The background features a dark blue gradient with faint, glowing circular patterns and lines, resembling a technical or medical interface. At the bottom, there is a silhouette of a mountain range under a starry night sky.

# A ROBUST FETAL ECG DETECTION METHOD FOR ABDOMINAL RECORDINGS

IMPLEMENTED BY VALERIA STIGHEZZA,

INSPIRED BY SUZANNA M. M. MARTENS, CHIARA  
RABOTTI, MASSIMO MISCHI AND ROB J. SLUIJTERY

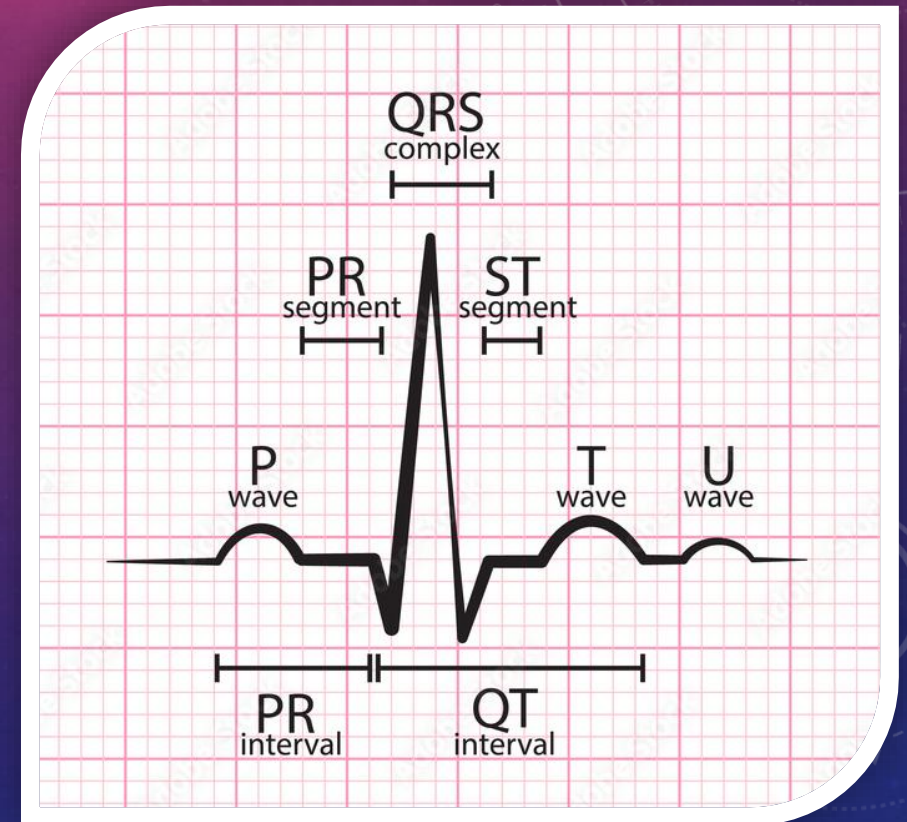


# INTRODUCTION



# WHY IS FECG IMPORTANT? HOW IS IT DONE?

- Morphological and temporal parameters of the ECG of the foetus during gestation can provide information about the fetal well-being, e.g. level of fetal oxygenation
- FECG can be obtained by placing electrodes on the mother's abdomen
- FECG detection = detection of a small amplitude fetal signal overwhelmed by a large number of interference signals and noise



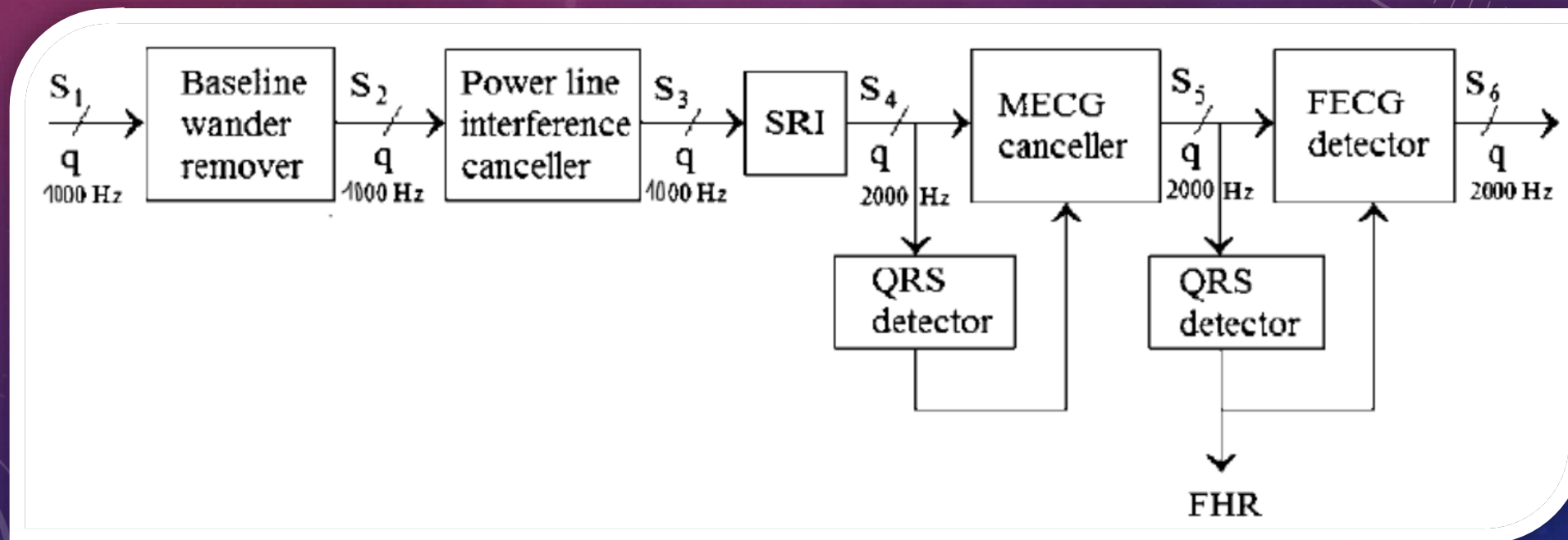


# METHODOLOGY



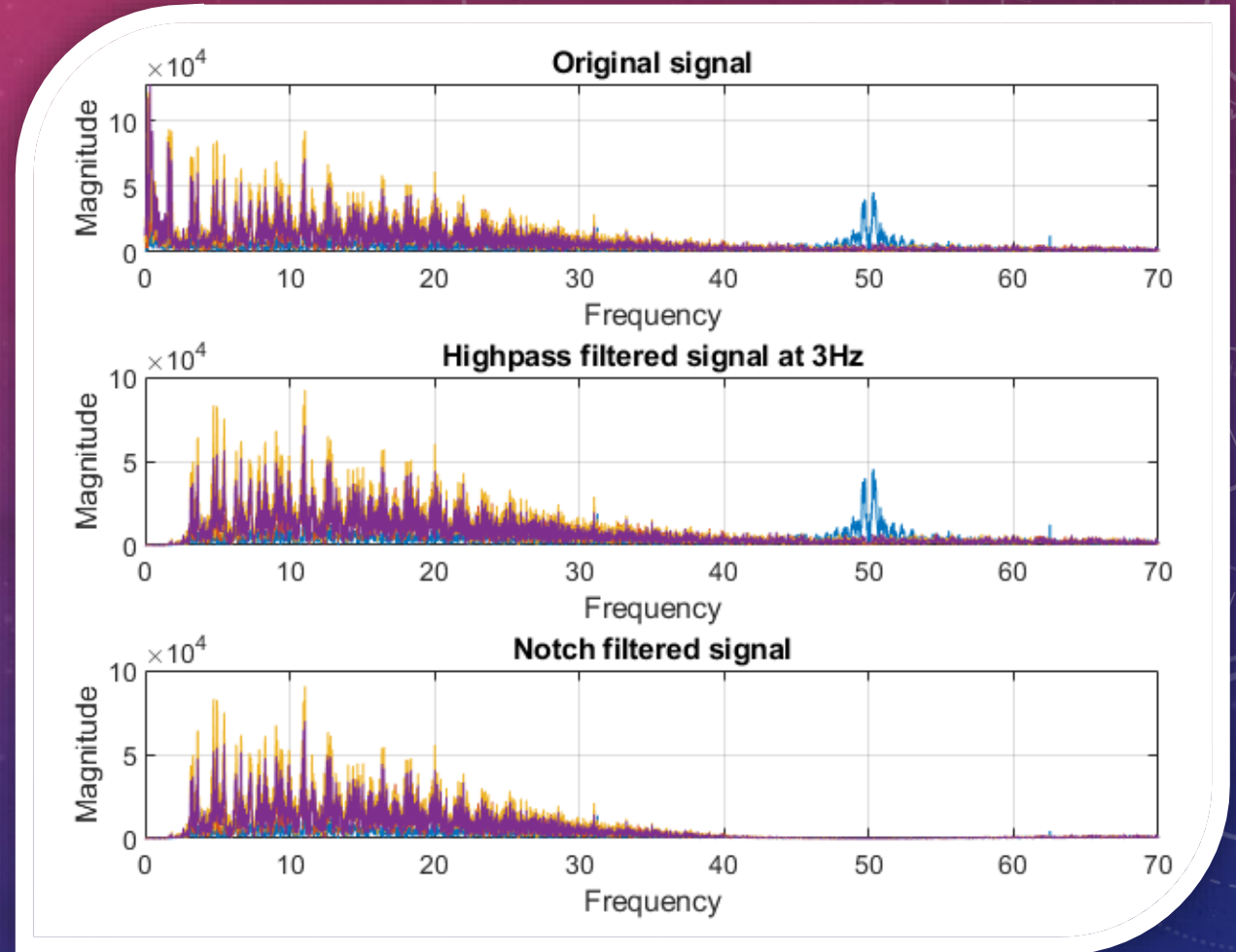
# APPROACH: SEQUENTIAL ANALYSIS (SA)

- Estimating and removing the interference signals step-by-step, using *a priori* information about the interference signals and the signal of interest



# FILTERING

- LINEAR INTERPOLATION  
To replace NaN values
- BASELINE WANDER REMOVER  
Highpass filter at 3 Hz
- POWER – LINE INTERFERENCE CANCELLER  
Notch filter at 50 Hz

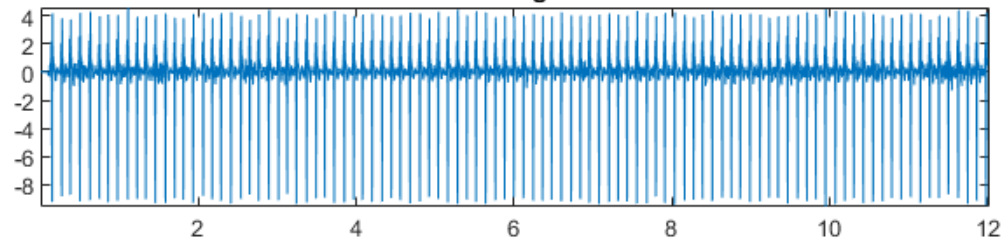


# MQRS DETECTOR

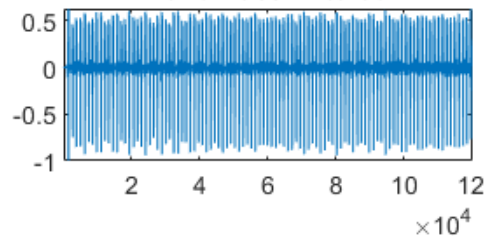
1. MULTI- CHANNEL QRS ENHANCEMENT METHOD → using **PCA**
2. UPSAMPLING up to 2000 Hz
3. PAN TOMPKINS QRS DETECTOR
  - Additional filtering
    - band pass 5 – 15 Hz → noise cancellation
    - derivative filter → emphasizing R peaks
    - moving average (150 ms window) → get smoother signal
  - R-peaks detector
    - adaptive thresholds and decision rules



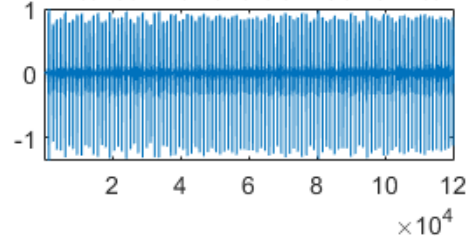
Raw Signal



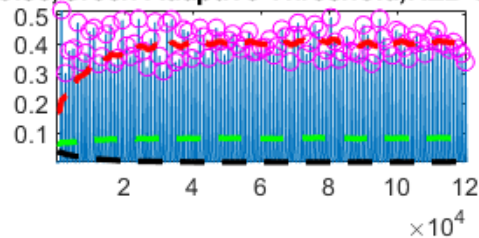
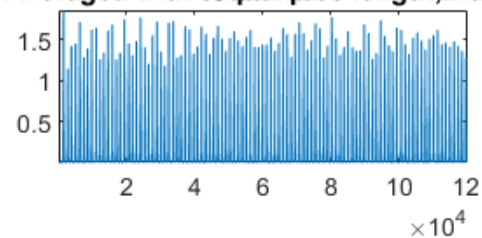
Band Pass Filtered



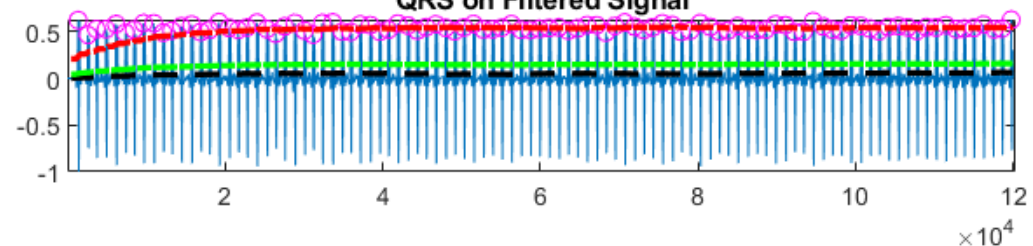
Filtered with the derivative filter



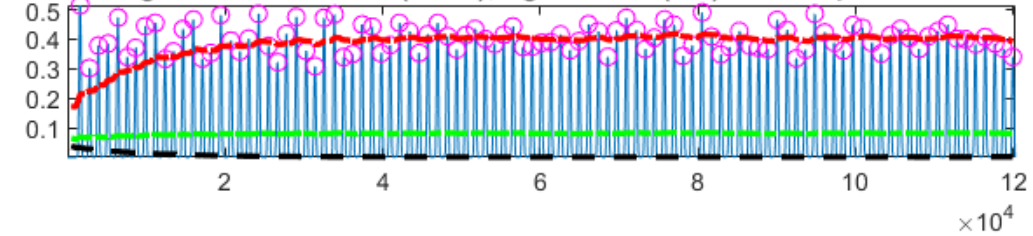
Averaged with 30 samples length, Black noise, Green Adaptive Threshold, RED Sig Level



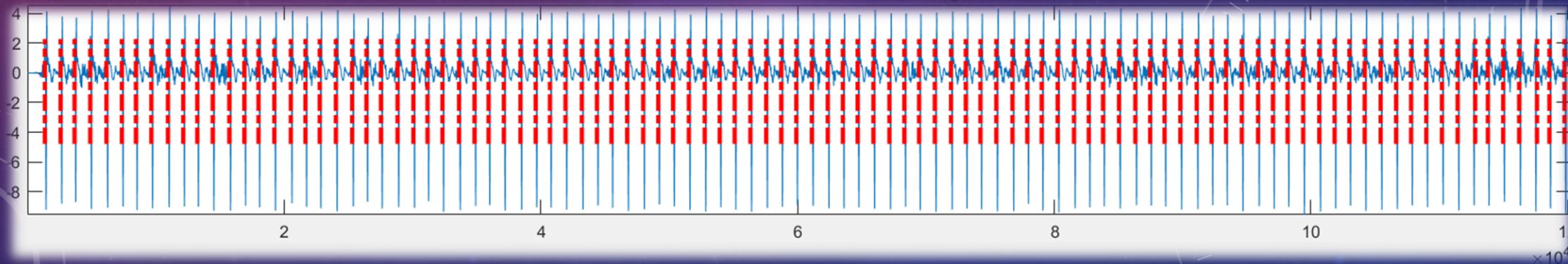
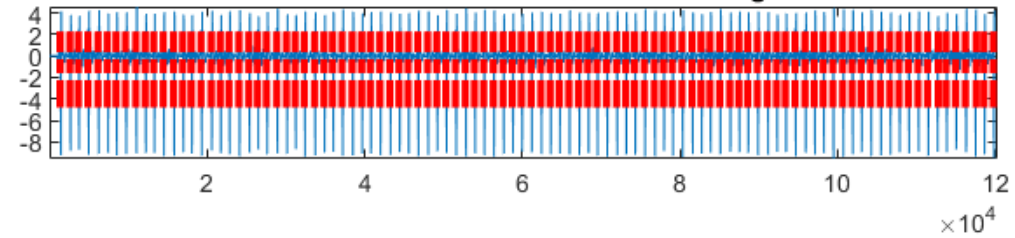
QRS on Filtered Signal



QRS on MVI signal and Noise level(black), Signal Level (red) and Adaptive Threshold(green)

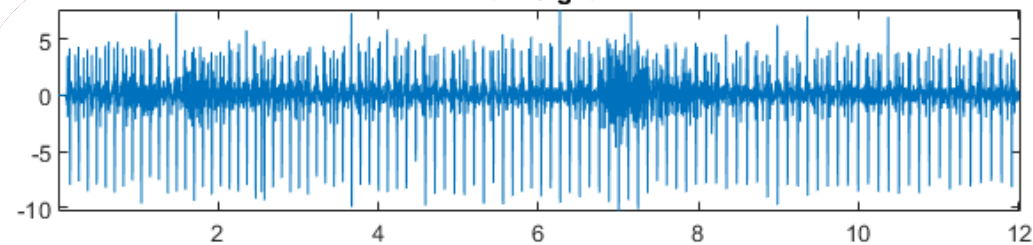


Pulse train of the found QRS on ECG signal

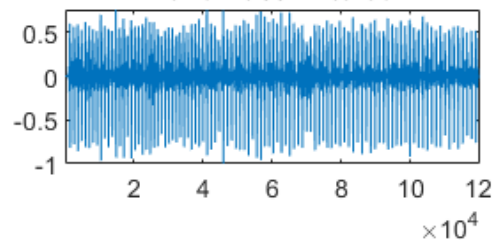




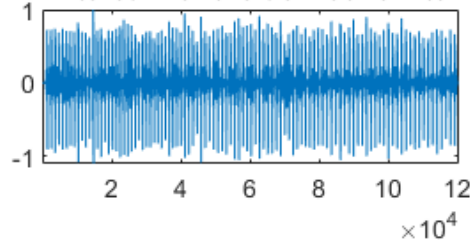
Raw Signal



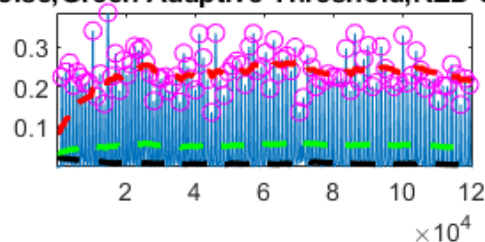
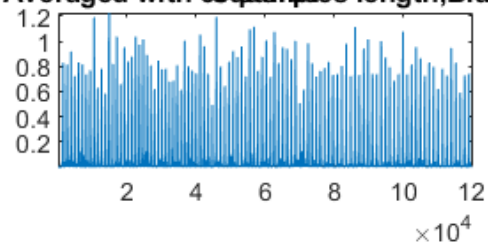
Band Pass Filtered



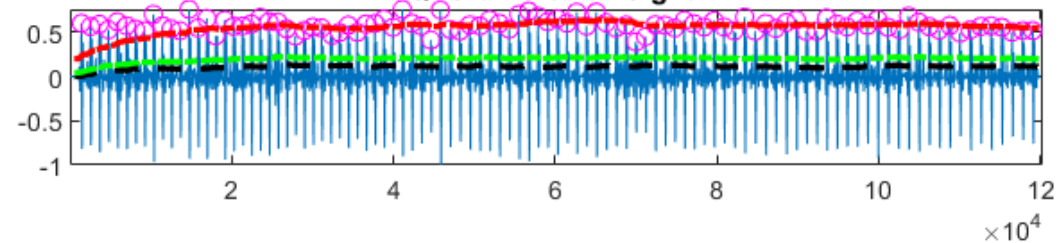
Filtered with the derivative filter



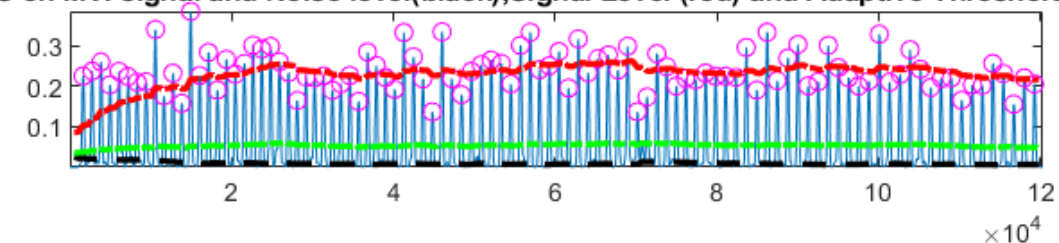
Averaged with 38 samples length, Black noise, Green Adaptive Threshold, RED Sig Level



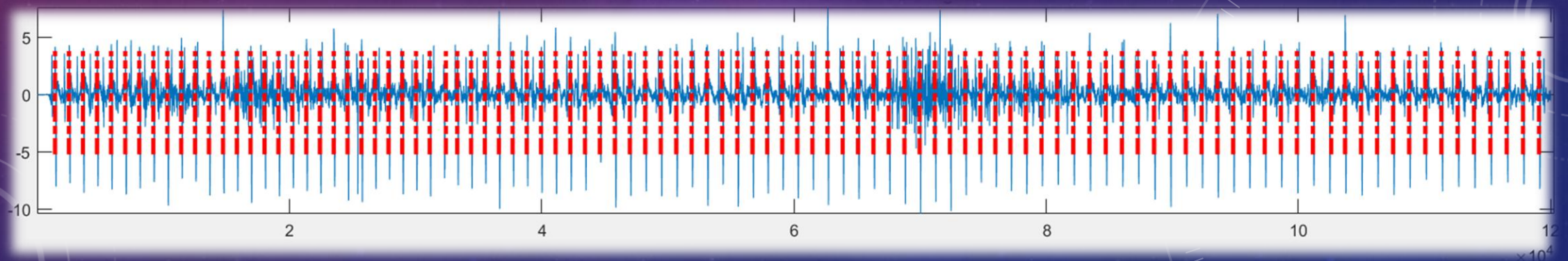
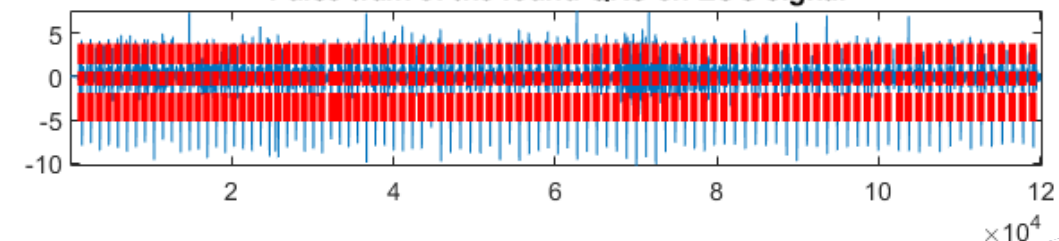
QRS on Filtered Signal



QRS on MVI signal and Noise level(black), Signal Level (red) and Adaptive Threshold(green)

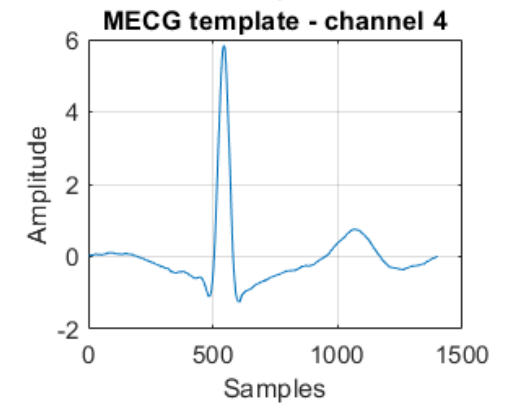
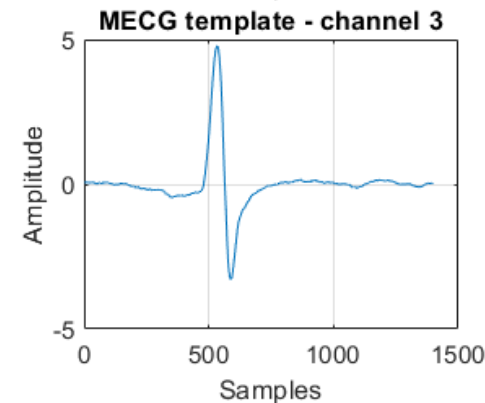
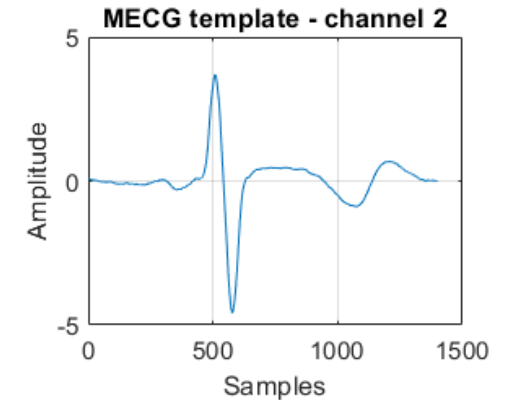
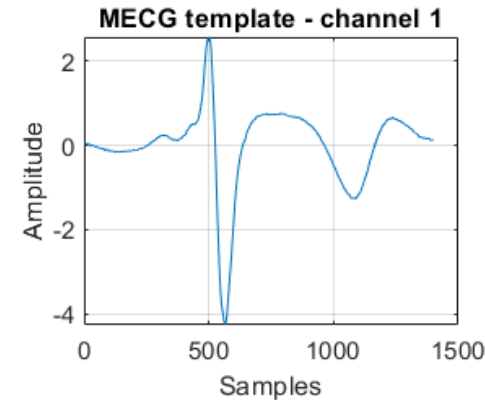


Pulse train of the found QRS on ECG signal



# MQRS TEMPLATE

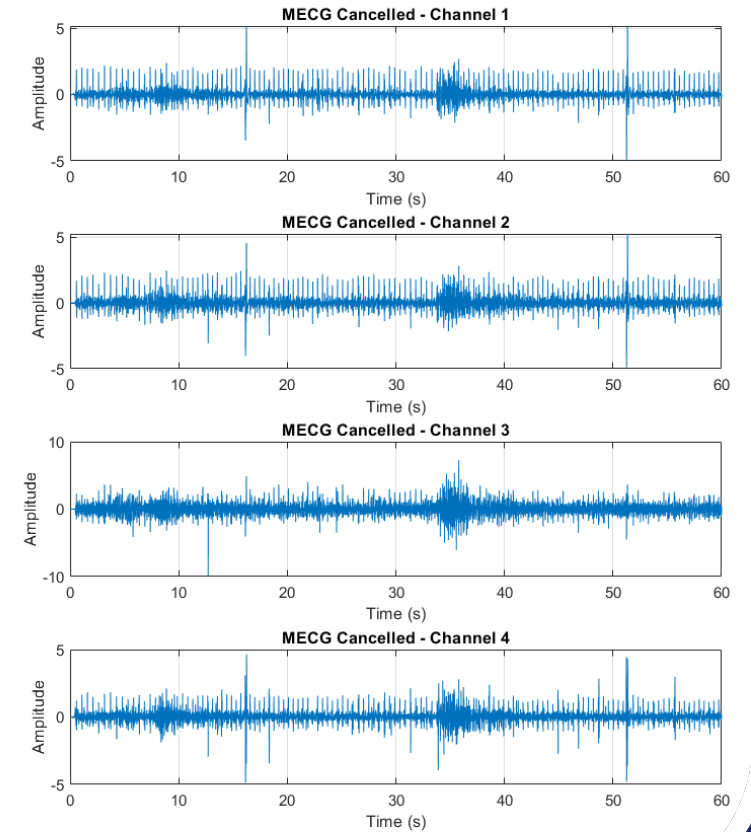
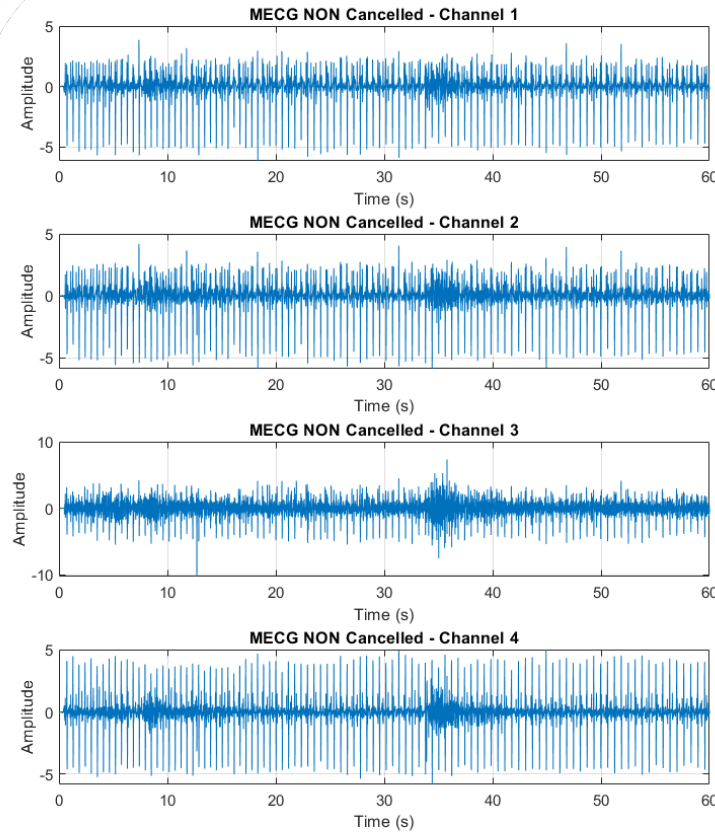
- Extract the found QRS complexes from each channel
  - P wave - 0.20 s
  - QRS complex - 0.10 s
  - T wave - 0.40 s,
- Average the extracted QRS complexes to obtain the average MQRS template for each channel

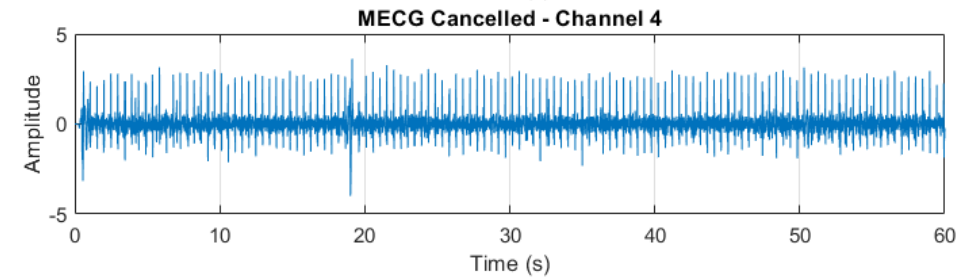
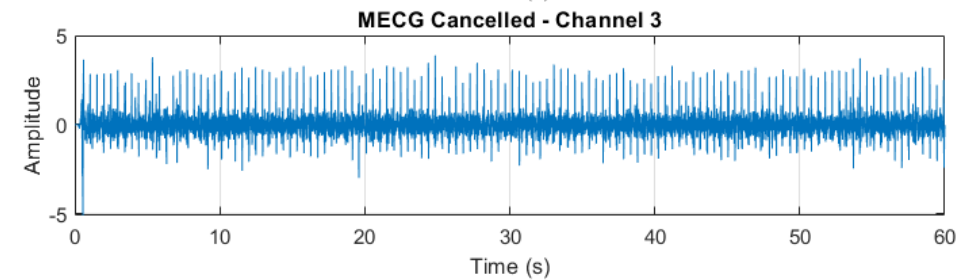
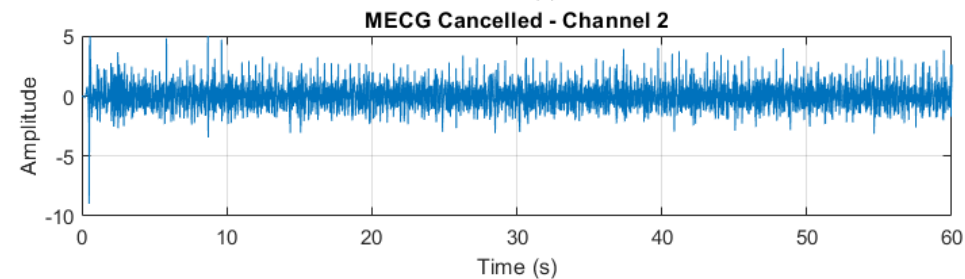
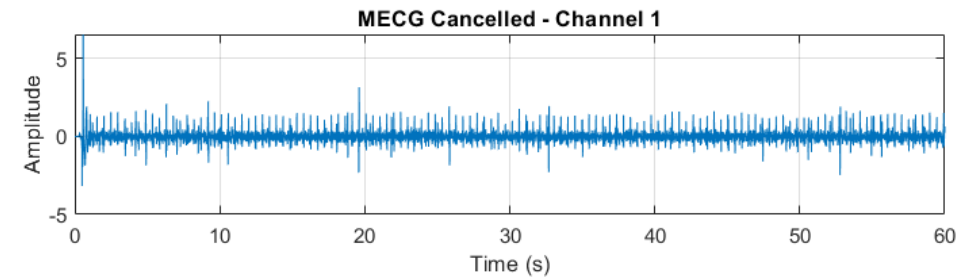
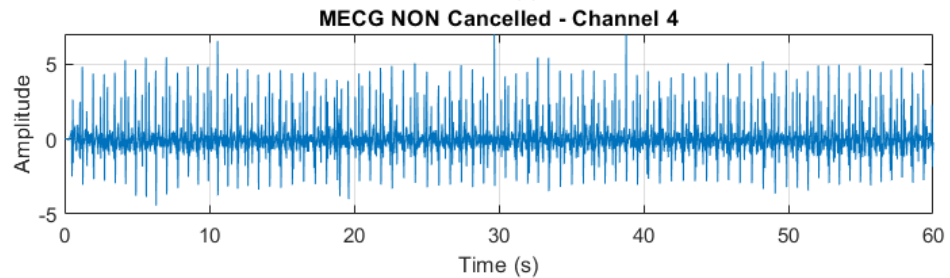
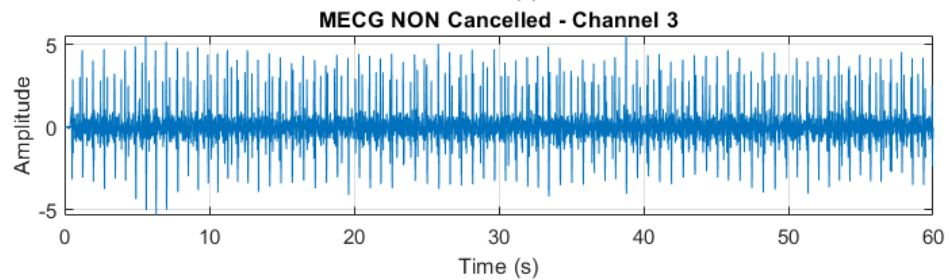
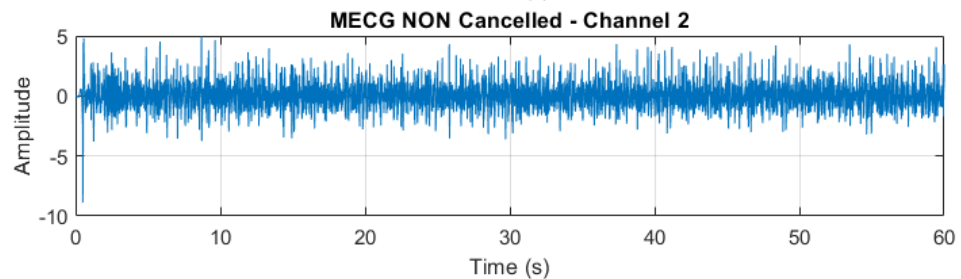
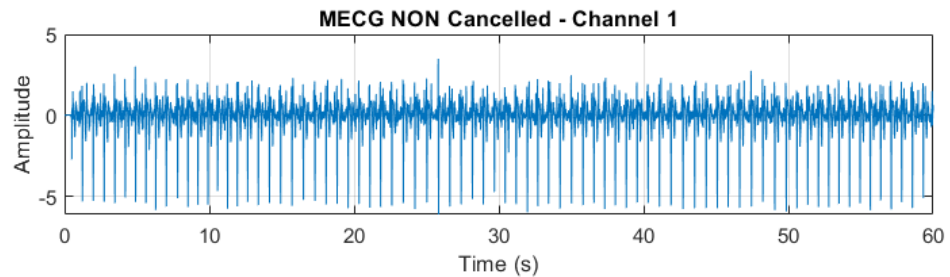




# MECG CANCELLER

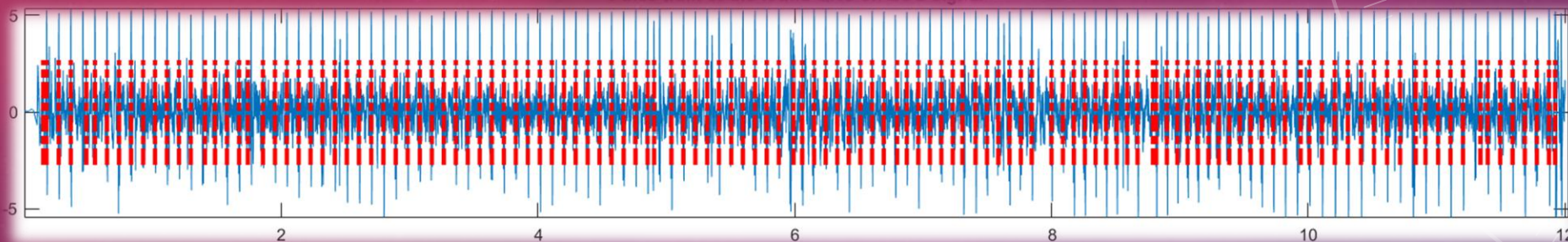
- For each channel, subtract the average template in the MECG by shifting and subtracting the template at each position detected by the QRS detector







# FQRS DETECTOR AND FHR ESTIMATION - SUCCESS

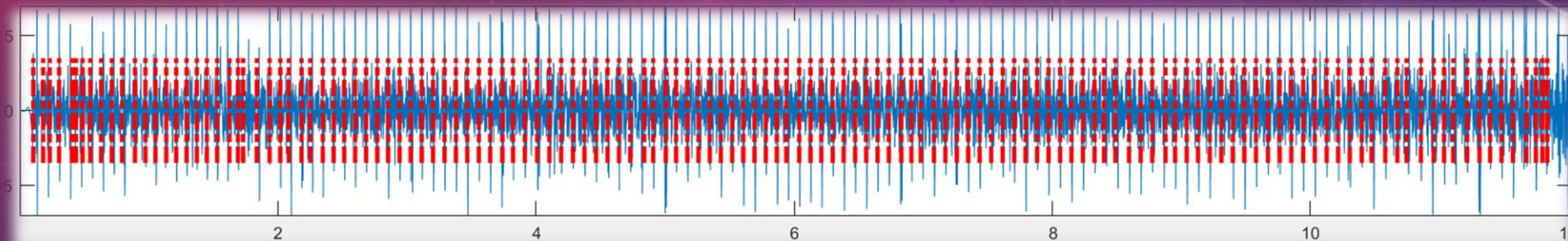


Sig. no. 4

Found MHR = 79 bpm

Found FHR = 130 bpm

Target FHR = 129 bpm

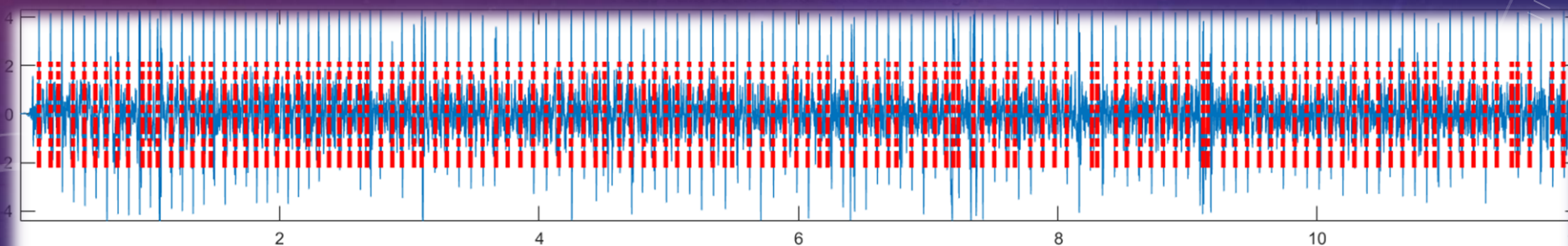


Sig. no. 12

Found MHR = 86 bpm

Found FHR = 138 bpm

Target FHR = 138 bpm



Sig. no. 15

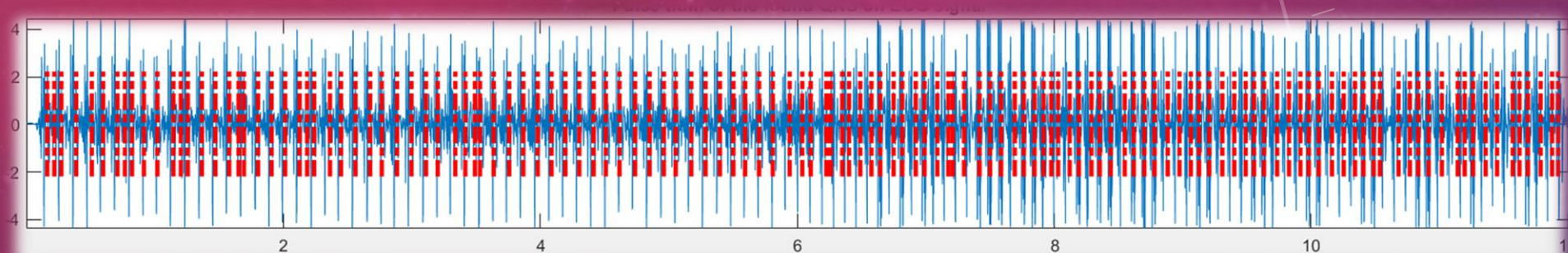
Found MHR = 85 bpm

Found FHR = 133 bpm

Target FHR = 134 bpm



# FQRS DETECTOR AND FHR ESTIMATION - FAILURE

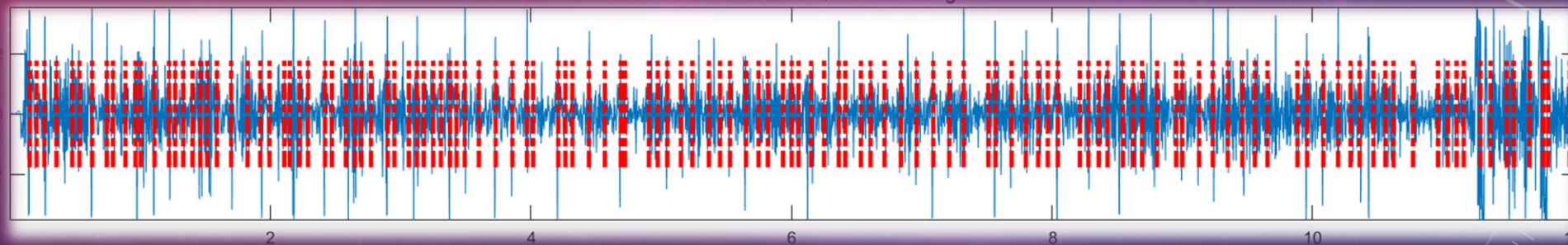


Sig. no. 2

Found MHR = 124 bpm

Found FHR = 132 bpm

Target FHR = 160 bpm

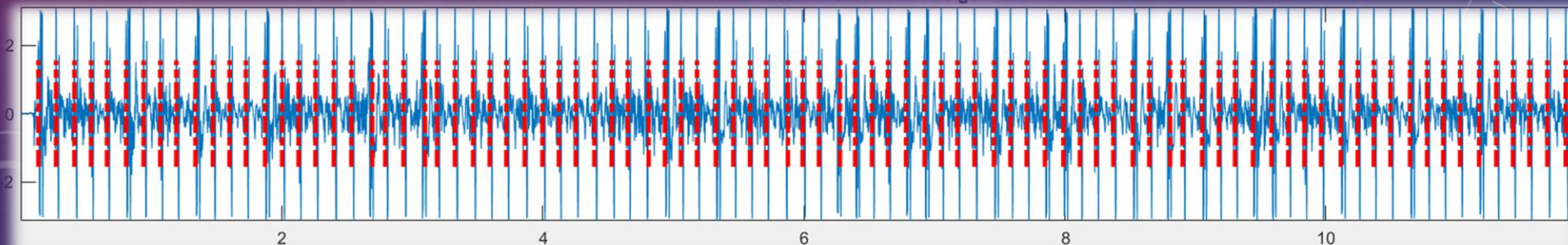


Sig. no. 6

Found MHR = 100 bpm

Found FHR = 127 bpm

Target FHR = 160 bpm



Sig. no. 21

Found MHR = 90 bpm

Found FHR = 90 bpm




Target FHR = 145 bpm



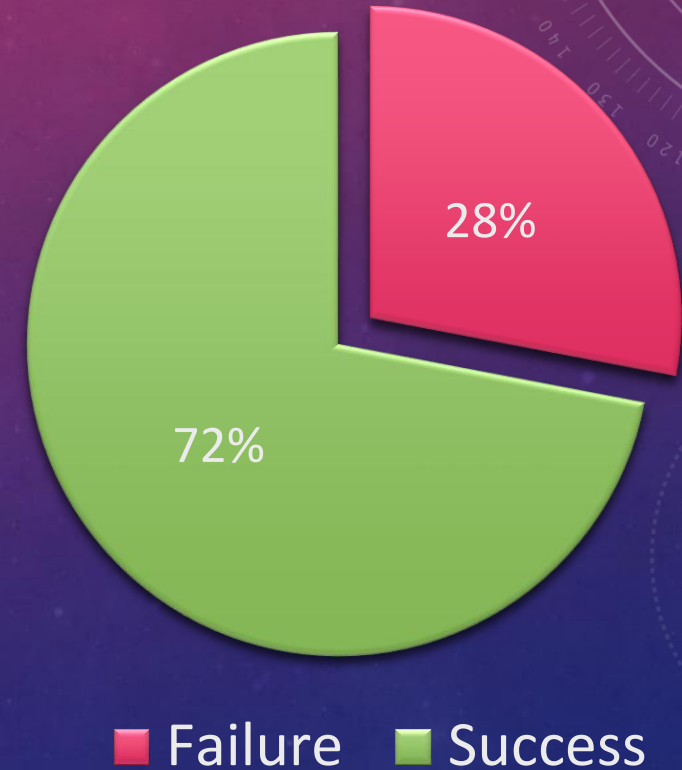
The background is a gradient of deep purple and blue, filled with numerous out-of-focus circular light spots (bokeh) in various shades. Overlaid on the left side are several faint, white, semi-transparent circular patterns. These include concentric circles, dashed lines, and a prominent circular scale with numerical markings ranging from 140 to 260. Some of these patterns have small arrows or segments highlighted, suggesting a technical or scientific theme.

# RESULTS AND CONCLUSIONS

# OVERALL RESULTS

-  No. of samples in the dataset : **25** signals
-  No. of correctly estimated FHRs\*: **18**
-  No. of wrongly estimated FHRs\*: **7**

\*the error tolerance to consider the prediction correct is 10 bpm





# CONCLUSIONS

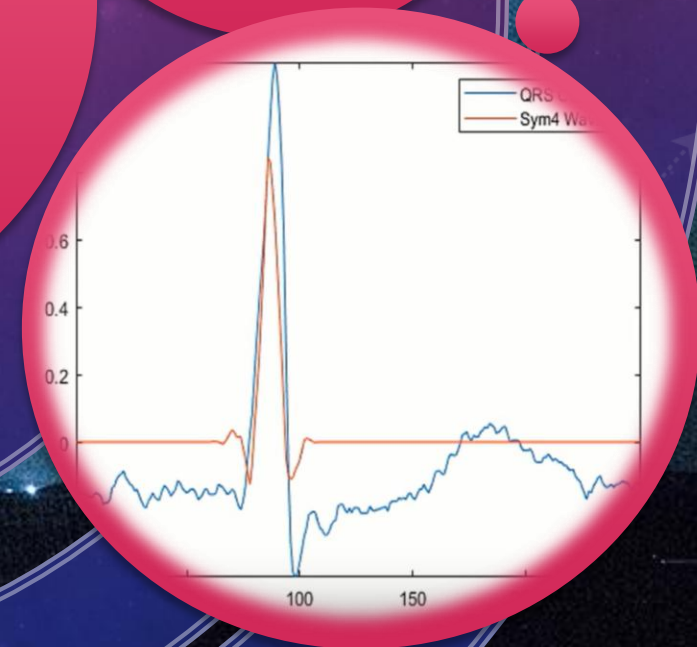
- Being a sequential analysis, a wrongly executed step generates a chain reaction leading to the wrong estimate of the FHR
  - MHR is the main example: if the MQRS detector calculates incorrectly, it can lead to the deletion of parts of the FECG that should be kept and the retention of parts that should be discarded
- There are particular cases of examples in the dataset containing artifacts or particular noisy areas. In such instances, dedicated preprocessing is necessary, including clipping and adjustment of parameters (e.g., signal threshold in the QRS detector).

# ANOTHER IMPLEMENTED STEP BUT NOT USED

QRS detection using wavelet is excellent in cases of clean ECG (e.g. electrodes on the chest), but when the ECG is noisy (e.g. FECG), the wavelet can emphasize artifacts and noise in addition to the ECG itself

**WAVELET**  
as band pass  
filter

The **sym4** wavelet resembles the QRS complex







THANK YOU FOR  
YOUR ATTENTION!