FGAI4H-N-054

E-meeting, 15-17 February 2022

Source: Editors DEL5.6

Title: DEL5.6: Data sharing practices – Progress Review Presentation

Purpose: Discussion

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Abstract: This PPT discusses the latest updates made on the deliverable Updated

DEL5.6: Data sharing practices + Data sourcing.

Al for Health

ITU-WHO Focus Group









- Initial draft describes the objectives and proposes an initial outline of the planned deliverable "Data Sharing Practices"
- This deliverable aims to provide an overview of the existing best practices for data sharing of health-related data, including the requirement to enable secure data sharing and issues related to data governance.
- The documents described **established solutions** and **novel** approaches based on **distributed and federated environments**.



Data Sharing Principles

Sharing medical data at scale is necessary to improve the development and adoption of artificial intelligence solutions for healthcare and to make these solutions more robust.

Negotiate the balance between potential harm from sharing critical data and the potential benefit of improving care.



Data Sharing Principles

- Sharing data for appropriate and authorised purposes. Why the data is being used
- Sharing data only with authorised users. Who is using the data
- Using data in a safe and secure environment.
- Applying appropriate protections to the data. Where the data is being used
- Ensuring public outputs from data sharing projects do not identify the people or organisations in the data.



- Necessary steps and requirements to enable secure data sharing
- Methods for Data sourcing
 - Centralized data sources
 - Distributed data sources

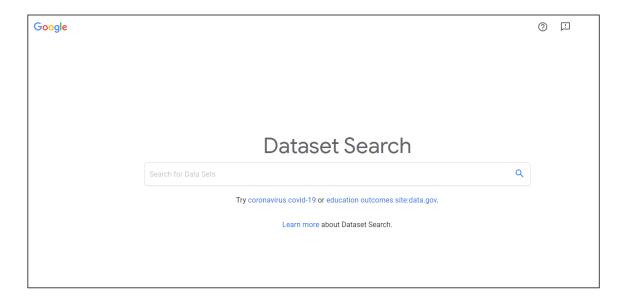


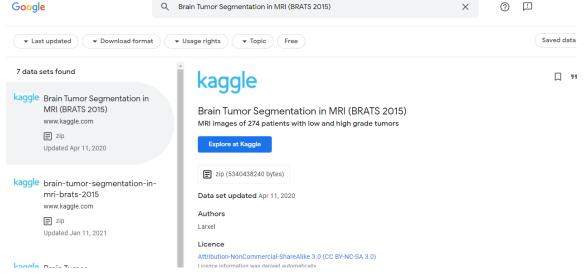
- Necessary steps and requirements to enable secure data sharing
 - Roles and responsibilities of the data providers, data processors & data receivers
 - Data anonymization and de-identification
 - Data minimization
 - Data confidentiality, Data security and privacy
 - Protection and Privacy assessments.
 - Responsibilities of data providers and data receivers
- Necessary steps and requirements to enable secure data sourcing
 - Description of data
 - Data ingestion and update
 - Results and dissemination of results including IA models

Best practices for data sharing/Sourcing Platform



Data Catalogue & Search







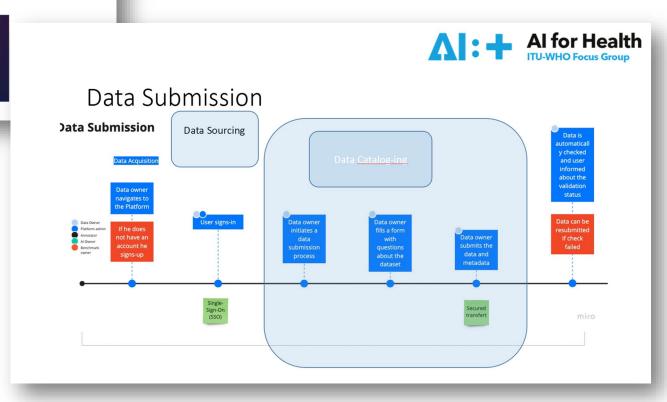


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Open-code software

- Develop software tools (e.g., data acquisition, data storage, annotation, prediction, evaluation, and reporting packages)
- Involve developers, regulators, and medical professionals
- Targeted towards a universal tool applicable across borders
- Usable by multiple stakeholders such as notified bodies and doctors

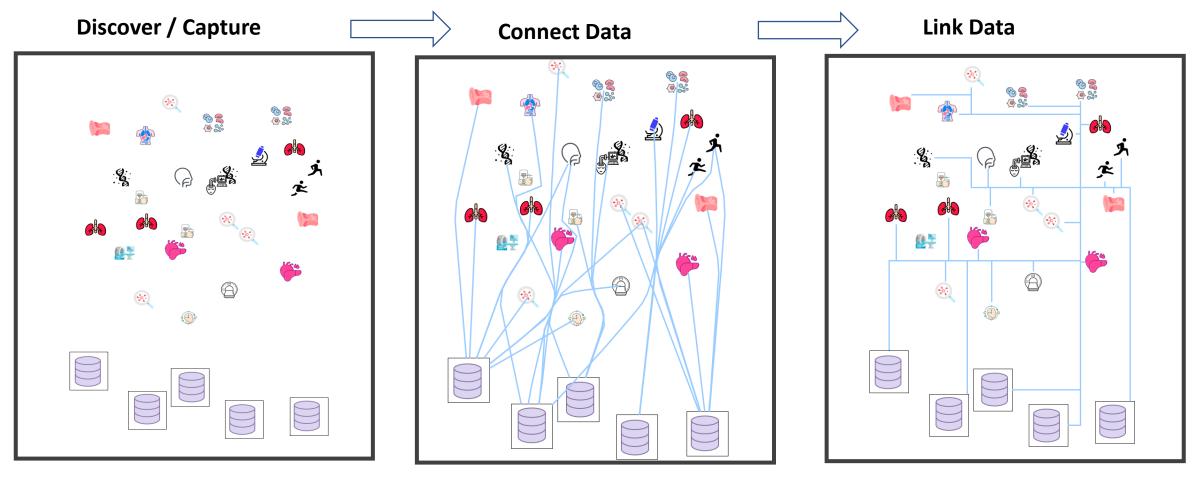
Health is not a local problem and requires a connected structure, universal solutions, and joined principles



Implement tools and define the processes that will support data descriptions and intelligent use in the context of the FG -AI4H objectives, including ethical, annotation, and validation



challenges.





DATA SPACES (Market) Squares









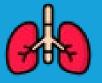
















DATA Catalog Cloud

API ACCESS LAYER



















Devices

Metadata Components



Technologies/Platforms tested Data search, data management

- Data lineage support
 - Amundsen
 - DataHub
 - Atlas
 - CKAN
 - Magda Federation

-Cloud based

- Google DC
- AWS
- -Azure

Technologies/Platforms Selected/built

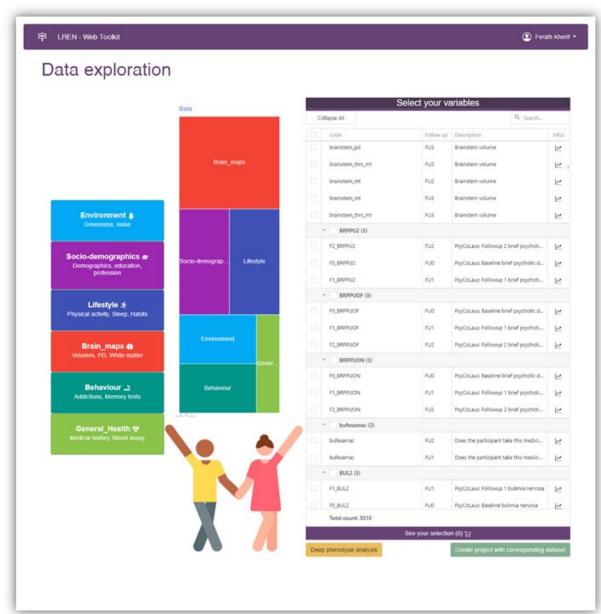
Data search, data management

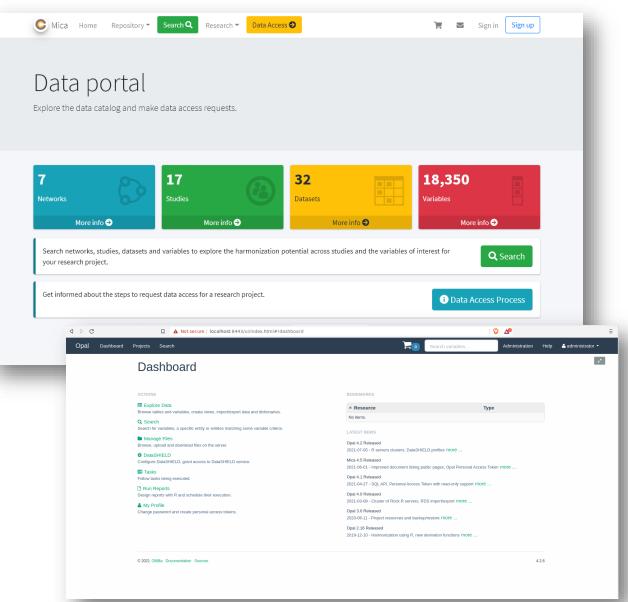
- + data lineage support +federation
- + Annotation metadata +link to ML model
- + Governance
- Combined multiple approaches based on own development and Obiba.org suites:
 - MetaData capture
 - Data curation according to standards
 - -Storage: ontologies/semantic based query
 - Publish data
 - Manage data transfer according to privacy sharing principles (D5.6)
 - Advanced query capabilities according to context information.
 - data transfer to ML models

Data sourcing

Own development and Obiba.org suites

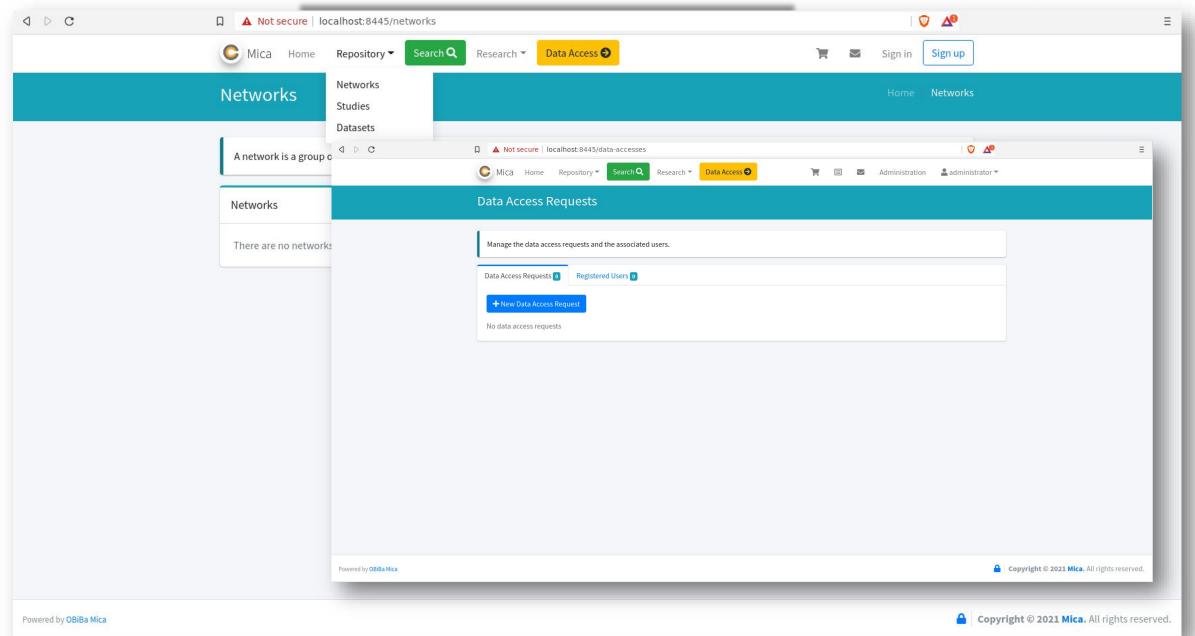




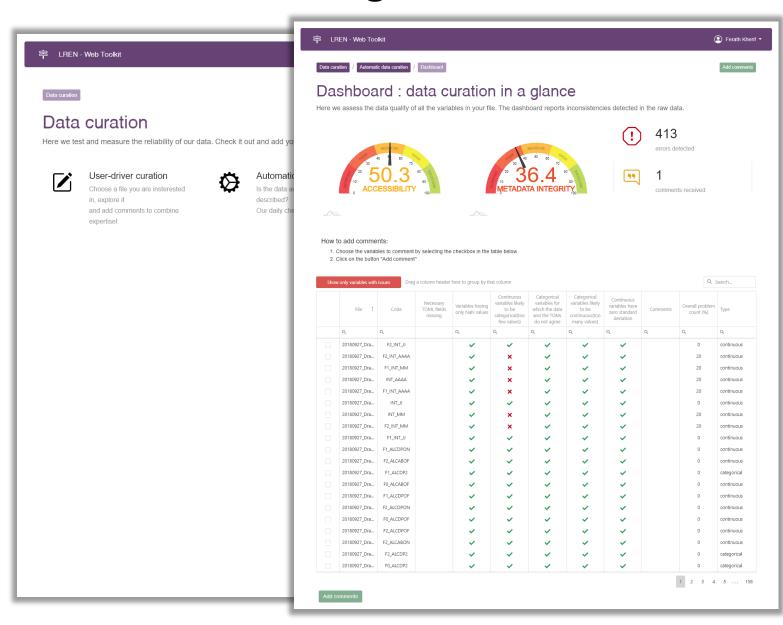


Data Access control





MVP: Data sourcing





Data Quality

DACQORD Principle





Metadata Tag

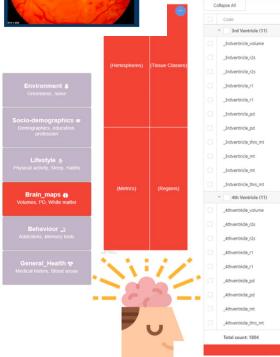
Data Source	Database
Data Acquisition' Sensing Modelity	Fundus camera image
Data Acquisition / Sensing Device Type	Fundus camera
Data Collection Place	Cherval, India
Data Collection Period	2017-2018
Data Collection Author(s) / Agency	Medindarlu.com Pvt. Ltd. India
Data Collection Funding Agency	Medindia/u.com Pvt. U.S. India
Outa Sampling Rate	-
Outa Update Version	-
Data Dimension	290×299 pixel metrix
Data Sample Size	82010 images
Data Type	Image (Fundus camera)
Data Resolution / Precision	Image Resolution: 2 to 5 Megapixels.
Data Privacy / De-identification Protocol	Anonymised distasetswere used Informed consent. Subjects were informed about their landed purpose of data use.
Data Safety & Security Protocol	Storage on secure servers Used SSS, for all web access Followed best practices for data privacy and security
Data Assumptions/ Constraints Dependencies	 10 - 20% of images are non-gradable - its out-of-floors, incorrect illumination, etc. input data include subpopulation variations in terms of Age: offirent, Center is M-1, Ethnicity i mostly inflam input data was impresentative of artistions in data acquation modelly in terms obstiment models of Funda Cameras No imassing data fund for any predictor arcibine
Data Exclusion Oriteria	Images that were non-graduate were decarded for ML model featuring.
Data Acceptance-Standards Compliance	-
Data Pre-processing Technique(s)	 A separate Mi, model to identify non-graduble images was used to remove these from the data. Images were resized to 299k/299 pixel matrix and normalized usiny imagenit mean and sid deviation.
Data Annotation Process / Tool	Images are labeled with the CRI severity levels by various ophthalmologists
Data Blas & Variance Minimization Technique	Validation loss was tracked and compared with training loss to ensure bias and spriance were minimized during training. Techniques included data augmentation, regularization and dropout.
Train: Tuning(validation) : Test (evaluation) Dataset Partitioning Ratio	The total dataset size of 4240 images was split 80% for training and 20% for validation
Data Registry URL	Prode - not outlined

Metadata

- > To enrich dataset
- > To search dataset
- > To evolve Eval data intelligence
- > Map metadata to clinical relevance









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Q Search...

Follow up Description

FU2

FU3

FU3 FU2 FU3 FU3

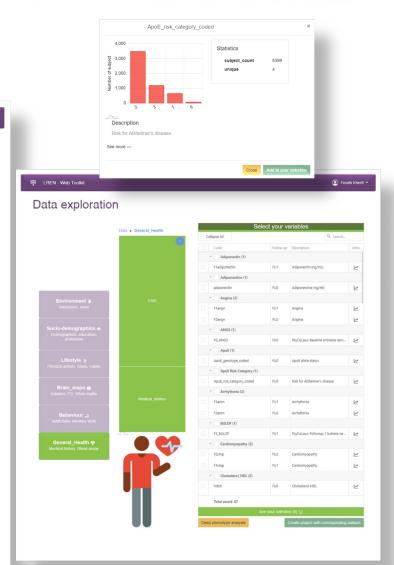
FU3

FU2

FU2

FU2

FU3





Thanks for your attention

Contact Ferath.kherif@chuv.ch





