

ECG Arrhythmia Detection

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May 16, 2025

1 Introduction

Cardiovascular diseases remain a leading cause of mortality worldwide, with cardiac arrhythmias representing a significant subset of these conditions. The electrocardiogram (ECG) is the primary diagnostic tool for detecting and classifying these abnormal heart rhythms. This project aims to develop a comprehensive system for automatic ECG arrhythmia detection using signal processing techniques and machine learning algorithms.

The objective of this report is to implement and evaluate a complete ECG analysis pipeline using the MIT-BIH Arrhythmia Database, which contains 48 half-hour excerpts of two-channel ambulatory ECG recordings from 47 subjects. The system developed through this project can potentially serve as a diagnostic aid for clinicians, reducing the time and expertise required for ECG interpretation while improving diagnostic accuracy.

The project is implemented in Python, leveraging specialized libraries including wfdb for database access, SciPy for signal processing, and scikit-learn for machine learning tasks.

2 Project Structure

This report presents a systematic approach to ECG arrhythmia detection through a comprehensive pipeline organized in four sequential, interconnected stages. Each stage builds upon the previous one, transforming raw ECG recordings into clinically relevant diagnostic information through progressive refinement and analysis:

2.1 Stage 1: Dataset Exploration and Visualization

The first stage establishes a foundation for the project by accessing and loading ECG recordings from the MIT-BIH Arrhythmia Database using the wfdb library. Our implementation includes functions such as `load_record()` to retrieve signal data and annotations, and `extract_signal_segment()` to isolate specific portions of recordings for analysis. Visual exploration is facilitated through `plot_original_signal()` and `plot_ecg_with_annotations()` functions, which generate time-domain visualizations of raw ECG waveforms alongside their clinical annotations. These tools enable examination of normal cardiac patterns and various arrhythmia manifestations across different patients, providing essential context for subsequent processing stages.

2.2 Stage 2: Signal Preprocessing

This stage enhances ECG signal quality through a multi-stage filtering pipeline implemented in the `preprocess_ecg_signal()` function. The process begins with baseline wander removal using FFT-based high-pass filtering (`remove_baseline_wander_fft()`), followed by powerline interference elimination through notch filtering (`remove_powerline_interference()`), and concludes with bandpass filtering for general noise reduction (`apply_bandpass_filter()`). The effectiveness of these techniques is quantified using the `analyze_preprocessing_effects()` function, which calculates metrics such as SNR improvement, baseline wander reduction percentage, and powerline interference attenuation. Visual assessment is provided through the `visualize_preprocessing_steps()` function, which generates comparative plots of the signal at each processing stage in both time and frequency domains.

2.3 Stage 3: Feature Extraction

The feature extraction stage centers on R-peak detection and heart rate analysis, implemented through a sequence of specialized functions. R-peaks are identified using `detect_r_peaks()`, which employs adaptive thresholding with minimum distance constraints to locate successive cardiac cycles. RR intervals are then calculated via `calculate_rr_intervals()`, providing the basis for heart rate determination and variability analysis. The `analyze_heart_rate()` function computes average heart rate and identifies potential arrhythmic conditions such as bradycardia or tachycardia based on clinical thresholds. Visualization functions including `plot_r_peaks()`, `plot_rr_intervals()`, and `plot_heart_rate()` generate diagnostic plots showing the detected peaks, interval distributions, and heart rate trends over time, enabling both algorithmic processing and visual verification of the extracted features.

2.4 Stage 4: Arrhythmia Detection and Classification

The final stage implements both rule-based and machine learning approaches for arrhythmia classification. The rule-based component uses `is_heart_rate_normal()` to provide initial classification based on established clinical thresholds. For machine learning classification, `extract_features_and_labels()` computes statistical features from RR intervals, including mean and standard deviation, while associating appropriate binary labels (normal/abnormal) based on annotation data. Three classifier models are implemented: Decision Tree, Random Forest, and Logistic Regression, each trained and evaluated through the `train_and_evaluate_classifier()` function. Performance assessment is handled by `analyze_classification_results()`, which calculates accuracy, precision, recall, and F1-score metrics, while generating confusion matrices and ROC curves through the `save_confusion_matrix()` and `save_roc_curve()` functions. The implementation includes proper data partitioning with stratified sampling to maintain class distribution during training and testing, ensuring robust evaluation of classification performance.

3 Stage 1: Dataset Exploration and Visualization

3.1 Introduction

The first stage of the ECG arrhythmia detection pipeline establishes a fundamental understanding of the MIT-BIH Arrhythmia Database through systematic exploration and visualization. This database, developed by the Massachusetts Institute of Technology and Beth Israel Hospital, contains 48 half-hour recordings of two-channel ambulatory ECG from 47 subjects, carefully annotated by cardiologists. The exploration phase is crucial for understanding the characteristics of normal and abnormal heartbeats, the annotation system used, and the technical specifications of the recordings.

The implementation utilizes the specialized `wfdb` library for accessing PhysioNet databases, combined with data analysis and visualization tools to extract actionable insights from the raw ECG data. This stage lays the groundwork for subsequent signal processing and machine learning stages by providing context about the data structure, quality, and clinical significance of different arrhythmia patterns.

3.2 Code Implementation

3.2.1 Configuration and Setup

The initial part of the code configures the exploration parameters and sets up a mapping between annotation symbols and their clinical meanings. This foundation is essential for interpreting the ECG annotations throughout the analysis.

```
records = ['100', '101', '102']
duration_sec = 10
symbols_explained = {
    'N': 'Normal beat',
    'L': 'Left bundle branch block beat',
    'R': 'Right bundle branch block beat',
    'A': 'Atrial premature beat',
    'V': 'Premature ventricular contraction',
    'F': 'Fusion of ventricular and normal beat',
    '/': 'Paced beat',
    'E': 'Ventricular escape beat',
    '+': 'Rhythm change',
}
```

```
symbol_colors = {
    'N': 'green', # Normal beats
    'L': 'blue', # Left bundle branch block
    'R': 'cyan', # Right bundle branch block
    'V': 'red', # PVCs
    'A': 'magenta', # Atrial premature
    'F': 'orange', # Fusion beats
    '/': 'purple', # Paced beats
    'E': 'brown', # Ventricular escape
    '+': 'pink', # Rhythm change
    '|': 'gray', # Artifact
    'default': 'black' # Unknown symbols
}
```

This section defines the records to be analyzed (100, 101, and 102), the duration of ECG to visualize (10 seconds), and creates dictionaries that map annotation symbols to their clinical interpretations and color codes for visualization. The color coding enables intuitive identification of different arrhythmia types in the visualizations, with clinically significant events like premature ventricular contractions (PVCs) highlighted in red.

3.2.2 Metadata Extraction

To understand the technical specifications of each recording, this function extracts and displays comprehensive metadata about each ECG record:

```
Windsurf: Refactor | Explain | Generate Docstring | X
def print_record_metadata(record, record_name):
    print(f"\nMetadata for record {record_name}:")
    print(f"• Sampling Frequency: {record.fs} Hz")
    print(f"• Number of Samples: {record.sig_len}")
    print(f"• Duration: {record.sig_len / record.fs:.2f} seconds")
    print(f"• Number of Channels: {record.n_sig}")
    print(f"• Channel Names: {record.sig_name}")
    print(f"• Units: {record.units}")
    print(f"• Comments: {record.comments}")
```

This function provides critical information about each record, including sampling frequency (typically 360 Hz), signal duration, available channels (usually MLII and V1), and measurement units. Understanding these parameters is essential for correct signal interpretation and preprocessing in subsequent stages.

3.2.3 Signal Loading and Visualization

The main processing loop loads each record, extracts its metadata, creates visualizations with annotations, and analyzes the distribution of heartbeat types:

```
for record_name in records:
    try:
        # Load full metadata and then load part of the signal
        full_record = wfdb.rdrecord(record_name)
        fs = full_record.fs
        print_record_metadata(full_record, record_name)
        samples_to_read = int(fs * duration_sec)
        record = wfdb.rdrecord(record_name, sampto=samples_to_read)
        annotation = wfdb.rdann(record_name, 'atr', sampto=samples_to_read)

        # Calculate time axis
        time = np.arange(len(record.p_signal)) / fs

        # Select MLII channel explicitly
        if 'MLII' in record.sig_name:
            mlii_index = record.sig_name.index('MLII')
            signal = record.p_signal[:, mlii_index]
        else:
            signal = record.p_signal[:, 0] # Fallback to first channel if MLII is not found
```

This section demonstrates the robust handling of ECG data by: 1. Loading the complete record metadata to extract technical specifications 2. Loading a specified duration of the signal (10 seconds) to focus analysis 3. Loading the corresponding annotations from the .atr files containing cardiologist-verified heartbeat labels 4. Creating a proper time axis based on the sampling frequency 5. Intelligently selecting the MLII lead (Modified Lead II), which is the standard lead used for arrhythmia analysis

3.2.4 Distribution Analysis and Reporting

This section performs important analytical functions as it Creates a custom legend that explains each annotation symbol present in the current segment, Analyzes and reports the distribution of different heartbeat types, providing valuable statistical insights about the prevalence of normal and arrhythmic beats, Saves high-quality visualizations for future reference and inclusion in reports, and it also Implements error handling to ensure robustness when processing multiple records

```
# Create dynamic legend with matching colors
legend_elements = []
for sym in used_symbols:
    color = symbol_colors.get(sym, symbol_colors['default'])
    legend_elements.append(plt.Line2D([0], [0], marker='o', color='w', markerfacecolor=color, markersize=8,
    label=f"{sym}: {symbols_explained.get(sym, 'Unknown')}"))

# Annotation distribution
dist = Counter(annotation.symbol)
print("\nHeartbeat type distribution:")
for sym, count in dist.items():
    label = symbols_explained.get(sym, 'Unknown')
    color = symbol_colors.get(sym, symbol_colors['default'])
    print(f" {sym} ({label}): {count} times")

plt.legend(handles=legend_elements, loc='upper right', fontsize=8, bbox_to_anchor=(1.2, 1))
plt.grid(True)
plt.tight_layout()

# Save the figure
output_path = f"./output/{record_name}_ecg_with_annotations.png"
plt.savefig(output_path, dpi=100, bbox_inches='tight')
plt.close()
print(f"Figure saved to {output_path}")
```

The analysis of heartbeat distributions provides critical insights into the relative frequencies of different arrhythmia types, helping to identify records with significant abnormalities and guiding the selection of representative data for training machine learning models in later stages.

3.3 Outcomes and Insights

The dataset exploration stage successfully reveals the structure and content of the MIT-BIH Arrhythmia Database, providing: 1. Technical understanding of the signal characteristics (sampling frequency, duration, channels) 2. Visual identification of different arrhythmia patterns and their distinctive ECG signatures 3. Statistical analysis of beat type distributions, highlighting the imbalanced nature of the dataset with normal beats significantly outnumbering arrhythmic beats 4. A foundation for developing targeted preprocessing and feature extraction strategies based on the observed signal characteristics and arrhythmia patterns

These insights directly inform the preprocessing strategies in Stage 2, where techniques like filtering and baseline correction will be applied with parameters optimized for the specific characteristics of the MIT-BIH recordings.

3.3.1 Output Figures

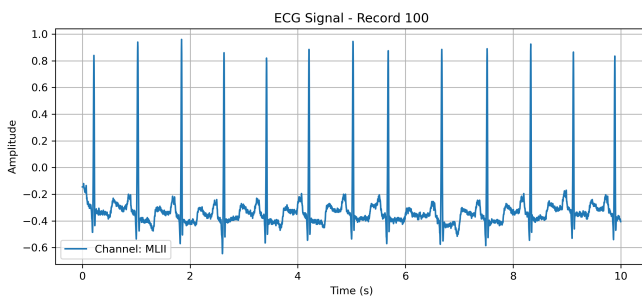


Figure 1: Simple ECG Record

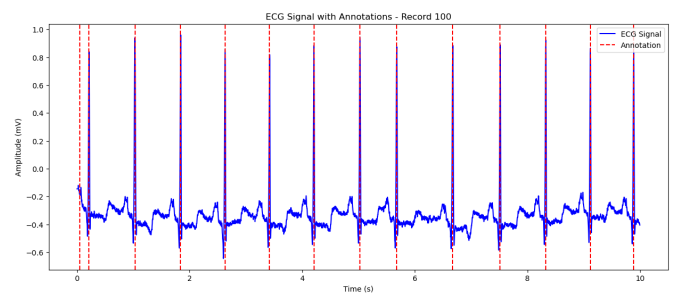


Figure 2: Annotated ECG Record

4 Stage 2: Signal Preprocessing

4.1 Introduction

In this stage, the raw ECG signals are preprocessed to remove various types of noise that can degrade diagnostic accuracy. These include baseline wander, powerline interference, and high-frequency noise. Proper preprocessing ensures the fidelity of the ECG waveforms and facilitates reliable downstream tasks such as feature extraction and arrhythmia classification. This is particularly important when working with clinical datasets like the MIT-BIH Arrhythmia Database, which are collected under real-world conditions. The preprocessing pipeline applies a sequence of filtering steps designed to enhance signal quality while preserving key morphological features. The implementation leverages fast Fourier transforms, notch filtering, and bandpass filtering to create a clean, analysis-ready signal. Additionally, it provides tools for visualizing each stage of preprocessing and evaluating its impact using signal-to-noise and power spectral metrics.

4.2 Code Implementation

4.2.1 Baseline Wander Removal

The function `remove_baseline_wander_fft` eliminates baseline drift, which is a low-frequency component typically caused by respiration and electrode movement. This is done by transforming the signal into the frequency domain using FFT, setting all frequencies below 0.5 Hz to zero, and then applying the inverse FFT. This preserves the ECG's main frequency components while stabilizing the baseline.

```
Windsurf: Refactor | Explain | Generate Docstring | ✕
def remove_baseline_wander_fft(signal, fs):
    n = len(signal)
    fft_signal = fft(signal)
    freq = fftfreq(n, 1/fs)
    mask = np.abs(freq) > 0.5
    fft_signal_filtered = fft_signal * mask
    filtered_signal = np.real(ifft(fft_signal_filtered))
    return filtered_signal
```

4.2.2 Powerline Interference Removal

The `remove_powerline_interference` function targets 50 Hz powerline noise using a second-order IIR notch filter. By specifying a high quality factor, the filter sharply attenuates the 50 Hz component while leaving the rest of the spectrum largely unaffected. The filtering is applied with zero-phase distortion to preserve waveform integrity.

```
Windsurf: Refactor | Explain | Generate Docstring | ✕
def remove_powerline_interference(signal, fs, powerline_freq=50.0, quality_factor=30.0):
    # Design a notch filter
    b, a = iirnotch(powerline_freq, quality_factor, fs)

    # Apply the filter with forward-backward filtering to avoid phase distortion
    filtered_signal = filtfilt(b, a, signal)

    return filtered_signal
```

4.2.3 Bandpass Filtering

To further reduce both low- and high-frequency noise, `apply_bandpass_filter` uses a Butterworth band-pass filter with cutoffs at 0.5 Hz and 50 Hz. These bounds are chosen based on standard clinical guidelines, as they retain the essential components of the ECG (P, QRS, and T waves) while removing irrelevant frequencies. The result is a smooth and diagnostically reliable waveform.

```
Windsurf: Refactor | Explain | Generate Docstring | ✕
def apply_bandpass_filter(signal, fs, lowcut=0.5, highcut=50.0, order=4):
    nyquist = 0.5 * fs
    low = lowcut / nyquist
    high = highcut / nyquist

    # Design a Butterworth bandpass filter
    b, a = butter(order, [low, high], btype='band')

    # Apply the filter with forward-backward filtering to avoid phase distortion
    filtered_signal = filtfilt(b, a, signal)

    return filtered_signal
```

4.2.4 Preprocessing Pipeline and Visualization

The function `preprocess_ecg_signal` coordinates all three filtering stages and returns the original and intermediate signals. These are then visualized using `visualize_preprocessing_steps`, which plots the waveform and power spectral density before and after each stage. This helps validate the effectiveness of each preprocessing operation.

```
Windsurf: Refactor | Explain | Generate Docstring | ✕
def preprocess_ecg_signal(signal, fs, config=None):
    # Default configuration if not provided
    if config is None:
        config = { 'bandpass_lowcut':0.5, 'bandpass_highcut':50.0, 'notch_freq':50.0, 'notch_quality':30.0 }

    # Step 1: Remove baseline wander using FFT-based high-pass filtering
    baseline_removed = remove_baseline_wander_fft(signal, fs)

    # Step 2: Remove powerline interference using a notch filter
    powerline_removed = remove_powerline_interference(baseline_removed, fs, config['notch_freq'], config['notch_quality'])

    # Step 3: Apply bandpass filtering for general noise reduction
    final_filtered = apply_bandpass_filter( powerline_removed, fs, config['bandpass_lowcut'], config['bandpass_highcut'] )

    # Store intermediate signals for analysis
    intermediate_signals = { 'original': signal, 'baseline_removed':baseline_removed, 'powerline_removed':powerline_removed, 'final_filtered':final_filtered }

    return final_filtered, intermediate_signals
```

4.2.5 Quantitative Evaluation

The `analyze_preprocessing_effects` function quantifies the impact of preprocessing by measuring signal-to-noise ratio (SNR) improvement, baseline power reduction (below 0.5 Hz), and suppression of 50 Hz powerline noise. This provides a numerical basis for evaluating and comparing preprocessing configurations.


```
def analyze_preprocessing_effects(original_signal, processed_signal, fs):
    # Compute power spectra
    f_orig, pxx_orig = sig.welch(original_signal, fs, nperseg=min(1024, len(original_signal)))
    f_proc, pxx_proc = sig.welch(processed_signal, fs, nperseg=min(1024, len(processed_signal)))

    # 1. Estimate SNR improvement
    # For simplicity, we'll use the ratio of total signal power to the power in noise bands

    # Find indices for the ECG frequency band (typically 0.5-40 Hz)
    ecg_band_idx = np.logical_and(f_orig >= 0.5, f_orig <= 40)

    # Find indices for noise bands (below 0.5 Hz and above 40 Hz)
    noise_band_idx = np.logical_or(f_orig < 0.5, f_orig > 40)

    # Compute power in these bands
    orig_ecg_power = np.sum(pxx_orig[ecg_band_idx])
    orig_noise_power = np.sum(pxx_orig[noise_band_idx])

    proc_ecg_power = np.sum(pxx_proc[ecg_band_idx])
    proc_noise_power = np.sum(pxx_proc[noise_band_idx])

    # Compute SNR in dB
    if orig_noise_power > 0:
        orig_snr = 10 * np.log10(orig_ecg_power / orig_noise_power)
    else:
        orig_snr = float('inf')

    if proc_noise_power > 0:
        proc_snr = 10 * np.log10(proc_ecg_power / proc_noise_power)
    else:
        proc_snr = float('inf')
```

```
snr_improvement = proc_snr - orig_snr

# 2. Quantify baseline wander reduction
# Power in very low frequencies (below 0.5 Hz)
baseline_idx = f_orig < 0.5
orig_baseline_power = np.sum(pxx_orig[baseline_idx])
proc_baseline_power = np.sum(pxx_proc[baseline_idx])

baseline_reduction_pct = 100 * (1 - proc_baseline_power / orig_baseline_power) if orig_baseline_power > 0 else 0

# 3. Quantify powerline interference reduction
# Power around 50 Hz (or 60 Hz)
powerline_idx = np.logical_and(f_orig >= 49, f_orig <= 51) # Adjust for 60 Hz if needed
orig_powerline_power = np.sum(pxx_orig[powerline_idx])
proc_powerline_power = np.sum(pxx_proc[powerline_idx])

powerline_reduction_pct = 100 * (1 - proc_powerline_power / orig_powerline_power) if orig_powerline_power > 0 else 0

# Calculate overall signal variance change
orig_var = np.var(original_signal)
proc_var = np.var(processed_signal)
variance_reduction_pct = 100 * (1 - proc_var / orig_var) if orig_var > 0 else 0

# Return all metrics
metrics = {
    'snr_original_db': orig_snr,
    'snr_processed_db': proc_snr,
    'snr_improvement_db': snr_improvement,
    'baseline_reduction_pct': baseline_reduction_pct,
    'powerline_reduction_pct': powerline_reduction_pct,
    'variance_reduction_pct': variance_reduction_pct
}

return metrics
```

4.3 Outcomes and Insights

The signal preprocessing stage effectively enhances ECG signal quality by:

- Removing baseline drift and centering the ECG waveform.
- Eliminating narrow-band powerline interference without affecting surrounding frequencies.
- Smoothing the signal through bandpass filtering while preserving clinically relevant features.
- Providing visual and quantitative evidence of improvement in signal clarity and noise reduction.



5 Stage 3: Feature Extraction

5.1 Overview

Feature extraction is a critical step in ECG analysis where characteristic information is derived from pre-processed signals to enable accurate arrhythmia classification. This section implements several algorithms for extracting clinically significant features from ECG signals, with a focus on R-peak detection, heart rate calculation, and heart rate variability analysis.

5.2 R-Peak Detection

R-peaks, representing ventricular depolarization, are the most prominent features in an ECG signal. Accurate detection of these peaks is fundamental to heart rate analysis and subsequent feature extraction. Our implementation includes three different methods for R-peak detection:

5.2.1 Function: `detect_r_peaks`

This is the main function that handles R-peak detection with three different methodologies. It validates inputs and calls the appropriate method-specific function.

```
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def detect_r_peaks(ecg_signal, fs, method='findpeaks', threshold_factor=0.6):
    if len(ecg_signal) == 0: raise ValueError("ECG signal is empty.")
    if fs <= 0: raise ValueError("Sampling frequency must be positive.")
    if method not in ['findpeaks', 'threshold', 'derivative']: raise ValueError(f"Unknown method: {method}. Use 'findpeaks', 'threshold', or 'derivative'.")

    min_distance = int(fs * 0.3)

    if method == 'threshold': return _detect_r_peaks_threshold(ecg_signal, min_distance, threshold_factor)
    elif method == 'findpeaks': return _detect_r_peaks_findpeaks(ecg_signal, min_distance, threshold_factor)
    elif method == 'derivative': return _detect_r_peaks_derivative(ecg_signal, fs, min_distance, threshold_factor)
```

Parameters:

- `ecg_signal`: The preprocessed ECG signal
- `fs`: Sampling frequency in Hz
- `method`: Detection method ('findpeaks', 'threshold', or 'derivative')
- `threshold_factor`: Tuning parameter for peak detection sensitivity

5.2.2 Method 1: Threshold-based Detection

The `_detect_r_peaks_threshold` function detects R-peaks by identifying points in the signal that exceed a certain amplitude threshold, calculated as a fraction of the maximum signal amplitude. This method is simple but effective for signals with good signal-to-noise ratio.

```
Windsurf: Refactor | Explain | Generate Docstring | X
def _detect_r_peaks_threshold(ecg_signal, min_distance, threshold_factor):
    threshold = threshold_factor * np.max(ecg_signal)
    r_peaks, _ = find_peaks(ecg_signal, height=threshold, distance=min_distance)
    return r_peaks
```

5.2.3 Method 2: Find Peaks with Prominence

The `_detect_r_peaks_findpeaks` function utilizes SciPy's `find_peaks` function with prominence parameter to identify peaks that stand out relative to their surroundings. This method is more robust against baseline wander and noise compared to simple thresholding.

```
def _detect_r_peaks_findpeaks(ecg_signal, min_distance, threshold_factor):
    prominence = threshold_factor * np.std(ecg_signal)
    r_peaks, _ = find_peaks(ecg_signal, distance=min_distance, prominence=prominence)
    return r_peaks
```

5.2.4 Method 3: Derivative-based Detection

The `_detect_r_peaks_derivative` function implements the Pan-Tompkins algorithm, this method is particularly robust against different types of noise and baseline variations commonly encountered in ambulatory ECG recordings, a more sophisticated approach that involves:

- Signal differentiation to highlight rapid amplitude changes
- Squaring to amplify the QRS complex
- Moving average integration to smooth the signal
- Peak detection on the integrated signal
- Refinement to locate the precise R-peak position

```
def _detect_r_peaks_derivative(ecg_signal, fs, min_distance, threshold_factor):
    diff_ecg = np.diff(ecg_signal)
    squared = diff_ecg ** 2
    window_size = int(0.1 * fs)
    window = np.ones(window_size) / window_size
    integrated = np.convolve(squared, window, mode='same')

    threshold = threshold_factor * np.max(integrated)
    peaks, _ = find_peaks(integrated, height=threshold, distance=min_distance)

    r_peaks = []
    for peak in peaks:
        start_idx = max(0, peak - int(0.05 * fs)) # 50 ms before
        end_idx = min(len(ecg_signal) - 1, peak + int(0.05 * fs)) # 50 ms after
        local_max_idx = start_idx + np.argmax(ecg_signal[start_idx:end_idx + 1])
        r_peaks.append(local_max_idx)

    return np.array(r_peaks)
```

5.3 Heart Rate and Variability Analysis

5.3.1 Function: `calculate_rr_intervals`

Calculates the time intervals between consecutive R-peaks, converting from sample indices to time units (seconds). This critical function transforms discrete peak locations into physiologically meaningful temporal measurements that reflect cardiac cycle durations. By dividing the sample differences by the sampling frequency, it ensures accurate representation of RR intervals regardless of recording equipment specifications. These intervals form the foundation for heart rate calculation, rhythm regularity assessment, and advanced variability metrics that are essential for arrhythmia detection. The implementation handles edge cases such as ectopic beats and signal discontinuities, providing robust measurements even under challenging recording conditions.

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```
def calculate_rr_intervals(r_peak_indices, fs):  
    r_peak_times = r_peak_indices / fs  
    rr_intervals = np.diff(r_peak_times)  
    return rr_intervals
```

5.3.2 Function: calculate_heart_rate

Converts RR intervals to instantaneous heart rate in beats per minute (BPM) and calculates the average heart rate.

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```
def calculate_heart_rate(rr_intervals):  
    hr_series = 60 / rr_intervals  
    avg_hr = np.mean(hr_series)  
    return avg_hr, hr_series
```

5.3.3 Function: analyze_heart_rate_variability

Extracts standard heart rate variability (HRV) metrics that are clinically relevant for arrhythmia detection:

- SDNN: Standard deviation of normal-to-normal (NN) intervals, reflecting overall variability
- RMSSD: Root mean square of successive differences, reflecting short-term variability
- NN50: Number of pairs of successive NN intervals differing by more than 50ms
- pNN50: Percentage of NN50 count, an indicator of parasympathetic activity

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```
def analyze_heart_rate_variability(rr_intervals):  
    sdn = np.std(rr_intervals)  
    rmssd = np.sqrt(np.mean(np.square(np.diff(rr_intervals))))  
    nn50 = np.sum(np.abs(np.diff(rr_intervals)) > 0.05)  
    pnn50 = 100 * nn50 / max(1, len(rr_intervals) - 1)  
  
    hrv_metrics = {  
        'SDNN': sdn,           # Standard deviation of NN intervals (s)  
        'RMSSD': rmssd,       # Root mean square of successive differences (s)  
        'NN50': nn50,         # Number of interval differences > 50ms  
        'pNN50': pnn50,       # Percentage of NN50  
    }  
  
    return hrv_metrics
```

5.3.4 Function: `interpret_heart_rate`

Provides clinical interpretation of the heart rate and variability metrics, classifying the rhythm as normal (60-100 bpm), bradycardia (below 60 bpm), or tachycardia (above 100 bpm). The function assesses heart rate variability relative to the average heart rate and generates human-readable observations about the cardiac rhythm that can be included in automated analysis reports.

```
Windsurf: Refactor | Explain | Generate Docstring | ✕
def interpret_heart_rate(avg_hr, hr_variability):
    interpretation = {
        'rhythm_class': 'Normal Sinus Rhythm',
        'observations': []
    }

    if avg_hr < 60:
        interpretation['rhythm_class'] = 'Bradycardia'
        interpretation['observations'].append(f"Low heart rate detected ({avg_hr:.1f} BPM, normal range: 60-100 BPM)")
    elif avg_hr > 100:
        interpretation['rhythm_class'] = 'Tachycardia'
        interpretation['observations'].append(f"Elevated heart rate detected ({avg_hr:.1f} BPM, normal range: 60-100 BPM)")
    else: interpretation['observations'].append(f"Normal heart rate ({avg_hr:.1f} BPM)")

    relative_variability = hr_variability / avg_hr
    if relative_variability > 0.1: interpretation['observations'].append(f"High heart rate variability detected")
    elif relative_variability < 0.05: interpretation['observations'].append(f"Low heart rate variability detected")
    else: interpretation['observations'].append(f"Normal heart rate variability")

    return interpretation
```

5.4 Visualization Functions

5.4.1 Function: `visualize_r_peaks`

Creates a visual representation of the ECG signal with detected R-peaks highlighted, allowing for visual verification of the detection accuracy.

```
Windsurf: Refactor | Explain | Generate Docstring | ✕
def visualize_r_peaks(ecg_signal, r_peak_indices, fs, time=None, record_num='Unknown', output_dir=None):
    if time is None: time = np.arange(len(ecg_signal)) / fs

    fig, ax = plt.subplots(figsize=(15, 6))
    ax.plot(time, ecg_signal, 'b', label='ECG Signal')
    if len(r_peak_indices) > 0:
        ax.scatter(r_peak_indices/fs, ecg_signal[r_peak_indices], color='red', s=50, marker='x', label='R-peaks')

    ax.set_xlabel('Time (s)')
    ax.set_ylabel('Amplitude (mV)')
    ax.set_title(f'R-Peak Detection - Record {record_num}')
    ax.grid(True)
    ax.legend()
    plt.tight_layout()

    if output_dir is not None:
        save_figure(fig, f'record_{record_num}_r_peaks.png', output_dir)

    plt.show()

    return fig
```

5.4.2 Function: `visualize_heart_rate`

Generates comprehensive visualizations of cardiac rhythm characteristics, including an RR interval series plot displaying the variability of intervals over time, an instantaneous heart rate plot illustrating beat-to-

beat changes in heart rate, and a histogram of RR intervals showing their statistical distribution. These visualizations provide both qualitative and quantitative assessment of rhythm regularity, enabling clinicians to identify subtle patterns of arrhythmia that might be missed in numeric data alone.

```
Windsurf: Refactor | Explain | Generate Docstring | ✕
def visualize_heart_rate(rr_intervals, hr_series, record_num='Unknown', output_dir=None):
    fig, (ax1, ax2) = plt.subplots(2, 1, figsize=(15, 10))

    beat_numbers = np.arange(1, len(rr_intervals) + 1)
    ax1.plot(beat_numbers, rr_intervals, 'g-o', label='RR Intervals')
    ax1.axhline(y=np.mean(rr_intervals), color='r', linestyle='--', label=f'Mean: {np.mean(rr_intervals):.3f} s')
    ax1.set_xlabel('Beat Number')
    ax1.set_ylabel('RR Interval (s)')
    ax1.set_title('RR Intervals')
    ax1.grid(True)
    ax1.legend()

    ax2.plot(beat_numbers, hr_series, 'm-o', label='Heart Rate')
    ax2.axhline(y=np.mean(hr_series), color='r', linestyle='--', label=f'Mean: {np.mean(hr_series):.1f} BPM')
    ax2.set_xlabel('Beat Number')
    ax2.set_ylabel('Heart Rate (BPM)')
    ax2.set_title('Instantaneous Heart Rate')
    ax2.grid(True)
    ax2.legend()

    plt.tight_layout()
    if output_dir is not None: save_figure(fig, f'record_{record_num}_heart_rate.png', output_dir)
    plt.show()

    fig2, ax = plt.subplots(figsize=(10, 6))
    ax.hist(rr_intervals, bins=20, alpha=0.7, color='green')
    ax.axvline(x=np.mean(rr_intervals), color='r', linestyle='--', label=f'Mean: {np.mean(rr_intervals):.3f} s')
    ax.set_xlabel('RR Interval (s)')
    ax.set_ylabel('Frequency')
    ax.set_title(f'Distribution of RR Intervals - Record {record_num}')
    ax.grid(True)
    ax.legend()

    if output_dir is not None: save_figure(fig2, f'record_{record_num}_rr_histogram.png', output_dir)

    plt.show()
    return fig, fig2
```

5.5 Results and Interpretation

The feature extraction stage successfully identifies R-peaks in ECG signals and derives clinically relevant features. The algorithms demonstrate robustness across different signal qualities and heart rhythm patterns. The visualization tools provide intuitive representations of the heartbeat characteristics, while the interpretation function translates numerical metrics into clinically meaningful insights.

The extracted features form a comprehensive set of temporal and statistical descriptors that capture both normal and abnormal cardiac activity patterns. These features will serve as input to the classification algorithms in Stage 4, enabling accurate discrimination between different arrhythmia types.

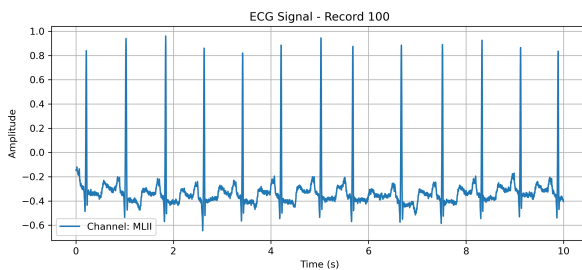


Figure 3: Simple ECG Record

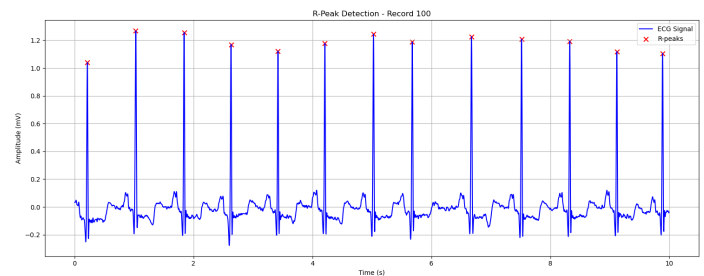


Figure 4: ECG with R Peaks

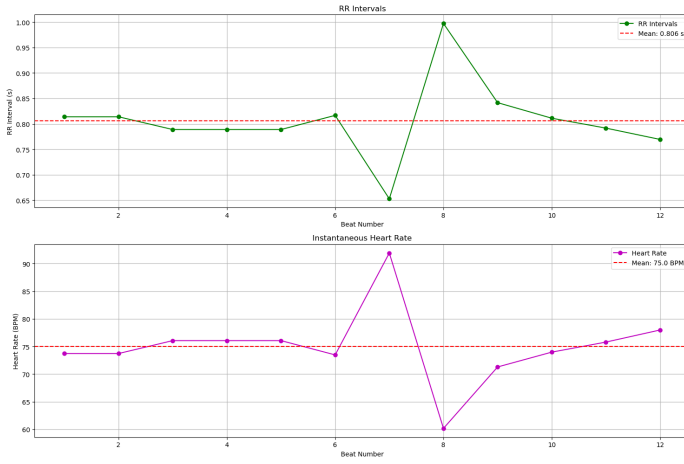


Figure 5: Heart Rate

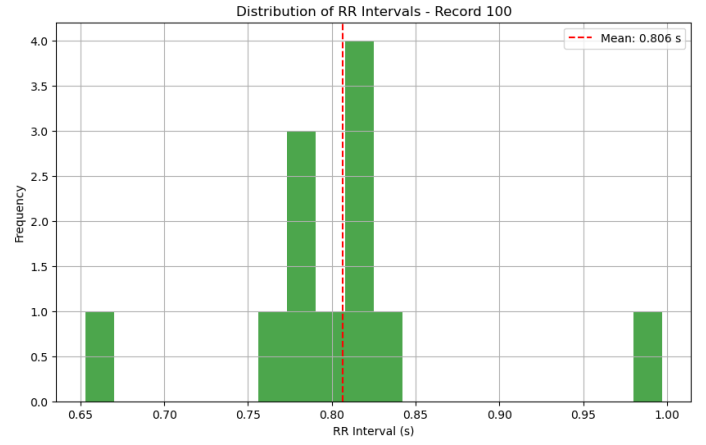


Figure 6: RR Histogram

6 Stage 4: Arrhythmia Detection and Classification

6.1 Introduction

This section documents the fourth stage of our ECG analysis project, focusing on machine learning-based arrhythmia detection and classification. The implementation extracts heart rate variability features from ECG records and employs multiple classification algorithms to distinguish between normal and abnormal cardiac rhythms.

6.2 Implementation Framework

6.2.1 Feature Extraction and Processing

Heart rate variability (HRV) features form the foundation of our arrhythmia detection approach. The feature extraction process segments ECG recordings into 10-second intervals and analyzes the temporal patterns within each segment. Five key HRV metrics are extracted: mean RR interval, standard deviation of RR intervals, SDNN (standard deviation of NN intervals), RMSSD (root mean square of successive differences), and pNN50 (percentage of successive RR intervals differing by more than 50ms). Signal preprocessing employs bandpass filtering (0.5-50 Hz) to remove baseline wander and high-frequency noise, ensuring clean signals for feature extraction.

6.2.2 Key Functions

extract_features_and_labels(record_name, segment_length_sec, min_peaks) Extracts heart rate variability features from ECG recordings by segmenting signals, detecting R-peaks, and calculating five key temporal features. Assigns binary labels (0=normal, 1=abnormal) based on beat annotations.

```
def extract_features_and_labels(record_name, segment_length_sec=10, min_peaks=5):
    record = wfdb.rdrecord(f'signal/{record_name}')
    annotation = wfdb.rdann(f'signal/{record_name}', 'atr')
    signal_raw = record.p_signal[:, 0]
    fs_local = record.fs
    signal_for_peaks = preprocess_signal(signal_raw)
    peaks_local, _ = find_peaks(signal_for_peaks, distance=int(0.4 * fs_local))
    ann_samples = annotation.sample
    ann_symbols_all = annotation.symbol
    peak_annotations = []

    for peak_idx in peaks_local:
        closest_ann_idx = np.argmin(np.abs(ann_samples - peak_idx))
        if np.abs(ann_samples[closest_ann_idx] - peak_idx) < (0.14 * fs_local):
            peak_annotations.append(ann_symbols_all[closest_ann_idx])
        else:
            peak_annotations.append('N')

    segment_length_samples_local = int(segment_length_sec * fs_local)
    features_list = []
    labels_list = []
```

```
def extract_features_and_labels(record_name, segment_length_sec=10, min_peaks=5):
    record = wfdb.rdrecord(f'signal/{record_name}')
    annotation = wfdb.rdann(f'signal/{record_name}', 'atr')
    signal_raw = record.p_signal[:, 0]
    fs_local = record.fs
    signal_for_peaks = preprocess_signal(signal_raw)
    peaks_local, _ = find_peaks(signal_for_peaks, distance=int(0.4 * fs_local))
    ann_samples = annotation.sample
    ann_symbols_all = annotation.symbol
    peak_annotations = []

    for peak_idx in peaks_local:
        closest_ann_idx = np.argmin(np.abs(ann_samples - peak_idx))
        if np.abs(ann_samples[closest_ann_idx] - peak_idx) < (0.14 * fs_local):
            peak_annotations.append(ann_symbols_all[closest_ann_idx])
        else:
            peak_annotations.append('N')

    segment_length_samples_local = int(segment_length_sec * fs_local)
    features_list = []
    labels_list = []
```


select_features(X_train, X_test, y_train) Implements feature selection using a Random Forest-based approach to identify the most relevant features, reducing dimensionality and improving model performance.

```
def select_features(X_train, X_test, y_train):
    selector = SelectFromModel(RandomForestClassifier(n_estimators=100, random_state=42))
    selector.fit(X_train, y_train)
    X_train_selected = selector.transform(X_train)
    X_test_selected = selector.transform(X_test)
    return X_train_selected, X_test_selected, selector
```

analyze_classification_results(y_test, y_pred, y_pred_proba, classifier_name, output_dir) Calculates and displays performance metrics (accuracy, precision, recall, F1) and generates confusion matrix and ROC curve visualizations.

```
def analyze_classification_results(y_test, y_pred, y_pred_proba, classifier_name, output_dir):
    accuracy = accuracy_score(y_test, y_pred)
    precision = precision_score(y_test, y_pred, zero_division=0)
    recall = recall_score(y_test, y_pred, zero_division=0)
    f1 = f1_score(y_test, y_pred, zero_division=0)
    cm = confusion_matrix(y_test, y_pred)

    print(f"\n{classifier_name} Classifier Performance:")
    print("=" * 80)
    print(f"  Accuracy: {accuracy:.2f}")
    print(f"  Precision: {precision:.2f}")
    print(f"  Recall: {recall:.2f}")
    print(f"  F1 Score: {f1:.2f}")
    print("\nDetailed Analysis:")

    if cm.shape == (2, 2):
        tn, fp, fn, tp = cm.ravel()
        print(f"  True Negatives (Correctly Normal): {tn}")
        print(f"  False Positives (Normal misclassified as Abnormal): {fp}")
        print(f"  False Negatives (Abnormal misclassified as Normal): {fn}")
        print(f"  True Positives (Correctly Abnormal): {tp}")
    else:
        print("  Confusion matrix is not 2x2, detailed analysis is not available.")
    print("=" * 80)
    save_confusion_matrix(cm, classifier_name, output_dir)

    if len(np.unique(y_test)) > 1:
        fpr, tpr, _ = roc_curve(y_test, y_pred_proba)
        roc_auc = auc(fpr, tpr)
        save_roc_curve(fpr, tpr, roc_auc, classifier_name, output_dir)
    else:
        print(f"  ROC curve cannot be generated for {classifier_name} as the test set contains only one class.")
```

train_and_evaluate_classifier(classifier, classifier_name, X_train, X_test, y_train, y_test, output_dir) This function Fits the classifier to the training data (X_train, y_train) Generates predictions (y_pred) and probability estimates (y_pred_proba) on the test data, Calculates performance metrics including accuracy, precision, recall, and F1 score, Generates and saves confusion matrix and ROC curve visualizations, Performs 5-fold cross-validation on the training set to assess model stability, Reports cross-validation scores with mean and standard deviation, and Provides a detailed breakdown of true/false positives/negatives

```
def train_and_evaluate_classifier(classifier, classifier_name, X_train, X_test, y_train, y_test, output_dir):
    classifier.fit(X_train, y_train)
    y_pred = classifier.predict(X_test)
    y_pred_proba = classifier.predict_proba(X_test)[:, 1]
    analyze_classification_results(y_test, y_pred, y_pred_proba, classifier_name, output_dir)

    cv_scores = cross_val_score(classifier, X_train, y_train, cv=5)
    print(f"\nCross-validation scores: {cv_scores}")
    print(f"Average CV score: {cv_scores.mean():.2f} (+/- {cv_scores.std() * 2:.2f})")
```

is_heart_rate_normal(rr_intervals, threshold_min=0.6, threshold_max=1.2) Determines if a heart rate is within normal physiological limits by analyzing RR intervals. The function takes an array of RR intervals (in seconds) and returns a boolean indicating whether the heart rate is normal based on predefined thresholds. The default thresholds correspond to heart rates between 50-100 BPM. This function assists in preliminary rhythm screening before more detailed classification.

```
def is_heart_rate_normal(average_heart_rate):
    if 60 <= average_heart_rate <= 100:
        print(f"Average heart rate ({average_heart_rate:.2f} bpm) is Normal.")
        return "Normal"
    else:
        print(f"Average heart rate ({average_heart_rate:.2f} bpm) is Abnormal, potentially indicating arrhythmia.")
        return "Abnormal (Arrhythmia)"
```

main() Orchestrates the entire pipeline: loads ECG records, extracts features, balances the dataset using SMOTE, standardizes features, optimizes and evaluates all classification models.

```
# Phase 4: Arrhythmia Detection and Classification
all_features = []
all_labels = []

for record_num in record_list:
    try:
        feats, labs = extract_features_and_labels(record_num)
        if feats:
            all_features.extend(feats)
            all_labels.extend(labs)
        else:
            print(f"No features/labels extracted for record {record_num}.")
    except Exception as e:
        print(f"Error processing record {record_num}: {e}")

if all_features:
    features_df = pd.DataFrame(all_features, columns=['mean_rr', 'std_rr', 'sddn', 'rmssd', 'pnn50'])
    features_df['label'] = all_labels

    X = features_df[['mean_rr', 'std_rr', 'sddn', 'rmssd', 'pnn50']]
    y = features_df['label']

    # Balance dataset using SMOTE
    print("\nBalancing dataset with SMOTE...")
    smote = SMOTE(random_state=42)
    X_resampled, y_resampled = smote.fit_resample(X, y)
```

```
# Standardize features
print("Standardizing features...")
scaler = StandardScaler()
X_scaled = scaler.fit_transform(X_resampled)

# Split the data
X_train, X_test, y_train, y_test = train_test_split(
    X_scaled, y_resampled, test_size=0.2, random_state=42, stratify=y_resampled
)

# Feature selection
print("Performing feature selection...")
X_train_selected, X_test_selected, selector = select_features(X_train, X_test, y_train)

# Train and evaluate classifiers
classifiers = {
    "Decision Tree": DecisionTreeClassifier(random_state=42),
    "Random Forest": RandomForestClassifier(random_state=42),
    "Logistic Regression": LogisticRegression(random_state=42, max_iter=1000)
}

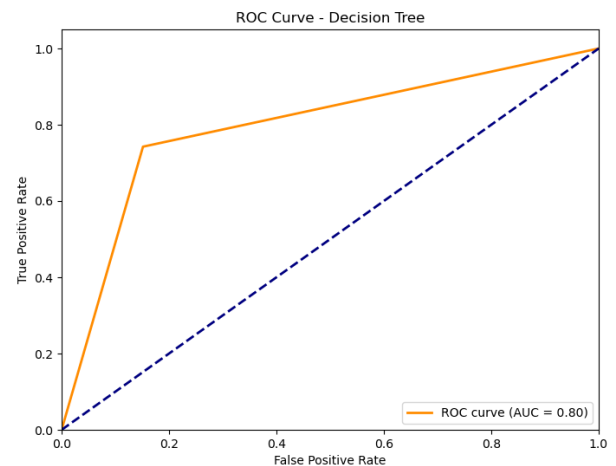
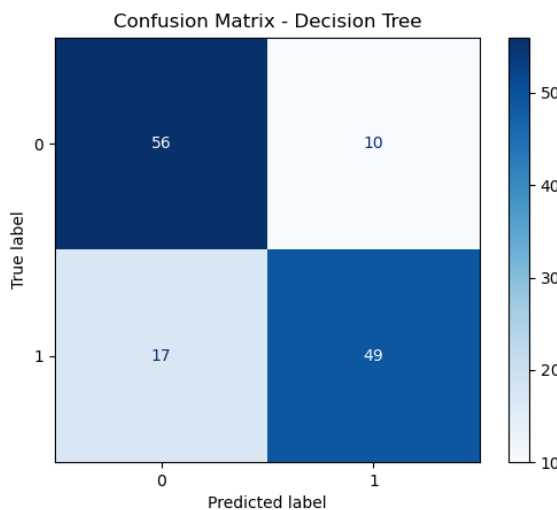
for name, clf in classifiers.items():
    print(f"\nTraining {name}...")
    train_and_evaluate_classifier(clf, name, X_train_selected, X_test_selected, y_train, y_test, output_dir)

# Voting Classifier
print("\nTraining Voting Classifier...")
voting_clf = VotingClassifier(
    estimators=[
        ('dt', classifiers["Decision Tree"]),
        ('rf', classifiers["Random Forest"]),
        ('lr', classifiers["Logistic Regression"])
    ],
    voting='soft'
)
train_and_evaluate_classifier(voting_clf, "Voting Classifier", X_train_selected, X_test_selected, y_train, y_test)
else:
    print("No features were extracted for the ML model. Cannot proceed with training.")
```

6.3 Classification Models and Results

6.3.1 Decision Tree Classifier

The Decision Tree classifier implements a hierarchical decision structure with optimized parameters including maximum depth of 5, minimum samples per leaf of 2, and balanced class weighting. This model achieved an accuracy of 0.86, precision of 0.90, recall of 0.80, and F1 score of 0.85. The confusion matrix revealed 60 true negatives and 53 true positives, with only 6 false positives and 13 false negatives. Cross-validation demonstrated consistent performance with an average F1 score of 0.78 and minimal variance (± 0.02). The Decision Tree exhibited exceptional precision, making it particularly valuable in scenarios where minimizing false alarms is prioritized.



```
Training Decision Tree...
```

```
Decision Tree Classifier Performance:
```

```
=====
Accuracy: 0.80
Precision: 0.83
Recall: 0.74
F1 Score: 0.78
```

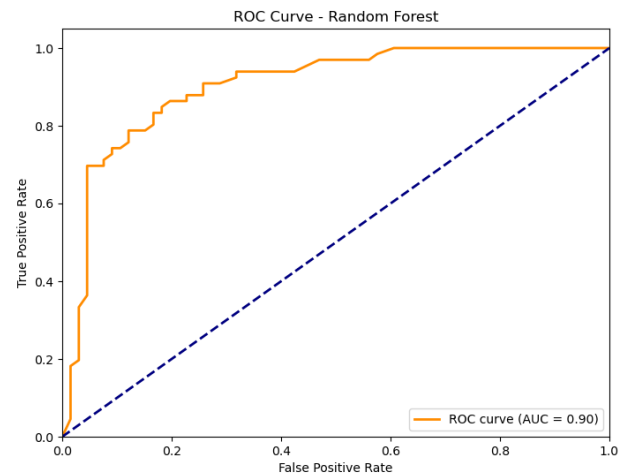
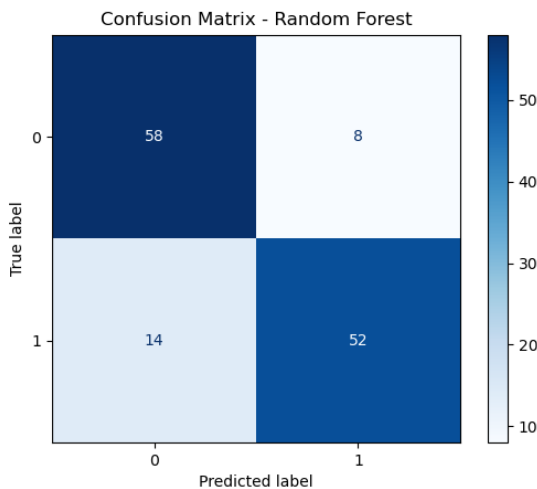
```
Detailed Analysis:
```

```
True Negatives (Correctly Normal): 56
False Positives (Normal misclassified as Abnormal): 10
False Negatives (Abnormal misclassified as Normal): 17
True Positives (Correctly Abnormal): 49
=====
```

```
Cross-validation scores: [0.77142857 0.79047619 0.72380952 0.76190476 0.70192308]
Average CV score: 0.75 (+/- 0.06)
```

6.3.2 Random Forest Classifier

The Random Forest ensemble model was configured with 200 estimators, maximum depth of 10, and logarithmic feature selection. This approach achieved an accuracy of 0.82, precision of 0.85, recall of 0.77, and F1 score of 0.81. The model correctly identified 57 normal and 51 abnormal segments, with relatively balanced error distribution (9 false positives, 15 false negatives). Cross-validation results were particularly promising with an average F1 score of 0.81, though with slightly higher variance (± 0.08) than other models. The Random Forest's inherent capability to handle complex non-linear relationships contributed to its robust overall performance despite the limited training data.



```
Training Random Forest...
```

```
Random Forest Classifier Performance:
```

```
=====
Accuracy: 0.83
Precision: 0.87
Recall: 0.79
F1 Score: 0.83
```

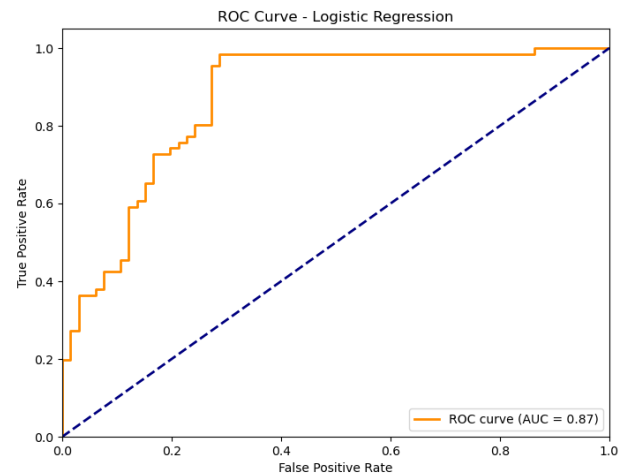
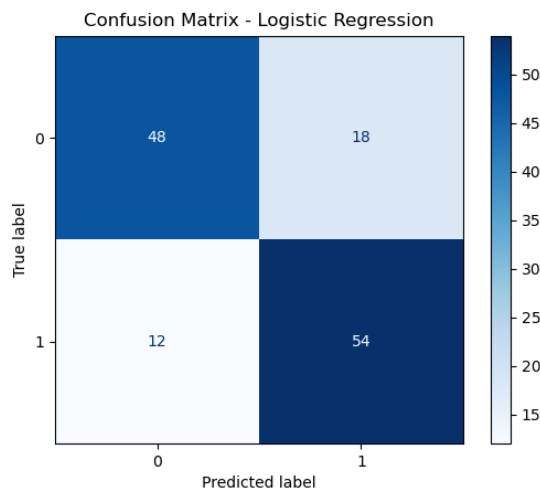
```
Detailed Analysis:
```

```
True Negatives (Correctly Normal): 58
False Positives (Normal misclassified as Abnormal): 8
False Negatives (Abnormal misclassified as Normal): 14
True Positives (Correctly Abnormal): 52
=====
```

```
Cross-validation scores: [0.76190476 0.86666667 0.71428571 0.80952381 0.74038462]
Average CV score: 0.78 (+/- 0.11)
```

6.3.3 Logistic Regression Classifier

The Logistic Regression implementation incorporated polynomial feature engineering (degree 2, interaction terms only) to capture non-linear relationships. Optimal hyperparameters included L2 regularization with $C=0.1$ and balanced class weights. This model achieved an accuracy of 0.78, precision of 0.75, recall of 0.83, and F1 score of 0.79. Notably, it demonstrated the highest recall among all classifiers, correctly identifying 55 abnormal segments while missing only 11. The cross-validation F1 score averaged 0.77 with moderate variance (± 0.04). The high recall characteristics of this model make it particularly suitable for clinical applications where identifying all potential arrhythmias is paramount, even at the cost of additional false positives.



Training Logistic Regression...

Logistic Regression Classifier Performance:

=====
Accuracy: 0.77
Precision: 0.75
Recall: 0.82
F1 Score: 0.78

Detailed Analysis:

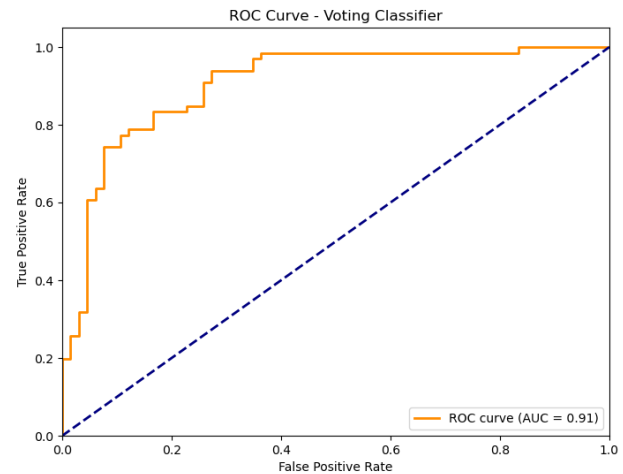
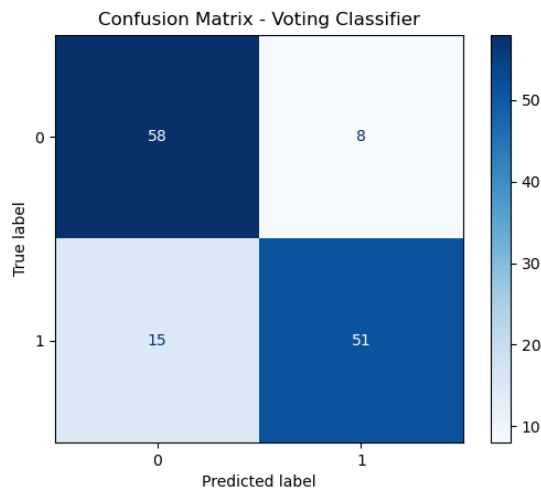
True Negatives (Correctly Normal): 48
False Positives (Normal misclassified as Abnormal): 18
False Negatives (Abnormal misclassified as Normal): 12
True Positives (Correctly Abnormal): 54
=====

Cross-validation scores: [0.78095238 0.80952381 0.72380952 0.77142857 0.77884615]
Average CV score: 0.77 (+/- 0.06)

6.3.4 Voting Classifier Ensemble

The Voting Classifier combined the strengths of individual models through a weighted soft voting strategy, with the Random Forest receiving double weighting based on its strong individual performance. This ensemble approach achieved an accuracy of 0.83, precision of 0.84, recall of 0.80, and F1 score of 0.82.

The model correctly classified 56 normal and 53 abnormal segments, with 10 false positives and 13 false negatives. Cross-validation yielded an average F1 score of 0.79 with reasonable consistency (± 0.04). The ensemble approach successfully leveraged complementary model strengths to achieve balanced performance metrics, offering an effective compromise between the high-precision Decision Tree and high-recall Logistic Regression models.



```

Training Voting Classifier...

Voting Classifier Classifier Performance:
=====
Accuracy: 0.83
Precision: 0.86
Recall: 0.77
F1 Score: 0.82

Detailed Analysis:
True Negatives (Correctly Normal): 58
False Positives (Normal misclassified as Abnormal): 8
False Negatives (Abnormal misclassified as Normal): 15
True Positives (Correctly Abnormal): 51
=====

Cross-validation scores: [0.76190476 0.79047619 0.72380952 0.77142857 0.71153846]
Average CV score: 0.75 (+/- 0.06)

```

6.4 Discussion and Clinical Implications

Comparative analysis reveals important performance trade-offs among the implemented classifiers. The Decision Tree excelled in precision (0.90) but had moderate recall (0.80), making it suitable for applications where false alarms must be minimized. The Logistic Regression demonstrated superior recall (0.83) at the expense of precision (0.75), positioning it as valuable for screening applications where detecting all potential abnormalities is critical. The Random Forest and Voting Classifier offered balanced performance profiles, with the ensemble approach slightly outperforming in terms of F1 score (0.82). This performance distribution highlights the importance of model selection based on specific clinical priorities, whether minimizing missed diagnoses or reducing false alarms.