

Public Health Surveillance and Reporting

An Open Source Approach

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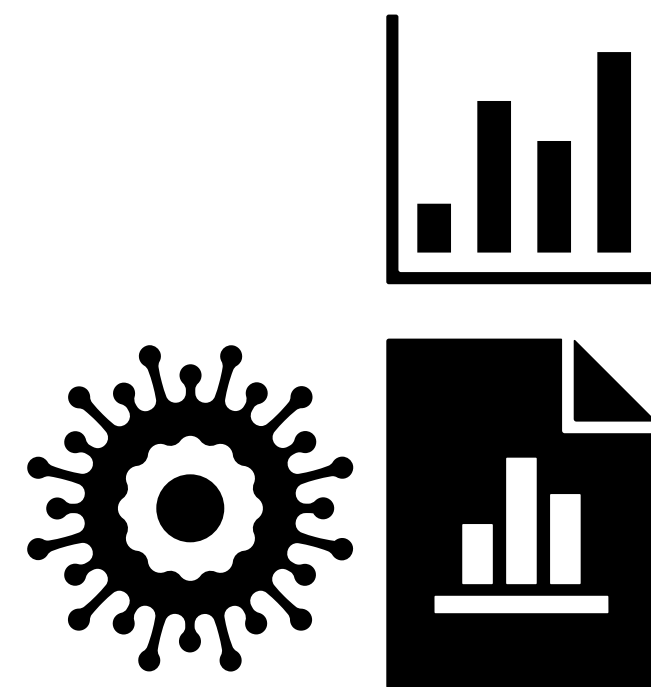
2023-03-30 Open Science Lunch @ UiO

Github: `sykdomspulsen-org`, `csids`

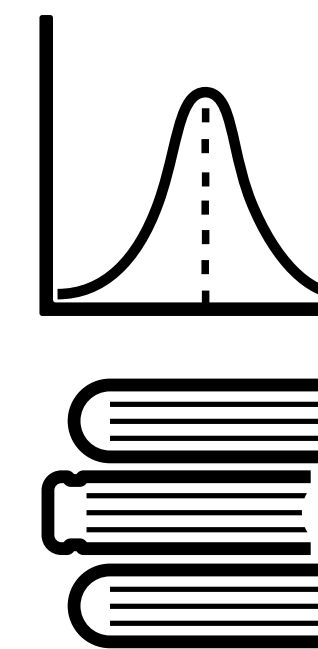
Website: <https://docs.sykdomspulsen.no>, <https://www.csids.no>

About me

FHI Researcher (statistician + R developer)
Sykdomspulsen team, infectious diseases



UiO (Faculty of Medicine)
Researcher / lecturer in biostatistics



2020

2021

2022

2023

About this talk

Public health surveillance and reporting

Introduction
Surveillance vs Research

Sykdomspulsen / CSIDS

Open-source, automated platform for
surveillance, analysis and reporting

Open PH data and tools

Motivation
Open data, open source software

Challenges and ways forward

“How to prevent the next pandemic”

Disclaimers

The opinions are my own, and do not reflect the views of my employer.

Regulations and policies are constantly changing. Please check the official documents for each data source for most updated information.

PH surveillance and reporting in a nutshell



Public health surveillance

Introduction

Continuous, systematic collection, analysis and interpretation of health-related data
(WHO definition)

Routine (e.g. daily, yearly);
different levels of geo-locations;

Some are event related

Surveillance cycle

Collection,
Analysis,
Dissemination,
Action

Infectious diseases

(influenza, covid ...),

Mortality, causes of death,


Chronic diseases
(cancer, diabetes ...),

Meteorological and natural disasters
(heatwave, hurricane),


Others
(firearm injury in US ...)

Public health surveillance

Introduction

**European Centre for Disease Prevention and Control**
An agency of the European Union

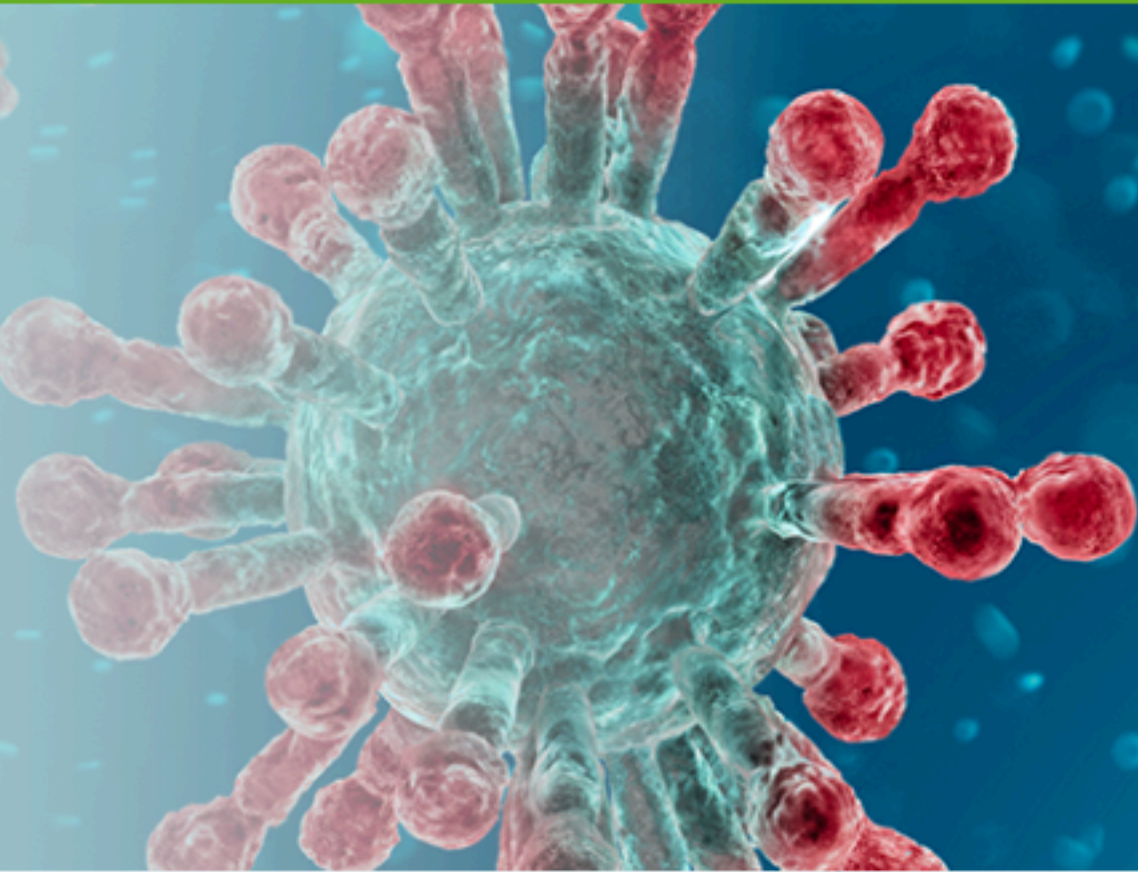
All sections ▾ Enter your keyword(s)

 Infectious disease topics ▾ Data ▾ Analysis and guidance ▾ Training and tools ▾

COVID-19

All information about the COVID-19 pandemic

Read more on COVID-19 ▶



COVID-19

Avian influenza

Antimicrobial resis

Latest publications



Scientific and technical publications
Conducting after-action reviews of the public health response to COVID-19: update
Guidance - 21 Mar 2023

▶



Scientific and technical publications
Communicable disease threats report, Week 11, 12-18 March 2023
Monitoring - 17 Mar 2023

▶



Scientific and technical publications
Crimean-Congo haemorrhagic fever - Annual Epidemiological Report for 2020
Surveillance report - 17 Mar 2023

▶



Scientific and technical publications
Zika virus disease - Annual Epidemiological Report for 2020
Surveillance report - 17 Mar 2023

▶

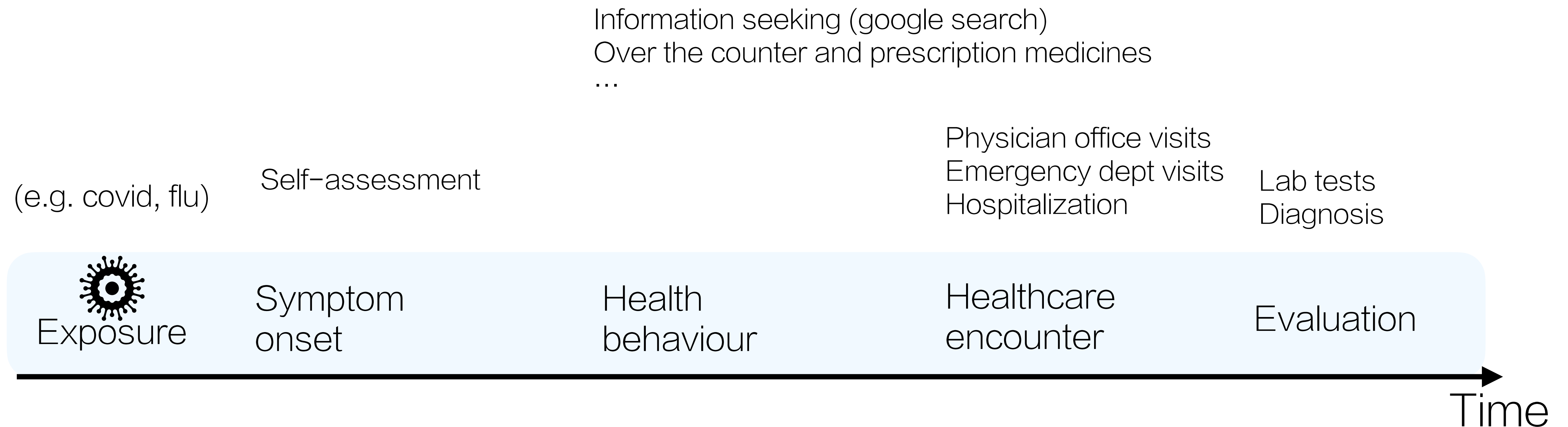


Scientific and technical publications
Interim analysis of COVID-19 vaccine effectiveness against Severe Acute Respiratory Infection due to SARS-CoV-2 in individuals aged 20 years and older – fourth update
Guidance - 16 Mar 2023

▶

Surveillance on infectious diseases

Where does data come from?



Data collected by **healthcare professionals**, then some are sent to **regional / national PH authority** for actions

Surveillance on infectious diseases

Compared to “research”

Surveillance cycle: CADA

Tasks	Research	Surveillance (especially disease surveillance with outbreak potential)	Challenges in surveillance
C ollection	Fixed datasets	New data, multiple sources, every day	Data aggregation and cleaning
A nalysis	Various	Descriptive (e.g. count, trend)	Flexibility age, sex, time, location groups
D issemination	(Journal) publication	Reports, graphs, numbers, datasets	Scale and consistency
A ction		Policy responses (effect immediately)	Rapid new task development

Surveillance methods can NOT live without research;

Timely **reporting** is a core task in public health surveillance

Open PH data and tools

Where to find data and reports?

Public health agency

Collect, process (e.g. censoring), analyse data

Internal reports at various frequencies

Release to the public some data and reports

Used by:

Media

(e.g. Aftenposten, VG)

International networks

(e.g. WHO, ECDC, EuroMOMO)



Open public health

A mindset

“Public” health data, open access everything?

It is **impractical** and **unnecessary** to open ALL the real-time public health data

- privacy protection, censoring, aggregation
- delays, validation
- technical challenges (e.g. data pipeline, maintenance)
- Misinterpretation could cause panic
- ...

The existing public data can be used in a **more collaborative, and accessible** way to

- build trust and transparency
- national and international collaboration
- facilitate research
- ...

Open source tools and software can be very useful in this process.

Public data on GitHub

Johns Hopkins University COVID repository

This repository has been archived by the owner on Mar 10, 2023. It is now read-only.

CSSEGISandData / COVID-19 Public archive

Watch 872 Fork 18.8k Starred 29.3k

Code Issues 1.7k Pull requests 286 Actions Projects Security Insights

master 1,603 branches 0 tags

Go to file Code

CSSEGISandData Update README.md 4360e50 2 weeks ago 7,691 commits

archived_data	archived_0325	3 years ago
csse_covid_19_data	Automated update	2 weeks ago
who_covid_19_situation_reports	update who readme	3 years ago
.gitignore	update	3 years ago
README.md	Update README.md	2 weeks ago

README.md

COVID-19 Data Repository by the Center for Systems Science and Engineering (CSSE) at Johns Hopkins University

About

Novel Coronavirus (COVID-19) Cases, provided by JHU CSSE

[systems.jhu.edu/research/public-health...](https://systems.jhu.edu/research/public-health/)

engineering johns-hopkins-university jhu csse 2019-ncov coronavirus covid-19 systems-science

Readme

29.3k stars

872 watching

18.8k forks

Releases

No releases published

Covid cases, deaths, vaccines etc

National, county/state level

Widely used for visualisation

Archived 2023.3.10

29.3k stars, 18.8k forks

Public data on GitHub

Our World in Data

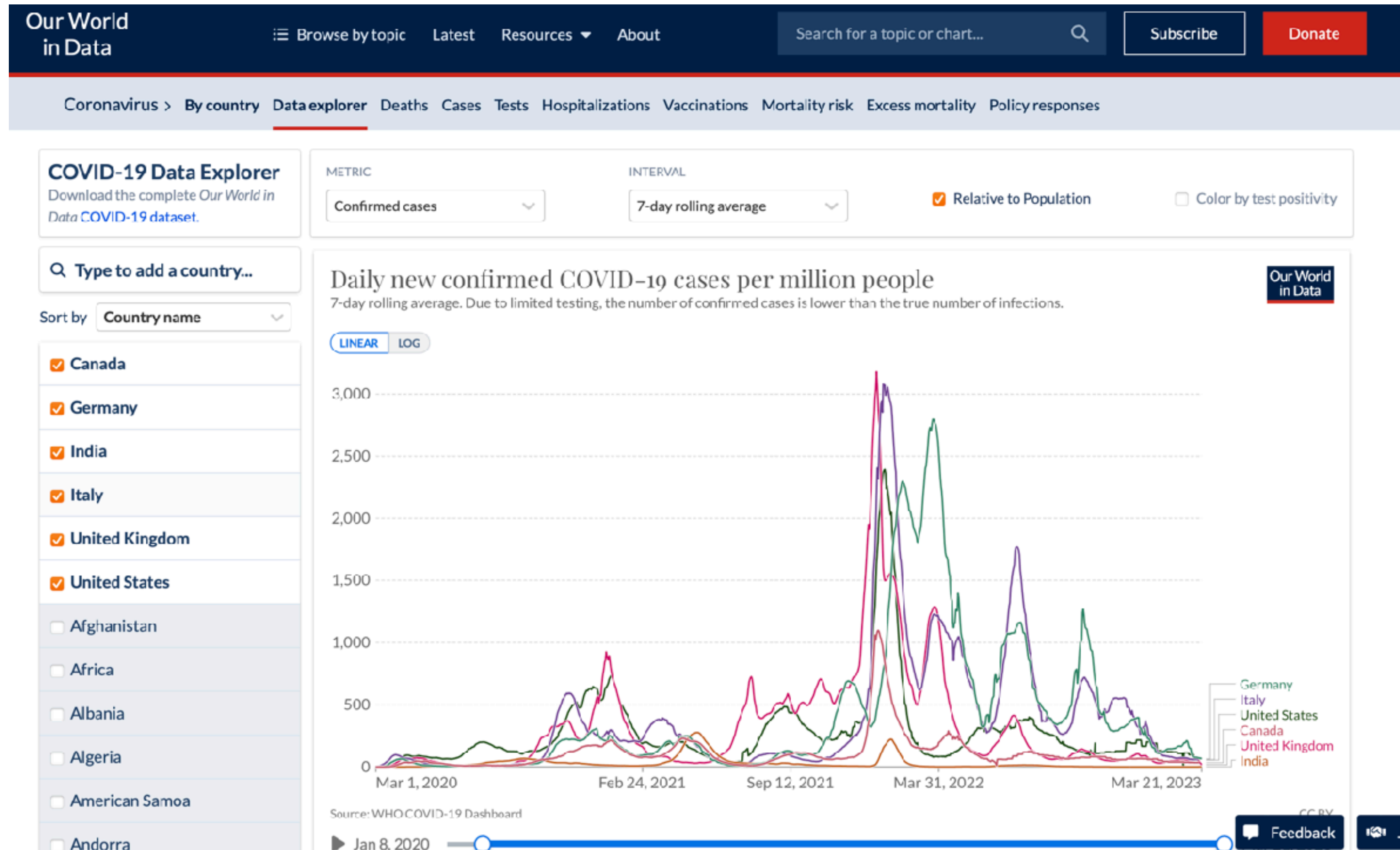


Research and data

All free, open access and open source

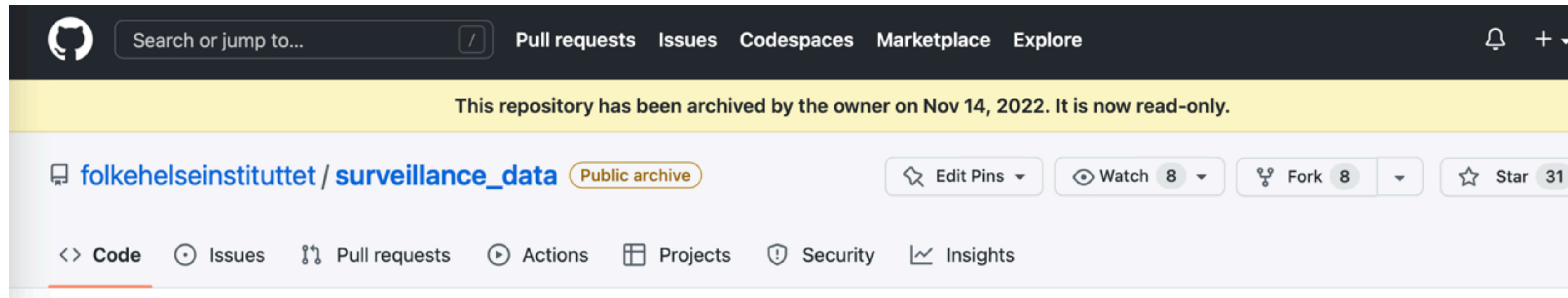
Public data on GitHub

Our World in Data



Public data on GitHub

Covid data in Norway

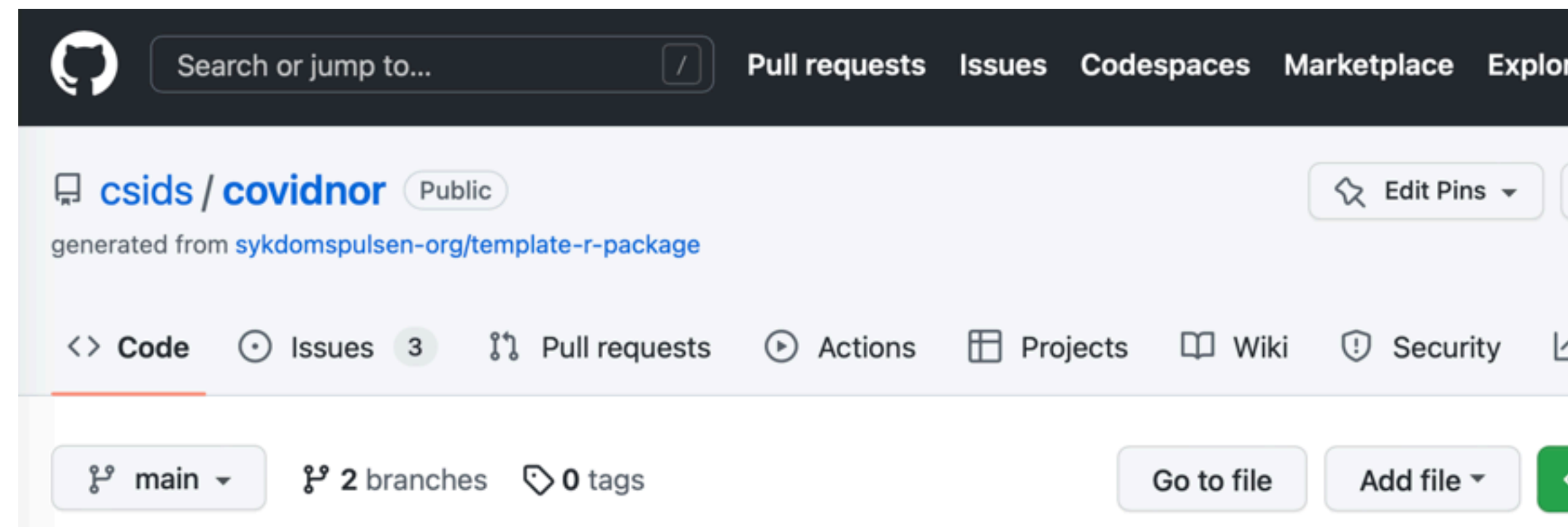


Daily data on cases, hospitalisation, vaccine etc

By age groups, sex, location

Used by VG, archived 2022.11.14

Processed covid data in Norway in **new repository**
(work in progress)



Open source software

Should I switch?

Consider the following aspects:

Cost

Ease of use (e.g well documented)

Efficiency (e.g. automation)

Collaboration and teamwork

Reproducibility

Research and new method adoption



VS



Surveillance x Open source tools
= Sykdomspulsen

Sykdomspulsen

The Disease Pulse

A team of 8* members at **Norwegian Institute of Public Health**
Started in 2012. Key role in Covid-19 pandemic

Sykdomspulsen Core and R packages were migrated to **CSIDS project** in November 2022.

Automated **real time** **public health surveillance** **platform**



Daily** data input

Daily analysis

Daily delivery

Infectious diseases

Covid19

Influenza

Other respiratory

Gastrointestinal

Other infections

Mortality

Excess mortality

Cause of death

Data cleaning and censoring

Statistical analysis

Graph making and reporting

* 2021-22

** Mortality surveillance is either weekly or yearly

Sykdomspulsen












Automated situational reports

Situational reports on covid cases, hospitalisation, vaccine etc

1 nation + 11 counties + 356 municipalities

Everyday, before **7am**

Used by FHI leadership and Ministry of Health

 Agder_fylke_dagsrapport_covid19_2021-10-20.docx
 Innlandet_fylke_dagsrapport_covid19_2021-10-20.docx
 Møre_og_Romsdal_fylke_dagsrapport_covid19_2021-10-20.docx
 Nordland_fylke_dagsrapport_covid19_2021-10-20.docx
 Oslo_fylke_dagsrapport_covid19_2021-10-20.docx
 Rogaland_fylke_dagsrapport_covid19_2021-10-20.docx
 Troms_og_Finnmark_fylke_dagsrapport_covid19_2021-10-20.docx
 Trøndelag_fylke_dagsrapport_covid19_2021-10-20.docx
 Vestfold_og_Telemark_fylke_dagsrapport_covid19_2021-10-20.docx
 Vestland_fylke_dagsrapport_covid19_2021-10-20.docx
 Viken_fylke_dagsrapport_covid19_2021-10-20.docx



Dagens foreløpige (u.off) tall. Rapporten er generert kl. [redacted]. Der annet ikke er oppgitt er figurene basert på prøvedato i MSIS. Tallene er midlertidige og kan bli endret.

Status oppdatering

Totalt [redacted] nye tilfeller ble registrert siste døgn. De to foregående dagene ble det registrert henholdsvis [redacted] tilfeller.

Til sammenligning ble det for en uke siden, den 06.10.2021 rapportert [redacted] registrerte tilfeller siste døgn.

Antall meldte basert på prøvedato så langt uke 41 er [redacted] mot [redacted] på samme tid sist uke (uke 40). Antall meldte basert på registrert dato så langt denne uka (uke 41) er [redacted], mot [redacted] på samme tid sist uke (40).

Totalt er [redacted] personer vaksinert mot covid-19 i Norge, av disse er [redacted] personer vaksinert med både 1 og 2. dose med koronavaksine [redacted] av hele befolkningen er vaksinert med minst en dose og [redacted] vaksinert med to doser med koronavaksine. Blant personer 18 år og eldre er [redacted] % vaksinert med minst en dose med koronavaksine, og av disse er [redacted] % vaksinert med to doser med koronavaksine. Blant personer 45 år og eldre er [redacted] % vaksinert med minst en dose, og [redacted] % av personer 65 år og eldre er vaksinert med minst en dose med koronavaksine. Data er hentet fra BeredtC19, SYSVAK, per 12.10.2021.

Sykdomspulsen

Automated situational reports

35 pages, 17 tables, 21 figures

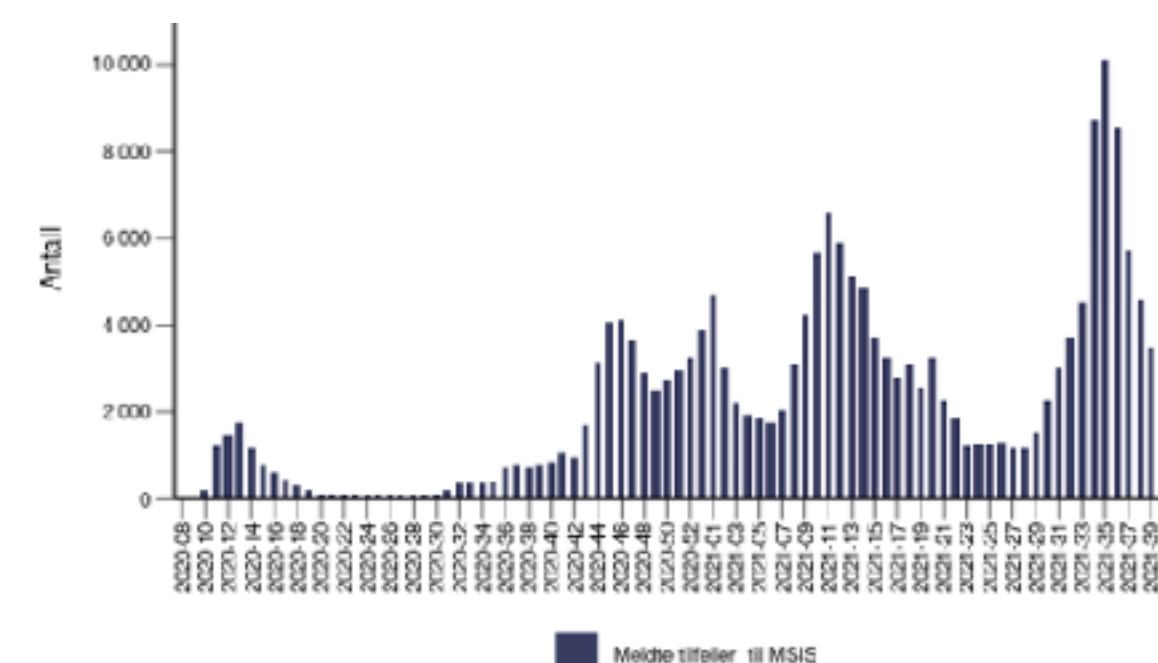
Tabell 1 Covid-19 status og utvikling, uke 2021-37 til uke 2021-41.

Demo

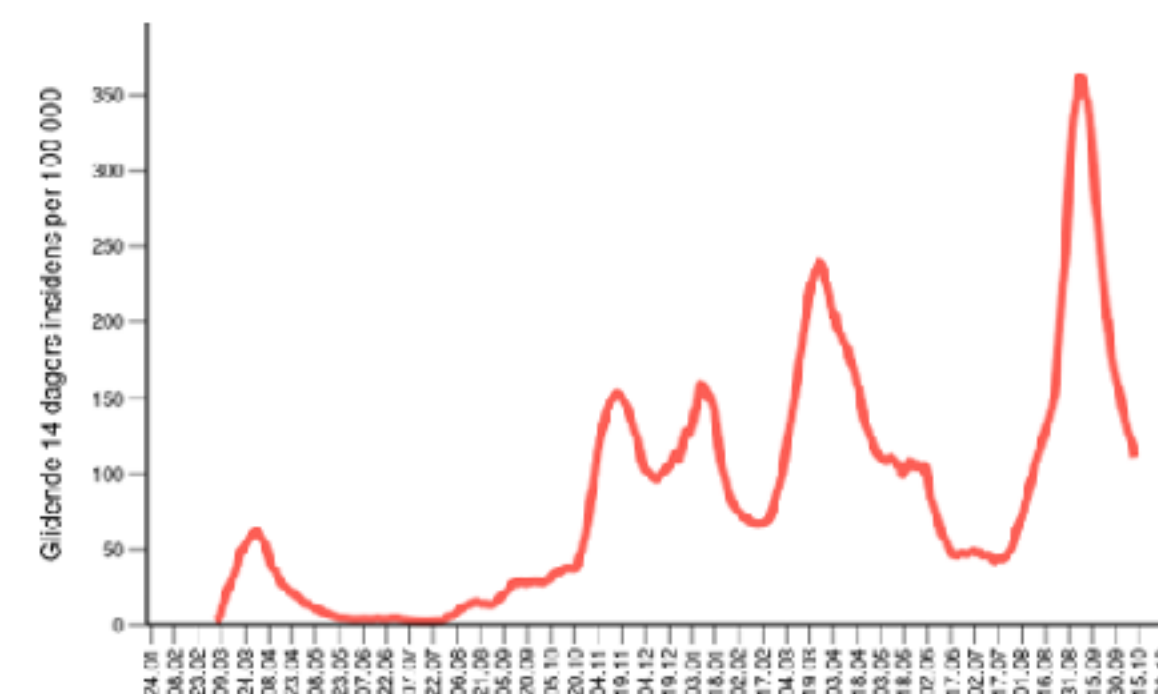
Overvåkingssystem/ Indikatorer	2021-37	2021-38	2021-39	2021-40	2021-41	de siste 5 ukene
Meldte tilfeller til MSIS (prøvedato)						
Meldte tilfeller til MSIS (registrertdato)						
Antall personer testet for SARS-CoV-2 (PCR)						
Nye covid-19 positive pasienter innlagt i sykehus (alle årsaker)						
Nye pasienter innlagt i sykehus med covid-19 som hoved-årsak						
Nye pasienter med bekreftet covid-19 innlagt i intensiv- avdeling						
Covid-19-assosierte dødsfall						

*Visualiseringen på nettsidene våre oppdateres ca kl 13.00 hver dag.

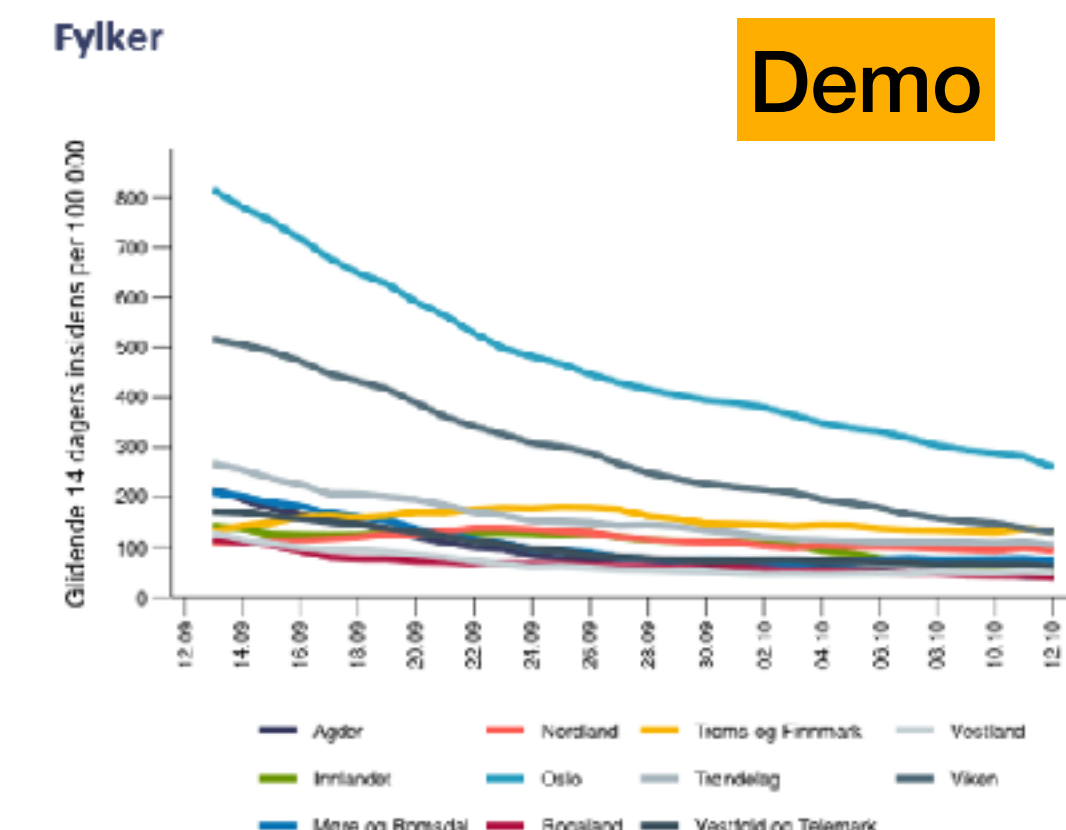
Merk: Denne tabellen og visualiseringen på www.fhi.no viser antall personer testet med PCR, vi jobber med å inkludere antigen hurtigttester. Se ukesrapport for framstilling av antall testede med PCR og hurtigttester samlet. Totalt har [redacted] personer blitt diagnostisert i Norge frem til kl 24.00, 12.10.2021, og tilsammen [redacted] personer er registrert testet for covid-19 (per 12.10.2021).



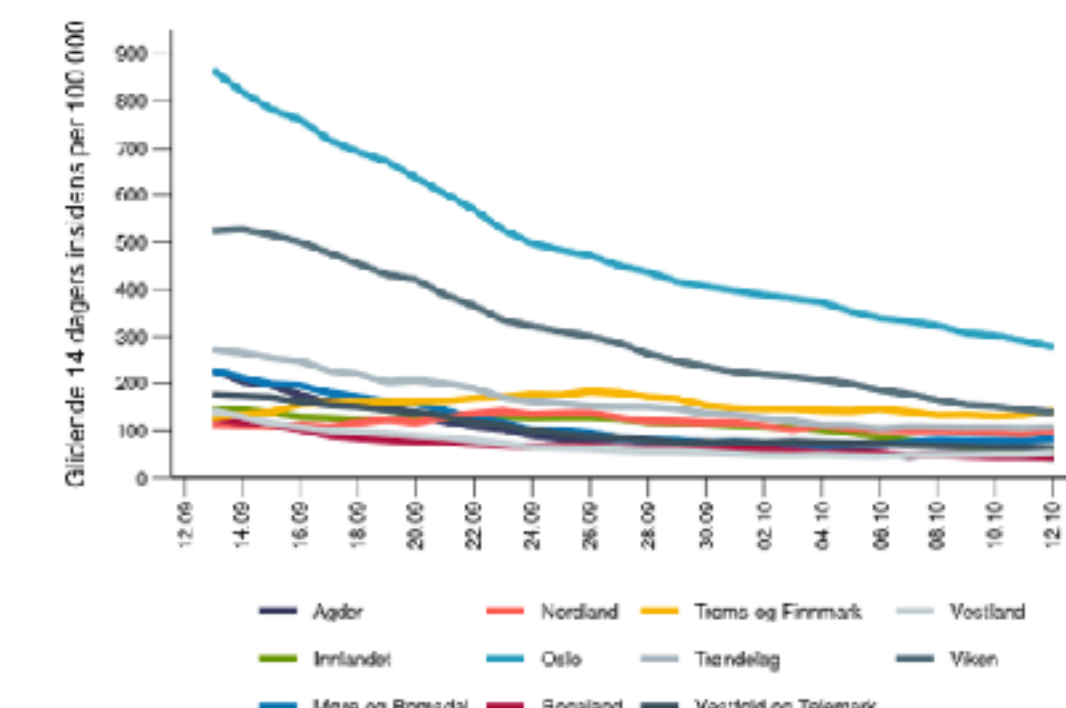
Figur 1. Antall tilfeller av covid-19 per uke basert på prøvedato gjennom hele pandemiperioden, Norge.



Figur 2. Glidende 14-dagers incidens per 100 000 innbyggere per dag basert på prøvedato gjennom hele pandemiperioden, Norge.



Figur 5. Antall tilfeller per 100 000 innbyggere per 14 dager etter fylke og prøvedato, uke 2021-37 til uke 2021-41.



Sykdomspulsen

Automation saves time and cost

Historically (pre 2020.12) made **manually, in the early morning**, for **selected locations**

Overtime estimated by one employee work from 6 to 8am for one year (2h per day)

One employee is allowed 200h overtime per year

National + 11 counties + 356 municipalities = 368 reports

From Secure zone (data extraction) to reports = **40**min (8 CPU in parallel)

One year deliverables	Manual report	Sykdomspulsen
Number of reports	$5 * 365 = 1\,825$	$368 * 365 = 134\,320$
Overtime hours	700	0
Number of people needed	4	0
Overtime costs	700 000 kr	0

700 000 kr is approximately 67 400 Euro, 70 245 USD (2022.06.15)

From data to report

Secure zone (like TSD)

Data → Anonymise → NHN sluse
(export)

MSIS

MSIS mortality

MSIS lab

NIR/NOPAR

SYSVAK

By Sykdomspulsen

By lab department

By team overvåking

data.rds

Ordinary zone

Process → Analyse → Deliver

Clean data

Censor data

Check updates

Send alerts

Statistics

Graphs

Tables

Reports

Manual checks

Send reports

Inform users

splalert

spldata

spltidy

splstyle

splmaps

spltime

plnr

rmarkdown

MSIS: Norwegian Surveillance System for Communicable Diseases
NIR: Norwegian Intensive Care Registry
SYSVAK: Norwegian Immunisation Registry
NOPAR: Norwegian Pandemic Registry

From data to report

Example: daily report for covid trend

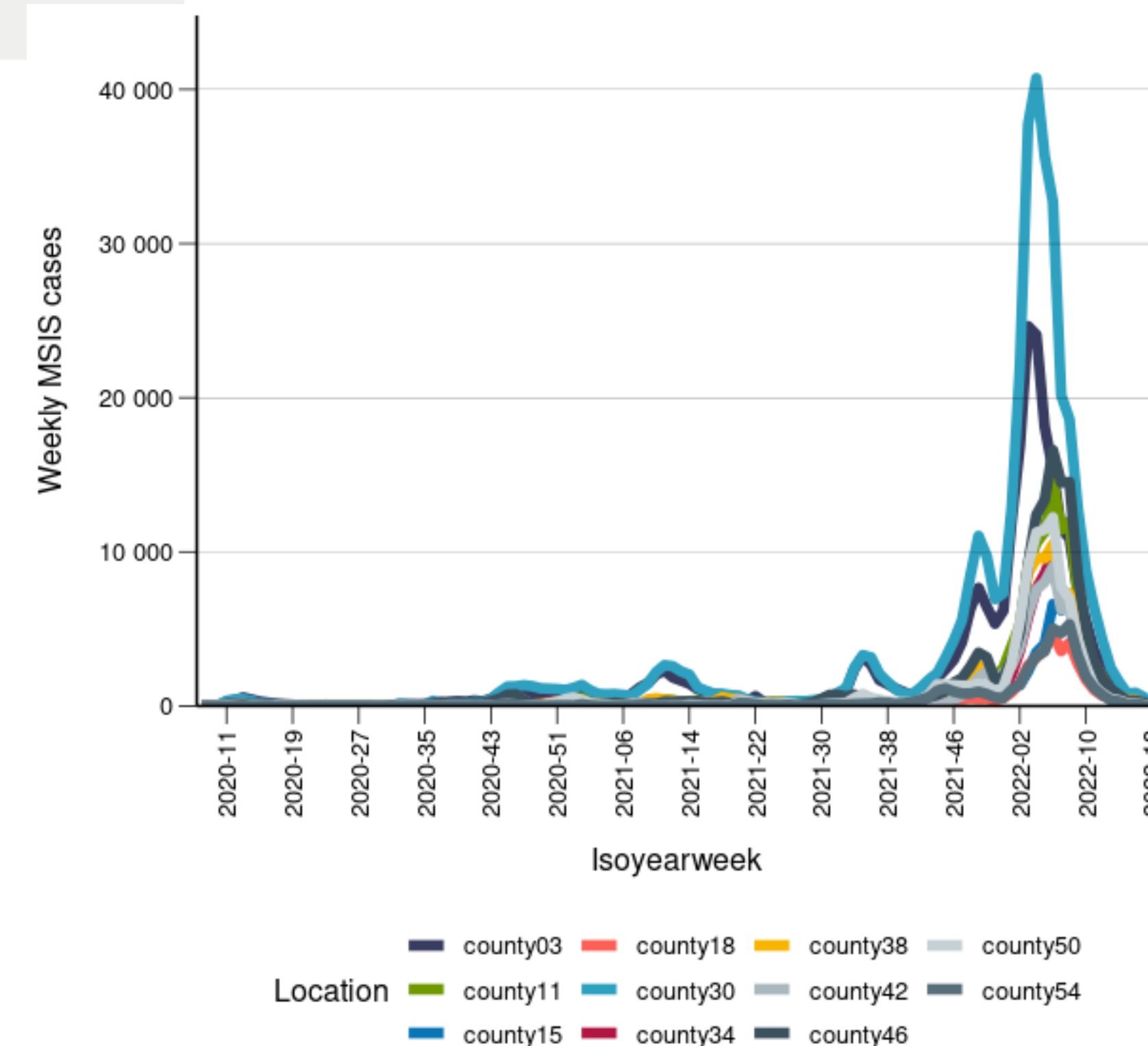
Complete example please check vignette documentation in each package



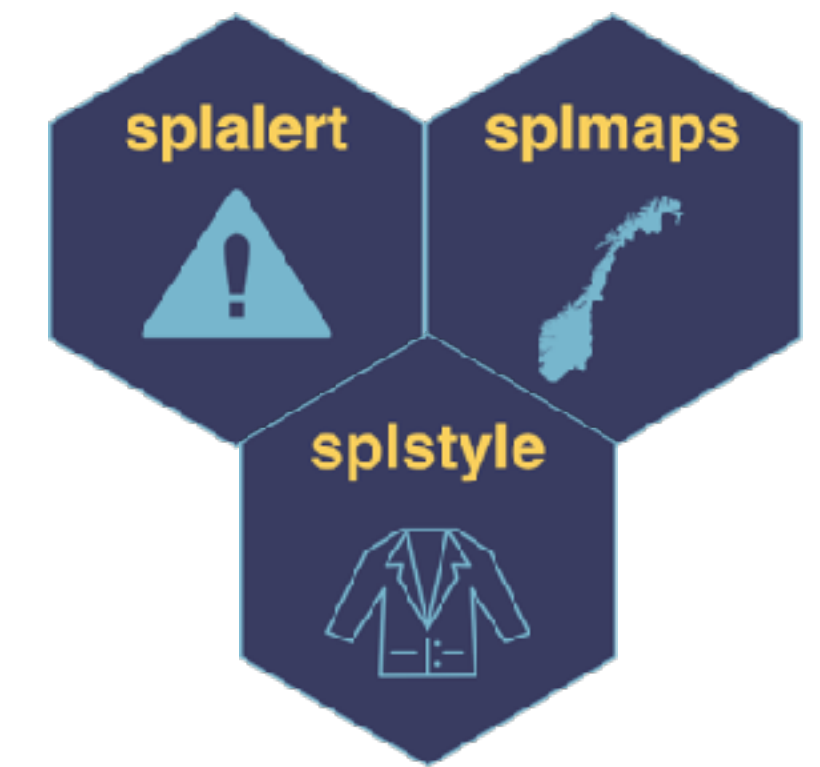
```
d_msis <- spltidy::covid19_msis_cases_by_time_location
```

```
# check the column names
```

	[unified] <character> NA=0 % isoyearweek	[unified] <character> NA=0 % season	[unified] <numeric> NA=0 % seasonweek	[unified] <integer> NA=13 % calyear	[unified] <integer> NA=13 % calmonth
1:	2020-08	2019/2020	31	2020	2
2:	2020-08	2019/2020	31	2020	2
3:	2020-08	2019/2020	31	2020	2
4:	2020-09	2019/2020	32	2020	2
5:	2020-09	2019/2020	32	2020	2
.....					
11024:	2022-14	2021/2022	37	NA	NA
11025:	2022-15	2021/2022	38	NA	NA
11026:	2022-16	2021/2022	39	NA	NA
11027:	2022-17	2021/2022	40	NA	NA
11028:	2022-18	2021/2022	41	NA	NA
	[unified] <character> NA=13 % calyearmonth	[unified] <Date> NA=0 % date	[context] <integer> NA=0 % covid19_cases_testdate_n	[context] <numeric> NA=0 % covid19_cases_testdate_pr100000	
1:	2020-M02	2020-02-21	0	0	
2:	2020-M02	2020-02-22	0	0	
3:	2020-M02	2020-02-23	0	0	
4:	2020-M02	2020-02-24	0	0	
5:	2020-M02	2020-02-25	0	0	
.....					
11024:	NA	2022-04-10	6888	126.9614	
11025:	NA	2022-04-17	3635	67.0013	
11026:	NA	2022-04-24	3764	69.379	
11027:	NA	2022-05-01	2243	41.3436	
11028:	NA	2022-05-08	502	9.253	



Example: daily report for covid trend



splalert 2022.6.15 Get started **Reference** Articles ▾ Changelog

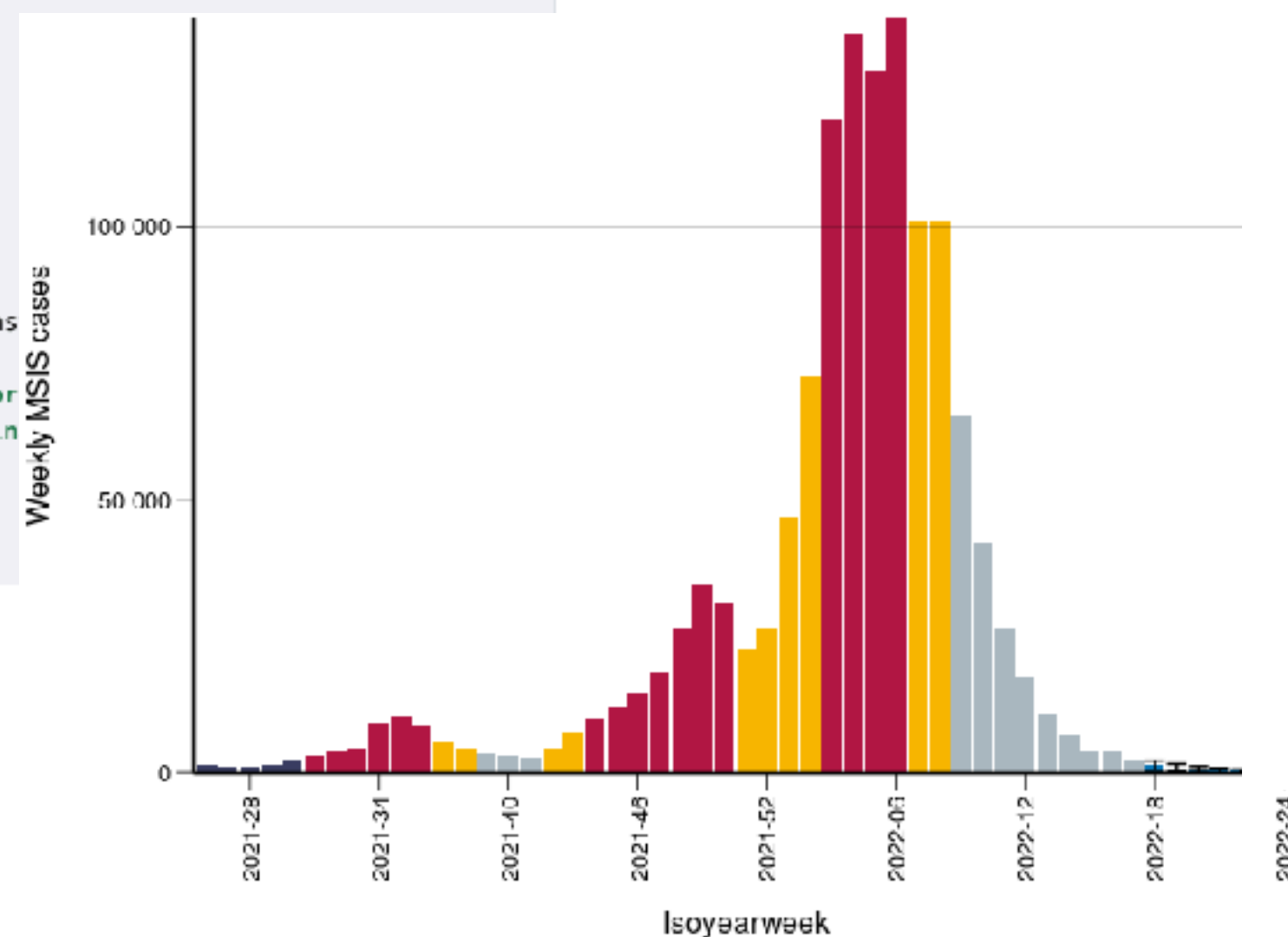
Determine the short term trend

Source: [B/short_term_trend.B](#)

Determine the short term trend

Usage

```
short_term_trend(
    x,
    numerator,
    denominator = NULL,
    prX = 100,
    trend_days = 42,
    remove_last_days = 0,
    forecast_days = trend_days,
    trend_isoweeks = ceiling(trend_days/7),
    remove_last_isoweeks = ceiling(remove_last_days/7),
    forecast_isoweeks = trend_isoweeks,
    numerator_naming_prefix = "from_numerator",
    denominator_naming_prefix = "from_denominator",
    statistics_naming_prefix = "universal",
    remove_training_data = FALSE
)
```



Arguments

x
Data object

numerator
Character of name of numerator

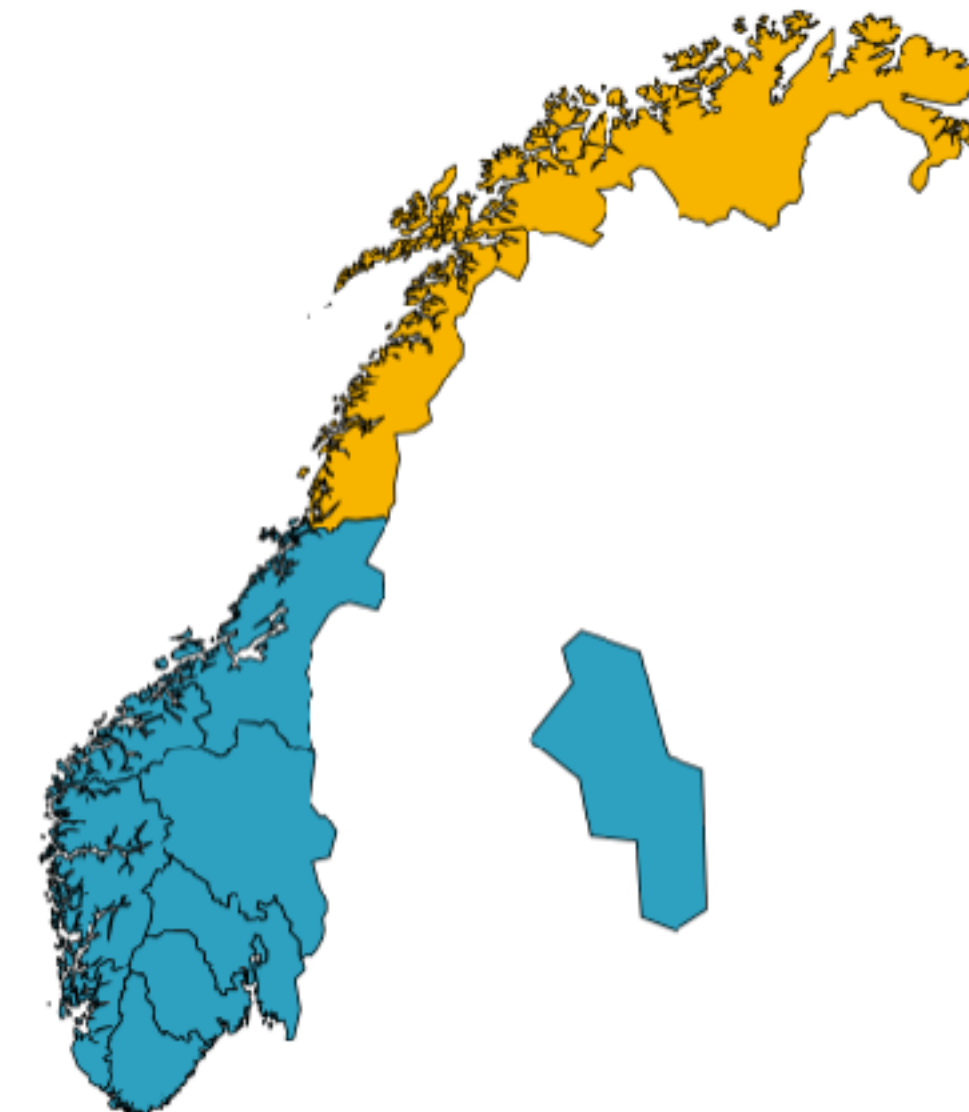
denominator
Character of name of denominator (optional)

prX 6 week trend

If using denominator, what scaling factor should be used for numerator/denominator?

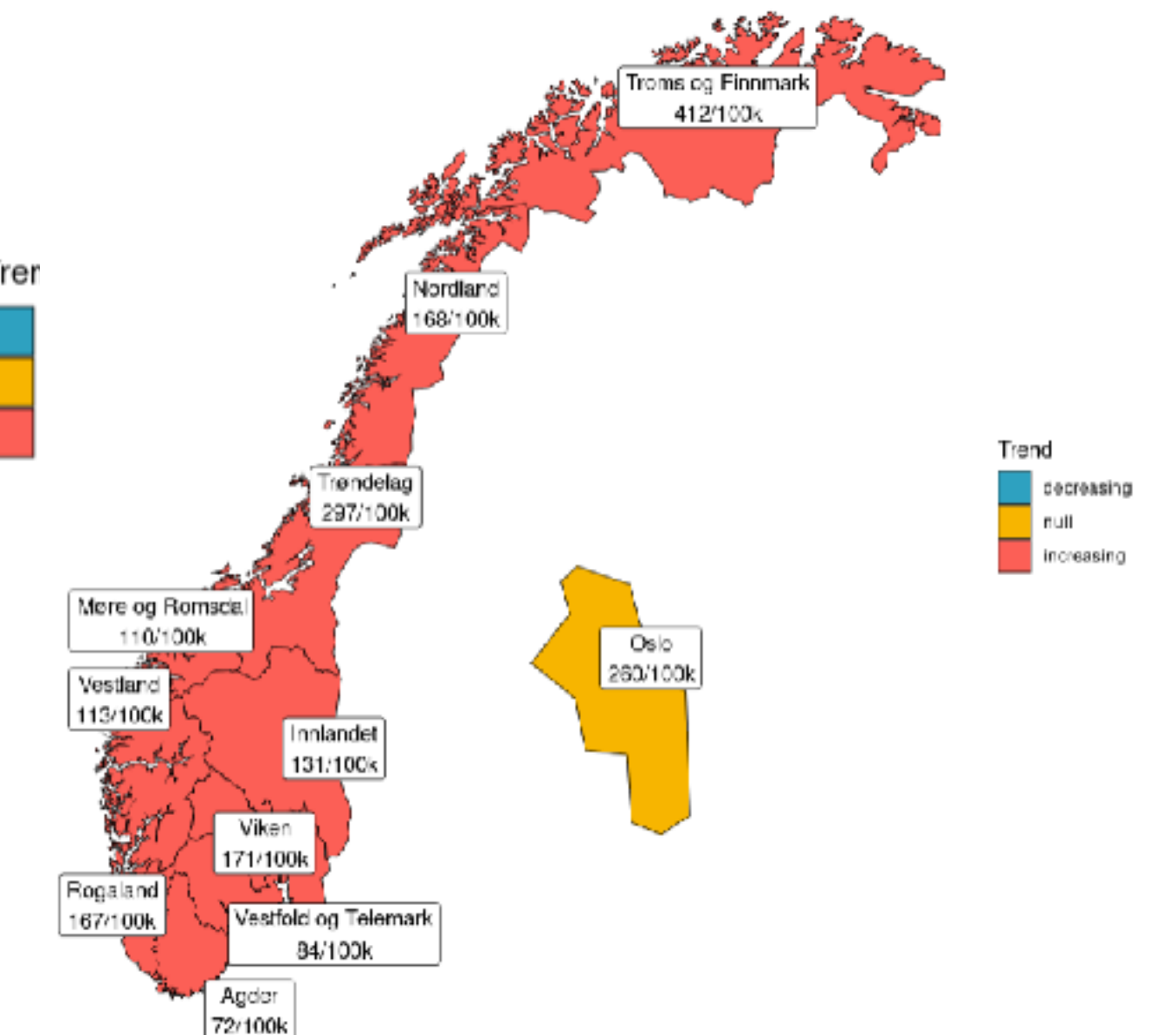
6 week trend Training Forecast Decreasing Null Increasing

MSIS cases per 100k population for week 2021-40



Date uploaded 2021-10-10

MSIS cases per 100k population for week 2021-44



Date updated 2021-11-07

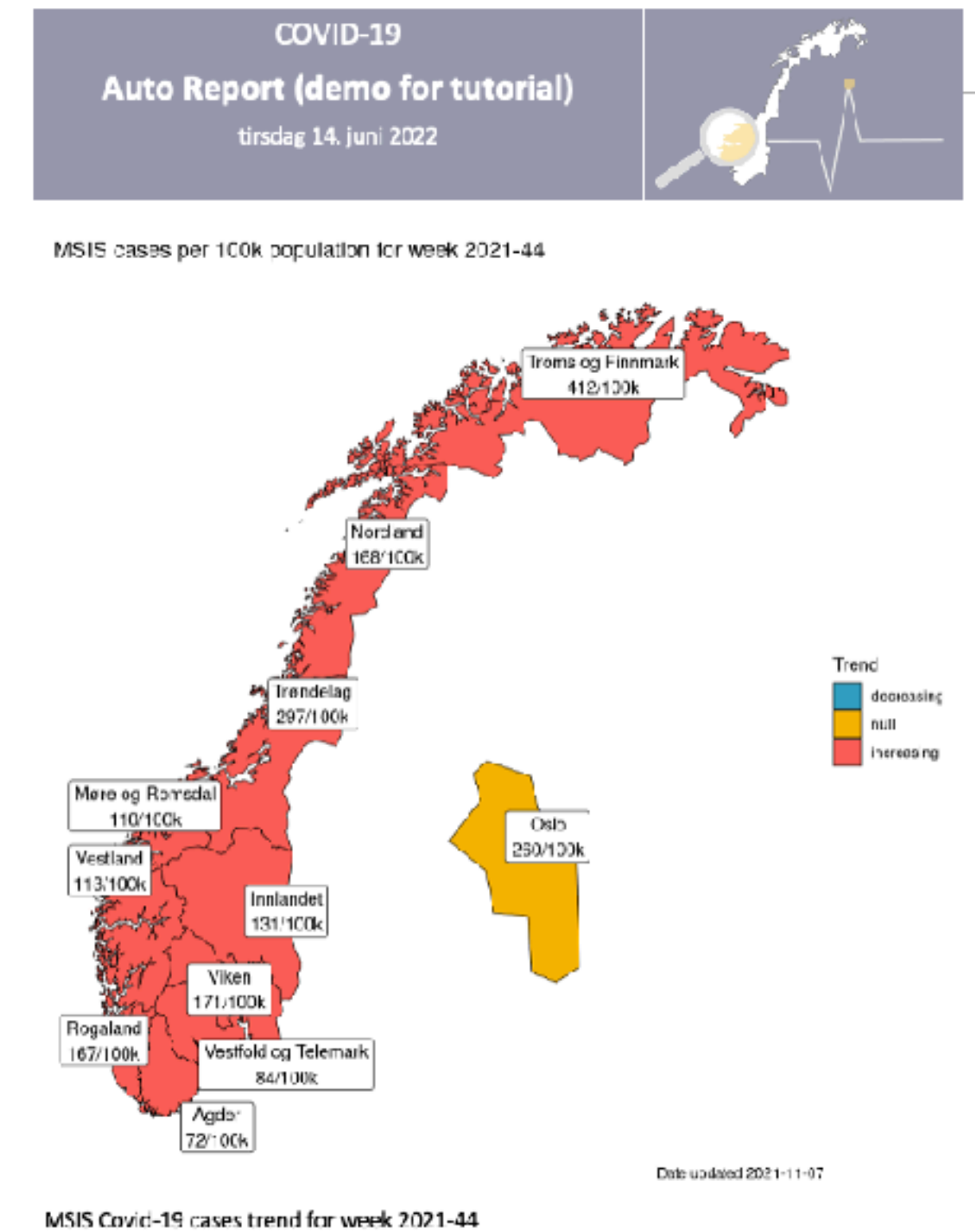
From data to report

Example: daily report for covid trend

The screenshot shows the RStudio interface. On the left, the R Markdown source file is open, displaying code for report generation. The code includes a title, output format (word document), and a chunk for rendering. The preview on the right shows a Word document titled "COVID-19 Auto Report (demo for tutorial)" dated "tirsdag 14. juni 2022". The report content includes an introduction and disclaimers, a section on how the report is made, and a placeholder for a figure.

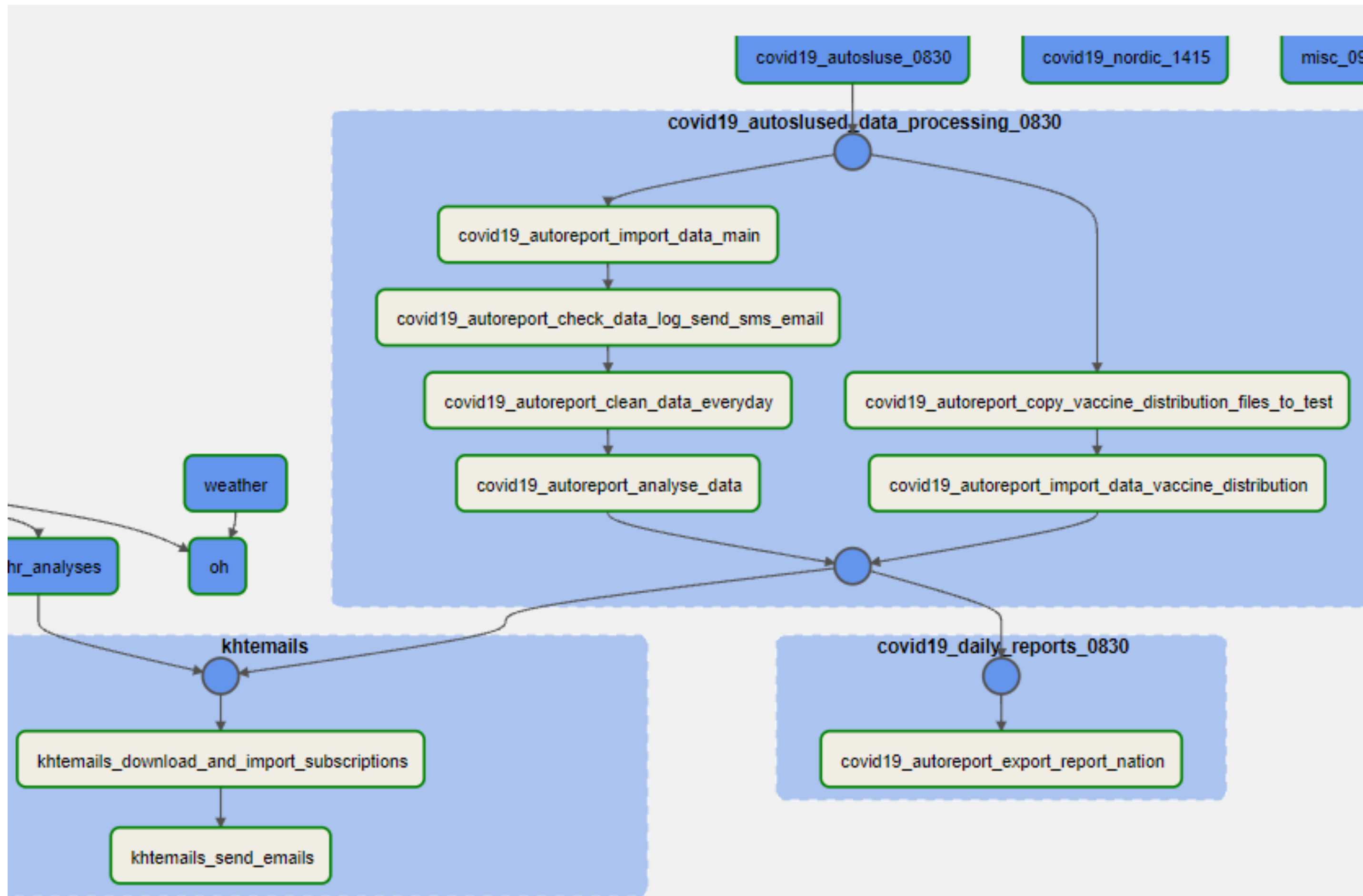
```
1 ---
2 title: "Test Report"
3 output:
4   word_document:
5     reference_docx: style_demo.docx
6 ---
7
8 {r setup, include=FALSE}
9 knitr::opts_chunk$set(echo = TRUE)
10
11
12 # Introduction and disclaimers
13
14 This is a demonstration for how to make automated reports with Rmarkdown and MS Word.
15
16 The dates, numbers, graphs and tables are for educational purposes only. This is made to teach R, not to be used in other circumstances.
17
18 The data used in this document is aggregated data, and it is public available.
19
20
21 ## This is how we make a report
22
23 A report has text. You're reading the text. *Standard markdown style works well*.
24
25
26
27 We insert the figure made before.
28
29 MSIS Covid-19 cases trend for week 2021-44 (nap_covid_demo.png)
30
31
32
```

Page 1 of 2 94 words



Development and Automation

Airflow



We run 150+ tasks in airflow

Alert system: Email + SMS

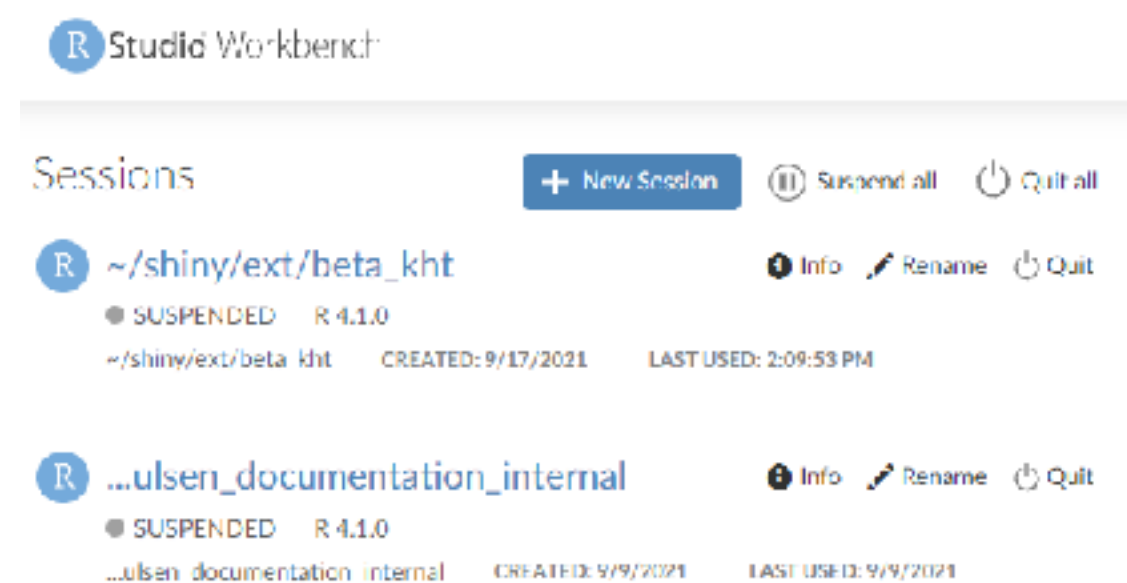
Quality assurance: vakt
(debug, check report output)

Development and Automation

RStudio, Github, Docker, CI/CD

Rstudio workbench

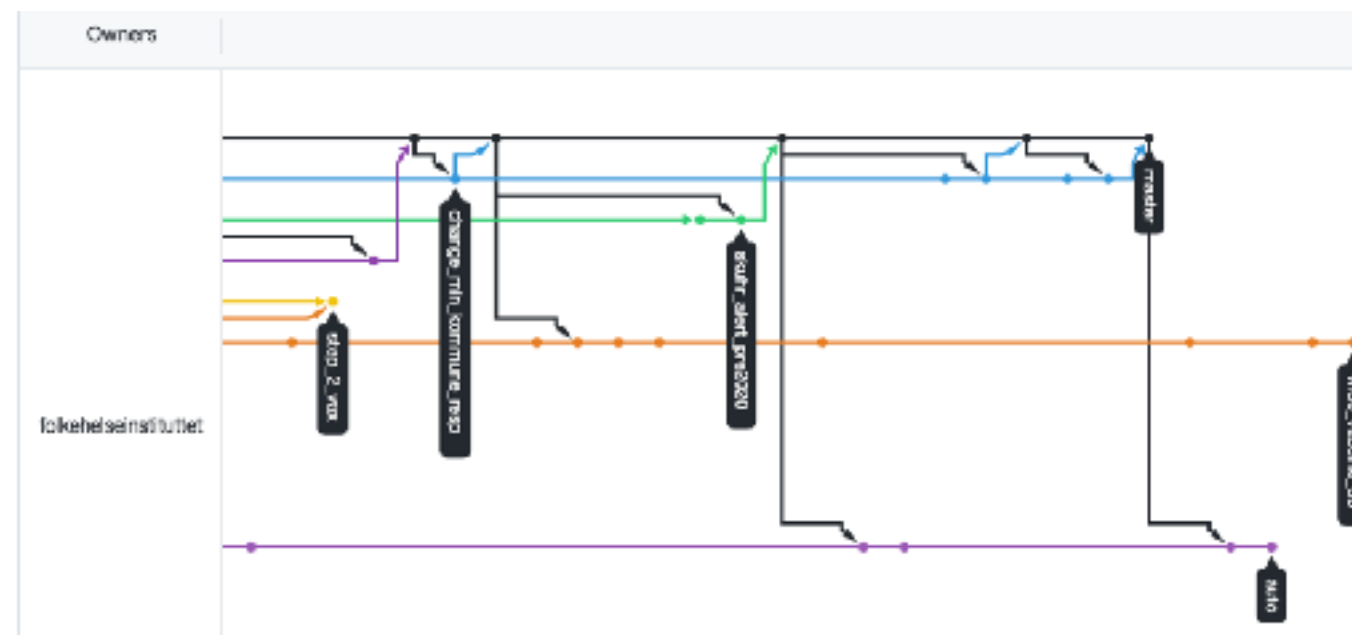
(Formerly Rstudio Server Pro)



100 USD per person per month

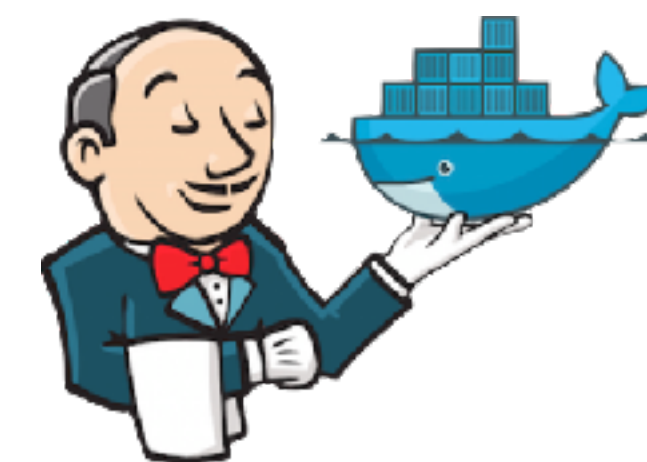
Github

One edit per branch



GoCD

Build docker image *



Contact our engineer for more details!

Risks, Challenges & Ways forward

This pandemic is over (?)

What about the next one

DAGENS
Medisin

DM Debatt DM Pharma DM Arena DM Jobb

Logg inn



FHIs Sykdomspulsen for kommunehelsetjenesten legges ned på grunn av budsjettkutt

Nettsidene der blant andre kommuneleger, smittevernleger og statsforvaltere kan holde seg oppdatert på smittsomme sykdommer i sitt område, legges ned tirsdag.

Leni Aurora Brækhus

PUBLISERT Mandag 14. november 2022 - 19:09



Nettsiden for oppdaterte, daglige tall om covid-19, influensa, andre luftveisinfeksjoner, mage-tarminfeksjoner, vaksinasjonsdata for covid-19, vaksinasjonsdata for influensa og dødelighet legges ned fra og med 15. november, skriver FHI i en [melding på sine nettsider](#).

Daily data sharing to the public (GitHub) stopped;
automated data processing, aggregation, analysis stopped

Back to manual weekly reports, involving 20+ staff



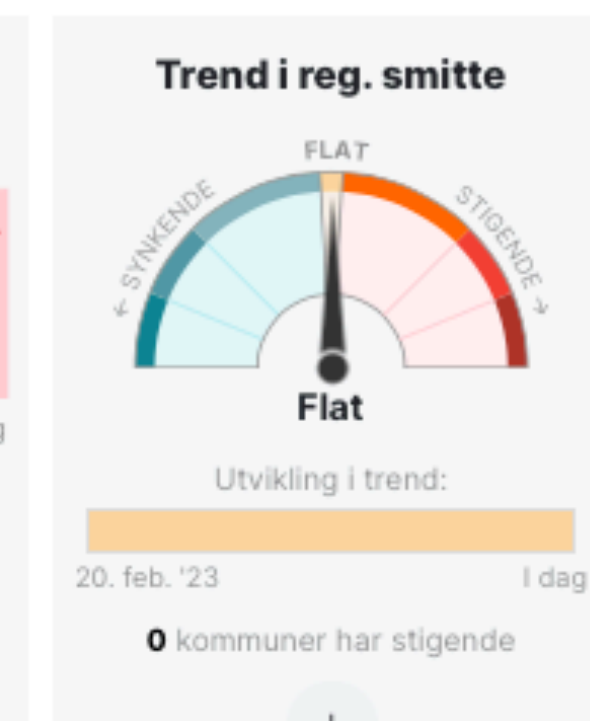
Nøkkeltall for Norge

FHI har stengt VGs kilde til data om sykehusinnleggelser, testing, dødsfall og demografi for påvist smittede. Fra og med 15. november 2022 blir disse tallene ikke lenger oppdatert.

Registrert smitte blir fremdeles oppdatert, men gir ikke noe godt bilde av smittesituasjonen, fordi de færreste nå tester seg når de blir syke.

Ukentlige nøkkeltall publiseres i [FHIs ukerapporter](#).

Periode for grafer: Totalt Siste 30 d.



Risks and Challenges

... or opportunities?

Resources

Funding
Support

Talent

Skills take long time to develop
Attraction

Culture

Collaborative?
Open to new solutions?

Open data and software

Privacy protection related to health data

Correct interpretation of results

Can we trust the **predictions** made by the algorithm?
What does the **uncertainty** mean?
Is there enough **evidence** for an ‘outbreak’ ?

Robust open source software, maintainence

Training

...

Ways forward

Prevention is better than treatment

Monitoring and surveillance

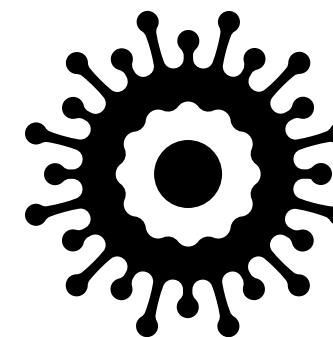
Infectious diseases in human
Zoonotic diseases (One Health)

Data and information sharing, open
source software can make it easier !

Invest in **infrastructure and manufacturing**

Vaccine production and distribution
high protective gears, ...

Lab security; training and education; ...



Rapid development of tests and vaccine

Stop the spread (at least until vaccine)

2023

?

Resources

Public health surveillance and preparedness

Centers for Disease Control and Prevention (CDC) guide on public health surveillance <https://www.cdc.gov/training/publichealth101/surveillance.html>

Book on covid and pandemic (“Preventable” by Devi Sridhar)

Coursera course (JHU) on surveillance <https://www.coursera.org/learn/epidemiology-surveillance-systems-analysis/>

Our world in data <https://ourworldindata.org/coronavirus/country/norway>

Johns Hopkins COVID data repository <https://github.com/CSSEGISandData/COVID-19>

FHI data and reports

Weekly report <https://www.fhi.no/publ/2020/koronavirus-ukerapporter/>

Statistics bank <https://statistikk.fhi.no>

Sykdomspulsen / CSIDS

Repository of CSIDS (previously Sykdomspulsen) <https://github.com/csids>

Sykdomspulsen tutorial on autoreport https://github.com/sykdomspulsen-org/resources/blob/main/tutorial_autoreport/autoreport_101.md

Reporting automation <https://www.rstudio.com/resources/webinars/rethink-reporting-with-automation/>