How online research opens new doors for computational psychiatry

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Trinity College Dublin

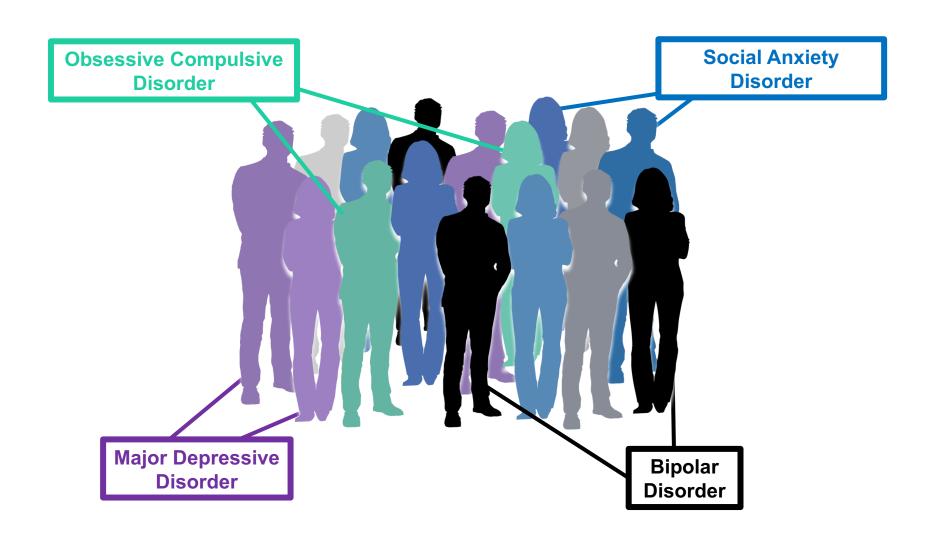
www.gillanlab.com @clairegillanTCD

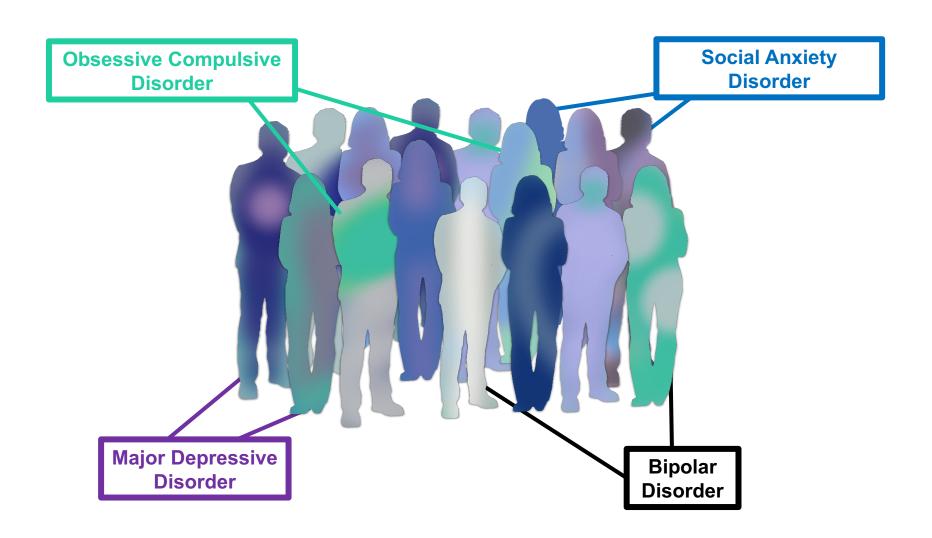
Outline

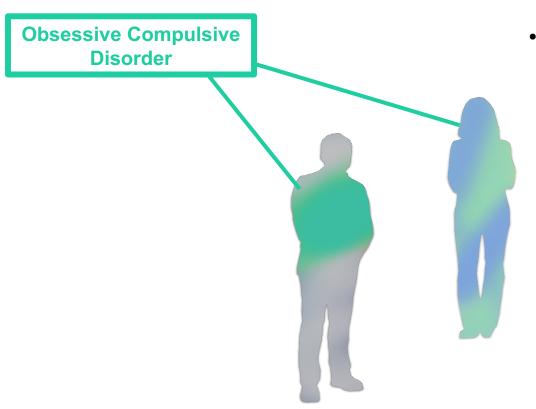
- Why take psychiatry research online?
- Online methods
 - Crowdsourcing
 - Smartphones
 - Scraping
 - Proxies for physiology
- Characteristics of online samples
 - Are they representative?
 - o Are mental health data valid?
 - Are the data of acceptable quality?
 - Are findings relevant for diagnosed patients?

Spoiler: yes.

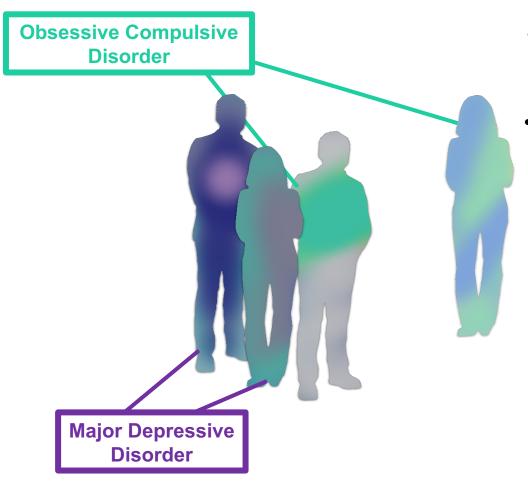
Why take psychiatry research online?







Patients are heterogeneous within-disorder



- Patients are heterogeneous within-disorder
- Patients are similar across-disorder

The solution: redraw the lines

Symptom Dimension 1

Symptom Dimension 2

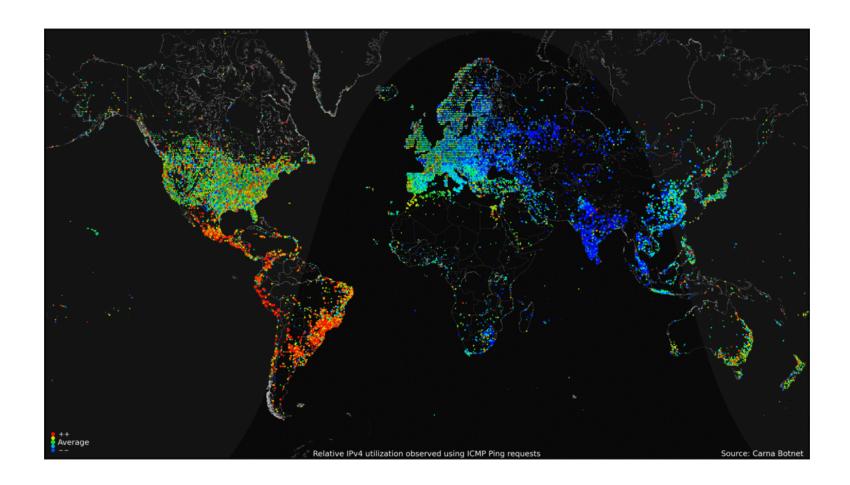
Symptom Dimension 3



Treatment Dimensions? Brain Dimensions? Genetic Dimensions?

Cognitive Dimensions? Environmental Dimensions?

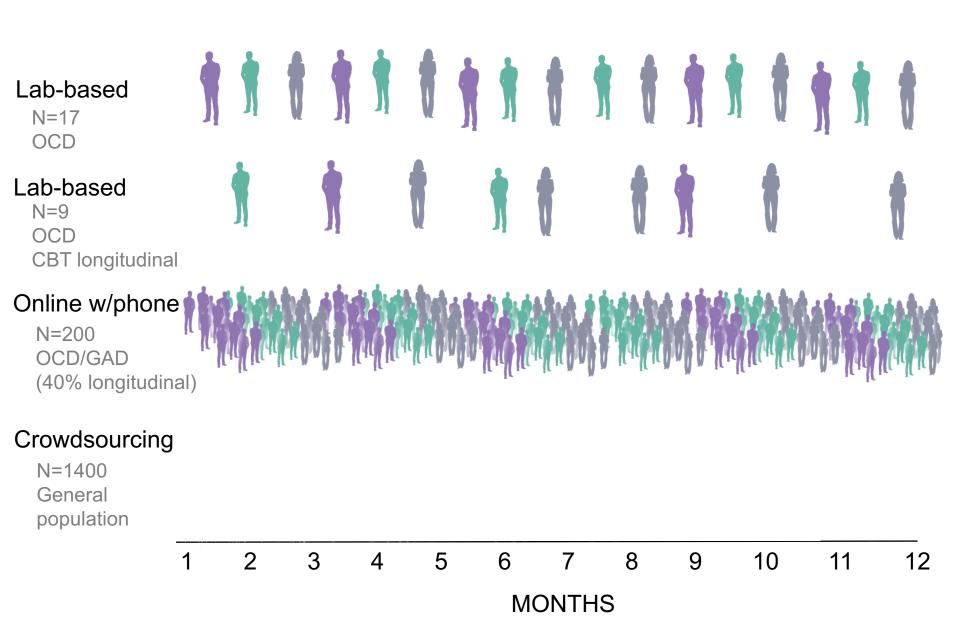
To do this well, we need big samples.



People living in Dublin: 500,000

People using the Internet: 3,200,000,000

Why you should think about going online

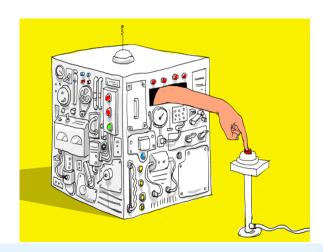


Why you should think about going online

- Sample size (>3.2 billion people use the internet)
- Access select populations (geography, age, race, clinical condition, socio-economic status, etc.)
- Speed (hundreds/thousands of subjects per day)
- Low cost (but it depends)
- Anonymous participation (sensitive populations)
- Reproducibility/standardization (same test, different lab)
- Exploratory vs. confirmatory research

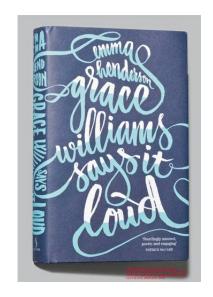


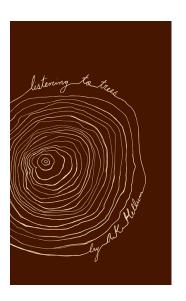




There are things that humans can do better than computers

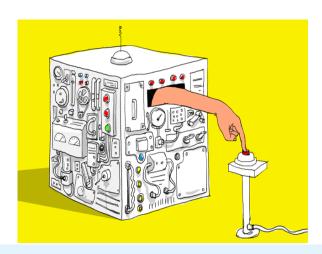
1. Internal Amazon Problems: What is the title of this book?



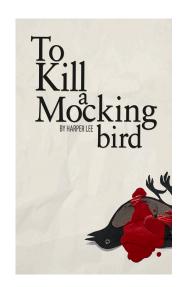


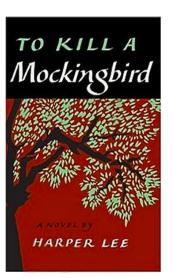


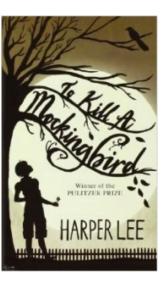
- 1. Internal Amazon Problems: What is the title of this book?
- 2. Internal Market Research *Which cover do you prefer?*



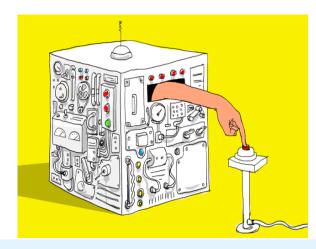
There are things that humans can do better than computers











There are things that humans can do better than computers

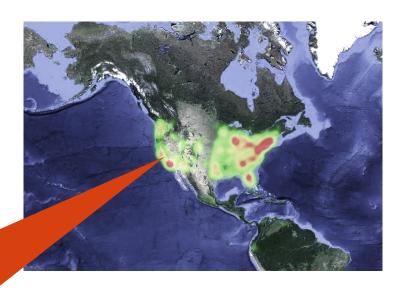
- 1. Internal Amazon Problems: What is the title of this book?
- 2. Internal Market Research

 Which cover do you prefer?
- 3. Opens to everyone:

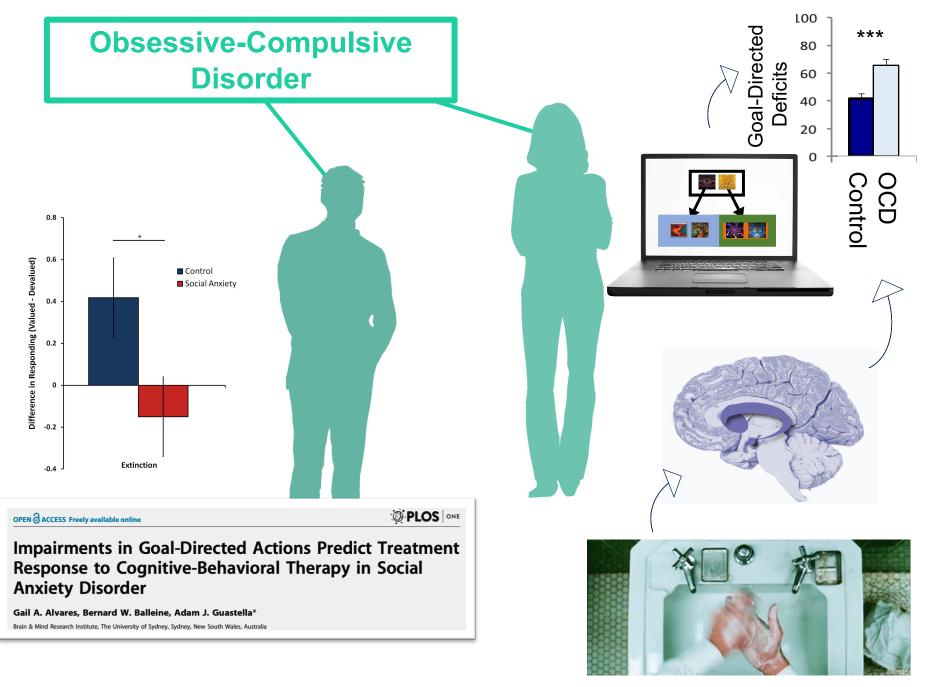
 Transcribing audio files, writing descriptions of complex scenes, answering surveys, ranking products and full-scale psychology experiments

Conduct psychology research with sophisticated, interactive cognitive tests



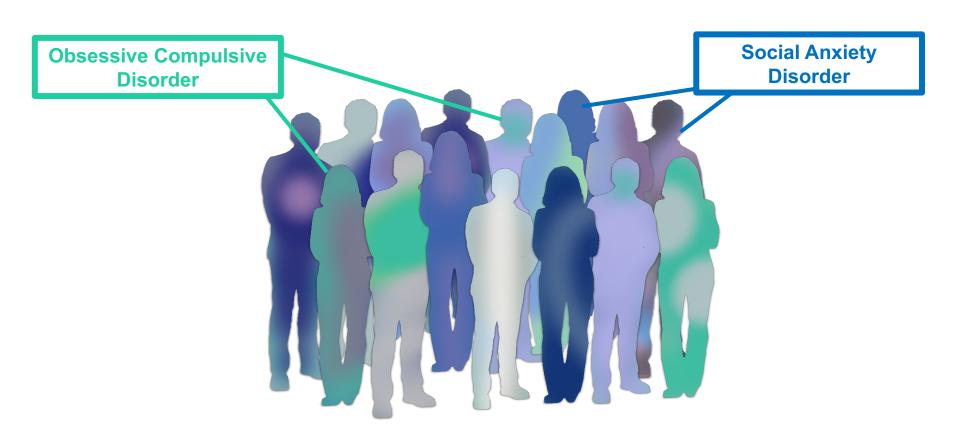


- Recruit from this global workforce at an unprecedented rate.
 e.g. N>1400 in 10 days
- Reproduces classic psychology effects



Gillan et al., American Journal of Psychiatry, 2011

Are goal-directed deficits characteristic of a trans-diagnostic dimension?



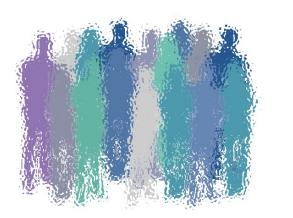
Symptom Dimension 1

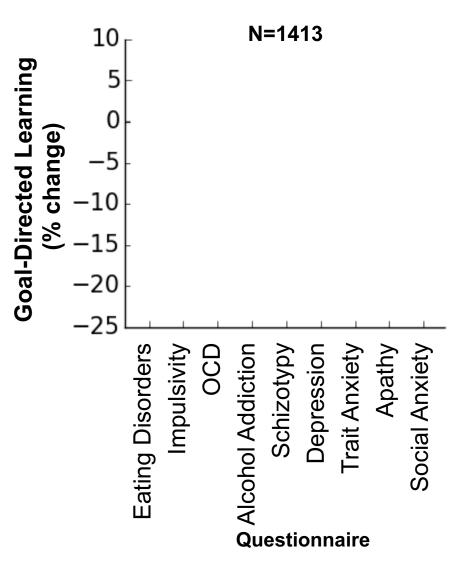
Symptom Dimension 2

Symptom Dimension 3

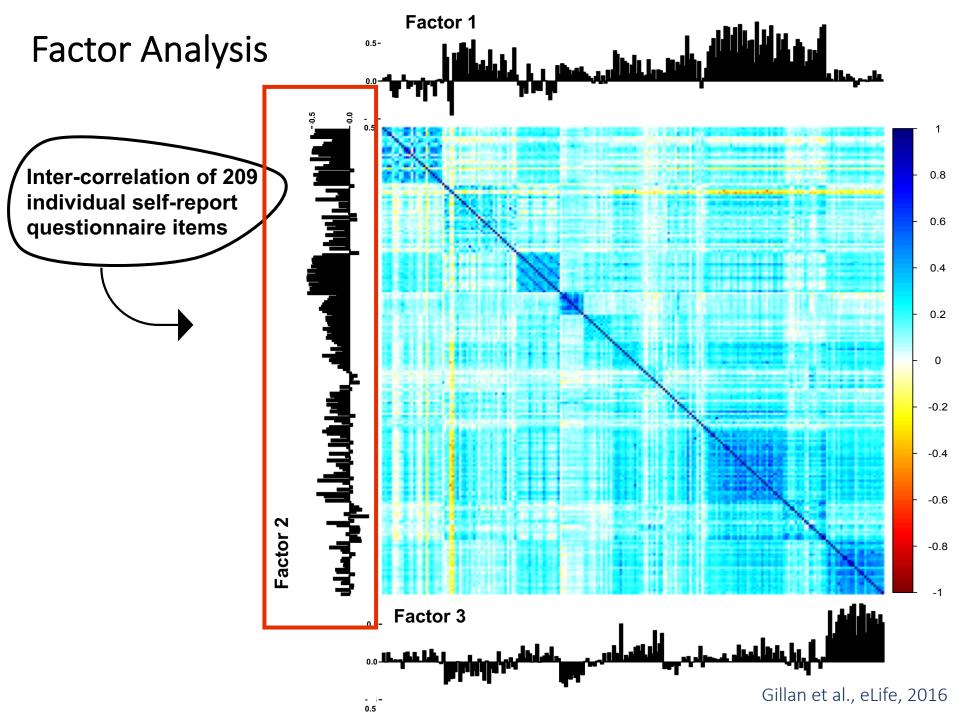
Are goal-directed deficits characteristic of a trans-diagnostic dimension?

But... these scores reflect overlapping constructs

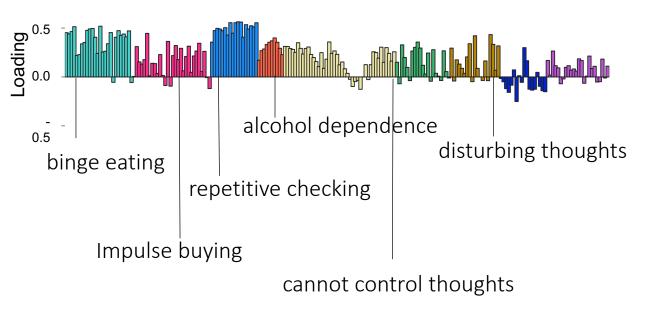




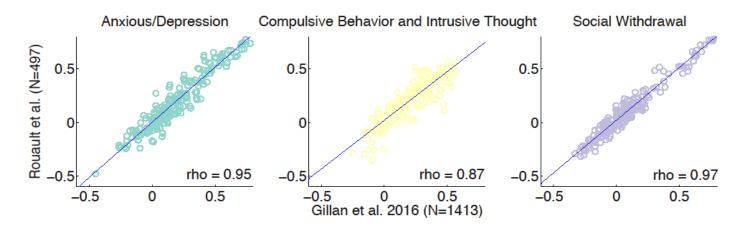




Factor 2: "Compulsive Behaviour and Intrusive Thought"

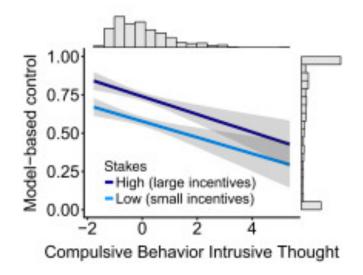


The factor structure can be independently reproduced

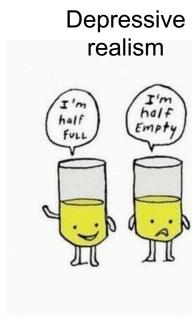


Rouault*, Seow*, et al., Biological Psychiatry, 2018

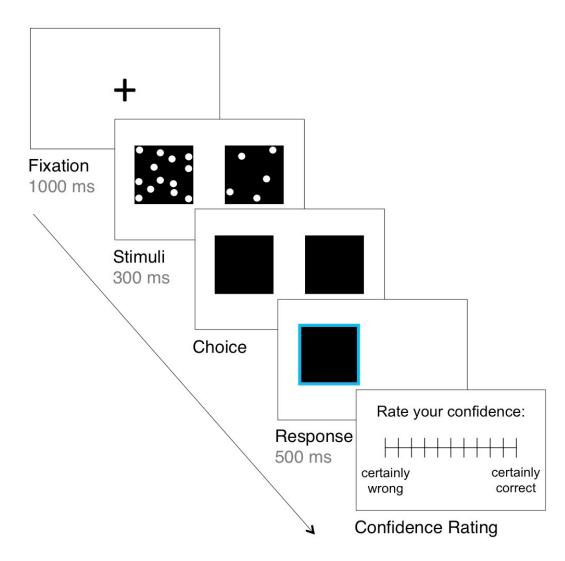
The association with goal-directed planning replicates



Can we use this method to study metacognition in anxious-depression?

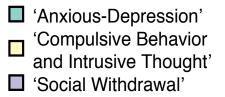


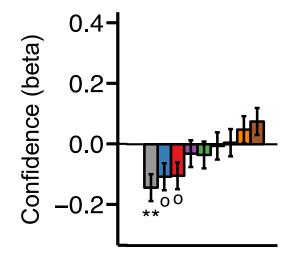


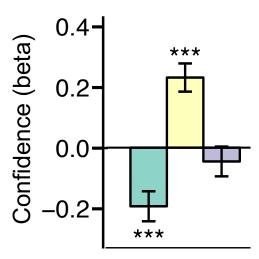


Is confidence expressed transdiagnostically?











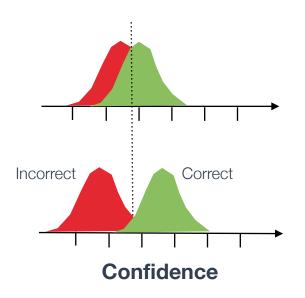
Using confidence to unpack the role of metacognition in anxious-depression

Metacognitive bias over/under-confidence

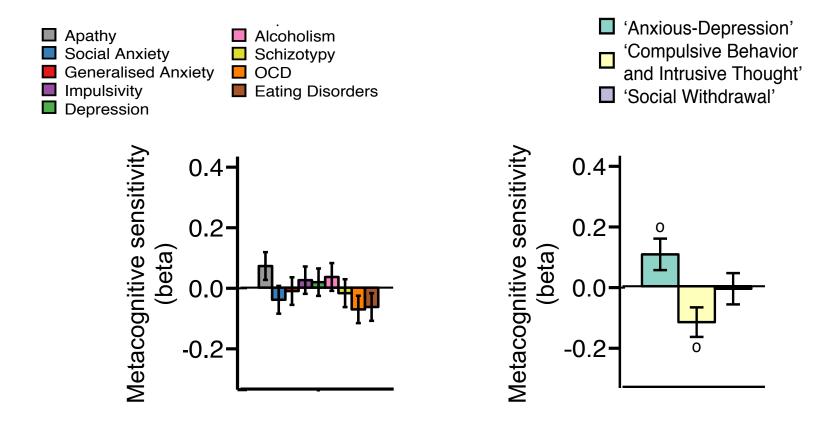
Confidence

Metacognitive sensitivity

"correct about being correct"



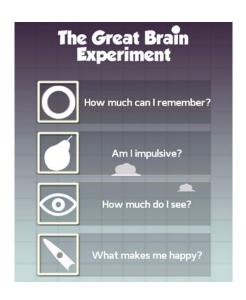
Metacognitive Sensitivity in anxious-depression



Smartphones



Smartphones for Large-Scale Citizen Science







The model

- Gamified versions of cognitive tests
- Play as much as you like

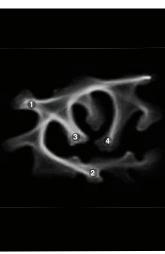
What you get

- Really large samples 1000s
- Repeated within-subject, longitudinal assessment

Smartphones for Science



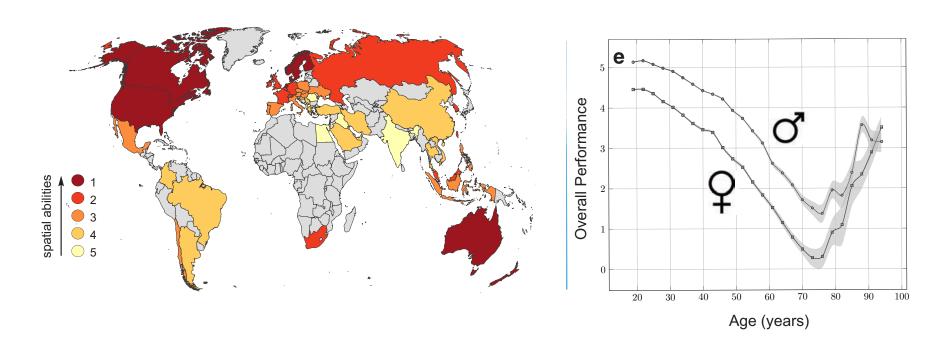






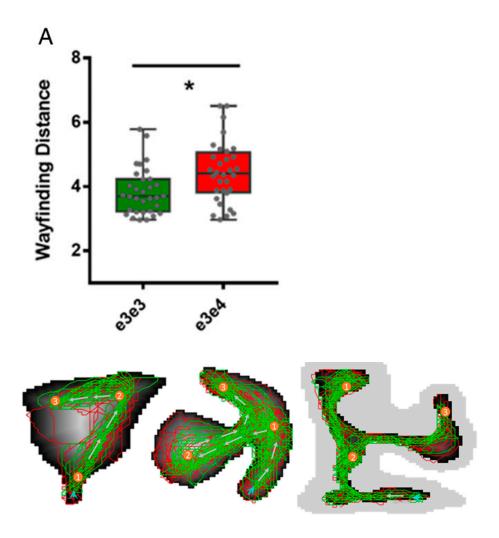
4.3 million downloads!

Spatial navigation differences across country and sex

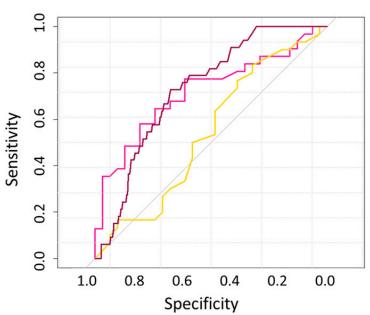


But this difference is partially explained by the Gender Gap in each country (and GDP)

Big Data samples can rapidly generate norms.



Spatial navigation performs better than test of episodic memory



Scraping



Scraping social media

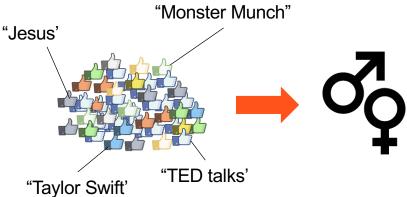
What do your s say about you?

Scared? You should be.

Study Design

- Acquired consent
- Psychometric test scores (e.g. IQ)
- Survey information (e.g. democrat?)
- Data from profile, ~170 Facebook Likes per person



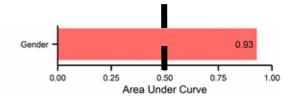


Scraping social media

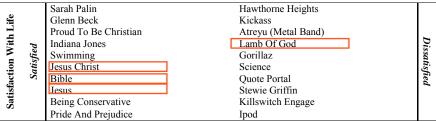
| |

This information is in many cases publically available.

When not, it is available for purchase from Facebook

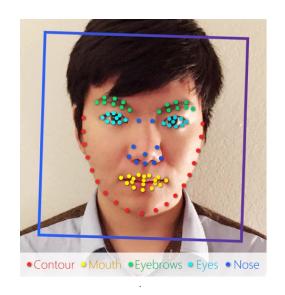






Is there a wrong way to do this?

Scraping without consent



- Composite heterosexual faces

 Composite gay faces

 Composite gay faces
- With 1 image per person, AUC = .81
- With 5 images, AUC > .90
- Algorithm outperformed humans (N=1000)

Gender atypicality predicts gay and lesbian status

Backlash

GLAAD and HRC call on Stanford University & responsible media to debunk dangerous & flawed report claiming to identify LGBTQ people through facial recognition technology

Why Stanford Researchers Tried to Create a 'Gaydar' Machine

The New York Times

THE A.I. "GAYDAR" STUDY AND THE REAL DANGERS OF BIG DATA

NEW YORKER

"participants"

(the people whose images were used)

were not consented

Biology vs Cultural Norms



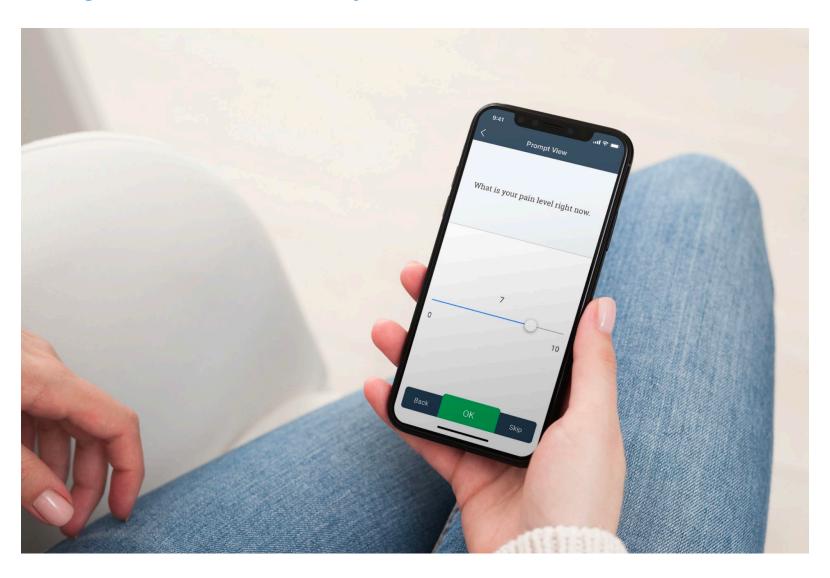




Do algorithms reveal sexual orientation or just expose our stereotypes?

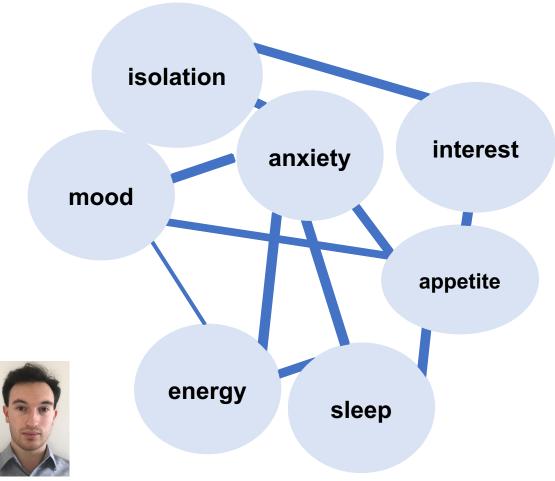
Margaret Mitchell Blaise Aguera y Arcas Alex Todorov

Scraping Social Media as an alternative to Ecological Momentary Assessment



Scraping Social Media for Ecological Momentary

Assessment in Psychiatry

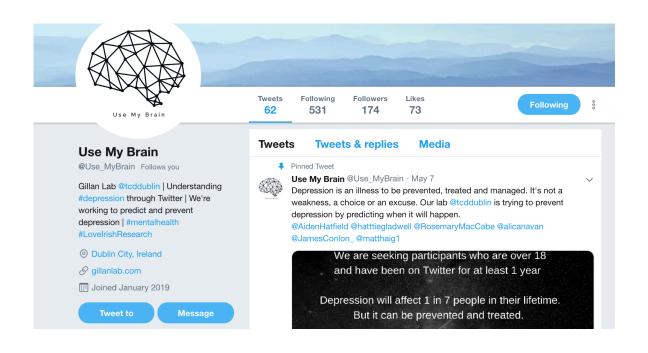




- Burdensome
- Impossible to do over long time scales

Can we approximate this using ?

Scraping Social Media for Ecological Momentary Assessment in Psychiatry

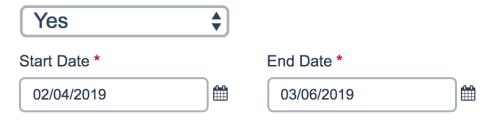


Advertising exclusively through twitter

- soliciting mental health 'influencer' or organisation retweets

~5 minute survey

Within the past year, have you had an episode of major depression? *



Scraping Social Media for Ecological Momentary Assessment in Psychiatry

Sentiment Analysis

- LIWC is a dictionary of ~12,000 words with 90 different output variables
 - linguistic characteristics (e.g. articles and pronouns)
 - psychological constructs (e.g. sadness and positive emotions)
 - general text information (e.g. punctuation and word count)
- VADER was built specifically for use with social media text
 - Emojis
 - Punctuation (!!!)
 - Capitalization (SAD)
 - degree modifiers (really, totally, very, etc)













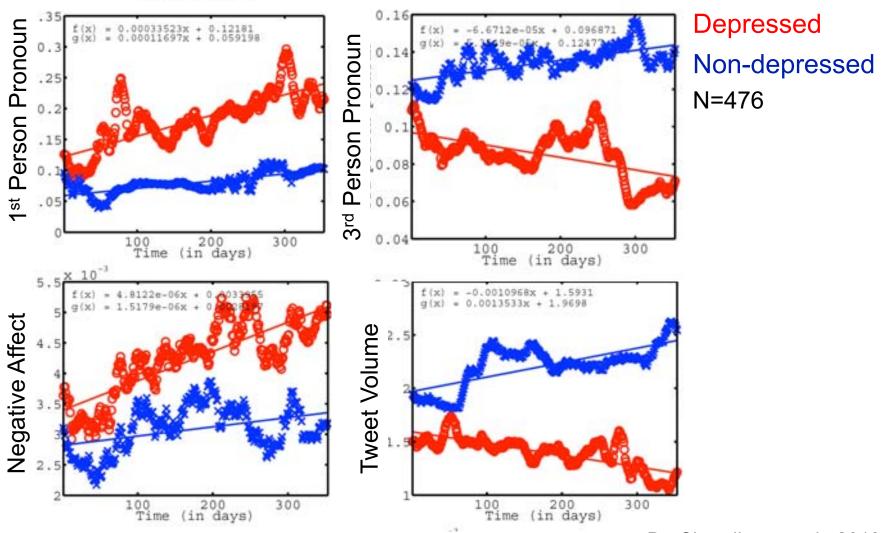




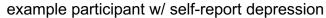


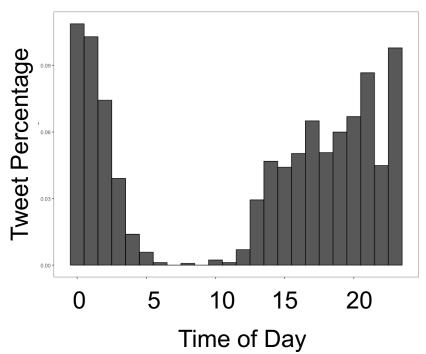
Sean Kelley

Scraping Social Media for Ecological Momentary Assessment in Psychiatry



Tweet timings as a proxy for sleep

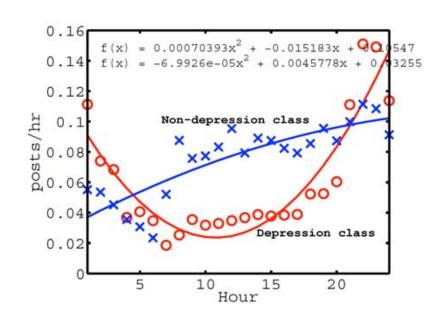






sleep





Proxies for Physiology: Eye-Tracking



Proxies for Physiology: Eye-Tracking

Proof of principle:

What video features attract the most attention in babies?

Method

- Subjects sat on parents lap
- Initial video used to determine eligibility
- Then if eligible, babies were asked to watch different videos.
- Once complete, blind raters coded videos for looking time by 'video features'



Key Findings:

 faces, camera zooms and rhyming and singing increased infant attention.

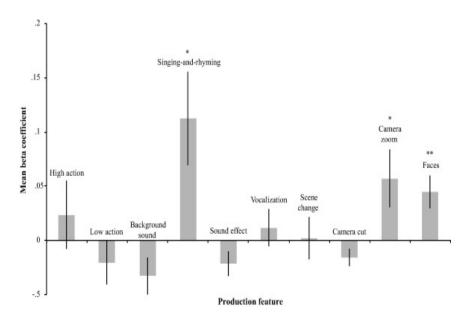
Proxies for Physiology: Eye-Tracking

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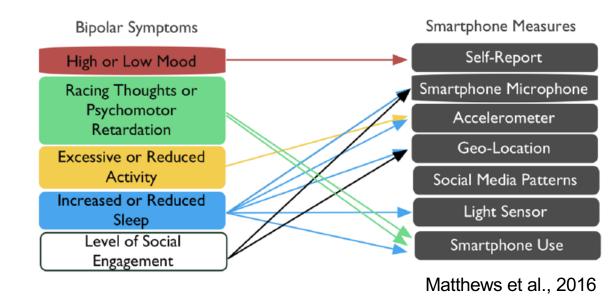
Key Findings:

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Proxies for Physiology: Phone Sensor Data



- GPS receiver
- Microphone
- Camera
- Pedometer
- Heart rate
- Text messages
- Social networking
- Typing speed
- Word-use complexity
- Time using phone
- ..







Outline

- Why take psychiatry research online?
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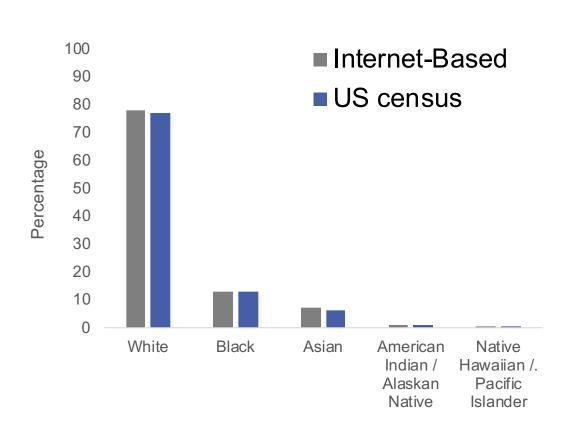
Spoiler: yes.

Characteristics of Online Samples



Are Internet based samples representative?

Race





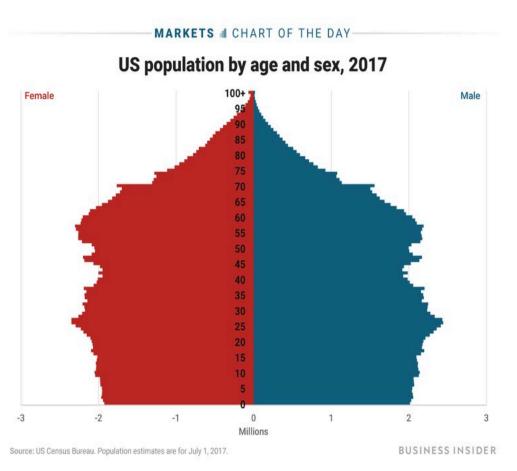
M-Turk is more racially diverse than regular online sample and college samples

Buhrmester at al., 2012

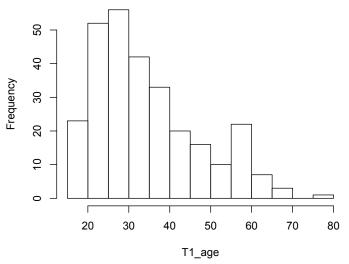
¹ Gillan et al., under review

Are Internet based samples representative?

Age



Generic Internet-based (USA) OCD/GAD patients (N=285)



Gillan et al., under review

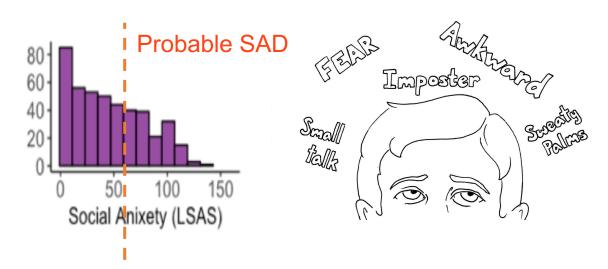
Are there differences in mental health?

 The prevalence of depression among participants on Mechanical Turk was consistent with prevalence in the general population

Shapiro et al., 2013; Kessler, Chiu, Demler, & Walters, 2005

But... social anxiety is up to 7x more prevalent on M-Turk.

Shapiro et al., 2013, Gillan et al., 2016; Seow & Gillan, in prep; Hunter et al., BiorXiv



Are people who they say they are? Overwhelmingly, YES!

- Excellent **test-retest reliability** for self-report depression, r=.87 (Shapiro et al., 2013)
- We can reproduce associations with mental health found in in-person samples
- Few get caught out with trap questions (e.g. <1%, Gillan et al., eLife 2016)
- A more elaborate malingering questionnaire caught just 10/530 (Shapiro et al., 2013)
- You can confirm location from IP address (but think about GDPR)
- Mechanical Turk allows you to select for certain demographics (age, gender, etc.)

Don't incentivize people to lie

Are there differences in data quality?

Unsupervised participants are **less likely** to pay attention to instructions

Oppenheimer, Meyvis, & Davidenko, 2009

Are M-Turk subjects worse than supervised students?

"Research in decision making shows that people, when making decisions and answering questions, prefer not to pay attention and minimize their effort as much as possible. Some studies show that over 50% of people don't carefully read questions. If you are reading this question and have read all the other questions, please select the box marked 'other' and type 'Decision Making' in the box below. Do not select "predictions of your own behavior." Thank you for participating and taking the time to read through the questions carefully!

What was this study about?

A Predictions of your own behavior

B Predictions of your friends' behavior

C Political preferences

D Other _____

66.2% versus 88.5%, p < .001

Goodman, Cryder, Cheema, 2013

Are there differences in data quality?

YES. How big of a problem is this?

<u>Its no biggie (personal view):</u> Increased sample size mitigates increased loss of statistical power. E.g. in Gillan et al., eLife 2016

But to help things: establish study-specific a priori exclusion criteria e.g. implausibly fast RTs, missing trials, 'catch' questions, comprehension test

Save yourself some money by requiring basic performance to play!

Data quality solutions

COMPREHENSION TEST

- Include a quiz on the basics of the task instructions
- If subjects do not pass, they must repeat instructions until they do
- This deals with bots
- This deal with people just hammering the keys randomly
 - Crump et al., 2013 found this improved the issue, but didn't resolve it fully.
 - We noted similar issues in our own work, and found the quiz greatly improved the data quality. Again, doesn't resolve it fully.

Internet based testing is not a panacea.

Sometimes you need to have control over the testing environment

Are addictive traits linked to problems with response inhibition?... Acute intoxication might confound the data

- Can people accurately self report on their mental status? (in some cases, e.g. schizophrenia, not always.)
- Is there an incentive to lie (e.g. monetary)?
- Are the findings relevant to 'real patients'?



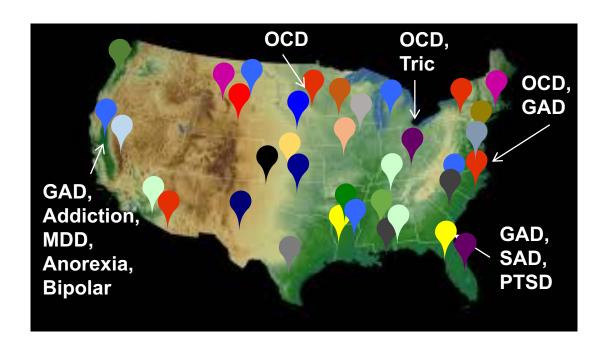
Are findings applicable to diagnosed patients?



All-Comers Internet-Based



Internet-Based Clinical Collaboration



OCD (N=110) - OCD+GAD (N=92) - GAD (N=83)









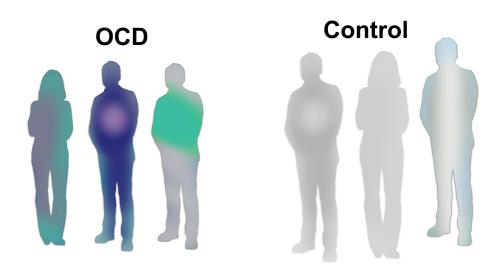


Internet-Based Clinical Collaboration

1. Can we reproduce the *dimensional* association between goal-directed planning and compulsivity in <u>diagnosed</u> patient sample?

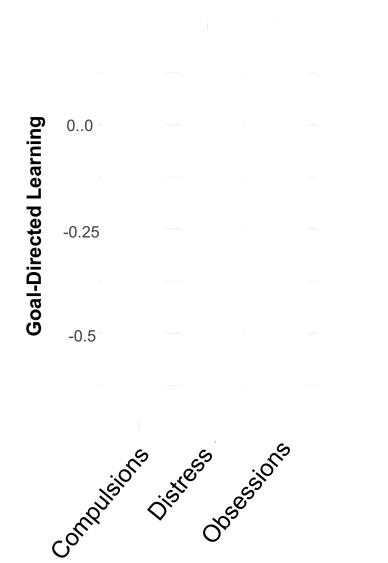
2. What fits the cognitive data better... Dimension or

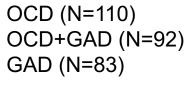
Diagnosis?*

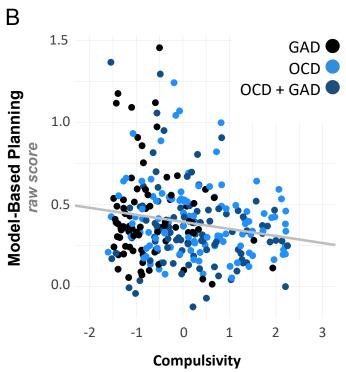


*caveat: we use clinical controls not 'healthy controls'

Are findings applicable to diagnosed patients?



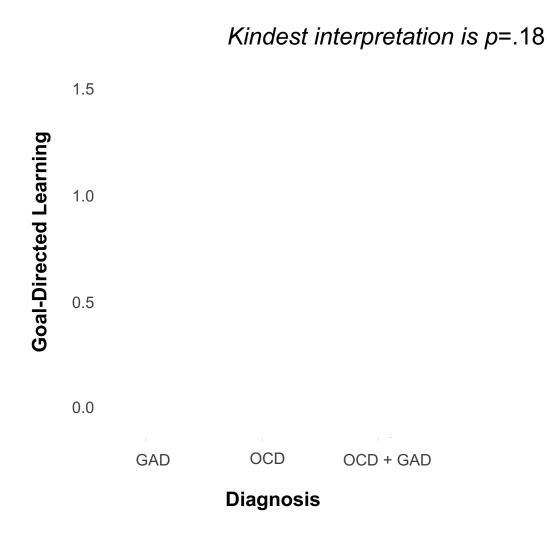


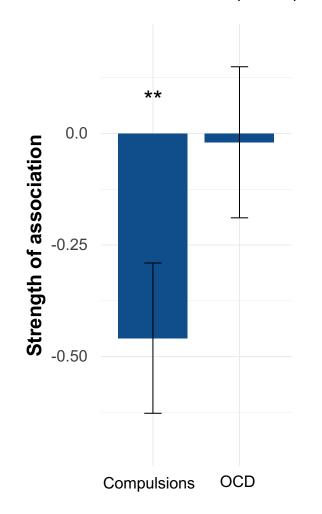


*Replicated after average of 413 days in N=110

How informative is the diagnosis itself?

OCD (N=110) OCD+GAD (N=92) GAD (N=83)





The problem: **DSM disorders are the** "ground-truth" for research

Disorder

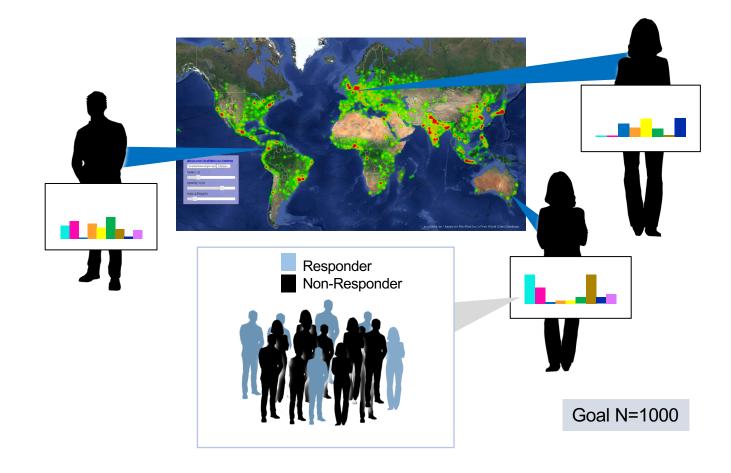
Social Anxiety Obsessive Compulsive Disorder Disorder We need prediction and we need meaningful clinical outcomes **Major Depressive Bipolar**

Disorder

Internet-Based Treatment Prediction



Can we use Internet-based methods to predict and understand treatment response?



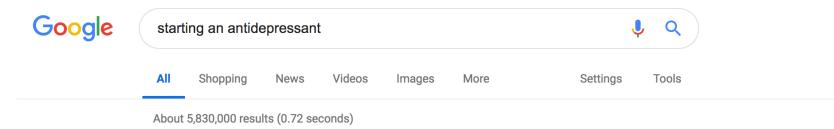


Kevin Lynch

Internet-Based Treatment Prediction



Can we use Internet-based methods to predict and understand treatment response?



Starting Antidepressant? | Earn over \$60 | Help us change mental health

(Ad) www.antidepressantresearch.com/Trinity_College/Dublin ▼

Starting antidepressant in +/- 2 days? Participate in paid, anonymous, online research. Help us improve mental health treatment for everyone. Have you just started taking SSRI's. Paid Research. Participate From Home. Help Us Help Others. Internet-Based Research.







Final take home message.

Internet-based research is awesome.

- large samples
- rare populations
- longitudinal, predictive research
- sometimes frictionless participation
- exploratory and confirmatory

QUESTIONS?

Thank You

Trinity College Dublin

Tricia Seow
Andrew Pringle
Kevin Lynch
Eoghan Gallagher
Sean Kelley







Multi-Site Study

Eyal Kalanthroff Michael Eans Hilary Weingarden Ryan Jacoby Marina Gershkovich Ivar Snorrason Raphael Campeas Cynthia Cervoni Nick Crimarco Yosef Sokol Sarah Garnaat Nicole McLaughlin Liz Phelps Anthony Pinto Christina Boisseau Sabine Wilhelm Nathaniel Daw Blair Simpson