# Detecting Changes in the Human Brain caused by Atrial Fibrillation using Ultrasound and Deep Learning

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#### Introduction

#### Atrial Fibrillation (AF)

- Causing vascular damage
- Leading to strokes
- Damages can be assessed using MRI



Is ACG able to detect the cerebrovascular changes caused by AF?



#### Acoustocerebrography (ACG)

- brain tissue
- Able to detect stroke risk factors [1] and hypertension [2]

#### **Methods**

**Ultrasound Measurements** 

- Multispectral ultrasound signal propagating through the human skull
- Ultrasound gel was used for coupling
- Transmitting probe was also used as receiving probe (signal was reflected at the human skull and then sampled)
- One measurement session takes about 3 minutes, with 10 measurements per second
- Measurements were done with ACG device UltraEASY (Sonovum AG)

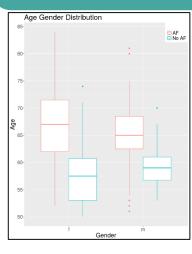
### Participants

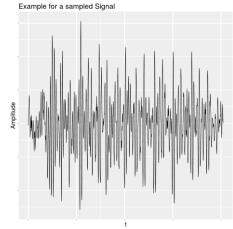
Participants are from two separate studies, both were recorded in MTZ Warsaw in 2014, approved by the ethics committee of the university of Warsaw.

- AF-focused study:
- 102 patients

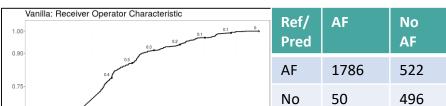
Cross-sectional study:

- involving 294 probands in total
- 58 were in the same age range and had no pre-existing conditions regarding vascular or heart diseases and therefore only these were included





### Results



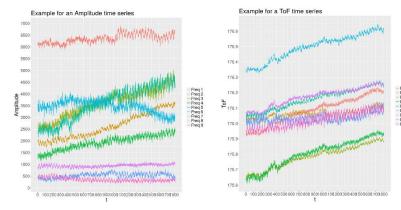
Artificial Neural Networks and Evaluation Procedure

- Already very successful in tasks like image [3] and voice recognition [4]
- Both a vanilla deep neural network (using only fully connected layers) and a deep convolutional network (using fully connected and convolutional layers) are implemented
- ReLU6 and cReLU are used as activation functions
- Training with ADAM optimizer and backpropagation
- Built upon the tensorflow [5] framework in Python 3
- Evaluation with a 4-fold cross-validation

## Data Processing

#### Signal Processing

- Extracting phase and amplitude from raw signal
- Calculating time of flight and attenuation, data are split into 10 second intervals
- Normalization of all variables
- **Artificial Neural Networks**
- Training, then evaluating with a holdout dataset Postprocessing
- Plots were done in R using ggplot2



| CNN: Receiver Operator Characteristic | Ref/<br>Pred | AF   | No<br>AF |
|---------------------------------------|--------------|------|----------|
|                                       | AF           | 1795 | 296      |
| 0.75                                  | No           | 41   | 722      |

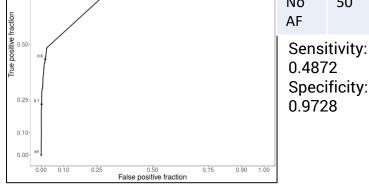
AF

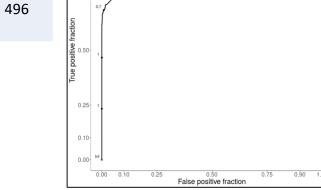
Sensitivity:

Specificity:

0.7092

0.9777





## Conclusions

- Although not perfect, a separation between participants with AF and without AF seems possible using ultrasound data
- Further data and other ANN (f.e. RNN, ResNet) could improve the result
- CNN outperforms the vanilla network

## Conflict of Interest

The author has a financial interest in the company manufacturing the software used for the device

#### Sources

[1] Wrobel et al. On ultrasound classification of stroke risk factors from randomly chosen respondents using non-invasive multispectral ultrasonic measurements and adaptive profiles. Biocybernetics and Biomedical Engineering 2015, Vol. 35(4), pp. 19-28. [2] Olszewski et al. The novel non-invasive ultrasound device for detecting an early change in the brain in patients with heart failure. European Journal of Heart Failure 2016, Vol. 18 (Suppl. 1), pp. 307-308. [3] He K. et al. Deep Residual Learning for Image Recognition. http://arxiv.org/abs/1512.03385 2015.

[4] Sak et al. Fast and Accurate Recurrent Neural Network Acoustic Models for Speed Recognition. http://arxiv.org/abs/1507.06947 2015. [5] Abadi et al. TensorFlow: Large-Scale Machine Learning on Heterogeneous Systems. Whitepaper (2015) and Software available at http://tensorflow.org/ (March 30th 2017).