Integration of Wearable Sleep Trackers into Cognitive Behavioral Therapy for Insomnia for People Aging with Schizophrenia

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Disclosure of Conflicts of Interest

- The presenters, Junhua Ma and Jae Min Jeon, both do not have any conflicts of interest.
- The presentation will not discuss any off-label use of medication.

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Introduction

Schizophrenia, Insomnia, Cognitive Behavioral Therapy for Insomnia, and Sleep Trackers

Insomnia and Schizophrenia

Insomnia

Treatable with CBT-i

Primary Sleep disorder

Affects 30% of adults

Cognitive decline, depression, and poor physical health

Schizophrenia

Severe mental illness

Affects 1% of population

Hallucinations, delusions, and amotivation

30-40% of people with schizophrenia have comorbid insomnia

Cognitive Behavioral Therapy for Insomnia (CBT-I)

WHAT: Effective first-line treatment for insomnia that has the advantages of no risk for drug dependency and adverse drug effects

HOW: Weekly sessions with trained clinicians typically over 6 weeks

4 Cardinal Rules for Brief Behavioral Therapy for insomnia

Reduce your time in bed Get up at the same time everyday Don't go to bed unless you are sleepy Don't stay in bed unless you are asleep

Sleep Diary

Need to be filled out every day

Require Detailed Information

Essential for sleep prescription

	Sample				
Today's date	Mon 1/1/12				
What time did you get into bed?	10:30 p.m.				
2. About what time did you fall asleep?	12 a.m.				
3. In total, about how long were you up in the middle of the night?	1 hour				
4. What time was your final awakening?	6:30 a.m.				
5. What time did you get out of bed for the day?	7 a.m.				
6. Time in Bed (#5 minus #1)	8.5 hours				
7. Total Time Asleep (#4 minus #2 minus #3)	5.5 hours				
8. Sleep Efficiency (Time Asleep ÷ Time in Bed)	65%				
9. How would you rate the quality of your sleep?	□ Very poor ☑ Poor □ Fair □ Good □ Very good	□ Very poor □Poor □ Fair □ Good □ Very good	□ Very poor □Poor □ Fair □ Good □ Very good	□ Very poor □Poor □ Fair □ Good □ Very good	□ Very poor □Poor □ Fair □ Good □ Very good
10. In total, how long did you nap or doze vesterday?	45 min		, ,	7.5	

How our mobile app tackles the needs

CBT-i based on the Simplicity in CBT-i 4 cardinal rules Simplicity in User Simple To-do List Interface Structure **Automatic sleep diary** Sleep diary support generation Ready and easy for **Patient management** clinical use website

Sleep Tracking Technologies

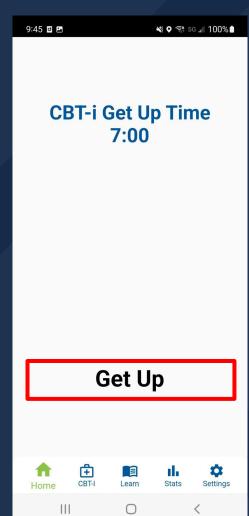
Fitbit (Charge 5)

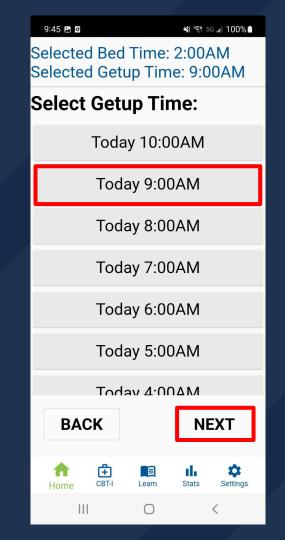


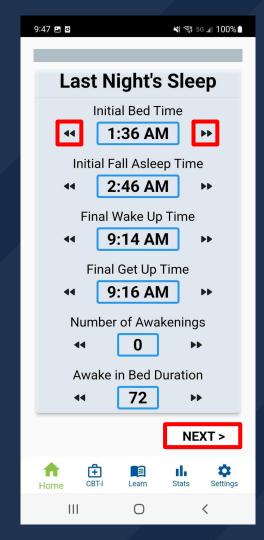
Withings (Sleep Mat)

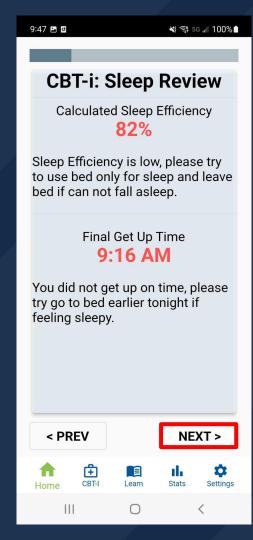


Mobile and Web Applications

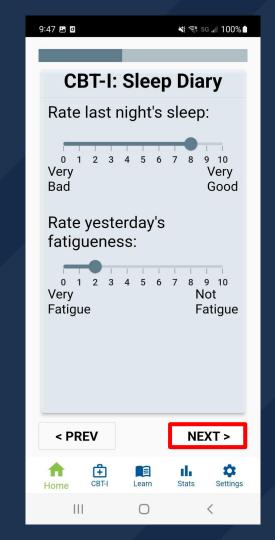


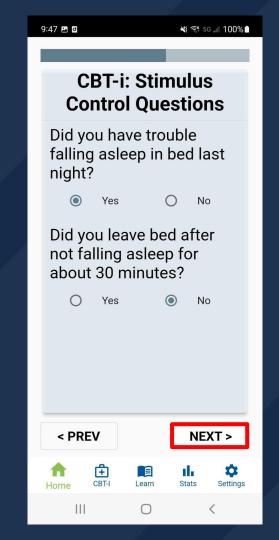


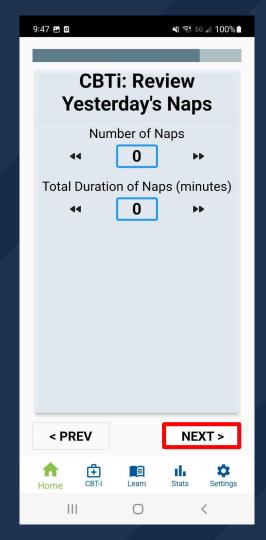


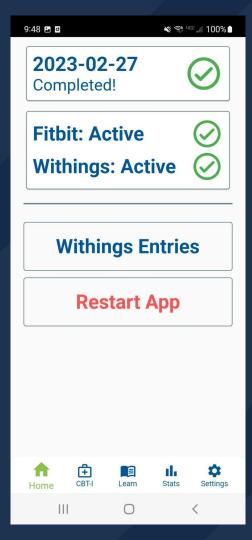


$$Sleep\ Efficiency = \frac{Time\ asleep}{Time\ spent\ in\ bed}$$

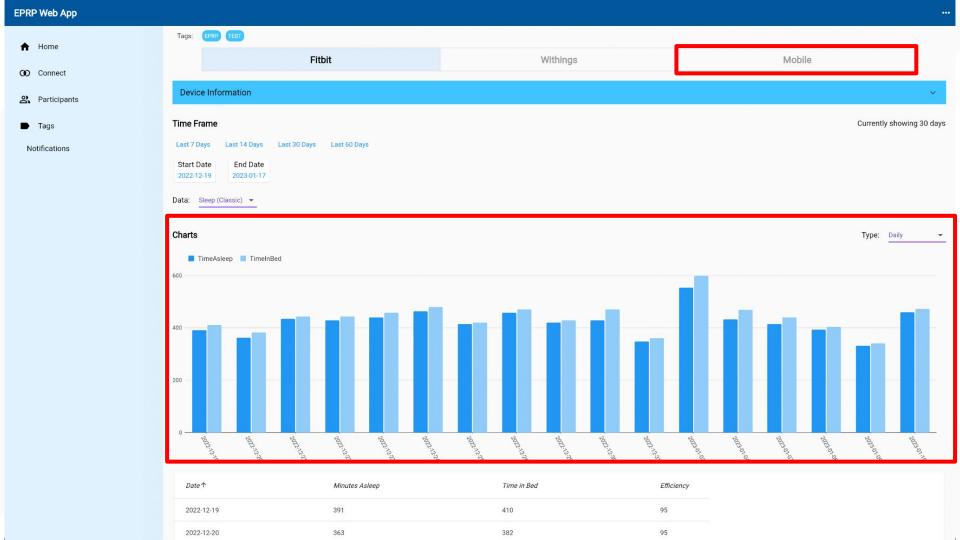








Web Application



EPRP Web App

Participant ID: TEST11 / ★ Home Tags: (Connect Fitbit Withings Mobile Participants Current CBT-i Session Start Date: 2022-08-20 (Week 22 Day 7) ■ Tags Participant Goal Get Up Time: 7:00 AM Notifications Daily 🔻 AUG AUG SEP 30 5 mon 26 13 SAT MON SUN MON TUE WED THU FRI SAT SUN TUE THU SAT SUN MON TUE Participant checked in CBT-i Data selected date Compliance to Set Getup Time: no Answer to Stimulus 1: yes Sleep Questionnaire Answer to Stimulus 2: yes Sleep Rating: 8 Fatigue Rating: 5 Sleep Data Sleep Diary Bed Time: 1:44 AM Fall Asleep Time: 2:00 AM Wake Up Time: 8:44 AM Get Up Time: 8:46 AM Sleep Diary Number of Awakenings: 0 Time Awake: 18 Time Asleep: 404 Time in Bed: 422 Efficiency: 96% Naps No Naps

Beta Tests

1st Beta Test - Feasibility

Timeline

• September 6th - 16th, 2022

Aim

- Validate sleep log generation from Fitbit and Withings
- Obtain feedback on user experience

Takeaway

Need to fully set up the smartphones and devices before deployment

2nd Beta Test - Usability

Timeline

October 7th - 17th, 2022

Aim

 How effective are the written instructions at helping the participant use the app and the devices

Takeaway

 Real time tech support is needed to both mirror/troubleshoot the phone



3rd Beta Test - Reliability

Timeline

November 9th - 15th, 2022 (Devices only)

November 15th - November 25th, 2022 (Devices + Survey)

Aim

Validate sleep diary generation from the mobile app

Results

# days Fitbit recorded data	15/15 (100 %)		
# days Withings recorded data	13/15 (87 %)		
Mobile Sleep Diary Entered by patient	4/9 (44 %)		
Server Sleep Diary Saved	4/4 (100 %)		

Takeaway

- Device adjustment period is helpful for patients
- Sleep diary was recorded on our server successfully

Challenges

Practicality

Access to Wi-Fi

Remote Device Management

Dealing with Subjectivity

Objective vs Subjective Data

Difficulties in Development

Lack of Patient Feedback

Sleep Trackers Issues

Designing for Simplicity

Users with limited tech experience

Next steps

Bug Fixes

IRB Approval

Launch more beta tests

Summary

- People with Schizophrenia have high rate of comorbid insomnia that impacts health and functioning
- CBT-i is an effective treatment but sleep diaries can be difficult for people with schizophrenia to complete
- Creating a mobile app that integrates commercially available sleep trackers can facilitate accurate sleep diary generation and support CBT-i treatment
- Beta testing has allowed us to refine the app to improve usability and replicability, reduce participant burden, and increase consistency/accuracy of data



Stein Institute for Research on Aging

Center for Healthy Aging







Thank you

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UCSD

Sonia Ancoli-Israel Paulyn Kwak Ellen Lee

IBM

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All the beta-testers