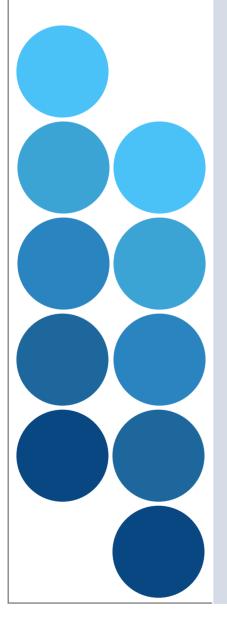


WORK-PACKAGE 4

Taking stock of emerging and new data collection technologies and their potential impact on the development of future cohort studies and the need to optimise the integration of data.

D4.2



Repository of European/international communication technologies (including social media) used in population-based cohorts, patients' cohorts, clinical trials, and exposure cohorts ordered by region

SYNergies for Cohorts in Health: integrating the Role of all Stakeholders

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EXECUTIVE SUMMARY

This report contains a concise description of the online repository of European/international technologies used in population cohorts, patients' cohorts and clinical trials oriented by region (Deliverable 4.2).

The document contains the following information:

- 1. Description of methodology of mapping population cohorts, patients' cohorts and clinical trials using social media and new communication technologies as well as overall structure and content of the repository.
- 2. An overview of the public repository of European/international technologies used in population cohorts, patients' cohorts and clinical trials.
- 3. Conclusion drawn from the search of the repository including analysis by region, type of study and type of new communication technologies.

Most of the studies that use new communication technologies were conducted in US (69 studies) and in Europe (47 studies). Mobile data collection was the technology most frequently used in the studies (in 119 studies) of which smartphones and/or smart apps were used in 112 studies and mobile phones in 42 studies. Nineteen studies used social media for data collection and among them Facebook and/or Twitter was the most popular. Geospatial technology was used in 30 studies (with GPS and remote sensing used in most of the studies) and smart sensors in 9 studies (including 5 studies using ingestible sensors). There were no studies using artificial intelligence, crowdsourcing and crowd seeding techniques or passive data collection.

The information collected under WP4 (task 4.2) will be presented during the 32nd Annual Conference of the International Society for Environmental Epidemiology (August 24-27, 2020) – the presentation title: "New communication and data collection technologies used in population and patient cohorts".





1. INTRODUCTION

The project aims to establish a sustainable European strategy for the development of the next generation of integrated population, patient and clinical trial cohorts, thereby contributing to an international strategic agenda for enhanced coordination of cohorts globally. To support the delivery of the overall objective, WP4 is centered on taking stock of the emergence of the use of digital technology for real time data collection – such as social media, wearables and smart phone sensors that will be particularly relevant for the design of future cohort studies involving patients, including clinical trials, and populations. The emergence of new communication technologies brings different new possibilities for data collection for cohorts and clinical trials. Work package 4 conducted a mapping of the different new communication technologies relevant to digital data collection (Deliverable 4.1). Task 4.2 builds on the findings of D4.1 to map existing population cohorts, patient cohorts and clinical trials, in Europe and beyond, using new and emerging data and communication technologies with the ultimate project goal to evaluate if and how they could play a role in the optimization of cohort studies.

2. METHODOLOGY

To ascertain the types of technologies that have been used and the type of studies in which they have been implemented, the following approach was taken:

- Conduct a mapping using the ascendant (e.g., electronic records, repositories, initiatives/studies provided by WP1 and partners within the project) and descendant (e.g., review of scientific papers) search approaches to map the main cohorts and clinical trials conducted in Europe as well as internationally.
- II. Request technical data for the data collection from the identified studies on: a) the study type; b) the study main objective; c) region, country; d) the design of the study/population included in the study/number of participants; e) wave number and years in which they were carried out; f) data collection source; g) institution responsible for the study/principal investigator/contact person; h) type of data collection technology.





To achieve the aim of mapping of existing population cohorts, patients' cohorts and clinical trials using social media and new communication technologies two approaches for searching strategies have been selected:

- WP1 identified initiatives of harmonization and integration studies through MEDLINE search. The results from WP 1 were evaluated to determine population cohorts, patient cohorts and clinical trials using new and emerging data communication technologies for data collection.
- II. A separate search strategy has been developed which involved the review of the manuscripts obtained in the search in MEDLINE/PUBMED/COCHRANE/EBSCO databases or reference list of selected papers or review papers.

2.1Inclusion/exclusion criteria for mapping new and emerging data and communication technologies – developed under task 4.1.

Table 1 Inclusion and exclusión criteria for mapping new and emerging data and communication technologies

Inclusion	Exclusion
Existing data collection technologies	Publications/articles/reports with a publication date before 2012
Innovative data collection technologies	Blogs
Data collection technologies from unrelated fields	Articles not in English
Active & passive data collection technologies	New communication technologies not used for data collection
Mobile and smart devices	
Personal monitoring devices	
Disease/public health surveillance technology	
Social media	
Crowdsourcing/crowd seeding	
Geospatial technology	







Inclusion	Exclusion
Technologies that enable storing, managing, and querying data and sharing data among devices and databases	

The following keywords were used:

Table 2 Keywords used for search in MEDLINE, PUBMED, COCHRANE and EBSCO databases

Related to study design	(AND) Related to new and emerging data and
	communication technologies
Cohort	Mobile data collection
Population based cohort	Smartphone
Birth cohort	Cellular phone
Patient cohort	Mobile phone
Clinical trial	Mobile apps
	Tablet
	Laptop
	Wearable device
	Smartwatch
	Digital watch
	Social media
	Social network sites
	Social platforms
	Twitter
	Facebook
	Google
	Geospatial technology
	Global navigation satellite systems
	Geographical Information System
	Remote sensing
	Smart sensors
	Ingestible electronic devices
	Bio-sensors





Related to study design	(AND) Related to new and emerging data and communication technologies
	Crowdsourcing
	Crowd seeding
	Artificial intelligence
	Passive data collection

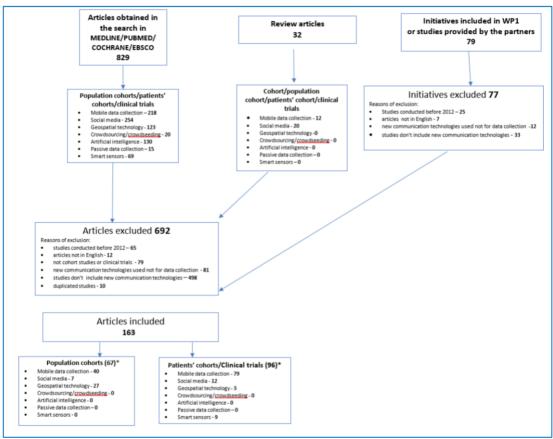
The result of the search process is presented in the diagram below. As a first step, the initiatives of harmonization and integration of health studies identified by WP1 partners and MEDLINE search under WP1 or provided by WP4 partners were evaluated for the identification of those that use new communication technologies. However, using this methodology only resulted in the identification of two studies: The Nord-Trøndelag Health Study (HUNT4) and Avon Longitudinal Study of Parents and Children (ALSPAC). Therefore, we decided to develop a separate search strategy which involved the review of the manuscripts obtained in the search in MEDLINE/PUBMED/COCHRANE/EBSCO databases or reference list of selected papers or review papers. All the studies listed according to the established keywords were evaluated by two researchers (based on the title/abstract and if needed full text of the paper). Finally, 163 studies met the inclusion criteria for that search strategy. The most important reasons for exclusion of the studies were as follows: 1) studies were conducted before 2012, 2) articles were not in English language, 3) there were no cohort studies or clinical trials, 4) new communication technologies were not used for data collection or communication, 5) studies have not included selected new communication technologies and 6) some of them were published in several papers (i.e. duplicated studies).





2.2 Results of the searching process – studies included in the public repository https://repository.synchros.eu

Figure 1 PRISMA diagram of mapping search results



^{*}In one study more than one new communication technologies can be used.

3. REPOSITORY OF THE STUDIES USING NEW COMMUNICATION TECHNOLOGIES

The repository itself (https://repository.synchros.eu/) has been developed under the WP 1 (D1.2). It offers a public collection of information about the main European and international efforts to harmonize and integrate cohort data including details about harmonization and integration methodology, communication technologies used in cohorts and exposure and health risk cohorts. It represents the digital platform of compiled European and international initiatives and cohorts mapped by WP1, WP2 and WP4 of the SYNCHROS project accessible for the public. The SYNCHROS repository has been developed with the objective of having a long-term solution that can continuously be enriched, even after the project has ended. The final studies identified from







the search conducted, have been mapped in the repository. The repository contains 163 studies (population cohorts, patients' cohorts and clinical trials) that use new communication technologies.

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Figure 2 SYNCHROS Repository – overview of cohort studies

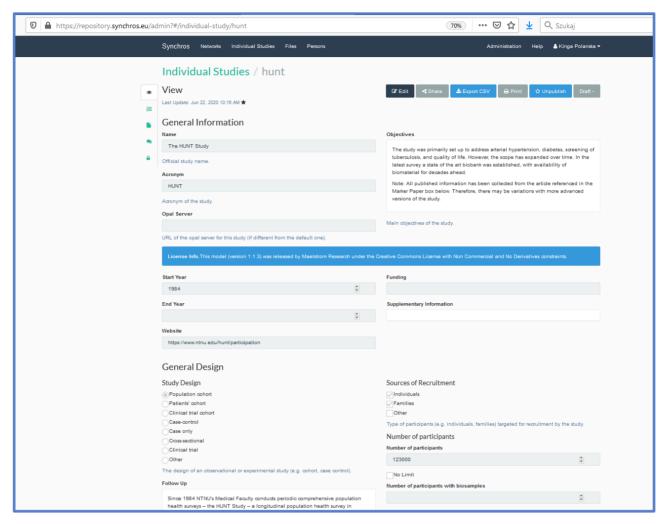
For each study included in the repository the following information has been added:

1) General information: study name and acronym (if available), study objectives, study design and funding sources.





Figure 3 – SYNCHROS repository – data of individual study



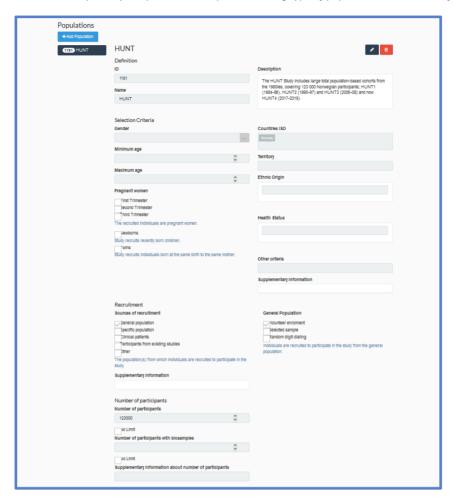
2) Population description including type of population and number of participants.







Figure 4 SYNCHROS repository - Population description including type of population and number of participants



3) Data collection event describing each wave of the study and new communication technologies used in the study.

Figure 5 SYNCHROS repository - description of data collection event



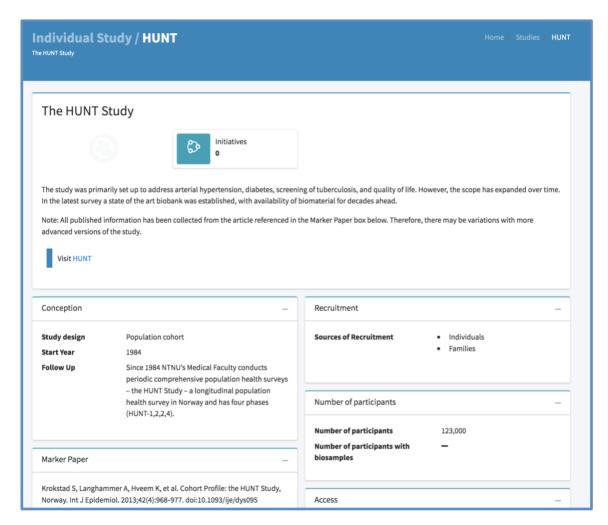






All entered studies (163 studies using new communication technologies) are available to the public (https://repository.synchros.eu) in the searchable repository. The detailed information for each individual study can be generated as seen in the example presented below:

Figure 6 SYNCHROS Repository – detailed information of individual studies

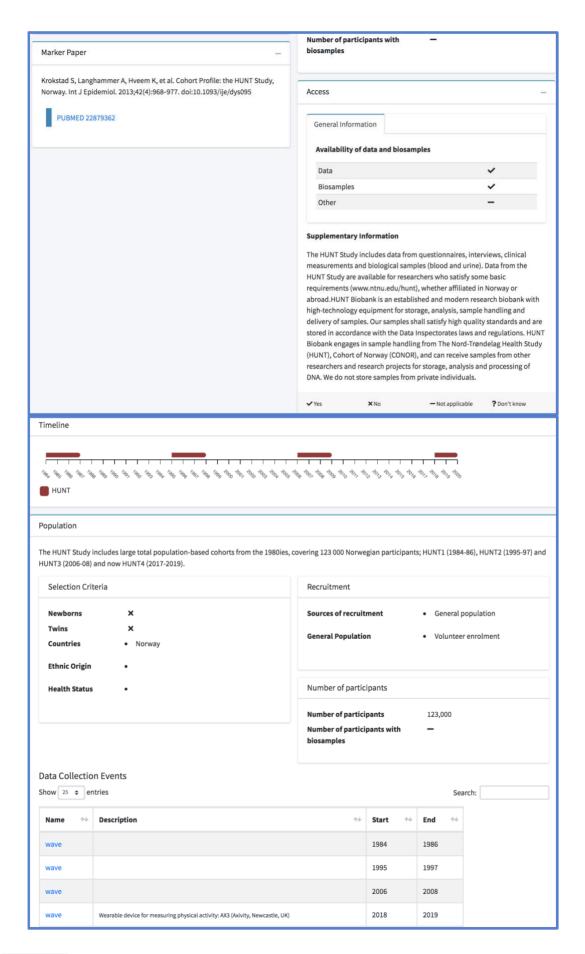


^{*}Image continues in below















In addition, the search can be carried out by selecting or writing the desired initiative/study properties through the left menu of the general search page. This can be done by country/region, population, type of study and type of new communication technologies used in the studies.

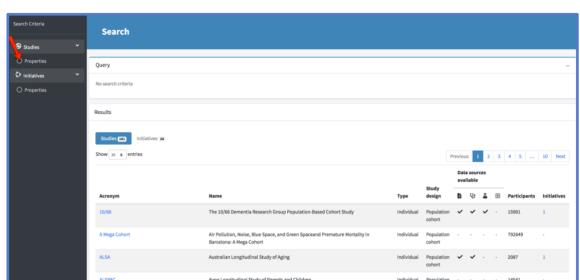


Figure 7 SYNCHROS Repository – Search engine





4. EUROPEAN/INTERNATIONAL POPULATION COHORTS, PATIENTS' COHORTS AND CLINICAL TRIALS USING NEW COMMUNICATION TECHNOLOGIES

Our findings show that most of the studies that use new communication technologies were conducted in the US (69 studies) and in Europe (47 studies). Looking at the studies conducted in Europe most of them used mobile data collection, geospatial technology and smart sensors. Some of the studies are based on international collaboration.

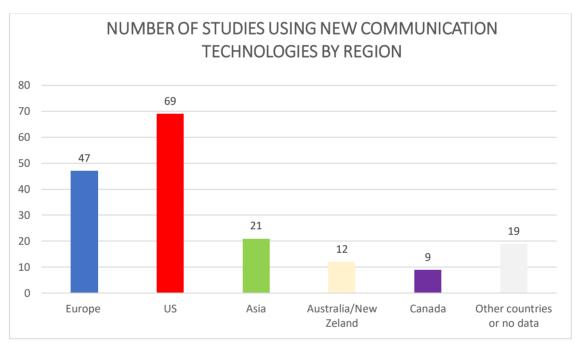


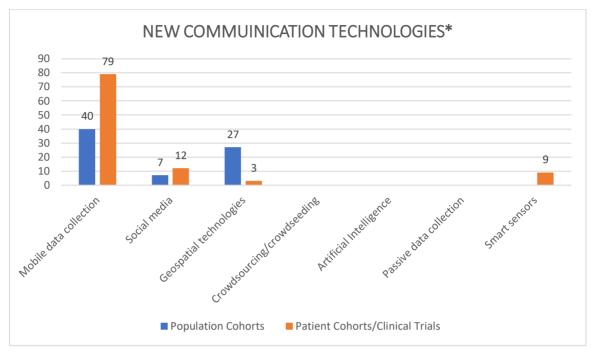
Figure 8 – Number of identified studies using new communication technologies by region

Mobile data collection was the technology that was most frequently used in the studies (in 119 studies) and among this type of technology smartphones and/or smart apps were used in 112 studies and mobile phones in 42 studies (the other studies collect the data using smartwatches and wearables or tablets/laptops). Nineteen studies used social media for data collection and among them Facebook (15 studies) or Twitter (8 studies) were the most popular. Geospatial technology was used in 30 studies (with GPS and remote sensing used in most of the studies) and smart sensors in 9 studies (including 5 studies using ingestible sensors). There were no studies using artificial intelligence, crowdsourcing and crowd seeding techniques or passive data collection.





Figure 9 Number of identified studies that use new communication technologies by type of technology



^{*}Number of studies in which new communication technologies were used are presented (in one study more than one new communication technologies can be used).

5. LIMITATIONS

While the methodology we employed for the search adopted was comprehensive, we are aware that our finding is not exhaustive. There may be other cohorts/ clinical trials conducted that may have used different new communication technologies that are yet to be published.