



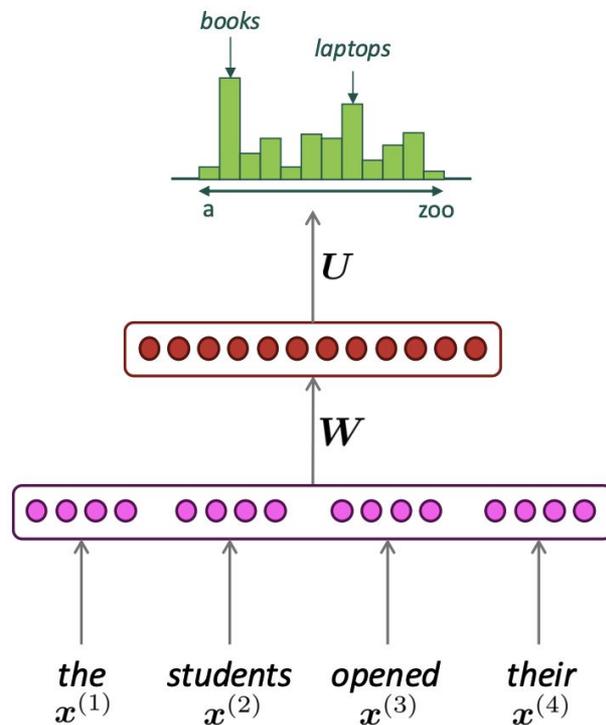
Deep Learning & Generative AI in Healthcare

Session 08

Neural Network Model of Language

- A neural probabilistic language model (Y. Bengio, et al.)
- Fixed window is small
- No window is large enough

We need a neural architecture that can process *any length input*



Recurrent Neural Networks

output distribution

$$\hat{y}^{(t)} = \text{softmax}(U\mathbf{h}^{(t)} + \mathbf{b}_2) \in \mathbb{R}^{|V|}$$

hidden states

$$\mathbf{h}^{(t)} = \sigma(W_h \mathbf{h}^{(t-1)} + W_e e^{(t)} + \mathbf{b}_1)$$

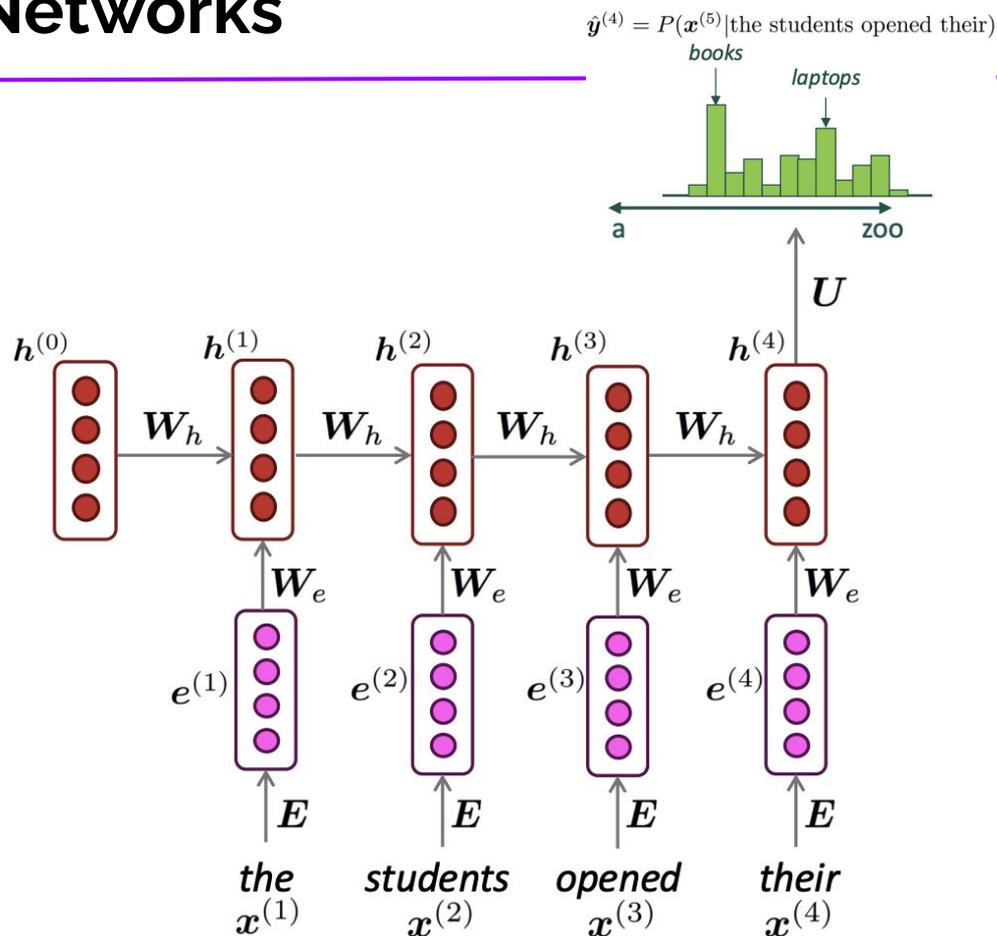
$\mathbf{h}^{(0)}$ is the initial hidden state

word embeddings

$$e^{(t)} = E\mathbf{x}^{(t)}$$

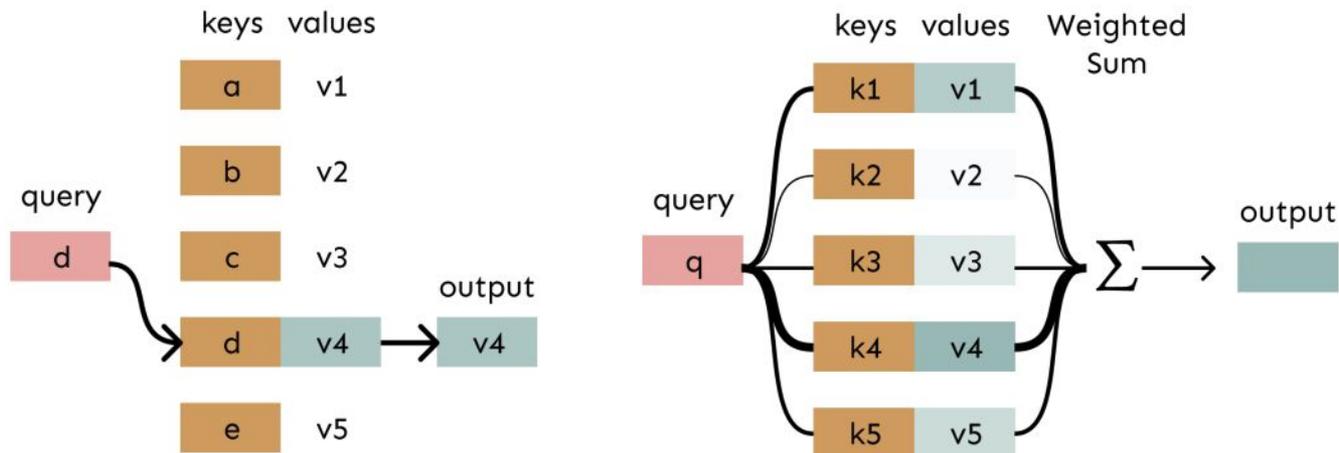
words / one-hot vectors

$$\mathbf{x}^{(t)} \in \mathbb{R}^{|V|}$$



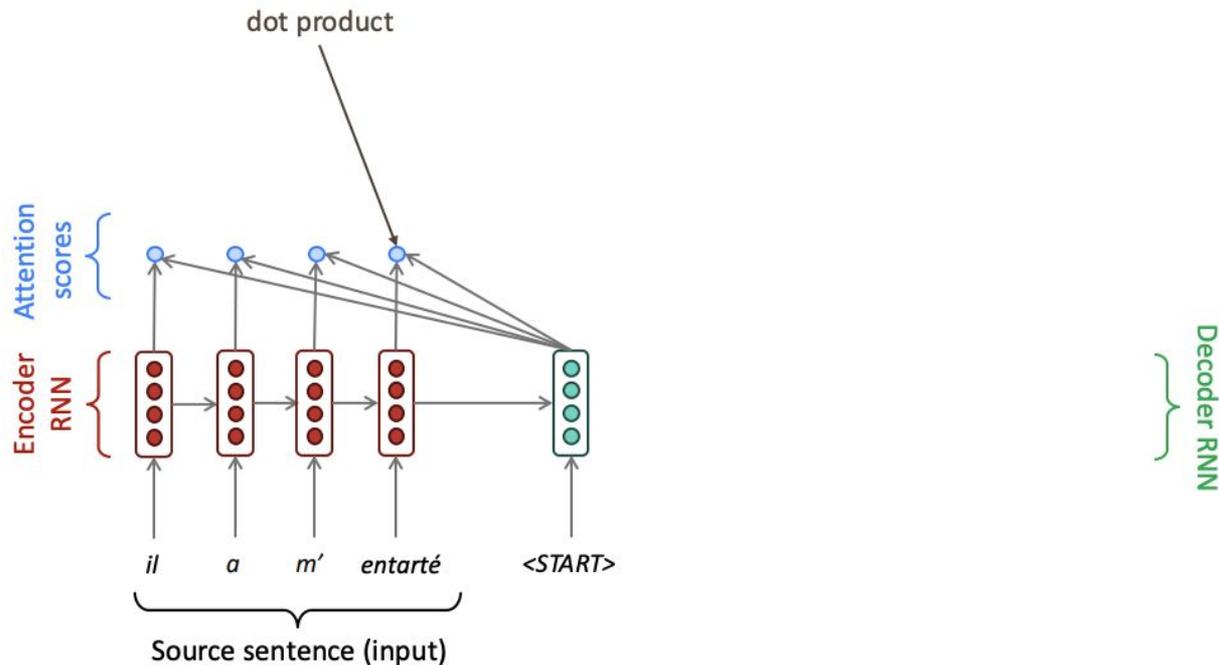
Attention is a solution!

- Attention provides a solution to the bottleneck problem!
- Core idea: on each step of the decoder, use **direct connection to the encoder to focus on a particular part of the source sequence!**
- In attention, the query matches all keys softly, to a weight between 0 and 1. The key's values are multiplied by the weights and summed!

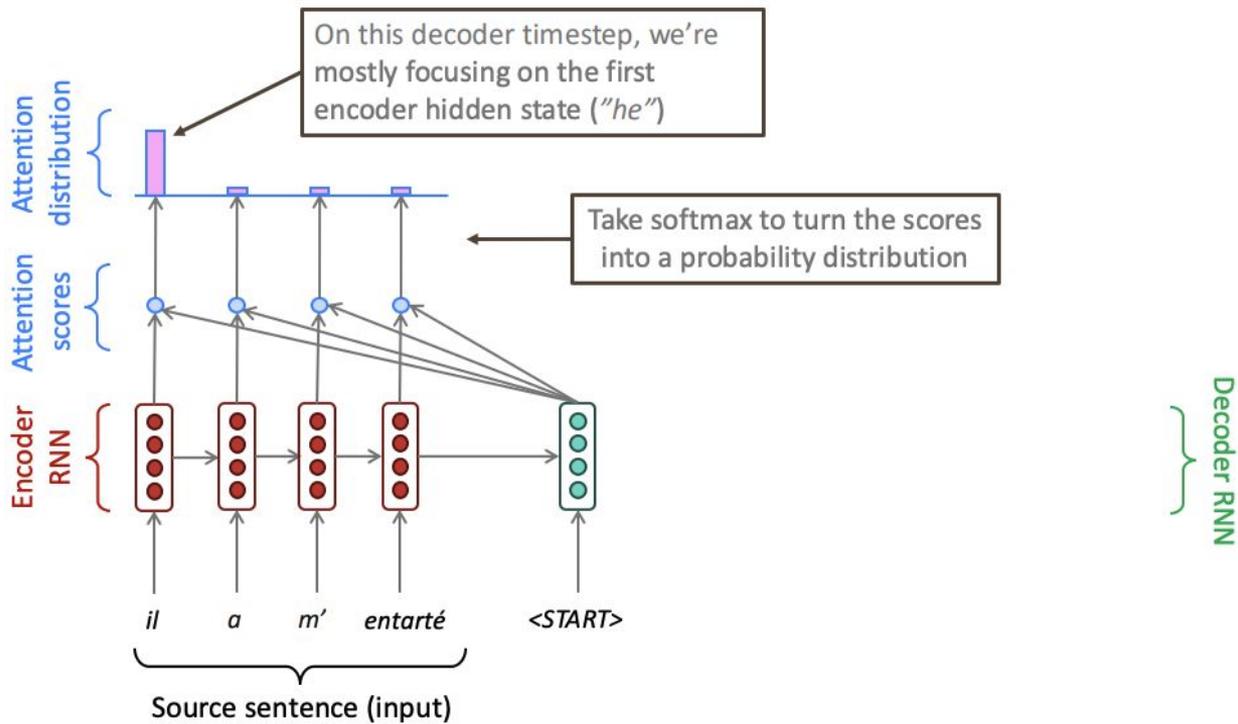


Attention in RNNs

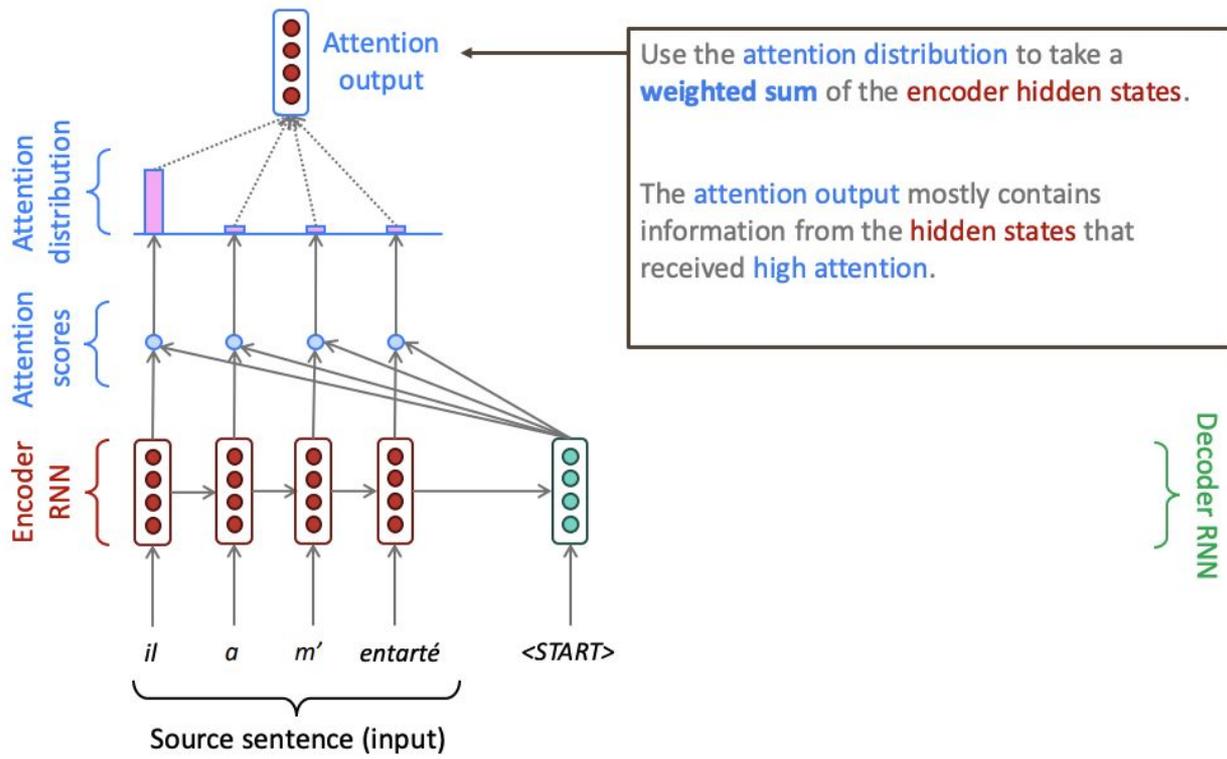
- On each step of the decoder, use **direct connection to the encoder** to focus on a particular part of the source sequence.



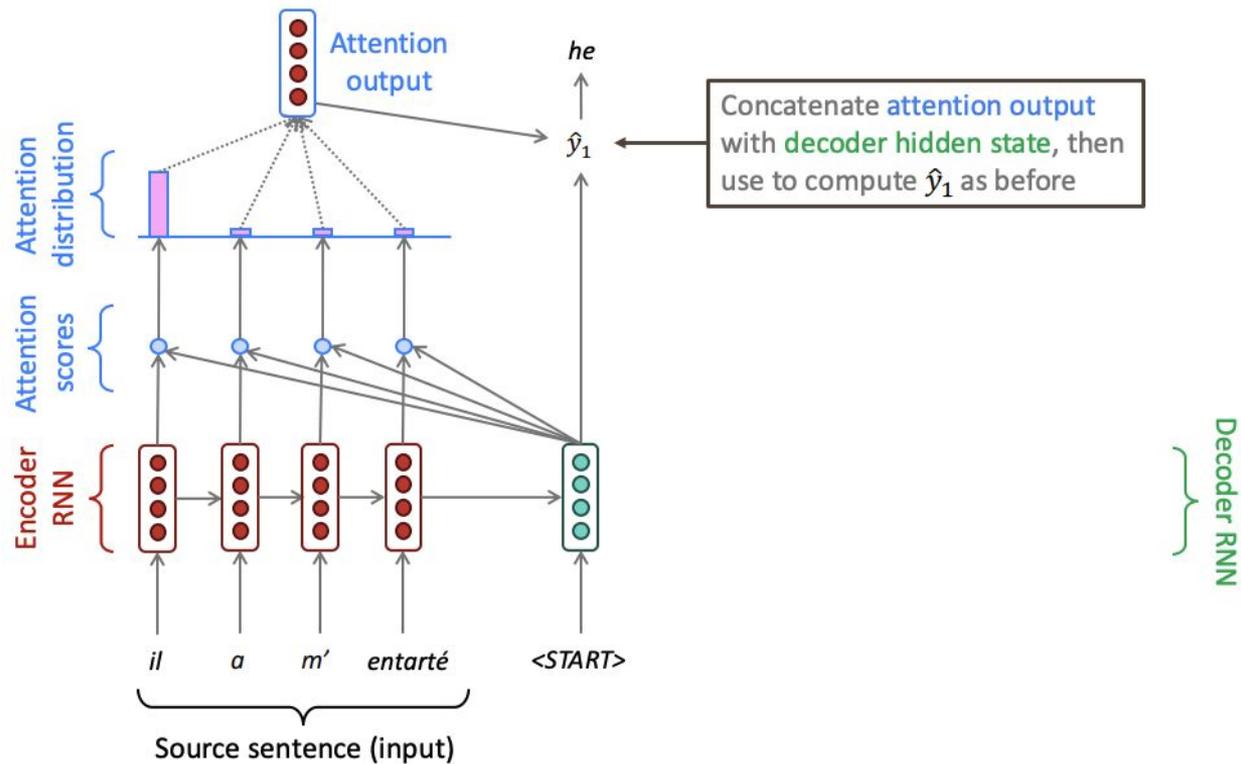
Attention in RNNs



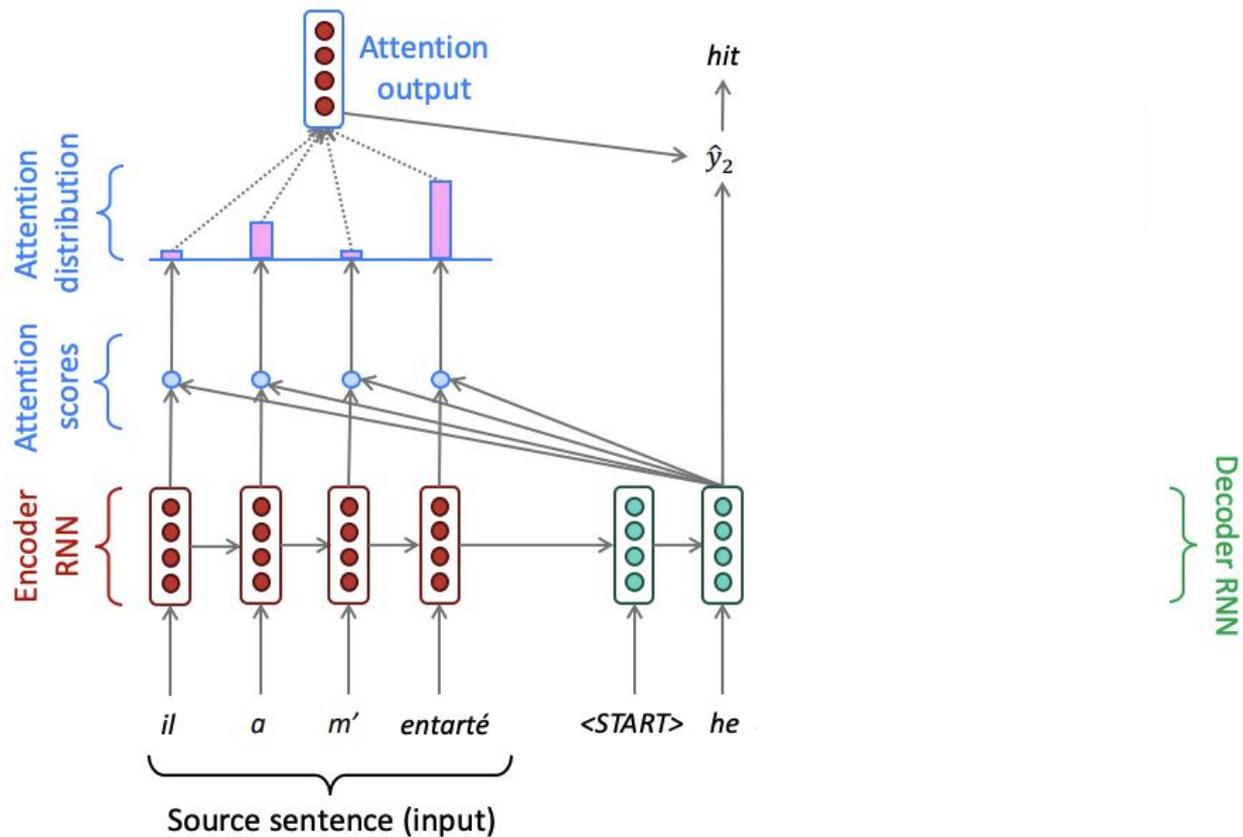
Attention in RNNs



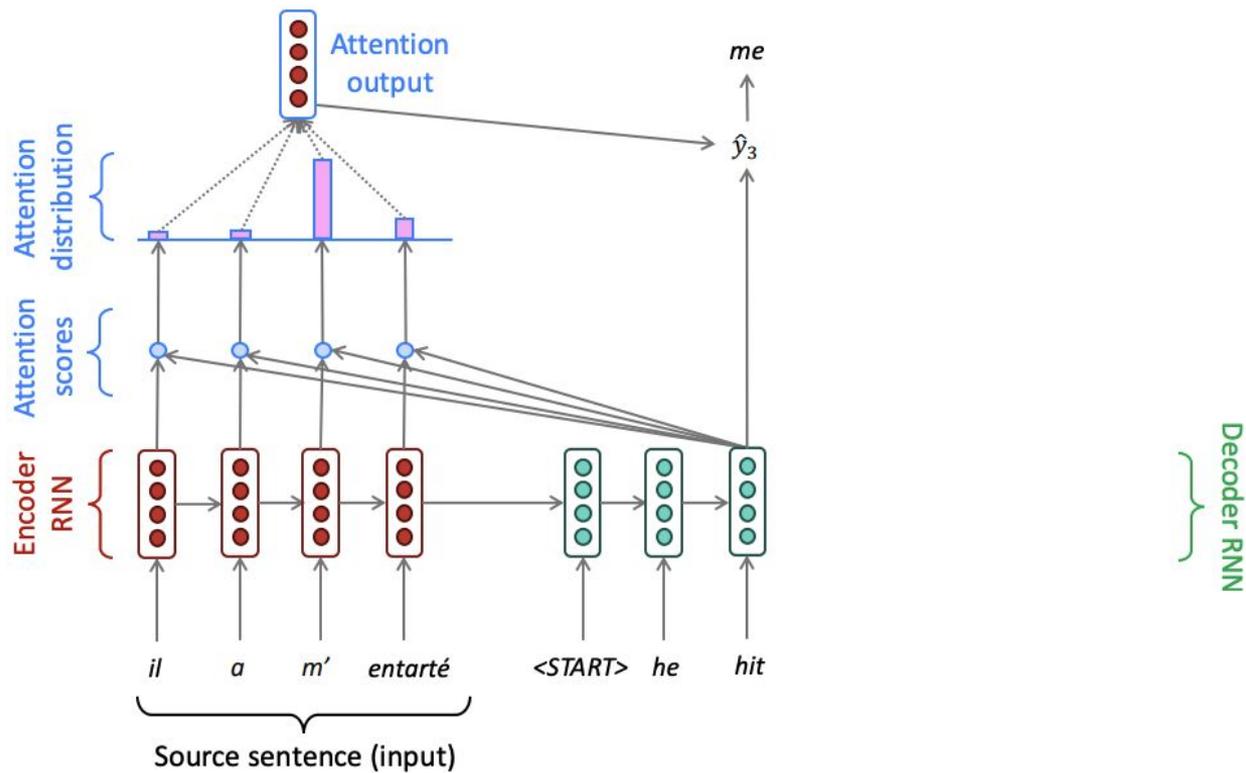
Attention in RNNs



Attention in RNNs



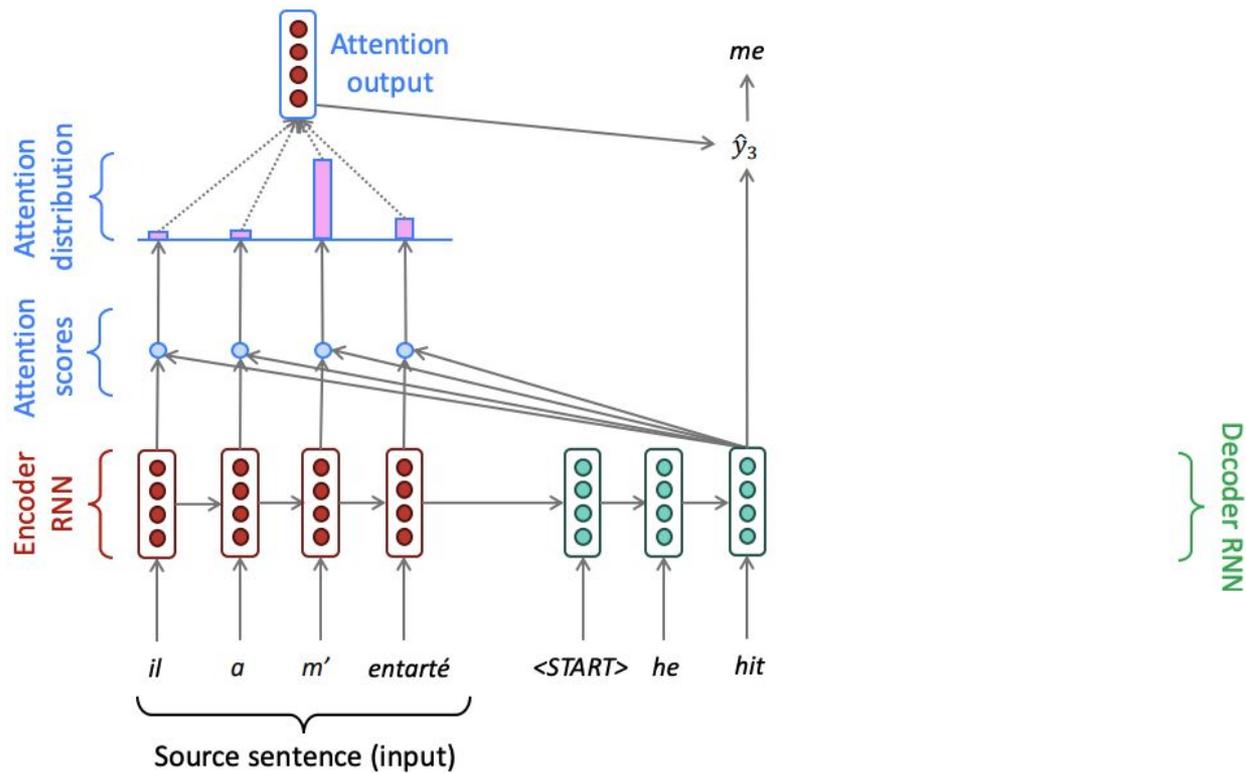
Attention in RNNs



Is Recurrent Necessary at All?

- Abstractly: **Attention** is a way to pass information from a sequence (x) to a neural network input. (h_t)
 - This is also exactly what RNNs are used for – to pass information!
 - Can we just get rid of the RNN entirely? Maybe attention is just a better way to pass information!
 - The building block we need is **self Attention!**
 - So far we saw cross-attention!
-

Attention in RNNs



Self-attention: Keys, Queries, and Values

Let $w_{1:n}$ be a sequence of words in vocabulary V , like *Zuko made his uncle tea*.

For each w_i , let $x_i = Ew_i$, where $E \in \mathbb{R}^{d \times |V|}$ is an embedding matrix.

1. Transform each word embedding with weight matrices Q, K, V , each in $\mathbb{R}^{d \times d}$

$$q_i = Qx_i \text{ (queries)} \quad k_i = Kx_i \text{ (keys)} \quad v_i = Vx_i \text{ (values)}$$

2. Compute pairwise similarities between keys and queries; normalize with softmax

$$e_{ij} = q_i^\top k_j \quad \alpha_{ij} = \frac{\exp(e_{ij})}{\sum_{j'} \exp(e_{ij'})}$$

3. Compute output for each word as weighted sum of values

$$o_i = \sum_j \alpha_{ij} v_i$$

Positional Embedding in Self-Attention

- Since **self-attention doesn't build in order information**, we need to encode the order of the sentence in our keys, queries, and values
- Consider representing each sequence index as a vector

$\mathbf{p}_i \in \mathbb{R}^d$, for $i \in \{1, 2, \dots, n\}$ are position vectors

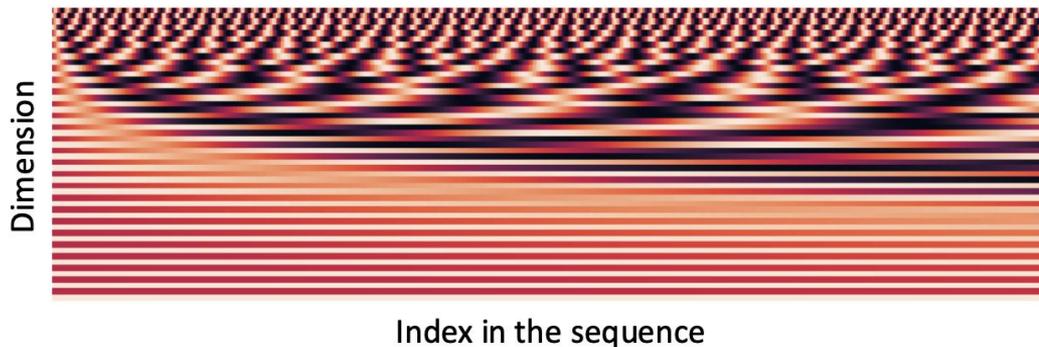
$$\tilde{\mathbf{x}}_i = \mathbf{x}_i + \mathbf{p}_i$$

In deep self-attention networks, we do this at the first layer! You could concatenate them as well, but people mostly just add...

Sinusoidal Positional Embedding

- Sinusoidal position representations: concatenate sinusoidal functions of varying periods
- Periodicity indicates that maybe “absolute position” isn’t as important
- It can extrapolate to longer sequences as periods restart!

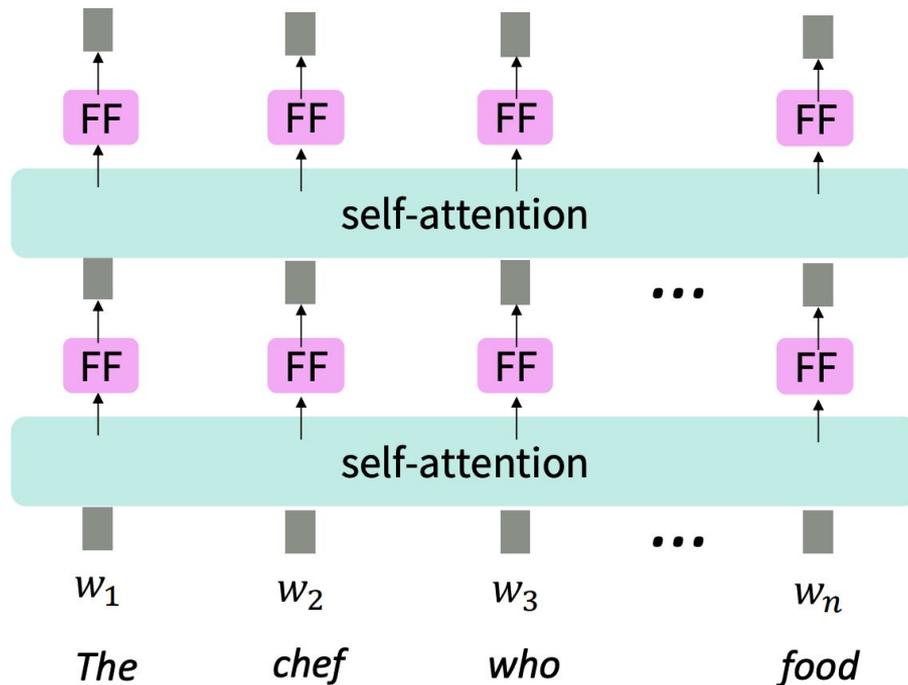
$$p_i = \begin{pmatrix} \sin(i/10000^{2*1/d}) \\ \cos(i/10000^{2*1/d}) \\ \vdots \\ \sin(i/10000^{2*d/2/d}) \\ \cos(i/10000^{2*d/2/d}) \end{pmatrix}$$



Non-Linearity in Self-Attention

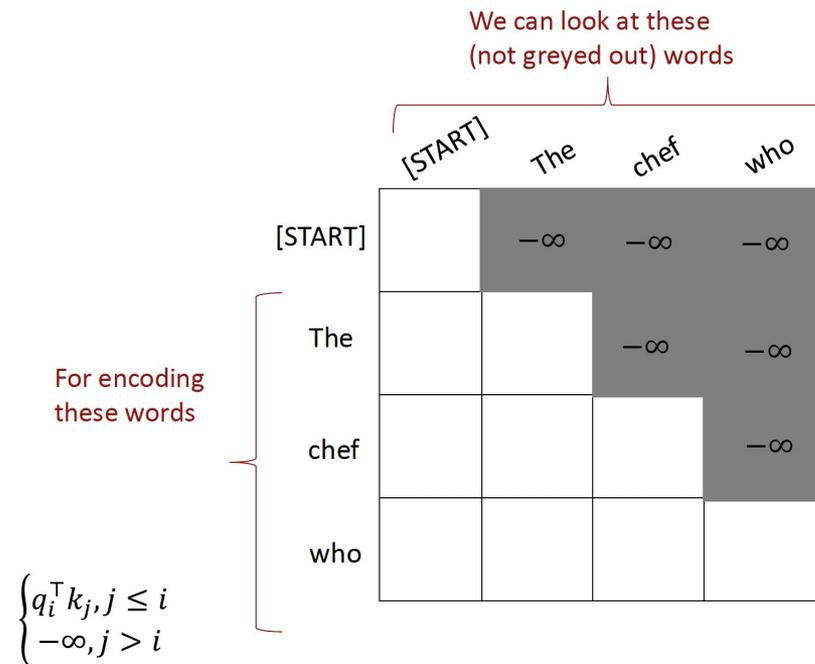
- Easy fix: add a **feed-forward network** to post-process each output vector.

$$\begin{aligned} m_i &= MLP(\text{output}_i) \\ &= W_2 * \text{ReLU}(W_1 \text{output}_i + b_1) + b_2 \end{aligned}$$



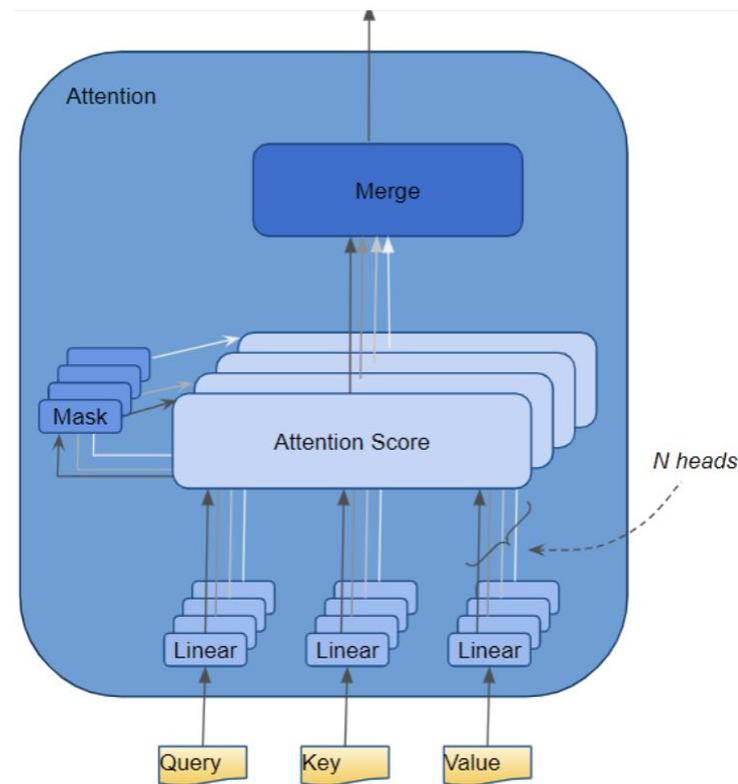
Causal Masking in Self-Attention

- For causality, we need to ensure **not to peek at the future**.
- At each timestep, we could change the set of keys and queries to **only include past words!**



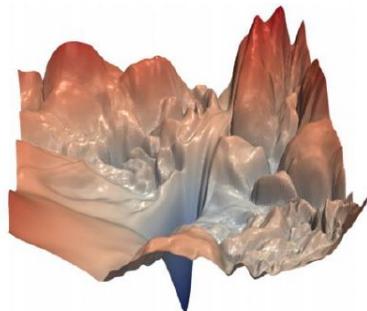
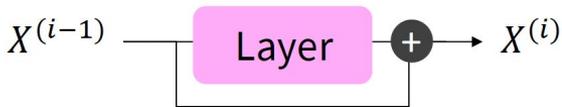
Multi-Head Self-Attention Layer

- The Attention module splits its Query, Key, and Value parameters N -ways and passes each split independently through a separate head.
- Calculations are combined together to produce a final attention score.
- Greater power to encode multiple relationships and nuances for each word.

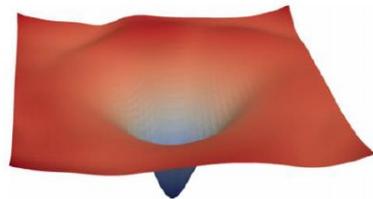


Residual Connections

- A trick to help models learn better!
- Gradient is 1 through residual connection
- Bias toward identity function.



[no residuals]



[residuals]

[Loss landscape visualization,
[Li et al., 2018](#), on a ResNet]

Layer Normalization

- A trick to help models **train faster**.
- Cut down on uninformative variation in hidden vectors by **normalizing to unit mean and standard deviation** within each layer.

$$\text{output} = \frac{x - \mu}{\sqrt{\sigma + \epsilon}} * \gamma + \beta$$

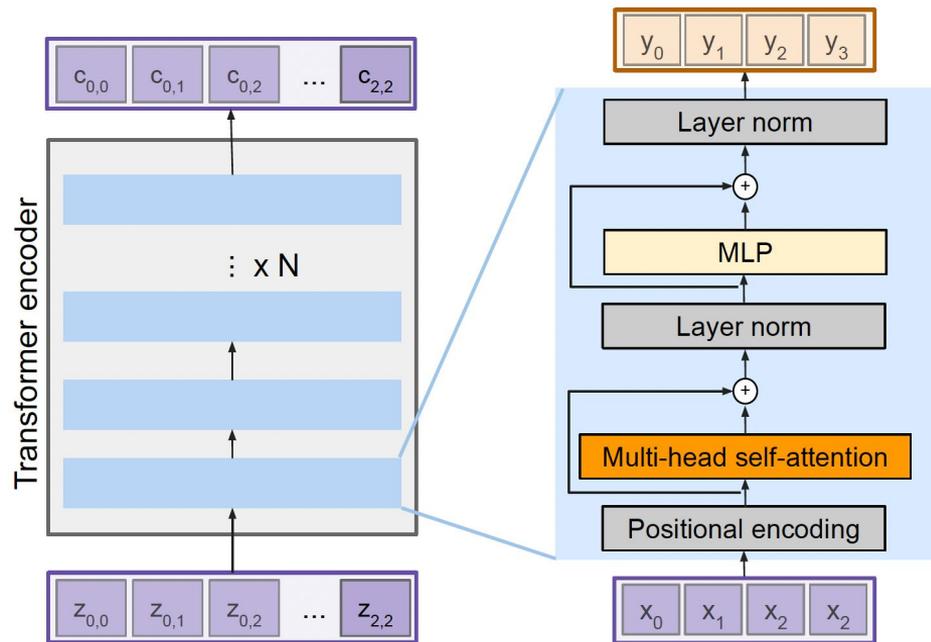
Normalize by scalar mean and variance

Modulate by learned elementwise gain and bias

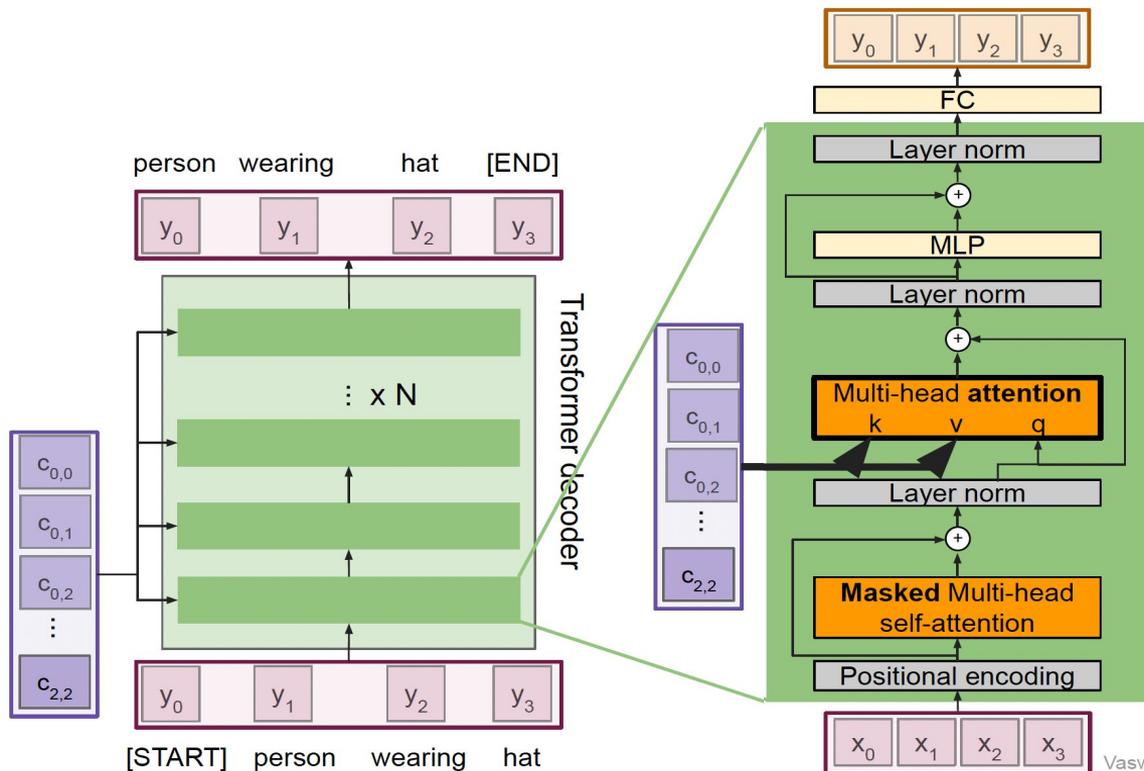
The diagram shows the Layer Normalization formula: $\text{output} = \frac{x - \mu}{\sqrt{\sigma + \epsilon}} * \gamma + \beta$. Two arrows point from descriptive text to parts of the formula. One arrow points from the text "Normalize by scalar mean and variance" to the denominator $\sqrt{\sigma + \epsilon}$. The other arrow points from the text "Modulate by learned elementwise gain and bias" to the terms γ and β .

Transformer Encoder

- Position representation
 - Specify the sequence order, since self-attention is an unordered function of its inputs.
- Nonlinearities
 - Frequently implemented as a simple feedforward network.
- Masking
 - Keep information about the future from “leaking” to the past.



Transformer Decoder

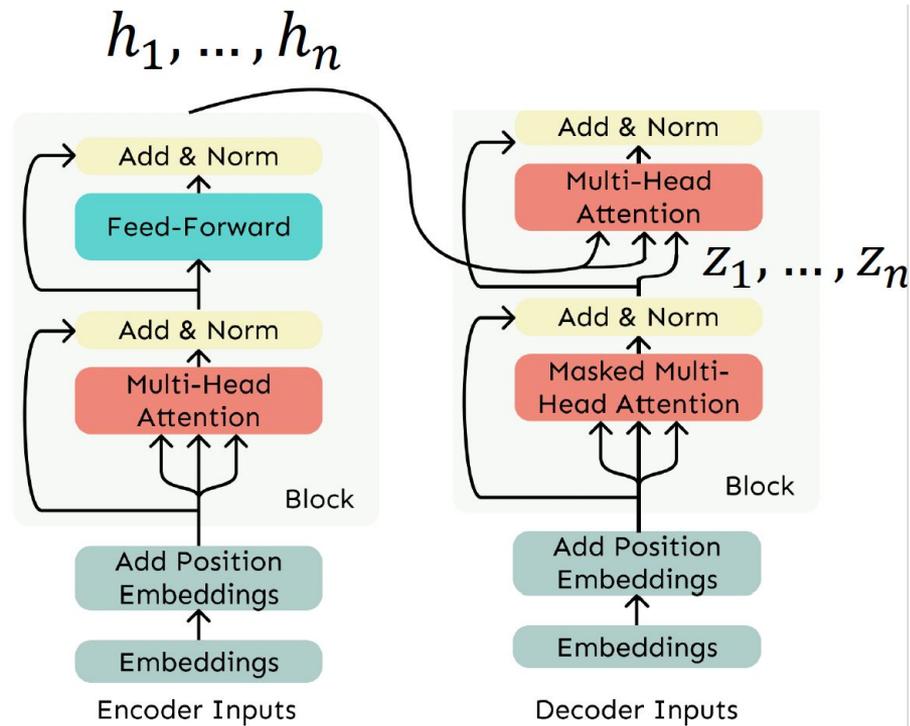


Multi-head attention block attends over the transformer encoder outputs.

For image captions, this is how we inject image features into the decoder.

Cross Attention

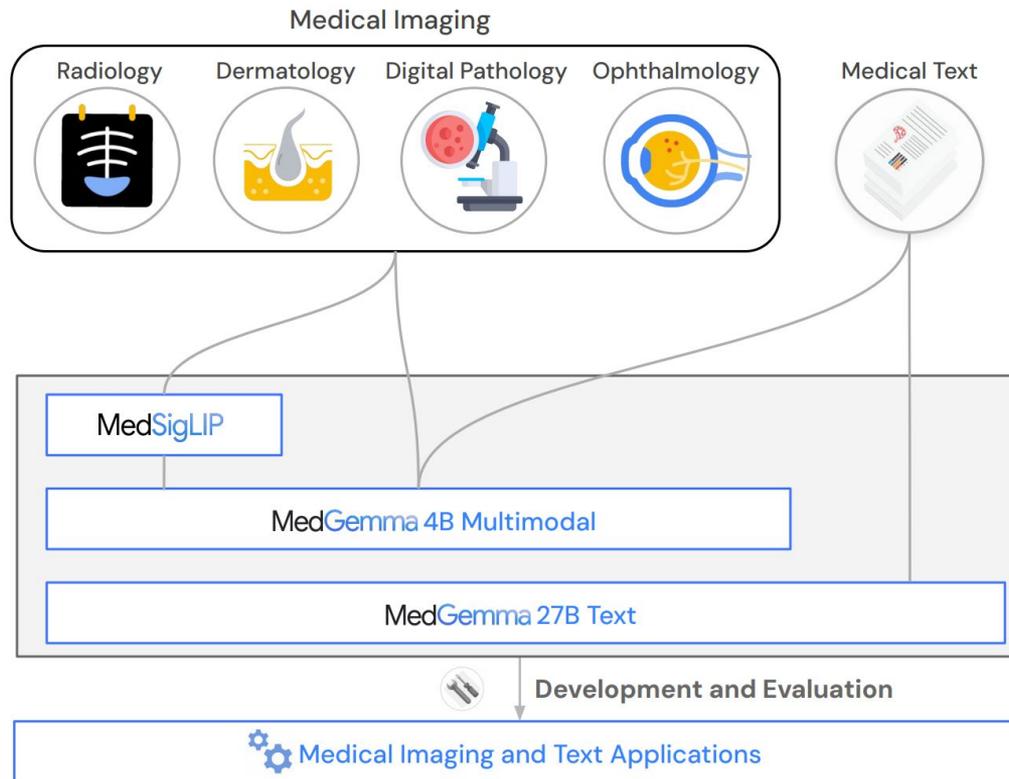
- Self-attention:
 - Keys, queries, and values from same source
- Cross-attention
 - The **keys and values** are from encoder (like a memory)
 - The **queries** are from the decoder





Inside an LLM

Vision-Language Models



 Prompt

You are an expert radiologist. Please succinctly describe the findings for the above chest x-ray.



MedGemma

The chest X-ray shows a large left pneumothorax with a chest tube in place. There is also a possible nodule in the right upper lobe. The mediastinum is midline. The heart size is normal. There is no evidence of pulmonary edema.

Reference Information: Radiologist Impression

Moderately large left hydropneumothorax (predominantly air-containing) with incompletely expanded left lung. If persistent, consider ex vacuo pneumothorax/trapped lung condition. Multiple right lung nodules, highly suspicious for metastases.

 Prompt

Describe this image and provide the most likely condition. Keep your answer brief



MedGemma

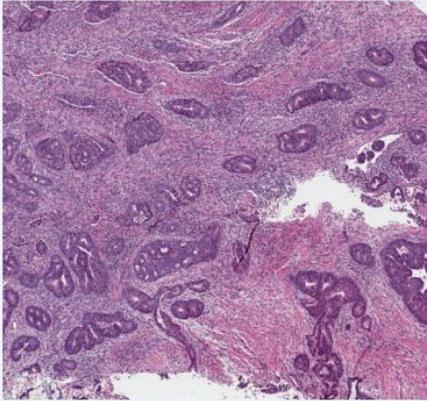
The chest X-ray shows a significant opacity in the left lower lung field, obscuring the costophrenic angle. This suggests a possible pleural effusion or consolidation. The right lung appears relatively clear. The heart size is within normal limits. The mediastinum is unremarkable.

Reference Information: Radiologist Impression

Lower left lung consolidation. Small-medium left pleural effusion. Similar though lesser findings right side.

 Prompt

Describe the findings and most likely diagnosis in this image. Be concise.



MedGemma

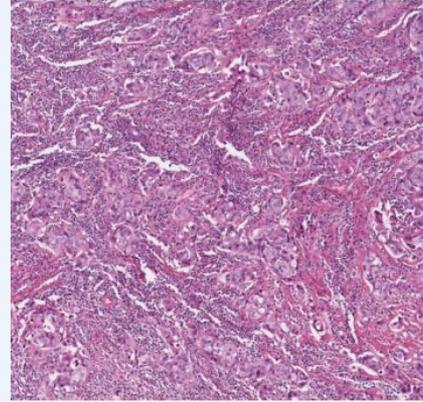
The image shows a histological section of colon tissue. The findings include a mix of glandular structures and stromal tissue. There are areas of inflammation and some degree of cellular atypia.

Most likely diagnosis: **Colorectal adenocarcinoma**

Reference Information:
Colon Adenocarcinoma

 Prompt

Describe this image and provide the most likely condition. Keep your answer brief.



MedGemma

The image shows a high-grade invasive carcinoma with significant cellular atypia, prominent nucleoli, and increased mitotic activity. This indicates a malignant tumor with aggressive growth.

Most likely diagnosis: **High-grade invasive carcinoma** (the specific type would require further information about the tissue origin).

Reference Information:
Invasive Ductal Carcinoma (Breast Cancer)