

Biomarkers of Aging Conference
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[¹ Quality of Life Technologies Lab, ² Cognitive Aging Lab], University of Geneva, Switzerland



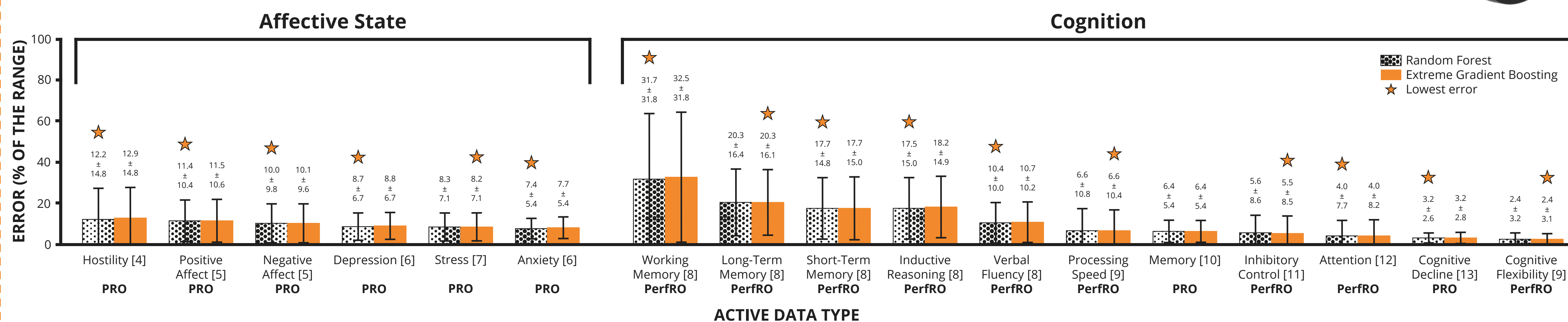
This poster presents the **predicability of daily cognitive performance fluctuations**, using only passively and ubiquitously collected TechROs data.

Body mass index: between 18 and 41, mean of 24.730 (± 4.260).

We have standardized active and passive data values.

Outcomes being collected, following the Wilson and Cleary [2] model

Protocol: bit.ly/Providemus2024Protocol



PROs are validated questionnaires. PerfROs are cognitive games/tasks. Multiple linear regression, ridge regression, KNN, RF, and XGB were excluded for poor performance.

ACTIVE DATA TYPE	PASSIVE FEATURE (top 3)	IMPORTANCE
Anxiety (RF)	Wake-up duration (M)	7.3%
	Wakefulness after sleep onset (M)	6.8%
	Sleep latency (CV)	6.4%
Stress (XGB)	Sleep minimum heart rate (CV)	10.6%
	Caloric expenditure (Mdn)	8.9%
	24-hours max. heart rate (CV)	8.0%
Cognitive Flexibility (XGB)	Sleep maximum heart rate (CV)	11.9%
	Caloric expenditure (Mdn)	10.1%
	Sleep minimum heart rate (M)	9.7%
Cognitive Decline (RF)	Wake-up duration (CV)	7.0%
	Caloric expenditure (Amp)	6.9%
	Wakefulness after sleep onset (Amp)	6.2%

Future research should **focus on using the complete time series of data** instead of derived features.

QoLna
Technologies



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REFERENCES

- REFERENCES**
- [1] Alzheimer's Association, 2013 Alzheimer's disease facts and figures, 'Alzheimer's and Dementia, 2013'.
 - [2] Wilson, L.B. and Cleary, P.D., 'Linking Clinical Variables With Health-Related Quality of Life: A Conceptual Model of Patient Outcomes', *JAMA: The Journal of the American Medical Association*, 1995, 274, 1359-1362.
 - [3] A. Beroccal et al., 'MQOL lab: Step-by-step creation of a flexible platform to conduct studies using interactive, mobile, wearable and ubiquitous devices', *Procedia Computer Science*, 2020.
 - [4] A.H. Buss and A. Durkee, 'An inventory for assessing different kinds of hostility', *Journal of Consulting Psychology*, 1957.
 - [5] D. Watson et al., 'Development and Validation of Brief Measures of Positive and Negative Affect: The PANAS Scales', *Journal of Personality and Social Psychology*, 1988.
 - [6] A. Diamond and R. D. Smith, 'The Hospital Anxiety and Depression Scale', *Acta Psychiatrica Scandinavica*, 1983.
 - [7] S. Cohen, T. Kamarck, and R. Mermelstein, 'A global measure of perceived stress', *Journal of health and social behavior*, 1983.
 - [8] A. Jile et al., 'The cognitive telephone screening instrument (COGTEL): A brief, reliable, and valid tool for capturing interindividual differences in cognitive functioning in epidemiological and aging studies', *Dementia and Geriatric Cognitive Disorders Extra*, 2017.
 - [9] T. N. Tombaugh, 'Trail Making Test A and B: Normative data stratified by age and education', *Archives of Clinical Neuropsychology*, 2004.
 - [10] G. Smith et al., 'Prospective and retrospective memory in normal aging and dementia: A questionnaire study', *Memory*, 2000.
 - [11] A. B. Erikson and C. W. Erikson, 'Effects of notice letters upon the identification of a target letter in a nonsearch task', *Perception & Psychophysics*, 1974.
 - [12] L. Deary et al., 'A brief, easy-to-use, computer-based measure of everyday memory: The everyday memory questionnaire', *Behavioral Assessment Review*, 2001.
 - [13] A. B. F. J. and P. A. Jacobo, 'The Informant Questionnaire on Cognitive Decline in the Elderly (IQCODE): socio-demographic correlates, reliability, validity and some norms', *Psychological Medicine*, 1989.