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Challenges and Trends in Clinical Data Analytics

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Abstract:*Today's technological advancements facilitated the researcher in collecting and organizing various forms of healthcare data. Data is an integral part of health care analytics. Drug discovery for clinical data analytics forms an important breakthrough work in terms of computational approaches in health care systems. On the other hand, healthcare analysis provides better value for money. The health care data management is very challenging as 80% of the data is unstructured as it includes handwritten documents, images; computer-generated clinical reports such as MRI, ECG, city scan, etc. The paper aims at providing a summary of work carried out by scientists and researchers who worked in health care domains. More precisely the work focuses on clinical data analysis for the period 2013 to 2019. The organization of the work carried out is specifically with concerned to data sets, Techniques, and Methods used, Tools adopted, Key Findings in clinical data analysis. The overall objective is to identify the current challenges, trends, and gaps in clinical data analysis. The pathway of the work is focused on carrying out on the bibliometric survey and summarization of the key findings in a novel way.*

Key words:*Data mining, Clinical data, Disease diagnosis, Health care data analytics, unstructured data.*

I. INTRODUCTION

Now a day's clinical data analytics (CDA) has become a buzz word in the field of Bio-informatics. The clinical data includes patient personal information, insurance records, doctor's prescriptions, nurse's description, electronic medical records, electronic health records, x-ray images, all types of scanned images, diagnosis records, etc. By analysis of these data, we can get some information that is very useful for some pharmacy companies, hospitals, scientists, doctors, etc. By CDA we can improve the quality of health care. CDA received a lot of attention from researchers in the past decade. CDA is a special domain-specific, initiative as it includes very sensitive issues like privacy, heterogeneity, security, financial, legal issues, etc. Applications of CDA are to forecast the future of many diseases, medicines, gene expressions, patients' health, etc. The purpose of CDA is to mine the useful information from the collected data by using the different steps of knowledge data discovery (KDD).

Clinical data mining means the extraction of useful information, analyze the information, creating a useful medical model for the required purpose from the existing clinical data. CDA can be carried out by using core data mining tasks such as clustering, association, classification, and anomaly detection. Before the application of these tasks, one has to collect the data, the data collection in CDA is a very challenging task. The first challenge is the regulatory action where some countries have the law to not disclose any patient information to the third party (Data Privacy). The second challenge is the technology as the data collected in the health industry will be in the different form some hospitals collect the patient data in the form of papers, whereas some will collect it in the digital form, whereas some data is generated through the scanning machines. The third challenge is the organizational rules; some hospitals have their own rules to make use of the data the analyzer has to follow up those rules. The fourth challenge is the data types are changing very rapidly accordingly to the data handling techniques.

Once the data collection phase is over the next step is the data preprocessing phase. Data preprocessing is one of the important steps in the CDA. Because the collected data is from different resources such as various modern medical devices such as different varieties of scan machines, wearable devices, health monitoring devices, doctor handwritten prescription notes, dietician notes, discharge summary, insurance reports, various types of test reports,

etc. The gathered data may consist of some missing data; it may incomplete data, may contain noise in it, and maybe inconsistent. The collected data is not in a structured form. As it is the combination of both structured and unstructured format, one has to prepare it according to their needs by applying different pre-processing techniques such as data cleaning, data integration and transformation, data reduction, data discretization, and concept hierarchy generation.

By clinical data mining, we can predict medical emergencies based on previous experiences and current conditions. Because of many diseases, it's required to predict the future situation. The increased demand for health services is also one of the reasons for the growth of research in CDA. It is also possible to detect fraud with insurance agencies, efficient utilization of resources of the hospital, for good diagnosis and treatment, improved drug reactions, earlier detection of diseases and to improve the customer relationship management using CDA. It is also possible to predict the patient's post-treatment such as at what time he has to readmit or can guess the medicine according to the upcoming situation. CDA helps to answer questions like who, where, and when related to the different areas of the medical field. Also, with the CDA one can take a precautionary measurement, can involve in finding a new type of tools/drugs, increase the precision of drug dosage. The CDA benefits to manage the chronic disease, it provides the care anywhere at any time, makes each day routine life easy like scheduling the appointments with doctors. With the aid of CDA, it is possible to design personalized medicine and to create a clinical decision support system.

II. Data sets for CDA

CDA has witnessed many types of datasets from the last decade as the researcher uses several kinds of datasets according to their requirements from the literature survey, it is found that data sets can be classified as the benchmark and real. Table 1 depicts the benchmark datasets available in the literature survey conducted from the year 2013 to 2019. Few other benchmark data sets are listed in [160] and are based upon clinical and Epidemiological characteristics.

Other than benchmark data sets there are many real-time datasets found in the literature. Some of the datasets identified from the year 2013 to 2019 are described in this section. In papers [39,42,47] the authors have described the real-time hospital and lab data which is a combination of structured and unstructured. In [93,98,101] the authors referred the hospital data for analyzing the health care data using big data, for predicting the sickness, and for analyzing the breast cancer data analytics respectively. In papers [106,107,109] the authors have created a decision support system for predicting the heart failure rate, discussion on early detection and prediction of cancer using the above data, and for improvement of the performance of the machine learning (ML) classifiers used diagnosis of breast cancer. In the article [30] the hospital data is utilized for the comparison of different ML algorithms for disease prediction are used. The authors in [18, 57] used the Electrocardiogram (ECG) as a data set for analyzing the health care big data with a future health condition, In [16, 89] authors used Medical Resonance Images (MRI) for the discussion on deep learning to implement medical 4.0 tool and medical data preparation ML approaches are used. The doctor consultation data were used in [12, 15, 33, 35, 54, 70, and 102] for disease diagnoses and analyses KNN and deep learning methods. The authors mentioned The Electronic Health Record (EHR) in [6, 11, 14, 37, and 102] used to mine health care data using machine learning. In [27, 50,115] the authors used Surveillance, Epidemiology, and End Results (SEER) data set for prediction, classification, and also for performance evolution of different data mining techniques of lung cancer. In [16, 18, and 57] authors specified the Electroencephalography (EEG), Electromyography (EMG) data to apply the big data techniques for prediction of future health. The data were collected from National Claims History, Durable Medical Equipment, outpatient claims for classifying lung cancer with ensemble machine learning techniques in [27]. In [61] data was collected from several institutes for a review on different clinical databases like Cornet (Patient-Centered Clinical Research Network), Open NHS(National Health Services), eICU—Philips, VistA(Veterans Health Information Systems and Technology Architecture) NSQUIP(National Surgical Quality Improvement Project). The author used some of the hospital data such as the Cleveland Clinic Foundation (CCF), Hungarian Institute of Cardiology (HIC).

Beach Medical Center (LBMC) and University Hospital in Switzerland (SUH) in [76] for analyzing Coronary Heart Disease Using Ensemble Machine Learning. The author in [29] used the National Ovarian Cancer Early Detection Program (NOCEDP) and gynecologic oncology clinic at Northwestern University (Chicago, IL, USA) data set to compare performance analysis of different ML algorithms. In [34] the author talked about the National Health and Nutrition Examination Survey (NHANES) data to Predict Diabetes Using Ensemble Perceptron Algorithm. To

predict and recognize the disease using a hybrid artificial neural network and decision tree through human blood cells the author used the data collected by Human blood detecting and counting sensor in [38].The data identified by the Korea National Health and Nutrition Examination Survey (KNHANES-VI) for heart disease risk prediction using feature correlation in [44]. In [45] the author specified the baseline data from the Longitudinal Study of Adult Health (ELSA-Brasil) for a Comparison of ML algorithms to build a predictive model for detecting undiagnosed diabetes accuracy study. The author in [64, 85] named StatLog Heart Disease data set to predict heart disease, and in [65] Parkinson's Progression Markers Initiative (PPMI) database was used for prediction of Parkinson's disease. To analyze the performance of different classification techniques to predict diabetes, the author focused The Canadian Primary Care Sentinel Surveillance Network (CPCSSN) database in [78]. In [80] the author used Truven Health Analytics data as claims data. In [90, 97, and 99] the authors used specified Entity-Attribute-Value (EAV) to develop particular medical tool MLBCD, MDL Drug Data Report (MDDR) for drug discovery, the open dataset of Chinese was from China Health and Nutrition Survey (CHNS) to diagnose diabetes using ensemble technique respectively. The authors in [102] specified clinical decision support systems (CDSS) as a data source for health data current perspectives, challenges, and potential solutions**.** In [7] the author used Magnetic Resonance Imaging (MRI) data for detecting brain cancer. For modeling clinical data, the authors associated with [10] used Case Report Format (CRF) data. In [16] the author lighted on Electronic Data Capture (EDC) to model the medical data for deep learning. HL7 virtual medical record (VMR) was used in [103] to create a clinical decision support system. In [4,104] the author quoted on Electronic Medical Record (EMR) data to create a smart disease progress model. The authors in [161] used the national institute of diabetes and digestive and kidney disease data set for detecting early diabetes.

Table 1. Different Data sets used in CDA

Name of the data set	Usability	Contributed by	Referred by
Wisconsin Diagnostic Breast Cancer (WDBC) dataset	To detect breast cancer, Diagnosis of breast cancer, to predict breast cancer	Dr. William H. Wolberg, W. Nick Street, Olvi L. Mangasarian	2019:[166], 2018: [1,49], 2017: [28] 2016: [63,64,75,82], 2015: [152,154] 2014: [153], 2013: [114,151]
University of California Irvine (UCI) heart disease dataset also known as the Cleveland database	For predicting heart diseases, To predict cardiovascular diseases.	Andras Janosi, William Steinbrunn, Matthias Pfisterer, Robert Detrano	2019:[163], 2018: [3,9] 2017:[15,20,28,30,31,36,40,48,53,54,55,157] 2016: [62-64,66,71-73, 76,77,79,81,82,84,86,88,158] 2015: [95,159],2014: [109,112]. 2013: [136]
PIDD (Pima Indian Diabetes Data Set)	For Prediction of Diabetes Mellitus, to identify diabetes,	Peter Turney, National Institute of Diabetes and Digestive and Kidney Diseases	2019:[164][165], 2018:[8] 2017: [15,20,21,32,49,51,52] 2016: [56,61,120], 2015: [94,95] 2014: [138], 2013: [137]
MIMIC II-data harnessed in	To study of patient characteristics, survival rate of patient.	From the ICUs of Beth Israel Deaconess Medical Center from 2001 to 2008	2018: [121], 2017: [119,122,123] 2016: [56,61,120], 2015: [89] 2014: [105,118], 2013: [117]
Open Access Series Imaging Studies (OASIS) is a public data base	For creating decision model of Alzheimer's disease	The Washington University Alzheimer's Disease Research Center, Dr. Randy Buckner at the Howard Hughes Medical Institute (HHMI)	2018: [145] 2017: [17] 2016: [144]
Kent Ridge Biomedical Data Repository	For analyzing cancer related issues.	Online repository	2017: [19], 2016: [142], 2015: [124] 2014: [139,140,141]
Structural Classification of Proteins (SCOP)-	To analyze protein related topics.	Founded in 1994 by Alexey G. Murzin, Steven E. Brenner, Tim J. P. Hubbard, and Cyrus Chothia	2017: [25,126], 2016: [125,147] 2014: [148], 2013: [129]
Breast Cancer Digital Repository (BCDR)- Portuguese Breast Cancer database	For breast cancer related issue analysis	"Hospital São João", University of Porto, Portugal (FMUP)	2018: [131] 2017: [155,156] 2016: [143] 2014: [109,130]
Digital Database for Screening Mammography (DDSM)-	Images for the purpose of breast related issues.	D. Kopans, and R. Moore	2018: [133,135], 2017: [134] 2016: [132], 2014: [109]
FDA-NCI Centre Database	Cancer related database	FDA-NCI	2017: [29,[50]
Lung Nodule Analysis(LUNA16)	Lung base database which is used for analysis of lung related issues.	-	2017: [41,127,128,146]
Kaggles	Contains all type of data	KAGGLE	2017: [41]

Gene expression data	For the purpose of study of genes.	T.R. Golub, et. al	2018: [1], 2017: [14],[16], [22], [37],[46] 2016: [74], 2015: [89], [96]
METABRIC	It is used to classify breast cancer into subcategories.	-	2017: [22]
The Cancer Genome Atlas—TCGA portal	Used for studying the diagnose, treat and prevent cancer disease	-	2019:[162]

III. Techniques and Methods used in CDA

Data analysis mainly includes predictive (regression and classification techniques) and descriptive tasks(association and clustering techniques). Classification is a method of assigning the label for each instance of a data, from which it could predict the particular class. Association rule mining is another technique in data mining; it takes the correlation between the two items to find out the interesting pattern in a large database. The association rule mining is used in CDA to predict several diseases. Clustering is the technique of data mining, cluster means a group of items that are similar to one another, used to group similar items in a dataset. The association between two objects is highest if they belong to the same cluster. One more method in data mining is Outlier detection, in this, if the item is not matched with any of the patterns then it is called anomaly or noise or exception. The summary of all the types of data mining techniques used in CDA is presented in table 2.

Table 2: Tasks in CDA

Techniques	**Published Papers**
Classification	
Logistic regression(LR)	[1][6][19][22][35][39][45][51][56][65] [91][100][164][165]
Naïve Bayes(NB)	[7][8][9][15][19][30][33][35][37][45][48][49][51][63][65][66][77][82][83][91][95][96][97][98][101] [108][114] [163][164][165][166]
Support Vector Machine(SVM)	[1][2][3][4][6][7][8][9][11][15][18][22][26][28][29][30][89][91][95][96][97][98][99][106][109][110][113][31][32][39][42][46][48][50][51][62][64][65][68][71][73][81][82][83][84][87][88][163][164][165][166]
Decision Tree-Based(DTB)	[1][3][4][15][19][21][22][28][29][30][31][31][32][37][38][48][49][50][52][55][56][66][72][75][78][81][85][86][95][97][107][108][95][97][107][108] [113][115][164][165][166]
K-Nearest Neighbors(KNN)	[3][9][28][29][33][37][42][45][47][48][49][54][56][64][77][82][83][96][97][107][109][162] [163][165][166]
Random Forest(RF)	[3] [6] [15][19][22][35][45][47][50][51][53][55][60][65][69][71][72][73][94] [96] [114][161][163][165]
J48	[15][21][30][49][51][66][72][75][77][78][85][86] [98] [108] [163]
C 4.5	[15][19][35][40][52][73][82][88][94][99] [108] [114][115]
Adaboost	[15][34][50][51] [65] [78] [96] [110] [166]
Neural Network(NN)	[19][44] [56][67][68][73] [108] [113][166]
Linear Discriminant Analysis(LDA)	[53] [79][83]
Bayes net(BN)	[15][19] [71] [94]
Genetic algorithm(GA)	[15][19][36] [87]
Radial Basis Function(RBF)	[15] [88]
Multilayer Perception(MLP)	[2][7][9][15][22][29][51][65][68][70][77][88] [94] [98]
Association Rule Mining	
Association analysis: apriori, éclat algorithm, Sequential rule	[10][11][87][112][11] [161]
Distributed data mining algorithm	[102]
Clustering	
K-means	[3] [12][21][22] [87] [161][164]
Estimation Maximization(EM)	[3] [13] [104]
Bayesian method	[1] [11][15][19][43] [65] [71][81] [94] [104]
Artificial Neural Network	[4] [15][22][28][29][30][36][43][45] [66] [84] [97][106] [111][113][115] [161]
Ensemble	[4][8] [27][29][39][50] [76][78]
Bagging	[15] [51] [78][86] [96]
CART	[15][47][52] [69][76] [106] [114]
Convolution Neural Network	[4][7] [14][25][37][41]
Anomaly or Outlier detection	[75]

Few of the other classification techniques found in the literature are presented as follows: The regression-based algorithms are Linear regression/Softmax Regression [2,50,], Statistical learning[74] and Principal Component analysis[81], Functional trees[15], Kstar/ ID3[15], Quadratic Discriminate Analysis [22], Generalized Linear Model[83], Zero R [77]. The neural network-based algorithms are Fuzzy KNN (FKNN) [31][64], Ensemble Perceptron Algorithm (EPA) [34], Probabilistic Neural Network (PNN) [42], Multivariate Adaptive Regression Splines (MARS)/ Tree-Model from Genetic Algorithm (TMGA) [55], Deep learning [11][37]. The survey reviews that the usage of these techniques is found to be is very sparse. Some of the other clustering algorithms are found in the literature survey are as follows: SELDOM (ensemble of Dynamic logic-based Models) [1], PAM(Partition around medoids, K-medoids, ROCK(robust clustering algorithm), DBSCAN(density-based clustering algorithm) [3], Kernel methods, Joint Clustering And Classification (JCC)[6], Trajectory clustering[11], Fuzzy logic[15], Adaptive Neuro-Fuzzy Inference System (ANFIS)[70], Farthest First clustering[75]. The survey analysis tells that the adoptions of these algorithms are very less. The analysis of these techniques is as shown in fig 1. It is found that very sparse literature is found in outlier detection.

IV. Tools and Programming Environments adopted in CDA

Clinical data is a combination of both structured and unstructured; to handle such data it requires special kinds of tools. To analyze the clinical data machine learning provided many tools such as R, TensorFlow, TANAGRA, WEKA, MATLAB, SVMLib, Apache Spark, Stata, Jaspersoft Splunk, etc. From the literature survey, it is found that WEKA is best suited for CDA.In paper [3] author using R tool for concluding the efficient technique for predicting heart diseases using K-means, K-modes, K-modes, PAM, CLARANS, CLARA, FCM, Ward's, ROCK, DBSCAN, OPTICS, EM, SVM, Decision tree, Random Forest and Knn. Authors in [28] discussed a comparison study on performance measurements of various machine learning techniques such as SVM, Decision Tree, Random forest, and KNN using R tool for breast cancer classification. The author in [32] depicted the prediction of diabetes in women using PIMA dataset by applying SVM using the R tool. In [55, 84] authors are using R platform prediction of heart disease using machine learning like SVM, decision tree, and KNN. Authors in [91] discussed the applications of machine learning to forecast postoperative complications. In [102] writer discussed health data analytics using a big data approach in the current perspective, challenges, and solutions also their authors used the R tool to overcome the weakness of the Hadoop. TensorFlow tool is used for building ML model using a deep learning method. This has used in [7, 20] to detect brain cancer and to identify diabetes in respective papers. TANAGRA has used in [9] to improve prediction of the heart attack using a feature selection method.Statistics of the work done in CDA from 2013-2019 is presented in figure 1 and briefed under the following headings.

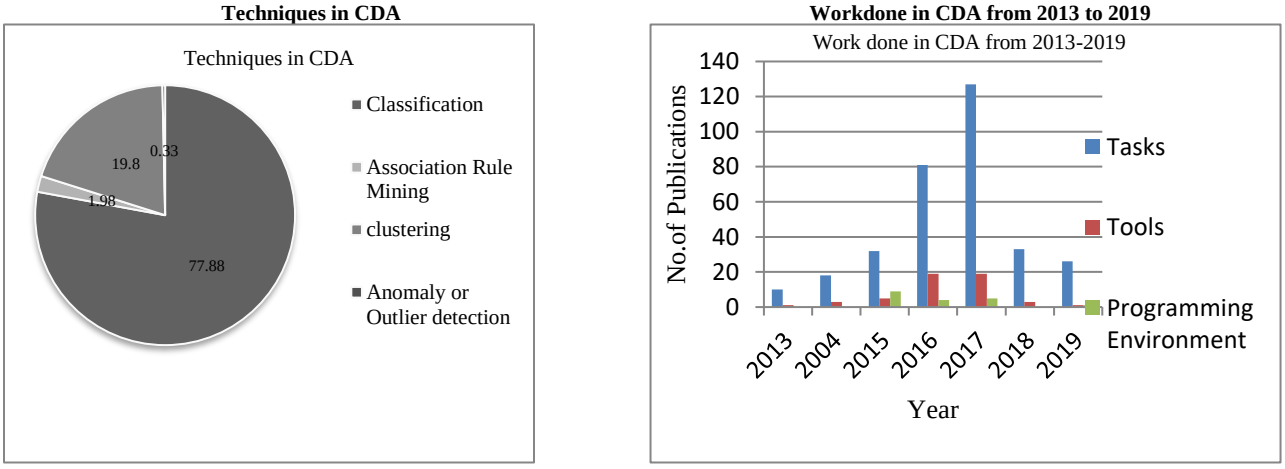

Fig 1 Techniques in CDA and Workdone in CDA from 2013 to 2019

WEKA is the most popular tool in the healthcare data analysis field. For more different healthcare applications this tool has been using still today because it provides all kinds of tools required for data mining such as data preprocessing, regression, classification, and visualization. Just in one word its collection of algorithms. The authors in [15,77] surveyed to diagnose the diseases using machine learning; they found this tool as the best tool and also in

[30] to make a comparative study of different machine learning algorithms for the prediction of diseases they considered the WEKA as one of the tools also in [16,59] authors talked on a tool called as Medical 4.0 and PredictT-ML tool for preprocessing the medical data which is ready to use by deep learning technique. The authors in [21, 35, 47, 49, 51, 62, 78, 94, 95, 98] discussed on diabetes such as prediction, diagnosis, and performances analysis of different machine learning algorithms for prediction of diabetes, in [48, 72, 88] authors discussed on prediction and diagnosis of heart-related diseases, the discussion on detection of breast cancer also carried out in [71, 75, 82, and 96,109,115]. This tool has been used in [53, 69, and 79] for detecting thyroid disease.WEKA was also utilized for outlier detection in [63, 75]. In the paper [66] authors discussed the liver disorder detection in [68,81] general approaches using machine algorithms for health care industry issues discussed.

MATLAB supports a large set of algorithms and visualization tools, because of these features in health care data mining MATLAB is widely used namely in [15] for diagnosing various diseases, in [70] for prediction of diabetes, in [84] the prediction of heart disease. RapidMiner is having a very rich and powerful graphical user interface that is well suited for the predictive analysis. The authors in [15] used RapidMiner to diagnose various diseases.Caffe is a deep learning framework. In [16] the author used the Caffe tool for designing a Medical 4.0 tool for preparing medical data for machine learning purposes. KEEL (Knowledge Extraction based on Evolutionary Learning) is an open software tool that can be used for many data mining tasks such as regression, classification, etc. In [88] KEEL was used for efficient prediction of heart diseases using machine learning techniques. STATA is a basic command-oriented package, which is most suitable for analysis, graphical visualization, and data management. It is user friendly and has many library functions. It provides a wide range of operations supported by data mining such as regression modeling, cluster analysis, multivariate methods, ANOVA (analysis of variance), etc. The authors in [105] discussed the handling of the clinical data from the perspective of big data their STATA has been used for the analysis of clinical data. Multi-dimensional Text Analytics Tool (MUTATO) is using for text analysis. In [24] MUTATO was used for the study of the supervised machine learning of the online forms for diabetes patients.

Table 3: Tools in CDA

Tool name	**About Tool**	**Referenced by**
R	Open source Developed by Bell lab,By Ross Ihaka and Robert Gentleman in 1993	[3] [28] [32] [55] [84] [91] [102]
Tensor Flow	Open source, developed by Google Brain Team in 2015.	[7][20]
TANAGRA	Free suite, by Ricco Rakotomalala in June 2003	[9]
WEKA	Free software, Waikato Environment for Knowledge Analysis (Weka),developed at University of Waikato, New Zealand at 1993	[15] [16] [21] [30] [35] [47] [48] [49] [51] [53] [59] [62] [63] [66] [68] [69] [71] [72] [75] [77] [78] [79] [81] [82] [88] [94] [95] [96] [98] [109] [115]
MATLAB	matrix laboratory, by Cleve Moler at University of New Mexico, in 1970	[15] [70] [84]
RAPIDMINER	By Ralf Klinkenberg, Ingo Mierswa, and Simon Fischer, in 2001	[15]
Caffe	Open source, Convolution Architecture for Fast Feature Embedding, developed at UC Berkeley, by Yangqing Jia	[16]
KEEL	Open source tool, Knowledge Extraction based on Evolutionary Learning,	[88]
Stata statistical package	In 1985 by StataCorp,	[105]
Multi-dimensional TextAnalytics Tool (MUTATO)	-	[24]
Jupyter Note book	Open tool evolved in 2014	[164]

Table 4: Programming Environment

Programming environment	**About Tool**	**Referenced by**
Apache Singa	In 2014,	[16]
Torch	Open source, by Ronan Collobert, KorayKavukcuoglu, Clement Farabet, in October 2002	[16]
Theano	Theano is a Python library that lets you to define, optimize, and evaluate mathematical expressions, especially ones with multi-dimensional arrays (numpy.ndarray)	[16]
LabKey	Apache license, atFred Hutchinson Cancer Research Center by labkey	[16]
SVMLib	Open source, by Chih-Chung Chang and Chih-Jen Lin	[16] [62]
Apache Mahout	Apache Software Foundation,	[58]
Apache Spark	Open source, By MateiZaharia started at 2009, clustering computing framework.	[58] [59]
MongoDB	Free downloading, used for Classification Discovery, Cluster Discovery, Regression Discovery, Association Discovery, Data Visualizations, Discovery Visualization	[89]

Hadoop	Open source Started at 2007, Doug Cutting and Mike Cafarella,	[89]
Hive	Apache license, its data warehouse	[92]
Vertica	In 2005 by Michael Stonebraker and Andrew Palmer,	[92]
JAQL	Open source, json query language	[92]
AVRO	Open source, by by Doug Cutting,	[92]
IbmSpss 20.0.	By IBM Corporation in 1968 by Norman H. Nie, Dale H. Bent, and C. Hadlai Hull,	[93]
GoMiner		[89]

V. Key Findings in CDA

The major key observations of the literature work carried out in the present work is summarized asfollows.

1**. Data Privacy:** Maintaining data privacy is one of the main challenging issues in CDA. The collected data has to be saved in a way that the information regarding the patient should not be revealed

2. **Heterogeneity of data:** The data sources required for CDA are heterogeneous, involve many different kinds of data which are generated by several resources as discussed in the above topics. It is not so easy to handle such data because of such a reason it requires a special technique. Handling the heterogeneous data is only a big challenging issue.

3. **Technological support:** To handle the heterogeneous data, to maintain privacy in a collected data, for pre-processing a data, etc. The CDA requires special kinds of technical support. But to handle the big data there are already many kinds of tools are available in the market but those are not exactly suitable for CDA.

4. **Societal issues:** By analyzing the clinical data it is possible to predict the future regarding the health-related issues of patients which is very much required in the present lifestyle of people. According to this prediction, one can easily maintain their health and diet. Also, pharmacy companies can also produce the required medicine for a specific area.

5. Scalability of data: In CDA the data plays a very vital role as already we had seen. The reason behind the scalability of data is the data collection techniques differ along with the technology. Due to the usages of different types of instruments for disease diagnosis, for maintaining the patient's records, for various lab tests, etc.

6. Tasks and tools: The main key finding in clinical data analysis is the tasks and tools, as above we had seen that there are many different techniques in data mining but in the field of CDA the classification has been used by many authors, there still scope to make utilization of the clustering, association rule mining and detection of outlier data. Similarly, the WEKA tool has used widely in several papers. But in current days there are many advanced tools emerging in a market it has to check whether those tools are suitable for the CDA or not has to be check.

VI. Conclusion

The exhaustive literature survey finds that in CDA the data privacy plays a very important role as in many countries the hospitals collect the data from the patients and that data should be maintained with high privacy because they have abounded with some law issues like HIPPA Patient Safety and Quality Improvement Act (PSQIA) HITECH Act, (PIPEDA) Personal Information Protection and Electronic Documents Act, Russian Federal Law on Personal Data, etc. So it's very important to maintain data privacy in CDA. Data preparation is the main task in data analysis. As in CDA, the data is collected by different sources and is unstructured. Data preparation for further data analytics is a major step.So, it's required to apply some of the pre-processing techniques for the preparation of clinical data. Digitalization in the medical field resulted in storing the voluminous data and can be handled using big data approaches. It is required to apply the concepts and techniques of big data but with some modification due to the nature of the clinical data. As discussed, the clinical data is a special type of data and it requires special types of tools to handle.

VII. Future Scope of the work

The purpose of the bibliometric survey conducted is to find the gaps in CDA. It is observed from the literature survey that though data mining techniques play a prominent role, but the **anomaly detection** method is less attended by the researchers for the survey period. Very sparse literature is found. Future work is more concentrated to explore the possible method in anomaly detection in the clinical data. It is necessary to detect the anomaly in clinical data sets so that the errors in the diagnoses are detected and treated fast.

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