

Medical Data Sharing For Protection and Intrusion Avoidance in Cloudlet

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Abstract: Health Record of an individual personal is a vital way that can be utilized for keeping track of patient data in accurate, reliable as well as complete manner. In every practical sense, helpful data sharing is a fundamental and testing issue. Therefore in this paper, we build up a novel human administrations structure by utilizing the versatility of cloudlet. The components of cloudlet consolidate security protection, data sharing and intrusion area. In the phase of information accumulation, we initially use Number Theory Research Unit (NTRU) technique to scramble client's body information gathered by wearable device. That information will be transmitted to adjacent cloudlet in a vitality proficient form. Furthermore, we exhibit another trust model to enable clients to choose trustable accomplices who to need to share put away information in the cloudlet. The trust display additionally causes comparable patients to speak with each other about their sicknesses. Thirdly, we isolate clients' medicinal information put away in remote billow of healing facility into three sections, and give them appropriate insurance.

Keywords-Information sharing, security insurance, health.

1. INTRODUCTION

This medical data on the social network is beneficial to both patients and doctors, the sensitive data might be leaked or stolen, which causes privacy and security problems without efficient protection for the shared data. In Cao et al, an MRSE (multi-keyword ranked search over encrypted data in cloud computing) privacy protection system was presented, which aims to provide users with a multi-keyword method for the cloud's encrypted data [1]. In spite of the fact that this technique can give result positioning, in which individuals are intrigued, the measure of computation could be lumbering. A priority based health data aggregation (PHDA) scheme was presented to protect and aggregate different types of healthcare data in cloud assisted wireless body area network (WBANs). The article investigates security and privacy issues in mobile healthcare networks, including the privacy-protection for healthcare data aggregation, the security for data processing and misbehavior [2]. This describes a flexible security model especially for data centric applications in cloud computing based scenario to make sure data confidentiality, data integrity and fine grained access control to the application data. It gives a systematic literature review of privacy-protection in cloud-assisted health care system.

With the advances in cloud computing, a large amount of data can be stored in various cloud, including cloudlets [9] and remote clouds [10], facilitating data sharing and intensive computations

[7]. However, cloud-based data sharing entails the following fundamental problems

- How to protect the security of user's body data during its delivery to a cloudlet?
- How to make sure the data sharing in cloudlet will not cause privacy problem?
- As can be predicted, with the proliferation of Electronic Medical Records (EMR) and cloud-assisted applications, more and more attentions should be paid to the security problems regarding to a remote cloud containing health-care big data. How to verify the health care huge information stored in a remote cloud?
- How to adequately shield the entire framework from malicious attacks?

In terms of the above problems, this paper proposes a cloudlet based healthcare system. The body information gathered by wearable gadgets are transmitted to the adjacent cloudlet. Those data are further delivered to the remote cloud where doctors can access for disease diagnosis. According to data delivery chain, we separate the privacy protection into three stages. In the first stage, client's imperative signs gathered by wearable gadgets are conveyed to a wardrobe passage of cloudlet. Amid this stage, information protection is the primary concern. In the second stage, client's information will be additionally conveyed toward remote cloud through cloudlets. A cloudlet is shaped by a specific number of cell phones whose proprietors may require as well as offer some particular information substance. In this way, both security and data sharing are considered in this stage.

The main contributions of this paper include

- A cloudlet based healthcare system framework is displayed, where the security of clients' physiological information and the proficiency of information transmissions are our fundamental concern. We use NTRU for data protection while information transmissions to the cloudlet.
- In request to share information in the cloudlet, we utilize client's similarity and reputation to develop trust show. In view of the deliberate client's trust level, the framework decides if information sharing is performed.
- We separate information in remote cloud into various types and use encryption system to secure them individually.
- We propose community IDS dependent on cloudlet work to ensure the entire medicinal services framework against malicious attacks.

2. REVIEW OF LITERATURE

(A) "Information security in cloud-helped restorative administrations structures: State of art and future challenges"

The framework is protection guaranteed where cloud sees neither the first examples nor fundamental information. It handles well inadequate and general information, and information messed with noise.

Advantages:

1. We have proposed a security mindful cloud helped medicinal services checking framework by means of compressive detecting.
2. The random mapping based protection ensures no sensitive samples would leave the sensor in unprotected form.

Disadvantages:

1. Wireless sensors are being increasingly used to monitor/collect information in healthcare medical systems.
2. In spite of the expanding prevalence, how to viably process the consistently developing human services information and all the while secure information protection, while keeping up low overhead at sensors, stays testing.

(B) "Behavior rule detail based interruption location for wellbeing basic restorative digital physical frameworks"

We show that our interruption recognition method can adequately exchange false positives off for a high location likelihood to adapt to increasingly modern and concealed assailants to help ultra protected and secure MCPS applications..

Advantages:

1. For safety-critical MCPSs, being able to detect attackers while limiting the false alarm probability

to protect the welfare of patients is of utmost importance 2. We plan to analyze the overheads of our detection techniques such as the various distance-based methods in comparison with contemporary approaches.

Disadvantages:

1. We propose and investigate a conduct rule determination based method for interruption identification of restorative gadgets implanted in a therapeutic digital physical framework (MCPS) in which the patient's security is absolutely critical.

(C) "Cloudlet work for affirming versatile hazes from interruptions and system assaults"

We have indicated an arrangement of confirmation, approval, and encryption conventions for verifying correspondences among cell phones, cloudlet servers, and separation mists.

Advantages:

1. Verifying portable cloud administrations is the real obstruction to the joining of BTOD (Bring Your Own Gadgets) and BYOC (Bring Your Own Cloud) in our day by day applications.
2. We utilize the cloudlet work to perform community interruption location among various cloudlets.

Disadvantages:

1. System assaults are a genuine issue that goes up against both cloud suppliers and enormous number of versatile clients who get to separate mists in our day by day life tasks.

2. We stretch out their work to help security functionalities in offloading the separation mists

(D) "Cloud - maintained modernized – physical concealment framework for patients checking"

The proposed methodology utilizes Gaussian blend displaying for restriction and is appeared beat other comparable techniques as far as blunder estimation.

Advantages:

1. The plan and improvement of such frameworks expects access to considerable sensor and client logical information that are put away in the internet.
2. We will lead more remaining burden estimations to record the asset usage of CPU, memory, stockpiling, and system data transfer capacity.

Disadvantages:

1. This empowers a scope of developing applications or frameworks, for example, patient or wellbeing checking, which require persistent areas to be followed.

(E) "Cloudlet-based ground-breaking data accumulation in remote bodies area frameworks"

The proposed work also attempts to minimize the end-to-end packet delay by choosing dynamically a

neighbour cloudlet, with the goal that the general delay limited.

Advantages:

1. The goal was objective to minimize end-to-end packet cost by dynamically choosing data collection to the cloud using cloudlet based system
2. Performance of the proposed system was evaluated via extended version of CloudSim simulator.

Disadvantages:

1. The huge amount of data collected by nodes demands scalable, on-demand, powerful, and secures storage and processing infrastructure.

(F) "A security framework in g-hadoop for big data computing across distributed cloud data centres"

We describe an EHR security reference model for managing security issues in healthcare clouds, which features three vital core parts in verifying an EHR cloud.

Advantages:

1. The goal of this research is to advance the Map Reduce framework for large-scale distributed computing across multiple data centers with multiple clusters.
2. The designed security framework has the ability to prevent the most common attacks, such as MITM attack, replay attack, and delay attack, and ensures a secure communication of GHadoop over public networks.

Disadvantages:

1. The Map Reduce tasks are firstly scheduled among the clusters using Hadoop's data-aware scheduling policy and then among compute nodes use the existing cluster scheduler on the target clusters.

(G) "Security safeguarding multi-catchphrase positioned"

Hunt over scrambled cloud information". We first offer an essential thought for Multi keywords Ranked Search over Encrypted cloud data (MRSE) in view of successful correlation proportion of facilitates coordinating.

Advantages:

1. We have adopted a deliberate strategy to exploring security models and security prerequisites for social insurance application mists.
2. We have talked about essential ideas identified with EHR sharing and incorporation in medicinal services mists and broke down the emerging security and protection issues in access and the board of EHRs

Disadvantages:

1. The broad utilization of Electronic Health Record (EHR), building a safe EHR sharing condition has pulled in a ton of consideration in

both social insurance industry and scholastic network.

(H) "A shared interruption identification and Anticipation framework in distributed computing".

We propose a shared model comprises of the Intrusion Detection and Prevention System capacities based disseminated IDS and IPS, with the utilization of a half and half identification procedure for tending to the issues of assaults experienced, explicitly appropriated assaults, for example, port checking assaults and conveyed inside set up inside a Cloud Computing condition by clients qualified for access, including the coordination of the Signature Apriori Algorithm for producing new assault marks whose goal is to build up the working of our security framework to probably distinguish and square different sorts of attacks and interruptions.

Advantages:

1. Security arrangements are not yet adjusted to this new idea. To be sure, in such a domain, the more clients and ways, the more noteworthy the interruption is viable.
2. We additionally join the mark apriori calculation to advance and refresh our database mark to investigate and look at data got.

Disadvantages:

1. Distributed computing has risen as a model to process substantial volumetric information. They include that Cloud Computing manages distinctive essentials like virtualization the board, adaptation to non-critical failure and burden adjusting.

(I) "Security models and prerequisites for health care application clouds".

We depict an EHR security reference demonstrate for overseeing security issues in human services mists, which features three critical center parts in verifying an EHR cloud.

Advantages:

1. We have adopted a systematic strategy to exploring security models and security necessities for medicinal services application mists.
2. We have talked about essential ideas identified with EHR sharing and mix in medicinal services mists and dissected the emerging security and protection issues in access and the executives of EHRs.

Disadvantages:

1. The broad utilization of electronic Health record (EHR), building a protected EHR sharing condition has pulled in a great deal of consideration in both medicinal services industry and scholastic network.

(J) "Wearable medical gadgets for tele-home human health".

As a vital piece of this framework, a cuff less BP meter has been created and tried on 30 subjects in

an aggregate of 71 preliminaries over a time of five months.

Advantages:

1. Utilization of mobile correspondence is never again constrained to communication.
2. New interests and requests are wireless information and multimedia services, as 3G telephones are accessible.

Disadvantages:

1. The world's maturing populace and commonness of perpetual infections have lead to extreme interest for tele home health care, in which imperative signs checking is fundamental.

3. PROPOSED SYSTEM

In this project, this paper proposes a cloudlet based human services framework. The body information gathered by wearable device is transmitted to the adjacent cloudlet. That information is additionally conveyed to the remote cloud where specialists can get to for disease finding. In the main stage, user's vital signs gathered by wearable gadgets are conveyed to gateway of cloudlet. In this stage, information security is the primary concern. In the second stage, customer's data will be moreover passed on toward remote cloud through cloudlets. A cloudlet is encircled by a particular number of PDAs whose owners may require as well as offer some particular information substance. In this manner, both security insurance and information sharing are considered in this stage. Especially, we utilize trust model to assess trust level between users to decide sharing information or not. Considering the clients' restorative information is put away in remote cloud, we characterize these medicinal data into various types and take the relating security approach. In addition to over three phases based information security assurance, we additionally consider community oriented IDS in light of cloudlet work to ensure the cloud eco framework. We propose the google map for displaying register hospital on map with route. We propose some question and answer technique between user and doctors.

4. SYSTEM FRAMEWORK

User body information and provides the privacy for user information and transmits to cloudlet. But we provide the privacy of user information. Using cloudlet we transfer this information to remote cloud. User share their information based on cloudlet. User request for sharing information to other user and then trust authority check the both user body information similarity. After that user

share their information. User asks question to doctor and doctor provide the answer.

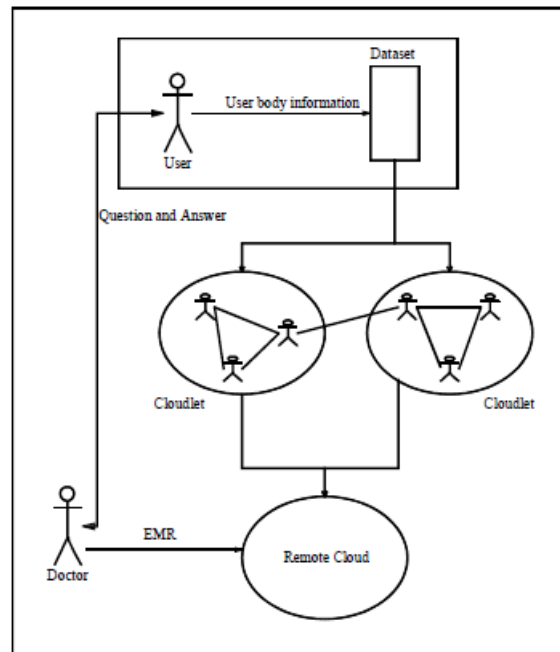


Fig.1. Architecture of Information sharing using cloudlet

The framework of the proposed cloudlet-based healthcare system is shown in Fig. 2. The client's physiological data are first collected by wearable devices such as smart clothing [11]. Then, those data are delivered to cloudlet. The following two important problems for healthcare data protection is considered. The first problem is healthcare data privacy protection and sharing data, as shown in Fig. 2(a). The second problem is to develop effective counter measures to prevent the healthcare database from being intruded from outside, which is shown in Fig. 2(b).

We address the first problem on healthcare data encryption and sharing as follows.

- Client data encryption. We utilize the model presented in [12], and take the advantage of NTRU [35] to protect the client's physiological data from being leaked or abused. This scheme is to protect the user's privacy when transmitting the data from the smart phone to the cloudlet.
- Cloudlet based data sharing. Typically, users geographically close to each other connect to the same cloudlet. It's likely for them to share common aspects, for example, patients suffer from similar kind of disease exchange information of treatment and share related data. For this purpose, we use users' similarity and reputation as input data. After we acquire clients' trust levels, a specific limit is set for the comparison .Once reaching the threshold, it

is considered that the trust between the users is enough for data sharing. Otherwise, the data will

not share with low trust level.

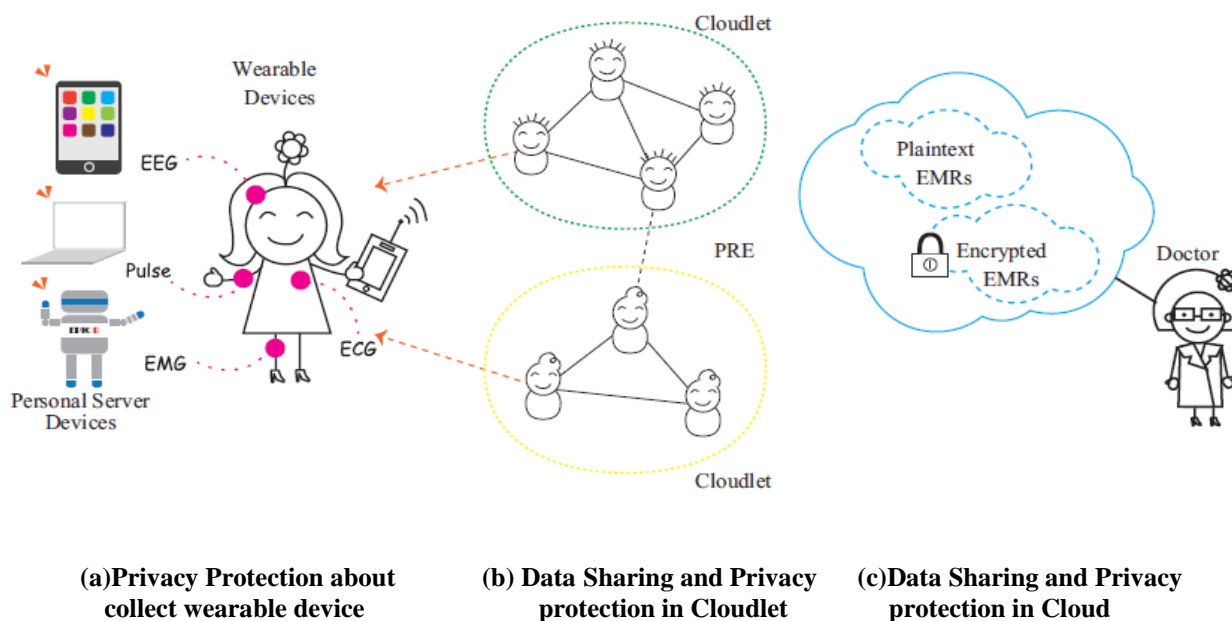


Fig: 2. System Framework

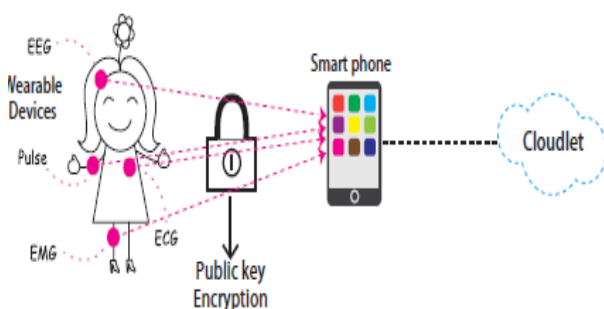
5. CONTENT SHARING AND PRIVACY PROTECTION

In this section, we address the problem of protection and data sharing. First, we introduce the encryption process for users' privacy data, which prevents the leakage or malicious use of users' private data during transmissions. Next, we present the identity management of users who want to access to the hospital's healthcare data. Thus, we can assign different users with different levels of permissions for data access, while avoiding data access beyond their permission levels. Finally, we give an application of using users' private data, which is beneficial to both users and doctors. Based on the healthcare big data stored in the remote cloud, a disease prediction model is built based on decision tree. The predictions will be reported to the users and doctors on demand.

Fig.3. Collection of encrypted data in the cloudlet

Encryption at the User End

When using wearable devices to collect users' data, the procedure inevitably involves the user's sensitive information. Therefore, how to effectively collect and transmit users' data under efficient privacy protection is a critical problem. In a data collection method, called PHDA, is proposed based on data priority which can give proper cost and delay to different priorities data. In the process of data collection and utilizes sum aggregation to obtain data to make sure the security of users' privacy in the presence of unreliable sensors. In data privacy protection issue based on big data of healthcare. This paper utilizes the advantages of NTRU encryption scheme. NTRU can protect the user's physiological data, such as heart rate, blood pressure and Electrocardiography (ECG), etc. Before transmitted to a smart phone, NTRU encryption scheme executed. The encrypted data will then be stored in the cloudlet through a cellular network or Wi-Fi as shown in Fig: 3.



6. CONCLUSION

In this project, we investigated the problem of privacy protection and sharing large medical data in cloudlets and the remote cloud. We developed a system which does not allow users to transmit data to the remote cloud in consideration of secure collection of data, as well as low communication cost. However, it does allow users to send data to a cloudlet, which triggers the data sharing problem in the cloudlet. Firstly, we can utilize wearable devices to collect users' data, and in order to protect users' privacy, we use NTRU mechanism to make sure the transmission of users' data to cloudlet in security. Secondly, for the purpose of sharing data in the cloudlet, we use trust model to measure users' trust level to judge whether to share data or not. Thirdly, for privacy-preserving of remote cloud data, we partition the data stored in the remote cloud and encrypt the data in different ways, so as to not just ensure information security yet in addition quicken the adequacy of transmission. At last, we propose community IDS dependent on cloudlet work to ensure the entire

REFERENCES

- [1] A. Sajid and H. Abbas, "Data privacy in cloud-assisted healthcare systems: State of the art and future challenges," *Journal of Medical Systems*, vol. 40, no. 6, pp. 1–16, 2016.
- [2] R. Mitchell and I.-R. Chen, "Behavior rule specification-based intrusion detection for safety critical medical cyber physical systems," *Dependable and Secure Computing, IEEE Transactions on*, vol. 12, no. 1, pp. 16–30, 2015.
- [3] Y. Shi, S. Abhilash, and K. Hwang, "Cloudlet mesh for securing mobile clouds from intrusions and network attacks," in *The Third IEEE International Conference on Mobile Cloud Computing, Services, and Engineering, (Mobile Cloud 2015)*. IEEE, 2015.
- [4] M. Quwaider and Y. Jararweh, "Cloudlet-based efficient data collection in wireless body area networks," *Simulation Modelling Practice and Theory*, vol. 50, pp. 57–71, 2015.
- [5] M. S. Hossain, "Cloud-supported cyber-physical localization framework for patients monitoring," 2015.
- [6] J. Zhao, L. Wang, J. Tao, J. Chen, W. Sun, R. Ranjan, J. Kołodziej, A. Streit, and D. Georgakopoulos, "A security framework in g-hadoop for big data computing across distributed cloud data centres," *Journal of Computer and System Sciences*, vol. 80, no. 5, pp. 994–1007, 2014.
- [7] N. Cao, C. Wang, M. Li, K. Ren, and W. Lou, "Privacy-preserving multi-keyword ranked search over encrypted cloud data," *Parallel and Distributed Systems, IEEE Transactions on*, vol. 25, no. 1, pp. 222–233, 2014.
- [8] H. Mohamed, L. Adil, T. Saida, and M. Hicham, "A collaborative intrusion detection and prevention system in cloud computing," in *AFRICON, 2013. IEEE, 2013*, pp. 1–5.
- [9] R. Zhang and L. Liu, "Security models and requirements for healthcare application clouds," in *Cloud Computing (CLOUD), 2010 IEEE 3rd International Conference on*. IEEE, 2010, pp. 268–275.
- [10] K. Hung, Y. Zhang, and B. Tai, "Wearable medical devices for telehome healthcare," in *Engineering in Medicine and Biology Society, 2004. IEMBS' 04. 26th Annual International Conference of the IEEE*, vol. 2. IEEE, 2004, pp. 5384–5387.
- [11] M. Chen, Y. Ma, J. Song, C.-F. Lai, and B. Hu, "Smart clothing: Connecting human with clouds and big data for sustainable health monitoring," *ACM/Springer Mobile Networks and Applications*.
- [12] K. Rohloff and D. B. Cousins, "A scalable implementation of fully homomorphic encryption built on ntru," in *Financial Cryptography and Data Security Springer, 2014*, pp. 221–234.
- [13] D. Nunez, I. Agudo, and J. Lopez, "Ntrurencrypt: An efficient proxy re-encryption scheme based on ntru," in *Proceedings of the 10th ACM Symposium on Information, Computer and Communications Security ACM, 2015*, pp. 179–189.