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Classification of heart rate data using artificial neural network and fuzzy equivalence relation

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Abstract

The electrocardiogram is a representative signal containing information about the condition of the heart. The shape and size of the P-QRS-T wave, the time intervals between its various peaks, etc. may contain useful information about the nature of disease afflicting the heart. However, these subtle details cannot be directly monitored by the human observer. Besides, since bio-signals are highly subjective, the symptoms may appear at random in the time scale. Therefore, the signal parameters, extracted and analysed using computers, are highly useful in diagnostics. This paper deals with the classification of certain diseases using artificial neural network (ANN) and fuzzy equivalence relations. The heart rate variability is used as the base signal from which certain parameters are extracted and presented to the ANN for classification. The same data is also used for fuzzy equivalence classifier. The feedforward architecture ANN classifier is seen to be correct in about 85% of the test cases, and the fuzzy classifier yields correct classification in over 90% of the cases. © 2002 Pattern Recognition Society. Published by Elsevier Science Ltd. All rights reserved.

Keywords: Heart rate; Pattern recognition; ECG; Neural network; Fuzzy equivalence; Disease classification

1. Introduction

Electrocardiography deals with the electrical activity of the heart. Monitored by placing sensors at the limb extremities of the subject, electrocardiogram (ECG) is a record of the origin and propagation of the electric potential through cardiac muscles. It is considered a representative signal of cardiac physiology, useful in diagnosing cardiac disorders.

The state of cardiac health is generally reflected in the shape of ECG waveform and heart rate. It may contain important pointers to the nature of diseases afflicting the heart. However, bio-signals being non-stationary signals, this reflection may occur at random in the time scale. (That is,

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the disease symptoms may not show up all the time, but would manifest at certain irregular intervals during the day.) Therefore, for effective diagnostics, the study of ECG pattern and heart rate variability signal (instantaneous heart rate against time axis) may have to be carried out over several hours. Thus, the volume of the data being enormous, the study is tedious and time consuming. Naturally, the possibility of the analyst missing (or misreading) vital information is high. Therefore, computer-based analysis and classification of diseases can be very helpful in diagnostics.

The present paper makes use of heart rate variability (HRV) as the base signal for analysis and classification of diseases. The heart rate is evaluated by measuring the time interval between the successive *R*-peaks (*R*-*R* interval) of the ECG waveform. It is known that almost all the useful frequency components in ECG signal falls below 40 Hz [1], and therefore sampled at the rate of 200 samples/s. The heart rate, plotted against the time scale provides the HRV signal,

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from which certain parameters are extracted for classification [2,3].

2. Neural network classifier

Artificial neural networks (ANN) are biologically inspired networks—inspired by the human brain in its organization of neurons and decision making process—which are useful in application areas such as pattern recognition, classification, etc. [4]. The decision making process of the ANN is more holistic, based on the aggregate of entire input patterns, whereas the conventional computer has to wade through the processing of individual data elements to arrive at a conclusion.

The neural networks derive their power due to their massively parallel structure, and an ability to learn from experience. They can be used for fairly accurate classification of input data into categories, provided they are previously trained to do so. The accuracy of the classification depends on the efficacy of training, which in turn depends upon the rigor and depth of the training. The knowledge gained by the learning experience is stored in the form of connection weights, which are used to make decisions on fresh input.

Three issues need to be settled in designing an ANN for a specific application: (i) topology of the network; (ii) training algorithm and (iii) neuron activation function. A network may have several 'layers' of neurons and the overall architecture may either be feedback or feedforward structure. If the task is merely to distinguish linearly separable classes, a single layer perceptron classifier is quite adequate.

If the class separation boundaries can be piecewise linear approximated, then a two layer perceptron classifier needs to be used. If the class boundaries are more complex, a three layer *feedforward* neural network, with sigmoid activation function is more suitable [5,6]. The most important reason in favour of such a network is that the sigmoid function f(x) is differentiable for all values of x, which allows the use of the powerful *backpropogation* learning algorithm (BPA) [7]. In the present case, the nature of class boundaries is not clearly known, and therefore, the three layer network with sigmoid activation function is being used as classifier (Fig 1).

The BPA is a supervised learning algorithm, which aims at reducing the overall system error to a minimum. The connection weights are randomly assigned at the beginning; and progressively modified to reduce the overall mean square system error. The weight updating starts with the output layer, and progresses backwards. The weight update aims at maximizing the rate of error reduction, and hence it is termed as 'gradient descent' algorithm [8]. The weight increment is done in 'small' steps; the step size is chosen heuristically, as there is no definite rule for its selection. In the present case, a learning constant $\eta=0.9$ (which controls the step size), is chosen by trial and error.

It is desirable that the training data set be large in size, and also uniformly spread throughout the class domains. In the absence of a large training data set, the available data may be used iteratively, until the error function is reduced to an optimum level. For quick and effective training, data is fed from all classes in a routine sequence, so that the right message about the class boundaries is communicated to the ANN.

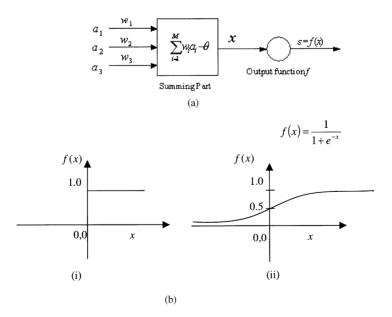


Fig. 1. (a) Model of an artificial neuron (processing unit). (b) Neuron activation functions: (i) unipolar binary functions; and (ii) unipolar sigmoid function.

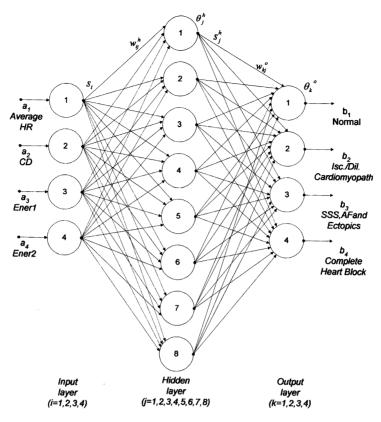


Fig. 2. Three-layer feedforward neural network classifier.

The ANN used for classification is shown in Fig. 2. The input layer consists of nodes to accept data, and the subsequent layers process the data using the activation function. The output layer has four neurons, giving rise to an output domain of 16 possible classes. However, the network is trained to identify only four classes given by decoded binary outputs [0001, 0010, 0100, 1000]. The outputs of the hidden layer (s_j^h) and output layer (b_k) are evaluated using Eqs. (1) and (2)

$$s_j^h = f\left(\sum_{i=1}^4 w_{ji}^h s_i - \theta_j^h\right),\tag{1}$$

$$b_k = f\left(\sum_{i=1}^{4} w_{kj}^o s_j^h - \theta_k^o\right),\tag{2}$$

where w_{ji}^h and w_{kj}^o are the connection weights and θ_j^h and θ_k^o are the bias terms, respectively.

The error vectors of hidden layer (e_j) and output layer (e_k) are calculated using Eqs. (3) and (4), respectively:

$$e_k = b_k(1 - b_k)(d_k - b_k),$$
 (3)

$$e_j = s_j^h (1 - s_j^h) \sum_{k=1}^4 w_{kj} e_k,$$
 (4)

where d_k is the desired output.

The weight update equations of the output and hidden layers are given below:

$$w_{kj}(new) = w_{kj} + \eta s_i^h e_k, \tag{5}$$

$$w_{ii}(new) = w_{ii} + \eta s_i e_i, \tag{6}$$

$$\theta_k^o(new) = \theta_k^o + \eta e_k,\tag{7}$$

$$\theta_j^h(new) = \theta_j^h + \eta e_j. \tag{8}$$

3. Disease classification using ANN

For the purpose of this study, the cardiac disorders are classified into four categories namely:

- (i) Ischemic/dilated cardiomyopathy,
- (ii) Complete heart block,
- (iii) Sick sinus syndrome, atrial fibrillation (AF), ectopics,
- (iv) Normal.

Table 1			
Range of input parameters	of ANN	classification	model

Class	HR (bmp) (Average)	Ener 1	Ener 2	CD
Normal	50-100	0.06-0.35	< 0.8	≥ 0.33
Isc/dil. cardiomyopathy	60-120	0.06-0.60	> 0.8	≥ 0.80
Complete				
heart block	30 - 40	0.05 - 0.32	> 0.4	$\geqslant 0.80$
Ectopics, AF & SSS	50-100	0.20 - 2.05	> 0.3	≥ 0.20

The ANN classifier is fed by four parameters derived from the heart rate signal:

- (1) Average heart rate: Though the heart rate is a non-stationary signal, the range of heart rate for various disease categories are seen to be different, the average heart rate can serve as a parameter of classification (Table 1). The average is evaluated for 10 min interval. Secondly, the frequency of heart rate variation for various diseases are seen to be different. The power spectrum of heart rate variability signal shows a marked concentration of energy in different frequency bands [9 –11]. Therefore, the ratio of energy content in different frequency bands can be used as parameters of classification. In the present case, two input signals are derived by evaluating the ratio of energy content in two separate frequency bands:
- (2) Ener 1 = [energy content in the band (33.3–100 Hz)]/ [energy content in the band (0–33.3 Hz)]
- (3) Ener 2 = [energy content in the band (66.7–100 Hz)]/ [energy content in the band (0–66.7 Hz)]
- (4) Correlation dimension factor: Heart rate signal being a non-stationary signal, important insight can be gained from a phase-space plot obtained by representing heartrate x(k) in X-axis and delayed heartrate x(k + m) in Y-axis [12–14]. A technique for estimating the embedding dimension of the phase-space pattern was proposed [15,16]. In the present work an embedding dimension of 5 was chosen.

When the heartrate is steady and unchanging, the phase-space plot reduces to a point, but otherwise, the trajectory spreads out to give some patterns on the screen. An example of the phase-space plot of normal heart rate is shown in Fig. 3. The pattern that emerges can be interpreted for finer details—such as whether the heart rate is periodic, chaotic, or random, etc. A correlation dimension factor is defined to obtain a quantitative measure of the nature of trajectory, and the ranges of CD factor for various heart diseases are identified. The CD factor is defined as

$$CD = \lim_{r \to 0} \frac{\log C(r)}{\log(r)},\tag{9}$$

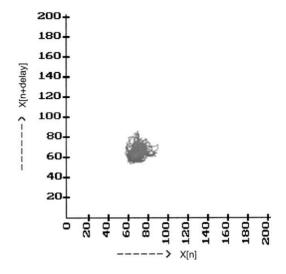


Fig. 3. Phase space plot of normal heart rate (CD = 0.46).

where the correlation integral C(r) is given by

$$C(r) = \frac{1}{N^2} \sum_{i=1}^{N} \sum_{j=1, i \neq j}^{N} \Theta(r - |x_i - x_j|),$$
 (10)

where x_i, x_j is the points of the trajectory in the phase space, N is the number of data points in phase space, r the radial distance around each reference point x_i , and Θ is the Heaviside function.

The range of CD for different classes of diseases is shown in Table 1.

For the purpose of training and testing the classifier, a data base of 342 patient samples is divided into two sets—a training set of 276 arbitrarily chosen samples and a test set of 66 samples (Table 1). The training consisted of 10,000 iterations.

During the *training* phase, each output of the ANN is an analog value in the range $0 \rightarrow 1.0$, whereas the 'desired' output is either 0 or 1.0. During the *recall* phase, the output signal is approximated to binary levels by comparing it with threshold value of 0.5.

4. Fuzzy equivalence relation classifier

A more efficient classifier is developed using fuzzy equivalence relation. The process of classification involves obtaining a *fuzzy relation* matrix for each class of data, and then comparing a fresh input with each group for classification [17].

The fuzzy equivalence relation requires the properties of reflexivity, symmetry and transitivity, be satisfied. If it satisfies only the first two—that is, reflexivity and symmetry properties—it is termed as fuzzy compatible relation. Though it is usually difficult to identify an equivalence relation directly, it is possible to identify a compatible

Table 2 Training and testing data set

Class	No. of data set used for training	No. of data set used for testing	of correct of correct classification
			(10,000 iterations) (%)
Normal Isc/dil.	90	20	85
cardiomyopathy Complete	90	20	85
heart block Ectopics,	12	06	84
AF & SSS	84	20	90

relation in terms of an appropriate 'distance function' of the Minkowski class. The general expression used for the distance function (Minkowski class) is given below

$$R(x_i, x_j) = 1 - \delta \left(\sum_{l=1}^n |x_{il} - x_{jl}|^q \right)^{1/q},$$
 (11)

where n is the total dimensionality of the input data point, l the dimensionality index of the input data (1, 2, ..., n), p the size of the input data set, i, j the input index $i, j \in [1...p]$, q the distance function parameter, and δ the normalizing factor to ensure the resultant $R(x_i, x_j) \in [0, 1]$.

n represents the total dimensions of the data, each of which dimension refer to the components of the input data. For example, from Table 1, the input data (HRV signal) is represented by four components [HR(Average), Ener 1, Ener 2, CD], hence n = 4, here.

The Minkowski relation can be evaluated for integer values of q; for q = 1, the 'distance function' happens to be the Hamming distance; for q = 2, it is the Euclidean distance, etc. The normalizing factor δ is taken as the inverse of the largest distance among the data pairs.

As indicated above, for our purposes, the input data (HRV signal) is represented using the four parameters used for ANN classification earlier (Table 1). Thus the data has four components (n=4). The size of the training data set (defined by p_k $k \in [1..4]$) is different for each class i (second column of Table 2).

In the present case, the Euclidean *distance function* of Minkowski class (q=2) is used as the basis to define mutual relation among the input data belonging to a particular class. Thus, Eq. (11) reduces to

$$R(x_i, x_j) = 1 - \delta \left(\sum_{l=1}^{4} |x_{il} - x_{jl}|^2 \right)^{1/2},$$

where the symbols have their usual meaning.

The result of the above evaluation can be listed in the form of a symmetrical $p_k x p_k$ matrix, which satisfies both

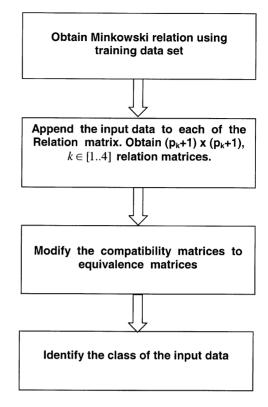


Fig. 4. Flowdiagram for prediction using fuzzy equivalence relation.

reflexivity and symmetry conditions. Thus it defines a compatibility relation, but not necessarily the equivalence relation. Therefore, the relation matrix is further processed to obtain a transitive closure (TC), equivalence relation. The processing algorithm is described in the following discussion. Firstly, few definitions are in order.

For a relation R, we write R(u,v) if the pair $\langle u,v \rangle$ is a member of the set. The TC of a relation R, often written R^* is the smallest set such that if R(u,v) and R(v,w), then R(u,w). For example, the 'ancestor relation' is the TC of the 'parent relation', 'dominates' is the TC of the 'immediately dominates' relation, the 'greater than' relation u > v is the TC of the 'successor relation' succ(u,v) (which relates integers to the next greater integer succ(u,v)).

We also talk about the *reflexive* TC if $R^*(u, u)$ holds generally.

Given a relation R, its TC R^* can be determined as follows. R is transitive iff $(a,b) \in R\Lambda(b,c) \in R\Lambda(a,c) \in R$. We may add elements to a relation R and create a new relation that is the TC of R. However, the procedure requires an iterative process. We find the TC by examining every pair of elements of R where the second element of the first pair matches the first element of the second pair.

That is $(a, b) \in R$ and $(b, c) \in R$.

Algorithm Fuzzy_Classifier Begin

1. Initialization

1.1 Read classified data from am input file [input_data]i.i[classes]k <- Buffer i: 1 to m (number of data) i: 1 to n (number of attributes) k: 1 to i; where there are '0' classes 1.2 Read unclassified data from test file [unclassified]i,j <- Buffer i: 1 to p(number of data)

j: 1 to n(number of attributes)

2. Preprocessing

2.1 Append unclassified_data onto input_data

[input_data]_{i,j} <- [input_data]_{i,j} ↓[unclassified_data]_{k,j} i: m+1 to m+p k:1 to p i: 1 to n

2.2 Normalize the data matrix attribute wise selecting the maximum in each attribute

$$\begin{split} &[\text{input_data}]_{i,j} < - \frac{\left[input_data \right]_{i,j}}{\max \left\{ \left[input_data \right] \right\}_{j}} \\ &\text{i: 1 to (m+p)} \\ &\text{i: 1 to n} \end{split}$$

3. Compute the Fuzzy Equivalence Relation

3.1 Find the compatibility relation between the data using distance function

$$\begin{split} R_c(x_i,x_j) = &1 - \mathcal{S}(\sum_{l=1}^n (x_{il} - x_{jl})^2))^{1/2} \\ \text{i,j: 1 to m+p} \\ \text{where } \mathcal{S} = &1/n^{1/2} \end{split}$$

3.2 Find the transitive closure of R_c

4. Classification

Beginning from row m+1 search for the maximum membership degree until column m and store the corresponding index in matrix max_membership

$$\begin{aligned} [\text{max_membership}]_i &= \max[R_i]_{i,j};\\ &\text{i:m+1 to m+p}\\ &\text{j:1 to m} \end{aligned}$$

corresponding to each unclassified data the class to which it belongs is given by [classes][max_membership]; i:1 to p

End

Fig. 5. Algorithm fuzzy_classifier for classification using fuzzy equivalence relation.

Results of fuzzy equivalence classification^a

Class	No. of data set set used for training	No. of data set set used for testing	Percentage of Percentage of correct classification (%)
Normal	90	20	95
Isc/dil. cardiomyopathy Complete	90	20	90
heart block	12	06	100
Ectopics,			
AF & SSS	84	20	95

^aThe implementation was experimented on a variety of data sets and results presented here represent the average performance.

Transitivity requires that (a, c) must also be an element of R. If it is not, then we must add it to the new relation that we are building into the TC. Let us call the new relation R'. (Initially R' = R and when the process of adding edges is over $R' = R^*$.) After we have examined all such pairs of members of R and added the required edges to R' where needed we must then begin the same process again.

The resultant R^* is the TC of R.

After computing the TC and having satisfied the properties of reflexivity, symmetry and transitivity, the fuzzy equivalence relation matrix so obtained can now be used for classification of fresh data. The flowdiagram to do so is depicted in Fig. 4.

The formal algorithm is depicted in Fig. 5. The results of the classification are listed in Table 3.

5. Conclusion

Both the neural network classifier and the fuzzy equivalence relation are developed as diagnostic tools to aid the physician. The tools do not yield results with 100% accuracy. The accuracy of the tools depend on several factors, such as the size and quality of the training set, the rigor of the training imparted, and also parameters chosen to represent the input. The results listed in Tables 2 and 3, indicate that the classifiers are effective to the tune of about 85–95% accuracy.

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