How Aetna is Using Big Data to Improve Patient Health

Aetna, a health insurance company, is analyzed 1.3 terabytes of customer data to gain a better understanding of how different factors of their client’s health impact their likelihood of developing metabolic syndrome (eg. heart attacks, strokes, diabetes). The analysis used 36,000 patient data in relation to this one syndrome. However, they used data from 600,000 lab results and 18 million insurance claims for a year. The data was acquired through the patient’s performance on metabolic syndrome-detecting tests. As with everything medical, the performance of the results of the data analysis is subject to the doctor’s interpretation. The program works heavily with doctors and patients to convince patients to be analyzed and doctors to use the information the insurance company is providing. They give the doctors the biggest risk factors for the patient and suggest two programs to attempt to reduce the risk of the factor. The benefit of a program like this could be great as the sampling of the data of every patients diagnosis and prognosis could benefit the entire field of healthcare to catch trends and interactions in diseases that doctors can’t see in from only the cases they see. Unfortunately, working with healthcare data of patients is always a difficult task due to regulation on privacy and the expense associated with obtaining the data.

Higginbottom, S. (2012, November 20). *How Aetna is Using Big Data to Improve Patient Health*. Gigaom. https://gigaom.com/2012/11/20/how-aetna-is-using-big-data-to-improve-patient-health/