

# Advancing Sleep Research: New Core Digital Measures & Resources



*Digital Health Measurement  
Collaborative Community*



CORE MEASURES *of* SLEEP



*Digital Measures Development*

WEBINAR 

**Wednesday, April 24**

11 am - 12 pm ET

RECORDINGS POSTED HERE



# Agenda

- **Welcome & Housekeeping**
- Opening Remarks from NSF
- Background of Project
- Panel: Resources in Action
- Fireside chat: The importance of sleep staging
- Panel: The possibilities for and importance of the out of lab assessment of sleep
- Fireside chat: The real world impact of digital sleep measurement

## But first, housekeeping

- Please note: **today's session is being recorded**
  - Slides and recording will be available on DiMe's webinar page after the session
- To ask a question for discussion during live Q&A, please
  - **Type your question** into the chat box

*\*\*\* Participants are not permitted to transcribe this webinar, violators will be removed from the session.*

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# Advancing Sleep Research: New Core Digital Measures & Resources

Wednesday, April 24

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*Digital Health Measurement  
Collaborative Community*

by **DiME**



**Joe Dzierzewski**

*Vice President, Research and  
Scientific Affairs*

National Sleep Foundation



# NATIONAL SLEEP FOUNDATION



**Joseph Dzierzewski, PhD**

Vice President  
Research & Scientific Affairs

# NSF Serves the Public through its Sleep Health Mission and Goals

The National Sleep Foundation is dedicated to improving health and well-being through sleep education and advocacy.



Sleep health is accepted as a crucial measure of overall health.



The natural sleep/wake process is understood as the basis for healthy sleep.



Community, infrastructure, and environments respect sleep health.



Sleep science and insight are rapidly incorporated into accessible health products and services.

# Sleep is Critical for Health and Performance

- Sleep is a fundamental part of our lives, strongly linked to brain and mental health, heart health, obesity, diabetes, immune function, and other public health priorities
- Sleep health and safety for wellness, selfcare, or medical conditions is in focus for the public, clinicians, industry, and policy makers
- Important to include NSF's guidelines and standards in new targeted resources for consistency across use cases





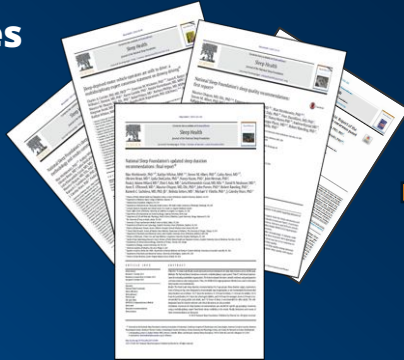
# NSF Published Research and Guidelines

Setting the Standards

Translate science, data, and insights into recommendations for healthy sleep behaviors

## Consensus guidelines

- Sleep duration
- Drowsy driving
- Sleep satisfaction
- Sleep quality
- Polyphasic sleep
- Sleep timing



### Sleep Quality At-A-Glance

**Sleep Quality Defined**

- Sleep Latency:** Time long it takes to fall asleep
- Awakefulness:** Number of awakenings during the night
- Wake After Sleep Onset:** Amount of time awake after falling asleep
- Sleep Efficiency:** Ratio of time asleep to time lying in bed

**Ways to Measure Sleep Quality**

- Self-reports:** How someone describes or rates their sleep
- Respirators:** Devices in beds or bedchairs that monitor movement, breathing, or body temperature
- Wearables:** Technology worn during sleep (watch, ring, etc.)
- Alibates:** Sleep monitors that use wireless signals (sound, radar, etc.)

**Evaluating Sleep Quality Claims**

- Are recommendations based on evidence or expert knowledge?
- Is a product's claim to measure or improve sleep quality supported by data?
- Do the product claims align with NIOSH/CIA definitions for sleep quality?

**Sleep Quality Checklist**

- Did you fall asleep in less than 30 minutes?
- Did you wake up 1 time or less at night (older adults = 2 times or less)?
- Were you awake 20 minutes total or less (older adults = 30 minutes or less)?
- Were you mostly asleep while in bed (i.e., 7 out of 8 hours)?

*Answering "Yes" to most of these questions suggests you likely have good sleep quality.*

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# Existing Standards Inform Multiple Use Cases



# Consistent Sleep Measures Across Use Cases

1. **Guidelines and standards exist**
2. **Consistency in application is key for progress**
3. **DiMe Core Measures of Sleep is a great example of appropriate application to expanded use cases**



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## CORE MEASURES of SLEEP



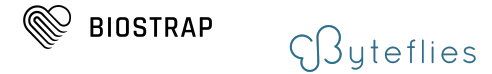
### *Digital Measures Development*

*Sleep disturbance greatly impacts quality of life and it's often the first indicator of a larger issue. Let's measure it the right way.*

#### Project Partners



#### Digital Solutions Collaborators



# We have our measures

## Core Digital Measures of Sleep



Total Sleep  
Time



Initial Sleep  
Onset  
Latency



Wake After  
Sleep Onset



Number of  
Wake  
Events



Sleep  
Efficiency



Total  
Napping  
Time

## Emerging Digital Measures of Sleep



Sleep Regularity  
Index



Symptomatology  
Impact on Sleep

# Core Digital Measure of Sleep: Total sleep time (Duration)

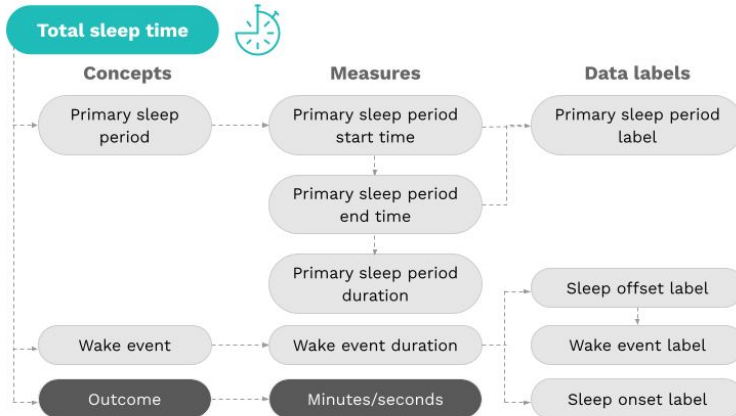
**Also known as:** true sleep time, time spent sleeping  
**Type:** Duration of time

**Definition:** The duration of time spent sleeping in the primary sleep period



**Total sleep time = (Primary sleep period) - (WASO)**

**WASO\* = Σ (⚡ Duration)**  
 \*Wake after sleep onset



## Measure considerations

**Importance:** Total sleep time is an important indicator of health and mortality.<sup>1,2,3</sup>

**Measure derivation:** The difference between the primary sleep period duration and the sum of all wake events in the primary sleep period (i.e., wake after sleep onset).

**Optional deviations:** By specifying what constitutes a confirmed wake event, users can ensure that the outcome of total sleep time is interpretable. With rationale, a confirmed wake event could be more or less conservative to meet the specific research goals.

### Primary sleep period label

#### Description

A sleep period is a duration of time that an individual spends asleep in a single session. It may involve some number of brief awakenings, but the individual returns to sleep rather than terminating their sleep attempt. There could be several sleep periods in a given 24-hour period, but research and clinical practice is often concerned with activity within a primary sleep period, such as going to sleep at night and intending to wake up in the morning.

#### Label definition

A label for each epoch between:

- The first sleep onset label=1 with a time attempting to sleep label=1
- The final sleep offset label=1 with a time attempting to sleep label=1

The final sleep offset is not included in the definition.

Where the time attempting to sleep label is not available, the In bed label can be used in its place. This substitution should be clearly noted.

#### Why is this important?

The primary sleep period label differentiates from the asleep label, as any sleep period can include brief periods of waking, provided the individual falls back asleep.

The primary sleep period label can therefore be used in conjunction with other labels and derived variables to determine, for example, the number of awakenings or the length of awakenings during the sleep period. It also allows the user to derive measures of other sensor-based symptomatology or activity occurring during the sleep period.

#### Derived variables

Primary sleep period start time

Primary sleep period end time

#### Variable definition

The **timestamp** of the first epoch with the primary sleep period label.

#### Variable definition

The **timestamp** of the final epoch with the primary sleep period label.

Primary sleep period duration

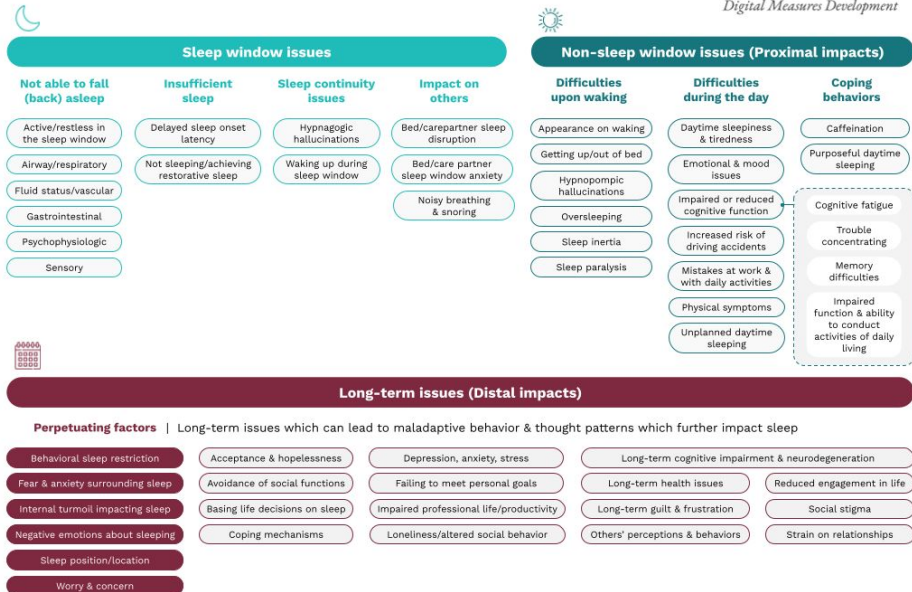
**Definition:** A time duration (seconds) calculated as the difference between the primary sleep period start and end times.

# Our conceptual model was the basis for our digital core measures selection

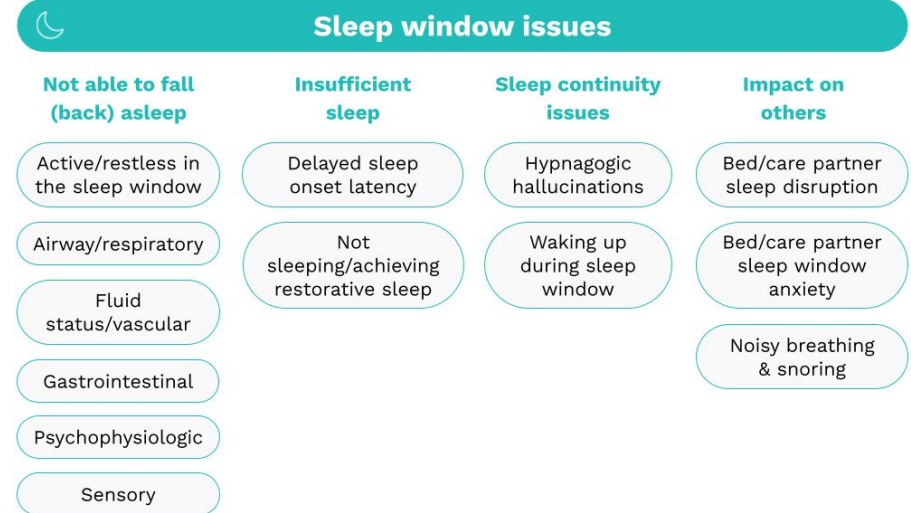
CORE MEASURES of SLEEP

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## Conceptual model: Sleep disturbance


 Source: <https://dataacc.dimesociety.org/core-measures-sleep/>

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# We have resources for everyone!

PROJECT HOME

ALL CORE MEASURES

KEY STAKEHOLDERS

LIBRARY OF DIGITAL MEASUREMENT PRODUCTS



**Clinical researchers**



**Clinician & healthcare  
decision makers**



**DHT developers**

# Checklists and evidence report forms

CORE MEASURES of SLEEP



## Comprehensive Checklist and Report Form for Core Digital Measures of Sleep: **Total napping time**

This checklist and report form is intended for you if you are conducting studies employing a digital health technology (DHT) to measure total napping time (TNT).

The checklist will help you and your team by ensuring that you have identified and collected the necessary details and evidence to support 1) the use of the measure in your target population and 2) the parameterization of the core measure.

Descriptions and evidence (references, parameterization details) relating to each aspect of the core measure are recorded on the following pages.

Total napping time as an outcome measure	Description	Evidence
<p><b>A.</b> Qualitative evidence supporting patient relevance in the target population.</p> <p>See: <a href="#">Digital Measures that Matter to Patients</a></p>	<input type="checkbox"/>	<input type="checkbox"/>
<p><b>B.</b> Quantitative evidence of clinical validity in the target population.</p> <p>See: <a href="#">The V3 Framework</a></p>	<input type="checkbox"/>	<input type="checkbox"/>

# Arming you with the evidence you need to make a case for sleep

## FAQ:

Justifying the Inclusion of the Core Digital Measures of Sleep

### CORE MEASURES *of* SLEEP



### *Digital Measures Development*

<https://datacc.dimesociety.org/core-measures-sleep/>



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# Resources for the general population and for clinicians

## Connecting Core Measures: Suggested Recommendations for Interpreting Data

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### Markers of good sleep health

	 Young adult (18-25 years)	 Adult (26-64 years)	 Older adult (≥65 years)
Total sleep time	7-9 hours	7-9 hours	7-8 Hours
Initial sleep onset latency	≤ 30 minutes	≤ 30 minutes	≤ 30 minutes
Wake after sleep onset	≤ 20 minutes	≤ 20 minutes	≤ 20 minutes
Number of wake events	≤ 1 awakening	≤ 1 awakening	≤ 2 awakenings
Sleep efficiency	≥ 85%	≥ 85%	≥ 85%
Naps	0		

Source: Hirshkowitz, M., Whitton, K., Albert, S. M., Alessi, C., Bruni, O., DonCarlos, L., ... & Ware, J. C. (2015). National Sleep Foundation's updated sleep duration recommendations. *Sleep health*, 1(4), 233-243.

Ohayon, M., Wickwire, E. M., Hirshkowitz, M., Albert, S. M., Avidan, A., Daly, F. J., ... & Vitiello, M. V. (2017). National Sleep Foundation's sleep quality recommendations: first report. *Sleep health*, 3(1), 6-19.

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## Reimbursement for Clinicians: Getting paid for caring for your patients using digital measures of sleep

For the purposes of monitoring, diagnosing, and treating patients with sleep or sleep-related disorders, you as a healthcare provider (HCP) can perform a sleep assessment for your patients. There are several reimbursement avenues available to you for this assessment. However, the specific medical insurance codes for reimbursement and the associated activities need to be in line with guidelines to enable this process.

This document aims to offer you top-level initial guidance on the specifics of the reimbursement process if you wish to use digital health technology measures of sleep, such as the Core Digital Measures of Sleep, when treating your patients.

The full [Payment and Coding Toolkit](#) and [Quick Start Guide](#) is available should you be looking to adopt remote monitoring.

### Remote patient monitoring (RPM) and remote therapeutic monitoring (RTM)

**Remote patient monitoring**, also called remote physiological monitoring, refers to the use of digital technologies to capture and analyze patients' physiological data, such as sleep metrics, blood pressure, glucose levels, or lung function.

**Remote therapeutic monitoring** refers to the use of digital technologies to collect and analyze data, including patient-reported measures, for the purposes of therapy

# Vendor selection checklist to help you ask the right questions



## Checklist: Essential Questions for DHT Vendor Selection

### CORE MEASURES *of* SLEEP



*Digital Measures Development*

<https://datacc.dimesociety.org/core-measures-sleep/>



### What should I ask a DHT vendor?



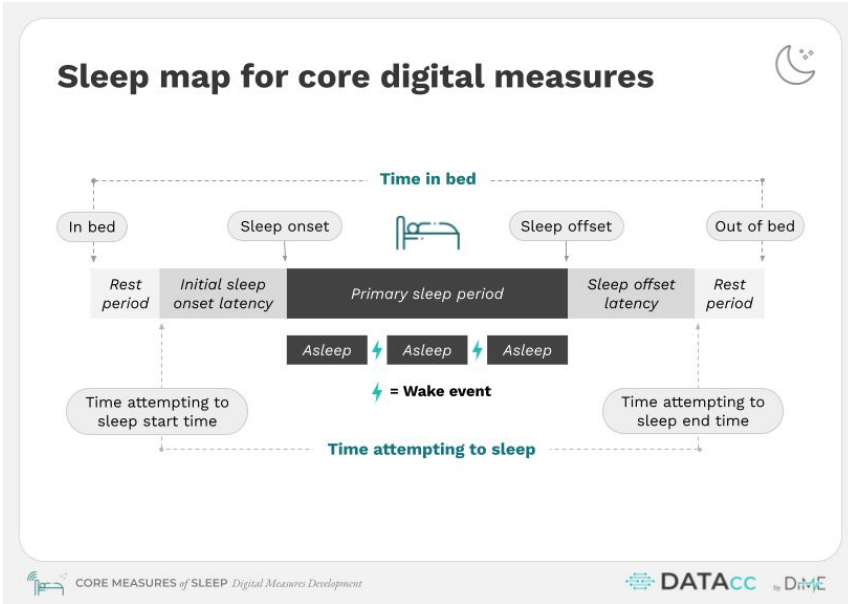
#### **What is your method of sleep monitoring, and which signals are being recorded and used?**

Different technologies can estimate sleep staging using data collected from different sensor-based sources (e.g., EEG, actigraphy, ballistocardiography, etc.). Each technology type has different properties that impact the estimation of sleep staging. Understanding the technology used to collect the data and its strengths and limitations is important for later interpretation of, and confidence in, the arising results.

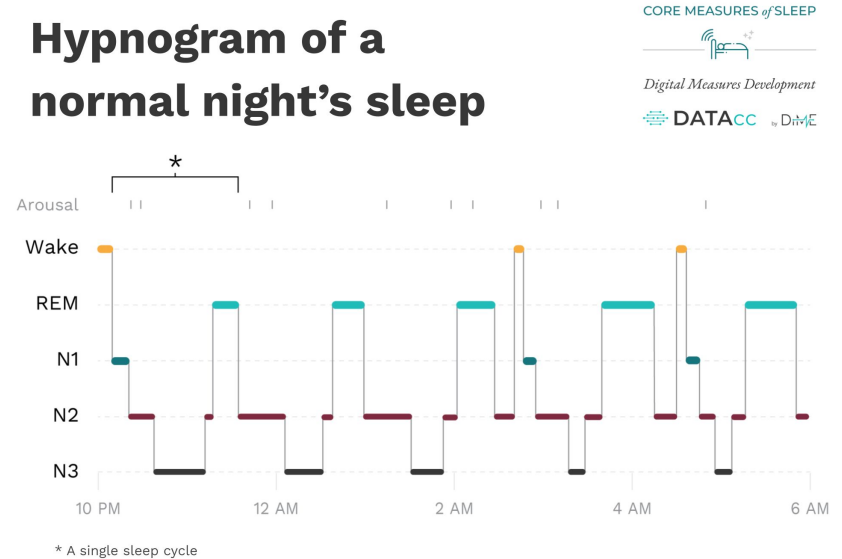
#### **What granularity of sleep data do you estimate?**

The estimations of sleep staging are at the heart of the Core Digital Measures of Sleep. The Core Measures: Sleep Measurement System provides three levels of sleep staging, from coarse grain awake vs asleep, to fine grain N1-N3 and REM staging. The needs will vary based on the context of use and research question employed, so it is important to know the resolution of sleep stage estimation.

All the graphics we produced are available for you to use in your work



## Hypnogram of a normal night's sleep



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by **DIME**



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**Piper Fromy**

*Associate Program Director  
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**Moderator**

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**Sarah Averill Lott**

Digital Medicine Society (DiMe)  
**Moderator**

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**Farah Hasan**

*Expert Advisory Board Member  
and Patient Speaker*  
Project Sleep



**Piper Fromy**

*Associate Program Director*  
Digital Medicine Society (DiMe)  
**Moderator**



Building the  
**Business Case** *for*  
Digital Endpoints



Join us in our next project as we convene leaders from across the field to **develop the business case** to support the development, adoption, and scale of digital endpoints!

Don't miss out on our next DATAcc by DiMe project – **scan the QR code** to share your interest and learn more!



# Join us for an upcoming DiME Webinar



The DiMe webinar series hosts leading experts from across a variety of disciplines to discuss critical topics on digital medicine with our community.



Scan the code & learn more about our webinar series and to **register** for our next event!