

Virtual
Journal club





Recommendations for Defining and Reporting Adherence Measured by Biometric Monitoring Technologies

May 12th, 2022 11am ET



Iredia Olaye PhD, MSc, MS Fellow Weill Cornell Medicine, Cornell



Jessie Bakker, MS, PhD Executive VP of Medical Affairs Signifier Medical Technologies



Isaac Rodriguez-Chavez,
PhD, MHSc, M.Sc.
Senior Vice President
Icon



Ali Ciger Vaccines Country Lead Pfizer Germany



Carrie Northcott, PhD
Director, Project Lead
Pfizer



Mia Belovsky, BS
MD Candidate
Sidney Kimmel Medical



But first, housekeeping

- Please note today's session is being recorded
- To ask a question for discussion during Q&A, please:
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- Slides and recording will be available after today's session



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Disclosures

- JPB (Signifier Medical Technologies and Philips)
- LB (Novartis)
- RC (Verily Life Sciences)
- AC (Pfizer and Ali Ciger Ventures UG [haftungsbeschränkt])
- KLF (K Health, Trusst Health Inc, InquistHealth, and Social Wellness)
- ESI (Koneksa Health)
- CJM (Astra Zeneca and Abbvie)
- CAN (Pfizer)
- IRRC (ICON plc)
- BV (Byteflies)

All other authors indicated no disclosures



Background

- Biometric monitoring technologies (BioMeTs): Connected digital tools that process data captured by mobile sensors using algorithms to generate measures of behavioral or physiological function
- Suboptimal adherence to data collection procedures or a study intervention is often the cause of a failed clinical trial (Eysenbach, 2005)
- If we build it, will they come?



Objectives

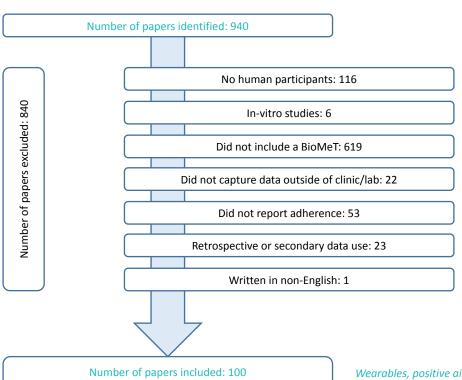
Conduct a systematic literature review of published studies reporting adherence captured by BioMeTs to:

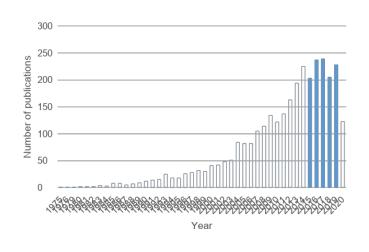
- identify studies that have used these tools to capture adherence to data collection procedures and/or study interventions
- describe the various methods used to measure adherence
- compare the definitions of adherence reported in the literature

... then use this information to identify gaps and compile recommendations for investigators

Systematic review







Number of BioMeTs included: 110

Wearables, positive airway pressure devices, smart clothing, blood pressure monitors, smartphones, oral appliances, glucometers, ingestibles, implantables, smart scales, patches, exercise equipment, and more...

Adherence data



PASSIVE: Designed to be used continuously *Example: Fitness trackers*

SESSION-BASED: Designed to be used during sessions *Example: Connected exercise equipment*

TASK-BASED: Designed to be used as a one-off task Example: Connected weight scales

Adherence data



Duration of use

Minutes/day Hours/night **Number of measurements**

Number of tasks completed Number of days with usage **Categorical variable**

% with usage >x hours/day % who completed >y tasks

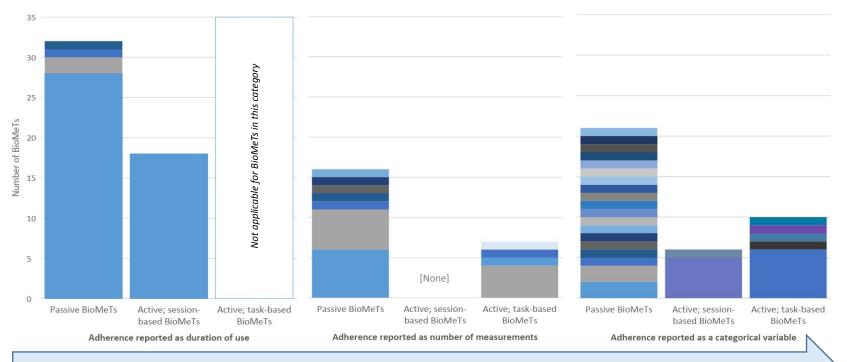
Adherence reported as duration of use

Adherence reported as number of measurements

Adherence reported as a categorical variable

Adherence data





Heterogeneity of adherence data **increased** as resolution of adherence data **decreased**



Gaps and Recommendations





- **Recommendation 1:** Develop and/or use BioMeT sensors to capture sensor-based adherence data in addition to their primary purpose
- **Recommendation 2:** Collect and report adherence data that are a direct reflection of actual use, rather than a surrogate





- Recommendation 3: Provide a clear description of the sensor or sensors capturing adherence data
- **Recommendation 4:** Describe the algorithm or algorithms that convert sample-level measurements into a measurement of adherence

Gap 3: Heterogeneity of adherence DME definitions increased alongside decreasing resolution of adherence data

- **Recommendation 6:** Report primary adherence as a continuous variable of time for passive or session based BioMeTS
- Recommendation 7: Report primary adherence as a continuous variable of time for task based BioMeTS
- Recommendation 8: Categorical adherence data are reported with continuous adherence data
- Recommendation 9: Categorical definitions of adherence should be based on clinical validation data



Key Takeaways

- With **increased consistency and reporting** of adherence and associated data elements, it will become possible to meta-analyze adherence data to identify determinants
- Understanding determinants of adherence allows for the development and testing of **targeted interventions** to optimize adherence
- Increased adherence to BioMeTs will ultimately improve the quality and efficiency of clinical trials



Full paper available at *Journal of Medical Internet Research*: https://www.jmir.org/2022/4/e33537/



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