

# Welcome to **axial**Healthcare

Statistics and Data Science Workflows in R



December 10, 2018



# Outline of Talks

December 10, 2018

## **Database connections and querying with dplyr and data.table**

- Amy Graves, Statistician

## **Creating attractive and informative map visualizations in R**

- Mathilde Granke, Data Scientist

## **SME and RStudio Enterprise**

- Meredith (Blevins) Peratikos, Statistician

# Database connections and querying with dplyr and data.table

Amy Graves, Senior Healthcare Statistician





## My Role at **axial**Healthcare

- Estimate per member per month savings attributed to axial products and services
- Typical tasks: data connection and data management, analysis, results presentation/visualization, documentation
- Constantly looking for ways to minimize data management
- This talk: connect to data stored in relational databases and manage/query data using dplyr and data.table



# SQL Databases

- Relational databases (collection of data tables) - almost all SQL
- Cheap way to store a lot of data
- Examples: Postgres, Google BigQuery, Amazon Redshift...



# R Packages

```
library(rmarkdown) # for rmarkdown ppt slides
library(configr) # config file
library(raxial) # internal axial package of commonly-used functions
library(dplyr) # data manipulation
library(DBI) # database interface
library(RPostgreSQL) # Postgres connection
library(data.table) # faster data manipulation
#library(hflights) # domestic flights that departed houston in 2011
library(tictoc) # timing runs
```



## Example Data

- Example code uses hflights data
- All commercial flights originating in Houston in 2011
- ~227,000 rows
- Stored on Postgres in zz\_ag schema



## Config File

- Purpose: store important things in one place & reference when needed
- Important things = database login info including user names and passwords, tokens, etc.
- Why? Secure way to store sensitive information so it is not stored in scripts and shared on places like github. Also, all team members have the same config file located in the same place so it's easy to collaborate (pull others' code from github, run, review)

```
config <- configr::read.config("~/config/config.ini")  
#file.edit("~/config/config.ini")
```





## Database Connection Using `dplyr::src_postgres()`

- You can only read data into R, not put it back on the database or alter it in any way

```
database <- "reporting_amerigroup"  
con_dplyr <- dplyr::src_postgres(dbname = database,  
  host = config$postgres$host,  
  port = config$postgres$port,  
  user = config$postgres$username,  
  password = config$postgres$password)
```



## Database Connection Using DBI::dbConnect()

---

- You can read data into R, write back into SQL, alter in SQL, etc.
- Preferred for flexibility

```
con_dbi <- DBI::dbConnect(RPostgreSQL::PostgreSQL(),  
  dbname = database,  
  host = config$postgres$host,  
  port = config$postgres$port,  
  user = config$postgres$username,  
  password = config$postgres$password)
```



## Database Connection Using raxial::postgres\_con()

- raxial is our internal axial r package containing common functions, including database connections
- A way for all team members to source and use common functions
- Fewer lines of code :)

```
con_dbi <- raxial::postgres_con(database)
```



# Navigating Around Postgres

---

```
# view all schemas within a database

DBI::dbGetQuery(con_dbi, "SELECT nspname FROM pg_catalog.pg_namespace") %>%
dplyr::arrange(nspname)

# view all tables within a schema

schema = "zz_ag"

DBI::dbGetQuery(con_dbi,
  paste0("SELECT table_name FROM information_schema.tables
        WHERE table_schema='", schema, "'")) %>%

dplyr::arrange(table_name)
```



## Connect to hflights Data in Database and read into R memory

---

- Use dplyr and use database connection to connect to hflights data in Postgres
- Collect() all data in memory in R
- Pulling in all quarter million records and columns into R. Not efficient for memory!

```
tic()  
hflights_r <- dplyr::tbl(con_dbi, sql("SELECT * FROM zz_ag.hflights")) %>%  
  collect()  
toc() # 2.35 sec
```



# Manipulate (query) hflights Data in R Memory using dplyr

---

- Average departure and arrival delays for all flights in June
- dplyr: each verb is a command; chain together commands with pipes
- Common verbs: select (select columns), filter (subset), mutate (create/recode new variables), group\_by (group by before calculating something on the data), summarise (calculation on the data), arrange (order by values in a column)



# Query hflights Data in R Memory Using dplyr

---

Continued...

```
tic()  
hflights_query1 <-  
  hflights_r %>%  
filter(Month == 6) %>%  
group_by(Origin) %>%  
summarise(mean_dep_delay = mean(DepDelay, na.rm = TRUE),  
           mean_arr_delay = mean(ArrDelay, na.rm = TRUE))  
toc()  
# 0.06 sec of query + 2.35 sec to pull in memory = 2.41 sec.
```



# Query hflights Data in R Memory Using dplyr

---

Continued...

```
print(hflights_query1)
## # A tibble: 2 x 3
##   Origin mean_dep_delay mean_arr_delay
##   <chr>         <dbl>         <dbl>
## 1 HOU           14.6           9.92
## 2 IAH           11.5          11.1
```





## Query hflights Data in Database Using dplyr

---

- Same query as before: average departure and arrival delays for all flights in the month of June
- Data (227k rows) is still in database until `collect()` statement pulls it into R memory
- All data querying done in the database before pulling into R (!!!)



# Query hflights Data in Database Using dplyr

---

Continued...

```
tic()
hflights_query2 <- tbl(con_db1, sql("SELECT * FROM zz_ag.hflights")) %>%
  filter(Month == 6) %>%
  group_by(Origin) %>%
  summarise(mean_dep_delay = mean(DepDelay, na.rm = TRUE),
            mean_arr_delay = mean(ArrDelay, na.rm = TRUE)) %>%
  collect()
toc() # 0.11 sec
```



# Query hflights Data in Database Using dplyr

---

Continued...

```
print(hflights_query2)
## # A tibble: 2 x 3
##   Origin mean_dep_delay mean_arr_delay
## *   <chr>           <dbl>           <dbl>
## 1 HOU              14.6             9.92
## 2 IAH              11.5            11.1
```



## Show SQL Code that dplyr is Using

```
show_query(hflights_query2)
```

```
<SQL>
```

```
SELECT "Origin", AVG("DepDelay") AS "mean_dep_delay", AVG("ArrDelay") AS  
"mean_arr_delay"  
FROM (SELECT * FROM zz_ag.hflights) "ottdqfhojz"  
WHERE ("Month" = 6.0)  
GROUP BY "Origin"
```



## Join Data Using dplyr

- Many joins available in dplyr
- If you have data in different schemas, you can still join them
- If you have data in different databases, you can still join them! Though not efficient because it copies data on to the same database before joining



# Join Data Using dplyr

Continued...

```
tic()
con_gbq <- raxial::gbq_con(project="axial-research",
                           dataset="research_agraves")
origin_ref <- dplyr::tbl(con_gbq, sql("SELECT * FROM research_agraves.origin_ref"))
hflights_query3 <-
  tbl(con_dbi, sql("SELECT * FROM zz_ag.hflights")) %>%
  filter(Month == 6) %>%
  group_by(Origin) %>%
  summarise(mean_dep_delay = mean(DepDelay, na.rm = TRUE),
            mean_arr_delay = mean(ArrDelay, na.rm = TRUE)) %>%
  inner_join(origin_ref, by="Origin", copy = TRUE)
toc() # 3.1 sec
```



# Join Data Using dplyr

Continued...

```
print(hflights_query3)
## # Source:   lazy query [?? x 3]
## # Database: postgres 9.6.7 [agraves@10.4.3.238:6432/reporting_amerigroup]
##   Origin mean_dep_delay mean_arr_delay
##   <chr>          <dbl>          <dbl>
## 1 IAH            11.5            11.1
```



# Query Data Using data.table

---

**Efficient & Fast on big data!**

- Data must be in memory in R
- Convert data.frame into data.table
- Syntax is DT[i, j, by]
- Take data table DT, subset rows using 'i', then calculate 'j', grouped by 'by'
- Note: fread() very quickly imports .csv files into a data.table





# Query Data Using data.table

---

Continued...

```
tic()
hflights_dt <- data.table(hflights_r)
hflights_query4 <- hflights_dt[Month == 6L,
                              .(mean_dep_delay = mean(DepDelay, na.rm=TRUE),
                                mean_arr_delay = mean(ArrDelay, na.rm=TRUE)),
                              Origin]

toc() #0.03 sec
```



# Query Data Using data.table

---

Continued...

```
print(hflights_query4)
##   Origin mean_dep_delay mean_arr_delay
## 1:   HOU      14.55768       9.922661
## 2:   IAH      11.47191      11.108677
```



## More Complex Query in dplyr

- Which carrier has the lowest departure and arrival delays in each origin airport, among carriers that have at least 1000 flights to an origin airport?
- Again, doing all the querying in postgres database before collecting the result into R



# More Complex Query in dplyr

Continued...

```
tic()
hflights_query5 <-
  tbl(con_dbi, sql("SELECT * FROM zz_ag.hflights")) %>%
  group_by(UniqueCarrier, Origin) %>%
  summarise(mean_dep_delay = mean(DepDelay, na.rm = TRUE),
            mean_arr_delay = mean(ArrDelay, na.rm = TRUE),
            n_flights = n()) %>%
  filter(n_flights >= 1000) %>%
  group_by(Origin) %>%
  filter(rank(mean_dep_delay) == 1 | mean_arr_delay == 1) %>%
  rename(min_dep_delay = mean_dep_delay,
         min_arr_delay = mean_arr_delay) %>%
  mutate(unique_carrier_name = if(UniqueCarrier=="FL") {"Air Florida"}
         else if(UniqueCarrier=="US") {"US Airways"},
         origin_name = if(Origin=="HOU") {"Houston Hobby Airport"}
         else if(Origin=="IAH") {"Houston Intercontinental Airport"}) %>%
  ungroup() %>%
  select(-c(UniqueCarrier, Origin)) %>%
  collect()
toc() # 0.29 sec
```



## More Complex Query in dplyr

Continued...

```
print(hflights_query5[c("origin_name", "unique_carrier_name", "min_dep_delay", "min_
arr_delay", "n_flights")])
```

## # A tibble: 2 x 5

	origin_name	unique_carrier_...	min_dep_delay	min_arr_delay	n_flights
	<chr>	<chr>	<dbl>	<dbl>	<dbl>
## 1	Houston Hobby Ai...	Air Florida	4.72	1.85	2139
## 2	Houston Intercon...	US Airways	1.62	-0.631	4082



## Same Query in data.table()

- Which carrier has the lowest departure and arrival delays in each origin airport, among carriers that have at least 1000 flights to an origin airport?
- Can chain together commands in data.table by using multiple sets of brackets together (like dplyr chains commands using pipes)



# Same Query in data.table()

Continued...

```
tic()
hflights_query6 <-
  hflights_dt[,
    .(mean_dep_delay=mean(DepDelay, na.rm = TRUE),
      mean_arr_delay=mean(ArrDelay, na.rm = TRUE),
      n_flights = .N),
    by=.(UniqueCarrier, Origin)][n_flights >= 1000,
    rank := frank(mean_dep_delay),
    by=.(Origin)][rank==1,
    ,
  ][,
    UniqueCarrier := c(FL="Air Florida", US="US Airways")[UniqueCarrier], ][,
    Origin := c(HOU="Houston Hobby Airport", IAH="Houston Intercontinental Airport")[Origin], ]
setnames(hflights_query6, old = c("UniqueCarrier", "Origin"), new = c("unique_carrier_name", "origin_name"))
toc() #0.05 sec
```



## Same Query in data.table()

Continued...

```
print(hflights_query6)
```

##	unique_carrier_name	origin_name	mean_dep_delay	mean_arr_delay	n_flights	rank
## 1:	US Airways	Houston Intercon...	1.622926	-0.6307692	4082	1
## 2:	Air Florida	Houston Hobby Ai...	4.716376	1.8536239	2139	1





# Takeaways

## Workflow takeaways

- config file makes storing sensitive information and sharing code safer and easier
- A package of commonly-used functions (like raxial) makes group knowledge base shareable

## Database connection takeaways

- DBI connection to database allows you to not only read data from a database into r, but also manipulate and write data back on the database. Use this for most flexibility



# Takeaways

## dplyr takeaways

- dplyr has readable, pipeable syntax
- dplyr can connect to database and run everything on database before pulling in to R memory via `collect()`; efficient in memory
- dplyr can connect to many different kinds of databases and run the SQL dialect particular to the database
- dplyr can show sql queries that were run on database using `show_query()`
- dplyr can join tables from different databases (e.g. table on postgres, table on GBQ). use `copy = TRUE` when joining

## data.table takeaways

- Most things you can do in dplyr you can also do in data.table
- data.table is faster/more efficient for extremely large data, ~10 million+ rows
- data.table can be chained together like dplyr pipes using multiple brackets
- data.table quick to read in .csv files via fread()
- To my knowledge, data.table does not have a convenient connection to databases and works only in memory



## Resources

- Database connections and dplyr: <https://db.rstudio.com/dplyr/>
- dplyr: <https://cran.r-project.org/web/packages/dplyr/vignettes/dplyr.html>
- data.table basics:  
[https://s3.amazonaws.com/assets.datacamp.com/blog\\_assets/datatable Cheat Sheet R.pdf](https://s3.amazonaws.com/assets.datacamp.com/blog_assets/datatable_Cheat_Sheet_R.pdf)
- advanced data.table:  
<http://brooksandrew.github.io/simpleblog/articles/advanced-data-table/>

# Creating attractive and informative map visualizations in R

Mathilde Granke, Senior Research Data Scientist

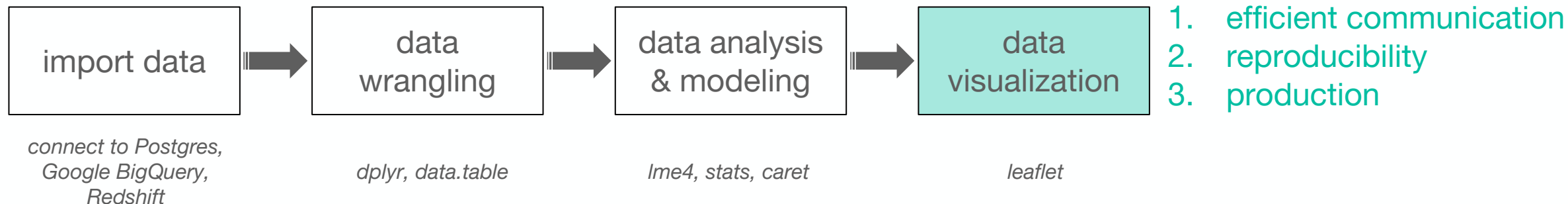


## What do I do at Axial?

- Identify the best providers to refer better care

Assess provider patterns and identify advanced pain management and medication-assisted treatment providers to direct patients to the highest quality of care at the most appropriate cost

## Typical workflow





## Objective of this Talk

- Produce a map of TN displaying providers and county-level information about the population

### Steps

1. Import data (public)
2. Data analysis
3. Map



# Step 1

## Import Data

- Ranking in health factors [\(source: http://www.countyhealthrankings.org/\)](http://www.countyhealthrankings.org/)

```
# http://www.countyhealthrankings.org/
# The overall rankings in health factors represent what influences the health of a county.
# They are an estimate of the future health of counties as compared to other counties within a state.
# The ranks are based on four types of measures: health behaviors, clinical care, social and economic,
# and physical environment factors.
library(readxl)
tn_county_ranking <- read_excel("2018 County Health Rankings Tennessee Data.xls",
                               sheet = "Outcomes & Factors Rankings")

tn_county_ranking <- tn_county_ranking[-c(1:2),c(1,7)]
names(tn_county_ranking) <- c("fips", "health_factors_rank")
tn_county_ranking$fips <- as.integer(tn_county_ranking$fips)
tn_county_ranking$health_factors_rank <- as.numeric(tn_county_ranking$health_factors_rank)
```





# Step 1

## Import Data

- County borders (latitude, longitude)

```
# A database matching FIPS codes to maps package county and state names
library(maps)
data(county.fips)
```

```
# Join county name and health rank on FIPS
tn_data <- left_join(county.fips, tn_county_ranking, by = 'fips') %>%
  filter(str_detect(polynome, "tennessee") == TRUE) %>%
  select(fips,
         health_factors_rank,
         polynome)
```

```
tn_map <- maps::map("county", region = "tennessee", fill = TRUE, plot = FALSE)
tn_map$fips <- tn_data$fips[match(map("county", region = "tennessee", plot=FALSE)$names, tn_data$polynome)]
tn_map$health_factors_rank <- tn_data$health_factors_rank[match(map("county", region = "tennessee", plot=FALSE)$names, tn_data$polynome)]
```



# Step 1

## Import Data

- Medication-assisted-treatment providers

[#https://www.samhsa.gov/medication-assisted-treatment/physician-program-data/treatment-physician-locator](https://www.samhsa.gov/medication-assisted-treatment/physician-program-data/treatment-physician-locator)

```
# MAT providers in TN
#https://www.samhsa.gov/medication-assisted-treatment/physician-program-data/treatment-physician-locator

# import data
provider_data <- read.csv("Physician_Locator_2018-12-04.csv", header=TRUE, stringsAsFactors=FALSE, encoding="UTF-8", sep=",")
# columns names
names(provider_data) <- c('title', 'first_name', 'last_name', 'degree', 'address', 'city', 'county', 'state', 'zip', 'tel', 'fax')
# retrieve full address for geocoding
provider_data <- provider_data %>%
  mutate(full_address = paste(address, city, state, zip))
```

## Step 2

### Data Analysis

- Geolocation

```
# Geocode address
library(googleway)
#define a function that will process googles server responses
getGeoDetails <- function(address){
  #use the geocode function to query google servers
  geo_reply = google_geocode(address, key = api_key)
  answer <- data.frame(formatted_address=NA, lat = NA, long=NA)
  #return Na's if we didn't get a match:
  if (geo_reply$status != "OK"){
    answer$full_address <- provider_data$full_address[ii]
    return(answer)
  }
  answer$formatted_address <- geo_reply$results$formatted_address[1]
  answer$lat <- geo_reply$results$geometry$location[1,]$lat
  answer$long <- geo_reply$results$geometry$location[1,]$lng
  return(answer)
}

geocoded <- data.frame(full_address = character(),
                      formatted_address = character(),
                      lat = numeric(),
                      long = numeric())
for (ii in 1:length(provider_data$full_address)){
  result <- getGeoDetails(provider_data$full_address[ii])
  result$full_address <- provider_data$full_address[ii]

  print(paste("geocode address", ii, "/", length(provider_data$full_address), result$formatted_address))
  geocoded <- rbind(geocoded, result)
}
```

## Step 2

### Data Analysis

- join providers address to coordinates + assign quality of care *(random for the purpose of this exercise)*

```
# Add latitude, longitude, formatted address
provider_data <- left_join(provider_data, geocoded, by = 'full_address') %>%
  filter(!is.na(formatted_address)) %>%
  mutate_all(funs(toupper)) %>%
  mutate(Name = paste(first_name, last_name),
         Phone = paste0('(', substr(tel, 1, 3), ') ', substr(tel, 5, 12))) %>%
  select(Name,
         Address = formatted_address,
         Phone,
         lat,
         long) %>%
  distinct() %>%
  mutate(popup_info = paste(sep = "<br/>", Name, Address, Phone))

# Assign random quality assessment
quality_categories <- c("High quality providers", "Average quality providers", "Low quality providers")
provider_data$assessment <- sample(quality_categories, nrow(provider_data), replace = TRUE)
provider_data <- provider_data %>%
  mutate(clr_marker = case_when(
    assessment == "High quality providers" ~ '#08B491',
    assessment == "Average quality providers" ~ '#FCB33A',
    assessment == "Low quality providers" ~ '#D9484C'
  ))
```

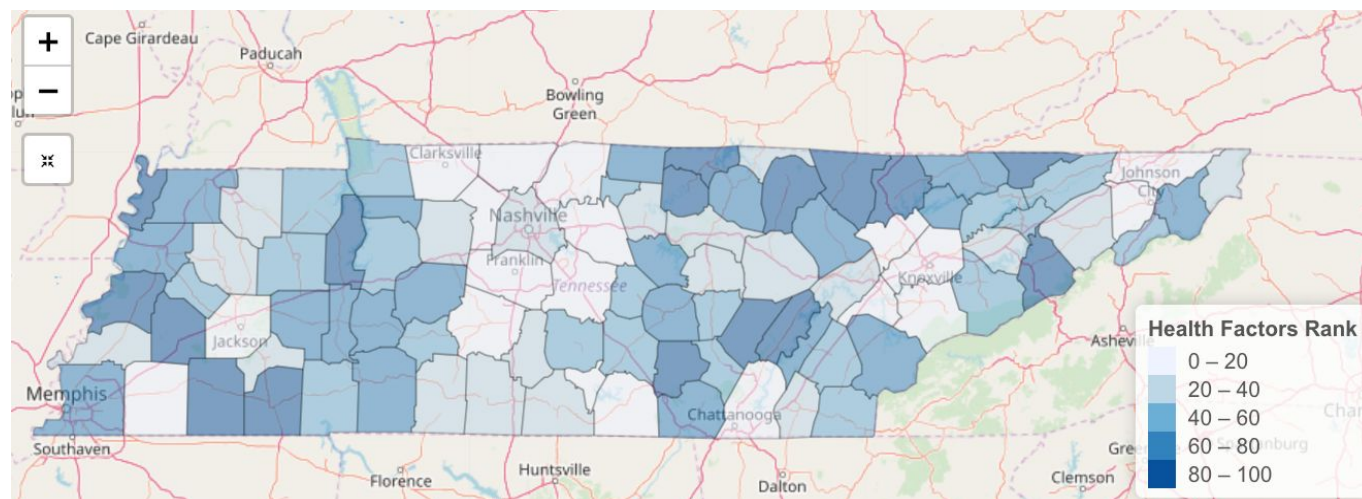


# Step 3

## Map

```
library(leaflet)
# assign color to counties based on rank
mypal <- colorBin('Blues',
                  domain = tn_data$health_factors_rank,
                  bins = 5)

leaflet() %>%
  addTiles() %>% #Add default OpenStreetMap map tiles
  addResetMapButton() %>% #Add zoom reset button
  # Population per county
  addPolygons(data = tn_map,
              lat = ~y, lng = ~x, # coord of county border
              fillColor = ~mypal(health_factors_rank),
              fillOpacity = 0.5,
              smoothFactor = 0.5,
              stroke = TRUE,
              color = "#000",
              weight = 0.5,
              group = 'health_factors') %>%
  # Add legend
  addLegend(position = "bottomright",
            pal = mypal,
            values = ~health_factors_rank,
            title = "Health Factors Rank",
            opacity = 1,
            data = tn_map,
            group = 'health_factors') %>%
```

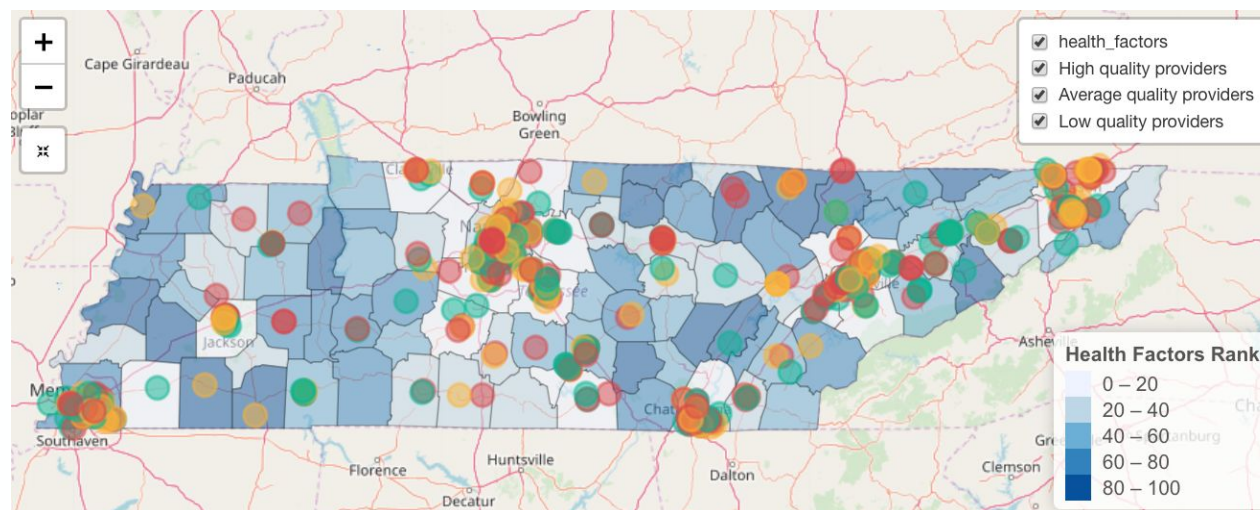


# Step 3

## Map

```
# Add provider
addCircleMarkers(data = provider_data,
  lng = ~as.numeric(long),
  lat = ~as.numeric(lat),
  radius = 8,
  color = ~clr_marker,
  fillOpacity = 0.5,
  stroke = TRUE,
  weight = 2,
  popup = ~popup_info,
  options = popupOptions(maxWidth = 800),
  #clusterOptions = markerClusterOptions(),
  group = ~assessment) %>%

# Layers control
addLayersControl(
  overlayGroups = c("health_factors",
    "High quality providers",
    "Average quality providers",
    "Low quality providers"),
  options = layersControlOptions(collapsed = FALSE),
  position = "topright"
)
```

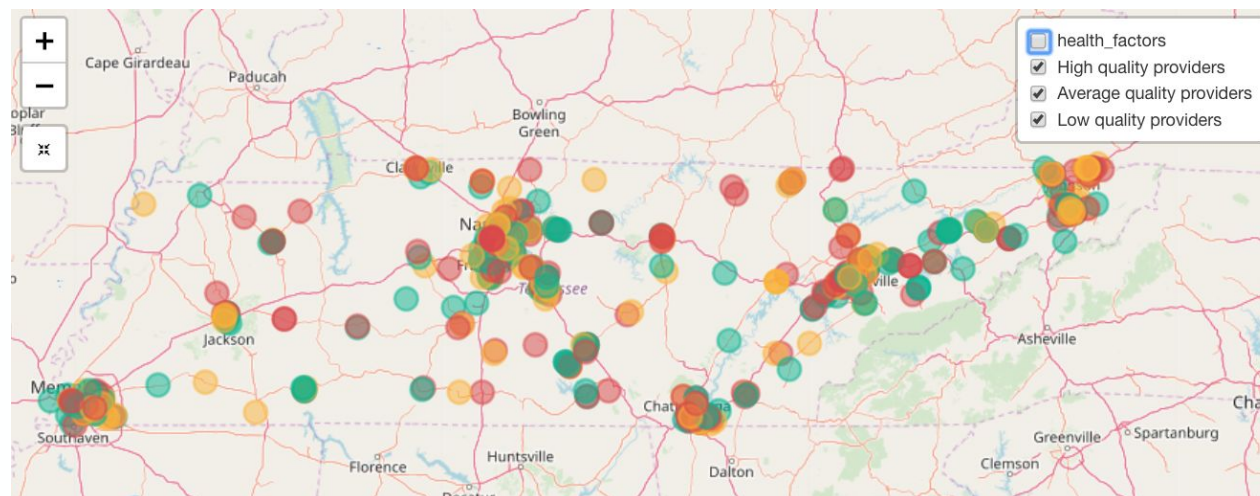


# Step 3

## Map

```
# Add provider
addCircleMarkers(data = provider_data,
  lng = ~as.numeric(long),
  lat = ~as.numeric(lat),
  radius = 8,
  color = ~clr_marker,
  fillOpacity = 0.5,
  stroke = TRUE,
  weight = 2,
  popup = ~popup_info,
  options = popupOptions(maxWidth = 800),
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  group = ~assessment) %>%

# Layers control
addLayersControl(
  overlayGroups = c("health_factors",
    "High quality providers",
    "Average quality providers",
    "Low quality providers"),
  options = layersControlOptions(collapsed = FALSE),
  position = "topright"
)
```





# Step 3

## Map

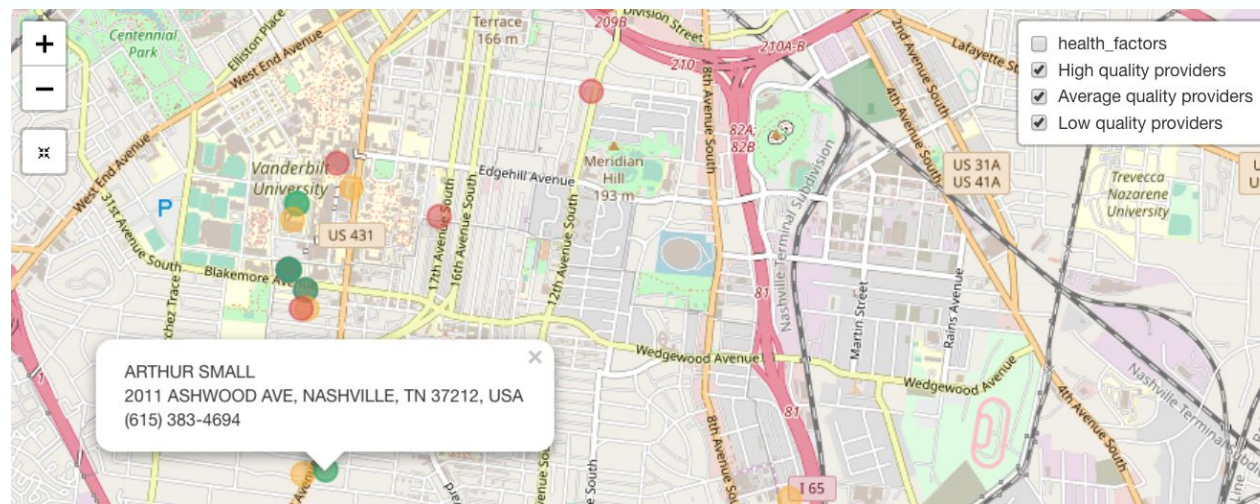
# Add provider

```
addCircleMarkers(data = provider_data,
  lng = ~as.numeric(long),
  lat = ~as.numeric(lat),
  radius = 8,
  color = ~clr_marker,
  fillOpacity = 0.5,
  stroke = TRUE,
  weight = 2,
  popup = ~popup_info,
  options = popupOptions(maxWidth = 800),
  #clusterOptions = markerClusterOptions(),
  group = ~assessment) %>%
```

# Layers control

```
addLayersControl(
  overlayGroups = c("health_factors",
    "High quality providers",
    "Average quality providers",
    "Low quality providers"),
  options = layersControlOptions(collapsed = FALSE),
  position = "topright"
```

)





# SME and RStudio Enterprise

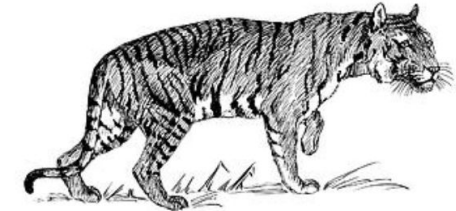
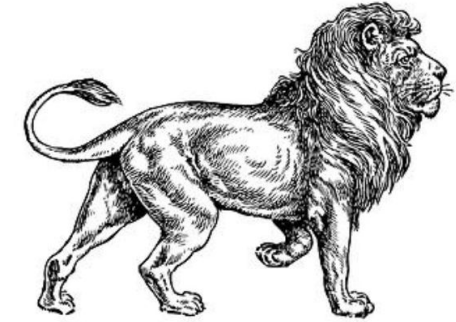
Meridith Peratikos

Director of Statistics and Scientific Collaboration



# SME and Rstudio Enterprise - Oh My!

- Subject matter expertise (SME) is critical to any statistics and data science workflow
- RStudio Enterprise tools are useful for a reproducible and scalable statistics and data science workflow
  - RStudio Server Pro
  - RStudio Connect



**OH, MY!**



## Developing Subject Matter (or Domain) Expertise

- PubMed or Google Scholar alerts
- Professional Society Membership
- Attend Conferences
- Talk to People

How does this benefit others across the organization?



## [EXTERNAL] What's new for 'opioid' in PubMed



**My NCBI** <efback@ncbi.nlm.nih.gov> [Unsubscribe](#)  
to me ▾

Wed, Dec 5, 6:27 AM (4 days ago) ☆ ↩ ⋮

This message contains My NCBI what's new results from the National Center for Biotechnology Information ([NCBI](#)) at the U.S. National Library of Medicine ([NLM](#)).  
Do not reply directly to this message.

**Sender's message:** Here is the digest "opioid" articles:

Sent on Wednesday, 2018 December 05

Search: **opioid**

[View](#) complete results in PubMed (results may change over time).

[Edit](#) saved search settings, or [unsubscribe](#) from these e-mail updates.

### PubMed Results

Items 1 - 20 of 240

1. [Prevalence and patterns of opioid misuse and opioid use disorder among primary care patients who use tobacco.](#)

John WS, Zhu H, Mannelli P, Subramaniam GA, Schwartz RP, McNeely J, Wu LT.

Drug Alcohol Depend. 2018 Nov 26;194:468-475. doi: 10.1016/j.drugalcdep.2018.11.011. [Epub ahead of print]

PMID: 30513477 [PubMed - as supplied by publisher]

2. [Biochemical and pharmacological investigation of novel nociceptin/OFQ analogues and N/OFQ-RYYRIK hybrid peptides.](#)

Erdei AI, Borbély A, Magyar A, Szűcs E, Ötvös F, Gombos D, Al-Khrasani M, Stefanucci A, Dimmito MP, Luisi G, Mollica A, Benyhe S.

Peptides. 2018 Dec 1. pii: S0196-9781(18)30242-0. doi: 10.1016/j.peptides.2018.11.010. [Epub ahead of print]

PMID: 30513351 [PubMed - as supplied by publisher]

3. [Educational lectures enhance knowledge about the human immunodeficiency virus \(HIV\) and reduce risky behavior and fear among methadone maintenance treatment patients.](#)

Barak I, Adelson M, Sason A, Livnat Y, Schreiber S, Peles E.

Subst Abus. 2018 Dec 4:1-5. doi: 10.1080/08897077.2018.1528492. [Epub ahead of print]

PMID: 30513276 [PubMed - as supplied by publisher]



19. [Exploring the Role of Chronic Pain Clinics: Potential for Opioid Reduction.](#)

Patwardhan A, Matika R, Gordon J, Singer B, Salloum M, Ibrahim M.

Pain Physician. 2018 Nov;21(6):E603-E610.

PMID: 30508991 [PubMed - in process]

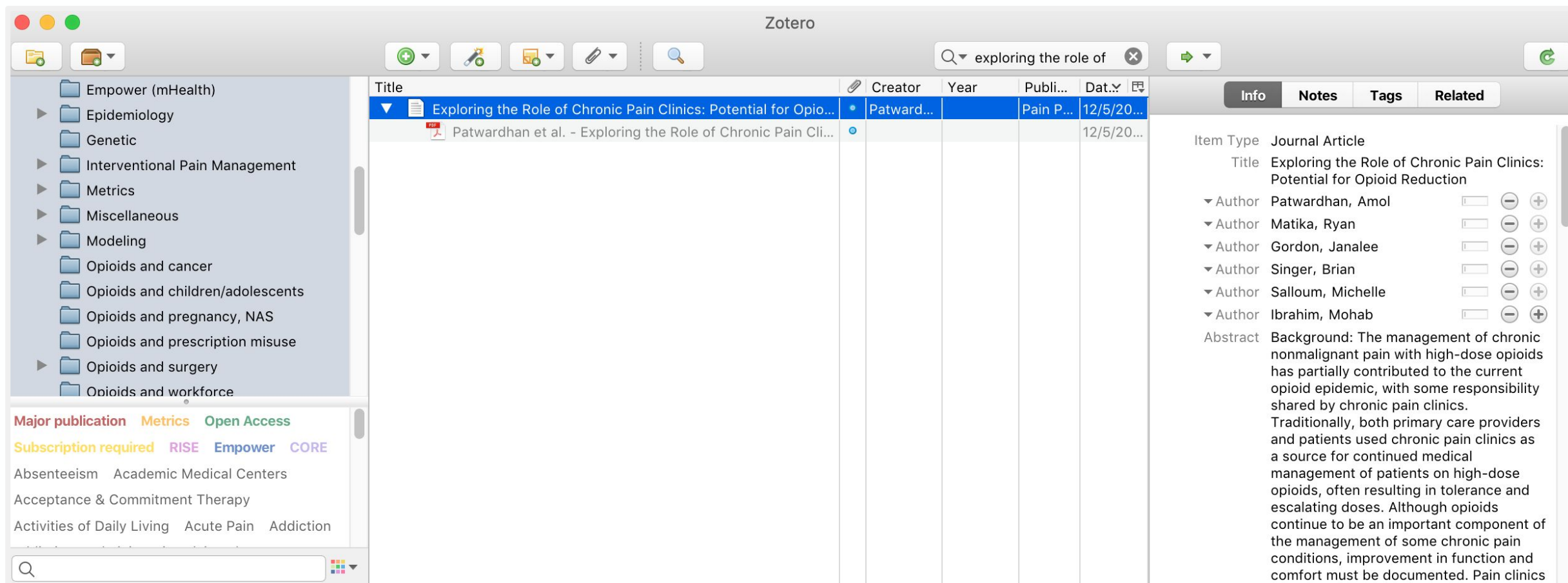
20. [Evaluation of Primary Care Physician Chronic Pain Management Practice Patterns.](#)

Provenzano DA, Kamal KM, Giannetti V.

Pain Physician. 2018 Nov;21(6):E593-E602.

PMID: 30508990 [PubMed - in process]

# Building a reference library



**Zotero**

exploring the role of

Title	Creator	Year	Publi...	Dat...
Exploring the Role of Chronic Pain Clinics: Potential for Opioid Reduction	Patward...		Pain P...	12/5/20...
Patwardhan et al. - Exploring the Role of Chronic Pain Cli...				12/5/20...

**Info** Notes Tags Related

Item Type Journal Article

Title Exploring the Role of Chronic Pain Clinics: Potential for Opioid Reduction

▼ Author Patwardhan, Amol

▼ Author Matika, Ryan

▼ Author Gordon, Janalee

▼ Author Singer, Brian

▼ Author Salloum, Michelle

▼ Author Ibrahim, Mohab

Abstract Background: The management of chronic nonmalignant pain with high-dose opioids has partially contributed to the current opioid epidemic, with some responsibility shared by chronic pain clinics. Traditionally, both primary care providers and patients used chronic pain clinics as a source for continued medical management of patients on high-dose opioids, often resulting in tolerance and escalating doses. Although opioids continue to be an important component of the management of some chronic pain conditions, improvement in function and comfort must be documented. Pain clinics

# Disseminating weekly updates of references

Zotero Library Weekly Update as of Friday, December 7th



**Meredith Peratikos** <mperatikos@axialhealthcare.com>  
to dlaxiallibrary ▾

Fri, Dec 7, 9:38 AM (2 days ago) ☆ ↩ ⋮



## Publish to Promote

In 2019, axialHealthcare will launch our publish to promote initiative. For a preview of this initiative and a snapshot of our current publish to promote activity, check out [Publish to Promote on Confluence](#).

## Zotero Library Weekly Update

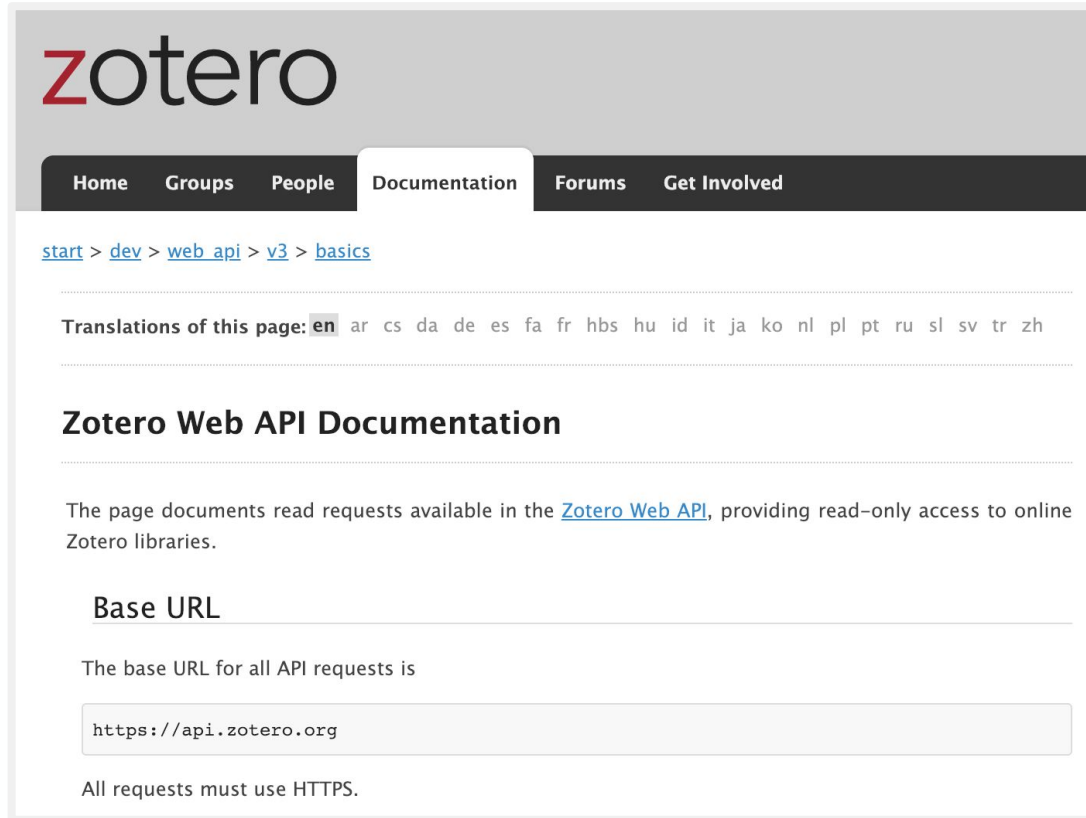
A total of 8 articles have been added between November 30, 2018 through December 7, 2018.

As of December 7, the axial library contains  scientific articles.

First Author	Title	Journal	Date
Mary Jo Larson	Physicians report adopting safer opioid prescribing behaviors after academic detailing intervention	Substance Abuse	2018
Laura Murphy	Guidance on opioid tapering in the context of chronic pain: Evidence, practical advice and frequently asked questions	Canadian pharmacists journal	2018
Beth D. Darnall	Patient-Centered Prescription Opioid Tapering in Community Outpatients With Chronic Pain	JAMA internal medicine	2018
Deborah Dowell	CDC Guideline for Prescribing Opioids for Chronic Pain—United States, 2016	JAMA	2016
Amol Patwardhan	Exploring the Role of Chronic Pain Clinics: Potential for Opioid Reduction	Pain Physician	2018
Gualberto Ruaño	Fundamental Considerations for Genetically- Guided Pain Management with Opioids Based on CYP2D6 and OPRM1 Polymorphisms	Pain Physician	2018
Nitika Sanger	Association Between Socio-Demographic and Health Functioning Variables Among Patients with Opioid Use Disorder Introduced by Prescription: A Prospective Cohort Study	Pain Physician	2018



# Behind the scenes of weekly update



**zotero**

Home Groups People Documentation Forums Get Involved

[start](#) > [dev](#) > [web api](#) > [v3](#) > [basics](#)

Translations of this page: **en** ar cs da de es fa fr hbs hu id it ja ko nl pl pt ru sl sv tr zh

## Zotero Web API Documentation

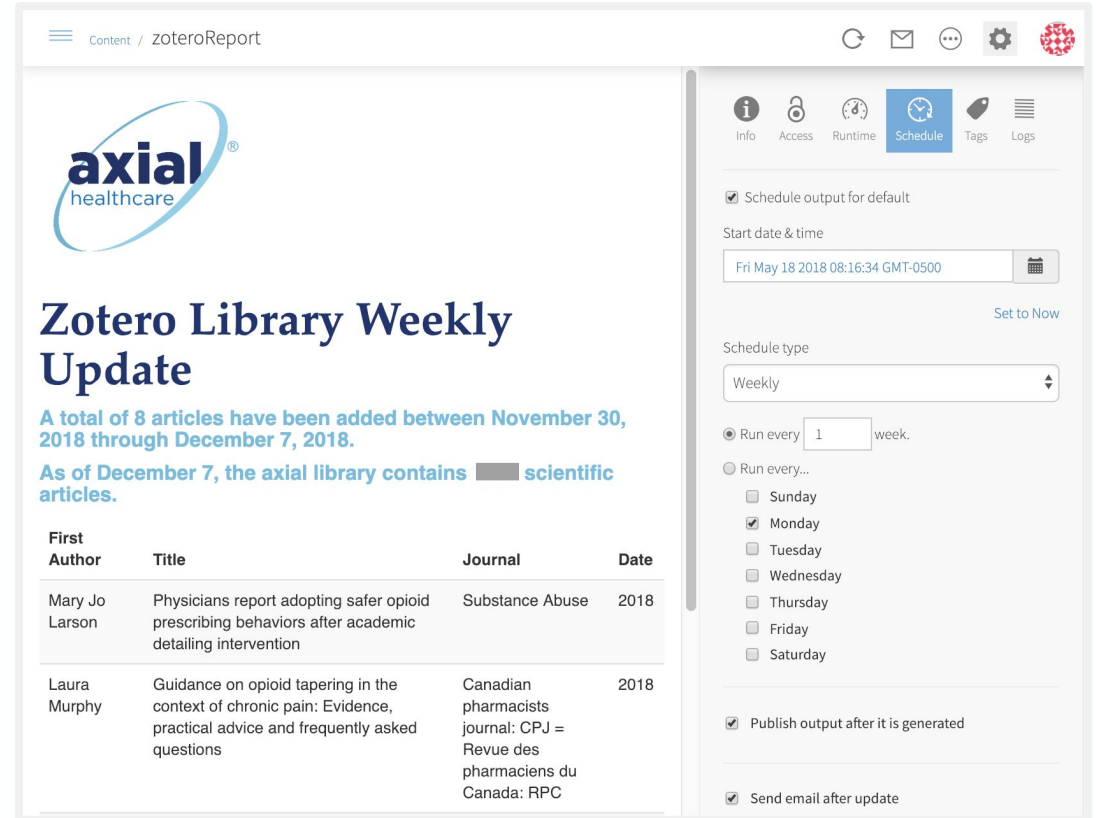
The page documents read requests available in the [Zotero Web API](#), providing read-only access to online Zotero libraries.

### Base URL

The base URL for all API requests is

`https://api.zotero.org`

All requests must use HTTPS.



Content / zoteroReport

**axial healthcare**

## Zotero Library Weekly Update

A total of 8 articles have been added between November 30, 2018 through December 7, 2018.

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Info Access Runtime **Schedule** Tags Logs

☒ Schedule output for default

Start date & time

Fri May 18 2018 08:16:34 GMT-0500 [Set to Now](#)

Schedule type

Weekly

☒ Run every 1 week.

☐ Run every...

☐ Sunday

☒ Monday

☐ Tuesday

☐ Wednesday

☐ Thursday

☐ Friday

☐ Saturday

☒ Publish output after it is generated

☒ Send email after update

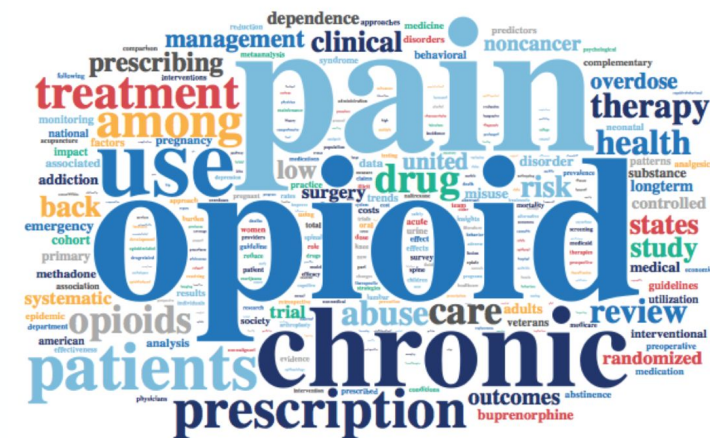
Jacquelyn Neal (R&D intern) wrote an Rmarkdown report.  
 It sourced axial's reference library from Zotero's API using RCurl, httr, jsonlite, purrr, readr packages.  
 The report is published to Rstudio Connect which generates weekly email updates.

- Individual library contribution report
- Word Cloud for blog post (wordcloud2 package)
- Governance report (not pictured)

Figure 1 is a line plot showing the cumulative count of tweets added by seven contributors over time. The x-axis represents the date added, ranging from January 1st to February 1st. The y-axis represents the cumulative count, ranging from 0 to 40. The legend identifies the contributors by color: Contributor 1 (red), Contributor 2 (dark blue), Contributor 3 (orange), Contributor 4 (light blue), Contributor 5 (dark blue), Contributor 6 (green), and Contributor 7 (grey). Contributor 4 shows the highest cumulative count, reaching 40 by late February. Contributor 2 and Contributor 5 show intermediate counts, while Contributor 1, Contributor 3, Contributor 6, and Contributor 7 show lower counts.

Date added	Contributor 1	Contributor 2	Contributor 3	Contributor 4	Contributor 5	Contributor 6	Contributor 7
Jan 01	0	22	0	14	0	4	0
Jan 15	0	0	0	19	0	12	0
Feb 01	0	0	4	33	0	13	0
Feb 05	0	0	8	40	17	0	0

Using titles from over 850 articles in the library, our data science and analytics team developed a word cloud to highlight the most frequently used words. The top three most used words? **Opioid**, **Pain** and **Chronic**. Not far behind in frequency are **Use**, **Treatment**, **Patients** and **Prescription**. These terms offer a unique and accurate glimpse of the past year at axialHealthcare.







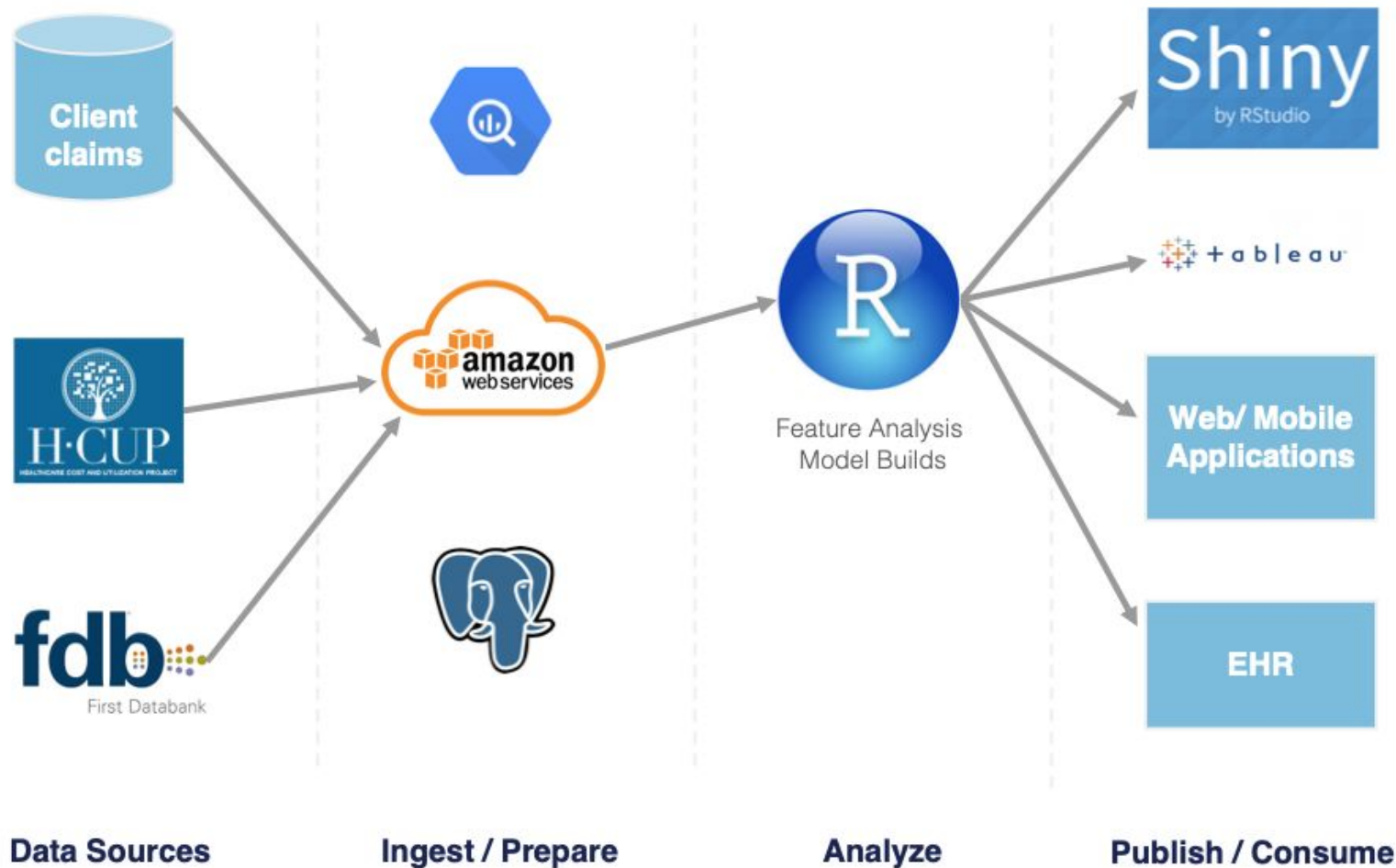
## Sharing Subject Matter (Domain) Expertise

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- PubMed or Google Scholar alerts [build library]
- Professional Society Membership [build library and contacts]
- Attend Conferences [lunch & learn]
- Talk to People [build contacts]

It is in your best interest to develop SME across the organization.

# Enhancing our Workflow with Rstudio Server Pro & Connect





## RStudio Server Pro

- Run multiple sessions and projects simultaneously
- Execute long running scripts that do not affect local machine
- Better performance on the server (compared with your macbook)
- Live collaboration tools in shared session (think google docs)
- Access your code in any browser without cloning repos
- Stable dev environment - not susceptible to OS X updates
- Identical to axial's R production environment
- Backend drivers for easier database connections
- Work safely with databases while traveling abroad



## RStudio Connect

---

- Rmarkdown reports or shiny apps
- Restrict access
- Vanity URL ( *Fave*♥ )
- Schedule reports with/without email delivery
- Cannot track usage statistics (yet?)

### Pain and opioids in the United States commercial coverage population

The data source is a random sample of commercially covered Blues members enrolled during a one year period given by July 1, 2016 through June 30, 2017.

**Select Region and Indicator**

**Region:** Tennessee

**Indicator:** % with opioid Rx

**% with opioid Rx**

Percent

	Tennessee	USA
Member count	154,046	5,692,251
% with pain condition	47.8%	47.3%
% with chronic pain	17.1%	16.8%
% with opioid Rx	21.7%	17.5%
% with chronic opioid treatment	2.8%	1.9%
% with severe risk of OUD	0.95%	0.66%
% with diagnosed OUD	0.90%	0.68%
% with opioid overdose	0.02%	0.03%



# An Rmarkdown & Shiny App with Open Source Data

- R Markdown report:  
[http://rpubs.com/mayjh/drug\\_prescription](http://rpubs.com/mayjh/drug_prescription)
- Shiny app:  
[https://mayjh.shinyapps.io/medicare\\_part\\_d\\_drug\\_prescription\\_overdose/](https://mayjh.shinyapps.io/medicare_part_d_drug_prescription_overdose/)
- Code:  
<https://github.com/mayjh/r-ladies-demo>

# Biographies

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## **Amy J. Graves, MS, MPH**

### **Senior Healthcare Statistician, axialHealthcare**

Amy's role in Medical Economics is dedicated to estimating healthcare savings. She specializes in causal inference methods using observational data.

## **Mathilde Granke, PhD**

### **Senior Research Data Scientist, axialHealthcare**

Finding and sharing the stories hiding in data is Mathilde's passion. Her expert scientific understanding is applied to the largest pain database in healthcare to gain insight into pain management and opioid prescription practices.

## **Meridith (Blevins) Peratikos, MS**

### **Director of Statistics and Scientific Collaboration, axialHealthcare**

### **Adjunct Faculty, Department of Biostatistics, Vanderbilt University Medical Center**

A career researcher committed to contributing to an evidence-based understanding of high impact healthcare problems, Meridith leads a team of scientists that conducts research studies, methodological oversight, and literature review.

## **Jianhong (May) Shen, PhD (contributed Shiny app from open data)**

### **Research Data Scientist, axialHealthcare**

Committed to enhancing the well-being of patients in pain, Jianhong mines the literature and data to develop evidence-based solutions to issues on pain care and opioid misuse.

