

Classification of Arrhythmia by Using Deep Learning with 2-D ECG Spectral Image Representation

Chinta Deekshith Reddy*¹, Jajala Reddy Rahul *², Jala Srinath *³, Cherreddy Jaya Sreekar Reddy*⁴, Mr.Afroz Pasha *⁵

Department Of Computer Science & Engineering, Presidency University, Bangalore, India.

Associate Professor, Department Of CSE & ISE, Presidency University, Bangalore, India.

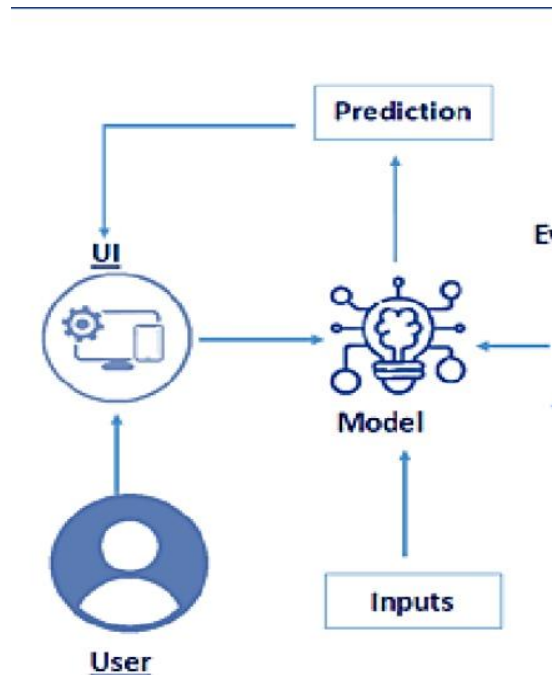
I.ABSTRACT

This task makes a speciality of the development of an innovative approach to arrhythmia classification by using leveraging deep studying techniques and a couple of-D spectral pictures derived from electrocardiogram (ECG) facts. The primary objective is to cope with the demanding situations related to accurate arrhythmia category and prognosis, in the end contributing to improved patient outcomes and the development of cardiac health diagnostics. The significance of this project lies in its capability to revolutionize the field of cardiac fitness by way of imparting numerous key advantages, together with stronger accuracy in arrhythmia type, timely intervention in instances of abnormal coronary heart rhythms, advanced healthcare performance, and the capacity for telemedicine packages. By automating the arrhythmia class method, this mission goals to streamline the diagnostic workflow and facilitate remote tracking and prognosis of cardiac situations. In addressing studies gaps in current techniques, the undertaking seeks to triumph over demanding situations related to records heterogeneity and variety, interpretability of deep mastering fashions, robustness to noise and artifacts in ECG alerts, small sample length and imbalanced statistics, medical validation and adoption, ethical and prison considerations, as well as actual-time processing and deployment. By exploring these areas, the mission objectives to increase extra sturdy, accurate, and clinically applicable deep learning-based arrhythmia classification systems. The proposed system will combine superior deep mastering fashions skilled on various and representative datasets of two-D spectral pictures. These fashions could be carefully demonstrated and tested to make certain their accuracy and generalizability in classifying exceptional styles of arrhythmias. The closing aim is to broaden a robust and reliable machine that could aid healthcare providers inside the accurate and timely diagnosis of arrhythmias, leading to improved affected person outcomes and higher control of cardiac fitness. The importance of this challenge lies in its capacity to revolutionize the sphere of cardiac fitness by using offering more desirable accuracy, well timed intervention, advanced healthcare efficiency, and capacity for telemedicine. The challenge addresses studies gaps in present methods, which include data heterogeneity, interpretability, robustness to noise, small pattern size, medical validation, moral and prison considerations, and actual-time processing and deployment.

II. INTRODUCTION

The Deep Learning-Based Arrhythmia Classification using 2-D ECG Spectral aims to broaden an advanced gadget for the automated type of arrhythmias using deep mastering strategies and a pair of-D spectral images derived from electrocardiogram (ECG) facts. This mission is motivated by way of the want for correct and green strategies of diagnosing and classifying strange coronary heart rhythms, which might be critical for well timed and effective medical intervention. Arrhythmia is a type of heart disease and refers to irregular changes in heart rate. There are many types of arrhythmias, including atrial fibrillation, premature beats, ventricular fibrillation, and tachycardia. Although an arrhythmia does not have a serious impact on life, persistent arrhythmias can be fatal. In this project, we use convolutional neural networks (CNN) to create an effective electrocardiogram (ECG) arrhythmia classification method and classify ECG into seven categories; one category is normal, the other six different groups. ty pes of arrhythmia.

1.1.How it works:



Here we create a web application using HTML, CSS and JAVASCRIPT as front-end where user can have good user experience(UX) and flask as back-end to connect these python files and HTML,CSS and JAVASCRIPT files and deployed using Firebase. Now the a user can give a feature extracted image as input data to the designed (UI)user interface then that works on backend using given model ofr the processing and then we get prediction as output.

1.2.The project involves the following key components:

I. Data Collection and Preprocessing: ECG data is gathered from sufferers and preprocessed to generate 2-D spectral pix the use of sign processing strategies consisting of Fourier rework or wavelet transform. This step ensures that the ECG data is transformed into a format suitable for deep getting to know evaluation.

II. Deep Learning Model Development: Deep gaining knowledge of fashions, including convolutional neural networks (CNNs), are developed and skilled on the 2-D spectral snap shots to automatically examine and extract capabilities associated with exceptional sorts of arrhythmias. The models are optimized to gain excessive accuracy in classifying arrhythmias.

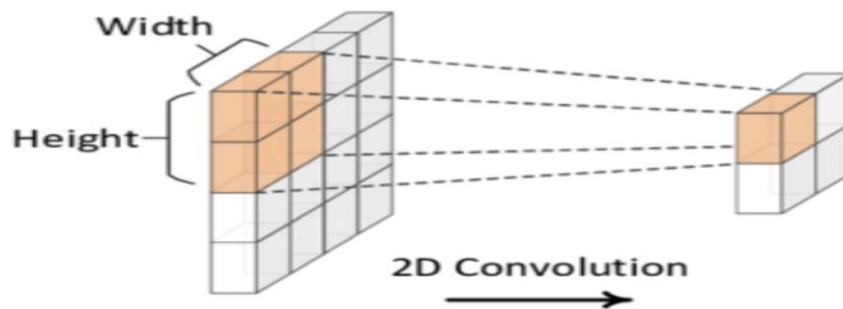


Fig 1.2.1:2-D CNN(Convolution Neural Networks)

III. Model Validation and Testing: The educated models are fastidiously verified and tested the usage of separate datasets to assess their overall performance in accurately classifying arrhythmias. This step ensures that the models generalize nicely to new, unseen records.

IV. Integration and Deployment: The verified deep mastering fashions are integrated right into a device that can technique new ECG spectral snap shots and classify them into unique arrhythmia classes. This system has the ability to assist healthcare experts in diagnosing and treating sufferers with cardiac situations.

V. Enhanced Accuracy: By harnessing the strength of deep learning, the venture goals to obtain a high stage of accuracy in classifying exceptional kinds of arrhythmias. This can result in extra specific diagnoses and treatment plans for patients with cardiac conditions.

VI. Timely Intervention: The automated class machine has the potential to expedite the analysis method, making an allowance for timely medical intervention in instances of ordinary coronary heart rhythms. This may be crucial in emergency conditions and in dealing with persistent cardiac conditions.

VII.Potential for Telemedicine: The development of an automated arrhyclassification system could facilitate remote monitoring and diagnosis of cardiac conditions, enabling telemedicine applications for patients in remote or underserved areas.

VIII. Improved Healthcare Efficiency: By automating the arrhythmia classification process, healthcare providers may be able to streamline the diagnostic workflow, leading to more efficient use of resources and improved patient care. The remaining intention of this mission is to increase a robust and reliable device that may aid healthcare providers in the correct and well timed analysis of arrhythmias, main to improved affected person outcomes and better control ofcardiac fitness.

III.METHODOLOGY

1.1. Problem Statement:

Arrhythmia is a common and potentially life-threatening condition caused by an irregular heartbeat. Accurate and timely diagnosis of arrhythmias is crucial for effective treatment and patient care. Traditional ECG analysis has limitations in accurately classifying arrhythmias, so more advanced classification methods are needed. This project is designed to develop a deep learning arrhythmia classification system using 2D electrocardiogram spectrum images. The system uses a neural network model to identify and classify different patterns such as sinus disease, atrial fibrillation and ventricular tachycardia. The goal is to improve the accuracy and efficiency of arrhythmia classification, thereby improving patient outcomes and clinical decision-making.

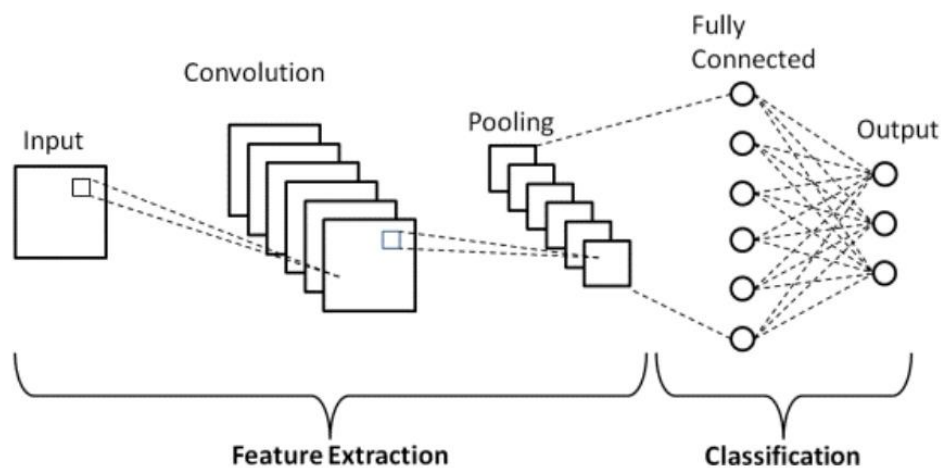


Fig 2.1:Methodology

2.2. Methodology:

1. Data Collection and Curation:

- Obtain ECG statistics from numerous affected person populations, along with people with different cardiac conditions and demographics.
- Curate a complete dataset that represents a huge spectrum of arrhythmias and ECG signal characteristics

2. Preprocessing and Spectral Image Generation:

- Preprocess the ECG data to take away noise and artifacts, making sure the best of the input signals.
- Transform the preprocessed ECG facts into 2-D spectral images using signal processing strategies which include Fourier rework or wavelet remodel.

3. Model Development:

- Design and develop deep learning models, including convolutional neural networks (CNNs), tailored for processing 2-D spectral pix.
- Train the deep mastering fashions on the curated dataset, leveraging techniques together with switch getting to know and records augmentation to improve version generalization.

4. Validation and Testing:

- Validate the skilled fashions using rigorous pass-validation strategies to assess their accuracy and robustness throughout distinctive arrhythmia types.
- Test the models on separate datasets to evaluate their performance in correctly classifying arrhythmias, including uncommon and imbalanced lessons.

5. Interpretability and Explainability:

- Investigate techniques for decoding and explaining the selections made by using the deep mastering models to decorate their medical application and trustworthiness.

6. Feature Extraction:

- Implement feature extraction techniques like wavelet transforms or Fourier analysis to capture relevant spectral patterns for arrhythmia detection.

7. Training Procedure:

- Train the model using appropriate loss functions and optimization algorithms, incorporating early stopping and model checkpointing.

8. Hyperparameter Tuning:

- Conduct systematic tuning of hyperparameters, optimizing learning rates, batch sizes, and network depths to enhance model performance.

9. Evaluation Metrics:

- Assess model performance using accuracy, precision, recall, F1-score, and AUC- ROC to ensure comprehensive evaluation.

10. Comparison with Baselines:

- Compare the model against baseline methods and traditional ECG analysis techniques to quantify classification accuracy improvements.

11. Clinical Validation and Integration:

- Collaborate with healthcare experts to clinically validate the overall performance of the deep studying-based totally arrhythmia type gadget.
- Integrate the established models into a consumer-friendly system which could procedure new ECG spectral photos and provide computerized arrhythmia classification.

12. Ethical and Legal Considerations:

- Address ethical and prison issues associated with affected person privateness, consent, and liability in the deployment of computerized diagnostic equipment.

13. Real-Time Processing and Deployment:

- Develop efficient algorithms and software program architecture to allow real-time processing of 2-D ECG spectral pics for well timed analysis and intervention.
- Deploy the device in medical settings, ensuring seamless integration with current healthcare infrastructure.

2.3 Convolutional Neural Network (CNN) Architecture:

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The project involves the following key components:

Convolutional Layers:

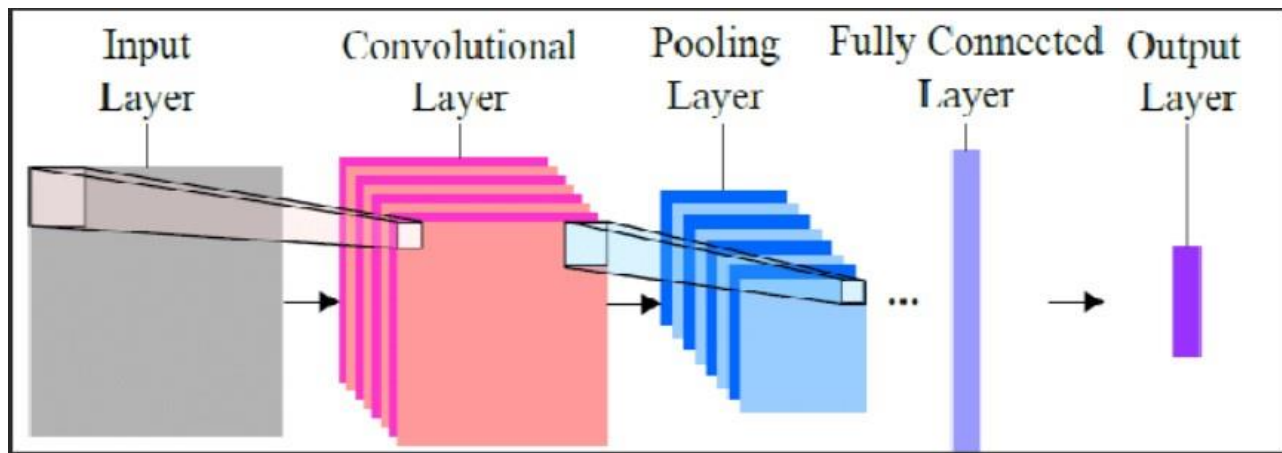


Fig 2.3.1: Activation function

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7. Potential for Telemedicine: The development of an automated arrhythmia classification system could facilitate remote monitoring and diagnosis of cardiac conditions, enabling telemedicine applications for patients in remote or underserved areas.

8. Improved Healthcare Efficiency: By automating the arrhythmia classification process, healthcare providers may be able to streamline the diagnostic workflow, leading to more efficient use of resources and improved patient care. The remaining intention of this mission is to increase a robust and reliable device that may aid healthcare providers in the correct and well timed analysis of arrhythmias, main to improved affected person outcomes and better control of cardiac fitness.

9. Filter Sizes: The filter length determines the spatial quantity of the functions that the filter out can locate inside the enter photograph. In the context of 2-D ECG spectral pics, the clear out length should be selected to seize applicable patterns and structures in the spectral area. For example, smaller filter sizes (e.G., 3x3 or 5x5) can seize nice-grained information, while large filter sizes (e.G., 7x7 or 9x9) can capture extra global styles.

10. Number of Filters: The wide variety of filters in a convolutional layer determines the intensity of function extraction and the range of functions that can be learned with the aid of the version. In the context of arrhythmia type, a larger range of filters can help capture a huge variety of spectral capabilities associated with one-of-a-kind arrhythmia sorts.

11. Activation Functions (e.G., ReLU): ReLU (Rectified Linear Unit) is a generally used activation feature in CNNs because of its simplicity and effectiveness. It introduces non-linearity into the version and helps the community learn complex styles within the records. The use of ReLU as the activation feature in convolutional layers allows the version to seize non-linear relationships in the spectral snap shots, enhancing its ability to extract discriminative functions.

$$F(x) = \max(0, x)$$

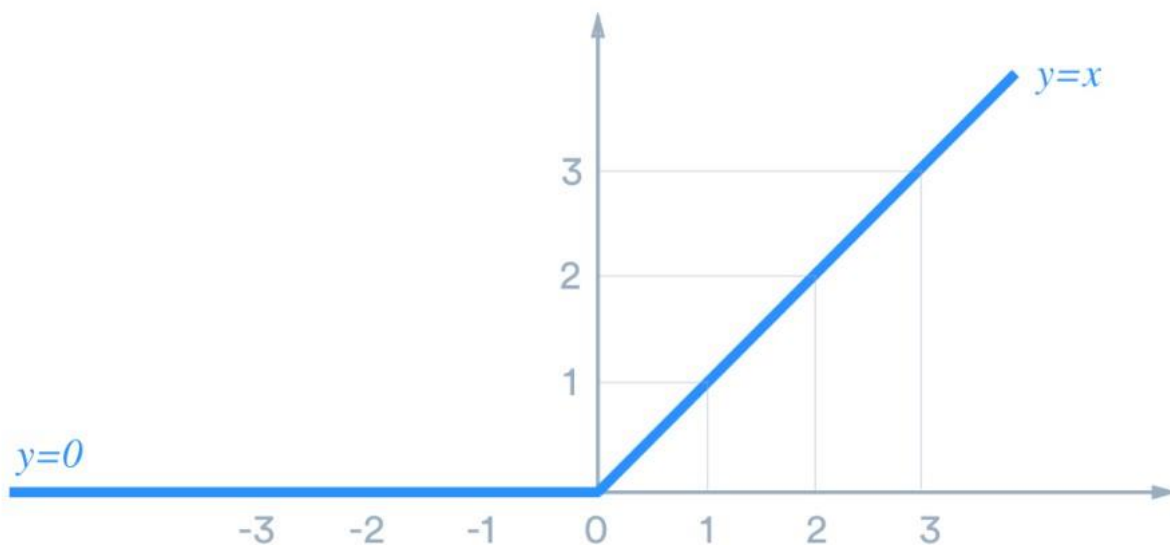


Fig 2.3.2: Activation function

Pooling Layers:

Max Pooling and Average Pooling:

In the CNN architecture for arrhythmia classification, max pooling and average pooling are usually used for spatial downsampling. Max pooling selects the maximum cost from a neighborhood location of the characteristic map, even as average pooling computes the common cost inside the identical region. Both operations lessen the spatial dimensions of the characteristic maps, effectively down sampling.

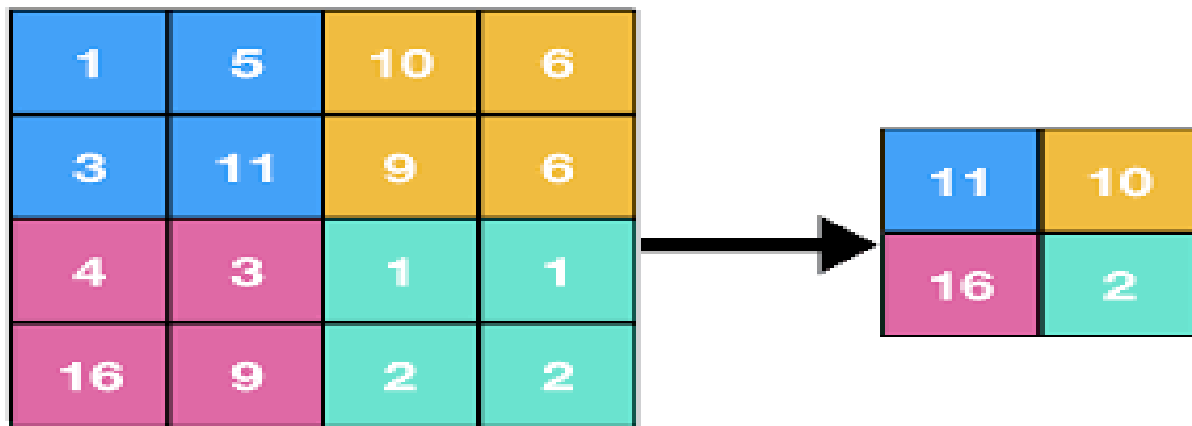


Fig 2 .3.3:max pooling

Information Purpose of Pooling:

The foremost reason of pooling layers is to introduce translational invariance and decrease the spatial decision of the characteristic maps. By downsampling the characteristic maps, pooling layers assist make the learned functions greater strong to small spatial variations and decrease the computational burden of subsequent layers.

Control over Overfitting:

Pooling layers can also assist manipulate overfitting by lowering the spatial dimensions of the feature maps, which can save you the version from studying noise or beside the point details within the enter information.

Spatial Down sampled Feature Maps:

After applying pooling layers, the spatial dimensions of the function maps are reduced, at the same time as crucial functions are retained. attention at the most relevant records and discard redundant or much less informative details. Justifying the CNN depth:

Complexity and Feature Representation:

The depth of a CNN architecture, as exemplified via well-known architectures including VGG and ResNet, at once affects the version's capability to examine complex hierarchical functions from input data. A deeper architecture allows the community to capture complex patterns and representations in the spectral photographs.

Hierarchical Feature Learning:

Deeper architectures permit the CNN to learn hierarchical representations of capabilities, wherein lower layers seize simple patterns (e.G., edges, textures) and higher layers capture more abstract and complex functions applicable to arrhythmia category.

Transfer Learning Considerations: Well-known architectures like VGG and ResNet have verified achievement in photo classification obligations and may be leveraged for switch mastering. The depth of these architectures permits for effective transfer of found out functions to the venture of arrhythmia classification.

Suitability for Spectral Images: The chosen depth of the CNN architecture should be suitable for processing 2-D ECG spectral pics, which may also comprise intricate patterns and systems that require a deep structure to effectively capture.

Avoidance of Vanishing Gradient:

Deep architectures, while designed with suitable pass connections (as in ResNet) or cautious weight initialization, can mitigate issues including vanishing gradients, enabling powerful education and characteristic gaining knowledge of in deeper layers.

Balancing Computational Complexity: The selected intensity ought to strike a stability among model complexity and computational performance. It need to be deep enough to seize relevant functions however no longer overly complex to the point of diminishing returns or computational impracticality.

Output Layer:

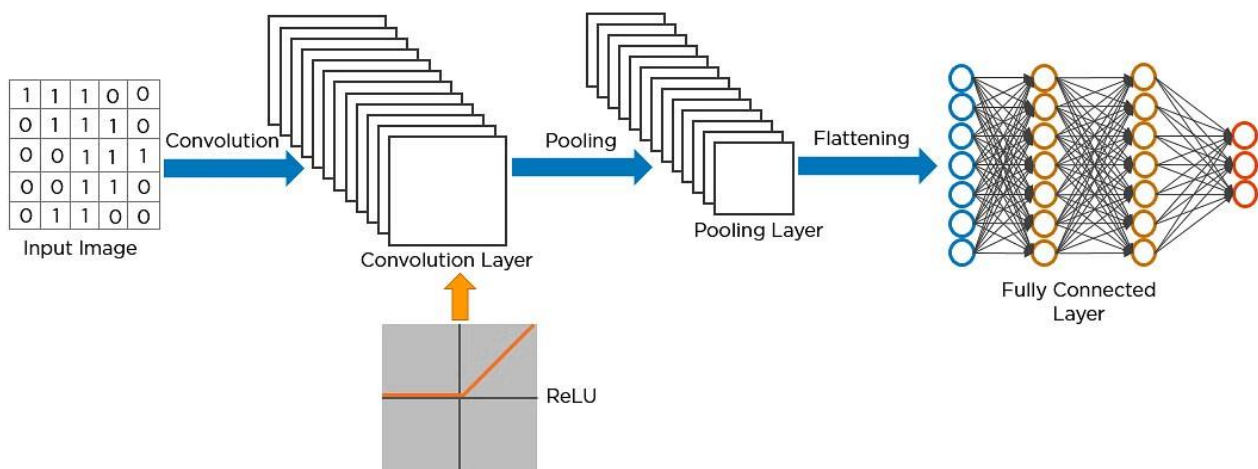


Fig 2.3.4:output layer

Configuration of the Output Layer:

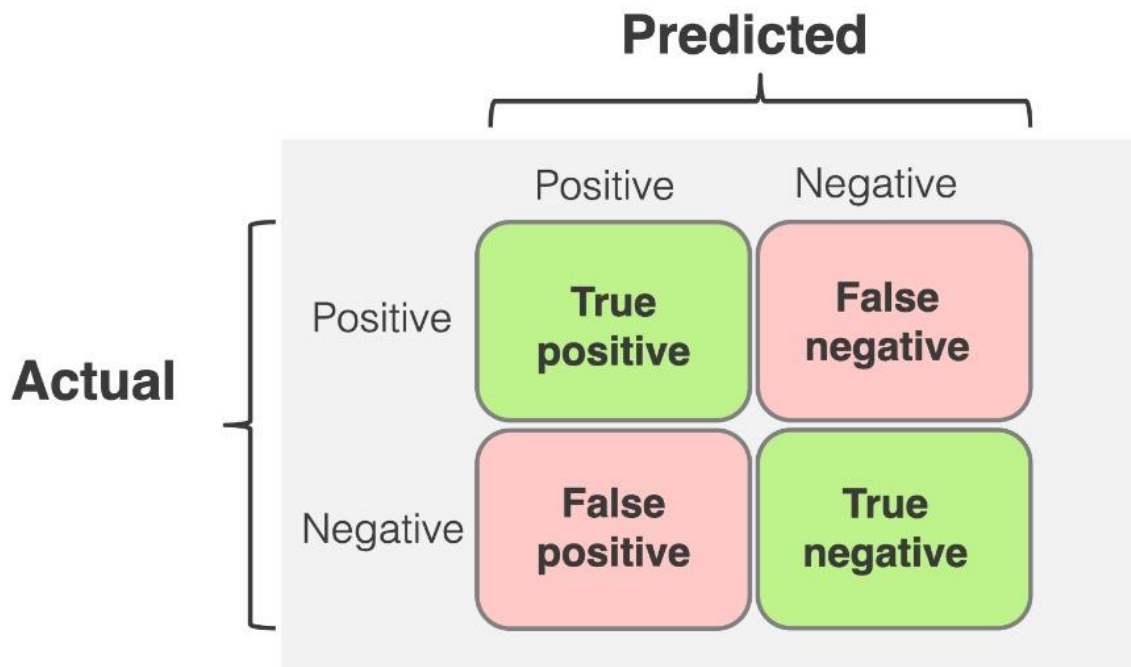
The output layer of the CNN architecture for arrhythmia class is designed to produce predictions for exceptional arrhythmia training. The wide variety of neurons inside the output layer corresponds to the awesome arrhythmia classes that the model ambitions to categorise. Each neuron inside the output layer represents a specific arrhythmia elegance, and the version's prediction is based at the neuron with the very best activation.

Number of Neurons: The range of neurons within the output layer is decided by means of the entire variety of arrhythmia instructions that the model is educated to categorise. For example, if there are N wonderful arrhythmia instructions, the output layer could have N neurons, every representing one class.

Use of Softmax Activation: The softmax activation characteristic is usually used inside the output layer for multi- elegance type duties. It transforms the raw output rankings of each neuron into elegance probabilities, ensuring that the sum of all possibilities equals 1. This permits the model to make confident and normalized predictions throughout all lessons.

Interpretation of Softmax Output: After making use of the softmax activation, the output of each neuron represents the chance that an input ECG spectral photograph belongs to a specific arrhythmia magnificence. The class with the very best possibility is anticipated as the maximum likely arrhythmia kind for the input picture.

Evaluation metrics:



Accuracy:

Accuracy is a measure of the overall correctness of the model and represents the proportion of correctly classified instances.

$$\text{Accuracy} = (TP + TN) / (TP + TN + FP + FN)$$

precision:

Accuracy measures the accuracy of positive predictions and represents the proportion of true positive predictions among all positive predictions.

$$\text{Precision} = TP / (TP + FP)$$

Recall:

Also known as sensitivity, recall measures the ability of a model to identify all relevant cases and represents the proportion of true positive predictions among all true positive cases.

$$\text{Recall} = TP / (TP + FN)$$

F1-Score:

F1-Score is a measure that combines precision and recall into a single value and provides a balance between the two metrics.

$$\text{F1-score} = 2 * (\text{Precision} * \text{Recall}) / (\text{Precision} + \text{Recall})$$

Specificity:

It is the proportion of True Negatives to the count of actual negative cases in the data derived. Specificity = True Negatives / (True Negatives + False Positives)

Sensitivity:

Sensitivity in the context of statistics and machine learning, refers to the ability of a model to correctly identify positive cases out of all true positive cases.

$$\text{Sensitivity} = \frac{\text{True Positive}}{\text{True Positive} + \text{False Negative}}$$

2.4 Process flow:

- Users interact with the user interface to upload images
- The uploaded images are analyzed by the integrated model
- Once the model validates the uploaded images, the estimated results will appear in the user interface. Achieving this goal We must complete all the tasks and activities below.
- Data collection.
 - Gather or create information
- Prior knowledge.
 - Import ImageDataGenerator library
 - Set Image DataGenerator class
 - Use Image Data Generator function for training data and test data.
- sample design
 - Import design library
 - Initialize model
`b="" style="margin: 0px; padding: 0px;">>`
 - Add input method
 - Add hidden method
 - Add output method
 - Set learning method
 - Train and test models
 - Prototype
 - Save models
- Application design
 - Creating HTML files
 - Creating Python code
- Deployment of the application

IV.MODELING AND ANALYSIS

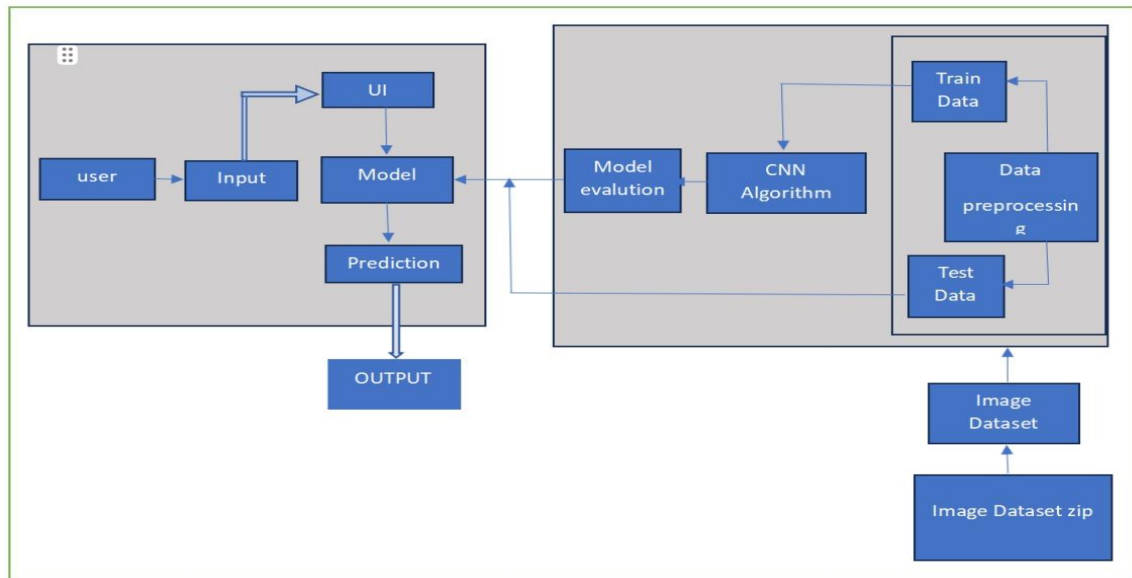


Fig2.1: System Design & Implementation

System Design:

The diagram presents a system for ECG (electrocardiogram) classification using a convolutional neural network (CNN). Design consists of elements such as "user input," "UI," "model," "prediction," "output," "model evaluation," "CNN algorithm," "train data," "data preprocessing," "test data." Included. , "image dataset," and "image dataset zip."

The system is designed to take user input, process it through a CNN model, make predictions and provide output to the user. A CNN algorithm is used to process the image data, and the system involves training and testing the model using the image datasets.

Implementation:

The implementation consists of building a Flask web application to serve the ECG classification model. The application allows users to upload ECG images for prediction and provides the predicted class as output. The CNN model is implemented using TensorFlow and Keras, with data preprocessing, model generation, integration, training and prediction steps. Training a CNN model involves defining layers, setting up a data generator for training and testing datasets, and integrating the model with an appropriate optimizer and loss function.

Overall, the system design and implementation involves building a machine learning system for ECG classification, including a user interface for input, a CNN model for processing, and an output mechanism for predictions. The implementation consists of creating a web application to interact with the trained model and providing functionality for users to upload ECG images for classification.

V.RESULTS AND DISCUSSION

Here are the some snapshots of the web application running on the local server machine and working.

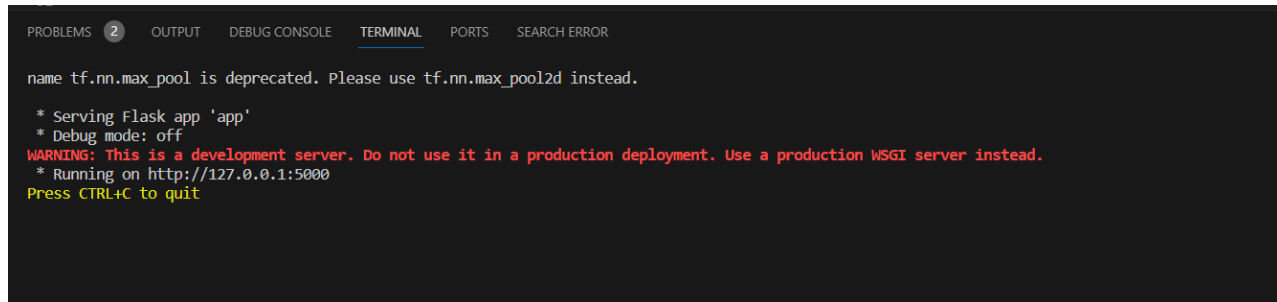


Fig 4.1:local server machine

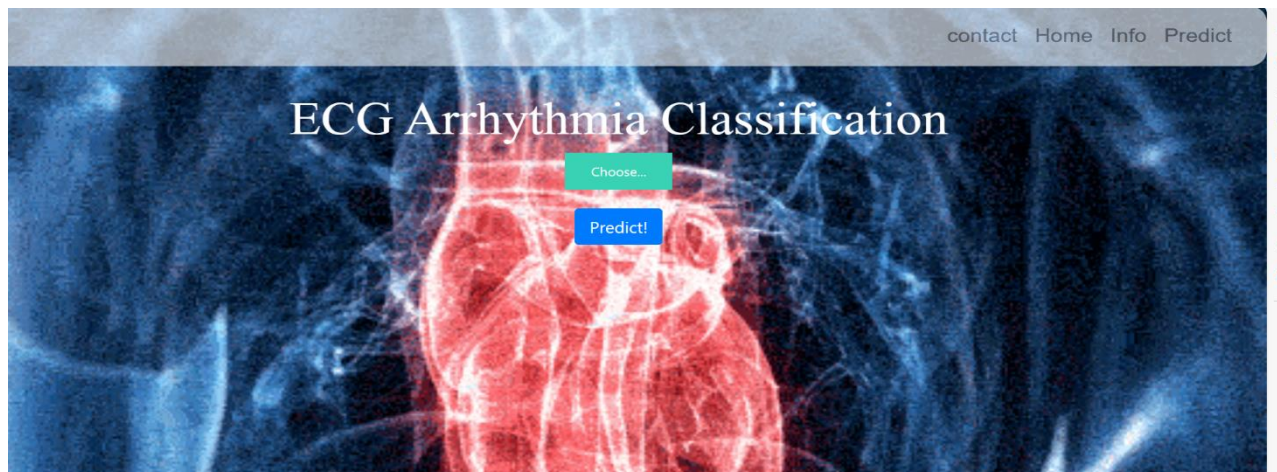


Fig 4.2 : predicting

Here in this page we insert the image of the ecg image by clicking choose button and the we click on the predict button then we can get the out as printed.

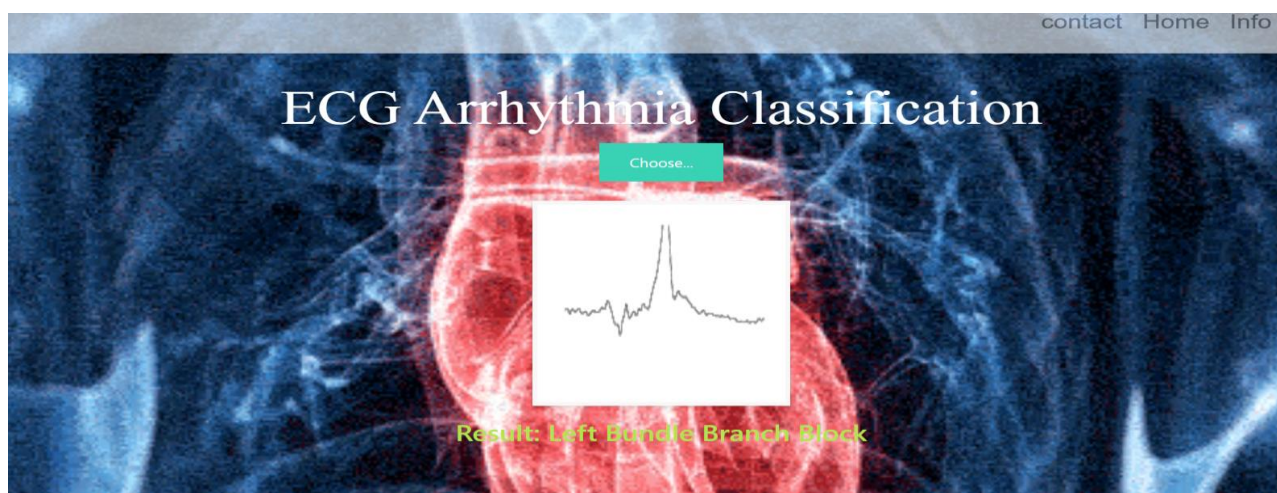


Fig 4.3 : predict disease

Here we get the result as Left Bundle Branch Block . We trained our model with nearly 15000 image dataset which as test data & train data from test dataset.


```
[ ] #extract the zip folder
!unzip "/content/ECG-Dataset" -d "/content/ECG-Dataset"

inflating: /content/ECG-Dataset/Dataset/train/Premature Ventricular Contractions/fig_1539.png
inflating: /content/ECG-Dataset/Dataset/train/Premature Ventricular Contractions/fig_154.png
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inflating: /content/ECG-Dataset/Dataset/train/Premature Ventricular Contractions/fig_1570.png
```

Fig 4.4 : Extracting the zip folder

```
print("Precision:", precision)
print("Recall:", recall)
print("F1-score:", f1_score)
```

```
Precision: 0.058093359631821176
Recall: 0.24102564102564103
F1-score: 0.09362152998516635
```

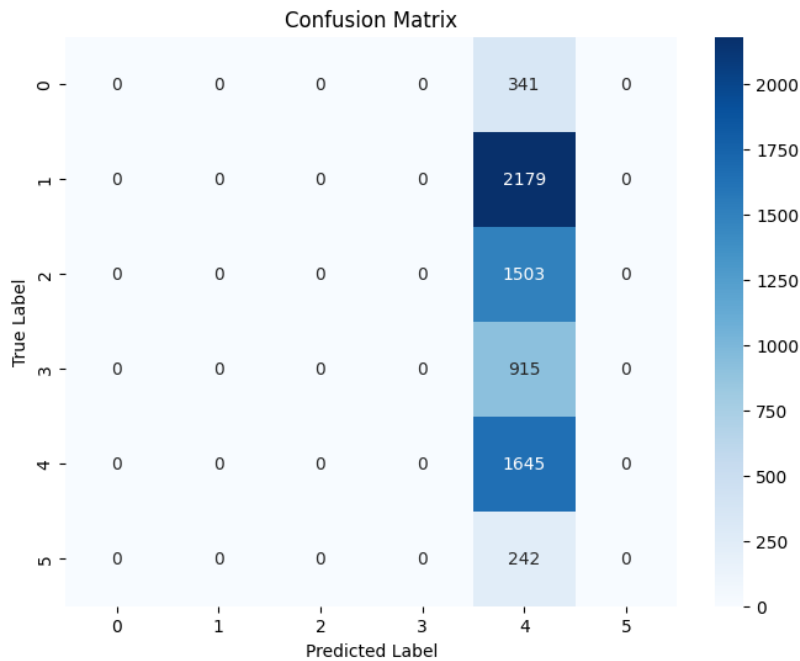
```
[ ] # Print confusion matrix
print("Confusion Matrix:")
print(conf_matrix)
```

```
Confusion Matrix:
[[ 0  0  0  0  0 341  0]
 [ 0  0  0  0  0 2179  0]
 [ 0  0  0  0  0 1503  0]
 [ 0  0  0  0  0  915  0]
 [ 0  0  0  0  0 1645  0]
 [ 0  0  0  0  0  242  0]]
```

Fig 4.5 : Evaluation metrics

```
# Visualize confusion matrix using seaborn
```

```
plt.figure(figsize=(8, 6))
sns.heatmap(conf_matrix, annot=True, cmap="Blues", fmt="d")
plt.xlabel('Predicted Label')
plt.ylabel('True Label')
plt.title('Confusion Matrix')
plt.show()
```



```
[ ] # Plot training and validation metrics
```

```
plt.figure(figsize=(12, 6))
```

Fig 4.6 :Confusion Matrix

To save the best accuracy got in the epoch we will use this callback and checkpoint

```
from tensorflow.keras.callbacks import ModelCheckpoint
checkpoint = ModelCheckpoint("best_model_{epoch:02d}.h5", monitor="val_accuracy", save_best_only=True, mode="Max")
tr = model.fit_generator(x_train, steps_per_epoch=480, callbacks=[checkpoint], validation_steps=10)
```

```
WARNING:tensorflow:ModelCheckpoint mode Max is unknown, fallback to auto mode.
<ipython-input-125-273787b231c1>:3: UserWarning: `Model.fit_generator` is deprecated and will be removed in a future version. Please use `Model.fit`, which supports generators.
tr = model.fit_generator(x_train, steps_per_epoch=480, callbacks=[checkpoint], validation_steps=10)
480/480 [=====] - ETA: 0s - loss: 0.0125 - accuracy: 0.9958WARNING:tensorflow:Can save best model only with val_accuracy available, skipping.
480/480 [=====] - 143s 299ms/step - loss: 0.0125 - accuracy: 0.9958
```

saving the model

Fig 4.7 : Epochs

Model Generation with predicted output:

```
dict2[value] = key
return dict2

# Map class indices to class labels
class_indices = {'Left Bundle Branch Block': 0, 'Normal': 1, 'Premature Atrial Contraction': 2, 'Premature Ventricular Contractions': 3, 'Right Bundle Branch Block': 4, 'Ventricular Tachycardia': 5}
# print(class_indices)
# reverse_class_indices = dict((v, k) for k, v in class_indices.items())
reverse_class_indices = interchange_key_value(class_indices)

predicted_class_label = reverse_class_indices[predicted_class]

# # Print the predicted class label
print("Predicted Class Label:", predicted_class_label)
```

Model: "sequential"

Layer (type)	Output Shape	Param #
conv2d (Conv2D)	(None, 62, 62, 32)	896
max_pooling2d (MaxPooling2D)	(None, 31, 31, 32)	0
flatten (Flatten)	(None, 30752)	0
dense (Dense)	(None, 200)	6150600
dense_1 (Dense)	(None, 300)	60300
dense_2 (Dense)	(None, 6)	1806

Total params: 6213602 (23.70 MB)
 Trainable params: 6213602 (23.70 MB)
 Non-trainable params: 0 (0.00 Byte)

1/1 [=====] - 0s 155ms/step
 Predicted Class: 2
 Predicted Class Label: Premature Atrial Contraction

VII.CONCLUSION

In this study, the use of convolutional neural networks (CNN) showed great promise and performance in arrhythmia classification using 2D ECG spectral images. A model is built using CNN architecture and many experiments are carried out using appropriate processing methods such as Rectified Linear Units (ReLU), pooling of layers to reduce the size, and flattening techniques to prepare the data for classification. The accuracy of classifying cardiac arrhythmias from 2D ECG spectrum images reaches 99.2%, demonstrating the power and efficiency of deep learning models. This superior performance is further validated by measurements such as F1 scores, recall, accuracy, and specificity, which together demonstrate the model's ability to detect a variety of arrhythmia patterns in high-sensitivity individuals. Save the learning model as "ECG".h5' to facilitate seamless integration into practical applications. Sending these patterns to a web application provides doctors and nurses with a user interface that helps diagnose arrhythmias quickly and accurately. The success of this study demonstrates the potential of deep learning, especially CNN, for the analysis of medical images and classification of diseases. The model demonstrates the ability to capture complex patterns and features indicative of different types of arrhythmias using 2D electrocardiogram spectral images. This advancement holds great promise for the healthcare industry, offering a non-invasive and rapid way to increase effectiveness. Its purpose is to increase its effectiveness, better demonstrate its high accuracy, and demonstrate its ability and ability to adapt to ECG data in different patients and different areas. However, continued development and expansion of data can improve the model's generalizability across wide range of populations and conditions, ensuring its reliability in treatment. In conclusion, the proposed CNN-based model represents a significant advance in the use of deep learning to study arrhythmia classification using 2D ECG spectral imaging. Its high accuracy, together with its successful implementation in a web

application, indicates its potential to become an important tool for doctors to accurately and timely diagnose heart disease, arrhythmias, thereby helping to improve patient care and clinical outcome

VIII. REFERENCES

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