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Introduction



- How all the methodology associated with anonymisation methods and their implementation have been developed.
- Provide guidelines and best practices for the medical imaging community

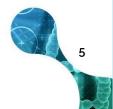


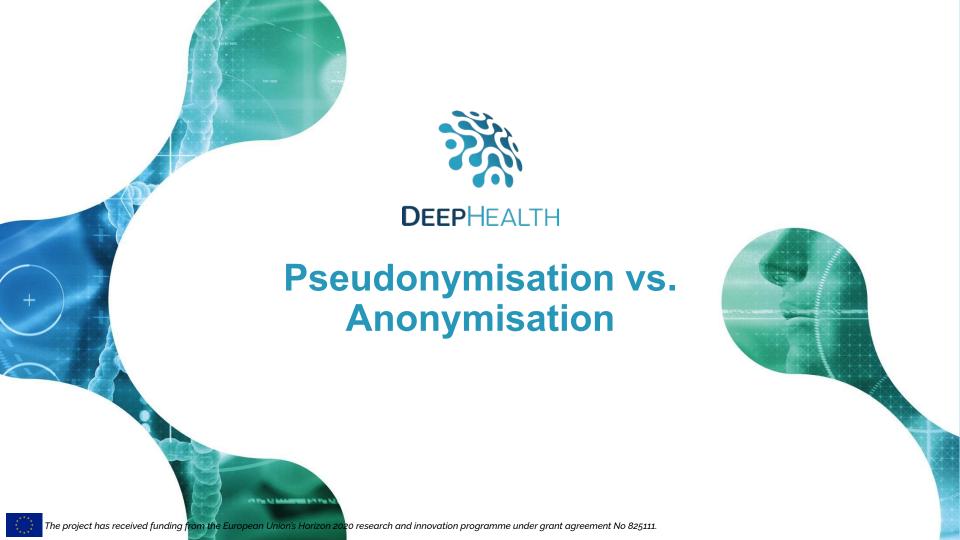


Course Index



- 1. Hackathon presentation
- 2. De-identification of Radiological reports
- 3. De-identification of DICOM metadata
- 4. De-identification of Biomedical Images
- 5. Workshops







Definitions

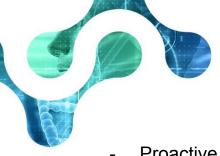


De-identification is the process used to prevent someone's personal identity from being revealed.

The **anonymisation** of data is an irreversible process. Anonymised data cannot be linked to the original subject it identifies.

Pseudonymisation limits the traceability between the data and the original subject it identifies. It can be reversed.

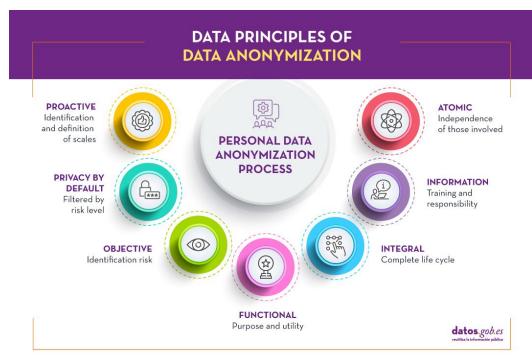




Basic principles



- Proactive
- Privacy by default
- Objective
- **Functional**
- Integral
- Information
- Atomic



https://datos.gob.es/en/blog/importance-anonymization-and-data-privacy

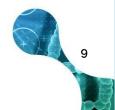




Main risks



- **Singling out**: risk of extracting attributes that allow an individual to be identified.
- Linkability: risk of linking at least two attributes to the same individual or group, in one or more data sets.
- **Inference**: risk of deducing the value of a critical attribute from other attributes.





Anonymisation



Methods

- Randomisation
 - noise addition
 - permutation
 - differential privacy
- Generalisation
 - aggregation and anonymity "k"
 - diversity "I" / proximity "t"
- Encoding
 - Hash algorithms with secret key and key erasure
 - homomorphic encryption
 - time stamp





Pseudonymisation



Methods

The processing of personal data such that it can no longer be attributed to a specific data subject without using additional information.

- Hash algorithms
- Secret key encryption
- Token decomposition







Medical Information Systems



HIPAA

The Health Insurance Portability and Accountability Act (**HIPAA**) proposes a set of good practices to protect:

- confidentiality
- integrity
- availability

of information in the health sector.





Medical Information Systems



Standards

Standards for the development and management of hospital information:

- HL7 (Health Level Seven Inc.) → standardise the exchange of medical information among applications
- DICOM (Digital Imaging and Communications in Medicine) → ensure the interoperability among heterogeneous medical imaging equipment and systems





MIDS



Medical Imaging Data Structure (**MIDS**) is the methodology proposed by FISABIO to standardise the organization and management of medical imaging data.

```
▼ COVID19
Study
               Subject
                                   Session
                                                     Modality
                                                                                         ▼ derivatives
                                                                                            ▼ roi_path
                                                                                                ▼ sub-S03044
                                                                                                  ▼ mses-E06138
                                                                                                     ₩ mod-rx
                                                                                                            sub-S03044_ses-E06138_run-1_bp-chest_vp-ap_mod-cr_roi.xml
                                  Sessions
                                                                          Image
             Participants
                                                                        Metadata
                                                                                                  ▶ ses-E06790
                                     ▶ sub-S03045
                                                                                               ▶ sub-S03046

▶ sub-S03047

                                                                                          ▶ sub-S03044
                                                                                          ▶ sub-S03045
             Derivatives
                                                                                          ▼ sub-S03046
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                                                                                                    sub-S03046 ses-E06217 scans.tsv
Data/
                                                                                            ▼ ses-E06569
     -sub-<participant_label>[/ses-<sesion-label>]
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          — [/mod-<modality_medical_image_label>][/<Type_of_image>]
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Types of anonymisable clinical data



Radiological reports

- Traditionally de-identified through pattern matching and regular expressions
- Natural Language Processing (NLP) de-identification as an alternative

DICOM meta information

- Data De-identification Guidelines and Protocol
- Smart-Upload: FISABIO's open-source DICOM de-identification software tool

Pixel data and graphic information

- Facial information
- Text annotations superimposed to the image







GDPR



General Data Protection Regulation

- It is applied to the processing of personal data
- It is applied in the form of national laws.
- Possibility of varying interpretations and legal implementations

Personal data must be collected, processed and shared under a lawful basis of the GDPR:

- Informed consent
- Public interest
- Legitimate interest





Data ownership



- The GDPR does not explicitly define or assign data ownership
- The subject has to give consent for:
 - collection
 - processing
 - sharing

of their data

This consent can be revoked at any time





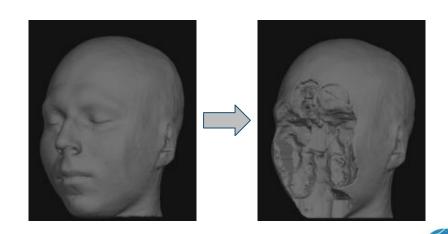
Clinical Data and GDPR

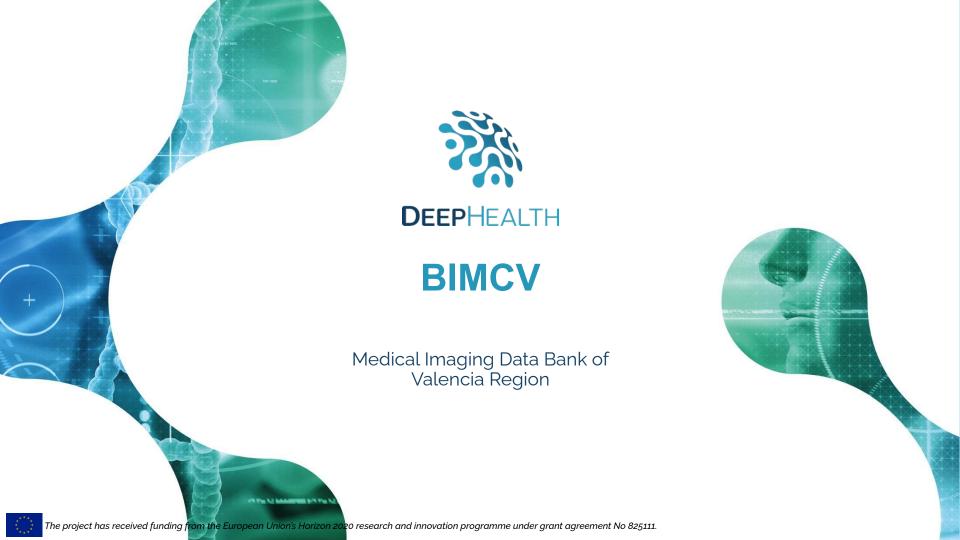


What constitutes anonymous data when it comes to clinical data?

e.g., Brain MRI

- Are they anonymous?
 - → Facial features could be reconstructed
- How can they be anonymised?
 - → Defacing







BIMCV life cycle





Data Recruitment

- Data Sharing agreement form (CEIm)
- Imaging Data with relevant clinical information retrieved according to provided criteria



Deidentification

- Option includes toolkit (CTP)
- Other methods (following guidance with local institutional policies)



Data Transfer

- Secure transfer of deidentified data to BIMCV
- Three option available with backup support and guidance



Data Curation

- Radiologist led by specialists for annotation and segmentation
- Additional curation to ensure distribution across sites/regions



User Access

- User data use agreement and registration
- Data download available for research and education purposes









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1.

Rocher, L., et al. Estimating the success of re-identifications in incomplete datasets using generative models. Nat. Commun.10, 1–9 (2019).

Yeh, F.-C. et al. Quantifying differences and similarities in whole-brain white matter architecture using local connectome fingerprints. PLoS Comput. Biol. 12, e1005203 (2016).





