# TOWARD A NON INVASIVE CONTROL OF APPLICATIONS A Biomedical Approach to Failure Prediction

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Developing software without failures is indeed important. Still, it is also important to detect as soon as Abstract: possible when a running application is likely to fail, so that corrective actions can be taken. Following the guidelines of Agile Methods, the goal of our research is to develop a statistical prediction model for failures that does not require any additional effort on the side of the developers of an application; the key concept is that the developers concentrate on the code and we use the information that is naturally generated by the running application to assess whether an application is likely to fail. So the developers concentrate only on providing direct value to the customer and then the model takes care of informing the environment of the possible crash. The proposed model uses as input data that is commonly produced by developers: the log files. The statistical prediction model employed comes from biomedical studies about cancer survival prediction based on gene expression profiles where gene expression measurements and survival times of previous patients are used to predict future patients' survival. One of the most prominent models is the Cox Proportional Hazards (PH) model. In this work, we draw a parallel between our context and the biomedical one; we consider types of operations as genes, and operations and their multiplicity in the sequence as expression profiles. Then, we identify signature operations applying the above mentioned Cox PH model. We perform a prototypical analysis using real-world data to assess the suitability of our approach. We estimate the confidence interval of our results using Bootstrap.

# **1 INTRODUCTION**

Moving from proactive maintenance to preventive maintenance may reduce wastes caused by downtime costs. Therefore, much of current research is focused on predicting software failures with a sufficient lead of time before actual failure.

Failure prediction models are usually built upon historic data to predict the occurrence of failures. In general, some predictor variables are collected or estimated at the beginning of a project and fed into a model. This approach is reasonable for traditional processes.

One of the key guidelines of Agile Methods is to consider feedback, since "it is rare to find control without feedback, because feedback gives much better control and predictability than attempting to control complicated processes with predefined algorithms" (Poppendieck and Poppendieck, 2003). Therefore, an Agile failure prediction model is required to use feedback to refine itself during the development process. Moreover, to cope and even accomodate Agile Methods, a failure prediction model needs not to require any additional effort on the side of the developers of an application. Developers need to eliminate waste of time and to concentrate on the code providing direct value to the customer. Therefore, failure prediction models are required to inform of the possible crash using information that is naturally generated by the running application.

Being cognizant of the mentioned challenges, the key objective of our study can be outlined as follows: we propose a new, incremental failure prediction tool which uses data from previous iterations to refine itself at every iteration.

Our idea is to use as input for the model data that is commonly produced by developers: the log files. These files contain a series of events marked with their occurrence times. Thus, we deal with prediction of failure event(s) based on the analysis of event sequence data.

To this purpose, some techniques already exist and can be classified into design-based methods and data-driven rule-based methods. In a design-based

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method, the expected event sequence is obtained from the system design and is compared with the observed event sequence. A system logic failure can be identified by use of this comparison. Untimed and timed automata models, and untimed and timed Petri net models have been proposed in (Chen et al., 2009, Sampath et al., 1994, Srinivasan and Jafari, 1993); time template models (Holloway 1996, Pandalai and Holloway, 2000) establish when events are expected to occur basing on timing and sequencing relationships of events, which are generated from either timed automata models (system design) or observations of manufacturing systems. The major disadvantage of these methods is that in many cases, events occur randomly and thus there is no system logic design information available.

Data-driven rule based methods do not require system logic design information. These methods are made of two phases: 1) identification of the temporal patterns, i.e., the sequences of events that frequently occur, and then development of prediction rules based on these patterns (Agrawal 1996, Mannila et al., 1997), and 2) prediction of the occurrence of a failure event basing on the time relationships among events (Dunham, 2003; Klemettinen 1999; Li et al., 2007).

Survival analysis models have been also proposed to solve this issues. Code metrics are given as input to Cox PH model in (Wedel et al., 2008) to analyze failure time data from bug reports of open source software. In (Li et al., 2007) the Cox PH model is used to predict system failures based on the time-to-failure data extracted from the event sequences. Only event combinations identified as signatures are treated as explanatory variables in the Cox PH model.

We propose a mechanism for lean, non invasive control of applications. The idea is to build devices that read logs of running applications and signal the likely crash of such systems, thus adding no "muda" (Liker 2003) to the development of each application.

We propose to *collect* (Dubson 2006) data using Automated In-process Software Engineering Measurement and Analysis (AISEMA) systems (Coman et al., 2009). Then, we address the *analyse* and *decide* phases (Dubson 2006) looking at biological studies about cancer survival prediction based on gene expression profiles. The idea is to follow biomedical guidelines to:

• analyse data and identify signature operations of failure;

- assign a risk score to future sequences of operations;
- decide if these sequences will fail or not.

This mechanism looks at the running system as a "black box", meaning that we do not have any other information about the system except the log files. Altogether, the proposed approach is:

• lean, because there is no need of an explicit mechanism on the applications (Liker, 2003);

• non-invasive, because data is collected by an AISEMA system (Coman et al., 2009);

• intended to become an incremental failure prediction tool which is built after each end of a sequence of operations and uses data from previous iterations to refine itself at every iteration.

In this work, we first draw a parallel between our context and the biomedical one, since they deal with different types of entities. As a result of this parallel, we consider types of operations as genes, and operations and their multiplicity in the sequence as expression profiles. Signature operations of failures are identified applying the Cox PH model, one of the most prominent models in biomedical studies.

Then, we present a prototypical analysis using real-world data, consisting in log files collected during approximately 3 months of work in an important Italian company that prefers to remain anonymous. We propose to use Bootstrap methods to determine the confidence interval of our results

The paper is structured as follows: in Section 2, we present some background about survival analysis together with the Cox Proportional Hazard (PH) model and its applications; in Section 3, we introduce our approach to failure prediction. In Section 4, sample applications are presented. In Section 5 we discuss our results.

# 2 BACKGROUND

# 2.1 Survival Analysis

The term "survival data" is used in a broad sense for data involving time to the occurrence of a certain event. The event of interest is usually death, the appearance of a tumor, the development of some disease, or some negative experience; thus, the event is called "failure". However, survival time may be a positive event, like time to return to work after an elective surgical procedure (Kleinbaum and Klein, 2005), or cessation of smoking, and so forth.

In the past decades, applications of the statistical methods for survival data analysis have been extended beyond biomedical research to other fields, for example criminology (Benda, 2005; Schmidt and Witte, 1989), sociology (Agerbo, 2007; Sherkat and Ellison, 2007), and marketing (Barros and Machado, 2010; Chen et al., 2009).

The study of survival data has previously focused on predicting the probability of response, survival, or mean lifetime, and comparing the survival distributions of experimental animals or of human patients.

In recent years, the identification of risk and/or prognostic factors related to response, survival, and the development of a disease has become equally important (Persson, 2002).

The analysis of survival data is complicated by issues of censoring. Censored data arises when an individual's life length only is known to occur in a certain period of time (Kleinbaum and Klein, 2005).

#### 2.2 The Cox Proportional Hazards (PH) Model

Introduced by D.R. Cox in 1972 (Cox, 1972), the semiparametric Cox PH model estimates the hazard function, which assesses the instantaneous risk of failure.

The data, based on a sample of size n, consists of  $(x_i, t_i, \delta_i), i = 1, ..., n$  where:

• *x<sub>i</sub>* is the vector of *p* covariates or risk factors for individual *i* which may affect the survival distribution of the time to event;

*t<sub>i</sub>* is the time under observation for individual *i*;

•  $\delta_i$  is the event indicator ( $\delta_i = 1$  if the event has occurred,  $\delta_i = 0$  otherwise).

The Cox PH model has became the most commonly used model to give an expression for the hazard at time t with a given specification of p covariates x:

$$h(t|x) = h_0(t) e^{\sum_{i=1}^{p} \beta_i x_i}$$
(1)

The Cox PH model formula says that the hazard at time *t* is the product of two quantities:

• the baseline hazard function  $h_0(t)$ , which is equal for all the individuals. It may be considered as a starting version of the hazard function, prior to considering any of the x's;

• the exponential expression *e* to the linear sum of  $\beta_i x_i$ , where the sum is over the *p* explanatory *x* variables.

The Cox PH model focuses on the estimation of the vector of regression coefficients  $\beta$  leaving the baseline hazard unspecified. In the p < n setting (Bøvelstad, 2010),  $\beta$ 's are estimated by maximizing the log partial likelihood, which is given by:

$$l(\beta) = \sum_{i=1}^{n} \delta_i \left\{ x_i \beta - \log \left[ \sum_{j \in \mathbb{R}^{|t_i|}} e^{x_i \beta} \right] \right\}$$
(2)

The key assumption of the Cox PH model is proportional hazards; this assumption means that the hazard ratio (defined as the hazard for one individual over the hazard for a different individual) is constant over time.

This model is widely used because of its characteristics:

• even without specifying  $h_0(t)$ , it is possible to find the  $\beta$ 's;

• no particular form of probability distribution is assumed for the survival times. A parametric survival model is one in which survival time (the outcome) is assumed to follow a known distribution. The Cox PH model is not a fully parametric model. Rather it is a semi-parametric model because even if the  $\beta$ 's are known, the distribution of the outcome remains unknown;

• it uses more information than the logistic model, which considers a (0,1) outcome and ignores survival times and censoring. Therefore it is preferred over the logistic model when survival time is available and there is censoring (Kleinbaum and Klein, 2005).

#### 2.3 Applications of the Cox PH Model

The Cox PH model was first used in biomedical applications (Collett, 1994), mainly to determine prognostic factors that affect the survival time of patients to some type of diseases (mostly cancers) (Eliassen et al., 2010, Pope et al., 2002).

After the completion of DNA sequencing, the Cox PH model has been applied to gene expression data to detect novel subtypes of a disease, or to explore the potential associations between the highdimensional gene expression data and some clinical outcome.

Cancer patient survival based on gene expression profiles is an important application of genome-wide expression data. The goal is to identify the optimal combination of the gene expression data in predicting the risk of cancer death.

The most common approach to model covariate effects on cancer survival is the Cox PH model, which takes into account the effect of censored observations (Bøvelstad et al., 2007, Hao et al., 2009, Yanaihara et al., 2006, Yu et al., 2008). Gene expression measurements and survival times of previous patients are used to obtain a prediction rule that predicts the survival of future patients.

Given *n* patients diagnosed with a specific type of cancer, for each of the *n* patients the observations  $(x_i, t_i, \delta_i)$  are available, where:

•  $x_i = (x_{i1}, ..., x_{ip})$  contains the measurements of p gene expression values for patient *i*; i = 1, ..., n;

 $t_i$  is the time under observation of patient *i*;

the censoring index  $\delta_i$  keeps track of whether patient *i* died ( $\delta_i = 1$ ) or was censored ( $\delta_i = 0$ ), i.e., patient *i* was still alive at the end of the study or if she or he dropped out of the study or died from another cause.

Applications of the Cox PH model can be found in several fields of research other than biomedicine, such as criminology (Benda, 2005; Schmidt and Witte, 1989), sociology (Agerbo, 2007; Sherkat and Ellison, 2007), marketing (Barros and Machado, 2010; Chen et al., 2009), and cybernetic (Li et al., 2007). There is also an application of the Cox PH model to software data in (Wendel 2008) where, using as input code metrics, failure time data coming from bug reports have been analysed. ECHN

#### 2.4 The Bootstrap Method

In statistics the average is often used to guess the overall behavior of a population using the information coming from a sample; depending on the structure of the population, the average could then be implemented by taking the means, the median, or the mode (Fisher and Hall, 1991). However, it is interesting also to know how reliable is an estimate done with the average. To this end, other statistical properties are often used, based on the structure of the population (e.g., standard deviations, percentiles, histograms). Clearly, a reliable estimation of the confidence interval can provide a very valuable information to the user of an estimation.

To this end the Bootstrap technique has been devised (Efron, 1987). Bootstrap is a computerbased (it can be both parametric and non-parametric) method to compute estimated standard errors, confidence intervals, and hypothesis testing (Efron and Tibshirani, 1993).

The Bootstrap algorithm first creates n datasets of the same size of the original sample by randomly picking elements of it with replacement; this technique is called resampling. The number of the generated sets needs to be high; a suitable number could be 1000.

Then, the Bootstrap algorithm computes the averages of each of the newly generated datasets the specific kind of average depends from the

statistical properties of the population. The results are then used to determine the confidence interval of the population from which the original sample was drawn.

In this study we want to determine the reliability of our estimations for failures. However, we have a very limited dataset and we do not know the parameters of the random variables of interest, and the overall transformations are non-linear. Therefore, we propose to use Bootstrap method.

Each time an estimation of failure or success is done, we use Bootstrap to determine the reliability of it, that is, the percentage of times in which the results remain consistent with the original prediction.



To build devices that read logs of running applications and signal the likely crash of such systems, we have to address the four main activities reported in (Dobson et al., 2006): 1) collect, 2) analyse, 3) decide, and 4) act.

Figure 1 presents a schematic view of the proposed approach.

While the system is running, an AISEMA system (Coman et al., 2009) collects data to track the actual execution path. In this work, we look at the running system as a "black box", meaning that we do not have any other information about the system except the log files.

The monitoring process takes log data as input, analyses them, and basing on the analysis performed decides the "likely failure" of the running application and gives to the supervisor a message.

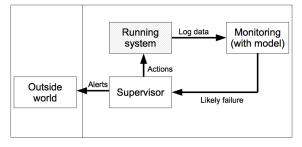


Figure 1: Schema of the devices that read logs of a running system and signal the likely failure.

The supervisor can act directly on the running system to avoid the predicted failure, or send an alert to the outside world. Possible actions could be to

abort the running system, to restart it, to dynamically load components, or to inform the running system if it was a suitably structured autonomic system (Müller et al., 2009).

The monitoring process is based on the Cox PH model. Our context seems to have the characteristics needed to apply Cox PH model; in fact, survival time and censored observations are available. Moreover, the Cox PH model needs no assumption of a parametric distribution for the event sequence data. Therefore, we can benefit of the following advantages:

• we can discover information that may be hidden by the assumption of a specific distribution (Yu et al., 2008);

• we obtain results comparable to the parametric model even without this assumption (Kalbfleisch and Prentice, 2002).

Our context is completely different from the biomedical one. Therefore, before applying the Cox PH model, we first drew a parallel between the two contexts to provide an interpretation of the biomedical entities in our case.

# **3.2** Parallel between Our Context and the Biomedical One

The idea behind biomedical studies is that different gene expression profiles may result in different survival times. In software processes, the activities performed may affect the time of survival to a failure. Therefore, in our context, types of operations in some sense play the role of genes.

The expression profile may be formed by each operation's multiplicity, since it provides information about the level of presence of the operation.

Time under observation of a sequence is defined as its length in terms of time, meaning that we evaluate it as the difference between the time stamp of the last operation and the time stamp of the first operation in the sequence.

In our case, the "observed event" is the end of the sequence because of a failure. Therefore, we have the following definition:  $\delta_i = 1$  if *i* is a failure,  $\delta_i = 0$  otherwise.

Our type of censoring is type II with a percentage of 100% (Lee and Wang, 2003), meaning that  $\delta_i$  is never equal to zero because of the end of the period of observation.

Table 1 summarizes the interpretation of biological entities in our context. In biomedical studies, gene expression measurements and survival

times of previous patients are used to obtain a prediction rule that predicts the survival of future patients. In this work, we consider types of operations as genes, and operations and their multiplicity in the sequence as expression profiles.

Table 1: Parallel between our context and the biomedical one.

Variable	Biological data	Our data		
$t_i$	Time under	Time under		
	observation of	observation of		
	patient i	sequence <i>i</i> (last		
		date – first date)		
$\delta_i$	$\delta_i = 1$ if survival	$\delta_i = 1$ for failures		
	time is observed	$\delta_i = 0$ elsewhere		
	$\delta_i = 0$ elsewhere			
$x_i =$	$x_{ij}$ is the	$x_{ij}$ is the		
$(x_{il},, x_{ip})$	expression value	multiplicity of		
T.	of gene j in	operation j in		
	patient i	sequence <i>i</i>		
i=1,, n j=1,, p				

# 3.3 Structure of the Monitoring Process

#### 3.3.1 Dimensional Reduction of the Problem

Our method consists of the following steps to get from raw logs to temporal event sequences (Zheng et al., 2009) to be used as input for the analyses:

• data are parsed to extract operations together with their associated time stamps and severities for each event in the log file;

• duplicate rows are deleted together with logs that are missing information in one or several of the fields Operation, Time stamp, Severity;

• sequences of activities are extracted: a new sequence starts either if there is a "Log in" operation or if the day changes.

Failures are defined as sequences containing at least one severity "Error". Table 2 summarizes the definitions used in this work.

Table 2: Definitions used in this work.

Notion	Definition	
sequence	A chronologically ordered set of log entries in the maximum time frame of 1 day. Two sequences during the same day are separated by a "Log in" operation	
Failure	A sequence containing at least one severity "Error"	

#### **3.3.2 Preparation of the Input for the Cox** PH Model

Each temporal event sequence *i* is described by  $(x_i, t_i, \delta_i)$ , where:

•  $x_i = (x_{i1}, ..., x_{ip})$ , and  $x_{ij}$  is the multiplicity of operation *j* in sequence *i*;

• *t<sub>i</sub>* is the lifetime of the sequence, defined as the difference between the last time stamp and the first time stamp of sequence *i*;

•  $\delta_i = 1$  when the event is "observed" (failure sequences) and  $\delta_i = 0$  elsewhere (censored observations).

#### **3.3.3 Training of the Model**

We propose to follow the guidelines given in biomedical studies (Bøvelstad et al., 2007, Hao et al., 2009, Yanaihara et al., 2006, Yu et al., 2008) to analyse data about past sequences and decide about the likely failure of the current sequence of operations of the running system. In particular, the training of the monitoring process includes the following steps:

• the Schoenfeld test (Hosmer et al., 2008; Kalbfleisch and Prentice, 2002; Kleinbaum and Klein, 2005) is applied to select the operations satisfying the PH assumption;

hazard ratios from a multivariate Cox PH model are used to identify which operations are associated to a failing end of sequences. The k operation included in the model are those operations whose multiplicity in the sequence is expected to be related to failure. Protective operations are defined as those with hazard ratio for failure lower than 1. High-risk operations are defined as those with hazard ratio for failure greater than one;

• the k-operations signature risk score *RS* is assigned to each sequence in the dataset, according to the exponential value of a linear combination of the multiplicity of the operation, weighted by the regression coefficients derived from the aforementioned Cox PH model;

• the following values are extracted: 1) *m*, the third quartile of risk scores of non failure sequences, and 2) *M*, maximum risk score of non failure sequences.

# 3.3.4 Deciding the "Likely Failure" and the Associated Confidence Interval

The k-operations signature risk score *RS* is evaluated for the new sequence, and basing on its value the sequence is defined as:

- "likely no failure" if  $RS \le m$ ;
- "likely failure" if  $RS \ge M$ ;
- "still unknown" if m < RS < M.

In order to compute estimates of confidence intervals of our dataset we propose to use the Bootstrap method of resampling. We perform a Bootstrap of 1000 times on the original data and then we consider for each sequence the resulting prediction.

The sets of the predictions is then used to determine the likelihood of correctness of the original prediction.

## **4** SAMPLE APPLICATIONS

To assess the suitability of our approach, we have performed two prototypical analysis intended to determine if it is worth pursuing the approach further. We use two datasets consisting of log files collected during approximately 3 months of work in an important Italian company that prefers to remain anonymous.

We prepared each dataset as discussed in Section 3.3.1 and Section 3.3.2. Then we assigned randomly the sequences to training set (60%) or test set (40%). Afterwards, we proceeded as discussed in Section 3.3.3 and Section 3.3.4 to 1) identify the k signature operations of failure in the training set, 2) compute the values of m and M, 3) assign the the k-operations signature risk score to each sequence in the test set, and 4) decide the "likely failure" of the sequences in the test set.

### 4.1 First Sample

Table 3 contains the training set pre-processing summary of the first sample

Table 3: Training set pre-processing summary (first sample).

Notion	Definition	N	%
Cases	Event <sup>1</sup>	28	12.9
available in	Censored	157	72.0
the analysis	the analysis Total		84.9
Cases	ases Censored before the first		15.1
dropped	event in the stratum		
Total		218	100
<sup>1</sup> Dependent variable: survival time			

Six out of the eight initial operations were satisfying the proportional hazards assumption and were therefore kept in the input dataset for the Cox PH model. Three out of the six initial operations were kept in the output of the model. Table 4 contains the output of this model, together with the definition of each operation as "protective" (or "high-risk") according to the exponential value of the regression coefficient  $\beta$ .

Table 4: Output of Cox PH model on training set (first sample).

	β	Sig	$Exp(\beta)$	definition
Operation 1	-0.40	0.013	0.961	Protective
Operation 2	0.06	0.015	1.006	High-risk
Operation 3	-0.52	0.055	0.592	protective
-2 Log Likelihood: 200.112				

The comparison between failures and non failures shows that higher risk scores have been assigned to failure sequences (Figure 2).

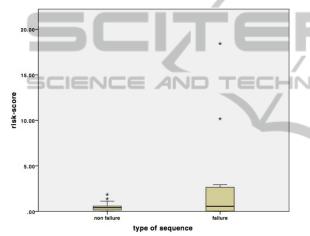


Figure 2: Risk scores in failure and non-failure sequences (first sample).

Altogether we obtained a value of m = 0.59 and M = 1.85.

In the test set, the comparison of the risk scores with m and M provides the following results: in 40% of the cases the system is able to predict correctly the failure and only in 1% of the cases a predicted failure is not a failure, which means that a message of expected failure is quite reliable. On the contrary, the prediction of non-failure is not as reliable. 50% of the failing sequences are predicted as non-failing.

#### 4.2 Second Sample

Table 6 contains the training set pre-processing summary of the second sample.

Table 5: Training set pre-processing summary (second sample).

Notion	Definition	Ν	%	
Cases	Event <sup>1</sup>	139	1.8	
available in	Censored	7445	98.2	
the analysis	Total	7584	100	
Cases	Censored before the first	0	0	
dropped	event in the stratum			
Total		7584	100	
<sup>1</sup> Dependent variable: survival time				

Six out of the ten initial operations were satisfying the proportional hazards assumption and were therefore given as input to the Cox PH model. Two out of the six initial operations were kept in the model. Table 7 contains the output of this model, together with the definition of each operations as "protective" (or "high-risk") according to the exponential value of the regression coefficient  $\beta$ .

Table 6: Output of the Cox PH model on the training set (second sample).

_		β	Sig	$Exp(\beta)$	definition
4	Operation 1	0.66	0.001	1.925	High-risk
	Operation 2	0.32	0.001	1.380	High-risk
	-2 Log Likelihood: 1746.471				

The comparison between failures and non failures shows that higher risk scores have been assigned to failure sequences (Figure 3).

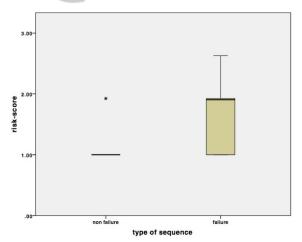


Figure 3: Risk scores in failure and non failure sequences (second sample).

In this case, we obtain a value of m = 1.00 and M = 1.93.

In the test set, the comparison of the risk scores with m and M provides the following results: in 100% of the cases the approach taken is able to predict correctly the failure, and in 99.6% of the cases the system is able to predict correctly the non

failure. Both the messages of expected failure and non failure appear to be quite reliable.

### **5** CONCLUSIONS

In this work we propose a mechanism for lean, non invasive control of applications. We use an AISEMA system (Coman et al., 2009) to collect data; then we apply the Cox PH Model following the biomedical guidelines to find the k signature operations of failure and to decide about the "likely failure" of future sequences.

Altogether, the proposed approach presents the following advantages:

• it is lean, because there is no need for an explicit mechanism on the application;

• it is non invasive, because data is collected using AISEMA systems;

- data collection is low cost;
- measurement is continuous and accurate;

• developers' efficiency is not affected by data collection since they can concentrate on their tasks as usual.

The proposed mechanism is intended to become an incremental failure prediction tool which is built after each end of a sequence of operations and refines itself at every iteration using data from previous iterations.

Results from our preliminary, prototypical analysis appear quite interesting and worth further investigations; higher risk scores are assigned to failure sequences in the test set. Overall, the proposed approach appears very effective in the identification of True Positives and True Negatives, meaning that the sequences identified as leading to a failure are very likely to lead to a failure.

Additional work is now needed to use Bootstrap methods to determine the confidence interval of our results; we are now accomplishing this task.

Moreover, we need to study more in-depth our promising mechanism to determine the generalizability of our results. To this end, we are going to study more in-depth our model, trying to generalize our results. In particular, we plan to replicate the analysis on more industrial datasets.

We are also considering the following approaches to achieve higher levels of precisions: 1) the Cox PH model with strata to analyse covariates not satisfying the PH assumption, 2) specific techniques to manage datasets with a limited number of cases (Bøvelstad, 2010), and 3) application of Bootstrap methods in order to identify the confidence interval of the prediction.

We should also investigate how other "blackbox" properties of applications (e.g., memory usage, number of open files, processor usage) can be considered to predict failures.

We will also deal with the bias introduced when calculating survival time without considering the duration of the last operation.

We will then try to predict a failure analysing only an initial portion of a sequence, to obtain an early estimation of failure, providing additional time to take corrective actions.

Finally, the proposed model could be particularly useful dealing with autonomic systems (Müller et al., 2009).



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