Overcoming the Hope-Evidence Gaps in Behavioral Health Research What do remote clinical trial methods enable?

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UC San Diego
Herbert Wertheim
School of Public Health and
Human Longevity Science









Take-Aways

Hope-evidence gaps exist with behavioral health interventions

Desired effects
 Real-world support
 just-in-time support
 Evidence-based
 Rapid scaling
 Iong-term results
 | low adherence
 | disruptive/shut off
 | poor implementation
 | poor evidence

What to do?

Rely less on summative RCTs (studying things) & instead study process Use appropriate methods to iteratively optimize in real-world contexts Foster more robust partnerships with researchers working within real-world contexts

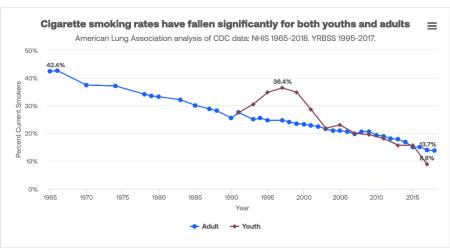
Behavioral health's research goal

- Real-world success advancing behavioral health
- · How?
 - Improved understanding of behavioral processes
 - Improved capacity to reliably produce desired behavioral changes

Success stories

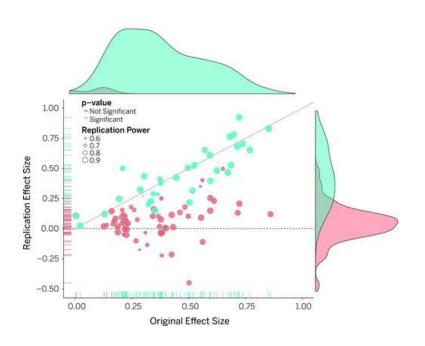


Trends in Cigarette Smoking Rates



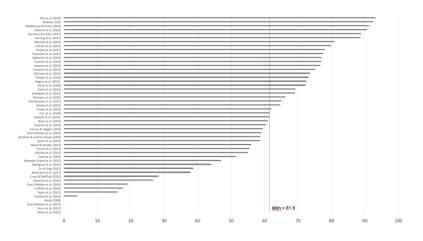
How are we doing?

Our predictions aren't replicating



Our treatments aren't reliably producing change

Figure 1
Heterogeneity in Interventions to Change Health Behaviors: Distribution of ℓ^2 values in 46 Meta-Analyses



Rothman, A. J., & Sheeran, P. (in press). The Operating Conditions Framework: Integrating mechanisms and moderators in health behavior interventions. Health Psychology

Hope-Evidence Gaps

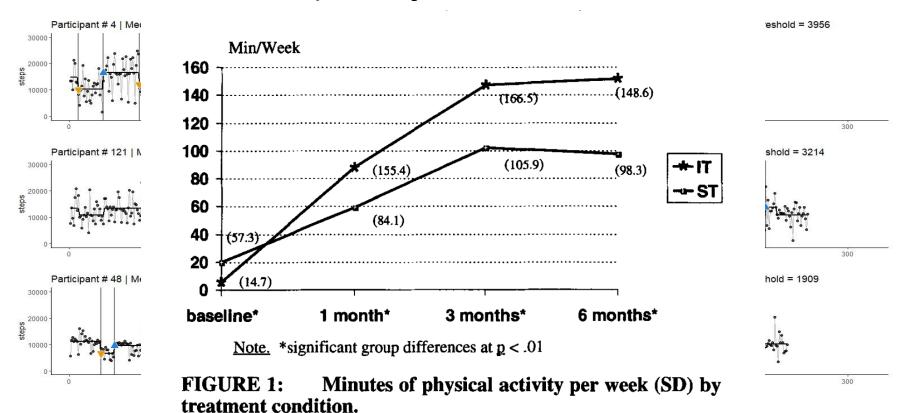
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 Evidence-based | | poor implementation
 Rapid Scaling | poor evidence

Why do the gaps exist?

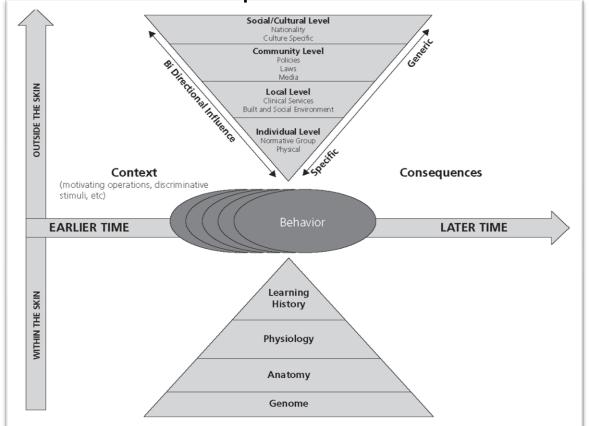
 Mismatch – between inherent complexity of target phenomena and appropriate methods.

Mismatch of complexity



Chevance, G, Baretta, D Heino, M, Perski, O, Hekler, E, Klasnia, P, Godino, J. (2020) Non-linear, day-to-day fluctuations in walking behavior. An ideographic modelling approach, *Manuscript submitted for publication*

Human behavior is complex.



Context matters. History/time matters. People adapt to context (difference).

Hovell M, Wahlgren D, Adams M. Emerging theories in health promotion practice and research. 2009;2:347-85.

Mismatch (part 2)

- Complexity is simplified by studying dynamic processes in context.
- Our methods largely study things
 - Studying things is useful when the causal model is simple and linear, not true with greater complexity

RCTs study things...

Pharmaceuticals







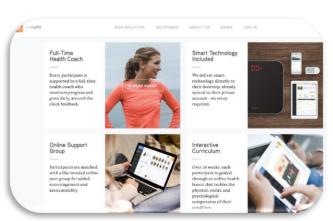
Complex behavioral interventions







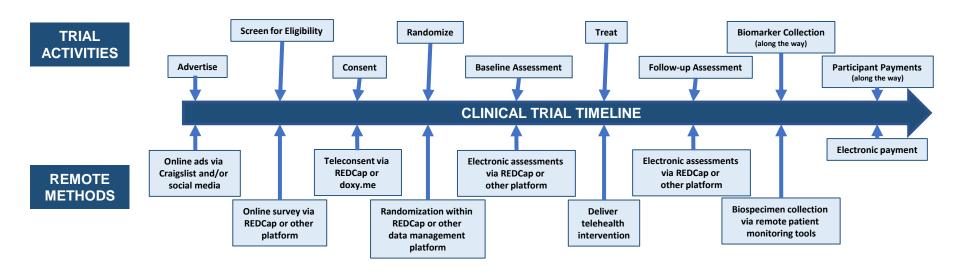




Hope-Evidence Gaps What to do?

- Only use an RCT when:
 - Simple causally (linear causation assumption justified)
 - If complex, the "thing" should be:
 - stable
 - · can be implemented and will be used in context
 - Likely to produce benefits over risks & costs
- Otherwise, study processes in context

Remote clinical trial tools enable us to study processes in context, not things



Slide courtesy of Jennifer Dahne, MUSC

How to study processes in context?

- Study how the elements of a complex intervention works
- Use optimization trials, particularly taking advantage of time series data
- Build within existing contexts and resources (e.g., within clinic resources, using robust digital platforms, et)

Processes can be understood better when studying components

Goal-setting Tool

Walking Reminder Tool Glucose Monitoring Tool

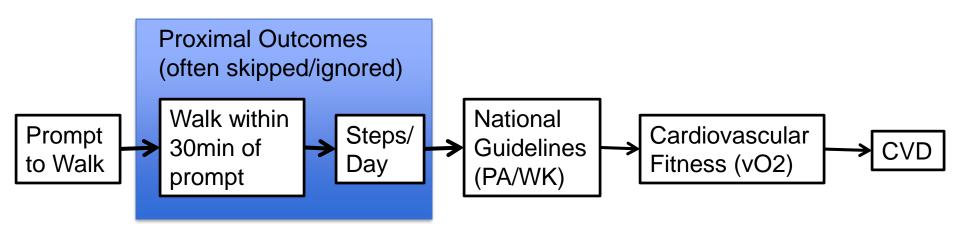
Pain Reduction Tool

Social Support Tool Insulin Dosage Tool



Proximal outcomes of the module

Shortest timescale for measuring a meaningful effect



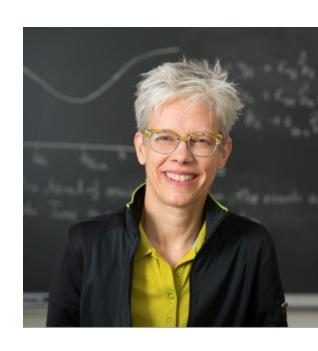


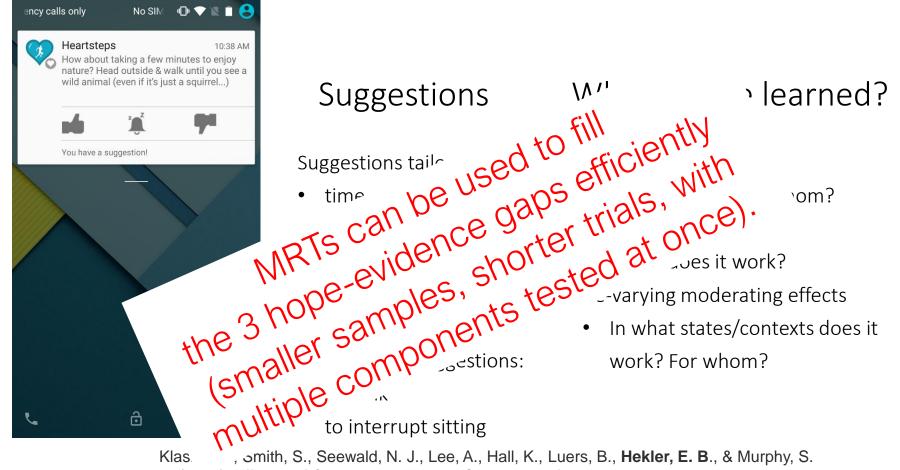
Efficient study designs Optimization trials

- Factorial trials (Collins)
 - Enables testing of intervention components and their interactions
- Others
 - Sequential Multiple Assignment Randomized Trial (SMART; Murphy) "N-of-1" study designs (Hekler '19); Control Optimization Trial (COT; Hekler 18'),
- Micro-randomization trials (Murphy & Klasnja)
 - Same as factorial trials + enables testing the contexts when components help vs. not

Micro-randomized trials

- Sequential, full factorial designs
- Randomize each intervention component
- Each time we *might* deliver component
- Multiple components can be randomized
- Randomized 100s or 1000s of times





Klas , smith, S., Seewald, N. J., Lee, A., Hall, K., Luers, B., **Hekler, E. B.**, & Murphy, S. A. (2019). Efficacy of Contextually Tailored Suggestions for Physical Activity: A Microrandomized Optimization Trial of HeartSteps. *Annals of behavioral medicine : a publication of the Society of Behavioral Medicine*, *53*(6), 573–582. https://doi.org/10.1093/abm/kay067

Family Health Centers of San Diego

Site PI: Job Godino, PhD

Co-Investigators: Jie Liu, MD; Charles Smoot, MD; Luis Rodriguez, MD; Noe Crespo, PhD, Elva Arredondo, PhD; John Elder, PhD



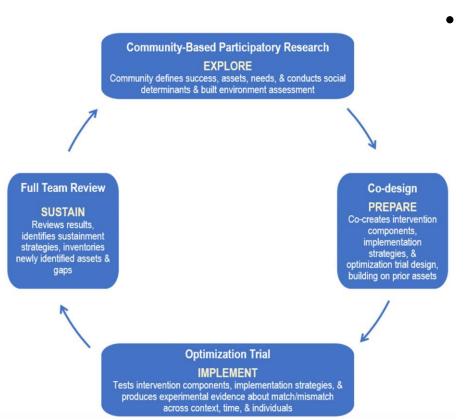
- Federally Qualified Health Center
- More than 64,000 patients with hypertension
 - o 14% Black and 46% Latino
- Since 2019, 57% presented with systolic blood pressure > 130
 - o 61% Black and 56% Latino



Goals

(1) Integrate a digital therapeutic for hypertension self-management education and support into the health system; (2) Equitably deliver in a multicultural and multilingual context; and (3) Create evidence that generalizes to Federally Qualified Health Centers.

Robust real-world evidence about processes in context



Sample

- Patients diagnosed with prehypertension/hypertension
- N=118, 85% power; effect size=0.122, 15% attrition

Conditions

- Telehealth coaching vs. not
 - (randomized weekly, proximal outcome=systolic blood pressures averaged across week)
- Medication adherence reminders sent or not
 - (randomized daily, proximal outcome=% Medication Adherence)

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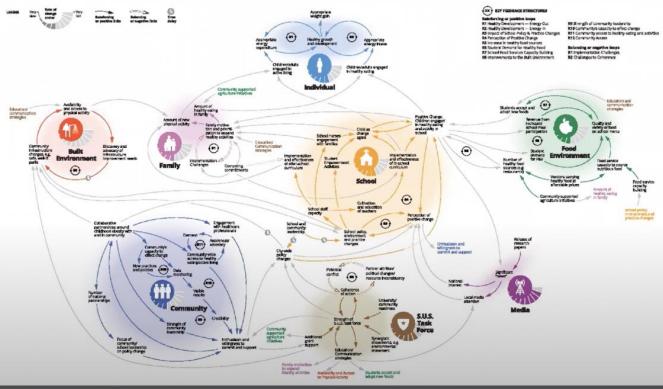




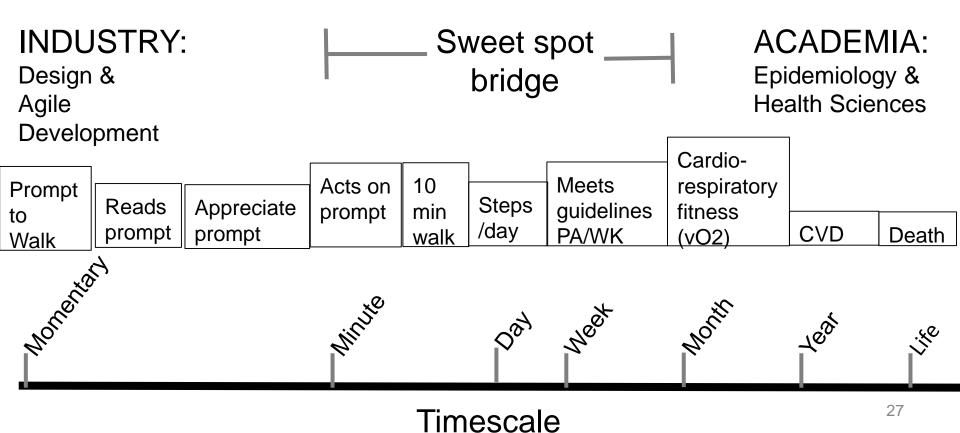
Extra Slides



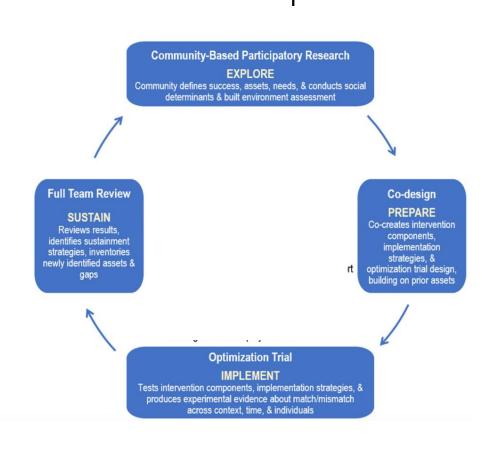
Shape Up Somerville Systems Map Mapping the Dynamics of Community Change

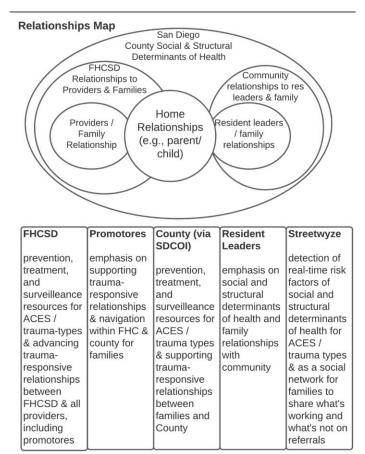


Measurement timescale is key



EXAMPLE: Precision Population Health Approach to ACEs to Reduce Health Disparities





Big Data Paradigm Small Data Paradigm Produce Help transportable Individuals knowledge Identify clusters Disseminate across people to clinics & & change communities mechanisms Produce Help transportable individuals knowledge

How small data might help

- Success criteria defined by and for an individual
- Including the individual is uniquely valuable for studying phenomena that manifest idiosyncratically
- Dynamic support tools can be built around meaningful decision points
- Including the individual can help to rule out some variables

How do you measure mechanisms of action?

i coleman.ucsd.edu/research/

① cws.ucsd.edu

Center for Wearable Sensors brochure (PDF)

Neural Interaction Lab

Todd P. Coleman | UCSD Bioengineering

Electrical Digestive Engineering



APRIL 19, 2018

Clinical Trial Tests Tattoo Sensor as Needleless Glucose Monitor for Diabetes Patients

A temporary tattoo for glucose monitoring developed by engineers at UC San Diego is being tested in a phase I clinical trial. The study will test the tattoo sensor's accuracy at detecting glucose levels compared to a traditional glucometer. The clinical trial is enrolling 50 adults, ages 18 to 75, with either type 1 or 2 diabetes or diabetes due to other causes. Full Story



\$

APRIL 10, 2018

Tiny injectable sensor could provide unobtrusive, long-term alcohol monitoring

Engineers have developed a tiny, ultra-low power chip that could be injected just under the surface of the skin for continuous, long-term alcohol monitoring. The chip is powered wirelessly by a wearable device such as a smartwatch or patch. The goal of this work is to develop a convenient, routine monitoring device for patients in substance abuse treatment programs. Full Story







Body Image Myrror

Introducing Myrror, the device that seeks to revolutionize the prevention of

Hand to mouth gesture detection.

Speed Eating



How do you measure mechanisms of action?

Advancing biomedical discovery and improving health through mobile sensor Big Data



October 3, 2017

Digital Phenotyping Technology for a New Science of Behavior

Thomas R. Insel, MD¹

Author Affiliations

JAMA. 2017;318(13):1215-1216. doi:10.1001/jama.2017.11295

