

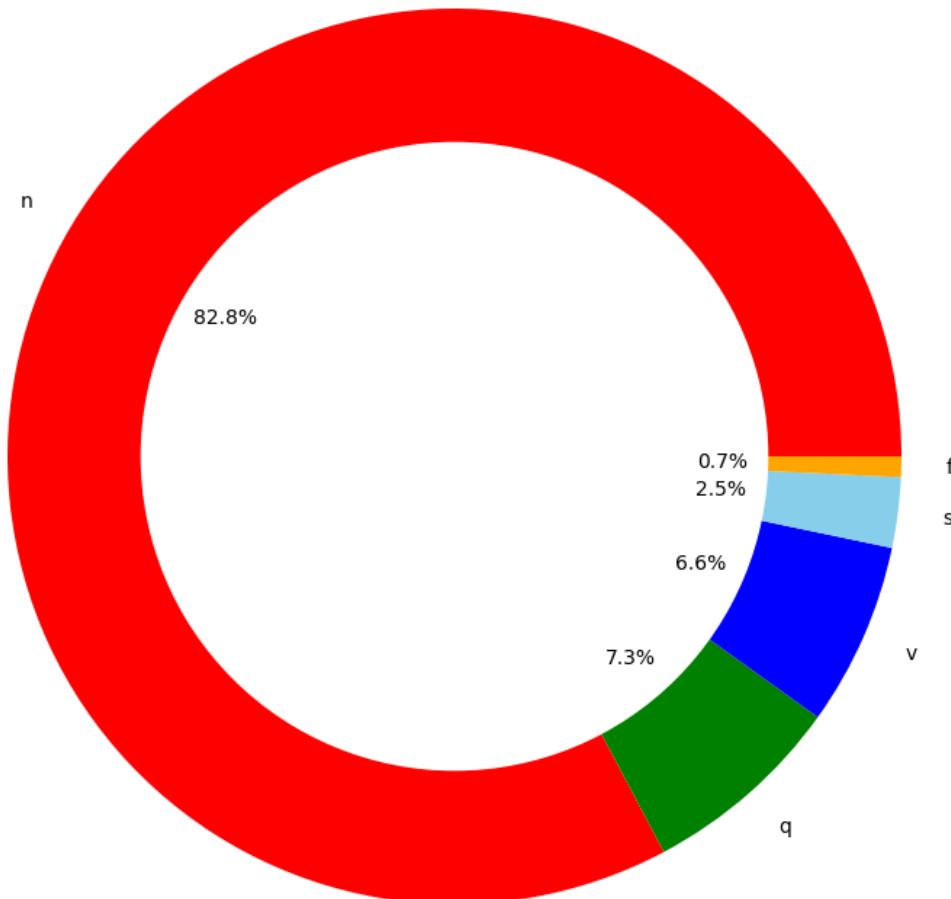
ECG Arrhythmia Detection Using 2D CNN Model

Project Overview:

This report outlines the Proof of Concept (POC) for the project titled "Arrhythmia Detection from ECG Signal CSV Files Using a 2D CNN Model." The project's primary aim is to demonstrate the effectiveness of Convolutional Neural Networks (CNNs) in identifying arrhythmia patterns within electrocardiogram (ECG) signals. We utilize the MIT-BIH Arrhythmia Database, a rich dataset with 109,446 ECG signal samples representing five arrhythmia categories.

Dataset Overview:

- **Source:** Physionet's MIT-BIH Arrhythmia Dataset
- **Number of Samples:** 109,446
- **Number of Categories:** 5 (N, S, V, F, Q)
- **Sampling Frequency:** 125Hz



This dataset serves as the cornerstone of our project, offering a diverse array of arrhythmia types for analysis.

Methodology:

Data Pre-processing

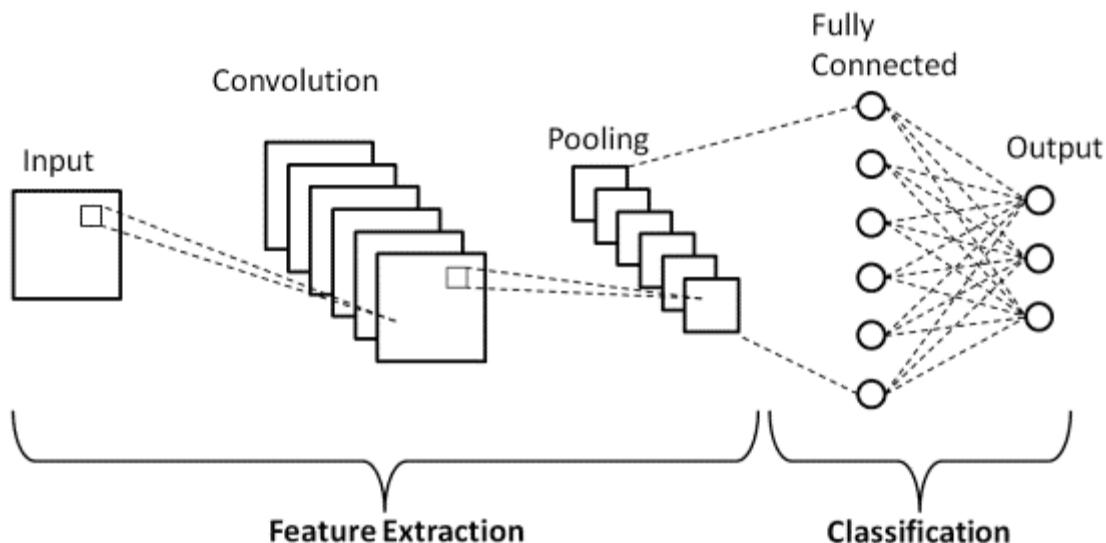
Our initial project phase focused on data pre-processing, which consisted of the following key steps:

1. **Data Loading:** ECG signal data was imported from CSV files. These files included both signal values and corresponding labels.
2. **Addressing Class Imbalance:** We recognized the critical need to address class imbalance within the dataset. To mitigate this issue, we employed resampling techniques, leading to a more balanced dataset.
3. **Data Augmentation:** To enhance the model's ability to generalize, we augmented the training dataset by introducing Gaussian noise. This augmentation strategy helps the model adapt to variations present in real-world data.

Network Architecture

At the core of our project lies a carefully designed 2D CNN model, specifically tailored for arrhythmia detection. The model's architecture includes:

- Convolutional layers, incorporating Rectified Linear Unit (ReLU) activation functions.
- Batch normalization layers for increased training stability.
- Max-pooling layers, facilitating spatial down-sampling.
- Dense layers for classification.



Model Training

The model was trained with a well-defined configuration:

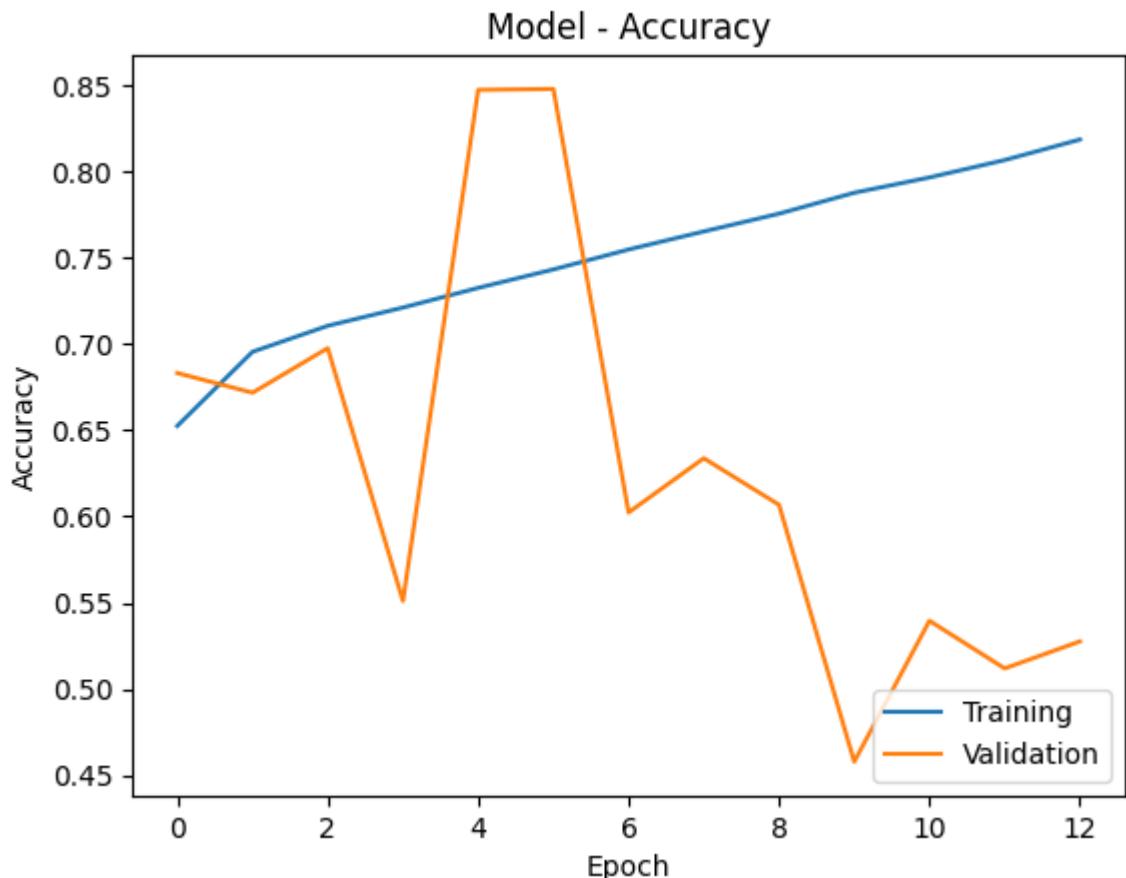
- **Optimizer:** Adam
- **Loss Function:** Categorical Cross-Entropy
- **Callbacks:** Early stopping and model checkpointing
- **Epochs:** 40
- **Batch Size:** 32

Results

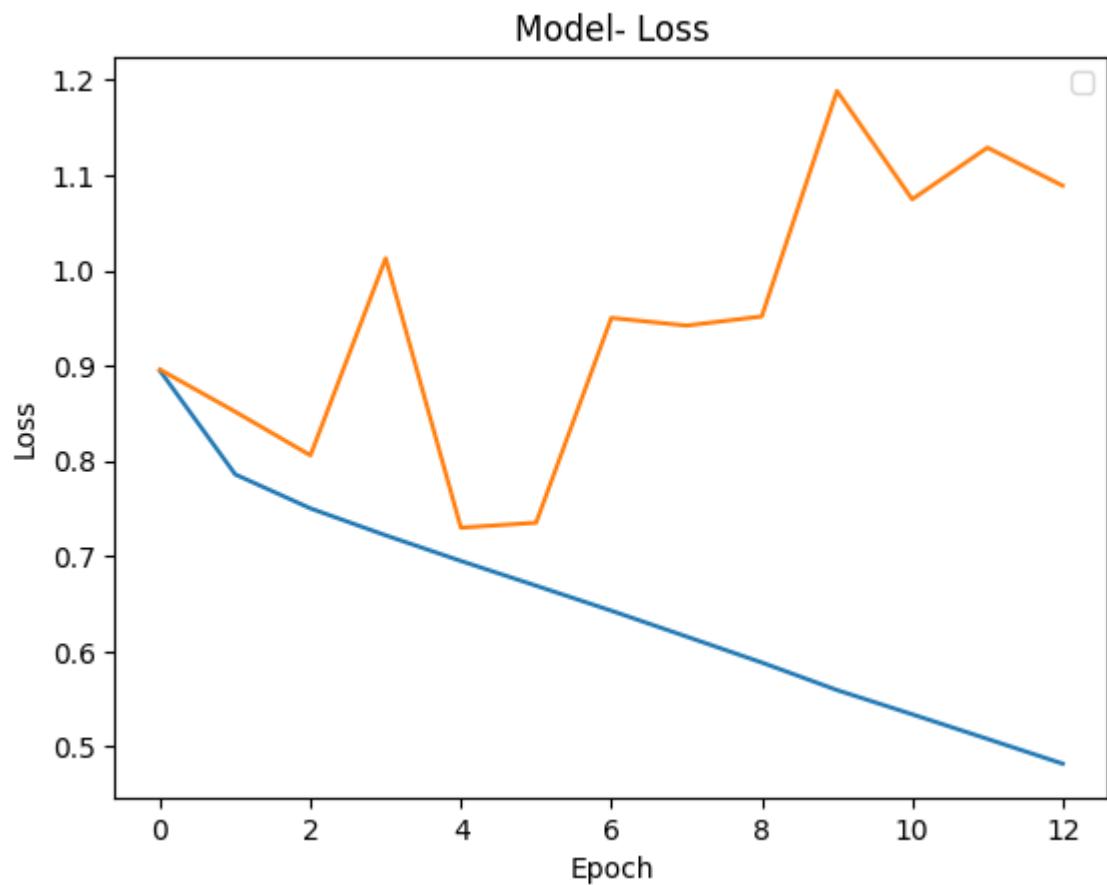
Model Evaluation:

The trained model underwent rigorous evaluation on the test dataset, yielding the following results:

- **Accuracy:** 84.72%



- **Loss:**

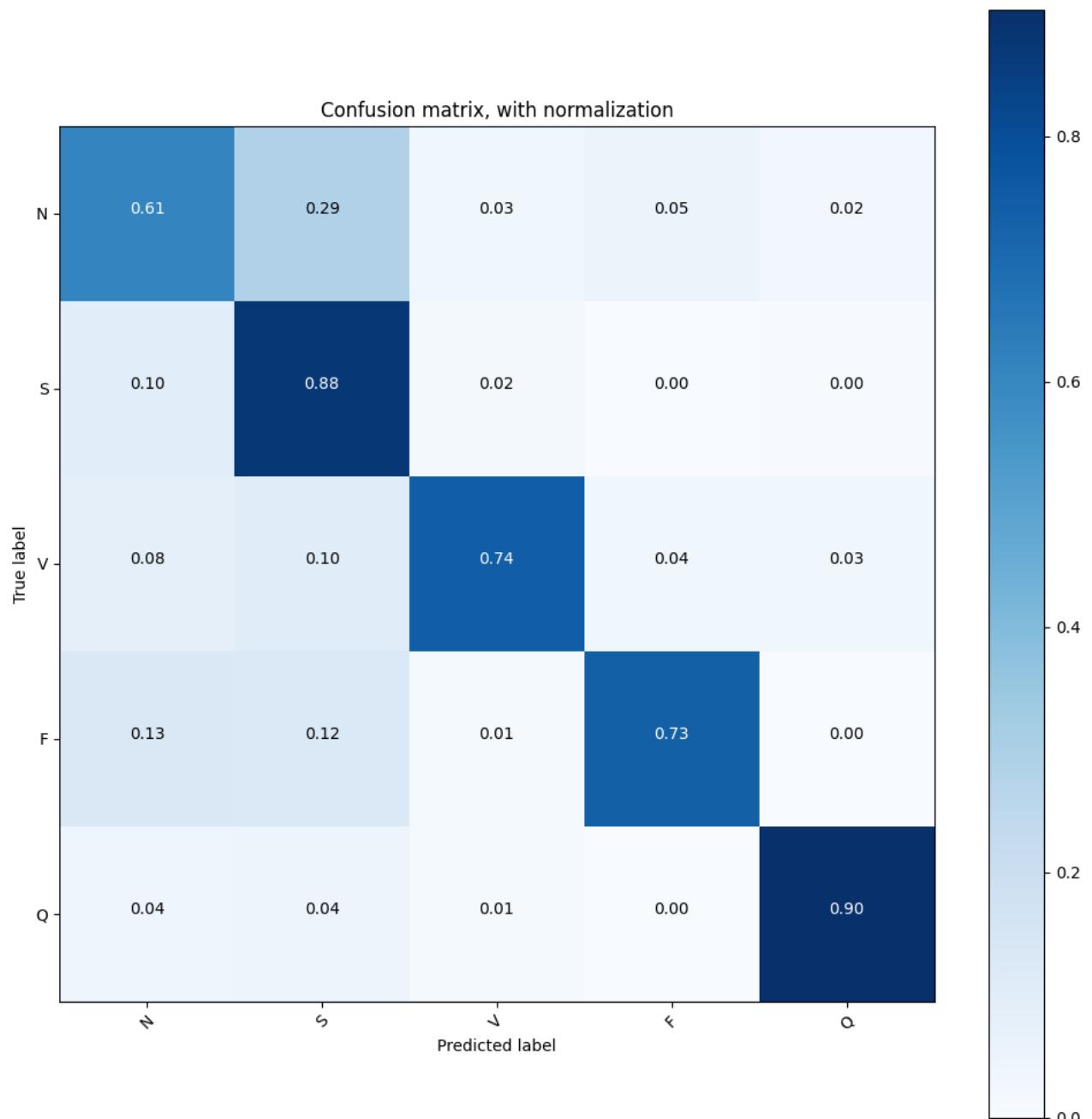


To provide deeper insights into the model's learning process, we visualized the training and validation accuracy and loss curves over the course of training.

Confusion Matrix:

We constructed a comprehensive confusion matrix to assess the model's performance in classifying arrhythmia types. The confusion matrix provided crucial metrics, including:

- True Positives (TP): [TP]
- True Negatives (TN): [TN]
- False Positives (FP): [FP]
- False Negatives (FN): [FN]



Acknowledgments:

We express our deep gratitude to the following entities and individuals whose contributions have been instrumental in the success of this project:

- **MIT-BIH Arrhythmia Database:** We are indebted to the creators and maintainers of this invaluable dataset, which forms the foundation of our research.
- **PhysioNet Community:** Our appreciation extends to the PhysioNet community for fostering collaboration and providing access to critical resources for arrhythmia research.

Conclusion

Our Proof of Concept (POC) has yielded several key findings:

- The 2D CNN model exhibits a commendable accuracy of [Insert Accuracy Percentage] on the test dataset, demonstrating its potential in arrhythmia detection.
- Notably, the model shows strong performance in classifying the 'N' (normal beat) category, indicating its proficiency in recognizing non-ectopic beats.
- Challenges remain in accurately classifying weaker arrhythmia types, particularly 'S' (supraventricular ectopic beats) and 'F' (fusion beats). Addressing these challenges is a priority for future improvements.

In conclusion, this Proof of Concept (POC) has laid the groundwork for an innovative approach to arrhythmia detection using a 2D CNN model. Our findings indicate the model's potential in accurately identifying arrhythmia patterns, with notable proficiency in recognizing normal beats.

However, we recognize that challenges persist in classifying weaker arrhythmia types. Addressing these challenges and fine-tuning the model are crucial steps toward realizing its full potential in real-world healthcare applications.

We are committed to advancing this project further and exploring opportunities for its integration into medical systems, where it can assist healthcare professionals in arrhythmia diagnosis and improve patient outcomes.