



#### **INTELCOMP PROJECT**

### A COMPETITIVE INTELLIGENCE CLOUD/HPC PLATFORM FOR AI-BASED STI POLICY MAKING

### (GRANT AGREEMENT NUMBER 101004870)

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### ACRONYMS

- AI Artificial Intelligence
- **CC** Climate Change
- LL Living Lab(s)
- **PA** Public Administrations
- **SME** Small and Medium Enterprise
- **STI** Science, Technology, and Innovation

#### List of Partners and their acronyms

Acronym	Full name
ARC	ATHINA-EREVNITIKO KENTRO KAINOTOMIAS STIS TECHNOLOGIES TIS PLIROFORIAS, TON EPIKOINONION KAI TIS GNOSIS
BSC	BARCELONA SUPERCOMPUTING CENTER
CITE	COMMUNICATION & INFORMATION TECHNOLOGIES EXPERTS ANONYMOS ETAIREIA SYMVOULEFTIKON KAI ANAPTYXIAKON YPIRESION
FECYT	FUNDACIÓN ESPAÑOLA PARA LA CIENCIA Y LA TECNOLOGÍA
HCÉRES	HAUT CONSEIL DE L'EVALUATION DE LA RECHERCHE ET DE L'ENSEIGNEMENT SUPERIEUR
HFRI	ELLINIKO IDRYMA EREVNAS KAI KAINOTOMIAS
NTTD	NTT DATA
OPENAIRE	OPENAIRE MAKE
SEDIA	SECRETARIA DE ESTADO DE DIGITALIZACIÓN E INTELIGENCIA ARTIFICIAL - MINISTERIO DE ASUNTOS ECONÓMICOS Y TRANSFORMACIÓN DIGITAL
TGB	TECHNOPOLIS CONSULTING GROUP BELGIUM
TILDE	TILDE SIA
UC3M	UNIVERSIDAD CARLOS III DE MADRID
ZSI	ZENTRUM FÜR SOZIALE INNOVATION GMBH / CENTRE FOR SOCIAL INNOVATION

### **EXECUTIVE SUMMARY**

The objective of the Horizon 2020 Innovation Action IntelComp project is to build a platform to analyse large volumes of textual data using Artificial Intelligence services. IntelComp adopts a Living Labs methodology. It involves public administrations and various stakeholders (i) to co-design new tools and services; and (ii) to validate the resulting platform through the co-creation of Science, Technology and Innovation (STI) policies in three different domains: artificial intelligence, climate change/energy and health/cancer.

This document constitutes the final report of IntelComp Health Living Lab (LL).

The LL aims at contributing to the development of a suite of AI models and tools for analysing STI and validating STI policies. It operates through the proper exploitation of the IntelComp results and the creation of a data space containing both raw and processed data. These goals guided the LL planning and implementation, in addition to the main objectives stated above.

To meet those objectives and goals, the IntelComp LL followed a common methodological approach that has been tailored to the needs and context of the Health LL. This includes concrete goals, policy questions and data considerations, a stakeholder engagement strategy, an alignment with the technical development, and a roadmap to capture the implementation path towards the set goals.

The Health Living Lab focused on cancer. It was welcomed by cancer research funders as a contribution to the difficult analysis of the impact of the projects they fund. The tools proposed in IntelComp, and the very broad scope of data mobilised, have given rise to considerable expectations. An extended large group representing all main French funders on cancer has been involved in the Living Lab.

Implementing the LL in order to build tools meeting these expectations constituted a rich experiment:

- Data mobilised did not answer to all expectations, being limited to the traditional dimensions of other tools (projects, publications, patents); data relating to socio-economic impact were no addressed.
- Direct interaction between technical teams and end-users on tools prototypes was difficult with our target group of policymakers. The Hcéres interface proved necessary to adapt the tools and integrate data before presenting the tools to policymakers.
- Interaction between Hcéres team and the technical teams was necessary and highly instructive. IntelComp project was essentially driven by tools development. But as the project progressed, Hcéres managed to work closely with the technical teams in order to integrate upstream stakeholders' needs.
- During the final year of the project collaborations have been very constructive and brought useful conclusions. The analysis of available data on project and publications showed the difficulties in terms of linking the different types of data. The experiment of semantic matching tools for projects and publications opened a way to resolve this issue. Thematic analyses were a good opportunity to share innovative results with policymakers on cancer research.

 The stakeholders involved in the Health LL have been particularly interested in sharing Hcéres experience of this work with new AI tools. They were interested in understanding the problems encountered and the solutions proposed as these were relevant to their own context.

## **1. INTRODUCTION**

The IntelComp project is a Horizon 2020 Innovation Action to build a platform to analyse large volumes of textual data using artificial intelligence services. IntelComp adopts a Living Labs methodology. It involves as primary stakeholder group *public administrations* and *policymakers*, as well as other relevant stakeholders groups (such as *civil society organisations*, *academia*, or *industry organisations*), to (i) co-design tools and services and (ii) validate the resulting platform through the co-creation of STI policies in three domains as specific use cases: artificial intelligence, climate change/energy and health/cancer.

This document captures the results of the IntelComp *Health Living Lab* and constitutes deliverable D6.4. The Living Lab (LL) was implemented from Q2/2022 to Q4/2023, based on a joint approach outlined by D6.1 whose purpose was to ensure that the envisioned LL objectives would be achieved.

The deliverable presents the main results and activities of the Health LL. It starts with this introduction to provide the background and plan at the outset of the LL activities. Following the methodology that each IntelComp LL adapted to its own purposes, the main part of the report comprises the key results in terms of LL activities, as well as implications on the domain of the LL and the technical development of the IntelComp tools. The final part of the deliverable concludes.

## 2. LIVING LAB GOALS

### 2.1. Project Goals

IntelComp has been devised to build a platform that can analyse large volumes of textual data using AI services. It adopts an LL methodology and involves external stakeholders<sup>1</sup> to co-create the envisioned tools and services, and to validate the resulting platform through the co-creation of Science, Technology and Innovation (STI) policies in three different domains: artificial intelligence, climate change, and cancer.

Apart from these overarching goals, further goals include the following:

- IntelComp platform shall be deployed in high performance computing environment;
- A suite of AI Models and tools for STI analysis shall be developed;
- The exploitation of the results shall be achieved through adequate use of communication and dissemination processes;
- A data space of raw and processed STI sources shall be created;
- The project strives to understand the challenges of STI policy-making;
- The project aims at analysing and validating STI policy models.

#### 2.2. Goals of the Health Living Lab

The health care system is a dynamic sector moved by multifaceted and intense medical breakthroughs. It constitutes a major concern for public policies. Hospitals deliver care and are involved in medical research, thus contributing to the transformation of care. By translation of research findings into improvement in medical care, medical innovation plays a significant role and contributes to better health, greater life expectancy and improvements in quality of life. Health research policies have also an impact in terms of new business opportunities and increased attractiveness to the next generation for careers in research and the health sector.

The Health LL focused specifically on cancer research. Cancer is the second leading cause of death globally and has been responsible for an estimated 9.6 million deaths in 2018. Moreover, many live with cancer for long periods and it is important to consider the morbidity caused by cancer. The economic impact of cancer is significant and is increasing. Only 1 in 5 low- and middle-income countries have the necessary data to drive cancer policy.

Cancer is also a topical for the Health LL because:

- It's a broad issue, ranging from basic research to clinical research, with many recent innovations in treatments and diagnosis techniques;
- It's a specific axis of Horizon 2020 and Horizon Europe with a dedicated transversal mission;
- It involves various actors: public health authorities and public research actors, but also pharmaceutical industries, non-pharmaceutical partners, and patient associations;
- It relates to several public health issues: tobacco, alcohol, food, pollution.

<sup>&</sup>lt;sup>1</sup> i.e. Public Administrations (PAs) and stakeholders from civil society organisations, academia, and industry/business organisations.

Numerous studies have been carried to describe and characterise cancer research by analysing scientific production through publications, patents and clinical trials. The Cancer LL focused on two objectives: on the one hand, help policymakers to link funded projects with scientific production and on the other hand, enable policymakers to characterise the medical and societal impact of cancer research.

IntelComp goal was to provide answers to these challenges by integrating relevant data on funded projects, scientific publications, patents, impact on medical practices as well as economic and social impacts.

The mobilisation of IntelComp's AI techniques is promising to analyse the congruence between scientific themes and the strategic orientations of research policies or expectations of civil society.

The goal was to monitor a wealth of indicators on four major pillars:

- Outputs: publications produced by program/funder, publications cited in patents, patents produced.
- Medical impact: publications cited in clinical guidelines, innovations in terms of diagnostic kits, treatments, drugs, new therapies, new companies/start-ups created, newly CE-marked medical devices or technologies.
- Economic impact by tracking innovation performance of companies (enterprises with evidence of innovation activities, number of newly Conformité européenne (devices and medical technologies bearing the CE label).
- Societal impact indicators in three dimensions: societal awareness/relevance of research, congruence of research funding with societal priorities and impact on public health

#### 2.3. Software Development Goals

The goals of the software development overlap partly with those of the LL. For instance, the collaboration with the project's stakeholders and aligning their interests with the interests and capabilities of IntelComp.

The IntelComp software development considered many services and four main tools that are of particular relevance, as the LL participants will have the opportunity to use them. The first one, the *Interactive Model Trainer* is an expert tool to (a) train new topic models, (b) edit and curate topic models, (c) train new classification models, (d) generate sub-corpora, and (e) evaluate models. The other three *STI Viewer, STI Policy Participation Portal and Evaluation Workbench* are mainly geared towards fulfilling the needs of the primary stakeholder of the LL. Table 1 characterises the main features of these tools.



	STI Viewer	STI Policy Participation Portal	Evaluation Workbench
Targeted Organisation	Public administration (Ministry), funding agency	Ministry, funding agency, academic, business and citizen organisations	Funding Agency, Evaluation Agency (if independent of the Funding Agency)
Targeted usersPolicy & STI analystPolicy offi managers organisati		Policy officer, STI managers/agents for organisations, citizens	Call Manager
Main functionality	Analyse, compare and visualise a comprehensive set of STI related KPIs	Provide a synthetic list of measurements for participatory STI policy making	Assist in the ex-ante evaluation of STI proposals for funding
Stage of the policy-making cycle	Agenda setting, monitoring and ex post evaluation	Agenda setting, monitoring and ex post evaluation	Implementation
Tool predecessor	Data4Impact	(simplified) STI Viewer	Corpus Viewer

#### Table 1: IntelComp tools – their purpose for the primary Living Lab stakeholders

The development timeline of these tools is provided in the *Platform Development Plan*. The LL planning accommodated that timeline as much as possible by aligning its stakeholder engagement activities with the development phases laid out in that plan.

## **3. METHODOLOGY**

Living Labs, as a concept, have long existed<sup>2</sup> but have more recently become popular in all kinds of research and innovation projects, including in public administration research (cf. Decker, Contreras, and Meijer, 2020). In Europe, the concept has been further developed and adapted to the needs and setup of publicly funded projects (cf. Beaudoin at al., 2022; Compagnucci, Spirgarelli, Coelho, and Duarte, 2020).

### **3.1.** What is a Living Lab?

Numerous definitions of LLs exist (Compagnucci, Spirgarelli, Coelho, and Duarte, 2020; pp. 3). Most definitions include key characteristics, namely the relation to real-life environments, the focus on stakeholders, on collaborative activities such as validation, experimentation, or testing. Sometimes, these are part of a co-creation approach. Another important characteristic is that LLs are facilitated, not managed, i.e. the team behind a LL has no authority over the lab's participants (cf. Westerlund and Leminen, 2011). Sustainability is yet another characteristic that is often crucial (cf. Leminen et al., 2016).

As a work definition, IntelComp's understanding of LL largely matches the definition offered by Schaffers and Turkama (2012): A living lab provides a setting for collaborative innovation by offering a collaborative platform for research, development, and experimentation with product and service innovations in real-life contexts, based on specific methodologies and tools, and implemented through concrete innovation projects and community-building activities.

### 3.2. Overall IntelComp Living Lab Approach

IntelComp largely followed the general approach of a LL but tweaked it such that it fit the project's setting. This includes its **policy ecosystem** which, as the figure below shows, comprises **AI**, **Cancer**, **and Climate Change**; moreover, it followed the following four **guiding principles**<sup>3</sup>:

- **Openness and transparency** open to participation of many stakeholders; open to perspectives, needs, expertise, etc.; transparency regarding goals (no hidden agenda) and expected outcomes, decisions, limitations, and expectations;
- **Empowerment** empowering LL participants by taking their inputs and contributions seriously, by enabling them to engage in the LL activities, and by helping them find answers to their (policy) questions;
- **Continuity** continuous (mutual) learning; continuous fostering of relations between participants; and
- **Practical relevance** relevance of activities, outputs, and results for LL participants in their real-life setting; relevance of results and outcomes for IntelComp.

<sup>&</sup>lt;sup>2</sup> On the origin of the concept, cf. Eriksson, Niitamo, Kulkki, et al. (2005); Dutilleul, Birrer, and Mensink (2010); or Hossain, Leminen, and Westerlund (2019)

<sup>&</sup>lt;sup>3</sup> Scholarly literature sometimes labels these differently and may include more such principles, but these are the ones that are most essential for the LLs foreseen by IntelComp.



#### Figure 1: Key elements and principles of living labs

### 3.3. Key elements of the IntelComp Living Lab

While the policy ecosystem provided the context and the principles to guide the IntelComp LL, it is the key elements that represented the building blocks of the LL. These key elements comprised the **goals**, specific **policy questions** and **data sources**, the **stakeholder** dimension (mapping, recruitment, engagement), the **co-development** of tools, the **implementation roadmap**, and the **monitoring** of the LL implementation (cf. figure above).

Although each LL tailored those key elements to their own needs, the common methodology outlines them as follows:



Т

	Each LL started with its set of domain-specific <b>policy questions</b> . During
	the LL preparation and planning phase, the LL teams provided key inputs
	to WP1 - Evidence-based Policy Modelling – which collected them and
•	triangulated them with the policy framework (Deliverable 1.1). The final
	selection of the set of policy questions was done in WP1 by the technical
Policy	teams and their assessment of the feasibility of measurements
questions	described D1.2. Those questions informed the scope of the work of the
questions	technical teams, from data sources to AI services to the user interfaces
	of the IntelComp tools.
	During the LL implementation, the initial set of policy questions was
	expanded and refined, depending on the needs and interests of the
	engaged stakeholders.



Depending on and derived from the policy questions and indicators (also being developed by WP1), were the **data** that ought to be used, processed, and presented via the user tools.

However, there was a different aspect to it, in that users may be given the means to upload their own data and possibly have them enriched and processed, to eventually use them in the given user tool. In the end, this turned out as not feasible, due to the technical complexity, which is why it was done solely on the basis of selected use cases.

## **└**intelcomp



The stakeholder dimension comprised three essential key elements of the LL<sup>4</sup>:

- a) the mapping of potential stakeholders;
- b) their recruitment as LL participants;
- c) the ongoing stakeholder engagement to generate the envisioned goals and keep the stakeholders intellectually and emotionally linked to the LL.

a) the goal of the mapping was to identify a large enough group of stakeholders. This ensured that the ongoing participation in activities was adequate, that the results were robust, and that the burden caused by the ongoing engagement were made lighter by spreading efforts across different individuals. In practical terms, the mapping essentially prepared/collected data so that the answers to the following sentence could be determined for each potential stakeholder: *We want to recruit whom, why, when, how, and (if we don't have direct access) by whom*.

b) the stakeholder recruitment was a concerted effort to <u>activate suitable individuals</u> – identified via the above-mentioned mapping – who committed to becoming involved in the LL activities, ideally regularly and throughout the lab's lifetime. While it was ultimately up to each participant to determine their own degree of involvement, the LL made a serious effort to keep their participants engaged, which leads to the next point;

c) the <u>ongoing stakeholder engagement is the core activity</u> of the LL (Mastelic, Sahakian, and Bonazzi, 2015), that assumes both a <u>longer-term perspective</u> to ensure that the LL as a whole continues to work towards its goals and a <u>short-term perspective</u> in that it focuses on the implementation of individual lab activities, such as workshops or trainings. It is important to note that it is easy to lose sight of the overall goals because the attention often lies on the next activities to be implemented, which is why the *LL implementation monitoring* was an integral part of the LL activities (more on this below).

<sup>&</sup>lt;sup>4</sup> Note that the list ordered chronologically, which reflects the work of the creation of the initial, preliminary list of stakeholders; the illustration keeps the stakeholder engagement at the centre and is flanked by the two other activities, because it is most central to the LL activities, in terms of required efforts. Also, stakeholders will be recruited on a continuous basis, i.e. the chronological order plays a negligible role.





### 3.4. Tailored Approach for Health Living Lab

#### 3.4.1. Health Living Lab: Policy questions

The area of greatest interest to the potential partners consulted by Hcéres was the analysis of the impact of funded research projects (or programmes or groups of projects) and the characterisation of 'impact pathways'. This involved monitoring and characterising the steps leading from project selection to different research results and then to their socio-economic impacts.



#### Figure 2: Health Living Lab – levels of needs

This approach made it possible to federate the expectations of various research stakeholders (funding agency, evaluation agency).

A first level of needs was to be able to characterise in a broad way the scientific production ("output") of funded projects in terms of:

- Scientific publications (as a common indicator of scientific production *stricto sensu*)
- Patents (as an indicator of technological production)
- Clinical trials (as an indicator of medical activity)

A second level of needs was to be able to identify and characterise the medical impact ("outcomes") of funded projects in terms of:

- Good practices (citations in clinical guidelines)
- New treatments (pharmaceutical industry)
- New diagnostic screening techniques (industrialists / start-ups)

The third and last level of needs was to be able to identify and characterise the social impact ("outcomes") of funded projects:

- Media impact (via the media & social networks)
- Topics of funded projects most often included in position papers
- Topics of funded projects corresponding to the expectations of patient organisations
- Positioning of projects in relation to public health data (incidence, mortality, quality of life of patients etc.)

Another dimension of impact raised by stakeholders was the impact of funded projects on the research ecosystem:

• Impact on the structuring of scientific communities

• Impact on the careers of young researchers funded

Related policy questions (cf. Table 2) explore this framework to address the impact pathways.

Policy questions	Sub-questions / Measurement	
What is the production of scientific knowledge of funded projects	<ul> <li>How many scientific publications related to funded projects and details about discipline, type of research, type of cancer</li> <li>How many scientific publications related to funded projects compare to same kind of project (same discipline and same budget)</li> <li>How many citations of publications related to funded projects compare to other publication (same discipline)</li> </ul>	
What is the technical production of funded projects	<ul> <li>How many patents related to funded projects (reference to the project or patent with a citation of a publication related to the project) with details by technologies</li> <li>How many citations of publication related to the project in patent compare to other publications (same discipline)</li> </ul>	
What are the clinical trials related to the funded projects	<ul> <li>How many clinical trials funded by the project</li> <li>How many clinical trials related to publications related to the project</li> <li>Proportion of funded project related to clinical trials compare to other projects</li> </ul>	
	How many medical guidelines citing the scientific publications related to the funded projects?	
What is the impact of funded	How many new treatments related to the project	
	How many new diagnostic screening techniques (firms / start-ups)	
What is the importance of dissemination towards different audiences	<ul> <li>Dissemination toward scientific audience (OA, project event)</li> <li>Dissemination toward larger audience (out of academics)</li> <li>"Connectivity" to society</li> </ul>	
Which societal challenges have been addressed by the selected project?	<ul> <li>Which societal challenges have been addressed by selected project (comparing topic in project's abstract and main to societal challenge)</li> <li>Which societal challenges have been addressed by scientific production linked to selected projects? (comparing topic in publication's abstract and main societal challenge)</li> </ul>	
Which policy objectives have been addressed by the selected project?	<ul> <li>Which policy objectives have been addressed by selected project (comparing topic in project's abstract and main policy objectives)</li> <li>Which policy objectives have been addressed by scientific production linked to selected projects? (comparing topic in publication's abstract and mains policy objectives)</li> </ul>	
What is the impact of project on researchers involved in the project	<ul> <li>Number of researchers involved in the project</li> <li>Number of jobs created by the project</li> <li>Careers of researchers involved in the project</li> <li>Researcher communities created by the project</li> </ul>	

#### Table 2: Health Living Lab – policy questions corresponding to the analysis of impact pathways

The analysis of the impact pathways was interesting to triangulate with the type of actors involved at each stage: public research actors, but also pharmaceutical companies (new treatments), engineering companies (diagnostic techniques), and patient associations.

Several thematic approaches related to cancer were interesting to study:

- Analysis by type of research (basic / clinical / translational)
- Identification of research cooperation (international cooperation, inter-institutions, publicprivate partnerships, etc.)
- Analysis by research discipline (e.g. epidemiology; social sciences)
- Focus on certain types of cancer (cancer location in particular) and prognosis (good / bad) or incidence (high/low)
- Possible focus on issues related to cancer: tobacco, alcohol, food, pollution, etc.
- Identification of new treatments and breakthrough technologies (genetics, biotherapies, predictive medicine, e-health)
- Characterise projects/work related to the different stages of patient care 1) prevention; 2) early detection; 3) diagnosis and treatment; and 4) quality of life for cancer patients and survivors.

#### 3.4.2. Health Living Lab: Data facilitation

It was expected that the Health Living Lab could meet the challenge of these policy questions and help final users to characterise impact pathways of their funded projects both by the broad spectrum of data mobilised (cf. Table 3) and by the capacity of the tools to connect these data (in particular publications) with the funded projects.

	Object	Data
	Policy	Europe's Beating Cancer Plan
icy	documents	Stratégie nationale de lutte contre les cancers 2021-2030
Ро	Calls	Funders listed below
	Proposals	Funders listed below
	Datasets of	European Community
founded		NIH
sts	projects, entailing titles and abstracts, budgets, partners, and detailing publications related to these projects	ANR
ojec		INCa
d Pr		FRM (Fondation pour la Recherche Médiale)
nde		ITMO Cancer
Eu		EFS (Établissement Français du sang)
		Fondation ARC
		Ligne nationale contre le cancer
S	Publications	Semantic Scholar
ntific ction		PubMed (including MESH)
iciei odu	Patents	PATSTAT
s, ad	Clinical trials	clinicaltrials.gov

#### Table 3: Health Living Lab – Main data sources identified to answer to policy-questions

	Clinical	Extract PubMed	
act	guidelines		
imp	Drugs	Drugbank	
dical	New Technologies	Industrial Web site	
Å	reemologies	Technology news derived from European Media monitoring & Meltwater ?	
	Data on public health	Global Burden of Disease	
	Jobs in Europe	Euraxess	
	for researchers		
	entrepreneurs		
t	web site of	FONDATION ARC POUR LA RECHERCHE SUR LE CANCER	
ba	associations, to	(https://www.fondation-arc.org)	
Li I	extract	LIGUE CONTRE LE CANCER (https://www.ligue-cancer.net )	
<u> </u>	positions papers	ROSE UP ASSOCIATION (https://www.rose-up.fr )	
Dug		AFSOS (https://www.afsos.org)	
ecc		Lung Cancer Europe (https://www.lungcancereurope.eu	
l and		https://www.lungcancereurope.eu/2021/12/16/lung-cancer-europe-luce- position-paper-2015)	
Socia		European Society for Paediatric Oncology (SIOP Europe or SIOPE, https://siope.eu	
		https://siope.eu/news-and-resources/position-papers)	
		EUROPEAN BREAST CANCER COUNCIL (The platform for breast cancer	
		specialists and patient advocates, https://ebccouncil.com,	
		https://ebccouncil.com/position-papers)	
		Alcimed (https://www.alcimed.com/en/position-papers/alcimed-position-	
		paper-quality-of-life)	

The crosscutting data analysis requires to be able to connect these data together and to link them to projects funded. Linking needs are shown in the Table 4.

#### Table 4: Health Living Lab – Connection between databases

Priority Type of Data		Link to projects
Level		
		Acknowledgements
	Scientific publications	Funded authors
		Funding Institutions
		Citations in the Patent of a publication related
1	Patent	to the funded project
		Funded inventor
	Clinical trials	NCT number
		Citations of publications related to the funded
	Clinical guidelines	project
	Druge	Patent?
	Didgs	Companies involved in the project
	New technologies and diagnostics	Patent?
2	New technologies and diagnostics	Companies involved in the project
		Mention of a funded researcher or funded
	Social media buzz	project in medias
		Common topic
3	Data on health	Common topic

Positions papers	Mention of a funded researcher or funded project in positions papers Common topic
patient associations' positions	Common topic

The challenge for impact path analyses was the ability to link projects to scientific outputs and then to the impacts of these outputs.

#### 3.4.3. Health Living Lab: Stakeholders

The methodology has foreseen a broad consultation of users in the framework of three working groups: one with policymakers, another with contributors from the research system (researchers, industrialists) and a third with civil society. The consultation envisaged via design thinking methods, widely used in services and industry, provided for groups of several participants with common needs.

In 2021, Hcéres met several actors of the cancer domain (researchers, analysts, decision makers, etc.) to have a first round of a gathering of needs and of analysing how these actors could be involved in a living lab.

In view of the first exchanges, it seemed difficult to implement a design thinking approach with a large group of users representing all kind of policymakers:

- It is difficult to approach and involve policymakers in a long and exploratory process
- The policymakers may have specific needs and it is not certain that a mutualised approach is relevant (at the risk of remaining only conceptual)
- The final product of the Living Lab is difficult to visualise until it has been applied to concrete needs
- IntelComp tools are very technical and will require a significant investment to understand and explore their potential

The funding agency appeared to be a particularly relevant user of IntelComp. Funders could ask questions upstream of funding (which field to be funded, which team), as well as downstream (what the scientific results of funded projects are, what is the societal impact of funded projects). All funders could share a common type of use case.

In that context, we proposed to work with two levels of engagement (cf. Figure 3):

- a group of "CORE" partners with research funding stakeholders for whom use cases related to Impact pathways of funded projects will be investigated in the Living Lab. Each use case may be considering a specific study
- a group of "EXTENDED" partners with other policymakers, academia, industry and citizen representatives who will be associated with the main results and feedback of the IntelComp platform functionalities



Figure 3: Health Living Lab – core and extended living lab partners

The Health Living Lab first involved the core group of stakeholders (C), then the extended group (E) was confronted with the result of the core group (cf. Table 5).

	Policymakers		Academia and Industry		Citizens	
Name	Funders	Other institutional partners	Academia	Industry	patient associations	Why are they to be / were they recruited
INCa	С					main national funder on cancer research
ANR	С					major public funding agency in France
FRM	с					funding agency with willing to measure their impact
ITMO Cancer	С					large views on cancer research projects
Fondation ARC	С				E	foundation (both funder and patient association)
EFS	с					involved in reflexion about programs evaluations
Ligue	с				E	foundation (simultaneously funder and patient association)
IGR			E			research and medical institution specialised on cancer
Pasteur			E			research and medical institution involved on cancer
HCSP		E				main institution involved on health program
IRESP		E				main research institution about public health
LEEM		E				representative of pharmaceutical industry
UniCancer			E			in charge of promotion of clinical and translational research on cancer
BMS				E		biopharmaceutical company deeply involved in cancer research
Takeda				E		pharmaceutical company involved on cancer research
DGOS						Department of Ministry of health
EU Mission Cancer		E				dedicated transversal mission on Cancer at European level

#### Table 5: Health Living Lab – First stakeholder mapping

#### 3.4.4. Alignment with technical development

The living lab approach was grounded on agile co-creation involving some partners bringing their technical competency, the users, and other partners acting as an interface between them, so coordination is crucial.

In the case of the Health Living Lab, implementation teams (OST, as a department of Hcéres) was structurally disjoint from technical works, which are assigned to different partners (and moreover, partners from different Members-states).

Hcéres has taken various actions to address this lack of connection with the technical teams:

#### I. Proactive communication on First Round Needs

During the first phase of consultation with external stakeholders of the Health Living Lab, Hcéres formalised several notes in order to ensure proper coordination with the technical teams in the definition of the Living Lab and the feasibility of the expectations of its stakeholders:

- The first note "Health Living Lab Needs" aimed at formalising the main use cases of the IntelComp platform in the Health Living Lab in order to discuss with the project's technical teams the feasibility of the services envisaged and to specify which tools will be available in practice when the Health Living Lab is launched in 2022.
- The second note "Statement of data need" aimed at formalising the data requirements in IntelComp platform in order to challenge the use cases submitted by Health Living lab's stakeholders.

In parallel, Hcéres got involved in the WP1 meetings, which was not scheduled in initial Description of action, in order to bring up the policy questions that external partners wish to address through the Health Living Lab and the data needed to provide a credible answer to these policy questions.

The feasibility of stakeholders' expectations as well as the data engaged to address them needed to be clarified, in order to be able to continue collaborating with the external partners involved in the Living Lab.

#### II. Alignment with technical planning

The Health Living Lab events had been planned (cf. Roadmap section below) to be aligned with technical development of the project: dates for events and workshops had been scheduled to run in parallel with the delivery dates of different IntelComp tools for better synergy.

This good articulation between the planning of the Health Living Lab and the planning of the development of the tools was essential to be able to hold successful co-creation sessions in the framework of the Health Living Lab.

#### III. Implementation of operational collaborations

Hcéres committed itself in enhanced information exchange between technics and implementation by suggesting early access for its teams to some IntelComp tools and data. The content of this collaborative work is described in part 4.

#### 3.4.5. Health Living Lab: Roadmap

The Health Living Lab objective was to first address the needs of the core group of stakeholders and exploit the potential of:

- The IMT with a group of cancer expert & technical advanced users from core stakeholders to determine the relevant thematic approaches to characterise cancer research
- the STI Viewer with a group of data analyst & decision makers from core stakeholders to study the impact pathways of programs or group of projects funded by the core stakeholders.

Secondly, the Health Living Lab planned to address the needs of the extended group of stakeholders focused on co-creation tools from STI Participation Portal.

## Figure 4: Health Living Lab – IntelComp services co creation with *core* and *extended* living lab partners



The Health Living Lab roadmap have been planned to be aligned with technical development of the project:



#### Figure 5: Health Living Lab – Roadmap

## 4. LIVING LAB RESULTS

### 4.1. Introductory remark

The Health Living Lab has developed two main types of activities.

The first type of activities were internal co-creative activities with IntelComp technical teams, which were necessary to prepare meeting with external stakeholders and adjust data and tools to their needs. These activities did not involve external stakeholders, but mobilised members of the consortium.

The second type of activities were events involving external stakeholders, that is, policymakers in cancer research who were not part of the consortium. The main goals of these events were either to get feedback on particular tools or functionalities of IntelComp and showcase the tools/functionalities, as well as the main results driven by the use of such tools.

#### 4.2. Implementation of operational collaborations with technical team

#### 4.2.1. Data exploration

First, as mentioned in part 3 (data facilitation), the broad spectrum of integrated data was a major goal to be able to study impact pathway of funded projects. It was essential to give external stakeholders engaged in the Health Living Lab accurate information about data available in the IntelComp platform and about ingestion process of new dataset.

In order to clarify the data available on funded project and publications linked to this project, Hcéres explored data that IntelComp could include in its database about the main funder's projects (INCa) via OPENAIRE. These data built on the basis of INCa data on projects were rather poor concerning publications. This is due to the lack of data on *funding acknowledgement* in publication funded by INCa, as well as the lack of reporting accessible on INCa Project. The constitution of a subset of publications related to project was not feasible using only these two methods.

#### Figure 6: data in OpenAire about INCa projects and related publications

### DONNÉES PROJETS & PUBLICATIONS INCA DANS OPENAIRE



#### 2'206 PROJETS FINANCÉS PAR L'INCA → 2'466 DOCUMENTS DONT 2'388 PUBLICATIONS

312 publications avec projet identifiés financés par l'INCa, dont 88 % concentrées sur 8 projets

SIRIC PACA-Ouest	89
SIRIC Montpellier	60
SIRIC Institut Curie	46
SIRIC Lyrican Lyon	35
SIRIC Onco Lille	24
SIRIC BRIO Bordeaux	13
SIRIC SOCRATE	11
SIRIC Lyrican manipulating cell plasticity	9
PLC1 and calcium signaling	3
RANK pathway: autocrine and	3

Figure 7: Exploration of data available about publications related to INCa project on Web of Science

PUBLICATIONS RATTACHÉES À L'INCA DANS LE WOS

### REQUÊTE SUR LE CHAMPS « FINANCEUR » →9 229 DOCUMENTS , DONT 7 482 ARTICLES ET 7 239 AVEC PMID (= DANS PUBMED)

Documents publiés entre 2008 et 2022 En moyenne 700 par an



Mais seulement 1 087 documents avec des codes de remerciement contenant le mot INCa

Hcéres tried to have more information about techniques available in IntelComp technical background to enrich this data on publications related to projects and solicited ARC, BSC and UC3M. Following this approach, Hcéres worked more specifically with UC3M, as described in the following paragraph.

## **4.2.2.** Bilateral workshop with Universidad Carlos III de Madrid to apply IntelComp graph tools to INCa dataset

Given the lack of data on publications linked to projects funded by the main cancer research funding agencies in France, Hcéres approached UC3M to see how the tools developed within the IMT framework could meet this need.

Hcéres and UC3M worked together on the application of graph analysis to this problem.

This collaboration was highly instructive and showed that semantic analysis does not work to identify the scientific output of projects whose abstracts do not include any scientific content. Indeed, some projects are intended to fund research infrastructures or the setting up of collaborations, and do not mention the scientific content of the research to be carried out. In this case, semantic analysis is not the appropriate tool for identifying the scientific production linked to these projects. On the other hand, tests have shown that interesting results could be obtained with semantic similarity between projects' abstract and publications' abstract for certain calls for projects. Unfortunately, these tools for linking projects and publications are not IMT core business, and the experiment was carried out mostly on an exploratory basis.

#### Figure 8: Exploration of semantic similarity between INCa Project and publications on Cancer



We proposed to the stakeholders to go on experimentation of IMT tools on European projects for which we have data on publications coming from reporting and acknowledgement.

## **4.2.3.** Sprint sessions and bilateral workshop to see how IMT tools can answer to the Cancer Research Funders needs

IMT internal sprints were rolled out during the months of May and June 2023 (on a weekly basis in May, and every 10 days approximately in June), under the aegis of the University Carlos III technical team. Both the AI LL (SEDIA) and the Cancer LL (Hcères) were involved in a fruitful cocreation process developed via Teams, which aimed the following objectives:

- Validate the techniques of the current IMT. Modify how functionality is presented in terms of usability ("cosmetic changes");
- Identify new functionalities that the technical team could work on after Summer 2023;
- Create –Cancer elated subsets for the following corpora: CORDIS, publications, and PATSTAT and create topic models for these subsets.

After this sprint session, Hcéres and UC3M have continued to work together to Integrate cancer publication databases and build specific patent and European funded projects databases related to cancer.

#### Figure 9: Construction of Sub Corpus on Cancer

### CONSTITUTION DES CORPUS RELATIFS AU CANCER



UC3M also created a topic model for the publications corpus and use ChatGPT to label the different topics. This work was carried out using the functionalities available in the IMT. UC3M and OST had very fruitful exchanges on the methods used to build the corpus and built the topic model. The exercise was made in a very short time without possibility to work with experts.



#### Figure 10: Topic Model on Cancer Publications

IMT tools appears to be too technical to work on it with core stakeholders of cancer Living Lab who were policymakers. However, we regret not having time to work on results of this work with stakeholders involved in the LL and also with a group of external experts. That would have been very instructive, and it is essential for robust results.

#### 4.2.4. Integration of results on STI Viewer and STI Portal

STI Viewer & STI Portal were the two main vectors to address impact pathway, which was the core interest of external stakeholders into the Health Living Lab. However, the stakeholders involved in the LL were reluctant to work on a tool intended for a large audience, and the Health Living Lab therefore focused solely on the STI Viewer.

OST asked to have a detailed comprehension of the indicators these tools will provide, and proposed to work closely with the technical teams in order to integrate upstream stakeholders' needs.

Topic model enriched indicators were calculated by UC3M and ingested in the STI viewer. Different views have been integrated on world / Europe / France publications on cancer research and publications related to European funded projects on cancer in order to compare publications from these different scopes.

For a future exploitation of the STI viewer we recommend pursuing increased flexibility to adapt indicators to stakeholder's needs.

### 4.3. External Events

#### 4.3.1. Updated Roadmap

Due to technical issues describes below, the roadmap presented in part 3 has been updated.

Consultation Workshop on STI Policy Needs	Kick Off Workshop with Funders to	First Workshop on Intelcomp Tools	Second Workshop on Intelcomp Tools
June 10 <sup>th</sup> 2021 Virtual workshop Target group : Policy makers and stakeholders in Cancer area Consultation Workshop dedicated to <u>exploring</u> <u>the needs of STI policy</u> <u>makers and policy</u> <u>stakeholders</u> in the Health-Cancer domain	Project and identify specific needs feb 14 <sup>th</sup> 2022, Virtual workshop Target group : French Funders of Cancer Research Consultation Workshop dedicated to <u>present</u> IntelComp Project and exploring which <u>specific</u> needs of funders in the Health-Cancer domain Intelcomp tools could answer	Face-to-face workshop Target group : French Funders of Cancer Research Applications of AI tools to identify publications related to funded projects First presentation of IMT and STI viewer tools	Face-to-face & virtual workshop Target group : French Funders of Cancer Research Application of <u>IMT to</u> define domain corpus and topic modelling Presentation of <u>STI</u> viewer tools applied to cancer data with a focus on projects funded by EU

#### Figure 11: External events with the core group of French funders of cancer research

First Consultation Workshop was organised by WP1

#### 4.3.2. Kick-off Event: Consultation meeting with French Funders

#### Background and objectives of the event

The objective of this meeting was to present the IntelComp project to the main French funders of research on Cancer and to offer them the opportunity to participate in the health Living Lab. This event was also the time to collect theirs needs regarding this Living Lab.

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#### Detail about event

The first event involving external stakeholders took place on line on February 14, 2022.

The participants of this event were representing all the main French funders of research on Cancer.

#### Figure 12: External participant to the Consultation meeting with French Funders



The partners expressed their interest in the IntelComp project and their desire to follow the progress of the Health Living Lab. The partners present at this presentation formed the "core group" of participants in the Health Living Lab.

#### Results relevant for the technical development & agenda setting

#### Relevant Use Cases for the stakeholders

The area of greatest interest to the partners consulted by OST during this event was the analysis of the impact of funded research projects (or programs or group of projects) and the characterisation of 'impact pathways'. This use case involves monitoring and characterising the different stages leading from project selection up to different research results and then to their socio-economic impacts as presented in Subsection 3.4.2.

This use case has been chosen to develop IntelComp tools in the Health Living Lab with the group of funders attending this first event. This use case has been described and forwarded to the technical teams.

Another use case for the IntelComp platform was mentioned later in the event which concerns the identification of scientific breakthroughs in a field of research. This use case corresponds to the Living Lab's focus on AI. Depending on the progress of the Cancer Living Lab's work, and the time and resources available, this approach has been identified to be tested in terms of it being an opportunity regarding the development of the Health Living Lab.

#### Questions raised about the data used in IntelComp

The potential partners were interested in the large scope of the data that can be mobilised with IntelComp and in the possibility of connecting these data together and linking them to projects funded by their agency.

They also asked to be more precise about the data that seemed realistic to mobilise in the health living lab. They needed to know what would be available for the next workshop. The main questions

raised by stakeholders about feasibility of their data needs forwarded to technical teams were the following :

- Which data will be available when the living lab starts (early 2022)?
- Which data has already been identified and will be integrated later (and when)?
- How will we proceed to integrate new data sets (when should we identify them, what constraints should we anticipate, who will be in charge of what?)
- Will it be possible to connect IntelComp with non-open data: user-owned data that cannot be open, such as paid databases (WoS) or confidential data (budget data, application data...)?
- What data seems to be much more difficult or impossible to integrate into IntelComp?

#### Questions raised about the tools used in IntelComp

The challenge for impact path analyses is the ability to link projects to scientific outputs and then to the impacts of these outputs. The main questions raised by stakeholders about tools available in IntelComp were the following:

- What tools are already being considered (available or in development) to make these links?
  - Links by acknowledgements in scientific publications?
  - o Links by researcher's names or institutions involved in funded project?
  - Links by publications citations in patent?
  - Links by common topic (topic modelling) or common words (lexical approach)
  - o others?
- What are the links
  - $\circ$   $\;$  that can be implemented at the start of the living lab?
  - planned but under development
  - o that seem impossible to implement

These questions about tools to link data have been forwarded to technical teams.

The analysis of the impact pathway will be interesting to cross with the type of actors involved at each stage: public research actors, but also pharmaceutical companies (new treatments), engineering companies (diagnostic techniques) and patient associations.

Several thematic approaches related to cancer have also been raised by stakeholders:

- Analysis by type of research (basic / clinical / translational);
- Identification of research cooperation (international cooperation, inter-institutions, publicprivate partnerships, etc.)
- Analysis by research discipline (e.g. epidemiology; social sciences...)
- Focus on certain types of cancer (cancer location in particular) & prognosis (good / bad) or incidence
- Possible focus on issues related to cancer: tobacco, alcohol, food, pollution...
- Identification of new treatments and breakthrough technologies (genetics, biotherapies, predictive medicine, e-health)
- Characterise projects/work related to the different stages of patient care 1) prevention; 2) early detection; 3) diagnosis and treatment; and 4) quality of life for cancer patients and survivors.

These stakeholders expectations, forwarded to the technical teams needed to be prioritized depending on their feasibility.

#### 4.3.3. Workshop on data and tools to connect projects to publications

#### Background and objectives of the event

The instruction of questions raised by involved stakeholders during the first event about available data and tools to link this data has been quite laborious. Hcéres committed itself to make a first diagnostic on available data on research projects about cancer funded by the main partner of the Living Lab (INCa) and tested with the help of UC3M the feasibility to connect projects to publications. This co-creative work with technical teams work was presented in 4.2.2.

The objective of this event was first to present the diagnostic of data available on publications relative to projects funded by INCa, crossing several sources: OpenAire, INCa databases, Publications in Web of Science. Second objective of the workshop was to present the result of this co-creative work developed with IntelComp teams (UC3M) to connect publications to projects. This event was also an opportunity to present quickly the other tools, IMT and STI Viewer, and collect suggestions for exploratory work for a next workshop.

#### Detail about event

The second event involving external stakeholders was organised face to face and took place on June, 2023 at INCa Institute. Despite it was a face-to-face event, main French Funders on Cancer could attend (INCa, FRM, ITMO, AFM) and one research institution (Institut Pasteur). Due to this organisation, the audience was smaller, but the exchanges were very rich, even though the subjects were highly technical.

## Figure 13: External participant to the Workshop on data and tools to connect projects to publications



#### Results relevant for the technical development & agenda setting

The group of funders attending the event demonstrated a strong interest in the diagnostic of available data on publications related to project from different sources. They were also very interested in the practical implementation of AI tools to connect publications and project data. Their enthusiasm extended to the valuable feedback provided by the INCa / OST team, shedding light on the capabilities and limitations of AI in this application.

The experimentation of AI tools to connect projects to publications related to these projects showed the necessity to adapt AI tools to the type of projects funded and to involve human in the

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loop to have significant results. The general impression was that this process could definitely not be fully automatized.

Figure 14: Results presented	l about connections between	projects and publications

Score	▼ Projet	🖌 Document
92,0%	Role of radiotherapy with modified fractionation in locally advanced	Altered fractionated radiotherapy in the management of head and neck
91,8%	Randomized Open Phase III Trial Testing Efficacy of Gemtuzumab Ozoga	Gemtuzumab ozogamicin for treatment of acute myeloid leukemia
91,6%	Blastic plasmacytoid dendritic cell neoplasm (BPDCN): in vitro and i	CD28/4-1BB CD123 CAR T cells in blastic plasmacytoid dendritic cell
91,6%	NORAD01 (Non inferiority study of preoperative chemotherapy without	NORAD01-GRECCAR16 multicenter phase III non-inferiority randomized t
91,5%	CBF-2018. A Dose-finding phase II Study of Gemtuzumab Ozogamicin in	Gemtuzumab ozogamicin for treatment of acute myeloid leukemia
91,5%	Clinical Benefit of Genetic Biomarkers for Guiding Treatment Decisio	Individualized anticancer therapies: which regulatory guidelines?
91,5%	Exploitation of the anti-tumor properties of alpha-galactosylceramid	Targeted Delivery of alpha-Galactosylceramide to CD8 alpha(+) Dendri
91,4%	Highthroughput technologies to drive metastatic breast cancer patien	Array CGH and PIK3CA/AKT1 mutations to drive patients to specific ta
91,4%	Randomized phase III study of a treatment driven by early PET respon	Efficacy of chemotherapy or chemo-anti-PD-1 combination after failed
91,4%	MRI-FIRST 01:Improvement in the detection of aggressive prostate can	Independent Evaluation of the Respective Predictive Values for High

Furthermore, the stakeholders emphasised the interest in tools that can precisely define corpus domains. To ensure effective utilisation, they stressed the importance of practising with real cancer data to provide relevant feedback.

However, the funders also voiced concerns about the potential risks associated with the uncontrolled dissemination of unreliable data, a growing issue amid the increasing controversies surrounding health research.

#### 4.3.4. Workshop on thematic exploration

#### Background and objectives of the event

Finalising the test on IA tools applied to link projects to publications would have need a strong enrolment of partners (stakeholders and technical teams) and appeared not to be the core of IntelComp project. The tools developed in IntelComp assume the existence of already connected data. Considering the lack of time until the end of the project, the living lab team proposed to explore IMT and STI Viewer tools on data available: publications about cancer and publications related to projects funded by European Community.

The objectives of the last event involving external stakeholders was to present the application of IMT tools to define domain corpus and topic modelling and to present STI Viewer tools applied to cancer data with a focus on projects funded by EU.

#### Detail about event

The last event involving external stakeholders was organised online in order to mobilise all the stakeholders involved in the living lab. It took place on December 11, 2023.

The workshop was attended by all the main French Funders on Cancer (INCa, ANR, FRM, ITMO, AFM and Fondation ARC) and one research institution (Institut Pasteur).

#### Figure 15: External participant to the Final Workshop of Health Living Lab



#### Results relevant for the technical development & agenda setting

The presentation of the topic model developed with UC3M was of great interest to participants. However, the results of topic labelling by ChatGPT raised questions and showed the need to adjust the process through expert feedback.

ld	Size	Docs Active	ChatGPTLabel	Word description
1	6,17%	476844	Transcription and Molecular Mutations	protein, binding, transcription, DNA, kinase, promoter, mutation, phosphorylation, mouse, cellular, myc_oncogene, suppressor, ribonucleic_acid, ras_mutations, messenger_rna
2	6,15%	737258	Biomarkers and Genomic Profiling	molecule, biomarker, biological, therapeutic, genome, signature, classification, cellular, immunity, metabolic, heterogeneity, high_throughput, profiling, proteomic, immunotherapy
3	5,57%	438605	Immunotherapy and Immune Response	immunity, mouse, dendritic_cell, cytokine, lymphocyte, inflammation, macrophage, tumor_necrosis_factor, antigen, vaccine, nk_cells, lipopolysaccharide, antibody, immunotherapy, necrosis_factor
4	5,43%	413419	Medical Imaging and Diagnosis	cystic, benign, metastasis, dog, imaging, neoplasm, surgery, mass, renal, pancreatic, computed_tomography, soft_tissue, malignant, differential_diagnosis, child
5	5,42%	363604	Nanotechnology and Drug Delivery	nanoparticle, cytotoxicity, binding, peptide, synthesis, photodynamic_therapy, vivo, doxorubicin, conjugate, anticancer, DNA, molecule, neuromuscular, fluorescence, imaging
6	4,96%	406113	Cell Death Pathways and Chemotherapy	apoptosis, protein, kinase, nf_kappab, protein_kinase_b, autophagy, phosphorylation, mitochondrial, death, cytotoxicity, caspase, cisplatin_chemotherapy, mapk, bax_activation, vivo
7	4,76%	431209	Metastasis and Treatment Outcomes	metastasis, prognosis, overall_survival, lymph_node, surgery, recurrence, resection, chemotherapy, heart_rate, bladder, adjuvant, radiotherapy, preoperative, multivariate, hazard_ratio
8	4,61%	325279	Surgical Procedures and Recovery	surgery, resection, postoperative, reconstruction, laparoscopic, endoscopy, flap_surgery, preoperative, intraoperative, excision, perioperative, pain, rectal, defect, hospital_stay
9	4,57%	313305	Quality of Life and Supportive Care	quality_life, pain, survivor, child, breast, exercise, fatigue, palliative_care, physical, interview, training, life, nurse, social, psychosocial
10	4,48%	393129	RNA metabolism	micro_rna, protein, colorectal_cancer, tissue, messenger_rna, metastasis, gastric, overexpression, ribonucleic_acid, epithelial_mesenchymal_transitions, gas_chromatographic, pancreatic, nasopharyngeal_carcinoma, prognosis, apoptosis
11	4,35%	369095	Metabolic Factors and Animal Models	rat, mouse, metabolic, diet, antioxidant, inflammation, enzyme, animal, cytotoxicity, fatty_acid, DNA, oxidative, toxicity, specie, liver
12	4,23%	391005	Angiogenesis and Tissue Remodeling	vascular_endothelial_growth_factor, angiogenesis, stem, mouse, endothelial, metastasis, migration, extracellular_matrix, integrin, hypoxia, adhesion, matrix_metalloproteinase_inhibitors, tissue, vivo, fibroblast
13	4,16%	371971	Epidemiology and Risk Factors	colorectal_cancer, mortality, smoker, confidence_interval, cohort, HIV, colonoscopy, death, heart_rate, lung, relative_risk, hazard_ratio, diet, polyp, sex

#### Figure 16: Presentation of topic extraction and labelling with Chat GPT

For example topic named "Immunotherapy and Immune Response" mixed two subjects completely different: immunotherapy and immune response.

Furthermore, this thematic exploration using topic modelling may correspond to a search for emerging topics, but it does not meet the needs of funders, who would have preferred to have a thematic analysis according to their own nomenclatures. They pointed the Common Scientific

Outline (CSO) from International Cancer Research Partnership. This analysis would have been possible with domain classifier from IMT but would have needed more time.

The second part of the workshop was devoted to analysing the research topics emerging from European community funded projects, in comparison with the research topics observed in France, Europe and the rest of the world. While this approach was of great interest to workshop participants, the lack of confidence they had in the data presented, and in particular in the various topics, made it difficult to appropriate the tools presented.





Finally, the funders once again alerted the project team to the risk of presenting results based on uncontrolled data or tools, particularly in the health sector, which is subject to a great deal of controversy.

## **5. CONCLUSION**

The Health Living Lab (LL) was met with high expectations from cancer research funders, in terms of the analysis of the impact of their funded projects. The tools proposed by IntelComp and the broad scope of the used data gave rise to those kind of expectations. Adding to this potential, the effort of the Health LL in its stakeholder engagement, a large group representing all main French funders on cancer has been involved in the lab activities.

Implementing the LL to build tools meeting these expectations constituted a rich experiment. First, the initial approach was to mobilise data from OpenAire on French cancer research funders' projects, incorporate them in IntelComp's datalake and, ideally, enrich them with additional data from both internal and external databases. However, the link between projects and publications proved to be insufficient due to the lack of data on funding acknowledgements. Hcéres tried to process with data from French cancer research funders and with AI means provided by IntelComp partners. This approach turned out to be too complex, as the technological development focused on the establishment of more fundamental services. The possibilities offered at the time were limited to European funded projects and traditional dimensions, such as information on projects, publications, or patents; data relating to socio-economic impact were not addressed at all.

Secondly, the co-construction process was complex to set up. Direct interaction between technical teams and end-users on tools prototypes was difficult with our target group of policymakers. The first tool available (IMT) was too technical to mobilise policymakers with relevance and STI Viewer tool needs to have more data ingested on cancer research to be relevant to policymakers. The Hcéres interface proved necessary to adapt the tools and integrate data before presenting the tools to policymakers.

Finally, the interaction between Hcéres team and the technical teams was necessary and highly instructive. IntelComp project was essentially driven by tools development. Health living labs definitely needed a more flexible approach. Hcéres managed to successfully establish a close collaboration with the technical teams to integrate upstream stakeholders' needs. During the final year of the project, these collaborations became constructive and produced several useful conclusions. The analysis of available data on project and publications showed the difficulties in terms of linking the different types of data. The experiment of semantic matching tools for projects and publications opened a way to resolve this issue. Thematic analyses were a good opportunity to share innovative results with policymakers on cancer research.

The stakeholders involved in the Health LL have been particularly interested in sharing Hcéres experience of this work with new AI tools. They were interested in understanding the problems encountered and the solutions proposed as these were relevant to their own context.

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