I) IXICO

Challenges to GCP Compliant Deployment of Biosensors in Cognitively Impaired Populations

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Challenges to GCP Compliant Deployment of Biosensors in Cognitively Impaired Populations

AGENDA

- IXICO overview
- Overview of challenges
 - Ethical, privacy and security
 - Operational
 - Data validation
 - Authentication
 - Audit trail
 - Computer system validation
 - Data quality control
 - Case studies of deployment
 - Cygnus study
 - Context study



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IXICO Overview

- IXICO brings innovative digital technologies and services to those involved in researching and treating diseases of the brain
- **IXICO's primary focus is on the needs of the pharmaceutical industry to support**
 - Development of drugs in clinical trials
 - Use of drugs in the clinic to improve patient safety and outcomes
- Our background is in imaging-derived biomarkers for enrichment, safety and efficacy
 - The evolving biosensor-derived biomarkers landscape parallels imaging 15-20 years ago
- Acquisition of Optimal Medicine in 2015 provides new capabilities and resources to apply to biosensors
- Collaborations with Withings/Nokia and Prof Yves Dauvilliers, Montpellier University Hospital Sleep Lab, DPUK



Innovative Medicines Initiati

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Ethics, Privacy and Security

Biosensors worn at home introduce particular challenges

These increase if:

- The data are accessed or shared within a study
- Real-time data are collection
- Using consumer devices via the cloud
- Patients are cognitively impaired

IXICO is particularly focussing on these issues in Cygnus

Protocol, ethics approval and informed consent challenges addressed with UK authorities and patient groups



Overview of Challenges to GCP Compliant Deployment

- The challenges depend on the context of use
- Illustrated with two case studies from IXICO



- To evaluate feasibility of biosensor & mobile technologies for collecting high quality and actionable data from cognitively impaired patients and their care givers
- Real world setting
- Linking to standard clinical care dataset about care delivery, cost and outcomes
- 250 patients presenting to memory services and 250 care givers
- Sub-group with wearables



- To explore the performance of biosensors compared with standard sleep assessment methods (polysomnography, sleep scales and sleep diaries) in healthy elderly subjects and individuals with neurodegenerative disorders
- To discover clinically valid actigraphy-derived sleep metrics (and beyond) that take into account physiology and pathology
- Commencing with elderly control subjects and Parkinson's disease



Device Selection For Cygnus

Device evaluation

Detailed assessment of a number of devices on parameters key to adoption and study success

	Price	Comfort	Step Count	Clock	Raw data	Ease of use	Data access	Battery life	Aesthetics
Fitbit Charge	80	Good	Yes	Yes	No	ОК	Web	5 days	ОК
Garmin Vivofit	60	Good	Yes	Yes	No	ОК	Web	1 year	ОК
Axivity	150	Poor	Yes	No	Yes	Good	Raw	30 days	Poor
wGT3X-BT Monitor	300+	?	with process	No	Yes	?	Raw	25 days	Poor
Withings Activite Pop	100	Good	Yes	Yes	No?	ОК	API	8 months	Good
ActiGraph GT9X	180	Poor	Yes	Yes	Yes	ОК	Raw	7 days	Poor





Focus groups

Highest scoring devices were evaluated in focus groups of people diagnosed with mild cognitive impairment/dementia and their care-givers



Practical Considerations: Trade-offs

- Long battery life and highly processed data vs. short battery life and raw data
- No charging worn 24/7 for battery life vs. removed for charging with data gaps
- Familiar appearance (watch) of consumer device but processed data



- Processed data

Withings Activité Pop

8 months battery life

- Requires app and website
- Syncs daily
- Near real-time QC of data
- Data can be "actioned" during study (ePRO questions, troubleshooting, technology issues...)







- Axivity AX3
- 14 days battery/data collection (depends on settings)
- Raw data
- Standalone device
- Data download, viewing and QC only at end of study period
- Subject behaviour not influenced by viewing data

→ Three devices being used at present; Withings Activité Pop, Axivity and Actigraph Link



Data Validation

Authentication

• How do we know who the data are coming from?

Audit trail

• Especially for consumer devices, how do we identify and document changes to data made by people or systems?

Data quality control

- Real-time verification e.g. syncing
- Artefact detection
 - Not being worn
 - Noise and error
 - ...

→ Risk based approach to computer system validation



Audit Trail and Computer System Validation For Consumer Devices

- How do I know changes in sensor measurement are due to change in subject rather than change in sensor, its software, or artefact?
 - Reliable data
 - Regulatory compliance for decision making



Traditional approach

- Vendor assessment of wearable supplier
- Validation of computer system (audit trail, access etc)
- Validate consumer wearable (inc. all systems) for "context of use" against "gold standard"
- Formal change control process if changes in device or software



Data QC - Near Real-Time Verification

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		****	****	02_SP_014	1954-12-28	Study Partner	2016-09-27	Edit 🗹
		*****	*****	03_PA_008	1932-03-04	Patient	2016-08-28	Edit 🕑
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Operationalising Wearables in the GCP Environment

- Focus groups completed
- Ethics approval obtained
- Standard Operating Procedures established
- GCP compliant software platform with integrated wearables, ePRO and ObsPro (remote monitoring from patients and caregivers partners)
- >170 subjects recruited in main study
- Wearable sub-study data collection commenced
- Data artefact and syncing processes operational





Case Study:



Dataflow from Withings Activité Pop to IXICO's Platform





Withings "consumer" data

"Heat-maps" on Withings' website





Graphs on Withings' App

Sleep Measures from "Minute Data"

Withings data from Oauth API

Example of detailed sleep data



"wakeupduration":1800,
"lightsleepduration":18540,
"deepsleepduration":8460,
"remsleepduration":10460,
"durationtosleep":420,

"durationtowakeup":360, "wakeupcount":3

API "Get sleep data summary"

Sample output converted to excel

	state	Start time	End time	Start date	End date
	awake	20:41:00	20:46:00	31/07/2016	31/07/2016
	light sleep	20:46:00	20:49:00	31/07/2016	31/07/2016
	deep sleep	20:49:00	21:09:00	31/07/2016	31/07/2016
	light sleep	21:09:00	21:18:00	31/07/2016	31/07/2016
	awake	21:18:00	21:30:00	31/07/2016	31/07/2016
	light sleep	21:30:00	21:51:00	31/07/2016	31/07/2016
	deep sleep	21:51:00	23:34:00	31/07/2016	31/07/2016
	light sleep	23:34:00	23:45:00	31/07/2016	31/07/2016
	awake	23:45:00	23:49:00	31/07/2016	31/07/2016
	light sleep	23:49:00	23:58:00	31/07/2016	31/07/2016



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Subject CY-01 "Minute data" Summaries



Activity Summary

of Steps Metres

Intensity of exercise





63 year old female

Early onset Alzheimer's Disease





Case Study: Enabling Context-Appropriate Use and Interpretation of Biosensor Data

Advancing the understanding of the impact of clinical context on biosensor data

- To explore the performance of biosensors compared with standard sleep assessment methods (polysomnography, sleep scales and sleep diaries) in healthy elderly subjects and individuals with neurodegenerative disorders
- To discover clinically valid actigraphy-derived sleep metrics that take into account physiology and pathology
- To identify bio-signatures of sleep disorders that influence sleep interpretation (REM- or sleep breathing-disorders, restless leg, etc)
- Understanding complementary roles of different sleep assessment methods
- >15 subjects recruited; elderly control subjects (with detailed cognitive and clinical assessments) and Parkinson's disease patients



Actigraphy vs Polysomnography PSG and Sleep Diaries



- 20 + patients 20 + controls
- Clinical and sleep assessments: e.g.REM Behaviour Sleep Disorder Screen
- Restless legs syndrome questionnaire
- Pittsburgh Sleep Quality Index
- Epworth Sleepiness Scale (daytime sleepiness)

Sleep Laboratory





PSG & actigraphy1 night

Home





Sleep diaries & actigraphy14 nights



- Device data, PSG & sleep diary outcomes compared
- End points & algorithms defined for control & disease groups





Subject PD-1 "Raw data"

71-year old female Parkinson's disease 1 night PSG plus Actigraphy PSG 6 Four sleep stages 2 Awake 22:30 23:30 00:30 01:30 02:30 03:30 04:30 05:30 06:30 3-axis accelerometry **Raw accelerometer** Blue: x-axis **Red: y-axis Green:** z-axis -2 22:30 23:30 00:30 01:30 02:30 03:30 04:30 05:30 06:30

→ Good correlation between PSG and raw actigraphy





Subject PD-1 "Processed Data"



→ Poor correlation between PSG and "processed" actigraphy using standard sleep algorithms



Subject EC-1 81-year old female control

CONTEXT





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Thank You