

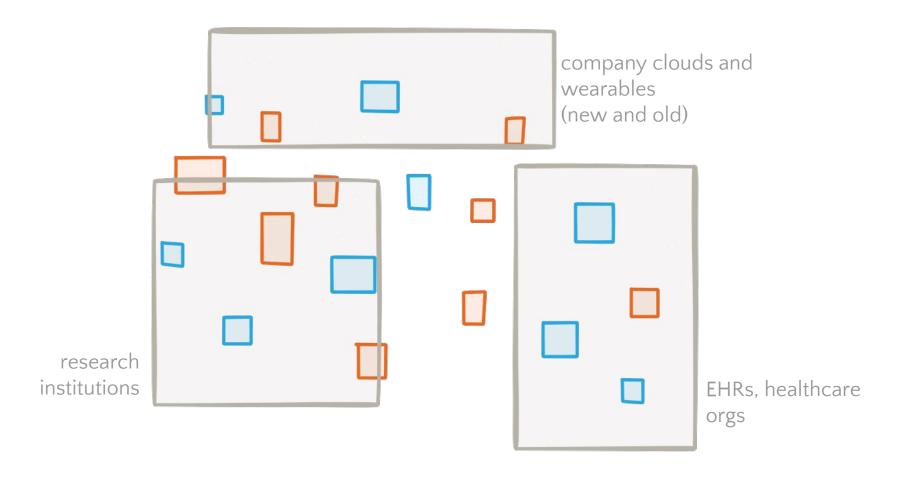
N-of-You May 17, 2016



The State Of Affairs

- Integrating Patient-generated data from outside the clinic is really happening
- More people are using apps and buying devices to improve their health

But...a patient's health data is STILL trapped in silos





Data's not only siloed. It's different.

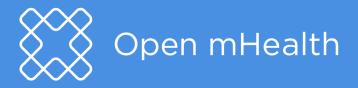
In format

- HL7 and CCDA feeds for EHRs
- o flat files are used by researchers for Stata and R
- public APIs producing custom XML, JSON
- differences in naming, time formats, etc.

In meaning

- o differences in units, time zone handling, etc.
- o differences in granularity, grouping
- missing information





Open mHealth is a non-profit startup making it easier to **access** and **use** mobile health data.



How Do We Do It?

1. Open Standard



The first and only open standard for mobile health data

~100 different clinically-valid <u>schemas</u>

- Schemas are the common language needed to interoperate data between apps and devices and make it useful in a clinical environment
- These schemas represent clinical measurements

```
"references": [
{
   "description": "The SNOMED code represents Blood glucose level (finding)",
   "url": "http://purl.bioontology.org/.../SNOMEDCT/365812005"
}]
```

2. Open Source Platform



APIs And Libraries For

- Storage
- Data Integration
 - From Wearables and Apps through <u>Shimmer</u>
 - From Healthkit through <u>Granola</u>
 - From EHRs through <u>Pulse</u>
- Processing
- Visualization
- Data generation

Over 2,000+ downloads, stars and forks... and counting!

3. Community



Open Standard + Platform + Community

n-of-1 clinical trials

Does it work for me?

Does it work on average?

Does it work?

 $A \longrightarrow B \longrightarrow A^*$

~2,000

Open Standard + Platform + Community + N-of-1

Trialist

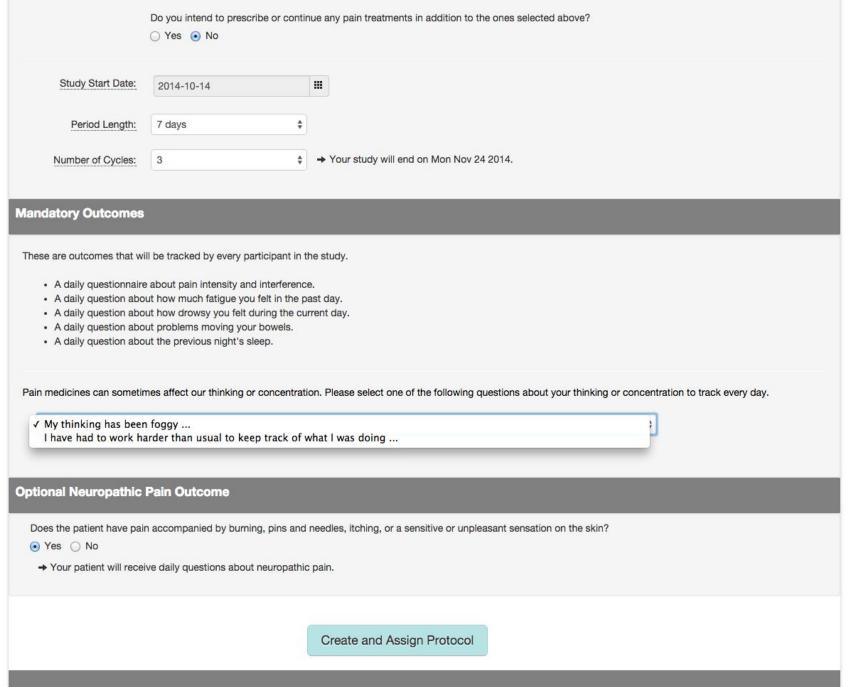


Patient Information

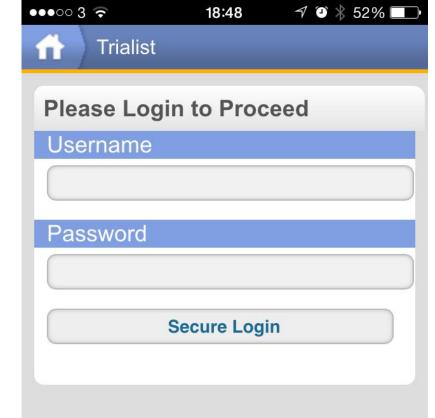
Patient's Login: A.Patient \$

Study Protocol

	☐ Any NSAID (e.g., ibuprofen, naproxen, sulindac)				
	☐ Codeine combination product (e.g., Tylenol with codeine, Tylenol #3)				
	☐ Tramadol (e.g., Ultram, Ryzolt, ConZip, Rybix)				
	☐ Hydrocodone combination product (e.g., Vicodin, Norco)				
	Oxycodone combination treatment (e.g., Percocet)				
	 Complementary treatment: including but not limited to physical activity (exercise, stretching, yoga), mindfulness (meditation, relaxation, music therapy) 				
Regimen B:	☐ No specific treatment to be tested against Regimen A				
	☐ Tylenol (acetaminophen)				
	Any NSAID (e.g., ibuprofen, naproxen, sulindac)				
	☐ Codeine combination product (e.g., Tylenol with codeine, Tylenol #3)				
	☐ Tramadol (e.g., Ultram, Ryzolt, ConZip, Rybix)				
	☐ Hydrocodone combination product (e.g., Vicodin, Norco)				
	Oxycodone combination treatment (e.g., Percocet)				
	 Complementary treatment: including but not limited to physical activity (exercise, stretching, yoga), mindfulness (meditation, relaxation, music therapy) 				
	Do you intend to prescribe or continue any pain treatments in addition to the ones selected above?				
	○ Yes • No				
Study Start Date:	2014-10-14				
Period Length:	7 days \$				
Number of Cycles:	→ Your study will end on Mon Nov 24 2014.				



	O Yes No		y pain treatments in addition to the ones selected above?	
	0 165 0 16			
Study Start Date:	2014-10-14	Success		×
Period Length:	7 days	The phone app for Tr	ialist is ready to go! Welcome to the PREEMPT study.	
Number of Cycles:	3	Patient Login	A.Patient	
		Regimen A	Tylenol (acetaminophen)	
		Regimen B	Any NSAID (e.g., ibuprofen, naproxen, sulindac)	
		Period Length	7 days	
These are outcomes that wi	ill be tracked by ev	Number of Cycles	3	
A daily questionnaire A daily question abo	A daily questionnaire about pain intens		Sun Oct 12 2014	
A daily question abo	ut how drowsy yo	End Date	Mon Nov 24 2014	
A daily question abo A daily question abo				
Pain medicines can sometin	nes affect our think	king or concentration. Ple	ease select one of the following questions about your think	king or concentration to track every day.
My thinking has been for				\$
Does the patient have pair Yes No	n accompanied by	burning, pins and needle	es, itching, or a sensitive or unpleasant sensation on the si	kin?
→ Your patient will recei	ive daily questions	about neuropathic pain.		
			eate and Assign Protocol	

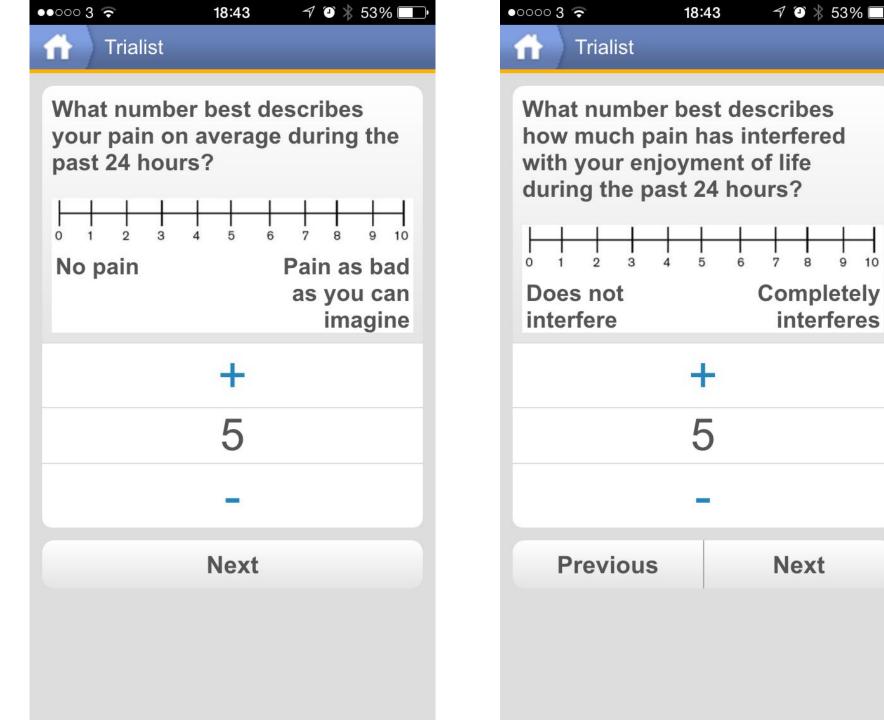


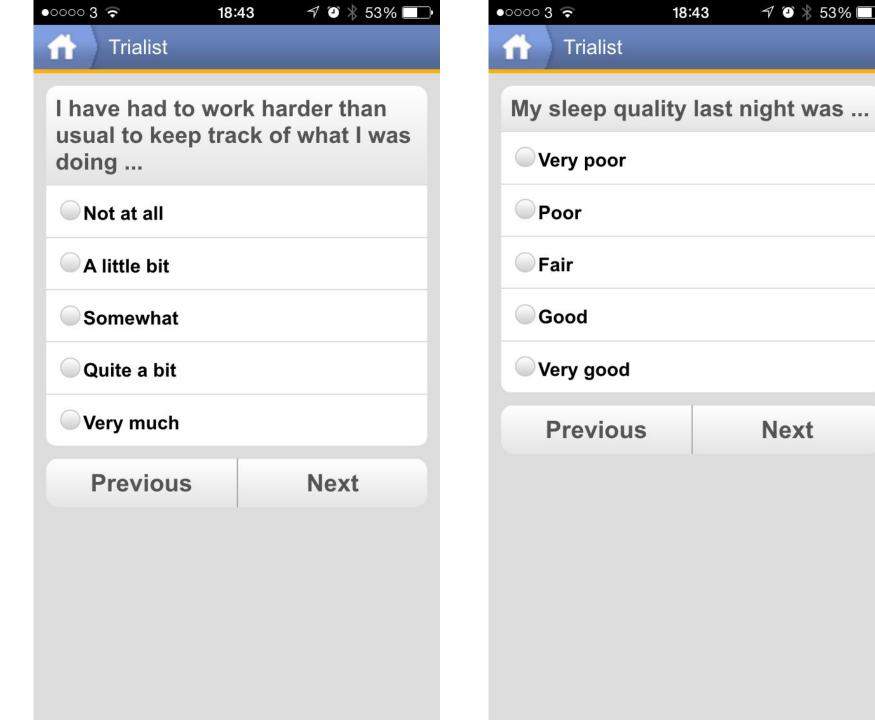


trialistm17

Start Trial

After clicking this button, the trial will be started.





Trialist Participant Results



trialist-setup-help@ohmage.org

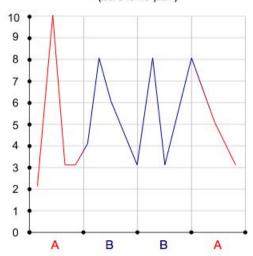
Comparison of Treatments

Tylenol (acetaminophen)

Any NSAID (e.g., ibuprofen, naproxen, sulindac)

Pain Intensity Chronology

(Zero is no pain)

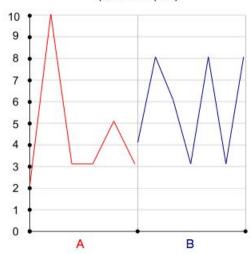


Pain Intensity by Treatment

To: 2014-

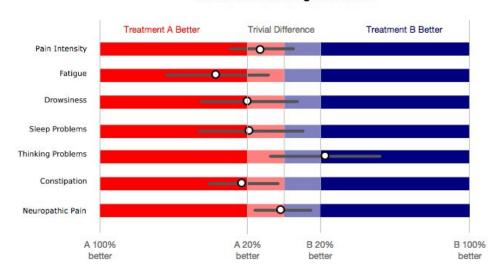
From: 2014-

(Zero is no pain)

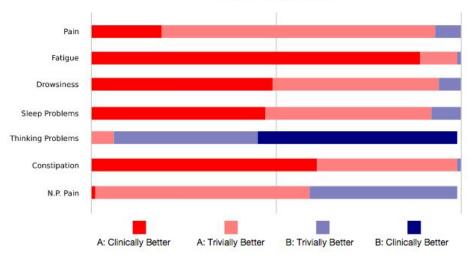


Sample trial

Outcomes and Margins of Error







Sample trial

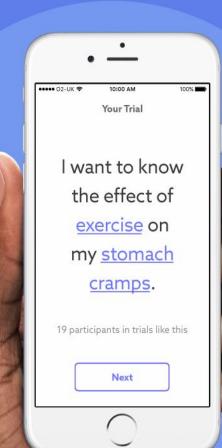
Hide Outcome Summary

What's next?









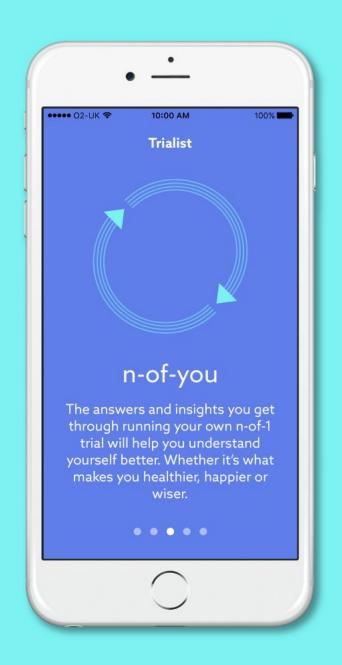
Trialist

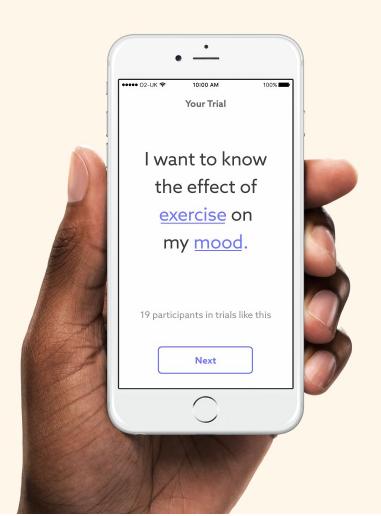
A platform for running n-of-1 trials

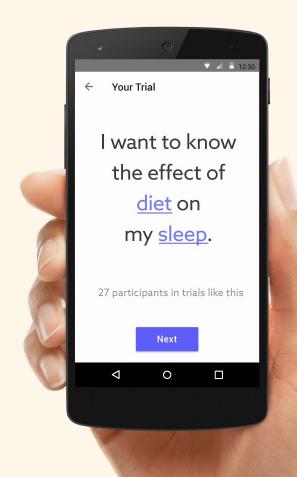


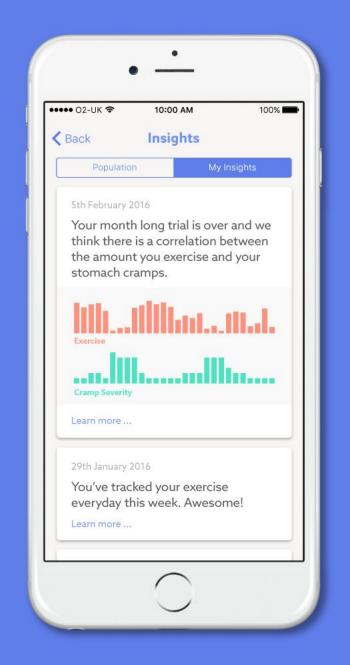












We need your help.



Prototyping around two protocols 1. Atrial Fibrillation 2. Citizen Science



If you'd like to help us pilot Trialist, email me today. Thanks.

david@openmhealth.org



