New Visualization Model for Large Scale Biosignals Analysis

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Abstract: The development of new resources in the medical field, such as wearable sensors, allowed the improvement of biosignals monitoring. Acquired data is then an important source of information to clinicians and researchers. Thus, extracting useful information from data is a task of the greatest importance that involves a variety of concepts and methods, from which stands out data visualization. However, these methods present several limitations mainly when dealing with big data. In this paper we present an innovative web-based application for biosignals visualization and exploration in a fast and user friendly way overcoming the detected limitations. Three case studies are presented and a usability study supports the reliability of the implemented work.

1 INTRODUCTION

The technological innovation in medical systems has been of the utmost importance in the monitoring improvement of human body signals, so-called biosignals. There are several types of biosignals resulting of the electrical, magnetic, chemical or mechanical activity during biological events such as heart beat or muscle activity. They can also be classified considering their nature, application or their characteristics (Kaniusas, 2012). Biosignals monitoring can be done through the use of non-invasive wearable sensors which combined with systems allow the storage of the data acquired. Relevant information can then be extracted from this data to support clinicians and researchers decision-making, as well as to inform patients. Therefore, to achieve the goal of extracting relevant information from the data, a variety of concepts and methods, such as data visualization, are involved.

Since humans main input sense is visual, data visualization is considered essential in signal analysis (Aigner et al., 2011). The integration of the human visual perception with the current massive computational capacities results in this concept which supports the examining, understanding and transmitting of the vital information carried by a signal (Iliinsky and Steele, 2011). However, data visualization presents some limitations that have to be considered. Besides the computation capacity limited by the memory and time to run an algorithm, the display is restricted by the number of pixels available to show the data. On the human side, the limitations comprise the human perceptual and cognitive capacities which can result in incorrect data interpretations both in time and space (too fast or too dense for the correct perception) (Munzner, 2009).

The demand for studies that result in large amounts of data, such as sleep analysis or neuromuscular diseases monitoring, is increasing. In this case, difficulties become evident. Dealing with massive sources of data, which can be considered big data, increase the complexity of the problems described before and its processing with traditional applications presents several limitations (Hudson and Cohen, 2006).

Considering the extreme importance of biosignals analysis and the outlined hurdles, the aim of this work was to present an innovating solution for large dataset analysis, what involves visualization and annotation, in the context of biosignals. This was achieved through the better conjugation between processing and storage capabilities of computers and the visual, creative and knowledge capabilities of humans. In this study we present a novel web-based application for biosignals visualization and exploration in a fast and user friendly way.

 Cavaco C., Gomes R., Gamboa H. and Matias R.. New Visualization Model for Large Scale Biosignals Analysis. DOI: 10.5220/0005207201900197 In Proceedings of the International Conference on Bio-inspired Systems and Signal Processing (BIOSIGNALS-2015), pages 190-197 ISBN: 978-989-758-069-7 Copyright © 2015 SCITEPRESS (Science and Technology Publications, Lda.) The remainder of the paper is organised as follows. Section 2 reviews related work on visualization and annotation of large datasets of biosignals. In section 3, it is presented the application framework. Section 4 refers to the developed visualization model and Section 5 presents the case studies considered. Section 6 presents the usability study carried out. Finally, in section 7 the main conclusions are drawn and directions for further research are given.

2 RELATED WORK

The high concern in clinical systems for improving the physical and psychological wellness has resulted in the advent of crucial systems specifics for biosignals. The PhysioNet (Goldberger et al., 2000) offers free web access to a large biosignals databases that can include ground-truth information, and it also comprises a wide collection of software for viewing and analysing biosignals. The OpenSignals software enables the visualization and analysis of the biosignals acquired by a wearable hub that along with this software constitute the biosignalsplux system (PLUX, 2014), an advanced biosignal monitoring platform for sports and biomedical research. The ActiLife6 is the visualization software that integrates the ActiGraph system (ActiGraph, 2012), the most used actigraphy monitoring system in research and clinical trials involving physical activity and sleep assessment. In cardiology, one of the most common examinations is the Holter, an ambulatory Electrocardiography (ECG) for a minimum 24-hour period, conducted with the purpose of screening for ECG disturbances. The Welch Allyn Holter System (Welch Allyn, 2007) is one of the available systems to perform Holter examinations. Notwithstanding the high development of visualization tools, they face yet some issues, particularly when dealing with big data. The possible integration of applications in real life platforms to monitoring diseases increases the demand for novel solutions.

3 APPLICATION FRAMEWORK

3.1 System Requirements

The development of the visualization application took into account some base requirements. Therefore, the developed application had to:

• be applied to all type of biosignals

- enable the possibility to explore up to 10 days of continuous acquisitions
- show the time lapses where the signal acquisition was interrupted
- allow the handling of annotations
- present a fast and user friendly interface

Lastly, the proposed model had to represent a commitment between usability and performance, allowing the user to analyse a biosignal without having to deal with signal processing algorithms directly.

3.2 System Architecture

The implemented visualization tool is a web-based platform. This decision is justified by the fact that the web standards currently available provide some of the best tools for the creation of rich graphical user interfaces and it also eliminates complex installation and configuration procedures. A client-server model was developed. The local server was implemented in Python language (Beazley, 2009) and the communication between the visualization platform and the server is done with WebSockets. The flow of information is schematically represented in Figure 1.



Figure 1: Information Flow. The client sends request messages to the server which responds by serving a message containing the requested information. The generated responses are then interpreted by a series of JavaScript libraries and the results dynamically displayed on the page.

Considering the possible client's requests, it was implemented different Python Application Programming Interfaces (APIs). Through the use of Python language to access and manipulate the data and JavaScript language (Duckett, 2014) to present the data and deal with the user-interface tasks, a highest performance is reached.

3.3 Data Architecture

The manipulation of very large amounts of data must involve suitable data format for storage and access this data. Although presenting some limitations, the Hierarchical Data Format 5 (HDF5) has proven to be the best option for the intended task (Gomes et al., 2012). Before submitting a record file to the visualization tool it should be previously processed. The processing API involves filtering, subsampling, and events detection. As a result, different groups of data are created in the HDF5 file. The previous computation of some variables will speed up the visualization since the APIs previously referred only access the data instead of computing it.

4 VISUALIZATION MODEL

A generic model for visualization is proposed in (Van Wijk, 2005) and schematically represented in Figure 2.



Figure 2: Simple model of visualization. In this model the central process is the visualization where data is transformed into a time varying image according to a specification. Then, the resulting image is perceived by a user, leading to an increase of users knowledge. Finally, the interactive exploration of the image enables to adapt the previous specification based on the current knowledge in order to further explore the data. Adapted from (Van Wijk, 2005).

4.1 Visualization Process

4.1.1 Domain Problem Characterization

As already stated, the benefits of long-term monitoring (more than 24 hours of acquisition) have drawn considerable attention in healthcare. In (Jung et al., 2012) and (Goya-Esteban et al., 2009) are presented two examples of 7 days of continuous measurements of electrical biosignals such as ECG and electromyography (EMG).

However, dealing with the analysis of massive sources of information remains a challenge that has to be overcome. For example, displaying the 24 hours of an ECG signal recorded with a modern Holter recorder, which uses sampling rates of 1000Hz or higher (Hilbel et al., 2008), results in a falling attempt of drawing more than 80 million data points. Since a standard computer's screen has only some thousands of available pixels (Pakhira, 2010), displaying the previously mentioned signals not only exceeds the capabilities of the visualization device, but also results in a massive time and memory consuming rate. Even if the visualization is possible, the representation of such a large amount of data points will surpass the human perceptual capacity resulting in incorrect interpretations of the data both in time and space.

4.1.2 Abstraction Design

After a specific domain problem has been identified, it has to be abstracted into a more generic representation. Despite not always being performed, it is an essential process when dealing with massive data sets. The created abstraction took into account that biosignals only contain crucial information in specific time intervals - in cyclic or sporadic events. Therefore, considering only these events, it is possible to highlight the key information in the biosignal and to suppress the irrelevant details. Furthermore, this will support the variability analysis in a physiological network. (West, 2013) states its importance. As a result, considering only the portions of the signal which contain important information, instead of the whole signal, considerably reduces the number of data points to plot.

4.1.3 Visualization in Layers

The proposed model comprises a multi-level visualization architecture. This architecture enables the easy search and focus in the interest regions through a simple navigation in the biosignal. While the first layer displayed gives the user a global overview of the whole biosignal, the others provide a more detailed visualization of the selected interval of the above layer (by default the selected interval is the first one).

In the application there are seven standard information layers divided into a defined number of intervals. The choice of the standard information layers had in consideration the system requirements and the fact that each layer should be divided into an integer number of intervals with the size of the layer immediately below. The chosen layers, their number of intervals and type of data representation that each layer represents are described in Table 1.

The total number of information layers displayed in the platform depends on the total duration of the biosignal that is being analysed. The first layer to be displayed corresponds to the lowest layer that can represent the whole signal. All the layers below this one will also be displayed. Figure 7 ilustrates this case; the signal considered only has 20 hours of record, then the first layer to be displayed was the 1 day layer.

| Layer | Number of Intervals | Data Representation |
|------------|------------------------|------------------------|
| 10 days | 10 | Events |
| 1 day | 24 | Events |
| 1 hour | 4 | Events |
| 15 minutes | 3 | Events |
| 5 minutes | 5 | Subsampled |
| 1 minute | 60 | Subsampled |
| 1 second | 1 | Raw |

Table 1: Model Layers.

4.1.4 Visualization Techniques

Besides line and bar plots, two standard techniques in data visualization, horizon plots, were also considered. An horizon plot is a stacked graph that enables the performance comparison of a large number of time-dependent variables. It is built by adding color bands to a line graph and mirroring the negative values respecting the x-axis. Thereafter, using a technique called two-tone pseudo coloring the color bands are overlaid in the graph. This technique is then integrated with the small multiples technique which enables the display of a series of small graphs stacked one above the other (Heer et al., 2009). The main interface combines only the line and bar plots to show the data selected. While the bar plots are used for the 1 hour layers, the line plots are used for the remaining ones (Figure 7). The horizon plots are used in the analysis page, later discussed, enabling the comparison of a variety of features in a restricted space (Figure 4).

The visualization elements are rendered in Scalable Vector Graphics (SVG) which are more reliable and flexible than the HTML canvas elements (Murray, 2013). The Web Graphics Library (WebGL) elements were also considered. Despite providing a similar rendering functionality in a faster way due to its interaction with the graphics processing unit, the toolboxes currently available to perform this type of rendering are still too complex or not stable enough to provide a suitable visualization.

4.2 The Perception and Cognition Process

The graphical perception refers to the ability to decode the information encoded on graphs (Heer et al., 2009). Therefore, in order to enhance the graphical perception some variables, such as positions, shapes and colours, were carefully assessed. The platform also includes a fast and responsive design and thoughtful default colours.

4.3 The Interactive Exploration Process

The direct interaction with the data enables the user to focus on some details according to his objectives.

Basic interaction techniques are often used to improve the visualization exploration and for this reason they are familiar to the majority of the users. The choice of these techniques comprised the zoom and pan techniques, the use of tooltips and the presence of modal dialogs to alert or guide the user. It also enables the saving of the exploration carried out.

4.3.1 Annotations

The annotation of the biosignals is a demanding task that depends on human subjective intervention and requires specific knowledge. Therefore, the developed platform enables the annotations handling, thereby improving the biosignal interpretation through the notes made by the user in the relevant biosignal regions. Figure 3 illustrates the presence of annotations in the platform.

4.3.2 Further Analysis

The choice of key signal features can be a fundamental method to discover important information hidden on the signal. Therefore, in the developed application, it is possible to request for a more detailed analysis of some layers (Figure 4). The features selected to analyse a specific layer depend on the biosignal that is being analysed, however they are grouped in the same domains: temporal, statistical and spectral.

5 CASE STUDIES

5.1 Data Acquisition and Processing

The acquisition system consisted in a set of biomedical sensors, a wireless acquisition unit and a smartphone. A surface EMG sensor at the gastrocnemius muscles of the right leg, a triaxial accelerometry (ACC) sensor at the right hip, and a 3 lead ECG sensor at the left side of the chest were used along with the bioPLUX research system. The biosignals were acquired with a sampling frequency of 1000 Hz and with a 12 bit resolution and the data was sent via Bluetooth to the smartphone, saved in a text file and then converted to an HDF5 file. Three acquisitions were carried out in a home atmosphere performing daily living activities. In order to provide large files to use in the developed tool, the last signals were replicated or combined. The ECG and the ACC signals were



Figure 3: Navigation and Annotations. The selection of the sixth interval in the 1 day layer, i.e. the sixth hour of that day, will switch the data in the 1 hour layer in order to correspond to the data of the sixth hour. Annotations are visually represented in the platform by a timestamp placed at the beginning of the annotation time frame in a division below the x axis. When the timestamp is clicked, it shows its message and a rectangular grey region highlighting the time frame of the annotation arises in the graph. Therefore, the 1 day layer presents three annotations (one highlighted), however only the second one belongs to the interval displayed at the 1 hour layer.

replicated until achieve a duration of 10 days, in the ECG case, and 2 days 9 hours 32 minutes and 55 seconds, in the ACC case. The EMG signal consisted in the combination of the two EMG acquisitions with intervals where the acquisition was interrupted, what resulted in 6, 4 and 6 hours of acquisition intercalated with 3 hours and 30 minutes without acquisition.

5.2 Electrocardiography

The ECG signal is a cyclic signal that consists in the recording of the electrical activity of the heart. Therefore, it provides a fundamental way of cardiac monitoring allowing the detection of cardiac abnormalities (Kaniusas, 2012).

The abstraction for the ECG signal was performed through the consideration of the R peak in the QRS complex, one of the most important to analyse in an ECG waveform (Neophytou et al., 2012). Although the main event to consider is the positions where these peaks occur, it was also computed another event, the number of peaks that occur per minute (the heart rate).

5.2.1 Features Selection

The selection of features to provide a further analysis of the ECG signal was done considering a derivation of the main event above considered. The Heart Rate Variability (HRV) represents the variation of the intervals between heartbeats (RR intervals) and its standard features provide a vital source of signal information.

5.2.2 Results

Figures 5 and 6 represent the result of one possible analysis of the ECG signal considered. Through the zoom, pan, the creation of annotations and the use of tooltips was possible to find a probably artefact caused by the chest muscles contraction. The double clicking in the graphs allow to switch the data in the layers below until the desired event be displayed.



Figure 4: Further Analysis Result of the 15 minutes layer of an EMG signal.



Figure 5: ECG signal analysis result.

5.3 Electromyography

An EMG signal is an electrical signal generated during a muscle contraction. Therefore, it enables the quantification of the neuromuscular function and for this reason these signals are mostly used to measure the degree of muscle activation and to access the neu-



Figure 6: Continuation of the previous Figure.

rophysiologic mechanisms of fatigue (Arjunan et al., 2011).

The event with most importance in the EMG analysis is therefore the signal activation (onset and offset times). However, the EMG signal is also usually analysed by the root mean square value (Soares et al., 2013).

5.3.1 Features Selection

The further analysis of the EMG signal is performed by the zero crossing rate, the short and long diameters of a Poincaré plot, the standard deviation and the median frequency features.

5.3.2 Results

Figure 7 presents the first layer of the EMG signal considered. The analysis of this layer enables to get the general intervals where there was or not acquisition and the inactivity hours where the muscle in study did not perform any contraction.



5.4 Accelerometry

The ACC signal provides the measurement of the applied acceleration acting along a reference axis. Therefore, its analysis provides crucial information that can be used in functional status and monitor falling studies (Lan et al., 2012), sleep analysis (Acti-Graph, 2012) and in neuromuscular diseases diagnosis (Machado et al., 2014).

The abstraction for the ACC signals was settled considering that the signal represent different activities performed by the subject. These activities can be classified as static states and dynamic states (Acti-Graph, 2012). These two states are usually distinguish by the Signal Magnitude Area (SMA) feature. When the SMA value exceeded a preset threshold thus the subject is classified as being in a dynamic state (Lan et al., 2012; Carus et al., 2013).

5.4.1 Features Selection

The selected features to perform the further analysis of the ACC signal were the autocorrelation, the root mean square, the mean, the standard deviation and the median and fundamental frequencies (Machado et al., 2014). These features were computed with the total acceleration signal.

5.4.2 Results

The result of the ACC signal analysis is similar to the EMG signal, however instead of activations, here we present the idea of static or dynamic states.

6 USABILITY EVALUATION

In order to assess the usability of the developed work, a study with the System Usability Scale (SUS) (Brooke, 2013) was carried out.

To the date the usability study performed included 10 participants with ages between 23 and 28 years who had no experience with the application. All the participants belonged to the final target of users of the developed tool - health science professionals. The participants were instructed to use freely the system, opening a file and exploring it with the available interaction tools. The average score of the performed tests was 80/100 what indicates a good system with a high perceived usability. In the end of the test the majority of the participants agreed that some basic concepts were needed in order to perform a suitable analysis, however, these concepts should already be known by the final user. They also agreed that a necessary guidance should be provided at the first use of the system, still, it would not be necessary after this first use. Nevertheless, the participants stated that the system is intuitive, useful and suitable, they also indicated that they were likely to recommend it.

7 CONCLUSIONS AND FUTURE WORK

This work introduces a novel visualization interface which allows the professionals, who work with biosignals, to get insight into the large data sets acquired by the enhanced monitoring systems that have been introduced in the last years. The visualization model followed includes a web-server, a multi-level layer layout, an abstraction approach and the implementation of different visualization techniques. Different explorative interaction techniques were also developed in which stands out the handling of annotations. Three case studies were presented and several performance tests were done. Finally, an usability evaluation was carried out in which an average score of 80 was achieved, which indicates a good usability performance.

Despite the developed application has proven to be a suitable approach, further research can be performed.

We propose the use of more case studies. Despite of the considered signals represent the two possible types of biosignals events, cyclic and sporadic, the consideration of another set of biosignals such as electroencephalogram or respiration signals will further validate the developed work enabling its use in more research studies. The search for WebGL rendering tools should be carrying on and when possible these elements should replace the implemented SVG elements. Despite the SUS provides a confident measure of the perceived usability with a small group of participants, it was carried out only with biomedical engineers. Hence, this study should also be performed by doctors. The integration of the processing in the acquisition system would provide a real time processing which would reduce the time spent in processing.

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