

Overview of the 10th Social Media Mining for Health (#SMM4H) and Health Real-World Data (HeaRD) Shared Tasks at ICWSM 2025

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Abstract

The aim of the Social Media Mining for Health (#SMM4H) shared tasks is to take a community-driven approach for developing and evaluating natural language processing, machine learning, and artificial intelligence methods to utilize publicly available social media data for health research. For the 10th iteration, hosted at the AAAI International Conference on Web and Social Media (ICWSM) 2025, we broadened the scope to include additional web-based sources of “health real-world data” (HeaRD). The 6 tasks represented various data sources (Twitter, Reddit, patient forums, clinical notes, news articles), languages (English, Russian, German, French), health-related topics (adverse drug and vaccine events, nonmedical substance use, dementia family caregiving, insomnia, foodborne disease outbreaks), and methods (binary classification, multi-class classification, named entity recognition). In total, 57 teams registered, representing 17 countries. In this paper, we present an overview of the annotated corpora, participants' systems, and performance results, providing insights into state-of-the-art methods for mining social media and other web-based data sources for health research. To facilitate future work, the datasets remain available by request, and the CodaLab sites remain active for a post-evaluation phase.

Introduction

With more than 70% of adults in the United States (Auxier and Anderson 2021) and more than 60% of people worldwide (Petrosyan 2025) using social media, the Data Modernization Initiative of the Centers for Disease Control and Prevention (CDC) encourages the use of “non-traditional

data sources, including images, audio, social media, and data not specifically collected for public health analysis, such as electronic health records” (Centers for Disease Control and Prevention 2023). The aim of the Social Media Mining for Health (#SMM4H) shared tasks is to take a community-driven approach for developing and evaluating natural language processing, machine learning, and artificial intelligence methods to utilize publicly available social media data for health research. The 10th iteration of the shared tasks was hosted at the AAAI International Conference on Web and Social Media (ICWSM) 2025 and included additional web-based sources of “real-world data” (U.S. Food and Drug Administration 2024). To reflect this broader scope, we extended the name of the shared tasks to #SMM4H-HeaRD, where the latter stands for “health real-world data” and is intended to represent the notion of using social media and other web-based data sources as a complementary approach for “listening” to patients.

The #SMM4H-HeaRD 2025 shared tasks consisted of 6 tasks that represented various data sources (Twitter, Reddit, patient forums, clinical notes, news articles), languages (English, Russian, German, French), health-related topics (adverse drug and vaccine events, nonmedical substance use, dementia family caregiving, insomnia, foodborne disease outbreaks), and methods (binary classification, multi-class classification, named entity recognition). Teams were provided with gold standard annotated training and validation sets to develop their systems and, subsequently, a blind test set for the final evaluation. After receiving the test set, teams were given 5 days to submit the predictions of their systems to CodaLab—a platform that facilitates data science competitions—for automatic evaluation, promoting the sys-

tematic comparison of performance. Teams could register for a single task or multiple tasks. Among the 57 teams that registered, representing 17 countries, 29 teams participated by submitting system predictions to CodaLab and submitting a short manuscript describing their system: 10 teams for Task 1, 1 team for Task 2, 7 teams for Task 3, 7 teams for Task 4, 3 teams for Task 5, and 10 teams for Task 6. Each system description was peer-reviewed by at least 2 reviewers. In this paper, we present an overview of the annotated corpora, participants' systems, and performance results.

Tasks

Task 1: Detection of Adverse Drug Events in Multilingual and Multi-platform Social Media Posts

Adverse drug events (ADEs), defined as “harmful or unpleasant reactions resulting from an intervention related to the use of a medicinal product” (Edwards and Aronson 2000), pose a significant challenge to public health monitoring due to under-reporting and non-sufficient coverage (Hazell and Shakir 2006). In recent years, extracting ADE mentions from user-generated content on social media has emerged as a valuable approach to identifying early signals of drug safety issues. These platforms host large volumes of informal health discussions, expressed in users' own words and languages, offering a rich yet underutilized data source. Despite potential limitations, such as non-representative sampling (Hargittai and Walejko 2008; Wagner et al. 2015), social media enables individuals to share personal experiences anonymously and without fear of stigma or dismissal, factors known to contribute to under-reporting in traditional surveillance systems (Yang et al. 2012; Palleria et al. 2013).

Although the number of datasets related to ADEs has been increasing (Dai et al. 2024), we can still see a lack of diversity with respect to languages and data sources. Therefore, this shared task focused on *multilingual* binary classification of social media posts from *different platforms* to determine the presence or absence of ADE mentions. By developing robust multilingual models, we aim to advance cross-lingual health surveillance and improve the timeliness and reach of ADE signal detection across diverse linguistic and cultural contexts. We provided posts from Twitter and other social media platforms, each labeled according to the presence of an ADE. A post with a positive label contained at least one mention of an ADE, while a post with a negative label did not. The dataset contained 18,876 tweets written in English (Xu et al. 2024), 13,424 tweets (Magge et al. 2021) and drug reviews (Tutubalina et al. 2020) written in Russian, 2,116 posts from patient forums written in German (Raithel et al. 2022), and 1,396 posts from patient forums translated into French (Raithel et al. 2024). The evaluation metric was the F₁-score for the “positive” class. The CodaLab site for this task is: <https://codalab.lisn.upsaclay.fr/competitions/21886>.

Task 2: Extraction of Clinical and Social Impacts of Nonmedical Substance Use from Reddit

In the United States, nearly 12 million people misuse opioids, contributing to substantial clinical and social harms, in-

cluding increased mortality and public health burdens (Bolshakova, Bluthenthal, and Sussman 2019). Timely detection of these impacts is essential for guiding interventions and allocating resources (Volkow, Chandler, and Villani 2022). However, people who use drugs often do not disclose illicit use in clinical settings, limiting the utility of traditional data sources (Strike et al. 2020). Researchers have long leveraged social media as a cohort-centered data source to explore the lived experiences of patients, such as those with breast cancer (Rajwal et al. 2024) and migraines (Guo et al. 2023). These studies demonstrate the potential of social media to offer a complementary perspective on patient experiences, which we extend here to the context of opioid misuse. To support the automatic detection of these impacts, we organized a shared task using the Reddit-Impacts dataset, which includes 1,380 Reddit posts manually annotated for clinical and social consequences of nonmedical opioid use (Ge et al. 2024). Participants were challenged to develop named entity recognition (NER) models capable of identifying these nuanced and sparse concepts in highly variable, informal text. The CodaLab site for this task is: <https://codalab.lisn.upsaclay.fr/competitions/22203>

Task 3: Detection of Dementia Family Caregivers on Twitter

Internet-based interventions to support family caregivers of people with dementia are valued by caregivers for their easy access (Hopwood et al. 2018) and can have beneficial effects on caregivers' health (Leng et al. 2020). Given that nearly 1 of every 4 adults in the United States already uses Twitter (Gottfried 2024), Twitter may present a novel opportunity to reach caregivers on a large scale. This binary classification task involved automatically distinguishing English-language tweets that reported having a family member with dementia from tweets that merely mentioned dementia, enabling the use of Twitter not only to directly target interventions at family caregivers, but also to inform interventions based on the content of their tweets (Feng et al. 2025). The training, validation, and test sets contained 6,724 tweets, 353 tweets, and 1,769 tweets, respectively: 5,946 (67%) that reported having a family member with dementia and 2,900 (33%) that merely mentioned dementia (Klein et al. 2022). Inter-annotator agreement (Fleiss' kappa), based on 500 tweets that were annotated by all 3 annotators, was 0.82. The evaluation metric was the F₁-score for the class of tweets that reported having a family member with dementia. The CodaLab site for this task is: <https://codalab.lisn.upsaclay.fr/competitions/22022>.

Task 4: Detection of Insomnia in Clinical Notes

Insomnia is a common sleep disorder with significant health implications, including psychiatric conditions, reduced workplace productivity, and increased risk of accidents. Despite its high prevalence, it remains largely under-diagnosed (Ulmer et al. 2017). Effective methods for detecting insomnia are critical to better understand its prevalence, associated risk factors, progression, and treatment outcomes (Kartoun et al. 2018). We organized the first

shared task focused on the automatic identification of patients potentially suffering from insomnia using electronic health records. Structured as a text classification challenge, the task required participants to analyze clinical notes and determine if a patient was likely to have insomnia. We curated an annotated corpus of 164 clinical notes from the MIMIC-III database (Johnson et al. 2016), following a comprehensive set of rules designed to guide the identification of both direct and indirect symptoms of insomnia, as well as the presence of commonly prescribed hypnotic medications. The corpus was divided into training (70 notes), validation (20 notes) and test (74 notes) sets. Each note included a binary label indicating the overall insomnia status (“yes” or “no”), along with rule-level annotations specifying whether each diagnostic rule was satisfied. To promote model transparency and explainability, textual evidence supporting each annotation was also provided.

This shared task was divided into three distinct subtasks:

1. Subtask 1: Binary Text Classification. Participants were required to predict whether a patient described in a clinical note was likely to have insomnia (“yes” or “no”). Evaluation used the F_1 -score, treating “yes” as the positive class.
2. Subtask 2A: Multi-label Text Classification. Participants were required to evaluate each clinical note against the defined insomnia rules (Definition 1, Definition 2, Rule A, Rule B, and Rule C) and predict “yes” or “no” for each rule item. The primary evaluation metric was the micro-averaged F_1 -score, considering “yes” as the positive class.
3. Subtask 2B: Evidence-Based Classification. This subtask extended Subtask 2A by also requiring participants to identify and extract text spans from the clinical note that justified each “yes” classification. The evaluation was based on the ROUGE-L metric. This subtask emphasized transparency and explainability by requiring models to provide supporting evidence for their decisions.

A GitHub repository containing resources and evaluation scripts is available at: <https://github.com/guilopgar/SMM4H-HeaRD-2025-Task-4-Insomnia>. The CodaLab site for this task is: <https://codalab.lisn.upsaclay.fr/competitions/22509>.

Task 5: Detection and Extraction of Food Recalls and Foodborne Disease Outbreaks in Online News Articles

The rising incidence of food safety issues remains a critical global concern (Kase, Zhang, and Chen 2017; Boatemaa et al. 2019). Foodborne illnesses continue to pose significant public health challenges, ranking among the leading causes of morbidity and mortality worldwide (Pádua et al. 2019; Lüth et al. 2019). Food and beverage contamination is a multi-factorial issue that can occur throughout various stages of the production and distribution pipeline, including raw material sourcing, transportation, cleaning procedures, thermal processing, packaging, and storage. Outbreaks may emerge before, during, or after these stages (Scallan and Mahon 2012). One of the primary consequences of these inci-

dents is the initiation of food recalls, which can result in considerable economic losses for both industry stakeholders and national economies (Deng, den Bakker, and Hendriksen 2016). These concerns highlight the critical need for identifying root causes and contributing factors in food contamination events (Zhou et al. 2020). Developing a comprehensive understanding of potential contamination pathways is essential for effective outbreak prevention and timely recall interventions (Tao, Yang, and Feng 2020; Zhou, Zhang, and Wang 2021; Jin et al. 2020; Marvin et al. 2017). This shared task focused on the automatic identification of foodborne disease outbreaks and food recall events in online, English-language news articles. The training, development, and test sets contained 3,172 news articles, 357 news articles, and 1,005 news articles, respectively. The task comprised two subtasks: a multi-class classification task to categorize a given article as *Food Recall*, *Foodborne Disease Outbreak*, or *Neither* (Subtask 1) and an NER task to extract *Target Organization*, *Product Name*, *Cause of Incident*, *Disease Caused*, *Number of People Affected*, and *Location* from the the articles (Subtask 2). The CodaLab site for this task is: <https://codalab.lisn.upsaclay.fr/competitions/22154>.

Task 6: Detection of Personally Experienced Vaccine Adverse Events on Reddit

The success of vaccination programs relies on comprehensive safety monitoring systems. Although vaccines undergo extensive testing before approval, pre-market trials inherently face challenges in generating comprehensive safety data due to homogeneous participant groups and limited timeframes. Post-licensure surveillance plays a critical role in ensuring vaccine safety (Buttery and Clothier 2022), and social media offers a complementary lens for capturing self-reported adverse events following immunization (AEFIs) (Khademi Habibabadi et al. 2022). To support the detection of personally experienced AEFIs using social media, this task involved binary classification of English-language Reddit posts mentioning shingles (zoster) vaccines. The goal was to distinguish between posts that contained personal experiences of AEFIs and those that did not. The dataset included 3,306 Reddit submissions collected up to April 2024, manually labeled by two experts in healthcare and natural language processing. The evaluation metric was the F_1 -score for the class of posts that reported personal experiences of AEFIs. The CodaLab site for this task is: <https://codalab.lisn.upsaclay.fr/competitions/22159>.

Results

Task 1: Detection of Adverse Drug Events in Multilingual and Multi-platform Social Media Posts

As a baseline, we fine-tuned an XLM-RoBERTa (Conneau et al. 2020) model, which achieved an F_1 -score of 0.60 across the multilingual posts in the test set: 11,712 in English, 9,292 in Russian, 1,105 in German, and 1,104 in French. Table 1 presents the performance for the 10 teams that participated in Task 1. PEI achieved the highest F_1 -score (0.709) by fine-tuning the Mistral-Nemo-Instruct-2407 large

Team	F ₁	P	R	System Summary
PEI	0.709	0.700	0.717	Mistral-Nemo-Instruct-2407, fine-tuning, error-driven data augmentation via LLM paraphrasing
Y2K	0.708	0.775	0.652	Gemma 3, fine-tuning, PEFT, LoRA, ensemble, translation, data augmentation via Claude 3.7 Sonnet reasoning
Deloitte Drockts	0.677	0.627	0.736	4-bit quantized Phi-4, fine-tuning, PEFT, LoRA, threshold tuning
ADETrackers	0.656	0.717	0.605	Llama-3.1-8B-Instruct, fine-tuning, PEFT, LoRA, 4-bit quantization
RIGA	0.656	0.624	0.691	RoBERTa-Large, data augmentation via GPT-4o, DrugBank
ACSS-PSL	0.633	0.622	0.645	XLNet-RoBERTa-Large
Baseline	0.605	0.582	0.629	XLNet-RoBERTa-Large
LLM Pros	0.592	0.468	0.803	Open AI o3-mini, prompting, structured output
HSE NLP	0.567	0.462	0.733	GPT-4o, few-shot prompting, EuroBERT, ensemble, UMLS-informed LLM data augmentation
BEARCAT	0.559	0.731	0.452	GPT-4o, zero-shot prompting
SRMISTAdverseDrug	0.219	0.140	0.495	Logistic Regression, CatBoost, XGBoost, Random Forest, ensemble, translation, TF-IDF, multilingual sentence embeddings, SMOTE

Table 1: System summaries and F₁-score (F₁), precision (P), and recall (R) for the detection of adverse drug events in multilingual and multi-platform social media posts (Task 1).

Team	Relaxed F ₁	Strict F ₁	Token-level F ₁	System Summary
Baseline 1	0.544	0.326	0.508	data augmentation with nearest neighbor (DANN) classifier, few-shot learning
LLM Pros	0.423	0.220	0.332	GPT-4o, prompting, structured output
Baseline 2	0.167	0.110	0.261	GPT-3.5, one-shot prompting

Table 2: System summary and relaxed, strict, and token-level F₁-scores (F₁) for extraction of clinical and social impacts of nonmedical substance use from Reddit (Task 2).

language model (LLM) and using paraphrasing-based error-driven augmentation. Team Y2K (F₁-score=0.708) followed closely with a two-stage self-corrective decoder architecture based on Gemma 3 (Gemma Team 2025) models fine-tuned via PEFT. While Y2K achieved 7.51 percentage points higher in precision, its recall was 6.55 percentage points lower than that of PEI. Team Deloitte Drockts (F₁-score=0.677) placed third by using PEFT and threshold tuning on a quantized Phi-4 model. For language-specific performance, PEI achieved the highest F₁-scores for English (0.78) and French (0.78), while Y2K achieved the highest F₁-scores for Russian (0.65) and German (0.77). Despite a larger amount of data than French and German, Russian achieved a notably lower performance, which may be due to challenges with domain transfer across the multiple Russian data sources. Most high-performing systems used parameter-efficient fine-tuning, such as LoRA (Hu et al. 2021), multilingual models, or combined LLMs with external knowledge. In contrast, prompt-based approaches achieved lower precision and F₁-scores, despite relatively strong recall. Overall, results emphasize the difficulty of ADE detection in noisy, multilingual social media text, and the advantage of hybrid strategies combining LLMs with fine-tuning and augmentation. Participants outperformed the baseline with varied approaches, underscoring the value of adaptable, multilingual architectures for pharmacovigilance.

Task 2: Extraction of Clinical and Social Impacts of Nonmedical Substance Use from Reddit

Table 2 presents the performance for the 1 team that participated in Task 2 and learning-based and prompting-based

baselines (Ge et al. 2024). LLM Pros developed a structured and instruction-driven pipeline prompting OpenAI’s GPT-4o (OpenAI 2024b) LLM to extract concise impact phrases from Reddit posts. Their approach includes a schema-guided extraction mechanism (implemented via Pydantic) to categorize impacts into clinical, social, or other types, and focuses on minimally sufficient phrases rather than longer contextual spans. While they outperformed the GPT-3.5 prompting baseline for all of the evaluation metrics, they did not outperform the few-shot learning baseline—a data augmentation with nearest neighbor (DANN) classifier—for any of them. Nevertheless, their approach complements the DANN baseline as their model-guided extraction could serve as a high-precision candidate generator, while the baseline could act as a recall-enhancing filter or re-ranker. A hybrid system that first identifies compact phrases via GPT-4o and then expands or validates them using few-shot augmented retrieval could potentially achieve stronger overall balance between precision and recall in future iterations.

Task 3: Detection of Dementia Family Caregivers on Twitter

In prior work (Klein et al. 2022), a baseline classifier achieved an F₁-score of 0.962 (precision=0.946 and recall=0.979) based on fine-tuning a BERTweet-Large (Nguyen, Vu, and Tuan Nguyen 2020) pre-trained model. Thus, participants were encouraged to experiment with approaches based on LLM prompting to compare with the high baseline performance. Table 3 presents the performance for the 7 teams that participated in Task 3. BOUN (F₁-score=0.966) marginally outperformed the baseline by

Team	F ₁	P	R	System Summary
BOUN	0.966	0.957	0.976	Gemma-2-2B, fine-tuning, LoRA
IAI	0.964	0.956	0.971	BERTweet
Baseline	0.962	0.946	0.979	BERTweet-Large
NoviceTrio	0.957	0.951	0.962	BERT-Base-Uncased, BERTweet, Llama-3.1-8B, few-shot prompting, ensemble
Mason NLP-GRP	0.954	0.946	0.962	Llama-3.1-8B, zero-shot prompting
LLATMU	0.948	0.911	0.987	BERTweet
BingAster	0.942	0.899	0.991	DeepSeek-R1-70B, zero-shot prompting
LLM Pros	0.203	0.802	0.116	OpenAI o3-mini, prompting, structured output

Table 3: System summaries and F₁-score (F₁), precision (P), and recall (R) for the detection of dementia family caregivers on Twitter (Task 3).

Team	Subtask 1			Subtask 2A			Subtask 2B			System Summary
	F ₁	P	R	F ₁	P	R	R-L F ₁	R-L P	R-L R	
LLM Pros	0.967	0.978	0.957	0.906	0.896	0.917	0.682	0.706	0.724	OpenAI o3-mini, zero-shot prompting, structured output
RBG-AI	0.946	0.936	0.957	0.750	0.650	0.886	0.463	0.522	0.487	Gemma-2B, prompting, rule-based extractor
HaleLab_NITK	0.891	0.891	0.891	0.695	0.586	0.856	0.411	0.480	0.474	Llama-3-8B, zero-shot prompting, pipeline
IAI	0.875	0.840	0.913	0.689	0.682	0.697	-	-	-	MedBERT, Clinical BigBird, SciBERT, ensemble
SRMISTNLPInsomnia	0.842	0.816	0.870	0.657	0.654	0.659	-	-	-	AdaBoost, TF-IDF, ClinicalBERT embeddings, SMOTE
Bit-UA	0.809	0.837	0.783	0.607	0.739	0.515	0.446	0.514	0.450	BERT-Base, token classification
CareLab	0.786	0.648	1.000	0.769	0.757	0.780	0.135	0.097	0.372	ClinicalBERT, rule-based extractor

Table 4: System summaries and F₁-score (F₁), Precision (P), Recall (R), ROUGE-L F₁-score (R-L F₁), ROUGE-L Precision (R-L P), and ROUGE-L Recall (R-L R) for the detection of insomnia in clinical notes (Task 4).

using LoRA (Hu et al. 2021) to fine-tune the Gemma-2-2B LLM with the annotated training data. NoviceTrio (F₁-score=0.957) used BERTweet in a majority voting ensemble with BERT-Base and few-shot prompting of the Llama-3.1-8B (Llama Team, AI at Meta 2024) LLM, but did not improve upon the baseline performance. In addition to prompting the LLM for classification, NoviceTrio prompted the LLM to generate explanations, which were concatenated to the corresponding tweets in the training data used to fine-tune the BERTweet and BERT-Base (Devlin et al. 2019) models in the ensemble. Whereas NoviceTrio used Llama-3.1-8B in an ensemble, Mason NLP-GRP (F₁-score=0.954) used only zero-shot prompting of Llama-3.1-8B, achieving a performance that was nearly identical to that of NoviceTrio and only marginally lower than the baseline. Similarly, BingAster (F₁-score=0.942) achieved comparable performance by using zero-shot prompting of the DeepSeek-R1-70B (DeepSeek-AI 2025) LLM. NoviceTrio and BingAster used prompts with simple questions or instructions that focused on the primary task, whereas LLM Pros (F₁-score=0.203) achieved substantially lower performance by prompting the OpenAI o3-mini LLM and using structured output with a complex schema. Nonetheless, the overall results demon-

strate that prompting-based approaches—in particular, zero-shot prompting—can be used for this task.

Task 4: Detection of Insomnia in Clinical Notes

Table 4 presents the performance for the 7 teams that participated in Task 4. Of these, 5 teams participated in all three subtasks, while IAI and SRMISTNLPInsomnia participated only in Subtasks 1 and 2A. LLM Pros achieved the best performance across all three subtasks: Subtask 1 (F₁-score=0.967), Subtask 2A (F₁-score=0.906), and Subtask 2B (ROUGE-L F₁-score=0.682). Their approach relied entirely on a prompt-based pipeline without any task-specific fine-tuning. They utilized the OpenAI o3-mini LLM, employing prompt engineering combined with strictly enforced JSON schemas to guide the model outputs. RBG-AI achieved the second-best performance in Subtask 1 (F₁-score=0.946) and Subtask 2B (ROUGE-L F₁=0.463), and competitive results in Subtask 2A (F₁-score=0.750). Their system combined structured prompting of the open-source Gemma-2B LLM with a regular expression-based medication pattern extractor. HaleLab_NITK (Subtask 1 F₁-score=0.891, Subtask 2A F₁-score=0.695, and Subtask 2B ROUGE-L F₁-score=0.411) leveraged LLMs with a reverse

Team	Subtask 1				Subtask 2							System Summary
	Acc	P	R	F ₁	Avg	O	P	C	D	A	L	
CareLab	0.96	0.96	0.96	0.96	0.12	0.12	0.14	0.01	0.00	0.39	0.23	Subtask 1: RoBERTa, ensemble, GPT-4 data augmentation Subtask 2: spaCy dependency parser, regular expressions
LLM Pros	0.88	0.84	0.92	0.88	0.57	0.94	0.62	0.24	0.64	0.70	0.60	OpenAI o3-mini, prompting, structured output
WITM	0.93	0.92	0.93	0.92	0.48	0.89	0.43	0.22	0.60	0.56	0.42	Subtask 1: DistilBERT Subtask 2: LLaMA-3.1-8B, few-shot prompting; linguistically informed Bi-LSTM
Baseline	0.87	0.83	0.89	0.86	0.53	0.88	0.53	0.25	0.50	0.66	0.61	BERT-based CNN, BiLSTM, multi-task model

Table 5: System summaries and accuracy (Acc), F₁-score, (F₁), precision (P), and recall (R) for the detection (Subtask 1) and extraction (Subtask 2) of food recalls and foodborne disease outbreaks in online news articles (Task 5). The evaluation metric for Subtask 2 is the average (Avg) of the accuracy for each entity type: Organization (O), Product (P), Cause (C), Disease (D), Number of People Affected (A), and Location (L).

reasoning pipeline that prioritized evidence extraction before classification. They used Llama-3-8B (Llama Team, AI at Meta 2024) to first extract relevant text spans for each insomnia rule (Subtask 2B), which were then used to predict rule satisfaction (Subtask 2A) and the insomnia status (Subtask 1). The remaining teams focused on BERT-based text classification approaches. IAI (Subtask 1 F₁-score=0.875 and Subtask 2A F₁-score=0.689) and CareLab (Subtask 1 F₁-score=0.786, Subtask 2A F₁-score=0.769, and Subtask 2B ROUGE-L F₁-score=0.135) fine-tuned BERT-based models—MedBERT (Vasantharajan et al. 2022), Clinical BigBird (Li et al. 2022), SciBERT (Beltagy, Lo, and Cohan 2019), and ClinicalBERT (Huang, Altsaar, and Ranganath 2020)—for Subtasks 1 and 2A, framing Subtask 1 as a binary classification task and Subtask 2A as a set of independent binary classification problems. Notably, CareLab achieved the second-best performance in Subtask 2A. SR-MISTNLPInsomnia (Subtask 1 F₁-score=0.842 and Subtask 2A F₁-score=0.657) combined ClinicalBERT embeddings with TF-IDF features and applied class balancing strategies such as SMOTE (Chawla et al. 2002). Finally, Bit-UA (Subtask 1 F₁-score=0.809, Subtask 2A F₁-score=0.607, and Subtask 2B ROUGE-L F₁-score=0.446) implemented a hybrid pipeline using Finite Context Models for classification and a BERT-based token classification model for evidence extraction in Subtask 2B. Overall, prompt-based approaches leveraging LLMs achieved the highest performance across all subtasks, highlighting their potential for addressing complex clinical information extraction tasks using limited annotated real-world health data.

Task 5: Detection and Extraction of Food Recalls and Foodborne Disease Outbreaks in Online News Articles

In prior work (Jana, Sinha, and Dasgupta 2024), a baseline multi-task model combining a BERT-based CNN and BiLSTM achieved an F₁-score of 0.86 for classifying news articles as *food recall*, *foodborne disease outbreak*, or *neither* (Subtask 1), and prompting a Llama-2 (GenAI, Meta 2023) LLM achieved an average accuracy of 0.53 for extracting entities (Subtask 2). Table 5 presents the performance for the

3 teams that participated in Task 5. CareLab achieved the highest F₁-score (0.96) for Subtask 1, addressing the class imbalance in the “neither” class by augmenting the training set with examples generated by prompting GPT-4 (OpenAI 2024a), followed by fine-tuning a RoBERTa (Liu et al. 2019) model for classification. WITM achieved an F₁-score of 0.92 by fine-tuning a DistilBERT (Sanh et al. 2020) model on the original training set. While LLM Pros achieved an F₁-score of 0.88 for Subtask 1 by prompting OpenAI’s o3-mini LLM and using a complex output schema, they achieved the highest average accuracy (0.57) for Subtask 2 by using this same approach. WITM achieved an average accuracy of 0.48 by using structured few-shot prompting of the Llama-3.1-8B (Llama Team, AI at Meta 2024) LLM to extract *Organization*, *Product*, *Disease*, *Number of Affected People*, and *Location*, and a linguistically informed BiLSTM model to extract *Cause*. CareLab achieved an average accuracy of 0.12 by using a rule-based pipeline that combined spaCy’s dependency parser with hand-crafted regular expressions. Overall, participants adopted a diverse mix of traditional and LLM-based approaches, demonstrating that, while legacy transformer models, such as RoBERTa and DistilBERT, remain competitive for straightforward classification tasks, LLM-based methods offer enhanced robustness and adaptability for more complex extraction tasks. Nevertheless, issues such as hallucination and inconsistency persist in LLM-generated outputs, underscoring the need for more sophisticated, multi-stage prompting frameworks in future work.

Task 6: Detection of Personally Experienced Vaccine Adverse Events on Reddit

In prior work (Khademi et al. 2024), a baseline classifier achieved an F₁-score of 0.95 (precision=0.93 and recall=0.96) based on fine-tuning a Twitter-RoBERTa pre-trained model, outperforming few-shot and chain-of-thought prompting of GPT-4 (OpenAI 2024a), which achieved an F₁-score of 0.90 (precision=0.86 and recall=0.93). Table 6 presents the performance for the 10 teams that participated in Task 6. BioNLP1 achieved the highest F₁-score (0.959) by using an SVM classifier with TF-IDF features in an en-

Team	F ₁	P	R	System Summary
BioNLP1	0.959	0.946	0.973	SVM, TF-IDF, RoBERTa-Large sentence embeddings, ensemble
GooSeek	0.957	0.949	0.966	Llama 3.1-8B, chain-of-thought prompting
PEI	0.954	0.934	0.976	Mistral-Nemo-Instruct-2407, fine-tuning, error-driven data augmentation via LLM paraphrasing
ACSS-PSL	0.951	0.940	0.962	DeBERTa-V3-Base, class weights, threshold tuning
BrynMawrNLP	0.950	0.928	0.973	RoBERTa
Baseline	0.946	0.930	0.962	Twitter-RoBERTa, data augmentation via GPT-4-Turbo chain-of-thought prompting
UoT	0.945	0.916	0.976	Twitter-RoBERTa-Large-2022-154M, class weights
beatAVE	0.943	0.951	0.935	Twitter-RoBERTa-Large-2022-154M
NU Health Miners	0.943	0.900	0.990	RoBERTa-Large ensemble
HpiVaxVigil	0.919	0.883	0.959	BERTweet-Large, data augmentation via GPT-4o chain-of-thought prompting
LLM Pros	0.882	0.843	0.924	OpenAI o3-mini, prompting, structured output

Table 6: System summaries and F₁-score (F₁), precision (P), and recall (R) for detection of personally experienced vaccine adverse events on Reddit (Task 6).

semble with mean-pooled sentence embeddings weighted by attention masks, based on fine-tuning RoBERTa-Large (Liu et al. 2019). GooSeek achieved a nearly identical F₁-score (0.957) by using chain-of-thought prompting of the Llama 3.1-8B-Instruct (Llama Team, AI at Meta 2024) LLM, and PEI achieved a similar F₁-score (0.954) by fine-tuning the Mistral-Nemo-Instruct-2407 LLM and also using the LLM to paraphrase misclassifications for error-driven data augmentation. Most of the other teams used fine-tuned BERT-based models. The task was challenging due to confusion between vaccine side effects and symptoms of shingles or other illnesses, and because positive labels included adverse events from vaccines other than shingles. The results demonstrate that LLMs can outperform fine-tuned models when they are guided by a deep understanding of the data and well-crafted prompts that capture such nuances.

Conclusion

This paper presented an overview of the #SMM4H-HeaRD 2025 shared tasks, providing insights into state-of-the-art methods for mining social media and other web-based data sources for health research. In general, 18 of the 29 participating teams used LLMs in their approaches, including the top-performing teams for Task 1, Task 3, Task 4 (all 3 subtasks), and Task 5 (both subtasks), outperforming teams that used BERT-based models. In particular, 5 teams fine-tuned LLMs, 10 teams prompted LLMs for classification or extraction, and 6 teams used LLMs for data augmentation. To facilitate future work, the datasets remain available by request, and the CodaLab sites remain active to automatically evaluate new systems against the blind test sets, promoting the ongoing systematic comparison of performance.

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