

THE UNIVERSITY OF UTAH **DEPARTMENT OF BIOMEDICAL ENGINEERING**

Hedges, D.M.^{1,2}, Duffley, G.^{1,3}, Hegman, J.C.¹, Gouripeddi, R.^{2,4}, Butson, C.R.^{1,3,5,6,7} 1. Scientific Computing and Imaging (SCI) Institute, University of Utah; 2. Department of Biomedical Informatics, University of Utah; 3. Department of Biomedical Engineering, University of Utah; 4. Center for Clinical and Translational Science, University of Utah; 5. Department of Neurology, University of Utah; 6. Department of Neurosurgery, University of Utah; 7. Department of Psychiatry, University of Utah

INTRODUCTION

Brain Stimulation (DBS) is a Deep form of neuromodulation therapy, often used in patients with intractable Parkinson's disease, tremor, Tourette's syndrome, chronic pain, epilepsy, and other neurological disorders. However, DBS is a rare treatment and medical centers have relatively few patients qualifying for DBS, meaning that most DBS studies are statistically underpowered and have chronically low n values. Medical centers regularly publish studies on DBS, trying to standardize indications and contraindications for DBS, but these studies frequently contradict each other because sample sizes are too small to represent the population. Here, we present a platform designed to combine disparate datasets from different centers. Using this platform, researchers and clinicians will be able to aggregate patient datasets, transforming DBS studies from being center-based to being population-based.

METHODS

Despite the popularity of relational databases (SQL), we have built this informatics platform on a graph database management system.

Graph databases are increasing in popularity due to their speed of information retrieval, powerful visualization of complex data relationships, and flexible data models. Our Neo4j DBMS is physically located in the University of Utah Center for High Performance Computing (CHPC) Protected Environment on a virtual machine, giving needs-based flexibility for both memory and storage



The International Neuromodulation Registry: A Graph Database Representation of Patient-**Specific Data with Combined Predictive Modeling for Neuromodulation Therapies**

Support Contributed by NIH RO1 NR014852, NIH P41 GM103545, NSF US IGNITE 10037840 to CRB and NCATS Award UL1TR001067, NIH U54 EB021973 to RG









RESULTS

Summary of Patients

of Patients	207 (Total)
	Male (138)
	Female (69)
25	Parkinson's Disease (158)
	Tremor (91)
	Dystonia (86)
	Chronic Pain (24)
	Epilepsy (11)
	Stroke (2)
ations	Globus Pallidus Internus (GPi) (35)
	Subthalamic Nucleus (STN) (108)
	Thalamus, Ventral Intermediate Nucleus (Vim)
	(56)
dels	Medtronic 3387 (215)
	Medtronic 3389 (102)
at Surgery	61.6 ± 0.82 years

CONCLUSIONS

This patient registry has been built on a nextgeneration graph database. Through a formal, but flexible, data model and ontology, this platform is able to harmonize disparate data types and allows for simple visualizations of complex data types.

. The Neo4j interface readily allows for preliminary discovery as the user can query a subgraph and drag nodes to facilitate clusters and relationships within the data.

2. Neo4j provides native database queries and algorithms to find similarities between patients. 3. Anticipated Use Cases: Cohort discovery, data and imaging download, exploratory analysis

FUTURE DIRECTIONS

Build an interface for the Butson lab optimization algorithm (Anderson et al, 2018).

Include online analysis methods such as a computational VTA generator.

NEUROMODULATION **IMAGING ACCESS** DATABASE neuromod.chpc.utah.edu