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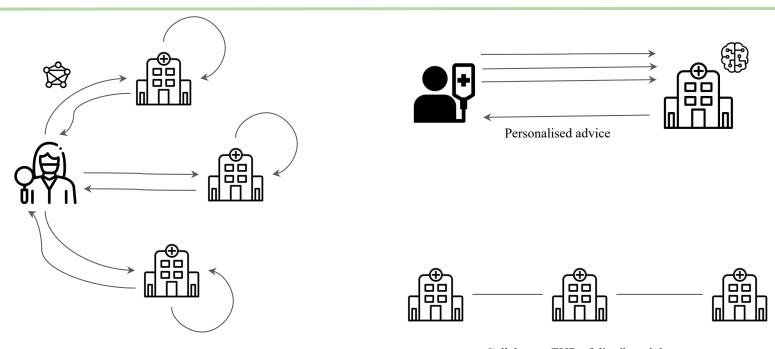
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## Towards personalised medicine



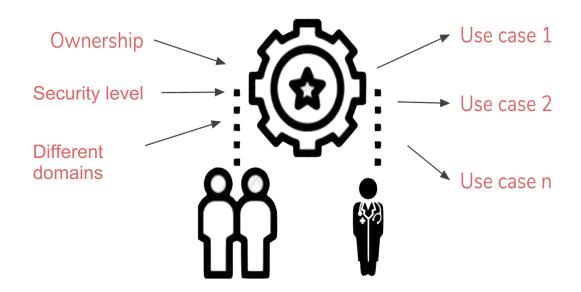


Collaborate EHR of distributed datasets



#### EPI: Enabling Personalized Interventions

We need an adaptive framework to enable secure data-sharing across health domains



### Medical Data Sharing & Frameworks



- Frameworks rely on single specific technologies or devices
- Frameworks are catered to satisfy a specific use case
- Application-specific
- Architecture rigid and hard to support different use cases
- The EPI framework formalises a methodology that adapts the EPI programmable infrastructure to different use cases.







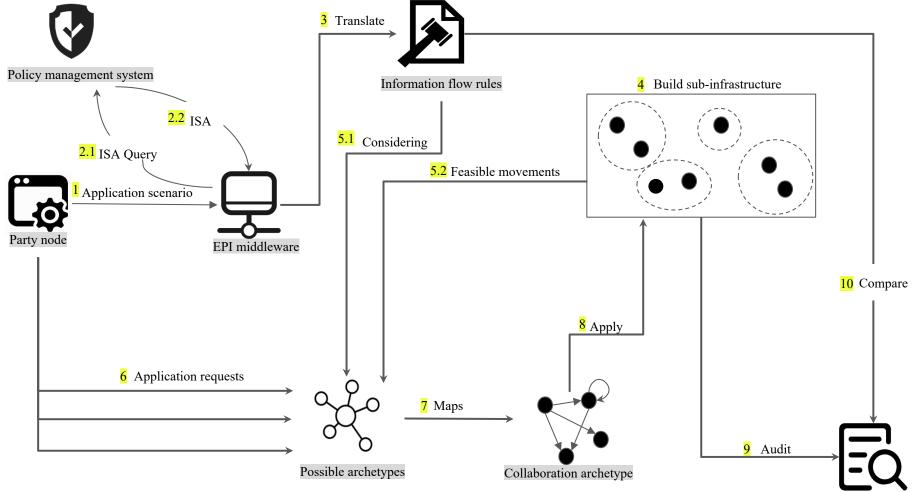


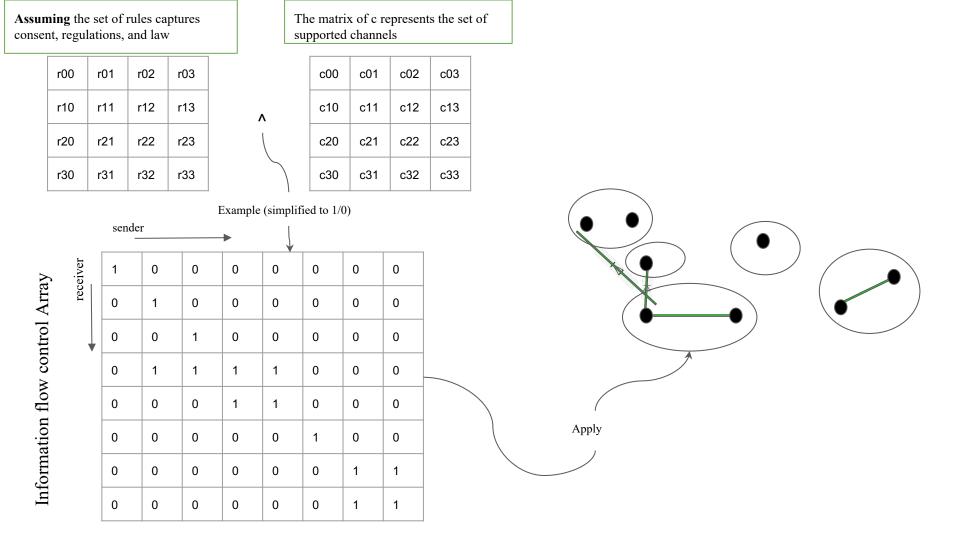


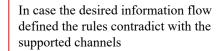




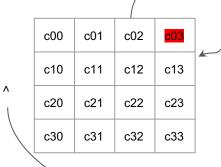
High level view of the infrastructure workflow



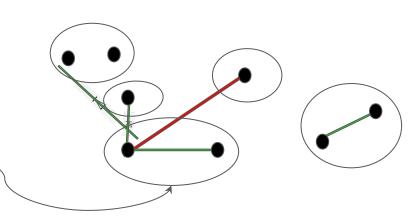


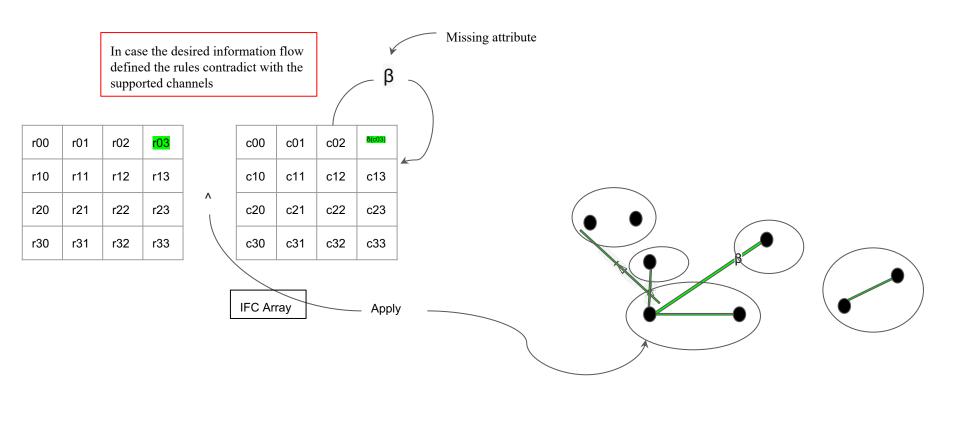


r00	r01	r02	<mark>r03</mark>
r10	r11	r12	r13
r20	r21	r22	r23
r30	r31	r32	r33



Apply





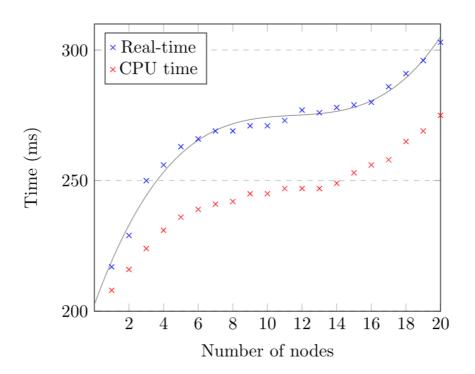
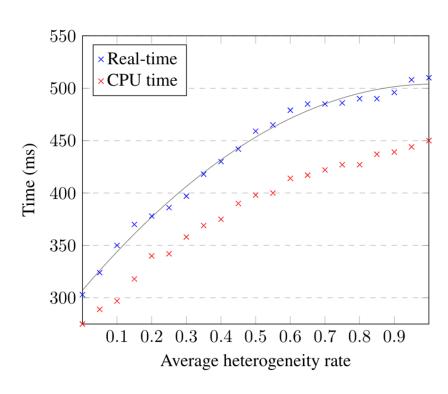
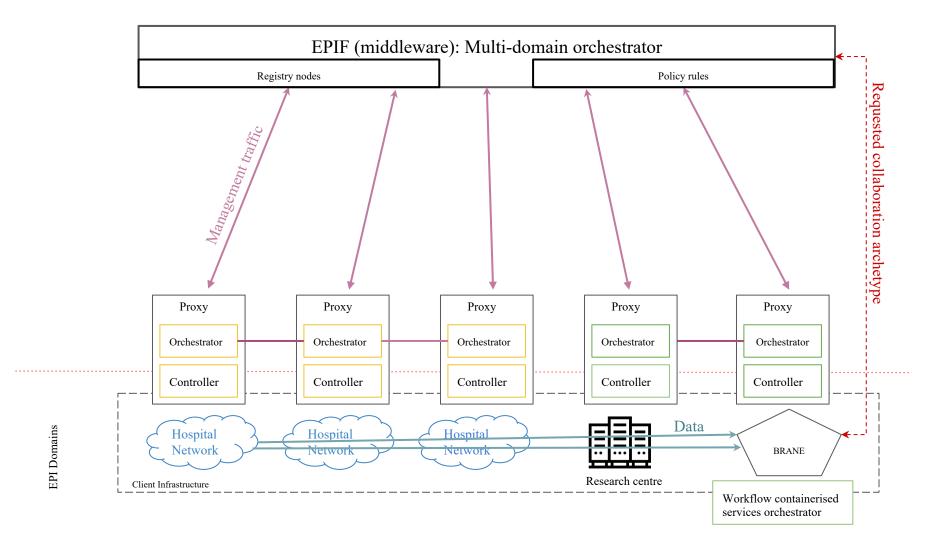


Figure 4: Script execution time depending on increasing input



The script execution time with respect to increasing AHR.

EPIF: from an infrastructural view



# Ongoing and future work



- Implementation in real testbeds
  - DSL to be used to express infrastructural set up requirements
  - Extra bridging functions
- Test bridging functions: performance and security
- Evaluate framework with different use cases:
  ML, streaming, EHR
- More experiments on implementation approach

- Dynamic policy:
  - Integrate by expressing policy
  - In terms of bridges
  - It is interesting to see if we can approach the policy change in a graceful or disruptive way
  - Multiple ways to abide policy: best way?