

Dynamic Health Data Aggregation for the Research Purposes

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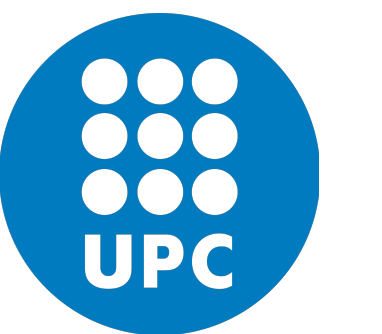
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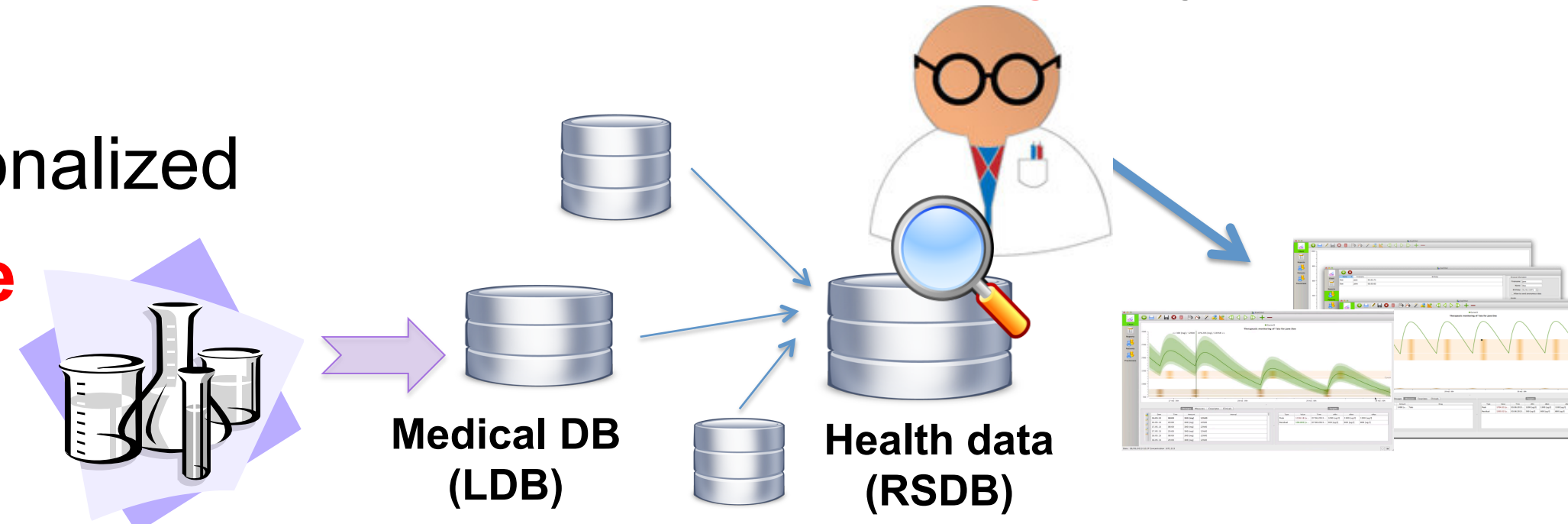


How to aggregate medical data dynamically adapting to the requirements of a research study?

Therapeutic Drug Monitoring (TDM) aims at improving patient care by monitoring drug levels in the blood to **individually** adjust the dosage.



Building mathematical models to provide personalized recommendations requires **medical data to be aggregated** and analyzed by researchers:

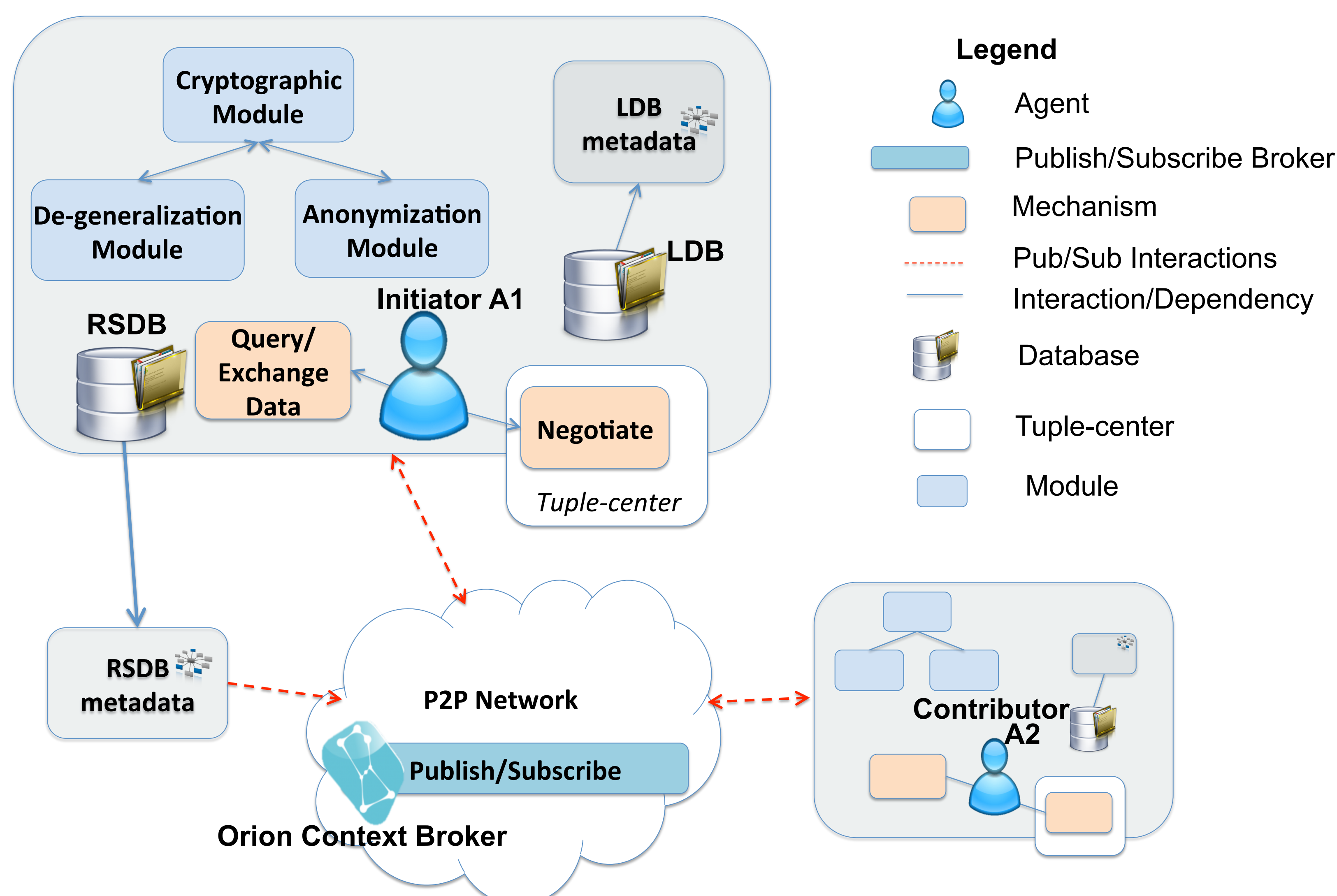


Challenges:

- It is impossible to create a unique RSDB
- Medical data are sensitive & changing
- Privacy & Utility trade-off

Multi-Agent System (MAS) for Dynamic Data Aggregation

Architecture



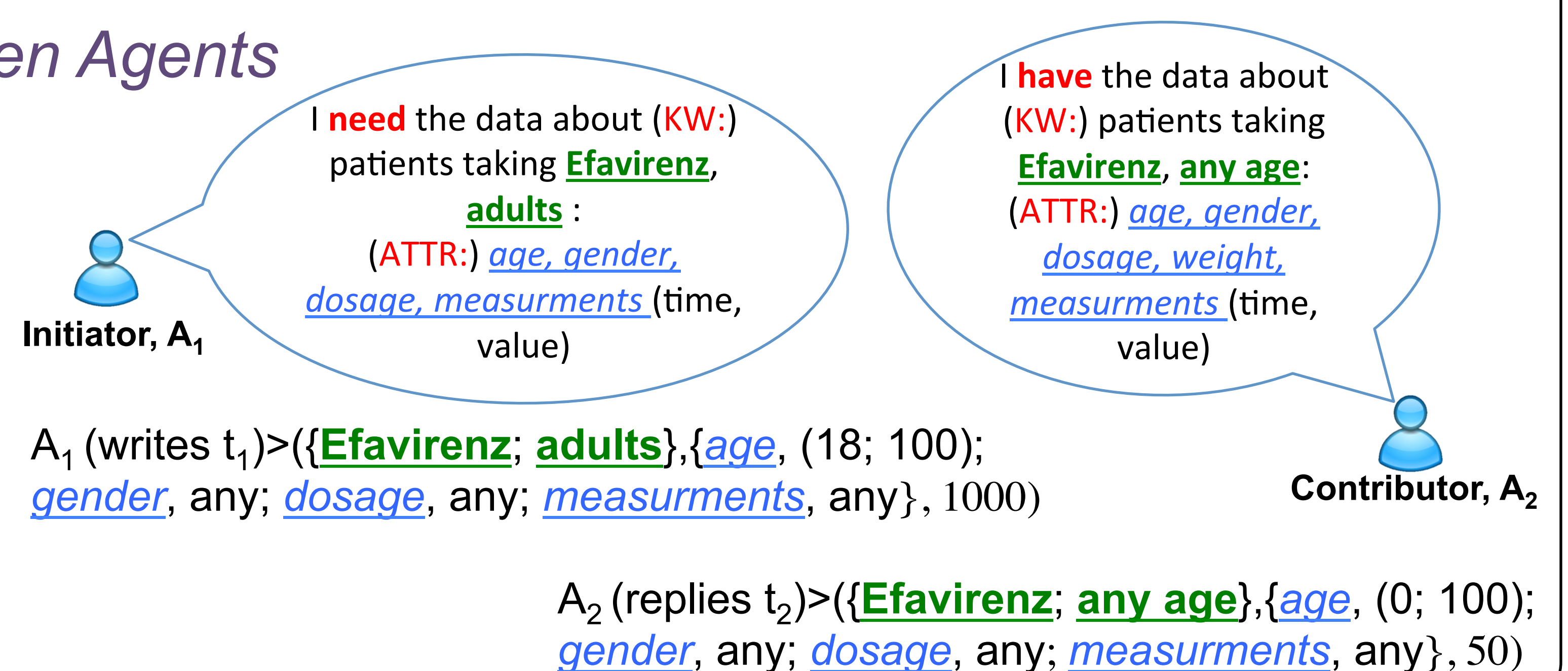
Characteristics

- **Dynamic**
 - ✓ Negotiation phase to adapt to the requirements of the study
- **Distributed**
 - ✓ Allows to collect more data during the shorter period
- **Takes into account data requirements**
 - ✓ Improves the utility
- **Preserves secure and privacy**
 - ✓ Medical data are protected
- **Boosts the utility with the growth of the DB**
 - ✓ Utility is **max** wrt the current state of the DB

- Agents are connected into P2P network through the **Publish-Subscribe Broker** (based on the KW (keywords))
- Negotiation is built using **TuCSon** – a coordination model for negotiation and data exchange through the tuple centers

Negotiation Between Agents

- **Structure of the tuples:**
 $t_1 = \{KW(RSDB), \{range_{attr}(RSDB)\}, N_{rec}(RSDB)\}$
 $t_2 = \{KW(LDB), \{range_{attr}(LDB)\}, N_{rec}(LDB)\}$
 ...
- **Rules**
 $reaction(out(t_1), condition_1, out(t_2)).$
 $condition_1:$
 $(KW(RSDB) \subseteq KW(LDB)) \wedge (range_{attr}(RSDB) \subseteq range_{attr}(LDB)) \wedge$
 $\wedge (N_{rec}(LDB) > 0).$
 ...



Conclusion & Future Work

- A framework of MAS for dynamic health data aggregation has been proposed, it is currently being implemented
- MAS will be evaluated using the synthetic data and genuine patients data in the framework of Nano-Tera ISyPeM2 project
- Dynamic aggregation of medical data for research will help to put into practice TDM, that will be assisting medical doctors and will significantly improve patient care

References

- E. Nardini, M. Viroli, and E. Panzavolta. Coordination in open and dynamic environments with TuCSon semantic tuple centers. In Proceedings of the ACM SAC, New York, NY, USA, 2010.
- E. Denti, A. Natali, and A. Omicini. On the expressive power of a language for programming coordination media. In Proceedings of the of the ACM SAC, 1998.
- A. Dubovitskaya, V. Urovi, K. Aberer and M. Schumacher, An Agent Framework for Dynamic Health Data Aggregation for Research Purposes, A2HC Workshop in conj. with AAMAS 2015.