

Continuous Motor Monitoring: Implementation and Value

Webinar Will Begin at 12:00 PM EDT

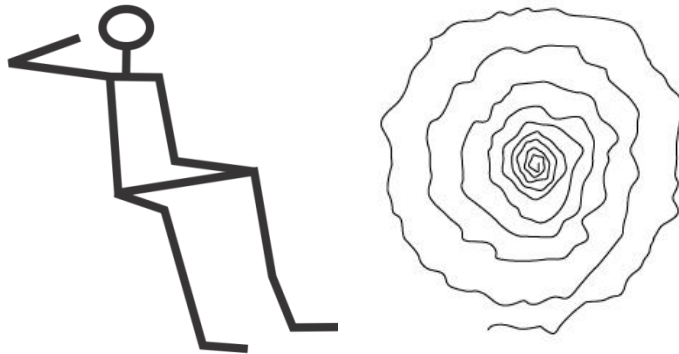


Outline

- Standard and technology-based assessment of motor symptoms
- Kinesia HomeView overview
- Motion sensor rating tremor in a laboratory setting during activities of daily living
- Continuous motion sensor rating of tremor at home

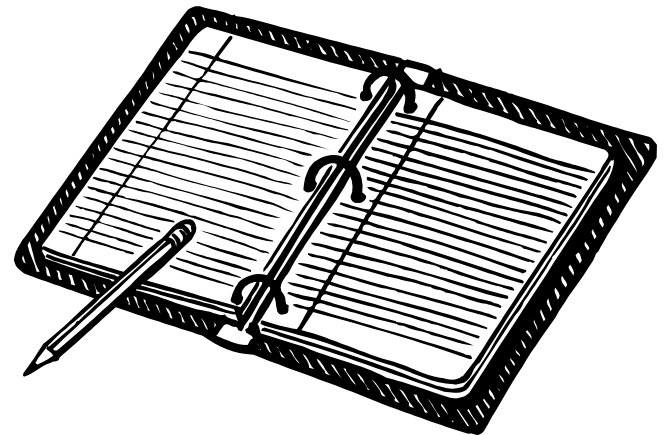
Standard Assessment of Involuntary Motor Symptoms

Clinician Ratings



- Limited resolution
- Limited reliability
- Placebo effects

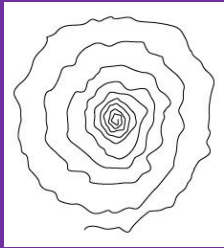
Patient Diaries



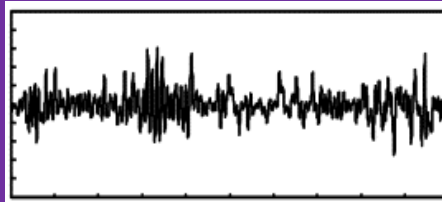
- Compliance
- Recall bias
- Poor self-assessment

Technology-based Assessment

Touch
Interfaces



Motion
Sensors



Mobile Data
Networking



Objective, high resolution
measurement

+

Remote
access

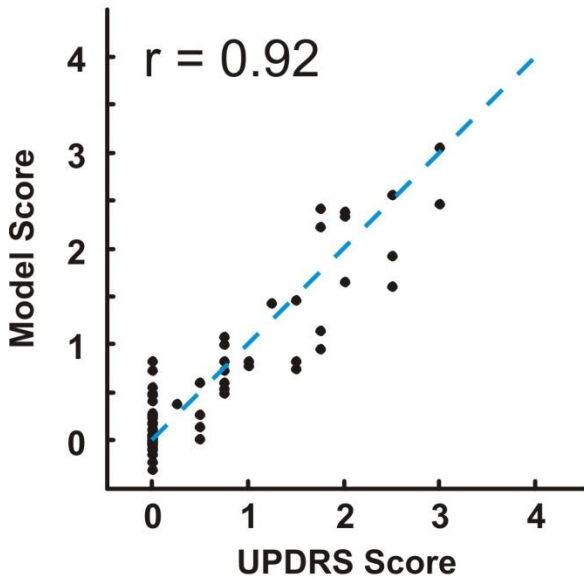


Kinesia HomeView

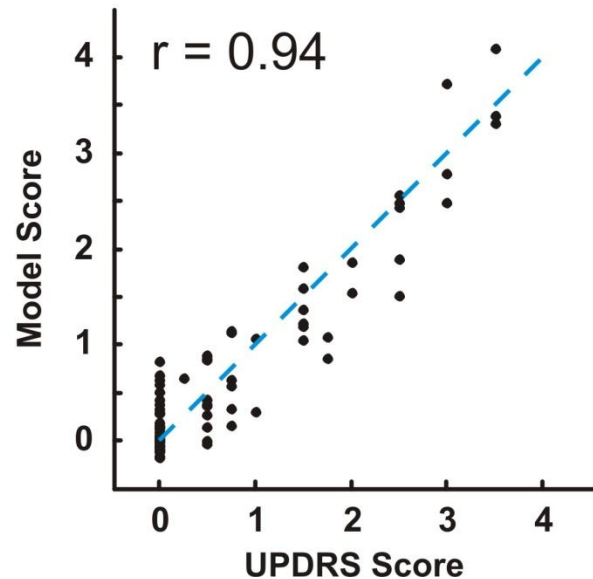


Clinical Validation - Tremor

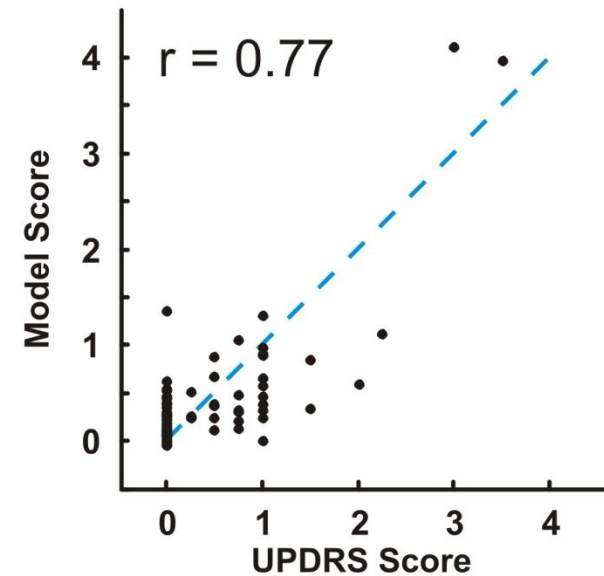
Rest Tremor



Postural Tremor



Kinetic Tremor

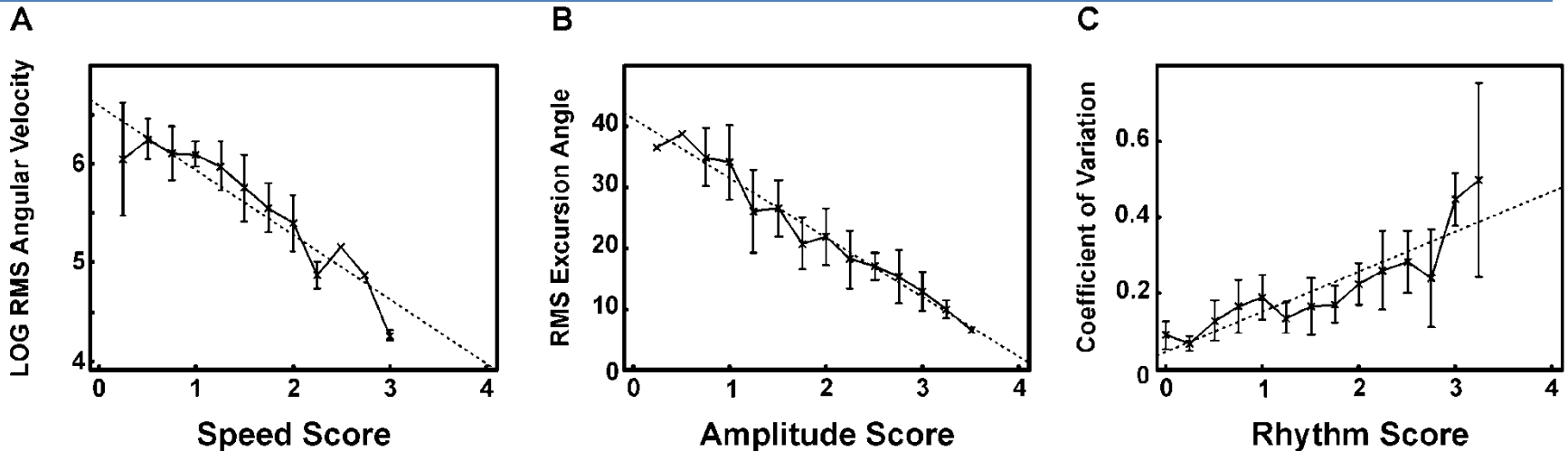


Published



Giuffrida, J. P., Riley, D, Maddux, B, and Heldman, D.A. Clinically deployable Kinesia technology for automated tremor assessment. *Movement Disorders* 24 (5): 723-730, 2009.

Clinical Validation - Bradykinesia



Objective
Quantification

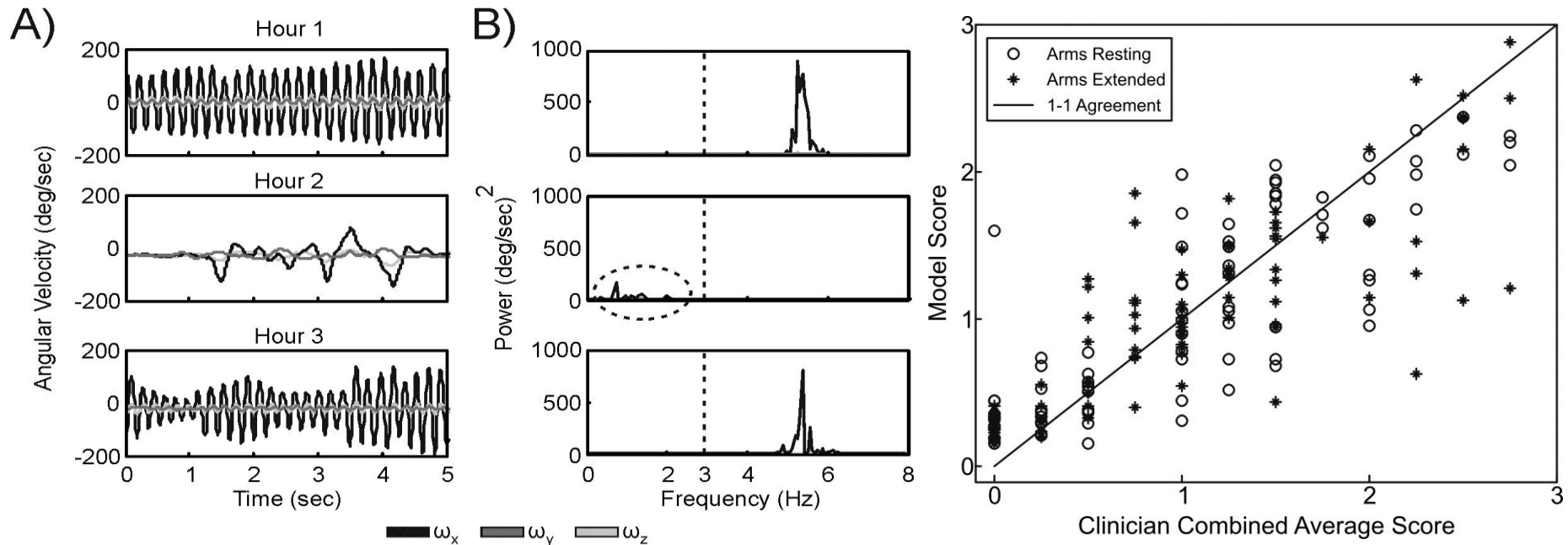
Kinematic features are highly correlated to clinician MBRS scores

Published



Heldman, DA; Giuffrida, JP; Chen, R; Payne, M; Mazzella, F; Duker, AP; Sahay, A; Kim, SJ; Revilla, FJ; Espay, AJ. The Modified Bradykinesia Rating Scale for Parkinson's disease: Reliability and Comparison with Kinematic Measures. *Movement Disorders*. 2011.

Clinical Validation - Dyskinesia



Published



Mera, TO, Burack, MA, and Giuffrida, JP. "Quantitative Assessment of Levodopa Induced Dyskinesia Using Automated Motion Sensing Technology", IEEE-EMBS Proceedings 2012.

Capturing Fluctuations

Time	Rest Tremor	Postural Tremor	Finger Taps Speed	Finger Taps Amplitude	Finger Taps Rhythm	Dyskinesia
7:01 AM	4.0	3.5	2.5	2.4	2.2	0.0
7:02 AM	SINEMET (100mg)					
7:32 AM	3.4	3.3	1.7	1.4	1.0	0.0
8:01 AM	3.0	3.0	1.8	1.8	1.2	0.0
8:34 AM	2.9	2.8	1.3	1.2	1.0	0.0
9:00 AM	2.8	2.4	1.2	1.1	1.2	0.0
9:23 AM	2.8	2.6	1.0	1.0	1.0	0.0
10:00 AM	2.6	2.8	1.0	1.0	1.0	0.0
10:33 AM	3.2	3.3	1.5	1.9	1.5	0.0
11:01 AM	3.5	3.5	2.3	2.2	2.0	0.0
11:30 AM	3.7	3.8	2.0	2.0	1.8	0.0

Time	Rest Tremor	Postural Tremor	Finger Taps Speed	Finger Taps Amplitude	Finger Taps Rhythm	Dyskinesia
7:01 AM	4.0	3.5	2.5	2.4	2.2	0.0
7:02 AM	SINEMET (100mg)					
7:32 AM	3.4	3.3	1.7	1.4	1.0	0.0
8:01 AM	3.0	3.0	1.8	1.8	1.2	0.0
8:34 AM	2.9	2.8	1.3	1.2	1.0	0.0
9:00 AM	2.8	2.4	1.2	1.1	1.2	0.0
9:23 AM	2.8	2.6	1.0	1.0	1.0	0.0
10:00 AM	2.6	2.8	1.0	1.0	1.0	0.0
10:33 AM	3.2	3.3	1.5	1.9	1.5	0.0
11:01 AM	3.5	3.5	2.3	2.2	2.0	0.0
11:30 AM	3.7	3.8	2.0	2.0	1.8	0.0
12:00 PM	SINEMET (100mg)					
12:01 PM	3.3	3.8	2.6	2.7	2.0	0.0
12:32 PM	3.2	3.4	1.8	1.9	2.0	0.0
1:08 PM	2.6	3.1	2.0	1.4	1.8	0.0
1:28 PM	2.6	2.9	1.5	1.2	1.7	0.0
2:00 PM	2.7	2.7	1.3	1.0	1.5	0.0
2:32 PM	2.9	2.6	1.0	1.2	1.7	0.0
3:00 PM	3.0	2.9	1.1	1.5	1.3	0.0
3:29 PM	3.3	3.1	1.4	1.7	1.7	0.0
4:02 PM	3.8	3.6	1.6	1.8	1.8	0.0
4:30 PM	3.9	3.8	1.9	1.9	2.0	0.0
5:01 PM	3.9	3.9	2.5	2.4	2.0	0.0
5:15 PM	SINEMET (100mg)					
5:29 PM	3.5	3.6	2.1	2.2	2.0	0.0
6:02 PM	3.3	3.5	2.0	2.1	1.6	0.0
6:30 PM	3.0	2.9	1.9	2.0	1.5	0.0
7:00 PM	2.8	2.5	1.5	1.8	1.3	0.0
7:33 PM	2.6	2.6	1.2	1.5	1.1	0.0
8:04 PM	2.6	2.6	1.0	1.4	0.9	0.0
8:30 PM	2.9	2.8	1.2	1.5	1.1	0.0
9:02 PM	3.3	3.2	1.3	1.6	1.4	0.0
9:33 PM	3.5	3.6	1.6	1.8	1.8	0.0
10:00 PM	3.8	3.9	2.0	1.9	2.1	0.0
Mean	3.2	3.2	1.6	1.7	1.6	0.0
Fluctuation	0.4	0.5	0.5	0.4	0.4	0.0



Increase dose by 200mg, Dose interval unchanged

Time	Rest Tremor	Postural Tremor	Finger Taps Speed	Finger Taps Amplitude	Finger Taps Rhythm	Dyskinesia
6:55 AM	3.9	3.4	2.6	2.5	2.3	0.0
6:57 AM	SINEMET (300mg)					
7:28 AM	2.5	3.0	1.7	1.4	1.0	0.0
7:59 AM	0.5	1.9	1.8	1.5	1.2	1.3
8:30 AM	0.3	0.9	0.3	0.5	1.0	2.9
9:05 AM	0.1	0.5	0.2	0.2	1.2	3.5
9:33 AM	0.3	0.4	0.0	0.0	1.0	3.8
10:02 AM	0.5	0.1	0.5	0.3	1.0	3.7
10:31 AM	1.5	2.0	1.0	0.5	1.5	2.9
10:58 AM	3.0	3.1	2.3	2.2	2.0	0.0
11:35 AM	3.5	3.4	2.0	2.0	1.8	0.0
11:50 PM	SINEMET (300mg)					
11:56 PM	1.1	2.7	2.3	2.2	2.0	0.0
12:30 PM	0.2	2.0	1.8	1.9	2.0	3.0
1:04 PM	0.1	1.4	2.0	1.4	1.8	3.3
1:38 PM	0.0	1.1	0.8	0.9	1.7	3.5
2:02 PM	0.0	1.0	0.6	1.0	1.5	3.6
2:30 PM	0.2	1.0	1.0	1.2	1.7	2.4
3:07 PM	0.4	0.7	1.1	1.5	1.3	1.1
3:33 PM	0.5	1.3	1.4	1.7	1.7	0.0
4:03 PM	2.6	1.5	1.6	1.8	1.8	0.0
4:28 PM	3.5	2.0	1.9	1.9	2.0	0.0
5:00 PM	3.8	2.2	2.1	2.1	2.0	0.0
5:05 PM	SINEMET (300mg)					
5:39 PM	3.5	2.2	2.1	2.2	2.0	0.0
6:03 PM	2.3	2.0	2.0	2.1	1.6	0.0
6:29 PM	1.7	1.3	1.9	2.0	1.5	0.5
7:05 PM	0.8	1.1	1.5	1.8	1.3	1.0
7:36 PM	0.6	0.8	1.2	1.5	1.1	2.3
8:01 PM	0.3	0.6	1.0	1.4	0.9	3.8
8:28 PM	0.2	1.0	1.2	1.5	1.1	3.7
9:00 PM	0.3	1.1	1.3	1.6	1.4	1.3
9:34 PM	0.3	2.0	1.6	1.8	1.8	0.5
9:59 PM	2.8	2.3	2.0	1.9	2.1	0.0
Mean	1.3	1.6	1.4	1.5	1.6	1.6
Fluctuation	1.3	0.9	0.7	0.6	0.4	1.5



Decrease dose by 100mg, Decrease dose interval by 2 hours

Time	Rest Tremor	Postural Tremor	Finger Taps Speed	Finger Taps Amplitude	Finger Taps Rhythm	Dyskinesia
7:00 AM	3.5	3.2	2.7	2.5	2.4	0.0
7:01 AM	SINEMET (200mg)					
7:31 AM	2.0	2.1	1.9	2.1	2.2	0.0
8:00 AM	0.6	0.7	0.3	0.5	1.0	0.0
8:33 AM	0.3	0.5	0.2	0.2	1.2	0.0
8:59 AM	0.2	0.2	0.0	0.0	1.0	0.0
9:22 AM	0.2	0.0	0.5	0.3	1.0	0.0
9:59 AM	1.1	1.5	1.0	0.5	1.5	0.0
10:32 AM	SINEMET (200mg)					
11:00 AM	1.2	1.3	1.5	1.4	1.5	0.0
11:29 AM	0.3	0.3	0.5	0.6	2.1	0.0
11:59 PM	0.2	0.2	0.3	0.3	1.0	0.0
12:00 PM	0.1	0.0	0.4	0.1	2.3	0.0
12:31 PM	0.2	0.6	0.6	0.1	2.1	0.0
1:07 PM	1.2	1.6	1.7	1.6	1.7	0.0
1:27 PM	SINEMET (200mg)					
1:59 PM	1.0	0.8	1.0	0.9	1.0	0.0
2:31 PM	0.3	0.7	0.3	0.8	0.9	0.0
2:59 PM	0.2	0.5	0.2	0.5	0.9	0.0
3:28 PM	0.0	0.3	0.2	0.8	0.9	0.0
4:01 PM	0.5	0.8	0.9	1.6	1.7	0.0
4:29 PM	1.3	1.7	1.6	2.1	2.1	0.0
5:00 PM	SINEMET (200mg)					
5:14 PM	1.0	1.5	1.0	0.9	1.0	0.0
5:28 PM	0.3	0.6	0.3	0.8	2.4	0.0
6:01 PM	0.2	0.3	0.2	0.5	2.0	0.0
6:29 PM	0.0	0.0	0.2	0.8	1.7	0.0
6:59 PM	0.5	0.2	0.9	1.6	1.2	0.0
7:32 PM	1.3	0.9	1.6	2.1	1.0	0.0
8:03 PM	SINEMET (200mg)					
8:29 PM	0.8	0.6	0.5	0.7	0.5	0.0
9:01 PM	0.0	0.2	0.2	1.1	0.9	0.0
9:32 PM	0.0	0.1	0.9	1.6	1.3	0.0
9:55 PM	0.5	0.6	1.9	2.0	1.9	0.0
Mean	0.7	0.8	0.8	1.0	1.5	0.0
Fluctuation	0.7	0.7	0.7	0.7	0.5	0.0

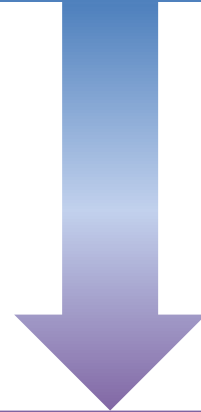
Pre-defined Tasks



Discrete Points in Time



In Front of Tablet PC



Routine ADLs



“Continuously”



Anywhere

Reduce Patient Burden

+

Improve Compliance

Challenges in Continuous Tremor Monitoring

**Non-
Standardized
Motions**

**Movement
Episodes of
Variable
Duration**

**Discerning
Regular
Activities from
Symptoms**

Tremor Assessment During Simulated ADLs

- 10 subjects with essential tremor wore motion sensors on the index finger in a laboratory
- Performed standardized tasks from the WHIGET tremor rating scale and non-standardized simulated ADL tasks
- Tremor rated by movement disorder specialists and by motion sensor system

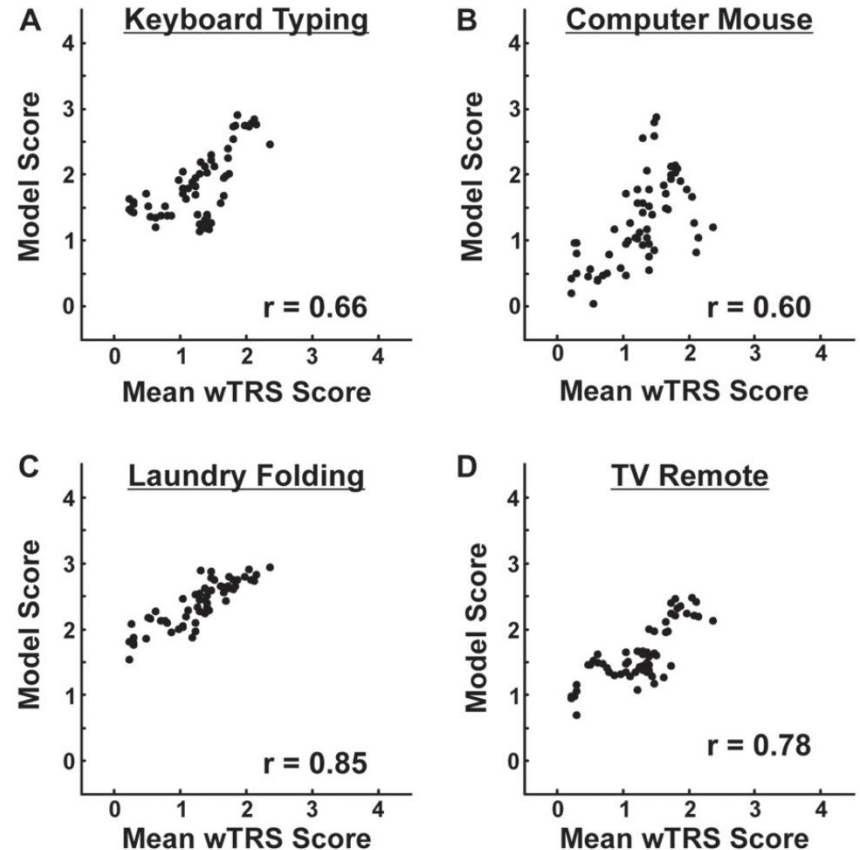
Published



Heldman, DA; Jankovic, J; Vaillancourt, DE; Prodoehl, J; Elble, RK; Giuffrida, JP. Essential Tremor Quantification During Activities of Daily Living. *Parkinsonism and Related Disorders*. 2011.

Tremor Assessment During Simulated ADLs

- Mathematical models produced ADL task ratings that correlated well with recent clinician ratings of standardized tasks



Published



Heldman, DA; Jankovic, J; Vaillancourt, DE; Prodoehl, J; Elble, RK; Giuffrida, JP. Essential Tremor Quantification During Activities of Daily Living. *Parkinsonism and Related Disorders*. 2011.

Continuous Tremor Assessment at Home

- 20 ET subjects wore the motion sensor for up to 10 hours per day on 2 separate days
- Completed standardized motion sensor tremor assessments at one-hour intervals to serve as checkpoints



Rest



Postural



Kinetic



BCM

Baylor College of Medicine

Joseph Jankovic, MD

Olga Waln, MD

Christine Hunter, RN

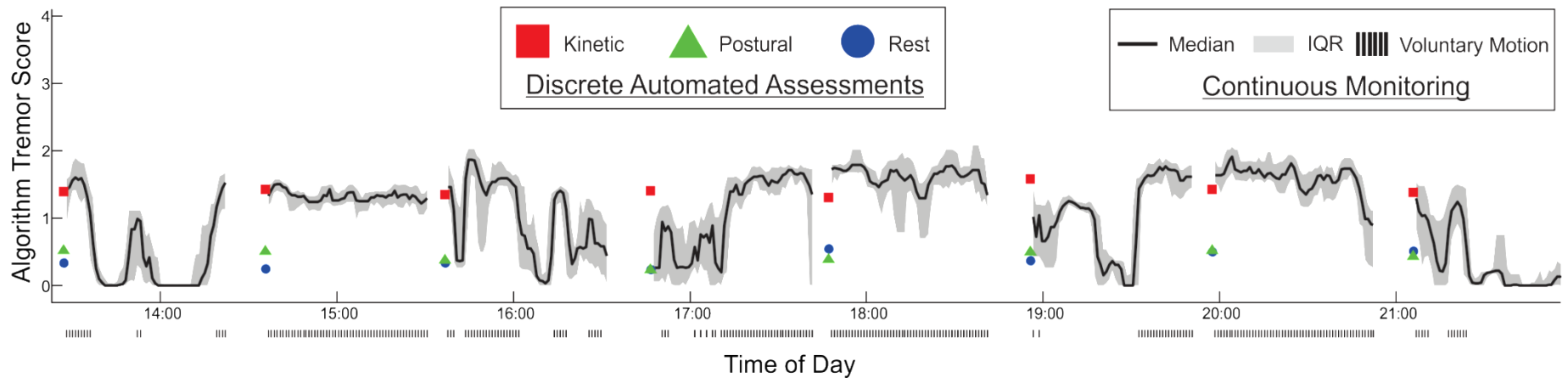


RUSH UNIVERSITY

Christopher Goetz, MD

Sheila Eichenseer, MD

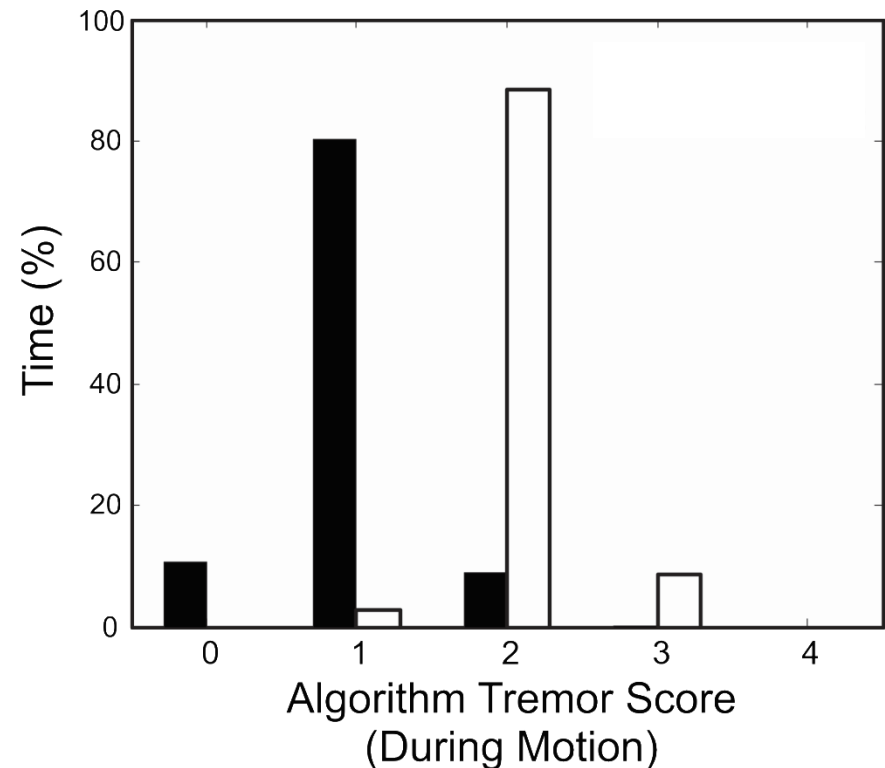
Continuous Tremor Assessment at Home



- Mathematical model uses processed motion sensor data to rate tremor amplitude severity every 12 seconds
- 5-minute sliding window used to filter the continuous scores

Continuous Tremor Assessment at Home

- Distribution of tremor scores is a quick tool for evaluating effectiveness of changes to therapy
- System can also be leveraged to monitor medication dose-response



Conclusions

- Tremor can be accurately rated during activities of daily living performed in a laboratory setting
- Tremor can be rated on a continuous basis without prior knowledge of activity using a single finger-worn sensor in patients' homes
- Dyskinesia rating is in our pipeline and future work will evaluate continuous dyskinesia monitoring with an optimized sensor suite

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National Institute
on Aging ■ ◆ ★ ✨

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Questions?

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