# **StorageBIT**

# A Metadata-aware, Extensible, Semantic and Hierarchical Database for Biosignals

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Abstract: Acquisition of biomedical data is, nowadays, widespread, originating a deluge of data that may contain rele-

vant and interesting information for health-care professionals, biosignal researchers, and the individuals themselves. This creates the need to organize the information in a structured way, facilitating collaboration and research efforts. Therefore, for that purpose, this paper investigates database systems and file formats, discussing current technologies, requirements and possible implementations. These implementations were put through a benchmarking package to analyze their insertion, query and update performance. A final approach combining the use of HDF5, a hierarchical file format for numerical data, and MongoDB, a NoSQL database,

is proposed, as it showed the best combination of properties from the tested solutions.

# 1 INTRODUCTION

The ability to measure biomedical signals (biosignals) is no longer restricted to specialized environments and expensive equipment. Indeed, recent advances in wireless protocols, ubiquitous computing, and sensor technology have made the acquisition of biosignals widespread. Companies like Nike<sup>1</sup>, Zeo<sup>2</sup>, and Fitbit<sup>3</sup> all currently commercialize products to track various types of information, such as the number of steps, calories, sleep, weight, heart rate, etc.. This technological revolution has given way to a new concept of healthy living, the so-called *Quantified Self* movement, whereby objective, quantified information can lead to insights that prompt behavior change, resulting in improved health (Kvedar, 2011).

This opens access to vast amounts of data that, first and foremost, need to be stored. Only then is it possible to apply signal processing algorithms (Vaseghi, 2006), pattern recognition, multi-modal data fusion and classification techniques (Jain et al., 2000) to extract meaningful information from the acquired signals. This work is thus focused on the problem of data storage and access in the context of biosignals, exploring the requirements, available technologies and efficiency aspects of choosing a database sys-

tem and developing its interface. This is done in two perspectives. First, the format on which the data is actually stored must be specified and implemented, and second, the database itself needs to be deployed.

The remainder of this paper is organized as follows. We start with a review of the state-of-theart, pointing out limitations of current approaches. Then, the basic requirements are presented, discussing available technologies for the storage of biosignals. Subsequently, various implementation alternatives are analyzed, and then evaluated with a set of performance tests. Finally, the main conclusions are outlined, specifying the chosen implementation and future work.

#### 2 STATE-OF-THE-ART

Databases for biosignals are essential for scientific development, research in biomedical signal processing and in health-care applications. However, existing attempts to standardize a file format for the storage and sharing of biosignals have several limitations, which hamper research efforts. Indeed, standardization allows for easier collaboration, which improves the quality of developed software, exchange of scientific results and health-care practices, while also reducing costs, and leading to the discovery of new knowledge (Varri et al., 2001). In reality, many file

<sup>&</sup>lt;sup>1</sup>www.nike.com/fuelband

<sup>&</sup>lt;sup>2</sup>www.myzeo.com/sleep

<sup>&</sup>lt;sup>3</sup>www.fitbit.com

formats exist, with well over 100 documented formats (Brooks et al., 2011), such as the Extensible Biosignal File Format (EBS) (Hellmann et al., 1996), the European Data Format (EDF+) (Kemp and Olivan, 2003), the Medical Waveform Format Encoding Rules (MFER) (MFER, 2003), and the WaveForm DataBase (WFDB) (Goldberger et al., 2000). Many formats are proprietary, limiting the access to the information contained in the files. Most are designed for a specific purpose, such as the storage of electrocardiogram (ECG) signals, and there is a general lack of structured metadata, that is, all the semantic information that describes how the signals were acquired and what was done with them.

It should be noted that peer-reviewed literature on this topic is fairly limited. A quick search for "biosignal database" in IEEE's Xplore® Digital Library produces 28 results. Of these, only four directly address the issues of specifying and implementing a system for the storage of biosignals. For instance, Penzel et al. (Penzel et al., 2001) describe the approach used to store polysomnography (PSG) data, produced in the scope of SIESTA, an European project carried out in 2001. The European Data Format was used, with the need to specify strict filename conventions (e.g. encoding the subject identification, or the recording site), and the internal structure of the files (i.e. the order of the signals in the file and their sampling rates). In the same year, Lovell et al., (Lovell et al., 2001) detailed a framework for web-enabled storage of biosignals, where it is already noted the absence of a common file format. The development of browser-based applications is discussed and access-load issues are addressed.

More recently, the focus has been given to semantic approaches (see, for example, (Brooks et al., 2011), (Kokkinaki et al., 2008), and (Brooks, 2009)), where, in addition to the core biosignal data, contextual information is included, such as patient and acquisition procedure information, enabling the integration of disparate and heterogeneous sources of medical information and facilitating their query and retrieval.

It is easy to grasp that current methods exhibit some glaring limitations. In particular, it is common to have the signal data separated from metadata characterizing the experimental setup. Therefore, possessing the data files alone is of limited interest, because the acquisition context necessary to analyze them cannot be accessed. Furthermore, current file formats usually have a fixed number of metadata fields, with limited size, employing weak semantics (while certain metadata fields are self-explanatory – sampling frequency, resolution, etc. – others may not be – e.g.

"channel" may refer to the actual samples of a signal, its label, or the identification of the physical input of the acquisition system). Additionally, current approaches make it hard to append new information to an already existing file (e.g. a filtered version of the biosignals, or a comment about the data). And, finally, these approaches provide poor interfaces to the user, with very limited or inexistent query support. These limitations provide our motivation to build upon the current state-of-the-art and develop an extensible, semantic and hierarchical infrastructure.

# 3 STORING BIOSIGNALS

In response to the limitations found in previous work, a list was curated with the most important aspects and properties a system that stores biosignals should exhibit. Based on these requirements, a data model was specified and various implementations of the data model were investigated.

## 3.1 Requirements

The following properties were used to evaluate and compare the various file formats under study: 1) Access Performance: Read and write speed, nonsequential access, data compression, etc.; 2) Cross-Platform Support: The availability of tools for different operating systems and programming languages; 3) Events Support: Events and annotations are textual comments or values related to a particular signal, or to the acquisition session as a whole (e.g. the location of R waves in the ECG). This type of data is very important, given that only through the evaluation of annotations a human user or a computer algorithm can learn the meaning of specific signal patterns (Penzel et al., 2001); 4) Extensibility: The ability to easily add more data to a file; 5) Metadata: Defined as data about data, pertains to all the additional information that characterizes the acquired signals. It includes general and particular attributes of the biosignals, when, how and by whom the acquisitions were made, their purpose, and what processing has been applied. Fields for metadata should be extensible (allowing to add more information along the way) and, more importantly, should have meaning, this is, the use of a controlled vocabulary to specify content, e.g using ontologies (McGuinness, 2003). Some common metadata fields can be seen in Figure 1. The use of metadata allows for knowledge to be processed computationally in a comparable way to numeric data (Brooks, 2009); 6) Multi-modality: The capability to store various signal types in a single container struc-

Table 1: Comparison of file formats and NoSQL DBMSs.

(a) Comparison of file formats.

(b) Symbols used in Table (a).

Duonoutri	File Format					
Property	EBS	EDF+	MFER	WFDB	HDF5	
Compression	-	-	-	-	+++	
Non-Sequential Access	-	-	-	-	+++	
Cross-Platform Support	+	++	?	++	++	
Events Support	++	+	-	++	++	
Extensibility	-	-	-	-	+++	
Metadata	++	+	+	+	+++	
Multi-modality	-	+	-	+	+++	
Querying	-	-	-	-	-	

Symbol	Description
?	Information Not Available
-	Not Supported
+	Supported
++	Good Support
+++	Excellent Support

(c) Comparison of NoSQL database management systems.

Droponty	NoSQL DBMS				
Property	CouchDB	MongoDB			
Flag Line	DB consistency, ease of use	Scalable, high-performance, retains			
r iag Line	DB consistency, ease of use	friendly properties of SQL			
Interface	HTTP/RESTful	BSON			
Queries	MapReduce	Javascript expressions			
Replication	Master-Master	Master-Slave, replica sets			
Others	Multiversion Concurrency Control,	Memory-mapped files, sharding,			
	attachment handling	embedded file system (GridFS)			

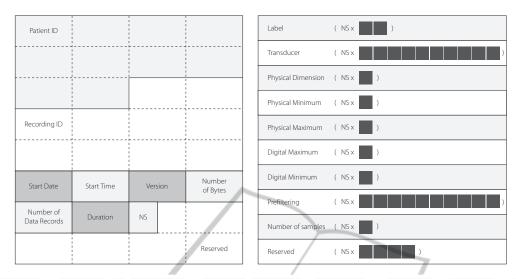
```
Record = {
                 ane
            { 'Session': '#',
 'Header':
                                        Biosignal':
   'Date': 'yyyy-mm-ddThh:mm:ss'
                                         'Device': 'txt
   'Supervisor': 'txt',
                                         'Sample Rate':
   'Experiment': { 'Name':
                            'txt'
                                         'Duration':
      Description': 'txt',
                                         'Resolution':
     'Goals': 'txt'},
                                         'Units': { 'Time':
                                                             'txt', 'Sensor':
   'Subject': { 'Name': 'txt',
                                              'txt'
     'Birthday': 'yyyy-mm-dd',
                                        Events': { 'Source': 'txt',
     'Gender': 'txt',
                                         'Type': 'txt',
     'Contact': 'txt'}},
                                         'Dictionary': {'key': 'value'}}
   'Tags': ['txt', ...],
```

Figure 1: Hierarchical structure of a Record, in a JSON-style notation, as specified by the Data Model, with some common metadata fields.

ture. These signals may be of different nature (e.g. ECG, EEG, PSG, etc.), and possibly acquired at different sampling rates, or even be mere events, thus requiring appropriate accompanying information and data structures; and 7) Querying: A query is a precise request for retrieval of information that shares common properties within a database or an information system. In particular, we are interested in the inclusion of a system of tags, generated by biosignal researchers and experts, leveraging the potential power of *folksonomies* (Wal, 2007). In Table 1(a) the EBS, EDF+, MFER and WFDB file formats are compared based on these criteria.

Additionally to these requirements, the three following general aspects should also be taken into consideration: 1) Accessibility: Data must be accessible to multiple people, possibly in multiple locations. Therefore, the information must live on the cloud, taking advantage of current web-based technologies;

2) Scalability: The ability of a system to respond to a growing amount of work. This can be done in a vertical sense (by adding more resources to a single node in a system) or in a horizontal sense (by adding more nodes to a system). Additionally, the intrinsic software elements of the system should also be as efficient as possible. In the context of biosignals, the bottleneck lies, predominantly, in storage constraints. For instance, a night-long acquisition of PSG data easily exceeds the 1 GB threshold. Thus, the system must deal with large data volumes, and must process it (i.e. put and retrieve operations) quickly; and 3) Flexibility: The system must sort through records from different experiments and through data of various types. Therefore, it needs to be flexible enough to accommodate these different needs, and to be able to cope with changing requirements.



(a) EDF+ header structure, with fixed-length fields on the left and variable-length fields on the right, where each sharp-edged square represents 8 ascii characters (64 bytes).



(b) EDF+ data record structure, storing multiple (NS) biosignals; each round-edged square represents one byte.

Figure 2: Schematic representation of the EDF+ file structure; NS is the number of signals stored in the file.

#### 3.2 Data Model

The basic abstract entities for storage are Records. Records are equivalent to acquisition sessions, in the sense that all the signals from one acquisition session are stored in one Record. The signals should be contextualized with the experiment (i.e. the purpose of the acquisition), the details of the subject, and complemented with any relevant metadata, such as a description of the processing steps necessary to obtain the signal (to audit the processing method), the physical units of the signals, the labels of the channels, or annotations made by the acquisition's supervisor. In this way, multiple users could access the same data, process it, and share any obtained results in a way that is understandable by everyone, in a collaborative effort.

With these principles in mind, an integrated database management system for biosignals was designed, in which the acquired records are sorted by subject and, subsequently, by experiment. The Records are composed by four main fields (see Figure 1): 1) Header: Identifies the file and contains basic information about the stored biosignals, specifying date and time of acquisition, who performed the acquisition to whom, the experimental context,

and any automatically or manually generated indexing tags; **2) Audit:** This field is intended to list a detailed history of the file, i.e., a systematic review of what was done to the biosignals. It would summarize, for instance, which filters were applied, together with the corresponding parameters, or the processing steps used; **3) Biosignals:** The signals of interest, i.e., synchronous data; **4) Events:** Any events or annotations made asynchronously from the recorded biosignal time series.

It should be noted that no element of the data model has a predefined or expected volume of information, being as big as necessary and extensible. Furthermore, the model is designed to be open. Elements can be added or removed, according to the use case. This makes it possible to adapt the model to any type of field structure, and, therefore, current file formats can be easily mirrored in the Data Model.

As an example of how the Data Model compares to one of the most widely used biosignal file formats, the internal structure of the EDF+ format is shown in Figure 2. An EDF+ data file is composed by a header followed by data records. The header identifies the subject and describes the technical parameters of the recording, while the data records contain the time series data. Although the header has variable-length, it

is only to support the multiple data records stored in the file, as the fields for each data record themselves are dimensionally limited. Furthermore, the format does not allow to store additional, user-defined metadata fields. Figure 3 shows how the proposed Data Model can be used to mirror the EDF+ format. The main difference is that, with the Data Model, metadata pertaining to a certain biosignal is stored in the same hierarchical node as that biosignal, thus explicitly defining the ownership of the metadata. Additionally, it is easy, with this approach, to retrieve just one of the stored biosignals, without being necessary to parse the entire file. This is done by directly navigating to the desired hierarchical node, where all the necessary information is stored. Note that the Data Model requires the definition of the metadata fields for each stored biosignal. This implies some overhead, both in computational terms and to the user, but it is our opinion that the flexibility and more detailed information this structure provides compensates the additional workload. As stated earlier, the Data Model encourages the definition of the metadata fields according to each application case, and, accordingly, the biosignal nodes may contain varying sets of metadata fields.

# 3.3 Implementation

Having described the abstract data model, it is now relevant to discuss how to put it into practice. To that end, the two technologies presented below, NoSQL databases and the Hierarchical Data Format, were considered since they exhibit a set of properties that meet the previously discussed requirements.

#### 3.3.1 NoSQL Databases

As the name suggests, NoSQL is a family of Database Management Systems (DBMS) that does not use the SQL language, and many times does not employ the relational model at all (Strauch, 2011). These storage systems do not need fixed schemas, and typically scale horizontally. They are optimized for retrieve and append operations, and are capable of dealing with large amounts of data, making them ideal to solve the problem at hand. Typical NoSQL categories include key-value stores, Big Table implementations, document stores and graph databases (Strauch, 2011). Of these, the most interesting in the context of biosignals is the document-based approach.

The basic notion of this type of DBMS is that a document encapsulates and encodes data in some standard format (e.g. XML, JSON). Documents are analogous to rows in the SQL language, but they do not need to comply all with the same schema, i.e.,

```
Record = {
'Header': {
  'Subject': <Patient ID>
  'Record ID': <Record ID>
  'Date': <Start Date> + <Start
     Time >
'Biosignal 1': {
  'Duration'
  'Sample Rate'
  'Label': <Label [1]>
  'Transducer': <Transducer [1]>
  'Physical Dimension': <Physical
      Dimension [1]>
  'Physical Maximum': <Physical
     Maximum [1]>
   Physical Minimum': < Physical
      Minimum [1]>
  'Digital Maximum': <Digital
     Maximum [1]>
  'Digital Minimum': <Digital
     Minimum [1]>
   Audit':
           <Prefiltering
             JBLICATIONS
'Biosignal NS': {
  'Duration'
  'Sample Rate'
   Label': <Label [NS]>
  'Transducer': <Transducer [NS]>
  'Physical Dimension': <Physical
      Dimension [NS]>
  'Physical Maximum': <Physical
      Maximum [NS]>
  'Physical Minimum': <Physical
     Minimum [NS]>
  'Digital Maximum': <Digital
     Maximum [NS>
  'Digital Minimum': <Digital
     Minimum [NS]>
  'Audit': <Prefiltering [NS]>
```

Figure 3: Mirroring of the EDF+ file structure onto the Data Model, using a JSON-style notation; text between "<>" identifies the corresponding field in the EDF+ format.

they do not need to possess the same fields, which fits nicely the previously mentioned requirements. In this work, the CouchDB (Anderson et al., 2010) and MongoDB (Chodorow and Dirolf, 2010) implementations were analyzed. The reason for choosing these two document-based NoSQL DBMSs resides in the fact that both encode the data in JSON (BSON – binary JSON – for MongoDB), which is becoming increasingly popular as a language-independent, data-interchange format (Crockford, 2006). Table 1(c) provides a comparison of MongoDB and CouchDB.

Type	Description	Code	Technologies	
DB Only	All data and metadata stored in the	and metadata stored in the A1.1 M		
<b>ДБ</b> Опіу	DB	A1.2	CouchDB	
File Only	All data and metadata stored in HDF5 files	A2	HDF5	
File in DB	All data and metadata stored in the DB, but data files are attached to	A3.1	MongoDB, HDF5 via mongofiles	
	documents on the DB	A3.2	MongoDB, HDF5 via rawIO	
File with DB	Metadata stored in DB, data stored in files served out of a dedicated and distributed file system	A4	MongoDB, HDF5	

Table 2: Implementation alternatives for the desired biosignal storage system; solution "A4" is the proposed approach.

# 3.3.2 Hierarchical Data Format (HDF5)

The Hierarchical Data Format is a self-describing data format designed to store and organize large amounts of numerical data (HDF, 2010). It is supported by many software platforms, including C/C++, Java, Matlab and Python. The file structure is based on two major types of objects: Datasets (multidimensional arrays of a homogeneous type), and Groups (container structures which can hold datasets and other groups). This model is very similar to the philosophy behind the design of JSON files, being completely flexible, and thus allowing the storage of annotations and all the desired metadata. In particular, it is possible to define attributes for both the Dataset and Group objects, storing the metadata associated with them. Datasets can be compressed (GZIP), and can also be extended and accessed non-sequentially, an advantage resulting from the use of B-Trees (Bayer, 1971). It is also possible to link to other HDF5 files. It is obvious from this discussion, and from the comparison made in Table 1(a), that the HDF5 file format is the one that best covers the listed requirements, with the exception of the querying property. Therefore, a simple query engine was implemented to search the HDF5 files.

## 3.4 Implementation Alternatives

Making use of MongoDB, CouchDB and HDF5, we implemented and evaluated the performance of the following approaches: 1) **DB Only:** All data and metadata is stored in the DB; this was done using MongoDB (case A1.1) and CouchDB (case A1.2); 2) **File Only:** All data and metadata is stored in HDF5 files (case A2); 3) **File in DB:** All data and metadata is stored in the DB, but HDF5 files with the signal data are attached to documents on the DB; using MongoDB, two alternatives for file attachment

were tested, one using *mongofiles*<sup>4</sup> (case A3.1), the other using *rawIO*<sup>5</sup> (case A3.2); and **4) File with DB:** Metadata stored in MongoDB, data stored in HDF5 files served out of a dedicated and distributed file system (case A4). Solution A4 is the proposed approach. This information is summarized in Table 2.

## 4 PERFORMANCE RESULTS

The task of evaluating a DB system is not an easy one. It should be noted that there is no single evaluation measure that universally classifies a DB system, as it is highly dependent on the specific application. In this sense, the first question that should be posed is the question of applicability, i.e., if the system solves the problem at hand. Secondly, the system is to be used by people from different backgrounds and, as such, it should be easy to use. Finally, performance measures like speed, persistency and scalability should also be addressed.

Taking into account the various approaches described above, several tests were designed for experimental evaluation, in order to assess their performance. In particular, insertion, update and query operations were measured, and in order to have a realistic test environment, a simulation setting was created. This base setting is composed of 100 experiments, 1000 subjects and 1000 records (1 per subject, 10 per experiment). For each record, a dummy biosignal (all zeros) was added, with 32 channels, lasting for 900 seconds and sampled at 1024Hz. Each element of the signal is a 16-bit integer, which accounts for a

<sup>&</sup>lt;sup>4</sup>A command line tool included in the MongoDB distribution to access GridFS, its embedded file system.

<sup>&</sup>lt;sup>5</sup>An alternative to the *mongofiles* tool using the Python interface to handle data streams.

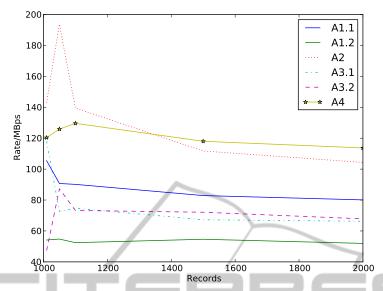


Figure 4: Results of the Biosignal Storage test.

total size of 56.25 MB per record, or about 55 GB for the entire base set. On top of this base set, the following performance tests were applied: a) Insertion of metadata fields; b) Biosignal Storage; c) Biosignal Retrieval; d) Query of the metadata fields; e) Update in Place of metadata fields, without changing the size of the field; and f) Add Update of metadata fields, adding a new field.

The metadata associated with each record is composed by the names of the experiment and the subject, and a date string (ISO8601 format). The metadata associated with each dummy biosignal comprises the sample rate, resolution, duration, a type (i.e. 'zeros'), and a list of channel labels.

The tests were applied in a cumulative manner, i.e., by first adding a number of new elements to the base set, and then executing the tests. This was repeated for 10, 50, 100, 500 and 1000 new additions, so that the final set had 1760 experiments, 2660 subjects and 2660 records, with a total size of about  $170 \, GB$ , taking into account all signal data and metadata. The performance (P) of the Insertion, Query, Update in Place and Add Update tests was measured in operations per second (ops), by timing how long each operation took to run ( $t_i$ ), and then dividing the number of operations (N) by the total time (Equation 1):

$$P = \frac{N}{\sum_{i=1}^{N} t_i} \tag{1}$$

The rate (R) of the Biosignal Storage and Retrieval operations was quantified in MB/s by measuring the amount of data that was being added or retrieved in each operation  $(d_i)$ , timing that operation  $(t_i)$  and then

computing a mean data rate (Equation 2):

$$R = \frac{\sum_{i=1}^{N} d_i}{\sum_{i=1}^{N} t_i}$$
 (2)

The tests were run on an Ubuntu machine (v10.10, 64 bits, Intel i7 with 12 cores at 3.33 GHz, 16 GB of RAM), with the necessary code implemented in Python (v2.6.6). Version 1.0.1 of CouchDB, version 2.0.2 of MongoDB and version 1.8.4 of HDF5 were used. All elements were run locally in order to reduce the variability introduced by network load.

Biosignal Storage and Retrieval rates for the various cases are shown in Figures 4 and 5. In the case of Biosignal Storage (Figure 4), the fastest results were obtained for approaches A" and A4, with a data rate consistently above 100MB/s. A similar result for these two approaches was already expected, as the underlying storage technology (HDF5) is common to them. The less performing results correspond to solution A1.2. Figure 5 shows the results for the Biosignal Retrieval tests. Again, the approaches A2 and A4 produce the highest reading rates, although only while the number of signals is not too big. After 1100 records for A4 and after 1500 records for A2, all the alternatives perform similarly, at about 100MB/s. This reduction in performance is possibly due to the saturation of the system buffers, as the first operations are extremely fast.

Results (mean and standard deviation) for the Insertion, Update and Query performance tests are summarized in Table 3, where it is possible to observe that the approaches using MongoDB (including the proposed approach) outperform the other solutions in every case, except for the Record Header Inser-

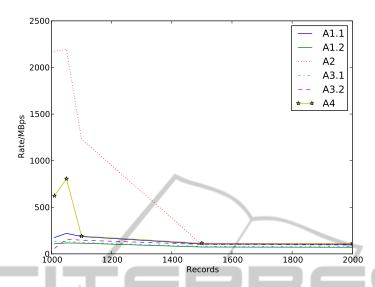


Figure 5: Results of the Biosignal Retrieval test.

Table 3: Results ( $\mu \pm \sigma$ ) of the Insertion, Update and Query tests (in operations per second).

Test	E ANC	D TECHNApproach GH PUBLICAT				
Test	AI.I	A1.2	A2	A3.1	A3.2	A4
Insertion						
experiments	$962.4 \pm 173.7$	$14.1 \pm 2.7$	NA	$930.7 \pm 113.1$	$1086.9 \pm 290.8$	$1002.5 \pm 210.1$
subjects	$650.7 \pm 360.0$	$15.6 \pm 0.3$	NA	$821.2 \pm 287.2$	$814.8 \pm 417.3$	$812.9 \pm 531.5$
record header	$220.3 \pm 81.0$	$3.7 \pm 0.02$	$930.1 \pm 175.6$	$231.4 \pm 103.5$	$289.3 \pm 44.9$	$175.2 \pm 59.6$
Query						
	$889.4 \pm 50.6$	$5.3 \pm 3.0$	$0.4 \pm 0.2$	$849.0 \pm 25.0$	$1100.1 \pm 171.4$	$1097.7 \pm 403.8$
Update						
in place	$13100.4 \pm 4966.7$	$19.1 \pm 0.4$	$2235.8 \pm 1061.7$	$10930.1 \pm 6448.6$	$14809.4 \pm 4383.2$	$660.3 \pm 359.9$
add	$14346.8 \pm 2973.6$	$19.0 \pm 0.6$	$2797.3 \pm 31.5$	$12907.9 \pm 6205.4$	$17096.7 \pm 4238.1$	$818.7 \pm 35.4$

tion in case A2. Note that, in this table, there are no Experiments or Subjects Insertion results for solution A2 given this solution is solely based on HDF5 files, where the creation of a new Record already includes all the metadata. Solution A1.2, employing CouchDB, is the least performing one, in particular for the Querying test. Indeed, there is not, at the moment, a straightforward method the make general queries (e.g. retrieve all documents with a specific field matching an input value) in CouchDB. Instead, it uses views (in a MapReduce philosophy (Dean and Ghemawat, 2004)), which list the documents that match a certain criterion, but these views must be defined a priori, therefore limiting the scope of what is queryable to the existing set of views. Additionally, the interactive creation of views is not feasible, because this process is expensive to compute, as a new index must be built, thus impacting the overall performance of the system. On the other hand, MongoDB's query engine, based on memory-mapped files and learning from the stored data, is highly efficient, and consequently provides superior performance, regardless of the existence of an index. Comparing the MongoDB solutions (A1.1, A3.1, A3.2 and A4), the

results are similar, taking into consideration the standard deviations, except for the Record Header Insertion and Update tests, where approach A4 is slower, as a result of having to insert or update the metadata both in the MongoDB database and in the HDF5 file. Regarding the observed errors for the Update tests, note that, for example in case A3.2, the mean operation time is lower than  $7 \times 10^{-5}$  seconds. This is a quite small value to measure and, therefore, any small imprecisions lead to big errors in the resulting metric, which, by Equation 1, depends on the inverse of the measured time. Overall, we believe that solution A4 provides the best combination of properties, unifying the efficient storage and retrieval of biosignal data provided by HDF5 files, with the fast and flexible Insert, Query and Update operations of MongoDB.

# 5 DISCUSSION AND CONCLUSIONS

In this work, the topic of storing and accessing biosignals was addressed in a metadata-aware, extensible, semantic and hierarchical way. In particular, a data model was defined and evaluated, database technologies and file formats were presented, and various implementations were evaluated using a series of benchmarking tests for biosignal storage and retrieval, data insertion, update and querying. The results show that, first of all, MongoDB is, generally, faster than CouchDB as a DBMS. This is due to the fact that MongoDB uses memory-mapped files, keeping the more frequently accessed information in Random Access Memory (RAM). Regarding the operations of inserting and retrieving biosignal data, the most efficient approach is using the HDF5 file format. Based on these results, our work proposes a hybrid solution (solution A4), which uses MongoDB as a frontend for data access (stores metadata), and HDF5 as the backbone for data persistency (stores synchronous time series data and asynchronous event-based data), as can be seen in Figure 6. In this way, metadata is put under the spotlight, as it is by querying the metadata that a user of the system has access to the desired signals, stored in an HDF5 file. Therefore, the proposed system combines fast querying, insertion and retrieval of biosignal data that is easily accessed from a variety of systems and platforms. Using HDF5 files also has the additional advantage of enabling the sharing of individual records by conventional (file-based) methods.

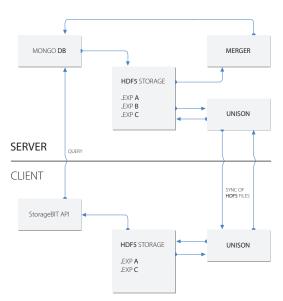


Figure 6: Schematic structure of the StorageBIT system.

Figure 6 details the overall architecture of the system, where a centralized machine hosts the MongoDB server and the HDF5 storage. On the client side, the user has access to the information by sending query requests to the server, and a local storage of the desired HDF5 files (organized by experiment) is main-

tained, improving speed of access. The HDF5 storage on the client is kept in sync with the server with Unison (Pierce and Vouillon, 2004), which automatically propagates changes from one replica to the other. The *StorageBIT* module is part of an integrated biosignal acquisition, storage, visualization, annotation and processing framework, the *Biosignal Igniter Toolkit (BIT)*, which is currently under development at out research group.

The proposed system thus extends the state-ofthe-art in the field, overcoming many of the common problems faced by biosignal researchers, such as handling the metadata, no size limits to header and metadata information, and seamless distributed access to the data repositories. Due to the underlying data persistency technology, our system is fully compatible with existing standards, as the Data Model can be shaped to mirror any commonly used field structure.

Further work includes the specification of the format for the Audit field, which is intended to function as a detailed history of the various processing steps applied to the stored signals.

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