

# NA4 biomed status report



EGEE (EU IST-2003-508833 project) – Networking Activities 4: biomedical applications

# **Physical Resources**



#### LDAP server at CC-IN2P3

• vo-biome.in2p3.fr:389/636 (with ssl), Base DN: o=biomedical,dc=lcg,dc=org

#### Resource Broker

- Production: CNAF (egee-rb-01.cnaf.infn.it), IFAE (lcgrb02.ifae.es)
- Test and backup: UPV (xperseo.dsic.upv.es)

#### RLS

- Production: CC-IN2P3 (under configuration and testing)
- Temporary: CNAF (datatag2.cnaf.infn.it)
- UI: 5
  - LPC, CC-IN2P3, UPV, IBCP (GPS@ portal), CNB
- CE: 8
  - LPC (2), CC-IN2P3, CGG, UPV, CNB, SCAI, LAL
- WN: 168 (334 CPUs)
  - LPC (72), LPC (50), CGG (4), UPV (10), CNB (8), SCAI (14), LAL (10)
- SE: 0.9 TB (+10 TB coming soon)
  - . LPC (2), CC-IN2P3 (1), CGG (1), UPV (1), CNB (1), SCAI (2), LAL (1)

# Still missing services



- MPI enable nodes accessible to the biomed VO
  - CNAF announced availability within the week
- Short queues for short jobs (penalizing for several apps)
  - Latency induced by the resource broker (difficult point)
  - Having dedicated resources to process short jobs (installation problem)

#### Service certificate

- Authentification of a service giving an "anonymous" user the ability to run a restricted number of jobs on behalf of the service
- Not a problem anymore? Accepted policy in several US CAs.

#### Stable RLS service

It seems that HEP is experiencing problems with the RLS service too

### Interactivity handling

Firewalls are often preventing connection between WNs and the UI.

### Fine grain security

- File access control. Encryption. Anonymization.
- Will soon become critical to enlarge the community of medical users.

# Midterm vital issue: Security



- Security should be addressed to expect a strong and widespread involvement of the Biomed community and more especially industrial/pharmaceutical partners.
- Interaction between JRA1 and JRA3 is not really clear
  - How the JRA3 recommendations and the security architecture will be deployed/implemented?
  - 'fine grain' security capacity is mandatory to have real clinical deployments and use.
- VOMS looks to be able to help us to have a better management of the BioMed VO, and a 'fine grain' security level.
  - Could we be assured that a VOMS server will be deployed for the BioMed VO?
  - Which CIC centre will do it?

## **Demonstrations**



- The Hague, November 22-26
  - gPTM3D
  - CDSS
  - . GPS@
  - What is the demonstrations agenda?
- EGEE review
  - GPS@ as the primary demonstration (genomics, largest user community)
  - CDSS as a fallback (diagnosis assistance)
  - or both!?
- gLite demonstration?
  - UPV has developed a volume rendering application (based on the virtual human dataset) on gLite

## Biomed task force



## Leadership

Christophe Blanchet

## Objectives

- prepare for the review
- application oriented support

## Members

- 5 project engineers
- 1 SA1 correspondent per application developer (TBC today)

## Actions

- applications plan with steps and milestones
- meeting and deviations tracking
- training (on LCG2)

# First demonstrations roadmap



### CDSS

- October: packaging (RPMs) and deployment on 3 sites (UPV, CNB, LPC).
- November: consolidation (first scenario and deployment at CC-IN2P3).
- Until review: add more services (search engines) and clinical usecases.

### • GPS@

- October: use RLS to distribute replicate biomed databases on several SE. Test GFAL for accessing registered data.
- The Hague: test short queues CEs (performance). Demonstration scenario. Deploy on 5 sites with 5 to 10 CPUs each (CNB, UPV, CC-IN2P3...).
- December: Improve results visualization. Make some scale testing.
- Until review: Test compound jobs. Add processing algorithms.

### gPTM3D

- will be finalized next week.
- The Hague: require 20 CPUs.
- Later: widespread the applications in hospitals (where the non-gridified version is already available).

# **Next meetings**



- Task force next face to face meeting and training
  - November 3-5, at CERN
  - Conflict with LCG2 activity, proposed date: 9-11 November
- The Hague meeting
  - Task force
  - NA4 BioMed
  - NA4-SA1 joint group