

# PYRAMES

## Background/Motivation

- Hypertension is an epidemic and national priority
- More than **75% of Americans aged 60+** are hypertensive
- Hypertension increases the risk of heart attack or stroke
- Risk of dying doubles for every 20mmHg increase of average BP.**
- Over-medicating can lead to falls related to **hypotension**
- Capacitive technology validated by FDA clearance of Boppli®, a wearable monitor to continuously and non-invasively monitor blood pressure of critically-ill infants.
- PyrAmes Inc. aims to utilize our machine learning and sensor platform to address the needs of older adults.**

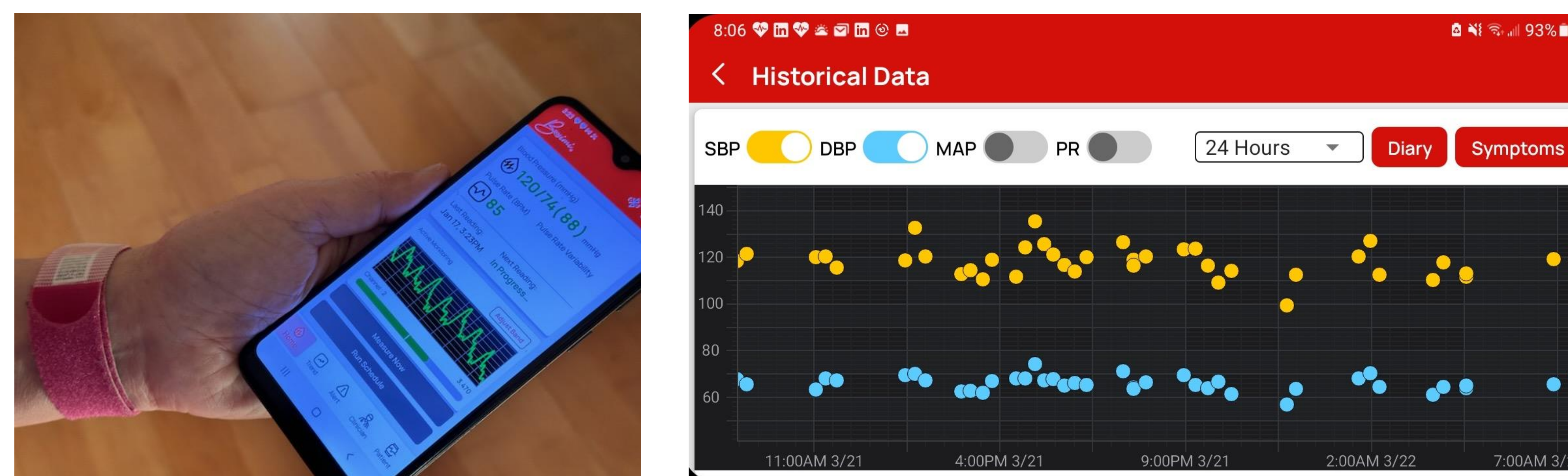
## Objectives/Goals

- Simultaneously collect Bosimi® sensor data and blood pressure data from 100 inpatients with invasive arterial lines (IALs)
- Develop strategies to mitigate signal artifacts due to motion
- Finalize an algorithm that does not require external calibration with accuracy within FDA guidelines

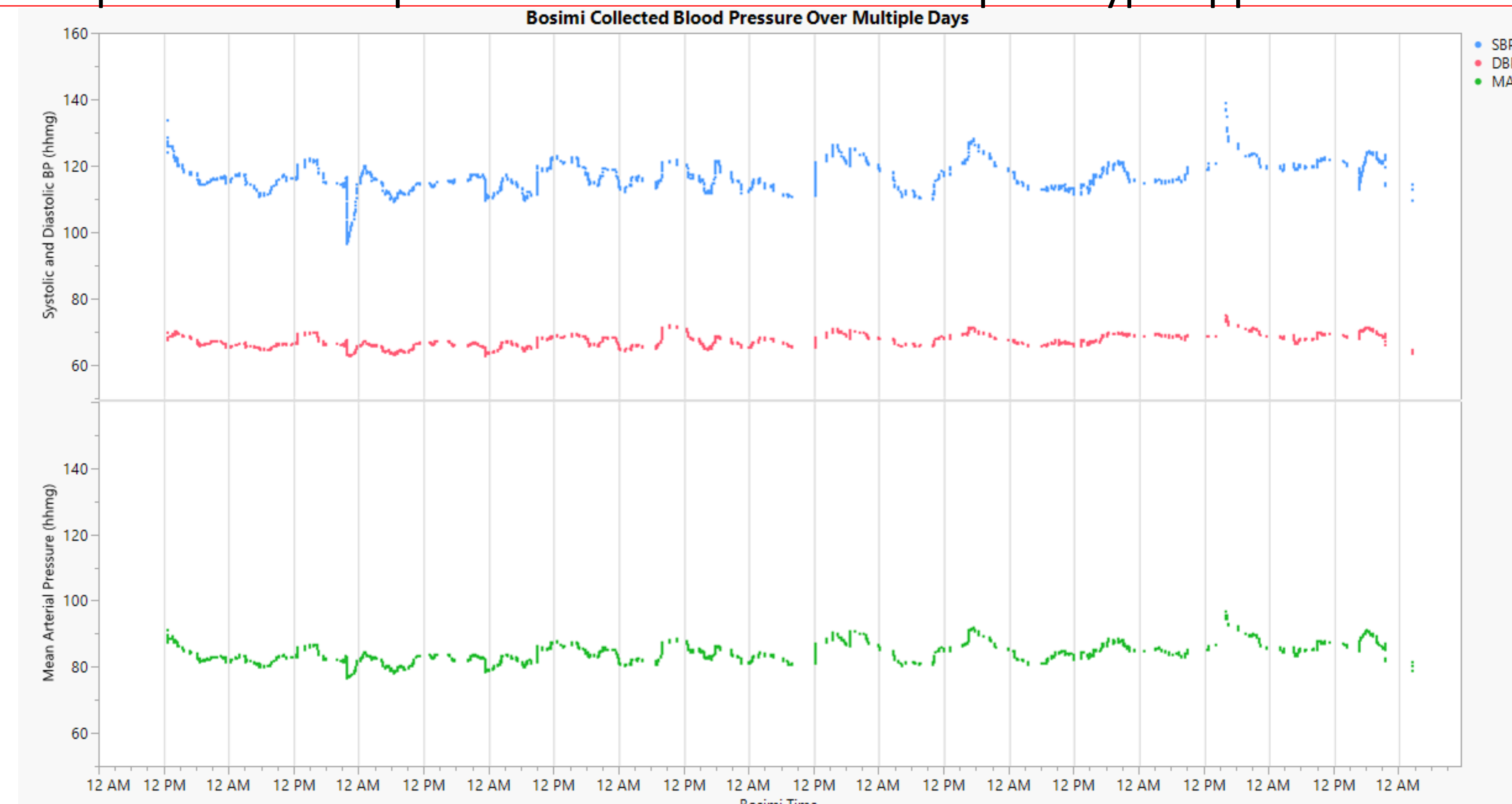
# Usability of wearable, passive, noninvasive BP monitor to combat elderly hypertension at home

David DR Krucik\*<sup>1</sup>, Junjun Liu<sup>1</sup>, Thomas Roxlo<sup>1</sup>, Celine Liong<sup>1</sup>, Doug Halperin<sup>1</sup>, Will Sutherland<sup>1</sup>, Dave Richardson<sup>1</sup>, Vikram Fielding-Singh<sup>2</sup>, Xina Quan<sup>1</sup>

<sup>1</sup> PyrAmes Inc, <sup>2</sup>Stanford University  
PennAITech Aging Focus Pilot Core



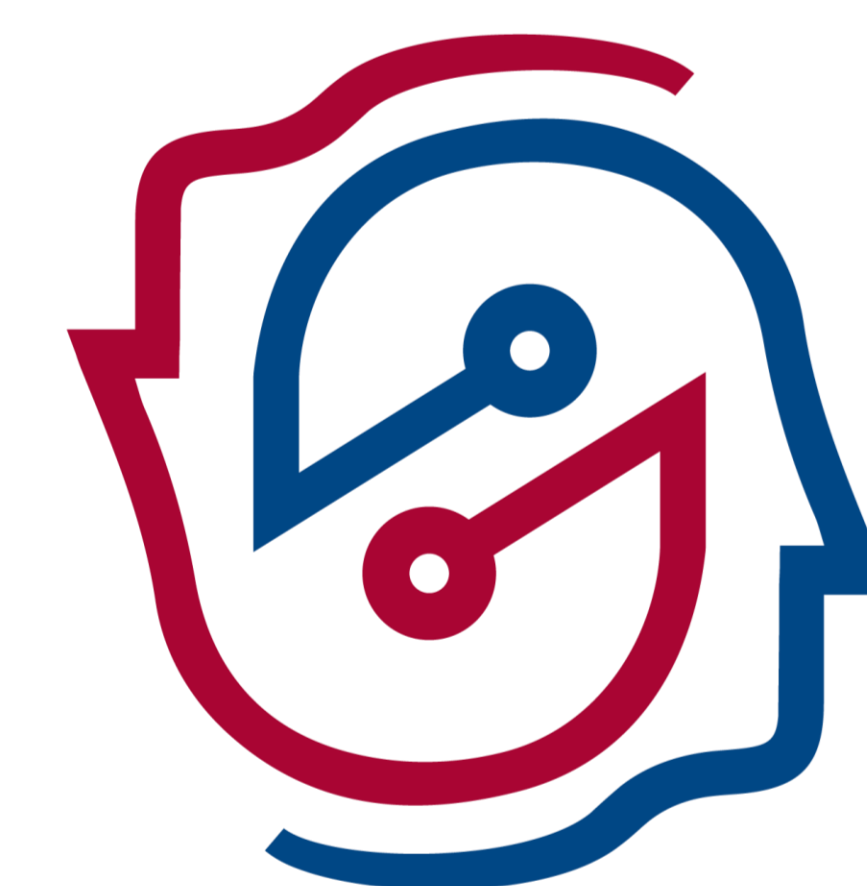
Initial product development has led to a successful prototype app and hardware



Early pilot data validates assumptions about variability in BP throughout a day

Model B12667	DBP	MAP	SBP	FDA spec	Internal goal
# of patients	42	42	42	85	85
Mean Average Error (MAE)	-0.2	-0.6	-0.1	$\leq \pm 5$	$\leq \pm 1$ mmHg
Standard Deviation (SD)	3.8	5.2	6.8	$\leq 8$	$\leq 5$ mmHg
Correlation	0.38	0.41	0.32		$\geq 0.4$
Slope	0.44	0.55	0.36		$\geq 0.4$

Current progress on best model, still anchored model



# PennAITech

## Methods

- Enrollment from post-op, ICU and cardiac patients at Stanford
- Patients have concurrent IAL
- Supplement PyrAmes' existing dataset with synthetic data
- Use machine-learning techniques such as convolutional neural networks to extract BP values from waveform shape

## Current Progress

- Successful enrollment of first few senior patients**
- No progress yet on mitigating signal movement artifact, but coverage during daily living approaches specification
- Current algorithm requires anchor;** as patient enrollment continues, we plan to develop non-anchored model
- Stakeholder interviews have revealed **interest from care givers and users for remote BP monitoring**

## Acknowledgment

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