RehabVisual: Implementation of a Low Cost Eye Tracker without Pre-calibration

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Abstract: Visual impairments affect the life of millions of people. Some of these impairments can be corrected or diminished. Visual stimulation is one way of visual rehabilitation, that has produced better results when used in the early years of life. As there is nothing standardized in this field, a platform named RehabVisual was developed (Machado et al., 2018; Santos, 2018). This platform has the objective of creating an individual visuomotor rehabilitation for children under two years old, that were born prematurely. In order to reach a therapists' need, a video analysis tool was developed. This tool should be capable of following the motion of the patients' eyes, with the purpose of facilitating and making the analysis of their reactions to the stimuli more objective. The solution developed on this paper consists on the creation of an eye tracker system, that does not need to be pre-calibrated and is low-cost. The eye tracker was tested in healthy individuals and the results show that is very effective in detecting horizontal eye variations.

1 INTRODUCTION

According to the World Health Organization (WHO), the number of people who are affected by vision impairment or blindness is at least 2,2 billion. At least 1 billion of these impairments could have been prevented or have not yet been addressed (World Health Organization, 2019).

These vision impairments can be corrected or diminished, for example, with the use of glasses, through surgery or with visual rehabilitation (World Health Organization, 2019).

The first years of a human being's life are the most important to stimulate the brain, as it is at this age that the brain is most receptive to visual stimulation. In case of visual skills deficits, it is important that a controlled and specific visual therapy is applied to the child in order to stimulate the brain. (Bishop, 1998)

The visual skills are extremely important for the normal development of a child. If any kind of visual impairment is present, this deficit may lead to motor, social and cognitive problems. The motor problems translate into difficulties in reaching an object or a person. The social problems are related to communication difficulties that appear because of the inability to recognize faces, facial expressions or gestures. The cognitive problems arise due to difficulties to associate objects and actions (Agni et al., 2007).

The methods used to treat visual impairments, by using visual stimuli, are generic and not customized, hence the development of a computer platform with the name of RehabVisual (Machado et al., 2018; Santos, 2018).

This platform fills the need in the field of evaluation and rehabilitation of the visuomotor skills of premature babies. This web-based platform contains a data base, which can store clinical information about the patients, and a wide variety of visual stimuli (Machado et al., 2018; Santos, 2018).

Since the evaluation of the therapy sessions was subjective, and the therapist had to keep paying attention to the child and the stimulus at the same time, the idea of creating an eye tracker capable of being used during the sessions appeared. This eye tracker had to be one that did not need any previous calibration because of the age of the individuals undergoing therapy.

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2 RehabVisual PLATFORM

The RehabVisual was developed in a partnership between students and teachers of biomedical engineering of the Faculdade de Ciências e Tecnologia da Universidade Nova de Lisboa and the occupational therapists and doctors from the Physical Rehabilitation department of the Hospital Dona Estefânia - Centro Hospitalar Lisboa Central. This study was approved by the Portuguese Ethics Committees of this Hospital. (Machado et al., 2018; Santos, 2018)

Its main goal was to create a personalized and adaptable visual therapy for children who suffered from a deficit on their visuomotor capabilities.

This platform was created using programming languages such as HyperText Markup Language (HTML), Hypertext Preprocessor (PHP), JavaScript (JS) and Cascading Style Sheets (CSS).

The platform has an integrated database that contains information about the patients. This information consists on personal data, results of the evaluations and results of the therapy sessions.

2.1 Structure of the Platform

The RehabVisual has four types of users: administrator, doctor/technician, occupational therapist and family/caregiver. Each one has different restrictions on what they can do inside the platform, which can be seen on the list below.

- Administrator:
 - Add, view, edit and remove all the other types of users;
 - Add, view and edit patients' medical records;
 - Add, view and edit eye evaluations;
 - Add, view and edit functional and behavioural evaluations;
 - Add, view and edit visual stimulation evaluations and choose the stimuli.
- Doctor/Technician:
 - Add, view, edit and remove caregivers;
 - Add, view and edit patients' medical records;
 - Add, view and edit eye evaluations;
 - View functional and behavioural evaluations;
 - View visual stimulation evaluations and examples of stimuli.
- Occupational therapist:
 - Add, view, edit and remove caregivers;
 - Add, view and edit patients' medical records;
 - View eye evaluations;

- Add, view and edit functional and behavioural evaluations;
- Add, view and edit visual stimulation evaluations and choose the stimuli.
- Caregivers:
 - View the examples of stimuli provided by the occupational therapist.

2.2 Visual Stimuli

The visual stimuli available on RehabVisual are videos made on Microsoft PowerPoint. The user has the possibility to choose the shape, colour, complexity, type of movement and velocity of the stimulus.

On the shape category, the user can choose squares, triangles, circles and mixed. This shapes can be black and white, red, yellow, green or blue.

Regarding the complexity of the stimuli, there are four options available: simple, medium, high and very high complexity. An increase in the complexity level translates into more shapes inside the main shape.

The type of movement of the stimulus can be divided into four groups: horizontal, vertical, diagonal and circular, as shown in figure 1. Every type of movement has the capability of being slow, moderate and fast.

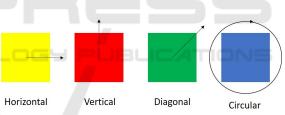


Figure 1: Types of movement - horizontal, vertical, diagonal and circular.

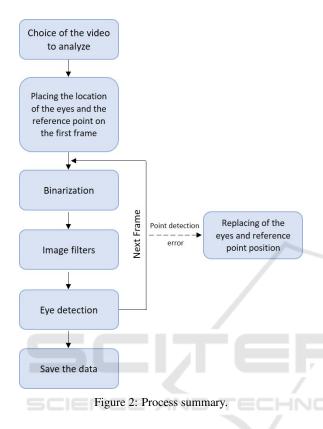
3 EYE TRACKER

An eye tracker was developed using the Matlab R2017a software. Its main objective, as the name suggests, is to keep track of the position of the eyes of the subject under study, without any pre-calibration. The target population for whom this software was developed were children with less than two years old (Jones Petas Santos Dias, 2019).

The eye tracker was developed with the purpose of being integrated in therapy sessions, while the children are looking at the stimuli available on the RehabVisual platform. With this new tool, the therapists would have a more objective way to understand whether or not the child was following the stimuli.

3.1 Implementation of the Eye Tracker

The software developed can be separated into the sections shown in figure 2.



The whole process, which occurs offline, begins with the choice of the video, previously recorded, to analyze. Immediately after choosing the video, the first frame is shown to the user and he is asked to click, using the cursor of the computer, on the eyes and to choose a reference point. This section is made using the *getpts()* function, which assigns coordinates to the selected points. Usually, the reference point chosen was the nose because it is equidistant to both eyes and easy to track.



Figure 3: First frame with the left eye being selected.

After choosing the points, the analysis starts. Figure 4 represents a zoomed image of what is shown to the user while the video is being analyzed.



Figure 4: Zoomed image of the video being analyzed.

The yellow box around the face represents the face detector. This box is made by the function *vision.CascadeObjectDetector()*, available in the Computer Vision Toolbox of Matlab.

The yellow point on the nose, represents the reference point. This point is tracked using the function *vision.PointTracker()*, which is also available in the Computer Vision Toolbox. This function uses the Kanade-Lucas-Tomasi algorithm to track a moving point taking into account its features.

The white points represent the position of the center of the eyes detected by the algorithm, which will be discussed later.

The green boxes around the eyes, have fixed dimensions and are always centered on the position of the eyes. Their color is green when the eye is being detected and red when it is not detected. The boxes crop the image of the video using the *imcrop()* function. The movement of these boxes is explained in figure 5. The box is generated according to its top left point. For example, if the eye has the coordinates (x, y), the box will have as its top left point coordinates $(x - \frac{dimx}{2}, y - \frac{dimy}{2})$, with dim x and dim y being the fixed dimensions. If on the next frame, the eye coordinates are (a, b), the new coordinates of the top left corner of the box will be $(x - \frac{dimx}{2} + a - \frac{dimy}{2}, y - \frac{dimy}{2} + b - \frac{dimy}{2})$. This way, the eye will always be centered inside the box, making it easier to detect it, even if the head slightly moves.

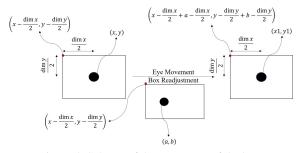


Figure 5: Scheme of the movement of the box.

The cropped image of the eye in the original video is binarized by the function im2bw(). This function has as input arguments, the image and the level of luminance threshold. This threshold accepts values between 0 and 1. The values of luminance under the threshold are converted to black and the values above are turned into white. The binarization is used because it makes it easier to detect the eye when compared to the RGB image. The result of this function is shown in figure 6.



Figure 6: Binarization of the image using the function *im2bw()*.

Three different types of image filters were used: *imerode()*, *imdilate()* and *medfilt2()*. The first two are used to erode and dilate, respectively, the binary image, according to a structural element named strel. The strel used in this algorithm was of the disk type with a radius of 1. The erosion and dilation filtering is made on the white part of the image, which means that it will have the opposite effect on its dark part. These filters are used with the objective of removing the noise around the eyes, such as shadows and eyelids. The cycle used in this algorithm, consists of iterations of erosions, followed by iterations of dilations, finishing with another iteration of erosions, as shown in figure 7.

The last one, the median filter, is used to remove the "salt and pepper noise", that is, small dots that have not been removed by the previous filters.

The eye detection is made by the function *imfind-circles()*. This function is programmed to detect circles according to a radius range and sensitivity factor. Higher sensitivity level, means a higher number of circles detected, because it expands the search to weak and partially obstructed circles. The radius range used was between 6 and 12 and the sensitiv-

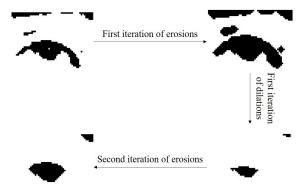


Figure 7: Scheme of the erosion and dilation filters.

ity level used was 0,90. An input argument of this function called Object Polarity was also used with the value dark, in order to detect black circles.

In order to guarantee that the circle detected in the next frame is the eye, from all the circles detected in the next frame, the circle chosen will be the one that has the most similar coordinates to the one detected previously.

To draw the circles, the function *viscircles()* was used. It has as input arguments, the image and the center and radius of the circle.

The detection of the eye is shown in figure 8.

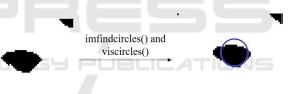


Figure 8: Detection of the filtered image of the eye.

The data collected from each detected eye, each box and the reference point is saved into matrices. Each one has an horizontal position matrix and a vertical position matrix. The final matrix for each position is the sum of the matrix of the top left point of the box with the correspondent eye and direction. Then, this sum matrix is subtracted by the correspondent position matrix of the reference point.

In some situations, the analysis of the video stops and the user has to manually click on the position of the eyes and/or the reference point. This way, if the eyes are not being detected, the user can manually introduce the points. These situations are:

- Excessive rotation of the facial detector: When a large rotation of the head occurs, one of the eyes may not be detected. This way, the user can skip between frames until the face is at a position where both eyes can be detected.
- Program continues not running because the new

points have not been placed yet: When the program stops because one of the conditions to stop it is still activated, it only starts running again when all the points are replaced. This way, the user can skip between frames until reaching one that is interesting to track.

- Change of size of the facial detector box: Since this detector is used to correct some flaws regarding the detection of the eyes, it is necessary that its size does not change much. If the size exceeds a certain limit, the user will replace the points and a new facial detector is generated.
- Box of one of the eyes moves outside the facial detector box: Another way to correct the non detection of the eyes is to verify if the boxes created around the eyes are inside the facial detector box. If one of them goes out of the facial detector box, the user reintroduces the points.
- Loss of validity of the reference point: Since the video is recorded using the webcam of the laptop, its quality is not always the best. Also, the lighting conditions might not be the best as well. This way, it might not always be possible for the tracker to keep track of the reference point. If this condition is true, the user has to reintroduce the reference point again.
- Total loss of the facial detector: Related to the problems described above, the facial detector might have difficulty to trace every feature needed to work properly. The detector stops working when there are no longer enough feature points. When this happens the user reintroduces the eyes' position and reference point and a new face detector is created.

4 RESULTS

The results are displayed through graphics. The graphics have represented on the x-axis the variable count, which corresponds to the number of frames, and on the y-axis the difference between the position of the eye and the position of the reference point. The reference point used was always the center of the nose because it has the same distance between both eyes.

The videos recorded for this paper, were recorded using the webcam of the laptop, which was located at the bottom center of the screen. The videos had 30,03 frames per second and a quality of 720p. The distance between the screen and the subject being recorded was, approximately, 60 cm.

The eye tracker algorithm developed was tested on healthy adults and healthy children under two years

old.

When the right eye is referred, this eye matches the right eye of the individual. The same happens to the left eye.

When a movement to the right is referred, this movement means that the subject moved to their right side.

- Horizontal Movement
 - Left eye:
 - * Movement to the left: The left eye moves away from the nose, so the difference will be higher;
 - * Movement to the right: The left eye gets closer to the nose, so the difference will be lower;
 - Right eye:
 - * Movement to the left: The right eye gets closer to the nose, so the difference will be lower;
 - * Movement to the right: The right eye moves away from the nose, so the difference will be higher;
- Vertical Movement
 - Both eyes: Both eyes have the same kind of response on the graphic when the individual looks up or down.
 - * Looking up: When the subject looks up, the center of the eye moves away from the reference point, so the difference between them will be higher.
 - * Looking down: When the subject looks down, the center of the eye gets closer to the reference point, so the difference between them will be lower.

In this paper, an example of a healthy individual is shown and its video acquisition was made under a controlled environment and protocol.

In this example, the subject is a brown-eyed male, without known evidences of visual impairment. The distance between the laptop and the male is about 60 cm. The eye movements in the video were premeditated. The binarization threshold was 0,12 for both eyes and two erosions were made followed by five dilations and, finally, three erosions.

The video has a duration of, approximately, 9,4 seconds and the head stands still until the 8,7 seconds mark.

Figure 9 represents a frame taken from a video where the subject is looking to the center. Figure 10 represents the variation of the horizontal position, over time, of the subject's left eye. The dot placed on the graphic corresponds to the frame shown in figure 9.



Figure 9: Picture of a subject looking at the center.

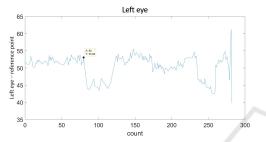


Figure 10: Graphic of the variation of the horizontal position of the subject's left eye.

Figure 11 represents a frame taken from a video where the subject is looking to his right. Figure 12 shows the variation of the horizontal position, over time, of the subject's left eye. The dot placed on the graphic corresponds to the frame shown in figure 11.



Figure 11: Picture of a subject looking to his right.

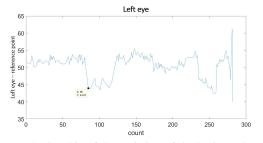


Figure 12: Graphic of the variation of the horizontal position of the subject's left eye.

Comparing the two graphics, it can be concluded that an approximation of the left eye to the reference point, leads to a decrease in their horizontal distance, which translates in a decrease of the variable represented on the y axis of the graphic.

The graphic of the horizontal variation of the right eye is shown in figure 13. The dot placed on the graphic occurs during the same eye movement of figure 11, where the subject is looking to his right. Since the right eye moves away from the reference point, the difference of the horizontal position between them increases. This translates into a decrease in the graphic, as its y-axis is negative.

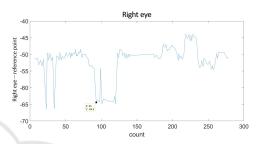


Figure 13: Graphic of the variation of the horizontal position of the subject's right eye.

Figure 11 also represents a frame taken from a video where the subject is looking slightly up. Figure 14 represents the graphic of the variation of the vertical position, over time, of the subject's left eye. The dot placed on the graphic corresponds to the frame shown in figure 11.

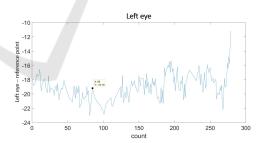


Figure 14: Graphic of the variation of the vertical position of the subject's left eye.

Since the subject is looking up, the left eye moves away, vertically, from the reference point. This means that the two points are farther apart, which should result in a decrease in the graphic, as the y-axis is negative. However, the opposite occurs in this frame, as the point shown is higher than the last one. This is due to the fact that the human eye has an horizontal elliptical shape, meaning that the range of movements possible in the horizontal direction is higher than the vertical direction. This means that the vertical position will have larger margin for errors. Figure 15 represents a frame taken from a video where the subject is looking down. Figure 16 shows the graphic of the variation of the vertical position, over time, of the subject's left eye. The dot placed on the graphic corresponds to the frame shown in figure 15.



Figure 15: Picture of a subject looking down.

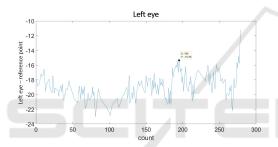


Figure 16: Graphic of the variation of the vertical position of the subject's left eye.

In this situation, the left eye gets closer to the reference point. This means that the vertical difference between them decreases, which will correspond to a rise in the graphic, because its y-axis is negative.

5 CONCLUSIONS AND FUTURE WORK

The main purpose of this article was to develop an eye tracker capable of showing the gaze direction of children under two years old, that did not require precalibration.

The results show that the eye tracker works in detection of the variation of the horizontal position. However, the variation of the vertical position is harder to detect because of the horizontal elliptical shape of the human eye.

As our eye tracker is still in its early stages, further testing is needed to gather information to compare it with other systems. Regarding future work, an algorithm should be developed in order to automatically choose the binarization threshold and the number of iterations of the erosion and dilation filters. Another algorithm that should be developed is one that is able to automatically detect the eye movements displayed in the graphics.

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