



Patient Discrimination from In-Bottle Sensors Data

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Few facts

Human lifespans is continuously increasing

- People aged ≥ 60 years will grow by 250% in 2050
- Assistive Health Technology (AHT) increases
- One strategy: Correct medication

Existing work

- Proximity sensing-based systems
- Vision-based systems
- Ingestible biosensors
- Wearable Sensors
- Smart pill bottles/containers

Ref: *Aldeer, Javanmard & Martin; Applied Sys Inovation, vol.2, 2018* "A Review of Medication Adherence Monitoring Technologies"







Motivation-Smart Pill Bottles

Smart pill bottles can be the best among other solutions

- Unobstritive,
- Battery-powered,
- Can be equipped with sensors to collect data about user behavior









Application

Medication Adherence Monitoring,

- Medication non-adherence is a complex problem
- Smart pill bottles can be used for monitoring medication adherence (when the medication was taken and by whom)

Drug Abuse Monitoring,

- ER visits of children (≤5) in the US is the highest due to drug poisoning*,
- A result from unsupervised medication overdoses
- Medicine cabinets available at homes are the main sources of medication abuse
- A real-time monitoring system is required





How to differentiate users from a pill bottle?

Different subjects interact with the pill bottle differently







IRB number Pro2018001757





PatientSense architecture







WINLAB

PatientSense





RUTGERS Bag of words construction, Building distance matrix



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Why DTW for distance measurement?



> DTW allows for some elasticity,

> Computes the differences between the points that are better aligned

Ref: Keogh & Ratanamahatana; Knowledge and Information Systems (2005) 7 "Exact indexing of dynamic time warping"





Clustering the DTW (pair wise) distances







Feature construction







Classification approach

Two class approach

Discriminate the patient from any other person

- Legitimate patient or everybody else
- Binary SVM: simple, lightweight in computations

Multi-class approach =

- Multi-class SVM
- Random Forest

Identify a specific person in a set





Classification approach

Evaluation criteria

- Number of users
- Training size
- Classification algorithm
- Number of sensors





Evaluation

Participants

- 16 healthy adults
- 14 males; 2 females
- Ages: 18 64, mean 34.93, SD 11.44
- Each participants took 10 candy pills

Other settings:

- Low sampling rate: 10Hz
- Camera is used for ground truth







Number of users effect

 Accuracy over 90%, for different number of users

• For 16 users, accuracy = 94%







Number of users effect

Training data size: 50%, 60%, 70%, 80%, 90%

 Accuracy over 93%, for different training size







Other learners (Multi-class classification)

- Multi-class SVM & Random Forest
- Random Forest gave better performance
- When focusing on a subset (3 people)*:

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Random Forest accuracy: 91%SVM: 87%
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(a) Multi-class SVM



* Ref: U.S. Census Bureau. 2019. U.S. Census Bureau QuickFacts: UNITED STATES.





Performance with individual sensor



- Two-class SVM accuracy: higher than 93% (1 out of 16 users)
- Random Forest & multiclass SVM: accuracies decline
- Random Forest accuracy: 82% (3 people)
- SVM: 75% (3 people)





Conclusion

PatientSense is a patient identification system from a pill bottle

uses acceleration traces

PatientSense is

- Accurate
- Performs well with one vs. all situation
- Off-body





Thank you

Questions !

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Fig. 3. A) Two sequences Q and C that are similar but out of phase. B) To align the sequences, we construct a warping matrix and search for the optimal warping path, shown with solid squares. C) The resulting alignment