

6th Barcelona TechnoWeek



Cloud use case 1: Medicine

MARIANA CANELAS PAIS

SCIENTIFIC COMPUTING IN THE CLOUD



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Image generated with AI | DALL·E - 2

Make a background image that represents the use of Data, Informatics and Technology in Medicine, make it edgy and professional-looking, trending on art station

Mariana × DALL·E 2

Human & AI



CESPU

TEACHING HEALTH SINCE 1982

CESPU

HIGHER EDUCATION UNIVERSITY



4 Degrees

Biomedical Sciences
Forensic Science
Nutrition
Psychology

3 Integrated Masters

Pharmaceutical Sciences
Odontology
Veterinary Medicine

2 Specialization Courses

Orthodontics
Oral Rehabilitation and Prosthodontics

6 Masters

Clinical Analysis
Forensic Laboratory Science and Techniques
Molecular Therapies
Orthodontics
Psychology of Health and Neuropsychology
Oral Rehabilitation

2 PhD

Biological Sciences Applied to Health
Toxicology

Total of Students – 1635

Foreign Students – 52,3 %

CESPU

HIGHER EDUCATION POLYTCHENIC



CESPU
INSTITUTO POLITÉCNICO
DE SAÚDE DO NORTE

8 CTESP

Support to Dental and General Doctor
Bioanalysis and Control
Esthetic Cosmetic and Wellness
Gerontology
Thermal and Wellness
Clinical Secretary
Health and Exercise
Family and Community Service

10 Degrees

Nursing (ESSVA and ESEnfTS)
Pharmacy
Clinical Physiology
Physiotherapy (ESSVA and ESTeSTS)
Osteopathy
Podiatry
Dental Prosthesis
Medical Image and Radiotherapy

2 Specialization Courses

Nursing Rehabilitation (ESSVA and ESEnfTS)

4 Master

Physiotherapy
Sports Podiatry
Children's Podiatry
Mental Health and Psychiatry Nursing

Total of Students - 1713

Foreign Students – 27,5 %

CESPU



Predictive Algorithms for Detection of Intimate Partner Violence in the Healthcare System

Mariana Canelas Pais
Teresa Magalhães (Principal Investigator)
Ricardo Dinis-Oliveira
Tiago Taveira-Gomes

An abstract representation of a research study on domestic violence as digital art.

Mariana × Midjourney
Human & AI



DOMESTIC VIOLENCE

World Health Organization

- Recognized by the World Health Organization (WHO) as a significant public health issue
- High Prevalence Worldwide
- Severe Consequences

International Statistical Classification of Diseases and Related Health Problems

ICD 10 > T74, Y07, Z61

INTERVENTION



Legal and Social Intervention

Health Intervention

TREAT	REABILITATE
PROTECT	PREVENT

DOMESTIC VIOLENCE

Prevalence (Western Europe)

Children Maltreatment ~19%

Intimate Partner Violence ~20%

Older Adults Maltreatment ~19%

~64% in institutional context

Others



*An abstract representation of a
research study on domestic violence as
digital art.*

Mariana × Midjourney
Human & AI

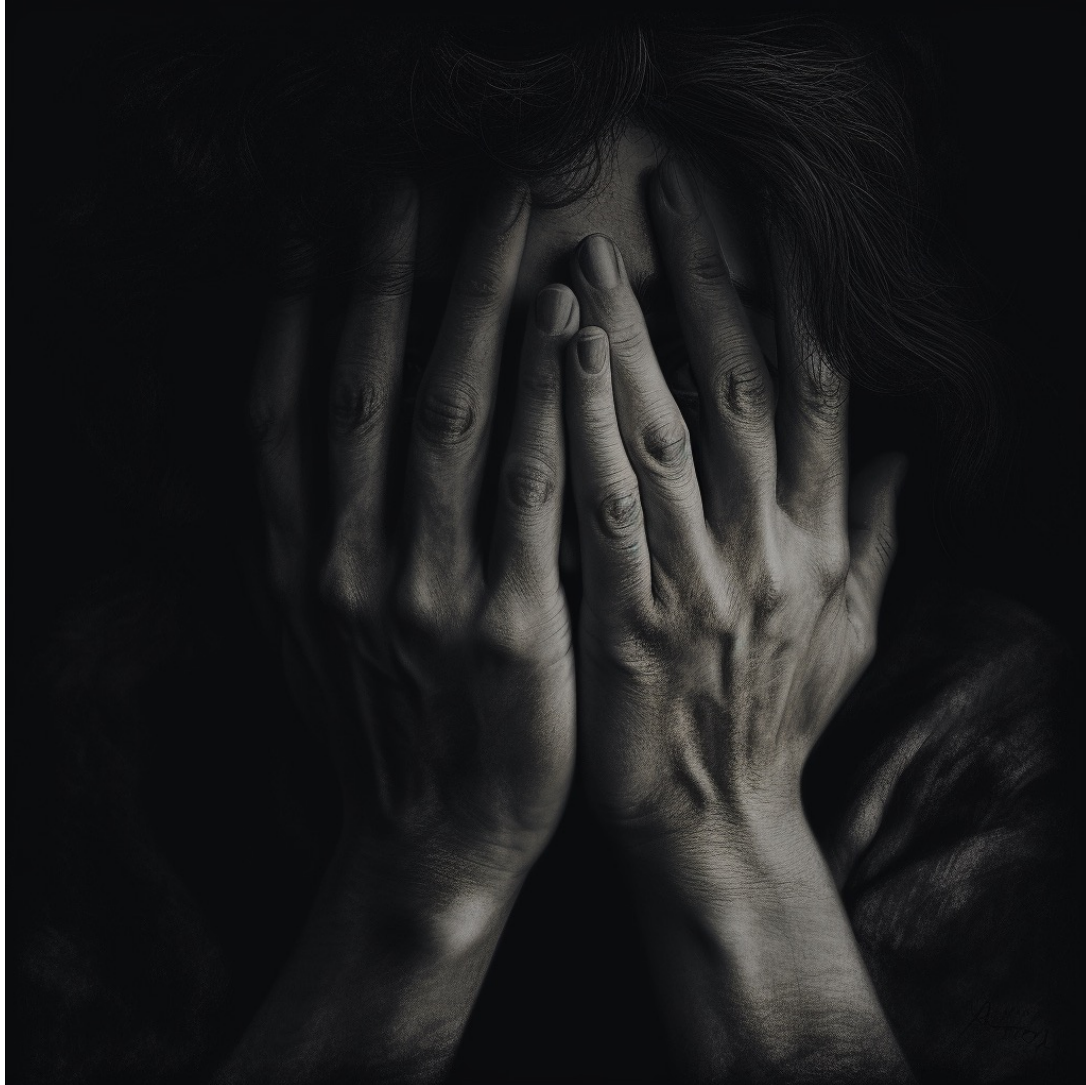
DOMESTIC VIOLENCE

Hidden Phenomenon

Someone hiding in a dark room because of fear and shame. Face not visible, hands hiding the face. Emotional. Digital art.

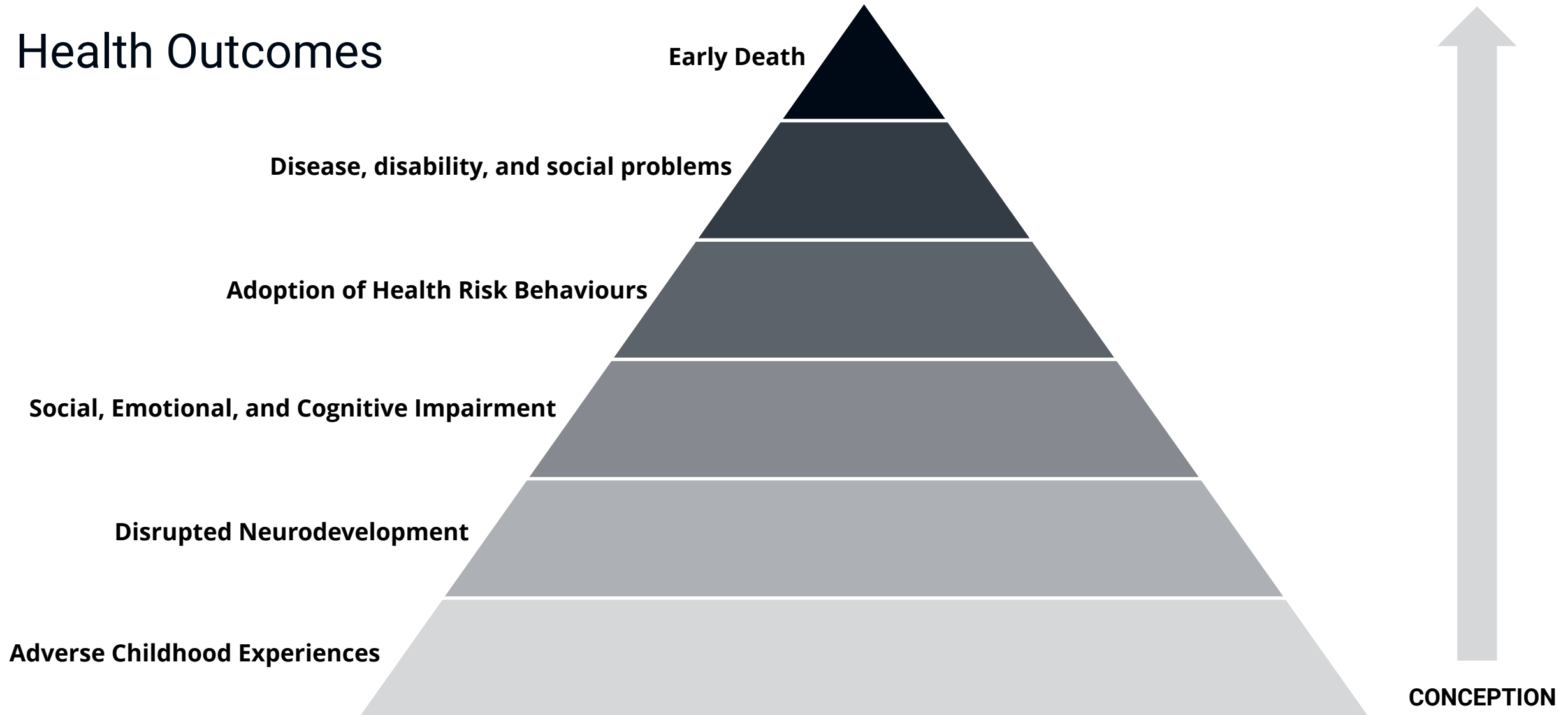
Mariana × Midjourney

Human & AI



DOMESTIC VIOLENCE

Health Outcomes



Adapted from Felitti, Vincent J., et al. "Relationship of childhood abuse and household dysfunction to many of the leading causes of death in adults: The Adverse Childhood Experiences (ACE) Study." *American journal of preventive medicine* 14.4 (1998): 245-258.

Article
Health Outcomes in Women Victims of Intimate Partner
Violence: A 20-Year Real-World Study



Maria Clemente-Teixeira ¹, Teresa Magalhães ^{1,2,3,4}, Joana Barrocas ^{5,6}, Ricardo Jorge Dinis-Oliveira ^{1,3,4,7} 
and Tiago Taveira-Gomes ^{2,3,8,9,*} 

Table 1. Female population observed at LHUM, 2001–2021.

General Female Population of LHUM (n)	Suspected Female Victims of IPV—n (%)		
	G1 (Codes and Clinical Notes)	G2 (Codes)	G3 (Clinical Notes)
72,376	1676 (2.3)	766 (1.1)	931 (1.3)

Table 2. Victims’ history of substance consumption (health risk behaviours).

Substance Consumption	General Female Population		Suspected Female Victims of IPV					
			G1		G2		G3	
	n	%	n	%	n	%	n	%
Tobacco	12,356	17.1	395	23.6	200	26.1	199	21.4
Alcohol	274	0.4	22	1.3	19	2.5	4	0.4
Drugs	54	0.1	8	0.5	7	0.9	1	0.1



Article

Health Outcomes in Women Victims of Intimate Partner Violence: A 20-Year Real-World Study



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Table 3. Victims’ history of traumatic injuries and intoxications (medicolegal aetiology unknown).

Traumatic Injuries and Intoxications	General Female Population		Suspected Female Victims of IPV					
			G1		G2		G3	
	n	%	n	%	n	%	n	%
Bone fracture	23,998	33.2	796	47.5	409	53.4	394	42.3
Bone dislocation	1828	2.5	64	3.8	31	4.1	35	3.8
Open wound	17,835	24.6	621	37.1	307	40.1	322	34.6
Superficial injury	1850	2.6	76	4.5	43	5.6	35	3.8
Crushing injury	401	0.6	17	1	6	0.8	11	1.2
Burns	2161	3	76	4.5	40	5.2	35	3.8
Intoxications	9737	13.5	408	24.3	206	26.9	200	21.5

DOMESTIC VIOLENCE

Health Intervention

Article

Health Outcomes in Women Victims of Intimate Partner Violence: A 20-Year Real-World Study



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and Tiago Taveira-Gomes ^{2,3,8,9,*} 

Table 4. Victims’ mental health conditions.

Mental Health Conditions	General Female Population		Suspected Female Victims of IPV					
			G1		G2		G3	
	n	%	n	%	n	%	n	%
Headaches	1793	2.5	79	4.7	52	6.8	28	3.0
Sleep disorders	5016	6.9	285	17.0	191	24.9	98	10.5
Eating disorders	133	0.2	9	0.5	6	0.8	4	0.4
Poor health perception	1348	1.9	58	3.5	36	4.7	24	2.6
Unspecified chronic pain	6947	9.6	286	17.1	179	23.4	114	12.2
Memory disorders	252	0.4	18	1.1	12	1.6	6	0.6
Anxiety disorders	15,552	21.5	699	41.7	440	57.4	271	29.1
Major psychiatric disorder	25,352	35.0	1091	65.1	579	75.6	527	56.6
Posttraumatic stress disorder	74	0.1	13	0.8	10	1.3	3	0.3
Suicidal ideation	212	0.3	36	2.2	19	2.5	19	2.0
Social deprivation	957	1.3	109	6.5	80	10.4	29	3.1
Anxiolytics consumption	37,263	51.5	1276	76.1	670	87.5	627	67.4
Sedatives consumption	18,583	25.7	727	43.4	392	51.2	341	36.6
Antidepressants consumption	28,080	38.8	1156	69.0	624	81.5	551	59.2
Antipsychotics consumption	6209	8.6	418	24.9	208	27.2	217	23.3

Article
Health Outcomes in Women Victims of Intimate Partner
Violence: A 20-Year Real-World Study



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and Tiago Taveira-Gomes ^{2,3,8,9,*} 

Table 5. Victims’ somatic conditions.

Somatic Conditions	General Female Population		Suspected Female Victims of IPV					
			G1		G2		G3	
	n	%	n	%	n	%	n	%
Obesity	12,570	17.3	389	23.2	234	30.5	162	17.4
Hypercholesterolemia	27,750	38.3	772	46.0	382	49.8	398	42.7
Metabolic syndrome	44,298	61.2	1 232	73.5	623	81.3	619	66.4
Type 2 diabetes	3354	4.6	157	9.3	92	12.0	69	7.4
Non-alcoholic fatty liver disease	436	0.6	35	2.0	17	2.2	19	2.0
Chronic obstructive pulmonary disease	416	0.6	17	1.0	8	1.0	9	1.0
Hypertension	13,262	18.3	421	25.1	267	34.9	163	17.5
Early heart disease	254	0.4	12	0.7	5	0.7	7	0.8
Myocardial infarction	212	0.3	11	0.7	5	0.7	6	0.6
Ischaemic stroke	893	1.2	55	3.3	30	3.9	26	2.8
Haemorrhagic stroke	63	0.1	4	0.2	3	0.4	1	0.1
Chronic kidney disease	544	0.8	24	1.4	10	1.3	15	1.6
Inflammatory pelvic disease	210	0.3	10	0.6	4	0.5	6	0.6
Urinary tract infection	3709	5.1	122	7.3	64	8.4	60	6.4
Sexually transmitted infections	1106	1.5	57	3.4	37	4.8	20	2.2
Preeclampsia	592	0.8	20	1.2	15	2.0	5	0.5
Desired pregnancy	1688	2.3	31	1.9	15	2.0	16	1.7
Undesired pregnancy	190	0.3	8	0.5	7	0.9	1	0.1
Spontaneous abortion	1767	2.4	82	4.9	45	5.9	38	4.1
Voluntary abortion	609	0.8	25	1.5	16	2.1	9	1.0
Chronic immune infective disorder	1085	1.5	32	1.9	15	2.0	17	1.8
Asthma	4583	6.3	141	8.4	72	9.4	70	7.5
Cancer	7550	10.4	253	15.1	124	16.2	131	14.1
Cervical cancer	248	0.3	10	0.6	6	0.8	4	0.4

DOMESTIC VIOLENCE

Predictive Algorithm



*A predictive algorithm at the service
of the security authorities to predict
violence; use references from the
minority report film; sci fi ambience;
digital art*

Mariana × Midjourney
Human & AI

PREDICTIVE ALGORITHM

- 1 Detection
- 2 Report
- 3 Diagnosis
- 4 Forensic Evaluation

GENERAL OBJECTIVE



*A predictive algorithm at the service
of the security authorities to predict
violence; use references from the
minority report film; sci fi ambience;
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OBJECTIVE

To develop of a **predictive model for suspected intimate partner violence (IPV)** based on latent risk factors that can be identified in the electronic health records regularly produced by healthcare professionals in the context of clinical practice.

SPECIFIC OBJECTIVES

- Estimate the **prevalence and incidence of IPV** in Portugal
- Compare the **risks of short and long-term unfavorable health outcomes** in the IPV population versus the general population
- **Identify people at increased risk of IPV** at a given point of contact with the health system
- Identify people at increased risk of **recurrent IPV** at a given point of contact with the health system
- **Empower health institutions** with actionable data to predict and identify IPV at every contact with patients

STUDY DESIGN

Health Intervention

TARGET POPULATION

- Individuals aged 16 or older served by the institution.

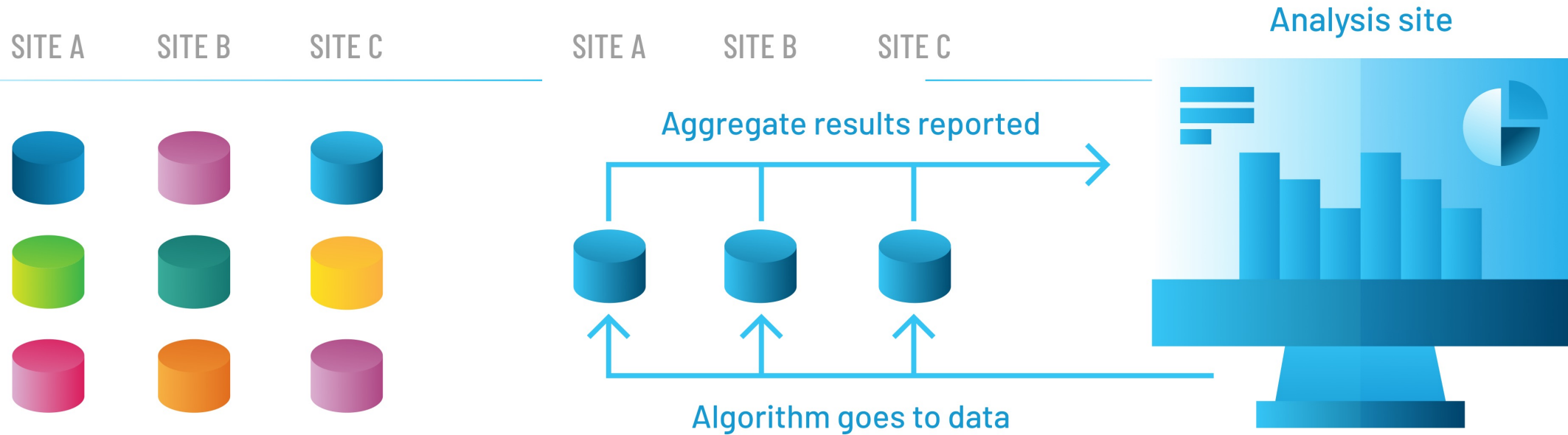
INCLUSION CRITERIA

- Patients aged 16 or older with at least one electronic clinical record in the last 365 days of observation and at least one medical consultation with the family doctor in the last 3 years prior to the index date.

EXCLUSION CRITERIA

- Inability to determine the patient's gender.
- Inability to determine the patient's age.

IMPLEMENTATION PROCESS

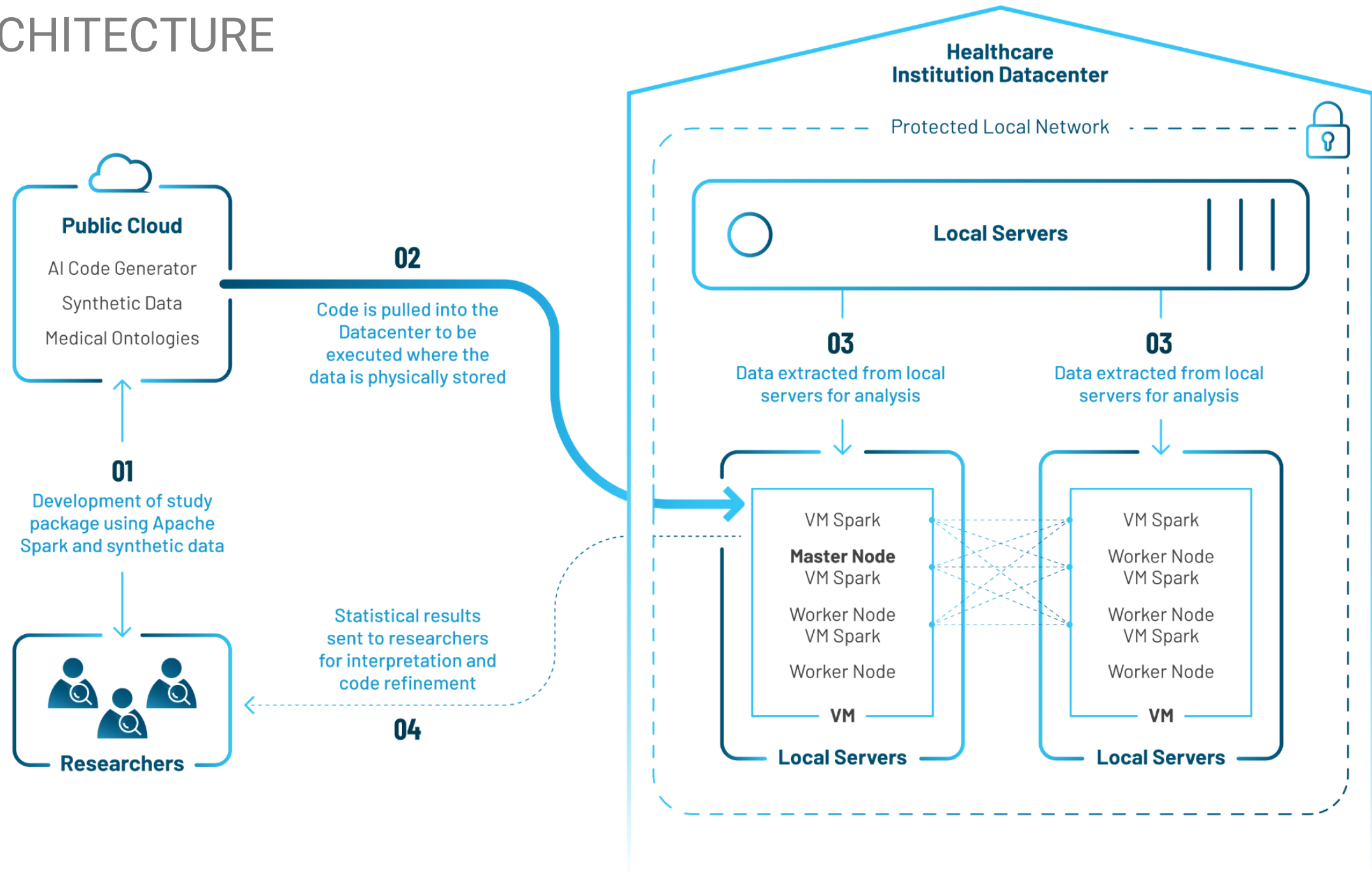


**EHRs
REGISTRIES**

**REAL-WORLD
DATA**

**REAL-WORLD
EVIDENCE**

ARCHITECTURE



LIMITATIONS



*A very large futuristic datacenter, sci fi
ambience, digital art.*

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LIMITATIONS

***An abstract representation of data
privacy leaks in the context of health
data, as digital art.***

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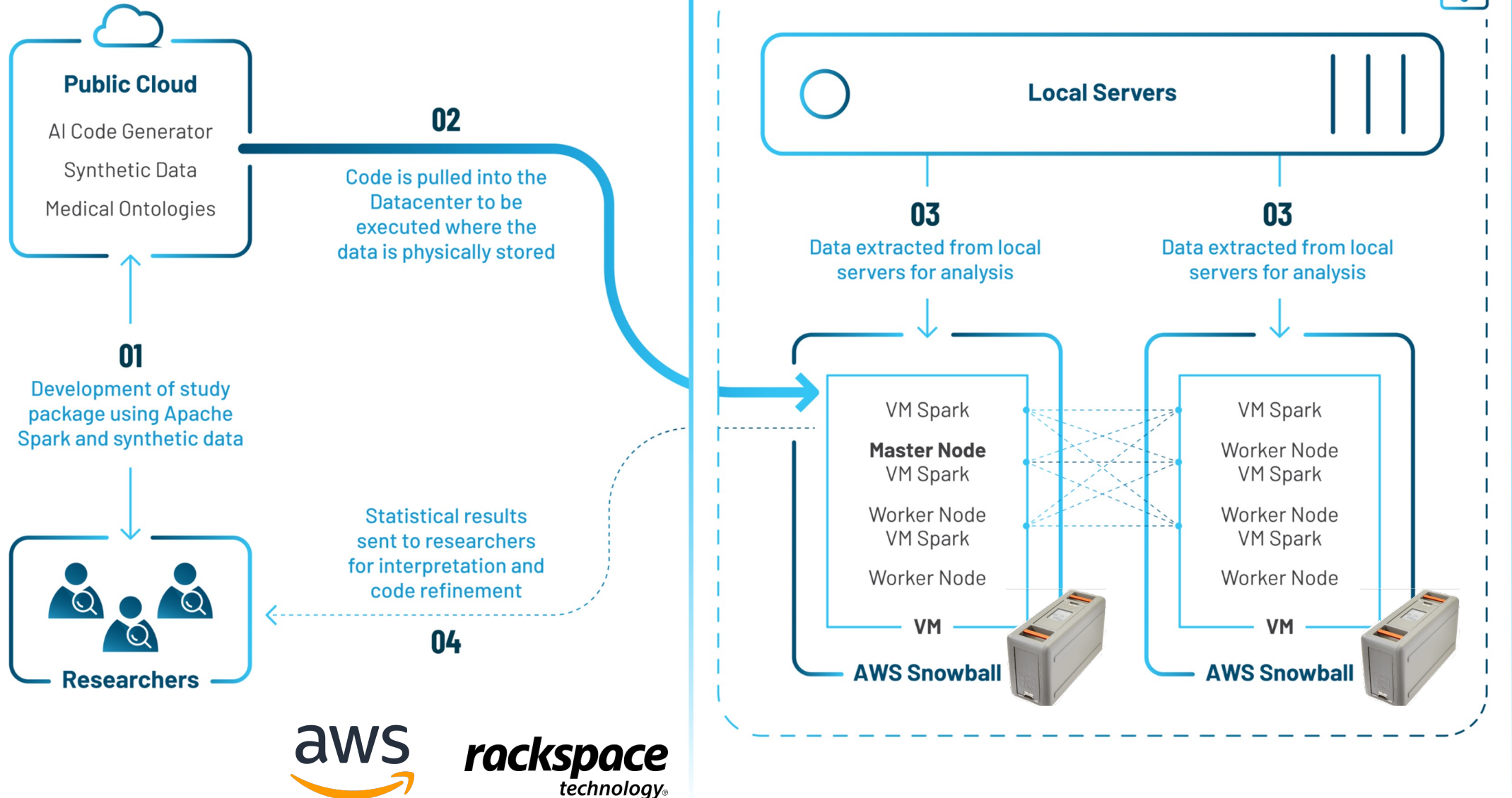


AWS SNOWBALL DEVICES



rackspace
technology®

ARCHITECTURE



ARCHITECTURE

- Enables evidence generation using **in-house data**
- **No need to share data** with third parties
- Facilitates **unrestricted EHR data research**



high solution acceptance by healthcare professionals, administrations, ethical committees, data protection officers, and IT departments



Lock symbolizing data security, line chart symbolizing evidence generation.
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Human & AI

ARCHITECTURE

Cloud Scalability and Elasticity



- Enables horizontal **scalability of hardware** resources
- Elasticity using SBE devices only when needed with **minimal configuration**
- **More cost-effective** than traditional server solutions for processing Apache Spark clusters

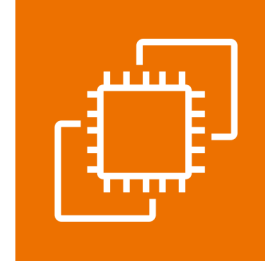
A network of computers or servers (symbolizing hardware resources) in the cloud.

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ARCHITECTURE

Use of Cloud APIs

- **Adoption of standard technologies** (S3, EC2, etc.) with a strong technical community
- Likely increase in adoption due to controlled **exposure to cloud technologies**
- **Builds technical expertise** and trust in the cloud provider



Amazon Elastic
Compute Cloud
(Amazon EC2)



AWS Lambda

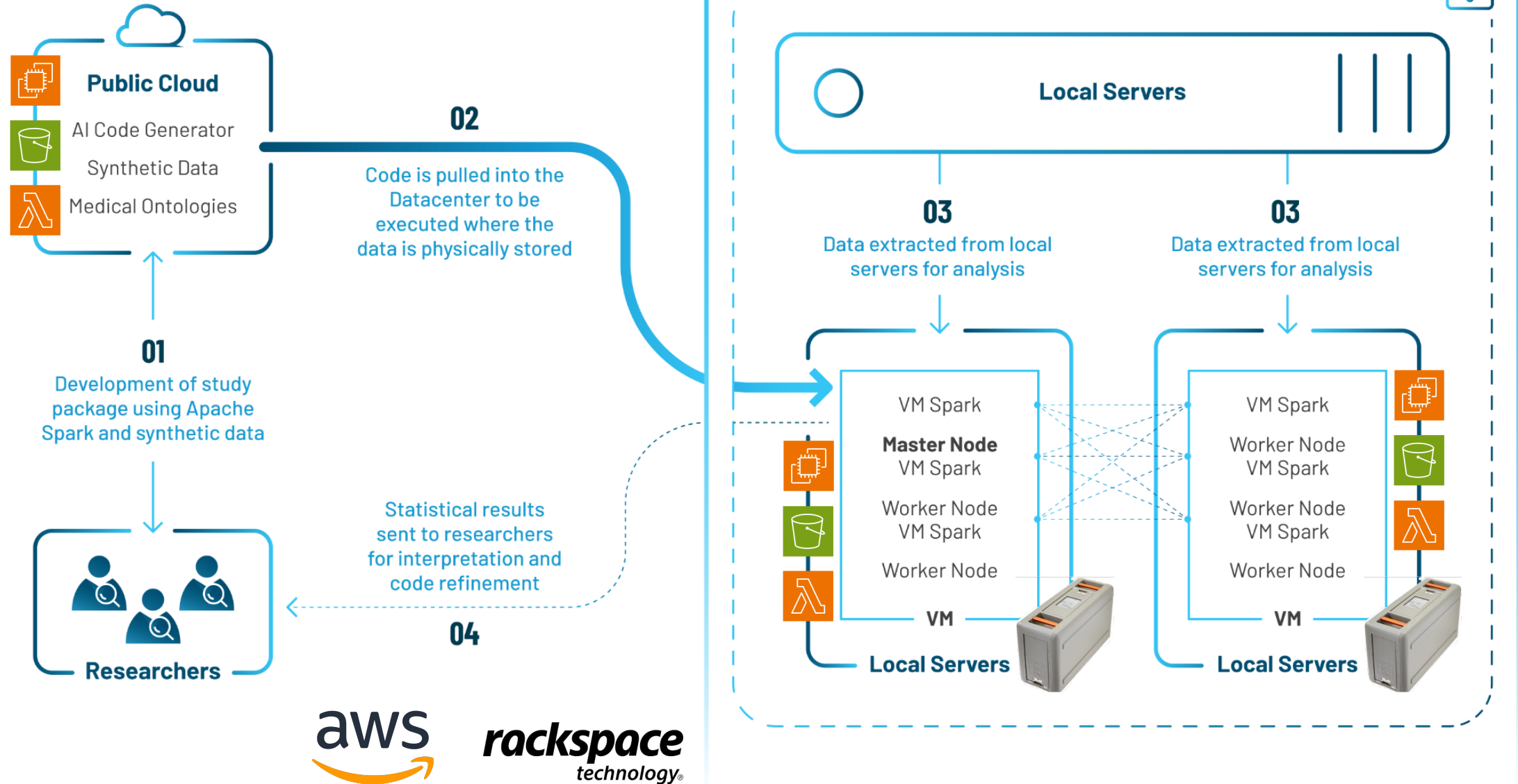


Amazon Simple Storage
Service (Amazon S3)

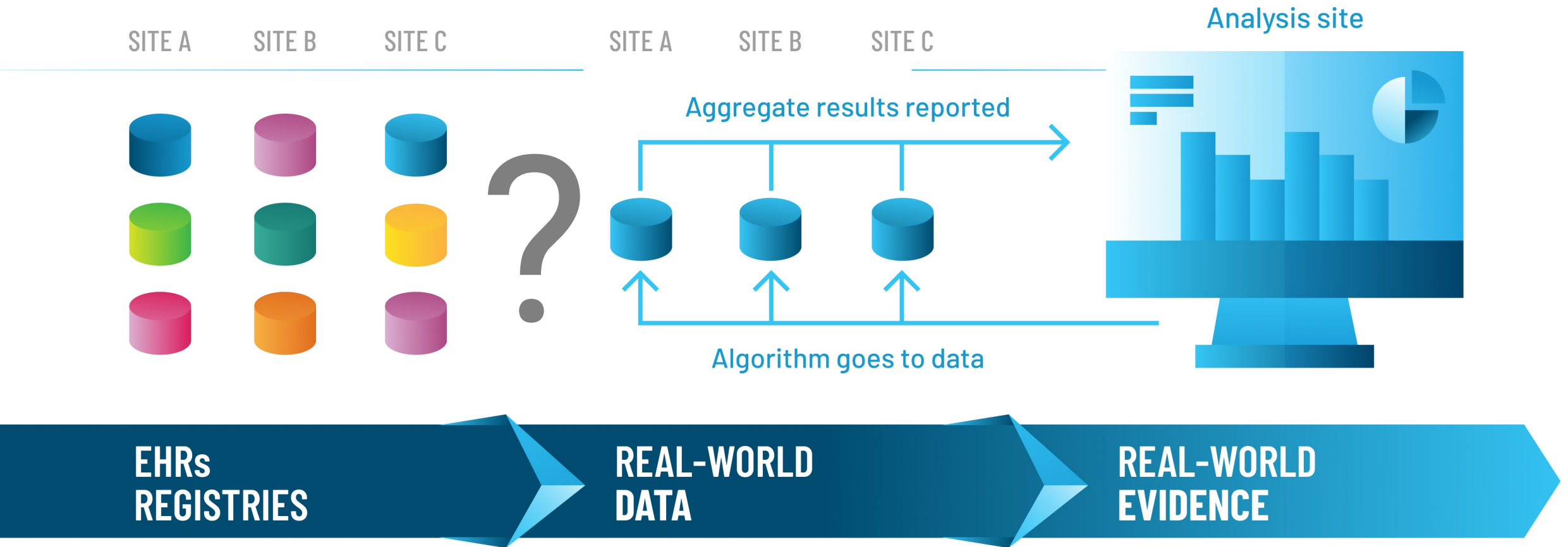


AWS Snowball

ARCHITECTURE



IMPLEMENTATION PROCESS



DATA HARMONIZATION

DATA STANDARDS

DATA STANDARDS

OMOP Common Data Model

The Observational Medical Outcomes Partnership (OMOP) Common Data Model (CDM) is an open community data standard, designed to standardize the structure and content of observational data and to enable efficient analyses that can produce reliable evidence.

OMOP CDM By The Numbers

37 tables

- 17 to standardize clinical data
- 10 to standardize vocabularies

394 fields

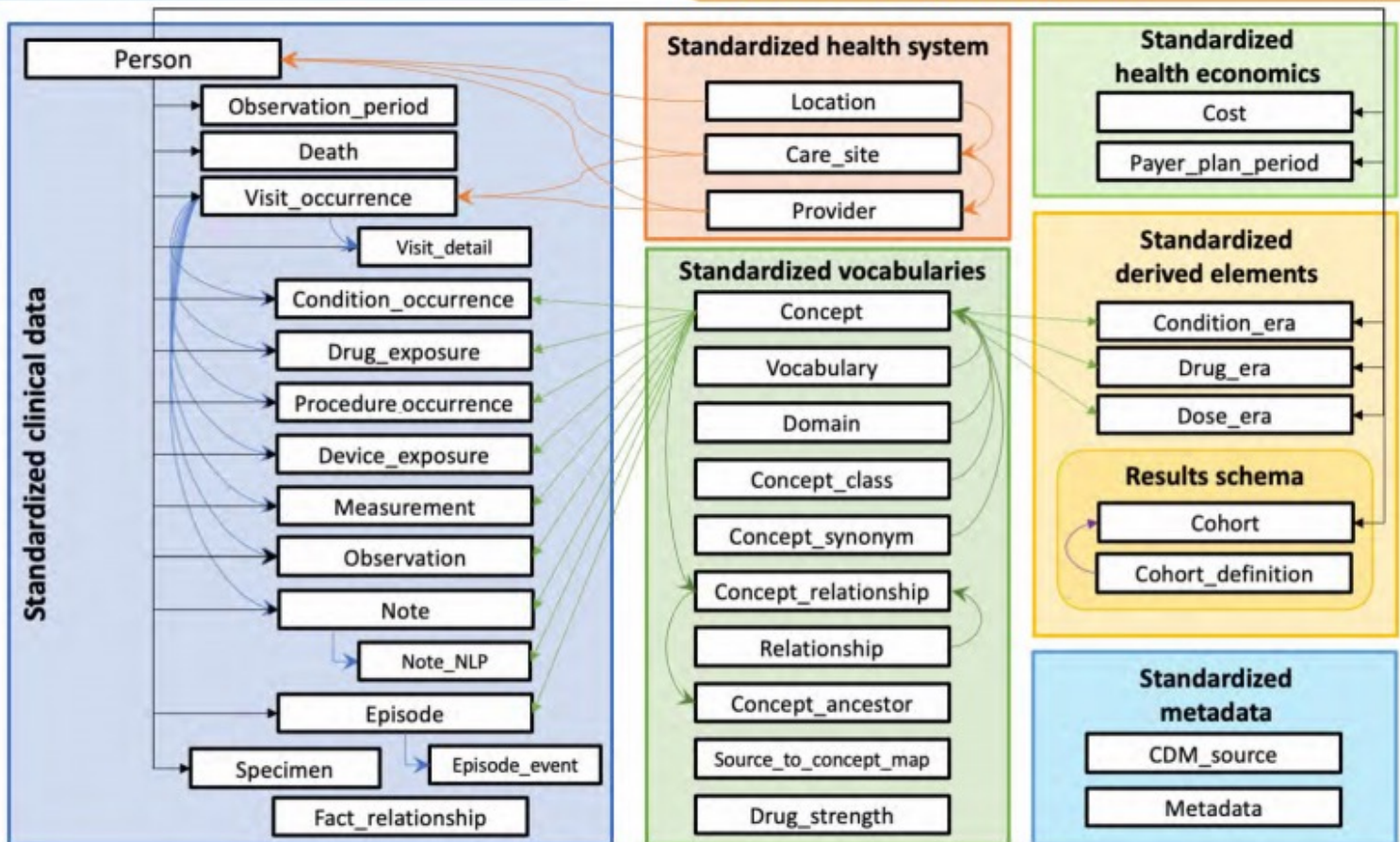
- 193 with `_id` to standardize identification
- 101 with `_concept_id` to standardize content
- 43 with `_source_value` to preserve original data

1 Open Community Data Standard



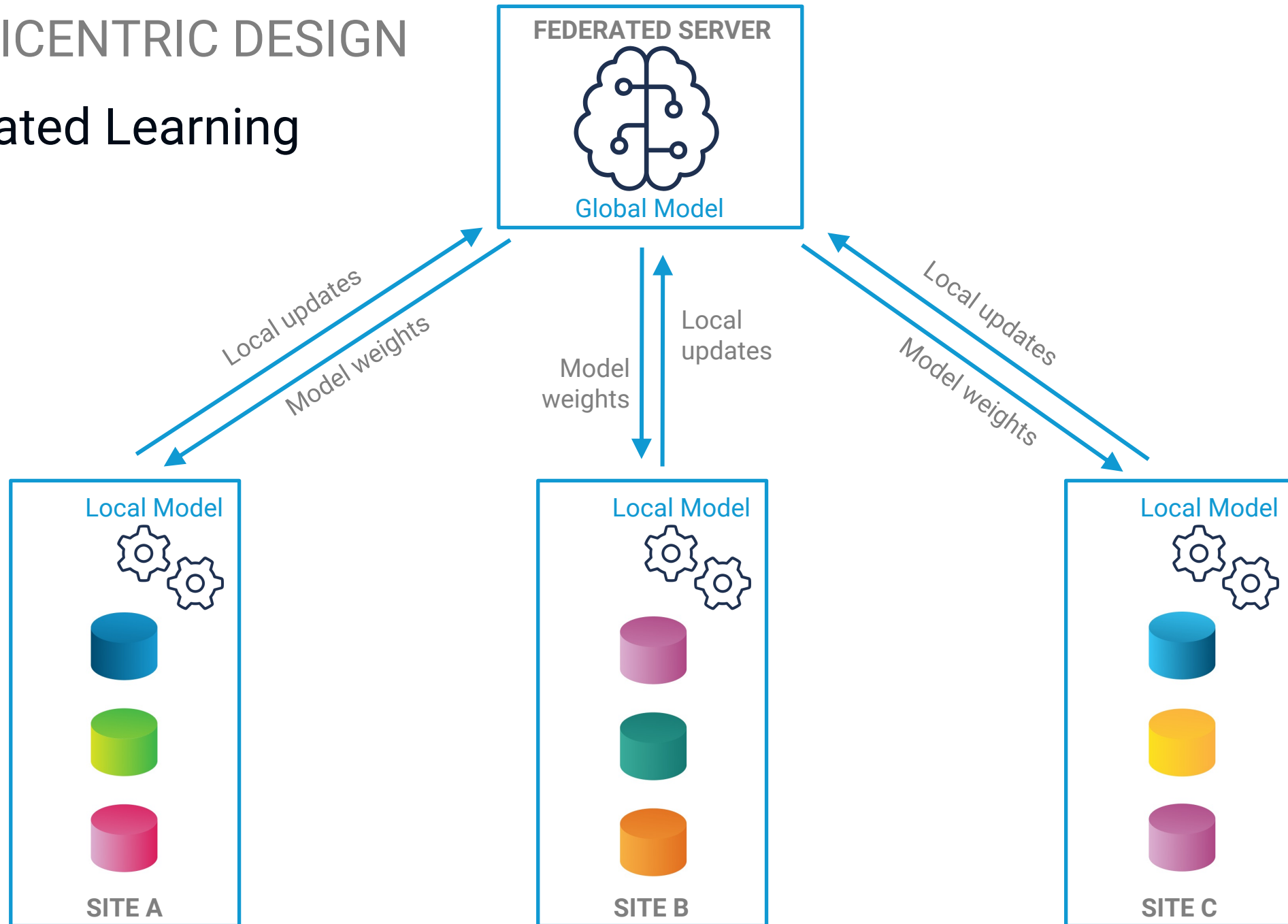
"The OMOP Common Data Model serves as the foundation of all our work in the OHDSI community, and I'm proud that our open community data standard has been so widely adopted and so extensively used to generate reliable evidence."

- Clair Blacketer
2020 Titan Award for Data Standards recipient



MULTICENTRIC DESIGN

Federated Learning

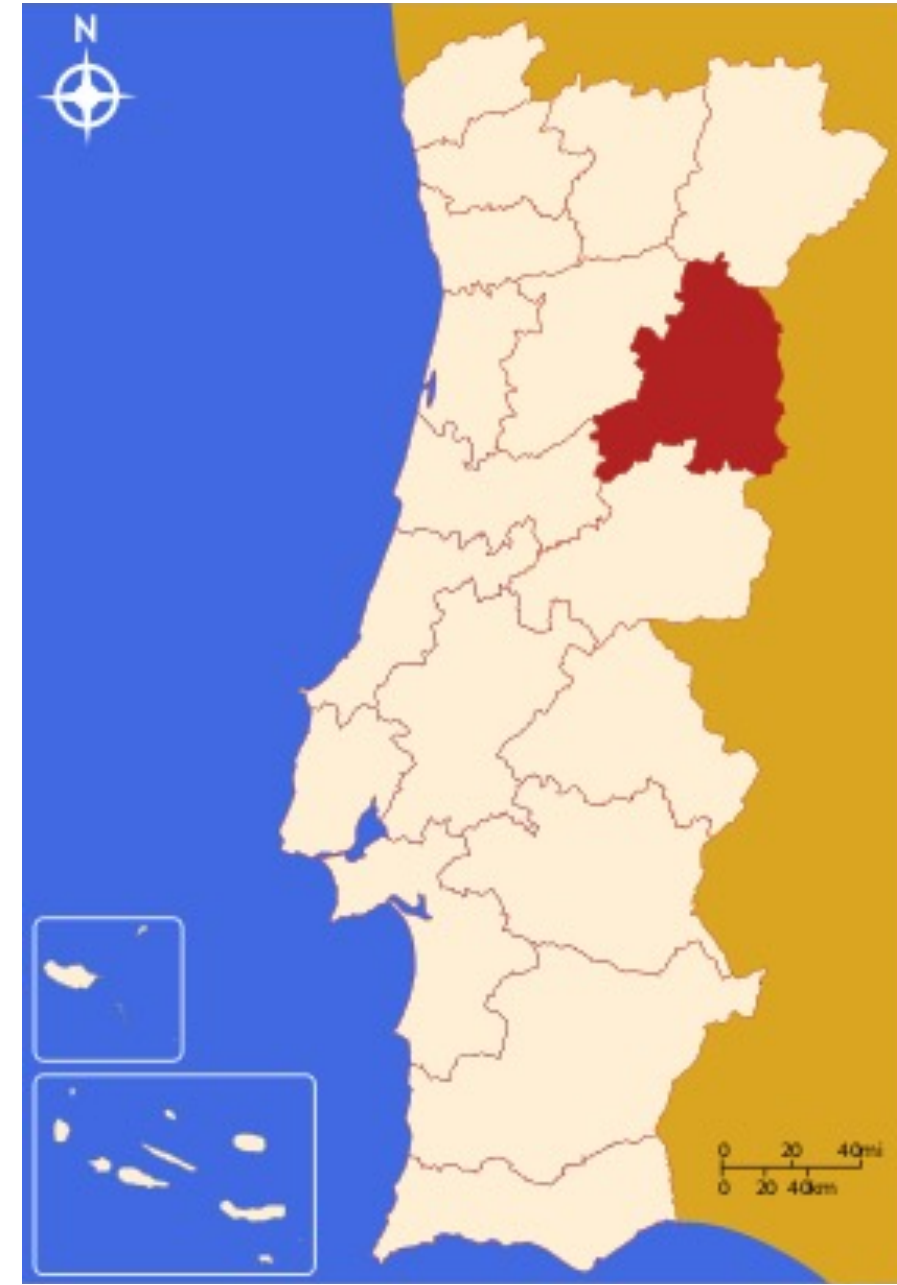
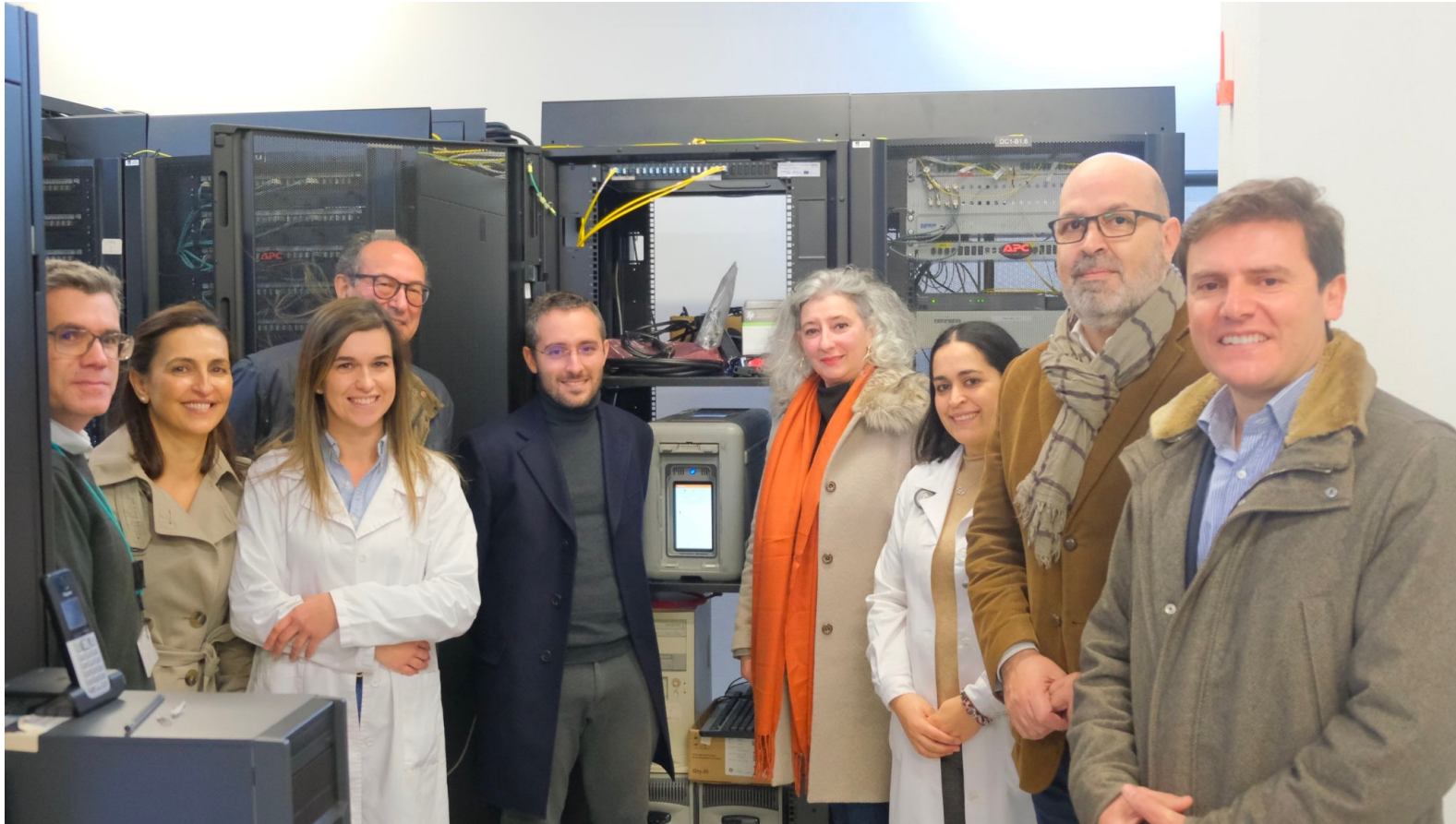


MULTICENTRIC DESIGN

Name	Region and Setting	Nº centres per care level	Patients	% Population
ULSM Unidade Local de Saúde de Matosinhos	Matosinhos North Urban	20 primary care centres 1 hospital	177.175	1.7%
ULSAM Unidade Local de Saúde do Alto Minho	Viana do Castelo North Urban + Rural	38 primary care centres 2 hospitals	249.161	2.4%
ULSNE Unidade Local de Saúde do Nordeste	Bragança North Urban + Rural	25 primary care centres 2 hospitals	132.389	1.3%
ULSG Unidade Local de Saúde da Guarda	Guarda Center Urban + Rural	18 primary care centres 2 hospitals	151.279	1.5%
ULSCB Unidade Local de Saúde de Castelo Branco	Castelo Branco Centre Urban + Rural	11 primary care centres 1 hospitals	74.517	0.7%
SESARAM Serviço de Saúde da Região Autónoma da Madeira	Madeira Islands Urban + Rural	47 primary care centres 4 hospitals	250.769	2.4%
Total	All regions	159 primary care centres 12 hospitals	1.035.290	10.0%

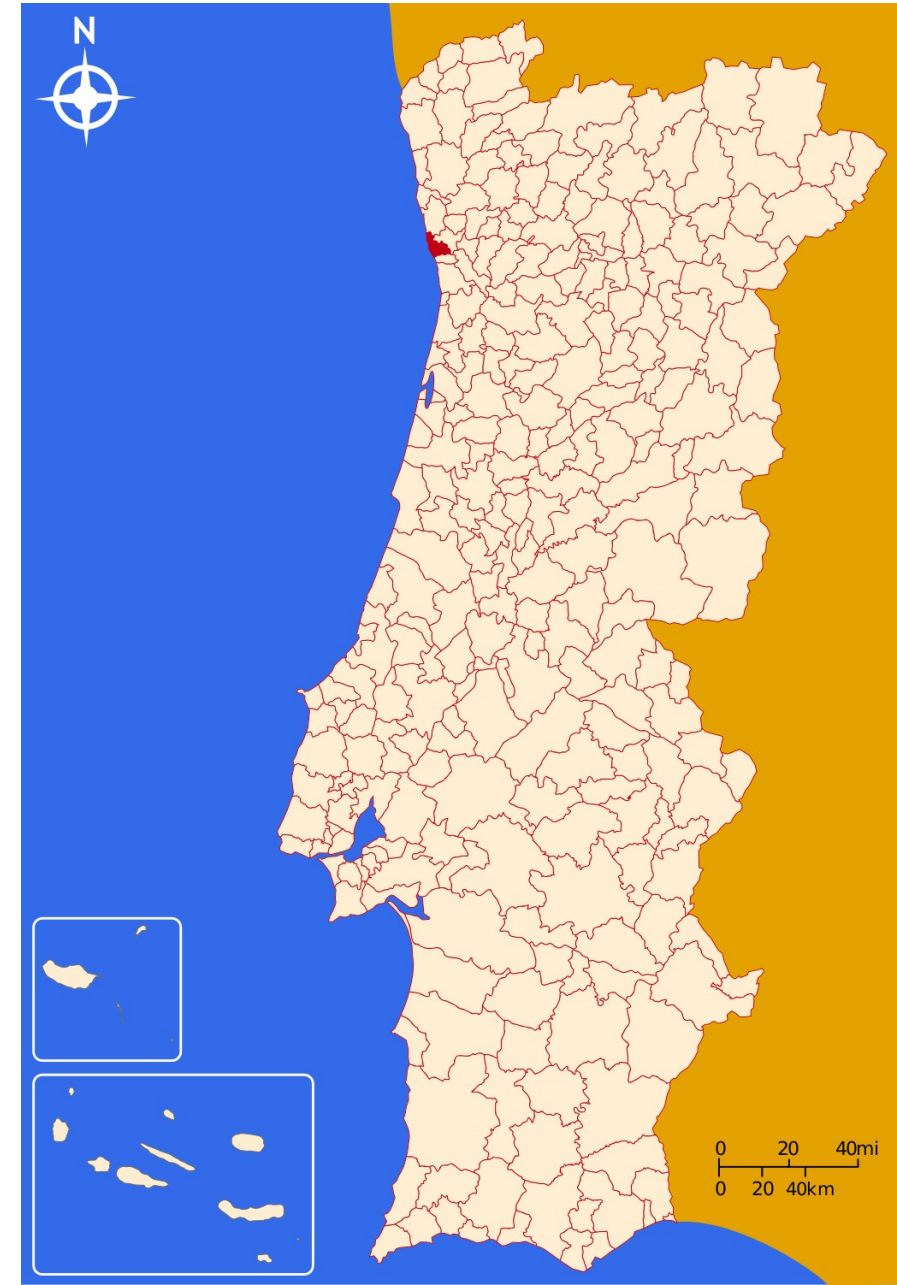
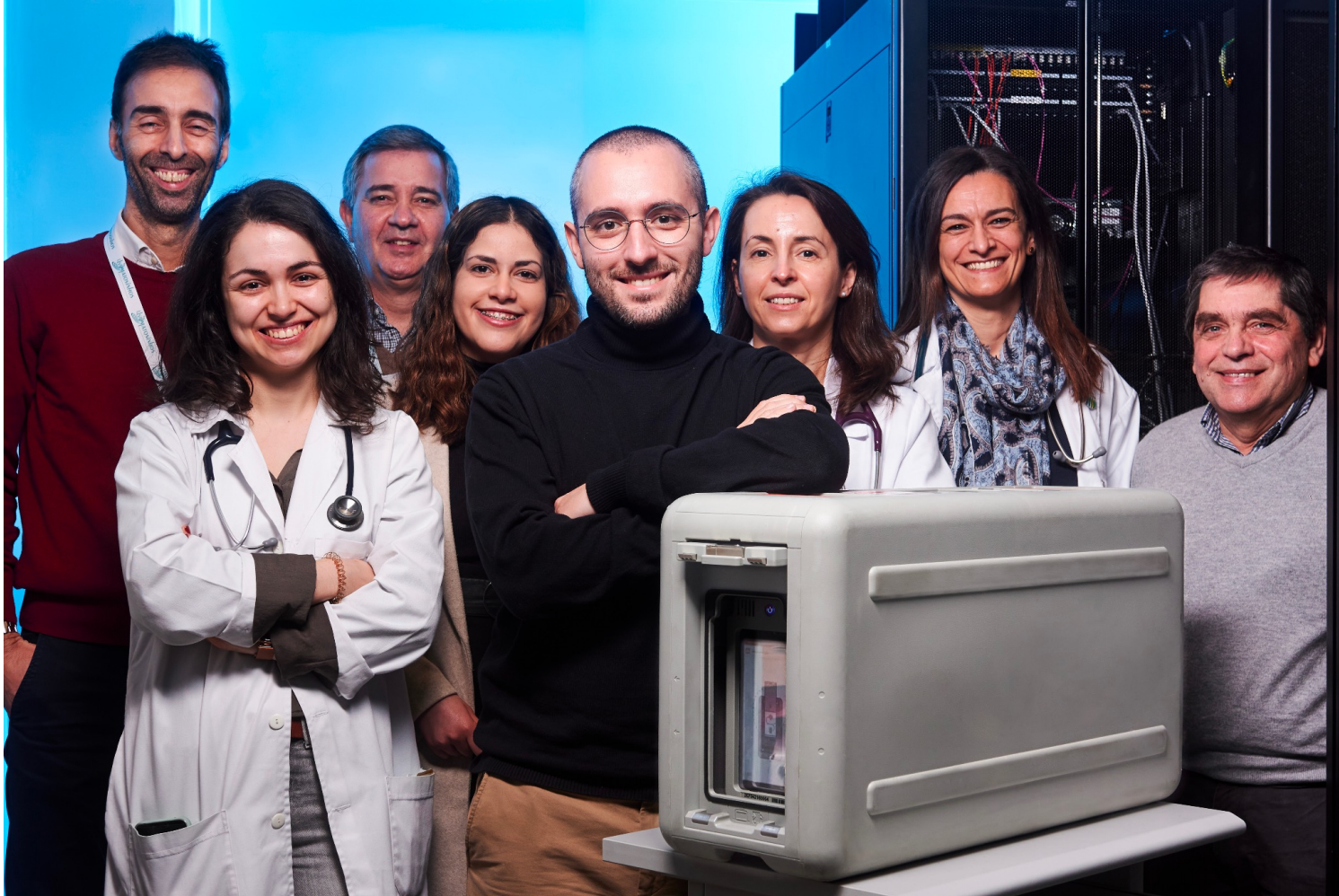
MULTICENTRIC DESIGN

Unidade Local de Saúde da Guarda
N = 143 019



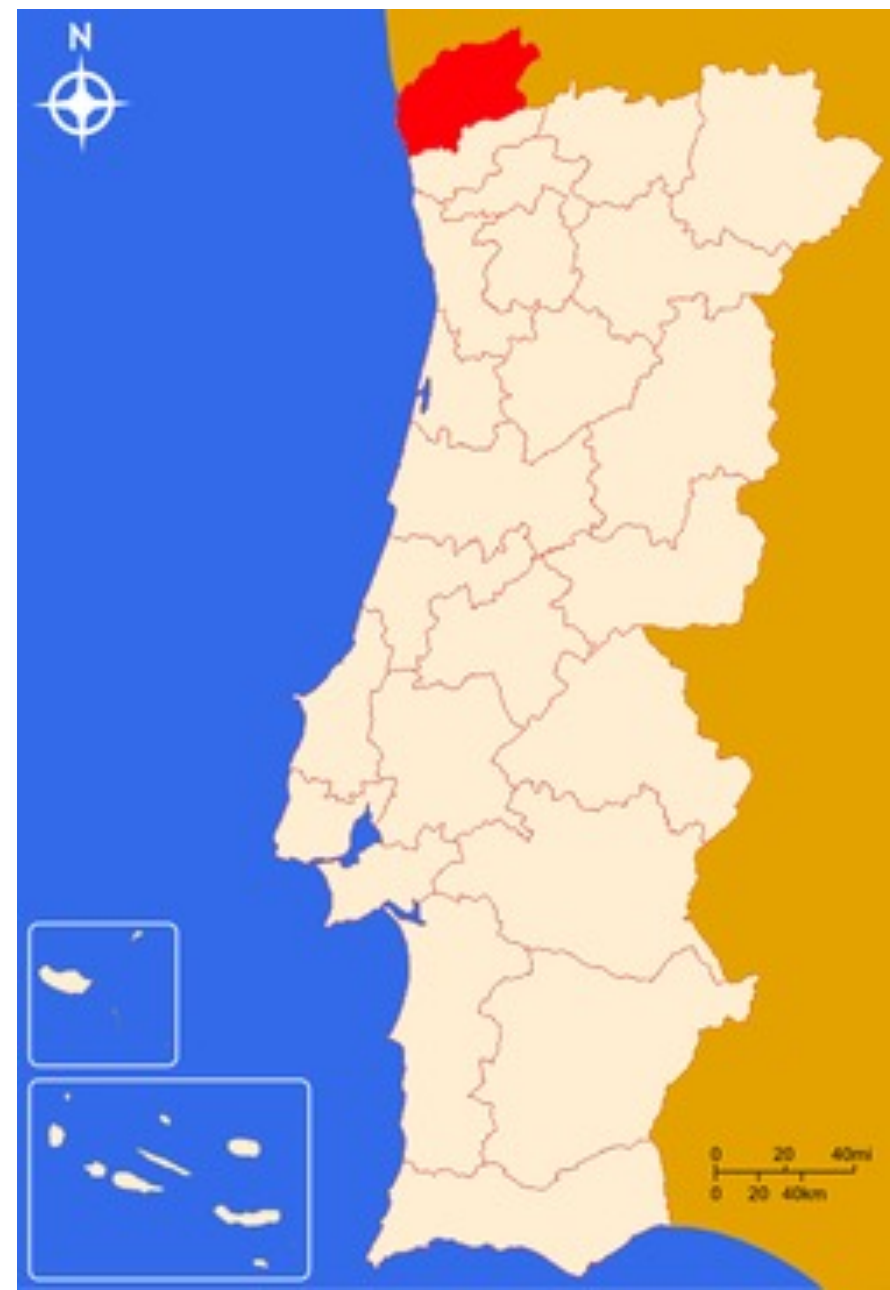
MULTICENTRIC DESIGN

Unidade Local de Matosinhos
N = 172 669



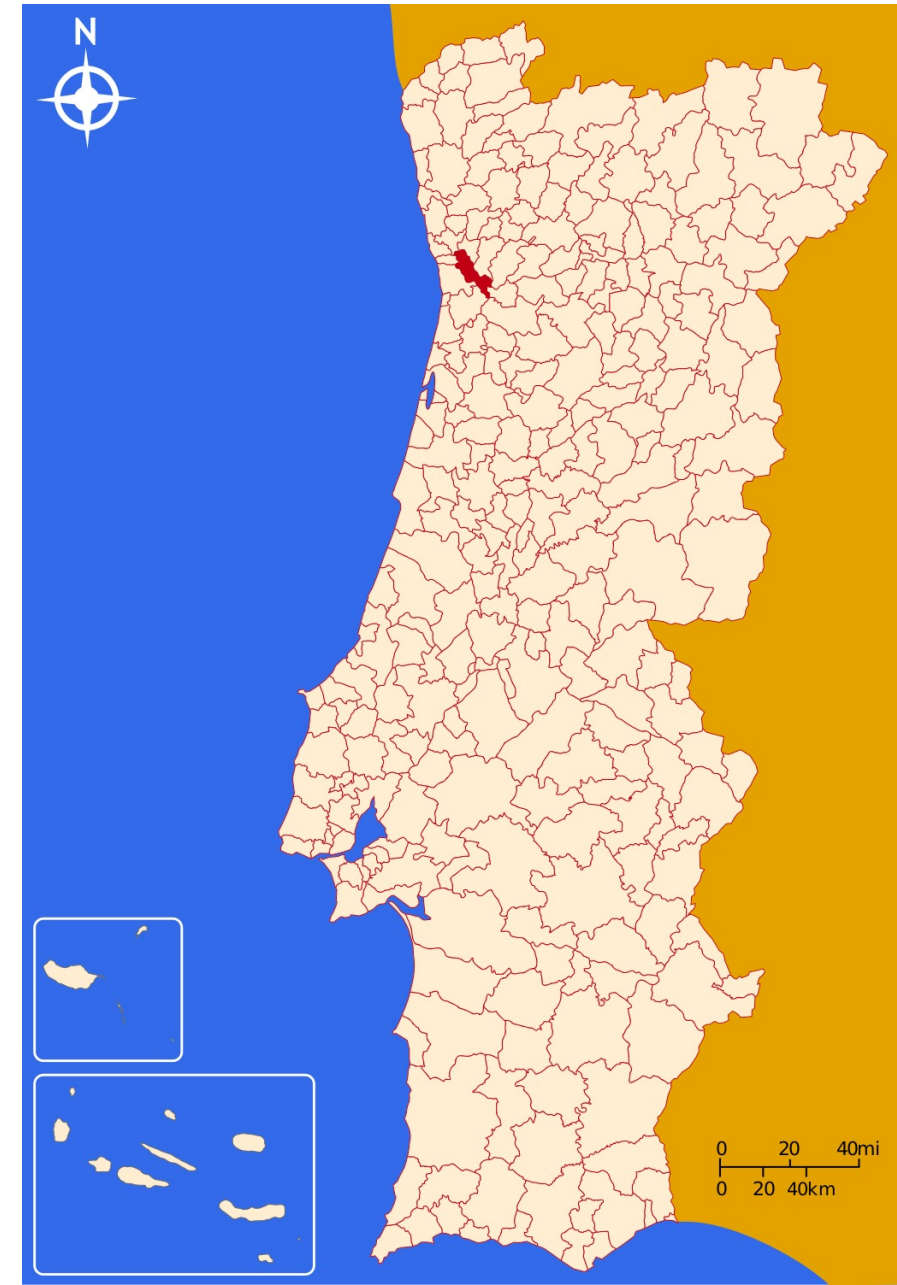
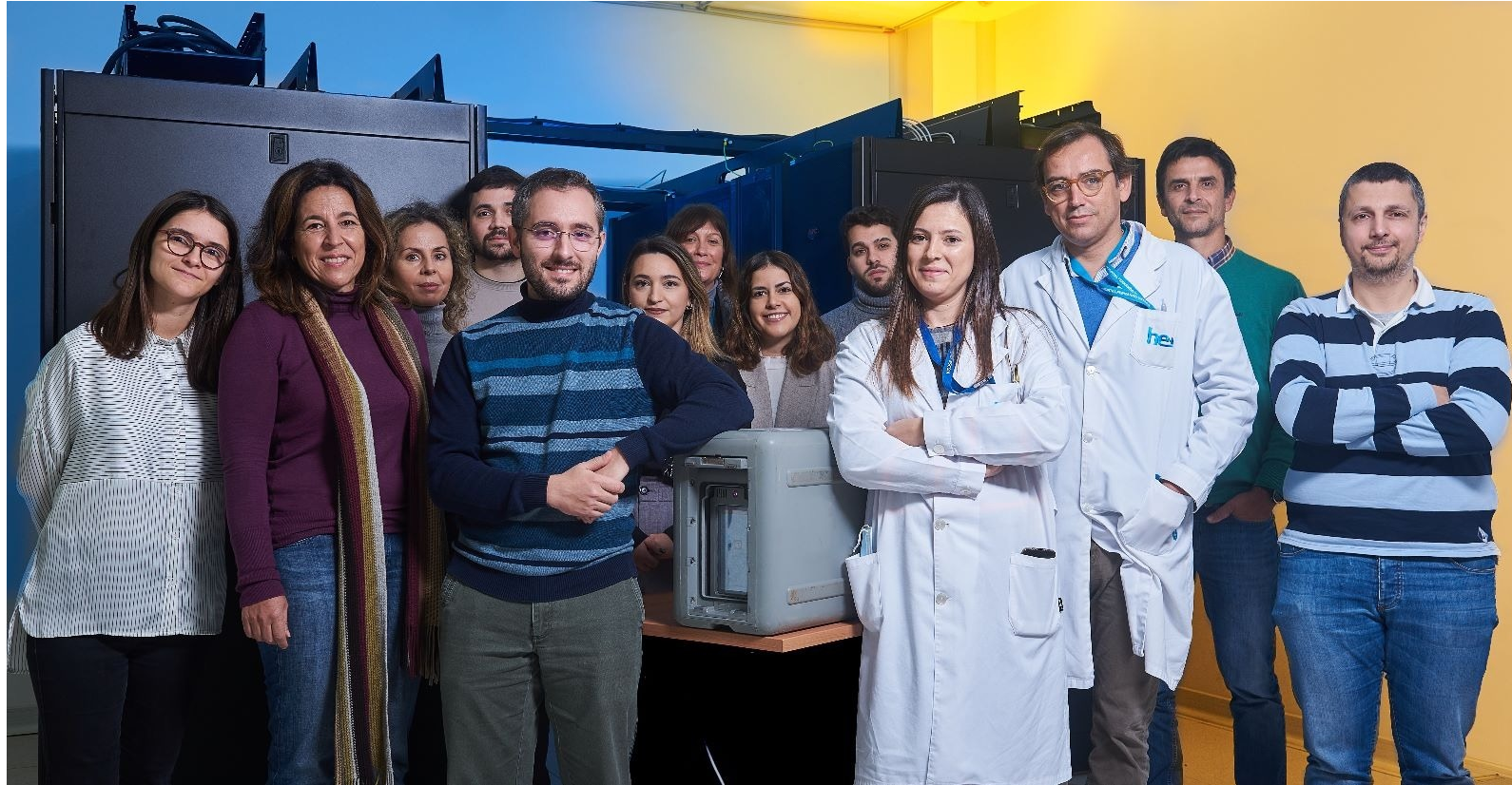
MULTICENTRIC DESIGN

Unidade Local de Saúde do Alto Minho
N = 230 954



MULTICENTRIC DESIGN

Hospital Escola Fernando Pessoa, Gondomar
N = 164 255



NEXT STEPS

Q1

Infrastructure implementation

Q2

Finish harmonization

Q2

Develop algorithm

Q3

Refine algorithm

Q4

Refinement and publication

CONCLUSION

- Fosters **Multidisciplinary Cooperation**
- **Overcomes Hardware and Regulatory Constraints**
- Bolsters **Trust** and **Acceptance**
- Promotes **Cost-Effective** Research
- Facilitate **Evidence-based Decision Making**

6th Barcelona TechnoWeek



Cloud use case 1: Medicine

MARIANA CANELAS PAIS

SCIENTIFIC COMPUTING IN THE CLOUD