The Effects of Social Media and Apps in the Treatment of Mental Health Disorders

John Torous MD MBI



Conflicts of Interest

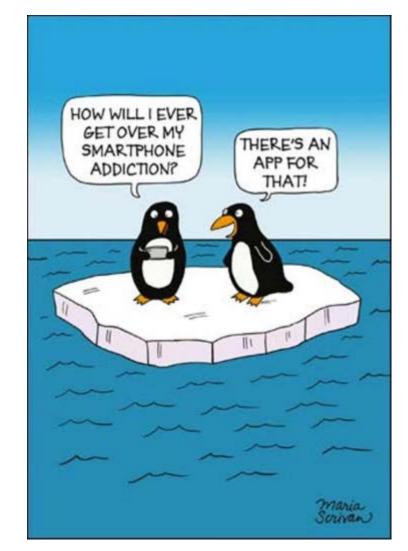
Investigator Initiated Study on Abilify MyCite Supported by Otsuka

Beth Israel Deaconess Medical Center



Outline

- State of Smartphones and Mental Health
- Digital Phenotyping and Social Media
- App Evaluation
- Informed Consent in the Digital Age



Beth Israel Deaconess Medical Center



Finding Focus in Digital Mental Health

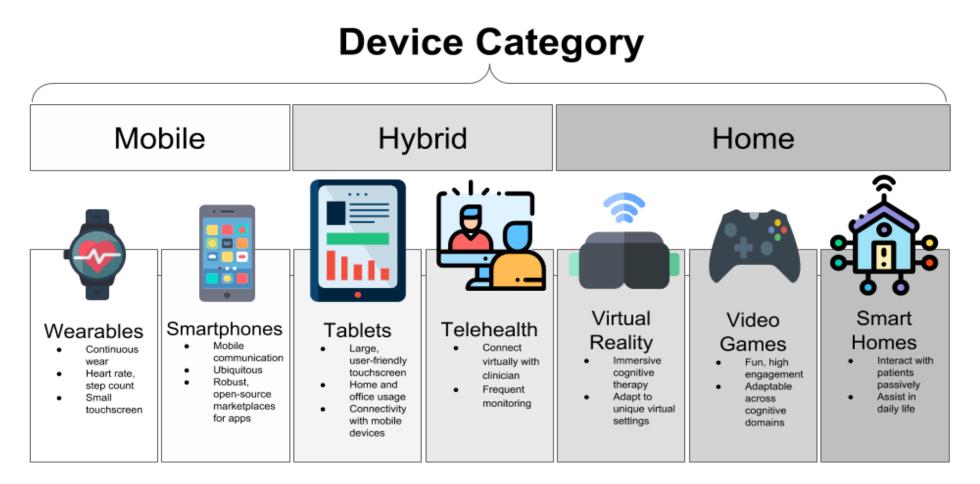


Image by Ryan Hays, BIDMC Digital Psychiatry



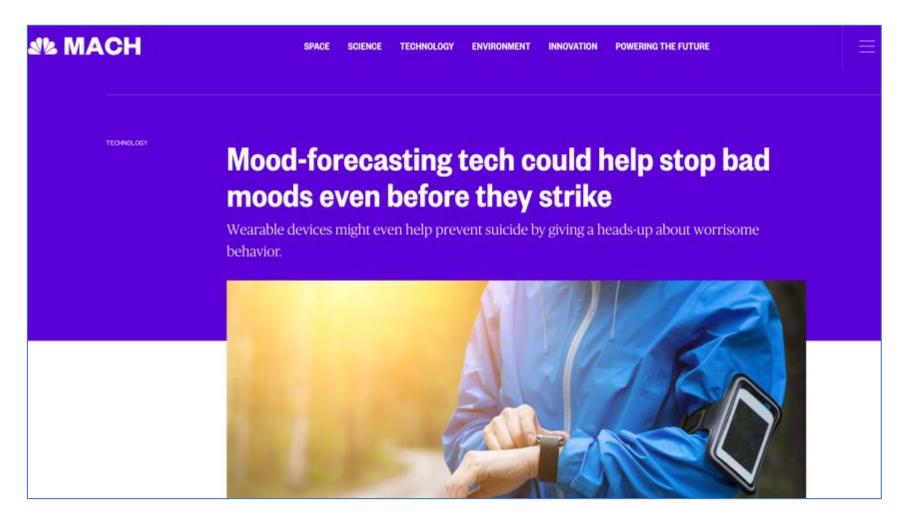
- Number of Mental Health Apps: 10,000
- Number of FDA Approved Mental Health Apps:

Studies by the twenty top-funded privately held US-based digital health companies, by burden level and clinical effectiveness and by population, condition, or risk factor

 Industry Studies -> Number of studies l5 16 17 18 19 20 21 22 -**\^**-34 Healthy Multiple sclerosis Epilepsy Parkinson disease Mental health Not high burden None burden Evaluated clinical Cancer effectiveness Hyperglycemia Depression Safavi K, Mathews SC, Bates DW, Did not evaluate Dorsev ER, Cohen AB, Top-Funded Hypertension clinical effectiveness **Digital Health Companies And Their** Etheonycologia **Beth Israel Deaconess** Impact On High-Burden, High-Cost HARVARD MEDICAL SCHOOL Conditions. Health Affairs. 2019 Jan TEACHING HOSPITAL Medical Center

Torous J. Roberts LW. Needed innovation in digital health and smartphone applications for mental health: transparency and trust. JAMA psychiatry. 2017 May 1;74(5):437-8.

1;38(1):115-23.



Feb 19th, 2019

Beth Israel Deaconess Medical Center



NHS to launch first internet addiction clinic

Exclusive: centre in London will focus on gaming disorders, with plans to expand



June 22, 2018

Instagram Bans Suicidal or Self-Harm Related Content After Outrage Following Death of 14-year-old UK Girl

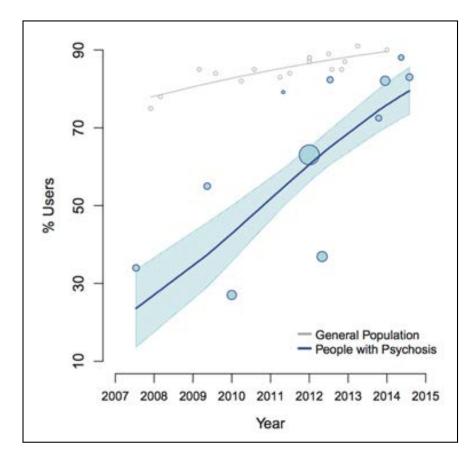
Molly Russel's death, which sparked an international outrage against Instagram, was linked to the graphic con that she was posting and apparently consuming on the platform.

News18.com Updated:February 20, 2019, 1:35 PM IST

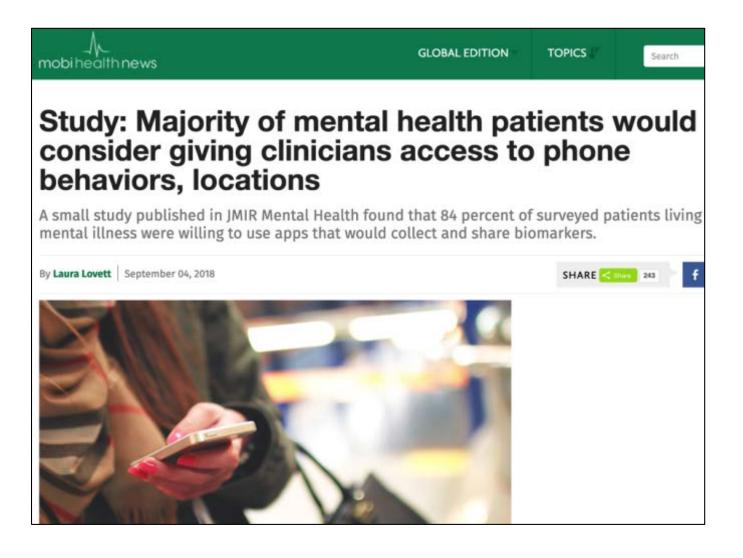


Feb 20, 2019 Beth Israel Deaconess Medical Center

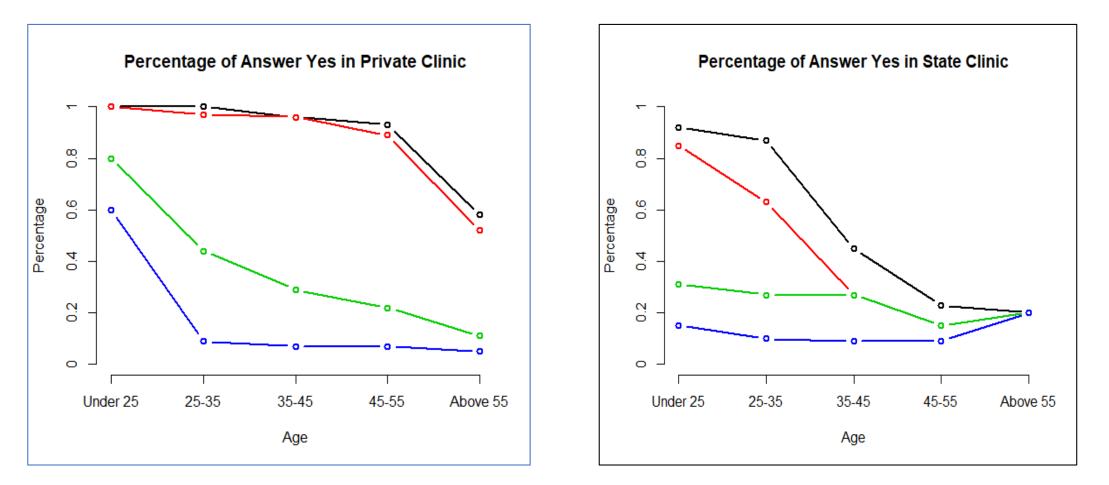




Mobile Phone Ownership and Endorsement of "mHealth" Among People With Psychosis: A Meta-analysis of Cross-sectional Studies.J Firth, J Cotter, J Torous, S Bucci, JA Firth, AR Yung. Schizophrenia Bulletin. 2016







Torous J, Wisniewski H, Liu G, Keshavan M. Mental Health Mobile Phone App Usage, Concerns, and Benefits Among Psychiatric Outpatients: Comparative Survey Study. JMIR Mental Health. 2018;5(4):e11715

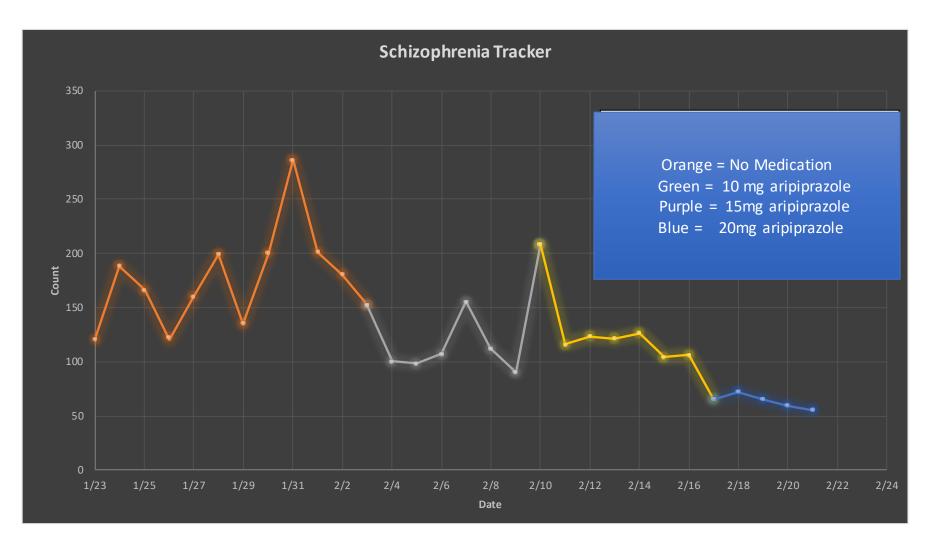
Medical Center





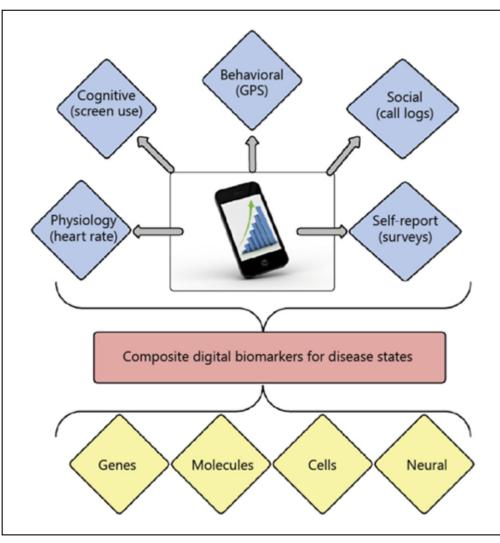
Beth Israel Deaconess Medical Center





Torous J, Roux S. Patient-driven innovation for mobile mental health technology: Case report of symptom tracking in schizophrenia. JMIR mental health. 2017 Jul;4(3).





Torous J, Rodriguez J, Powell A. The new digital divide for digital biomarkers. Digital biomarkers. 2017;1(1):87-91.

Beth Israel Deaconess Medical Center

uOttawa

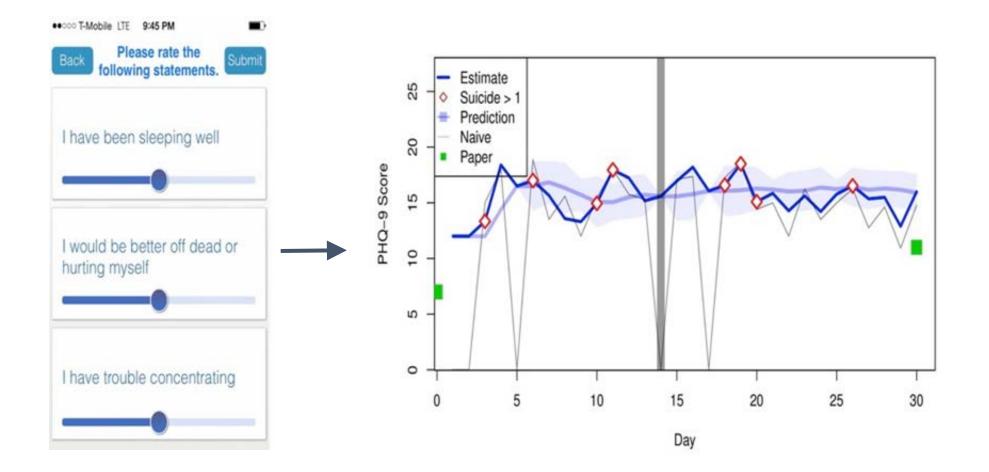


BOSTON

JNIVERSITY

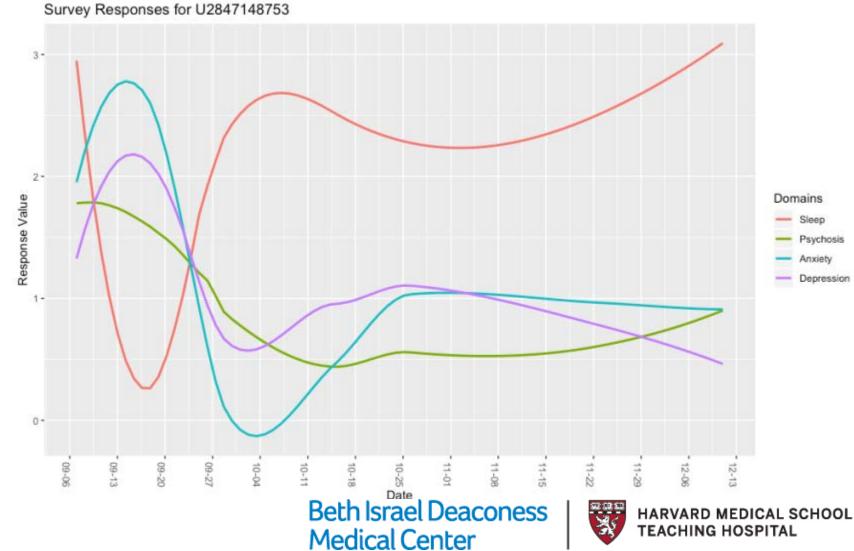


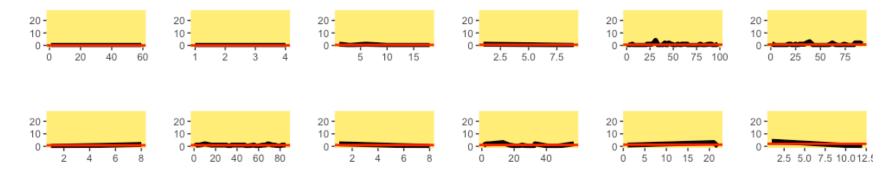


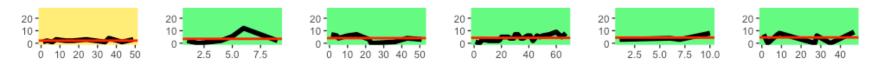


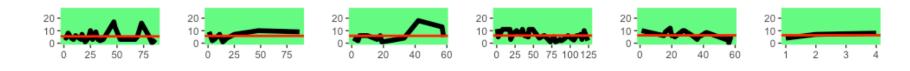
Torous J, Staples P, Shanahan M, Lin C, Peck P, Keshavan M, Onnela JP. Utilizing a Personal Smartphone Custom App to Assess the Patient Health Questionnaire-9 (PHQ-9) Depressive Symptoms in Patients With Major Depressive Disorder. JMIR Ment Health 2015;2(1):e8



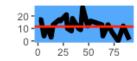


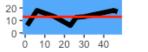


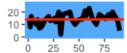


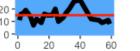


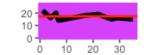
20 - 10 -	20 -			20-								20 - 10 -	20 10							
0-				0-				0-				0-				- (7			
	2	4	6	1	2	3	4	0	20	40	60	0	25	50	75		0	10	20	30

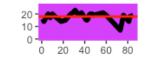






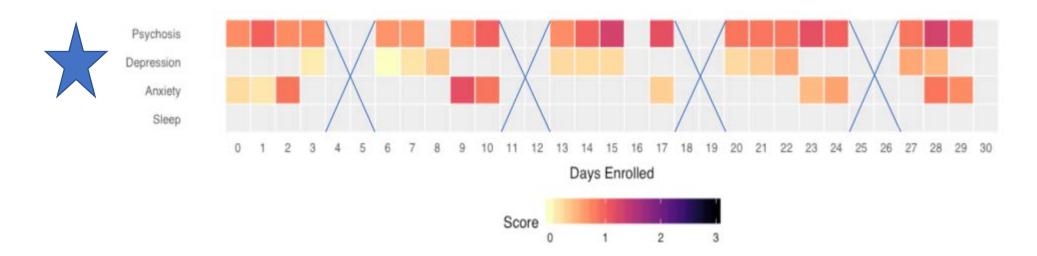


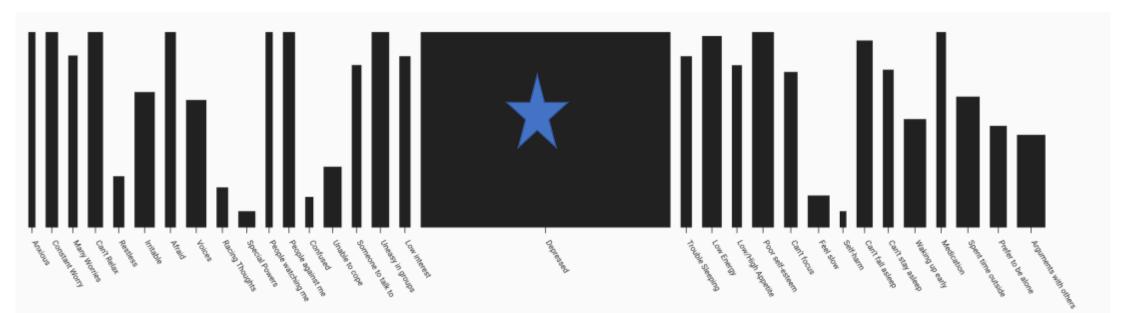




50 75

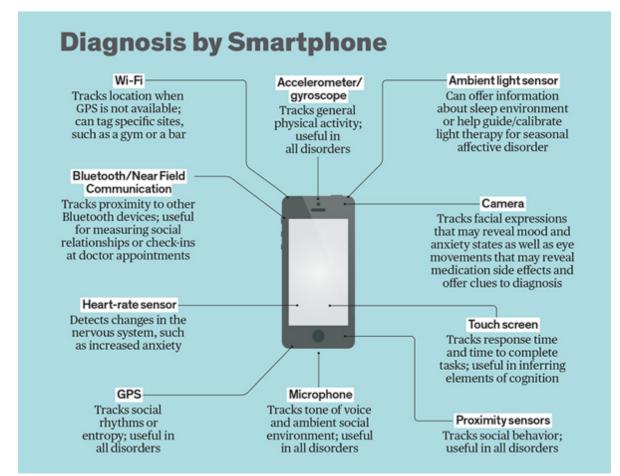
Figure by Philip Henson, BIDMC Digital Psychiatry





Smartphones -> New Functional Data

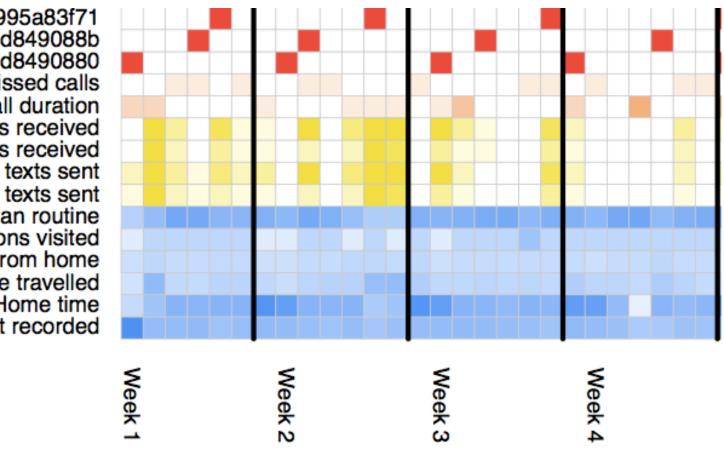




A Software Shrink: Apps and Wearables Could Usher In an Era of Digital Psychiatry. IEEE Spectrum. 2017.



Active and Passive (n= 1 example)



SurveyID: 56fe99da1206f74995a83f71 SurveyID: 56e6facc1206f735d849088b SurveyID: 56e6fa3e1206f735d8490880 # missed calls Call duration Total length of texts received # texts received Total length of texts sent # texts sent Circadian routine # Significant locations visited Max distance from home Distance travelled Home time GPS amount recorded

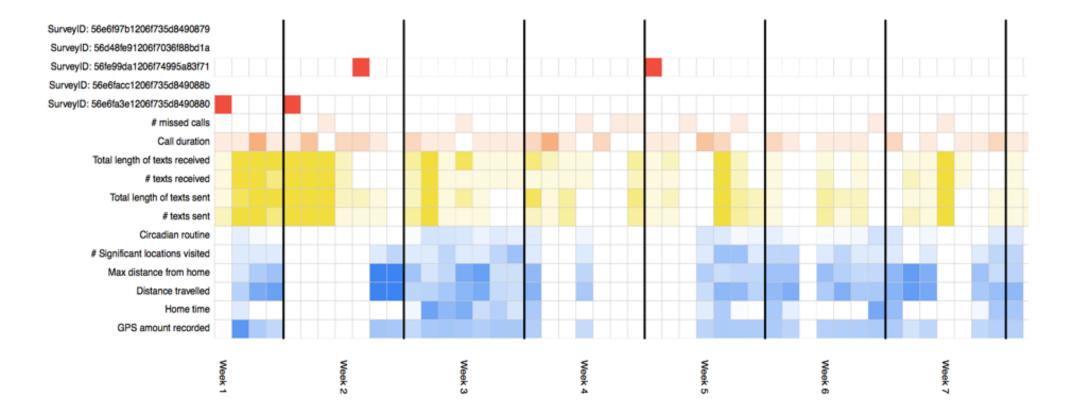
> Beth Israel Deaconess | Medical Center



HARVARD MEDICAL SCHOOL TEACHING HOSPITAL

Image by Ian Barnett PhD, UPenn

Active and Passive (n= 1 example)



Beth Israel Deaconess Medical Center



Image by Ian Barnett PhD, UPenn

Towards Sleep from Sensors

1.0

- 0.8

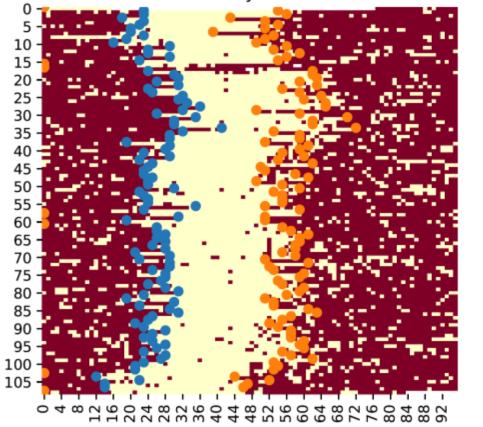
- 0.6

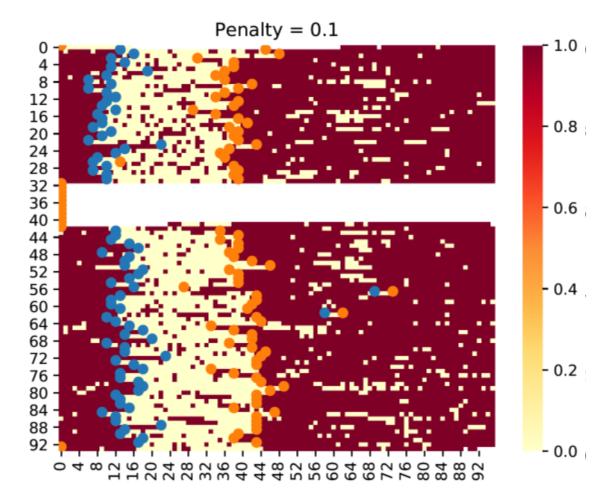
- 0.4

- 0.2

- 0.0

Penalty = 0.1

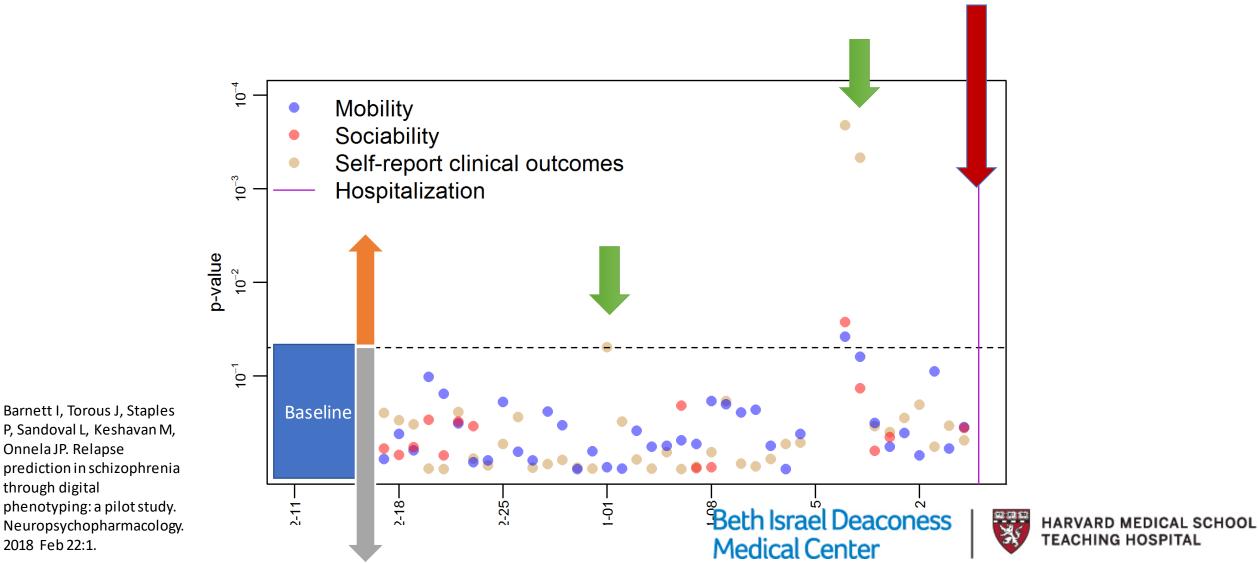




Beth Israel Deaconess Medical Center



Smartphones -> New Functional Data

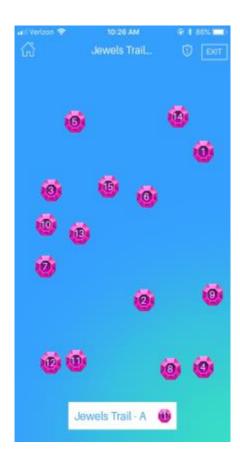


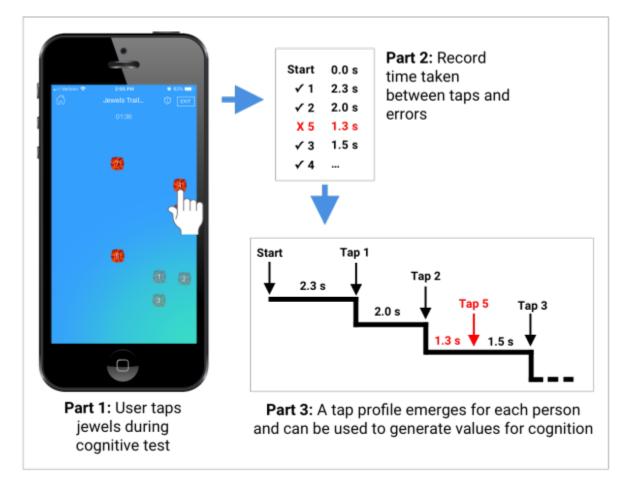
Onnela JP. Relapse

through digital

2018 Feb 22:1.

Smartphones -> New 'Cognitive' Data

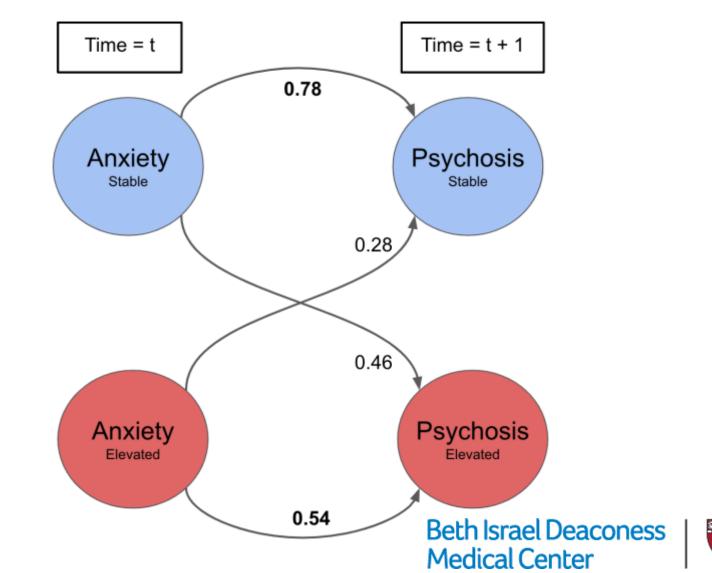




Beth Israel Deaconess Medical Center

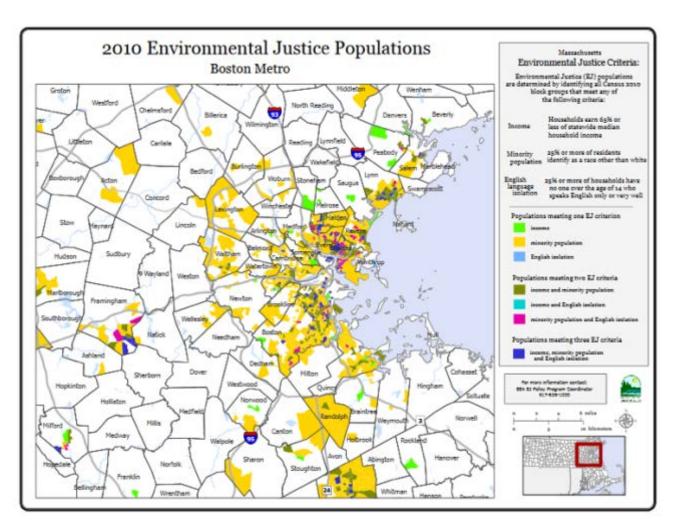


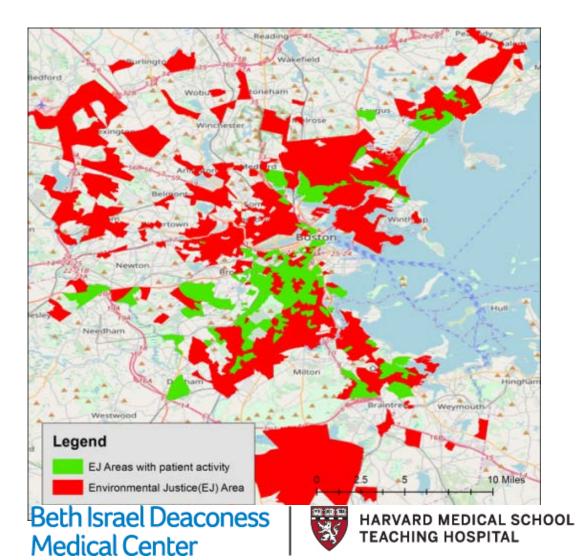
Prediction of Future Clinical State





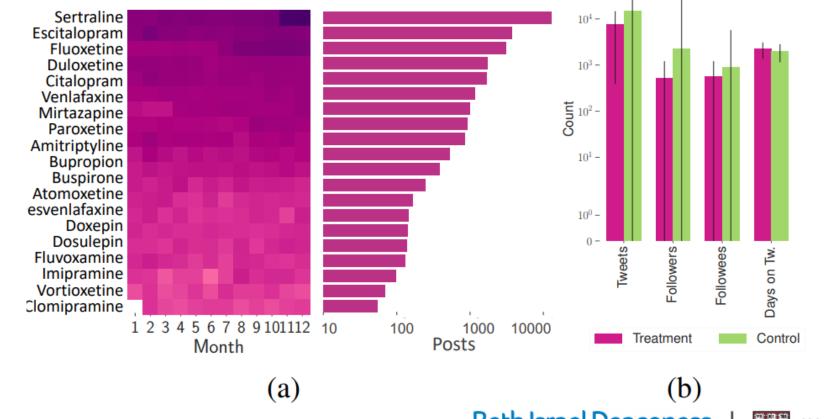
Towards Population Level Mental Health





Social Media Data and Medications

• The above 93,275 medication usage posts were posted by 52,567 unique users from whom we then collect Twitter.





Social Media Data and Medications

• The above 93,275 medication usage posts were posted by 52,567 unique users from whom we then collect Twitter.

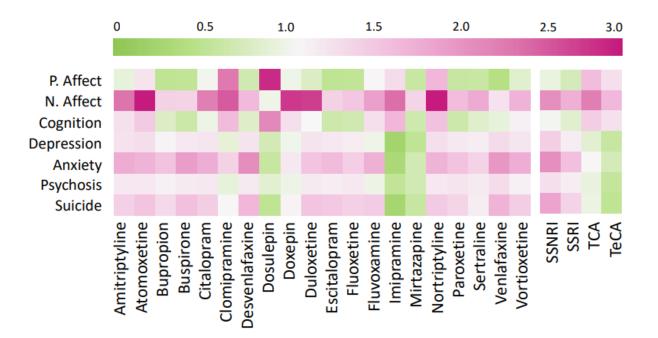
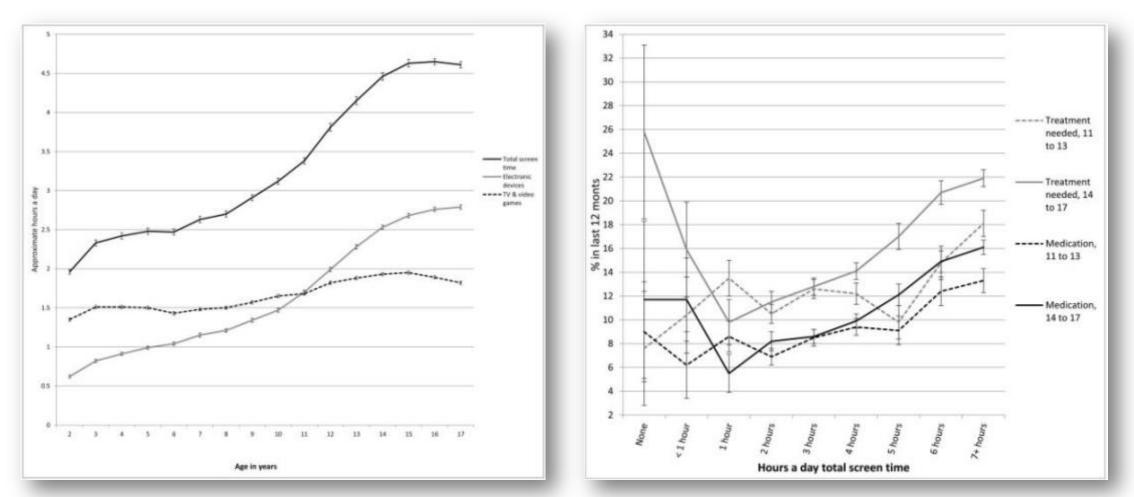


Figure 6: Relative Treatment Effect on the outcomes per 20 most popular drugs (left), and drug families (right).



Too Much Social Media?



Twenge JM, Campbell WK. Associations between screen time and lower psychological well-being among children and adolescents: Evidence from a populationbased study. Preventive Medicine Reports. 2018 Oct 18.

Beth Israel Deaconess Medical Center



Too Much Social Media?

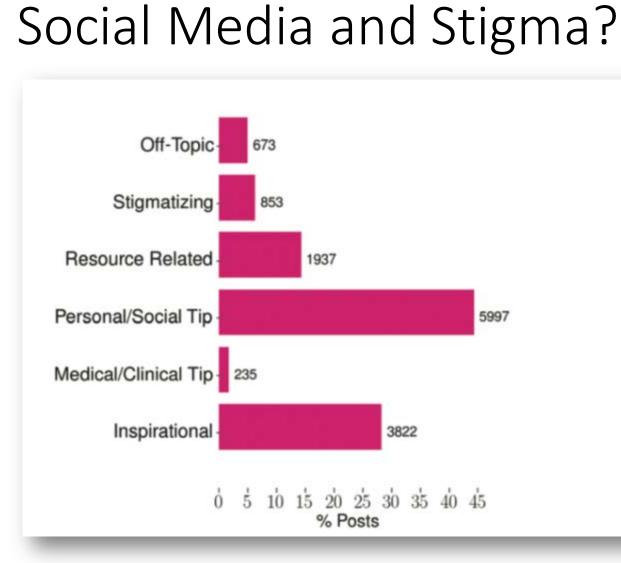
 National survey of 1,787 young adults on use of: Facebook, YouTube, Twitter ... Instagram, Snapchat



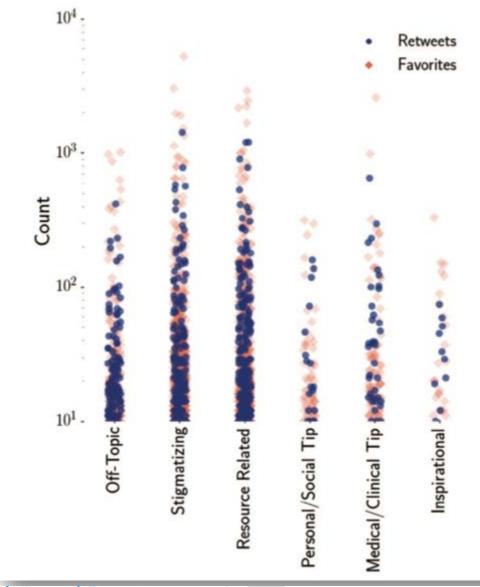
 People using the most platforms (7 to 11 different ones) had more x3 risk of depression and anxiety.

Primack BA, Shensa A, Escobar-Viera CG, Barrett EL, Sidani JE, Colditz JB, James AE. Use of multiple social media platforms and symptoms of depression and anxiety: A nationally-representative study a mong US young adults. Computers in human behavior. 2017 Apr 1;69:1-9.



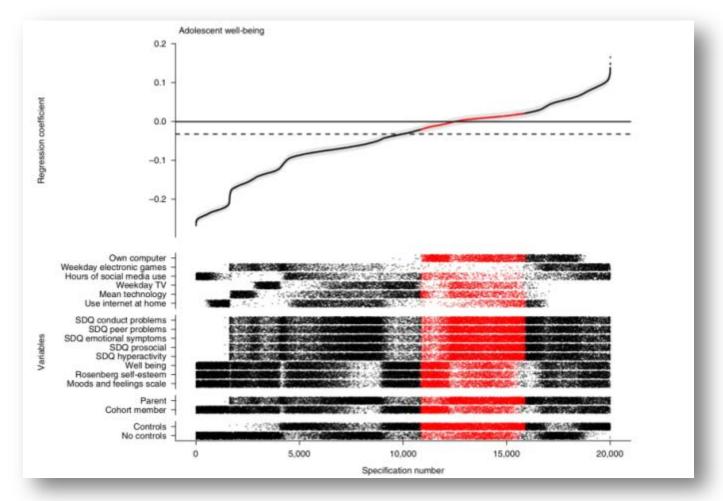


Saha K, Torous J, Ernala SK, Rizuto C, Stafford A, De Choudhury M. A computational study of mental health awareness campaigns on social media. Translational Behavioral Medicine. 2019.





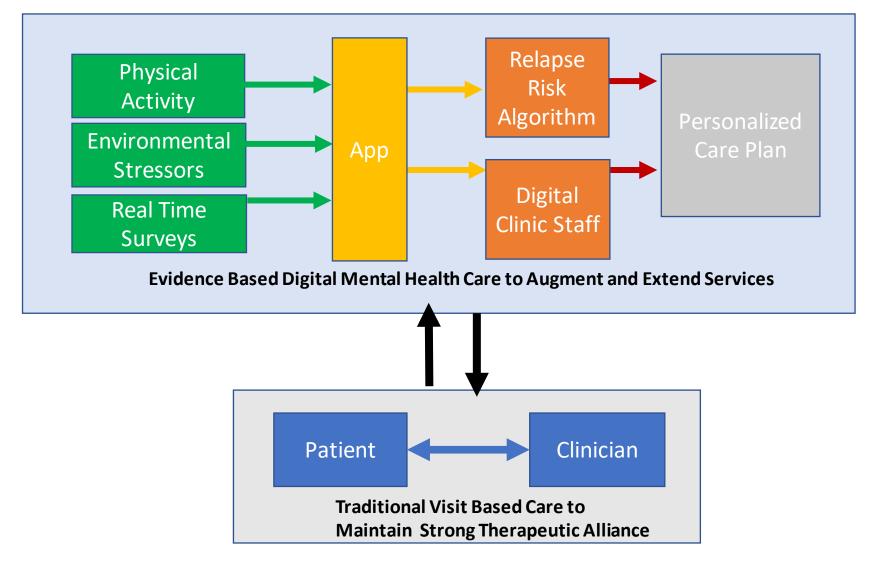
A Mixed Picture?



Orben A, Przybylski AK. The association between adolescent well-being and digital technology use. Nature Human Behaviour. 2019 Jan 14:1.



Towards a Digital Clinic



Torous J, Hsin H. Empowering the digital therapeutic relationship: virtual clinics for digital health interventions. npj Digital Medicine. 2018 May 16;1(1):16.



Towards Digital Skills Groups

Session 1: Smartphone Fundamentals and Your Health Goals



Learn how apps may help you towards your health goals // Learn about mental health apps and other digital resources // Access and download apps // Keep your personal data secure //Remove harmful apps // Use alarms, maps, and reminders on the phone available for



Session 2: Smartphones for Health and Wellness



Set up mental health apps // Collect your own data on mood, anxiety, sleep, and steps // Learn to use wearables and smartwatches // Learn to explore and discover local services via apps // Learn how to connect with peers and family with apps (without a data plan)

Session 3: Smartphones for Personal Health



Access and learn from your personal data // Learn how to share your data with who you want and how to protect what you don't want to share // Customize apps to your needs // Develop a digital mental health toolkit to support your recovery // Evaluate apps that may be of help

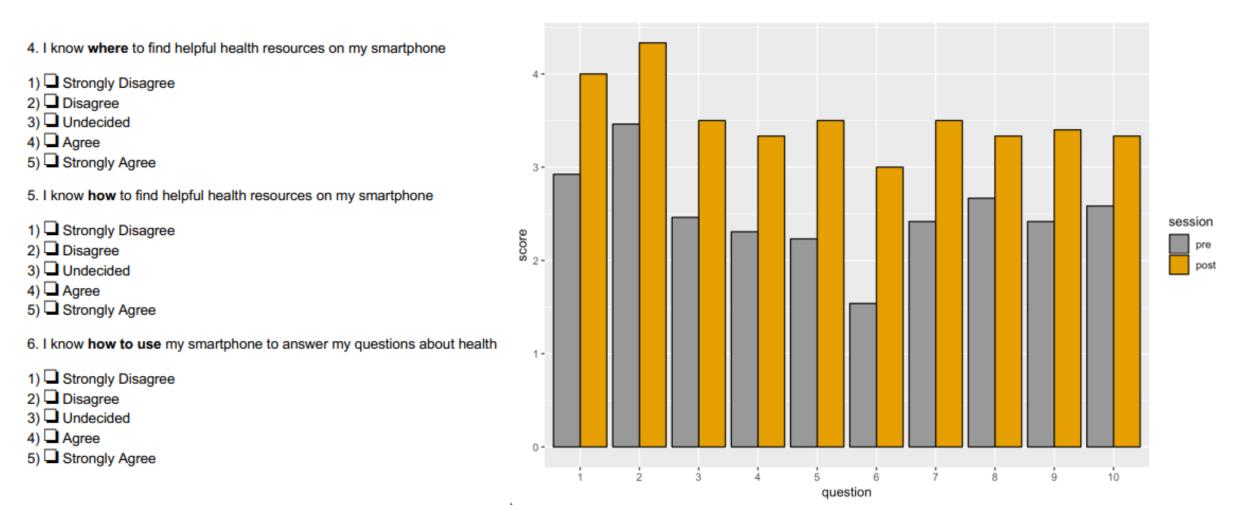
Session 4: Smartphones for Your Recovery



Develop insights into your recovery with digital data and smartphone tools // Finalize your digital toolkit // Help peers with technology // Use apps to access community resources and services // Action planning with apps // Identify barriers and solutions to technology use

https://www.digitalpsych.org/digital-skills-training.html

Teaching Digital Skills





Towards New Questions

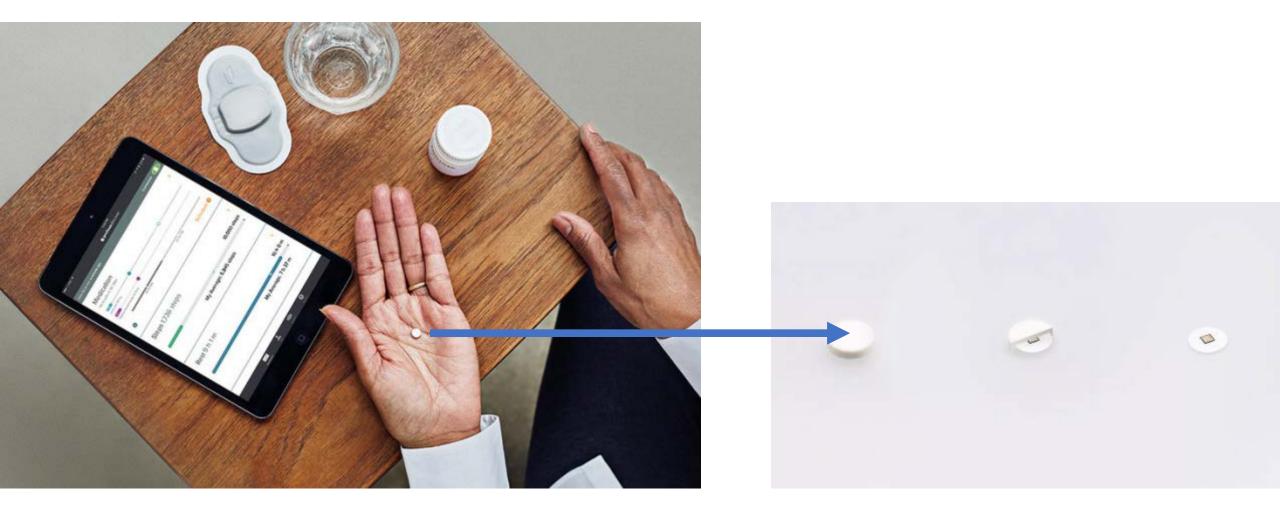
Do you remember why you did not remember to take your medications?

What would you want to learn?

Beth Israel Deaconess Medical Center



Towards Digital Pills



Beth Israel Deaconess Medical Center



Smartphone Apps Today

 Estimate to be over 10,000 mental health related apps

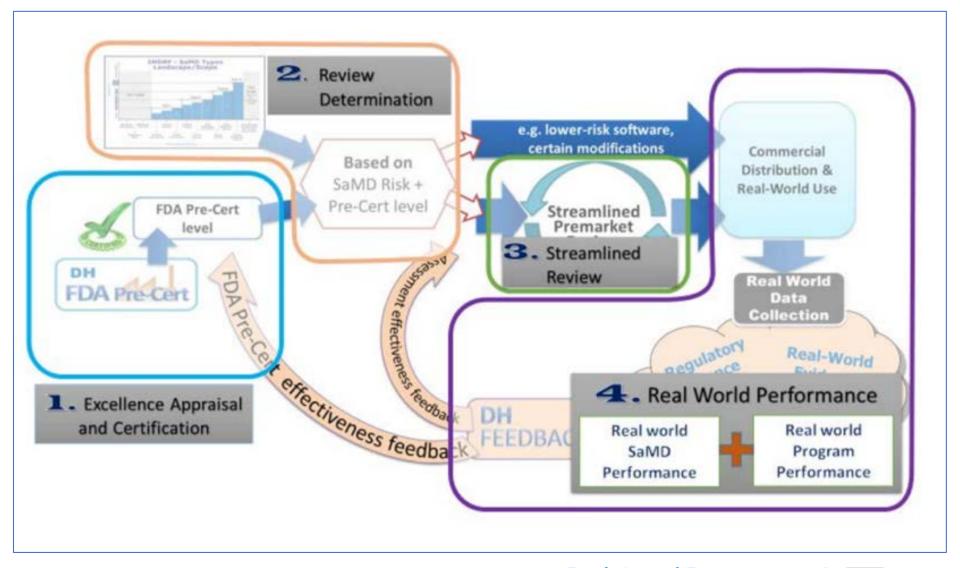


Torous J, Roberts LW. Needed innovation in digital health and smartphone applications for mental health: transparency and trust. Jama psychiatry. 2017 May 1;74(5):437-8.

Beth Israel Deaconess Medical Center

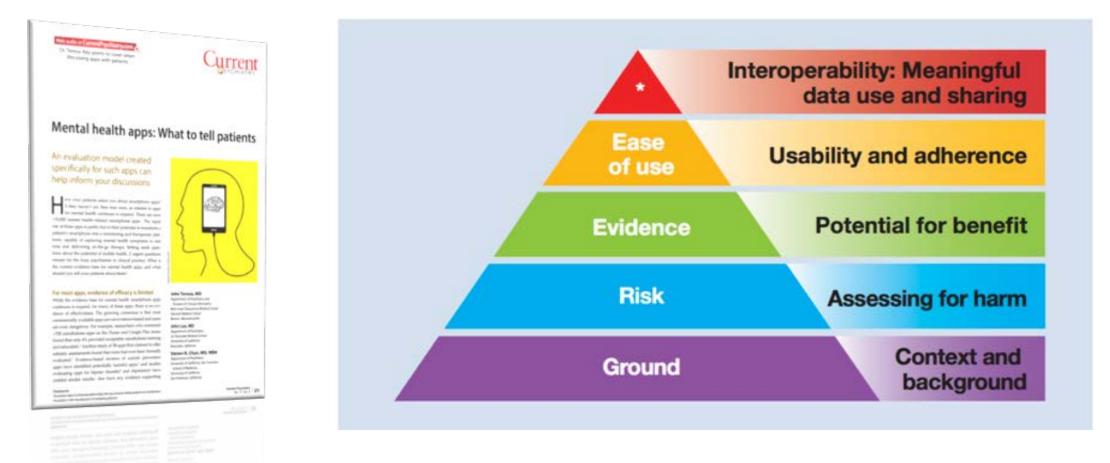


The FDA To the Rescue ?



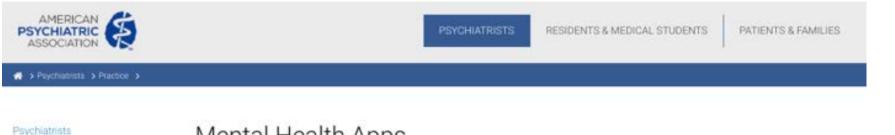
Beth Israel Deaconess Medical Center





Torous JB, Chan SR, Gipson SY, Kim JW, Nguyen TQ, Luo J, Wang P. A hierarchical framework for evaluation and informed decision making regarding smartphone apps for clinical care. Psychiatric Services. 2018 Feb 15;69(5):498-500.





Education

states the

Practice

Practice Management

Professional Interests

DSM

Telepsychiatry

Risk Management

Clinical Practice Guidelines

Ethics

Quality Improvement

Parity

Research

Transition to Practice

Mental Health Apps

Why Rate Mental Health Apps

Mental Health Apps

The expanding use of mobile health (mHealth) technologies is unprecedented in the history of medicine. Every month, companies and researches release new smartphone apps, smart watches, and sensor technologies for the healthcare market. Psychiatry has been no exception to this trend. There has also been growing patient, clinical, government, and payer interest in the potential of mHealth technologies for psychiatric clinical care. Psychiatrists, clinical psychologists, psychotherapists, and other mental health clinicians are increasingly faced with questions regarding the efficacy and risks of mobile and online apps.

APA is helping Psychiatrists and other mental health professionals navigate these issues to ensure all important factors are considered and ultimately determine whether an app works for you and your patients. The material provided here covers why it is critical to rate an app, how best to evaluate an app and an opportunity to seek additional guidance on apps and/or the evaluation process.

Why Rate Mental Health Apps?

Learn why it is important to rate mental health apps for you and your patients.

Learn More >



in rating an app.

Contact Us

Explore Mental

App Evaluation Model

App Evaluation Example

Why Rate Mental Health Apps?

Need help rating apps?

Please contact us if you need assistance

Health Apps



🖬 🛛 T-Mobile Wi-Fi 🗢 4:22 PM	* 🔳				
Done Manage Addictions	+				
Adrenaline Producing					
Alcohol					
Anger					
Being Right	~				
Caffeine					
CoDependency					
Cocaine					
Collecting Things					
Compulsive Behaviors					
Drug Abuse					
Billy Lights Triggers Search Lights Accountability					

Up to 48% of NHS mental health patients are re-admissions - don't be one of them

In 2014 the National Audit Office reported that each year the NHS deals with one million emergency readmissions within 30 days of discharge, costing an estimated £2.4 billion.

What can you do to change this?

Dedicate yourself to your own healing, and thereby avoid being readmitted.

This will help save the NHS some of the £2.4 billion, which they urgently need to help others like you.

Help others by helping yourself.

Be your own NHS.

Created in England by 365 Positivity Disclaimer: The information within this app is not

Close







https://www.nytimes.com/interactive/2018/12/10/business/location-data-privacy-apps.html

Beth Israel Deaconess Medical Center



Table 2. Counts and Proportions of Apps Transmitting Data to a Third Party and Whether This Was Disclosed in a Privacy Policy

	No. (%)				
	Apps With Privacy Policy			Apps Without Privacy Policy	
Destinations	Transmission Occurred, Disclosed in Policy	Transmission Occurred, Not Disclosed in Policy	Transmission Occurred, Policy States Won't	Transmission Occurred	
Any destination type*	16 (44)	5 (14)	3 (8)	9 (25)	
Advertising or marketing services	10 (28)	2 (6)	2 (6)	8 (22)	
Analytics services	14 (39)	5 (14)	1 (3)	4 (11)	
Google destinations	13 (36)	5 (14)	3 (8)	7 (19)	
Google advertising services ^b	6 (17)	2 (6)	1 (3)	6 (17)	
Google analytics services ^c	12 (33)	5 (14)	1 (3)	4 (11)	
Facebook analytics	9 (25)	2 (6)	0 (0)	1 (3)	
Others	15 (42)	1(3)	0 (0)	4 (11)	
Mixpanel	3 (8)	0	1 (3)	0	
AppNexus	2 (6)	0	0	1 (3)	
Twitter Mopub	3 (8)	0	0	0	
Yahoo Flurry Analytics	3 (8)	0	0	0	
AdColony	1 (3)	0	0	1(3)	
AppsFlyer	1 (3)	0	1 (3)	0	
Kiip	1 (3)	0	0	1 (3)	
Branch	1 (3)	0	0	0	
AddThis	1 (3)	0	0	0	
Amplitude	1 (3)	0	0	0	
Manage.com	1 (3)	0	0	0	
Singular/Apsalar	1 (3)	0	0	0	
UserVoice	1 (3)	0	0	0	
Unknown destination ^d	0	0	0	1 (3)	

* Percentage of apps included in study (n = 36).

b Identified services were AdSense, AdWords, and DoubleClick.

^c Identified services were Google Analytics and Crashlytics.

^d Identity or ownership information for the domain startappexchange.com could not be established.

JAMA Network Open. 2019;2(4):e192542. doi:10.1001/jamanetworkopen.2019.2542

Huckvale, Torous, and Larsen....In Press with JAMA Open

Beth Israel Deaconess Medical Center

April 19, 2019 5/10



<u>;;;;;</u>





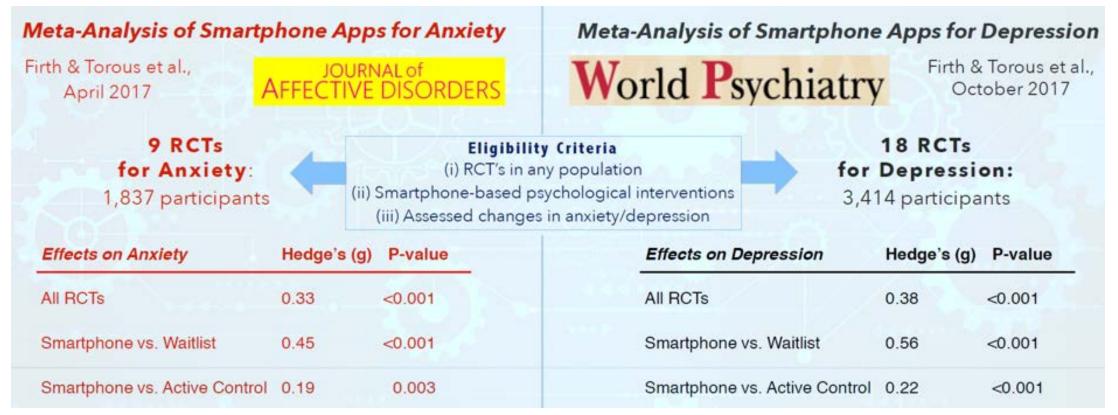
Search term	Identified in searches (n=1435)		Screened (n=350)	
	Android	iOS	Android	iOS
Anxiety	249	200	40	40
Depression	250	200	40	40
Schizophrenia	250	32	40	32
Self-harm	85	29	40	29
Substance use	131	9	40	9
Total	965	470	200	150

Larsen....Torous..et al....In Press with NPJ Digital Medicine

Coding element	n (%) of apps
3. Positive claims	59 (81%)
3.a. Claims of effectiveness	47 (64%)
3.a.i. Detection or diagnosis	7 (10%)
3.a.ii. Improvement in symptoms or mood	22 (30%)
3.a.iii. Improvement in self-management	26 (36%)
3.b. Claims of acceptability	33 (45%)
4.a. Scientific language	32 (44%)
4.a.i. Specific technique described	24 (33%)
4.a.ii. Evidence from study using app	2 (2.7%)
4.a.iii. Citation to scientific literature	1 (1.4%)
4.b. Technical expertise	23 (32%)
4.b.i. Certification or accreditation	0
4.b.ii. Prizes or awards	2 (2.7%)
4.b.iii. Credible developers	18 (25%)
4.b.iv. Credible endorsements	3 (4.1%)
4.c. Lived experience design	10 (14%)
4.c.i. Lived experience involvement	6 (8.2%)
4.c.ii. Lived experience developer	5 (6.8%)
4.d. "Wisdom of the crowd"	14 (19%)
4.d.i. Download, usage or popularity statistics	11 (15%)

Beth Israel Deaconess Medical Center



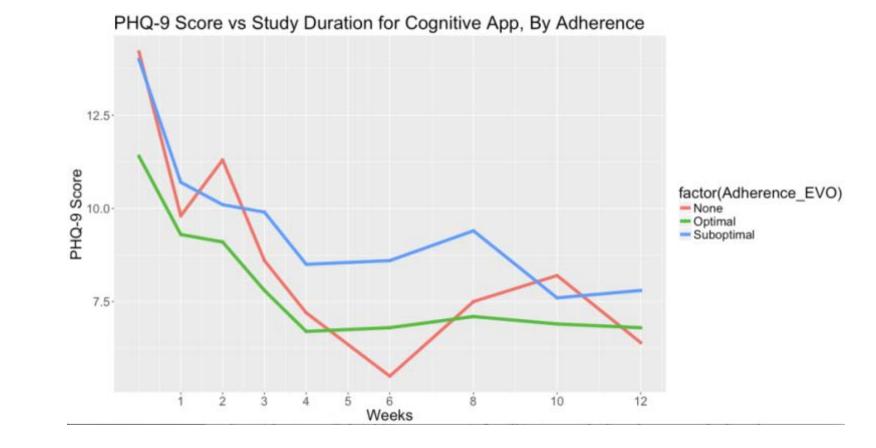


Firth J, Torous J, Nicholas J, Carney R, Pratap A, Rosenbaum S, Sarris J. The efficacy of smartphone-based mental health interventions for depressive symptoms: a meta-analysis of randomized controlled trials. World Psychiatry. 2017 Oct 1;16(3):287-98.

Beth Israel Deaconess Medical Center



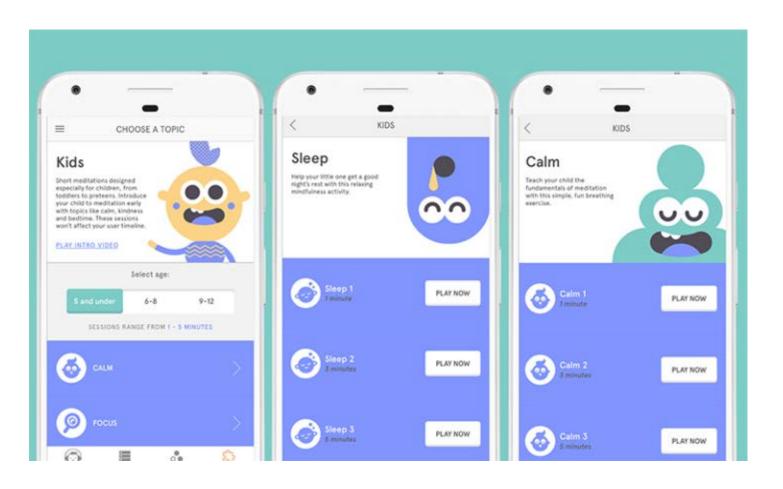




Arean PA, Hallgren KA, Jordan JT, Gazzaley A, Atkins DC, Heagerty PJ, Anguera JA The Use and Effectiveness of Mobile Apps for Depression: Results From a Fully Remote Clinical Trial J Med Internet Res 2016;18(12):e33

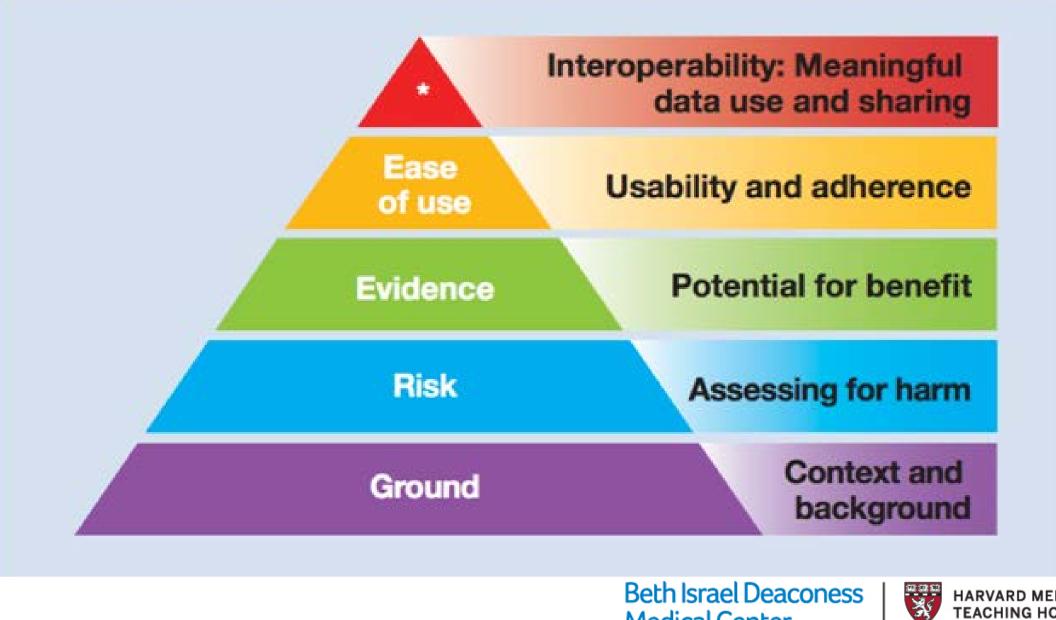






Noone and Hogan. A randomised active-controlled trial to examine the effects of an online mindfulness intervention on executive control, critical thinking and key thinking dispositions in a university student sample. BPJ Psychology. 2018





Medical Center

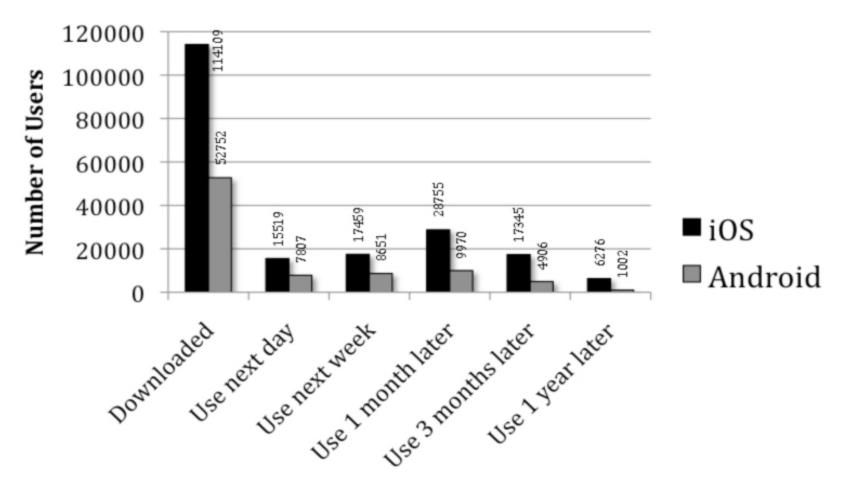
VA » Health Care » PTSD: National Center for PTSD » Public » Mobile App: PTSD Coach

PTSD: National Center for **PTSD**

→ PTSD	PUBLIC This section is for Veterans, General Public, Fan	uily s	
PTSD Home			
	Mobile App: PTSD Coach		
Public Section Home	PTSD Coach has now been downloaded over		
PTSD Overview	100,000 times in 74 countries around the world.		
Types of Trauma	The PTSD Coach app can help you learn about and		
Is it PTSD?	 manage symptoms that often occur after trauma. Features include: 		
Treatment and Coping	Reliable information on PTSD and treatments		
Other Common Problems	that work		
Family and Friends	Tools for screening and tracking your symptoms		
PTSD and Communities	Convenient, easy-to-use tools to help you		
Paginas en Espanol	handle stress symptoms		
- Apps, Videos and More	Direct links to support and help	1	
Mobile Apps	· Always with you when you need it Beth Israel Deaconess		

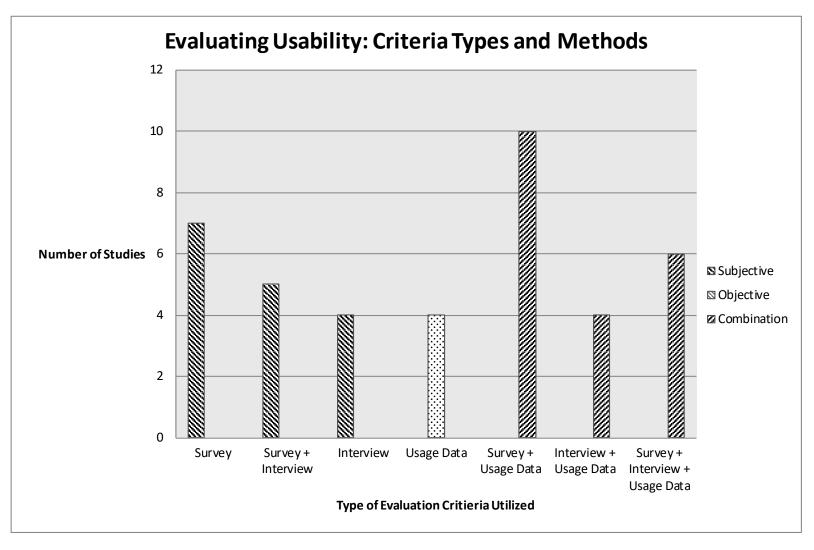
Medical Center





Owen et al. mHealth in the Wild: Using Novel Data to Examine the Reach, Use, and Impact of PTSD Coach. JMIR Mental Health. Dec 2015





Ng, Firth, and Torous. Accept and in Press with Psychiatric Services







Review

BJPsych Open (2019)

5, e15, 1-5, doi: 10.1192/bjo.2018.86

Psych

Digital mental health apps and the therapeutic alliance: initial review

Philip Henson, Hannah Wisniewski, Chris Hollis, Matcheri Keshavan and John Torous

Background

As mental healthcare expands to smartphone apps and other technologies that may offer therapeutic interventions without a therapist involved, it is important to assess the impact of non-traditional therapeutic relationships.

Aims

To determine if there were any meaningful data regarding the digital therapeutic alliance in smartphone interventions for serious mental illnesses.

Method

A literature search was conducted in four databases (PubMed, PsycINFO, Embase and Web of Science).

Results

There were five studies that discuss the therapeutic alliance when a mobile application intervention is involved in therapy. However, in none of the studies was the digital therapeutic alliance the primary outcome. The studies looked at different mental health conditions, had different duration of technology use and used different methods for assessing the therapeutic alliance.

Conclusions

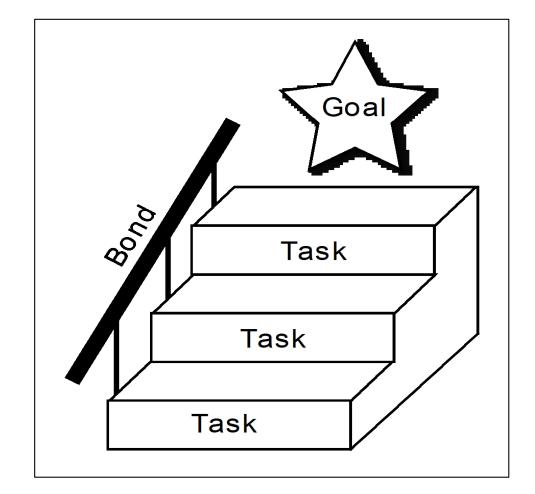
Assessing and optimising the digital therapeutic alliance holds the potential to make tools such as smartphone apps more effective and improve adherence to their use. However, the heterogeneous nature of the five studies we identified make it challenging to draw conclusions at this time. A measure is required to evaluate the digital therapeutic alliance.

Keywords

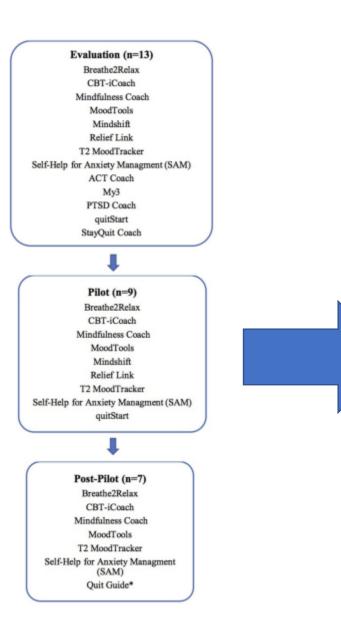
Smartphone; alliance; Individual Psychotherapy.

Copyright and usage

© The Royal College of Psychiatrists 2019. This is an Open Access article, distributed under the terms of the Creative Commons Attribution licence (http://creativecommons.org/licenses/by/ 4.0/), which permits unrestricted re-use, distribution, and reproduction in any medium, provided the original work is properly cited.







Behavioral Health Self-Help Guide

Free Apps & Websites*

The following tools have been used and selected as a result of positive feedback from CHA patients.

App:	Used for:	Recommended for:	Key Features:
Breathe2Relax	Stress & Anoiety	Learning to deep breathe with some initial guidance.	Guided breathing exercises Stress tracking tool Information about stress
Stop, Breathe & Think	Stress & Analety Mindfulness Sleep	A fun and easy intro to mindfulness practice through short, guided meditations.	 30+ free guided mindfulness meditations and yoga videos Interactive tool to track your emotional/ physical experience Note: Requires monthly subscription to unlock premium features.
ett-Help for Analety Sanagement (SAM)	Stress & Anxiety	Support in managing stress,/anxiety through mental and physical relaxation tools.	Educational, interactive and fun tools for: • Deep breathing • Muscle relaxation • Changing thinking patterns • Tracking anxiety over time Note: The "Social Cloud" feature is unmonitored; CHA does not recommend using it for this reason.
CBT-ICoach	Stress & Anxiety Mindfulness Sleep	Improving sleep through mental and physical relaxation strategies.	 Information on healthy sleep habits Guided relaxation exercises Sleep tracking tool Exercises for managing unhelpful thoughts/ emotions.
MoodTools	Mood Management	Education about depression symptoms & treatment as well as strategies for boosting mood.	 Informative TED talk videos Mood tracking tools Thought and activity logs
AIT Relaxation Tip Phone Line	Guided three-m	phone (no smartphone r inute relaxation exercise: LM (2256) for 24/7 access to	

AFFILIATED WITH

Beth Israel Desconess

Beth Israel Deaconess

Medical Center

Cambridge

Hoffman L, Benedetto E, Huang H, Grossman E, Kaluma D, Mann Z, Torous J. Augmenting Mental Health in Primary Care: A One-Year Study of Deploying Smartphone Apps in a Multi-Site Primary Care/Behavioral Health Integration Program. Frontiers in psychiatry. 2019;10:94.



Thank You



Digitalpsych.org; jtorous@bidmc.harvard.edu