



Empirical mode decomposition based method for artefact removal in raw intracranial pressure signals

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Introduction

- Intracranial pressure (ICP) signals present macro-patterns potentially useful for diagnosis and classification of different neurological disease categories.
- ICP signals contain artefacts; *e.g.* very high and short physiologically impossible spikes. These reduce the accuracy of pattern recognition techniques, hindering clinical use of ICP.
- Previous methods for spikes removal assume signal stationarity. However, the ICP signal is non-linear and non-stationary (mean and variance change over time).

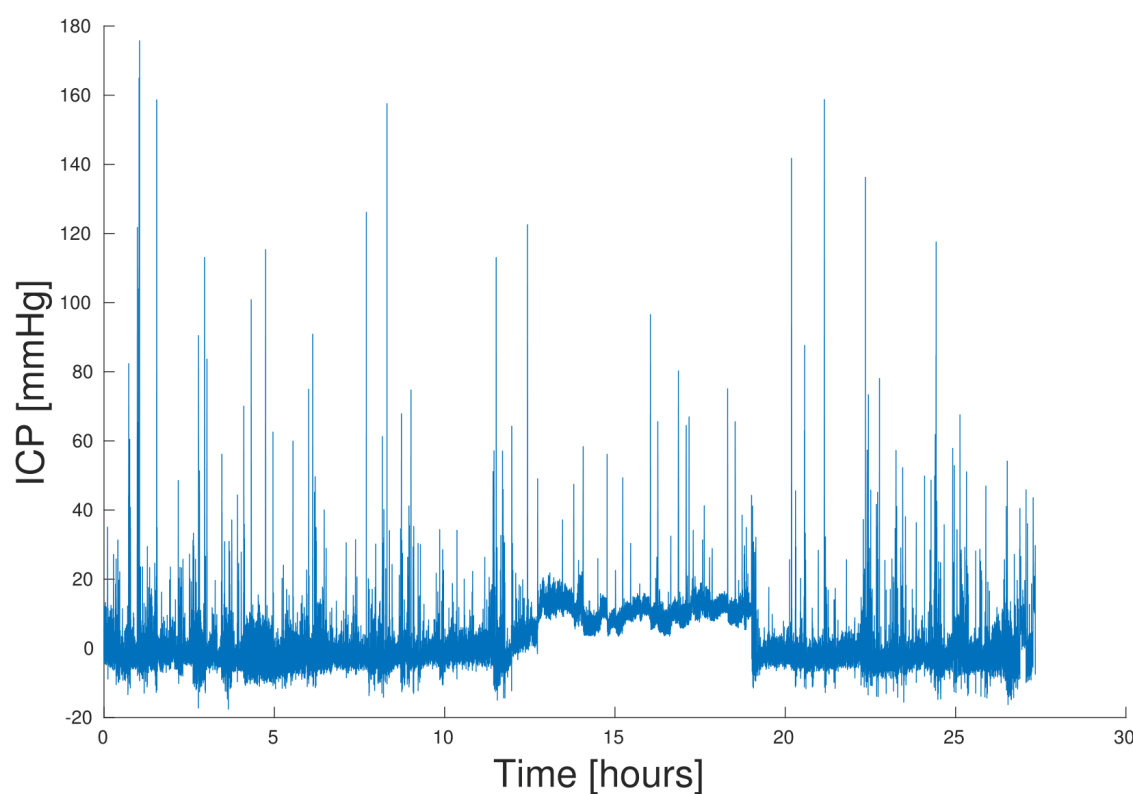


Figure 1. Raw ICP signal.

Objective

To investigate the performance of empirical mode decomposition (EMD) based techniques for spikes removal in raw ICP signals.

Methods: Empirical Mode Decomposition

1. Break down signal into sixteen components known as intrinsic mode functions (IMFs) via empirical mode decomposition (EMD) [2].

The first four IMFs (IMFs₁₋₄) are chosen because their peaks locations align with the location of peaks in the ICP signal, highlighted with the purple boxes as examples.

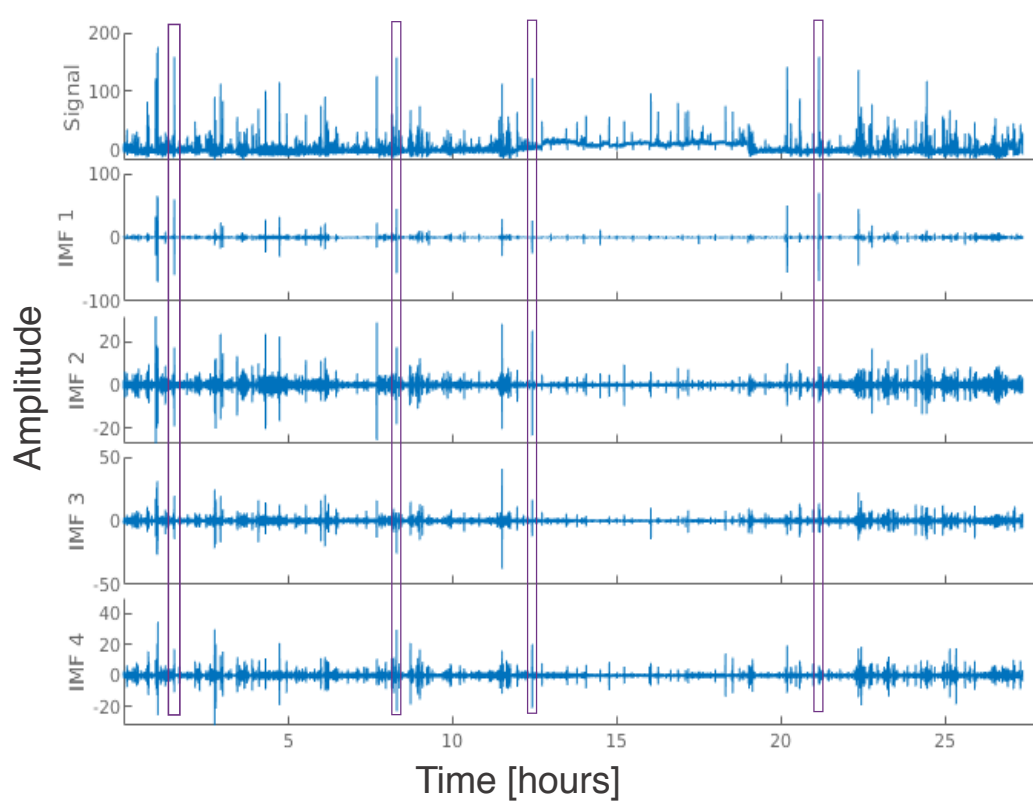


Figure 2. Examples of peaks in ICP signal and IMFs₁₋₄.

2. Sum IMFs₁₋₄ to enhance spike events, enabling a more robust artefact duration estimation.

If detection is only based on IMF₁ the widths of the spikes will be underestimated.

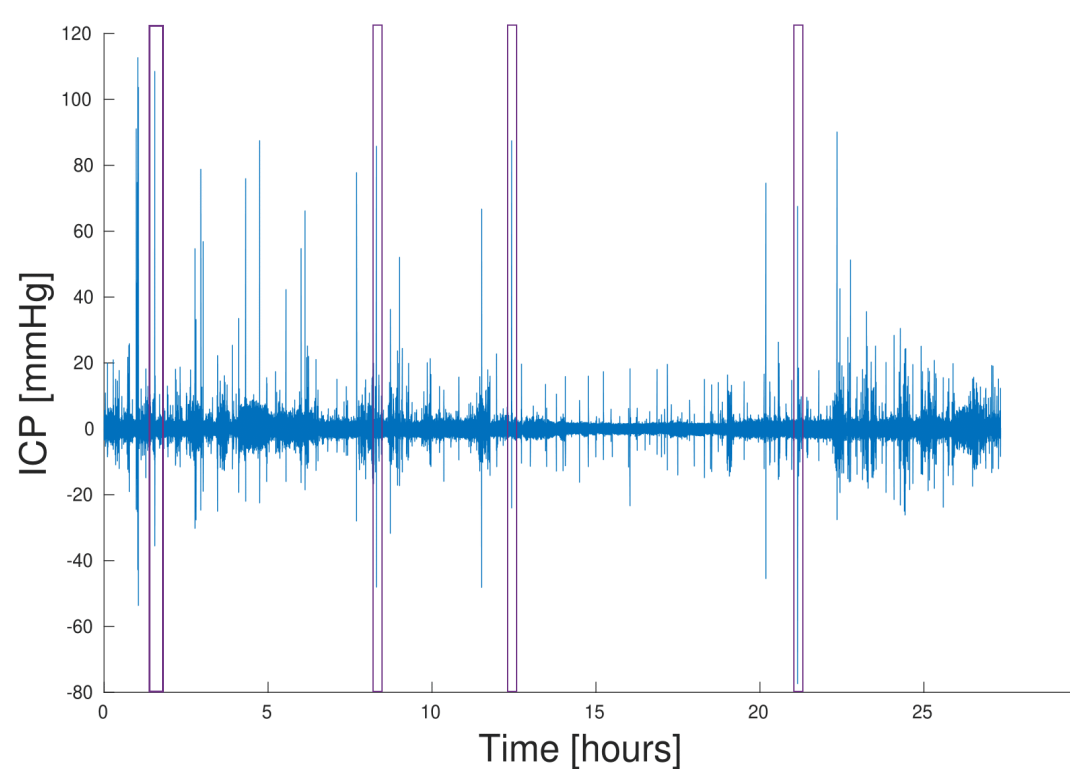


Figure 3. Examples of peaks after summation of IMFs₁₋₄.

Methods: peak identification

Thresholding for peak identification [1]: ICP segment considered a peak if found by IMFs *and* outside $[-P_{th}, P_{th}]$, where:

$$P_{th} = \hat{\sigma} \sqrt{2 \log(L)} \quad \hat{\sigma} = \frac{MAD}{0.6745}$$

$$MAD = \text{Me}|IMF_{1-4} - \text{Me}(IMF_{1-4})|$$

$\hat{\sigma}$: standard deviation of the summed IMFs
 L : number of IMF samples

Me: median
MAD: median absolute deviation

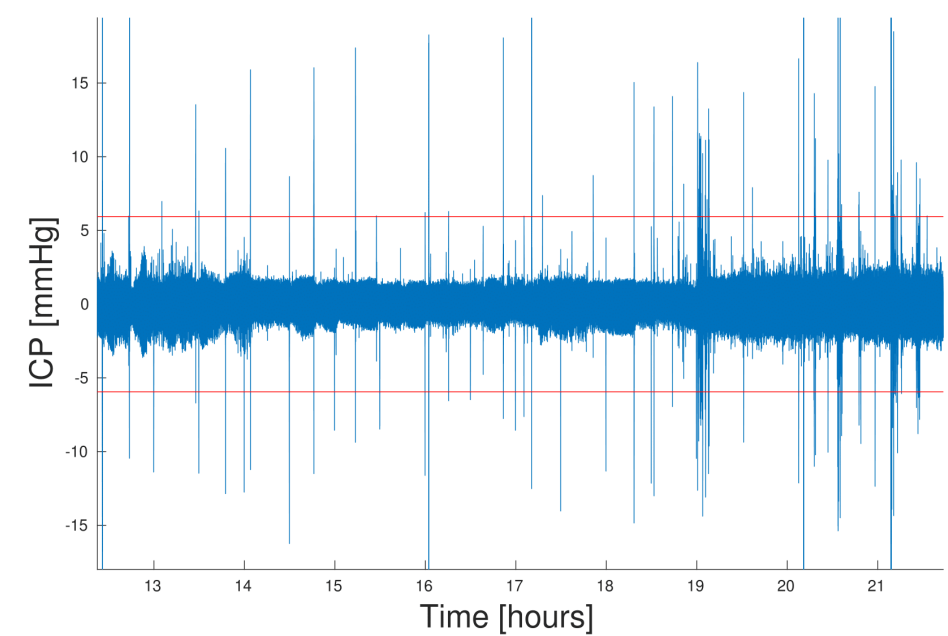


Figure 4. ICP signal with lower and upper thresholds marked in red.

Results

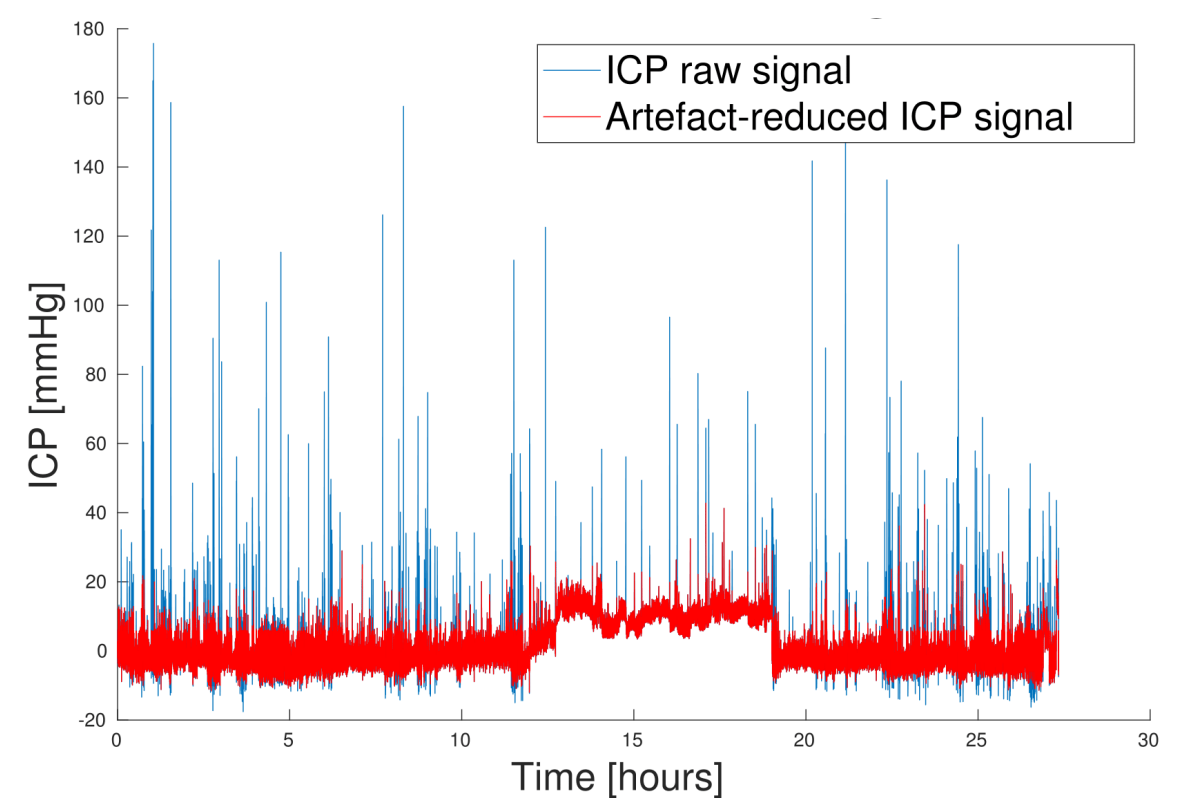


Figure 5. Artefact-reduced ICP signal.

Conclusion

A new methodology based on EMD can be used for removal of unphysiological spikes in clinical ICP signals, which is essential for correct patient evaluation and diagnosis in the clinical practice.

Ongoing research

- Calculation of detected peaks' slew rates for spikes characterization.
- Methodology validation with visual spike identification as gold standard.

References

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