Drive-Thru Data: Using NLM APIs to Access Information Fast

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After this session, you should be able to...

- Explain...
 - -what an API is,
 - how APIs can help you interact with systems, and
 - why users might choose to use APIs.
- Describe the basic mechanics of using an API
- Identify...
 - some of NLM's APIs, and
 - -when a specific NLM API would be useful.

The World of NLM

Literature

- PubMed
- PMC
- Bookshelf

Consumer Health

MedlinePlus

Terminology

- MeSH
- RxNorm
- UMLS



Molecular Biology

- Nucleotide
- Protein
- SRA

Drugs and Chemicals

- DailyMed
- PubChem

Other

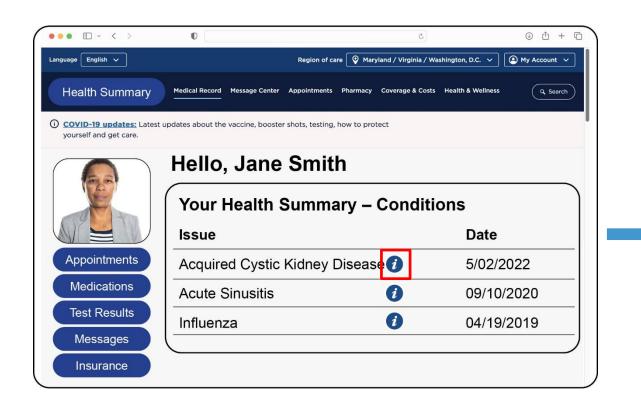
ClinicalTrials.gov

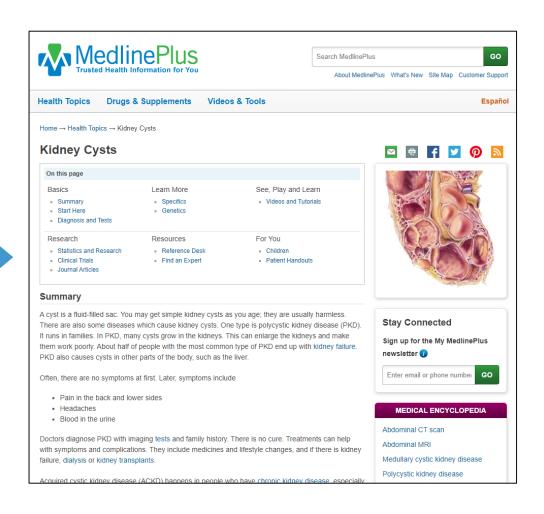
And many more...

Poll: Which categories of NLM products do you use?

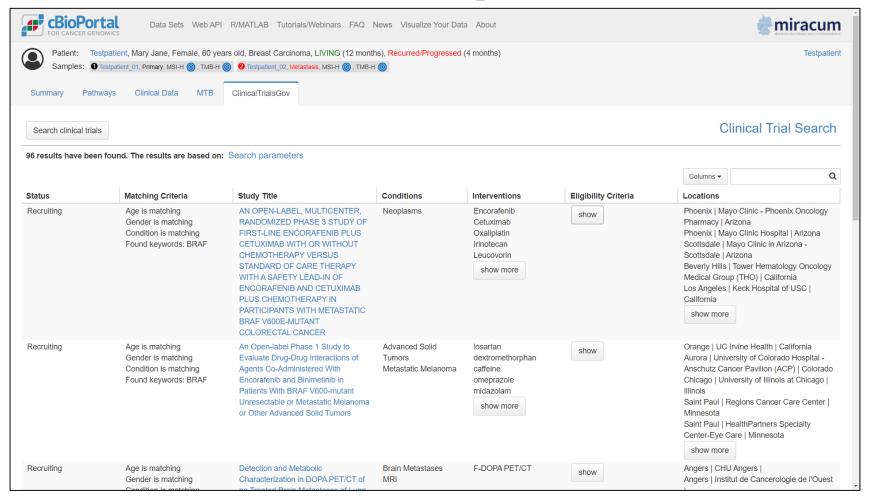
- Literature
- Consumer Health
- Terminology
- Molecular Biology
- Drugs and Chemicals
- Other

Example: Health info for patients in EHRs

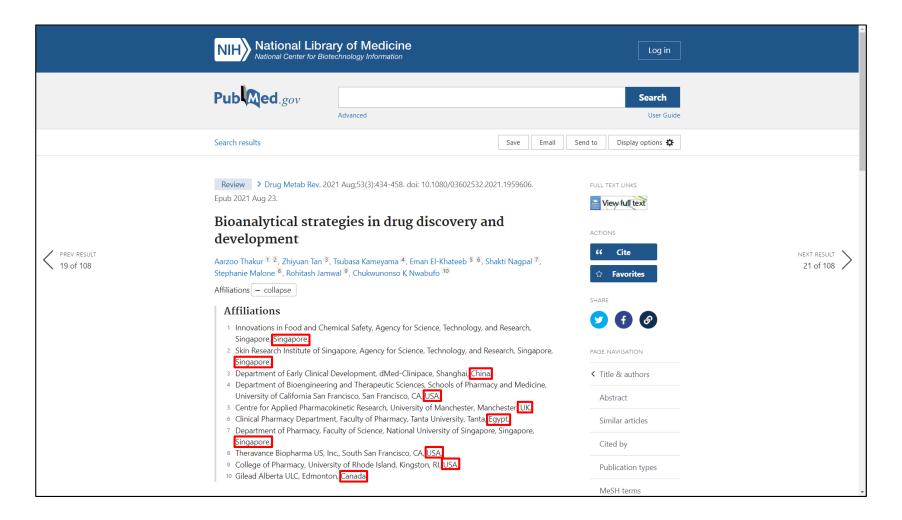




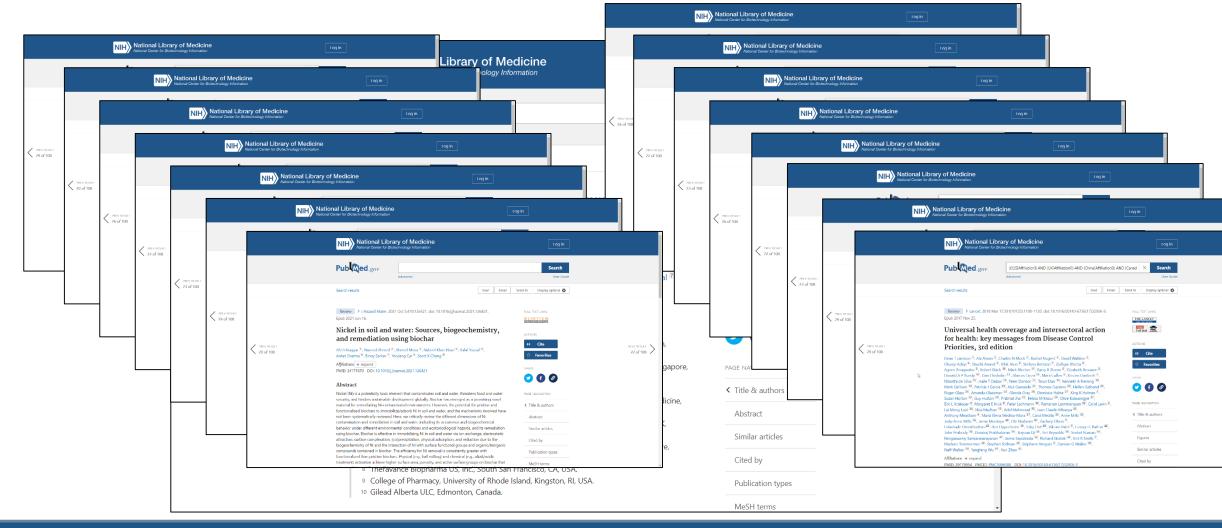
Example: Finding clinical trials for cancer patients



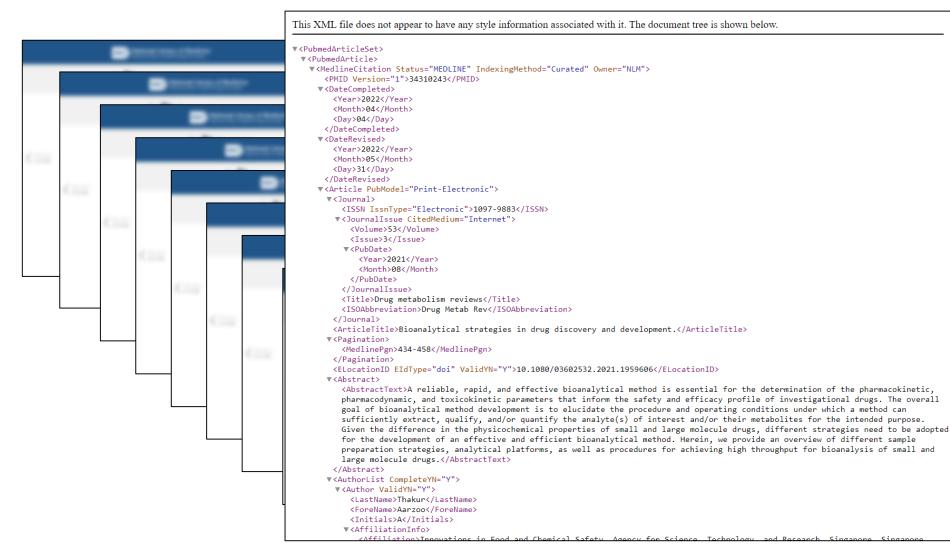
Example: Author nationality trends in PubMed



Example: Author nationality trends in PubMed



Example: Author nationality trends in PubMed





What do these projects have in common?

- Each uses NLM information...
 - ...but **not** NLM websites!
- They need a different type of access:
 - Outside of a web browser
 - -With limited (or zero) direct human interaction
 - To information in a specific format.
 - To information as data.

The solution?



Application Programming Interfaces (APIs)

Poll: What is your experience with APIs?

- Use them all the time!
- Use them periodically.
- Have used them in the past.
- Know about them, but haven't used them.
- This is all new to me!

What is an API?

- A set of protocols for contacting a remote system and making requests.
- Designed to be used "programmatically," not directly by humans.
- APIs typically include:
 - -a server, and
 - a set of rules for making requests (or "calls") to that server

A Drive Thru for Data



Why are APIs useful?

- API calls can be built-in to programs/applications.
 - Data can be requested/retrieved much faster
 - Less need for human intervention
- Some APIs offer more options for data retrieval:
 - Specialized formats
 - Specialized data

How (many) APIs work

- The way you access the API is via a URL
- The specific URL you use includes the address of the API you're using, plus the details of your request
- What information you get back depends on how you construct the URL.

The two parts of (many) API requests

The base URL

Indicates which API you're using

Some parameters

The details of what you're asking for

The Base URL

- The address of the API server
- Specific to each individual API
- Some examples:
 - MedlinePlus: https://wsearch.nlm.nih.gov/ws/query
 - -E-utilities: https://eutils.ncbi.nlm.nih.gov/entrez/eutils/
 - -MeSH RDF: https://id.nlm.nih.gov/mesh

Parameters

- Parameter options are specific to the API in question
 - -Actual parameters are specific to each request
- Can include things like:
 - Search strings
 - Results restrictions
 - Formatting options
 - -etc.
- An example:
 - -db=pubmed&id=1602668&retmode=xml&rettype=full

Building an API URL: MedlinePlus

- Start with the Base URL for MedlinePlus API
 - https://wsearch.nlm.nih.gov/ws/query

Building an API URL: Part Two

- Determine your parameters
 - Language: English or Spanish?
 - db=healthTopics
 - Search query: What are you looking for?
 - term=acid+reflux
 - Other options: How many results?
 - retmax=5

Putting it all together: MedlinePlus

Base URL

Parameters

Database

Search Query

of Results

https://wsearch.nlm.nih.gov/ws/query

db=healthTopics

term=acid+reflux

retmax=5

https://wsearch.nlm.nih.gov/ws/query?db=healthTopics&term=acid+reflux&retmax=5

What we get

```
on associated with it. The document tree is shown below.
This XML file does not appear
                            acid reflux
▼<nlmSearchResult>
   <term>acid reflux(/term>
   <file>viv i0hNNB</file>
   <server>pvlb7srch15</server>
   <count>12</count>
   <retstart>0</retstart>
   <retmax>5</retmax>
 ▼t num="12" start="0" per="5">
                                                                                        Reflux
   ▼<document rank="0" url="https://medlineplus.gov/gerd.hACld
      <content name="title">GERD</content>
      <content name="organizationName">National Library of Medicine</content>
      <content name="altTitle"><span class="qt0" Acid (/span> <span class="qt1" Reflux //span></content>
      <content name="altTitle"><span class="gt2">Gastroesophageal </span><span class="gt1"><span class="gt2">Reflux</span></span></span></content>
      <content name="altTitle"><span class="qt2">Gastroesophageal </span><span class="qt1"><span class="qt2">reflux</span></span></span> disease</content>
      <content name="FullSummary">Your esophagus is the tube that carries food from your mouth to your stomach. <span class="qt2">Gastroesophageal
      </span><span class="qt1"><span class="qt2">reflux</span></span> disease (GERD) happens when a muscle at the end of your esophagus does not
      close properly. This allows stomach contents to leak back, or <span class="qt1">reflux</span>, into the esophagus and irritate it. You
      may feel a burning in the chest or throat called heartburn. Sometimes, you can taste stomach fluid in the back of the mouth. If you have these
      symptoms more than twice a week, you may have GERD. You can also have GERD without having heartburn. Your symptoms could include a dry cough,
      asthma symptoms, or trouble swallowing.Anyone, including infants and children, can have GERD. If not treated, it can lead to more
      serious health problems. In some cases, you might need medicines or surgery. However, many people can improve their symptoms by:
      Avoiding alcohol and spicy, fatty or acidic foods that trigger heartburnEating smaller mealsNot eating close to bedtime
      Losing weight if needed Wearing loose-fitting clothesNIH: National Institute of Diabetes and Digestive and
      Kidney Diseases</content>
      <content name="mesh"><span class="qt2">Gastroesophageal </span><span class="qt1"><span class="qt2">Reflux</span></span></content>
      <content name="groupName">Digestive System</content>
      <content name="snippet"> Your esophagus is the tube that carries food from your mouth to your stomach. <span class="qt2">Gastroesophageal
      </span><span class="qt1"><span class="qt2">reflux</span></span> disease (GERD) happens when a muscle at the end of your ... </content>
    </document>
   ▼<document rank="1" url="https://medlineplus.gov/heartb
      <content name="title">Heartburn</content>
      <content name="organizationName">National Library of Medicine</content>
      <content name="altTitle"><span class="qt0" Acid (/span> <span class="qt1" Reflux (/span></content>
      <content name="altTitle"><span class="at0">Acid</span> indigestion</content>
```

You Need a Car



What kind of car?

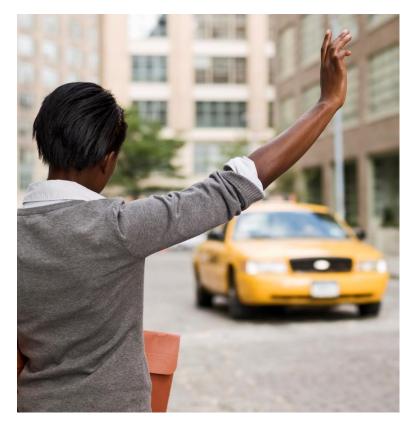


What if I don't know how to drive?

Learn to drive...



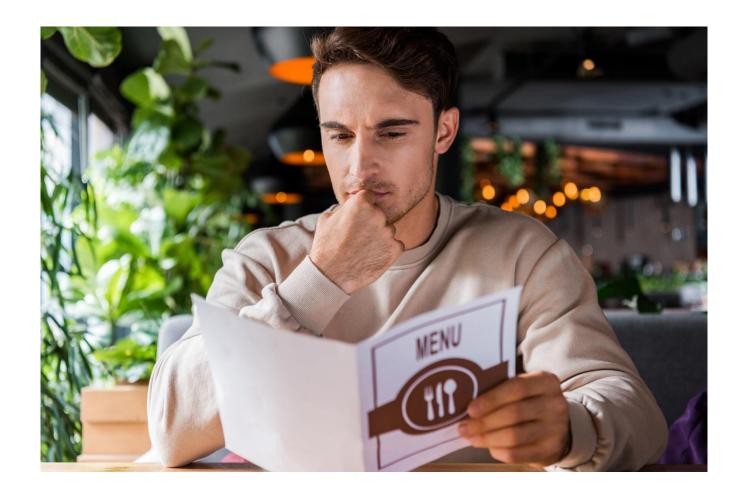
...or find a driver!



Poll: Any programming experience?

- R
- Python
- C++
- Shell scripting (Linux/Unix)
- PHP/JavaScript
- MatLab
- Other (tell us in chat)
- None yet!

What's on the menu? NLM data!



Choosing the right API

- Remember! Different APIs for different purposes!
- When deciding to use an API, first question: does it have what I need?
- If a resource has multiple APIs, may serve different data in different formats.

MedlinePlus

- MedlinePlus Web Service
 - -Retrieves MedlinePlus Health Topics in XML
 - Can help embed MedlinePlus content on a webpage
- MedlinePlus Connect
 - Integrated into Electronic Health Records
 - Used primarily by EHR vendors/developers

PubMed

- E-Utilities
 - Access 35+ NCBI databases, including PubMed
 - Best way to access PubMed via API
- Literature Citation Exporter
 - Converts PMIDs into citation strings
- Citation Matcher
 - Converts citation strings to PMIDs

PMC/Bookshelf

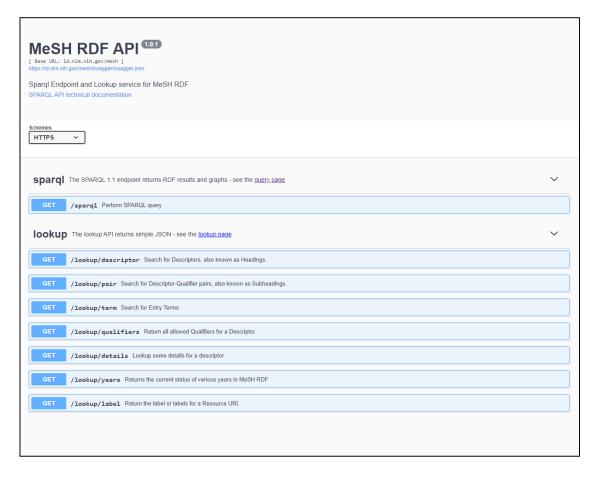
- E-utilities (again)
 - Access metadata and (some) full-text
- OAI-PMH
 - Full-text from PMC/Bookshelf Open Access subsets
 - Uses industry standard for digital repositories

Medical Subject Headings (MeSH)

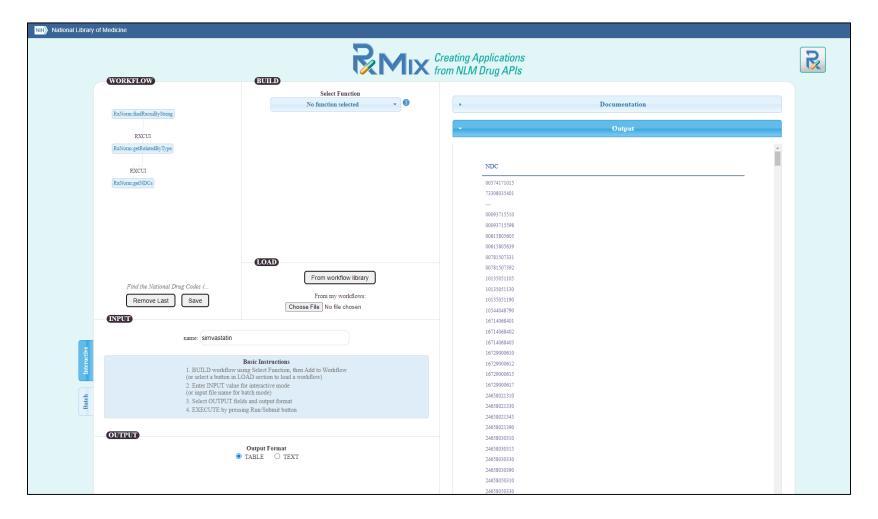
E-utilities (yet again)

```
This XML file does not appear to have any style information associated with it. The document tree is shown below.
▼<eSummarvResult>
 ▼<DocSum>
    <Id>68056989</Id>
    <Item Name="DS_YearIntroduced" Type="String">2010</Item>
    <Item Name="DS ScopeNote" Type="String">MYOCARDIAL INFARCTION in which the inferior wall of the heart is involved. It is often caused by
    occlusion of the right coronary artery.</Item>
    <Item Name="DS_RegistryNumber" Type="String"/>
    <Item Name="DS_HeadingMappedTo" Type="String"/>
   ▼<Item Name="DS_MeshTerms" Type="List">
      <Item Name="string" Type="String">Inferior Wall Myocardial Infarction</Item>
      <Item Name="string" Type="String">Diaphragmatic Myocardial Infarction</Item>
      <Item Name="string" Type="String">Diaphragmatic Myocardial Infarctions</Item>
      <Item Name="string" Type="String">Infarction, Diaphragmatic Myocardial</Item>
      <Item Name="string" Type="String">Infarctions, Diaphragmatic Myocardial</Item>
      <Item Name="string" Type="String">Myocardial Infarction, Diaphragmatic</Item>
      <Item Name="string" Type="String">Myocardial Infarctions, Diaphragmatic</Item>
      <Item Name="string" Type="String">Myocardial Infarction, Inferior Wall</Item>
      <Item Name="string" Type="String">Inferior Myocardial Infarction</Item>
      <Item Name="string" Type="String">Infarction, Inferior Myocardial</Item>
      <Item Name="string" Type="String">Infarctions, Inferior Myocardial</Item>
      <Item Name="string" Type="String">Inferior Myocardial Infarctions</Item>
      <Item Name="string" Type="String">Myocardial Infarction, Inferior</Item>
      <Item Name="string" Type="String">Myocardial Infarctions, Inferior</Item>
      <Item Name="string" Type="String">Acute Inferior Myocardial Infarction</Item>
   ▼<Item Name="DS Subheading" Type="List">
      <Item Name="string" Type="String">analysis</Item>
      <Item Name="string" Type="String">anatomy and histology</Item>
      <Item Name="string" Type="String">blood</Item>
      <Item Name="string" Type="String">chemically induced</Item>
      <Item Name="string" Type="String">classification</Item>
      <Item Name="string" Type="String">complications</Item>
      <Item Name="string" Type="String">diagnosis</Item>
      <Item Name="string" Type="String">diagnostic imaging</Item>
      <Item Name="string" Type="String">drug therapy</Item>
      <Item Name="string" Type="String">epidemiology</Item>
      <Item Name="string" Type="String">ethnology</Item>
      <Item Name="string" Type="String">etiology</Item>
      <Item Name="string" Type="String">genetics</Item>
      <Item Name="string" Type="String">immunology</Item>
      <Item Name="string" Type="String">metabolism</Item>
      <Item Name="string" Type="String">mortality</Item>
      <Item Name="string" Type="String">pathology</Item>
      <Item Name="string" Type="String">physiology</Item>
      <Item Name="string" Type="String">physiopathology</Item>
      <Item Name="string" Type="String">prevention and control</Item>
      <Item Name="string" Type="String">statistics and numerical data</Item>
      <Item Name="string" Type="String">surgery</Item>
      <Item Name="string" Type="String">therapy</Item>
```

MeSH RDF



RxNorm



ClinicalTrials.gov

	NIH) U.S. National Library of Medicine Clinical Trials. gov API	API Full Study Demo
If you are looking for information about clinical studies, please visit <u>ClinicalTrials.gov</u> .		
	<u>API Home</u>	
Full Studies Request		
Specify the query parameters for a Full Studies query URL:		
Query URL:	/api/query/full_studies	
Search Expression:		
expr= heart attack		
(See API Search Expressions and Syntax)		
Minimum Rank:	min_rnk= 1	
Maximum Rank:	max_mk=	
Format:	fmt= xml •	
	Send Request	
Scroll up to access the request controls		
Response		
View a formatted <u>query response</u> , including the query URL, for the Full Studies request:		
URL: https://clinicaltrials.gov/api/query/full_studies?expr=heart+attack&min_rnk=1&max_rnk=&fmt=xml		
Save to file		
<pre> <fullstudiesresponse> <apivrs)1.0.85< apivrs=""></apivrs)1.0.85<></fullstudiesresponse></pre>		

Poll: Which API is most interesting?

- MedlinePlus Web Service/MedlinePlus Connect
- E-utilities (PubMed, MeSH, PMC)
- Other PubMed APIs
- OAI-PMH (PMC, Bookshelf)

- MeSH RDF
- RxNormAPI
- ClinicalTrials.gov
- Something else
- Still not sure why I would use an API...

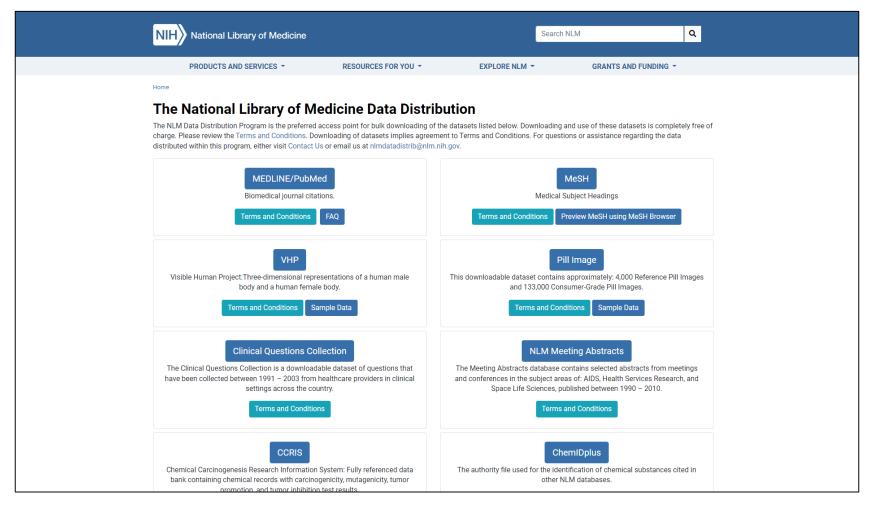
To recap: when should I use APIs?

- Working in a programming environment
- Need NLM data in a machine-readable format
- Need up-to-date data quickly/on-demand
- Have specific things to search for/request

When should I not use APIs?

- When you're NOT programming!
- When APIs aren't an option
- When exploring/browsing a resource
- When you need all of the data

Bulk Downloads

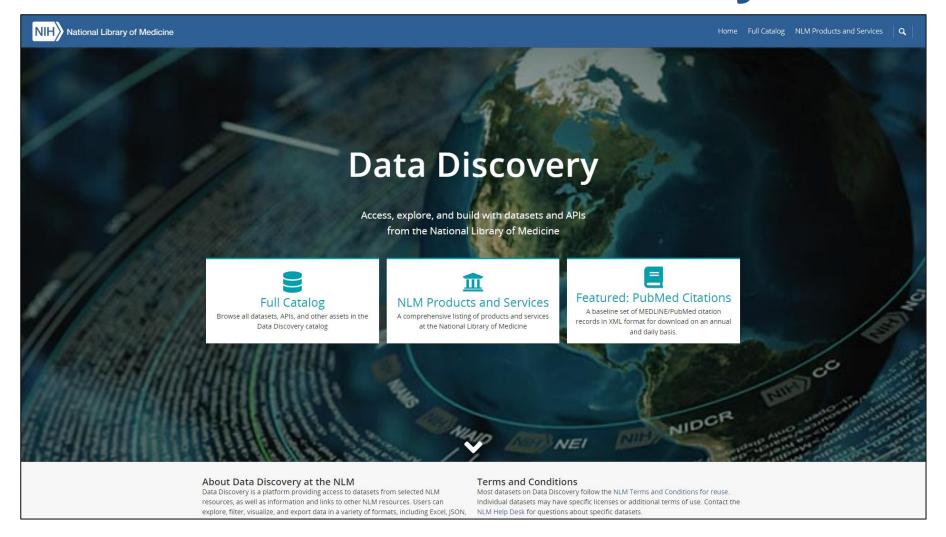


https://www.nlm.nih.gov/databases/download/data_distrib_main.html

Where to go next?

- Learn about programming or find a programmer
 - Online courses
 - Library Carpentry
 - Ask around!
- Think about your project
 - What do you know?
 - What do you need to know?
- Find the right API for you

NLM Data Discovery



Learn more about NLM Resources!

- Training from NNLM
 - https://www.nnlm.gov/training
- Educational Resources (and more training) from NLM
 - https://learn.nlm.nih.gov
- Past and Upcoming FDLP Academy Webinars

Read the documentation!

- Tells you what the API can and can't do
- Instructions on syntax, formatting requests
- Provide guidelines for usage
- May include example API calls

Questions?

