

Contact-free Monitoring of Physiological Parameters in People with Profound Intellectual and Multiple Disabilities

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Outline

Section 1: Introduction, motivation and problem definition

Section 2: Prototype system, deep learning enhancements

Section 3: Evaluation and results

Section 4: Demo video

Section 5: Summary and conclusion

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Problem definition



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A: I can see her **smiling**



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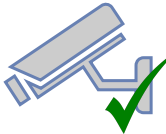
Problem definition



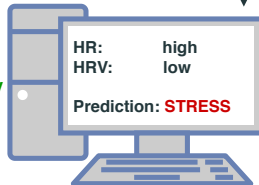
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Reconsider!



Q: How does she feel?
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Section 1: Introduction, motivation and problem definition

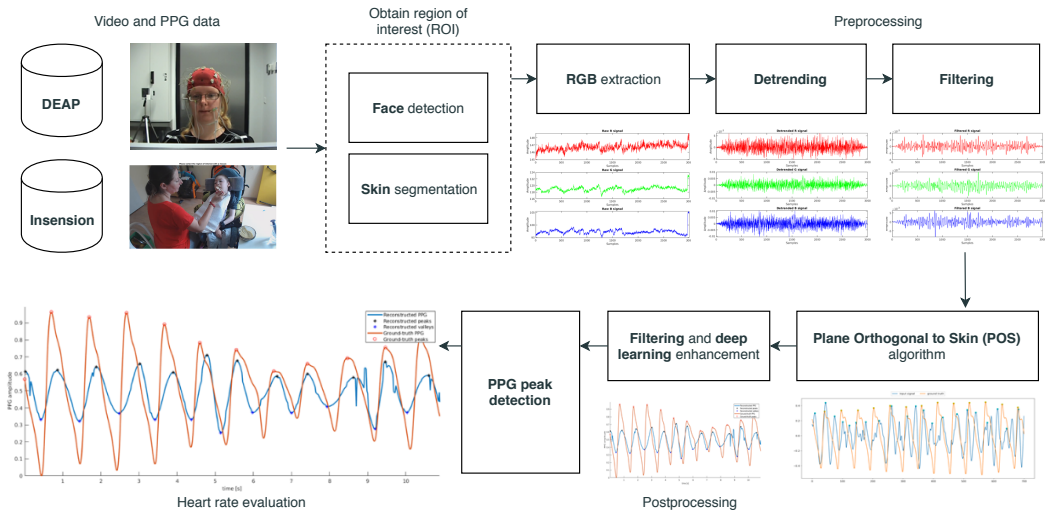
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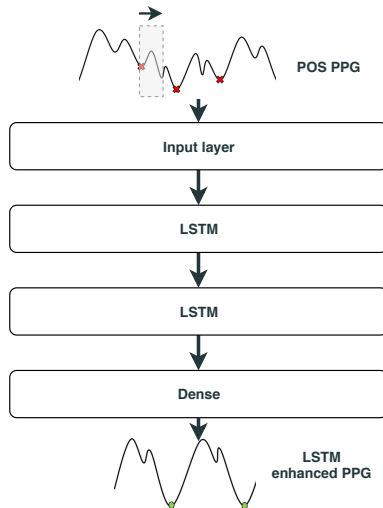
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Prototype architecture



Deep learning enhancements

1. Convolutional autoencoder (CNN)
 - Should learn how to encode the PPG shape
2. Long-Short-Term-Memory neural network
 - Should learn temporal dynamics and predict the next sample based on previous trends



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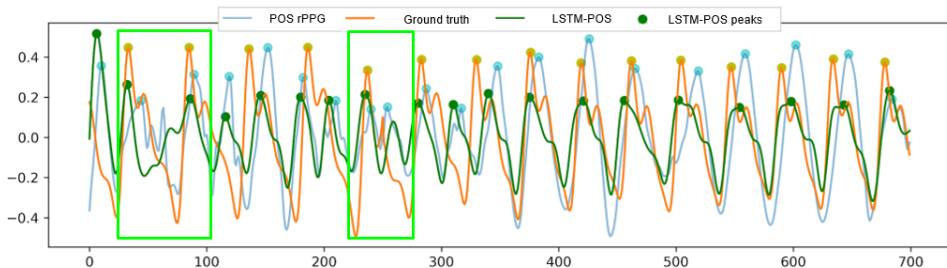
1. Current evaluation done on the publicly available **DEAP dataset**
2. 16 subjects used for training, 2 for validation, 2 for test
3. **Compared** the following rPPG methods + enhancements:
 - Using just **POS**
 - **POS + Convolutional autoencoder (CNN)**
 - **POS + Long-Short-Term Memory neural network (LSTM)**
4. Used a robust PPG peak detection algorithm (Elgendi et al.) to evaluate HR
 - **Mean Absolute Error (MAE)** between nr. of peaks detected in ground-truth and in enhanced signals
5. Additionally computed the **correlation** between predicted HR and ground-truth HR

Errors and visual inspection

Method	MAE [BPM]	Correlation
Baseline	8.36	Inapplicable
POS	13.36	0.27
CNN-POS	7.92	0.24
LSTM-POS	8.09	0.40

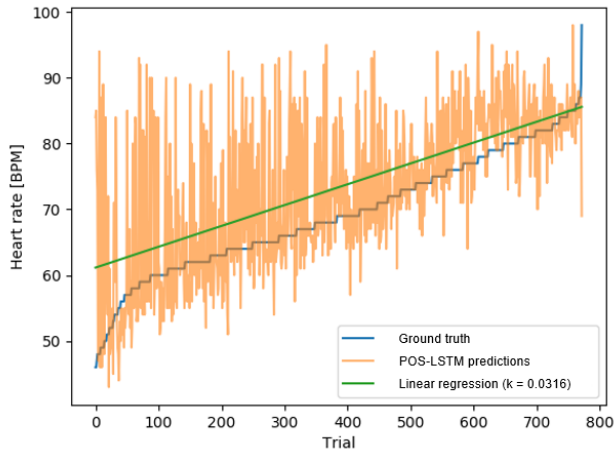
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Correlation

1. Good correlation between predicted and ground-truth HR using LSTM-POS



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The algorithm was ran on a sequence of facial images of one project participant

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Summary and conclusion

1. LSTM-POS method performs best, with error of 8 BPM on DEAP dataset
2. Good correlation between predicted and ground-truth HR
3. Better temporal alignment of peaks (important for HRV)

Summary and conclusion

1. LSTM-POS method performs best, with error of 8 BPM on DEAP dataset
2. Good correlation between predicted and ground-truth HR
3. Better temporal alignment of peaks (important for HRV)
4. Future work (in progress):
 - Evaluate on real-world data of PIMD people
 - Use the evaluated vitals of PIMD people to infer their mental state
 - Empower the PIMD people by having the system respond to their state (e.g., if stressed, play the music they enjoy)



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