Debian Med
A Debian Pure Blend for medical care and microbiological research

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Debian

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1. Short intro

2. The Blends concept - Debian Med as a model

3. Graphing Debian Med
History
History
What is Debian Med?

practice management system

Debian Pure Blend for medical care and microbiological research
Debian Med focuses on Health Care applications
The name

- «Debian Internal Projects» became
- «Custom Debian Distributions» → complete failure
- DebConf 2008 «Debian Internal Solutions»???
- People popped up for the only purpose of bikeshedding
- Vote ended up in «Debian Pure Blends» in short «Blends»
Similar structures in other distributions

- Fedora has SIGs (Special Interest Groups)
  - *Fedora Medical SIG*
  - *Fedora Science SIG*
- *OpenSuSE Medical*
  - shamelessly copied *Debian Med tasks* pages without backing it up by technical work
  - attempts to get contact failed
- *Ubuntu-Med*
  - seems to lag behind current Ubuntu
  - quite different focus than Debian Med
- *FreeBSD Ports: Biology*

→ *Debian Med has by far largest team and amount of packages*
Purpose of Blends

- Making a certain topic "hot"
- Attract users of the specific working field interested in Debian
- Teach users & developers how to work together with Debian (via Blend team)

* A Blend is a way to advertise Debian in a specific work field
Why considering Debian Med a model?

- One of the first Blends
- Medical software collection has bad chances to survive → but it did
- Shows how to form a team based on specific topic
- Pushes Debian into a field of dominant proprietary software

*Turn Debian into the distribution of choice for all medical fields*
Blends tools and formalisms invented in Debian Med

- General creation of metapackages based on tasks files (*blends-dev*)
- Web sentinel (*tasks* and *bugs* pages) based on tasks files
- Handling of scientific citations
- Subsectioning of *DDPO pages* according to tasks
- Making use of *UDD* for several purposes (web sentinel, citations, prospective packages in VCS, upload + bugs statistics)
- *Debian Med policy*
- *Mentoring of Month*
Debian Med is good for Debian

According to a questionnaire in Wiki

- Debian Med has 23 DDs+DMs
- 10 DDs *because* Debian Med exists;
  4 DDs before Debian Med started
- 7 out of the 10 above extended their activity to other fields in Debian
- 8 out of the 10 above are active in Debian Med
Top 10 Up uploaders of Debian Med team

Andreas T 804
Charles P 432
Steffen M 309
Mathieu M 159
Steve M. R 102
Aaron M. U 84
Laszlo K 66
Thorsten A 53
Dominique B 41
Olivier S 38
Top 10 People discussing on Debian Med mailing list

- Andreas T: 3455
- Charles P: 1185
- Karsten H: 524
- Mathieu M: 407
- Steffen M: 385
- David P: 315
- Olivier S: 254
- Nelson A. de O: 191
- Sebastian H: 189
- Yaroslav H: 176

Years: 2002 to 2013

0 to 800 messages.
Top 10 bug hunters of Debian Med packages

- Andreas T 380
- Charles P 167
- Mathieu M 91
- Steve M. R 74
- Olivier S 45
- Aaron M. U 35
- Steffen M 33
- Dominique B 28
- Philipp B 13
- Laszlo K 12
Top 10 commiters to Debian Med VCS

- Andreas T 4388
- Charles P 3059
- Mathieu M 1544
- Steffen M 1002
- Olivier S 749
- David P 538
- Steven M. R 429
- Laszlo K 387
- Aaron M. U 274
- Thorsten A 215
Number of Packages in selected tasks

[Graph showing the number of packages in various fields from 2003 to 2013. Fields include bio, bio-dev, epi, imaging, imaging-dev, practice, psychology, and tools.]
Healthy growth

- After some stagnation in the beginning growth in all measures
- Warning: Also the amount of own work is growing (even if work is split on more shoulders)
- Strategy: Making Blends tools even more attractive to
  - make Debian Med more attractive to users + developers
  - make Blends more attractive for teams inside Debian
This talk is available at
http://people.debian.org/~tille/talks/
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