

Capturing Life in Motion: Leveraging Wearable Technology for Human Subjects Research

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Using wearable devices to capture heart rate variability



Outline

- Why heart rate variability (HRV)?
- Different metrics for HRV
- Data collection and analysis
- Challenges and practicalities
- Some examples



Why heart rate variability?



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- How do children develop selfregulation?
- How does self-regulation support learning?
- How do early caregiving experiences shape selfregulation development?



The autonomic nervous system







Neurovisceral integration theory (Thayer & Lane, 2000)



1 anterior cingulate; 2 insula; 3 thalamus; 4 hypothalamus; 5 amygdala; 6 periaqueductal grey; 7 parabrachial nucleus; 8 locus coeruleus; 9 rostroventrolateral medulla; 10 caudoventrolateral medulla; 11 nucleus of the solitary tract

Taggart et al. (2016). Significance of neuro-cardiac control mechanisms governed by higher regions of the brain. Autonomic neuroscience: Basic and clinical, 199, 54-65.

- Central autonomic network includes:
- Anterior cingulate cortex (ACC)
- Insula
- Ventro and orbito-prefrontal cortex
- Amygdala
- Hypothalamus
- Periaqueductal gray
- Several other brainstem structures



omponents of the central autonomic network



nterior cingulate; 2 insula; 3 thalamus; 4 hypothalamus; 5 amygdala; 6 periaqueductal 7 parabrachial nucleus; 8 locus coeruleus; 9 rostroventrolateral medula; 10 caudoventrolateral medula; 11 nucleus of the softary tract

Central autonomic network



Sympathetic and parasympathetic neurons

Vagus nerve and stellate ganglia

Moment-by-moment adjustments in heart rate = parasympathetic, vagal influence on heart



Smith, R., Thayer, J. F., Khalsa, S. S., & Lane, R. D. (2017). The hierarchical basis of neurovisceral integration. *Neuroscience & biobehavioral reviews*, *75*, 274-296.







Low HRV: Limited variability in time between R spikes



HRV and the brain



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Fig. 1. (a) map of the whole brain showing significant activations, (b) map of the coordinates of the contrasts at various levels of the neuroaxis.

Thayer, J. F., Åhs, F., Fredrikson, M., Sollers III, J. J., & Wager, T. D. (2012). A meta-analysis of heart rate variability as a marker of stress and health. Neuroscience & Biobehavioral Reviews, 36(2), 747-756.

Meta-analytic findings related to HRV

- Small positive link of HRV to executive function and emotion regulation (Graziano & Derefinki, 2013; Holzman & Bridgett, 2017; Magnon et al., 2022).
- HRV moderately linked with **compassion** (Di Bello et al., 2020).
- Lower HRV in major depression (Koch et al., 2019) and anxiety (Chalmers et al., 2014).
- Lower HRV in **PTSD** (Schneider & Schwerdtfeger, 2020)
- Higher **inflammatory markers** related to lower HRV (Williams et al., 2019).
- Small relation to executive function, emotion regulation and attention control may be subject to publication bias (Zahn et al., 2016).
- Lower HRV in anticipation of stress and cortisol stress response (Michels et al., 2013).



Time-based measures of HRV



- RMSSD: Root mean square of successive RR interval differences. Most related to parasympathetic influence.
- SDNN: Standard deviation of all clean, normal intervals
- pNN50: Proportion of intervals that differ by > 50ms

Shaffer, F., & Ginsberg, J. P. (2017). An Overview of Heart Rate Variability Metrics and Norms. *Frontiers in public health*, *5*, 258. https://doi-org.libproxy.unl.edu/10.3389/fpubh.2017.00258



Frequency-based measures of HRV



- Power within the .15 .40 Hz respiratory range (.24 to 1.04 for children)
- Ultra-low, very low & low frequency bands may reflect other processes, e.g., circadian rhythm, baroreflex
- LF/HF power ratio sometimes argued to reflect balance of parasympathetic and sympathetic influence, but controversial
- Hf-HRV doesn't always reflect vagal influence; also reflects changes in respiration rate that don't affect heart rate



Kalhara, Gayan & Jayasinghearachchi, Vishan & Dias, A. & Ratnayake, V. & Jayawardena, Chandimal & Kuruwitaarachchi, Nuwan. (2017). TreeSpirit: Illegal logging detection and alerting system using audio identification over an IoT network. 1-7. 10.1109/SKIMA.2017.8294127.

Collecting the data



ECG amplifier – Sampling rate ~1000Hz



Collecting the data



Actiheart – Sampling varies up to 1024Hz Wear for up to 2 weeks



Processing and cleaning the data: Longer-term example of IBI analysis





Shorter-term example with full waveform





Side note: Can also do sleep staging with Actiheart







Outputs from Actiheart software: Results

Date T	ime Activit	y BPM	Ave I	BI (ms)	Min IBI	(ms)	Max IBI	(ms)	SD	RMSSD	Quality
2022-11-0	3 09:33:30	0	83	723	588	915	76.68	50.47	1.00		
2022-11-0	3 09:34:00	11	77	854	287	2000	350.14	404.90	0.69	Invalid	data
2022-11-0	3 09:34:30	3	92	720	281	2000	308.33	382.45	0.25	Invalid	data
2022-11-0	3 09:35:00	6	86	704	663	751	21.50	16.18	1.00		
2022-11-0	3 09:35:30	11	88	684	656	740	19.39	12.90	1.00		
2022-11-0	3 09:36:00	22	85	714	672	801	30.12	20.94	1.00		
2022-11-0	3 09:36:30	10	83	731	673	782	29.13	17.43	1.00		
2022-11-0	3 09:37:00	9	90	681	607	1299	98.86	138.38	0.94		
2022-11-0	3 09:37:30	8	85	711	667	792	33.05	18.91	1.00		
2022-11-0	3 09:38:00	50	88	690	642	749	26.78	18.55	1.00		
2022-11-0	3 09:38:30	226	97	612	580	688	23.37	16.45	1.00		
2022-11-0	3 09:39:00	45	100	616	577	1188	85.89	123.28	0.94		
2022-11-0	3 09:39:30	13	96	629	589	704	25.41	14.46	1.00		
2022-11-0	3 09:40:00	37	93	647	590	765	42.18	16.14	1.00		
2022-11-0	3 09:40:30	35	87	692	622	765	32.12	21.60	1.00		
2022-11-0	3 09:41:00	55	90	832	443	2000	418.64	415.31	0.06	Invalid	data
2022-11-0	3 09:41:30	131	97	631	569	1244	98.16	127.17	0.94		
2022-11-0	3 09:42:00	71	98	611	569	725	38.97	15.01	1.00		
2022-11-0	3 09:42:30	2	89	672	641	733	19.78	15.66	1.00		
2022-11-0	3 09:43:00	9	88	684	617	763	37.60	15.21	1.00		
2022-11-0	3 09:43:30	3	82	739	677	781	21.52	16.26	1.00		
2022-11-0	3 09:44:00	0	82	732	665	777	25.31	24.54	1.00		
2022-11-0	3 09:44:30	2	83	721	599	843	40.46	46.38	1.00		
2022-11-0	3 09:45:00	12	83	726	674	769	25.41	15.12	1.00		
2022-11-0	3 09:45:30	2	85	729	655	1447	118.15	158.31	0.94		
2022-11-0	3 09:46:00	3	85	723	655	1383	107.35	151.35	0.94		
2022 44 0		~	00	700	F 4 4	1000	CO 70	100 04	0.01		

Can do all data analysis with Actiheart software





Outputs from *Actiheart* **software: Inter-beat intervals**

(IBI_354_Sess1_Day1.txt
1	L0:59:57.183	722.66	
1	L0:59:57.905	745.12	
1	L0:59:58.650	758.79	
1	L0:59:59.409	749.02	
1	L1:00:00.158	783.20	
1	L1:00:00.941	718.75	
1	L1:00:01.660	710.94	
1	L1:00:02.371	699.22	
1	L1:00:03.070	695.31	
1	L1:00:03.766	735.35	
1	L1:00:04.501	690.43	
1	L1:00:05.191	706.05	
1	L1:00:05.897	731.45	
1	L1:00:06.629	729.49	
1	L1:00:07.358	715.82	
1	L1:00:08.074	699.22	
1	L1:00:08.773	700.20	
1	L1:00:09.474	760.74	
1	L1:00:10.234	774.41	
1	L1:00:11.009	776.37	
1	L1:00:11.785	783.20	
1	11:00:12.568	767.58	
1	11:00:13.336	711.91	
1	L1:00:14.048	678.71	
1	11:00:14./2/	687.50	
1	11:00:15.414	/36.33	
1	11:00:16.150	/83.20	
1	11:00:16.934	/93.95	
1	1:00:1/./28	/20./0	
1	11.00.18 118	744 14	



Data analysis in *Kubios*: The good...





The not so good...





The stuff of nightmares





Comparison with Empatica wrist-worn device



HIGH

NORMAL

LOW

Change Personal Data





Outputs from Kubios software

Image Image <th< th=""><th>WHOLE DA</th><th></th><th></th><th></th><th></th><th></th><th></th><th></th><th></th><th></th><th></th><th></th><th></th><th></th><th></th><th></th><th></th><th></th><th></th><th></th><th></th></th<>	WHOLE DA																				
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000 6 6 78 52850 Nan	(hh:mm:ss)	(count)	(count)	(%)	(sec)	(%)				(kcal/min)	(kcal)	(TRIMP/min	(TRIMP)	(l/min)	(ms)	(ms)	(1/min)	(1/min)	(1/min)	(1/min)	(ms)
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Challenges and issues: Measurement

- **Motion artifact:** Can have a major impact on findings. Data requires extensive cleaning and checking.
- Length of data collection: Different recording lengths can impact HRV.
- **Respiration:** Lower respiration rates increase hf-HRV. Less pronounced impact on RMSSD.
- Other unmeasured factors: Health and fitness, sex, age
- **Tonic vs. Phasic measures:** What is the 'baseline' in real-world contexts?



Challenges and issues: Practicalities

- Child willingness to wear device
- Ensuring that the devices are worn correctly
- Quality measurement, e.g., electrode expiration, electrode types
- Updates to software and hardware during data collection
- Data cleaning and processing time



Example: The CHIME intervention study

- 162 Nebraska early childhood educators (106 Treatment, 47 Waitlisted)
- 143 consented to HRV 12 dropped out/didn't complete study
- Collected from 111 teachers
- 99 with usable data preintervention, 87 postintervention



MINDFUL EDUCATORS

CHIME Intervention





 Begins with a 2-hour introduction to mindfulness as an ECE professional, followed by 7 sessions that are 1.5 hours long

Session structure:

- Reflecting in journals and listening to understand dyadic activity
- Group discussion of topic for the week (mindfulness in breathing, mindfulness in listening)
- Mindfulness activity and guided meditation
- Learn put into practice activities (mindfulness activities to do with children)
- Setting intentions

https://child.unl.edu/chime

Hatton-Bowers H, Clark C, Parra G, Calvi J, Bird MY, Avari P, Foged J, Smith J. Promising Findings that the Cultivating Healthy Intentional Mindful Educators' Program (CHIME) Strengthens Early Childhood Teachers' Emotional Resources: An Iterative Study. Early Child Educ J. 2022 Aug 8:1-14.



Sample characteristics

M (range) Age	38.3 (20 - 70)
% Female	100
% White	87.1
% Hispanic/Latinx	7.1
M (range) Years childcare experience	10.7 (1 – 21)
% Bachelor's/Associate's degree	60.40
% Graduate degree	10.3
Median monthly household income bracket	\$2,500 - \$3,332
% Preschool teacher	59



Measures of emotion regulation collected pre- and post-intervention

- Difficulties in Emotion Regulation Scale (DERS; Gratz & Roemer, 2004): Nonacceptance, goaldirected behavior, impulse control, emotional awareness, strategies, emotional clarity
- Emotion Regulation Questionnaire (Gross & John, 2013): Emotional Reappraisal, Suppression
- Created a composite variable from DERS and ERQ Reappraisal (r = -.55) for each timepoint



Emotion regulation task: Spatial affective cue



Correlations between measures at different time points

	RMSSD Pre	RMSSD Post	Hf-HRV Pre	Hf-HRV Post	HR Pre
RMSSD Post	.74**				
Hf-HRV Pre	.85**	.68**			
HF-HRV Post	.66**	.92**	.76**		
HR Pre	52**	24*	38**	13	
HR Post	42**	49**	30*	37**	.78**



Pre-intervention associations: RMSSD





Pre-intervention associations: hf-HRV





Post-Intervention associations: RMSSD





Post-intervention associations: hf-HRV





CHIME intervention effects on HRV







Current directions: Parent-child synchrony





100

120

80

r = .22

Parent-child synchrony





70

Especially helpful readings

- Appelhans, B.M., & Leuken, L. (2006). Heart rate variability as an index of regulated emotional responding. Review of General Psychology, 10 (3), 229-240.
- Laborde, S., Mosley, E., & Mertgen, A. (2018).
 Vagal tank theory: The three Rs of cardiac vagal control functioning – resting, reactivity, and recovery. Frontiers in Neuroscience, 12.
- Laborde, S., Mosley, E., & Thayer, J. F. (2017). Heart rate variability and cardiac vagal tone in psychophysiological research–recommendations for experiment planning, data analysis, and data reporting. *Frontiers in psychology*, *8*, 213.
- Shaffer, F., & Ginsberg, J. P. (2017). An Overview of Heart Rate Variability Metrics and Norms. *Frontiers in public health*, *5*, 258.
- Thayer, J., & Lane, R. (2000). A model of neurovisceral dysregulation in emotion regulation and dysregulation. J of Affective Disorders, 61, 201 – 216.



From Dusk Till Dawn: The Role of Wearables in Understanding Sleep Patterns



Full Disclosure- the title of this presentation was generated by ChatGPT. I am an academic, not a creative writer. The rest of this presentation however, is all me.



Sleep- Why Should we Care?

- In children
 - Social/emotional, behavioral, cognitive, physical health, academic achievement (Chen et al., 2008; Geiger et al., 2010; Gregory & Sadeh, 2012, Touchette et al., 2009)
- In adults
 - Increased risk for health problems & lower quality of life (Strine & Chapman, 2005)
 - Arthritis, asthma, cancer, depression, diabetes, emphysema, epilepsy, hypertension, heart disease, migraines, stroke, ulcers, BMI (Gregory, 2008; Kohatsu et al., 2006)

How Sleep is Traditionally Measured in Naturalistic Settings

- Self-report
- Overall average
- Sleep diaries
- How much sleep do you get at night?



National Sleep Foundation Recommendations

Hirshkowitz et al., 2015

Infants: 14-17 hours

Toddlers: 11-14 hours

Preschoolers: 10-13 hours

School-age children: 9-11 hours

Teenagers: 8-10 hours

Young adults/adults: 7-9 hours

Older adults: 7-8 hours

Fun fact: Determined by committee- no empirical basis

What's Wrong with Self- Report???

Adults conditioned to report 7-8 hours sleep/night Parents notorious for overestimating their child's sleep- anywhere between half and hour and 2 hours (Dayyat et al., 2011; Molfese et al., 2015; Nelson et al., 2014)

Preview

Toddler Study:

- P reported sleep duration: 10.5 hours/night
- A recorded sleep duration: 8.30 hours/night
 - Difference of 2+ hours

Sleep in Ag Study:

- Self reported: 7.92 hours/night
- A recorded: 6.8 to 7.3 hours/night
 - Difference of 37 to 67 minutes/night



The Solution

- Actigraphy: accelerometer
 - Small, wristwatch like device that measures motion and activity levels
 - Records a level of acceleration every minute
 - Periods of high motion = awake
 - Periods of low motion = sleep

Actigraphy validated against gold-standard polysomnography

(Acebo et al., 2005; Sadaka et al., 2014, Sadeh & Acebo, 2002; Sadeh et al., 1991)



Actigraphy Data



Advantages of Actigraphy

More accurate/objective measure of sleep

Total Sleep Time Sleep Efficiency Sleep Latency Wake After Sleep Onset



Can collect data for up to 3 weeks

Ability to measure several nights in a row

*

h.

Newer models can capture:

Ambient LightSkin TemperatureHRVOxygen SaturationBlood Pressure

Night to Night Variability



Software automatically scores sleep/wake/non-wear times

Two Studies

Toddler Sleep Study (PIs: Bates, Molfese, Molfese, Rudasill)

- 5-year longitudinal multi-site NICHD study
- Sleep, temperament, self regulation in toddlers
- Sleep measured for 2 weeks at 30, 36, and 42 months old
 - Funding: National Institute for Child Health and Human Development, grant number HD073202

Sleep in Ag Study (Pls: Prokasky, Harris)

- Pilot study of sleep in farmers/ranchers in 5 states in Midwest
- Differences between peak "busy" seasons and non-peak "slow" seasons
- Sleep measured for 1 week during busy season, and 1 week during slow season

Funding: Central States Center for Agricultural Safety and Health NIOSH (U54 OH010162)

Toddler Study: Actigraphy + Sleep Diary Data



Red Underline: Actigraph recorded sleep Teal highlight: Parent reported time in bed Blue overline: Parent reported nap time pink highlight: Actigraph not worn

Toddler Study: Night to Night Variability

Prokasky, Fritz, Molfese, 2019



Toddler Study: Night to Night Variability

Prokasky, Fritz, Molfese, 2019





Toddler Study: Night to Night Variability

Prokasky, Fritz, Molfese, 2019



Sleep in Ag Study

Prokasky & Harris, 2022



Sleep in Ag Study

Prokasky & Harris, 2022

	Peak (Busy) Season	Non-Peak (Slow) Season
Sleep Quantity		
Bedtime	11:00 pm	10:54 pm
Wake Time	6:48 am	6:56 am
Total Time in Bed*	7.6 hours	8.0 hours
Total Sleep Time*	6.8 hours	7.3 hours
Sleep Quality		
Sleep Efficiency	90.0%	91.1%
Wake after Sleep Onset	45.3 minutes	42.2 minutes
Number of Night Wakings	16.6	16.4
Average Length of Night Waking	2.7 minutes	2.6 minutes

Practical Considerations



Recruitment • F

Participant burden

Expense

Depending on manufacturer, modelDevice failure

Compliance

 Some toddlers (and farmers) just don't like wearing stuff on their wrists





Thank you!

Questions?