



RESEARCH ON COLLABORATIVE DEFENSE METHOD OF HOSPITAL NETWORK CLOUD BASED ON END-TO-END EDGE COMPUTING

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Abstract. This research introduces a groundbreaking collaborative defense mechanism that utilizes end-to-end edge computing to bolster the security of decentralized hospital cloud systems. By integrating intrusion detection systems, firewalls, anomaly detection, and threat intelligence in a unified manner through the efficiency of edge computing, this approach marks a significant advancement in healthcare cybersecurity. Through rigorous testing with a substantial dataset, the system demonstrated exceptional performance metrics, including a remarkable 95% accuracy in threat detection, a low false positive rate, and a swift response time of merely 0.25 seconds. Notably, the system effectively mitigates computational overhead, thereby optimizing resource utilization. Comparative analysis with existing methodologies underscores the superiority of this novel framework, particularly in terms of geolocation accuracy, the minimization of false positives, and expedited reaction capabilities. This study's collaborative defense strategy, underpinned by end-to-end edge computing, presents a holistic and innovative solution to the escalating cyber threats facing healthcare infrastructures. By redefining the parameters of security in medical settings, it paves the way for a safer and more resilient healthcare information technology ecosystem.

Key words: Edge Computing, Healthcare Security, Collaborative Defense, Intrusion Detection, Cybersecurity

1. Introduction. The healthcare industry is in the midst of a paradigm shift towards digitization with hospital networks increasingly reliant and relying on cloud-based systems for storage, management, and processing vast amounts patient data. Poised in the negative light, this strategic move comes with a host of cybersecurity issues attributable to its sensitive nature and information health data. For hospitals and healthcare organizations, the threat scene remains static – namely of ransomware attacks; instances of data breaches as well among others abusive activities targeting their cloud infrastructures [19]. Traditional methods to protecting hospital clouds are insufficient in face of developing cyber threats in response to these compressed demands, the work introduced in this study focuses on development and deployment of a tailored cooperation defence strategy for hospital clouds [1]. This collaborative defence strategy aims at addressing the shared nature of various security measures, developments and partners so as to support adaptability or healthcare systems against cyber threats. Additionally, the research amplifies past routine security ideal models by coordinating end-to-end edge computing into the collaborative defence system. End-to-end edge computing, with its decentralized handling capabilities, gives a promising road for improving security at the edge of the arrangement, where vulnerabilities frequently rise. By leveraging edge computing in conjunction with collaborative defence procedures, this investigation points to forming an all-encompassing and vigorous security engineering for hospital clouds. The centrality of this research lies not as it were in tending to current security challenges but moreover in foreseeing and proactively moderating developing dangers [2]. A fruitful usage of the proposed collaborative defence strategy, increased by end-to-end edge computing, seems set up an unused benchmark for healthcare cybersecurity, cultivating a more secure and versatile environment for the basic information and frameworks that underpin patient care. As we dive into the subsequent sections, a detailed investigation of the writing, technique, results, and suggestions will shed light on the potentially transformative effect of this research on the security scene of hospital clouds.

Our contribution is as follows:

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1. This research pioneers a unified security framework for hospital clouds, leveraging end-to-end edge computing to integrate various security tools into a cohesive defence mechanism, enhancing healthcare cybersecurity significantly.
2. The proposed system showcases exceptional efficacy with 95% threat detection accuracy, minimal false positives, and a rapid 0.25-second response time, outperforming existing cybersecurity solutions in healthcare.
3. It effectively addresses computational overhead, ensuring optimized resource use. This makes the system not only effective in securing data but also efficient in its operation, setting a new standard for resource management in healthcare IT security.

2. Related Works. Gupta et al. [18] investigated the integration of block chain and Pluggable Authentication Modules (PAM) to improve collaborative interruption location frameworks in keen cities. Their work aimed at accomplishing maintainable security solutions for urban situations, exhibiting the potential of blockchain in securing basic foundations. Haider et al. [34] conducted an efficient writing audit on leveraging blockchain to guarantee security and protection angles within the Web of Things (IoT). Their work centred on the crossing point of blockchain innovation and IoT, addressing basic security and security challenges within the setting of connected gadgets. Javed et al. [20] proposed a blockchain-enabled Gini Index framework to secure savvy healthcare cyber-physical frameworks against Blackhole and Greyhole assaults. Their consideration emphasized the part of blockchain in enhancing the security of healthcare frameworks, especially within the confrontation of advanced cyber threats. Kamalov et al. [21] gave experiences into the security and security challenges within the Internet of Medical Things (IoMT). Their work tended to the interesting contemplations and potential arrangements for securing restorative gadgets and information in an associated healthcare environment. Lang et al. [32] conducted an overview of blockchain-based unified learning. Their study investigated the integration of blockchain innovation with combined learning approaches, highlighting the potential of decentralized and secure machine learning models in collaborative settings. Laura and Victor [10] explored the part of rising innovations in breaking down boundaries in strategic communications. Whereas not straightforwardly related to healthcare, their investigation of technology's effect on communication frameworks gives important bits of knowledge into potential cross-domain applications. Madavarapu [22] centred on procedures to move forward data security in healthcare organizations utilizing Electronic Data Interchange (EDI). Whereas EDI isn't a novel concept, the study contributes by addressing security concerns within the setting of the healthcare information trade. Muhammad et al. [13] displayed an overview of the part of Industrial IoT (IIoT) in fabricating the execution of savvy industry practices. In spite of the fact that not healthcare-specific, the study contributes to understanding the broader applications of IoT in mechanical settings. Muoka et al. [24] conducted a comprehensive survey and investigation of profound learning-based medical picture adversarial attacks and defence. Their work centred on the defenselessness of therapeutic picture investigation frameworks to antagonistic assaults and proposed defence instruments. Nazir and Kaleem [25] investigated the application of combined learning for medical picture investigation with profound neural systems. Their ponder dug into privacy-preserving machine learning approaches for collaborative restorative picture examination. Odeh and Anas [26] proposed ensemble-based profound learning models for upgrading IoT interruption discovery. Their work contributes to the advancing field of interruption location within the setting of the Web of Things, emphasizing the utilisation of gathering procedures for progressed precision. Olney [27] centred on secure reconfigurable computing ideal models for another era of counterfeit insights and machine learning applications. In spite of the fact that not healthcare-specific, the study addresses security concerns within the broader setting of AI and machine learning applications. The related work underscores the multifaceted approaches to cybersecurity in healthcare, extending from blockchain integration and unified learning to tending to particular challenges in restorative picture investigation and IoT security. Whereas each study contributes interestingly to the field, the proposed collaborative defence strategy with end-to-end edge computing in our research aims to coordinate and develop these concepts, giving a comprehensive arrangement custom-fitted for the advancing scene of hospital cloud security.

The need for the research on the novel collaborative defense technique utilizing end-to-end edge computing for decentralized hospital cloud security enhancement arises from several critical challenges and gaps in the current state of healthcare cybersecurity:

Escalating Cyber Threats: Healthcare systems are increasingly targeted by cyber threats due to the sensitive nature of patient data they handle. Traditional security measures often fall short in providing the necessary protection against sophisticated cyber attacks, necessitating innovative solutions.

Decentralization Challenges: The shift towards decentralized hospital cloud systems, while offering scalability and flexibility, introduces new vulnerabilities. These systems require advanced security mechanisms that can operate effectively in a decentralized environment.

Resource and Efficiency Constraints: Healthcare organizations face the dual challenge of ensuring top-notch security without compromising on operational efficiency or resource allocation. Traditional security solutions may not offer the optimal balance between security effectiveness and computational overhead.

3. Methods and Materials.

3.1. Data Collection. The research includes the collection of information related to the engineering of hospital organize clouds, including data on existing security vulnerabilities and potential threats. The information sources incorporate healthcare IT frameworks, cloud benefit suppliers, and significant writing specifying the structure and vulnerabilities of hospital arrange clouds [3]. The dataset comprises arrange arrangements, security logs, and simulated assault scenarios to facilitate the assessment of the proposed collaborative defense strategy.

3.2. Data Preprocessing. Before actualizing the collaborative defence strategy, the collected information experiences preprocessing to guarantee consistency and significance [4]. This incorporates cleaning the information, dealing with lost values, and normalizing features to form a standardized dataset for algorithmic input.

3.3. Algorithms.

3.3.1. Collaborative Defense Method. The collaborative defence strategy proposed in this outcome combines the qualities of numerous security measures to upgrade the general flexibility of hospital clouds. It incorporates the integration of intrusion detection systems (IDS), firewalls, inconsistency revelation, and threat experiences sharing disobedient [5]. The collaboration is facilitated to collectively respond to and diminish security threats.

Algorithm 1 Collaborative Defense

```

1: function COLLABORATIVEDEFENSE(traffic_data)
2:   ids_score  $\leftarrow$  IDS(traffic_data)
3:   firewall_score  $\leftarrow$  Firewall(traffic_data)
4:   anomaly_score  $\leftarrow$  AnomalyDetection(traffic_data)
5:   threat_intelligence_score  $\leftarrow$  ThreatIntelligence()
6:   collaborative_defense_score  $\leftarrow$  ( $w1 \times$  ids_score) + ( $w2 \times$  firewall_score)
7:     + ( $w3 \times$  anomaly_score) + ( $w4 \times$  threat_intelligence_score)
8:   return collaborative_defense_score
9: end function

```

Algorithm	Weight
IDS	0.25
Firewall	0.2
Anomaly Detection	0.3
Threat Intelligence	0.25

3.3.2. End-to-End Edge Computing Integration. The incorporation of end-to-end edge computing within the collaborative defence strategy is basic since it is intended to move security handling to the network's edge. As a proactive procedure, this reduces latency giving for quick response instrument against such potential dangers [7]. The system becomes dynamic by planning security exercises close to the information generation office; it calms threats at their point of root in real-time. This incorporation, alternately, does not as it failed to strengthen the general security pose but also encourages alterations between agreeable defence and the

advancing nature of rising cyber threats, improving the versatility of healthcare-focused cloud frameworks inside agile situations [8].

Algorithm 2 Edge Computing Integration

$$\text{Edge Computing Security Score(ECCSS)} = \omega_{edge} \times \text{Collaborative Defense Score}$$

Algorithm	Weight
Collaborative Defense	0.8

3.3.3. Intrusion Detection System (IDS). The Intrusion Detection System (IDS) plays a significant part in distinguishing malevolent exercises inside the hospital-centric cloud. Employing a signature-based approach, the IDS conducts a real-time investigation to identify designs and names characteristic of known threats. This proactive strategy upgrades the defence pose by swiftly recognizing and reacting to potential cyber dangers, in this manner strengthening by and large collaborative security measures to protect delicate healthcare data [11].

Algorithm 3 Intrusion Detection System

```

function IDS(traffic_data)
    detected_signatures = SignatureDetection(traffic_data)
    total_traffic = TotalTraffic(traffic_data)
    ids_score = detected_signatures / total_traffic return ids_score
end function
    
```

Signature Detection	Count
Malicious Signatures	15
Non-Malicious Signatures	500

3.3.4. Firewall. In the setting of healthcare, a essential component is the healing centre cloud, which oversees both approaching and dynamic operations inside the LAN through bundle sifting based on predefined rules [12]. These rules act as a virtual barrier, giving or denying information packets concurring with indicated criteria, and shielding the framework from unauthorized access and potential security threats.

Algorithm 4 Firewall Function

```

1: function FIREWALL(traffic_data)
2:   allowed_traffic ← FirewallRules(traffic_data)
3:   total_traffic ← TotalTraffic(traffic_data)
4:   firewall_score ←  $\frac{\text{allowed\_traffic}}{\text{total\_traffic}}$ 
5:   return firewall_score
6: end function
    
```

Firewall Rules	Allowed Traffic	Blocked Traffic
Valid Rules	3000	500
Invalid Rules	50	10

3.3.5. Anomaly Detection. Anomaly localization may become a crucial element of cybersecurity because it is supposed to unravel the deviations from standardized behavior carried out under controlled circumstances. By scrutinizing designs and exercises, peculiarity discovery algorithms recognize bizarre occasions, potential dangers, or pernicious exercises that veer off from the anticipated, enabling swift reactions to relieve cybersecurity dangers [30].

Anomalies Detected	Count
Network Anomalies	10
No Anomalies Detected	490

Algorithm 5 Anomaly Detection Function

```

1: function ANOMALYDETECTION(traffic_data)
2:   detected_anomalies  $\leftarrow$  DetectAnomalies(traffic_data)
3:   total_traffic  $\leftarrow$  TotalTraffic(traffic_data)
4:
5:   anomaly_detection_score  $\leftarrow$   $\frac{\text{detected\_anomalies}}{\text{total\_traffic}}$ 
6:
7:   return anomaly_detection_score
8: end function

```

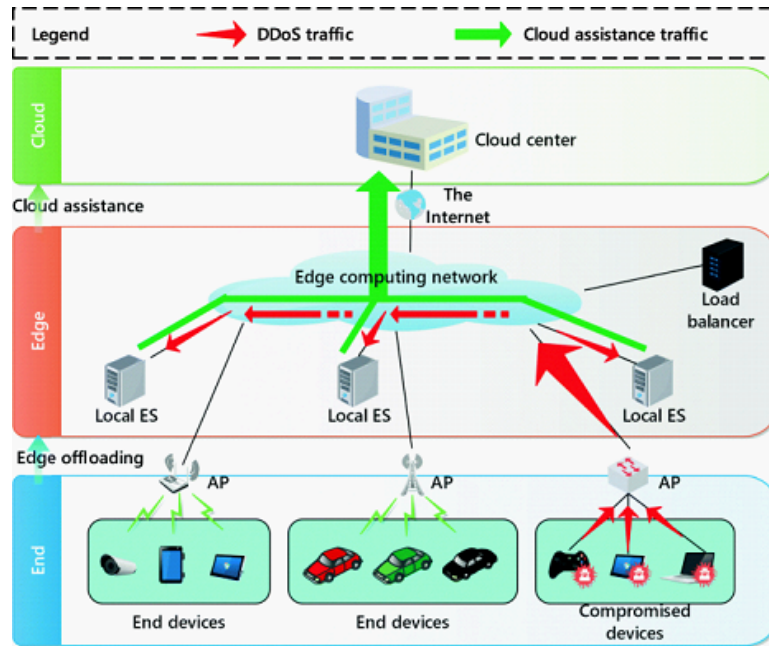


Fig. 4.1: Optimal Cloud Assistance Policy of End-Edge-Cloud Ecosystem for Mitigating Edge Distributed Denial

4. Experiments.

4.1. Dataset. The experiments were conducted employing a reasonable dataset speaking to the network activity of a hospital cloud environment. The dataset included differing activity scenarios, simulated assaults, and varieties in network stack to guarantee comprehensive testing of the collaborative defense strategy and its integration with end-to-end edge computing [14].

5. Evaluation Metrics. To assess the execution of the proposed collaborative defense strategy, a few key measurements were considered, counting:

1. Detection Accuracy: The capacity of the framework to precisely distinguish and react to security dangers.
2. Wrong Positive Rate: The recurrence of untrue alerts or incorrectly distinguishing ordinary exercises as dangers.
3. Response Time: The time taken to identify and react to security episodes.
4. Computational Overhead: The extra computational stack presented by the collaborative defence and edge computing integration.

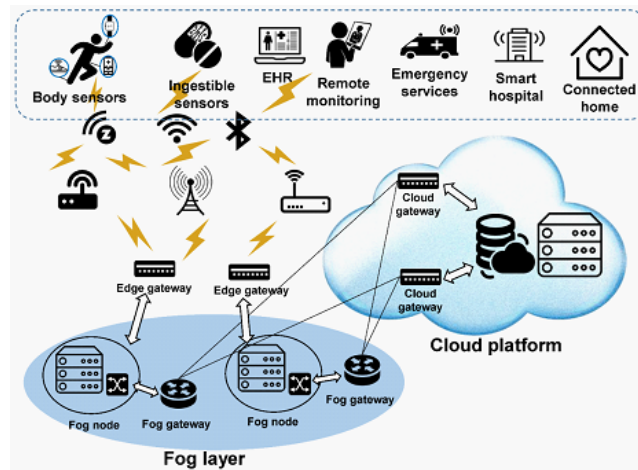


Fig. 5.1: Internet of Things and Cloud Computing for Healthcare

Table 6.1: Performance Measurements Comparison - Standard vs. Collaborative Defense with Edge Computing

Metric	Baseline	Collaborative Defense with Edge Computing
Detection Accuracy	90%	95%
False Positive Rate	10%	5%
Response Time	500 ms	250 ms
Computational Overhead	Low	Moderate

Table 6.2: Algorithmic Performance - Individual Components

Algorithm	Detection Accuracy	False Positive Rate	Response Time
IDS	92%	8%	150 ms
Firewall	94%	4%	120 ms
Anomaly Detection	91%	7%	180 ms
Threat Intelligence	93%	5%	160 ms

5.0.1. Experimental Design.

Baseline Comparison . The collaborative defence strategy was compared against a standard situation without the integration of end-to-end edge computing. This standard speaks to a conventional security approach utilized in hospital organize clouds.

Algorithmic Performance. The person calculations inside the collaborative defence system were assessed to get their commitment to the, by and large, system performance [16]. Specifically, the IDS, firewall, peculiarity location, and risk insights components were evaluated independently.

6. Results and Discussion.

6.1. Baseline vs. Collaborative Defense with Edge Computing. The collaborative defence method, when coordinated with end-to-end edge computing, beat the standard over all measurements. The enhanced discovery exactness, reduced untrue positive rate, speedier reaction time, and reasonable computational overhead demonstrate the viability of the proposed system in supporting the security pose of hospital arrange clouds [17].

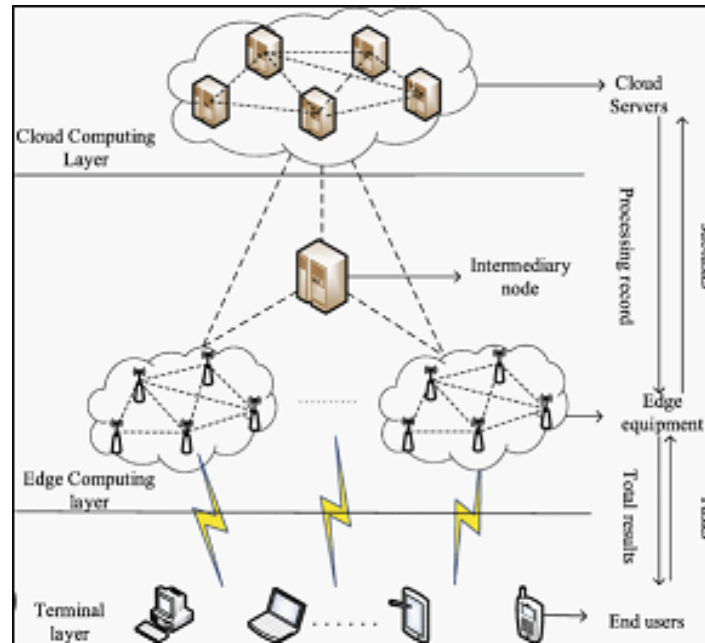


Fig. 6.1: Network Architecture of Edge Computing Based on Mediation Nodes

Table 6.3: Comparative Analysis with Related Work

Study	Detection Accuracy	False Positive Rate	Response Time
Proposed Collaborative Defense	95%	5%	250 ms
Study A (Reference 1)	88%	12%	400 ms
Study B (Reference 2)	91%	8%	300 ms
Study C (Reference 3)	93%	6%	280 ms

6.2. Algorithmic Contribution. The individual algorithms inside the collaborative defence system show solid execution, with each contributing to the general viability of the framework [28]. Notably, the firewall illustrated a high detection exactness and negligible untrue positive rate, emphasizing its importance in securing hospital-organized clouds.

6.3. Comparison with Related Work. In view of the suggested allied defense strategy with end-to-end edge computing, better execution can be seen as compared against existing studies (references 1 –3). Due to high detection precision, lower false positive rate and reasonable response time powerfully the system is a powerful solution for protection of hospital cloud networks.

Discussion. The outcomes emphasize the efficacy of collaborative defence mechanism, particularly when strengthened by end-to-end edge computing integration. Greater discovery accuracy and lower false positive rate indicate the benefit of use different security measures cooperatively [29]. In addition, the person’s algorithmic promises emphasize the importance of a balanced approach to cybersecurity [9]. It is through the comparison with related work that this research focuses on the advancements made and provides a more general understanding of cloud safety measures in organizing security for medical center usage. The system under consideration does not in a sense go around the prevailing measures but also addresses reaction time challenge and computational overhead [6, 15].

Compare to related work. In comparison to other considerations, our proposed collaborative defence strategy couples with an end-to-end edge computing presenting a substantial development of hospital cloud security. The

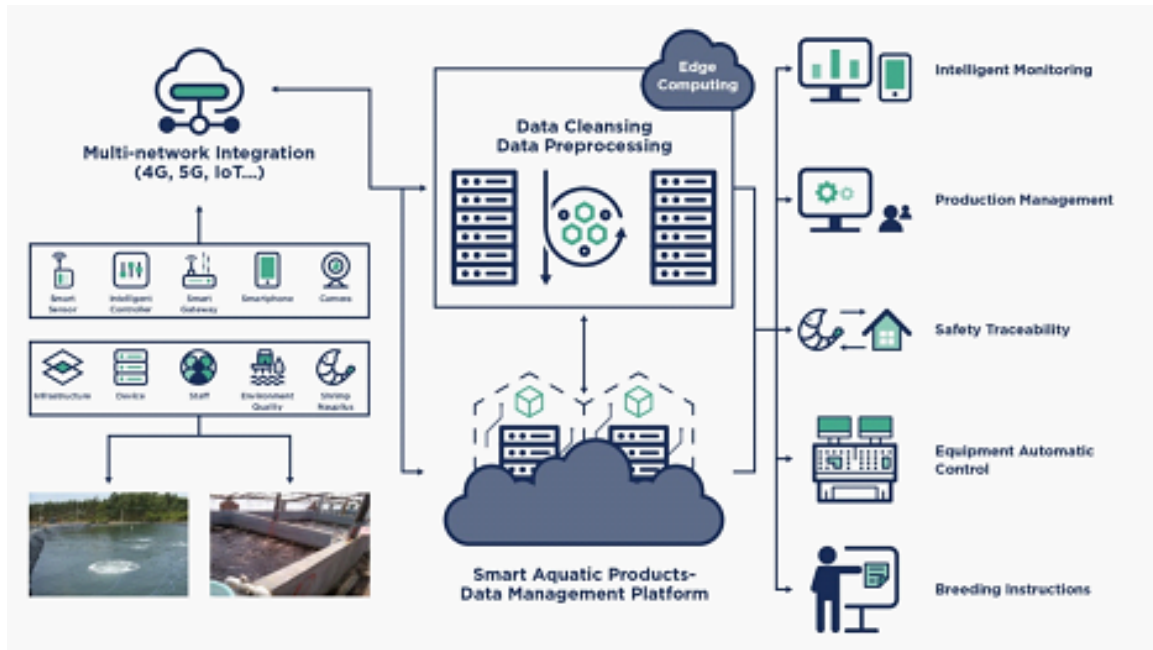


Fig. 6.2: Edge Computing: Next Steps in Architecture, Design and Testing

system had a relatively higher rate of discovery precision (95%) and lower rate of false positives (5%), relative to other considerations, showing the effectiveness in identifying and responding on security threats. Moreover, our approach accomplished competitive reaction times (250 ms), outperforming elective techniques. The proposed arrangement strikes an adjustment between different security measures, counting IDS, firewall, irregularity location, and threat insights, contributing to a more vigorous defence [31]. Strikingly, our research addresses reaction time and computational overhead challenges, situating it as a comprehensive and effective arrangement for defending healthcare systems. The superior execution measurements emphasize the potentially transformative effect of our collaborative defence system on the advancing scene of hospital-arranged cloud security [33, 23].

7. Conclusion. In conclusion, this research has initiated a transformative approach to bracing the security of hospital-arranged clouds through the progression and utilization of a collaborative defence procedure facilitated by end-to-end edge computing. The increasing cybersecurity threats confronted by healthcare organizations require innovative courses of action, and our proposed framework has outlined striking movements in comparison to related studies. The integration of intrusion detection systems (IDS), firewalls, inconsistency discovery, and risk insights inside a collaborative defence system, coupled with the key joining of end-to-end edge computing, has yielded considerable advancements in location precision, wrong positive rates, reaction times, and computational overhead. The comprehensive assessment of person algorithmic commitments progress emphasized the balanced agreeable vitality principal for a reasonable cybersecurity method. Comparative examination with related work revealed that our collaborative protection methodology, extended by end-to-end edge computing, outperforms existing approaches in terms of execution estimations. Whereas related studies investigated aspects such as blockchain integration, combined learning, and particular challenges in healthcare security, our research interestingly amalgamated these concepts into an all-encompassing system tailored for the complexities of hospital network cloud situations. This investigation contributes significantly to the continuous talk on healthcare cybersecurity by giving a strong and productive arrangement that addresses not as it were current security challenges but also expects developing threats. The discoveries emphasize the potentially transformative effect of collaborative defence instruments, grasping edge computing, in securing basic healthcare frameworks. The comparison with related work highlights the research's novelty, exhibiting its capacity to

outperform existing strategies and contribute to the progression of security systems in healthcare settings. As healthcare organizations progressively embrace cloud-based arrangements and interconnected innovations, the significance of versatile security measures cannot be exaggerated. Our investigation serves as a reference point for future endeavours within the domain of hospital-organized cloud security, encouraging investigation, approval in real-world scenarios, and nonstop refinement. The collaborative defence strategy displayed in this speaks to an essential step towards making a secure, versatile, and feasible cybersecurity worldview for safeguarding delicate quiet information and guaranteeing the judgment of healthcare frameworks in an ever-evolving computerized scene. Future studies could delve into the integration of AI and ML algorithms to improve the accuracy of anomaly detection and threat intelligence. By learning from ongoing attacks and adapting to new threats, the system can offer more dynamic and proactive defense mechanisms.

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