



ISMPB

International Society for the
Measurement of Physical Behaviour



JUNE 18-21, 2024

**9TH INTERNATIONAL
CONFERENCE ON AMBULATORY
MONITORING OF PHYSICAL
ACTIVITY AND MOVEMENT**
RENNES, BRITTANY, FRANCE



ICAMPAM

RENNES, BRITTANY, FRANCE 2024

ISMPB.ORG

ICAMPAM PROGRAM AT A GLANCE

Time		Tuesday, June 18			
08h00	Registration Desk Open 8h00-17h30 Exhibitors 13h30-17h30		Workshops		
08h15					
08h30					
08h45					
09h00					
09h15					
09h30			Workshop 1: Objectively Measuring Arm Activity 09h30-11h00 Amphitheatre A	Workshop 2: Actimetric R Package 09h30-11h00 Amphitheatre B	Workshop 3: Learnings From The UK BioBank Study 09h30-11h00 Amphitheatre C
09h45					
10h00					
10h15					
10h30					
10h45					
11h00			Break 11h00-11h30		
11h15			Workshop 4: Discussion Forum With The WHO 11h30-13h00 Amphitheatre A	Workshop 5: Reproducible Data Analysis At Scale 11h30-13h00 Amphitheatre B	Workshop 6: The Daily Activity Cycle 11h30-13h00 Amphitheatre C
11h30					
11h45					
12h00					
12h15					
12h30					
12h45			Lunch (pre-ordered box lunches during registration) 13h00-14h00		
13h00			Symposium 1 14h00-15h30 Amphitheatre A	Symposium 2 14h00-15h30 Amphitheatre B	Symposium 3 14h00-15h30 Amphitheatre C
13h15					
13h30					
13h45					
14h00					
14h15					
14h30			Break 15h30-16h00		
14h45			Symposium 4 16h00-17h30 Amphitheatre A	Symposium 5 16h00-17h30 Amphitheatre B	Symposium 6 16h00-17h30 Amphitheatre C
15h00					
15h15					
15h30					
15h45					
16h00					
16h15	Opening Reception 18h30-20h00				
16h30					
16h45					
17h00					
17h15					
17h30					
18h00					
18h15					
18h30					
18h45					
19h00					
19h15					
19h30					
19h45					
20h00					
20h15					
20h30					
20h45					
21h00					
21h15					
21h30					
21h45					
22h00					

Program subject to change

ICAMPAM PROGRAM AT A GLANCE

Time	Wednesday, June 19			
08h00	Exhibitors 8h00-18h30 Registration Desk Open 8h00-19h00	Day 1		
08h15		Welcome		
08h30		08h30-9h00		
08h45		Hans Bussmann Lecture		
09h00		Keynote Speaker - Fiona Bull		
09h15		09h00-10h00		
09h30		Amphitheatre A		
09h45		Transition Period 10h00-10h15		
10h00		Oral Session 1	Oral Session 2	Oral Session 3
10h15		10h15-11h15	10h15-11h15	10h15-11h15
10h30		Amphitheatre A	Amphitheatre B	Amphitheatre C
10h45				Room 12-13
11h00		Break 11h15-11h45		
11h15		Oral Session 5	Oral Session 6	Oral Session 7
11h30		11h45-12h45	11h45-12h45	11h45-12h45
11h45		Amphitheatre A	Amphitheatre B	Room 12-13
12h00		Lunch & Poster Session 1		
12h15		12h45-14h00		
12h30		Foyer		
12h45		Speaker - Severine Sabia	Oral Session 9	Speaker - Dot Dumuid
13h00		14h00-15h00	14h00-15h00	14h00-15h00
13h15		Amphitheatre A	Amphitheatre B	Amphitheatre C
13h30		Break 15h00-15h30		
13h45		Symposium 7	Symposium 8	Symposium 9
14h00		15h30-17h00	15h30-17h00	15h30-17h00
14h15		Amphitheatre A	Amphitheatre B	Room 12-13
14h30				
14h45		Transition Period 17h00-17h15		
15h00		Keynote Speaker - Guillaume Chevance		
15h15		17h15-18h15		
15h30		Amphitheatre A		
15h45		ISMPB General Meeting		
16h00		18h20-19h00		
16h15		Amphitheatre A		
16h30		ECR Event		
16h45		20h00-22h00		
17h00		(ticket required)		
17h15				
17h30				
18h00				
18h15				
18h30				
18h45				
19h00				
19h15				
19h30				
19h45				
20h00				
20h15				
20h30				
20h45				
21h00				
21h15				
21h30				
21h45				
22h00				

Program subject to change

ICAMPAM PROGRAM AT A GLANCE

Time	Thursday, June 20			
08h00	Exhibitors 8h30-18h00 Registration Desk Open 8h00-18h00	Day 2		
08h15				
08h30		Keynote Speaker - Kerstin Bach 08h30-09h30 Amphitheatre A		
08h45				
09h00				
09h15				
09h30		Transition Period 09h30-09h45		
09h45		Symposium 11 09h45-11h15 Amphitheatre A	Symposium 12 09h45-11h15 Amphitheatre B	Symposium 13 09h45-11h15 Amphitheatre C
10h00				
10h15				
10h30				
10h45				
11h00				
11h15		Break 11h15-11h45		
11h30				
11h45		Exhibitor Talks 11h45-12h45 Amphitheatre A		
12h00				
12h15				
12h30				
12h45		Lunch & Poster Session 2 12h45-14h00 Foyer		
13h00				
13h15				
13h30				
13h45		Speaker - Jairo Migueles 14h00-15h00 Amphitheatre A	Oral Session 10 14h00-15h00 Amphitheatre B	Oral Session 11 14h00-15h00 Amphitheatre C
14h00				
14h15				
14h30				
14h45				
15h00		15h00-15h30		
15h15		Oral Session 12 15h30-16h30 Amphitheatre A	Oral Session 13 15h30-16h30 Amphitheatre B	Oral Session 14 15h30-16h30 Amphitheatre C
15h30				
15h45				
16h00				
16h15				
16h30	Transition Period 16h30-16h45			
16h45	Keynote Speaker - Jasper Schipperijn 16h45-17h45 Amphitheatre A			
17h00				
17h15				
17h30				
18h00				
18h15				
18h30				
18h45				
19h00	Evening Social Event 19h30-22h00 (ticket required)			
19h15				
19h30				
19h45				
20h00				
20h15				
20h30				
20h45				
21h00				
21h15				
21h30				
21h45				
22h00				

Program subject to change

ICAMPAM PROGRAM AT A GLANCE

Time	Friday, June 21				
08h00	Exhibitors 8h30-13h30	Registration Desk Open 8h00-13h30	Day 3		
08h15					
08h30			Keynote Speaker - Kim Meredith-Jones 08h30-09h30 Amphitheatre A		
08h45					
09h00					
09h15					
09h30					
09h45			Transition Period 09h30-09h45		
10h00			Symposium 14 09h45-11h15 Amphitheatre A	Symposium 15 09h45-11h15 Amphitheatre B	Symposium 16 09h45-11h15 Amphitheatre C
10h15					
10h30					
10h45					
11h00					
11h15			Break 11h15-11h45		
11h30			Speaker - Boris Cheval 11h45-12h45 Amphitheatre A	Oral Session 15 11h45-12h45 Amphitheatre B	Oral Session 16 11h45-12h45 Amphitheatre C
11h45					
12h00					
12h15					
12h30					
12h45			Transition Period 12h45-12h50		
13h00			Award Presentations and Closing Remarks 12h50-13h15 Amphitheatre A		
13h15					
13h30					
13h45					
14h00					
14h15					
14h30					
14h45					
15h00					
15h15					
15h30					
15h45					
16h00					
16h15					
16h30					
16h45					
17h00					
17h15					
17h30					
18h00					
18h15					
18h30					
18h45					
19h00					
19h15					
19h30					
19h45					
20h00					
20h15					
20h30					
20h45					
21h00					
21h15					
21h30					
21h45					
22h00					

Program subject to change

TABLE OF CONTENTS

WELCOME TO ICAMPAM	2
ABOUT ISMPB	3
GENERAL INFORMATION	7
SPECIAL EVENTS	8
VENUE LOCATION AND FLOOR PLAN	10
PRE-CONFERENCE WORKSHOPS	15
DETAILED PROGRAM	17
SPEAKERS	35
SYMPOSIA ABSTRACTS	41
AUTHORS AND PRESENTERS	74
ORAL SESSIONS.	79
POSTER SESSIONS	85
SPONSORS, SUPPORTERS AND EXHIBITORS . . .	89
THANK YOU TO OUR SPONSORS	91

Click the footer on any page to return to the Table of Contents

WELCOME TO ICAMPAM

WELCOME!

After very successful ICAMPAM conferences in Rotterdam, Glasgow, Amherst, Limerick, Bethesda, Maastricht, and Keystone, Colorado, we are very pleased to host you in Rennes, the capital of Brittany, for this 9th ICAMPAM conference. This 9th edition is the first in Europe since the COVID 19 pandemic and regain a full in-person configuration is a great pleasure.

Preparing this ninth edition has been a two-year adventure and we have put a lot of effort into making this conference a rich moment for you. I would like to thank the Podium team, and in particular Sharon and Brian, for their constant support, their kindness and their good spirit.

The leaders of the scientific committee, Tom & Asa, have done a great job in preparing a varied scientific program on exciting scientific subjects. Well done and thank you to them! Undoubtedly, this 9th edition of ICAMPAM will once again be a great opportunity to talk about and share the latest scientific advances in physical behavior monitoring using wearable devices. The diverse format of presentations, mixing keynote and invited speakers, symposia, workshops, oral and poster presentations, provide an excellent platform for young scientists to easily interact with renowned experts.

Let's not forget the social and cultural side of ICAMPAM! For this first ICAMPAM in France, we are very proud to host the conference in our beautiful city of Rennes. Once the doors of the amphitheaters will close at the end of each day, we really encourage you to discover Rennes, where the French and Brittany cultures converge. Stroll through the streets of the old town and let yourself be carried from square to square, you will discover our architectural heritage and the numerous bars and restaurants to taste French and Breton gastronomy. Don't miss the traditional meal "The Galette Saucisse", that you can find at the "Marché des Lices" every Saturday morning, an outdoor market for four centuries! If you have more time, discover the beautiful and wild Brittany coast: its intact nature across the hiking trails that follow the sea, Saint-Malo the majestic city of the corsairs, or the outstanding Mont Saint-Michel (which is located, we must admit, in Normandy), and so much more...

Welcome to ICAMPAM 2024, enjoy this moment, and warm regards on behalf of the organizing committee,

Alexis Le Faucheur

*Local Host Chair, ICAMPAM 2024
ENS Rennes, France*

WELCOME ON BEHALF OF THE SCIENTIFIC COMMITTEE!

We are delighted to welcome you to ICAMPAM 2024, held in the beautiful city of Rennes, France, from the 18th to the 21st of June, 2024. This year's conference promises to be an enriching and stimulating event, reflecting the ongoing advancements in the field of monitoring physical behavior.

ICAMPAM 2024 features an impressive lineup of keynote speakers and invited speakers who have been chosen based on their important and pioneering contributions in their respective fields. With several well-subscribed workshops, 16 symposia sessions, 16 oral sessions, and an impressive array of poster presentations, the scientific program promises a diverse range of high-quality research. The topics span from method development to end-use implementation, across a range of settings, ensuring comprehensive coverage of the latest advancements and applications in our field.

Our scientific committee has worked tirelessly to curate a rich and diverse program. Their efforts, along with the support of our local organizing committee (special mention to Alexis Le Faucheur), have been instrumental in making this conference a success. We would also like to express our gratitude to Sharon Zwack and Brian Groos from Podium Conferences. Their exceptional organizational skills and ongoing support have been crucial in ensuring the smooth planning and execution of this event.

We extend our heartfelt thanks to all participants for joining us here in Rennes. We recognize that traveling can be challenging, and we appreciate your commitment and enthusiasm. We hope you find ICAMPAM 2024 to be a valuable opportunity for learning, networking, and advancing the science of monitoring physical behaviour.

On behalf of the scientific committee, we wish you a fruitful and enjoyable conference.

Åsa Tornberg
Lund University, Sweden

Tom Stewart
*Auckland University of
Technology, New Zealand*

WELCOME ON BEHALF OF THE SOCIETY

I am very pleased to welcome you on behalf of the International Society for the Measurement of Physical Behavior (ISMPB) to the ICAMPAM2024 conference in Rennes. This conference is the 9th ICAMPAM, the latest in a series started by Hans Bussmann in Rotterdam in 2008. The ICAMPAM conference provides a perfect forum to present new ideas, and a relaxed, supportive environment to network, catch up with old friends and make new ones.

ICAMPAM is the premier forum for the ISMPB, but it is now supported by a range of online symposia for our members in the interval between conferences, and by our society's journal, the Journal for the Measurement of Physical Behaviour. I have always found ICAMPAM to be a superb event for meeting researchers from many disciplines who want to further the science and technology of physical behaviour measurement. On behalf of the society's board members, I wish you all an informative, productive, and fun-filled ICAMPAM.

Alan Donnelly
President, ISMPB

ABOUT ISMPB

MISSION STATEMENT

The Society aims to promote and facilitate the study and applications of objective measurement and quantification of free-living physical behavior(s) and its related constructs (e.g. energy expenditure, context) using wearable devices. The Society is characterised by:

- its multidisciplinary focus; including engineering, signal analysis, physiology, medical sciences, public health, psychology, ergonomics and sports.
- bringing together people from a wide variety of backgrounds and expertise, including researchers, clinicians, therapists, signal analysts, computational scientists and commercial companies.

SCOPE OF THE SOCIETY

The Society focuses on the issues related to ambulatory monitoring, wearable monitors, movement sensors, physical activity, sedentary behaviour, movement behaviour, body postures, sleep and constructs related to physical behaviours. Therefore the Society specifically focuses on the objective measurement and quantification of physical behaviours which include:

- all free-living physical behaviours (including sleep) in its different forms (volumes and patterns which could give an indication of quality)
- measurements that are unrestricted, prolonged and unsupervised
- measurements of physiological responses (e.g. energy expenditure) that are directly related to physical behaviours
- a wide range of applications: clinical, public health, behavior sciences, end users etc.

Because of these criteria, other measurement techniques are NOT of primary interest. Examples being:

- objective measurement of signals other than, or not simultaneously measured with, physical behaviours (such as measurement of ECG, EEG or blood pressure)
- measurement of energy expenditure techniques such as the doubly labeled water
- measurement of physical behaviours using direct observation, questionnaires, diaries or electronic diaries room-restricted camera systems
- time restricted, supervised measurement of physical behaviours (kinematics, kinetics) outside a gait or movement laboratory

If these measurement techniques are combined with, or are related to, free-living monitoring they are potentially of interest.

ABOUT ISMPB

ISMPB BOARD OF DIRECTORS

President

Professor Alan Donnelly

Department of Physical Education and Sports Sciences,
University of Limerick, Ireland

President-Elect

Dr. Karin Allor Pfeiffer

Department of Kinesiology, Michigan State University, USA

Past President

Dr. Bronwyn K. Clark

School of Public Health, The University of Queensland,
Australia

Secretary

Dr. Martina Mancini

Oregon Health & Science University, Department of
Neurology and Balance Disorders Laboratory, USA

Treasurer

Dr. Dinesh John

National Institute on Aging, USA

Elected Representatives

■ **Professor Hans Bussmann**

Dept. of Rehabilitation Medicine, Erasmus MC –
University Medical Center, Rotterdam,
the Netherlands

■ **Dr. Alex Clarke-Cornwell**

School of Health & Society, The University of
Salford, UK

■ **Professor Jorunn Helbostad**

Department of Neuromedicine and Movement
Science, Norwegian University of Science and
Technology, Norway

■ **Professor Jeff Hausdorff**

Movement Disorders Unit at the Tel-Aviv Sourasky
Medical Center (TASMC), Israel

■ **Dr. Marco Giurgiu**

Department of Sport and Sport Science,
Karlsruhe Institute of Technology (KIT), Germany

■ **Dr. Joanne Mcveigh**

Associate Professor, Curtin University, Australia

■ **Dr. Kim Meredith-Jones**

Director, Bone and Body Composition Unit,
Department of Medicine, University of Otago,
New Zealand

■ **Dr. Tom Stewart**

Human Potential Centre, Auckland University of
Technology, New Zealand

■ **Dr. Åsa Tornberg**

Department of Health Sciences, Lund University,
Sweden

■ **Rita Van Den Berg-Emons**

Erasmus Medical Centre, Rotterdam,
the Netherlands

Advisory Board Members

■ **Dr. David R. Bassett, Jr.**

Professor and Interim Department Head,
Exercise Physiology, University of Tennessee
Knoxville, USA

■ **Professor Malcolm Granat**

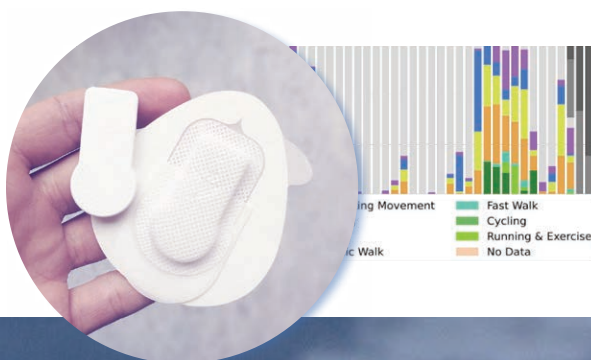
School of Health Sciences, University of Salford,
Manchester, UK

■ **Dr. Richard (Rick) Troiano**

Epidemiology and Genomics Research Program,
National Cancer Institute, USA

How active are you during ICAMPAM?

Meet SENS at our booth and get your own research
grade SENS motion-sensor for 24 hours during the
ICAMPAM and gain insights on your circadian rhythm
and physical activity during the conference



SENS
motion

ABOUT ISMPB

SCIENTIFIC PLANNING COMMITTEE

Chairs: Åsa Tornberg
Lund University, Sweden
Tom Stewart
Auckland University of Technology, New Zealand

Adrien Chanteau
University of Rennes, France

Alan Donnelly
University of Limerick, Ireland

Alexandra Clarke-Cornwell
The University of Salford, UK

Alexis Le Faucheur
Ecole normale supérieure de Rennes, France

Anantha Narayanan
Auckland University of Technology, New Zealand

Åsa Andersson
Halmstad University, Sweden

Bronwyn Clark
The University of Queensland, Australia

Claas Lendt
Auckland University of Technology

Dinesh John
National Institute on Aging

Jeffery Hausdorff
Tel-Aviv Sourasky Medical Center (TASMC), Israel

Jeremy Vanhelst
Université Sorbonne Paris Nord, France

Joanne McVeigh
Curtin University, Australia

Johannes Bussmann
Erasmus MC - University Medical Centre, the Netherlands

Jorunn Helbostad
Norwegian University of Science and Technology, Norway

Karin Pfeiffer
Michigan State University, USA

Katarina Lauruskus
Lund University, Sweden

Kim Meredith-Jones
University of Otago, New Zealand

Mai Chin A Paw
Amsterdam UMC, the Netherlands

Malcolm Granat
University of Salford, Manchester, UK

Marco Giurgiu
Karlsruhe Institute of Technology (KIT), Germany

Martina Mancini
Oregon Health & Science University

Matthew Ahmadi
The University of Sydney, Australia

Pierre-Yves de Müllenheim
IFEPSA - UCO (Institut de Formation en Education Physique et en Sport)

Scott Duncan
Auckland University of Technology, New Zealand

COMMUNICATIONS AND MEMBERSHIP COMMITTEE

Alex Clarke-Cornwell
University of Salford, United Kingdom

Marco Giurgiu
Karlsruhe Institute of Technology (KIT), Germany

Aidan Buffey
University of Limerick, Ireland

Benjamin Maylor
University of Oxford, United Kingdom

Saud Alomairah
Johns Hopkins University, USA

Matt Ahmadi
University of Sydney, Australia

Grainne Hayes
University of Limerick, Ireland

JOURNAL COMMITTEE

Charlotte Edwardson

ABOUT ISMPB

DIVERSITY, EQUITY AND INCLUSION (DEI) COMMITTEE

Karin Allor Pfeiffer
Michigan State University, USA

Albert Mendoza
California State University, East Bay, USA

Michael Kebede
University of North Carolina, Chapel Hill, USA

Julia Baumgart
Norwegian University of Science & Technology, Norway

ISMPB ACTIVITIES COMMITTEE

Dinesh John
Northeastern University, USA

Jorunn Helbostad
Norwegian University of Science & Technology, Norway

Malcolm Granat
University of Salford, United Kingdom

Alan Donnelly
University of Limerick, Ireland

Julia Baumgart
Norwegian University of Science & Technology, Norway

EXTERNAL RELATIONS COMMITTEE

Bronwyn K. Clark
The University of Queensland, Australia

ICAMPAM LOCAL HOST COMMITTEE

Chair: Alexis Le Faucheur
ENS Rennes, France

Adrien Chanteau
ENS Rennes, France

Steven Gastinger
M2S laboratory, France

Léa Gottsmann
ENS Rennes, France

Amélie Rebillard
M2S laboratory, France

Romane Peyrachon-Mouisset
ENS Rennes, France

Alexandre Vu
M2S laboratory, France

ICAMPAM LOCAL VOLUNTEERS FROM ENS RENNES

Manon Ballet	Titouan Junqua-Lamarque
Romain Biratelle	Jarod Legrand
Antoine Boulagnon	Luna Mock--Gaspalou
Cassandre Buffet	Mathilde Montel
Diane Chambon	Lila Patte
Maëlle Champagne	Thomas Priqueler
Maloé Faucon	Hugo Renault
Marie Gleyze	Honorine Robin
Welian Goasduff	Henri Tetard
Tybalt Jaillet	Pierre Vernel

PODIUM CONFERENCE SPECIALISTS

Marischal De Armond

Brian Groos

Sebastien Lavoie

Sharon Zwack

GENERAL INFORMATION

CONFERENCE VENUE

Beaulieu Campus of Rennes University
École doctorale - Université de Rennes 1,
Bâtiments #1 & #2A
Allée Henri Poincaré
F – 35700 Rennes
GPS coordinates: 48.115251, -1.636849

CONFERENCE REGISTRATION

Registration for the conference includes admission to all sessions including keynotes, symposium sessions, oral presentations and poster sessions. Also included, is the Opening Reception, lunch on Wednesday and Thursday of the conference, plus tea/coffee breaks during the conference. ICAMPAM will once again be using Whova as the platform for program content, networking, and other engagement opportunities. Access will be available for 90 days.

GUESTS

Guests of in-person attendees are welcome to attend the ICAMPAM 2024 Opening Reception at the Piccadilly Brasserie, Terrasse and Bar on Tuesday, June 18 (6:30-8:00pm) as well as the Evening Social Event on Thursday, June 20 (7:30-10:00pm). Tickets must be purchased in advance. Opening Reception is \$40. Evening Event is \$80.

NAME BADGES

Your name badge is your admission ticket to the conference sessions, coffee breaks, meals, and reception. Please wear it at all times. At the end of the conference we ask that you return your badge to the registration desk. ICAMPAM Board Members, Sponsors, Exhibitors and Staff will be identified by appropriate ribbons.

DRESS CODE

Dress is casual for all ICAMPAM meetings and social events.

REGISTRATION AND INFORMATION DESK HOURS

The Registration and Information Desk, located in the foyer of Bâtiments #2A, will be open during the following dates and times:

Tuesday, June 18	8:30 – 18:00
Wednesday, June 19	7:30 – 19:00
Thursday, June 20	8:00 – 18:00
Friday, June 21	8:00 – 14:00

CODE OF CONDUCT

By participating in the ICAMPAM conference you are agreeing to a code of conduct. As a scientific community, ISMPB aims to provide a supportive space for scientific dialogue. We believe that scientific progress depends on the free exchange of ideas in an environment in which all participants are treated equitably and with respect. To this end, we are committed to fostering a safe and supportive community in which all scientists are able to contribute fully regardless of age, gender, race, ethnicity, national origin, religion, gender identity or expression, sexual orientation, disability or any other applicable basis proscribed by law. Harassment of any form has no place in a healthy scientific enterprise. We expect all of our members as well as other attendees at ISMPB organized events to behave in ways that promote the supportive and productive exchange of ideas.

SPEAKER INFORMATION

Each individual oral talk is 8 minutes in length plus three (3) minutes time for Questions and Answers. There will be a moderator who will advise you of the time remaining during your presentation, kindly observe the time restrictions out of respect for other presenters.

The classrooms will be equipped with:

- Projector and screen (please use 16:9 slide ratio)
- PC Laptop computer
 - **Due to time constraints and IT security on campus, personal laptops are not permitted – You must provide your presentation to the speaker ready room**
- Lectern microphone

A Speaker Ready Room will be used at ICAMPAM 2024 and will be located on campus near the registration desk. Please see the registration desk for directions to the Speaker Ready Room.

All speakers in Oral Sessions must upload their presentations in person on campus as per the following schedule:

- Wednesday morning presentations are due Tuesday, June 18 by 5:30pm
- Wednesday afternoon presentations are due Wednesday, June 19 by 12 noon
- Thursday morning presentations are due Wednesday, June 19 by 5:00pm
- Thursday afternoon presentations are due Thursday, June 20 by 12 noon
- Friday presentations are due Thursday, June 20 by 4:30pm

Note the following for your oral talk:

- Power point presenter view may not be available. It is recommended that you bring your speaking notes in another form to be prepared.
- Advise whether your slides include any audio or video files so these may be tested in advance. Please ensure any linked files are embedded within power point.
- Ensure your presentation is Windows compatible.
- **Ensure you check your presentation in the speaker preview/ready room well in advance of your presentation time to ensure all is working and loading correctly.**

POSTER VIEWING INFORMATION

To make the most of the ICAMPAM poster sessions – please review the following information carefully: All poster abstracts are available for viewing in the ICAMPAM 2024 Whova App; these may be accessed for 90 days from Tuesday, June 18.

Posters will be available for attendees to review starting on Wednesday, June 19 at 10:15 and on Thursday, June 20 after 10:15 in the foyer. Poster presenters will be available at their poster during the scheduled Poster Time.

If you are unable to connect with a poster presenter during the Poster Session, open the poster menu in Whova (found under the agenda drop down menu) and refer to the Chat Box to leave a note in the Chat Box for the presenter to connect with you either during ICAMPAM 2024 or afterwards. You may continue to use the Whova App to connect and converse for up to 90 days.

POSTER PRESENTER INFORMATION

- Posters must be in portrait orientation only
- Poster size: A0 (84.1cm wide x 118.9cm high) (33in w x 46in high)
- **Velcro will be provided for you to adhere the poster to the board.**

POSTER INSTALLATION AND DISMANTLE

Poster presenters must set-up and remove their posters during the following times:

Poster Session 1

Wednesday, June 19

Set Up: Between 08:00–10:15

Session Time: 12:45–14:00

Tear Down: 15:30

Poster Session 2

Thursday, June 20

Set Up: Between 08:00–10:15am

Session Time: 12:45–14:00

Tear Down: 15:30

Information on Poster Authors (Lead), Poster Numbers and Poster Titles begins on [page 84](#).

CONFERENCE EXHIBITORS

Technical exhibits at ICAMPAM 2024 will be available for viewing in the foyer.

Tuesday, June 18 1300-1730

Wednesday, June 19 0800-1830

Thursday, June 20 0800-1800

Friday, June 21 0800-1330

Attendees will have easy access to exhibitor representatives as these exhibits are located in the coffee area in proximity to the posters.

SOCIETY GENERAL MEMBERSHIP MEETING

The International Society for the Measurement of Physical Behaviours (ISMPB) general membership meeting is scheduled from 18:20- 19:00 on Wednesday, June 19 in Amphitheatre A. All members of the society and prospective members are encouraged to attend and contribute to the meeting.

ISMPB MEMBERSHIP

Membership in ISMPB is open to everyone from around the world involved in the measurement of free-living physical behaviour.

Membership fees support the mission of ISMPB in creating a vibrant community bringing together people from a wide variety of backgrounds and expertise, including researchers, clinicians, therapists, signal analysts, computational scientists and commercial companies.

MEMBER BENEFITS

- Register for Society Meetings at reduced registration rates
- Support a vibrant and independent Society
- Become connected with leading experts in the field
- Opportunity to get involved as an ISMPB Committee member
- Vote in annual elections for the Board of Directors
- Stand for election to the Board of Directors
- Eligible for student awards at the Society Meetings (best oral and best poster)
- Access to online resources and conference proceedings
- Opportunity to post news and information on related events

MEMBER CATEGORIES

Regular / Post Doc Members (\$175)

Open to any person who is engaged in research related to areas of interest of the Society.

Student Members (\$95)

Open to any student enrolled in degree granting programs at institutions of higher education

The next membership term will run from October 1, 2024 to September 30, 2026.

INTERNET ACCESS

Wireless internet access is available on campus and each attendee has been assigned a username and password. This is located on the back of your name badge.

If you encounter any technical issues while using the app, please contact Whova directly by emailing support@whova.com.

AWARDS

ISMPB will offer four student awards at ICAMPAM 2024. Two awards for best poster presentation by a student and two awards for best oral presentation by a student at ICAMPAM 2024.

Recipients will be chosen from a panel of researchers based on several criteria including:

- creativity and originality of research
- clarity of presentation
- level of understanding

SPECIAL EVENTS

OPENING RECEPTION

**AT PICCADILLY BRASSERIE, TERASSE, AND BAR
TUESDAY, JUNE 18 18:30-20:00**

Join us at the Piccadilly to meet up with old friends and be introduced to new ones! Delegate admission to this Opening Reception is included in your conference fees. You are welcome to bring a guest with advance ticket purchase. Tickets are \$40.

EARLY CAREER RESEARCH EVENT

AT THE ROOF

WEDNESDAY, JUNE 19 19:30-21:00

The Early Career Event is a unique opportunity to expand your research network by bringing together, around a relaxed activity, young researchers and invited experienced researchers participating in ICAMPAM. During this event, you will be introduced to a famous Breton game in an alternative and ephemeral place in Rennes! Wait and see!

Please note that the number of places is limited to 40. The fee is \$40 each and only open to conference attendees in their early career.

EXHIBITOR TALKS IN AMPHITHEATRE A

THURSDAY, JUNE 20 11:45-12:45

11:50 ActiGraph: LEAPing Ahead with Multisensor Technology
Presented by: Liz Ball, Sales Development Representative, ActiGraph

12:00 Movisens

12:05 Activinsights

12:15 SAMMed

12:20 SENS: SENS motion, discretely monitoring physical activity
Presented by: Kasper Lykkegaard, CEO and Co-Founder, SENS

12:45 Empatica-McRoberts

12:35 ActivPal

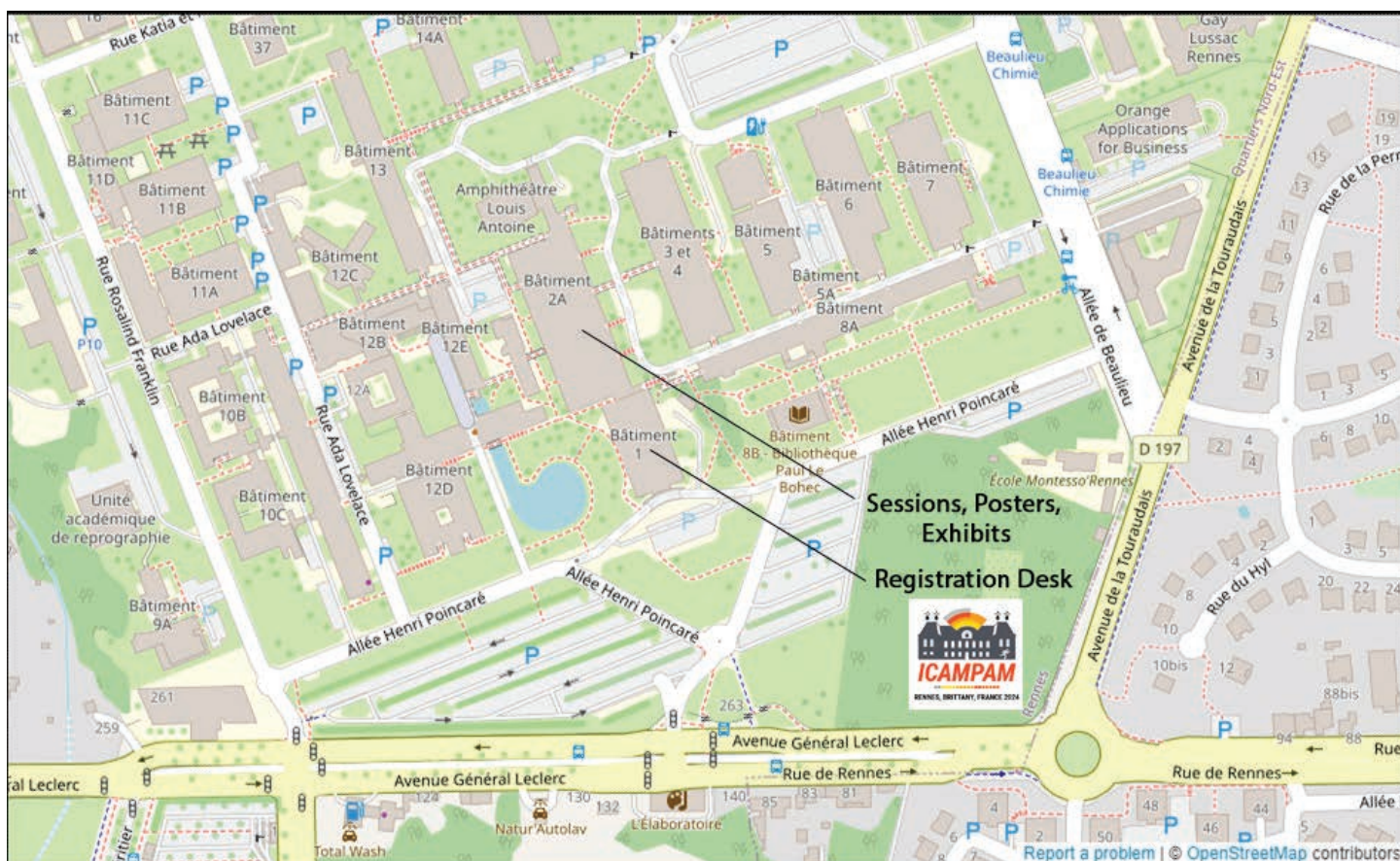
EVENING SOCIAL EVENT

AT PRISON ST. MICHELLE

THURSDAY, JUNE 20 19:30-22:00

Are you ready to travel back in time? For the festive evening of ICAMPAM 2024, you will discover the famous Saint-Michel prison (PSM) located in the historic heart of Rennes! The PSM opened in the 15th century but rest assured, it closed at the end of the 19th century. The atmosphere is now much more relaxed, as the PSM is now an essential place for Rennes' festive nights! Join us for a festive time around a cocktail dinner. Tickets \$80.

VENUE LOCATION



PRE-CONFERENCE WORKSHOPS

Tuesday, June 18, 2024

9:30 – 11:00am

Workshop 1

Amphitheatre A

OBJECTIVELY MEASURING ARM ACTIVITY USING WEARABLE SENSORS

Sahel Akbari^{1,2}, Danny Lemmers^{1,2,3}

¹Erasmus Medical Centre, ²Technical University of Delft, ³Erasmus University Rotterdam

In this workshop, we will discuss the process of tailored measurement of Upper Extremity (UE) activity monitoring and assessment at home, utilizing wearable sensors. The primary focus will be on movement patterns of stroke patients and how to extract clinically relevant measures from these patterns. By the end of the workshop, participants will:

- Gain insight into the principles of rehabilitation after a stroke, as well as the clinical requirements and challenges associated with monitoring UE activity in stroke patients at home.
- Understand the possibilities and challenges involved in utilizing IMU sensor data to assess UE activity.
- Apply acquired knowledge to process IMU data and extract clinically relevant measures from wearable sensors.

Workshop 2

Location: Amphitheatre B

ACTIMETRIC R PACKAGE: APPLYING ML-BASED ALGORITHMS TO ACCELEROMETER RAW DATA

Jairo H. Migueles¹, Matthew Ahmadi²

¹University of Granada, ²University of Sydney

In this workshop, we will discuss the use of ML-based algorithms in accelerometer-based physical activity measurement and how did we get here – the path from some R scripts to a complete R package. By the end of the workshop, participants will:

- Gain insight into the purpose and functionalities of the package.
- Understand the opportunities and challenges of an R package to share methods and how to contribute to the development of actimetric.
- Apply acquired knowledge: learn basic R skills required; use cases/exercises; and looking at the output via datasets and visualizations.

Workshop 3

Location: Amphitheatre C

LEARNINGS FROM THE UK BIOBANK STUDY

Aiden Doherty¹, Adam Lewandowski², Alaina Shrives³

¹University of Oxford, ²UK Biobank, ³National Cancer Institute

The collection of wrist-worn accelerometer data in 100,000 UK Biobank participants 10 years ago has transformed how we conduct research. In this workshop we will discuss the study design of UK Biobank, share example uses of the resource, and welcome input around ideas to further enhance this global research resource in future. By the end of this workshop participants will learn:

- The background to UK Biobank (Adam Lewandowski, Deputy Chief Scientist, UK Biobank)
- How to use UK Biobank accelerometer data to learn new features for human activity recognition tasks (Aiden Doherty, University of Oxford)
- How to use UK Biobank for physical activity epidemiological analysis (Alaina Shreves, National Cancer Institute)

11:30am – 1:00pm

Workshop 4

Location: Amphitheatre A

AT THE CROSSROADS OF POPULATION MEASUREMENT OF PHYSICAL ACTIVITY: A DISCUSSION FORUM WITH THE WORLD HEALTH ORGANIZATION

Fiona Bull¹, Rick Troiano¹, Juana Willumsen¹

¹World Health Organization (WHO)

This workshop will introduce participants to the global work of WHO on promoting physical activity (including global policy guidance, guidelines, policy implementation tools and metrics and instruments for population monitoring). The workshop will focus in detail on the current programme of work on updating global guidance on the measurement and surveillance of population prevalence of physical inactivity and related behaviours.

The session will include an overview presentation from WHO followed by a panel discussion including Q&A. Participants will be invited to contribute and inform the development of a consensus on an open-source algorithm suitable to produce the metrics necessary to report on current and anticipated future WHO guidelines. Discussion will scope the requirements for validation of an algorithm for use with raw acceleration data collected from a generic wearable device suitable for surveillance in low-income countries.

Panel:

Charles Matthews *National Cancer Institute, National Institutes of Health*

Sarah Keadle *California Polytechnic Institute San Luis Obispo*

Jairo Migueles *University of Granada*

Alex Rowlands *University of Leicester*

Aiden Doherty *University of Oxford*

Workshop 5

Location: Amphitheatre B

REPRODUCIBLE DATA ANALYSIS AT SCALE USING CONTAINERS ON CENTREPOINT

Ali Neishabouri¹

¹Head of Data Science, ActiGraph

This workshop focuses on the importance of creating robust pipelines for reproducible analysis of the large amounts of data collected using wearables. We will discuss primarily use of docker containers to encapsulate algorithms that can run on ActiGraph's CentrePoint platform.

- Understand challenges faced when trying to reproduce analysis with various library/OS versions.
- Gain insight on how ActiGraph's CentrePoint platform allows to integrate third-party containers.
- Learn how to encapsulate algorithms into containers that can run on any machine, including on CentrePoint.

Workshop 6

Location: Amphitheatre C

THE DAILY ACTIVITY CYCLE: ARE WE MORE THAN THE SUM OF OUR STEPS?

David Loudon¹, Douglas Maxwell¹, Craig Speirs¹, Thomas Poirier²

¹PAL Technologies Ltd., ²SAMMed

In this workshop we will explore the daily patterns of sleeping, sitting, standing, and stepping and how these can be quantified as measures of participation and participant ability. By the end of this workshop, participants will have considered:

- What defines the daily activity cycle?
- What are the differences between behavioural and biometric outcomes?
- What are upright behaviours, how might we characterise them, and why are they important?

2024 ICAMPAM DETAILED PROGRAM

Please note that the program is subject to change. See the program online at ismpb.org/program

TUESDAY, JUNE 18, 2024

- 0830-1800 Registration Desk Open
Location: Foyer
- 0830-1730 Speaker Ready Room Open
Location: Foyer

Pre-Conference Workshops

- 0930-1100 **Workshop 1**
Location: Amphitheatre A
OBJECTIVELY MEASURING ARM ACTIVITY USING WEARABLE SENSORS
Sahel Akbari *Erasmus Medical Centre and Technical University of Delft*
Danny Lemmers *Erasmus Medical Centre, Technical University of Delft, and Erasmus University Rotterdam*
- 0930-1100 **Workshop 2**
Location: Amphitheatre B
ACTIMETRIC R PACKAGE
Jairo H. Migueles *University of Granada*
Matthew Ahmadi *University of Sydney*
- 0930-1100 **Workshop 3**
Location: Amphitheatre C
LEARNINGS FROM THE UK BIOBANK STUDY
Aiden Doherty *University of Oxford*
Adam Lewandowski *UK Biobank*
Alaina Shreves *National Cancer Institute*
- 1100-1130 Refreshment Break & Networking
Location: Foyer
- 1130-1300 **Workshop 4**
Location: Amphitheatre A
**AT THE CROSSROADS OF POPULATION MEASUREMENT OF PHYSICAL ACTIVITY:
A DISCUSSION FORUM WITH THE WORLD HEALTH ORGANIZATION**
Fiona Bull *World Health Organization*
Rick Troiano *World Health Organization*
Juana Willumsen *World Health Organization*
- 1130-1300 **Workshop 5**
Location: Amphitheatre B
REPRODUCIBLE DATA ANALYSIS AT SCALE USING CONTAINERS ON CENTREPOINT
Ali Neishabouri *ActiGraph*

- 1130-1300 **Workshop 6**
 Location: Amphitheatre C
THE DAILY ACTIVITY CYCLE: ARE WE MORE THAN THE SUM OF OUR STEPS?
David Loudon *ActivPal*
Douglas Maxwell *ActivPal*
Craig Speirs *ActivPal*
Thomas Poirier *SAMMed*
- 1300-1400 Pre ordered box lunch pick up
 Location: Foyer
- 1300-1730 Exhibits Open
 Location: Foyer
- 1400-1530 **Symposium 1**
 Location: Amphitheatre A
METHODOLOGICAL CONSIDERATIONS WHEN EXAMINING PHYSICAL ACTIVITY AND SEDENTARY BEHAVIORS IN OLDER ADULT POPULATIONS
 Discussant: **Annemarie Koster** *Maastricht University*
- S.1.1 COMPARING PHYSICAL ACTIVITY AND INACTIVITY INTENSITY CUT POINT APPROACHES FOR OLDER ADULTS: THE STUDY OF MUSCLE, MOBILITY AND AGING (SOMMA)**
Reagan Garcia *University of Pittsburgh*
- S.1.2 EXPANDED METRICS FOR UNDERSTANDING PHYSICAL ACTIVITY IN OLDER ADULTS**
Jennifer Schrack *Johns Hopkins Bloomberg School of Public Health*
- S.1.3 HOW DO ACCELEROMETER STUDY SPECIFICATIONS AFFECT ESTIMATED AGE-RELATED DIFFERENCES IN MOVEMENT**
Lacey Etzkorn *Johns Hopkins Bloomberg School of Public Health*
- 1400-1530 **Symposium 2**
 Location: Amphitheatre B
ACTIGRAPH OPEN-SOURCE ACTIVITY COUNTS: (HOW MUCH) DOES IT MATTER TO THE PHYSICAL BEHAVIOUR MEASUREMENT FIELD?
 Discussant: **Phillipa Dall** *Glasgow Caledonian University*
- S.2.1 THE MOTIVATION FOR A SPECIAL ISSUE IN JOURNAL FOR THE MEASUREMENT OF PHYSICAL BEHAVIOR DISCUSSING OPEN-SOURCE ACTIGRAPH COUNTS**
Alexander Montoye *Alma College*
- S.2.2 COMPARABILITY OF 24-HOUR ACTIVITY CYCLE OUTPUTS FROM ACTIGRAPH COUNTS GENERATED IN ACTILIFE AND RSTUDIO**
Kimberly Clevenger *Utah State University*
- S.2.3 COEXISTING WITH COUNTS: WHERE DO COUNTS STAND IN THE AGE OF RAW DATA?**
Samuel Lamunion *National Institutes of Health*
- S.2.4 RESCALING ACTIGRAPH COUNTS INTO SI UNITS AND EVALUATING THE INTRINSIC PROPERTIES WITH ALTERNATIVES MEASURES**
Jan Brønd *University of Southern Denmark*

1400-1530

Symposium 3

Location: Amphitheatre C

RECENT APPLICATIONS OF COMPOSITIONAL DATA ANALYSIS (CODA) FOR ANALYZING THE HEALTH ASSOCIATIONS OF 24-HOUR MOVEMENT BEHAVIORS

- S.3.1 ASSOCIATIONS OF 24-H MOVEMENT BEHAVIORS WITH INCIDENCE OF CARDIOVASCULAR RISK FACTORS: THE FINNISH RETIREMENT AND AGING STUDY
Kristin Suorsa *University of Turku*
- S.3.2 COMPOSITIONAL ASSOCIATIONS OF 24-HOUR PHYSICAL ACTIVITIES, SEDENTARY TIME, AND SLEEP WITH DEPRESSIVE SYMPTOMS IN URBAN AND RURAL ENVIRONMENTS
Marjo Seppänen *University of Oulu*
- S.3.3 DO 24-HOUR MOVEMENT BEHAVIORS PREDICT CHANGES IN QUALITY OF LIFE IN OLD AGE?
Antti Löppönen *University of Jyväskylä*

1530-1600

Refreshment Break & Networking

Location: Foyer

1600-1730

Symposium 4

Location: Amphitheatre A

PREDICTING FALL RISK USING DIGITAL TECHNOLOGIES: CURRENT STATE OF THE ART AND FUTURE RESEARCH DIRECTIONS

- S.4.1 DIGITAL MEASURES OF GAIT AND TURNING RELATED TO FALLS IN PARKINSON'S DISEASE: EFFECTS OF COGNITION AND FREEZING OF GAIT
Martina Mancini *Oregon Health & Science University*
- S.4.2 DIGITAL TECHNOLOGIES FOR FALL RISK ASSESSMENT IN COMMUNITY-DWELLING OLDER SUBJECTS
Luca Palmerini *University of Bologna*
- S.4.3 MEASURING SPONTANEOUS ACTIVITY, SLEEP, AND HEART RATE WITH WEARABLE SENSORS TO IMPROVE PREDICTION OF INCIDENT FALLS IN OLDER SUBJECTS: THE DARE FALLSPREDICT PROJECTS
Alessandro Silvani *University of Bologna*

1600-1730

Symposium 5

Location: Amphitheatre B

ADVANCING PHYSICAL ACTIVITY RESEARCH: NOVEL ACCELEROMETER METRICS, COMPARATIVE ANALYSIS, AND FUTURE DIRECTIONS IN COHORT STUDIES

Discussant: **Joanne McVeigh** *Curtin University*

- S.5.1 ACCELEROMETER-DERIVED METRICS IN MIDDLE-AGED AUSTRALIAN ADULTS AND THEIR ASSOCIATIONS WITH HEALTH OUTCOMES: THE RAINE STUDY
Bingyan Pang *Curtin University*
- S.5.2 PHYSICAL ACTIVITY MONITORING IN THE CARDIOVASCULAR RISK IN YOUNG FINNS STUDY – RESULTS AND NEXT STEPS
Janne Kulmala *Jamk University of Applied Sciences*
- S.5.3 PHYSICAL ACTIVITY BEHAVIOURS AND THEIR ASSOCIATIONS WITH ADIPOSITY AND TYPE 2 DIABETES RISK: DATA FROM THE MIDDLE-AGED SOWETO COHORT (MASC)
Lisa Micklesfield *University of Witwatersrand*

1600-1730

Symposium 6

Location: Amphitheatre C

BEYOND THE AVERAGE: THE POWER OF TEMPORAL PATTERNS OF PHYSICAL ACTIVITY ACCUMULATION

S.6.1 BEYOND STEP COUNTS: EXPLORING THE COMPOSITION AND TEMPORAL DISTRIBUTION OF UPRIGHT AND STEPPING EVENTS

Joshua Culverhouse University of Exeter

S.6.2 ONE STEP BEYOND 'TOTAL STEPS': HOW PEOPLE ACCUMULATE THEIR TOTAL DAILY STEPS IS JUST AS IMPORTANT AS HOW MANY STEPS THEY TAKE FOR IDENTIFYING EARLY DECLINES IN PHYSICAL FUNCTION: A LONGITUDINAL STUDY OF OLDER ADULTS

Brad Metcalf University of Exeter

S.6.3 DAILY PATTERNS OF PHYSICAL ACTIVITY ACCUMULATION OVER 6 MONTHS

Joss Langford Activinsights Ltd

1830-2000

Opening Reception

Location: Picadilly Restaurant

ActiGraph™

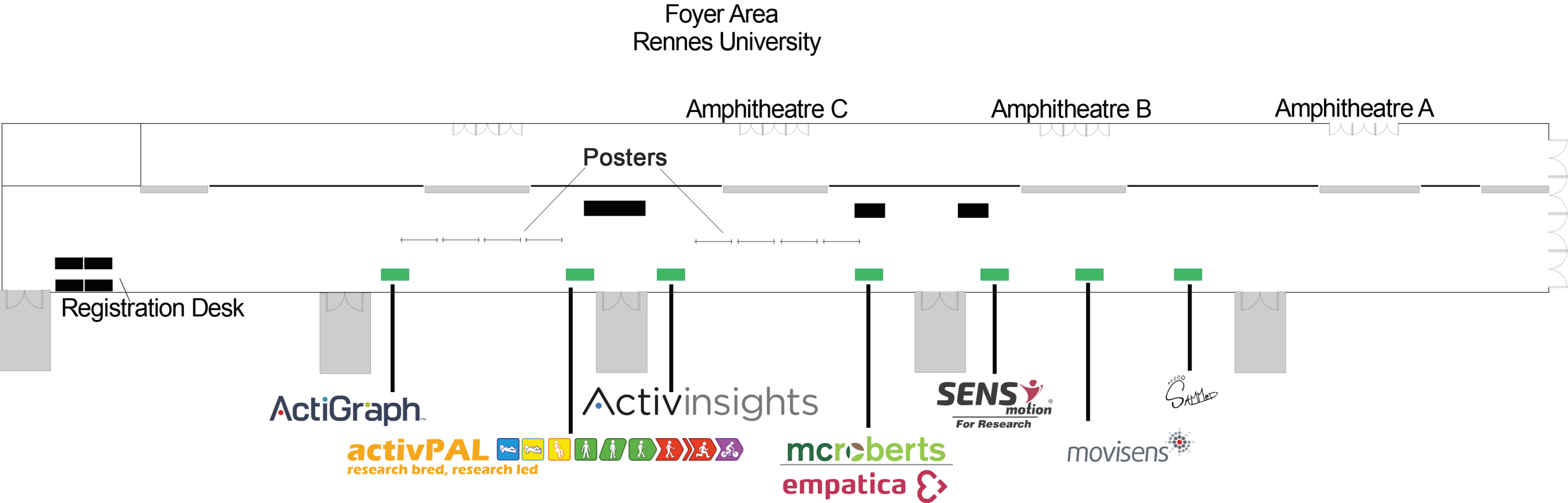
Pioneering the Digital
Transformation of Clinical
Research with Fit-for-Purpose
Wearable Technology

VISIT THE ACTIGRAPH STAND TO LEARN ABOUT
THE ALL NEW, MULTI-SENSOR ACTIGRAPH LEAP™

THEACTIGRAPH.COM



VENUE FLOOR PLAN



VENUE CAMPUS MAP

Campus de BEAULIEU
263 av. du Général Leclerc, 35042 Rennes

- 01

ACCUEIL, Présidence, Scolarité sciences et Philosophie, Services centraux
- 02

Amphithéâtres A, B, C, D, E, Louis-Antoine
Hall des amphithéâtres, hall des examens
- 02a

TP informatique
- 03

TP zoologie
- 04

TP botanique
Collections et musée de zoologie
- 05

TP géologie, électronique
Collections et musée de géologie
- 06

TP physique, électronique
- 07

TP chimie
- 08

IUT Carrières sociales, IUT GEA
Salles d'examen, SMUT, DIL
- 08b

Bibliothèque Paul Le Bohec
Salle Condorcet
- 09

Pôle doctoral, salle immersive Inria
Salle visioconférence, Pepite Bretagne
- 09b

PNRB - Pôle numérique
Rennes Beaulieu, Suptice
Service Formation continue et alternance
- 10

ISCR - Institut des sciences chimiques de Rennes, organisations syndicales
La Rustine de Beaulieu
- 10a

Amphithéâtre Daniel Grandjean
IPR - mécanique
- 11

IPR - Institut de physique de Rennes
UFR Sciences et propriétés de la matière
- 11a

CRMPO - Centre régional de mesures physiques de l'Ouest
- 11bcd

IETR - Institut d'électronique et des technologies du numérique
- 12

Accueil IRISA, Centre Inria
- 12a

IRISA - Institut de recherche en informatique et systèmes aléatoires
Centre Inria de l'Université de Rennes
Amphithéâtre G
- 12a

ISTIC - UFR Informatique et électronique
Amphithéâtre P
DSI - Direction du système d'information
- 13

UFR Sciences de la vie et de l'environnement, IGDR - Institut génétique et développement de Rennes
- 14

OSUR, ECOBIO, Géosciences Rennes
- 15

Géosciences Rennes, OSUR
- 16

Pôle mécanique
- 19

Local courrier - colis
- 20

DIL - Direction de l'Immobilier et de la Logistique
- 20a

DPR - Direction de la prévention des risques
- 21

DEVE - Pôle vie étudiante
SSE - Service santé des étudiants
- 22

UFR Mathématiques, LTSI - Laboratoire du traitement et du signal
- 23

IRMAR - Institut de recherche mathématique de Rennes
- 24

CRéAAH - Centre de recherche en archéologie, archéosciences, histoire
Agence comptable, DRH
- 25

Recherche biologie environnement
- 26

SCELVA - Service commun d'étude des langues vivantes appliquées
- 27

Pôle pédagogique licences, salles d'examen
- 28

Amphithéâtres F, G, H, I, J, K, L'Aperté
- 28a

Salles de cours modulaires
- 29

TP biologie
- 30

TP physique
- 31

TP chimie
- 32

TP biochimie, salles d'enseignement
- 32a

UFR Philosophie, Amphithéâtre 12
DEVE - Direction des études et vie étudiante
- 33

Maison du projet
- 34

Permanence week-end sport (SIUAPS - Service interuniversitaire des activités physiques et sportives)
- 35

SIUAPS - Gymnase Beaulieu
Salle de sport
- 36

Le Diapason, Service culturel
Gymnase BLB, Dojo, Salle de Boxe
- 37

Serres botaniques
- 40

BU Beaulieu, salles informatiques
TP informatique
- 41

ESIR - École supérieure d'ingénieurs de Rennes, amphithéâtres M, N, L
- 42

Hall des associations étudiantes

- P

stationnements
- B

bus
- m

métro
- bicycle

parking vélo
- fork

restauration
- i

accueil
- triangle

entrée principale
- dot

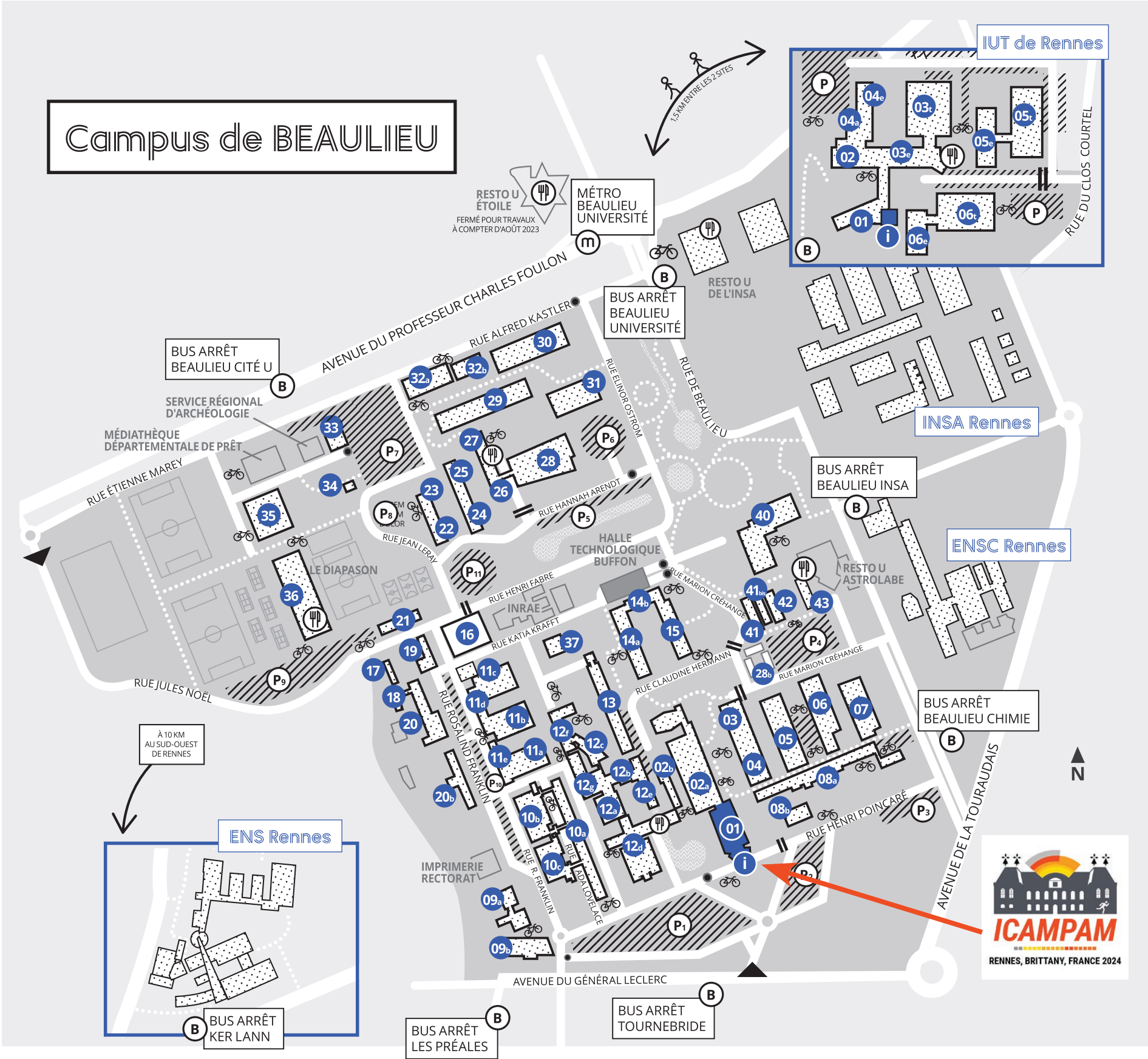
plot anti-circulation
- grey

projet en cours
- white

salles modulaires
- border

ACCÈS RÉSERVÉ AUX VÉHICULES AUTORISÉS

septembre 2023



WEDNESDAY, JUNE 19, 2024

0730-1900 Registration Desk Open
Location: Foyer

0730-1730 Speaker Ready Room Open
Location: Foyer

0800-1830 Exhibits Open
Location: Foyer

0830-0900 **Welcome to ICAMPAM 2024**
Location: Amphitheatre A

0900-1000 **Hans Bussmann Lecture**
Location: Amphitheatre A

LET'S GET MOVING: TRANSITIONING FROM SELF-REPORT TO DEVICE-BASED MEASUREMENT AND MONITORING OF GLOBAL PHYSICAL ACTIVITY LEVELS

Fiona Bull *World Health Organization*

This lecture is in recognition of the contribution of Professor Hans Bussmann, who in 2008 organised and ran the first ICAMPAM. This meeting was so successful that it inspired others to organise subsequent highly successful ICAMPAMs. Hans' visionary and brave initiative led directly to the formation of our Society and our international journal.

1000-1015 Transition Period

1015-1115 **Oral Session 1: CLINICAL POPULATIONS 1**
Location: Amphitheatre A

O.1.1 THE RELATIONSHIP BETWEEN GAIT CAPACITY AND GAIT PERFORMANCE IN NEUROLOGICAL PATIENTS

Michelle Van Mierlo *Sint Maartenskliniek*

O.1.2 WEARABLE SENSORS CAN CAPTURE CHANGES IN TURNING MOBILITY IN DAILY LIFE AFTER MTBI REHABILITATION

Laurie King *Oregon Health Science University*

O.1.3 ALTERATIONS IN THE DAILY LIVING GAIT AND MOBILITY DURING THE DAY AND NIGHT AMONG INDIVIDUALS WITH CEREBELLAR ATAXIA, SCA3: AN EXPLORATORY STUDY

Jeffery Hausdorff *Tel Aviv Sourasky Medical Center and Tel Aviv University*

O.1.4 ASSOCIATIONS BETWEEN REAL WORLD GAIT AND PAIN IN INDIVIDUALS SCHEDULED FOR KNEE ARTHROPLASTY: FEASIBILITY STUDY

Frank Bruning *Sint Maartenskliniek*

O.1.5 EXPLORING THE RELATIONSHIP BETWEEN FRAGMENTATION AND CIRCADIAN RHYTHM OF DAILY-LIVING PHYSICAL ACTIVITY, FUNCTIONAL SYSTEM DISABILITY SCORES, AND PHYSICAL FATIGUE IN PEOPLE WITH MULTIPLE SCLEROSIS

Irina Galperin *Tel Aviv University and Tel-Aviv Sourasky Medical Center*

1015-1115 **Oral Session 2: MEASUREMENT INNOVATIONS**
Location: Amphitheatre B

O.2.1 BUILDING AN INTERACTIVE ONLINE NETWORK APPLICATION FOR HARMONISING PHYSICAL ACTIVITY DATA FROM WEARABLES

Matthew Pearce *University of Cambridge*

O.2.2 LET'S DO IT AGAIN: A NEW TOOL FOR ADDING SPATIOTEMPORAL CONTEXT TO HUMAN MOVEMENT BEHAVIOUR DATA

Josef Heidler *University of Southern Denmark*

- O.2.3 ANNOTATING VALIDATION STUDIES USING VISION-LANGUAGE MODELS**
Abram Schonfeldt *University of Oxford*
- O.2.4 PILOT EVALUATION OF THE ROBUSTNESS OF ECOLOGICAL MOMENTARY ASSESSMENT LABELING FOR FREE-LIVING PHYSICAL ACTIVITY DATA**
Luis Sigcha *University of Limerick*
- O.2.5 A NOVEL APPROACH TO TRUE FREE-LIVING VALIDATION OF ACCELEROMETER-MEASURED MOVEMENT BEHAVIORS**
Kimberly Clevenger *Utah State University*

1015-1115

Oral Session 3: PREDICTING HEALTH OUTCOMES

Location: Amphitheatre C

- O.3.1 ACCELEROMETER-MEASURED DAILY PHYSICAL ACTIVITY AND RISK OF INCIDENT CANCER IN THE UK BIOBANK PROSPECTIVE COHORT**
Alaina Shreves *University of Oxford & US National Cancer Institute*
- O.3.2 TEMPORAL ANALYSES OF PHYSICAL BEHAVIOR AND THE ASSOCIATION WITH HEALTH INDICATORS**
Xin Zheng *Amsterdam UMC*
- O.3.3 CAN MEASURES OF HABITUAL ACTIVITY INTENSITY STRATIFY PRIMARY SJOGREN'S SYNDROME PARTICIPANTS WITH PERSISTENT FATIGUE? INSIGHTS FROM THE BRC TOOLS STUDY**
Chloe Hinchliffe *Newcastle University*
- O.3.4 CAN WEARABLE ACCELEROMETERS IMPROVE THE PREDICTION OF CARDIOVASCULAR DISEASE?**
Adam Sturge *University of Oxford*
- O.3.5 ESTIMATING BMI FROM THE COMPLEXITY OF GAIT DYNAMICS IN FREE LIVING DATA**
James Williamson *MIT Lincoln Laboratory*

1015-1115

Oral Session 4: ALGORITHMS 1

Location: Room 12-13

- O.4.1 PROOF OF CONCEPT: EXTRACTING PHYSICAL BEHAVIOURS FROM 24-HOUR NARRATIVE DATA USING INTEGRATED LARGE LANGUAGE MODELS AND A PHILOSOPHY OF EVENT APPROACH**
Usman Sani Dankoly *Glasgow Caledonian University*
- O.4.2 VARIATION IN STEP COUNTS BY DIFFERENT PREDICTION METHODS IN RELATION TO EPIDEMIOLOGIC STUDIES AND PUBLIC HEALTH TRANSLATION**
Charles Matthews *National Cancer Institute, National Institutes of Health*
- O.4.3 IDENTIFYING PHYSICAL ACTIVITY TYPES USING THIGH-WORN ACCELEROMETRY: COMPARISON OF TWO NO-CODE CLASSIFICATION METHODS**
Claas Lendt *German Sport University Cologne, Auckland University of Technology*
- O.4.4 DO WE NEED AGE-SPECIFIC HUMAN ACTIVITY RECOGNITION MODELS FOR CLASSIFICATION OF ACTIVITY TYPES IN CHILDREN AND ADOLESCENTS? EFFECT OF AGE AND LENGTH OF ACTIVITY BOUTS**
Ellen Marie Bardal *Norwegian University of Science and Technology*
- O.4.5 HEART RATE MONITORING FROM MOTION-CORRUPTED PHOTOPLETHYSMOGRAPHY: A BENCHMARK STUDY OF OPEN-SOURCE ALGORITHMS**
Marcello Sicbaldi *Università di Bologna*

1115-1145

Refreshment Break & Networking

Location: Foyer

1145-1245

Oral Session 5: PARKINSON'S

Location: Amphitheatre A

- O.5.1 EXPLORING THE IMPACT OF DOPAMINERGIC MEDICATION ON REAL WORLD DIGITAL MOBILITY OUTCOMES IN PEOPLE WITH PARKINSON'S**
Emma Packer *Newcastle University*
- O.5.2 WALKING RECOGNITION IN PARKINSON'S DISEASE POPULATIONS USING WRIST-WORN ACCELEROMETERS**
Aidan Acquah *University of Oxford*
- O.5.3 CAN LOCALISATION INFORMATION IMPROVE OUR UNDERSTANDING OF REAL-WORLD WALKING IN PEOPLE WITH PARKINSON'S AND OLDER ADULTS?**
Cameron Kirk *Newcastle University*
- O.5.4 HARNESSING WEARABLE CAMERAS AND COMPUTER VISION TO CONTEXTUALISE FREE-LIVING MOBILITY IN PARKINSON'S DISEASE**
Jason Moore *Northumbria University*
- O.5.5 DAILY-LIFE MEASURES OF GAIT AND TURNING ACROSS THE SPECTRUM OF NORMAL, PRODROMAL, EARLY AND MODERATE PARKINSON'S DISEASE**
Martina Mancini *Oregon Health & Science University*

1145-1245

Oral Session 6: DIGITAL MOBILITY

Location: Amphitheatre B

- O.6.1 REQUIREMENTS FOR RELIABLE ESTIMATES OF DIGITAL MOBILITY OUTCOMES OF WALKING ACTIVITY AND GAIT FROM A LOWER BACK INERTIAL MEASUREMENT UNIT IN A LARGE MULTI-COHORT STUDY**
Joren Buekers *ISGlobal*
- O.6.2 THE NUMBER OF DAYS REQUIRED FOR A RELIABLE ESTIMATE OF DIVERSE DIGITAL MOBILITY OUTCOMES FROM VARIOUS GAIT DOMAINS, DERIVED FROM A 1-WEEK WORN LOWER BACK SENSOR. ANALYSIS ACROSS DIFFERENT SUBJECT COHORTS**
Eran Gazit *Tel Aviv Sourasky Medical Center*
- O.6.3 WALKING SLOWLY – THE ACCURACY OF REAL-WORLD DIGITAL MOBILITY ESTIMATES AFTER A HIP FRACTURE**
Martin Berge *NTNU*
- O.6.4 DIGITAL MOBILITY OUTCOMES IN HIP FRACTURE PATIENTS THE FIRST YEAR AFTER HIP FRACTURE SURGERY**
Jorunn Helbostad *Norwegian University of Science and Technology*
- O.6.5 PREDICTING FUTURE FALLS THROUGH DIGITAL MOBILITY BIOMARKERS IN REAL-WORLD MONITORING OF COMMUNITY-DWELLING OLDER ADULTS**
Jose Albites-Sanabria *University of Bologna*

1145-1245

Oral Session 7: POST JOINT REPLACEMENT

Location: Amphitheatre C

- O.7.1 BRISK CADENCE IS POSSIBLE AND ENHANCED FOLLOWING A PHYSICAL ACTIVITY BEHAVIOR INTERVENTION AFTER TOTAL KNEE ARTHROPLASTY**
Rashelle Hoffman *Creighton University*
- O.7.2 IMPROVEMENTS IN PHYSICAL CAPACITY MAY NOT INDICATE REDUCTIONS IN REAL-WORLD SEDENTARY ACTIVITY: A LONGITUDINAL POST-TOTAL HIP ARTHROPLASTY STUDY**
Rashelle Hoffman *Creighton University*
- O.7.3 FEASIBILITY OF INSTRUMENTED INSOLES FOR LONG-TERM MONITORING OF GAIT AFTER TIBIAL FRACTURES**
Elke Warmerdam *Saarland University*

O.7.4 MONITORING REAL-WORLD GAIT TO EVALUATE CHANGES IN MOBILITY AFTER TOTAL KNEE ARTHROPLASTY

Frank Bruning *Sint Maartenskliniek*

O.7.5 EVALUATION OF REAL-WORLD MOBILITY RECOVERY AFTER HIP FRACTURE USING DIGITAL MOBILITY OUTCOMES

Monika Engdal *NTNU*

1145-1245

Oral Session 8: SEDENTARY BEHAVIOUR

Location: Room 12-13

O.8.1 VALIDATION OF AN ALGORITHM FOR SIT-TO-STAND AND STAND-TO-SIT IDENTIFICATION DURING ACTIVITIES OF DAILY LIVING

Jose Albites-Sanabria *University of Bologna*

O.8.2 PATTERNS OF SEDENTARY TIME ACCUMULATION ACCORDING TO AGE IN THE UNITED STATES: A 2003-2006 NHANES ANALYSIS

Pierre-Yves De Müllenheim *IFEPSA-UCO*

O.8.3 TESTING THE CONSENSUS METHOD FOR SEDENTARY TIME FROM A HIP-WORN ACCELEROMETER

Elyse Letts *McMaster University*

O.8.4 EFFECT OF BRIEF PEDALING BOUTS DURING ONE HOUR OF VIDEO GAME PLAY ON POPLITEAL ARTERY DIAMETER AND VELOCITY

Macey Dunn *Grand Valley State University*

O.8.5 IMPACT OF CUT POINT SELECTION ON LEVELS OF PHYSICAL ACTIVITY AND SEDENTARY TIME OF TODDLERS

Jill Marie Ferry *Ludwig Maximilian University*

1245-1400

Poster Session 1 with lunch

Location: Foyer

1400-1500

Invited Speaker

Location: Amphitheatre

A PHYSICAL ACTIVITY AND SEDENTARY BEHAVIOR PATTERNS IN OLD AGE: THEIR DETERMINANTS AND IMPACT ON CARDIOVASCULAR DISEASE AND MORTALITY

Séverine Sabia *National Institute of Health and Medical Science (Inserm U1153), and University College London*

1400-1500

Oral Session 9: INTERVENTIONS

Location: Amphitheatre B

O.9.1 ASSESSING PHYSICAL BEHAVIOUR IN A COMMUNITY LED LIFESTYLE INTERVENTION IN A REMOTE AUSTRALIAN ABORIGINAL COMMUNITY: ELCHO ISLAND TEACHINGS

Bronwyn Clark *The University of Queensland*

O.9.2 HOME VS COMMUNITY STEPPING PATTERNS: A MEASURE OF PARTICIPATION

Lauren Gracey-Mcminn *University of Salford*

O.9.3 ENHANCING DIGITAL HEALTH EVALUATION: INTEGRATING INTENSIVE LONGITUDINAL MONITORING OF PHYSICAL ACTIVITY IN A RANDOMIZED CONTROLLED TRIAL – A CASE STUDY FROM THE DIPPAO RCT.

Alexandre Mazeas *University Grenoble Alpes*

O.9.4 INFLUENCE OF A TABLET-BASED, GAMIFIED EXERCISE APPLICATION ON PHYSICAL FUNCTION AND PHYSICAL ACTIVITY FOR OLDER ADULTS: A FEASIBILITY STUDY

Nina Skjæret-Maroni *Norwegian University of Science and Technology*

O.9.5 WEARABLE FITNESS TRACKERS FOR CONTINUOUS ACTIVITY MONITORING IN PATIENTS WITH HAEMOTOLOGICAL MALIGNANCIES UNDERGOING STEM-CELL TRANSPLANT: A 16-WEEK INTERVENTION STUDY

Christian Brakenridge *Swinburne University of Technology*

1400-1500

Invited Speaker

Location: Amphitheatre C

**COMPOSITIONAL OPTIMISATION OF MOVEMENT BEHAVIOURS:
CAN IT INFORM REAL-WORLD INTERVENTIONS?**

Dot Dumuid *University of South Australia*

1500-1530

Refreshment Break & Networking

Location: Foyer

1530-1700

Symposium 7

Location: Amphitheatre A

SEDENTARY BEHAVIOR – FROM METHODOLOGICAL ANALYSIS TO POPULATION SAMPLE AND EFFECTIVE INTERVENTIONS

S.7.1 MEASUREMENT OF SEDENTARY BEHAVIOR - THE OUTCOMES OF THE ANGLE FOR POSTURE ESTIMATION (APE) METHOD

Henri Vaha-Ypya *The UKK Institute for Health Promotion Research*

S.7.2 SEDENTARY BEHAVIOR AND ITS ASSOCIATIONS WITH INDICATORS OF METABOLIC HEALTH AMONG WORKING-AGED ADULTS

Pauliina Husu *The UKK Institute for Health Promotion Research*

S.7.3 MEDICAL AND PHYSIOLOGICAL EFFECTS OF REDUCED SITTING – A 6-MONTH RCT

Ilkka Heinonen *Turku University and Turku University Hospital*

S.7.4 A PERSONALIZED 3-MO E-HEALTH INTERVENTION INCREASED NUMBER OF DAILY STEPS AMONG PATIENTS OF ELECTIVE CARDIAC PROCEDURES

Sini Vasankari *Turku University Hospital*

1530-1700

Symposium 8

Location: Amphitheatre B

PHYSICAL BEHAVIOUR DETECTION FROM TRI-AXIAL ACCELEROMETRY USING WEARABLES AND SMARTWATCHES: DEVELOPMENT OF CLASSIFIERS AND EXTERNAL VALIDATION BASED ON ECOLOGICAL MOMENTARY ASSESSMENT IN THE WEALTH STUDY

Discussant: **Alan Donnelly** *University of Limerick*

S.8.1 THE WEALTH STUDY DESIGN FOR LABELED DATA ASSESSMENT

Christoph Buck *Leibniz Institute for Prevention Research and Epidemiology - BIPS*

S.8.2 CLASSIFICATION OF PHYSICAL BEHAVIOURS FROM THIGH-WORN ACCELEROMETRY

Luis Sigcha *University of Limerick*

S.8.3 ACCELEROMETRY AND AI: DEVELOPING BEHAVIOURAL (BIO) MARKERS

Alan Godfrey *Northumbria University*

S.8.4 CLASSIFICATION OF PHYSICAL BEHAVIOURS USING HIP- AND WRIST-WORN ACCELEROMETRY

Annika Swenne *Leibniz Institute for Prevention Research and Epidemiology*

1530-1700

Symposium 9

Location: Amphitheatre C

BIDIRECTIONAL ASSOCIATIONS OF 24-HOUR MOVEMENT BEHAVIOURS AND COGNITIVE FUNCTION AMONG OLDER ADULTS: IS IT REVERSE CAUSATION?

Discussant: **Paul Gardiner** *University of Queensland*

S.9.1 ASSOCIATIONS BETWEEN TRAJECTORIES OF COGNITIVE FUNCTION AND PHYSICAL ACTIVITY, SEDENTARY TIME, AND SLEEP IN OLDER ADULTS

Dori Rosenberg *Kaiser Permanente Washington Health Research Institute*

S.9.2 DETERMINANTS OF DEVICE-MEASURED MOVEMENT BEHAVIOURS IN A NATIONALLY REPRESENTATIVE COHORT OF OLDER ENGLISH ADULTS

Laura Brocklebank *University College London*

S.9.3 ASSOCIATIONS BETWEEN 20-YEAR MEMORY TRAJECTORIES AND DEVICE-MEASURED MOVEMENT BEHAVIOURS

Mikaela Bloomberg *University College London*

1530-1700

Symposium 10

Location: Room 12-13

HOW ARE CHILDREN REALLY USING THEIR DIGITAL MEDIA? HARNESSING THE POWER OF TECHNOLOGY TO OBJECTIVELY MEASURE TRUE SCREEN USE AND DETERMINE RELATIONSHIPS WITH SLEEP HEALTH

Discussant: **Tom Stewart** *Auckland University of Technology*

S.10.1 CAN WE HARNESS THE POWER OF TECHNOLOGY TO MEASURE TRUE SCREEN TIME?

Shay-Ruby Wickham *University of Otago*

S.10.2 FROM DUSK TO DAWN: DOES USING SCREENS BEFORE BED REALLY IMPAIR SLEEP IN ADOLESCENTS?

Rachael Taylor *University of Otago*

S.10.3 DOES GETTING LESS SLEEP INCREASE SCREEN TIME IN CHILDREN? ANALYSIS FROM THE DREAM CROSSOVER TRIAL

Rosie Jackson *University of Otago*

1700-1715

Transition Period

1715-1815

Keynote Speaker

Location: Amphitheatre A

INTENSIVE LONGITUDINAL MONITORING OF HUMAN BEHAVIORS APPLIED TO ENVIRONMENTAL HEALTH ISSUES

Guillaume Chevanne *Barcelona Institute for Global Health, ISGlobal*

1820-1900

ISMPB General Meeting

Location: Amphitheatre A

1930-2100

ECR Event

Location: The Roof

THURSDAY, JUNE 20, 2024

0800-1800 Registration Desk Open
Location: Foyer

0800-1730 Speaker Ready Room Open
Location: Foyer

0800-1800 Exhibits Open
Location: Foyer

0830-0930 **Keynote Speaker**
Location: Amphitheatre A

BEYOND BIG DATA: BALANCING KNOWLEDGE AND DATA FOR EFFECTIVE HUMAN ACTIVITY RECOGNITION
Kerstin Bach *Norwegian University of Science and Technology (NTNU)*

0930-0945 Transition Period

0945-1115 **Symposium 11**

Location: Amphitheatre A

PHYSIOLOGY-DRIVEN BEHAVIOUR ASSESSMENT

S.11.1 PHYSICAL DETERMINANTS OF DAILY PHYSICAL ACTIVITY IN OLDER ADULTS

Laura Karavirta *University of Jyväskylä*

S.11.2 OPERATIONALISING MECHANOBIOLOGY IN SKELETAL LOAD ASSESSMENT BASED ON FREE-LIVING ACCELEROMETRY

Timo Rantalainen *University of Jyväskylä*

S.11.3 FREE-LIVING SIT-TO-STAND KINEMATICS AS AN INDICATOR OF LOWER EXTREMITY PHYSICAL FUNCTION

Antti Löppönen *University of Jyväskylä*

S.11.4 PHYSIOLOGY-DRIVEN BEHAVIOUR ASSESSMENT

Henri Vähä-Ypyä *The UKK Institute for Health Promotion Research*

0945-1115 **Symposium 12**

Location: Amphitheatre B

NOVEL INSIGHTS INTO DAILY PHYSICAL ACTIVITY AND FUNCTION IN FITTEST-TO-FRAILEST OLDER ADULTS: FROM VALIDATION TO REAL WORLD PERFORMANCE

S.12.1 PHYSICAL PERFORMANCE IN THE HUNT4 70+ STUDY BY AGE AND EDUCATIONAL LEVEL

Kjerstin Melsæter *Trondheim Municipality, and Norwegian University of Science and Technology*

S.12.2 DEVICE-MEASURED PHYSICAL ACTIVITY IN 9,235 OLDER ADULTS ACCORDING TO AGE, SEX AND EDUCATION. THE HUNT STUDY.

Karen Sverdrup *Norwegian National Centre for Ageing and Health*

S.12.3 HOW OLDER ADULTS WALK IN DAILY LIFE IN RELATION TO AGE, SEX, AND LEVEL OF PHYSICAL FUNCTION - THE HUNT4 TRONDHEIM 70+ STUDY

Karoline Blix Grønvik *Norwegian University of Science and Technology*

S.12.4 DAILY PHYSICAL ACTIVITY AND TRAJECTORIES OF CARE SERVICES USE AMONG OLDER ADULTS: THE HUNT4 TRONDHEIM 70+ STUDY

Astrid Ustad *Norwegian University of Science and Technology*

Symposium 13

Location: Amphitheatre C

ADVANCES AND FUTURES OF 24 HOUR ANALYTICS

S.13.1 USING AI TO OPTIMISE 24H TIME USE

Dot Dumuid University of South Australia

S.13.2 BAYESIAN MULTILEVEL COMPOSITIONAL DATA ANALYSIS: A GENTLE INTRODUCTION

Flora Le Monash University

S.13.3 DATA-DRIVEN ANALYSIS OF COMPOSITION OF TIME SPENT IN PHYSICAL ACTIVITY INTENSITIES AND SEDENTARY BEHAVIORS

Vahid Farrahi TU Dortmund Univeristy

S.13.4 FUNCTIONAL REGRESSION AND ISOTEMPORAL SUBSTITUTION ANALYSIS IN THE CONTEXT OF TIME-USE DATA

Paulína Jašková Palacký University Olomouc

Refreshment Break & Networking

Location: Foyer

Exhibitor Talks

Location: Amphitheatre A

1150 ActiGraph:

LEAPing Ahead with Multisensor Technology

Liz Ball

ActiGraph

1200 movisens

movisens

1205 Activinsights:

How to complement vital research with Insights on Activity, Sleep and Lifestyle

Joss Langford

Activinsights

1215 SAMMed

SAMMed

1220 SENS:

SENS motion, discretely monitoring physical activity

Kasper Lykkegaard

SENS
motion
For Research

1225 McRoberts-Empatica

mcr Roberts

empatica

1235 ActivPal

activPAL
research bred, research led

1245-1400 **Poster Session 2 with lunch**

Location: Foyer

1400-1500 **Early Career Invited Speaker**

Location: Amphitheatre A

DEVELOPING TOOLS TO DECIPHER WEARABLE SENSOR DATA: LESSONS LEARNT BY A PHYSICAL ACTIVITY RESEARCHER

Jairo Migueles *University of Granada*

1400-1500 **Oral Session 10: CLINICAL POPULATIONS 2**

Location: Amphitheatre B

O.10.1 WRIST ACCELEROMETER MEASURES CORRELATE WITH DISEASE ACTIVITY IN RHEUMATOID ARTHRITIS AND ARE ROBUST TO FREQUENCY DOWNSAMPLING

Cameron Kirk *Newcastle University*

O.10.2 THE BENEFITS OF PASSIVE MONITORING: A COMPARATIVE ANALYSIS OF WALKING IN REAL WORLD USING PATIENT REPORTED MEASURES

Brett Meyer *Medidata Solutions*

O.10.3 CAN FEEDBACK FROM INERTIAL MEASUREMENT UNITS ENHANCE FOOT STRIKE ANGLE AND FORWARD PROPULSION IN INDIVIDUALS RECOVERING FROM STROKE?

Noel Keijsers *Sint Maartenskliniek*

O.10.4 A MACHINE LEARNING CONTEST ENHANCES AUTOMATED FREEZING OF GAIT DETECTION AND REVEALS TIME-OF-DAY EFFECTS

Amit Salomon *Tel Aviv Sourasky Medical Center*

O.10.5 MEASURING AND PREDICTING DAILY PHYSICAL ACTIVITY IN PEOPLE WITH CHRONIC DISEASES: THE ROLE OF EXERCISE-RELATED AFFECTIVE RESPONSES AND PERCEIVED EXERTION

Layan Fessler *University Grenoble Alpes*

1400-1500 **Oral Session 11: SLEEP**

Location: Amphitheatre C

O.11.1 CONCURRENT VALIDITY OF THE ACTIVPAL CREA ALGORITHM AND SELF-REPORT DIARY TO MEASURE TIME IN BED AND SLEEP IN OLDER ADULTS

Philippa Dall *Glasgow Caledonian University*

O.11.2 WEARABLES AND NEARABLES MEASURING SLEEP AND PHYSICAL ACTIVITY AMONG AUTISTIC ADULTS

Phoebe Wan *Curtin University*

O.11.3 SUBJECTIVE REPORTS OF SLEEP TIME: VALIDATION AGAINST ACCELEROMETRY-BASED ESTIMATES

Carolina Murd *National Institute for Health Development*

O.11.4 USING SMARTPHONE SCREEN TIMES TO ESTIMATE SLEEP TIMES IN UNIVERSITY STUDENTS

Michael Schmidt *University of Georgia*

O.11.5 SLEEP TIMING AND VARIABILITY: ASSOCIATIONS WITH OTHER COMPONENTS OF THE 24-HOUR ACTIVITY CYCLE

Michael Schmidt *University of Georgia*

1500-1530 **Refreshment Break & Networking**

Location: Foyer

1530-1630

Oral Session 12: CHILDREN AND YOUNG PEOPLE

Location: Amphitheatre A

- O.12.1 COMPARISON OF MACHINE LEARNING TECHNIQUES FOR ESTIMATING ENERGY EXPENDITURE IN PRESCHOOL CHILDREN FROM GERMANY AND CANADA THROUGH ACCELEROMETRY ASSESSMENT**
Hannah Coyle-Asbil *University of Guelph*
- O.12.2 ASSESSING 24-HOUR MOVEMENT BEHAVIORS IN 0-4-YEAR-OLD CHILDREN: A COMPARATIVE ANALYSIS OF ACCELEROMETERS AND PROXY-REPORT USING THE MY LITTLE MOVES APP**
Anne Lettink *Amsterdam UMC*
- O.12.3 RESPONSIVENESS OF ACCELEROMETER-BASED PHYSICAL ACTIVITY ESTIMATES IN YOUTH**
Nicholas Remillard *University of Tennessee Knoxville*
- O.12.4 ASSESSING THE ACCURACY OF ACTIVITY CLASSIFICATION USING THIGH-WORN ACCELEROMETRY: A VALIDATION STUDY OF ACTIPASS IN CHILDREN**
Claas Lendt *German Sport University Cologne, Auckland University of Technology*
- O.12.5 MACHINE LEARNING MODELS TO DETECT PHYSICAL ACTIVITY AND SEDENTARY TIME FROM A HIP-WORN ACCELEROMETER IN TODDLERS**
Elyse Letts *McMaster University*

1530-1630

Oral Session 13: ALGORITHMS 2

Location: Amphitheatre B

- O.13.1 OPTIMIZED MACHINE LEARNING MODELS FOR THE ESTIMATION OF ENERGY EXPENDITURE BASED ON PHYSIOLOGICAL SIGNALS MEASURED WITH WEARABLES**
Wouter Bijmens *Maastricht University*
- O.13.2 VALIDATION OF TWO NOVEL HUMAN ACTIVITY RECOGNITION MODELS FOR TYPICALLY DEVELOPING CHILDREN AND CHILDREN WITH CEREBRAL PALSY**
Marte Tørring *Norwegian University of Science and Technology*
- O.13.3 INNOVATIVE REAL-WORLD GAIT DETECTION IN HUNTINGTON'S DISEASE: UNRAVELING THE CHALLENGES OF CHOREA THROUGH DEEP LEARNING**
Dafna Schwartz *Tel-Aviv Sourasky Medical Center*
- O.13.4 ACTIVITY RECOGNITION USING DATA FROM WEARABLE SENSORS AND SMART SHOE DEVICES: CLASSIFYING KICK-BOARD AND SKATEBOARD COMMUTING BEHAVIORS**
Julien Tripette *Ochanomizu University*
- O.13.5 QUANTIFYING DAILY HEAD TURNS AND HEAD-TRUNK COUPLING IN HEALTHY ADULTS**
Selena Cho *University of Utah*

1530-1630

Oral Session 14: 24 HOUR BEHAVIOURS

Location: Amphitheatre C

- O.14.1 IDENTIFICATION OF NUMBER OF DAYS NEEDED TO MEASURE RELIABLY FRAGMENTATION OF REST ACTIVITY PATTERNS: A PSEUDO-SIMULATION STUDY BASED ON WHITEHALL ACCELEROMETER SUB-STUDY**
Ian Danilevich *INSERM*
- O.14.2 FEASIBILITY OF CONTINUOUS 24-HOUR ACCELEROMETRY ACROSS PREGNANCY**
Sylvia Badon *Kaiser Permanente Northern California*
- O.14.3 COMBINED ASSOCIATIONS OF TYPE 2 DIABETES AND VIBRATION SENSATION LOSS WITH DEVICE-MEASURED PHYSICAL ACTIVITY AND SEDENTARY BEHAVIOUR. – THE MAASTRICHT STUDY**
Touria Ahaouari Lemrabet *Maastricht University*

**O.14.4 THE ASSESSMENT OF THE 24-HOUR PHYSICAL BEHAVIOR CONSTRUCT VIA WEARABLES:
A SYSTEMATIC REVIEW OF VALIDATION STUDIES.**

Marco Giurgiu *Karlsruhe Institute of Technology*

**O.14.5 DAILY PHYSICAL ACTIVITY AND VIDEO GAME AND TV TIME ON BODY MASS INDEX IN YOUTH:
NATIONAL YOUTH FITNESS SURVEY**

Meghan Imhoff *Grand Valley State University*

1630-1645 Transition Period

Keynote Speaker

Location: Amphitheatre A

ASSESSING THE CONTEXT OF PHYSICAL ACTIVITY BEHAVIOR

Jasper Schipperijn *University of Southern Denmark*

Evening Social Event

Location: Prison St. Michelle

Delivering Activity, Sleep, and Lifestyle Insights

Our world-leading wearable, the GENEActiv provides **unfiltered, high-resolution raw data** eliminating subjective bias in studies and enabling groundbreaking discoveries in Public Health research.

GENEActiv Features:

- 'Fit and Forget' wearable
- Up to 2 months of battery life
- Ambient light and temperature sensor
- Wearable on multiple body locations
- Suitable for all age groups
- Open-source analytics and open SDKs available

Activinsights

Reach out today to receive a quote for your upcoming research project!

www.activinsights.com | +44 (0) 1480 862082 | info@activinsights.com



Validated in over



FRIDAY, JUNE 20, 2024

0800-1400 Registration Desk Open Foyer

0800-1100 Speaker Ready Room Open
Location: Room name TBA

0800-1330 Exhibits Open
Location: Foyer

0830-0930 **Keynote Speaker**
Location: Amphitheatre A
THE PAST, PRESENT, AND FUTURE OF SLEEP ASSESSMENT AND MONITORING
Kim Meredith-Jones *University of Otago*

0930-0945 Transition Period

0945-1115 **Symposium 14**
Location: Amphitheatre A
INTEGRATING INTERSECTIONALITY IN BEHAVIORAL DATA ANALYSIS: LABDA ADVANCING HEALTH INSIGHTS THROUGH 24-HOUR ACTIVITY DATA
Discussant: **Jasper Schipperijn** *University of Southern Denmark*

S.14.1 INTEGRATING INTERSECTIONALITY IN BEHAVIORAL DATA ANALYSIS: LABDA ADVANCING HEALTH INSIGHTS THROUGH 24-HOUR ACTIVITY DATA
Mai Chin A Paw *Child and Adolescent Public Health Research and Innovation*

S.14.2 DEVELOPING A UNIVERSAL TAXONOMY OF 24-HOURS HUMAN ACTIVITY: AN INTERSECTIONAL HUMAN CENTERED APPROACH
Sebastien Chastin *Glasgow Caledonian University, Ghent University*

S.14.3 OPEN-SOURCE LABDA TOOLBOX OF ADVANCED ANALYSES METHODS FOR WEARABLE DATA
Marian Paiva Marchiori *Southern Denmark University*

0945-1115 **Symposium 15**
Location: Amphitheatre B
EXPLORING THE IMPACT OF USING WEARABLE MOVEMENT SENSORS IN COLLEGIATE SPORT: FROM RESEARCH TO PRACTICE AND REHABILITATION TO COMPETITION
Discussant: **Dinesh John** *Northeastern University*

S.15.1 SETTING THE STAGE: CREATING ACADEMIC-ATHLETIC PARTNERSHIPS THAT ADDRESS PRACTICAL NEEDS AND RESEARCH QUESTIONS IN SPORT SCIENCE
Karin Pfeiffer *Michigan State University*

S.15.2 THE APPLICATION OF WEARABLE DEVICES AND BIO-MECHANICAL DATA TO INFORM PROGRAMS AND DECISION-MAKING IN ELITE SPORTS
William Burghardt *Michigan State University*

S.15.3 USING DATA TO UNDERSTAND COLLEGIATE ATHLETE TRAINING VOLUMES AND PREDICTORS OF PERFORMANCE
Alexander Montoye *Alma College*

S.15.4 BEYOND THE CLINIC: INTEGRATING WIRELESS ULTRASOUND AND SENSOR TECHNOLOGIES FOR KNEE HEALTH ASSESSMENT
Matt Harkey *Michigan State University*

0945-1115

Symposium 16

Location: Amphitheatre C

ACCURACY: THE HOLY GRAIL OF PHYSICAL BEHAVIOR ASSESSMENT—HOW BIG IS THE PROBLEM, ARE THERE SOLUTIONS, AND HOW HAVE OTHER DISCIPLINES SOLVED THIS ISSUE?

Discussant: **Aiden Doherty** *University of Oxford*

S.16.1 MEASUREMENT OF PHYSICAL ACTIVITY AND SEDENTARY BEHAVIOR IN EPIDEMIOLOGIC STUDIES: DOES ACCURACY MATTER?

Charles Matthews *National Cancer Institute, National Institutes of Health*

S.16.2 A FRAMEWORK FOR RIGOROUS, CONSISTENT AND SYSTEMATIC DEVELOPMENT AND EVALUATION OF WEARABLE SENSORS

Sarah Keadle *California Polytechnic State University San Luis Obispo*

S.16.3 HOW DO OTHER MEDICAL AND RESEARCH DEVICES DEVELOP ACCURACY STANDARDS?

Kong Chen *NIDDK, NIH*

1115-1145

Refreshment Break & Networking

Location: Foyer

1145-1245

Invited Speaker

Location: Amphitheatre A

UNCOVERING THE NEUROPSYCHOLOGICAL BARRIERS TO PHYSICAL ACTIVITY BEHAVIOR

Boris Cheval *École normale supérieure de Rennes*

1145-1245

Oral Session 15: WORKPLACE

Location: Amphitheatre B

O.15.1 ACCURACY AND ACCEPTABILITY OF THE DESK POSITIONING SYSTEM (DPS): A NEW SIT-STAND DESK MEASUREMENT DEVICE

George Thomas *The University of Queensland*

O.15.2 DEVICE-BASED MEASUREMENT OF OFFICE-BASED PHYSICAL BEHAVIOUR: A SYSTEMATIC REVIEW

Bronwyn Clark *The University of Queensland*

O.15.3 ASSOCIATION BETWEEN DEVICE MEASURED PHYSICAL ACTIVITY AT WORK AND SELF-PERCEIVED PHYSICAL WORK DEMANDS AMONG HOSPITAL WORKERS IN NORWAY - THE STUNTH STUDY

Roar Fenne *Norwegian University of Science and Technology*

O.15.4 SITTING, STANDING AND ACTIVE BEHAVIORS OF OFFICE WORKERS PARTICIPATING IN AN ERGONOMIC INTERVENTION: HOW CLOSE DO THEY GET TO A 'JUST RIGHT' ERGONOMIC BALANCE?

Luiz A. Brusaca *Federal University of São Carlos - UFSCar*

O.15.5 THE EFFECT OF A CO-DESIGNED EIGHT-WEEK WORKPLACE HEALTH PROMOTION INITIATIVE ON OCCUPATIONAL SEDENTARY TIME, PHYSICAL ACTIVITY AND GLUCOSE CONTROL WITH ADULTS WHO HOLD DESK-BASED OCCUPATIONS: PRELIMINARY BASELINE RESULTS

Aidan Buffey *University of Limerick*

1145-1245

Oral Session 16: MEASUREMENT INNOVATIONS 2

Location: Amphitheatre C

O.16.1 QUANTIFYING THE INTENSITY OF FREE-LIVING PHYSICAL ACTIVITY IN ABSOLUTE AND RELATIVE TERMS: IMPROVING UNDERSTANDING OF DIFFERENCES IN ACTIVITY BY AGE AND ASSOCIATIONS WITH MORTALITY

Alex Rowlands *University of Leicester*

O.16.2 DEVELOPMENT OF A SCREENING TOOL TO IDENTIFY SELF-REPORT AND DEVICE-BASED MEASURES OF HABITUAL PHYSICAL ACTIVITY FOR USE IN A SYSTEMATIC REVIEW: THE OPTIMA STUDY

Philippa Dall *Glasgow Caledonian University*

O.16.3 AN INTERSECTIONAL APPROACH TOWARDS ACCELEROMETER-BASED PHYSICAL BEHAVIOUR PATTERN ANALYSIS: SEQUENCE MAPPING

Mari Sone *Amsterdam UMC*

O.16.4 IDENTIFICATION OF CIRCADIAN RHYTHM PROFILES IN OLDER ADULTS: A COMPREHENSIVE APPROACH USING DATA FROM THE WHITEHALL II ACCELEROMETER SUB-STUDY

Sam Vidil *EpiAging, CRESS, INSERM*

O.16.5 COMPARATIVE EVALUATION OF ECOLOGICAL MOMENTARY ASSESSMENT (EMA), GLOBAL PHYSICAL ACTIVITY QUESTIONNAIRE (GPAQ), AND BOUCHARD'S PHYSICAL ACTIVITY RECORD (BAR) FOR MEASURING PHYSICAL ACTIVITY: A MULTILEVEL MODELING APPROACH

Jung Min Noh *Seoul National University*

1245-1250

Transition Period

1250-1315

Awards Presentation & Closing Remarks

Location: Amphitheatre A



WE SPECIALIZE IN
Scientific, Academic & Research
Societies and their Conferences

Need help managing your Conference or Association?



CONFERENCE MANAGEMENT

From conception to delivery and post conference review, we are here to help you plan, prepare and deliver an outstanding conference.



ASSOCIATION MANAGEMENT

As a busy researcher and scientist, you've already got a lot on your plate without having to worry about managing your society. Step up and lead, knowing we can help.



CONFERENCE MANAGEMENT

Simplify your membership sign-ups, abstract submissions, conference registrations and exhibitor bookings with our payment processing enabled, integrated set of tools.



CONFERENCE MANAGEMENT

Let us help make you look great with a modern, interactive website for your Society or Conference.



Find out how we can help



office@podiumconferences.com

WWW.PODIUMCONFERENCES.COM



+1 800.472.7644



KEYNOTE SPEAKERS

Fiona Bull *World Health Organization (WHO)*

Professor Fiona Bull MBE, PhD, is the Head of the Physical Activity Unit in the Department of Health Promotion at the World Health Organization (WHO) Headquarters in Geneva, Switzerland. At WHO, Professor Bull leads a team working on the cross-cutting agenda of promoting more participation in physical activity via active transport, sports and everyday activities through advancing science, policy, and practice. Dr Bull led the development of the Global Action Plan on Physical Activity 2018-2030: More Active People for a Healthier World, the Global Guidelines on Physical Activity and Sedentary Behaviours and the recent Global Status Report on Physical Activity 2022.



Hans Bussmann Lecture: LET'S GET MOVING: TRANSITIONING FROM SELF-REPORT TO DEVICE-BASED MEASUREMENT AND MONITORING OF GLOBAL PHYSICAL ACTIVITY LEVELS

In 2018, a global target was set to reduce physical inactivity levels by 15% (relative to 2010 levels). Tracking progress is essential for robust public health action and for holding governments and stakeholders accountable for promoting physical activity. This presentation will highlight the World Health Organization's (WHO) efforts to support countries in developing and implementing policies that encourage physical activity.

The presentation will focus on WHO's current agenda, which aims to strengthen the measurement and surveillance of physical activity, sedentary behavior, and sleep patterns in populations. It will explore the origins of the global target and discuss ongoing efforts to develop a consensus on using wearable devices in population health monitoring systems. Through these initiatives, WHO seeks to enhance the accuracy and reliability of data, ultimately driving more effective public health strategies to combat physical inactivity worldwide.

This lecture is in recognition of the contribution of Professor Hans Bussmann, who in 2008 organised and ran the first ICAMPAM. This meeting was so successful that it inspired others to organise subsequent highly successful ICAMPAMs. Hans' visionary and brave initiative led directly to the formation of our Society and our international journal.



Guillaume Chevance *Barcelona Institute for Global Health, ISGlobal*

Guillaume Chevance is an interdisciplinary researcher with a first MSc in Sport Sciences, a second in Health Psychology, and a Ph.D. in Human Movement Sciences from the University of Montpellier (France). At the beginning of his research journey, he studied motivation towards health-related behaviours. He then completed a postdoc at the University of California San Diego (US) with a team interested in the design of digital behaviour change interventions.

Guillaume is mainly interested in the dynamics of health behaviour change, such as physical activity, eating behaviors, and sleep, in a context of climate change mitigation and adaptation. For that purpose, he uses digital technologies and related methods to better understand what is going on in our daily lives. He is currently Assistant Professor at the Barcelona Institute for Global Health, ISGlobal, where he leads the eHealth group.

INTENSIVE LONGITUDINAL MONITORING OF HUMAN BEHAVIORS APPLIED TO ENVIRONMENTAL HEALTH ISSUES

This presentation will focus on the benefits of intensive longitudinal monitoring of human behaviors. In the introduction, I will explore topics such as sampling frequency, time series analysis, and complexity-related concepts like early warning signals and dynamical indicators of resilience. In the second part of the talk, I will present concrete applications of intensive longitudinal techniques to environmental health issues, including active transportation, sustainable diets, and the connection between heat and sleep.

Kerstin Bach *Norwegian University of Science and Technology (NTNU)*

Kerstin is a professor in artificial intelligence at the Department of Computer Science at NTNU. Her research interests are Machine Learning and Artificial Intelligence and is currently deputy head of the Data and Artificial Intelligence group, program manager of the Norwegian Research Center for AI Innovation (NorwAI), and associated with the Norwegian Open AI Lab. She was awarded a Dr. rer. nat. (summa cum laude) in Computer Science from the University of Hildesheim, Germany in 2012. Kerstin's main research interests are data-driven decision support systems as well as knowledge-intensive Case-Based Reasoning. She is the chair of the German Society for Computer Science's Special Interest Group on Knowledge Management, co-chair of the AI4EU gender board, and a board member of the Norwegian AI society.



BEYOND BIG DATA: BALANCING KNOWLEDGE AND DATA FOR EFFECTIVE HUMAN ACTIVITY RECOGNITION

Over the past years Machine Learning and Deep Learning models have become more and more popular to process sensor data to automatically recognize human activity. In her keynote, Bach will give an overview of the latest development of Human Activity Recognition (HAR) using Machine Learning methods. She will discuss the data requirements for creating models that can identify physical activities and sleep. Bach and her group have been working on the Norwegian HUNT4 accelerometer dataset and she will share their experience on using labeled and unlabeled data to build models used in public health research. Moreover, she will discuss how providing benchmark datasets can attract researchers from other fields and facilitate interdisciplinary collaborations.



Jasper Schipperijn *University of Southern Denmark*

ASSESSING THE CONTEXT OF PHYSICAL ACTIVITY BEHAVIOR

Jasper Schipperijn is a Professor in Active Living Environments at the Department of Sports Science and Clinical Biomechanics, University of Southern Denmark. He has been leading the World Playground Research Institute since 2022. He has an MSc degree in Forest and Nature Management from Wageningen University, The Netherlands, and a PhD degree in Greenspace Management from the University of Copenhagen, Denmark.

His research interests revolve around three main topics: playgrounds, conducting multi-disciplinary intervention studies to create active living environments, and developing tools and methods that make it possible to measure active living and the environment it takes place in. Jasper has contributed to over 150 peer-reviewed articles and was President of the International Society for Physical Activity and Health (ISPAH) from 2020-2022. Providing guidance and support for PhD students working with device-based data on physical activity behaviour is an important part of his job.

Kim Meredith-Jones *University of Otago*

Kim Meredith-Jones, an Associate Professor at the University of Otago, (New Zealand), specializes in evaluating 24-hour movement patterns, particularly focusing on objective sleep assessment. Leading major research projects involving over 2000 participants, she has played a pivotal role in assessing physical activity and sleep.

As an invited member of academic panels, Kim contributed to both the 2018 and 2022 NZ Physical Activity Report Cards for Children and Youth, including contributions to assessing sleep patterns in NZ children. Her expertise also extends to consulting on optimal measurement methods for sleep across a wide range of randomized controlled trials, including studies on movement behaviours in infants and toddlers and the effects of probiotics on sleep and gut health in adults. Kim is recognized as an authority in her field, having been an invited speaker at prestigious events like ISBNPA 2019, INTUE 2019, and Sleep in Aotearoa 2021 and 2023.



THE PAST, PRESENT, AND FUTURE OF SLEEP ASSESSMENT AND MONITORING

Sleep's impact on health underscores the need for reliable measurement tools to accurately assess duration and efficiency. Inaccurate data can distort associations between sleep and conditions like obesity, diabetes, cardiovascular diseases, and mental health disorders. In her keynote, Associate Professor Meredith-Jones explores existing methods and emerging technologies for subjective and objective sleep evaluation. Accurate measurement is crucial for understanding the relationship between insufficient sleep and various health outcomes. The presentation will discuss contemporary implementations of sleep tech and future possibilities, emphasizing the importance of having the right tools for measuring sleep duration and quality in a study-specific context.

INVITED SPEAKERS



Séverine Sabia *National Institute of Health and Medical Science (Inserm U1153), and University College London*

Séverine Sabia is a research professor in epidemiology at the National Institute of Health and Medical Science (Inserm) in France. Her main research domain is on health behaviours, including physical activity and sleep, with a particular interest in methodology. She set up the Whitehall II accelerometer study in 2012 and has led the methodological and substantive research to study the role of objectively measured physical activity and sleep for ageing outcomes. She is a contributor of the GGIR R package for analyses of raw accelerometer. She now leads a project on circadian rhythm and dementia using data from a general population and memory centre patients, funded by the European Commission.

PHYSICAL ACTIVITY AND SEDENTARY BEHAVIOR PATTERNS IN OLD AGE: THEIR DETERMINANTS AND IMPACT ON CARDIOVASCULAR DISEASE AND MORTALITY

This presentation will discuss how research on physical activity and sedentary behavior in old age has moved from a sole focus on time in moderate-to-vigorous physical activity to a broad range on movement behavior features over the last decade. This will be illustrated by examples from the Whitehall II accelerometer study on findings for cardiovascular and mortality outcomes

Dot Dumuid *University of South Australia*

Dot Dumuid's research seeks to identify the healthiest way to spend our time across daily activities such as sleeping, screen time and exercise. Because there are only 24 hours in any day, this involves a balancing act between activities. Dot Dumuid's work develops novel analytical models that explore how to get the balance right, not only for one aspect of health (e.g., obesity), but for overall health and wellbeing.



COMPOSITIONAL OPTIMISATION OF MOVEMENT BEHAVIOURS: CAN IT INFORM REAL-WORLD INTERVENTIONS?

Optimisation can identify the “best” movement behaviour compositions for one or more outcomes. Yet, these optimal behaviour targets can be impossible for some (perhaps most) people to achieve. Personalisation of the optimisation solution can provide more feasible targets. In this presentation we will explore some of the existing and emerging methods for compositional optimisation, and how optimised time-allocation solutions could be shared with populations. As an example, we will consider the Australian Small Steps towards Dementia Prevention study, which is currently trialling a co-designed interactive personalised time-use optimisation tool among older adults.

EARLY CAREER INVITED SPEAKERS

Jairo Migueles *University of Granada*

DEVELOPING TOOLS TO DECIPHER WEARABLE SENSOR DATA: LESSONS LEARNT BY A PHYSICAL ACTIVITY RESEARCHER

Jairo H. Migueles is a physical activity researcher with expertise in the measurement of physical activity using accelerometers and the comprehensive analysis of data from wearable sensor technologies. Currently, he holds a postdoctoral position at the University of Granada (Spain), while also engaging in freelance consultancy at <https://www.jhmigueles.com/>.

In 2020, Jairo successfully defended his PhD thesis, focusing on the measurement of physical activity using accelerometers and its implications for health. Jairo has authored over 90 peer-reviewed publications, including two “highly cited papers” recognized by Thomson Reuters Essential Science Indicators. Notably, Jairo contributed to the systematic reviews underpinning the 2020 World Health Organization’s Guidelines on Physical Activity and Sedentary Behavior.

At present, Jairo is heavily involved in development of methods for quantifying physical activity and sleep. He is co-developer of the R package ‘GGIR’ and the main developer of the R package ‘actilifecounts’, among other tools. His passion lies in the development of methodologies providing consultancy aimed at enhancing research in physical activity, sleep, and associated outcomes utilizing wearable sensor technologies.



Boris Cheval *École normale supérieure de Rennes*

UNCOVERING THE NEUROPSYCHOLOGICAL BARRIERS TO PHYSICAL ACTIVITY BEHAVIOR

Professor Boris Cheval’s research focuses on understanding the socio-economic and neuro-behavioral mechanisms that drive physical activity behaviors to improve health. He is the author of more than 100 articles and one book, all of which have made significant contributions to these areas of study.

After completing his initial academic training in France in the field of exercise and sport sciences, he embarked on a postdoctoral research position in the Methodology and Data Analysis Group (University of Geneva) to further develop his statistical expertise. During subsequent postdoctoral positions at the University Hospitals of Geneva and the Swiss National Center of Competence in Research LIVES, he deepened his investigations on physical activity, with a particular focus on health and socioeconomic inequalities.

In 2019, Dr. Cheval received a competitive grant from the Swiss National Science Foundation (SNSF) to advance his research at the Swiss Center for Affective Sciences (University of Geneva). In 2023, he joined the École normale supérieure de Rennes as an associate professor. Here, he continues his research on the neuropsychological factors influencing physical activity, while training students in research methods in the humanities and social sciences. He has received a Chaire de Recherche Rennes Métropole to study the neurobiological mechanisms that underlie affective response during physical effort.

activPAL
research bred, research led



palt.com

**JMPB welcomes
submissions from
ICAMPAM attendees
related to:**

- novel methods for device calibration & validation
- new sensor technology
- analytic advances in measurement & interpretation
- new outcomes for clinical studies
- applications of wearable monitors for assessing exposure &/or outcomes

Journal
FOR THE
Measurement
OF
Physical Behaviour
The official journal of ISMPB

SYMPOSIA ABSTRACTS

Symposium I

Tuesday, June 18

2:00-3:30pm, Amphitheatre A

METHODOLOGICAL CONSIDERATIONS WHEN EXAMINING PHYSICAL ACTIVITY AND SEDENTARY BEHAVIORS IN OLDER ADULT POPULATIONS

Chairs: **Nancy Glynn** University of Pittsburgh
Jennifer Schrack Johns Hopkins Bloomberg School of Public Health
Discussant: **Annemarie Koster** Maastricht University

S.1.1 - COMPARING PHYSICAL ACTIVITY AND INACTIVITY INTENSITY CUT POINT APPROACHES FOR OLDER ADULTS: THE STUDY OF MUSCLE, MOBILITY AND AGING (SOMMA)

Reagan Garcia University of Pittsburgh

Reagan Garcia¹, Benjamin Schumacher¹, Terri Blackwell², Megan Hetherington-Rauth², Peggy Cawthon², Anne Newman¹, Nancy Glynn¹

¹University of Pittsburgh, ²San Francisco Coordinating Center

OBJECTIVE: Raw accelerations may better discriminate physical activity (PA) intensities than proprietary activity counts in older adults. We compared two cut point methodologies applied to SOMMA participants. **METHODS:** Free-living accelerometry data was collected in SOMMA (N=879; n=830 with valid accelerometry data) over 7 consecutive 24-hour periods (valid wear ≥ 17 hours on ≥ 3 days) at baseline using an ActiGraph GT9X Link worn on the non-dominant wrist. Raw accelerations were aggregated into 60-second epochs and classified using two **METHODS:** 1) activity counts (counts/min) applying Montoye et al., 2020 PA cut points (sedentary activity[inactivity] < 2860 counts/min, light PA (LPA) 2680-3940 counts/min, moderate-to-vigorous PA (MVPA) > 3940 counts/min) and 2) Euclidean Norm Minus One, milli-gravitational units (mg), applying Migueles et al., 2021 PA cut points (inactivity < 18 mg, LPA $18 < 60$ mg, MVPA ≥ 60 mg). Total time in inactivity, LPA and MVPA were averaged over all valid days. Differences between methods were compared overall and stratified by sex using paired t-tests and Lin's concordance correlation coefficient. **RESULTS:** Count-based PA cut points credited SOMMA participants with 22% more time in inactivity (676.7 vs 550.4 min/day, $p < 0.01$), 73% less time in LPA (97.8 vs 339.9 min/day, $p < 0.01$), and 77% more time in MVPA (186.8 vs 105.3 min/day, $p < 0.01$) than acceleration-based PA cut points. Concordance between cut-point methods were moderate for inactivity ($r = 0.48$, 95% CI: 0.45, 0.52) and MVPA ($r = 0.49$, 95% CI: 0.45, 0.52), and weak for LPA ($r = 0.05$, 95% CI: 0.05, 0.06). Results were similar when stratified by sex. **CONCLUSIONS:** Cut point methodologies led to significantly different estimates of inactivity, LPA, and MVPA in a cohort of 830 older adults. Given the unique pattern of PA in older adults, the use of acceleration derived cut-points may be more appropriate for estimating PA intensity levels in this population.

S.1.2 - EXPANDED METRICS FOR UNDERSTANDING PHYSICAL ACTIVITY IN OLDER ADULTS

Jennifer Schrack Johns Hopkins Bloomberg School of Public Health

Jennifer Schrack¹, Anis Davoudi¹, Amal Wanigatunga¹

¹Johns Hopkins Bloomberg School of Public Health

Physical activity is a well-established predictor of health and longevity with aging. Accelerometers produce high-frequency data that capture multiple aspects of physical activity throughout the day. Yet historically the majority of accelerometry-based research has employed summary, threshold-based metrics to understand the associations of amount and intensity of daily physical activity with health outcomes. Although these metrics are important for understanding conformity with physical activity recommendations, they underutilize the complex dimensions of accelerometry data. Further, traditional summary metrics may not be appropriate for use in older study populations, as they were developed and validated in younger populations. This presentation will discuss the development and

implementation of alternative measures of physical activity and their associations with health outcomes in several large cohort studies of older adults. These measures include activity fragmentation, diurnal patterns of activity, and measures of activity stability and variability, which capture unique aspects of daily physical activity above and beyond traditional metrics. Specifically, results from the Study to Understand Vitamin D and Falls Reduction in You (STURDY) trial (N=688) will demonstrate how accelerometry-derived assessments of daily activity and gait cadence can be used to assess the risk of frailty and falls. Results from the Baltimore Longitudinal Study of Aging (BLSA (N=1,300)) will show how time-of-day and fragmentation metrics differ by cognitive status and mortality risk. Finally, data from the National Health and Aging Trends Study (NHATS (N=747)) will show novel approaches to illuminating differences in volume and patterns of daily movement by dementia status. Collectively, these results will demonstrate how novel accelerometry-derived metrics can be used to assess critical associations between daily movement and health outcomes, and highlight the need for continued development of new methodology in older populations.

S.1.3 - HOW DO ACCELEROMETER STUDY SPECIFICATIONS AFFECT ESTIMATED AGE-RELATED DIFFERENCES IN MOVEMENT

Lacey Etzkorn Johns Hopkins Bloomberg School of Public Health

Lacey Etzkorn¹, Amal Wanigatunga¹, Nicolas Knuth², Jennifer Schrack¹

¹Johns Hopkins Bloomberg School of Public Health, ²Towson University

OBJECTIVES: To describe age-related differences in movement measured by accelerometers and to describe how choice of accelerometer placement, raw data specifications (e.g., sampling rate), and movement intensity metric affect estimated age-related differences. **METHODS:** Twenty-two university students (18-30yrs) and twenty-two older adults (>60yrs) performed a sequence of eight tasks (e.g., usual pace walking, paced walking, sitting) for five minutes each while wearing GT9X Link accelerometers (Actigraph LLC, Pensacola, FL) on each wrist and an elastic waist belt. Raw accelerometer data (frequency = 80hz, range = 16g, resolution = 3.91mg) were coarsened to emulate data from a low-granularity device (1hz, 4g, 15.63mg). Movement intensity metrics (i.e., monitor-independent movement summary, activity counts, activity index, mean amplitude deviation, and Euclidean norm minus one) were derived for each minute of each task from both high and low-granularity data. Minute-level output was compared by age group using concordance and multi-level models. **RESULTS:** Using high-granularity accelerometer data, age-related differences in movement varied substantially by wear location. Measured at the dominant wrist, older adults moved with greater intensity during paced walking or while pushing a cart, but not while walking at usual or fast pace. When measured with the hip-worn accelerometer, older adults moved with less intensity during fast-paced walking. When using low-granularity data, information about movement intensity was best preserved when operationalized as mean amplitude deviation (MAD). **CONCLUSIONS:** Studies using hip-mounted and wrist-worn accelerometers may yield qualitatively different results about age-related differences in movement. However, results are likely to be robust to choices of movement intensity metric and accelerometer sampling frequency, resolution, and range..

Symposium II

Tuesday, June 18

2:00-3:30pm, Amphitheatre B

ACTIGRAPH OPEN-SOURCE ACTIVITY COUNTS: (HOW MUCH) DOES IT MATTER TO THE PHYSICAL BEHAVIOUR MEASUREMENT FIELD?

Chair: **Kimberly Clevenger** Utah State University

Discussant: **Phillipa Dall** Glasgow Caledonian University

S.2.1 - THE MOTIVATION FOR A SPECIAL ISSUE IN JOURNAL FOR THE MEASUREMENT OF PHYSICAL BEHAVIOR DISCUSSING OPEN-SOURCE ACTIGRAPH COUNTS

Alexander Montoye Alma College

Alexander Montoye¹

¹Alma College

INTRODUCTION: Early in 2022, the ActiGraph company (ActiGraph LLC, Pensacola, FL, USA) unexpectedly published a paper releasing the previously-proprietary details on how to generate their “activity count” from raw, triaxial

accelerometer data collected from body-worn accelerometers. In an effort to solicit and collect research which could help the field quickly and comprehensively understand the implications of the ActiGraph open-source count release, a special issue in the Journal for the Measurement of Physical Behaviour (JMPB) called “Understanding Open-Source ActiGraph Counts” was developed. This presentation details motivations for the special issue and the numbers and types of papers included. METHODS: Four experts in physical behaviour assessment conceived of and ultimately were assigned as guest editors for the JMPB special issue. The guest editors, in partnership with the JMPB journal, solicited submissions through targeted social media posts and by reaching out to researchers with known experience using ActiGraph counts and to authors of recent JMPB publications. In these solicitations, example study ideas were given for potential projects that could fit within the issue’s scope. Submissions were due by September 2023. RESULTS: A total of 12 papers have been or will likely be accepted for publication in the JMPB special issue. These papers include technical notes on count properties, tutorials on calculating counts from raw accelerometer data, original research using open-source counts, and commentaries on the conception of activity counts and what role they play in physical behaviour measurement. This special issue will be fully published in the middle of 2024. CONCLUSION: Studies in this special issue cover a variety of important topics and make important revelations about how counts compare to other metrics and if and how they may be used moving forward. Later presentations in this symposium will present specific findings from several studies included in the special issue and try to place counts in a broader context of available methods and a need to continue to work toward harmonizing approaches to accelerometer data collection, interpretation, and analysis.

S.2.2 - COMPARABILITY OF 24-HOUR ACTIVITY CYCLE OUTPUTS FROM ACTIGRAPH COUNTS GENERATED IN ACTILIFE AND RSTUDIO

Kimberly Clevenger *Utah State University*

Kimberly Clevenger¹, Jan Brønd², Samuel Lamunion³, Alexander Montoye⁴

¹Utah State University, ²University of Southern Denmark, ³National Institutes of Health, ⁴Alma College

INTRODUCTION: Data from ActiGraph accelerometers have long been downloaded into ActiLife software, where the company’s proprietary “activity counts” were generated in order to understand physical behaviour metrics such as physical activity, sedentary behaviour, and sleep. Alternatively, there are now RStudio packages to generate activity counts from any raw, triaxial accelerometer data and to implement additional data analysis steps available in ActiLife, like non-wear time identification. Use of RStudio can streamline data processing and enhance study replicability, but it is unclear if outcomes are comparable when generated in ActiLife and RStudio. We systematically compared activity counts and related physical behaviour metrics generated from ActiGraph accelerometer data using ActiLife or available packages in RStudio. METHODS: Participants were 129 undergraduate students, 18-24 years of age, who wore an ActiGraph GT9X at the non-dominant wrist and right hip. Triaxial activity counts and physical behaviour outputs (sleep, sedentary behaviour, physical activity) were calculated using multiple non-wear algorithms (Choi, Troiano, continuous zeroes), epochs (1-, 60-s), cut-points (hip, wrist), and sleep scoring algorithms (Sadeh, Cole-Kripke) in both ActiLife and RStudio. RESULTS: Counts were identical between ActiLife and the *agcounts* package for ~90% of days, with differences in daily counts occurring in the first or last days of a file and caused by a single epoch being different. In most cases (≥95% of days), non-wear times derived from ActiLife and the *accelerometry/PhysicalActivity* packages were identical. Mean differences in sedentary behavior were <0.3 min, although differences were as large as 68.1 min (corresponding to files in which differences in wear-time were correspondingly large). Differences for light, moderate, and vigorous intensities never exceeded 2 min, and <1% of differences in any of the activity intensities were greater than 1 min. Sleep outcomes were identical between ActiLife and the *actigraph.sleep* package except for 11 participants who wore their accelerometers over daylight savings time, which was not accounted for in ActiLife but was accounted for in RStudio. CONCLUSION: While outcomes were largely the same between ActiLife and the tested packages in RStudio, peculiarities in the application of non-wear algorithms to the first and last portions of a data file, differences in rounding, and handling of counts values on the borderline of activity intensities resulted in small but inconsequential differences in some files. However, it is notable that we made several iterative adjustments to the RStudio code to more closely replicate the ActiLife output. Transparent reporting of data analysis is needed and comparability of analytic approaches should be confirmed, as seemingly small decisions like selecting an option or entering a cut-point affects outcomes, not always in expected ways.

S.2.3 - COEXISTING WITH COUNTS: WHERE DO COUNTS STAND IN THE AGE OF RAW DATA?

Samuel Lamunion, *National Institutes of Health*

Samuel Lamunion¹, Alexander Montoye², Kimberly Clevenger³, Jan Brønd⁴

¹*National Institutes of Health*, ²*Alma College*, ³*Utah State University*, ⁴*University of Southern Denmark*

The physical behaviour research community has long benefitted from ActiGraph counts and their role in compiling a body of evidence to better characterize and understand physical behaviours and health. Despite frustrations and criticisms with counts over the years, the debut of counts in an open-source format sparked surprise and curiosity among researchers, raising questions about the implications of this format in an era prioritizing raw data. This portion of the symposium explores the advantages and drawbacks of open-source counts and their relevance in the raw data age. The physical behaviour assessment literature is saturated with methods for processing and analyzing counts data, which made open-source counts a welcome evolution for many users. One reason for this enthusiasm may be methodological adoptability which relates to accessibility, usability, and interpretability. For some users, these factors favor counts-based methods because of the ease of implementation. Conversely, the abundance of available counts-based methods makes data comparison challenging, even with the same outcome metric. However, there is also skepticism about the relevance of counts in the current physical behavior research landscape which emphasizes raw data methods. Additionally, current data collection protocols have largely shifted towards favoring wrist-worn devices for 24-hour behaviour analysis, where there are limited counts-based options available, especially in comparison to raw data methods with open-source and well-documented processes to facilitate their useability. Nevertheless, feasibility remains a pivotal factor for widespread adoption, regardless of the metric or outcome. The transition to open-source counts presents an opportunity for comparison with existing data, as evidenced by several manuscripts in the special issue. This comparison allows the physical behaviour research community to select the most suitable data format for their specific use case or research question. Furthermore, it facilitates the simultaneous evaluation of data using various open-source metrics, which could potentially culminate with or promote the development of consensus guidance or recommendations. While this may not directly advance data standardization or harmonization efforts, the availability of open-source counts for integration into existing data processing pipelines is a promising step forward for the field. The growing availability of and support for open-source methods for processing, analyzing, and interpreting physical behaviour data promotes transparency and furthers opportunities for data harmonization and standardization, even if only incremental. As the field continues to evolve, addressing useability concerns will be essential in maximizing the potential of open-source methods in advancing physical behaviour research.

S.2.4 - RESCALING ACTIGRAPH COUNTS INTO SI UNITS AND EVALUATING THE INTRINSIC PROPERTIES WITH ALTERNATIVES MEASURES

Jan Brønd *University of Southern Denmark*

Jan Brønd¹, Niels Christian Møller¹, Anders Grøntved¹

¹*University of Southern Denmark*

INTRODUCTION: There are currently several methods available to generate summary measures from raw acceleration and ActiGraph (AG) counts was the first method to be used at large scale. The original proprietary nature of the AG counts method is not the only aspect of the summary measure which has been criticized. An intensity leveling off with running above 12 km×h⁻¹ using hip worn devices, changes to firmware, sampling frequency issues and the arbitrary count units are all debated elements which has been identified by the research community. It is uncertain what impact the recent disclosure of the AG counts method will have on the research field, but it does provide a unique option to compare the internal processing strategy with alternatives. Therefore, the aim of this study is to identify and compare the intrinsic properties of AG counts and five alternatives (ENMO, MAD, AI, ROCAM, and MIMS) and how rescaling of AG counts into SI units can be used to facilitate direct interpretation with other summary measures. **METHOD:** Rescaling AG counts into SI units is evaluated using acceleration measured at the wrist and hip with 37 children performing a structured protocol in their natural environment. The structured protocol included three sedentary activities and moving activities like walking, running, biking, playground play, and basketball. Oxygen consumption was also measured using indirect calorimetry. **RESULTS:** A total of twelve intrinsic properties is identified which includes filtering, axes, temporal alignment, rectification, scaling, dead-band elimination, sampling frequency, gravity, peak saturation, aggregation, units and overlapping. From the intrinsic property overview and comparison there is clearly a large diversity in what properties is included in the summary measures. As an example, MAD and ENMO do not include basic elements like dead-band removal or filtering to eliminate digital noise, AG counts to use a resolution, dynamic range and dead-band removal which is not optimized with modern accelerometers, and MIMS as the only summary

measure to consider all intrinsic property elements. The epoch level activity protocol data for all summary measures is graphically combined and the Pearson correlation across the six summary measures is >0.92 and >0.85 for hip and wrist, respectively. Conclusion: Rescaling the AG counts into gravitational SI units facilitates the direct interpretation with alternatives. However, providing robust summary measures with accelerometry recordings of subjects in a natural environment does require the inclusion of some basic intrinsic properties like dead-band removal and filtering which is not included with all summary measures. The research field seems to lack consensus on what elements should be required to obtain robust estimates.

Symposium III

Tuesday, June 18

2:00-3:30pm, Amphitheatre C

RECENT APPLICATIONS OF COMPOSITIONAL DATA ANALYSIS (CODA) FOR ANALYZING THE HEALTH ASSOCIATIONS OF 24-HOUR MOVEMENT BEHAVIORS

Chair: **Christian Brakenridge** Swinburne University of Technology

S.3.1 - ASSOCIATIONS OF 24-H MOVEMENT BEHAVIORS WITH INCIDENCE OF CARDIOVASCULAR RISK FACTORS: THE FINNISH RETIREMENT AND AGING STUDY

Kristin Suorsa University of Turku

Kristin Suorsa¹, Tuija Leskinen¹, Jesse Pasanen¹, Jaana Pentti¹, Jussi Vahtera¹, Sari Stenholm¹

¹University of Turku

BACKGROUND: Regular physical activity reduces, whereas high sedentary time (SED) and inadequate sleep increase risk of cardiovascular diseases. These 24-h movement behaviors, including sleep, SED, light physical activity (LPA) and moderate-to-vigorous physical activity (MVPA) have usually been examined in isolation, despite their co-dependency. Moreover, their context has often been neglected, although worktime movement behaviors may not bring same health benefits as leisure-time movement behaviors. We aimed to examine associations between the composition of 24-h movement behaviors and 3-year incidence of cardiovascular risk factors. Our secondary aim was to examine whether associations differ between workday and day off 24-h movement behaviors. **METHODS:** In total 866 adults (mean age 62.4 years, SD 1.1) from the Finnish Retirement and Aging (FIREA) study, free of cardiovascular risk factors, participated in 24-h wrist-accelerometry measurements combined with a diary between 2014-2018. Incident cardiovascular risk factors including hypertension, dyslipidemia and type 2 diabetes were obtained from national registers, and obesity from annual surveys. The follow-up time was 3 years. Compositional Cox proportional hazards model was used to estimate hazard ratios (HR) of incident cardiovascular risk factors, adjusting for age, sex, occupation, smoking and heavy alcohol consumption. **RESULTS:** During the follow-up, 84 (17%) developed hypertension, 66 (9%) dyslipidemia, 28 (3%) type 2 diabetes, 43 (6%) obesity and 94 (26%) any of these cardiovascular risk factors. The mean movement behavior composition included 7.8 h sleep, 11.0 h SED, 4.2 h LPA and 60 min MVPA. Compared to the mean composition, having 10 min more MVPA and 10 min less sleep, SED or LPA was associated with 5-7% risk reduction in hypertension, 9-12% in obesity and 6-9% in any cardiovascular risk factor. Among the least active study participants (sleep 7.9 h, SED 12.1 h, LPA 3.6 h, MVPA 24 min), the risk reduction associated with having 10 min more MVPA was nearly twofold. For type 2 diabetes risk among the whole study population, the balance between other movement behaviors, that is, sleep, SED and LPA seemed to matter more than the amount of MVPA. Longer sleep and lower SED and LPA tended to associate with lower risk of type 2 diabetes. However, these associations attenuated when short-sleepers (<7h) were excluded from the analysis. No significant associations were observed for dyslipidemia. No notable differences in the associations were observed between workdays and days off. **CONCLUSIONS:** Our findings suggest that daily MVPA maybe important in preventing hypertension and obesity. Even small increase in daily MVPA may help in reducing development of cardiovascular risk factors, especially among the least active older adults.

S.3.2 - COMPOSITIONAL ASSOCIATIONS OF 24-HOUR PHYSICAL ACTIVITIES, SEDENTARY TIME, AND SLEEP WITH DEPRESSIVE SYMPTOMS IN URBAN AND RURAL ENVIRONMENTS

Marjo Seppänen University of Oulu

Marjo Seppänen¹, Tiina Lankila², Maisa Niemelä¹, Nina Rautio³, Maija Korpisaari², Markku Timonen³, Raija Korpelainen¹, Vahid Farrahi⁴

¹University of Oulu, ²Oulu Deaconess Institute Foundation, ³Research Unit of Population Health, University of Oulu, Finland, ⁴TU Dortmund University

PURPOSE: This study examined how compositions of 24-hour time-use, and time reallocations between different movement behaviors are associated with depressive symptoms in urban and rural residential environments.

METHODS: The study population consisted of 4305 46 years old participants from the Northern Finland Birth Cohort 1966 study. Time spent in light-intensity physical activity (LPA), moderate-to-vigorous-intensity physical activity (MVPA) and sedentary time were obtained from a hip-worn accelerometer. Sleep duration was self-reported and combined with activity behaviors to obtain the 24-hour composition. Residential environment was classified as urban or rural based on participant's home address. Depressive symptoms were evaluated using Beck Depression Inventory II (BDI-II) with a cut-off value of ≥ 14 points indicating depressive symptoms. Multivariable adjusted regression analysis, using a compositional data analysis approach based on isometric log-ratio transformation, was used to examine the associations and pairwise time reallocations of 24-hour movement behaviors with BDI-II score. The analyses were stratified for participants with no depressive symptoms (BDI <14) (N=3906) and for those who had depressive symptoms (BDI ≥ 14) (N= 399) and by urban (N=2868) and rural (N=1172) residential environments. **RESULTS:** The 24-hour composition of movement behaviors was significantly associated with depressive symptoms in both environments. The pairwise time-reallocations among movement behaviors showed that the associations were different in urban and rural environments and for participants with or without depressive symptoms. For example, replacing 30 min/day of sedentary time with sleep was associated with -3.64 (95% CI = -6.03 – -1.24) and -3.84 (95% CI = -7.36 – -0.32) percent lower BDI-II scores among those with no depressive symptoms living in urban and rural environments accordingly, but no association was found for those with depressive symptoms. More daily time in MVPA at the expense of sedentary time was associated with decreased BDI-II score for all of those living in rural environment, but not for those living in urban environment. **CONCLUSIONS:** These preliminary findings suggest that more sleep and physical activity from moderate to vigorous intensity at the expense of sedentary time could help to prevent depressive symptoms, and the beneficial effects seem be more pronounced for rural residents.

S.3.3 - DO 24-HOUR MOVEMENT BEHAVIORS PREDICT CHANGES IN QUALITY OF LIFE IN OLD AGE?

Antti Löppönen University of Jyväskylä

Lotta Palmberg¹, Antti Löppönen¹, Kristin Suorsa², Laura Karavirta¹, Taina Rantanen¹, Timo Rantalainen¹

¹University of Jyväskylä, ²University of Turku

BACKGROUND AND AIM: The maintenance of good quality of life (QoL) in old age is important as aging is often accompanied with the increase of chronic conditions and physical impairment, that can decrease QoL. Favorable movement behavior patterns, comprising more physical activity, less sedentary behavior, and sufficient sleep, may promote the maintenance of good QoL with advancing age. Earlier research targeting the associations of movement behaviors with QoL among older people has traditionally treated physical activity, sedentary behavior, and sleep as individual behaviors without considering that their combined time is fixed to a 24-hour day. The aim of the present findings is to demonstrate whether baseline time-use composition is associated with longitudinal changes in QoL among community-dwelling older adults. **METHODS:** Participants were community-dwelling older adults who were 75, 80 and 85 years old at baseline (n=207) and followed up 4 years later. Participants wore thigh- and trunk-mounted triaxial accelerometers for 3-7 days at baseline. Proportion of time-use in physical activity, standing and sedentary behavior were assessed based on body posture and movement intensity. Time in bed was determined using an automated algorithm. QoL was assessed during a home interview using the shortOlder People's Quality of Life Questionnaire at baseline and follow-up (range 13-65, higher scores indicate higher QoL). Compositional linear regression models were used to study whether baseline time-use composition predicts changes in QoL. Models were adjusted for age, sex, education, chronic conditions, depressive symptoms, and baseline QoL. **RESULTS:** Over the 4-year follow-up, QoL scores decreased by 5 % on average. At baseline, participants spent 94 min per day in physical activity, 225 min standing, 567 min in sedentary behaviors and 554 min in bed on average. Of the baseline movement behaviors, higher physical activity in relation to the remaining movement behaviors was associated with increase in QoL over time ($\beta = 0.81$, $p = 0.036$). Sedentary behavior, standing, and time in bed were not associated with changes in QoL. Theoretical reallocation of 60 min of physical activity into sedentary behavior, standing and time in bed was estimated to decrease

QoL by 1.6 (CI -2.3 to -0.9), 1.8 (-2.6 to -0.9) and 1.3 (-2.0 to -0.6) points, respectively. Reallocating time into physical activity from the remaining movement behaviors was associated with smaller estimated changes in QoL.

DISCUSSION: The findings indicate that physical activity relative to other 24-hour movement behaviors is associated with longitudinal changes in QoL among older adults. Engaging more in physical activity and less in stationary activities can promote better QoL with advancing age, although the estimated changes in QoL were modest. Especially preventing reduction in physical activity and simultaneously decreasing time-use in more passive waking behaviors can be encouraged for older adults.

Symposium IV

Tuesday, June 18

4:00-5:30pm, Amphitheatre A

PREDICTING FALL RISK USING DIGITAL TECHNOLOGIES: CURRENT STATE OF THE ART AND FUTURE RESEARCH DIRECTIONS

Chair: **Lorenzo Chiar** *University of Bologna*

S.4.1 - DIGITAL MEASURES OF GAIT AND TURNING RELATED TO FALLS IN PARKINSON'S DISEASE: EFFECTS OF COGNITION AND FREEZING OF GAIT

Martina Mancini *Oregon Health & Science University*

Martina Mancini¹, Vrutangkumar Shah², Robin Baudier¹, Masoud Abdollahi¹, Carla Batista¹, Anjanibhargavi Ragothaman¹, Patricia Carlson-Kuhta¹, John Nutt¹, Jodi Lapidus¹, Fay Horak¹

¹Oregon Health & Science University, ²Clario

Parkinson's disease (PD) is responsible for more mobility disability and falls than any other chronic disease. Some of the factors that increase fall rates in people living with PD are the same as for community-dwelling older people, such as advanced age and a prior history of falls. The motor and non-motor impairments, specific to PD, further increase the risk. For example, cognitive impairments are of particular importance as they are closely associated with higher fall risk (possibly related to defective movement automaticity). The motor impairment, freezing of gait (FOG) is also a critical risk factor for falls. Here, we use digital outcomes from wearable sensors, collected both in the laboratory and in daily life to characterize mobility in people with PD and identify an optimal set of digital measures of gait and balance to discriminate between fallers and non-fallers and to predict future falls, controlling for cognition and FOG. We collected data on 108 participants with moderate PD, 48 of them reporting one, or more, falls in the previous 6 months. In the laboratory, participants underwent a battery of clinical tests, as well as gait and balance tests, while wearing 6 synchronized, inertial sensors (feet, wrists, lumbar, and sternum). In addition, all participants wore 2 instrumented socks and a lumbar sensor for 7 days, for at least 5 hours a day. Falls were collected prospectively with biweekly surveys for the 12 months following baseline testing. We are using various approaches, including t-tests, and logistic regression to find the best subset of digital measures to discriminate retrospective and prospective fallers from non-fallers. In the laboratory, toe-off angle and gait variability (stride length and swing time) as well as turning (velocity and number of steps) best differentiated retrospective fallers from non-fallers. A similar set of digital measures collected during walking in daily life was important in differentiating fallers and non-fallers, even when controlling for overall cognition (characterized by the MOCA). However, when controlling for FOG, only turning characteristics differentiated between retrospective fallers and non-fallers. In predicting future falls, the most consistently selected measures during daily life were variability of the toe-out angle of the foot, pitch angle of the foot during mid-swing, and peak turn velocity. Interestingly, the AUC of the models using digital measures was better in discriminating future fallers from non-fallers than fall history alone highlighting the importance of considering precise digital measures for fall prediction. In addition, cognition and FOG should be carefully considered in fall prediction models.

S.4.2 - DIGITAL TECHNOLOGIES FOR FALL RISK ASSESSMENT IN COMMUNITY-DWELLING OLDER SUBJECTS

Luca Palmerini University of Bologna

Luca Palmerini¹, Jose Albites-Sanabria¹, Pierpaolo Palumbo¹, Jorunn Helbostad², Stefania Bandinelli³, Sabato Mellone¹, Lorenzo Chiari¹

¹University of Bologna, ²Norwegian University of Science and Technology, ³Azienda Sanitaria Toscana Centro

We will start with a literature review about recent work on fall risk assessment in community-dwelling older subjects using digital technologies such as wearable sensors and machine learning, highlighting current state of the art, limitations and promising research directions. From that, we will show how we are exploiting a longitudinal dataset on ageing (InCHIANTI cohort, Italy), empowered with smartphones, to extract real-world digital outcomes related to balance, turns, gait, and transitions (sit-to-stand and stand-to-sit). These activities were automatically extracted from one week monitoring of 168 community-dwelling older people, using a finite state machine, validated in an independent dataset. From each of these activities specific digital mobility outcomes were extracted and combined through machine learning models to identify people with a higher prospective fall risk. Differences between laboratory-based outcomes and real-world ones were also analyzed, highlighting the need to move beyond traditional laboratory-based measures. Finally, we will show recent efforts towards the collection and meta-analyses of open-access datasets in the literature, to exploit available data from different sources and build more robust and generalizable models for fall risk prediction.

S.4.3 - MEASURING SPONTANEOUS ACTIVITY, SLEEP, AND HEART RATE WITH WEARABLE SENSORS TO IMPROVE PREDICTION OF INCIDENT FALLS IN OLDER SUBJECTS: THE DARE FALLSPREDICT PROJECTS

Alessandro Silvani University of Bologna

Alessandro Silvani¹, Jose Albites-Sanabria¹, Vincenzo Atella², Giorgio Bedogni¹, Abdul Haleem Butt¹, Ilaria D'ascanio¹, Paola Di Florio¹, Marco Domenicali¹, Marco Liotta¹, Sabato Mellone¹, Luca Palmerini¹, Francesco Palmese¹, Pierpaolo Palumbo

¹University of Bologna, ²University of Rome Tor Vergata

The occurrence of falls in older persons is a significant public health issue. The current state of the art for fall risk prediction is represented by tools such as the FRAT-up score, which is based on a metanalysis of fall risk factors and is validated over four European cohorts. Information on activities of daily living may be obtained with inertial sensors and analyzed to identify abnormal movement patterns that could lead to a fall. Systematic reviews of the literature indicate that the risk of falls increases with decreased sleep duration and with increased sleep fragmentation estimated with wrist actigraphy. There is evidence that heart rate measurements and, particularly, indexes of decreased parasympathetic modulation of heart rate variability may also carry information on fall risk. On these bases, we designed and obtained ethical approval for the DARE FALLSPREDICT and DARE FALLSPREDICT GP clinical study protocols to develop a multivariable model beyond the state of the art for predicting incident falls in community-dwelling older subjects. In both studies, the subjects will be assessed twice at a 6-month interval. In each assessment, subjects will compile the FRAT-up fall prediction tool and undergo continuous monitoring for one week with a wearable multi-sensor set-up in real-world conditions. All subjects will wear a six-axial accelerometer and gyroscope at the lower back, operating as a data logger. In the DARE FALLSPREDICT study, 1000+ subjects including both frail elderly patients and older subjects from the general population will also wear a triaxial accelerometer at the wrist, operating as a data logger. The DARE FALLSPREDICT GP study will evaluate the practical feasibility of wearing a combined triaxial accelerometer and photoplethysmographic heart rate sensor at the wrist coupled with a dedicated smartphone in 200 additional elderly subjects from the general population. All subjects will be followed-up for 1 year, with monthly telephone interviews to determine the occurrence and circumstances of incident falls and associated costs. The features of spontaneous daily activities measured with inertial measurement units that best predict the risk of falls will be identified with a systematic review and individual patient data metanalysis. Sleep and heart rate metrics will be computed from wearable sensor data with validated algorithms. Logistic regression and machine learning approaches will be employed for model development. The DARE FALLSPREDICT and DARE FALLSPREDICT GP project ambition is to improve personalized and time-sensitive prediction of incident falls in older subjects, as a prerequisite for optimal allocation of prevention efforts. This research was co-funded by the Italian Complementary National Plan PNC-1.1 "Research initiatives for innovative technologies and pathways in the health and welfare sector" D.D. 931 of 06/06/2022, "DARE - Digital lifelong pRvEntion" initiative, code PNC0000002

Tuesday, June 18

4:00-5:30pm, Amphitheatre B

ADVANCING PHYSICAL ACTIVITY RESEARCH: NOVEL ACCELEROMETER METRICS, COMPARATIVE ANALYSIS, AND FUTURE DIRECTIONS IN COHORT STUDIES

Chair: **Joanne McVeigh** Curtin University

Discussant: **Joanne McVeigh** Curtin University

S.5.1 - ACCELEROMETER-DERIVED METRICS IN MIDDLE-AGED AUSTRALIAN ADULTS AND THEIR ASSOCIATIONS WITH HEALTH OUTCOMES: THE RAINE STUDY

Bingyan Pang Curtin University

Bingyan Pang¹, Joanne McVeigh¹, Leon Straker¹

¹Curtin University

BACKGROUND: Regular PA is often advocated as a key component in healthy ageing. Recent advancements in data processing and analysis of accelerometer-measured PA enable us to better comprehend accelerometer-derived metrics and their association with health outcomes. **METHODS:** We utilised wrist accelerometer data collected over seven consecutive days from the Raine Study Generation 1 participants. The Raine Study, commenced in 1989 to investigate the safety of serial ultrasound in 2900 pregnant women in Western Australia. The pregnant women and their spouses are the Generation 1 of the study. Since then, the Raine Study evolved into a cohort study investigating life-course human health and well-being. Accelerometry data from 1098 participants (mean age = 56.7 years, SD = 5.7) at the 26-year follow-up was processed using the GGIR R package. The PA-related metric was derived from the average Euclidean Norm Minus One (ENMO) per day in mg, and moderate-intensity PA was defined as the average daily minutes spent >100mg. Average accelerations in most active minutes (2, 5, 15, 30, 60, 120 minutes) throughout the day were investigated. Linear regressions examined associations between PA and each outcome. Covariates included gender, education, self-reported health, and medication intake. **RESULTS:** 943 participants with valid accelerometry data and health data were included in this analysis. The average acceleration was 25.6mg (SD = 8.3) per day (men: 24.9mg, SD: 8.7; women: 26.0mg, SD: 7.9). Approximately 20% of the cohort participated in 30 minutes of MPA each day. Higher accelerations in all active minutes of the day were observed in participants with better self-reported health. Participants with excellent self-reported health also engaged in 30 minutes of MPA daily. Minimal statistically significant effects were observed between PA and medication intake. Diabetes medication intake had a small positive effect on PA. **Conclusion:** Higher accelerations may be associated with better health in middle-aged Australians. Harmonisation of accelerometer-derived data and processing in cohort studies could provide clearer guidance on PA recommendations.

S.5.2 - PHYSICAL ACTIVITY MONITORING IN THE CARDIOVASCULAR RISK IN YOUNG FINNS STUDY – RESULTS AND NEXT STEPS

Janne Kulmala Jamk University of Applied Sciences

Janne Kulmala¹, Katja Pahkala², Xiaolin Yang¹, Kaisa Kaseva³, Olli Raitakari², Tuija Tammelin¹

¹Jamk University of Applied Sciences, ²University of Turku, ³University of Jyväskylä and University of Helsinki

Introduction: The Cardiovascular Risk in Young Finns Study is one of the largest follow-up studies on cardiovascular risk from childhood to adulthood. The main aim has been to determine the contribution made by childhood lifestyle as well as biological and psychological measures to the risk of cardiovascular diseases in adulthood. Two pilot studies were carried out in 1978 and 1979, and the first cross-sectional study in 1980 (age 3 to 18 years). Thereafter, this cohort has been followed up in 1983, 1986, 1989, 1992, 2001, 2007 and 2011. In the latest field study phase in 2018–2020, in addition to the original Young Finns Study (YFS) participants (age 41 to 56 years), their parents and children were invited to take part. A total of 7,349 participants attended this three generational field study. **METHODS:** Physical activity (PA) has been monitored with a questionnaire since 1980, with the addition of a pedometer during 2007 and 2011 and an accelerometer in 2018–2020 (ActiGraph GT3X+ and wGT3X+ on hip for 24/7, N = 1349). **RESULTS:** Tracking of steps per day

in adulthood was found to be low to moderately high (2007, 2011 and 2018–2020). Compared with the low-active group, the group that was high-active at baseline had a higher probability of being active later in adulthood. Sustained participation in organized youth sports is independently predictive of physical activity patterns, sedentary time, and obesity in midlife, especially in girls, thus contributing to the development of a healthy and active lifestyle across the life course. Parental persistent PA, particularly paternal persistent PA, predicts offspring's PA concurrently and prospectively. Increasing PA and maintaining high PA in comparison to persistently low PA in youth predicts higher PA levels in midlife. Active commuting to school in childhood might be one of the PA modes that contribute to PA in adulthood. If this link turns out to be causal, encouraging active commuting to school at an early age might increase PA levels in midlife. Discussion: Technological development offers advancements in PA monitoring, but it also challenges the consistency and comparability of longitudinal cohort studies lasting decades such as YFS. Device type and location especially need to be carefully balanced when designing follow-ups. The accelerometer has proved to be a convenient tool for cohort studies, but more can be achieved with harmonization and comparison with other cohorts. References: Yang et al. *Med Sci Sports Exerc* 2021; Yang et al. *Am J Prev Med* 2022; Yang et al. *Prev Med* 2022; Kaseva et al. *Sci Rep* 2022.

5.5.3 - PHYSICAL ACTIVITY BEHAVIOURS AND THEIR ASSOCIATIONS WITH ADIPOSITY AND TYPE 2 DIABETES RISK: DATA FROM THE MIDDLE-AGED SOWETO COHORT (MASC)

Lisa Micklesfield University of Witwatersrand

Lisa Micklesfield^{1,2}, Kate Westgate³, Antonia Smith³, Clement Kufe², Amy Mendham², Julia Goedecke⁴, Soren Brage³

¹University of Witwatersrand, ²University of the Witwatersrand, ³University of Cambridge, ⁴South African Medical Research Council

PURPOSE: We developed a method of combining hip and thigh accelerometry signals to quantify and describe physical behaviours, and then examined associations with adiposity and type 2 diabetes risk in a cohort of middle aged South African men and women. **METHODS:** We integrated signals from two triaxial accelerometers worn simultaneously during free-living, in a sub-sample of the Middle-aged Soweto Cohort (n = 794; mean±SD age, 53.7±6.3 yrs). Movement-related acceleration was derived from the combination of acceleration time series from both accelerometers to determine total movement volume (mean Euclidean Norm Minus One, mg) which was then categorised as light-intensity physical activity (LPA, mins/day) or moderate- to vigorous-intensity physical activity (MVPA, mins/day). Using thigh pitch angle and a sleep diary static time (mins/day) was categorised as sleep, awake sitting/lying, or standing. Total body fat mass and regional adiposity were measured using dual-energy X-ray absorptiometry, and oral glucose tolerance tests were completed on a sub-sample of participants from which indicators of type 2 diabetes risk were derived. **RESULTS:** Movement volume was higher in men than women (15.0± 6.5 vs. 12.2±3.4 mg; <0.001) and men spent more time in MVPA and sitting/lying, whereas women spent more time standing¹. Age and socioeconomic status were inversely associated with movement volume and MVPA. In men, reallocating 30 minutes of sitting/lying, standing or LPA to 30 minutes of MVPA was associated with lower fat mass, 1.2-1.4 mmol/L lower fasting glucose and 12.3-13.4 mgl2/mUmin higher insulin sensitivity^{2,3}. In women, reallocation of 30 minutes of sitting/lying, standing or LPA to MVPA was associated with higher basal insulin clearance and lower fat mass. Further, in women reallocation of 30 minutes of sitting/lying to MVPA and 30 minutes of standing to MVPA were associated with a 0.3% and 1.4% lower fat mass, respectively. Just replacing sitting with the same amount of time standing or LPA was associated with 0.5-0.8 mmol/L lower fasting glucose and 3.2 mgl2/mUmin higher insulin sensitivity in women. **CONCLUSIONS:** Integrating signals from hip and thigh accelerometers enables characterization of physical behaviours that can be applied in an African population, and which we have shown to be associated with adiposity and type 2 diabetes risk. Longitudinal and intervention studies are warranted to provide more specific PA recommendations. References: Micklesfield LK et al., *Med Sci Sports Exerc*. 2022 Sep 1;54(9):1493-1505. Mendham AE et al., *J Phys Act Health*. 2022 Jul 19;19(8):548-557. Kufe CN et al., *BMJ Open Diabetes Res Care*. 2022 Jul;10

Tuesday, June 18

4:00-5:30pm, Amphitheatre C

BEYOND THE AVERAGE: THE POWER OF TEMPORAL PATTERNS OF PHYSICAL ACTIVITY ACCUMULATION

Chair: **Melvyn Hillsdon** *University of Exeter*

S.6.1 - BEYOND STEP COUNTS: EXPLORING THE COMPOSITION AND TEMPORAL DISTRIBUTION OF UPRIGHT AND STEPPING EVENTS

Joshua Culverhouse *University of Exeter*

Joshua Culverhouse¹

¹*University of Exeter*

Accelerometer-based movement behaviour research holds promising potential to revolutionise our comprehension of physical activity patterns, transcending simplistic frequency and duration measures. Employing an event-based approach, we reanalysed activPAL data of 4,527 participants from the 1970 British Cohort Study (BCS70) to produce a suite of upright and stepping event metrics. These metrics aimed to quantify the composition and temporal distribution of these postural events, including 'burstiness', an indicator of how clustered events are versus being more evenly distributed throughout the day. We examined the intricate associations between these metrics and various sociodemographic, lifestyle, and health factors. Our analysis revealed substantial variations in the composition and temporal distribution of upright and stepping events across diverse population groups. We found nuanced "phenotypes" of activity accumulation, revealing significant associations with sex, age, body composition, occupational activity, self-reported health, and more. Even after adjusting for step volume, individuals exhibit distinct patterns in how they accrue steps, with notable observations in temporal distribution and event fragmentation. Furthermore, our exploration extends to the cross-sectional associations of these metrics with performance-based physical function outcomes. Using activPAL data from The Maastricht Study, we produced the same metrics in 6,085 participants (59.6 ± 8.7 years) to analyse the associations with a range of physical function outcomes in an older population. We discovered that more fragmented activity was associated with poorer function, and the temporal distribution of events was also linked with performance, over and above volume. In addition, we returned to our BCS70 population (46 years) and found that these associations were also present in midlife. Our findings underscore the importance of considering not only the total volume of activity but also the manner in which it is accumulated. Associations persist even after adjusting for overall activity volume, suggesting the independent association of activity patterns with physical function. These findings emphasise the imperative for future longitudinal research to understand the implications of different activity patterns on future health outcomes. Such nuanced understanding has the potential for screening, intervention, and empowering individuals to make informed choices regarding their physical activity, thereby fostering healthier lifestyles.

S.6.2 - ONE STEP BEYOND 'TOTAL STEPS': HOW PEOPLE ACCUMULATE THEIR TOTAL DAILY STEPS IS JUST AS IMPORTANT AS HOW MANY STEPS THEY TAKE FOR IDENTIFYING EARLY DECLINES IN PHYSICAL FUNCTION: A LONGITUDINAL STUDY OF OLDER ADULTS

Brad Metcalf *University of Exeter*

Brad Metcalf¹, Melvyn Hillsdon¹, Joss Langford²

¹*University of Exeter*, ²*Activinsights and University of Exeter*

BACKGROUND/AIMS: While declines in total daily steps counts may be an important marker of declining physical function, changes in the way people accumulate their daily steps may also be important, even in the absence of any decline in total steps (e.g. people may still be able to achieve their total daily steps required for daily living, but they may start to do more of them at a slower pace, in shorter bouts and with longer rests between bouts). The aim of this analysis is to determine whether changes in such features of total daily stepping are associated with lab-based measures of physical function. **METHODS:** Participants were from the REtirement in ACTION study (REACT, N=777, age ≥ 65 years). Measures of free-living daily stepping (7day GENEActiv accelerometry: total steps, %faster-paced walking steps, mean duration of stepping bouts, mean duration of gaps between stepping bouts) and lab-based

physical function (SPPB: sit-to-stand, balance and 4meter walk) were taken at 0, 6, 12 and 24months. Linear Mixed-Effects Regression (LMER) was used to analyse the longitudinal data with age, gender, deprivation and health status entered as covariates. RESULTS: Total steps, %faster-paced walking steps and mean duration of gaps between stepping bouts were all independent predictors of the SPPB physical function score, together explaining 11.1% (ΔR^2 : 4.1%, 4.5% and 2.5% respectively, all <0.05) of the variance remaining from the covariate-only model. If two people had the same total step count as each other, yet one achieved 20% more of their steps through faster-paced walking, their predicted SPPB score would be ~0.50 units higher at 24mths (deemed to be a clinically important difference). Similarly, if two people had the same step count and percent of faster-paced walking steps, yet the mean duration between stepping bouts was 15mins shorter for one of them, then their predicted SPPB score would be 0.60 units higher at 24mths. CONCLUSION: Simply measuring total step count only tells half the story as it appears that measuring/monitoring the pace and patterns of step count accumulation are just as important when attempting to detect early, pre-clinical signs of decline in physical function, especially as changes in such stepping features may occur before a fall in total step count.

S.6.3 - DAILY PATTERNS OF PHYSICAL ACTIVITY ACCULUMATION OVER 6 MONTHS

Joss Langford *Activinsights Ltd*

Joss Langford¹, Melvyn Hillsdon², Brad Metcalf²

¹Activinsights Ltd, ²University of Exeter

SafeHeart is a prospective, international, multicentre, observational study developing a personalised model to predict implanted cardiac device therapy for malignant ventricular arrhythmias. The project was supported with grants from Eureka Eurostars and the study was registered at the National Trial Registration in the Netherlands (Trial NL9218; <https://www.trialregister.nl>). A total of 303 participants were enrolled and went on to collect wrist-worn raw accelerometer data (GENEActiv) continuously for 6 months. Using the longitudinal accelerometer in this sub-study, we explore the hypothesis that changes in patterns of daily physical activity accumulation are a leading indicator of average daily physical activity measures. The associations between health outcomes and daily volumes of a range of physical activity measures have been widely researched (e.g. minutes of MVPA or total steps). Once established, adverse behavioural profiles have significant, quantifiable risks and are notoriously difficult to change. Declines in total physical activity are then also linked to worsening health outcomes. While proven in population-level statistics, the utility of these measures in clinical care is, potentially, hampered by the absence of an overlap between the detection and the opportunity windows. Essentially, we see the problem too late – when damage is already done and change is more difficult – limiting effective, early disease intervention. Measures, calculated from continuous accelerometry data, that presage declines in total physical activity total would provide a leading indicator of the health risks while restorative action is more achievable. Recent research is showing the potential of measures that summarise the patterns of daily physical activity accumulation. Changes in these patterns likely precede the changes in daily aggregate measures and are supported by candidate mechanisms of behaviour, intrinsic capacity and metabolism. The original SafeHeart protocol analysed all accelerometer data on variable-length, bout basis that were then aggregated to create measures of daily activity volume, mean activity intensity, total active duration and total steps per day. Here, we re-analyse the underlying bouts to characterise the daily distributions of active bout lengths and the gaps between them. We report the temporal relationships between the original aggregate and new pattern measures across the cohort.

Wednesday, June 19

3:30-5:00pm, Amphitheatre A

SEDENTARY BEHAVIOR - FROM METHODOLOGICAL ANALYSIS TO POPULATION SAMPLE AND EFFECTIVE INTERVENTIONS

Chair: **Tommi Vasankari** *The UKK Institute for Health Promotion Research*

S.7.1 - MEASUREMENT OF SEDENTARY BEHAVIOR - THE OUTCOMES OF THE ANGLE FOR POSTURE ESTIMATION (APE) METHOD

Henri Vaha-Yppya *The UKK Institute for Health Promotion Research*

Henri Vaha-Yppya¹, Pauliina Husu¹, Harri Sievänen¹, Tommi Vasankari¹

¹*The UKK Institute for Health Promotion Research*

OBJECTIVE: Hip-worn accelerometers are widely used to estimate habitual physical activity (PA), but they are generally believed to have low accuracy in precisely measure sedentary behavior (SB). Recently, new algorithms, like angle for posture estimation (APE) and CHAP, have been developed to measure posture and SB patterns. This paper studies association between cardiorespiratory fitness (CRF) and body mass index (BMI) values and APE output. The APE measures angle between the incident accelerometer orientation and the reference vector for known upright posture. The APE values of 11.6 and 64.9 degrees are used to separate standing, sitting and lying. **METHODS:** A total of 3475 participants [50.5 (13.0) years, 60 % women] provided substantial accelerometer wear time, and their CRF was estimated via the 6 min walk test. The accumulated stationary behavior time was analyzed in 5 degrees intervals with APE method. Partial Spearman correlations controlled for age and sex was calculated between BMI and CRF and cumulative time in APE intervals. Also, participants were grouped into thirds based CRF and BMI, and accumulated time in APE bins was calculated for each third. **RESULTS:** The CRF had the strongest positive ($r=0.284$) correlation for APE between 5° to 10° and negative ($r=-0.193$) for 65° to 70°. The BMI had the strongest negative ($r=-0.320$) correlation for APE between 5° to 10° and positive ($r=0.196$) for 60° to 65°. Participants in low CRF and high BMI group spend more time in reclining and lying postures ($APE \geq 30^\circ$) and less time in sitting and standing postures ($APE < 30^\circ$) than the other groups. **CONCLUSIONS:** The results show that APE method is valuable for studies investigating the relationships between SB, PA, and health outcomes. This study emphasizes the necessity of reserving the term “sedentary behavior” for studies wherein the classification of SB is based on both intensity and posture.

S.7.2 - SEDENTARY BEHAVIOR AND ITS ASSOCIATIONS WITH INDICATORS OF METABOLIC HEALTH AMONG WORKING-AGED ADULTS

Pauliina Husu *The UKK Institute for Health Promotion Research*

Pauliina Husu¹, Henri Vähä-Yppä¹, Kari Tokola¹, Harri Sievänen¹, Tommi Vasankari¹

¹*The UKK Institute for Health Promotion Research*

OBJECTIVE: Excess sedentary behavior (SB) seems to be harmful for health. In many studies body postures of SB, lying, reclining, and sitting during waking hours, have been measured and analyzed as a single indicator of SB. The purpose of the present study was to describe components of SB in a population-based sample of working-aged adults and to analyze their associations with indicators of metabolic health. **METHODS:** The study is based on a combined data of two cross-sectional population-based studies that measured physical behavior of 20-69-year-old Finns 24/7 in terms of physical activity, standing, SB and time in bed (TIB). The present study focuses only on SB and its components (lying, reclining, and sitting) measured with hip-worn accelerometer (UKK RM42) and analyzed by the angle for posture estimation (APE) method. Indicators of metabolic health included HDL- and LDL-cholesterol and measured waist circumference. **RESULTS:** Participants ($n=4298$, mean age 50.5, $SD=13.1$, 61% women) spent on average 9 h 10 min per day sedentary of which 5 h was spent in reclining, 2 h 50 min in sitting and 1 h 18 min in lying posture. Older age groups were on average more sedentary during all waking hours than the younger ones. More lying and reclining regardless of bout length were associated with lower HDL-cholesterol (≤ 0.001) and larger waist circumference (< 0.001). Higher sitting time accumulating from bouts less than 30 min was associated with lower LDL-cholesterol ($p=0.004$) and smaller waist circumference (< 0.001). Higher amount of sitting accumulating from the bouts exceeding 20 min at a time associated with larger waist circumference which indicate that health associations of sitting seem to vary according

to bout length. CONCLUSIONS: Lying and reclining had quite opposite associations with indicators of metabolic health than short sitting bouts. Thus, components of SB should not be measured or analyzed combined.

S.7.3 - MEDICAL AND PHYSIOLOGICAL EFFECTS OF REDUCED SITTING – A 6-MONTH RCT

Ilkka Heinonen *Turku University and Turku University Hospital*

Ilkka Heinonen^{1,2}

¹*Turku University and Turku University Hospital*, ²*University of Turku*

Sedentary behavior, thus sitting, has emerged as modifiable risk factor affecting our physiology and health. The evidence for detrimental effects of sedentary behavior/physical inactivity on health still however stems largely from epidemiological studies, which cannot address causalities. Acute and short-term sedentary behavior reduction interventions have been performed, but in these studies sitting has often been replaced by formal physical activity, thus exercise, and long-term studies in subjects with cardiometabolic risk factors are still relatively few. We have recently conducted long-term (6-month) randomized controlled trial to reduce daily sitting, without formal exercise, in metabolic syndrome patients and this symposium presentation discusses these studies with behavioral and physiological aspects. Published results will be presented in terms of the effectiveness of the behavioral change, body composition, whole-body and skeletal muscle-specific insulin sensitivity, blood pressure and maximal oxygen consumption. Preliminary results dealing with cardiac structure and function, blood lipids, metabolic flexibility, liver fat and insulin sensitivity and endogenous glucose production, as well as adipose tissue and bone and bone marrow insulin sensitivity will also be presented.

S.7.4 - A PERSONALIZED 3-MO E-HEALTH INTERVENTION INCREASED NUMBER OF DAILY STEPS AMONG PATIENTS OF ELECTIVE CARDIAC PROCEDURES

Sini Vasankari *Turku University Hospital*

Sini Vasankari¹, Tommi Vasankari²

¹*Turku University Hospital*, ²*The UKK Institute for Health Promotion Research*

INTRODUCTION: Cardiac procedures are executed in order to enhance daily functionality and quality of life. However, a majority of patients do not reach the recommended level of physical activity (PA) after the procedure. HYPOTHESIS: Our purpose was to study whether a personalized accelerometer- and smartphone-based eHealth intervention (PACO trial) increases PA among patients recovering from cardiac procedures. METHODS: Patients scheduled for elective coronary artery bypass grafting, valvular surgery, coronary angiography or percutaneous coronary intervention (n=210) were randomly assigned either to a 12-week interactive PA guidance (interactive accelerometer + application + cloud) or standard care. Participants received personalized, increasing goals for daily steps, which were monitored with an interactive accelerometer (app for patients and cloud for a physiotherapist at Heart Center). The physiotherapist encouraged patients to increase daily steps using short phone calls twice per month. Data PA was collected before operation, after 3-month intervention and after 12-month follow-up. RESULTS: When pooling all patients we found that the mean moderate to vigorous PA minutes (MVPA) and daily steps increased in the intervention patients by 46% and 21% after 3-month intervention, respectively, and by 29% and 17% at 12-month follow-up, respectively, compared to the control group (5% and 10% decrease at 3 months and 10% and 11% decrease at 12 months, respectively) (p=0.028 for MVPA and p=0.015 for steps). CONCLUSIONS: Personalized, interactive accelerometer-application-cloud based eHealth intervention with increasing goals for daily steps in patients recovering from a cardiac procedure was found effective and the positive effect persisted during 12-month follow-up when compared to patients randomized to usual care.

Wednesday, June 19

3:30-5:00pm, Amphitheatre B

PHYSICAL BEHAVIOUR DETECTION FROM TRI-AXIAL ACCELEROMETRY USING WEARABLES AND SMARTWATCHES: DEVELOPMENT OF CLASSIFIERS AND EXTERNAL VALIDATION BASED ON ECOLOGICAL MOMENTARY ASSESSMENT IN THE WEALTH STUDY

Chair: **Christoph Buck**, Leibniz Institute for Prevention Research and Epidemiology - BIPS

Discussant: **Alan Donnelly**, University of Limerick

S.8.1 - THE WEALTH STUDY DESIGN FOR LABELED DATA ASSESSMENT

Christoph Buck Leibniz Institute for Prevention Research and Epidemiology - BIPS

Christoph Buck¹, Annika Swenne¹, Luis Sigcha², Jean-Michel Oppert³, Richard Cimler⁴, Steriani Elavsky⁵, Tomas Vetrovsky⁶, Alan Donnelly², Antje Hebestreit¹

¹Leibniz Institute for Prevention Research and Epidemiology - BIPS, ²University of Limerick, ³Université Sorbonne Paris Nord (USPN), ⁴University of Hradec Kralove, ⁵Univerzita Hradec Králové, ⁶Charles University

INTRODUCTION: Physical behaviour (PB) assessment with accelerometer-based wearable technologies is important in personalized medicine or to define public health and community guidelines to increase physical activity and prevent lifestyle disorders. However, key problems exist in the use of a plethora of devices, differences in the use of count-based or raw measures and differences in cut-points which hinders comparability of data. Researchers are using machine learning (ML) techniques to classify PB. The development of improved ML models creates the need for ongoing collection of high-quality data. The WEALTH study (WEearable sensor Assessment of physical and eaTing beHAViours) funded by the European Joint Programming Initiative "A Healthy Diet for a Healthy Life" (JPI HDHL), aimed to produce a set of labeled data collected with multiple inertial sensors and supported by ecological momentary assessment (EMA) in a large sample of individuals from four European countries. **METHODS:** In the WEALTH study, we collected data from 600 participants from, Ireland, Germany, Czechia, and France. The study design included a 75-minute scripted lab-based protocol where participants performed specific PBs in a specific order and for fixed time duration, for example, sitting, standing, walking, running or exercising. In the following nine-day free-living assessment phase, activity trackers (Fitbit) were used to trigger EMA prompts for data labeling. Concurrently, participants wore three hip-, thigh-, and wrist-worn accelerometers, i.e. ActiGraph GT3x, activPal and LifeQ enabled smartwatches. Classifiers for PBs were modeled based on raw tri-axial accelerometer data using multiple ML methods ranging from random forests as a benchmark model to convolutional neural networks (CNN) as deep learning applications. Based on the lab-based protocol, holdout validation was performed for model development, and models were further calibrated using free-living sensor data that was weakly labeled via the EMA responses. **RESULTS:** The collection of comprehensive labeled data and the extension of reporting on free-living data from participants enabled us to train ML models based on data from the lab-based protocol and conduct external validation using weakly labeled data from the free-living assessment to recalibrate classifiers for specific PBs such as sitting, standing, walking, and running. **CONCLUSION:** Our models might be able to classify physical behaviours such as sitting walking, cycling and running, with higher accuracy and could be applied to raw accelerometry data in free-living settings. We will describe in more detail the effect of intensity on physical behaviours classification and the added value of EMA to classify and record weakly labeled data and will discuss the potential of these methods for use at larger scale in surveillance studies.

S.8.2 - CLASSIFICATION OF PHYSICAL BEHAVIOURS FROM THIGH-WORN ACCELEROMETRY

Luis Sigcha University of Limerick

Luis Sigcha¹, Annika Swenne², Antje Hebestreit², Jean-Michel Oppert³, Richard Cimler⁴, Steriani Elavsky^{4,5}, Tomas Vetrovsky^{4,5}, Alan Donnelly¹, Christoph Buck², Pepijn Van De Ven¹

¹University of Limerick, ²Leibniz Institute for Prevention Research and Epidemiology - BIPS, ³Université Sorbonne Paris Nord (USPN), ⁴University of Hradec Kralove, ⁵Univerzita Hradec Králové

INTRODUCTION: In modern health research, monitoring physical activity (PA) and sedentary behavior is pivotal for comprehending lifestyle patterns and their effects on health. The use of wearable sensors in monitoring human activity offers an opportunity to enhance the accuracy of PA and sedentary behavior monitoring through machine learning

(ML) algorithms. This study focuses on the development of ML algorithms for PA classification using data collected from research-grade tri-axial accelerometers, specifically activPAL. **OBJECTIVES:** The primary objective is to evaluate the performance of ML methods in classifying 7 different physical activities using a single sensor located at the thigh. Specifically, this study evaluates the accuracy of a classic ML algorithm such as random forest (RF) and a deep learning approach based on convolutional neural networks (CNN) using data collected in laboratory settings. **METHODS:** Tri-axial accelerometer data from activPAL sensors was collected from 25 selected participants (17 females/8 males), as part of the WEALTH project (Wearable Sensor Assessment of Physical and Eating Behaviours). Data were collected when participants performed a set of guided activities for 75 minutes. These activities included sedentary, standing, slow walking, brisk walking, jogging, sports activities, and cycling. Raw accelerometer data were segmented using sliding windows of 3.2 seconds (64 samples at 20 Hz). Two ML methods were employed, ranging from a benchmark model (RF) to more advanced techniques based on CNNs. For the benchmark model, a RF (with 120 trees) was fed with a set of 30 features extracted from the accelerometer data. For the CNN, the raw accelerometer signals were scaled in the range of -1 to 1. For model evaluation, data were divided into training, validation, and testing subsets (13, 6, and 6 participants, respectively). **RESULTS:** Findings demonstrate promising results in classifying the 7 different physical activities. In specific, a 3-layer CNN with max pooling and global average pooling (GAP) layers performed better (Accuracy: 85%, F1: 0.85 in the test subset) than the RF (Accuracy: 70%, F1: 0.70). Despite these overall results, the accuracy in the CNN was lower (75%) for specific activities such as sports activities and slow walking, indicating potential challenges in accurately identifying these behaviors using a single sensor. **Conclusion:** This study highlights the potential of ML techniques, particularly CNN, in accurately classifying PA based on data collected from activPAL sensors. While the models achieved high accuracy overall, further refinement to improve the performance will be conducted using data of the main survey, particularly for sports activities that can be mistaken with walking. While additional research with an expanded sample size is warranted, these findings pave the way for improved monitoring and understanding PA patterns.

S.8.3 - ACCELEROMETRY AND AI: DEVELOPING BEHAVIOURAL (BIO) MARKERS

Alan Godfrey *Northumbria University*

Alan Godfrey¹

¹*Northumbria University*

BACKGROUND: Accelerometer-based wearable technologies are nearly ubiquitous in everyday life. They have the power to provide rich and objective data to better determine physical behaviours (PB). The latter may be termed (bio) markers and include examples like sedentary time or number of bouts in a higher intensity of physical activity. The examples are important in personalized medicine or more broadly to define public health and community wellbeing guidelines to increase physical activity and reduce obesity. **OBJECTIVE:** This talk examines recent wearable research and draws in developments from other closely related fields and how they could/should be applied to accelerometry informed PB. The talk aims to shed light on how associated (bio) markers need to be optimally developed and deployed for routine use and data gathering in habitual/real-world settings. Specifically, it will highlight upcoming challenges pertaining to e.g., accelerometer data quality in assessment of PB before concluding with some recommendations. **CONCLUSIONS:** The success of accelerometry has also been its own Achilles heel, its popularity to inform health outcomes means that a plethora of hardware has been created with an equal number of software-based tools to interpret/translate raw (sample level) accelerometer data to clinically relevant (bio) markers. Those tools are often black-box or incomprehensible algorithms where a growing number utilize artificial intelligence-based approaches. That creates many challenges for the correct adoption and applied use as little to no harmonized guidance exists.

S.8.4 - CLASSIFICATION OF PHYSICAL BEHAVIOURS USING HIP- AND WRIST-WORN ACCELEROMETRY

Annika Swenne *Leibniz Institute for Prevention Research and Epidemiology - BIPS GmbH*

Annika Swenne^{1,2}, Antje Hebestreit^{2,3}, Luis Sigcha⁴, Jean-Michel Oppert^{5,6}, Richard Cimler⁷, Steriani Elavsky^{8,9}, Tomas Vetrovsky^{8,10}, Alan Donnelly⁴, Christoph Buck^{1,2}

¹Leibniz Institute for Prevention Research and Epidemiology, ²Leibniz Institute for Prevention Research and Epidemiology - BIPS, ³Leibniz Institute for Prevention Research and Epidemiology - BIPS, ⁴University of Limerick, ⁵Sorbonne Paris North University, ⁶Center of Research in Epidemiology and Statistics (CRESS), ⁷University of Hradec Kralove, ⁸University of Hradec Králové, ⁹University of Ostrava, ¹⁰Charles University

INTRODUCTION: Hip- and wrist-worn accelerometer-based wearables are extensively employed in health research to objectively measure physical behaviours. Traditionally, researchers have relied on activity intensity cut points to categorize physical behaviours from accelerometer data. However, in recent years, machine learning models have emerged as a promising tool for behaviour classification. We aim at exploring the potential of different machine learning algorithms to classify physical behaviours measured using sensors from both hip- and wrist-worn devices. **METHODS:** Data were collected from 600 adults in four countries, i.e., Ireland, Germany, Czechia, and France, as part of the European WEALTH project (WEArable sensor Assessment of physical and eating beHaviours). The study design included a laboratory-based 75-min semi-structured protocol with a defined sequence and duration of activities, followed by free-living data collection over one week with Fitbit trackers triggering ecological momentary assessment prompts for data labeling. Tri-axial accelerometer recordings were generated using an ActiGraph GT3X-BT worn on the right hip at a resolution of 100 Hz and a commercial smartwatch worn on the dominant wrist at a 25 Hz resolution. Random forest, extreme gradient boosting and artificial neural network models were trained separately for each device on the semi-structured protocol data to detect six activities: sitting, standing, walking, running, cycling and exercising. For all models, the dataset was divided into training (60%), validation (20%) and test (20%) data based on individual participants. The final performance of each model was evaluated for the test data from the semi-structured protocol. Moreover, the participants' responses to the activity-triggered ecological momentary assessment questionnaires were utilized to label the different activities from the free-living data and to test the performance of the models in a real-world setting. **RESULTS:** Initial findings demonstrate 81% accuracy in classifying physical behaviours from hip-worn devices with machine learning algorithms. However, the accuracy varied considerably for the different activities. Accuracy was highest for running (96%), followed by exercising, sitting and walking with accuracies around 90%. Cycling had an accuracy of 75% and standing had the lowest accuracy with 51%. Notably, standing was frequently misclassified as sitting. **CONCLUSION:** Our results provide valuable insights into the applicability and generalizability of different machine learning models for physical behaviour classification in real-world contexts. Furthermore, they offer starting points for further enhancement of the model performance.

Wednesday, June 19

3:30-5:00pm, Amphitheatre C

BIDIRECTIONAL ASSOCIATIONS OF 24-HOUR MOVEMENT BEHAVIOURS AND COGNITIVE FUNCTION AMONG OLDER ADULTS: IS IT REVERSE CAUSATION?

Discussant: **Paul Gardiner**, *University of Queensland*

S.9.1 - ASSOCIATIONS BETWEEN TRAJECTORIES OF COGNITIVE FUNCTION AND PHYSICAL ACTIVITY, SEDENTARY TIME, AND SLEEP IN OLDER ADULTS

Dori Rosenberg *Kaiser Permanente Washington Health Research Institute*

Mikael Anne Greenwood-Hickman *Kaiser Permanente Washington Health Research Institute*

Dori Rosenberg¹, Mikael Anne Greenwood-Hickman¹, Yinxiang Wu², Abisola Idu¹, Susan McCurry², Andrea Lacroix³, Pamela Shaw¹

¹Kaiser Permanente Washington Health Research Institute, ²University of Washington, ³University of California San Diego

BACKGROUND: Studies show that physical activity, sedentary time, and sleep are associated with cognitive function; however, reverse causality cannot be completely ruled out. We examined whether cognitive function over 10-years is associated with physical activity, sedentary time, and sleep in a sample of community dwelling older adults. **METHODS:** We used data from the U.S.-based Adult Change in Thought (ACT) study. We measured cognitive function with the Cognitive Assessment Screening Instrument (CASI) scored with item response theory (CASI-IRT). Participants had to have at least 3 CASI-IRT scores over 10-years prior to wearing accelerometers. Outcomes included physical activity and sedentary time measured with 2 accelerometers that were worn at the same time for 7-days. The activPAL measured mean time spent sitting, standing, and stepping; mean daily step count, and mean sitting bout duration. The ActiGraph measured daily minutes of light-intensity physical activity and moderate-to-vigorous physical activity. Self-reported time in bed and sleep quality (PROMIS short form) were additional outcomes. We used growth mixture models to classify CASI-IRT scores into trajectory groups and examine group assignment with outcomes adjusting for health and demographic covariates. **RESULTS:** Participants were 611 older adults in ACT (mean age = (Mean age = 80.3 (6.5) years, 90.3% White, 57.1% female, 29.3% had less than 16 years of education; 91.8% reported good to excellent self-rated health). Mean activPAL sitting time was 602.94 (SD = 119.62) minutes/day, standing time was 239.75 (SD = 99.84), stepping time was 82.25 (SD = 38.12), and mean daily step count was 6354.56 (SD = 3409.21), mean sitting bout duration was 16.05 (SD = 7.99) mins. Mean ActiGraph light-intensity physical activity was 276.48 (SD = 77.81) and MVPA was 61.29 (SD = 42.60). Mean minutes in bed was 516.06 (SD = 65.74). Mean PROMIS sleep quality score was 46.51 (SD = 7.90). Three trajectory groups were identified: 1) average stable CASI-IRT scores (56.1%), 2) high stable CASI-IRT scores (34.0%), and, 3) declining CASI-IRT scores (9.8%). Compared to the average stable CASI-IRT group, those in the declining CASI-IRT group had less 16 mins/day less stepping time (95% CI = 0.6, 31.4), 1517 fewer steps/day (95% CI = 138, 2896), and less 16.3 fewer minutes of moderate-to-vigorous PA (95% CI = 1.3, 31.3). Those in the high stable CASI-IRT score and average stable CASI-IRT score groups did not significantly differ. CASI-IRT trajectory group was not associated with sedentary behavior or sleep outcomes. **Conclusion:** The results indicate that there is a bidirectional association between cognitive function and physical activity. However, there were no relationships between cognitive decline and sedentary time or sleep. More research is needed on the potential for reverse causality in associations between physical activity and cognition.

S.9.2 - DETERMINANTS OF DEVICE-MEASURED MOVEMENT BEHAVIOURS IN A NATIONALLY REPRESENTATIVE COHORT OF OLDER ENGLISH ADULTS

Laura Brocklebank, University College London

Laura Brocklebank 1, Mikaela Bloomberg 1

¹University College London

BACKGROUND: Movement behaviours (physical activity, sedentary behaviour, and sleep) impact various health outcomes. However, they are infrequently objectively measured in large nationally representative cohorts of older adults. We aim to describe the collection and analysis of device-measured movement behaviours in the English Longitudinal Study of Ageing (ELSA), and report associations with key participant characteristics. **METHODS:** ELSA is a nationally representative cohort of English adults aged ≥ 50 years. In 2021-23 (wave 10), a random subset of 5,429 participants were invited to wear a wrist-worn triaxial accelerometer for eight consecutive days. 4,400 participants (81.0%) agreed to wear an accelerometer and of them 3,308 (75.2%; 55.6% men; aged 68.5 ± 9.0 years) had sufficient wear time (median [IQR] 8.0 days [7.4-8.4]). We used a machine-learning model validated in the UK Biobank to infer time spent in four movement behaviours that constitute a 24-hour day (sleep, sedentary behaviour, light physical activity [LPA], and moderate-vigorous physical activity [MVPA]). **RESULTS:** Average acceleration, or overall physical activity, was 22.9 mg/day. On average, participants spent 9.4 hours/day (39.0%) sleeping, 9.8 hours/day (40.8%) being sedentary, 4.4 hours/day (18.1%) in LPA, and 30.4 minutes/day (2.1%) in MVPA. Despite men accumulating more MVPA than women (36.3 vs. 25.7 minutes/day, <0.001), women had higher overall physical activity (23.2 vs. 22.5 mg/day, $p=0.02$) by accumulating more LPA (4.6 vs. 4.0 hours/day, <0.001) and less sedentary time (9.6 vs. 10.1 hours/day, <0.001). Total sleep duration was similar between men and women (9.3 vs. 9.4 hours/day, $p=0.22$). Participants aged ≥ 65 years had lower overall physical activity than those aged 50-64 years (21.1 vs. 26.5 mg/day, <0.001) by spending less time being active (MVPA: 26.9 vs. 37.8 minutes/day, <0.001 ; LPA: 4.2 vs. 4.8 hours/day, <0.001) and more time being sedentary (9.9 vs. 9.4 hours/day, <0.001) and sleeping (9.4 vs. 9.2 hours/day, <0.001). **CONCLUSION:** These data will shortly be deposited in national archives for use by other researchers and will enhance our knowledge about the potential relevance of different movement behaviours for healthy ageing.

S.9.3 - ASSOCIATIONS BETWEEN 20-YEAR MEMORY TRAJECTORIES AND DEVICE-MEASURED MOVEMENT BEHAVIOURS

Mikaela Bloomberg University College London

Mikaela Bloomberg¹, Laura Brocklebank¹

¹University College London

BACKGROUND: While many studies suggest that physical activity and sleep are key modifiable risk factors contributing to cognitive ageing and dementia risk, there is also evidence that these associations may occur due to reverse causal impacts of cognitive dysfunction or prodromal dementia symptoms on sleep and activity patterns. To elucidate reverse causal impacts of cognitive function on movement behaviours, we examined associations between 20-year memory trajectories and device-measured movement behaviours. **METHODS:** We used data from 2,971 men and women aged 50-100 years participating in the English Longitudinal Study of Ageing to examine associations between memory trajectories and device-measured sleep, physical activity, and sedentary behaviour. Memory was assessed using immediate and delayed recall tasks administered at up to 10 interviews occurring between 2002/04 and 2021/23. Memory scores were standardised using the mean and standard deviation of each participants' five-year age group at baseline. We used group-based mean trajectory modelling to classify participants into cognitive trajectories, with the optimal number of trajectories and polynomial degree selected using BIC. Participants also wore an accelerometer on their dominant wrist for 8 days at the end of the cognitive follow-up period. The mean time spent in light physical activity (LPA), moderate-vigorous physical activity (MVPA), sedentary behaviour, and sleep during the wear period was extracted using an algorithm validated in the UK Biobank. Associations between cognitive trajectories and minutes spent in each movement behaviour were examined using linear regression models adjusted for age at baseline, gender, education, chronic conditions, and self-reported physical activity at baseline. **RESULTS:** Participants were categorised into 5 cognitive trajectories, ordered from most favourable (maintaining the highest cognitive scores) to least favourable (Group 1 to Group 5; $n_1=709$, $n_2=919$, $n_3=432$, $n_4=596$, $n_5=315$). Groups 1, 2, 3, and 5 had a similar rate of memory decline; Group 3 declined faster than the other groups. Group 5 spent 24.8 minutes (95% confidence interval=7.2-42.4; $p=0.006$) less time in LPA than Group 1. Group 5 spent 43.9 minutes (12.9-74.8; $p=0.006$) more time sleeping than Group 1. When trajectory was fitted as a continuous variable, a one-unit increase in trajectory group (going from less favourable to more favourable cognitive trajectory) was associated with a 10.4 minute (3.9-16.9; $p=0.002$) decrease in sleep and a

5.0 minute (1.3-8.7; $p=0.008$) increase in LPA. There were no strong associations between memory trajectory and time spent in MVPA ($p=0.09$) or time spent in sedentary behaviour ($p=0.10$). Conclusion Less favourable cognitive trajectories were associated with less time spent being active and more time spent sleeping. Reverse causation may contribute to associations between movement behaviours and cognitive outcomes found in previous studies.

Symposium X

Wednesday, June 19

3:30-5:00pm, Salle 16/17

HOW ARE CHILDREN REALLY USING THEIR DIGITAL MEDIA? HARNESSING THE POWER OF TECHNOLOGY TO OBJECTIVELY MEASURE TRUE SCREEN USE AND DETERMINE RELATIONSHIPS WITH SLEEP HEALTH

Chair: **Kim Meredith-Jones**, University of Otago

Discussant: **Tom Stewart**, Auckland University of Technology

S.10.1 - CAN WE HARNESS THE POWER OF TECHNOLOGY TO MEASURE TRUE SCREEN TIME?

Shay-Ruby Wickham University of Otago

Shay-Ruby Wickham¹

¹University of Otago

BACKGROUND: Given the rapidity of technological change and widespread availability of portable electronic devices, it seems unlikely that questionnaires accurately assess screen time in youth, limiting our ability to determine related health effects. The aims of this study were to 1) develop a protocol for objectively quantifying screen time using video camera footage, and 2) apply that protocol in an observational study to determine how young adolescents truly use their screens in the evening hours. **METHODS:** Adolescents participated in an iterative series of pilot studies undertaking a range of structured and unstructured screen activities in light and dark home environments. Two police body cameras captured screen use; one was worn on a chest harness facing the screen the adolescent was interacting with, and the second stationary and placed in the room to capture a different viewpoint. Extensive examination of both types of simultaneous footage allowed us to develop a protocol which could identify 8 device types (phone, tablet, laptop computer, desktop computer, handheld gaming console, gaming console, television, other) and 8 screen activities (watching, listening, reading, educational/creative, browsing, communication, social media, video gaming, multitasking). This protocol was then applied in the Bedtime and Electronic Devices (BED) study to footage obtained from 85 adolescents aged 11-14 years capturing digital device use from two hours before bedtime until sleep on four non-consecutive nights. **RESULTS:** Overall reliability was excellent for the full protocol ($\kappa=0.83-0.93$), reliably differentiating between different device types ($\kappa=0.92-0.94$) and screen behaviors ($\kappa=0.81-0.87$). Among the 83 BED participants (mean 12.3 [SD 1.0] years, 42% female, 52% New Zealand European, 37% Māori [indigenous]), 82 used screens in the two hours before bed on 308 of 344 (90%) nights for a mean of 54.4 minutes (SD 25.5). Televisions (median 37 minutes, 56% of nights), phones (19 minutes, 64% nights), and multitasking using multiple devices (19 minutes, 48% nights) were most commonly used (>75% of adolescents). Once in bed but before trying to sleep, 58% of adolescents engaged in screen time for 17(26.3) minutes on 36% of nights. The most common screen activities were watching (32.5%), social media (26.5%) and communication (20.5%). Even after attempting sleep, 32.5% of participants used screens 8.0 minutes (median) on 16% of nights, mostly listening on phones. **CONCLUSION:** Objective video cameras offer detailed insight into evening screen habits, capturing frequency, content, and duration. Youth frequently engage with screens before bed and throughout the night on a range of activities, despite recommendations to restrict screen time prior to sleep.

S.10.2 - FROM DUSK TO DAWN: DOES USING SCREENS BEFORE BED REALLY IMPAIR SLEEP IN ADOLESCENTS?

Rachael Taylor University of Otago

Rachael Taylor¹, Brad Brosnan¹, Shay-Ruby Wickham¹, Jill Haszard¹, Barbara Galland¹, Kim Meredith-Jones¹

¹University of Otago

BACKGROUND: Existing research suggesting that evening screen use impairs sleep has been limited to questionnaires, only assessed total screen time or a limited number of devices or activity types, and has rarely examined the temporal associations between screens and sleep. Therefore, the aim of this study was to determine how objectively-measured screen time before sleep influenced sleep that night in young adolescents. **METHODS:** BED was a repeated-measures observational study in 85 healthy adolescents aged 11-14.9 years. Objective screen time data were captured using wearable and stationary video cameras from two hours before bedtime until the first time the adolescent attempted sleep (shuteye time) over four non-consecutive nights in the home environment. Video data were coded using a reliable protocol ($\kappa \geq 0.8$) to quantify device (eight options, e.g., phone) and activity (nine options, e.g., social media) type. Sleep outcomes (sleep timing, total sleep time, and wake after sleep onset [WASO]) were measured objectively via wrist-worn AX3 accelerometers over a full week. Screen use was related to sleep on a night-by-night basis using a mixed-effects regression model, which considered the participants as a random effect and was adjusted for weekends. **RESULTS:** Matched nights of video and accelerometry data were available for 79 participants. Screen time (total or by device or activity type) in the two hours before bed had little effect on sleep that night. No meaningful difference in sleep was observed between those who did or did not have screen time in the 30, 60 or 120 minutes before bed. However, once in bed, screen time delayed sleep onset by 35 (95% CI: 20, 50) minutes compared to nights without screen use, and shortened total sleep time (TST) by 3 minutes (-6, -1) for every 10 minutes of screen time. Interactive screen use reduced TST more than passive screen use (9 compared with 4 minutes for every 10 minutes of use), and gaming and multitasking (using more than one device simultaneously) were particularly detrimental to TST. **CONCLUSION:** The use of objective methods shows that screen time may impair sleep once in bed, especially if interactive or involving multitasking. Current sleep hygiene recommendations to restrict all screen time before bed seem neither achievable nor appropriate, at least in this age group.

S.10.3 - DOES GETTING LESS SLEEP INCREASE SCREEN TIME IN CHILDREN? ANALYSIS FROM THE DREAM CROSSOVER TRIAL

Rosie Jackson University of Otago

Barbara Galland¹, Jill Haszard¹, Silke Morrison¹, Kim Meredith-Jones¹, Dean Beebe², Dawn Elder¹, Rachael Taylor¹

¹University of Otago, ²University of Cincinnati

BACKGROUND: While wearable cameras offer huge potential for improving the measurement of screen time in children via an objective method, many questions remain. The aims of this project were to a) explore how different intervals between image capture impact estimates of total screen time, b) explore how coding assumptions impact estimates of screen time, and c) determine experimentally whether getting less sleep influences screen time in children. **METHODS:** In this crossover trial (DREAM study), children aged 8-12 years underwent one week of sleep restriction (went to bed 1 hour later than usual) and one week of sleep extension (went to bed 1 hour earlier than usual) to assess how mild sleep deprivation impacts health behaviours including screen time. Children wore a Brinno TLC130 camera on a chest harness facing outwards for two days of each intervention week. The camera was set to take photos at 2-second intervals and captured the world around them including screen use. Data from 22 children who wore the cameras for full days on both intervention weeks was analysed for time spent on screens (including device and screen activity type). Analysis explored differences in screen time estimates when using different photo intervals ranging from 2 to 60 seconds between each image. Because it is not always clear whether a screen is being used, we tested how different assumptions (e.g. 10 images of blocked images bookended by screen image counted as screen time) affected estimates of total screen time. Total screen time on sleep restriction versus extension days was compared. **RESULTS:** Coding assumptions resulted in different mean daily estimates of total screen time within each condition, ranging from 212.7 (SD 122.6) mins to 276.9 (SD 136.3) mins during sleep extension and 216.7 (SD 145.6) to 289.1 (SD 159.1) during sleep restriction. However, different intervals of image capture appeared to make little difference to daily screen time estimates; the median difference between 60 second and 2 seconds intervals was just 1.6 minutes. Children did not appear to engage with screens more when they slept less (median -12.6 [-103.7, 80.4], even though they had more opportunity as they were awake for longer. **CONCLUSIONS:** Although estimates for total daily screen time may change meaningfully depending on the rules used to deal with blocked images, it is reassuring that longer intervals between images appear able to capture total screen time in children over the day. Getting less sleep appears to make little difference to weekend screen time in children.

Thursday, June 20

9:45-11:15am, Amphitheatre A

PHYSIOLOGY-DRIVEN BEHAVIOUR ASSESSMENT

Chair: **Nicky Ridgers** University of South Australia

S.11.1 - PHYSICAL DETERMINANTS OF DAILY PHYSICAL ACTIVITY IN OLDER ADULTS

Laura Karavirta, University of Jyväskylä

Laura Karavirta¹, Timo Aittokoski¹, Katja Lindeman¹, Joonas Neuvonen¹, Katja Pynnönen¹, Lotta Palmberg¹, Antti Löppönen¹, Timo Rantalainen¹, Taina Rantanen¹

¹University of Jyväskylä

BACKGROUND AND AIM: Physical activity (PA) and physical function decrease with ageing, but the causal relationship between the two remains unclear. Feasible methods for PA assessment that consider individual differences and temporal changes in physical function are scarce. This presentation explores the impact of physical function on daily PA in a Finnish population-based cohort of 75, 80, and 85-year-old men and women. **Methods.** From the total sample of 1021 participants (57.3 % women), 910 individuals participated in the laboratory assessments of physical function and were thus invited to the monitoring of PA. A thigh-mounted tri-axial accelerometry and an additional heart rate for at least 3 full days (mean 6.6 (SD 0.8) days) were obtained from 484 and 409 participants, respectively. Acceleration (100 Hz, 13-bit, ± 16 g) was summarised as mean amplitude deviation (MAD). PA energy expenditure (PAEE) was estimated using combined accelerometry and heart rate sensing. Physical measurements included preferred walking speed, maximal knee extension strength, and body fat percentage. Relative and absolute PA were quantified as minutes accumulated at or above the MAD of the preferred walking intensity and 3 METs, respectively. The follow-up measurements were performed four years after the baseline. **RESULTS:** At baseline, path modelling was used to examine indirect associations between sex, physical characteristics, and PAEE, and the model explained 33 % of the variance in PAEE. The direct association of sex on PAEE was non-significant, whereas the association between sex and PAEE through body fat ($\beta=0.20$, $p<0.001$) and walking speed ($\beta=0.05$, $p=0.001$) were significant. During the follow-up, walking speed slowed down from 1.2 (0.2) to 1.1 (0.2) m/s ($p<0.001$), and the decline was steeper in older age ($p=0.013$ for time*age group in repeated measures ANOVA). Daily mean MAD decreased from 0.025 (0.008) to 0.022 (0.008) g ($p<0.001$), and more in older age ($p=0.035$ for time*age group). Absolute activity (≥ 3 METs) decreased from 347 (196) to 274 (188) min/week ($p<0.001$) but relative activity (\geq preferred walking intensity) increased from 60 (87) to 84 (109) min/week ($p<0.001$). In cross-lagged panel models, relative activity at baseline preceded faster walking speed four years later ($\beta=0.09$, 95% CI 0.04, 0.15), but absolute activity at baseline was not associated with later walking speed. **DISCUSSION:** In older men and women, PA may reflect differences in walking speed and adiposity rather than in habitual physical behaviour. The selection of an absolute versus relative cut point led to opposing conclusions on the physical behaviour change over four years. The longitudinal evidence suggests that a higher volume of relative but not absolute PA is associated with maintaining a faster walking speed in ageing. Therefore, we encourage the inclusion of both physical function and activity assessments in epidemiological studies to avoid errors in causal inference.

S.11.2 - OPERATIONALISING MECHANOBIOLOGY IN SKELETAL LOAD ASSESSMENT BASED ON FREE-LIVING ACCELEROMETRY

Timo Rantalainen, University of Jyväskylä

Timo Rantalainen¹

¹University of Jyväskylä

Skeletal mechanobiology has been studied extensively using animal models and a tight coupling between site-specific mechanical loads and corresponding bone adaptations has been discovered. Loaded sites gain more bone and unloaded sites lose bone with the former being more specific to the location and the latter more spurious in the specificity of the localisation. These findings have been formulated into a heuristic mathematical model that includes the product of loading rate and load magnitude and a logarithm of the loading cycles. That is, high magnitude loads, such as those caused by maximal force efforts in resistance training can be efficacious provided at least a modest

loading rate. On the other hand, vibration with a low load magnitude can be efficacious provided a high loading rate. And finally, only a limited number of load cycles per day are prudent since the bone generating stimulus is quickly evoked with further cycles only serving to add to the risk of an overuse injury. With all of the above in mind high impact activities, such as jumping, have been identified as the mode of exercise most reasonable for targeting bone gains and subsequently shown to be efficacious in randomised controlled trials. Due to the physiological underpinnings introduced above I argue that the activity minute-based approach to accelerometer-based physical activity assessment is not optimally geared towards identifying bone-relevant free-living behaviours. Completing a jump takes less than a second and can therefore appear as a relatively modest intensity activity in an epoch based analysis. Moreover, the time taken to complete the roughly 30 impacts three days a week to initiate positive bone gains is such a minor proportion of the 7 x 24 h of the week that the contribution is entirely negligible towards daily/weekly activity minute counts. Therefore, an event count-approach is a reasonable operationalisation for free-living skeletal load assessment. Such an approach can be and has been implemented by identifying impact peaks in free-living accelerometry records and subsequently summarizing the events in a daily osteogenic index. The approach has been shown to be associated with high impact (jump training) exercise intervention-caused bone gains among pre-menopausal women, and to bone traits in cross-sectional explorations among age-groups from adolescents to older adults. I suggest that this success in operationalising mechanobiology could or even ought to be used as a template in envisioning novel targeted accelerometry-based metrics for other tissue or organ system targets such as the intervertebral discs.

S.11.3 - FREE-LIVING SIT-TO-STAND KINEMATICS AS AN INDICATOR OF LOWER EXTREMITY PHYSICAL FUNCTION

Antti Löppönen University of Jyväskylä

Antti Löppönen¹, Laura Karavirta¹, Kaisa Koivunen¹, Lotta Palmberg¹, Erja Portegijs², Taina Rantanen¹, Taija Finni¹, Christophe Delecluse³, Evelien Van Roie³, Timo Rantalainen¹

¹University of Jyväskylä, ²University of Groningen, ³KU Leuven

BACKGROUND AND AIM: Strength-demanding daily activities such as sit-to-stand (STS) transitions are essential for independent living among community-dwelling older adults. Measurement of STS transitions using advanced wearable sensors offers a broader picture of physical activity and may potentially be indicative of a future decline in physical functioning. This presentation describes a method that can be used to detect and quantify the intensity of free-living STS transitions. In addition, it shows how free-living STS characteristics are associated with laboratory-based measurements and considers whether STS characteristics could be an indicator of future decline in physical functioning among older adults. **METHODS:** The data consists of the Active Ageing (AGNES) study baseline (n = 479) and 4-year follow-up measurements (n = 340). The participants were community-dwelling older adults aged 75, 80 and 85 years at baseline. Free-living STS characteristics were measured using a custom-made algorithm that processed thigh-worn accelerometer data (100 Hz, 13-bit, ± 16 g, UKK RM42; UKK Terveyspalvelut Oy, Tampere, Finland) of 3–7 days of continuous recording. From this data, the number of STS was determined as the mean number of transitions per monitoring day. The free-living mean angular velocity of the STS transitions was determined as the daily mean of free-living median transitions from sitting to standing, and the free-living peak STS angular velocity was defined as the median of the ten fastest STS transitions over the full monitoring period. Lower-extremity physical functioning was assessed with the Short Physical Performance Battery (SPPB) and maximal isometric knee extension strength. **RESULTS:** The algorithm's accuracy in detecting STS transitions was over 93% and thigh angular velocity quantification of the algorithm corresponded to the results of the 2-D motion analysis. The number of STS transitions and the mean and peak angular velocity were positively associated with the total SPPB points and maximal isometric knee extension force ($r = 0.18$ – 0.39 , all $< .001$) and negatively associated with the 5 × STS test time ($r = -0.13$ to -0.45 , $< .05$) cross-sectionally. Higher free-living peak STS angular velocity (odds ratio [OR] 0.70; 95% confidence interval [CI] 0.52–0.92, per 20 deg/s increase) predicted a future lower-extremity physical functioning decline when adjusting for age, sex, and baseline SPPB. The number of STS transitions and mean STS angular velocity did not predict a future decline in lower-extremity physical functioning. **DISCUSSION:** Free-living STS transitions can be reliably detected using a single thigh-worn three-axial accelerometer. STS volume and quantified intensity were associated with laboratory-based lower extremity functioning and maximal strength among community-dwelling older adults. Free-living peak STS velocity shows promise as an early indicator of functional decline in old age.

S.11.4 - PHYSIOLOGY-DRIVEN BEHAVIOUR ASSESSMENT

Henri Vähä-Ypyä *The UKK Institute for Health Promotion Research*

Timo Rantalainen¹, Laura Karavirta¹, Antti Löppönen¹, University of Jyväskylä¹, Nicky Ridgers¹, Henri Vähä-Ypyä²

¹University of South Australia, ²The UKK Institute for Health Promotion Research

The symposium will comprise four talks on the topic of identifying aspects of free-living behaviour that would be expected to evoke physiological responses. Laura Karavirta will talk about considering the physiological function of an individual when assessing daily physical activity. Timo Rantalainen will discuss identifying bone generating free-living activities from accelerometry records. Henri Vähä-Ypyä will present on how relating the intensity of activity to cardiorespiratory fitness may affect our view of physical activity in a population representative sample. Antti Löppönen will postulate that sit-to-stand (STS) transitions could be used as a proxy of strength demanding daily activities among older individuals. The symposium will conclude with inviting the audience to discuss the claim that device-based physical activity metrics ought to be aligned with the well-recognised physiological underpinnings regarding organ-system adaptations.”

Symposium XII

Thursday, June 20

9:45-11:15am, Amphitheatre B

NOVEL INSIGHTS INTO DAILY PHYSICAL ACTIVITY AND FUNCTION IN FITTEST-TO-FRAILEST OLDER ADULTS: FROM VALIDATION TO REAL WORLD PERFORMANCE

Chair: **Nina Skjæret-Maroni**, *Norwegian University of Science and Technology*

S.12.1 - PHYSICAL PERFORMANCE IN THE HUNT4 70+ STUDY BY AGE AND EDUCATIONAL LEVEL

Kjerstin Melsæter *Trondheim Municipality, and Norwegian University of Science and Technology*

Kjerstin Melsæter¹, Beatrix Vereijken², Gro Gujord Tangen³

¹Trondheim Municipality, and Norwegian University of Science and Technology, ²Norwegian University of Science and Technology, ³Oslo University Hospital, and Oslo Metropolitan University

Physical performance in the HUNT4 70+ Study by age and educational level Kjerstin N. Melsæter, Beatrix Vereijken, Gro G. Tangen, Bjørn H. Strand, and Pernille Thingstad BACKGROUND: The Trøndelag Health Study (HUNT) is a longitudinal, population-based cohort study that includes data on self-reported health and health-related behavior in a population living in Mid-Norway, collected in waves since 1984(1). In the fourth wave of HUNT, participants aged 70 years and older (HUNT4 70+) were invited to an additional examination of physical and cognitive function, as well as sensor-based physical activity monitoring. The current presentation introduces the HUNT4 70+ Study and describes physical performance in the 70+ population by age and education. METHODS: In order to include older adults across the entire range of age and function, participants were offered examination at a test station, their own home or nursing home. Living situation, perceived health and level of education were based on self-reported questionnaires, while physical and cognitive function were assessed using the Short Physical Performance Battery (SPPB) and the Montreal Cognitive Assessment (MoCA). Self-reported measurements are reported by number of observations and percentages, while BMI and MoCA are presented as mean and standard deviation (SD). The distribution and variation in SPPB are presented by age, sex, and educational level. RESULTS: A total of 11,675 (47.7%) individuals participated in the 70+ examination, where 11,394 had valid registrations for the SPPB and were included in the analyses. Age ranged from 70 – 105.4 years, 54.8% were women, and 1,891 individuals were 85 years and older. A total of 23.4% of the women and 34.9% of the men had completed higher education (≥ 14 years), 47.2% (women) and 21.5% (men) were living alone, and 61.7% (women) and 67.8% (men) had good or very good self-reported health. Mean MoCA score was 22.9 (SD 4.8) and 22.7 (SD 4.3) in women and men, respectively. SPPB score decreased 0.33 points per year in women and 0.27 points per year in men. We observed earlier onset of frailty in those with lower levels of education (≤ 10 years) compared to those with higher levels of education (≥ 14 years). CONCLUSION: We succeeded in including a large and diverse population of older adults, enabling better understanding of diversity in health and function with increasing age and how age-related decline is affected by sex and educational level. REFERENCES: Åsvold et al. Cohort Profile Update: The HUNT Study, Norway. *Int J Epidemiol.* 2022 May 17;52(1):e80–91.

S.12.2 - DEVICE-MEASURED PHYSICAL ACTIVITY IN 9,235 OLDER ADULTS ACCORDING TO AGE, SEX AND EDUCATION. THE HUNT STUDY.

Karen Sverdrup, Norwegian National Centre for Ageing and Health

Karen Sverdrup¹, Astrid Ustad², Gro Gujord Tangen^{1,3}, Atle Austnes Kongsvold², Beatrix Vereijken², Bjørn Heine Strand⁴, Geir Selbæk¹, Linda Ernsten², Paul Jarle Mork²

¹Norwegian National Centre for Ageing and Health, ²Norwegian University of Science and Technology, ³Oslo University Hospital, and Oslo Metropolitan University, ⁴Norwegian Institute of Public Health

OBJECTIVE: To quantify time spent in type-specific daily physical activity (PA) by sex, and education in older adults. **METHODS:** This cross-sectional population-based study used data from the fourth wave of the Trøndelag Health study (HUNT4). PA was measured using two Axivity AX3 tri-axial accelerometers worn on the lower back and thigh, for seven consecutive days. PA types (walking, running, cycling) and posture (standing) were classified using a validated machine learning model and analysed as mean minutes per day (min/d). Periods detected as walking were further classified as slow (≤ 4 km/h $\sim \leq 1.11$ m/s), moderate (4.1-5.4 km/h ~ 1.12 -1.50 m/s), and brisk (≥ 5.5 km/h $\sim \geq 1.51$ m/s) walking. Additionally, walking, running, and cycling combined was labelled moderate-to-vigorous PA (MVPA), and analysed as mean minutes per week. To investigate PA by age, sex, and education, linear regression was used. To allow PA to be modelled flexibly, and to differ by age, sex, and education, we included interaction terms between sex and age and between education and age. All participants ≥ 65 years in HUNT4 with ≥ 1 day with complete 24h monitoring was included in this study (N=9,235). **RESULTS:** In total, older adults spent 346 min/d in PA. Most of the time was spent standing (252 min/d). Older adults spent 87 min/d walking and slow walking accounted for 69 min/d of total time walking. With increasing age, time spent in all PA types decreased. Women spent more time in standing and less time in MVPA than men, across age. Both women and men with ≥ 14 years education spent more time in standing, walking and MVPA in ages 70–85, than women and men with ≤ 13 years education. **CONCLUSION:** This study provides novel and validated estimates of device-measured PA in older adults. There are sex differences in time spent in type-specific PA in older adults, but independently of sex, older adults with higher education spend more time in all PA types than older adults with primary/secondary education.

S.12.3 - HOW OLDER ADULTS WALK IN DAILY LIFE IN RELATION TO AGE, SEX, AND LEVEL OF PHYSICAL FUNCTION - THE HUNT4 TRONDHEIM 70+ STUDY

Karoline Blix Grønvik Norwegian University of Science and Technology

Karoline Blix Grønvik¹, Anisoara Ionescu², Nina Skjæret-Maroni¹, Jorunn Helbostad¹, Gro Gujord Tangen³, Beatrix Vereijken¹

¹Norwegian University of Science and Technology, ²Ecole Polytechnique Federale de Lausanne, ³Oslo University Hospital, and Oslo Metropolitan University

INTRODUCTION: For older adults, age-related decline in gait function may threaten independent living and quality of life. Although we have detailed knowledge about how older adults walk in a controlled lab environment and some knowledge about the volume of walking in daily life, there is a lack of finer-grained information about how they walk in real-world settings. However, state-of-the-art wearable sensors in combination with validated digital mobility outcomes allow the investigation of how older adults walk in their daily lives. The objective of the current study is to describe how older adults walk in daily life in relation to age, sex, and level of physical function. **METHODS:** As part of the HUNT4 Trondheim 70+ Study, we monitored 1,278 older adults, age range 70-105 years, for one week using Axivity AX3 sensors. From the lower-back sensor, we estimated the following walking characteristics: daily walking bouts, walking bout duration, number of steps, cadence, distance covered, and walking speed, using algorithms validated by the Mobilise-D consortium (1). Physical function was assessed using the Short Physical Performance Battery. **RESULTS:** As expected, Mean and Maximum values of all walking characteristics decreased with age and functional decline for both sexes. However, the Mode of most walking characteristics remained remarkably stable across age and function, differing barely between groups or only in the oldest age groups. **CONCLUSION:** Our findings indicate that older adults manage to maintain their overall habitual way of walking throughout older age, even when faster gait speeds and longer walking periods dissipate from their daily life. (1) Micó-Amigo, M., Bonci, T., Paraschiv-Ionescu, A. et al. Assessing real-world gait with digital technology? Validation, insights and recommendations from the Mobilise-D consortium. J NeuroEngineering Rehabil 20, 78 (2023).

S.12.4 - DAILY PHYSICAL ACTIVITY AND TRAJECTORIES OF CARE SERVICES USE AMONG OLDER ADULTS: THE HUNT4 TRONDHEIM 70+ STUDY

Astrid Ustad Norwegian University of Science and Technology

Astrid Ustad¹, Kjerstin Melsæter², Trine Holt Edwin³, Karen Sverdrup⁴, Gro Tangen⁵, Øystein Døhl², Beatrix Vereijken¹, Pernille Thingstad², Nina Skjæret-Maroni¹

¹Norwegian University of Science and Technology, ²Trondheim Municipality, and Norwegian University of Science and Technology, ³Oslo University Hospital, ⁴Norwegian National Centre for Ageing and Health, ⁵Norwegian National Advisory Unit on Ageing and

BACKGROUND: There is limited evidence on the relationship of daily physical activity (PA) and the development of care services use among older adults. Understanding the factors that influence future care services use is crucial for enhancing efforts to prevent functional decline in the older adult population. This study aimed to identify distinct trajectory groups of care services use and determine if patterns of daily PA are relevant indicators for belonging to each group. **METHODS:** This prospective cohort study included 1514 home-dwelling participants aged 70 years or older from the HUNT4 Trondheim 70+ Study. Monthly data on care services use was retrieved from municipal registers over a 3-years follow-up period. Data included home care, rehabilitative services, short institutional stays, safety alarm, food service, admission to long-term care, and deaths. PA was assessed using two Axivity AX3 accelerometers (on thigh and lower back) over 7 consecutive days and was classified into activity types (walking, standing, running, cycling, sitting, and lying) using the HAR70+ activity type recognition model. Number of walking bouts and duration of bouts were also provided. Distinct groups of care services use were identified using group-based trajectory modeling. Regression models were used to evaluate the associations between group belonging and daily PA. In addition, relevant baseline characteristics (physical function, cognition, sex, and age) were added to the models. **RESULTS:** Mean age at baseline was 77.5 years (range: 70.1-105.4, 56% female) and 1042 (65%) had valid activity data. At baseline, 11% (n=160) received home care services, 4% (n=60) received rehabilitative services, and 15% (n=229) had safety alarm and/or food service. Over the 3-years follow-up period, 4% (n=61) of the sample were admitted to long-term care, and 9% (n=139) died. In addition to those who received services at baseline, the proportion of the sample receiving home care increased with 10% (n=151), while additional 17% (n=254) received rehabilitative services, and additional 9% (n=143) received safety alarm and/or food service during the 3-years follow-up period. Trajectories, association with daily PA and group characteristics analyses are ongoing work and will be presented at the conference. **CONCLUSIONS:** This study will provide new knowledge on the relationship of daily PA with care services use over time, thereby enabling targeted interventions to maintain function and independence in older adults.

Symposium XIII

Thursday, June 20

9:45-11:15am, Amphitheatre C

ADVANCES AND FUTURES OF 24 HOUR ANALYTICS

Chair: **Sebastien Chastin** Glasgow Caledonian University, Ghent University

S.13.1 - USING AI TO OPTIMISE 24H TIME USE

Dot Dumuid University of South Australia

Dot Dumuid¹, Adel Nikfarjam², Ty Stanford¹, Aneta Neumann², Frank Neumann²

¹University of South Australia, ²University of Adelaide

Few studies have attempted to define optimal time-use compositions. Knowledge of these optima would provide people with time-use goals they can aim for when deciding how to spend their time. We present the use of evolutionary algorithms within a compositional log-ratio framework as a novel approach to time-use optimisation. We demonstrate the methods using empirical data from ~900 children in the Australian CheckPoint study. The methods are applied to time-use composition with four health objectives (adiposity, fitness, life satisfaction and cognition). Objective functions linking the time-use compositions with health outcomes were defined in the log-ratio space, with the compositions expressed as isometric log ratios. We employed a quality diversity approach (MAP-Elite algorithm) which randomly crosses two 'parents' (solutions), thus generating an offspring on which the mutation operator is applied. If the

offspring solution for similar behaviour descriptors (time-use composition) is better in terms of meeting the objective, it replaces the existing solution. This process is iteratively repeated until termination criteria are met.

S.13.2 - BAYESIAN MULTILEVEL COMPOSITIONAL DATA ANALYSIS: A GENTLE INTRODUCTION

Flora Le *Monash University*

Flora Le¹, Dot Dumuid², Tyman E. Stanford², Joshua F. Wiley¹

¹Monash University, ²University of South Australia

Multilevel compositional data, such as repeated measures of the 24-hour movement behaviours in intensive, longitudinal studies, are common, yet analytically challenging. We introduce a Bayesian approach to analysing multilevel compositional data and investigating the association between the reallocation of movement behaviours and other phenomena (e.g., emotion) at a daily level. We explain the theoretical framework and software implementation of this method in our R package, *multilevelcoda*, and demonstrate its application in a real data study and robust performance via a simulation study.

S.13.3 - DATA-DRIVEN ANALYSIS OF COMPOSITION OF TIME SPENT IN PHYSICAL ACTIVITY INTENSITIES AND SEDENTARY BEHAVIORS

Vahid Farrahi *TU Dortmund University*

Vahid Farrahi¹, Mehrdad Rostami², Dot Dumuid³, Sebastien Chastin⁴, Maisa Niemelä², Raija Korpelainen², Timo Jämsä², Mourad Oussalah²

¹TU Dortmund University, ²University of Oulu, ³University of South Australia, ⁴Glasgow Caledonian University, Ghent University

Recently, a conceptual shift has occurred in analytical approaches used to assess associations with movement behaviors, moving away from exploring sedentary time, light-intensity physical activity, and moderate-to-vigorous intensity physical activity as independent exposures toward using more advanced approaches to study the combined effects of these activities on various health markers. Among newer analytical approaches, isotemporal substitution modeling has been most frequently used for studying the joint associations of physical activity behaviors with health outcomes, whereas data-driven, person-centered approaches have recently gained momentum. While compositional data analysis is excellent for studying the composition of total time spent in physical activities and sedentary behaviors, as well as predicting the changes in health markers through theoretical time reallocation among these behaviors, data-driven approaches can naturally accommodate a higher number of variables. This makes data-driven approaches potentially better candidates for studying how trajectories of the composition of physical activity intensities and sedentary behaviors, such as over one full week, may explain differences in health outcomes. Our aim was to identify and characterize joint profiles of sedentary time and physical activity among adults and investigate how these profiles are associated with markers of cardiometabolic health. We utilized data from 3702 participants of the Northern Finland Birth Cohort 1966 at age 46 years, who wore a hip-worn accelerometer during waking hours and provided seven consecutive days of valid data. Sedentary time, light-intensity physical activity, and moderate-to-vigorous-intensity physical activity on each valid day were obtained, and a data-driven clustering approach ("KmL3D") was used to characterize distinct joint profiles of sedentary time and physical activity intensities. We found four distinct waking activity behavior profiles, which were associated with cardiometabolic health markers including adiposity level, blood glucose, insulin, and cholesterol levels, even after accounting for cardiorespiratory fitness, self-reported sleep duration, and other confounders.

S.13.4 - FUNCTIONAL REGRESSION AND ISOTEMPORAL SUBSTITUTION ANALYSIS IN THE CONTEXT OF TIME-USE DATA

Paulína Jašková *Palacký University Olomouc*

Paulína Jašková¹, Karel Hron¹, Javier Palarea-Albaladejo², Aleš Gába¹, Dot Dumuid³, Željko Pedišić⁴, Jana Pelclová¹

¹Palacký University Olomouc, ²University of Girona, ³University of South Australia, ⁴Victoria University

To find out how are relative reallocations of time between physical activity of various intensities associated with health, we describe a newly developed compositional functional isotemporal substitution analysis. Physical activity intensity data can be considered as probability density functions, which better reflects the continuous character of their measurement using accelerometers. These probability density functions are characterised by specific properties, such as scale invariance and relative scale, and they are geometrically represented using Bayes spaces with the Hilbert

space structure. This makes possible to process them using standard methods of functional data analysis in the L2 space, via centred logratio (clr) transformation. The scalar-on function regression with clr transformation of the explanatory probability density functions and compositional functional isotemporal substitution analysis were applied to a dataset from a cross-sectional study on adiposity conducted among school-aged children in the Czech Republic. We obtained a detailed insight into the dose-response relationship between physical activity intensity and adiposity.

Symposium XIII

Friday, June 21

9:45-11:15am, Amphitheatre A

INTEGRATING INTERSECTIONALITY IN BEHAVIORAL DATA ANALYSIS: LABDA ADVANCING HEALTH INSIGHTS THROUGH 24-HOUR ACTIVITY DATA

Chair: **Mai Chin A Paw** *Child and Adolescent Public Health Research and Innovation*

Discussant: **Jasper Schipperijn**, *University of Southern Denmark*

S.14.1 - INTEGRATING INTERSECTIONALITY IN BEHAVIORAL DATA ANALYSIS: LABDA ADVANCING HEALTH INSIGHTS THROUGH 24-HOUR ACTIVITY DATA

Mai Chin A Paw *Child and Adolescent Public Health Research and Innovation*

Mai Chin A Paw¹

¹*Child and Adolescent Public Health Research and Innovation*

The Learning network for Advanced Behavioural Data Analysis (LABDA) Symposiumon “Integrating Intersectionality in Behavioral Data Analysis” focuses on the innovative intersection of data science and human movement epidemiology, emphasizing the integration of intersectionality throughout the value chain of data analysis. This includes methods, tools, and sensors to unravel the relationship between 24-hour activity data and health outcomes. Traditional approaches in public health have often overlooked the complex interplay of factors such as gender, age, ethnicity, and socio-economic position. However, LABDA’s novel approach recognizes that these elements map onto social hierarchies, interacting and intertwining to produce unique behavioral patterns and health outcomes. This symposium will explore how LABDA advances this field by tailoring algorithms to specific intersections, moving beyond generalized movement guidelines and delving into the diversity of characteristics like gender, ethnicity, and socio-economic position using multiple datasets from diverse samples and contexts. Symposium Presentation 1: Prof. Chin A Paw (15 min) Prof. Chin A Paw will present the overall aims of the LABDA learning network, highlighting the adopted intersectionality framework. In LABDA, intersectionality is crucial in analyses, considering how factors like gender, age, ethnicity, and socio-economic position interact within social hierarchies, leading to distinct behavioral patterns and health outcomes. Current movement guidelines, often tailored only to broad age groups, fail to address this diversity. LABDA aims to explore these variations using multiple datasets collected from diverse samples and contexts, emphasizing the importance of intersectional analysis in creating more inclusive and effective health guidelines.

S.14.2 - DEVELOPING A UNIVERSAL TAXONOMY OF 24-HOURS HUMAN ACTIVITY: AN INTERSECTIONAL HUMAN CENTERED APPROACH

Sebastien Chastin *Glasgow Caledonian University, Ghent University*

Sebastien Chastin¹, Usman Sani Dankoly²

¹*Glasgow Caledonian University, Ghent University*, ²*Glasgow Caledonian University*

BACKGROUND: The classification of human activity behaviour is fundamental for understanding and analysing patterns of daily life from body worn sensors. Taxonomies that categorise these activities are a pivotal tool. The need for a universal taxonomy is paramount for ensuring interoperability and facilitating comparative research across diverse populations. Existing frameworks, such as the Compendium of Physical Activity and classifications based on posture and movement intensity, provide a basic structure for understanding 24-hour movement behavior. However, these existing taxonomies often fail to capture the complexity and diversity inherent in human daily life, particularly due to their development predominantly from a white, Caucasian perspective. This limitation highlights the necessity for a more inclusive and comprehensive taxonomy that recognizes the varied experiences and behaviors resulting from intersectional identities. **Method:** In developing a universal taxonomy that also embraces intersectionality, our approach

is threefold. Firstly, we emphasize the reconciliation of universality with intersectionality, understanding that while human experiences are diverse, there are underlying universal patterns in daily activities. To achieve this, we adopt a human-centric approach, rooted in the principle that humans engage and recollect events as part of their daily life narrative. Secondly, we derive our nomenclature of activities directly from the narratives of people's daily lives. This narrative-based methodology ensures that the taxonomy is not only inclusive but also reflective of the real-life experiences of people from various intersectional backgrounds. By carefully curating these narratives, we aim to develop a taxonomy that is both intersectionally diverse and universally applicable. Thirdly, we recognise that each activity is part of a sequence that provides a context. This innovative approach promises to broaden our understanding of human activity behavior, moving beyond traditional models and offering a more nuanced view that considers the health implications of activities in the context of diverse life experiences. RESULTS: In the symposium we will present and discuss initial results about the key methodological features that are required to achieve these objectives. We will engage the audience in a open science survey about the narrative of the 24 hour day.

S.14.3 - OPEN-SOURCE LABDA TOOLBOX OF ADVANCED ANALYSES METHODS FOR WEARABLE DATA

Marian Paiva Marchiori *Southern Denmark University*

Gaia Segantin, *Amsterdam UMC*

Sebastien Chastin¹, Jasper Schipperijn², Gaia Segantin³, Marian Paiva Marchiori⁴, Mai Chin A Paw⁵

¹Glasgow Caledonian University, ²Ghent University, ³University of Southern Denmark, ⁴Amsterdam UMC,

⁵Southern Denmark University, ⁵Child and Adolescent Public Health Research and Innovation

LABDA fellows Gaia Segantin and Marian Paiva Marchiori will present the open-source LABDA toolbox of advanced analysis methods for wearable dataguiding users to the optimal method for their research question. Novelties range from its co-creation with various stakeholders, and standardization of data collection, metrics and movement behavior classification taxonomy. Moreover, the toolbox will provide unique insights on how to incorporate intersectionality in movement behavior analysis. The co-creation with stakeholders, ensures that the tools are relevant, user-friendly, and effective in addressing the diverse needs of different communities.

Symposium XV

Friday, June 21

9:45-11:15am, Amphitheatre B

EXPLORING THE IMPACT OF USING WEARABLE MOVEMENT SENSORS IN COLLEGIATE SPORT: FROM RESEARCH TO PRACTICE AND REHABILITATION TO COMPETITION

Chair: **Alexander Montoye** *Alma College*

Discussant: **Dinesh John** *Northeastern University*

S.15.1 - SETTING THE STAGE: CREATING ACADEMIC-ATHLETIC PARTNERSHIPS THAT ADDRESS PRACTICAL NEEDS AND RESEARCH QUESTIONS IN SPORT SCIENCE

Karin Pfeiffer *Michigan State University*

Karin Pfeiffer¹

¹Michigan State University

The definition of the term sport science has evolved over time. A general definition for sport science currently entails elements of collecting various forms of data to improve sport performance. It is becoming more common to use sport science in the collegiate setting to not only improve performance but to track athlete fatigue and health characteristics. Various types of data can contribute, but a proliferation in types and amount of available wearable technology has moved this type of information to the forefront. While athletic departments use the data for practical purposes, it can also be used to answer several research questions. Creating partnerships between practitioners and researchers can be valuable in achieving both goals. This presentation will focus on aspects of creating sport science partnerships between academic and athletic departments, particularly one example at Michigan State University. Considerations that will be addressed include: setting up the partnership, facilitating buy-in, obtaining institutional support (including human subjects approval), deciding which tools to use and collecting data logistics, amalgamating and sharing data

and resources, and maintaining communication and partnerships. Other elements to be addressed include details of each consideration, such as who to consider serving in various roles and how to make decisions.

S.15.2 - THE APPLICATION OF WEARABLE DEVICES AND BIO-MECHANICAL DATA TO INFORM PROGRAMS AND DECISION-MAKING IN ELITE SPORTS

William Burghardt *Michigan State University*

William Burghardt¹

¹*Michigan State University*

In the competitive realm of elite collegiate sports, the strategic integration of technology is pivotal. This portion of the presentation focuses on the use of wearable devices and strength data to enhance collegiate athletic performance and decision-making. This portion begins with an exploration of wearable device data collection in sports settings, emphasizing the importance of minimal intrusiveness for athlete comfort and practicality. We discuss the logistical aspects, such as the necessity of dedicated personnel and budget considerations for device procurement, and the importance of session breakdowns for effective future data analysis. In addition, we will address the importance of accounting for the differences between coaches and their preferences on using real-time data for immediate decision-making and athlete feedback. Data analysis is the core of our discussion, where we advocate for prioritizing key metrics and leveraging evidence-based research. Additionally, we will discuss the importance of recognizing each athlete's unique response to training stimuli, while also emphasizing the need to consider their current training and competition schedule when devising training plans and assessing the risks associated with training volume. Furthermore, we will discuss the challenges in accurately assessing skill acquisition and performance readiness. Beyond team training and performance, we will explore the planning of return-to-play protocols and the integration of each support unit (sports medicine, strength & conditioning, sport science, and coaching staff). Included in this portion will be a discussion dedicated to the integration of additional data sources like strength assessments and motion capture analysis. Finally, we highlight promising opportunities for future research in this field, including longitudinal tracking, the necessity for multi-team and multi-year projects, local joint assessments, and the development of improved skill assessment techniques. This presentation aims to shed light on how wearable technology and strength data can be effectively utilized in elite sports, offering attendees insights into cutting-edge methods for performance enhancement and injury prevention.

S.15.3 - USING DATA TO UNDERSTAND COLLEGIATE ATHLETE TRAINING VOLUMES AND PREDICTORS OF PERFORMANCE

Alexander Montoye *Alma College*

Alexander Montoye¹

¹*Alma College*

INTRODUCTION: Data science is increasingly used in collegiate sport, with performance data collected during resistance training, conditioning, practices, and competition. This presentation will cover examples from several studies conducted with data from Division 1 (D1) and 3 (D3) sports teams in the United States. **METHODS:** The EliteForm (Lincoln, NE, USA) tracked barbell movement during resistance training exercises to assess muscular strength and power. Vald systems (Vald Performance, Charlotte, NC, USA) assessed muscular force and power during jumping, isometric hip abduction and adduction, and eccentric hamstring contraction tests. The Catapult system (Boston, MA, USA) assessed variables such as distance covered, movement speed and acceleration, and training volume during on-field/court practices and competitions. Analysis 1 assessed relationships between lower-body power (squats and reverse lunges) and on-field sprint speed and acceleration in D1 Men's American Football. Analysis 2 evaluated on-field/court training volumes during practices and competitions in D1 Women's Soccer, Field Hockey, and Volleyball players. Analysis 3 compared player demographics and lower-body strength/power between D1 and D3 Men's and Women's Soccer players. **RESULTS:** In analysis 1, maximum running velocity and acceleration during off-season practices were moderately correlated to peak power in squat and reverse lunge exercises in the skilled players (quarterbacks, running backs, tight ends, linebackers, special teams; $r=0.46-0.66$) and were moderately correlated with peak power for reverse lunges for the big players (defensive and offensive linemen; $r=0.49-0.56$), but correlations were small/negligible for small players (defensive ends, wide receivers; $r=0.13-0.26$). Offseason jump height and peak power were moderately correlated with maximum running velocity and acceleration in big players ($r=0.41-0.57$) but weakly correlated for small ($r=0.07-0.21$) and skilled players ($r=0.32-0.38$). In analysis 2, weekly practice durations and total player workload rose from the pre-season to the beginning of the season (29-63%) and stayed consistent through the season. Player workload was higher during competitions than during the hardest weekly practices (~30% for field hockey and soccer, 12% for volleyball). Analysis 3 revealed small differences in player height (2-6 cm taller in D1) for both men's and

women's teams. Muscular power and jump heights were similar between divisions for the men but greater in D1 for women. Peak power during eccentric hamstring contraction and strength during hip adduction were similar between divisions for men and women, but hip abduction strength was higher in D1 vs. D3 men (20%) and women (42%).
CONCLUSION: These analyses provide examples of how collegiate sports data science aids in comparison of on- and off-field/court metrics and different divisions to better understand player performance and to track training volumes.

S.15.4 - BEYOND THE CLINIC: INTEGRATING WIRELESS ULTRASOUND AND SENSOR TECHNOLOGIES FOR KNEE HEALTH ASSESSMENT

Matt Harkey *Michigan State University*

Matt Harkey¹

¹*Michigan State University*

The symposium presentation focuses on the integration of clinically accessible technologies, specifically wearable sensors and wireless ultrasound imaging, to advance the monitoring and management of female collegiate athletes and patients following knee surgery. Emphasis will be placed on the significant role these wearable technologies play in linking clinical assessments to real-world applications in the realm of sports medicine and rehabilitation. In the collaboration with athletic programs, emphasis has been placed on understanding how real-world Catapult player load data is correlated with laboratory imaging measures like DXA scans for bone mineral density and ultrasound assessments of knee-related structures. This segment will showcase the innovative approach to combining wearable sensor data with laboratory assessments, demonstrating the relationships between player load, bone health, and the structural integrity of knee components in female collegiate athletes. This detailed analysis offers insights into the functional recovery throughout an athletic season, highlighting the practical application of integrating diverse data sets to understand athlete health comprehensively. Further, the presentation will explore collaborative efforts with orthopaedic surgeons to facilitate a data-driven recovery process for patients during the critical first year following knee surgery. The use of "Report Cards," which synthesize objective metrics from clinical assessments, will be highlighted to guide decision-making on return-to-sport. A specific focus will be given to the application of Loadsol force-sensing insoles in assessing asymmetries in walking gait and their correlation with outcomes such as knee effusion-synovitis and cartilage thickness. This analysis has illuminated the relationship between gait asymmetries and structural knee conditions, offering valuable insights into the mechanisms of rehabilitation improvements following knee surgery. Additionally, the coupling of these insoles with wireless ultrasound imaging to observe muscle and joint responses during physical activities will be examined. By highlighting these findings, the presentation will illustrate how wearable sensor data can inform and enhance clinical understanding of knee health and rehabilitation processes. Through a detailed examination of methodologies, collaborative models, and specific applications of wearable and imaging technologies, the presentation seeks to significantly contribute to the discourse on technology integration in rehabilitation and sports medicine. It aims to underscore the innovative tools' role in enhancing the precision of knee health monitoring and management, promising to redefine recovery pathways post-injury and surgery.

Friday, June 21

9:45-11:15am, Amphitheatre C

ACCURACY: THE HOLY GRAIL OF PHYSICAL BEHAVIOR ASSESSMENT — HOW BIG IS THE PROBLEM, ARE THERE SOLUTIONS, AND HOW HAVE OTHER DISCIPLINES SOLVED THIS ISSUE?

Chair: **Aiden Doherty** *University of Oxford*

Discussant: **Aiden Doherty** *University of Oxford*

S.16.1 - MEASUREMENT OF PHYSICAL ACTIVITY AND SEDENTARY BEHAVIOR IN EPIDEMIOLOGIC STUDIES: DOES ACCURACY MATTER?

Charles Matthews, *National Cancer Institute, National Institutes of Health*

Charles Matthews¹

¹ *National Cancer Institute, National Institutes of Health*

Accelerometer-based measures of physical activity have become an essential tool for epidemiologic studies investigating the relationships between these behaviors and disease risk. Findings in recent years have expanded our understanding of the role of lower and higher intensity physical activities and health, and they have further characterized dose-response relationships between physical activity and a variety of disease endpoints. With the growth of fitness trackers and smartwatches we now have unprecedented opportunities for translation of our research into health promotion efforts and expanded use of research-oriented devices in large population studies opens the door for implementation of more consistent public health surveillance measures internationally. The field of ambulatory monitoring has achieved great success, and this accomplishment raises the bar for us in terms of enhancing the consistency and accuracy of data derived from our methods. Our research has revealed many new scientific insights and accelerometer-based measures offer the potential for better surveillance of physical activity. However, large group-level differences are commonly observed when comparing estimates of sedentary time, moderate-vigorous intensity physical activity, and step counts from different prediction methods. The term “prediction method” is used here to describe various analytic approaches employed to estimate relevant behavioral metrics, including simple cut-points, results from regression equations, and more sophisticated modeling methods (e.g., machine learning)—independent of device type or wear location. Limited comparability between prediction methods can lead to inconsistency and uncertainty in estimating dose-response relationships in epidemiologic studies that are essential for informing public health guidelines; incorrect conclusions when examining long-term trends in physical activity surveillance data; and, in the clinical setting more variable information about patient’s physical activity which could reduce the value of this information in electronic medical records. This presentation will review select etiologic studies of physical activity and health with an eye towards examining differences in results between studies that may be due to variation in the prediction methods employed rather than differences in the populations studied. Challenges in our ability to consistently identify the absolute amounts of physical activity and sedentary behavior associated with lower or higher disease risk will be discussed. Given this variation in results the strengths and limitations of these data for our ability to translate epidemiologic results into health promotion efforts and prevalence estimates in public health surveillance will be considered. Finally, design elements of studies typically used to develop and test prediction methods will be discussed, and important next steps will be outlined.

S.16.2 - A FRAMEWORK FOR RIGOROUS, CONSISTENT AND SYSTEMATIC DEVELOPMENT AND EVALUATION OF WEARABLE SENSORS

Sarah Keadle *California Polytechnic State University San Luis Obispo*

Sarah Keadle¹

¹*California Polytechnic State University San Luis Obispo*

Wide variation in how our prediction algorithms have been developed/calibrated and evaluated have led to differences in the accuracy across methods and devices. This is a problem that stifles detailed between-study comparisons and efforts to pool data to generate more precise estimates of health effects of relevant physical behavior metrics, all of which are necessary to translate our research findings into clear public health recommendations. In this session we will review recent efforts by our team and others to develop a phase-based framework for device methods development and evaluation. The phases within the framework progress from initial mechanical testing of the sensor signal (phase 0), to methods development under controlled laboratory or semi-structured conditions (I and II), and end with a comprehensive naturalistic validation in real world conditions where individual variation is high (phase III). The phases become more reflective of real-world conditions as studies progress along the framework. We will focus on placing current literature into the context of our proposed aphase-based framework and highlight a scarcity of “phase III” studies, which include representative activities, robust ground-truth measures, and evaluation in independent samples. Significant advances in the field will require large, consistently labeled, free-living datasets that are now scarce due to the high cost to collect and annotate data. Efforts to harmonize data across studies are hindered by inconsistent terminology and a lack of core operational definitions for ground-truth measures. We will present data from four independent research labs comparing the within-and between site agreement for posture and intensity annotation of ground truth data, including between site agreement for intensity categories was 94.6% for sedentary, 80.9% for light, and 82.8% for moderate-vigorous. Three of the four sites had common labels for 8 posture/whole-body movements, with within-site agreements of 94.5% and between-site agreements of 86.1%. These data show that distinct research groups can annotate key features of physical behavior with good to excellent inter-rater reliability, but also show challenges in combining labels for other variables, including activity type due to differences ground-truth annotation. The goal of this session is to stimulate discussion on best practices for methods development and evaluation will lead to more rapid identification, refinement, and utilization of accurate and reliable methods.

S.16.3 - HOW DO OTHER MEDICAL AND RESEARCH DEVICES DEVELOP ACCURACY STANDARDS?

Kong Chen, *NIDDK, NIH*

Kong Chen¹

¹*NIDDK, NIH*

Accuracy is a critical measure for any sensors and predictive algorithms. One type of wearable device that have been rigorously researched, tested, approved, and applied in clinical use is the continuous glucose monitor (CGM). It typically uses a wearable sensor, a wireless transmitter, and a receiver/processing unit that automatically measure and report glucose levels at a regular interval (every 1-15 minutes) over days to weeks. With an estimated 2.4 million users, CGM systems were originally intended only for people with diabetes to monitor blood sugar levels (often with real-time updates) but have been applied more broadly in applications for personal health and nutrition in people with prediabetes and without diabetes. The accuracy of CGMs can be defined by analytical accuracy or clinical accuracy. The analytical accuracy can refer to point accuracy (measured interstitial glucose levels compared to validated blood glucose levels) or trend accuracy (algorithm-predicted rate of change or “shape” of glycemia over time). Clinical accuracy can be based on mean analytical accuracy performance in different clinical settings. Since CGMs are used to inform abnormal glycemia (particularly hypoglycemia) and guide insulin dosing which carried significant health risks, the accuracies of CGMs are critically important. There have been several point accuracy measures and standards of CGMs in the past 20+ years, such as the mean absolute difference (MAD), mean absolute relative difference (MARD), Clarke error grid, and Bland-Altman plot, and Trend Compass for trend accuracy. Research and regulatory (e.g., FDA and ISO) requirements have set standards for CGM systems with variable acceptable accuracy ranges at different glucose concentrations to minimize clinical risks, and describe the validation processes. Recently, the Glycemia Risk index of hypoglycemia and hyperglycemia for CGMs was developed for clinical accuracy. For research applications of other measurement technologies (e.g., room indirect calorimeters for energy metabolism and PET/CT imaging for human brown fat), consensus standards have been developed to guide the calibration and validation of the measurement systems, establish cut-off thresholds, as well as to ensure consistency reporting and facilitate meaningful comparisons between studies. Learning from the development of these accuracy standards, we can formulate and optimize a similar standardization framework for our wearable physical behavior monitors.

AUTHORS AND PRESENTERS

All authors (lead and additional) and presenters are listed here for easy cross-referencing to their respective abstract. The full abstract is available in the abstract's listing in the Whova Agenda.

Poster numbers are indicated as follows:

Poster Session.Poster Number

Oral numbers are indicated as follows:

Oral Session.Oral Talk Number

NAME	POSTER NUMBERS
Aasdahl, Lene	O.15.3
Abaraougu, Ukachuckwu	O.16.2
Acosta, Rolando	P2.6.67
Acquah, Aidan	O.5.2
Adamczyk, Peter	P2.6.62
Ahaouari Lemrabet, Touria	O.14.3
Albites-Sanabria, Jose	O.6.5, O.8.1
Alcock, Lisa	O.5.1, O.5.3
Altenburg, Teatske	O.12.2, O.16.3
Aminian, Kamiar	P2.4.46
Anderson-Song, Quinn	P1.2.28
André, Nathalie	P1.3.34
Anieto, Ebuka	O.16.2
Arguello, Deigo	P1.2.28
Arts, Jelle	O.12.2
Asera, Alex	O.14.2
Asunta, Piritta	P1.3.33
Aubert-Kato, Nathanael	O.13.4
Audsley, Sarah	O.16.2
Awata, Shuichi	P2.4.43
Babel, Marie	P2.6.69
Bach, Kerstin	O.4.4
Badon, Sylvia	O.14.2
Baker, Kenneth	O.10.1
Baldelli, Luca	P2.6.61
Ballester, Joan	P1.1.15
Bandinelli, Stefania	O.6.5
Bardal, Ellen Marie	O.4.4, O.13.2, O.15.3
Bartloff, Jennifer	P2.6.62
Batista, Carla	P1.3.36
Baudier, Robin	P1.3.36

NAME	POSTER NUMBERS
Baumgart, Julia	P1.1.14
Bearne, Lindsay	O.16.2
Becker, Clemens	O.6.1, O.6.2, O.6.4, O.7.5, P2.4.46
Berendsen, Brenda	O.14.3, P1.2.25
Berge, Martin	O.6.3, O.6.4
Bertelsen, Emilie	O.9.4
Biallas, Bianca	O.4.3
Biggs, Beverley-Ann	O.9.1
Bijnens, Wouter	O.13.1
Bishop, Tom	O.2.1
Bistoni, Teo	P2.7.70
Bizzozero-Peroni, Bruno	P1.1.17, P1.1.18
Boekesteijn, Ramon	O.7.4
Bonci, Tecla	O.6.1
Bongers, Noah	O.15.2
Booth, Lorna	O.16.2
Bosma, Hans	O.14.3
Boudreaux, Benjamin	O.11.4, O.11.5
Braat, Sabine	O.9.1
Brage, Soren	O.2.1
Brakenridge, Christian	O.9.5
Brand, Yonatan	P2.4.46
Brandes, Berit	O.12.1
Brandes, Mirko	O.12.1
Braun, Julia	O.6.1
Braun, Theresa	O.4.3
Brimblecombe, Julie	O.9.1
Brittenden, Julie	O.16.2
Brodie, Matthew	P1.1.11, P1.3.35
Brown, Philip	O.5.1
Brown, Tamara	P1.2.27

NAME	POSTER NUMBERS
Brozgol, Marina	O.1.3
Bruning, Frank	O.1.4, O.7.4
Brusaca, Luiz	O.15.4
Brychta, Robert	P2.4.41
Buck, Christoph	O.12.1, O.2.4
Buckley, Ellen	O.6.2
Buekers, Joren	O.6.1, O.6.2
Buffey, Aidan	O.15.5
Burchartz, Alexander	O.14.4, P1.1.12
Burgos, Pablo	O.5.5, P1.3.36,
Burk, Lukas	O.12.1
Bussmann, Johannes	O.14.4, P2.6.60
Buzaglo, David	O.1.5, P1.3.38
Cairney, John	O.12.5
Campbell, Kody	O.1.2
Cani, Ilaria	P2.6.61
Cardon, Greet	O.2.4
Carlson-Kuhta, Patricia	O.5.5, P1.3.36
Carson, Brian	O.15.5
Cassani, Davide	P2.7.70
Caulfield, Brian	O.6.1
Cereatti, Andrea	P2.4.46
Cerfoglio, Serena	P2.7.70
Ceruolo, Melissa	O.10.2
Chadwell, Alix	O.9.2, P1.3.31
Chalabaev, Aïna	O.9.3
Chan, Shing	O.3.1, O.5.2
Chanteau, Adrien	P2.5.56, P2.5.57
Chaory, Karl	P1.3.34
Chastin, Sebastien	O.4.1, O.11.1, P2.5.51
Chen, Kong	P2.4.41
Chernova, Julia	O.6.1

NAME	POSTER NUMBERS
Cheval, Boris	O.10.5
Chevance, Guillaume	P1.1.15
Chiari, Lorenzo	O.4.5, O.6.5, O.8.1, P1.1.16, P1.2.29, P2.6.61
Chin A Paw, Mai	O.3.2, O.12.2, O.16.3
Cho, Selena	O.13.5
Choi, Ji-Yeob	O.16.5
Christiansen, Cory	O.7.1, O.7.2
Christie, Michael	O.9.1
Cimolin, Veronica	P2.7.70
Ciravegna, Fabio	O.5.1
Clark, Anna	P1.2.27
Clark, Bronwyn	O.9.1, O.15.1, O.15.2
Clark, Ronald	O.2.3
Clarke-Cornwell, Alexandra	P1.2.27, P2.5.54
Clemes, Stacy	P2.5.54
Clevenger, Kimberly	O.2.5, O.8.3
Clifton, David	O.5.2
Conger, Scott	P2.4.49
Congnard, Florian	O.8.2
Cooper-Ryan, Anna	P1.2.27
Correia, Ines	P1.3.30
Cox, Simon	O.11.1
Coyle-Asbil, Bridget	P1.2.21
Coyle-Asbil, Hannah	O.12.1, P1.2.21
Creagh, Andrew	O.5.2
Crofts, Regan	P2.4.63
Crouter, Scott	O.12.3, P2.4.49
Cruz, Marisa	P2.7.70
Curtin, Samantha	O.9.2
Daimaru, Kaori	P2.4.43
Dall, Philippa	O.4.1, O.11.1, O.16.2
Danilevich, Ian	O.14.1, O.16.4
D'ascanio, Ilaria	P2.6.61
Davies, Melanie	P2.5.54
Davis, Brett	O.12.3, P2.4.49
Dayton, Michael	O.7.2
De Galan, Bastiaan	O.14.3
De Müllenheim, Pierre-Yves	O.8.2
Dearling, Jeremy	O.16.2
Deary, Ian	O.11.1
Defoort, Koen	O.7.4

NAME	POSTER NUMBERS
Deguchi, Naoki	P2.4.43
Del Din, Silvia	O.3.3, O.5.1, O.5.3, O.6.1, O.6.2, O.10.1, P2.4.46
Demeyer, Heleen	O.6.1, O.6.2
Dennis, Douglas	O.7.2
Deschamps, Valérie	P2.4.45
Devigne, Louise	P2.6.69
Di, Chongzhi	P2.6.66
Di Cristofaro, Natascja	O.12.5
Di Florio, Paola	P1.1.16
Díaz-Goñi, Valentina	P1.1.17, P1.1.18
Dibble, Lee	P2.4.63
Dillon, Hayley	O.9.5
Dissanayake, Hasthi	O.9.1
Doherty, Aiden	O.2.3, O.3.1, O.3.4, O.5.2, P2.5.52
Dominick, Gregory	P2.4.42
Donnelly, Alan	O.2.4, O.15.5, P1.1.10
Driessens, Kurt	P1.2.25
Duclos, Martine	O.9.3
Dugravot, Aline	O.14.1, O.16.4
Duncan, Scott	O.12.4
Dunn, Macey	O.8.4, P2.5.58
Dunstan, David	O.9.5, P2.5.54
Ebner-Priemer, Ulrich	P2.6.68
Eckert, Tobias	O.6.4
Eckmann, Henrik	P2.5.51
Edwardson, Charlotte	P2.5.54
Elavsky, Steriani	O.2.4
Engdal, Monika	O.6.4, O.7.5
Ensink, Carmen	O.10.3
Escribano, Joaquin	O.8.5
Esliger, Dale	O.16.3
Eumann Mesas, Arthur	P1.1.18
Evans, Ellen	O.11.5
Evenson, Kelly	P2.6.66
Evers, Jordi	O.5.1
Fairer, Kimberly	O.16.2
Farrés-Godayol, Pau	O.11.1
Fehr, Katherine Heidi	P2.6.62
Fenne, Roar	O.4.4, O.15.3
Fenton, Candida	O.16.2
Ferry, Jill Marie	O.8.5

NAME	POSTER NUMBERS
Fessler, Layan	O.10.5
Fiedler, Janis	O.14.4
Fino, Peter	O.13.5, P2.4.63
Forster, Jeri	O.7.2
Fraudet, Bastien	P2.6.69
Frederick, Ginny	O.11.5
Frei, Anja	O.6.1
Friedl, Karl	O.3.5
Froboese, Ingo	O.4.3
Gabriel, Kelley	O.14.2
Gaitskell, Kezia	O.3.1
Gallagher, Daniel	O.11.4, O.11.5
Galli, Manuela	P2.7.70
Galperin, Irina	O.1.5, P1.3.38
Ganse, Bergita	O.7.3
Garcia-Aymerich, Judith	O.6.1, O.6.2
Gazit, Eran	O.1.3, O.6.1, O.6.2, O.10.4
Geisler, Christina	P2.4.63
Gelein, Brigitte	P1.3.34
Giannini, Giulia	P2.6.61
Giblin, Susan	P1.1.10
Gilad-Bachrach, Ran	O.13.3
Ginis, Pieter	O.10.4
Gismervik, Sigmund	O.15.3
Gispert-Llauradó, Mariona	O.8.5
Giurgiu, Marco	O.14.4, P2.6.68
Godfrey, Alan	O.5.4, P2.6.64,
Gomez, Andrew	P2.4.50
Gonzalez, Tomas	O.2.1
Gorely, Trish	O.16.2
Gormal, Cathy	O.16.2
Gracey-Mcminn, Lauren	O.9.2, P1.3.31
Granat, Malcolm	O.9.2, P1.3.31, P2.5.54, P2.6.65
Gravier, Michelle	P1.3.32, P1.3.37
Green Howard, Annie	P2.6.66
Grillo, Massimo	P2.7.70
Grote, Veit	O.8.5
Gruson-Wood, Julia	P1.2.21
Grzeskowiak, Fabien	P2.6.69
Gubbels, Jessica	O.12.2
Gupta, Nidhi	O.15.4

NAME	POSTER NUMBERS
Guruwiwi, George	O.9.1
Haddadj, Rayane	P2.4.45
Haines, Jess	P1.2.21
Hakamuwalekamlage, Dulari	O.9.5
Hallman, David	O.15.4
Hamadi, Hanadi	P2.4.50
Hammond, Kelley	P2.4.44
Hamy, Valentin	O.5.2
Hanieh, Sarah	O.9.1
Hanlon, Shawn	O.7.1
Hannah, Mary	O.11.1
Hansen, Bjørge	P2.5.51
Harrap, Ben	O.9.1
Harrington, Janas	O.2.4
Harrison, Leonard	O.9.1
Hasanaj, Kristina	P1.1.11
Hatori, Hitomi	O.13.4
Hausdorff, Jeffrey	O.1.3, O.1.5, O.6.1, O.6.2, O.10.4, O.13.3, P1.3.38, P2.4.46
Havik, Merle	O.11.3
Hayes, Grainne	O.2.4, P1.1.10
Healy, Genevieve	O.15.1, O.15.2
Hebestreit, Antje	O.2.4
Hedderson, Monique	O.14.2
Heidler, Josef	O.2.2
Helbostad, Jorunn	O.7.5, O.6.4, O.8.1, P1.14
Heseltine, Katherine	O.15.1
Hetherington, Victoria	P2.6.64
Hettiarachchi, Pasan	O.4.3, O.12.4
Hi Yue, Chan	O.15.1
Hibbing, Paul	O.12.3
Hickey, Madalyn	O.8.4, P2.5.58
Hill, Elizabeth	P2.5.52
Hinchliffe, Chloe	O.3.3
Hinrichs-Kinney, Lauren	O.7.2
Hoffman, Rashelle	O.7.1, O.7.2, P2.4.44
Hofstad, Cheriell	O.10.3
Holbrook, Ryan	O.10.4
Hollien, Adam	P2.4.63
Horak, Fay	O.5.5, P1.3.36
Howden, Erin	O.9.5

NAME	POSTER NUMBERS
Hunter, Heather	O.5.1
Hyun Lim, Song	O.16.5
Imbesi, Silvia	P2.6.61
Imhoff, Meghan	O.14.5
Indaco, Rossella	P2.7.70
Intille, Stephen	P2.4.48
Ionescu, Anisoara	O.6.1, O.6.3
Ireson, Neil	O.5.3
Ishihara, Asuka	P2.4.41
Jansen, Carl-Philipp	O.6.1, O.6.4, O.7.5
Joao Cardoso, Maria	P1.3.30
Johansson, Peter	O.4.3, O.12.4
John, Dinesh	P1.2.28, P2.4.48
Juarez-Colunga, Elizabeth	O.7.1
Judd, Dana	O.7.2
Kabb, Sami	O.15.1
Karinharju, Kati	P1.3.33
Karni, Arnon	O.1.5
Karpe, Fredrik	P2.5.52
Keadle, Sarah	P1.1.11
Keijsers, Noel	O.1.1, P2.4.47
Kenney, Laurence	P1.3.31
Khunti, Kamlesh	O.16.1
Kim, Joseph	O.3.5
King, Laurie	O.1.2
King-Dowling, Sara	O.12.5
Kingsnorth, Andrew	O.16.1
Kirk, Cameron	O.5.3, O.10.1
Kirk, Paul	O.2.1
Kirsch, Leslie	O.10.4
Kittle, Jamie	O.15.2
Klenk, Jochen	O.6.4, O.7.5
Kline, Paul	O.7.1
Kluge, Felix	P2.4.46
Koch, Sarah	O.6.1
Koëter, Sander	O.1.4
Kolb, Simon	O.14.4, P1.1.12
Koletzko, Berthold	O.8.5
Konstabel, Kenn	O.11.3
Koster, Annemarie	O.14.3
Kukko, Tuomas	P1.3.33
Kulmala, Janne	P1.3.33

NAME	POSTER NUMBERS
Kyle, Simon	P2.5.52
La Porta, Fabio	P1.2.29
Lacroix, Andrea	P2.6.66
Lamonte, Michael	P2.6.66
Lamunion, Samuel	O.12.3, P2.4.41
Landré, Benjamin	O.14.1
Lang, Charlotte	P1.3.35
Lapidus, Jodi	P1.3.36
Le, Alexis	P2.5.56, P2.5.57
Leblong, Emilie	P2.6.69
Lee, Jung Eun	P2.4.42
Lee, Daehyoung	P2.4.42
Lee, I-Min	P2.6.66
Lee, Miyoung	O.16.5
Lemos, Jorge	O.6.1
Lendt, Claas	O.4.3, O.12.4
Leonard, Krista	P1.1.11
Lerma, Nicholas	O.8.4, O.14.5, P2.5.58
Lettink, Anne	O.12.2
Letts, Elyse	O.8.3, O.12.5
Lever Taylor, Jessie	P2.7.70
Lim, Miranda	O.5.5
Liu, Zijia	P1.2.25
Logacjov, Aleksej	O.13.2
Long, Michael	O.6.1
Lopane, Giovanna	P2.6.61
Loudon, David	O.9.2
Lucerón-Lucas-Torres, Maribel	P1.1.17, P1.1.18
Lullini, Giada	P1.2.29
Ma, David	P1.2.21
Macrae, Victoria	O.3.3
Madsen, Cathrine	P1.2.20
Maetzler, Walter	O.6.1, P1.3.35, P2.4.46
Magrini, Mitchel	P2.4.44
Mahé, Guillaume	P2.5.56, P2.5.57
Malveiro, Carla	P1.3.30
Mancini, Martina	O.1.2, O.5.5, P1.3.36
Manor, Brad	O.10.4
Marchena, José	O.6.1
Martínez-Vizcaino, Vicente	P1.1.17, P1.1.18
Mathiassen, Svend Erik	O.15.4

NAME	POSTER NUMBERS
Matos, Leonor	P1.3.30
Matthews, Charles	O.3.1, O.4.2
May, Stephen	O.2.5
Maylor, Ben	O.16.1
Maylor, Benjamin	P2.5.52, P2.5.54
Mazeas, Alexandre	O.9.3
Mazzucchelli, Umberto	P2.7.70
Mcginis, Ryan	O.10.2
Mckee, Katherine	O.2.5
Mcmeekin, Peter	O.5.4, P2.6.64
Mcparland, Joanna	O.16.2
Mcveigh, Joanne	O.11.2, P1.1.13
Meijer, Kenneth	O.13.1
Melanson, Edward	O.7.1
Melaro, Jake	O.12.3, P2.4.49
Melendez-Calderon, Alejandro	O.15.1
Mendoza, Albert	P1.3.32, P1.3.37
Merete Brændvik, Siri	O.13.2
Mertes, Gert	O.5.2
Meskers, C.G.M.	P2.6.60
Meyer, Brett	O.10.2
Mincoelli, Giuseppe	P2.6.61
Monoli, Cecilia	P2.4.63
Montoye, Alexander	O.2.5, O.8.3
Moore, Jason	O.5.4
Moore, Steven	O.3.1
Morris, Amanda	P2.4.63
Moscato, Serena	P1.2.29
Motooka, Nobuhisa	P2.5.53
Moullin, Joanna	P1.1.13
Mueller, Arne	O.6.2, P2.4.46
Mula-Muñoz, Santiago	P1.1.17, P1.1.18
Mulindwa, Benedict	P1.3.31
Muniyappa, Ranganath	P2.4.41
Murd, Carolina	O.11.3
Murphy, Blake	P2.4.44
Murray, Ciara	P1.1.10
Nakagata, Takashi	O.13.4
Nakajima, Yuki	P2.5.53
Nestore, Ludovica	P2.7.70
Neuvonen, Joonas	P1.2.26
Ng, Wan-Fai	O.3.3
Nienja Langerak, A.J.	P2.6.60

NAME	POSTER NUMBERS
Niessen, Martijn	O.5.1
Niessner, Claudia	P1.1.12
Nieuwboer, Alice	O.10.4
Nieuwelink, Marijke	O.1.1
Noh, Jung Min	O.16.5
NOURY, Benedicte	O.8.2
Núñez De Arenas-Arroyo, Sergio	P1.1.17, P1.1.18
O'Connor, Patrick	O.11.5
Obeid, Joyce	O.12.5
O'Gorman, Clodagh	P1.1.10
Oh, Jinseok	P1.2.22
Ohta, Yuji	O.13.4, P2.5.53
Okada, Shinpei	P2.4.43
Oliveira, Ana Beatriz	O.15.4
Olivier, Anne-Hélène	P2.6.69
Oppert, Jean-Michel	O.2.4
Orlandi, Silvia	P1.2.29
Orme, Mark	O.16.1
Orth, Marcel	O.7.3
Osojnicki, Katarina	P1.1.19
Ostler, Chantel	O.9.2
Packer, Emma	O.5.1
Paiva Marchiori, Marian	O.2.2, P1.2.23
Palmerini, Luca	O.4.5, O.6.5, O.8.1, P1.1.16, P2.4.46, P2.6.61
Palumbo, Pierpaolo	O.6.5
Pang, Bingyan	P1.1.13
Pangallo, Domenico	P2.7.70
Papier, Keren	O.3.1
Parada Jr., Humberto	P2.6.66
Pearce, Matthew	O.2.1
Perlman, Or	P2.4.46
Peter, Raphael	O.7.5
Petersell, Tessa	P2.4.63
Petrov, Megan	P1.1.11
Peyrachon, Romane	P1.3.34
Pickard, Nicolaas	P1.3.31
Pirini, Chiara	P2.6.61
Plasqui, Guy	O.13.1
Plekhanova, Tatiana	P2.5.52
Pohlemann, Tim	O.7.3
Ponger, Penina	O.1.3
Potter, Adam	O.3.5

NAME	POSTER NUMBERS
Preece, Stephen	P1.2.27
Quammen, David	P2.4.63
Quested, Eleanor	O.11.2
Quinn, Joseph	O.5.5
Quinn, Lori	O.13.3
Rabel, Antoinette	P2.4.41
Ragothaman, Anjanibhargavi	P1.3.36
Ravi, Deepak	P1.3.35
Razieh, Cameron	P2.5.51
Rébillard, Amélie	P1.3.34
Redington, Emily	P2.6.67
Regalia, Giulia	P2.7.70
Regev, Keren	O.1.5
Regterschot, Ruben	P2.6.60
Remillard, Nicholas	O.12.3, P2.4.49
Reynolds, Amy	O.11.2
Rezaei, Amin	P2.5.55
Rhodes, Sarah	O.16.2
Ribbers, G.M.	P2.6.60
Rice, Darrian	P2.6.67
Richard, Cindy	P1.3.34
Richardson, Vanessa	O.7.1
Rochester, Lynn	O.5.1, O.5.3, O.6.1, O.6.2, P2.4.46
Rodríguez Gutiérrez, Eva	P1.1.17, P1.1.18
Roeleveld, Karin	O.13.2
Rogers, Ethan	P1.2.28
Rohloff, Peter	P1.2.22
Rohmert, Lotta	O.8.5
Roux, S.L.	P2.6.60
Rowlands, Alex	O.16.1, P2.5.51
Ryan, Elizabeth	O.14.2
Ryde, Gemma	P2.5.54
Sabattini, Loredana	P1.2.29
Sabia, Séverine	O.14.1, O.16.4
Saint-Maurice, Pedro	O.3.1, P1.3.30
Salanave, Benoît	P2.4.45
Salim, Agus	O.9.5
Salomon, Amit	O.1.3, O.1.5, O.10.4, P1.3.38
Sani Dankoly, Usman	O.4.1
Sardinha, Luis	P1.3.30
Sarrazin, Philippe	O.10.5
Sarvestan, Javad	O.10.1

NAME	POSTER NUMBERS
Sasai, Hiroyuki	P2.4.43
Savelberg, Hans	O.14.3, P1.2.25
Schaper, Nicolaas	O.14.3
Schipperijn, Jasper	O.2.3, O.4.1, P1.2.20, P1.2.23
Schmidt, Michael	O.11.4, O.11.5
Schonfeldt, Abram	O.2.3
Schram, Miranda	O.14.3
Schwartz, Dafna	O.13.3
Scott, Kirsty	O.5.3
Sears, Dorothy	P1.1.11
Seenan, Christopher	O.16.2
Selles, Ruud	P2.6.60
Sequí-Domínguez, Irene	P1.1.17, P1.1.18
Serafino, Matteo	P2.7.70
Shah, Vrutangkumar	O.5.5, P1.3.36
Sharman, Rachel	P2.5.52
Sharp, Stephen	O.2.1
Sharrack, Basil	O.6.1, O.6.2
Sherar, Lauren	O.16.3, P2.5.51
Sherwood, Jennifer	P1.3.32, P1.3.37
Shimura, Hiroko	P2.4.43
Shreves, Alaina	O.3.1
Sicbaldi, Marcello	O.4.5, P1.1.16, P1.2.29
Siedlik, Jacob	P2.4.44
Sigcha, Luis	O.2.4
Silvani, Alessandro	O.4.5, P1.1.16
Singh, Navrag	P1.3.35
Singleton, David	O.6.1, O.6.2
Skelton, Dawn	O.11.1, O.16.2
Skjæret-Maroni, Nina	O.9.4
Small, Scott	O.3.1, O.5.2, P2.5.52
Smith, Beth	P1.2.22
Smith, Lindsey	P2.4.41
Smulders, Katrijn	O.1.1, O.1.4, O.7.4, P2.4.47
Sone, Mari	O.16.3
Speirs, Craig	P2.5.59
Ssekitoleko, Robert	P1.3.31
Stamatakis, Emmanuel	P1.1.13
Stefania, Pozzi	P1.2.29
Stevens-Lapsley, Jennifer	O.7.2
Stewart, Tom	O.12.4

NAME	POSTER NUMBERS
Stoffel, Devon	P2.4.44
Stuart, Samuel	O.5.4
Sturge, Adam	O.3.4
Sultson, Hedvig	O.11.3
Tacconi, Carlo	P2.6.61
Talman, Lauren	O.5.5
Tammelin, Tuija	P1.3.33
Taraldsen, Kristin	O.7.5
Telfer, Brian	O.3.5
Theunissen, Theo	O.10.3
Thies, Sibylle	P2.6.65
Thøgersen-Ntoumani, Cecilie	P1.1.13
Thomas, George	O.15.1, O.15.2
Thomas, Sébastien	P2.6.69
Thompson, Craig	O.11.2, P1.1.13
Timmons, Brian	O.12.5
Tognetti, Simone	P2.7.70
Torres Costoso, Ana	P1.1.17
Tørring, Marte	O.13.2
Toth, Lindsay	P2.4.50
Totzauer, Martina	O.8.5
Tran, Hoan	P2.4.48
Travis, Ruth	O.3.1
Tripette, Julien	O.13.4, P2.5.53
Troosters, Thierry	O.6.1, O.6.2
Trudgen, Tim	O.9.1
Tu, Danni	P2.6.67
Tucker, Trish	O.12.5
Tynan, Josh	O.9.1
Urbanek, Jacek	P2.6.67
Ustad, Astrid	O.9.4, O.13.2
Vallis, Lori Ann	O.12.1, P1.2.21
Van Beijnum, B.J.F.	P2.6.60
Van De Ven, Myrthe	O.1.4
Van De Ven, Pepijn	O.2.4
Van Den Ende, Els	O.1.4, O.7.4
van Dieën, Jaap	P1.3.35
Van Duijvenboden, Stefan	P2.5.52
Van Ee, Rene	O.10.3
Van Greevenbroek, Marleen	O.14.3
Van Hees, Vincent	O.14.1
Van Horn, Emily	P1.3.32

NAME	POSTER NUMBERS
Van Mierlo, Michelle	O.1.1, O.1.4, P2.4.47
Vanhelst, Jeremy	P2.4.45
Verdot, Charlotte	P2.4.45
Vereijken, Beatrix	O.6.2, O.6.3, O.6.4, O.7.5, P1.1.14, P2.4.46
Vetrovsky, Tomas	O.2.4
Vidil, Sam	O.14.1, O.16.4
Vielma, Constanza	P1.1.15
Visch, Lara	O.1.1
Voermans-Dean, Haley	P2.4.42
Volk, Carmen	P1.1.12
Von Haaren-Mack, Birte	O.14.4, P1.1.12
Vriezেকolk, Joke	O.1.4
Walker, Richard	O.5.4, P2.6.64
Wall, Conor	P2.6.64
Walton, Jade	O.3.3
Wan, Phoebe	O.11.2
Wang, Yisen	P2.6.62
Warmerdam, Elke	O.7.3
Wassall, Matthew	P2.6.65
Welzel, Julius	P1.3.35
Wen, Fang	P2.6.66
Wentworth, John	O.9.1
White, Simon	O.2.1
Wieringen, Wessel	O.3.2
Williamson, James	O.3.5
Wolff, Christian	O.7.3
Woll, Alexander	P1.1.12
Woll, Simon	O.14.4, P2.6.68
Wright, Marvin	O.12.1
Yarnall, Alison	O.5.1, O.5.3, O.6.2, P2.4.46
Yates, Tom	O.16.1, P2.5.54
Yu, Fang	P1.1.11
Yuan, Hang	O.5.2
Zaccardi, Francesco	O.16.1
Zahedi, Saeed	P2.6.65
Zaragoza-Jordana, Marta	O.8.5
Zeng, Nan	P1.2.24
Zhai, Bing	O.3.3
Zheng, Xin	O.3.2

ORAL SESSIONS

Wednesday, June 19

10:15-11:15am

Oral Session #1

CLINICAL POPULATIONS 1

Location: Amphitheatre A

O.1.1 - THE RELATIONSHIP BETWEEN GAIT CAPACITY AND GAIT PERFORMANCE IN NEUROLOGICAL PATIENTS

Michelle Van Mierlo¹, Marijke Nieuwelink¹, Lara Visch¹, Katrijn Smulders¹, Noel Keijsers¹

¹Sint Maartenskliniek

O.1.2 - WEARABLE SENSORS CAN CAPTURE CHANGES IN TURNING MOBILITY IN DAILY LIFE AFTER MTBI REHABILITATION

Laurie King¹, Kody Campbell¹, Martina Mancini¹

¹Oregon Health & Science University

O.1.3 - ALTERATIONS IN THE DAILY LIVING GAIT AND MOBILITY DURING THE DAY AND NIGHT AMONG INDIVIDUALS WITH CEREBELLAR ATAXIA, SCA3: AN EXPLORATORY STUDY

Penina Ponger¹, Amit Salomon¹, Marina Brozgot¹, Eran Gazit¹, Jeffrey Hausdorff¹

¹Tel Aviv Sourasky Medical Center

O.1.4 - ASSOCIATIONS BETWEEN REAL WORLD GAIT AND PAIN IN INDIVIDUALS SCHEDULED FOR KNEE ARTHROPLASTY: FEASIBILITY STUDY

Frank Bruning¹, Myrthe Van De Ven², Michelle Van Mierlo¹, Joke Vriekolk¹, Els Van Den Ende¹, Sander Koeter², Katrijn Smulders¹

¹Sint Maartenskliniek, ²Canisius Wilhelmina Ziekenhuis

O.1.5 - EXPLORING THE RELATIONSHIP BETWEEN FRAGMENTATION AND CIRCADIAN RHYTHM OF DAILY-LIVING PHYSICAL ACTIVITY, FUNCTIONAL SYSTEM DISABILITY SCORES, AND PHYSICAL FATIGUE IN PEOPLE WITH MULTIPLE SCLEROSIS

Irina Galperin¹, Amit Salomon², David Buzaglo², Arnon Karni², Keren Regev², Jeffrey Hausdorff²

¹Tel Aviv University and Tel Aviv Sourasky Medical Center,

²Tel Aviv Sourasky Medical Center

Oral Session #2

MEASUREMENT INNOVATIONS

Location: Amphitheatre B

O.2.1 - BUILDING AN INTERACTIVE ONLINE NETWORK APPLICATION FOR HARMONISING PHYSICAL ACTIVITY DATA FROM WEARABLES

Matthew Pearce¹, Tom Bishop¹, Tomas Gonzalez¹, Paul Kirk¹, Simon White¹, Stephen Sharp¹, Soren Brage¹

¹University of Cambridge

O.2.2 - LET'S DO IT AGAIN: A NEW TOOL FOR ADDING SPATIOTEMPORAL CONTEXT TO HUMAN MOVEMENT BEHAVIOUR DATA

Josef Heidler¹, Jasper Schipperijn¹, Marian Paiva Marchiori¹

¹University of Southern Denmark

O.2.3 - ANNOTATING VALIDATION STUDIES USING VISION-LANGUAGE MODELS

Abram Schonfeldt¹, Aiden Doherty¹, Ronald Clark¹

¹University of Oxford

O.2.4 - PILOT EVALUATION OF THE ROBUSTNESS OF ECOLOGICAL MOMENTARY ASSESSMENT LABELING FOR FREE-LIVING PHYSICAL ACTIVITY DATA

Luis Sigcha¹, Grainne Hayes¹, Tomas Vetrovsky², Steriani Elavsky², Jean-Michel Oppert³, Greet Cardon⁴, Janas Harrington⁵, Antje Hebestreit⁶, Christoph Buck^{6,7}, Pepijn Van De Ven¹, Alan Donnelly¹

¹University of Limerick, ²University of Hradec Králové, ³Sorbonne Paris North University, ⁴Ghent University, ⁵University College Cork,

⁶Leibniz Institute for Prevention Research and Epidemiology – BIPS,

⁷Leibniz Institute for Prevention Research and Epidemiology

O.2.5 - A NOVEL APPROACH TO TRUE FREE-LIVING VALIDATION OF ACCELEROMETER-MEASURED MOVEMENT BEHAVIORS

Kimberly Clevenger¹, Stephen May¹, Katherine McKee¹, Alexander Montoye²

¹Utah State University, ²Alma College

Oral Session #3

PREDICTING HEALTH OUTCOMES

Location: Amphitheatre C

O.3.1 - ACCELEROMETER-MEASURED DAILY PHYSICAL ACTIVITY AND RISK OF INCIDENT CANCER IN THE UK BIOBANK PROSPECTIVE COHORT

Alaina Shreves¹, Scott Small², Shing Chan², Pedro Saint-Maurice^{3,4}, Steven Moore⁴, Keren Papier², Kezia Gaitskell², Ruth Travis², Charles Matthews⁴, Aiden Doherty²

¹University of Oxford & US National Cancer Institute, ²University of Oxford, ³Champalimaud Foundation, ⁴National Cancer Institute, National Institutes of Health

O.3.2 - TEMPORAL ANALYSES OF PHYSICAL BEHAVIOR AND THE ASSOCIATION WITH HEALTH INDICATORS

Xin Zheng¹, Mai Chin A Paw^{1,2}, Wessel Wieringen¹

¹Amsterdam UMC, ²Child and Adolescent Public health Research and Innovation

O.3.3 - CAN MEASURES OF HABITUAL ACTIVITY INTENSITY STRATIFY PRIMARY SJOGREN'S SYNDROME PARTICIPANTS WITH PERSISTENT FATIGUE? INSIGHTS FROM THE BRC TOOLS STUDY.

Chloe Hinchliffe¹, Bing Zhai², Victoria Macrae¹, Jade Walton¹, Wan-Fai Ng¹, Silvia Del Din¹

¹Newcastle University, ²Northumbria University

O.3.4 - CAN WEARABLE ACCELEROMETERS IMPROVE THE PREDICTION OF CARDIOVASCULAR DISEASE?

Adam Sturge¹, Aiden Doherty¹

¹University of Oxford

O.3.5 - ESTIMATING BMI FROM THE COMPLEXITY OF GAIT DYNAMICS IN FREE LIVING DATA

James Williamson¹, Karl Friedl², Brian Telfer¹, Adam Potter², Joseph Kim¹

¹MIT Lincoln Laboratory, ²US Army Research Institute of Environmental Medicine

Oral Session #4

ALGORITHMS 1

Location: Room 12-13

O.4.1 - PROOF OF CONCEPT: EXTRACTING PHYSICAL BEHAVIOURS FROM 24-HOUR NARRATIVE DATA USING INTEGRATED LARGE LANGUAGE MODELS AND A PHILOSOPHY OF EVENT APPROACH

Usman Sani Dankoly¹, Philippa Dall¹, Jasper Schipperijn², Sebastien Chastin³

¹Glasgow Caledonian University, ²University of Southern Denmark,

³Glasgow Caledonian University & Ghent University

O.4.2 - VARIATION IN STEP COUNTS BY DIFFERENT PREDICTION METHODS IN RELATION TO EPIDEMIOLOGIC STUDIES AND PUBLIC HEALTH TRANSLATION

Charles Matthews¹

¹National Cancer Institute, National Institutes of Health

O.4.3 - IDENTIFYING PHYSICAL ACTIVITY TYPES USING THIGH-WORN ACCELEROMETRY: COMPARISON OF TWO NO-CODE CLASSIFICATION METHODS

Claas Lendt¹, Theresa Braun¹, Bianca Biallas¹, Ingo Froboese¹,
Pasan Hettiarachchi², Peter J. Johansson²

¹Auckland University of Technology, ²Uppsala University

O.4.4 - DO WE NEED AGE-SPECIFIC HUMAN ACTIVITY RECOGNITION MODELS FOR CLASSIFICATION OF ACTIVITY TYPES IN CHILDREN AND ADOLESCENTS? -EFFECT OF AGE AND LENGTH OF ACTIVITY BOUTS

Ellen Marie Bardal¹, Roar Fenne¹, Kerstin Bach¹

¹Norwegian University of Science and Technology

O.4.5 - HEART RATE MONITORING FROM MOTION-CORRUPTED PHOTOPLETHYSMOGRAPHY: A BENCHMARK STUDY OF OPEN-SOURCE ALGORITHMS

Marcello Sicbaldi¹, Luca Palmerini¹, Alessandro Silvani¹, Lorenzo Chiari¹

¹University of Bologna

11:45am-12:45pm

Oral Session #5

PARKINSON'S

Location: Amphitheatre A

O.5.1 - EXPLORING THE IMPACT OF DOPAMINERGIC MEDICATION ON REAL WORLD DIGITAL MOBILITY OUTCOMES IN PEOPLE WITH PARKINSON'S

Emma Packer¹, Philip Brown², Heather Hunter², Fabio Ciravegna⁴,
Jordi Evers⁵, Martijn Niessen⁵, Alison Yarnall¹, Lynn Rochester¹,
Lisa Alcock¹, Silvia Del Din¹

¹Newcastle upon Tyne Hospitals NHS, Foundation Trust, ⁴University of Turin, ⁵McRoberts BV

O.5.2 - WALKING RECOGNITION IN PARKINSON'S DISEASE POPULATIONS USING WRIST-WORN ACCELEROMETERS

Aidan Acquah¹, Andrew Creagh¹, Valentin Hamy², Scott Small¹,
Shing Chan¹, Hang Yuan¹, Gert Mertes¹, David Clifton¹, Aiden Doherty¹

¹University of Oxford, ²GSK plc

O.5.3 - CAN LOCALISATION INFORMATION IMPROVE OUR UNDERSTANDING OF REAL-WORLD WALKING IN PEOPLE WITH PARKINSON'S AND OLDER ADULTS?

Cameron Kirk¹, Lisa Alcock¹, Kirsty Scott¹, Neil Ireson², Lynn Rochester¹,
Alison Yarnall¹, Silvia Del Din¹

¹Newcastle University, ²University of Sheffield

O.5.4 - HARNESSING WEARABLE CAMERAS AND COMPUTER VISION TO CONTEXTUALISE FREE-LIVING MOBILITY IN PARKINSON'S DISEASE

Jason Moore¹, Alan Godfrey¹, Samuel Stuart¹, Peter Mcmeekin¹,
Richard Walker²

¹Northumbria University, ²Northumbria Healthcare NHS Foundation Trust

O.5.5 - DAILY-LIFE MEASURES OF GAIT AND TURNING ACROSS THE SPECTRUM OF NORMAL, PRODROMAL, EARLY AND MODERATE PARKINSON'S DISEASE

Martina Mancini¹, Vrutangkumar Shah², Pablo Burgos¹,
Patricia Carlson-Kuhta¹, Lauren Talman¹, Miranda Lim¹, Joseph Quinn¹,
Fay Horak¹

¹Oregon Health & Science University, ²CLARIO

Oral Session #6

DIGITAL MOBILITY

Location: Amphitheatre B

O.6.1 - REQUIREMENTS FOR RELIABLE ESTIMATES OF DIGITAL MOBILITY OUTCOMES OF WALKING ACTIVITY AND GAIT FROM A LOWER BACK INERTIAL MEASUREMENT UNIT IN A LARGE MULTI-COHORT STUDY

Joren Buekers¹, Julia Chernova², José Marchena¹, Sarah Koch¹,
Jorge Lemos¹, Clemens Becker³, Tecla Bonci⁴, Julia Braun⁵,
Brian Caulfield⁶, Silvia Del Din⁷, Heleen Demeyer⁸, Anja Frei⁵, Eran Gazit⁹,
Jeffrey Hausdorff⁹, Anisoara Ionescu¹⁰, Carl-Philipp Jansen¹¹,
Michael Long⁴, Walter Maetzler¹², Basil Sharrack⁴, David Singleton⁶,
Thierry Troosters⁸, Lynn Rochester⁷, Judith Garcia-Aymerich¹

¹Barcelona Institute for Global Health (ISGlobal), ²Bayer plc,
³Bosch Research Foundation, ⁴University of Sheffield, ⁵University of Zurich, ⁶University College Dublin, ⁷Newcastle University, ⁸KU Leuven,
⁹Tel Aviv Sourasky Medical Center, ¹⁰Ecole Polytechnique Federale de Lausanne, ¹¹Robert-Bosch-Hospital, ¹²University Hospital Schleswig-Holstein

O.6.2 - THE NUMBER OF DAYS REQUIRED FOR A RELIABLE ESTIMATE OF DIVERSE DIGITAL MOBILITY OUTCOMES FROM VARIOUS GAIT DOMAINS, DERIVED FROM A 1-WEEK WORN LOWER BACK SENSOR. ANALYSIS ACROSS DIFFERENT SUBJECT COHORTS

Eran Gazit¹, Judith Garcia-Aymerich², Joren Buekers², Silvia Del Din³,
Arne Mueller⁴, Alison Yarnall³, Thierry Troosters⁵, Heleen Demeyer⁵,
Basil Sharrack⁶, Ellen E Buckley⁶, Clemens Becker⁸, David Singleton⁹,
Beatrix Vereijken¹⁰, Lynn Rochester³, Jeffrey M Hausdorff¹

¹Tel Aviv Sourasky Medical Center, ²Barcelona Institute for Global Health (ISGlobal), ³Newcastle University, ⁴Novartis Pharma AG, ⁵KU Leuven,
⁶The University of Sheffield, ⁸Robert-Bosch-Hospital, ⁹University College Dublin, ¹⁰Norwegian University of Science and Technology

O.6.3 - WALKING SLOWLY - THE ACCURACY OF REAL-WORLD DIGITAL MOBILITY ESTIMATES AFTER A HIP FRACTURE

Martin Berge¹, Anisoara Ionescu², Beatrix Vereijken¹

¹Norwegian University of Science and Technology, ²Ecole Polytechnique Federale de Lausanne

O.6.4 - DIGITAL MOBILITY OUTCOMES IN HIP FRACTURE PATIENTS THE FIRST YEAR AFTER HIP FRACTURE SURGERY

Jorunn Helbostad¹, Jochen Klenk², Carl-Philipp Jansen³, Tobias Eckert²,
Monika Engdal¹, Martin Berge¹, Beatrix Vereijken¹, Clemens Becker³

¹Norwegian University of Science and Technology, ²Bosch Research Foundation, ³Robert-Bosch-Hospital

O.6.5 - PREDICTING FUTURE FALLS THROUGH DIGITAL MOBILITY BIOMARKERS IN REAL-WORLD MONITORING OF COMMUNITY-DWELLING OLDER ADULTS

Jose Albites-Sanabria¹, Pierpaolo Palumbo¹, Stefania Bandinelli²,
Luca Palmerini¹, Lorenzo Chiari¹

¹University of Bologna, ²Azienda Sanitaria Toscana Centro

Oral Session #7

POST JOINT REPLACEMENT

Location: Amphitheatre C

O.7.1 - BRISK CADENCE IS POSSIBLE AND ENHANCED FOLLOWING A PHYSICAL ACTIVITY BEHAVIOR INTERVENTION AFTER TOTAL KNEE ARTHROPLASTY

Rashelle Hoffman¹, Shawn Hanlon², Paul Kline³, Vanessa Richardson²,
Elizabeth Juarez-Colunga², Edward Melanson⁴, Cory Christiansen²

¹Creighton University, ²VA Eastern Colorado Healthcare System,
³Virginia Commonwealth University, ⁴University of Colorado

O.7.2 - IMPROVEMENTS IN PHYSICAL CAPACITY MAY NOT INDICATE REDUCTIONS IN REAL-WORLD SEDENTARY ACTIVITY: A LONGITUDINAL POST-TOTAL HIP ARTHROPLASTY STUDY

Rashelle Hoffman¹, Lauren Hinrichs-Kinney², Jeri Forster², Michael Dayton³, Douglas Dennis⁴, Dana Judd², Cory Christiansen², Jennifer Stevens-Lapsley²

¹Creighton University, ²University of Colorado Anschutz Medical Campus, ³University of Colorado, ⁴Colorado Joint Replacement

O.7.3 - FEASIBILITY OF INSTRUMENTED INSOLES FOR LONG-TERM MONITORING OF GAIT AFTER TIBIAL FRACTURES

Elke Warmerdam¹, Christian Wolff², Marcel Orth¹, Tim Pohlemann¹, Bergita Ganse¹

¹Saarland University, ²German Research Center for Artificial Intelligence (DFKI)

O.7.4 - MONITORING REAL-WORLD GAIT TO EVALUATE CHANGES IN MOBILITY AFTER TOTAL KNEE ARTHROPLASTY

Frank Bruning¹, Ramon Boekesteijn¹, Koen Defoort¹, Els Van Den Ende¹, Katrijn Smulders¹

¹Sint Maartenskliniek

O.7.5 - EVALUATION OF REAL-WORLD MOBILITY RECOVERY AFTER HIP FRACTURE USING DIGITAL MOBILITY OUTCOMES

Monika Engdal¹, Kristin Taraldsen², Carl-Philipp Jansen³, Raphael Peter⁴, Beatrix Vereijken¹, Clemens Becker⁵, Jorunn Helbostad¹, Jochen Klenk⁶

¹Norwegian University of Science and Technology, ²Oslo Metropolitan University, ³Robert-Bosch-Hospital, ⁴Ulm University, ⁵Heidelberg University, ⁶Bosch Research Foundation

Oral Session #8

SEDENTARY BEHAVIOUR

Location: Room 12-13

O.8.1 - VALIDATION OF AN ALGORITHM FOR SIT-TO-STAND AND STAND-TO-SIT IDENTIFICATION DURING ACTIVITIES OF DAILY LIVING

Jose Albites-Sanabria¹, Jorunn Helbostad², Luca Palmerini¹, Lorenzo Chiari¹

¹University of Bologna, ²Norwegian University of Science and Technology

O.8.2 - PATTERNS OF SEDENTARY TIME ACCUMULATION ACCORDING TO AGE IN THE UNITED STATES: A 2003-2006 NHANES ANALYSIS

Pierre-Yves De Müllenheim¹, Florian Congnard¹, Benedicte Noury¹

¹IFEPSA - UCO

O.8.3 - TESTING THE CONSENSUS METHOD FOR SEDENTARY TIME FROM A HIP-WORN ACCELEROMETER

Elyse Letts¹, Alexander Montoye², Kimberly Clevenger³

¹McMaster University, ²Alma College, ³Utah State University

O.8.4 - EFFECT OF BRIEF PEDALING BOUTS DURING ONE HOUR OF VIDEO GAME PLAY ON POPLITEAL ARTERY DIAMETER AND VELOCITY

Macey Dunn¹, Madalyn Hickey¹, Nicholas Lerma¹

¹Grand Valley State University

O.8.5 - IMPACT OF CUT POINT SELECTION ON LEVELS OF PHYSICAL ACTIVITY AND SEDENTARY TIME OF TODDLERS

Jill Marie Ferry^{1,2}, Lotta Rohmert¹, Martina Totzauer¹, Joaquin Escribano³, Marta Zaragoza-Jordana³, Mariona Gispert-Llauradó³, Berthold Koletzko¹, Veit Grote¹

¹Ludwig Maximilian University, ²Dr von Hauner Children's Hospital,

³University of Rovira I Virgili

2:00-3:00pm

Oral Session #9

INTERVENTIONS

Location: Amphitheatre B

O.9.1 - ASSESSING PHYSICAL BEHAVIOUR IN A COMMUNITY LED LIFESTYLE INTERVENTION IN A REMOTE AUSTRALIAN ABORIGINAL COMMUNITY: ELCHO ISLAND TEACHINGS

Bronwyn Clark¹, Hasthi Dissanayake², George Guruwiwi², Hasthi Dissanayake², Josh Tynan², Sabine Braat², Ben Harrap², Tim Trudgen³, Sarah Hanieh², Michael Christie⁴, Leonard Harrison⁵, John Wentworth⁵, Julie Brimblecombe⁶, Beverley-Ann

¹University of Queensland, ²University of Melbourne, ³Hope For Health, ⁴Charles Darwin University, ⁵Walter and Eliza Hall Institute, ⁶Monash University

O.9.2 - HOME VS COMMUNITY STEPPING PATTERNS: A MEASURE OF PARTICIPATION

Lauren Gracey-Mcminn¹, David Loudon², Alix Chadwell³, Chantel Ostler⁴, Samantha Curtin¹, Malcolm Granat¹

¹University of Salford, ²ActivPal Ltd., ³University of Southampton, ⁴Solent NHS Trust and University of Southampton

O.9.3 - ENHANCING DIGITAL HEALTH EVALUATION: INTEGRATING INTENSIVE LONGITUDINAL MONITORING OF PHYSICAL ACTIVITY IN A RANDOMIZED CONTROLLED TRIAL – A CASE STUDY FROM THE DIPPAO RCT

Alexandre Mazeas¹, Aïna Chalabaev¹, Martine Duclos²

¹University Grenoble Alpes, ²University Hospital Clermont- Ferrand

O.9.4 - INFLUENCE OF A TABLET-BASED, GAMIFIED EXERCISE APPLICATION ON PHYSICAL FUNCTION AND PHYSICAL ACTIVITY FOR OLDER ADULTS: A FEASIBILITY STUDY

Nina Skjæret-Maroni¹, Emilie Bertelsen², Astrid Ustad¹

¹Norwegian University of Science and Technology, ²Artic University of Norway

O.9.5 - WEARABLE FITNESS TRACKERS FOR CONTINUOUS ACTIVITY MONITORING IN PATIENTS WITH HAEMATOLOGICAL MALIGNANCIES UNDERGOING STEM-CELL TRANSPLANT: A 16-WEEK INTERVENTION STUDY

Christian Brakenridge¹, Dulari Hakamuwalekamlage², Hayley Dillon³, David Dunstan⁴, Agus Salim², Erin Howden³

¹Swinburne University of Technology, ²University of Melbourne, ³Baker Heart and Diabetes Institute, ⁴Deakin University

Thursday, June 20

2:00-3:00pm

Oral Session #10

CLINICAL POPULATIONS 2

Location: Amphitheatre B

O.10.1 - WRIST ACCELEROMETER MEASURES CORRELATE WITH DISEASE ACTIVITY IN RHEUMATOID ARTHRITIS AND ARE ROBUST TO FREQUENCY DOWNSAMPLING

Javad Sarvestan¹, Cameron Kirk¹, Kenneth Baker¹, Silvia Del Din¹

¹Newcastle University

O.10.2 - THE BENEFITS OF PASSIVE MONITORING: A COMPARATIVE ANALYSIS OF WALKING IN REAL WORLD USING PATIENT REPORTED MEASURES

Brett Meyer¹, Ryan McGinnis², Melissa Ceruolo¹

¹Medidata Solutions, ²Wake Forest University School of Medicine

O.10.3 - CAN FEEDBACK FROM INERTIAL MEASUREMENT UNITS ENHANCE FOOT STRIKE ANGLE AND FORWARD PROPULSION IN INDIVIDUALS RECOVERING FROM STROKE?

Carmen Ensink¹, Theo Theunissen², Cheriell Hofstad¹, Rene Van Ee¹
¹Sint Maartenskliniek, ²HAN University of Applied Sciences,

O.10.4 - A MACHINE LEARNING CONTEST ENHANCES AUTOMATED FREEZING OF GAIT DETECTION AND REVEALS TIME-OF-DAY EFFECTS

Amit Salomon¹, Eran Gazit¹, Pieter Ginis², Alice Nieuwboer², Leslie C Kirsch³, Ryan Holbrook⁴, Brad Manor⁵, Jeffrey Hausdorff¹
¹Tel Aviv Sourasky Medical Center, ²KU Leuven, ³Michael J Fox Foundation for Parkinson's Research, ⁴Kaggle, ⁵Harvard Medical School

O.10.5 - MEASURING AND PREDICTING DAILY PHYSICAL ACTIVITY IN PEOPLE WITH CHRONIC DISEASES: THE ROLE OF EXERCISE-RELATED AFFECTIVE RESPONSES AND PERCEIVED EXERTION

Layan Fessler¹, Philippe Sarrazin¹, Boris Cheval²
¹University Grenoble Alpes, ²University of Rennes

Oral Session #11

SLEEP

Location: Amphitheatre C

O.11.1 - CONCURRENT VALIDITY OF THE ACTIPAL CREA ALGORITHM AND SELF-REPORT DIARY TO MEASURE TIME IN BED AND SLEEP IN OLDER ADULTS

Philippa Dall¹, Pau Farrés-Godayol², Sebastien Chastin³, Simon Cox⁴, Ian Deary⁴, Mary K Hannah⁶, Dawn A Skelton¹
¹Glasgow Caledonian University, ²University of Victoria - Central University of Catalonia, ³Glasgow Caledonian University & Ghent University, ⁴University of Edinburgh, ⁵University of Glasgow

O.11.2 - WEARABLES AND NEARABLES MEASURING SLEEP AND PHYSICAL ACTIVITY AMONG AUTISTIC ADULTS

Phoebe Wan¹, Joanne Mcveigh¹, Amy Reynolds², Craig Thompson¹, Eleanor Quested¹
¹Curtin University, ²Flinders Health and Medical Research Institute (Sleep Health)

O.11.3 - SUBJECTIVE REPORTS OF SLEEP TIME: VALIDATION AGAINST ACCELEROMETRY-BASED ESTIMATES

Kenn Konstabel¹, Carolina Murd¹, Merle Havik¹, Hedvig Sultson¹
¹National Institute for Health Development

O.11.4 - USING SMARTPHONE SCREEN TIMES TO ESTIMATE SLEEP TIMES IN UNIVERSITY STUDENTS

Michael Schmidt¹, Daniel Gallagher¹, Benjamin Boudreaux²
¹University of Georgia, ²Columbia University

O.11.5 - SLEEP TIMING AND VARIABILITY: ASSOCIATIONS WITH OTHER COMPONENTS OF THE 24-HOUR ACTIVITY CYCLE

Michael Schmidt¹, Daniel Gallagher¹, Benjamin Boudreaux², Ginny Frederick¹, Patrick O'Connor¹, Ellen Evans³
¹University of Georgia, ²Columbia University, ³Indiana University

3:30-4:30 pm

Oral Session #12

CHILDREN AND YOUNG PEOPLE

Location: Amphitheatre A

O.12.1 - COMPARISON OF MACHINE LEARNING TECHNIQUES FOR ESTIMATING ENERGY EXPENDITURE IN PRESCHOOL CHILDREN FROM GERMANY AND CANADA THROUGH ACCELEROMETRY ASSESSMENT

Hannah Coyle-Asbil¹, Lukas Burk², Marvin N. Wright², Christoph Buck², Berit Brandes², Mirko Brandes², Lori Ann Vallis¹
¹University of Guelph, ²Leibniz Institute for Prevention Research and Epidemiology - BIPS

O.12.2 - ASSESSING 24-HOUR MOVEMENT BEHAVIORS IN 0-4-YEAR-OLD CHILDREN: A COMPARATIVE ANALYSIS OF ACCELEROMETERS AND PROXY-REPORT USING THE MY LITTLE MOVES APP

Anne Lettink¹, Jelle Arts¹, Jessica S. Gubbels², Teatske Altenburg¹, Mai Chin A Paw¹
¹Amsterdam UMC, ²Maastricht University

O.12.3 - RESPONSIVENESS OF ACCELEROMETER-BASED PHYSICAL ACTIVITY ESTIMATES IN YOUTH

Nicholas Remillard¹, Brett Davis¹, Jake Melaro¹, Paul Hibbing², Samuel Lamunion³, Scott Crouter¹
¹University of Tennessee, Knoxville, ²University of Illinois Chicago, ³National Institutes of Health

O.12.4 - ASSESSING THE ACCURACY OF ACTIVITY CLASSIFICATION USING THIGH-WORN ACCELEROMETRY: A VALIDATION STUDY OF ACTIPASS IN CHILDREN

Claas Lendt¹, Pasan Hettiarachchi², Peter J. Johansson², Scott Duncan¹, Tom Stewart¹
¹Auckland University of Technology, ²Uppsala University

O.12.5 - MACHINE LEARNING MODELS TO DETECT PHYSICAL ACTIVITY AND SEDENTARY TIME FROM A HIP-WORN ACCELEROMETER IN TODDLERS

Elyse Letts¹, Sara King-Dowling², Natascja Di Cristofaro¹, Trish Tucker³, John Cairney⁴, Brian Timmons¹, Joyce Obeid¹
¹McMaster University, ²Children's Hospital of Philadelphia, ³University of Western Ontario, ⁴University of Queensland

Oral Session #13

ALGORITHMS 2

Location: Amphitheatre B

O.13.1 - OPTIMIZED MACHINE LEARNING MODELS FOR THE ESTIMATION OF ENERGY EXPENDITURE BASED ON PHYSIOLOGICAL SIGNALS MEASURED WITH WEARABLES

Wouter Bijmens¹, Kenneth Meijer¹, Guy Plasqui¹
¹Maastricht University

O.13.2 - VALIDATION OF TWO NOVEL HUMAN ACTIVITY RECOGNITION MODELS FOR TYPICALLY DEVELOPING CHILDREN AND CHILDREN WITH CEREBRAL PALSY

Marte Tørring¹, Aleksej Logacjov¹, Siri Merete Brændvik¹, Astrid Ustad¹, Karin Roeleveld¹, Ellen Marie Bardal¹
¹Norwegian University of Science and Technology

O.13.3 - INNOVATIVE REAL-WORLD GAIT DETECTION IN HUNTINGTON'S DISEASE: UNRAVELING THE CHALLENGES OF CHOREA THROUGH DEEP LEARNING

Dafna Schwartz¹, Jeffrey Hausdorff¹, Lori Quinn², Ran Gilad-Bachrach¹
¹Tel Aviv Sourasky Medical Centre, ²Columbia University,

O.13.4 - ACTIVITY RECOGNITION USING DATA FROM WEARABLE SENSORS AND SMART SHOE DEVICES: CLASSIFYING KICK-BOARD AND SKATEBOARD COMMUTING BEHAVIORS

Hitomi Hatori¹, Nathanael Aubert-Kato¹, Takashi Nakagata², Yuji Ohta¹, Julien Triplette¹

¹Ochanomizu University, ²National Institutes of Biomedical Innovation, Health and Nutrition

O.13.5 - QUANTIFYING DAILY HEAD TURNS AND HEAD-TRUNK COUPLING IN HEALTHY ADULTS

Selena Cho¹, Peter Fino¹

¹University of Utah

Oral Session #14

24 HOUR BEHAVIOURS

Location: Amphitheatre C

O.14.1 - IDENTIFICATION OF NUMBER OF DAYS NEEDED TO MEASURE RELIABLY FRAGMENTATION OF REST ACTIVITY PATTERNS: A PSEUDO-SIMULATION STUDY BASED ON WHITEHALL ACCELEROMETER SUB-STUDY

Ian Danilevicz¹, Vincent Van Hees², Sam Vidil¹, Benjamin Landré¹, Aline Dugravot¹, Séverine Sabia¹

¹Institut national de la santé et de la recherche médicale, ²Accelting

O.14.2 - FEASIBILITY OF CONTINUOUS 24-HOUR ACCELEROMETRY ACROSS PREGNANCY

Sylvia Badon¹, Alex Asera¹, Elizabeth Ryan¹, Kelley Gabriel², Monique Hedderson¹

¹Kaiser Permanente, ²University of Alabama at Birmingham

O.14.3 - COMBINED ASSOCIATIONS OF TYPE 2 DIABETES AND VIBRATION SENSATION LOSS WITH DEVICE-MEASURED PHYSICAL ACTIVITY AND SEDENTARY BEHAVIOUR. - THE MAASTRICHT STUDY

Touria Ahaouari Lemrabet¹, Nicolaas Schaper², Brenda Berendsen¹, Hans Bosma¹, Marleen Van Greevenbroek¹, Bastiaan De Galan¹, Miranda Schram¹, Hans Savelberg¹, Annemarie Koster¹

¹Maastricht University, ²Maastricht University Medical Center

O.14.4 - THE ASSESSMENT OF THE 24-HOUR PHYSICAL BEHAVIOR CONSTRUCT VIA WEARABLES: A SYSTEMATIC REVIEW OF VALIDATION STUDIES.

Marco Giurgiu¹, Simon Woll¹, Alexander Burchartz¹, Simon Kolb¹, Birte Von Haaren-Mack¹, Janis Fiedler¹, Johannes Bussmann²

¹Karlsruhe Institute of Technology, ²Erasmus University Medical Center

O.14.5 - DAILY PHYSICAL ACTIVITY AND VIDEO GAME AND TV TIME ON BODY MASS INDEX IN YOUTH: NATIONAL YOUTH FITNESS SURVEY

Meghan Imhoff¹, Nicholas Lerma¹

¹Grand Valley State University

Friday, June 21

11:45-12:45 am

Oral Session #15

WORKPLACE

Location: Amphitheatre B

O.15.1 - ACCURACY AND ACCEPTABILITY OF THE DESK POSITIONING SYSTEM (DPS): A NEW SIT-STAND DESK MEASUREMENT DEVICE

Genevieve Healy¹, George Thomas¹, Alejandro Melendez-Calderon¹, Sami Kabb¹, Katherine Heseltine¹, Chan Hi Yue¹, Bronwyn Clark¹

¹University of Queensland

O.15.2 - DEVICE-BASED MEASUREMENT OF OFFICE-BASED PHYSICAL BEHAVIOUR: A SYSTEMATIC REVIEW

Bronwyn Clark¹, Noah Bongers¹, George Thomas¹, Jamie Kittle¹, Genevieve Healy¹

¹University of Queensland

O.15.3 - ASSOCIATION BETWEEN DEVICE MEASURED PHYSICAL ACTIVITY AT WORK AND SELF-PERCEIVED PHYSICAL WORK DEMANDS AMONG HOSPITAL WORKERS IN NORWAY - THE STUNTH STUDY

Roar Fenne¹, Sigmund Ø. Gismervik¹, Lene Aasdahl¹, Ellen Marie Bardal¹

¹Norwegian University of Science and Technology

O.15.4 - SITTING, STANDING AND ACTIVE BEHAVIORS OF OFFICE WORKERS PARTICIPATING IN AN ERGONOMIC INTERVENTION: HOW CLOSE DO THEY GET TO A 'JUST RIGHT' ERGONOMIC BALANCE?

Luiz A. Brusaca¹, Svend Erik Mathiassen², David M. Hallman², Ana Beatriz Oliveira¹, Nidhi Gupta³

¹Federal University of São Carlos, ²University of Gävle,

³National Research Centre for the Working Environment

O.15.5 - THE EFFECT OF A CO-DESIGNED EIGHT-WEEK WORKPLACE HEALTH PROMOTION INITIATIVE ON OCCUPATIONAL SEDENTARY TIME, PHYSICAL ACTIVITY AND GLUCOSE CONTROL WITH ADULTS WHO HOLD DESK-BASED OCCUPATIONS: PRELIMINARY BASELINE RESULTS

Aidan Buffey¹, Brian Carson¹, Alan Donnelly¹

¹University of Limerick

Oral Session #16

MEASUREMENT INNOVATIONS 2

Location: Amphitheatre C

O.16.1 - QUANTIFYING THE INTENSITY OF FREE-LIVING PHYSICAL ACTIVITY IN ABSOLUTE AND RELATIVE TERMS: IMPROVING UNDERSTANDING OF DIFFERENCES IN ACTIVITY BY AGE AND ASSOCIATIONS WITH MORTALITY.

Alex Rowlands¹, Mark Orme¹, Ben Maylor¹, Andrew Kingsnorth², Kamlesh Khunti¹, Francesco Zaccardi¹, Tom Yates¹

¹University of Leicester, ²Loughborough University

O.16.2 - DEVELOPMENT OF A SCREENING TOOL TO IDENTIFY SELF-REPORT AND DEVICE-BASED MEASURES OF HABITUAL PHYSICAL ACTIVITY FOR USE IN A SYSTEMATIC REVIEW: THE OPTIMA STUDY

Philippa Dall¹, Dawn A Skelton¹, Christopher Seenan¹, Sarah Rhodes², Trish Gorely³, Joanna Mcparland¹, Julie Brittenden⁴, Ebuka Anieto⁵, Lorna Booth¹, Cathy Gormal⁶, Jeremy Dearling⁶, Candida Fenton⁷, Sarah Audsley⁸, Kimberly Fairer⁹, Linsda

¹Glasgow Caledonian University, ²University of Manchester, ³University of the Highlands and Islands, ⁴University of Glasgow, ⁵Glasgow Caledonian University & University of Suffolk, ⁶East of England Citizens' Senate, ⁷University of Edinburgh, ⁸Northumbria University, ⁹Oxford University Hospitals NHS Foundation Trust, ¹⁰University of London, ¹¹Glasgow Caledonian University & University of the West of Scotland

O.16.3 - AN INTERSECTIONAL APPROACH TOWARDS ACCELEROMETER-BASED PHYSICAL BEHAVIOUR PATTERN ANALYSIS: SEQUENCE MAPPING

Mari Sone¹, Teatske Altenburg¹, Lauren Sherar², Dale Eslinger², Mai Chin A Paw¹

¹Amsterdam UMC, ²Loughborough University

O.16.4 - IDENTIFICATION OF CIRCADIAN RHYTHM PROFILES IN OLDER ADULTS: A COMPREHENSIVE APPROACH USING DATA FROM THE WHITEHALL II ACCELEROMETER SUB-STUDY

Sam Vidi¹, Ian Danilevicz², Aline Dugravot², Séverine Sabia²

¹Center of Research in Epidemiology and Statistics (CRESS),

²Institut national de la santé et de la recherche médicale

O.16.5 - COMPARATIVE EVALUATION OF ECOLOGICAL MOMENTARY ASSESSMENT (EMA), GLOBAL PHYSICAL ACTIVITY QUESTIONNAIRE (GPAQ), AND BOUCHARD'S PHYSICAL ACTIVITY RECORD (BAR) FOR MEASURING PHYSICAL ACTIVITY: A MULTILEVEL MODELING APPROACH

Jung Min Noh¹, Song Hyun Lim¹, Miyoung Lee², Ji-Yeob Choi¹

¹Seoul National University, ²Kookmin University

The advertisement for the Empatica Health Monitoring Platform features a teal background with a white dotted pattern. At the top left is the Empatica logo, consisting of the word 'empatica' and a stylized 'E' icon. Below the logo is a white pill-shaped button with the text 'FDA-CLEARED'. The main title 'Empatica Health Monitoring Platform' is written in a large, white, sans-serif font. Below the title, a paragraph describes the platform: 'Continuous, unobtrusive, and remote health monitoring driven by AI. Empower your research with 200+ digital biomarkers and powerful medical wearables, in a full-stack solution.' To the right, a laptop screen displays a web interface with a table of participant data. In the foreground, a smartphone shows the Empatica app interface, and three different types of wearables (a wristband, a watch, and a small clip-on device) are displayed. A QR code is located in the bottom left corner, and the website 'empatica.com' is written below it.

The advertisement for McRoberts features a photograph of an elderly woman with white hair, wearing a red and white striped shirt and a red scarf, sitting on a bench and looking out at a blurred green train. Below the photograph, the text reads: 'McRoberts specializes in providing comprehensive solutions for assessing human mobility both in daily life and laboratory settings'. To the right of this text is the McRoberts logo, which consists of the word 'mcroberts' in a green, lowercase, sans-serif font, with a stylized 'o' that incorporates a green leaf-like shape. At the bottom, the website 'www.mcroberts.nl' and the email 'info@mcroberts.nl' are listed in a green, sans-serif font.

POSTER SESSIONS INSTRUCTIONS

To make the most of the ICAMPAM poster sessions – please review the following information:

Presenters will be at their poster in the Foyer during their assigned poster time.

Posters abstracts are available in Whova.

Poster Sessions during ICAMPAM are as follows:

- **Poster Session 1 (P1) WEDNESDAY, JUNE 19, 2024 12:45-2:00 PM**
- **Poster Session 2 (P2) THURSDAY, JUNE 20, 2024 12:45-2:00 PM**

POSTER SESSIONS

Poster Session #1

Wednesday, June 19

12:45-2:00pm

P1.1.11 - REALLOCATING RECREATIONAL SEDENTARY SCREEN TIME AND 24-HOUR BEHAVIORS: ASSOCIATIONS WITH ADIPOSITY IN ADULTS WITH HIGH LEVELS OF REPORTED SCREEN TIME

Kristina Hasanaj¹, Krista Leonard^{2,3}, Dorothy D. Sears², Fang Yu², Megan E. Petrov², Sarah Keadle⁴, Matthew Buman²

¹Northwestern University, ²Arizona State University, ³VivoSense, Inc., ⁴California Polytechnic State University, San Luis Obispo

P1.1.12 - STUDY PROTOCOL FOR THE MOMO 2.0 ACCELEROMETER STUDY TO INVESTIGATE 24-HOUR PHYSICAL BEHAVIOR PATTERNS IN 4-17-YEAR-OLDS

Birte Von Haaren-Mack¹, Alexander Burchartz¹, Carmen Volk¹, Simon Kolb¹, Claudia Niessner², Alexander Woll²

¹Karlsruhe Institute of Technology, ²Karlsruhe Institute of Technology, Germany

P1.1.13 - PROMOTING PHYSICAL ACTIVITY IN ADULTS TRANSITIONING TO RETIREMENT THROUGH VIGOROUS INTERMITTENT LIFESTYLE PHYSICAL ACTIVITY – A PILOT STUDY

Bingyan Pang¹, Joanna Moullin¹, Craig Thompson¹, Cecilie Thøgersen-Ntoumani², Emmanuel Stamatakis³, Joanne Mcveigh¹

¹Curtin University, ²University of Southern Denmark, ³University of Sydney

P1.1.14 - UNLOCKING DIVERSITY IN PHYSICAL BEHAVIOUR RESEARCH: INSIGHTS FROM THE 2015-2022 ICAMPAM ABSTRACTS

Julia Baumgart¹, Jorunn Helbostad¹, Beatrix Vereijken¹

¹Norwegian University of Science and Technology

P1.1.15 - CHALLENGES IN CONTINUOUSLY MONITORING PHYSIOLOGICAL, BEHAVIOURAL AND PSYCHOLOGICAL OUTCOMES OF OUTDOOR WORKERS EXPOSED TO SUMMER'S HIGH TEMPERATURES

Constanza Vielma¹, Guillaume Cheavance¹, Joan Ballester¹

¹Barcelona Institute for Global Health (ISGlobal)

P1.1.16 - VEGA, AN APP FOR REAL-WORLD MONITORING EXPLOITING COMMERCIAL DEVICES

Paola Di Florio¹, Marcello Sicbaldi¹, Luca Palmerini¹, Lorenzo Chiari¹, Alessandro Silvani¹

¹University of Bologna

P1.1.17 - THE PHYSICAL ACTIVITY PATTERNS IN CHILDREN: AN ANALYSIS OF DIFFERENCES AND AGREEMENT BETWEEN WEEKDAYS AND WEEKENDS

Eva Rodríguez Gutiérrez¹, Bruno Bizzozero Peroni¹, Valentina Díaz-Goñi¹, Sergio Núñez De Arenas-Arroyo¹, Irene Sequí-Domínguez¹, Maribel Lucerón-Lucas-Torres¹, Santiago Mula-Muñoz¹, Ana Torres Costoso¹, Vicente Martínez-Vizcaíno¹

¹University of Castilla-La Mancha

P1.1.18 - EFFECTS OF A 29-WEEK MHEALTH INTERVENTION TO PROMOTE DAILY STEPS IN SCHOOLCHILDREN

Bruno Bizzozero-Peroni¹, Eva Rodríguez Gutiérrez¹, Valentina Díaz-Goñi¹, Sergio Núñez De Arenas-Arroyo¹, Irene Sequí-Domínguez¹, Maribel Lucerón-Lucas-Torres¹, Santiago Mula-Muñoz¹, Arthur Eumann Mesas¹, Vicente Martínez-Vizcaíno¹

¹University of Castilla-La Mancha

P1.1.19 - EXPLORING THE EFFECT OF A HOME-BASED OBESITY PREVENTION INTERVENTION ON YOUNG CHILDREN'S PHYSICAL ACTIVITY AND SLEEP

Katarina Osojnicki¹

¹University of Guelph

P1.2.20 - THE POTENTIAL OF CAMERA-BASED OBSERVATIONS IN PLAYGROUND RESEARCH: A PROOF-OF-CONCEPT STUDY

Cathrine Madsen¹, Jasper Schipperijn¹

¹University of Southern Denmark

P1.2.21 - UNRAVELING THE LINK BETWEEN YOUNG CHILDREN'S AND PARENT SLEEP USING OBJECTIVE QUANTIFICATION

Hannah Coyle-Asbil¹, Bridget Coyle-Asbil¹, Julia Gruson-Wood¹, David W.L. Ma¹, Jess Haines¹, Lori Ann Vallis¹

¹University of Guelph

P1.2.22 - USING A NONLINEAR TIME-SERIES MEASURE OF WEARABLE SENSOR DATA CAN PREDICT INFANT'S NEUROMOTOR OUTCOMES AT 12 MONTHS: A PILOT STUDY WITH INFANTS IN RURAL GUATEMALA

Jinseok Oh¹, Beth A. Smith², Peter Rohloff³

¹Children's Hospital Los Angeles, ²Children's Hospital Los Angeles & University of Southern California, ³Brigham and Women's Hospital & Wuqu' Kawoq | Maya Health Alliance

P1.2.23 - CONCEPTUAL FRAMEWORK FOR VISUALISING 27/7 MOVEMENT BEHAVIOUR DATA

Marian Paiva Marchiori¹, Jasper Schipperijn²

¹Southern Denmark University, ²University of Southern Denmark

P1.2.25 - DECODING ACTIVITY PATTERNS: A COMPARATIVE ANALYSIS OF OBSERVATIONAL AND INTERVENTIONAL STUDIES LEADING TO A METRIC FRAMEWORK OF PHYSICAL ACTIVITY AND SEDENTARY BEHAVIOR

Zijia Liu¹, Brenda Berendsen¹, Hans Savelberg¹, Kurt Driessens¹

¹Maastricht University

P1.2.26 - LONGITUDINAL ASSOCIATION BETWEEN THIGH ACCELERATION AND WALK SPEED IN OLDER ADULTS: IMPLICATIONS FOR SENSOR CALIBRATION

Joona Neuvonen¹

¹University of Jyväskylä

P1.2.27 - CHILDREN'S PERCEPTION OF THEIR OWN PHYSICAL ACTIVITY AND SEDENTARY BEHAVIOUR COMPARED TO AN OBJECTIVE MEASURE FROM THE activPAL: AN OBSERVATIONAL STUDY

Anna Clark¹, Alexandra Clarke-Cornwell¹, Anna Cooper-Ryan¹, Stephen Preece¹, Tamara Brown¹

¹University of Salford

P1.2.28 - EXPLORING THE FEASIBILITY OF COMMERCIAL LARGE LANGUAGE MODELS FOR SEMANTIC TAGGING OF HEALTH COACH MESSAGES

Ethan Rogers¹, Deigo Arguello², Quinn Anderson-Song¹, Dinesh John^{1,3}

¹Northeastern University, ²Alexion Pharmaceuticals, Inc.,

³National Institute on Aging

P1.3.29 - EXPLORING THE RELATIONSHIP BETWEEN PAIN AND PHYSICAL ACTIVITY IN THE REAL WORLD ON PEOPLE WITH MULTIPLE SCLEROSIS

Serena Moscato¹, Marcello Sicbaldi¹, Pozzi Stefania², Loredana Sabattini³, Giada Lullini³, Fabio La Porta³, Lorenzo Chiari¹, Silvia Orlandi¹

¹University of Bologna, ²DATER Riabilitazione Ospedaliera, ³IRCCS Istituto delle Scienze Neurologiche di Bologna

P1.3.30 - STABILITY OF SLEEP PATTERNS AMONG BREAST CANCER PATIENTS UNDERGOING NEOADJUVANT CHEMOTHERAPY

Pedro Saint-Maurice¹, Carla Malveiro¹, Ines Correia², Leonor Matos¹, Maria Joao Cardoso³, Luis Sardinha²

¹Champalimaud Foundation, ²University of Lisbon, ³Champalimaud Foundation, Lisbon University - Faculty of Medicine

P1.3.31 - THE INTRODUCTION OF AN ADJUSTABLE UPPER LIMB PROSTHETIC SOCKET SYSTEM INTO A UGANDAN CLINICAL SERVICE

Nicolaas Pickard¹, Laurence Kenney¹, Lauren Gracey-Mcminn¹, Malcom Granat¹, Robert Ssekitoileko², Benedict Mulindwa², Alix Chadwell³

¹University of Salford, ²Makerere University, ³University of Southampton

P1.3.32 - FREE-LIVING PHYSICAL BEHAVIORS IN CHRONIC POST-STROKE ADULTS WITH APHASIA

Emily Van Horn¹, Albert Mendoza¹, Jennifer Sherwood¹, Michelle Gravier¹

¹California State University, East Bay

P1.3.33 - PHYSICAL ACTIVITY MONITORING OF CHILDREN AND ADOLESCENTS WITH DISABILITIES: FINDINGS AND EXPERIENCES FROM FALLA STUDY

Janne Kulmala¹, Kati Karinharju², Tuomas Kukko¹, Tuija Tammelin¹, Piritta Asunta¹

¹Jamk University of Applied Sciences, ²Satakunta University of Applied Sciences

P1.3.34 - PHYSICAL ACTIVITY INTO CANCER CACHEXIA MANAGEMENT: RECOMMENDATIONS AND BENEFITS ?

Romane Peyrachon¹, Cindy Richard², Brigitte Gelein³, Nathalie André⁴, Karl Chaory², Amélie Rébillard¹

¹University of Rennes, ²SPORMED, ³Université de Rennes, ⁴University of Poitiers

P1.3.35 - CLOSING THE GAP BETWEEN LAB AND REAL-WORLD: TRANSLATING OUTCOMES OF GAIT INTERVENTIONS IN PARKINSON'S DISEASE

Charlotte Lang¹, Navrag Singh¹, Jaap van Dieën², Matthew Brodie³, Walter Maetzler⁴, Julius Welzel⁴, Deepak Ravi¹

¹ETH Zurich, ²Vrije Universiteit Amsterdam, ³University of New South Wales, ⁴University Hospital Schleswig-Holstein

P1.3.36 - DIGITAL MEASURES OF TURNING IMPAIRMENTS DURING DAILY LIFE IN RETROSPECTIVE FALLERS WITH PARKINSON'S DISEASE: MULTILEVEL MODEL APPROACH

Vrutangkumar Shah¹, Robin Baudier¹, Carla Batista¹, Pablo Burgos¹, Anjanibhargavi Ragothaman¹, Patricia Carlson-Kuhta¹, Jodi Lapidus¹, Fay Horak¹, Martina Mancini¹

¹Oregon Health & Science University

P1.3.37 - OBJECTIVELY-MEASURED MODERATE-TO-VIGOROUS PHYSICAL ACTIVITY IN CHRONIC POST-STROKE ADULTS WITH APHASIA

Albert Mendoza¹, Jennifer Sherwood¹, Michelle Gravier¹

¹California State University, East Bay

P1.3.38 - DAILY LIVING GAIT AND PHYSICAL ACTIVITY METRICS CAN IDENTIFY PEOPLE WITH MULTIPLE SCLEROSIS WHO EXPERIENCE TRAIT AND STATE PHYSICAL FATIGUE.

Irina Galperin¹, Amit Salomon², David Buzaglo², Jeffrey Hausdorff²

¹Tel Aviv University and Tel Aviv Sourasky Medical Center,

²Tel-Aviv Sourasky Medical Center

Poster Session #2

Thursday, June 20

12:45-2:00pm

P1.1.10 - LEVELS AND PATTERNS OF PHYSICAL ACTIVITY AND SEDENTARY BEHAVIOUR IN IRISH ADOLESCENTS WITH TYPE ONE DIABETES

Grainne Hayes¹, Susan Giblin¹, Ciara Murray¹, Alan Donnelly¹, Clodagh O Gorman¹

¹University of Limerick

P2.4.41 - CHARACTERIZING THE IMPACT OF ActiGraph's IDLE SLEEP MODE ON FREE-LIVING NOCTURNAL SLEEP PARAMETERS

Samuel Lamunion¹, Robert Brychta², Lindsey Smith², Asuka Ishihara², Antoinette Rabel², Ranganath Muniyappa², Kong Chen³

¹National Institutes of Health, ²National Institute of Diabetes, Digestion, and Kidney Disease, ³National Institute of Diabetes and Digestive and Kidney Diseases, National Institutes of Health

P2.4.42 - DOES THE PLACEMENT MATTER? COMPARISON OF ActiGraph CentrePoint INSIGHT WATCHES WORN ON DOMINANT AND NON-DOMINANT WRISTS IN FREE-LIVING ENVIRONMENTS

Daehyoung Lee¹, Haley Voermans-Dean², Jung Eun Lee², Gregory Dominick¹

¹University of Delaware, ²University of Minnesota

P2.4.43 - AGREEMENT BETWEEN WRIST-WORN TDK SILMEE W22 AND WAIST-WORN ACTIGRAPH WGT3X-BT FOR ESTIMATING DAILY ACCUMULATION OF STEPS AND TIME SPENT IN MODERATE TO VIGOROUS PHYSICAL ACTIVITY IN ADULTS UNDER FREE-LIVING SETTINGS

Hiroko Shimura¹, Shinpei Okada², Kaori Daimaru¹, Naoki Deguchi¹, Shuichi Awata¹, Hiroyuki Sasai¹

¹Tokyo Metropolitan Institute for Geriatrics and Gerontology,

²Physical Education and Medicine Research Foundation

P2.4.44 - AGREEMENT OF COMMON LINEAR POSITION TRANSDUCERS MEASURING MEAN AND PEAK VELOCITIES DURING A BELT SQUAT

Blake Murphy¹, Mitchel Magrini¹, Jacob Siedlik¹, Kelley Hammond¹, Devon Stoffel¹, Rashelle Hoffman¹

¹Creighton University

P2.4.45 - IMPACT OF VARYING ACCELEROMETER EPOCH LENGTH ON PHYSICAL ACTIVITY PATTERNS IN ADULTS: CONSIDERATIONS FOR PUBLIC HEALTH

Rayane Haddadj¹, Charlotte Verdot², Benoît Salanave³, Valérie Deschamps³, Jeremy Vanhelst⁴

¹Norwegian University of Science and Technology, ²Santé publique France, The French Public Health Agency, ³The French Public Health Agency, ⁴Center of Research in Epidemiology and Statistics (CRESS)

P2.4.46 - AUTOMATED GAIT DETECTION FROM A WRIST-WORN ACCELEROMETER IN OLDER ADULTS USING SELF-SUPERVISED LEARNING

Yonatan Brand¹, Felix Kluge², Luca Palmerini³, Clemens Becker⁴, Andrea Cereatti⁵, Walter Maetzler⁶, Beatrix Vereijken⁷, Alison Yarnall⁸, Lynn Rochester⁸, Silvia Del Din⁸, Kamiar Aminian⁹, Arne Mueller², Jeffrey Hausdorff¹⁰, Or Perlman¹

¹Tel Aviv University, ²Biomedical Research, Novartis Pharma AG, Basel, Switzerland, ³University of Bologna, ⁴Bosch Research Foundation, ⁵Polytechnic University of Turin, ⁶University Hospital Schleswig-Holstein, ⁷Norwegian University of Science and Technology, ⁸Newcastle University, ⁹Ecole Polytechnique Federale de Lausanne, ¹⁰Tel-Aviv Sourasky Medical Center

P2.4.47 - CAN IMU BASED GAIT CLASSIFICATION ALGORITHMS CLASSIFY GAIT AMONG OTHER DAILY LIFE ACTIVITIES?

Michelle Van Mierlo¹, Katrijn Smulders¹, Noel Keijsers²

¹Sint Maartenskliniek, ²Department of Research, Sint Maartenskliniek, 6500 GM Nijmegen, The Netherlands

P2.4.48 - ESTIMATING GAIT SPEED FROM WRIST- AND ANKLE-WORN SENSORS

Hoan Tran¹, Dinesh John^{2,3}, Stephen Intille³

¹PhD Student, ²National Institute on Aging, ³Northeastern University

P2.4.49 - PREDICTION OF RESISTANCE TRAINING EXERCISES USING ACCELEROMETER AND GYROSCOPE SENSORS

Brett Davis¹, Jake Melaro¹, Nicholas Remillard¹, Scott Conger², Scott Crouter¹

¹University of Tennessee, ²Boise State University

P2.4.50 - ACCURACY OF PERSONALLY OWNED WEARABLE ACTIVITY MONITORS FOR ESTIMATING VO2MAX

Lindsay Toth¹, Andrew Gomez¹, Hanadi Hamadi¹

¹University of North Florida

P2.5.51 - FACILITATING USE OF THE INTENSITY GRADIENT ACROSS COMMONLY DERIVED ACCELEROMETER ACTIVITY METRICS: A LABDA (LEARNING NETWORK FOR ADVANCED BEHAVIOURAL DATA ANALYSIS) PROJECT

Henrik Eckmann¹, Cameron Razieh¹, Sebastien Chastin², Lauren Sherar³, Bjørge Hansen⁴, Alex Rowlands¹

¹University of Leicester, ²Glasgow Caledonian University & Ghent University, ³Loughborough University, ⁴University of Agder

P2.5.52 - IMPROVING WEARABLE-BASED DETECTION AND CLASSIFICATION OF 24H PHYSICAL BEHAVIOURS AND HEART RATE: PROTOCOL FOR THE GENERATION OF AN ACCESSIBLE GROUND-TRUTH VALIDATION DATASET CONSISTING OF OVER 10,000 HOURS OF ANNOTATED DATA

Benjamin Maylor¹, Scott Small¹, Stefan Van Duijvenboden¹, Tatiana Plekhanova¹, Rachel Sharman¹, Elizabeth Hill¹, Fredrik Karpe¹, Simon Kyle¹, Aiden Doherty¹

¹University of Oxford

P2.5.53 - ESTIMATING ENERGY EXPENDITURE BY USING FLOOR VIBRATION MONITORING TECHNOLOGY IN BEDROOM SETTINGS

Yuki Nakajima¹, Nobuhisa Motooka¹, Yuji Ohta¹, Julien Tripette¹

¹Ochanomizu University

P2.5.54 - TO CORRECT OR NOT TO CORRECT AN AUTOMATED TIME IN BED ALGORITHM? - A COMPARISON OF SITTING TIME ESTIMATES USING TWO DATA PROCESSING METHODOLOGIES

Charlotte Edwardson¹, Stacy Clemen², Melanie Davies¹, David Dunstan³, Malcolm Granat⁴, Benjamin Maylor¹, Gemma Ryde⁵, Tom Yates¹, Alexandra Clarke-Cornwell⁴

¹University of Leicester, ²Loughborough University, ³Baker Heart and Diabetes Institute, ⁴University of Salford, ⁵University of Glasgow

P2.5.55 - DEMOCRATIZING HUMAN MOVEMENT MONITORING THROUGH GNSS DATA INTEGRATION: A PILOT STUDY ON THE POTENTIAL OF OPEN-SOURCE INFRASTRUCTURE FOR SCALABLE AND AFFORDABLE MOVEMENT MONITORING

Amin Rezaei¹

¹Sens Innovation Aps & University of Southern Denmark (SDU)

P2.5.56 - VALIDITY OF ACCELEROMETER DEVICES AND METHODS USED IN EPIDEMIOLOGICAL STUDIES ON ASSOCIATION BETWEEN PHYSICAL ACTIVITY BOUT DURATION AND HEALTH OUTCOMES: A SYSTEMATIC REVIEW

Adrien Chanteau¹, Guillaume Mahé¹, Alexis Le Faucheur¹

¹University of Rennes

P2.5.57 - VALIDITY OF ACCELEROMETER DEVICES AND METHODS IN THE ASSESSMENT OF DAILY-LIFE WALKING BOUTS

Adrien Chanteau¹, Guillaume Mahé¹, Alexis Le Faucheur¹

¹University of Rennes

P2.5.58 - ACUTE MICROVASCULAR CHANGES IN THE LOWER LEG FROM SEATED PEDALING WHILE PLAYING VIDEO GAMES

Nicholas Lerma¹, Madalyn Hickey¹, Macey Dunn¹

¹Grand Valley State University

P2.5.59 - CHARACTERISING A NOVEL DIGITAL BIOMARKER OF PHYSICAL PERFORMANCE, THE PEAK TWO-MINUTE STEP COUNT, IN A WORKING AGE POPULATION

Craig Speirs¹

¹ActivPal Ltd.

P2.6.60 - TEST-RETEST RELIABILITY AND CONCURRENT VALIDITY OF IMU SENSOR-BASED KINEMATIC METRICS DURING UPPER LIMB EXERCISES IN STROKE PATIENTS.

A.J. Nienja Langerak¹, S.L. Roux², Ruben Regterschot¹, Ruud Selles³, G.M. Ribbers³, C.G.M. Meskers⁴, B.J.F. Van Beijnum⁵, Johannes Bussmann¹

¹Erasmus University Medical Center, ²Erasmus University Medical Center & Hague University of Applied Science, ³Erasmus MC, ⁴Amsterdam UMC, ⁵University of Twente

P2.6.61 - A MOBILE HEALTH BIOFEEDBACK SYSTEM FOR POSTURAL REHABILITATION OF PERSONS WITH PARKINSON'S DISEASE

Ilaria D'ascanio¹, Luca Palmerini¹, Chiara Pirini¹, Silvia Imbesi², Carlo Tacconi³, Ilaria Cani⁴, Luca Baldelli⁴, Giulia Giannini⁴, Giuseppe Mincoletti², Lorenzo Chiari¹, Giovanna Lopane⁴

¹University of Bologna, ²University of Ferrara, ³mHealth Technologies s.r.l., ⁴IRCCS Istituto delle Scienze Neurologiche di Bologna

P2.6.62 - COMPARING MINIMUM FOOT CLEARANCE WITH FOUR FOOT-ANKLE PROSTHESES DURING UNSUPERVISED NEIGHBORHOOD WALKS RECORDED IN EVERYDAY LIVING

Katherine Heidi Fehr¹, Yisen Wang¹, Jennifer Bartloff¹, Peter Adamczyk¹

¹University of Wisconsin – Madison

P2.6.63 - INSTRUMENTED TIMED TANDEM GAIT ACUTELY AFTER MILD TRAUMATIC BRAIN INJURY

Cecilia Monoli¹, Amanda Morris², Regan Crofts¹, Christina Geisler¹, Tessa Petersell¹, David Quammen¹, Adam Hollien¹, Lee Dibble¹, Peter Fino¹

¹University of Utah, ²California State University

P2.6.64 - CO-DESIGNING A NOVEL AND PERSONALISED SMARTPHONE APP TO REDUCE FALLS IN PARKINSON'S DISEASE

Peter Mcmeekin¹, Conor Wall¹, Victoria Hetherington², Richard Walker³, Alan Godfrey¹

¹Northumbria University, ²Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust, ³Northumbria Healthcare NHS Foundation Trust

P2.6.65 - ADVANCING PROSTHETIC PRESCRIPTIONS: DEVELOPING A SENSOR-BASED SYSTEM FOR OBJECTIVE ACTIVITY ASSESSMENT

Matthew Wassall¹, Malcolm Granat¹, Sibylle Thies¹, Saeed Zahedi²

¹University of Salford, ²Blatchford Prosthetics

P2.6.66 - THE ASSOCIATION OF LATENT CLASS ACCELEROMETRY PATTERNS WITH INCIDENT AND FATAL CANCER: THE WOMEN'S HEALTH ACCELEROMETRY COLLABORATION

Kelly Evenson¹, Annie Green Howard², Fang Wen², Chongzhi Di³, Humberto Parada Jr.⁴, Michael Lamonte⁵, Andrea Lacroix⁶, I-Min Lee⁷

¹University of North Carolina, ²University of North Carolina - Chapel Hill, ³Fred Hutchinson Cancer Research Center, ⁴San Diego State University, ⁵State University of New York at Buffalo, ⁶University of California, San Diego, ⁷Brigham and Women's Hospital

P2.6.67 - FREE-LIVING GAIT CADENCE ESTIMATED FROM WRIST-WORN ACCELEROMETERS CAN TRACK SEVERITY OF PARKINSON'S DISEASE

Emily Redington¹, Danni Tu¹, Darrian Rice¹, Rolando Acosta¹, Jacek Urbanek¹

¹Regeneron Pharmaceuticals, Inc.

P2.6.68 - HOW TO GAIN INSIGHTS INTO MENTAL HEALTH USING WEARABLE TECHNOLOGIES AND MACHINE LEARNING: A SYSTEMATICAL REVIEW

Simon Woll¹, Ulrich Ebner-Priemer¹, Marco Giurgiu¹

¹Karlsruhe Institute of Technology

P2.6.69 - UNDERSTANDING SPECIFIC PROXEMICS TO PROMOTE MOBILITY IN POWER WHEELCHAIR : A STUDY OF PEDESTRIAN-CHAIR AVOIDANCE IN REAL LIFE AND IN VR

Emilie Leblong¹, Fabien Grzeskowiak², Sébastien Thomas³, Louise Devigne², Bastien Fraudet⁴, Marie Babel², Anne-Hélène Olivier²

¹Lab St Hélier, Pôle MPR St Hélier, Association St Hélier, Rennes, France, ²University of Rennes, ³Université de Rennes, ⁴Lab St Hélier, Pôle MPR St Hélier, Association St Hélier, Rennes

P2.6.70 - VERIFICATION AND VALIDATION OF THE EMPATICA EMBRACEPLUS FOR INERTIAL SENSOR-BASED GAIT ANALYSIS AT MULTIPLE SENSOR LOCATIONS

Rossella Indaco¹, Matteo Serafino¹, Manuela Galli², Veronica Cimolin², Serena Cerfoglio², Teo Bistoni¹, Massimo Grillo¹, Davide Ariberto Domenico Cassani¹, Domenico Ruben Pangallo¹, Umberto Mazzucchelli¹, Ludovica Nestore¹, Jessie Lever Taylor³, Marisa Cruz³, Giulia Regalia¹, Simone Tognetti¹

¹Empatica Srl, ²Politecnico di Milano, ³Empatica Inc

ICAMPAM 2024 SPONSORS, SUPPORTERS AND EXHIBITORS

ACTIGRAPH

[ActiGraph](#) is pioneering the digital transformation of clinical research. Our medical-grade wearable technology solutions have been used to capture real-world, continuous digital measures of sleep, activity, and mobility for thousands of academic research studies and clinical trials across a wide range of therapeutic areas. Appearing in over 24,000 peer-reviewed scientific publications, ActiGraph is the most experienced and trusted wearable technology partner in the industry.

ACTIVINSIGHTS

[Activinsights](#) simplify the remote collection of patient data – delivering activity, sleep, and lifestyle insight to healthcare professionals. Our wearables and connected technologies are accelerating pharmaceutical drug development, enhancing clinical care, and complementing vital research.

ACTIVPAL

At [activPAL](#) we developed easy to use sensors which accurately describe a person's activities throughout the day. The activPAL(tm) measures physical activities, allowing a person's daily activities to be classified, second by second. When you move, it moves generating totals for the time spent lying, sitting, standing and stepping, every second of the day. This system, while minimally encumbering to the wearer uses complex analysis routines to obtain the activity classification profile.

MCROBERTS & EMPATICA

[McRoberts](#), one of the leaders in ambulatory monitoring of physical activity, and [Empatica](#), pioneers in digital biomarker development and AI-driven patient and physical activity monitoring, are proud to co-sponsor ICAMPAM 2024. In their recent groundbreaking partnership, Empatica and McRoberts announced the integration of all 71 McRoberts endpoints in Empatica's digital biomarkers portfolio and FDA-cleared platform. The Empatica Health Monitoring Platform and EmbracePlus wearable empower thousands of research partners in clinical trials across neurology, oncology, and more. McRoberts have been providing comprehensive solutions to healthcare and research for the assessment of human mobility in daily life and laboratory settings since 1994.

MICHIGAN STATE UNIVERSITY

The [Department of Kinesiology](#) at Michigan State University is dedicated to the study of physical activity and sport across the lifespan, with a special emphasis on youth. We aim to educate individuals to lead physically active and healthy lives, and to prepare individuals for research and leadership positions in educational, sport and clinical settings. In all of our programs, research and practice are intertwined, in our impact-focused labs, in the classroom with renowned faculty and in hands-on applications on campus and beyond. Faculty areas of research interest include a focus on pediatric health and wellbeing, youth sports, motor learning and more.

MOVISENS

[movisens](#) offers solutions in the field of ambulatory assessment and mobile monitoring. Objective parameters can be measured with mobile sensors. In addition, the movisensXS platform offers a perfect solution for the area of experience sampling. Both functions can be combined with each other, so that questionnaires and interventions can be triggered on the participants smartphone by the sensor trigger.

SAMMED

Pour l'Évaluation, les systèmes proposés par [SAMMed](#) renseignent sur le mouvement en laboratoire, lors de mesures embarquées, en écologique contrôlé, jusqu'au suivi en vie quotidienne. Pour la Rééducation, les systèmes permettent une assistance des patients dès le début de la rééducation en mode passif jusqu'au renforcement.

SENS

[SENS motion](#) is a validated system for large scale data collection of accelerometer based physical activity measurements. The system has been developed in a close collaboration with leading international physical activity researchers, based on techniques and methods such as the those promoted by the PROPASS consortium. SENS motion measures the physical activity of participants. Data can be collected on many participants. Research staff can access the participants' activity profiles and easily setup bulk data analysis and export for statistics at scale.

THANK YOU TO OUR SPONSORS

GOLD SPONSORS



BRONZE SPONSORS



Department of Kinesiology
MICHIGAN STATE UNIVERSITY

EXHIBITORS



SUPPORTORS



Avec le soutien de

