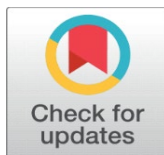
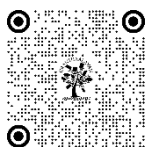


# HEART ATTACK DETECTION BY HEART RATE MONITORING USING IOT

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## ABSTRACT

IoT innovation captures and delivers information in the cloud, enabling faster and more accurate handling, storage, and auditing of information flows. Healthcare organization is one of the most encouraging applications of data innovation. The ECG signal reflects the action of the heart and assumes a fundamental role in the discovery of cardiovascular problems. This exploration work proposes an IoT execution of pulse identification, ECG signal prehandling, and ECG signal characterization using the connection and deep learning model. Premanipulation is called the underlying stage in the manipulation of signals and images before the resulting examination process. Biosignals are scarce, and after obtaining the signal through bioprobable anodes, they are vulnerable to clamor. The IIR scoring channel was considered capable of separating ruined ECG signals due to power lead impedance. Reference point meandering obscures critical elements of the ECG signals and consequently limits the accuracy of disposition calculations.

A hybrid screening method containing the normal and wavelet spatial channel was considered capable of eliminating pattern meandering in the ECG signals. Pulse rate is a crucial limit that decides real well-being. In this exploration work, the pulse evaluation equipment was executed using the implanted Raspberry Pi processor. The ECG information signals were previously handled by the Kalman channel and a consolidated versatile boundary method is used for pulse localization. Kalman sieving is used in the preprocessing stage and the separated ECG signal is exposed to the upper identification R and from that pulse it is evaluated. Characterization of ECG beats was completed using an old-style strategy using standardized cross-connections and the deep learning procedure. The deep learning calculation was considered capable of organizing the ECG beats into different classes and serves as a guide for the conclusion of heart diseases. Furthermore, the clustering of ECG stress signals was also completed using a deep-learning model. The result of this examination paves the way for competent characterization of ECG signals using a deep learning model.

**Keywords:** Healthcare, Wireless Sensor Data, Secure Data Transmission, Health Data Monitoring, IoT.

## 1. INTRODUCTION

The Web of Things is quickly arising with expanding requests as of late because of the expansion in the utilization of electronic gadgets and sensors that are associated with the Web and different gadgets to share information. Utilizations of IoT innovations are utilized in assembling, vehicles, transportation, correspondences, clinical and medical care, and strategies businesses, among others. The effect of the IoT is remarkable on the worldwide economy. Worldwide IoT market income will be roughly US\$1.1 trillion by 2025, IDC anticipated. Not just cell phones, PCs, and associated sensors in IoT are utilized in ventures, yet sensors were likewise used to screen animal creatures and imperiled species to track and screen their development examples and conduct. Computerized Twin Innovation unites IoT, man-made intelligence, Enormous Information, and cloud stage under a solitary environment for the dynamic virtual portrayal of an actual item or framework in its life cycle, for understanding and picking up information continuously procured by IoT sensors [26]. IoT in medication and medical services assumes a significant part in persistent well-being checking, patient conclusion, therapy, and medicine. Brilliant clinical gadgets and sensors ceaselessly screen the patient's well-being status, all the

more unequivocally and precisely [27]. Gadgets are decreasing in shape and size with the quick improvement of semiconductor advances. With the ascent of shrewd gadgets, a lot of information is produced, which likewise creates different difficulties, for example, Web traffic, stockpiling and handling, and start-to-finish encryption, where the undertaking of high business esteem. The total populace is expanding significantly; however, the issue is in the well-being status of the old gathering as per the World Wellbeing Association (WHO). The ailments of more seasoned individuals and patients should be observed routinely, which represents a test to clinical frameworks. Hence, IoT and sensor gadgets are valuable for convenient and precise recognizable proof of side effects or infections.

The size and power constraints of IoT gadgets are killed by the progression of IoT sensor innovation. Mechanical headway in sensors, coordinated circuits, and low-power gadgets was executed in wearable innovation. IoT sensors are extremely valuable in recognizing ailments before serious side effects with tweaked programming and equipment gadgets. IoT sensor gadgets comprise custom application-based processors, microcontrollers, memory units, presentations, and programming, alongside information transmission conventions for remote checking. The communicated information is put away, recorded, and investigated for analytic purposes. Wearable sensors might assist with lessening issues like expense, size, proficiency, precision, and power utilization [1] [2]. A wide assortment of IoT sensors are utilized in the clinical field for patient checking and treatment.

## **2. IOT IN HEALTHCARE**

The Internet of Things (IoT) has the potential to revolutionize the healthcare industry by enhancing patient care, improving operational efficiency, and providing valuable insights for healthcare providers. IoT data is valuable for medical research, contributing to the development of new treatments, medications, and healthcare practices. Here are some key aspects of IoT in healthcare:

### **2.1 IOT FOR PATIENTS**

Wearable Gadgets offer consideration in the estimation of physiological boundaries with altered programming. These redid gadgets can give warnings about boundaries like pulse, circulatory strain, and even pressure. IoT improved the living propensities for individuals, solely more seasoned age patients, by working with a constant following of ailments.

### **2.2 IOT FOR PHYSICIANS**

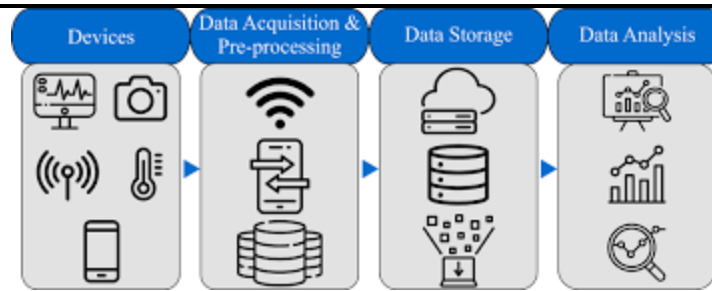
Wearable IoT gadgets coordinated with home checking gear, actually track patient's medical issues and update doctors. The Doctors can follow the patient's unwaveringness to therapy procedures or on the other hand assume any moment clinical consideration is required and proactively watch the patients. Information assembled with IoT gadgets from the patients can assist specialists in picking the best treatment practice for better well-being and health.

### **2.3 IOT FOR HOSPITALS**

The IoT gadgets are appropriate and helpful in the clinics for continuous observing of the clinical gear and the controlled use of the hardware for conveying medications and condition-checking patients' wellbeing. IoT gadgets implanted with GPS sensors for the area following clinical hardware. The spread of diseases is forestalled by IoT-empowered sterilization taking a look at gadgets in the emergency clinics. I likewise help with overseeing drug store stock control, temperature, mugginess, and temperature control of the climate.

### **2.4 IOT ROLE IN REDEFINING HEALTHCARE**

IoT gives another energy to the medical care area since it assumes a crucial part in all fields like information securing (procurement of patient physiological boundaries), 16 handling of information, stockpiling, help for doctors in navigation lastly fast reaction, productive development. The medical care explicit IoT gadgets produce enormous size of information associated with far-off servers handled by AI can change the medical care space. The four essential stages in IoT-based medical services are addressed in Figure 1. The four phases are connected individually with the end goal that the result of the past stage is the contribution to the following stage.



**Figure 1:** Stages of IoT in Healthcare

- Step 1.** The IoT interconnected devices collect the data from input devices  
**Step 2.** The acquired data are converted into digital form for processing  
**Step 3.** The digitized data is pre-processed, to remove the attenuation during the acquisition and then moved to a cloud platform  
**Step 4.** The pre-processed data is analyzed by computer-aided algorithms for decision-making.

### 3. RELATED WORK

Cardiovascular diseases stand as the leading cause of global mortality, responsible for approximately 17.9 million deaths in 2017 [8].

Sumit Majumder et al [1] best-in-class research on physiological boundaries and movement global positioning frameworks created on a wearable stage. The principal objective of a wearable well-being observing framework is to empower individuals to have free and dynamic existences in the solace of their own homes while giving consistent, painless, unpretentious, and continuous checking of their well-being and actual prosperity. Enormous advances in innovation in recent years have prompted the creation and utilization of low-power, minimal-expense sensors, actuators, electronic parts, and strong smaller than normal PCs, making them ready for painless, non-meddlesome, and consistent frameworks. checking human well-being for an exceptionally minimal price.

Rajalakshmi Krishnamurthy et al [2] The IoT sensor network perspective change towards new advancements, for example, cloud, haze, and edge figuring is prompting more noteworthy intricacy in information handling, information combination, and sensor information examination. This article gives an inside-and-out comprehension of the requirements for these cycles. The essential engineering for handling, combining, and examining IoT sensor information made sense, itemizing the usefulness of every one of these cycles. Then, the attributes of IoT sensor information, like the enormous size of IoT sensor information, heterogeneity, ongoing handling, and adaptability, made sense. The paper outlines different IoT sensor information handling strategies, for example, information denoising, missing information attribution, exception recognition, and information total. Notwithstanding information handling strategies, definitions and cycles for information combination in IoT sensor networks were introduced. Furthermore, the paper subtleties the need to further develop IoT sensor information examination utilizing innovations, for example, cloud, haze, and edge figuring. This paper proceeds to introduce another contextual investigation on using IoT sensor-based drones for unified observing, control, and information examination.

Victor J. Rodriguez et al [3] QRS indicator we proposed in light of wavelets and with the programmed determination of granularity factors was above close to 100% utilizing the MITBIH data set. They are more awful than past examinations, yet the distinction doesn't surpass 0.9% for any of the boundaries utilized in this correlation (SE, PP, DER). Then again, the outcomes were better while utilizing the NSRDB information base (SE=99.95%, PP=99.98%, DER=0.0006%). Contrasted with SE and PP they were just 0.01% lower. The QRS identification calculation was joined by the HRV examination. In the two phases, a few calculations must be enhanced for execution in the microcontroller. Because of the proficient utilization of Slam, it was feasible to foster the whole HRV examination as an independent application coordinated into an ARM microcontroller.

Mohammad Niknazar et al [4] In this paper, an engineered dynamic ECG model was stretched out inside the KF system to mutually reenact different ECGs to separate wanted ECGs from a solitary combination (i.e., single channel recording) of ECG, maternal and fetal clamor. Albeit the proposed technique just proposes one channel to isolate various ECGs, since every ECG has a related term in the model, the proposed model can recognize seven ECGs if the ideal and undesired ECG waves cross over in time. As displayed on engineered and genuine information (single and different pregnancies), the principal benefit of the proposed calculation lies in its exhibition in a wide assortment of circumstances. Dependable identification of the R top is a straightforward strategy in singleton pregnancies (which possibly occurs), in any event, utilizing a solitary sensor, yet is considerably more troublesome in different pregnancies (twins or more). Be that as it may, in these circumstances, the discovery of the R pinnacle can be achieved utilizing different techniques like echocardiography.

Manju Bala et al [5] In this paper, versatile least squares (LMS) separating procedures were created to eliminate commotion from an ECG signal and assess whether the channel is equipped for further developing an exhibition boundary, for example, the SNR of a Wiener channel. . sign. These two separate approaches are utilized to eliminate commotion impedance from the ECG signal. The outcomes showed that the sign sifted by Wiener has a decent sign-to-clamor proportion than the versatile LMS calculation, yet the PSD of the two channels is practically something very similar; Notwithstanding, because of the great mathematical worth of SNR, the Wiener channel approach adjusts to sound decrease and pattern changes. This approach has been effectively carried out in evaluating and killing commotion impedance in the ECG signal.

Hristov I.I. and so on [6] In this article, the proposed calculations for execution continuously and pseudo-constant are versatile, autonomous of edge values, and steady qualities. They self-synchronize to the lofty QRS slant and pulse, no matter what the goal or examining rate utilized. Because of the mix limit, the calculations are essentially heartless toward electromyogram and comparable high-recurrence clamor. The calculations can work with one, two, or more links, utilizing a consolidated link signal obtained from the amount of the outright upsides of the separated link signals.

Seyyed Mehdi Khairy Gashti et al [7] The Kalman channel is a numerical calculation that can be utilized to gauge the condition of a powerful framework in view of loud estimations. On account of ECG flags, the unique framework will be the electrical action of the heart, and commotion sources might incorporate obstruction from electrical cables, muscle action, and other physiological signs. A Kalman channel works by utilizing a numerical model of a framework to foresee the following conditions of the framework given past states and any known data sources or aggravations. This forecast is then changed because of real framework estimations obtained from the sensors. The Kalman channel comprises two fundamental stages: a forecast stage and a rectification stage. In the forecast stage, the channel utilizes a numerical model of the framework to foresee the following condition of the framework, given the present status and any known data sources or unsettling influences. This expectation is made by extending the present status forward in time utilizing a state change framework, which depicts how the framework develops after some time. This estimate additionally incorporates any known effects or unsettling influences influencing the framework. During the remedy stage, the channel utilizes genuine framework estimations to change the anticipated state and acquire a better gauge of the real framework state. The remedy is performed by contrasting the anticipated state and genuine estimations utilizing an estimation network that portrays how the estimations connect with the genuine condition of the framework. The distinction between the anticipated state and the genuine estimations is known as the development or remaining, and this leftover is utilized to change the anticipated state utilizing the Kalman gain. The Kalman result is a network that decides how much weight ought to be given to the anticipated state and the genuine estimations while working out the refreshed state gauge.

Ayu Nissa Berlianri Rizki et al [8] in this study center around giving an outline of QRS recognition for identifying pulse fluctuation or HRV involving two moving normal techniques for human heart location. What's more, it is important to characterize QRS recognition for pulse inconstancy perusing by adding window size elements of 5, 10, 15, and 20. Then, at that point, it is likewise intended to make a QRS discovery gadget for pulse changeability perusing utilizing Two Moving. Normal technique by adding window sizes of 5, 10, 15, and 20. Also, the last objective is to decide the FFT signal outcomes to see the recurrence of every ECG signal produced by the patient. Because of the exploration, it very well may



be reasoned that a twofold moving normal can be made to recognize pulse changeability in an individual. The FFT results are then used to change signals from the time-space completely to the recurrence space. Where the FFT has a capability that permits you to see the prevailing recurrence of the sign that should be examined and see the PLN recurrence of 50 Hz. In this review, the best blunder and incentive for RR span was viewed as in understanding 5, pulse fluctuation intolerant 1, and beats each moment in quiet 1. Certainly, here's an alternative way to express the information:

Khan et al. [9] describe that a heart attack occurs when there is a disruption in the supply of oxygen to the heart due to the narrowing of blood vessels. This narrowing can lead to various cardiovascular diseases, emphasizing the interconnected nature of such disorders. A notable example is Coronary Artery Disease (CAD), where the arteries constrict due to the accumulation of plaque on their walls. If the plaque continues to grow and eventually ruptures, it can obstruct blood flow in the arteries, thereby initiating a heart attack. Recognizing these intricate relationships is pivotal for the prevention and effective management of associated diseases.

M. U Khan et al. [10] employed the Pulse Plethysmograph signal in their study for the detection of Myocardial Infarction (MI). The investigation involved the evaluation of three distinct algorithms: Support Vector Machine (SVM), k-nearest Neighbor (KNN), and Decision Tree. Notably, the SVM algorithm exhibited the most promising performance, showcasing a sensitivity of 100%, a specificity of 95.1%, and an overall accuracy of 98.5%.

Chakraborty et al. [11] conducted a study focusing on the identification of Myocardial Infarction (MI) within the photoplethysmogram (PPG) signal, employing various algorithms. The algorithms tested included Decision Tree (DT), Quadratic Discriminant (QD), Logistic Regression (LR), Linear Support Vector Machine (LSVM), Nonlinear Support Vector Machine (NLSVM), and k-nearest Neighbor (kNN). Notably, the most favorable outcome was achieved with the Support Vector Machine (SVM), demonstrating a sensitivity of 92.7% and an accuracy of 95.4%.

Chen Chen et al. [12] highlight the significance of heart sounds as crucial indicators of both physiological and pathological aspects of health. They propose a pioneering wireless sensing system for continuous cardiac monitoring, offering a means of observing an individual's cardiovascular health without the need for manual healthcare services around the clock. The system introduced in this paper leverages the Internet of Things (IoT) to transmit cardiac information to both caregivers and medical practitioners.

The integrated system encompasses the entire process of heart sound acquisition, storage, and asynchronous analysis. Beginning with the development of a cardiac auscultation sensing unit designed for monitoring cardiovascular health, the system utilizes the Bluetooth protocol for power efficiency and moderate data transmission rates. The authors employ the Hilbert–Huang transform to eliminate interference signals and facilitate the extraction of heart sound signal features. Additionally, they introduce a subsequence segmentation algorithm based on a double-threshold approach to extract relevant physiological parameters.

Al-Makhadmeh and Tolba [13] introduced an Internet of Things (IoT)--based system for heart disease recognition, employing a deep belief neural network model. In their approach, the collected data underwent a thorough analysis for missing values, and the distribution of the data was carefully examined. The authors adopted the studentized method to normalize the data. Subsequently, features were extracted from the noise-free data, and these features were utilized by a classifier implemented with deep belief networks and a high-order Boltzmann machine. The reported results indicate a notable prediction accuracy of 99.03%. This high level of accuracy is significant not only for the recognition of heart disease but also holds promise in contributing to the reduction of heart disease mortality.

Vivekanandan and Sriman [14] developed a comprehensive model integrating a modified Differential Evolution (DE) method, a Fuzzy Analytical Hierarchy Process (AHP), and a Feedforward Neural Network (FNN) for predicting heart disease. The modified DE method played a crucial role in selecting the most important features, contributing to the optimization of the model. To enhance efficiency, a reduced set of attributes was then input into an optimized model employing a combination of fuzzy AHP and FNN. This integrated approach aimed to improve the accuracy of heart disease prediction. The simulation results demonstrated the efficacy of the modified differential evolution method,

showcasing an accuracy of 83%. The model's use of sophisticated optimization techniques and a combination of methods reflects a holistic approach to feature selection and prediction in the context of heart disease detection.

Uyar and İlhan [15] analyzed cardiac disease utilizing a recurrent fuzzy network-based genetic algorithm. For the evaluation of their proposed heart disease algorithm, they applied the UCI dataset, a commonly used dataset in the field. The data processing system was employed to gather patient information, and the researchers utilized fuzzy techniques to delve deeper into their investigative efforts. This suggests a comprehensive approach, integrating advanced computational methods for the analysis of cardiac disease based on patient data, showcasing the potential for enhanced diagnostic capabilities.

Ahmed et al. [16] devised a heart disease prediction method within the framework of the Internet of Things (IoT). Their approach employed a Support Vector Machine (SVM) for the prediction task. Cloud data from the WEKA framework was utilized in the proposed system. The patient information was processed through an SVM to predict the likelihood of heart disease. The reported results indicated a noteworthy accuracy of 97.53% for heart disease prediction. IoT devices played a pivotal role by collecting diverse cardiovascular data such as blood pressure, body temperature, and heartbeat. This comprehensive set of data was then employed to accurately diagnose heart disease. However, the authors acknowledged that when dealing with a large volume of data, the accuracy of the system was compromised. Despite this challenge, the proposed system demonstrated the capability to quickly and effectively recognize cardiac disease, showcasing the potential of IoT in enhancing healthcare diagnostics.

Nazari et al. [17] introduced a fuzzy Analytic Hierarchy Process (FAHP) to assess the probability of developing heart disease. In their approach, the authors calculated weights for various criteria that influence cardiovascular development. The proposed system provides recommendations for tests only when there is a high probability of cardiac disease, offering a targeted and efficient diagnostic strategy. This approach is particularly useful for medical practitioners as it helps in diagnosing initial findings before resorting to costly clinical tests. Consequently, the system holds the potential to reduce costs and optimize resource consumption in the diagnostic process.

Mohan et al. [18] introduced a technique named HRFLM, which combines a Random Forest (RF) and a Linear Model (LM) to identify crucial features for improving the predictability of heart disease through machine learning techniques. By leveraging the strengths of both RF and LM, the model is designed to enhance the accuracy of predictions. The implementation involves exploring various combinations of features and established classification methods. The authors reported a prediction accuracy of 88.7%, indicating the effectiveness of their hybrid approach in identifying important features and making accurate predictions related to heart disease.

Moh. Ayoub Khan et al. [19] an Internet of Medical Things (IoMT)-based healthcare monitoring system for heart disease prediction was proposed. The system employed a Modified Salp Swarm Optimization-Adaptive Neuro-Fuzzy Inference System (MSSO-ANFIS). The proposed feature selection method, namely LCSA, achieved the highest fitness values across all iterations. The MSSO-ANFIS technique demonstrated superior performance compared to existing methods such as HOBDBNN, GA-RFNN, HRFLM, ANN-FuzzyAHP, x2 -DNN, logistics regression, ICA with meta-heuristic, and hybrid intelligent systems. It exhibited higher values for precision, recall, F1-score, and accuracy while maintaining the lowest values for classification error.

Zhu et al. [20] emphasize the prevalence of Atrial Fibrillation (AF), a common arrhythmia condition that affects a substantial number of individuals, with approximately 4.5 million cases in the European Union and 2.3 million patients in the US. Moreover, around one-third of all strokes are associated with AF. Recognizing the significant impact of AF on health and the increased risk of stroke, the authors stress the importance of developing early and accurate methods for detecting AF to prevent stroke events.

W. Cai et al. [21] the authors emphasize that arrhythmia, as a type of Cardiovascular Disease (CVD), can impact the internal processes between different organs and is influenced by human genetics. Recognizing the complexity of this condition and the potential variations among individuals, early diagnostics become crucial. The primary focus of their

work is on leveraging technological advancements for the classification of arrhythmia patterns, in this study categorize arrhythmia disease into three main types: premature heartbeat, tachycardia, and bradycardia. By distinguishing between these patterns, they aim to contribute to the development of more effective diagnostic tools for the early identification of arrhythmias. This work aligns with the broader goal of advancing medical technology to enhance the understanding and detection of cardiovascular conditions, facilitating timely intervention and management.

A. Qayyum et al. [22] the authors highlight the various advancements in Telemedicine, including the detection of glucose levels, monitoring oxygen concentration, and utilizing ECG interfaces to track heart rates. They emphasize the potential of leveraging the Internet of Things (IoT) in healthcare to bring about significant improvements in early diagnosis and intervention, particularly for terminal illnesses like heart disease. The integration of IoT technologies can play a crucial role in reducing mortality rates by enabling real-time monitoring, early detection of health issues, and timely intervention to enhance patient outcomes.

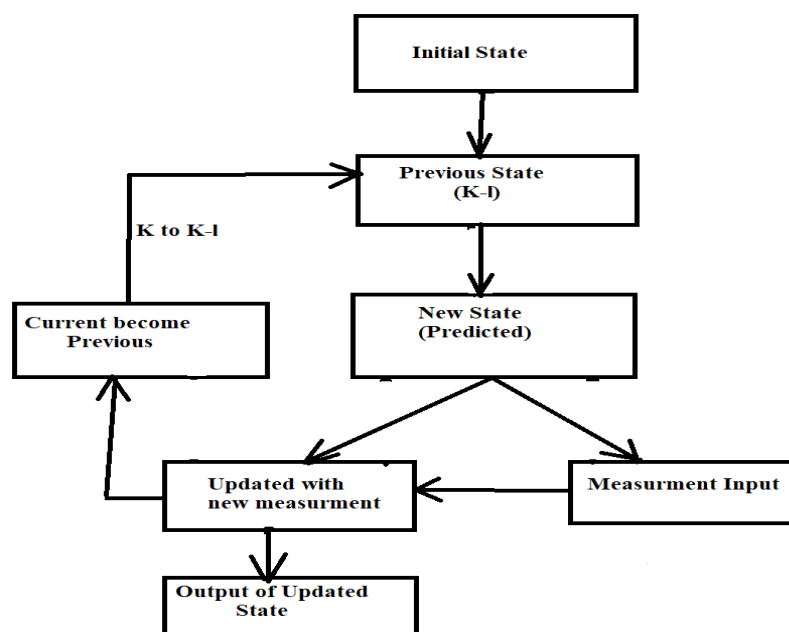
#### 4. METHODOLOGY

The pulse is an essential boundary that decides the actual well-being. The equipment execution of pulse assessment utilizing a Raspberry Pi-implanted processor is proposed in this section. The information ECG signals were pre-handled by the Kalman channel and the joined versatile limit method was utilized for pulse discovery. An implanted framework was proposed in [23] for the assessment of heartbeat rate recognition while doing indoor activities. Ongoing execution of pulse identification utilizing wavelet change was proposed utilizing an ARM microcontroller-based framework [3].

The calculations are created in Python and for examination, the profiles spy tool compartment is utilized. It contains two stages R top discovery and pulse assessment.

##### 4.1 PREPROCESSING OF ECG SIGNALS BY KALMAN FILTER

The Kalman channel is viewed as capable of the pre-handling of ECG signals. The Kalman channel contains two segments; the time update appraises the state framework and the covariance grid. The estimation area includes Kalman channel gain for making expectations. The previous results are used as current information sources and make the channel a capable one. The sifting system is started by the predefined values  $d_0$  (wanted signal) and  $p_0$  (mistake covariance signal) [4] [5].



**Figure 2:** Kalman Filter Flow Diagram

1. Time update
  - a. Predict the next state  

$$d_k = A * d_{k-1} + B * u_k$$
  - b. Predict the future error covariance  

$$P_k = A * P_{k-1} * A^T + Q_k$$
2. Measurement update
  - a. Calculate Kalman Gain  

$$K = P_k * H^T * (H * P_k * H^T + R)^{-1}$$
  - b. The predicted state is updated using  $x_k$   

$$d_k = d_k + K * (x_k - H * d_k)$$
  - c. Update predicted error covariance  

$$P_k = (I - K * H) * P_k$$

## 4.2 COMBINED ADAPTIVE THRESHOLD ALGORITHM FOR HEART RATE DETECTION

The ECG signals are acquired by the appropriate lead configurations and the absolute threshold value [6] is expressed as follows:

$$\text{Absolute Threshold Value (AT)} = m + f + r$$

Where  $m$  represents the steep slope threshold,  $f$  represents the integrated threshold concerning high-frequency components and  $r$  represents the beat expectation threshold value.

The initial value of threshold  $m = 0.6 * \text{maximum}(X_i)$  was set for the initial 5 seconds of the input signal in which 2 QRS complex components will be there.

### (a) ADAPTIVE STEEP-SLOPE THRESHOLD (M)

The buffer with five steep slope threshold values is expressed as follows: Buffer threshold = [ $m_1$   $m_2$   $m_3$   $m_4$   $m_5$ ]

Where  $m$  represents the  $m_1/m_5$

The QRS component is detected if  $\text{ecginput} \geq \text{AT}$ . The QRS complex detection is not permitted 200ms after the current one. In the QRS duration, a new value of  $m_5$  is estimated.

$$\text{New value of } m_5 = 0.6 * \max(X_i)$$

The new value of  $m_5$  becomes high when there is a ventricular contraction or artefacts appear in the signal. In this case, the new value of  $m_5$  is expressed as follows

$$\text{New } m_5 = 1.1 * m_5 \text{ if new } m_5 > 1.5 * m_5$$

The buffer value is refreshed continuously without the past components and by considering the new values. The  $m$  value is decreased in an interval of 200 to 1200ms followed by the last QRS detection.

### (b) ADAPTIVE INTEGRATING THRESHOLD (F)

The integrating threshold ( $f$ ) raises the net threshold value and in many cases, the EMG noise accompanies the ECG signal, this threshold aids the algorithm in the protection against false beat detection. The  $f$  is the average value of the pseudo spatial velocity component for 350 ms. Concerning each signal amplitude, the integrating threshold value is updated by the addition of the maximum value of the input signal in the 50ms of the 350ms interval, and the maximum value of the input signal is subtracted in the early 50 ms interval.

$$f = f + (\max(X \text{ in latest 50 ms in the 350 ms interval}) - \max(X \text{ in earliest 50 ms in the 350 ms interval}))/150$$

### (c) ADAPTIVE BEAT EXPECTATION THRESHOLD (R)

The beat expectation threshold deals with the heartbeats of normal value followed by a beat comprising very low amplitude. This issue occurs due to electrode artifacts. The adaptive integrating threshold protects against false QRS



detection, while the adaptive beat expectation threshold protects against the QRS misdetection. The net adaptive threshold *is* expressed as follows

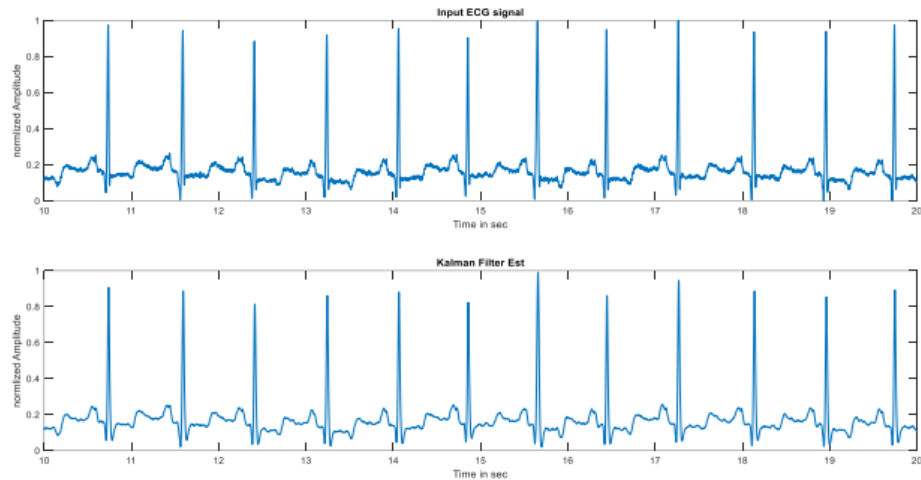
The net adaptive threshold is a sum of the above threshold values.

$$MFR = m + f + r$$

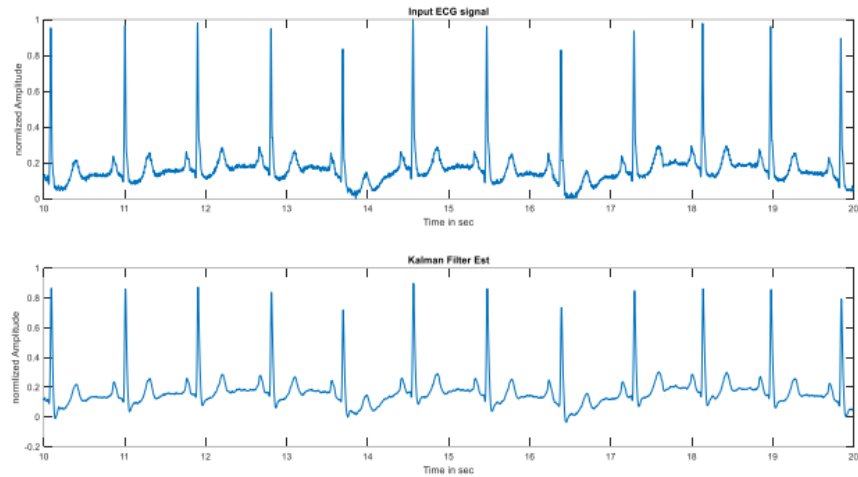
The heart rate is determined from the R peak detection.

## 5. RESULTS AND DISCUSSION

The Kalman filtering is employed in the preprocessing phase and the filtered ECG signal is processed further for R peak detection and the heart rate was estimated from the R peak detected output.



**Figure 3:** Kalman filter output corresponding to O1.txt



**Figure 4:** Kalman filter output corresponding to Y1.txt

The details of the database are represented below in Table 1

**Table 1:** Details of Database[24]

Details of database			Characteristics
Fantasia	ECG	publicdata set	Comprises of 10 subjects 5 young subjects (Y1-Y5) 5 elderly subjects (O1-O5)

The Profiles Spy is a Python programming bundle accessible as open source that can be utilized for the examination of

biosignals. The Raspberry Pi B+ implanted processor was utilized for the equipment execution and it's a minimal-expense processor with better execution. The bundle contains R top location capability and the joined versatile limit procedure is sent in that capability [25]. They are not entirely set in stone from the distinguished R top area.

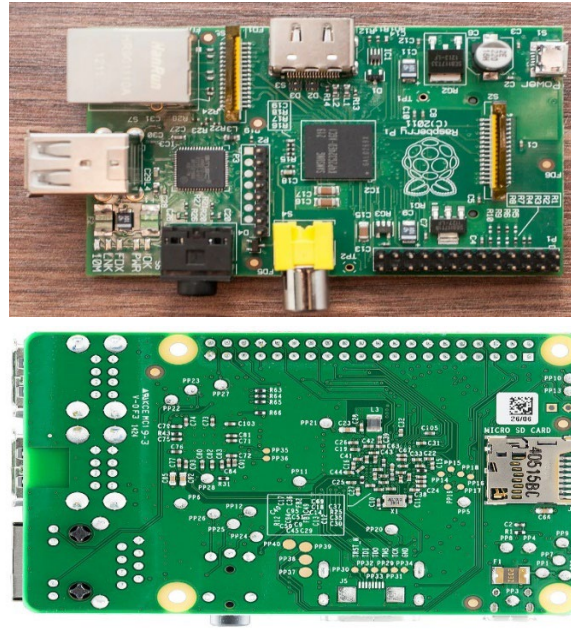


Figure 5: Front view and back view of the Raspberry Pi-based system

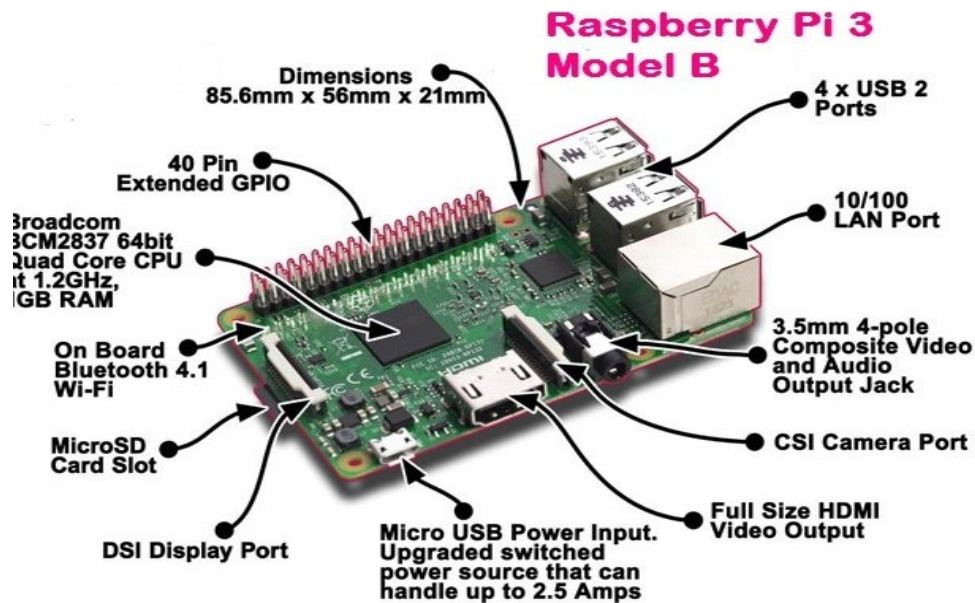
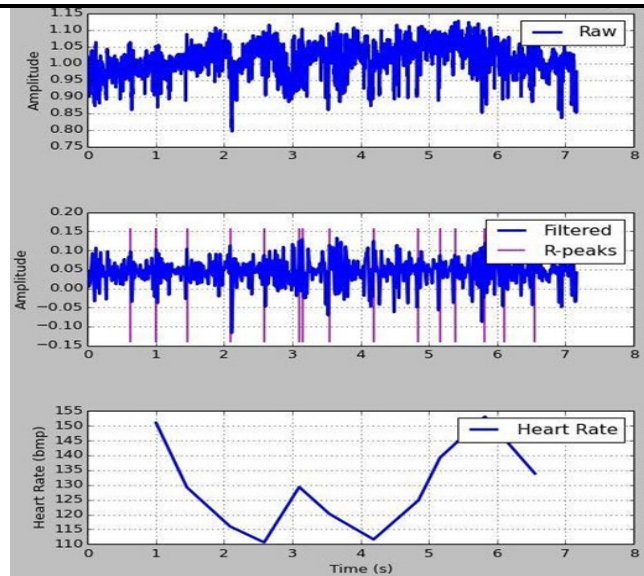


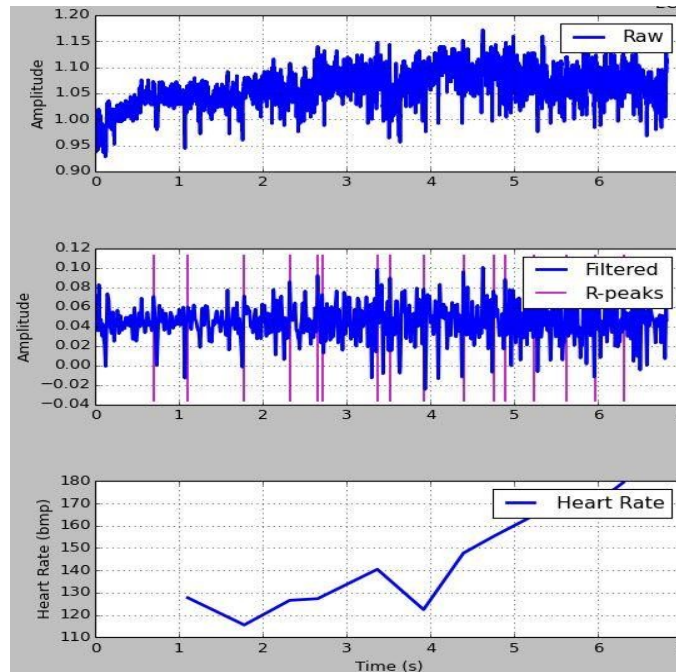
Figure 6: Raspberry Pi B+ processor characteristics

The pulse is assessed from the info bio signal O1 that is in the.txt design. The result is addressed in Figure 7. It contains crude information ECG signal, separated R top identified ECG signal and the last one portrays the pulse variety assessed from the ECG input signal.



**Figure 7:** Heart rate detection corresponding to O1.txt

The pulse is assessed from the information bio signal O2 that is in.txt design. The result is addressed in Figure 8. It involves crude info ECG signal, sifted R top identified ECG signal and the last one portrays the pulse variety assessed from the ECG input signal.



**Figure 8:** Heart rate detection corresponding to O2.txt

The pulse is assessed from the information bio signal O3 that is in.txt design. The result is addressed in Figure 9. It involves crude information ECG signal, sifted R top identified ECG signal and the last one portrays the pulse variety assessed from the ECG input signal.

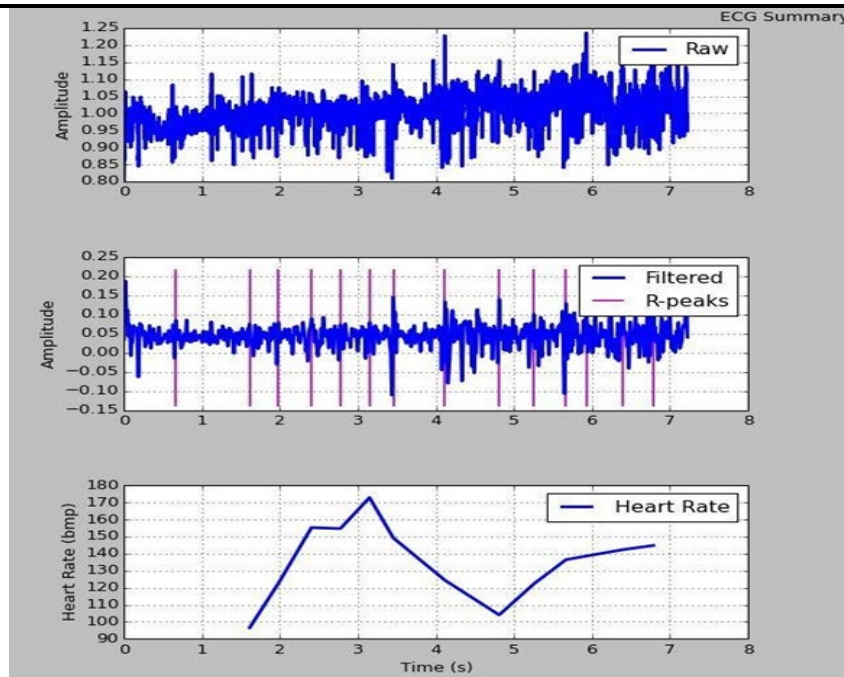


Figure 9: Heart rate detection corresponding to O3.txt

The pulse is assessed from the info bio signal Y1 that is in.txt design. The result is addressed in Figure 10. It contains crude information ECG signal, separated R top identified ECG signal and the last one portrays the pulse variety assessed from the ECG input signal.

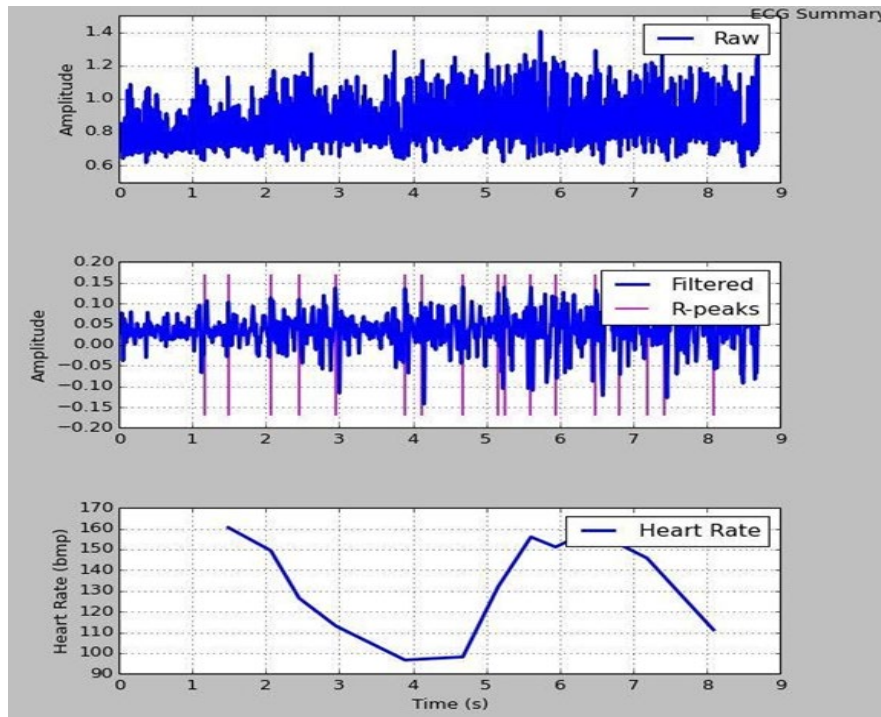
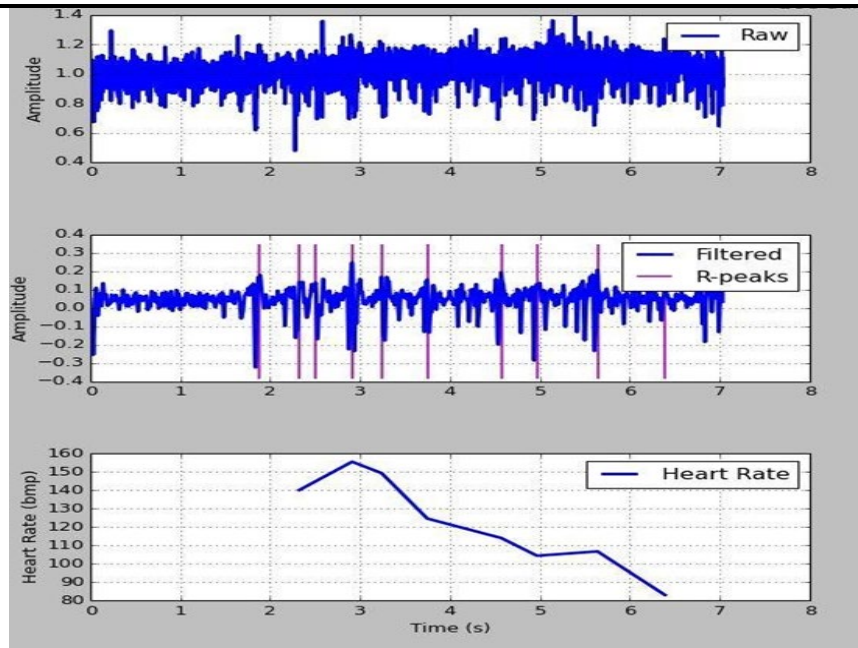


Figure 10: Heart rate detection corresponding to Y1.txt

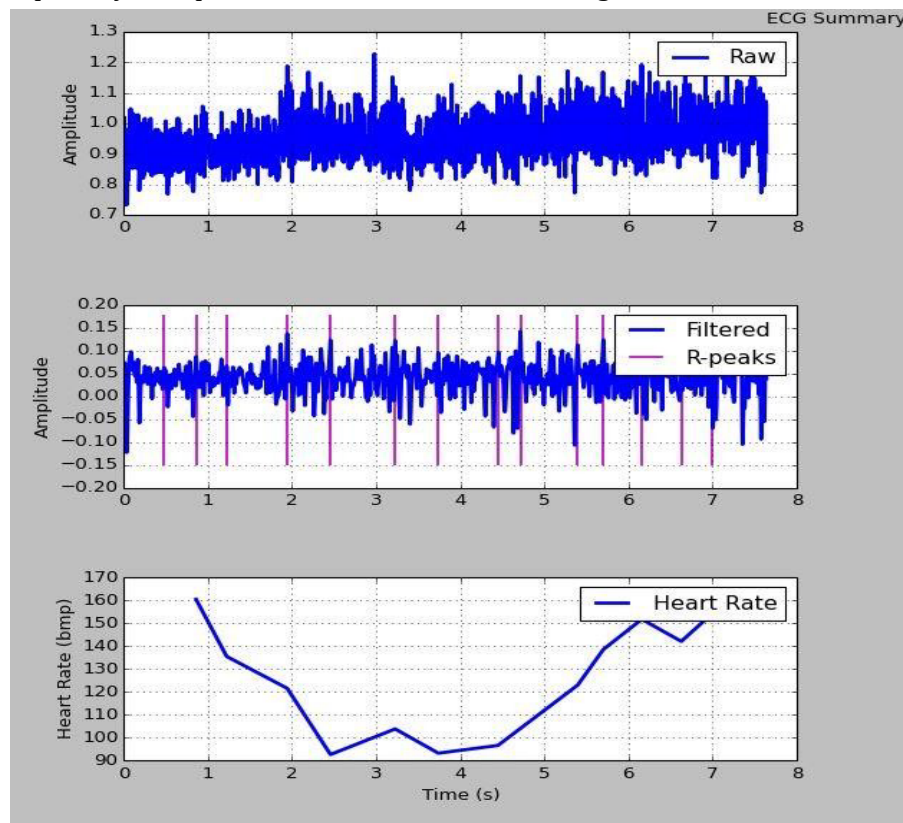
The pulse is assessed from the info bio signal Y2 that is in.txt design. The result is addressed in Figure 11. It contains crude information ECG signal, separated R top identified ECG signal and the last one portrays the pulse variety assessed from the ECG input signal.





**Figure 11:** Heart rate detection corresponding to Y2.txt

The pulse location compared to the information signal Y3.txt is portrayed in Figure 12. The primary line in each figure portrays the Crude info signal. The subsequent column in each figure portrays the sifted and R top distinguished input signal. The third column portrays the pulse identification of the info signal.



**Figure 12:** Heart rate detection corresponding to Y3.txt

## 6. CONCLUSION

This part proposes equipment execution of ECG signals for the pulse assessment. The pulse is an urgent boundary that



decides the cardiovascular movement and helps in the examination of problems. The preprocessing of the info ECG signal was finished by the Kalman channel, trailed by R top identification. For equipment execution, the Raspberry Pi-based installed processor was sent. The future work will zero in on the equipment execution of ECG signal characterization.

## CONFLICT OF INTERESTS

None.

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## REFERENCES

- Majumder S, Mondal T, Deen MJ. Wearable sensors for remote health monitoring. *Sensors*. 2017 Jan;17(1):130.
- Krishnamurthi R, Kumar A, Gopinathan D, Nayyar A, Qureshi B. An Overview of IoT Sensor Data Processing, Fusion, and Analysis Techniques. *Sensors*. 2020 Jan;20(21):6076.
- Rodriguez VH, Medrano C, Plaza I. Embedded system based on an ARM microcontroller to analyze heart rate variability in real time using wavelets. *Wireless Communications and Mobile Computing*. 2018 Oct 16;2018.
- Niknazar M, Rivet B, Jutten C. Fetal ECG extraction by extended state Kalman filtering based on single-channel recordings. *IEEE Transactions on Biomedical Engineering*. 2012 Dec 20;60(5):1345-52.
- Manju BR, Sneha MR. ECG denoising using wiener filter and kalman filter. *Procedia Computer Science*. 2020 Jan 1;171:273-81.
- Christov II. Real-time electrocardiogram QRS detection using combined adaptive threshold. *Biomedical engineering online*. 2004 Dec;3(1):1-9.
- Seyed Mehdi Kheiri Gashti/Seyed Mehdi Kheiri Gashti "The role of Kalman filters in signal processing" Conference: Biological signals At: IRAN April 2023
- Ayu Nissa Berlianri Rizhky, I Dewa Gede Hari Wisana, and Andjar Pudji, Sima Das, "QRS Detection On Heart Rate Variability Readings using Two Moving Average Methods", *Indonesian Journal of Electronics, Electromedical Engineering, and Medical Informatics*, vol. 5, no. 1, pp. 20-29, February. 2023.
- M. U. Khan, Z. Mushtaq, M. Shakeel, S. Aziz and S. Z. H. Naqvi, "Classification of myocardial infarction using MFCC and ensemble subspace KNN", *Proc. Int. Conf. Electr. Commun. Comput. Eng. (ICECCE)*, pp. 1-5, Jun. 2020.
- M. U. Khan, S. Aziz, A. Malik and M. A. Imtiaz, "Detection of myocardial infarction using pulse plethysmograph signals", *Proc. Int. Conf. Frontiers Inf. Technol. (FIT)*, pp. 950-955, Dec. 2019.
- A. Chakraborty, D. Sadhukhan, S. Pal and M. Mitra, "Automated myocardial infarction identification based on interbeat variability analysis of the photoplethysmographic data", *Biomed. Signal Process. Control*, vol. 57, Mar. 2020.
- Haoran Ren; Hailong Jin; Chen Chen; Hemant Ghayvat; Wei Chen "A Novel Cardiac Auscultation Monitoring System Based on Wireless Sensing for Healthcare" *IEEE Journal of Translational Engineering in Health and Medicine* (Volume: 6) 14 June 2018 ISSN: 2168-2372, DOI: 10.1109/JTEHM.2018.2847329.
- Z. Al-Makhadmeh and A. Tolba, "Utilizing IoT wearable medical device for heart disease prediction using higher order Boltzmann model: A classification approach", *Measurement*, vol. 147, Dec. 2019.
- T. Vivekanandan and N. C. Sriman Narayana Iyengar, "Optimal feature selection using a modified differential evolution algorithm and its effectiveness for prediction of heart disease", *Comput. Biol. Med.*, vol. 90, pp. 125-136, Nov. 2017.
- K. Uyar and A. Ilhan, "Diagnosis of heart disease using genetic algorithm based trained recurrent fuzzy neural networks", *Procedia Comput. Sci.*, vol. 120, pp. 588-593, 2017.
- F. Ahmed, "An Internet of Things (IoT) application for predicting the quantity of future heart attack patients", *Int. J. Comput. Appl.*, vol. 164, no. 6, pp. 36-40, Apr. 2017.
- S. Nazari, M. Fallah, H. Kazemipoor and A. Salehipour, "A fuzzy inference- fuzzy analytic hierarchy process-based clinical decision support system for diagnosis of heart diseases", *Expert Syst. Appl.*, vol. 95, pp. 261-271, Apr. 2018.
- S. Mohan, C. Thirumalai and G. Srivastava, "Effective heart disease prediction using hybrid machine learning techniques",

- IEEE Access, vol. 7, pp. 81542-81554, 2019.
- Mohammad Ayoub Khan, Fahad Algarni "A Healthcare Monitoring System for the Diagnosis of Heart Disease in the IoMT Cloud Environment Using MSSO-ANFIS" IEEE Access (Volume: 8) Page:122259 – 122269,02 July 2020 ISSN: 2169-3536, DOI: 10.1109/ACCESS.2020.3006424
- H. Zhu, C. Cheng, H. Yin, X. Li, P. Zuo, J. Ding, et al., "Automatic multilabel electrocardiogram diagnosis of heart rhythm or conduction abnormalities with deep learning: A cohort study", Lancet Digit. Health, vol. 2, no. 7, pp. e348-e357, Jul. 2020.
- W. Cai, Y. Chen, J. Guo, B. Han, Y. Shi, L. Ji, et al., "Accurate detection of atrial fibrillation from 12-lead ECG using deep neural network", Comput. Biol. Med., vol. 116, Jan. 2020.
- A. Qayyum, F. Meriaudeau and G. C. Y. Chan, "Classification of atrial fibrillation with pre-trained convolutional neural network models", Proc. IEEE-EMBS Conf. Biomed. Eng. Sci. (IECBES), pp. 594-599, Dec. 2018.
- Das KK, Roy RK, Singh HK, Bezboruah T. An embedded system for monitoring pulse rate during indoor exercise. Advanc Res Electric Electron. Eng. 2016;3(5):354-7.
- P. Li, Y. Hu and Z.-P. Liu, "Prediction of cardiovascular diseases by integrating multi-modal features with machine learning methods", Biomed. Signal Process. Control, vol. 66, Apr. 2021.
- B. Bamleshwar Rao, Dr. Akhilesh A. Wao, (2021), ENHANCE AND DEVELOP SECURE SENSOR DATA AND APPLICATION IN IOT BASED DEVICES, IJRARJFM1340 International Journal of Research and Analytical Reviews (IJRAR), IJRAR March 2021, Volume 8, Issue 1 www.ijrar.org (E-ISSN 2348-1269, P- ISSN 2349-5138), www.ijrar.org 828
- Rao, BB., Wao, AA. (2018), Design a Smart Model for m-Health Applications using IoT, International Journal of Science and Research (IJSR), Volume 9 Issue 8, August 2020, ISSN: 2319-7064