

# **Classification of Cardiac Arrhythmias with Intra and Inter-Patient Paradigm using Transfer Learning**

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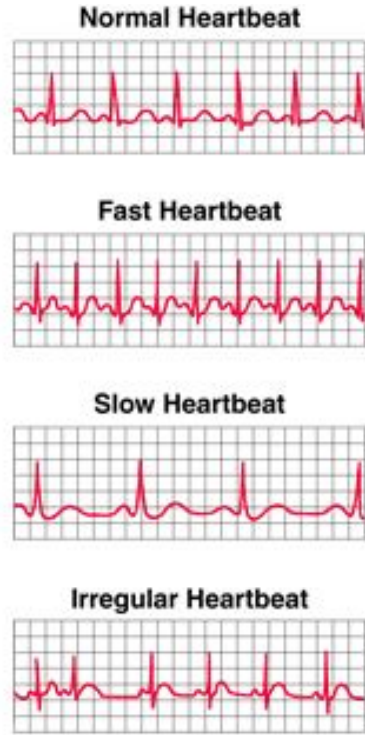
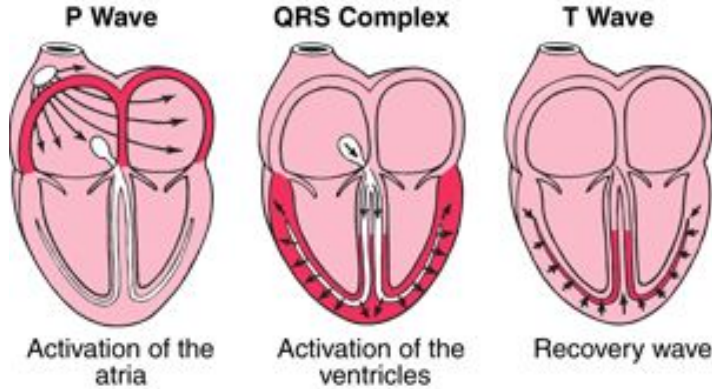
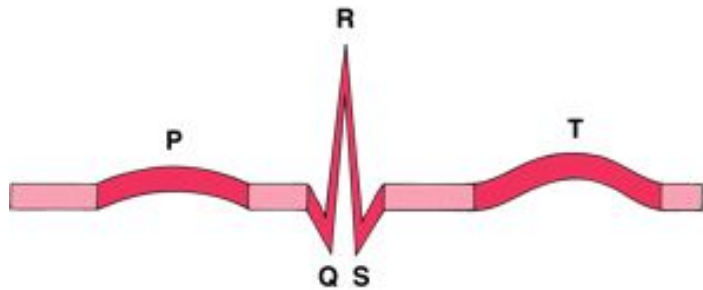


Figure 1: Reading EGC wave signals' and interpretation

## What is cardiac arrhythmia?

Cardiac Arrhythmia is related with the cardiac **abnormal** heart beat according to the **bad working of the electrical signals** that coordinate the cardiac pulse.

# 175 million

- [...] of hospitalizations worldwide for **atrial** fibrillation-like arrhythmia [Sobrac, 2020];
- United States: cardiac arrhythmias account for more than **750,000 hospitalizations** every year;
- The disease with the **highest mortality rate** over the last two decades [Fang, 2019];
- Detection at an advanced stage of the disease, which makes it **potentially fatal** [Ullah et al., 2020], [Newman, 2020].

# Objective

This research aims to identify and **classify cardiac arrhythmias** according to the variation of the ECG signal, using a **machine learning method with a neural network**.

The proposed solution will enable the development of systems for the **continuous monitoring of patients**.



Figure 2: Smartband Clock.

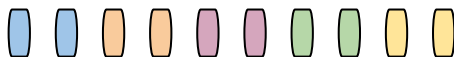


Figure 3: Smartband Clock.

## Intra-patient Paradigm



### ECG Data Segmentation



### Train and Test Data Separation:

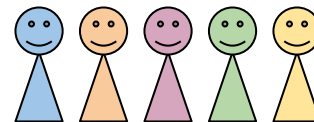
Treino



Teste

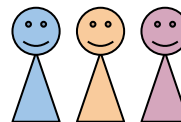


## Inter-patient Paradigm

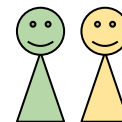


### Train and Test Data Separation:

Treino



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### ECG Data Segmentation

Treino



Teste



Figure 5: Inter-intra-patient paradigm used.

# Related Works

Autor	Data Base	Number of Classes	Method	Application/Notes	Accuracy
Mousavi et al., 2019	MIT	5	CNN	Classificação com redes profundas utilizando intra- inter-paciente e SMOTE	99,92% e 99,53%
Sannio, 2018	MIT	2	DNN	Pré-processamento com técnicas matemáticas	100%
Wu et al., 2018	MIT and DeepQ	5 and 2	CNN	Classificação com redes profundas	93% e 94%
Li et al., 2019	MIT	5	Bi-LSTM	Classificação com redes profundas de Atenção	99,49%
Kachuee et al., 2018	MIT and PTB	5 and 2	CNN	Classificação com técnica de transferência de aprendizagem	93,4% e 95,9%

**Table 1:** Summary of Related Works (the author, 2022).

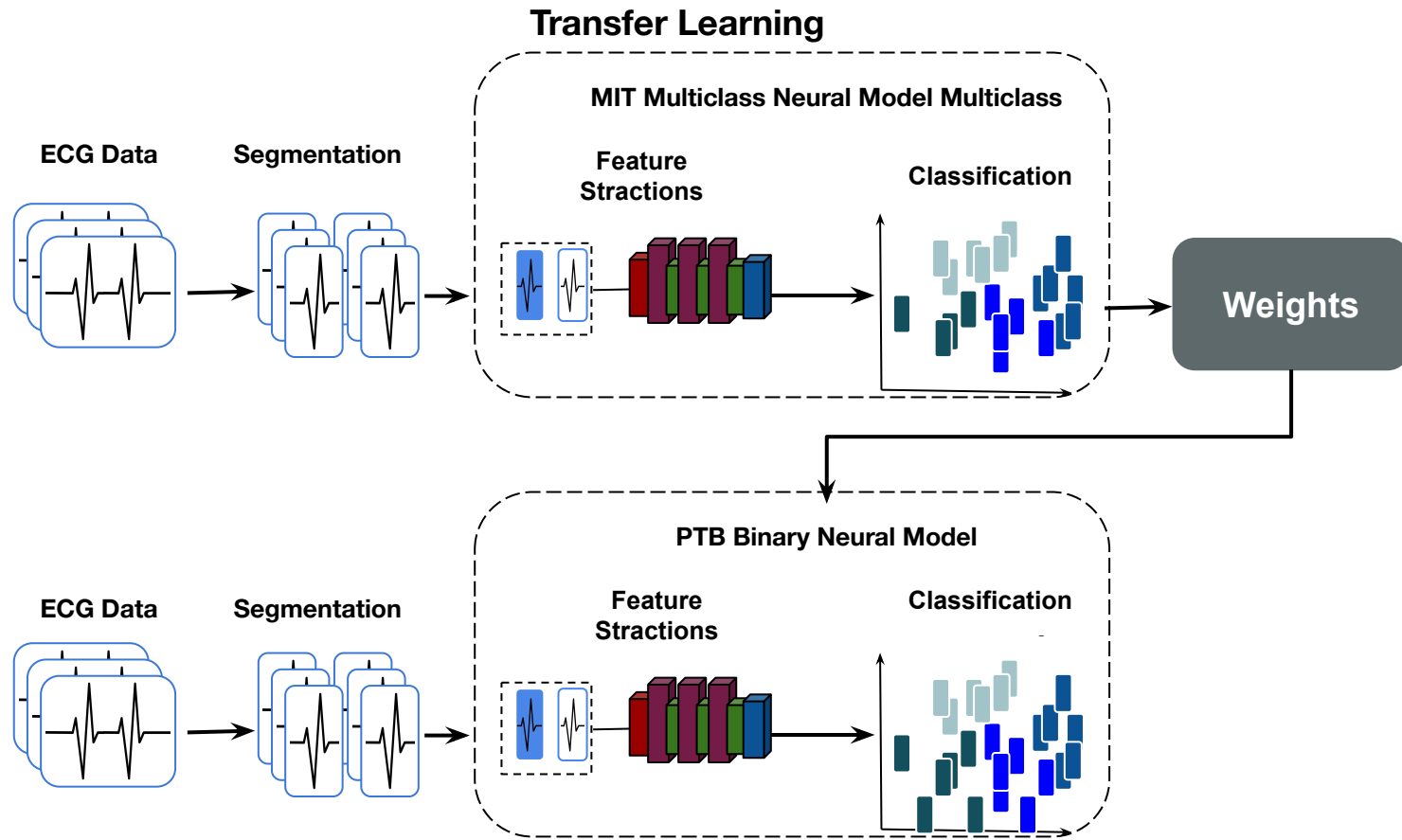


Figure 5: Method to classify cardiac arrhythmia.

# ECG Data- MIT

Rótulo na base MIT-BIH	Anotação	Categoria AAMI
N	Normal Beat	N
L	Left branch block beat	
R	Right branch block beat	
j	Nodal escape beat (junctional)	
E	Ventricular escape beat	
A	Atrial premature beat	S
a	Aberrant atrial premature beat	
J	Nodal (junction) premature beat	
S	Ectopic or supraventricular premature beat	
V	Premature ventricular contraction	V
e	Atrial escape beat	
F	Fusion of ventricular and normal beat	F
/	Beat with rhythm	Q
f	Fusion of normal and rhythmic rhythm	
Q	Unclassified beat	

## MIT database:

- MIT-BIH Arrhythmia
- contains 48 half-hour snippets of ambulatory ECG recordings
- Mixed inpatient (about 60%) and outpatient (about 40%) population at Beth Israel Hospital in Boston.
- Database published by the BIH Arrhythmia Laboratory between 1975 and 1979



# ECG Data - PTB

Rótulo na base PTB/ Anotação	Categoria
Myocardial infarction	Myocardial infarction
Healthy control	Other Arrhythmias
Cardiomyopathy	
Bundle branch block	
Dysrhythmia	
Hypertrophy	
Valvulopathy	
Myocarditis	
Stable angina	

PTB database:

- PTB Diagnostics by Physionet
- contains 549 records of ambulatory recordings of ECG signals
- 290 individuals aged 17 to 87 years, with 209 men and 81 women
- Base published in 2004
- The base was binarized for classification [Kachuee, 2018]

# Segmentation

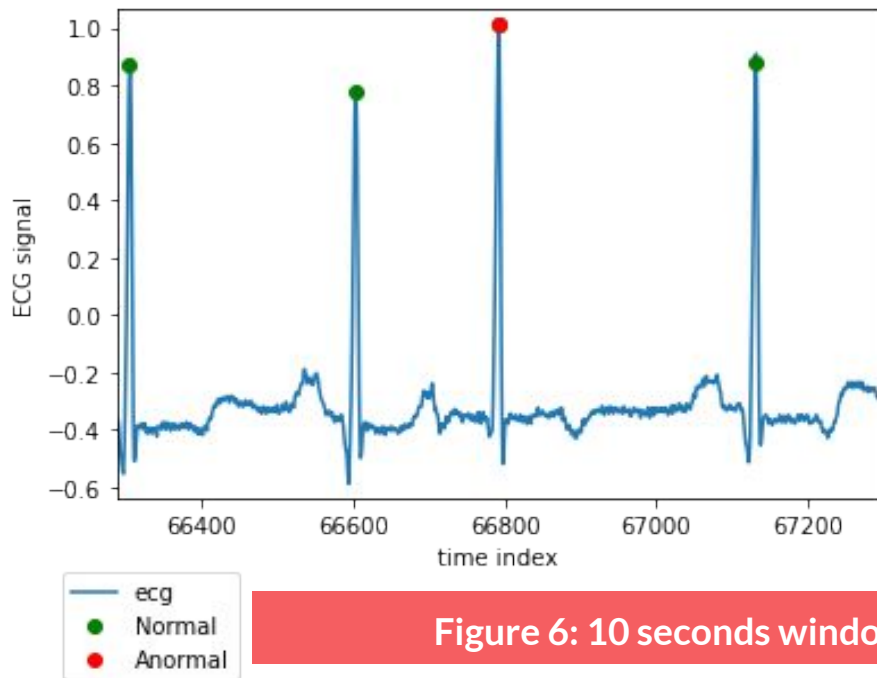
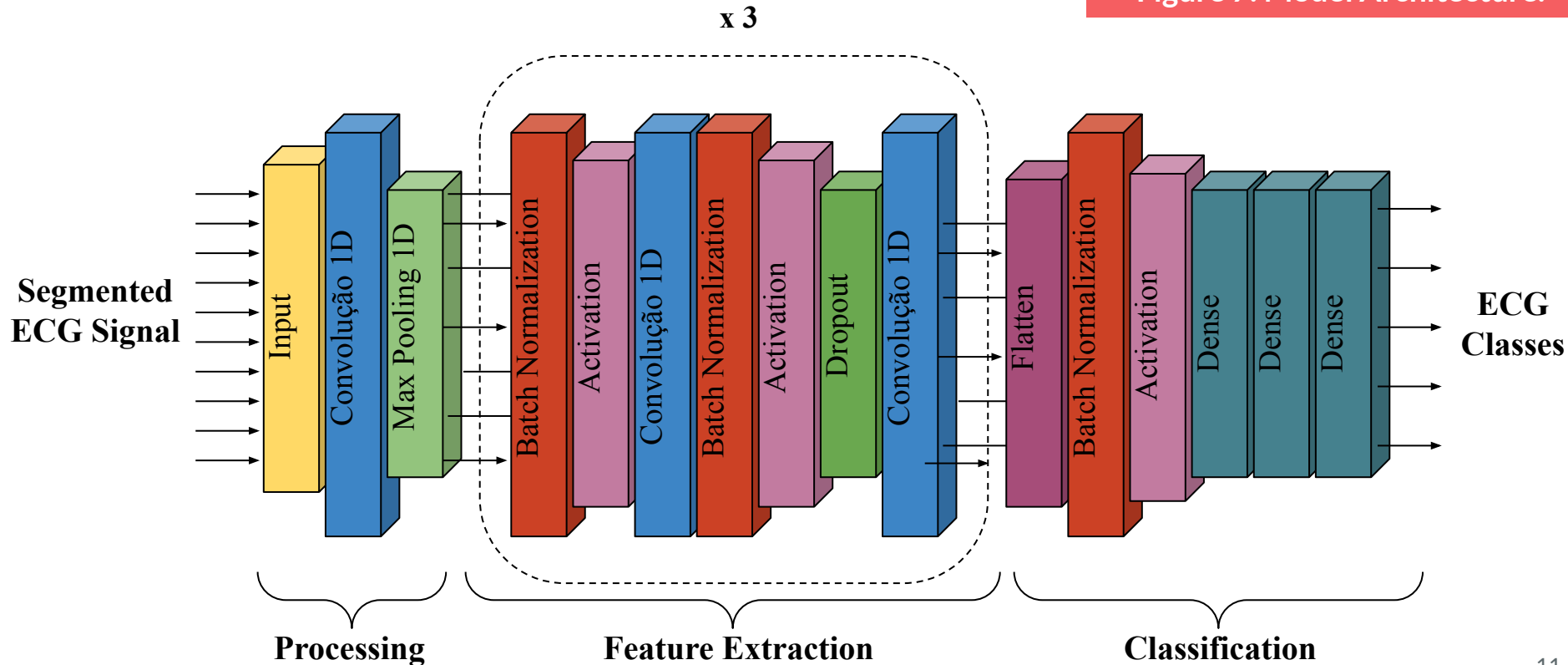


Figure 6: 10 seconds window.

- Inter-patient paradigm used in the separation of the base
- 90% for training base and 10% for testing base [Li, 2019] [SOBRAC, 2020]
- 10 second windowing [Kachuee, 2018]

# Feature Extraction Model and Classification

Figure 7: Model Architecture.



# Results- MIT Dataset

**Table 2:** Results of the MIT Intra-Patient Paradigm.

Method	Class	Acc(%)	se(%)	sp(%)	+p(%)
Current	N	91,53	98	73	92
	S		39	99	88
	V		71	99	88
	F		60	100	50
	Q		86	99	96
Baseline	N	90,87	91	89	98
	S		73	99	67
	V		75	95	28
	F		60	99	15
	Q		92	97	80

**Table 3:** Results of the MIT Inter-Patient Paradigm.

Method	Class	Acc(%)	se(%)	sp(%)	+p(%)
Current	N	86,21	92	45	94
	S		11	97	09
	V		49	96	39
	F		0	100	0
	Q		46	97	40
Baseline	N	86,12	87	8	98
	S		0	97	0
	V		0	93	0
	F		0	99	0
	Q		8	95	2

# Results – PTB Dataset

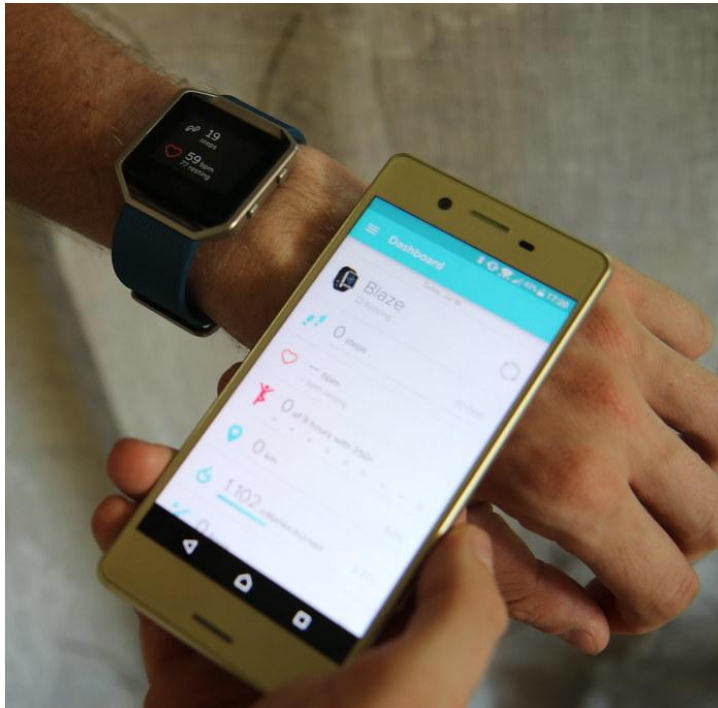
**Table 4:** Results of the PTB Intra-Patient Paradigm.

Method	Class	Acc(%)	se(%)	sp(%)	+p(%)
<b>Current</b>	Myocardial infarction	97,10	78	66	93
	Others'		66	78	33
<b>Baseline</b>	Myocardial infarction	<b>99,95</b>	<b>100</b>	<b>100</b>	<b>100</b>
	Others'		<b>100</b>	<b>100</b>	<b>100</b>

**Table 5:** Results of the PTB Inter-patient Paradigm.

Method	Class	Acc(%)	se(%)	sp(%)	+p(%)
<b>Current</b>	Myocardial infarction	<b>81,81</b>	<b>86</b>	<b>60</b>	<b>91</b>
	Others'		<b>60</b>	<b>86</b>	<b>48</b>
<b>Baseline</b>	Myocardial infarction	76,40	83	59	84
	Others'		59	83	59

# Future Works



- Test **data augmentation** and learning transfer methods
- Increase accuracy for **minority classes**
- **Balance** the base
- Compress the model and ship it to a **wearable**.

Figura 9: Wearable connected to Android

Thanks for the  
attention

SOLI DEO GLORIA

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