

Phil Diegmann

**Bachelorarbeit  
im Fach Allgemeine Wirtschaftsinformatik**

# **Systematic Development of mHealth Apps: Lessons learned during Development of a mobile Frontend for ePill**

Themensteller: Jun.-Prof. Dr. Ali Sunyaev

Vorgelegt in der Bachelorprüfung  
im Studiengang Wirtschaftsinformatik  
der Wirtschafts- und Sozialwissenschaftlichen Fakultät  
der Universität zu Köln

Köln, August 2013



## Table of Contents

Index of Abbreviations .....	IV
1. Introduction .....	1
1.1 Research Problem .....	1
1.2 Objectives of this Thesis .....	2
2. The ePill-Prototype .....	4
2.1 The System in general .....	4
2.2 The Web Application.....	4
3. What is mHealth .....	5
3.1 Definition.....	5
3.2 mHealth App Categories .....	5
3.3 Classification of the ePill Web Application.....	5
3.4 Why is a special Focus on mHealth Apps warranted? .....	5
4. The Development of the mobile Client .....	6
4.1 Preconditions.....	6
4.1.1 Norms for mobile Apps.....	6
4.1.2 Best Practices .....	6
4.1.3 Internal requirements.....	6
4.2 Analysis .....	6
4.2.1 Assignment of a mHealth App Category.....	6
4.2.2 The different Operation Systems.....	6
4.2.3 Android.....	6
4.2.4 iOS .....	6
4.2.5 Windows Phone 7 and 8.....	6
4.2.6 other .....	6
4.2.7 Possible Frameworks and Technologies .....	6
4.2.8 The Choice for Framework XYZ .....	6
4.3 The Planning Process .....	6
4.4 (The Design Process) .....	6
4.5 The Implementation Process.....	6
4.6 Validation of the mobile Client.....	6
5. Lessons Learned.....	7
6. Conclusion.....	8
Bibliography .....	9
Erklärung.....	10
Curriculum Vitae .....	11

## Index of Abbreviations

app	abbreviation for Application
app user	the intended audience for the app
ePill	a patient-centered health IT service which offers information on pharmaceuticals and aggregation of data in context
framework	can contain source code, tools and libraries, which together provide specific or common but abstracted functionality
frontend	visible user interface for the app user
HIT	abbreviation for Health Information Technology
IDE	abbreviation for Integrated Development Environment
mHealth apps	"aim at providing seamless, global access to tailored health IT services and have the potential to alleviate global health burdens." <sup>1</sup>
information security	Prevention from unauthorized access to information. In this context especially sensitive, personal information
OS	operating system
SDK	abbreviation for software development kit. Bundled software and tools for developing with or for a specified OS or Framework
sensitive information	information, which is personal. Can be related to financial, health or otherwise personal relevant information <sup>2</sup>
usability	"extent to which a product can be used by specified users to achieve specified goals with effectiveness, efficiency and satisfaction in a specified context of use" <sup>3</sup>
use value	the utility of consuming a good or service

---

<sup>1</sup> Dehling, Sunyaev (2013), p. 1

<sup>2</sup> Suggested by Future of Privacy Forum, Center for Democracy & Technology (2011), p. 6, although the definition varies

<sup>3</sup> Yeh, Fontenelle (2012), p. 64 as quoted from ISO 9241-11 (1998)

## 1. Introduction

### 1.1 Research Problem

While it has become easy to develop a mobile health (mHealth) application (app), there is much more to it than just the aspects of the app's core functionality. Currently only very few guidelines, best practices and systematic development approaches for mobile app development can be found. And even less can be found for the specific area of mHealth apps.

Security leaks or even abuse of private and sensitive information can lead to great harm for the app user and to legal issues for the developer. Abuse of personal health related information can result in loss of reputation (e.g. sexual transmitted diseases) or financial drawbacks and decreased chances of employment (e.g. chronic diseases, genetic dispositions)<sup>4</sup>. With poorly developed apps, there is a chance of security leaks and hence for data abuse. Thus the risk for app users increases. A study<sup>5</sup> has shown that only very few mHealth apps entail little or low risk for the app user. Self-publishing through modern sales channels like Google Play (<http://play.google.com>) or the iOS App Store (<http://appstore.com>) and the availability of easy-to-use Integrated Development Environments (IDEs) lower the barriers for entry. Even one-man developers or small teams are now able to easily publish apps with little development effort. Without fundamental knowledge of privacy and security aspects, there is an increase in the non-professional development of mobile apps with inadequate security aspects.

The usability, especially in critical situations, is another undervalued aspect in many non-professional developments. While fancy colors might look appealing to the developer himself, it might lead to confusion for the app user or even to a lack of operability for visually impaired people.<sup>6</sup> Also the need for a intuitive user interface might not be considered as important as it should be.

---

<sup>4</sup> cf. Dehling, Sunyaev (2013), pp. 6-7

<sup>5</sup> cf. Njie (2013), pp. 19-20

<sup>6</sup> cf. Badashian et al. (2008) p. 108

Knowledge of data privacy acts and laws is a premise for a legal, safe and fair development for the developer and the app user. Multiple layers of data privacy laws in Europe on international, national and state level require a certain legal knowledge.<sup>7</sup> Also the benefit of and the need for a privacy policy seems to be ambiguous for many non-professional developers.<sup>8</sup>

This lack of guidelines for mobile app development and of specific guidelines for privacy and usability sensitive apps is only superficially considered by most of the literature. The beforehand highlighted aspects usability and information security are just two of multiple possible requirements. Current research seems not to state which specific requirements, if any, mHealth apps distinguish from other apps or which are needed to be more accented.

## 1.2 Objectives of this Thesis

The purpose of this thesis is to discover, identify and report issues and challenges of the development of mHealth apps by developing a mobile frontend for the ePill system (developed by the University of Cologne, <http://epill.uni-koeln.de>). ePill is a patient-centered health IT service which offers information on pharmaceuticals and aggregation of pharmaceutical data in context.

During the development of a mobile frontend for ePill, all requirements can be addressed more easily than in a completely theoretical context. As a side effect, a mobile app for ePill will increase the accessibility for the ePill system in general and thereby increase the possible user value. Especially in critical situations in which one does not have one's desktop computer at hand, a mobile easy-to-use app can be of value.

The experiences made during the development refer to general mobile app development, but also to the specific development of mHealth apps.

Mainly this thesis aims to describe the planning and the development process and dis-

---

<sup>7</sup> cf. Directive 95/46 of the European Parliament and of the Council (October, 24th 1995), Directive 2002/58 of the European Parliament and of the Council (July, 12th 2002) cited by Future of Privacy Forum, Center for Democracy & Technology (2011), p. 16

<sup>8</sup> cf. Njie (2013), p. 20

cuss all discovered issues and challenges for planning and developing mHealth apps. One sub-objective is to give a short overview about the state of research on guidelines and important factors of mHealth app development. Subsequently, this thesis aims to highlight specific characteristics of mHealth apps and focus on them during the development as well in the conclusion.

## **2. The ePill-Prototype**

### **2.1 The System in general**

### **2.2 The Web Application**



### **3. What is mHealth**

#### **3.1 Definition**

#### **3.2 mHealth App Categories**

#### **3.3 Classification of the ePill Web Application**

#### **3.4 Why is a special Focus on mHealth Apps warranted?**

## **4. The Development of the mobile Client**

### **4.1 Preconditions**

#### **4.1.1 Norms for mobile Apps**

#### **4.1.2 Best Practices**

#### **4.1.3 Internal requirements**

### **4.2 Analysis**

#### **4.2.1 Assignment of a mHealth App Category**

#### **4.2.2 The different Operation Systems**

#### **4.2.3 Android**

#### **4.2.4 iOS**

#### **4.2.5 Windows Phone 7 and 8**

#### **4.2.6 other**

#### **4.2.7 Possible Frameworks and Technologies**

**Xamarin**

**Vaadin**

**HTML 5, jQuery mobile and Phone Gap**

**Completely native**

#### **4.2.8 The Choice for Framework XYZ**

### **4.3 The Planning Process**

#### **4.4 (The Design Process)**

### **4.5 The Implementation Process**

### **4.6 Validation of the mobile Client**

## **5. Lessons Learned**

## 6. Conclusion

## Bibliography

Badashian et al. (2008)

Ali Sajedi Badashian, Mehregan Mahdavi, Amir Pourshirmohammadi, Minoo Monajjemi nejad: “Fundamental Usability Guidelines for User Interface Design”. In: *Computational Sciences and Its Applications, 2008. ICCSA '08. International Conference on.* 2008, pp. 106–113

Dehling, Sunyaev (2013)

Tobias Dehling, Ali Sunyaev: Information Security and Privacy Implications of mHealth Apps: An Overview. 2013, pp. 1–12

Future of Privacy Forum, Center for Democracy & Technology (2011)

Future of Privacy Forum, Center for Democracy & Technology: Best Practices for Mobile Application Developers: App Privacy Guidelines. In: Future of Privacy Forum and the Center for Democracy & Technology. 2011, pp. 1–20

Njie (2013)

C.M.L. Njie: Technical Analysis of the Data Practices and Privacy Risks of 43 Popular Mobile Health and Fitness Applications. In: Privacy Rights Clearinghouse. 2013, pp. 1–31

Yeh, Fontenelle (2012)

Shea-Tinn Yeh, Cathalina Fontenelle: Usability study of a mobile website: the Health Sciences Library, University of Colorado Anschutz Medical Campus, experience. In: Journal of the Medical Library Association. Nr. 1, Jg. 100, 2012, pp. 64–68

**Erklärung**

Hiermit versichere ich an Eides Statt, dass ich die vorliegende Arbeit selbstständig und ohne die Benutzung anderer als der angegebenen Hilfsmittel angefertigt habe. Alle Stellen, die wörtlich oder sinngemäß aus veröffentlichten und nicht veröffentlichten Schriften entnommen wurden, sind als solche kenntlich gemacht. Die Arbeit ist in gleicher oder ähnlicher Form oder auszugsweise im Rahmen einer anderen Prüfung noch nicht vorgelegt worden.

Köln, den 30. September 2013

## Curriculum Vitae



### Persönliche Angaben

Name: Phil Diegmann  
 Anschrift: Wipperfürther Str. 477,  
 51515 Kürten  
 Geburtsdatum: 06.02.1991  
 Geburtsort: Wipperfürth  
 Familienstand: ledig

### Schulische Ausbildung

1998 - 2002	St. Antonius Grundschule in Wipperfürth
2002 - 2010	Engelbert-von-Berg Gymnasium in Wipperfürth, Abschluss: Abitur (1,5)

### Studium

10/2010 - 09/2013	Universität zu Köln, Wirtschaftsinformatik, Bachelor of Science
10/2013 - 09/2015	Universität zu Köln, Information Systems, Master of Science