

CENTER FOR Behavioral Health + Smart Technology

The HealthTech Weekly

December 8th, 2017

Spotlight on: Dr. Carissa Low, PhD

Center Core Faculty Member, Dr.
Carissa Low, is an Assistant
Professor of Medicine and
Psychology at the University of
Pittsburgh, where she directs the
Biobehavioral Oncology and
Technology (BOT) Lab. Her research
focuses on the interactions between
behavior, biology, and patientcentered outcomes in the context of
cancer, and she is investigating the
use of mobile technology to detect
and target risk states during cancer

treatment.



Below, find Dr. Low's recently published paper, visit the BOT Lab's website, and read a preview of Center Associate Director Julia Holber's interview with Dr. Low. Visit our website to read the full interview here!

Fitbit step counts during inpatient recovery from cancer surgery as a predictor of readmission •

Carissa A Low, PhD , Dana H Bovbjerg, PhD, Steven Ahrendt, MD,
M Haroon Choudry, MD, Matthew Holtzman, MD, Heather L Jones, PA-C,
James F Pingpank, Jr., MD, Lekshmi Ramalingam, MD, Herbert J Zeh, III, MD,
Amer H Zureikat, MD ... Show more

Annals of Behavioral Medicine, kax022, https://doi.org/10.1093/abm/kax022

Published: 06 December 2017

Read the press release and the full text of Dr. Low's recent paper



Visit the BOT Lab website

Julia: At our 3rd Integrative Conference last month, you presented DASH (Detecting Activity to Support Healing) at our Demo Session. What is DASH? What does it aim to do?

Carissa: DASH is a study where we're developing an intervention to target sedentary behavior before and after cancer surgery. It's funded by the NCI, the Center for Behavioral Health and Smart Technology, and the Aging Institute, and it's a follow-up to our Fitbit finding. DASH uses a wearable device to detect in real-time when patients have been sitting or lying down for a long period of time, and then it suggests brief walking breaks to reduce prolonged sedentary bouts, with more frequent breaks at times when patients are feeling relatively well and asymptomatic. So, DASH will start before surgery, which research on prehabilitation has shown is a really important time point when increasing activity can set people up for a better

recovery, and then it continues through the post-operative recovery period. We're still refining DASH and conducting usability and iterative design sessions with patients right now so we can build an intervention that meets their evolving needs while they're waiting for and then recovering from this major surgery. We're learning a lot so far, and we're looking forward to finalizing the intervention and testing its effects on post-operative outcomes in a randomized trial next year.

Read the full interview here!



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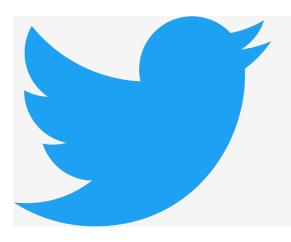
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—Dr. Bruce Rollman & the HealthTechPitt Team



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