



# **Accelerometry-Guided Inter-Beat-Interval Assessment from Wrist Photoplethysmography**

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**If atrial fibrillation  
was adequately  
treated in England:**

**2,000**

**Lives saved  
p.a.**

**7,000**

**Strokes  
prevented**

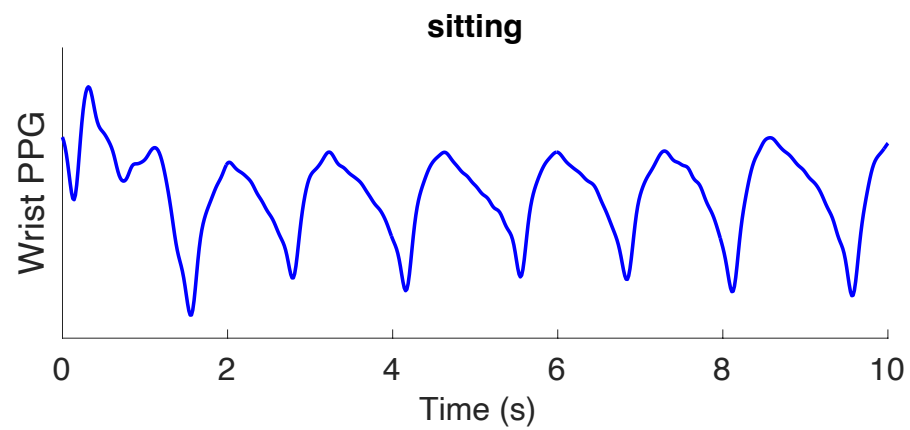
**425k**

**Additional  
diagnoses**

Stroke Association, "[State of the Nation](#)," 2017.

Public Health England, "[Atrial fibrillation prevalence estimates in England ...](#)", 2015.



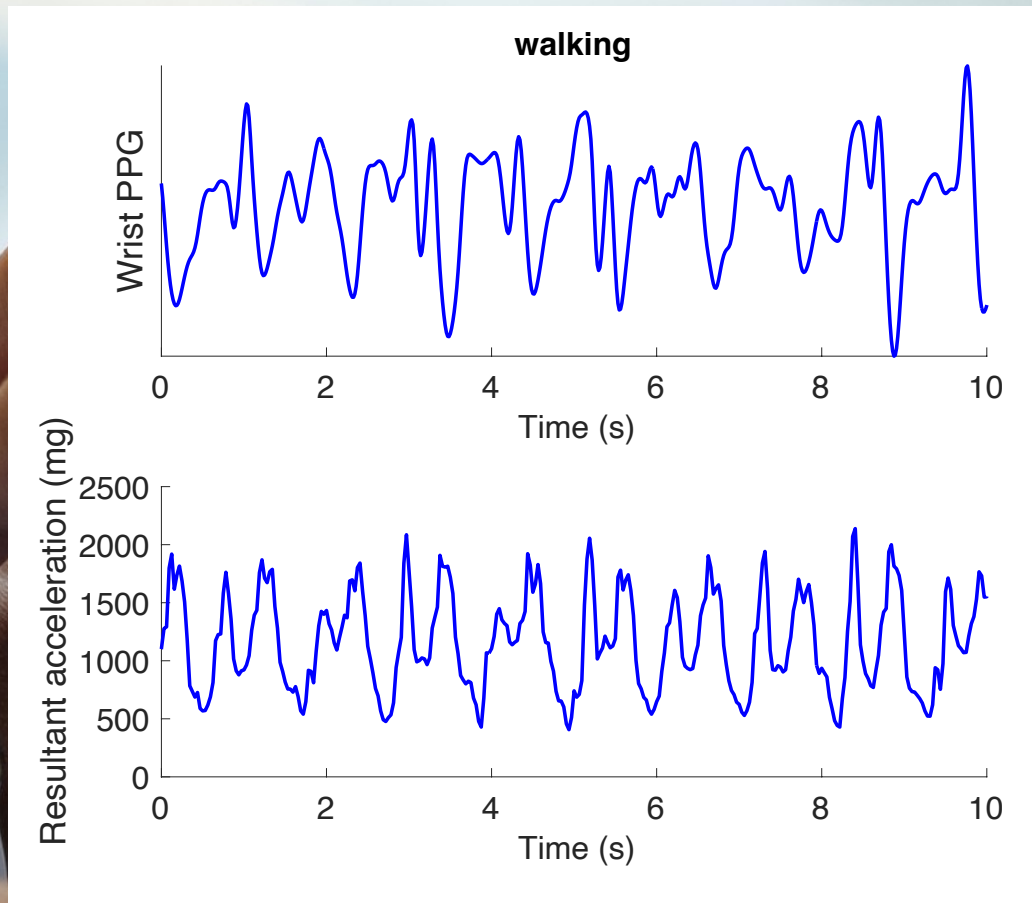
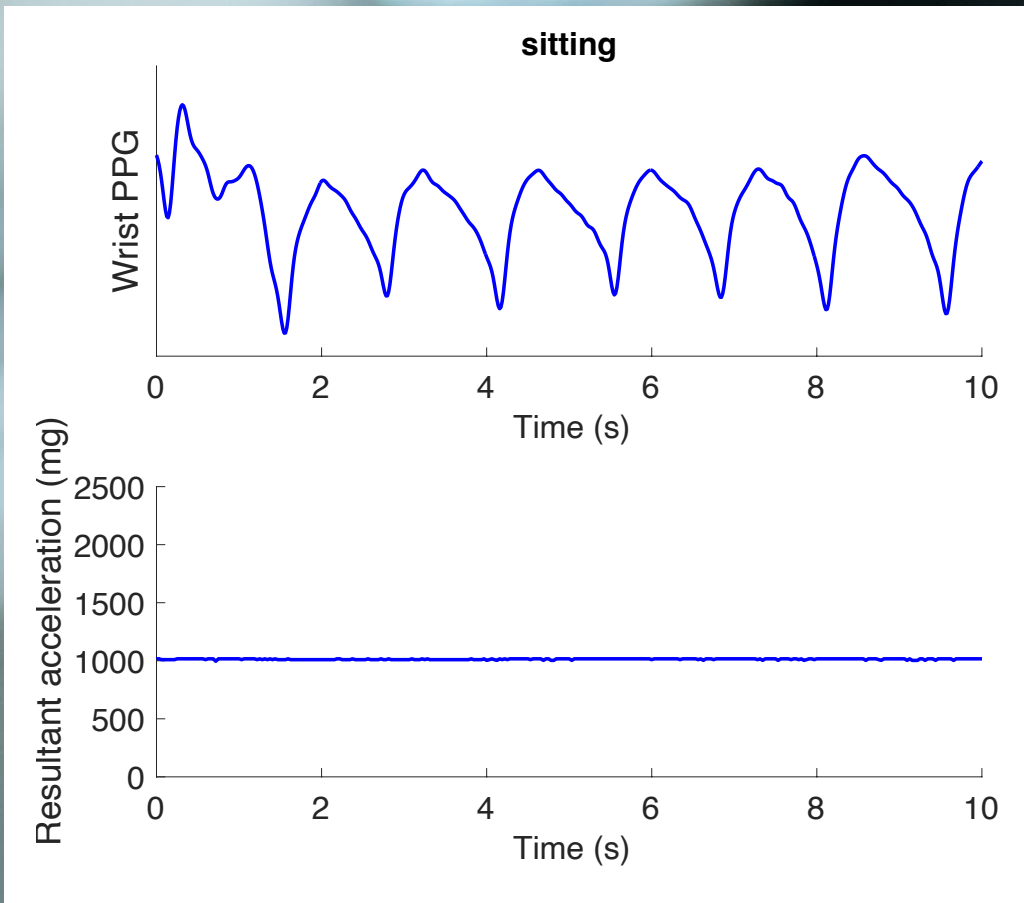












**Aim:**

To investigate whether accelerometry signals could be used to predict whether or not IBIs could be accurately measured from simultaneous PPG signals at the wrist.

**Objectives:**

1. Assess the classification performance of such an approach
2. Identify an optimal classification threshold
3. Assess performance across different activities

# Methods



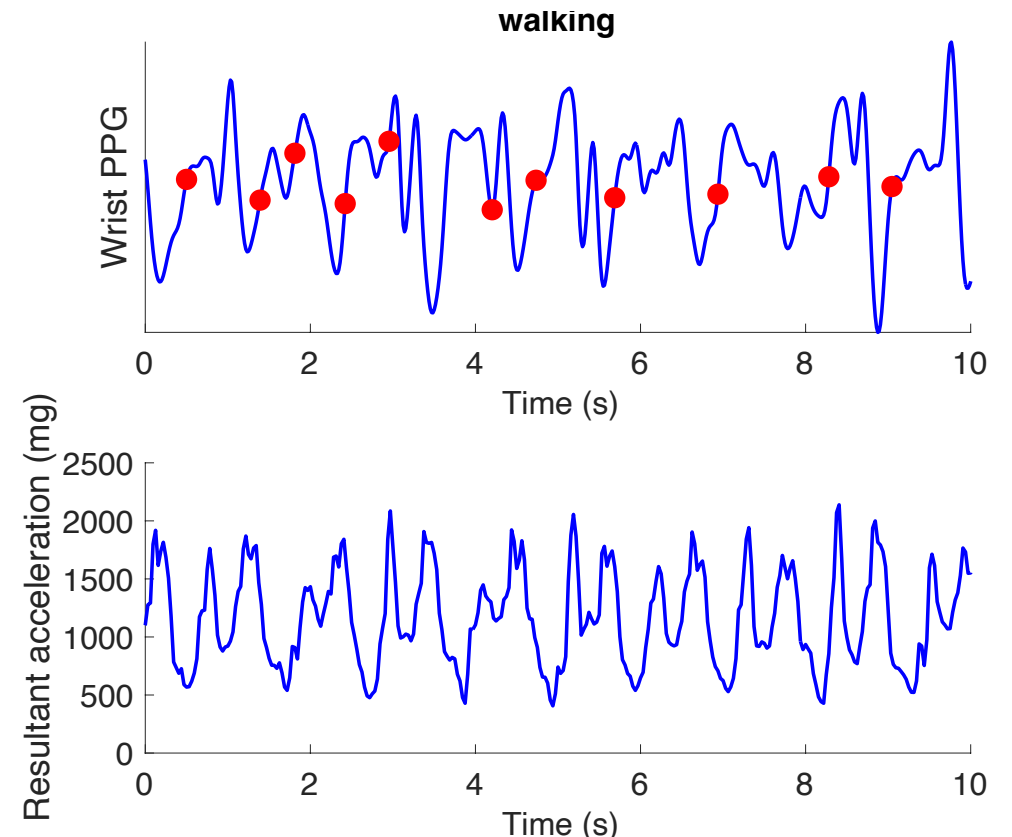
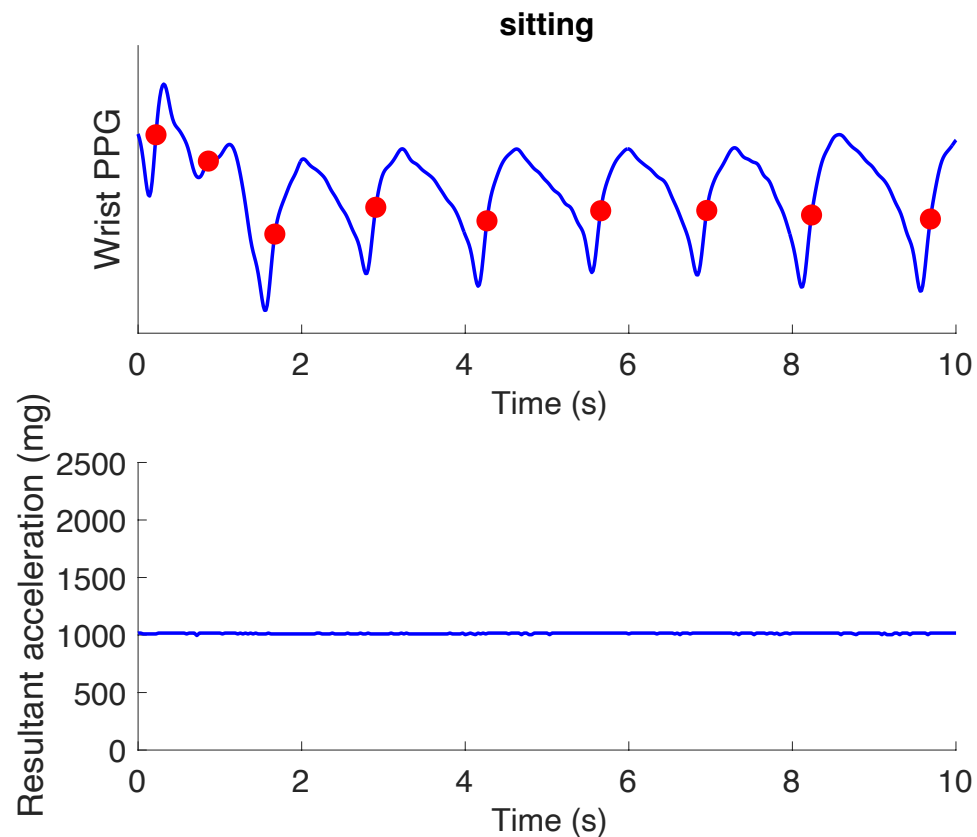
# Datasets

- Wrist PPG (from Empatica E4)
- Reference chest ECG

Dataset	Phases	No. Subjects
WESAD	<i>Stress protocol:</i> Baseline, Meditation, Amusement, Stress	15
PPG-DaLiA	<i>Activities of daily living:</i> Sitting, Working, Lunch break, Car driving, Cycling, Table soccer, Walking, Stair climbing	15

# Inter-beat interval estimation from PPG

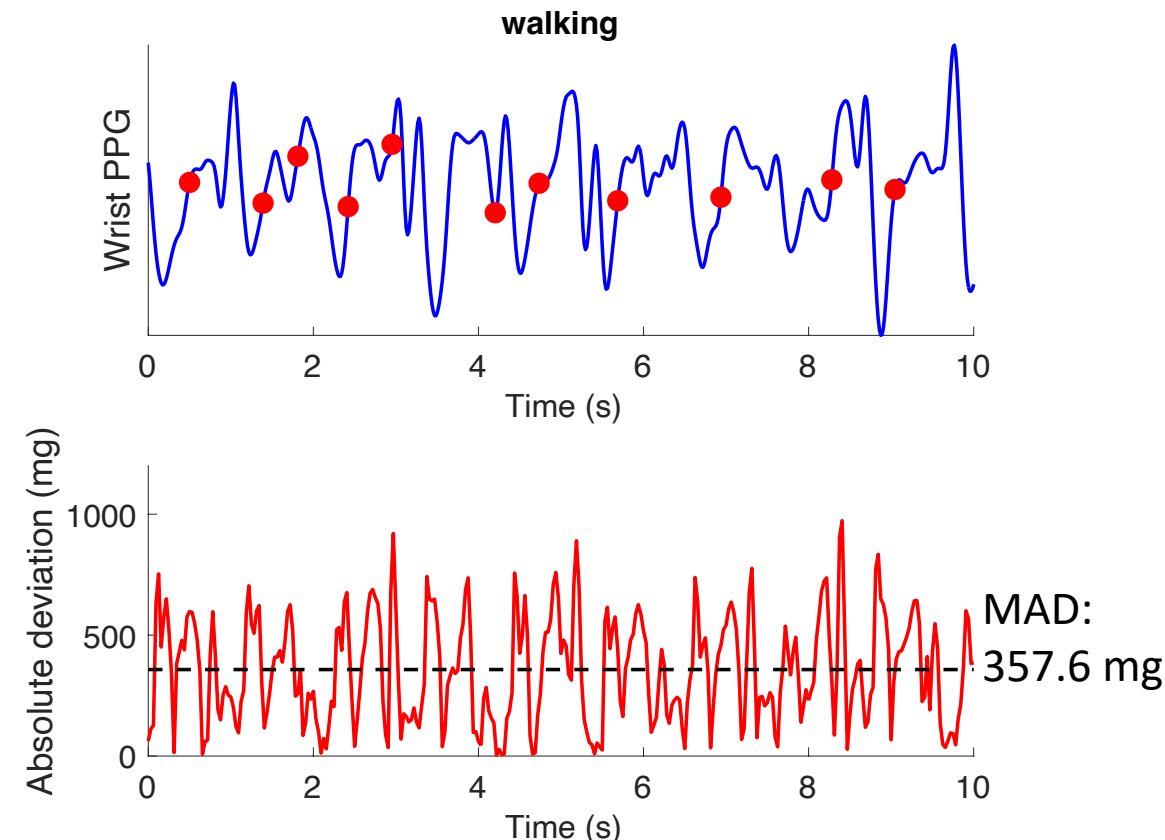
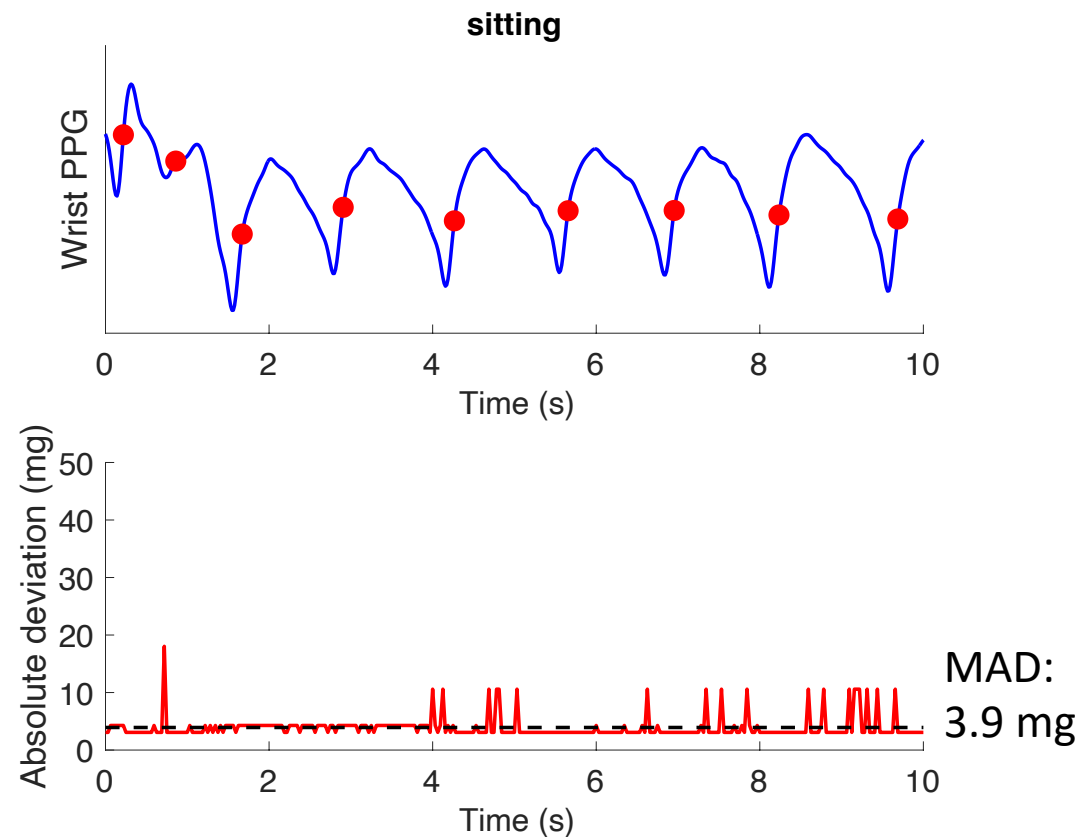
- Open-source 'MSPTD' beat detector from ppg-beats: <https://ppg-beats.readthedocs.io/>
- Middle-amplitude points





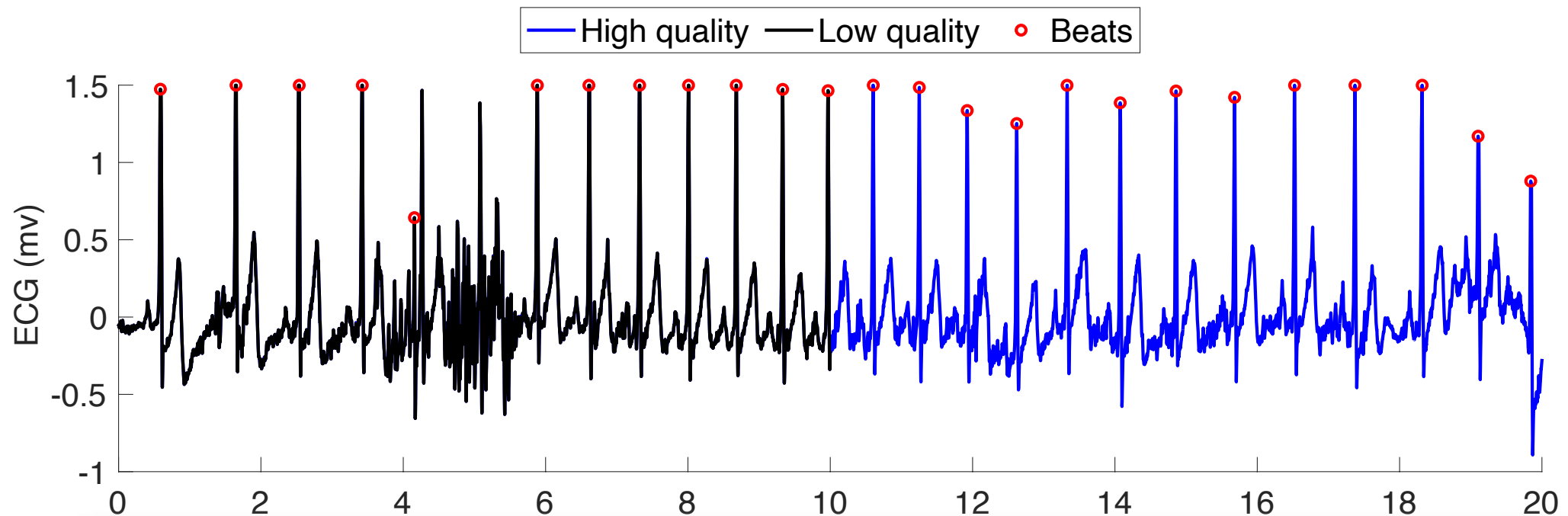
# Assessing level of movement

- Mean absolute deviation (MAD)



# Inter-beat interval estimation from ECG

- Two beat detection algorithms
- For each 20 s period: deemed to be high quality if beat detectors agree

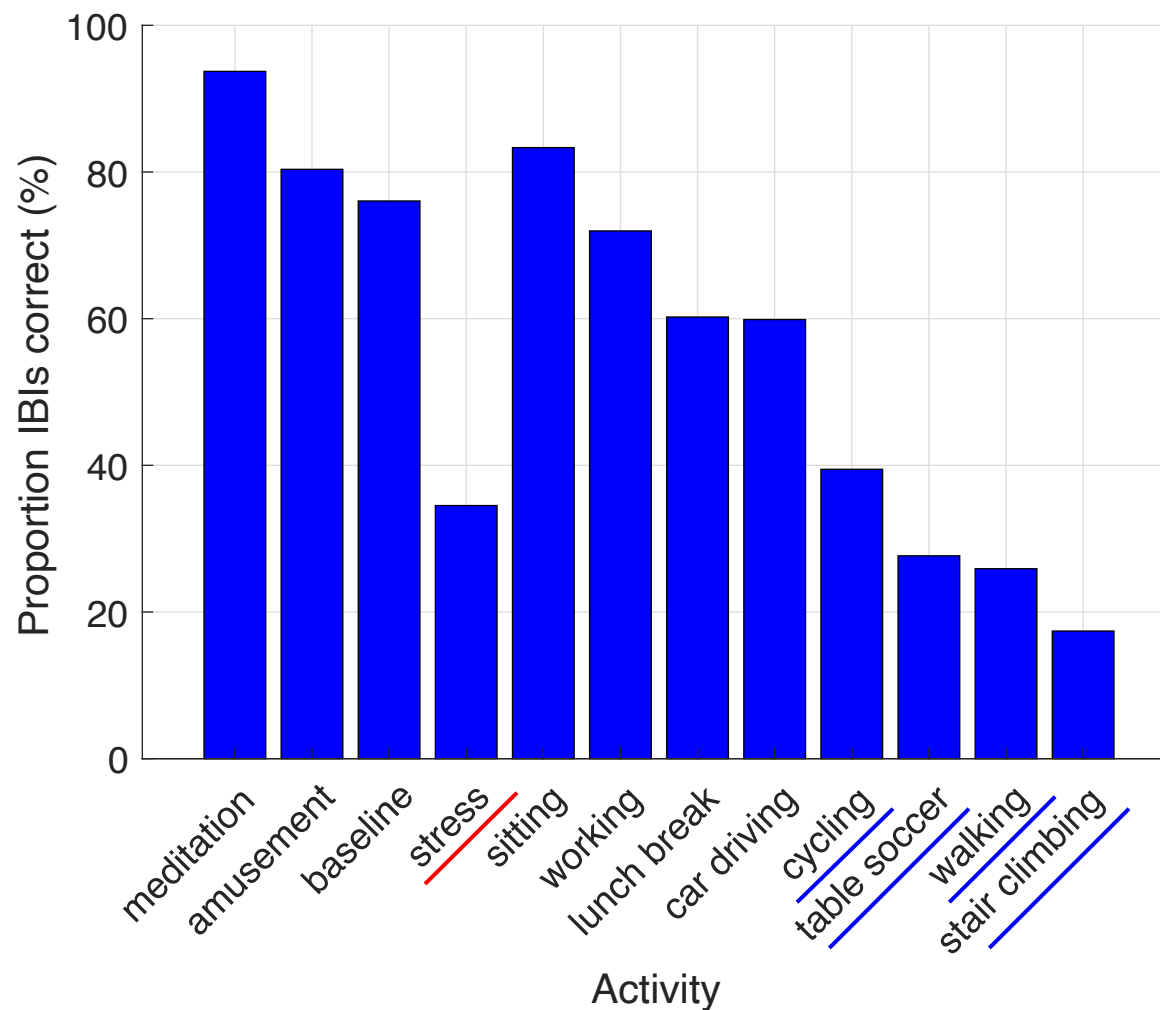


Charlton P.H. *et al.*, **Detecting beats in the photoplethysmogram: benchmarking open-source algorithms**, *Phys Meas*, 2022: <https://doi.org/10.1088/1361-6579/ac826d>



# Results

# Dataset Characteristics

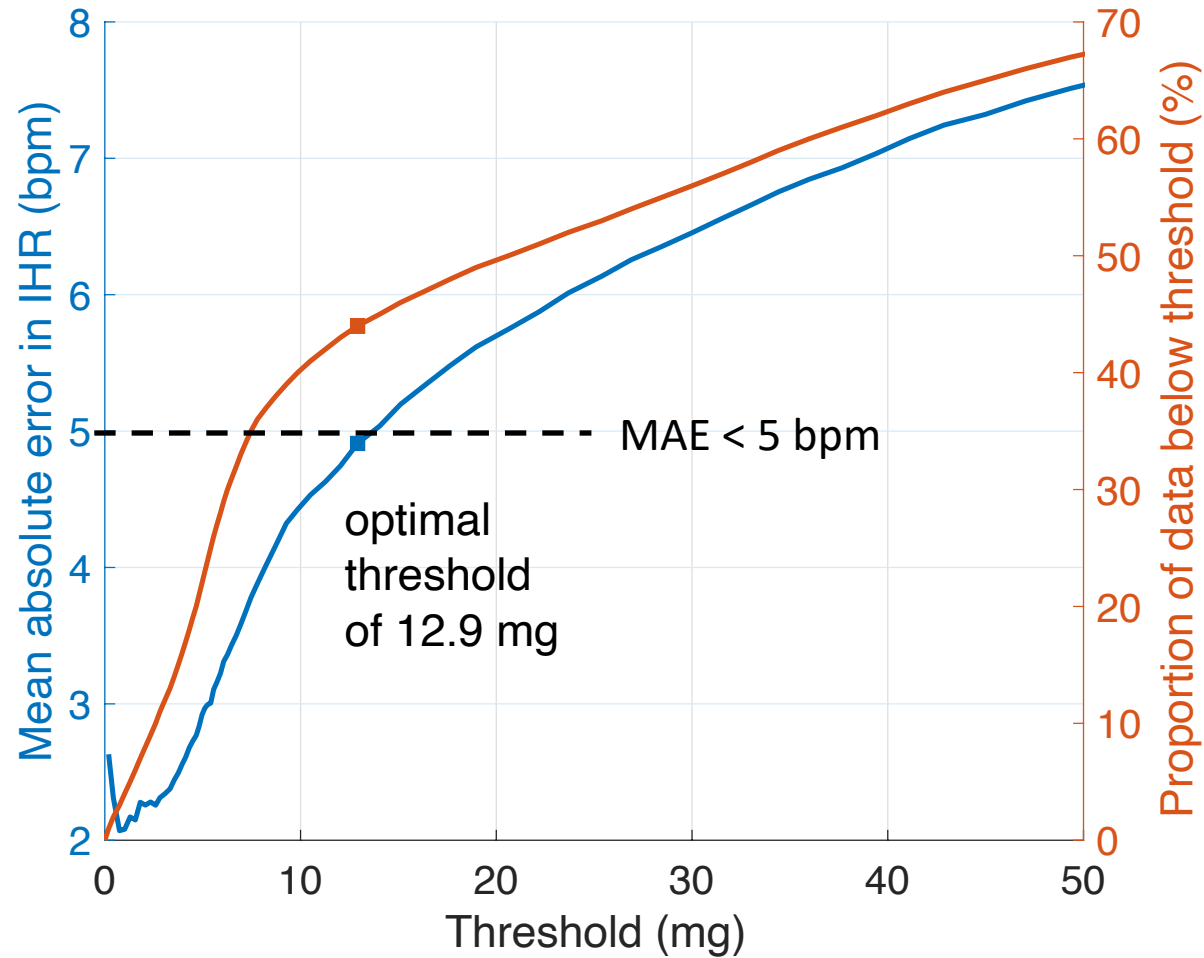




# Classification Performance

Dataset	Area under receiver operatory curve (AUROC)	Area under precision- recall curve (AUPRC)
Combined dataset	0.78	0.82

# Identifying an Optimal Threshold



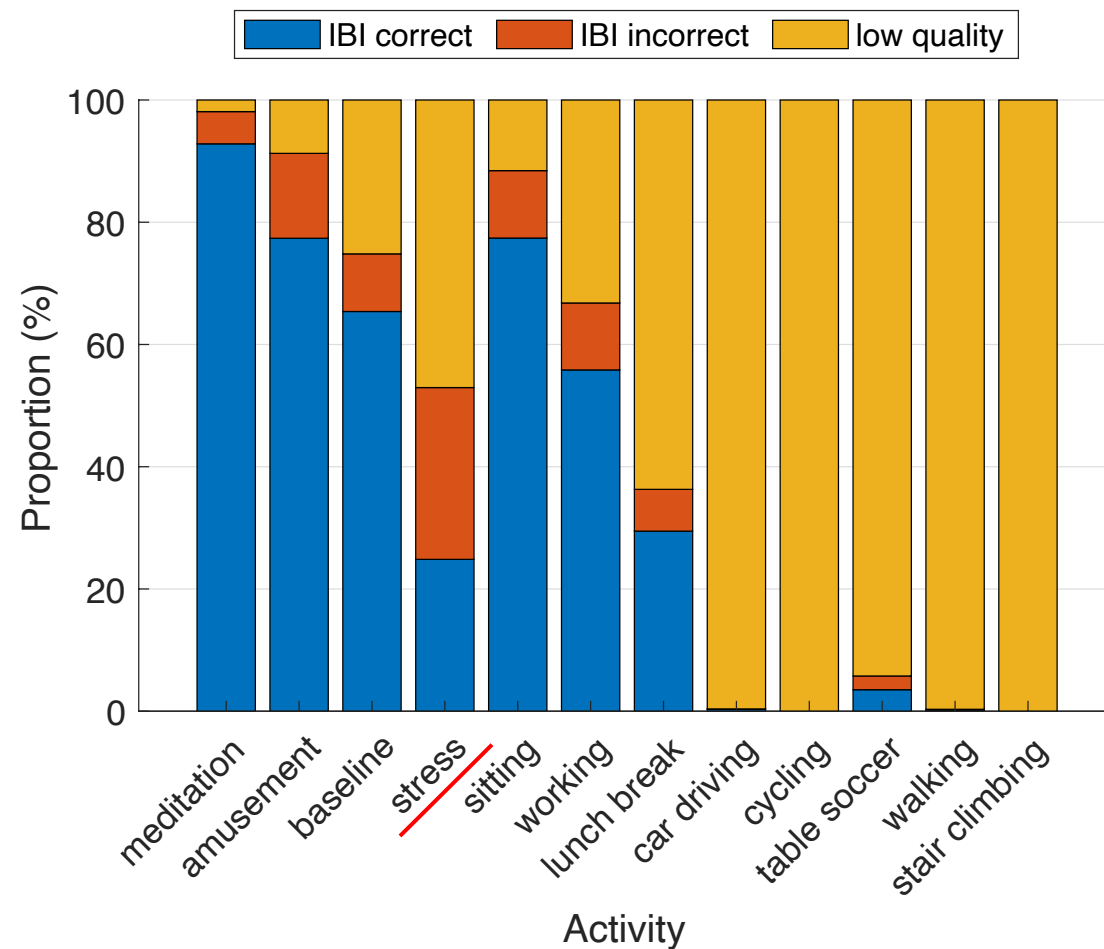
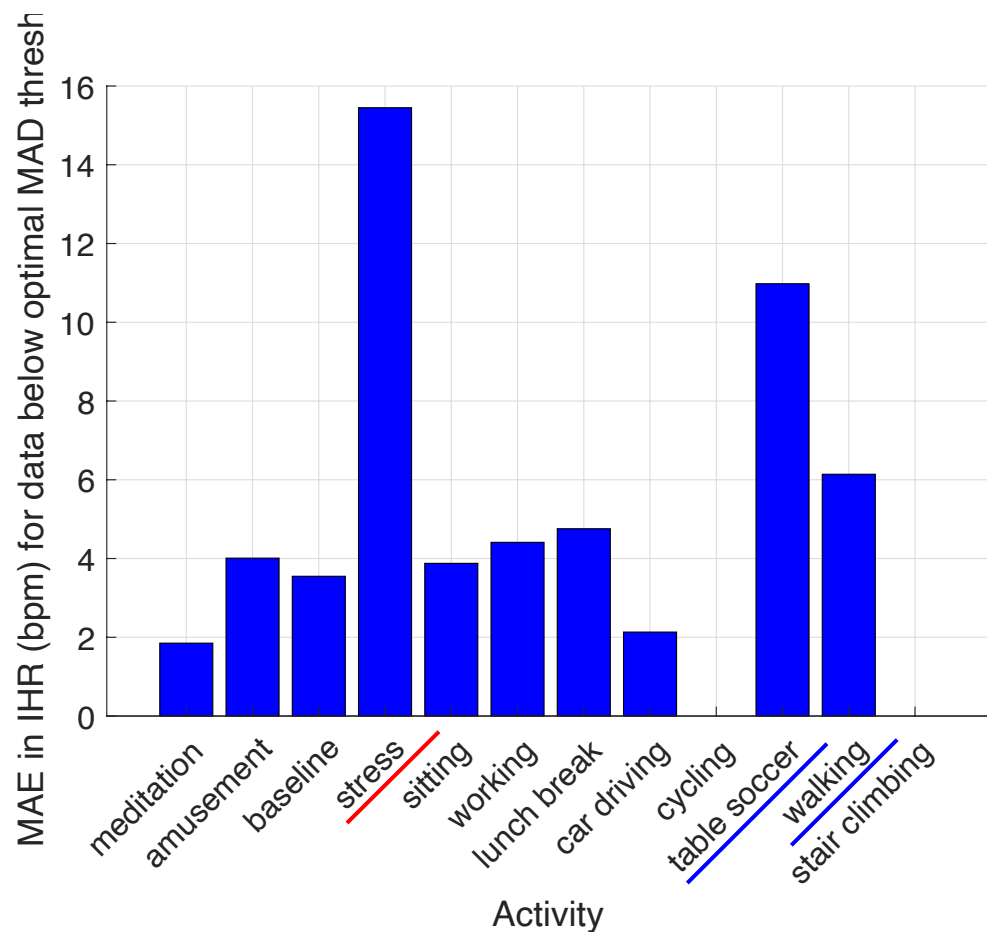
# Identifying an Optimal Threshold

Activity	MAD, measured using ActiGraph at wrist (mg) Mean (standard error)	Threshold: 12.9 mg
Sedentary behaviours: lying, sitting	6.7 (0.5)	
Standing still	7.5 (1.1)	
Washing pots	100.2 (8.3)	
Walking	151.5 (6.2)	

AF Detection Study	Approach
Apple Heart Study	"while participants were at rest"
FitBit Heart Study	"participants were stationary (as determined by device accelerometers)"



# Performance for Different Activities

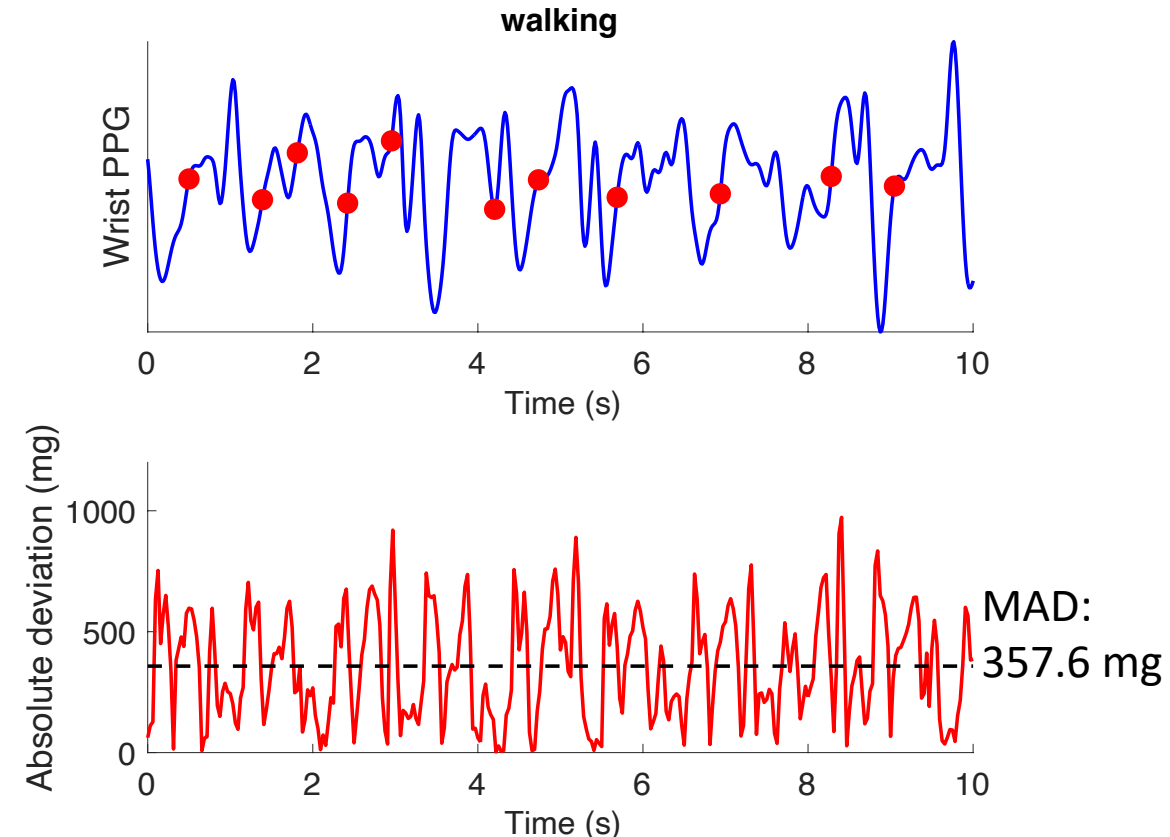
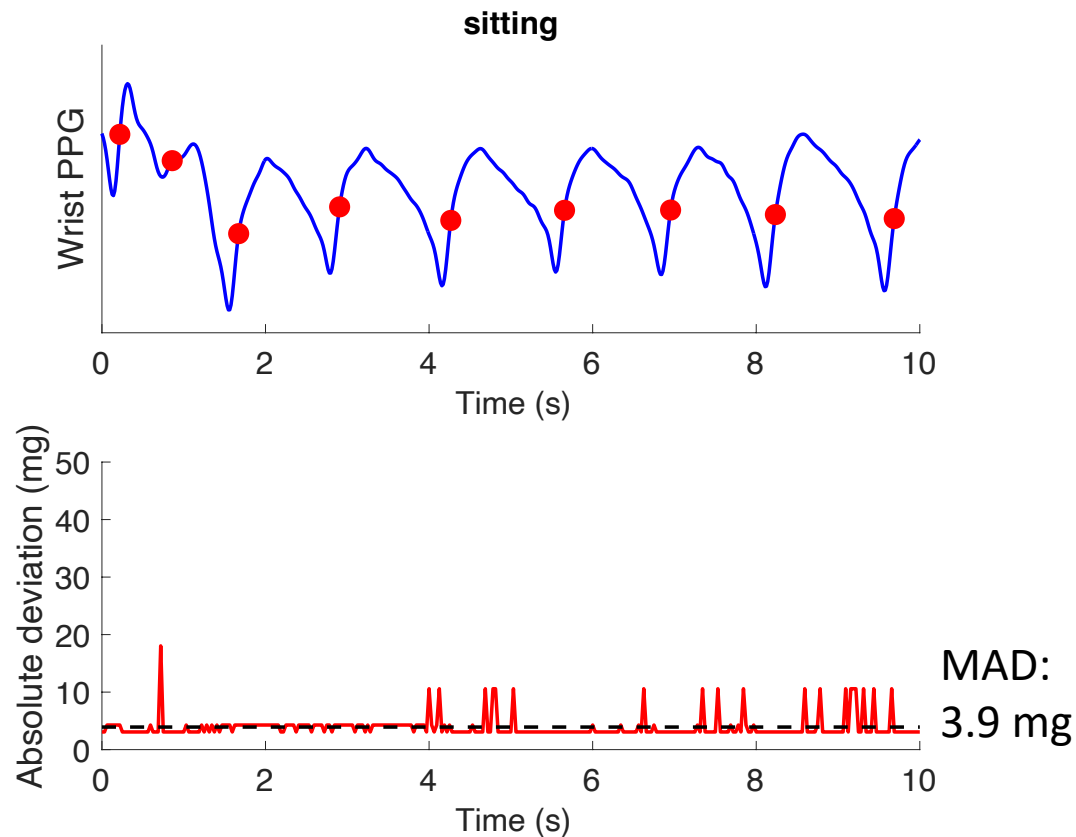


*Accelerometry-based approach performed well during physical activities, but not during mental stress.*

# Discussion

# Why does it work (or not work)?

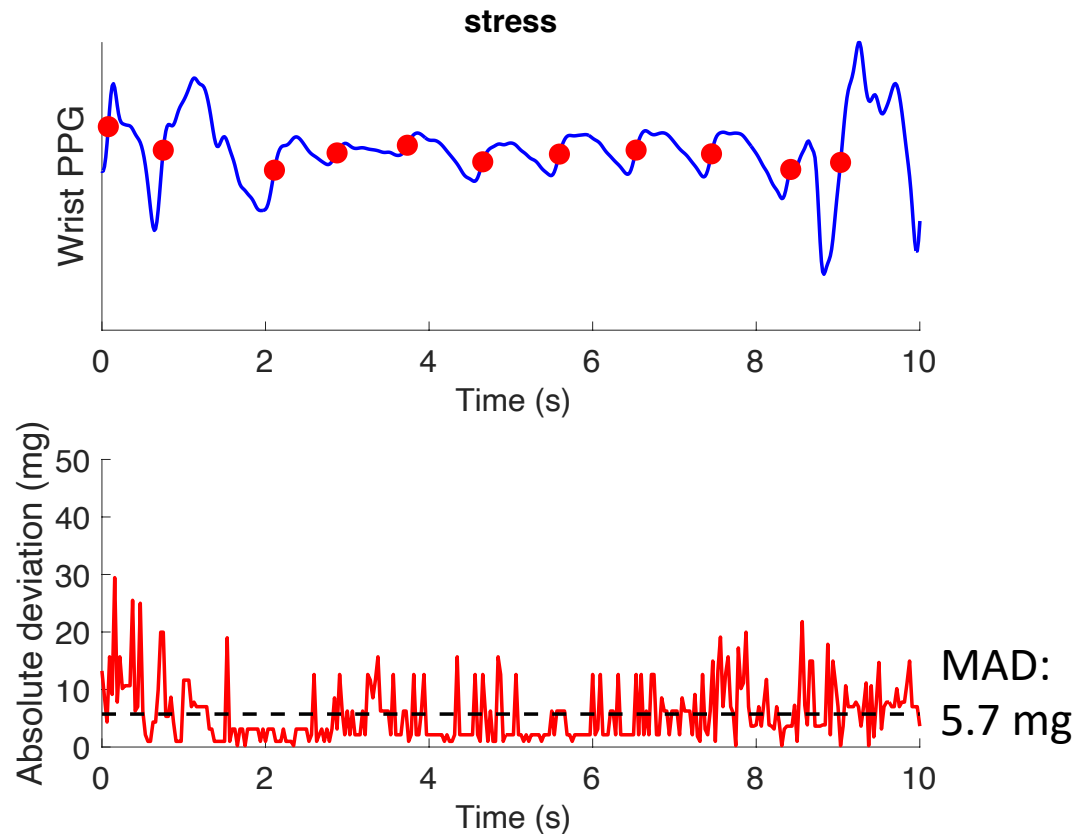
It works when noise is due to movement:





# Why does it work (or not work)?

It does not work when noise is not associated with movement:



“Signal quality index (SQI) is generally used to evaluate signal quality, such as signal-to-noise ratio”

Park J *et al.*, Photoplethysmogram Analysis and Applications: An Integrative Review, 2022

“participants were stationary  
(as determined by device accelerometers)”

Lubitz S *et al.*, Detection of atrial fibrillation in a large population using wearable devices: The Fitbit Heart Study, 2022

With thanks to...

Panicos Kyriacou

Jonathan Mant

Joachim Behar

Marton Aron Goda

University of Cambridge

Technion-IIT

British Heart Foundation



Accelerometry can be used to identify periods when IBIs can be accurately measured from PPG signals during physical activities with reasonable performance.

A threshold of 12.9 milli-gravitational units corresponds to a cutoff between sedentary and low-intensity activities.

Combining accelerometry and PPG-based assessments may provide improved performance compared to using either approach on its own.



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Slides available at: <https://doi.org/10.5281/zenodo.8403222>



