

Privacy preserving screening protocol

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REDOCS



ScreenACT

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ScreenAct is an aggregator platform of clinical trials

- help patients to find clinical trials
- help the health professional to watch and follow the local clinical trials
- Provide a tool to monitor the set of available patients

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Key Features

- an AI based approach to labelised clinical trials
- smart matching algorithm
- a huge and up-to-date database of clinical states

Their needs for the future of Screenact

- a fully (or the most we can) automatic application of matching between patients and promoter
 - with a fully privacy preservation of patient's private data
 - a realistic complexity to deploy it

Their needs for the future of Screenact

- a fully (or the most we can) automatic application of matching between patients and promoter
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 - a realistic complexity to deploy it
- found and/or exclude approach to achieve these needs

Actors

- A is the set of patients
- P is the set of promoters
- s is the solution
- C is the set of CROs

Model operations

- $DB = \{(id_1, d_1), (id_2, d_2), \dots, (id_n, d_n)\}$

With id_x a unique id

and d_x the data associated to the unique id on the base

DB_s are health data and $DB_@$ are contact data of patients

DB term is use for $DB_s \cup DB_@$

Model operations

- $DB = \{(id_1, d_1), (id_2, d_2), \dots, (id_n, d_n)\}$
- $req = [\text{requirements to satisfy}]$

req is a binary vector

Model operations

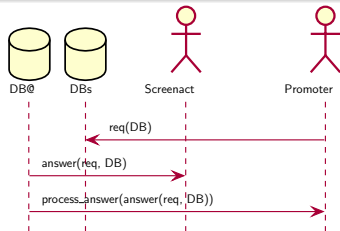
- $DB = \{(id_1, d_1), (id_2, d_2), \dots, (id_n, d_n)\}$
- $req =$ [requirements to satisfy]
- $answer(req, DB) = \{x \in DB \mid x \text{ satisfies } req\}$

x satisfies req iff $req \cdot x \geq 1$

Model Definition

Model operations

- $DB = \{(id_1, d_1), (id_2, d_2), \dots, (id_n, d_n)\}$
- $req = [\text{requirements to satisfy}]$
- $answer(req, DB) = \{x \in DB \mid x \text{ satisfies } req\}$
- $processed_answer(answer(req, DB)) = \dots$ (e.g. $|S|$ or $|\{x[1] \mid x \in S\}|$)



Synchronous

All messages are received at a same, known and constant time

All participant are processing the messages at the same, known and constant speed

Reliable

let E be the set of participants

$\forall a \in E, \forall m$ s.t. $send_a(m) \Rightarrow \forall b \in E - \{a\}, recv_b(m)$

Byzantin Promoter Tolerant

$$\forall p \in P, \text{view}(p) = \bigcup_{n=0}^{\infty} \text{processed_answer}(\text{answer}(\text{req}_p^n, DB))$$
$$\approx$$
$$\overline{\text{view}}(p) = \bigcup_{n=0}^{\infty} \text{processed_answer}(\text{answer}(\text{req}_p^n, \sigma(DB)))$$

"Our solution is Byzantin Promoter Tolerant iff the promotor is unable to distinguish the results computed from a legit database and from a permuted one."

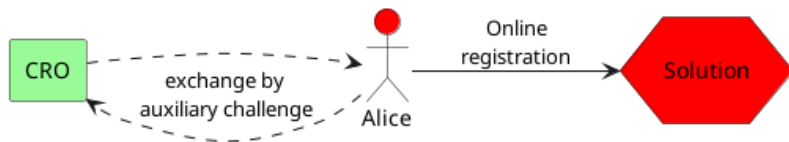
Honest but Curious Solution Tolerant

$$\begin{aligned} \text{view}(s) &= \bigcup_{n=0}^{\infty} \bigcup_{p=0}^{|P|} \text{answer}(\text{req}_p^n, \text{DB}) \\ &\approx \\ \overline{\text{view}}(s) &= \bigcup_{n=0}^{\infty} \bigcup_{p=0}^{|P|} \text{answer}(\text{req}_p^n, \sigma(\text{DB})) \end{aligned}$$

"Our solution is Honest but Curious Solution Tolerant iff the Solution is unable to distinguish the results produced by requests submitted by promoter on a legit database and a permuted one"

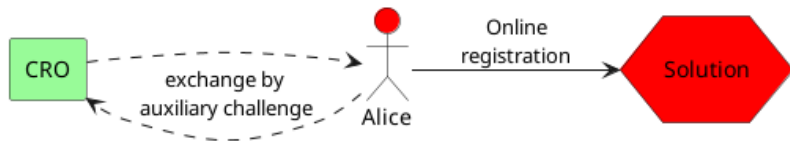
Problem statement

Patient enrollment



Problem statement

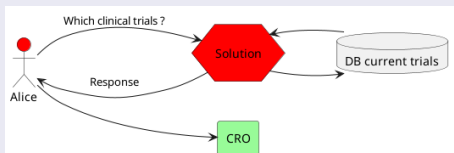
Patient enrollment



Our Goal

Pull version:

- A patient: Searches for clinical trials



Our Goal

Push version:

- The promoter: New clinical trial adds to the database
- The promoter: Learns statistics on patients matching the clinical trial requirement
- The selected patients: Notified



Databases unlinkability

Without the knowledge of the link database, there is no way to map a line of DB_{O} with a line of DB_{S}

Model properties (1/2)

Databases unlinkability

Without the knowledge of the link database, there is no way to map a line of DB_{O} with a line of DB_{S}

Patient unicity

$\nexists x, y \in DB$ s.t. $x \neq y$ and $x[id] = y[id]$ where id is the unique identification of a patient in DB

Patient revocability

$\exists x \in DB_{@}$ s.t. $x[@A] = Alice$, $\exists y \in DB_s$ s.t. $x[id] = y[id]$

$Revoke(Alice, DB) = DB'$

$\nexists z \in DB'$ s.t. $z[id] = y[id]$

Model properties (2/2)

Patient revocability

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Patient confidentiality

Each patient $a \in A$ is the only one who knows his line $x \in DB_s$ s.t.
 $x[@A] = a$

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Patient confidentiality

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Confidential patient delivery

Each patient $a \in A$ is the only one who knows the result of a clinical trial.

Functional encryption

Alice



Bob



x

Carol



$f(x)$?

- Bob has a secret x
- Carol wants to compute $f(x)$
- Alice has a surprise tool that will help us later

Functional Encryption

Alice



Bob



x

Carol



$f(x) ?$

Functional Encryption

Alice



Bob



x

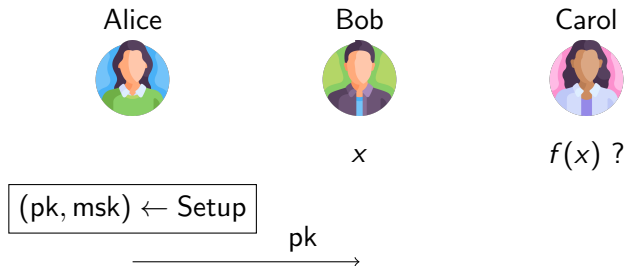
Carol



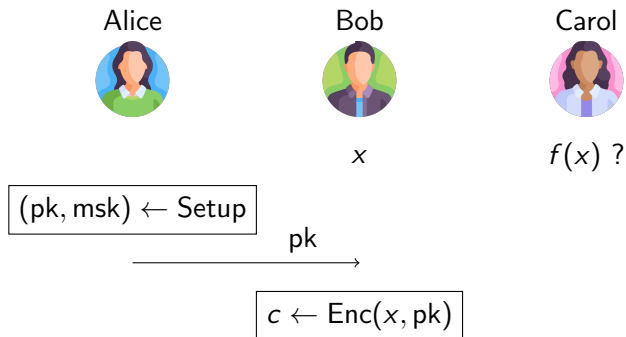
$f(x) ?$

$(pk, msk) \leftarrow \text{Setup}$

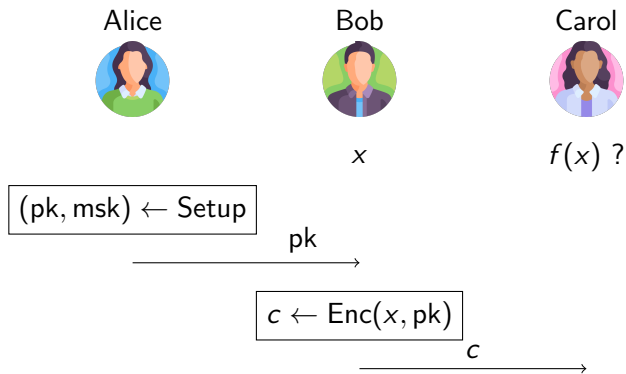
Functional Encryption



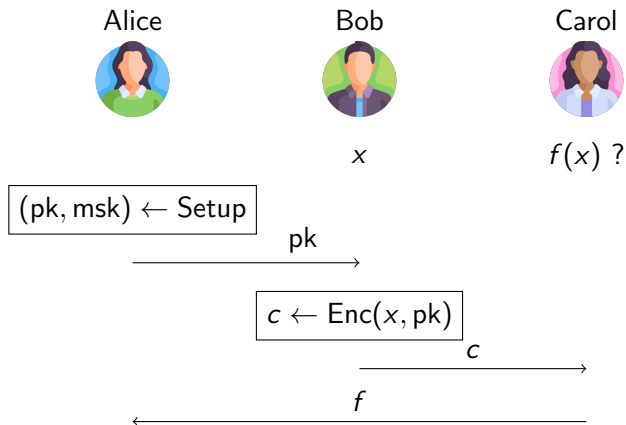
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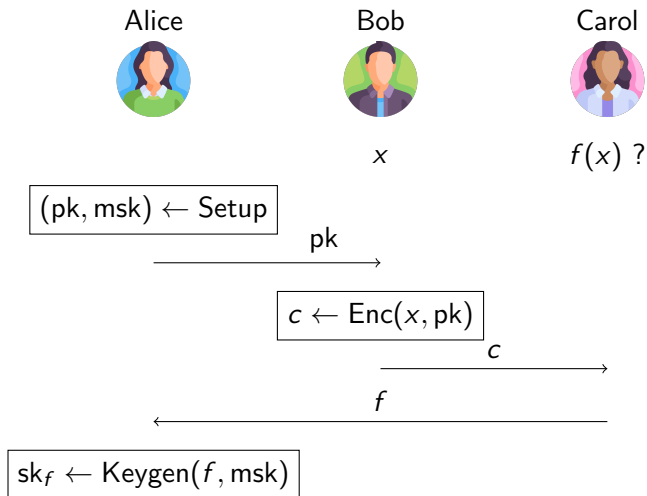
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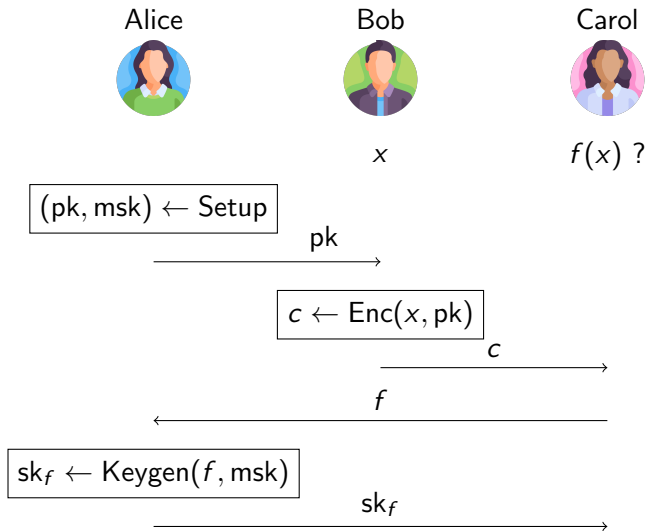
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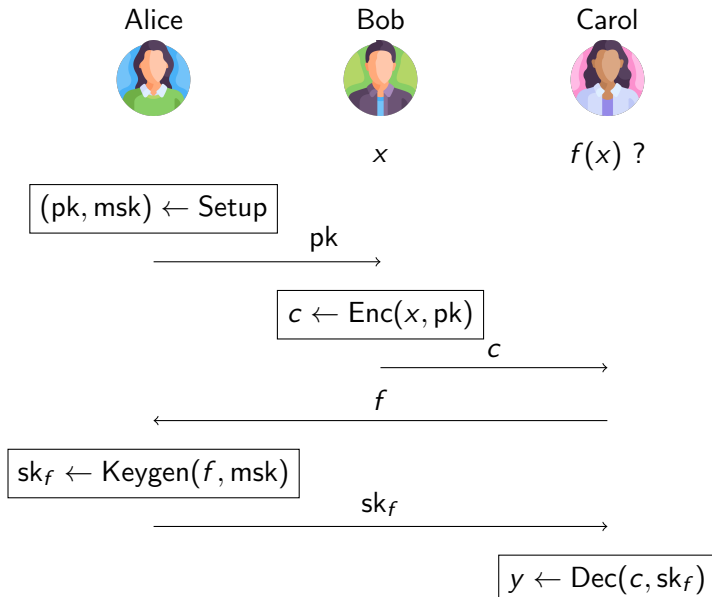
Functional Encryption



Functional Encryption



Functional Encryption



Reminder: homomorphic encryption

El-Gamal encryption

- Parameters: (\mathbb{G}, p, g)
- Keys: secret key : x , public key : $h = g^x$
- Encryption: $\text{Enc}(m) = (g^r, g^m h^r)$
- Decryption: $\text{Dec}(c_1, c_2) = c_2 c_1^{-x} = g^m$

Limitation

Decryption requires to compute a discrete log: small message space only

Theorem

$$\forall m_1, m_2, \text{Enc}(m_1)\text{Enc}(m_2) = \text{Enc}(m_1 + m_2)$$

f is the inner product with a vector \mathbf{y} .

DDH-IP

- Masterkey: $\text{msk} = \mathbf{x} = (x_1, \dots, x_l) \in \mathbb{Z}_p^l$
- Public key: $\mathbf{h} = (g^{x_1}, \dots, g^{x_l})$
- Encryption: $\mathbf{m} = (m_1, \dots, m_l) \rightarrow \mathbf{c} = (g^r, h_1^r g^{m_1}, \dots, h_l^r g^{m_l})$
- Key derivation: $\text{sk}_y = \mathbf{x} \cdot \mathbf{y}$
- Decryption: $c_0^{-\text{sk}_y} \prod c_i^{y_i} = g^{\mathbf{m} \cdot \mathbf{y}}$

User manual

- Inputs are vectors
- Computations are inner products
- Message space has to be small

Structure of the data

	∅	0
Pathology	Melanoma	0
	Leiomyosarcoma	1
	Liver cancer	0
	∅	0
Medical history	Cardiac arrhythmia	0
	Myocardial infarction	1
	Hearth failure	0
Smoke ?		0
Med. history status	Qualified	1
	Incomplete	0
	Prefer not to say	0

$\text{data} = (0, 0, \underbrace{1}_{\text{Leiomyosarcoma}}, 0, 0, 0, \underbrace{1}_{\text{Myocardial infraction}}, 0, 0, 0, \underbrace{1}_{\text{Qualified}}, 0, 0, 0)$

Query

Find all patients with Melanoma and Hearth failure

$$\mathbf{y} = (0, \dots, 0, \underbrace{1}_{\text{Melanoma}}, 0, \dots, 0, \underbrace{1}_{\text{Hearth failure}}, 0, \dots, 0)$$

The patient is compatible if and only if $\mathbf{y} \cdot \mathbf{data} = 2$.

More subtle query

Query

Find all patients with a qualified Cardiac arrhythmia

		query
...	...	0
Medical history	Cardiac arrhythmia	1
Med. history status	Qualified	1
	Incomplete	2^{10}
	Prefer not to say	2^{10}

Possible outputs are 0, 1, 2^{10} and $2^{10} + 1$

SOLUTIONS

1st Protocol: Use a functional encryption (1/11)

In the system used by the person authorised to handle health data, a key is generated.

CRO/Investigator



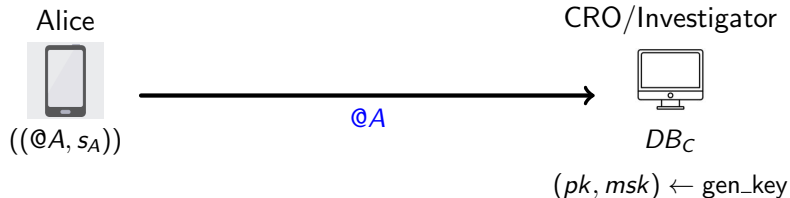
DB_C

$(pk, msk) \leftarrow \text{gen_key}$

SOLUTIONS

1st Protocol: Use a functional encryption (2/11)

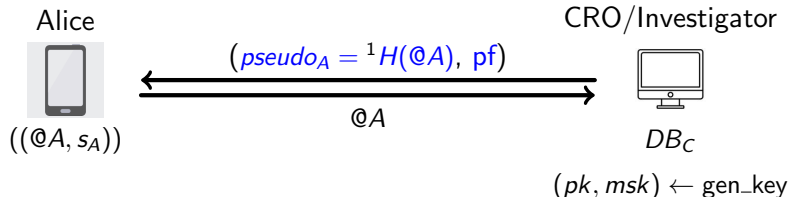
A Patient goes to be enrolled by the CRO/Investigator.



SOLUTIONS

1st Protocol: Use a functional encryption (3/11)

The CRO/Investigator saves his personal data and gives it a pseudonym and also the public key.



¹H: a function (hash) that generates a unique, fixed-length fingerprint from input data, ensuring integrity, collision resistance, and resistance to inversion.

SOLUTIONS

1st Protocol: Use a functional encryption (4/11)

New data is added for each side.

Alice



$(pseudo_A, @A, s_A, pk)$

CRO/Investigator



$DB_C \cup \{(pseudo_A, @A)\}$
 (pk, msk)

SOLUTIONS

1st Protocol: Use a functional encryption (5/11)

Use case of an enrolment in ScreenAct solution.

Alice



$(pseudo_A, @A, s_A, pk)$

Solution



DB_{sol}

CRO/Investigator

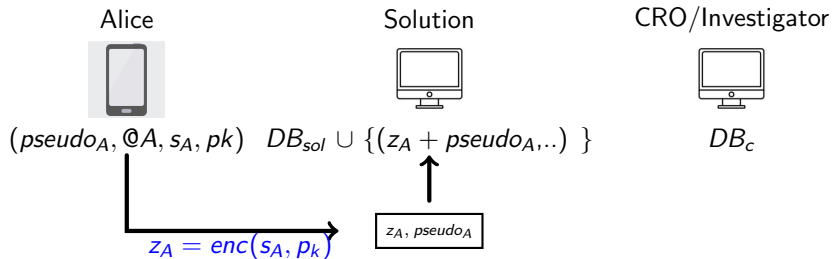


$DB_C \cup \{(pseudo_A, @A)\}$
 (pk, msk)

SOLUTIONS

1st Protocol: (Use a functional encryption 6/11)

Alice registers by encrypting her health data. This result and her contact details are added to the ScreenAct database.



SOLUTIONS

1st Protocol: Use a functional encryption (7/11)

Use case: A promotor has a request for a clinical trial

Alice



A

Solution



DB_{sol}

CRO/Investigator



DB_c

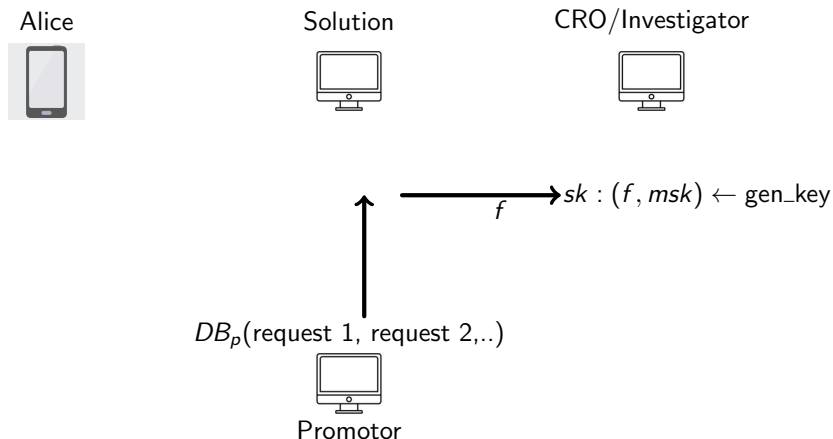


Promotor

SOLUTIONS

1st Protocol: Use a functional encryption (8/11)

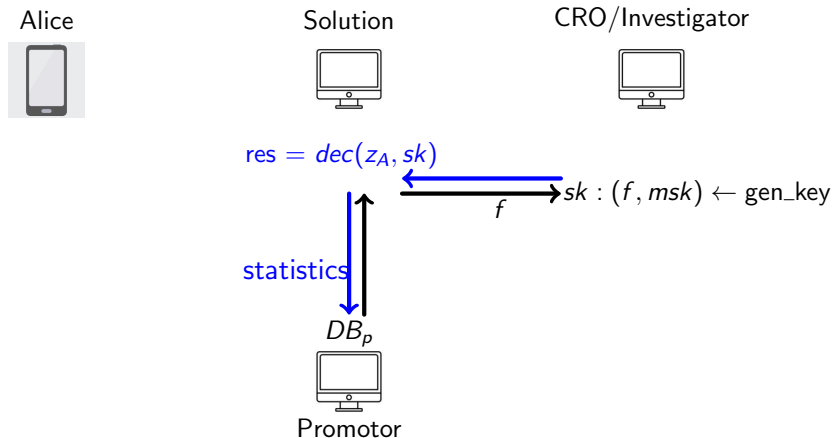
The request is sent to Screenact whom sends it to CRO/Investigator. By the way, CRO/Investigator generates a secret key to permit ScreenAct to access some statics.



SOLUTIONS

1st Protocol: Use a functional encryption (9/11)

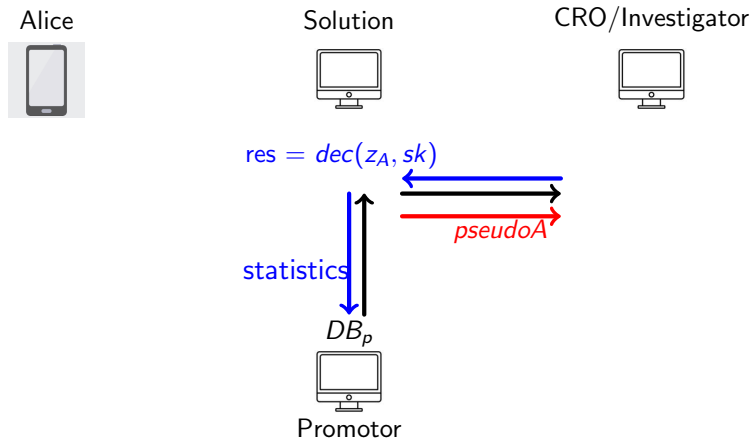
ScreenAct decrypts this secret and shares the informations needed by the promotor



SOLUTIONS

1st Protocol: Use a functional encryption (10/11)

ScreenAct decrypts this secret and share the informations needed by the promotor



SOLUTIONS

1st Protocol: Use a functional encryption (11/11)

CRO/Investigator use the filter to access the personal data of patients concerned (like Alice) and send their a notification.

Alice



Solution



CRO/Investigator



$DB_c \cup \{(pseudo_A, @A)\}$



Promotor

Properties

- CRO can only access the contact data
- Screenact can only access the encrypted health data
- Promoter can perform a wide range of operations to select patients
- Patients can suppress their data at any time

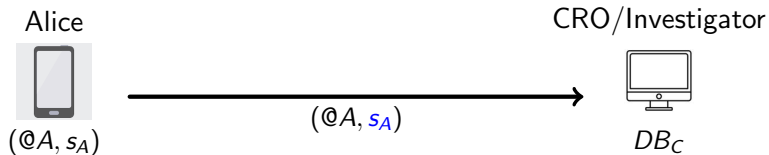
Limitations

- Requires a lot of cryptography
- High complexity

SOLUTIONS

2nd Protocol: Trust CRO/Investigator (1/6)

A Patient goes to be enrolled by the CRO/Investigator.



SOLUTIONS

2nd Protocol: Trust CRO/Investigator (2/6)

Deux databases were created.

Alice



(@ A, s_A)

CRO/Investigator



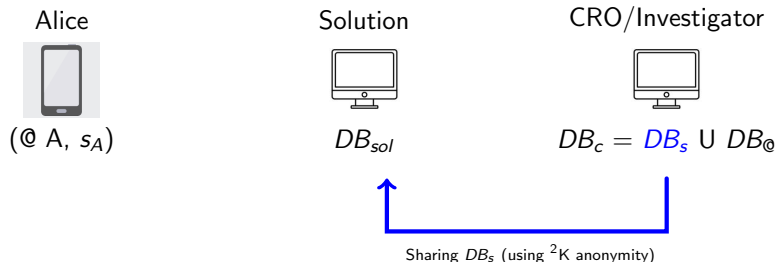
$$DB_c = DB_s \cup DB_{@}$$

Where $s_A \in DB_s, @A \in DB_{@}$

SOLUTIONS

2nd Protocol: Trust CRO/Investigator (3/6)

The database relative to the status of patients' health is anonymised.

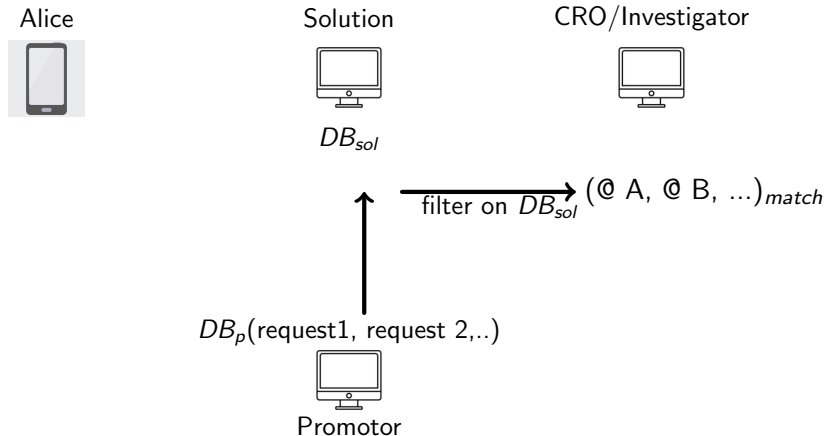


²k-anonymity is a data protection Protocol that ensures an individual cannot be distinguished from at least k other individuals within a dataset, thereby reducing the risk of re-identification.

SOLUTIONS

2nd Protocol: Trust CRO/Investigator 4/6)

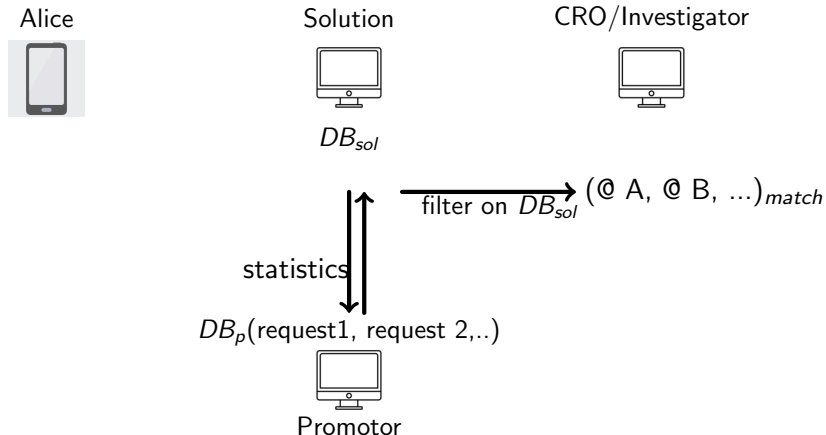
A promotor makes a request filtered by ScreenAct.



SOLUTIONS

2nd Protocol: Trust CRO/Investigator 5/6)

ScreenAct can give some statistics to the promotor



SOLUTIONS

2nd Protocol: Trust CRO/Investigator (6/6)

CRO/Investigator uses the filter to access the personal data of concerned patients (like Alice) and sends them a notification.

Alice



Solution



CRO/Investigator



Promotor



Conclusion

Two solutions proposed:

- A low complexity protocol without cryptography
- A more ambitious protocol based on a fancy primitive

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What's next ?

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