



Enabling Grids for E-
scienceE

Grids in Biomed Community

NA4 Biomed

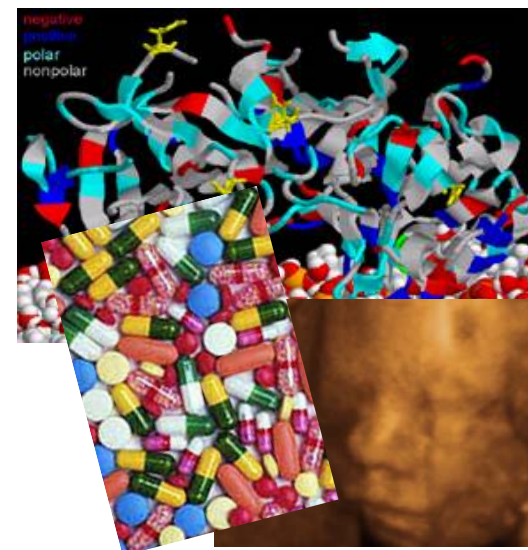
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- **The Grid is Currently Used in Biomed to Solve the Problems of Both Large Computational Needs and Large Scale Data Management.**
- **The Grid is Being Applied in Different Areas:**
 - Biocomputation, for the Simulation of Biomolecular Physics and the Analysis of Genomics (GPS@, CaBIG, WISDOM, BioGRID, INFOGENMED, GenoGrid,...).
 - Medical Imaging, for the Creation of Distributed Virtual Repositories of Radiology Information and Processing Tools (MAMMOGRID, BIRN, MEDIGRID, TRENCADIS, GPTM3D, IXI,...)
 - Epidemiology, for the Consolidation and Processing of Large Population Databases and the Extraction of Knowledge (eDIAMOND, DATAMINING-grid).
 - Biomedical Simulation, for the Computation of Large Complex Physiological Models (GEMSS, GATE, gCAMAEC, CROSSGRID).
- **The Users are:**
 - Researchers: Clinics (BIRN, MAMMOGRID, GATE, GEMSS, GPTM3D,...) and Biologists (GPS@, CaBIG, WISDOM,...),
 - Industry: Pharmaceutical Companies (Not in an Open Grid, e.g. NOVARTIS).



- **Benefits for Biomed:**

- For Clinical / Biologist Researchers
 - Not Autonomous in Computational Power (Pharmacokinetics, GPS@, GPTM3D, XMIPP,...)
 - Set-up of Large Shared Distributed Repositories (SRM-DICOM, MAMMOGRID,...)
 - Speed-up Obtaining Research Results and Larger Tests (WISDOM,...).
- For the Industry
 - Proof of Concept for Application to be Deployed on Corporate Grids.
- For IT Researchers
 - Test Multi-domain Difficulties.
 - Develop Applications on Top of a Working Infrastructure.
 - Run, Test and Evaluate Performance.

- **Opportunities for EGEE / Biomed:**

- Biobanks and Screening Programs.
- Convergence of Bio-computing and Medical Informatics.
- Novel Applications Emergence.
- The Consolidation of Standards CEN/TC 252, VITAL, EN13606, DICOM, HL7, ICD, SNOMED,...



- **Grid Technology Barriers**
 - Reliability (Prevents from Daily Practice and Makes Users Reluctant)
 - Used to Reliability in Resources and 24x7 Activity.
 - Still Single Points of Failure or Non-Automatic Reconfiguration.
 - Privacy
 - Conflicting International Regulations on Patient Data.
 - IPRs for Data.
 - Provenance
 - Repeatability and Data and Process Provenance.
 - Interfaces and Configuration
 - LCG / gLite are Wide-Spectrum Grids. Balance Customisation, Performance and Development Efficiency.
- **Biomedical Technology Barriers**
 - Standards
 - Incompatibilities Among Standards and Coding in Progress.
 - Involvement of Hospitals and Medical Research Centres
- **Industry Barriers**
 - The Grid Business Model
 - Reluctance on Sharing.



- **HealthGrid Association (www.healthgrid.org)**
 - White Paper on HealthGrids.
 - SHARE Technical Annex.
 - HEALTHGRID Proceedings 2003 / 2004 / 2005.
- **Pharmagrid - PRISM Forum (www.pharmagrid.com)**
- **EGEE Applications (<http://egee-na4.ct.infn.it/biomed/index.php>).**
- **Project Specific Information (BIRN, MEDIGRID, GRID-IT, GEMSS, DATAGRID, INFOBIOMED, INFOGENMED, ...)**
- **Other Documents:**
 - White Paper “Synergy between Medical Informatics and Bioinformatics: Facilitating Genomic Medicine for Future Healthcare”.
 - Information Society Technologies (IST) Work Programme 2005-06.
 - Action Plan for a European e-Health Area.
 - Bulletin of the World Health Organization 2000.