



ONLINE HEALTH FORUMS

M. Deepa¹, K.Sanathi², M.B.Benjula Anbu Malar³, S.Deepika⁴

^{1,2,3,4} School of Information Technology and Engineering, VIT University, Vellore, Tamilnadu, (India)

ABSTRACT

Online health forums provide a convenient way for patients to provide medical information and connect with a physician and peers outside of clinical setting. Support vector machine classifier to classify original thread post according to the underlying intent comparable classification performance can be achieved by a training and testing on post from different forum topic. We infer a taxonomy from claiming intents to catch client data necessities previously, on the web wellbeing forums. Furthermore suggested novel example built characteristics to utilize for a multiclass, we utilize three annotators on manually name a dataset about wellbeing sheets presents spanning four forums topics. Test outcomes indicate that a SVM utilizing example based features is exceedingly fit from claiming distinguishing client intents clinched alongside discussion posts, reaching a most extreme precision for 75%, and that an SVM-based progressive classifier utilizing both example also saying offers crazy performs its SVM partner that utilization best saying features. Furthermore, comparable characterizations execution camwood be attained by preparing.

Keywords: *Community Question Answering (CQA), Health Information, cost.*

I. INTRODUCTION

Online medical forums such as HealthBoards1, MedHelp2, and Wellescent3 have become very popular because they provide cost-effective ways for users to learn about health related issues outside of clinical care settings. On these forums, users can post their problems and obtain advice from both peers and health care professionals, or simply browse relevant threads. Forums are particularly valuable in the sense that they contain first hand experiences, which often have richer content than that offered by any single expert. For example, finds that many physicians are unaware of the numerous alternative and complementary treatment medications found in forum discussions, and shows that patients offer expertise that differs significantly from that offered by health professionals. As the popularity of health forums continues to grow, more research is needed to better connect users with the vast quantities of information present on these forums. In present-day health forums, users often start new threads to ask questions and then patiently wait for responses while the answers that they are looking for may already be on some forum. If we could somehow discern the intent of these threads, we could have recommended to the author a set of similar threads that match both his intent and the content of his post, perhaps saving him from having to indefinitely wait for a response.

II. LITERATURE REVIEW

The Web provides a wealth of information about medical symptoms and disorders. Although this content is often valuable to consumers, studies have found that interaction with Web content may heighten anxiety and stimulate healthcare utilization [1]. We present a longitudinal log-based study of medical search and browsing



behaviour on the Web. We characterize how users focus on particular medical concerns and how concerns persist and influence future behaviour, including changes in focus of attention in searching and browsing for health information [2]. We build and evaluate models that predict transitions from searches on symptoms to searches on health conditions, and escalations from symptoms to serious illnesses. We study the influence that the prior onset of concerns may have on future behaviour, including sudden shifts back to searching on the concern amidst other searches. Our findings have implications for refining Web search and retrieval to support people pursuing diagnostic information [3].

We study information goals and patterns of attention in exploratory search for health information on the Web, reporting results of a large-scale log-based study. We examine search activity associated with the goal of diagnosing illness from symptoms versus more general information-seeking about health and illness [4]. We decompose exploratory health search into evidence-based and hypothesis directed information seeking. Evidence-based search centers on the pursuit of details and relevance of signs and symptoms. Hypothesis-directed search includes the pursuit of content on one or more illnesses, including risk factors, treatments, and therapies for illnesses, and on the discrimination among different diseases under the uncertainty that exists in advance of a confirmed diagnosis [5]. These different goals of exploratory health search are not independent, and transitions can occur between them within or across search sessions. We construct a classifier that identifies medically-related search sessions in log data. Given a set of search sessions flagged as health-related, we show how we can identify different intentions persisting as foci of attention within those sessions. Finally, we discuss how insights about foci dynamics can help us better understand exploratory health search behavior and better support health search on the Web.

Currently 19%-28% of Internet users participate in online health discussions. In this work, we study sentiments expressed on online medical forums. As well as considering the predominant sentiments expressed in individual posts, we analyze sequences of sentiments in online discussions. Individual posts are classified into one of the five categories encouragement, gratitude, confusion, facts, and endorsement. 1438 messages from 130 threads were annotated manually by two annotators with a strong inter-annotator agreement (Fleiss kappa = 0.737 and 0.763 for bposts in sequence and separate posts respectively). The annotated posts were used to analyse sentiments in consecutive posts. In automated sentiment classification, we applied Health Affect, a domain-specific lexicon of affective words.

III. SYSTEM DESIGN

3.1 User Interface Design

To connect with server user must give their username and password then only they can able to connect the server. If the user already exists directly can login into the server else user must register their details such as username, password, Email id, City and Country into the server. Database will create the account for the entire user to maintain upload and download rate. Name will be set as user id. Logging in is usually used to enter a specific page. It will search the query and display the query.



3.2 Service Selection

In this module is used to select the service. Patients need to select which type of service they want. There are two types of services available in this module, Such as 1.Communication, 2.Medicine selection from datasets.

3.3 Patient And Doctor Communication

Communication is an important component of patient care. Traditionally, communication in medical school curricula was incorporated informally as part of rounds and faculty feedback, but without a specific or intense focus on skills of communicating per se. The reliability and consistency of this teaching method left gaps, which are currently getting increased attention from medical schools and accreditation organizations. There is also increased interest in researching patient-doctor communication and recognizing the need to teach and measure this specific clinical skill.

3.4 Medicine Selection Using Datasets

Careful selection of a limited range of essential medicines results in a higher quality of care for patients, better management and use of medicines and more cost-effective use of health resources. Clinical guidelines and lists of essential medicines may improve the availability and proper use of medicines within health care systems. Selection of medicines follows market approval of a pharmaceutical product which defines the availability of a medicine in a country. An essential medicines list may then be developed based on disease prevalence, evidence on efficacy and safety, and comparative cost-effectiveness.

3.5 Patients Feedback

This module is used to add patient's feedback about health service. Feedback is essential to the working and survival of all regulatory mechanisms found throughout living and non-living nature, and in man-made systems such as education system and economy. Information about reactions to a product, a person's performance of a task, etc. which is used as a basis for improvement. The modification or control of a process or system by its results or effects, for example in a biochemical pathway or behavioural response.

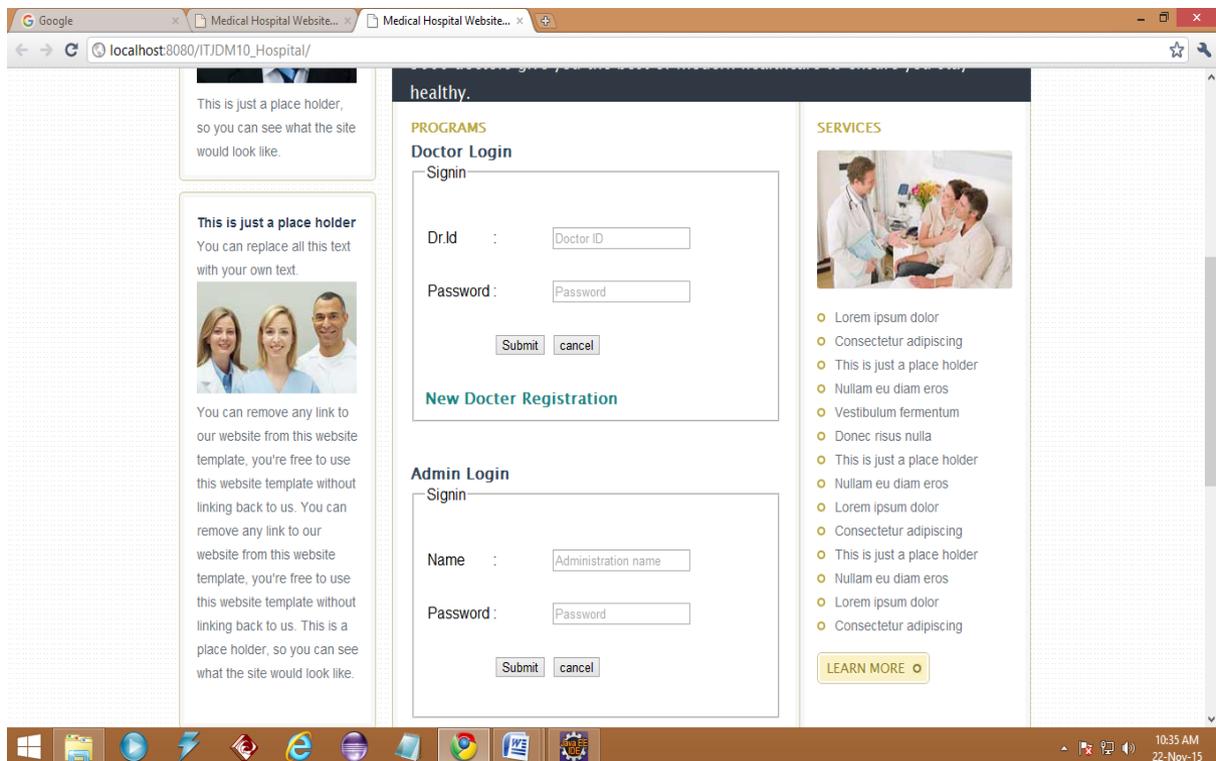
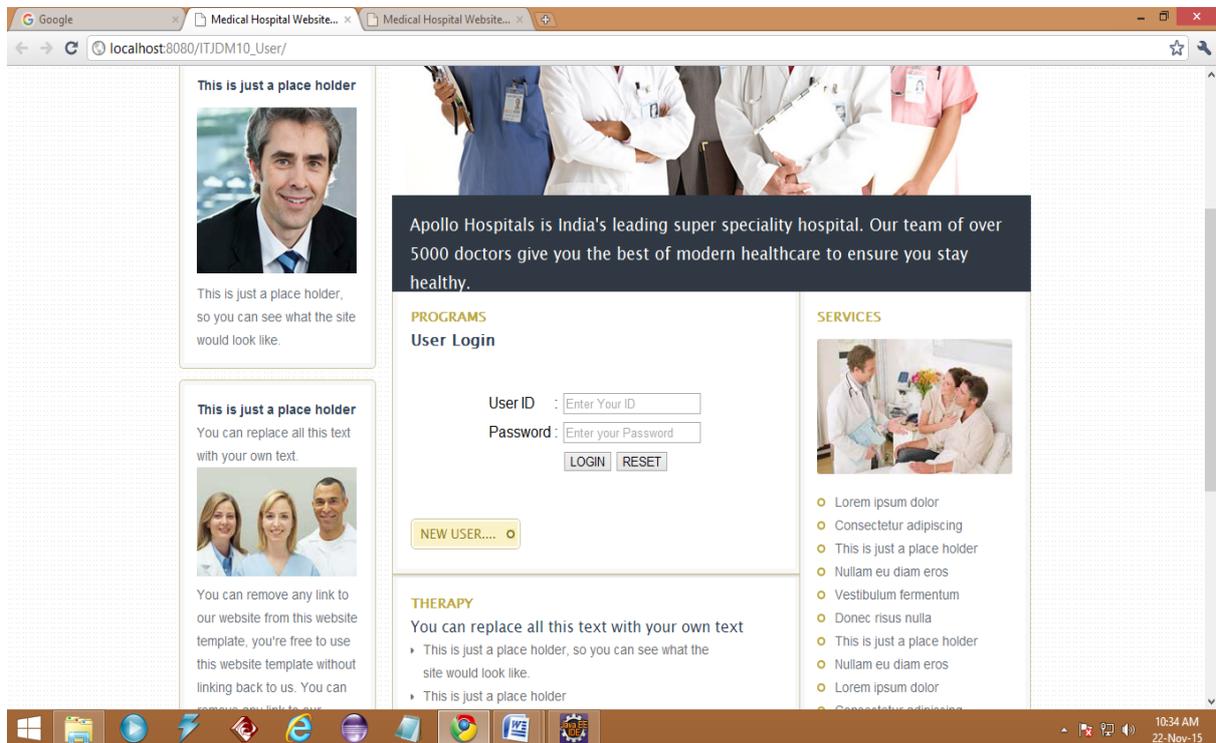
3.6 Service Improvements

Quality and service improvement tools applied to a healthcare setting can help health care organisations to improve the quality, efficiency and productivity of patient care they provide. Used correctly, these tools and techniques can help healthcare staff to identify and resolve problems as quickly and as cost-effectively as possible while ensuring that any improvements in patient care are sustainable.

Each day, more than 12.5 million health-related computer searches are conducted on the World Wide Web. Based on a meta-analysis of 24 published surveys, the author estimates that in the developed world, about 39% of persons with cancer are using the Internet, and approximately 2.3 million persons living with cancer worldwide are online. In addition, 15% to 20% of persons with cancer use the Internet "indirectly" through family and friends. Based on a comprehensive review of the literature, the available evidence on how persons with cancer are using the Internet and the effect of Internet use on persons with cancer is summarized. The author distinguishes four areas of Internet use: communication (electronic mail), community (virtual support groups), content (health information on the World Wide Web), and e-commerce. A conceptual framework summarizing the factors involved in a possible link between Internet use and cancer outcomes is presented, and



future areas for research are highlighted. (CA Cancer J Clin 2003;53:356–371.) © American Cancer Society, 2003.



The screenshot shows a web browser window with the following content:

- Browser tabs: Medical Hospital Website..., Google
- Address bar: localhost:8080/ITJDM10_Hospital/medicinedetails.jsp
- Page title: Medical Hospital Website...
- Navigation: Add New Medicine, LogOut
- Medicine Details Table:

ID	Problem	Symptoms	Medicine	Dose	Morn	AftNoon	Even
1	fever	Symptoms that commonly occur with fever include excessive sweating, chills, and headache.	Advil	800 mg(adults)	1	1	1
10	Allergy.	Skin Rashes, Swelling of the face and swelling of the throat.	Avil.	30mg for adults. 15mg for childs.	1	0	1
2	headache	blurry vision, nausea, vomiting, fever, neck pain, neck stiffness.	dolobar	500mg for adults. 200mg for child.	1	0	1
3	cold	Runny or stuffy nose. Slight body aches or a mild headache.	coldact	350 mg for adults	0	0	1
4	Body pain	muscle pain, sleep problems, fatigue, and anxiety	Mefal spas	500mg for adults 250mg for child	0	1	1
5	Throat infection	Redness, swelling, swollen tonsils, pain in your ears or neck.	ibuprofen	400mg for adults. 200mg for child.	0	0	1
6	Eye infection	Tears in eyes, irritation	Gentamicin drops	2-3 drops	1	1	1
7	Stomach disorders	Indigestion, Gas, Ulcers, Food allergies	Gelusil or Digene	300mg for adults. 150mg for child.	0	1	1

VI. CONCLUSION

JSP and Servlets are gaining rapid acceptance as means to provide dynamic content on the Internet. With full access to the Java platform, running from the server in a secure manner, the application possibilities are almost limitless. When JSPs are used with Enterprise JavaBeans technology, e-commerce and database resources can be further enhanced to meet an enterprise's needs for web applications providing secure transactions in an open platform. J2EE technology as a whole makes it easy to develop, deploy and use web server applications instead of mingling with other technologies such as CGI and ASP. There are many tools for facilitating quick web software development and to easily convert existing server-side technologies to JSP and Servlets.

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