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A Survey on Electronic Monitoring Systems for Healthcare Applications

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ABSTRACT: In recent years, holding up time in hospitals, crisis affirmations, and so on are amazingly costlier. It likewise expands the outstanding burden of specialists and restorative experts. Dealing with the cost, nature of treatment and thinking about seniors are essential issues in healthcare. These issues have an interest for in-home patient monitoring. Here the human body parameters are brought by various routes through biosensors, wearable restorative gadgets, and savvy materials. At that point the gathered subtle elements are sent to the remote server through the web. This paper audits the ebb and flow research and improvement on in-home patient monitoring. An assortment of system executions were contrasted and assessed with recognizes the specialized weaknesses in the present health monitoring systems. The point of this overview is to give the bearing to future research enhancements.

KEYWORDS: Electrocardiography, Heart Rate Monitor, Sphygmomanometer and respiratory rate.

I. INTRODUCTION

A remote health monitoring system is an expansion of a hospital medicinal system where a patient's crucial body state can be monitored remotely. Generally the recognition systems were just found in hospitals and were described by gigantic and complex hardware which required high power utilization. Persistent advances in the semiconductor innovation industry have prompted sensors and microcontrollers that are littler in size, quicker in task, low in power utilization and moderate in expense.

This has additionally observed improvement in the remote monitoring of indispensable life indications of patients particularly the elderly. The remote health monitoring system can be connected in the accompanying situations:

i) A patient is known to have a therapeutic condition with shaky administrative body system. This is in situations where another medication is being acquainted with a patient.

ii) A patient is inclined to heart assaults or may have endured one preceding. The vitals might be monitored to foresee and alarm ahead of time any sign of the body status.

iii) Critical body organ circumstance

iv) Situation prompting advancement of a dangerous perilous condition. This is for individuals at a propelled age and might have falling flat health conditions.

v) Athletes amid preparing. To know which preparing administrations will create better outcomes.

In recent times few systems have come up to address the issue of remote health monitoring. The systems have a remote recognition system that sends the sensor data remotely to a remote server. Some have even received an administration demonstrate that expects one to pay a membership charge. In creating nations this is an impediment as a few people can't utilize them because of cost issue included. There is additionally the issue of web availability where a few systems to operate great quality web for a constant remote association is required. Web infiltration is as yet an issue in creating nations.

A considerable lot of the systems presented work best in the created nations where the foundation is working flawlessly. Much of the time the systems are adjusted to work in creating nations. To decrease a portion of these issues



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there is have to approach the remote discovery from a ground up way to deal with suit the essential insignificant conditions directly accessible in creating nations.

A basic patient monitoring system configuration can be drawn closer by the quantity of parameters it can identify. In a few occasions by distinguishing one parameter a few readings can be ascertained. For straightforwardness contemplations parameter identification are:

i) Single parameter monitoring system

In this case a solitary parameter is monitored e.g. Electrocardiogram (ECG or EKG) perusing. From the ECG or heartbeat discovery a few readings can be got relying upon calculation utilized. An ECG perusing can give the heart rate and oxygen immersion.

ii) Multi parameter monitoring system

This has various parameters being monitored in the meantime. A case of such a system can be found in High Dependency Units (HDU), Intensive Care Units (ICU), amid the medical procedure at a hospital theater or Post medical procedure recuperation units in Hospitals. A few parameters that are monitored incorporate the ECG, blood pressure, breath rate. The Multi parameter monitoring system fundamentally demonstrates that a patient is alive or recuperating.

In creating nations, soon after resigning from their every day profession routine lion's share of the elderly age gathering, move to the rustic territories. In created nations they may move to helped living gathering homes. This is the place a remote health monitoring system can prove to be useful.

II. LITERATURE REVIEW

Wireless Ambulatory Electrocardiography (ECG):

It is a kind of walking electrocardiography with account gadgets that utilization remote innovation, for example, Bluetooth and advanced mobile phones, for at-home cardiovascular (monitoring of heart rhythms). These gadgets are for the most part prescribed to individuals who have been beforehand determined to have arrhythmias and need to have them monitored, or for the individuals who have suspected arrhythmias and should be monitored over a broadened timeframe keeping in mind the end goal to be analyzed. Remote Ambulatory ECGs work in a route like a consistent ECG by estimating the electrical capability of the heart through the skin. The information is saved money on an application on a Smart Phone, and after that transferred to a PC through Bluetooth or Cloud innovations. The data can likewise be sent through these advances or through email to a specialist or cardiovascular professional [1]. Remote Ambulatory ECGs can give voice alert messages when heart variations from the norm happen, for example, bradycardia, and can record this data and give a screen provoke to the patient to see the information. The gadgets can likewise store mass measures of ECG information on the telephone, replay the ECG readings at a rapid, and have a low voltage caution capacity to not squander the battery life. These qualities of the gadgets are viewed as advantages in contrast with current wandering ECG.



Fig.1. Holter Monitor Wireless Ambulatory ECG



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Heart Rate Monitor:

It is an individual monitoring gadget that enables one to quantify one's heart rate progressively or record the heart rate for later investigation. It is to a great extent utilized by entertainers of different kinds of physical exercise. As of late, it has been regular for brilliant watches to incorporate heart rate monitors, which has extraordinarily expanded prominence [2].

Diffraction Traditional heart rate monitors typically include two components: a transmitter, worn on a chest lash, and a recipient. In early transmitters, water or fluid was required to get great conduction. In old adaptations, when a heart beat is identified a radio flag is transmitted, which the collector uses to decide the present heart rate. This flag can be a basic radio heartbeat or a one of a kind coded motion from the chest tie, (for example, Bluetooth, ANT, or other low-control radio connection); the last keeps one client's recipient from utilizing signals from other adjacent transmitters (known as cross-talk obstruction).

Later gadgets utilize optics to quantify heart rate by which estimates changes in blood stream by sparkling a light from a LED through the skin and gauging how it scrambles off blood vessels. Notwithstanding estimating the heart rate, gadgets utilizing this innovation can gauge blood oxygen immersion (SpO2). Fresher gadgets incorporate a chip, which at the same time monitors heart rate, oxygen immersion, and different parameters. These may incorporate sensors, for example, accelerometers, whirligigs, and GPS to recognize speed, area and separation disposing of the requirement for lower leg worn gadgets. Figure 2 demonstrates heart rate monitor system.



Fig.2. Heart Rate Monitor

Sphygmomanometer:

A sphygmomanometer, otherwise called a blood pressure meter, blood pressure monitor, or blood pressure check, is a gadget used to gauge blood pressure, made out of an inflatable sleeve to fall and afterward discharge the corridor under the sleeve in a controlled way [3], and a mercury or mechanical manometer to quantify the pressure. It is constantly utilized related to a way to decide at what pressure blood stream is simply beginning, and at what pressure it is unhampered. Manual sphygmomanometers are utilized related to a stethoscope.

A sphygmomanometer comprises of an inflatable sleeve, an estimating unit (the mercury manometer, or aneroid measure), and a system for swelling which might be a physically operated knob and valve or a pump operated electrically. Figure 3 indicates electronic sphygmomanometer system.



Fig.3. Electronic Sphygmomanometer



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A stethoscope is by and large required for auscultation (see underneath). Manual meters are utilized via prepared professionals, and, while it is conceivable to get an essential perusing palpation alone, this just yields the systolic pressure.

- Mercury sphygmomanometers are viewed as the highest quality level. They indicate blood pressure by influencing the stature of a section of mercury, which does not require recalibration. On account of their exactness, they are frequently utilized in clinical preliminaries of medications and in clinical assessments of high-hazard patients, including pregnant ladies. A divider mounted mercury sphygmomanometer is otherwise called a Baumanometer.
- Aneroid sphygmomanometers (mechanical composes with a dial) are in like manner utilize; they may require adjustment checks, not at all like mercury manometers. Aneroid sphygmomanometers are viewed as more secure than mercury sphygmomanometers, albeit reasonable ones are less accurate. A noteworthy reason for takeoff from adjustment is mechanical shaking. Aneroids mounted on dividers or stands are not powerless to this specific issue.

Digital meters utilize oscillometric measurements and electronic figurings instead of auscultation. They may utilize manual or programmed swelling, yet the two sorts are electronic, simple to operate without preparing, and can be utilized in uproarious conditions. They measure systolic and diastolic pressures by oscillometric recognition, utilizing either deformable films that are estimated utilizing differential capacitance, or differential piezoresistance, and they incorporate a chip. They accurately measure mean blood pressure and heartbeat rate, while systolic and diastolic pressures are acquired less accurately than with manual meters, and adjustment is additionally a worry [4-6]. Digital oscillometric monitors may not be prudent for a few patients, for example, those misery from arteriosclerosis, arrhythmia, preeclampsia, pulsus alternans, and pulsus paradoxus, as their computations may not right for these conditions, and in these cases, a simple sphygmomanometer is best when utilized by a prepared individual. Digital instruments may utilize a sleeve put in, in request of precision and reverse request of compactness and accommodation, around the upper arm, the wrist, or a finger. The oscillometric technique for recognition utilized gives blood pressure readings that contrast from those dictated by auscultation, and fluctuate as per numerous elements, for example, beat pressure, heart rate and blood vessel firmness, albeit a few instruments are asserted likewise to quantify blood vessel solidness, and some can identify unpredictable heartbeats.

Respiratory Rate:

The respiratory rate is the rate at which breathing happens. This is typically estimated in breaths every moment and is set, and controlled by the respiratory focus. Figure 4 indicates first reaction monitor for respiratory rate measurement system. The respiratory rate in humans is estimated when a man is very still and includes checking the quantity of breaths for one moment by tallying how often the chest rises. A fiber-optic breath rate sensor can be utilized for monitoring patients amid an attractive reverberation imaging check. Breath rates may increment with fever, disease, or other medicinal conditions.



Fig.4. First Response Monitor for Respiratory Rate Measurement



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Errors in respiratory measurement have been accounted for in the writing [7]. One examination looked at respiratory rate tallied utilizing a 90-second check period, to an entire moment, and found noteworthy contrasts in the rates. Another investigation found that fast respiratory rates in infants, checked utilizing a stethoscope, were 60-80% higher than those tallied from next to the bed without the guide of the stethoscope. Comparable outcomes are seen with creatures when they are being taken care of and not being dealt with—the obtrusiveness of touch evidently is sufficient to roll out critical improvements in relaxing.

Different strategies to gauge respiratory rate are ordinarily utilized, including impedance pneumography [8], and capnography which are regularly executed in patient monitoring. What's more novel procedures for consequently monitoring respiratory rate utilizing wearable sensors are being developed, for example, estimation of respiratory rate from the electrocardiogram, photoplethysmogram and accelerometry signals.

authors used average residual battery level of the entire network and it was calculated by adding two fields to the RREQ packet header of a on-demand routing algorithm i) average residual battery energy of the nodes on the path ii) number of hops that the RREQ packet has passed through. According to their equation retransmission time is proportional to residual battery energy. Those nodes having more battery energy than the average energy will be selected because its retransmission time will be less. Small hop count is selected at the stage when most of the nodes have same retransmission time. Individual battery power of a node is considered as a metric to prolong the network lifetime in [3]. Authors used an optimization function which considers nature of the packet, size of the packet and distance between the nodes, number of hops and transmission time are also considered for optimization. In [4] initial population for Genetic Algorithm has been computed from the multicast group which has a set of paths from source to destination and the calculated lifetime of each path. Lifetime of the path is used as a fitness function. Fitness function will select the highest chromosomes which is having highest lifetime. Cross over and mutation operators are used to enhance the selection. In [5] authors improved AODV protocol by implementing a balanced energy consumption idea into route discovery process. RREQ message will be forwarded when the nodes have sufficient amount of energy to transmit the message otherwise message will be dropped. This condition will be checked with threshold value which is dynamically changing. It allows a node with over used battery to refuse to route the traffic in order to prolong the network life. In [6] Authors had modified the route table of AODV adding power factor field. Only active nodes can take part in rout selection and remaining nodes can be idle. The lifetime of a node is calculated and transmitted along with Hello packets. In [7] authors considered the individual battery power of the node and number of hops, as the large number of hops will help in reducing the range of the transmission power. Route discovery has been done in the same way as being done in on-demand routing algorithms. After packet has been reached to the destination, destination will wait for time δt and collects all the packets. After time δt it calls the optimization function to select the path and send RREP. Optimization function uses the individual node's battery energy; if node is having low energy level then optimization function will not use that node.

III. CONCLUSION

In-home patient monitoring with body sensor arrange is a viable answer for patient monitoring. It lessens the healthcare cost and sitting tight for quite a while in hospitals. Different patients can be monitored at once. The body sensors persistently gather the body parameters of the patient and they quickly sent that to the hospital. So it decreases the possibility of false treatment and enhances the quality of treatment.

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