

Universidade do Minho

Escola de Engenharia

Pedro Francisco Sousa e Silva

**Immutability of Health Data: Private
Blockchain Approach**

Master's Dissertation

Integrated Master's in Engineering and
Management of Information Systems

Work carried out under the supervision of

Professor Manuel Filipe Santos,

and

Professor Tiago Guimarães



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Statement of Integrity

I hereby declare that I have acted with integrity in the preparation of this academic work and confirm that I have not engaged in plagiarism or any form of misuse or falsification of information or results at any stage leading to its completion. Furthermore, I declare that I am aware of and have adhered to the Code of Ethical Conduct of the University of Minho.

Abstract

This thesis investigates the benefits of adopting private blockchain technologies, among other recent innovations, within the health sector. Even though organizations have been concerned about security for a long time, there is a trade-off between security and the exchange of data between entities across the network. The primary attribute of blockchain is thus ensured to provide better integrity, security, and flexibility in sharing information securely across a group or consortium of organizations.

During this project two main use cases were created: integration of **Hyperledger Fabric** with **IPFS** and optimization of management of blockchain infrastructure by means of contemporary technologies. In further sections, each of these use cases are deeply elaborated to give an extended look at their practical usage and results.

The first use case would assume the benefits of using **Hyperledger Fabric** in combination with **IPFS** for secure file storage, where a private network of **IPFS** would store the files and record hashes on the blockchain for integrity. In the second use case on the other hand, there is the design and benchmarking of several network infrastructures of blockchain seeking an optimal configuration. Besides that, there is a discussion about the development of UI tool for monitoring and analysis of the status of the network. To this precise use case, more work is expected in the future to enhance this use case further, to refine even more its robustness, operability and maintainability.

This work will demonstrate such use cases and illustrate how blockchain can enhance data security and operational efficiency in healthcare while resolving challenges in large-scale implementations.

Keywords: Blockchain, Blockchain in Healthcare, Healthcare Systems,

Hyperledger Fabric, Kubernetes;

Resumo

No decorrer desta tese, uma investigação sobre os benefícios de adotar tecnologias de blockchain privadas será conduzida, assim como outras recentes inovações no contexto do setor da saúde. Posto isto, apesar da segurança ser uma das prioridades das organizações já há muito tempo, esta continua a ser uma prioridade que põe em causa o funcionamento correto das operações afetas ao desenvolvimento das atividades das mesmas, mais concretamente aquilo que são transações de dados entre entidades de uma rede homogénea. As principais características importantíssimas asseguradas pela blockchain passam pela melhor integridade, segurança e flexibilidade em compartilhar informação de forma segura dentro de um grupo ou consórcio de organizações.

Durante este projeto, 2 principais casos de uso foram criados: **Hyperledger Fabric** com **IPFS** e otimização de gerenciamento de uma infraestrutura de blockchain com o uso de tecnologias mais padronizadas no mercado de trabalho atual. Estes casos de uso serão explicados em mais detalhe nas secções mais adiante, demonstrando a sua utilidade prática e também resultados obtidos dos mesmos.

O primeiro caso de uso é mais virado para os benefícios do uso de Hyperledger Fabric combinando a tecnologia **IPFS** para termos também características de segurança no que toca ao armazenamento de ficheiros, onde uma rede privada **IPFS** poderá brilhar no que diz respeito ao armazenamento de ficheiros e traqueamento de representações encriptadas dos mesmos na blockchain, para efeitos de integridade de dados. Por outro lado, no segundo caso de uso haverá uma explicação daquilo que foi o desenho e benchmarking de uma série de infraestruturas de rede de blockchain, procurando aquilo que esperamos ser a configuração mais otimizada. Além disso, também haverá uma discussão acerca do desenvolvimento de uma ferramenta web para monitorizar e analisar o estado atual da rede em questão. Para este caso de uso em concreto, trabalho futuro é esperado e, como tal, ideias de arestas a melhorar são descritas, ideias estas que envolvem aprimorar características de robustez, operabilidade e manutenibilidade.

Este trabalho promete demonstrar estes casos de uso e ilustrar em que medida a blockchain pode melhorar a segurança de dados e a eficácia da operabilidade dentro do setor da saúde, pelo que é esperado também que se resolvam desafios relacionados com implementações de redes em organizações de grande escala.

Palavras chave: Blockchain, Blockchain in Healthcare, Healthcare Systems,
Hyperledger Fabric, Kubernetes;

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List of Abbreviations, Symbols, or Acronyms

- IPFS** - Interplanetary File System
- Hlf** - Hyper Ledger Fabric
- GDPR** - General Data Protection Regulation
- HIPAA** - Health Insurance Portability and Accountability Act
- DSR** - Design Science Research
- ICT** - Information and Communication Technology
- CDBS** - Central Bank Digital Currency
- ICP** - Internet Computer
- ACM** - Access control mechanisms
- EMR** - Electronic medical records
- PHR** - Personal health records
- SWOT** - Strengths, Weaknesses, Opportunities and Threats
- KYC** - Know-Your-Customer
- AML** - Anti-money Laundering
- TLS** - Transport Layer Security
- CA** - Central Authority
- MSP** - Managed Service Provider
- PoW** - Proof of Work
- PBFT** - Practical Byzantine Fault Tolerance
- CFT** - Crash fault-tolerant
- P2P** - Peer to Peer
- DHT** - Distributed Hash Table
- CID** - Content Identifier
- DNS** - Domain Name System
- HTTP** - Hypertext Transfer Protocol
- NFT** - Non-Fungible Tokens
- JSON** - JavaScript Object Notation
- IPv4** - Internet Protocol version 4
- IPv6** - Internet Protocol version 6
- IPNS** - Interplanetary Name System
- AC** - Access Control
- IoMT** - Internet of Medical Things
- VM** - Virtual Machine
- LXC** - Linux Containers
- API** - Application Programming Interface
- IP** - Internet Protocol
- SDK** - Software Development Kit
- CPU** - Central Processing Unit
- VPA** - Vertical Pod Autoscaler
- HPA** - Horizontal Pod Autoscaler
- FQDN** - Full qualified name

PV - Persistent Volume
PVC - Persistent Volume Claim
NFS - Network File System
K8 - Kubernetes
DCT - Docker Content Trust
Seccomp - Secure computing mode
CI - Continuous Integration
CD - Continuous Delivery
BPG - Border Gateway Protocol
ARP - Address Resolution Protocol
NDP - Neighbor Discovery Protocol,
LAN - Local Area Network
MAC - Media Access Control
JWT - JSON Web Tokens
mTLS - mutual Transport Layer Security
SPIFFE - Secure Production Identity Framework for Everyone
URI - Uniform Resource Identifier
TCP - Transmission Control Protocol
TPS - Transactions per second
HTML - Hypertext Markup Language
CSV - Comma-Separated Values
KPI - Key Performance Indicator
UI - User Interface
CRUD - Create,read,update and delete
REST - Representational State Transfer
gRPC - Google Remote Procedure Call
IAM - Identity and access management
SSO - single sign-on
RBAC - Role-Based Access Control
OIDC - OpenID Connect
MFA - Multi Factor Authentication
SMS - Short Message Service
TOPTP - time-based one-time password
RPC - Remote Procedure Call
DSR - Design science research
EHR - Electronic Health Record
OTP - One time password
RMI - Remote Method Invocation
XOR - Exclusive OR
UTP - Unshielded Twisted Pair
SCTP - Stream Control Transmission Protocol
SFS - Self Certified File System

ICE - Interactive Connectivity Establishment

NAT - Network Address Translation

PKI - Public key infrastructures

CRL - Certificate revocation lists

HSM - Hardware security models

TX - Transaction

RAM - Random Access Memory

IEEE - Institute of Electrical and Electronics Engineers

1 Introduction

The healthcare industry is in the landscape of a radical modification, dragged by advances in technology, expectations from patients and a highly complex regulatory environment. From digital health solutions to electronic medical records, telemedicine, and connected devices, the proliferation of data is happening in healthcare at rates never seen previously. This explosion of data opens up new opportunities and creates challenges. While on one hand, access to huge volumes of patient information has the potential to transform diagnosis, treatment and preventive care - all to improve patient treatment - this could be problematic because the increasing complexity of healthcare systems coupled with rising concerns on data privacy and security creates considerable barriers to benefits realization [**it-challenges-healthcare**].

The healthcare organization, therefore, finds itself between two poles of extremes: driving innovation through data on one hand, and on the other hand, ethical and legal imperatives of maintaining patient privacy. This gets even more imperative as most healthcare systems across the world are fragmented in nature, encompassing a broad range of stakeholders that include hospitals, laboratories, insurance companies, regulatory bodies, and pharmaceutical firms among others, all of whom will have to share closely guarded information. Ensuring that the data remains accurate, secure, and accessible only to authorized parties stands as one of the most formidable issues associated with healthcare today [**healthcare-data-fragmentation**].

Traditional medical data management systems are prone to inefficiencies and vulnerabilities. Centralized databases remain at the mercy of even basic cyber-attacks, data breaches and manipulation from internal sources. Moreover, many old health management systems face operational difficulties, such as non-interoperability, which complicates the free flow of information between different agencies. The above limitations signify the urgent requirement for more secure, flexible, and trustworthy systems for managing healthcare data.

But working amongst all these critical challenges, the blockchain technologies have inspired confidence. What was ostensibly conceived as the underpinning technology for cryptocurrencies like **Bitcoin [btc]**, blockchain itself-in core concepts of decentralization, transparency, immutability and cryptographic security-has kindled interests in industries way beyond finance. Particularly in healthcare, blockchain holds real promise to offer an indestructibly secure way of recording transactions and managing data where trust and security are paramount. Blockchain can provide a decentralized solution that removes some of the associated risks of using centralized databases by distributing the data across a network of nodes, none of which has unilateral control over the entire system [**healthcare-data-breaches**].

Within the sphere of blockchain frameworks, **Hyperledger Fabric** shows up and shines as it is considered one of the most convenient for the healthcare sector. **Hlf** is described as an open-source project covered by **IBM** and performs as a permissioned blockchain framework for enterprise usage. Unlike public Blockchains, which allow everyone to participate, **Hyperledger Fabric** is designed for participation in environments where participants are known and trusted. This is an important permissioned model necessary for healthcare, where regulatory compliance-like **GDPR** and **HIPAA**, along with patient privacy is a non-negotiable requirement. Another very important aspect of the framework is the modular architecture, which provides great flexibility because an organization can adapt the system to suit their needs in any area of concern such as record keeping, tracing drugs, or settling claims [1] [**hyperledger-hippa-and-gdpr**].

The thesis is aimed at discussing the application of **Hyperledger Fabric** as a transformative technology to approach the most important challenges faced by healthcare systems. The key focal area in this research is how **Hyperledger Fabric** can be mobilized to advance the qualities of data integrity, trust, flexibility and coordination in the healthcare ecosystem. Therefore with this, we will answer the very research questions which are "**How can a**

private blockchain network be utilized to improve data integrity, security, flexibility and collaboration within the healthcare ecosystem?" and "**What kind of infrastructure design is necessary to support a blockchain solution in such a vast and complex environment as healthcare?**". By implementing blockchain through a distributed ledger, cryptographic algorithms and consensus mechanisms, **Hyperledger Fabric** is seen as the first utilization in building a novel model of healthcare data management that engenders trusted expectation among stakeholders in the assurance of sensitive healthcare information being controlled against unauthorized access and tamper-proof.

We will start with data integrity in healthcare, which at its core wants correct and tamper-proof records to form the very bedrock of diagnosis, therapy and even billing. The immutability ledger in **Hyperledger Fabric**- cryptographically linked and unable to be altered- offers a big advantage over traditional databases. The feature will ensure that the data can't be tampered with and will provide a clear, transparent audit trail to verify if any information at any given time is genuine. Letting patient data, medical history or prescription be recorded in a secure way, **Hyperledger Fabric** may become the technology capable of excluding frauds of data manipulation and unauthorized access altogether. The other focus is data flexibility and interoperability, which have been a nightmare in health care for quite some time. Often, there are different systems within different health organizations that are incompatible with one another and usually lead to data silos, which cannot easily facilitate smooth information exchange. The modular design of **Hyperledger Fabric** allows innovation in health care to build a blockchain-based solution that interfaces with existing systems and is ability to adapt to future technologies [2].

This flexibility not only makes easier migration from older systems but also promotes innovation since new functions can easily be added as the needs of the industry develop.

More importantly, this research will go a long way in addressing the need for collaboration among healthcare stakeholders. Since the data is scattered across hospitals, insurance companies, pharmaceutical firms and regulators, the ability to share information in a secure manner has never been so critical [**multisectoral-healthcare**].

Permissioned network and granular access control mechanisms are provided by **Hyperledger Fabric** to enable wide collaboration among health organizations and ensure that sensitive data is inaccessible to unauthorized parties. Preceding with such control provides a trusted setting where stakeholders are free to share their information, knowing it will help achieve greater advances more quickly, improve patient care, and give way to smoother processes. Beyond both of these key themes, consideration is given to the specific use cases of **Hyperledger Fabric** in healthcare: supply chain management, identification of patients, and clinical trials. Each of these has unique problems that blockchain technology can help solve.

For instance, origin and journey tracing in supply chain management will detect the risk of counterfeit drugs reaching the market. In identity verification, **Hyperledger Fabric** will help the patients to be in control of their health records and grant access to specific providers with permission instead, hence advancing privacy while reducing the risk of identity theft.

In this respect, the thesis will discuss the technical deployment of **Hyperledger Fabric** by utilizing state-of-the-art technologies such as **Kubernetes**, mainly in on-premise environments where healthcare organizations would wish to have full control of their infrastructure. Thus, using **Kubernetes** for the deployment of a **Hyperledger Fabric** will provide the ability to assess the scalability, security and performance of this deployment and then compare it against the conventional systems in operation within the context of today's healthcare. The technical assessment will also include an analysis of the advantages and disadvantages of such deployment, thereby offering practical insights into any healthcare organizational considerations towards blockchain implementation. Finally, the research will try to provide a holistic pathway on the expected work regarding the future of the second use

case project, considering potential risks and pitfalls that might arise, areas of investigation, and more. While huge, the benefits of blockchain are not devoid of problems in application, including most especially, those related to governance, regulatory compliance, and integration into the existing healthcare system. As such, this thesis tries to give equal attention to considerations in an effort to balance the thesis as regards to the role **Hyperledger Fabric** can play in transforming healthcare. To sum up, the present thesis will critically assess the magnitude of transformational impact **Hyperledger Fabric** may have on the healthcare industry through the in-depth review of its applications and respective technical and strategic consequences. As we forge ahead into a future characterized by data-driven innovation, collaboration and trust, blockchains could provide that much-needed tool in reshaping the health environment to ensure not only the secure but also efficient and ethical management of patient data [3].

Consequent upon the rapid development and increase in health data volume, security, and privacy concerns, and efficiency, the healthcare industry currently finds itself at an extremely critical juncture. As health care providers increasingly adopt digital health solutions-such as electronic medical records, telemedicine platforms and connected devices -the overall volume of health care data resources is developing at an exponential rate. This data outrun instigates a vast number of opportunities to improving systems that help in taking care of patients, but it also compiles a serious deck of challenges in data management, security, and sharing. Perhaps the most relevant of this deck is the concept of data integrity, which remains fragile in healthcare systems as in any worldwide realm [**data-volume-increase-healthcare**].

These inaccuracies, unauthorized accesses and data changes may critically lower patient safety and impact the quality of care. Traditional data management infrastructures, often centralized in architecture, have proven very vulnerable to many forms of data breaches, cyberattacks and insider threats. What could represent an example of this shameful situations is, in the healthcare organizations sphere, this being the biggest target for ransomware attacks, where many have resulted in an unfortunate financial and reputational disasters. In 2021 solo, more than 40 million health record breaches were declared in the United States. Furthermore, fragmented health systems disappoint further by creating silos of data where different organizations have incompatible systems, creating barriers to collaboration and limiting interoperability, furthering vulnerabilities. Other than security challenges, demands for efficient, flexible and interoperable systems have never been more urgent [**data-breaches-2021**] [**healthcare-privacy**].

Health care organizations struggle with outdated, legacy systems that do not permit seamless integration across providers, insurers, and regulatory agencies. All these latter systems are frequently incompatible with each other, making it very difficult to facilitate the real exchange of critical health data in real time. This lack of coordination obstructs innovation and operating efficiency, delaying treatment, inflating health care costs, and adversely impacting patient outcomes [**legacy-healthcare**].

Moreover, the healthcare system relies heavily on trusts: both in data shared between stakeholders and in security around that data. Patients, providers, insurance companies, and regulators all need to know that when they collaborate, their information is exchanged correctly, securely and in a tamper-evident manner. Obviously, many systems today do not ensure this level of trust, with all the associated benefits of collaboration and cooperation that would enable improved patient outcomes. Abstracted, to engage against regulatory frameworks such as **HIPAA** and **GDPR** and gather new solutions and have in mind restrictions related to the usage of traditional providing of data or even cloud storing that may suffer from scalability, there comes the urgent of improving the current technology landscape presented in the healthcare facilities.

1.1 Finality and Objectives

If putted into deep thinking, in the sphere of the modern new world, blockchain technology has loom as an auspicious solution to the given number of challenges faced by the healthcare industry. It's enormous traits can range from cryptographic security, transparency and immutability and ,by retaining such characteristics, it also seeks influence in securing and managing sensitive data. It aims to safeguard the gathering of data across a networking of nodes, making it tamper-proof and erasing the traditional single points of failure. In another deck of terms, blockchain can enable smooth data allocation between heterogeneous entities and yet making certain that only conceded parties have privileges to specific and maybe confidential pieces of information.

Within the vast array of blockchain frameworks, **Hyperledger Fabric** looms as particularly well-suited to addressing the specific needs of the healthcare environment. It provides the flexibility, scalability and security that serve as the genesis block for enterprise-level applications. Unlike public blockchains such as **Bitcoin** or **Ethereum**, **Hyperledger Fabric** permissioned model allows more control over access to the network, ensuring that only trusted participants are allowed to validate and access data. This is a crucial feature in healthcare, where strict privacy regulations and the need for secure, authorized data sharing are very important, not speaking about the need of on premise implementations which are also very possible with this framework [**btc**] [1].

Hyperledger Fabric's modular architecture also enables organizations to customize their networks to meet specific needs. It can be used for medical record management, pharmaceutical supply chain tracking, or patient identity verification, the platform can be adapted to a variety of use cases. This flexibility not only facilitates innovation but also supports the integration of blockchain technology with existing legacy systems which reduces the friction associated with technological adoption in healthcare settings.

The research and project is motivated by the growing recognition of the transformative potential of blockchain and also by the major other main technologies used currently in the market. With frequency, lots of people discuss the matter of decentralization, but lack on the sphere of trying to solve the problem in hands. When there is a depth relation within the creation of an conjunction between centralized and more decentralized technologies, we get the means to empower healthcare institutions to face their real problems. While blockchain has already been explored in sectors such as finance and supply chain management, it's application in the healthcare sector remain relatively fledgling. Nevertheless, early trials and implementations have been showing promising in aprimoring data security, interoperability and collaboration between multiple organizations or even stakeholders [**blockchain-in-finance**] [**blockchain-in-supply-chain**].

The reliance from the healthcare on trust makes it an ideal candidate for the blockchain landscape, even more if there is careful thinking about the need of securing and verifying sensitive patient data. However, deploying such complex system in the healthcare context does not cease to be very challenging and demanding. A lot of possible barriers to achieve this can be the Technical, regulatory, and operational spheres of the sector. Scalability is also another dual knife problem, and remains as so in large healthcare environments with enormous and vast amounts of information and high transaction volumes. This is a huge concern in both worlds since, within a blockchain there is the need of careful thinking such that there is the concern regarding the degree of consensus which delays requests out. Furthermore, the integration of blockchain with legacy systems and compliance with existing regulatory frameworks must be thoroughly evaluated.

This thesis is driven by a desire to explore these challenges and opportunities in depth. Specifically, it seeks to understand how Hyperledger Fabric can be designed, implemented, and deployed to address the critical needs of healthcare organizations. By investigating the ways of deploying a private blockchain network within healthcare systems.

This research aims to answer the following key questions:

1. **"How can a private blockchain network be utilized to improve data integrity, security, flexibility, and collaboration within the healthcare ecosystem?"**
2. **"What kind of infrastructure design is necessary to support a blockchain solution in such a vast and complex environment as healthcare?"**

This questions are imposed, so that it becomes more evident in a qualitative way the achievement of the result in mind. Further assumptions about actual quantitative goals must be ensured as the thesis goes along but answering this questions is the basis to come up with a suited solution in practical but also in theoretical knowledge terms.

As obvious as it may be, every research must have it's own objectives and this one could not be different, specially this one where there is the possibility to gather multiple objectives due to the countless numbers of opportunities and challenges that could be faced regarding this procedure of recursion to the blockchain. This becomes even more clear according to the area of investigation which is healthcare, a institution that depending of the department becomes a high level risk sector to face, not only because of that but also mainly because of it's many problems, it's public/private nature that is always changing, the regulations required to be apart of the procedures, the continuous innovation, the fact that is researched by a vast number of different areas, the number of stakeholders involved, the number of organizations involved and the change resistance. With this in mind, the objectives covered will be the most general possible and they will aim to solve the majority of problems that the project may face and with this there are a lot of risk as well but those will be also described further in this work. The objectives that are intended to be reached in the realm of this work are the following:

1.2 Document Structure

This dissertation is divided into several chapters: "Introduction, State of Art, Methodologies and Tools, Use Cases, Discussion, Conclusions," and "References."

Introduction: This chapter is reserved to give a contextualization and expose what is about to be delved. This is accomplished by explaining the context, motivation, finality, objectives and document structure.

State of Art: Within this chapter there is the supply of the most important theoretical concepts that are pretty relevant for the case under scrutiny.

Approach: In this chapter, there is the explanation of DSR and how it is being used currently in general terms, the explanation of SWOT analysis, the expected project plan, a list of risks, and the relevant tools divided by area of concepts (blockchain, microservices, analytics and web development).

Use Cases: On this section, there will be mention of two major use cases that were conceived during the project, standing as the biggest font of knowledge of this work. In each section, objectives, plans, discussions, and even conclusions will be conducted. Also, one of the use cases is more practical, having topics that are more specific to it's sphere, such as implementations, solution comparison, approach, and final architecture.

Discussions: This represents the discussion of the whole project and not a single use case. This is important to reflect over the results obtained as a whole and not only specific to a single use case.

Conclusions: In the conclusions section, there will be plenty of views around final considerations, project limitations, and future work. This will be done in the context of the general project, since every use case already speaks about such things.

References: The references chapter will be around the bibliographical references that were used along the dissertation.

1.3 Answer Research Questions

Answer Research Questions is the basis of the project, if answered this question will generate practical and also theoretical insights that will foster innovation. The questions mentioned here, are the ones that were acknowledged in the section 3, being those "**How can a private blockchain network be utilized to improve data integrity, security, flexibility, and collaboration within the healthcare ecosystem?**" (question 1). And "**What kind of infrastructure design is necessary to support a blockchain solution in such a vast and complex environment as healthcare?**" (question 2), respectively. As it will be shown further in this thesis, to gather the information to answer such answers, there will be mentioned the existence of 2 major use cases: One works more as a extension, alought inspected firstly and the second one, which is conducted using **DSR**(Design Science Research), is what is required as genesis block for creating use cases that can then be extended using the first use case. In other terms, the first one is mainly theoretical and the second one try's to solve a real world problem within the healthcare realm. Answering those questions, not only is important for the thesis itself but also for the healthcare sphere and other contexts that could adopt the same logic to solve their problems, being essential answering them as such occurs where both practical and theoretical inceptions are very important. Making the second project more appealing due to having proven results to achieve a given solution. Despite this being the main objective, inside of the second use case there are others that are more quantitative, thereby more concrete. Some can be used as metrics in other contexts, others may not but the importance of these questions remains important alought not that much specific when it comes to the refereed metrics and even the requirements disposed in the use case section.

Both questions are answered by using the conjunction of both research prior use case and by delving into the use case itself, alought it is believed that the use cases represent better the potentialities of this work because the theory by itself sometimes is not sufficient to cover vast cases, such the case of the sector under study, more concretely, the healthcare environment.

1.4 Contribute

Another objective that stands out with honor is the honored **contribution**. Despite this being obvious and also be part of the **DSR** methodology, it is still important to mention concretely this as an objective.

2 State of Art

Speaking about the state of Art, there is a need to explain the current landscape surrounding 4 major subjects: **Blockchain**, **Hyperledger Fabric**, Scalability and **IPFS**. Each one of this topics is important to the given research, since they are considered in at least one of the mentioned use cases.

The first one is more about the current general state of the blockchain in the healthcare environment,focusing in the overall current play of the blockchain in the world, it's influence in healthcare, its benefits, requirements, applications and even the challenges that it is facing. The second one is more concretely about the **Hyperledger Fabric** network which is the framework that is being used in both use cases, having more merit than other private

solutions due to its time on the market, the enterprise behind it and the number of works that are already published around this technology which makes it ideal for this project. The third is Scalability, a crucial huge concern in enterprise level contexts because it is the major concept for high availability and meeting the demand of a vast number of users. Finally, the forth is about **IPFS** that plays a role of complementing the blockchain capabilities.

2.1 Blockchain

Blockchain technology, introduced in 2008 through the cryptocurrency **Bitcoin**, has been evolving and expanded its influence across numerous sectors within **Information and Communication Technology (ICT)**, with its usage on the rise in recent years. Its adoption has been in majority due to the phenomenon of **cryptocurrencies** [4], **CDBS** (Central Bank Digital Currencies) [5], **capital investments** and **substantial interesting use cases in blockchain startups** which gathered interest and development of this technology.

This technology operates by storing information in records distributed in a decentralised manner to all computing devices within the blockchain infrastructure. The system functions within a peer-to-peer network consisting of interconnected nodes. Every node retains its individual copy of the ledger, documenting all transactions within the network. The transactions are organised into blocks, each cryptographically linked to the next, forming a chain of blocks known as the Blockchain. Thanks to its advanced features, this technology offers multiple services, such as traceability, integrity, and security, while maintaining public and decentralised information storage, thus preserving privacy. Blockchain technology holds the promise to transform various sectors, including healthcare. Despite the associated challenges, ongoing research and developments actively address these potential hurdles. As blockchain technology progresses, its potential applications and advantages in the healthcare sector are just beginning to unfold [**btc**] [6].

2.2 Types of Blockchain

Blockchain technology primarily exists in three forms: public (permissionless), consortium (public permissioned), and private (permissioned). The main differences between each type of network rely on who can access, write, and read data on the Blockchain. In order to come up with a deep understanding over it's characteristics, it's worth exploring the specific features of each type [**blockchain-in-healthcare**].

Due to their transparency and openness, public blockchains have no barriers to who can use and participate in the process, which makes them more decentralized in a certain sense. The blockchain has publicly visible records that anyone on the internet can verify and use to add a transaction block. Examples of public blockchains include major project networks like **Bitcoin**, **Ethereum**, **Tron**, **ICP** and **solana** where even its use case can be very different since, as example, **Bitcoin** is meant to only monetary transactions of information while **Ethereum**, due to its difference architecture can even run logic over it by leveraging smart contracts [7] [8] [**ICP**] [**solana**] [**tron-and-eth**].

On the other hand, private blockchains are blockchains in which an organisation or entity centralises writing permissions while reading permissions can be public or arbitrarily restricted. This means that the configuration of the network is of the responsibility of a single organization. Additionally, they allow mining and provide high privacy due to writing and reading permissions restrictions. The biggest advantage of private blockchains over public ones is that participants can adapt their rules and logic according to their business although a given number of members must agree with each other about these rules depending of how the network is configured, allowing them to religiously set what they see as a valid transaction within their organization. Moreover, participants and its components are

known, restricting any addition of forged blocks to the chain. Additionally, although not recommended manual intervention can correct faults and chain participants can control the maximum block size, addressing scalability issues or their proper use case. Verified participants only verify transactions, leading to lower processing power and cheaper transactions. This type of blockchain is similar to a standard distributed database. **Hyperledger Fabric** is the most mentioned permissioned [9] **[private-blockchain]**.

Finally, let's explore the consortium blockchain. This type comprises a set of organisations or entities and is partially decentralised. Unlike assigning power to a single entity like in permissioned ones, the consortium blockchain divides this power among a group of people or entities known as consortia. Only this defined group can verify and add transactions, which need to be acknowledged by consensus nodes. A small portion of nodes is selected to determine consensus. This number of nodes are defined by the rules shared across heterogeneous organizations in contrast to only permissioned blockchains, precisely because these participants share a given flow in their normal activity which makes it easier to exchange information in a more reliable way. **Hyperledger fabric** can also be an example of a consortium blockchain and so as **R3CEV [consortium-blockchain]** [1] **[R3CEV] [consortium-blockchain]**.

Now, let's examine the following table, which provides a comprehensive overview of the properties exhibited by each previously discussed blockchain.

Property	Public Blockchain	Consortium Blockchain	Private Blockchain
Consensus determination	All miners	A selected set of nodes	Selected Organisation
Read Permissions	Public	Public or Restricted	Public or Restricted
Immutability	Nearly Impossible	Could be tampered	Could be tampered
Efficiency	Low	High	High
Centralised	No	Partial	Yes
Consensus Process	Permissionless	Permissioned	Permissioned

Figure 1: State of art: blockchain types table

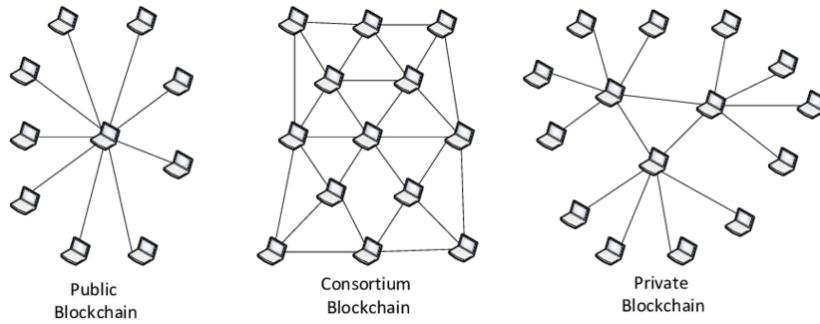


Figure 2: State of art: blockchain types visual representation, Source: **[private-vs-public-vs-consortium]**

Each type of blockchain, irrespective of its classification, presents distinct advantages tailored to its particular use case. Public blockchains may be suitable for certain situations, while in others, it may be necessary to ensure private control through consortia or private blockchains. The choice of which type of blockchain to implement ultimately depends on the specific service or application for which it is needed **[private-vs-public-vs-consortium]**.

2.3 Blockchain and Healthcare Sector

The healthcare sector is a problem-oriented domain with intensive data usage and personnel involvement, where the ability to access, edit, and trust data emerging from its activities is crucial for the sector's overall operations. Currently, healthcare institutions face a growing demand for data from the industry and research organisations. Simultaneously, unauthorised sharing, breaches and theft of sensitive data continually undermine public trust in these institutions, which can be fatal in certain critical level information's. A third issue involves bad and non standardized practises in the healthcare ecosystem, such as problems with medications, procedures, competencies and patient falsification. Given this set of challenges, it is necessary to explore alternative approaches to the existing ones. With key attributes such as decentralisation, distribution and data integrity, without needing third parties, blockchain technology can surge as a potential allie to fight this problems. In addition, this technology can also ensure and improve existing interoperability, information sharing, access control, provenance, immutability and analytics of data among stakeholders, along with an extensive set of features. This way, the healthcare sector is moving towards a new infrastructure capable of building and maintaining trust among all stakeholders speeding up innovation [10] **[healthcare-theft-data]**.

The immutability offered by blockchain is a crucial option for health data, safeguarding health records and clinical outcomes and ensuring regulatory compliance when standardized practises get achieved. The use of smart contracts demonstrates how this technology can support business logic and ,by taking leverage of other technologies, potentially enhance processes of real-time monitoring of patients ,medical interventions, enhancing patient data security, reliability, privacy, availability and management of the infrastructure. It has the power to manage patient data, enabling the exchange of medical records between different healthcare institutions while maintaining a record and control over access to this data. Another application is related to the pharmaceutical supply chain and developing measures against counterfeit drugs. Despite the substantial costs of developing new drugs, including trials assessing the drug's safety and efficacy, smart contracts facilitate the informed consent procedure, improve identity management, and enhance data quality. Providing patients with access to manage their identity also allows the integration of the informed consent procedure, ensuring the privacy of individual health data **[blockchain-patient-control]** [11] **[blockchain-counterfeit]**.

According to **IBM**, 70% of healthcare leaders predict that the most significant impact of blockchain in the healthcare domain will be in improving the management of clinical trials, ensuring regulatory compliance, and establishing a decentralised framework for sharing electronic health records **[IBM-reference]**.

2.3.1 Key Blockchain Benefits/Features When Applied to the Healthcare Sector

Speaking about blockchain influence within the healthcare sector. To understand why this technology can be viable for biomedical and healthcare applications, the key benefits and advantages it presents to the sector are respectively data integrity, data traceability and data security due to the logic introduced in smart contracts and it's cryptographic schema and the flexibility of supplying data, because the ledger is like a puzzle and when you share data the recipient can check if the data is actually valid using this puzzle. Furthermore, with the ongoing evolution of the healthcare landscape, blockchain technology plays an increasingly vital role, providing innovative solutions to tackle various challenges within the sector [12] [13].

A. Authentication

Blockchain provides secure storage and ensures the authentication of records or other private information stored

in blocks along the blockchain. This authentication process requires a specific private key linked to a public key to initiate the creation, modification, or viewing of information stored on the blockchain [btc].

B. Immutability

This technology supports only creation and reading functions, making it challenging to alter data or records. As a result, blockchain is well-suited as an immutable ledger for recording critical information, including insurance claims records and confidential patient data. Immutability is established via a consensus mechanism whereby a network of nodes must collectively validate transactions before they are appended to the blockchain. Transactions are linked to each other which make a block and a block is also connected to the previous block, all cryptographically, thus creating a chain of blocks that reinforces the security and integrity of the recorded data [btc].

C. Provenance

The owner can only change ownership in the blockchain, following cryptographic protocols. Furthermore, the origins of assets are traceable, allowing for verifying sources and data records. This traceability enhances the reuse of verified data. Therefore, the blockchain is well-suited for managing critical digital assets like patient consent records. This traceability is achieved through cryptographic techniques, ensuring a secure and auditable history of asset ownership changes.

D. Robustness/Availability

Each node in the blockchain has a complete copy of the historical data record. This characteristic makes it well-suited for the preservation and continuous availability of important records, such as patients' electronic health records. Data distribution among nodes ensures redundancy, contributing to the blockchain's resilience and reliability for long-term data preservation. Combined with other existing technologies, this concept of Availability can be even more improved, making single nodes available even though some failures occur [btc].

E. Security

Blockchain technology can be a powerful ally of healthcare security, since it leverages advanced encryption, distributed consensus and immutability if everything is well designed. Putting all features together, it may represent a strong resource when it comes to cyber threats, malicious actors within the organization and lack of integrity in the possessed data. To put it more clear, advanced encryption preserves data confidentiality, distributed consensus can prevent malicious actors from modifying the data if well designed and immutability, due to this encryption linkage that is usually associated to a puzzle, can indeed make sure that the data is not tampered [encryption-algorithms].

F. Privacy

Privacy comes along as another big pillar that, not only is important within the healthcare landscape, but also plays as a huge concern in every realm of information management. Blockchains usually come with a certain number of features that ensure privacy. In some types of blockchains the privacy is achieved by not knowing which person owns what (public), while in the other hand the privacy is achieved by **ACM's** (Access control mechanisms). Regarding the second way to achieve privacy, more concretely in the healthcare environment, this achievement is filled by facilitating secure sharing of medical information among authorized parties, enabling granular control over the access of healthcare data and by ensuring pseudonymity in transactions which by extension gives the blockchain usage benefits like authentication, immutability, provenance, robustness, availability, security and privacy where all together improve security, transparency and privacy [privacy-healthcare].

2.3.2 Implementation Requirements

To successfully implement a blockchain, a certain number of aspects must be fulfilled: interoperability, security, consistency, integrity, data immutability, cost and resource effectiveness, trust and transparency, and complexity [14].

These requirements are a must for establishing the groundwork for a resilient and efficient blockchain system tailored to healthcare needs which means that they are shared across multiple blockchain implementations. The detailed examination of each requirement will provide insights into the necessary considerations for successful implementation in the healthcare domain [15].

A. Interoperability

Any organization and ,more specifically, healthcare systems encounter challenges ensuring interoperability, which represents a major barrier in health management systems. The lack of universal standards contributes to this issue. Altough standards are discussed every day, blockchain technology can mitigate this issue by enabling the interoperability of electronic health systems with current healthcare systems.

This integration comes facilitated by blockchain due to the flexibility of most of the implementations(ex: **Hyperledger fabric**), where health information can be exchange across different systems, according to a before hand setting of rules, fostering a more interconnected and efficient healthcare ecosystem in a controlled and secure environment [14].

B. Data Security

In cases where multiple entities are involved, there must be a way to ensure that data is secure. In order to ensure that this data is actually safe, there is the surging of Blockchain because it can ensure higher security, privacy, and trust among multiple parties compared to traditional healthcare systems. This is mainly because of the characteristics that were mentioned before. To mention the main reason for this to happen, increased privacy and trust by all entities is achieved by a consensus of nodes where the rules for establishing who can do what and what is determined as a valid transaction is also something that must be agreed between a consortium of organizations, where the number of organizations that must agree in these definitions depends also on the agreement of the involved. This creates transparency, is more easier to setup than by using a conventional technology because everything is just well and previous thought and enhances the overall security of patient data, instigating for a system where every action within the consortium or even outside is verifiable , traceable across the network and thereby valid [14].

C. Data Integrity

Lack of data consistency of medical data is a major problem in the modern landscape. Data inconsistency can cause delays and higher costs in completing the overall health process for any patient, not speaking about research bad results since researchers that want to improve patient service rely on this data. Therefore, a blockchain-based healthcare system must ensure that health data is consistent and cannot be altered by unauthorised entities or malicious actors [14].

By correctly leveraging blockchain technology we can possibly guarantee data consistency, integrity and immutability by creating a tamper-resistant record of all transactions. This enhances health processes, providing a secure and unalterable history of each patient's medical data and even possibly setting rules to accept or dismiss information if the network provides something such as a smart contract, therefore providing integrity at the max level.

D. Cost and Resources

Currently, healthcare systems are consuming more resources in terms of costs, computations, time, personnel and machinery. For example, in most transactions, the presence of intermediaries may lead to more delays or resources required to perform specific tasks. One of the key requirements when implementing a blockchain-based system is the possibility of reduction of costs and transaction delays that can be caused by third parties, multiple entities involved or any other reasons [14].

Blockchain technology increases processes effectiveness by eliminating intermediaries and possibly reducing the overall resource consumption, resulting in a more cost-effective and efficient healthcare system.

E. Trust and Transparency

With the current healthcare system, it is necessary to build trust among various stakeholders to ensure more secure data storage and sharing processes. Maintaining complete trust and transparency becomes a significant challenge as data is stored and shared among multiple parties. A blockchain-based system eliminates the overhead of intermediaries and creates a deterministic source of data thus building more reliable and transparent healthcare systems. By eliminating intermediaries, blockchain establishes a system where each transaction is verifiable, traceable, and transparent, building trust among stakeholders and preserving the integrity of health data.

This becomes all possible due to the cryptographic nature of blockchain, which creates less human interaction and by extension creates error prone processes and also removes probable bad actors that may be within those processes, which creates deterministic operations by extension.

F. Complexity

Current healthcare systems involve multiple stakeholders and are more complex in storing, sharing, and processing medical data and other billing-related information. Therefore, one of the requirements for a blockchain healthcare system is to have fewer complex processes to prevent unnecessary complexities and delays at various stages of the process. Simplifying processes within a blockchain-based healthcare system streamlines the overall workflow, reducing complexities and enhancing efficiency. This ensures smoother stakeholder interactions and minimises delays in critical stages of healthcare processes.

Altought the processes can become simpler, there must be a conscious thought from the organization that depending of the design of the blockchain solution the system may become complex. Standardized approaches, operational guides and recovery plans usually are ways to also remove this complexity more into the nature of managing the network.

2.3.3 Implementation Challenges/Issues

Issues and challenges must be considered when contemplating the implementation of a blockchain-based health system. The challenges identified in the research are listed and detailed throughout this section [14].

A. Security and Privacy

Looking to the security aspect, there is a concern about ACM's (Access control mechanisms like for example ACL's),authentication and non-repudiation which can be a extreme barrier when it comes to offer overall data integrity,confidentiality and availability of this sensitive information. Restricted access to controls, querying ,writing and provide a correct logic to handle information are the main mechanisms to making sure we achieve the wanted result, which can be challenging since there other problems associated with this. As a example, non-standardized

encryption protocols create heterogeneous processes between organizations and even within the same organization, imposing a challenge when it comes to access information [16].

B. Interoperability

Interoperability is a crucial requirement for the healthcare sector since the proper organization or multiple organizations needs to access this data, either for own usage, investigation, giving information to a supplier or any other entity that requires the usage of a given slice of data. This involves sharing and transferring data between different sources, which is not optimal. The biggest issue with interoperability is, in the current methodology, that data storage is done in different sources within the healthcare institution. This is due to the fact of how Centralized data storage operates and it poses a problem for healthcare providers as it consolidates all health records in a single point but with multiple data sources. This becomes a issue arising from fragmentation of health data, slow access, and the quality and quantity of data for medical research [17].

Many records are generated daily and stored centrally in different hospitals. Since the data is stored across various hospitals this may result in the loss of data and the patient needs access to the contained data. Blockchain technology can come into play to ensure interoperability among all hospital systems, since it helps sharing data in a secure and effective way. With its decentralised, distributed ledger and the possibility to implement various rules and business logic in the processes, blockchain faces the challenges of centralised data storage because it allows more efficient and secure health data exchange between different healthcare entities, ensuring data integrity and accessibility [16].

C. Data Sharing

Data sharing is a huge problem when considering healthcare records. Sharing these can be challenging, as unfortunately the records of an individual may be stored in various locations. In order to a Patient have a comprehensive view of it's state, behind the hoods, it must gather records dispersed across multiple healthcare units which sometimes is not feasible and, also unfortunately, this also applies to healthcare providers as they need access to up-to-date patient data if records are located elsewhere. Since this records are dispersed in a vast number of institutions, this becomes a challenge for seamless sharing, due to bureaucracy and because it's hard to gather information from a vast number of points.

Now, this becomes even worse if some data is not meant to be shared to certain entities. As instance, hospitals and insurance payers may be reluctant to share data too easily with other entities. One reason could be that the hospital wants to keep the prices at which it gets the products for it's activity. Thus, mechanisms must be created in order to tell what which entity can access from where. Blockchain offers this if well implemented, creating a enhance data sharing in healthcare by establishing a secure and transparent mechanism. It enables a decentralised approach to data storage and sharing, ensuring that stakeholders have controlled access to relevant and up-to-date information while maintaining data integrity [16].

D. Mobility

Since there is a substantial rise in smart devices, sensors and other kind of technologies, mobility is a important characteristic that the data must have. This becomes very hard since by moving data we must make sure that it remains secure and that it complies with legal requirements. With this in mind, blockchain is a suitable solution to have this moving of data respecting the business logic, empowering users with real time access to their medical records, ensuring the best security standards [18].

E. Transparency and Confidentiality

The transparency of information during a transaction is also very important, although often seen as a drawback. In a blockchain, everyone can see everything, resulting in higher transparency but lower confidentiality. Even despite using hash values for anonymity, users can still potentially be identified by analysing transaction publicly available transaction information. This poses a threat particularly for critical healthcare applications where patient-related data is sensitive and confidential [19].

F. Speed and Scalability

A real issue is real-time healthcare applications based on blockchain. This is because transaction times can vary depending on the protocol used, number of nodes within the consensus, network, current volume of transactions and other constraints. In other words, there must be careful thinking in terms of what it is needed and the amount of decentralization that we want so it does not affect the available computing capabilities and the volume of medical transactions required for such healthcare systems. Also, by recurring to horizontal scaling there may be a possibility of increasing the number of components that serve requests without actually increasing the number of members of the consensus, which could be valuable in certain situations but further benchmarking is required to see until each measure it can help [20].

G. High Development Costs

Healthcare systems based on blockchain can incur high development and operation costs. Although the solution excels in flexibility, refactor the way the things are currently done takes resources. With this in mind, understanding how it can be done at the minimum usage of resources is something that is seen as challenge but there must be careful thinking on this matter [21].

Standardisation

Because there are a lot of uncertainties along the way, it's always important to seek standardization. This is very important, since standards usually occur from given situations that were faced before and it becomes precedent to actually use already well established best practices that faced the same exact problem, precisely because they were proven to solve the given problem. With this in mind and ,specially concerning the healthcare, there must be specially defined what types of data, size , format and other kind of characteristics can be recorded into the blockchain. Also, there must exist clear guidelines about which data should be stored on-chain or off-chain. Having on hands these kind of information is more than greater to ensure integration between blockchain technology and the healthcare systems [22].

Cultural Resistance

Stakeholders that were used to other ways of managing data may present resistance to change. Is it either by relying on paper-based procedures and Electronic Health Records or other online services. This personal is even more skeptical to actually have a platform that makes sharing of data something common, which can be revealed as being a hell of a challenge, also because there was also times where the online services stopped working and because they had the paper from older stakeholders, they were able to function almost at 100%. Besides revealing all of the benefits we also must present blockchain as something that hardly could become unavailable and availability itself is something as much harder as changing people's minds. To put it clear, it is important to gain broadly acceptance of this new way of doing things but also deserve the trust from the stakeholders [23].

2.3.4 Applications of Blockchain Technology in the Healthcare Sector

Since this technology is emergent, it has been still gathering interest by the researchers, but fortunately more and more research use cases are surging and this may result in further future solutions that can benefit the healthcare landscape. The most discussed applications of blockchain in this precise space is for information exchange, transactions between patients, transactions between providers, transactions between payers and transactions between a whole other number of relevant parties. The potential of this is huge and there is plenty of expectations regarding the further usage of this concept. With this on scope, and because there is some research about this matters, there is mentions to the exact current known applications more ahead.

A. Electronic Medical Records

A current usage of the blockchain technology is for management of eletronic medical records (or EMRs), often also called personal health records (PHRs). These records are usually meanted for creation,storage and management of the patient data. Blockchain, if implemented, can take a huge responsibility in the management of this data, determining exactly how it is shared, how it is processed and how it is used. Now, because of the nature of the immutability of this technology, the risk of tampering becomes almost zero because once some information is recorded neither the doctors or the patients can alter this data. Also, because of cryptography and business logic, data will for sure only be recorded if it is actually valid thus enhancing the integrity of the data in question not speaking about this could actually influence the security and privacy of the data since the data can only be decrypted by using the patient private key for example, but this depends of the cryptographic scheme that is in place. Key attributes such as decentralization, immutability, data provenance, reliability, robustness, smart contracts, security, and privacy make blockchain an ideal solution for storing and managing EMRs. As an example, there is a application of this in MedRec, a decentralized record management system developed by Azaria, Ekblaw, Vieira, and Lippman. This solution enables patients to access their medical information in real time across different healthcare services and treatment locations. It gives the power to patients to securely share their records and decide who the access of it is guaranteed. Besides this and , because of the modular design that integrates existing local data storage systems, there is interoperability for both doctors and patients [24].

B. Clinical Data Sharing

Clinical data sharing is another crucial application of blockchain in the healthcare sector. It enables secure data exchange facilitating data sharing among various entities in the system. Confidential and crucial patient information is stored within electronic health records (EHRs) and electronic medical records (EMRs), highlighting the need for secure storage, processing and access. Sharing this data among healthcare stakeholders is essential for improving service quality, but it also requires robust transparency and accountability measures. By leveraging blockchain these challenges are gone, because there is a record of all this transactions in a distributed ledger creating security and transparent data sharing. All participants can view the transactions, which creates a friendly environment for managing clinical data in a secure way.

An example of this is applied to clinical data sharing is HealthVerity. This solution leverages blockchain to enable secure and transparent clinical data exchange of data between healthcare organizations,payers and research organizations which promotes further collaboration in research and clinical analysis. With this, the organizations can deal easily with data access, interoperability and privacy. By creating this environment, this project supports research,analysis and data-driven innovation within the healthcare sector which influences several future work that enhances the healthcare services [25] [26].

C. Global Data Sharing

The most frequently spoken subject while speaking about blockchain is data sharing, but a even more extensive subject is when we apply this at the global context. If applying this concepts regionally is hard, imagine trying to expand this standardized solution to multiple organizations across the globe, the potentiality is immense but so it is the complexity of such systems. Imagine if a patient wants to be treated in a foreign healthcare provider, this means lots of bureaucracy just for this institution to have access to this patient data which takes time that sometimes lacks. By recurring to blockchain, all of this bureaucracy can still be done but quickly as fast as the procedures in a chaincode can be, depending of the implementation in use of course, and still give patients the control to decide who can access it's data, which is a requirement to ensure safe and effective treatment abroad. In simple terms, this technology can deliver optimal care regardless of the location.

An example of this is Health Wizz, a platform focused on healthcare and it leverages blockchain for supplying secure and transparent solutions for storing and sharing healthcare data across the globe. Users have the opportunity to store and manage their health data, which includes medical history, test results, prescribed medications and other resources. Health Wizz creates immutable and tamper-proof records, ensures reliability and authenticity of information, data integrity, privacy and secure sharing between participants [27] [28].

D. Medical History Maintenance

Having a medical history is something particularly interesting and important, because it keeps track of patient records which gives insights about, for example, when a patient visits multiple hospitals and there is a need to avoid redundant analysis over the patient like for example doing the same analysis multiple times. If this history is well maintained and shared across institutions, then there will be the reduction of redundant processes when treating the patient, reducing costs, risks and time needed for the observation.

Blockchain offers a reliable way to maintain and store this history and , at the same time, offers more power to the patient which chooses or not to share its personal information. This increases privacy and consent management. In other words, it offers a extra layer of trust preserving the integrity of medical records over time, preventing as well tampering and unauthorized alterations. Medicalchain, a technology company, leverages all of this to offer accurate data record with meticulous updating of the data and its history. This is very valuable if a patient goes to multiple healthcare institutions [29].

E. Health Data Access Control

The more data retained, the more difficult it is to secure it and because of this there is a need to create mechanisms to make users aware of who accessed their data, because by only giving them power to decide who sees it makes the user unaware of those that can be inside of a given group and their access can be camouflaged making the user more vulnerable than ever. Therefore there is a need of giving this power to users: allow or not allow some entity to access its data, check who is seeing its data, check who is storing its data and check who is sharing its data. Blockchain helps by giving potentially all of this to the user, simply by leveraging smart contract to enforce rules and permissions.

An example of this application is Coral Health, which uses blockchain to make easier the secure sharing and access to patient information. Patients can trust that their medical records remain the same and the platform also connects them to other participants in the healthcare service such as doctors, scientists, lab technicians and public health authorities. Using the blockchain is a huge life savior in this situation because besides of the benefits that were mentioned earlier, there is also administrative automated processes and deterministic operations that are error prone for accurate data and treatments for the given patients [30].

F. Billing/Payments

Payment system may be complex and prone to fraud, leading to requiring more resources and time than needed. To face this problem there are usages of blockchain to simply and speed up the payment process when comparing with traditional payment methods. Using blockchain, invoice processing and payment processes flow faster and this removes barriers from the activities, there is no need for intermediaries, prevents fraud, helps stakeholders access the data and makes the data more secure, private and less prone to cyberattacks.

Blockchain has a powerful tool called smart contracts - Self-executing agreements with terms encoded directly into the system. Dotted of this, the automation of processes is possible because smart contracts provide all the business logic needed to come up with what is needed in that flow and by extension it also reduces administrative burden, minimizes errors and disputes, contributes to more efficiency, gives more transparency in the payment ecosystem, provides security and fraud-prone payments.

As an example there is the project PokitDok, a platform which uses blockchain to facilitate payments and transactions in healthcare. Within this project DokChain was developed, a private blockchain that references off-chain file systems that, by incorporating smart contracts retrieves data from health insurers and payers in real time, enabling real-time decisions on insurance claims. After a patient treatment, all of the information about the treatment is available to all stakeholders and thereby there is a calculation of the given costs by leveraging smart contracts. Also, the platform makes calls to API's to assess a patient's payment risk, enabling patients to schedule and pay for healthcare services, automating payments and verifying benefits instantly [31].

G. Biomedical Research and Education

When it comes to do research or even gather information that make people conscious of a given reality for the sake of education there are problems that must be faced. Especially in healthcare, there are questions regarding the acceptance of the participants for them to land their data. Also, in cases where the sources of data are not that valid, data can give bias to those that analyse it, which unfortunately is good for a certain number of malicious actors that just want to make sure that their point is correct where in reality it isn't. To go against this problems, not considering the analysis of the source and doubting the author in question and its purpose, there is the possibility of using blockchain which can serve as a powerful ally against falsification, reducing the omission of unfavorable clinical research outcomes and maintainability of data integrity. Also, by using historical data which the blockchain maintains, there is the possibility of questioning current surprising results, giving us the possibility to question what caused such variability in them, thereby aggregating hints about the possible bad introduction of those inputs.

An immutable record of patient consent enables regulators to monitor trial patterns and ensure compliance with informed consent regulations. With this, there is also the possibility to detect fraudulent form consents, which are a form of clinical fraud, resulted from record tampering and fabricated patient consent. If implemented well, blockchain can make sure that only patient permitted participants, can access or use in multiple their data. Thereby, for this concrete situation, there must be mechanisms to consent, revoke consent, see which entities are taking advantage of the consent and this must be per item that the user retains. This not only gives power to the patients, but it removes a lot of bureaucracy in releasing their data for better purposes like research and it also helps for auditing clinical teams, researchers and regulatory authorities.

As an example, there is this project called Shivom Project, which aims to implement blockchain in genomic data technologies. With this in mind, users of this platform can store, share and monetize their genetic information. By leveraging this large genomic datasets, the project aims to make research and treatment discovery easier, while participants maintain control over who uses its data or not [32].

H. Pharmaceutical Supply Chain

When it comes to the supply chain, there are a lot of mentions to blockchain but in a particularly more focused in healthcare perspective, there is the case of the pharmaceutical industry. This is because, unfortunately there are cases of counterfeit or substandard drugs that can cause harmful issues to patients.

By using blockchain, every transaction that involves probably risky products is recorded from the production,distribution and the delivery to the end consumer. This occurs because, in case of malicious intent within this chain, there are records that give hints about where the product came from, thereby actions can be taken in order to solve this kind of issues. With this in mind, there is a barrier against drug alterations and modifications within the chain, counterfeit drugs and stealing. With this, poor quality drugs are easily tracked until their source, helping healthcare institutions to meet safety and regulatory standards in pharmaceutical supply chains.

As an example, **IBM** launched projects with pharmaceutical manufactures,distributors and hospitals to demonstrate the feasibility of blockchain-based solutions [33].

I. Equipment tracking

Equipment tracking is closely related to supply chain, the difference is that this concerns the life after the delivery process and it concerns who retains what within the organization or what does the stakeholders retained before. Because of the immutable nature of the history inside of blockchain records, blockchain stands as an huge countermeasure against theft,loss,movement and reordering of medical devices. By preventing alteration and deletion of the location history, there are plenty of dollars that are saved, making this solution a tamper-proof against this unfortunate situation.

Additionally, in case the usage of this technology is guaranteed, there are less costs associated with personal and less errors occur due to their deterministic nature making the life easier for those that require this equipment's for their work like nurses,porters and staff support. As an example, Chronicled exists as a project that focuses on supply chain solutions but that also offers solutions around product tracking. What makes this product more interesting is that product tracking works as an extension of supply chain tracking which goes in accordance to the closely related relationship that was mentioned before. Putting in another words, this product leverages blockchain to not only track products in its supply chain but also to track the products after the delivery, which creates immutable,transparent and valid records that provide reliable audit trail for each product [34].

J. Health Data Analysis

Data has become something that is more valuable than gold, because it can help us understand the best way to operate in various realms of the human devour. It spots behaviors, characteristics about something that no one spotted and helps businesses to meet optimal solutions for difficult problems. In order to achieve this, not speaking only about data itself, analysis must be done and, in order to make good analysis, data must be also of fine quality in terms of integrity, verificability and ownability. If done correctly, data analysis can revolutionize the healthcare field in such a way that patterns can get identified, medicine can be tailored to patience characteristics and preventive measure can be taken.

Blockchain can take an huge responsibility in terms of making this possible, because it safeguards the integrity and privacy of the data, addressing also concerns around security and confidentiality which can lead healthcare institutions to significant breakthroughs in medical research and patient care becomes better. As an example, Nebula Genomics, makes analysis of genomic data that comes from a blockchain and , in this precise way, reshapes the genomic data market. It creates a market where buyers, such as sequencing facilities, drug design companies and

health organizations, can access genomic data. Individuals use this platform to discover their genetic variants, disease predispositions and get compensated by allowing third parties to access their data, while still maintaining privacy [35].

3 Approach

Since the methodology used has a bearing on the success of the project in hands. It is of high importance to choose which practises should be adopted to effectively move forward. By means of this, investigation under which arsenal were to use is counseled. After a lot of digging, it was decided that the number of different practises should not be too vast, otherwise it would be a burden to put them to work together seamlessly.

Having a research methodology is full of advantages like: helping **plan, structure** and **conduct** the research in a way which is structured and objective.

Research methodologies can largely be categorized into **quantitative, qualitative** and **mixed**. **Quantitative** focus on gathering numerical data and performing statistical analysis to draw conclusions. **Qualitative** on the other hand, is more suited to specify detailed insights such as behavior, motivations and experiences, which means that is more theoretical while the **quantitative** is more empirical. Finally, there is also the concept of **both** which stands for having both **quantitative** and **qualitative**.

During this thesis, in terms of research methodologies, there will only be space for two practises: **DSR(Design Science Research)**, which in terms of nature of findings is hybrid, thereby categorized as a **both** approach like mentioned in the last paragraph and **SWOT** which is more **qualitative**. The first one is more complete and more suited for the projects while the second will be used more to drive the conclusions of the project to further analysis of its pros and cons of usage of the project in cause. With all of these settled, lets move to deeper thoughts about each.

3.1 Design Science Research (DSR)

As an important gadget for the project, **DSR** was the embraced tool. Considering its traits, resembling extreme focus on solving real problems, it represents indeed a powerful tool for going on with this thesis. Some people gain knowledge through reading while others achieve so by earring, practising or even speaking with others. It's a serious challenge understand how a team will work best but, due to the nature of the team, **DSR** proved to be the best choice for its phenomenal practise and rebuild model. In a distinct set of terms, this methodology is notably better for individuals which praise more the practical way of things and by its landing into the creation of artifacts for solving the current landscape of problems, creating this way solutions and still gaining theoretic knowledge, it does outpace other methodologies making it better for the expected aspiration of this project [36].

3.1.1 Goals of DSR

For the verbal reference of the **DSR** goals, there is a colossal number of concepts that could be spotted as one. The gross of it, outcomes from the requirement of appeasing certain fields such as information systems, engineering and others. This project is within the information systems realm, which means that these values are more than fit for the project and thereby qualified to be mentioned here. By means of this, the most captious goals will be pronounced here.

At the heart, **solving practical problems** is one of those goals. This is reached by the design and creation of such research artifacts that are implemented into practise, where those are seen as the form of models, frameworks, methods, processes, systems and even tools. With accordance to this means, practical problems are solved and theoretical knowledge comes as an extension.

Besides that, there is also the goal of **creating innovative artifacts**. Its presence is requested when it comes to push the horizon of existing knowledge and capabilities. As Innovation takes precedence in any kind of project, it could not be different when it comes to the realization of this research, standing as a must for the **DSR**.

Tertiary to this, surges the **contributing to Scientific Knowledge**. Which is conventional, if further thinking is done through the definition and name of the methodology. Knowledge occurs by extension when depared with the solving resolve. Thus, the more knowledge extended bigger the contribution and new perspectives and ideas may flow, creating an avalanche of future projects, instigating development and furthermore improving sectors.

Onward to the next objective, there can be **Evaluation and Validation**, since the evaluation itself is a pillar for the loop created within the **DSR** realm and so it is validation but, altought valid, it does not mean that it should be final. On this assumptions, rigid considerations must be accommodated, however, solutions keep maturing which explains the continuous satisfaction of this precise objective therefore nothing remains fully complete, which is expected from the point view of innovation.

Another objective important to consider is **Balancing Rigor and Relevance**, where it stands glamorously within **DSR** to make sure that nothing becomes to much theoretical until the point there is no practical implementation. This is a risk in the research world, where by applying to much importance to the theory category, the project start loosing color into its true serving purpose. With this in aim, exists there the importance of instituting a balance between the two dimensions, emphasizing both the theoretical inception but also the practical. This becomes the best approach, since the practical determines the verocity of the empirical sphere.

Lastly, there is the existence of another aspiration, denoted by **Generalizability of Solutions**. Its priority resides within the sphere of making sure that, knowledge produced within the project can be adopted into broader contexts, from a deck of various industries or scenarios. This bears a huge relevance, because by having countless scenarios of usage, new use cases are produced, thereby relevance of the knowledge becomes enormous and so its contribution for the research world, which affects the world by extension, purposionally to the desire of the research itself.

3.1.2 The DSR Process

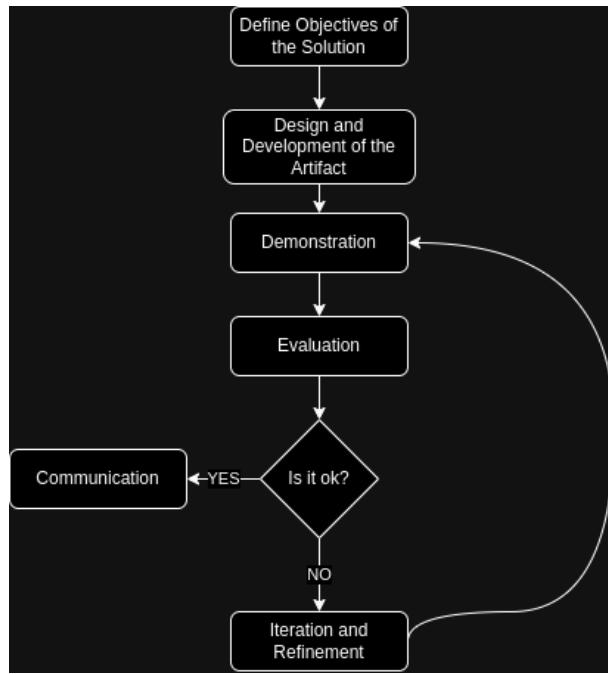


Figure 3: DSR Life-cycle

Entering into the process of the **DSR** realm, there must be an understanding that this is a structured and iterative methodology, focused on construction, evaluation and improvement of **artifacts**. The process is extensive, but it covers all the steps necessary from problem identification to evaluation. Since it works around incrementation, this process is within a loop processing always new forms of solutions and knowledge, since it produces both [36].

Problem Identification and Motivation refers to the first step. Here, there is a preoccupation into picturing a real-world problem which seeks solution. To glean such information, various perspectives must be attended such as the current state, context and impact on the project under scrutiny. The spotted problem should be doted of meaning and with a given degree of relevance. The objective here is to gain power to articulate the problem clearly and make sure the team has the motivation for solve it. A good example to achieve this is in **healthcare, where there could be observed a problem with inefficiencies in patient management**.

As a second step, there is **Define Objectives of the Solution**. After problem identification, it is of huge gravity to think in a given set of objectives for the future solution. The objectives could be qualitative or quantitative, even though the quantitative are better, establishing them in the beginning is hard. Sometimes it is not possible and there are also situations where requirements already give them away. The objective in this step is to set expected outcomes and conduct obligations for the artifact that will be forged. An example for this would be setting an objective, **creating a system that should be capable of reach 50 request per second. But it could be a more simpler thing like giving good data for decision making in a healthcare facility**.

Design and Development of the Artifact surges as the third step. When landed in this step, there is work to develop the **artifact** (model, method, system or framework) that will be managed to meet the objectives created on the second step. With the problem and objectives on hand, the team must create, conceptualize and refine its artifact to better meet the expectations. In other words, the objective is create a artifact that addresses these problems. **Developing a prototype of a healthcare data management system** can be a good example of what is expected in this phase.

Moving to the forth step **Demonstration**, here the **artifact** is assigned to work, by either creating a simulation or simply putting it in a real world system to check if it does meet the expectations. This stage is critical, because it serves as proof of concept to inquiry if it has utility or not. Regardless of the result, knowledge is generated and the **artifact** has room for growth because of the feedback created in this phase. The objective is to demonstrate if the problem can be solved or not with this implementation by a practical setting. One example of this would be the **deployment of a healthcare management system**.

Evaluation on another hand, corresponds to the fifth step, where the evaluation of the **artifact** takes place. In this phase, the product is evaluated. Rigor, effectiveness, efficiency and overall impact are considered, taking into consideration the problem and that the evaluation method may defer relatively to the nature of the given product. This step has the objective of measure if the **artifact** solves the problem and meets the objectives settled in the earlier stages. As an example, the **evaluation of the performance by tracking the key metrics** can be considered.

At the realm of the sixth step, **Iteration and Refinement** is the step right after the evaluation. This is because, based on the observations, there may be areas where the **artifact** still lacks which compel for improvement. With this in mind, iteration is done and evaluation and demonstration occur multiple times until there starts to have insignificant improvements. As an objective, in this phase, there is the max refinement possible of the **artifact** recurring to iteration. To illustrate this, there is the possibility of image a case where **after testing, the system might be updated to include additional data fields or enhanced user interface features to improve usability**.

Finally, in the sept and last step there is the **Communication** phase. Within this, the research findings are shared, artifact design and theoretical contributions are released and the form it takes are **academic papers, presentations and reports to stakeholders**. Deconstructing this, here there is the documentation and dissemination of the findings, including both practical and theoretical contributions. As an example, there is the **Publishment of a paper describing some development in healthcare made by a given research**.

3.1.3 Usage during this project

The usage of this methodology will be more comprehensive during the second use case. This is because the first one is more theoretical and the second is more practical. Since this approach goes around creating knowledge through a practical multiple loop iteration, it does require that the project is dotted of such.

With this in mind and better discussed further, firstly, within this work there is a definition of objectives for this solution. Secondly, there is the design and development of the artifact, which is a blockchain network. Thirdly, this network passes by a demonstration to effectively see how it behaves. Forthly, evaluations around the solution are made, and in case the solution is already good enough, communication is made; otherwise, there is once again a process of iteration and refinement that starts once again in the demonstration, creating this way an infinite loop until the solution satisfies the project needs.

3.2 SWOT analysis

SWOT analysis is a strategic planning tool which is often related to business. This is because it is a simple and yet powerful overviewer, that empowers organizations to set a plan for that precise moment. The acronymom **SWOT**, stands in English for **Strengths, Weaknesses, Opportunities and Threats**, which represent the key factors that influence the organizations success or failure. If done multiple times and by several people, it can gain multiple new perspectives that help as a decision factor because it can probably give a deeper understanding of the company

competitive position, identifying potential areas for growth and also empower the staff to think better in strategies to address their challenges. The purpose is to provide a well structured framework for decision making, which accesses internal factors like strengths and weaknesses and also external factors like opportunities and threats. Despite it's current usage being more directed to business, it also helps in other kind of projects such as personal career planning and even research. In this project there's the intention to use it. This is because the use cases are complex, having a tool like this can help others understand the current situation, can help the stakeholders of the research to work according to the books and it can give a hint to those interested on the project to discover if it is doing well or not [37].

3.2.1 Internal Factors: Strengths and Weaknesses

Representing the upper part of the **SWOT** standard visualization, there is the internal factors **Strengths** and **Weaknesses**. This is what influences the most, the ability to the achievement of the organization objectives. Understanding both strengths and weaknesses is crucial as a building block for enhancing existing capabilities and check out areas where the organization usually outperforms or the opposite. To put in other terms, the organization has the capability for control and actively manage this two, in a way where the focus is to improve the decisions to do accomplish such. There are not always deterministic into that direction but deep dive into each will make this even more clear:

A. Strengths

Strengths are the internal contributions, so that the organization has a certain number of attributes, resources and capabilities for enterprise level competitive advantage. These are the areas or aspects where the company can outperform others, that can be used to collect opportunities and even defend against possible threats. Identifying strengths is something very valuable for organizations, because it helps in focusing on the best attributes of the organization, thereby fixing their market position. As an example of Strengths, it could be something like: **Strong brand Reputation**, where a well established brand is widely recognized and trusted by consumers. **Skilled Workforce**, in cases where there is a qualified and experienced team who drive innovation and efficiency. **Proprietary Technology**, which are unique or patented technologies that provide a competitive edge in the market. **Operational Efficiency**, for processes and effective cost management that lead to higher profitability. **Customer Loyalty**, a loyal customer base that provides consistent revenue and positive word-of-mouth marketing and finally, more concretely for research, **Having more than enough resources**, which stands for having such resources that makes the research something more than feasible which usually is an huge challenge. By levering this strengths, an organization can maintain or even enhance it's market position, thereby maximize its competitive advantages in relation to others, improving by extension its overall economic performance.

B. Weaknesses

Weaknesses are the core stone of the internal given limitations, for areas where the organization actually underperforms relatively to competitors which by extension can prevent the organization from achieving it's objectives, by representing a obstacle to the capitalization of the existing opportunities and even by exposing the company to risks presented in external threats. **Weaknesses**, if spotted correctly, allow the organization to take measures for correctness and minimization of the impact that this unfortunate characteristics may pose in future iterations. Addressing this is essential for vulnerabilities mitigation, improve performance and prevent competitors from exploiting these causalities. As an example, there is a lot of things that can be mentioned like: **Outdated Technology**,

because by relying in older systems or tech can slow down processes, limit capabilities and even possibly increase costs for maintenance. **Limited Financial Resources**, where insufficient capital to invest can pose a problem to initiatives, R&D and further expansion if desired. **Inefficient Processes**, in the idea of resource wasting and higher costs resulted from activities and delays in delivery. **Weak Brand Presence**, which represent a weakness in the essence of reduced market share and finally **High Employee Turnover**, where talent within the company is hard to maintain, thereby resulting in higher recruitment and training costs.

C. Both combined

By understanding and analysing **Strengths** and **Weaknesses**, there is the possibility of creating a good synergy between both which can result in organizations positioning themselves to achieve their goals. **Strengths** help creating and sustaining competitive advantages and **Weaknesses** ensures that there are no barriers for further success. In other words, considering both interchangeably will imply future success, therefore it is very important to careful think in all of those and afterwards try to see it's relations.

3.2.2 External Factors: Opportunities and Threats

When it comes to external factors, there should be informed that those factors are the ones that the enterprise cannot control, since they don't own them and they are external to their direct manage. This means that despite the organization not being able to coordinate them, they can still take actions to make sure that those causalities don't affect them that much or that it don't affect them in any way. These aspects are **Opportunities** and **Threats** and they play a huge paper in the **SWOT analysis**. Putting in different terms, those are the existences that are based in outside situations that are beyond their control, such as market trends, macro-economic indicators, competition and others. **Opportunities** provide a path for growth, while **Threats** present a potential challenge that could negatively impact the company. A deep dive into each factor will be done in this section:

A. Opportunities

By identifying opportunities, organizations are doted of taking proactive steps toward expanding their market presence or even aggregating more into their competitive deck of cards. To achieve this, the organizations must attend to their external circumstances in order to effectively search over exploits that they can take into accordance to represent a new advantage. These, if used correctly, can help the organization grow, innovate and improve performance. As an example, there is the following possible aspects: **Emerging Markets**, which stands for entering into a new geographic or demographic market, that offers potential for growth and expansion. **Technological Advancements**, that leverage new technologies that improve efficiency, number of product offerings or new innovative services. **Regulatory Changes**, related to new policies or regulatory shifts that if, taken into favor, can benefit substantially the organization in scope. **Shifts in Consumer Preferences**, that aims to answer to new consumer and trend behavior that can be targeted by a new product that may be on release and finally **Strategic Partnerships**, where forming alliances and collaborations with other companies can open new revenue streams. By paying attention to opportunities, organizations can gain a competitive advantage, enter new markets and drive long-term growth.

B. Threats

Threats on the other hand, are challenges or risks that could affect negatively the organization. Some of these are expected, but the worst ones are those that no one is expecting and because of this there must be a lot of thoughts

about it, because a lot of this comes from disguised situations. Being able to spot such things, is an important skill when it comes to project maintainability and therefore it is specially important to pay attention to, because it can be the meaning of the project ceasing and catching them early can help to take preventive measures that could minimize or even remove the effects from it. Due to the external nature, the enterprise has low control over this kind of situations but being interested in such matters, can reduce significantly the downturns. As an example, threats can be represented as **Increased Competition**, where the increase of offers of similar products can potentially remove some market share. **Macro-economic downturns**, where the economy slows down for some reason which results in less demand for the project. **Regulatory changes**, which can result in the enterprise suffering by politics that may be against it or that revoke previous given benefits. **Changing Consumer Preferences**, that happens when the consumer shifts its interest in the current product and benefits the competitor leaving the organization behind and **Technological Disruptions** where the advances in technology actually removes the need that the enterprise was serving, therefore making the organization service/product obsolete. In case well informed, organizations can adapt and overcome these challenges, by preparing defensive strategies that will mitigate risks, ensure business continuity and market share protection.

3.3 Risk List

In the following table, the risks that directly or indirectly influenced the development of this dissertation are listed. Depending on the identified risk, a mitigating action is proposed in order to minimize the impact of the risk. The scale for the Probability and Impact columns is measured from 1 to 5, where 1 corresponds to a very low risk and 5 to a very high risk.

Nº	Description	Probability(P)	Impact(I)	Serietiy(P*I)	Mitigation Action	Verified
1	Unreachable deadlines	3	5	15	Planning better the next events and gain experience from previous deliveries;	Yes
2	Requirements of the project change	2	4	8	Make frequent communication with stakeholder; Check well the limitations imposed by the project;	No
3	Lack of Time	4	5	20	Implement only what is actually needed	Yes

4	Resources	4	5	20	There are no mitigation measures	Yes
5	Incorrect understanding of data	2	5	10	Spend more time analyzing the data; Make sure that the data is relevant for the object of study;	Yes

Nº	Description	Probability(P)	Impact(I)	Serity(P*I)	Mitigation Action	Verified
6	Mistakes	1	5	5	Don't do tasks in automate mode; Focus more in the tasks;	Yes
6	Security implications	1	5	5	Follow standards; Try to learn more as the time passes;	No
7	Complexity of the project	2	3	6	Document Everything; Simplify everything;Join Communities;	Yes
8	Unknown Errors	2	4	8	Join Communities;Arrange more debug mechanisms;	Yes
9	Acceptance	4	5	5	Make the best solution possible; Make clear the need of the solution;	No

Table 2: Risk List: General

3.4 Relevant tools

Before delving into the use cases and what were done in practical terms, there is a need to explain seamlessly which tools were used during the project. This is because, by explaining what was used, by extension, an assumption by the reader for the reason why certain things were inserted in the project is achieved. Some tools are related to blockchain, since that is the main subject under scrutiny along with the healthcare sector, but others, on the other hand, are extensions of a product that is strong by itself. Reasons for the usage of blockchain were already mentioned in the State of Art; thereby, there is no reason to go much deeper in this aspect, but returning to the other tools, they are needed for commodity purposes, and probable risks resulted by the usage of certain tools will be covered further in this thesis. Also, it is important to mention that the idea around this project is not to achieve excellence in decentralization or to simply use emergent technologies because they are trendy, but to try to solve the existing problems with the best set of tools that are proven to be the best in the current market and perhaps standardize the way private blockchains are designed to gain broad acceptance. Standardization helps with broad acceptance because this way implementations are not that fuzzy like they were before, contributing to ease in implementations and creating a common path between people that, in case of obstacles, there may be a current solution already because someone crossed the same path before. This is essential for a vast spread adoption, and thereby that's our contribution here. There are 3 covered sections within the tools; the list is not at all complete, but there is an effort to cover the most important concepts of technologies that were used during the project. This will empower the reader with the correct view of what has been done so far. There is a Microservices section in which the tools are a part of the other tools that will be covered. They retain an honored representation on this project because their usage is meant to empower administrators with capabilities such as resource management, easier setup of networks, decoupled services, scalability, and high availability. Another important section is analytics; this is very important for any type of robust system, and its aim does not reside only in maintainability. It empowers the project with also mechanisms to detect bottlenecks, detect unexpected behavior, troubleshooting support, debug support, benchmarking, observability, measures to better resource management and more.

Finally, there is also the web development section, which is used in this project as the core to build extra services that may be required for the normal function of the network. They work mostly for communication support, for ensuring security, and to help automate procedures during the results obtained in this research, but also for future usage while using this in a real environment.

3.4.1 Blockchain

This section will contain all necessary related or close related information about blockchain that is being used in this research. The aim in this section is to give a good fundamental overview about **Hyperledger Fabric**, the private blockchain technology that is used all over the investigation and also to give some hints about **IPFS**, which despite not categorized as a blockchain, has a lot of characteristics that resemble a blockchain thereby despite the section name, it still makes sense to put it here for the purely sake of relation between the concepts making it easier to digest. The first is considered a general purpose technology, which can be used with all kinds of data but having the capability of working with all kinds of data and at the same time be capable of dealing with all types in a effective way that's a completely different story and, because of this and also to respect to files, there was a need to think in a extension of the blockchain capabilities where **IPFS** can effectively play its rule. Altough intriguing, in this work there was not a measurement of performance regarding this technology and how it would behave in the private landscape, which means that atleast in this realm there are no tangible evidence of effectiveness on our side, which may result in the future measurements while working interchangeably with both the blockchain and this technology

for storing files, exactly like described in one of our future mentioned use cases.

3.5.1.1- Hyperledger Fabric

Fabric is an open source permissioned distributed ledger platform designed for use in enterprise contexts, delivering a certain number of capabilities that are imperative in business scenarios. It is maintained by the **Linux Foundation**, and it presents an architecture that is modular and also configurable. It supports smart contracts through general purpose programming languages like **Go**, is permissioned, has pluggable consensus protocols that range from existing default ones to custom, does not require a native cryptocurrency and offers one of the better performing platforms today of this kind for transaction processing and transaction confirmation latency [1].

This framework will be intensively used in the provided use cases. With this in mind, this section will be a solid coverage all over the main concepts of this framework.

Relatively to **Permissioned Networks**, this is a concept relative to a type of blockchain. Dissimilar to public blockchains such as **Bitcoin** and **Ethereum**, often called **permissionless** blockchains, these ones restrict access to a set of known participants, making them ideal for applications that require trust and control over the membership. Like mentioned before, **Hyperledger fabric** is one of these types, and so is **Corda**. Both platforms emphasize accountability without relying on a central authority, enabling organizations to construct custom and heterogeneous applications where there is a clear conscience of who can participate in the network [38]. Usually, the usage of one restricts the usage of the other. However, there are also approaches where networks may want both **permissionless** and **permissioned**, referred to as **two-tier blockchain**, where both types are combined to allow both participation and validation, such as supply chain or cross-border financial transactions [39]. For the context of healthcare, **permissioned** is obviously more appealing, such that **operational efficiency** and **transaction security** when combined with restricted trust between participants is needed for **security** and data **privacy** [40].

Furthermore, there is also the modularity of **Hyperledger fabric** to be covered. It has 5 components: the **Peer**, **Orderer**, **Chaincode**, **Ledger**, **CA's (Central Authorities)**, and **client**.

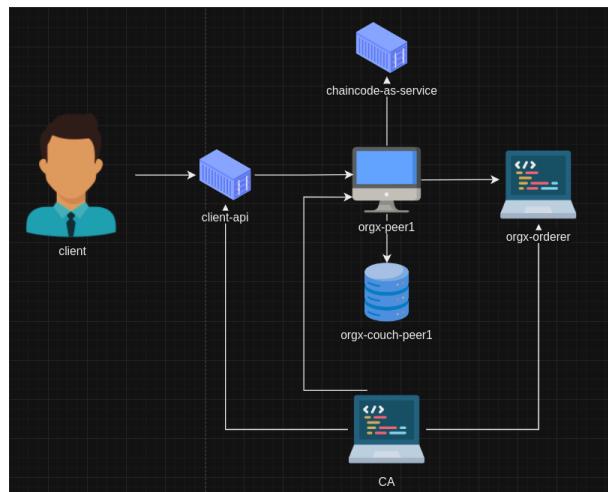


Figure 4: Major components Relationship

As an overview above, there is an image that illustrates not the communications but how components may relate with each other. Also, it should be noted that this is very far from representing a whole system, where usually multiple peers must endorse transactions and multiple orderers must order transactions and blocks. Putting in another terms, the representation here explained is just for the sake of understanding how individual components work with each other. With this in mind, each component's individual functions will be covered more ahead.

The **Peer** (orgx-peer1) in this representation is the middle point of everything. This is because it is the one that receives the transaction proposals and endorsements that come from other peers by previous request of a client. It also receives blocks from the **orderer**, and it is responsible for endorsement of transactions by using the **chaincode**, and furthermore, after validation through this **endorsements**, it is the one that receives a block containing valid transactions from the orderer (orgx-orderer), for then to include in its ledger (orgx-couch-peer1). The **client**, on the other hand, manifests in two ways: the client itself as an actor and the **client-api**, which turns out to be the application itself that is responsible for calling the **Peer**. The **chaincode** (chaincode-as-service) simply runs logic, which is what the **Peer** endorses, by running the application against the **ledger** (orgx-couch-peer1). In respect to the **ledger**, it is used as a mock to endorse transactions to see if the output is the same within the vast majority of peers. The **orderer** receives transactions and puts them inside of blocks, and after ordering these transactions and blocks, it delivers the blocks to the peers. Finally, the **CA**(certificate central authority) only gives cryptographic materials so that components can identify themselves within the network. It must be known as well that the chaincode-as-a-service has the option to create TLS connections with the peer. In this picture there is only one CA for purposes of simplicity on this explanation, because usually there can be a chain of CA's and in each level, for purposes of good practices, should have 2 CA's where one is for normal certificates and the other is for TLS. The difference between normal and TLS certificates is that one is for identification and the other is to secure the communications with encryption. Once again, in this representation only normal certificates are considered, but within the network there are both, which contribute to a secure environment. [41]. Now that their relations were described, let's describe them in more deep terms for further explanation.

In what concerns the **peer**, this is a fundamental concept within the network since it is responsible for managing **ledgers**, **smart contracts**, **transaction proposals**, and **endorsements**. **Ledgers** and **Smart contracts** will be explained further, but a transaction proposal is a transaction that was signed by some entity that wants to be further endorsed by the peers for then to be included in the ledger if valid. **Endorsements**, on the other hand, are the process of a peer running the logic within the proposal against its ledger. Depending on the configuration of the channel and the number of peers that validated this proposal, this transaction will be included on the block or not (within the orderer side); therefore, it could be or not included in the ledger depending on its validity.

In the **Orderer** sphere, however, there is the responsibility of receiving endorsed transactions, which, depending on the number of signatures of the peers in it, could add the transaction to a block or reject it. In the case of the first, after ordering the transactions and the given blocks, it returns to all the peers this given block. Block this that will be used for the peer to insert its operations against its ledger, therefore ensuring that every single peer has the same view of the state because they are all running the same operations against the same state. To achieve this, the orderer uses what is called a **consensus protocol**. This protocol is a mechanism to reach agreement in the sequence of transactions, but that will be discussed further.

Another vital pillar for the network is the **Smart contracts**, more commonly called **Chaincode**. This is where all of the business logic runs, and it uses abstractions to communicate with the ledger. Usually, installation is required only once. However, it must be added per channel if that is the intention of the participants within that channel. This means that I can have the chaincode installed, but this chaincode could potentially not be allowed to be called because, for that, it must be proposed to be added and committed when a certain number of participants agree on its insertion. Besides that, there are 2 typologies for usage of chaincode: **normal chaincode installation**, which occurs per peer and the chaincode becomes more like a side container, and **chaincode as a service**, where the chaincode becomes a service and to install it there must be passed metadata for the connection management. The normal way is often used for questions of ease, and, along with it, there is the certainty that the

chaincode that is being invoked is in fact the desired one, since it is literally a side container or side service of the peer, therefore also giving more isolation to it. The other way, however, depending on how it is deployed, it can be reused by multiple peers, which means that if an operator does not retain this service within its infrastructure, it may represent a risk since the endpoint could be the same and its application could be changed. Be mindful that, in case the **chaincode as a service** is adopted, depending on how it is implemented, it can be exposed to the common microservices vulnerabilities, and further actions should be taken to prevent these [42].

Ledger, on the other hand, is a normal database like **couchdb** [43]. This is the state that the **Peer** uses as a mock to run its business logic and get an output for later usage for the endorsement procedure. Transactions can be rejected by either violating some business logic or by presenting different outputs among the peers. As an example, let's suppose there are 3 peers. In the first situation, peer 1 rejects the transaction because the business logic says so. The other 2 peers, peer2 and peer3, respectively, accept the transaction. In the case of a majority policy, the state resulted in peer2 and peer3 being included in peer1 as well, simply because the majority wins. Also, let's consider the case where peer 1, peer 2 and peer 3 have different outputs, but the signatures were still reunited because the transaction was not rejected. What will happen is that when this transaction reaches the orderers, the orderers will reject its validity. This is because, despite passing the peer endorsement, the orderer endorsement will fail due to a lack of determinism between the three peers. Also, within the same database, there could be different slices of data for each **channel**. However, the concept of channel is something that should be delved deeper into more ahead.

Speaking about **CA's**(Certificate Central Authorities). This is a service that serves cryptographic material like private keys and x509 certificates, which within a **hyperledger fabric** network form a **MSP** (Membership Service Provider). **MSP** is a mechanism designed for providing a way to offer identities that could be trusted and recognized by the rest of the network. To achieve this, there is the usage of this cryptographic material provided by the CA's where a key pair is offered. One of these pairs, the private key, is used to sign transactions, and the other, which is public, gets shared among the entities that will be communicating with the owner of the private, giving them a way to verify that this signature is actually valid. **Hyperledger** lets the operator either rely on existing public CA's, use their CA implementation, or simply use a **hybrid** methodology. The main difference between the public and their implementation is that it's implementation already comes with a given file structure to make the configurations easier and also the aggregation of more responsibility to the operator, but that's something that is not the concern here, thereby it should not be extended.

Relatively to the **client** within the hyperledger fabric components sphere, there is a close relation in how it operates with the chaincode. Like chaincode, both can be implemented with a certain number of high-level programming languages such as **Go**. Both use an interface, attributed to their set of tasks in aim. In the case of the **chaincode**, its interfaces are related to making interactions with the ledger, but in the case of the client, its abstractions are focused on making calls against the peer by giving metadata related to the **channel** and methods to be targeted. Thus, it's more formal name is **Fabric SDK**, where there is the opportunity to use **Node.js**, **Java**, and **Go**. Giving the opportunity to perform various functions, such as creating **channels**, submitting **transactions**, querying the **ledger**, and managing the **chaincode**. Within the **SDK**, there are various subpackages aimed at serving different purposes, like: **gateway**, for establishing connections to the network and provide access to **channels** and **contracts**. **Network**, which represents a channel that a client can interact with. **Contract**, conceded for iteration with a given smart contract deployed in a **channel**, used for submitting and evaluating transactions, and finally **Wallet**, responsible for managing user identities and credentials for connecting to the **fabric network**. Further details should be seeked within the proper documentation of **hyperledger fabric**.

Apart from what has been covered so far, there is the concept of **channel**. This concept is very important since it is the existing mechanism that allows you to aggregate a certain number of components, thereby creating a linkage between them and a precise section for them to exchange information. Within the documentation of **Hyperledger Fabric**, there is the reference to channel as a **group of friends**. This is because, exactly like a channel, you have multiple groups of friends on your social media and their members are different depending on the task or the theme to be discussed within that group. Also, within those groups there is an exchange of information that is private and it's not shared with other group members, which is essentially the same thing as a channel. In a channel, you aggregate a certain number of components that could be part of multiple different organizations depending on what you want to be sharing within that channel, and also within this channel, there is the option to create a **private collection**. Despite the theme being the same, there are participants that may want to discuss information regarding this discussion within the group but just with a set of participants, especially like it would be with the private collection. Though the difference with a friend group is the nature of blockchain. This means that with a private collection, there is the option of creating a subset within the channel, making others able to see that you are communicating with each other but not what they are exchanging. In other terms, a given organization can be in multiple channels, with multiple different individuals in each, and it can also create multiple private conversations regarding the same theme, but just with a subset of participants in the same channel and exclusively of that precise channel. As an example, let's think of an organization that has the idea of creating a group of medicament's suppliers and other group of medical clinical reports. Obviously, in these examples, there will not be common participants because their nature is different. The organization may discuss within that group that it needs medicaments for X. Supposing they want to buy the cheapest one, they will request it from the enterprise Y. This enterprise, although offering it more cheaply, may not have the quantity to satisfy this need, making this organization forced to go to supplier Z to satisfy the rest of the demand. Maybe, for the benefit of this organization, prices of the product should not be known by the participants within this channel, which means that at least the monetary transactions within this channel should be done in private collections. However, the transactions of products could be done publicly, therefore making it easier for all of the participants to have the information publicly available that this organization is supplying itself from these two organizations, making others in the obligation of trying to bargain to also benefit from this channel. Also, the same applies to the clinical registry, even if it has a different logic or idea. There may be information that can be publicly exchanged between doctors, but there may also be communication that should only be sent within a more restricted set of individuals within that consortium. With channels and private collections, hyperledger obtains data confidentiality, selective data sharing and regulatory compliance [44].

Endorsement Policies are another big dinosaur in the room when speaking about **hyperledger fabric**. These are the rules under which the transactions will need to apply, making the transactions valid in case they succeed and invalid in case they fail to do so. In other terms, these are the policies that define which peers must sign (endorse) a transaction before it can be valid and aggregated to a block by an orderer. It specifies how many and which organizations must approve the transaction before it can be inserted into the ledger.

Piercing to the real use cases realm, there are several occurrences of hyperledger appliances. The sectors affected by this remarkable technology were: **Financial, Healthcare, Supply chain management, Goverment and Public Sector** and **Insurance**. Within the **Financial**, various banking consortiums were created for processing cross-border payments, managing the financial chain, and enabling transparent asset transfers [45]. In the **Healthcare** there are also a lot of occurrences of it's usage for managing electronic health records (EHR's), which is possible due to the channels and private collection capabilities, allowing sharing of patient data between healthcare providers [46]. In the **Supply chain management**, there are multiple occurrences for the usage of

hyperledger fabric for tracking goods. By using this, enterprises were dotted of track food products from the farm until the shelf, reducing the time required to trace the origin of food products in the event of contamination while still offering privacy for sensitive business data using private collections [47]. Also, when it comes to **Government and Public Sector**, it is well known that there are already present in the market implementations for the usage of such technology for managing digital identities, land registries, and transparent voting systems [48]. Finally, there is the usage for **Insurance**, where there are retained implementations that are meant to help claiming processing and reduce fraud. Thus, by levering this, the **Insurance** can collaborate in a shared ledger to verify these claims and manage shared data, reducing duplicated and fraudulent claims [49].

3.5.1.2- Ipfs

When it comes to **IPFS**, it must be known that this does not represent a blockchain, though its concepts derive from a P2P perspective, which means there are relations between the two. It is a modular suite of protocols for organizing and transferring data [50].

More concretely, **IPFS** is a tool that stands for Interplanetary File System, where it refers to an implementation that was meant to become the file system of the future.

This solution can be interplanetary, because when the first request of a file in the network occurs, it may endure a lot of time, but after getting it, the file will be retrieved faster because it will be stored in cache in the most nearby peer. Thereby, if you plan to travel to another planet, it can be possible to share files in this network, which, depending on the range, may also include other planet files, but this has countless ways to occur. Or either by one of the peers from another planet changing its location to a location that is reached by our network or simply because the connection between those 2 planets is feasible. However, in order for this to work, there is still work related to making sure that the files are pinned; otherwise, they will get deleted later by garbage collection. This ensures that we do not have files permanently. If they are not that relevant, with time, they will simply disappear [51].

3.4.2 Microservices

Within this section, there is information about the major high level technologies that were used in this precise research that are related to **microservices**. One of those technologies is almost a obligation for the current landscape of technology, there is one which is a upgrade, one that is necessary in certain concrete situations and there is also a extension but all of them are valid. The one that is almost a obligation is docker, because currently in the tech landscape it is used in almost every system because of its isolation therefore faster for development in big teams. The upgrade is the kubernetes, which manages this **docker** images like they are resources ,making it complex in a certain way but also easier to manage in another after learning it. The necessary in certain concrete situations, in another hand is **MetalLB**, because it is meant to on premise implementations, which means that it is more suited for own infrastructure implementations which is a big help when it comes to healthcare due to their resistance into moving to the cloud. Finally the extension is **Istio**, because it is used to have more control over the network and its communications, but its usage its not mandatory, thereby in this project despite tested it is not used in any implementation. After **Hyperledger**, this are the technologies that more represent how some implementations communicate, therefore is good to present what they are and how they work, so the reader can understand the architectures that will be presented further.

3.5.2.1- Kubernetes

Kubernetes stands as an open-source platform designed for **automating the deployment, scaling, management of containerized applications, management of resources, management of secrets** and **management of configurations**. Originally developed by **Google**, **kubernetes** has become a standard for managing containers being a premise to build cloud-native applications. By taking leverage of this, developers can abstract the infrastructure and focus more into the application logic instead of hardware and other operations side tasks. With this in mind, **kubernetes** today is centered as the pillar for building any application, even if it is on-premise(within a organization own infrastructure), due to the fact that currently every organization seeks a **microservices architecture** which obligates businesses to build their own kubernetes clusters. This is because, microservices itself offers a lot of advantages for their business such as **high-availability** because of deployments, **better resource management** and **resilience** which are crucial for any organization that wishes to remain competitive [3].

3.5.2.2- Docker

Docker, on the other hand, is a technology that could be abstracted by the previously mentioned **Kubernetes** and is said to be a tool to build applications in a different paradigm than before. To contextualize, in the past it was something normal to install dependencies directly in your local machine, which created some burden since you may have had different projects with different dependencies versions. Also, the application would mess with the local machine configurations because it was directly using its resources, having more probability of making adjustments that would compromise other projects by having different configurations. By acknowledging these limitations, Docker came to light because it was conceded to automate deployment, scaling, and management of these referenced applications using a new concept called **containerization** [52].

3.5.2.3-MetallB

On-premise cluster is an advanced concept related to setting a network of computers within your own infrastructure. In the case of this project, the reference to this is related to a network composed of **kubernetes** nodes. Because of this, it is imperative to mention **MetallB**, which is a **load balancer** conceded just for **on premise Kubernetes clusters** [53].

When it comes to **kubernetes**, usually the tendency is to relate it to the cloud. However, as the time progresses, components become more powerful and cheaper, and more and more, the consideration of moving to the cloud or not becomes more a question of cost and responsibility. This is because, though the power of components is becoming stronger, the complexity of hardware is sometimes increased, making organizations choose between being themselves responsible for the maintainability of the infrastructure or simply giving it away to those that are more specialized in the subject, which may or may not reduce costs for them because not only do they have the common infrastructure costs but also the burden of finding and maintaining qualified personnel for this type of job [54].

MetallB comes into play when it comes to those more audacious to have all the responsibility. As a strong **Load Balancer** for **on premise** networks, it stands in this project as a marvelous tool for achieving load balancing, which is a concept where the requests are distributed through multiple instances of the same application, balancing this way the load that each may have. Cloud distributors have their built-in support for such, while on-premise networks do not, which makes **MetallB** a must for setting such capability in a non-cloud environment.

3.5.2.4- Istio

In this thesis, **Istio** appears more like an extension and not concretely as something that was of extreme usage.

However, because it was used to determine in each measure is useful and also because it is very different from other concepts, explanations over what it is required because, although not extensively used, it is mentioned in the thesis [55].

Microservices is an architecture of exalted power. However, what comes with great power also requires great responsibility. Therefore, conducting the management of the communications between services is not a straightforward task. By virtue of such, the more the application expands, the more work there is around this matter, making **DevOps** teams struggle when it comes to make optimization and manage this within the application realm.

By means of this, **Istio** surges as alleviation of such. At the hand of its capabilities, it serves as a **service mesh**, which is nothing more than an abstraction created around the application for providing **Traffic Management, security, Load Balancing, and monitoring**.

As mentioned before, cloud-native architectures and microservices are becoming something permanent. Such that managing it is a challenge. Thus, using a **Service mesh** could potentially be something meaningful because it works as an abstraction layer that handles the dynamic networking and communication between microservices. With this brief introduction in mind, thinking in the most important aspects for which this is needed is something intriguing. Firstly, **enhances microservice communication and networking** is one of the aspects for including istio. This is because, a service mesh provides service-centric networking, thereby offering features that are not native to kubernetes. This is helpful for managing services communications with capabilities such as load balancing, retries, timeouts and circuit breaking [56]. In second, despite current implementations create overhead in terms of resources, due to the proxies and the new side containers, there are service mesh implementations that actually aim to **improve performance and resource efficiency**. This can be done with new architectures like **FlatProxy**, which reduce performance bottlenecks and improve resource utilization [57]. As a third motive, there is the aspect of **Observability and Monitoring**. This has to do with the fact that a service mesh collects metrics, traces and logs for each service interaction, providing insights about the behavior of the microservices enabling performance bottlenecks spotting, understanding of service dependencies and improving system debugging [58]. In forth, it should be known that it also facilitates traffic management through fine-grained control policies, such as traffic splitting, canary releases and fail-over strategies. However, there are studies affirming that it creates overheads such as 269% latency and 163% CPU usage, emphasizing the need for optimization [59]. When it comes to the final, the **Security and Resilience** is another aspect that serves as a benefit to use it since a service mesh usually offers mutual tls out of the box with certificate rotation [60].

3.4.3 Analytics

This chapter centers its focus in Analysis. When there are ideas about a given system, usually people don't think right ahead on this matters. Despite the possibility of creating systems without such capabilities, it will become clear further in time that it will be painful and more like a burden if there are none, this is because, the more complex the system gets the more there is a need to auditing and this is only possible if there are mechanisms prepared for the analysis of the network. In other words, despite not directly mandatory, it is almost an obligation to make our infrastructure doted of such, because by having good design over the analysis, auditing becomes more easier and there is the possibility of knowing where to do better by spotting, for example, bottlenecks but also where in the system something is failing (debug). Also, there is a need of having tools that simulate real behavior from users so that the responsible knows the limits of the given System. With this in mind, in this section, it will be covered all of the tools that in conjunction are used to deliver this capabilities that were just spoken.

3.5.3.1- Caliper

In what respects the domain of **Benchmarking**. It is well familiar that it represents the **measuring** and **comparing of performance**. As the need of metrics arises during a project, there will be space for such concept and within this thesis this could not be different [61].

In prospect of the usage of such concept, within this project, there will be justification of results. Thereby, the need to use a tool such as **Caliper** and the requirement for further clarification of it, which will be stated in this category.

Caliper [62] is an open-source multi-function benchmarking tool. It is part of the hyperledger project and allows its clients to evaluate various aspects of their blockchain implementations. These aspects could be **transaction throughput**, **transaction latency**, **resource utilization** and even **scalability**. Thought its modular architecture, it is possible to implement a vast number of custom connectors, enable the developer to connect in various ways to multiple blockchains. Also, it has a set of standard connectors for a lot of network tastes such as **Hyperledger Fabric**, **Ethereum**, **Hyperledger Besu** [63] and **FISCO BCOS** [64]. This flexibility allows those that have power over it to compare different solutions. Key features of it are: **Benchmarking Across Multiple Blockchain Platforms**, **Customizable Performance Tests**, **Detailed Performance Metrics**, **Modular and Extensible Architecture**, **Automated Benchmarking** and **Visualization and Reporting**.

3.5.3.2- Prometheus

Prometheus is an open-source **monitoring** and **alerting** tool designed for recording real-time metrics. At the essence of this thesis, there will be instances where **Prometheus** is mentioned. This is because it is very useful to gather data from various places at the same time, making it easier to grab the data at a single point of failure. In other terms, it is a tool based on **time-series** and it remounts to the collection of metrics from various systems and services, making it very suited for this kind of project. Also, it provides various useful features such as **Time-Series Data Model**, **Pull-based model**, **PromQL**, **Alerting**, **Service Discovery**, **Multi-Dimensional Data**, **Efficient Storage** and **Dashboards and Visualization** [65].

3.5.3.3- Cadvisor

As mentioned before, containerization is a concept for package applications. It creates lightweight, standalone and executable applications, while giving them all the necessary dependencies to work in a portable, scalable and isolated way. By the effect of such, containers have gained an extreme importance in the current sphere of software engineering, making them of a big magnitude of importance to every single application that needs to be done nowadays [66].

With this in mind, and within the curious landscape of congregating measures, there is **Cadvisor** as a very useful tool that was built by Google. It has enormous advantages when it comes to the collection of data from insights about containers. By collecting and exposing metrics such as **CPU**, **memory**, **network** and **disk usage**, it helps operators to monitor **resource consumption** of containerized workloads. Also, it works like a glove when combined with **Docker**, making it a valuable resource for providing a complete observability of containers. Its features range from **Container Resource Monitoring**, **Per-Container Isolation**, **Historical Performance Analysis**, **Container Health Metrics**, **Integration with Monitoring Tools**, **Low Overhead** to **Kubernetes Integration**, making it imperative to be delved into deep terms in this section.

3.5.3.4- Grafana

For showing data within the **Benchmarking** landscape, there is the honored mention of **Grafana**. This is a open-source platform for **monitoring, visualizing** and **analyzing** real-time data. Thus, alongside **Prometheus**, it's useful to gather data that was collected during tests of performance, but this will be covered better in a future discussion. With this in mind, it is valuable to debate such tool into this segment [67].

When abording the data sources and integrations of Grafana, it should be known that it supports multiple data sources, making it easier to create visualizations, dashboards, and even alerts. The supported data sources are **prometheus**, which was covered already in the previous section; **influxDB**, which is another time-series database used for monitoring and alerting; **Elasticsearch**, which is a distributed search and analysis engine usually used for logs and unstructured data, making it worth when searching and visualizing logs and event data; **Graphite**, a monitoring tool used for storing and visualizing time-series data for analyzing system performance metrics; **AWS Cloud Watch**, for monitoring resources and applications that belong to AWS; **Google cloud monitoring**, providing monitoring, logging, and diagnostics for applications hosted on Google Cloud; **Azure monitor** for monitoring Azure cloud resources; **SQL Database**, allowing querying and visualization of relational data like those from MySQL, Postgresql, and MS SQL; **Loki** for aggregating logs, enabling log collection, search, and visualization in Grafana alongside metrics; Finally **OpenTSDB** for scalable and distributed time-series data. With all these integrations, Grafana stands firm as a universal platform for showing data, making it feasible for this project.

3.4.4 Web Development

To build any kind of application, there is a need for standard suitable tools. Since the projects involve creating multiple microservices, there is a huge dispersion in terms of frameworks. This is because, some technologies are better for certain tasks and others are more suited for other kind of use cases. There are cases where within the project it can be spotted 2 to 3 different programming languages and with that also different frameworks. This is because some are better for certain **API's** (ex: Kubernetes API) and others are better for faster build and development in containerized environments (ex: quarkus) which is fine in one hand, if considered that microservices usually means heterogeneous services but it's a struggle in terms of complexity, because it requires a high skilled set of individuals within the team, all to handle that context switch.

3.5.4.1- React

If further examination around the questions under research is performed, particularly the second, then it may be expected that there is a UI evolved. Not as a obligation, but more like something that could eventually occur. In the case of this project, there will be mentions around creating one for management purposes of a infrastructure, but more will be revealed as the use case cases come closer. Thus, explanation of the given tool that achieves this must be taken [68].

React is a tool to build web applications, centered in the paradigm of reusing multiple components, components this, that are modular and can be used in multiple places of the application. Instead of using the traditional way of creating a HTML code for each page, with this technology there is the option of for example using a piece of code that represents a top bar and apply this same top bar in multiple pages, having this way to write less code and also make the application easier to develop. Also, it is easier to make components render in the desired way when data changes occur.

3.5.4.2- Keycloak

When it comes to management of access to services, **Keycloak** surges as a valuable asset. It is an open-source **identity and access management (IAM)** solution aimed at modern applications, services, and APIs. Offers **authentication,authorization** and **identity federation services**. In this section, there is a deep dive into microservices, and having a technology that could create means for authentication when dealing with a determined number of services that get exposed at a global level is important. With this in mind, let's dive into the main capabilities of such a valuable arsenal [69].

Like previously spoken, **Keycloak** is an **identity and access management tool (IAM)**. Which means that it was processes to manage digital identities and control access to resources within an organization. To accomplish this, security policies are enforced, authentication and authorization are secured and compliance is also expected because there is a management of who has access to what resources. The key functions of IAM are **authentication, authorization, user management, single sign-on (SSO)**, which stands for allowing users to log in only once and keep the access and **federation** to authenticate users across multiple identify providers.

3.5.4.3- Quarkus

Quarkus is an open-source Java framework, designed specifically to **optimize** Java applications for **Kubernetes, containerized environments** and **cloud native development**. Its usage is still gaining presence due to its premature environment, but it does show to be valuable when it comes to building and starting up containers, and that is the reason why it is called the cloud native Java solution. By working seamlessly with **GraalVM**, which is used to compile Java apps to native executables, it reduces the **start-up time** and **memory consumption**. Also, there is also included the **live reloading** feature, which, despite being useful because there is sometimes the need to change the application within the cluster, may be a bit worthless because of the existence of technologies such as **devspace** since it allows programming within the cluster and at the same time runs tests like it would be done in a local machine. But with this in mind, it must be said that this tool does improve productivity and it was a powerful tool for the arsenal of this project [70] [71].

3.5.4.4- Graphql

Within the landscape of web development, there is always the urgency of adopting an approach for the implementation of APIs. This is of extreme importance and can be difficult due to all of the aspects that the given tasks may take. Ranging from a vast number of characteristics, the ones that should be more taken into account when choosing which methodology to use are **Data Model** (if it should be RPC-based, resource-based or query-based), **data format, protocol of transportation, performance, if it should have real-time data supply and typing**. With this in mind, within this section there will be discussed **GraphQL**.

Graphql is a mid-level, high-performance approach for designing API's. It is **query-based**, supports **JSON**, **has a single endpoint for making the queries, runs in http, supports real-time with subscriptions**, and **it is strongly typed**. It was invented by Google, and it is used usually for **complex queries** and **dynamic data requirements** use cases like **Social media apps, dashboards** and even **mobile apps**. The reason for exceeding in this area is because while in **REST**, there is the request of all parameters of a model, in this approach you **only request what you want from a model**, therefore with this approach there is better performance overall in the client side and more overhead in terms of CPU for only returning what was requested by query. As an example, let's think of a model **Person**, where the parameters are: **name** and **age**. With this approach and by using queries, there is the possibility to only request the name and leave the age behind. At first glance, it appears that this has not much relevance, but when it comes to thousands of records and full of relationships, this approach becomes

meaningful, and if mobile development is considered, it becomes even more so because of the even more limited resources when compared to a computer. Thereby, the usage of such is indeed useful because, although the resources within mobile are becoming hugely better, there are still a lot of people that cannot afford to have good resources, which could potentially exclude them from using their favorite applications, be it either **Facebook**(the one that created this approach) or **X** [72][73][74].

3.5.4.5- Rest

When it comes to the most widely used approach for designing API's, **REST** is the way that is more present in every single organization. Though less performant in a lot of occasions, it is still the most standardized one, thereby the most used and more accepted. It is **resource-based, has multiple endpoints as a source of data, uses HTTP** and is **typically loosely typed**. The best use cases for this type of way are **Simple CRUD operations** and **resource-centric API's** which, more concretely, correspond to **web services** and **public API's** applications [75].

3.5.4.6- gRPC

Delving more into **Microservices** tools, the **gRPC** approach can be seen as a valuable arsenal for that sort of applications. This is because this way of creating APIs is the most efficient because it's presented at a lower level, which can be a huge helper for extending networking communications between services. Coming from Google, this is an RPC implementation. The **g** stands for **google** and **RPC** for the remote procedure call. Usually seen as the modern implementation of **java RMI**, it works with **protocol buffers** which is more performant than **json**, it has a **single endpoint with method-based calls, uses http2, it's high-performant and lightweight**, supports **real-time share of data with bidirectional streaming** and is **strongly typed**. Also, the best use cases for this sort of approach are **high-performance, low-latency communication**, and **microservices**, with common applications being **microservices, real-time streaming, internal API's, and extension of traditional application communications with more modern ones**. This approach exceeds this project since it is very good for extending communication capabilities and is also the protocol used to build hyper ledger fabric [76][77].

4 Use cases

This section is directed to the use cases produced during this project. At first, a high-level theoretical conception was conceded, which originated a first-use case. This work was the genesis block for the creation of the second, which is more practical, but it had as a starting point reaching a stage where the first could be implemented. In another terms, the first use case "**IPFS and Hyperledger Fabric: Integrity of Data in Healthcare**" works as an extension of a **hyperledger fabric** network due to the incrementing of **IPFS** and the second "**Hyperledger Fabric: Seeking standardization through designing for each type of organization**" is for the actual design of the blockchain network, making sense because of the natural proceeding of engineering where there is a high representation of something, and to reach that representation, there must be the conception of each element of it individually; therefore, after the final conception of the second, there it can be added to the first.

4.1 IPFS and Hyperledger Fabric: Integrity of Data in Healthcare

The first use case presented in this thesis is the one that was thought first. It works as an extension of the second use case, but it was thought first as a means of theoretical conception of something that could be feasible in the

future to do, depending on the benchmarking of the results under the performance and usability of such. Despite not having a practical implementation that could tell us its usability, it remains as the genesis block that gave the idea of coming up with the second use case; thereby, it will be important in future work to delve more into the capabilities of these ideas. Also, this same use case was presented in the prestigious congress "**5th International Congress on Blockchain and Applications in Guimarães, Portugal**," which gave a lot of insights about the current trends and implementations around private solutions.

Speaking about the project, it concerns the current traditional storage of data, trying to come up with a conceptual implementation of what could be a system that could keep track of file changes by leveraging both **IPFS** and **Hyperledger fabric**. Thus, the main idea was to first store the data in a private **IPFS** network and then store its main representation in the **hyperledger fabric**, which would keep track of the existing files in the network and at the same time make sure that no changes were done all over these files. Also, to support all of this, it was conceded a probable network that could support such a network, which will be under research in the second use case. But this is something that will be covered further.

4.1.1 Objectives

Speaking about such a theoretical initial project, there is more concretely a set of objectives that were set upon the inception and concretization of such. These objectives are: **Theoretical Development of a Feasible Use Case**, **Probable Integration of IPFS and Hyperledger Fabric**, **Foundation for Future Research and Implementation**, **Presentation and Academic Recognition**, and **Development of a Probable Network Architecture**. Within the **Theoretical Development of a Feasible Use Case**, this was one of the objectives because **DSR** was in mind; therefore, there must be a use case that could be actually created for later evaluation and gain of knowledge. The conception of such a network is feasible, but if it is efficient, it is something that will be covered in the future. **Probable Integration of IPFS and Hyperledger** was another objective. This is because both technologies have been gaining a lot of interest in the last couple of years and understanding until each measure **IPFS** could be efficient in private environments would be very interesting for gaining insights in the scientific world and even more alongside the **hyperledger fabric** since most of the public implementations of **IPFS** rely on a blockchain, which is something that was thought to keep. **Foundation for Future Research and Implementation** was another objective, precisely because by inferring a theoretical conception, there is the need to delve into the concepts of both technologies and perceive the environment that is being targeted, therefore making a researcher capable of understanding what could be done next and in a better way. This idea has been proved to be true since the second use case came from this type of logic. **Presentation and Academic Recognition** was another thing in mind since a congress was about to come and there was plenty of curiosity around **IPFS** and its private usage, which works are very low in terms of quantity and quality. Finally, there was this objective of **Development of a Probable Network Architecture** that could address these ideas, which led to a microservices architecture that would be the target of the next use case, which will be covered more ahead.

4.1.2 Inception

Despite the theoretical approaches, after reviewing everything relative to **IPFS** and its origin, a practical project was conceded just for creating a tangible way to obtain knowledge. This is important because relying only in documentation sometimes leaves some subjective understanding, which could result in bad insights. With comprehensive basic projects, there is more probability for this to not be the case. However, despite having practical insights this

cannot be considered within the **DSR** methodology, precisely because there is no objective such as solving a real problem in sight.

The project was a decentralized per peer dropbox, which could be private or public depending of if you open the gateway to other peers or not. With such application, adding files on drop, add files from other peers using their **CID**, display the name of those files and it's information, download those files to our local machine, list all the connected peers and force an connection to an certain peer directly is possible. Pinning is not discussed, but it's something that could be done.

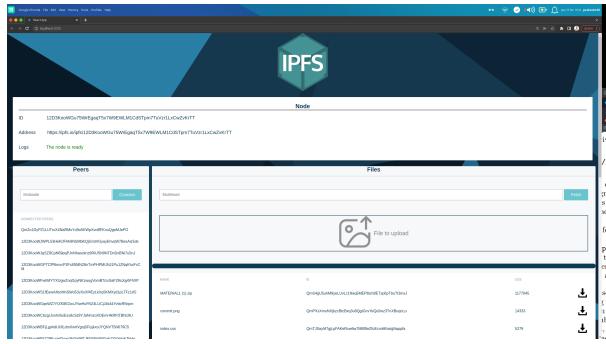


Figure 5: IPFS: Practical Implementation

4.2 Approach

Relatively to the approach that was taken during this part of the work, like specified before, the **DSR** was not followed due to the fact that practical creations in the direction of solving a problem were not inferred, leaving as the only valid path to investigate, doing some theoretical conceptions around the subject and thinking after how this could actually be put into practice, which was the main reason why the second use case occurred. In other terms, no framework was adopted, but a lot of insights were taken by own procedures.

4.2.1 Discussion

As discussion, there will be the presence of a reflection about the bad sides and positives sides of the given project. In that behalf, **SWOT**(Strengths, Weaknesses, Opportunities, Threats) diagram was created:

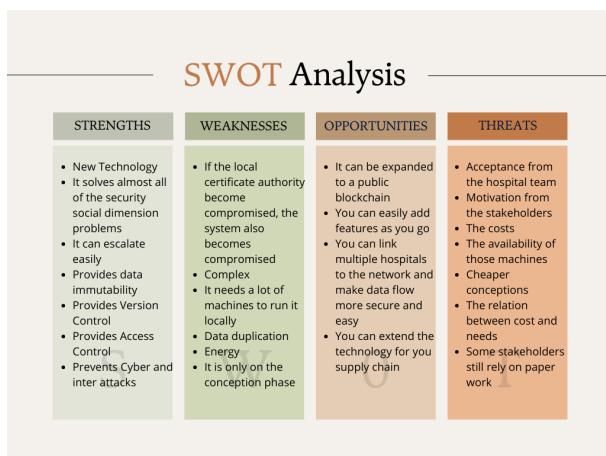


Figure 6: First use case: Swot

4.2.2 Conclusion

In conclusion, despite not being implemented, this project seems to have a lot of work and possibilities, and it will be very interesting to see until each measure such idea could play out. Its feasibility is still something unknown, but constructing things and applying them into practice is one of the fundamental needs of engineering and since this project works with 2 different approaches for data immutability, the healthcare environment could benefit in terms of security and traceability like it never did, which could potentially revolutionize the methodologies used to work with data within the healthcare landscape, but further research and work is still required to understand how this can impact it, making it something truly nutritional for emergent technology enthusiasts.

4.2.3 Future Work

This project works as an extension of the second use case, even though it was the one that originated it. The work is being conducted all around this project, and the future work will be conducted around the same idea, which is delving into components in a iterative way until having enough knowledge to use all of them in a single project architecture. Hyperledger fabric has been solved with the last work, and what is expected next is to do something alike that experience but now with **IPFS**. Also, possible improvements will be expected in delving into this, but that is something that will be better covered in this section. The expected work items for the future are the following:

Creation of a private IPFS network

One of the work items to be expected is the creation of a private **IPFS** network. This is because the **Hyperledger fabric** has been uncovered already in the second use case, making it necessary, like said before, to uncover the remaining components, more concretely the **IPFS** and its way of working as a private network.

Benchmarking of the IPFS private network

Another work item would be to benchmark the **IPFS** private network to actually understand until each measure is efficient in private environments. In case it is not, maybe it would not be that clever to keep going with this idea, but it is still interesting to give insights of the following steps in case it does not come to be a fail.

Creation of a hyperledger fabric network that was IPFS as its extension

In case the benchmarking over the private network goes right, there is also the intention of creating a conjunction of both **IPFS** and **Hyperledger fabric**, which was the actual main objective at first glance of the idea.

Benchmarking of the network that implements both IPFS and hyperledger fabric

In the realm of testing the feasibility of mixing such 2 powerful components, there is the benchmarking of the later mentioned network which could lead to a continuation or banishment of the idea in cause.

Creation of a web client

The most important component when it comes to this kind of implementation is the way users will interact with it. A client that is capable of both storing files and simply sending transactions will be needed.

4.3 Hyperledger Fabric: Seeking standardization through designing for each type of organization

In the advent of the second use case, it should be known that it is concerned about having the best infrastructure that could be implemented within a healthcare institution. Here, by recurring to a **DSR** methodology, there is the gathering of both theoretical and practical knowledge about such. Requirements are reunited, networks with different typologies, sizes, concepts and benchmarkings, there is comparison between solutions, and conclusions regarding this work are present with a given provence of success. Putting in another perspective, this is the network infrastructure that would be required in the first use case, which is the main reason why the first is associated as an extension.

4.3.1 Objectives

When speaking about the objectives in this use case, the main one is to answer the research question, "What kind of infrastructure design is necessary to support a blockchain solution in such a vast and complex environment as healthcare?". This question will be answered by creating means to an administrator becoming capable of managing a blockchain network using a single point of failure. This is necessary because having multiple nodes within our organization makes it not feasible to configure due to the fact that it would require connecting to each node to make the necessary changes, which with these ideas could be something easier to setup. This requires sacrificing a bit of security over usability, but that is something that could be faced by using really good authentication mechanisms and also allowing the administrator to only be able to add or remove elements from the nodes without changing the data and configurations that each element may have. Additionally, the administrator should be capable of adding members with new configurations, but this is something that can be discussed further.

4.3.2 Inception

Regarding what was done during this use case, a lot of documentation,articles and private resources were investigated. Through this, guidelines for a first network were created and it was with this in mind that the later artifacts were produced. This guidelines were very helpful to construct a operational guide to boot a network from scratch which is important for later reference, since some configurations of **hyperledger** are more into the taste of the operator, thereby creating some fuzzy subjectiveness because concrete implementations were not presented and that presented a difficulty during the conception. However, this guidelines despite being very complete and useful remain with needs of restructuring for better understanding. Everything is created in a github repository using markdown files.

The first guideline was around the **CA's**, describing how to setup a **hyperledger fabric** own certificate central authority like creating the CA,explaining it's components,configuring it,explaining how to revoke certificates,how to register new certificates, how to enroll certificates and explaining how to create a chain of certificate central authorities.

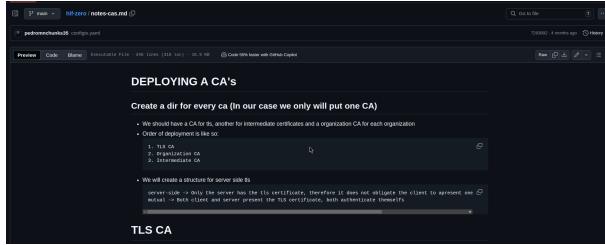


Figure 7: Second use case: ca's operational guide

The second guideline was more around the **orderers**, focused on introducing how to deploy a orderer. This is done by creating it's identities, creating a structure for the usage of each identity within the configuration file of the orderer and for later dependencies such as channel creation.

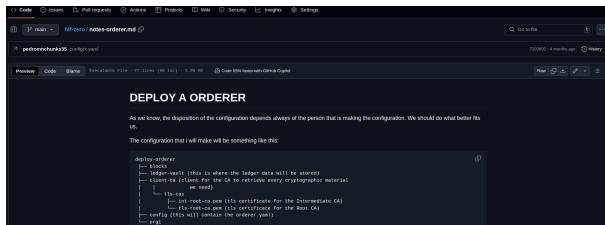


Figure 8: Second use case: orderer operational guide

The third guideline was directed for the **ledger**, which despite having multiple options of databases to choose, the chosen one was actually the couchdb. This is because this ledger is currently the standard one. Also, it is important to mention that there was a need to start by the ledger because the peer requires the ledger as dependency to actually remain deployed, otherwise it will crash due to not having it.

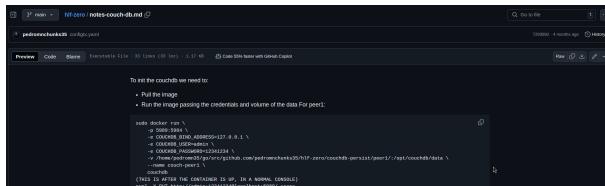


Figure 9: Second use case: couchdb operational guide

Moving to the forth, this time the **peer** took precedence, which is normal since the last tutorial was it's dependency. Alike in the orderer, the focus was to create it's identities,structure and configuration. Both orderer and peer were deployed in debug mode for having more info about why something was not working at that time. This was crucial because, like mentioned before most of the operational guides had some subjectiveness in the structure: this disposition of the configurations was a bit at the taste of the operator in question under creation of deployment.

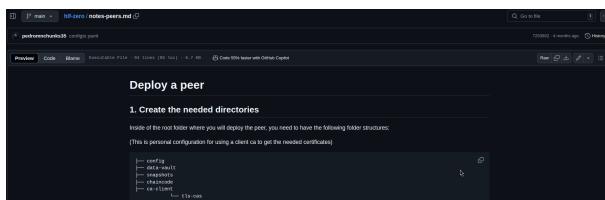


Figure 10: Second use case: peer operational guide

In the fifth, the focus was more into creating a configuration file for the creation of a channel. This was important for actually creating means for orderers and peers know how they should communicate with each other. In the operational guide, the focus was into reviewing policies and understand how to actually setup a configuration file which is something complex that requires lots of planning. This step took a while since mistakes in the previous settled cryptographic identities could lead to errors.

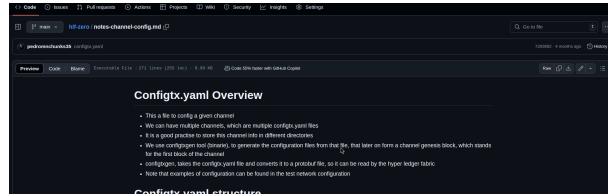


Figure 11: Second use case: channel operational guide

In the final operational guide, the **chaincode** was the most targeted matter. It explains how to create a channel and how to deploy the chaincode in it, showing various phases of the chaincode life-cycle.

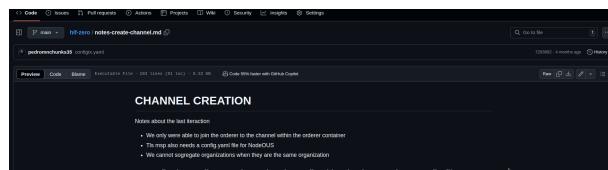


Figure 12: Second use case: chaincode operational guide

Leveraging all of this, knowledge for the creation of a prototype network was gathered, serving as the most important base for constructing everything that would be concluded during this project.

5º Phase: Creating the first network

In the phase 5, the knowledge that came from the previous phase came handy, enabling the creation of the first network prototype. Additionally, all of this was created within a personal machine by leveraging both the machine and 2 virtual machines which formed together the standardized network composed of 3 peers, 1 orderer, 1 CA, 1 tls CA and 1 intermedium CA in the first machine, 1 orderer and 2 peers in the second machine and 1 orderer in the third machine. To simplify everything each machine was a different organization.

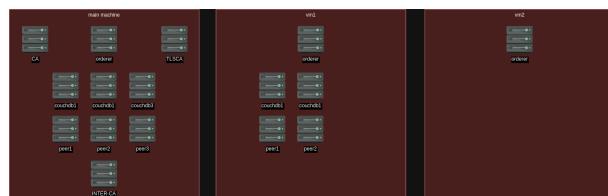


Figure 13: Second use case: first network

Additionally, it is important to mention that a very basic chaincode was created at this stage that served for later instances of our project, where benchmarking was necessary.

6º Phase: First installation in a hospital

After the first creation of a network, there was the intention to try to deploy a network in the hospital machines that were assigned to this project. Unfortunately at the beginning there were only 2 machines available, which caused a modification of the previous network, giving origin to a default first network where the same number of components were spread in 2 machines, machine69 and machine70. The machine69 had 1 orderer, 2 peers, 1 CA, 1 CA for tls and 1 intermedium CA and the machine70 had 2 orderers and 2 peers. Additionally, it should be known that all components from machine69 were cryptographically from a organization and in the machine70 cryptographically 1 orderer and 2 peers were from a second organization, while having 1 orderer from a third organization, much like the first network but without having a third machine.



Figure 14: Second use case: first hospital network

7º Phase: Creating a more robust network

Thinking in the next iteration, here there was an adaptation of an existing blockexplorer from Hyperledger fabric for the prototype demonstration. Also, there was a refinement of the previous structure of the configuration files from the guidelines, resulting in a template. This template was done according to a set of scripts that were developed. One script was to generate all of the configurations for a given component according to its type (ledger, peer, and orderer), enabling deterministic creation of new components if needed; another script was in charge of putting these configurations in the desired machine; and the third script was to deploy the desired components while still maintaining previous configurations of components in the machine, enabling to reset the network to any structure of network that was specified in a file with a specific syntax, which was a must for further usage in benchmarking, where different networks were tested, always created from scratch.

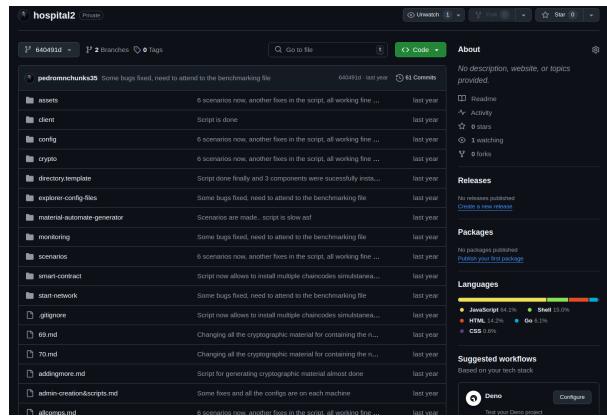


Figure 15: Second use case: hospital v2 repository

In the given picture, it can be spotted that there is a directory for templates (directory.template), a directory for scripts that generate new configurations and transfers them to a desired machine (material-automate-generator) and there is a directory for resetting a network making different networks out of the box (start-network).

8º Phase: Prototype demonstration

At this stage, there was the need to present a prototype of the network. Since the spectators were not technical, recursion to a block explorer was necessary, such that until an own implementation surged, a legacy version was used and the presentation went smoothly.

9º Phase: Interim report delivery

During this phase the report that started before was delivered, such that some fixes were needed before being actually accepted by the responsible.

10º Phase: Dissertation development

Within the 10th phase realm, the dissertation started to exist and got incremented in terms of content as the time was progressing, making sure that the schedules were being fulfilled and the project was running accordingly to the expectations.

11º Phase: Studying Benchmarking

This was the phase where **caliper**, **cadvisor**, **prometheus** and **grafana** were under inspection. **Cadvisor** was used to expose time series data relative to performance metrics of the machine, **caliper** is the actual benchmark performer, **prometheus** is where the data from cAdvisor will be gathered to be used in **grafana** which creates a visualization.

12º Phase: Making a benchmark locally

In this phase, a whole dashboard for visualizing and extracting data was created with grafana and a benchmarking was done in a local network. This local network was the one that was created in the first instance and this benchmark was only to make sure that everything was working as expected.

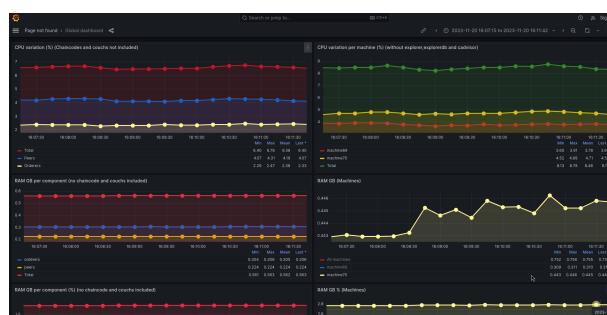


Figure 16: Second use case: first benchmark

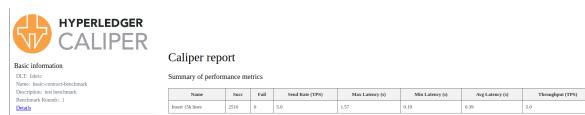


Figure 17: Second use case: first benchmark (part 2)

13º Phase: Benchmarking the first network

After having everything tested in a local environment, a real benchmark over the first hospital network was conducted. This time, the data was actually extracted as CSV. This is because it becomes easier to create graphics that are

more eager to be interpreted by paper, while the one's created are better for dynamic analysis which is fine but not for scientific work. The benchmarks were yield 10 times to make sure that it was not a one time occasion.

Name
...
CPU variation (%) (Chaincodes and couchs not included)-data-as-joinbyfield-2024-04-17_22_04_3...
CPU variation per machine (%) (without explorer,explorerdb and cadvisor)-data-as-joinbyfield-202...
Disk Usage GB per component (no chaincode and couch included)-data-as-joinbyfield-2024-04-1...
Disk Usage per Machine (%) -data-as-joinbyfield-2024-04-17_22_06_21.csv
Disk Usage per Machine -data-as-joinbyfield-2024-04-17_22_06_01.csv
Disk usage % per component-data-as-joinbyfield-2024-04-17_22_06_11.csv
Ledger size per machine GB (%) -data-as-joinbyfield-2024-04-17_22_06_39.csv
Ledger size per machine GB -data-as-joinbyfield-2024-04-17_22_06_31.csv
Number of Cumulative Received Network Packets -data-as-joinbyfield-2024-04-17_22_10_28.csv
Number of Cumulative Transmited Network Packets -data-as-joinbyfield-2024-04-17_22_11_07.csv
Number of IO Operations per machine per minute -data-as-joinbyfield-2024-04-17_22_07_15.csv
Number of IO Operations -data-as-joinbyfield-2024-04-17_22_06_58.csv
Number of IO cumulative Received Network Packets per machine -data-as-joinbyfield-2024-04-17 ...
Number of IO cumulative Received Packets Network per machine per minute -data-as-joinbyfield-...
Number of IO cumulative Transmited Network Packets per machine -data-as-joinbyfield-2024-04-1...

Figure 18: Second use case: first benchmark hospital

Name	Succ	Fail	Send Rate (TPS)	Max Latency (s)	Min Latency (s)	Avg Latency (s)	Throughput (TPS)
Final test	10820	0	45.8	2.21	0.20	0.60	44.9
2024-04-17-22:04:21.115 info [caliper] [round-orchestrator] Finished round 1 (Final test) in 241.301 seconds							
2024-04-17-22:04:21.116 info [caliper] [monitor.js] Stopping all monitors							
2024-04-17-22:04:21.116 info [caliper] [report-builder] ## All test results ##							
2024-04-17-22:04:21.116 info [caliper] [report-builder]							
Name	Succ	Fail	Send Rate (TPS)	Max Latency (s)	Min Latency (s)	Avg Latency (s)	Throughput (TPS)
Final test	10820	0	45.8	2.21	0.20	0.60	44.9

Figure 19: Second use case: first benchmark hospital (part 2)

Name
...
1
10
2
3
4
5
6
7
8
9

Figure 20: Second use case: first benchmark hospital (part 3)

14º Phase: Studying Kubernetes

After benchmarking a normal bare metal network, there was a deep reflection about the ease to use such infrastructure. Between configuring everything and putting everything in every single machine and managing every single instance within a healthcare organization, it became obvious that it would create burden for a administrator that wanted to spoil it's machines with multiple components.

With this in mind, within this phase there was a deep dive into kubernetes. Very powerful as it is, it imposed a very huge challenge in terms of knowledge as the **hyperledger fabric**, where the documentation was very complete and extensive, not speaking about the tutorials that were done in order to understand the basis of such tool. In addition, this became even more clear with the fact that the infrastructure had the need to be implemented on premise, where everything must be installed from scratch, different from the cloud where everything is already installed and ready to use.

Besides **kubernetes**, other technologies were observed for the on-premise imposition. This technologies were **metallb**,**calico** and **kubeadm**. **Metallb** was required to offer load balancing capabilities, **calico** was a network plugin for pods to communicate with each other and **kubeadm** was to deploy and join nodes to a cluster.

Relatively to operational guides and abstracts of what was covered during this interval, they were placed in github repositories where information was both by photo and markdown files making this information accessible whenever needed.

Name	Last commit message
...	
practical	CDnfigs in custom images
CRI.ind	Testing if it will throw a event
about-pods.md	Testing if it will throw a event
cgroupt.md	Testing if it will throw a event
cloud-controller-manager.md	Testing if it will throw a event
communication-nodes-control-plane.md	Testing if it will throw a event
config-best-practices.md	Testing if it will throw a event
container-environment-section.md	Testing if it will throw a event
container-lifecycle-hooks.md	Testing if it will throw a event
containers-images.md	Testing if it will throw a event
controllers.md	Testing if it will throw a event
cronjobs-and-other-minful.md	Testing if it will throw a event
daemon-set.ind	Testing if it will throw a event
deployments.ind	Testing if it will throw a event
disruptions.md	Testing if it will throw a event
dns-for-services-and-pods.md	Testing if it will throw a event
downward-api.ind	Testing if it will throw a event
endpoint-slices.md	Testing if it will throw a event
ephemeral-containers.md	Testing if it will throw a event
garbage-collection.ind	Testing if it will throw a event
gateway-api.ind	Testing if it will throw a event
ingress-controllers.md	Testing if it will throw a event
ingress.ind	Testing if it will throw a event
init-containers.ind	Testing if it will throw a event
jobs.ind	Testing if it will throw a event

Figure 21: Second use case: kubernetes study

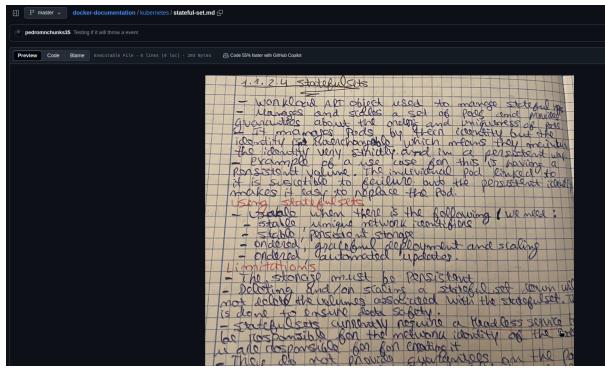


Figure 22: Second use case: kubernetes study (handwritten)

15^o Phase: Implementing a blockchain network with kubernetes

In this phase, a **hyperledger fabric** network was built under **kubernetes**. To achieve this, this network was deployed firstly locally with the main machine as the master node and 1 VM as it's slave node. The network that was deployed there was relatively small compared to the first that was deployed in the local environment and no load balancer was implemented in this inception because the objective was to simply put a network in such environment. Additionally, it should be known that in **hyperledger fabric**, deploying a chaincode in bare metal is completely different from implementing it in a **kubernetes** environment: In a bare metal environment the installation of the peer can be done directly in the peer, while in the case of kubernetes chaincode must be installed as a service that can be shared by multiple peers. The reason for this has to do with the control over the container runtime. There are operational guidelines regarding this first implementation.

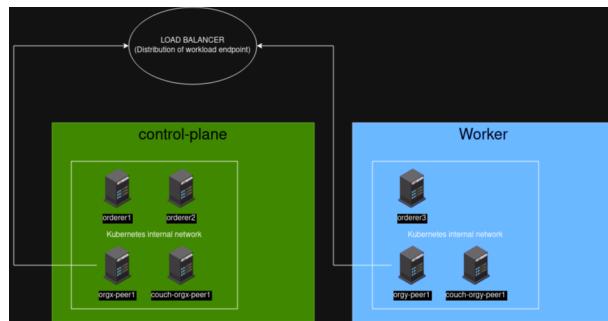


Figure 23: Second use case: local kubernetes hlf network

Figure 24: Second use case: local kubernetes hlf network (part 2)

It should be noted that despite a reference to a load balancer in the network structure image, there is no real

load balancer but rather a nodePort which also does load balancing but in a limited way since that is not it's main purpose.

16º Phase: Creating a more robust network for a kubernetes environment

After accomplishing a working **kubernetes** network, 2 things were added to provide more support to the network and a third thing was added just for testing. Firstly, a real load balancer that supports on-bare metal kubernetes was deployed which was the previous mentioned **metallb**. In second, Automation mechanisms were also added to contribute to resetting and managing the network more effectively but with it's aim in adding in the future a UI that could give an administrator the power to manage it's infrastructure. Lastly, a service mesh was implemented for testing purposes for knowing how could such practise give more grained control over the network by controlling in which cases traffic is allowed, while providing monitoring features that are very useful for an admin.

Focusing more in the second point, this was a innovative idea that came from a **Sidecar** container Architectural pattern. This was the case, since every component of the network has a side-container to extend it's communication features, enabling to upload files and also to run commands destined to the binaries exactly like the admin would be inside of the container. During this phase, a web UI prototype was also used to test this features and this way of communicating with every service was also widely used to automate network booting alongside with scripts which would also automate multiple network schemes to the network, just like it was done in the on bare-metal approach but in a even more easier to use methodology, since with this there is the opportunity to use a general purpose programming language such as golang or javascript.

During this conception, another structure of network was implemented, presenting 3 machines instead of only 2, where there was a control plane with a single point of failure graphql service and 1 peer with a side container and a orderer with a side container in each machine forming all together a cluster locally where an administrator could run commands easily.

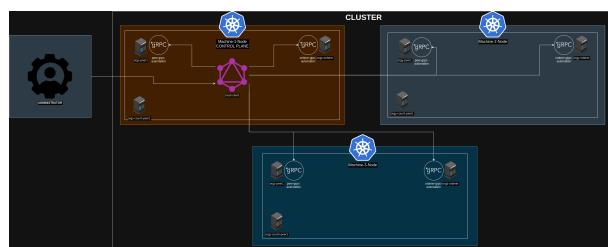


Figure 25: Second use case: kubernetes automation creation

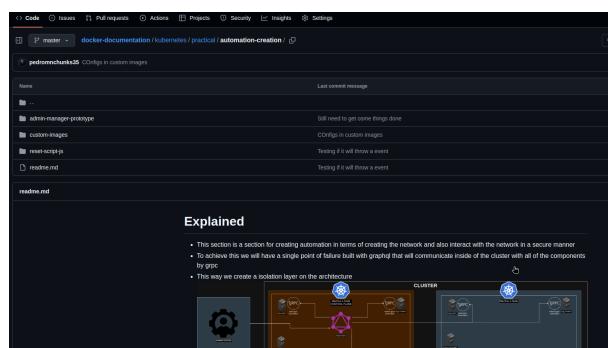


Figure 26: Second use case: kubernetes automation creation repository

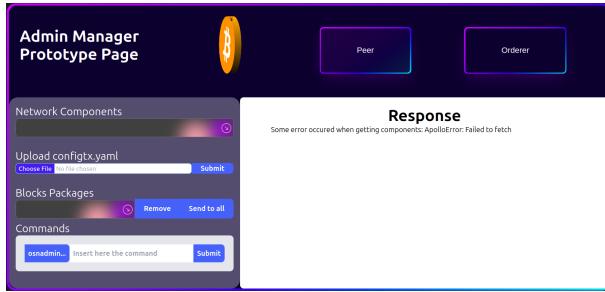


Figure 27: Second use case: kubernetes automation creation orderer prototype

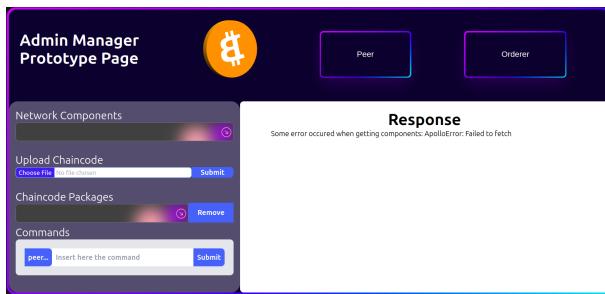


Figure 28: Second use case: kubernetes automation creation peer prototype

17º Phase: Second installation in a hospital

In this phase, fortunately there was a release of an extra machine for this work which was very pertinent for what was about to come and it was even more suitable because the same network structure was already implemented in the local network. With this in mind, the same network with the same sidecar container and metallb functionalities was implemented successfully in the hospital environment, while effectively handle the segregation with **non-kubernetes** implementation by deploy a chaincode-as-service instance.

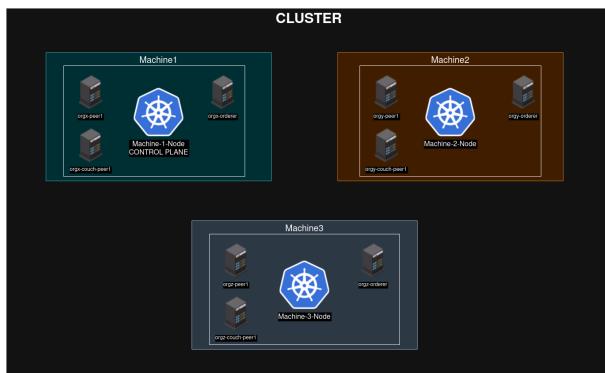


Figure 29: Second use case: kubernetes first hlf hospital network

18º Phase: Creation of multiple networks

As mentioned before, the bigger the network in terms of number of different identities, the bigger the network burden. With this in mind, within this phase knowing the limitations of the number of components that could be handled by 2 machines was put into cause. At this time, the third machine was on maintenance, which causes to only test this overhead in 2 machines instead of 3. However, to see until each measure this could impose a threat in a small set of resources it was created 6 scenarios of networks which are the following:

The default scenario, was the first scenario that was implemented in the first hospital network when there was only 2 machines: first organization had 1 orderer and 2 peers and it was located in the first machine, the second organization had 1 orderer and 3 peers and was located in the second machine and the third organization had 1 orderer and it was located in the second machine as well.



Figure 30: Second use case: multiple networks default scenario

In the first scenario, the first machine had one organization with 1 orderer and 1 peer and the second machine had 2 organization where the first had 1 orderer and 1 peer and the second had 1 orderer.



Figure 31: Second use case: multiple networks scenario 1

Within the second scenario, in the first machine there were 3 organizations: The first one had 1 orderer, the second one had 1 orderer and the third had 1 orderer and 2 peers. Also, in the second machine there were 2 organizations: The first one had 1 orderer and 3 peers and the second one had 1 orderer.



Figure 32: Second use case: multiple networks scenario 2

In the third scenario, in the first machine there were also 3 organizations: the first had 1 orderer, the second had 1 orderer and 3 peers while the third had 1 orderer and 2 peers. In the second machine, there were 2 organizations: The first had 1 orderer and 3 peers and the second had 1 orderer and 3 peers.



Figure 33: Second use case: multiple networks scenario 3

In the forth scenario, in the first machine there were 4 organizations: the first had 1 orderer and 2 peers, the second 1 orderer and 3 peers, the third 1 orderer and 2 peers and the forth had 1 orderer. In the second machine,

there were 3 organizations: the first had 1 orderer and 3 peers, the second had 1 orderer and 3 peers and the third had 1 orderer and 2 peers.



Figure 34: Second use case: multiple networks scenario 4

In the fifth scenario, in the first machine there were 4 organizations: the first one had 1 orderer and 3 peers, the second had 1 orderer and 3 peers, the third had 1 orderer and 3 peers and the forth had 1 orderer and 3 peers. In the second machine there were 3 organizations: the first had 1 orderer and 3 peers, the second had 1 orderer and 3 peers and the third had 1 orderer and 3 peers.



Figure 35: Second use case: multiple networks scenario 5

Despite designing so many networks, and having in consideration that there was the removal of the kubernetes for the sake of performance unfortunately after the scenario 3 it was not possible to conduct a full benchmarking. What was noticed is that it was exceeding in remarkable ways already in terms of CPU in the scenario 3 and it needed more resources to reach the scenario 4, which makes sense since the resources were not the most powerful ones but it was interesting still to see how many components it could handle.

19º Phase: Benchmarking the network

Within the realm of the 19º phase, benchmarkings were conducted. The benchmarking that was done before was refactored because of some errors in the dashboard and also because now there was the existence of a third machine which would make the tests even more interesting. By the effect of such, benchmarks were conducted within the scope of the last network that got implemented in the hospital. In the case of the **kubernetes** implementation, there were 2 types of benchmarkings conducted: one with load balancing and another without load balancing. On another hand, in respect to the **non-kubernetes** implementation, only the normal test was considered. Because both **kubernetes** and **non-kubernetes** had the same structure of network, the data could be compared effectively. Additionally, **Jenkins** was used to automate this since it was used previously in a continuous integration perspective to come up with the side containers present in each of the components like mentioned before. With this, benchmarkings were totally automated both for bare metal but also for **kubernetes** which speed up even more this process and gathered all of the tests in no time.

By the effect of this, 3 architectures were under test: one architecture which only relies on **Docker**, a second architecture that leverages **Kubernetes** without load-balancing and a third which leverages **Kubernetes** with a load-balancing.

Docker

Speaking about the considered network of **Docker**, this is composed by 3 machines with 3 different organizations. Each organization had the same amount of components like 1 peer and 1 orderer. However, since this is a network fully composed by docker containers the way the chaincode is deployed is accordingly to the default way, where each peer has its chaincode attached to it like a side container. There are no life savers when it comes to configuring such network, which means that adding or removing components requires more work altought it has less burden when compared to kubernetes.

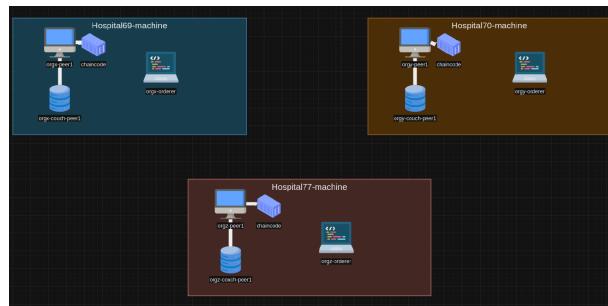


Figure 36: Second use case: Docker only Architecture

Kubernetes

Reaching the **Kubernetes** considered network, there is a network with 3 different machines and 3 different peers. Each organization, like in the previous architecture, had 1 peer and 1 orderer, where the most significant changes are related to the fact that each main component had one side container attached that served as a proxy for managing configurations within the components. This approach compared to the docker one makes the management of the network easier, since there was the possibility to configure each component from the same unique point of failure (multi-client). However, this is supposed to be less performant because there is the burden of the **Kubernetes**, causing a higher need of resources.

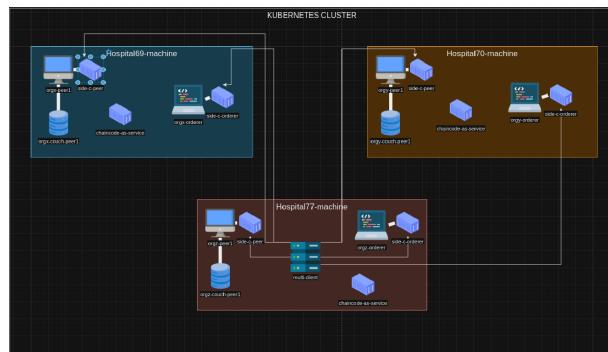


Figure 37: Second use case: Kubernetes Archiecture

Kubernetes with load balancing

When it comes to the last Architecture **Kubernetes with load balancing**, there is the same architecture as the

previous **Kubernetes** one, where the difference resides in the fact that there is a addition of a load-balancer, where the load gets evenly spread among the participants of the network.

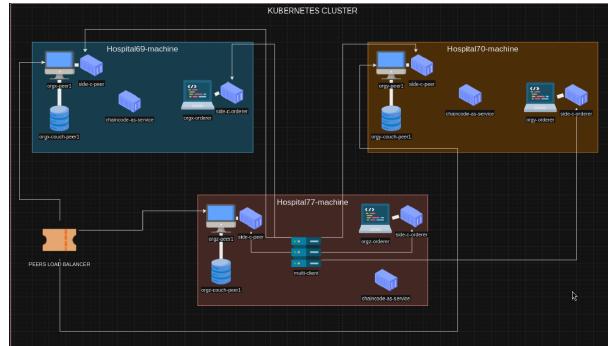


Figure 38: Second use case: Kubernetes with Load Balancer Architecture

Evaluation

The following image shows the results of the analysed metrics regarding the architecture that uses **Docker**, architecture 1. In the Architecture 1 image presented below it is possible to observe the results of the metrics analysed for architecture 1. Starting the analysis with the CPU variation, this shows a sharp initial growth, followed by oscillations and a slight drop before growing again until the end where it reaches the peak with a value of 242.0. Disk usage on this architecture starts at a low level and shows steady growth until it peaks at 0.08 GB. After this, there is a small reduction before growing again at the end of the period. Analysing the metric, use of the ledger grows gradually over time, with some fluctuations until reaching a maximum value of 0.01 at the end of the period. Finally, analysing the use of RAM, it shows several fluctuations. In the graph it is possible to observe specific variations, but the trend is for growth over time, reaching its maximum peak at the end of the period with a value of 1.66 GB.

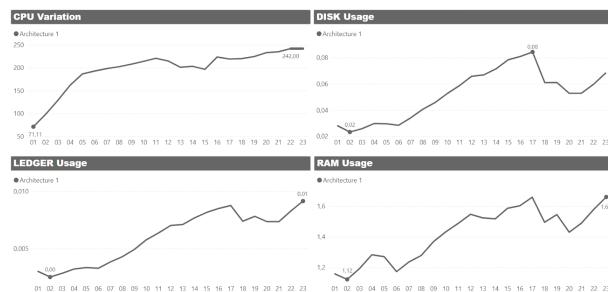


Figure 39: Second use case: Docker Architecture 1 Evaluation

The following image shows the results of the metrics analysed in both architectures. The analysis is carried out comparatively between both because they both use **Kubernetes**. They differ from each other, while architecture 2 uses **Kubernetes**, architecture 3 uses **Kubernetes** with load balancing. In this way, a comparative analysis is carried out between them.

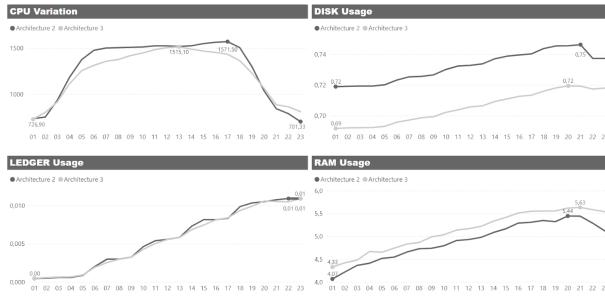


Figure 40: Second use case: Kubernetes Architecture 1 and 2 Evaluation

In the image related to the Architecture 1 and 2 above, it is possible to observe that architecture 2 shows a sharp increase in CPU variation, reaching higher peaks, with a maximum value of 1571.50 while architecture 3 presents a maximum peak of 1515.10. Analysing disk usage, both grow consistently, however, architecture 2 has a higher disk usage with a peak of 0.75 GB when compared to architecture 3 which has a peak of 0.72 GB. At the end of the analysis period, both showed a decline and subsequently stabilised. The use of the ledger in both architectures is practically identical throughout the analysis. Both follow a similar growth trajectory, with a maximum peak of 0.01 GB. Finally, in relation to the RAM usage metric, both grow consistently, however, architecture 3 has a slightly higher RAM usage than architecture 2 throughout the analysis period, reaching its peak at 5.63 GB.

20º Phase: Solutions comparison

On this phase comparison between the previous benchmarks was done, reaching a consensus about what must be sacrificed in order to choose one over another.

21º Phase: Creation of extra services

In the context of the phase 21, a set of extra services was created. This services are needed for the purpose of logging, monitoring and security. This was all done with continuous integration pipelines and by leveraging technologies that enable cloud native applications inside of a **kubernetes** cluster, so the context could be the same for testing purposes.

The first service created was a own implementation of a block explorer. This proved to be very hard because, despite the gathering of data being something relatively easy to have by listening to the peer events, it was serialized in **protobuf** which means that the molding of the data should be uncovered to see in a human readable format, something that is not that easy because it is not explicitly documented and despite having the models knowing which slice of protobuf serialized data corresponds to one of the numerous existing models was something unfeasible, pretty much like a puzzle without instructions and the picture to know where which piece would fit. However, this came to a success and this extra service proved to be very useful in future iterations.

The second service created was a **quarkus** instance, conceded for making queries to the database where the block explorer was storing everything and this way serving a future client.

The third service created was a C++ web service for **prometheus** data. This is important because it is a good practise to not expose all of the **prometheus** data to the exterior, therefore the need to only expose those services that were actually in need and because the functionalities are very limited, using a high performing programming language was something that seemed better, specially because if the functionality is simple there are less concerns about eventual errors that lower level languages give, which are greater when the project complexity evolves.

The forth and final service that was created as a keycloak server, which was there to manage users. By logging in, a key was generated and could be used to authenticate a admin for him to interact with the previous mentioned

services like **quarkus, cpp** and the **graphql** single point of failure that communicates with the components side containers.

22º Phase: Creation of a web client application

After the creation of extra services, something that could be used to communicate effectively with the infrastructure to supply an admin with management features is required. This management features were divided into **block explorer, general network, peer config** and **orderer config**.

Block explorer

This first main component was the Block Explorer, to monitor and manage network transactions. It collects and stores data through a custom implementation that captures all relevant details from the network. This data is securely stored in a database, granting easy access and analysis. Data is later processed by a backend architecture that makes it available to the administrative web interface. This system allows administrators to perform a number of administrative functions over most parts of the blockchain. These include viewing the network activities by channel, the performance of the network in considerable details, and the inspection of blocks, transactions, and other related network objects. It also enables the supervision and administration of the components, as well as the channels they form part of, which are necessary for the network to operate.

NAME	IP ADDRESS	ALIVE
org-peer1	org-peer1:80	YES

Figure 41: Second use case: admin web client block-explorer dashboard

In the dashboard menu, users can access detailed metrics, including the number of blocks, transactions, nodes, chaincodes, and peers within the system. Additionally, the dashboard provides insights into the percentage of transactions categorized by organization, allowing for a clear understanding of activity distribution. A timeline-ordered block list is also available, offering a chronological view of block creation and updates. All of this information is meticulously organized by channel, enabling users to easily navigate and analyze data specific to each channel.

NAME	IP ADDRESS	TYPE OF COMPONENT	MSP	TRANSACTIONS	CHAINCODES	ALIVE
org-peer1	org-peer1:80	peer	OrgMSP	10827	0	YES
org-peer1	org-peer1:80	peer	OrgMSP	1	0	YES
org-peer1	org-peer1:80	peer	OrgMSP	2	0	YES

Figure 42: Second use case: admin web client block-explorer network

In the network section, users can access a comprehensive list of nodes currently participating in the channel. This list is similar to the one found in the dashboard but offers more detailed information for each peer. For instance, it includes the peer's IP address, type, Membership Service Provider (MSP), the number of transactions it has processed, the number of chaincodes it supports, and its current status (whether it is active or not). As with the dashboard, all of this data is organized by channel, allowing users to focus on specific channels as needed.

BLOCK NUMBER	CHANNEL	DATA HASH	TRANSACTIONS	SIZE
0	channel	Z0FOYtX03oeG...	1	45998
1	channel	Z0FOYtX03oeGZ...	1	5759
2	channel	Z0FOYtX03oeGZ...	1	5720
3	channel	Z0FOYtX03oeGQ...	1	5692
4	channel	Z0FOYtX03oeGQ...	1	8509

Figure 43: Second use case: admin web client block-explorer blocks

In the blocks section, detailed information about each block is provided, including the channel it belongs to (which is obvious since it is possible to select the channel to inspect), its data hash, the number of transactions it contains, and its size within the ledger.

CREATOR	CHANNEL	TX ID	TYPE	CHAINCODE	TIMESTAMP
	channel	a068f00bd0d1c...	CONFIG	basic	1721585733
Org1MSP	channel	a02a576765fb4...	ENDORSER_TRANSACTION	basic	1721585804
Org1MSP	channel	9248fe4e02f29d...	ENDORSER_TRANSACTION	basic	1721585850
Org1MSP	channel	34d47662299b...	ENDORSER_TRANSACTION	basic	1721585895
Org1MSP	channel	b4d940199c9e...	ENDORSER_TRANSACTION	basic	1721585905

Figure 44: Second use case: admin web client block-explorer transactions

In the Transactions section, users can access a comprehensive overview of all transactions, each accompanied by detailed information organized by channel. This includes the creator of the transaction, the name of the channel in which the transaction occurred, the transaction ID (TX ID) for unique identification, the type of transaction performed, the name of the chaincode invoked, and the precise timestamp when the transaction was executed. This detailed breakdown, organized per channel, allows users to thoroughly analyze and track each transaction, ensuring complete transparency and traceability within the system.

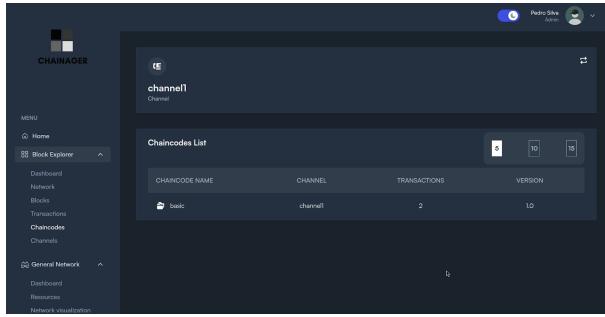


Figure 45: Second use case: admin web client block-explorer chaincodes

In the Chaincodes section, users can view detailed information related to the chaincodes within a given channel, including the chaincode name, associated channel, number of transactions, and the version of each chaincode.

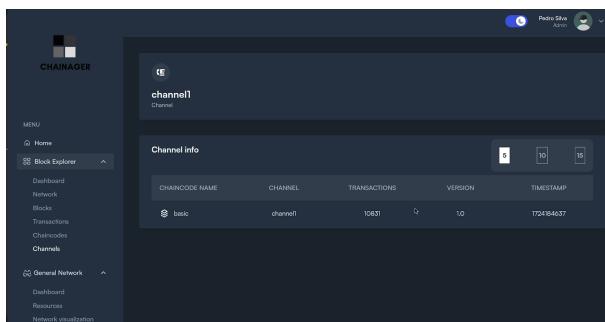


Figure 46: Second use case: admin web client block-explorer channels

In the Channels section, users can access detailed information about each channel, including the chaincode name, associated channel, the number of transactions per chaincode, the version, and the timestamp.

General Network

This part analyzes the resource utilization of the network. It provides monitoring of several performance metrics: CPU, RAM, disk usage, ledger activity, I/O operations, and network performance. Also, it presents the resources within each cluster, a graphical representation of the network's structure, and allows for an examination of their configurations and how they are organized within each component's directory.

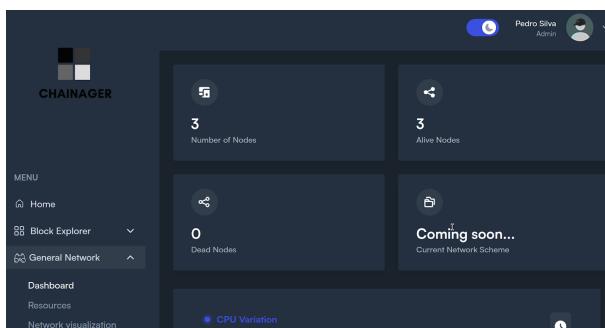


Figure 47: Second use case: admin web client general network dashboard

In the “Dashboard” section it is possible to have a glance of all the network like: checking number of nodes, alive nodes, dead nodes, CPU variation%, disk usage per machine GB, disk usage machine%, RAM per machine GB,

RAM per machine%. Relatively to the network scheme, that's a probable future feature of changing between clusters because this is cluster-oriented.

SERVICE TYPE	SERVICE NAME	SERVICE TYPE	IP ADDRESS
ClusterIP	basic-chaincode	ClusterIP	10.96.2.27
ClusterIP	block-explorer	ClusterIP	10.10.2.100.83
NodePort	ca	NodePort	10.97.163.232
NodePort	cpp-rest-hlf	NodePort	10.10.2.172.153
ClusterIP	db-postgresql-block-explorer	ClusterIP	10.10.7.23.059

Figure 48: Second use case: admin web client general network resources

The "Resources" section provides a list of the services residing in that cluster, each corresponding to the DNS name of that service.

Figure 49: Second use case: admin web client general network resources

In the "Network Visualization" section, a cluster-oriented representation of the current components is provided. This view is cluster-oriented because it displays resources based on what exists in the cluster rather than on a specific network channel. If it were based on a network channel, the visualization could include components outside of the cluster.

Peer Config

This section deals with peer management and provides a comprehensive user interface for performing all standard peer operations, like: uploading configurations, querying, fetching and joining channels, installing, querying, approving and committing chaincode, checking chaincode approvals, invoking chaincode for testing, and executing custom commands for more advanced operations.

Figure 50: Second use case: admin web client peer config upload of configurations

This section allows for the upload of pair definitions, as well as the chaincode package for installation. To do this, a pair is selected to proceed with this process.

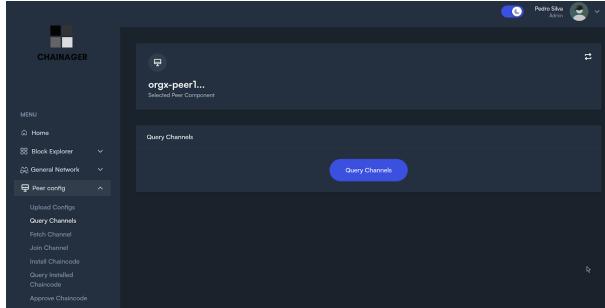


Figure 51: Second use case: admin web client peer config query of channels

This section makes it possible to consult the channels to which a particular peer is connected, and that is why to get to this point it is necessary to select a particular peer.

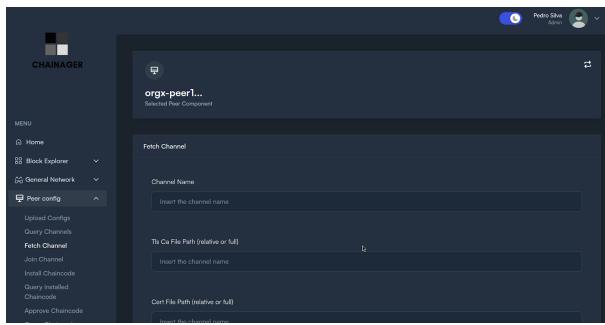


Figure 52: Second use case: admin web client peer config fetch a channel

In this section, searching for an order channel is possible. To achieve this, the channel name, TLS CA file path, certificate file path, key file path, and IP address of the requestor from which it fetches the channel are provided.

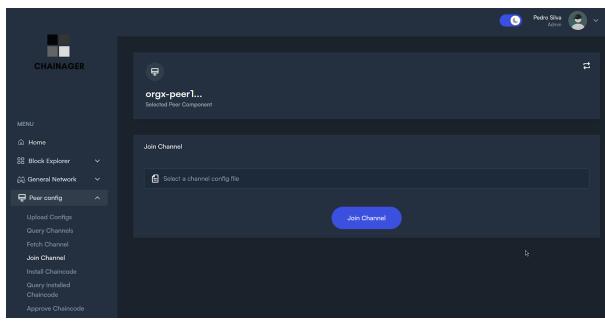


Figure 53: Second use case: admin web client peer config join channel

In the "Join Channel" section, joining a channel is enabled by selecting the correct searched channel on a given peer.

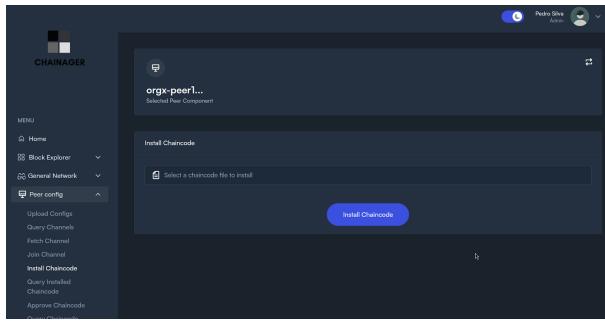


Figure 54: Second use case: admin web client peer config install chaincode

In this "Install Chaincode" section, access to files uploaded from the "Upload Configs" section is provided, making it easy to select the desired chaincode.tar.gz file for installation.

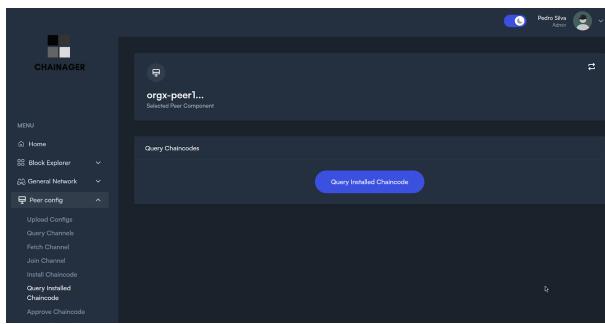


Figure 55: Second use case: admin web client peer config query chaincodes

The "Consult Installed Chaincode" section provides access to the chaincodes that are already installed.

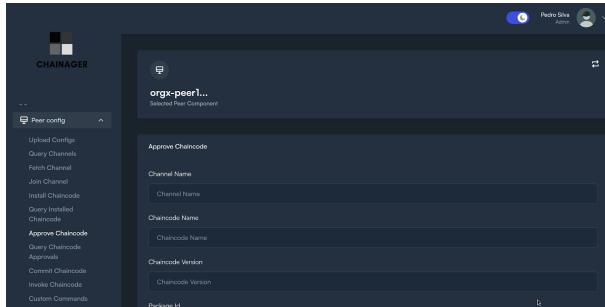


Figure 56: Second use case: admin web client peer config approve chaincode

The "Approve Chaincode" section provides all the information needed to approve a chaincode, including the channel name, chaincode name, chaincode version, package ID, sequence, TLS CA certificate path, CA certificate path, private key path, and orderer IP address.

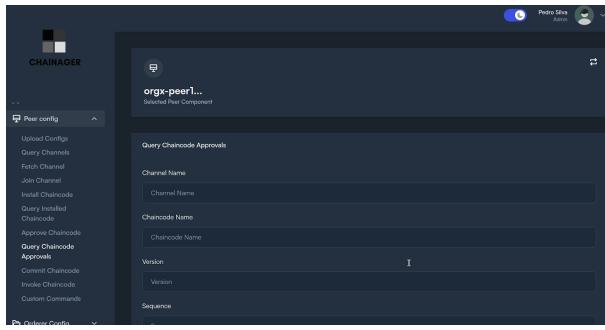


Figure 57: Second use case: admin web client peer config query chaincode approvals

The "Querying chaincode approvals" section provides a form with all the fields needed to query chaincode approvals, including the channel name, chaincode name, version, sequence, TLS CA certificate path, CA certificate path, and private key path.

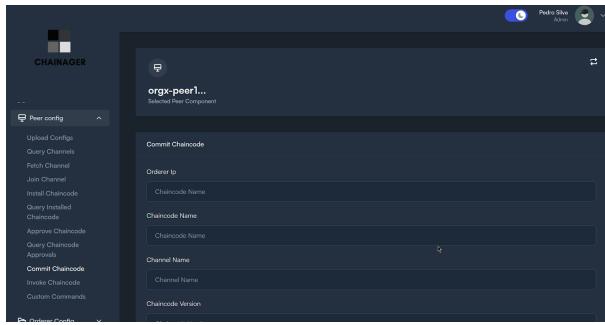


Figure 58: Second use case: admin web client peer config commit chaincode

The "Commit Chaincode" section provides all the fields required to commit a chaincode to a given peer and channel, including the orderer IP, chaincode name, channel name, chaincode version, required peer signatures, chaincode sequence, and the TLS CA file for connecting to the peer.

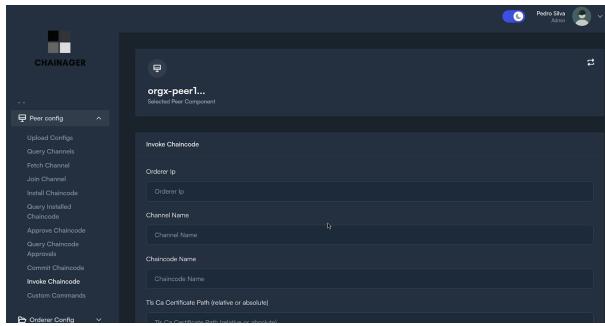


Figure 59: Second use case: admin web client peer config invoke chaincode

In the "Invoke Chaincode" section, I have all the necessary information to invoke a chaincode, including the orderer IP, channel name, chaincode name, TLS CA certificate path, certificate path, private key path, function name, and arguments separated by commas.

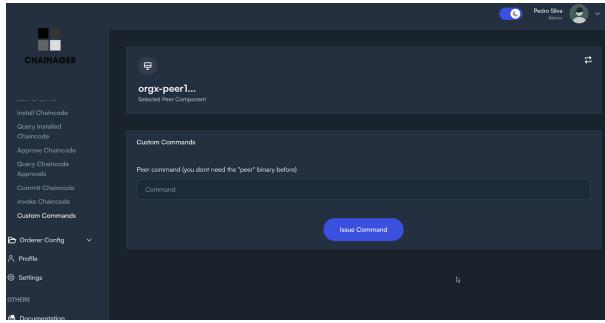


Figure 60: Second use case: admin web client peer config custom commands

In the "Custom Commands" section, I have all the necessary tools to create a custom command with a peer, which can be valuable in unexpected situations.

Orderer Config

This section focuses on the management of the orderer and provides a comprehensive set of tools for efficiently handling all regular duties. Users can create new channels, join existing ones, and execute custom commands for more complex configurations.

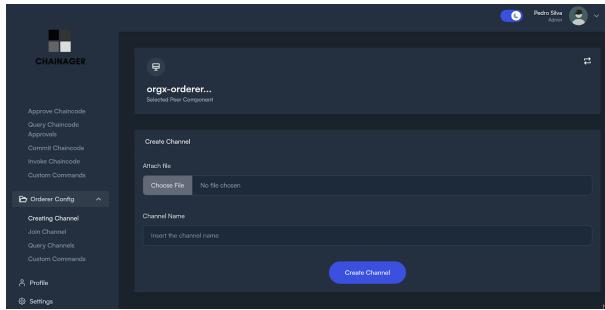


Figure 61: Second use case: admin web client orderer config creating a channel

This section is designed to create a channel for a selected orderer. To do this, an order is selected, a channel configuration file (configtx.yaml) is attached, the channel is named, and finally the request is sent.

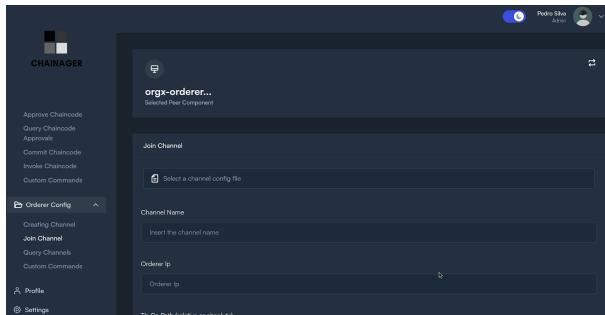


Figure 62: Second use case: admin web client orderer config join a channel

The "Join Channel" section is designed to facilitate joining a channel. Here, all necessary components are displayed. These include the channel junction file, channel name, requestor IP, TLS CA path, client certificate, and client private key.

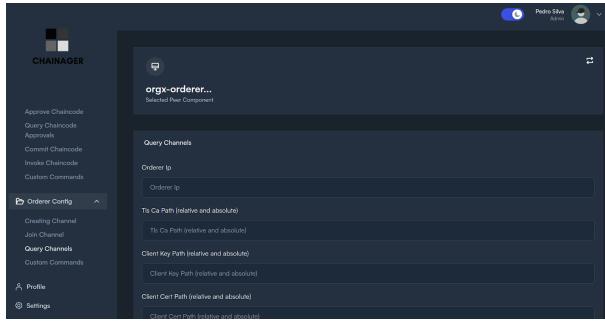


Figure 63: Second use case: admin web client orderer config query channels

This section is for querying the channels associated with a given order. To perform the query, the request IP, TLS CA path, client key path, and client certificate path must be provided.

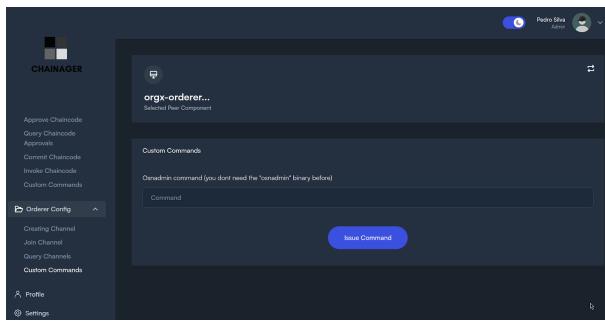


Figure 64: Second use case: admin web client orderer config custom commands

This is the custom commands section. Custom commands are executed in the order component if there is a need for a personalized interaction with it.

Final Architecture

After having the web client application, it could be said that the final architecture was achieved. There may be some improvements in the future but the most of it was already accomplished.

In this final architecture, it was implemented with the same setup as the one verified in the Kubernetes with load balancer. Here, the architecture is presented with additional components that are essential to a production environment. With this in mind, besides the core components, there are also: prometheus (for fetching the data from all the cadvisors and also components of the network), cAdvisor (measures collector for prometheus), cpp-rest-service (to wrap the data from prometheus and serve it to the admin web server; it is a good practice to not expose entirely the prometheus API), keycloak (for users management), blockexplorerlistener (a developed implementation of a blockexplorer listener to grab the data from events and store it on a database), postgresql-blockexplorer (database for the blockexplorer listener), and quarkus rest for serving this blockexplorer data to the admin web server. Note that the multi-client now serves the admin web server.

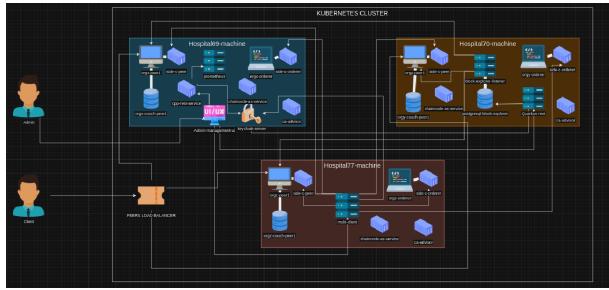


Figure 65: Second use case: final architecture

4.3.3 Discussion

Throughout this section, the different architectures will be discussed accordingly to previous testing results, considering them in terms of scalability and sustainability. Also, a **SWOT** diagram will be presented, to understand the strengths, weaknesses, opportunities and respective threats.

Architectures discussion

The following table represents the main sides to take into accordance when it comes to choose between the kubernetes and the docker architecture.

Characteristic	Docker	Kubernetes
More performance for smaller environments	X	
Less abstract and easier to learn	X	
Incorporated load balancer		X
Resource management		X
Robust API for managing resources		X
High availability		X
Built-in mechanism for horizontal scaling		X
Higher resource overhead		X

Table 3: Second use case: Characteristics comparasion between docker and kubernetes

While **Kubernetes** does come with a steeper learning curve and a higher resource overhead, these complexities are justified in larger, more complex environments. In this case, The smaller environment favors Docker for its performance. and ease of use. However, as the project expands and the environment scales, **Kubernetes** will likely become the more beneficial option due to its advanced features and ability to handle larger workloads. Regarding the comparison between Architecture 2 and 3, even though the implementation of a load balancer had only residual benefits in some of the metrics and that its Implementation may introduce complexity to the development of the network, it provides several advantages that, in the long term, can be very beneficial. It can ensure better scalability, reliability, resource allocation, and performance, contributing for the solution sustainability over time. In summary, **Docker** has proven to be the more performant solution for the current, smaller environment. Yet, this project relies on **Kubernetes** for specific aspects, such as the UI tool, due to its powerful API and management capabilities. As growth is anticipated, the robust management and high availability offered by Kubernetes by Deploying a load balancer will become increasingly valuable. making it the preferred choice in larger, more complex deployments.

SWOT analysis

The following figure dictates a **SWOT** analysis for the second use case project.

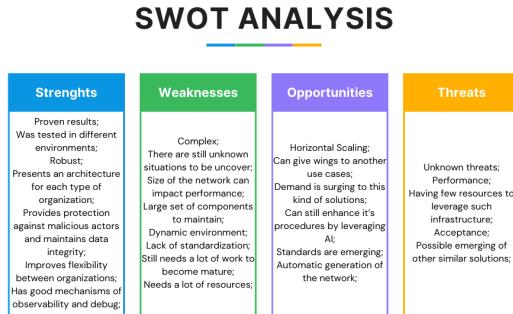


Figure 66: Use case 2: SWOT analysis

4.3.4 Conclusion

To summarize, in terms of infrastructure architectures, three implementations were developed during the project: one using **Docker**, the other using Kubernetes, and a third one using **Kubernetes** alongside a load balancer. This implementation evolved as we developed further in time, aiming to firstly create the most basic network (docker), secondly to present a more robust architecture that could also be used to manage better an infrastructure that could evolve in number of components with time (kubernetes), and lastly to an infrastructure where we could balance traffic within the same channel contained in a certain number of components (kubernetes with load balancing). Docker is suitable for small businesses due to its greater simplicity and ease of use, although there is more overhead around setting how components must communicate, while Kubernetes is better for treating components as simple resources designed for larger, more complex environments, more scalable, more incremental, and easier to maintain architectures. We also benefit from features provided by the Kubernetes API that we can use to obtain information about concrete resources that we can use to create analysis tools like the ones mentioned in our project. With **Kubernetes**, regardless of the number of components we have, we will be able to use this analysis tool without further configurations than the resource itself. The **Kubernetes** with load balancer (K8 with LB) approach was chosen. This makes sense because of all of the characteristics mentioned so far that are very suited for an infrastructure for the healthcare industry—a sector that demands a large, resilient infrastructure and advanced features to manage and monitor the network for its administrators, aligning with our primary goal.

Speaking about the platform itself, the system developed provides a robust and comprehensive solution for monitoring and managing the **HLF** network. This is only possible due to the selected solution. The system guarantees continuous access and analysis through its design architecture, where various critical statistics are consolidated. This system not only replicates but also improves on the functionality of previous solutions, allowing administrators to perform a wide range of tasks with greater efficiency and precision all in one single place, reducing errors as common network tasks are successfully automated and monitoring is provided. More concretely, the system provides more than a basic network management. It offers information about resource utilization, peer management, and orderer operations. It also provides a user-friendly interface to easily handle complex tasks such as monitoring network

activity, managing resources, or adjusting settings. This is a solution that offers everything that an administrator needs to control its network.

4.3.5 Future Work

Since blockchain networks are not a basic matter and managing multiple components in that realm scalates to even more complex situations, future work regarding what has been covered so far is more than needed. The work that remains to be done ranges from observing further details about the infrastructure chosen architecture and processes refining to improving existing solutions that have been constructed so far. There is no perfect system, and thinking forward to collate possible issues is more than a primary key. However, additions to the current implementation are out of question since the more is introduced, the more features must be supported, thereby quality can be sacrificed.

By the effect of such, in this section, the most critical future work in mind will be covered and explained in a brief way.

Horizontal Scaling in a HyperLedger fabric network

Horizontal scaling, or scale-out, is a critical optimization of the system to manage more workload—notably within containerized environments—into one node, while horizontal scaling will increase the number of nodes to share a load over more than one machine. This means that in the case of **Hyperledger Fabric** (HLF), which is a commonly used distributed ledger platform for blockchain-based solutions, there is a potential application of horizontal scaling. It would be quite interesting, to say the least. In the case of **Hyperledger Fabric** (HLF), since a network often involves the co-existence of multiple organizations, which are usually referred to as consortiums, the potential key issue of effective performance optimization may lie in the ability to scale horizontally when the size and complexity of this kind of network grows. Horizontal scaling will allow the number of instances in the system to bend with real-time traffic demands, or surges in computational work—things that normally accompany every organization in an HLF network. Every organization within an HLF network operates its own set of peers including services for ordering and many other components. In this regard, we will predict for subsequent work how much horizontal scaling can be done with an HLF network. We will look especially at when it can be pushed forward—when no diminishing returns from the system’s architecture meet a bottleneck. This will comprise the evaluation of different factors like latency, throughput, and resource usage under different scaling scenarios. We also want to verify if the application of horizontal scaling in such networks offers real advantages for large consortiums, mainly those operating with a high volume of transactions or in need of high fault tolerance. This is significant potential for research, as it could bring insight that is useful to organizations running large-scale **HLF** networks. With this, architectural teams would then have the knowledge of whether horizontal scaling really yields measurable improvement in performance and resilience that is satisfying to their operational needs. Finally, findings emerging from this work may help consortiums understand the trade-offs involved and make a decision on whether horizontal scaling could really be a feasible and beneficial approach for the considered blockchain projects.

Automating Network Component Generation

This will focus on automating the generation of network components, such as peers and orderers, directly in a user interface (UI). This automation will be possible by using scripts and a standard template to the creation process, reducing the need for manual configuration which results in a reducing of errors. By integrating this directly in the UI, we can significantly improve operational efficiency by enabling rapid deployment and management of HLF

components. This approach will allow network administrators to create new components with ease, which will give them more time to plan how exactly they want their network to be because creating it by themselves creates a huge overhead due to the number of configurations that can result in unexpected behavior, which may cause a very huge loss of time.

Creating Recovery Plans for HLF Components

Because the **HLF** is a complex infrastructure, developing recovery plans for components is of much importance. With this in mind, it is planned to actually create a set of detailed plans for given situations that outline the steps necessary to quickly identify, contain, and recover from failures in these components. These recovery plans will be essential to know exactly what to do when some unknown behavior happens, which is something that we should give special attention to due to the importance of the probable use case. By implementing these recovery strategies, organizations can feel confident to use our solution for their **HLF** networks and know for sure that the system remains resilient to a vast number of situations, preserving data integrity and service continuity. In case some new case occurs, we have also plans to create a community that communicates faced challenges, that later one could be added to this recovery plans because this work must be continuous.

Improving Documentation Practices

Documentation often lacks clarity and accessibility, which can lead to misunderstandings and inefficiencies while working with the given product. Because we have our own documentation for this project, it is important to refactor it in order to create well-formatted documentation that is easy to use and clearly explains how to complete certain tasks that may be required depending on the objective of the administrator. Improving the documentation is something that we see as very important, as it will be the basis for current and future administrators and programmers to take advantage of the created features in our project, making it easier to work with. It also helps with onboarding new team members and ensuring consistent practices across the organization. The point of access to our documentation is still under work, but it is expected to be available in our UI.

Improving the current UI

Despite being very composed, our current UI must be even more improved. There are features to be added and others that must have further modification, as for now it is still in a beta version. With this in mind, we want to: Add a menu for documentation, which we already discussed in the section before, and develop a mechanism that allows administrators to select and manage multiple clusters simultaneously in order to address the increasing complexity of network infrastructures. This multi-cluster management capability will be a good ally for managing multiple clusters, which may be a big ally for bigger organizations, improving scalability and reducing administrative burden. In addition to what was previously mentioned, a new menu option will be introduced precisely to provide a tree model view of the component structure. This feature is meant to understand the current position of given artifacts needed for certain operations within the network (certificates, config blocks, etc.). Finally, the development of a geopositioning map that aims to display the physical location of network components. This feature will allow administrators to view the geographic distribution of components, which can be something valuable for physical interaction with components of the cluster (like a node, for example). Although not as relevant as the other ideas discussed before, it remains a very good feature for this project.

Developing Prototypes for Enhanced Security Protocols

Because security is so important, especially in the context of service authentication within the network, there is

a need to strengthen the procedures to this effect. With this in mind, there is future work that must involve the development of prototypes for security protocols. The idea is to implement optional extra steps for authentication that secure even more our platform. This is what will enable those services that collect block explorer data, manage peer connections, and manipulate Prometheus data servers. These new protocols will focus on strengthening the security of those services, ensuring that they are protected against unauthorized access and potential threats. There are ideas that got discussed already about this matter, like, for example, creating a structure that does not allow access if one of the steps gets compromised. Also something that will evolve more and more with the time.

Gathering Regulatory Information on Private Ledgers

As private ledgers are being developed, remaining informed about the regulatory landscape will be very crucial. It therefore follows that there is future work related to collecting and analyzing information about regulations related to private ledgers. Such regulations make it easier to shape the network architecture for it to meet the legal impositions that exist around different countries or even use common standards to have broad acceptance of the platform. This work is also incremental, especially in view of the emergent nature of the matter discussed, where more and more standards come into play.

5 Conclusions

In the realm of abstracting what has been concluded so far, it must be known that this thesis has been exploring the application of blockchain technology, addressing challenges such as data security, data integrity, and interoperability within the healthcare sector which contributed significantly to the answer of the first research question "**How can a private blockchain network be utilized to improve data integrity, security, flexibility, and collaboration within the healthcare ecosystem?**".

This is very important due to the fact that healthcare data systems face an increase in pressure due to privacy concerns, regulatory demands, and the need for secure, real-time data sharing, where blockchain emerges as a powerful ally. This is done by introducing two main use cases: integrating **Hyperledger Fabric** with **IPFS** for secure file storage and optimizing blockchain infrastructure with modern tools, providing to the research a comprehensive view of how blockchain capabilities can actually support the combat of such challenges.

The first use case combined **Hyperledger Fabric** along side **IPFS**, offering significant improvements in data immutability and security, where it ensures that sensitive healthcare data can be stored securely by leveraging the distributed methodology of both technologies, while making sure that easy retrieval and verification using each data hash representation. In contrast to traditional centralized databases, this innovative blockchain approach can reduce vulnerabilities to cyberattacks, enhance auditability, and even forbid malicious usage of patient data. Basically, with both technologies combined, this approach could support the critical need for data integrity in healthcare, ensuring that any kind of record remains unaltered and accurate across time within the healthcare sphere. This use case was only theoretically covered, while the next has actual findings.

The second use case, however, is an infrastructure that the first use case needs and is the focus of this work. Within this category, various configurations of blockchain network architectures were tested, giving insights about performance, scalability and operability which answered to the second research question "**What kind of infrastructure design is necessary to support a blockchain solution in such a vast and complex environment as healthcare?**". By the effect of such, views about the customization and deployment of blockchain networks were put into practice, where organizational needs like resource allocation, data control, and security requirements

were major concerns. Deploying blockchain with centralized tools such as **Kubernetes** demonstrated how automation over network management, enabling of fault tolerance, and enabling of scalability is possible, something that remains essential for handling high transaction volumes in large networks such as healthcare institutions. The results from the benchmarking suggested that blockchain, when implemented correctly, can achieve the necessary requirements for normal operation within an organization.

Furthermore, this research contributes to ongoing discussions around the transformative potential of blockchain in healthcare, especially achieved by presenting it as a secure, flexible, highly customizable, and interoperable system, highlighting the capability of such to support secure data exchanges across diverse healthcare entities, including hospitals, insurance companies, and regulatory bodies. With this in mind, insights about how promising this could be to achieve collaboration among stakeholders are shown, while ensuring that there is compliance with privacy standards like **GDPR** and **HIPAA**.

As these technologies get more mature, the insights of such studies could provide healthcare institutions with a foundation for further consideration in their implementations, securing data sharing, patient identity verification, and even pharmaceutical supply chain management. This work definitely underlines blockchain potential to offer healthcare stakeholders a reliable platform for managing sensitive data, thereby promoting trust, transparency, and integrity across the sector.

In summary, this work can demonstrate how blockchain technology, with its cryptographic security and decentralized design, achieves the addressing of cumbersome challenges in modern healthcare data management. Leveraging the analysis of both scenarios, this study affirms the value of blockchain in building a resilient infrastructure, setting the stage for further iteration over a lot of more use cases, and aiming to create an environment where blockchain can thrive.

6 References

References

- Androulaki, E., Barger, A., Bortnikov, V., Cachin, C., Christidis, K., De Caro, A., Enyeart, D., Ferris, C., Laventman, G., Manevich, Y., et al. (2018). Hyperledger fabric: A distributed operating system for permissioned blockchains. Proceedings of the thirteenth EuroSys conference, 1–15.
- Pandey, A. K., Khan, A. I., Abushark, Y. B., Alam, M. M., Agrawal, A., Kumar, R., & Khan, R. A. (2020). Key issues in healthcare data integrity: Analysis and recommendations. IEEE Access, 8, 40612–40628.
- Kubernetes, T. (2019). Kubernetes. Kubernetes. Retrieved May, 24, 2019.
- Kalayci, İ. (2023). Anatomy of cryptocurrencies. Uluslararası Sosyal Bilimler Akademi Dergisi, (13), 412–427. <https://doi.org/10.47994/usbad.1385275>
- Amarta, C. C., & Latifah, F. (2023). The influence of understanding financial literacy and community readiness on the use of central bank digital currency (cbdc). Jurnal Ekonomi Syariah Indonesia (JESI), 13(1), 45–53. [https://doi.org/10.21927/jesi.2023.13\(1\).45-53](https://doi.org/10.21927/jesi.2023.13(1).45-53)
- Millie Pant, a. A. K. N., Sunil Kumar Jauhar. (2022). Analyzing the prospects of blockchain in healthcare industry. Hindawi.
- Alhadhrami, Z., Alghfeli, S., Alghfeli, M., Abedlla, J. A., & Shuaib, K. (2017). Introducing blockchains for healthcare. 2017 International Conference on Electrical and Computing Technologies and Applications (ICECTA), 2018-Janua, 1–4. <https://doi.org/10.1109/ICECTA.2017.8252043>
- Lin, I. C., & Liao, T. C. (2017). A survey of blockchain security issues and challenges. International Journal of Network Security, 19(5), 653–659. [https://doi.org/10.6633/IJNS.201709.19\(5\).01](https://doi.org/10.6633/IJNS.201709.19(5).01)

- Dinh, T. T. A., Liu, R., Zhang, M., Chen, G., Ooi, B. C., & Wang, J. (2018). Untangling blockchain: A data processing view of blockchain systems. *IEEE Transactions on Knowledge and Data Engineering*, 30(7), 1366–1385. <https://doi.org/10.1109/TKDE.2017.2781227>
- Hölbl, M., Kompara, M., Kamišalić, A., & Zlatolas, L. N. (2018). A systematic review of the use of blockchain in healthcare. *Symmetry*, 10(10), 470. <https://doi.org/10.3390/sym10100470>
- Prokofieva, M., & Miah, S. J. (2019). Blockchain in healthcare. *Australasian Journal of Information Systems*, 23, 1–22. <https://doi.org/10.3127/ajis.v23i0.2203>
- Kuo, T. T., Kim, H. E., & Ohno-Machado, L. (2017). Blockchain distributed ledger technologies for biomedical and health care applications. *Journal of the American Medical Informatics Association*, 24(6), 1211–1220. <https://doi.org/10.1093/jamia/ocx068>
- McGhin, T., Choo, K. K. R., Liu, C. Z., & He, D. (2019). Blockchain in healthcare applications: Research challenges and opportunities. *Journal of Network and Computer Applications*, 135(February), 62–75. <https://doi.org/10.1016/j.jnca.2019.02.027>
- Kumar, T., Ramani, V., Ahmad, I., Braeken, A., Harjula, E., & Ylianttila, M. (2018). Blockchain utilization in healthcare: Key requirements and challenges. *2018 IEEE 20th International Conference on e-Health Networking, Applications and Services (HealthCom)*, 1–7. <https://doi.org/10.1109/HealthCom.2018.8531136>
- Knirsch, F., Unterweger, A., & Engel, D. (2019). Implementing a blockchain from scratch: Why, how, and what we learned. *EURASIP Journal on Information Security*, 2019(1), 2. <https://doi.org/10.1186/s13635-019-0085-3>
- Azaria, A., Ekblaw, A., Vieira, T., & Lippman, A. (2016). Medrec: Using blockchain for medical data access and permission management. *2016 2nd International Conference on Open and Big Data (OBD)*, 25–30.
- Crosby, M., Pattanayak, P., Verma, S., & Kalyanaraman, V. (2016). Blockchain technology: Beyond bitcoin. *Applied Innovation Review*, 2, 6–10.
- Nasrulin, B., Muzammal, M., & Qu, Q. (2018). Chainmob: Mobility analytics on blockchain. *2018 19th IEEE International Conference on Mobile Data Management (MDM)*, 292–293.
- Xu, P., Lee, J., Barth, J. R., & Richey, R. G. (2021). Blockchain as supply chain technology: Considering transparency and security. *International Journal of Physical Distribution & Logistics Management*, 51(3), 305–324.
- Wood, G. (2014). Ethereum: A secure decentralized generalised transaction ledger [Ethereum Project Yellow Paper]. <https://ethereum.github.io/yellowpaper/paper.pdf>
- Cachin, C. (2016). Architecture of the hyperledger blockchain fabric. *Proceedings of the 2016 ACM Workshop on Blockchain-enabled Networked Systems*, 1–6. <https://doi.org/10.1145/2993653.2993657>
- Anjum, A., Sporny, M., & Sill, A. (2017). Blockchain standards for compliance and trust. *IEEE Cloud Computing*, 4(4), 84–90.
- Thompson, B. S., & Rust, S. (2023). Blocking blockchain: Examining the social, cultural, and institutional factors causing innovation resistance to digital technology in seafood supply chains. *Technology in Society*, 73, 102235.
- Bell, L., Buchanan, W. J., Cameron, J., & Lo, O. (2018). Applications of blockchain within healthcare. *Blockchain in Healthcare Today*, 1, 1–7. <https://doi.org/10.30953/bhbt.v1.8>
- Velmovitsky, P. E., Bublitz, F. M., Fadrique, L. X., & Morita, P. P. (2021). Blockchain applications in health care and public health: Increased transparency. *JMIR Medical Informatics*, 9(6). <https://doi.org/10.2196/20713>
- About us - healthverity [Accessed: Jan. 25, 2024]. (n.d.). <https://healthverity.com/about-us/>
- About - healthwizz [Accessed: Jan. 25, 2024]. (n.d.).
- Bamakan, S. M. H., Moghaddam, S. G., & Manshadi, S. D. (2021). Blockchain-enabled pharmaceutical cold chain: Applications, key challenges, and future trends. *Journal of Cleaner Production*, 302, 127021. <https://doi.org/10.1016/j.jclepro.2021.127021>
- Rojnic, S. (2022). Blockchain application in healthcare: The example of farmatrust, medicalchain and e-hcert. *Amsterdam LF*, 14, 69.
- Wadhwa, S., Gupta, D., et al. (n.d.). Blockchain revolution: Using distributed ledger technology to transform healthcare in wsn-iot environment. In *Emerging technologies and the application of wsn and iot* (pp. 112–128). CRC Press.

- De Martino, F. D., Klein, S. D., O'Neil, J., Huang, Y., Nisson, L., & Race, M. (2019). Transforming the us healthcare industry with blockchain technology.
- Shivom - crunchbase company profile & funding [Accessed: Jan. 25, 2024]. (n.d.). <https://www.crunchbase.com/organization/project-shivom>
- Ghadge, A., Bourlakis, M., Kamble, S., & Seuring, S. (2023). Blockchain implementation in pharmaceutical supply chains: A review and conceptual framework. *International Journal of Production Research*, 61(19), 6633–6651. <https://doi.org/10.1080/00207543.2022.2125595>
- Chronicled [Accessed: Jan. 25, 2024]. (n.d.). <https://www.chronicled.com/>
- Ozercan, H. I., Ileri, A. M., Ayday, E., & Alkan, C. (2018). Realizing the potential of blockchain technologies in genomics. *Genome Research*, 28(9), 1255–1263. <https://doi.org/10.1101/gr.207464.116>
- Vom Brocke, J., Hevner, A., & Maedche, A. (2020). Introduction to design science research. *Design science research. Cases*, 1–13.
- Gurl, E. (2017). Swot analysis: A theoretical review.
- Abdallah, M. M. (2022). Hands-on permissioned blockchain platforms. *Proceedings of the Federated Africa and Middle East Conference on Software Engineering*, 86. <https://doi.org/10.1145/3531056.3542760>
- Cash, M., & Bassiouni, M. (2018). Two-tier permission-ed and permission-less blockchain for secure data sharing. *2018 IEEE International Conference on Smart Cloud (SmartCloud)*, 138–144. <https://doi.org/10.1109/SmartCloud.2018.00031>
- Bakos, Y., & Halaburda, H. (2021). Tradeoffs in permissioned vs permissionless blockchains: Trust and performance. *SSRN Electronic Journal*. <https://doi.org/10.2139/SSRN.3789425>
- Cooper, D., Santesson, S., Farrell, S., Boeyen, S., Housley, R., & Polk, T. (2008, May). Internet X.509 Public Key Infrastructure Certificate and Certificate Revocation List (CRL) Profile. <https://doi.org/10.17487/RFC5280>
- Chandramouli, R. (2019, March). Security strategies for microservices-based application systems (tech. rep.). National Institute of Standards and Technology (NIST). <https://doi.org/10.6028/NIST.SP.800-204>
- Lennon, J. (2009). Beginning couchdb. Apress. <https://doi.org/10.1007/978-1-4302-7236-6>
- Author(s). (2020). Supporting private data on hyperledger fabric with secure multiparty computation. *Proceedings of the IEEE International Conference on Blockchain and Distributed Systems Security*. <https://doi.org/10.1109/XXXXXXX>
- Bettio, M., Bruse, F., Franke, A., Jakoby, T., & Schärf, D. (2019). Hyperledger fabric as a blockchain framework in the financial industry. In V. Liermann & C. Stegmann (Eds.), *The impact of digital transformation and fintech on the finance professional* (pp. 29–44). Springer International Publishing. https://doi.org/10.1007/978-3-030-23719-6_3
- Kumar S., N., & Dakshayini, M. (2020). Secure sharing of health data using hyperledger fabric based on blockchain technology. *2020 International Conference on Mainstreaming Block Chain Implementation (ICOMBI)*, 1–5. <https://doi.org/10.23919/ICOMBI48604.2020.9203442>
- Cai, L., Li, Q., & Liang, X. (2022). Hyperledger fabric application case studies in detail. In *Advanced blockchain technology*. Springer, Singapore. https://doi.org/10.1007/978-981-19-3596-1_9
- Tan, E., Mahula, S., & Crompvoets, J. (2022). Blockchain governance in the public sector: A conceptual framework for public management. *Government Information Quarterly*, 39(1), 101625. <https://doi.org/https://doi.org/10.1016/j.giq.2021.101625>
- Jena, S. K., Kumar, B., Mohanty, B., Singhal, A., & Barik, R. C. (2024). An advanced blockchain-based hyperledger fabric solution for tracing fraudulent claims in the healthcare industry. *Decision Analytics Journal*, 10, 100411. <https://doi.org/https://doi.org/10.1016/j.dajour.2024.100411>
- Benet, J. (2014a). Ipfs - content addressed, versioned, p2p file system [<https://arxiv.org/abs/1407.3561>]. arXiv preprint arXiv:1407.3561.
- Benet, J. (2014b). Ipfs-content addressed, versioned, p2p file system. arXiv preprint arXiv:1407.3561.
- Docker, I. (2020). Docker. linea]. [Junio de 2017]. Disponible en: <https://www.docker.com/what-docker>.
- Li, J., et al. (2019). Orchestration mechanism impact on virtual network function throughput [Master's thesis].
- Chang, Y.-S., Lee, Y.-K., Juang, T., & Yen, J.-S. (2013). Cost evaluation on building and operating cloud platform. *Journal of Grid and High Performance Computing (JGHPC)*, 5(2), 18–33. <https://doi.org/10.4018/jghpc.2013040103>

- Calcote, L., & Butcher, Z. (2019). *Istio: Up and running: Using a service mesh to connect, secure, control, and observe*. O'Reilly Media.
- Kanai, K., Tsuda, T., Nakazato, H., & Katto, J. (2022). Information-centric service mesh for autonomous in-network computing. Proceedings of the 9th ACM Conference on Information-Centric Networking, 159–161. <https://doi.org/10.1145/3517212.3559481>
- Li, M., Lu, W., Lin, H., Wu, J., Zhang, Y., & Yan, G. (2023). Flatproxy: A dpu-centric service mesh architecture for hyperscale cloud-native application. arXiv preprint. <https://doi.org/10.48550/arXiv.2312.01297>
- Sharma, R., & Singh, A. (2019). *Getting started with istio service mesh: Manage microservices in kubernetes*. Apress. <https://doi.org/10.1007/978-1-4842-5458-5>
- Zhu, X., She, G., Xue, B., Zhang, Y., Zhang, Y., Zou, X. K., Duan, X., He, P., Krishnamurthy, A., Lentz, M., Zhuo, D., & Mahajan, R. (2023). Dissecting overheads of service mesh sidecars. Proceedings of the 2023 ACM Symposium on Cloud Computing, 142–157. <https://doi.org/10.1145/3620678.3624652>
- Hussain, F., Li, W., Noye, B., Sharieh, S., & Ferworn, A. (2019). Intelligent service mesh framework for api security and management. 2019 IEEE 10th Annual Information Technology, Electronics and Mobile Communication Conference (IEMCON), 0735–0742. <https://doi.org/10.1109/IEMCON.2019.8936216>
- Choi, W., & Hong, J. W.-K. (2021). Performance evaluation of ethereum private and testnet networks using hyperledger caliper. 2021 22nd Asia-Pacific Network Operations and Management Symposium (APNOMS), 325–329.
- Hyperledger Foundation. (2023a). Hyperledger caliper benchmarking tool [Available at: <https://github.com/hyperledger/caliper>]. Hyperledger Foundation.
- Hyperledger Foundation. (2023b). Hyperledger besu documentation [Available at: <https://besu.hyperledger.org/>]. Hyperledger Foundation.
- FISCO BCOS Project Team. (2023). Fisco bcos documentation [Available at: <https://fisco-bcos-documentation.readthedocs.io/>].
- Turnbull, J. (2018). *Monitoring with prometheus*. Turnbull Press.
- Tolaram, N. (2022). Cadvisor. In *Software development with go: Cloud-native programming using golang with linux and docker* (pp. 347–376). Springer.
- Chakraborty, M., & Kundan, A. P. (2021). Grafana. In *Monitoring cloud-native applications: Lead agile operations confidently using open source software* (pp. 187–240). Springer.
- Gackenheimer, C. (2015). *Introduction to react*. Apress.
- Thorgersen, S., & Silva, P. I. (2021). Keycloak-identity and access management for modern applications: Harness the power of keycloak, openid connect, and oauth 2.0 protocols to secure applications. Packt Publishing Ltd.
- Koleoso, T. (2020). *Beginning quarkus framework: Build cloud-native enterprise java applications and microservices*. Apress. <https://doi.org/10.1007/978-1-4842-6032-6>
- Lamouchi, N. (2021). *Pro java microservices with quarkus and kubernetes: A hands-on guide*. Apress. <https://doi.org/10.1007/978-1-4842-7170-4>
- Hartig, O., & Pérez, J. (2018). Semantics and complexity of graphql. Proceedings of the World Wide Web Conference (WWW), 1155–1164. <https://doi.org/10.1145/3178876.3186014>
- Katamreddy, S. P. R., & Upadhyayula, S. S. (2023). Graphql with spring boot. In *Beginning spring boot 3* (pp. 325–339). Apress. https://doi.org/10.1007/978-1-4842-8792-7_15
- Kim, Y. W., Consens, M. P., & Hartig, O. (2019). An empirical analysis of graphql api schemas in open code repositories and package registries. Proceedings of the 13th Alberto Mendelzon International Workshop on Foundations of Data Management (AMW). <https://doi.org/10.5281/zenodo.3352419>
- Giretti, A. (2023). *Coding clean, reliable, and safe rest apis with asp.net core 8: Develop robust minimal apis with .net 8*. Apress. <https://doi.org/10.1007/978-1-4842-9979-1>
- Giretti, A. (2022a). Understanding the grpc specification. In *Beginning grpc with asp.net core 6: Build applications using asp.net core razor pages, angular, and best practices in .net 6* (pp. 85–102). Apress. https://doi.org/10.1007/978-1-4842-8008-9_3
- Giretti, A. (2022b). *Beginning grpc with asp.net core 6: Build applications using asp.net core razor pages, angular, and best practices in .net 6*. Apress. <https://doi.org/10.1007/978-1-4842-8008-9>

- Rowstron, A., & Druschel, P. (2001). Pastry: Scalable, decentralized object location and routing for large-scale peer-to-peer systems. *Middleware*, 2218, 329–350.
- Maymounkov, P., & Mazières, D. (2002). Kademlia: A peer-to-peer information system based on the xor metric. *Proceedings of the 1st International Workshop on Peer-to-Peer Systems*, 53–65.
- Cohen, B. (2003). BitTorrent: A peer-to-peer file sharing protocol. *Proceedings of the 2003 International Workshop on Peer-to-Peer Systems*, 1–5.
- Merkle, R. (1979). Protocols for public key cryptosystems. *IEEE Symposium on Security and Privacy*, 122–134.
- Torvalds, L., & Hamano, J. (2005). Git: A version control system [Accessed: 2024-10-29]. <https://git-scm.com>
- Baker, M., & et al. (1997). Self-certifying file systems. *Proceedings of the 1997 USENIX Annual Technical Conference*, 69–84.
- WebRTC Working Group. (2011). Webrtc: Real-time communication between browsers [Accessed: 2024-10-29]. <https://webrtc.org>
- Rudberg, R., et al. (2011). Utp: A transport protocol for p2p applications. *Proceedings of the 2011 ACM SIGCOMM Workshop on Networked Systems for Developing Regions*.
- Floyd, S., & et al. (2000). The stream control transmission protocol. *IEEE/ACM Transactions on Networking*, 8(5), 745–757.
- Rosenberg, J., & et al. (2020, July). Interactive connectivity establishment (ice) [RFC 5245]. <https://tools.ietf.org/html/rfc5245>
- Benet, J. (2015a). Bitswap: The block exchange protocol [Accessed: 2024-10-29]. InterPlanetary Networking Concept Document. <https://github.com/ipfs/specs/tree/master/bitswap>
- Benet, J. (2015b). Ipns: The interplanetary naming system [Accessed: 2024-10-29]. InterPlanetary Networking Concept Document. <https://github.com/ipfs/specs/tree/master/ipns>
- Cai, A. (2012). The research of software requirements analysis of core needs. *Proceedings of SPIE*, 8499, 8499X. <https://doi.org/10.1117/12.968556>
- Chung, L., & do Prado Leite, J. C. S. (2009). On non-functional requirements in software engineering. In *Conceptual modeling: Foundations and applications* (pp. 363–379). https://doi.org/10.1007/978-3-642-02463-4_19

7 Appendix I - Abstract of Submitted Articles

8.1- IPFS and Hyperledger Fabric: Integrity of Data in Healthcare

Abstract: Since the Information of Things (IoT) arrival, one of the main problems we encounter daily is data breaches and data integrity. Now more than ever, the expertise needed to develop an attack is decreasing. Developers are creating software that does the same thing as an expert, requiring less knowledge from the attacker. Also, ill-intended professionals within the institutions can compromise and access information without authorization. Healthcare Information Technologies must be aware of and have a proactive approach to this problem within each sector. With this in mind, researchers and developers must propose and study solutions and architectures to store and query sensitive files and information more securely. When we think about security, there are more dimensions to consider other than the technology itself, but it does remove some constraints. This article presents an architecture that relies on Blockchain through HyperLedger Fabric and Interplanetary File System (IPFS) to securely host sensitive documents such as contracts within Healthcare.

Keywords: Blockchain;Healthcare Industry;Data Integrity;Ipfs;Hyper Ledger Fabric;Kubernetes;Security;Permissioned Blockchain;Web3;Linux Foundation;

8.2- Scalable and Sustainable Blockchain: Architecting Infrastructure and Developing a Platform for Efficient Management and Exploration

Abstract: The application of blockchain technology in the health and healthcare sector is considered disruptive, thus requiring trust, integrity, and value of data. In addition, this document analyses the potential of permissioned blockchain, more specifically Hyperledger Fabric, to improve the security, integrity, and efficiency of healthcare systems. It examines ways in which this can be done in a manner that has both scalability and sustainability prospects in the long-term. This, by reaching the optimal compromise between efficiency of resources and its ease of use, management and upscaling. The ability to be as lightweight as possible, while being able to quickly expand the infrastructure and seamlessly integrate new functionalities, maintaining operational efficiency. The research developed involves a review of the literature, the development of three different blockchain implementations/architectures where the practical assessment of performance metrics is performed. Finally, a blockchain management platform is presented. This was developed to ensure long-term usability and maintenance of blockchain solutions in the healthcare industry. This work aims to advance the application of blockchain in healthcare, addressing both immediate and long-term needs for security and efficiency.

Keywords: Blockchain; Blockchain in Healthcare; Healthcare Systems; Hyperledger Fabric, Kubernetes;