# Data-driven, semanticenriched, social-boosted Clinical Research and Healthcare

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### **PONTE Landscape**



- \$44 billion sales at risk in 2015 due to patent expiration
- Drug Repositioning (40%

of R&D resources)



### PONTE in a nutshell

PONTE aimed at providing a novel platform facilitating:

- the generation and evaluation of the test of hypothesis in the biomedical domain,
- the design of a drug repositioning clinical trial and offering
- automatic pre-screening of potential study participants

Towards this direction the platform exploits and extends *Semantic Web* technologies in order to offer *advanced decision support functionalities* to all the above aspects and to achievement *semantic interoperability* between clinical trials and healthcare patient records for patient recruitment purposes.



### **PONTE Interface**



More at <u>http://www.ponte-project.eu/</u>



### **PONTE Data Infrastructure**

- Linked Data (incl. DrugBank, Diseasome, LinkedCT, KEGG)
- PubMed and ClinicalTrials.gov
- The Web

Patient Records at Healthcare

### GoPONTE

- Is the PONTE semantic search engine
- Uses Yahoo Boss! Search API for fetching web results and the MeSH, GO and UniProt ontologies for enriching the query and for indexing and annotating the results
- It searches across abstracts, semi-structured documents, web pages.



### **PONTE** results

5 new ontologies (incl. Eligibility Criteria, CTP, Hypothesis, Patient Record, Domain Ontologys)

- 40 services (incl. information retrieval, automatic generation of research questions and eligible population size)
- GoPONTE, a semantic search engine with on-the-fly results' annotation 1 integrated platform offering the PONTE services
- The **THIRST study** on Thyroid Hormone Replacement therapy in patients with ST-Elevation Myocardial Infarction



 Zero effort population estimation during trial design at the recruitment sites / Faster go/no-go decisions about sites
 Average *CTP* preparation time in half through direct literature linking, population size estimations and decision

support
Over 50% of eligibility criteria of completed drug repositioning clinical trials were suggested by the platform
More than 80% of the CTP parameters were semantically linked with literature for direct semantic searches

- **84%** of eligibility criteria can be expressed through the El. Criteria Ontology in a machine processable way

Summary of the ratio of the relevant results retrieved compared to the full list of results retrieved



### PONTE

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### **OpenScienceLink Landscape**

No universal well-structured repositories of scientific and research data for experimentation and benchmarking of pertinent research works in a given thematic area Poor linking of research with data

journals and open access datasets

Waste on resources due to research duplication and limited access to data

Peer Review Processes remain fragmented, lengthy, biased and in several cases weak and inefficient

Reviewers are still equipped with only few tools and need to perform timeconsuming, incomplete searches across global literature

Current evaluation metrics and systems do *not* fully reflect the actual quality, novelty and impact of the published work

The **dynamics** of the field, the research work and the researcher are *not* taken into consideration Limited results of science in dealing with great challenges, such as poverty, climate change, unemployment, social exclusion, which aim at a healthy and productive population





### The OpenScienceLink in a nutshell

**OpenScienceLink** exploits the open access trend and resources in the scientific world coupled with recent advances in the **social analytics** and **Semantic Web** for facilitating addressing the above problems, while also enabling a range of **new business models** for several stakeholders in the **scientific publishing** and **academic value chains**.



### OpenScienceLink Output

- One integrated platform incorporating Semantic Web and social analytics technologies for the provision of 5 (five) pilot services:
- **#1: Data journals** development based on the OpenScienceLink model for scientific datasets
- #2: Novel open, semantically-assisted peer review process
- #3: Research Trends Detection and Analysis
- **#4:** Dynamic **researchers' collaboration** based on non-declared, semanticallyinferred relationships
- **#5:** Scientific field-aware, productivity- and impact-oriented enhanced **research** evaluation services



## Current OpenScienceLink Results (1/2)

#### **OpenScore**:

- A new evaluation metric which uniquely incorporates scientific output aspects such as work volume, thematic breadth, career timeline and linking with scientific community
- High correlation with existing evaluation metrics

#### Automatic Abbreviations expansion mechanism:

- It detects abbreviations along with their meaning regardless of whether their long form is provided in the document or not
- 95% success rate in detection of true meaning of abbreviations in online biomedical documents

#### (ongoing) Trends detection:

- Temporal analysis of:
  - Social networks activity for detection of potentially new topics
  - Biomedical concepts across literature with particular focus on the ones of low but rising occurrence



## Current OpenScienceLink Results (2/2

#### **Collaborations suggestion service:**

- Provision of recommendations which are relevant to the expert's topic/domain and are not part of his existing collaborations
- Correctness of implicitly identified relationships among researchers: >= 60%

#### **Biomedical Data Journal:**

- An open access journal aiming to facilitate the presentation, validation, use, and re-use of datasets, with focus on publishing biomedical datasets that can serve as a source for simulation and computational modelling of diseases and biological processes
- Implements the OpenScienceLink model for datasets and allows the publisher to exploit the platform trends detection and analysis services
- Publisher: PROCON



### OpenScienceLink

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### **BIGGER:** The main idea

BIGGER aims at exploiting big data technologies applied on a variety of heterogeneous, content- and context-variable data sources for assessing the following question:

How to incorporate public health issues in policies across the public sector (such as transportation, urban planning, labor, insurance, education) in order to allow for prompt response in cases of infectious diseases outbreaks and robust, effective policy making in cases of non-communicable diseases?



### The **BIGGER** vision





### The BIGGER platform





### **BIGGER** Pilots

Pilot #1: Short term public health policy making requiring prompt response. Driven by the continuously increasing prevalence and incidence of communicable diseases due to rising numbers of immigrants and the financial crisis, this pilot will focus on *an infectious disease*, and more specifically early identification of its signs and their estimated spatio-temporal spreading.

**Pilot #2: Long term public health-driven cross-sectorial policy making** on CVD for disease and disease worsening prevention. As preventing cardiovascular disease is not only about better medical treatment, but also about improving access to healthier foods and creating environments that encourage physical activity, this pilot will focus on policy development for CVD prevention and stabilisation.



### **Potential Collaboration**

To use anonymised, annotated (with contextual information) health and lifestyle datasets (both already collected and realtime generated ones) collected by the applications as part of the BIGGER Data Infrastructure

To improve content annotation in collected data for the latter to serve the BIGGER purposes

To launch a new "study" in ResearchKit for supporting the Pilot #2

To develop a DREAM Challenge for researchers to compete in offering public sector policy models on top of or supplementing the ones to be incorporated in the BIGGER platform