

ReBeatICG: Real-time Low-Complexity Beat-to-beat Impedance Cardiogram Delineation Algorithm

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- Cardiovascular diseases (CVDs) are globally the highest cause of death
- Hemodynamic parameters are vital to estimate cardio-respiratory activity and evaluate the subject's condition
 - An unobtrusive monitoring of such parameters is highly useful
- Noninvasive techniques to obtain the hemodynamic parameters
 - Doppler echocardiography, CO2 breath analysis, seismocardiography, phonocardiography
 - Impedance cardiography (ICG)







- Impedance based technique
 - Decrease in impedance is related to an increase in blood flow
 - First derivative of the impedance signal
- A noninvasive, simple, and low-cost technique
- Many useful hemodynamic parameters can be determined from the ICG signal
 - Cardiac output (CO), stroke volume (SV), systolic time intervals, thoracic fluid content ...
- Promising technique for monitoring hemodynamic parameters using wearable devices
 - Requires an accurate and real-time detection of the ICG's characteristic points







ICG characteristic points



https://pubmed.ncbi.nlm.nih.gov/27014612/

 Delineation is challenging due to many variations in the morphology of the ICG signals



https://pubmed.ncbi.nlm.nih.gov/30443441/



SoA delineation algorithms

- Ensemble averaging [1]
- More complex techniques (adaptive filtering [2], wavelet decomposition [3], etc)
- Rely on the synchronously measured ECG signal



- No standardized evaluation metrics for evaluation
- No open source databases that allow the assessment and comparison with previously proposed methods



A new open-access database of annotated ICG signals

[1] A. Sherwood et al., "Methodological Guidelines for Impedance Cardiography," Psychophysiology, 1990

[2] U. R. Zia et al., "Adaptive Noise Cancellation Techniques for Impedance Cardiography Signal Analysis," IJITEE, 2019.

[3] L. Y. Shyu et al., "The detection of impedance cardiogram characteristic points using wavelet transform," Computers in Biology and Medicine, 2004.



A new delineation methodology



- Real-time and low-complexity beat-to-beat delineation
- Relying only on the ICG signal
- Hemodynamic parameters monitoring on wearable devices



A new delineation methodology



Filtering

Savitzky-Golay filter [4]

C peak detection

Adaptive filter lenght selection

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- "Relative energy" preprocessing method
- An adaptation of the REWARD algorithm
 [5] for R peaks detection in the ECG

B peak detection

X-O points detectio

- Defining possible time window for B point
- Search based on derivative analysis together with condition checks

X and O points detection

- Searching for possible X and O points based on derivative analysis
- Selecting optimal X-O pairs based on condition checking following the signal morphology

[4] D. Acharya et al., "Application of adaptive Savitzky–Golay filter for EEG signal processing," Perspectives in Science, 2016.

[5] L. Orlandic et al., "REWARD: Design, Optimization, and Evaluation of a Real-Time Relative-Energy Wearable R-Peak Detection Algorithm," EMBS, 2019



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Experimental setup: Dataset

- Original database
 - During an experimental session of a virtual search and rescue mission with drones [6]
 - ICG and ECG signals from 24 healthy subjects
 - Baseline state and higher level of cognitive workload



Labeld (Unsaved change

tps://link.springer.com/chapter/10.1007/978-3-030-49695-1_26





ICG database

- Database annotation by the cardiologists from the Lausanne University Hospital
- Open access physiological signal labeler software [7]
- 4 blocks of randomly chosen signal segments containing 10 beats from BL and CW tasks of each subject

[6] F. Dell'Agnola et al., "Cognitive workload monitoring in virtual reality based rescue missions with drones", 2020[7] S. Zanoli et al., "Physiological signal labeler," 2021







- Detecting true positives (TPs), false positives (FPs), and false negatives (FNs)
 - Tolerance of ±30ms from annotated point is used

Perfomance metrics

- sensitivity (SE), positive prediction value (PPV), detection error rate (DER), geometric mean (gmean), mean error (*me*), and its standard deviation (σ)
- Hemodynamic parameters
 - Heart rate (HR)
 - Left ventricular ejection time (LVET)
 - Amplitude of the C peak
 - Isovolumetric relaxation time (IVRT)
 - Relative error of parameter value when compared to annotated parameter





Characteristic points delineation

- C points almost perfect detection (gmean 98.6%)
- B, X, and O points bit worse with 94.9%, 90.3% and 84.3% gmean

Hemodynamic parameters

- HR is the most precise
- LVET and IVRT are less precise, but still well within the 30 ms resolution

Challenging comparison with SoA

- Different approaches, don't mention resolution
- Comparison with ±150ms and mean error
- Our perfomance better or equally good

PERFORMANCE OF REBEATICG PER ANNOTATED POINTS

Annot.	Performance measures							
Points	SE [%]	PPV [%]	Gmean [%]	$me \pm \sigma$ [ms]				
B	95.30 ± 5.65	94.48 ± 6.96	94.88 ± 6.28	1.75 ± 0.90				
C	99.09 ± 1.86	98.13 ± 3.44	98.60 ± 2.50	0.12 ± 0.08				
X	90.55 ± 9.51	90.06 ± 9.82	90.30 ± 9.58	1.09 ± 0.35				
0	84.58 ± 15.45	84.08 ± 15.45	84.32 ± 15.39	1.31 ± 0.22				

The tolerance in respect to the reference values is \pm 30ms

QUALITY OF AUTOMATIC CALCULATION OF HEMODYNAMIC PARAMETERS

Parameter	HR	LVET	IVRT	BCampl
Mean absolute error [ms]	0.11 ± 0.54	9.7 ± 4.7	8.3±9.4	
Mean relative error [%]	0.01 ± 0.04	3.6 ± 1.7	10.2 ± 11.0	$3.9{\pm}6.5$





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No lightweight algorithm portable to wearable devices for ICG monitoring



ReBeatICG

- New real-time low-complexity beat-to-beat delineation methodology
- Relying only on the ICG signal for hemodynamic parameters
- High precision delineation of ICG characteristic points and monitoring of hemodynamic parameters

No standard evaluation metrics or database for ICG delineation assesment



ReBeatICG database

- A new open-access database of annotated ICG signals
- Includes 1920 beats, fully (B, C, X and O points) annotated by a cardiologist









Questions?



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