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碩士論文

穿戴式紡織電極之即時心率估計系統的開發與實現

Development and Implementation of a Real-Time Heart-Rate Estimation System for Wearable Textile Sensors

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摘要

本論文提出一使用穿戴式紡織電極的即時心率估計系統。由於心電圖訊號的量測容易 受到受測者穿戴時因呼吸或走動所造成的干擾影響,致使訊號品質嚴重衰減,因此所量測 到的訊號經類比至數位轉換後的處理,實爲我們是否能有效應用的關鍵。爲此,我們提出 了子空間追蹤方法以追蹤並消除基線電位的影響,然後加以絕對值的運算以符合後續方 法的需要,接著使用自我相關度的估計方法來估測心率。爲了達到能即時估計心率的需 求,我們從 Power Method 發展出適應性子空間追蹤技術,並應用快速傳立葉轉換 (FFT) 來實現即時心率估計的相關分析。

在硬體實現方面,前端類比電路爲執行心電圖訊號的撷取、雜訊濾除及放大,並透過 類比至數位的轉換將心電圖送入 FPGA 作進一步的處理與分析。為了提高未來所設計出 之硬體的運用彈性,我們將整體心電圖數位訊號處理的部分大致區分爲幾個模組,以 IP (Intellectual Property)的概念來作設計,之後利用簡單的控制電路予以整合,最後將程式 碼編譯並下載至 Altera EP2C35F672 Cyclone II FPGA 上以驗證我們所發展的系統。在 論文最後,我們將進行實際量測以檢視此即時心率估計系統的實用性。

關鍵詞:心電圖訊號,穿戴式紡織電極,基線飄移,心率估計, FPGA 實現

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Development and Implementation of a Real-Time Heart-Rate Estimation System for Wearable Textile Sensors

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Abstract

This thesis presents a real-time heart-rate estimation system for wearable textile sensors. The ECG signals measured from wearable dry electrodes are easily affected by interference generated from the electrode-skin interface such that the signal quality may degrade dramatically. To conquer these obstacles, in the proposed heart-rate estimator we first derive the subspace approach for the removal of baseline wander, then use a simple absolute operation for the demand of the following method, and finally apply the correlation technique for evaluating the heart rate. One indicator for signal quality is also proposed to distinguish the reliability of the heart rate estimation. To achieve the real-time requirement, we develop a simple adaptive algorithm from the numerical power method to realize the subspace technique and apply the fast Fourier transform (FFT) technique for the realization of the correlation method such that the estimator can be implemented using a field programmable gate array (FPGA).

In the hardware implementation, analog front-end circuits are incorporated with a printed circuit board for signal amplification, filtering and an analog-to-digital converter. The ECG data are transmitted to an FPGA to operate further signal processing and the heart rate estimation. The whole proposed estimator is separated roughly into several basic modules. All of them are designed in the form of intellectual property (IP) for

the reusable flexibility. The estimator can be easily realized by connecting these basic modules. The resulting codes are compiled and downloaded to the Altera EP2C35F672 Cyclone II FPGA device for fast verification. Experimental results for ECG signals measured in practice demonstrate the feasibility of the presented real-time heart-rate estimation system for wearable textile sensors.

Keywords: Electrocardiogram, Wearable textile electrodes, Baseline wander, Heart rate estimation, FPGA implementation



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Chapter 1

INTRODUCTION

1.1 Introduction

An electrocardiogram (ECG) is a very important physiological signal as a diagnosis tool of various cardiac diseases. Some chronic disease can be detected according to the results of ECG examination and signal analysis, such as arrhythmia, myocardial infarction, and hypercalcemia. The initial symptoms of these chronic disease are usually ignored in practical clinical examination. The real-time storage and transmission of digital ECG signals, including the Holter monitor, are useful and widely used in hospital and clinics. The Holter monitor, also called an ambulatory electrocardiography device, is a mobile ECG measurement apparatus and a recording medical device. It is used to continuously record the electrical activity of the heart for 24 hours or more. However, the application of an ECG medical device for long-term usage is constrained due to the discomfort of feeling caused by badly ventilated electrodes. In this regard, we intend to design and implement a real-time heart-rate estimation system for wearable textile sensors and develop certain signal processing algorithm for heart rate estimation since the heart rate and its variability (HRV) contain important physiological information [1, 2].

The wearable textile sensors are soft and comfortable, and they are durable. However, since the textile electrodes are only in dry contact on the skin, the measured ECG signals are highly susceptible to interference caused by respiration or movable electrodes and resulting unfixed contact. The signals may exhibit baseline wandering phenomena and

noisy aberrations. These factors result in that estimating the heart rates from users who are wearing textile sensors becomes a sophisticated work. Consequently in this thesis, we focus on processing the received ECG data to estimate the heart rate of the wearing person in real time at first. The real-time requirement imposes further constraints on the work. We first use the subspace technique for removing the baseline wandering interference. Simple absolute operation is taken to enhance the capability of the following method. Then, the correlation technique is applied to estimate the heart rate. To meet the real-time requirement, we develop a simple adaptive subspace algorithm and apply the fast Fourier transform (FFT) for computing the correlation value required for heart rate estimation. A signal quality indicator is further presented to distinguish the usefulness of the estimated heart rate. Through the proposed algorithms, we can effectively estimate the heart rates from users using the developed system for wearable textile sensors.

To develop a small-size and light-weight mobile ECG monitoring device, the hardware implementation is based on the design idea of system on chip (SOC). We use discrete elements to implement a printed circuit board for signal amplification, filtering and an analog-to-digital converter. The digitalized ECG data from the A/D converter are transmitted to an FPGA to operate further signal processing and the heart rate estimation. We separate the entire proposed estimator roughly into several basic modules. All of them are designed in the form of intellectual property (IP) so as to expand the system more easily. Finally, we integrate all functions by adding a few simple control circuits to connect them. The conclusive codes are compiled and downloaded to the Altera EP2C35F672 Cyclone II FPGA device for verification. Experimental results for ECG signals measured in practice are demonstrated through an LCD and seven-segment displays for the exhibition of the original ECG signals, the output signals after removing baseline wandering interference, the estimated heart rate and the signal quality indicator.

1.2 Background and Motivation

Because of the compact pace of modern life, unhealthy eating habits of people and low exercise, burdens on the body are increasing and citizens are usually accompanied by

chronic diseases. The need for highly efficient and highly quality medical systems is becoming urgent. In recent years, a number of research organizations have studied portable and wearable devices for monitoring physiological signals. A comfortably wearable system with capability to measure and transmit vital signals wirelessly is becoming more and more important and helpful [3]. The wearable system not only examines people's health conditions, but also provides a long-term and real-time monitoring. The wearable sensors especially those made of textiles have been popular recently. For instance, using the wearable medical clothes for monitoring respiration activity and ECG signals [4], for tele-home healthcare [5], for neurological rehabilitation [6] have been proposed. Extensive research effort for developing wearable medical devices has been immensely taken in the world such as the VTAMN project in France, the WEALTHY project in Europe, and the LifeShirt in USA [7].

Based on the reasons described above, we attempt to develop a system in clothes [8] sewn with steel textile sensors for the incorporation of sensing, monitoring and information processing device. To diminish the discomfort of feeling and skin irritation, we adopt fabric-based electrodes rather than traditional sticky electrodes. But the measured ECG signals are often contaminated by various types of noise, such as noise from electrode-skin contact, respiration, power-line interference, etc. An ECG monitoring device with appropriate signal processing algorithm can provide more information and instant response, and hence it is the most significant goal in this thesis.

1.3 Organization of the Thesis

The remainder of this thesis is organized as follows. Chapter 2 introduces the principle of electrocardiogram (ECG) and describes how this physiological signal produced. Furthermore, the properties of biopotential electrodes and some common problems encountered with acquisition of ECG signals in practical measurement are also given in this chapter. In chapter 3, the real-time heart-rate estimator, involved in the adaptive subspace technique for baseline wander removal and the correlation technique for heart rate estimation, is briefly introduced and simulation results are presented along with discussions. Chapter 4

exhibits the entire hardware structure of the real-time heart-rate estimation system. Then, analog circuits for signal amplification and filtering, and an analog-to-digital converter (ADC) are mentioned. In chapter 5, the FPGA implementation based on several basic modules and some experimental results to show the effect and validity of our proposed approaches are presented. Finally, the conclusion and future work are given in chapter 6.



Chapter 2

BACKGROUND

There are various bioelectrical signals in the body that are recorded routinely in modern medical devices. The sensor or transducer can convert energy or information from the measurand to the electrical signal. This signal is then processed and displayed so that people can easily perceive the information. These bioelectrical phenomena, including electrocardiogram (ECG), electroencephalogram (EEG) and electromyogram (EMG), closely related to most diseases are valuable physiological information for disease prevention in medicine and for diagnosis [9]. Since the research in this thesis is based on the real-time heart-rate estimation, we briefly introduce the principle of the electrocardiogram (ECG). Then several biopotential electrodes are mentioned, and the reason why we adopt the textile electrodes is discussed later. Finally, the problems frequently encountered with acquisition of ECG signals are described in the end of this chapter.

2.1 Introduction to Electrocardiogram (ECG)

An electrocardiogram (ECG) is the most commonly used medical method that can be applied to detect the heart diseases and examine the function of autonomic neuroregulation through the investigation of R-R interval analysis [10]. The ECG records the electrical activity of the heart over time in the form of a continuous strip graph. The typical cardiac cells have a resting membrane potential of approximately -90 mV, called polarization. If the muscle fibers of different parts of the heart accept electrical excitation, the my-

ocardium depolarizes with positive activation potential and leads to cardiac contraction. Formation and conduction of these electrical impulses produce weak electrical currents that spread through the body. Fig. 2.1 depicts the temporal relationship between each cellular activities in various regions of the heart. Several different types of cardiac tissues,



Fig. 2.1: Representative electrical activity from various regions of the heart [9]

such as SA and AV nodes, atrial and ventricular muscles, as well as Purkinje fibers, are all electrically excitable, and each type of cell exhibits its own characteristic action potential. The rhythmic cardiac cycle is generated by the summation of these action potentials and measured by biopotential electrodes on one's body surface, usually on the chest.

A typical cardiac cycle of normal ECG, as shown in Fig. 2.2, consists of a P wave, a QRS complex, a T wave, a PR interval and a QT interval. A small U wave is sometimes seen after the T wave. Every portion exhibits depolarization and repolarization of the cardiac muscle fibers and contains important diagnostic information. For instance, the R-R interval, the distance between the peaks of two consecutive R waves, is very helpful in evaluating the person for cardiac rhythm and for heart rate which we concentrate on in this thesis.



Fig. 2.2: Basic components of the ECG waveform

• P wave

The P wave corresponds to sequential activation (depolarization) of the left and right atria. The impulse originates in the sinoatrial (SA) node and transmits to the atrioventricular (AV) node through three internodal pathways. Then it turns into the P wave. The duration of the P wave for normal adults is usually 0.08 seconds. Irregular or absent P waves may indicate atrial problems.

• QRS complex

The QRS complex is the electrical trait of the current that causes contraction of the left and right ventricles (normally both ventricles are activated simultaneously). The main components of this complex are the Q, R and S waves. Because the myocardium of the ventricles composed of more muscle mass is much more forceful than that of the atria, the R wave is in a greater positive deflection on ECG. The duration of the QRS complex is normally less than or equal to 0.10 seconds. Abnormal QRS complex may indicate ventricular problems, such as myocardial infarction and ventricular hypertrophy.

• T wave

The T wave represents the repolarization of the ventricles. It should be in the same direction as the QRS complex. Abnormal T wave may indicate electrolyte disturbance, like hypercalcemia and hypocalcemia.

• U wave

The U wave is a quite small wave and follows the T wave by definition. It is not always seen. Several theories have been proposed recently about what it represents, including slow repolarization of the ventricular papillary muscles or Purkinje fibers.

• PR interval

The PR interval is measured from the beginning of the P wave to the beginning of the QRS complex. It encompasses the P wave and the PR segment. The PR segment is normally at zero potential and mainly caused by conduction delay in the AV node. A normal PR interval is usually 0.12 to 0.20 seconds. A prolonged PR interval indicates a first-degree heart block, whereas a shorting one may indicates the early ventricular depolarization.

• QT interval

The QT interval is measured from the beginning of the QRS complex to the end of the T wave. The interval involves in the QRS complex, the ST segment and the T wave. The ST segment located between the QRS complex and the T wave is related to the average duration of the plateau regions of individual ventricular cells. It is normally at zero potential also. The QT interval represents the time period from the ventricular depolarization to repolarization. The interval varies with the heart rate, age and sex. The duration of the QT interval usually lasts about 0.40 seconds and should be shorter than one half of the preceding R-R interval. A prolonged QT interval indicates possible arrhythmia.

2.2 Biopotential Electrodes

In order to measure and record action potentials in the body, it is necessary to provide some biopotential electrodes. Since current flows from the body in practical measurement are very small, biopotential electrodes should have the capability of conducting a current across the interface between the body and the electronic measuring circuit. There are two types of electrodes, body-surface and internal electrodes, taken in medical instrumentation systems. Because the noninvasive examination has been popular and rapidly developed in recent years, the body-surface electrodes are widely used in application for measuring physiological signals. Whatever the electrodes are, they serve as a transducer to change an ionic current into an electronic current, because currents are carried in the body by ions, while they are carried in the electrode and lead wire by electrons.

One of the most frequently used body-surface electrodes is the metal-plate electrodes. This conventional electrode has been developed for many years and now in widespread use with the electrocardiographic measuring apparatus. Fig. 2.3 (a) illustrates a disposable foam-pad electrode, which is one of the metal-plate electrodes. This style of electrode is disk-shaped, fabricated from relatively large disk of plastic foam material with a silver-plate snap. A lead wire is then snapped onto the electrode and connect it to the measuring apparatus. To apply the electrode to the patient, the area of skin on which the electrode is to be placed should be clean first. In attaching an electrode to the skin, we generally use an electrolyte gel which contains Cl^- as the principal anion to establish and maintain good contact. However, patients' skin may be irritable with the silver/silver chloride (Ag/AgCl) electrodes. Furthermore, this type of electrode is not comfortable for long-term monitoring. As a result, wearable sensors with suitable material have been flourishing recently.

With the requirement for the patient to increase the comfort of feeling and the need for high quality in health and medicine, the development of fabric-based electrodes is becoming more important. In this study, we measure ECG signals using wearable sensors as shown in Fig. 2.3 (b) to estimate the heart rate of the wearing person in real time. The wearable sensors are soft and comfortable due to the usage of textile electrodes rather



Fig. 2.3: (a) Disposable foam-pad electrode (b) Steel textile electrode

than traditional sticky electrodes. They are also well-ventilated and hence suitable for long-term monitoring. Moreover, fabric-based electrodes are washable and durable for economical consideration.

2.3 Problems Frequently Encountered

There are some common problems encountered with acquisition of ECG signals in practical measurement. These factors should be taken into account in the design and application of the wearable real-time heart-rate estimation system. Otherwise, valuable and helpful physiological information including the ECG data will be corrupted by interference.

A major source of interference is introduced from the electric-power system. It is inevitable, especially the system provided power with mains supply. The power-line interference is transparent in the recorded trace and brings about a severe problem. In addition, current flows from the mains electricity supply through the body and ground impedance result in a common-mode voltage on the body. The prevalent solution to this problem is the utilization of an amplifier with high common-mode-rejection ratio to minimize the effect of a common-mode voltage.

Serious artifact caused by motion of the electrodes may produce variations in potential that are perhaps greater than original ECG potentials, particularly for wearable textile electrodes. The potential in this situation will cause abrupt deflection and saturation as a result of the increase of charge on capacitances in the analog circuits and slowly drift back to original baseline in ECG signal analysis. Furthermore, baseline wander mainly caused by respiration, loose electrode contact and movement yields low-frequency distortion. The baseline voltage is no longer at zero potential, that is, it is not horizontal anymore. Consequently, we develop an adaptive baseline wander removal algorithm and detail interpretations about this algorithm are discussed in the next chapter.

Chapter 3

THE REAL-TIME HEART-RATE ESTIMATOR

The proposed real-time heart-rate estimator of the wearable sensor system consists of two major approaches. First of all, it is a critical step to remove the baseline wander in ECG signals for heart rate estimation. We use the subspace approach to find the eigenvector of the data correlation matrix associated with the largest eigenvalue. This eigenvector sufficiently characterizes the subspace of the baseline wandering component and hence can be used for the removal of baseline wander. Then the simple absolute operation is applied for the demand of the following method. Finally we use the correlation technique involved in evaluating the correlation value and searching the peak position for heart rate estimation. Elaborate explanations for each block are discussed as below. The block diagram is shown in Fig. 3.1.

Fig. 3.1: The real-time heart-rate estimator

3.1 Adaptive Subspace Technique for Baseline Wander Removal

The baseline wander in ECG signals is especially notorious in using the wearable electrodes made of steel textiles. The interference is mainly introduced by electrode changes due to respiration, loose electrode contact and the movement of the wearing person particularly during exercise. Consequently, eliminating the baseline drift is a primary step to produce a stable signal and enhance the signal characteristic in ECG signal analysis, not only for post signal processing but also for reliable diagnosis. Many methods about baseline wander have been proposed in last twenty years. We adopt the subspace approach [11] and derive an adaptive baseline wander removal algorithm to achieve the real-time requirement and high performance.

From the experience on experiments, we observe that using the subspace of rank one is sufficient to obtain the baseline wandering component in our application. Hence, the power method [12], provided for tracking a principal subspace spanned by the eigenvector corresponding to the largest eigenvalue, can be modified to derive a simple but efficient adaptive subspace algorithm. Simultaneously, it is easily realized in real time.

Denote the dominant signal subspace q(n) as an $N \times 1$ orthonormal vector. The data correlation matrix $\Phi(n)$ is a slowly varying function of time as it is updated according to the following formula

$$\Phi(n) = \alpha \Phi(n-1) + (1-\alpha)\boldsymbol{x}(n)\boldsymbol{x}^{T}(n)$$
(3.1)

where $0 \ll \alpha < 1$ and $\boldsymbol{x}(n) = [r(n), r(n-1), ..., r(n-N+1)]^T$ is a input signal vector. Given an initial 2-norm of unit vector $\boldsymbol{q}(0)$, the power method has the iteration as below

$$\boldsymbol{p}(n) = \Phi(n)\boldsymbol{q}(n-1) \tag{3.2}$$

$$= [\alpha \Phi(n-1) + (1-\alpha)\boldsymbol{x}(n)\boldsymbol{x}^{T}(n)]\boldsymbol{q}(n-1)$$
(3.3)

Decomposing q(n) into one component along the previous subspace spanned by q(n-1)and the other orthogonal complement subspace $\delta(n)$, then

$$\boldsymbol{q}(n) = \boldsymbol{q}(n)^T \boldsymbol{q}(n-1) \boldsymbol{q}(n-1) + \boldsymbol{\delta}(n)$$
(3.4)

Substituting the above equation into (3.3) and using $p(n-1) = \Phi(n-1)q(n-2)$, we get

$$\boldsymbol{p}(n) = \alpha \boldsymbol{p}(n-1)\boldsymbol{q}^{T}(n-1)\boldsymbol{q}(n-2) + \alpha \Phi(n-1)\boldsymbol{\delta}(n-1) + (1-\alpha)\boldsymbol{x}(n)\boldsymbol{x}^{T}(n)\boldsymbol{q}(n-1)$$

In fact, the angle between q(n-1) and q(n-2) will be very small such that $q^T(n-1)q(n-2) = 1$ and $\delta(n-1) = 0$ can be assumed. Therefore, we obtain the adaptive dominant subspace tracking algorithm given by

$$\boldsymbol{p}(n) = \alpha \boldsymbol{p}(n-1) + (1-\alpha)\boldsymbol{x}(n)^T \boldsymbol{q}(n-1)\boldsymbol{x}(n)$$
(3.5)

$$\boldsymbol{q}(n) = \frac{\boldsymbol{p}(n)}{\parallel \boldsymbol{p}(n) \parallel}$$
(3.6)

Then, projecting the received signal x(n) onto the obtained dominant signal subspace q(n) yields the baseline wandering component below

$$\boldsymbol{b}(n) = \boldsymbol{x}^{T}(n)\boldsymbol{q}(n)\boldsymbol{q}(n)$$
(3.7)

By subtracting the baseline wandering component from the input signal, we get the final output

$$\boldsymbol{y}(n) = \boldsymbol{x}(n) - \boldsymbol{b}(n) \tag{3.8}$$

In summary, the algorithm is listed in Table 3.1.

Table 3.1: Adaptive Subspace Algorithm

Initialize: $q(0) = [1, 0, \dots, 0]^T$; $p(0) = 0$; $0 \ll \alpha < 1$				
For Each Time Step Do:				
$\boldsymbol{x}(n) = [r(n), r(n-1),, r(n-N+1)]^T$: input signal vector				
$\boldsymbol{p}(n) = \alpha \boldsymbol{p}(n-1) + (1-\alpha) \boldsymbol{x}(n)^T \boldsymbol{q}(n-1) \boldsymbol{x}(n)$				
$oldsymbol{q}(n) = rac{oldsymbol{p}(n)}{\ oldsymbol{p}(n)\ }$				
$oldsymbol{b}(n) = oldsymbol{x}^T(n)oldsymbol{q}(n)oldsymbol{q}(n)$: baseline wander				
$oldsymbol{y}(n) = oldsymbol{x}(n) - oldsymbol{b}(n)$				

3.2 Correlation Technique for Heart Rate Estimation

The heart rate is traditionally estimated as the average of the reciprocal of the R-R interval within a specific time window or as the number of heartbeats per unit time in ECG analysis. The proposed approach in this section is based on the idea of characterizing ECG signals as periodic signals with the period of R-R peaks for the fundamental frequency approximately. This is a classic problem of frequency estimation and has been studied for a long time [13]. The correlation method can be used to evaluate the correlation value and search the position where the R-wave event occurs.

The correlation value based on self-correlated concept for a shifted length m is defined as below

$$c_r(m) = \sum_n x(n)x(n+m)$$
(3.9)

It sums up the products of the original signal x(n) and its shifted version x(n + m). If the signal x(n) is perfectly periodic, the peak correlation value occurs when the shifted length m equals the multiple of the signal period. Nevertheless, it is unsuitable for realtime process that computing the correlation value using (3.9) directly because of heavy calculation. As a result, we make use of the property that the correlation operation can be regarded as the convolution in a sense, and then Fourier transform is applied to reduce the computation. It can be shown that

$$\begin{split} C_r(e^{j\omega}) &= \sum_m c_r(m) e^{-j\omega m} \\ &= \sum_m \sum_n x(n) x(n+m) e^{-j\omega m} \\ &= \sum_m \sum_k x(-k) x(m-k) e^{-j\omega m} \\ &= \sum_m (\sum_k x(-k) e^{-j(-\omega)(-k)}) x(m-k) e^{-j\omega(m-k)} \\ &= X(e^{j\omega}) X(e^{-j\omega}) \\ &= X(e^{j\omega}) X^*(e^{j\omega}) \text{ if } x(n) \text{ is real} \end{split}$$

Before operating the FFT, it is necessary to provide zero padding in time domain when the original signal is time limited (nonzero only over some finite duration spanned by the original samples). This procedure allows the computation of the linear convolution or linear correlation of two finite-length sequences using FFT [14]. More zero padding yields denser interpolation of the frequency samples, and ideal sampling rate conversion is thus achieved. In signal processing, zero padding in time domain corresponds to a higher interpolation density in frequency domain. We will obtain the correlation value $c_r(m)$ by taking the inverse FFT of $|\hat{X}(e^{j\omega})|^2$. Note that $\hat{X}(e^{j\omega})$ is the FFT of $\hat{x}(n)$, where $\hat{x}(n)$ is the zero-padding version of x(n). In other words, the computation of correlation can be realized via the FFT and inverse FFT (IFFT) operation.

As discussed earlier, the peak correlation values occur in every shifted length equal to the multiple of signal period if the signal x(n) is almost periodic. Then we just find the first peak position of the correlation value except for the region m less than 60 by direct searching, and the average R-R interval will be obtained. The reason why excluding that section is that the correlation value has much larger value in the section under 60 than the remaining particularly when two sequences have not shifted yet. The set value of 60 limits the maximum heart rate to 200 heartbeats per minute under the condition of the sampling frequency of 200 Hz. In general, the heart rate is expressed as heartbeats per minute according to the following formula

Heart Rate =
$$60 \times \frac{\text{Sampling Frequency}}{\text{R-R interval}}$$
 (3.10)

However, ECG signals may be indistinct due to wearable dry electrodes, especially in motion of the wearing person. The peak effect of the correlation value vanishes when the signal quality degrades. Consequently, we propose a signal quality indicator i(n) to show how reliable the estimated heart rate is. The indicator is defined as the ratio of the difference between the position of the second peak and that of the first peak over the position of the first peak. Also, the peak value is easily found by direct searching from the correlation value. That is

$$i(n) = \frac{\text{position of 2nd peak}(n) - \text{position of 1st peak}(n)}{\text{position of 1st peak}(n)}$$
(3.11)

Note that the index n is used in the indicator because the proposed estimator will compute one indicator value for each sample. If the signal is far away from periodic, the estimated heart rate through the above method should not be taken into account because the peak position is no longer the multiple of the signal period. When the indicator value i(n) is close to unity, the quality of ECG signals is better and the estimated heart rate will be more reliable. When i(n) is far away from unity, the estimated heart rate may be improper at this time. Fig. 3.2 illustrates the realization of this correlation method.

Three experiments are presented to show the effectiveness of the proposed methods. We acquire the ECG data with 8-bit resolution and sampling rate of 200 samples per second via the smart shirt previously developed by Ming Young Biomedical Corporation. By experience, the vector length of the adaptive subspace approach is set to 40. Therefore, the output signals after the removal of baseline wandering interference will be delayed about 40/200 = 0.2 seconds with respect to original received signals. Consider the efficiency of the heart rate estimation, the chosen FFT or IFFT length of the proposed correlation approach is 2048. Hence, the first estimate occurs after about 10 seconds. Afterward, every new sample data will yield a new estimate and indicator.

In the first experiment, we examine the performance of the adaptive subspace algorithm for the removal of baseline wander. Fig. 3.3 depicts three plots. The upper figure shows the original ECG data about 50 seconds measured via wearable sensors. The baseline wandering component estimated by the proposed approach is shown in the middle

Fig. 3.3: The original ECG signals, the baseline wandering component, and the output signals without baseline wandering interference

figure. The bottom figure exhibits the output signals after removing the baseline wander. This results demonstrate that the original ECG signals are contaminated with baseline wandering interference and the adaptive subspace technique gets rid of the baseline aberrations successfully.

The second experiment demonstrates the performance of proposed heart-rate estimator. The ECG data are measured from the person who is wearing the smart shirt with wearable textile electrodes in *intimate* contact on the skin. The person is initially sitting still for about 30 seconds, then standing up and walking at a regular pace for about one minute, and finally jogging for near one minute. The received ECG data is shown in the first figure of Fig. 3.4. From this figure, we observe that the measured ECG signals involve in irregular aberrations in the intervals from 32 seconds to 46 seconds and from 96 seconds to 102 seconds because of the posture transitions of the wearing person. The

Fig. 3.4: The original ECG data, the output signals without baseline wandering interference, the estimated heart rate in heartbeats per minute, and the signal quality indicator for the person with wearable sensors in tight contact on the skin

second figure exhibits the output signals after the removal of baseline wandering interference. The estimated heart rate in heartbeats per minute is shown in the third figure and the fourth figure depicts the signal quality indicator in the meanwhile. Note that the signal quality indicator is capable of discriminating the validness of the heart rate estimate by the relation with respect to unity as above mentioned. In this experiment, the heart rate, except in those intervals with degraded signal quality, is obtained correctly by virtue of the proposed heart-rate estimator and hence shows the viability of the method.

Finally, we exhibit the heart rate estimation for ECG signals measured from the person with wearable sensors in *loose* contact on the skin instead of in tight contact. The original ECG data, the output signals without baseline wandering interference, the heart rate estimate, and the signal quality indicator are shown in Fig. 3.5. The posture of the person

Fig. 3.5: The original ECG data, the output signals without baseline wandering interference, the estimated heart rate in heartbeats per minute, and the signal quality indicator for the person with wearable sensors in loose contact on the skin

also changes from sitting still initially through walking steadily until jogging. At first, the correct heart rate estimate is obtained in the period of sitting still. Afterward, erroneous results are acquired because the ECG signal quality degrades dramatically. Abrupt deflection is mainly caused by the loose contact of the sensors on the skin that results in the movement of wearable electrodes during the mobile period. The signal quality indicator distinguishes the accuracy of heart rate estimate appropriately. This experiment demonstrates that even if the ECG data with extremely poor signal quality may be obtained via wearable textile electrodes, the proposed estimator combined with the signal quality indicator can still extract useful information at most time.

Chapter 4

HARDWARE IMPLEMENTATION

Numerous conditions should be taken into account to realize a real-time heart-rate estimation system through preceding approaches in practice. Above all, it is important to deal with the interference generated from the electrode-skin interface, the electric device, etc. Then, the power consumption should be low enough to monitor for long-term care. In the hardware implementation of the proposed algorithm, it is necessary to adopt an efficient design flow in order to reduce design time. We attempt to realize these methods on an field programmable gate array (FPGA) here for fast verification. The entire hardware architecture is illustrated later.

4.1 Hardware Architecture Design

The main purpose of this thesis is the design and implementation of a real-time heartrate estimation system for wearable sensors. The approaches in theory are elaborated previously. The integral hardware design includes ECG signal acquisition, preprocessing and module consolidation based on the real-time heart-rate estimator as well as results display. Fig. 4.1 depicts the entire hardware architecture. After receiving ECG signals from wearable textile electrodes, it is a primary step to filter the frequency distortion and power-line interference. Consequently, analog front-end circuits are provided. The circuits also adjust the amplitude of output voltage for the coordination of the analog-todigital converter. The ECG data through the A/D converter are transmitted to an FPGA

Fig. 4.1: The integral structure of the real-time heart-rate estimation system

to operate further signal processing and the heart rate estimation. The operation is based on the FPGA device developed by Altera combined with the related software, Quartus II, to develop the proposed algorithm for real-time heart-rate estimation. All functions are performed as individual modules so as to expand the system more easily in the future. Finally, we integrate all designed modules, which involve in the A/D converter control, baseline wander removal, heart rate estimation and output display control modules, with an FPGA and demonstrate results through an LCD and seven-segment displays for the exhibition of the originally measured ECG signals, the output signals after the removal of baseline wander, the estimated heart rate and the signal quality indicator.

4.2 Analog Circuit Design

The amplitude of original ECG signals is so weak (about 1mV) that it is necessary to amplify the signals to appropriate voltage level for observation. One of aims of the analog front-end circuits is to enlarge received ECG signals from the body, at least 0.5V prop-

erly. For this reason, the magnification of the designed analog circuit is set to 600, and the output voltage level will achieve 0.6V approximately under the consideration of the input voltage of the A/D converter ranging from 0V to 2.5V and the measured ECG signals which may have a baseline drift. However, unexpected disturbance and power-line interference may be amplified simultaneously as the analog circuits amplify weak ECG signals. The design of the analog front-end circuits should be taken into account for filtering out the power-line interference of 60 Hz, the adequate frequency band for signal processing (about from 0.5 to 50 Hz for the purpose of ECG monitoring), the suitable magnification, and the protection for users. A basic analog circuit consists of an instrumentation amplifier, a notch filter, a lowpass filter, a highpass filter and a noninverting amplifier. It is shown in Fig. 4.2. It is important that the whole circuits are manipulated in 3.3V single supply. Each part is introduced in detail respectively in this chapter.

Fig. 4.2: Basic analog circuits for signal preprocessing

4.2.1 Pre-Amplifier

The pre-amplifier should have a high input impedance and a high common-mode rejection ratio (CMRR) in general. An instrumentation amplifier is usually applied in the system and suitable as an ECG preamplifier. A typical instrumentation amplifier is the differential amplifier and contains several operational amplifiers. We accept AD623 that has the properties of low noise, low input bias current, and particularly the alternative mode of operation in 3.3V single supply. The value of R_G was chosen to 1M Ω to avoid output saturation and the gain of this stage is approximate 1.

4.2.2 Notch Filter Circuit

Because the amplitude of original ECG signals is weak (about 1mV), the signals are easy to be affected by 60 Hz power-line interference or noise from surroundings. To eliminate unwanted mains hum at 60 Hz, the notch filter is generally used. In this study, we adopt a twin T circuit as a notch filter which provides a large degree of rejection at a specific frequency with the consideration of its simple circuit. The circuit of a twin T notch filter is shown in Fig. 4.3. We simulate this circuit by MultiSim program to confirm the characteristic, and the result is performed in Fig. 4.4.

Fig. 4.3: Notch filter

Fig. 4.4: Frequency response of the designed notch filter

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4.2.3 Lowpass Filter Circuit

To get rid of high-frequency noise, we can cascade several RC filters. Unfortunately, the impedance of one RC section affects the next stage and leads to that the pass and stop bands will not be sharp enough. Therefore, we choose the Sallen-Key active filter to reduce the interference without degrading desired signals [15].

Fig. 4.5: Second order Sallen-Key lowpass filter

A generic second order Sallen-Key lowpass filter as shown in Fig. 4.5 uses four resistors, two capacitors and an unity gain operation amplifier. Note that R_a and R_b are applied for setting the offset voltage because the operational amplifier, OP496GS, also uses 3.3V single supply. The cutoff frequency f_c is obtained by the following equation

$$f_c = \frac{1}{2\pi\sqrt{R_1 R_2 C_1 C_2}} \tag{4.1}$$

Finally, Fig. 4.6 exhibits the simulation result of the designed lowpass filter in frequency domain. The cross marks the cutoff frequency at about 50 Hz.

Fig. 4.6: Frequency response of the designed lowpass filter

4.2.4 Highpass Filter Circuit

In the same way, a second order Sallen-Key highpass filter is adopted to remove lowfrequency interference. Fig. 4.7 is the circuit of the highpass filter that we designed. The cutoff frequency f_c is computed also by (4.1) and was set to 0.2 Hz. The result of simulation is shown in Fig. 4.8.

4.2.5 Output Stage Amplifier

The output voltage is not high enough when through an pre-amplifier and several filters, and it may result in extremely terrible quantization errors due to the constrain of analogto-digital conversion. Consequently, a noninverting amplifier with a large gain, as shown

Fig. 4.7: Second order Sallen-Key highpass filter

Fig. 4.8: Frequency response of the designed highpass filter

in Fig. 4.9, is applied in the output stage. In addition, the output with a offset voltage is expected because of the demand of the A/D converter which we selected. The output voltage is computed as below

$$V_{out} = \left(1 + \frac{R_b}{R_a}\right)V_{in} + V_{bias} \tag{4.2}$$

The R_a and R_b were chosen to 1 k Ω and 600 k Ω respectively and the gain of the output amplifier will achieve 600 approximately. The bias voltage of 1.2V is provided by the

Fig. 4.9: Output stage amplifier

internal voltage regulator of the A/D converter..

4.3 Analog-to-Digital Converter

After receiving from wearable sensors and preprocessing, ECG signals without redundant interference should be converted from analog to digital first in order to facilitate the signal processing on an FPGA for estimating the heart rate in real time. We adopt LTC1282, the analog-to-digital converter which Linear Technology produced. The LTC1282 is a 140ksps, sampling 12-bit A/D converter with $6\mu s$ maximum conversion time that draws only 12mW from a single 3V or dual ± 3 V supply. We use the unipolar conversion mode which converts 0V to 2.5V unipolar inputs from a 3V single supply because of the condition in our system. Fig. 4.10 illustrates the typical application with a 3V single supply and detail explanations of control lines will be discussed in the next chapter.

Finally, pin functions divided into inputs and outputs of LTC1282 are exhibited as follows.

- Inputs:
 - A_{in} : Analog input. 0V to 2.5V (Unipolar), ± 1.25 V (Bipolar).
 - HSBN : High byte enable input. This pin is used to multiplex the internal 12-bit conversion result into the lower bit outputs.

Fig. 4.10: Analog-to-digital converter, LTC1282

- \overline{CS} : The chip select input must be low for the ADC to recognize \overline{RD} and HSBN inputs.
- \overline{RD} : Read input. The active low signal starts a conversion when \overline{CS} and HSBN are low.
- Outputs:
 - V_{ref} : +1.2V reference output.
 - \overline{BUSY} : The \overline{BUSY} output shows the converter status. It is low when a conversion is in progress.
 - D11-D4 : Three-State data outputs. D11 is the most significant bit.
 - D3/11-D0/8 : Three-state data outputs.

Chapter 5

FPGA IMPLEMENTATION AND EXPERIMENTAL RESULTS

Digital system design in the past was built at the board level using standard components such as TTLs and CMOSs, or at the gate level in application-specific integrated circuits (ASIC). It takes quite not only a lot of time for verification but also expensive cost in redesigning. In addition, problems due to signal propagation delay may be arisen, and it is time-consuming to solve them. With the advent of programmable logic, digital circuit design becomes more simple and functions are confirmed more easily. In this thesis, an FPGA is applied on verification for the proposed real-time heart-rate estimator. The advantages include a shorter time to market, ability to re-program for fixing bugs, and lower non-recurring engineering costs. Algorithms can be developed on regular FPGAs and then migrated into a fixed version that resembles an ASIC. At the same time, FPGAs offer another way from a traditional gate-level design to gate-level or register-transferlevel (RTL) design of a hardware description language (HDL). The HDL is easier to work with when handling large structures because it allows the designer to express both the behavioral and structural aspects of each stage in the design. The behavioral features similar to a conventional high-level language are those structural constructs that allow description of the instantiation and interconnection of modules. The block diagram of hardware implementation procedure is shown in Fig. 5.1.

We accept the FPGA which Altera developed for the hardware implementation of

Fig. 5.1: Hardware implementation procedure

the heart-rate estimator of the proposed system. The way of consolidation of designed modules was adopted to accomplish the integral system. The virtue of this manner is that every component among the system whatever users designed by themselves or vendors provided can be utilized flexibly and modified if you need. The system becomes easier to be expanded in the future. In this chapter, we exhibit all the modules which we designed and a full scheme of the system. Finally, the measured performance of the proposed real-time heart-rate estimation system for wearable sensors is demonstrated in practice.

5.1 Introduction to FPGA Systems

A field-programmable gate array (FPGA) is a semiconductor device containing programmable logic components called "logic element". Logic elements can be programmed to perform the function of basic logic gates such as AND and XOR, or more complex combinational functions such as decoders and mathematical functions. To raise the speed of verification and system efficiency, we accept the Cyclone II FPGA which Altera developed for the hardware implementation, and it offers the following features.

- EP2C35F672 Cyclone II FPGA Chip
- High-density architecture with 33216 LEs (Logic Elements)
- M4K embedded memory blocks
- Up to 35 18 × 18-bit multipliers are each configurable as two independent 9 × 9-bit multipliers

- A 2.0 inch low temperature poly-silicon (LTPS) LCD
- Up to four PLLs per device provide clock multiplication and division, phase shifting, programmable duty cycle, and external clock outputs, allowing system-level clock management and skew control
- Supports two configuration modes: active serial and JTAG-based configuration
- Supports Intellectual Property (IP) including Altera megafunction and Altera Mega-Core function

In the previous chapter, we presented an adaptive baseline wander removal algorithm and a correlation technique for heart rate estimation. The former is based on the subspace approach and the latter is realized via the FFT and inverse FFT (IFFT) operation. After completing the development of our algorithms in Matlab environment, we need the Verilog HDL to describe our hardware structure. The resulting Verilog codes can be compiled and synthesized in Quartus II, which is developed by Altera also. Through JTAG-based configuration, we download the results to the FPGA device for verification.

5.2 Modular Design of the Real-Time Heart-Rate Estimator

In the hardware implementation of the proposed algorithm, an efficient design flow to reduce design time is necessary. First we separate the entire real-time heart-rate estimator of the proposed system roughly into several basic modules, those are the A/D converter control, baseline wander removal, heart rate estimation and output display control modules. All of them are designed independently and constructed in the form of intellectual property (IP) that can be reused easily in other applications. Fig. 5.2 depicts the modular design of the proposed estimator. We have to add an additional input port and output port, "input_available" and "output_available", in each module for synchronization. Explanations of the modules are elaborated as below.

5.2.1 A/D Converter Control Module

The analog-to-digital converter which we adopted, LTC1282 of Linear Technology, has an internal clock, and hence it has no need for synchronization between the external clock and the control lines. The internal clock is trimmed to achieve a typical conversion time of $5.5\mu s$. Conversion start and data read operation are controlled by three inputs: HSBN, \overline{CS} and \overline{RD} . There are two modes of operation according to different inputs. We set HSBN to low and enable slow memory mode with parallel read. Regulating \overline{CS} and \overline{RD} low at the sampling frequency 200 Hz brings a read operation. Conversion status is indicated by the \overline{BUSY} output, and it is low while the conversion is in progress. \overline{BUSY} returns high at the end of conversion and the result is placed on data outputs D11,...,D0 in parallel. Fig. 5.3 depicts the timing diagram of the A/D converter, LTC1282. By way of setting this LTC1282 control module as shown in Fig. 5.4, we can adjust the sampling frequency of the A/D converter. The function and bit usage of each pin are listed in Table 5.1.

Fig. 5.3: Timing and control diagram of LTC1282

AE	OC_Ctrl		
 	SYS_clk BUSY_n D11 D9 D8 D7 D6 D5 D4 D3 D2 D1 D1 D0	CS_n RD_n Dout[110]	

Fig. 5.4: A/D converter control module

5.2.2 Baseline Wander Removal Module

The baseline wander removal module as shown in Fig. 5.5 is to realize the adaptive subspace algorithm summarized as follows.

$$\boldsymbol{p}(n) = \alpha \boldsymbol{p}(n-1) + (1-\alpha)\boldsymbol{x}(n)^T \boldsymbol{q}(n-1)\boldsymbol{x}(n)$$
(5.1)

$$\boldsymbol{q}(n) = \frac{\boldsymbol{p}(n)}{\parallel \boldsymbol{p}(n) \parallel}$$
(5.2)

$$\boldsymbol{b}(n) = \boldsymbol{x}^{T}(n)\boldsymbol{q}(n)\boldsymbol{q}(n)$$
(5.3)

$$\boldsymbol{y}(n) = \boldsymbol{x}(n) - \boldsymbol{b}(n) \tag{5.4}$$

 pin I/O size (bits)		function	
SYS_clk	INPUT	1	system clock
BUSY_n	INPUT	1	$\overline{\mathrm{BUSY}}$
D11-D0	INPUT	1	each bit of digitalized data
CS_n	OUTPUT	1	$\overline{\mathrm{CS}}$
RD_n	OUTPUT	1	$\overline{\mathrm{RD}}$
Dout	OUTPUT	12	digitalized data

Table 5.1: Signal Definition of the A/D Converter Control Module

The function and bit usage of each pin are listed in Table 5.2.

pin	I/O	size (bits)	function
CLK	INPUT	1	module clock
RESET_n	INPUT	1	reset signal
IN	INPUT	12	input signal
IN_VALID	INPUT	1	input_available signal
OUT	OUTPUT	12	output signal
OUT_VALID	OUTPUT	1	output_available signal

Table 5.2: Signal Definition of the Baseline Wander Removal Module

The computation involved in an adaptive baseline wander removal algorithm performs sequentially and hence needs a control unit to decide a process of the square root operation, the inner product, the addition of vectors, etc. The control circuit is implemented as a finite state machine (FSM). This is an often used method in constructing control units. There are two different kinds of FSM, Moore and Mealy [16]. The output of a Moore machine is only dependent on the current state and delayed one clock cycle. The output of Mealy machine is dependent on both the current state and the input. Decisions in all modules of our system are made using the Mealy machine. Four states were introduced to control the processing stage of the baseline wander removal algorithm. The first state, *idle*, is a reset state where the processor does nothing and is waiting for a starting signal. When the signal "input_available" turns to "0", the processor begins working, and the state changes from *idle* to *inputBWR*. The signal "input_available" is connected to BUSY from the analog-to-digital converter which is low when the conversion is in progress. Next, three state, the inputBWR, computeBWR and outputBWR, perform sequentially. There are two approaches to transfer between each of them. One is to generate the state signal by each stage. The other is to use a stage generator according to the period of each state. The most difference between two approaches is that constant periods are necessary in the latter approach, while not in the former. Since we cannot predict the exact time that the conversion finished, the first approach is chosen in the design of the baseline wander removal module. Fig. 5.6 illustrates the state transfer flow chart of the baseline wander removal module. Moreover, the working frequency of the baseline wander removal module and the heart rate estimation module is set to 6 MHz.

Fig. 5.6: State transfer flow chart of the baseline wander removal module

By experience, the length of the vectors involved in the adaptive subspace approach, $\boldsymbol{x}(n)$, $\boldsymbol{p}(n)$ and $\boldsymbol{q}(n)$, is set to 40. Thus three on-chip RAMs with 40 words are applied to save the data. The bit usages of these three vectors $\boldsymbol{x}(n)$, $\boldsymbol{p}(n)$ and $\boldsymbol{q}(n)$ are 12 bits, 26 bits and 10 bits respectively.

During the *inputBWR* part, it is necessary to wait for the rising edge of the signal $\overline{\text{BUSY}}$ so as to ensure that the conversion of the ECG data has finished. Then the digitalized ECG signal will be received and saved in the RAM. Every received input datum is stored in the leading component of $\boldsymbol{x}(n)$, and the components of $\boldsymbol{x}(n)$ should be shifted backward in theory at every time the datum enters. However, the write/read properties of RAMs prevent us from doing this. We then use an one-shot circuit to produce a "write_enable" signal and a counter to generate a recurring write address combined with an indicator to mark the latest component of the vector.

In the *computeBWR* phase, according to the equation (5.1) the first step is computing the inner product of two vectors, $\boldsymbol{x}(n)$, $\boldsymbol{q}(n-1)$ where n-1 denotes the values at the preceding moment. Since a sampling rate is set to 200 and each sample is represented by 12 bits, we should put more emphasis on the hardware resource utilization rather than the speed when designing the architecture of the system. Base on this idea, only one multiplier and one accumulator is required to complete the inner product operation. Above all, a dynamic bit allocation of the data path within each module is important in the hardware implementation and will significantly affect the integral performance. We scale up the values of q(n) by 2^{10} and normalize the result of inner product to 1/1024 of the original result, so that it can be easily realized by shifting right 10 bits and avoid mistaking the final result because each component of q(n) is normally less than unity. Afterward, the multiplication for $1 - \alpha$, $\boldsymbol{x}(n)$ and the inner product of $\boldsymbol{x}(n)$ and $\boldsymbol{q}(n-1)$ are continuously done in pairwise. After copying with the multiplied parts of (5.1), an adder is required. On the other hand, $1 - \alpha$ and α need to be scaled up by 2^{12} and the final result is then shifted right. Note that the word length of the addend and summand should be long enough for fear of the possible overflow situation.

Next step is to realize (5.2) using one divider. Prior to division, the norm of p(n) should be computed first. The preceding multiplier and accumulator are also used in cal-

culating the square value, $||p(n)||^2$. Of course, it still requires a module to compute its square root value. However, it is a burden for the bit usage of the square value. Simultaneously, the denominator's bit numbers of the divider are too many and will be a load in the speed of computation. Because each component of q(n) is less than unity, we scale up the values by 2^{10} on the numerator of the divider, and it leads to the increase of the numerator's bit numbers as well. Consider the performance and the hardware utilization, it is imperative to reduce the bit usage. We can shift right 10 bits in the denominator, that is the norm, to achieve the purpose of bit reduction. In other words, multiplying by 2^{10} in the numerator is equal to multiplying by 2^{-10} in the denominator, and the bit necessity of the square value will obviously decrease a lot.

Afterward, along the equation (5.3), the preceding multiplier and accumulator are also applied to compute the inner product of $\boldsymbol{x}(n)$ and $\boldsymbol{q}(n)$. After calculating, we make the latest component of $\boldsymbol{q}(n)$ be multiplied by the inner product value and yield to a baseline wander component. Finally, we obtain the output signal by subtracting the baseline wander component from the latest component of the input signal vector, $\boldsymbol{x}(n)$, and the signal "done" will be set in order to represent the end of the computation. The state is transferred from *computeBWR* to *outputBWR*. As the output signal is passed to the next module, we send the synchronization signal "output_available" in the meanwhile.

5.2.3 Heart Rate Estimation Module

Before we construct the heart rate estimation module, we have to build two necessary basic modules, the FFT and IFFT modules. Since there is the same architecture on the whole in the FFT and IFFT processor, the FFT module is mainly introduced here, and the IFFT will be formed similarly. In this thesis, we adopt the decimation-in-frequency FFT algorithm [14] with the input sequence in normal order and the output in bit-reversed order.

In the FFT processor, four states were presented to control the stage and the state transfer flow chart is shown in Fig. 5.7. The first state, *idle*, is a reset state where the FFT processor does nothing. When the signal "input_available" is true, the FFT processor starts working, and the state changes from *idle* to *inputFFT*. Three state, the *inputFFT*,

Fig. 5.7: State transfer flow chart of the FFT module

computeFFT and *outputFFT*, perform sequentially. We choose the approach that three parts generate state signals by themselves. The state, *inputFFT*, lasts N clock cycles where N denotes the length of the FFT operation, that is, there are N input data received in the processor. N is 1024 in the design of our real-time heart-rate estimator with the consideration to achieve balance between the performance and the hardware utilization. The period of the *computeFFT* part is $1024 \times 10 = 10240$ clock cycles because there are $\log_2 1024 = 10$ stages in the computation of the FFT algorithm and each stage requires N clock units. The *outputFFT* phase also lasts N clock cycles to deliver N output data. Every state generates their own state signals, *input_s*, *compute_s* and *output_s* respectively, after the work of each state.

The primary work of the *inputFFT* is to produce the address and transfer the input data with 32-bit words (the first 16 bits are the real part, whereas the remaining are the imaginary part) to on-chip RAMs. Addresses are the indices of the input data.

During the *computeFFT* part, the basic computation performs with a butterfly computation. Fig. 5.8 demonstrates a butterfly computation in hardware implementation where the "opA" and "opB" are two operands, while the "TF" denotes the twiddle factor. All arithmetic operations are carried out as signed operations. Note that the operator of dividing by 2 is shown only for classification purpose and it is realized using a shift operation. It is necessary to divide the results of butterfly computations by two to avoid saturation. With the design consideration, the most significant bits (MSB) can be maintained after a series of computation, such as addition and multiplication, to avoid the possible overflow

situation. After the computation of 10 stages, the outputs are reduced to 1/1024 of the outputs of the regular FFT. Furthermore, how to generate twiddle factors is another import problem. It is impossible to use a cosine processor in the FFT processor because it would consume both hardware and time resources. We attempt to use a ROM by a simple look-up-table process. The ROM with 512 words is pre-stored in the computed twiddle factors that are calculated by Matlab program. Twiddle factors require to be scaled up by 2^{11} , and they are 12 bits with one signed bit since they are less than or equal to unity. Maybe the size of the ROM can be smaller using some properties of twiddle factors, but we do not discuss here. We set the word length of the twiddle factor to 24 bits where 12 bits for the real part and 12 bits for the imaginary part. There are two butterfly computations used to accomplish the FFT processor. Combined with the memory assignment of two RAMs which will be described later, the efficiency to compute the FFT algorithm can be improved in the hardware implementation.

The main function of the *outputFFT* is to generate the address and send the output data from RAMs in digit-reversed order. Address are the digit reversal of the indices for the output data.

There are two RAMs used in the architecture of the FFT processor. The real and imaginary parts of a complex value are stored as a single word with 32 bits. It is a important step to design the addressing criterion for the memory and resource assignment in the *inputFFT*, *computeFFT* and *outputFFT* parts. Because the *computeFFT* performs in-place computation, its memory assignment is the basis of the addressing rules of the *inputFFT* and *outputFFT* phases. There is a feasible memory assignment [17], which is always storing two data for the FFT algorithm in different memories. This method provides a mapping from data index to RAM address. A variable with index *i* is assigned to RAM_{*P*(*i*)} using an XOR pattern where

$$P(i) = i_0 \oplus i_1 \oplus \dots \oplus i_{L-1}$$
(5.5)

and L is the length of binary representation of i. In other words, it is determined by P(i) to decide which RAM the datum will be stored in. Memory assignment of various FFTs are shown in Fig. 5.9.

Fig. 5.9: Memory assignment for various FFTs [17]

In the *computeFFT* part, we use the addressing algorithm described in the chapter 9 of the reference [17]. The index generation for data is described by the following indices

for the variables:

$$N_s = \frac{N}{2^{stage}} \tag{5.6}$$

$$k_1 = 4N_s \lfloor \frac{m}{N_s} \rfloor + m \mod(N_s)$$
(5.7)

$$\hat{k_1} = k_1 + N_s \tag{5.8}$$

$$k_2 = \begin{cases} k_1 + \frac{N_s}{2} & \text{Stage} = 1\\ k_1 + 2N_s & \text{Stage} \ge 2 \end{cases}$$
(5.9)

$$\hat{k}_2 = k_2 + N_s \tag{5.10}$$

$$p = k_1 \ 2^{stage-1} \ \mathrm{mod}(\frac{N}{2})$$
 (5.11)

where the variable m is the index and $0 \le m \le N/4 - 1 = 255$.

- When P(m) = 0,
 - k_1 from RAM0; address $k_1 \mod(N/2)$ to Butterfly0
 - \hat{k}_1 from RAM1; address $\hat{k}_1 \mod(N/2)$ to Butterfly0
 - k_2 from RAM1; address $k_2 \mod(N/2)$ to Butterfly1
 - \hat{k}_2 from RAM0; address $\hat{k}_2 \mod(N/2)$ to Butterfly1

When P(m) = 1,

 k_1 from RAM1; address $k_1 \mod(N/2)$ to Butterfly1

manne

- \hat{k}_1 from RAM0; address $\hat{k}_1 \mod(N/2)$ to Butterfly1
- k_2 from RAM0; address $k_2 \mod(N/2)$ to Butterfly0
- \hat{k}_2 from RAM1; address $\hat{k}_2 \mod(N/2)$ to Butterfly0

In this algorithm, the *m* does not necessarily be increased in binary order. The index *m* can be incremented in Gray code order to avoid computing the function P(m) for every m because Gray code has the property that only one bit changes once. Hence the function P(m) will switch every time. According to the algorithm, k_1 or k_2 is from one memory, while \hat{k}_1 or \hat{k}_2 is from the other. Then, there is no switch between two RAMs and butterflies in hardware. For instance, $P(\hat{k}_1)$ is always the inverse of $P(k_1)$ since \hat{k}_1 is computed by setting one bit in k_1 . The operation flow for two RAMs and two butterfly computations is shown in Fig. 5.10.

In the *inputFFT* and *outputFFT* parts, we transfer N complex data sequentially in the

Fig. 5.10: Schedule of the compute part for the FFT module

order defined by data indices. Data are distributed in two RAMs according to the XOR pattern assignment also. That is, it is determined by P(i) to decide which RAM the datum will be stored in during the *inputFFT* phase or P(digit-reverse(i)) during the *outputFFT* phase. In addition, the address inside the RAM is equal to the last 9 bits of the data index, or digit-reversed index if we are in the *outputFFT* part, under the consideration that the size of each RAM is 512.

The inverse FFT (IFFT) can be realized by a simple modification. First we interchange the real and imaginary parts of the inputs, then perform the FFT, and finally interchange the real and imaginary parts of the outputs again. Consequently, the architecture of the IFFT processor is the same as that of the FFT processor, and we just interchange the real and imaginary parts in the inputs and outputs of the FFT processor to perform the IFFT. A ROM with twiddle factors and two butterfly computations are shared between the FFT and IFFT processors.

After accomplishing two basic modules including the FFT and IFFT processors, we form a heart rate estimation module as shown in Fig. 5.11 to develop the correlation method as mentioned in chapter 3. The function and bit usage of each pin are listed in Table 5.3.

Fig. 5.11: Heart rate estimation module

pin	I/O	size (bits)	function
CLK	INPUT	1	module clock
RESET_n	INPUT	1	reset signal
IN	INPUT	12	input signal
IN_VALID	INPUT	I CON	input_available signal
HR	OUTPUT	/9	heart rate
SQI	OUTPUT	1896	signal quality indicator
OUT_VALID	OUTPUT	andana	output_available signal

Table 5.3: Signal Definition of the Heart Rate Estimation Module

We utilize an on-chip RAM with 512 words to accept the input datum through the baseline wander removal module and the absolution module. Consider that the IFFT modules would generate the signals of "output_available" by themselves and it can be a state signal, the approach that each part generates state signals is chosen to build a finite state machine (FSM). Fig. 5.12 exhibits the state transfer flow chart of the heart rate estimation module. Six states were introduced to control the processing stage. During the *idle* phase, the processor is waiting for the trigger signal which is connected to the signal "output_available" of the previous absolution module to activate its internal function. Three states, the *inputHRE*, *FFTin*, *ZeroPadding*, involve in receiving the input signal from the preceding module and delivering 1024 data to the FFT processor where the first 512 data are 512 samples in the past and the last 512 data are all zeros for zero-padding

Fig. 5.12: State transfer flow chart of the heart rate estimation module

purpose. The last two parts last 512 + 512 = 1024 clock cycles. Next, the FFT operation is applied. After the FFT, we attempt to square the real and imaginary parts of complex values of the outputs in the FFT processor and sum up them. The sum, that is $|\hat{X}(e^{j\omega})|^2$, is then passed into the IFFT processor. As the signal "ifft_output_available" turns to "1", the state gets into the *outputHRE*. During the *outputHRE* part, we use one comparator setting the initial value to be the 60th output signal as well as the peak position to be 60. When the outputs of the IFFT processor emerge in turn, it would compare the output at present with the remaining value in order to keep the maximum value and its corresponding position. We simply seek the position up to 512 because the outputs of the IFFT operation are symmetric with respect to the 513th value due to the real inputs. Finally, the position of the first peak is determined and the heart rate expressed in heartbeats per minute is obtained according to (3.10). As the position of the first peak is found, we use another comparator setting the initial value to be the 514th output signal and the second peak position to be 514. In the same way, it would continuously compare the output at present with the remaining value to search the second peak and its corresponding position. This approach is the use of the original redundant information to find the second peak and hence does not result in a burden in the hardware implementation. Then we apply a subtractor and a divider to calculate and the signal quality indicator is derived. On the other hand, as the signal "output_available" turns to high, the outputHRE phase finishes in the same time, and the state is transferred to *idle* waiting for another input datum.

5.2.4 LCD Control Module

There are two output displays used in the demonstration of final results. One is the thinfilm transistor liquid-crystal display (TFT-LCD). The FPGA which we adopt provides a 2.0 inch color LCD with resolution at 320x240 pixels. It supports input data format of RGB because of the built-in data conversion circuit. Therefore, users just enter image data in turn, the data conversion circuit could convert them into corresponding data with which the TFT-LCD displays. Fig. 5.13 and Fig. 5.14 illustrate the input signal interface. DCLK is an input signal for the control of working frequency, VSYNC is for vertical

Fig. 5.13: HSYNC timing diagram

synchronization, HSYNC is for horizontal synchronization, and Data is a color input signal composed of R, G and B components that are 8-bit words with values ranging from 0 to 255. As shown in Fig. 5.13, R0, G0 and B0 are values of the first pixel in the first row frame. Each row has totally 320 pixels, and each pixel has three color information of R, G and B. Moreover, each pixel is separated from one clock cycle. The time period for full display of individual row (t_{hdisp}) takes $320 \times 4 = 1280$ clock cycles. Because the signals for vertical synchronization have different timing specifications between an odd field and an even field, so it should be taken into account in designing. Fig. 5.15 shows the LCD control module. The function and bit usage of each pin are listed in Table 5.4.

Fig. 5.15: LCD control module

5.2.5 Seven-Segment Display Control Module

The other output display used in the proposed system is the seven-segment displays. They are widely used for numeric display in many different digital devices. Fig. 5.16 shows the basic layout of the segments in a seven-segment display. The LED segments are identified with upper-case letters "A" through "G", with segment "A" at the top and then counting clockwise. Segment "G" is the center bar. Most seven-segment digits also include a decimal point ("DP") improving the readability of large numbers. The FPGA provides six common-anode seven-segment displays. All of the anodes are connected together into a common lead, whereas the other end of each LED is individually available. It is not hard to form all ten digits using the seven-segment displays. For instance, digit 2 requires

р	in	I/O	size (bits) function	
SYS	S_clk	INPUT	1	system clock
RES	ET_n	INPUT	1	reset signal
Da	taIn	INPUT	8	input signal
IN_V	ALID	INPUT	1	input_available signal
VS	YNC	OUTPUT	1	vertical synchronization signal
HS	YNC	OUTPUT	1	horizontal synchronization signal
LCD_	DATA	OUTPUT	8	color input signal

Table 5.4: Signal Definition of the LCD Control Module

Fig. 5.16: Seven-segment display

segments A, B, D, E, and G set to logic 0. We utilize the first three displays to express the signal quality indicator and the last three to describe the estimated heart rate. Fig. 5.17 shows the seven-segment display control module. The function and bit usage of each pin are listed in Table 5.5.

Fig. 5.17: Seven-segment display control module

pin	I/O	size (bits)	function
CLK	INPUT	1	module clock
DEC_NUM	INPUT	9	decimal number
HUNDRED_DIGIT	OUTPUT	4	hundred digit
TEN_DIGIT	OUTPUT	4	ten digit
ONE_DIGIT	OUTPUT	4	one digit

Table 5.5: Signal Definition of the Seven-Segment Display Control Module

5.2.6 Module Consolidation

After all basic modules are built, the entire real-time heart-rate estimator of the proposed system can be easily implemented by adding a few simple control circuits to connect them. This approach makes the design easier by considering the modules with lower complexity. Furthermore, the resulting modules can be used separately in other applications. As the integration of all modules is completed, including pin assignment, the conclusive file is then compiled in Quartus II. The process comprehends analysis, logic synthesis, place and route. Finally, an SRAM object file (.sof) which can be downloaded to the FPGA device is generated. Fig. 5.18 depicts the compile report of the integral system.

In this system, we use 5532 logic elements for 17 percent of all and 1424 dedicated logic registers for 4 percent of all. In the on-chip memory utilization, it consumes 18 percent of embedded memory blocks. Above all, it is successful to implement the proposed real-time heart-rate estimator in an FPGA device with reasonable area in term of the number of logic elements.

5.3 Experimental Results

After the design and implementation of the real-time heart-rate estimation system, we demonstrate experimental results for ECG signals measured in practice. The originally

Flow Status	Successful - Wed Jul 16 22:59:11 2008
Quartus II Version	7.2 Build 203 02/05/2008 SP 2 SJ Web Edition
Revision Name	HeartRateEstimator
Top-level Entity Name	HeartRateEstimator
Family	Cyclone II
Device	EP2C35F672C8
Timing Models	Final
Total logic elements	5,532/33,216(17%)
Total combinational functions	5,317 / 33,216 (16 %)
Dedicated logic registers	1,424 / 33,216 (4%)
Total registers	1424
Total pins	77 / 475 (16 %)
Total virtual pins	0
Total memory bits	89,472 / 483,840 (18 %)
Embedded Multiplier 9-bit elements	28/70(40%)
Total PLLs	0/4(0%)

Fig. 5.18: Compile report of the entire system

measured ECG signals and the output signals after the removal of baseline wander are shown in the LCD by means of dip switches. The estimated heart rate and the signal quality indicator are exhibited in three seven-segment displays respectively. Fig. 5.19 reveals the actual wear situation where the test person wears the belt which ECG sensor

Fig. 5.19: Actual wear situation

electrodes made of steel textile sewn in. We use discrete elements to implement a printed circuit board as shown in Fig. 5.20 for analog front-end circuits and an analog-to-digital

Fig. 5.20: Printed circuit board

converter. The results display on the FPGA device is shown in Fig. 5.21. The LCD frame is controlled by two dip switches and exhibits the ECG data after the removal of baseline wander at this time. The first three seven-segment displays express the signal quality indicator of 0.94, and the last three describe the estimated heart rate, 74 heartbeats per minute.

Fig. 5.21: Results display on the FPGA device

Chapter 6

CONCLUSION AND FUTURE WORK

We have developed a real-time heart-rate estimation system for wearable textile sensors. Since the wearable dry ECG bioelectrodes are highly susceptible to interference especially caused by the movement of electrodes and resulting unfixed contact, a simple but useful adaptive subspace approach for the removal of baseline wander is presented. The FFT and IFFT techniques are also used for computing the correlation value required for heart rate estimation. We combine them to develop an effective real-time heart-rate estimator. We propose a signal quality indicator to express the degree of signal periodicity as well.

In the FPGA implementation, we separate the entire real-time heart-rate estimator of the proposed system roughly into several modules, including the A/D converter control, baseline wander removal, heart rate estimation and output display control modules. All of them are designed independently, and constructed in the form of intellectual property (IP) for the convenience of reuse. Then we integrate all functions by adding a few simple control circuits to connect them. The Verilog codes are compiled and downloaded to the Altera EP2C35F672 Cyclone II FPGA device for verification. The results for ECG signals measured in practice demonstrate the probability of the presented real-time heart-rate estimation system with textile sensors. This system is helpful for health monitoring and disease prevention, and it improves the quality of healthcare.

In the future work, the system will incorporate with the function of wireless transmission (through a mobile phone, Internet, Bluetooth, etc). The digitalized ECG data will be transmitted to a central terminal and be analyzed immediately by computers. The application of the system will be more helpful. In the FPGA implementation, a pipeline architecture may be applied in hardware structure design to increase the efficiency of the system. On the other hand, there are a great quantity of counters in control circuits for handling the operation of each phase or for the generation of write/read addresses of RAMs. Many of these counters can be multiplexed to reduce the hardware resource utilization. In the FFT processor, the size of the ROM can be smaller using some properties of the twiddle factors.

To minimize the size of the system configuration further, we will continue to design an application specific integrated circuit (ASIC) which will merge the digital circuit blocks with the analog circuit blocks, yielding a single chip, portable real-time heart-rate estimation system. The ASIC implementation is in theory superior to the corresponding FPGA implementation in terms of hardware speed and required area. However, several structures of our modules have to be modified to achieve the requirement of high speed. If finished, the user will feel more comfortable and convenient. All of these improvements will be implemented in the near future.

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