

Digitalization as the Basis for the Automation of the Treatment Process

Borovik V.S.^{1,*} Borovik V.V.²

¹Volgograd Scientific and Technical Center, Volgograd, Russia

²State Public Institution of the Volgograd region "DAR", Volgograd, Russia

*Corresponding author. Email: borovikv@mail.ru

ABSTRACT

The public health crisis and the pandemic threat have shown the urgent need to improve the management and implementation of medical care. Digitalization is seen as an effective tool for managing the disease treatment process. The problem is solved on the basis of the influence of factors x on the target indicator Y . The aim of the study is to improve the efficiency of treatment process management based on digital models. To achieve this goal, one needs to solve the following tasks: 1. To develop a methodology for building a strategy for managing the treatment process based on a digital model. 2. Visualize the implementation of a treatment strategy based on a digital model. For modeling, statistical information is used that reflects the values of factors and patient targets, using multivariate correlation and regression analysis. On the example of a digital model of a patient, a systematization of a set of numerical values characterizing the patient's condition for the corresponding disease has been carried out. It is shown that the visualization of digital information in projections with numerical marks provides the necessary effective communication between the user and the computer and allows you to make unambiguous decisions in determining and implementing the treatment process management strategy. This creates the prerequisites for automating the research process in the treatment of diseases.

Keywords: digitalization, management of the treatment process, visualization

1. INTRODUCTION

World Health Organization (WHO) formally recognizes COVID-19 coronavirus outbreak as a public health pandemic. The public health crisis and the pandemic threat have shown the urgent need to improve the management and implementation of medical care. The number of infected exceeded million people. The damage to the global economy from this disease has exceeded \$ 1 trillion (1). The public health crisis and the pandemic threat have shown the urgent need to improve the management and implementation of medical care (2, 3).

According to Stephen Morse, a Professor at Columbia University's school of public health, the new drugs development requires a huge amount of time and resources (4). The lack of understanding of the mutation mechanisms naturally leads to the inability to create an adequate vaccine that would be able to develop immunity to this disease. Therefore, treatment of the disease does not always lead to a successful and quick result. Available medications may produce different effects, or may appear useless (5, 6). Research shows that the development of the scientific analysis experience with the analyzed parameters is a powerful incentive to achieve the benefits of using information technologies.

It is noteworthy that the Cambridge University has established the center for mathematical visualization in

healthcare (CMIH). The centre was created after announcing a £10 million investment in five new UK research centres. The goal of these centers is to study how mathematics and statistics can help clinicians solve serious health problems (7).

2. SETTING GOALS AND OBJECTIVES OF THE STUDY

The complexity and special responsibility of the tasks to be solved in the field of health implies the mandatory need for a research approach to their solution. Digitalization is a powerful tool for solving research problems (8). "As we move toward more personalized, predictive, accurate healthcare, this data will be key... Continuous collection, analysis, and use of data on the health status of patients and the population can accelerate significant improvements in the delivery, measurement, and improvement of medical care" (9).

It should be noted that digitalization is currently limited to obtaining information for storing and receiving medical data of patients, remote monitoring of medical care, expanding the ability of patients to use information related to the provision of medical care, combining with data from other information sources, etc. (10-12).

In particular, the "Digital patient" model. The project is based on building virtual personal models of anatomical

structures and functions of the patient's organs and tissues based on data from medical images, functional and laboratory studies. The new project will provide an individual research approach to diagnosis, planning and control of treatment. To implement the project, hardware and software systems are used for entering, processing and storing diagnostic information, providing visualization, processing and analysis of two-dimensional, three-dimensional, dynamic and multidimensional parametric images (10, 13).

Elements of fuzzy logic, genetic algorithm, artificial neural networks, and neuro-fuzzy hybrids are used to solve medical diagnostic problems (14). However, the use of fuzzy logic is limited by the impossibility of mathematical analysis of fuzzy systems by existing methods. In addition, the use of a fuzzy approach, in comparison with the probabilistic approach, does not lead to an increase in the calculations' accuracy. Digitalization is not limited to using a computer to improve the processing, storage, and visualization of information. This is a necessary, but only the initial step of digitalization. An important problem is not only the use of a computer as a research tool, but also the use of information technologies to improve the effectiveness of medical management (15, 16). It is necessary that these technologies accompany all the main stages of the treatment process from diagnosis to the practical implementation of the treatment strategy. This requires digital models of diseases, medications, and patients.

The aim of the study is to improve the efficiency of treatment process management based on digital models.

To achieve this goal, one needs to solve the following tasks:

1. To develop a methodology for building a strategy for managing the treatment process based on a digital model.
2. To illustrate the implementation of a strategy based on a digital model.

3. DEVELOPMENT OF A METHODOLOGY FOR BUILDING A STRATEGY FOR MANAGING THE TREATMENT PROCESS BASED ON A DIGITAL MODEL

Digitalization has been widely used, first of all, in the development of a strategy for the development of processes and their monitoring. A strategy is understood as a plan of actions coordinated in space and time, aimed at achieving the main goal in a special way. If there are no sufficiently accurate forecast calculations, therefore, it is impossible to clearly formulate a goal, and therefore it is impossible to develop an effective strategy.

One of the first stages of calculating a digital model, for example, of a patient, is to systematize a set of numerical values that characterize the patient's condition for the corresponding disease (17, 18, 19). For example, the results of analyses for a certain period. As a result of calculations, the correlation between factors x (analysis

results) and the target indicator Y , which is characterized by the patient's health status, is established. In general, the task is to influence the x factors to achieve the desired result of the target Y . Statistical information from research materials that reflect the values of x factors and patient's y targets can be processed using, for example, a multivariate correlation and regression analysis. Then it is advisable to use a function, for example, of the following

$$Y = C_0 \prod_{i=1}^n x_i^{\alpha_i} \text{ . Where } Y \text{ is a target index; } x_i, i = \overline{1, n}$$

factors influencing Y ; $\alpha_i, i = \overline{1, n}$ degree indicators that characterize the "contribution" of x_i into Y ; C_0 – coefficient. Let's consider a digital model based on the specified function, for example, of the following form:

$$Y = 1.231 x_1^{1.228} x_2^{1.602} x_3^{0.413} x_4^{0.321} x_5^{0.132} \text{ . (1)}$$

It should be emphasized that this patient model allows us to consider factors and the target indicator in a system where factors and the indicator are interrelated and interdependent. The resulting digital model (1) describes the hypersurface, which uses an analytical form to reflect the state of a particular patient under study, which makes it possible to perform various actions on this surface related to optimizing the strategy for solving a specific medical problem.

To facilitate visualization of the problem solution, we will limit ourselves to a three-dimensional model that includes factors x_1 and x_2 as having the greatest impact on Y . We use a simplified two-factor digital model of the studied patient and, giving different values for x_1 and x_2 , we get the calculated values of Y .

4. VISUALIZATION OF THE TREATMENT MANAGEMENT STRATEGY

When speaking about the strategy of a scientific problem solution we understand a synchronized plan of actions in time and space according to large groups of indicators which are determined by a definite way (innovative constituent) and which provides the achievement of the main goal on the basis of adequately used conditions and means (20).

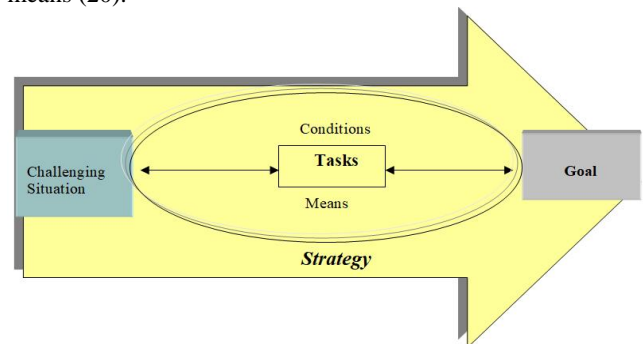


Figure 1 Management diagram on the basis of a strategy
The need to solve a complex problem is associated with the emergence of a problem situation (Fig.1). Objectively,

the occurrence of a difficult situation is determined by the process of the development of the disease and progress. To find a solution to a difficult situation, it is necessary that each finite set of existing factors A have an appropriate finite set of necessary factors B that provide a solution to the problem. Then we can write a mathematical expression as follows:

$$A \sim B, \tag{2}$$

If sets A_n do not intersect, so

$$A_n \cap A_{n'} = \emptyset \text{ at } n \neq n', \tag{3}$$

And sets B_n also do not intersect, i.e.

$$B_n \cap B_{n'} = \emptyset \text{ at } n \neq n'. \tag{4}$$

For all n $A_n \sim B_n$. Then every has

$$a_0 \in \bigcup_{n=1}^m A_n \tag{5}$$

A corresponding unique element

$$b_0 \in \bigcup_{n=1}^m B_n. \tag{6}$$

If every element from the set A according to a certain rule can be related to one and only one element of the set B and at the same time every element from the set B will be related to one and only one element from the set A then

$$\bigcup_{n=1}^m A_n \sim \bigcup_{n=1}^m B_n. \tag{7}$$

Achieving a one-to-one correspondence (7) through the implementation of a number of measures that may be related to solving a problem may indicate that the problem situation has a solution.

5. RESULTS AND DISCUSSION

The obtained values (1) for the two-factor digital model allow you to build a three-dimensional surface, for example, Fig. 2, which can be used to search for a management strategy, for example, achieving a set value of Y (7).

Curves $1Y$ and $2Y$ are isoquants that connect the calculated points to the same values of target indicators. Curve $-2Y$ connects the calculated points with the same numerical values of the target indicator, the value of which should be achieved as a result of therapy.

As seen in Fig.2, the same value of $2Y$ can be achieved by an infinite number of combinations of x_1 and x_2 factors. For example, at the start of treatment actions, the level of target index $1Y$ is characterized by point A and its projections A_1, A_2 , and A_3 .

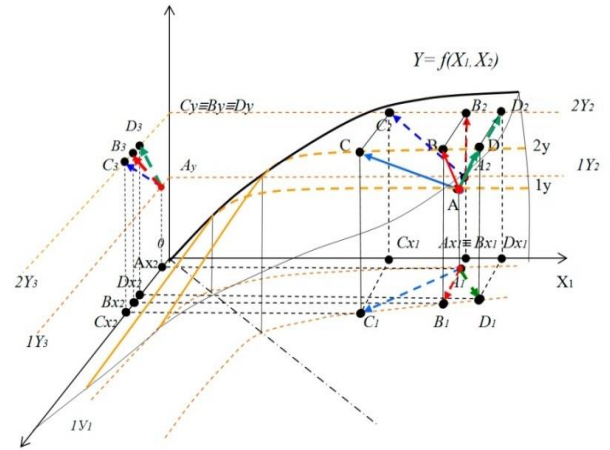


Figure 2 Three-dimensional graphical model of the implementation of the disease treatment strategy

An infinite number of treatment options can be used to achieve the $2Y$ target from point A . Let's consider three options, for example, output to B, C , and D . Each point is characterized by projections $B_1, B_2, B_3, C_1, C_2, C_3, D_1, D_2, D_3$ and $Bx_1, Bx_2, Cx_1, Cx_2, Dx_1, Dx_2$, which determine the parameters of the factors when the target value of $2Y$ is reached. As can be seen from Fig. 2, achieving the $2Y$ target is accompanied by different combinations of factor values. For example, $OCx_1 < ODx_1$, but $OCx_2 > ODx_2$.

Therefore, in the current system under study, the $2Y$ can be achieved by different values of x_1 and x_2 factors. For the implementation of therapeutic measures, depending on the actual conditions (the patient's condition, the availability of appropriate conditions, equipment and medicines, etc.), the corresponding values of x_1 and x_2 are selected. From the mathematical point of view, the best option is AB , since AB is perpendicular from point A to the overlying isoquant to the tangent at point B and is the shortest distance between the isoquants.

An illustration of the formation of a strategy for managing the medical problem solution in development is clearly seen in Fig. 3 in projections with numeric marks.

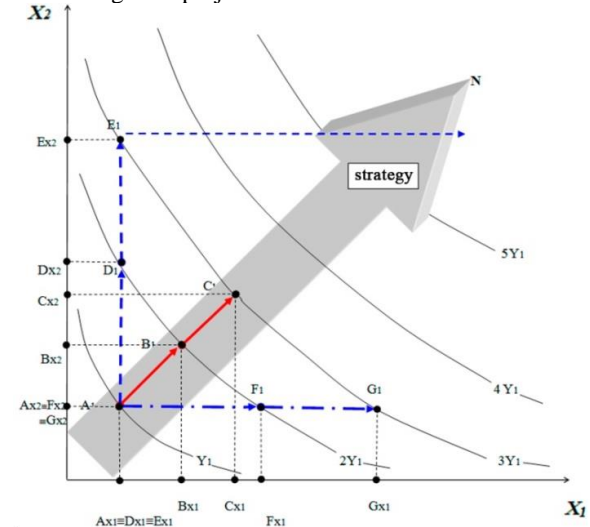


Figure 3 Direction of the treatment process strategy

There can be an infinite number of options for a management strategy. Let's describe the three in detail.

For example, the variant $A_1D_1E_1$ with constant values of the x_1 factor and a constant increase in x_2 , ultimately provides for achieving the goal N .

Similarly, the $A_1F_1G_1$ strategy can be developed. However, the direction of $A_1B_1C_1$ clearly and convincingly indicates that an effective strategy has a different direction, providing passage over the shortest distance between the isoquants.

It should be noted that the digital model implemented in projections with numerical marks also reflects the qualitative characteristics of the strategy. For example, the distance between the isoquants at the same scale for two different strategies can indirectly determine the time spent on their implementation. The smaller the distance between them, the greater steepness the digital model surface has, the more intense the influence of factors is on the target indicator, and the less time is spent on the treatment process.

Let's illustrate the consequences of avoiding the chosen management strategy. For example, in Figure 4, the operational management of $A_1E_1D_1$ retains the direction of the strategy, yet a bias is allowed, due to a significant decrease in the value of the x_1 factor, which can be seen in the parameters Ex_1 and Ex_2 .

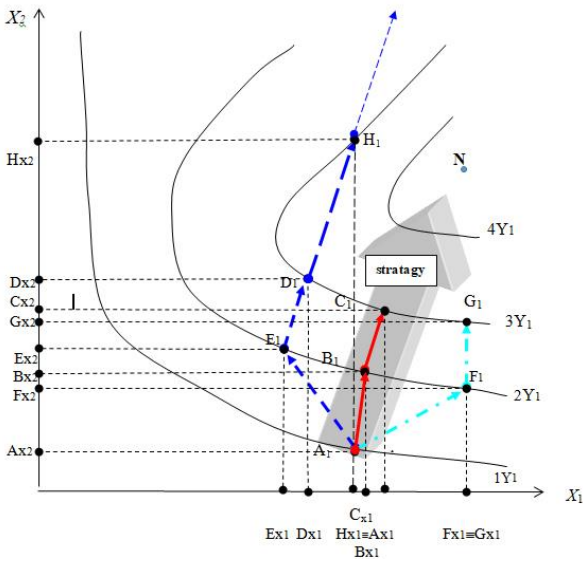


Figure 4 Visualization of the consequences of evasion from optimal strategy

The implementation of this management will not lead to the achievement of the target indicator, characterized by N point. This can be seen from the trajectory $E_1D_1H_1$. After reaching the $3Y_1$ target, despite the further increase in the x_1 and x_2 values (Hx_1 and Hx_2), the value of the target indicator increases slightly at first, and then decreases after H_1 , as can be seen in Fig. 4. In this example, the visualization of a strategy based on a three-dimensional graphical model of software can not be considered complete enough, because only two factors of the model (1), x_1 and x_2 of the five that have the greatest impact on

Y are used. For a more precise definition of the strategy, it is advisable to conduct an analytical analysis on a multidimensional model, which from the standpoint of mathematics is not very difficult, for example, (17, 21). It should be noted that the actual direction of the strategy for $A_1B_1C_1$ is determined not only by the shortest distance between the isoquants, but also by the conditions for using factors. To optimize their combination is a separate task, for example, (22, 23, 24).

The proposed approach to managing the treatment process based on a digital model, such as a patient, does not require the development of special software, since it is included in the standard set of modern computers.

According to experts at Stanford University, "biological science and technology will become even more important for our societies, and we need strategies to learn how to manage their power" (25, 26).

6. CONCLUSION

Digital models are a promising tool for unambiguous diagnosis of diseases and their effective treatment. It is established that the digital model can be used to build a strategy for managing the treatment process. This creates the prerequisites for increasing the efficiency, accuracy and automation of research activities associated with the treatment process. The digital model is formed from a set of statistical information reflecting various retrospective results of the studied processes of target indicators and factors' interdependence. Visualization of the digital model allows to illustrate the construction of various options for managing the treatment process. The optimal management strategy is determined by the accepted optimality criterion. It is shown that one of the primary tasks of digitalization is a fairly accurate and rapid numerical determination of the treatment process' prognostic results based on the results of the factors' use. Based on the retrospective information of research results that characterize the patient's condition, a multi-factor correlation and regression analysis was used to perform digital modeling that allows solving treatment problems by forming a management strategy and implementing targeted treatment methods. The proposed approach can be implemented in the development of digital models of diseases and medicines, which creates prerequisites for a significant reduction in the cost of time and money in solving health problems.

REFERENCES

- [1] WHO recognized the spread of coronavirus as a pandemic, Electronic resource, 25.02.2020.
- [2] H. Holden Thorp, The costs of secrecy. Science. February 28, 2020:T. 367, Issue 6481, P. 959. DOI: 10.1126 / science.abb4420.

- [3] Daniel Wrapp, et al. Cryo-EM structure of the 2019-nCoV spike in the prefusion conformation. Daniel Wrapp, Nianshuang Wang, Kizzmekia S. Corbett, Jory A. Goldsmith, Ching-Lin Hsieh, Olubukola Abiona, Barney S. Graham, Jason S. McLellan. *Science*. Early First Release. WED 19TH FEB 2020.
- [4] Lawrence Corey, et al. A strategic approach to COVID-19 vaccine R&D. Lawrence Corey, John R. Maskola, Anthony S. Fauci, Francis S. Collins. *Science* 11 may 2020: EABC5312. DOI: 10.1126/science.abc5312
- [5] Coronavirus with comments from professionals, Electronic resource, 02.02.2020.
- [6] Kai Kupferschmidt, Jon Cohen. Will novel virus go pandemic or be contained? *Science*, Fri, 07 Feb 2020. Vol. 367, Issue 6478, pp. 610-611. DOI: 10.1126/science.367.6478.610
- [7] Centre for Mathematical Imaging in Healthcare (CMIH), Electronic resource, 02.03.2020.
- [8] V. Borovik, A. Borovik, Improving the efficiency of scientific research based on digitalization. Proceedings of the 2019 International SPBPU Scientific Conference on Innovations in Digital Economy (SPBPU IDE '19), October 24--25, 2019, Saint Petersburg, Russian Federation. ACM. DOI: <https://doi.org/10.1145/3372177.3373331>.
- [9] M. Strübin. Digital Health - MedTech Europe, from diagnosis to cure Medical technologies generate information and data that are critical for the prevention, diagnosis, treatment, monitoring and management of health, Electronic resource, 02.02.2020.
- [10] C. M. Banks, The digital patient: advancing healthcare, research, and education. Banks, Catherine M., Combs, C. Donald, Sokolowski, John A. 2016 pp. 336/331.
- [11] M. Strübin, Digital Health - MedTech Europe, from diagnosis to cure Medical technologies generate information and data that are critical for the prevention, diagnosis, treatment, monitoring and management of health, Electronic resource, 02.02.2020.
- [12] Conference 11314. Computer diagnostics. Marriott Marquis Houston, Texas, United States America February 15-20, 2020, Electronic resource, 02.02.2020.
- [13] Digital patient, Electronic resource, 02.03.2020.
- [14] Computational Intelligence in Computer Aided Medical Diagnosis» Latha Parthiban ISBN: 9783843371445: 2010/ LAP LAMBERT Academic Publishing, Electronic resource, 02.02.2020.
- [15] A.I. Emelyanov, 10 theses on automation of science management, 2019, Electronic resource 03.03.2020.
- [16] A.V. Reshetnikov, O.A. Shapovalova, Health as a subject of sociology in the study of medicine. 2008, Electronic resource 02.03.2020.
- [17] B.F. Kiryanov, M.S. Tokmachev, Mathematical models in healthcare. Monograph, Velikiy Novgorod, NovSU named after Yaroslav the Wise. pp.279.
- [18] Developing Mathematical Models in Healthcare: Special Workshop on System Dynamics. Wednesday, 27th January 2016. School of Mathematics, Cardiff University, CF24 4AG, Electronic resource, 02.03.2020.
- [19] L. Eardi, John A. D. Aston, Statistical analysis of functions on surfaces, applied to medical imaging. Posted on 08/14/2019. The EPSRC Centre for Mathematical and Statistical Analysis of Multimodal Clinical Imaging at the University of Cambridge.
- [20] Murray Eisenberg. Axiomatic Theory of Sets and Classes Publisher: Dover Classification: ISBN: 0486472213. ISBN-13 (EAN): 9780486472218. Date of publication: 08/31/200.
- [21] S. E. Champer, Computational and experimental performance of CRISPR homing gene drive strategies with multiplexed gRNAs. Samuel E. Champer, Suh Yeon Oh, Chen Liu, Zhaoxin Wen, Andrew G. Clark, Philipp W. Messer, Jackson Champe. *Science Advances* 04 Mar 2020: Vol. 6, no. 10. DOI: 10.1126/sciadv.aaz0525.
- [22] V. S. Borovik et al., Visualization during Crystallization in Minkowski Spacetime V.S. Borovik, V.V. Borovik, D.A. Skorobogatchenko *Solid State Phenomena in the year 2017* Vol.269. PP7-14. DOI: 10.4028/www.scientific.net/SSP.269.7.
- [23] B. D. Singer. COVID-19 and the next flu season. *Science Advances* Jul 29, 2020:Vol. 6, no. 31, eabd0086. Doi: 10.1126 / sciadv.abd0086.
- [24] D. B. Wayne, M. Green, E. G. Neilson, Medical education in the time of COVID-19. *Science Advances* 29 Jul 2020:Vol. 6, no. 31, eabc7110. DOI: 10.1126/sciadv.abc711

[25] M. J. Palmer, Learning to deal with dual use.
Science. Feb 27, 2020:EABB1466. PP.752 DOI:
10.1126 / science.abb1466.

[26] A. Agrawal, Bridging digital health divides.
Science 28 Aug 2020: Vol. 369, Release 6507, PP 1050-
1052. DOI: 10.1126/science.abc9295