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A SOCIAL MEDIA STUDY ON THE EFFECTS OF PSYCHIATRIC MEDICATION USE

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- One in Six Americans take **psychiatric medications**
- Five of the top 50 drugs sold in the U.S. are psychiatric medications

EFFECTS OF PSYCHIATRIC MEDICATIONS

- Their mechanism of action poorly understood
- Selection of drug treatments is primarily on trial-and-error basis
- Understanding the effects of psychiatric medication is important
- Clinical trials and reports of adverse events
- Limitations with the existing methodologies

OUR WORK

...conducts a large-scale social media study of the effects of 49 FDA approved antidepressants across four major families (SSRIs, SNRIs, TCAs, and TeCAs)

...adopts a patient-centered approach to study the effects of these drugs as reflected and self-reported in longitudinal social media data

PATIENT-CENTERED APPROACH

- Historically, psychiatric care has adopted a "Disease-Centered Model"
 - Neglects the psychoactive effects of drugs
- Consequently, a "Drug-Centered Model" has been advocated
 - Care becomes more collaborative
- "Patient-Centered Model"

Twitter Data

Data Stream

Psy. Drug mentions in 2015-16

Self-reports of Intake

Personal Drug

Account created

2015?

before

Intake Classifier

Control Data

Ø

Compile Treatment

Control User Data

Data **Treatment User**

data

samples

After

and **Anxiety** Before Stress **Psychosis** Construct Suicide Covariates

Control Date

Treatment Date

LIWC

n-grams Depression

Treatment Covariates

Control Covariates

before treatment dates

data

on

covariates

Compute

Stratify similar users on propensity scores

strata

User

Suicide

P. Affect

N. Affect

Cognition

Anxiety

Outcomes

Depression **Psychosis**

per drug Relative Treatment Effect (RTE)

users

similar

of

outcomes

the

Compare

DATA



List of psychiatric medications

49 medications



Twitter posts mentioning psychiatric medications

601,134 posts by **230,573** unique users



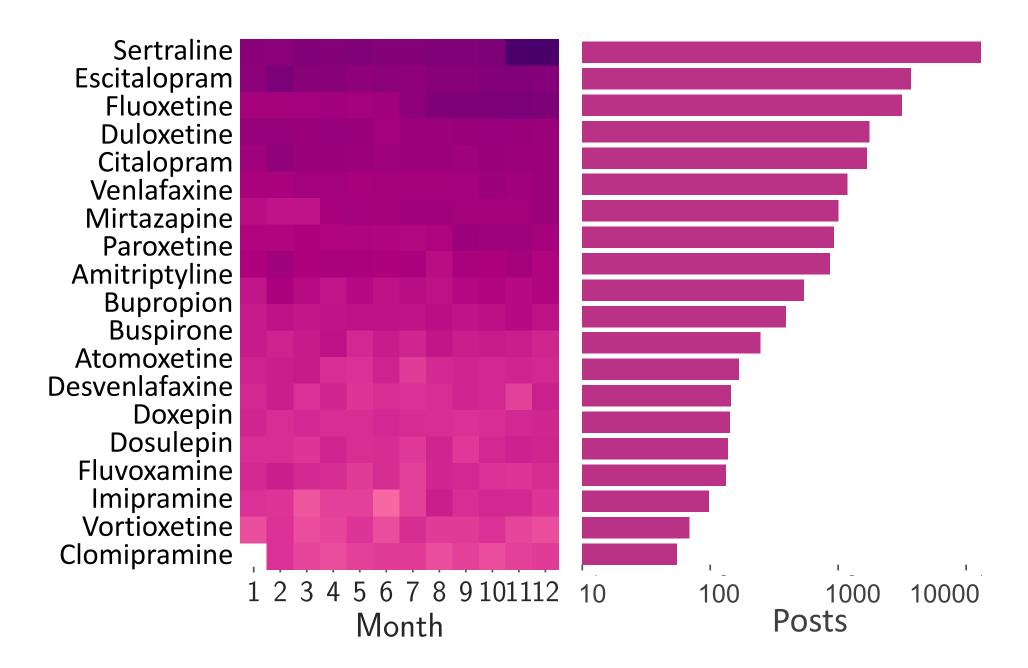
Medication Selfintake classifier (Klein et al. 2017)

93,275 selfintake posts

I'm taking my first dose of X tonight.

First day on X. Dose 1 taken, and I already feel weird from it.

My no-med experiment went horribly awry, so I'm starting X today.



TREATMENT AND CONTROL DATASET

- Twitter timelines of 23,191 users who self-reported psychiatric medication intake (2015-2016) [Treatment]

- Random Twitter user timelines (283,374 users) [Control]

STUDY DESIGN

- Conduct Observational Study
- Adopt a Causal Inference Framework based on Matching
- Compare the outcomes of similar (matched) individuals, those exposed to a treatment (psychiatric drug intake), and those who were not.
- Use stratified propensity score analysis

BEFORE AND AFTER SAMPLES

- For Treatment users, the before and after the date of the first intake of medications
- For Control users, we simulate placebo dates by nonparametrically assigning dates from the distribution of Treatment dates.

MEASURING SYMPTOMATIC OUTCOMES

- -Affect and Cognition
- -Depression, Anxiety, Stress, Psychosis, and Suicidal Ideation

AFFECT, COGNITION

LIWC categories of

- positive and negative affect for affect,
- cognitive mechanics, causation, certainty, inhibition, discrepancies, negation, and tentativeness for cognition

DEPRESSION, ANXIETY, STRESS, PSYCHOSIS, SUICIDAL IDEATION

- Supervised learning classifiers trained on Reddit domain-specific datasets
- Positive class from r/depression, r/anxiety, r/stress, r/psychosis, r/SuicideWatch
- Negative class from 20M Reddit posts gathered from 20 subreddits (eg. r/AskReddit,r/aww, r/movies).

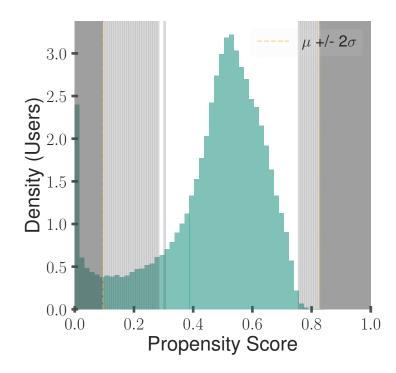
MATCHING FOR CAUSAL INFERENCE

Covariates:

- Social Attributes (#tweets, #followers, #followees, duration on platform, frequency of posting)
- Top 2,000 unigrams
- Normalized psycholinguistic occurrence of LIWC categories
- Baseline mental health status (aggregated use of depression, anxiety, stress, psychosis, and suicidal ideation)

PROPENSITY SCORE ANALYSIS

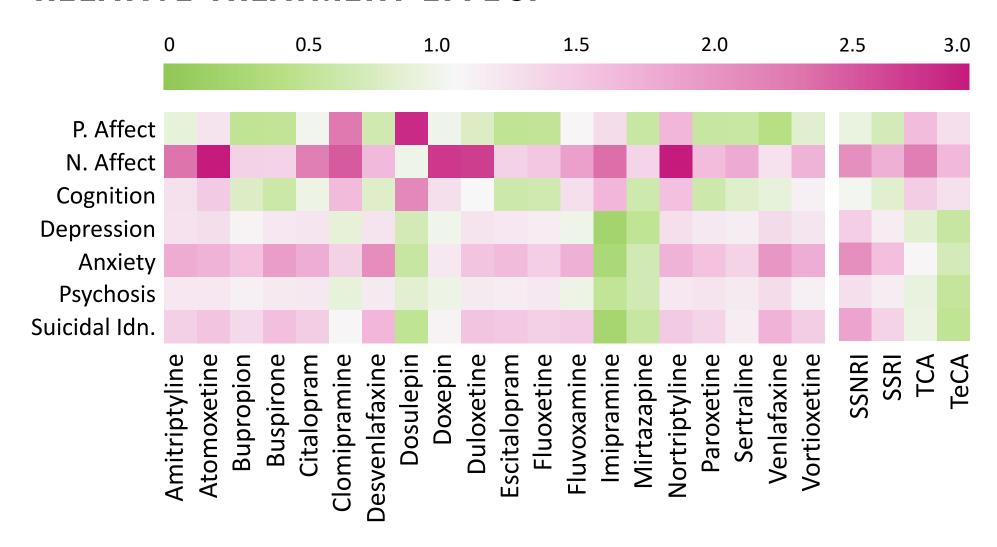
- Use logistic regression classifier to estimate propensity scores on covariates
- 100 strata of equal width of propensity scores
- Standardized differences to measure balance of covariates



TREATMENT EFFECT

- Relative Treatment Effect (RTE)
 - Ratio of change in outcome of Tr. And Ct. users per stratum
- Individual Treatment Effect (ITE)
 - Regress on psycholinguistic attributes and outcome in Ct. users
 - Predict on attributes of matched Tr. users
 - Ratio of actual (counterfactual) and predicted outcome

RELATIVE TREATMENT EFFECT



INDIVIDUAL TREATMENT EFFECT

Attribute	Coefficient	Attribute	Coefficient
Sertraline		Fluoxetine	
Past Tense	0.52	Cognitive Mech.	0.35
Tentativeness	0.35	Present Tense	0.34
1 st P. Singular	-0.18	Relative	0.31
Aux. Verbs	-0.23	Percept	0.30
Cognitive Mech.	-0.25	Conjunction	-0.10
Escitalopram		Duloxetine	
Article	0.22	Cognitive Mech.	0.46
1 st P. Singular	0.10	Relative	0.44
Social	- 0.07	1 st P. Singular	0.41
Bio	-0.13	Social	-0.20
2 nd Person	-0.18	Work	-0.26

- Blues indicate greater likelihood of improvement
- Reds indicate greater likelihood of worsening

DISCUSSION

TAKEAWAYS

- Social media is an effective sensor to scalably detect behavioral changes in those who initiate treatment via (self-reported) use of psychiatric medications
- Observe that people's online behaviors change in some unexpected ways following drug intake

POLICY AND ETHICS

- Potential negative consequences of this work
- Ethical complexities
- Self-treatment

CLINICAL IMPLICATIONS

- Patient-Centered Approach to Pharmacological Care
 - Complementary insights into the effects of drugs
 - Pre-treatment signals seem to be predictive of individual drug success
- Drug Repurposing
 - Low cost and high volume assessments of people's own reports and perceptions related to antidepressants' use

TECHNOLOGICAL IMPLICATIONS

- Technologies for Regulatory Bodies
- Technologies for Drug Safety Surveillance
- Technologies to support Digital Therapeutics

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Thank You

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