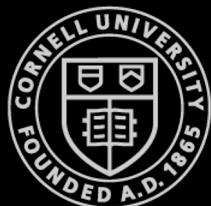
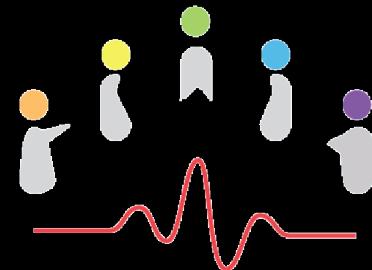




HOME OF THE
**JACOBS
INSTITUTE**



Closing the Sensing-to-Intervention Loop in Precision Psychiatry



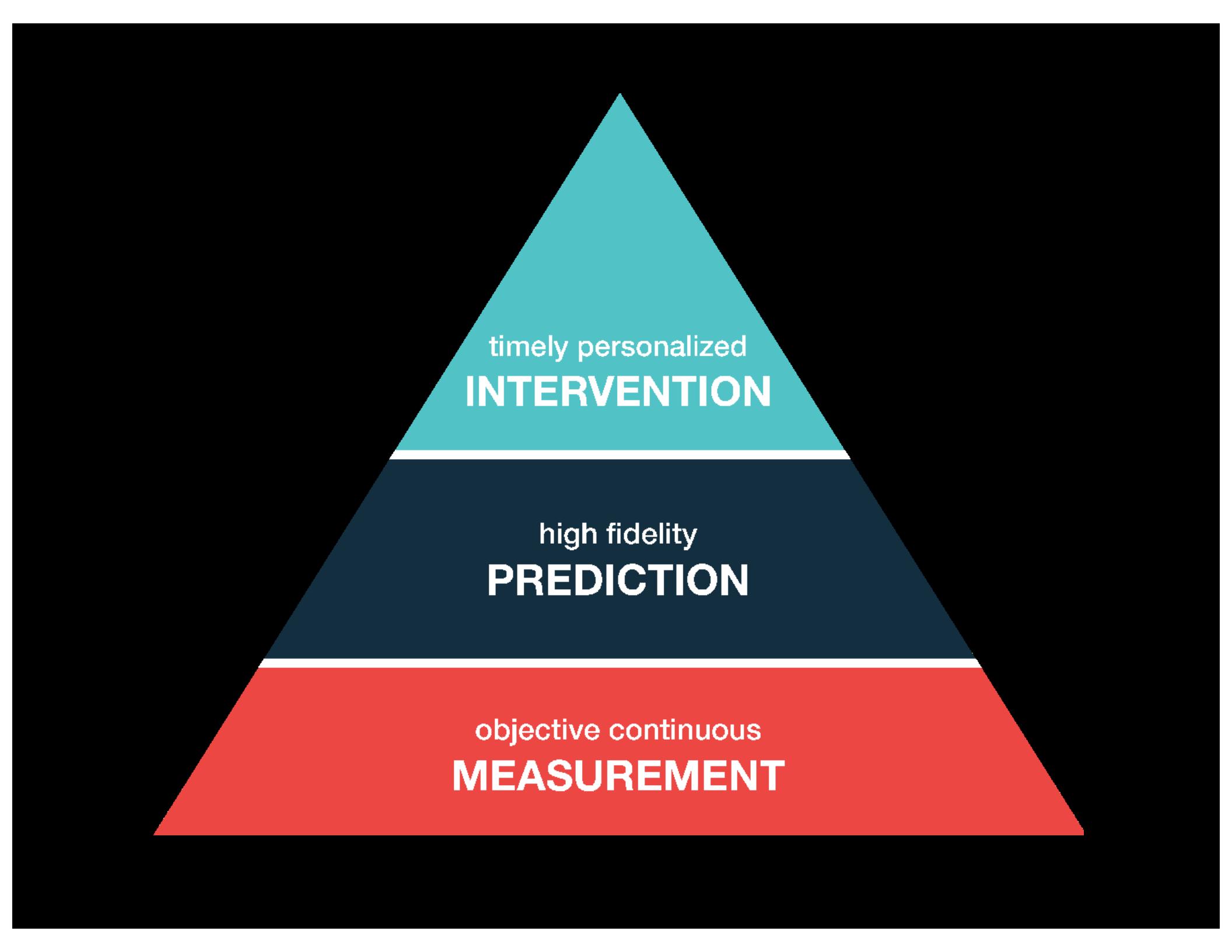
Tanzeem Choudhury
Professor
People-Aware Computing
Cornell Tech



Co-founder
HealthRhythms Inc



Senior Vice President
Digital Signals, Therapeutics, and
Mental Health
Optum Labs, United Health Group



timely personalized
INTERVENTION

high fidelity
PREDICTION

objective continuous
MEASUREMENT

Measurement Gap

PATIENT HEALTH QUESTIONNAIRE (PHQ-9)

NAME: _____

DATE: _____



Over the *last 2 weeks*, how often have you been bothered by any of the following problems?
(use “✓” to indicate your answer)

	Not at all	Several days	More than half the days	Nearly every day
1. Little interest or pleasure in doing things	0	1	2	3
2. Feeling down, depressed, or hopeless	0	1	2	3
3. Trouble falling or staying asleep, or sleeping too much	0	1	2	3
4. Feeling tired or having little energy	0	1	2	3
5. Poor appetite or overeating	0	1	2	3
6. Feeling bad about yourself—or that you are a failure or have let yourself or your family down	0	1	2	3
7. Trouble concentrating on things, such as reading the newspaper or watching television	0	1	2	3
8. Moving or speaking so slowly that other people could have noticed. Or the opposite—being so fidgety or restless that you have been moving around a lot more than usual	0	1	2	3
9. Thoughts that you would be better off dead, or of hurting yourself in some way	0	1	2	3

add columns: + +

(Healthcare professional: For interpretation of TOTAL,
please refer to accompanying scoring card.)

TOTAL: _____



I didn't want to wake up. I was having a much better time asleep

I barely had any social contact last week

My legs bounce, speech goes fast ... I even eat too fast

My wife can tell by my walk

Now we can continuously track subtle signals that get missed in current clinical practice



Continuous measurement of actionable signal

Raw data
[phones &
wearables]

Second-Level
Behaviorogram

Behaviors

Disease-
specific Models



social

physical

sleep

circadian

psycho-motor

Patient
trajectories

Score
Predictions

Battery life
management,
bandwidth
management, data
coverage



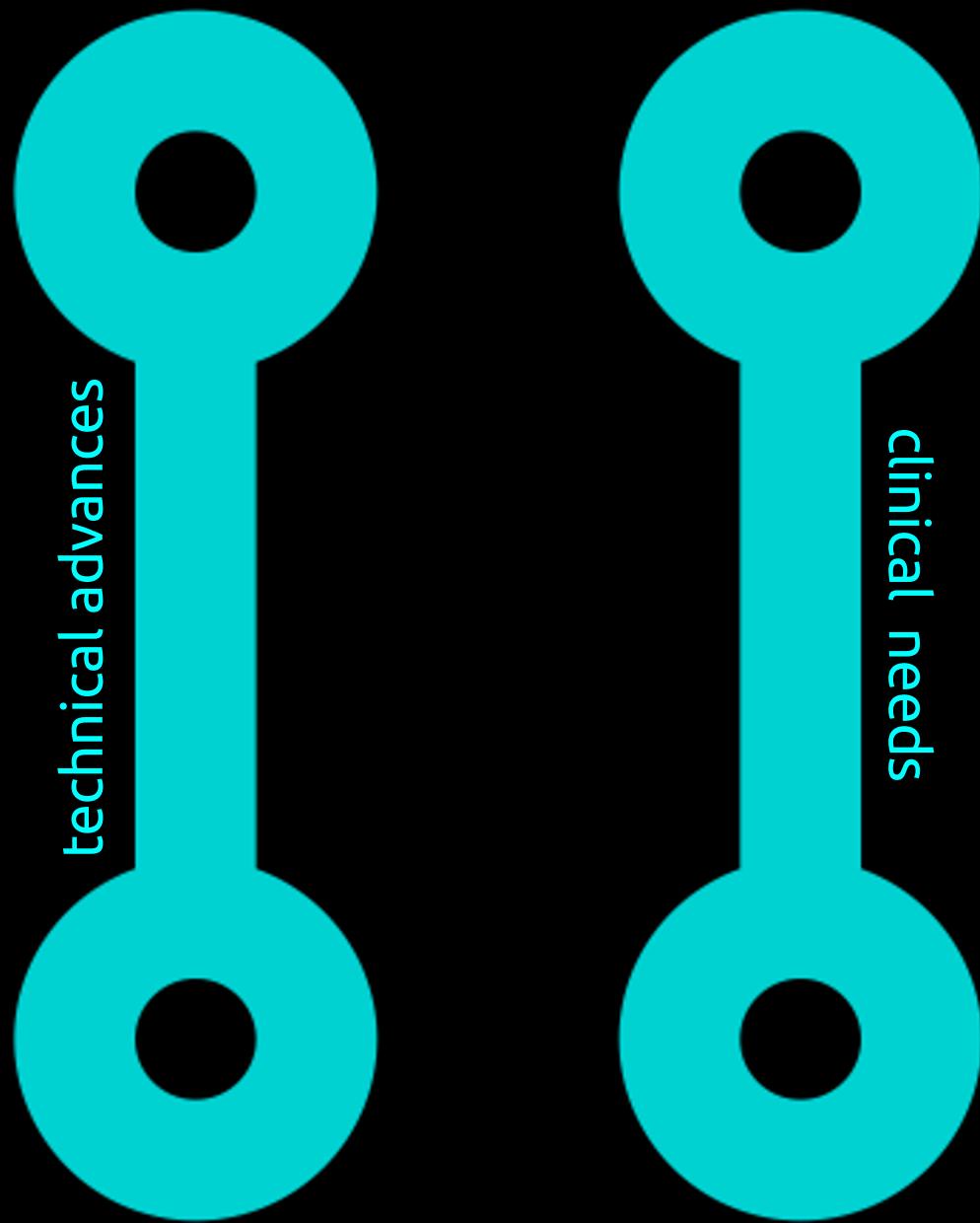
Data cleaning,
aggregation

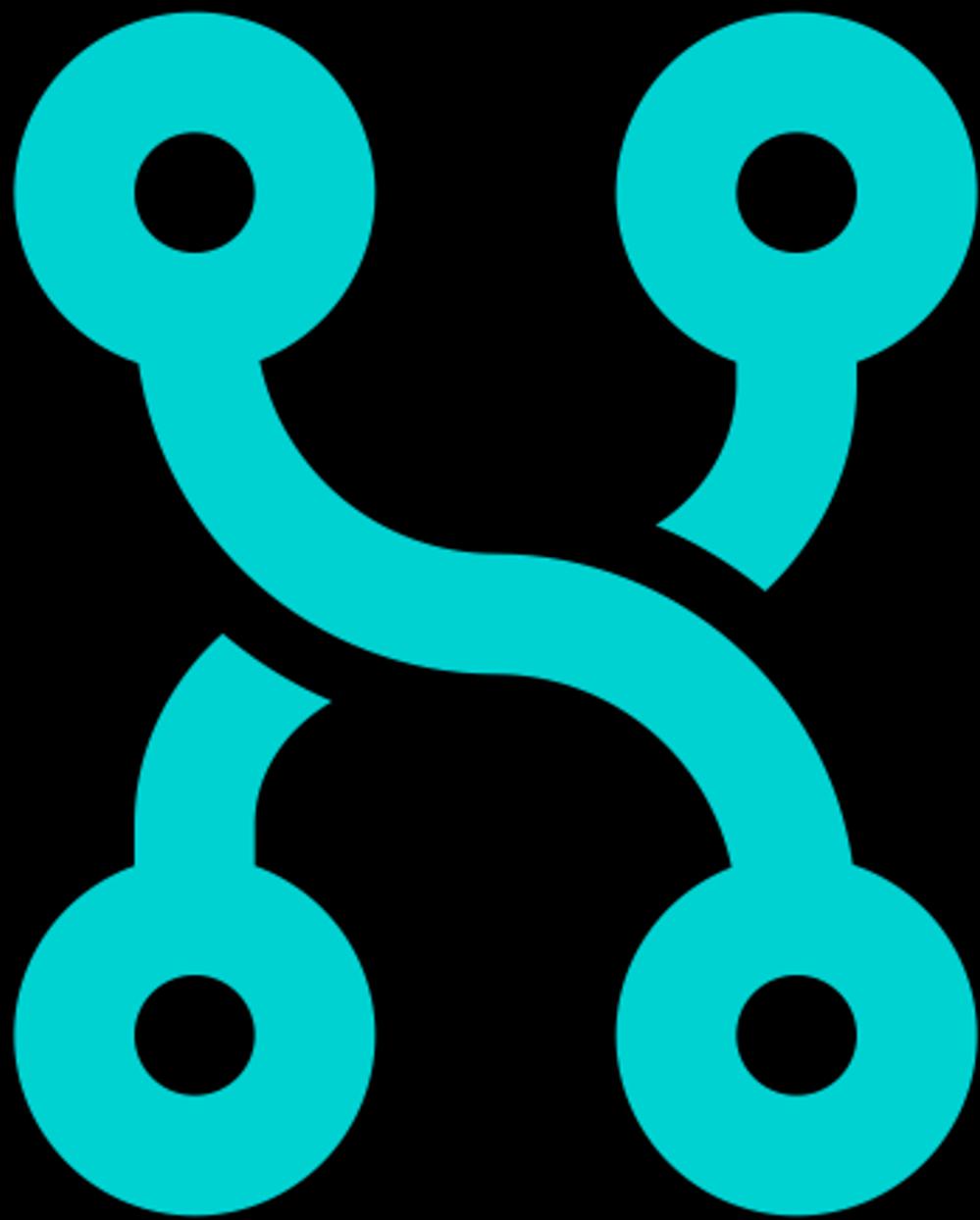


Clinically-informed
feature modelling



Machine Learning



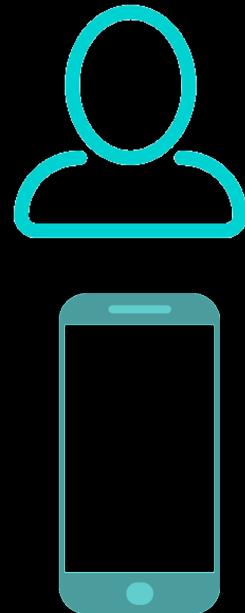


Can we create a **system that can predict behavior changes that precede a major psychiatric event?**

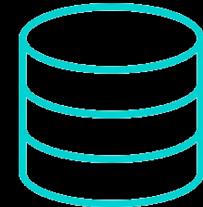
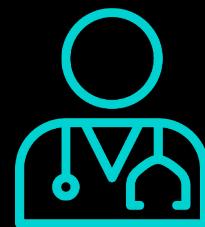
Case study: CrossCheck

Detecting mental health changes in individuals with Schizophrenia

Psychiatric hospitalization
within past 12 months



1 year randomized control trial

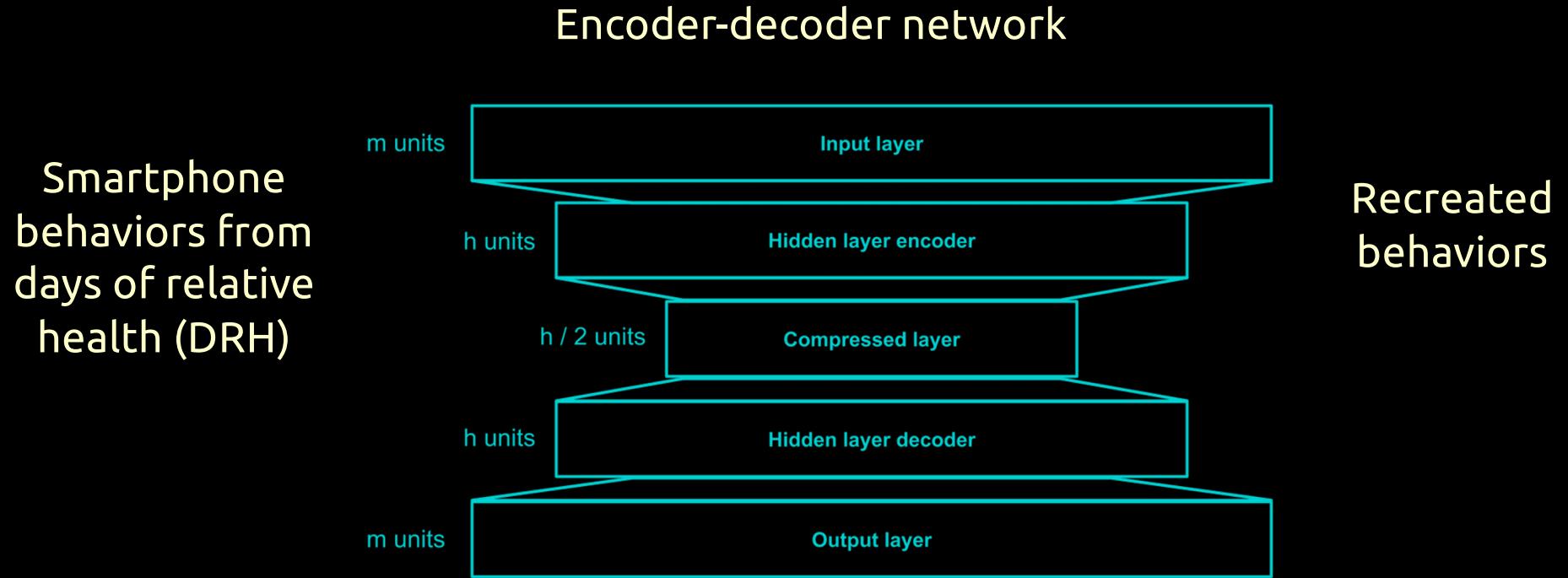


- 60 participants
- 20,137 days of continuous passive sensor data
- 726 days of data within 30 days of relapse

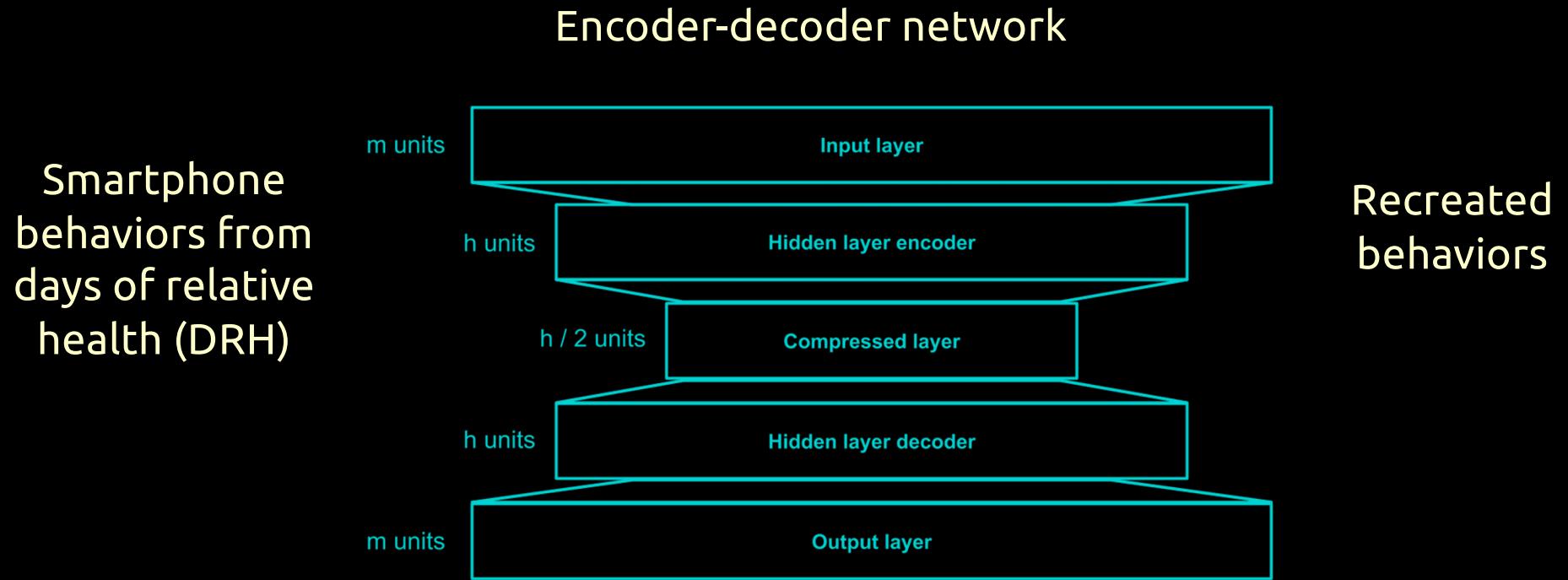
- Passive sensing data
- Ecological momentary assessment (EMA)

- Month doctor visits
- Brief psychiatric rating scale (BPRS) scores

Training an anomaly detection system for human behavior



Training an anomaly detection system for human behavior

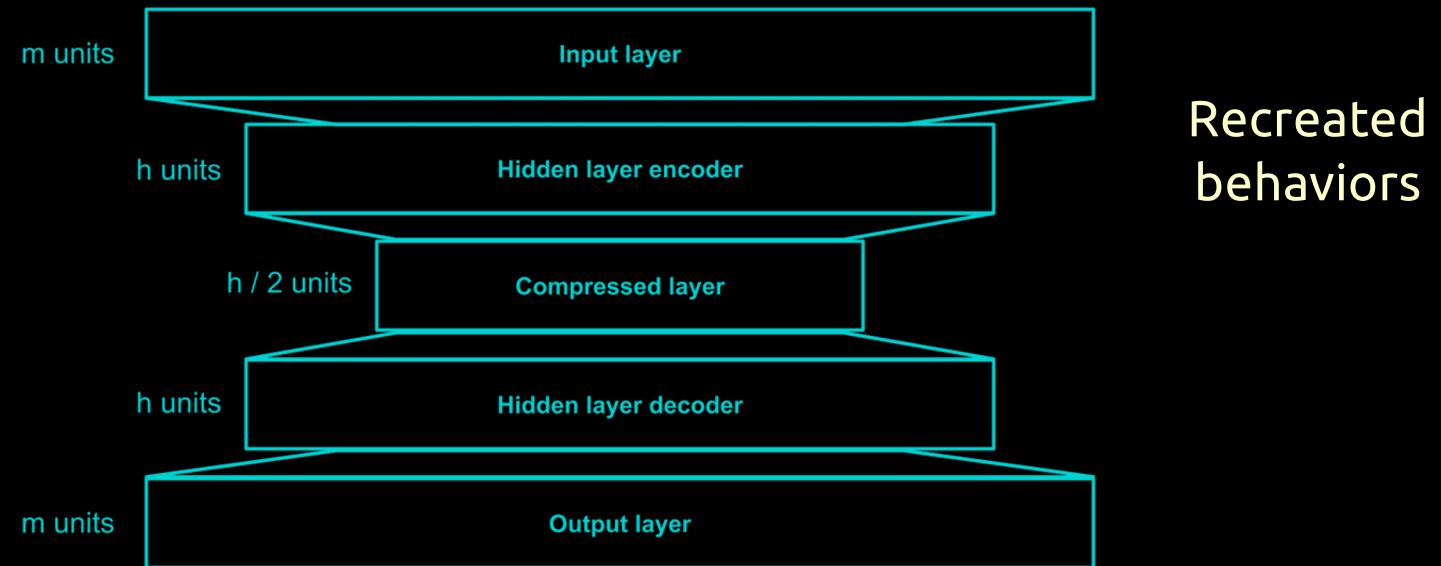


Hypothesis:
Sustained deviation
from routine
behavior will occur
before relapse

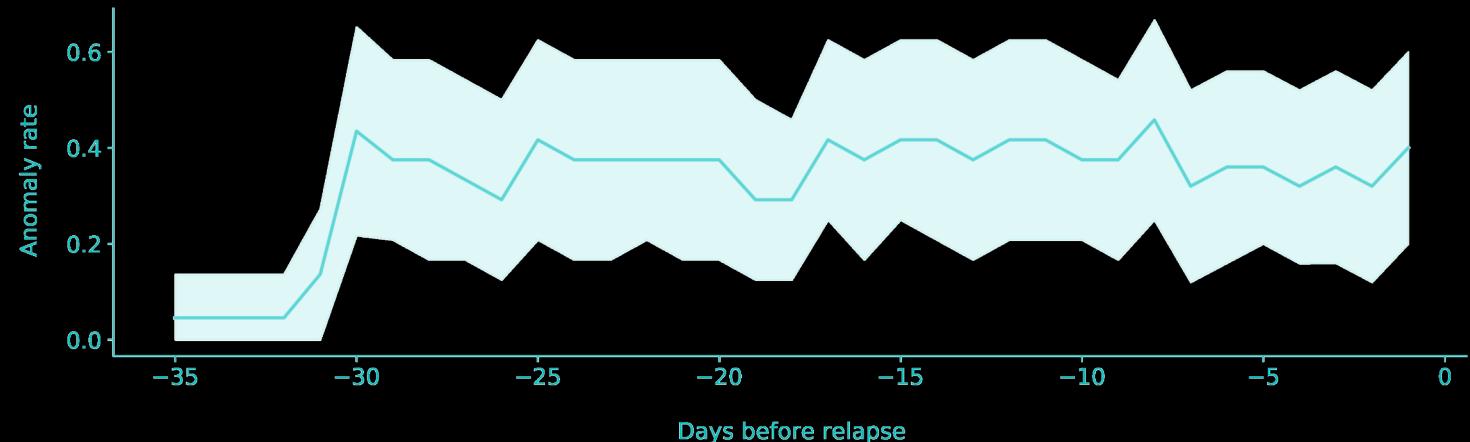
Training an anomaly detection system for human behavior

Smartphone
behaviors from
days of relative
health (DRH)

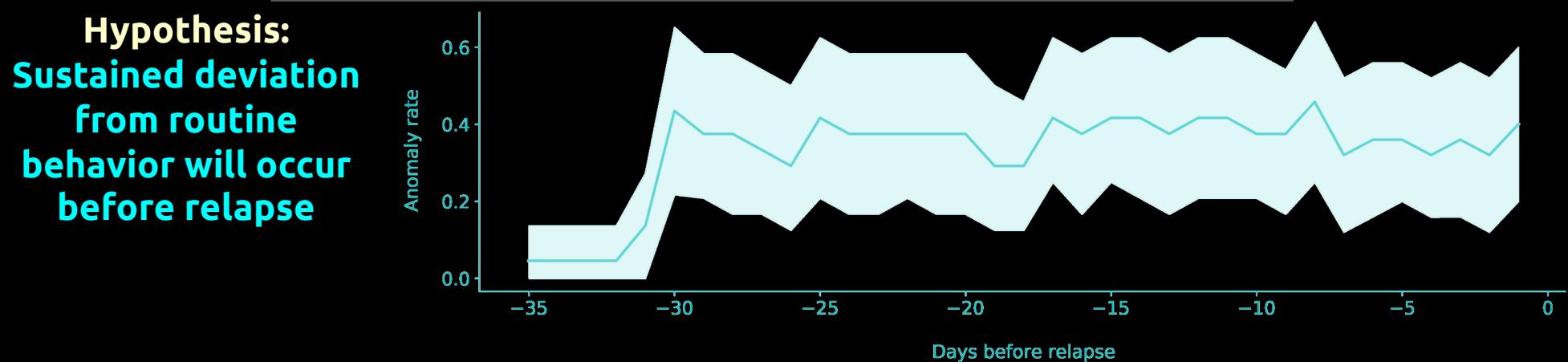
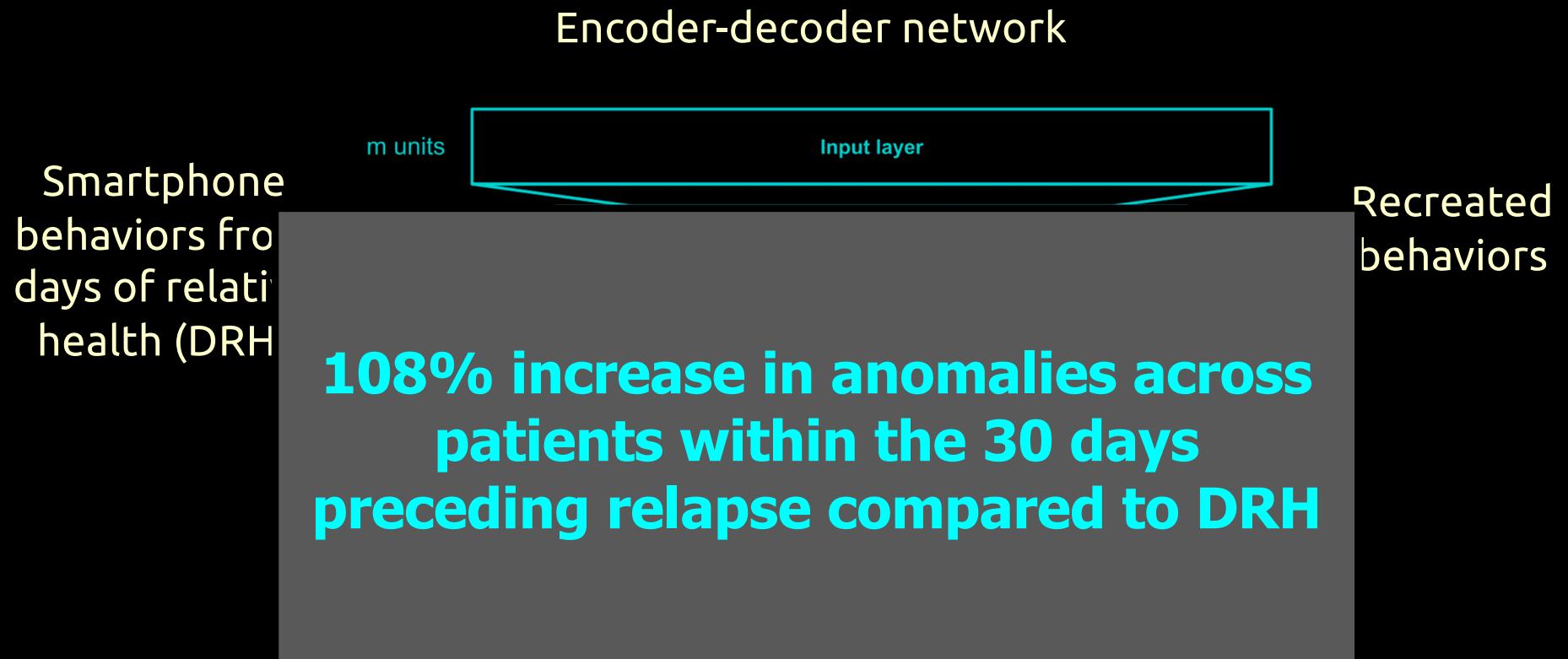
Encoder-decoder network



Hypothesis:
Sustained deviation
from routine
behavior will occur
before relapse



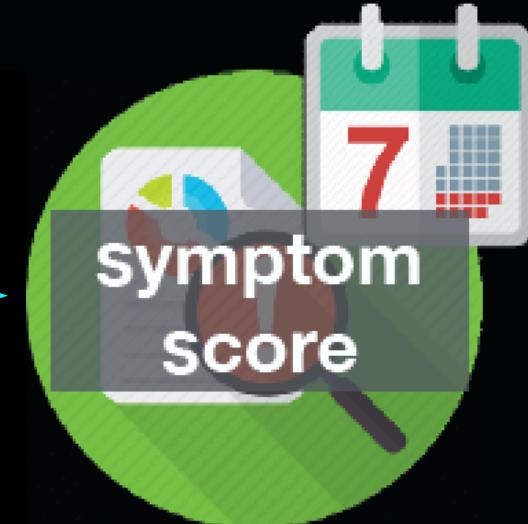
Training an anomaly detection system for human behavior



Intervention Gap



One month of data



Patient reach out

Patient reach out

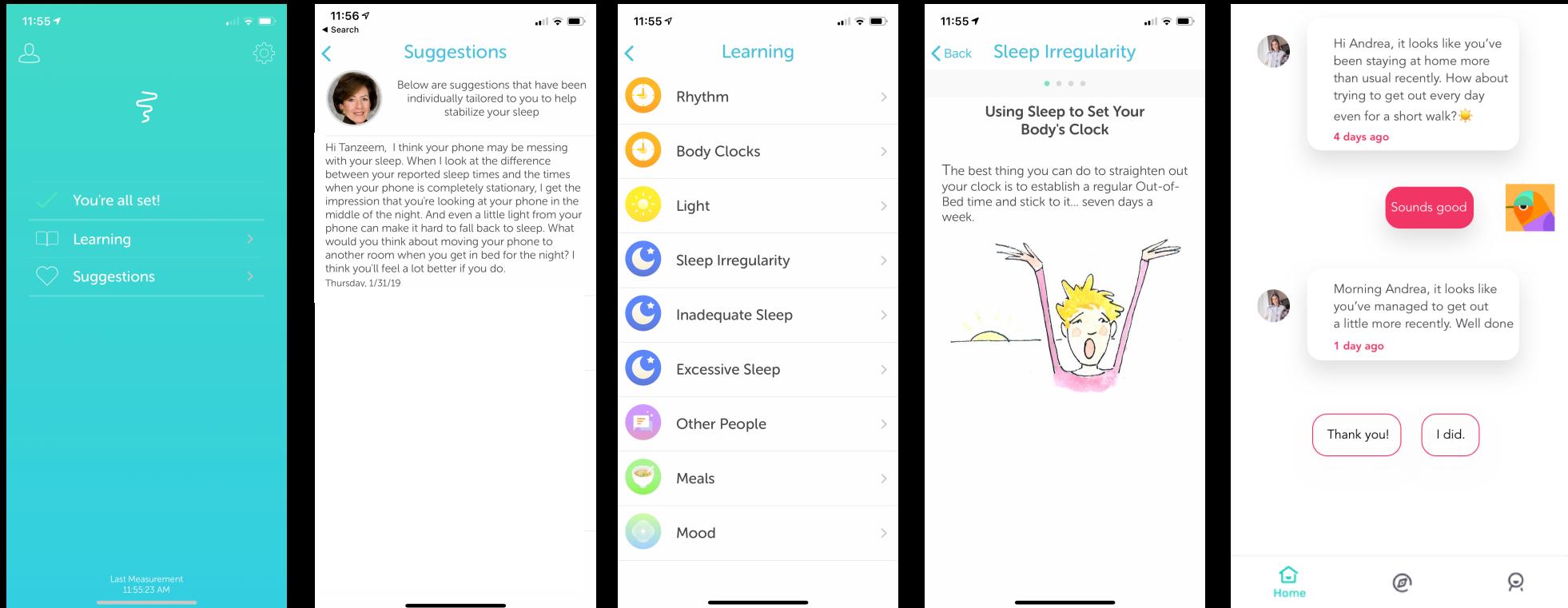
Alert care team if
score > threshold



Alert physician



Personalized Sensor Driven Health Program



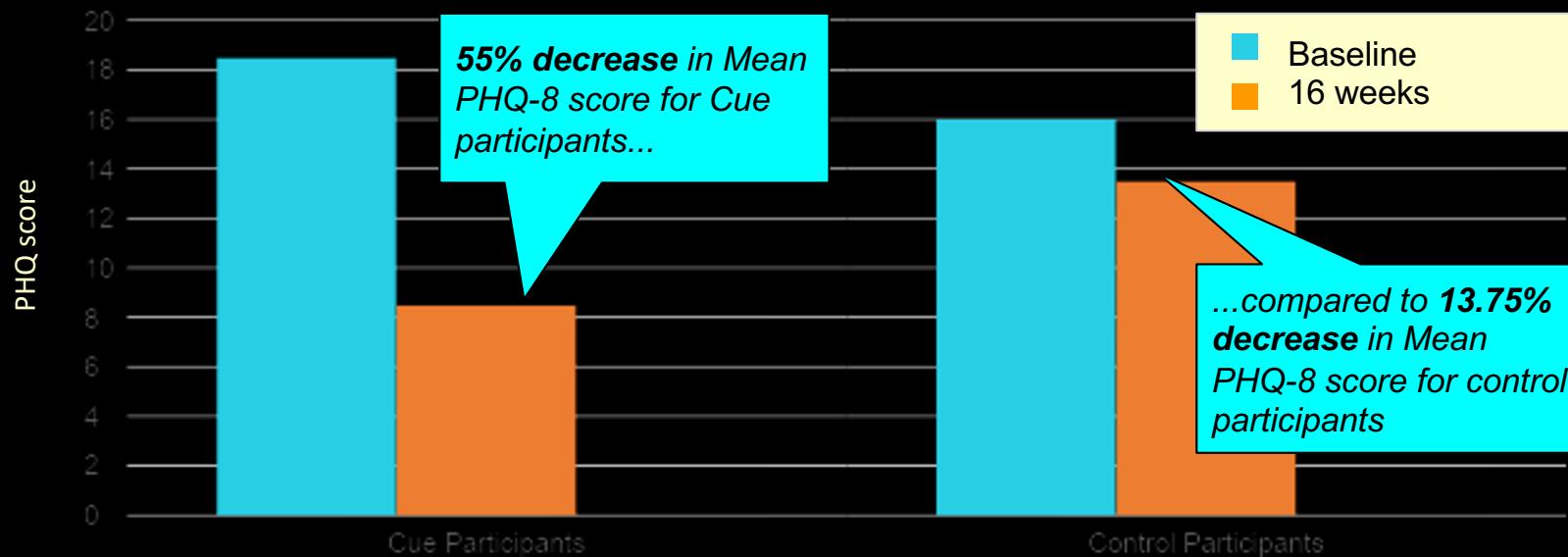
Continuous sensor measurement

Sensor-driven activity suggestions

Engaging psychoeducational content

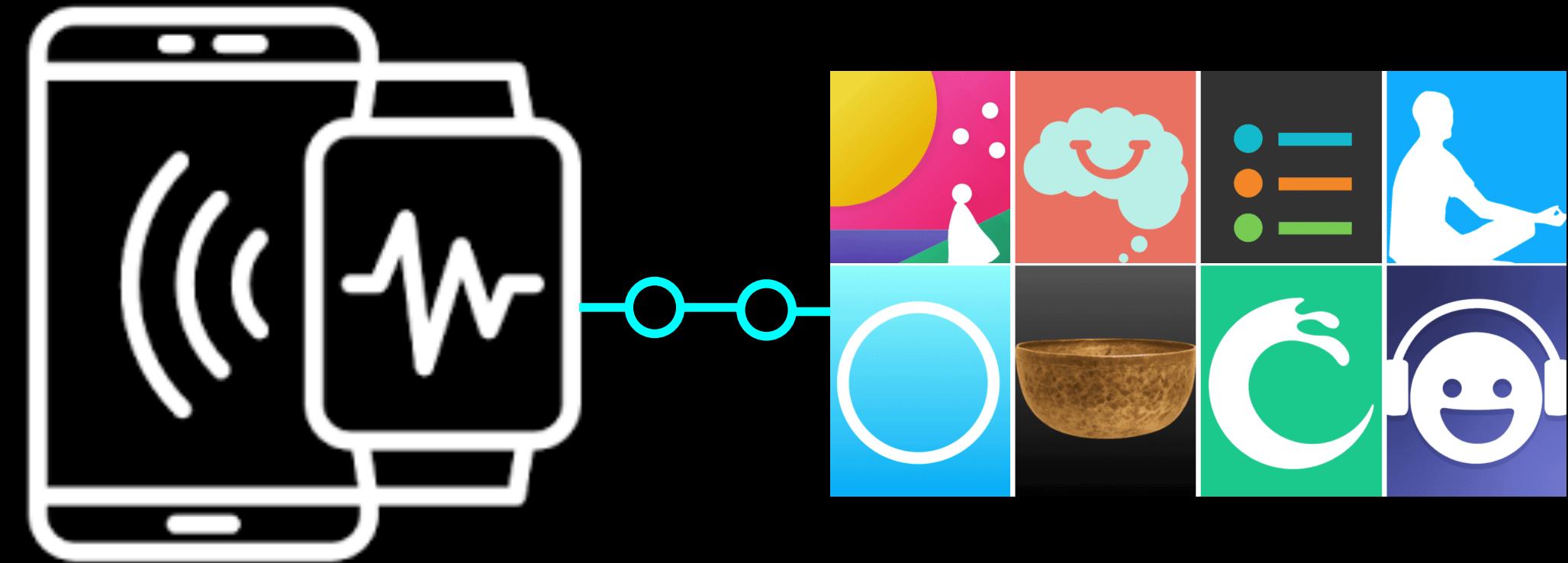
Personalized Messaging

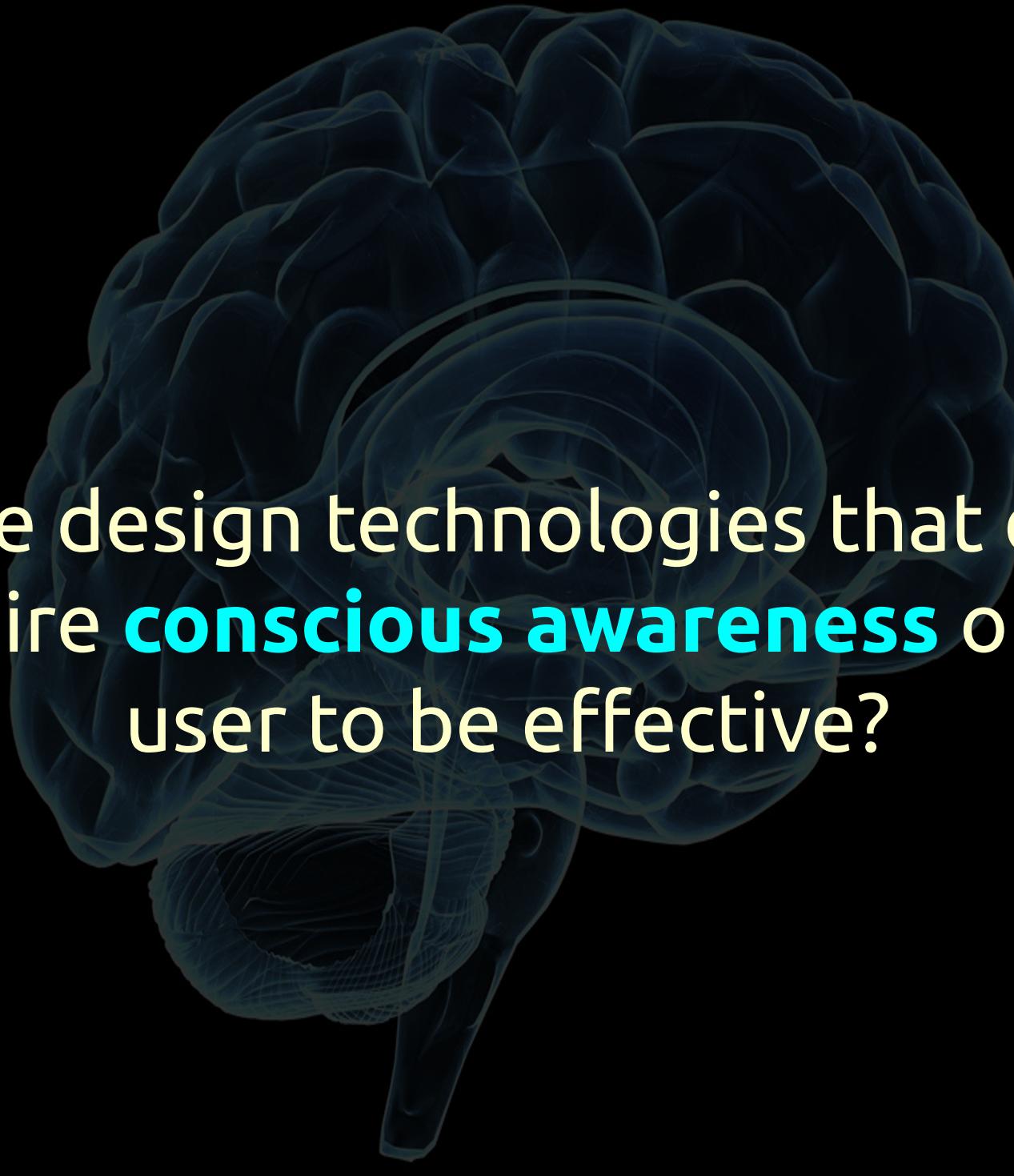
Cue digital therapeutic shown to increase efficacy of treatment in RCT completed January 2020



- Protocol: 16 weeks
- Coverage: 24/7 data coverage on 93% of study days
- Total participants: 135
- Drop-outs: 4

Tighter synchronization between sensing and intervention is needed

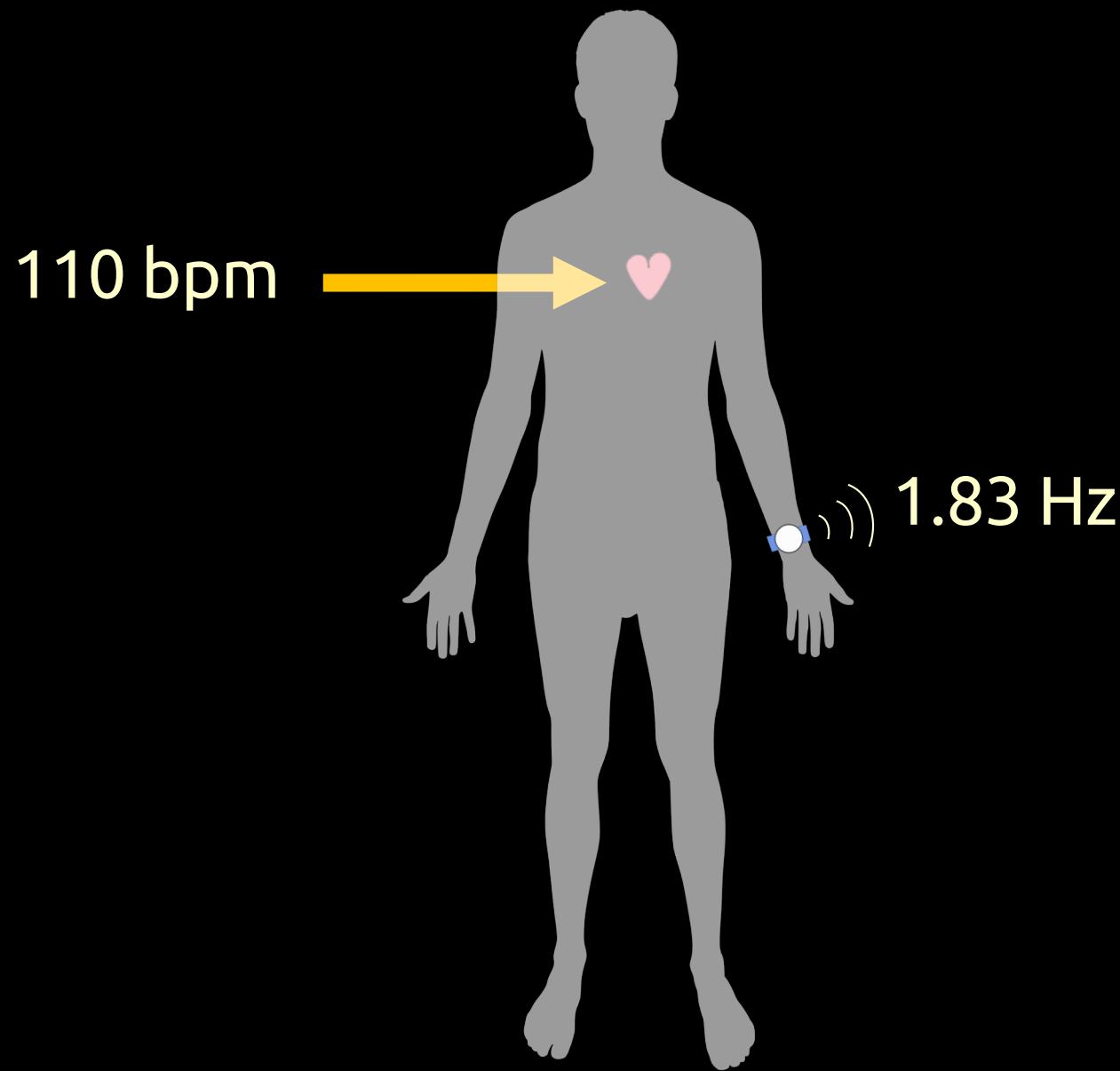




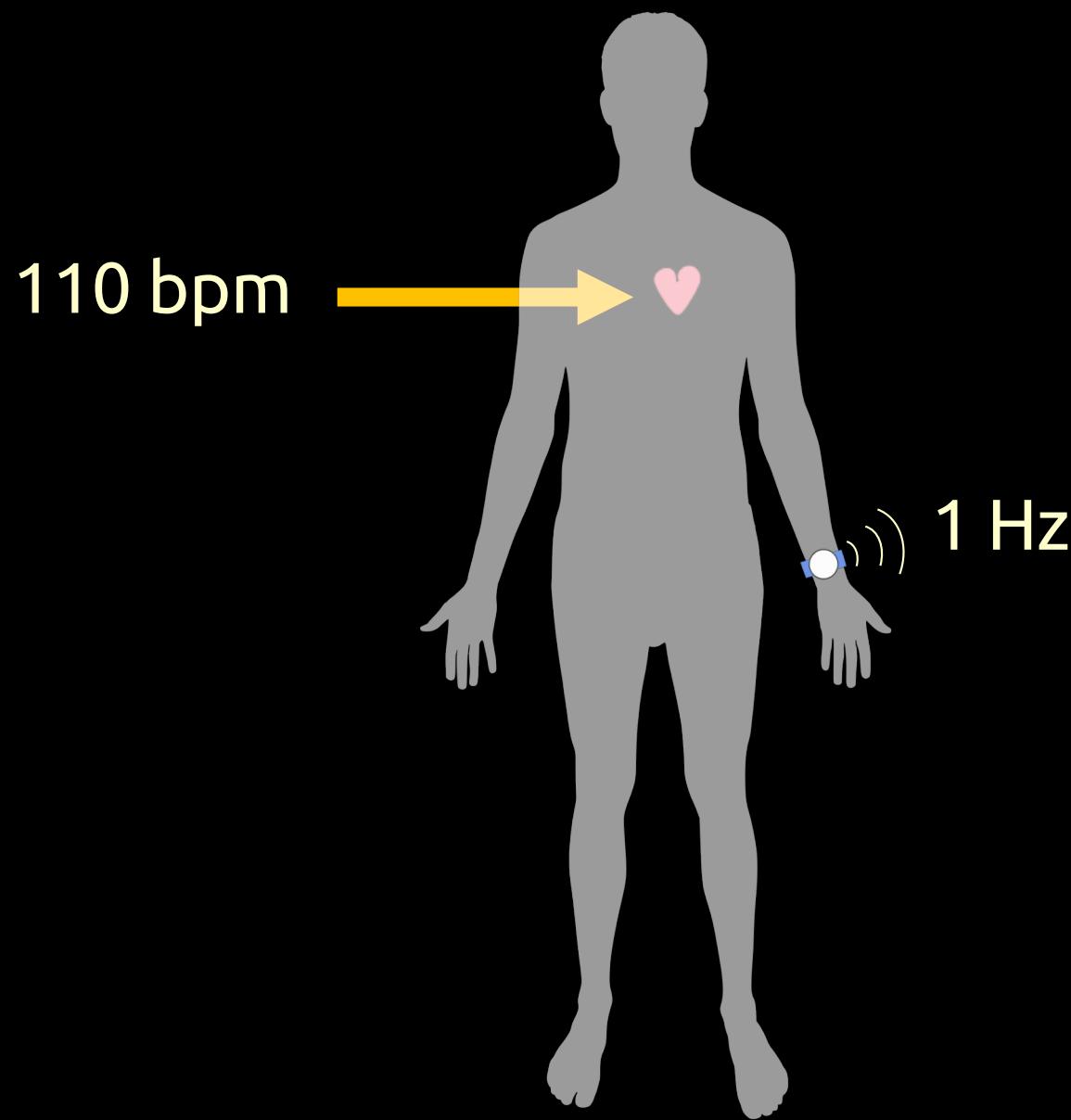
Can we design technologies that do not require **conscious awareness** of the user to be effective?

EmotionCheck: Leveraging Bodily Signals to Reduce Anxiety in Real-time

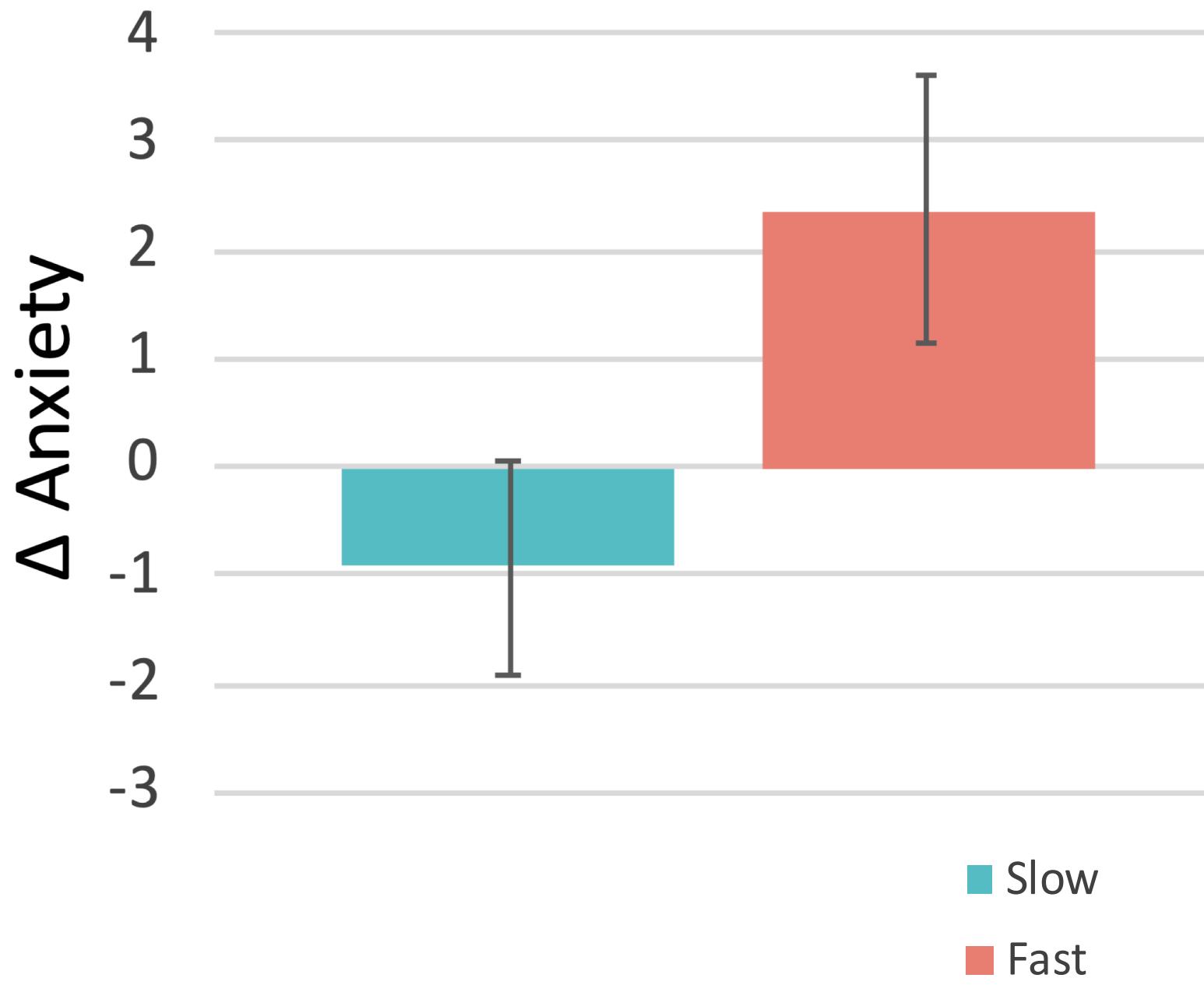
The vibrations represent your current heart rate



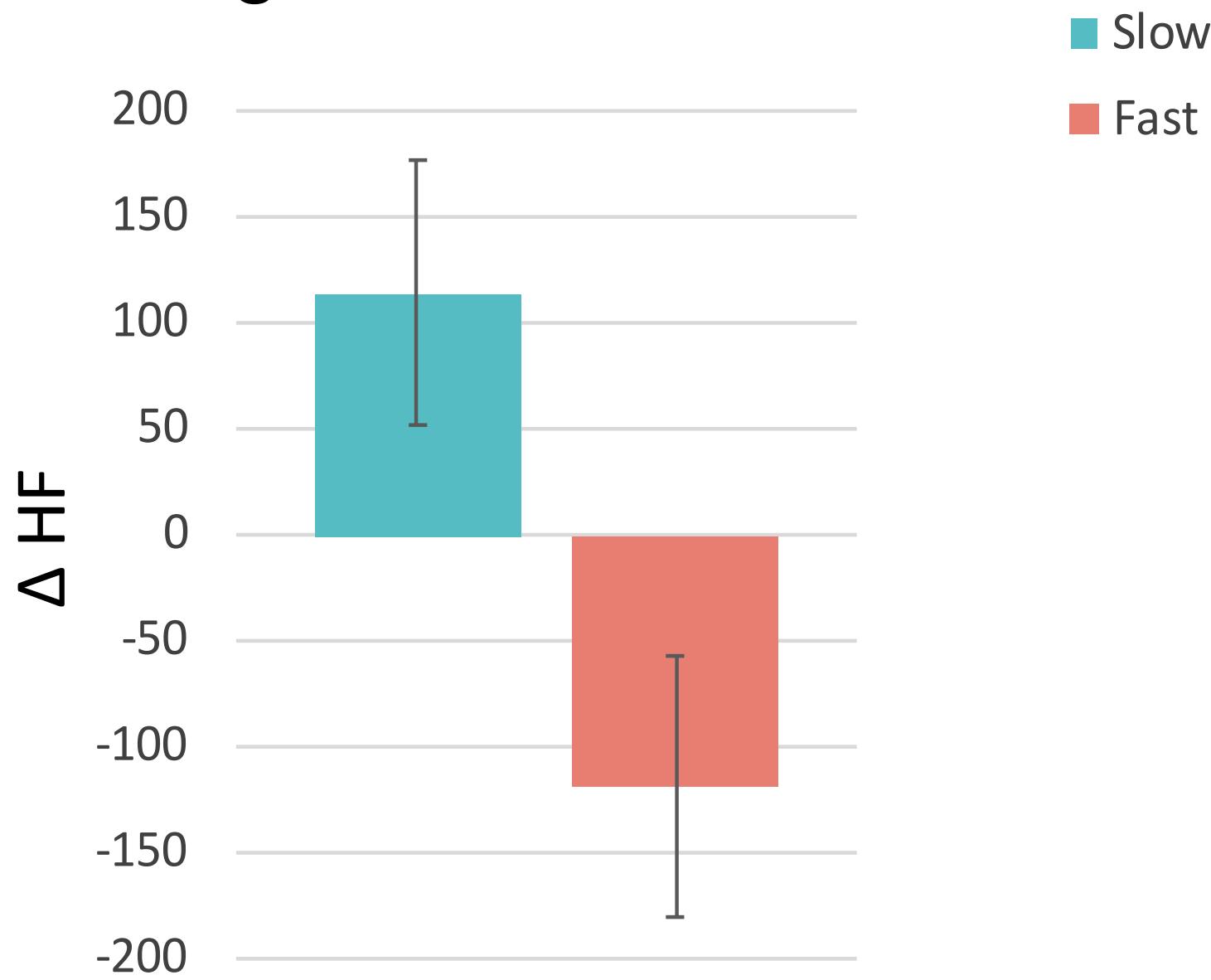
The vibrations represent false heart rate feedback



Anxiety Level



Changes in Heart Rate



Pitfalls

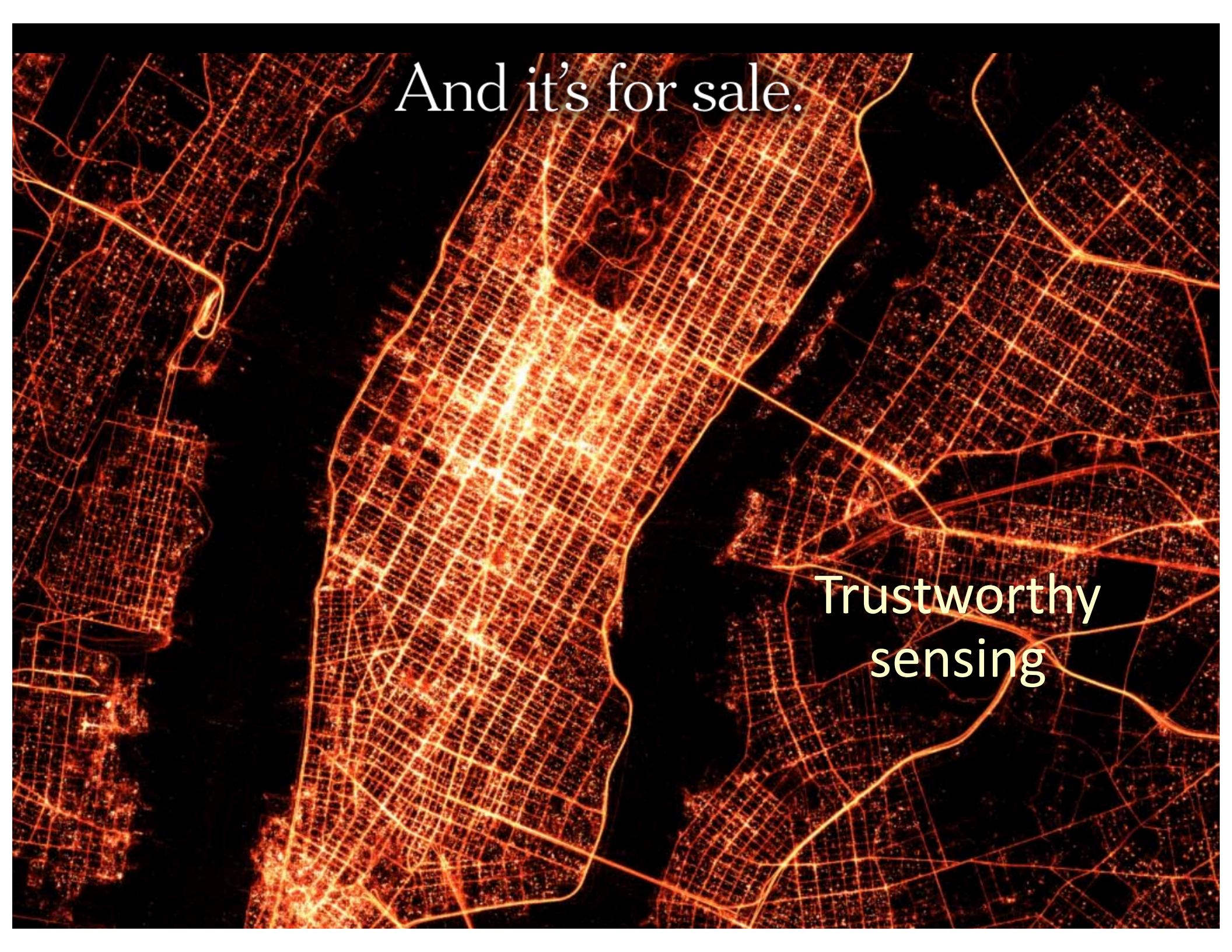
**Too much focus on novel features
generations and incremental
accuracy improvements?**

One alarm every

168

seconds

Reducing Burden

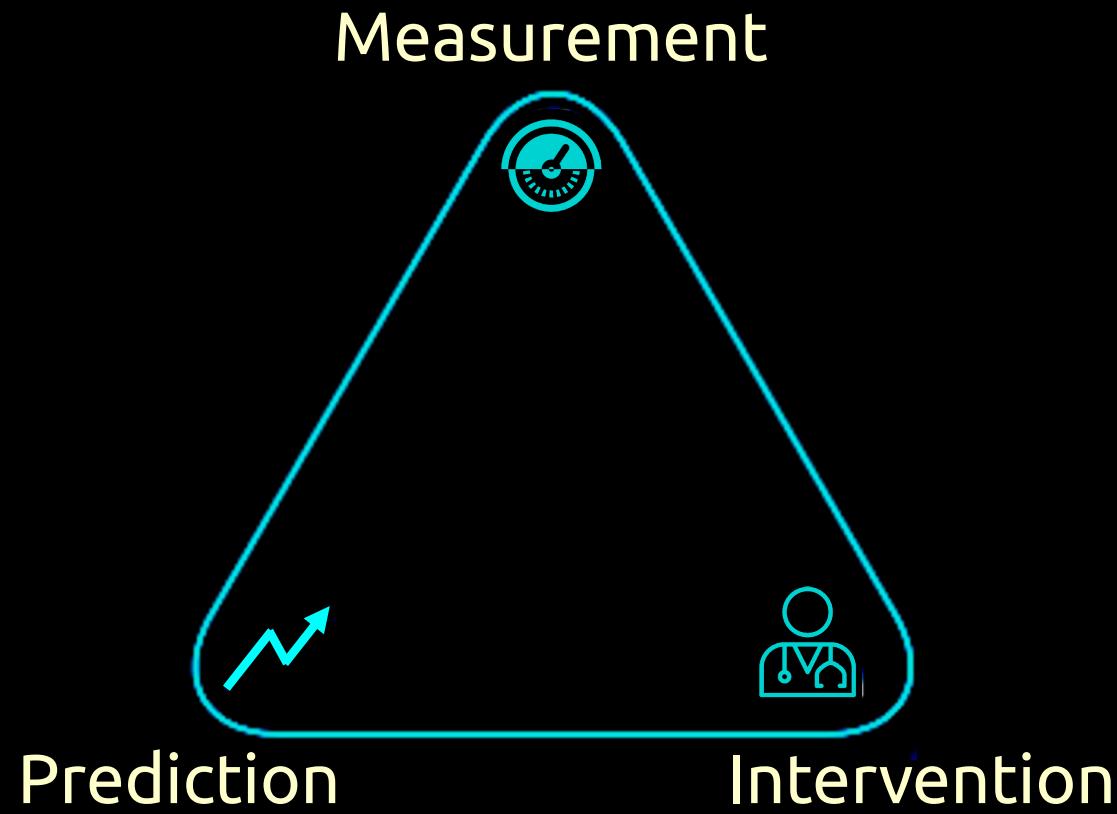


And it's for sale.

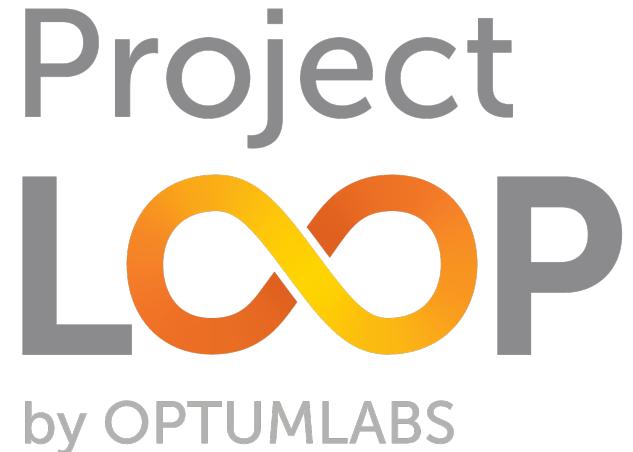
Trustworthy
sensing

Future of Integrated Care:

Continuous, personalized coupling between measurement and intervention



Technology assisted Integrated Care



High-quality integrated physical and behavioral health with three components:

- platform agnostic data capture and analysis to intercept behavioral conditions early and monitor for progression
- real-time and adaptive AI algorithms that determine engagement, measurement, and intervention strategies for each patient
- transparent and integrated clinical decision support that gives providers actionable insights and maximizes care efficiency and effectiveness.



Precision
Behavioral
Health

Home

The Precision Behavioral Health Initiative @ Cornell Tech

aims to advance the role of precision technology in
transforming behavioral health.

Thank you!



Alex
Adams



Vincent
Tseng



Dan
Adler



Yiran
Zhao



Jatin
Arora



Jean
Costa



Tauhidur
Rahman



Saeed
Abdullaah

Collaborators: Dror Ben-Zeev, Andrew Campbell, Deborah Estrin, Malte Jung, John Kane, Cecilia Livesey, David Mohr

