

ECG pre-processing and feature extraction tool for intelligent simulation systems

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1. Introduction (I)

- Increase of Cardiac Problems and Sudden Deaths in Athletes
 - International organizations demand periodic mass screening

- What is it needed?
 - Professional 12-lead ECG devices
 - An expert in the field
 - Time to analyze the results

Test performed only 1-2 times a year in professional FIFA teams

1. Introduction (II)

- How can technology help?
 - Simulation tools that help Cardiac Doctors to train their skills
 - Pre-processing and feature extraction tools to help in the process
- There are tools already?
 - Yes, but... ONLY FOR COMMON POPULATION!!
- Is there any problem with that? → Athletes vs Common people
 - More muscle mass
 - Bigger and stronger heart ventricles
 - More time between ECG peaks

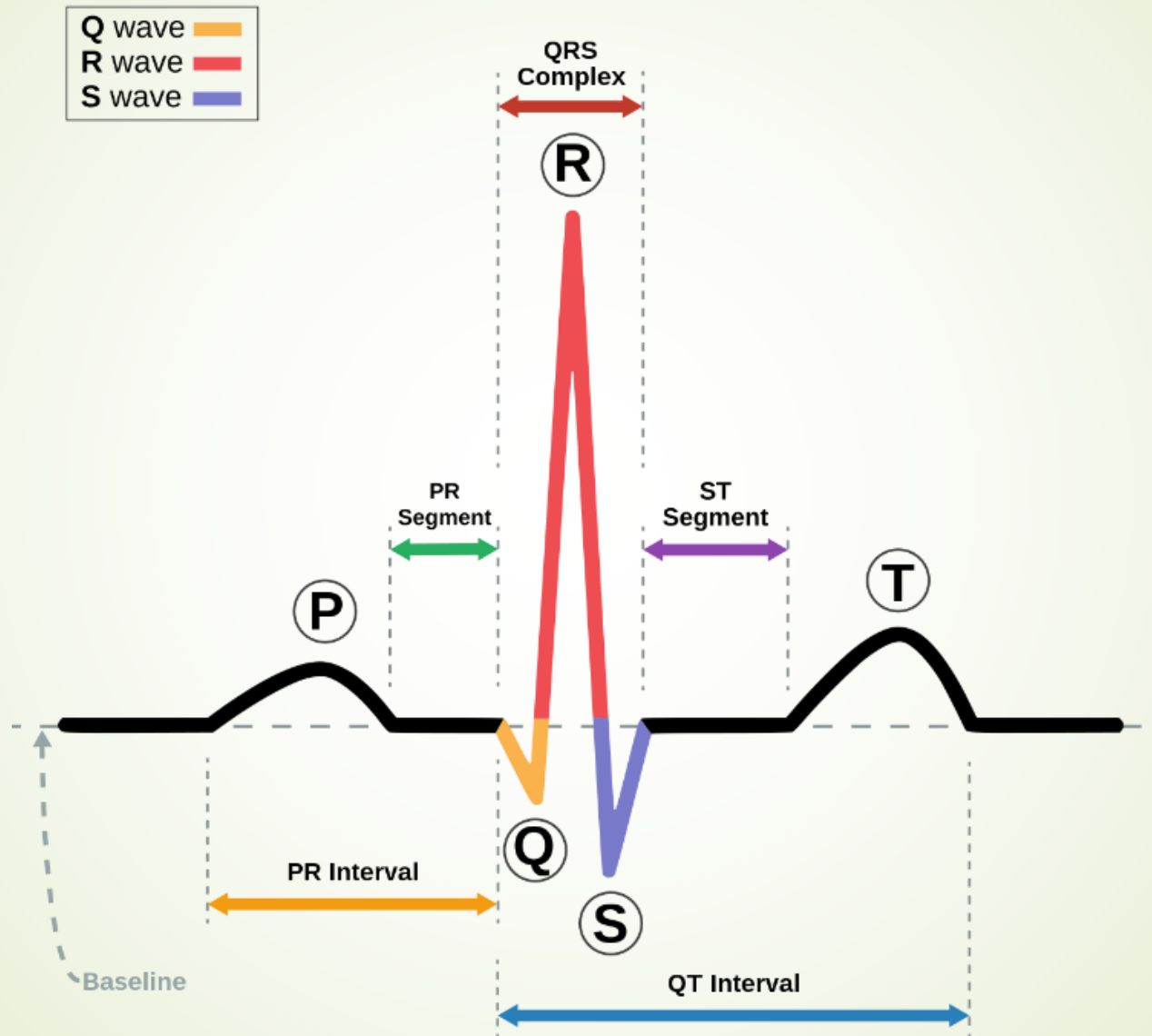
These tools cannot be used to detect anomalies in Athletes!!

1. Introduction (and III)

- What can we do?
 - Developing a customizable software tool

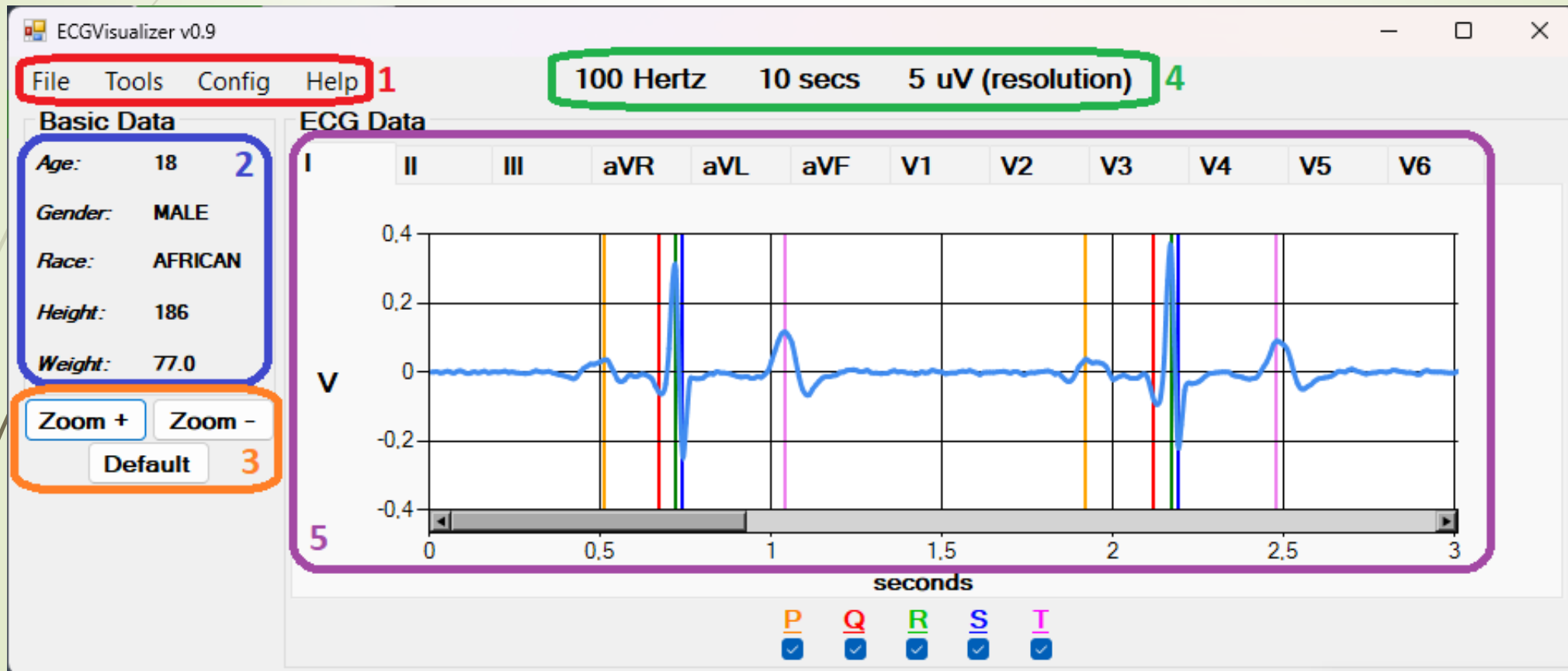
- This tool may...
 - ... detect anomalies in common population and athletes.
 - ... detect peaks automatically.
 - ... extract a custom report from the ECG signal.
 - ... and, thanks to all of them, help for Cardiac Doctors training.

2. ECG signal



3. Software Tool (I)

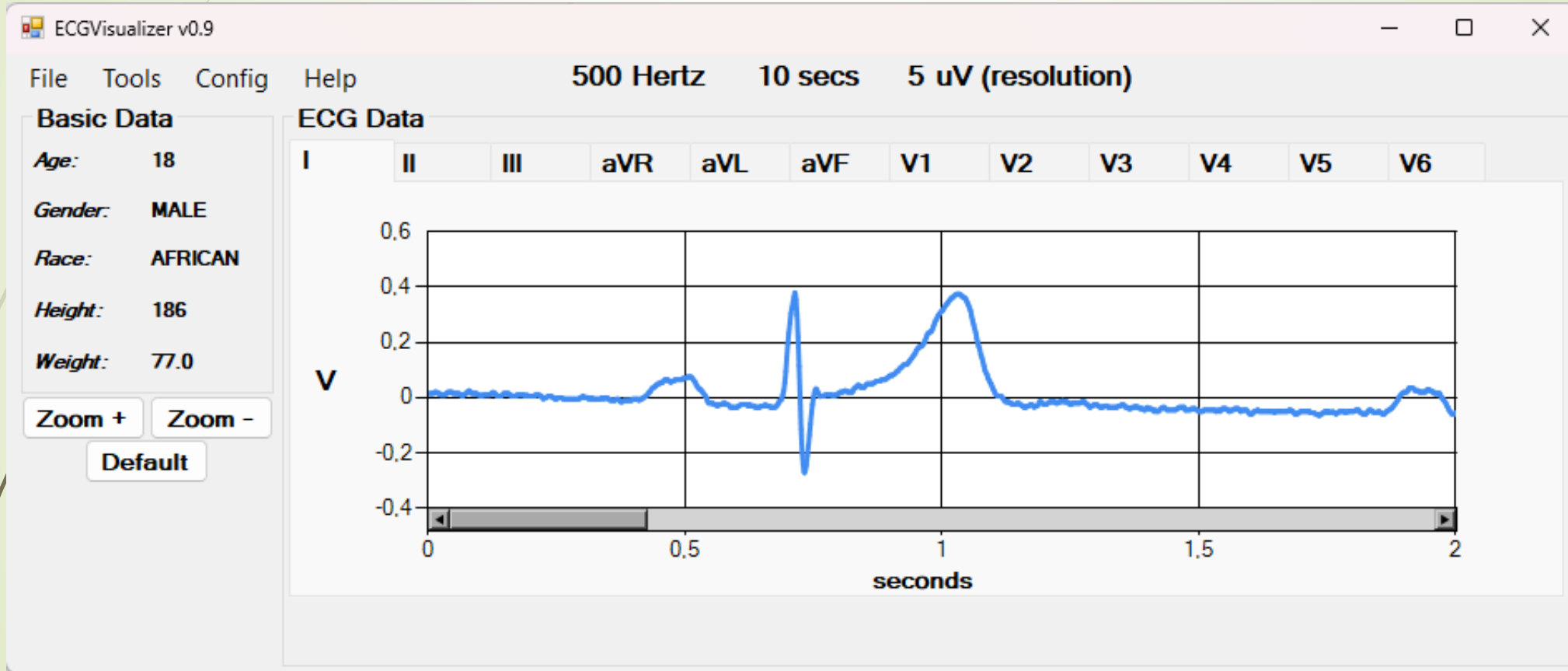
- So far... XML files from *General Electric CardioSoft 12SL ECG*
 - Soon... *Contec 1200G device*



3. Software Tool (II)

► Characteristics:

[1] Loading and navigating



3. Software Tool (III)

[2] Configuration

Peak detection configuration

Searching margins

Voltage difference between R's: 40%

Start/End segments window: 10%

Max/Min window for P and T: 10%

Thresholds

	MIN	MAX	
<input checked="" type="radio"/> Athlete	PQ:	<input type="text"/>	ms
<input type="radio"/> Average	QRS:	<input type="text"/>	ms
<input type="radio"/> Custom thresholds	QT:	<input type="text"/>	ms

Reset defaults Undo changes Apply Changes

Report generation configuration

Basic information

Age Race Height
 Gender Weight

Segments included

PQ QR RS ST
 PR RR QT QT_c
 QRS

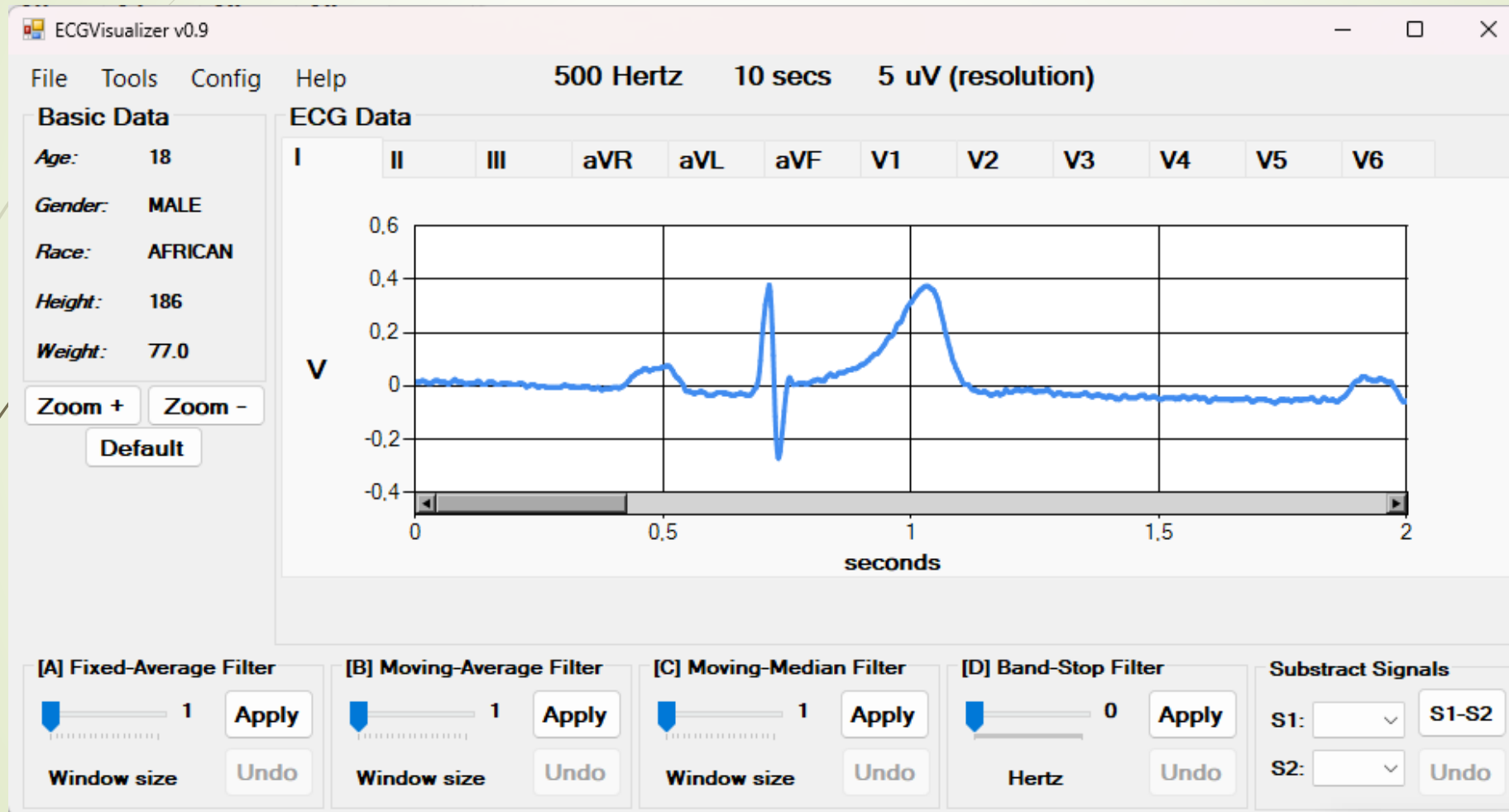
T inversions included

inv. I inv. II inv. III
 inv. aVR inv. aVL inv. aVF
 inv. V1 inv. V2 inv. V3
 inv. V4 inv. V5 inv. V6

Reset defaults Undo changes Apply changes

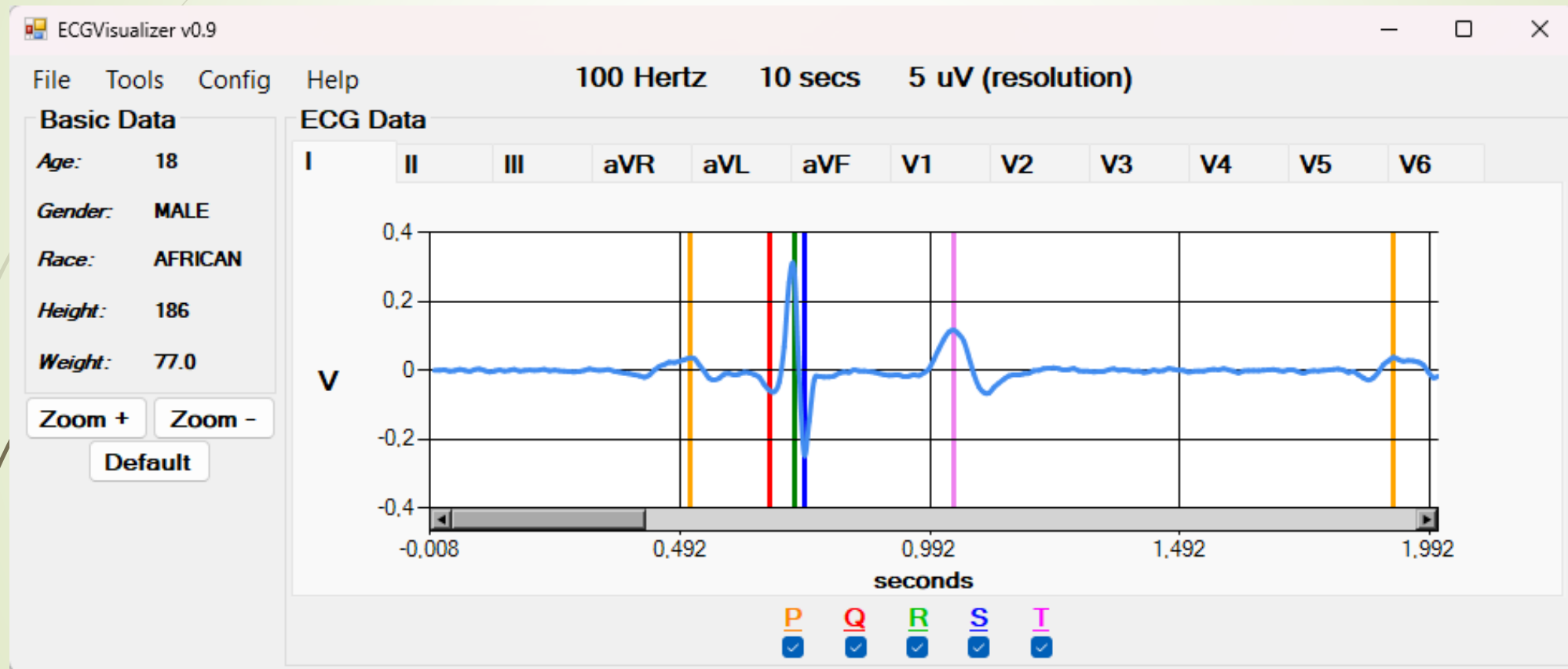
3. Software Tool (IV)

[3] Custom Filtering



3. Software Tool (V)

[4] Peaks detection



3. Software Tool (VI)

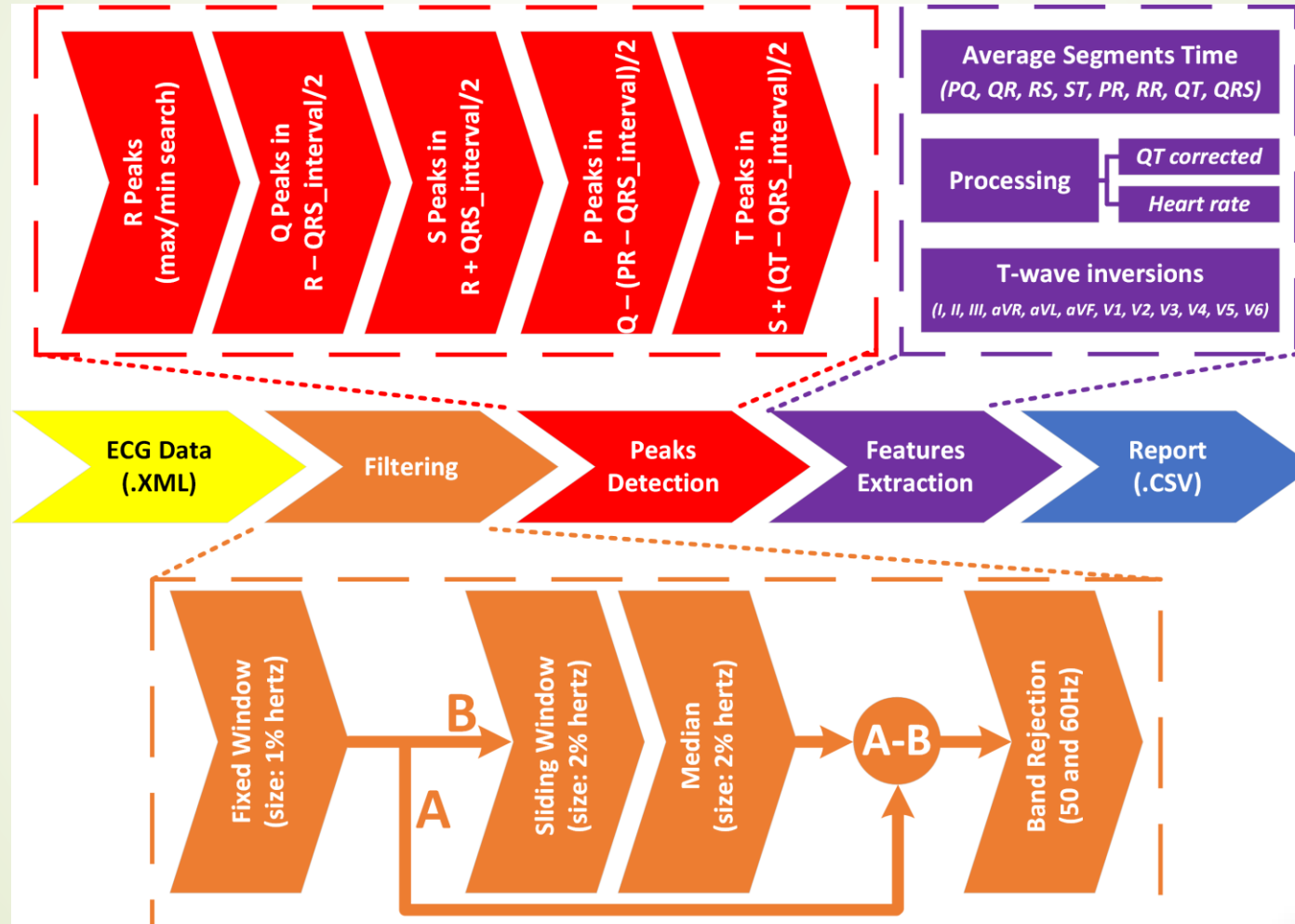
[5] Report Generation



	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T	U
1	ID	Age	Race	Height	Weight	RR interval	QRS interval	QT interval	QT_c interval	T inv I	T inv II	T inv III	T inv aVR	T inv aVL	T inv aVF	T inv V1	T inv V2	T inv V3	T inv V4	T inv V5	T inv V6
2	example1	18	AFRICAN	186	77	1234,28571	82,8571429	360	300,782903	0	0	0	0	1	0	0	0	0	0	0	0

3. Software Tool (and VII)

[6*] Automatic alternative



4. Testing (I)

➤ Dataset collected previously:

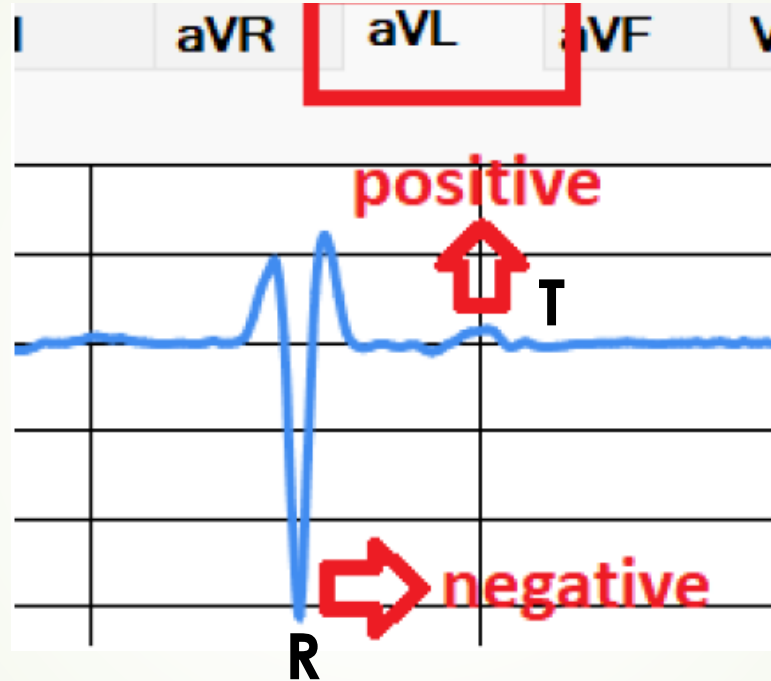
- PF12RED (<https://github.com/dradolfomunoz/PF12RED>)
 - Collected from professional UEFA football players from LaLiga EA SPORTS
 - ClinicalTrials No. NCT05872945.
- Contains:
 - 163 raw ECG data in XML format from 54 football players (and the waveforms scanned).
 - Labels: common features and some clinical appearances like *sinus bradycardia* or *incomplete right bundle branch block*.

➤ Tests → Peaks detection and feature extraction

- Evaluated one by one by a Cardiac Doctor.
- Comparison between automatic processing report and doctor diagnosis

4. Testing (II)

► Comparison example



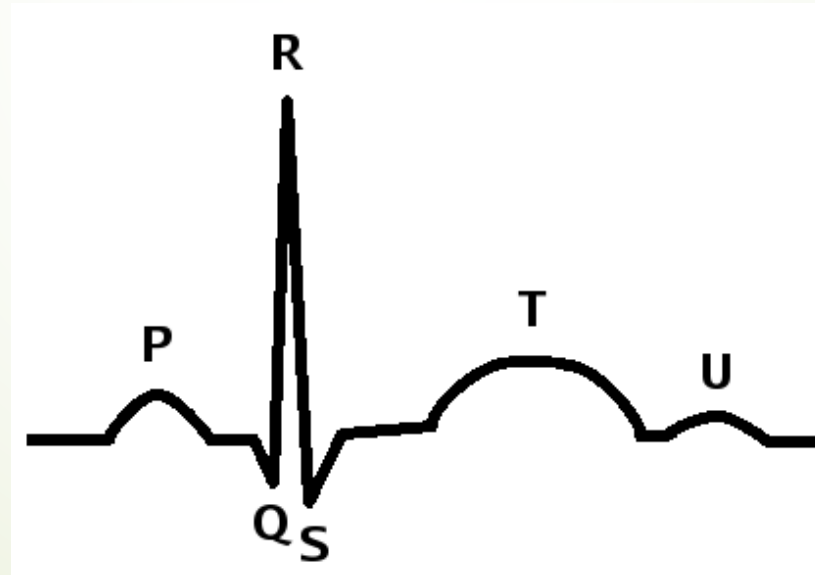
ID	Age	Race	Height	Weight	RR interval	QRS interval	QT interval	QT_c interval	T inv I	T inv II	T inv III	T inv aVR	T inv aVL	T inv aVF	T inv V1	T inv V2	T inv V3	T inv V4	T inv V5	T inv V6
example1	18	AFRICAN	186	77	1234,285714	82,85714286	360	300,7829033	0	0	0	0	1	0	0	0	0	0	0	0

4. Testing (and III)

► Results summary:

- Accuracy over 98% taking into account the most common markers: *segments, intervals* and *T-wave inversions*
- Discrepancies obtained → confusion between **peak T** and **peak U**.

► ¿Peak U? → Unusual wave, produced by a bounce of the signal T.



5. Comparison

Software Tool	Input	Leads	Filtering		Peaks		Features		Free
			Auto	Manual	Auto	Manual	Auto	Manual	
Edelmann et al. (2019) [6]	.mat	1	Yes	No	Yes	No	Yes	No	Yes
Encord ECG (2023) [2]	DICOM	12	No	No	Yes	No	No	No	No
OHIF ECG Viewer (2023) [3]	DICOM	12	No	No	Yes	No	No	No	Yes
Waveform ECG (2008) [4]	.xml	12	No	No	Yes	No	No	No	Yes
ECG-Viewer (2022) [1]	.dat, .txt, .csv	12	Yes	Yes	Yes	No	No	No	Yes
ECGVisualizer (2023) [this work]	.xml	12	Yes	Yes	Yes	Yes	Yes	Yes	Yes

6. Conclusions

- Medical professionals need simulation tools to help them in their learning process.
 - This applies to all areas, including the detection of cardiac problems.
- When working with ECG data, it is necessary to pay attention to the PQRST peaks of each of the twelve leads.
 - The intervals between peaks and the features vary in professional athletes.
- This work presents a free software tool that, thanks to its filtering and peak detection capability, serves as a simulation tool to evaluate the expertise of the future cardiac doctors.
 - Includes XMLs loading from a 12-lead ECG, visualization, filtering, feature extraction and fully customized report generation.
- The two main contributions of this tool are the total customization of the whole process; and, secondly, the possibility of adapting the analysis to the type of person.
- Results demonstrate the correct feature detection and the future usefulness of this tool.

THANK YOU!

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