Taxonomy towards Security using Encryption Algorithms in IOT-Based Healthcare System

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Abstract: As IOT has emerged itself in multiple domains that allow proper communication and connectivity worldwide. Due to that multiple attacks and threats arises, which creates number of solutions towards the same. It also raises some important questions and challenges for the security of systems, devices and networks. Multiple algorithms have been devised earlier for wired, wireless, and M2M communication which are not feasible for IOT devices due to low battery life and short range devices. The author focuses on detail analysis of various algorithms, encryption techniques used for preventing and avoiding security threats in IOT-based healthcare systems.

Keywords: encryption, data privacy, security threats, security.

I. INTRODUCTION

The IOT has not been around for very long. In early 1800s there have been visions for using machine for communication from one another. It provided direct communication since the first landline was developed in 1840s. Then an era of wireless telegraphy took place in 1900. After that in 1950 the use of computer became started and internet became the significant component of IOT. In 1999, Kevin Ashton, the executive director of Auto ID labs at MIT emerges the concept of IOT in his speech and believed that RFID is requisite for using IOT for communication. By the year 2013 IOT boomed internet market and almost covers all domain whether it is embedded system, wireless communication, electrical system (smart grid, smart meter) and machine communication. It allows multiple devices to interconnect through the internet and makes user time more productive [1]. For example, consider a situation where your printer has low pages and it can automatically order pages through internet or your wearable devices inform you when and where a person can utilize his time most effectively. This is possible by the implementation of IOT. Google echo dot and alexa are one of the best examples that provides ample of information like weather forecast, traffic congestion, daily news, appointments, read mails, current affairs and it can also provide entertainment. The IOT provided innumerable options to intercommunicate devices and equipments. IOT can be a used in any communication like smart home, smart city, smart industry, smart meter, smart industry etc. Nowadays, IOT has become the key aspects of healthcare management system. The amalgamation of IOT with healthcare has become the new revolution towards medical science in real time system. Ubiquitous health monitoring provides circumstantial information about old age and ill patients.

Continuous monitoring and prior response to medical situation not only leads to increase the life of patient but it also allows families to provide better healthcare to their kids and elderly people[2]. For implementing IOT based healthcare system biosensors, RFID based IOT distributed architecture, wearable devices and mobile IOT applications can be used. As the evolution of IOT provided new wings to the society it also imposes certain challenges also[3]. As the advancement IOT in healthcare increases it also attracts various challenges towards security and privacy issues. Sensors and video cameras capture information from public areas and store the same in local or cloud based storages. These days the customers are forced to surrender their privacy for the sake of information. Hence security, privacy, data sharing and trust management should not be taken lightly, as it imposes a lot of risk towards the usage of IOT [4]. Significantly a number of studies have been done on providing security to IOT based healthcare system. The literature shows some problem against security and their significant solutions in different areas like health care monitoring and management of data for kids, adults and elderly people using different cryptographic techniques. Hence the following contributions have been summarized in this paper [5]:-

1. Represents various states-of-art for existing privacy and data integrity techniques.
2. It provides classification and uses of different cryptographic techniques.
3. It highlights future work for achieving essential security systems.

II. TAXONOMY OF STUDY

As IOT expanded their wings in different domains in society it requires the amalgamation of sensors with cloud computing technologies for storage, access and management purpose. The use of S-Cl in healthcare allows various cryptographic techniques to be efficiently implemented for IOT as shown in fig1. Some of them are discussed below:
Taxonomy towards Security using Encryption Algorithms in IOT-Based Healthcare System

![Diagram](Image)

**Figure 1: S-CI based algorithm**

a. Chaotic maps [6], in 2016, author proposed framework for continuous monitoring of patients data with use of chaotic map security system. The problem with existing system was the data passes through public and insecure communication channel. The idea to design such algorithms is to achieve data privacy and security of sensor data in cloud structure. The first step to access this system is to register itself to trusted cloud system to get chebyshev chaotic map-based certificates. When any patient visited to health care centre, doctor and patient upload medical report to cloud centre. The data will be available in cloud whenever it is required by trusted authority. In case of emergency, the medical caregiver directly access cloud centre data of patient and treat them without wasting anytime. This helps patient and their family to closely monitor and manage chronic diseases effectively. It makes difficult for an attacker to crack secret parameter based certificate as it is only known to the concerned ones. But the average communication cost is not evaluated properly.

b. Hybrid algorithm [6], as the name suggests this cryptographic technique makes use of both symmetric and asymmetric encryption techniques. Author explained sensor and cloud based computing based secure IOT scheme for elderly patients using mobile applications/devices. Before initiating medical process, both medical officer and patient need to register in key generation centre via secured channel. It helps to create secure communication channel among patient and caregiver. After visit the medical report will be uploaded to cloud by medical staff officer and also the same report with test evaluations is uploaded by patient using mobile device. On server end, the received data is compared to the standard values which are already stored in the database for proper evaluation. After comparison, if the received data values are greater than stored standard values it means emergency condition arises and same should be inform to emergency family contact. Otherwise the report is provided to patient mobile device. For the same it uses double layer encryption technique for different layers of security like for data collection and storage level it uses confidentiality and integrity measures, for data transmission over network it uses security and confidentiality and for accessing stored data it uses authentication and authorization.

In Hybrid algorithm, symmetric encryption is used because of its efficiency as the same key is used for encryption and decryption process. Whereas, asymmetric encryption is used due to its public, private key structure and easy to use its distribution during transmission [5]. The advantage is it reduces wastage of medical resources and provides better security. But it is difficult for elderly people to use and more computation is required.

c. Attribute based encryption-for achieving security in IOT communication, ample of algorithms are been designed using ABE. In 2015, a Mask-certificate ABE has been introduced for secure data transfer. The main aim of this study is to achieve privacy and access control for secure transfer and storage of PPPs data. It consists of seven algorithms like setup, key generation, certificate generation, encryption (DO and ESP) and decryption.

Then in 2016, author expanded its own algorithm into another scheme for secure access control. It makes use of mobile based data collection using S-CI in bulk. It performs masking of plaintext using specific signature systems and also performs authorization. The scheme was convenient, easy to compute and has less storage cost. Afterwards in 2017, a new mechanism based on mobile healthcare social networks (MHSN) introduces which also uses ABE and identity based encryption scheme. The main focus of algorithm is data privacy and security of patient’s data and social data together with proper access control as depicted in Table1. It makes use of independent algorithm for encryption and decryption of data. With that it show more efficient and secure algorithm than other schemes.

### Table1: Variations of ABE in healthcare

| Algorithms       | Achieved                                      | Controlled By         | Emergency management | Limitations                        |
|------------------|-----------------------------------------------|-----------------------|----------------------|------------------------------------|
| ABE Scheme       | Avoid unauthorized access control             | Third-party trusted authority | None                 | Do not provide security with access control |
| MC-ABE           | Secure transfer and storage of data, also achieved access control and data privacy | Data owner | None | Need to improvise scalability       |
Extended ABE | MC-ABE | Fine access control | trusted authority | None | Real access of patients data is not available
---|---|---|---|---|---
MHSN | Data privacy is good | trusted authority | None | Storage cost is not calculated

Gope-2016 uses BSN –care (Bio-sensor network) for healthcare system. BSN is an intelligent and low power consuming sensor nodes that can be used on or around human body. The use of BSN can provide all the information and report by monitoring human body. BSN system uses two types of sensors in-body and on-body. The in-body sensors allow communication between implanted sensors and base station whereas on-body sensors can provide communication between wearable devices and their coordinators. The BSN architecture consists of invasive and non-invasive devices.

Multiple type of sensors are integrated with bio-sensors for gathering physiological parameters like ECG, EMG, and BP etc from human body. These parameters are passed to a coordinator called as local processing unit (LPU). LPU can be any hand held devices like smart-phone PDA etc. It works as a router between BSN nodes and server system. When any kind of abnormality can be detected in bio-sensors implanted human body, LPU informs the same to the person who uses wearable devices and also the same information can be stored in server. The server keeps update the database and analyses the data the stored data to find abnormalities. If the degree of abnormalities goes high, it informs to family member of patient or nearby physician. For proper working of this scheme some parameters have been used known as family response (FR), physician response (PR) and emergency response (ER). Author uses Boolean variables true or false for representing the condition and action against the same. Table 2 represents data monitored from patient and action taken.

| Data capture through sensor (BP) | Condition | Action taken | Response against action |
|---|---|---|---|
| BP≤120 | - | No problem | Not required |
| BP>140 | Not serious | Inform to FR | FR:True/False |
| BP≥180 && FR=F | Serious | Inform to PR | PR:True/False |
| BP>180 && PR=F & &TR=F | Emergency required | INFORM to ER | ER:True/False |

BSN-care scheme will provide greater help to monitor old age people and patients at home.

One question arises that how this algorithm i.e. BSN-Care achieves security? For answering the same author introduces lightweight anonymous authentication protocol. Protocol basically works on two phases in which phase 1 explains about registration process and phase 2 defines anonymous authentication phase. Phase 2 provides end to end security i.e. BSN server and LPU will authenticate each other before communication. By using this protocol the author achieves mutual authentication, anonymity and secure localization property. It also helps to reduce computation overhead and defeat replay attempt.

e. The author proposes an anonymous authentication scheme which ensures sensor untraceability, anonymity, resistance against replay and clone attacks. This scheme applied over distributed IOT system architecture [15]. Distributed architecture contains four components like authenticated cloud server (ACS), cluster-head (CH), home IOT server (HIOTS) and sensor node.

- Sensor nodes- these are edge devices which can move from one network to the other for information gathering.
- Cluster-Head- CH are the relay devices which conveys the sensor encoded data to HIOTS. CH also verifies the authentication of sensor nodes to HIOTS.
- HIOTS- HIOTS works as gateways and are responsible for the authentication of sensor node. HIOTS verifies the originality of sensor nodes. It also checks whether sensor node can enter CH or not.

The communication of devices involves following steps:

1. Firstly all the CH and sensor nodes need to register themselves to HIOTS.
2. Then HIOTS will send back security credentials to the registered devices.
3. In next step HIOT will register itself to ACS. ACS allows the interaction of two HIOTS.
4. If user wants to access some real time data from sensor node, which is available at HIOTS, then HIOTS server need to register users through ACS.
5. When sensor nodes moves from one network to another then current HIOTS checks to find the original HIOTS of moved sensor node to verify its originality.

Applications- It can be used in RFID based distributed system applications where a person having RFID tag sensor can move between building blocks. In that case tag reader worked as CH and backend data server as HIOTS. Another application is health care based distributed system with the help of bio-sensors and mobile- IOT applications.

f. The weave of cloud computing with wireless body area networks has strengthened the attributes like storage, range capabilities, power and management [6]. Chronic patients can be addressed more effectively with information made available through ubiquitous healthcare monitoring. Such information is helpful not only for elderly people but also to the young generation in fighting for chronic diseases. The literature explains patient’s physiological parameters i.e. PPP framework for chronological patients as follows:-

a. First find out all the basic requirements (preliminaries)
   b. Identify the entities

Table 2: Data monitored from patients

| Data capture through sensor (BP) | Condition | Action taken | Response against action |
|---|---|---|---|
| BP≤120 | - | No problem | Not required |
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| BP≥180 && FR=F | Serious | Inform to PR | PR:True/False |
| BP>180 && PR=F &&TR=F | Emergency required | INFORM to ER | ER:True/False |
c. Then select appropriate technique

d. Access patients physiological parameters

e. Perform security analysis

f. Last but not least, calculating system performance.

For providing security in healthcare data management system and electronic healthcare system, S-CI makes use of Attribute based encryption technique. It also uses different algorithms for e-health systems such as multi-valued encryption, tri-mode algorithm, number theory, hybrid encryption, priority based data forwarding and dynamic probability packet marking. Table 3 represent comparison of various cryptographic algorithms used in IOT-based healthcare system.

| Authors             | Algorithm implemented                     | Methods/Solutions                  | Security Services                        | Pros                                                                 | Cons                                                                 |
|---------------------|-------------------------------------------|-------------------------------------|------------------------------------------|----------------------------------------------------------------------|----------------------------------------------------------------------|
| Wood et al[7]       | AES & MAC                                 | ALARM-NET (Query based system)      | Authentication using Secure remote protocol | Provide secure end-to-end communication, reduces power consumption and overhead | Highly susceptible to confidentiality attack                           |
| Huang Y.M [8]       | AES and polynomial based encryption (for point-to-point communication) | Wireless sensor motes with Bluetooth chip | Authentication mechanism for Bluetooth | Low power consumption, prevent replay and impersonation attack | Does not detect chronic patients location |
| Yanmin et al [9]    | Diffie-Hellman and symmetric key algorithm | Finger based policy (event-condition-action mechanism) | Authentication and authorization | Guarantees data integrity | Does not support dynamic code modification |
| Ko J et al [10]     | Data compression algorithm                | MEDiSN                              | Collection tree protocol (CTP) | Protection done by hop-to-hop basis | Need more security measures against attacks |
| Yu et al [11]       | Attribute based encryption                | Fine grained distributed access control (FDAC) | SHA-I and AES | Distributed data storage | Due to distributed data storage more security is required |
| Zhaoyang et al[12]  | Hash based and MAC                        | BAN (plug n play)                   | Improved jules sudan and key agreement algorithm | Improves data confidentiality, security and data authentication. Low overhead | Vulnerable to Sybil, sinkhole and wormhole attacks |
| Hu C et al [13]     | Fuzzy ABE and Digital signature           | FABSC (Based on fuzzy signature and encryption) | Access control and authentication | Error tolerance and resistance against collusion attack | Access control structure not implemented |
| Chunhua et al [14]  | ECC                                       | RFID based health care system       | RFID authentication protocol             | Guarantee secure communication | Computational and communication cost is high |
| Gope et al [15]     | Authentication protocol                   | Distributed IOT system              | Anonymous authentication scheme          | Avoid cloning, replay attack and sensor anonymity | Some of the attack resistance property is not considered |
| Xinghua et al[16]   | Lightweight Authentication protocol        | Dolev Yao model (using k-pseudonym)  | Lightweight anonymous authentication protocol | Avoid resource consumption, easy to implement and highly efficient | Generation of K-pseudonym poses burden on server |
| Wrona et al [17]    | ABE with symmetric algorithm              | Object level protection and cryptographic access control | Cryptographic access control | Used in military applications, objects can be protected end-to-end | Large amount of data is crucial to manage |

Table3: Comparison of cryptographic algorithms in healthcare system
Amin et al [18] | Hash function based mutual authentication | Health monitoring using AVISPA tool | Session key negotiation protocol | Reduces energy consumption, offers data CIA, resist untraceability attack, offline password guessing attack and impersonation attack | Not implemented in IOT based environment |
|-----------------|--------------------------------|----------------------|-------------------------------|-------------------------------------------------|-----------------------------------------------|
| Prosanto Gope et al [19] | One way hash function, EX-OR operation and offset codebook based encryption | Secure IOT based HCS using LAAP | Lightweight anonymous authentication protocol | Provide data security, privacy, integrity, anonymity and authentication | High communication overhead |
| Yeh et al [20] | SHA-3, EX-OR and random number generation function | Secure IOT based healthcare system | Lightweight crypto module | Achieve security and system efficiency | High computation cost |
| Gope at al [21] | SHA-256 and EX-OR | MAKA Scheme | Mutual authentication and Fair key agreement | Protection against known session key attack, insider attack and forgery attack | Not tested against other attacks |
| Li et al [22] | Chaotic maps | Secure mobile based WBAN | Security and privacy | Protects patient privacy, difficult to crack certificate and reduces system overheads | Average access time ignored and average communication cost not calculated |
| Hu. et al [23] | Hybrid encryption technique | Certificate based S-CI | Data Privacy and Security | Used for continuous monitoring of elderly people, emergency mode working | Not easy to use for elderly people, take more calculation time |
| Li X et al [24] | SHA-I | WBAN | Lightweight single round authentication protocol | Increases system security, resist forgery, DOS, replay and insider attack | Protocol fail to include GPS data |
| M. Prabhu et al [25] | Private key encryption | E-Health monitoring | Use of Arduino | Provides authentication and addresses privacy and security issues, cost efficient, due to periodic update system works faster for patients, provided scalable and robust end-to-end security | - |

Comparison of algorithms provided roadmap of innovative findings and research in healthcare system. Healthcare monitoring needs proper attention in terms of user-friendly applications, effective management of PPPs data, proper access control, emergency support to patients, network and cloud security. It also requires lightweight algorithms with proper security measures to protect data transfer and communication in cloud. Access control, authentication, data privacy are major requirements for implementing a secure and integral algorithm in healthcare system. Use of arduino, beaglebone and raspberry pi has been used for hardware implementation of the IOT with cloud. It shows that use of RFID authentication protocol provided greater secure communication.

### III. CONCLUSION

This study has provided a detailed literature review of various algorithms used for avoiding attacks and threats in healthcare system. As the study shows, healthcare management can be managed through mobile-based and e-based healthcare system, it provided a wide scope to the researcher for future work. However this research area lacks in providing better security to IOT communication along with real time implementation, integration of patients data, lack of emergency call, lack of user friendly accessing of data through GUI interface, lack of efficient access control and lack of proper data sharing and management. The literature suggests that all cryptographic schemes are not applicable in all domains of IOT.
Hence an efficient and secure algorithm is required to achieve data access control, integrity, confidentiality. The framework for future work is also discussed.

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