CLARUS: An Interactive Explainable AI Platform for Manual Counterfactuals in Graph Neural Networks

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Abstract

Lack of trust in artificial intelligence (AI) models in medicine is still the key blockage for the use of AI in clinical decision support systems (CDSS). Although AI models are already performing excellently in medicine, their black-box nature entails that it is often impossible to understand why a particular decision was made. In the field of explainable AI (XAI), many good tools have already been developed to "explain" to a human expert, for example, which input features influenced a prediction. However, in the clinical domain, it is essential that these explanations lead to some degree of causal understanding by a clinician in the context of a specific application. For this reason, we have developed an interactive XAI platform that allows the domain expert to ask manual counterfactual ("what-if") questions. CLARUS allows the expert to observe how changes based on their questions affect the AI decision and the corresponding XAI explanation.

Keywords: Explainable AI, Graph Neural Networks, Counterfactuals, Human-in-the-loop, Causability

1   Introduction

While machine learning (ML) and artificial intelligence (AI) have become part of many areas of our everyday life, the transfer of such technologies to the medical domain, in particular in the form of clinical decision support systems (CDSS) failed so fare. In such domains, there is an increased necessity for trust in such AI models. The application of AI in the medical domain is particularly critical since it often involves patient care or treatment development [31]. It is unacceptable for AI models to not be interpretable in such a setting since wrong predictions could cause severe consequences [7]. A lack of interpretability and, therefore, lack of trust in AI systems as CDSS typically stems from the blackbox nature of complex AI models [33].

In recent years explainable AI (XAI) models have been developed to help build trust in AI models and increase their transparency [15]. They achieve this, for example, by calculating relevance scores for inputs based on the AI models configurations [42][1], by creating saliency maps [39] or by analysing the model down to a single neuron [8]. Several surveys and practical tutorials compare and analyse state-of-the-art XAI models in different scenarios with different data [2] [18].

In the medical and biomedical domain, however, transparency alone is not sufficient in reaching a state of "explainable precision medicine". In medicine, there is a need for causability [16], the measurable extent to which an explanation from an XAI model achieved a specified level of causal understanding.

In order to connect the transparency of XAI models with the need for causability, we need interactive XAI platforms that guide domain experts through the explanations given by an XAI model. Such platforms will allow the expert to gain insight into what influenced the AI model during the decision-making process. Additionally, it can help the expert identify confounding factors that might inhibit model performance or correlated factors that are biologically unimportant. Most importantly, it is imperative to allow the expert to interactively ask counterfactual questions ("if-not", "why-not", and "what-if" questions) and change their data based on those. Ultimately, this interaction will help the expert see how changes affect not only the AI model but also the XAI model, hence, increasing their causal understanding.

In many research domains, dependencies between parameters have an additional impact on AI models. Such dependencies are often represented in graph structures. For example, in the medical and biomedical domain, much research is being done on protein-protein interaction (PPI) networks, especially in cancer research and subtyping, since the gene mutations caused by gene alterations can lead to a gain or loss of PPIs [12]. Graph neural networks

(GNN) have been specifically developed to handle graph-structured input data [48]. They have already been used on PPI graphs, for example, to predict novel cancer genes [37] or for disease subnetwork detection [27]. Many XAI models for GNNs have already been developed, such as the GNNExplainer [51], PGMExplainer [45], XGNN [52], GNN-LRP [36]. But, as pointed out earlier, while these XAI models might increase the transparency of GNNs and help with understanding their inner processes, there is still a lack of causability.

For this reason, we developed CLARUS, an interactive XAI platform for GNNs. CLARUS will allow domain experts to understand why GNNs reach a particular decision and what features are important in the decision-making process. The interactivity will enable the expert to act based on their already gained understanding. Furthermore, CLARUS will illustrate the consequences of the action, and thus increase their causal understanding. CLARUS will pave the way for informed medical decision-making and the application of AI models as CDSS.

2 Results

2.1 Design overview of CLARUS

The aim of CLARUS is to promote human understanding of GNN predictions and to allow the domain expert to validate and improve the GNN decision-making process. Therefore, we have developed a platform that visualises the input graphs used to train and test the GNN, including node and edge attributes, as well as, node and edge relevances computed by XAI models, such as GNNExplainer [51]. Through this a domain expert can gain insights into what parts of the graph were most influential in the GNNs decision-making process. The expert can then interactively manipulate the patient graph based on their understanding and initiate a retraining or prediction of the GNN. This interactivity allows them to ask manual counterfactual questions and analyse the resulting effects on the GNN decision. CLARUS is being hosted by the GWDG and reachable under the following domain:
`http://rshiny.gwdg.de/apps/clarus/`
The User Interface (UI) is divided into three main windows. The entry window (Home), the selection window (Select Data) and the interaction window (Interact). The first window serves as a starting point for the user. Here the user gets a quick overview of the purpose of CLARUS along with a short description on how to use the platform. After reading this short introduction carefully, the user can continue to the next window and select a dataset. The user can choose between three pre-selected datasets, namely the Kidney Renal Clear Cell Carcinoma (KIRC) dataset (a real world dataset) and a smaller subset of the KIRC dataset, as well as, a synthetic dataset. The synthetic dataset is built out of 1000 Barabasi networks with two synthetic classes. This dataset is smaller with only 30 nodes and 29 edges per graph making it easier for the user to get familiar with CLARUS than with the KIRC dataset. The KIRC dataset is a larger real world dataset, taken from The Cancer Genome Atlas (TCGA) database (`https://cancergenome.nih.gov/`). A detailed description of the generation and pre-processing of these datasets can be found in the methods section (see 4.2, 4.3). An application of CLARUS to the KIRC dataset will follow in section 2.4. After the user selects a dataset, it will be loaded into the UI and the interaction window will be unlocked. Figure 1 shows the interaction window with its seven main interaction components. The first component is a drop-down menu that allows the user to select a graph from the dataset and gives the user some first information on the graphs, namely if the graph was used in the training or in the testing of the GNN, what class the graph belongs to, what class the GNN classified the graph as, and the confidence of the GNNs prediction (e.g. probability for a certain class). This enables the user to decide if they want to work on wrongly classified graphs or on training graphs to see if they can improve the GNNs performance. The second component shows the confusion matrix and sensitivity and specificity of the GNN on the test-set data [3], [9]; Mutual Information (MI) [23] would be even more appropriate, specially for imbalanced datasets, and will be included in future work together with its analytical description [34]. Here the user can also enact a prediction on the selected graph or a re-training of the GNN on the dataset. Additionally, the user can download the results of his analysis. For this, the data tables in the fifth component get saved alongside the calculated relevance values and the log file. Everything is zipped together and downloaded as a whole.

After the user selected a graph the third component allows the user to specify the graph visualisation. Here the user can select how to sort and colour the nodes, by degree, by relevances from XAI models or alphabetically according to their labels. Additionally, they can select the XAI model used for colouring the edges and how many nodes to display in the graph visualisation. The graph visualisation can be found in the fourth interaction component and it displays the graph based on the user selections alongside a legend for the node colours.

The fifth component consists of information on the edges and nodes displayed in the graph visualisation. This allows the user to get a more detailed view on the graph components. To ask counterfactual questions, the sixth component allows the user to manipulate the graph by adding or deleting nodes or edges. The last component is a log print, that shows the user all of his performed actions.

2.2 Graph visualisation

To aid the user gain insights into mechanisms within a patient graph and identify important component or sub-graphs, we have developed a graph visualisation

Figure 1: Interact window with its seven components. 1: Drop down selection of a patient graph, with information on the patient graphs, 2: Performance scores of GNN on test data and predict, retrain, and download button, 3: Specifications for graph visualisation (node/edge colouring, node sorting, and how many nodes to display), 4: Graph visualisation, 5: Information on nodes and edges, 6: Graph modifications (node/edge deletion/addition), 7: Log print of actions performed by the user.

that highlights node and edge relevances from a multitude of XAI models.

Two attribution methods were used to calculate positive attribution values on the edges [43] provided by the Captum library of Pytorch `https://captum.ai/`. The saliency method computes for each edge the absolute value of the gradient of the non-linear function that the GNN computes w.r.t. the weight of this edge (as defined by the training process). The Integrated Gradients (IG) method is a more sophisticated version of the saliency method, where instead of the absolute value, the integral of the gradient w.r.t a range of learned weight values is used. The GNNExplainer [51] computes the important subgraph G_S of the computation graph G_c [11], [47], [19] of the input graph G with the use of an optimization algorithm. The algorithm is driven by the maximization of the mutual information [23] between the tried substructure (G_S of G_c) w.r.t. the predicted label distribution. The user can choose which XAI models to use for colouring the edges and nodes. The edges will be coloured in grey-scale based on the relevance values, while the nodes will be coloured in a blue-scale. The identification of important factors in the complete graph is often unfeasable if the number of nodes is very large. Thus we have implemented a sliding bar that allows the user to select the top nodes according to a specified measure, such as relevance values, degree or alphabetically. This ensures that the user can analyse the most important nodes or if desired the most irrelevant nodes. Alongside those nodes their next neighbours will also be displayed, to allow the user to see the interactions of the selected nodes.

Furthermore, we implemented a tooltip that gets shown if the curser hovers over an edge or node. For edges, the tooltip will display information on which nodes the edge connects, as well as all relevances for this edge, labeled by the XAI model that computed them (see Figure 2). For nodes, the tooltip displays the node label and degree alongside all relevances for this node, labeled by the XAI model that computed them (see Figure 3). In addition to the information in the tooltips, the user can find more details and features of the selected nodes and displayed edges in two data tables at the bottom of the analysis tab.

2.3 Impact of graph manipulation

Besides graph visualisation, one of our main contributions is the interactive manipulation of the graph data and the demonstration of the impact of such manipulations. It allows the user to directly ask manual counterfactual questions by changing the graph and answer them directly by updating the prediction or retraining the GNN and observing the effects of the counterfactual in the GNN performance and the newly calculated XAI relevances.

In order to allow counterfactual questions such as "What would have been the prediction if this node or edge would not have been in the graph?" or "What

Figure 2: Edge tooltip: Hovering over an edge shows information on connected nodes and relevance values from XAI models.

Figure 3: Node tooltip: Hovering over a node shows information on label, degree and relevance values from XAI models.

would have been the model performance if this node or edge would have been present in the graph?", we have implemented the deletion and addition of nodes and edges. The user can manipulate the graph by adding or deleting a multitude of nodes and edges and subsequently start retraining or updating the prediction to evaluate whether the changes resulted in an expected outcome. An undo function allows reversing all manipulations. After predicting or retraining, the current state of the graph will always be saved, allowing the user to jump between saved graph states later on. This ensures that the user can always return to a state before a prediction or retraining if the changes are not effective or beneficial.

To demonstrate the effects the changes have on the GNN performance the user is shown a confusion matrix along with sensitivity and specificity of the GNN on the test data. The evaluation allows for a direct comparison of values such as true positives, false positives, true negatives and false negatives, while sensitivity and specificity identify the proportion of correctly identified positive and negative classes. This enables a fast inspection to what degree the model performance was effected by the manual changes. The GNN performance of the initial training and every retraining will be printed in the log-file, allowing for an easy comparison.

In addition, the user can observe the effects of their changes by identifying if the predicted label and the confidence in the predicted label have changed.

Lastly, after retraining or predicting with the changed graph the user will be able to identify changes in the relevance values. This will allow them to ask counterfactual questions of the form "What would have been the most relevant node or edge if this very relevant node or edge would not have been in the graph?". This shows that CLARUS not only enables the user to understand what consequences his changes have on the GNN performance, but also to understand the effects on the decision-making process of the GNN. By viewing changes in the relevances of nodes and edges, the user can gain a deeper knowledge on the correlations of the nodes and edges in the data and their influence in the decision-making process of the GNN. This should result in an increase in causability [24] and in new AI-interfaces [17], but of course this will need to be measured in future research.

2.4 Application to KIRC dataset

We have verified a potential disease module in the protein-protein interaction network using the Python package GNN-SubNet [27]. The resulting subnetwork or subgraph consists of four proteins, namely MGAT5B, MGAT5, MGAT4B, and MGAT3, connected by five edges. We have uploaded this module to CLARUS in order to conduct an in-depth investigation of the performance and the distribution of the associated relevance scores. Overall, the module had a high sensitivity of 0.95 and a specificity of 0.31 on an independent test data set (127 patients).

We have selected a patient which was classified with a high predictive confidence of 1.28 (see Table 1) in favour of the kidney cancer-specific class. The GNNexplainer assigned the highest relevance score to the node associated with the proteins MGAT3 and MGAT4B (GNNexplainer relevance score of 0.86, see Table 2). The edge between MGATT3 and MGAT5 had the highest saliency value with 0.98 (see Table 3).

Our first manual counterfactual aimed at evaluating the importance the edge with highes relevance score MGAT3-MGAT5. The deletion of this edge led to a confidence drop of the predicted class to 0.98. Moreover, a notably higher importance was now assigned to the edge MGAT5-MGAT4B with a saliency value of 1 (see Table 3). Interestingly, node importances were the same for MGATT3 and MGAT4B with a value of 0.86.

The obtained results may suggest that MGAT3 and MGAT4B are redundant. However, given the remaining topology of the graph we may assumed that MGAT4B is more important due to a higher degree than the other nodes. Following this assumption our next manual counterfactual was the deletion of the MGAT3 node. As a result the prediction confidence increased again to 1.24 and the node importance of MGAT4B was still at 0.85. The importance of the MGAT5-MGAT4B edge was the same with a saliency value of 1. The edge between MGAT5 and MGAT4B thus was assumed to be the most relevant part of the analysed module.

According to this assumptions and to validate our hypothesis we further deleted the edge between MGAT4B and MGAT5, which resulted in a drastic confidence drop to 0.1 (see Table 1). The importance of MGAT4B decreased to 0.12. The results obtained from this experiment suggest that the information flow through MGAT4B and MGAT5 is crucial for the classification of the analysed patient. MGAT5 as a single marker is not sufficient.

In our last manual counterfactual step we deleted the edge between MGAT5B and MGAT4B, which finally resulted in a counterfactual, where the label switched from 1 (kidney cancer-specific) to 0 (not kidney cancer-specific).

In summary, the conducted experiment demonstrates that human interactions can aid to uncover the most important and relevant parts of a patient graph when guided by recomputed relevance scores after each human counterfactual interaction.

3   Discussion

A vast amount of XAI models have been developed to help understand the decision-making process of Deep Learning and GNNs but due to a lack of causability such models are not yet applicable in the clinical setting. Therefore, we developed CLARUS an interactive XAI platform that increases causability by allowing the user to ask manual counterfactual questions. By displaying the relevances computed by XAI models directly in the graph and letting the user interact with them they can gain a better understanding of the causal relationships in the GNN decision-making process. This human-in-the-loop approach to GNN classification will pave the way for implementation of GNNs in the clinical setting.

There is a plethora of research works that deal with the automatic generation of counterfactual explanations for graphs [28]. Most of them try to generate the counterfactuals automatically, for example with the use of generative models [21], by just concentrating on edge deletion [20] or by a search driven by a Reinforcement Learning (RL) algorithm [25]. The main goal of those methods is to form a provided graph instance to compute another that has a small graph edit distance and sparsity (modification of fewer features as possible) in the smallest possible time. Preliminary research tries to compare several graph counterfactual generation frameworks under many datasets and evaluation metrics [29], and the result shows no clear winner in all metrics. The methods listed and evaluated do not incorporate solutions where the graph counterfactual generation was driven by human decisions. The evaluation of human-in-the-loop search strategies by similar means as the automated ones is one of the long-term goals of our research. A similar work is dealing with explanations of GNNs via targeted topology perturbation is presented in [41].

The "GNNViz" platform belongs to the category of Human-in-the-Loop Machine Learning Systems (HITL ML) [14]. It was created to enable non-expert users to manipulate graphs and thereby influence the GNN's prediction outcome. The benchmark demonstrated that users could uncover label correlations, unfairness, and biases, and a partial comparison with the results of GNNExplainer [51] can be made. In contrast to the "GNNViz" which only considers edge addition and deletion, CLARUS allows and encourages the user to evaluate a variety of manual counterfactuals in the graph such as node addition and deletion. Furthermore, CLARUS is the first tool that allows not only a re-prediction of classes, but also a retraining of the entire GNN after changing the underlying graphs, while other systems such as "GNNViz" solely allow for a re-calculation of the prediction result.

While CLARUS implements a multitude of interactive functionalities, there are other features, which we plan to integrate in future updates of our platform. For instance, the addition and removal of entire node and edge features for all samples. From a usability standpoint this is a valuable feature since some features may be very noisy and thus the user might want to remove that feature completely before retraining. Moreover, the current prototype solely enables the in-depth analysis of a limited set of predefined datasets. In the future, we aim to provide a larger collection of public datasets and the possibility to upload individual datasets of a specific structure along with a user management. This will allow domain-experts to investigate their own datasets within CLARUS. While this is a complex endeavour, involving different implantation and security risks, we have already identified the intri-

Table 1: GNN prediction confidence of patient while changing the patient graph.

	No changes	Delete edge MGAT3-MGAT5	Delete node MGAT3	Delete edge MGAT4B-MGAT5	Delete edge MGAT4B-MGAT5B
	Step 0	Step 1	Step 2	Step 3	Step 4
Patient Label	1	1	1	1	0
Confidence	1.28	0.98	1.24	0.1	0.1

Table 2: GNNExplainer importances of nodes while changing the patient graph.

	No changes	Delete edge MGAT3-MGAT5	Delete node MGAT3	Delete edge MGAT4B-MGAT5	Delete edge MGAT4B-MGAT5B
Node	Step 0	Step 1	Step 2	Step 3	Step 4
MGAT3	0.86	0,86	-	-	-
MGAT5B	0.14	0.14	0.15	0.13	0.14
MGAT4B	0.86	0.86	0.85	0.12	0.21
MGAT5	0.15	0.17	0.15	0.16	0.15

Table 3: Integrated Gradients (IG) and Saliency (Sal) importances of edges while changing the patient graph.

	No changes		Delete edge MGAT3-MGAT5		Delete node MGAT3		Delete edge MGAT4B-MGAT5		Delete edge MGAT4B-MGAT5B	
	Step 0		Step 1		Step 2		Step 3		Step 4	
Edge	IG	Sal	IG	Sal	IG	Sal	IG	Sal	IG	Sal
MGAT3-MGAT5	1.0	0.98	-	-	-	-	-	-	-	-
MGAT3-MGAT4B	0.22	0.93	0.46	0.1	-	-	-	-	-	-
MGAT4B-MGAT5	0.97	0.84	1.0	1.0	1.0	1.0	-	-	-	-
MGAT4B-MGAT5B	0.88	1.0	0.62	0.63	0.61	0.57	1.0	1.0	-	-
MGAT5-MGAT5B	0.43	0.72	0.17	0.21	0.19	0.31	0.07	0.31	1.0	1.0

cate parts of this feature and plan to integrate it in the next update of CLARUS. Finally, we plan to integrate different types of GNN architectures like the Graph Isomorphism Network (GIN) [49], Jumping Knowledge Network [50], as well as support of a larger variety XAI methods.

In summary, we are presenting the first interactive XAI platform prototype, CLARUS, that allows not only the evaluation of specific human counterfactual questions based on user defined alterations of sample graphs and a re-prediction of classes, but also a retraining of the entire graph neural network after changing the underlying graph structures. Moreover we show the usability of the prototype with the aid of multiple manual counterfactual alterations on a kidney cancer-specific protein-protein interaction network. This example demonstrates the benefit of CLARUS in terms of knowledge gain and causal understanding of the user, for instance on predictions and their explanations.

4 Methods

4.1 Implementations and workflows

We developed the UI using R version 4.1.0 [30] and R Shiny [32] with important packages such as visNetwork [5] and igraph [6] for the graph visualisation and jsonlite [26] and httr [46] for the communication via an API.

A typical user workflow is depicted in Figure 4. Each dataset consists of multiple patient graphs between which the user can switch. After selecting a patient graph the initial graph will be visualised alongside node and edge features as well as relevances from an XAI model. At this point the user can ask counterfactual questions such as "If the most relevant node would have been removed, what would

the GNN prediction have been?". He or she can then answer the question by removing or adding nodes or edges and getting a new prediction for this graph from the GNN or initiating a complete retraining of the GNN on the whole dataset with this modified graph. This can be repeated until a sufficient causability is reached. Every modified graph state will be saved after a prediction or retraining. Afterwards, the user can switch to a different patient graph, if they believe the GNN performance is not good enough and continue performing modifications on that graph. Of course, the user could also try and provoke a bad performance out of curiosity on how the explanations for such cases look like. Later, the user can additionally switch between saved patient graph states, in order to allow him or her to return to a previous state, if the modifications did not result in a desired outcome. If the user finds the explanations causable enough and the GNN decision-making process, as well as the GNN performance is good enough, they can download the results (node and edge tables with all features and relevance values and the log files).

The backend is implemented using Python. Special care has been taken to ensure the quality of the software. Several unit test-cases have been implemented covering most of the functionality of node and edge addition and deletion. Edge cases concerning degenerate situations like the smallest graph possible that Pytorch Geometric (PyG) can represent, or non admissible actions like re-entering an already existing edge were covered by dedicated Quality Management (QM) Software written in `pytest` https://pytest.org. Furthermore, property-based test-cases [13] were written with the use of the package `hypothesis` https://hypothesis.readthedocs.io/en/latest/ [22]. Those test cases did not explicitly check all

Figure 4: Typical user workflow that shows interaction of the UI (right) with the backend (left) via Flask API (red arrows).

the specific changes that are expected to happen in the graph structure after an action, but rather the properties and constraints that have to be fulfilled. For example, removing a node makes the number of edges in the graph lower or equal to the previous value, makes the number of rows of the array that contains the node features smaller by one, and so on. Correspondingly, removing an edge should keep all information about the nodes alone unchanged; this is an invariant that can be eloquently expressed by the code of a property-based test. Added to that, the selected nodes and edges are not predefined but randomly chosen by the framework. Property-based testing has been proven beneficial for other machine learning problems too [4], [35].

The API for communication between the backend and the UI is implemented in Python using the flask package [10].
Interactions via the API based on the user workflow are shown in Figure 4. When the user selects a dataset, a post-call will be sent to the backend to load the selected dataset. Afterwards, when the user selects a graph and graph state, a get-call will be made to the backend, that will fetch the specified graph. Lastly, when the user wants to initiate a prediction or retraining, post-calls will be sent to the backend, that will initiate the prediction or retraining in the

backend. Other API calls for the graph manipulation and retrieval of the performance values are also implemented, but are not displayed here in order to keep a clearer overview.

4.2 Synthetic dataset generation

We have generated 1000 Barabasi networks comprising 30 nodes and 29 edges. The networks had the same topology, but with varying node feature values. The features of the nodes were randomly sampled from a normal distribution $N(0, 0.1)$. For one half of the networks we have selected two connected nodes to which we assigned values from $N(1, 0.1)$. The GNN classifier identified the two specified classes with high accuracy. However, the ultimate goal here was to detect the selected nodes as the discriminatory factors. Explainable AI methods should uncover these patterns in an algorithmic way. We investigate to what extend the human-in-the-loop could improve this process.

4.3 KIRC random dataset generation

To illustrate the usability of CLARUS we make use of the application presented in [27] for disease sub-network discovery. The authors model each patient as a PPI network, where nodes are enriched by feature values from DNA Methylation and gene ex-

pression. The datasets were downloaded from The Cancer Genome Atlas (TCGA) database (`https://cancergenome.nih.gov/`), which represents one of the largest collections of multi-omics data sets. It contains molecular and genetic profiles for over 33 different cancer types from 20,000 individual tumour samples [40].

The data sets were harmonised so that for every patient multi-source information was available. Furthermore, we focused on cancer-relevant genes as proposed by [38]. Genes containing missing values at least for one patient were removed from the analyses. The obtained numerical data matrices were normalised using *min-max* normalisation. The protein-protein interaction network was retrieved from the STRING database [44].

One class of the networks is cancer-specific and contains multi-modal molecular footprints from KIRC cancer patients. The other class is composed by a random sample from multiple cancer types. Using graph classification with explainable GNNs we infer cancer-specific subnetworks.

5 Declaration of Competing Interest

The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper. This work does not raise any ethical issues.

6 Data availability

All pre-processed datasets, the synthetic and the real world dataset, can be downloaded in python pickle file format (PKL) through CLARUS in the Select Data tab. A PKL file is a file created by pickle, a python module that enables objects to be serialised to files on disk and de-serialised back into the program at runtime. It contains a byte stream that represents the objects. In this format the datasets can be easily loaded into python and analysed further by the user. Inside the PKL file the data is saved as a list, containing every patient graph.

7 Code availability

The code for the UI and the python backend are open-source. They can be found in the following public GitHub repositories:

- https://github.com/JacquelineBeinecke/xAI-Shiny-App

- https://github.com/asaranti/GNN_Counterfactuals

8 Abbreviations

- AI - Artificial intelligence

- CDSS - Clinical decision support system

- XAI - Explainable artificial intelligence

- ML - Machine learning

- PPI - Protein-protein-interaction

- GNN - Graph neural network

- UI - User interface

- KIRC - Kidney Renal Clear Cell Carcinoma

- TCGA - The cancer genome atlas

- MI - Mutual information

- IG - Integrated gradients

- PKL - Pickle (file format)

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