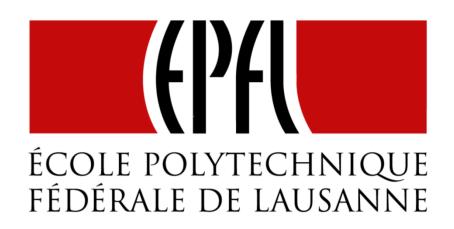


swiss scientific initiative in health / security / environment systems



Camera-Based Respiration Monitoring

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Introduction

: CSEM

Nowadays, the monitoring of babies in neonatal intensive care units is based on wired sensors measuring parameters such as respiratory rate (RR) and heart rate (HR). However, the placement of **electrodes** causes a **high discomfort** (due to the **delicate skin** of neonatal babies) and often leads to false alarms (detaching sensors).

In the scope of the *NewbornCare* project we aim at getting rid of wired sensors by **estimating** both **RR** and **HR** in a **contactless** fashion via a simple **video camera**. In the current work we present the preliminary results for a real-time capable RR monitor. In the long term, this solution is expected to reduce false alarms and increase the comfort of patients and care staff.

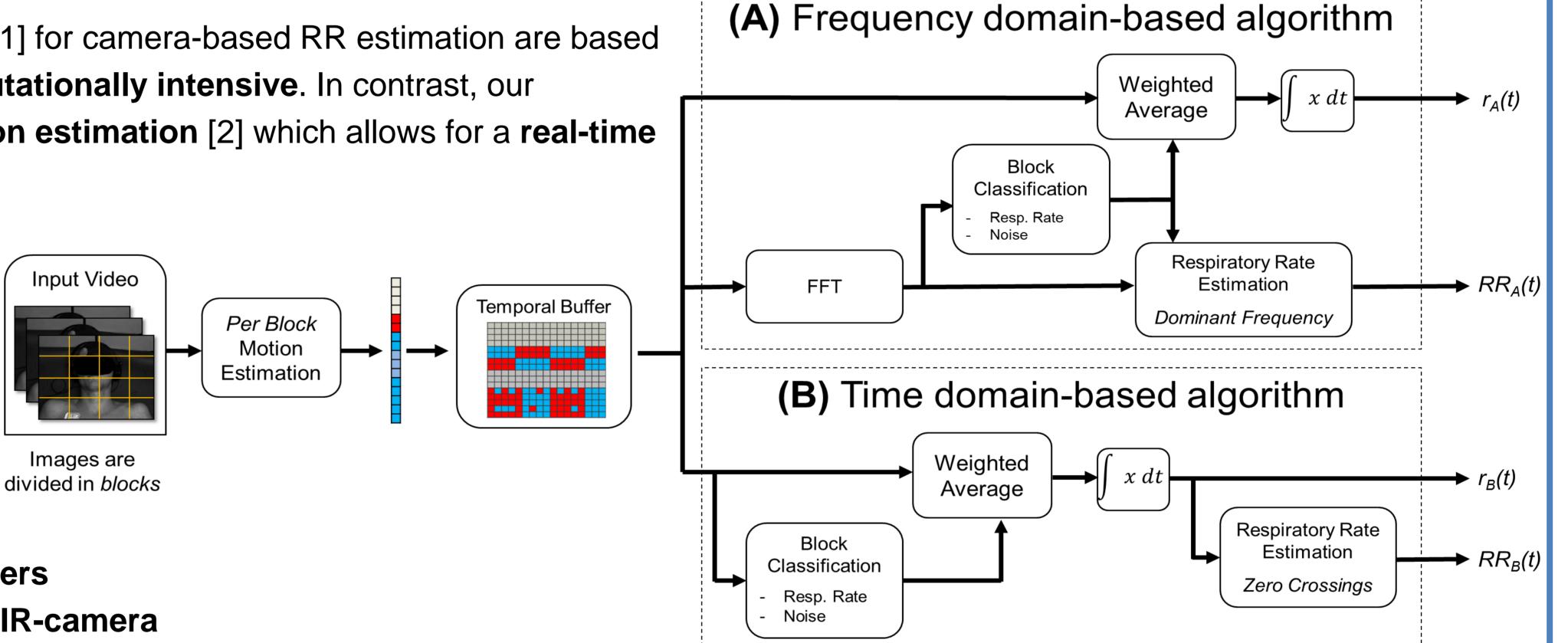


Methods

Many of the **previously reported approaches** [1] for camera-based RR estimation are based on optical flow computation and are thus **computationally intensive**. In contrast, our approach uses a **simple** projection-based **motion estimation** [2] which allows for a **real-time** implementation.

Two different algorithms are used to estimate the RR from subtle thorax movements:



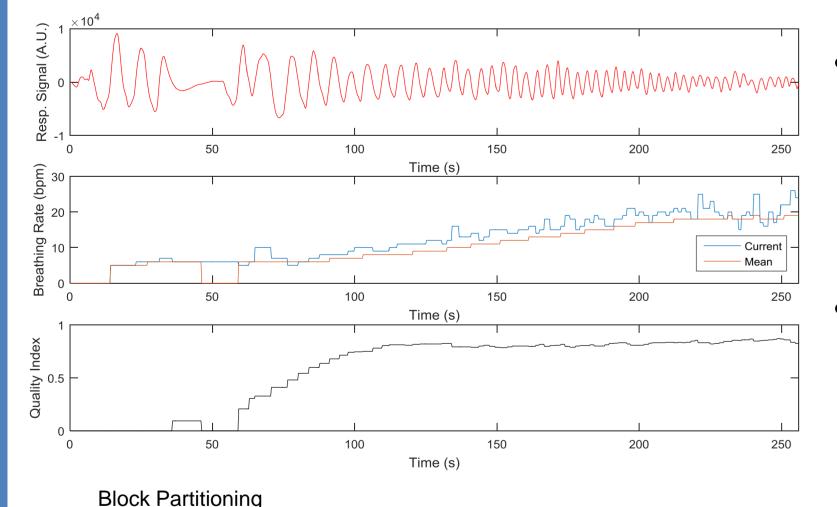


(A) Frequency domain-based algorithm (B) Time domain-based algorithm

Dataset used:

- 4-minute recordings from 9 adult volunteers
- in artificial light/darkness using RGB-/NIR-camera

Results and Discussion



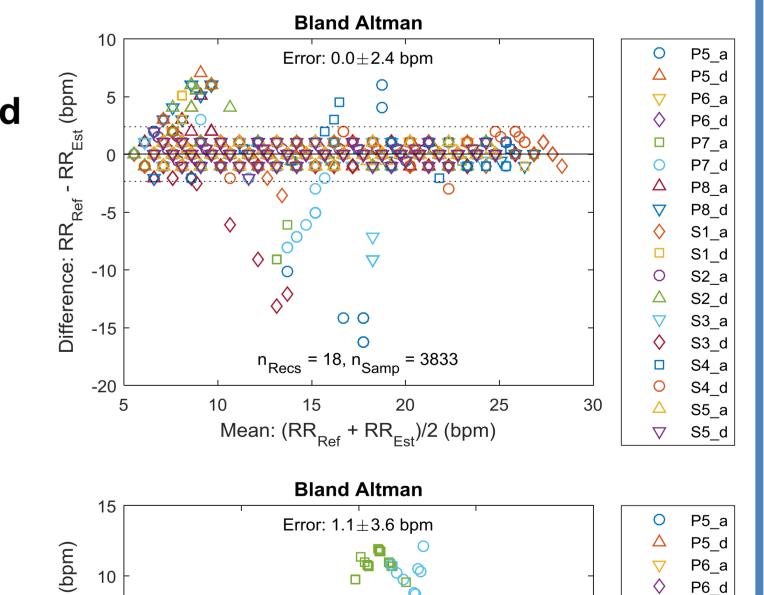
- The frequency domain-based approach shows a lower bias and error than the time-domain based approach
- The time domain-based approach shows a higher delay but provides the ability for single breath detections

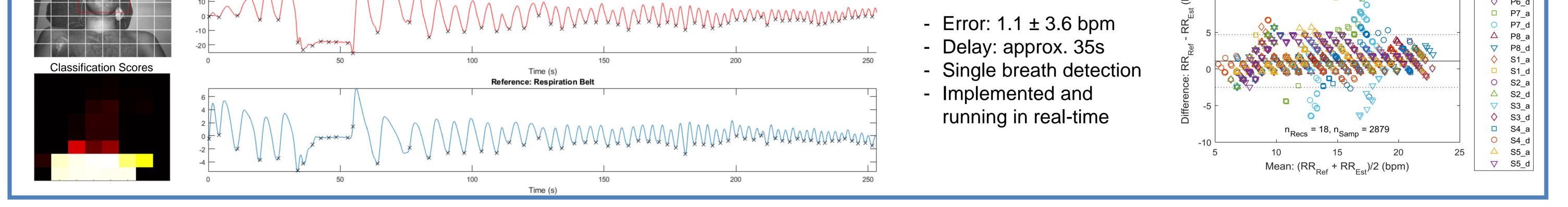
Camera-based Respiration

(A) Frequency domain-based

- Error: 0.0 ± 2.4 bpm
- Delay: approx. 10s
- Real-time capable

(B) Time domain-based





Conlusion

In the current work we present two algorithms which allow for a continuous and contactless monitoring on respiratory rate (RR) via a video camera in real time. Future work necessitates the improvement of the algorithms to suppress non-respiratory movement or detect long apnea sequences. This should be followed by the evaluation of the algorithm performance on an extended database and in particular on neonatal data.

<u>References</u>: [1] Janssen, R et al. *Physiological measurement* 37.1 (2015). [2] Bartula, M et al. *IEEE EMBC 2013*, (2013)

