

# The contribution of new technologies in the diagnosis and treatment of Parkinson's disease: The i-PROGNOSIS project

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# Overview

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- ❖ Introduction to Parkinson's Disease and digital biomarkers
- ❖ Overview of the i-PROGNOSIS project
- ❖ Early detection of symptoms of Parkinson's Disease
- ❖ Interventions for Parkinson's Disease patients

# Parkinson's Disease (PD)

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One  
of the commonest  
neurodegenerative diseases

1%  
Of individuals over 60 years;  
4% over 75 years

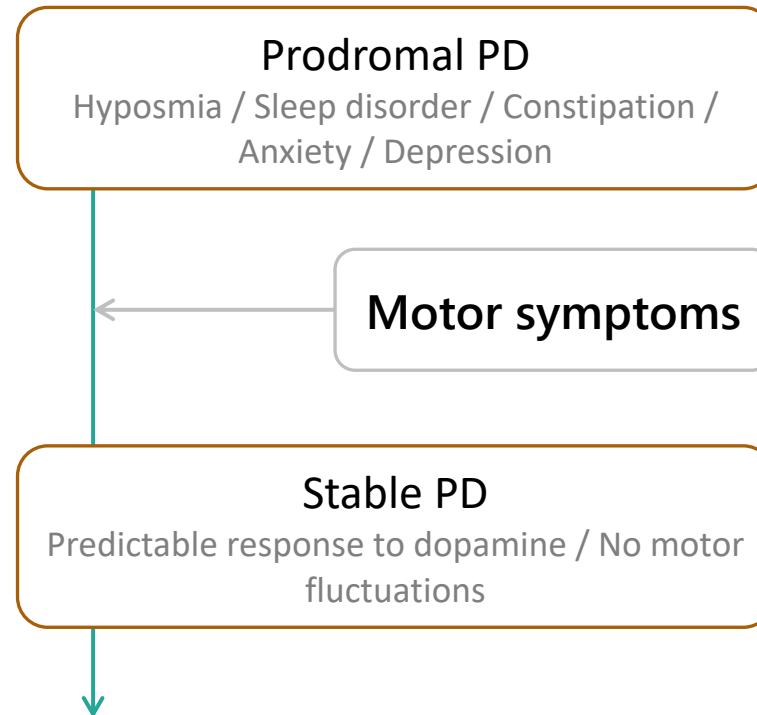


Progressive  
Subtle symptoms that go  
unnoticed

~2.2 M  
Disability adjusted life years  
(DALYs)



## May take 10 years after disease onset





## Daily activities are affected

**Movement** → Tremor, Bradykinesia

**Walking** → Slowness/Freezing of gait

**Eating** → Constipation

**Talking** → Hypophonia

**Writing** → Micrographia

**Sleeping** → REM behaviour disorder

**Mood** → Anxiety/Depression

**Expression** → Hypomimia

# Digital biomarkers & endpoints

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# Definitions

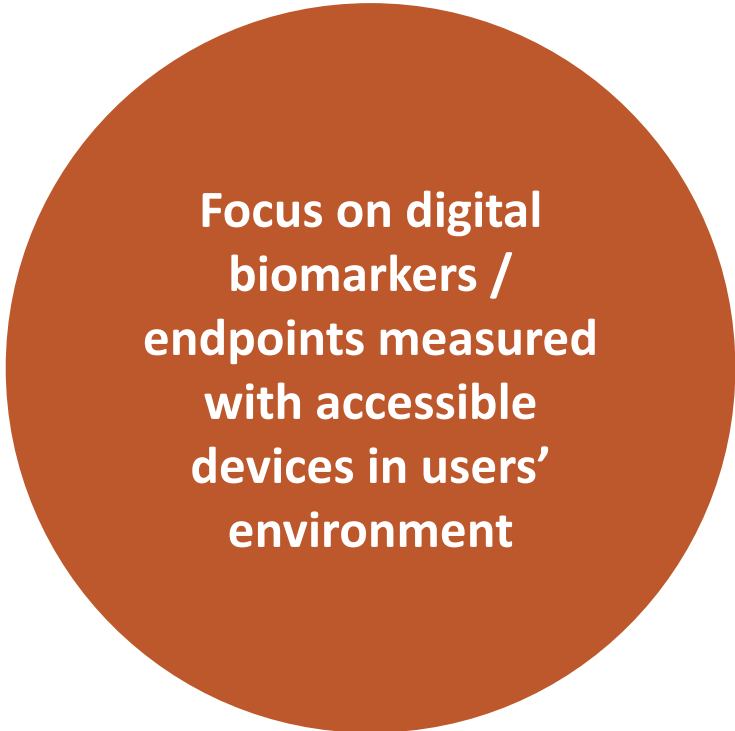
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## Digital biomarker

Objective, quantifiable physiological or behavioural data collected and measured via digital (mobile) devices that are used to predict and/or assess a health-related outcome.

## Digital endpoint

In clinical trials, a digital measurement (i.e., a digital biomarker) used to assess the effectiveness of an intervention, e.g., drug response, based on change.



**Focus on digital  
biomarkers /  
endpoints measured  
with accessible  
devices in users'  
environment**



# Example of digital biomarkers

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That can be captured with mobile & wearable devices

- Heart rate (variability)
- Number of Steps
- Time spent walking
- Total sleep time
- Blood oxygen saturation
- Blood pressure
- Inter-tap interval
- Skin temperature
- Gait speed
- Hand steadiness

# Digital Biomarkers & PD

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# Benefits

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## + Improve diagnosis

Enable population screening, including the earliest possible (prodromal stages), to accelerate clinical diagnosis

## + Remote monitoring

Important for patients in remote areas or in times of social distancing.

## + Monitor therapy response

Monitor ON-OFF periods, motor fluctuations and dyskinesias and fine-tune treatment

# Technology enables new type of studies

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## **Remote data- crowdsourcing studies**

- ‡ Use of existing smartphone and wearable for study enrolment and data acquisition
- ‡ Remote electronic consent
- ‡ Large-scale participation and data collection

# Technologies for PD assessment

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# Screening / assessment of

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## **Motor symptoms**

Tremors  
Bradykinesia  
Posture / balance  
problems  
Gait impairment

## **Non-motor symptoms**

# Types of sensors

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## **Inertial Measurement Unit (IMU)**

Includes accelerometer and gyroscope - measures motion.

## **Microphone**

Records sounds of interest, e.g., voice and biomedical sounds.

## **Heart rate sensor**

Records heart rate (variability), usually via photoplethysmography.

## **Touchscreen**

Provides coordinates, timing and pressure of touch events.

## **Camera**

Capturing of still photos and videos - can be used for skeleton tracking.

## **Electrogastrograph**

Records electrical activity from the abdominal area.

# Approaches to symptom detection / assessment

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# Tremors

Key sensors: IMU (usually on wrist, finger or palm)



## Rest tremor via smartwatch

Device: Wrist wearable (e.g. smartwatch)

Passive measurement: user wears smartwatch during the day

[Monitoring Movement Disorders](#)



## Postural tremor via smartphone

Device: Smartphone

Passive measurement: user holds smartphone during phone call

[Detecting Parkinsonian Tremor From IMU Data Collected in-the-Wild Using Deep Multiple-Instance Learning - IEEE Journals & Magazine](#)



## Rest tremor via smartphone

Device: Smartphone

Active measurement: user holds smartphone with hand at rest

[Evaluation of smartphone-based testing to generate exploratory outcome measures in a phase 1 Parkinson's disease clinical trial](#)

# Bradykinesia

Key sensors: IMU (wrist), touchscreen, camera



## Bradykinesia score via wrist wearable

Device: Wrist wearable / Sensor: IMU

Passive measurement: user wears the device during the day

[Evaluation of the Parkinson's KinetiGraph in monitoring and managing Parkinson's disease](#)



## Finger tapping test on smartphone

Device: Smartphone / Sensor: Touchscreen / Data: timing of touch events

Active measurement: user taps alternately two touchscreen buttons

[Evaluation of smartphone-based testing to generate exploratory outcome measures in a phase 1 Parkinson's disease clinical trial](#)



## Bradykinesia score from typing

Device: Smartphone / Sensor: Touchscreen / Data: keystroke dynamics

Passive measurement: users does routine typing on smartphone

[Screening of Parkinsonian subtle fine-motor impairment from touchscreen typing via deep learning](#)

# Gait & Balance impairment

Key sensors: IMUs



## Gait & balance features from multiple wearables on limbs and torso

Device: Wearable / Sensor: IMU

Passive measurement: user wears the device during the day

[Potential of APDM mobility lab for the monitoring of the progression of Parkinson's disease](#)



## Gait monitoring with smart insoles

Device: Smart insole / Sensor: Touchscreen

Passive measurement: users wears shoes with smart insoles during ambulation

[Wearable Solutions for Patients with Parkinson's Disease and Neurocognitive Disorder: A Systematic Review](#)

# Non-motor symptoms

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## **Sleep measurement via wrist wearable**

Device: Wrist wearable / Sensor: IMU

Passive measurement: user wears the device during sleep

Features: Total sleep time, sleep onset latency, sleep fragmentation index, wake after sleep onset

[Sleep in Parkinson's Disease: A Comparison of Actigraphy and Subjective Measures](#)



## **Gastrointestinal activity via smart belt to detect constipation**

Device: Smart belt / Sensor: Microphone array / Data: Bowel sounds (BS)

Active measurement: user wears smart belt at rest

Features: No of BS / minute, Sound-to-sound interval

[i-PROGNOSIS D3.5 - First version of SData analysis modules \(Section 4.4](#)

# i-PROGNOSIS project

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# i-PROGNOSIS

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## Intelligent Parkinson's Disease Early Detection Guiding Novel Supportive Interventions

H2020 – Research and Innovation Action

2016 – 2020

11 partners

6 countries

~4M €



Project coordinator  
**Aristotle University of Thessaloniki**



**CERTH**  
CENTRE FOR  
RESEARCH & TECHNOLOGY  
HELLAS





Early PD Detection

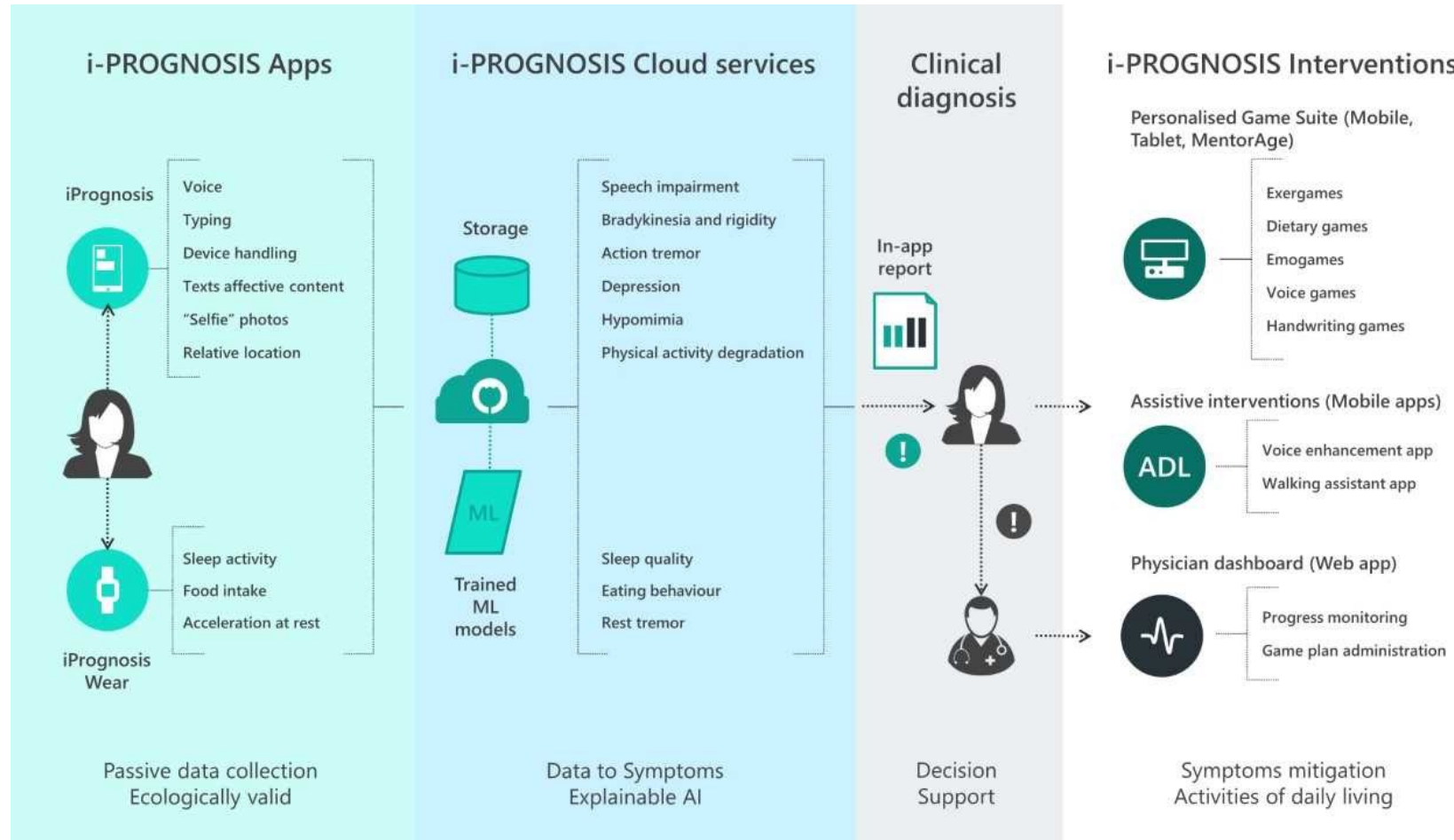


PD Support

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i-PROGNOSIS Project Objectives

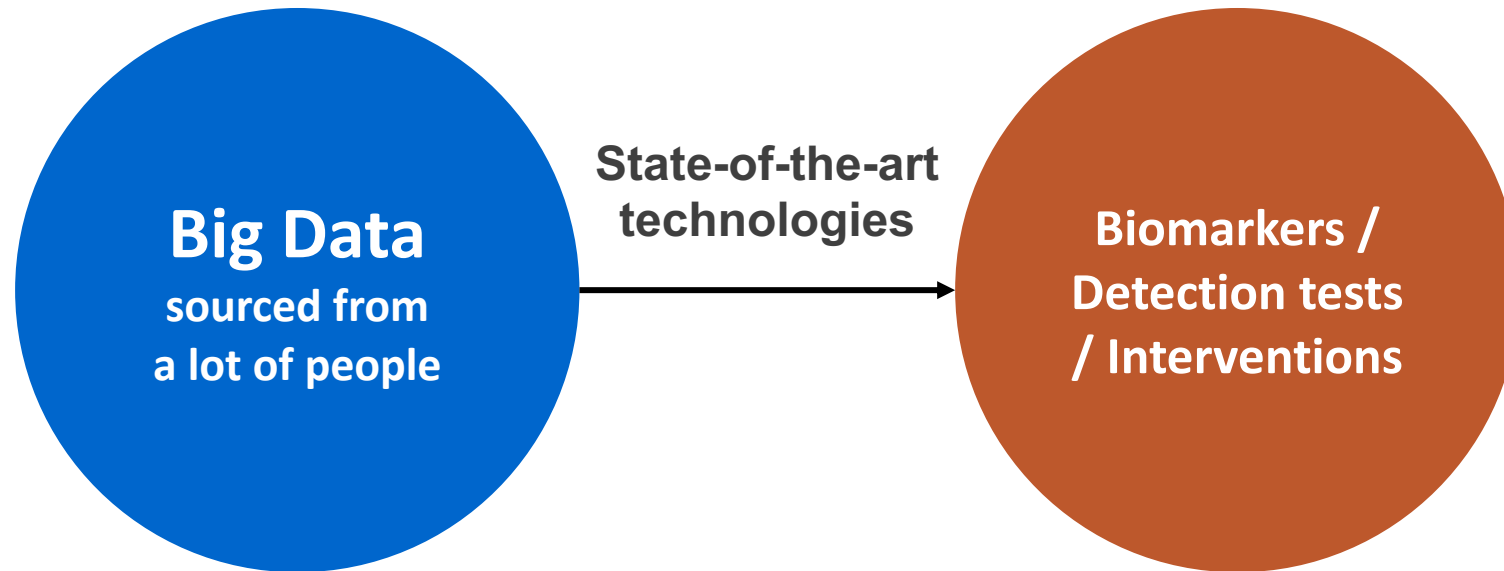
# The i-PROGNOSIS concept





# Main characteristics

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# PD Symptoms Detection

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# Source data from people

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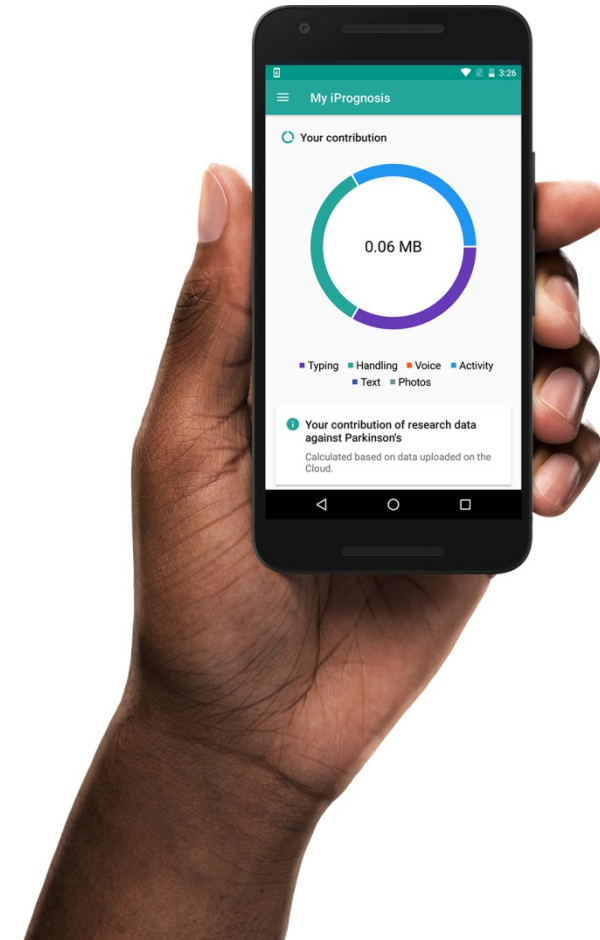
Unobtrusively

Via a dedicated mobile application

No user interaction required

Target

Build early PD detection tests



# Sensors employed / Data captured

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## Smartphone

Detect early minor tremor that may relate to Parkinson's

- Accelerometer + gyroscope

Evaluate voice quality (hypophonia)

- Samples of voice during calls

Detect minor motor symptoms (rigidity and bradykinesia)

- Touchscreen typing dynamics

Evaluate facial motion and reveal possible masked-face

- Selfies



# Sensors employed / Data captured

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## Smartwatch

Detect minor tremor at rest

- Accelerometer + gyroscope

Track eating behavior in order to detect eating disorders

- Accelerometer + gyroscope

Identify sleep quality in order to detect sleep disorders

- Accelerometer + gyroscope + heart rate



# Sensors employed / Data captured

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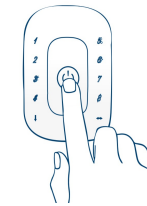
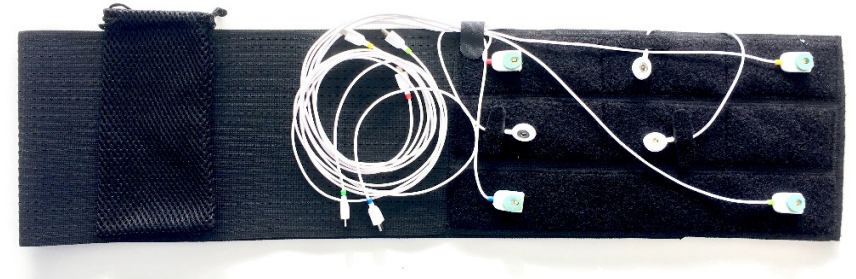
## IoT – smart belt

It can sense your **bowel sounds**

- Microphones
- Detect **bowel motility** and **gastrointestinal disorders**

It can sense your **gastric myoelectrical activity**

- Adhesive electrodes
- Capture EGG and detect **gastrointestinal disorders**



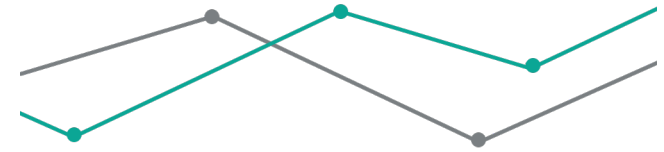
# Big Data and Machine Learning

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Sensed data alone provide little information.

The important things lie hidden and processing / learning algorithms come to the rescue.

Hidden trends in measurements, characteristics of the signals and more can come to light through algorithmic processing and provide information about changes



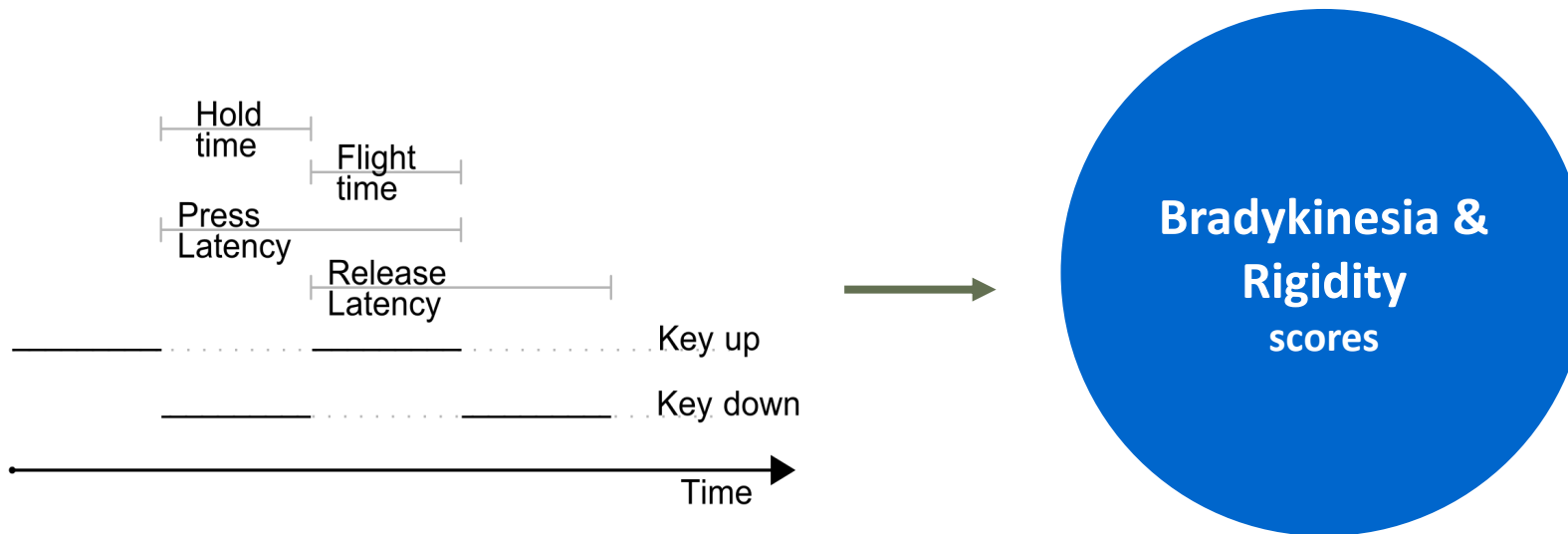
# Keystroke dynamics analysis

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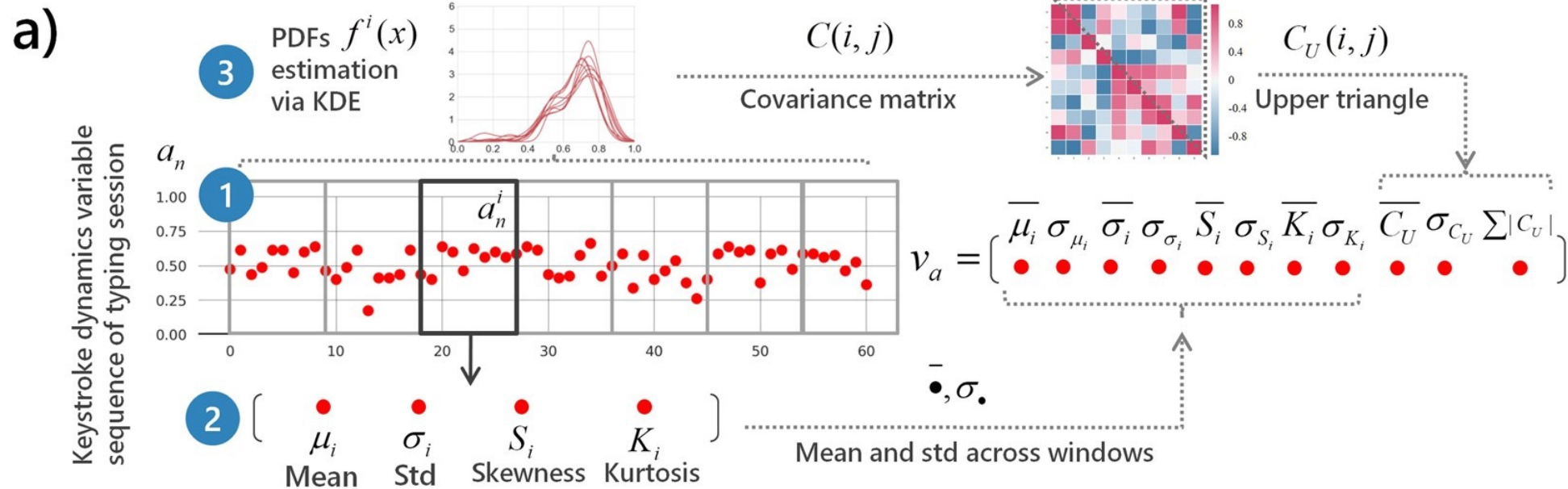
# Keystroke dynamics analysis

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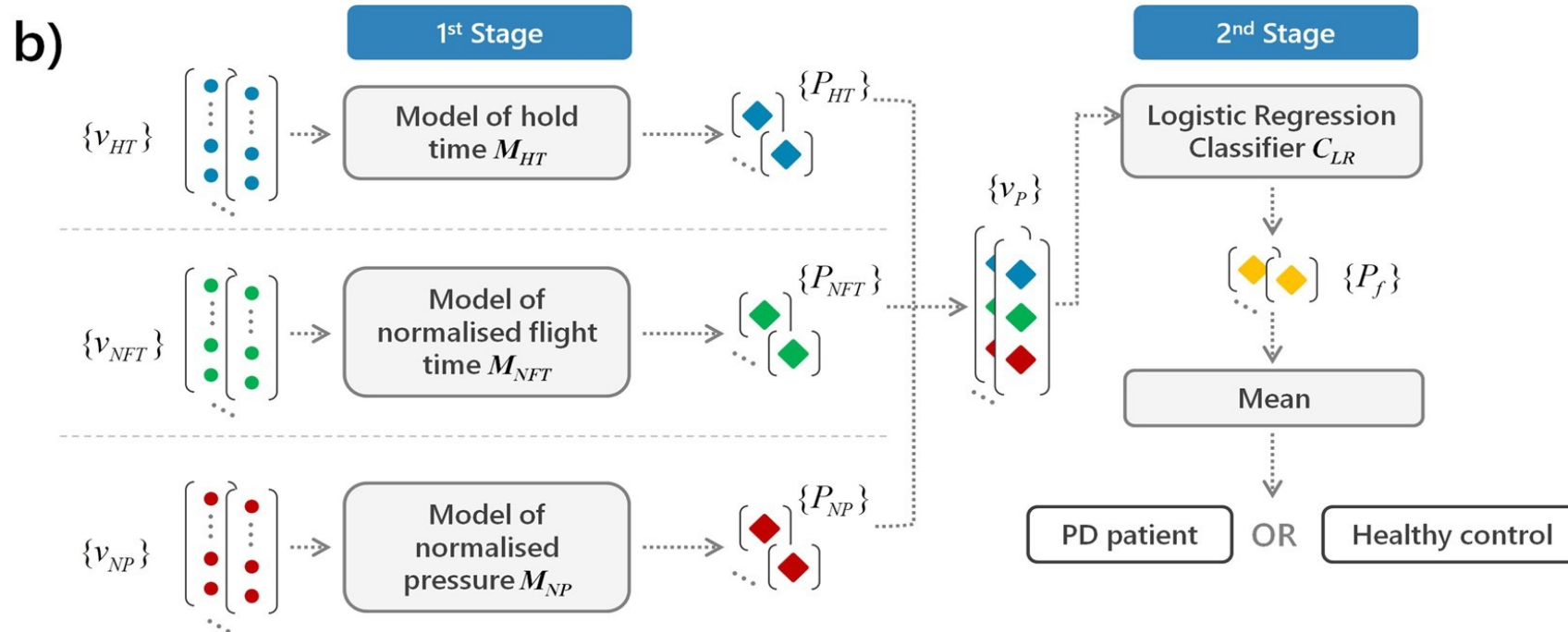
**Hold Time:** the time when each key is sustained pressed; **Flight time:** the time between a key release until the pressing of the next one; **Press Latency:** the time between the pressing of a key until the pressing of the next one; **Release Latency:** the time between the release of a key until the release of the next one.

# Approach



Given a keystroke dynamics variable sequence  $a_n$ ,  $a \in \{HT, NFT, NP\}$ : (1) The sequence is split in subsequences  $a_{n_i}$  using 15-seconds non-overlapping time windows; (2) For each subsequence, the first- up to fourth-order statistical moments (mean  $\mu_i$ , standard deviation  $\sigma_i$ , kurtosis  $K_i$ , and skewness  $S_i$ ) of the elements are computed; (3) The probability density function (PDF)  $f_{i,j}(x)$  of each subsequence is estimated through kernel density estimation (KDE) and the matrix of sample covariance  $C(i, j)$  between the PDFs of all subsequences is calculated. Feature vectors  $v_a$  representing each typing session are formed by the mean  $\bar{\bullet}$ - and standard deviation (std)  $\sigma$  of the moments extracted in (2), across time windows (subsequences), and the mean, std and sum of absolute values of the upper triangle  $C_U(i, j)$  of the covariance matrix calculated in (3).

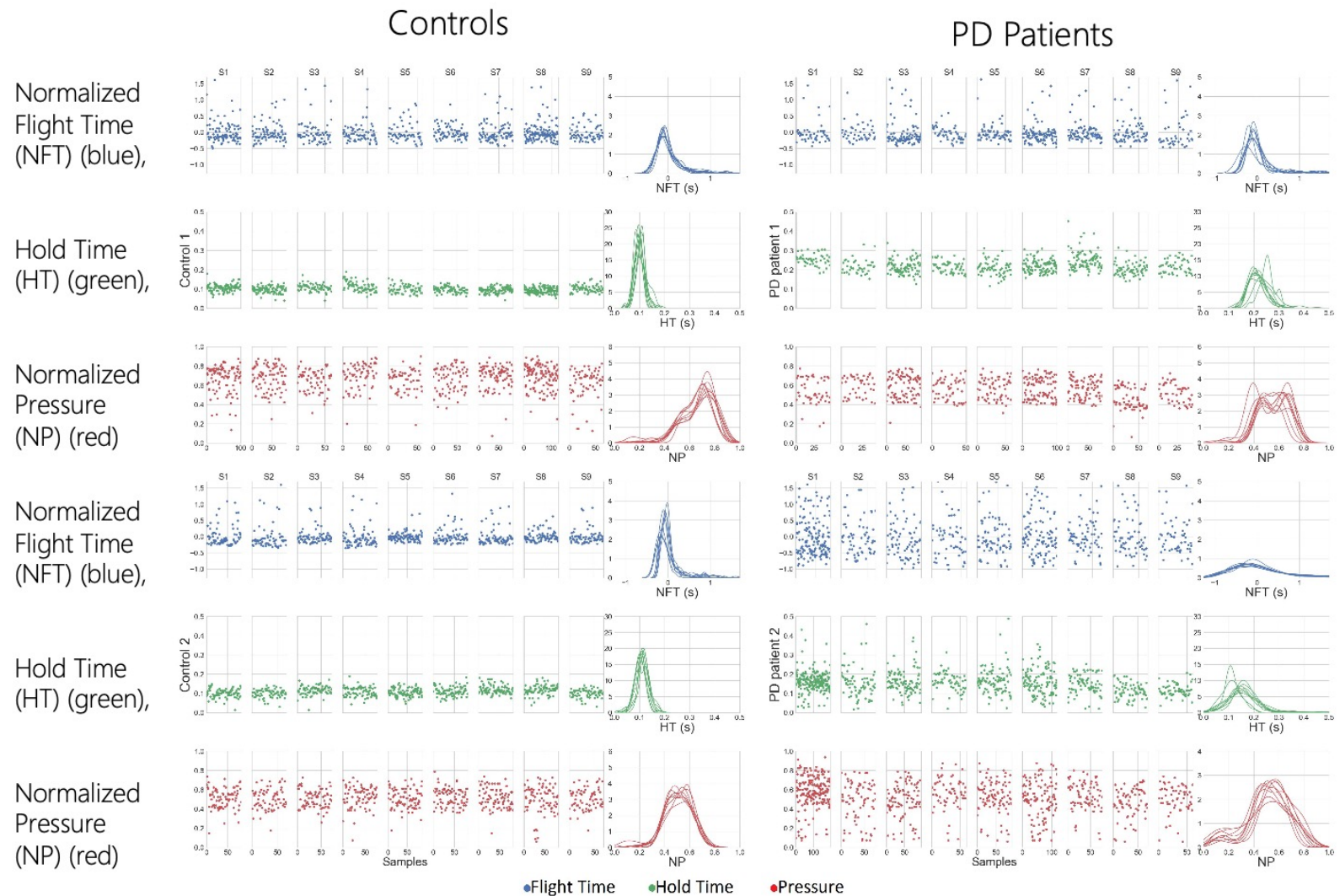
# Approach



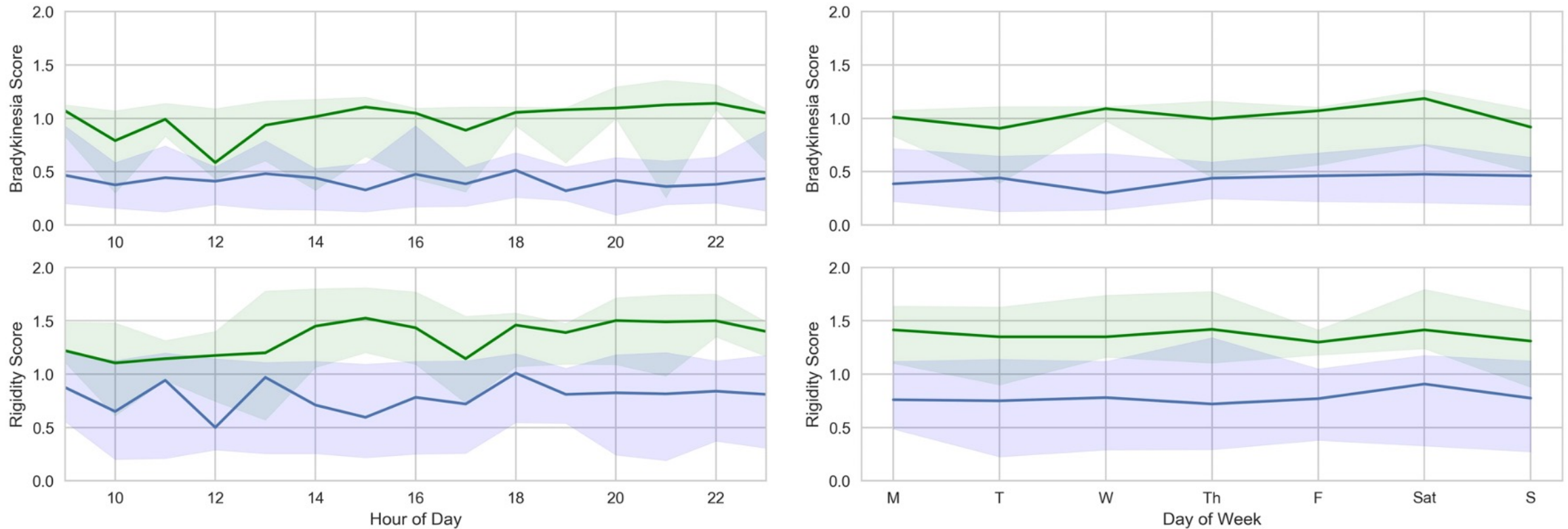
The proposed two-stage multi-model pipeline for classifying subjects as PD patients or healthy controls: (1st Stage) Feature vector sets  $\{v_a\}$  of a given subject, with each vector representing a typing session, serve as input to three trained models  $M_a$ , each one dedicated to a keystroke dynamics variable,  $a \in \{NFT, HT, NP\}$ . Models  $M_a$  yield three prediction probabilities  $P_a$  which are then grouped in new feature vectors  $v_p$ ; (2nd Stage) Feature vector set  $\{v_p\}$  serves as input to a Logistic Regression classifier  $C_{LR}$  that outputs the final classification probabilities  $\{P_f\}$  denoting whether each typing session belongs to a PD patient or a healthy control. Finally, the mean of prediction probabilities  $P_f$  is used to categorise the subject as PD patient or healthy control

# Example

- ❖ Controls exhibit similar behaviour across all variables.
- ❖ Differentiations in the behaviour of PD patients when compared to each other, as well as healthy subjects.
- ❖ PD Patient 1 exhibits similar values to controls in terms of NFT and NP, but clearly higher HT values.
- ❖ PD Patient 2 produced more wide-spread values for all keystroke dynamics variables in comparison to controls



# Response of the estimated indices across time



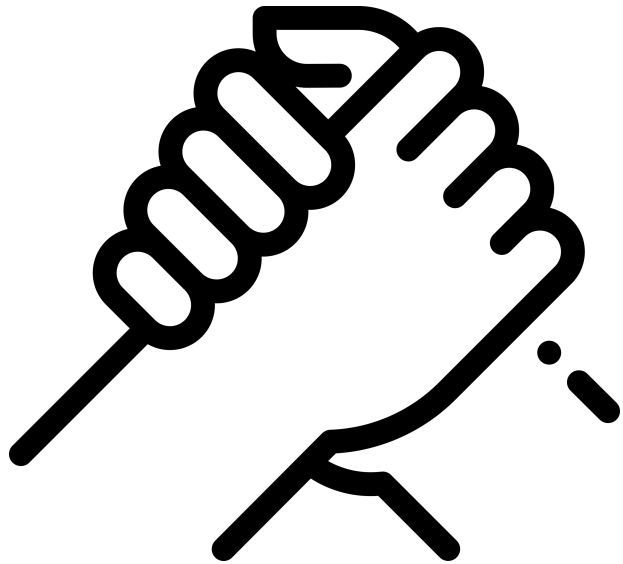
PD (green); Controls (blue)

# Interventions

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# Interventions

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Personalized Game Suite (PGS)

Targeted Nocturnal Intervention (TNI)

Assistive interventions

PGS adaptation algorithm

# Personalised Game Suite

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# Serious games

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Electronic games designed for a primary purpose other than pure entertainment

Gamification – the disguise of tasks and activities into game playing in order to encourage engagement



# Personalised Game Suite (PGS)

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## **ExerGames**

Improve physical activity, reduce the presence of tremor

## **DietaryGames**

Affect the nutritional status

## **EmoGames**

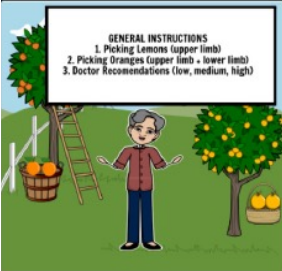


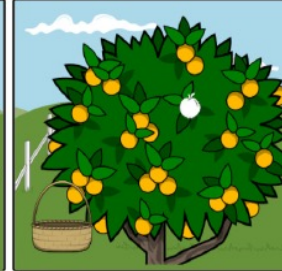

Expressive face encouragement

## **H/V Games**

Enhance handwriting and voice patterns



# Co-creation of PGS

Picking Citrus Fruit 1	Picking Citrus Fruit 2	Picking Citrus Fruit 3	Picking Citrus Fruit 4	Picking Citrus Fruit 5
				
<p>Users move to the right to pick limons (using the upper limb) and to the left to pick oranges (using upper/lower limb) from the trees for the corresponding baskets, following the screen instructions.</p>	<p>To simulate the climbing (on the left) users should march and pick the oranges simultaneously.</p>	<p>Users should follow the doctor recommendations, when pick the highlighted fruits (since the fruits will appear in low, medium or high positions). The time-duration of the highlighted fruits will change according to the level of difficulty.</p>	<p>To simulate real world, each fruit to be picked will be highlighted and then disappear from the screen.</p>	<p>The motivational message will change according to the total score reached.</p>



# Warming-up game

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# “Fishing” game

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# Assistive interventions

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# Assistive Interventions

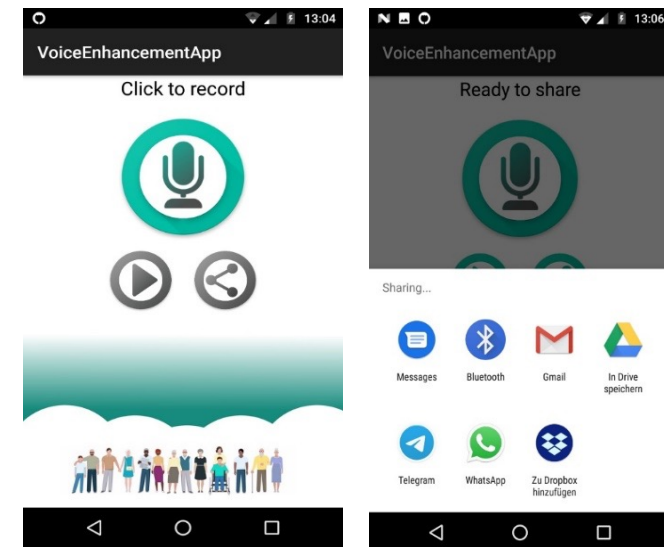
## Voice enhancement

- Smartphone and/or desktop application
- Produces an enhanced version of a voice message
- The user can reproduce voice message or share it via social media apps/email etc.
- Offline processing
- 5 sec. to process 150 sec. recording

Unprocessed



Processed



# Assistive Interventions

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## Gait rhythmic guidance

- Smartwatch application for Wear OS smartwatches
- Non-invasive mitigation of freezing of gait (FoG) episodes

### Target: Mitigation of Freezing-Of-Gate (FOG)

FOG - sudden inability to generate effective stepping and forward progression despite the intention to do so

**How:** Rhythmic stimulation is the playback of external short-length sounds, such as metronome beats, and haptic feedback, via localised vibrations

### Real-time gait pattern analysis module

- Identifies gait velocity, stride frequency and step frequency
- Modulates the playback frequency of the stimuli ty





# Assistive Interventions

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# Targeted Nocturnal Intervention

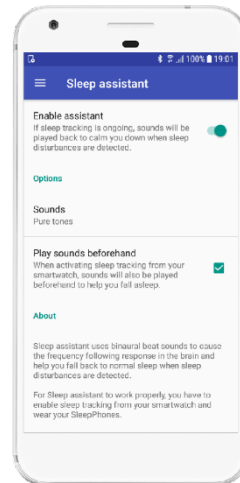
## Sleep tracking

Based on smartwatch  
IMU and heart rate data.



## Data processing and sounds playback

Online data processing  
on smartphone and  
sound playback  
triggering



## Sound streaming to headphones

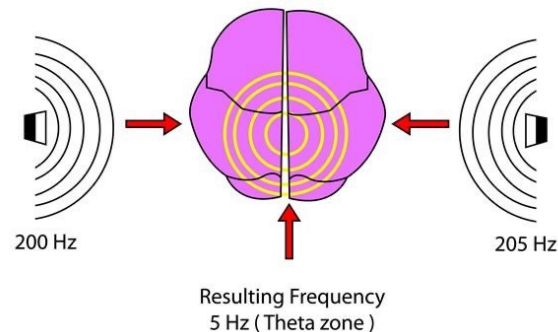
Streaming over  
Bluetooth to  
headphones worn by the  
user.



# Type of sound → Binaural beat

## What is it

Such tones can be further embedded in regular music or sounds.



## Why exploit it

**Frequency following response (FFR)** in the human brain, i.e., the brain produces electrical activity in the same frequency as the frequency difference.

**Interesting fact:** Untreated PD patients may not perceive binaural beats, but as drug treatment progresses, the ability is reinstated.

Oster, G. (1973). Auditory beats in the brain. *Scientific American*, 229(4), 94-103.