Real Time Telemedical Health Care Systems with Wearable Sensors

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Abstract

The time between detection and response to chronic diseases could go a long way in saving lives. The current trend in health monitoring systems is to move from the hospital centered device to eventually portable personal devices. Hence, Telemedical health care involves the remote delivery of medical care service to either out-of-hospital or admitted patients through wireless network and computer information technology. This paper systematically reviews the most recent works in telemedical health care system to propose a more efficient model. The focus is more on wearable sensors and devices with most attention given to cardiovascular patients in recent times. The huge literature available reflects the size of activity and attention given to telemedicine. The reviewed works are published within the last five years. Furthermore, the proposed systems are compared in terms of their connectivity, targeted application, type of sensor used, etc. Our study reveals Telemedicine to be a profound field with researchers from multidisciplinary sectors. However, there are still many gaps that need to be filled before maturity. Factors such as efficient wireless transmission, cyber data security, sensor design and integration, device miniaturization and intelligent algorithm for multi parameter data fusion require further considerations.

Keywords: Physiological Health Parameters, Telemedicine, Telehealth, Vital Signs, Wearable Sensors, Wireless Communication

1. Introduction

As the older population grows higher across the globe, so do chronic ailments and the need for more adequate and constant attention they require from medical practitioners and their loved ones. Across the globe, this constant medical attention might either be too expensive or inaccessible. For vast population with or without chronic ailment, the need for affordable and accessible medical care technique for constant monitoring is paramount via a method entirely different from the traditional hospital centered medical care^{1.2}.

Irrespective of the medical condition, age and size of a patient, a few vital signs and physiological parameters are common that require constant monitoring. These vital signs and physiological parameters include Blood Pressure (BP), Body Temperature (TEMP), Heart Rate (HR), Pulse Rate (PR), Electrocardiogram (ECG) and Respiratory Rate (RR)³⁻⁵.

As collaborative advancement hits through multidisciplinary fields such as information technology, computer science, electrical and electronics engineering, biomedical engineering and medicine, healthcare systems are experiencing enormous drift from the traditional hospital centered care to patient centered healthcare delivery systems commonly referred to as telemedicine or telehealth^{4,6,7}.

Telemedicine is a technology-based alternative to traditional health care system. The delivery of health care services and clinical information to improve, maintain, or assist patients' health status are done remotely by means of information and telecommunications technology^{3,8}.

Simply put, telemedicine involves monitoring and collection of patient's vital data using state-of-the-art medical devices or sensors. They collect and transmit this data to a remote server or processing unit for analysis, storing and generating alerts to other devices such as mobile phones, desktop and laptop computers or generally alerting patients' healthcare givers or emergency contact personnel³.

Telemedicine can be classified to be either mobile (e.g., Mobile phone health systems, wearable sensor systems, etc.) where the device can be moved from one location to the other with convenience or Semi-mobile where some parts of the device are mobile and wirelessly connected and the other parts are stationary or fully Stationary as seen in rural primary health care centers or some home health care systems where a dedicated room is used for acquisition of vital signs and parameters.

The fundamental parts to a telemedical system include the medical measuring devices (e.g., instruments or sensors), a processing device or subcomponent (e.g., mobile phone, computer) to process the readings obtained for transmission, a medical practitioner or intelligent server (neural fuzzy logic servers) to which the data is transmitted, a database for storing raw and analyzed data, and a device to display this data obtained from the server (Medical web portal) to the medical practitioner and/or the patient³.

Although customized telemonitoring and diagnostic systems are underway and some available for children adults and older adults with disabilities and special healthcare needs at home, in the hospital or even outdoors⁹. In all this systems, the design of a more efficient system in terms of device integration, miniaturization, reliability and acceptability still requires adequate research.

The focus of this review paper is on the most recent trend in telemedicine, telehealth care systems as related to cardiovascular health care. Keyword search combined with other comprehensive techniques have been employed in delimiting article size. The rest of this paper is organized as follows: Related work, Discussion and Conclusion.

2. Method

This paper systematically reviews current trend in cardiovascular telemedical health care system with wearable sensors over the last half decade. One hundred and ten articles from ISI and Scopus indexed Journal were retrieved using relevant keyword search. Ten magazine articles were also considered. We excluded articles mostly over five years for comprehensive reasons and articles with low impact factor and less relevance to cardiovascular telehealth for critical reasons. Also, delimitation of the sample size was further carried out by eliminating articles that fall in the year range but have been reviewed by a more recent article in the pool. Following the initial abstract review, full-text evaluation of eighteen articles was then considered. The summary of this has been presented in the next section.

3. Results

The field of telemedicine, telehealth care system has attracted vast number of researchers both from professional bodies and academics from various areas of specialization. Over the decade, they have shared the same goal, worked mostly with the same set of basic vital signs and physiological parameters, however there is still a lot more to be covered to create the perfect system⁸.

The ability to detect and alert patients about ailments would result in a decrease in sudden death and outbreaks experienced around the globe, both in developing and developed nations where medical care is either too expensive or inaccessible at patients' current location².

Professionals³ have researched monitoring Heart disease and diabetes using a network of wireless medical sensors connected to a mobile device (PDA). The PDA connects the sensors to a medical server where the measured parameters such as temperature, respiration rate, blood glucose and electrocardiograph are further processed and stored. However, their architecture is not a complete wireless system therefore compromising user's mobility.

A more reliable mobile wireless sensor based on non-invasive smart cloth technology for continuous monitoring of cardiovascular health has been designed in recent times¹. It is comprised of a fabric electrode for signal acquisition, sensor nodes for translation, Android tablet to display results and as a gateway server to the health cloud that linked patient's information to the hospital. Such architecture could support long-term monitoring of cardiovascular health as it is washable with lower power consumption. However, this system has failed to address the issues of patients' privacy and data protection, and a more efficient algorithm for system functionality.

Although professionals⁶ have proposed a real-time

monitoring system addressing the issues of integrating a wireless wearable sensor with mobile technology in extracting basic medical multiple parameters contrary to the single parameter as seen in the work of other reserchers¹. This system is still deficient in having a special algorithm for early detection and constant monitoring of critical or abnormal physiological parameters that would help mitigate or manage cardiac related diseases effectively.

The design and implementation of a wireless telemedicine system where physiological vital signs are transmitted to a remote medical server have all surfaces in recent time¹⁰. In this design, cellular network is used in emergencies and internet connection in normal cases for long-term monitoring. This system features a mobile care unit comprising of the sensors, processor and communication module to improve patient mobility. However, Sensor size is still too large; and the system lacks sophisticated algorithm for critical condition alarms and efficient power savings.

With new generation smart-phones, the capability of running powerful applications is more popular with built-in sensors. A direct consequence is smart-phonebased health care applications rapidly being developed.

Similarly, researchers have proposed systems for Heart Rate Variability (HRV) extraction using smart-phone Photoplethysmograms (PPG).¹¹ A new technique has also been practiced as replacement for traditionally calculated HVR from dedicated medical Electrocardiograph (ECG)². It offers low-cost, ease-of-use in and outside the hospital. The required sensor for data acquisition is a smart-phone's built-in camera¹². Such a technology can be integrated with other sensors such as fall detection systems powered by complex algorithm¹³. This will deliver efficient, affordable and more robust health care monitoring system for much older patients with chronic cardiovascular disease as suggested in¹⁴.

Researchers have also proposed complex algorithm in building a system that scans for symptoms prior to asthma attacks from biomedical data they obtain¹⁵. This ensures patients take precautions from conditions that trigger critical response of their chronic case. This could be implemented for all other chronic cases.

Other holistic systems include body sensors which are linked to tablet PC enabled for rural telehealth applications¹⁶. In such systems, an embedded platform acquires the biological information from the sensor and transmits it to a mobile phone/tablet PC running on Android platform which is monitored by medical staff. Sensors employed include blood pressure sensor, pulse rate sensor, temperature sensor, and accelerometer sensor for fall detection.

An article published in IEEE spectrum magazine features a research on sweat-sensing patches capable of measuring biomarkers from the body. Doctors can rely on such measurement for diagnosis of stress, disease, poor nutrition, injury, and other conditions¹⁷. This could be incorporated into telemedicine for miniaturization, efficiency and system integration as seen in the work of professionals¹⁸. This is also featured in the same magazine¹⁹.

A commercialized product called *Hypoband* has been designed in the form of a wrist watch for hypoglycemic conditions which utilizes precipitation (cold sweat) as its physiological parameter to be sensed. This device features Bluetooth connection to an Android mobile phone application. The mobile application during emergencies would send alerts and initiate phone emergency phone calls to preregistered contacts²⁰. However, this system is only dedicated to one out of many cardiovascular healths.

A real time cardiovascular telehealth system would benefit from arrays of wearable sensor paired with a mobile device for data processing and transmission. However, a complex algorithm is required for such system in other to mitigate data loss, ensure data security, efficient power consumption, and reliable data fusion techniques for more accurate reading, all of which are not fully addressed from this review.

Table 1 provides a tabular summary of our findings for telemedical health care services as related to cardiovascular health and wearable devices in recent times. Other such review out of our year of study could be found in some of the works referenced^{8-10,16}.

Reference	Vital	Specific	Indoors or		Connectivity	Sensor De-	Strength in	Weakness
	signs	Target	Outd	1		scription	Design	
[16]	BP., PR.,	Primary	In *	Out	Bluetooth,	ICs (LM35)	Seamless integra-	Large size, Not totally wireless, No
[10]	TEMP	Health care			Didetootii,	ICS (LIVI33)	tion with smart-	algorithm for multiple parameter
	F.D.	Center					phones.	assessment.
[19]	Sweat,	General	*	*	Bluetooth	Single chip IC	Miniatur-	Requires complex algorithm and
[17]	TEMP.	Health			Didetootii	Single emp ic	ized, Seamless	data library for useful interpreta-
	1 1.1111.	Ticulti					connectivity via	tion of biomarkers.
							Bluetooth.	
[12]	HR	General	*	*	Nil	Smartphone	Availability, easy	Not a complete system for real
		Health				camera	to use.	time health monitoring, Requires
								integration with other systems.
[6]	BP, HR,	Cardiac	*	*	Bluetooth,	Zephyr BT,	Web interface,	Power consumption, lack in-
	TEMP.,	Patients			-	Omron BP	Mobile interface	telligent algorithm, Portability,
					GPRS/GSM	monitor, GP	wearable system,	Response time delay. No data
						Temp mon-	Critical alert	protection algorithm.
						itor.	algorithm, GPS	
							location trigger	
							algorithm.	
[11]	HRV	General	*	*	Nil	Smartphone	Availability, easy	Not a complete system for real
		Health				Camera	to use.	time health monitoring, Requires
								integration with other systems
[1]	ECG	General	*	*	Bluetooth,	Fiber Elec-	Intelligent	Requires complex algorithm for
		Health			Internet.	trodes,	Transmission	other physiological parameter
							algorithm,	extraction, external power source,
							Power efficiency,	No ECG recognition algorithm,
							washable vest,	No data protection algorithm.
							Seamless connec-	
							tivity to medical	
							server and tablet	
[10]	DOG DD	0 1	*	*			device.	
[10]	ECG, BP,	General	*	4	Bluetooth,		Intelligent data	Large size, No Data fusion algo-
	TEMP.,	Health			GSM/GPRS,		analysis algo-	rithm for pattern recognition, No
	SpO2				Internet		rithm, Intelligent	data protection algorithm.
							Transmission	
							algorithm, Power efficiency, Seam-	
							less connection	
							with PDA to	
							remote Medical	
							server, Emer-	
							gency contact	
							functionality,	
							Web and mobile	
							interface.	

Table 1. Characteristics summary of selected study articles

[4]	BP, HR,	General	*		Bluetooth,	Omron Ther-	Real time mon-	Large size, No geo location service
	SpO2,	Health			Infrared, 3G	mometer, Ac-	itoring of bio	algorithm, No data protection
	BG,	in Older				cu-Check BG	data, intelligent	algorithm.
	TEMP,	Adults				meter, Nonin	fuzzy logic for	
						Onyx II, Bo-	pattern recog-	
						so-medicus	nition, warning	
						BP monitor	algorithm for	
							critical condi-	
							tions.	
[14]	HR	Elderly,	*	*	Bluetooth	Zephyr HxM	Mobile and	Algorithm requires user's manual
		Heart Dis-					Smartphone	input, not fully autonomous and
		eases					integration,	Simulation technique was used for
							Medical cloud	system test.
							connectivity, En-	
							ergy estimation	
							algorithm, stress	
							algorithm for	
							critical alert.	
[5]	TEMP	General			ZigBee	Simulation	Algorithm for ef-	No real life implementation with
	BP, HR,	Health					ficient transmis-	real sensors and patients.
	R						sion of medical	
							data wirelessly	
							Using ZigBee	
							technology.	
[2]	TEMP	General	*	*	IEEE 802.1	ICs (LM35,	IC sensors,	Remote display of ECG signal are
	HR,	Health			wireless pro-	LM358,	mobile com-	absent, no intelligent algorithm
	ECG				tocol, GSM	AD624)	puting entity	for critical condition warnings.
							and display, and	
							remote monitor-	
							ing entity.	
[3]	TEMP	Hearth dis-	*	*	ZigBee,		Data security al-	Require user to physically answer
	HR BP R	eases and			Bluetooth,		gorithm, User in-	question.
		diabetes			WIFI, 3G		terface integrated	1
							with PDA, access	
							to clinic server,	
							trend analysis	
							algorithm, early	
							warning algo-	
							rithm.	
[17]	Sweat,	General	*	*	Bluetooth	Ion detection	Portable, stress	Integration into full Telemedical
	TEMP	Health				sensor array.	detection algo-	device is required.
							rithm, efficient	
							power consump-	
							tion.	
[20]	Sweat	Diabetic,	*	*	Bluetooth	*Trade secrete	Wrist Wearable	No autonomous SOS algorithm only
r .1		Hypoglyce-					device, Seamless	during excess precipitation (cold
		mic patient					connectivity to	sweat) and manual button press, No
		Putternt					Android smart	additional functionality.
							phone, Emergen-	additional functionality.
							cy routing, SOS	
							button.	
							outton.	

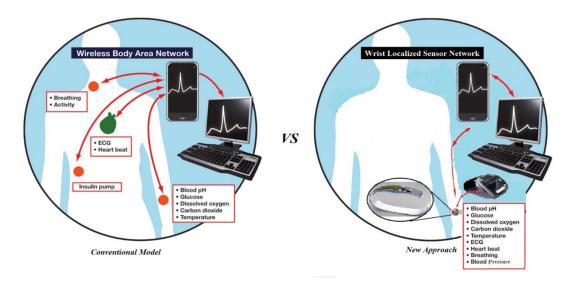


Figure 1. Conventional vs. proposed model.

4. Discussion

This study indicates that despite the efforts of researchers in the field of telemedicine as related to cardiovascular and general health, only but a few of the great potential in telemedical healthcare systems has been achieved. Open issues from our review show critical and perspective effort is still required in the aspects of telehealth for cardiovascular and general health care system.

Such areas include miniaturization of multiple bodily distributed sensor arrays with a much localized system for efficient power consumption as distant intersensor connectivity would drop to minimal. A more intelligent adaptive algorithm for simultaneous analysis of physiological parameters in real time would account for a larger decrease in sensor size and integration thereby minimizing exposure to detrimental effects of constant exposure to transmitting wireless power. Also, adequate response time to identifying and alerting appropriate destination prior to user critical break down. Implementation of Geo-location feature, self-sustaining green power source are also some features implementable through this new wrist localized sensor network model shown in Figure 1.

5. Conclusion

In this paper, a systemic review to propose an optimized model for real time cardiovascular and general health care

system with wearable sensor was conducted. This review reveals that although Telemedicine has the potential to change the medical care as we know it, from hospital centric to patient centric where medical health care service could be available to every patient in any part of the world. Earlier warning or continuous monitoring for managing chronic diseases would be accessible. However, this area of study still lacks more than what it offers and would benefit more with ground breaking research outcomes like implementation of the proposed model. Telemedicine becoming a profound field that involves researchers from multidisciplinary sectors would allow the possibility of such proposed model with such an efficient wireless technology transmission, data security, Sensor design and integration, device miniaturization and intelligent algorithm for multiple parameter data fusion for a complete health care system on the go.

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