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*Validation of a novel device intended for remote clinical monitoring is essential to determine if the device is fit-for-purpose for the specific patient population.*

— **Ariel Dowling**,  
Director of Digital  
Strategy, Takeda



## The Problem

- » Sleep architecture exhibits unique electroencephalogram (EEG) signatures that can aid diagnosis of narcolepsy type 1 (NT1).
- » In-lab polysomnography (PSG) remains the only accepted approach to determining sleep architecture; however, multiple nights of PSG are required to elucidate treatment effects.
- » The validation of a user-friendly device that can be used at home would reduce the burden and cost of obtaining PSGs in large-scale clinical studies.



## The Impact

- ✓ The V3 framework provided a justification for why the study should be conducted in the first place to validate the digital tool.



## The Resources

- » We conducted a multi-center study to assess the agreement between an at-home EEG device and in-lab PSG to better measure sleep.
- » Our whole team used DiMe's [V3 Framework](#) to collaborate on this study, including the clinical team, the CRO, the device vendors, and the digital device SME.
- » We used the clinical validation framework as a guide for how to structure the study, what measurements to capture and how to compare the results from both devices.
- » Patients with NT1 underwent two nights of in-lab PSG while also wearing a wrist accelerometer, a high-resolution heart rate monitor, and making daily diary entries at home for 5 days to determine agreement between devices.