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Indian Institute of Technology  
Madras



Dept. of Biotechnology  
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# Interpreting Deep Neural Networks for Single-Lead ECG Arrhythmia Classification

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# Motivation

## \* Deep Learning methods for arrhythmia detection

- Scales automated systems
- Removes requirement for expert rules
- Augments doctor's ability

## \* Limitations

- Black box
- Unreliable

## \* Requirement

- Correlation b/w model outputs and ECG input samples
- Comparing visualizations with medical literature

# Contribution

- ✱ Novel adaptation of CNN saliency visualization to 1D ECG signals
- ✱ Extension of the LSTM visualization procedure for ECG signals
- ✱ Rigorous analysis of the saliency maps
- ✱ Draw comparisons to traditional diagnosis as highlighted in medical literature

# Problem formulation

**Dataset**  $\rightarrow \{(x^{(1)}, y^{(1)}), (x^{(2)}, y^{(2)}), \dots, (x^{(m)}, y^{(m)})\}$

**Input ECG Signal**  $\rightarrow x^{(i)}$       **Labels**  $\rightarrow y^{(i)} \in \{0, 1, \dots, 7\}$

**CNN**  $\rightarrow z_1^{(i)} = F_1(x^{(i)}; \theta_1)$     **LSTM**  $\rightarrow z_2^{(i)} = F_2(x^{(i)}; \hat{\theta}_2)$

**FC**  $\rightarrow z_3^{(i)} = F_3(z_1^{(i)} || z_2^{(i)}; \theta_3)$

**Softmax**  $\rightarrow p(z_3^{(i)})$

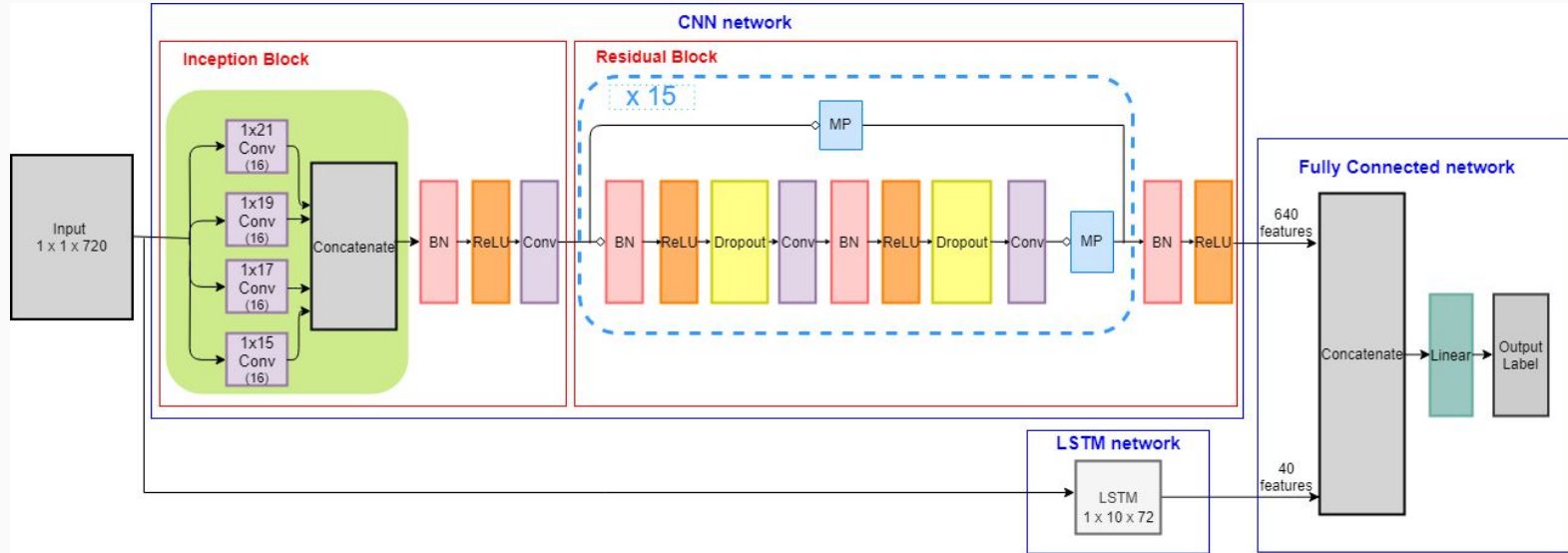
# Rationale behind Architecture Choice

Three popular DL architectures in literature were compared for this specific 8 class classification problem.

Model	Precision	Recall	F1-Score	Accuracy
Hannun <i>et al.</i> [2]	0.93	0.93	0.93	0.93
Zihlmann <i>et al.</i> [3]	0.94	0.94	0.94	0.94
<b>Murugesan <i>et al.</i> [4]</b>	<b>0.98</b>	<b>0.97</b>	<b>0.97</b>	<b>0.97</b>

Murugesan *et al.*'s model is clearly the best for this classification task. Thus, it was chosen for the interpretability task.

# CONT.



## Architecture Design

Image Credits: <https://ieeexplore.ieee.org/abstract/document/8438739>

# Dataset Description

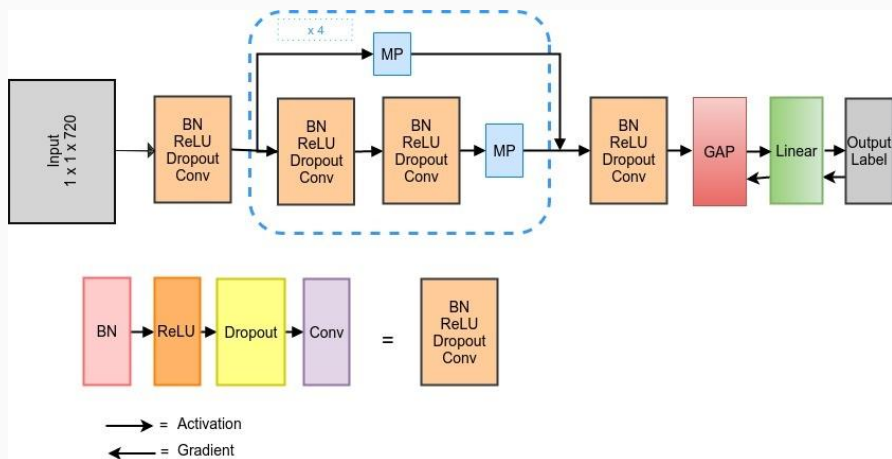
Rhythm Types	MITDB	LTAfDB	LTDB	Total
N	75013	10756	517402	603171
PVC	7121	1318	5137	13576
PAC	2542	14914	-	17456
AFIB	102	7241	-	7343
SVTA	22	3265	-	3287
SBR	-	11323	-	11323
LBBB	6580	-	-	6580
RBBB	5400	-	-	5400

# Visualization of CNN

Activation of unit  $k \rightarrow f_k(x)$

Weight for class  $C$  corresponding to Unit ' $k$ '  $\rightarrow w_k^c$

I/p to Softmax  $\rightarrow \sum_k w_k^c \sum_x f_k(x)$       CAM  $\rightarrow M_c(x) = \sum_k w_k^c f_k(x)$



- CAM of vector length 48 is obtained.
- Upsampled to 720



# LSTM Visualization

LSTM visualization ( $\psi$ )  
network

Input to the  
LSTM network ( $\phi$ )

Input ECG  
signal ( $\mathbf{x}_{1:T}$ )

Mask ( $\mathbf{m}_{1:T}$ )

Weights of the  
saliency term  $\lambda_1$

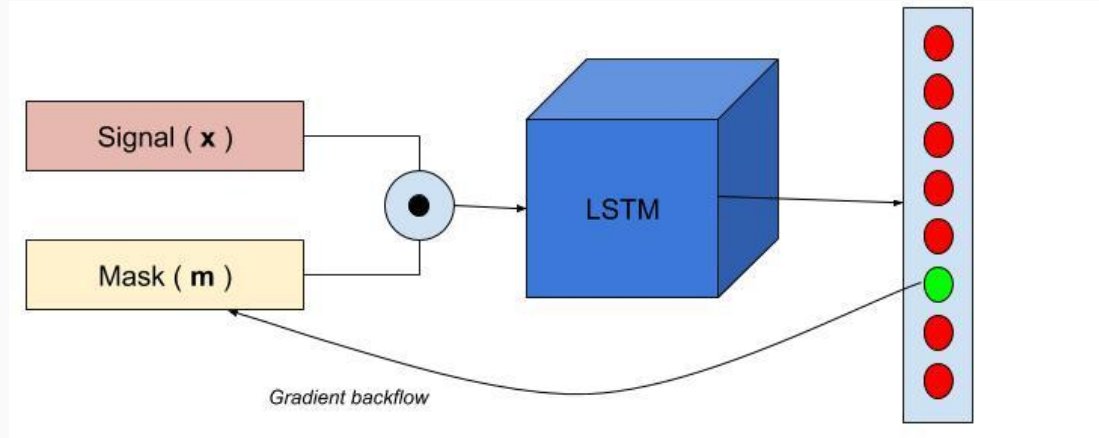
Weights of the  
smoothing term  $\lambda_2$

$$J = \underset{\mathbf{m}_{1:T}}{\operatorname{argmin}} \lambda_1 \|\mathbf{1} - \mathbf{m}_{1:T}\|_1 + \lambda_2 \sum_{t=1}^{T-1} |\mathbf{m}_{t+1} - \mathbf{m}_t| + s_c(\psi(\phi(\mathbf{x}_{1:T}; \mathbf{m}_{1:T})))$$

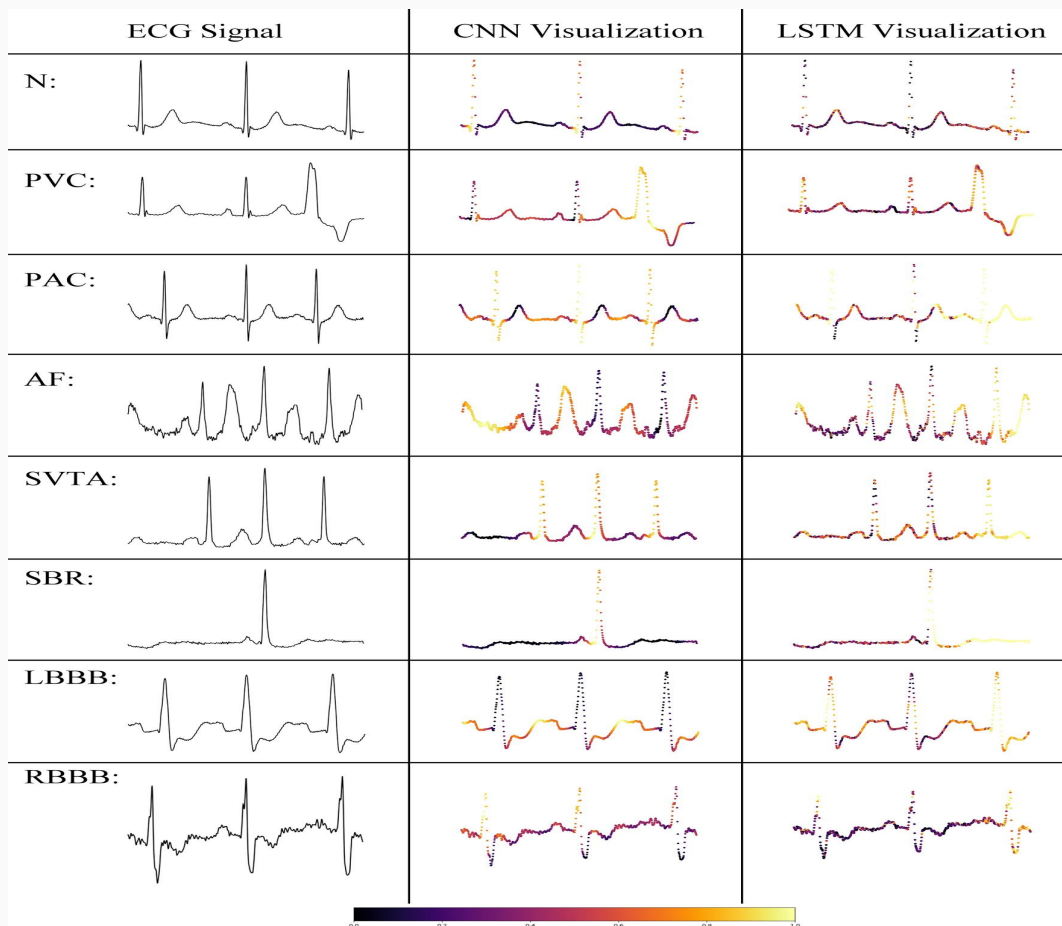
$$\phi(\mathbf{x}_{1:T}; \mathbf{m}_{1:T}) = \mathbf{m}_{1:T} \odot \mathbf{x}_{1:T} + k(\mathbf{1} - \mathbf{m}_{1:T})$$

# CONT

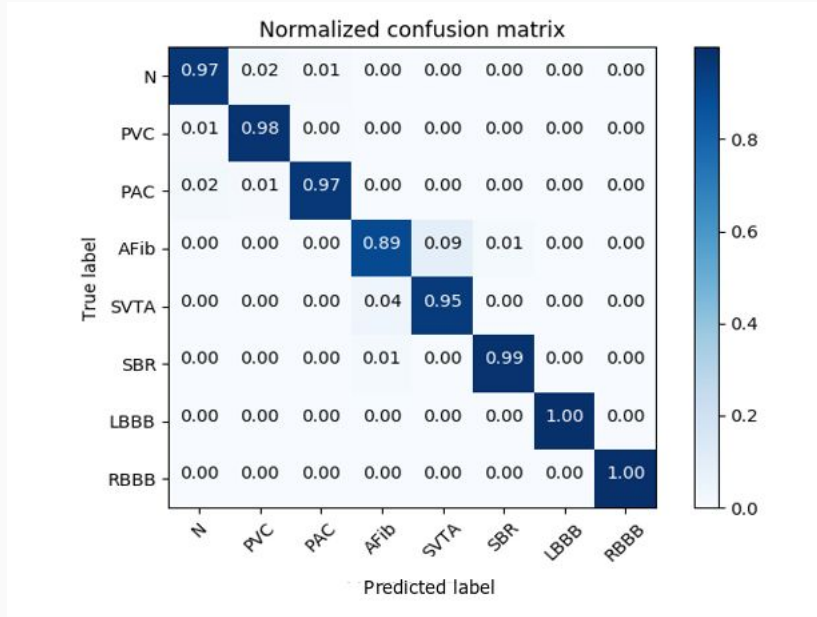
- Initially,  $m_{1:T} = 0$
- $\lambda_1, \lambda_2$  and learning rate are set to 1, 0.001 and 0.001 respectively.
- Gradient update is done for 500 iterations.



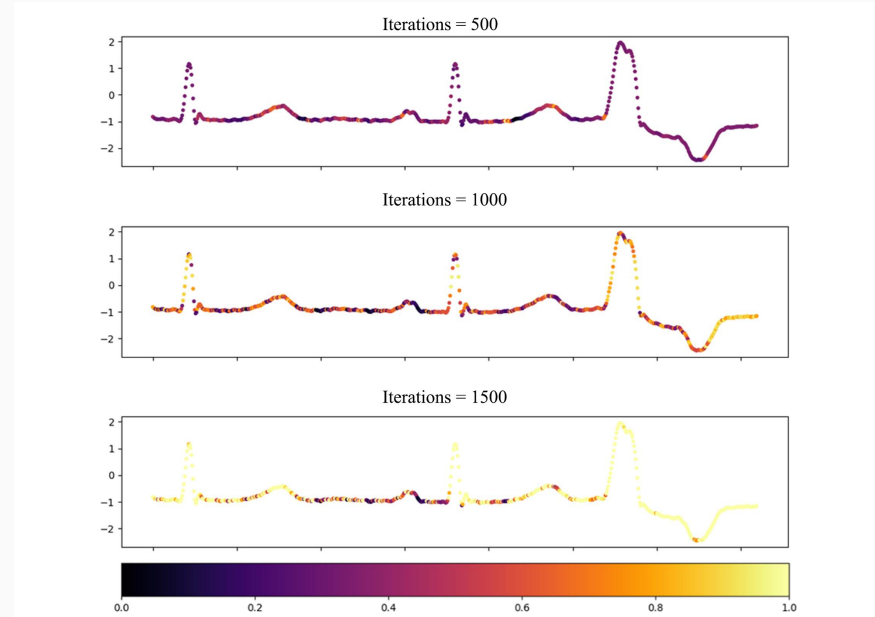
# ECG Visualization



# CONT.



Confusion Matrix of Predictions



Interpretability w.r.t epochs no

# Conclusion and Future scope

- A novel adaptation of visualization techniques of CNN and LSTM for ECG signals was proposed.
- Visualizations were observed to line up with the clinical literature in ECG interpretation
- Extension to other arrhythmia classes
- Extension to entire arrhythmia records
- Exploring Explainability



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# Thank you

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