INTELLIGENT RULE-BASED SYSTEM FOR DIAGNOSING EYE DISEASES

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ABSTRACT

This topic presents the development of an intelligent rule-based system for diagnosing multiple Eye diseases. The motivation behind this work was due to the inflexibility of the existing systems that are only able to diagnose a single type of eye disease. An expert system like the CASNET/GLAUCOMA or PADI-HAA was used to diagnose glaucoma. The stages used to develop our system includes modelling, Knowledge representation, Knowledge acquisition, Inference and System evaluation. This system was developed using HTML, CSS and JavaScript for the frontend and Node.JS for the backend. This system can diagnose eleven different eye diseases thereby solving the issue of the inflexibility of other expert systems.

Keywords: Diagnosis, Expert System, Eye, Knowledge-base, Inference engine, Symptoms

INTRODUCTION

For the last thirty years, the expert system has been the most popular and successful AI study (Wagner, 2017). In a variety of problem areas domains, several and methodologies, philosophies, and technologies have been developed. The expert system is a computer program that simulates the problem's human reasoning process, and then completes the representation of human knowledge by solving the problem using heuristic knowledge rather than precise matching, which correctly reflects most human knowledge. **Rule-based** diagnostic expert systems, model-based systems, diagnostic expert and online diagnostic expert systems are the most common forms of diagnostic expert systems. Forward reasoning (that is, the reasoning process that follows the rules from the original data to the conclusion), backward reasoning (that is, the process of inferring from the target to the data through hypothesis verification), and two-way reasoning are all part of the rulebased diagnostic expert system's inference strategy (Chen *et al.* 2019). Medical expert systems have distinguishing characteristics that set them apart from other medical software. One of these distinctions is that systems step-by-step emulate the inferences of a doctor to get accurate outcomes. A system expert is usually aware of sequential inferences. To provide correct findings, these expert systems require a huge number of rules and medical information (Mirmozaffari, 2019).

According to the article: Expert System for Early Diagnosis of Eye Diseases Affecting Malaysians (Ibrahim *et al.* 2001). "The employment of a computer software that could assist physicians and other health care providers in discharging their clinical roles in diagnosis, therapy, and prognosis has been driven by a growing demand for high-quality medical services combined with the explosive rise of medical knowledge." In the ophthalmological knowledge area, only a few expert systems have been constructed, and the majority of them are several years old. A casual-associational network (CASNET) was employed by Rutgers researchers to construct an expert system for detecting and treating glaucoma. As a result, the program is known as CASNET/ GLAUCOMA.

The second, known as the OCULAR HERPES MODEL, is a rule-based expert system that assists in the selection of ocular herpes medications. The third, the Primary Eye Care system (PEC), is an expert system used by non-physician healthcare professionals to treat potentially blinding eye conditions. Its knowledge base is developed from the World Health Organization's Guide to Primary Eye Care. PADI-HAA is a fourth expert system that is also utilized for the diagnosis of Glaucoma. And finally, STRABDIAG is an expert system developed at the University of Rochester for the diagnosis of strabismus and related disorders. Each of these expert systems is restricted to the purpose they were each designed for (Madsen et al. 1990).

LITERATURE REVIEW

Expert systems that leverage human knowledge to solve problems that would ordinarily need human intellect are known as rule-based expert systems. Expert systems are interactive computer programs that include built-in judgment, experience, rules of thumb, intuition, and other expertise to deliver educated advice and solutions on a variety of topics (Maher *et al.* 1986). "A computer

program that uses expert knowledge to achieve a level of performance comparable to that of highly competent experts," is known as an Expert system. As a result, expert systems are created to solve complex issues and explain the reasoning process, where information is represented symbolically rather than numerically (Minkarah *et al.* 1989).

The end-user is usually the non-expert, whereas the computer model is the expert. They can also play chess, make financial judgments, configure computers, monitor realtime systems, underwrite insurance policies, and execute a variety of other tasks that used to require a human skills. The user can interact with a computer to solve an issue using an expert system. This can happen because the expert system can store heuristic knowledge (Samy *et al.* 2008).

Major Components of an Expert System

The knowledge base and the inference (reasoning) engine are the two most important components of an expert system. The knowledge base contains well-known sets of data regarding the area in question. That data is gathered with the assistance of a subject matter expert in the field. The expert collaborates with a knowledge engineer who understands how to program data into the system. The engineer converts the expert's skills and experience into explicit knowledge, with the expert providing comments and feedback on the system's accuracy and behaviour (Lichy *et al.* 2015).





Knowledge Base

This is the expert system's knowledge, coded in a format that the system can understand. It is created by a team of humans (for example, a knowledge engineer) and an automated learning system (for example, one that can good examples learn from of expert performance) (Buchanan *et al.* 1984). Semantic networks, conceptual graphs, frame object-oriented schemes, and Petri nets are examples of additional formalisms that can be used to express knowledge (Nikolopoulos, 1997). It is usually not difficult to elicit knowledge from an expert. The issue is eliciting the appropriate knowledge. Knowledge must be in a format that allows it to be applied to the problem in the appropriate manner and at the appropriate time. The initial stage is to specify the proper problem-solving approach for the task, as well as the types of knowledge roles that this method requires (Eshelman et al. 1986).

The building of a knowledge base is one of the most difficult aspects of developing expert systems. The system's rules, patterns, facts, data requirements, and other structures are kept in this section of the expert (Elsharif *et al.* 2018). A rule-based system is an expert system in which the knowledge base is simply supplied in the form of product rules (McLeod

et al. 2007). Expert systems capture from people who are experts in a certain topic, as well as books, scientific journals, and other printed materials. The information is organized in a knowledge base and presented in a specified format. An expert system then uses this knowledge base to determine the reasoning behind its challenges. The expert system seeks to identify a suitable solution, which is good enough to allow a job to run even though it is not optimal (Sumartono et al. 2017).

Inference Engine

The inference engine is in charge of generating outcomes depending on the user's input and the knowledge base. A user interface allows the user to communicate with the expert system. The user can enter information about the problem and receive a solution, as well as the logic behind it. The rule-based system is the most common method of constructing expert systems. The inference engine's heuristics are represented as production rules, or simply Rules, in this case. A rule is made up of two parts: IF and THEN. The IF section specifies a collection of criteria that must be met in some logical order for the rule to be valid. When the rule's conditions are met. the THEN component of the rule executes a sequence of actions. Pattern matching is the process of matching known facts against rule condition patterns. The inference engine selects an applicable rule during execution time and then performs the actions of that rule (which may affect the list of applicable rules by adding or removing facts). If more than one rule applies, the inference engine chooses the one with the highest priority. After the chosen rule's acts have been completed, another appropriate rule is chosen. The engine repeats this operation until no valid rules remain (Lichy *et al.* 2015).

Matching, selecting, and executing are the three major functions of the inference engine. It looks for a match in the rules on the rule based on the data from the inference engine (Al-Ajlan, 2015). Forward Chaining is a technique for locating feasible rules and firing their actions. The inference engine starts with a collection of known conditions and works its way to a conclusion. Backward chaining is another way that can be used. In this scenario, the inference engine starts with a known conclusion and looks for conditions that make that line of reasoning true (Fischer, 1999).

Knowledge Acquisition Facility

Knowledge Acquisition (KA) is a method of obtaining, building, and organizing knowledge from a single source, usually human specialists or experts, for use in software like expert systems.

Any expert system's accomplishments are mostly dependent on the quality, comprehensiveness, and accuracy of the material stored in the knowledge base. This allows you to learn more about the problem domain from the expert (Patel, 2013). The domain experts, current sources such as websites, catalogues, and maintenance guides, as well as information, all contribute to the knowledge base (Mostafa *et al.* 2018). The acquisition of knowledge (KA) is an important stage in the development of an expert system It entails eliciting, analyzing, and interpreting the information that a human expert employs to solve a specific problem, and then converting that knowledge into a machine representation. The quality of the underlying representation of expert knowledge determines the power and utility of the final expert system, hence KA is crucial. It entails the following procedures: (a) using a strategy to obtain data from the expert (typically verbal). (b) Inferring what the expert's underlying knowledge and reasoning processes would be by interpreting these verbal inputs (more or less skillfully). (c) Using this interpretation to guide the creation of a model or language that accurately captures the expert's knowledge and performance (more or less). This dynamic model guides the interpretation of additional data.

Explanation Facility

One of the primary advantages of the expert system is that it can explain to the user how a result was reached. An expert system must be accountable to be trusted. It must be able to explain and justify its judgments in the same way that a human expert can. An explanation capability improves the transparency of an expert system. An explanation system can reassure the user that an expert system's counsel is appropriate if it is based on sound knowledge and reasoning procedures. In the field of expert systems, Explanation has evolved, researchers have learned that when designing a system, Explanation concerns must be considered, or the system would not produce good explanations (Swartout et al. 1993).

It should be remembered that the main goal of this project is to create an eye diagnostic package/system capable of detecting and diagnosing eye illnesses as well as prescribing relevant treatments.

This information is gathered in two stages. The medical background of eye illnesses is recorded in the first step by conducting personal interviews with doctors and patients. In the second phase, a set of rules is established, including an IF component containing the symptoms and a THEN part containing the condition that should be recognized. The inference engine (forward reasoning) is a mechanism for selecting and firing rules. It is based on a pattern-matching algorithm whose primary goal is to link facts (input data) to relevant rules in the rule base. Finally, the inference engine generates results based on eye disorders. We have looked at the numerous ways that knowledge may be represented in a knowledge base previously. The usage of RULES is one of the methods described. The usage of RULES as a form of knowledge representation has been utilized in this study. This is based on the applicability and acceptance of diagnostic systems in development. It's worth noting that the designed system will be referred to as a Rulebased system. Because such systems are capable of collaborating with human users, the quality of help provided and how it is presented are critical considerations.

I. The Decision Table shows the Eye Diseases and their symptoms. This will help create the Production Rule which will serve as the building block for the knowledge base.

Table 1: Decision Table Showing the Eye Diseases and Their Symptoms.

| Symptoms/Eye Diseases | AMD | Amblyopia | Astigmatism | Blepharitis | Cataracts | Colour Blindness | Conjunctivitis | Diabetic Retinopathy | Dry Eye | Glaucoma | Retinal Detachment |
|-------------------------------|-----|-----------|-------------|-------------|-----------|------------------|----------------|-------------------------|---------|----------|--------------------|
| Blood in Eye | No | No | No | Yes | No | No | Yes | No | No | Yes | No |
| Bloodshot Eye | No | No | No | Yes | No | No | Yes | No | No | Yes | No |
| Blurriness | Yes | No | Yes | No | Yes | No | Yes | Yes | Yes | Yes | Yes |
| Burning Eyes | No | No | No | Yes | No | No | Yes | No | Yes | No | No |
| Colours (dull or faded) | No | No | No | No | Yes | Yes | No | No | No | No | No |
| Crusty Eyelid or Eyelashes | No | No | No | Yes | No | No | Yes | No | No | No | No |
| Dark Spots in Vision | Yes | No | No | No | No | No | No | No | No | No | No |
| Discharge From Eye | No | No | No | Yes | No | No | Yes | No | Yes | No | No |
| Distorted Vision | Yes | No | Yes | No | No | No | Yes | No | No | No | No |
| Double Vision | No | No | No | No | Yes | No | No | No | No | No | No |
| Dryness | No | No | No | Yes | No | No | No | No | Yes | No | No |

| Eyestrain | No | No | Yes | No | No | No | No | No | No | No | No |
|----------------------|-----|-----|------|-----|-----|--------|-----|------|------|------|-----|
| The feeling of | | | | | | | | | | | |
| Something in the | No | No | No | No | No | No | Yes | No | No | No | No |
| Eye | | | | | | | | | | | |
| Floaters in Vision | No | No | No | No | No | No | No | Yes | No | No | Yes |
| Grittiness | No | No | No | Yes | No | No | Yes | No | Yes | No | No |
| Halos Around Lights | No | No | No | No | Yes | No | No | No | No | Yes | No |
| Headache Behind | No | No | No | No | No | No | No | No | No | Ves | No |
| Eye | 110 | 110 | NU | 140 | 110 | 110 | 110 | 140 | 110 | 105 | INU |
| Headache | No | No | Yes | No | No | No | No | No | No | Yes | No |
| Irritation | No | No | No | Yes | No | No | No | No | Yes | No | No |
| Itchiness | No | No | No | Yes | No | No | Yes | No | Yes | No | No |
| Light Sensitivity | Yes | No | No | Yes | Yes | Yes | Yes | No | Yes | No | No |
| Night Vision | Vac | No | Vac | No | Vac | No | No | No | No | No | No |
| Problem | res | INO | res | INO | res | les no | INO | INU | INU | INO | 110 |
| Pain Around Eye | No | No | No | No | No | No | No | No | No | Yes | No |
| Pain in Eye | No | No | No | No | No | No | Yes | No | No | Yes | No |
| Red Eye | No | No | No | Yes | No | No | Yes | No | Yes | Yes | No |
| Reduced Vision | No | Yes | No | No | Yes | No | No | Yes | No | Yes | No |
| Squinting | No | Yes | Yes | No | No | No | No | No | No | No | No |
| Starbursts Around | NI- | NI. | NI - | NI- | V | NI- | NT- | NI- | NI - | V | V |
| Lights | INO | INO | INO | INO | res | INO | NO | INO | INO | res | res |
| Straight Lines (Bent | Vac | No | No | No | No | No | No | Vac | No | No | No |
| or Wavy) | res | INO | INO | INO | INO | INO | INO | res | INO | INO | INO |
| Swelling Around | No | No | No | Vec | No | No | Vas | No | No | No | No |
| Eye | INU | INU | NU | 105 | INU | INU | 105 | INU | INU | INU | INU |
| Tearing | No | No | No | No | No | No | Yes | No | Yes | No | No |
| Tunnel Vision | No | No | No | No | No | No | No | No | No | Yes | No |
| Vision Loss, Central | Yes | No | No | No | No | No | No | Yes | No | No | No |
| Vision Loss, General | No | Yes | No | No | No | No | No | Yes | No | Yes | No |
| Vision Loss, | No | No | No | No | No | No | No | Vac | No | Vaa | Vac |
| Peripheral (Side) | INO | INO | INO | INO | INO | INO | INO | 1 85 | INO | 1 85 | res |

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II. Production Rule represent knowledge in the form of:

IF (condition) THEN (conclusion or action).

Rule: AMD (Age-related Macular Degeneration) IF

> Blurriness, AND Dark Spots in Vision, AND

Distorted Vision, AND Light Sensitivity, AND Night Vision Problem, AND Straight lines (bent or wavy), AND Vision loss (central)

THEN

The patient is suffering from AMD (Agerelated Macular Degeneration)

Rule: Amblyopia

| IF | | THEN | |
|-------|--|---------|--|
| | Reduced Vision, AND | | This patient is suffering from Color Blindness |
| | Squinting, AND | | |
| | Vision loss (general) | Rule: | Conjunctivitis |
| THEN | | IF | 5 |
| | The patient is suffering from Amblyopia | | Blood in the eve. AND |
| | | | Bloodshot eve. AND |
| Rule: | Astigmatism | | Blurriness AND |
| IF | 6 | | Burning eves AND |
| | Blurriness, AND | | Crusty eyelid or eyelashes AND |
| | Distorted Vision AND | | Discharge from eve AND |
| | Eve Strain AND | | Distorted vision AND |
| | Headache AND | | Easting of something in the even AND |
| | Night vision problem AND | | Crittinges AND |
| | Squinting | | Utchings AND |
| THEN | Squinning | | Light geneitigity AND |
| TILIN | The Detion is suffering from Astigmatism | | Light sensitivity, AND |
| | The Patient is suffering from Asugmatism | | Pain in the eye, AND |
| Dular | Dianharitia | | Red-eye, AND |
| Kule: | Diepitarius | | Swelling around the eye, AND |
| IF | | | Tearing |
| | Blood in the eye, AND | THEN | |
| | Bloodshot eye, AND | | This patient is suffering from Conjunctivitis |
| | Burning eyes, AND | | |
| | Crusty eyelid or eyelashes, AND | Rule: | Diabetic Retinopathy |
| | Discharge from eye, AND | IF | |
| | Dryness, AND | | Blurriness, AND |
| | Grittiness, AND | | Floaters in vision, AND |
| | Irritation, AND | | Reduced vision, AND |
| | Itchiness, AND | | Straight lines (bent or wavy), AND |
| | Light sensitivity, AND | | Vision loss (central), AND |
| | Red-eye, AND | | Vision loss (general), AND |
| | Swelling around eye | | Vision loss (peripheral) |
| THEN | | THEN | |
| | This patient is suffering from Blepharitis | | This patient is suffering from Diabetic |
| | | Retinop | athy |
| Rule: | Cataracts | 1 | 5 |
| IF | | Rule: | Dry Eve |
| | Blurriness, AND | IF | 5 5 - |
| | Colours (dull or faded), AND | | Blurriness, AND |
| | Double vision, AND | | Burning eyes AND |
| | Halos around light, AND | | Discharge from eve AND |
| | Light sensitivity, AND | | Dryness AND |
| | Night vision problem, AND | | Grittiness AND |
| | Reduced vision, AND | | Irritation AND |
| | Starbursts around lights | | Itchinose AND |
| THEN | 6 | | Light consitivity AND |
| | This patient is suffering from Cataracts | | Ded and AND |
| | F | | Red-eye, AND |
| Rule: | Color Blindness | | rearing |
| IF | | THEN | |
| | Colours (dull or faded). AND | | I his patient is suffering from Dry Eye |
| | Light sensitivity | | |
| | | Kule: | Glaucoma |

IF

Blood in the eye, AND Bloodshot eye, AND Blurriness, AND Halos around the eye, AND Headache behind the eye, AND Headache, AND Pain around the eye, AND Pain in the eye, AND Red-eye, AND Reduced vision, AND Starbursts around light, AND Tunnel vision, AND Vision loss (general), AND Vision loss (peripheral) This patient is suffering from Glaucoma

THEN

Rule: Retinal Detachment

IF

Blurriness, AND Floaters in vision, AND Starbursts around light, AND Vision loss (peripheral)

THEN

This patient is suffering from Retinal Detachment

OUTPUT AND RESULTS

The output for this system could be seen below. Figure 2 shows the Welcome UI introducing the user to the system. Here instructions on what is required of the user are stated.

Figure 3 shows the UI requesting the name of the user so that the user's name will be attached to the result of the system for record purposes.

Then, Figures 4 to 12 show the question UIs prompting the user to give a YES or NO answer to various questions related to symptoms the user is experiencing or suffering from. The answers to these questions will serve as the bases for the result in Figure 13.

And Finally, Figure 13 shows the Result UI with the name of the user and finally the final

diagnosis of the eye disease the patient is suffering from.

| Eye Diseases Expert System | |
|--|------|
| What is this? | |
| Answer the following questions and we will tell you exact what kind of eye diseases that you have. | ctly |
| ок√ | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |

Figure 2: The Welcome user interface for the system

| Your name | | |
|---------------|--|--|
| EDWARD KOBANI | | |
| ок 🗸 | | |
| | | |
| | | |
| | | |
| | | |
| | | |

Figure 3: UI requesting user's name

| Do you have any problem seeing in the night or in the dark? |
|---|
| Yes |
| |
| |
| |

Figure 4: The "Night vision" question UI



Figure 5: The "squinting eye" question UI



Figure 6: The "watery discharge" question UI



Figure 7: The "red-eye" question UI



Figure 8: The "blood in eye" question UI

| Is the patient sensitive to light? | |
|-------------------------------------|--|
| le the puttern benefit te to light. | |
| | |
| Yes | |
| | |
| | |
| NO | |
| | |
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Figure 9: The "light sensitivity" question UI

| Does the patient experience any pain in the eye? |
|--|
| Yes |
| Νο |
| |
| |
| |
| |
| |
| |

Figure 10: The "pain in eye" question UI

| Does the patient experience any itchiness in the eye? | |
|---|--|
| Yes | |
| No | |
| | |
| | |
| | |
| | |

Figure 11: The "eye itchiness" question UI

| Are the blurry? | images that t | the patient s | ee |
|-----------------|---------------|---------------|----|
| Yes | | | |
| No | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

Figure 12: The "blurry vision" question UI

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| EDWARD KOBANI |
|------------------------------|
| you probably have |
| Conjunctivitis |
| Diagnosis confidence: 52.78% |
| ► Review your answer |
| Try again |
| |
| |
| |
| |
| |
| |
| |

Figure 13: The result UI showing the specific Eye disease

CONCLUSION

During the diagnosis and/or treatment of patients. many ophthalmologists study medical textbooks. In the absence of the ophthalmologist, the medical assistant employing the diagnostic system will be able to confidently attend to booked patients. Though it is not the solution to every problem that an organization faces, an expert system component is ideal for assisting a decisionmaker in an area where expertise is necessary. Expert systems should be developed with caution, especially if sensitive or strategic applications are involved. To represent the assumptions, facts, and reasoning involved in simple problem scenarios, hundreds of rules may be required. As a result, expert systems may be challenging to design and maintain cost-effectively. The costs of wasted expert time, hardware, and software resources for knowledge engineers may be too high to offset predicted from the gains particular applications. It is theoretically conceivable to create a successful expert system that can be utilized for ocular (eye) diagnosis in real life, but it is difficult to do so in practice.

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