

# 'StopWatch'

- a smartwatch based system for passive detection of cigarette smoking

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## Recent quote...

*“The act of smoking can already be identified using a wrist-worn accelerometer, and it may soon be possible with off-the-shelf smart watches”*

Naughton, F (2017)

Delivering "Just-In-Time" smoking cessation support via mobile phones:  
current knowledge and future directions

*Nicotine and Tobacco Research*, 19(3), 379-383

# Outline

- Background to the project
- Development and testing of the smartwatch system
- Results / performance metrics

# Project aim

- Use commercially-available wearable technology devices to monitor and detect lifestyle health behaviours and capture data about the way people lead their lives
- Utilise motion sensors built into the wearable device, to look for particular patterns of hand movement that are the motion signature of activities such as smoking or eating
- Measure performance of the device in a controlled laboratory environment, and compare it with performance in free-living conditions in the wild

# The need for passive detection of smoking

- Self-reporting is unreliable...
- Self-reports of number of cigarettes smoked each day show under-reporting
  - Hatziandreu EJ, Pierce JP, Fiore MC et al (1989)  
The reliability of self-reported cigarette consumption in the United States  
*American Journal of Public Health*, 79(8):1020-1023
  - Krall E, Valadian I, Dwyer JT, Gardner J (1989)  
Accuracy of recalled smoking data  
*American Journal of Public Health*, 79(8):200-206
- especially where there is a high demand for abstinence (e.g. cardiac patients, pregnant women) or for those on cessation interventions
  - Sillet RW, Wilson MB, Malcolm RE, Ball KP (1978)  
Deception among smokers.  
*British Medical Journal*, 2:1185-1186
  - Venditti CC, Smith GN (2012)  
Self-reported cigarette smoking status imprecisely quantifies exposure in pregnancy  
*Open Journal of Obstetrics and Gynaecology*, 2:56-61

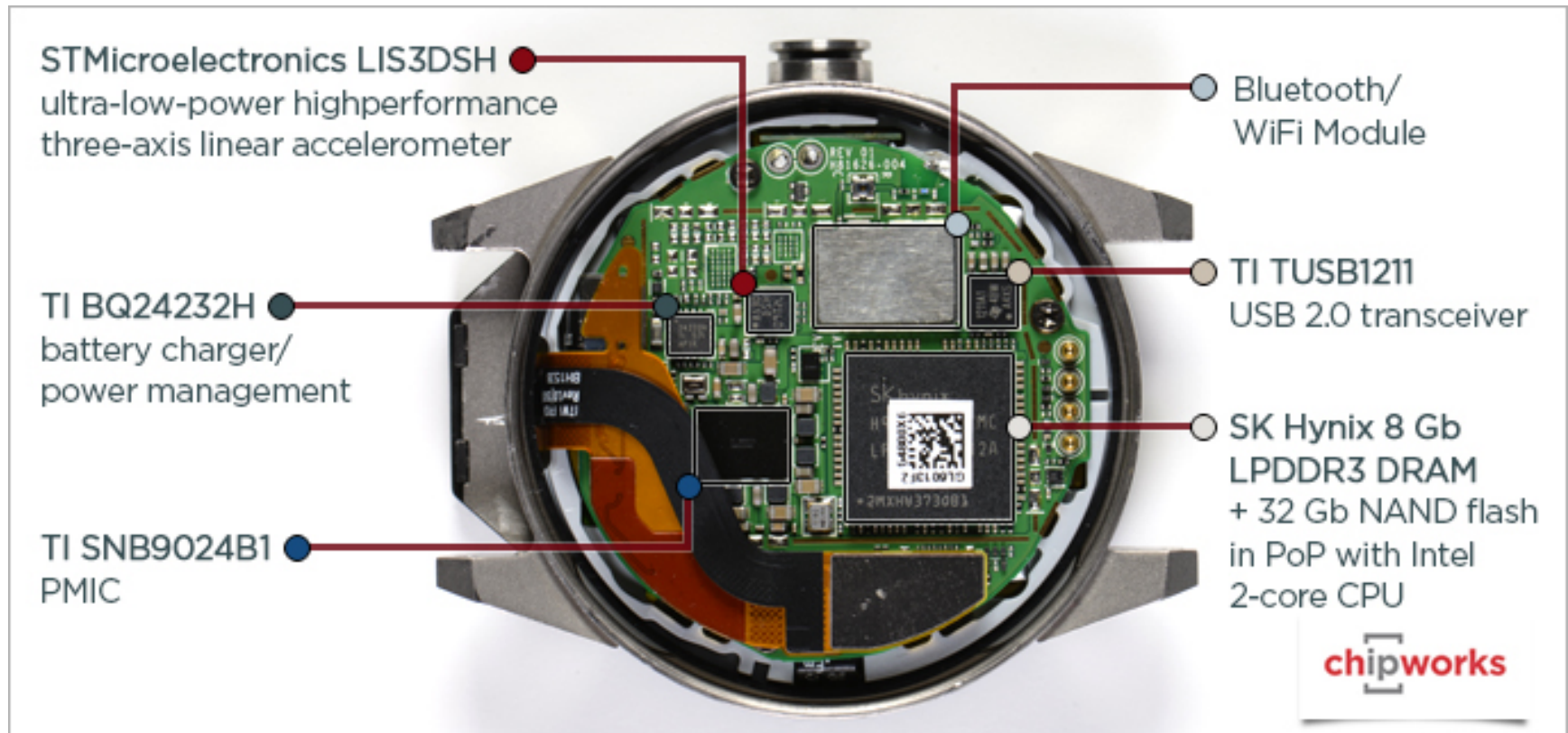
# The need for passive detection of smoking

- Tendency of digit bias towards round numbers (eg. 10, 20, 30) – rounding down rather than up
  - Klesges RC, Debon M, Ray JW (1995)  
Are self-reports of smoking rate biased? Evidence from the Second National Health and Nutrition Examination Survey  
*Journal of Clinical Epidemiology*, 48(10):1225-1233
- Under-reporting more common amongst adolescents
  - Patrick DL, Cheadle A, Thompson DC, Diehr P, Koepsell T, Kinne S (1994)  
The validity of self-reported smoking: a review and meta-analysis  
*American Journal of Public Health*, 84(7):1086-1093

# Why use a smartwatch to detect smoking?

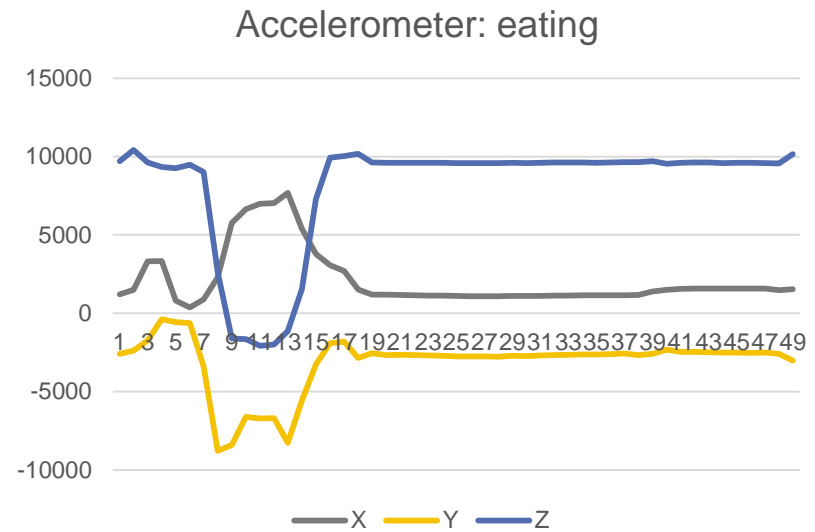
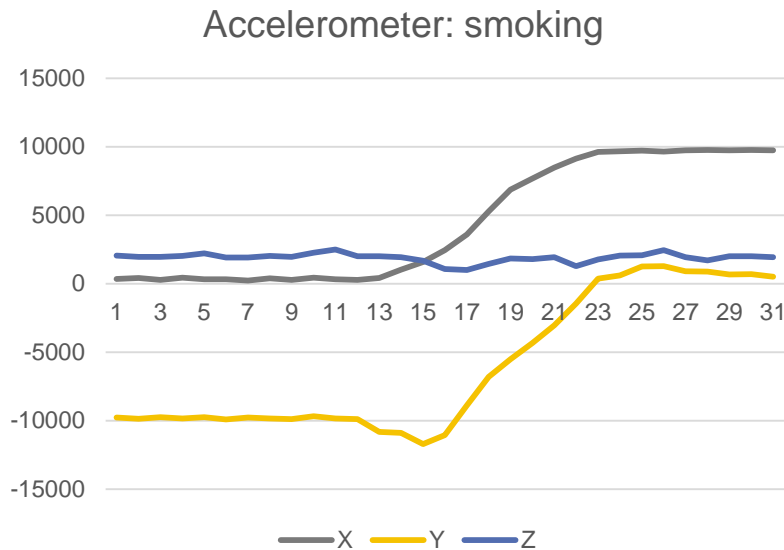
- Provides the required motion sensors (inertial measurement units):
  - Accelerometer and gyroscope
- Compatible with mobile technology standards
  - Phone-based software
  - Bluetooth / USB connectivity
- Commercial product:
  - Widely available, relatively cheap
  - Reproducible environment
- Convenient and wearer-friendly format encourages user adoption and facilitates engagement with interventions

# Inertial measurement units

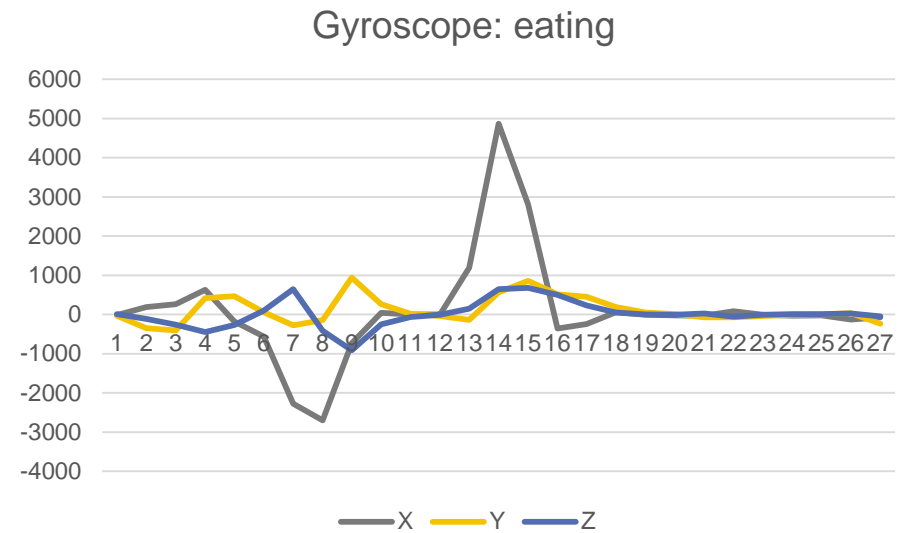
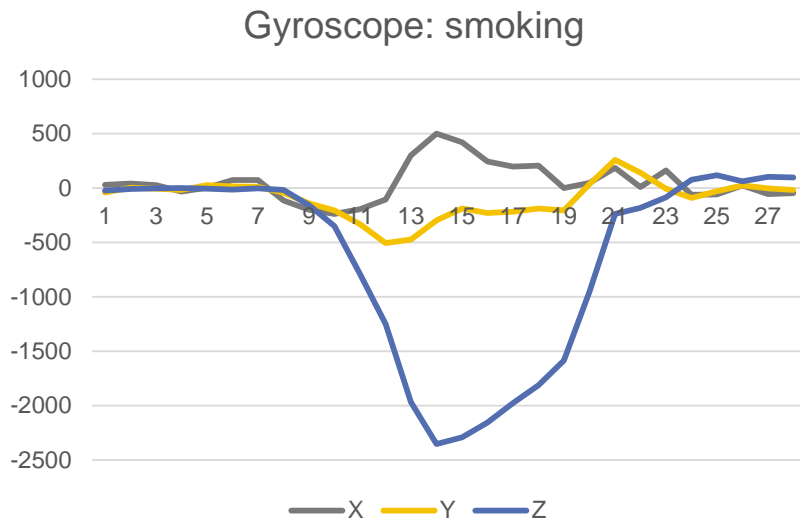




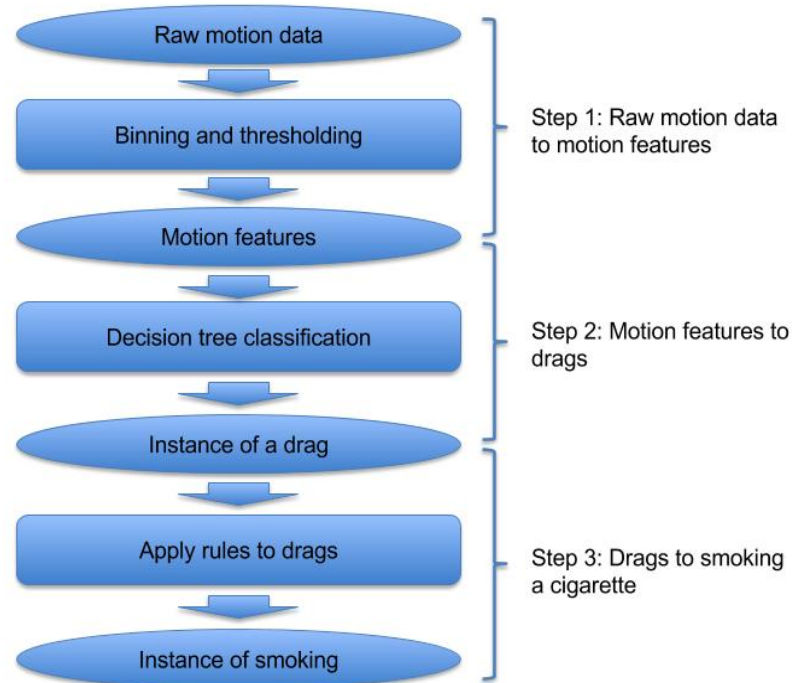
# Sensor outputs during smoking vs. eating



# Sensor outputs during smoking vs. eating



# 3-step analytic pipeline



# Classification of motion features as drags

- Signature gesture of smoking made up of a number of movements:
- Raise hand to mouth (speed, duration)
- “Smoking position”
- Dwell time at mouth
- Move hand away from mouth (speed, duration)

# Rules to identify smoking

- Minimum of 6 drags to count as a cigarette
- 80 seconds elapsed with no further drags counts as end of cigarette
- Speed of movement; min/max dwell time for hand at mouth
- Context-based – parameters different if already smoking
- Rules based on data gathered during prototype testing

# Architecture of the app

- Android
- Java programs
  - for process control
- XML code
  - to define function of user interface screens
- Android Studio integrated development environment (IDE)
  - links source code, libraries and resources
  - coordinates build process
  - generates installation package for the app
- Android Wear operating system on the watch
- LG 'G' watch



# Developing the app

- Prototype –
  - Raw motion data recorded on smartwatch
  - Activity ground truth data recorded manually by observer
  - Decision tree generated from raw motion & ground truth data
- Main development –
  - Extended to include in-app recording of ground truth activity
  - Analysis carried out on the watch – no need to keep raw data
  - User-friendly interface provided; database added to store results
  - Suite of programs for downloading data and refreshing the database
  - Developed and tested in phases to refine detection algorithm

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# Test procedure

- Initial lab session to verify detection/non-detection on sample tasks:
  - Smoking a cigarette
  - Drinking
  - Eating with fingers
  - Eating with cutlery
    - Opportunity to observe any unusual behaviour that may affect results
- Participant then wears the watch during 24 hours “in the wild”
- Watch records smoking detections
- Participant records ground truth data using the watch app
- Participant keeps a smoking diary and records incidence of smoking
- After 24 hours, follow-up session with participant for feedback

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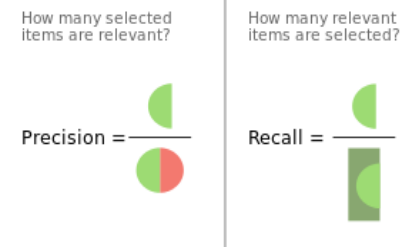
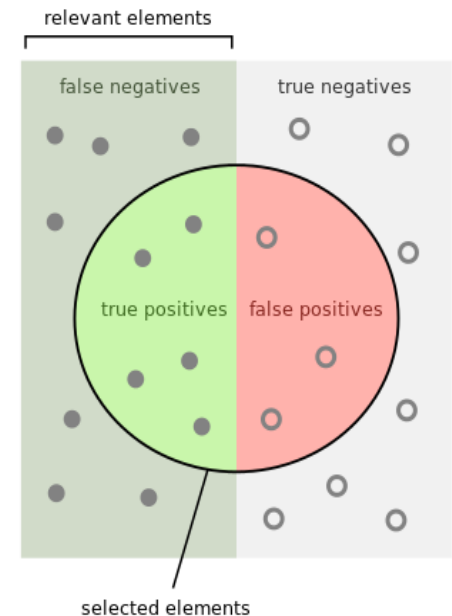


# Metrics – Precision and Recall(Sensitivity)

- **Precision (Positive Predictive Value)**
  - Percentage of positive predictions that are correct
  - How many of events flagged as smoking are actual smoking events
- **Recall / Sensitivity (True Positive Rate)**
  - Percentage of positive cases that are caught/correctly classified
  - How many of the actual smoking events have been identified

$$\text{Precision} = \frac{\text{true positives}}{\text{true positives} + \text{false positives}}$$

$$\text{Recall} = \frac{\text{true positives}}{\text{true positives} + \text{false negatives}}$$



# Results – in the lab

- Mean precision and recall/sensitivity:

| Phase   | Mean Precision (%) | Mean Recall (%) | n  |
|---|--------------------|-----------------|----|
| <b>PHASE 1 – Initial version</b><br><i>(apparently high precision skewed by a very small number of true positives and no false positives in the whole sample)</i> | 100.000            | 28.571          | 7  |
| <b>PHASE 2 – First performance upgrade</b>  | 87.500             | 82.353          | 17 |
| <b>PHASE 3 – Second performance upgrade</b>   | <b>75.000</b>      | <b>92.308</b>   | 13 |

# Results – in the “wild”

- Mean precision and recall/sensitivity:

| Phase  | Mean Precision (%) | Mean Recall (%) | n  |
|--|--------------------|-----------------|----|
| <b>PHASE 1 – Initial version</b><br><i>(apparently high precision skewed by very small number of true positives and only one false positive in whole sample)</i> | 96.222             | 28.222          | 9  |
| <b>PHASE 2 – First performance upgrade</b>   | 83.000             | 62.272          | 11 |
| <b>PHASE 3 – Second performance upgrade</b>  | <b>85.615</b>      | <b>70.461</b>   | 13 |

# Next steps?

- International patent applied for (January 2017)
- Potential for use in healthcare interventions – as **StopWatch**
  - precision intervention; “just-in-time” (context-triggered)
- Use in further studies, along with other data capture apps
  - e.g. smoking measurement alongside EMA
- Extend the concept to other lifestyle health behaviours
  - e.g. develop for drinking, chaotic eating



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# Summary

- Decision tree algorithm can be used to identify smoking gestures
- Algorithm can be implemented in an app to run on a smartwatch containing standard motion sensors
- Off-the-shelf smartwatch can be used for detection of smoking
- Results:

|            |       |               |
|------------|-------|---------------|
| Accuracy:  | > 90% | (in lab)      |
| Precision: | > 85% | (in the wild) |
| Recall:    | > 70% | (in the wild) |



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## Recent quote...

*“The potential of the vast and growing array of sensors included as standard on many smartphones, and other mobile devices such as wearables, is only just beginning to be realised”*

Munafò, M (2017)

How can technology support smoking cessation interventions?

*Nicotine and Tobacco Research*, 19(3), 271-272

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