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BACKGROUND & AIM

Continuous glucose monitoring is essential in diabetes management, but global adoption is hindered due to economic costs and discomfort. A non-invasive, cost-effective, and highly accurate continuous glucose monitor (CGM) would support the patient population and increase adoption. This study evaluates the accuracy of a multi-frequency RF sensor for non-invasive blood glucose (BG) monitoring in people with prediabetes and Type 2 diabetes using venous blood as a reference.

METHODS

- The study employed a novel RF sensor that rapidly sweeps frequencies from 500 MHz to 1500 MHz.
- Participants' forearms were scanned for up to three hours during an Oral Glucose Tolerance Test (75g).
- From 22 participants, 1,430 venous blood samples were collected using a peripheral intravenous catheter (PIVC) every five minutes and analyzed using a blood glucose monitoring test system (StatStrip, Nova Biomedical) as reference values.
- Using the RF data, a CatBoost machine learning (ML) model was trained on 80% of these values (1,143 paired values) to estimate BG as a dependent variable. This model was applied to the remaining 20%, held-out test dataset (287 paired values) and a Mean Absolute Relative Difference (MARD) was calculated.

A New Machine Learning Model and Expanded Dataset for a Non-Invasive BGM

Dominic Klyve¹, James H. Anderson², Kaptain Currie², Connor Bui², Fazle Karim², Virend K. Somers³ ¹Department of Mathematics, Central Washington University, Ellensburg, WA, USA, ²Know Labs Inc., Seattle, WA, USA, ³Mayo Clinic, Rochester, MN, USA

RESULTS

The CatBoost model returned an overall MARD of 11.8% ± 1.5% on the test dataset. We observed similar accuracy in normoglycemic (12.1% ± 1.8%) and hyperglycemic ranges (11.0% ± 2.3%). Notably, 100% of estimates fell in Risk Grade A or B in a Surveillance Error Grid analysis of model accuracy.

Glucose Range (mg/dL)	n	MARD(%)	± 15%	± 20%
Hypoglycemic (<70)	1	$5.5 \pm nan$	100.0 ± 0.0	100.0 ± 0.0
Normoglycemic (70-180)	226	12.1 ± 1.8	77.9 ± 0.5	85.4 ± 0.5
Hyperglycemic (>180)	60	11.0 ± 2.3	76.7 ± 1.1	85.0 ± 0.9
Total	287	11.8 ± 1.5	77.7 ± 0.5	85.4 ± 0.4

Table 1: MARD values and percentages falling within 15% and 20% of the reference value by glycemic status. Error values on the MARD give the 95% *t*-Confidence interval. Error bars on the ±15% and ±20% give the 95% z-Confidence interval for proportions.

Presenting Author Contact Details: Virend Somers, M.D., Ph.D. | somers.virend@mayo.edu | Mayo Clinic, Cardiovascular Medicine, Rochester, Minnesota 55905 | 507-255-1144

Disclosure of Conflicts of Interest: DK and VS are consultants for and own stock in Know Labs. JA, KC, CB, and FK are employed by and have stock options in Know Labs.

The ML techniques applied to data collected by this RF sensor hold promise for the non-invasive measurement of **BG.** Ongoing studies will include expanding the participant population and continuing model refinement.



Figure 1: Surveillance Error Grid analysis comparing 287 Know Labs' RF sensor BG estimations in the test dataset to the venous blood reference.

CONCLUSION





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