

METS-CoV: A Dataset of Medical Entity and Targeted Sentiment on COVID-19 Related Tweets

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Introduction

Motivation:

- There is a large body of social media-based public health studies, especially during the pandemic when clinical and survey studies are difficult to conduct.
- Existing natural language processing (NLP) tools struggle to fulfill the surging demand for accurate **social media-based public healthcare analysis** due to the lack of relevant datasets.
- Named entity recognition (NER) and targeted sentiment analysis (TSA) are two important tasks for studying user foci and attitudes (Figure 1).

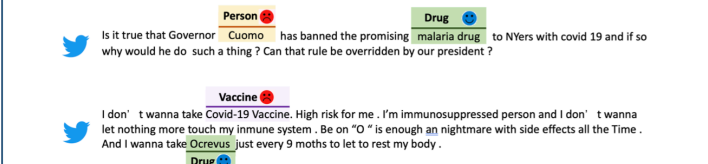


Figure 1: Examples of medical entities and targeted sentiments in tweets.

Contribution:

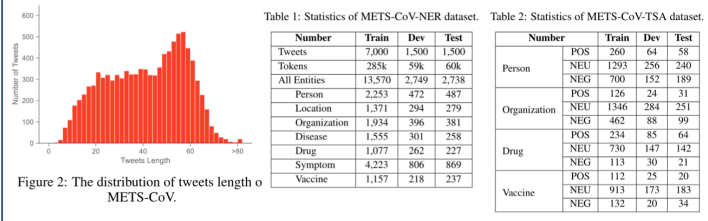
- We released **METS-CoV** (Medical Entities and Targeted Sentiments on CoVid-19-related tweets), a dataset annotated with:
 - 10,000 tweets**
 - 7 types of entities:** Disease, Drug, Symptom, Vaccine, Person, Location, and Organization.
 - sentiments of 4 types of entities:** Person, Organization, Drug, and Vaccine.
- We designed detailed **guidelines** for annotating medical entities (Disease, Drug, Symptom, Vaccine) on tweets.
- We **benchmarked** the performance of classical machine learning models and state-of-the-art deep learning models including pre-training language models on NER and TSA tasks of METS-CoV.

The METS-CoV Dataset

Data Collection:
 We collected COVID-19-related tweets ranging from February 1, 2020 to September 30, 2021. We removed non-English tweets, retweets, and tweets with URLs. We used a list of symptom keywords to match medical-related tweets. **2,208,676** tweets remained in our final dataset.

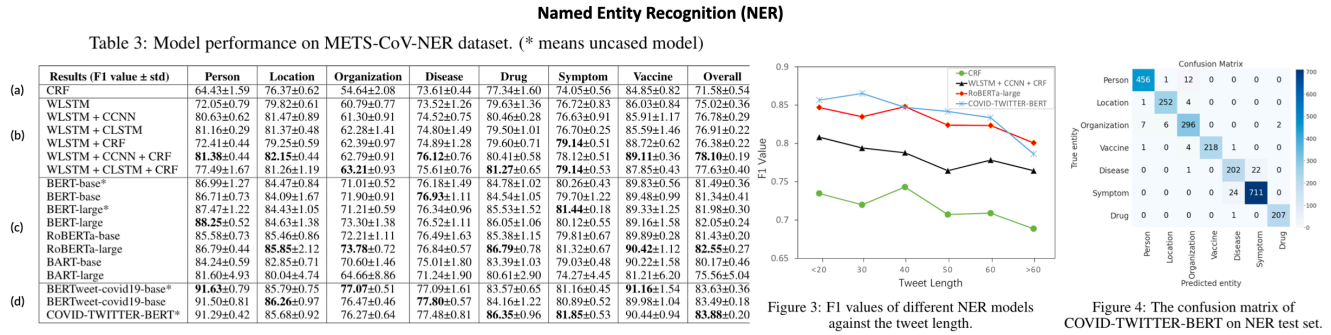
Data Annotation:
 We defined 7 entity types based on public health research needs, including 3 general types and 4 medical types. Then we selected 4 entity types for sentiment annotation using 3 sentiment labels: *positive*, *negative*, and *neutral*.

Data Statistics:
 Figure 2, Table 1 and 2. Read the paper for more:



Model Benchmarking

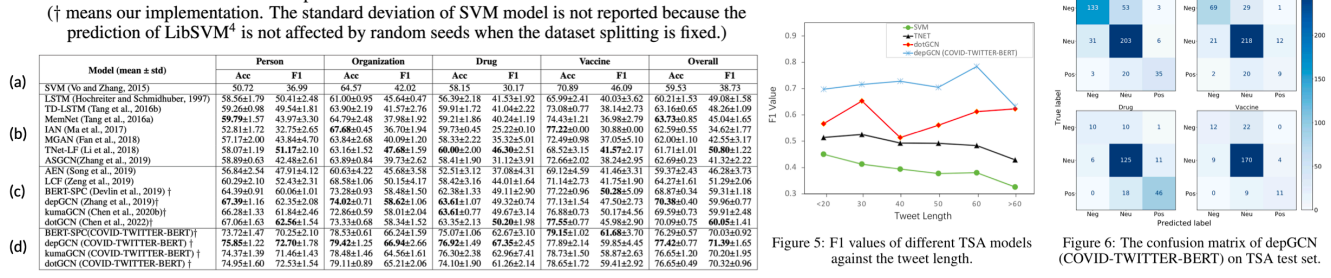
We evaluated the performance of (a) statistical machine learning models, (b) neural networks, (c) general domain large-scale pre-trained language models (PLM), and (d) COVID-19-related PLM for the NER task and the TSA task on METS-CoV. In addition, we selected the best model from each group for in-depth analysis and discussion.



Observations:

- Overall performance** (Table 3): COVID-TWITTER-BERT is a strong baseline on the NER subset, but F1 values of Disease and Organization entities are suboptimal.
- Effect of tweet lengths** (Figure 3): All models' performance decreases as tweet lengths increase. The performance is generally better when tweet lengths ≤ 40 tokens.
- In-depth study** (Figure 4): COVID-TWITTER-BERT extracts entities correctly in most cases. But it tends to confuse Symptom and Disease.

Targeted Sentiment Analysis (TSA)



Observations:

- Overall performance** (Table 4): Pre-trained models on COVID-19 tweets, such as COVID-TWITTERBERT, has better performance on TSA subset.
- Impact of tweet lengths** (Figure 5): For SVM and TNET, their F1 values gradually decrease as tweet lengths increase. But for depGCN (COVID-TWITTER-BERT), its F1 value remains stable when the tweet length ≤ 50. The performance increases to 0.8 when the tweet length = 60, and decreases to about 0.6 when the length further increases to > 60.
- In-depth study** (Figure 6): the current best TSA model has moderate performance. More robust models are needed to accurately distinguish sentiment polarities.

Conclusions & Future Work

Public health researchers can use METS-CoV to mine valuable medical information from tweets. For example, the dataset can be used as a training dataset for examining public attitudes toward COVID-19 vaccines and drugs, tracking the public's mental status change during different COVID-19 phases, etc. Our experiments also show that current models have not fully exploited the dataset's potential. We call for more efforts on developing models for social media-based public health studies.

For ethics discussions, code, data, and guidelines, please refer to our paper and GitHub page.

