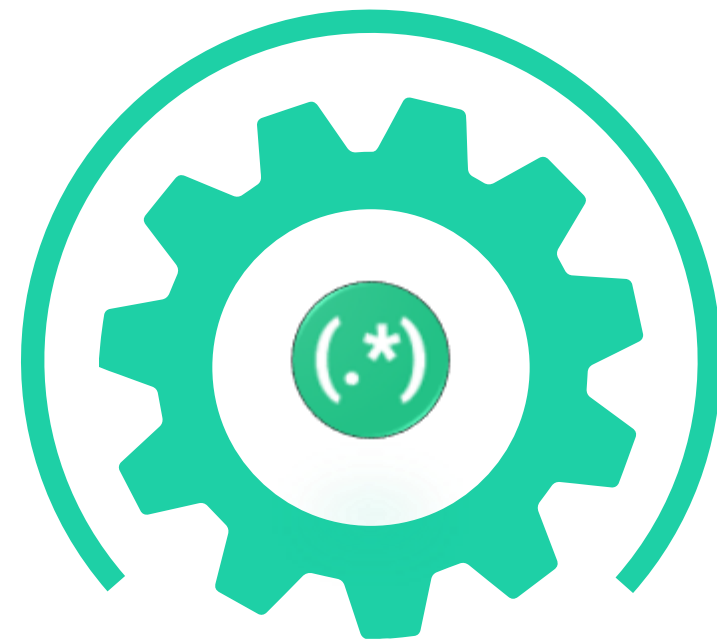


Standard endocrine therapy and no CDK4/6 inhibitor



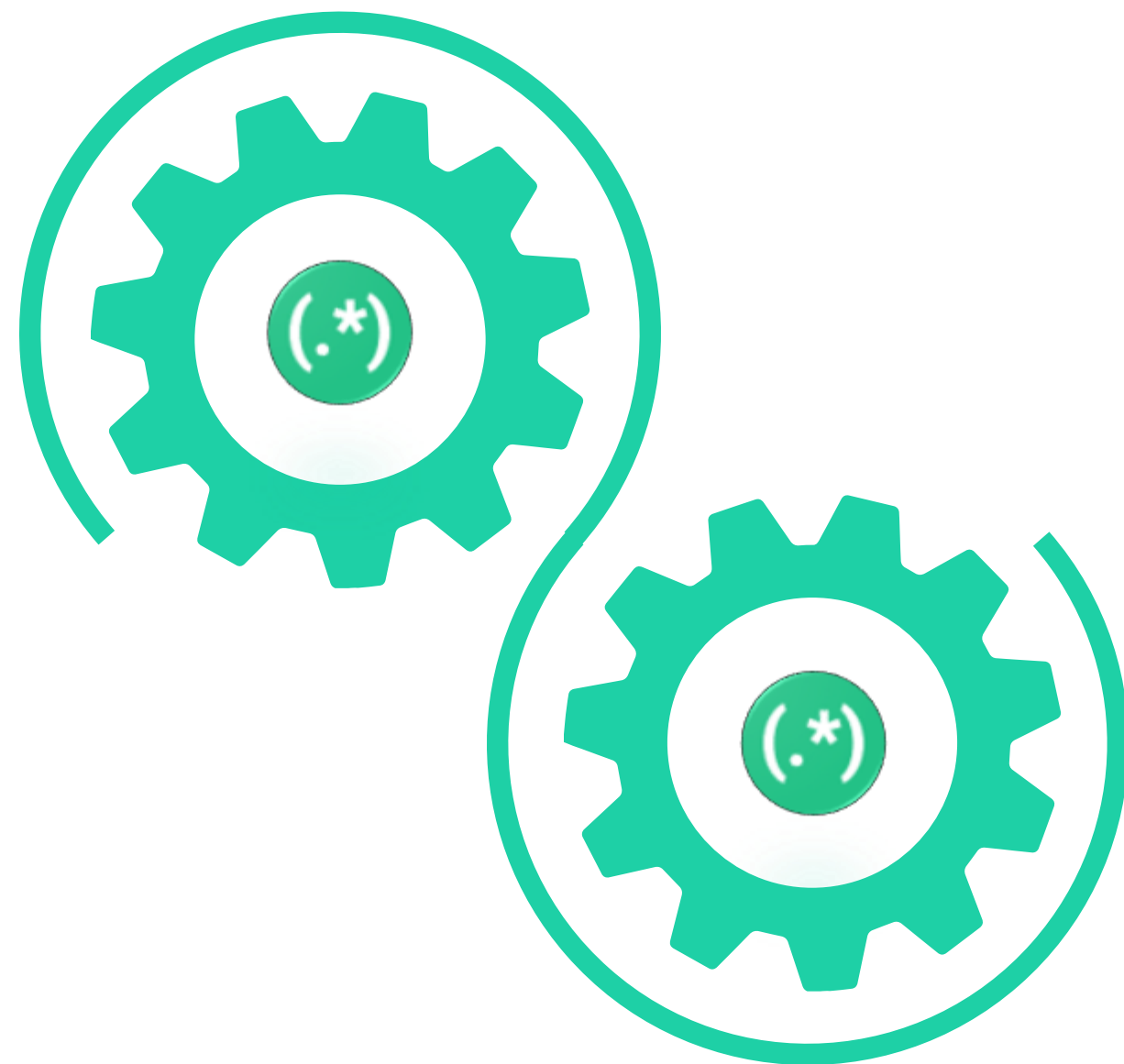
Applications - Cohorting

136 619 Multidisciplinary Team
In total



Applications - Cohorting

136 619 Multidisciplinary Team
In total



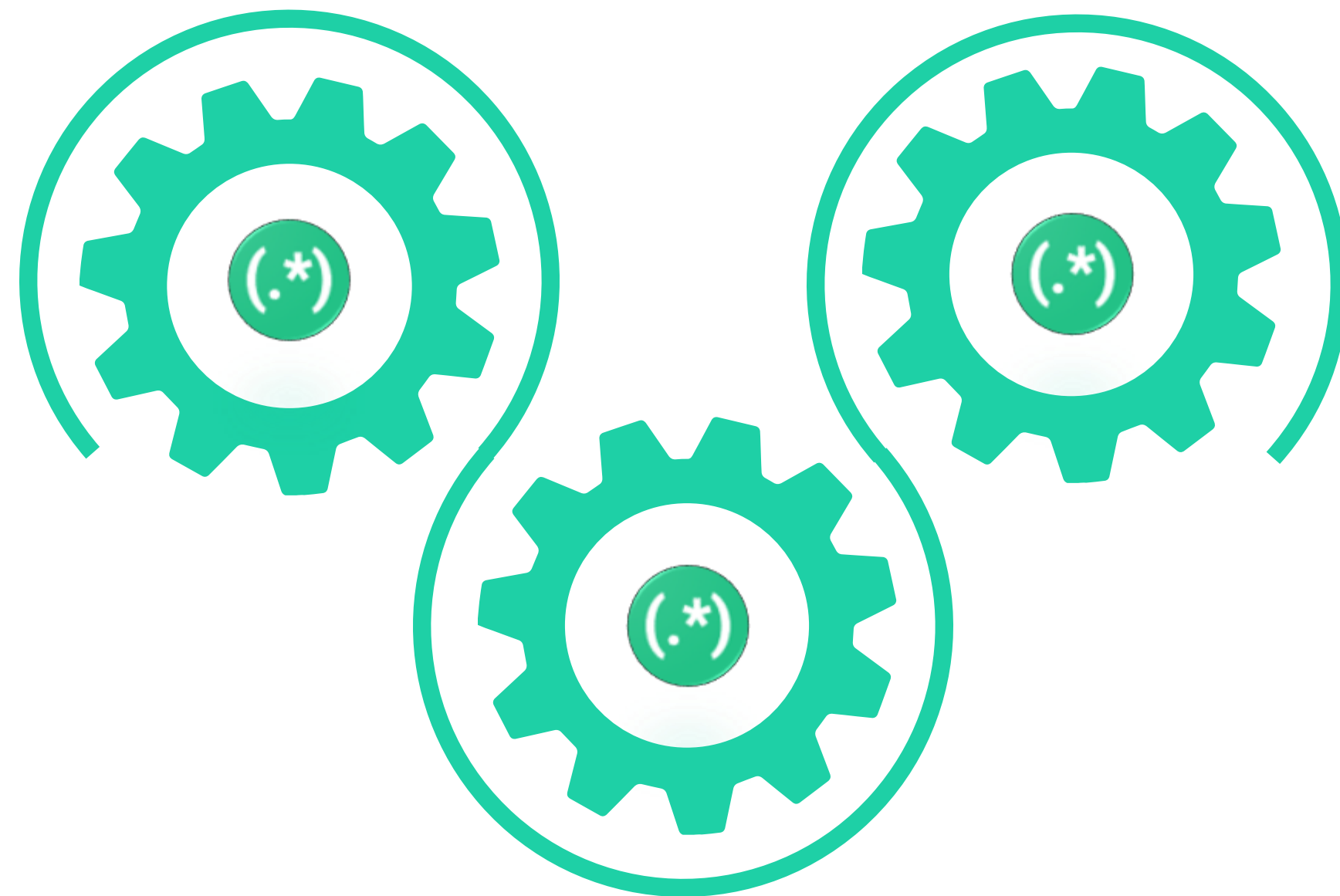
59 679 MDT
2017-2022



Applications - Cohorting

136 619 Multidisciplinary Team
In total

10 787 breast MDT
With notion of surgery and
treatment



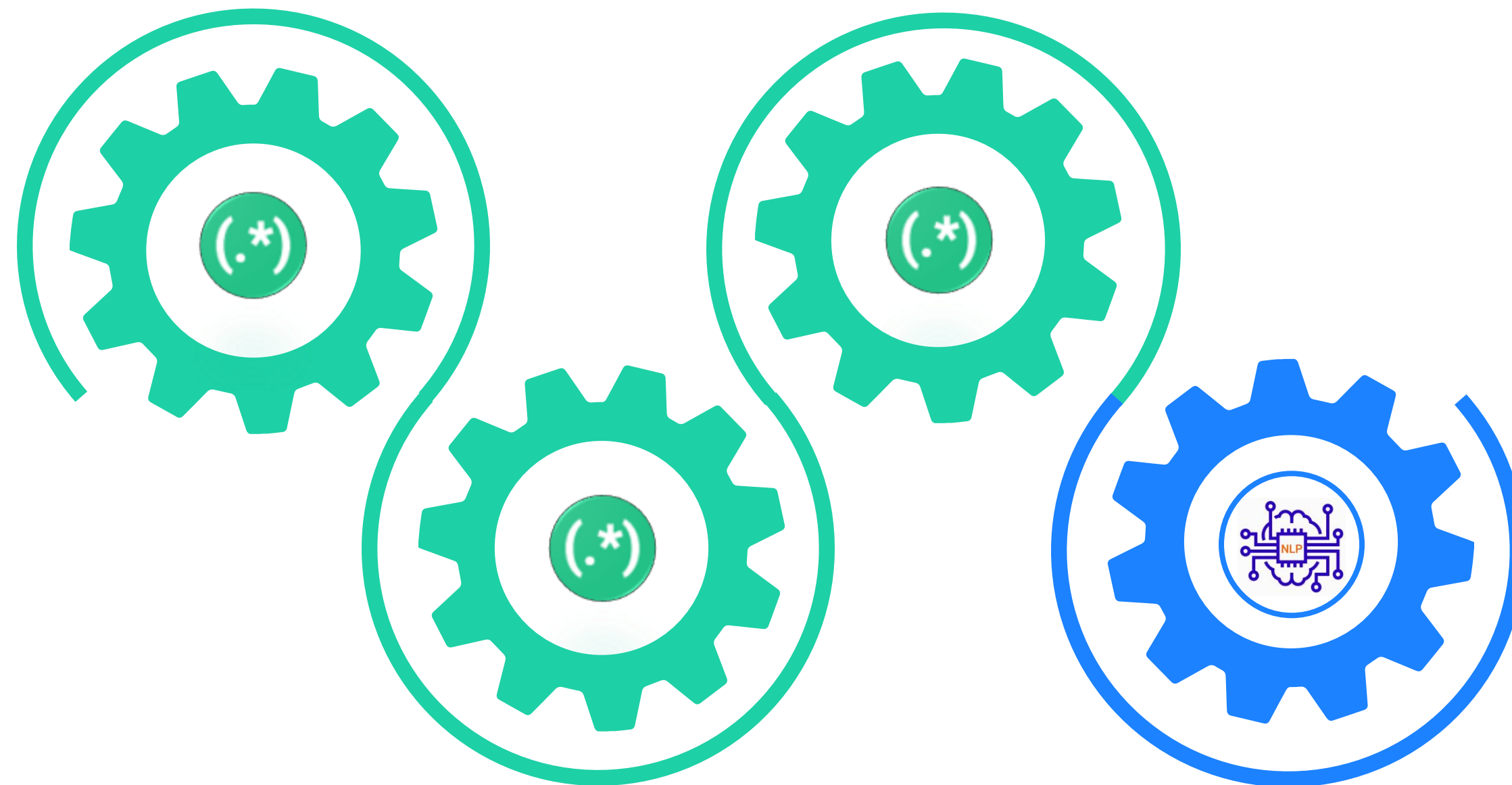
59 679 MDT
2017-2022



Applications - Cohorting

136 619 Multidisciplinary Team
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treatment



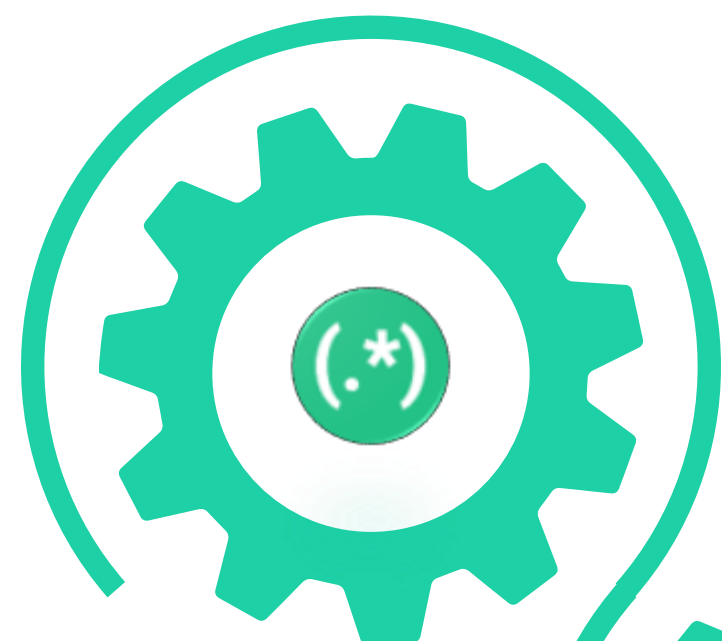
59 679 MDT
2017-2022

5201 Anapath reports
Automatically structured

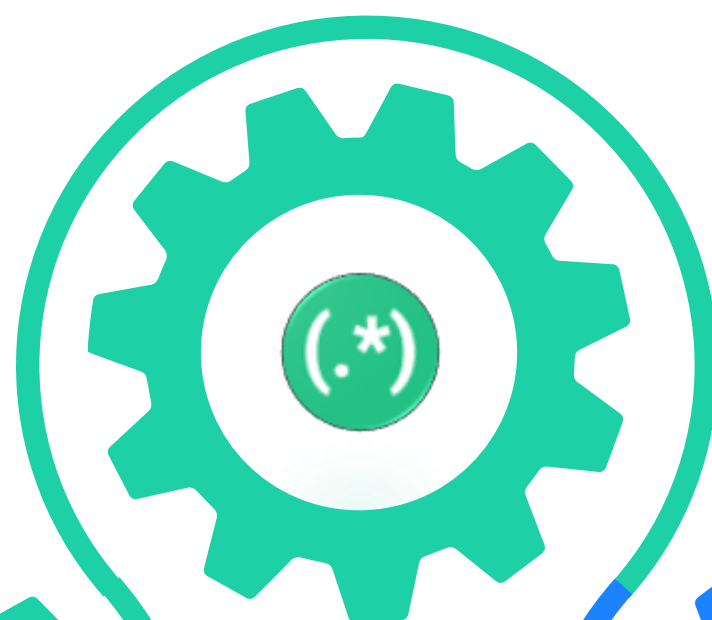


Applications - Cohorting

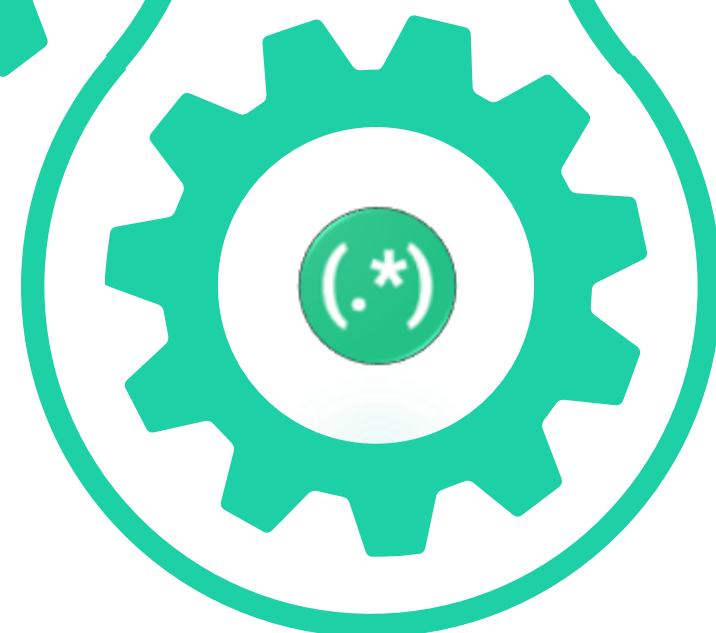
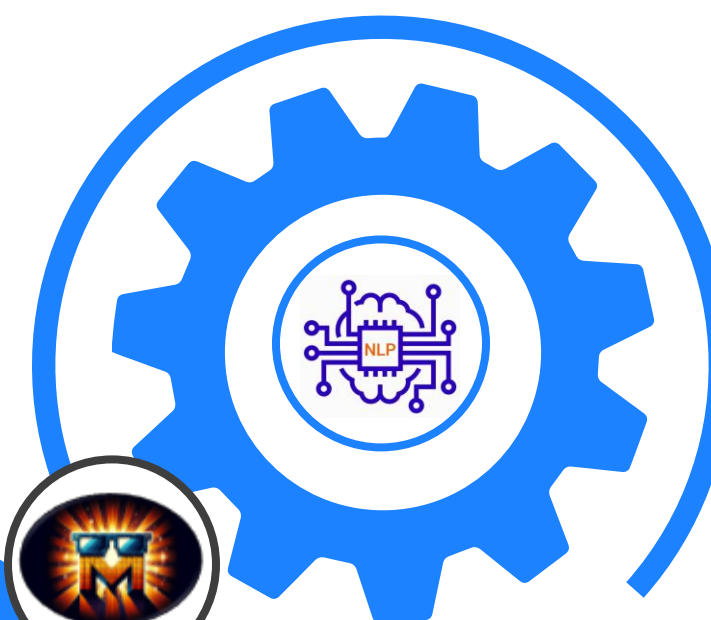
136 619 Multidisciplinary Team
In total



10 787 breast MDT
With notion of surgery and
treatment



241 patients prescreened
To be evaluated



59 679 MDT
2017-2022



5201 Anapath reports
Automatically structured

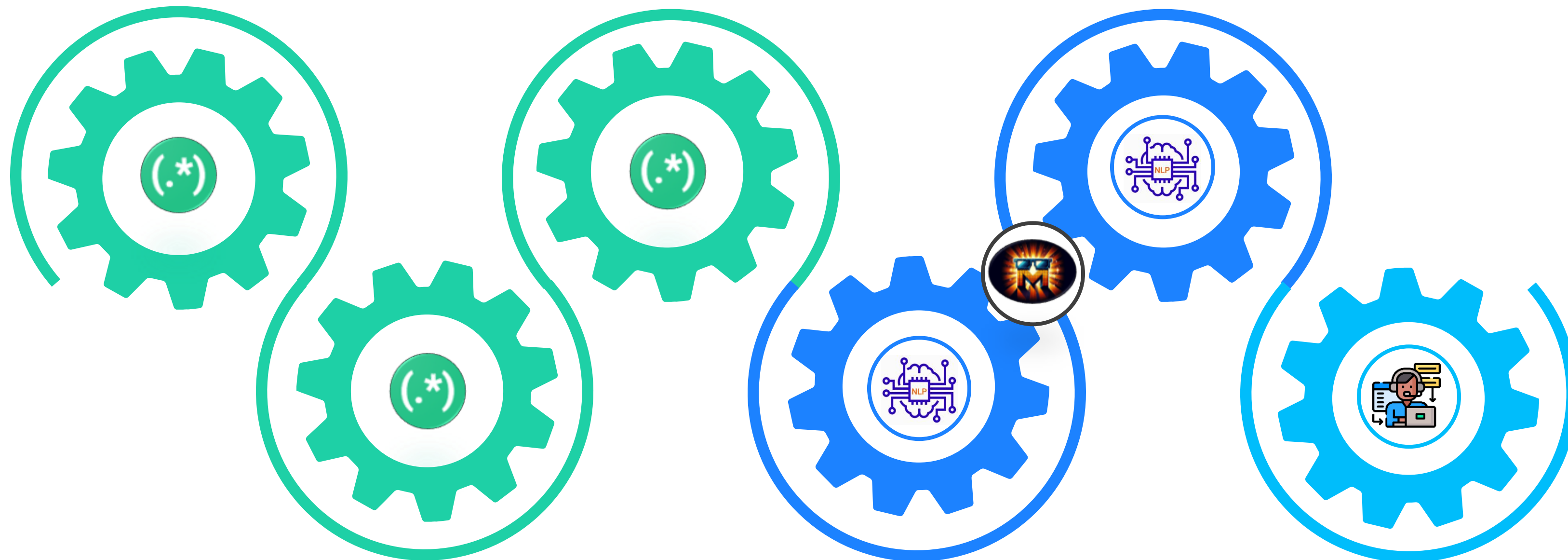


Applications - Cohorting

136 619 Multidisciplinary Team
In total

10 787 breast MDT
With notion of surgery and
treatment

241 patients prescreened
To be evaluated



59 679 MDT
2017-2022

5201 Anapath reports
Automatically structured

58 patients eligible
To be contacted for the study

4 hours

1 hour

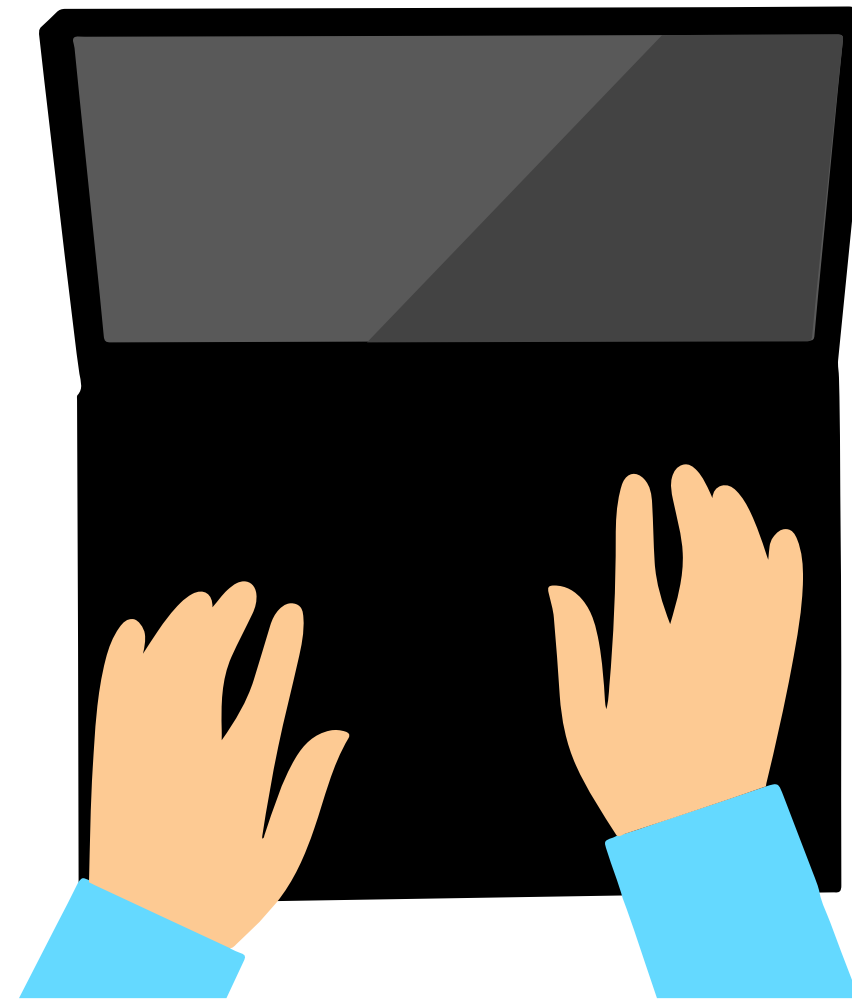
12 hours



Applications - Cohorting

EMBER-4

TRAK-ER

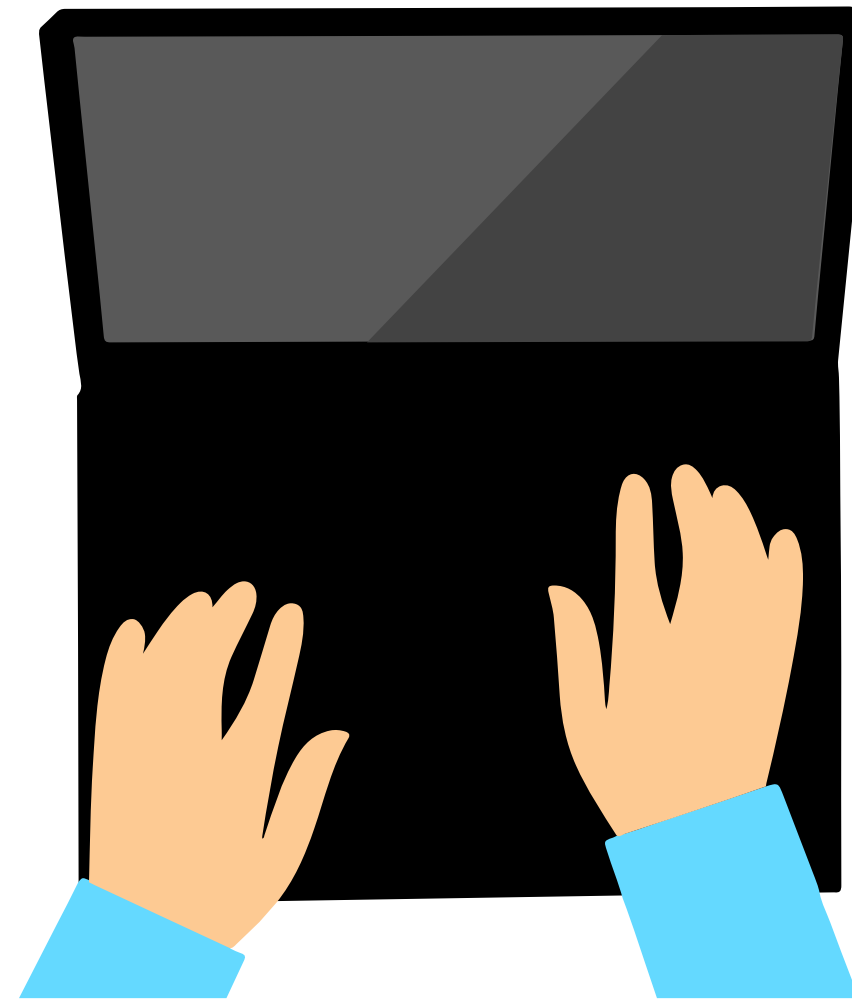


Applications - Cohorting

EMBER-4

TRAK-ER

25 refused to sign



Applications - Cohorting

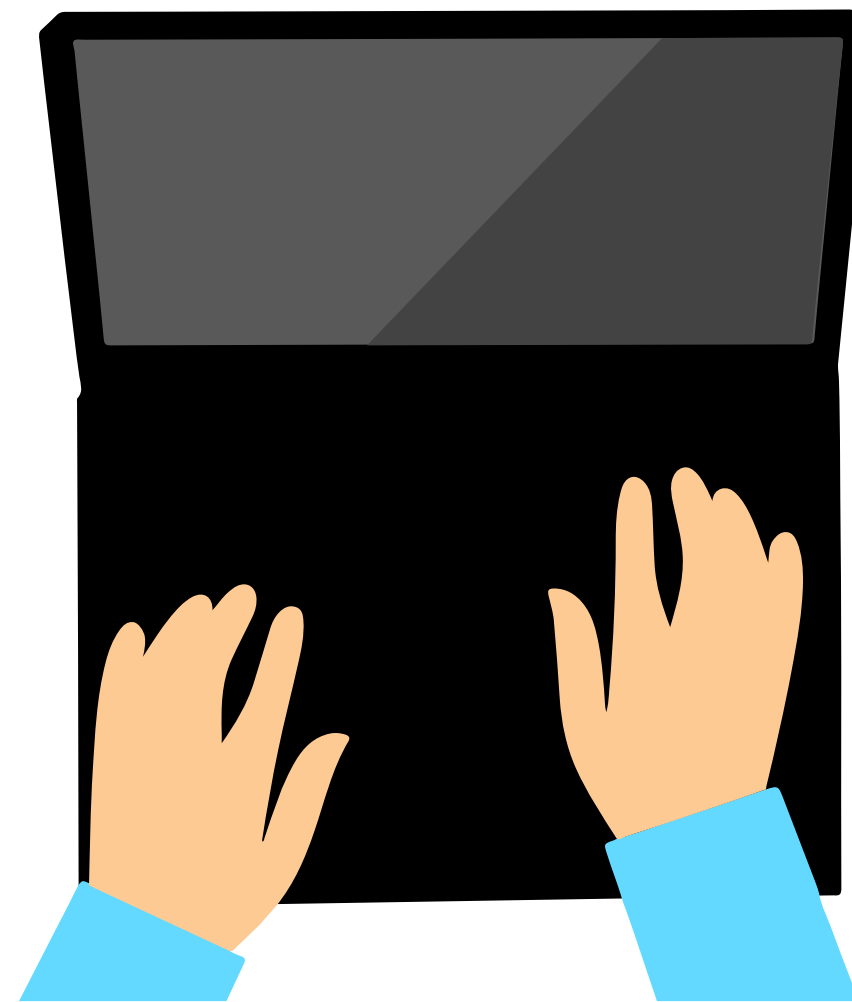
EMBER-4

TRAK-ER

25 refused to sign



1 inclusion error



Applications - Cohorting

EMBER-4

25 refused to sign

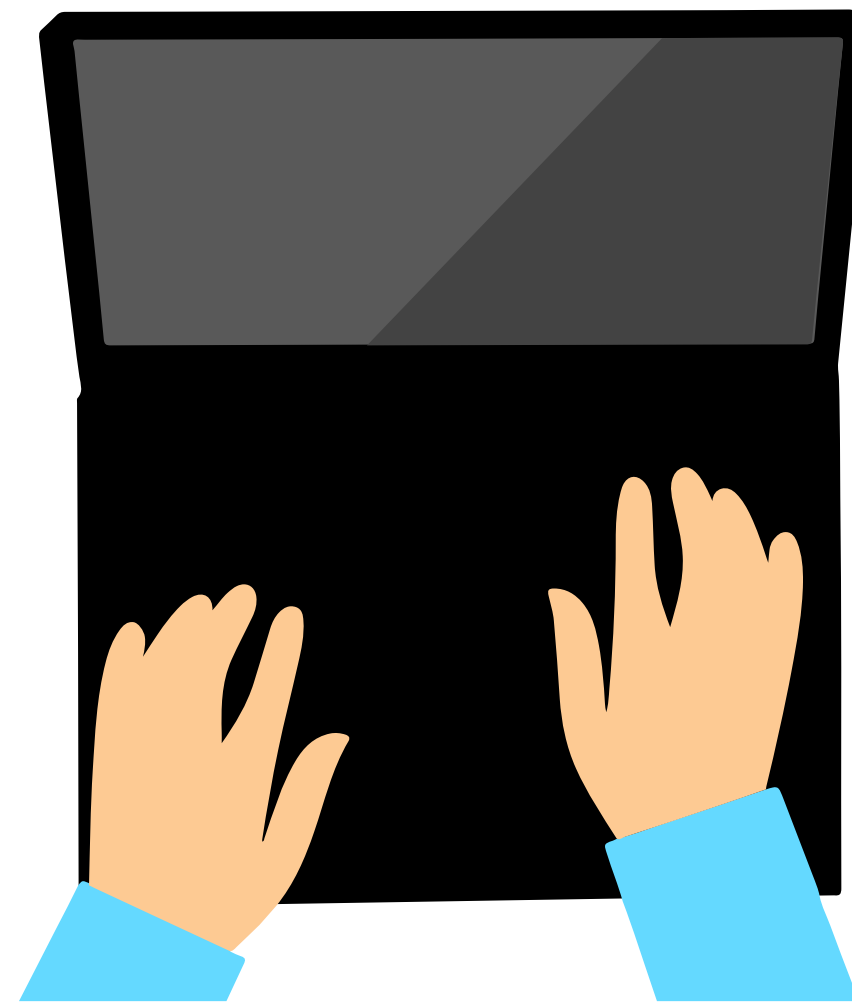


1 inclusion error





TRAK-ER

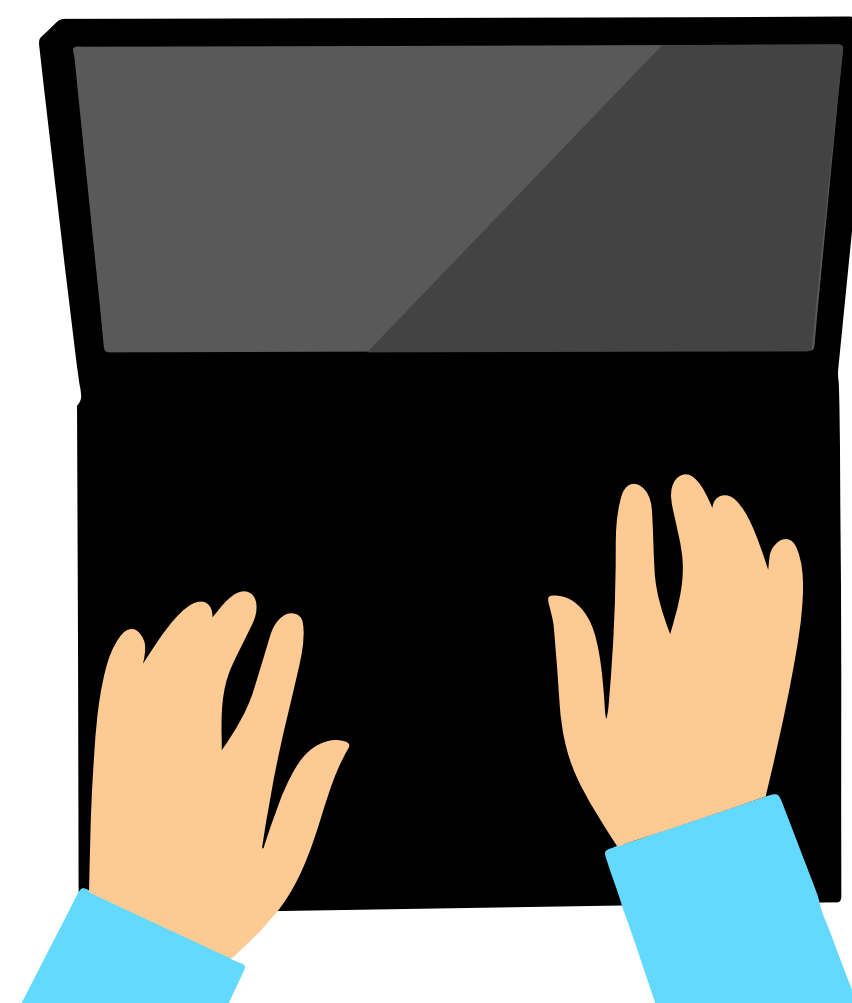
7 screenfailures





Applications - Cohorting

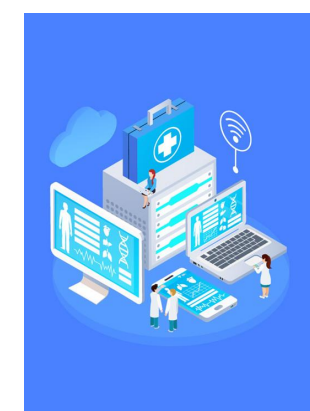
EMBER-4

- 25 refused to sign 
- 1 inclusion error 





TRAK-ER

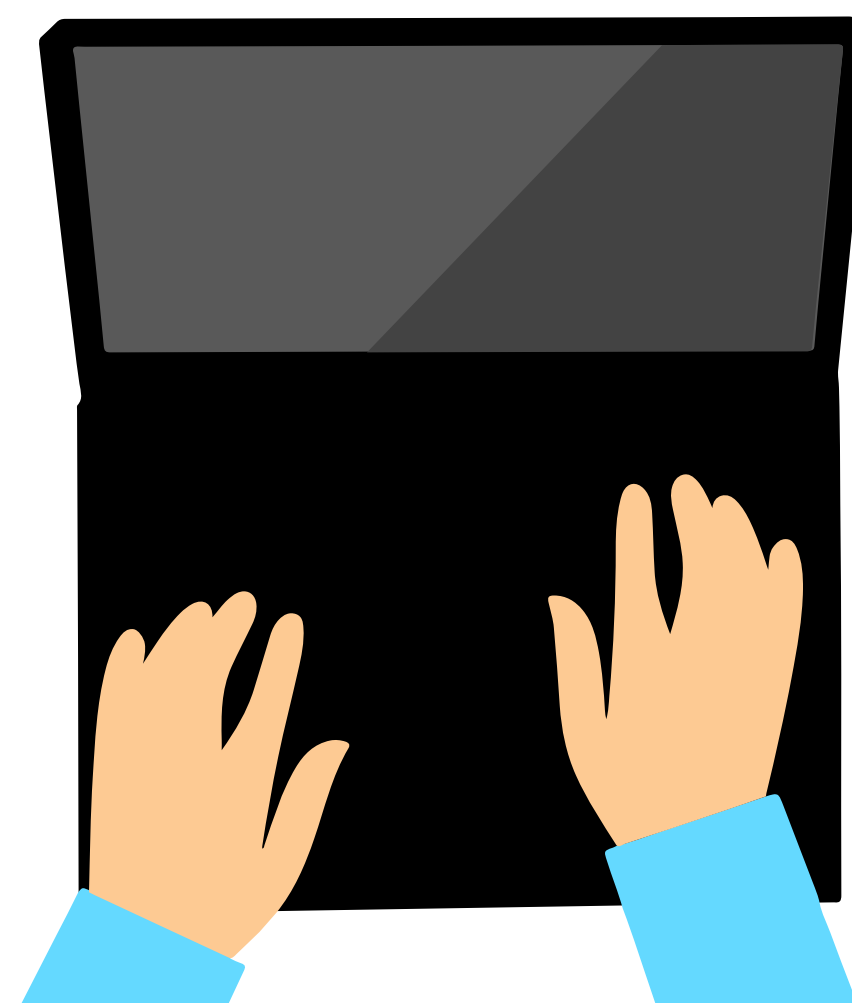
-  7 screenfailures
-  2 are being screened






Applications - Cohorting

EMBER-4

- 25 refused to sign 
- 1 inclusion error 





TRAK-ER

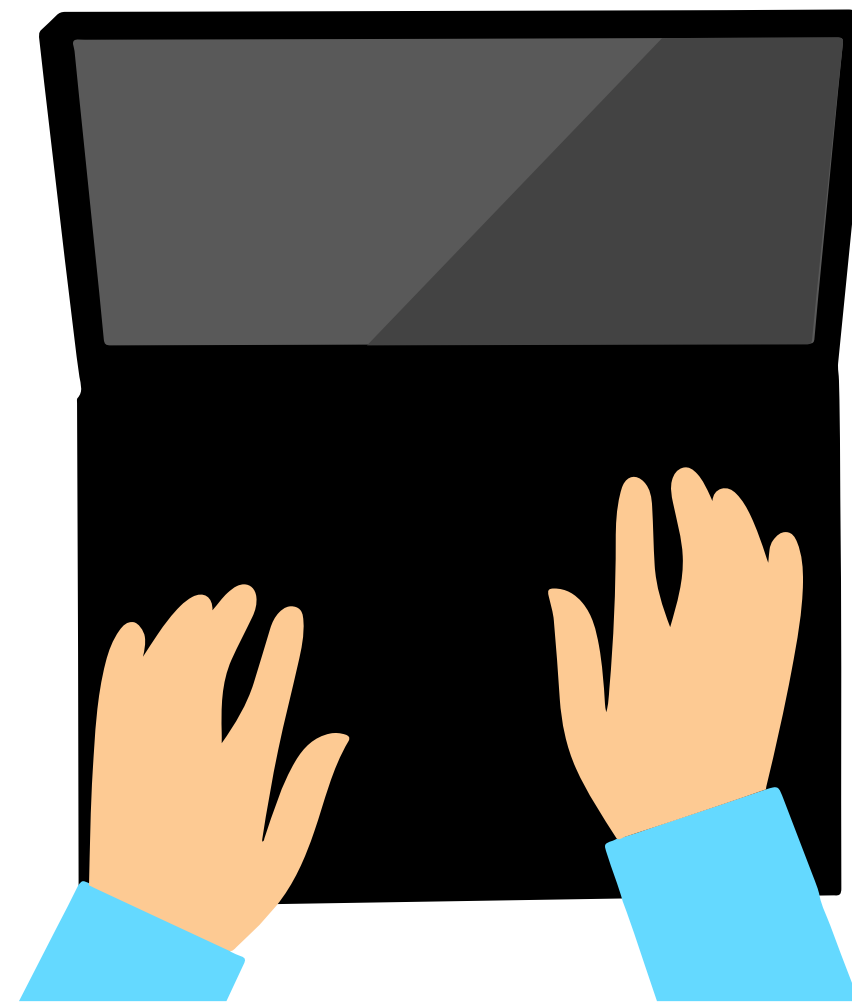
-  7 screenfailures
-  2 are being screened
-  2 are waiting to sign







Applications - Cohorting

EMBER-4

- 25 refused to sign 
- 1 inclusion error 



TRAK-ER

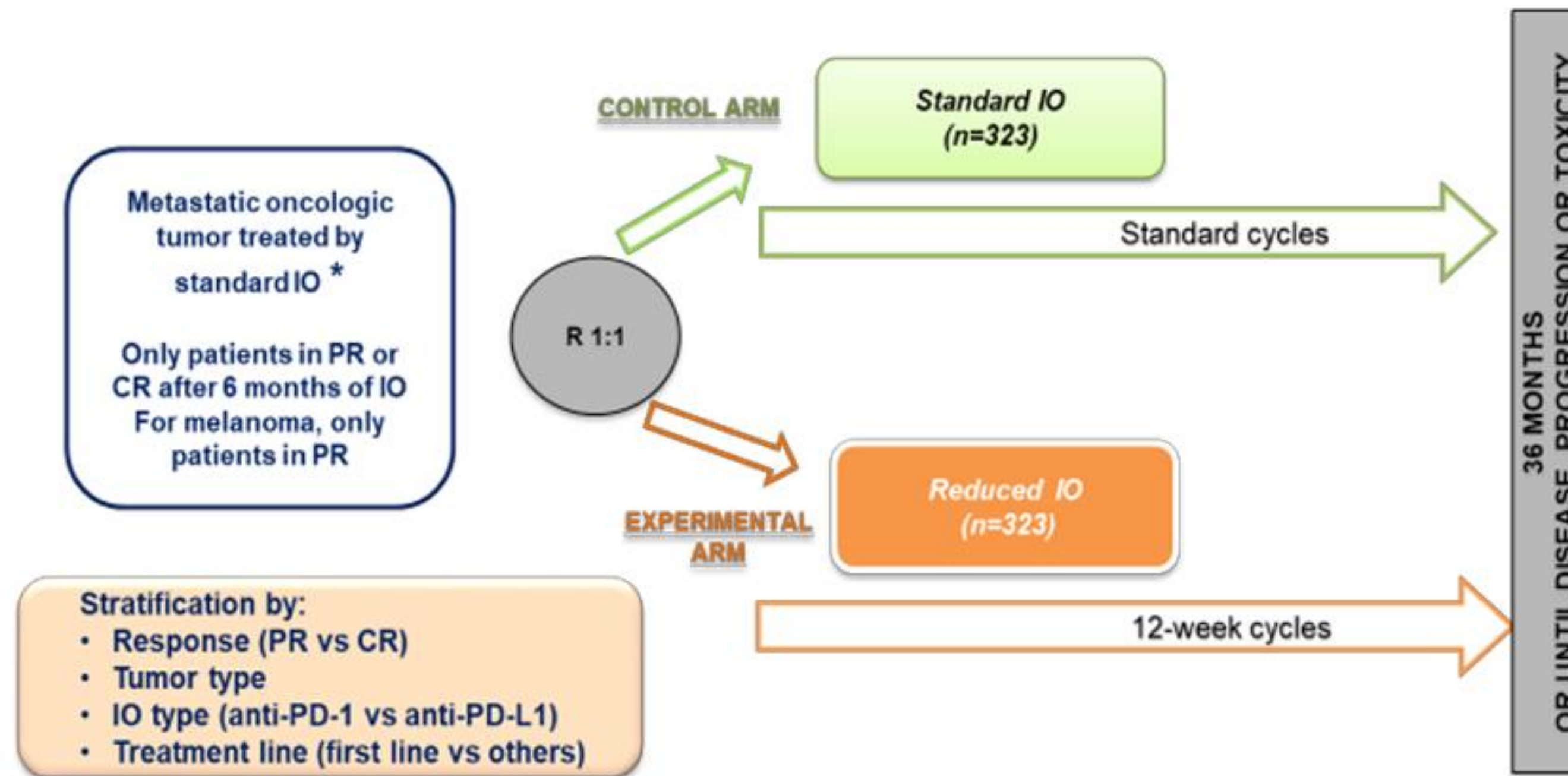
-  7 screenfailures
-  2 are being screened
-  2 are waiting to sign
-  21 included



unicancer

Essai randomisé de phase III comparant l'immunothérapie (IO) standard, par inhibiteurs des points de contrôle immunitaire, versus une diminution de la dose intensité de l'IO chez les patients ayant un cancer métastatique en réponse après 6 mois d'IO standard.

TRIAL SCHEMA



IO monotherapy or in combination

*Except mRCC patients with IMDC favourable risk treated TKI/IO combination

Applications – Cohorting automatique MOIO

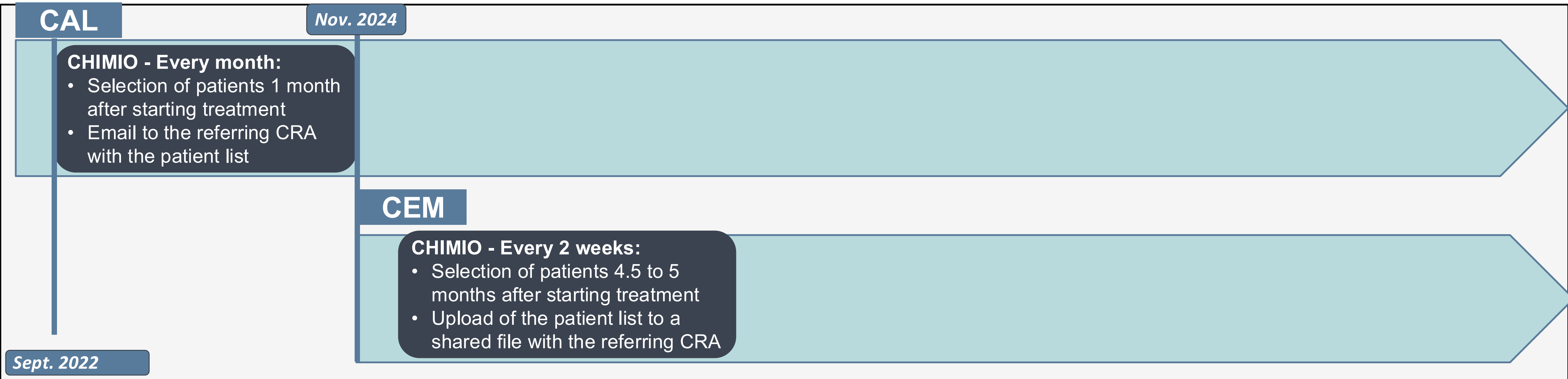
CAL

CHIMIO - Every month:

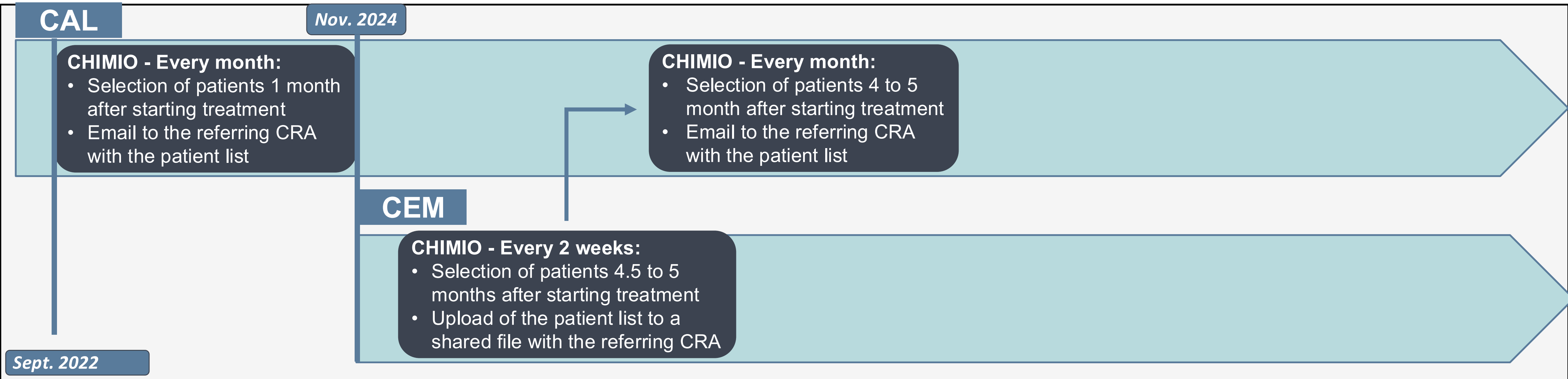
- Selection of patients 1 month after starting treatment
- Email to the referring CRA with the patient list

Sept. 2022

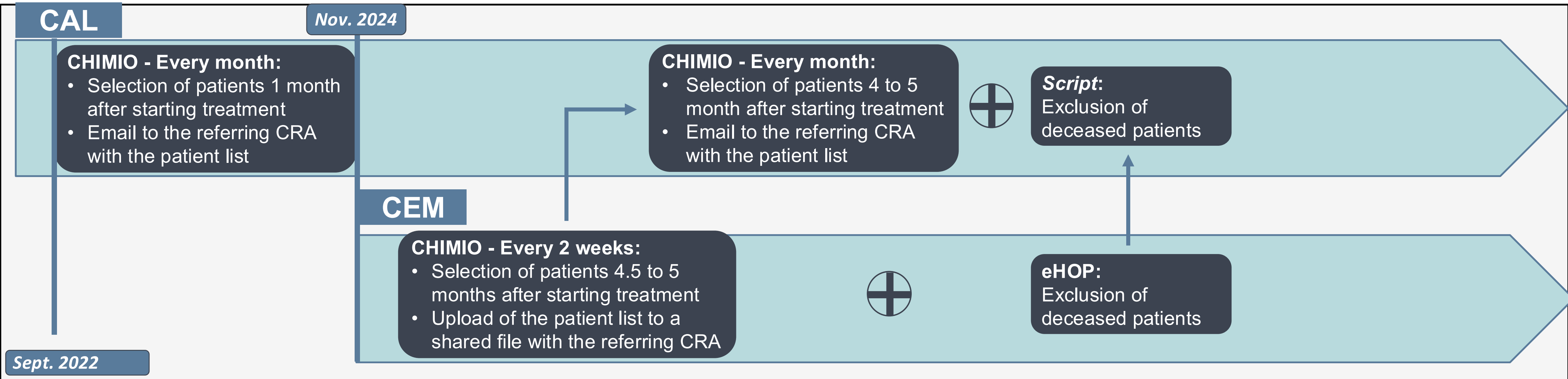
Applications – Cohorting automatique MOIO



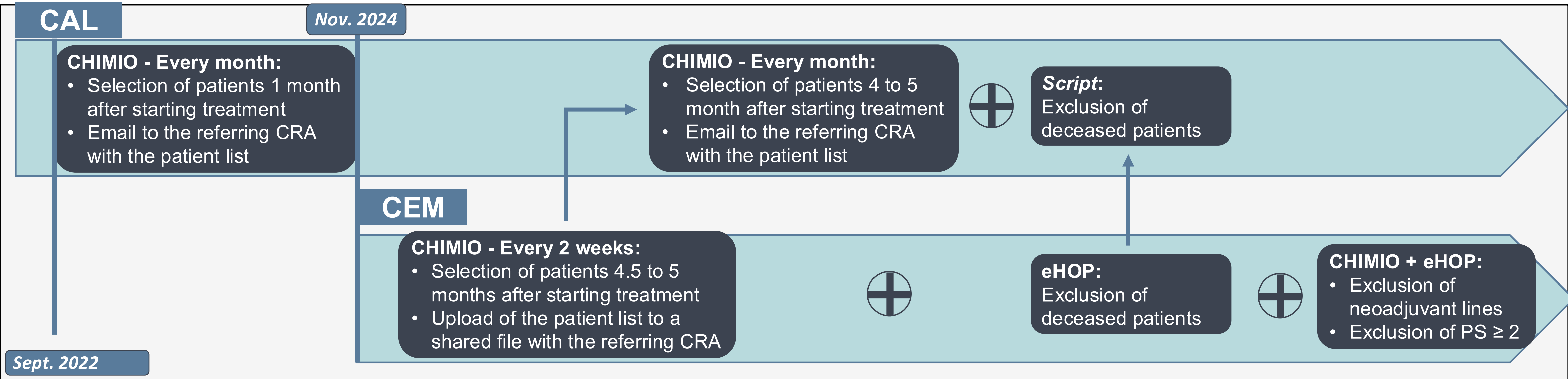
Applications – Cohorting automatique MOIO



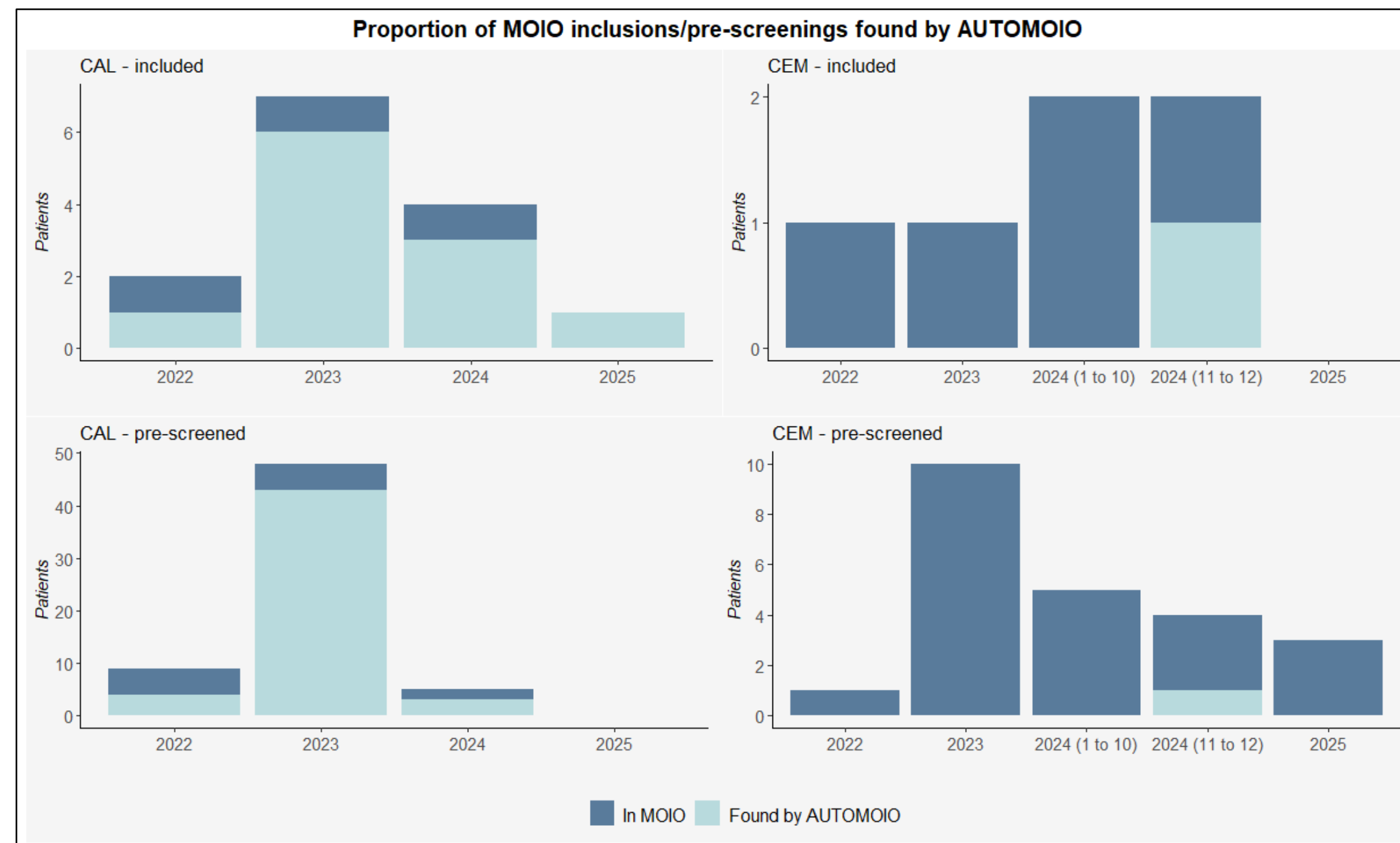
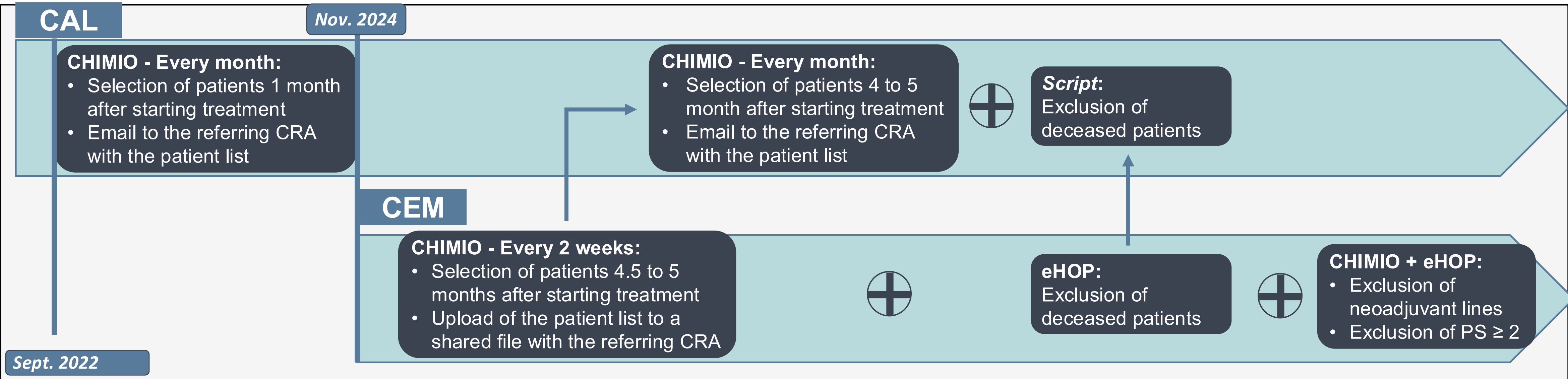
Applications – Cohorting automatique MOIO

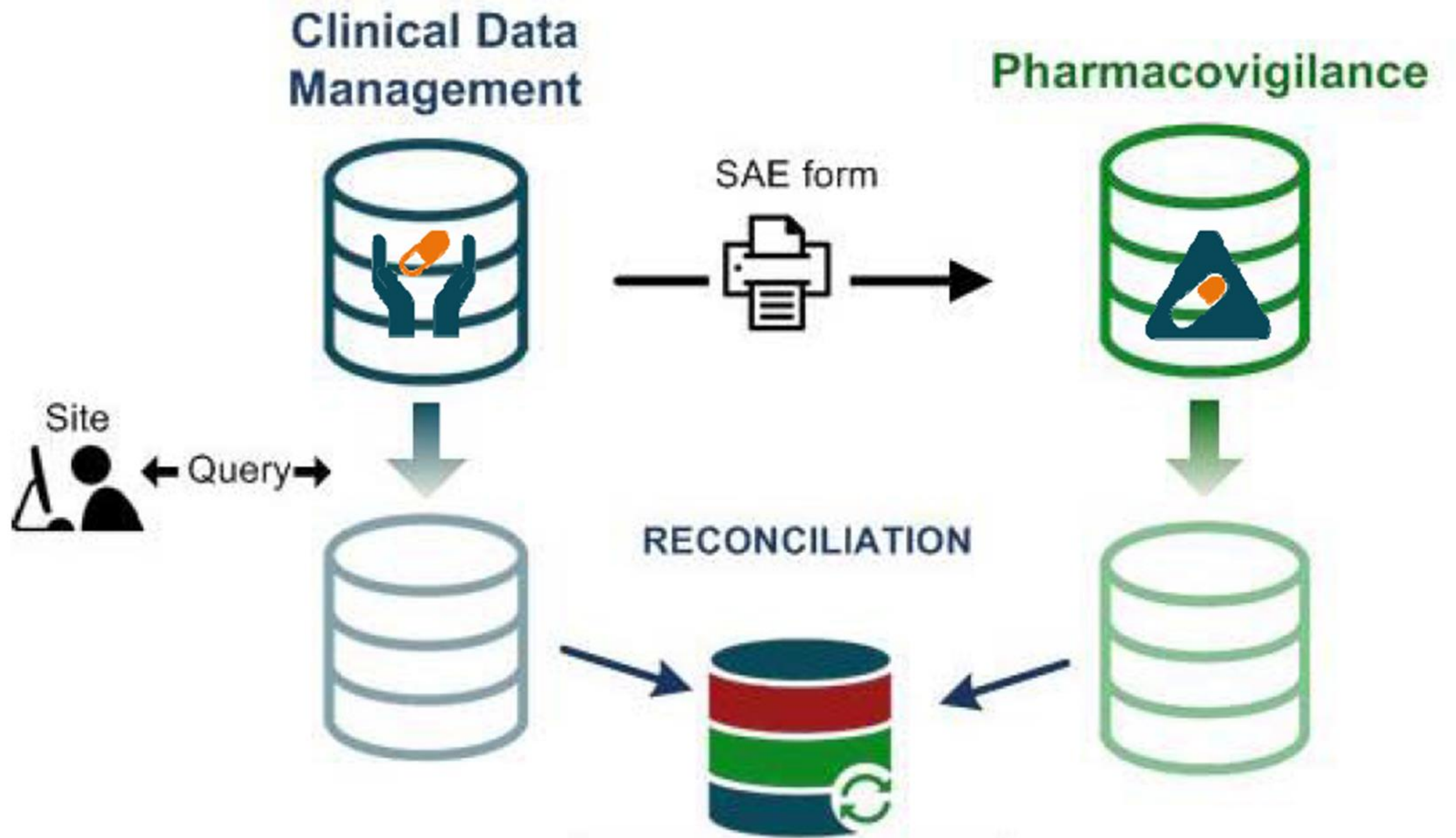


Applications – Cohorting automatique MOIO



Applications – Cohorting automatique MOIO





Applications – Réconciliation EIG semi-automatique

RECONCILIAID

Study name (Reconciliation number)	NCT number	Total SAEs	Reconciliaid mismatches	Reconciliaid execution time (s)	Reconciliaid total time (min)	Manual total time (min)
Dpdmax (1)	NCT04198727	2	0	0.8	1	6
Fdgimmun (1)	NCT03584334	23	1	0.9	3	50
Fdgimmun (1)*					13	60
Icar (1)	NCT03467360	4	0	0.2	1	10
Iodine (1)	NCT02759133	1	0	0.2	1	3
Opera (1)	NCT02505750	15	1	0.4	3	40
Opera (1)*					11	55
Pazoglio (1)	NCT02331498	8	0	0.3	2	20
Dpdmax (2)	NCT04198727	3	0	0.3	1	5
Dpdmax (2)*					5	19
Fdgimmun (2)	NCT03584334	24	1	0.7	3	50
Halo (1)	NCT02467946	189	5	4.4	15	360
Icar (2)	NCT03467360	4	0	0.2	1	10
Iodine (2)	NCT02759133	1	0	0.2	1	3
Neoscreencovid (2)	NCT04492410	1	0	0.1	1	3
Opera (2)	NCT02505750	15	0	0.5	3	40

Asterisks refer to studies performed by a less experienced user and are execution time is not considered for the evaluation of the average results. SAE, serious adverse event.

it with
 TAZOL
 VIDE
 SONABL
 BABLEM
 SONABL
 BABLEM
 REASON
 BABLEM



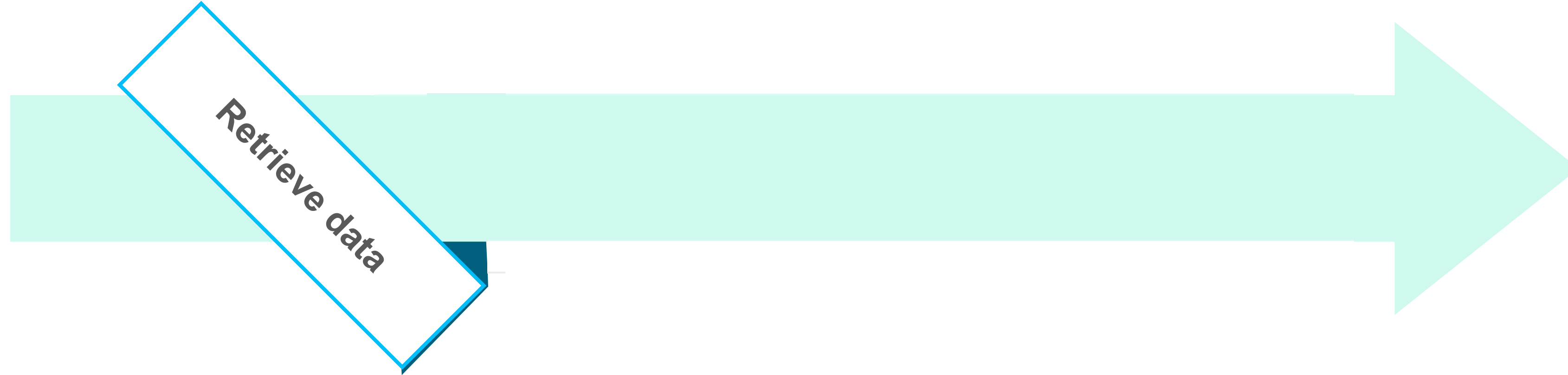
Applications – Remplissage automatique AUTOMABIO



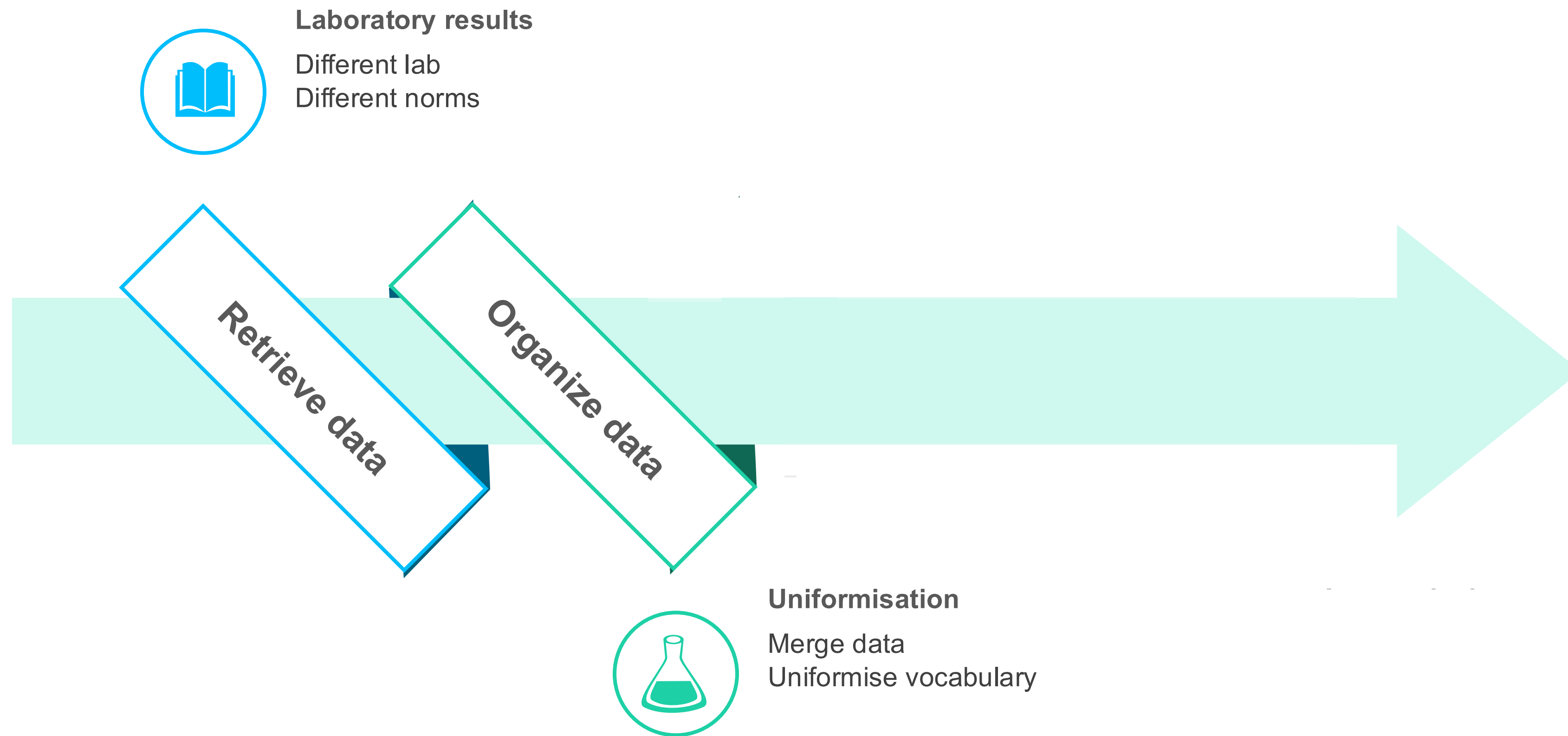
Laboratory results

Different lab
Different norms

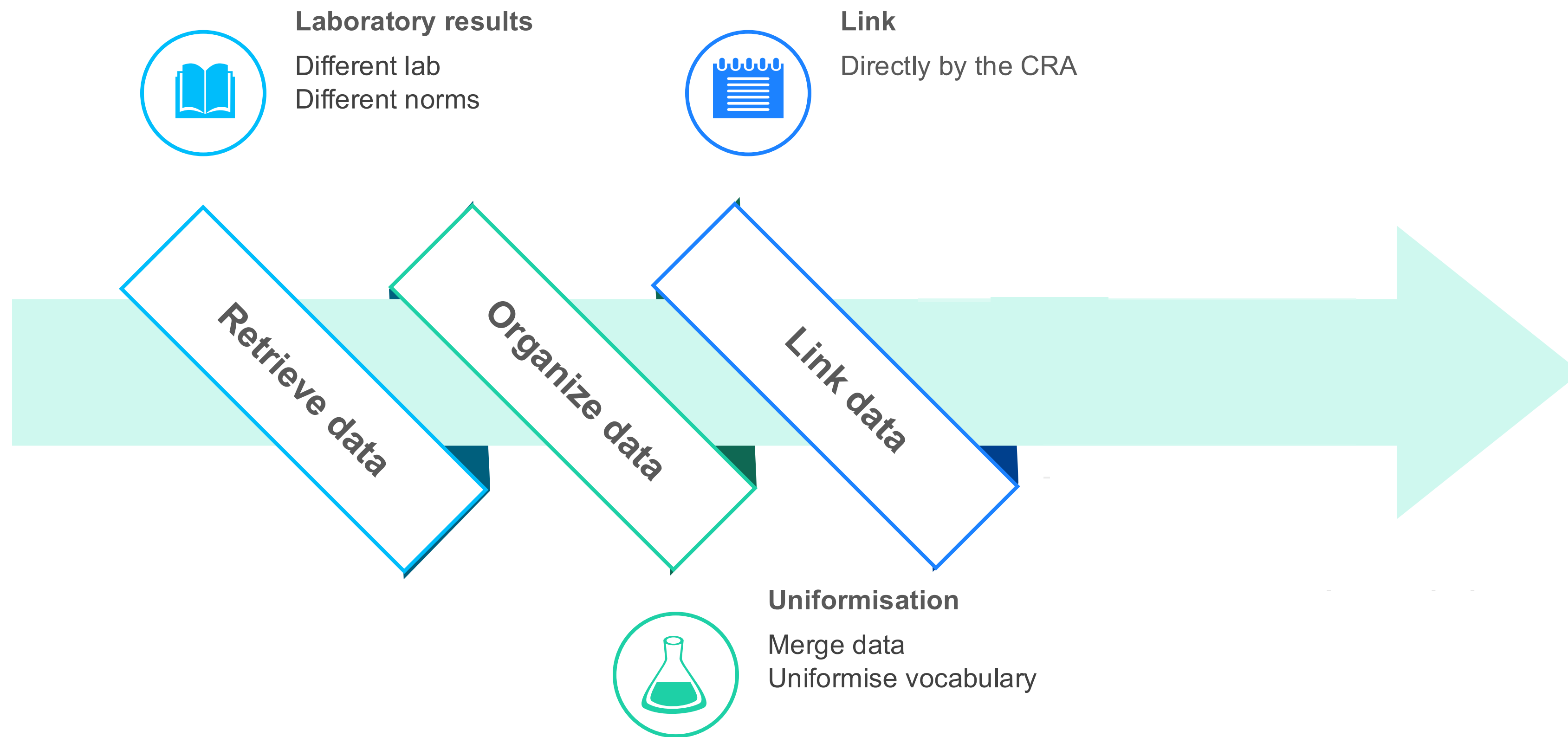
Retrieve data



Applications – Remplissage automatique AUTOMABIO

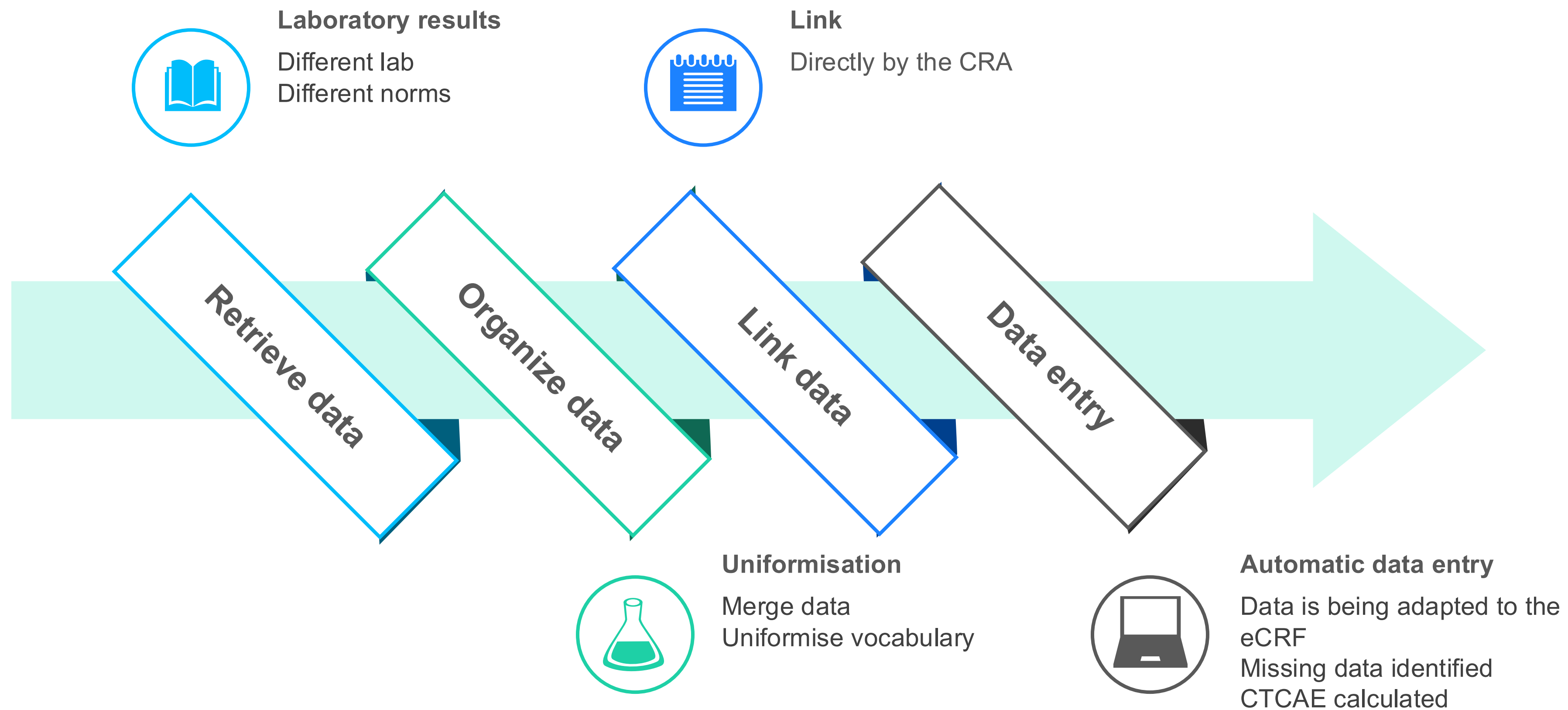


Applications – Remplissage automatique AUTOMABIO



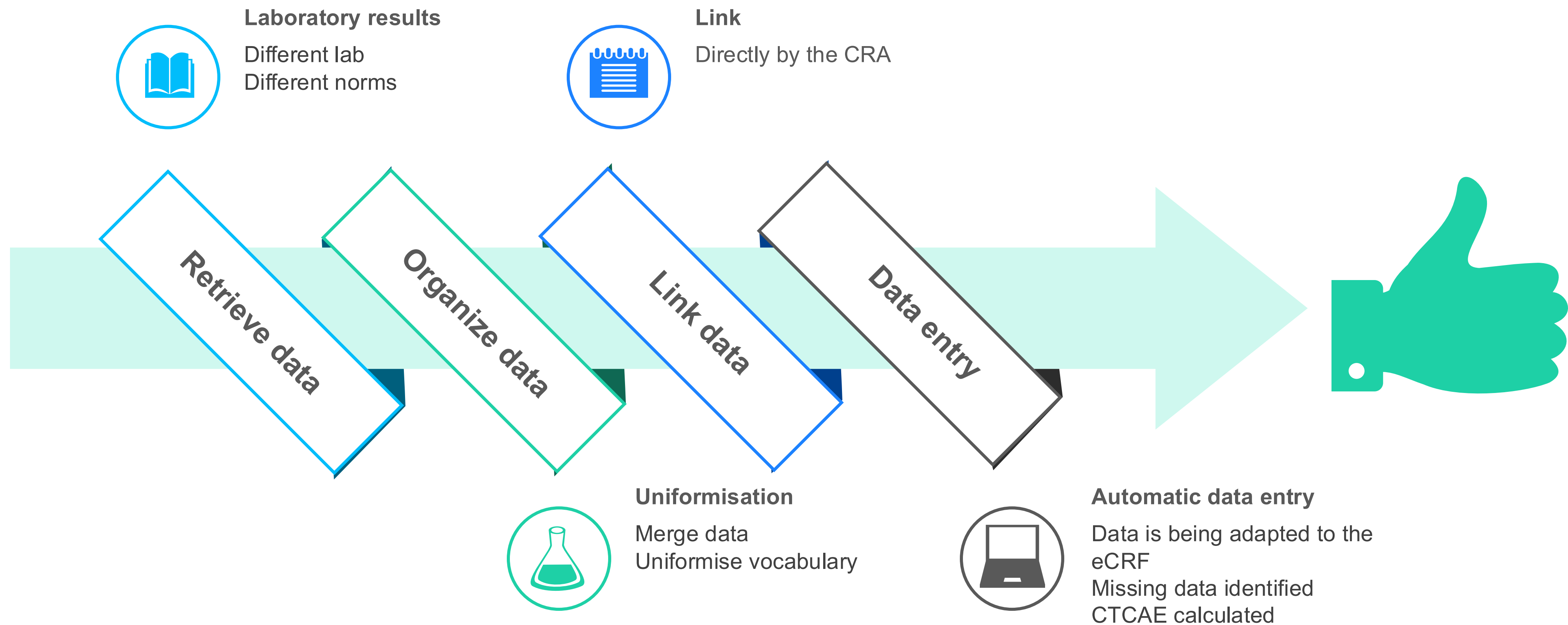
Applications – Remplissage automatique

AUTOMABIO

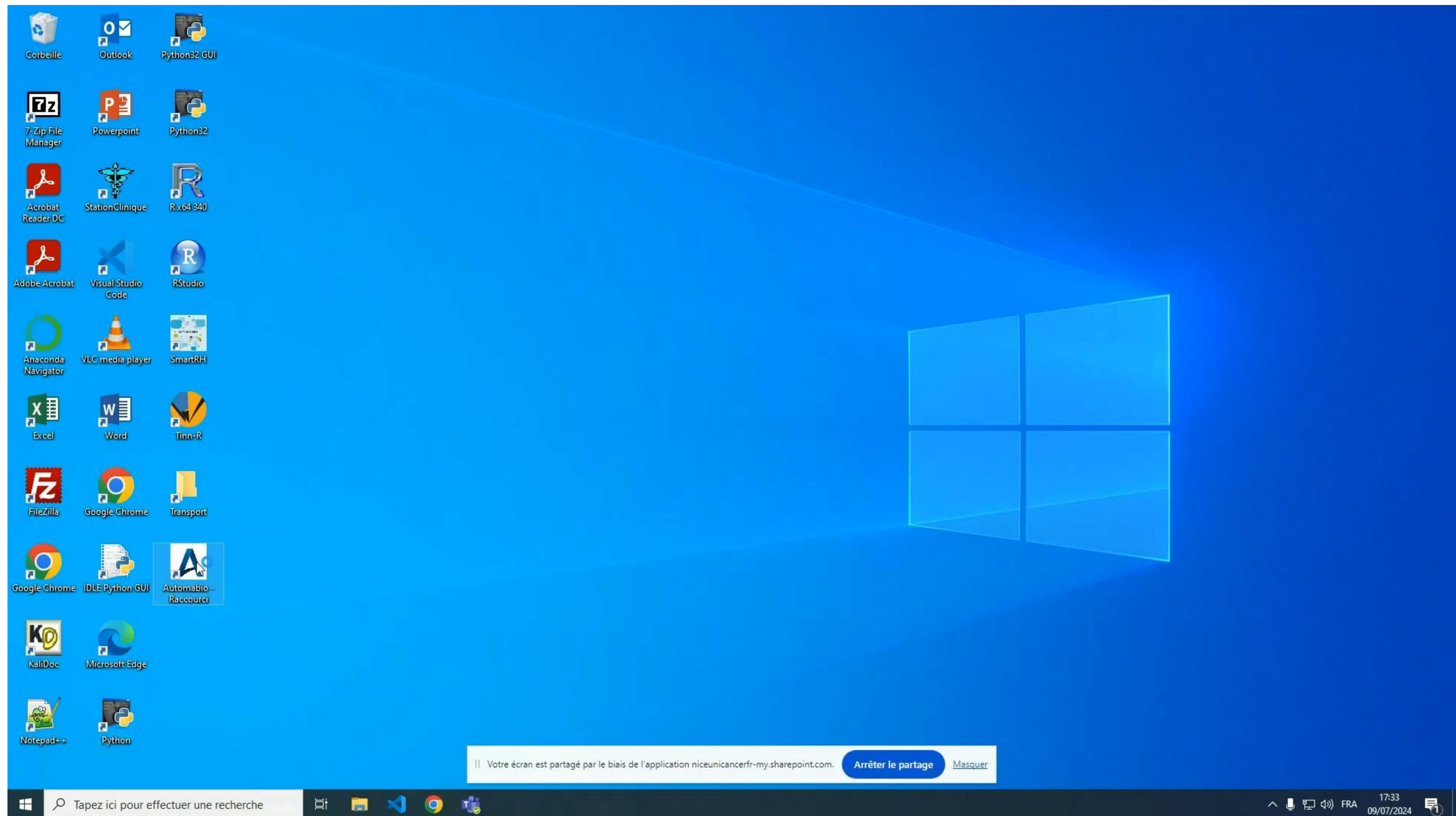


Applications – Remplissage automatique

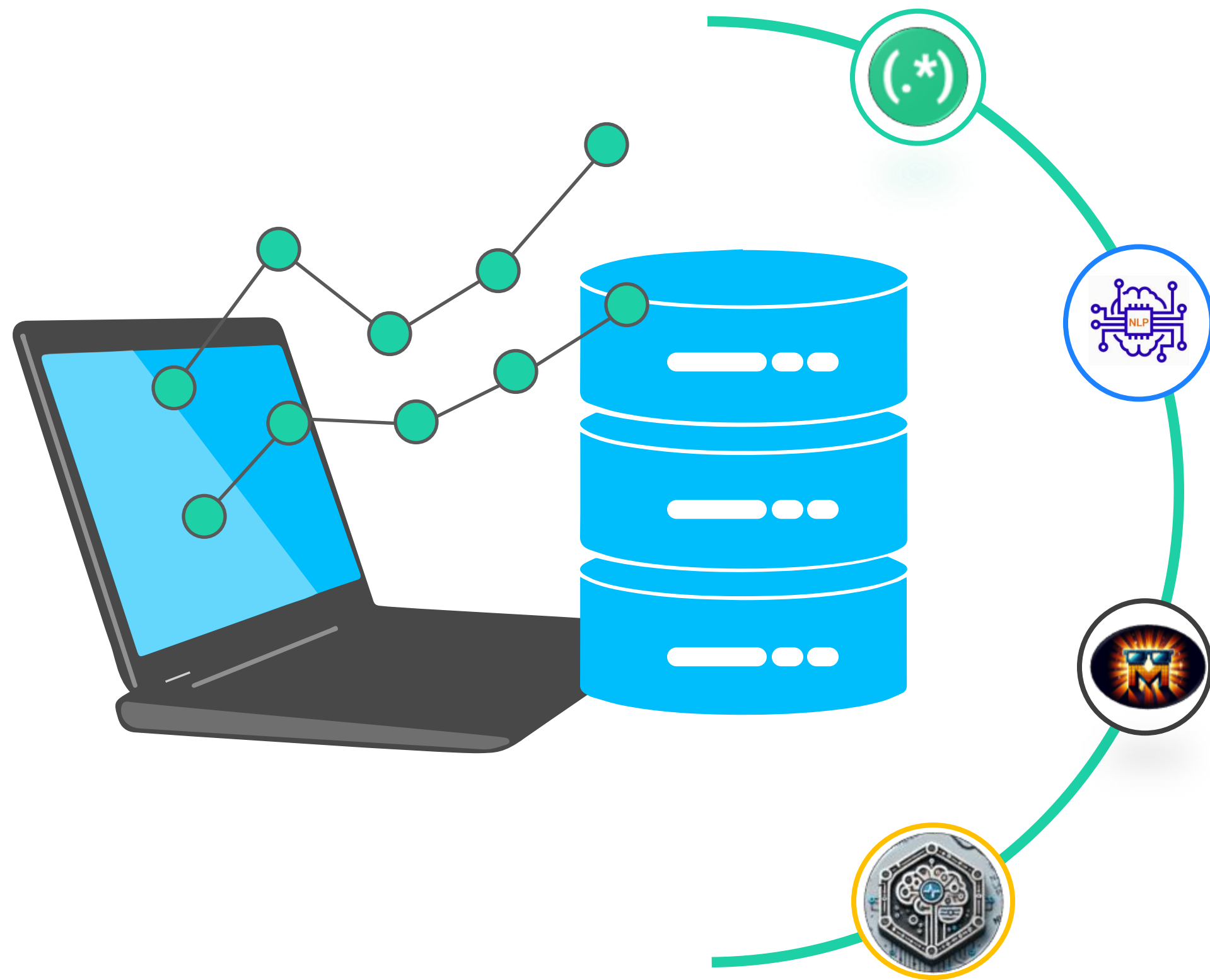
AUTOMABIO



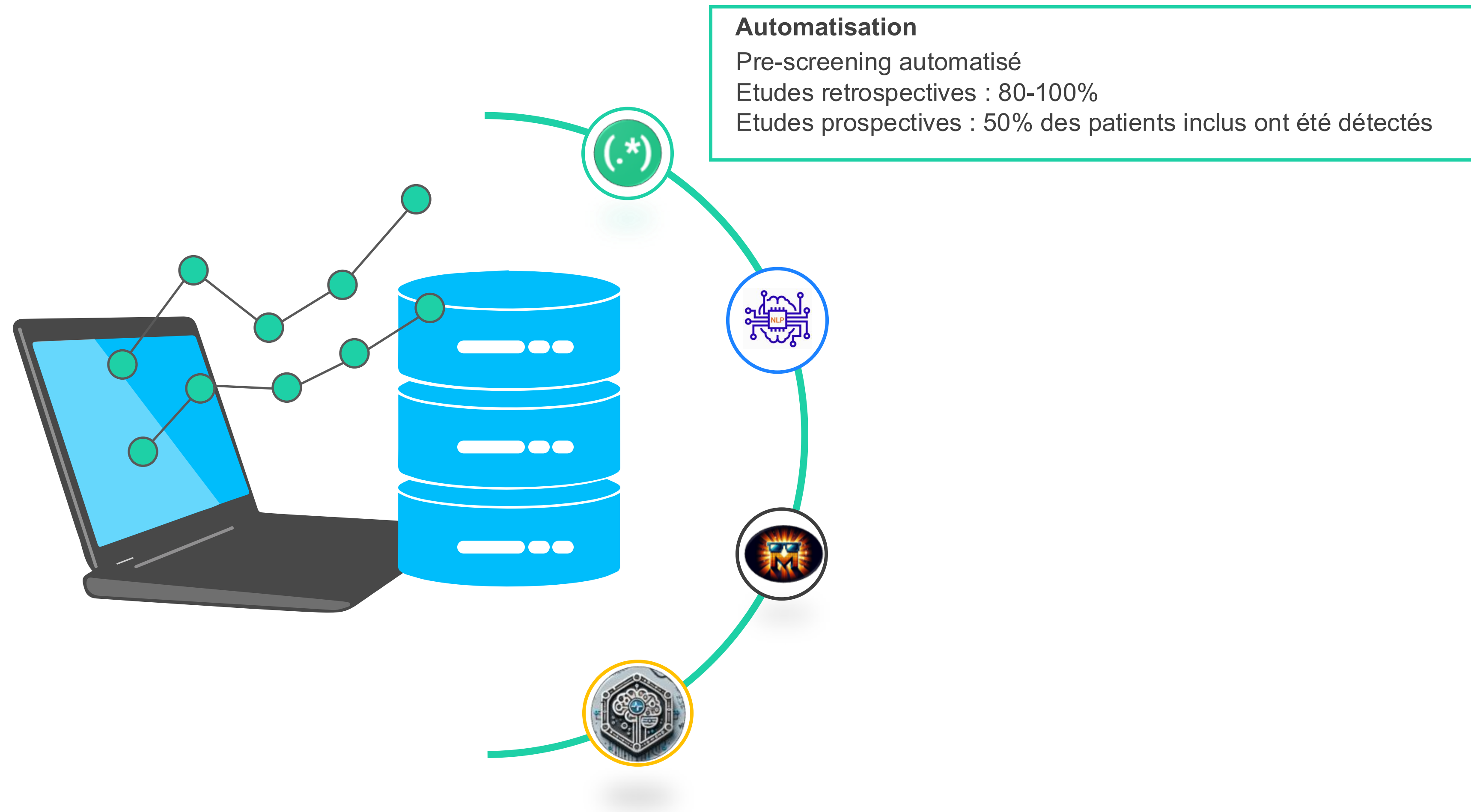
Applications – Remplissage automatique AUTOMABIO



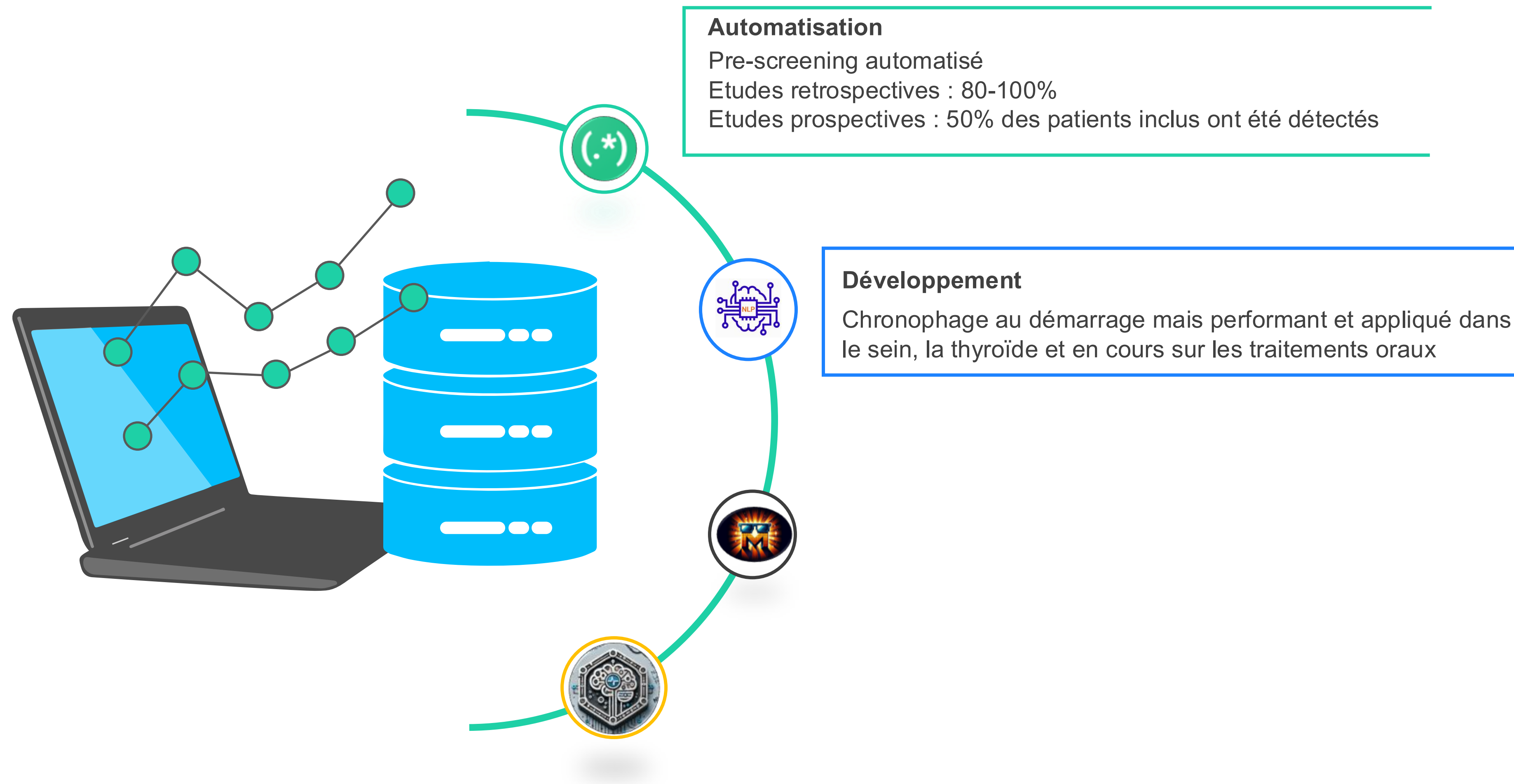
Conclusion



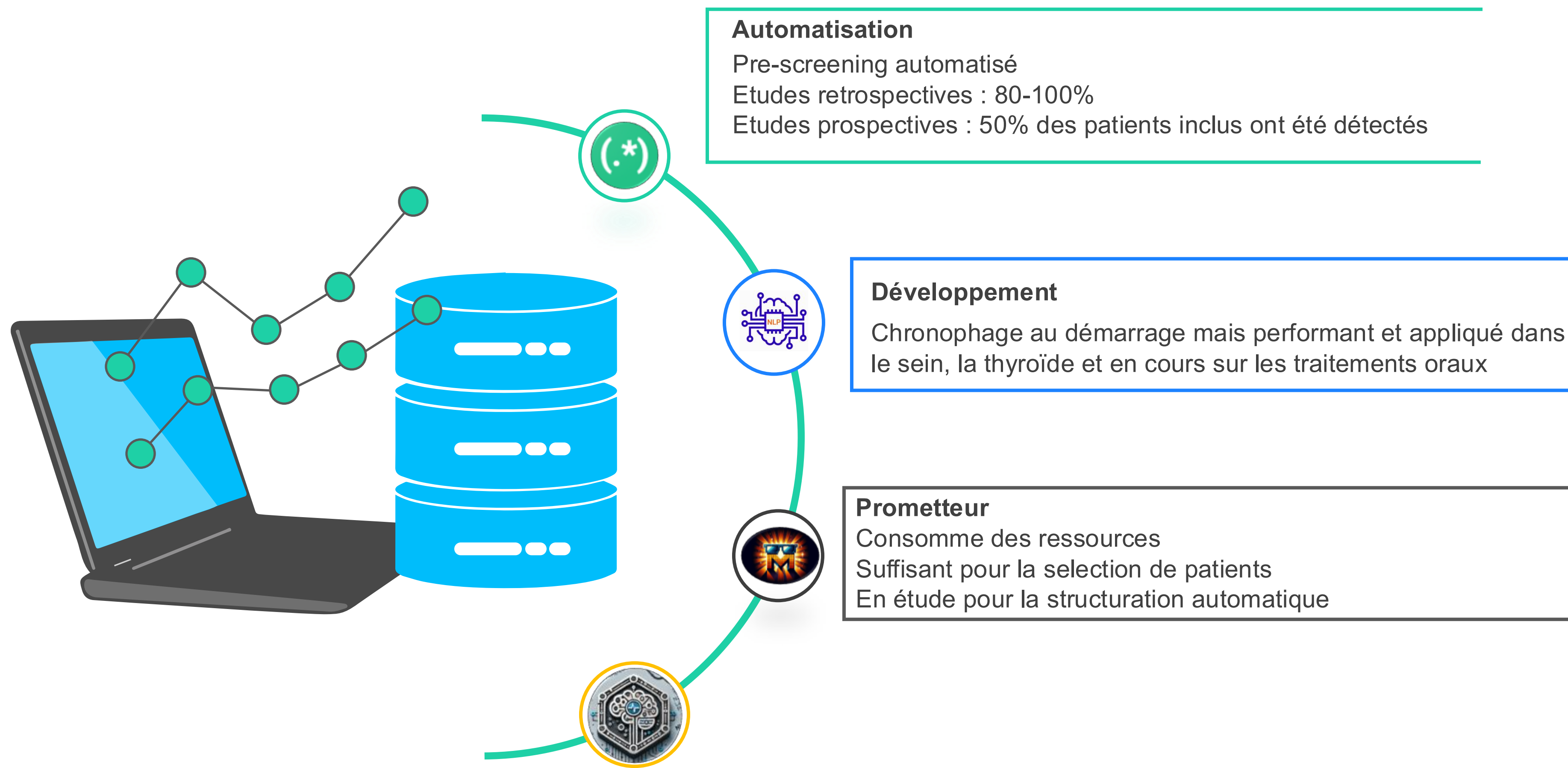
Conclusion



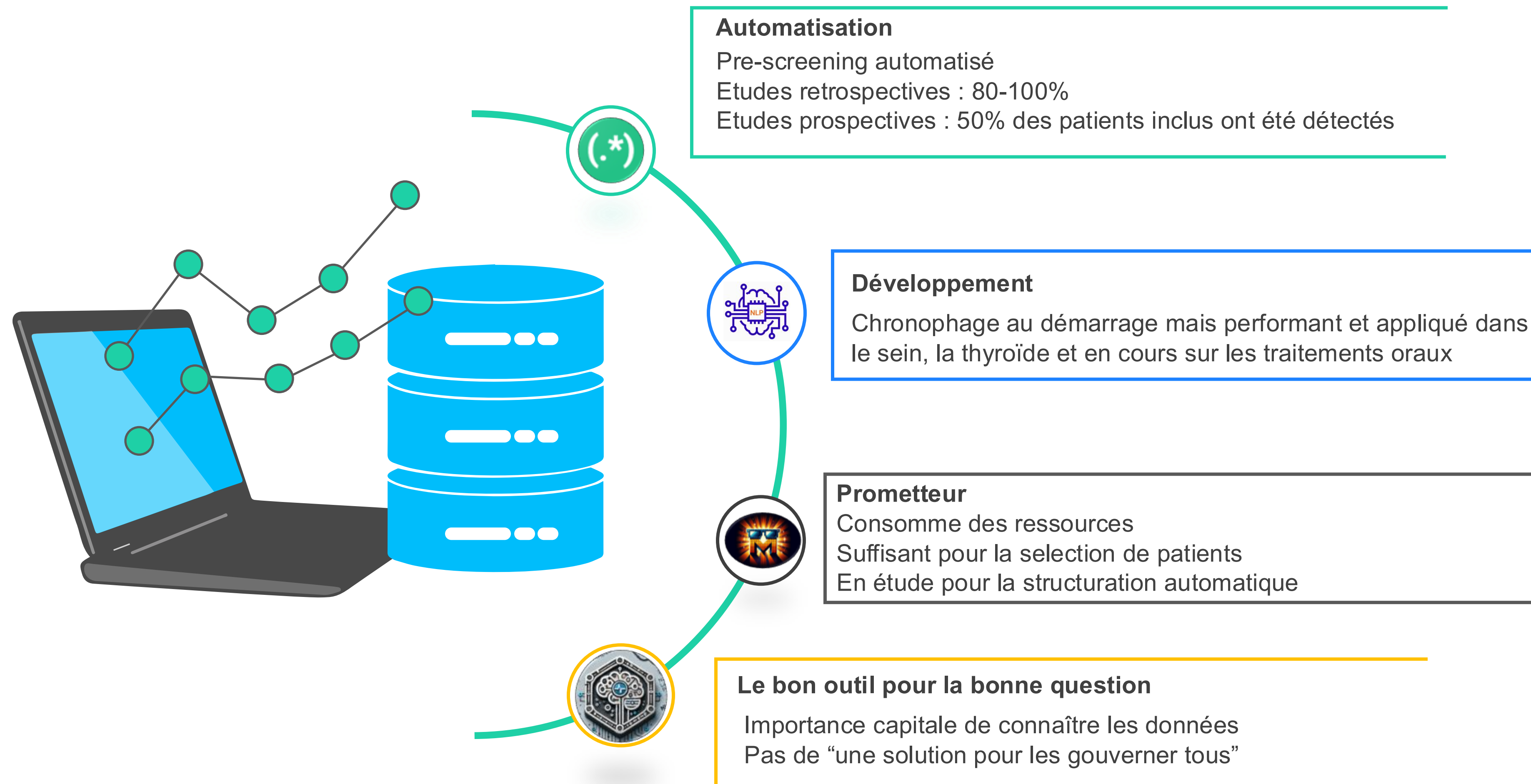
Conclusion



Conclusion



Conclusion



Merci !

Renaud SCHIAPPA
Responsable Adjoint

Renaud.schiappa@nice.unicancer.fr

