



# DeltaSHAP: Explaining Prediction Evolutions in Online Patient Monitoring with Shapley Values

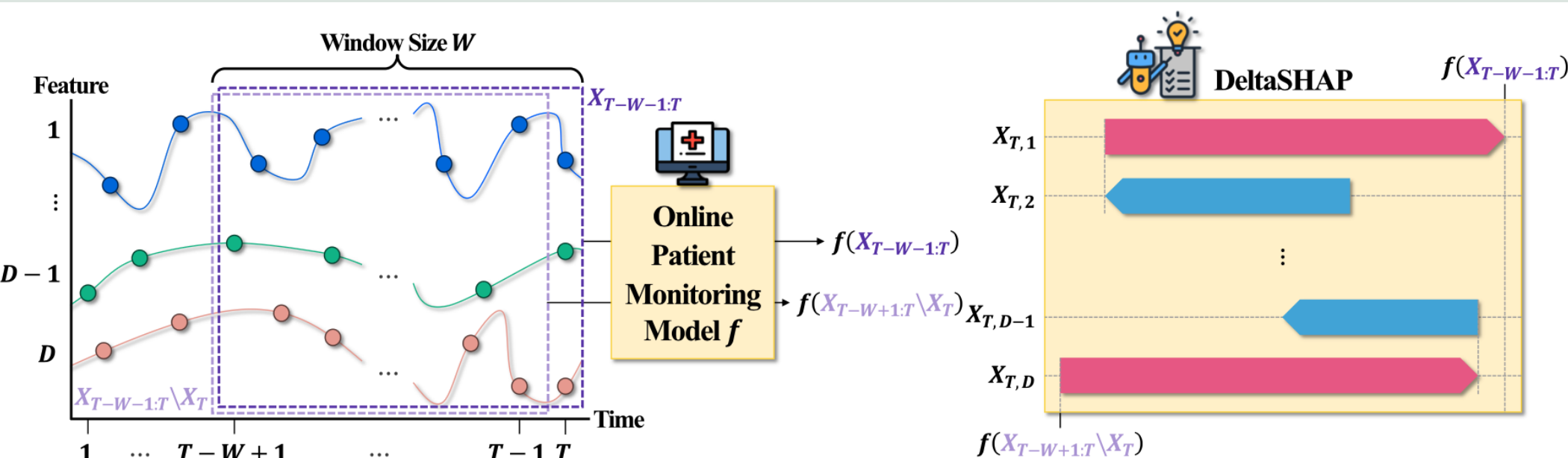
Changhun Kim<sup>1,2\*</sup> Yechan Mun<sup>1\*</sup> Sangchul Hahn<sup>1</sup> Eunho Yang<sup>1,2</sup>  
<sup>1</sup>AITRICS <sup>2</sup>KAIST \*Equal Contribution

**TL;DR: We propose a novel SHAP-based XAI algorithm tailored for online patient monitoring.**

## Contribution

- We propose **DeltaSHAP**, a novel XAI algorithm for **online patient monitoring** that attributes **prediction changes** over time to **newly observed features**, with **directional attributions** and **real-time efficiency** via Shapley Value Sampling.
- We introduce **new evaluation metrics**—Area Under Prediction Difference (**AUPD**) and Area Under Prediction Preservation (**AUPP**)—to quantitatively evaluate the **faithfulness** and **sufficiency** of feature attributions in time series XAI.
- Extensive experiments on real-world clinical datasets demonstrate that DeltaSHAP provides more **faithful, stable, and clinically interpretable explanations** compared to existing XAI baselines.

## Proposed Method: DeltaSHAP

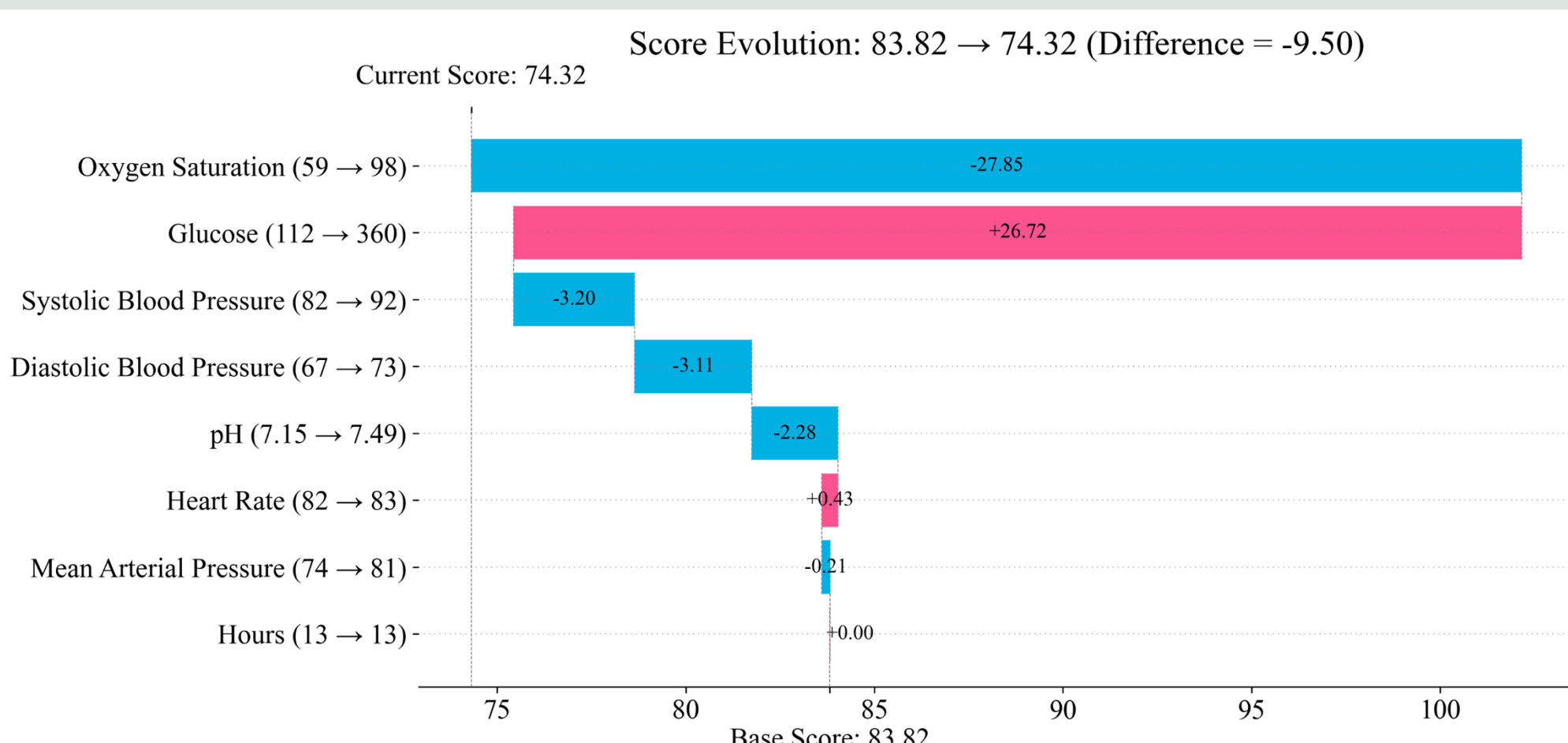


- DeltaSHAP** attributes the **prediction change** caused by **newly observed features** at time  $T$  by considering:  

$$\Delta = f(X_{T-W+1:T}) - f(X_{T-W+1:T} \setminus X_T).$$
- Shapley Value Sampling** estimates each feature's **marginal effect** by averaging over **sampled permutations**:  

$$\hat{\phi}_j(f, X_{T-W+1:T}) = \frac{1}{N} \sum_{\pi \in \Omega} [v(S_{\pi,j} \cup \{j\}) - v(S_{\pi,j})],$$
 where  $S_{\pi,j}$  is set of features before  $j$  in permutation  $\pi$ , and  $v(S)$  is a model output when only features in  $S$  at  $T$  are observed.
- Baseline Selection**
  - Missing features are filled with **last observations**, matching **preprocessing** and avoiding **unrealistic imputations**.
- Why DeltaSHAP?**
  - Intuitive:** attributes **prediction change** to **observed features** at  $T$  with **directional** explanation.
  - Practicality:** model-agnostic and time-efficient.
  - Normalization** with  $\phi_j(f, X_{T-W+1:T}) = \hat{\phi}_j(f, X_{T-W+1:T}) \cdot \Delta / \sum_{k \in \mathcal{F}_{\text{obs}}} \hat{\phi}_k(f, X_{T-W+1:T})$  satisfies the **efficiency** property.

## Qualitative Experiments



- DeltaSHAP provides **clinically intuitive explanations**: **reduced oxygen saturation lowers** the risk score, while **increased glucose raises it**—consistent with **clinical understanding**.

## Limits of Current XAI in Online Monitoring

- Explaining **prediction differences between time steps** is essential for understanding **patient risk evolution**, but existing methods **rarely capture temporal change**.
- Clinicians need **directional attributions**—how recent feature changes increase or decrease risk—rather than **unsigned importance** alone, but recent time series XAI methods provide no **directionality**.
- These attributions must be computed in **real time**, but current approaches are often **too slow for practical use, limiting their clinical utility**.

## Proposed Evaluation Metrics

- Let  $f(X)$  be a model prediction, and let  $X_k^\uparrow$  and  $X_k^\downarrow$  be the input with the top- $k$  and bottom- $k$  important features removed, respectively. Cumulative Prediction Difference / Preservation (**CPD / CPP**) are defined as:

$$\text{CPD}(f, X, K) = \sum_{k=0}^{K-1} |f(X_k^\uparrow) - f(X_{k+1}^\uparrow)|,$$

$$\text{CPP}(f, X, K) = \sum_{k=0}^{K-1} |f(X_k^\downarrow) - f(X_{k+1}^\downarrow)|.$$

- Extending these, we define Area Under Prediction Difference (**AUPD**) and Area Under Prediction Preservation (**AUPP**) as:

$$\text{AUPD}(f, X, K) = \frac{1}{K} \sum_{k=1}^K \text{CPD}(f, X, k),$$

$$\text{AUPP}(f, X, K) = \frac{1}{K} \sum_{k=1}^K \text{CPP}(f, X, k).$$

- Why AUPD and AUPP?**
  - Ranking-sensitive:** Emphasize the impact of **higher-ranked features** for more meaningful attribution evaluation.
  - Smoothing effect:** Aggregating over multiple  $k$  values mitigates **instability** from **individual steps**.

## Quantitative Experiments

Algorithm	AUPD ↑		AUPP ↓		Wall-Clock Time	
	MIMIC-III	P19	MIMIC-III	P19	MIMIC-III	P19
LIME	8.20±0.03	1.13±0.00	21.58±0.03	3.58±0.00	0.22	0.29
GradSHAP	6.20±0.02	0.96±0.00	19.68±0.03	3.09±0.00	<u>0.03</u>	0.04
IG	13.46±0.00	2.28±0.00	14.51±0.00	2.42±0.00	0.04	0.04
DeepLIFT	<u>13.95±0.00</u>	2.24±0.00	14.35±0.00	2.45±0.00	<u>0.03</u>	<u>0.03</u>
FO	13.55±0.00	2.34±0.00	<u>14.14±0.00</u>	2.37±0.00	1.43	1.14
AFO	13.08±0.05	<u>3.27±0.00</u>	15.14±0.04	<u>1.03±0.00</u>	39.62	14.18
FIT	12.60±0.00	2.15±0.00	16.16±0.00	3.08±0.00	0.12	0.11
WinIT	10.06±1.48	1.27±0.00	16.56±1.75	3.23±0.00	0.30	0.29
DeltaSHAP	<b>22.59±0.01</b>	<b>3.68±0.00</b>	<b>3.04±0.01</b>	<b>0.89±0.00</b>	<b>0.02</b>	<b>0.02</b>

- Main Results:** DeltaSHAP achieves 62% higher faithfulness than prior methods across clinical benchmarks including MIMIC-III and PhysioNet 2019 with LSTM backbone architecture.
- Computational Efficiency:** Runs 33% faster than existing time-series XAI methods, enabling real-time use.
- Ablation study** shows forward-fill boosts attribution quality, normalization ensures efficiency, and sampling while  $N = 25$  balances speed and accuracy.