

Penn
UNIVERSITY OF PENNSYLVANIA

Artificial Intelligence and
Technology Collaboratory
for Healthy Aging

Newsletter - December 2025 - Issue 14



We are welcoming you to our 14th newsletter of the Penn Artificial Intelligence and Technology Collaboratory for Healthy Aging (PennAITech). PennAITech, funded by the National Institute on Aging, is committed to developing, evaluating, commercializing, and disseminating innovative technology and artificial intelligence systems to support older adults and those with Alzheimer's Disease and Related Dementias. Earlier this fall we announced our Year 5 awardees and are looking forward to working with this new cohort!

In this newsletter we highlight selected activities and resources within our Collaboratory. We feature PennAITech Innovation Fellow, Chaerin Lee. PennAITech is committed to mentoring and facilitating research and educational opportunities for our Innovation Fellows. We also learn more about Year 3 pilot project by our second awardee at the Beth Israel Deaconess Medical Center.

On November 21, 2025, we had the opportunity to co-sponsor along with the Institute on Aging the Sylvan M. Cohen Annual Retreat entitled "Aging Reimagined: Innovation in the Era of AI." This was a day full of presentations by our awardees and other national speakers who showcased emerging opportunities for innovative solutions for healthy aging. We summarize some of these proceedings in this newsletter. The week before, we participated at the Gerontological Society of America (GSA) Annual Conference in Boston, MA where several of our PennAITech faculty, innovation fellows and awardees presented findings from their work.

Our [PennAITech Video Library](#) consists of educational modules focusing on ADRD, aging, AI tools and techniques, ethical implications of research and system design for aging and persons with dementia, and many other domains covered by our PennAITech experts.

Finally, our webinar series now in its fourth year was launched for this academic year 2025- 2026; as before, all recorded sessions are available on our [YouTube channel](#). As always, we invite you to follow our social media platforms, including our [LinkedIn profile](#) and reach out with any questions or suggestions.



George Demiris

Table of Contents

Welcome

Meet our Team

Innovation Fellow
Spotlight

[Introducing Yr5
Pilots](#)

Yr4 Pilots

Yr3 Pilots

Pilot Spotlight

Recap of 2025
IOA Retreat

News from the Field

Publications

Webinars

Connect with Us

Meet the Team

Principal Investigators



**George Demiris,
PhD, FACMI**



Jason Karlawish, MD



**Jason H. Moore,
PhD, FACMI**

Aging Focus Pilot Core



**Kathryn H. Bowles
PhD, FACMI, FAAN**



**Pamela Z. Cacchione,
PhD, CRNP, FAAN**



**Lauren Massimo
PhD, CRNP**



**Dawn Mechanic-
Hamilton, PhD**

AD/ADRD Focus Pilot Core

The overarching goal of the Aging Focus Pilot Core is to promote the advancement of science using technology and artificial intelligence to optimize quality of life and healthcare management for older adults living in their homes independently, as well as those receiving skilled home and community-based services. This Core solicits, selects, and manages pilot studies that develop or test AI and technology applications to detect risks, predict needs, address disparities, improve access to care, and support decision making for chronic illness management and safe aging in place.

The overarching goal of the Alzheimer's Disease and Alzheimer's Disease Related Dementias (AD/ADRD) Focus Pilot Core is to promote the advancement of science and engineering for predictive analytics, clinical decision support, or the care of adults with AD/ADRD. This Core solicits, reviews, and supports pilot studies that develop or advance the use of AI and technology for AD/ADRD predictive analytics, clinical decision support, or the care of adults with AD/ADRD.

Meet the Supporting Core Team

Networking and Mentoring Core

The overarching goal of the Networking and Mentoring Core is to support activities intended to facilitate networking and mentoring for the awardees of the Aging and AD pilot projects, all of whom are invested in Artificial Intelligence (AI) approaches and technology for aging adults, including those with Alzheimer's disease or related dementias (AD/ADRD).

This Core organizes and supports consortium networking activities and communicates with the broader scientific community.



Dokyoon Kim, PhD

Technology Identification and Training Core



Li Shen, PhD, FAIMBE



Ryan Urbanowicz, PhD

The overarching goal of the Technology Identification and Training Core is to use evidence from the literature, stakeholder and expert inputs to identify the technology needs of older Americans, as well as develop training activities for artificial intelligence (AI) and technology for scientists, engineers, clinicians, medical professionals, patients, policy makers, and investors.

Ethics and Policy Core



Emily Largent, JD, PhD, RN



Anna Wexler, PhD

The overarching goal of the Ethics and Policy Core is to shift the current ethics and policy paradigm by focusing on issues that arise at the intersection of aging and of AI methods and technologies for healthy aging. The Core will work in close collaboration with the other PennAITech Collaboratory Cores to address four key issues: (1) promoting the autonomy of older adults by balancing considerations of usefulness and intrusiveness; (2) protecting older adults in light of vulnerability due to cognitive and functional decline; (3) mitigating bias and addressing health disparities, such as racial disparities and urban-rural disparities; and (4) safeguarding the data privacy of older adults.

The goal of the Clinical Translation and Validation Core is to use the science and practice of geriatrics and gerontology to assess the feasibility and clinical utility of artificial intelligence (AI) methods for clinical decision support and of new technology for monitoring aging adults in their home. This Core provides an expert panel to assess the feasibility and clinical value of new artificial intelligence models for predictive analytics and clinical decision support and of new technologies designed to monitor aging adults and those with AD/ABRD. It provides a testbed for new technologies designed to monitor aging adults and those with AD/ABRD with an emphasis on underserved and rural populations.

Clinical Translation and Validation Core



Jason Karlawish, MD



Rebecca T. Brown, MD, MPH

The overarching goal of the Stakeholder Engagement Core (SEC) is to ensure that technology solutions and AI approaches proposed and developed by the PennAITech Collaboratory are maximally adoptable by and accessible to their end users by soliciting ongoing stakeholder input and involving all key parties throughout all phases of the development and testing processes. The Core maintains a technology consortium (consisting of technology companies, startups, venture capital firms, and angel investors) that provide guidance and collaboration opportunities for pilot projects and a platform for potential dissemination and commercialization of innovative tools.

Stakeholder Engagement Core



George Demiris, PhD, FACMI



Lisa M. Walke, MD, MSHA

Internal Advisory Board (IAB)



John Holmes, PhD, FACE, FACMI

The Internal Advisory Board (IAB) plays an important role in providing perspective and detailed advice and recommendations to the leadership team and the core directors. The IAB is chaired by Dr. John Holmes who is a Professor of Informatics and Epidemiology with significant experience in artificial intelligence and clinical decision support. We have assembled a team of local Penn experts representing three key areas of expertise. The first area, Biomedical Informatics and Artificial Intelligence, includes Drs. John Holmes (Professor of Informatics, AI expert), Ross Koppel (Professor of Sociology, EHR expert), Konrad Kording (Professor of Computer Science and Neuroscience, AI expert), Insup Lee (Professor of Computer Science and Engineering) and Danielle Mowery (Chief Research Information Officer). The second area, Geriatrics and Medicine, includes Drs. Mark Neuman (Anesthesiologist specializing in older adults), Matt Press (Medical Director of Primary Care), and Ramy Sedhom (Palliative Care, Geriatric Oncology, Penn Medicine Princeton Health). The third area, Home Care, includes Danielle Flynn (Director, Penn Medicine Home Health), Nancy Hodgson (Professor of Nursing), Bruce Kinosian (Division of Geriatrics), and Brian Litt (Director, Penn Center for Health, Devices, and Technology).

INNOVATION FELLOW SPOTLIGHT:

Chaerin Lee

Current PhD student
School of Nursing



Tell us about your research interests. Describe some of your research projects.

I am a first-year PhD student in Nursing at the University of Pennsylvania with a focus on improving transitional and long-term care for older adults. My research interests center on how subtle or "ignored" clinical data can be recognized and integrated into care to better preserve dignity and prevent adverse events. For example, I am interested in nonverbal signals such as facial expressions, gestures, and posture, which often reflect discomfort or decline but are overlooked in routine practice. I am also exploring how ambient sensor data and digital health tools can be embedded into nursing workflows to capture these signals in real time and support decision-making. I am presently engaged in research on transitional care interventions focused on sepsis survivorship and fall prevention, where I am learning how interdisciplinary collaboration and patient-centered design can shape more effective models of care. Moving forward, my goal is to develop technology-informed strategies that enable nurses to respond to overlooked signals, strengthen continuity of care, and improve the everyday experience of older adults in care settings.

How do you envision the role of AI and technologies in supporting aging?

I see AI and technology as tools that can expand the scope of nursing care for older adults. AI systems are uniquely capable of continuously analyzing complex data streams to detect early signs of decline that nurses might not be able to observe consistently, such as subtle variations in sleep patterns or mobility. Beyond clinical monitoring, I am especially interested in the potential of AI agents to ease documentation, flag safety concerns, and provide real-time decision support. These functions could free nurses to spend more time on direct, person-centered care at the bedside. At the same time, AI can also enhance the social dimensions of care: conversational agents, for example, may reduce loneliness and facilitate communication for individuals with speech or cognitive limitations. In my view, technology should not replace nursing presence but extend its reach, reinforcing both the physical and emotional aspects of aging care. When guided by principles of equity, privacy, and cultural sensitivity, AI can serve as a partner that strengthens autonomy and connection.

What do you see as some of the greater opportunities and challenges for the future?

Looking ahead, one of the greatest opportunities lies in shaping technologies that genuinely respond to the needs of nurses and older adults. When thoughtfully integrated, AI has the potential to reduce preventable hospitalizations, ease workforce strain, and make care more proactive by highlighting risks before they escalate. These advances could also create space for nurses to focus on therapeutic relationships and the dignity of patients, which are central to holistic practice. However, realizing this vision requires addressing significant challenges. If tools are designed without input from frontline nurses, they risk creating additional workload or introducing data that is not clinically meaningful. Unequal access to technology could also widen disparities, particularly in long-term care environments with limited resources. In addition, privacy concerns and ethical questions about surveillance must be carefully managed to sustain trust. The challenge for the future is not only technological development but also ensuring alignment with nursing values, so that innovation enhances human connection rather than diminishes it.



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Artificial Intelligence and
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INTRODUCING OUR 2025-2026 YR5 PILOT AWARDEES



Zhe He

Developing a Multi-Agent AI
System for Explaining Lab
Results to Older Adults

Florida State University



Kathryn Pollak

CounterforceAI: AI-Powered
Health Insurance Appeals
Generator

Duke University



Marie Brodsky

WISE Connect AI:
Personalized Local Support
for Aging in Place

WISE Cities, Inc.



Ravi Karkar

Conversational AI Agents to
Support Mental Wellbeing of
AD/ADRD Caregivers

University of Massachusetts
Amherst



Angela Bradbury

GRACE: A Generative AI
Clinical Chatbot to Support
APOE Testing

University of Pennsylvania



Nipun Chopra

StepAhead: Breaking Free
from Freezing of Gait with
Augmented Reality

DexTech, Inc.



Tina Sadarangani

AI-ge of Nutrition – AI
Nutrition Support for Persons
with Dementia in Adult Day
Centers

New York University



Karla Washington

A Synthetic Data Approach to
Catalyzing Innovation in
Dementia Caregiver Support

Washington University
in St. Louis



Seyed Reza Mahmoodi

AI-Integrated Nanowell
Biosensors for Multimodal
Detection of NPD Biomarkers

University of Denver



Hong Qin

Knowledge-Augmented
Genomics Transformers for
Mechanistic Links to AD
Dementia

Old Dominion University
Research Foundation



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CLICK HERE TO VIEW OUR
2025-2026 YR4 PILOT AWARDEES
LOOK BOOK



Min Ji Kwak

Detection of Adverse Drug
Event Using NLP Among Older
Adults with Heart Failure

University of Texas Health
Science Center at Houston



Katherine Kim

A Novel Digital Twin for
Chronic Care Coordination
and Healthy Aging

Health Tequity LLC



Nili Solomonov

Scalable subtyping for
personalized assessment of
late-life social disconnection

Weill Cornell Medicine



Nancy Hodgson

Using AI to predict depression
& burden AD/ABRD
caregiving conversations

University of Pennsylvania



Bin Huang

AI-Driven Chatbot to Navigate
Cognitive Care Plan for
Persons with AD/ABRD

BrainCheck



Kyra O'Brien

WATCH (Warning Assessment
and Alerting Tool for
Cognitive Health)

University of Pennsylvania



Emily Moin

Determinants of access to
and outcomes following
specialized palliative care for
patients with ADRD

University of Pennsylvania



Rory Boyle

Understanding aging and
ABRD disparities using a
representative epigenetic clock

University of Pennsylvania



Vijaya Kolachalama

AI-based tool for mixed
dementias

Boston University



Mehmet Kurt

An explainable deep learning
framework for brain age
prediction in AD

University of Washington



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2024-2025 PILOT AWARDEES
LOOK BOOK



Xina Quan

Improved algorithms for
wearable, passive,
noninvasive BP monitoring
for seniors

PyrAmes



Soheyla Amirian

AI-powered Web Application
to Analyze Knee Joint Space
for Aging Population

Pace University



Rui Zhang

Task-Oriented Multimodal
Conversational AI for
Assisting Seniors with Daily
Tasks

Penn State University



Chun Lim

Mobile technology as a
cognitive biomarker of
Alzheimer's disease

Beth Israel Deaconess
Medical Center (BIDMC)



Mohammad H. Mahoor

Building Deep Digital Twins
for Prediction of AD/ADR/MCI
in Older Adults

DreamFace Technologies, LLC



Ab Brody

Aliviado Dementia Care
Machine Learning Algorithm
Development for Caregiving

New York University



Nicholas Kalaitzandonakes

AI/ML Analyses of Mobility
Changes Among Elderly Using
Continuous Gait Data

Foresite Healthcare



Daniel Press

Developing a Home Cognitive
Vital Sign to Detect Cognitive
Changes AD

Beth Israel Deaconess
Medical Center (BIDMC)



Trent M. Guess

Motor function assessment for
mild cognitive impairment,
frailty, and fall risk

University of Missouri



Hualou Liang

Detecting Cognitive
Impairment using Large
Language Models from Speech

Drexel University



Jindong Tan

MUSICARE-VR: Music
Intervention with Virtual
Reality for Alzheimer's Care

University of Tennessee,
Knoxville

PILOT IN THE SPOTLIGHT:

Developing a Home Cognitive Vital Sign to Detect Cognitive Changes AD



PI: Daniel Press, MD
Associate Professor of Neurology
Harvard Medical School
Chief, Division of Cognitive
Neurology Beth Israel Deaconess
Medical Center



John Torous, MD
Director, Digital Psychiatry
Division Beth Israel
Deaconess Medical Center
Instructor in Psychiatry
Harvard Medical School

TELL US ABOUT YOUR PROJECT AND WHAT YOU HAVE DONE THIS YEAR.

Patients with Mild Cognitive Impairment (MCI) and Mild Alzheimer's Disease (AD) can have daily fluctuations in their cognitive abilities. These changes can potentially indicate a serious health condition such as delirium or ARIA, a potentially life-threatening side effect of amyloid removal therapies. Unfortunately, no clinical tools for measuring cognitive function are currently available to frequently collect data on and monitor cognition at home. We have designed a simple spatial working memory test, the D-Cog, that can be performed regularly at home in under 2 minutes and have integrated the D-Cog into a publicly available platform (mindLAMP) that allows for remote monitoring. For 6 months, 15 MCI/AD patients and 15 cognitively normal controls are asked to complete the D-Cog daily, and we will analyze participant compliance, day-to-day score variation, and more gradual changes over months that might indicate disease progression. So far, we have enrolled 13 MCI/AD participants and 5 control participants; we expect to complete enrollment in the next few months, and complete data collection 6 months following that.

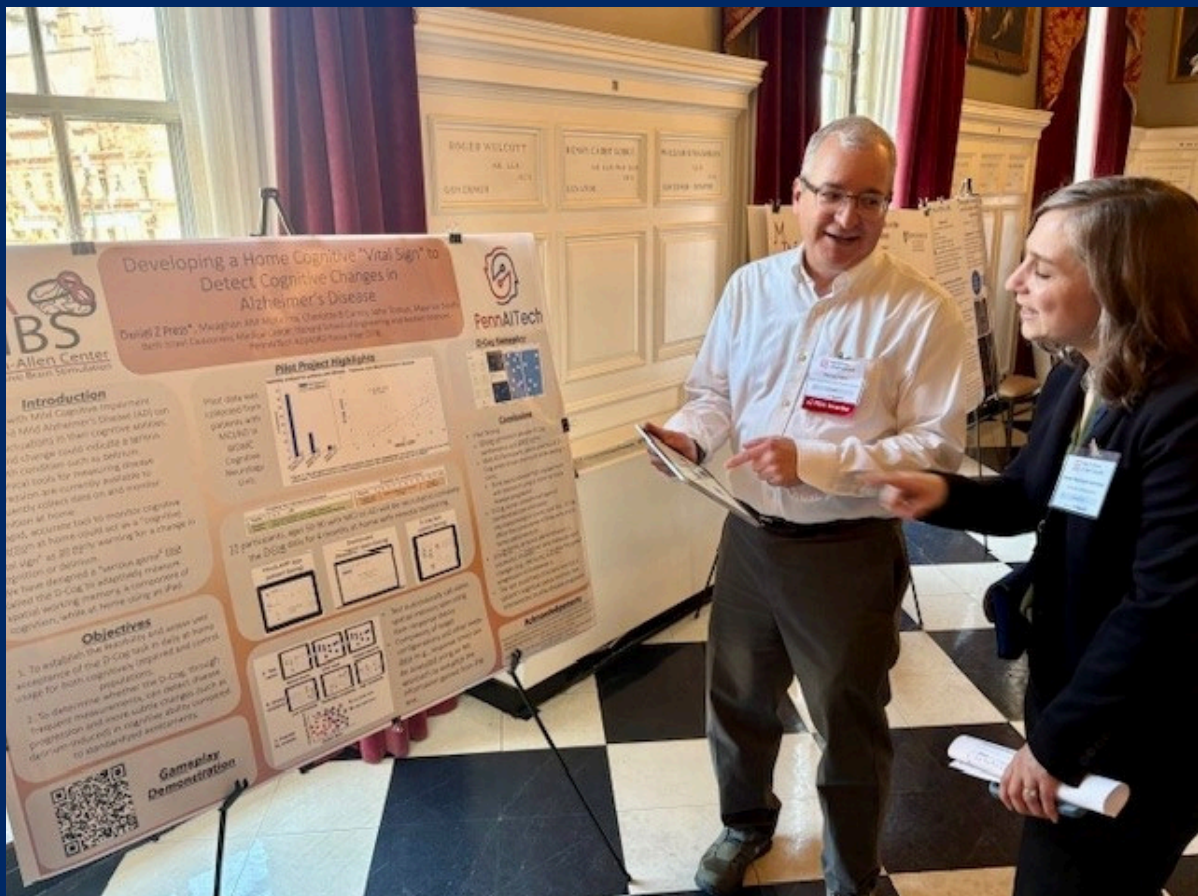
WHAT ARE THE LONG TERM GOALS FOR YOUR RESEARCH?

The primary goal of the task is to enhance care and monitoring of patients with MCI or AD through regular home assessments of cognition to detect acute and chronic changes. Daily measurements, even of a relatively crude cognitive measure, can be extremely informative in measuring disease progression, and detecting untoward events such as ARIA. Following validation of the task against other standardized cognitive tests, we hope to demonstrate the advantages of using a simple digital test compared to lengthier, pencil and paper tests that are performed infrequently in evaluating people for cognitive issues. We plan on making the D-Cog test freely available to the public on the mindLAMP app, for self-monitoring of cognitive status. In the future, we hope to integrate this into clinical systems to allow physicians to monitor their patient's cognitive status while at home.

HOW DO YOU ENVISION THE ROLE OF AI AND TECHNOLOGIES IN SUPPORTING AGING?

The major goal of using Machine Learning and AI analyses in this study is to dramatically enhance the information gathered by the task through a supervised learning approach, using the rich data set that the D-Cog test collects. The advantage of technology-based cognitive testing is the ability to collect data other than just scores (e.g. response time, complexity of task), as well as the possibility for patients to self-administer these tests. With the assistance of AI and Machine Learning, a significant amount of information is newly available to inform our understanding of performance on cognitive testing. In addition, AI can be used to automatically detect results raising concern for delirium, ARIA, or other conditions and notify clinicians or family members of these cognitive changes which might otherwise be missed. Public access to cognitive testing technology improves accessibility to healthcare and allows for a more data-driven approach to the detection of cognitive impairments.

Beth Israel Lahey Health 
Beth Israel Deaconess Medical Center



Daniel Press presents the study poster at the a2 National Symposium in Boston, MA.

PennAITech co-sponsored
The Institute on Aging's
Sylvan M. Cohen Annual
Research Retreat and Poster
Session,

"Aging Reimagined:
Innovation in the Era of AI"
at the University of Pennsylvania
on November 21, 2025.
Bringing together over 100
in-person and 50 virtual
participants.

Read the full recap in the IOA's
blog post here:
<https://www.med.upenn.edu/aging/nov2025retreat.html>

Includes links to presenter bios
and video presentations plus
a listing of all poster presenters -
several from our pilot awardees
and Innovation Fellows.



Thank you to Jason Kavulich, Pennsylvania Secretary of Aging for Opening Remarks



MEET THE SPEAKERS



Amanda Lazar, PhD
University of Maryland



Ab Brody, PhD, RN, FAAN
New York University



Aidong Zhang, PhD
University of Virginia



Maria Valero, PhD
Kennesaw State University



Zhi Huang, PhD
University of Pennsylvania



Daniel Z. Press, MD
Beth Israel Deaconess Medical Center



Trent Guess, PhD
University of Missouri



Gary Weissman, MD, MSHP
University of Pennsylvania



Nancy Hodgson, PhD, RN, FAAN
University of Pennsylvania



Rory Boyle, PhD
University of Pennsylvania



David Yonce
Cogwear

A SYLVAN M. COHEN ANNUAL RETREAT AND POSTER SESSION
Hosted by the Institute on Aging and PennAITech

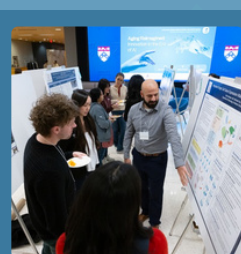
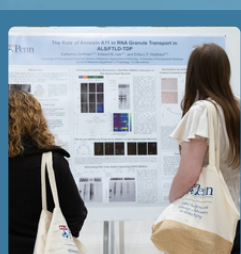
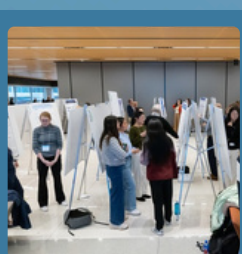




Thank you to keynote speaker, Amanda Lazar for setting the tone of the retreat and challenging the participants and presenters to continue "Redrawing the Boundaries of Innovation: Making AI Work in Real Life."

Throughout the retreat we heard from PennAITech Pilot Awardees from our first four cohorts. They had opportunities to present their work and next steps.

Additionally, there were 30 posters available for view throughout the event.



Congratulations to PennAITech Innovation Fellow and University of Pennsylvania School of Nursing PhD Student Oonjee Oh for receiving the first prize for her poster "Artificial Intelligence in Hospice Dementia Care: Perspectives of Hospice Staff and Family Caregivers" in the "Design and Implement AI Solutions" Category at the retreat!

Artificial Intelligence in Hospice Dementia Care: Perspectives of Hospice Staff and Family Caregivers
Oonjee Oh & George Demiris
University of Pennsylvania School of Nursing

Background		Results	
Categories	Subcategories	Example quotes	
Perceived Usefulness	Benefits	"If I could collect patterns that the patient is saying, and use this, when they're talking, like this, sometimes they need this."	
	Concerns	"I think that the work we do is an integral in hospice, that I think, how would the patient with a family respond to something that with more than human. The humanity part of us, how would that be captured in AI?"	
Perceived Ease of Use	Concerns	"I think for dementia, I think earlier processing isn't really the medium of choice for when you're engaged in a therapeutic activity with someone who has advanced enough dementia that they'd be an hospice."	
	Benefits	"I worry older generations, what people who are caregivers now are in their 50s or 60s and they're pretty pretty they play with technology, I don't know."	
Guiding the New Wave of the Future	Concerns	"I would always want to keep in mind the caregiver's perspective in what I do, I also don't forget patient with dementia."	
	Benefits	"I would want something else to say, 'We have this team, we are going to monitor all of this, I just think of that, the ethics of it.'"	
Discussions		Funding	
<ul style="list-style-type: none"> • Caregivers and staff identified dementia specific opportunities and concerns of AI being used in the context of hospice. • Critical considerations for designing AI systems that impact seriously ill PwD include recognizing the heterogeneity of the condition and integrating the perspectives of direct caregivers. 		<ul style="list-style-type: none"> • This study was supported in part by: <ul style="list-style-type: none"> • The National Institute on Aging of the National Institutes of Health (Grant No. 1R01AG069936; PI: G. Demiris) • A Student Grant Award from the Office of Nursing Research at Penn Nursing (PI: O. Oh) The content is solely the authors' responsibility and does not represent the official views of the funder. 	

NEWS FROM THE FIELD

WHAT'S HAPPENING IN AI?

Global push for safe and equitable health AI

The World Health Organization and the Republic of Korea co-hosted AIRIS 2025 in Incheon, bringing together regulators, industry, and researchers to align on “safe, effective, ethical, and equitable” AI in health across the medical product lifecycle. The meeting emphasized inclusive, accountable governance and shared regulatory frameworks. Read more:

<https://www.who.int/news/item/24-10-2025-countries--regulators-and-partners-urge-a-collaborative-approach-to-advance-safe-and-equitable-ai-in-health>

PAHO releases practical guide to AI prompt design for public health

The Pan American Health Organization published a new guide on how to design AI prompts that generate reliable, culturally appropriate public-health content. The resource targets agencies using generative AI to draft alerts, educational materials, and plain-language summaries, stressing that good prompt design is essential for trustworthy outputs.

Read more:

<https://www.paho.org/en/news/20-10-2025-paho-publishes-guide-designing-artificial-intelligence-instructions-public-health>

AMA launches Center for Digital Health and AI

The American Medical Association announced a Center for Digital Health and AI to ensure physicians shape the development, regulation, and implementation of AI tools. The Center will focus on policy and regulatory leadership, clinical workflow integration, education, and cross-sector collaboration, highlighting both growing enthusiasm and ongoing concerns among clinicians.

Read more:

<https://www.ama-assn.org/press-center/ama-press-releases/ama-launches-center-digital-health-and-ai>

Health systems double down on AI to redesign care delivery

A national survey by Chartis, summarized in Healthcare Dive, found that 9 in 10 health-system leaders are prioritizing digital and AI tools to improve access, forecast demand, and manage capacity—viewing AI as central to more proactive care models in an increasingly unaffordable system. Read more: <https://www.healthcaredive.com/news/health-system-leaders-prioritize-ai-healthcare-challenges-chartis/804539/>

SELECTED PUBLICATIONS

WORK BY OUR TEAM

01.

Recognizing Structural and Social Determinants of Health in the Diagnosis and Care of Dementia.

Stites SD, Midgett S, Patel N, Halberstadter K, Schumann R, Streitz ML, Shi Y, Morris JC, Flatt J, Glover CM, **Mechanic-Hamilton D**. Dementia (London). 2025 Nov 24;14713012251397182. doi: 10.1177/14713012251397182. Online ahead of print. PMID: 41284335

03.

Diurnal variation of wearable device-based heart rate variability in the Chronic Renal Insufficiency Cohort study.

Skarke C, Yang W, Sha D, Lahens NF, Isakova T, Unruh M, Deo R, Carmona-Powell E, **Holmes JH**, Ficarra E, Chen J, He J, Rincon-Choles H, Shah V, Hsu CY, Anderson AH, Lash JP, Rahman M; CRIC Study Investigators. NPJ Digit Med. 2025 Nov 13;8(1):653. doi: 10.1038/s41746-025-02010-5. PMID: 41233490

05.

Communicating a Diagnosis of Mild Cognitive Impairment or Dementia.

O'Brien K, **Largent EA**, **Karlawish J**. JAMA. 2025 Sep 16;334(11):1014-1015. doi: 10.1001/jama.2025.13006. PMID: 40736397

02.

From prompt engineering to agent engineering: expanding the AI toolbox with autonomous agentic AI collaborators for biomedical discovery.

Moore JH, Tatonetti NP. BioData Min. 2025 Nov 13;18(1):78. doi: 10.1186/s13040-025-00502-4. PMID: 41233899

04.

Plasma Phosphorylated Tau 217 to Identify Preclinical Alzheimer Disease.

Salvadó G, Janelidze S, Bali D, Dolado AO, Therriault J, Brum WS, Pichet Binette A, Stomrud E, Mattsson-Carlsson N, Palmqvist S, Coomans EM, Teunissen CE, van der Flier WM, Rahmouni N, Benzinger TLS, Gispert JD, Blennow K, Doré V, Feizpour A, Rowe CC, Alcolea D, Fortea J, Villeneuve S, Johnson SC, Rosa-Neto P, Petersen RC, Jack CR Jr, Schindler SE, Suárez-Calvet M, Ossenkoppele R, Hansson O; **ADNI, ALFA, and PREVENT-AD Study Groups**. JAMA Neurol. 2025 Nov 1;82(11):1122-1134. doi: 10.1001/jamaneurol.2025.3217. PMID: 40952756

06.

Germline genetic scores associated with cancer gene expression and immune responses across multiple cancer types.

Cha S, Shim I, Jung SH, Kim B, Kim S, Park MS, Cho H, Nam Y, Park WY, **Kim D**, Won HH. Commun Med (Lond). 2025 Jul 1;5(1):265. doi: 10.1038/s43856-025-00958-9. PMID: 40593119

PUBLICATIONS

07.

Caregiver-reported barriers and facilitators to hospice enrollment for persons with dementia: A systematic review of qualitative evidence. Oh O, Ulrich CM, **Massimo L**, **Demiris G**. Palliat Med. 2025 Oct;39(9):948-964. doi: 10.1177/02692163251353013. Epub 2025 Jul 26. PMID: 41044929

09.

Development and Validation of an App Rating System for Caregiver Financial Management Apps. Cho E, Naylor MD, **Demiris G**, Winnay SS, Cibildak A. Sage Open Aging. 2025 Sep 24;11:30495334251379916. doi: 10.1177/30495334251379916. eCollection 2025 Jan-Dec. PMID: 41020060

11.

Voice for All: Evaluating the Accuracy and Equity of Automatic Speech Recognition Systems in Transcribing Patient Communications in Home Healthcare. Xu Z, Vergez S, Esmaeili E, Zolnour A, Briggs KA, Scroggins JK, Hosseini Ebrahimabad SF, Noble JM, Topaz M, Bakken S, **Bowles KH**, Spens I, Onorato N, Sridharan S, McDonald MV, Zolnoori M. Stud Health Technol Inform. 2025 Aug 7;329:1904-1906. doi: 10.3233/SHTI251273. PMID: 40776290

13.

Measurement of functional status in primary care: the role of the interprofessional team. Zamora-Rogoski KA, **Brown RT**, Rizzo A, Nicosia FM. J Interprof Care. 2025 Jul 28;1-9. doi: 10.1080/13561820.2025.2537124. Online ahead of print. PMID: 40726029

08.

A one-shot, lossless algorithm for cross-cohort learning in mixed-outcomes analysis. Li R, Benz L, Duan R, Denny JC, Hakonarson H, Mosley JD, Smoller JW, Wei WQ, Lumley T, Ritchie MD, **Moore JH**, Chen Y. Patterns (N Y). 2025 Jul 30;6(9):101321. doi: 10.1016/j.patter.2025.101321. eCollection 2025 Sep 12. PMID: 41040961

10.

Temporal Modeling of Amyloid and Tau Trajectories in Alzheimer's Disease using PET and Plasma Biomarkers. Brown CA, Cousins KAQ, Korecka M, McGrew E, Chen-Plotkin A, Detre JA, McMillan CT, Lee EB, Das SR, **Mechanic-Hamilton D**, Yushkevich PA, Nasrallah IM, Shaw LM; Alzheimer's Disease Neuroimaging Initiative; Wolk DA. medRxiv [Preprint]. 2025 Sep 7:2025.09.04.25334935. doi: 10.1101/2025.09.04.25334935. PMID: 40950425

12.

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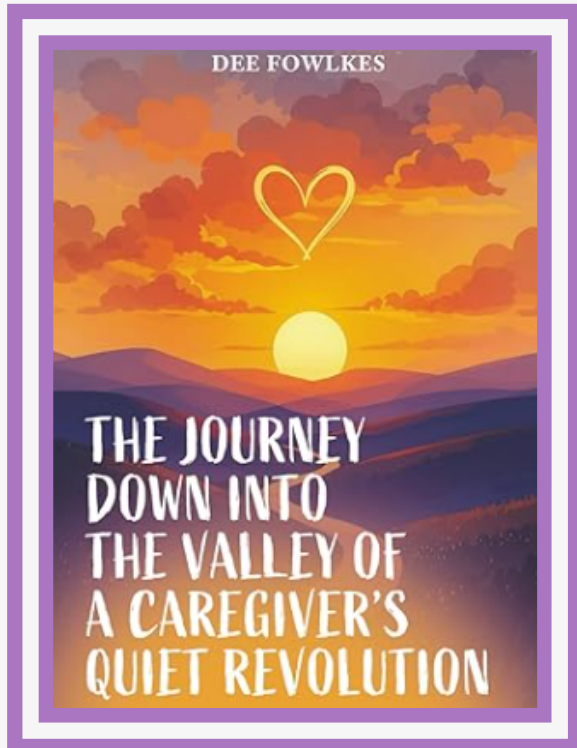
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Dee Fowlkes is a stakeholder of the Johns Hopkins AITC and has been a family caregiver for over 25 years to her parents and grandparents. Her experience includes being a 24-hour caregiver as well as attended 4 years of intense education about caregiving, dementia, and Alzheimer's Disease. She understands how the different stages affect loved ones and family caregivers at different stages. Dee Fowlkes is an advocate, she spoke before several Maryland hearings concerning the mandatory education of healthcare professionals. Dee is a Certified Johns Hopkins Medical Lay Health Educator and created her own TIZ I Health & Wellness Program for ages 50 and up.



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Please explore our PennAITech Video Library consisting of educational videos covering a broad range of topics from an introduction to Alzheimer's Disease and Related Dementias to Basics of Artificial Intelligence, Machine Learning and Natural Language Processing. The library addresses clinical, technical and ethical implications of designing and deploying AI and other technologies for aging and persons with dementia and their families. The topics include:

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 <p>Introduction to PennAITech with Dr. George Demiris</p>  <p>04:53</p> <p>Introduction to PennAITech</p>	 <p>AD / ADRD: Definitions with Dr. Jason Karlawish</p>  <p>04:31</p> <p>AD / ADRD: Definitions</p>	 <p>Heterogeneity in Neuropsychiatric Symptoms: Challenges and Opportunities with Dr. Lauren Massimo</p>  <p>05:57</p> <p>Heterogeneity in Neuropsychiatric Symptoms: Challenges and Opportunities</p>
 <p>Understanding Functional Status Among Older Adults with Dr. Rebecca Brown</p>  <p>08:24</p> <p>Understanding Functional Status Among Older Adults</p>	 <p>Generative AI and Aging with Dr. George Demiris</p>  <p>06:10</p> <p>Generative AI and Aging</p>	 <p>AI and Machine Learning for ADRD with Dr. Li Shen</p>  <p>07:42</p> <p>AI and Machine Learning for ADRD</p>
 <p>Automated Machine Learning and Best Practices in Data Science with Dr. Ryan Urbanowicz</p>  <p>05:47</p> <p>Automated Machine Learning and Best Practices in Data Science</p>	 <p>Interprofessional Robotics Research with Dr. Pamela Z. Cacchione</p>  <p>13:45</p> <p>Interprofessional Robotics Research</p>	 <p>Ethical Considerations in Human Subjects Research with Dr. Emily Largent</p>  <p>06:39</p> <p>Ethical Considerations in Human Subjects Research</p>
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