

The Promise of Mobile & Social Technologies to Improve Individual and Population Health

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International Society for Research on Internet Interventions
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Journal Ranking

Impact Factor: 4.235

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Ranking 16 out of 132

Medicine, General and Internal category

Ranking 11 out of 122

Public, Environmental and Occupational Health category

AJPM's 5-Year impact factor is 5.006 and it ranks 13th in Medicine, General and Internal and 8th in Public, Environmental, and Occupational Health.



Center for Wireless and Population Health Systems



Research on systems of wireless, clinical, and home technologies to measure and improve lifestyle and other health-related behaviors in:

- -- Healthy adolescents
- -- Overweight and obese children and adults
- -- HIV infected adults with substance abuse
- -- Adolescents risk for type 2 diabetes
- -- Adolescents with chronic disease
- -- Older adults to promote successful aging
- -- Adolescents recovering from leukemia and other chronic disease
- -- Young adults to prevent weight gain
- -- Adults with schizophrenia
- -- Exposure biology research
- -- Cancer comparative effectiveness research







Collaborating Investigators & Partners



UCSD School of Medicine

Kevin Patrick, MD, MS, Greg Norman, PhD, Fred Raab, Jacqueline Kerr, PhD, Jeannie Huang, MD, MPH, Cheryl Rock, PhD

UCSD Jacobs School of Engineering

Bill Griswold, PhD, Ingolf Krueger, PhD, Tajana Simunic Rosing, PhD

San Diego Supercomputer Center

Chaitan Baru, PhD

<u>UCSD School of Medicine, Division of Genetics & Department of Political Science</u> James Fowler, PhD

SDSU Departments of Psychology, Exercise/Nutrition Science

& School of Public Health

James Sallis, PhD, Simon Marshall, PhD, Elva Arredondo, PhD

PhD students and Post-doctoral Fellows (current)

Jordan Carlson, Barry Demchak, Laura Pina, Ernesto Ramirez, Celal Zifti

Santech, Inc.

Jennifer Shapiro, PhD, Ram Seshan, MS, MBA

Guiding principles for our research



Clinical needs -

Measuring and improving health behaviors as a means of preventing and/or managing illness such as diabetes, CVD, cancer, and obesity

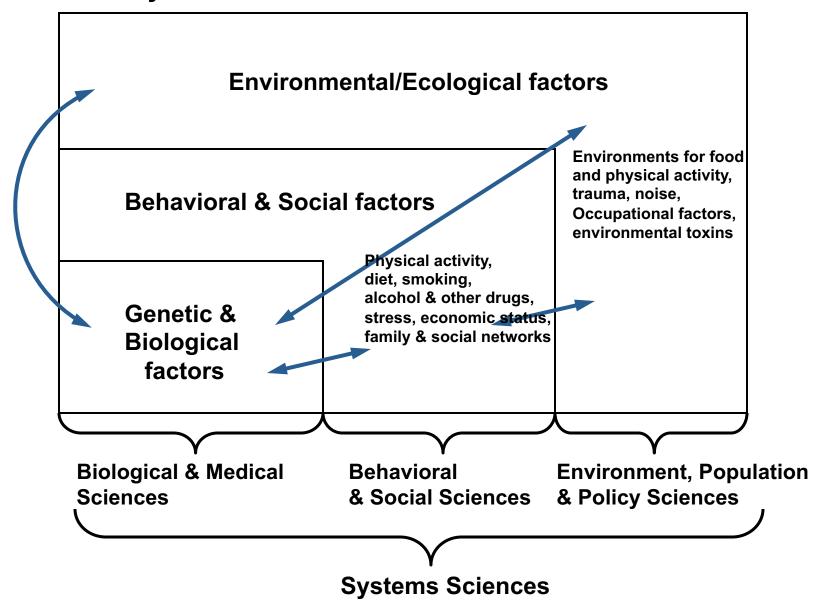
Population-level needs -

Measuring and promoting health behavior change at a population level to leverage investments and policies in the areas of public health, transportation, urban planning, education and other areas important to human health and sustainability

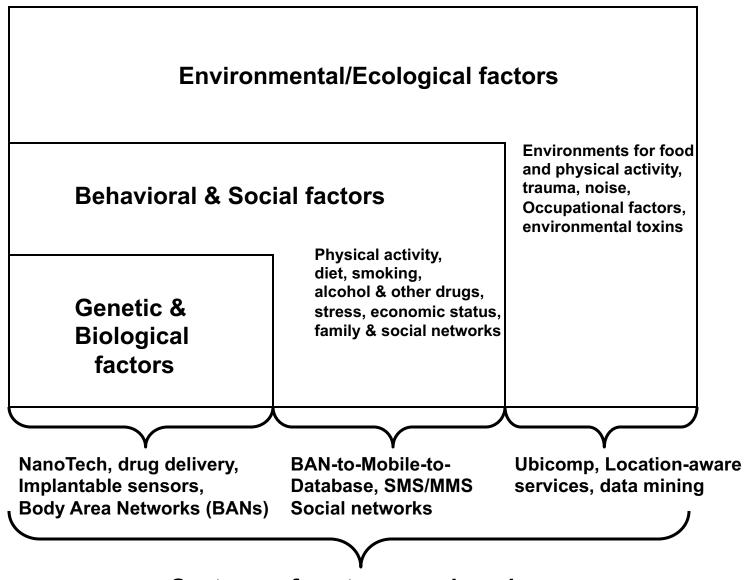
Theory -

That helps us understand what is happening, why, and how we might change it for the better

Our point of view is an ecological one: Many factors continuously interact with one another to create health outcomes

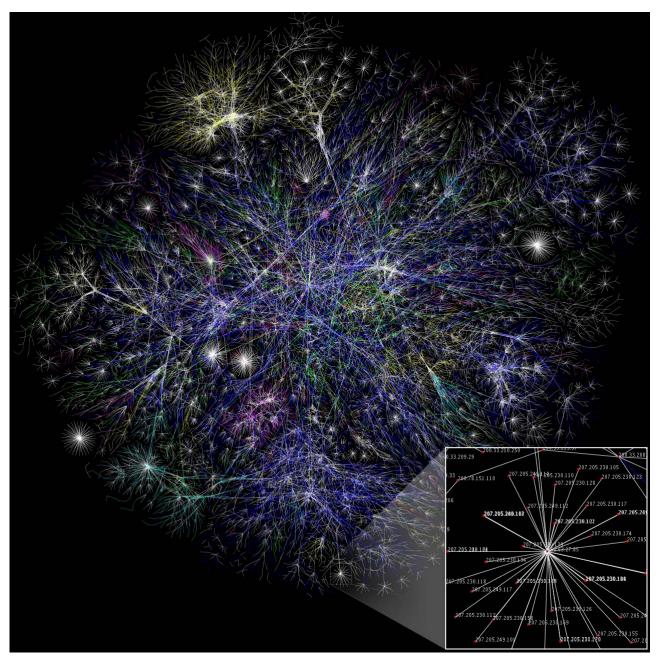


We work hand-in-hand with engineers who are developing technologies to influence these factors to shape better health outcomes



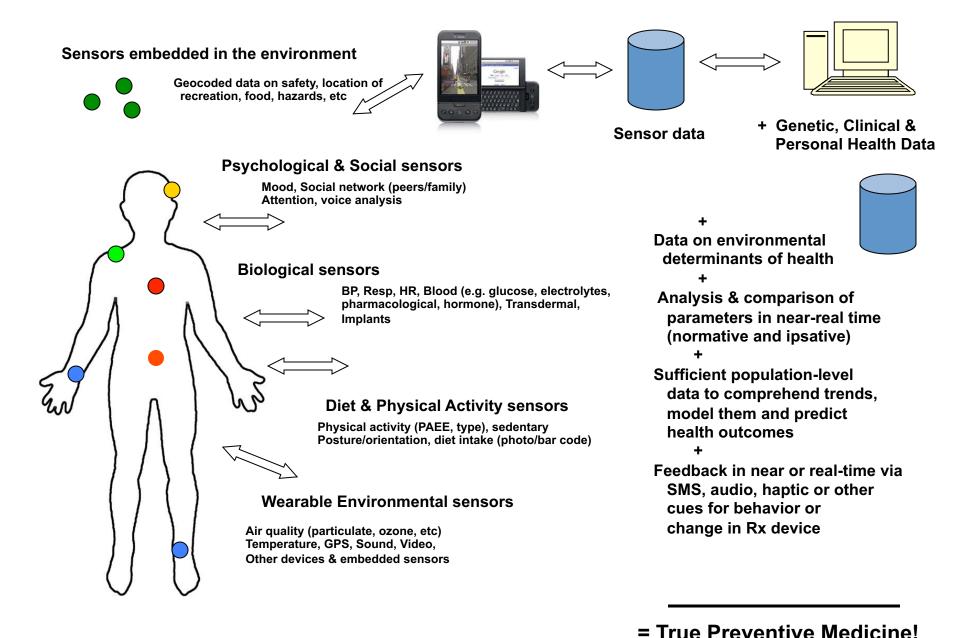
Systems of systems engineering

The beauty of the Internet is that it ties all of these things together in ways useful to those of us who work in health...



Source: Wikipedia

In part, it's about collecting data from Sensors...



In part, it's about collecting data from Sensors...

It's also about data-driven interventions via Mobile and Social Media...

Rapidly growing base of mobile information devices...

5+ Billion Mobile Phone users

- UN International Telecomm Union (2011)

14.2 Million iPads sold, 2010; 75% of market

- Wikipedia (2011)











Total Text Messages sent July, 2009 - June, 2010:

1.8 Trillion -

- 260 messages/person on earth
- ~ 80% of all mobile users worldwide

Source: CTIA



Social Media



- Almost 600 Million active users
- 50% of active users log on once/day
- About 70% of Facebook users are outside the US



- Over 100 million registered users
- 180 million unique users each month



twitter

We can confirm that Twitter was blocked in Egypt around 8am PT today. It is impacting both Twitter.com & applications. (1/2)

about 10 hours ago via web by SG Retweeted by 100+ people







And finally it's the Cloud...



Projects in Sensing and Intervention



PALMS

SMART

CYCORE

mDIET & ConTxt

CITISENSE





PALMS

Physical Activity Location Measurement System

An integrated suite of **sensors** and **software** to enable **continuous capture and analysis** of data on **temporal & spatial** characteristics of **physical activity and other data** important to exposure biology research

PALMS supports gathering data from multiple participants within studies and aggregating and comparing data between and among multiple researchers across studies

Funded through the NIH Gene, Environment and Health Initiative
Exposure Biology Program
NIH/NCI Grant 1 U01 CA130771

Exposure Biology Program: Deliverables

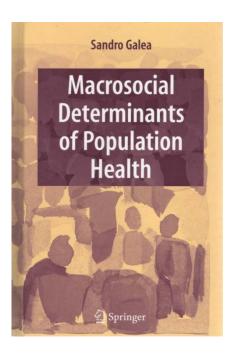
FY07 FY08 FY09 FY10 FY11 Environmental Sensors Diet/Physical Activity Chemicals/Biologics **DEVICES** Psychosocial Stress/Addictive **Substances APPLICATION Genome Wide Biological Response Association** Biomarkers Lab on a Chip **FINGERPRINTS** Centers-biomarkers/biosensors **DEVICES** Inflammation Oxidative stress Programmed cell death Epigenetic markers

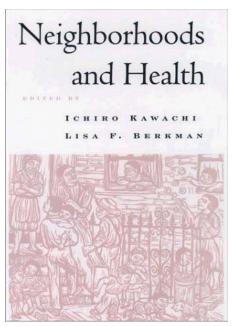
Importance of Place

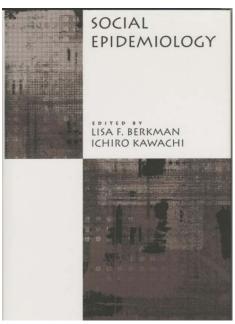


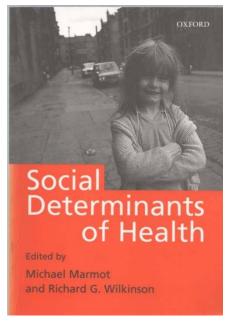
in the Health of Individuals and Populations

- Disease clusters
- Toxic exposure
- Health disparities
- Stress & incivilities





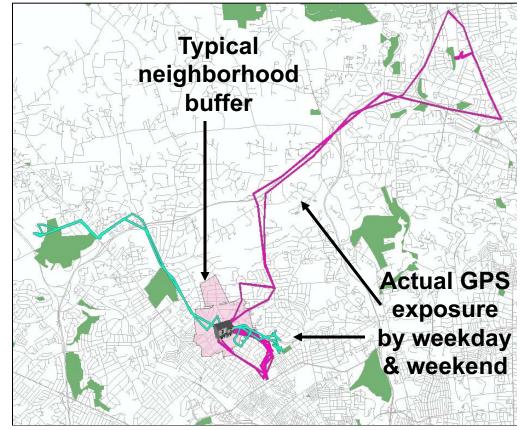




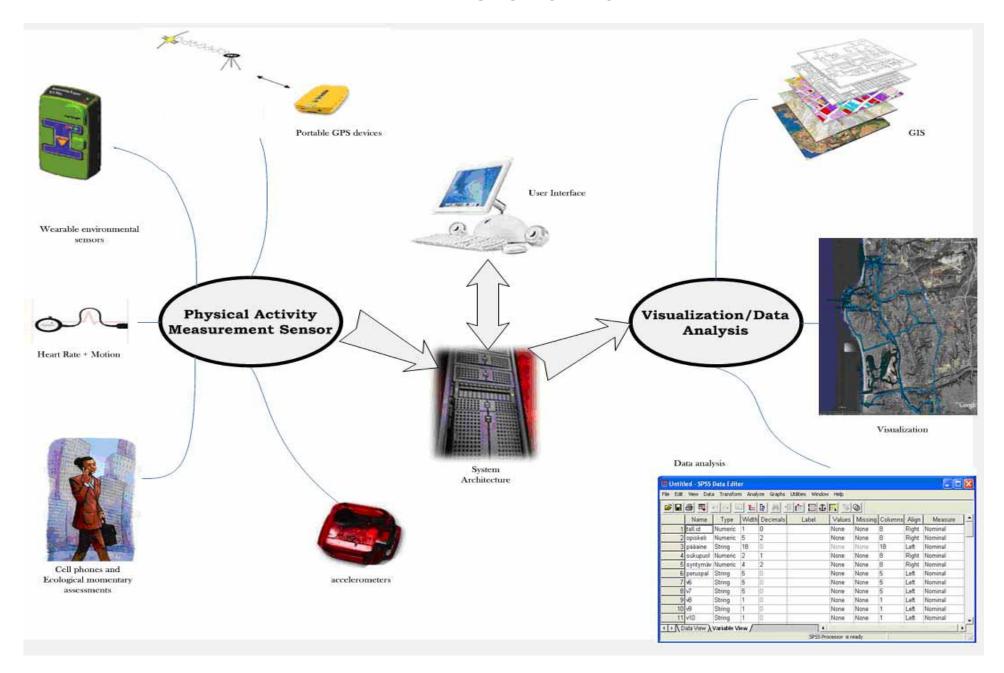
Temporal-spatial Context



- Is related to health behaviors, morbidity & mortality
- Moderates intervention effects & and is a modifiable component in interventions
- -- Current studies estimate temporalspatial effects based upon residence or school/work location rather than actual exposure
- -- Little is known about how PA type, frequency, intensity and duration, or episodes of extended sedentary behavior moderate these exposures
- -- Concurrent & continuous measurement of PA/sedentary behavior <u>and</u> exposures of interest will be essential if health researchers are to understand these relationships



PALMS Overview



PALMS Sensors

Physical Activity and Heart Rate

- M Actigraph
- M Actical
- HR+M Actiheart
- HR+M Actitrainer
- HR+M + respiration + skin temp Bioharness

Location – GPS Dataloggers

- GlobalSat DG-100
- GlobalSat BT-335
- Qstarz 1000
- Any GPX device













Motion & heart rate sensors tell us **how active** a person is but not when or where...



Combined with GPS, We Know Where Physical Activity Occurs



Heart rate shown in Google Earth

> resting light moderate vigorous

Placing these data within GIS Provides Context

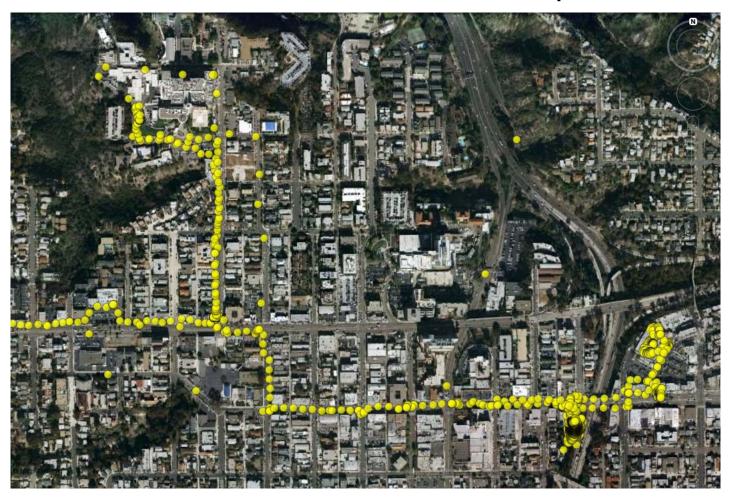


Heart rate shown in ESRI ArcGIS against land use

GPS Data



Research Question: How much time is spent in residential neighborhoods and how does this affect our estimates of the relationship between health and place?



Example:

one subject's neighborhood collected over 3 days

15 second epoch

Determine Indoor / Outdoor



Research Question: Is time spent outdoors related to cancer outcomes, mental health status or pollution exposures of interest?



Tracking indoor and outdoor time

30 second epoch

Indoors

Outdoors

Identify Mode of Transport



Research Question: Is active commuting (walking or cycling) or time spent in car related to obesity?



Vehicle

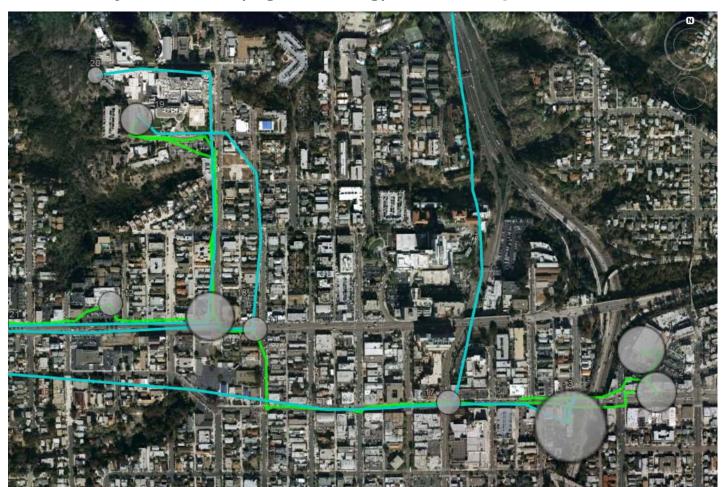
Pedestrian

Bicycle

Detect Locations & time spent



Research Question: Are places where people spend lots of time associated with unhealthy behaviors (e.g. snacking) or toxin exposure?

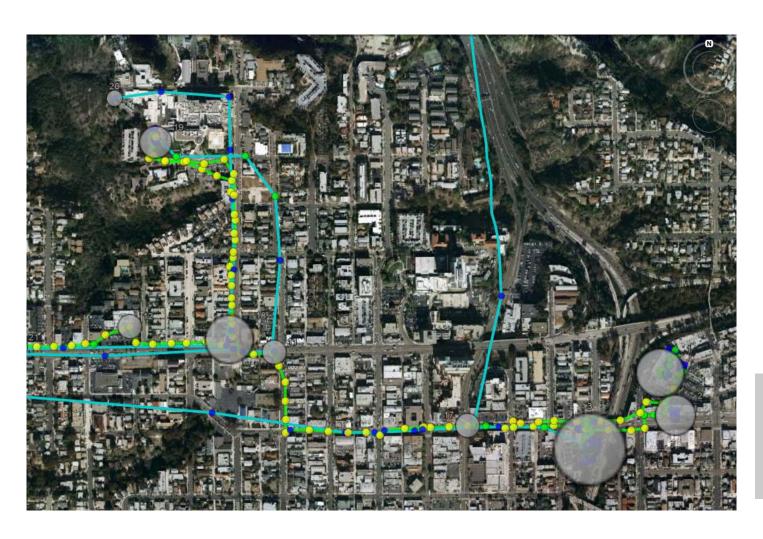


Size of gray areas reflect relative amount of time at location

Merge GPS & Activity Data



Research Question: Which park features support the most physical activity?



Sedentary

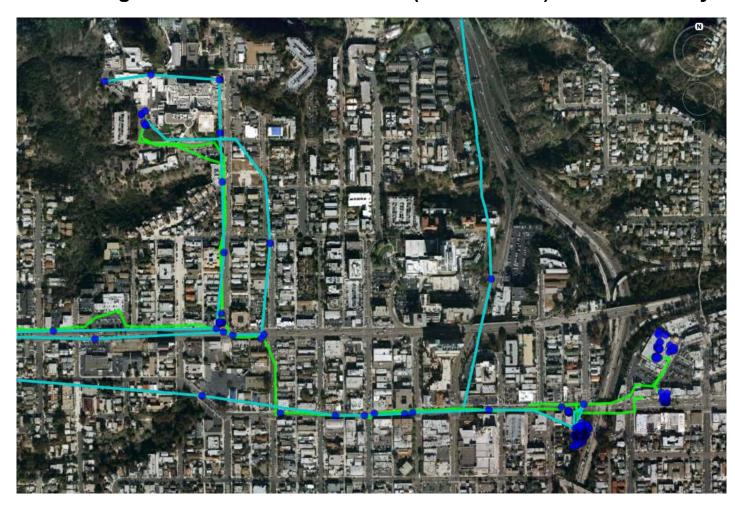
Light

Moderate

Isolate Periods of Sedentary Time



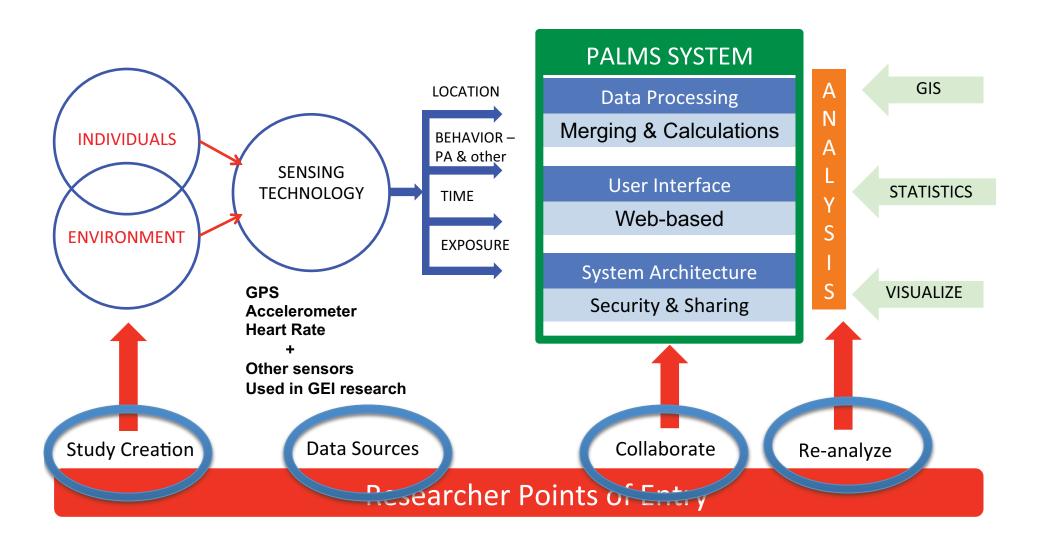
Research Question: Which locations entail prolonged periods of <u>sitting</u> and how might these relate to incidence (or treatment) of metabolic syndrome?

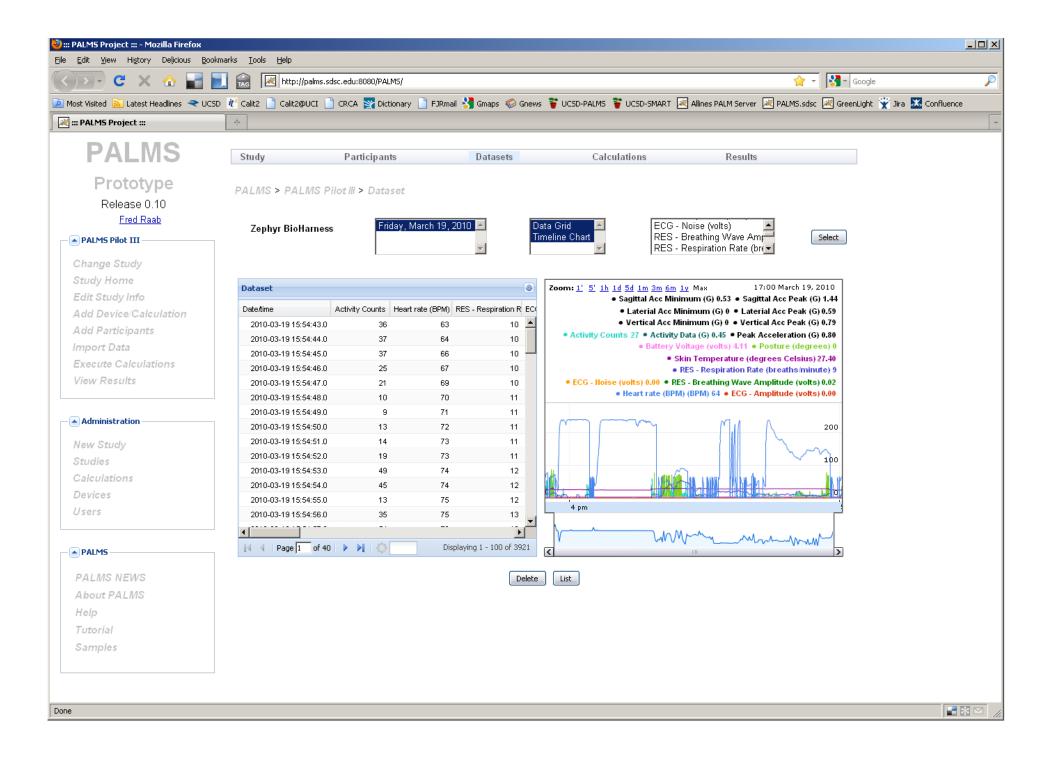


Sedentary

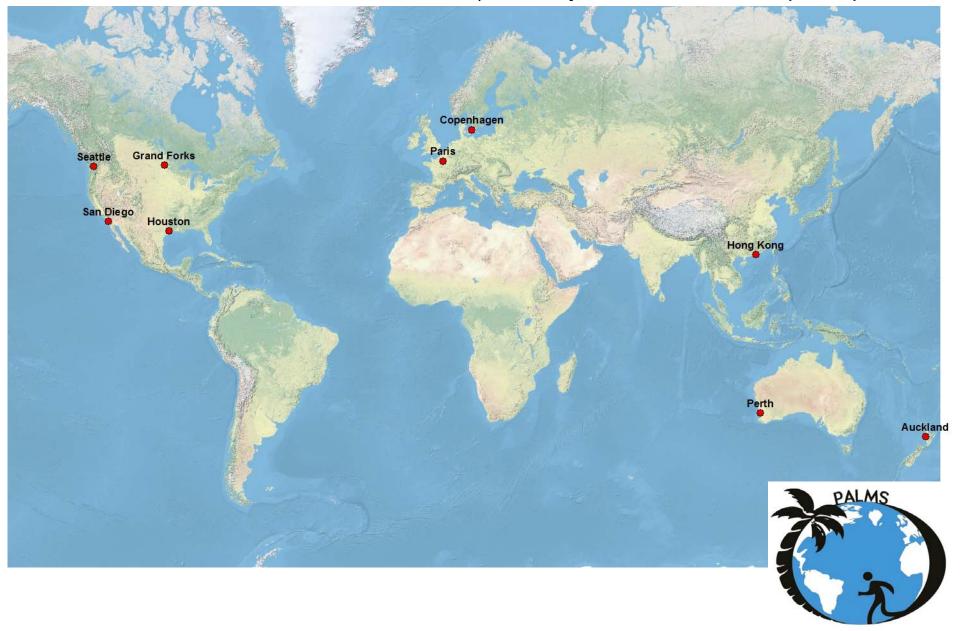
PALMS Researcher Support





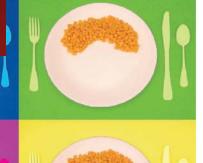


PALMS Users Worldwide (5 – 7 days of data for 1000+ participants





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Feb 16, 2011



PALMS was recently featured in article on measuring the human "exposome"



If a camera snaps everything you eat, you can't lie about it later. That's why scientists are building high-tech gadgets to measure the human 'exposome'.

BY BRENDAN BORRELL





CYCORE

<u>CY</u>ber-infrastructure for <u>CO</u>mparative Effectiveness <u>RE</u>search



PURPOSE

To improve **cancer-related comparative effectiveness research** by better capturing data on physiological, behavioral and psychological status from research participants at home and as the go about their daily lives.

Pls: MD Anderson: Susan Peterson, PhD, Karen Basen-Enquist, PhD,

Alex Prokhorov, MD & Wendy Demark-Wahnefried, PhD

Pls: UCSD/Calit2: Kevin Patrick, MD, MS, Ingolf Krueger, PhD, Chaitan Baru, PhD

Funded by a Grand Opportunity RC2 grant from NCI/NIH Program Officer: Brad Hesse, PhD







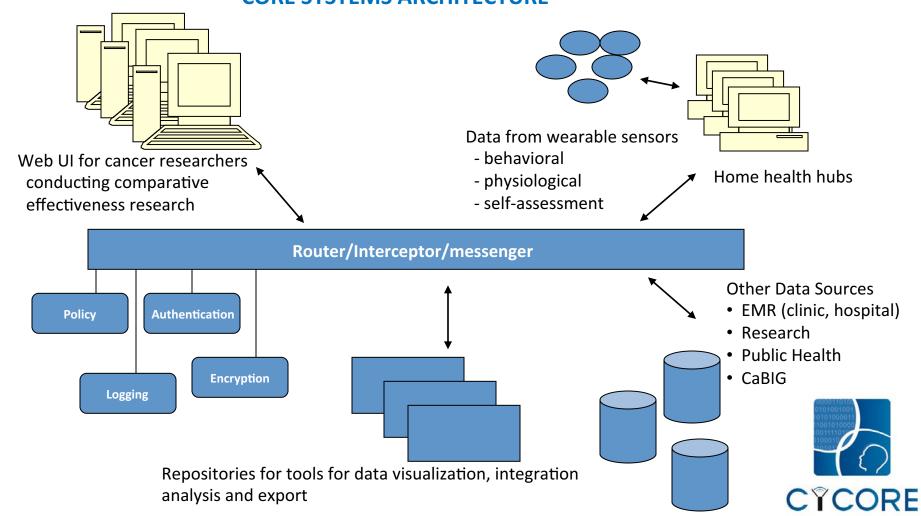


CYCORE

Cyber-infrastructure for Comparative Effectiveness Research



CORE SYSTEMS ARCHITECTURE





Wireless Devices -

- Weight scale
- BP Monitor
- Accelerometer
- Pulse Oximeter
- GPS
- Zephyr Bioharness
- Easily extensible to other devices as needed

CYCORE Home Health Hub

Additional planned sensing at home:

- -- Ecological Momentary Assessment
- -- Video capture of behaviors and other observable outcomes
- -- CO Monitor for expired air in smokers



From Sensing to Intervention: - "Wireless Persuasion"



Mobile phone apps

Wearable sensors

Ecosystem

· SMS/MMS

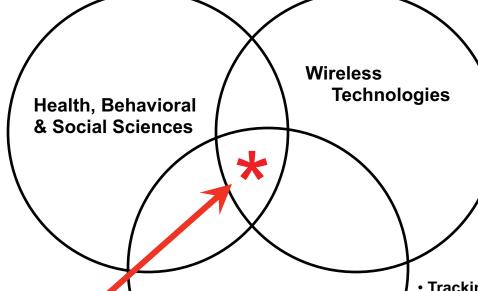
Body area networks

of external sensors

(home, work, etc.)

 Cloud computing
 Server analytics, data mining

- Medical care
- Public health
- Personal health
- Social Networks



Persuasive Design

The "sweet spot" of integrating wireless & design to promote improved health behaviors

- Tracking
- Goals
- Reminders
- Rewards
- Tailoring
- Preference based
- Attentive
- Ecological
- Context Aware
- Cybernetic

- Cog Sci
- Media/Comm
- Beh Sci
- Soc Sci
- Hum/Comp Interaction

Mobile Diet Intervention through Electronic Technology



PURPOSE

Randomized Clinical Trials to evaluate the use of Text Messages (SMS) to improve dietary behaviors and weight outcomes in obese men and women.







mDIET

mobile **D**ietary **I**ntervention **T**hrough **E**lectronic **T**echnology

Research question:

Can a behavioral intervention delivered primarily through text messages be effective in promoting short term weight loss in overweight/obese adults?

Funded by a grant from the National Cancer Institute R21 CA115615-01A1





Types of mDIET Messages

Type of Text or Picture Message	Example		
Motivational Sayings	Never say never, you can do it! Keep up the good work!)		
Nutrition & Physical Activity Tips	Try 10 baby carrots and a tablespoon of fat-free dressing for a 100 calorie snack; Want extra steps? Take the stairs today		
Nutrition & Physical Activity Reminders	Remember to move more today to reach your 12,000 step goal; Be sure to practice portion control strategies at your next meal		
Short-Term Goal Reminders	Think about what you can do in the next 4 hours to be healthy		
Behavior Questions	Have you practiced portion control strategies today? Have you reached your 12,000 step goal today?		
Weekly Weight Questions	What is your weight?		
Weekly Weight Graphs	Chart of weekly weights		
Portion Control Picture Messages	Pictures of portion sizes		

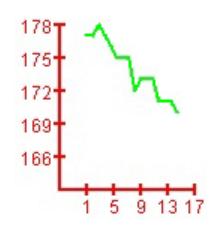
MMS used for Images and Graphs



Add a variety of colorful vegetable to your shopping list this week.
Choose green, red, orange and yellow veggies.



A one-cup serving size is about the size of a tennis or baseball.



Nice progress. You're on your way to reaching your goal. It will take time, but you have the motivation to succeed.

Personalized Text Messages

Eating Behaviors

4 items on the EBI were emphasized (based on our own logic rules)

Name

 Some text messages included their first name (e.g. Congrats, Maria! You continue to improve. You're clearly working hard and it shows).

Grocery Store

 Participants were asked to identify the grocery store that they most frequently visit (e.g. Did you buy fruits and vegetables from Trader Joes this week?)

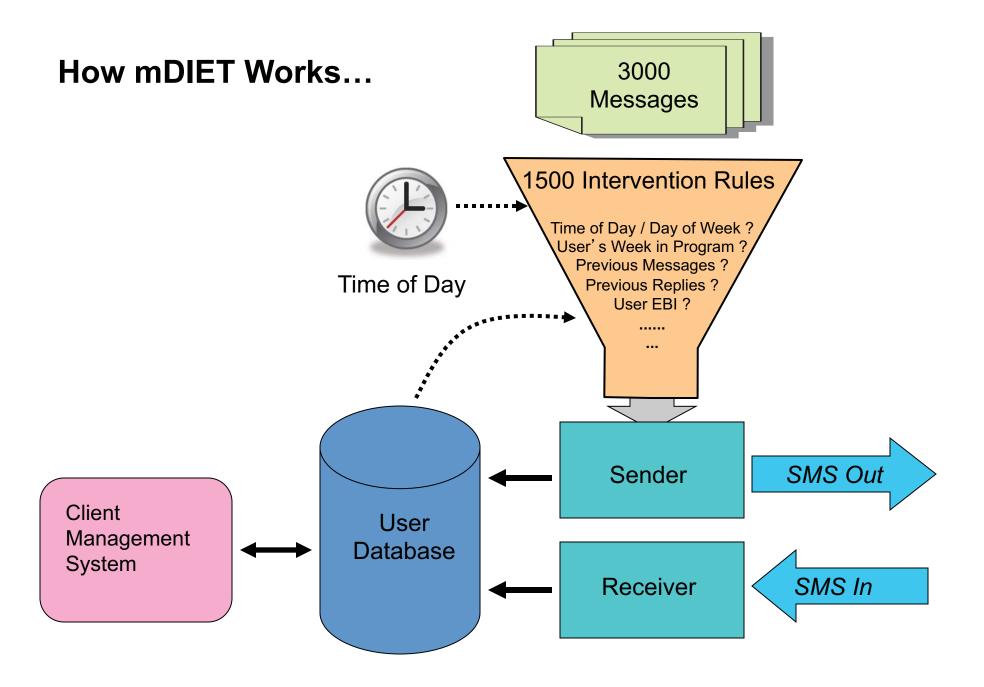
Social Supporter

 Participants were asked to identify someone in their personal life (family member, friend, co-worker) that could part of their social support system (e.g. Have you been telling Mark about your weight loss success?)

Rule-based Dialogues

Messages sent are based on the user's previous responses

Cell Phone Message Activity Message Week Timestamp Message Type 7/28/2007 Have you tried substituting your meals with more vegetables, Sent 7:00:55 PM beans and whole grains lately (Y or N) 7/28/2007 Response NO 7:36:21 PM 7/28/2007 Try substituting your meat dish today with beans, tofu or vegetables 6 Sent 7:36:22 PM to eat more with less calories. 7/29/2007 Sent What is your weight today? (Please enter your weight.) 7:00:29 AM 7/29/2007 Response 166 7:49:49 AM 7/29/2007 Great! You've lost weight. You are making progress. Get motivated Sent 7:49:50 AM by challenging yourself to improve for next week. 7/29/2007 Consider this: leaving food on your plate will reduce your calorie 7 Sent 4:01:37 PM intake. 7/29/2007 Did you clean your plate the last time you ate? (Y or N) Sent 7:01:32 PM 7/29/2007 Response YES 7:42:18 PM 7/29/2007 It's alright. Take it one meal at a time and get in the habit of not Sent 7:42:20 PM finishing everything on your plate. Remember: When you're at home, you can only eat what's in your 7/30/2007 Sent 7:00:47 AM house. Replace the high cal foods with low-cal foods! 7/30/2007 Response OK, will do. 8:10:11 AM



mDIET Pilot Study

Randomized Controlled Trial:

Participants were randomized to either an Intervention (mDIET) or Control group:

mDIET

 Weight loss program using text and MMS messages along with modest amount of adjunctive intervention elements

Control

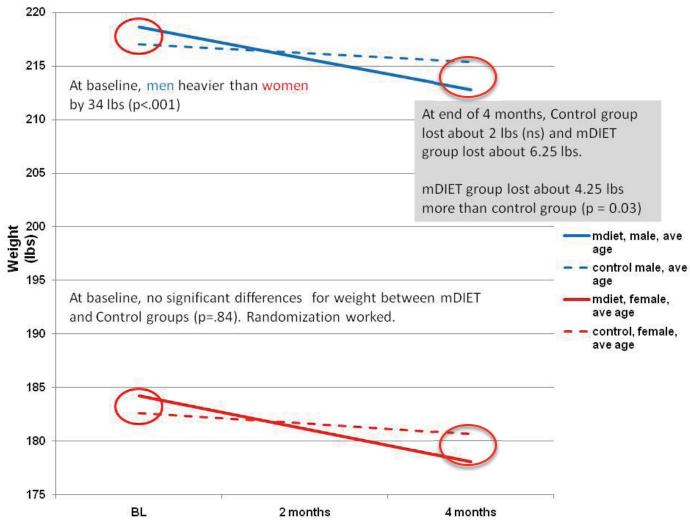
Usual care

Participants completed 3 in-office measurement visits over a 4 month period

```
Sample N = 63, 81% Women (Mean = 45.9 years)
Race/Ethnicity
76.2% Caucasian or White
15.9% African American or Black
3.2% Asian American/Pacific Islander/Native Hawaiian
4.8% Prefer not to state
22.2% Hispanic
```

mDIET

Mobile Diet Intervention through Electronic Technology





Participant Feedback on mDIET

- "Steady reminder keeping health on my mind"
- "Felt commitment every day could not let myself forget my goals"
- "They served as an excellent reminder to watch what I ate"
- "Keeps me focused"
- "Constant reminders to believe in myself and make the right choices"
- "I found that texting your weight every week was extremely helpful"
- "I miss my 6am message!"

Overall satisfaction with mDIET program for weight loss 95.6% of participants would recommend mDIET to friends/family

mDIET

Mobile Diet Intervention through Electronic Technology

Resulted in the <u>first</u> report in the literature of an RCT evaluating SMS/MMS for weight loss

Vs. 1.0 Content licensed to Santech, Inc. for extension of program and commercialization

A Text Message—Based Intervention for Weight Loss: Randomized Controlled Trial

Kevin Patrick¹, MD, MS; Fred Raab¹; Marc A Adams^{1,2}, MPH; Lindsay Dillon¹, MPH; Marian Zabinski, PhD; Cheryl L Rock¹, PhD, RD; William G Griswold³, PhD; Gregory J Norman¹, PhD

Department of Family and Preventive Medicine and the California Institute of Telecommunications and Information Technology (Calit2), University of California, San Diego, La Jolla, CA, USA

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Original Paper

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Abstract

Background: To our knowledge, no studies have evaluated whether weight loss can be promoted in overweight adults through the use of an intervention that is largely based on daily SMS (Short Message Service: text) and MMS (Multimedia Message Service: small picture) messages transmitted via mobile phones.

Objective: This paper describes the development and evaluation of a text message—based intervention designed to help individuals lose or maintain weight over 4 months.

Methods: The study was a randomized controlled trial, with participants being exposed to one of the following two conditions, lasting 16 weeks: (1) receipt of monthly printed materials about weight control; (2) an intervention that included personalized SMS and MMS messages sent two to five times daily, printed materials, and brief monthly phone calls from a health counselor. The primary outcome was weight at the end of the intervention. A mixed-model repeated-measures analysis compared the effect of the intervention group to the comparison group on weight status over the 4-month intervention period. Analysis of covariance (ANCOVA) models examined weight change between baseline and 4 months after adjusting for baseline weight, sex, and age.

Results: A total of 75 overweight men and women were randomized into one of the two groups, and 65 signed the consent form, completed the baseline questionnaire, and were included in the analysis. At the end of 4 months, the intervention group (n = 33) lost more weight than the comparison group (\square 1.97 kg difference, 95% CI \square 3.34 to \square 8.60 kg, P = .02) after adjusting for sex and age. Intervention participants' adjusted average weight loss was 2.88 kg (3.16%). At the end of the study, 22 of 24 (92%) intervention participants stated that they would recommend the intervention for weight control to friends and family.

Conclusions: Text messages might prove to be a productive channel of communication to promote behaviors that support weight loss in overweight adults.

Trial Registration: Clinicaltrials.gov NCT00415870; http://clinicaltrials.gov/ct2/show/NCT00415870 (Archived by WebCite at http://www.webcitation.org/5dnolbkFt)

(J Med Internet Res 2009;11(1):e1) doi:10.2196/jmir.1100

KEYWORDS

Mobile phone; obesity; SMS; text message; health behavior

²Graduate School of Public Health, San Diego State University, San Diego, CA, USA

³Department of Computer Sciences and Engineering, University of California, San Diego, La Jolla, CA, USA

Next Phase: ConTxt & Text4Diet ™



ConTxt -

1-year Randomized Trial among 300 Overweight/Obese Adults beginning 8/11

English and Spanish Language

3-arms: SMS only, SMS + Brief Phone Counseling; Usual Care

Primary Outcome: Weight status at 1-year

Secondary Outcomes: Behaviors related to weight control

Text4Diet™ -

Santech, Inc. is developing a commercial version with enhanced SMS functionality including secure SMS if desired

SMART Social Mobile Approach to Reduce Weight

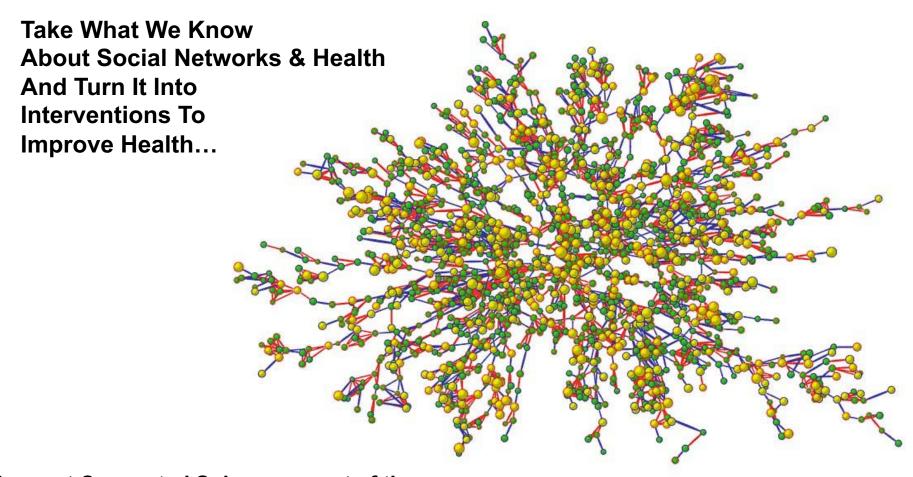


PURPOSE

To leverage social networks, social media, mobile phones, and the web for weight loss among 18-35 year old young adults. Funded with a 5-year grant from NHLBI/NIH







Largest Connected Subcomponent of the Social Network in the Framingham Heart Study in the Year 2000.

Each circle (node) represents one person in the data set. The size of each circle is proportional to the person's body-mass index.

Christakis & Fowler, The spread of obesity in a large social network over 32 years. New England Journal of Medicine, 2007

SMART

Social Mobile Approaches to Reduce Weight



INTERVENTION

Facebook an intact social network

+

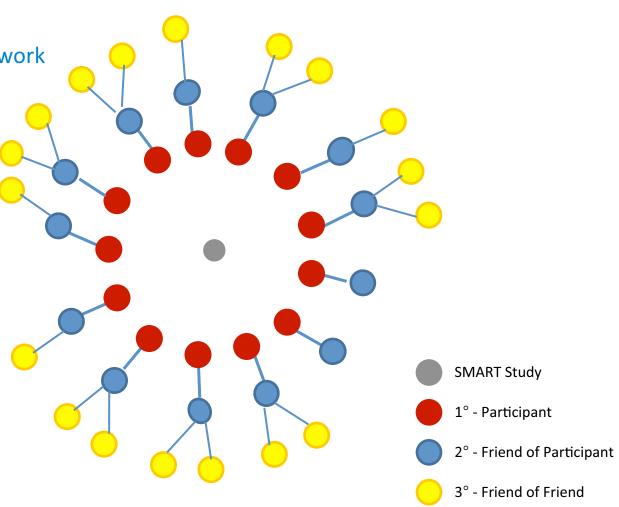
Mobile Phone txt messaging

+

Smartphone mobile apps

+

Website



Study Design:

400 Subjects, 18-35 years old male & female,
Weight: 25 < BMI ≤ 34.9
University students
at four colleges in the San Diego area

((CW PHS)) CENTER FOR WIRELESS & POPULATION HEALTH SYSTEMS

- Owns a personal computer
- Owns a mobile phone and uses text messaging
- Facebook user / willing to start using Facebook
- RECRUITMENT BEGINS: March 2011
- ENROLLMENT BEGINS: April/May, 2011

Collaborators and platforms:





Stanford University Medical Center

Treatment Modalities



Web









Facebook



apps m.web

txt

Mobile

Treatment: Mobile Apps







Mobile + Facebook Apps

APP	TARGET BEHAVIORS & STRATEGIES							
	Self- Monitoring	Intention Formation	Goal- Setting	Goal Review	Feedback	Knowledge		
Be Healthy		x	x	x				
Track Me (EMA)	x	X			X	x		
Goal Getter			x	x	X			
Facts / Quizzes					x	x		

Goal Getter







Friend's View Setting a Milestone Surprise for a friend.



User's View

Sharing your progress to get surprises.



User's View

Viewing your progress and milestones.



User's View

Viewing your progress, and a reached milestone.



Facts & Quizzes













Facebook Apps









-Every individual is responsible for 1 healthy -meal idea in a week.



-Individuals go to Eating Club Group Facebook Page and create an invite.



-Invites include the healthy concept, whether its not eating dessert, eating vegan, orsplitting a meal.



-Those ideas are listed in the Description and the invite is sent with secret setting so as not to highlight 'dieting' type behavior.

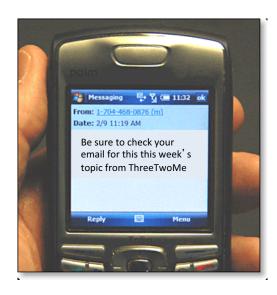


-Pair holds each other accountable for decisions made at the table.

-Members can see their healthy meals on the Group Page and on their Profile's Events Page.

Treatment: Txt Msgs







SMART is using "State of the Science" **Behavioral Theory & Principles**





Core Behavior Strategies

Self-monitoring

Intention Formation

Goal Setting

Goal Review

Feedback on performance

Michie et al., 2009

Theoretical Principles

Social Cognitive Theory

Ecological Theory

Social Network Theory

Theories of Operant Learning

Theories of Tailored Health Communications

Self Regulation Theory

Behavioral Choice Theory

Treatment Roadmap





A step-wise intervention built upon *core* self-regulation strategies



- A 16-week step-wise program
- The 16-week program repeated six times in the course of 2-year RCT
- The following will be introduced with each new cycle:
 - New skills
 - More detailed and advanced skills.
 - Reinforce core strategies and introduce new strategies
 - New and refined apps based on user experience and feedback
 - Re-address, in new ways, skills the participant may be having difficulty with (based on analysis of previous cycles)
- Flexible program:
 - Enables participants to enter trial at the first step
 - Program to enable highly tailored content throughout based on progress

Hypotheses we are considering related to **Social Networks & Intervention effects**





Participants who receive support messages from at least one of their closest social contacts on Facebook are more likely to succeed at weight loss than those who do not.

Participants who are socially active with a greater number of contacts on Facebook are more likely to succeed than those who are not.

Participants who are in highly transitive networks (their friends are friends with one another) are more likely to succeed than those who are not.

Participants with close friends on Facebook who discuss diet, physical activity and other study-related behaviors in status messages are more likely to succeed than those who do not have such friends.

In part, it's about collecting data from Sensors...

It's also about data-driven interventions via Mobile and Social Media...

And ultimately about integrating the two in real time...

CITISENSE

Mobile-phone-based Participatory Sensing for Environmental Exposures



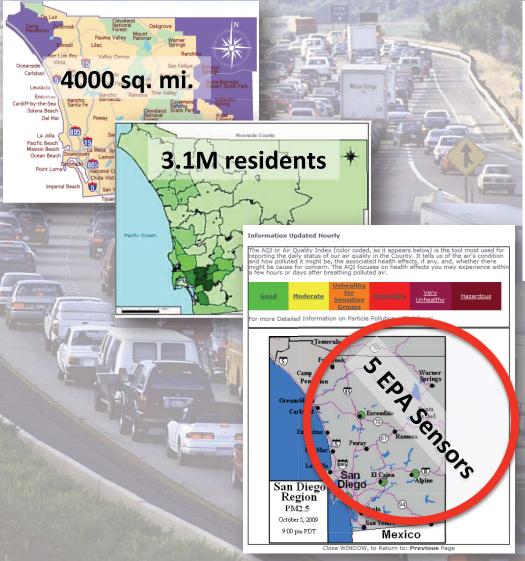
158 million live in counties violating air standards

Primarily due to diesel trucks & autos (particulates, benzene, sulfur dioxide, formaldehyde, etc.)

Asthma 50% higher near highways

30% of public schools near highways

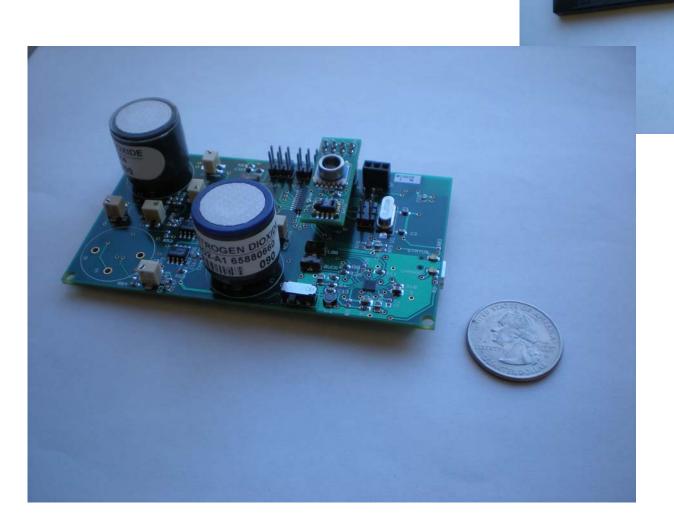
350,000 – 1,300,000 respiratory events
in children annually, many due
to the poor quality of air





CITISENSE Mobile-phone-based Participatory Sensing for Environmental Exposures CitiSense Sensor LTH SYSTEMS contribute distribute PI: Bill Griswold, PhD Sail Bay Co-PI: Kevin Patrick, MD, MS Mission Fisherman Beach Channel Enchanted Santa Cove

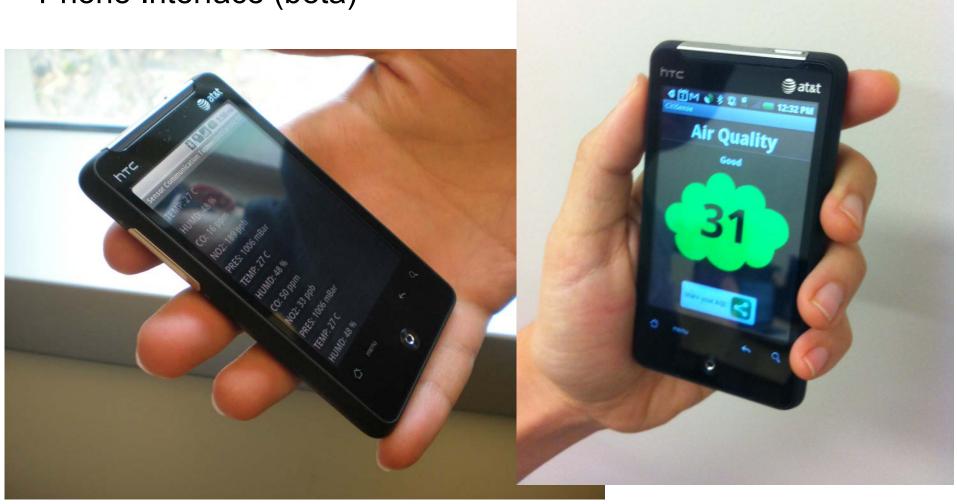
CitiSense Sensor Board



NOX (nitrogen oxides)
CO (carbon monoxide)
Temperature
Pressure
Humidity

Connects via Bluetooth radio to mobile phone

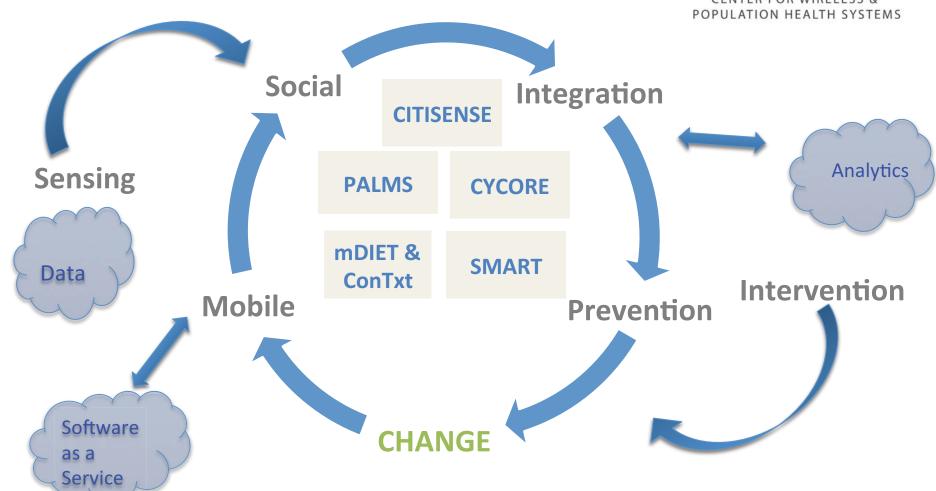




Developing UI to allow users to understand local air quality and to share with others via Facebook & Twitter...

True "Health Systems" Change ((CW PHS))





In Conclusion... What is the Unique Role For Each of Us?



"LIST"

Technologies

Systems

nstitutions

Leadership



Julio Frenk, MD, PhD
Dean, Harvard School of Public Health

