



Internet2 Health Sciences

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CUDI meeting in Manzanillo, Colima

Agenda

- Brief background on Internet2
- Structure and process of Health Science Initiative
- Bridging the Gap
 - Government, Industry, Academia
 - Health care providers, educators, researchers
- Translational Research Strategies

- Mission: develop and deploy advanced network applications and technologies, accelerating the creation of tomorrow's Internet
 - Membership organization of US universities
 - Key partnerships with government and industry
- Goals
 - Enable advanced network applications
 - Ensure leading edge R&E network environment
 - Transfer experiences/capability

Internet2 Universities

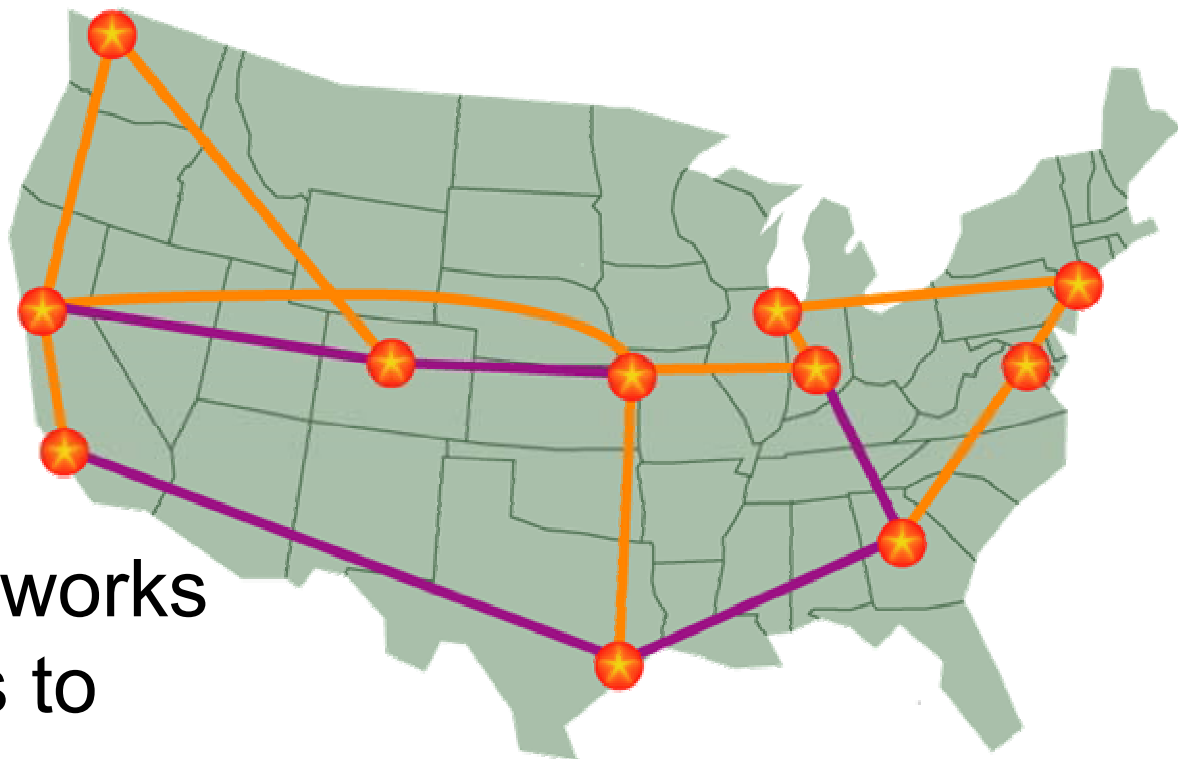
206 University Members, March 2004



Strategic Foci

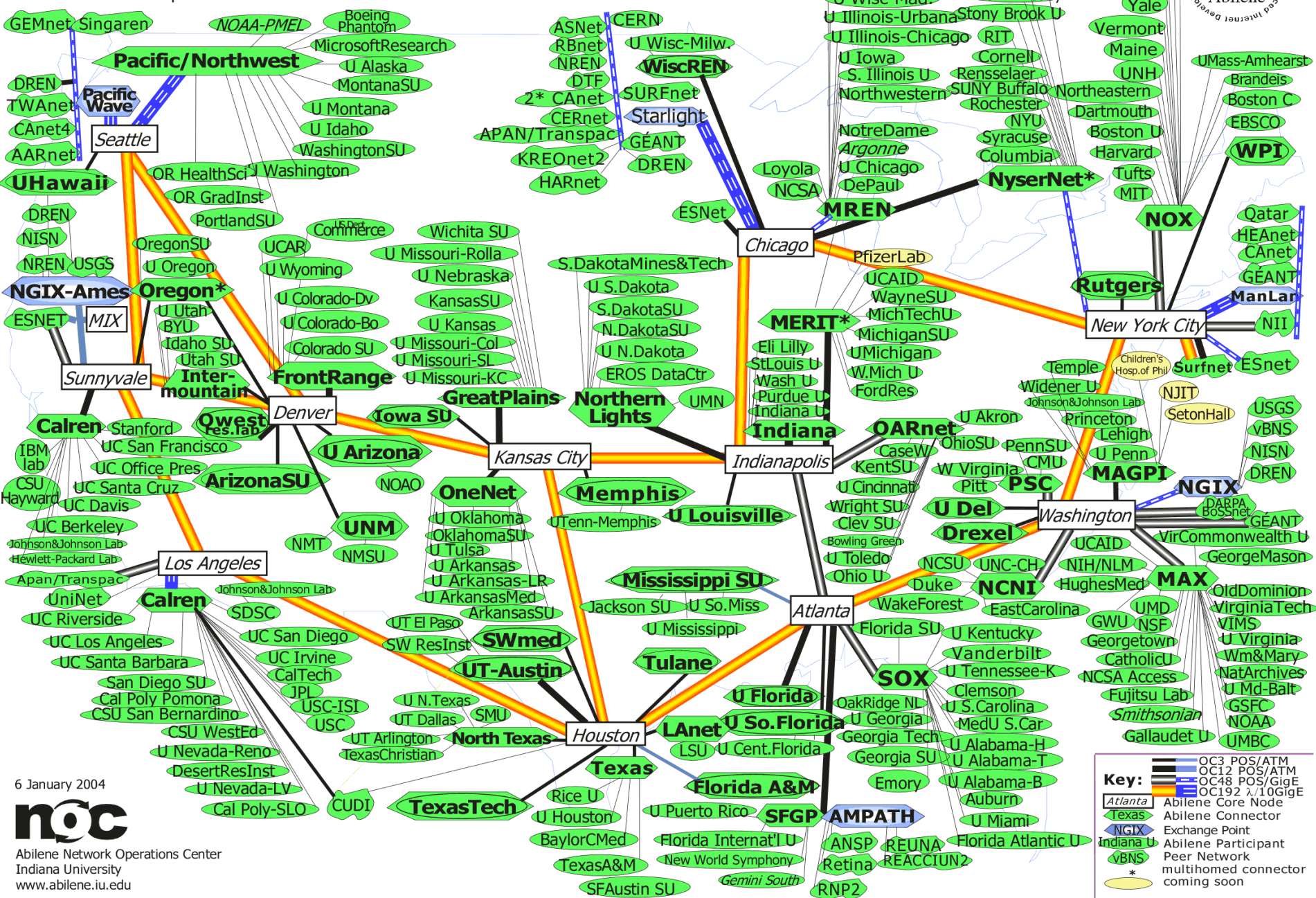
- Address the advanced networking needs and interests of the **research & education** community
- Implement a systems approach towards a **scalable advanced networking** infrastructure
- Provide **leadership** in the evolution of the Internet
- Leverage **strategic relationships** among academia, industry and government
- Catalyze activities that **cannot be accomplished by individual** organizations
- Focus on **financially feasible**, affordable, and deployable technologies and solutions

- Backbone operates at 10 Gbps (OC192)
- 11 core nodes
- 47 GigaPoPs
Regional high-performance aggregation sites
- Local campus networks provide 100 Mbps to the desktop

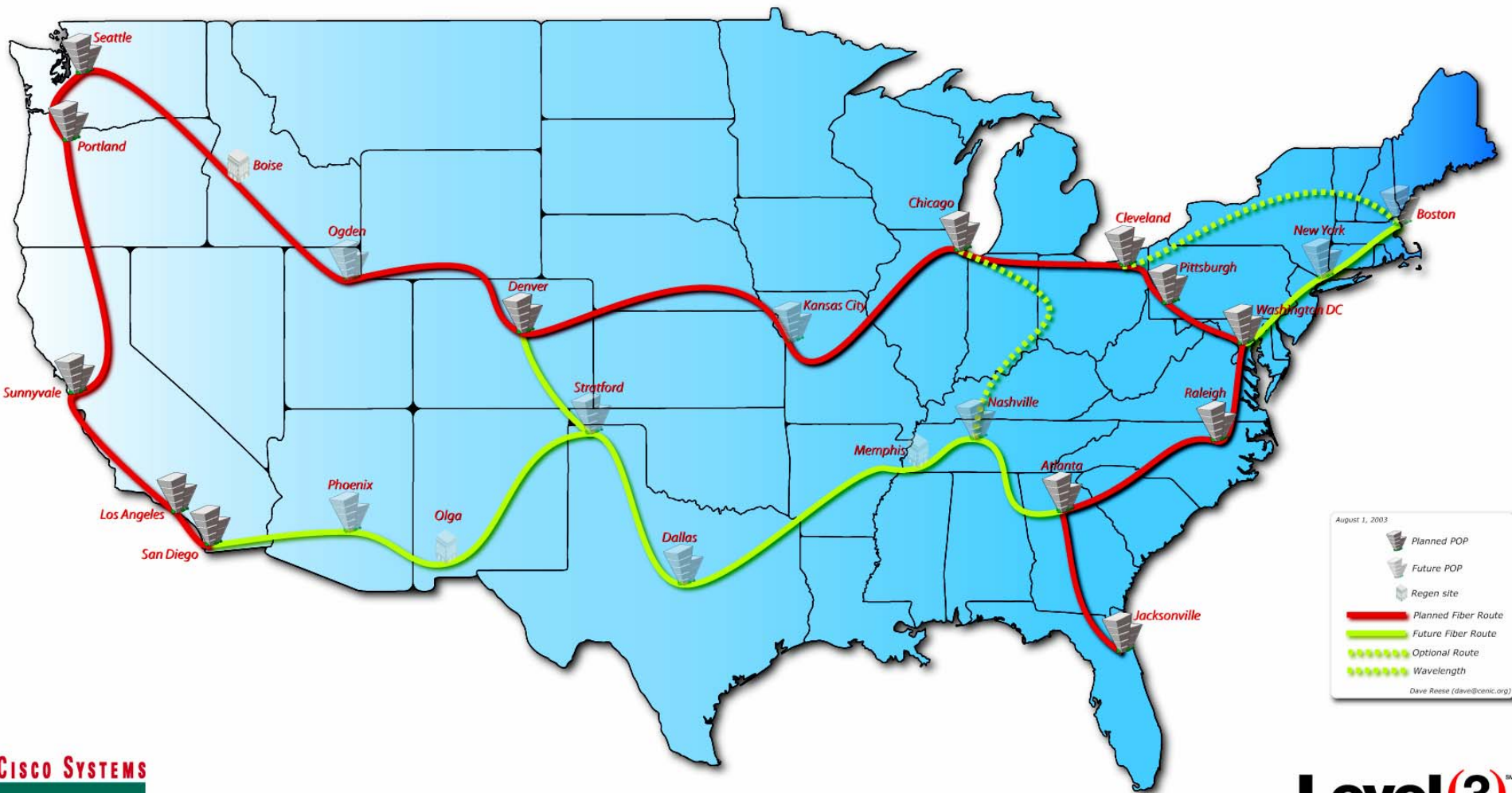


6 completed connections:
 238 participants
 49 connectors + 2 NGIXs + StarLight, AMPATH, AMPATH, PacificWave, ManLan IXs
 50 connections to 32 peer networks

The Abilene Network



NLR National Fiber Network



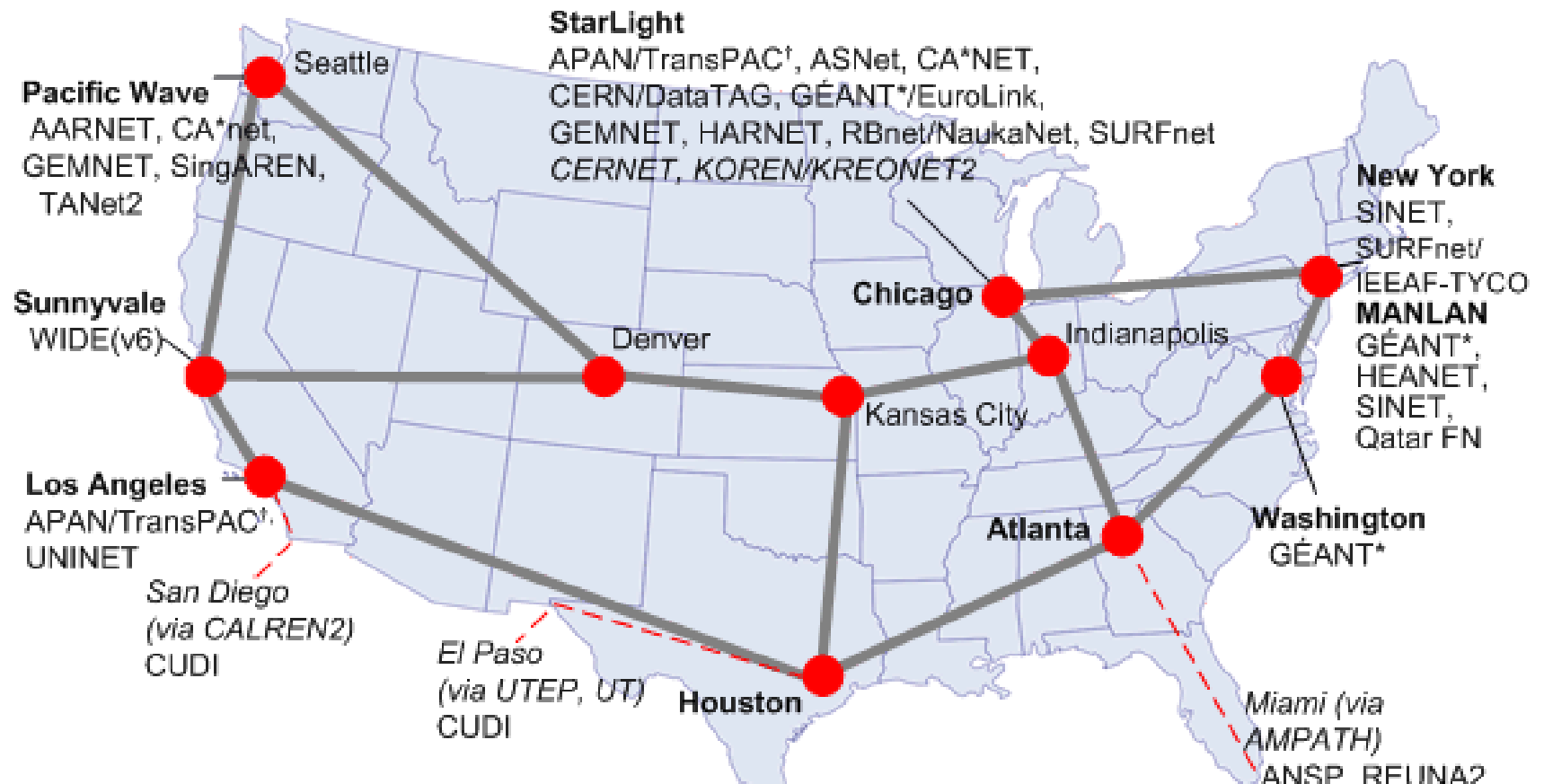
Initial Coordinating Participants





Abilene International Peering

Abilene International Network Peers



* via GÉANT: AConet, BELNET, CARNet, CESNET, CYNET, Forskningsnettet, EENet, Funet, Renater, G-WIN, GRNET, HUNGARNET, Rhnet, HEAnet, IUCC, GARR, LANET, LITNET, RESTENA, Univ. Malta, SURFnet, UNINETT, POL34, RCTS2, RoEduNet, RBnet, SANET, ARNES, RedIRIS, SUNET, SWITCH, JANET, ULAKBYM, CERN

[†] via APAN/TransPAC: WIDE/JGN, IMnet, CERNet/CSTnet/NSFCNET, KOREN/KREONET2, PREGINET, SingAREN, TANet2, ThaiSARN

Americas

- Canada, Mexico, US cross-border connectivity
- Chile, Venezuela, Brazil, Argentina connected to Miami via 45Mbps (AMPATH)
- Cable infrastructure around the region
- CLARA backbone network emerging

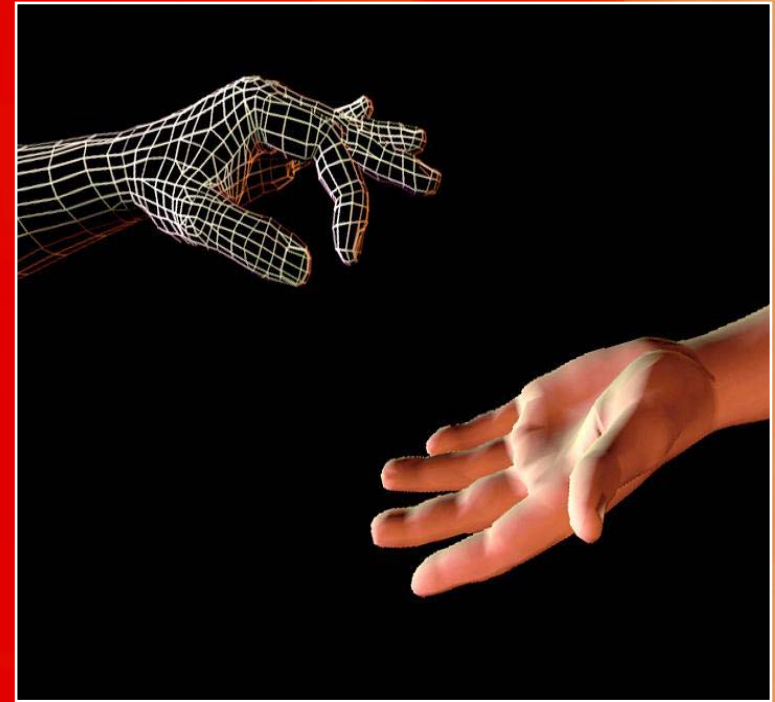




Healthcare in the Information Age



The scope of the Internet2 Health Science Workgroup includes clinical practice, medical and related biological research, education, and medical awareness in the public.



Health Science Members

- 86 Academic Medical Centers (AAMC)
- 130 Health Science related colleges
 - Public Health, Nursing, Dentistry, Pharmacy
- Affiliate Members
 - NIH, FDA, NSF, NASA, NOAA
 - Howard Hughes Medical Institute
- Pharmaceutical Companies (Big Rx)
 - Johnson&Johnson, Pfizer, Eli Lilly
- TeleHealth
 - Prous Science, Cisco, IBM, Microsoft, SUN, Polycom, Ford Motor Company

Health Sciences Initiative



- Health Science Advisory Group
- Working Groups/SIG/BoF
- Medical Professional .Org
- Driven by the needs of the medical discipline
 - Health care providers
 - Educators
 - Researchers

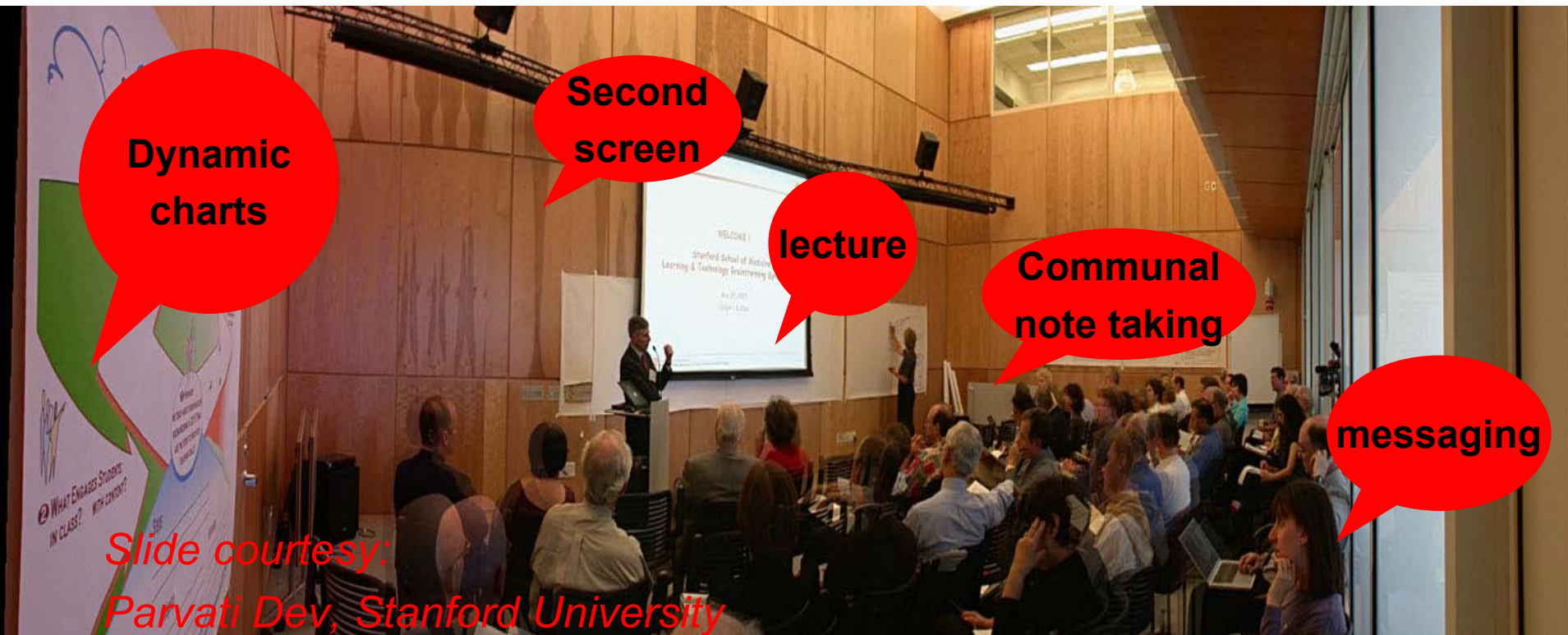
CLINICAL:

Why Physicians Participate in Internet2

- **Extend the provision of better healthcare**
 - TeleHealth (eHealth)
 - Develop Clinical Skills and Assessment
- **Distributed data sharing**
 - Electronic Health Record
 - Presence and Integrated Communications (VoIP, RFID)
 - Advanced visualization: Computer Assisted Surgery
 - Computer Aided Diagnosis
- **Collaboration independent of boundaries**
 - Geography
 - Time
 - Cognition: Knowledge Management

Educators: Why Faculty Participate in Internet2

- Rich resources from student endpoints to centralized powerful computation and large storage
- Students absorb multiple channels of information



RESEARCHERS:

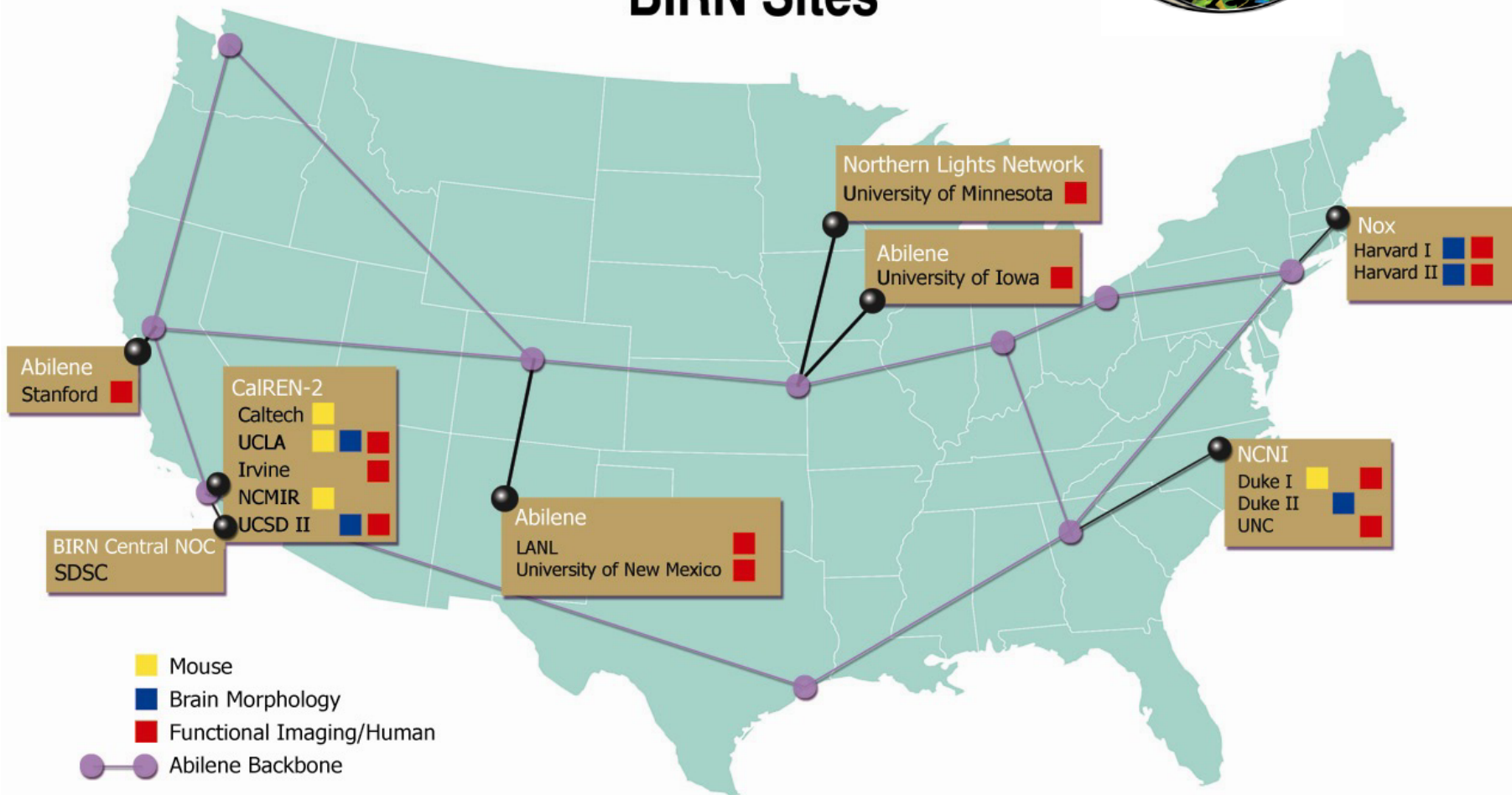
Why Scientists Participate in Internet2

Internet2 doesn't only **save time**, it allows **interactivity** in places where that was not possible before. I'd call it a **quantum leap**, if I didn't know that physics defines that as the smallest change a system is capable of... *Timothy Poston, Bangladesh*





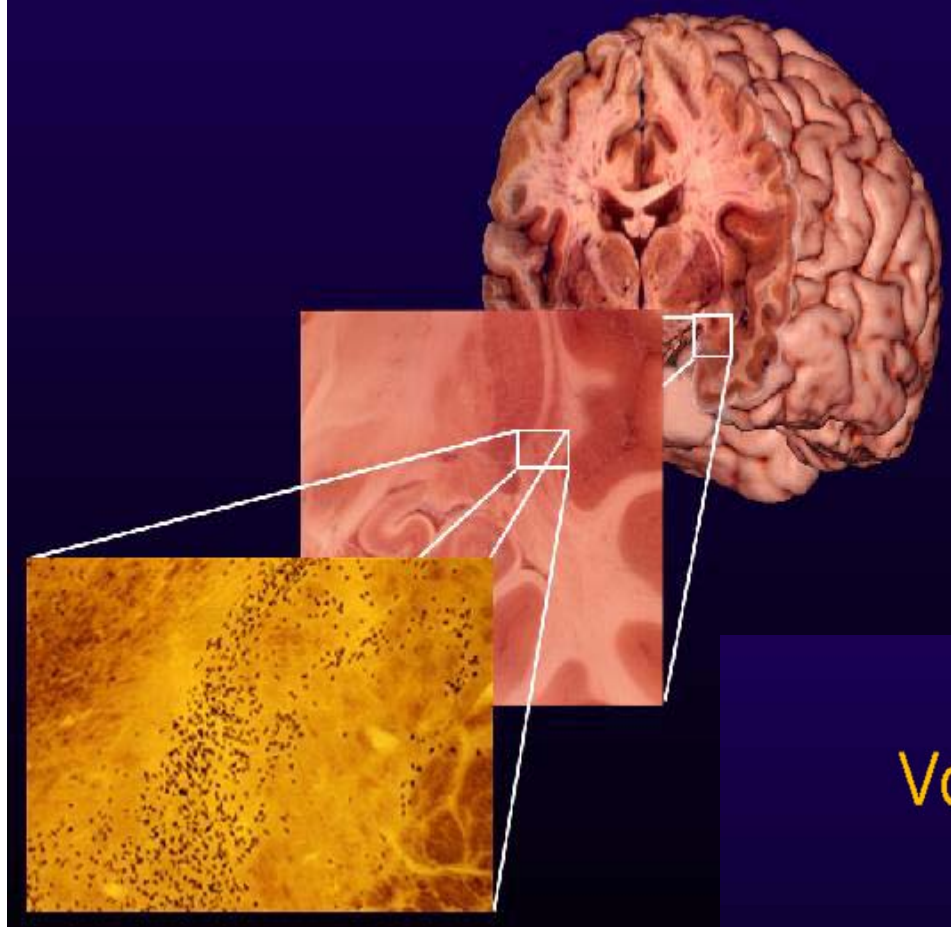
BIRN Sites



Funded by: NCRR/NIH

Mark Ellisman, PhD, Univ. California San Diego, SDSC

***EACH BRAIN
REPRESENTS
A LOT
OF DATA***



***AND COMPARISONS
MUST BE MADE
BETWEEN MANY
(fMRI)***

Slide courtesy of Arthur Toga (UCLA)

**Volume sizes by resolution -
brain = 1500 cm³**

GB = Gigabyte = 10⁹

TB = Terabyte = 10¹²

PB = Petabyte = 10¹⁵

| Voxel size | B&W (1 B/p) | High res (2 B/p) | Color (3 B/p) |
|------------|-------------|------------------|---------------|
| cm | 1.5 KB | 3 KB | 4.5 KB |
| mm | 1.5 MB | 3 MB | 4.5 MB |
| 10 μ m | 1.5 TB | 3 TB | 4.5 TB |
| μ m | 1.5 PB | 3 PB | 4.5 PB |



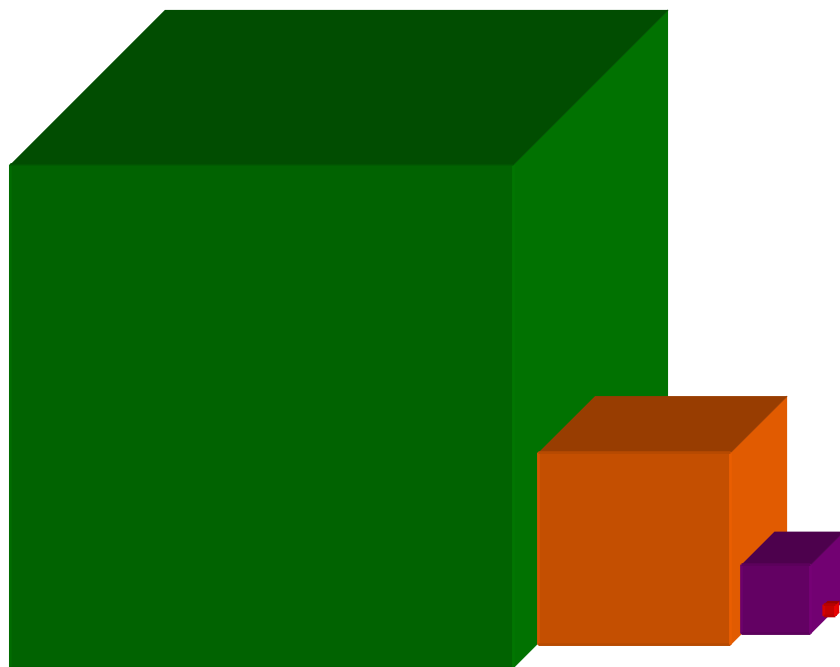
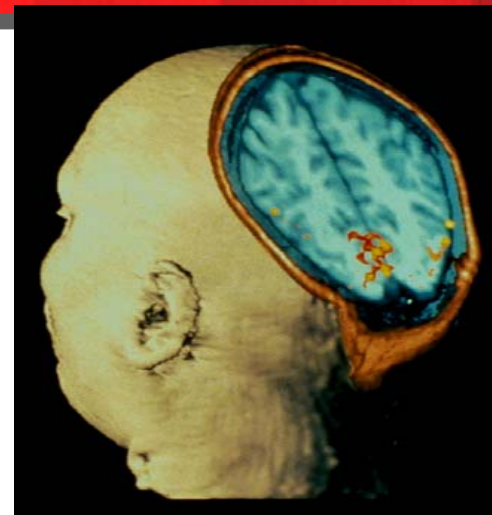


Time Needed to Move Brain Images Across the Internet

Voxel size: 1 mm

Imaging Technology: Current color MRI

Data generated: 4.5 Megabytes



643 seconds 56 Kbps Modem

36 seconds Broadband Internet

0.4 seconds Typical LAN

0.006 seconds Current Internet2
Record (5.6 Gbps)

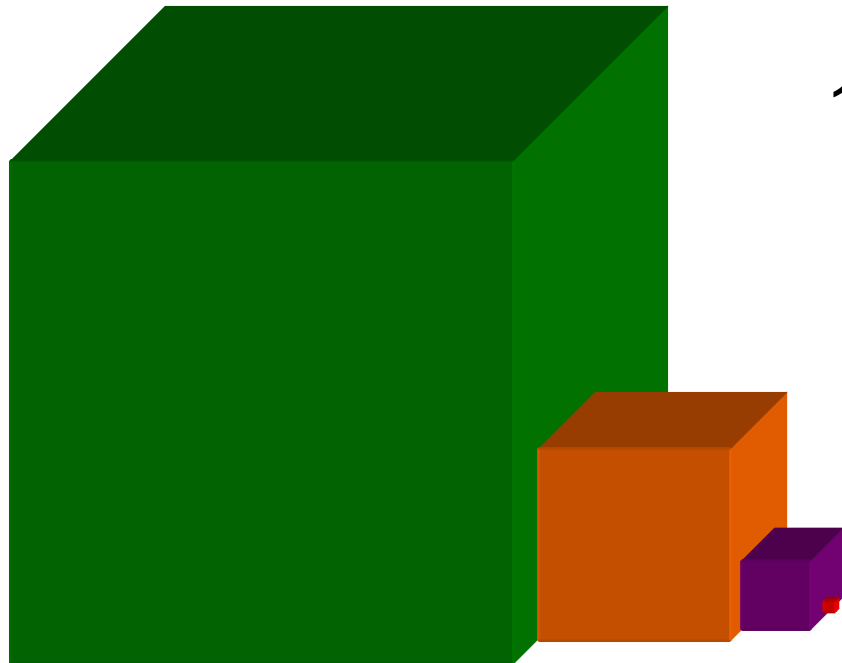
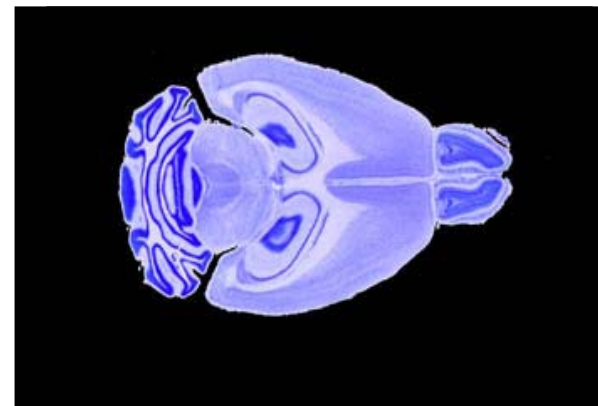


Time Needed to Move Brain Images Across the Internet

Voxel size: 10 μm

Imaging Technology: Current color fMRI

Data generated: 4.5 Terabytes



178,571 hours 56 Kbps Modem

10,000 hours Broadband Internet

100 hours Typical LAN

1.8 hours Current Internet2
Record (5.6 Gbps)

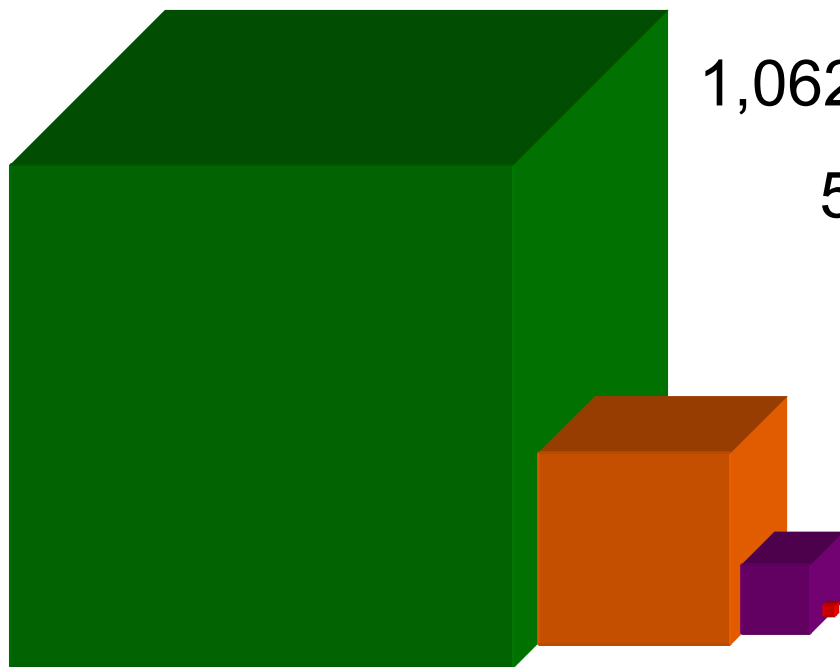
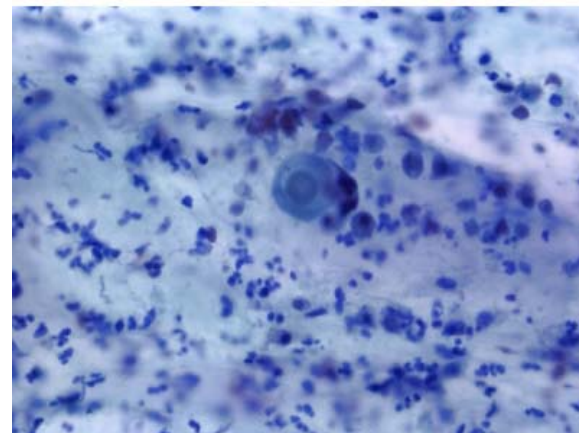


Time Needed to Move Brain Images Across the Internet

Voxel size: 1 μm

Imaging Technology: Near-future color fMRI

Data generated: 4.5 Petabytes



1,062,925.17 weeks

56 Kbps Modem

59,523.8 weeks

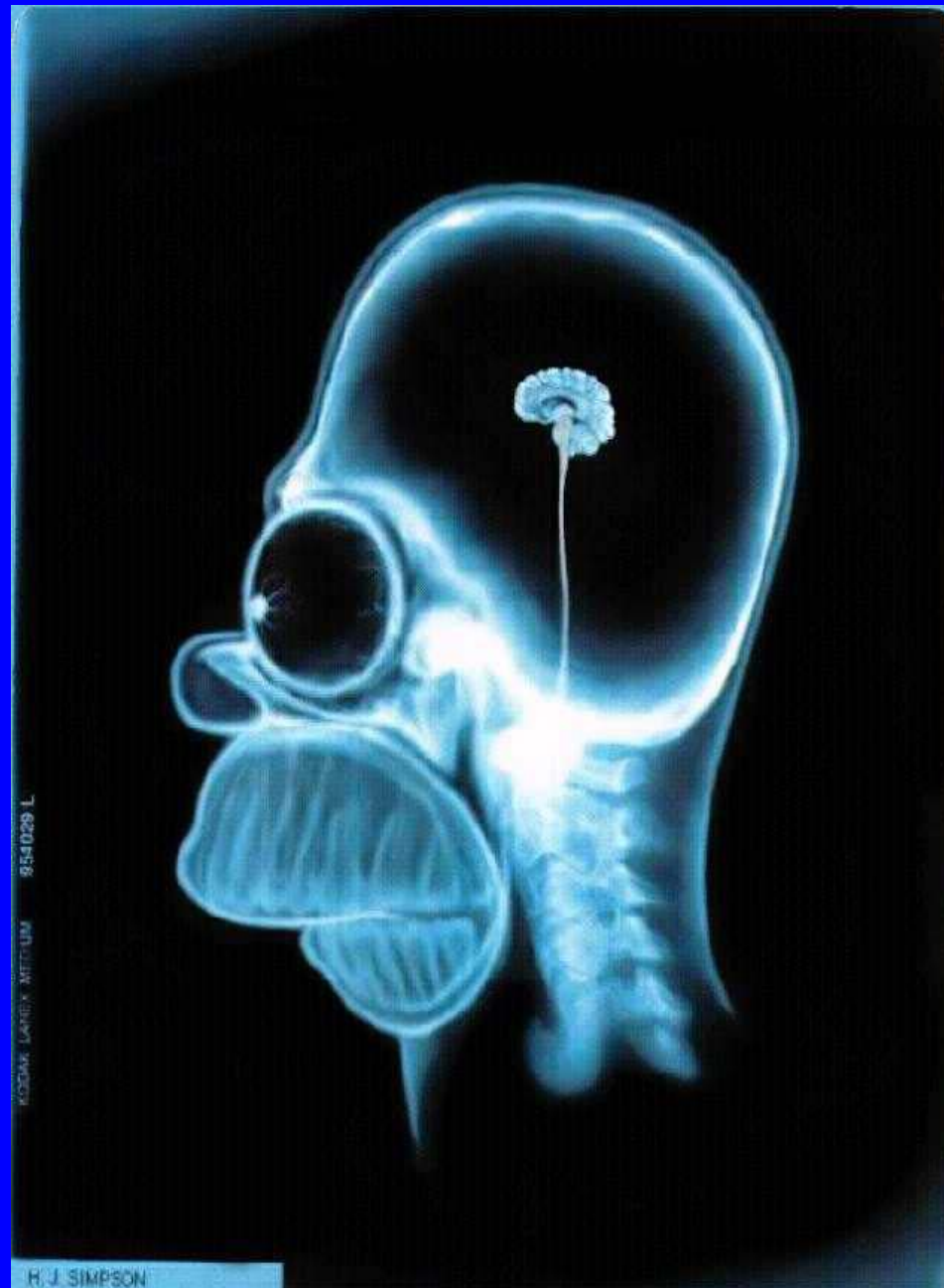
Broadband Internet

181.7 weeks

Typical LAN

10.6 weeks

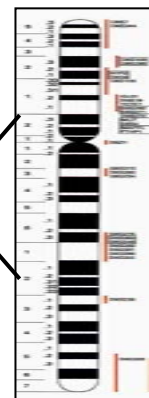
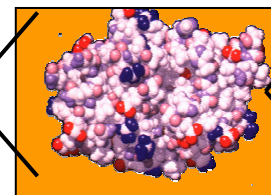
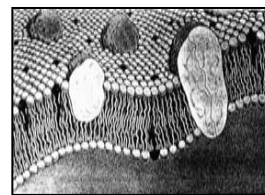
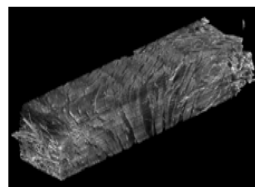
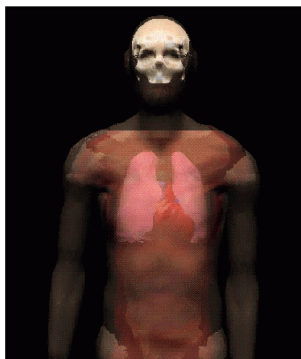
Current Internet2
Record (5.6 Gbps)



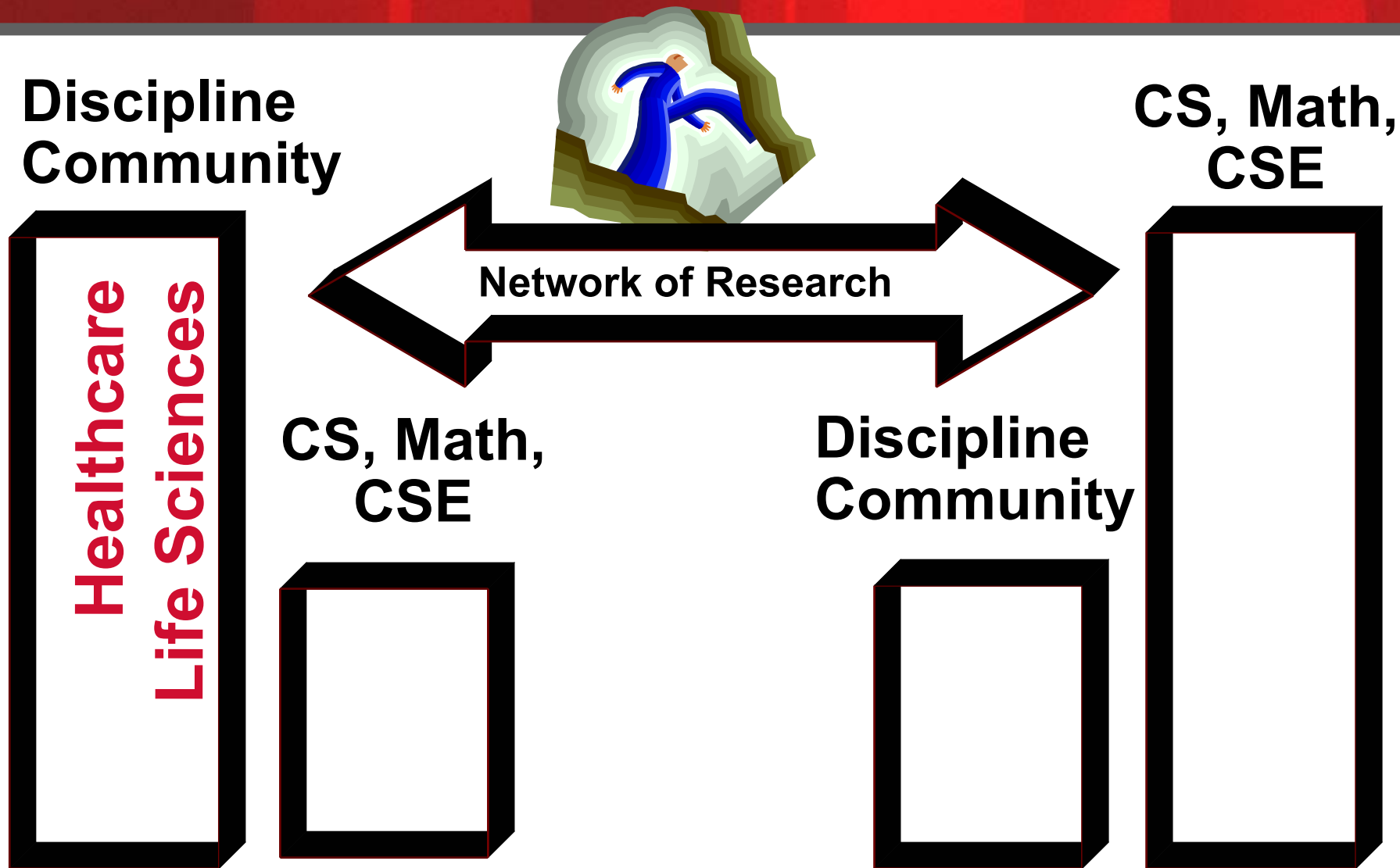
Slide Courtesy of BIRN

Health Science Grand Challenge

<Person-----Organ-----Tissue-----Cell-----Protein-----Atom>



The Wizard GAP: Translational Research





- What are today's most pressing scientific challenges?
- What are the roadblocks to progress and what must be done to overcome them?
- Which efforts are beyond the mandate of one or a few...but are the responsibility of (NIH as) a whole?

E. Zerhouni, M.D.
Director, National Institutes of Health

- **New Pathways to Discovery**
 - National Technology Centers
 - Bioinformatics
 - Nanotechnology
- **Research Teams of the Future**
- **Reengineering the Clinical Research Enterprise**
 - Integration/Interoperability
 - Clinical Trials/Elect. Health Records
 - Translational Research

NIH SYMPOSIUM
on Biocomputation & Bioinformation
**Digital Biology:
The Emerging Paradigm**
November 6-7, 2003
Natcher Conference Center, National Institutes of Health, Bethesda, Maryland



Keynote Speakers
Sydney Brenner
Nathan Myhrvold
Plenary Speakers
Arthur Toga
John Maczotte
Jill Mesirov
Scott Perleberg
Isaac Kohane
Abul Butta
Andrew McCallach
Howard Jacob

Concurrent Sessions
Scientific Data Integration
Networked Science
Artificial Biology
Scientific Posters
Demonstrations
Panel Workshop

Information
v2003meeting/
al Information
re Consortium



**Catalyzing
Team Science**

June 23-24, 2003
Natcher Conference Center
National Institutes of Health
Bethesda, Maryland

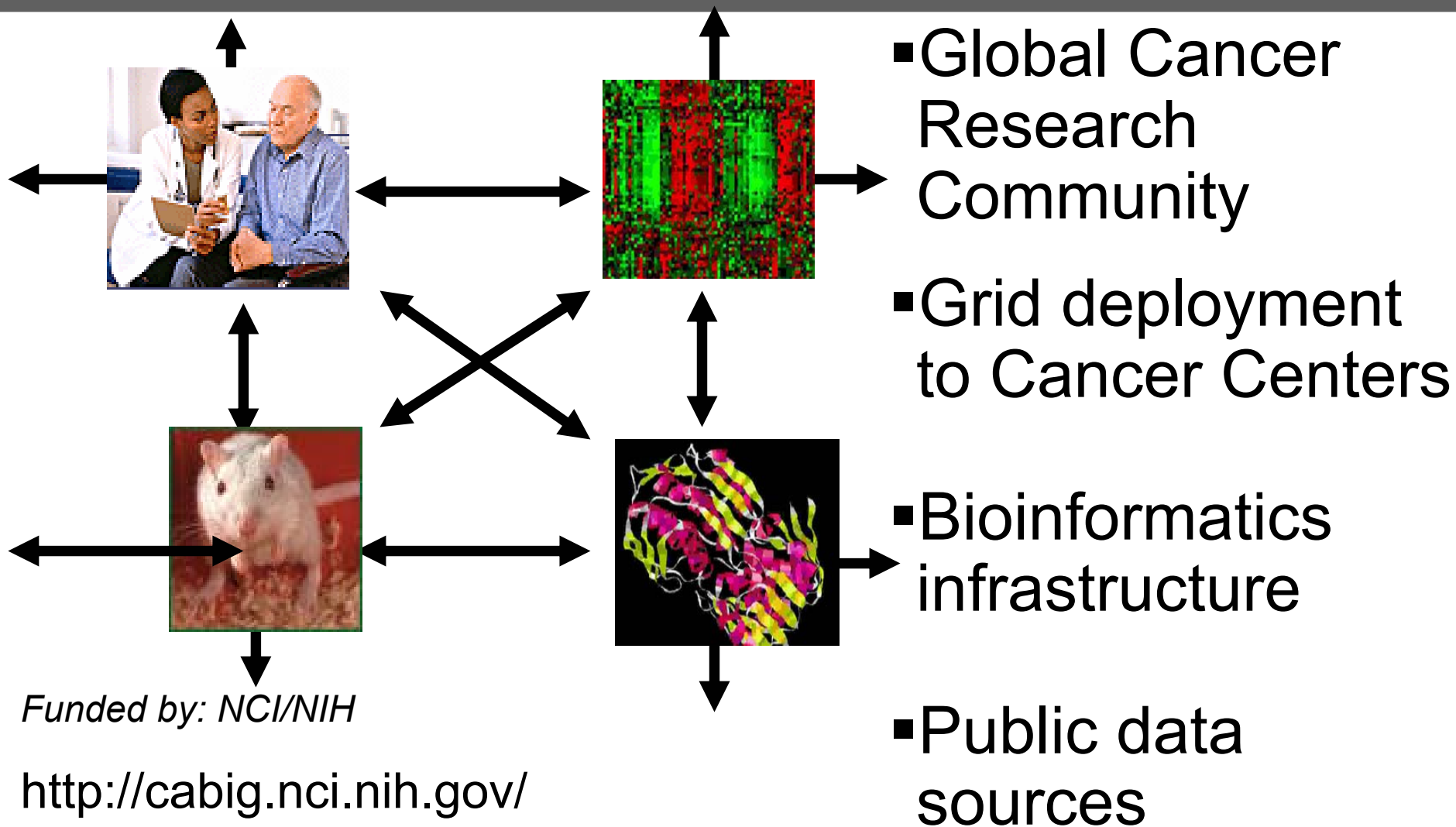
Report and Recommendations from the
National Committee on Vital and Health Statistics

**INFORMATION
FOR
HEALTH**

A Strategy for Building the
National Health Information Infrastructure



Research Team of the Future: Cancer Biomedical Informatics Grid



ONCOMINE



- Cancer Microarray Database containing close to 50 million datapoints
- Data mining tools to efficiently query genes and datasets of interest
- Meta-analyze groups of studies

<http://141.214.6.14:8080/Array1/>

Funded by: Univ of Michigan Pathology, Pew Scholars Program, American Cancer Society, and V Foundation

Arul M. Chinnaiyan, MD, PhD

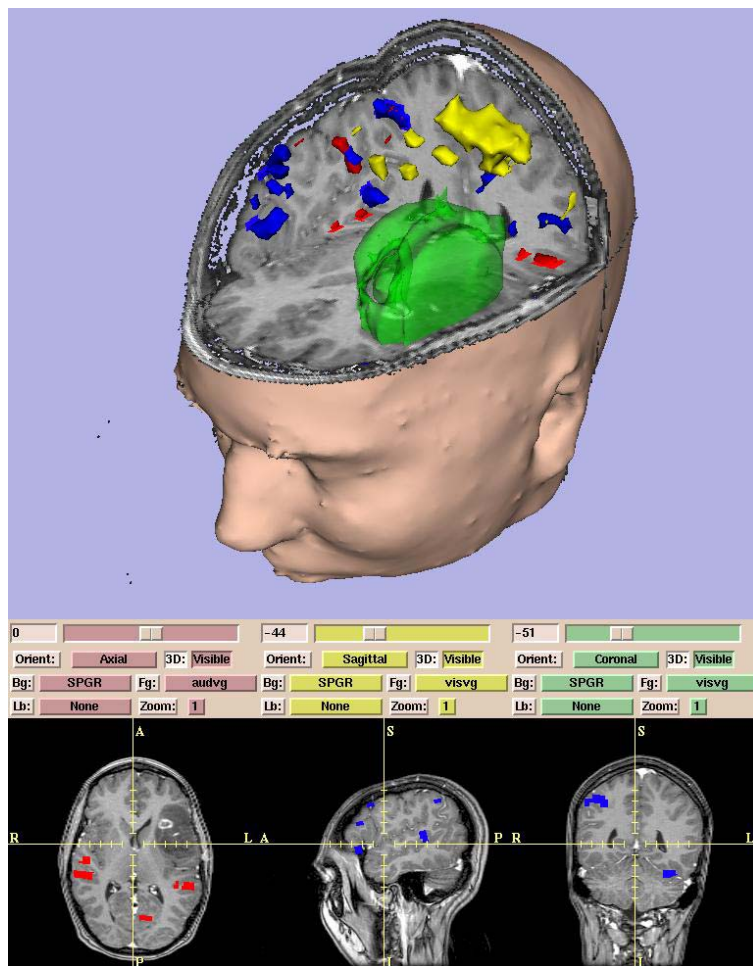
Remote, Real-time Simulation for Teaching Human Anatomy and Surgery

- Demonstrate remote, real-time teaching of human anatomy and surgery
- Deliver real-time simulation and visualization technologies
- Network-based architecture allows for multiple high-resolution stereo-graphic displays and haptic devices



Stanford University
School of Medicine
Stanford, CA





- Pipelines for Morphometric Analysis
- Surgical Planning
- Interoperative segmentation
- Brain atlas
- fMRI

Funded by NCRR/NIH



Ron Kikinis, M.D., Steve Pieper, Ph.D., Simon Warfield, Ph.D.

Brigham and Women's Hospital, Harvard Medical School

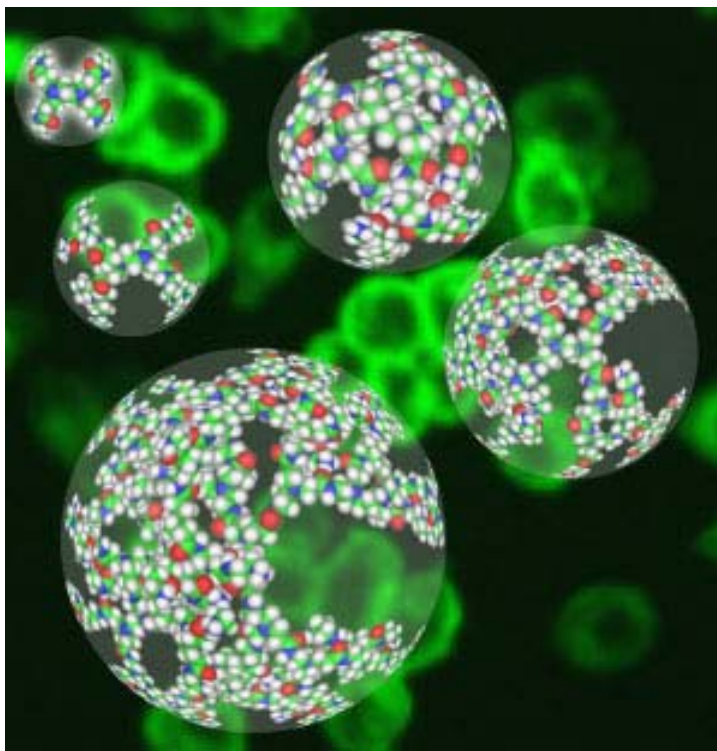
Telemammography: National Digital Mammography Archive

- Storage and retrieval of complete clinical record
 - Mammographic Radiology images (DICOM)
 - Pathology reports and related patient information
- Standard formats using standard protocols
- Multi-layered security
- Input and retrieval from multiple locations
- Measurement Criteria: Saving lives!



University of Pennsylvania, Philadelphia, PA
Y12 National Security Complex in Oak Ridge, Oak Ridge, TN
University of Chicago, Chicago, IL
University of North Carolina at Chapel Hill, Chapel Hill, NC
University of Toronto, Toronto, Canada

Center for Biologic Nanotechnology



<http://nano.med.umich.edu/>

Funding: NIH, DOE, NSF, DARPA

James Baker, MD

- Bring together the multiple disciplines to develop nanotechnology from conception to human trials.
- Nanotechnology will impact communications, information storage, materials sciences and other non-biologic applications offering limitless opportunities for miniaturization.

Pathway to Progress: The Patient

- CUDI and Internet2 Translational research collaboration basis
 - Scientific discovery
 - Product development
 - Clinical trials
- Patient care
 - Access to services
 - Efficiencies of production
 - Improve quality of care



Core Functions for Electronic Medical Networks



- Support ongoing and future management decisions
- Broadband electronic communication and connectivity
- Population health monitoring and reporting

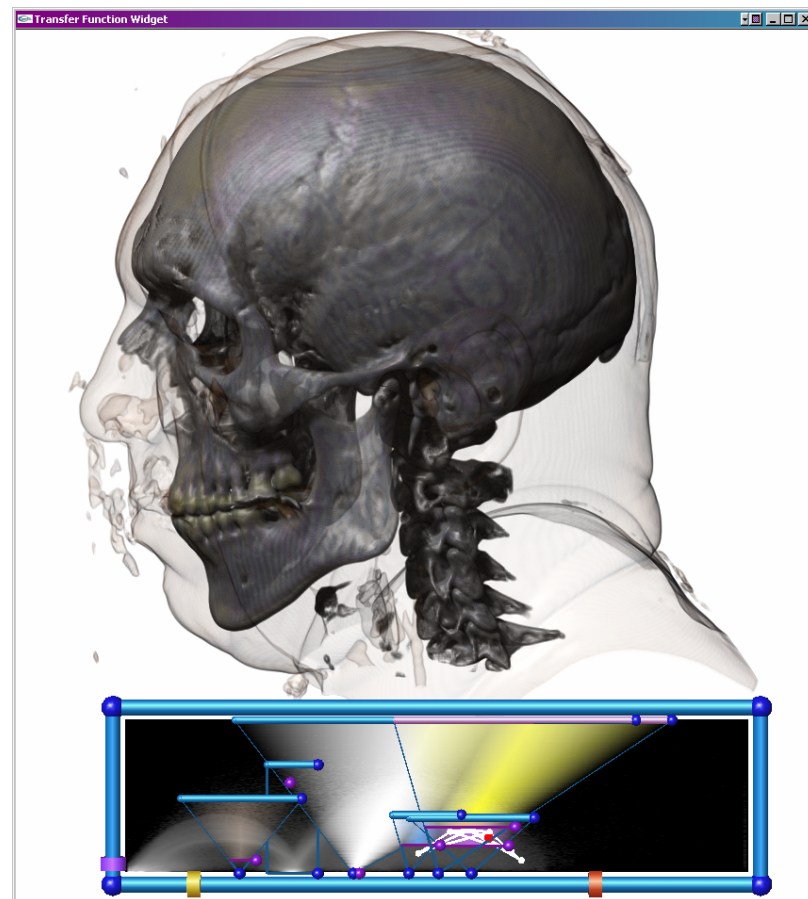
More Information

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