

# Estimating Heart Rate in Echocardiography Patients where ECG Monitoring was not Performed

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### Introduction

In cases of suspected COVID-19, ASE guidelines suggest that ECGs need not be monitored in order to reduce exposure and contamination [1]. However, as some automated methods for cardiac guantification rely on accurate heart rates (HR) being present, it is important to be able to estimate the heart rates in cases where ECG monitoring was not performed. We propose and evaluate several novel heart rate estimation methods that apply directly to echocardiograms of the left ventricle (LV).



### Overview

- A sequence of images is reduced to a one-dimensional time series using one of three different dimensionality reduction methods
- U-Net: A convolutional neural network is trained to segment echo images through time [2]. The segmentation area is the signal.
- NMF: The images are factorised into non-negative matrices. The differences of these factors is the signal [3].
- PCA: The images are reduced to principal components, and the magnitude of the first component is the signal.
- The one-dimensional time series is passed through one of two period extraction algorithms
- The heart rate is calculated from the period and the time between frames



## **Methods and Results**

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### Data 778 DICOM image clips with at least two cardiac cycles, collected from stress echo acquisitions at St George's Hospital, UK, are used for testing. DICOMs encompass a large variety of heart rates, stress echo protocols (both exercise and pharmacological) and view acquisitions (A2C, A4C or SAX-PM).

	Contrast		Non-contrast	
View/Stage	Rest	Stress	Rest	Stress
A2C	76	80	61	57
A4C	76	80	58	57
SAX-PM	61	63	57	52

### Table 1: Breakdown of View/Stage/Contrast of image clips used

Each combination of methods in each step was applied to each image clip to estimate the heart rate.

The estimated heart rate is then compared to the heart rate encoded into the meta data of each DICOM. The method fails if a period could not be extracted from the signal.

Failures	Correlation	Coherence	Failures are mostly
U-Net	0 (0%)	8 (1%)	associated with NMF and
NMF	60 (8%)	147 (19%)	PCA. When there is bulk
PCA	51 (7%)	142 (18%)	motion during the
	10	acquisition, the extracted	

Table 2: Number (Percentage) of failures for signal loses its periodicity each combination



In this example, two consecutive end-diastolic frames are overlaid in red or blue, such that motion of  $\approx$ 1cm is visible

#### Results

U-net dimensionality reduction followed by autocorrelation period extraction proved most accurate for estimating heart rate. The results for this combination are shown in Regression and Bland Altman plots below.



20000111			(Number) of clips with
U-Net	97% (753)	96% (744)	estimated heart rate
NMF	87% (680)	93% (721)	within 20 bpm of actual
PCA	88% (685)	92% (718)	heart rate
Within 10bpm	Correlation	Coherence	Table 4: Percentage (Number) of clips with
U-Net	91% (707)	90% (703)	estimated heart rate
NMF	82% (637)	89% (691)	within 10 bpm of actual
PCA	82% (638)	88% (688)	heart rate
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### References

[1] Mitchell C, Collins K, Hua L, et al. Specific Considerations for Sonographers When Performing Echocardiography during the 2019 Novel Corongvirus Outbreak: Supplement to the American Society of Echocardioaraphy Statement, J Am Soc Echocardioar, 2020:33:654-7 [2] Upton R, Mumith A, Beqiri A, et al. Automated Echocardiographic Detection of Severe Coronary Artery Disease using Artificial Intelligence. In review. 2021. [3] Yuan B, Chitturi SR, Iyer G, et al. Machine learning for cardiac ultrasound time series data. Proc SPIE, Medical Imaging. 2017;10137. [4] Lindström J, Kokko H, Ranta E. Detecting Periodicity in Short and Noisy Time Series Data. Oikos 2016:78:406-10

## Conclusions

We have developed a robust and accurate method of estimating heart rates from multiple echocardiographic views in the presence or absence of contrast, which works even when there is motion of the probe during the acquisition.