



## MoonLAIT – Leng Lab

# Interview for Research Data Analyst Alice Albrecht February 4th, 2025

#### **Dataset Presentation**

## **Sleep Heart Health Study**



**Dataset:** Sleep Heart Health Study – Visit 1 (SHHS1) **Number of Subjects:** Subsample of 50

#### For Each Subject:

- ➤ EDF File: Contains full Polysomnography (PSG) recordings, from which we will extract key biosignals:
  - **Electrocardiogram (ECG)** Heart activity
  - **Electroencephalogram (EEG)** Brain activity
  - **Electrooculogram (EOG):** Eye movement
  - **Electromyogram (EMG)** Muscle activity
- XML File: Includes annotated sleep data, providing:
  - Sleep stages (e.g., Stage1, REM)
  - **Respiratory events** (e.g., apneas, hypopneas)
  - Arousals and other relevant physiological events
- Subject Information: Includes demographic and physiological data such as age, gender, BMI, and other relevant characteristics.
- Outcome: Contains follow-up data, including vital status (alive or dead) and time since the most recent contact, which can be used for survival analysis.



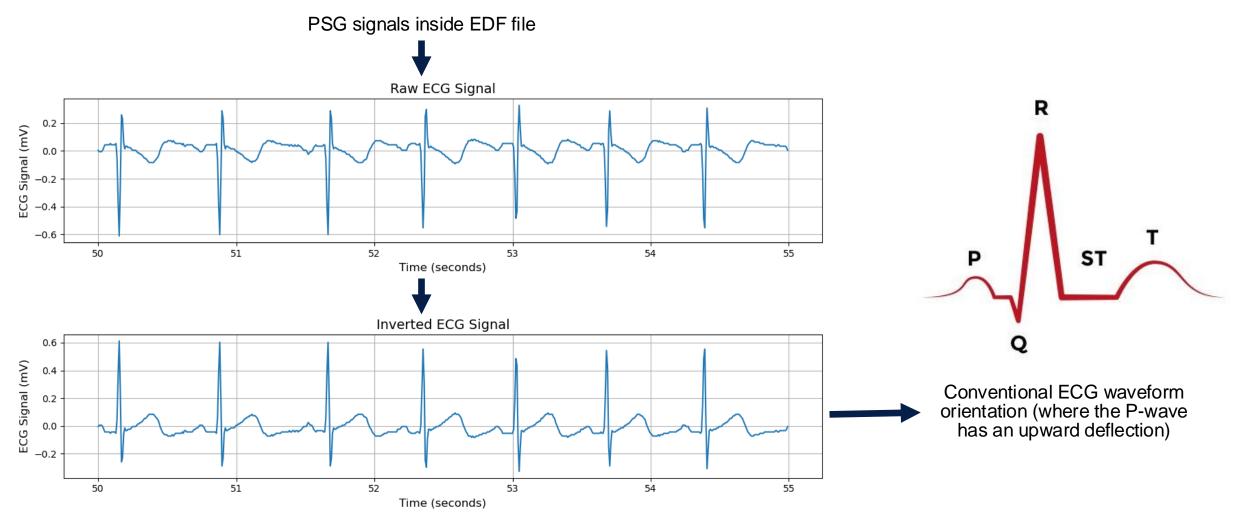
## **Assignment Task 1**

## HRV Metrics Calculation and Survival Analysis for Mortality Prediction





## **Extraction of ECG signal**

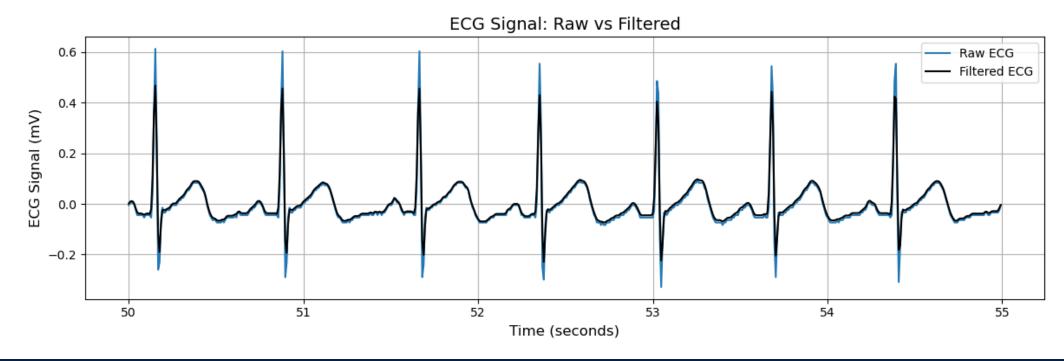






## Filtering of ECG signal

- > Cleaning applied: NeuroKit ecg\_clean function includes:
  - Muscle artifact noise removal
  - Baseline drift correction
  - General signal enhancement for analysis

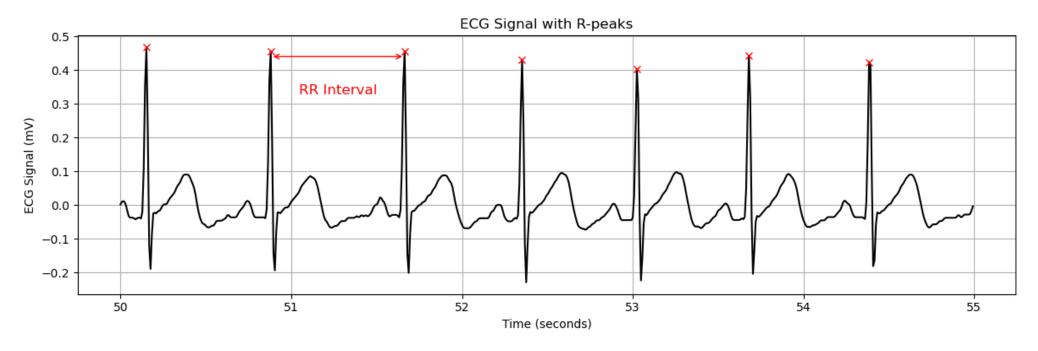






#### **R-Peak Detection and RR-intervals**

- R-peak Detection: NeuroKit ecg\_findpeak function based on Probabilistic Methods-Agreement via Convolution (ProMAC)
- > RR-intervals: Time differences between successive R-peaks.
- NN-intervals: after abnormal RR intervals (> 2.5s) removed

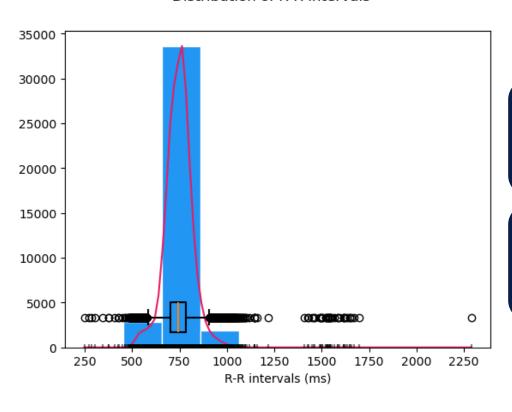






#### **Temporal Analysis for HRV Metrics**

#### Distribution of R-R intervals



#### **AVNN (Average NN Interval)**

Mean time in ms between successive **normal** R-peaks (NN intervals)

## RMSSD (Root Mean Square of Successive Differences)

Reflects short-term HRV by measuring rapid fluctuations in heart rate.

## SDNN(Standard Deviation of NN Intervals)

Measures overall HRV by quantifying **beat-to-beat variability** over a period.

#### pNN50 (Percentage of NN50)

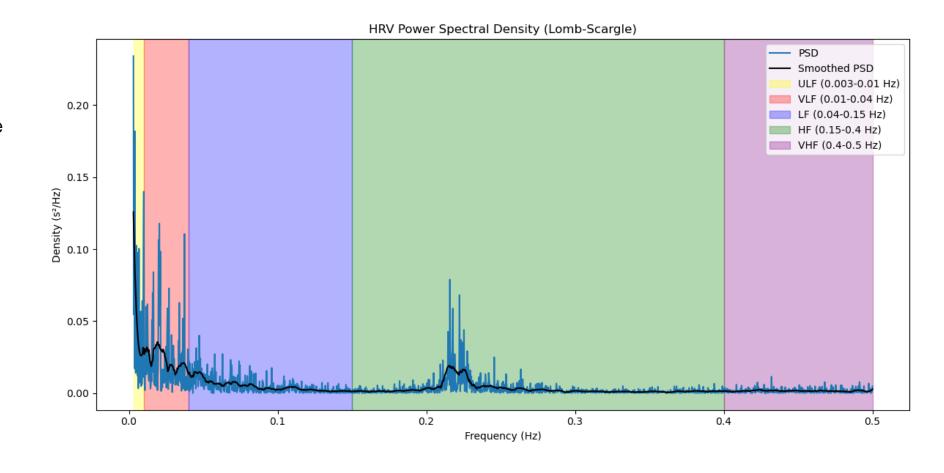
Percentage of consecutive NN intervals that differ by more than 50 ms, indicating parasympathetic activity





#### **Frequency Analysis for HRV Metrics**

- NN intervals are transformed to the frequency domain using the Lomb-Scargle Periodogram, ideal for unevenly spaced data like RR intervals.
- The resulting Power Spectral Density (PSD) reveals how signal power is distributed, allowing calculation of HRV metrics to assess autonomic heart rate regulation.





## **Frequency Analysis for HRV Metrics**

#### **ULF (Ultra-Low Frequency, <0.003 Hz)**

Very slow HRV changes, linked to long-term circadian and metabolic regulation.

#### HF (High Frequency, 0.15-0.4 Hz)

Represents parasympathetic (vagal) activity, closely tied to breathing rate.

#### VLF (Very-Low Frequency, 0.003–0.04 Hz)

Associated with thermoregulation, hormonal activity, and vagal tone.

#### VHF (Very-High Frequency, >0.4 Hz)

Less commonly analyzed, potentially related to **mechanical cardiac processes**.

#### LF (Low Frequency, 0.04-0.15 Hz)

Reflects a mix of sympathetic and parasympathetic activity; often linked to blood pressure regulation.

#### LF/HF Ratio

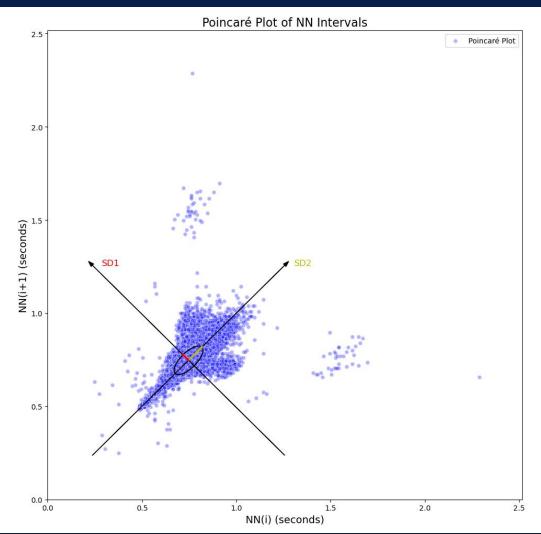
Balance between sympathetic and parasympathetic activity, used as indicator of autonomic nervous system modulation.





#### Task 1

#### Poincaré Plot and Non-Linear HRV Metrics



- The Poincaré plot visualizes the relationship between successive NN intervals, showing nonlinear HRV patterns not captured by linear methods.
- The ellipse illustrate the direction and strength of these HRV components.

#### SD1 (Short-Term HRV)

Reflects **short-term variability** and **parasympathetic activity**.

#### SD2 (Long-Term HRV)

Represents both sympathetic and parasympathetic influences over longer time scales.





**METRCIS** 

## All metrics used for Survival Analysis

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AGE

GENDER

**BODY MASS INDEX (BMI)** 

**CHOLESTEROL** 

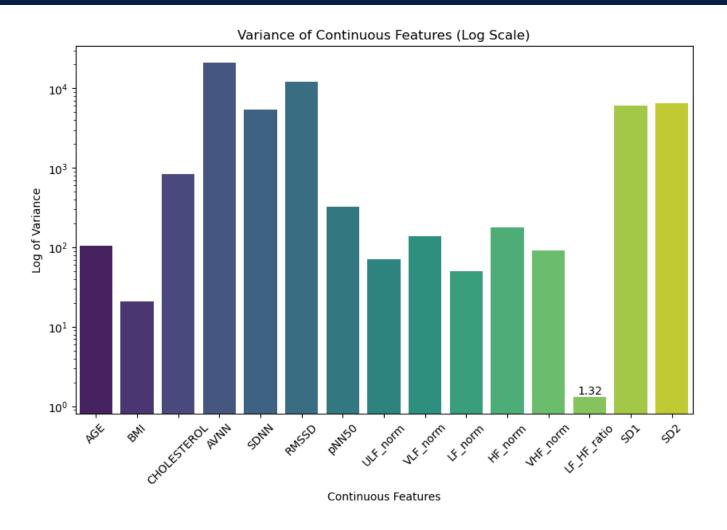
**HYPERTENSION** 

COVARIATES

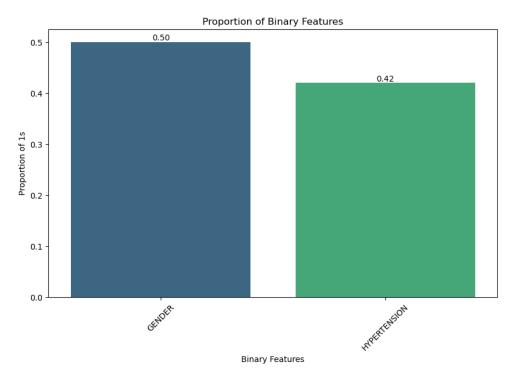
University of California
San Francisco



### **Data Preprocessing: Variance and Balance**



- ➤ High variance for the continuous variable
- Good balance for binary features





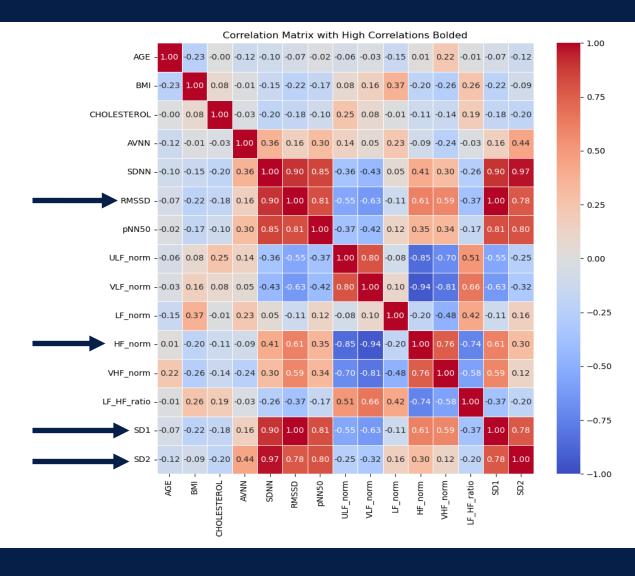


#### Task 1

## **Data Preprocessing: Correlation**

Features to drop to avoid correlation (threshold=0.9)

Note: Cox Proportional Hazards is highly sensitive to correlations between features

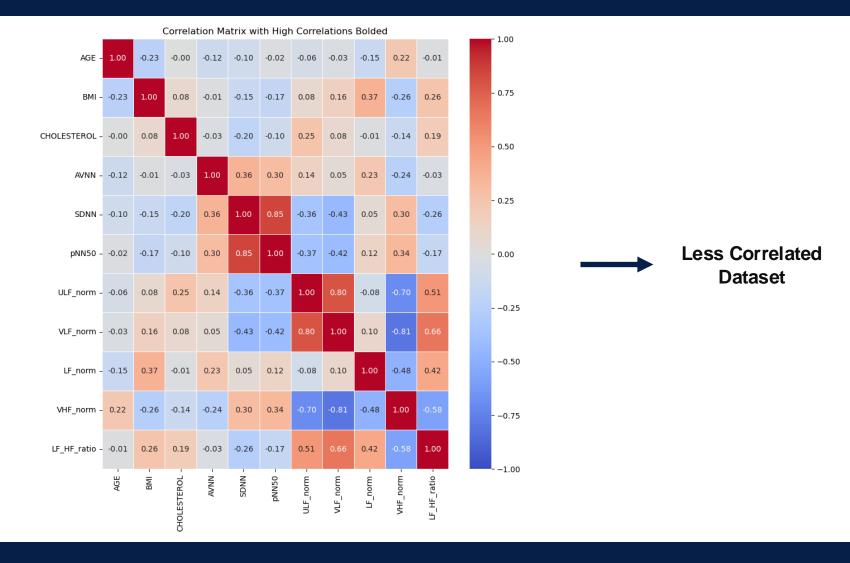






#### Task 1

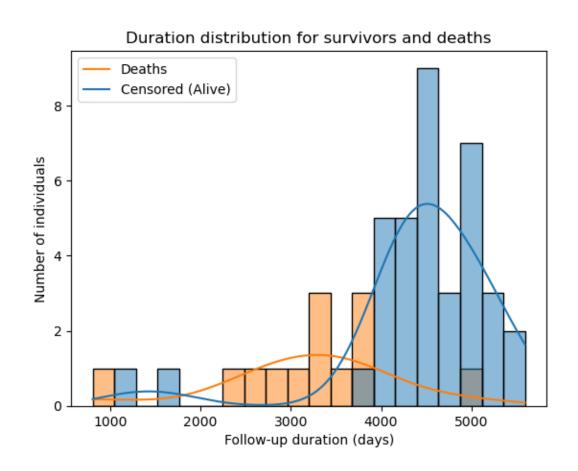
### **Data Preprocessing: Correlation**

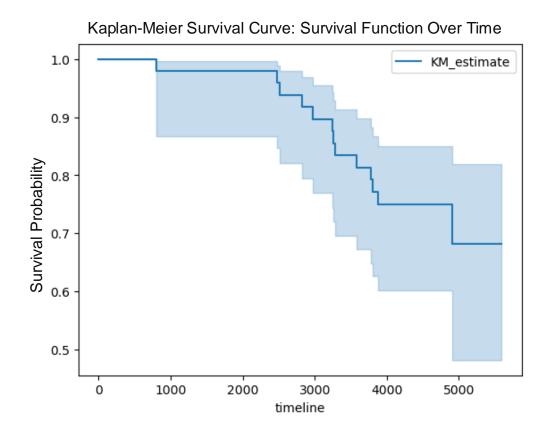






## **Survival Analysis Outcomes**









## **Multivariate Survival Analysis – Statistical Metrics**

- > C-index (Concordance Index): Measures the model's discriminatory power. A higher C-index indicates better ability to differentiate between individuals at different risk levels.
- > AIC (Akaike Information Criterion): A measure of the model's goodness of fit, balancing model fit and complexity. Lower AIC values indicate a better-fitting model.
- > The Cox Proportional Hazards model estimates the relationship between features and the risk of an event.
  - p-value > 0.05 → Feature is **not significant**, suggesting it doesn't impact survival.
  - p-value <= 0.05 → Feature is significant, indicating it affects survival."
- > The Schoenfeld Residuals test checks the proportional hazards assumption for each feature.
  - p-value > 0.05 → No violation of the proportional hazards assumption, should be constant over time.
  - p-value <= 0.05 → There is a potential violation of the proportional hazards assumption, meaning its effect on hazard may not be constant over time.

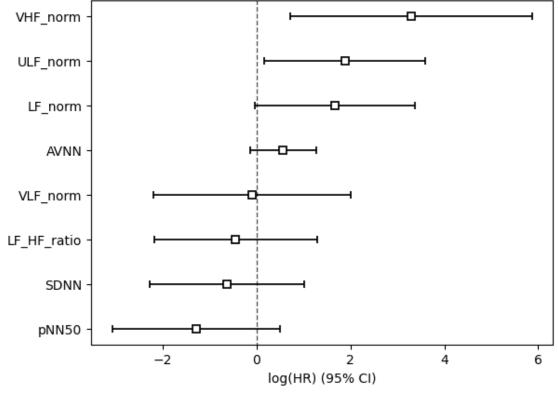




## **Multivariate Survival Analysis – HRV metrics**

	525757202503 .77013752455				
	coef	exp(coef)	se(coef)	z	р
covariate	•				
AVNN	0.561760	1.753756	0.358768	1.565801	0.117395
LF_HF_ratio	-0.449221	0.638125	0.885162	-0.507501	0.611803
LF_norm	n 1.668483	5.304114	0.874243	1.908489	0.056328
SDNN	· -0.629686	0.532759	0.842380	-0.747508	0.454757
ULF_norm	n 1.882383	6.569141	0.875398	2.150318	0.031530
VHF_norm	n 3.285799	26.730328	1.316597	2.495675	0.012572
VLF_norm	n -0.099623	0.905178	1.073153	-0.092832	0.926037
pNN50	-1.295741	0.273695	0.911690	-1.421252	0.155244
Schoenfeld Schoenfeld Schoenfeld Schoenfeld Schoenfeld Schoenfeld	Residuals t Residuals t Residuals t Residuals t Residuals t	cest p-value cest p-value cest p-value cest p-value cest p-value cest p-value cest p-value	for LF_HF for LF_no for SDNN: for ULF_n for VHF_n for VLF_n	ratio: 0.5 rm: 0.0316 2.1865 V orm: 0.5379 orm: 0.0233	×

#### Hazard Ratios for Predictors of Mortality



Positive coef expected: VHF

Negative coef expected : AVNN, SDNN, pNN50, ULF, LF/HF ratio

Context dependent: LF, VLF



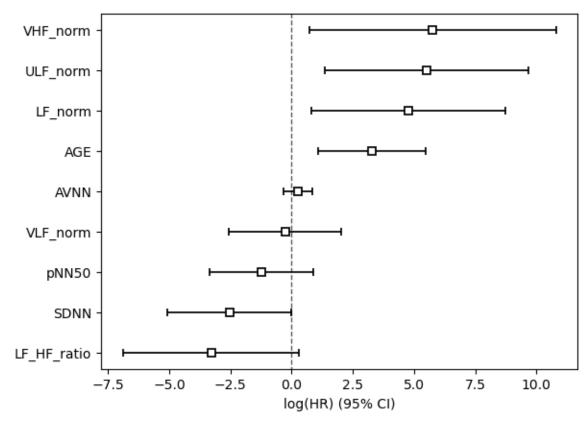


#### Task 1

## **Multivariate Survival Analysis – HRV metrics with AGE**

AIC: 72.60230751205185 C-index: 0.9174852652259332								
	coef	exp(coef)	se(coef)	z	р			
covariate								
AGE	3.279559	26.564061	1.122248	2.922314	0.003474			
AVNN	0.254714	1.290092	0.306350	0.831446	0.405722			
LF_HF_ratio	-3.289431	0.037275	1.839042	-1.788666	0.073669			
LF_norm	4.779355	119.027514	2.023292	2.362167	0.018168			
SDNN	-2.543565	0.078586	1.294705	-1.964591	0.049462			
ULF_norm	5.521513	250.012910	2.116272	2.609076	0.009079			
VHF_norm	5.752721	315.046864	2.570276	2.238173	0.025210			
VLF_norm	-0.263396	0.768437	1.176052	-0.223966	0.822783			
pNN50	-1.228083	0.292853	1.073308	-1.144203	0.252539			
Schoenfeld	Residuals t	est p-value	for AGE: 0	0.5151 <b></b> ✓				
Schoenfeld	Residuals t	est p-value	for AVNN:	0.0039 ×				
Schoenfeld	Residuals t	est p-value	for LF_HF_	_ratio: 0.04	121 🗙			
Schoenfeld	Residuals t	est p-value	for LF_nor	rm: 0.1527 🖣	V			
Schoenfeld	Residuals t	est p-value	for SDNN:	0.7497 🔽				
Schoenfeld	Residuals t	est p-value	for ULF_no	orm: 0.0017	X			
Schoenfeld	Residuals t	est p-value	for VHF_no	orm: 0.3305	V			
Schoenfeld	Residuals t	est p-value	for VLF_no	orm: 0.1280	V			
Schoenfeld	Residuals t	est p-value	for pNN50:	0.0105 🗙				

#### Hazard Ratios for Predictors of Mortality



Positive coef expected: AGE, VHF Negative coef expected: AVNN, SDNN, pNN50, ULF, LF/HF ratio Context dependent: LF, VLF





### **Task 1** Multivariate Survival Analysis – HRV metrics with all covariates

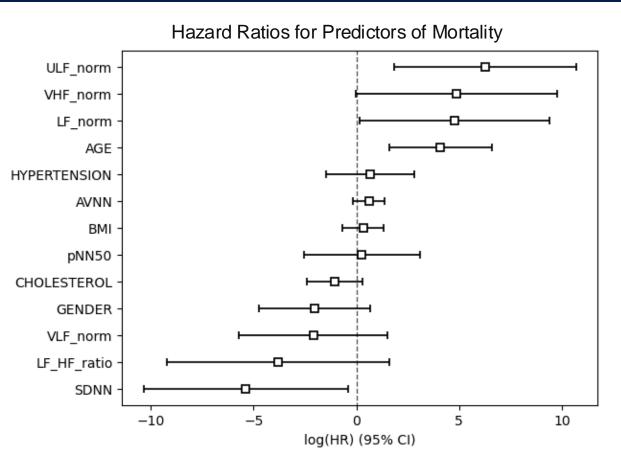
AIC: 74.39856044675523 C-index: 0.93713163064833									
	coef	exp(coef)	se(coef)	z	р				
covariate									
AGE	4.096517	60.130458	1.274115	3.215187	0.001304				
AVNN	0.619895	1.858734	0.393634	1.574803	0.115302				
ВМІ	0.335777	1.399028	0.506902	0.662411	0.507708				
CHOLESTEROL	-1.067786	0.343769	0.688713	-1.550408	0.121044				
GENDER	-2.030873	0.131221	1.385783	-1.465506	0.142783				
HYPERTENSION	0.659488	1.933802	1.095147	0.602191	0.547047				
LF_HF_ratio	-3.802831	0.022308	2.759654	-1.378010	0.168200				
LF_norm	4.758835	116.610030	2.357086	2.018948	0.043493				
SDNN	-5.369902	0.004655	2.536946	-2.116680	0.034287				
ULF_norm	6.270059	528.508378	2.252907	2.783097	0.005384				
VHF_norm	4.875764	131.074270	2.507919	1.944147	0.051878				
VLF_norm	-2.098370	0.122656	1.838488	-1.141356	0.253722				
pNN50	0.272127	1.312754	1.443990	0.188455	0.850520				

```
Schoenfeld Residuals test p-value for AGE: 0.2253  
Schoenfeld Residuals test p-value for AVNN: 0.0024  
Schoenfeld Residuals test p-value for BMI: 1.2025  
Schoenfeld Residuals test p-value for CHOLESTEROL: 0.1240  
Schoenfeld Residuals test p-value for GENDER: 1.7738  
Schoenfeld Residuals test p-value for HYPERTENSION: 1.4430  
Schoenfeld Residuals test p-value for LF_HF_ratio: 0.1456  
Schoenfeld Residuals test p-value for LF_norm: 0.4124  
Schoenfeld Residuals test p-value for SDNN: 1.7021  
Schoenfeld Residuals test p-value for ULF_norm: 0.0657  
Schoenfeld Residuals test p-value for VHF_norm: 0.3590  
Schoenfeld Residuals test p-value for VHF_norm: 0.2450  
Schoenfeld Residuals test p-value for pNN50: 0.5513
```





## **Task 1** Multivariate Survival Analysis – HRV metrics with all covariates



Positive coef expected: AGE, GENDER (male), BMI, CHOLESTEROL, HYPERTENSION, VHF Negative coef expected: AVNN, SDNN, pNN50, ULF, LF/HF ratio Context dependent: LF, VLF

#### **Model Performance:**

- ightharpoonup C-index = 0.937
- > AIC: 74.34

#### Significant p-values that passing proportional hazards assumption:

AGE, LF, ULF, SDNN, VHF

#### **Key Coefficients:**

- ➤ AGE, LF, VHF: Positive → Higher values = higher mortality risk
- SDNN: Negative → Higher SDNN = lower mortality risk

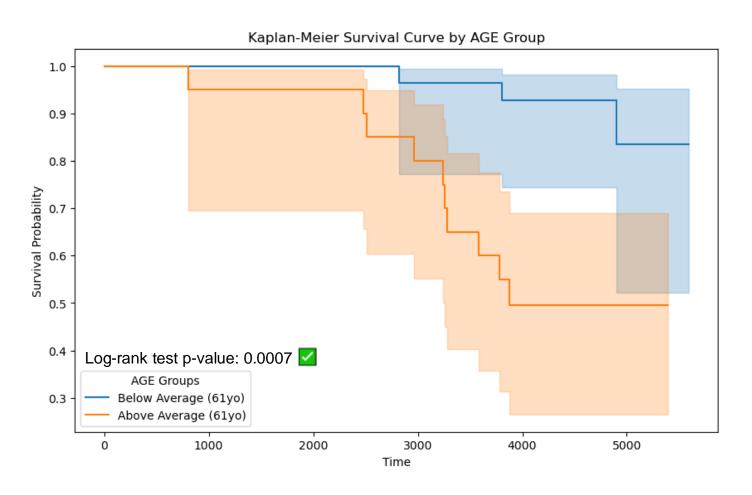
#### Conclusion

The model is promising, with key HRV metrics and Age as a confounder significantly improving survival prediction.





## **Univariate Survival Analysis – AGE**



#### **Log-Rank Test Interpretation**

- p-value > 0.05 → Feature is not significant, indicating no clear difference in survival between groups.
- p-value <= 0.05 → Feature is significant, suggesting a statistically significant difference in survival between groups.

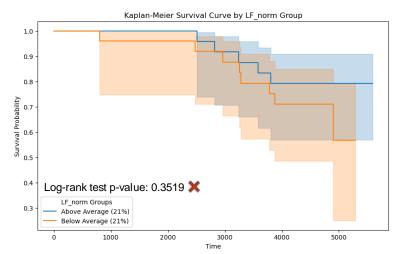
Age remains significant in both univariate and multivariate models, confirming its strong impact on survival. This aligns with the general understanding that older age is associated with higher mortality risk.

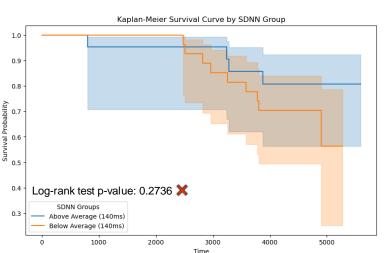


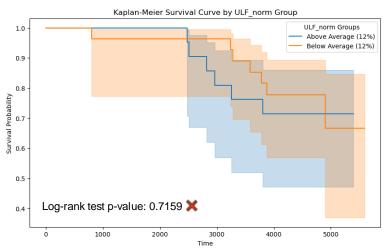


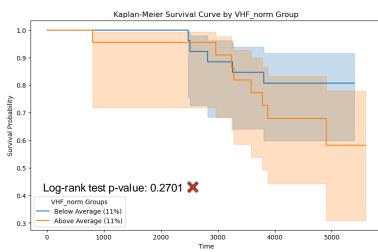
#### Task 1

## **Univariate Survival Analysis – HRV metrics**









#### **Log-Rank Test Interpretation**

- p-value > 0.05 → Feature is not significant, indicating no clear difference in survival between groups.
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HRV metrics (LF, ULF, SDNN, VHF) are not significant univariately but become significant in the multivariate model, suggesting their combined effect with age improves survival prediction.





## **Assignment Task 2**

## **Automatic Sleep Staging and Performance Evaluation**





### **Sleep Stages Annotations**

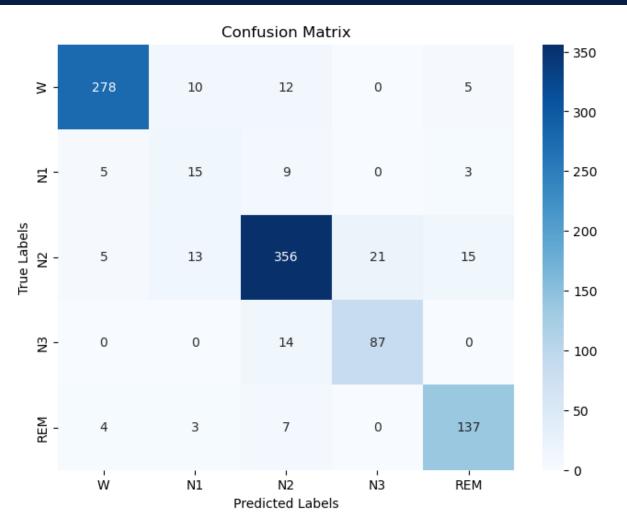


- Sleep stages annotated manually with 30-second epochs.
- ➤ The SHHS dataset uses the Rechtschaffen & Kales guidelines (6 stages). For comparison with modern standards, the stages are adapted to ASMM Guidelines, combining S3 and S4 into N3.



- > Predicts sleep stages using **EEG** (C4), **EOG** (left), and **EMG** (chin) signals.
- Provides automated sleep stage labeling based on these signals, offering a more efficient and consistent approach.

#### Performance Evaluation: Confusion Matrix

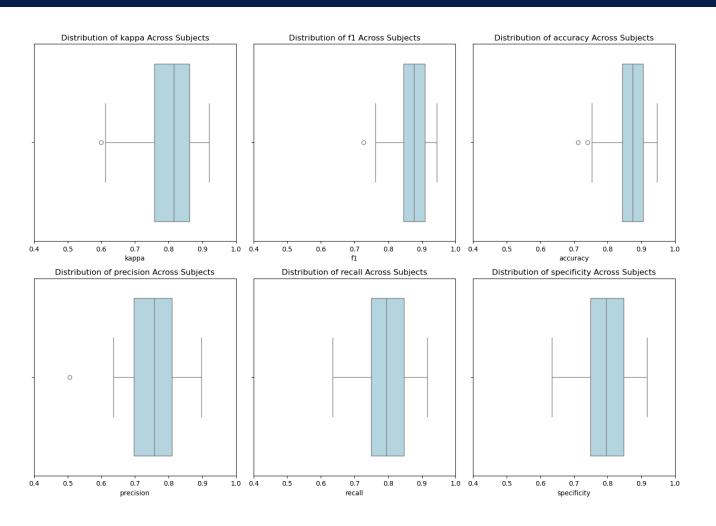


- ➤ The confusion matrix shows **strong agreement** between expert-labeled
  sleep stages in the SHHS dataset and
  the YASA model's predictions.
- The only challenge is with the N1 stage, which is often ambiguous due to its transitional nature between wakefulness and light sleep.





#### **Performance Evaluation: Other Metrics**



The YASA model performs well in predicting sleep stages:

- **Kappa (0.81)**: High agreement with expert labels, minor inconsistencies.
- F1 Score (0.87): Balanced precision and recall.
- Accuracy (0.87): High classification accuracy.
- Precision (0.75): Room to reduce false positives.
- **Recall (0.80)**: Good stage identification, room for improvement.
- Specificity (0.80): Strong at identifying non-sleep stages.

Standard deviations show stable performance, with the most variation in **kappa** and **precision**. Overall, the model is reliable but can improve in distinguishing certain stages like N1 stage.









## Thank you for you attention!

**Any Questions?**