

Heart Rate Variability

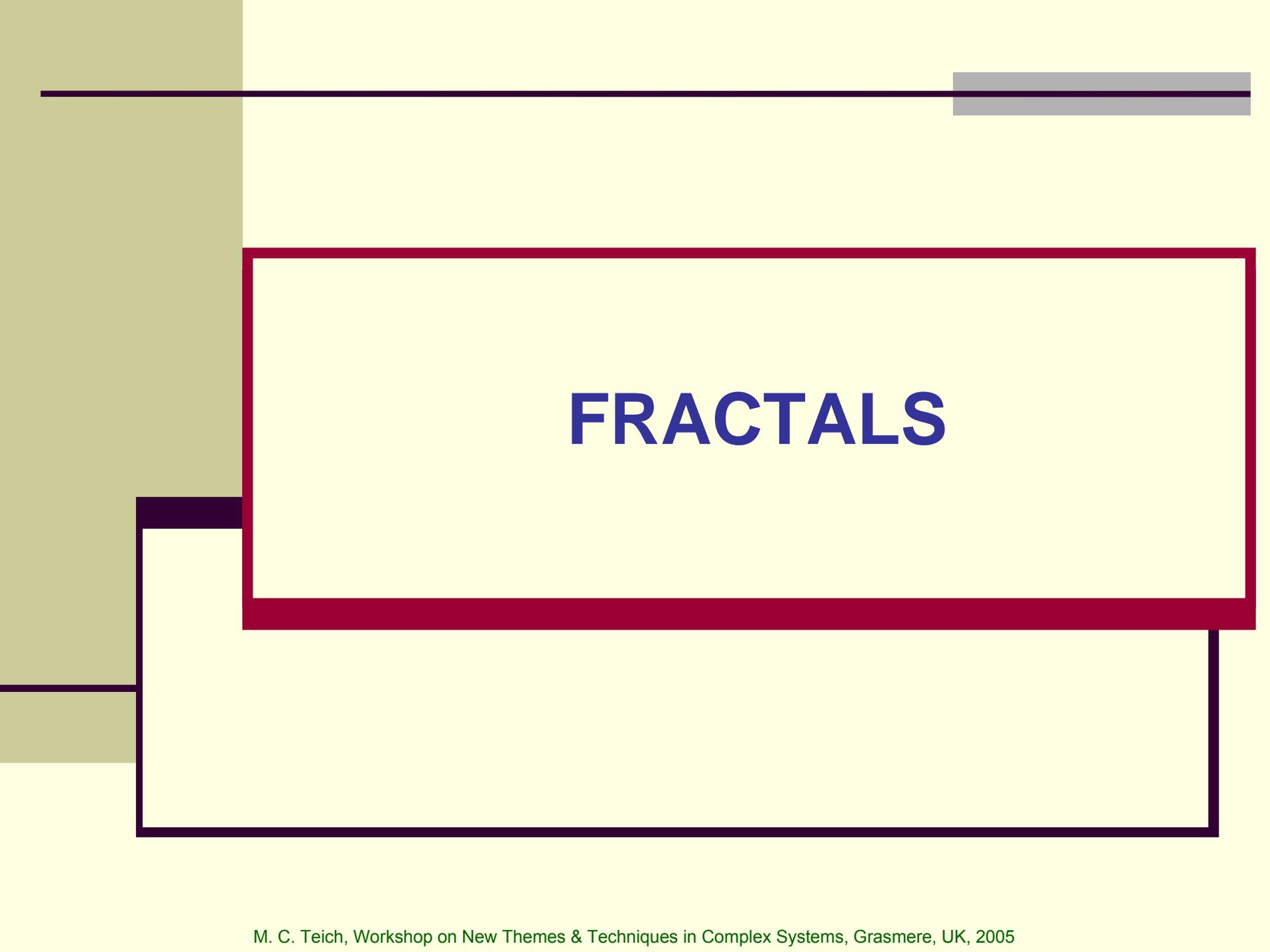
Malvin Carl Teich

Boston University and Columbia University

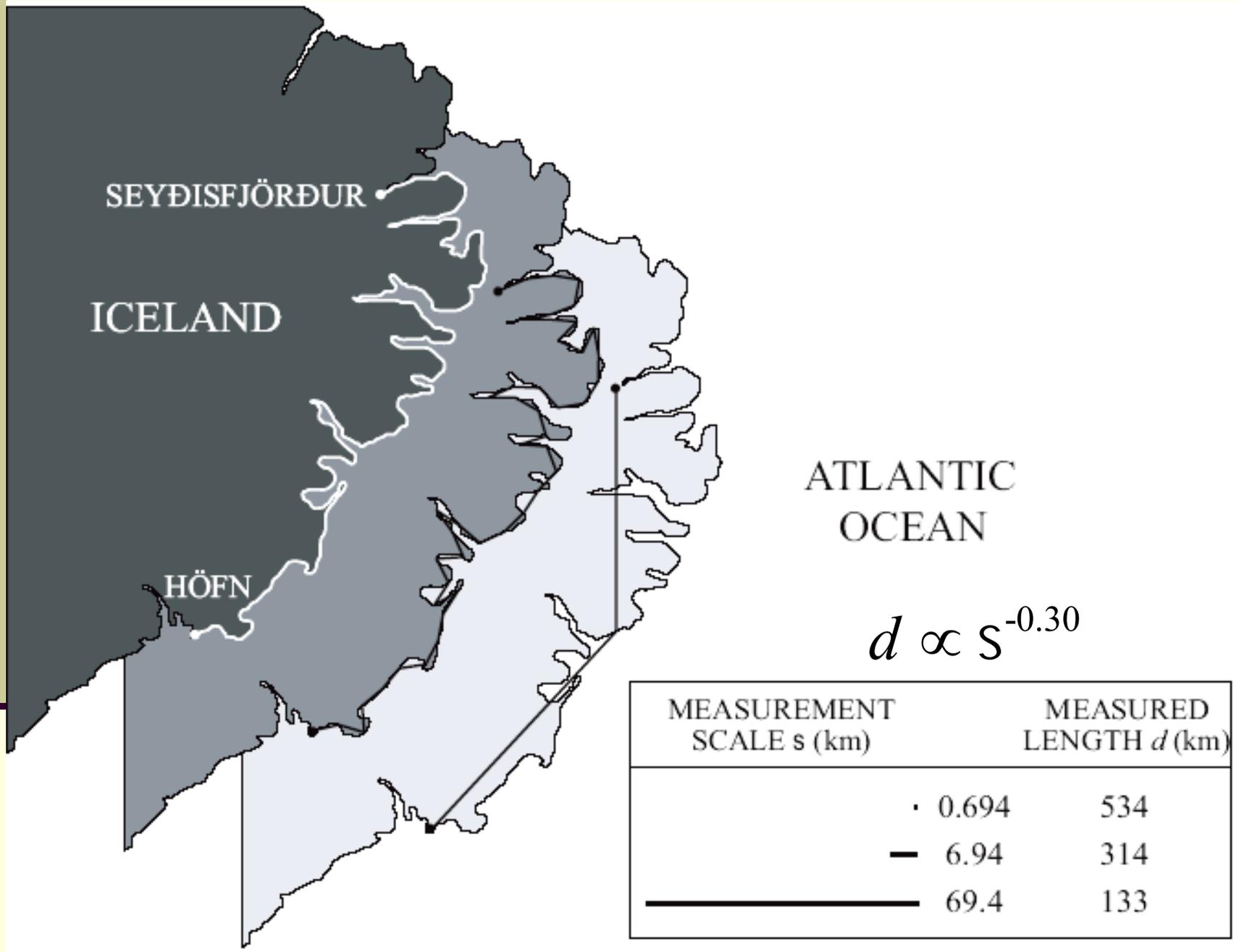
<http://people.bu.edu/teich>

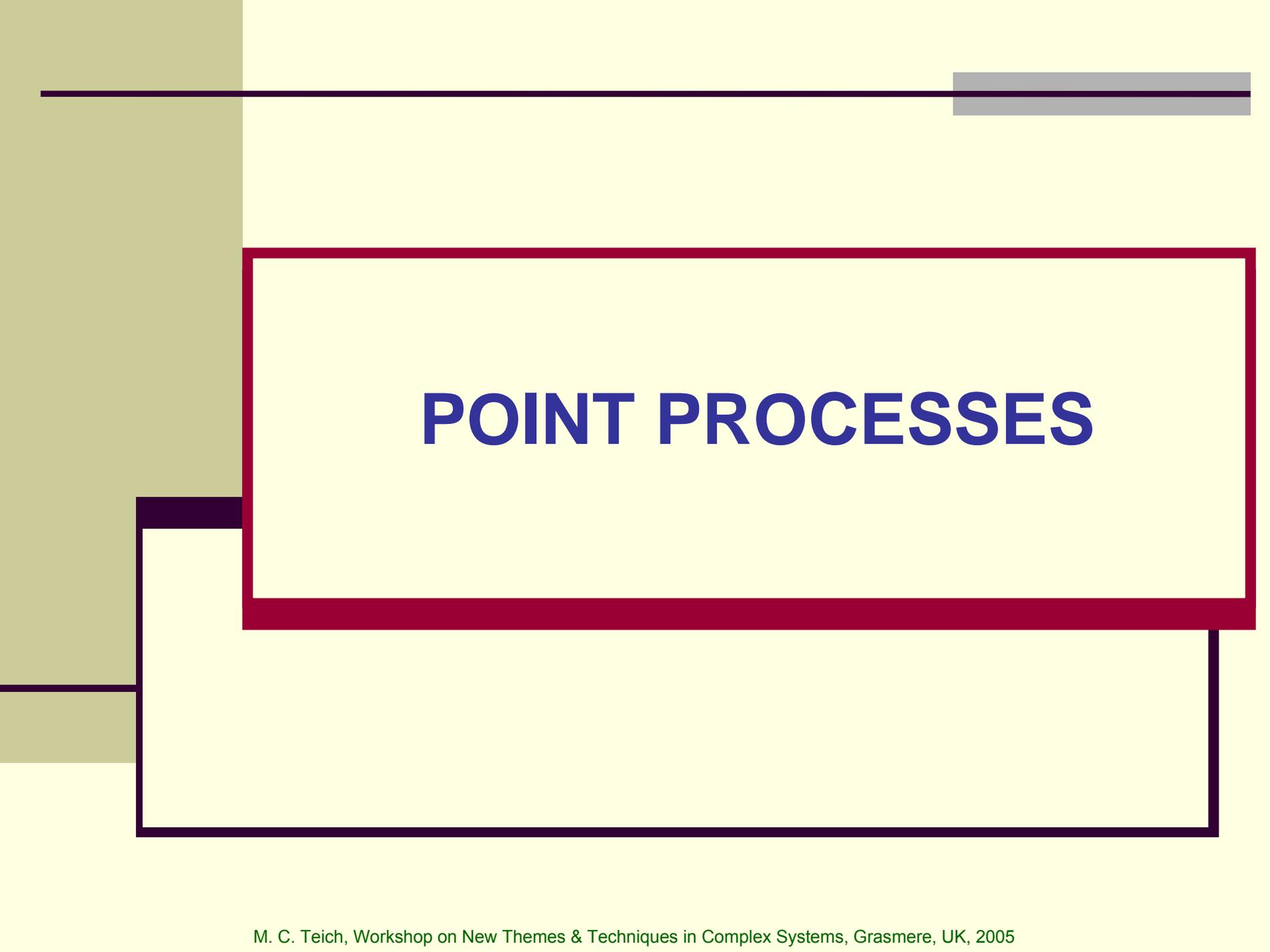
Colleagues:

- **Steven Lowen, Harvard Medical School**
- **Conor Heneghan, University College Dublin**
- **Robert Turcott, Stanford Medical School**
- **Markus Feurstein, Wirtschaftsuniversität Wien**
- **Stefan Thurner, Allgemeines Krankenhaus Wien**



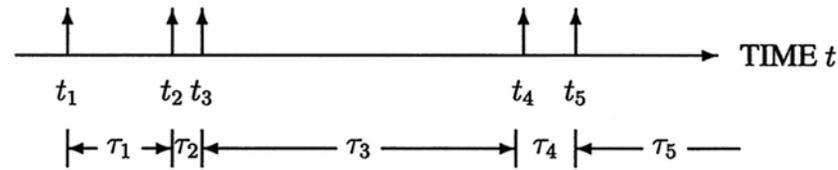
FRACTALS



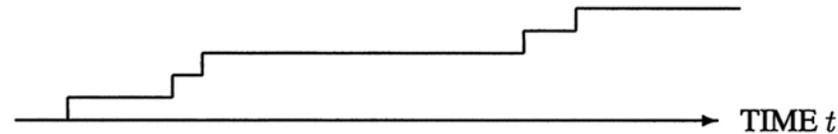


POINT PROCESSES

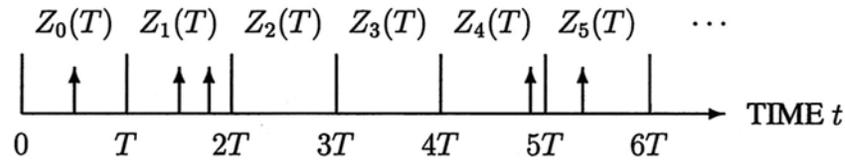
a) POINT PROCESS $dN(t)$



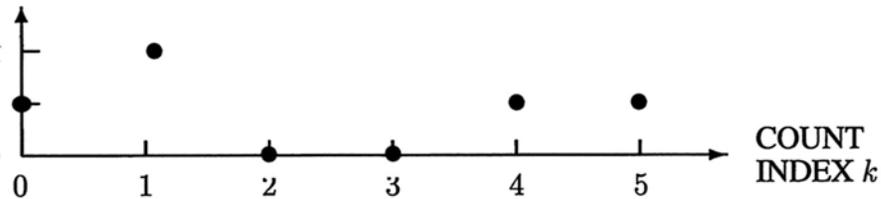
b) COUNTING PROCESS $N(t)$



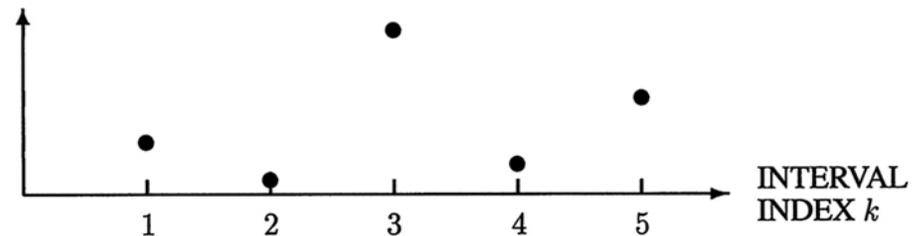
c) GENERATION OF COUNT SEQUENCE



d) COUNT SEQUENCE $\{Z_k(T)\}$



e) INTERVAL SEQUENCE $\{\tau_k\}$

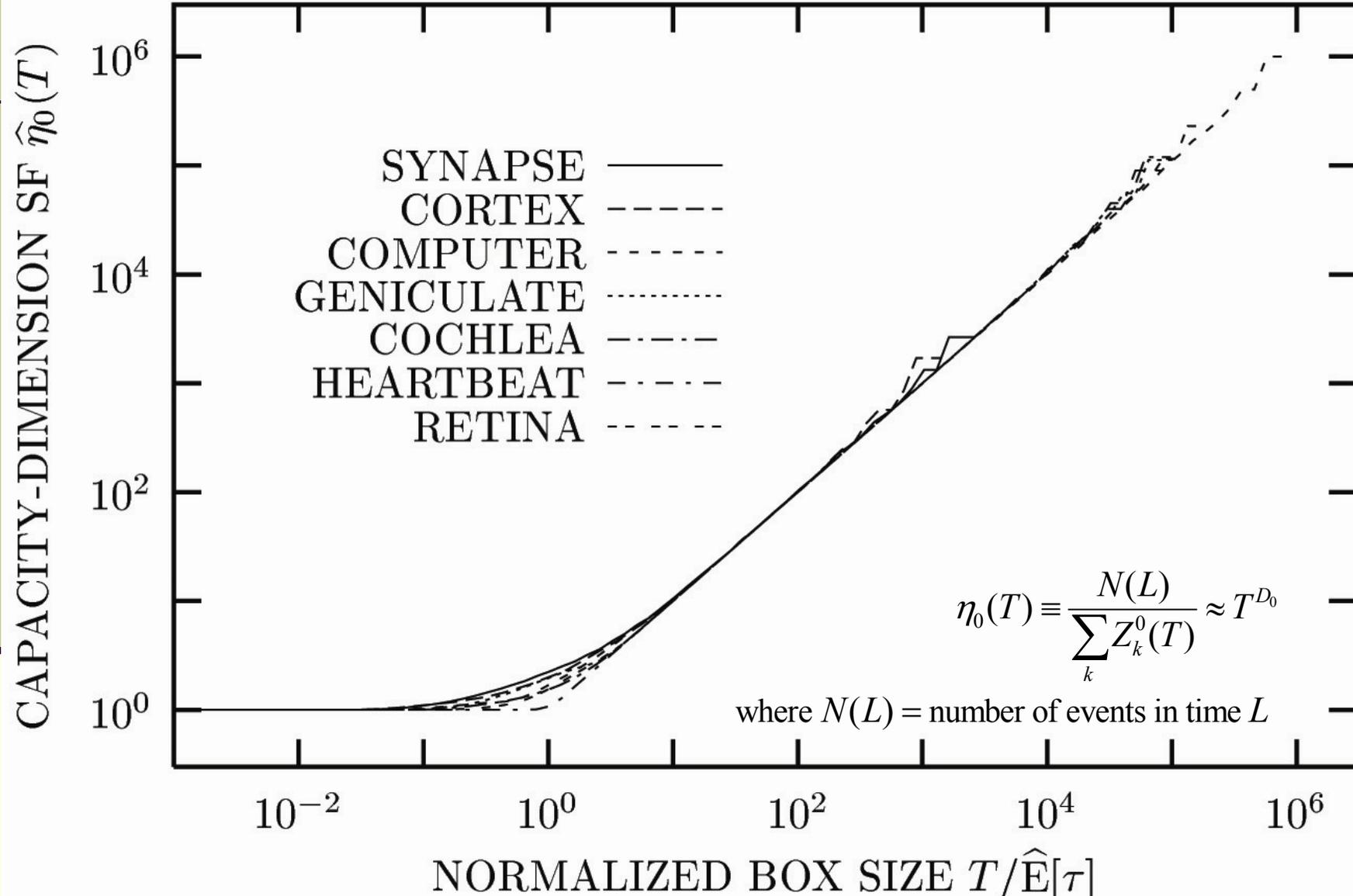


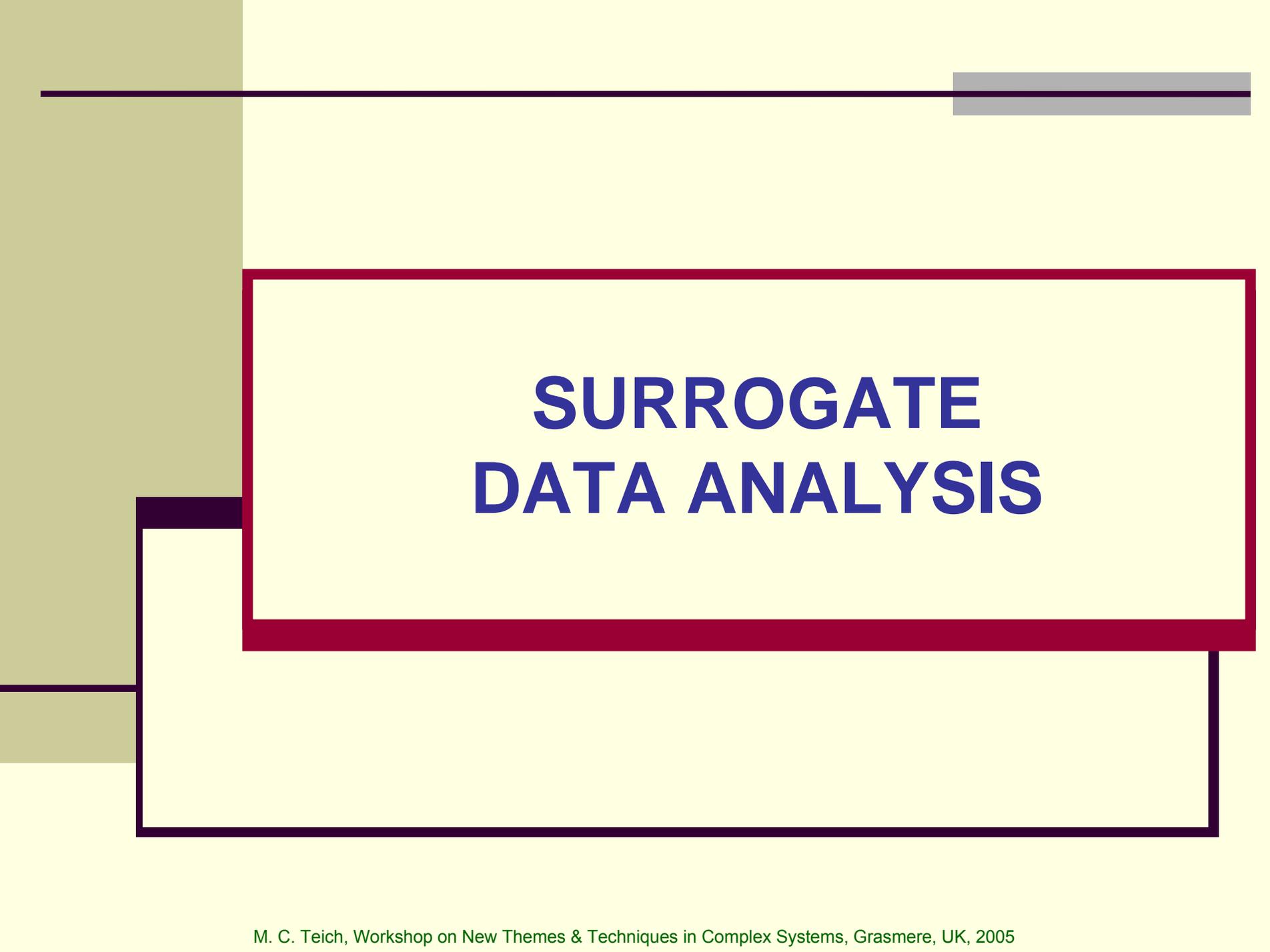
FRACTAL-BASED POINT PROCESSES

- Fractal point processes
- Fractal-rate point processes

S. B. Lowen and M. C. Teich, *Fractal-Based Point Processes*
(Wiley, Hoboken, NJ, 2005).

CAPACITY-DIMENSION SCALING FUNCTION

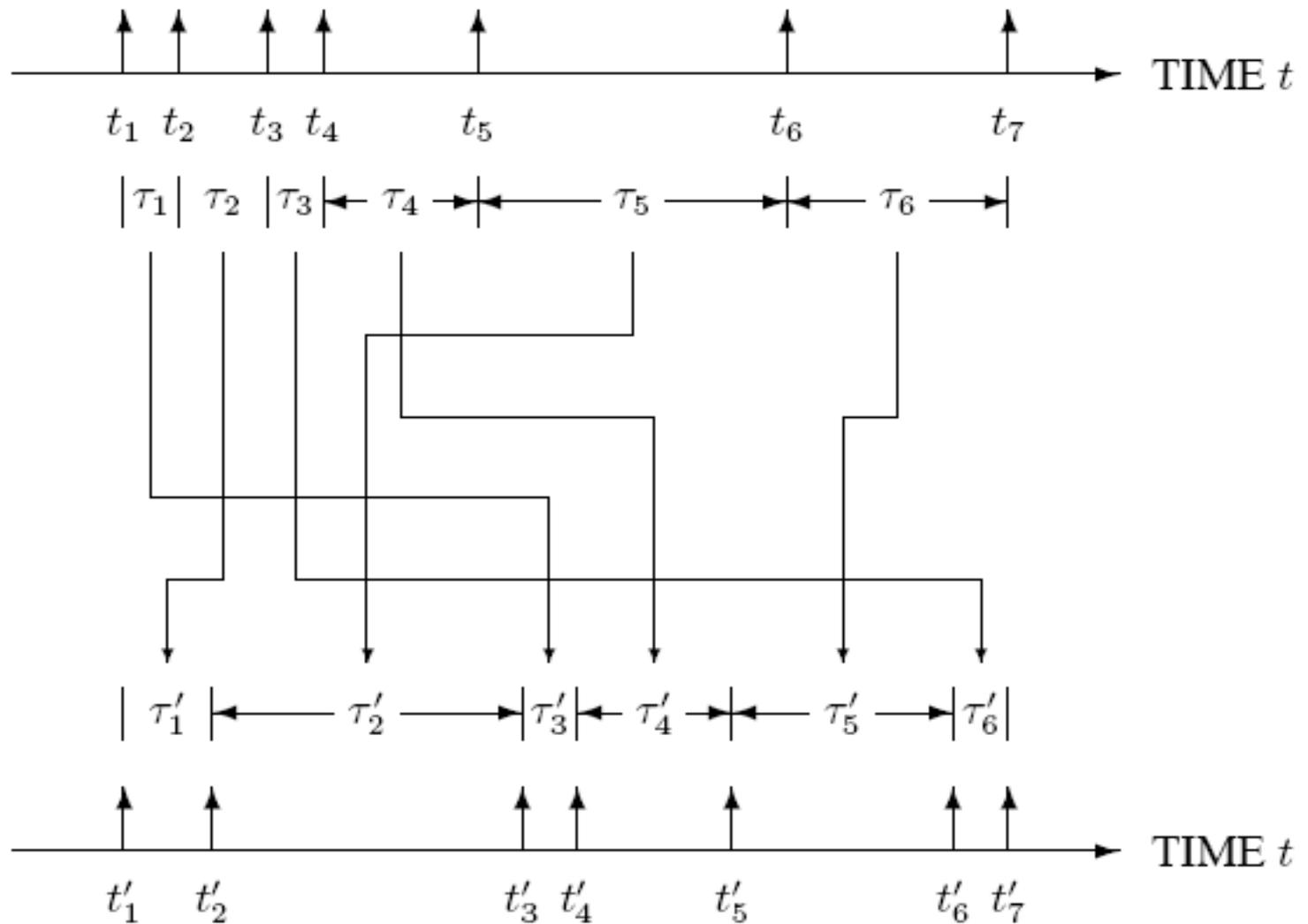




SURROGATE DATA ANALYSIS

SHUFFLING

a) ORIGINAL POINT PROCESS REALIZATION $dN_1(t)$



b) SHUFFLED POINT PROCESS REALIZATION $dN_R(t)$

CONGESTIVE HEART FAILURE

INABILITY OF HEART TO INCREASE CARDIAC
OUTPUT IN PROPORTION TO METABOLIC DEMANDS

Symptom complex:

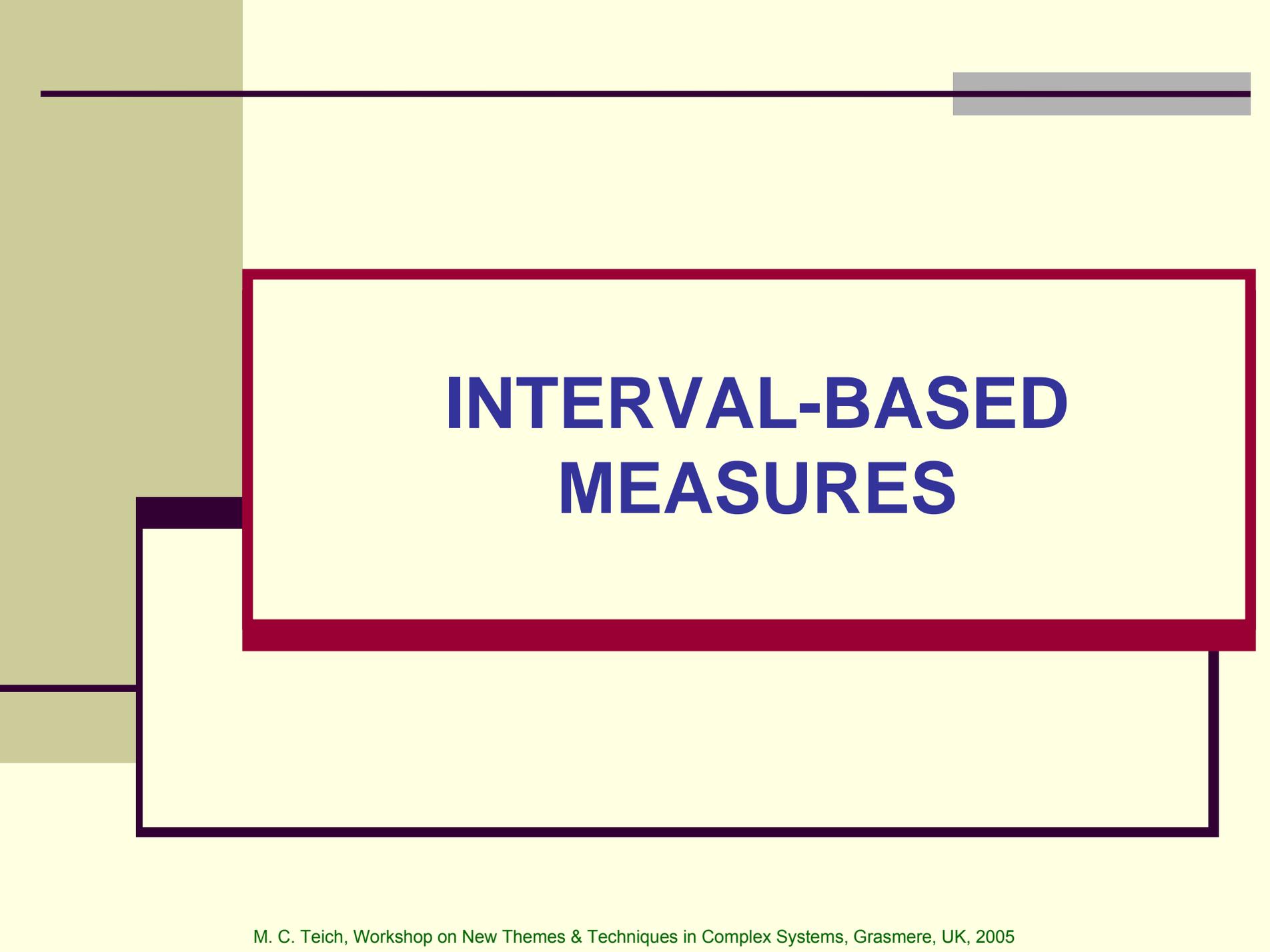
Many different presentations and etiologies

Typical symptoms:

- Shortness of breath
- Swelling in legs
- General fatigue and weakness

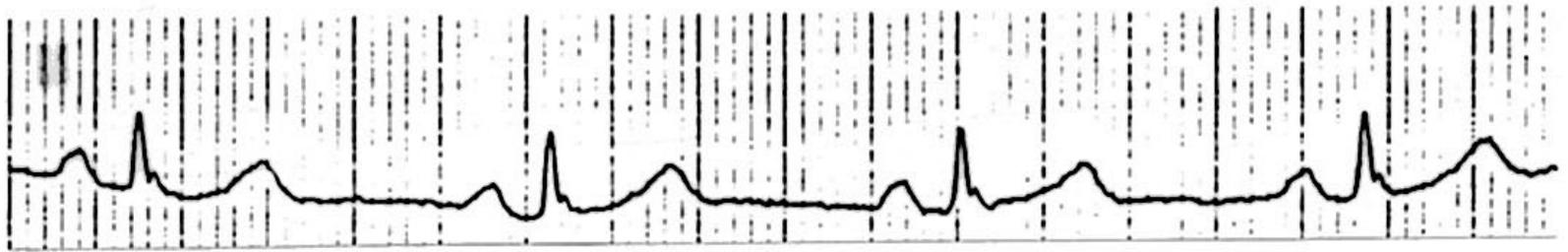
➤ Clinical diagnostics:

- Ascultate heart
- Carotid pulse
- Electrocardiogram
- Chest radiograph

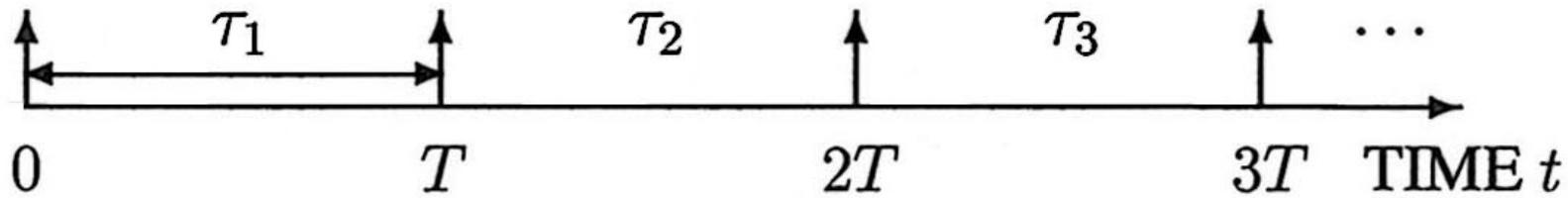


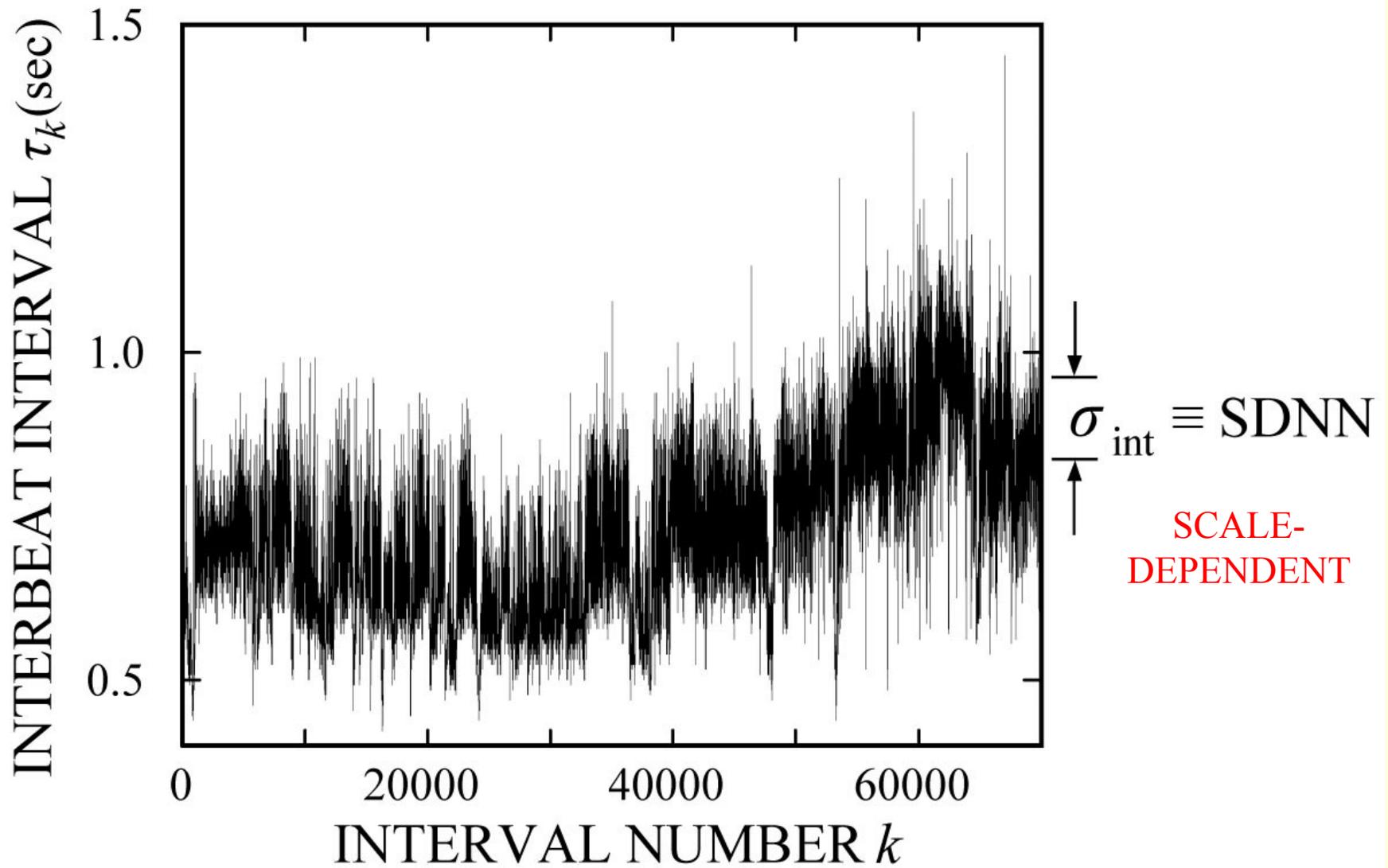
INTERVAL-BASED MEASURES

a)

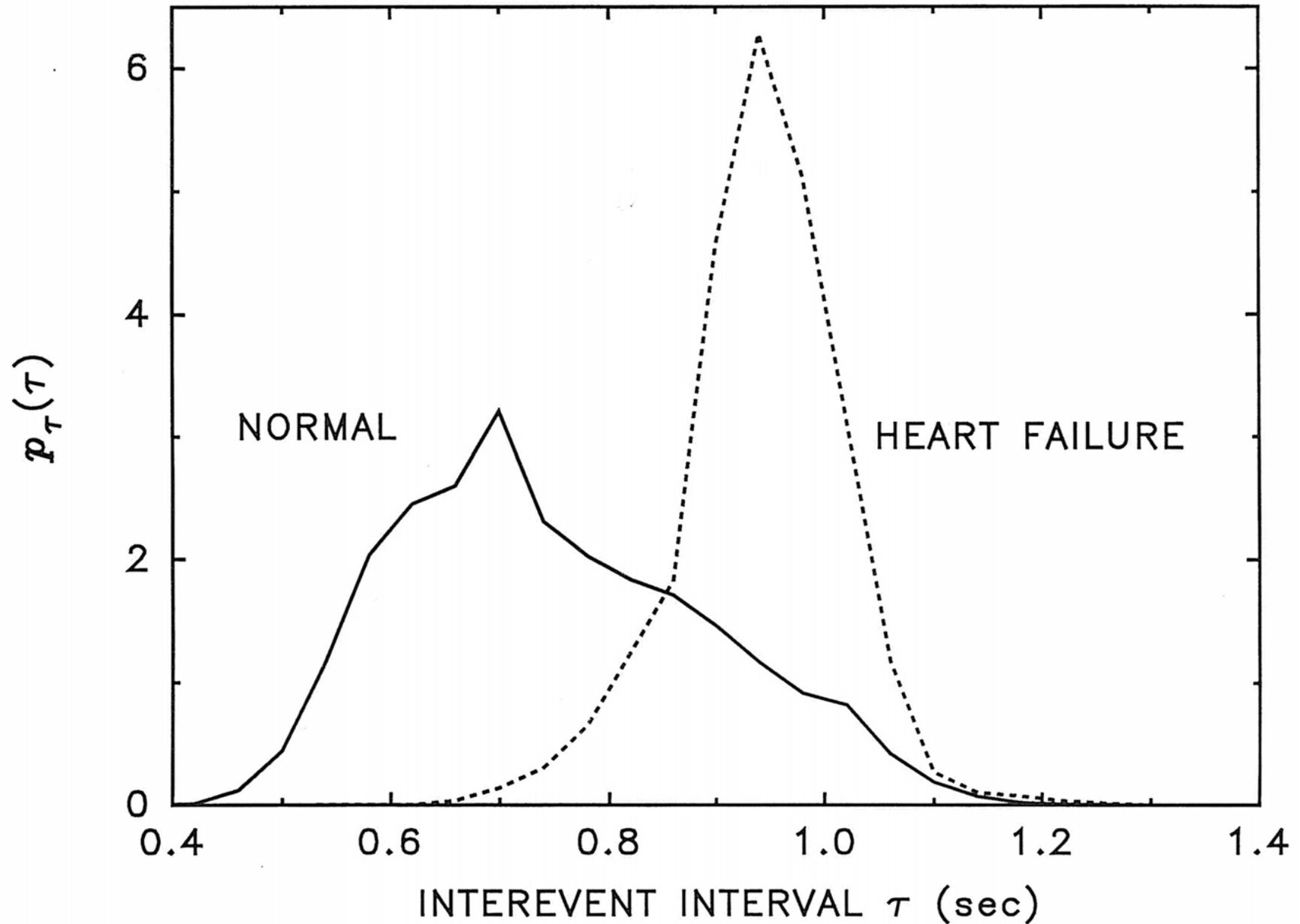


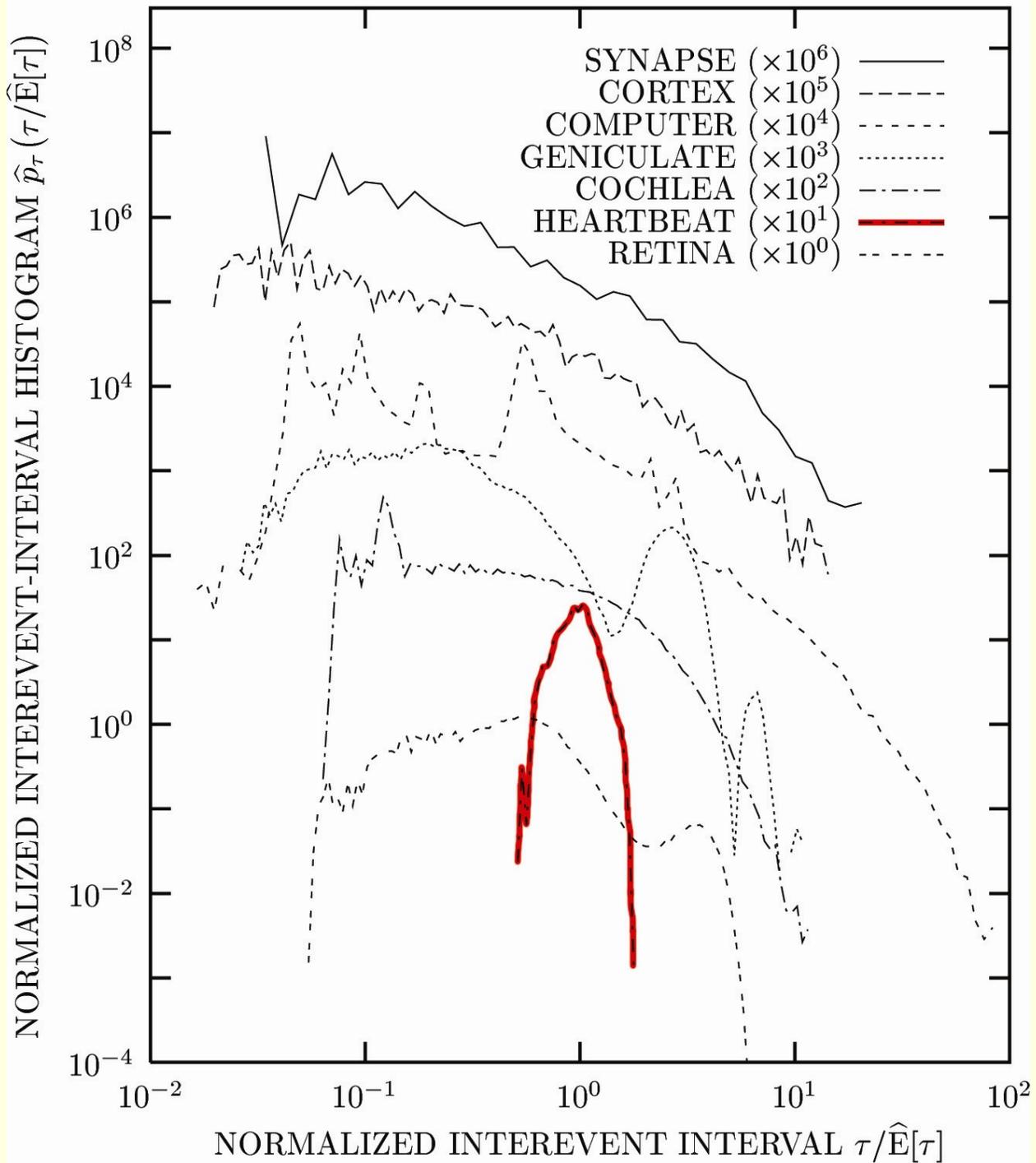
b)



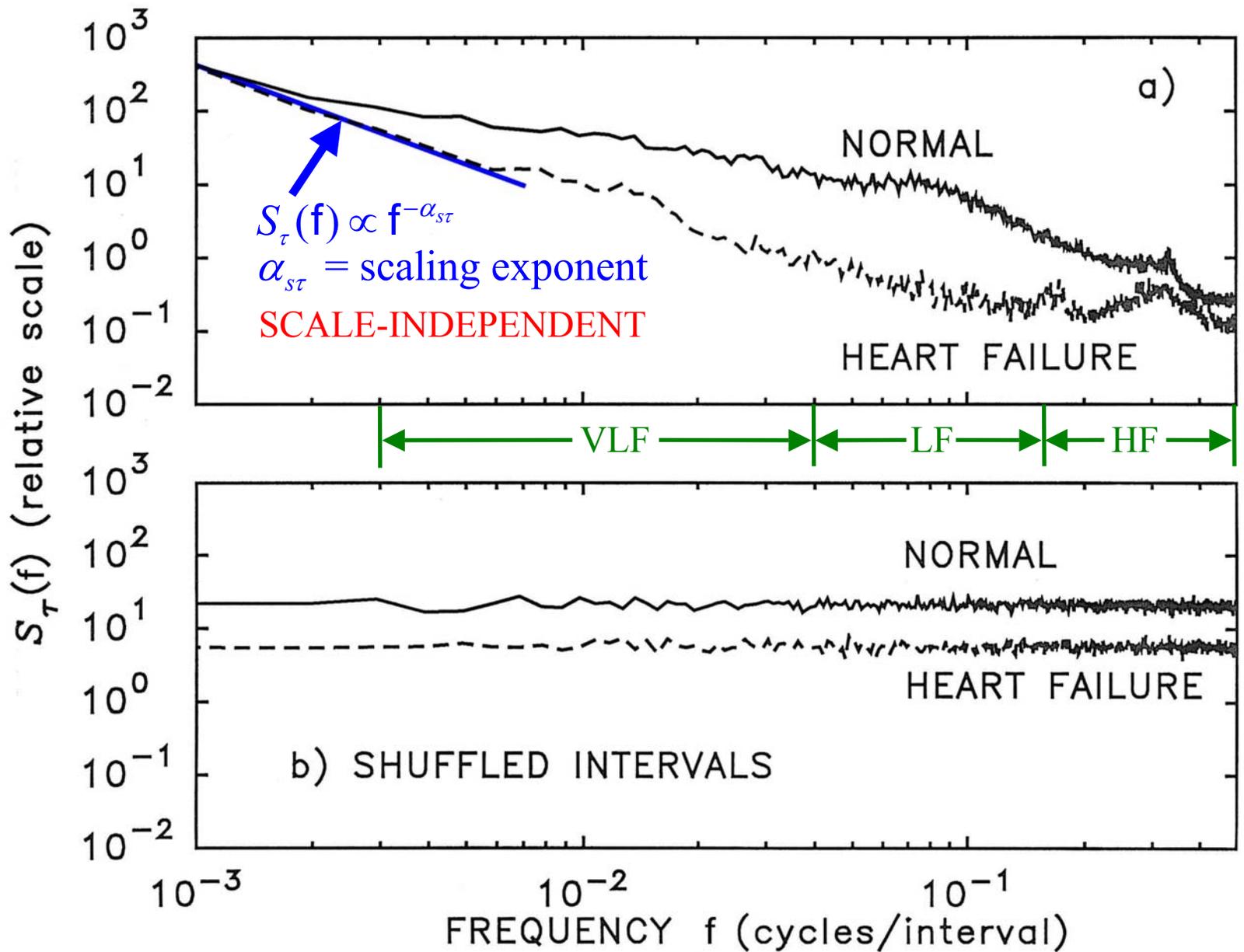


INTEREVENT-INTERVAL HISTOGRAM

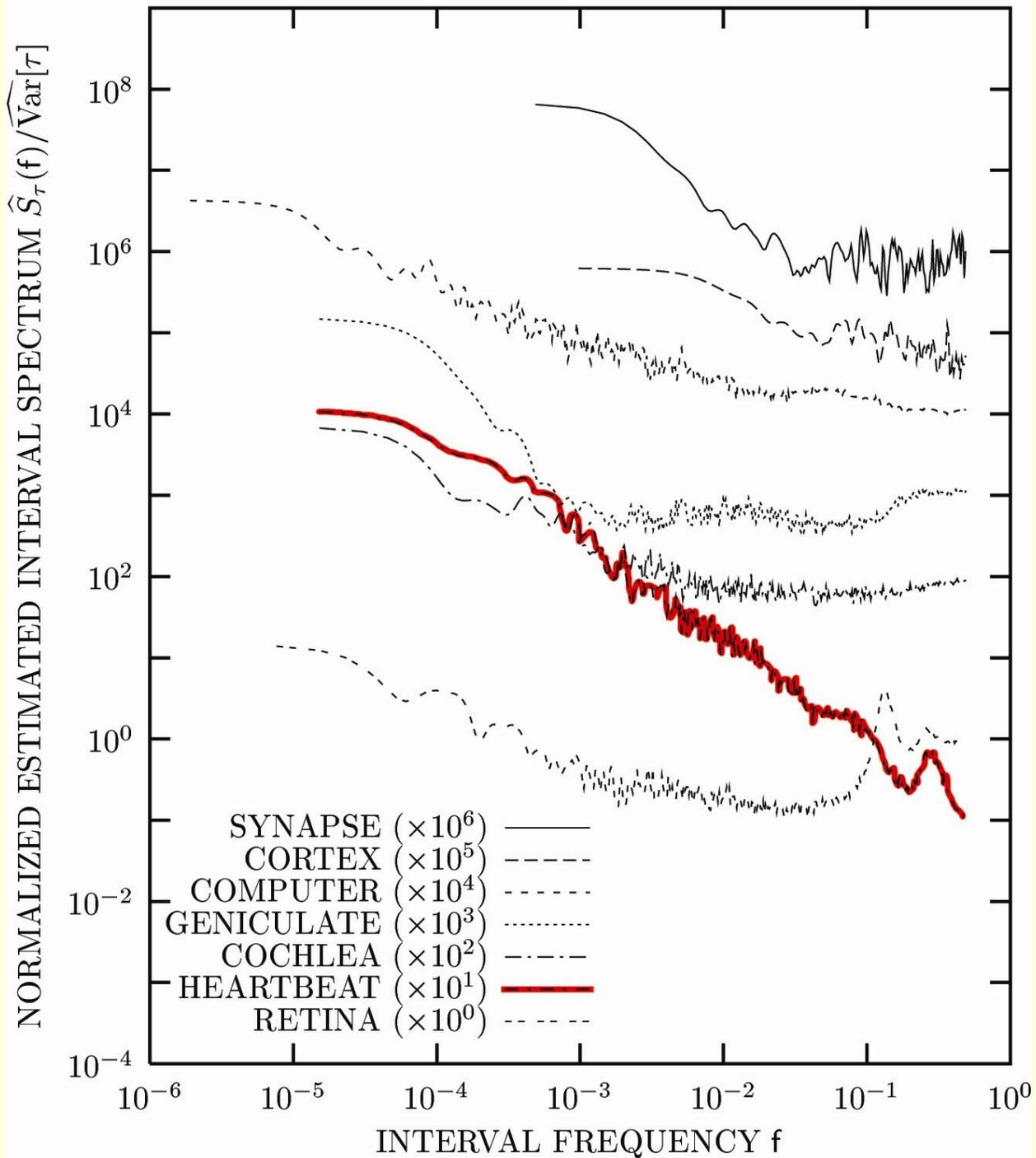




INTERVAL-BASED SPECTRUM



After Turcott & Teich, *Ann. Biomed. Eng.* **24**, 269-293 (1996).



INTERVAL-BASED TIME-SCALE ANALYSIS

DISCRETE WAVELET TRANSFORM

EXAMINES ALL SCALES

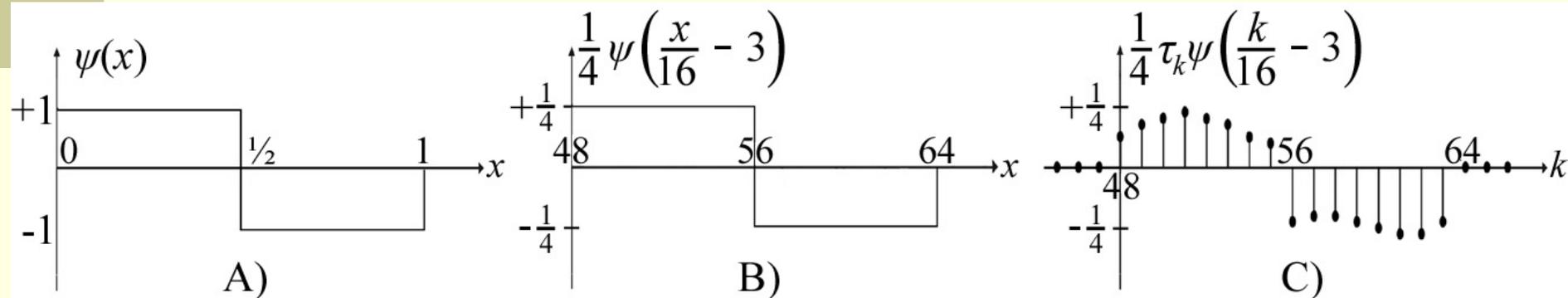
MITIGATES AGAINST NONSTATIONARITIES

m = scale index; 2^m = scale

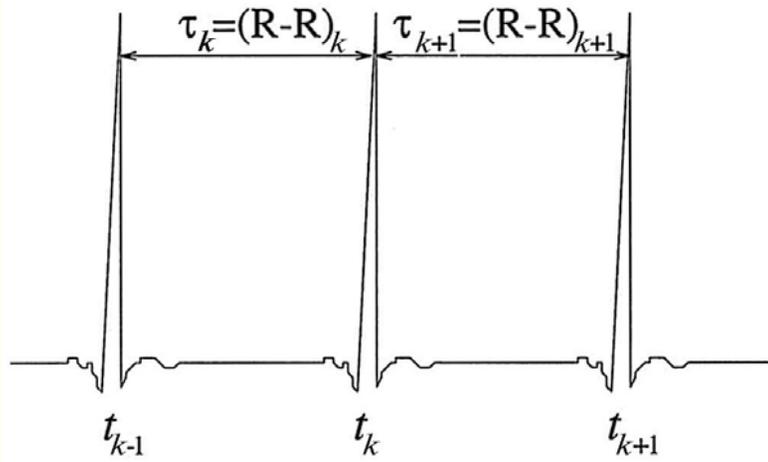
$$W_{\psi, \tau}^{\text{wav}}(m, i) = \sum_k 2^{-m/2} \psi(2^{-m} k - i) \tau_k$$

$$\sigma_{\text{wav}}^2 \equiv \text{Var} \left[W_{\psi, \tau}^{\text{wav}}(m, i) \right] = 2^{-m} \sum_k \sum_l \psi(2^{-m} k - i) \psi(2^{-m} l - i) R_{\tau}(l - k)$$

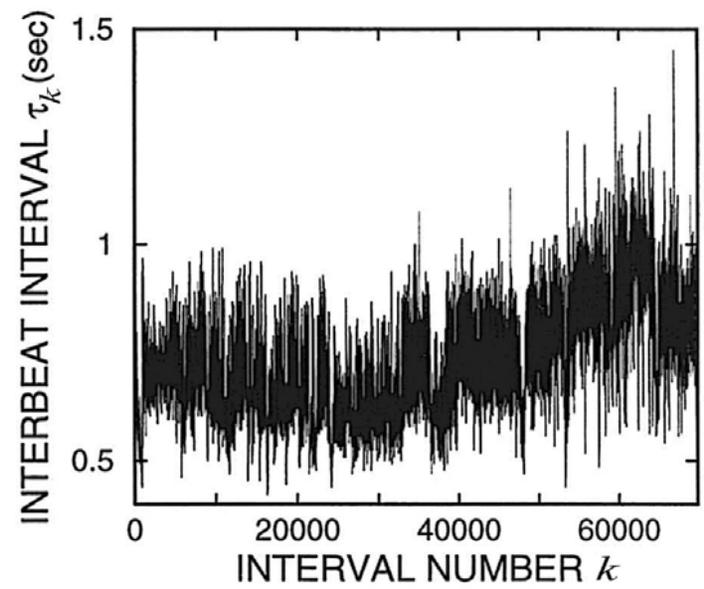
$$A_{\tau}(k) \equiv \text{Var} \left[W_{\psi, \tau}^{\text{wav}}(m, i) \right] / \text{Var} [\tau]$$



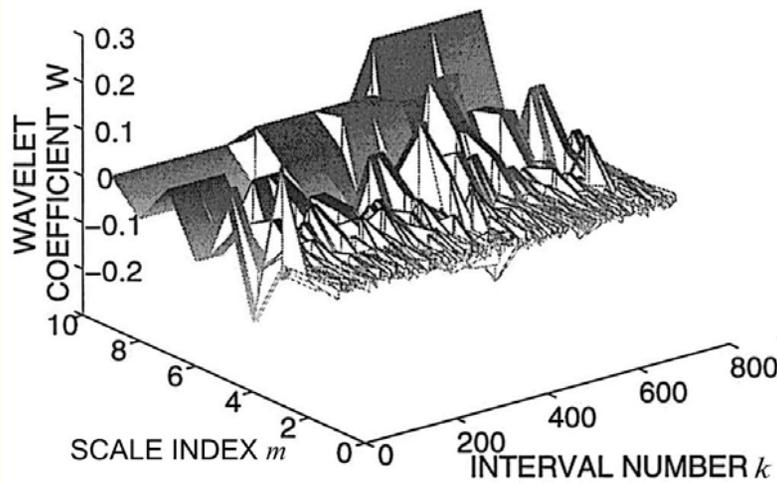
NORMAL



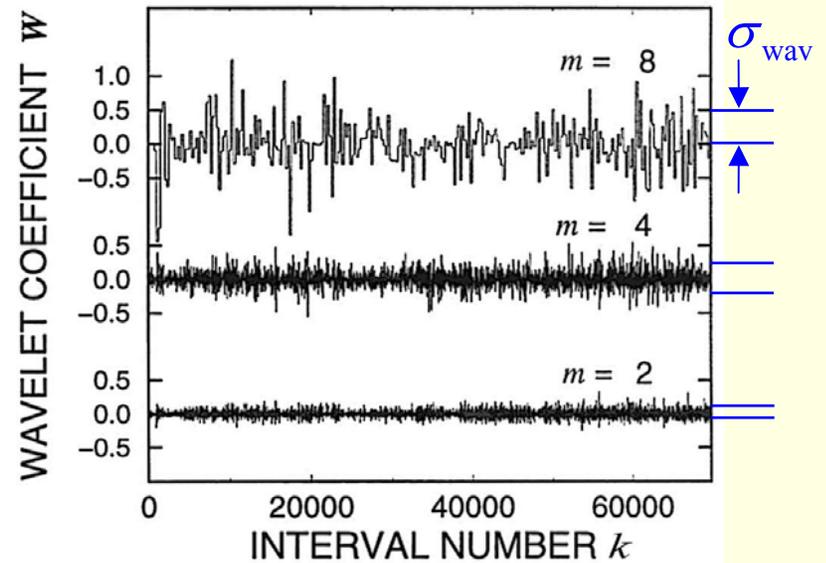
a)



b)

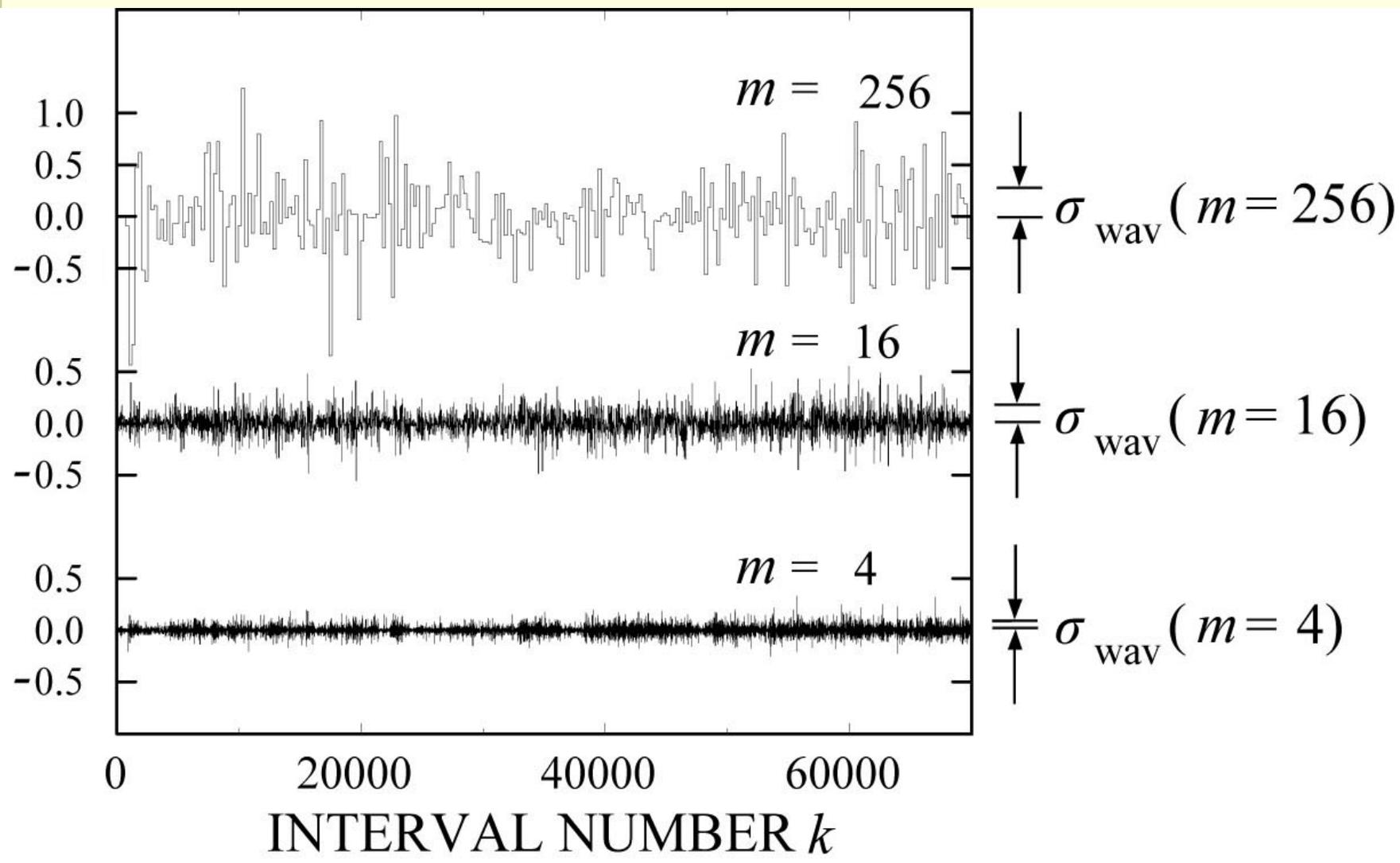


c)

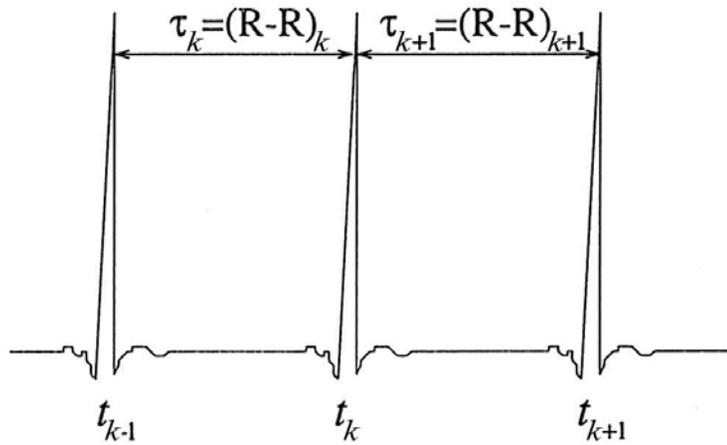


d)

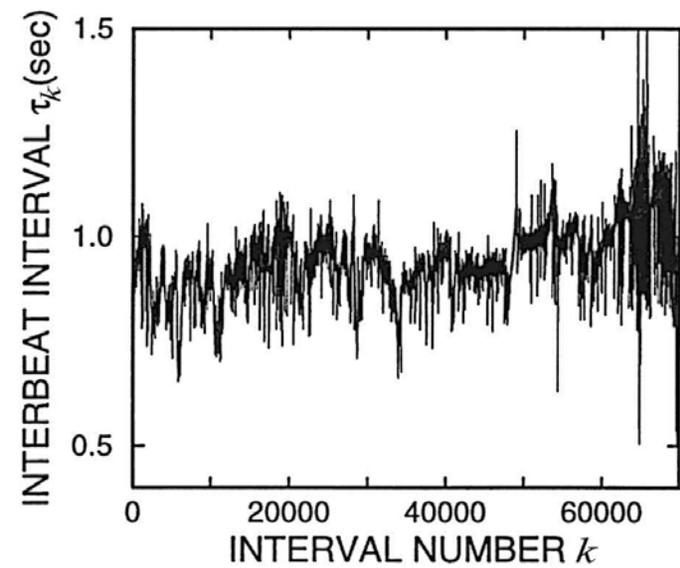
WAVELET COEFFICIENT W



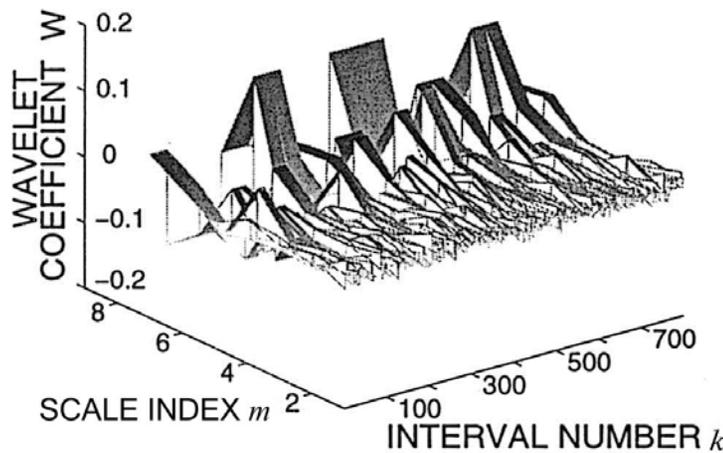
HEART-FAILURE



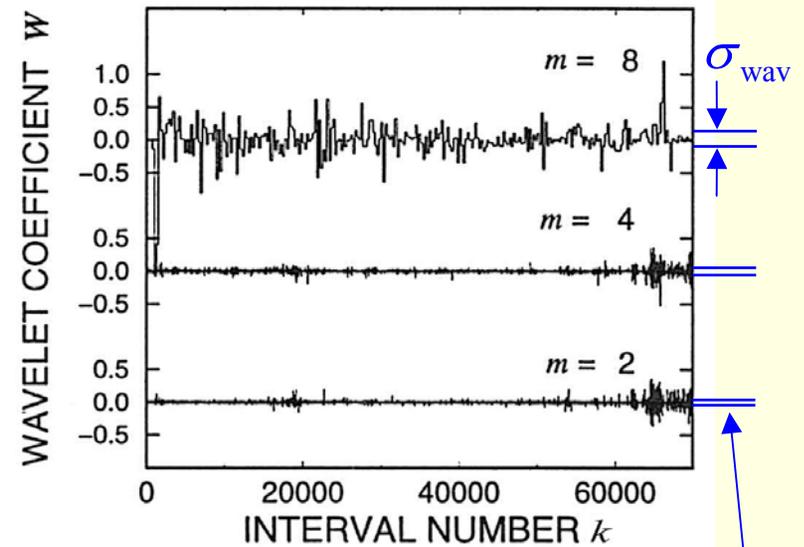
a)



b)



c)



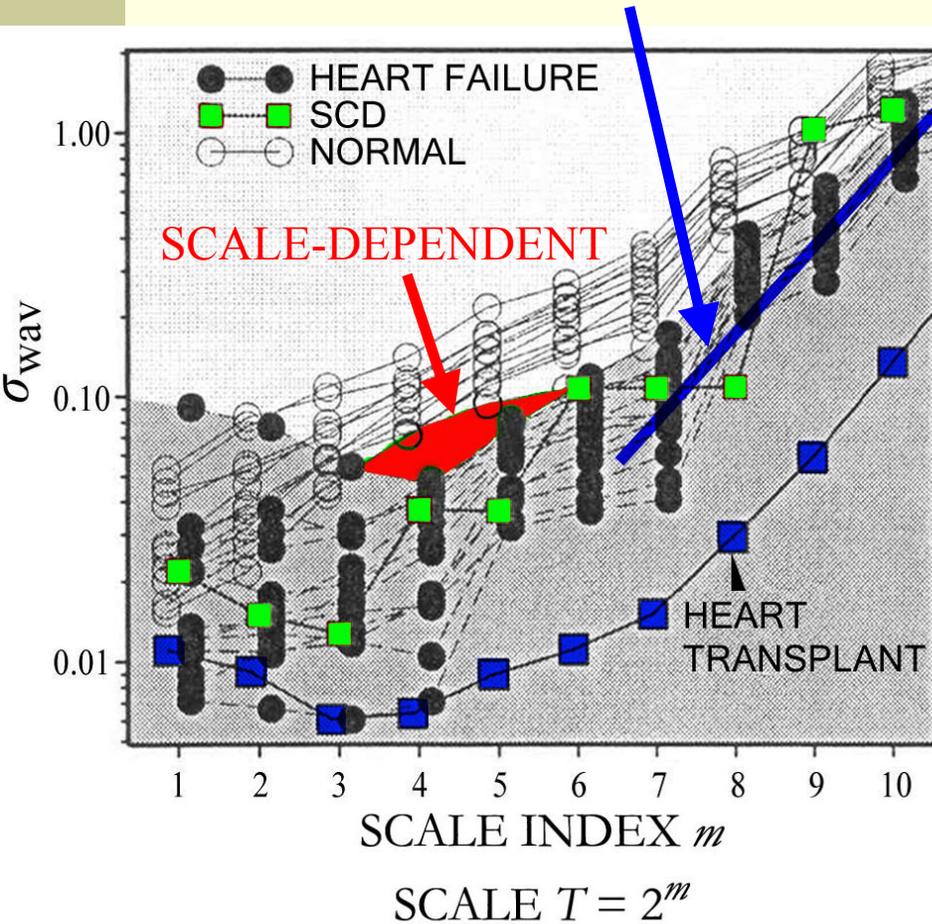
d)

**SMALLER VALUES
OF σ_{wav} THAN FOR
NORMAL SUBJECTS**

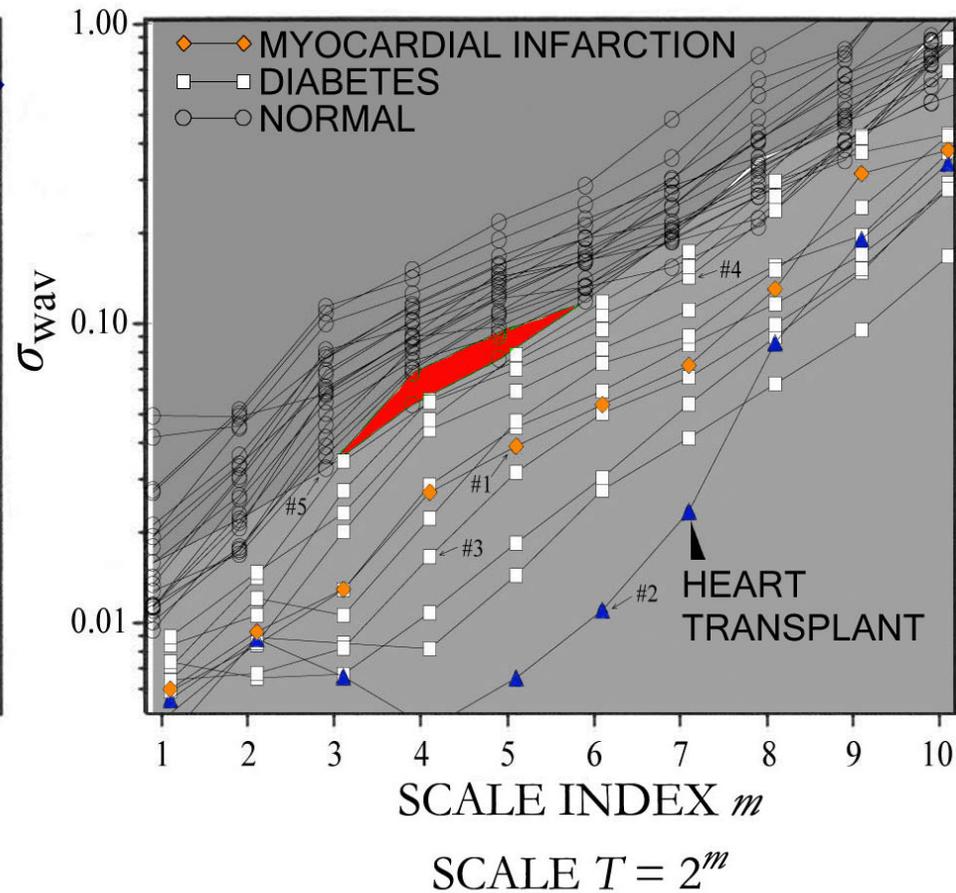
$$\sigma_{\text{wav}}^2(T) \propto T^{\alpha_{A\tau}}$$

$\alpha_{A\tau}$ = scaling exponent

SCALE-INDEPENDENT



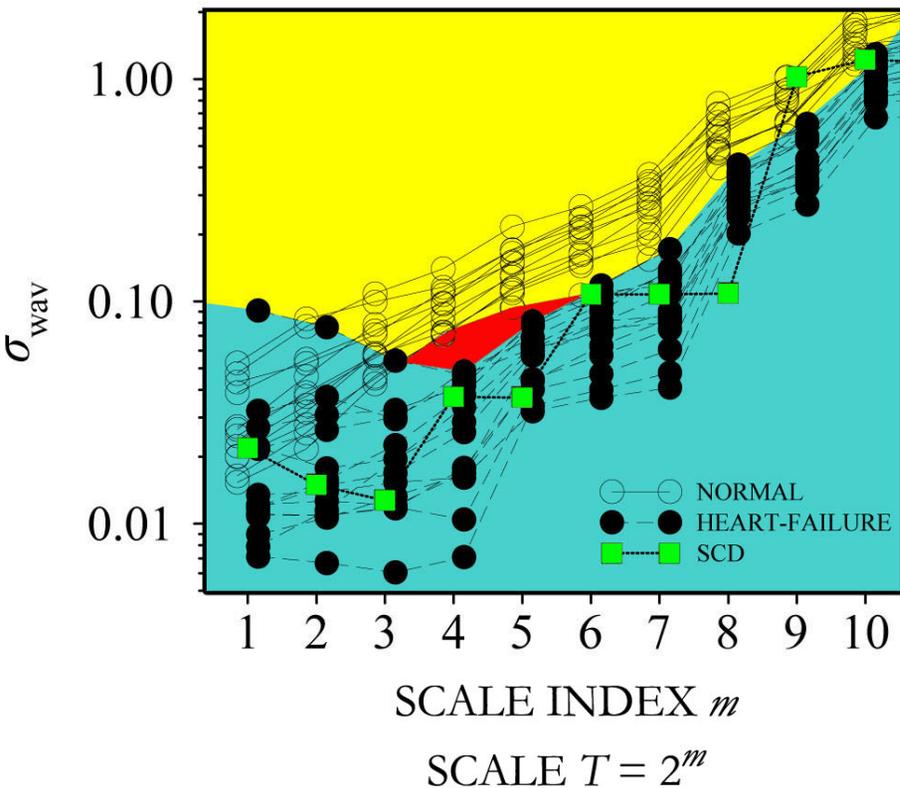
After Teich, *Proc. Int. Conf. IEEE Eng. Med. Biol. Soc.* **20**, 1136-1141 (1998).



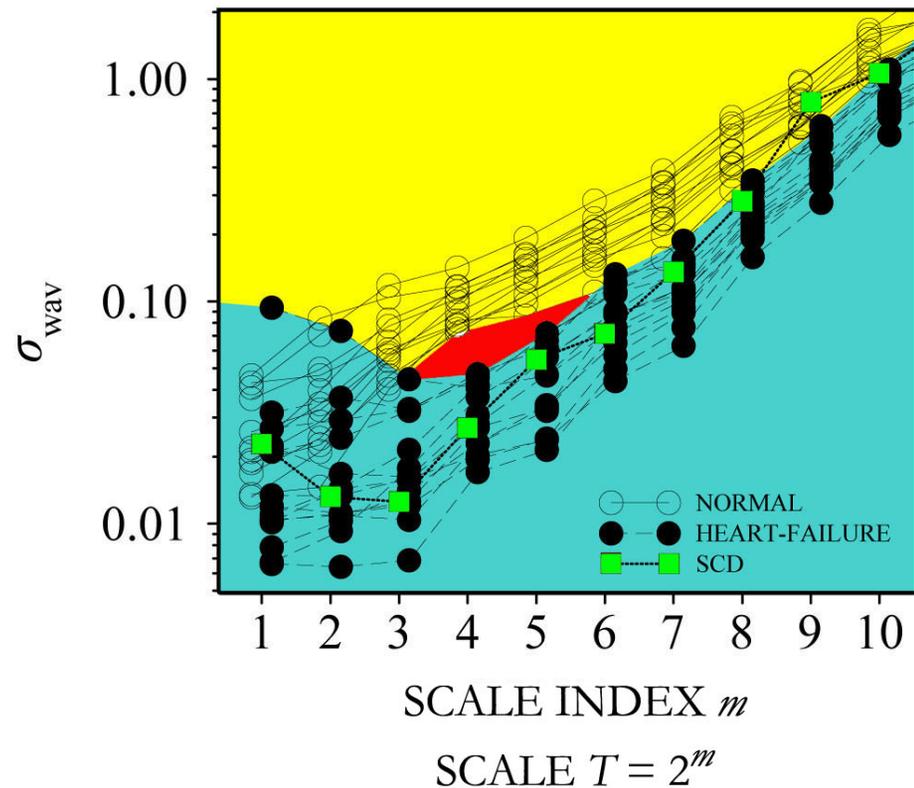
After Ashkenazy *et al.*, *Fractals* **6**, 197-203 (1998).

ROBUSTNESS WITH FORM OF WAVELET

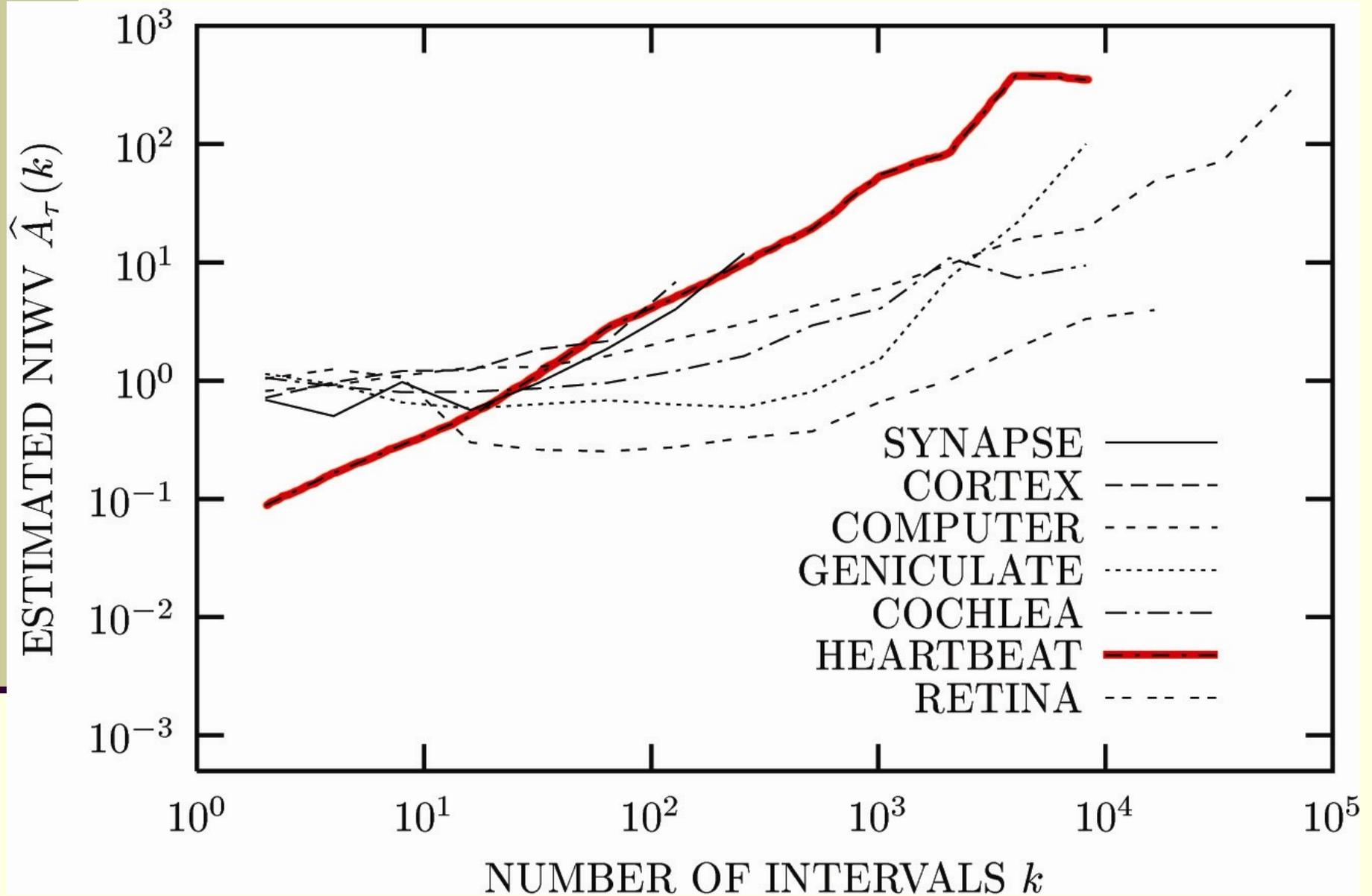
Haar wavelet

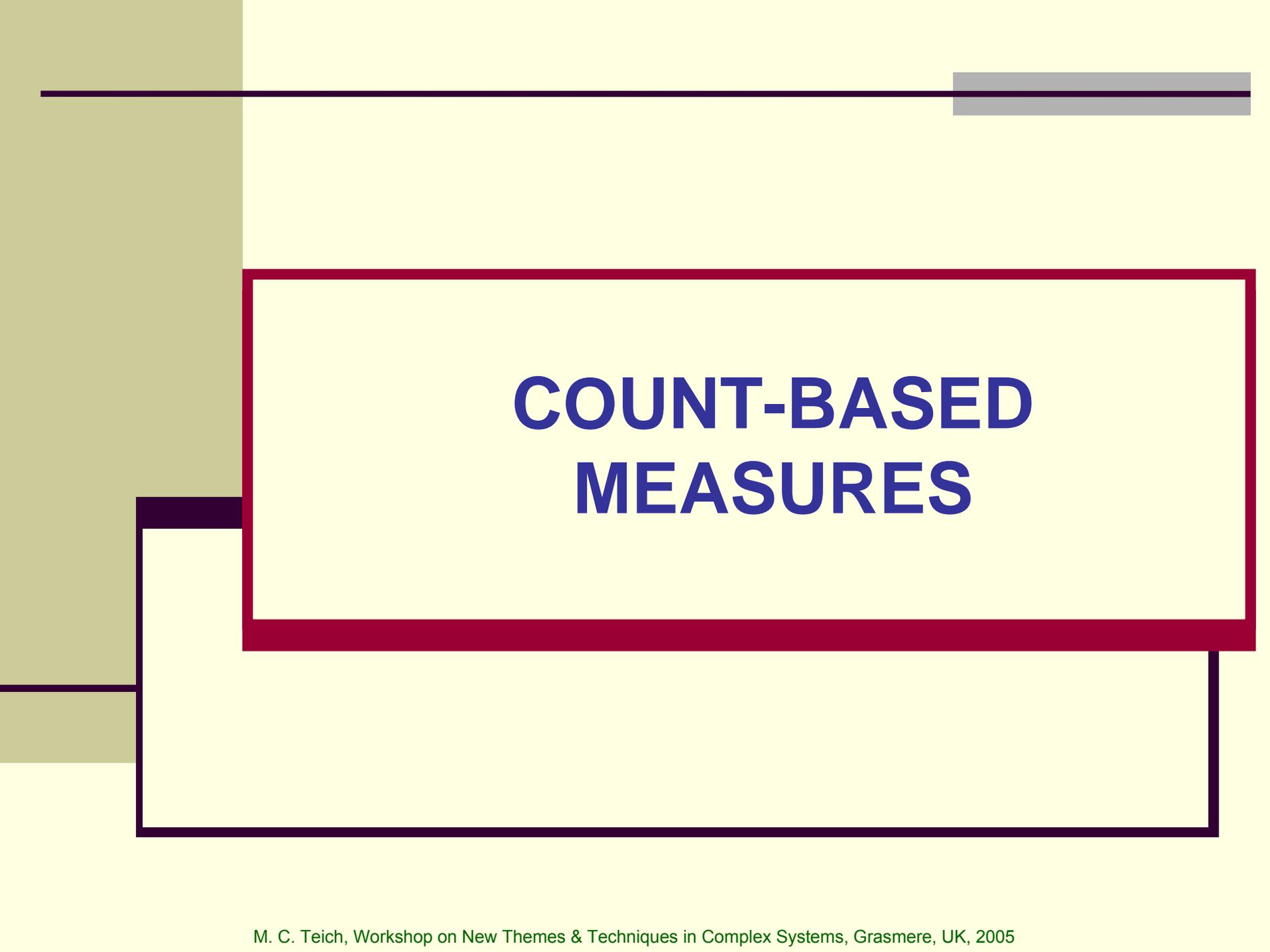


Daubechies 10-tap wavelet



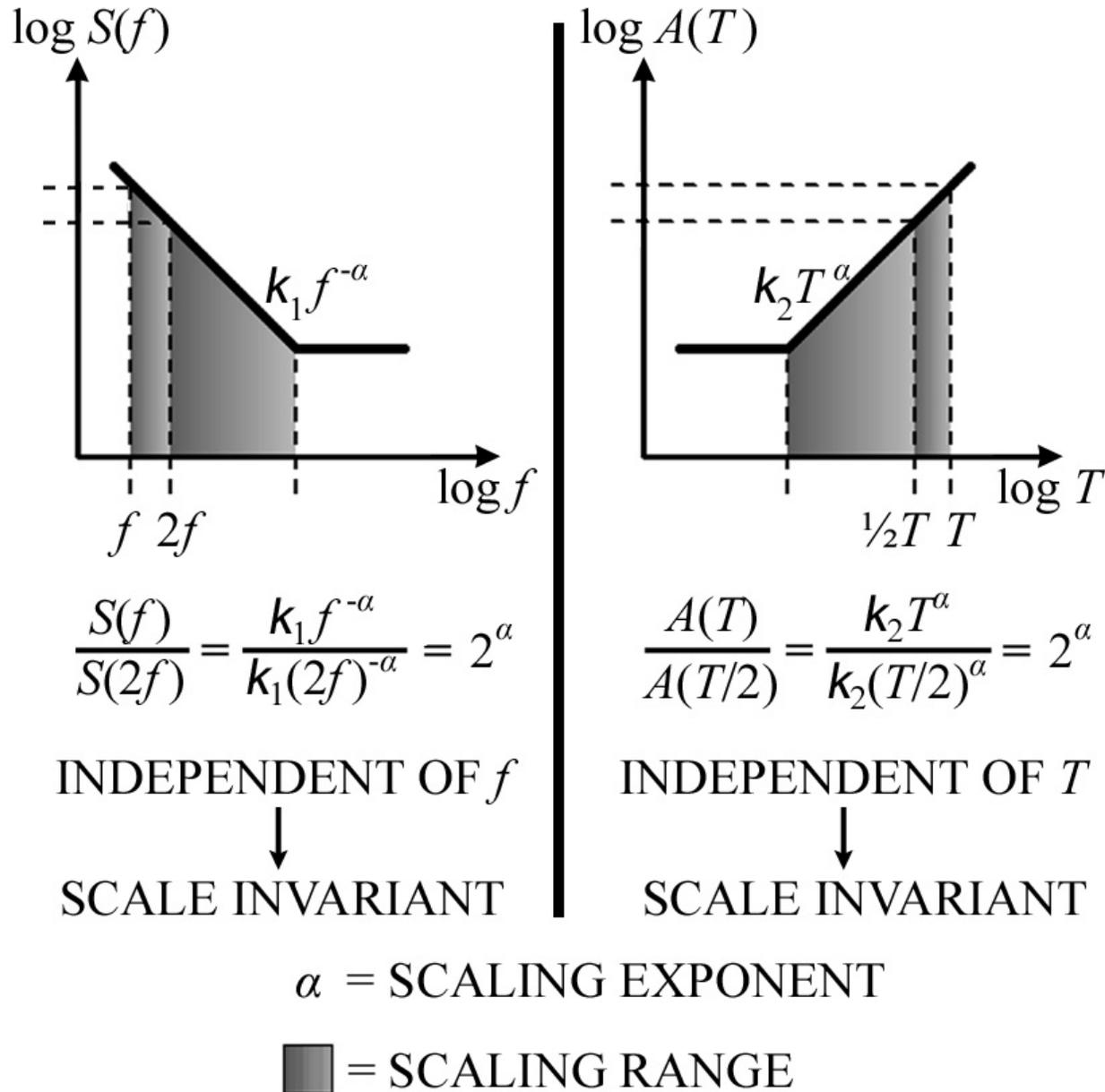
After Thurner, Feurstein & Teich, *Phys. Rev. Letters* **80**, 1544-1547 (1998).





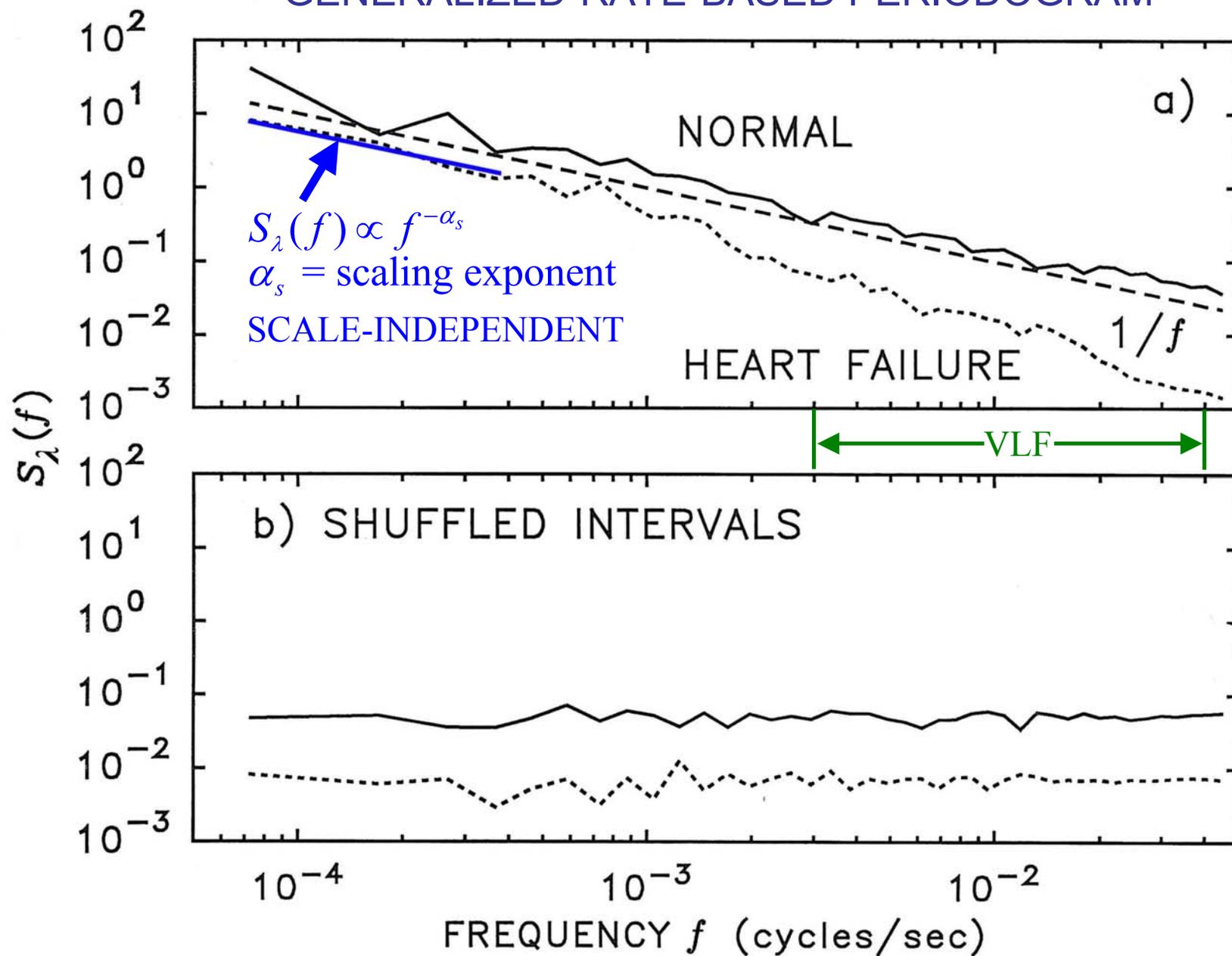
COUNT-BASED MEASURES

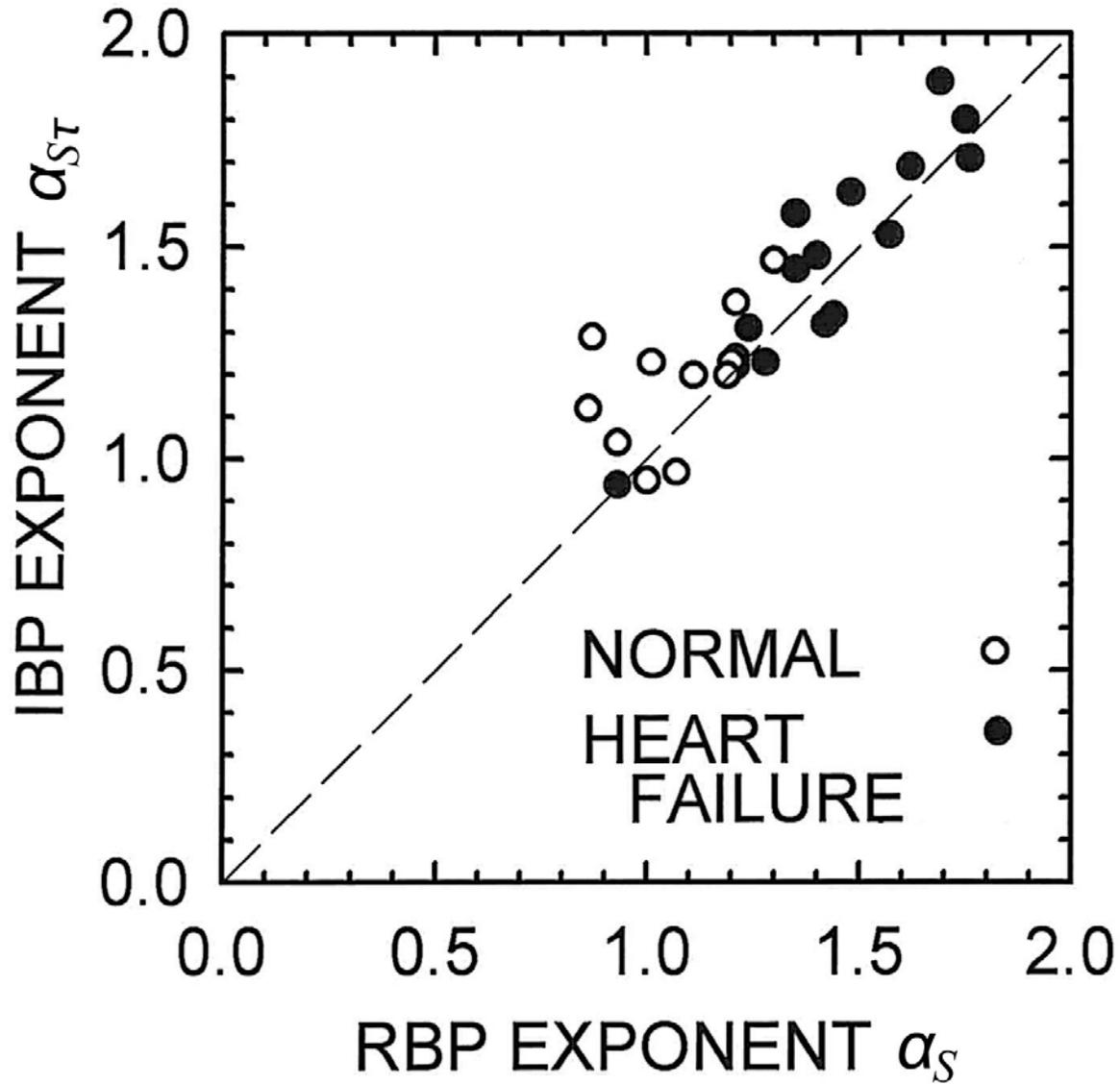
POWER-LAW SCALE INVARIANCE

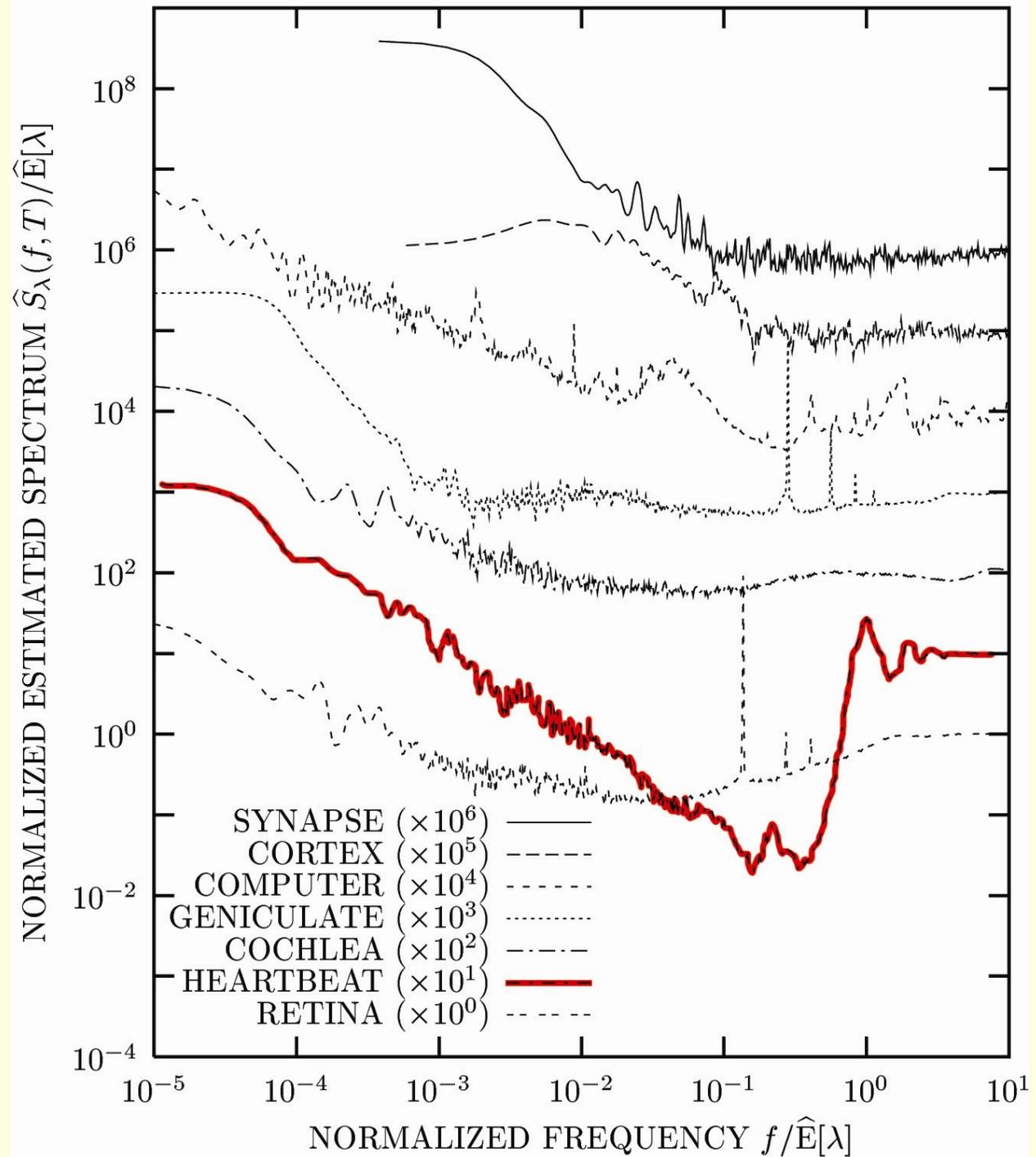


RATE-BASED SPECTRUM

GENERALIZED-RATE-BASED PERIODOGRAM

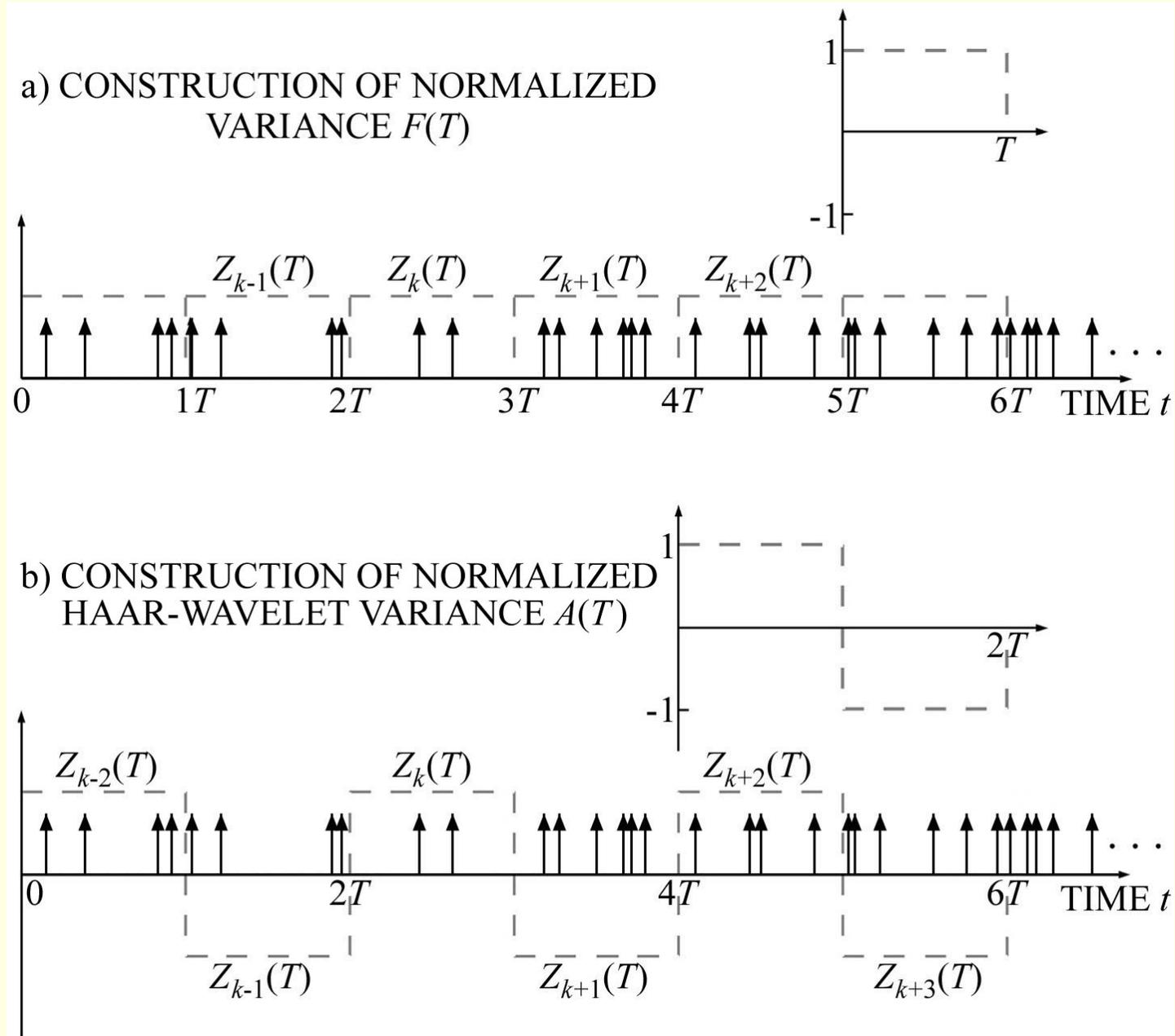




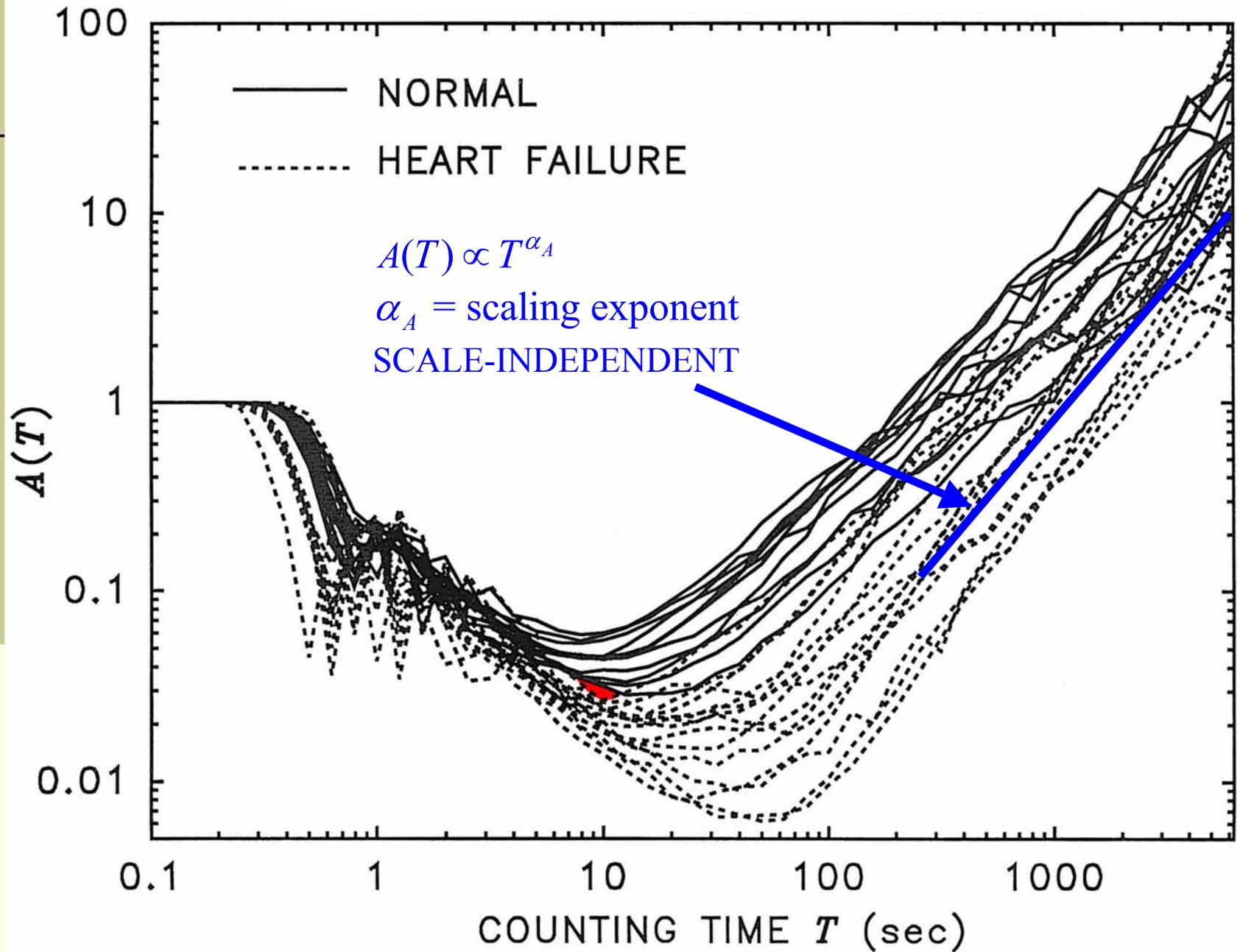


COUNT-BASED TIME-SCALE ANALYSIS

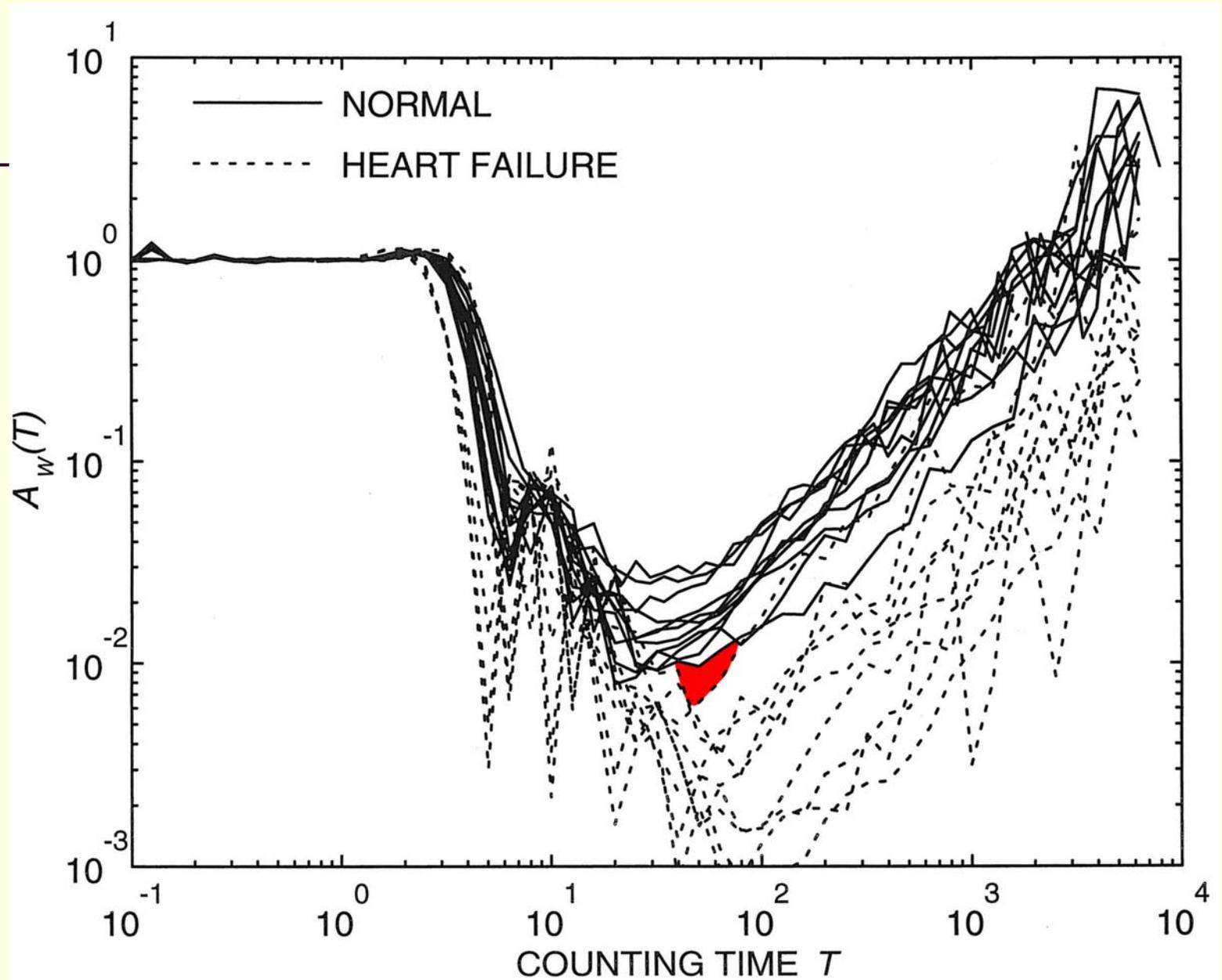
DISCRETE WAVELET TRANSFORM



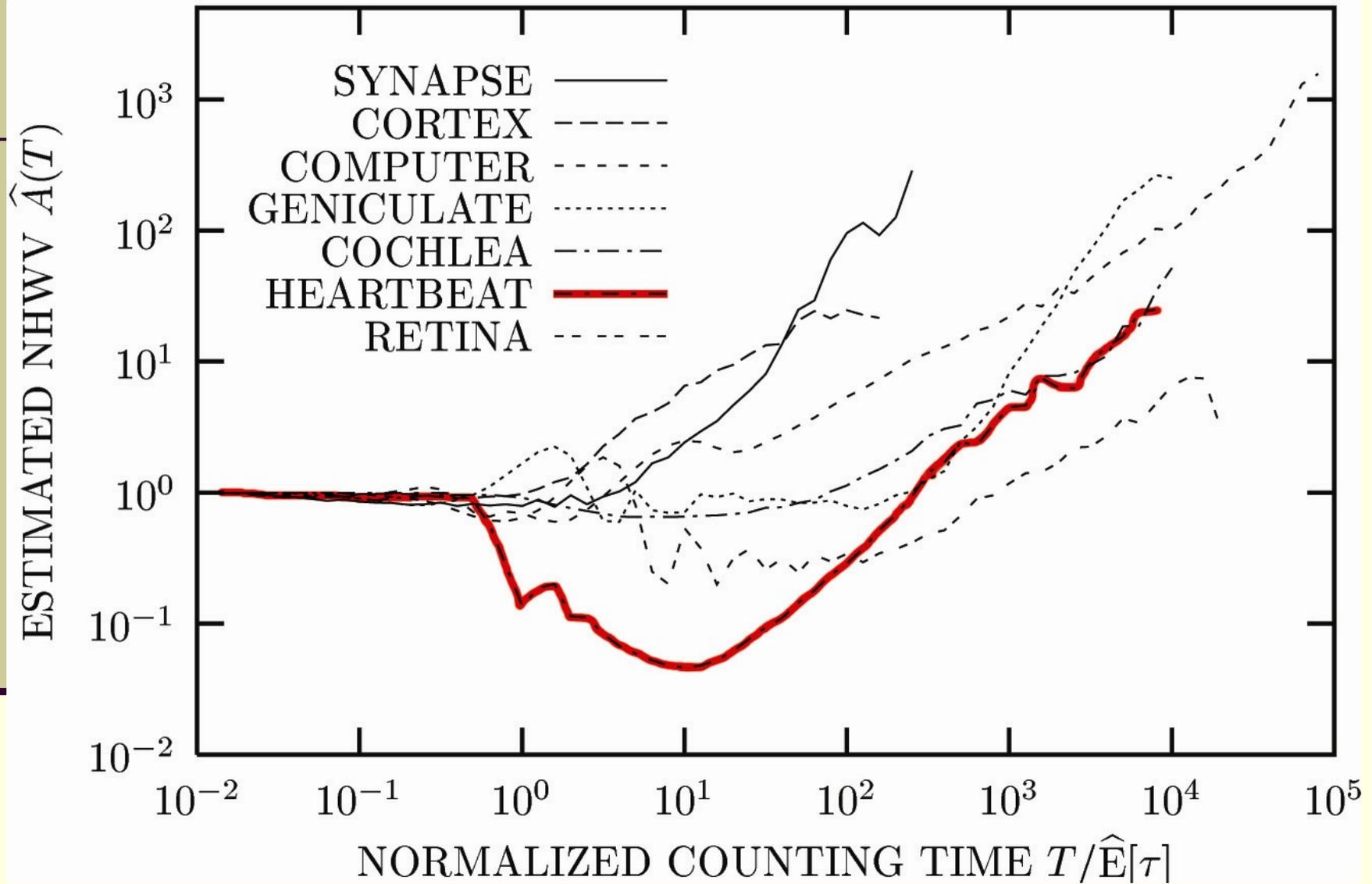
NORMALIZED HAAR-WAVELET VARIANCE

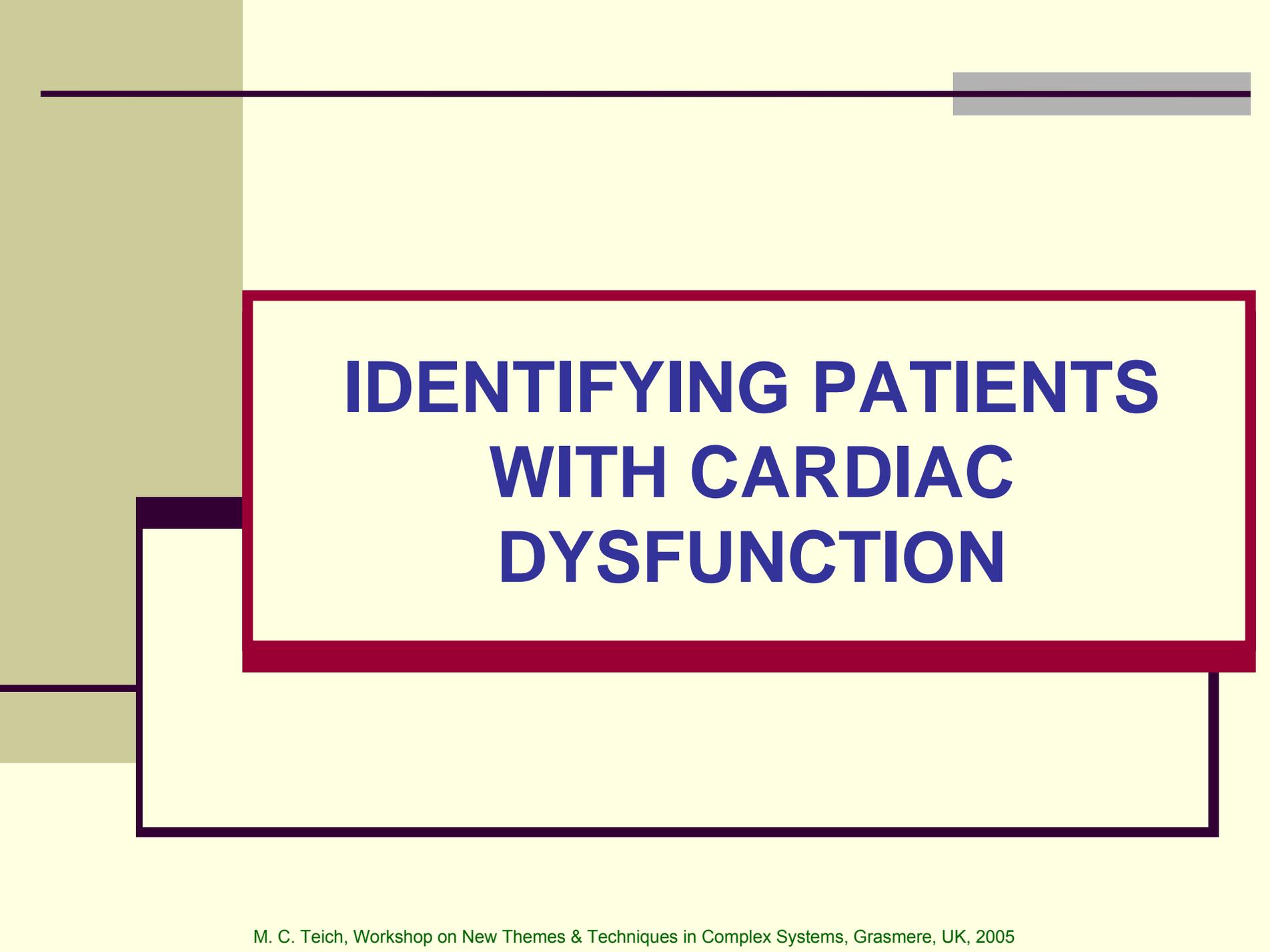


NORMALIZED DAUBECHIES-WAVELET VARIANCE

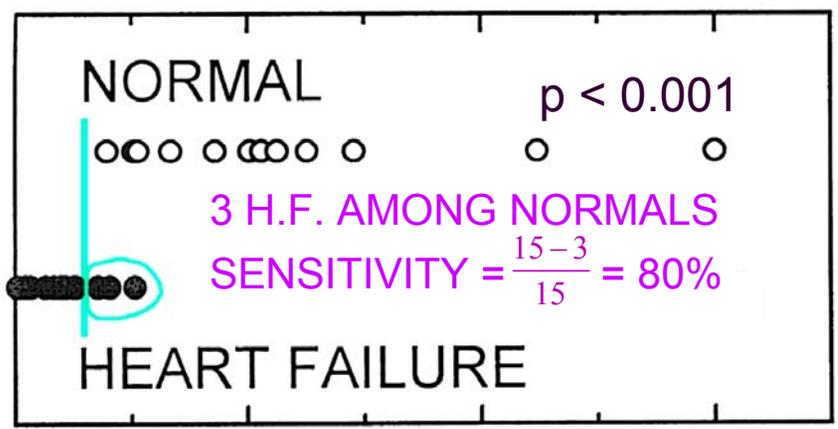


After Teich, *Proc. 18th Intern. Conf. IEEE Eng. Med. Biol. Soc.* **18**, 1128-1129 (1996).



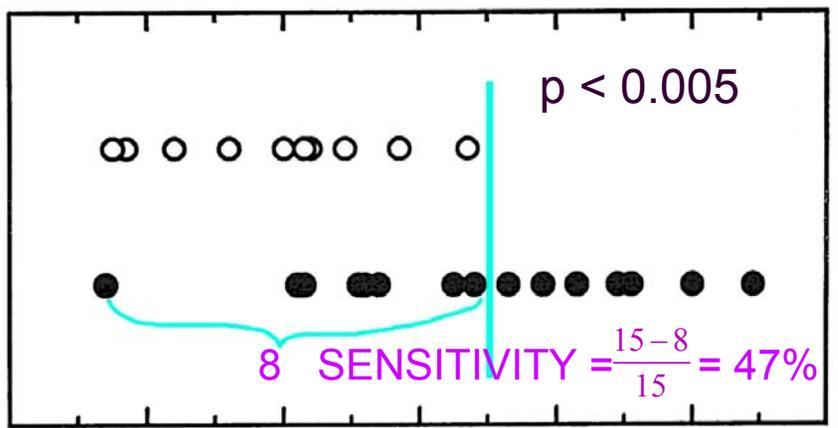


IDENTIFYING PATIENTS WITH CARDIAC DYSFUNCTION



0.00 0.02 0.04 0.06
 $\text{Var}(\tau) \text{ (sec}^2\text{)}$

SCALE-DEPENDENT



0.8 1.0 1.2 1.4 1.6 1.8 2.0
 $\text{EXPONENT } \alpha_{S\tau}$

SCALE-INDEPENDENT

MEASURES OF STATISTICAL SIGNIFICANCE

- p VALUE, d', AND VARIANTS
 (rely on Gaussian assumption)

- SENSITIVITY/SPECIFICITY
 MEASURES OF CLINICAL SIGNIFICANCE
 (distribution free)

SENSITIVITY \equiv proportion of heart-failure patients that are properly identified

e.g., Hypothesis that all normal patients are so identified \equiv 100% SPECIFICITY

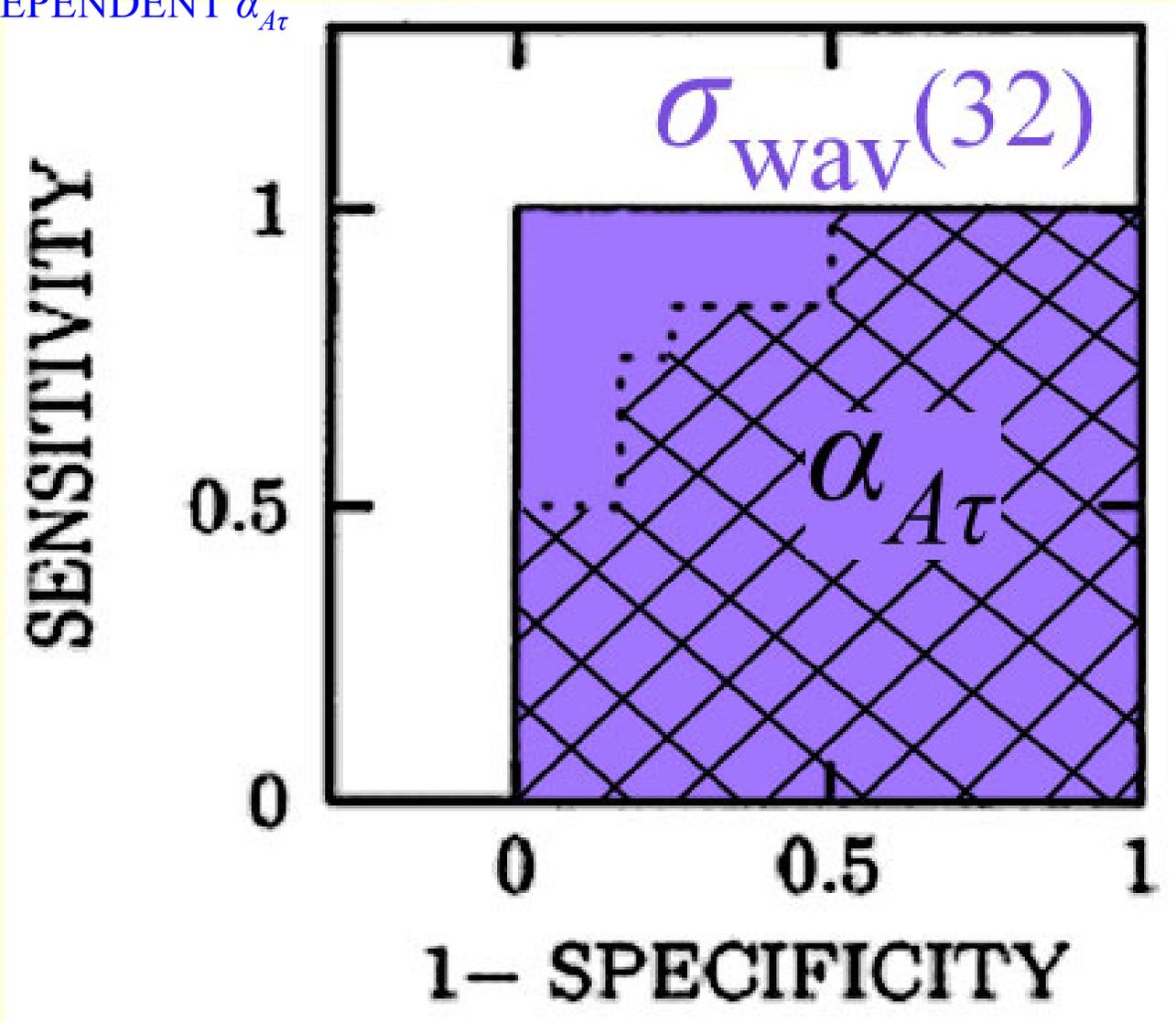
- ROC CURVES & AREA UNDER ROC

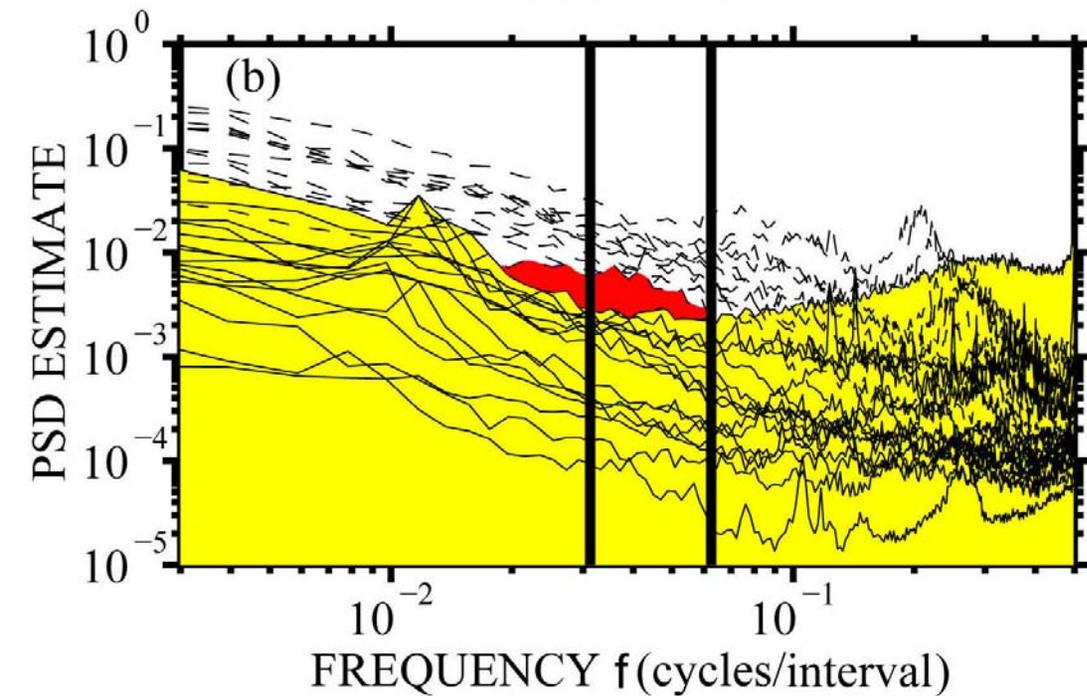
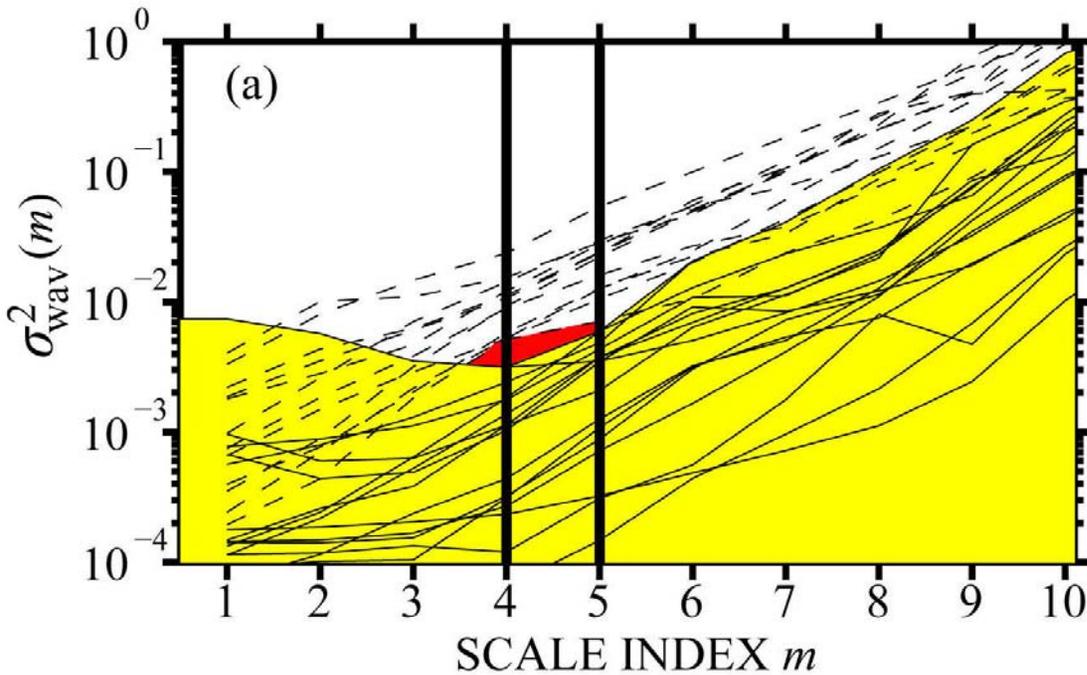
ROC CURVES & AREA UNDER ROC

SCALE-DEPENDENT σ_{wav} (32)

SCALE-INDEPENDENT $\alpha_{A\tau}$

HAAR WAVELET



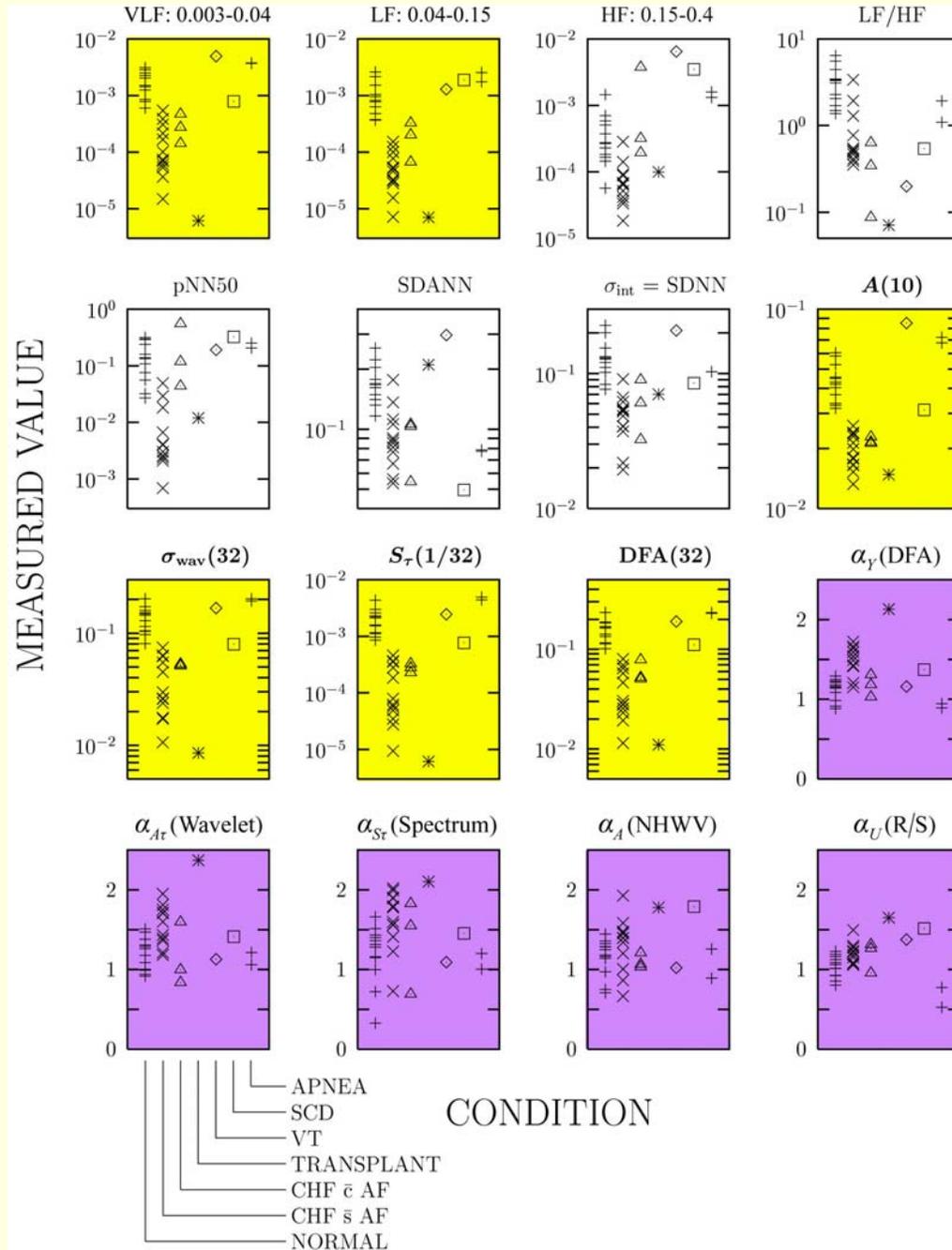


$$16 \leq 2^m \text{ (scale)} \leq 32$$

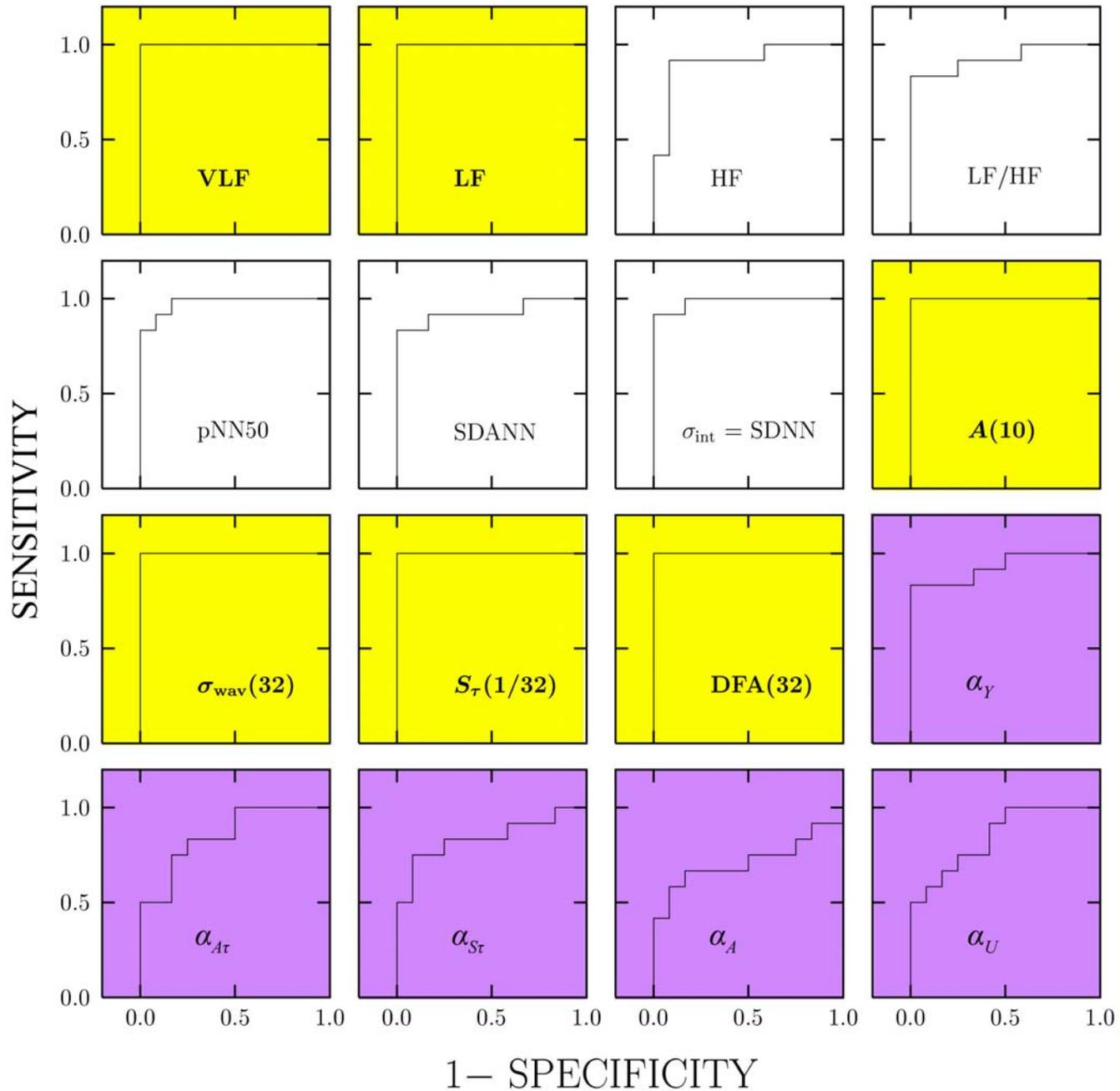
$$\frac{1}{32} < f \text{ (cycles/interval)} < \frac{1}{16}$$

After Heneghan, Lowen, & Teich
Proc. 1999 ICASSP (Phoenix, AZ)
paper SPTM-8.2.

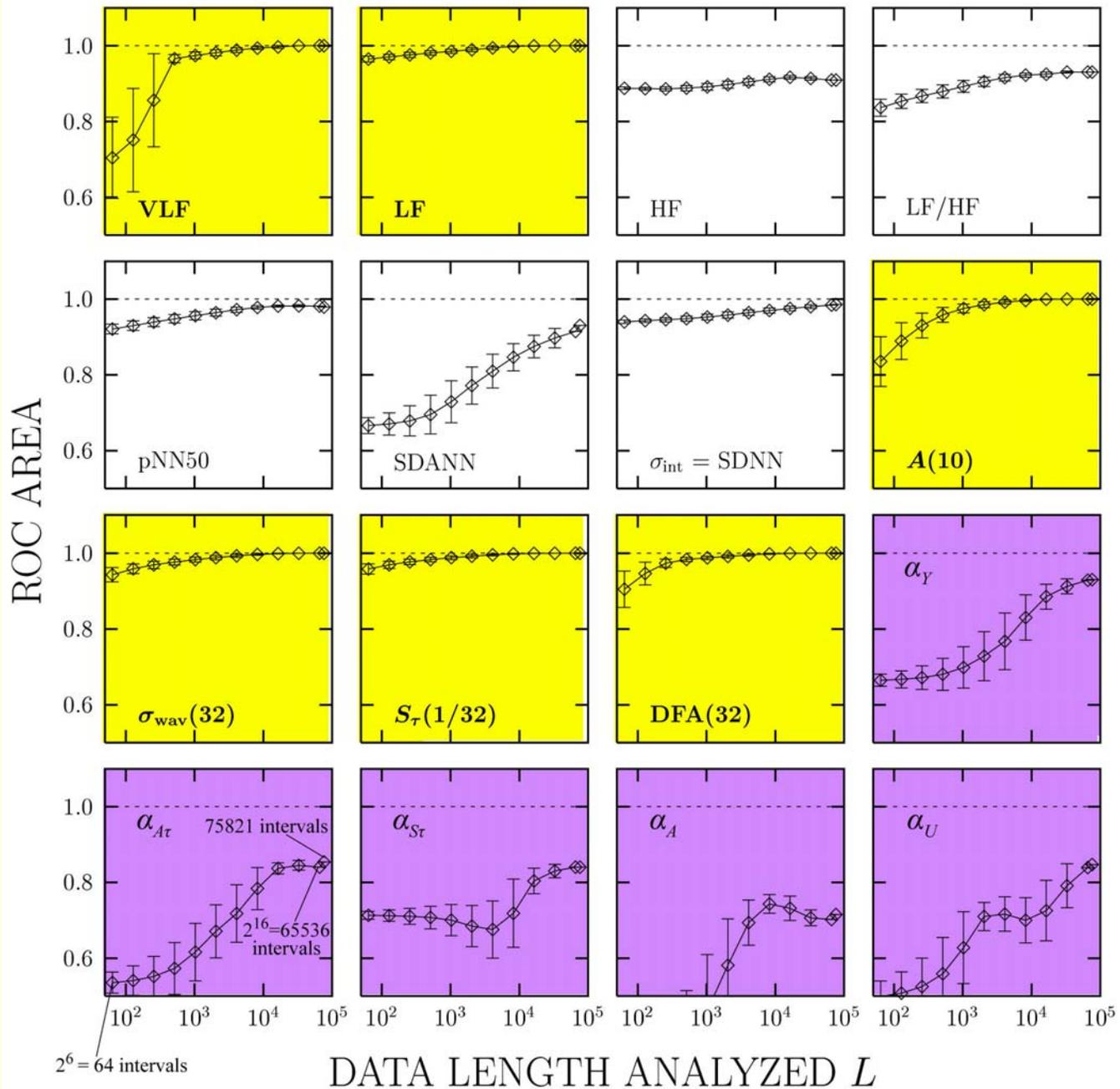
INDIVIDUAL VALUES: DATA

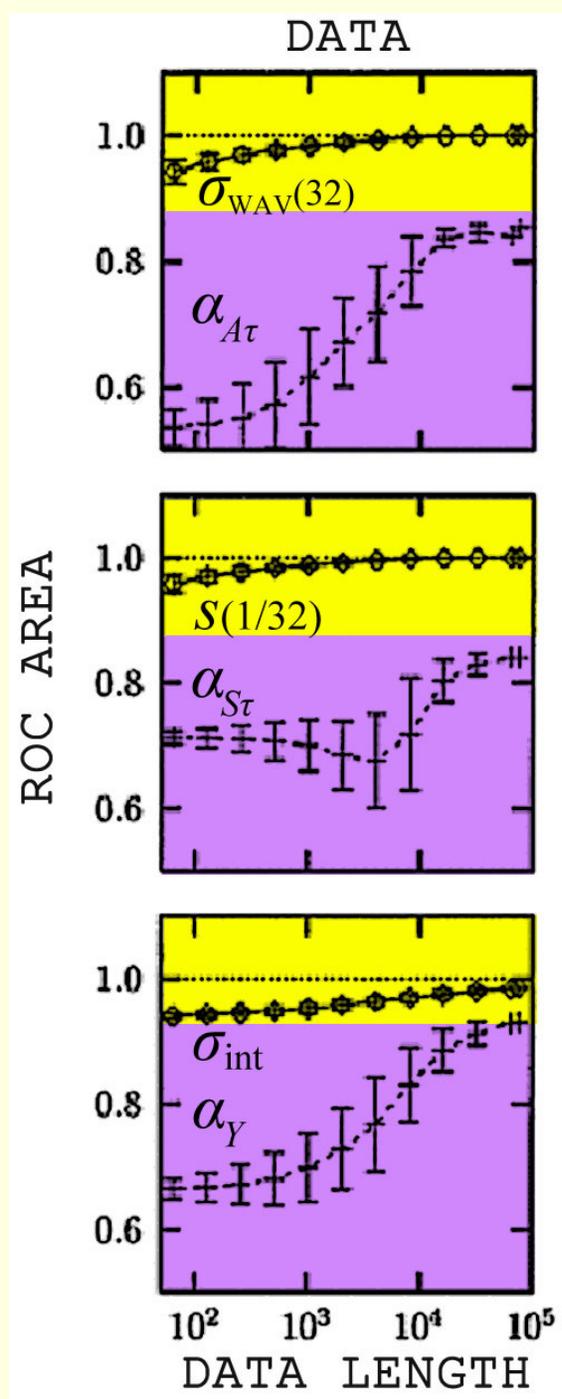


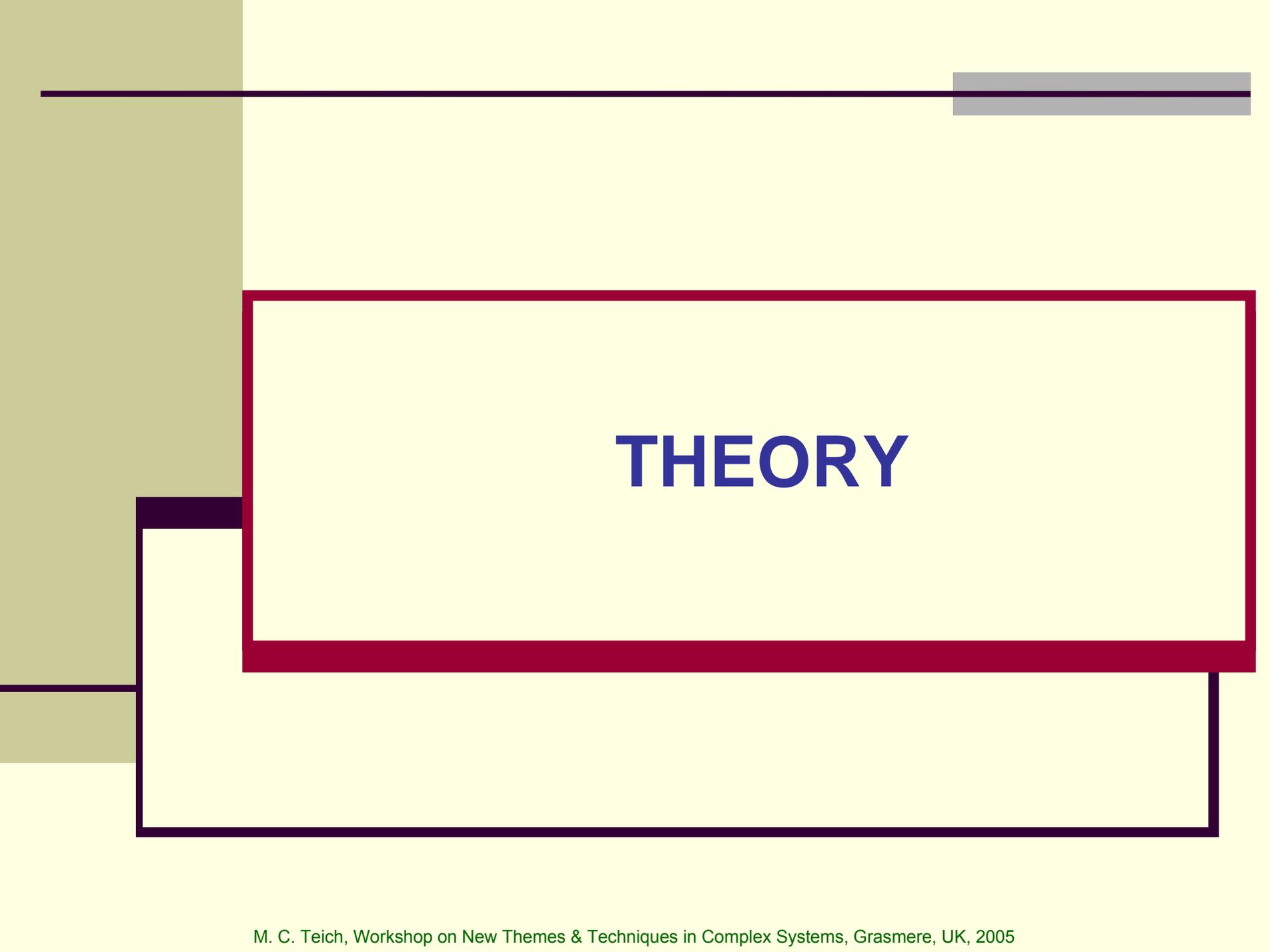
ROC CURVES: NORMAL & CHF DATA (\bar{s} AF; 75821 intervals)



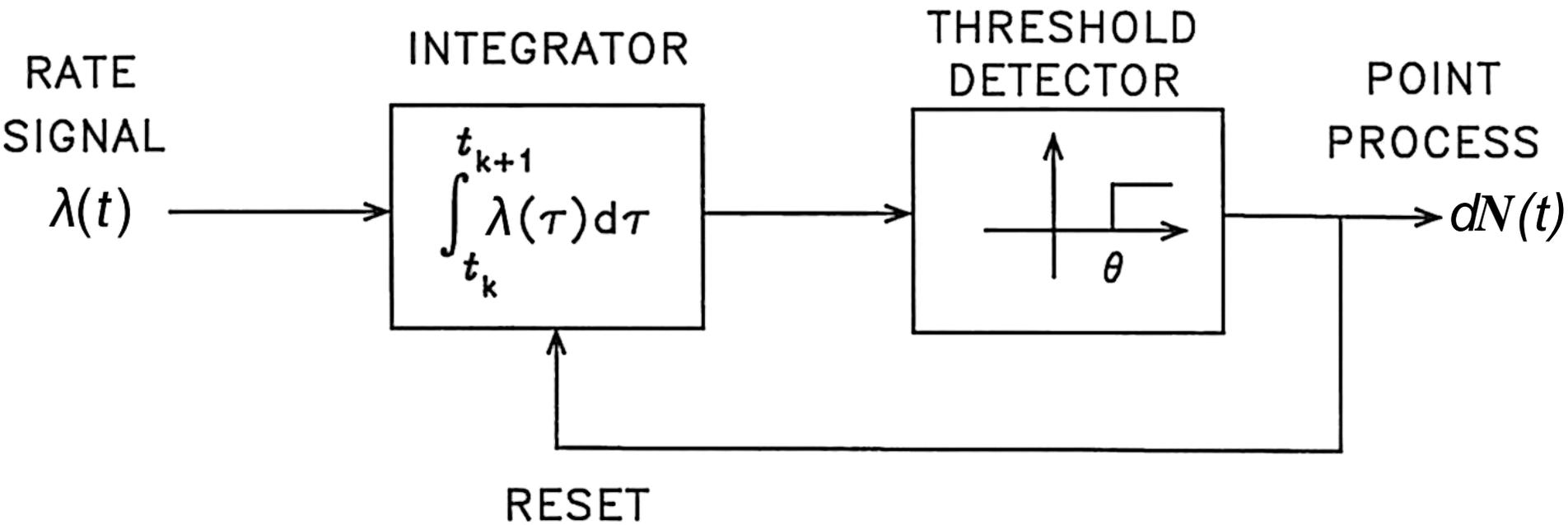
ROC-AREA CURVES: NORMAL & CHF DATA



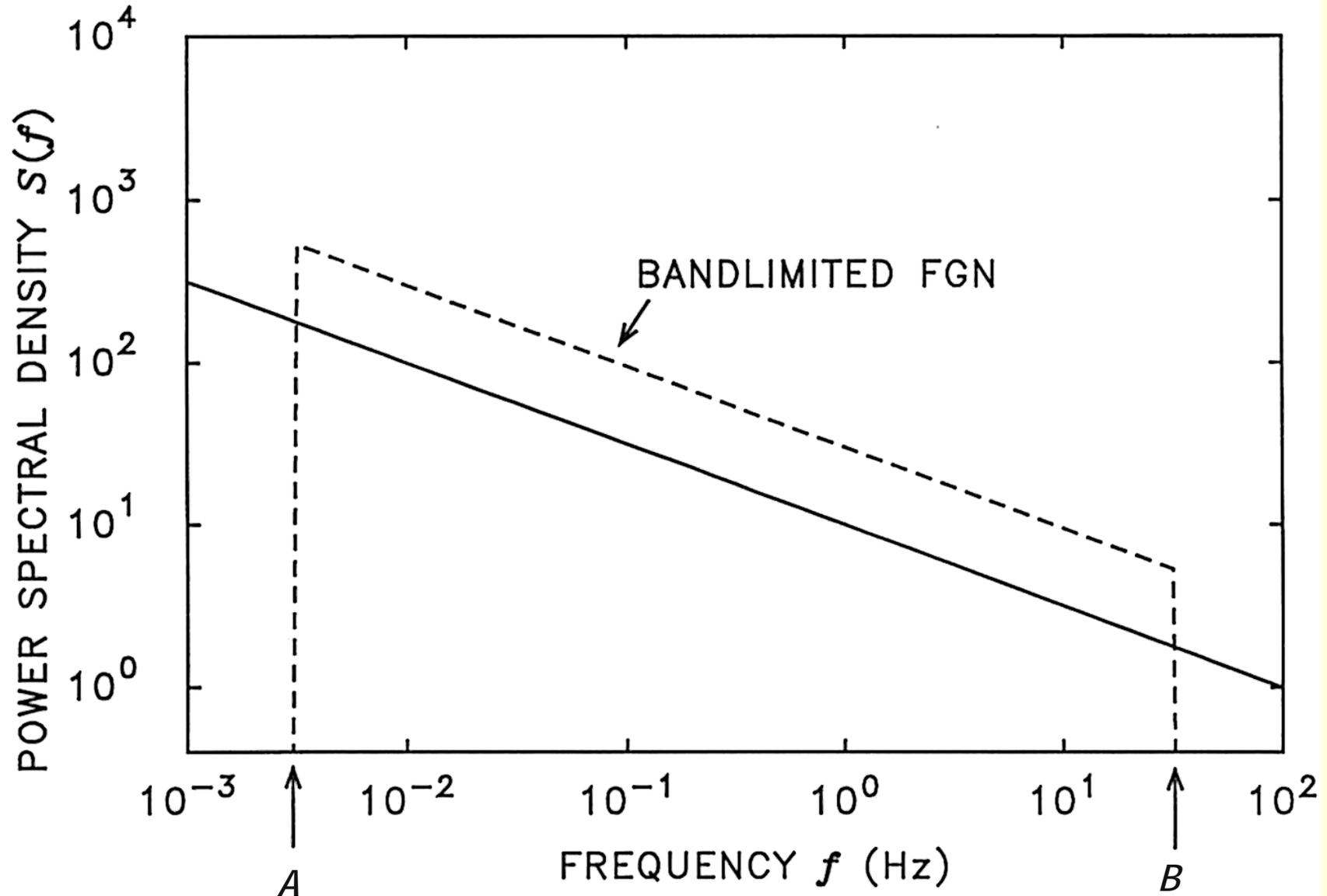


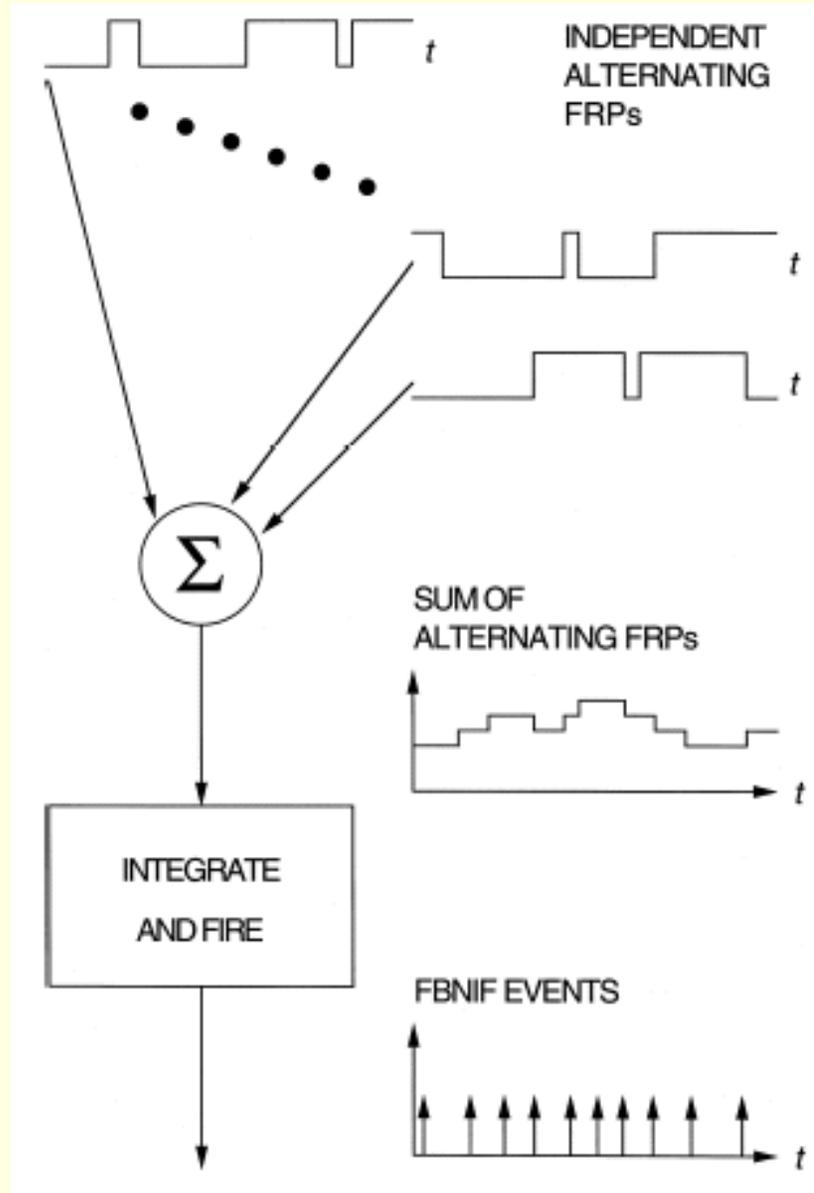


THEORY

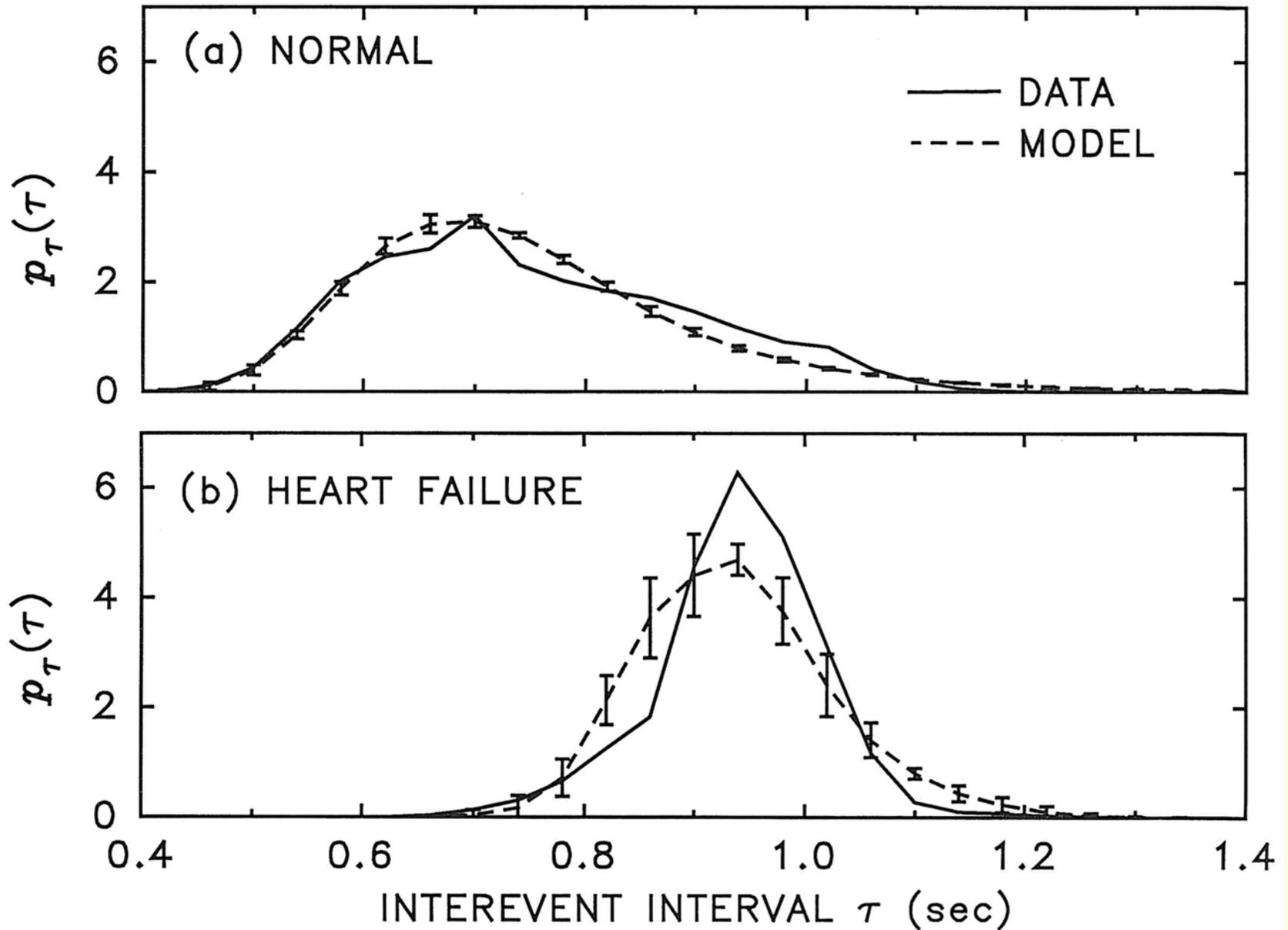


FREQUENCY-DOMAIN REPRESENTATION OF BANDLIMITED FRACTIONAL GAUSSIAN NOISE (FGN)

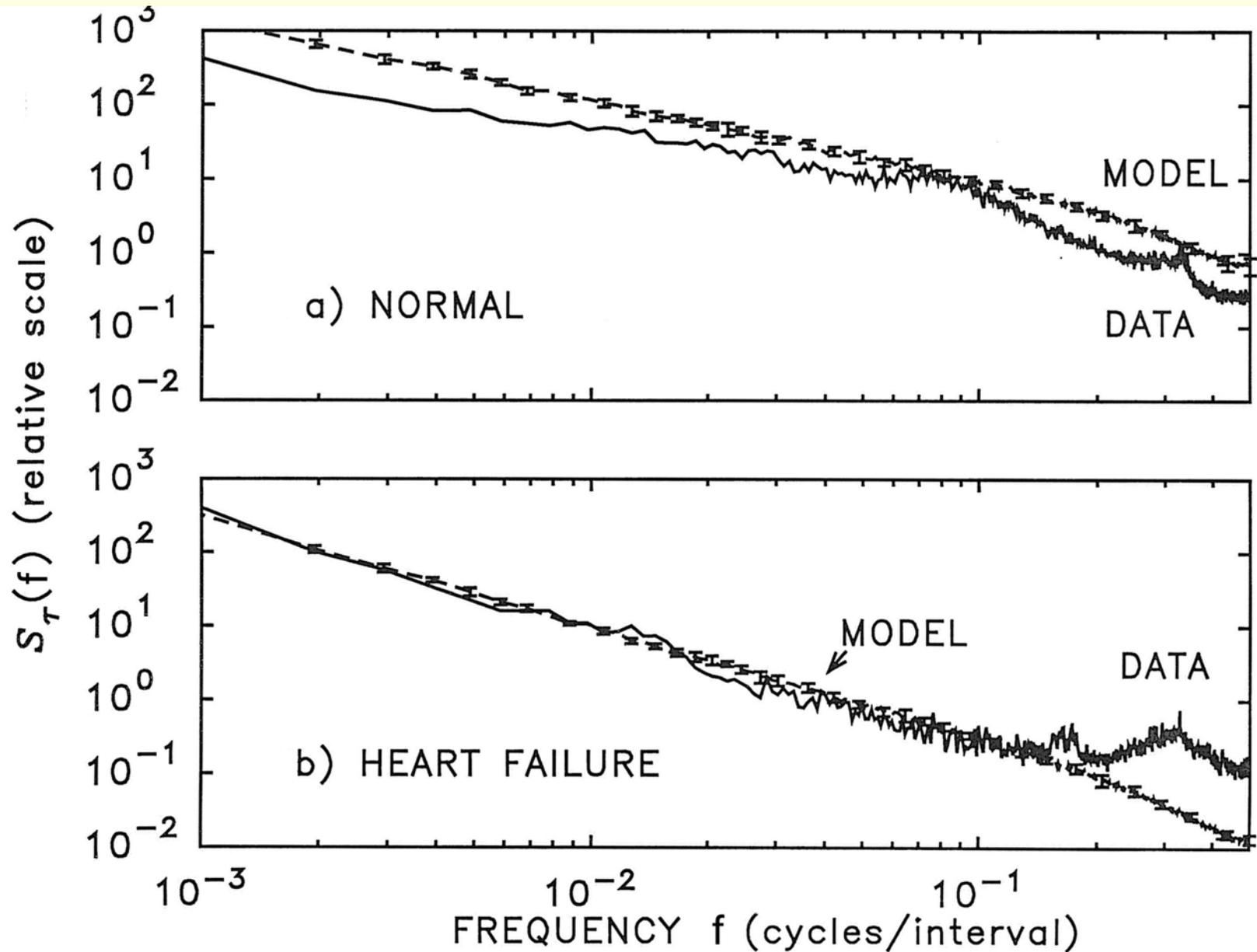




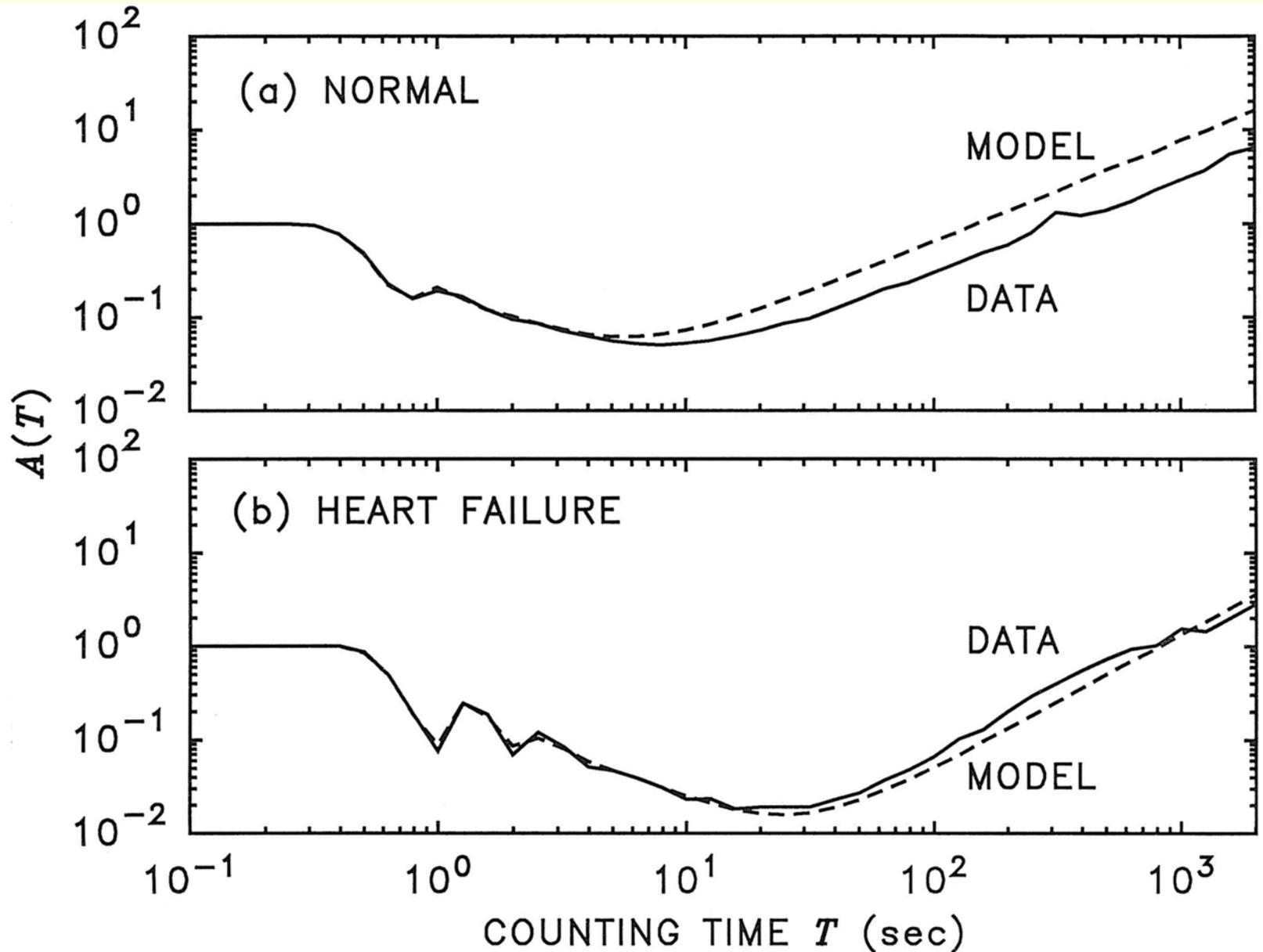
INTEREVENT-INTERVAL HISTOGRAM



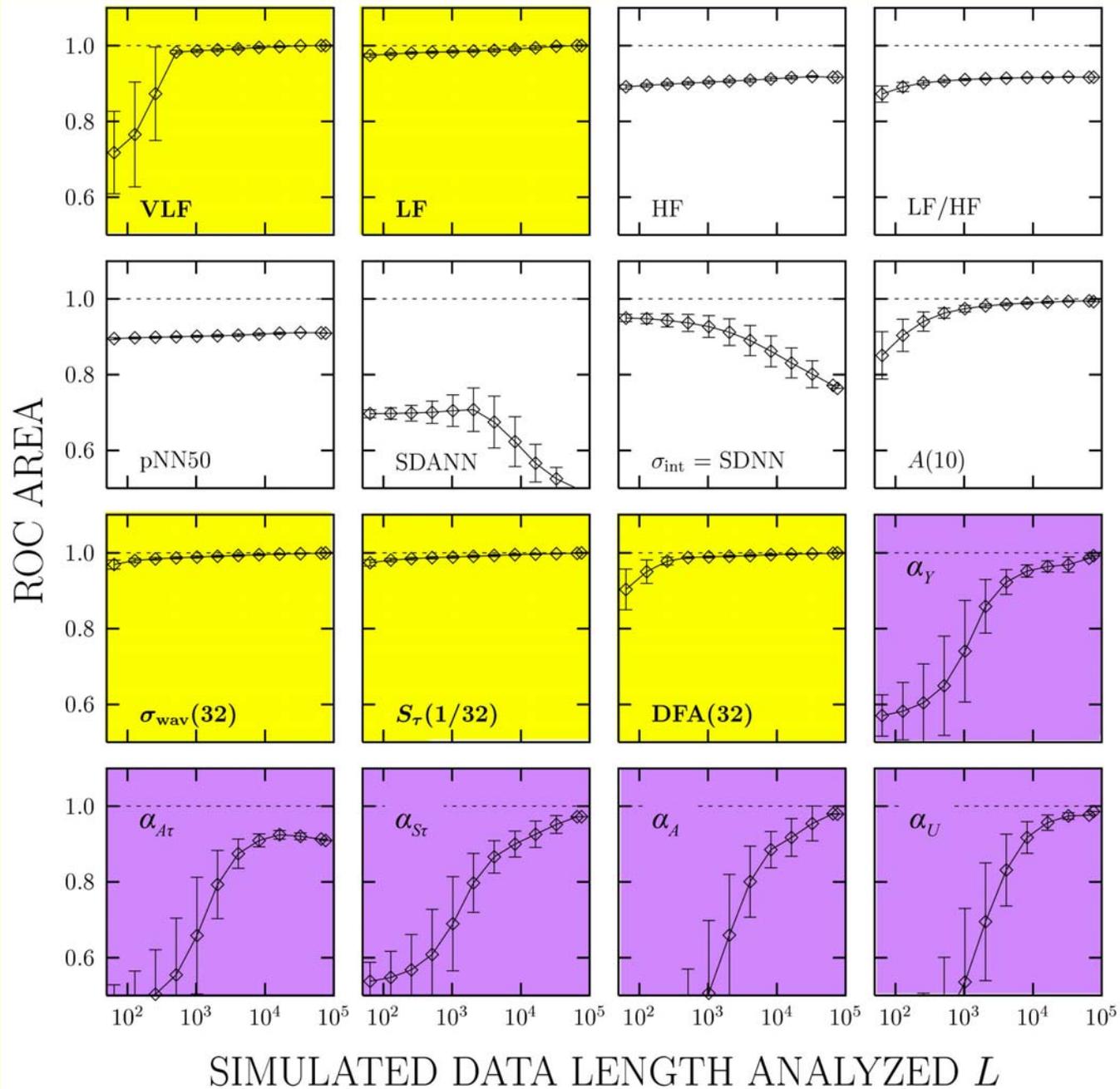
INTERVAL-BASED PERIODOGRAM

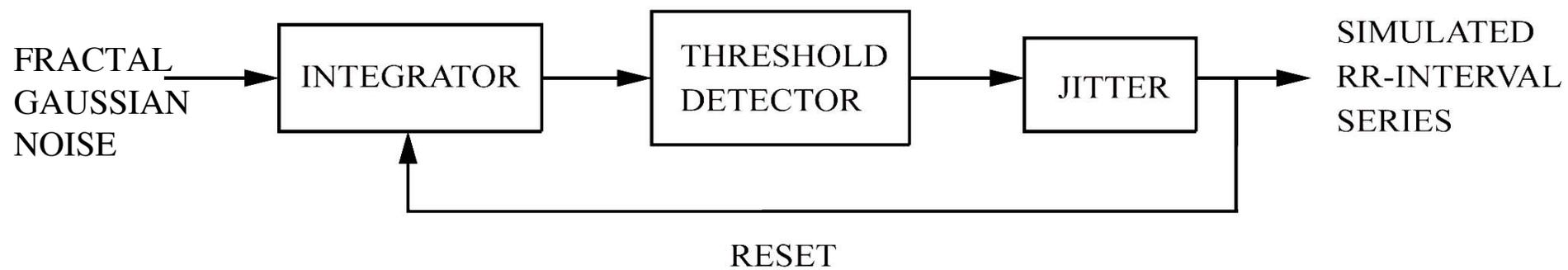


NORMALIZED HAAR-WAVELET VARIANCE



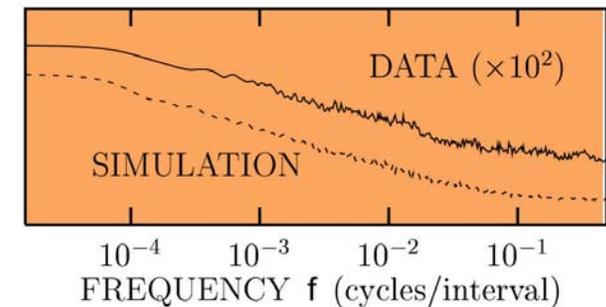
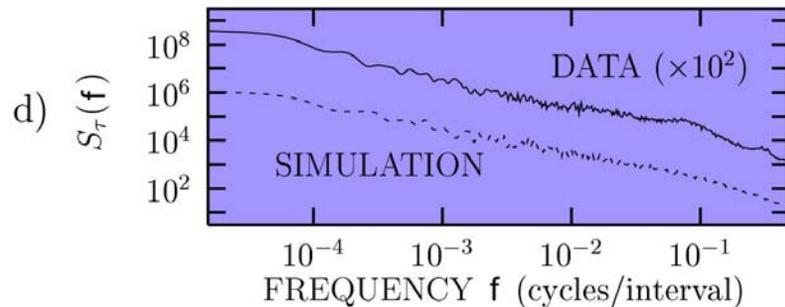
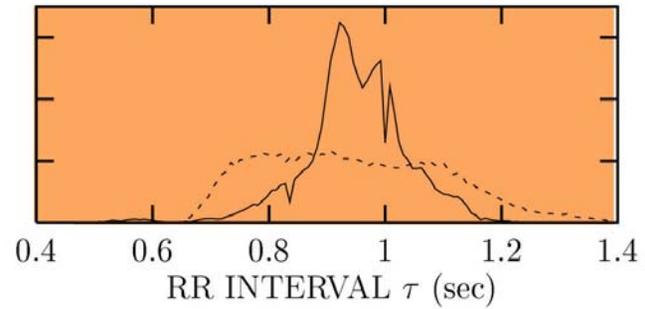
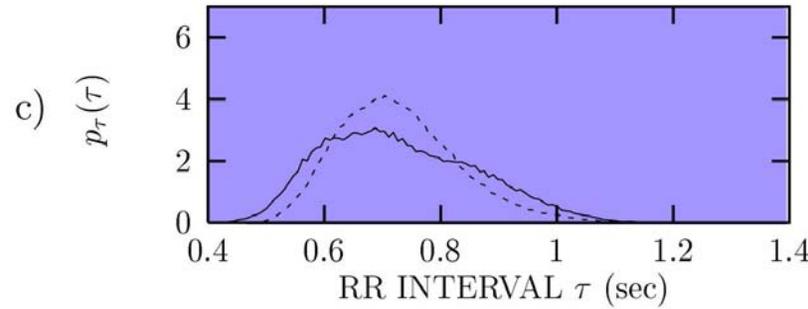
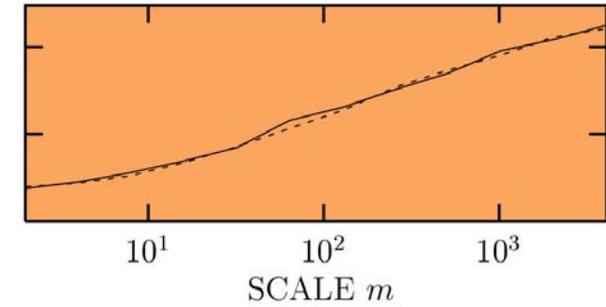
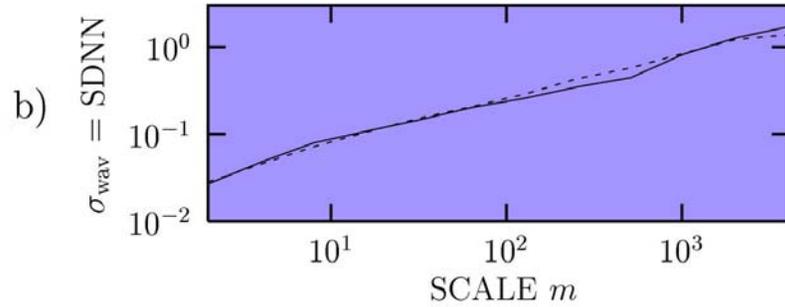
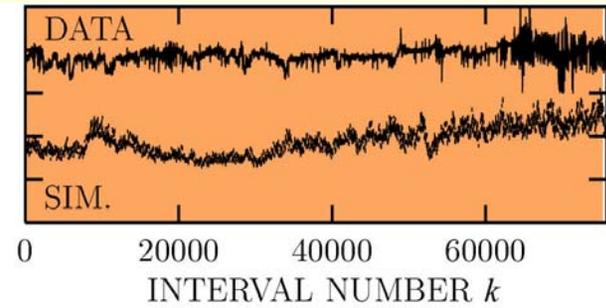
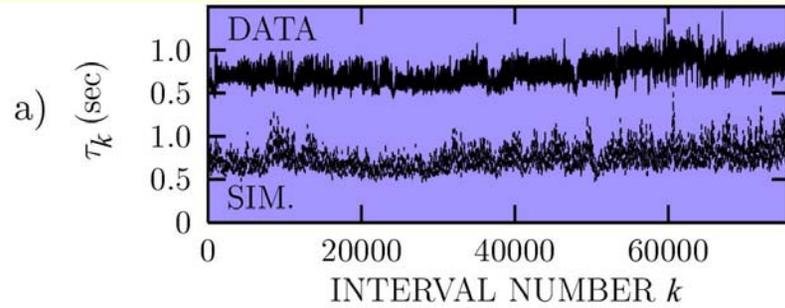
ROC-AREA CURVES: SIMULATION





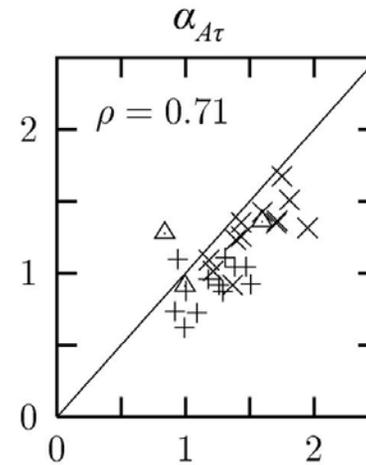
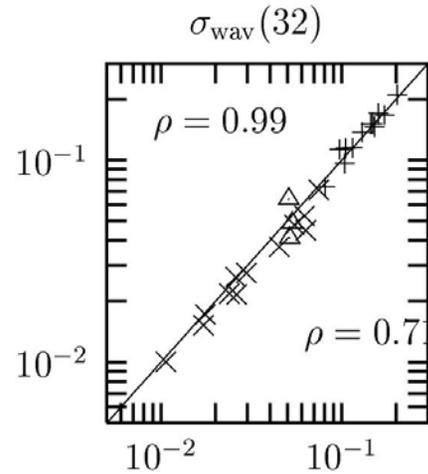
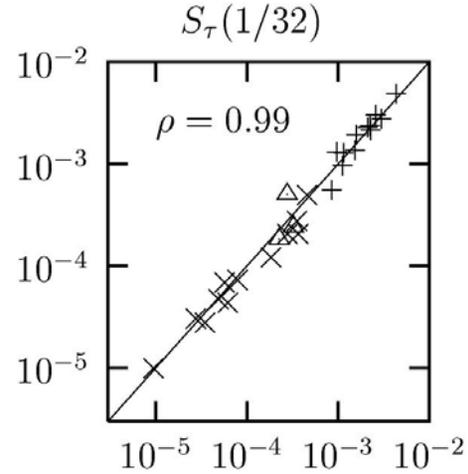
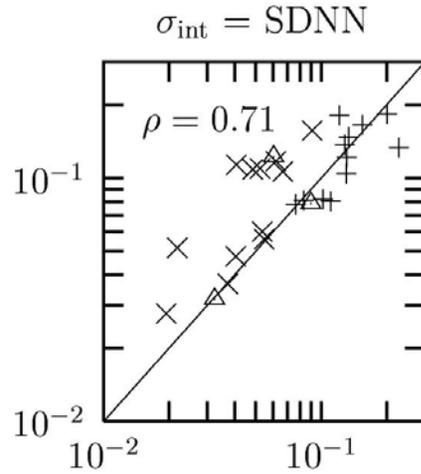
NORMAL

HEART FAILURE



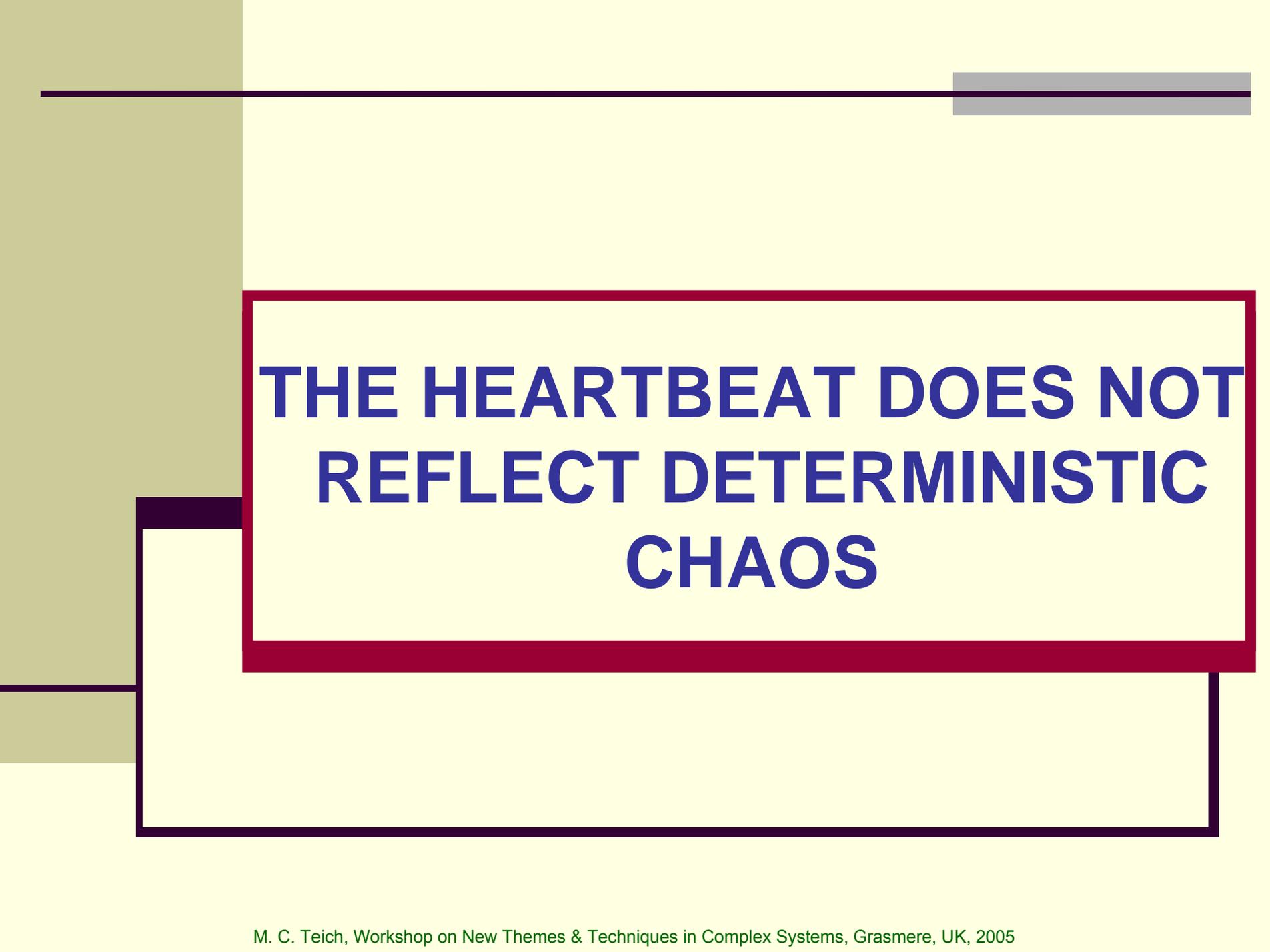
SIMULATION ACCURACY

SIMULATION



DATA

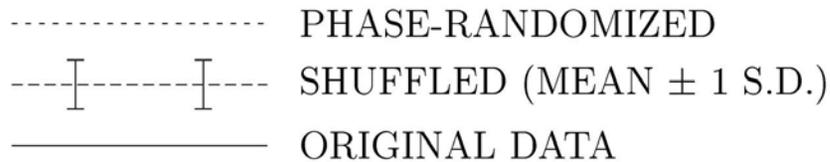
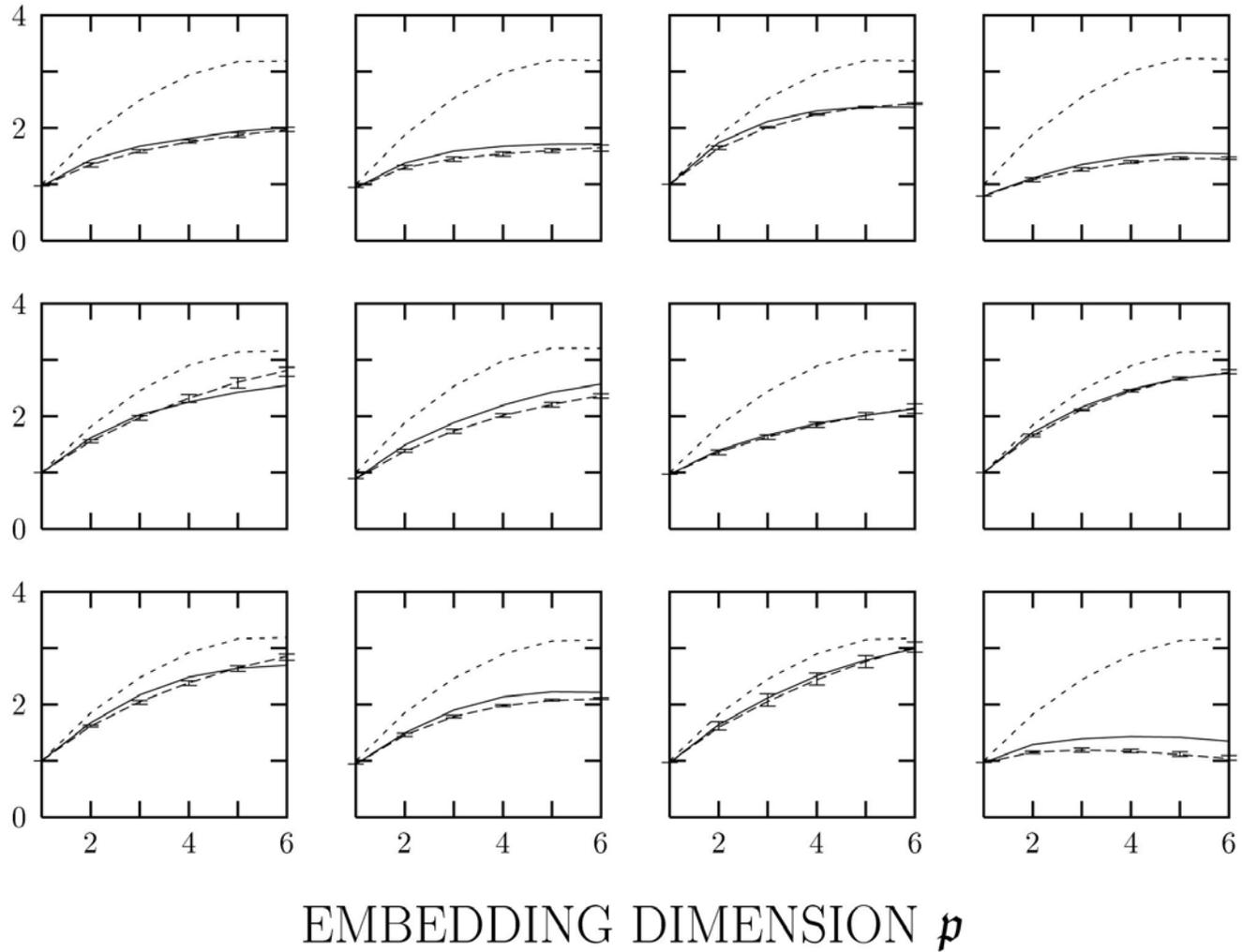
NORMAL +
 HEART FAILURE \bar{s} AF ×
 HEART FAILURE \bar{c} AF △



**THE HEARTBEAT DOES NOT
REFLECT DETERMINISTIC
CHAOS**

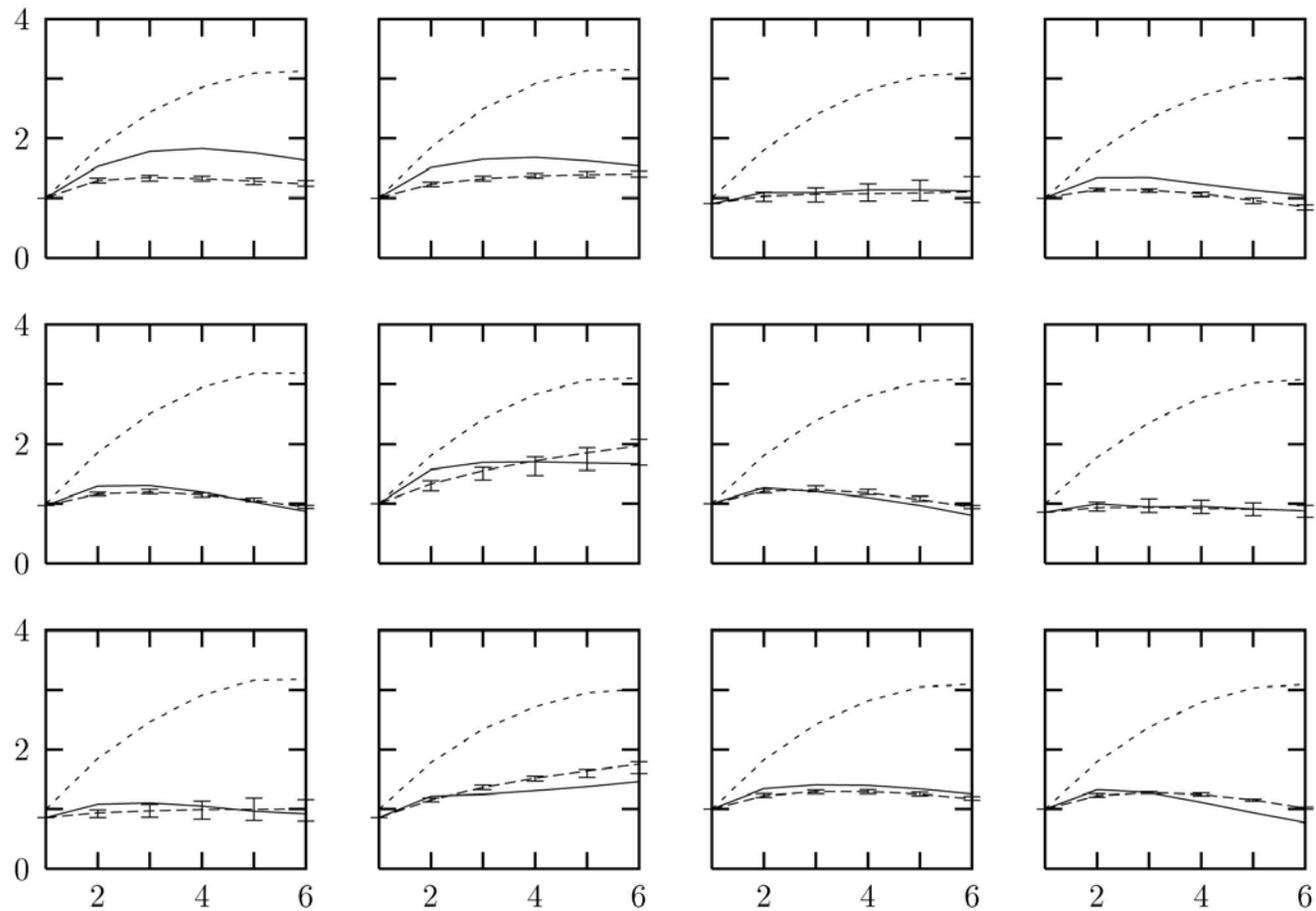
NORMAL

CAPACITY DIMENSION D_0



HEART FAILURE & AF

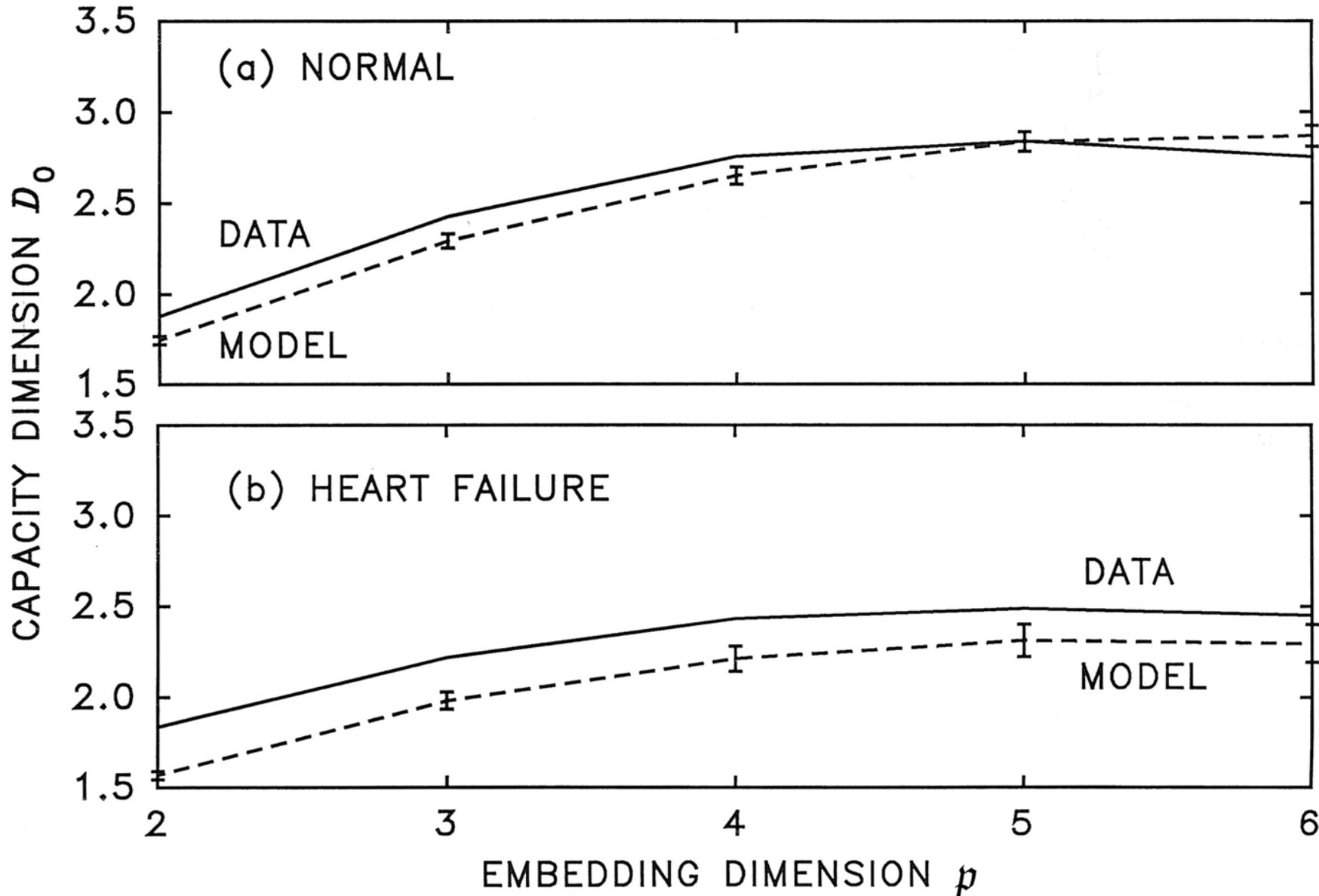
CAPACITY DIMENSION D_0



EMBEDDING DIMENSION p

- PHASE-RANDOMIZED
- |-|-|-|- SHUFFLED (MEAN \pm 1 S.D.)
- _____ ORIGINAL DATA

GENERALIZED-RATE-BASED PHASE-SPACE RECONSTRUCTION: DATA AND MODEL



REFERENCES

- R. G. Turcott and M.C. Teich, "Long-Duration Correlation and Attractor Topology of the Heartbeat Rate Differ for Healthy Patients and Those with Heart Failure," *Proc. SPIE* **2036** (Chaos in Biology and Medicine), 22-39 (1993).
- R. G. Turcott and M. C. Teich, "Fractal Character of the Electrocardiogram: Distinguishing Heart-Failure and Normal Patients," *Ann. Biomed. Eng.* **24**, 269-293 (1996).
- M. C. Teich, "Fractal Behavior of the Electrocardiogram: Distinguishing Heart-Failure and Normal Patients Using Wavelet Analysis," *Proc. 18th Intern. Conf. IEEE Eng. Med. Biol. Soc.* **18**, 1128-1129 (1996).
- S. Thurner, S. B. Lowen, M. Feurstein, C. Heneghan, H. G. Feichtinger, and M. C. Teich, "Analysis, Synthesis, and Estimation of Fractal-Rate Stochastic Point Processes," *Fractals* **5**, 565-595 (1997).
- M. C. Teich, "Multiresolution Wavelet Analysis of Heart-Rate Variability for Heart-Failure and Heart-Transplant Patients," *Proc. Int. Conf. IEEE Eng. Med. Biol. Soc.* **20**, 1136-1141 (1998).
- S. Thurner, M. C. Feurstein, and M. C. Teich, "Multiresolution Wavelet Analysis of Heartbeat Intervals Discriminates Healthy Patients from Those with Cardiac Pathology," *Phys. Rev. Lett.* **80**, 1544-1547 (1998).
- S. Thurner, M. C. Feurstein, S. B. Lowen, and M. C. Teich, "Receiver-Operating-Characteristic Analysis Reveals Superiority of Scale-Dependent Wavelet and Spectral Measures for Assessing Cardiac Dysfunction," *Phys. Rev. Lett.* **81**, 5688-5691 (1998).
- C. Heneghan, S. B. Lowen, and M. C. Teich, "Analysis of Spectral and Wavelet-Based Measures Used to Assess Cardiac Pathology," in *Proceeding of 1999 IEEE International Conference on Acoustic, Speech, and Signal Processing (ICASSP)* (Phoenix, AZ, 1999), paper SPTM-8.2.
- M. C. Teich, S. B. Lowen, B. M. Jost, K. Vibe-Rheymer, and C. Heneghan, "Heart Rate Variability: Measures and Models," in *Nonlinear Biomedical Signal Processing*, **II**, edited by M. Akay (IEEE Press, New York, 2001), 159-213.
- S. B. Lowen and M. C. Teich, *Fractal-Based Point Processes* (Wiley, Hoboken, NJ, 2005).