

# Coronary artery disease detection using hybrid classifier for health care

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## Abstract

The Cardiac Heart disease detection and diagnosis is an enormous and dreary task in decision support systems. For example, the grouping calculations are valuable in the determination of an infection utilizing a multivariate medical information, which is gained from the doctor's facility surroundings using distinctive innovations. This information might be the blend of various sorts. Subsequently, it is important to propose insightful strategies for the robust investigation medical information. In this work, an intelligent data mining based Hybrid classifier system has been proposed for classification of CAD from clinical databases. There are different phases of in the proposed order of ECG signals as Preprocessing utilizing Adaptive Filter, Multivariate Feature Extraction, Multivariate Similarity Measure and Hybrid classifier. The first part of the work based on preprocessing. The ECG signal datasets are preprocessed and filtered by the adaptive filter for removing the measurement noise. Followed by the preprocessing the ECG peaks were extracted using multivariate extracted was obtained for feature extraction. Multivariate similarity analysis and feature extraction.

From the extracted feature peaks used for the similarity selection using multivariate correlation. Finally, Multivariate feature classifier is optimized using modified Multivariate optimization algorithm that can defeat the interior impediment of conventional methods. Multivariate function optimization to an active learning worldview ready to give correct and robust choice in the medical domain. In this way, Multivariate feature classifiers may have a few parameters to be tuned, and their ideal qualities are hard to be distinguished. Promote all the more consolidating Stochastic pattern with the Multivariate feature classifier ideas may decrease risk to perform blunders or new concealed information. This calculation is valuable for ordering the multidimensional information as it upgrades the precision of grouping in the restorative analysis. Encourage, the outcome got from this work demonstrates that the proposed calculation gives superior accuracy over previous strategies.

## Introduction

The electrocardiogram is the waveform which represents the reaction of the human heart to the electric signals. The human heart reacts to the electrical signal and recorded by the electronic device which could be used to perform classification of signals. The ECG chronicles the electrical commotion of the heart, where each heart beat is displayed as a sequence of electrical waves characterized by peaks and valleys. Any ECG gives two types of info. One, the duration of the electrical wave crossing the heart which in turn decides whether the electrical activity is normal or slow or irregular and the second is the amount of electrical activity transitory through the heart muscle which permits to find whether the parts of the emotion are too vast or overworked. Wavelets alter a signal processing technique used in various applications to decompose, filter, noise extraction, etc. Wavelet alter has an enormous impact on biomedical systems for signal dispensation. For many signals, the low-frequency gratified is the most important part. It is what gives the signal its identity. The high-frequency content, on the other hand, informs flavor or shade. To gain a better gratitude of this procedure, it is achieved a one-stage separate wavelet convert of a signal. The decomposition development can be iterated, with successive estimates being decomposed in turn, so that one indication is broken down into many lower determination components.

In wavelet analysis, a signal is split into an approximation and detail. The approximation is then itself divided into a second-level estimate and detail, and the procedure is repeated. The transformed signal provides info about the time and the incidence. Using this approached information low-frequency statistics could be identified, which is more important in cardiac disease forecast.

From the ECG signals, the presence of the cardiac disease can be determined by various methods. Whatever the method used, they use minimum three class of cardiac signals like normal, diseased and symptomatic. To classify the signal into a class, they need any measure to compute the similarity, and the Hybrid classifier can be used to classify the signals of the electrocardiogram. The Multivariate feature measure shows how deeply the input pattern is closure to the features of each class and each attribute of them. By using the Multivariate function test, we can classify the input signals in an efficient manner.

**Stochastic pattern:** Consider  $S$  as a pattern with a set of plains  $pas$   $p$ -cover of  $S$  and the union of  $p$  contains  $S$ . The covering value of  $S$  is considered as smallest value of  $p$ ,

which has  $p$ -cover of  $S$ . Hence, the covering number of matrix is considered as the covering number of its pattern. Then the stochastic pattern of order  $n$  contains  $n$  covering number. Thus the  $p$ -cover is now called as  $n$ -cover. In any cover of a stochastic pattern, point of the pattern is not covered twice. Also, non-empty pattern or restricted pattern that holds the property that no points are covered twice in any cover. Hence, the stochastic pattern is considered as the restricted pattern and its converse is inferred. The matrix  $B$  represents the restricted pattern and this does not represent the stochastic pattern, where  $S \subseteq J_{3,3}$ . Here, the  $(i,j)$ -entry of  $B = k > 0$  iff  $(i, j, k)$  belongs to this pattern. However, not every pattern is represented in this manner unless multiple entries are allowed.

$$B = \begin{bmatrix} 1 & 2 & 1 \\ 0 & 1 & 3 \\ 3 & 0 & 2 \end{bmatrix}$$

Hence, the  $S$  is verified as restricted pattern and only covers of  $S$  is considered as trivial covers with parallel planes and the non-trivial covers of  $S$  is considered in a horizontal plane. Since,  $B$  is an indecomposable matrix, the  $B$  cannot be considered to possess non-trivial cover. The first horizontal plane without other horizontal plane in non-trivial covers of  $S$  implies the matrix, which is obtained from  $B$ . This is replaced with 1's by 0's that leads them to attain term rank as  $\leq 2$ , however, this is not a best case. Also, it is impossible for the nontrivial cover to have single or pair of horizontal planes. If  $A$  is a plane stochastic matrix with pattern  $S$ , then  $a_{111}$  is  $x$  and the sequence is determined as:  $a_{313} = 1-x, a_{332} = x$  and  $a_{122} = 1-x$ .

Hence,  $a_{111} + a_{122} = 1$ . If  $a_{111}$  and  $a_{122} = 1$ , then  $a_{131} = 0$ . This is considered as a contradiction and hence  $S$  is considered as non-stochastic pattern. When,  $S$  fails as stochastic pattern, then the union of two disjoint plane is considered as a proper subset of the union of two other plane sections of  $S$ . This statement fails if  $S$  is a stochastic pattern [26]. Many applications using stochastic patterns are available in [27]-[32]

**Related works**

There are some mining methods that have been described earlier for the problem of Disease identification and diagnosis of heart disease. We discuss some of the methods here in this section.

Automatic heartbeat classification includes elimination of baseline drift [3-7], waveform detection [1], feature extraction [2], and heartbeat classification [3]. Heartbeat classification is at the core of the automatic ECG analysis. In the past few years, many researchers proposed different heartbeat classification techniques. Some groups used a waveform feature, and others used a wavelet transform, such as [4]. In recent years, with the development of machine

learning techniques, more studies have been conducted on the automatic heartbeat record classification methods to improve the effectiveness of arrhythmia detection. Specifically, [5] used SOMNN (self-organization map neural network), [6] used MLPNN (Multilayer Perceptron Neural Network), [7] used PNN (Probabilistic Neural Network) and [8] used a Dynamic Bayesian network. Multivariate feature extraction is considered as an important technique to extract the features without further analysis. Several techniques are used to analyze the multiple variables and those of which include the following: Principle Component analysis [33-35], partial least squares [36-38], Fisher discriminant analysis [39-41], and discriminant partial least squares [42-44]. There are few techniques, which provide multivariate stochastic analysis, which is used for estimating the model parameters. This includes: stochastic unit root (STUR) model [45], Domestic Loads Stochastic modeling [46], stochastic response surface method [47], Sequential Monte Carlo with Expectation-Maximization [48], non-affine structures with multivariate stochastic volatility in Nelson-Siegel model [49], multiple time scale synthetic time series [50], multivariate stochastic volatility (MSV) and the multivariate GARCH (MGARCH) model [51], Wishart Autoregressive (WAR) dynamic model [52], Bayesian dynamic linear model [53,55], circulation patterns classification model [54].

The problem of identifying constrained association rules for heart disease prediction was studied by Carlos Ordonez [9]. The resultant dataset contains records of patients having heart disease. Three constraints were introduced to decrease the number of patterns [10-12]. The attributes have to appear on only one side of the rule. Separate the attributes into groups i.e. uninteresting groups [13]. In a rule, there should be a limited number of attributes. The result of this is two groups of rules, the presence or absence of heart disease [14].

ECG beat classification using particle swarm optimization and support vector machine [15], proposed original ECG arrhythmia classification method using power spectral-based topographies and provision vector machine (SVM) classifier. The technique extracts electrocardiogram's ghostly and three timing intermission features. Non-parametric power spectral density (PSD) estimation methods are cast-off to extract haunted features. The proposed slant optimizes the relevant parameters of SVM classifier through a brainy algorithm using particle group optimization (PSO). These limits are Gaussian radial basis function (GRBF) kernel criticism  $\sigma$  and C penalty limit of SVM classifier.

ECG Arrhythmia Classification Using R-Peak Based Segmentation, Binary Particle Swarm Optimization and Absolute Euclidean Classifier [16], recommends a novel technique to classify arrhythmias from ECG indications using time domain and incidence field methods. The ECG signal is pre-processed by Fast Fourier Transform (FFT). It is then segmented into beats after noticing the R-peaks. The Separate Cosine Transform (DCT) and Separate Wavelet

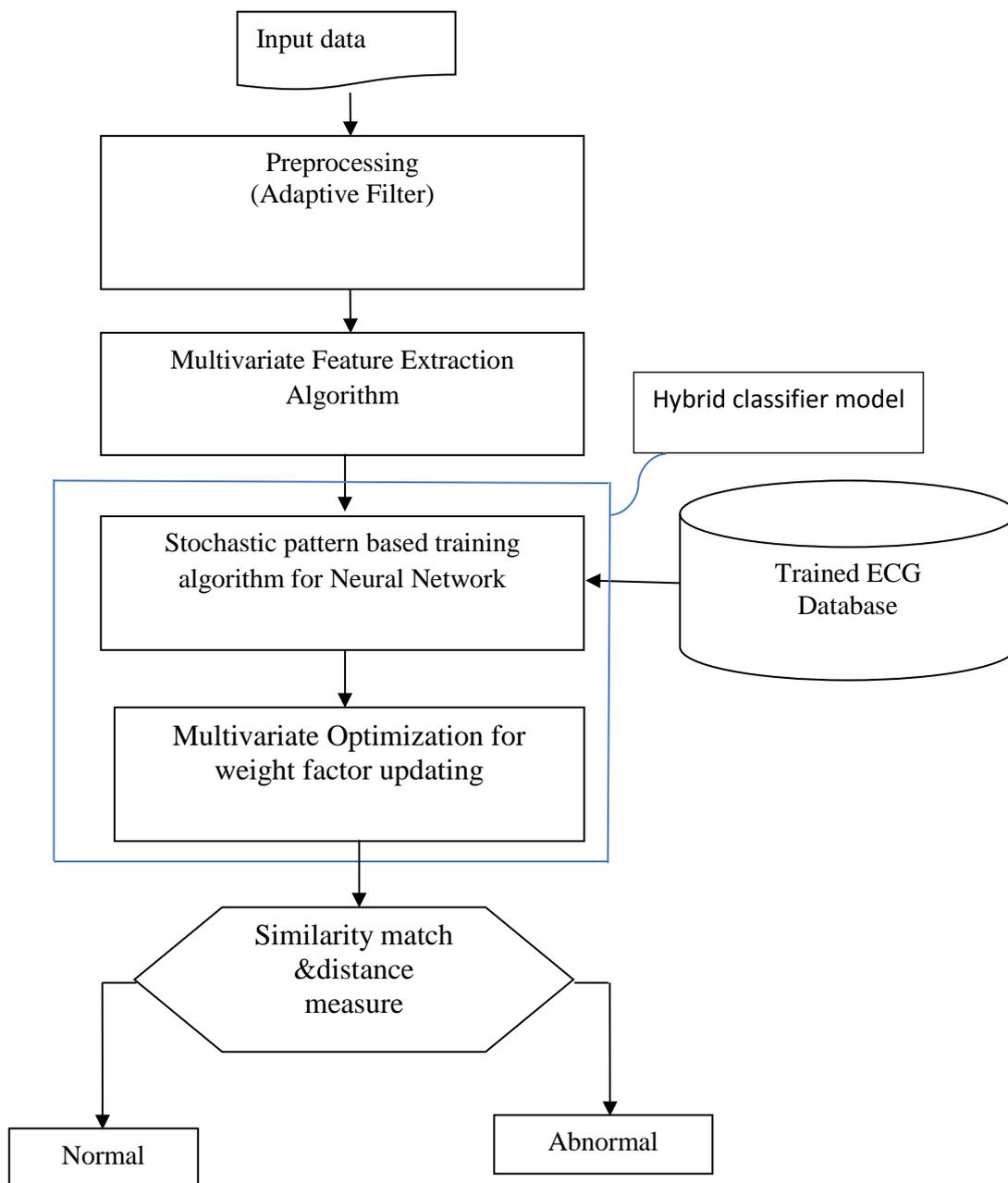
Transform (DWT) used for Eye Extraction pack most information in fewest constants.

All the above-discussed methods have the problem of diagnosis of heart disease and prediction of cardiovascular disease detection accuracy. In this work, novel algorithms for data mining used for the prediction of cardiovascular disease proposed. Hence it is observed that an Intelligent Hybrid classifier Techniques increase the accuracy of the heart disease prediction system.

**Material and methods**

The flow graph of the developed Coronary Artery Disease classification is shown in Figure1. The ECG Signal dataset

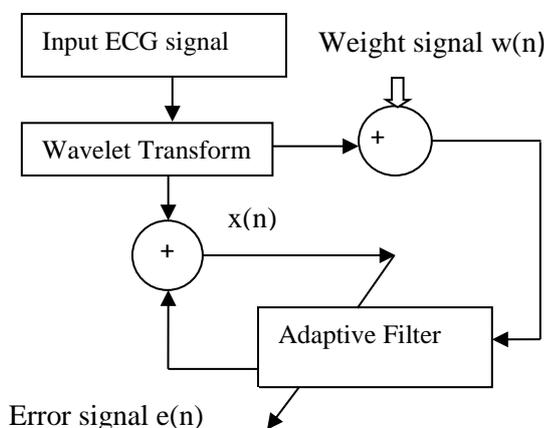
are acquired and preprocessed to improve the quality and accuracy of classification. The ECG signal noise during electrode measurement can be removed using adaptive filtering. Multivariate feature extraction algorithm extracts the ECG features. Then multivariate features are fed to the proposed Hybrid classifiers model where the Stochastic pattern based training and Multivariate optimization for weight factor updating can be used to classify the ECG signal based on models located and compares the input dataset with query dataset to produce the true positive and false negative samples. There are various stages of in the proposed classification of ECG signals as Preprocessing using Adaptive Filter, Multivariate Feature Extraction, Hybrid classifier (Stochastic pattern +Multivariate optimization) and Multivariate Similarity Measure.



**Figure 1: Flow graph of the proposed CAD classification system**

**Preprocessing (Adaptive Filtering):** A system is said to be adaptive when it tries to modify its parameters with the model of gathering essential characteristics or objective that relies on the system state and its environment. So the structure adjusts itself to find a critical phenomenon that is occurring as per its environment. Adaptive channels are self-outlining channels as indicated by a calculation which permits the circuit to input the underlying data measurements and to track them on the off chance that they are time fluctuating. These channels assess the deterministic signal and expel the noise uncorrelated with the deterministic signal. Keeping in mind the end goal to plan a prior channel learning of the desired reaction is required. At the point when such information is not accessible because of the adjustment in nature of channel prerequisites. In such circumstances, adaptive channels are attractive. Adaptive channels consistently change their drive reaction keeping in mind the end goal to fulfill the given condition. They are equipped for gaining from the insights of current conditions and adjust their coefficients with a specific end goal to accomplish a specific objective.

The block diagram of adaptive channel appears in Figure 2.



**Figure 2: Principle of Adaptive Filter for De-noising**

This block diagram demonstrates the upgrade of adaptive channels utilizing preprocessing method. In the first place, the ECG signs are taken from the biomedical instruments. And after that, it is sent to the preprocess block. Here the preprocessing is done with the assistance of wavelet change. At that point just it is forwarded to the adaptive channels for the expulsion of noise. After that exclusive, it is used for a finding of a signal.

Mathematically the yield Signal with the error estimation  $e(n)$  is given by:

$$e(n) = d(n) - w_n x(n)$$

The power or energy of this signal is computed by squaring:

$$e(n)^2 = d(n)^2 - w_n^2 x(n)^2$$

Adjusting the channel to minimize the error probability will not affect the signal power. So that, the base error signal is assessed. In this manner, reducing the total output signal is the same as minimizing the external signal power. The weights are improved in every emphasis by:

$$w_{n+1} = w_n + \mu e(n)x(n)$$

$w_n$  represents the adaptive filter coefficient at time  $n$ .  $\mu$  Represents an appropriate step size to be chosen as  $0 < \mu < 0.2$ . If  $\mu$  is too small,  $w_n$  is small, so it converge on the optimal solution will be too long. If  $\mu$  is too large,  $w_n$  becomes unstable and unbounded.

In this work, preprocessing is carried out using wavelet transform. The wavelet transforms the signals are represented as the sum of primary functions which are localized in time leads to more compact representation and also provides better insight into the properties of the signal. The input ECG waveform has various components P, Q, R, S and T, which has the different amplitude of signals. The signal value may be low in amplitude and to boost the signal to get identified to the next level, i.e., Feature extraction phase. We apply the wavelet transform to increase the signal by using the Adaptive filter to improve the quality of ECG waveform. Each constituent in the waveform must be having different values but ought to be at the positive level. The ECG waveform also must contain values for various apparatuses, and we identify the values and select them for further dispensation. The noisy and irrelevant indication values are detached from this and assumed for the next level.

**Algorithm:**

**Step 1:** start

**Step 2:** initialize the number of data sample, filter output vector, filter coefficient vector, error vector & filter coefficient matrix for coefficient history

**Step 3:** read input signal X.

**Step 4:** Evaluate Error

**Step 5:** for each signal  $X_i$  at  $n$  interval aim to estimate the optimum filter coefficients that minimize MSE where

$$MSE = \frac{\sum_{M,N} [I_1(m,n) - I_2(m,n)]^2}{M * N} \tag{2}$$

Here, M and N are the number of rows and columns in the original signal

$E_i = \text{Wavelet}(X_i)$

The least mean square calculation delivers the minimum mean square error, which provides lesser error by changing the channel weights. This is shown in the following figure:

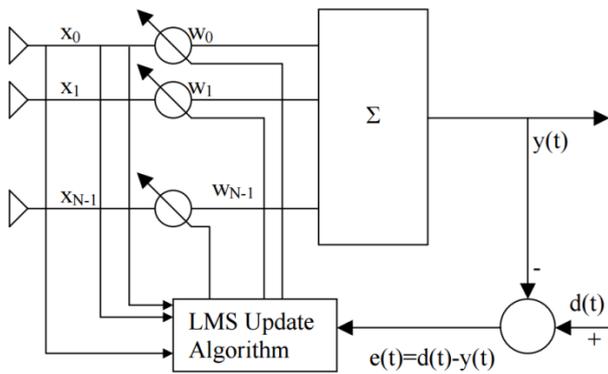


Figure: LMS adaptive network

If  $X_i > e(n) \min T$  then  
Add to the Weight update.

$$w_{n+1} = w_n + \frac{1}{2} \mu [-\nabla E(e^2(n))]$$

$\mu$  - step-size parameter and controls the convergence of the LMS algorithm  
 $e^2(n)$  - mean square error between the  $y(n)$  and the reference signal which is given by:

$$e^2(n) = [d(n) - w^h x(n)]^2$$

The gradient vector is computed as:  
 $\nabla_w (E\{e^2(n)\}) = -2r + 2Rw(n)$

Finally, the weights are updated as:  
 $w(n+1) = w(n) + \mu x(n)[d(n) - x^h(n)w(n)] = w(n) + \mu x(n)e(n)$

The LMS algorithm is initiated by the value  $w(0)$  at  $n=0$ . The successive weight vector corrections leads to the minimum mean squared error.

$$E = \sum (x + x_i). \text{End}$$

**Step 6:** Update the Filter coefficient using parameters filter length & step size until the Filtered ECG is obtained.

**Step 7:** stop.

**Multivariate Feature Extraction:** Multivariate Feature Extraction expressed that "a great component subset is one that contains highlights very related with the class yet uncorrelated with each other." Multidimensional Feature Extraction assesses a subset by considering the prescient capacity of every one of its elements independently Furthermore their level of balance. Multivariate techniques possibly accomplish better outcomes since they don't make improving suppositions of variable/component freedom. The distinction between Multivariate Feature Extraction and different strategies is that it gives a "heuristic legitimacy" for an element subset rather than every element freely. Hence it is Implies given a capacity (heuristic), the calculation can choose its best courses of action by selecting the choice that

amplifies the yield of this ability. Heuristic functions can likewise be intended to minimize the cost to the objective.

Subsequently based on the multivariate Feature Extraction technique that picks the components that are the most recognizable among the diverse classes. It over and overdraws an occasion (test) and, given its neighbors, it gives most weight to the components that segregate it from the neighbors of the other class. The multivariate algorithm is helpful to determine appropriate classification technique according to decision tree rules. However, the existing decision algorithm does not focus on temporal constraints. Hence a new temporal decision tree algorithm has been proposed and implemented in this research work the proposed multivariate algorithm for classifying Multivariate medical data. This algorithm necessary since the traditional data analysis techniques do support for the classification of enormous and complex medical data set. However, this proposed algorithm is capable of classifying the multivariate data efficiently.

The Spv has been empirically chosen to grow the decision tree for classification from the set of attributes  $A_i$ . In this algorithm, the search direction has been selected with the condition of Spv. This value is considered in such a way that it is tangent to the stable of this multivariate decision system. Moreover, the root node has been selected arbitrarily. Decision parameters based on time and heart-related attributes are used to grow the tree.

The steps of the proposed multivariate feature extraction algorithm are as follows:

**Input:** Coronary Artery Disease Dataset

**Step 1:** read input data

**Step 2:** Assign set of attributes as SA, and point values as pv,  $SA = \{A_1, A_2, \dots, A_n\}$  at time  $[t_1, t_2]$

**Step 3:** Select the attribute  $A_{jn}$  from SA as a root node and convert its value into point value (pv)

**Step 4:** Check for  $C_i$  C, where C Set of class labels and calculate point values for each attributes  $A_i$ , where  $pv = \{p_1, p_2, \dots, p_n\}$

**Step 5:** Assign Input values as  $I_v$ , where  $I_v$  is set of input values from the tuples/records

**Step 6:** Place the tuples into two subset (max,min) based on input value ( $I_v$ ) constraints.

**Step 7:** Test the condition, If  $S_v < I_v$  Completely lies (max of values)

**Step 8:** Check for pruning level at any point of the node, to avoid testing error

**Step 10:** Check for  $C_i$  and multivariate constraints at each node, of the tuples

**Step 11:** Repeat the steps 1 to 9 for classify the tuples

**Output:** Records are classified according to their Class labels

Compare each  $I_v$  value from the record with pv, where  $I_v$  is input value from the file. Based on the split value, spv and

temporal constraints the attributes are placed left or right of the decision tree. Here, class labels '1' for standard and label '2' for Sick. To get good results, the pruning level has been fixed on the higher side. In this work, the pruning level is 7. At each child node, this algorithm is checking for class labels. In this example, they are 1 and 2.

Table 1 shows the snapshot of feature generated using the proposed approach and it shows that the features of the ECG waveform have been extracted and represented in such a way to use them efficiently.

**Hybrid classifier model**

The proposed Hybrid classifier model consists of three stages. In the First stage, multivariate features are fed to the Artificial Neural Network which is trained by the stochastic pattern. In the next step, the weight factor is updated by a correction rule called multivariate optimization algorithm. Finally, the combined algorithm such as stochastic pattern based training and multivariate optimization are defined as the Hybrid classifier model. The following procedure explains the stages of proposed classifier model briefly.

**Stochastic pattern based training:** The modified Artificial Neural Network is utilized to ascertain the ECG feature detection, and it is trained by employing the features values which are extracted from each and every peak from the dataset. The Modified artificial neural network is well-formed using the extracted features called stochastic pattern [25]. The stochastic pattern is home to three input units, n hidden units and one output unit. The input of the neural network is the feature vector we have extracted from the peaks. The network is trained on a large set of the different multivariate function from input ECG to enable them to adequately recognize the exact query ECG signal in the testing phase. The proposed stochastic pattern based training works making use of two stages, one is the training period, and the other is the testing phase.

In the training phase, the input ECG signal feature is extracted using Multivariate feature vector is given as the contribution to the proposed stochastic pattern training network. Initially, the nodes are assigned random weights. As the output is already known in the training phase, the

output obtained from the neural network is compared to the original and weights are varied so as to reduce the error. This process is carried for a large dataset so as to yield a stable system having weights assigned to the nodes.

Stochastic pattern based feed-forward neural network is utilized in our methodology [25]. The structure is depicted in Fig. 2. The input layer has neurons i.e. some matrix elements, the hidden layer has neurons and the output layer has neurons i.e. the number of characters ranging from A to Z and letters 0 to 9. The stochastic pattern is used to train the neural network, which is described below.

**Step 1:** Generate arbitrary weights within the interval [0, 1] and assign it to the hidden layer neurons as well as the output layer neurons. Maintain a unity value weight for all neurons of the input layer.

**Step 2:** Input the training dataset I to the classifier and determine the stochastic pattern error as follows

$$SP_{err} = C_{tar} - C_{out}$$

In Eq. (8),  $C_{tar}$  is the target output and  $C_{out}$  is the network output, which can be determined as  $C_{out} = [Y_2^{(1)} Y_2^{(2)} K Y_2^{(N)}]$ ,  $Y_2^{(1)}$ ,  $Y_2^{(2)}$ ,  $K$ ,  $Y_2^{(N)}$  are the network outputs. The network outputs can be determined as

$$Y_2^{(l)} = \sum_{r=1}^{N_H} w_{2r1} Y_1(r)$$

Where,

$$Y_1(r) = \frac{1}{1 + \exp(-w_{1r} \cdot C_{in})}$$

From above equation represents the activation function performed in the output layer and hidden layer respectively.

**Step 3:** Adjust the weights of all neurons using multivariate optimization for weight updating.

**Step 4:** Repeat the process from step 2, until SP error gets minimized to a least value. Practically, the criterion to be satisfied is  $SP_{err} < 0.1$ .

**Table 1**  
**Example multivariate feature generated in this procedure**

| Pr sec | Rr sec | Qt sec | St sec | P mV | QRS sec | PA mV | QA mV | RA mV | TA mV |
|--------|--------|--------|--------|------|---------|-------|-------|-------|-------|
| 0.17   | 0.54   | 0.34   | 0.19   | 0.62 | 0.13    | 24    | 0.021 | 1.54  | 0.32  |
| 0.16   | 0.53   | 0.32   | 0.17   | 0.59 | 0.14    | 26    | 0.023 | 1.58  | 0.34  |

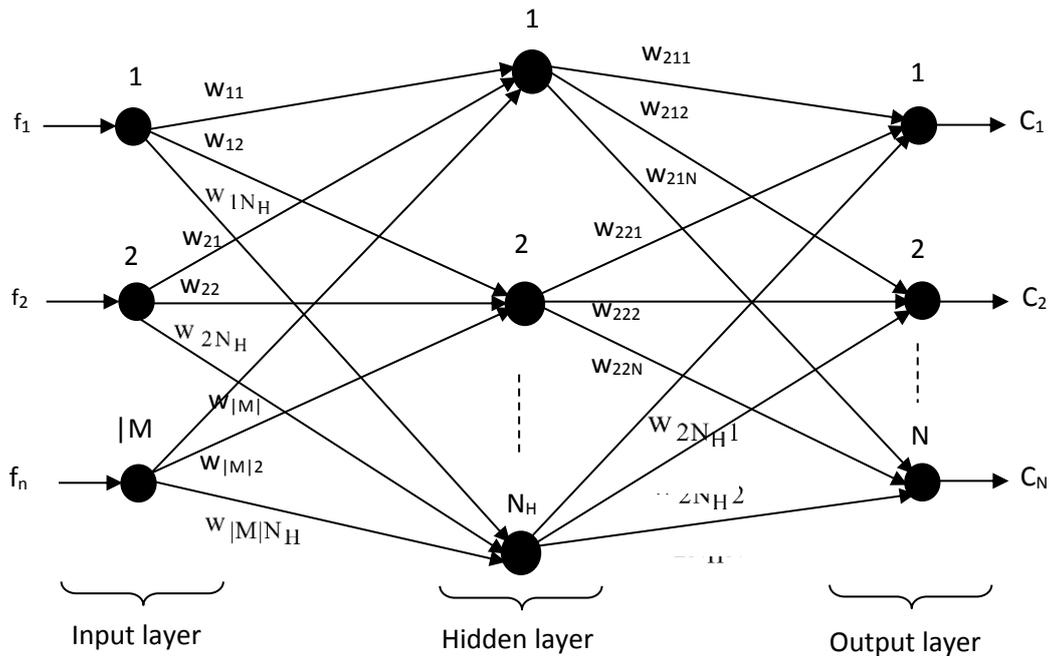


Fig. 2: Structure of Stochastic pattern based Network

In the testing phase, the query ECG signal is fed to the trained stochastic pattern based network having particular weights in the nodes, and the output is calculated so as to classify the signal based on the prepared dataset. In the ordinary neural network, the process will be stopped after testing. In the proposed Hybrid classifier model incorporated the optimization algorithm to optimize the weight used for testing. In our proposed method the weights are optimized with the help of the Multivariate Optimization Algorithm. By incorporating optimization process, the recognition accuracy will be improved thereby providing a better classification of the ECG signal. The structure of the artificial neural network is illustrated in Fig.2.

**Multivariate optimization based weights updation:** The Multivariate Optimization is based on Levenberg-Marquardt Method enthused by the Natural behavior of Multivariate optimization. Steepest descent method (that is, minimization along the direction of the gradient) with the Newton method (that is, using a quadratic model to speed up the process of finding the minimum of a function) is used to optimize the weight values. The proposed multivariate optimization is clearly explained below:

Input: Generate and initialize weight factor within predefined min and max operating limits  
Output: Evaluate fitness of weight function  $w_i$   
The basic steps of this method are as follows:

**Step 1:** Set the initial weights (or bias)  $w_i = w_0$ , and Initialization and update of the L-M parameter,  $\lambda$ , and the parameters  $p$

$$\lambda_0 = \lambda_0; \lambda_0 \text{ is user - specified}$$

**Step 2:** Collect the input-output data

**Step 3:** Calculate the performance function  $E(w_i)$  and the Jacobian matrix  $J_i$ ;

$$J^i = \begin{bmatrix} \frac{\partial e_1}{\partial w_1^i} & \frac{\partial e_1}{\partial w_2^i} & \dots & \frac{\partial e_1}{\partial w_B^i} \\ \frac{\partial e_2}{\partial w_1^i} & \frac{\partial e_2}{\partial w_2^i} & \dots & \frac{\partial e_2}{\partial w_B^i} \\ \vdots & \vdots & \ddots & \vdots \\ \frac{\partial e_q}{\partial w_1^i} & \frac{\partial e_q}{\partial w_2^i} & \dots & \frac{\partial e_q}{\partial w_B^i} \end{bmatrix}_{Q \times B}$$

where  $Q$  is the number of neurons in the output layer and  $B$  is the number of weights.

**Step 4:** Calculate according to  $\omega^{i+1}$  equation

$$\omega^{i+1} = \omega^i - (J^{iT} J^i + \mu I)^{-1} J^{iT} e.$$

Above Equation is calculated from the proposed Multivariate optimal method

**Step 5:** (Is  $w < \text{optimal}$ ?)

If yes, decrease, i.e.  $w^{i+1}$  (decrease coefficient);  
Else  
Increase the coefficient

**Step 6:** If the performance index  $E$  is less than target or the number of training epochs reaches the fixed number, then stop, else go to (2).

**Step 7: end**

By utilizing the Hybrid classifier algorithm, as shown above, the weights are assigned to the stochastic pattern based network which makes the recognition of ECG Signal more accurate and improved. The proposed Hybrid classifier delivers better accuracy regarding recognizing the particular signal because of incorporating the optimization process. Various CAD dataset input are applied to our proposed system, and the data are separated and using the extensive multivariate features extracted for each peak, the detection is done with the aid of proposed Hybrid classifier and the results with improved detection accuracy are evaluated.

**Hybrid classifier based similarity measure**

The ECG waveform is classified towards number of classes based on the computed multivariate similarity measure of each attributes and training samples present in the data set. With the computed similarity measure, we choose the maximum valued similarity measure and assign the class accordingly. At this stage, the extracted feature values are used to compute the peaks similarity and Metric value of each signal.

**Algorithm for multivariate similarity measure:**

**Input:** Coronary Artery Disease (CAD) Dataset

**Step 1:** Collect data set  $D_{train} = \{h_1, h_2, h_3 \dots h_m, s_1, s_2, s_3 \dots s_n\}$

**Step 2:** Separate  $H = \{h_1, h_2, h_3 \dots h_m\}$  healthy records

**Step 3:** Separate  $S = \{s_1, s_2, s_3 \dots s_n\}$  sick records

**Step 4:** Collect statistically similar pair from the above records (N)

**Step 5:** Find out distance ( $d_{ij}$ ) between healthy (m) and sick (n) records using distance metrics.

Compute  $d_{ij} = ((h_i - s_i)^2) / 2$

**Step 6:** Check the distance ( $d_{ij}$ ) between records.

**Step 7:** If the distance ( $d_{ij}$ ) between the records are minimum ( $d_{min}$ )

Compute if  $d_{ij} < d_{min}$  then add ( ) GDRV (Gaussian Distribution Random Value)

**Step 8:** Train new data set  $D_{trainNew}$  with Similarity measure

Compute  $N = N\{h_1, s_1\}$

**Output:** Classified Datasets

The yields of the proposed classifier vectors are then prepared and the execution exactness utilizing different classifier strategies were thought about. The exhibitions of

the different classifiers were assessed regarding the affectability, specificity and exactness utilizing different classifiers.

The sensitivity of the Hybrid classifier technique can be evaluated utilizing,

$$Sensitivity = \frac{T_p}{T_p + F_n} * 100$$

Where  $T_p$  is the genuine positive,  $T_n$  is genuine negative,  $F_p$  is the false positive and  $F_n$  is the false negative. The Specificity is named as the negative likelihood for the ECG flag test and it can be evaluated by,

$$Specificity = \frac{T_n}{T_n + F_p} * 100$$

Accuracy is the probability that a ECG signal test is performed correctly. It is then found by

$$Accuracy = \frac{T_p + T_n}{T_p + T_n + F_p + F_n} * 100$$

Classification is the process of classifying the given input by training with a suitable classifier. In the present work, Artificial Neural Network based stochastic pattern based training, Multivariate optimization are the combination as hybrid classifier are used for CAD classification.

**Results and Discussion**

The Hybrid classification system was implemented using Matlab. The ECG signal dataset in total of 248 signal sets are taken from the available database namely Physionet, UCI and MIT database. We have proposed Hybrid Classifier approaches and the proposed method has been implemented and evaluated for its performance. We discuss the results produced by proposed approaches in this section.

The Table 2 shows the dataset being used to evaluate the performance of the proposed methods. Using the above mentioned data set, the efficiency of proposed methods has been measured for different measures of CAD detection accuracy.

The figure 3 shows the input Electrocardiogram signal from the single channel electrode cited from the physionet database.

The figure 4 shows the filtered ECG signal using adaptive filter.

**Table 2**  
**Details of data set being used**

| Data Set Name | Number of Users | Number of samples | Resolution |
|---------------|-----------------|-------------------|------------|
| Physionet     | 10              | 100               | 16 bits    |
| UCI           | 48              | 48                | 16 bits    |
| MIT           | 100             | 100               | 16 bits    |

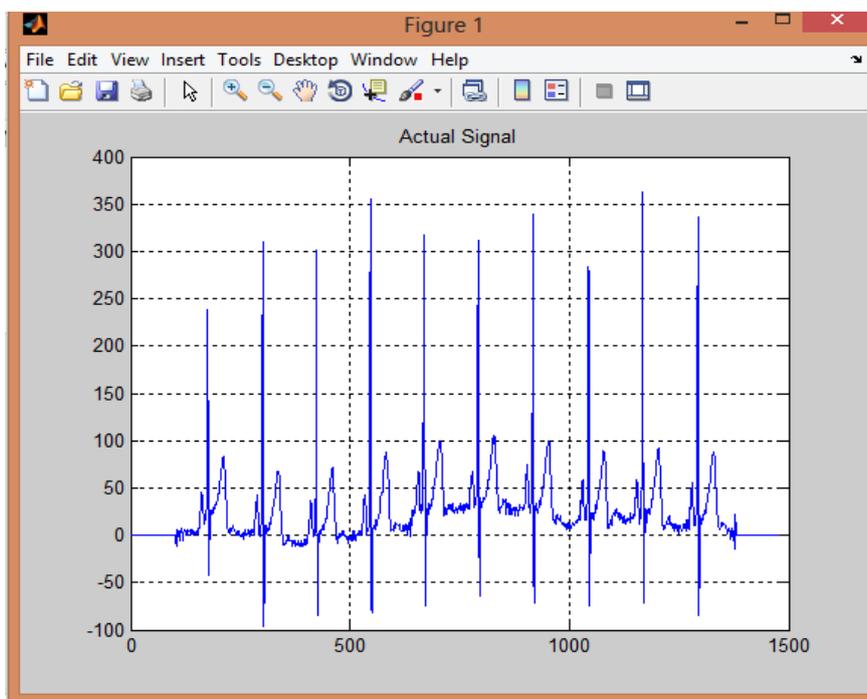


Figure 3: Input ECG

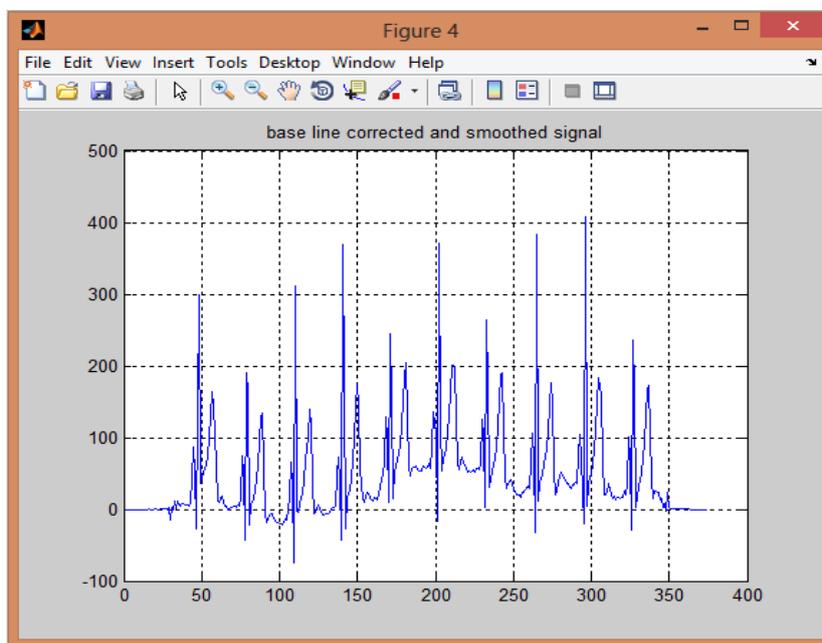


Figure 4: Filtered ECG Signal.

Table 3  
Performance of the various classifiers for  $w_n = 0.1$

| S.N. | Classifiers | Total No. of Dataset | TP  | FN | TN | FP | Sensitivity (%) | Specificity (%) | Accuracy (%) |
|------|-------------|----------------------|-----|----|----|----|-----------------|-----------------|--------------|
|      | ICA         | 248                  | 197 | 24 | 18 | 9  | 95.63           | 57.14           | 89.11        |
|      | SVM         | 248                  | 201 | 32 | 9  | 6  | 97.10           | 78.05           | 93.95        |
|      | ANN         | 248                  | 228 | 14 | 4  | 2  | 99.13           | 77.78           | 97.60        |
|      | SPPS        | 248                  | 232 | 12 | 3  | 1  | 99.57           | 80.00           | 98.39        |
|      | Hybrid      | 248                  | 237 | 10 | 1  | 0  | 100.00          | 90.91           | 99.60        |

The performance of the various classifiers is shown in Table.3. The accuracy, sensitivity and specificity were calculated by comparing the input and the Processed ECG signal to get true positive, true negative, false positive and false negative signal in the database. The performance of the developed classification system is compared with the existing classifiers is given in Table.4. The Hybrid classifier produces a higher accuracy of 99.6%. This is due to the combination of stochastic patter and Multivariate signal classification.

Figure 6, presents the comparison of heart rate detection by different methods and it shows clearly that the proposed method has produced higher accuracy than others.

Figure 7 shows the comparison of results obtained from different methods false classification. The proposed method has less false ratio which is negligible.

We have shown from the above tables and charts that the proposed Hybridclassification based ECG classification approach has produced efficient results in all the factors of CAD detection.

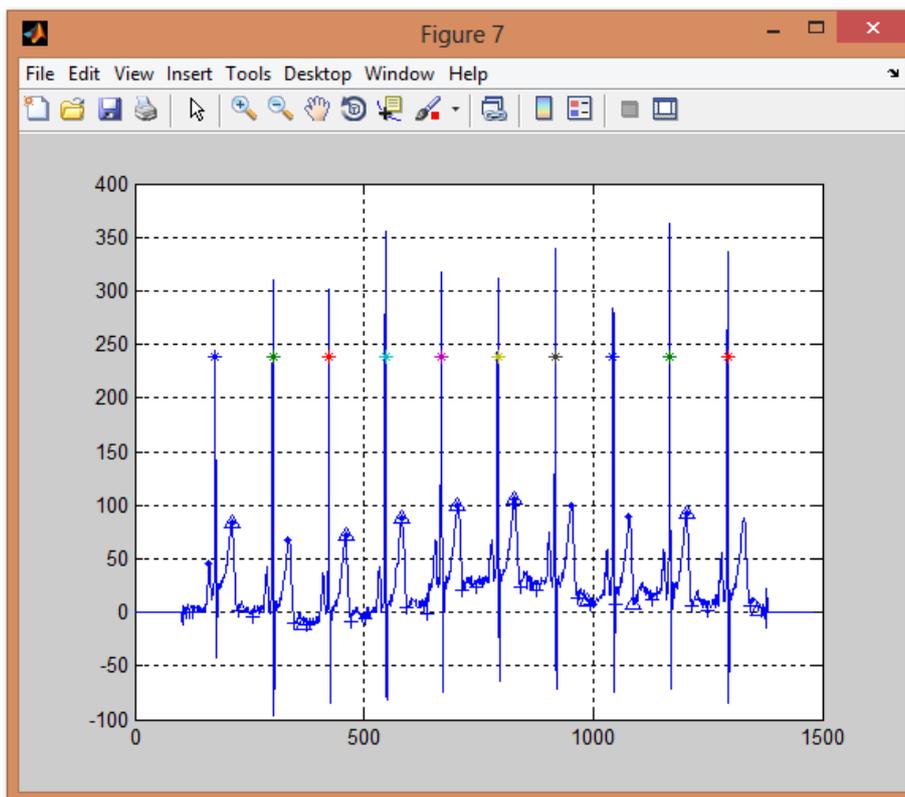


Figure 5: Multivariate feature peaks ECG

Table 4  
Comparison of classification accuracy obtained by various methods for different weights

| S.N. | Authors                      | Technique       |                     |            | Classification accuracy in %<br>( $w_n = 0.1$ ) | Classification accuracy in %<br>( $w_n = 0.2$ ) | Classification accuracy in %<br>( $w_n = 0.2$ ) |
|------|------------------------------|-----------------|---------------------|------------|---|---|---|
|      |                              | Preprocessing   | Feature Extraction  | Classifier |   |   |   |
| 1.   | Attia et al[2011]            | Median filter   | DWT                 | ICA        | 89.11   | 82.10   | 78.21   |
| 2.   | D.Ye et al [2012]            | -               | Data Mining         | SVM        | 93.95   | 88.51   | 82.78   |
| 3.   | Kumari and P. R. Kumar[2013] | Gabor filter    | -                   | ANN        | 97.60   | 90.24   | 85.10   |
| 4.   | SPPS[25]                     | Median filter   | DWT                 | SPPS       | 98.39   | 91.74   | 86.51   |
| 5.   | HYBRID                       | Adaptive filter | Multivariate Vector | HYBRID     | 99.60   | 92.01   | 88.94   |

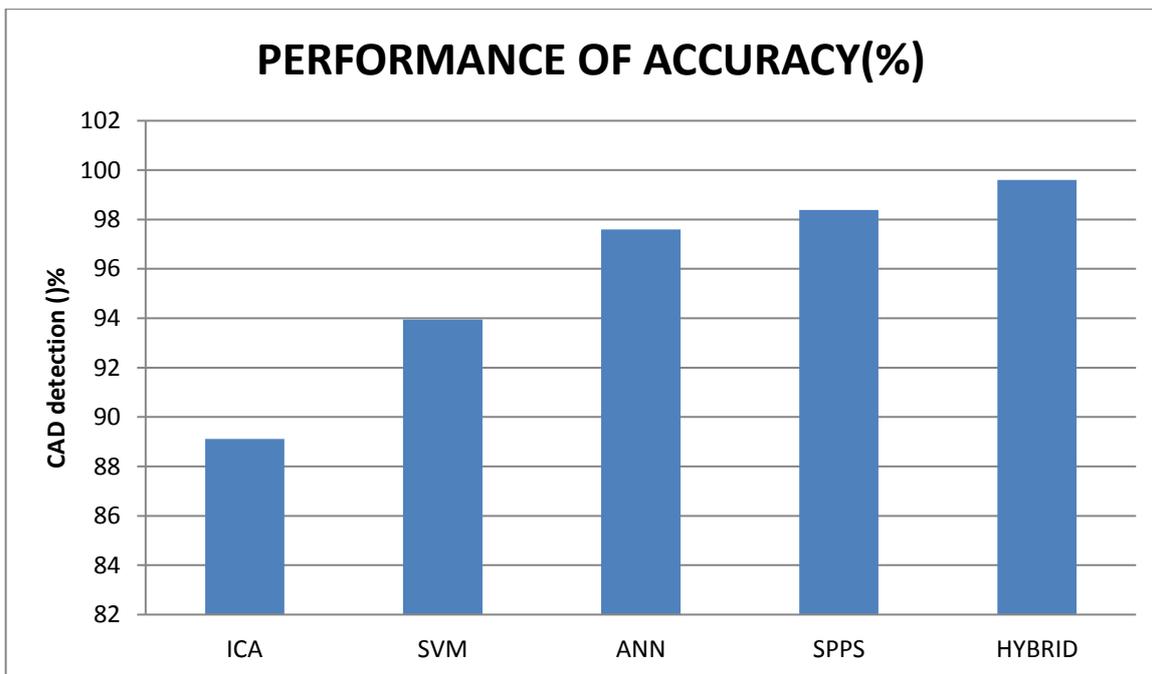


Figure 6: Comparison of fetal heart rate detection accuracy

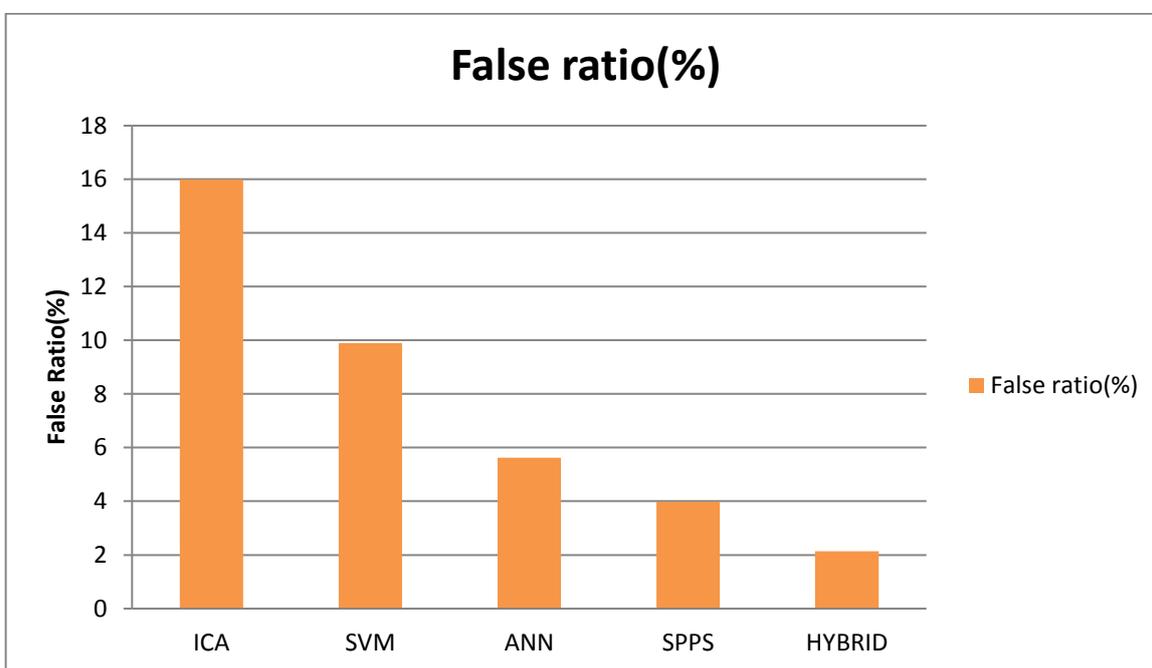


Figure 7: Comparison of different methods in false ratio

**Conclusion**

An efficient CAD classification technique using Hybridclassifier is presented. The adaptive filtering was used to remove the noises in the ECG signal and the peaks features were extracted using Multivariate similarity Method. The extracted peaks features were selected using multivariate similarity measures and feature vectors. The performance of the various classifiers were estimated and found that the Hybridclassifier outperforms other classifiers. The developed system can be used for better health care.

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