



KU LEUVEN



# An atypical career path: from engineering and bioinformatics to social security physician in a health insurance fund

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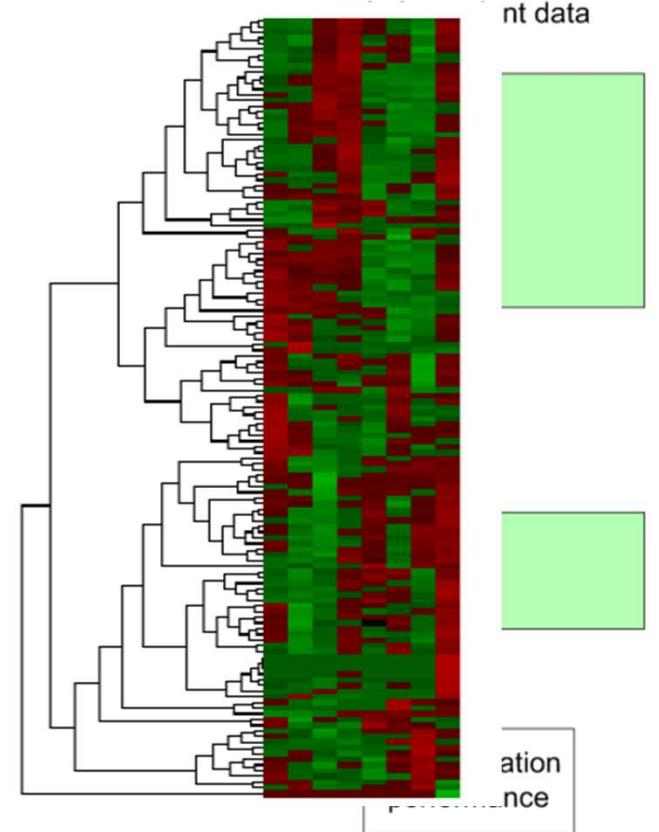
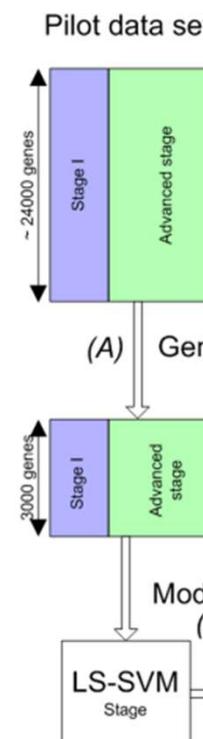
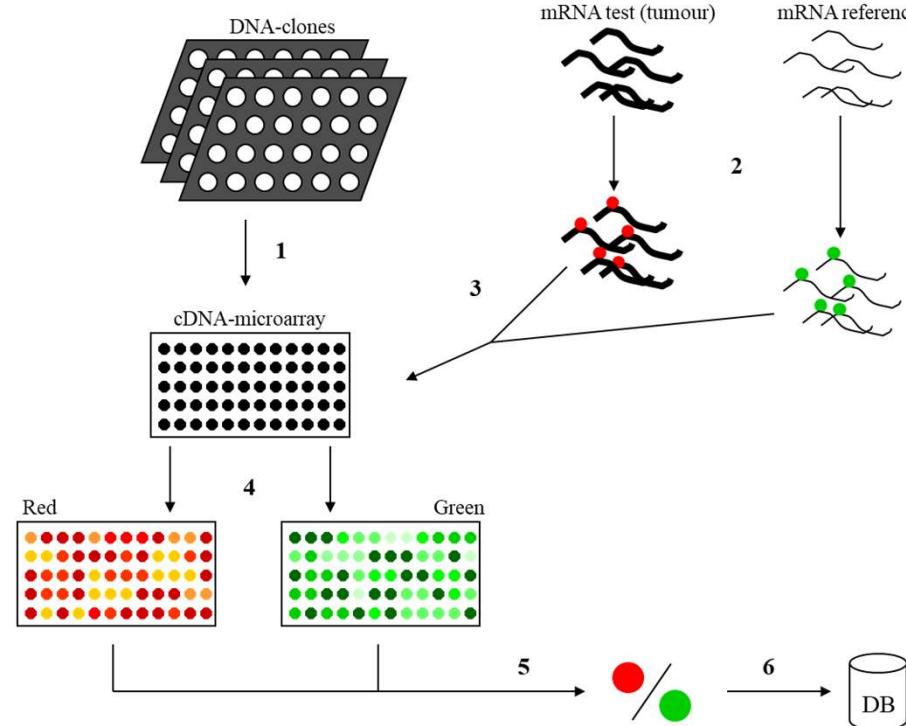
Frank De Smet, 08/07/2022

# Before PhD

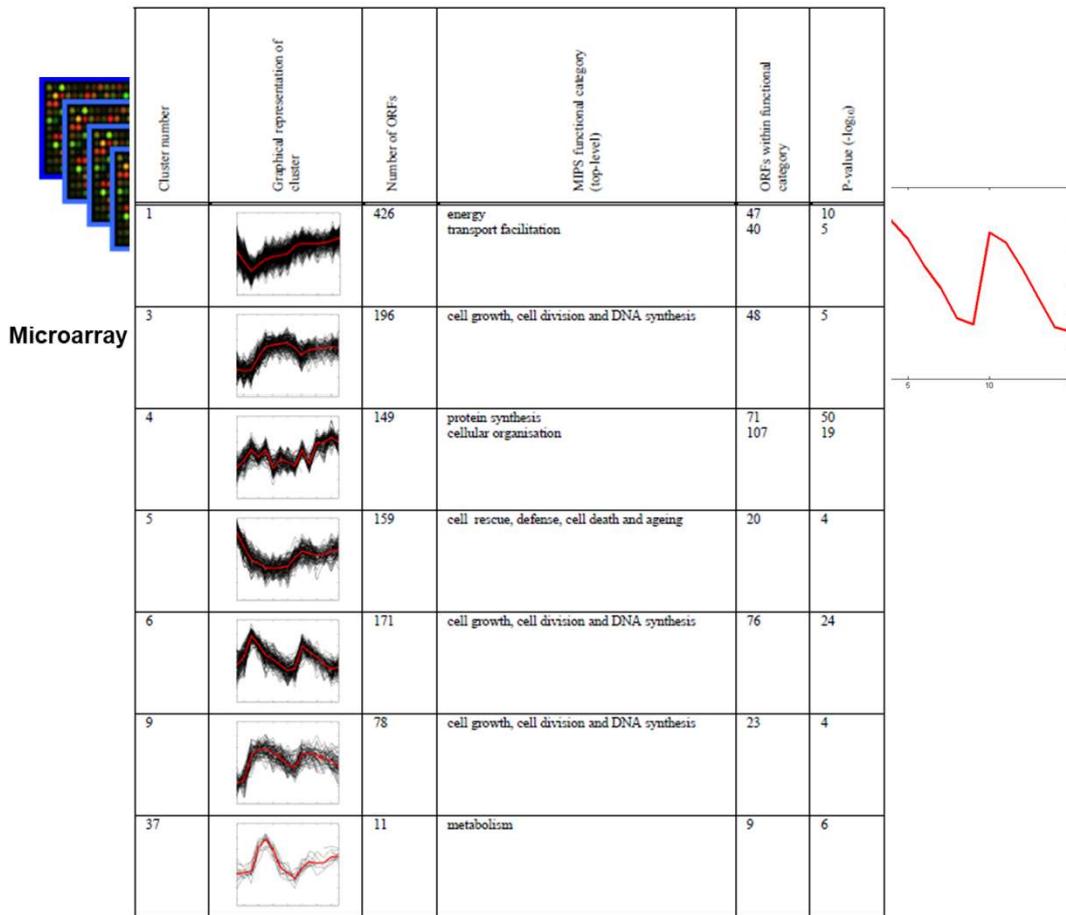
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- Master in Electrical Engineering, microelectronics (1992)
- Medical Doctor (1998)

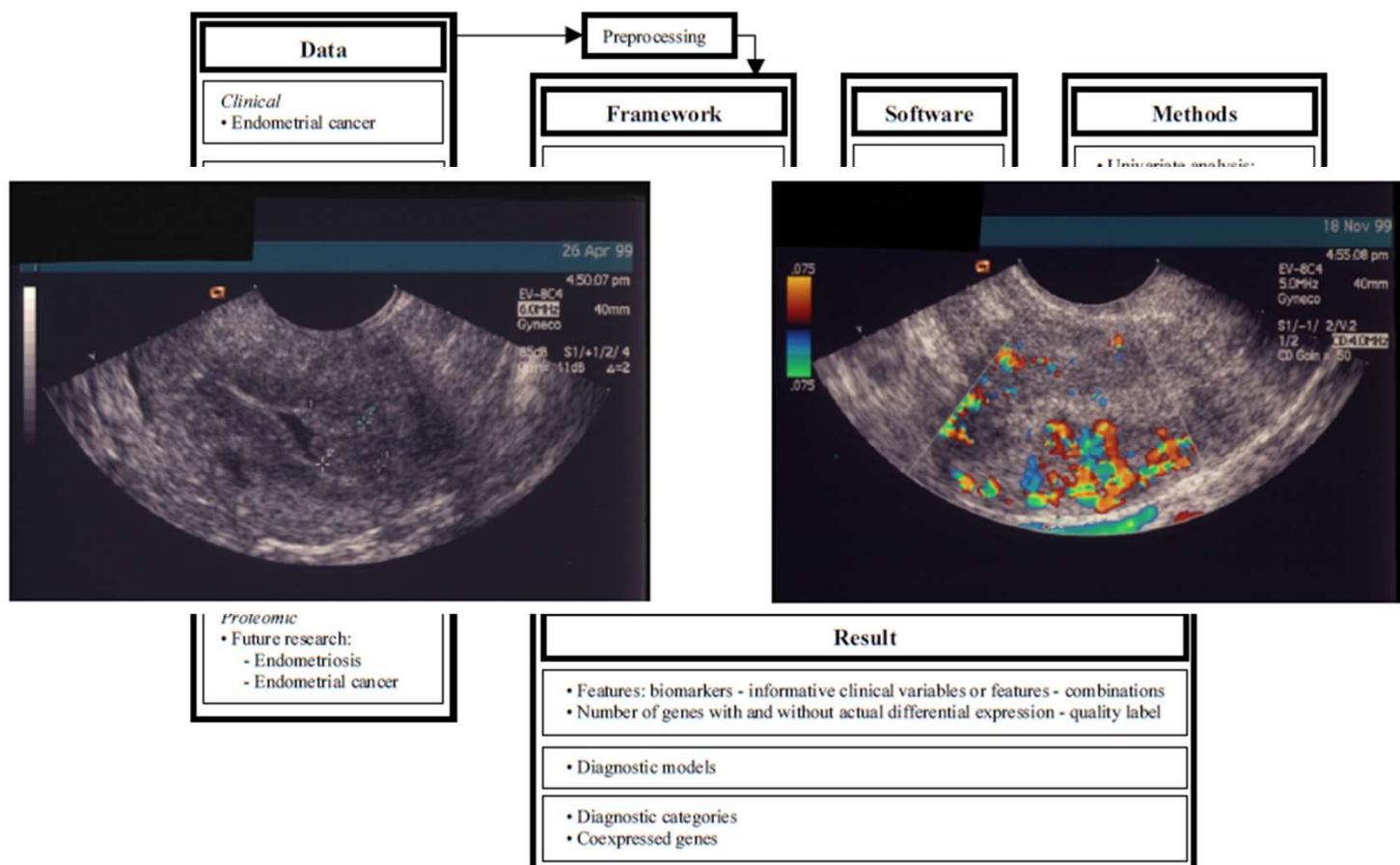
# Microarrays: algorithms for knowledge discovery in oncology and molecular biology



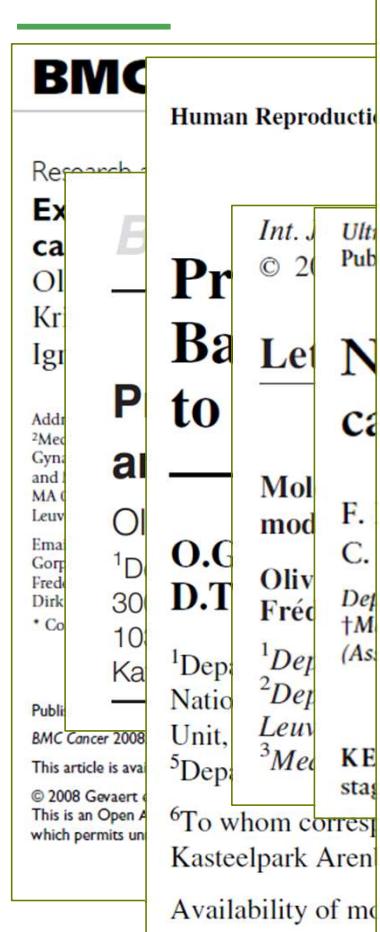
# Microarrays: algorithms for knowledge discovery in oncology and molecular biology



# Microarrays: algorithms for knowledge discovery in oncology and molecular biology



# Post-doc



**Human Reproduction, Vol.25, No.3 pp. 654–664, 2010**

Advanced Access publication on December 9, 2009 doi:10.1093/humrep/dep425

**ORIGINAL ARTICLE Gynaecology**

## **Non-invasive diagnosis of endometriosis based on a combined analysis of six plasma biomarkers**

**A. Mihalyi<sup>1,2</sup>, O. Gevaert<sup>3</sup>, C. M. Kyama<sup>1,2,4</sup>, P. Simsa<sup>1,2,5</sup>, N. Pochet<sup>3,6,7</sup>, F. De Smet<sup>3,8</sup>, B. De Moor<sup>3</sup>, C. Meuleman<sup>1</sup>, J. Billen<sup>9</sup>, N. Blanckaert<sup>9</sup>, A. Vodolazkaia<sup>1,2</sup>, V. Fulop<sup>5</sup>, and T. M. D'Hooghe<sup>1,4,10</sup>**

<sup>1</sup>Leuven University Fertility Centre, Department of Obstetrics and Gynaecology, University Hospital Gasthuisberg, Herestraat 49, B-3000 Leuven, Belgium <sup>2</sup>Experimental Gynaecology Laboratory, Department of Obstetrics and Gynaecology, University Hospital Gasthuisberg, Herestraat 49, B3000 Leuven, Belgium <sup>3</sup>Department of Electrical Engineering, ESAT-SCD, KU Leuven, Kasteelpark-Arenberg 10, B-3001 Heverlee, Belgium <sup>4</sup>Division of Reproductive Biology, Institute of Primate Research, Nairobi, Kenya <sup>5</sup>National Institute of Health, Budapest, Hungary <sup>6</sup>Bioinformatics and Evolutionary Genomics Group, VIB Department of Plant Systems Biology, Ghent University, Technologiepark 927, B-9052 Ghent, Belgium <sup>7</sup>Quantitative Genomics Group, VIB Department of Plant Systems Biology, Ghent University, Technologiepark 927, B-9052 Ghent, Belgium <sup>8</sup>Medical Direction, National Alliance of Christian Mutualities, Brussel, Belgium <sup>9</sup>Department of Laboratory Medicine, Leuven University Hospitals, Belgium

<sup>10</sup>Correspondence address. Tel: +32-16-343624; Fax: +32-16-343607; E-mail: thomas.dhooghe@uz.kuleuven.ac.be

# After PhD: CM – Health Insurance Fund Social Security Physician

- Health insurance fund: Main tasks:
  - Health insurance implementation
    - Insurance: obligatory vs supplementary vs free
    - Reimbursements of health care vs benefits during incapacity for work
  - Co-manager
    - Member in different agencies, commissions, ... (NIDHI(RIZIV), KCE, ...)
    - Actively involved in negotiations concerning reimbursement rates
    - Spokesperson for and representation of patients
  - Sickness Funds law 1990
    - Goal: to promote the physical, psychological and social well-being – without profit seeking
      - Development of projects to promote a healthy lifestyle
      - To give information and advise to our members concerning their health

# Big data – Resource use data

## Datawarehouse (Oracle®) @ CM

3 types of data:

### 1. Resource use data

- Reimbursement drugs, hospitalisations, medical acts, visits, physical therapy, ...
- Very detailed, based on “nomenclature” codes (one number for each type of medical act) + information about: patient, date, health care professional, prescriber, place (hospital), price, ...
- Direct clinical information is not available – only indirect (proxies)

### 2. Member data

- Age, sex, address, social status (employee, independent, out of work, disabled, ...), date of death, ...

### 3. Auxiliary tables

- Additional enrichment of data (e.g., for drugs: active ingredient, manufacturer, dose, price, number of units/box, ...)

For CM in 2021:

- 4.6 million members (40% market share in Belgium)
- 725 million records resource use data
- 14,5 billion euro health care reimbursements

# Big data – Resource use data Research with clinical or societal impact

Vaccine 33 (2015) 5188–5195  
Environmental Pollution 266 (2020) 115130

Contents lists available at [ScienceDirect](#)

**Environmental Pollution**

journal homepage: [www.elsevier.com/locate/envpol](http://www.elsevier.com/locate/envpol)

Check for updates

Antithrombotic medication and endovascular interventions associated with short-term exposure to particulate air pollution: A nationwide case-crossover study<sup>☆</sup>

Hans Scheers <sup>a,b</sup>, Tim S. Nawrot <sup>a,c</sup>, Benoit Nemery <sup>a</sup>, Katrien De Troeyer <sup>a</sup>, Michael Callens <sup>d</sup>, Frank De Smet <sup>a,d</sup>, An Van Nieuwenhuyse <sup>a,e</sup>, Lidia Casas <sup>a,f,\*</sup>

<sup>a</sup> Centre for Environment and Health – Department of Public Health and Primary Care, KU Leuven, Herestraat 49, 3000 Leuven, Belgium  
<sup>b</sup> Centre for Evidence-Based Practice, Rode Kruis-Vlaanderen, Mechelen, Belgium  
<sup>c</sup> Centre for Environmental Sciences, Hasselt University, Agoralaan Agoralaan Gebouw D, 3590 Diepenbeek, Belgium  
<sup>d</sup> IMA-AIM, Tervurenlaan 188A - box 9, 1150 Brussel, Belgium  
<sup>e</sup> Department of Health Protection, Laboratoire National de Santé (LNS), Dudelange, Luxembourg  
<sup>f</sup> Epidemiology and Health Policy, Department of Epidemiology and Social Medicine, University of Antwerp, Universiteitsplein 1, 2610 Antwerp, Belgium

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g Agency for Care and Health, Infectious Disease Control and Vaccinations, K. Albert II laan 35 Box 33, 1030 Brussels, Belgium



# Big data – Resource use data

## Detection of fraud

- Specific signals
  - Ad hoc exploratory
  - > Predictive

representatie van de werkelijkheid door middel van data'. Wie belastingfraude wil voorspellen, zou data moeten verzamelen die het mogelijk maken om een onderscheid te maken tussen toekomstige fraudeurs en brave betalers. Alleen: het is niet bekend welke data zo'n onderscheid mogelijk maken, en dat verleidt sommigen wellicht om zomaar te beginnen met de data waar de belastingdienst de hand op kan leggen (*low hanging fruit*). Bijkomend punt is dat het ook niet bekend is welke belastingfraude tot nu toe onder de radar is gebleven. Zo wordt het een hachelijke zaak om steeds meer datapunten te verzamelen en daarin patronen te zoeken; de inbreuk op de privacy wordt steeds groter en succes is niet verzekerd. Mogelijk speelt hier ook nog een *selffulfilling prophecy* een rol. Wanneer wordt ingezoomd op degenen waarvan op enig moment bekend is dat zij frauderen, veronderstelt men ten onrechte dat de relevante patronen ook daar worden gevonden [Harcourt 2007].

- Results NOT good



ster analysis



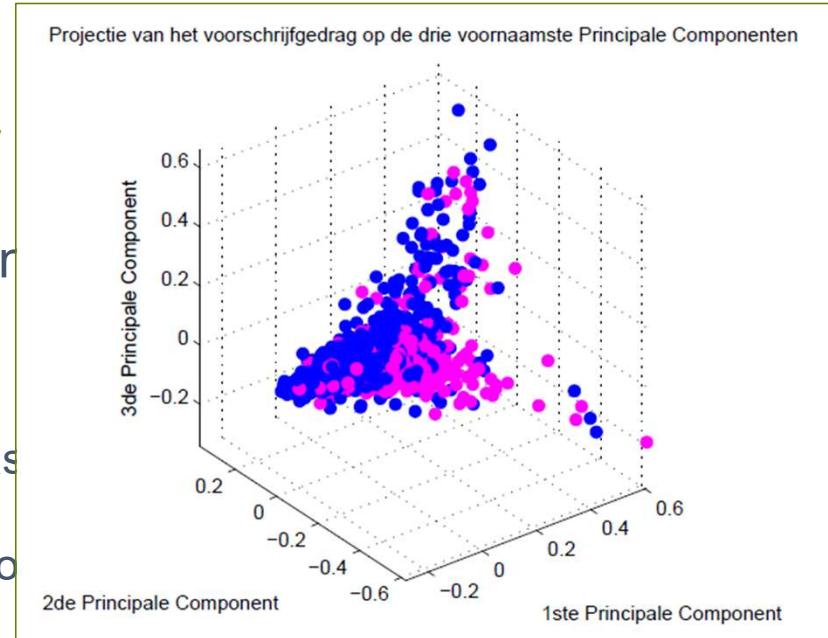
# Detection of fraud and waste

## Master thesis + PhD (Promotor

- Master thesis (Joachim Jacobs - 2007): Data on prescriptions by family physicians

-> Conclusions :

- No real clusters only individual outliers, in most cases specific subpopulation of a specific physician
- Clear relation between gender and prescription profile



- PhD Hannes De Meulemeester: Detection of Fraud and Overconsumption in Healthcare
  - Validation of algorithms expected after the summer

# Big data – Resource use data

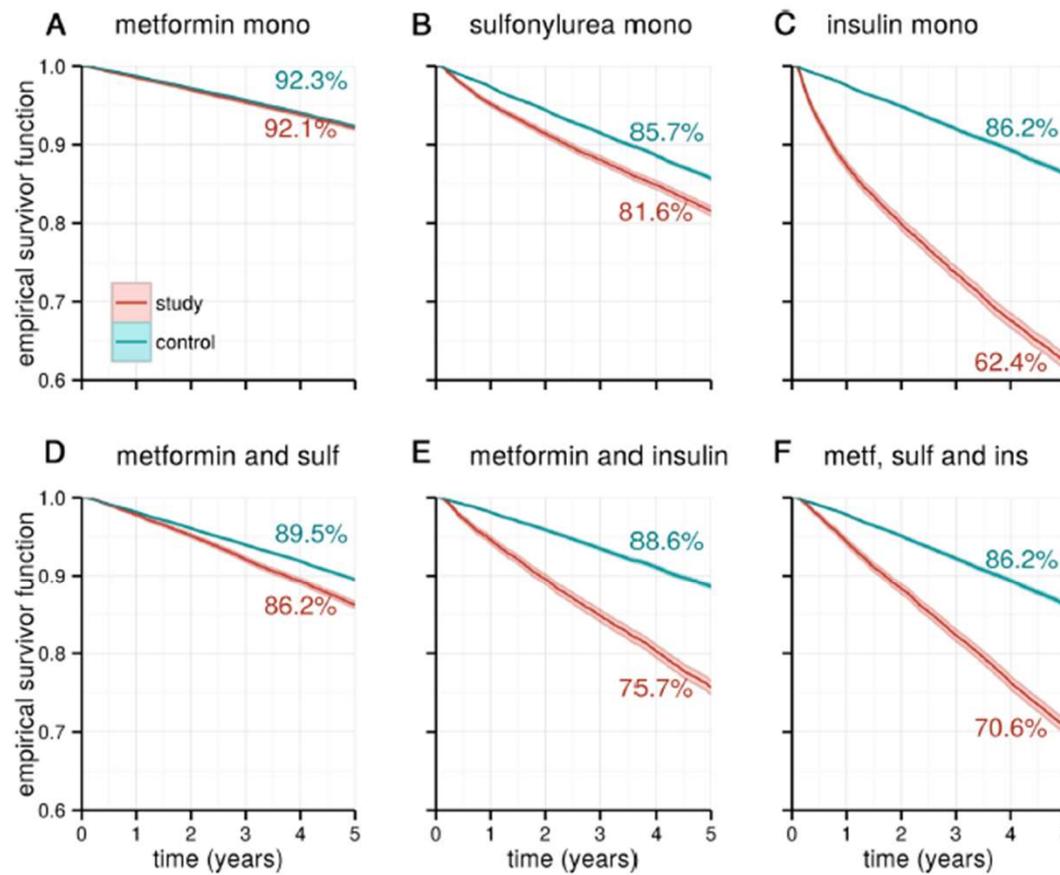
## Observational studies - retrospective cohort studies

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- Observational studies: e.g., Retrospective cohort studies
  - Comparison of cohort with and without specific medication
  - Large sample sizes
  - Long follow-up possible
  - Matched controls: age, sex, social status, region, comorbidity (if proxy available)
  - Outcome: survival available

# Observational studies PhD (Promotor b)

- PhD thesis (N=1000)  
data: Data-database
- Chapter 2: N=1000  
cohort study



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doi: 10.1210/jc.2015-3184

J Clin Endocrinol Metab, February 2016, 101(2):461–469

press.endocrine.org/journal/jcem 461

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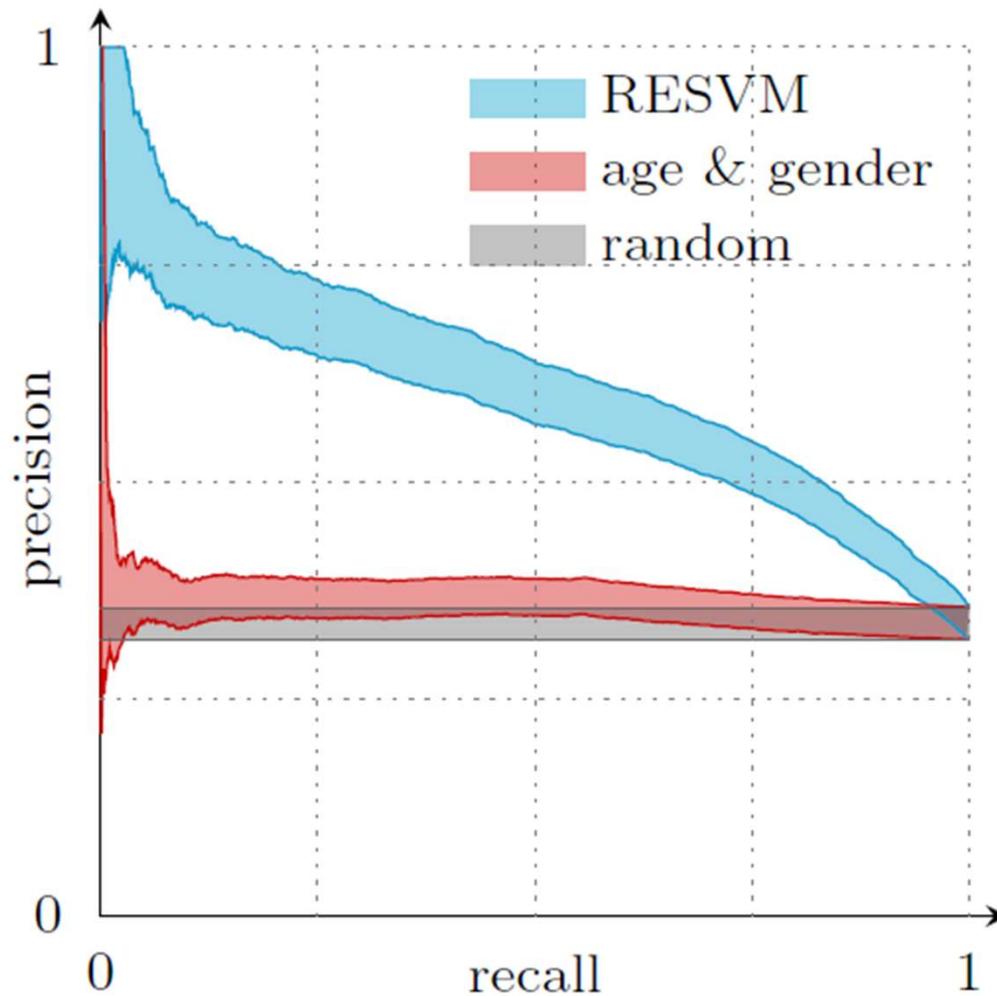


expenditure

large, controlled

# PhD Marc C Clinical app

- Predict who will get diabetes) using
  - Scientific POC
  - Semi-supervised
  - Results (74.9% data)
    - Germany: 7
  - No operational
    - No prospective
    - Model performance
      - False positive
      - False negative
    - Only use after
    - CM is a soci



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# Research Department



Incapacity for work

<https://zorgkwaliteit.be>



€



Health inequalities



Palliative care



Mental health



Healthcare services



Health inequities



alliative care

and cost of care

KU LEUVEN

HIVA

Wat we doen ▾ Help mee ▾ Vind een actie ▾ Over kanker ▾

EN ▾

ZOEKEN

DOE EEN GIFT

**Samen met jullie strijden wij elke dag tegen kanker**

HELP MEE WAT DOEN WI?

**Kom op tegen Kanker**

**Wat doen we met je ingezamelde geld?**  
32,32 miljoen euro: dat ongelooflijke bedrag kunnen we inzetten in de strijd tegen kanker.  
[Hoe besteden wij ons geld](#)

**Onze website allesoverkanker.be**  
Wat is kanker? Hoe leef je ermee en wat erna? Lees er alles over op onze website vol kankerinformatie!  
[Naar allesoverkanker.be](#)

**Help mee: steun de strijd tegen kanker!**  
Draag je steentje bij in de strijd tegen kanker: steun, doe mee aan of organiseer een actie.  
[Doe mee](#)

  
**Verkoop mee plantjes**  
[Meer foto's van de verkoop mee plantjes](#)

  
**De Col op**  
[Meer foto's van de De Col op](#)

**Report 'Towards effective mentoring practices for migrant newcomers. Guidelines for social mentoring programs'**  
[Lees meer over dit rapport](#)

**Welkom op onze conferentie 'Samen op weg naar Industrie 5.0', 22 juni, Leuven.**  
Boeiende keynotes, fijne workshops, interessante panels, en boekvoorstelling  
[Meer foto's van de conferentie](#)

**HULP NODIG**

**STELIJKE**  
**SOALITEIT**

# Miscellaneous: Insurance Medicine - EBM

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- Physician specialist in insurance medicine and medical expertise
- Visiting professor Department of Public Health and Primary Care (Insurance Medicine)
  - Training in Evidence-based Health Care and research methodology

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