





The MARCHESE project (Machine learning based Human Recognition System and Health Monitoring)

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KT Forum on Medical Applications (October 3, 2023)



Contents

- MARCHESE project
 - Background and project origins
 - Description of the Project
 - CERN technology / Know-How
 - Deliverables, Schedule and Key Milestones
- Field of Application
- Medical Application
- Clinical Partners
- Outlook











Robotic Service at CERN



Telemax robot



Teodor robot



Drone for teleoperation support



Train Inspection Monorail (CERN made)



EXTRM robot (CERN controls)



Mechatronics conceptions, designs, proof of concepts, prototyping, series productions, <u>operations</u>, maintenance, tools and procedures More info: <u>https://indico.cern.ch/event/1055745/</u>





CERNBot in different configurations (CERN made)



M. Di Castro, The MARCHESE Project, KT Forum on Medical Applications, CERN, 03.10.2023

Robotics technologies are mainly used for:

Robotic Service at CERN

- Remote environmental >measurements, maintenance and inspection in radioactive areas
- Human intervention procedures \succ preparation
- Quality assurance \succ
- Post-mortem analysis/inspection \succ of radioactive devices
- Reconnaissance
- Search and rescue
- And others...

Di Castro, Mario, Manuel Ferre, and Alessandro Masi. "CERNTAURO: A modular architecture for robotic inspection and telemanipulation in harsh and semi-structured environments." IEEE Access 6 (2018): 37506-37522.















Response time of a rescue team of **CERN Fire Brigade** could take up to 22 minutes in the LHC tunnel. <u>Smoke propagation in</u> tunnels runs very fast





Early intervention robots

- With such large distances, early intervention systems are necessary for example in case of accident or fire
 - Human fire response (Fire Service) in accelerator facilities is judged fundamental but not enough due to response delay, personal risk assessment and reliability.
 - Robotic firefighting allows fire inspection, victim search and initial fire suppression.
 - Robotic firefighting could guide fire service giving environmental information
 - □ Augmented reality wearable systems
 - Human firefighting remains necessary for rescue operations and final extinguishing.









Robot as Partner to work alone in the tunnel

- The robot could monitor the health of the person at distance (breathing/heart rate and temperature) using Non-Contact Monitoring or wearable systems
- ✓ Using Machine Vision-Based Structural Health Monitoring
 - https://www.hindawi.com/journals/js/2016/7103039/
- ✓ Using microwave imaging and doppler effect
- ✓ Using wearable devices like watches





Biosensing and Telemedicine

Radar technology develops fast and finds applications in various fields.



ar Camera Ultrasonic Sensos Respiration Motion Simulator

Human localization and vital signal extraction Biosensing (detection of respiration / heartbeat) in using unmanned transport harsh environments





Sensor Fusion in Search and Rescue Applications



Sensor Fusion Techniques: Neural Networks

M. Di Castro, Real-time Monitoring Systems for Augmented Reality and Robotics in Particle Accelerators, PhD School Italo Gorini, September 10-14 2018, CERNhttps://indico.cern.ch/event/717796/



M. Di Castro, The MARCHESE Project, KT Forum on Medical Applications, CERN, 03.10.2023

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BEAM:

Trials with Contact Sensors

Brain-Robot Interface for robot arm control

- Online analysis of brain signal using EEG (Electroencephalography)
- Augmented reality glasses used for commands display
- Eyes focus point detected by CNN processing Steady State Visual Evoked Potentials which are synchronous responses produced in the visual cortex area when observing flickering stimuli



M. Di Castro, Real-time Monitoring Systems for Augmented Reality and Robotics in Particle Accelerators, PhD School Italo Gorini, September 10-14 2018, CERNhttps://indico.cern.ch/event/717796/



Hardware used for the brain monitoring





Trials with Contact Sensors







Wireless people recognition and vital monitoring

- Machine learning techniques enhance people detection and vital signals monitoring at distance
- People search and rescue is of primary interest in disaster scenarios
- People monitoring during rehabilitation



Vision system (2D Laser, radar, thermal and 2D-3D camera)



Online respiration monitoring

Ivanovs, Arturs, Agris Nikitenko, Mario Di Castro, Toms Torims, Alessandro Masi, and Manuel Ferre. "Multisensor low-cost system for real time human detection and remote respiration monitoring." In *2019 Third IEEE international conference on robotic computing (IRC)*, pp. 254-257. IEEE, 2019.



Online people recognition and tracking



- Robots for Search and Rescue
 - ✓ Feasibility tests for **FireBrigade-CERNbot** collaboration for search and rescue in disaster zones











M. Di Castro, The MARCHESE Project, KT Forum on Medical Applications, CERN, 03.10.2023







2D IMAGE

IR+RADAR (for respiration and heart beat monitoring

Video of CERNbot searching for victims in disaster zones with presence of heavy smoke, comparison of standard 2D image with IR+RADAR



M. Di Castro, The MARCHESE Project, KT Forum on Medical Applications, CERN, 03.10.2023







2D IMAGE

IR+RADAR (for respiration and heart beat monitoring

Video of CERNbot searching for victims in disaster zones with presence of heavy smoke, comparison of standard 2D image with IR+RADAR



M. Di Castro, The MARCHESE Project, KT Forum on Medical Applications, CERN, 03.10.2023

MARCHESE - Parameters and Monitoring

Heart Rate: beat per minute

Heart Rate Variability: specific changes in time

between successive heart

Respiration Rate: Breaths

respiratory act (inhalation +

Temperature level: fever or

Temperature distribution:

patient's psychophysiological

Body pose estimation: body

interesting to assess the

links and joints tracking

for minute (brpm), entire

(bpm)

beats

not

status

exhalation)

Cardiac

activity

Respiration

activity

Body

Temperatur

Body

tracking

BEAMS



 Optical technique used to detect volumetric changes in the blood in the peripheral circulation.

(PPG)

 Blood volume changes in microvascular tissue (i.e. at cheeks and forehead level)

MECHANICAL DISPLACEMENT

- Chest displacement for RR
- · Heart contractions for HR and HRV
- Carotid artery pulsation for HR and

THERMOGRAPHY

 Body Temperature distribution provides information about the human well-being





M. Di Castro, The MARCHESE Project, KT Forum on Medical Applications, CERN, 03.10.2023



1. PPG REMOTE HEART RATE







• The **SPECULAR REFLECTION** is a mirror-like light reflection from the skin surface (not contain any pulsatile information). Time dependent: body motion influence geometric structure between the light source, skin surface and camera.

 $v_s(t) = u_s \cdot (s_0 + s(t))$

- $u_s =$ unit color vector of the light spectrum
- s_0 = stationary part of specular reflection
- s(t) = varyng part of specular reflection (induced by motion)

$$v_d(t) = u_d \cdot d_0 + u_p \cdot p(t)$$

- u_d = unit color vector of the skin tissue
- d_0 = stationary reflection strength of diffuse reflection
- u_p = relative pulsatile strenghts in RGB channels
- p(t) = pulse signal



1. PPG REMOTE HEART RATE MONITORING

Reflection of each skin pixel in a recorded image sequence is defined as a time-varyng function in RGB v channels:

$$C_k(t) = I(t) \cdot [v_s(t) + v_d(t)] + v_n(t)$$

Vital parameters monitoring

SPECULAR REFLECTION

$$v_s(t) = u_s \cdot (s_0 + s(t))$$

- $u_s =$ unit color vector of the light spectrum
- s_0 = stationary part of specular reflection
- s(t) = varyng part of specular reflection (motion)

 $v_d(t) = u_d \cdot d_0 + u_p \cdot p(t)$ • u_d = unit color vector of the skin tissue

→ DIFFUSE REFLECTION

- $d_0^{"}$ = stationary reflection of diffuse reflection
- u_p = relative pulsatile strenghts in RGB channels
- p(t) = pulse signal



Substituting into the previous equation: $C_k(t) = I(t) \cdot \left[u_s \cdot (s_0 + s(t)) + u_d \cdot d_0 + u_p \cdot p(t) \right] + v_n(t)$

Neglecting the quantization noise $v_n(t)$ when the number of skin pixel is sufficiently large and combining the stationary parts in specular and diffuse reflections into $u_c \cdot c_0 = u_s \cdot s_0 + u_d \cdot d_0$

$$\begin{array}{ccc} \text{DICHROMATIC} & \rightarrow & \mathcal{C}_k(t) \sim I_0 \big(1 + i(t)\big) \cdot \begin{bmatrix} u_c \cdot c_0 + u_s \cdot s(t) + u_p \cdot p(t) \end{bmatrix} \\ & & \text{Constant} & \text{Specular} & \text{Pulse} \end{array}$$





1. PPG REMOTE HEART RATE MONITORING





0 25 49 28 89 0

0 18 91 18 0 0

3 28 25 49 28 89 123

5 28 68 92 88 23 68

35 77 18 91 18 43 12

38 19 64 **12** 87 13 84 49 28 76 92 48 123 5





- The proposed model has been trained by using 80% of the randomly shuffled dataset and has been tested on the remaining 20% using CelebA dataset, that contains 202599 face images, each annotated with 40 binary labels indicating facial attributes such as hair colour, gender and age.
- The face-mask process is successfully realized, regardless of colour skin tone, size and rotation.

Cittadini R., Buonocore L. R., Matheson E., Di Castro M., & Zollo L. "Robot-aided contactless monitoring of workers' cardiac activity in hazardous environment". *IEEE Access*, 2022.

• Skin pixel detection from background ones.





2. LASER RESPIRATION

- Laser sensor Class I: eye-safe under all operating conditions
- Detection of **chest/abdominal displacement** during respiration acts (inhalation and exhalation)
- To monitor **respiration rate** of patients in several hospital wards where patients spend most of the day lying down or sitting **without the need to apply electrodes and cables** on the human body.













3. BODY POSE ESTIMATION Body pose estimation and motion

20 22 18 16 14

- Body pose estimation and motion without using markers attached to human body
- Exploiting MEDIAPIPE framework and adapted to detect different kind of pose: lateral, supine, prone, seated.
- Counting repetition of movement and monitor patients/workers activities





21 ¹⁹ 13 15 17 SUPINE

PRONE

SEATED

4. BODY TEMPERATURE

Temperature level: fever or not

Temperature distribution: interesting to assess the patient's psychophysiological status



Temperature distribution along the human body provides information about the human well-being and the stress level





Advantages and Application Fields

- **No-invasive monitoring system**: more comfortable hospital stay by avoiding the use of numerous cables, tubes, and electrodes applied to the skin.
- Infection prevention for medical staff: monitoring patients at risk (COVID19) minimizing direct contact and reducing potential transmission of infections.
- Not require skin contact: burned people, newborns, elderly patients, palliative care.
- Cost-effective, time-saving and eco-sustainable: reusable device by different users, contact-based ones need to be personal or need frequent replacement staff of disposable electrodes by medical staff.
- **Telemedicine**: non-contact health monitoring at home.
- Search and rescue operation: finding people and monitoring health during emergency situations in hazardous environments with robots.







Medical Application



NEWBORN and PATIENTS WITH BURNS

- Fragile skin
- No abrasions and damage of epidermis
- Continuous and constant monitoring
- People with severe burn injuries





ASSISTIVE ROBOTIC REHABILITATION

- Patient's physiological assessment during rehabilitation in no-invasive way
- adjust the exercise level (increase or decrease) according to the patient's physiological response
- Exploit residual patient capabilities (assistance-as-need





HOSPITAL ROOM AUTOMATION

- Hospital room for remote monitoring
- Avoid medical staff infections
- Hospitalization more comfortable
 for patients (palliative cares)
- Group or single patient monitoring





Potential Risks





Medical personnel acceptance:

In the field of healthcare technology, the successful acceptance and integration of a new system in the hospital environment emerge as a crucial point In the last years, fruitful exchanges of views with doctors to gain a deeper understanding of the requirements faced hospital setting. **Preliminary** the in inspections have already been carried out in the **hospital departments** and it is planned to continue with a cyclic with medical collaboration the personnel.



Day-Night cycle in the hospital settings for patients'wellbeing: the system may have to operate in darkness or twilight to ensure an uninterrupted sleep cycle for patients. The photoplethysmography using RGB camera might face difficulties in



Low-light conditions could be mitigated by incorporating an **infrared camera** or measuring vital parameters with a **laser sensor**, which is already **used by BE-CEM-MRO section in case of absence of light and smoke** presence in **accelerators emergency scenario**. Several sensors with different operating principles to support the parameter calculation.



such circumstances, being based Carculation. M. Di Castro, *The MARCHESE Project*, KT Forum on Medical Applications, CERN, 03.10.2023 on skin color tone variation.



Clinical Partners

A collaboration agreement is under signature with CHU of Lille. Over the last year, there has been close cooperation with **Centre Hospitalier** Universitaire of Lille IN **CITU** (INnovations CIToyenne en

https://www.eurasante.com/news/news-du-parc/lexpertise-en-innovation-et-santenumerique-du-chu-de-lille-et-de-ses-partenaires-recompensee-au-niveau-national/

The contributions of these partners will be invaluable, leveraging their extensive field experience in Medical Device Regulation (MDR – EU n. 2017/745)

All the studies adhere to the CERN data priv regulations (Operational Circular - O.C. 11)





A collaboration is with the University Campus Bio-Medico of Rome, a hub renowned for its expertise in medical robotics, robotic rehabilitation, and human-machine interfaces. Α collaboration agreement (KN4437 UCBM) has been established.







Clinical Partners



Centre Hospitalier 13 Institut Cœur Poumon

A member of the BE-CEM group spent 1 week in close contact with the medical staff (27-31 March 2023).

The system has been already partially tested in the Hospital mock-up room at the CHU Lille with promising results.

The system has aroused interest for the pediatrics, geriatrics and palliative care departments







M. Di Castro, The MARCHESE Project, KT Forum on Medical Applications, CERN, 03.10.2023



Clinical Partners



Laser sensor













M. Di Castro, The MARCHESE Project, KT Forum on Medical Applications, CERN, 03.10.2023

Remote PPG: comparison with benchmark device

80

75

70

65

60

55

50

45

20

Absolute Error [bpm]

5

0

0

-AE

-MAE

[mqdd]

HR



time [s]



70

65

[mdq] 60

55

50

10

Absolute Error [bpm]

0

-AE

-MAE

0

HR

-POS algorithm

Shimmer3 ECG

20

20

40

40

time [s]

time [s]

60

60

80

80

(A)

time [s]

hazardous

activity

in

environment". IEEE Access, 2022.

BEAMS

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Laser Respiration Monitoring at the Hospital of Lille

Exchange of view with Medical Staff in the Hospit



Triangulation of more lasers to recognize respiration pattern











Clinical Partners

#actualité de la filière régionale

L'expertise en innovation et santé numérique du CHU de Lille et de ses partenaires récompensée au niveau national !

L'appel à projet « Tiers lieux d'expérimentation » est l'une des actions majeures de la stratégie nationale d'accélération « Santé numérique », dans le cadre du plan France 2030. Doté d'un budget de 63 millions d'euros sur 4 ans, cet appel à projets ministériel est destiné à répondre au manque de terrains d'expérimentation pour la filière numérique en santé. La première vague a labellisé 10 lauréats, sur 54 candidatures déposées, dont le projet IN CITU (INnovations CIToyennes en santé nUmérique) porté par le CHU de Lille, aux côtés de ses partenaires, dont Eurasanté et soutenu par de nombreux acteurs de l'écosystème d'innovation de la région Hauts-de-France. Le consortium IN CITU vient ainsi d'obtenir plus d'1,5 million d'euros.

2 PROJETS À TRÈS FORTE VALEUR SOCIÉTALE DÉJÀ IDENTIFIÉS Et accompagnés par in citu____

D'après les expériences déjà acquises, le tiers lieu IN CITU prévoit les deux premières années de mener a minima 3 projets d'expérimentation par an, puis 5 projets par an en routine. La sélection de ceux-ci répond à une méthodologie déjà bien définie, basée sur l'expertise de nos équipes, dont l'objectif est d'apporter des solutions concrètes aux défis auxquels fait face le système de santé français. Pour 2023/2024, 2 projets sont déjà identifiés et financés :

- MARCHESE, un dispositif innovant de surveillance physiologique sans contact, en partenariat avec le CERN. Une solution discrète, fiable et peu couteuse pouvant enregistrer en continu et en temps réel des constances vitales de patients à risque chez qui la pose de matériel sur le corps peut poser problème (ex : patients déments).
- PIXACARE, une plateforme informatique sécurisée pour renforcer le suivi des patients atteints de plaies chroniques sur leur lieu de vie via une télésurveillance ville/hôpital. L'objectif est de créer un réseau de soins constitué d'experts disponibles à distance pour assurer la continuité des soins en cas de complication.

Over the last year, there has been close cooperation with **Centre Hospitalier Universitaire of Lille – IN CITU** (INnovations CIToyenne en sante nUmerique): https://www.eurasante.com/news/news-du-

parc/lexpertise-en-innovation-et-sante-

numerique du chu de lille et de cos

numerique-du-chu-de-lille-et-de-ses-

partenaires-recompensee-au-niveau-

national/







MARCHESE: future system overview



BEAMS

- Physiological and non-physiological signals: comprehensive assessment of a patient's health state (recommended by medica personnel)
- Safety and Reliability: safe and consistent medical device performance and standards.
- Acceptance by medical and healthcare personnel: intuitive and easy-to-use graphical interface for medical personnel (userfriendly GUI)
- Lightweight, portable and modular system: make the system adaptable to multiple departments and contexts (eventually also
 M. Di Castro, *The MARCHESE Project*, KT Forum on Medical Applications, CERN, 03.10.2023
 30
- Integration in the hospital environment: hospital operations are not compromised, harmoniously integrating with the doctors and

MARCHESE: future system overview



- Use of a camera to capture images of patient meal trays after each meal.
- Employing a pre-trained machine learning model to classify the trays into categories (e.g., full, half, empty).
- The existing meal consumption process is manually carried out by nurses, frequently resulting in incomplete records due to time constraints, the volume of patients, and emergent situations.
- Meal intake monitoring is paramount in hospital wards, especially for elderly patients in the

- recovery process.



BEAMS

3.10.2023

and Madeliverable/Monthmentation: re	etinge a	alggrit	hmys f	°12 ^e	^{tt} 16	20	24	26	30	36
Conceptual design and constraints	x	x								
analysis										
Safety and Reliability		х								
Software Integration			х	X				X	X	
Modelling and Simulation					Х					
System training on real data						X				
AI and Machine Learning						V	V			
Implementation						X	X			
System prototype							Х	Х		
GUI for medical personnel								Х	X	
Validation Test in real environment									X	
Dissemination and publications									Х	Х

Future Deliverables, Schedule and Key

1. Conceptuardesign and constraints analysis: engineering/medical

assessment.

2. Safety and Reliability: safe and consistent medical device performance. 3. Software integration: integrate software for data processing and

communication.

4. Modelling and Simulation: create a model to analyze system behavior.

5. System training on real data: training machine learning model with realworld data.

7. System prototype: functional prototype of the device.

- 8. GUI for medical personnel: development user-friendly interface for docto
- 9. Validation Test in real environment: test the prototype in real-world scen
- 10. Dissemination and publications: share project with publications.

Organization and Main Roles

1 Fellow Candidate: lead the design and integration of medical requirements and strictly collaborate with healthcare professionals and stakeholders to ensure the system's acceptability/usability in clinical settings with the development of a user-friendly interface.

1 PhD Candidate: brings expertise in Al, ML, and technology development to the project, leading the development and implementation of algorithms and machine learning models for processing sensor data



Applications: Search and Rescue Robots





BEAMS

Applications: Telerobotics for remote

Maintenance REACE

- Human-centered **(HERD**e: make easier the execution of task and adapt the technology to the human (not vice versa)
- High stress operator: monitoring of health parameter during robotic intervention
- Send alerts or warnings in case of teleoperator's high level of stress









OPERATOR STATE

Applications: Telerobotics for remote





BEAMS

CERN Telerobotics: Operator Monitoring



Sessive (HR), Respiration Rate (RR) and ElectroDermal Activity (EDA) of teleoperators are monitored during robotic intervention

- High-stress events in robot teleoperation tend to coincide with EDA (Electrodermal Activity) events
- Send alerts or warnings in case of teleoperator's high level of stress





Conclusions



- CERN developed technologies to enhance worker safety and monitor vital parameters such as heart rate, respiration rate, temperature and body tracking in challenging environments
- To be effective in a hospital environment, the system needs customization to align with medical constraints and needs.
- The project aims to create a system for **continuous**, **real-time** monitoring of both physiological and non-physiological parameters. It provides a holistic assessment of a patient's health state 24/7 and sends alerts to medical personnel if abnormalities are detected.
- **Non-invasive and Versatile**: The system operates noninvasively using various sensors like cameras, radar, and laser, eliminating the need for physical contact with patients. It can be positioned at different distances from patients, catering to various age groups.
- The project has engaged in collaborations with medical professionals and institutions, including the University Hospital of Lille and the University Campus Bio-Medico of Rome, to better understand hospital needs and challenges and has received positive feedback from preliminary tests.

FUTURE WORKS

- Incorporate non-physiological factors, as highlighted by medical staff feedback (such as meal consumption estimation).
- Consolidate all monitoring functions into a single device.
- Design a user interface tailored to the needs of medical staff and hospital settings.
- Other applications might profit from MARCHESE project



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"If you have an apple and I have an apple and we exchange these apples then you and I will still each have one apple. But if you have an idea and I have an idea and we exchange these ideas, then each of us will have two ideas." *George Bernard Shaw*

More on : Academic training lectures on robotics, https://indico.cern.ch/event/1055745/

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