

**mit**  
**media**  
**lab**



# OPEN TrialChain: Privacy-Preserving Blockchain Design for Diabetes Clinical Trials Using Open Algorithms

Kim, A. Milan C. Alsalamah, S. and Pentland, A.

# Agenda



- **Clinical Trials**
- **Clinical Trial Problems**
- **Type II Diabetes Case Study**
- **OPEN TrialChain Model**
- **Adopting OPEN TrialChain**
- **Challenges**



# Clinical Trials

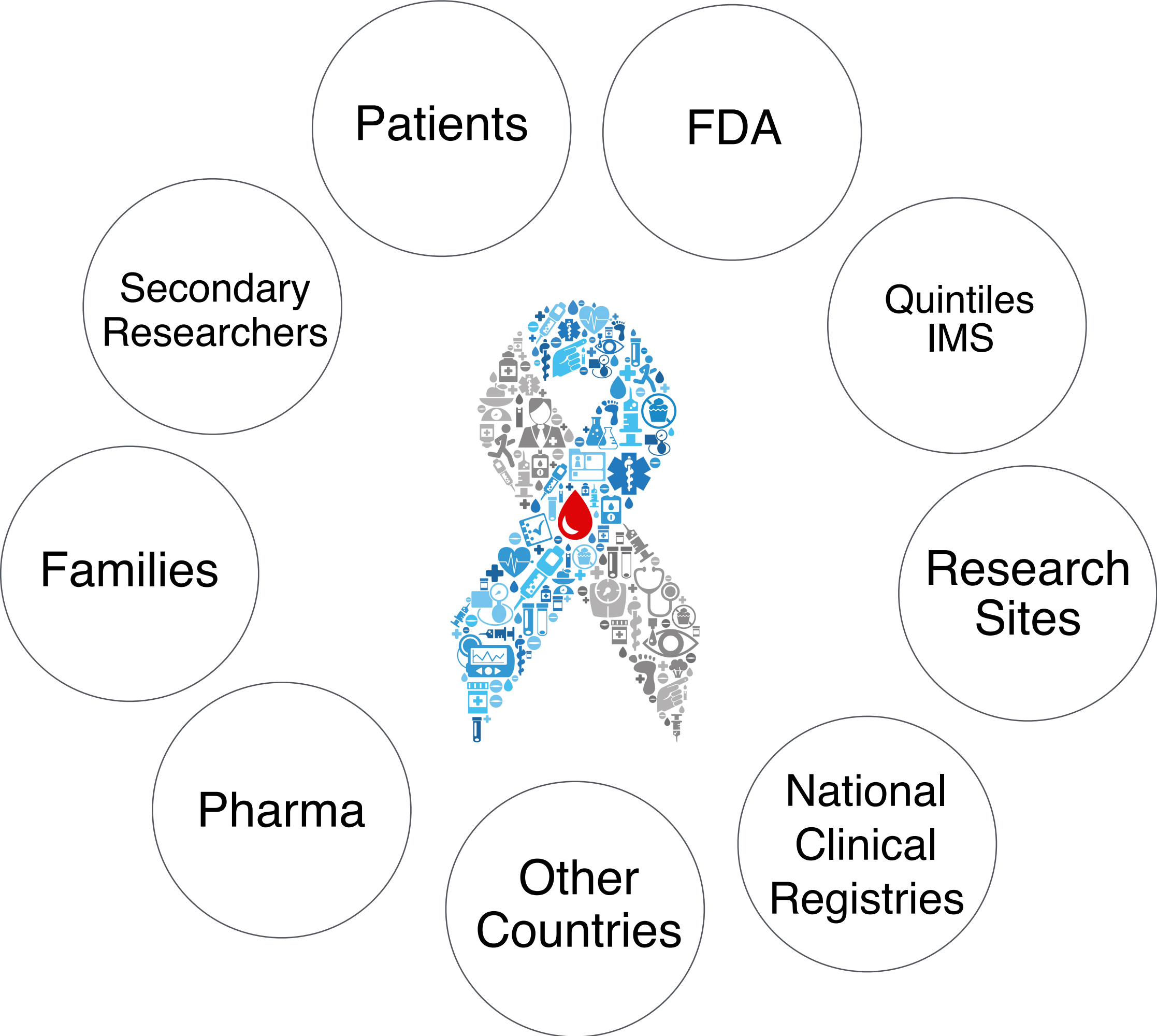


# Introduction



- ▶ Governments and pharmaceutical companies (Pharma) **spend \$100-800 millions on clinical trials** for each drug candidate, and yet up to 25-50% go **unpublished**.
- ▶ Section 801 of the Food and Drug Administration Amendments Act (**FDAAA**) of 2007 requires the **submission** of "**basic results**" for certain clinical trials,
  - The **ambiguity** of “basic results” leads to rather **scant result submissions**.
- ▶ It is in the **best interest** of **pharmaceutical** companies to **report** as little as possible
  - Gain a **competitive advantage** over other pharmaceutical companies developing drugs in the same space
  - Maintain **patient privacy**.

# Clinical Trials- Ecosystem



# Clinical Trials- Ecosystem



- **FDA:** Approve all clinical trials (but don't always enforce publication of trials)
- **Quintiles IMS:** third-party that plans the logistics of clinical trials, and are often the data owners
- **Research Sites:** physical clinics that report patient metrics
- **Other Countries:** if clinical trials are done internationally (to cut cost), countries may intervene in the exportation of the data by order of the General Data Protection Regulation (GDPR)
- **Pharmaceutical companies:** develop the drugs that are being tested. Their IP is on the line and has to be protected
- **Patients:** In the case of GDPR, they have to have revoke access
- **Secondary Researchers:** In order to learn and make retrospective studies on drug development
- **Families:** In the case of pediatric trials, families may be consulted for consent



# Clinical Trial Problems

# Clinical Trial Problems



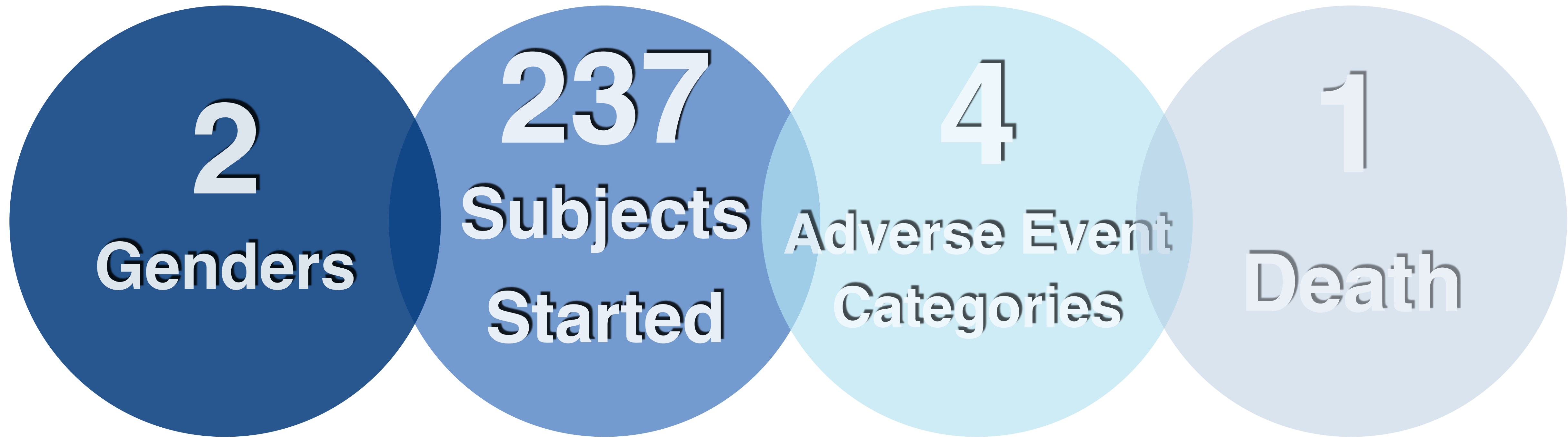
1. Pharmaceutical companies are **discouraged from publishing** their trial results as they do not want to lose ownership over it.
2. Even when they do publish, **reported results** are **very limited** for competitive advantage.
3. **Underrepresented groups** have **no significance** in the **results** of trials.
4. **Results** are **not illustrated** in a **meaningful** way because they could be cross-referenced and track it back to the subject under study resulting in **privacy invasion**.





# Case Study: Type II Diabetes in Adults

# Type II Diabetes Clinical Trials- Dataset in Adults



# Diabetes Type II Clinical Trials- Dataset in Adults



	<b>Metformin XR</b>	<b>Canagliflozin 100 Milligram (mg)</b>	<b>Canagliflozin 300 mg</b>	<b>Canagliflozin 100 mg + Metformin XR</b>	<b>Canagliflozin 300 mg + Metformin XR</b>
<b>Started</b>	237	237	238	237	237
<b>Adverse Event</b>	4	3	7	4	8
<b>Death</b>	1	0	0	0	0





# OPEN TrialChain Model

# OPEN TrialChain Model



- **What is it?**
  - It is a **Blockchain-based** data sharing **infrastructure** that uses open algorithms between stakeholders of the federation in the clinical trials ecosystem.
- **Benefits**
  - OPEN TrialChain balances between the **sharing** of clinical **data** and the need for subject's **privacy protection**.
- **How?**
  - By allowing queries on decentralized raw datasets from which returns aggregated safe answers that are blinded (i.e. anonymized).

# OPEN TrialChain- Components



## 1. *Data Providers*

- Users owning clinical trial datasets owners who monitors other's queries over their data.

## 2. *Vetted algorithms*

- Allow users to query for specific demographics across multiple clinical trials without compromising individuals' data.

## 3. *Queries Blockchain*

- A tamper-proof, time-stamped ledger for audits and monitoring purposes.
- FDA could use for study auditing.
- Stakeholders use it to allow well-informed decision making processes.

# OPEN TrialChain- Key Principles



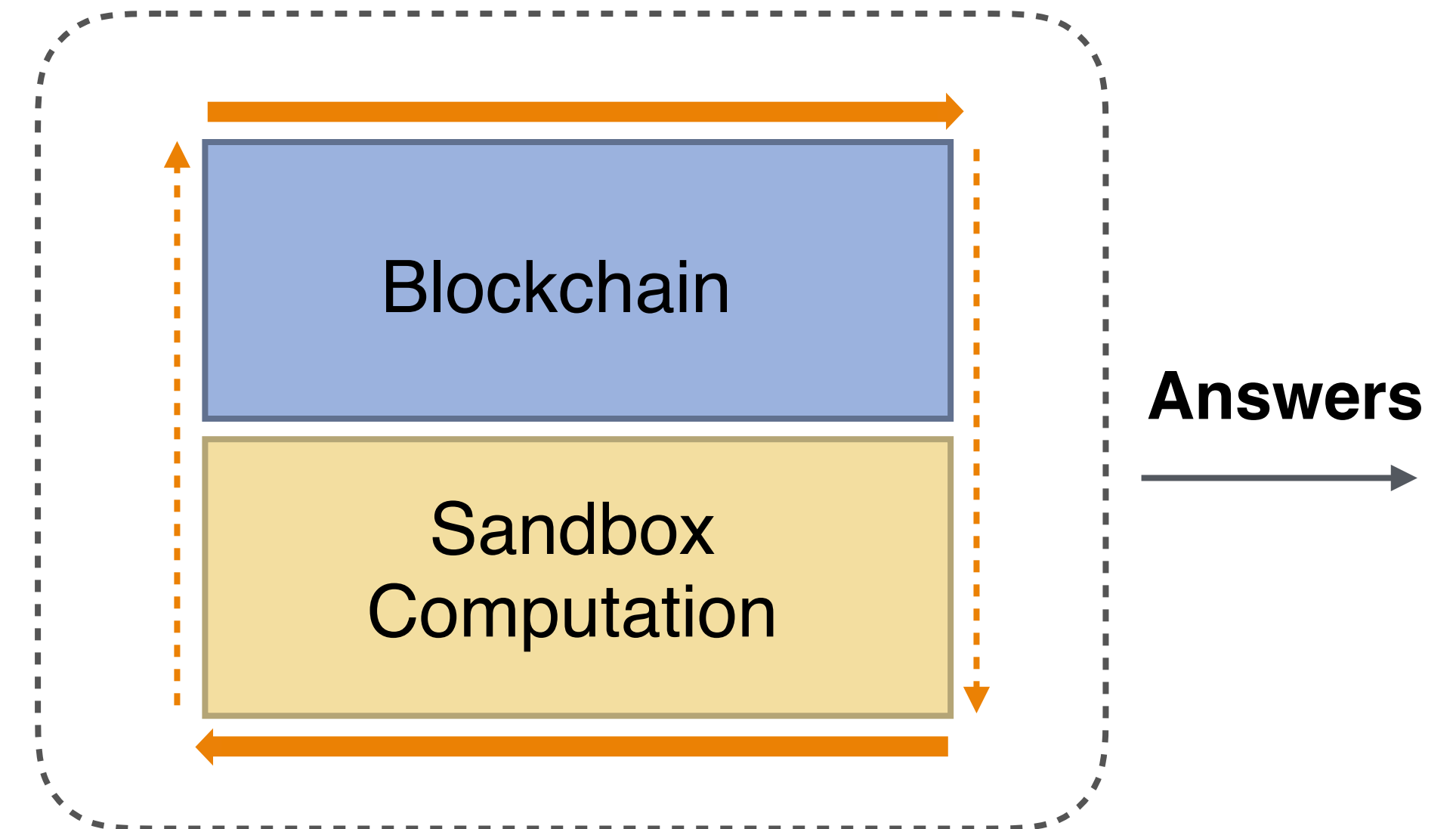
1. Keeps **data encrypted at all times**
2. Allows only **vetted algorithms**
3. Moves the **algorithm to the data**, (not vice versa)
4. Aggregates blinded data from **distributed repositories** in a decentralized infrastructure
5. Returns **“safe answers”**



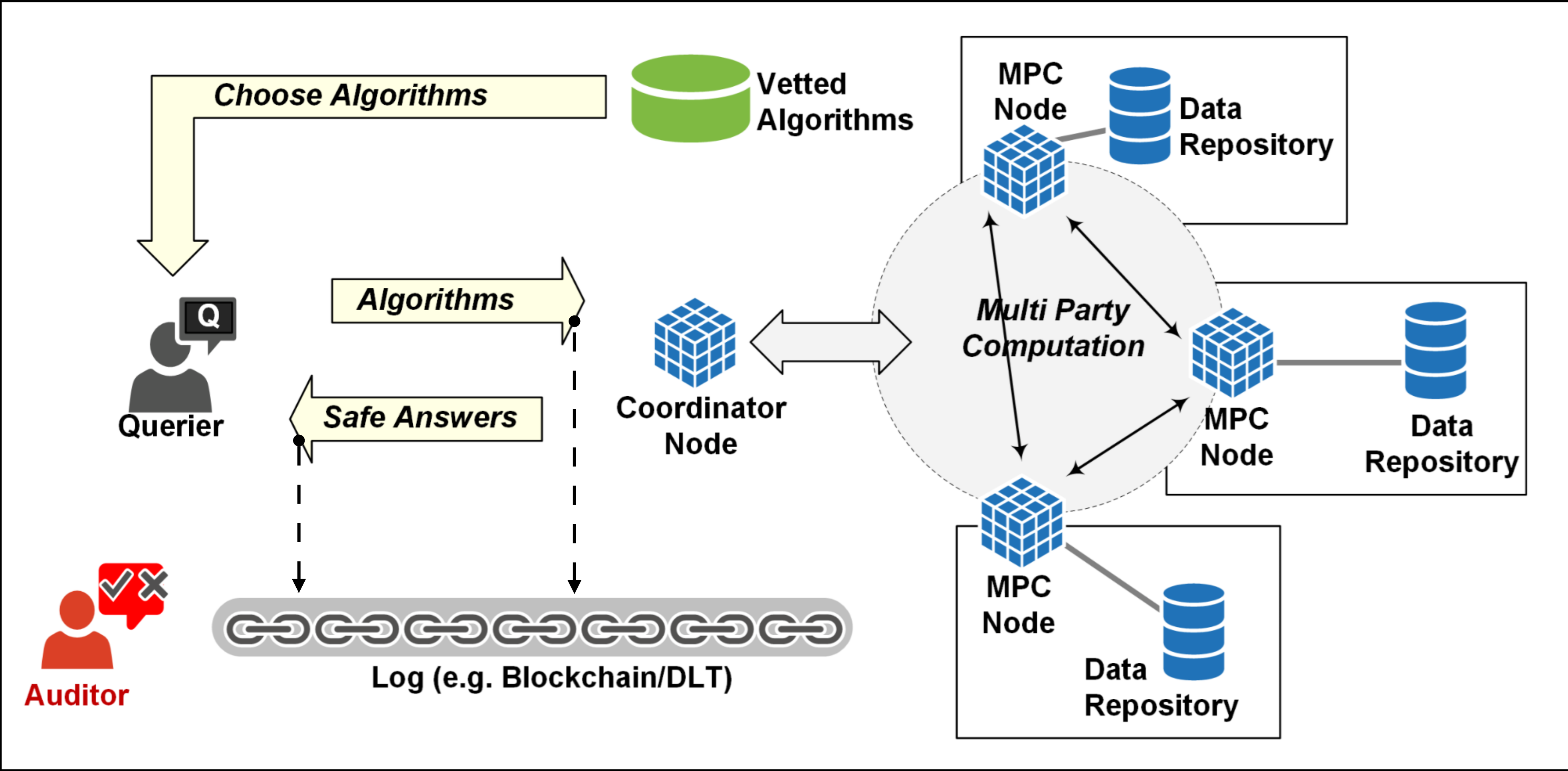
Questions



*Algorithms*  
*Identity*  
*Permissions*

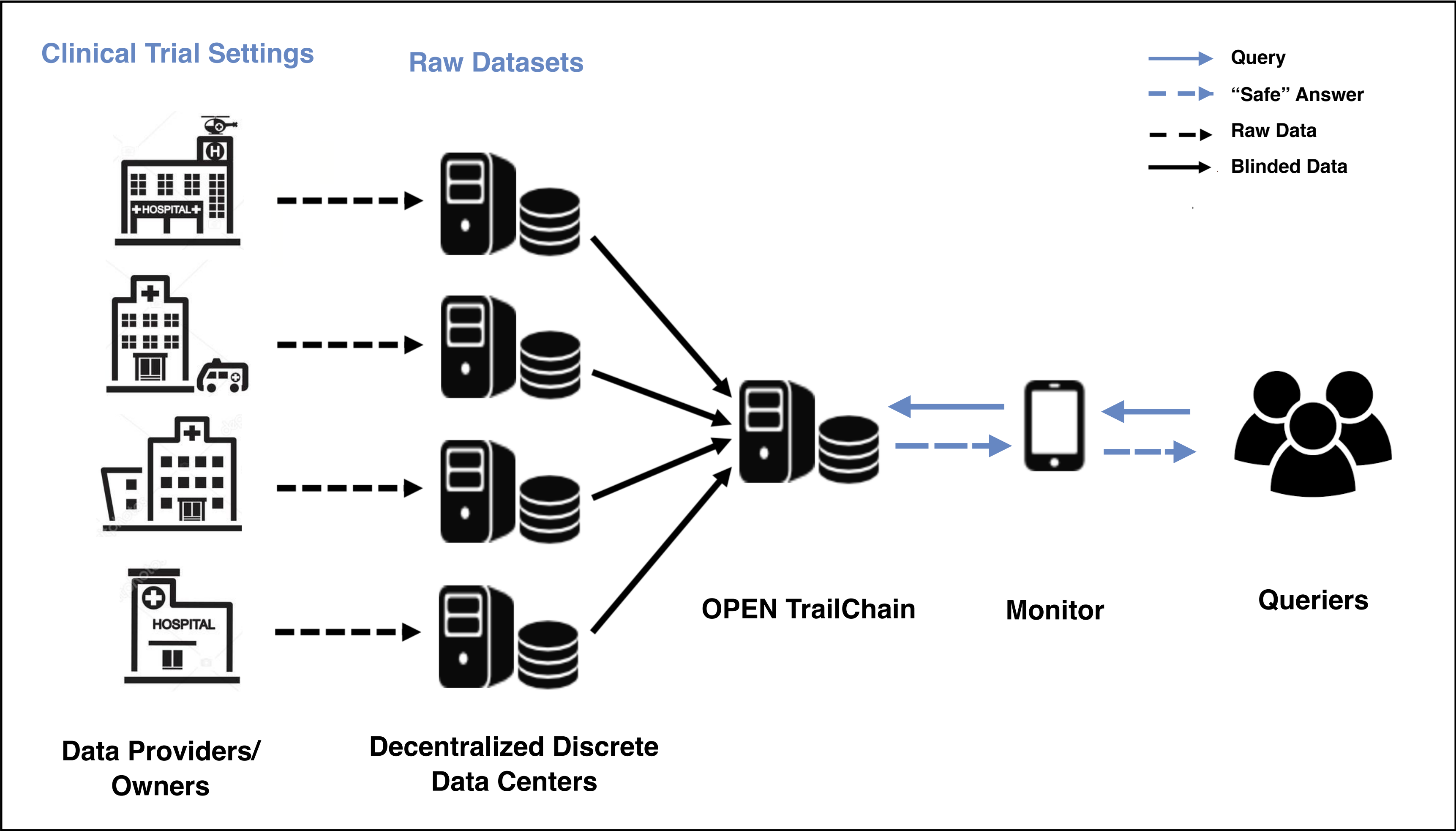


# OPEN TrialChain- Model Architecture

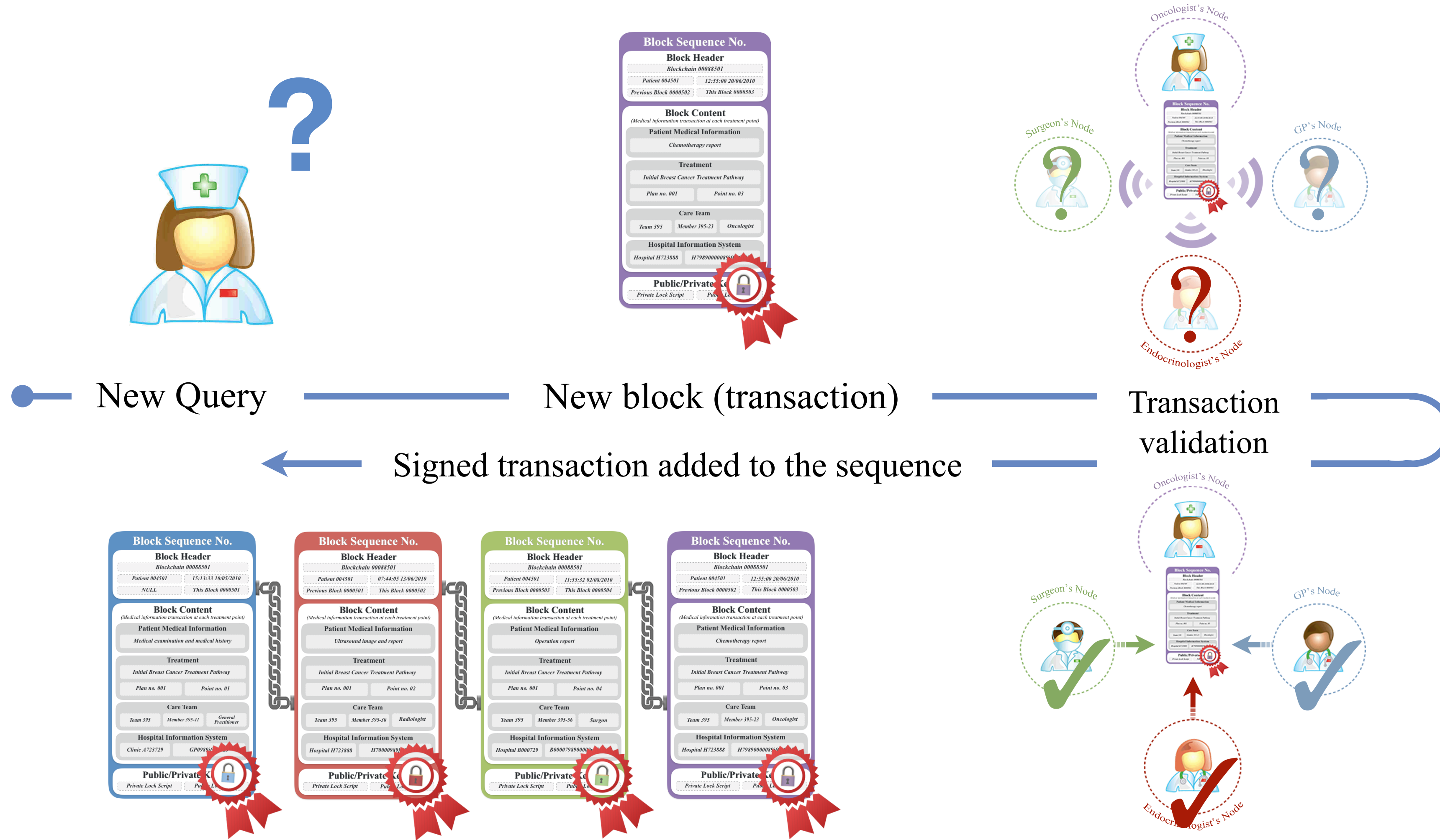




# OPEN TrialChain- Data Flow



# OPEN TrialChain- Blockchain For Clinical Trials





# Adopting OPEN TrialChain Model



# OPEN TrialChain- Potential Users



- ▶ **Doctors** - *query for information relevant to their patients*
- ▶ **FDA** - *audit the blockchain and usage of information*
- ▶ **Secondary Researchers** - *conduct primary retroactive research for other potential drug developments*
- ▶ **Pharmaceutical Companies** - *monitor the blockchain for usage of their data in user queries*

# OPEN TrialChain- In Type II Diabetes in Practice



## ▸ *User (Doctor)*

- *A doctor who has a **diabetic patient who is an African American female***
- *Although there have been many diabetes trials with immediate-release Metformin, **each trial doesn't have a very significant cohort of African American women.***
- *Therefore, the **granularity** of the studies' results is very **coarse** in order to **protect the privacy of these few patients.***

# OPEN TrialChain- In Type II Diabetes in Practice



## ▶ *Question / Algorithm*

- *What are the **adverse events** for diabetic **African American females** taking **Metformin**?*

## ▶ *Unsafe Answer*

**Detailed answers about a subject** from one clinical trial that would compromise the subject's health data.

## ▶ *Safe Answer (without OPEN TrialChain)*

**Vague answers in disjoint tables** that protect the few African American females in a single study.

# OPEN TrialChain- In Type II Diabetes in Practice



## ▶ *Question / Algorithm*

- *What are the **adverse events** for diabetic **African American females** taking **Metformin**?*

## ▶ *Safe Answer (with OPEN TrialChain)*

- *a safe answer would provide a **blinded summary statistics** (histogram or scattered plot) that illustrates the adverse events for this particular demographic.*

# OPEN TrialChain- Aggregated Safe Answer Example

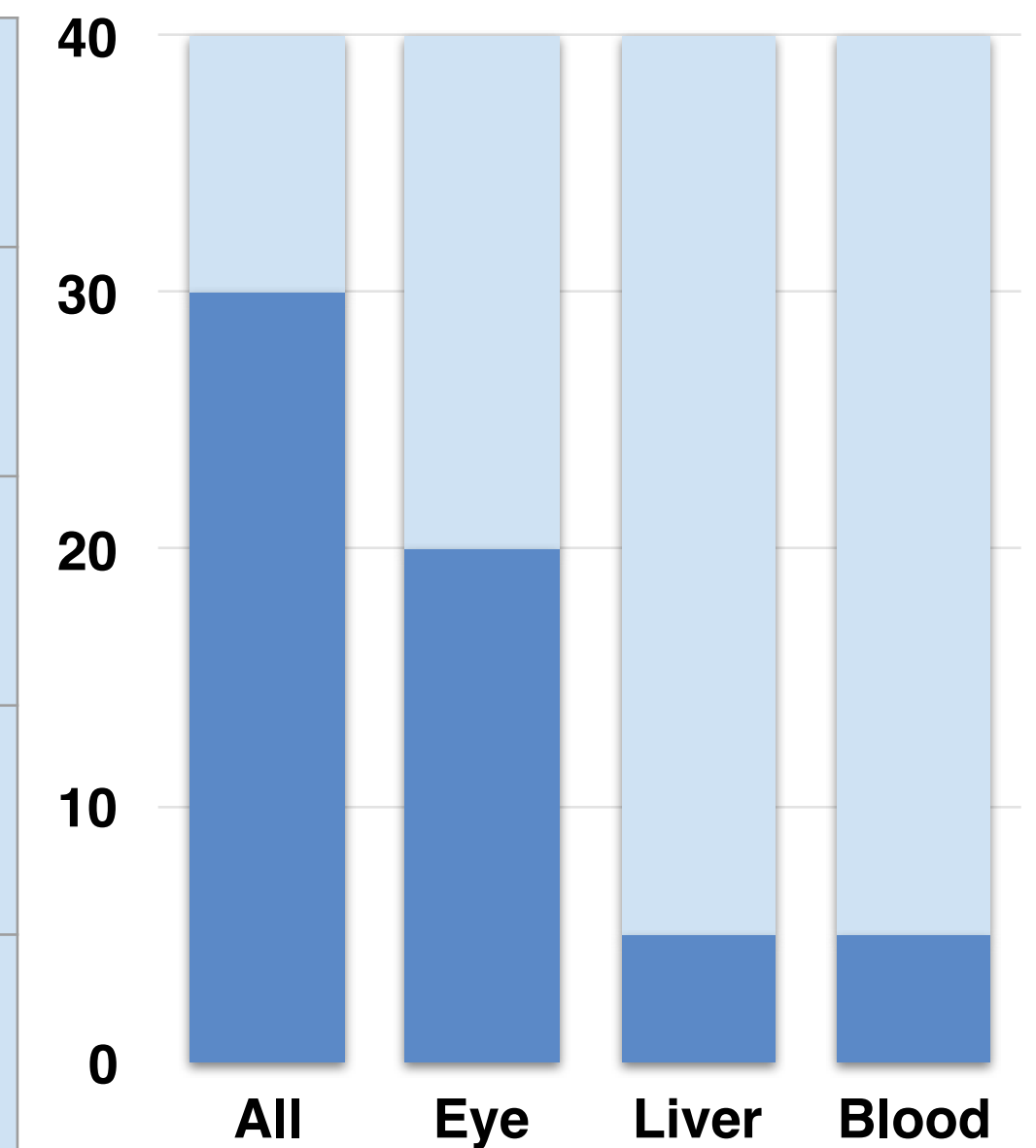


	Metformin IR	Lantus	
			Metformin IR Insulin
All Adverse Events			Metformin IR Metformin XR
	All Adverse Events		
Eye Disorders		All Adverse Events	20/120 10/121
	Eye Disorders		
Liver Injury		Eye Disorders	10/120 10/120
	Liver Injury		
Blood Glucose Increase		Liver Injury	6/120 6/120
	Blood Glucose Increase		
Study 1		Blood Glucose Increase	4/120 4/120
	Study 2		
		Study 3	

What are the adverse events for diabetic African American females taking Metformin?



	Metformin IR
All Adverse Events	30/40
Eye Disorders	20/40
Liver Injury	5/40
Blood Glucose Increase	5/40



Uninformative safe answer

Informative safe answer with OPEN TrialChain



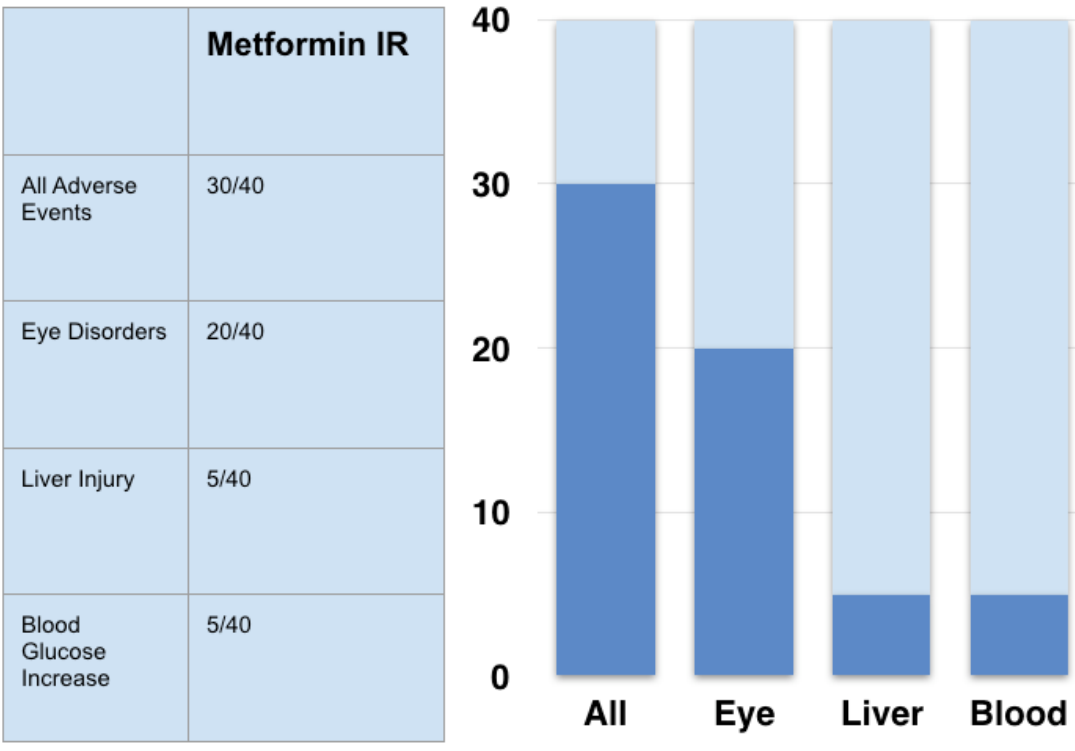
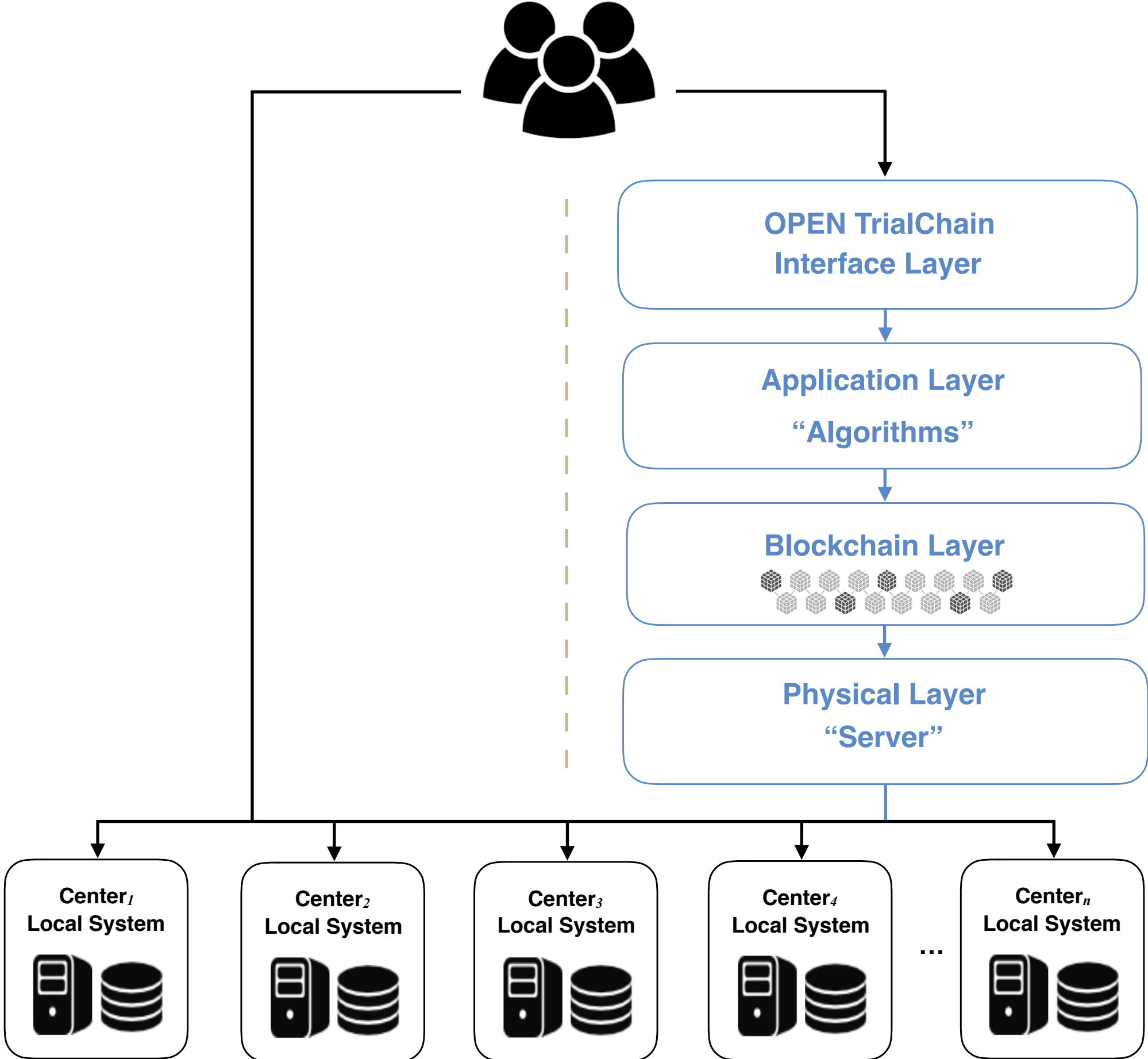


# OPEN TrialChain- Aggregated vs. Blinded Results



	Metformin IR	Lantus	
All Adverse Events	Metformin IR	Insulin	
Eye Disorders	Metformin IR	Metformin XR	
Liver Injury	Metformin IR	Metformin XR	
Blood Glucose Increase	Metformin IR	Metformin XR	
Study 1			
Study 2			
Study 3			

**Aggregated Less Informative Disjoint Table Results**



**Aggregated Informative Blinded Visual Results**



# Addressing Clinical Trial Problems

# Addressing the Problems



1. Encourages **reporting trial results** with higher fidelity **audited by the blockchain**
2. Incentives **more detailed results** in exchange for their peers' detailed results.
3. Report **safe answers** in summary statistics about the salient information (ex. effects of Metformin) without linking “unflattering” results to individual studies.
4. Returns **meaningful visualizations** that can help understand complex results and derive insights by comparing the models/diagrams.





# Impact and Challenges

# Impact on Ecosystem



- Eventually, OPEN TrialChain is expected to **optimize the clinical trial ecosystem** by
  - **improving patient safety,**
  - **saving lives,**
  - **cutting drug development costs,**
  - **encouraging transparent results,**
  - **preserving patients privacy, and**
  - **maintaining pharmaceuticals integrity.**

# Adoption Challenges



- Early adopters would be hesitant to provide details of their data. Even if trial details would only be disclosed in safe answers, it still **dulls a company's competitive edge.**
- **Setting up OPEN TrialChain servers** for each dataset would be work that pharmaceutical companies may not be willing to invest in.
- At this time, OPEN TrialChain is **not GDPR compliant** and does not give individual subjects the ability to revoke access to their data.



*Thank you*

