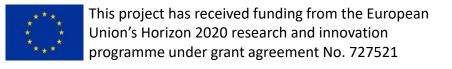


USING BIG DATA ANALYTICS TO FORMULATE PUBLIC HEALTH POLICY FOR HEARING HEALTH

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USING BIG DATA ANALYTICS TO FORMULATE PUBLIC HEALTH POLICY FOR HEARING HEALTH

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Protocol:

https://bmjopen.bmj.com/content/8/2/e020978



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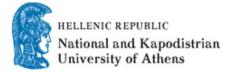
















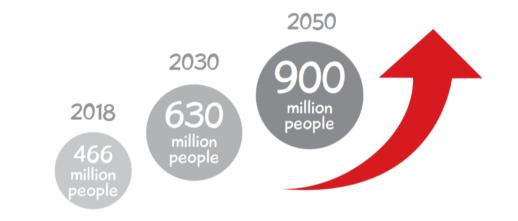
Outline

- The need for public health policy in hearing health
- Structure and functioning of EVOTION
- Development of computer language for Public Health Policy Decision Making Models (PHPDM)
- Examples of Models
- Text Mining
- Decision support system (DSS)
- Progress and future



WHO: new estimates for disabling hearing loss





20	018: All	Hearin	ng loss 2018,	2050
World	7.63bn <i>,</i>	466m,	6.1%,	900m
High income countries	886m	, 46m,	5.2%,	72m
EU population	513m	, 27m,	5.3%	
Low income countries	6.74bn <i>,</i>	420m,	6.2%,	828m

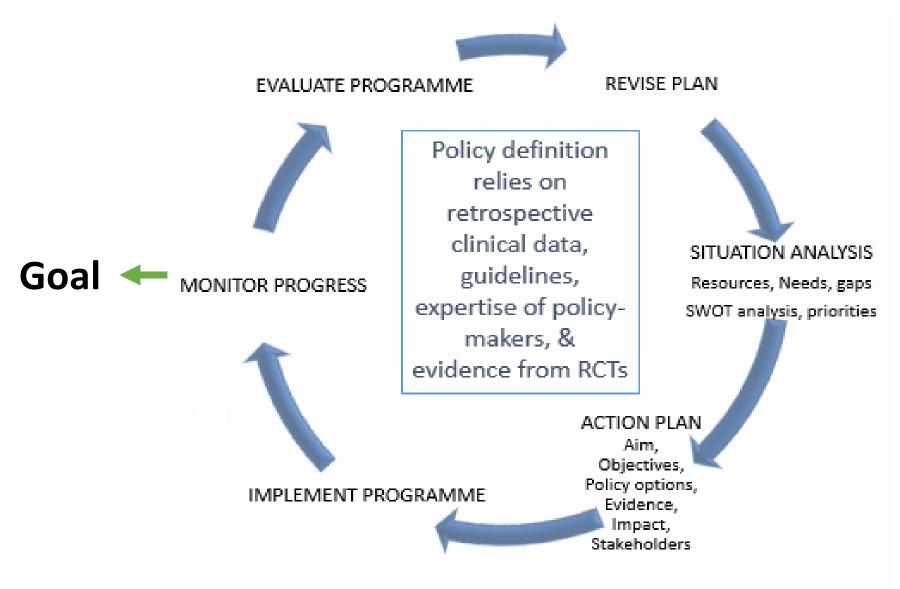


Rationale for public health policy decisions

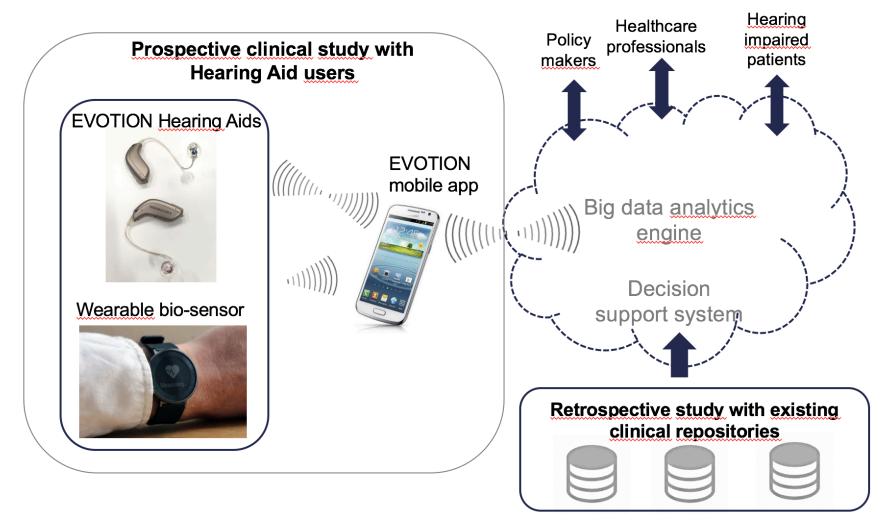
- Hearing loss is a huge and increasing problem in the world, including in high income countries.
- Public health methods are needed to address hearing loss on a large scale within countries.
- Good public health policy decisions are essential in order to develop and implement effective and cost-effective programmes.



CURRENT APPROACH TO POLICY MAKING



THE EVOTION APPROACH TO POLICY MAKING





Public Health Policy Decision Making Models – (1) Language Objectives

To develop a high level computer language for specification of evidence-based Public Health Policy Decision Making Models

- based on big data analytics
- executable by the EVOTION platform.

The language would enable specification of:

- overall goal and objectives for the policy
- possible interventions to achieve the goals/objectives
- evidence needed for the interventions
- validation of the evidence
- stakeholders who consider evidence and decide on interventions
- criteria for making decisions on the basis of the evidence

Public Health Policy Decision Making Models -

(2) Examples of Goals and Objectives

Goal 1: Improve Hearing Aid usage

Objective 1: Average HA usage to be at least 50% of maximum time.

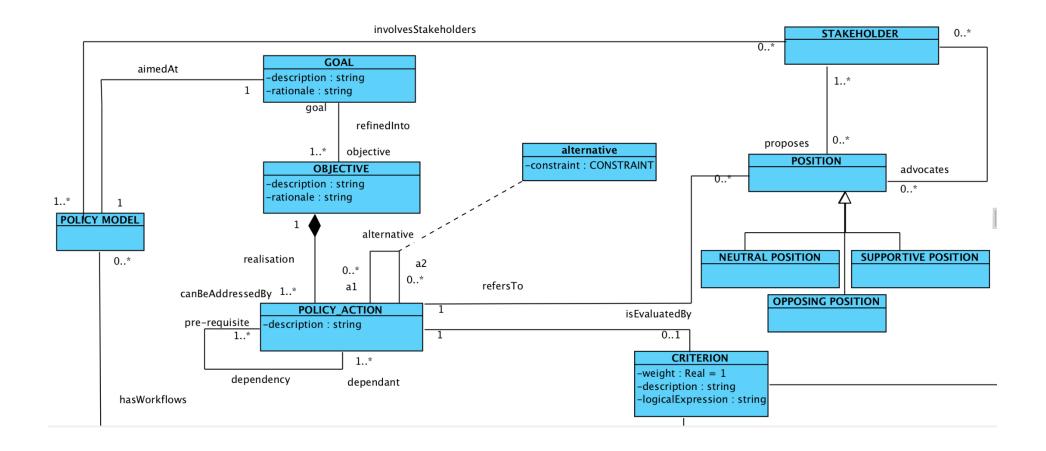
Objective 2: Average HA usage to increase by at least 30% of maximum time

Objective 3: Satisfaction of HA users to increase by at least 20% of max value over 3 years

Goal 2: Stop Cognitive Decline

Objective 1: EVOTION cognitive tests to reach at least 80% of maximum.

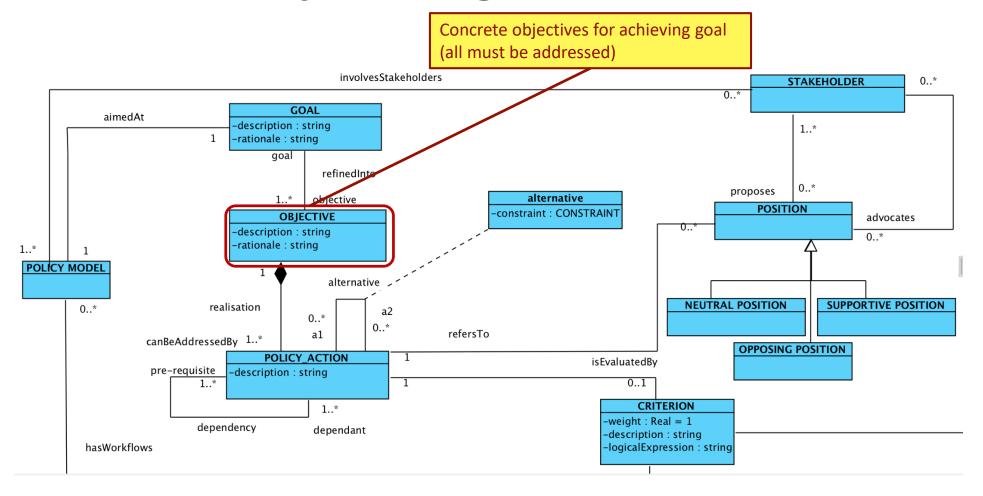
Objective 2: Cognitive decline is stopped or made slower.





What the policy is aimed at addressing (purpose) and why (rationale) involvesStakeholders 0..* **STAKEHOLDER** 0..* **GOAL** aimedAt -description : string 1..* -rationale : string refinedInto 0..* proposes objective alternative **POSITION** -constraint : CONSTRAINT **OBJECTIVE** advocates 0...* -description : string -rationale : string 1..* POLICY MODEL alternative SUPPORTIVE POSITION **NEUTRAL POSITION** 0..* realisation 0..* 0..* refersTo canBeAddressedBy 1..* OPPOSING POSITION **POLICY ACTION** is Evaluated By pre-requisite -description : string 0..1 **CRITERION** 1..* -weight : Real = 1dependency dependant -description : string -logicalExpression : string hasWorkflows

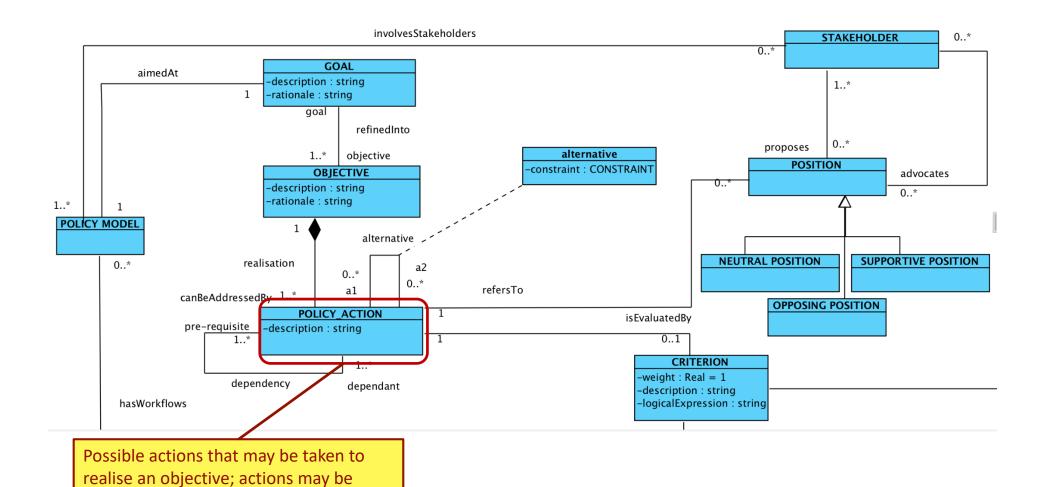




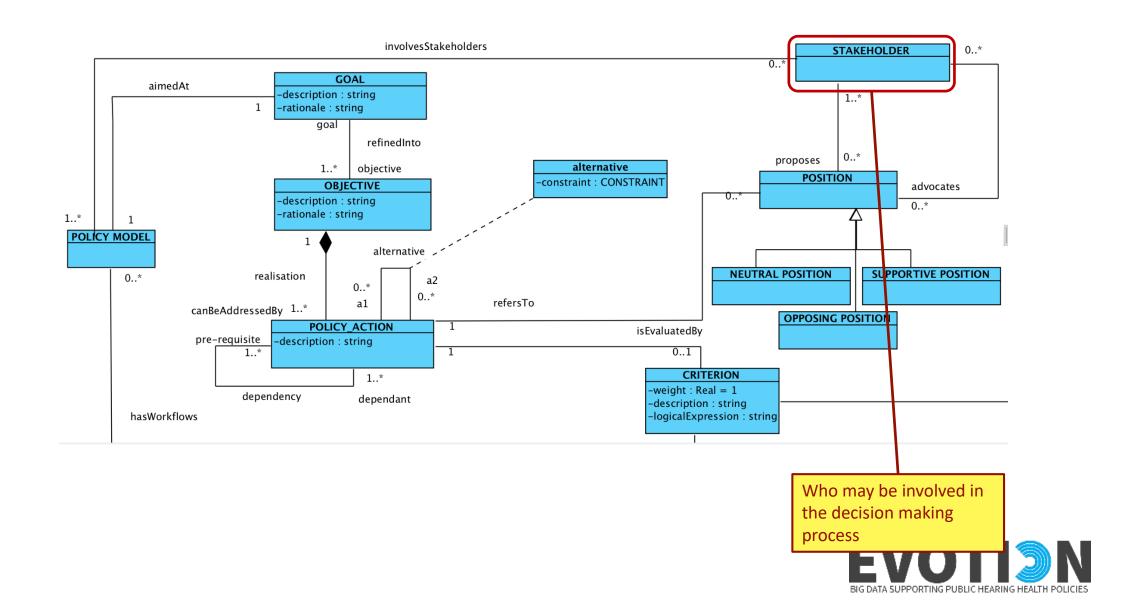


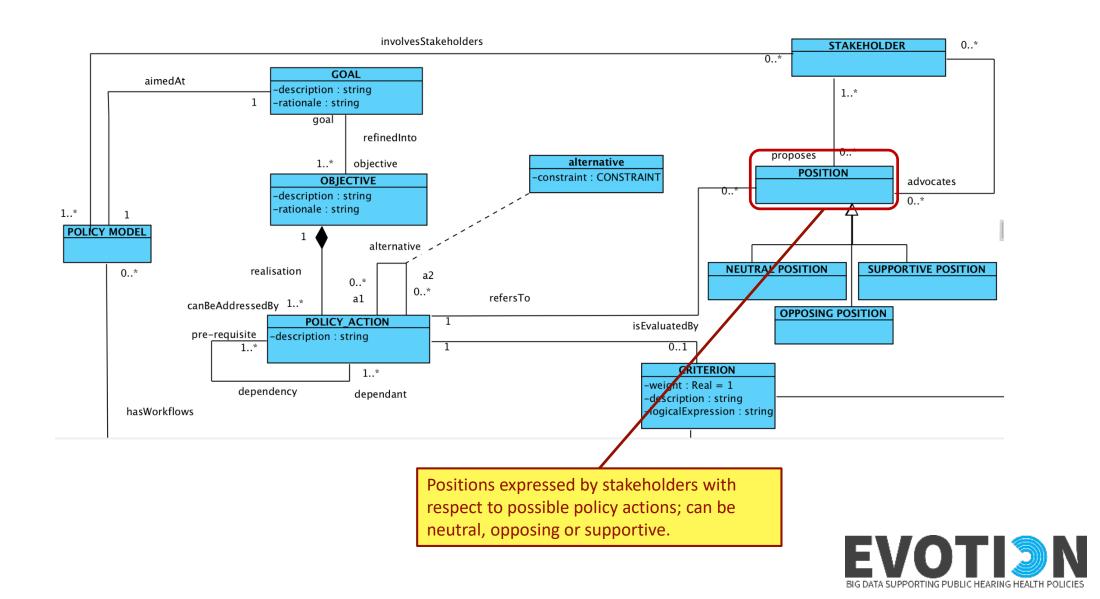
compatible or mutually disjoint

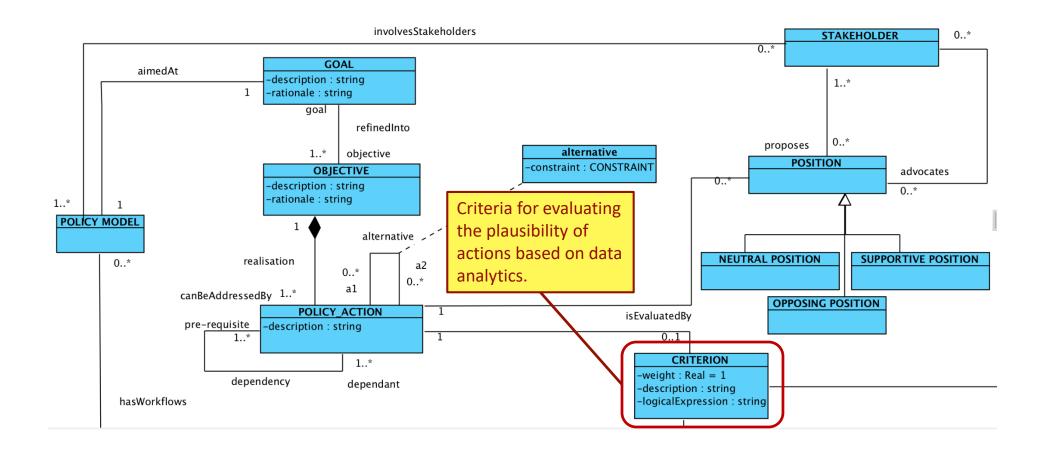
(alternatives)



EVOT DIN

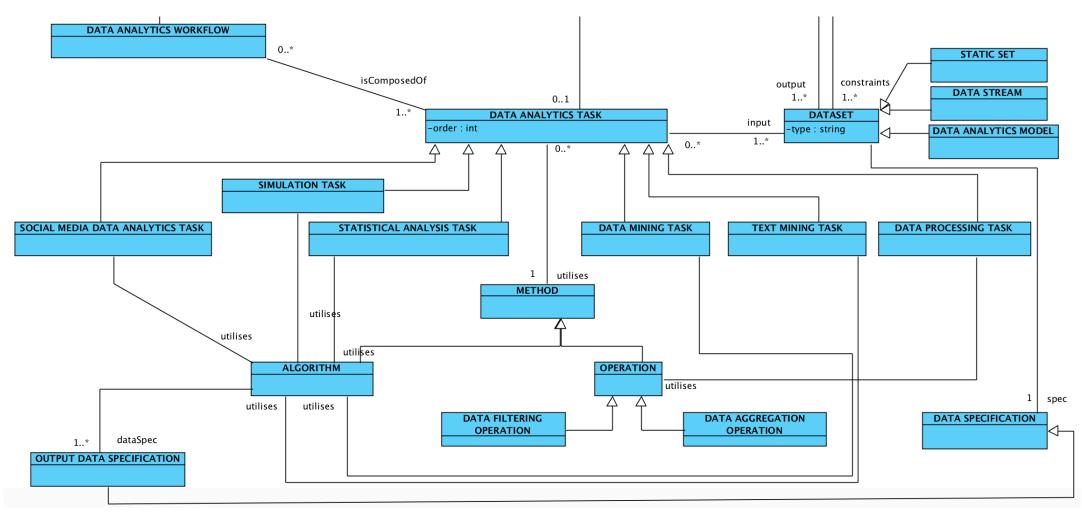








Module 2: Data Analytics and Evidence





Public Health Policy Decision Making Models -

(2) Examples of Actions for Models

Goal 1: Improve Hearing Aid usage

- Enhance clinical practice to monitor influences on HA use, and user reported benefit
- Improve HA users awareness and motivation to increase their HA use

Goal 2: Stop Cognitive Decline

(targeted at HA users with low or deteriorating scores on cognitive tests)

- Referrals for clinician assessment and patient recommendations for improving cognitive skills
- Social campaigns to increase patient awareness and inform them of remedies
- Provision of games apps to improve cognitive skills; app links sent to mobiles for downloading

Big Data Analytics-Text Mining interaction and decision making for PHP



(S) Superset (BDA+TM) clusters

e.g. HA usage is affected by {education, cognitive scores, outdoor activities, gender, satisfaction}



Reasoning for applying Text Mining to Big Data Analytics (BDA) for Decision Making

- ➤ Currently, almost no work on PHP modelling for HL.
- Literature review by text mining may indicate where to look (most significant factors)
- >BDA use this info and other factors to build an updated situation.
- ➤ Decision Support System (DSS) uses BDA computations on top of text-mining to suggest PHP decisions.
- >THUS BDA should be part of all policy making procedures



Text Mining Component

From previous example (PHPDM1), a trifold input may be given to the TM component (part of the DSS) for:

- hearing aid usage AND education
- hearing aid usage AND activities
- hearing aid usage AND cognitive function

with STOPWORD-LISTS updated based on clinicians' and PHP actors' input



Text Mining Wordclouds

The Text Mining Component produces the following results shown in wordcloud format (extracted to a pdf report and an ison file)



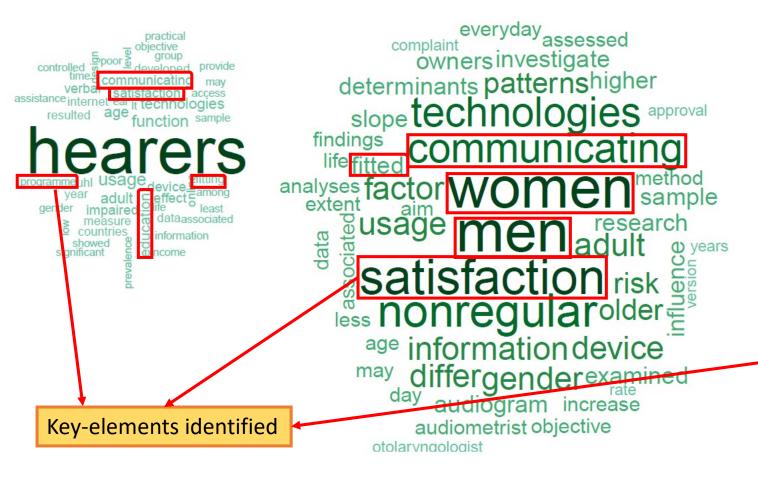
determinants patternshigher data age information device differgenderexamined ay audiogram increase audiometrist objective otolarvngologist

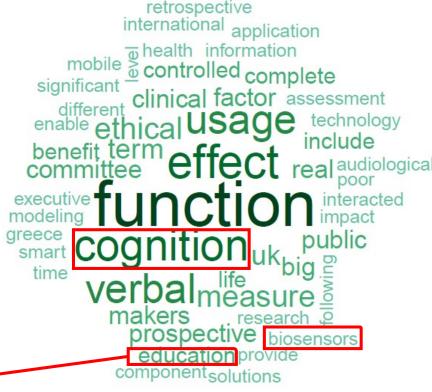
retrospective time education provide component solutions



Text Mining Wordclouds

The visual representation of the TM analysis results, allows a Public Health Policy Makers to identify literature-related parameters, thus enabling them to modify (if they select so) the parameters of the model.







Key EVOTION progress so far and next step

Developed these platform components:

- -collection of USAGE DATA from HAs & health records from clinical databases;
- -BIG DATA ANALYTICS ENGINE to analyze the collected data;
- -public health POLICY SPECIFICATION LANGUAGE for modeling public hearing health policies;
- -DECISION SUPPORT SYSTEM to support public hearing health policy-making
- -custom WEB INTERFACE for clinical partners to connect to the above platform.
- **Set up –** encryption/pseudo-identifiers to preserve privacy and security.
- **Started --** collection of real time usage data.
- **Next step --** Custom web interface for policy partners to connect to the platform



Future use of health data for policies

Future health care will connect data from end-users, Health Care Providers, and policy makers to monitor, revise, and formulate new health policies.

■ By end of project, the EVOTION platform will enable public health policy makers to analyze data from many end-users, compare with literature, and develop and implement public health policies.



In summary, EVOTION aims to

- build the evidence base for
 - the formulation of public health policies related to the prevention, early diagnosis, long-term treatment and rehabilitation of HL,
 - the detection and prevention of cognitive decline and the socioeconomic inclusion of individuals with HL.
- enable and support a more holistic management of HL at the population level.

Thank You for listening

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