

AGING IN PLACE

National Institutes of Health

September 9-10th, 2014



CCC

Computing Community Consortium
Catalyst

PANEL 3

Health transition trajectories: Data to action

Dan Siewiorek, Jeff Kaye,
Maureen Schmitter-Edgecomb



CCC
Computing Community Consortium
Catalyst

TECHNOLOGIES TO SUPPORT PHYSICAL HEALTH

Dan Siewiorek
Buhl University Professor
Computer Science and
Electrical and Computer Engineering
Carnegie Mellon University



CCC
Computing Community Consortium
Catalyst

PHYSICAL THERAPY

A growing need

- By 2030, 4% of the population will experience a stroke at a cost of over \$180 billion
- In 2004 there were 450,000 total knee replacements and 230,000 total hip replacements
- In 2006 250,000 rotator cuff surgeries
- In 2009 250,000 anterior cruciate injuries
- Six or more months of rehabilitation commonly required



CCC

Computing Community Consortium
Catalyst

BLOOD PRESSURE CUFF

Is it on correctly



CCC
Computing Community Consortium
Catalyst

GENERATION SMARTPHONE: IEEE SPECTRUM 9/12

A Lifetime of Apps

The smartphone of the future will be a constant companion, coach, collaborator, and advisor



CCC

Computing Community Consortium
Catalyst

Iterative, Multi-Perspective Users-Centered Design

Example: Seating Coach



output
(avatar)



user preferences panel



outputs
(video & graphical)



user's social context
settings

wheel chair user



Focus
groups



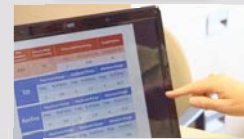
clinician



Wizard of
Oz studies



Usability
testing



Home
deployment

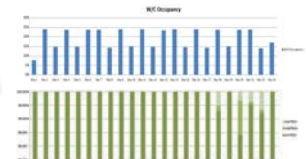
spreadsheet-based prescription input

Activity	Parameter			Duration			Gap			Start after
	Min	Max	Unit	Min	Max	Unit	Min	Max	Unit	
Tilt	25°	30°	°	25 sec	30 sec	sec	20 min	30 min	min	10
Recline	30°	35°	°	5 min	10 min	min	5 min	10 min	min	15
Foot Elevation	25°	30°	°	50 sec	1 min	sec	10 min	20 min	min	20
Pressure	0	100	mmHg	0 sec	10 sec	sec	0 sec	10 sec	sec	5

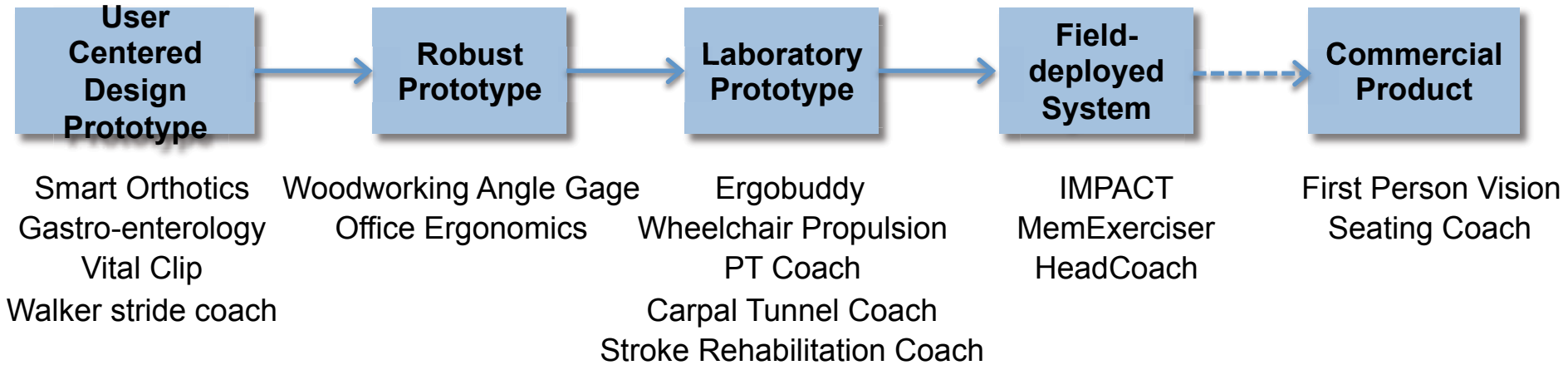
Kiviat graph summary output



graphical trend feedback



QoLT project pipeline



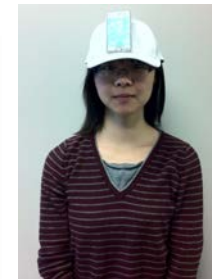
**Walker
Stride
Coach**



**Physical
Therapy Coach**



**Stroke Therapy
Coach**

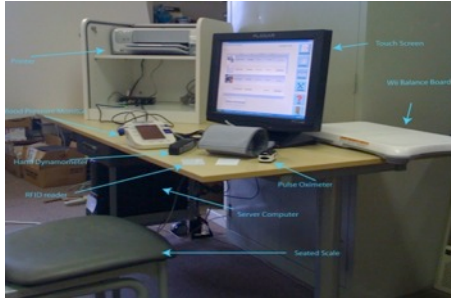


HeadCoach



Seating Coach

physical form and user interactions



Early prototype
(for proof of functionality)



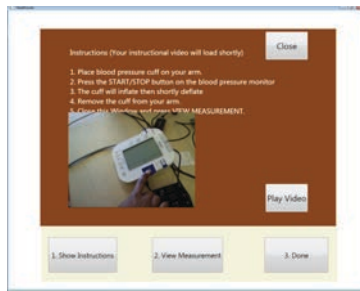
Developing prototype
(for usability testing)



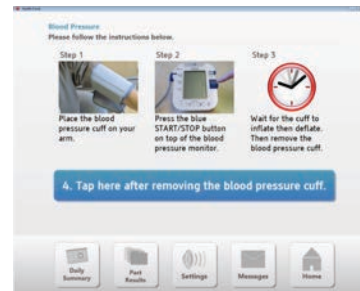
Mature prototype
(for field deployment)

time

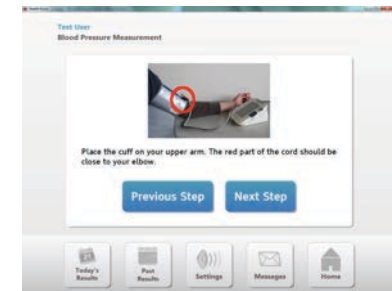
blood pressure measurement instructions



video loop

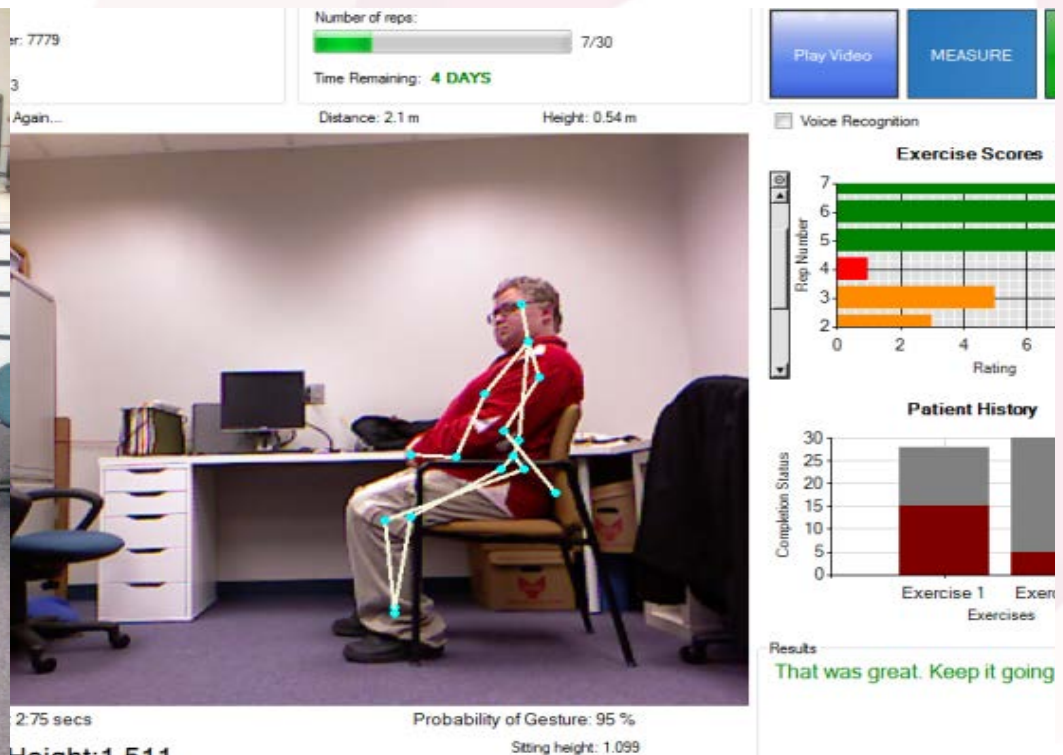


single screen with multiple steps



sequence of screens with 1 step each

STROKE REHABILITATION EXERCISES



- Normalized Hidden Markov Model recognizes correct and erroneous exercise movements
- Encouragement and corrections are provided by audio and textual feedback



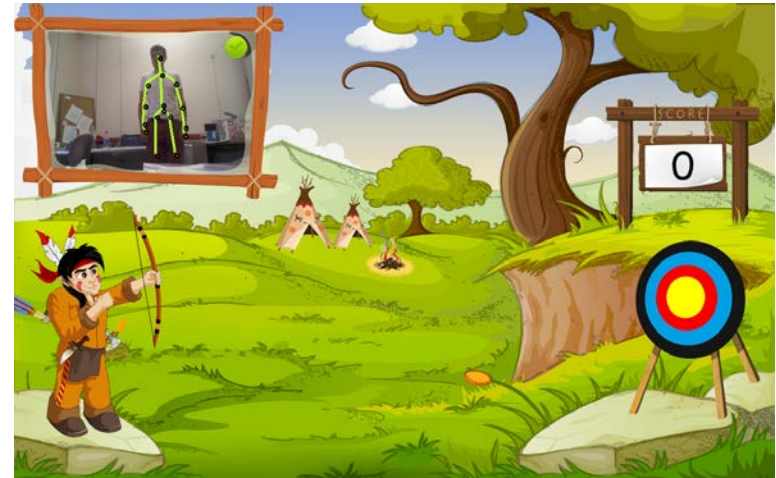
CCC

Computing Community Consortium
Catalyst

Game Suite for Stroke Rehabilitation



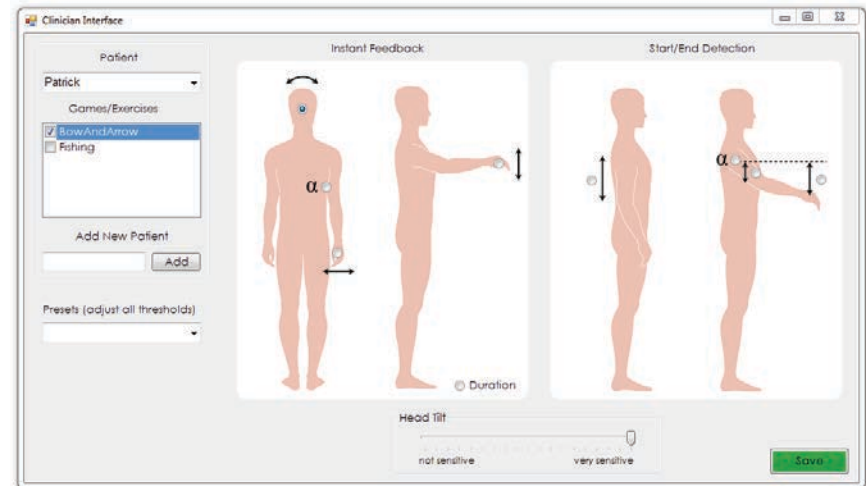
Combination of several games



"Bow and Arrow": relates to the Reach a Light Switch exercise

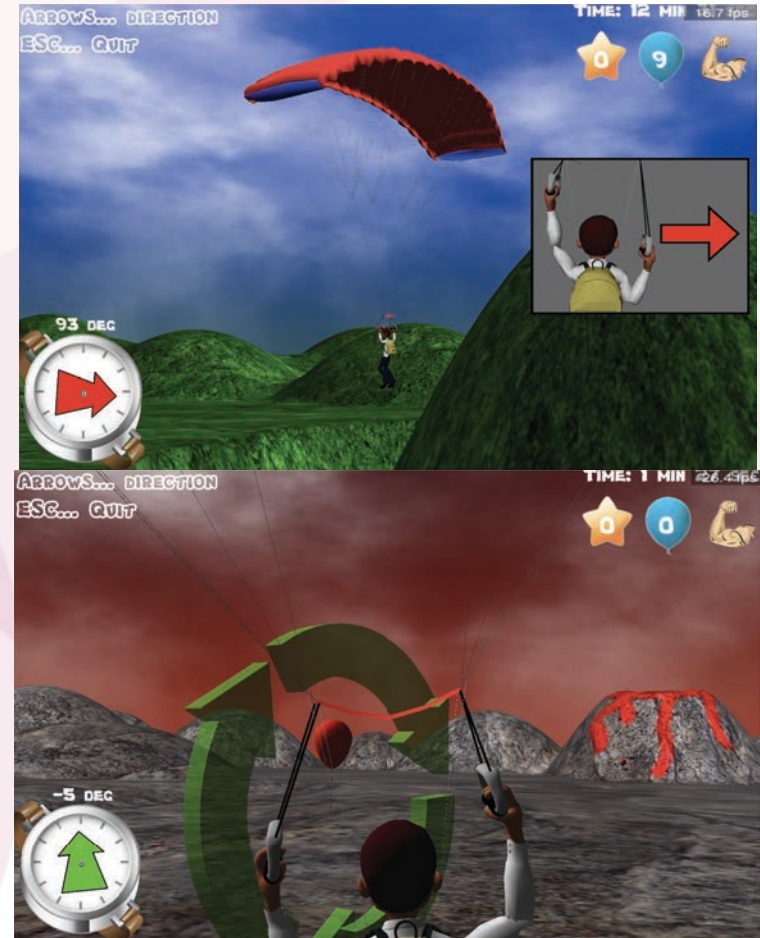


"Fishing": relates to Bring a Cup up to the Mouth exercise



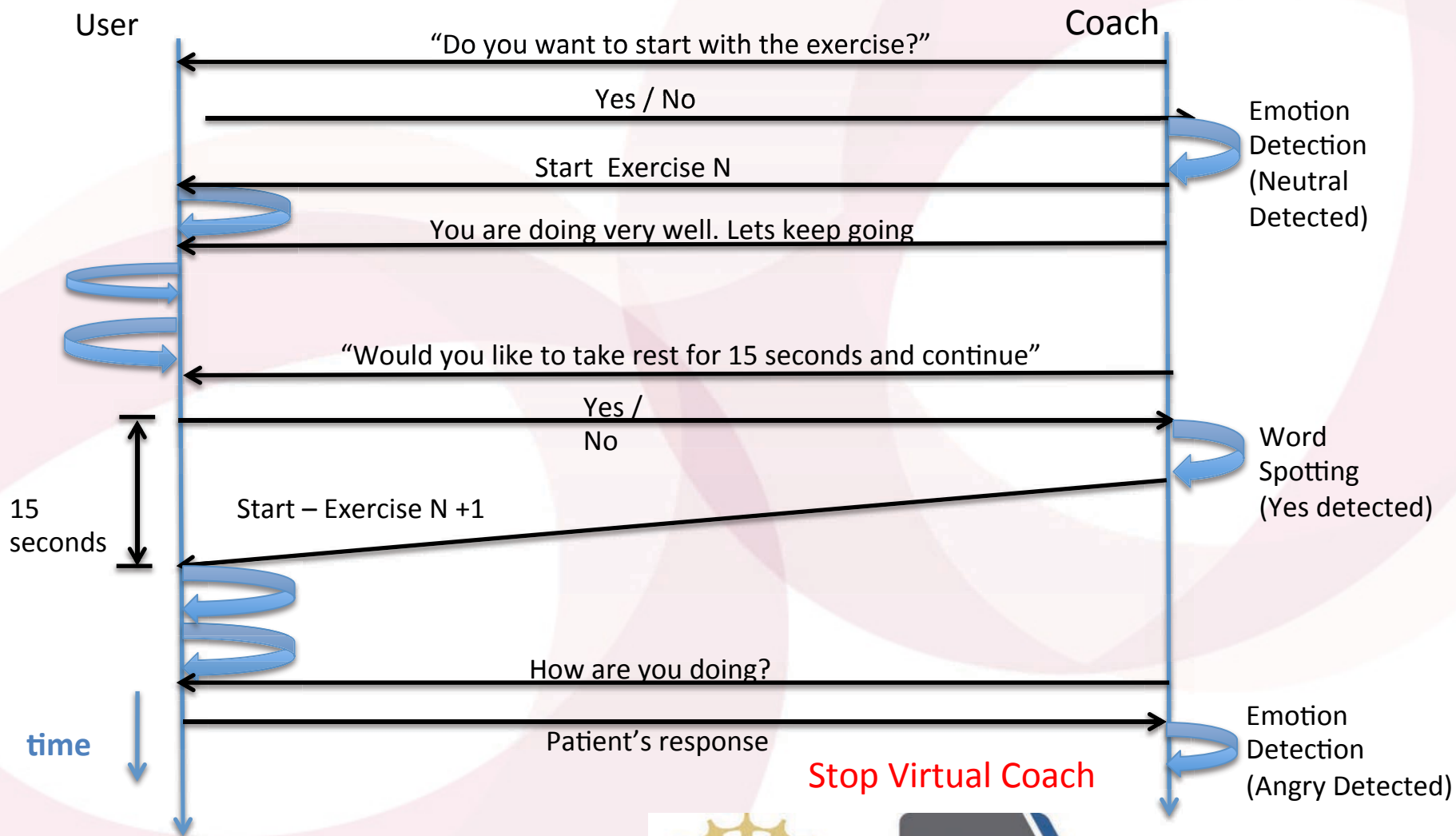
Clinician interface for adjustment of thresholds

STROKE REHABILITATION VIRTUAL REALITY GAMES



CCC
Computing Community Consortium
Catalyst

STROKE REHABILITATION WITH EMOTION DETECTION



CCC

Computing Community Consortium
Catalyst

VIRTUAL COACH TEAM COMPOSITION

- Biomedical Engineering
- Computer Science
- Electrical and Computer Engineering
- Human-Computer Interaction
- Nursing
- Occupational Therapy
- Physical Therapy
- Psychology
- Rehabilitation Engineering
- Robotics



CCC

Computing Community Consortium
Catalyst

A TALE OF TWO PASSAGES

Nursing Home, CHF

- Medications – doctors did not check each others list
- Model of what going on in body not conveyed
 - Confusing to be told one day to drink as much as you like, next day no water
- Extraordinary Measures
 - Dialysis to remove water
 - Doctor told him going to amputate both legs without checking with family – passed away six hours later

Independent Living, Hospice

- Loss of control
 - Once in nursing home under nursing home doctor who did not return calls
 - Had to work with physical therapist to get release
 - Blood sugar reading – if can not do herself have to go into nursing home
 - Wanted to do feeding tube
- Lack of sensitivity
 - Placed in room next to where her husband died, roommate pleading to die
- Hospice
 - Removed IV, medications, talking and sipping ice chips in 24 hours
 - Did not know of home care possibility – passed away in a home setting with children, community events



A TALE OF TWO PASSAGES – POTENTIAL TECHNOLOGIES

Nursing Home, CHF

- Medications - **Communications**
- Model of what going on in body not conveyed – **Descriptive Models**
- Extraordinary Measures
 - Dialysis to remove water – **Descriptive Models**
 - Doctor told him going to amputate both legs without checking with family – **Communications**

Independent Living, Hospice

- Loss of control
 - Under nursing home doctor who did not return calls- **Communications**
 - Had to work with physical therapist to get release - **Communications**
 - Blood sugar reading – if can not do herself have to go into nursing home – **Virtual Coaches**
- Lack of sensitivity
 - Placed in room next to where her husband died, roommate pleading to die - **History**
- Hospice
 - Removed IV, medications, talking and sipping ice chips in 24 hours- **Descriptive Models**
 - Did not know of home care possibility – **Match**



CCC

Computing Community Consortium
Catalyst

RESEARCH BARRIERS

- Fundamental Knowledge
 - Individual differences and unpredictability
 - Models of noise and uncertainty
 - Contextual variability
 - Complex Interactions
- Technology
 - Safety assurance
 - Robustness and Generality
 - Interoperability
 - Multidisciplinary collaboration challenges
- Technology Integration
 - Privacy concerns
 - Market factors
 - User acceptance
 - Demonstrating value



CCC

Computing Community Consortium
Catalyst

RESEARCH QUESTIONS

- How can technology be made more engaging thereby avoiding early abandonment
- How can complexity of interactions be simplified
- How can technology adapt as my ability changes
- How can technology interactions be personalized
- How can technology motivate to change behavior
- How can interactions be more like exchanges with humans
- How can the technology interactions modify interaction within a session as my mood changes
- How can technology ease the burden of caregivers
- How can the support team (doctors, nurses, engineers) be unified and synchronized from design to implementation to development



CCC

Computing Community Consortium
Catalyst

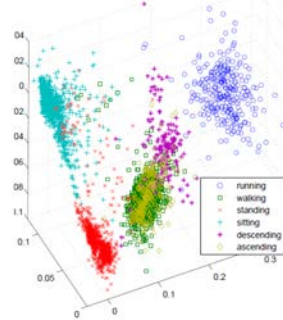
Daniel Siewiorek/ Carnegie Mellon University



Quality of Life Technology Center
a National Science Foundation Engineering Research Center

How to make technology adapt to my needs as my abilities change

Machine Learning



Buhl University Professor
Computer Science and
Electrical & Computer Engineering

Director
Quality of Life Technology Center

Virtual Coaches



Physical Therapy Coach



Seating Coach



Stroke Therapy Coach



HeadCoach