Ethical Quandaries of Direct-to-Consumer Neurotechnology

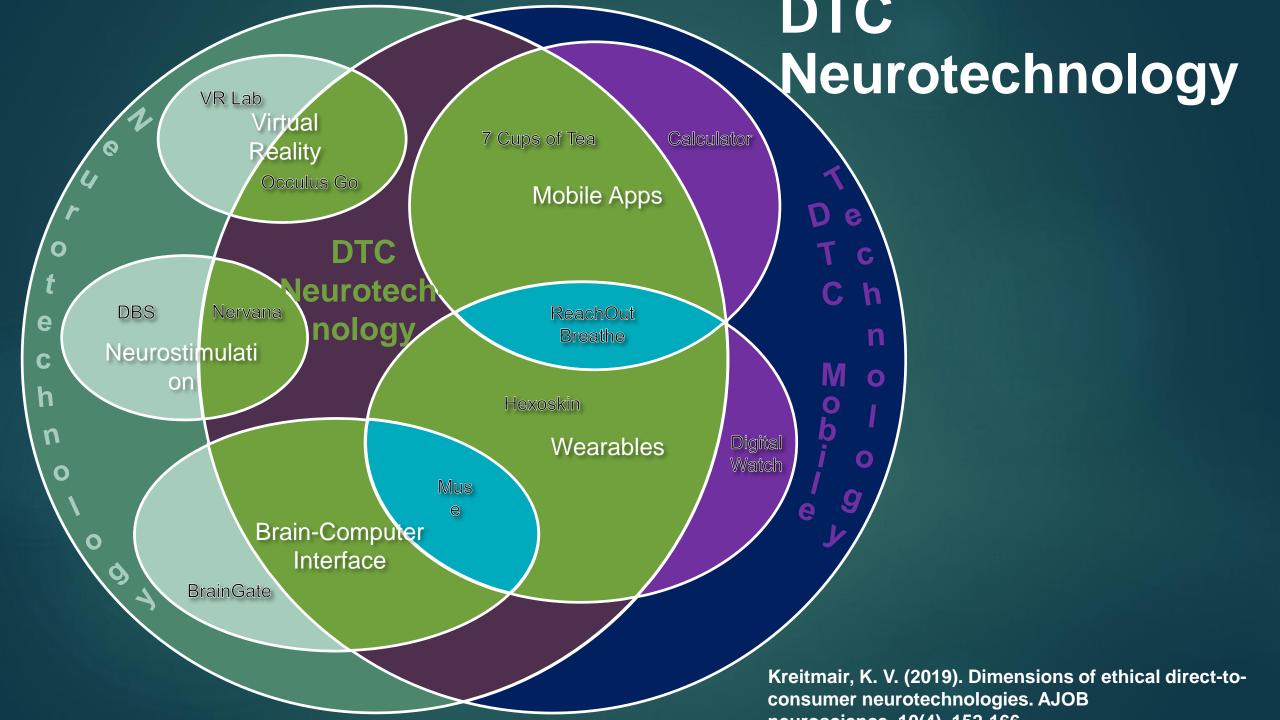
KAROLA KREITMAIR, PHD, MSC, HEC-C

ASST PROFESSOR: DEPT OF MEDICAL HISTORY AND BIOETHICS, UW – MADISON

ETHICS GRAND ROUNDS – UT SOUTHWESTERN MEDICAL CENTER MAY 10TH, 2022

Outline

- ▶ DTC neurotechnology background
- Two sets of ethical issues
 - ► 'Easy' ethical issues
 - ► 'Hard' ethical issues
- ► A closer look at empowerment
- Conclusion



Brain-Computer Interface





Neurostimulator



Virtual Reality







Mental Health Apps



7 Cups: Online Therapy & Chat 12+

Stress & Depression Counseling

7 Cups of Tea

Designed for iPad

★★★★ 4.7 • 8.8K Ratings

Free · Offers In-App Purchases

View in Mac App Store **↗**

Apps.apple.com

Wearables



'Easy' ethical issues

- Safety
- Privacy
- ▶ Transparency

Safety

"Unfocus" on *foc.us*: commercial tDCS headset impairs working memory

<u>Laura Steenbergen</u> ⊆, <u>Roberta Sellaro</u>, <u>Bernhard Hommel</u>, <u>Ulman Lindenberger</u>, <u>Simone Kühn</u> & Lorenza S. Colzato

Experimental Brain Research 234, 637–643 (2016) Cite this article

12k Accesses | 44 Citations | 198 Altmetric | Metrics

Research Article | Open Access | Published: 18 August 2015

- Example: tDCS device
- Marketed as increasing focus and alertness; improving cognition; relieving symptoms of anxiety and depression; and combatting cravings.
- ▶ Risks: unintended areas may be affected, enhancing one area might hurt another, effects may be longer-lasting than expected, tDCS may impair working memory, and that tDCS cause skin burns.



An Official Journal of the American Neurological Association and the Child Neurology Society



Editorial

An open letter concerning do-it-yourself users of transcranial direct current stimulation

Rachel Wurzman PhD, Roy H. Hamilton MD, MS, Alvaro Pascual-Leone MD, PhD, Michael D. Fox MD, PhD



Source: getlift.com

Regulation?

- ▶ DTC neurotechnologies not classified as medical devices by the FDA.
- 'General wellness products'.
- With medical devices, medical benefits are weighed against risks.
- With general wellness products, no such assessment is made.
- ▶ No 'medical benefits' recognized.

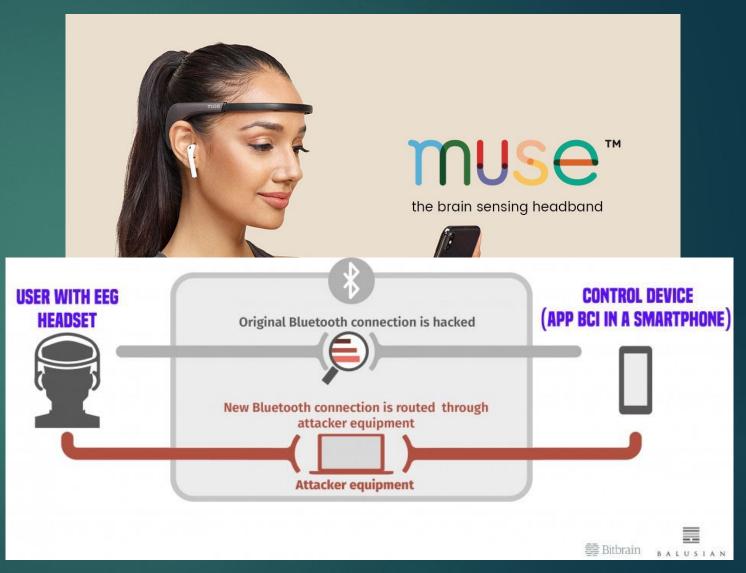
Docket No: FDA-2014-N-1039; 09/27/2019

General Wellness: Policy for Low Risk Devices Guidance for Industry and Food and Drug Administration Staff

A general wellness product, for the purposes of this guidance, has (1) an intended use that relates to maintaining or encouraging a general state of health or a healthy activity, or (2) an intended use that relates the role of healthy lifestyle with helping to reduce the risk or impact of certain chronic diseases or conditions and where it is well understood and accepted that healthy lifestyle choices may play an important role in health outcomes for the disease or condition.

Privacy

- Cybersecurity threats
- Example: EEG BCIs
- Hackers can intercept EEG data and/or establish unauthorized Bluetooth connections.
- Hacked data is valuable, e.g., \$5 for credit card information or \$250 per medical record (Trustwave 2018).



Nature **551**, 159–163 (2017)

Privacy

Four ethical priorities for neurotechnologies and AI

Companie regulation Artificial intelligence and brain-computer interfaces must respect and preserve people's privacy, identity, agency and equality, say **Rafael Yuste**, **Sara Goering** and colleagues.

- Brain data increasingly ser revealing.
- Can be integrated with hos information – digital phenor
- Data uses might include in Marcello educational settings, "social credit systems.
- Cognitive liberty.

RESEARCH Open Access



Towards new human rights in the age of neuroscience and neurotechnology

Marcello lenca^{1*} and Roberto Andorno²

Transparency

- Efficacy?
- ► Tension between designation as not a medical device and requirement of full validation.
- Lack of regulation is problematic.
- ► Majority of efficacy claims made by DTC EEG and tDCS companies are unsubstantiated, rely on testimonials, unrelated general scientific concepts, or unpublished, non-peer-reviewed in-house R&D (Coates McCall et al, 2019).
- Autonomy requires truthful information.

Published: April 2007

Commercializing cognitive neurotechnology—the ethical terrain

Margaret L Eaton & Judy Illes

Nature Biotechnology 25, 393–397 (2007) Cite this article

2154 Accesses | 39 Citations | 9 Altmetric | Metrics

Neuron



Volume 102, Issue 4, 22 May 2019, Pages 728-731

NeuroView

Owning Ethical Innovation: Claims about Commercial Wearable Brain Technologies

Iris Coates McCall ¹, Chloe Lau ¹, Nicole Minielly ¹, Judy Illes ¹ ○ ☑

'Hard' ethical issues

- Psychological continuity (lenca and Adorno, 2017)
- ▶ Agency and identity (Yuste, Goering, et al, 2017)
- Existential authenticity (Kreitmair, 2019)
- 'Empowerment'



Elon Musk's Neuralink to empower human brains with Al

by Kartik Singh | Jul 26, 2019 | Al, Data Science | 0 comments



dimensionless.co



Empower People With Health Tech And Health

wearable.png

With more health data such as ECG and blood oxygen available on our wrists, devices such as the Apple Watch allow users to keep close tabs on their health.

Deepa Narwani | Nov 08, 2021

► Claim: Like all digital, mobile, health technologies, DTC neurotechnology *empowers* users to adopt healthier habits, take responsibility for their health, become more productive and relaxed. This technology empowers physical and psychological self-improvement.

- Empowerment is a state a person is in with respect to a certain situation, in which five things are true of her:
 - 1) Knowledge
 - 2) Control
 - 3) Responsibility
 - 4) Availability of Good Choices
 - 5) Healthy Desires

Empowerment_(state) ≠ Empowerment_(self-perception)

Availability of Good Options

Must have access to good options.

Knowledge

Must have knowledge about relevant possibilities.

Healthy Attitudes / Desires

Must be motivated by healthy attitudes and desires.

Control

Must have the ability to bring about an outcome.

Responsibility

Must be responsible for the outcomes one chooses to bring

Empowerment_(state) Definition

An individual possesses empowerment_(state) with respect to a certain situation, if there are *good options available* to her, she has *knowledge* of these options, she has *healthy desires* with respect to these options, she has *control* over which of these options to bring about, and she is *responsible* for the respective action or actions.

Knowledge



SCIENCE

18 JANUARY 2019 • VOL 363 ISSUE 6424

Oversight of direct-toconsumer neurotechnologies

Efficacy of products is far from clear

By Anna Wexler¹ and Peter B. Reiner²

Neuron

CelPress

Volume 102, Issue 4, 22 May 2019, Pages 728-731

NeuroView

Owning Ethical Innovation: Claims about Commercial Wearable Brain Technologies

choos Iris Coates McCall ¹, Chloe Lau ¹, Nicole Minielly ¹, Judy Illes ¹ [△] ⊠

Control

TIME



LATE NIGHT JIMMY FALLON

The New York Times













Neurosky



Neuron

Volume 102, Issue 4, 22 May 2019, Pages 728-731



NeuroView

Owning Ethical Innovation: Claims about Commercial Wearable Brain Technologies

Iris Coates McCall ¹, Chloe Lau ¹, Nicole Minielly ¹, Judy Illes ¹ [△] ⊠

Responsibility

- Being responsible means being praise- and blameworthy.
- ► Two options:
 - Something about the use of DTC neurotechnology makes the user more praise- and blameworthy.
 - ► The decision to use DTC neurotechnology in the first place is praise- or blameworthy.

Responsibility – Option 1 (Within Use)

- Example: Automatic calorie-tracker
- Horace is obese and wants to lose weight by cutting calories. He buys and uses the GoBe wearable.
- Question: Assume Horace is successful in cutting calories. Is Horace's calorie-cutting behavior more praiseworthy if it happens in the setting of GoBe use rather than via another method?
- ▶ No.



Responsibility – Option 1 (Within Use)

- Question: Assume Horace is not successful in cutting calories. Is Horace's calorie-cutting behavior more blameworthy if it happens in the setting of GoBe use rather than via another method?
- Perhaps, Horace is more blameworthy because he has improved tools and "no more excuses". "He just lacks willpower."
- No! Obesity is complex phenomenon, largely driven by genetics, environmental factors, and psychological adversity.



Responsibility – Option 2 (Decision to Use)

Original Research

Health professionals' attitudes to patients' use of wearable technology



Digital Health
Volume 5: 1-6
© The Author(s) 2019
DOI: 10.1177/2055207619845544
journals.sagepub.com/home/dhj

\$SAGE

Angus Watt¹, Katherine Swainston¹ and Gemma Wilson² (D

"[S]ome participants generally felt that patients do not take enough responsibility of their own health and 'rely on everyone to sort out the problem" (p. 3).

Responsibility – Option 2 (Decision to Use)

Original Research



Digital Health

Health professionals' of wearable technology

Medicine, Health Care and Philosophy https://doi.org/10.1007/s11019-019-09900-y

Angus Watt¹, Katherine Swainsto

SCIENTIFIC CONTRIBUTION

"[S]ome participants gresponsibility of their the problem" (p. 3).

Mobile health ethics and the expanding role of autonomy

Bettina Schmietow¹ • Georg Marckmann¹

© Springer Nature B.V. 2019

Responsibility – Option 2 (Decision to

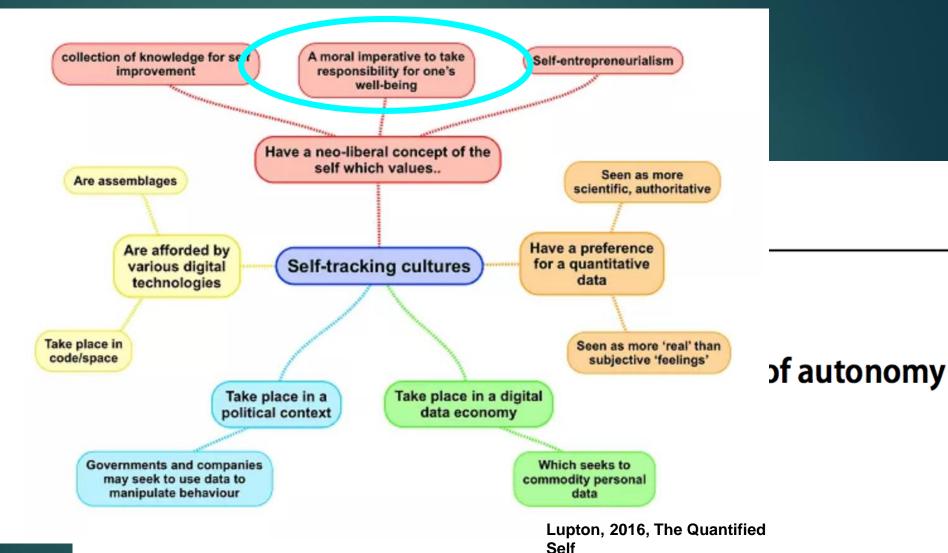
Use)

Original Research

Health profes of wearable

Angus Watt¹, Kathe

"[S]ome part responsibility the problem'



Responsibility – Option 2 (Decision to Use)

- ▶ DTC m-health technology use most common among young, wealthy, white, college-educated individuals (Chandresekaran et al, 2020).
- ▶ DTC m-health technology expensive and beyond reach for many who are interested in using it (Holko et al, 2022).
- ▶ DTC m-health technology may be less accurate or non-functional in individuals with dark skin (Colvonen et al, 2020).
- ▶ Deeming individual praiseworthy for using DTC m-health technology and/or blameworthy for not using such technology, risks exacerbating existing racial and socio-economic discrimination.

Availability of Good Options

- Efficacy
 - Cost
 - Adherence
- Safety
- Privacy

Neuron

CelPress

Volume 102, Issue 4, 22 May 2019, Pages 728-731

NeuroView

Owning Ethical Innovation: Claims about Commercial Wearable Brain Technologies

Iris Coates McCall ¹, Chloe Lau ¹, Nicole Minielly ¹, Judy Illes ¹ [△] ⊠

Φ TECHNOLOGY TO EMPOWER PATIENTS

Why People Stick With or Abandon Wearable Devices

Glenn Fox, PhD, Shaun Garland, PhD, Andrew Keibel, MD & Leslie A. Saxon, MD

University of Southern California, Center for Body Computing

Article · September 14, 2017

Healthy Desires

- Example: Automatic calorie-tracker
- Can drive disordered eating (Linardon & Messer 2019).
- Example: Sleep tracking
- "The patients' inferred correlation between sleep tracker data and daytime fatigue may become a perfectionistic quest for the ideal" (Baron et al 2017).
- For the unregulated DTC neurotechnology industry, furtherin healthy behavior is only valuable so far as that is aligned with their profit objective.





Case Reports

http://dx.doi.org/10.5664/jcsm.6472

Orthosomnia: Are Some Patients Taking the Quantified Self Too Far?

Baron KG, Abbott S, Jao N, Manalo N, Mullen R. Orthosomnia: are some patients taking the quantified self too far? *J Clin Sleep Med*. 2017;13(2):351–354.

- Empowerment is a state a person is in with respect to a certain situation, in which five things are true of her:
 - 1) Knowledge
 - 2) Control
 - 3) Responsibility
 - 4) Availability of Good Choices
 - 5) Healthy Desires
- Narrative of empowerment is prevalent.

Empowerment_(self-perception)

- Empowerment(self-perception) is not a state but a perception of oneself as powerful or potent.
- Rappaport (1987): "psychological sense of personal control or influence".
- ▶ Definition: An individual possesses empowerment_(self-perception) with respect to a certain situation, if she perceives there to be *good options available* to her, she perceives herself to have *knowledge* of these options, she perceives herself to have *healthy desires* with respect to these options, she perceives herself to have *control* over which of these options to bring about, and she perceives herself to be *responsible* for the respective action or actions.
- It is possible to perceive oneself as possessing a feature without actually possessing it.

Upshot

▶ If DTC neurotechnology at least sometimes engenders not empowerment_(state) but empowerment _(self-perception), then it is important to determine how prevalent that phenomenon is. Someone who is empowered_(self-perception) but not empowered_(state) is not in a position to bring about desired behavior change, despite feeling that they should be able to. Not only can this generate unreasonable expectations detrimental to health and wellbeing, it also places the burden of change on the shoulders of seemingly empowered individuals, when in reality, the conditions necessary for individuals to affect change are not met.

Thank you

References

- Chandrasekaran, R., Katthula, V., & Moustakas, E. (2020). Patterns of use and key predictors for the use of wearable health care devices by US adults: insights from a national survey. *Journal of Medical Internet Research*, 22(10), e22443.
- Colvonen, P. J., DeYoung, P. N., Bosompra, N. O. A., & Owens, R. L. (2020). Limiting racial disparities and bias for wearable devices in health science research. Sleep, 43(10), zsaa159.
- ► Holko, M., Litwin, T. R., Munoz, F., Theisz, K. I., Salgin, L., Jenks, N. P., ... & Sharma, Y. (2022). Wearable fitness tracker use in federally qualified health center patients: strategies to improve the health of all of us using digital health devices. *NPJ Digital Medicine*, *5*(1), 1-6.
- Kreitmair, K. V. (2019). Dimensions of ethical direct-to-consumer neurotechnologies. AJOB neuroscience, 10(4), 152-166.
- Kreitmair, K. 2021. Digital behavioral technology, deep learning, and self-optimization, in F. Jotterand, M. lenca (eds.), Artificial Intelligence in Brain and Mental Health: Philosophical, Ethical & Policy Issues, Advances in Neuroethics, Springer, Switzerland
- Linardon, J., & Messer, M. (2019). My fitness pal usage in men: Associations with eating disorder symptoms and psychosocial impairment. *Eating behaviors*, 33, 13-17.
- Rappaport, J. (1987). Terms of empowerment/exemplars of prevention: Toward a theory for community psychology. American journal of community psychology, 15(2), 121-148.