MODEL-DRIVEN AD HOC DATA INTEGRATION IN THE CONTEXT OF A POPULATION-BASED CANCER REGISTRY

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- Abstract: The major task of a population-based Cancer Registry (CR) is the identification of risk groups and factors. This analysis makes use of data about the social background of the population. The integration of that data is not intended for the routine processes at the CR. Therefore, this process must be performed by data warehouse experts that results in high cost. This paper proposes an approach, which allows epidemiologists and physicians at the CR to realize this ad hoc data integration on their own. We use model driven software design (MDSD) with a domain specific language (DSL), which allows the epidemiologists and physicians to describe the data to be integrated in a known language. This description or rather model is used to create an extension of the existing data pool and a web service and web application for data integration. The end user can do the integration on his/her own which results in a very cost-efficient way of ad hoc data integration.

1 INTRODUCTION AND MOTIVATION

The principal tasks of a population-based Cancer Registry (CR) are storing population related occurrences of cancer, differentiated monitoring and analysis of spatiotemporal trends, identification of risk groups and factors and quality assurance of health care (Batzler et al., 2008). In simple terms the CR must perform an effective and efficient transformation of "Input" (cancer reports of high quality and in a timely manner) to an "Output" (meaningful analysis and reports as well as appropriate monitoring). This also includes a couple of sub processes within the registry.

1.1 Population-based Cancer Registries

A CR needs a continuous documentation, communication and analysis process supported by software tools due to the amount and complexity of the data. In figure 1 the general system architecture of such a database-driven information system is shown. The integration of different data sources in a central data



Figure 1: Software architecture at a CR.

warehouse is shown as well as the different analysis options. These options range from reporting via continuous monitoring to spatial data mining with Gauß-Krüger coordinates. The statistical data analysis in cancer epidemiology distinguishes itself by its explorative nature and complexity of statistical operations. Therefore, it makes great demands on a data warehouse system.

Teiken Y., Rohde M. and Appelrath H. (2010). MODEL-DRIVEN AD HOC DATA INTEGRATION IN THE CONTEXT OF A POPULATION-BASED CANCER REGISTRY. In Proceedings of the 5th International Conference on Software and Data Technologies, pages 337-343 DOI: 10.5220/0003044703370343 Copyright © SciTePress Finding trends in health and the correlation of diseases and potential influencing factors are examples of such analysis. A multidimensional data model which especially allows the integration of specific statistical operations is an important precondition for the realization of a data warehouse system for the CR.

1.2 The Multidimensional Data Model for CR

Comprehensive meta information is needed for a multidimensional data model that allows for the specific requirements of epidemiologic research. Due to this need the data model cannot be modeled using Star or Snowflake schemas described in (Kimball et al., 1998). Therefore, the schema of the data warehouse used by CR is based on the special multidimensional data model MADEIRA (Modeling Analyses of Data in Epidemiological InteRActive studies) (Wietek, 1999) which considers these requirements and maps them to relational data structures.

Figure 2 shows that the dimensions, a hypercube, and a multidimensional model, are defined with qualitative attributes as views on general dimensions. Thereby, the comparison and conjunction of hypercubes is simplified. The content of a hypercube is specified by quantitative attributes. Quantitative attributes describe a range for measures and an aggregation function. The range can be given as lower and upper values. The aggregation function is needed during roll-up operations (Kimball et al., 1998) on data pools.

A hypercube is defined between a basic data pool, data basis and data cubes. The data basis defines a multidimensional view on the whole data of the data warehouse by their meta data. Data cubes on the other hand are used by statistical analysis. The qualitative attributes of data cubes describe statistical measures and contain algorithms for the derivation of measures from other qualitative attributes. The layers above hide the concrete data model from the end user.

Based on the data model the data analysis platform MUSTANG (Multidimensional Statistical Data Analysis Engine)(Koch et al., 2003) and the epidemiological analysis platform CARESS (CARLOS Epidemiological and Statistical Data Exploration System) were developed.

1.3 Ad Hoc Data Integration at a CR

In addition to the routine processes of data integration sometimes more data need to be integrated in the data warehouse system for specific statistical analysis. There are indications that social diversity or poverty increases the risk factors of contracting cancer. To follow this hint, data of drinking, eating habits and other factors like working conditions must be integrated in the analysis. For this kind of integration which is outside of routine processes, new multidimensional data structures and their relational representation must be created. Furthermore, the data itself has to be integrated into the dataset. This integration data can be in bulk or single data rate. Bulk data is mostly extracted from given data sources. These data sources are mostly simple text files. This data has to meet some quality assurances.

Until now only trained data warehouse administrators in the IT departments were able to perform the data management with the process steps explained above.

Due to personal and institutional separation between epidemiologists and data warehouse administrators the integration of new data is a timeconsuming coordination process. Furthermore the SQL scripts needed manual customizations which is also a time-consuming process. Hence, a timely integration of new data is not possible. For this reason we searched for an approach that allows epidemiologists and physicians to integrate these kinds of data on their own. In this approach we searched for a natural understandable way to define data pools and to add single and bulk data.

2 CONCEPTUAL DESIGN OF MODEL-DRIVEN AD HOC DATA INTEGRATION BASED ON A DSL

To meet the requirements an MDSD approach based on a graphical DSL has been designed and implemented (Kelly and Tolvanen, 2008).For this domain specific models has been specified and through transformations artifacts has been generated. The use of a DSL-based approach has many advantages over an MDA-based approach which makes use of UMLbased DSLs. Some of these advantages are introduced in chapter 4. Widespread opinion is that UML is easier to learn than other modeling languages (Dombrowski and Lechtenbörger, 2005). In our opinion this may be true for software developers and architects but not for epidemiologist and physicians.

In figure 3 our MDSD-based approach is sketched. If we want to integrate data into the data pool the structure of the data must be clear. There must be a description of the ad hoc data to integrate. This cir-



Figure 2: Meta model of the hypercubes and dimensions in MADEIRA.

cumstance is named information demand in figure 3. Information demand describes measures and their dimensionality. This information demand can be seen as a conceptual multidimensional model and is described by a DSL. In the terminology of MDSD this is called a Platform-Independent Models (PIM).

Based on this information demand two intermediate models are generated. The first one is called database-schema-model and the second one is called integration-schema-model. These intermediate models are generated by model-to-model transformations. The database-schema-model describes how the multidimensionally described information demand is mapped to a relational schema. Storage of multidimensional data in a relational structure is a common approach. In the terminology of MDSD this is called a Platform-Specific Models (PSM) these kind of models can be created from a PIM.

The integration-schema-model describes the data to be integrated as a single dataset. Based on these two intermediate models, artifacts are generated by model-to-code transformations. These artifacts are scripts, software components and deployment information that can be used by the epidemiologists and physicians at CR.

2.1 Graphical appearance of the DSL

For a DSL an abstract and a concrete syntax must be defined (Völter and Stahl, 2006). The concrete syntax contains the symbols of the DSL used by the end user to create the models. So the concrete syntax must be in the domain of the end user. Only in this case we can make advantages of a Domain-specific modelingbased approach. When choosing a concrete syntax for a DSL we have to decide whether to develop a new language from scratch or to use an existing language. An existing language has sometimes to be adapted for the particular case. In most cases an existing language is better engineered than a self-developed language at first. Another big advantage of using an already existing language is that users of the language are already familiar with its concepts. They know the concepts and notations and therefore need less training time. The semantic of our DSL is not explicit modeled but rather implicitly defined through transformations, generated artifacts, and the corresponding domain.

Epidemiologists and physicians in CR are familiar with multidimensional concepts. Therefore we use a well-known multidimensional modeling language for our concrete syntax. Well-known multidi-



Figure 4: Example of a concrete syntax of the DSL (unemployment figures).

mensional modeling languages are *Multidimensionale Entity-Relationship-Modell* (MERM) by (Sapia et al., 1999), *Dimensional Fact Modelling* (DFM) by (Golfarelli et al., 1998) and *Application Design for Analytical Processing Technologies* (ADAPT) by (Bulos, 1996). From these three languages we wanted to choose one as a fundament of our own DSL. Characteristics for choosing the right language were adequacy, maturity and usability. In all three languages it is possible to model cubes and dimensions. ADAPT is more flexible regarding modeling parts of dimensions. ADAPT is the most common multidimensional modeling language as said in (Hahne, 2005). Regarding usability ADAPT offers more significant symbols and notations than the other languages. One advantage of MERM is that it is based on ER-Notation. In computer science and related areas there are a lot of people who are familiar with ER which makes it easy for them to learn MERM. Thus, it is easy to address a large numbers of users with MERM. However, based on usability and spreading we chose ADAPT as concrete syntax of our DSL as we could expect that a large number of potential users are familiar with the concepts of ADAPT as multidimensional language.

ADAPT does not cover all of our use cases, e.g. it does not distinguish between qualitative and quantitative attributes. For the use of MADEIRA it is necessary to differ between these kinds of attributes. In our realization we enhanced ADAPT with these concepts. Quantitative attributes are used to represent measures. Qualitative attributes define the dimensionality of a data cube. This is used to model the granularity of the data to integrate. In figure 4 an example of the concrete syntax is given. As implementation platform we used Microsoft DSL Tools (Cook et al., 2007). Defining and modeling DSLs with Microsoft DSL Tools is done graphically. A definition includes elements and their relations between each other. In addition, elements can have a graphical representation.

2.2 Meta Models and Transformations

In the last section we described the concrete syntax of our DSL. In this section we describe our meta model, intermediate models, and our transformations.

ADAPT in its original form doesn't have a meta model. The definition of ADAPT is limited to a verbal description of its elements. The reason for this might be that the original attempt of ADAPT does not have a technical representation. The most technical representation of ADAPT that can be found so far are Microsoft Visio shapes. If we want to use ADAPT in a MDSD-based approach this is not sufficient. We have to define an additional meta model. Our goal is to map our models to the relational representation of MADEIRA so we can use MADEIRA as shown in figure 2 as our meta model.

2.3 Description of Intermediate Models

Based on an instance of a cube model two modelto-model transformations are performed. One is the database-schema-model and the other one is the integration-schema-model. In figure 5 the databaseschema-model and in figure 6 the integration-schemamodel are shown as MOF models. The databaseschema-model describes the fundamentals of relational concepts. This intermediate model describes the fact that multidimensional data in the CR data warehouse is stored in a relational database. In the MOF model it is not defined what kind of relational storage is used. It is only clear that data is stored relational. What kind of relational representation is used



Figure 5: Relational meta model.

is defined through transformation ¹. The transformation describes how multidimensional data is mapped to tables, tupels, keys and commands like *Create Table* or *Insert*. Based on a general relational model, instances can be transformed to concrete SQL commands and scripts. This circumstance is independent from relational storage of multidimensional data. This means an instance of the xdatabase-schemamodel can have a relational representation as Star Schema or Snowflake, for example. In our case we realized a transformation to T-SQL. This is used to populate MS SQL Server. Depending on the target DBMS other transformations can be realized. For evaluation we also implemented a transformation to PL/SQL to support Oracle and PostgreSQL databases.



Figure 6: Data record meta model.

Next to the database-schema-model there is also an integration-schema-model generated based on a cube model. The integration-schema-model describes data records that will be integrated in the data pool of CR. For this kind of integration we use the DTO-Pattern by (Fowler, 2002). In our case the DTO-object is called data record. A data record describes one single cell in a data cube. In our example a data

¹In this article transformations are only described schematically, because they are to extensive for this kind of publication.

record consists of an unemployment figure and additional information for gender, region and year. This is called dimensional meta data. A Numerical Datafield as seen in figure 6 is used to store numerical data, e.g. a single unemployment figure. A Numerical Datafield can be modeled with a minimum and maximum value. In our case negative values are not valid because unemployment cannot be negative. We can also exclude values higher than eight million because of the population of our federal state. Minimum and maximum are used to increase data quality. Also for quality issues we simplified the input of dimensional data. In our case no new dimensional data is created, so it is possible to only reference this kind of information. For this reason this information is modeled as enumeration. With this concept we can improve data quality even more. Currently this is sufficient for data quality. For more broaden use of this approach some more complex data quality aspects have to be taken in consideration. Based on instances of database-schema-model and the integration-schemamodel artifacts can be generated.

3 GENERATED ARTIFACTS

In this section we describe how we generate artifacts based on concrete instances of the meta model. The artifacts we use in this article are parts of the information logistic infrastructure, a web application, and an XML web service for data acquisition. A prototypical implementation has been realized. Based on the intermediate models model-to-model transformations are triggered. Here, existing source code is extended with generated schematic code. After this, the new generated source code is compiled and the generated application can be executed.

To deploy new databases within the data analysis platform, models are transformed into executable SQL scripts. These kind of scripts are identical with those that have been written by the data warehouse administrators before we introduced the MDSD-based approach. When these scripts are executed with additional deployment information databases can be integrated automatically in the data warehouse infrastructure.

We want to support single value data as well as bulk data, so we generated different kinds of integration applications. First a web service is generated. This web service accepts data based on the DTO definition. This service can be used to integrate bulk data as well as it accepts single value data. This functionality is used in the generated web application. The generated web application adds code for forms and validation code to integrate single value data.

This web application is automatically deployed at the CR. The application consists of generic, individual and schematic code, as defined in the principles of MDSD (Völter and Stahl, 2006). The generic part of the application is the same in every instance of the web application. In our case workflow functionality and the fundamentals of authentication. Some parts of the application are non-generic and cannot be generated, this is called individual code. In our case we only have interfaces for authentication as individual code in case previously unknown authentication mechanisms have to be introduced. Schematic code is that part of the application which is repeated in different ways. In the web application this is forms and data record descriptions for integration. This part of the application is describes by the integration-schemamodel.

4 RELATED WORK

Relating to ADAPT and other multidimensional modeling languages Gluchowski recently presented a prototype that can create relational structures based on ADAPT models in (Gluchowski et al., 2009). This prototype is based on a self-defined meta model comparable to our approach. However, only SQL statements for a single relational schema, the Star schema, are generated and no services for data integration are developed but there is an export to the Common Warehouse Model (CWM) (OMG, 2001). This export allows a better exchangeability of models by using an accepted standard. For instance, in (Hartmann, 2008) the CWM is used to overcome the heterogeneity of data warehouses.

Although there is no standard for conceptual modeling of data warehouses there are approaches to use MDA and MDSD within the data warehouse process. MD²A as described in (Mazon et al., 2005) is an example of using MDA in the context of data warehouses. However, these approaches are only based on UML as modeling language. Dombrowski describes in (Dombrowski and Lechtenbörger, 2005) other approaches to using UML as data warehouse modeling language. Likewise, the Multidimensional Modeling Language (MML) in (Herden, 2000) is one example of such a language.

In our opinion those approaches do not succeed in proper abstraction. Proper abstraction and consequently an alleviation in the data warehouse processes can only be reached by specifying the models within their domain and subsequently transform them to software.

5 EVALUATION AND CONCLUSIONS

First tests were performed with epidemiologists and physicians at the CR, who are experienced with multidimensional concepts. Given the graphical DSL and new tools the people were able to model and create new data integration scenarios as well as to import single and bulk data. The acceptance and comprehensibility of the graphical DSL is a result of the close cooperation between our institute and CR with its users.

Using the DSL, unemployment figures could be integrated into the data warehouse to analyze correlations between unemployment and cancer incidence. Unemployment figures made available by a statistics office, were imported as single data records of 47 rural districts. After discovering a correlation at this level the cube model of the unemployment figures was more detailed by the unemployment figures of boroughs. Eventually, the unemployment figures combined with gender data of about 1000 boroughs were integrated for further analysis as bulk data starting in 2003 by using the web service interface.

There are more evaluation scenarios that require ad hoc data integration but in addition also need new dimensions to be defined. One important task of the CR is to answer requests by rural health authorities and citizens' groups. That analysis handles with small-scale clusters of cancer. That analysis also required ad hoc integration of special data. For example population figures on basis of boroughs provided by the statistics office are integrated yearly. However, the requests by boroughs require more detailed figures, e.g. based on street sections. On the one hand those data requires research of the residents registration office and on the other hand the spatial dimension needs to be extended by, for example, street sections. In addition to modeling new data cubes the creation or extension of existing dimensions by suitable DSLs is another important challenge and field of research.

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