



# Deep Learning in Action

Annotating Quasi-Periodic Signals with MATLAB

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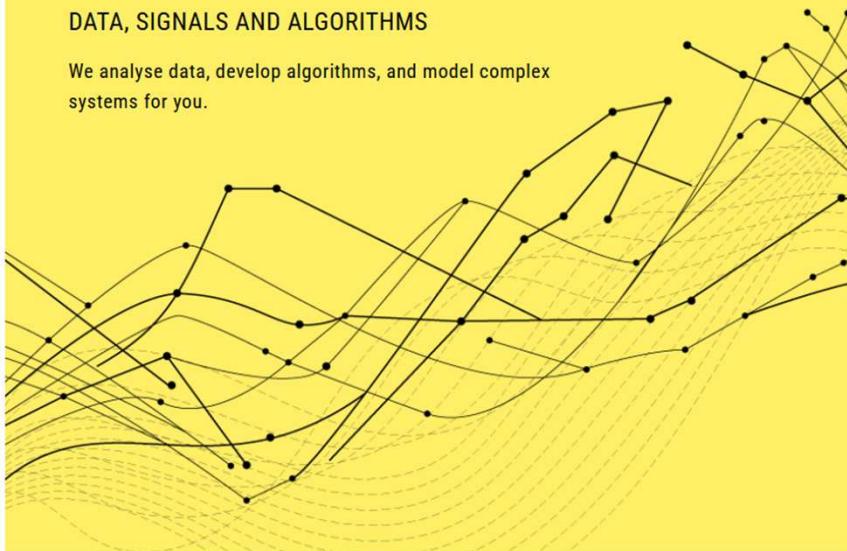


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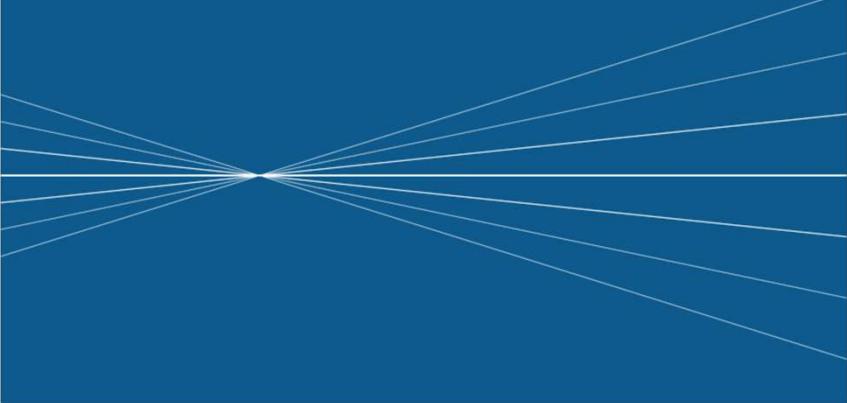
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# Who is Dr. Türck Engineering?



Created by Bastian Klampke

# Who is Dr. Türck Engineering?

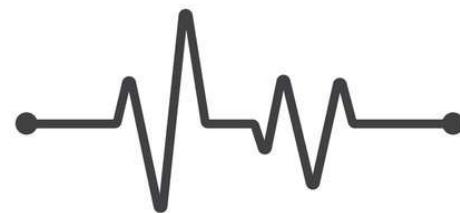


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DATA ANALYSIS IN CONNECTION WITH COMPLAINTS ABOUT MEASURING DEVICES  Measurement Technology & Sensors	PREDICTIVE MAINTENANCE USING MATLAB  Automotive Industry / Mobility	LENSES FOR CINEMA PRODUCTION  Optical Industry and Photonics

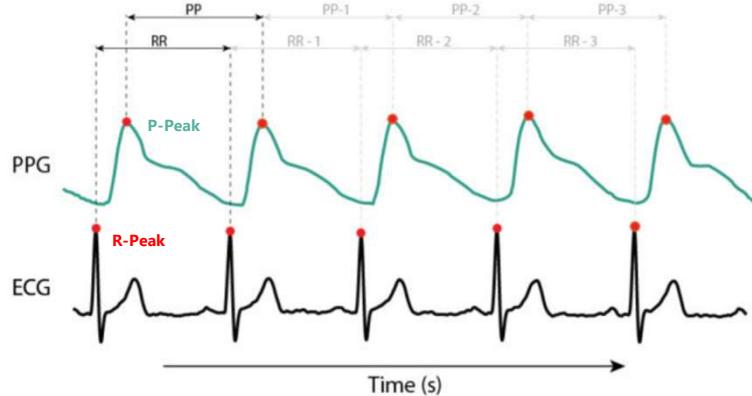
More on <https://tuerck-ing.de/en/projects/>



## Motivation

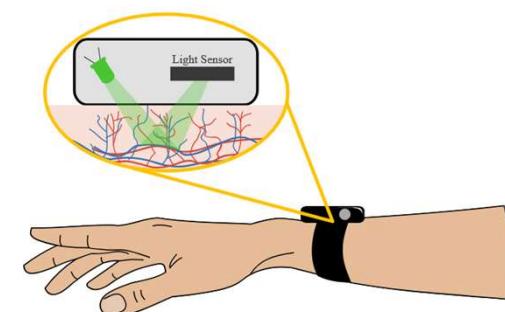


# Motivation – Heartbeat as Quasi-Periodic Signal



## PhotoPlethysmoGraphy:

- Measures **blood volume changes optically** in the skin
- **P Peaks** mark highest peripheral blood volume in the skin resulting from the propagated pulse wave after heart (ventricular) contraction



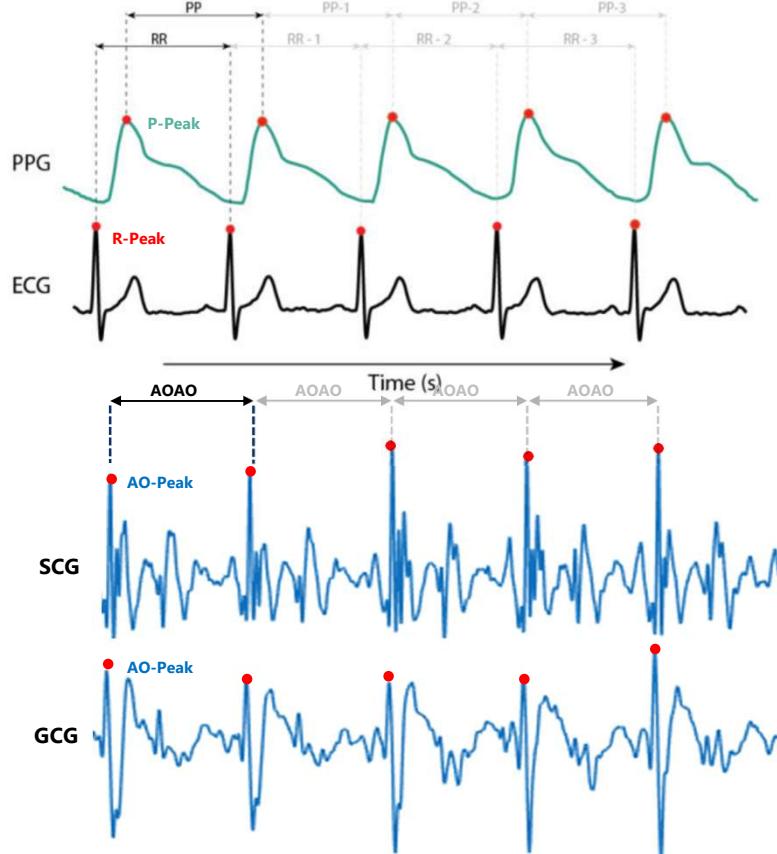
*Electrodes are placed on a patient's chest to record the heart's electrical signals.*

## ElectroCardioGraphy:

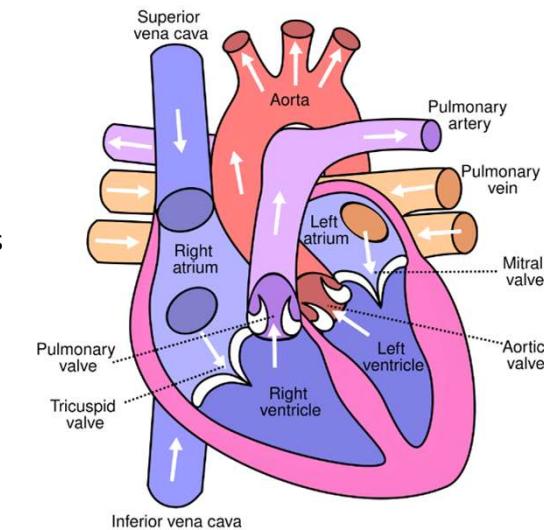
- Measures **electric activity** of the heart
- **R Peaks** mark highest electric activity caused by ventricular depolarization, which leads to heart (ventricular) contraction

Image Sources: FibiCheck, SlateSafety, KID-PPG

# Motivation – Heart Beat as Quasi-Periodic Signal



**Inertial Measurement Units**  
→ Cheap and small  
→ Almost everywhere nowadays  
→ MechaNoCardioGrams can be measured with your Smartphone (using e.g. the App PhyPhox)

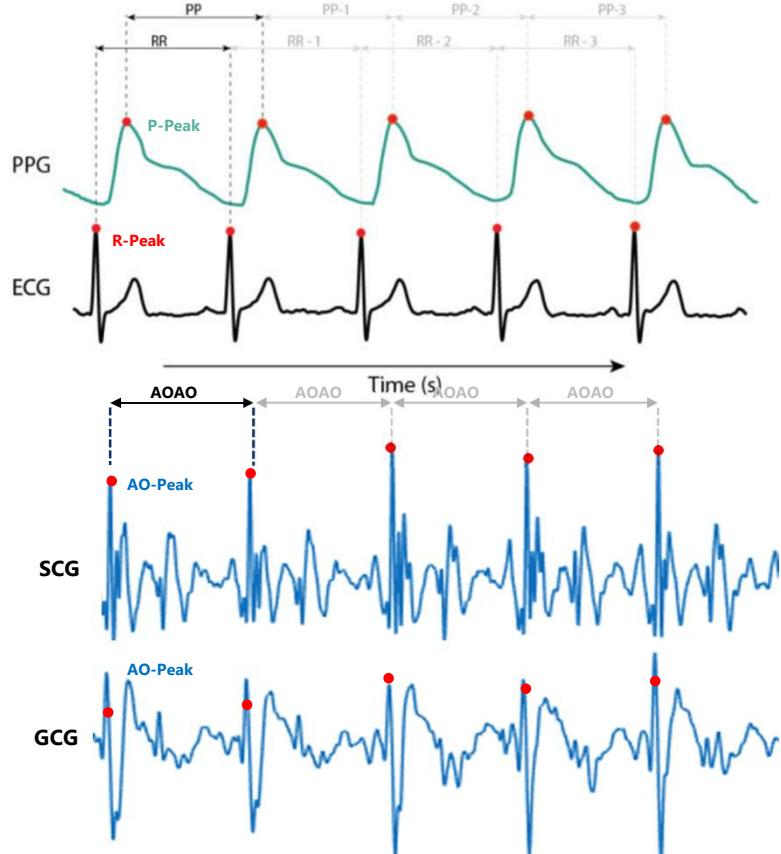


## MechaNoCardioGraphy:

- SeismoCardioGraphy measures **acceleration**
- GyroCardioGraphy measures **angular velocity**
- **AO Peak (Aortic Valve Opening)** marks the highest change in acceleration and angular motion due to heart (ventricular) contraction

Image Sources: CardioSignal, Wikipedia

# Motivation – Heart Beat as Quasi-Periodic Signal



**Heart Beat Intervals (RR, PP, AOO)** are used for statistical analysis to quantify heart rate, **heart rate variability** and related features, which is an important indicator of a patients health status.

→ A reliable heart beat annotation algorithm is essential!

## Goal:

Customer wants a robust solution for heartbeat annotation in **MechanoCardioGrams** for **clients with pathological** (unhealthy) **heart conditions**



# Approaches

# First Approach – Pan Tompkins Algorithm

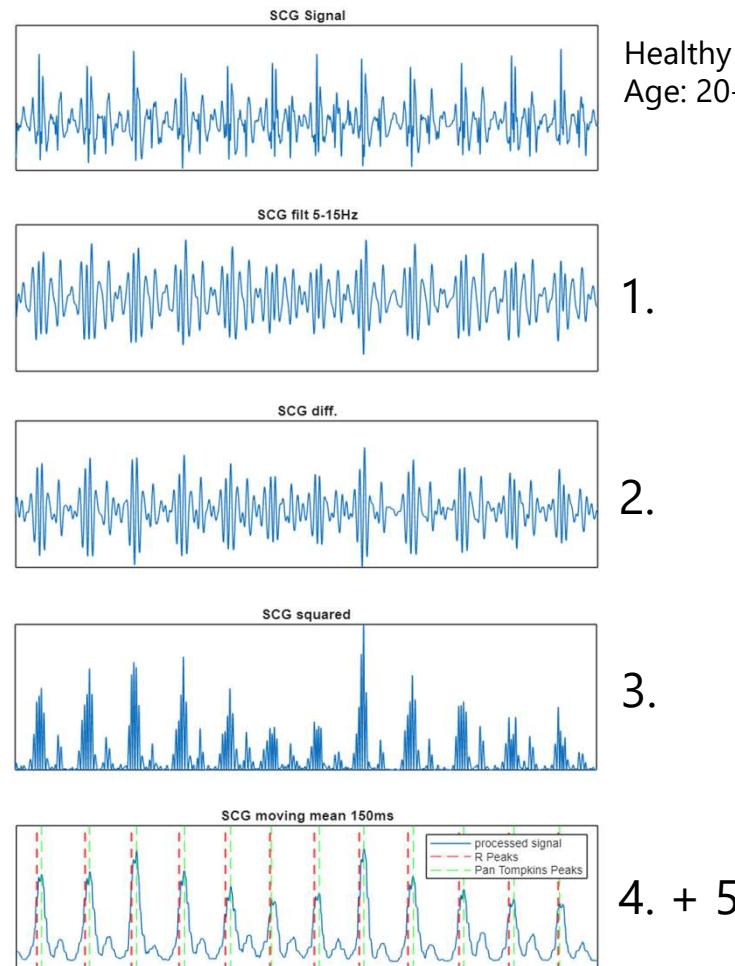


**Pan Tompkins Algorithm** is widely applied in slight variations to annotate heart beat signals from **ECG** and **PPG**

**Only five steps!**

1. Bandpass Filter
2. Differentiate filtered signal
3. Square differentiated signal
4. Moving mean
5. Find peaks that are larger than a certain threshold

→ Easy to apply  
→ Easy to tweak



\*public dataset (healthy and unhealthy people, contains also R-Peaks)

# First Approach – Pan Tompkins Algorithm

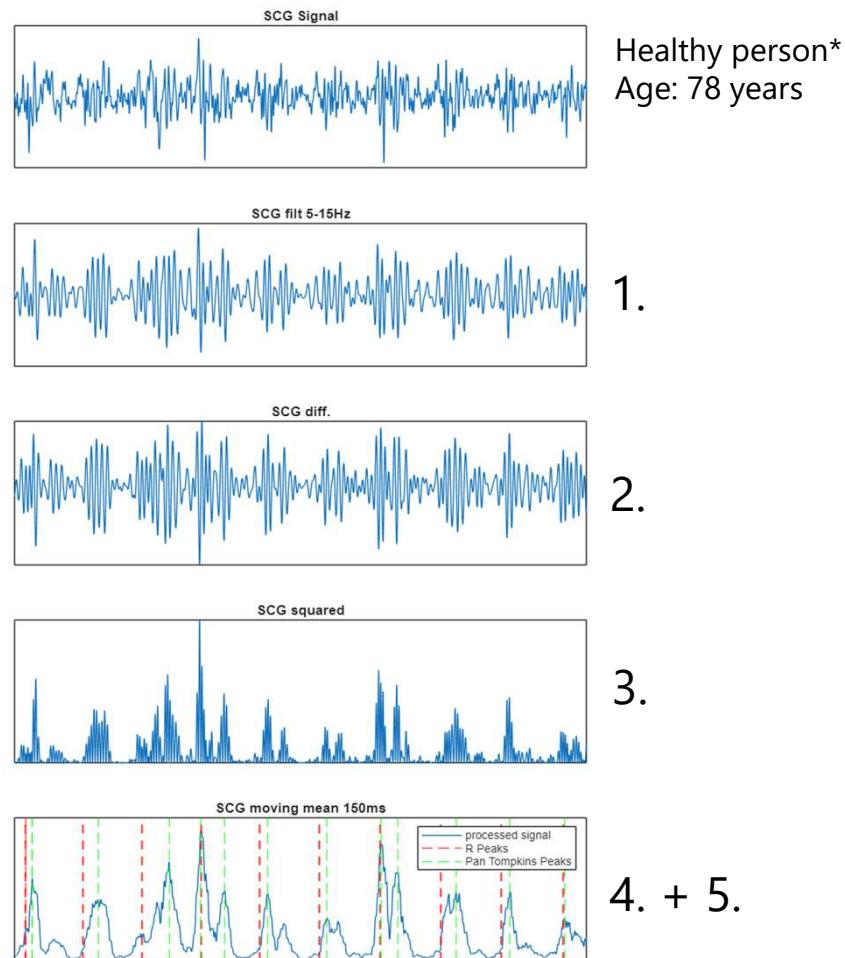


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# First Approach – Pan Tompkins Algorithm



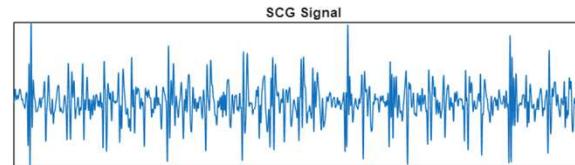
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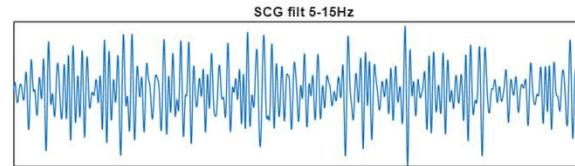
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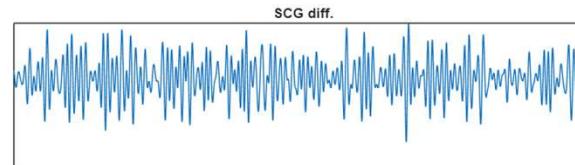
→ Pan Tompkins fails for more complex heartbeat signatures as it is the case for older or unhealthy people



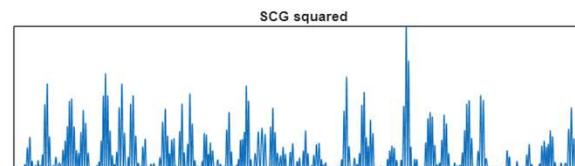
Unhealthy person\*  
Age: 46 years



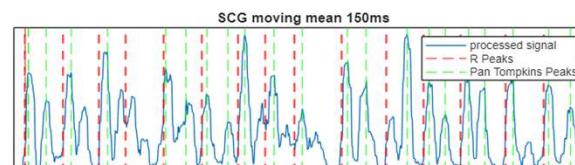
1.



2.



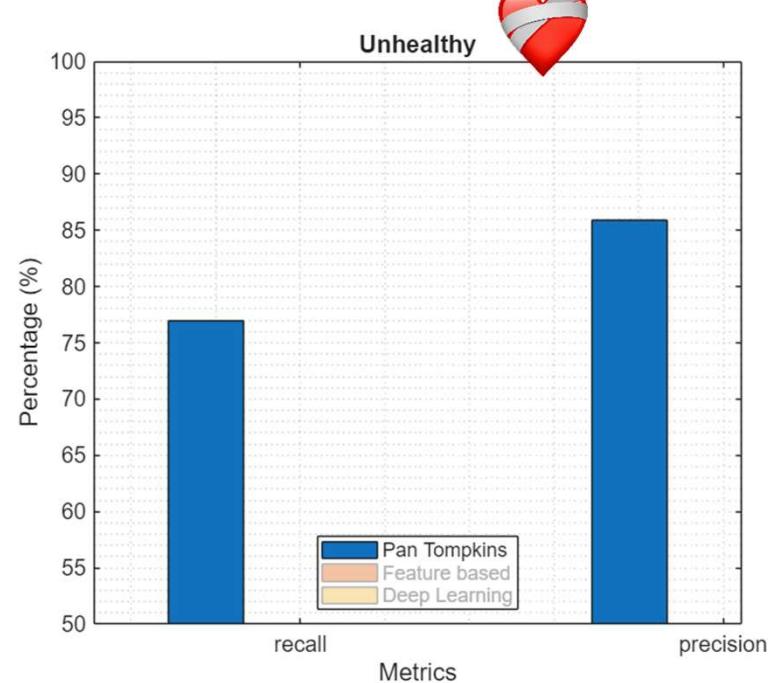
3.



4. + 5.

\*public dataset (healthy and unhealthy people, contains also R-Peaks)

# First Approach – Pan Tompkins Algorithm



→ Fails with unhealthy MechanoCardioGraphs

**Recall** =  $TP / (TP + FN)$

**Precision** =  $TP / (TP + FP)$

True Positive (TP) Heartbeat Peak = appears AFTER R peak within 200ms

False Positive (FP) Heartbeat Peak = every other annotated peak that is NOT a heart beat

False Negative (FN) Heartbeat Peak = every unmatched R peak / not found heart beat

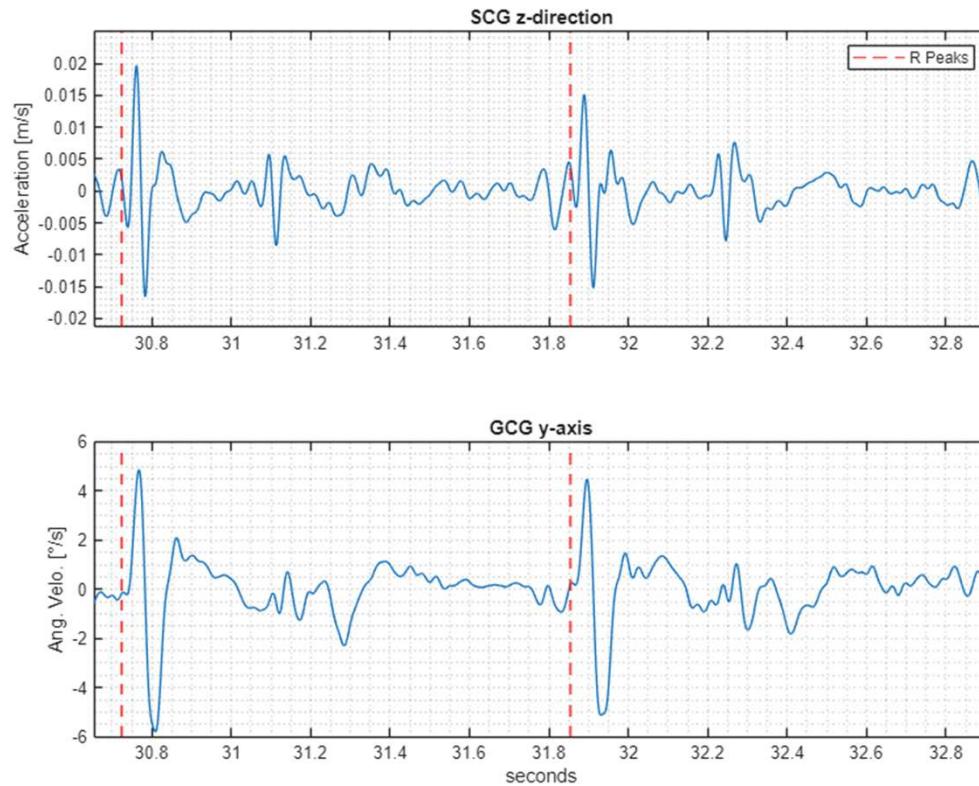
**Recall**

- "have **all heartbeat peaks** been found?"
- **100%** means we found **every heartbeat!**

**Precision**

- "how **few false heartbeat peaks** have been found?"
- **100%** means **no false positives!**

## Second Approach – Feature Based Classification



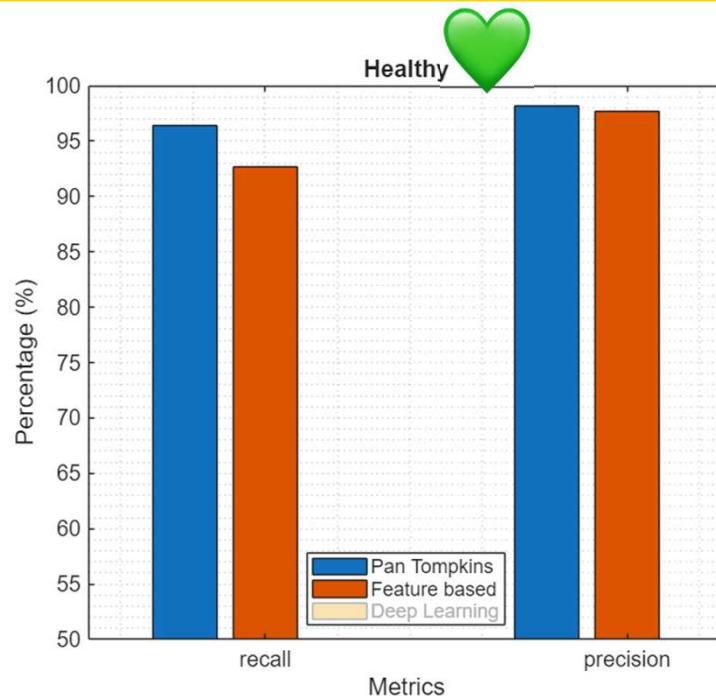
### Train Machine Learning Model\*

1. Peaks are characterized by
  - Abs. Amplitude
  - Rise-Time
  - falling-Time

... many more features (20 – 30)
2. Classify peaks with random forest

\*Trained on public data (healthy and unhealthy people)

## Second Approach – Feature Based Classification



- Less good for healthy MechanoCardioGraphs
- But improves for unhealthy MCGs

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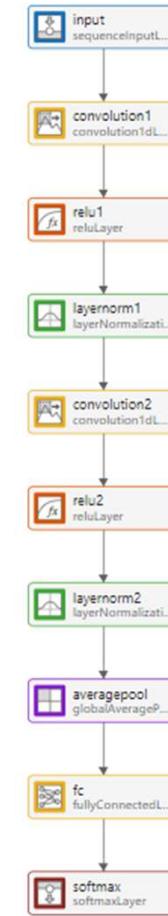
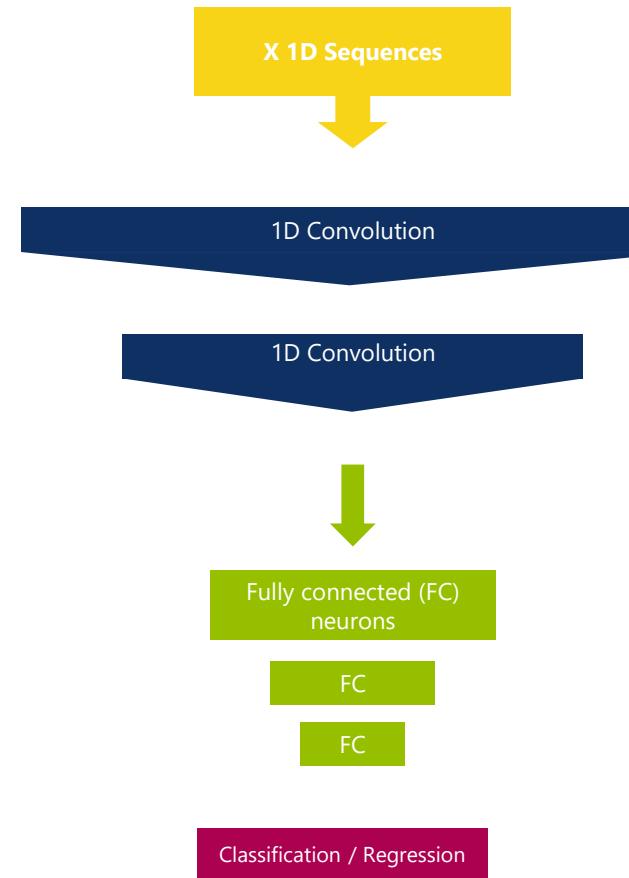
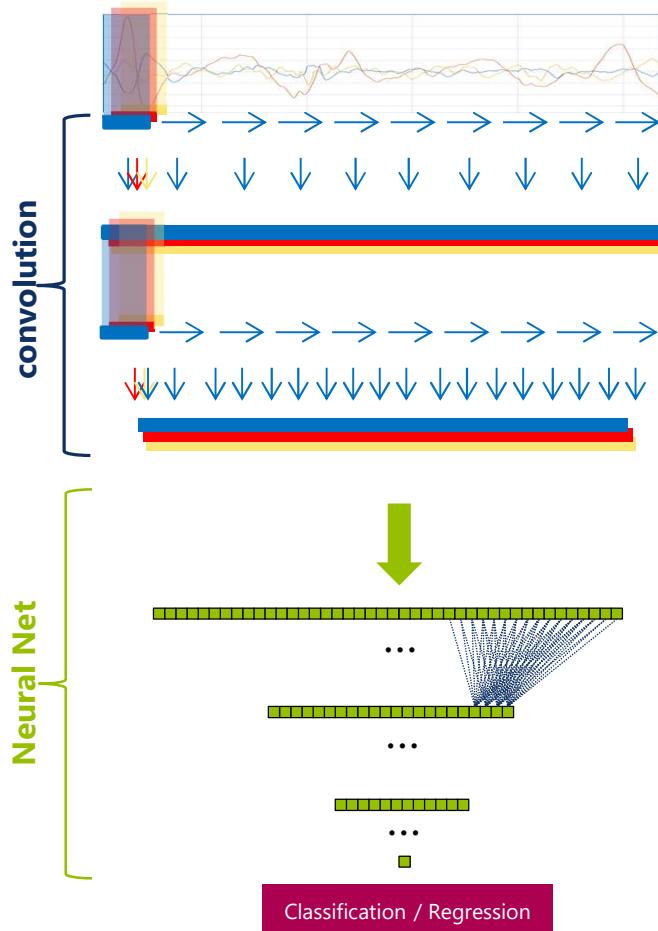
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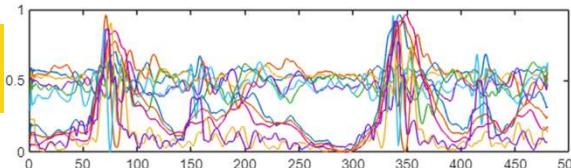
# Final Approach – Deep Learning



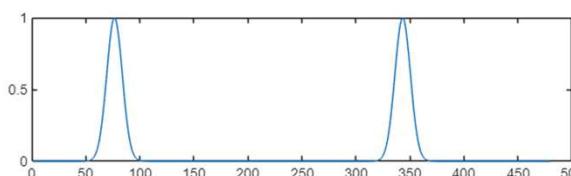
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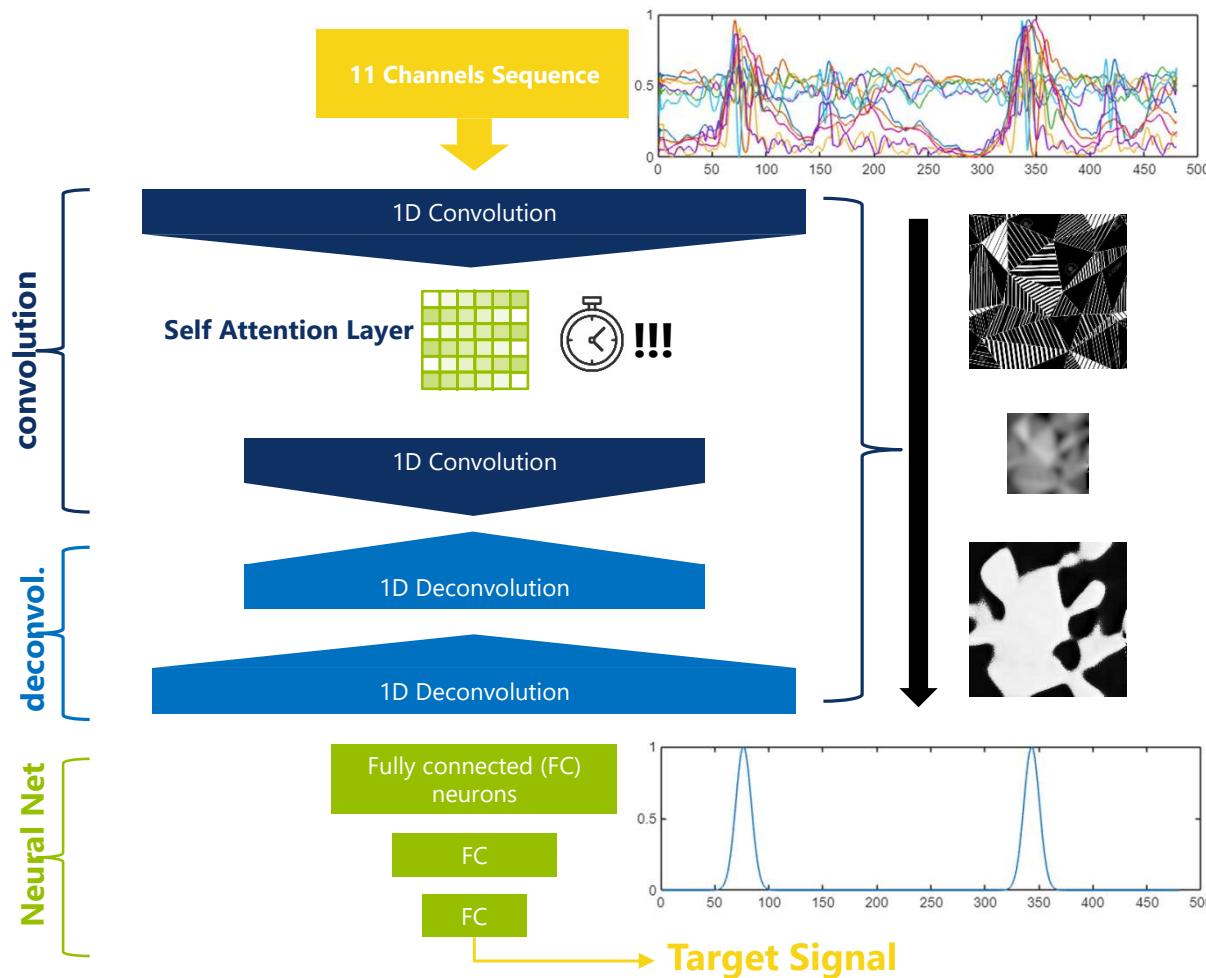
11 Channels Sequence



3 **SeismoCardioGrams** (x, y, z)  
3 **GyroCardioGrams** (x, y, z)  
5 engineered signal combinations



# Final Approach – Deep Learning



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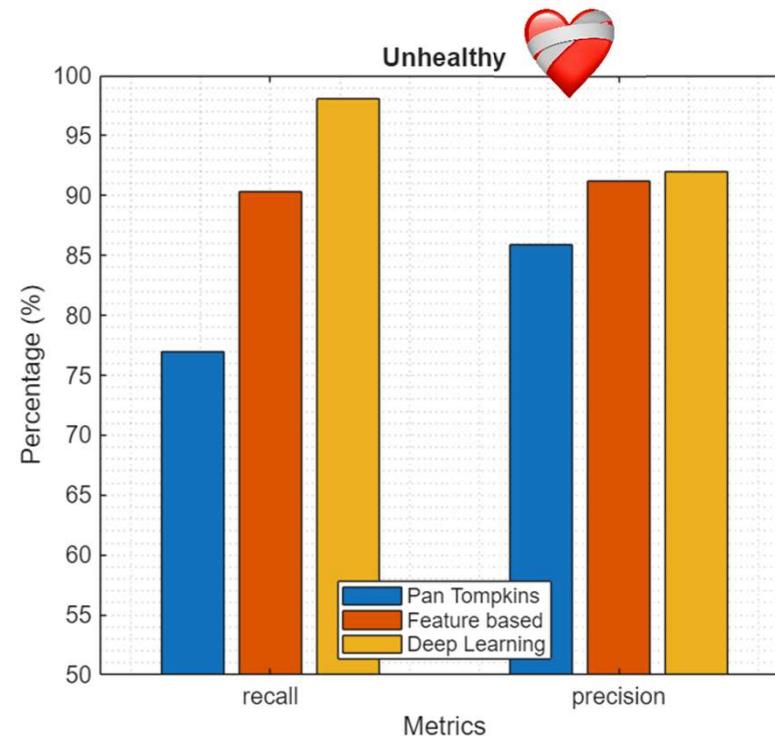
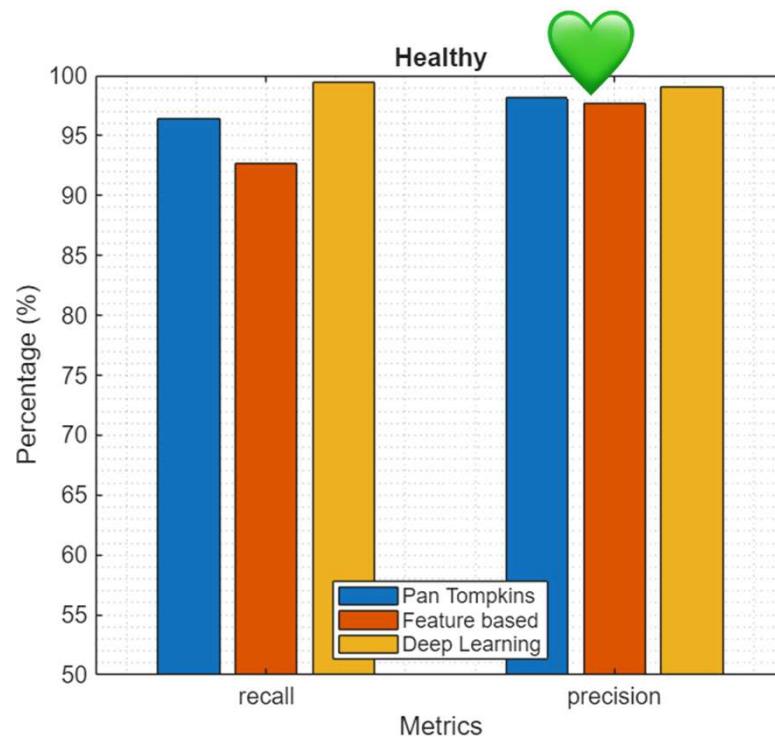
## Encoder – Decoder Architecture

- Feature encoder by convolution
- Feature decoder by deconvolution restores temporal structure → smooth and spatially coherent features
- Features that do not contribute to correct target signal tend to be washed out → **acts like non-linear denoising**

## Attention Layers as core improvement!

- Lets the model look at multiple time steps simultaneously
- **“which time points matter most?”**
- No recurrence → faster!

# Final Approach – Deep Learning



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# Conclusions



## Rule based signal processing methods reach their limits

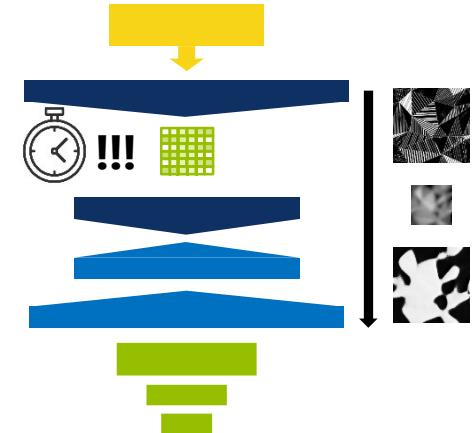
- Pan Tomkins algorithm works well for healthy signals
- But performance decreases significantly for complex pathological signals

## Feature-based Machine Learning improves for unhealthy

- Well engineered features reduce false positives in pathological signals
- But reduced accuracy for healthy signals

## Deep Learning enables reliable heart beat annotation

- 1 D CNN encoder-decoder architecture with attention increased prediction accuracy
- Best performance for healthy and pathological heart beat annotations
- Robustness through learned temporal context
- Same architecture might be applicable to other quasi-periodic signals



# Sources



## **MATLAB Tool Boxes:**

- Signal Processing Toolbox
- Statistics and Machine Learning Toolbox
- Deep Learning Toolbox

## **Data used for Training:**

- 29 healthy people: IEEE Sensors Journal 2019, 19, 1 (DOI: [10.1109/JSEN.2018.2874706](https://doi.org/10.1109/JSEN.2018.2874706))
- 100 unhealthy people: Front. Physiol. 2021, 12 (DOI: [10.3389/fphys.2021.750221](https://doi.org/10.3389/fphys.2021.750221))
- Deep Learning architecture inspiration: Computation in Cardiology Conference 2024 – Hands on Tutorials: Deep Learning for Biomedical Signal Processing: ECG Reconstruction

## **Further Reading:**

- "A review of Deep Learning for Biomedical Signals: Current Applications, Advancements, Future Prospects, Interpretation, and Challenges"; Computers, Materials & Continua 2025, 83 (3), 3753 (DOI: [10.32604/cmc.2025.063643](https://doi.org/10.32604/cmc.2025.063643))



Get in [touch](#) if you have any questions or would like to work with us on deep learning solutions!

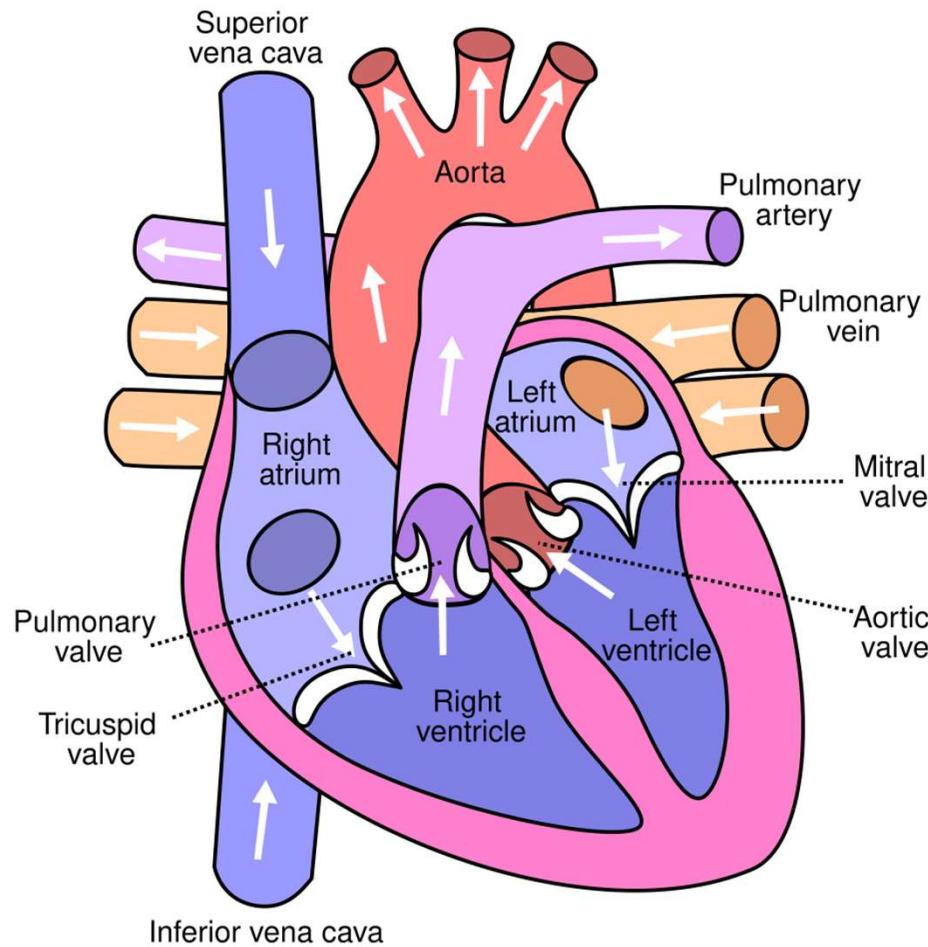


**Thank you for your Attention!**

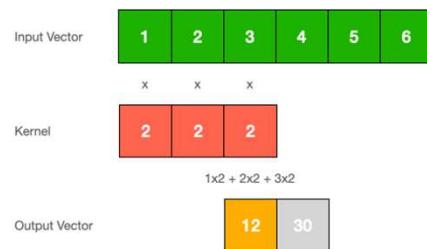
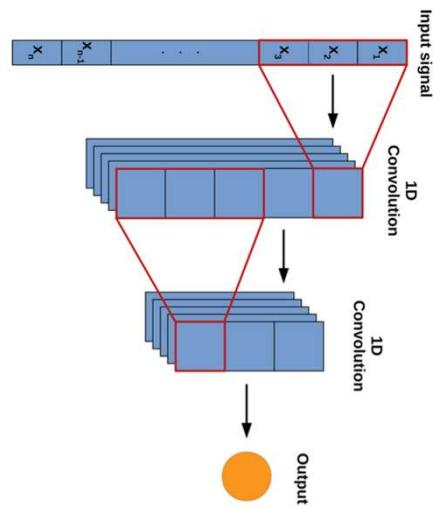


## Supplementing Informations

# Illustration of the human heart



# Descriptive Examples for convolution



**Stride**  
nn.Conv1d(in\_channels=1, out\_channels=1,  
kernel\_size=3, stride=3,  
bias=False  
)

## Size

$$L_{\text{out}} = \left\lfloor \frac{L_{\text{in}} + 2 \times \text{padding} - \text{dilation} \times (\text{kernel\_size} - 1) - 1}{\text{stride}} + 1 \right\rfloor$$
$$2 = \frac{6 + (2 * 0) - 1 * (3 - 1) - 1}{3} + 1$$

jinglescode.github.io

# Descriptive example of Self Attention

