

System Decision Support Based on
Internet Technologies to Predict Control
Living SystemsRimma Alexandrovna Tomakova¹, Alexandra Nikolaevna Brezneva², Alexey
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Abstract

The article considers algorithms and methods for constructing decision support systems for forecasting and controlling the effectiveness of living systems management, to ensure the effectiveness of therapeutic procedures (ETP). ETP control is implemented in three stages. At the first stage, surrogate markers are selected, through the monitoring of which a decision is made on ETP. At the second stage, a distributed database is created, which allows the creation of surrogate markers intended for ETP monitoring. At the third stage, a meta-analysis of the information collected in the distributed database on surrogate markers is made, which results in a decision on the ETP.

A web service is presented in which surrogate markers are selected based on analysis of intercellular relationships of peripheral blood smears. Algorithmic support of the web service and the structure of its software modules are given. The functional interaction of the developed software modules and the structure of the module for monitoring the dynamics of intercellular relations providing a meta-analysis of the effectiveness of drug prescriptions are described.

To ensure the functioning of the module for the analysis of the dynamics of intercellular relationships in the process of medicinal prescriptions, appropriate procedures for the analysis and classification of images of peripheral blood smears have been developed.

Introduction

Currently, modern healthcare is oriented towards the application of information and telecommunication technologies (ITT) for data collection and analysis, decision support [1,2].

The introduction of Internet technologies with the necessary tools for analyzing the large volume of physiological parameters of patients makes it possible to monitor the results of therapeutic procedures not only to the treating physician, but also to the patient himself. Intellectual technologies provide opportunities for identifying adverse reactions (AR) at a preclinical level or detecting individual incompatibilities of prescribed drugs; those implement technology “second medical opinion” [3-7].

At the same time, the solution of the problem of controlling the effectiveness of medicinal prescriptions is connected with the search for surrogate markers. It is believed that changes in these indicators during treatment should also affect a clinically significant outcome.

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Materials and Methods

The main structural element of the proposed information technology is the “interior”. The interior is a computer program that allows in an interactive mode to carry out experimental studies on meta-analysis of the effectiveness of control actions on living objects through Internet technologies. This program is intended for the decision-maker (DM), therefore contains tools for meta-analysis. Figure 1 shows the structure of the interior and its purpose.

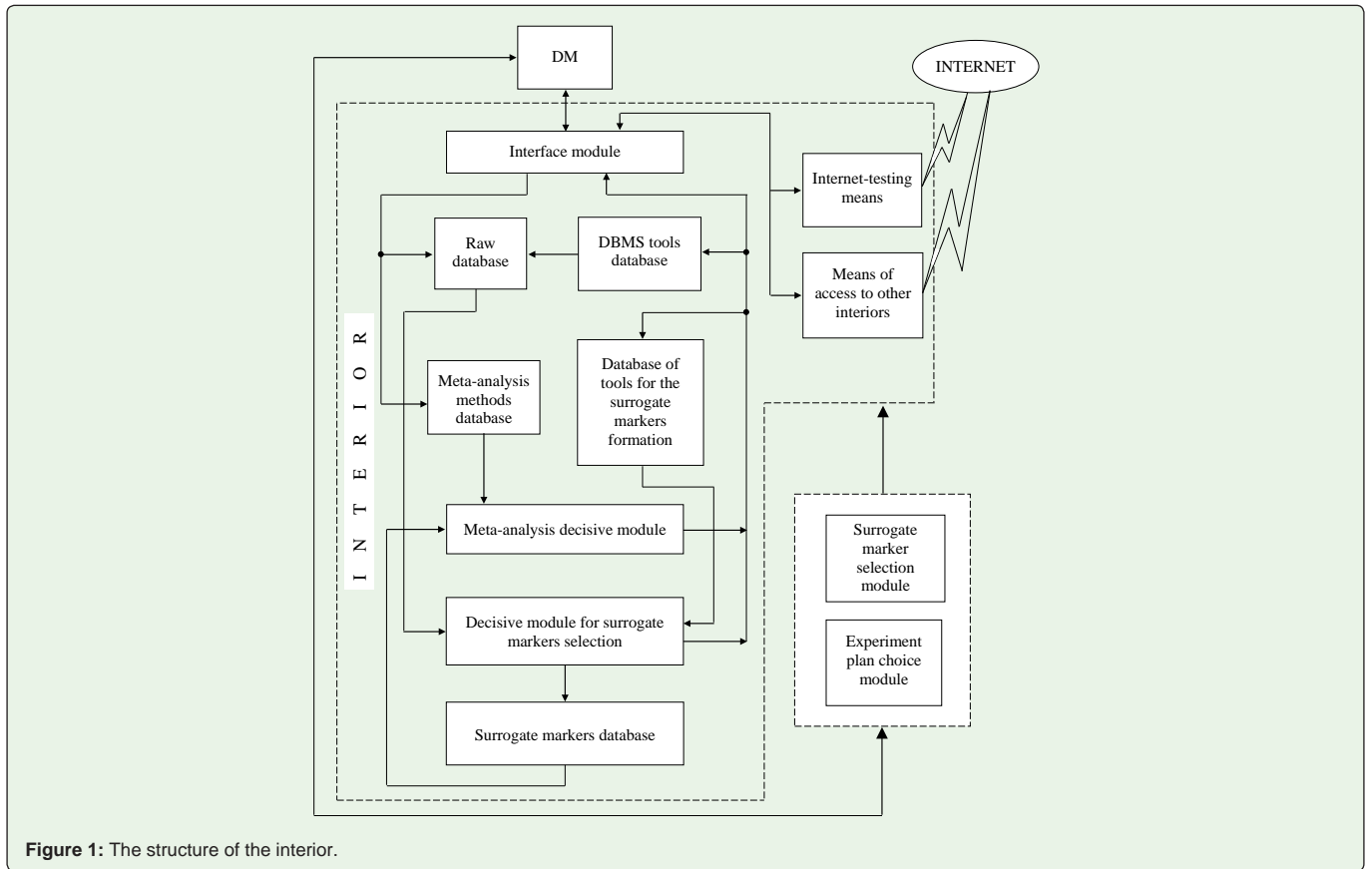


Figure 1: The structure of the interior.

At the beginning of the research, a selection of surrogate markers is made and a plan for the experiment is drawn up. The control of the effectiveness of therapeutic procedures through the interior is realized in three stages.

At the first stage, surrogate markers are selected, based on the monitoring of which a decision is made about the effectiveness of the therapeutic procedure.

At the second stage, a distributed database is created that allows the generation of data and the formation of surrogate markers intended for monitoring the effectiveness of therapeutic procedures.

At the third stage, a meta-analysis of the information on surrogate markers collected in a distributed database is made, which results in the decision on the effectiveness of the therapeutic procedure.

For software implementation of the interior, according to the structure shown in Figure 2, different software products are needed, used as a tool. It should be noted that the interior should have constant access during the execution of program procedures, so the tools should be on the web service (Figure 3). In addition, the web service may contain part of the interior database.

Thus, the DM creates a community of remote users who can

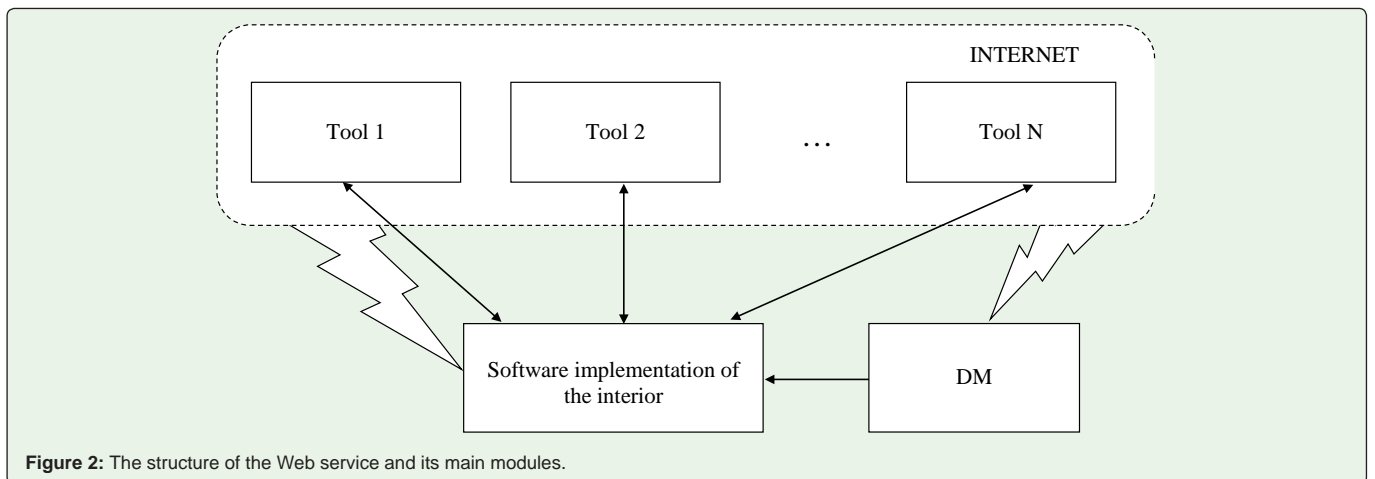
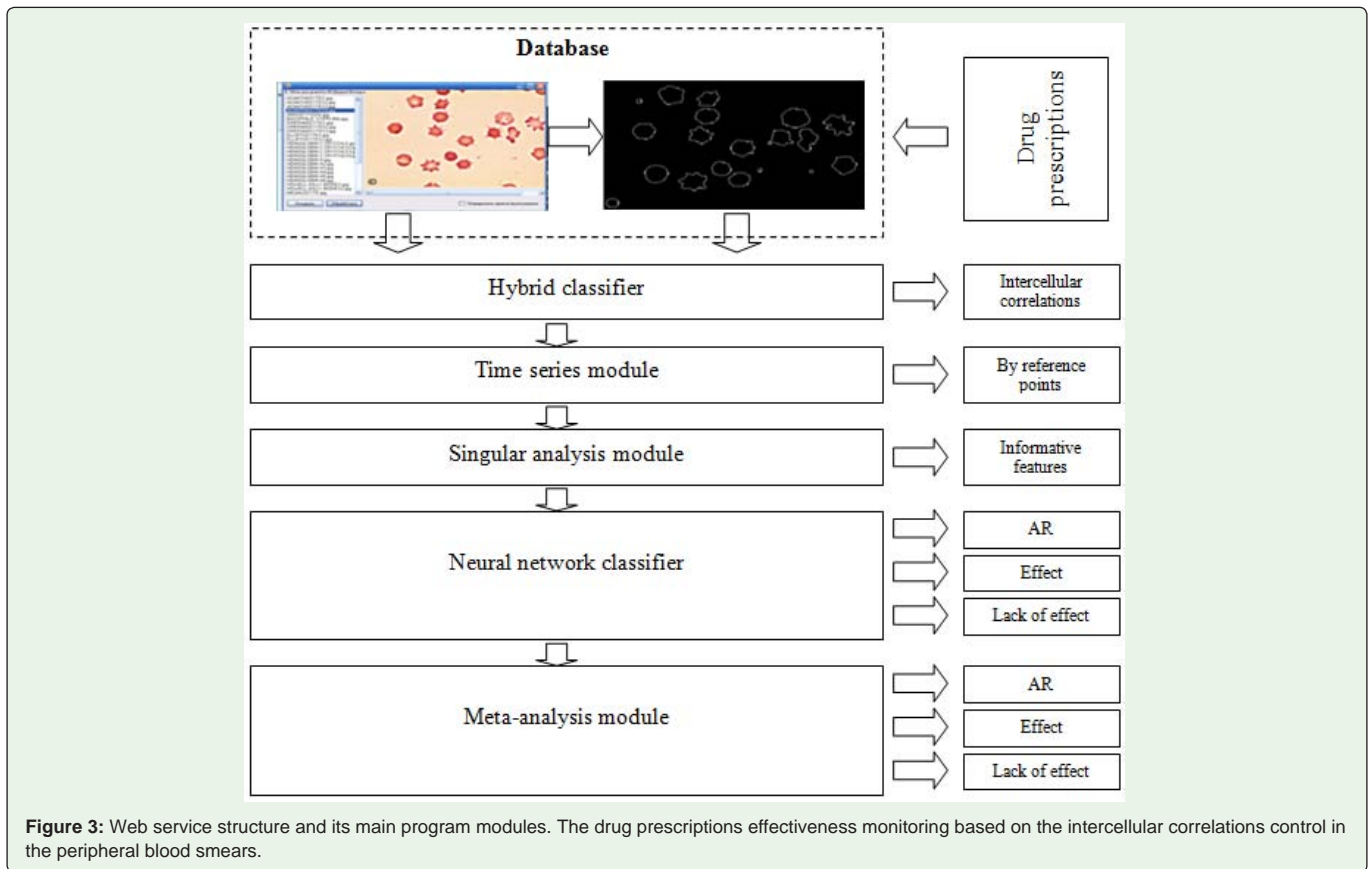


Figure 2: The structure of the Web service and its main modules.



provide him with information about surrogate markers measured in the course of control actions based on the application of the web service software. The information, which has been researched in the process of research, makes it possible to evaluate the dynamics of the functional state of a living system (for example, a person) in the process of controlling influence on it. Thus, the chain is realized: pathology - therapeutic procedure - surrogate marker - meta-analysis. Developed software for the interior designed to work with the web service, which are the manager of both the distributed database and the community of interiors.

An Example of Implementing a Web Service

As an example, consider a Web service that allows you to monitor the effectiveness of medicinal prescriptions based on surrogate markers obtained by monitoring intercellular relationships in peripheral blood smears [3,8-11].

The structure of the Web service that provides meta-analysis of microscopic images of peripheral blood smears and storage of information about the form of medicinal effects and blood elements involved in the development of pathological conditions is shown in Figure 2.

Software modules for implementing the proposed algorithmic solutions are presented in the structure of the Web service in Figure 3.

Web service software implements algorithms for determining intercellular relationships in peripheral blood; monitors the dynamics of intercellular relationships on microimages of peripheral

blood smears; identifies erythrocytes, leukocytes, platelets and rosette structures [10,12,13].

The task of the module “Hybrid classifier” (Figure 3) consists in the analysis of intercellular relationships in the smears of peripheral blood on the aperture of therapeutic procedures. The next module constructs a time series, which allows one to evaluate the evolution of intercellular relationships during the therapeutic intervention, taking into account a possible lag, for example, through singular analysis modules and a neural network classifier. Analysis of the results of classification of time series of blood characteristics in different experiments from different data sources makes it possible to evaluate the meta-analysis module.

To analyze the dynamics of intercellular relationships in the web service software, it is necessary to add target selection procedures, that is, those organs to which the therapeutic effect is directed, and reference points that establish intercellular correlation analysis intervals, distributed database management tools, and meta-analysis of the effectiveness of drug prescriptions.

To ensure the operation of the module you need a user interface, a software package for digital image processing, a database. The structural scheme of the functional interaction of the module with these software products is presented in [8-10,14].

Formed elements of blood were classified according to two independent groups of symptoms. The first group includes color indicators; to the second - the geometric parameters of the elements (size and shape). Therefore, the classification algorithm is based on a

Table 1: Initial data for clusterization by indicators of laboratory analysis of capillary blood.

Index	BPH	PCa	Date				
			07.02	15.03	05.05	28.06	14.08
Eosinophils,%	2,4	0,6	1	4,4	2	3	5
Lymphocytes,%	36	24,9	29	27,6	30	30	33
Monocytes,%	7,1	5,1	9	11,7	9	6	10
ESR, mm / hour	5,5	20,4	10	9	10	6	8

hybrid principle that takes into account both the geometric and color characteristics of the blood elements [3,8,9,11,14-16].

As an example, we will give an overview of the effectiveness of medicinal prescriptions in patients with prostatitis. The mean values of the leukocyte blood counts in healthy individuals, patients with benign prostatic hyperplasia and prostate cancer are given in [17]. In this case, the set of values of indicators for each group of surveyed persons can be taken as the corresponding class of objects. In a multidimensional space, each of these classes has its own point.

According to the indices of the leukocyte formula of blood and ESR of the diagnosed patient, it can be attributed to the corresponding class. In this case, the criteria for assigning to one or another group will be the distance in the multidimensional space between the diagnosed point and the point corresponding to one of the classes - the "center of the class", and the criterion for the effectiveness of medicinal prescriptions will be the dynamics of this distance change to the class of "HEALTHY".

During the treatment, the totality of the parameters of the leukocyte blood formula and the ESR of the diagnosed patient will change. The movement of the point of the diagnosed patient towards the point corresponding to the image of healthy patients indicates the effectiveness of the treatment. It should be noted that different rates of movement of the point of the diagnosed patient to the image of healthy persons will correspond to different methods of treatment.

If C2 is the distance between the points corresponding to the image of prostate cancer and the point of the diagnosed patient, and C1 is the distance between the points corresponding to the image of benign prostatic hyperplasia and the point of the diagnosed patient, then the higher the value $D = C2 / C1$, the closer the patient is diagnosed to the appearance of benign prostatic hyperplasia.

Initial data: the basis for conducting a cluster analysis, laboratory studies of capillary blood are given in Table 1.

Cluster analysis was performed on the basis of the technique [12,13,18], the results of calculations of the distances in the feature space are given in Table 2.

An increase in the value of the coefficient D indicates the effectiveness of the treatment.

Table 2: Intercluster distance calculation D.

№ p/p	Date	D
1	07.02	1,47
2	15.03	1,14
3	05.05	1,7
4	28.06	2,51
5	14.08	2,67

Conclusions

Scientific and technical results can be used in the clinical diagnosis of various diseases, the formation of atlases of reference images of blood cells in the process of medicinal action on them. By providing appropriate services to a remote user, the web service builds up its own database of images of peripheral blood smears, which is used both for obtaining (learning) the decision modules of its own software, and for providing training services for classifying or diagnostic models of the remote user. Using the possibilities of working with remote users, the web service will provide for its database information about the effect of the medicinal effect on the value of intercellular relationships and the blood constituents involved in the development of pathological conditions.

The obtained results are potentially in demand by both medical institutions and educational institutions; organizations Scientific and technical results can be used in the clinical diagnosis of various diseases, the formation of atlases of reference images of blood cells in the process of medicinal action on them. By providing appropriate services to a remote user, the web service builds up its own database of images of peripheral blood smears, which is used both for obtaining (learning) the decision modules of its own software, and for providing training services for classifying or diagnostic models of the remote user. Using the possibilities of working with remote users, the web service will provide for its database information about the effect of the medicinal effect on the value of intercellular relationships and the blood constituents involved in the development of pathological conditions.

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