

# A New "Gold Standard"? How Digital Health Technologies Can Be Used to Monitor Patient Progress

3 MIN READ

*Technology holds the promise of helping clinicians monitor, and treat, rheumatoid arthritis and other progressive diseases.*

Rheumatoid arthritis (RA) – an autoimmune disorder characterized by muscle pain and joint swelling – presents serious challenges to treating physicians. Because the course of RA can be unpredictable, monitoring a patient's symptoms and response to treatment is key. The "gold standard" for this kind of observation has typically been in-person consultation with a clinician.

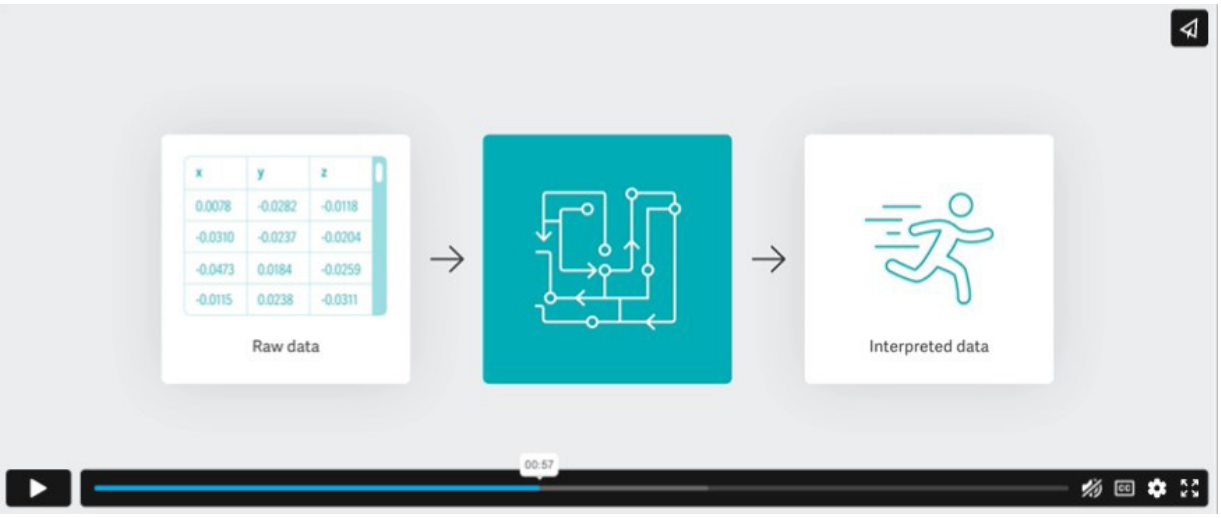
But this model has a serious drawback: The infrequency of in-person visits may not provide a complete picture of the patient's health. For that reason, many clinicians supplement this observational method with patient-reported outcomes (PROs) – responses to questions and surveys about factors such as symptom severity, pain level, and joint stiffness.

PROs, however, have their own limitations. They are subjective and prone to recall bias, making the data hard to generalize or draw conclusions from. If the information gathered from PROs could be complemented or supported by objective data about a patient's condition, such a scenario could provide a dramatically more accurate and efficient way to observe the patient's status and quality of life.

## Using Mobile Devices to Monitor Progress

A team from Analysis Group partnered with GSK to explore the capabilities of digital health technologies (DHTs) to monitor RA patients. Specifically, the study tested whether data gathered from mobile devices worn or carried by test subjects could accurately distinguish between a group of RA patients and a control group.

As shown in the video below, the team found that DHTs can measure the progress of a disease like RA and help fill in the gaps from other data sources when gauging the effectiveness of treatments.




*To learn more about this study, contact* ***Mei Sheng Duh***, ***Mihran Yenikomshian***, *or* ***Christopher Llop***. ■