

Clinical Trails for Generative AI Mental Health Interventions.

Patricia A. Areán, PhD

University of Washington CREATIV Lab

Former Division Director, NIMH Division of Services and
Interventions Research



UW CREATIV Lab

Disclosures

- Paid scientific consultant:
 - Benchmark Health
 - Slingshot
 - King County Behavioral Health Research Division

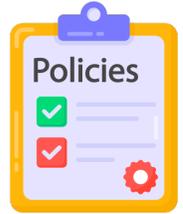
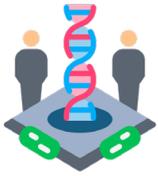
Overview

- Types of Mental Health Generative AI Chatbots.
- The Clinical Trial Pipeline
- Considerations for Clinical Trials of Gen AI

Gen AI mental health uses

- Wellness
- Psychoeducation
- Decision Support
- Training
- Intervention support
- Treatment

Clinical trial pipeline



Target Identification

Proof of
concept

Efficacy/safety

Effectiveness

Implementation

Integration

Policy and
financing

A word about design

- Be clear about the use case.
- Consider the context the chatbot will be deployed.
- Involve typical end users in initial design.
- Identify the key therapeutic components.
- Work with content experts to identify tags.
- Sample transcripts need to have variability in quality.
 - Ensure the data pull has good population representation.
- Develop Robust safety protocols.

Trial design

- Superiority vs Non-inferiority
- Sample selection
- Control condition considerations
 - Placebo
 - Waiting list
 - Human delivery
 - Usual Care
- Follow up period

Important outcomes and processes to demonstrate in an efficacy RCT

- Safety
 - Number needed to harm.
 - Number or conversational errors/need for correction.
- Efficacy
 - Clinical effect under controlled circumstances.
- Fidelity/benchmark performance
 - Chatbot quality in delivering therapeutic content.
- Flexibility
 - Chatbot shows flexibility in delivery of content.
- Patient centeredness
 - Chatbot content feels empathic, uses patient context to explain principles.

Important outcomes and processes to demonstrate in an effectiveness RCT

- Population level Safety
 - Number needed to harm.
 - Number or conversational errors/need for correction.
 - Corrections for divergence from the conversational framework.
- Effectiveness
 - Clinical effect in different populations.
- Fidelity/benchmark performance
 - Chatbot quality in delivering therapeutic content; acceptable deviations in content.
- Flexibility
 - Chatbot shows flexibility in delivery of content, in different populations.
- Patient centeredness
 - Chatbot content feels empathic, uses patient context to explain principles, optimal engagement.

Post trial variations in communications, novel development

- Levels of AI constraint.
- On-going surveillance.
- Novel interactions? Back to testing.

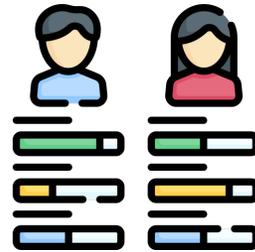
Hybrid model for Efficacy trials: Efficacy-Effectiveness studies.



Does the intervention work/Safety?



Does it engage the target?



Any populations the intervention does not work for?



What clinical and system structures are needed to implement?

Thank you.

patarean@gmail.com