

Systematic Assessment of Hyperdimensional Computing for Epileptic Seizure Detection

Una Pale, Tomas Teijeiro, and David Atienza*

*Embedded Systems Laboratory (ESL), Swiss Federal Institute of Technology Lausanne (EPFL)





- Chronic neurological disorder
 - Imposes serious health risks and restrictions on daily life
- EEG (electroencephalography) or IEEG (intracranial EEG) recordings
 - Complex and highly variable
- Challenges for continuous monitoring and detection
 - High sensitivity but with almost no false positives
 - Low complexity and memory requirements to be implementable on wearable devices
 - Low power requirements to allow extensive battery lifetime





Hyperdimensional computing

- Promising new machine learning (ML) approach inspired by neuroscience
 - High-dimensional randomized representations of data rather than scalar numerical values
- Based on representing data as vectors with very high dimensionality
 - Usually > 10000 values, binary



- Enables various properties and operations on such vectors
 - Any two random vector are orthogonal
 - Two summed vectors are more similar to their sum then any other random vector
 - Binding information (by summing)
 - Bundling information (by XOR)

Building vector representation of data class







Hyperdimensional computing workflow



AIM OF THIS WORK

- Compare different approaches for feature encoding to HD on epilepsy detection task
- Evaluate performance, as well as computational and memory complexity





Data encoding approaches

Two already applied on epilepsy

- Local binary patterns (LBP)
- Raw amplitude of each sample (RawAmpl)

Several new ones

- FFT of moving windows (FFT)
- Individual feature value of each window (SimpleFeat)
 - Amplitude, Entropy, CWT
- Combining multiple features
 - 3Feat: Ampl&Entropy&CWT
 - 45Feat

Data encoding from one discrete data window







Experimental setup

DATASETS

- The CHB-MIT database
 - Scalp EEG dataset, 24 subjects
 - 183 seizures, with an average of 7.6 ± 5.8 seizures per subject

SWEC-ETHZ

- IEEG, 16 patients
- 100 seizures, with an average of 6.3 ± 3.8 seizures per subject
- Datasets preprocessing
 - Personalized approach, using leave one seizure out
 - Balanced subsets of original dataset

EVALUATION

- Labels postprocessing
 - Step1: moving average
 - Step2: merging seizures
- Performance
 - Level of episodes and level of duration
 - Sensitivity, precision, F1 score
- Computational complexity
 - Number of SUM and XOR operations
 - Relative time for calculation
- Memory complexity
 - Memory needed to store all HD vectors





Results: Label postprocessing

- Improves performance at the episode level
 - First step: up to 41.2% for EEG and 41.5% for IEEG
 - Second step: up to 65.5% for EEG and 70.9% for IEEG
- Minor improvement on the seizure duration level
 - Up to 4.0% for EEG and 6.4% for IEEG after both steps



Ampl Entr CWT 3Feat45Feat FFTRawAmpLBP



- Differences between approaches much bigger before label postprocessing
- For episode level
 - The best performance by approaches including amplitude information
 - 45Feat better then 3Feat
 - LBP, CWT quite bad
- For duration level
 - Less variable between approaches





- LBP, FFT and 45Feat approaches have biggest memory requirements
- The ratio between the best and worstcase memory requirements is 3.8x
- Immense difference between approaches
 - Ampl, Entropy, and FFT are very computationally efficient
- Sources of complexity
 - HD vectors operations: RawAmpl and LBP
 - Feature calculation: CWT, 3Feat and 45Feat
- The ratio between the best and worst-case
 - In terms of number of operations is 1056x
 - In terms of computation time is 622X







- Different feature encoding strategies on HD vectors were compares
 - For detection of epileptic seizures
- Significant difference in performance especially on the episode level
 - Postprocessing reduces differences
- Computational complexity differences between approaches are much bigger than concerning memory than for computational complexity
 - Approaches with higher performance (such as RawAmpl or 45Feat) might not ideal for wearable applications due to high memory or computational requirements
- For a wearable implementation, feature selection and decisions based on several aspects are necessary
 - Results confirmed on two datasest: EEG and IEEG







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Speaker Email: <u>una.pale@epfl.ch</u>

