

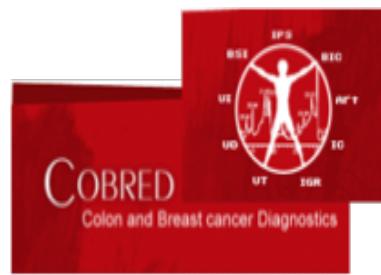
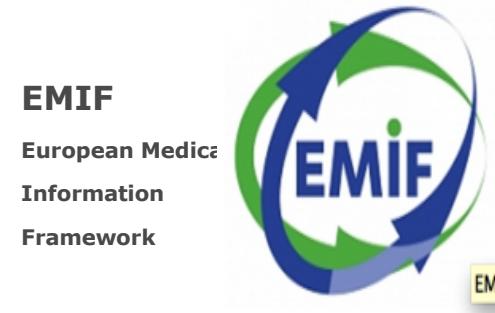
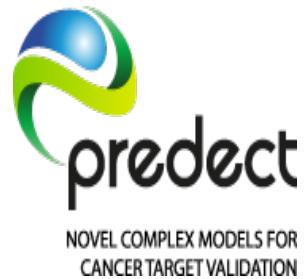


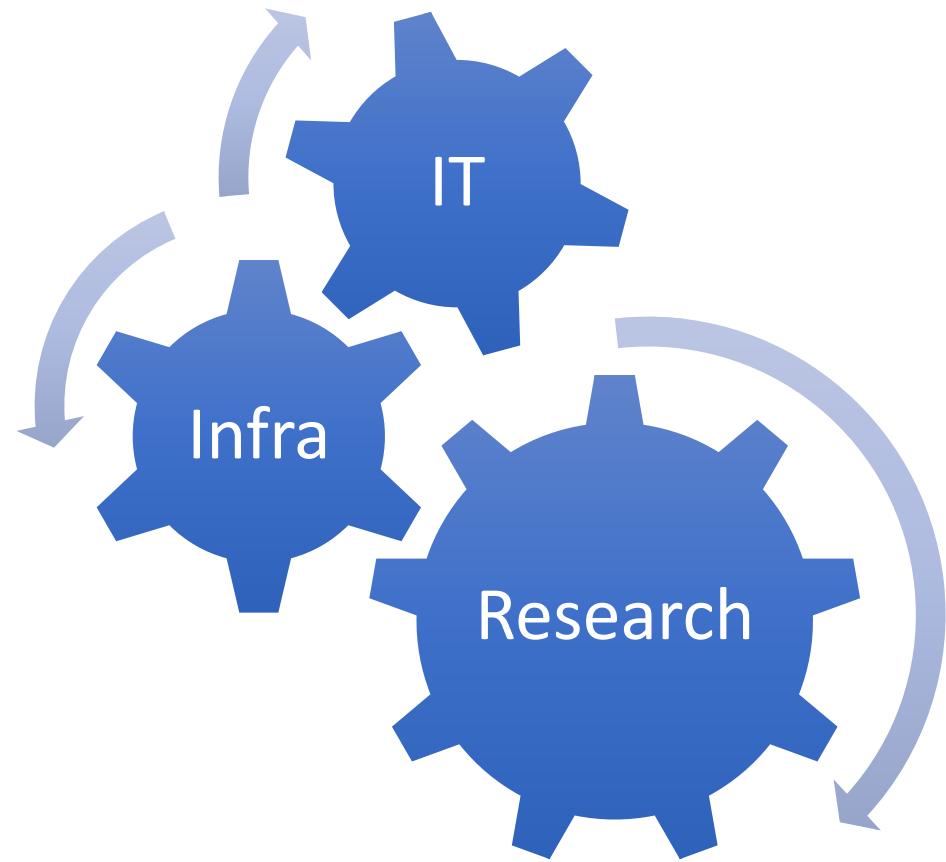
UNIVERSITY OF TARTU

Elektroonilised andmekogud –
baas pikaaegseteks uuringuteks

Jaak Vilo

Academic excellence since 1632

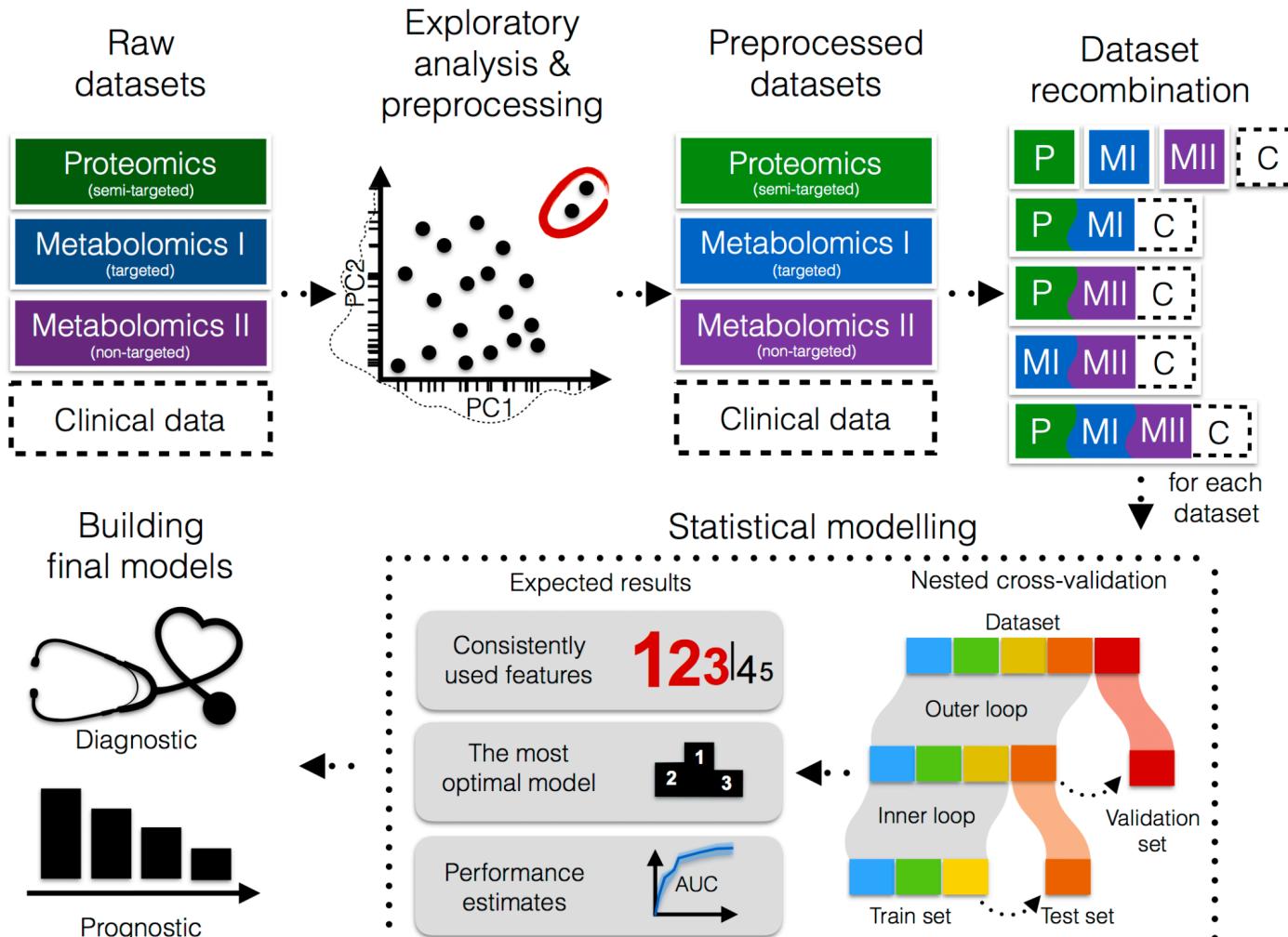




Research “workflow”



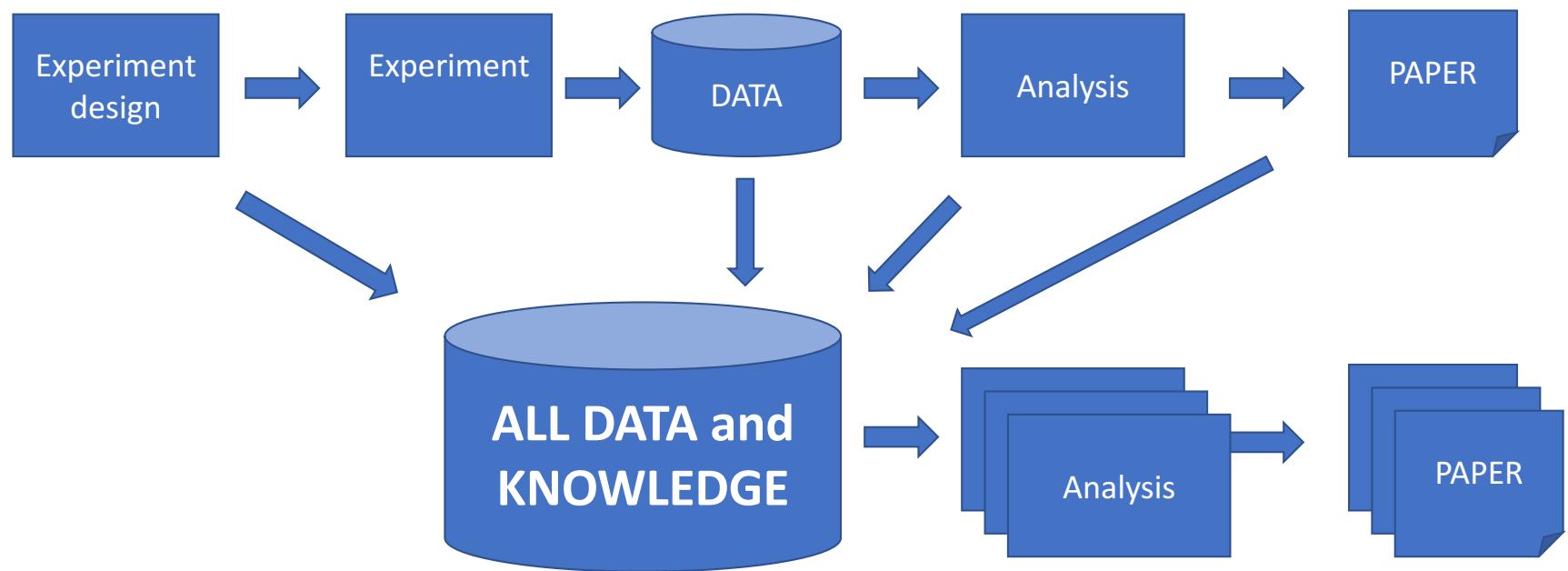
Annex 7: Strategic plan for data analysis within the BioEndoCar project

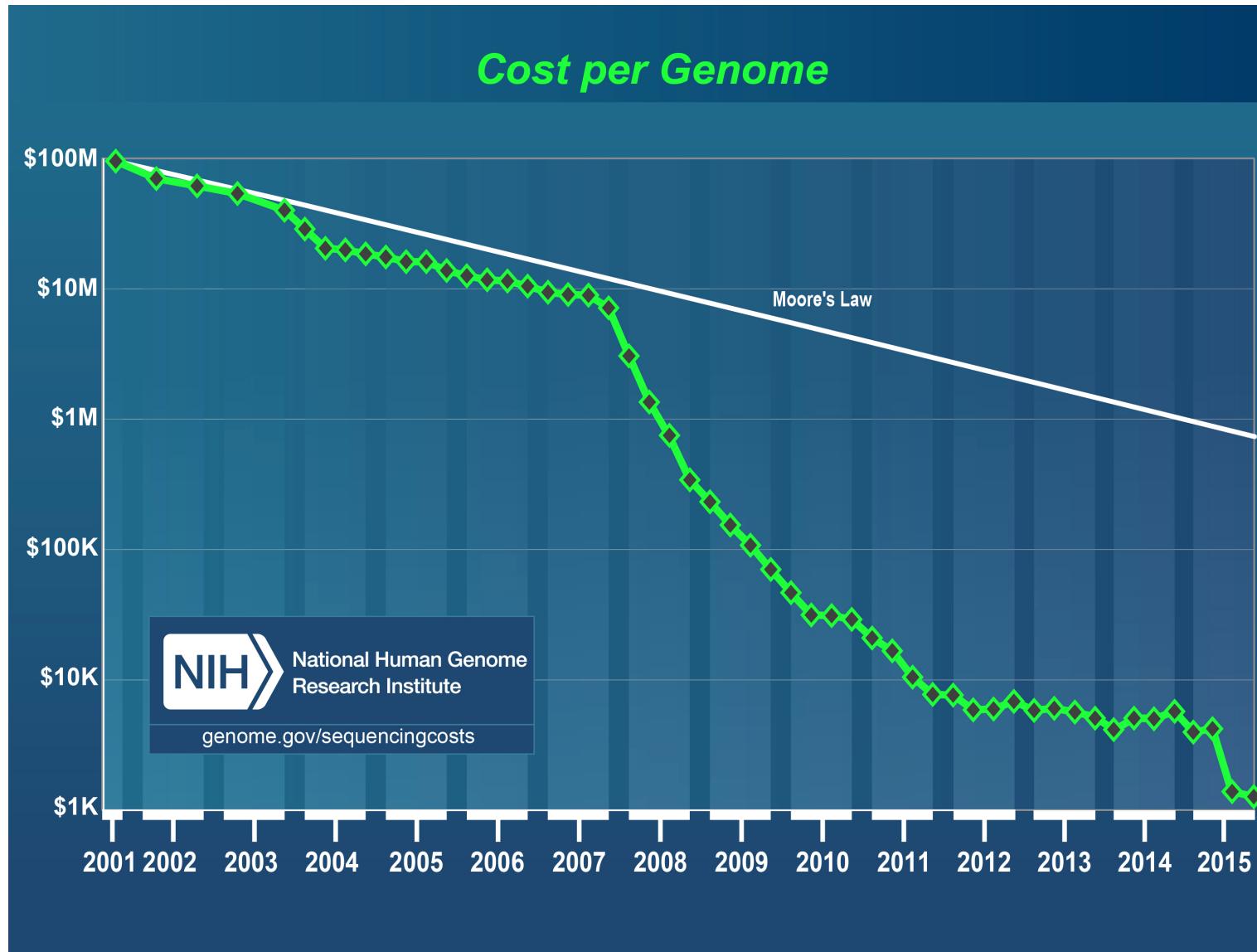


Nested CV visualisation was adopted from Gael Varoquaux

Hypothesis-driven
vs
Hypothesis-free(?)

Research “workflow”







SOLID 5500



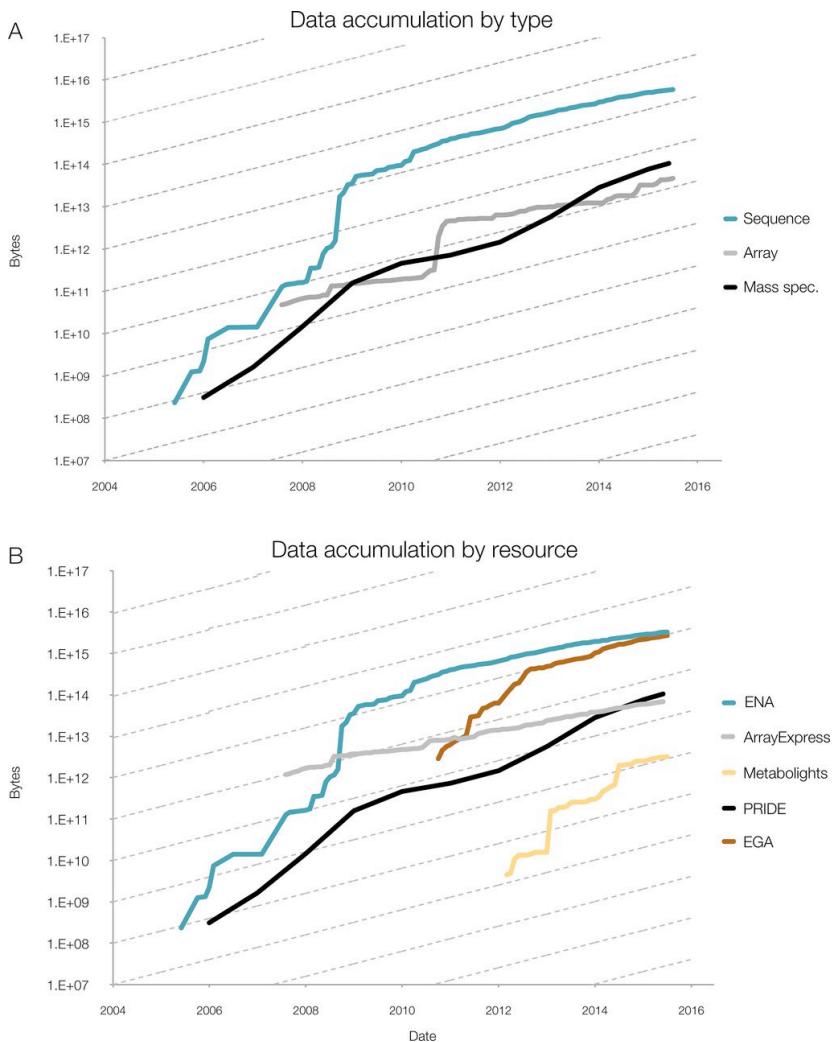
Illumina HiSeq2000



Data growth in the life sciences

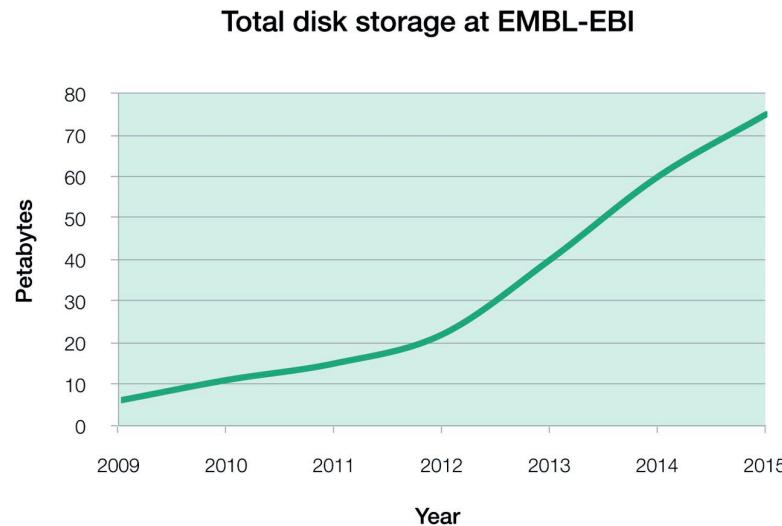
Data growth at EMBL-EBI

Source: Charles E. Cook et al. *Nucl. Acids Res.* 2016;44:D20-D26



The data challenge: Data growth

- Computer speed and storage capacity is **doubling every 18 months** and this rate is steady
- DNA sequence data is **doubling every 6-8 months** over the last 3 years and looks to continue for this decade



Source: Charles E. Cook et al. *Nucl. Acids Res.* 2016; 44: D20-D26

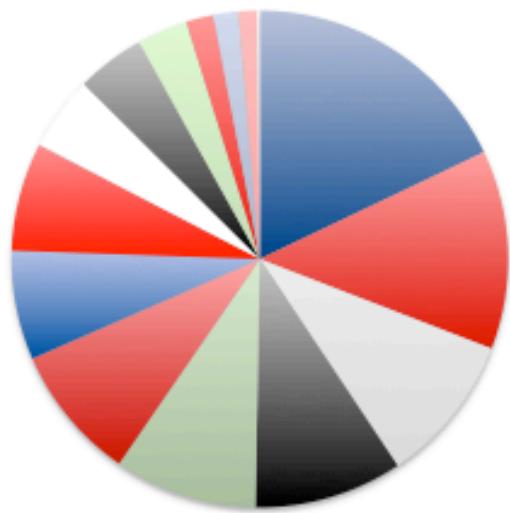
The data challenge: Geographic spread

- Data production sites increasing across Europe
- European Illumina seq sales up 20% 2014



Source: <http://omicsmaps.com>

Data resources in life science



- Genomics Databases (non-vertebrate) (17.9%)
- Protein sequence databases (12.9%)
- Human Genes and Diseases (9.8%)
- Structure Databases (9.7%)
- Metabolic and Signaling Pathways (9.3%)
- Nucleotide Sequence Databases (8.8%)
- Human and other Vertebrate Genomes (7.1%)
- Plant databases (7.1%)
- RNA sequence databases (4.9%)
- Microarray and other Gene Expression Databases (4.5%)
- Other Molecular Biology Databases (3.3%)
- Immunological databases (1.8%)
- Organelle databases (1.6%)
- Proteomics Resources (1.2%)
- Cell biology (0.2%)

**molecular biology
data resources**

~1800

Nucleic Acids Research annual Database Issue
and the NAR online Molecular Biology Database Collection in 2012.
MY Galperin, GR Cochrane – Nucleic Acids Research, 2011

We generate data faster than we can deposit it

		Network file transfer rate
24 hours	100 Mb	
DNA sequencing 	~100 GB	~5 hours
Mass spectrometry 	~4 TB	~4 days
Microscopy 	~4 TB	~4 days



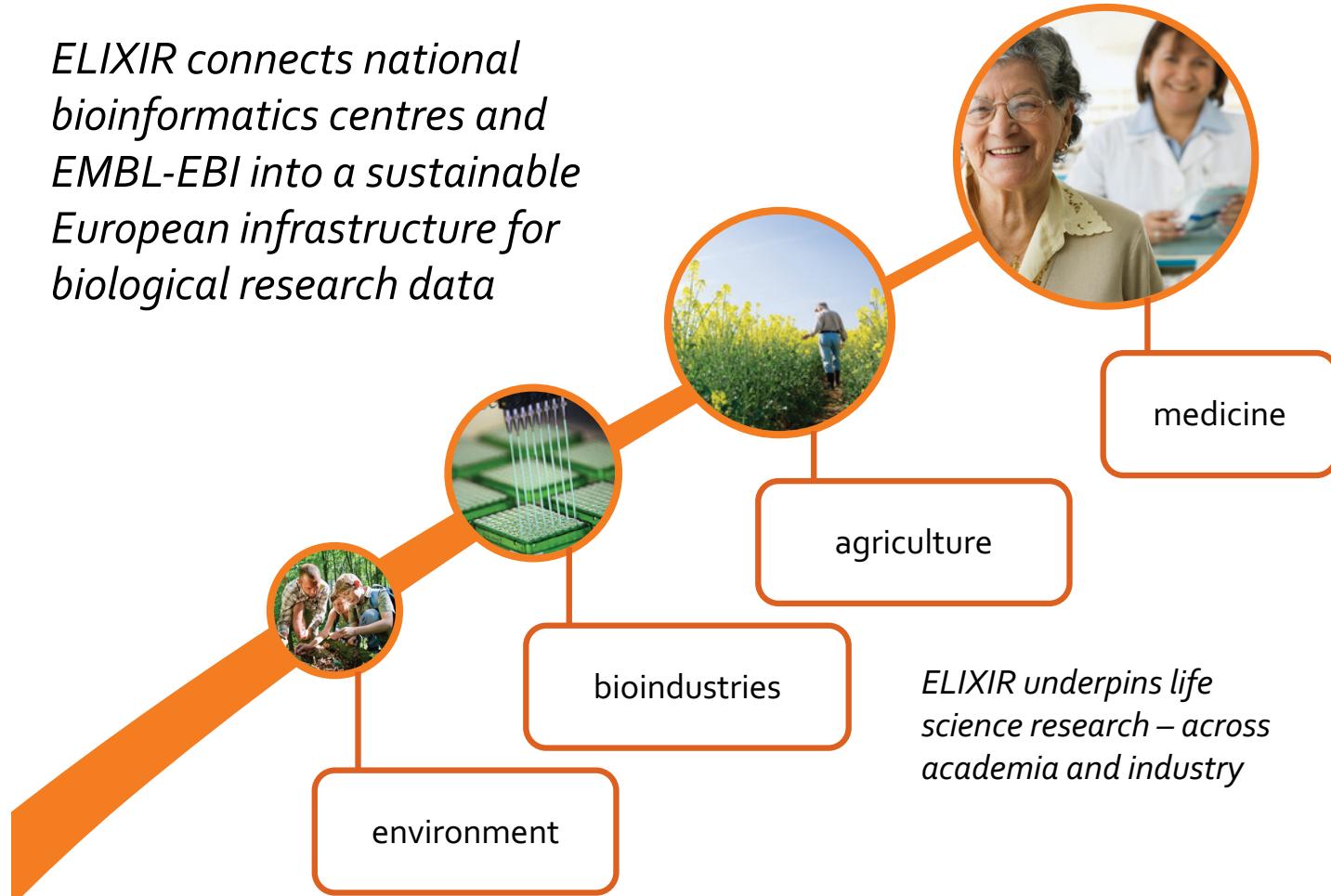
ELIXIR

*Safeguarding the results of life
science research in Europe*



www.elixir-europe.org

*ELIXIR connects national
bioinformatics centres and
EMBL-EBI into a sustainable
European infrastructure for
biological research data*

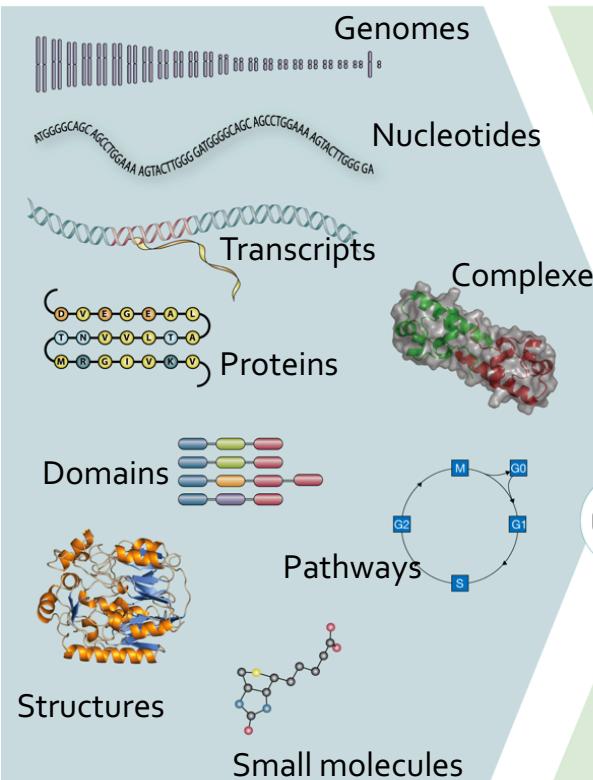


*ELIXIR underpins life
science research – across
academia and industry*

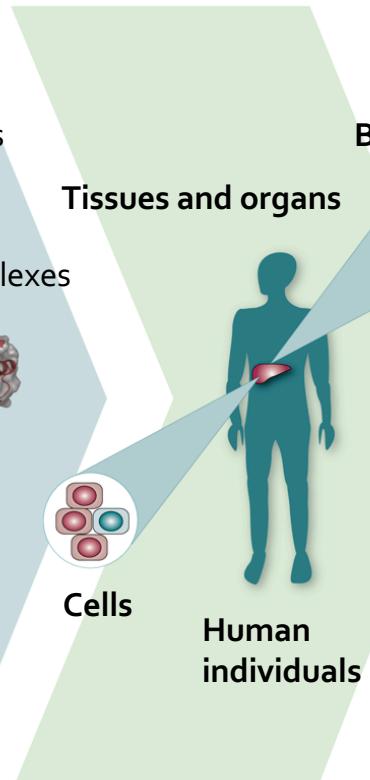


From molecules to medicine

Molecular components

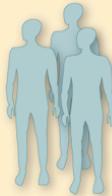
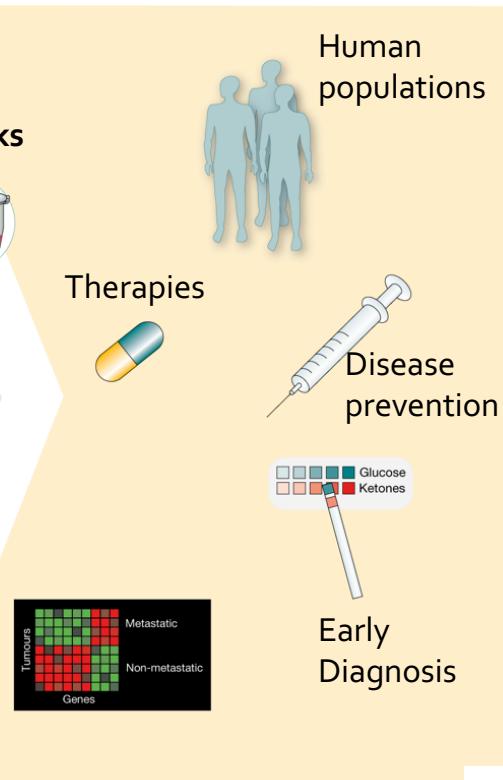


Integration



Biobanks

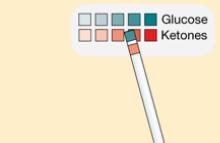
Translation



Therapies



Disease prevention



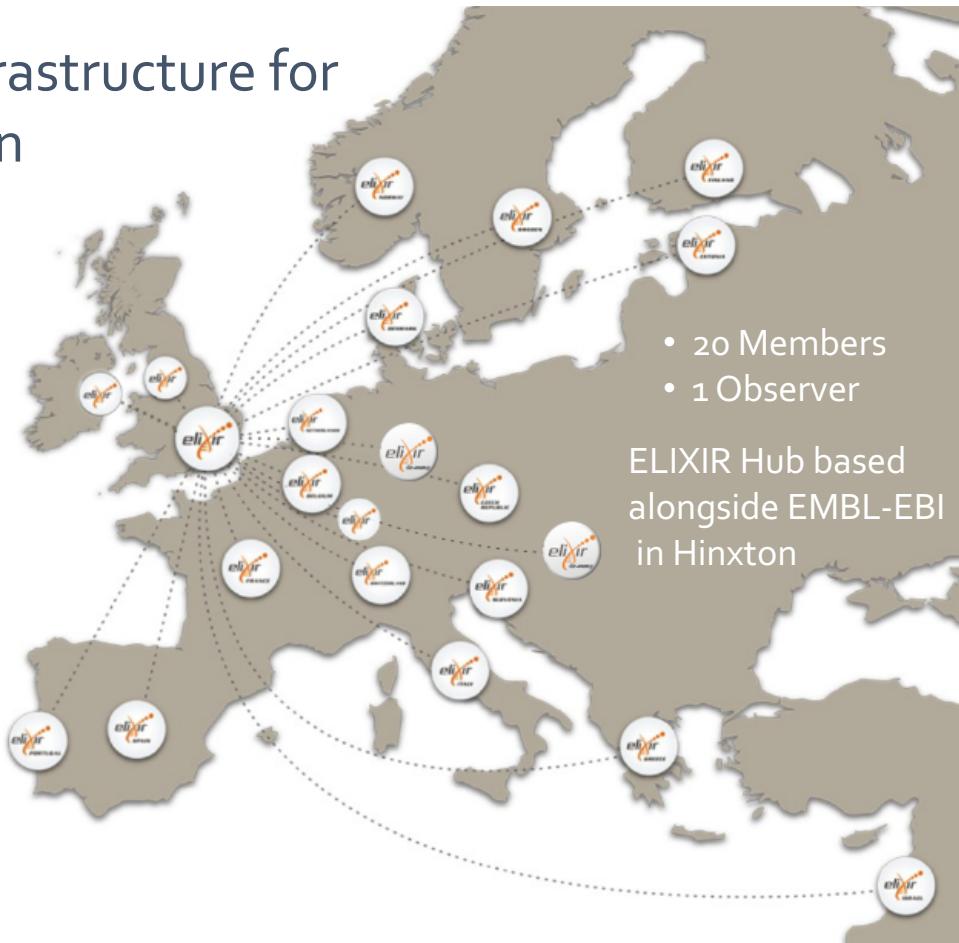
Early
Diagnosis



ELIXIR: European infrastructure for biological information

Data infrastructure for Europe's life-science research:

-  *Data*
-  *Interoperability*
-  *Tools*
-  *Compute*
-  *Training*
-  *Marine metagenomics*
-  *Crop and forest plants*
-  *Human data*
-  *Rare diseases*



 www.elixir-europe.org
 [@ELIXIREurope](https://twitter.com/ELIXIREurope)

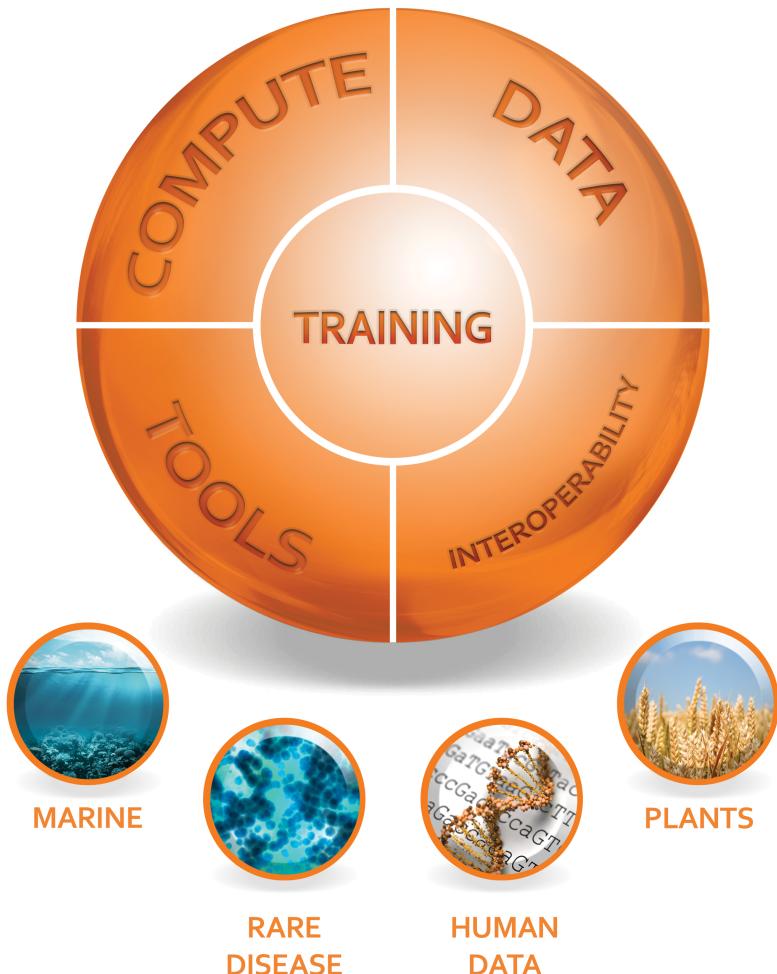


ELIXIR Members



ELIXIR Observers





ELIXIR Structure

Five technical platforms
for **Compute**, **Data**, **Tools**
and **Interoperability**

Complemented by four
use cases for **marine**
meta-genomics, **rare**
diseases, **human data**
and **plants sciences**

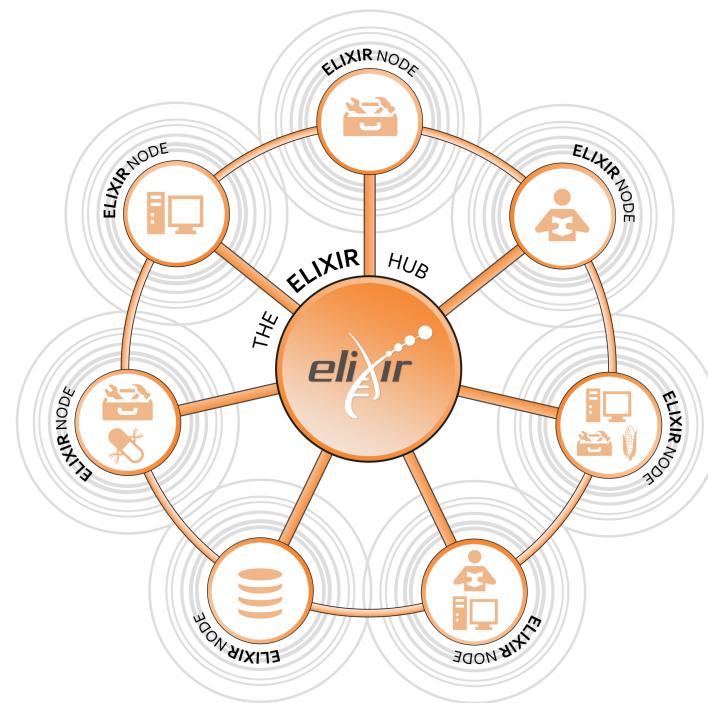


A distributed infrastructure to scale with the challenge

ELIXIR data infrastructure
for Europe's life science
research sector

ELIXIR Nodes build local
bioinformatics capacity
throughout Europe

ELIXIR Nodes build on
national strengths and
priorities



FAIR principles for data

Findable

Accessible

Interoperable

Reusable

Data Management Plan; Data management life-cycle

To be Findable:

- F1. (meta)data are assigned a globally unique and eternally persistent identifier.
- F2. data are described with rich metadata.
- F3. (meta)data are registered or indexed in a searchable resource.
- F4. metadata specify the data identifier.

To be Accessible:

- A1 (meta)data are retrievable by their identifier using a standardized communications protocol.
 - A1.1 the protocol is open, free, and universally implementable.
 - A1.2 the protocol allows for an authentication and authorization procedure, where necessary.
- A2 metadata are accessible, even when the data are no longer available.

To be Interoperable:

- I1. (meta)data use a formal, accessible, shared, and broadly applicable language for knowledge representation.
- I2. (meta)data use vocabularies that follow FAIR principles.
- I3. (meta)data include qualified references to other (meta)data.

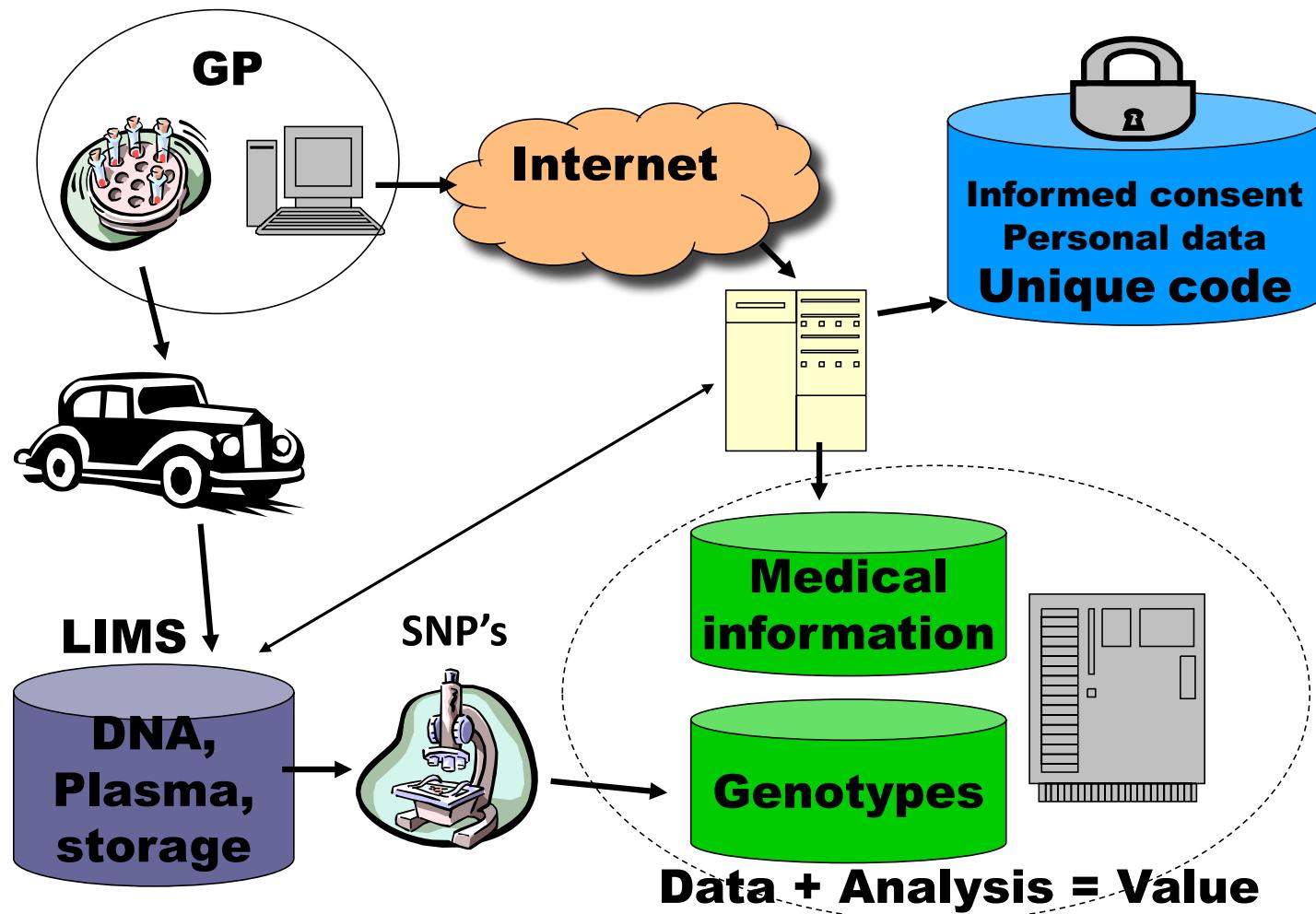
To be Re-usable:

- R1. meta(data) have a plurality of accurate and relevant attributes.
 - R1.1. (meta)data are released with a clear and accessible data usage license.
 - R1.2. (meta)data are associated with their provenance.
 - R1.3. (meta)data meet domain-relevant community standards.

Rewind 18 years... Estonian Biobank



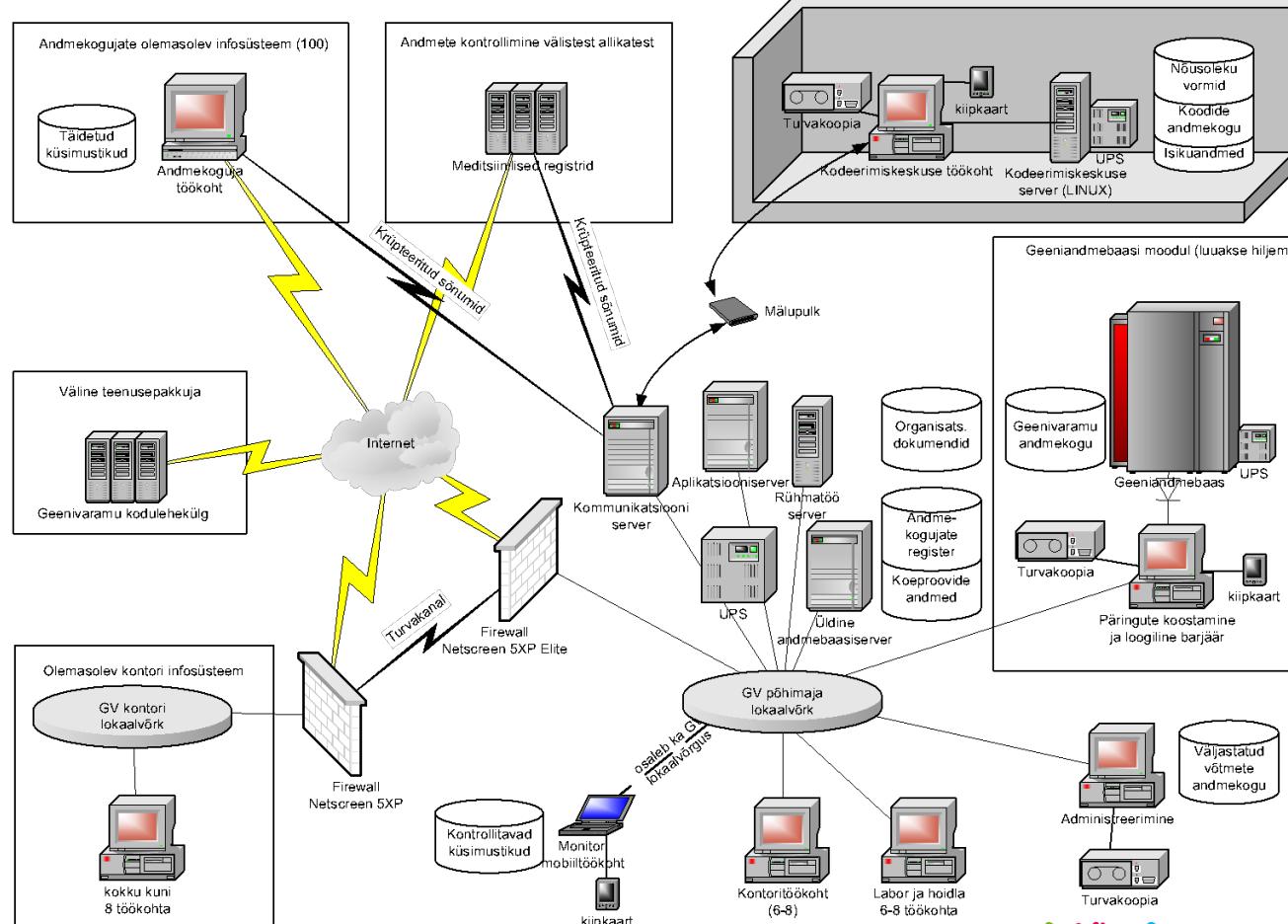
Process of data collection and handling







Data collections



eesti geenivaramu





Company Introduction & Estonian Registries

www.quretec.com

Qure Data Management Platform

The core product of Quretec, the Qure Data Management software Platform has been designed for collection, handling, and analysis of complex data like health registries, questionnaires, clinical case report forms and other rich metadata under high quality, security, and robustness requirements.



Qure Designer
For building object models, views and questionnaires



Qure Administration
For managing server, studies, users and more...

Qure Browser – a web based data entry user interface

Firefox ▾ Qure Browser - Tuberculosis Register +

[I] Persons > [1] JOHN SCHMIDT (33609010275) 000007 > [A] Case 2012-05-22 primary (00000701) > [A.3] Treatment cards > [B] Treatment card 2012-05-22 primary > [B.1] Data card info (0000070101)

Persons Case 2012-05-22 primary (00000701) Death Register data Search of cases Treatment cards search

> Basic data > Treatment cards > Councillors > Comorbidities > Surgery > Medications > Drugs adverse events > Lab notifications

> Data card info (0000070101)

[B.1] DATA CARD INFO (0000070101)

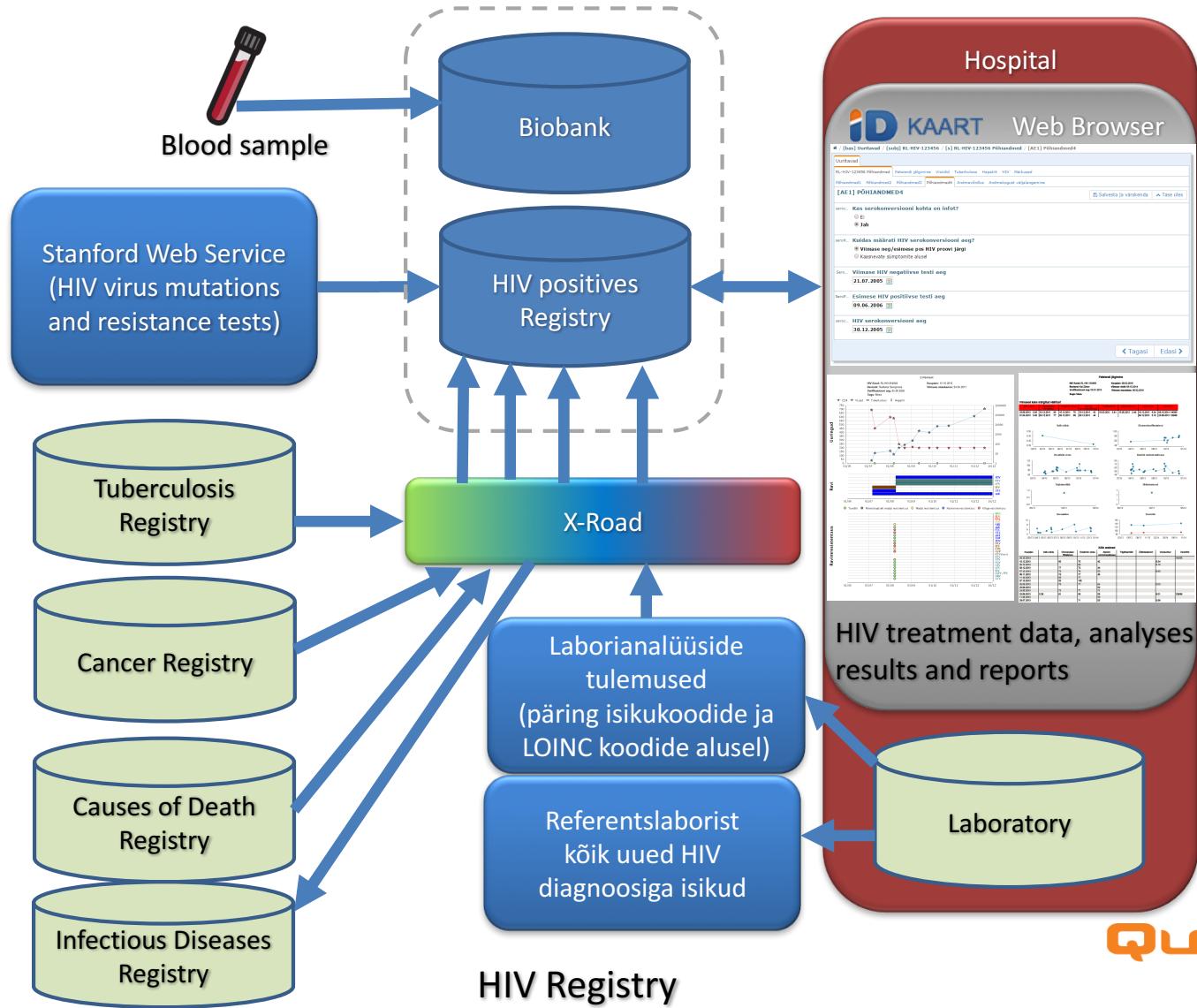
B.1.1 Baseline <input type="text" value="22.05.2012"/>	B.1.2 End of treatment <input type="text" value="22.05.2012"/>	B.1.3 Date of diagnosis <input type="text"/>	B.1.4 Days of treatment
B.1.5* Baseline condition <input type="text" value="primary"/>	B.1.6 Final Condition <input type="text" value="treatment ended"/>	B.1.7 Place of treatment	
B.1.8 Start of outpatient therapy <input type="text"/>	B.1.9 End of outpatient therapy <input type="text"/>	B.1.10 Start of hospital treatment <input type="text"/>	B.1.11 End of hospital treatment <input type="text"/>
B.1.12 Diagnosis of tuberculosis <input type="text" value="A15.2"/> Select... [A15.2] Tuberculosis pulmonum histologice confirmata. Condiciones sub A15.0 datae, histologice	B.1.13 Other diagnosis <input type="text"/> Select... (Unselected)		
B.1.14 Diagnosis of tuberculosis 2 <input type="text"/> Select... (Unselected)	B.1.15 Other diagnosis <input type="text"/> Select... (Unselected) 2		
B.1.16 Diagnosis of death <input type="text"/> Select... (Unselected)	B.1.17 Date of death <input type="text"/>		
B.1.18* Definition of diagnosis <input type="text" value="pulmonary tuberculosis"/> B.1.19 Form <input type="text" value="infiltrative"/>	B.1.20 Location <input type="text"/>		
B.1.21 Sputum <input type="text" value="0"/> not done <input type="checkbox"/>	B.1.22 Sputum <input type="text" value="1"/> + <input type="checkbox"/>	B.1.23 Destruction <input type="text" value="no"/>	B.1.24 Quantiferon <input type="text"/> test
B.1.25 HIV <input type="text"/>	B.1.26 Date of HIV test <input type="text"/>	B.1.27 MDR at baseline <input type="text" value="no"/>	B.1.28 MDR ravi lõpul <input type="checkbox"/>
B.1.29 BK findings in other material? <input type="checkbox"/>	B.1.31 Histology <input type="checkbox"/>		
B.1.33* County date <input type="text" value="22.05.2012"/>	B.1.34* County <input type="text" value="Tallinn"/>	B.1.35* County medical <input type="text" value="Other Doctor (2)"/>	
B.1.36 Medical institution <input type="text"/>	B.1.37 TOR <input type="checkbox"/>		
B.1.40 Filler <input type="text"/> <input type="checkbox"/>	B.1.41 Filler institution <input type="text"/>	B.1.42 Filling date <input type="text"/>	
B.1.43 Cause of treatment failure <input type="text"/>	B.1.44 Basis of <input type="text"/>	B.1.45 Age <input type="text" value="75"/>	
B.1.46* Show statistics <input checked="" type="checkbox" value="1"/> yes <input type="checkbox"/>	B.1.47 Remarks <input type="text"/>		



Estonian Health Registries on Qure Data Management Platform

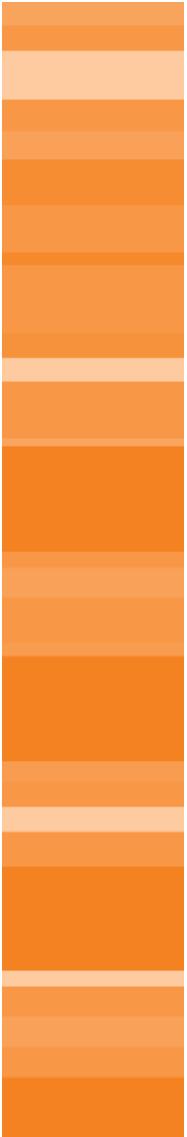


- HIV registry
- Cancer registry
- Tuberculosis registry
- Causes of death registry
- Medical birth registry
- Abortion registry
- Drug treatment database
- Infectious diseases registry
- Estonian Genome Center Biobank
- North Estonia Medical Centre hospital registries
 - Breast Cancer
 - Colon Cancer
 - Pulmonary Arterial Hypertension





- Health registries (Cancer, HIV, Tuberculosis and other registries)
- Biobanks (Estonian Genome Center)
- Clinical Trials
 - EDC
 - Data Management
 - Statistical Analysis
 - Medical Writing



Qure CLINICAL

- Clinical Trials
 - EDC, Data Management, Statistical Analysis, Medical Writing
- 5 active studies at the moment
- Clinical Trial phases I-III
- >100 sites
- >400 active EDC users
- >1000 subjects eCRFs
- Rheumatology, Gynecology, Oncology, Pediatrics

Näiteid toetatud uuringutest:

CF111 - 2014-2015 uuring Drospirenone farmakokineetika ja -dünaamika hindamiseks rinnapiimas
H-2011/07-UA - 2013-2014 uuring Herbeprot-P efektiivsuse ja ohutuse hingamiseks troofilise jalahaavandiga patsientidel.

DICL001 - 2014-2017 uuring Diclofenac geeli bioekvivalentsuse määramiseks Voltaren geeli suhtes põlve osteoartrroosiga patsientidel SPIRO - 2014-2015 - uuring Spironolaktooni farmakokineetika hindamiseks lastel

HPV-EU-001 - 2015-... uuring HPV vaktsiini turvalisuse ja efektiivsuse määramiseks HPV 16/18 positiivsetel patsientidel

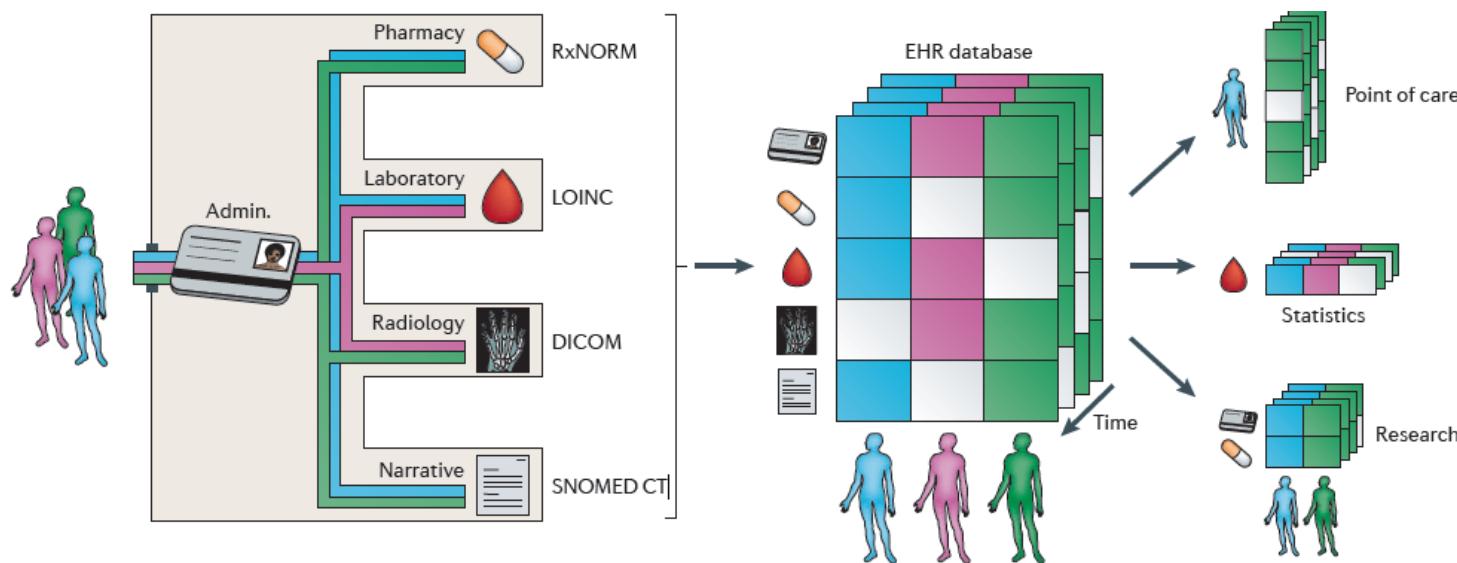
MDP-CLIN-001 - 2015-... uuring Cisplatini ja radioteraapia turvalisuse hindamiseks pea- ja kaelavähi patsientidel

ARC 2015-... uuring Cefepime farmakokineetika ja -dünaamika hindamiseks lastel

EFIT - 2016-... uuring rTMSi (repetitve transcranial magnetic stimulation) efektiivsuse hindamiseks insuldijärgsetel patsientidel

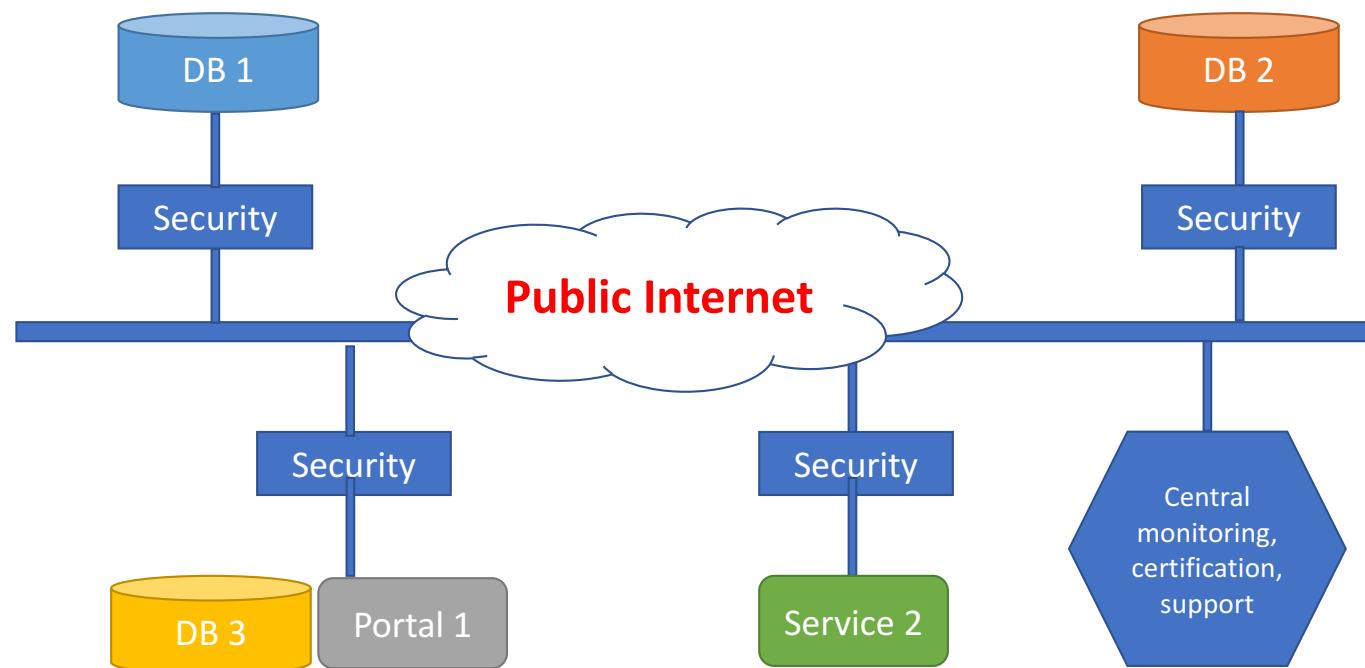
ETVAX - 2017-... uuring ETEC vaktsiini turvalisuse, efektiivsuse ja immunogeensuse hindamiseks Lääne-Aafrikat külastavatel patsientidel

Digitaalne terviselugu ja selle potentsiaal

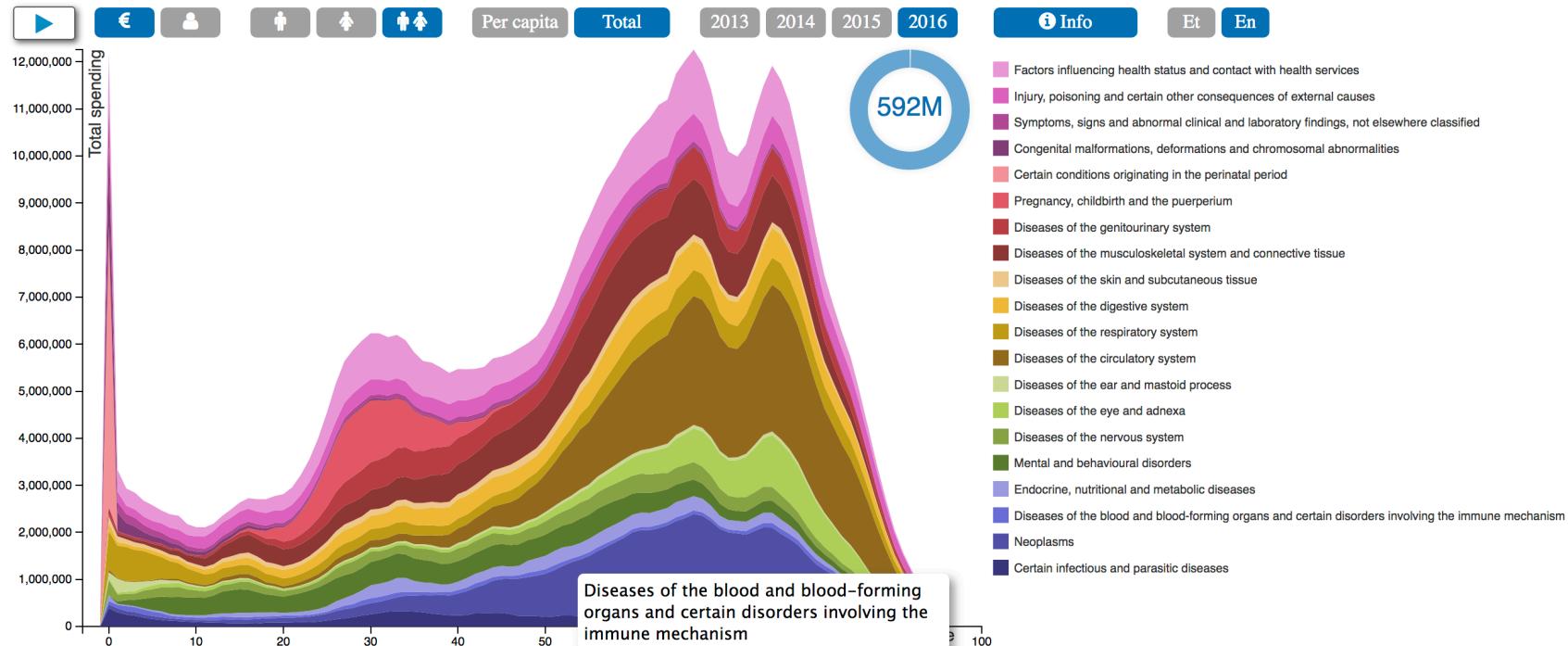


Peter B. Jensen, Lars J. Jensen and Søren Brunak. 2012. Mining electronic health records: towards better research applications and clinical care. *Nature Reviews Genetics* 13, 395-405.

Linked databases - X-Road common bus



Overview of the Estonian specialized medical care spending and patient counts by age and diagnosis



Source: Estonian Health Insurance Fund

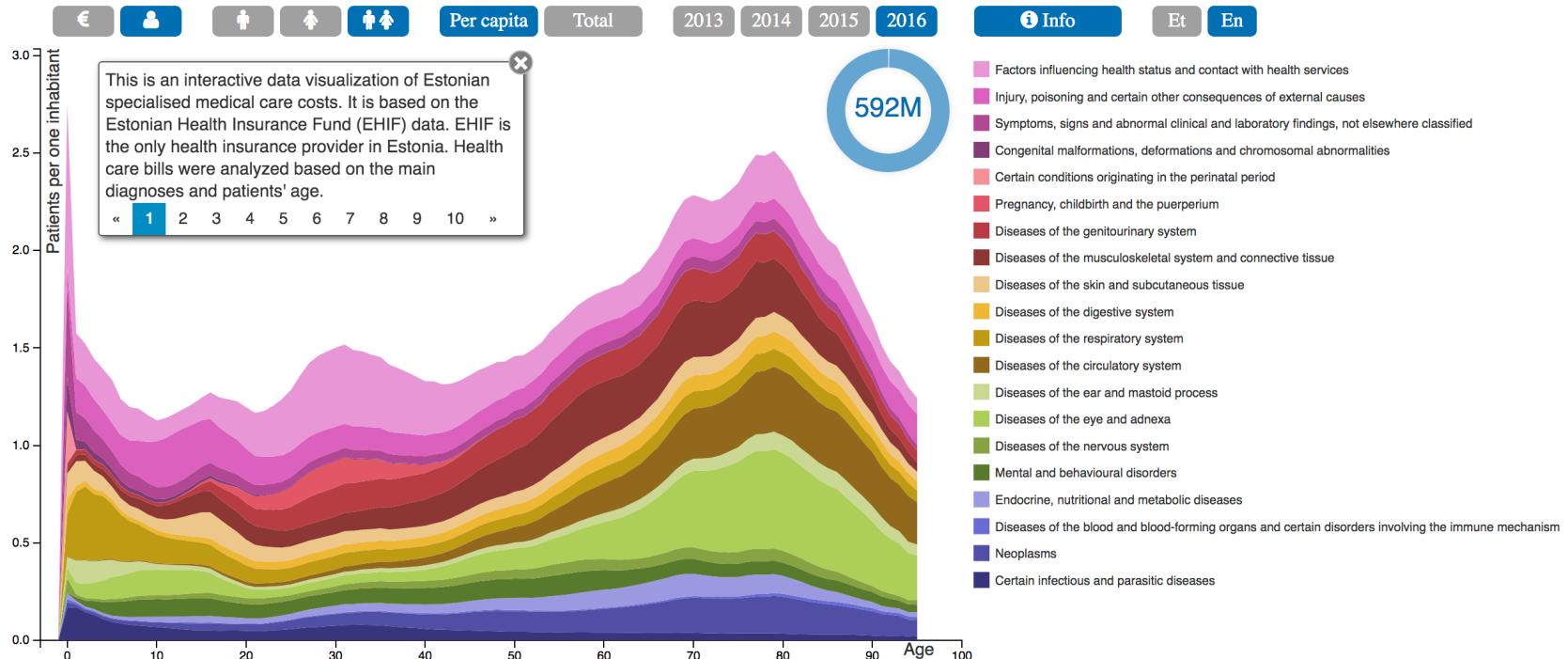


STACC

Software Technology and
Applications Competence Center



Overview of the Estonian specialized medical care spending and patient counts by age and diagnosis



Source: Estonian Health Insurance Fund

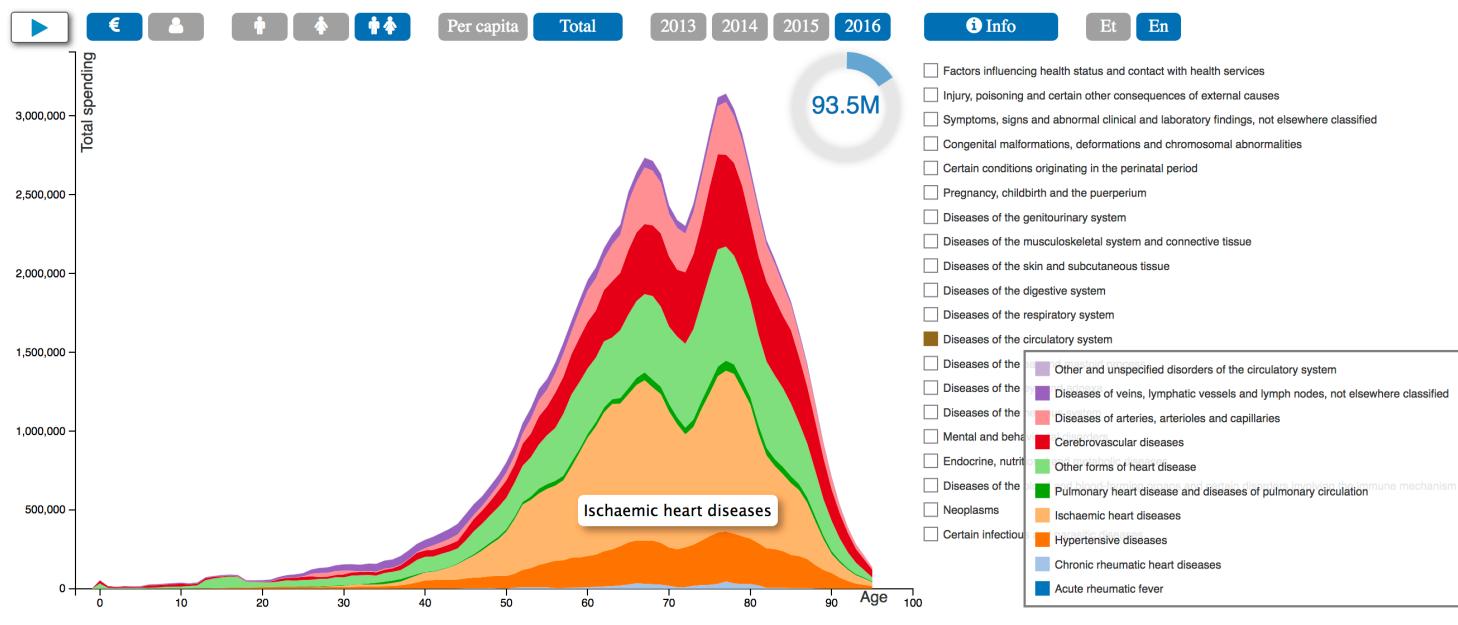


STACC

Software Technology and
Applications Competence Center



Overview of the Estonian specialized medical care spending and patient counts by age and diagnosis



Source: Estonian Health Insurance Fund



STACC

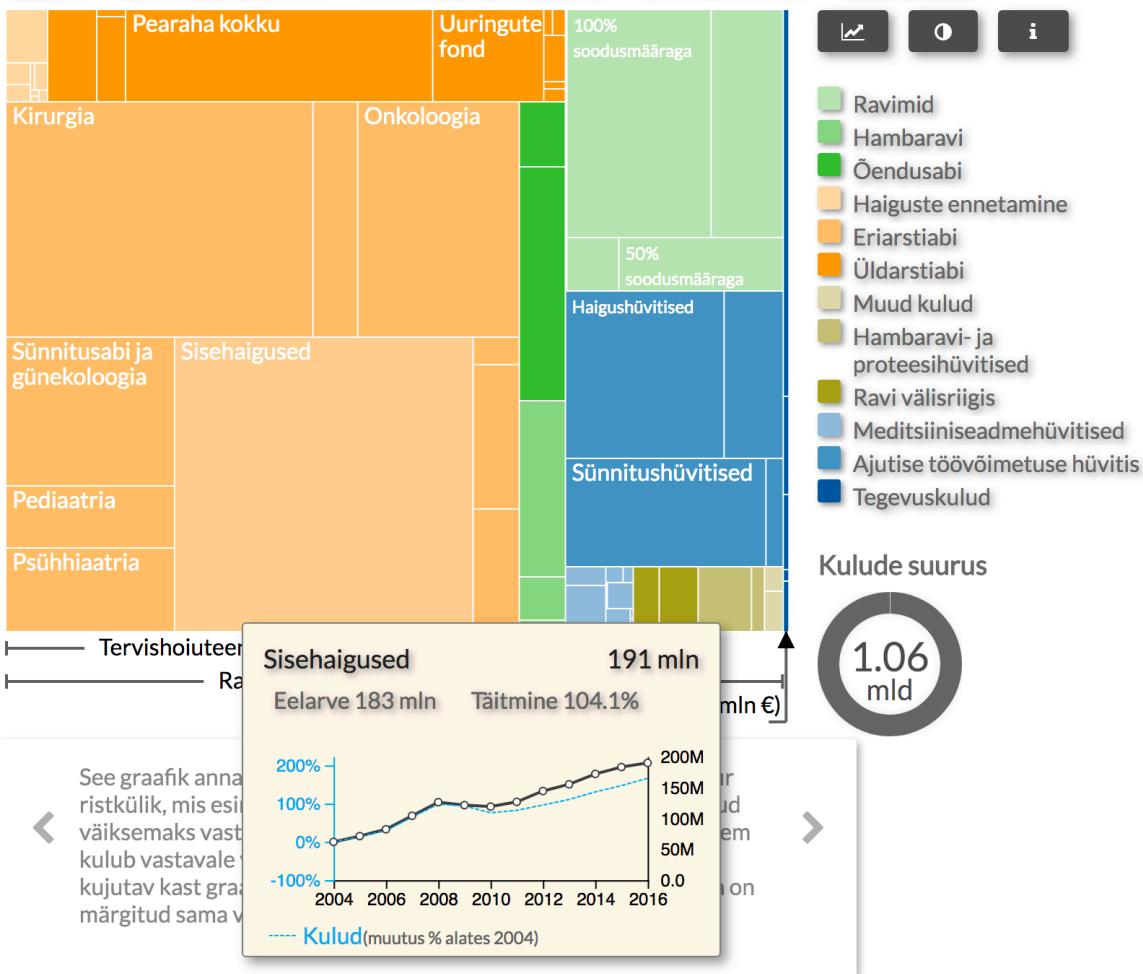
Software Technology and Applications Competence Center



Haigekassa kulud 2016 (Auditeerimata)

Overall health expenditure in 2016: 1.06B

Kulud > Ravikindlustuse kulud > Tervishoiuteenuste kulud > Eriarstiabi kulud > Sisehaigused



Nr of documents in E-Health DB 1.53 M individuals (06.03.2017)

Document type	Nr. of documents in E-health
Outpatient notes	15,323,163
Inpatient discharge summaries	1,643,296
Development assessment notices	34,308
Immunization side effects	6
Immunization notes	490,624
Growth notes	130,448
Ambulance Cards	340,274
Home nurse reports	5,634
Examination reports	122,945
Advisory notices	105,224
Pointers to “pictures” in PACS	2,866,152
Referrals	991,790
Referral responses	6,902,871

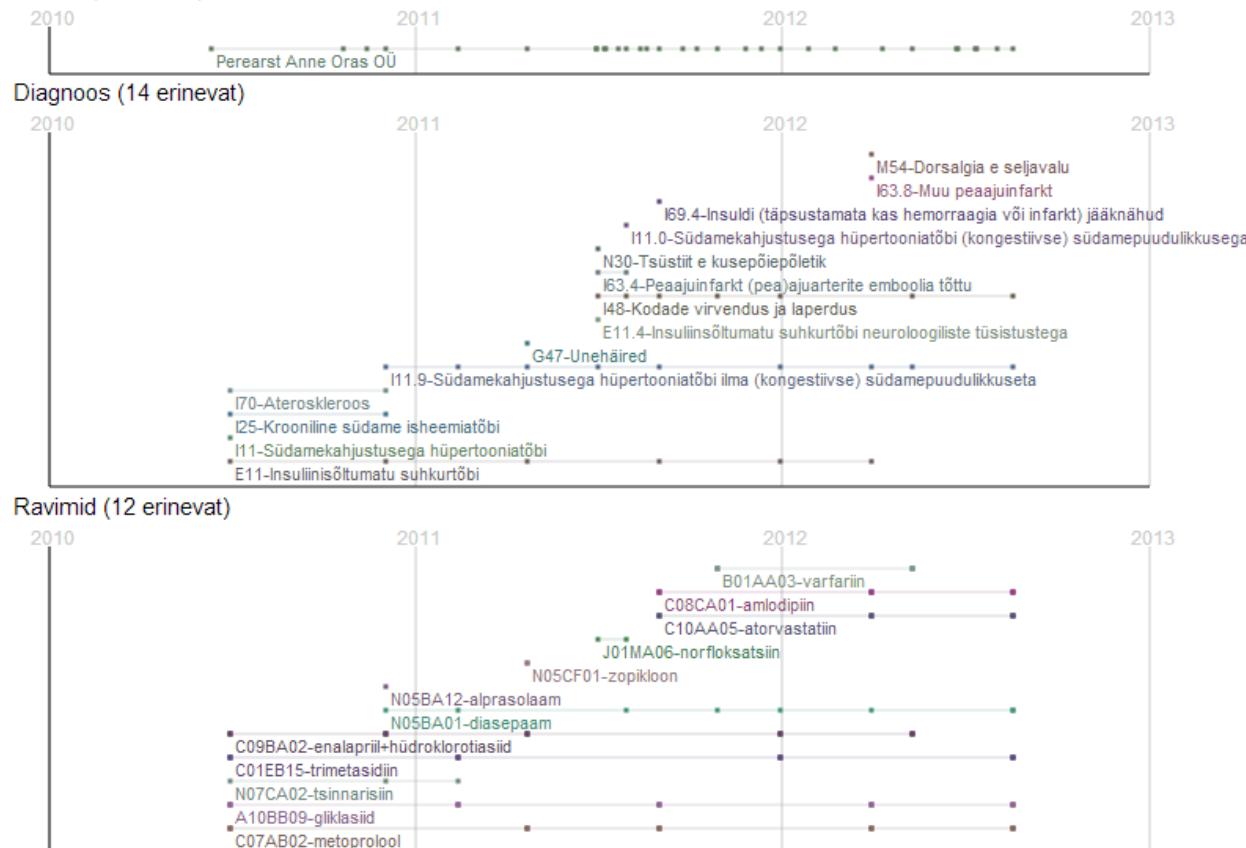
Tehnoloogia: andmete visualiseerimine

Patsient 90787461031

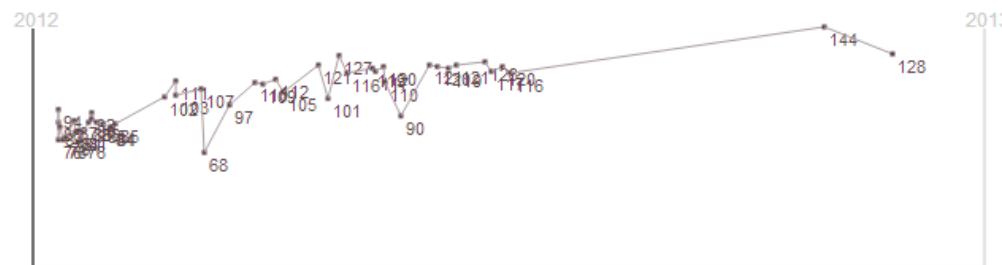
Sünniaasta: 1935

Genereritud 2014-06-26 15:13:27.

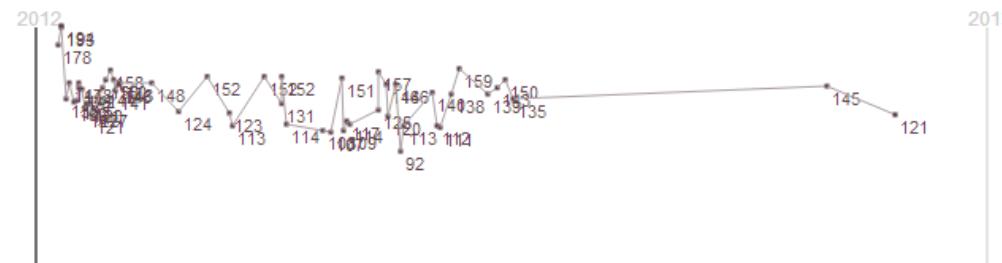
Visiidid (1 erinevat)



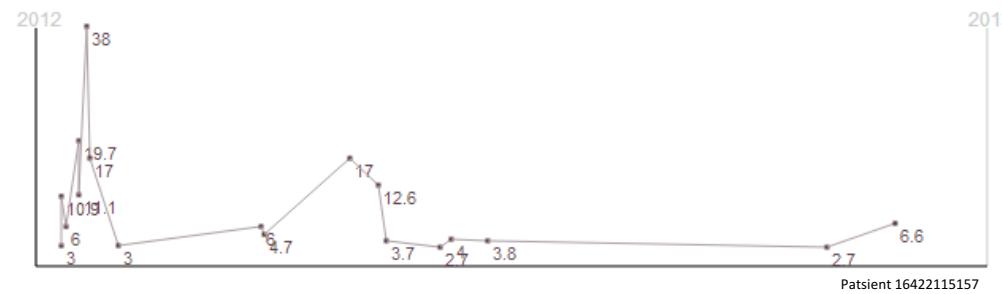
HEMOGLOBIIN



KREATINIIN



VERESUHKUR

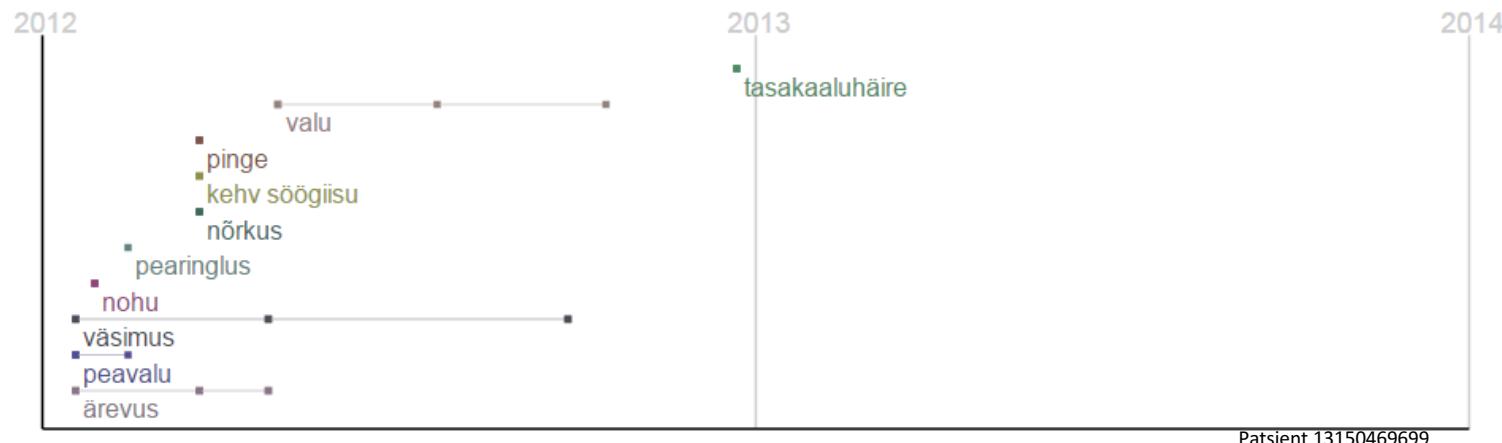


Tekstiosast
eraldatud
andmed!

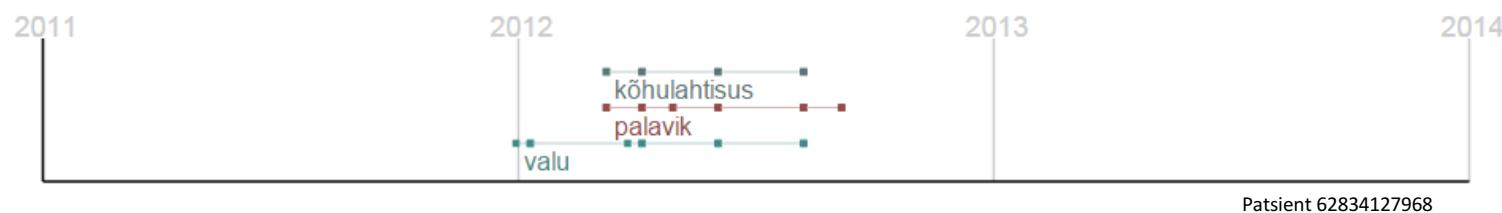
Patsient 16422115157

Näiteid kaebuste automaatsest eraldamisest ja visualiseerimisest

Kaebused (10 erinevat)



Kaebused (3 erinevat)



Vabatekstides on veel kasulikku informatsiooni

Suunatud PA-lt , probleemiks **kõhuvalu**, mis ca aasta vältel olid 2 x nädalas, aga aprilli algul äge haigus **seedehäiretega**.

Sellest ajast kaebab iga päev, rohkem hommikul ärgates või enne und. **liveldust, oksendust** sel ajal **ei ole**.

Iste tavaliselt regulaarne, eile-täna **iste vedel**.

Anamneesist ka **peavalud**.

Saadetud **gastroskoopiasse**.

Kaebused:

- Kõhuvalu
- Seedehäire
- liveldus (neg)
- Oksendamine (neg)
- Iste vedel
- Peavalu

Uuringud:

- gastroskoopia

Meditsiiniterminoloogia ühtlustamise vajadus

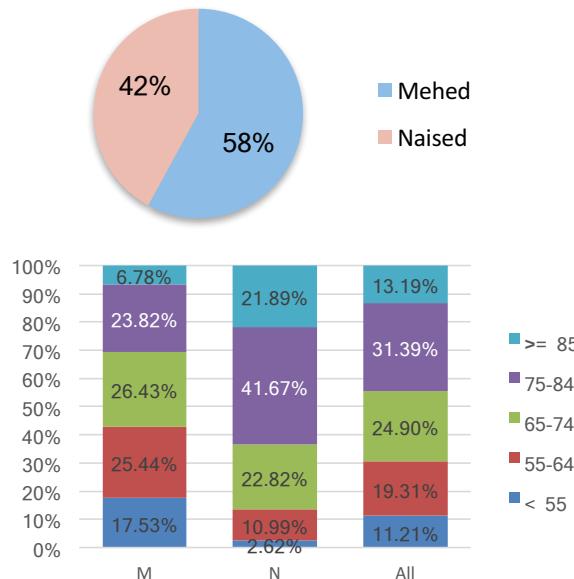
- Arstide keelekasutust iseloomistab variatiivsus
- Vabatekstiväljade kasulikkuse töstmiseks on vaja see variatiivsus kirjeldada
- Näide epikriisi allergiablokist:

Penicillini
Penicillin
Penicilini
Penicilliin
PENICILLIN?
Penicillini?
PENICILLINID
PENICLIIN
Penicllini
Penitsiliinile
Penitsilliin
...
**Penitsilliin**

Tehnoloogia ja kompetentsi võimekuse test (võrdlus müokardi-infarktiregistriga)

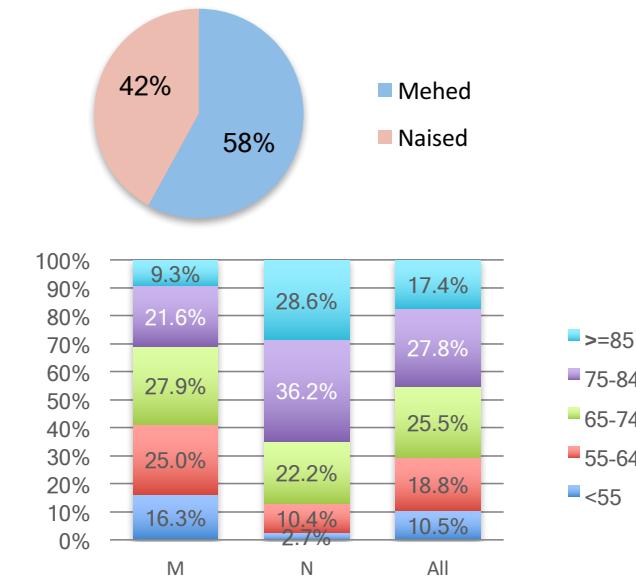
E-TERVIS

- 2847 haigusuhtu
- 2754 erinevat patsienti



Müokardi-infarktiregister

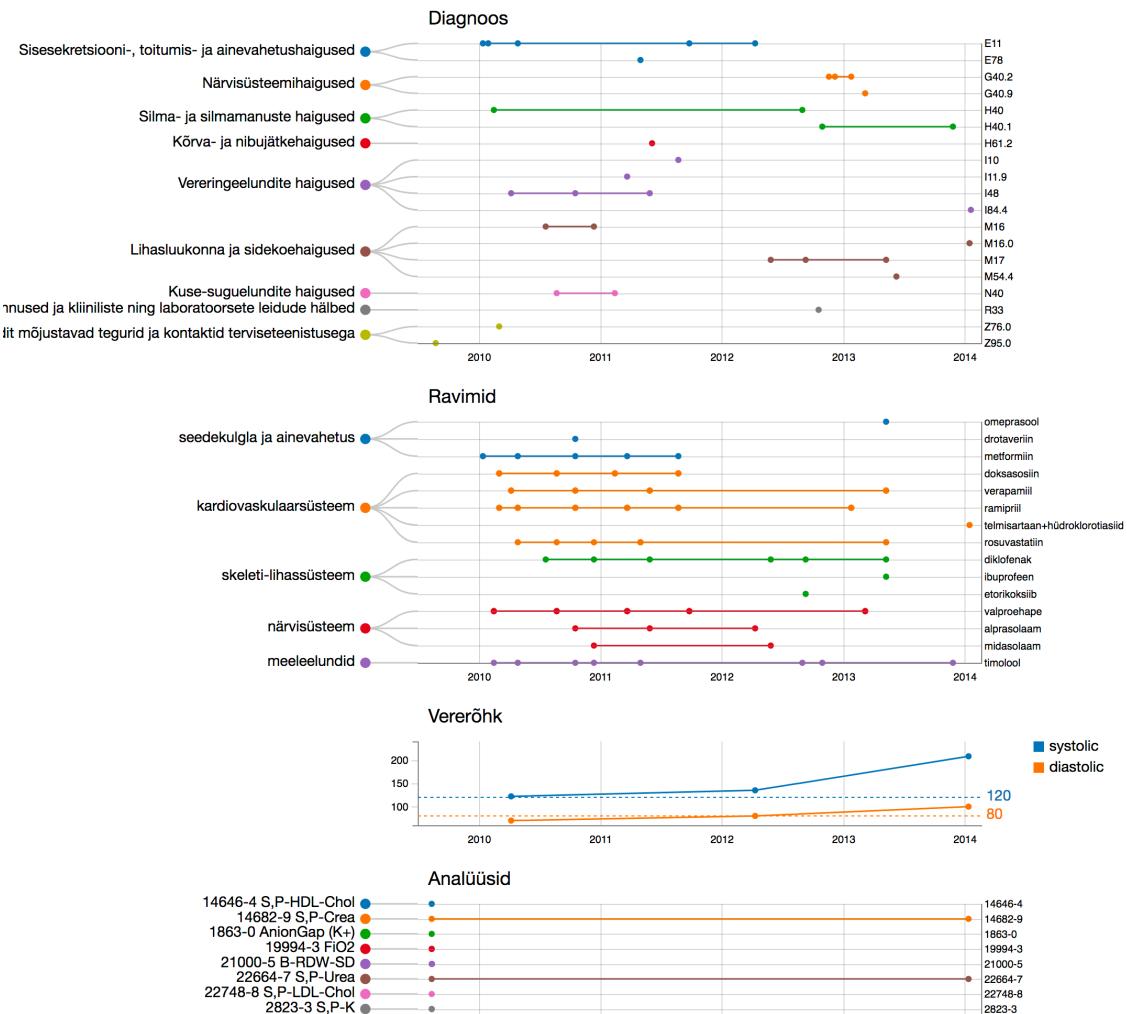
- 2879 infarktijuhtu



Tehnoloogia, mis suudab epikriisidest kätte saada
praktiliselt kõik infarktijuhtumid!

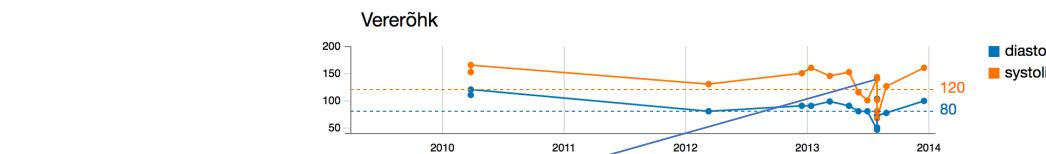
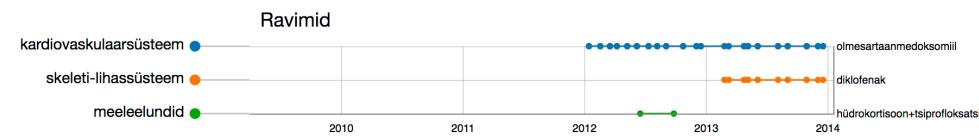
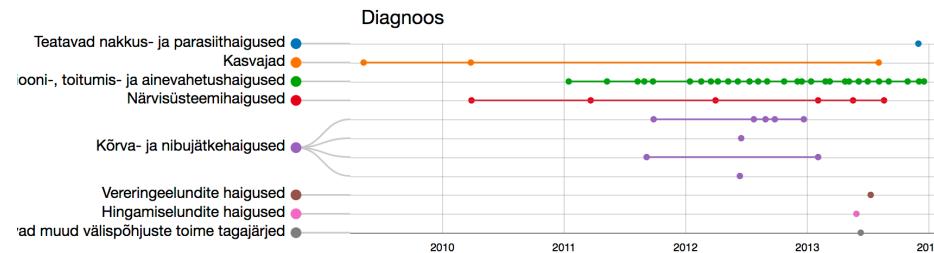
STACC: Health data analysis for >1M individuals

- **Text Mining** (developing and Estonian NLP)
- **Machine learning** – predicting context, semantic meaning, semantic similarities,
- **Information extraction** from unstructured data
- Disease **co-morbidities and trajectories**
- **Quality indicators**
- **Observational data vs registries (e.g. infarctions)**
- IMI – EMIF-Platform: EGCUT data and OMOP
- Linking Genomics data to EHR and the needed information architectures



70905119764 M92

Soovitused puuduvad



Mida saab teaduslikus mõttes tuvastada:

- Statistiline juhtumite kokku loendamine (koos **tekstikaevega**)
- Haiguste **trajektoorid** – ajalised sõltuvused; ravi trajektoorid (näide)
- Haiguste **koos-esinemine** (co-morbidity) ja välistamine (riskid)
- Kvaliteedi-indikaatorid
- Kõrvalmõjud, kaebused, tulemused ...

KOK (COPD) näitel “protsessid” (MSc töö)

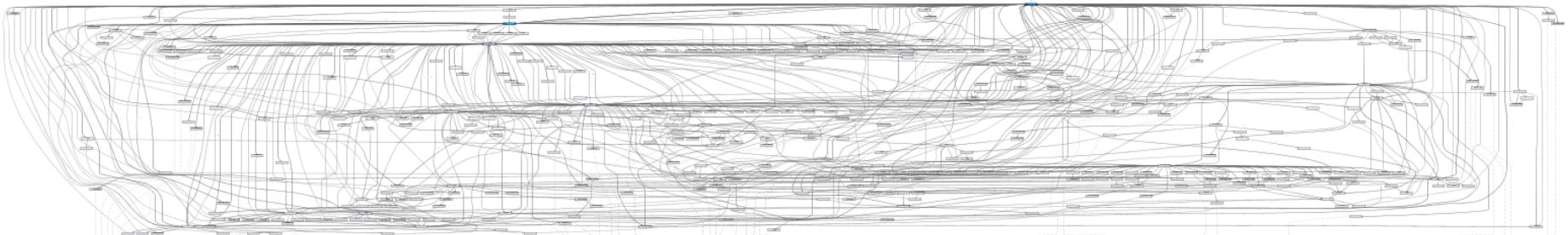


Figure 15: Figure showing the process model used in cluster 3 of diagnosis J44 with all events and edges displayed. This is what is called a “spaghetti model” in the field of process modeling.

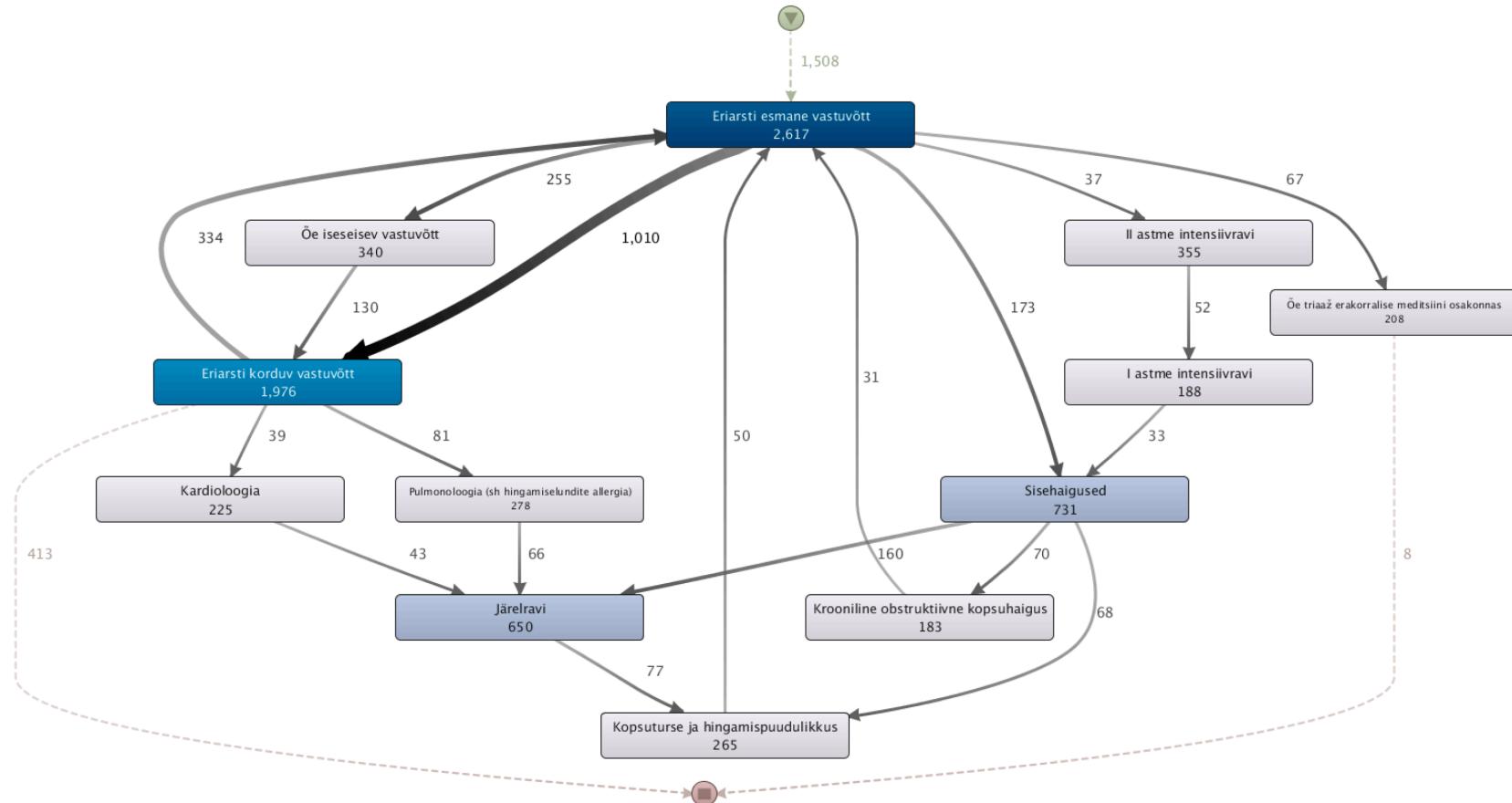


Figure 16: A process model found using Disco. Nodes limited to 2.6% edges to just the most significant ones.

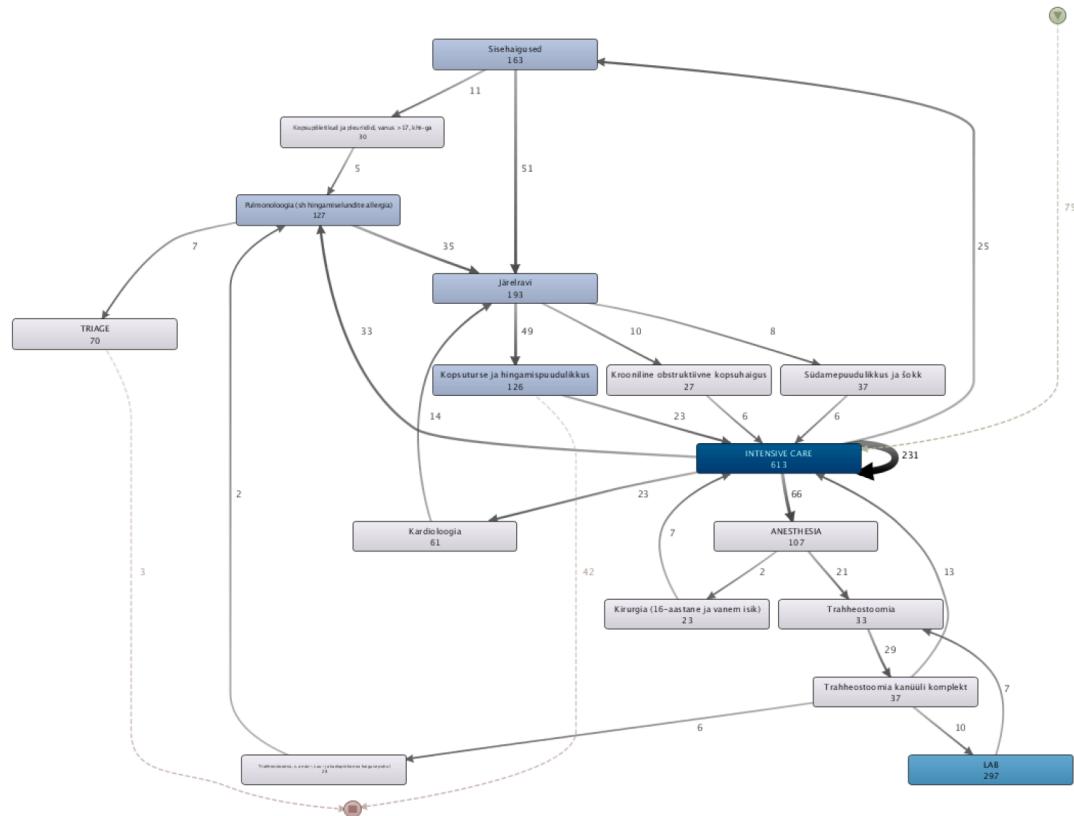
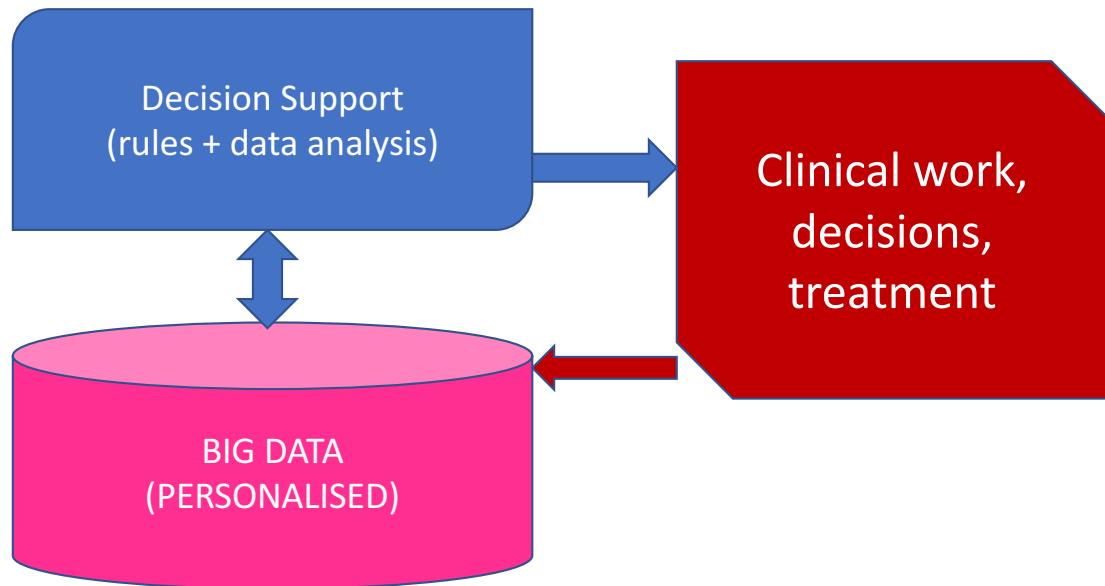
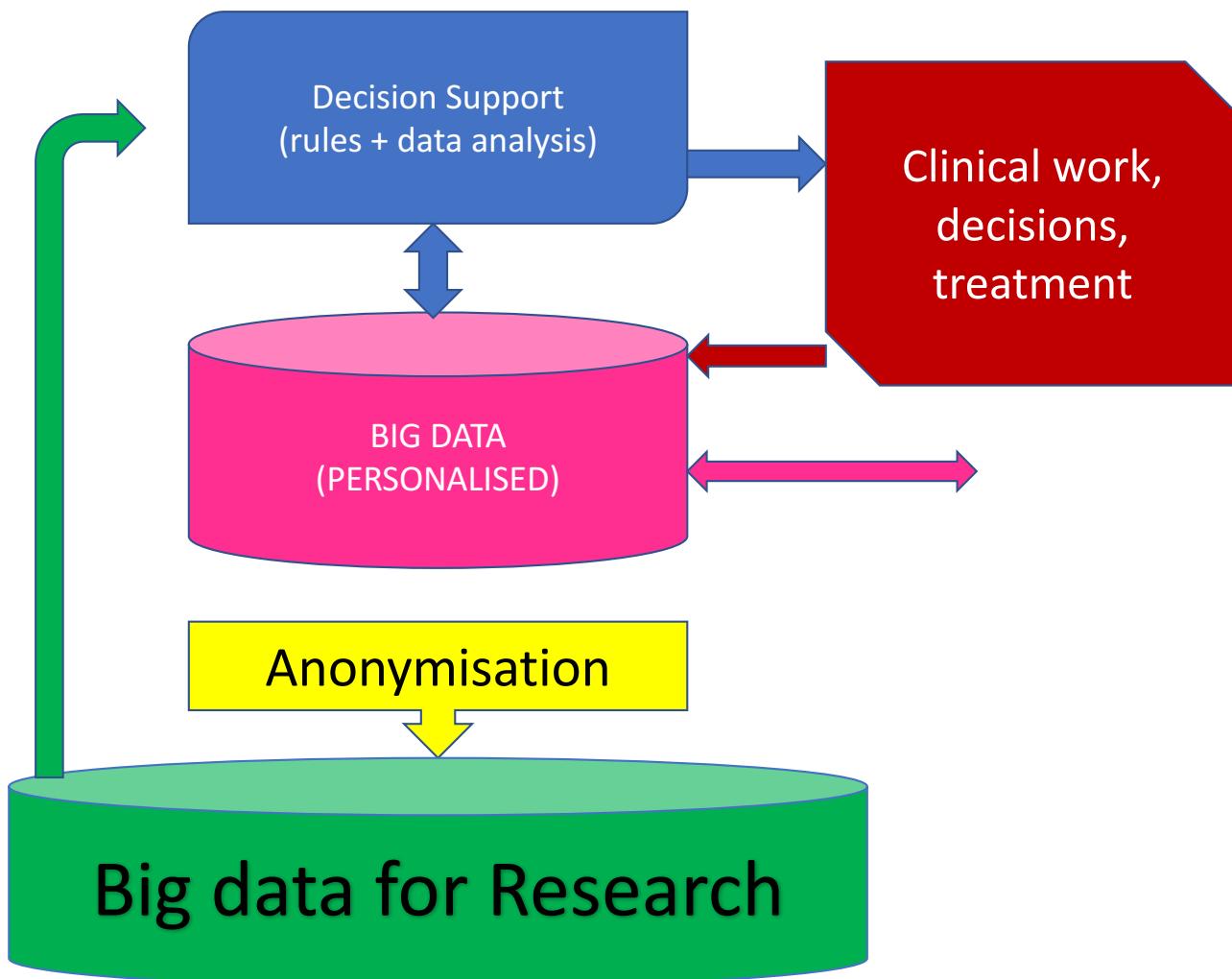


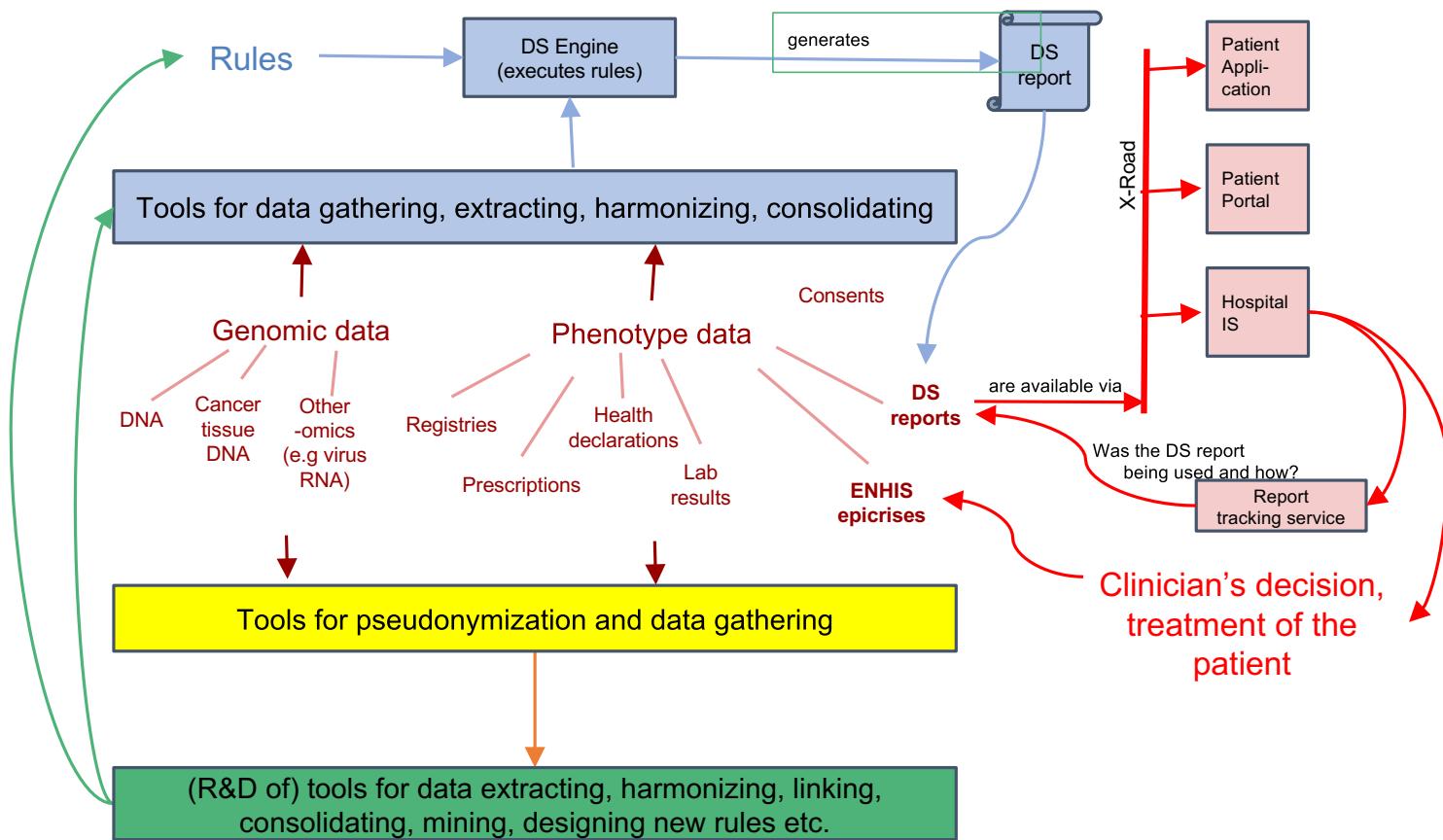
Figure 18: Clinical pathway for cluster 2 of diagnosis J44 on logs filtered with manually defined rules.

The pathways for this cluster are noticeably more complex, with more complications related to respiratory organs and heart. Interestingly, cancer seems to have much less importance in this cluster.





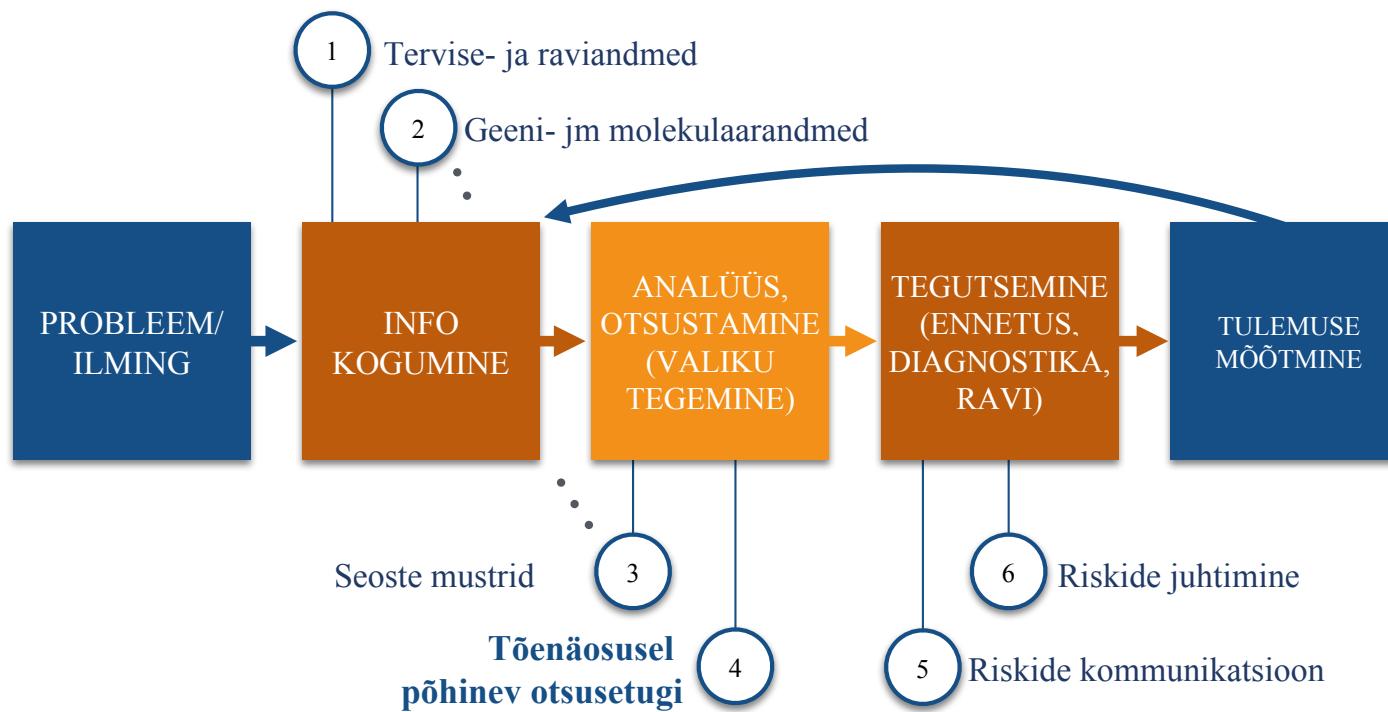
What tools & data in each process



Personaalmeditsiin =

Personalised medicine

1 + 2 + 3 + 4 + 5 + 6





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STACC

Software Technology and
Applications Competence Center



estonian genome center

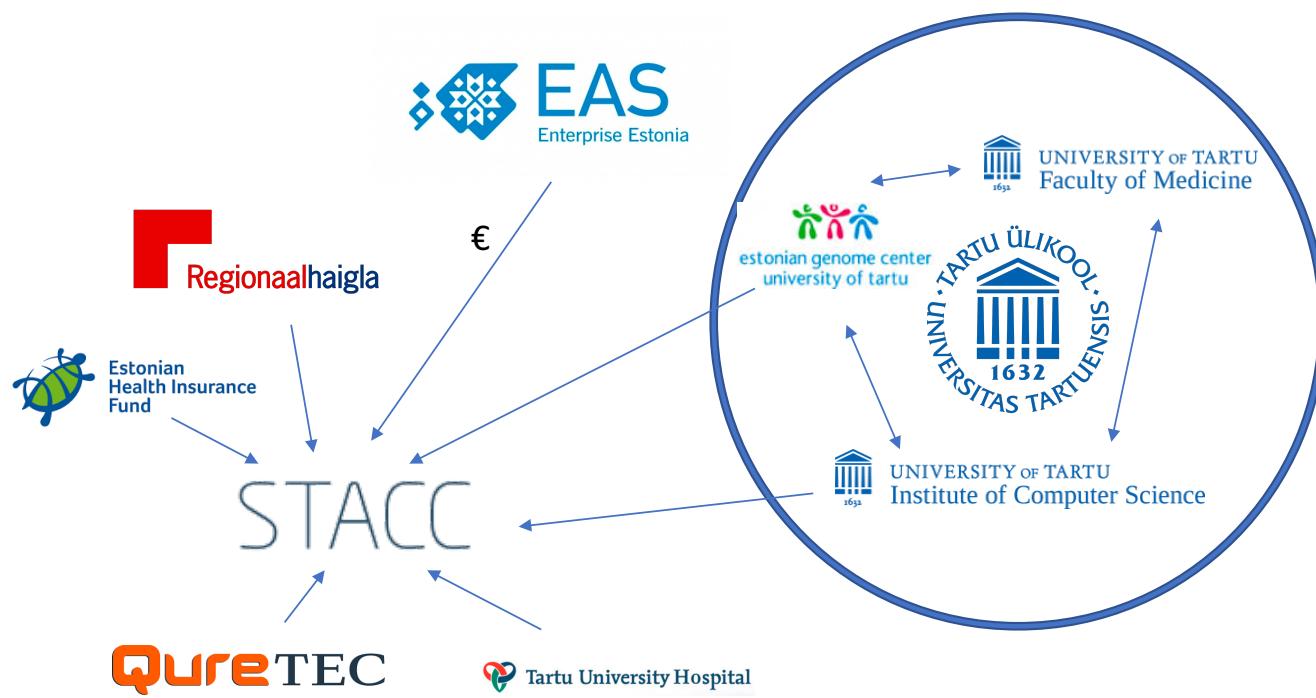


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Organisations:





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Applications Competence Center

QureTEC