

Gender Based Variability Time Series Complexity Analysis

Ramesh K. Sunkaria, Puneeta Marwaha

Abstract—Non linear methods of heart rate variability (HRV) analysis are becoming more popular. It has been observed that complexity measures quantify the regularity and uncertainty of cardiovascular RR-interval time series. In the present work, SampEn has been evaluated in healthy normal sinus rhythm (NSR) male and female subjects for different data lengths and tolerance level r . It is demonstrated that SampEn is small for higher values of tolerance r . Also SampEn value of healthy female group is higher than that of healthy male group for short data length and with increase in data length both groups overlap each other and it is difficult to distinguish them. The SampEn gives inaccurate results by assigning higher value to female group, because male subject have more complex HRV pattern than that of female subjects. Therefore, this traditional algorithm exhibits higher complexity for healthy female subjects than for healthy male subjects, which is misleading observation. This may be due to the fact that SampEn do not account for multiple time scales inherent in the physiologic time series and the hidden spatial and temporal fluctuations remains unexplored.

Keywords—Heart rate variability, normal sinus rhythm group, RR interval time series, sample entropy.

I. INTRODUCTION

IN recent years, HRV has emerged as a powerful non-invasive diagnostic tool used to investigate the autonomic control on the cardiac activity. HRV is the variation in beat-to-beat intervals and is one of the most important markers for evaluating overall cardiac health. It is a proven fact that HRV is usually high in normal and healthy subjects, whereas reduced HRV has been observed in certain pathologies such as myocardial infarction, ischemic heart disease, congestive heart failure and others [1]-[5].

Time and frequency domains are the linear methods, used to access the autonomic nervous system control over cardiac rhythm. These Linear methods of HRV analysis assume that R-R interval series to be stationary or any variations in it are harmonic or sinusoidal in nature. But cardiac rhythm has multiple interactions with other physiological systems such as respiration and it may also be affected by small disturbances such as premature ventricular contraction, atrioventricular block etc. so resulting signal is nonlinear, non-stationary and chaotic in nature, exhibiting some short range and long range correlations [6]. Linear approach is more prone to give

inaccurate analysis. Also the sensitivity and specificity of these methods was less than expected positive predictive value of $< 30\%$ [7]-[9]. The highly complex heart rate signals are nonlinear and non-stationary, usually chaotic in nature and exhibits some short range and long range correlations. Analysis of HRV signal using non linear approach is proposed to give better results, because here original RR time series is analyzed. With the help of these nonlinear methods one can analyze the hidden complexity of RR interval series. Also the predictive value is expected to be higher than the linear methods [10]. Some of the nonlinear dynamics used are the Poincaré plot, correlation dimension, power law slope, largest Lyapunov exponent, and approximate entropy (ApEn), sample entropy (SampEn) and detrended fluctuation analysis.

Entropy based measures are used to quantify the regularity and uncertainty of cardiovascular RR interval time series. Pincus [11]-[13] introduced ApEn for measuring complexity of a time series. But ApEn statistics gives inconsistent results and is biased suggesting less complexity than actually present in the signal. Richman and Mooran [14] developed new refined complexity measure SampEn, which agree with the theory much more closely than ApEn. Tuzcu and Selman [15] observed significant decrease in SampEn in children who undergone heart transplant, thereby indicating loss of system complexity. Al-Angari and Sahakian [16] reported significant loss of complexity in patients suffering from obstructive sleep apnea syndrome. Loss of complexity has been proposed with age [17] and in certain pathological conditions [18]. Goya-Esteban et al. [18] applied SampEn to distinguish healthy subjects from patients with congestive heart failure at fixed tolerance level r . Also it has been observed that HRV of male subjects is higher in comparison to female subjects [22]-[25].

In this paper we evaluated SampEn technique on NSR male and female subjects to observe the effect of the variation in data length N and tolerance level r on the SampEn.

II. MATERIALS AND METHOD

The entire dataset is retrieved from the physionet site (<http://www.physionet.org/>) [19], consists of RR time series recorded from 10 healthy subjects, 5 male and 5 female subjects, each sampled at 128 samples per second (from MIT-BIH NSR Database). All the database of RR interval time series is filtered to remove outliers [20]. Table I presents the record numbers of these subjects.

Ramesh K. Sunkaria is with the Department of Electronics and Communication Engineering, Dr. B R Ambedkar National Institute of Technology, Jalandhar (Punjab)-144011, India (phone no. 0181-2690301; e-mail: sunkariark@gmail.com).

Puneeta with the Department of Electronics and Communication Engineering, Dr. B R Ambedkar National Institute of Technology, Jalandhar (Punjab)-144011, India (e-mail: puneetamarwaha@gmail.com).

TABLE I
RECORD NUMBERS OF SUBJECTS OF NSR MALE AND FEMALE SUBJECTS

| Group | Record Number |
|-------------------------|-----------------------------------|
| NSR male | 16265, 16773, 16483, 19090, 19093 |
| NSR female | 16272, 16420, 16786, 17453, 19140 |
| NSR-normal sinus rhythm | |

In the present work SampEn technique is used, which is the negative natural logarithm of the conditional probability that two sequences similar for m points remain similar i.e. within the tolerance level r for one more point. Here self-matches are excluded while calculating probabilities. Lesser the SampEn more regular is the time series. The differences between SampEn and ApEn are: firstly SampEn exclude self-matches; secondly SampEn does not use template-wise approach when estimating conditional probabilities. Following is the algorithm used to calculate SampEn [14]:

For a time series of N data points, define a vector $u(j)$:

$$u(j) : 1 \leq j \leq N \quad (1)$$

Fix the value of m and r . Here m is the length of sequences to be compared and r is the filtering level or tolerance for accepting matches. Tolerance is set at $r = r \cdot SD$. The SD (standard deviation) of data set has been set at $SD = 1$, by standardizing the time series. This series form $(N-m+1)$ number of $x_m(i)$ vectors within vector. Where $x_m(i) : 1 \leq i \leq N - m + 1$, having data length of m points defined as $[u(i+k) : 0 \leq k \leq m-1]$ from $u(i)$ to $u(i+m-1)$. The distance between two such vectors is calculated as:

$$d[x(i), x(j)] = \max\{|u(i+k) - u(j+k)| : 0 \leq k \leq m-1\} \quad (2)$$

This is maximum distance between scalar components of these vectors. Now calculate $B^m(r)$, which is the probability that the two sequences will match for m points, using the formula

$$B_i^m(r) = \frac{1}{(N-m+1)} * (\text{Number of vectors } x_m(j) \text{ within } r \text{ of } x_m(i), \text{ where } j \text{ ranges from } 1 \text{ to } N-m \text{ and } j \neq i) \quad (3)$$

Then define

$$B^m(r) = \frac{1}{(N-m)} \sum_{i=1}^{N-m} [B_i^m(r)] \quad (4)$$

Similarly calculate $A^m(r)$, which is the probability that the two sequences are similar for $m+1$ points, using the formula

$$A_i^m(r) = \frac{1}{(N-m+1)} * (\text{Numbers of vectors } x_{m+1}(j) \text{ within } r \text{ of } x_{m+1}(i), \text{ here } j \text{ ranges from } 1 \text{ to } N-m \text{ and } j \neq i) \quad (5)$$

Then define

$$A_i^m(r) = \frac{1}{(N-m)} \sum_{i=1}^{N-m} [A_i^m(r)] \quad (6)$$

Calculate SampEn as

$$\text{SampEn}(m, r, N) = -\ln \left[\frac{A^m(r)}{B^m(r)} \right] \quad (7)$$

Find

$$B = \left\{ \frac{[(N-m-1)(N-m)]}{2} \right\} B^m(r) \quad (8)$$

and

$$A = \left\{ \frac{[(N-m-1)(N-m)]}{2} \right\} A^m(r) \quad (9)$$

Here B is the total number of template matches of length m and A is the total number of forward matches of length $m+1$.

$$\text{So, } \frac{A}{B} = \left[\frac{A^m(r)}{B^m(r)} \right] \text{ and } \text{SampEn}(m, r, N) = -\ln \left[\frac{A}{B} \right] \quad (10)$$

Here A/B is the conditional probability that two sequences similar for m points remain similar for one more next point, i.e. both within tolerance limit r .

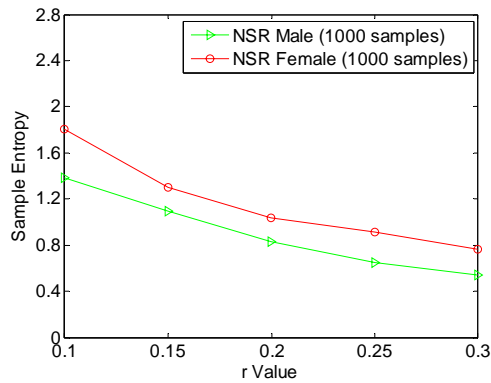
III. RESULTS & DISCUSSION

SampEn is applied on RR interval time series derived from NSR male and female subjects. Before applying the SampEn technique it is necessary to remove all the outlier points. The filtered RR-interval series is standardized to give SD of 1. This standardized series is used for determining SampEn for template lengths of $m = 2$, template matching tolerance $r = 0.10, 0.15, 0.20, 0.25, 0.3$ of SD of data series and data length $N = 1000$ to 20000 . Table II and Fig. 1 present SampEn analysis of the NSR male and female subjects. Here we can observe that SampEn value of NSR female subjects is higher than that of NSR male subjects for the data length varying from 1000 to 5000 . Afterwards with increase in data length, $N = 10000$ and 20000 , both groups overlap each other and it is difficult to distinguish them. Hence it is concluded that SampEn sometimes gives inaccurate results by assigning higher value to female subjects, because RR time series of healthy male subject have more complex pattern than that of female subjects i.e. HRV of healthy male subject is more than that of female subjects. Also as we go on increasing data length both groups overlap, so difficult to distinguish between both groups, which is in agreement with M. Costa [21] results that traditional entropy measures sometimes gives misleading results as entropy is measured on single scale, hence ignoring the complex spatio-temporal fluctuations inherent in HRV signal.

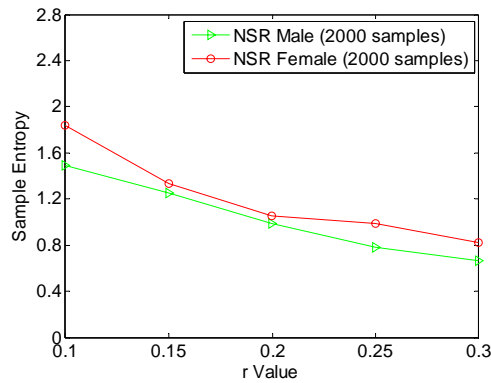
TABLE II
SAMPEN (MEAN \pm STD) OF NORMAL SINUS RHYTHM (NSR) MALE AND FEMALE SUBJECTS

| r value | | r = 0.1 | r = 0.15 | r = 0.2 | r = 0.25 | r = 0.3 |
|------------|---------|-------------------|-------------------|-------------------|-------------------|-------------------|
| Groups | Samples | mean \pm std | mean \pm std | mean \pm std | mean \pm std | mean \pm std |
| NSR Male | 1000 | 1.380 \pm 0.379 | 1.097 \pm 0.379 | 0.830 \pm 0.281 | 0.648 \pm 0.228 | 0.541 \pm 0.161 |
| NSR Male | 2000 | 1.488 \pm 0.486 | 1.250 \pm 0.266 | 0.990 \pm 0.309 | 0.779 \pm 0.150 | 0.667 \pm 0.217 |
| NSR Male | 3000 | 1.806 \pm 0.249 | 1.436 \pm 0.366 | 0.973 \pm 0.179 | 0.810 \pm 0.128 | 0.697 \pm 0.120 |
| NSR Male | 4000 | 1.679 \pm 0.185 | 1.310 \pm 0.290 | 1.039 \pm 0.124 | 0.798 \pm 0.095 | 0.744 \pm 0.066 |
| NSR Male | 5000 | 1.701 \pm 0.191 | 1.268 \pm 0.179 | 1.063 \pm 0.110 | 0.818 \pm 0.086 | 0.764 \pm 0.077 |
| NSR Male | 10000 | 1.797 \pm 0.331 | 1.377 \pm 0.169 | 1.048 \pm 0.124 | 0.792 \pm 0.099 | 0.793 \pm 0.099 |
| NSR Male | 20000 | 1.766 \pm 0.256 | 1.411 \pm 0.172 | 1.077 \pm 0.129 | 0.847 \pm 0.078 | 0.821 \pm 0.114 |
| NSR Female | 1000 | 1.802 \pm 0.468 | 1.303 \pm 0.228 | 1.035 \pm 0.259 | 0.909 \pm 0.355 | 0.768 \pm 0.186 |
| NSR Female | 2000 | 1.841 \pm 0.472 | 1.336 \pm 0.247 | 1.056 \pm 0.263 | 0.991 \pm 0.302 | 0.818 \pm 0.207 |
| NSR Female | 3000 | 2.075 \pm 0.403 | 1.365 \pm 0.224 | 1.233 \pm 0.242 | 0.919 \pm 0.115 | 0.883 \pm 0.187 |
| NSR Female | 4000 | 1.996 \pm 1.997 | 1.402 \pm 1.402 | 1.192 \pm 1.192 | 0.913 \pm 0.913 | 0.889 \pm 0.889 |
| NSR Female | 5000 | 1.954 \pm 0.284 | 1.402 \pm 0.172 | 1.193 \pm 0.240 | 0.913 \pm 0.116 | 0.830 \pm 0.173 |
| NSR Female | 10000 | 1.744 \pm 0.482 | 1.267 \pm 0.213 | 1.114 \pm 0.336 | 0.839 \pm 0.189 | 0.800 \pm 0.218 |
| NSR Female | 20000 | 1.663 \pm 0.326 | 1.208 \pm 0.119 | 0.984 \pm 0.118 | 0.755 \pm 0.101 | 0.677 \pm 0.094 |

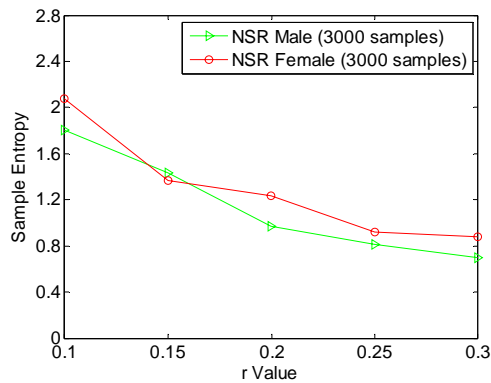
r-tolerance level; NSR - normal sinus rhythm ; std- standard deviation



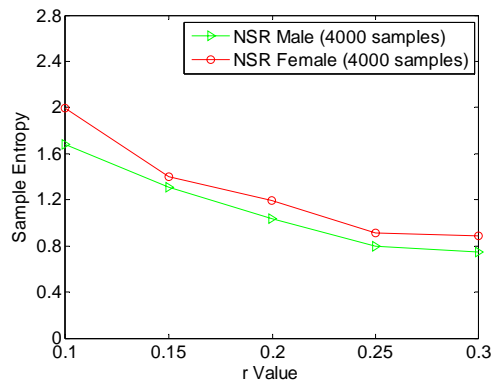
(a)



(b)



(c)



(d)

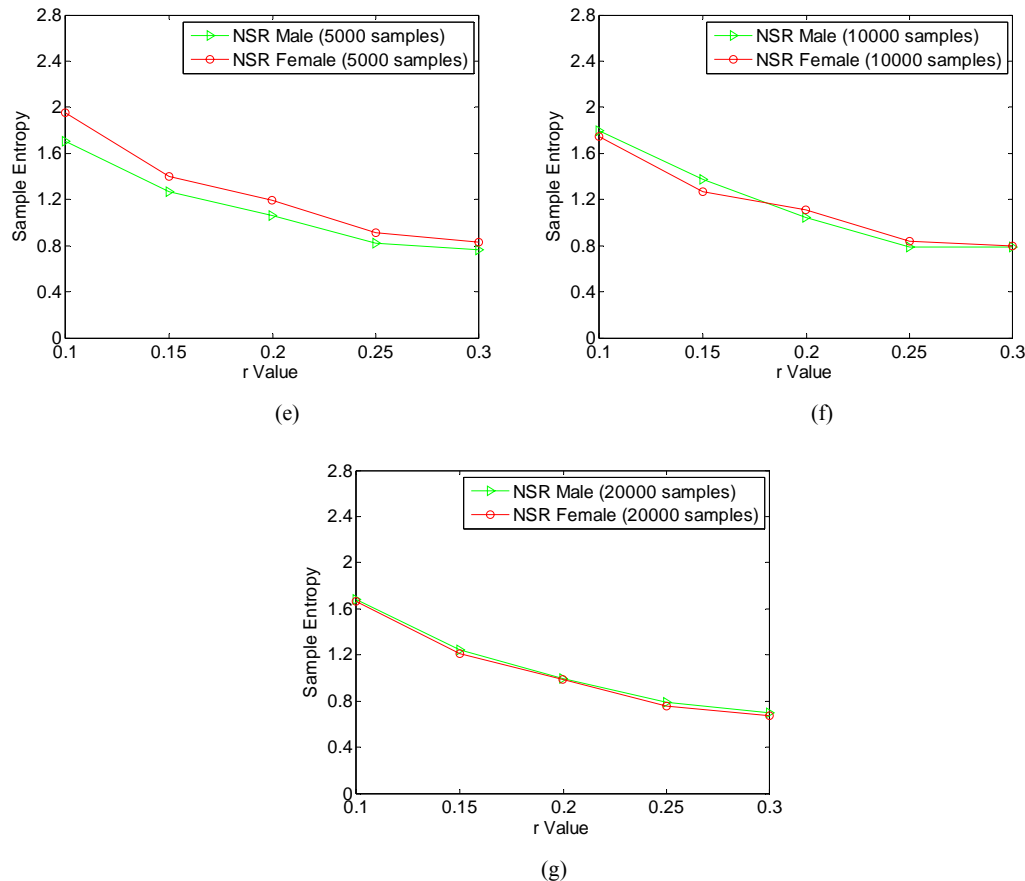


Fig. 1 (a)-(g) SampEn analysis of RR interval time series derived from healthy normal sinus rhythm (NSR) male and female subjects for different data lengths N and tolerance level r. SampEn parameter are template lengths of $m=2$, tolerance level $r = 0.1, 0.15, 0.2, 0.25, 0.3$ and data lengths $N = 1000, 2000, 3000, 4000, 5000, 10000$ and 20000

IV. CONCLUSION

In this present study, SampEn was evaluated for NSR male and female groups. The SampEn for female subjects was observed higher than NSR male subjects for the data length varying from 1000-to-5000. For higher data lengths of $N = 10,000$ and 20000 , both groups overlap each other and it is difficult to distinguish them. Thus the SampEn sometimes gives misleading results by assigning higher value to female subjects, because heart rate variability of male subject is considered more than female subjects [22]-[25]. The recently proposed method of multiscale entropy has the potential to overcome these shortcomings.

ACKNOWLEDGMENT

The authors are grateful to Department of Electronics & Communication Engineering and administration of Dr. B R Ambedkar National Institute of Technology, Jalandhar (Punjab) for providing every kind of technical and administrative help for the present work carried out in its Biomedical Signal Processing and Telemedicine Laboratory.

REFERENCES

- [1] R. M. Rangayyan, Biomedical Signal Analysis: A Case-Study Approach, IEEE Press, Wiley India, 2002.
- [2] M. Malik and A. J. Camm, Eds., Heart Rate Variability, Armonk, NY: Futura, 1995.
- [3] J. J. Goldberger, Sympathovagal Balance: How Should We Measure It, *Am J Physiol Heart Circ Physiol* 276 (1999) H1273-H1280.
- [4] M. Malik, Heart Rate Variability, *European Heart Journal* 17 (1996) 354-381.
- [5] U. R. Acharya, K. P. Joseph, N. Kannathal, C. M. Lim, J. S. Suri, Heart Rate Variability: A Review, *Med Bio Eng Comput* 44 (2006) 1031-1051.
- [6] R. K. Sunkaria, The Deterministic Chaos in Heart Rate Variability Signal and Analysis Techniques, *International Journal of Computer Applications* 35 (7) (2011) 39-46.
- [7] A. Voss, J. Kurths, H. J. Kleiner, A. Witt, N. Wessel, Improved Analysis of Heart Rate Variability by Methods of Nonlinear Dynamics, *Journal of Electrocardiology* 28 (1) (1995) 81-88.
- [8] C. Braun, P. Kowallik, A. Freking, D. Hader, K.D. Kniffki, M. Meesmann, Demonstration of Nonlinear Components in Heart Rate Variability of Healthy Persons, *American Journal of Physiology* 275 (5) (1998) 1577-1584.
- [9] M. G. Signorini, Nonlinear Analysis of Heart Rate Variability Signal: Physiological Knowledge and Diagnostic Indications, In Proceedings of the 26th Annual International Conference of the IEEE EMBS, San Francisco, CA, USA, (2004).
- [10] F. Lombardi, Chaos Theory, Heart Rate Variability and Arrhythmic Mortality, 101 (2000) 8-10.

- [11] S. M Pincus, A. L. Goldberger, Physiological Time Series Analysis: What Does Regularity Quantify, *Am J Physiol Heart Circ Physiol* 266 (1994) H1643-H1656.
- [12] S. M. Pincus, Approximate Entropy as a Measure of System Complexity, *Proc Natl Acad Sci USA* 93 (1995) 2083-2088.
- [13] S. M. Pincus, Approximate Entropy (ApEn) as a Complexity Measure, *Chaos*, 5 (1995) 110-117.
- [14] J. S. Richman, J.R. Mooran, Physiological Time Series Analysis Using Approximate Entropy and Sample Entropy, *Am J physiol heart circ physiol* 278 (2000) H2039-H2049.
- [15] V. Tuzcu, N. Selman, Sample Entropy Analysis of Heart Rhythm Following Cardiac Transplant, *Proceedings of IEEE International Conference on System, Man and Cybernetics Waicoloa*, 10-12 October, Hawaii (2005) 198-202.
- [16] H.M. Al Angari, A.V. Sahakian, Use of Sample Entropy Approach to Study Heart rate Variability in Obstructive Sleep Apnea Syndrome, *IEEE Transactions on Biomedical Engineering* 54 (10) (2007) 1900-1904.
- [17] R.K. Sunkaria, V. Kumar, S.C. Saxena, Sample Entropy Based Heart Rate Variability Characterization, *International Journal of Medical Engineering and Informatics (IJMEI)* 4 (4) (2012) 398-405.
- [18] R.G. Esteban, J.P. Marques de Sa, J.L.R. Alvarez, O.B. Perez, Characterization of Heart Rate Variability Loss with Aging and Heart Failure Using Sample Entropy, *Computers in Cardiology* 35 (2008) 41-44.
- [19] <http://www.physionet.org/> site.
- [20] K.J. Kemper, C. Hamilton, M. Atkinson, Heart rate variability: Impact of Differences in Outlier Identification and Management Strategies on Common Measures in Three Clinical Populations, *International Pediatric Research Foundation, Inc.* 62 (3) (2007) 337-342.
- [21] M. Costa, A. L. Goldberger, C. K. Peng, Multiscale Entropy Analysis of Complex Physiologic Time Series, *Physical Review Letters* 89 (6) (2002) 1-4.
- [22] D. Ramaekers, H. Ector, A.E. Aubert, A. Rubens and F. Van de Werf, "Heart Rate Variability and Heart Rate in Healthy Volunteers, Is the Female Autonomic Nervous System Cardioprotective", *European Heart journal* 19 (1998) 1334-1341.
- [23] S. Saleem, M. M. Hussian, S. M. I. Majeed and M. A. Khan, "Gender Differences of Heart Rate Variability in Healthy Volunteers", *J Pak Med Assoc* 62 (5) (2012) 422-425.
- [24] W. Aziz, F.S. Schlindwein, M. Wailoo, T. Biala and F.C. Rocha, "Heart Rate Variability Analysis of Normal and Growth Restricted Children", *Clin Auton Res Springer* 2011
- [25] T. Yukishita, K. Lee, S. Kim, Y. Yumoto, A. Kobayashi, T. Shirasawa and H. Kobayashi, "Age and Sex Dependent Alternations in Heart Rate Variability: Profiling the Characteristics of Men and Women in their 30s", *Anti-Aging Medicine* 7(8) (2010) 94-99.

Department, Dr. B R Ambedkar National Institute of Technology, Jalandhar under the guidance of Dr. Ramesh Kumar Sunkaria, Assistant Professor, Electronics and Communication Engineering Department, Dr. B R Ambedkar National Institute of Technology, Jalandhar. Her area of research interest is Biomedical Signal Processing.

Ramesh Kumar Sunkaria was born in Kot Khalsa, (Amritsar), on February 20, 1967. He received the B.Tech. degree in Electronics Engg. from Department of Electronics Technology, Guru Nanak Dev University Amritsar, and M.Tech. (Hons.) Degree in Electronics Engg. from Guru Nanak Dev Engineering College, Ludhiana (Punjab Technical University, Jalandhar) in 1990, and 2004 respectively. He has completed his Ph.D. degree from Electrical Engineering Department, Indian Institute of Technology Roorkee in June, 2010 under the guidance of Dr. Vinod Kumar, Professor and Head, Electrical Engineering Department, IIT Roorkee, Dr. S. C. Saxena, Director, IIT Roorkee and Dr. Achala M. Singhal, Professor and Head, Cardiology, Department, HIHT Dehradun (Uttarakhand).

He worked as Engineer in Bharat Heavy Electricals Limited, Haridwar upto June 2004. Thereafter he joined Indian Broadcasting (Engineers) Service, Govt. of India and worked there until August 1996. Afterwards he joined academics and at present he is working as Assistant Professor in Department of Electronics & Communication Engineering, Dr. B. R. Ambedkar National Institute of Technology, where he has been teaching UG/PG courses related to signal processing and communication engineering. His professional research interests are in signal processing, in particular applied to biomedical applications.

Puneeta M. received her B.Tech. (Electronics & Communication Engineering) degree in 2007 and M.Tech.(Electronics & Communication Engineering) in 2010 from Punjab Technical University, Jalandhar. Presently she is Ph.D. Research Scholar in Electronics and Communication Engineering