

DATA REDUCTION OR DATA FUSION IN BISOGINAL PROCESSING?

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Abstract: When subjects are monitored over long time spans and when several biosignals are derived a large amount of data has to be processed. In consequence, the number of features which has to be extracted is mostly very restricted in order to avoid the so-called “curse of high dimensionality”. Donoho (Donoho, 2000) stated that this applies only if algorithms perform local in order to search systematically for general discriminant functions in a high-dimensional space. If they take into account a concept for regularization between locality and globality “blessings of high dimensionality” are to be expected. The aim of the present study is to examine this on a particular real world data set. Different biosignals were recorded during simulated overnight driving in order to detect driver’s microsleep events (MSE). It is investigated if data fusion of different signals reduces detection errors or if data reduction is beneficial. This was realized for nine electroencephalography, two electrooculography, and for six eyetracking signals. Features were extracted of all signals and were processed during a training process by computational intelligence methods in order to find a discriminant function which separates MSE and Non-MSE. The true detection error of MSE was estimated based on cross-validation. Results indicate that fusion of all signals and all features is most beneficial. Feature reduction was of limited success and was slightly beneficial if Power Spectral Densities were averaged in many narrow spectral bands. In conclusion, the processing of several biosignals and the fusion of many features by computational intelligence methods has the potential to establish a reference standard (gold standard) for the detection of extreme fatigue and of dangerous microsleep events which is needed for upcoming Fatigue Monitoring Technologies.

1 INTRODUCTION

The fusion of many features is often under criticism, because it is assumed that processing of a large number of features leads to performance deteriorations of classifiers. This is because local optimizations of discriminant functions suffer from the so-called “curse of high dimensionality”. It has been shown theoretically that non-local learning algorithms, like the Support Vector Machine (SVM), suffer less from this problem and that there are also “blessings of high dimensionality” (Donoho, 2000), i.e. certain random fluctuations are very well controlled in high dimensions, whereas in moderate dimensions these fluctuations lead to deteriorations in statistical measures. Therefore, the question of fusion or reduction of features remains open and answers depend on signal characteristics

(nonlinearities, randomness) and should be given problem specific.

Here we present experimental investigations utilizing 15 different signals of electroencephalography (EEG), electrooculography (EOG), and eyetracking signals (ETS). All signals are featured by relatively high temporal resolution and are corrupted by large noise originated by a lot of other simultaneously ongoing brain processes. This leads to more or less extensive signal processing which results in a large variety of different features. Then, it is often discussed if a fusion of all features or, in controversy, feature reduction should be strived in order to optimize performance of subsequent processing methods. On the one hand, fusion of features of different types of signals should be beneficial, because EEG, EOG and ETS are reflecting different processes. On the other hand, ETS and EOG are relatively close related.

Both contain components of eye movement, but they are differing in that ETS outputs the time series of pupil size and that the EOG contains components of blink movements. Therefore, it should be of interest if a fusion of both closely related types of signals is still of advantage or not.

2 VIGILANCE MONITORING

Over the past years the development of vigilance monitoring systems has made considerable progress. In case of applications to transportation industries several stages of interactions between the system and the driver are under discussion and are to some extent implemented. On a low level of interaction the estimated vigilance level is displayed to the driver in order to give him a feedback and to support his own decision making. Advantageously, the accuracy in such "alertometer" applications must be at least as high as to display the vigilance level in two, or three, or some more steps. This is not the case on higher levels of interaction where e.g. acoustic or visual stimuli are presented in order to give insistent warnings to the driver. Highly accurate estimations are required here. If the rate of false alarms would be too high, such systems are scarcely accepted by drivers. On the other hand, missing errors are very dangerous for the driver and are therefore not acceptable especially during very low vigilance and in its extreme extent, the microsleep events (MSE). The latter are defined as short and non-anticipated intrusions of sleep into wakefulness under demands of sustained attention (www.microsleep.de).

The question remains whether there exists a unique sign of extreme fatigue and of MSE which can be measured non-intricately. In a recent paper Schleicher et al. (Schleicher et al., 2007) investigated oculomotoric parameters in a data set of 82 subjects. The parameter most correlating to independent vigilance ratings was the duration of eye blinks. In addition to correlation analysis this parameter was investigated in detail immediately before and after a MSE which they defined as overlong eye blinks. The mean duration of overlong eye blinks is substantially longer (269 ms) than of blinks immediately before (204 ms) and after (189 ms) a MSE. Furthermore, considerable inter-individual differences were reported and the duration of overlong eye blinks seems to be much lower than the reported 700 ms of Summala et al (Summala et al., 1999). Ingre et al (Ingre et al., 2006) also reported large inter-individual variability of blink duration in a driving simulation study of 10

subjects after working on a night shift. In conclusion, only gradual changes and a large inter-subject variability are observable in this important parameter which is mostly used in industrial fatigue monitoring devices. The same is reported of other variables, e.g. delay of lid reopening, blink interval, and standardised lid closure speed (Schleicher et al., 2007).

EEG studies on strong fatigue of several authors have resulted in a similar picture of inter-individual differences, of non-unique parameter values and of non-specific patterns. In their review paper Santamaria and Chiappa (Santamaria and Chiappa, 1987) stated: "There is a great deal of variability in the EEG of drowsiness among different subjects". In a large normative study with 200 male subjects the EEG of drowsiness was found to have "infinitely more complex and variable patterns than the wakeful EEG pattern" (Maulsby et al., 1968). Åkerstedt et al. (Åkerstedt et al., 1991) showed that with increasing working time subjectively rated sleepiness strongly increases and the EEG showed a significant but moderate increase of hourly mean power spectral densities (PSD) only in the alpha but not in the theta band. In contrast, Makeig & Jung (Makeig and Jung, 1995) concluded from their study that the EEG typically loses its prominent alpha and beta frequencies as lower frequency theta activity appears at the time when performance is deteriorating due to strong fatigue. Sleep deprived subjects performing a continuous visuomotor compensatory tracking task (Makeig et al., 2000) showed increasing PSD in the lower theta range (3-4 Hz) during periods of poor performance. But, other studies stated a broad-band increase of PSD in the theta-alpha-range and Lal & Craig (Lal and Craig, 2002) found significant increases of PSD in the delta-theta-alpha-beta-range by factors of 22%, 26%, 9%, 5%, respectively.

Another variable which has the potential to have a relatively close relationship to the sleep/wake system is the pupil size. Experiments to get normative values of the pupil unrest index including 349 subjects at the age between 20 and 60 years resulted in significant variations depending on sleepiness (Wilhelm, et al., 2001). Pupillograms can be measured contactless by camera based eyetracking systems (ETS). This measure is additionally dependent on several other influences, like e.g. ambient illumination. Therefore, it is like EEG and EOG problematic as a basic indicator for vigilance monitoring devices on real roads. Varying ambient illuminations do not appear in laboratories.

Despite the above mentioned difficulties in searching for unique signs of extreme fatigue, the analysis of brain electric and of oculomotoric signals are

accepted as most favourable for detections of sudden performance deteriorations on a second-by-second basis. It is unlikely that biosignals, like e.g. electrocardiogram, electromyogram, electro-dermal activity, or indirect measures of driver fatigue like driving parameters, e.g. variability of lane deviation and of steering angle, contain such information which immediately reflect ongoing MSE.

3 EXPERIMENTS

During the week preceding the study subjects had to keep a sleep diary to assess sleep habits. In addition, subjects had to carry a wrist actometer during the three days and nights preceding the experiments. Actograms were checked immediately after arrival of the subject to the experimental night, normally at 11 pm. If total sleep length (6 ... 10 hrs), time-since-sleep (14 ... 16 hrs) and if the subject accomplished the demand of no nap, then a permit for experiments was given. Three days before the experimental night subjects were familiarized with the lab equipment and had to drive on a 20 min training course in the driving simulator. Two subjects complained about simulator sickness and were excluded from further investigations. During the experimental nights one further subject has quitted because of simulator sickness and one because of back pain. In total twenty-two healthy subjects (21 male, 1 female; mean age 24.4 ± 3.1 years, range 19-28 years) finished experiments completely. All subjects gave written informed consent and gave a written declaration on their transfer home after experiments. Only driving as passenger or, in case of campus residents, walking was allowed.

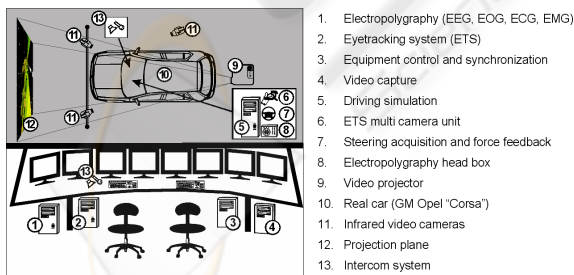


Figure 1: Lab layout: dark simulator room (grey) with a real car; operator room (light grey).

Experimental investigations were conducted in our driving simulation lab consisting of an operator room and a fully dark, temperature controlled simulator room (Fig. 1). Subjects had to drive a real car (GM Opel "Corsa") on a slightly winding road under

conditions of night vision. No oncoming traffic was simulated in order to maintain high level of monotony. The driving scene was projected on a projection plane 2.6 m in front of the subject; maximum visual angle is 56 deg. In case of complete road departures a force feedback to the steering wheel was switched on. This was in nearly all cases effective enough to waken drowsy subjects.

For monitoring subjects behaviour three video cameras were utilized: (1) of subjects left eye region, (2) of her / his head and upper part of the body, and (3) of driving scene. Video recordings were used for online and offline scoring as explained later. Logged variables of the driving simulator were lane deviation, velocity, steering angle, and pedal movements; sampling rate was 10 s^{-1} . Furthermore, several electrophysiological signals were derived. Seven EEG channels (C3, Cz, C4, O1, O2, A1, A2, common average reference), two of EOG (vertical, horizontal), one of ECG, and one of EMG (musculus submentalis) were sampled at a rate of 128 s^{-1} . Further 6 signals were recorded by a binocular eye tracking system (ETS) at a rate of 250 s^{-1} . For each eye the pupil size and the two coordinates of eye gaze on the plane of projection were measured.

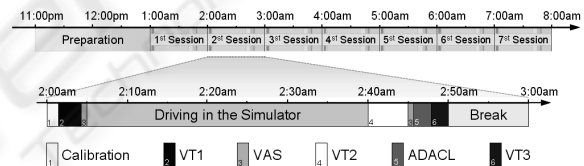


Figure 2: Operating schedule of one experimental night. Subjects had to complete seven driving sessions. In each session subjects drove in the simulator and attended three vigilance tasks (VT 1 - 3), and two questionnaires (VAS = Visual Analogue Scale, ADACL = Thayer Activation-Deactivation Adjective Checklist).

In all, subjects had to complete seven driving sessions lasting 35 min, each preceded and followed by vigilance tests and responding to sleepiness questionnaires (Figure 2) which are not considered in this paper. Before starting the next driving session a 10 min long break was inserted for subjects needs and in order to motivate the subject to continue driving with best possible performance. Driving started at 1:00 a.m. after a day of normal activity and a time since sleep of at least 16 hours.

On the one hand, our design has the disadvantage of non-continuous driving due to questionnaires, vigilance tests and breaks. But on the other hand a large total time-on-duty is gained and a time-of-day effect due to passing the circadian trough can be observed. We experienced earlier that it is hard to

motivate a subject for continuous driving in a simulator for longer than two or three hours; most of them are willing to give up when the first MSE arise. We believe that our design results in much more examples of MSE than in continuous driving of equivalent total length (4 h).

Driving tasks were chosen intentionally monotonous and with time-since-sleep up to 24 hours to support drowsiness and occurrence of MSE. MSE were detected online by two operators who observed the subject utilizing three video camera streams as aforementioned. Typical signs of MSE are e.g. prolonged eyelid closures, roving eye movements, head noddings, major driving incidents and drift-out-of-lane accidents. We have found 3,573 MSE (per subject: mean number 162 ± 91 , range 11 - 399).

The step of online scoring is critical, because there are no unique signs of MSE, and their exact beginning is sometimes hardly to define. Therefore, all events were checked offline by an independent expert and were corrected if necessary. Unclear MSE characterized by e.g. short phases with extremely small eyelid gap, inertia of eyelid opening or slow head down movements were excluded from further analysis. Non-MSEs were selected at all times outside of clear and of unclear MSE. We have picked out the same amount of Non-MSE as of MSE in order to have a balanced data set. Our intention was to design a detection system for clear MSE versus clear Non-MSE classification. We hypothesize that such a system can not only detect the MSE recognized by human experts. They should also offer a possibility to detect unclear MSE cases which are not easily recognizable by experts. In another paper we report on first positive results to this hypothesis (Sommer et al., 2008).

4 DATA ANALYSIS

Pre-processing, feature extraction, classification and validation are typically the main steps of discriminant analysis. Three main steps of pre-processing were performed: signal segmentation, artefact removal and missing data substitution. Segmentation of all signals was done with respect to the observed temporal starting points of MSE or Non-MSE using two free parameters, the segment length and the temporal offset between first sample point of the segment and starting point of the event. The first parameter adjusts the trade-off between temporal and spectral resolution whereas the second parameter controls the location of the region-of-interest on the time axis. Both parameters are of high importance

and were found to be optimal when offset is -3 sec and segment length is 8 sec (Golz et al., 2007). This means that classification is working best when biosignals from 3 sec immediately before MSE to 5 sec after MSE onset are analyzed. Artefact detection in EEG and missing data in ETS during every eyelid closure were both of minor importance (Golz et al., 2007).

We utilized the common periodogram and the recently introduced method of Delay Vector Variance (DVV) (Lal and Craig, 2002) as feature extraction tools. The first method assumes stationary signals and their generating system is linear. It is a direct method to estimate logarithmic PSD. DVV transforms the signal to the state space utilizing time delay embedding. Provided that distinct conditions are fulfilled, e. g. if the signal generating system can be described by relatively simple coupled ordinary differential equations, this has the advantage that signals exhibiting some degree of irregularity in the time domain are mapped on relatively simple trajectories in the state space. Simple statistical tests in the state space can then be utilized to estimate to which degree the signal may be generated by a nonlinear system and to estimate how large may be the amount of stochasticity in the signal. Both features are important and are dependent on one free parameter which controls the degree of similarity in the state space. Therefore, two feature sets are generated by DVV. They may vary over time if the signal generating process alters as it might by when a MSE is oncoming.

After completion of pre-processing and feature extraction the stage of classification analysis is up next. It turned out that Support Vector Machines (SVM) outperform several other methods (Golz et al., 2007). It is a stochastic learning method and is adapting discriminant functions in order to gain high adaptivity and also high generalizability. In order to gain this several internal parameters are to be optimized which is computational time consuming (Golz et al., 2007). For comparison we utilized also a winner-takes-all neural network, namely the OLVQ1 algorithm. It demands much less computational effort and is a good choice of efficiency when many parameters of pre-processing and feature extraction are to be optimized empirically.

Next, validation is performed in order to estimate the true error of classification. The expectation value of the classification error based on the training data is known to be biased. This so-called training set error is a useful measure to check how good the adaptation of the discriminant function has been working. Several cross validation methods have been developed in order to get a second measure, the test error. Here we

have used the “leave-one-out” cross validation, because it provides an almost unbiased estimation of the true classification error, but it is computationally expensive. Advantageously, in case of SVM an efficient implementation is possible due to the support-vector concept.

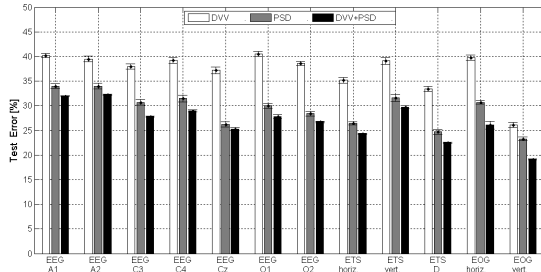


Figure 3: Mean and standard deviation of test set errors for single signals and several examples of feature fusion.

5 RESULTS

Mean and standard deviation of test errors (Figure 3) of different feature sets extracted from only one bio-signal were estimated. The PSD feature set resulted in lower errors than the DVV feature set (white bars are always higher than grey bars). DVV shows good potential in exploring the horizontal EOG, which is due to eye blinks far from quasi-stationarity. This is required for PSD estimation but not for DVV. The fusion of both PSD and DVV features performed always better than PSD features alone (black bars are always lowest). The vertical EOG component turned out as most successful for microsleep detection, but error rates are around 20 %. The fusion of features of different signals always reduces errors (six right most groups of bars in Figure

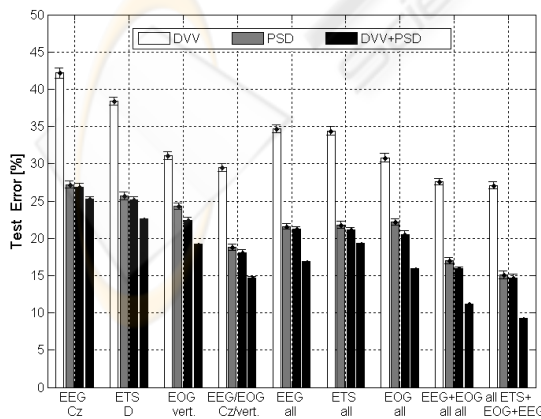


Figure 4: Mean and standard deviation of test set errors for several examples of feature fusion.

4). The fusion of the best single channels (EOG vertical and EEG Cz) performs better than the fusion of all EEG signals, or of all ETS, or of both EOG signals. But this is clearly outperformed by fusion of all EEG and all EOG features, or of all EEG + EOG + ETS features (two right most groups of bars in Fig. 4). The latter resulted in mean test errors lower than 10 %. A comparison of more classification methods and a report of some more details on discriminant analysis, their parameters and their computational costs can be found elsewhere (Golz et al., 2007).

Different methods of feature reduction were applied to all nine EEG and EOG signals (Table 1). First, no reduction was aimed to have a baseline result. So, 513 features per channel were processed. SVM ($E_{Test} = 13.1\%$) performs much better than OLVQ1 ($E_{Test} = 27.7\%$). Next, PCA (principal component analysis) was utilized to reduce the number of features down to 60 for OLVQ1 and 128 for SVM. This was found as an empirical optimum with minimal test errors (OLVQ1: 17.4 %; SVM: 10.9 %). The third method was the commonly used summation in four spectral bands (delta, theta, alpha, beta), which leads to total number of features of $N_F = 4 \text{ features / signal} \times 9 \text{ signals} = 36 \text{ features}$. It clearly came out that this reduction is too much. Next, summation in small, equidistant spectral bands was performed, whereby frequency range and width of the bands were determined empirically. We found a range of 0.5 to 23.5 Hz and a width of 1 Hz optimal, i.e. 24 features per signal. The fifth method was a summation in bands whereby ranges were determined by utilizing Evolutionary Strategies (ES). The number of features per channel was preset to 10. Further details can be found elsewhere (Golz et al., 2007), (Sommer and Golz, 2007). Results show that feature reduction leads to more than 3 % of error reduction which can be gained by simple averaging in small spectral bands or by ES optimization. The common method of reduction to the delta, theta, alpha, and beta band is as bad as no reduction.

Table 1: Results of 5 different feature reductions applied to EEG and EOG. Test set errors (E_{Test}) were estimated by Multiple Hold-Out and by Leave-One-Out cross validation utilizing OLVQ1 and SVM, respectively. The number of features (N_F) varies largely between cases.

Case	N_F	OLVQ1	SVM
		$E_{TEST} [\%]$	$E_{TEST} [\%]$
(1) No reduction	4617	27.7 ± 0.6	13.1 ± 0.3
(2) PCA	60 / 128	17.4 ± 0.4	10.9 ± 0.2
(3) fixed band	36	17.5 ± 0.4	13.2 ± 0.3
(4) equidistant bands	216	15.7 ± 0.4	9.9 ± 0.1
(5) ES-OLVQ1	90	14.1 ± 0.4	9.8 ± 0.1

6 CONCLUSIONS

It has been shown that fusion of features has potential to improve detection accuracy of driver's microsleep. Features of two different extraction methods, namely the Power Spectral Density (PSD) and the Delay Vector Variance (DVV), were fused first, but with a limited success. Fusion of different signals of one signal type, such as all EEG signals, as well as fusion of different signal types, namely EEG, EOG, ETS, resulted in clear improvements. The best single EEG signal (Cz) gained a mean error of 25 %. The fusion of all 7 EEG signals reduced errors down to 16 %, and the fusion of all 15 signals available reduces errors down to 9 %.

In high-dimensional spaces it is apparently intractable to search systematically and to approximate a general, high-dimensional function accurately. This is known as the so-called "curse of high dimensionality". But, Support-Vector Machines and also other modern methods of computational intelligence, but not OLVQ1, impressively demonstrated that high dimensionality must not be a curse. OLVQ1 performance decreased largely when the number of input variables (features) was very high. Our results also showed that fusion of features of all signals is most beneficial.

Reduction is of limited advantage and was only successful for highly correlating features, e.g. summation of PSD values in small spectral bands. There is presumably no potential for further improvements due to feature reduction. This was demonstrated by computational expansive optimizations of the parameters of spectral bands utilizing Evolutionary Strategies. Note that these optimizations are capable to search for different spectral bands for each subject, if it would be advantageously.

Future work should reveal if a further diversification of feature extraction may increase performance of discriminant analysis. Different types of features should then be fused which is likely to improve accuracy and robustness of MSE detection.

On the one hand the detection of driver's microsleep is a relatively clear case illustration for the problem of spontaneous behavioural events and their detection. On the other hand, their detection in bio-signals will be a necessary milestone for future on-line driver monitoring technology. It explores the extreme end of driver's fatigue where it is essential to avoid attention losses. The practical goal of such a detection system is to establish a laboratory reference standard for detection of microsleep and extreme hypovigilance. Contactless operating online driver monitoring technology, which is currently under

development by car industry, must be validated utilizing such a laboratory reference standard.

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