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(54) **BLOOD PRESSURE ESTIMATION USING A HAND-HELD DEVICE**

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USPC **600/310**

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(57) **ABSTRACT**

A method for providing a blood pressure indicator of a person, the method comprises: obtaining multiple first detection signals from a non-invasive optical plethysmography sensor that monitors a body area of the person; obtaining multiple second detection signals from a non-invasive Electrocardiography sensor; processing, by a health monitoring module, the multiple first detection signals to detect first points in time that correspond to arrivals of blood pulses to the body area that is monitored by the non-invasive optical plethysmography sensor; processing the multiple second detection signals to detect second points in time that correspond to peaks of QRS complexes; and calculating at least one blood pressure indicator in response to at least one timing difference between at least a single pair of first and second points in time that are associated with a same heartbeat.

(21) Appl. No.: **13/733,235**

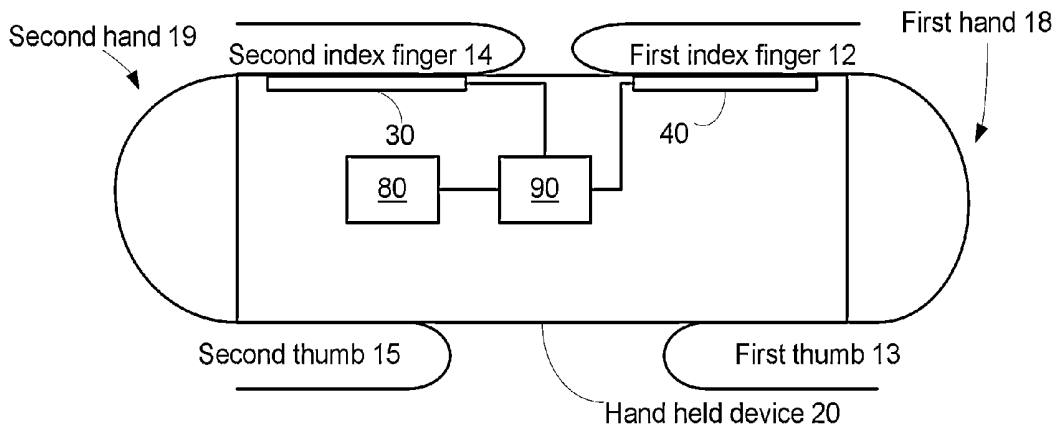
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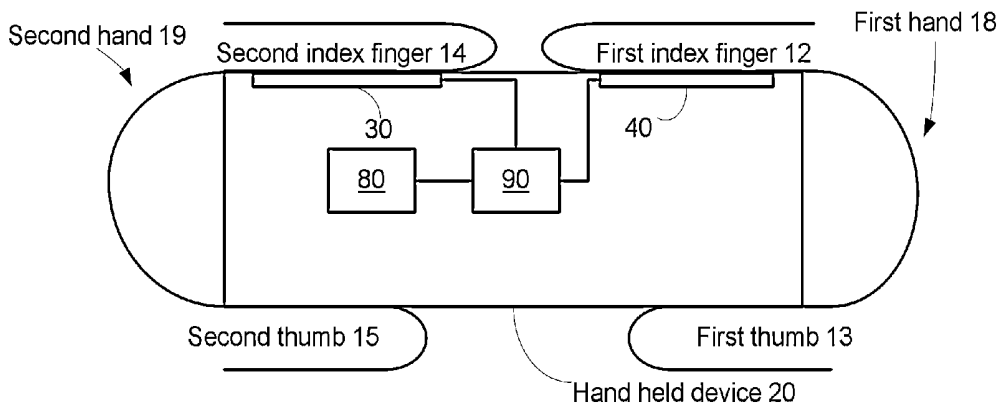


FIG. 1A

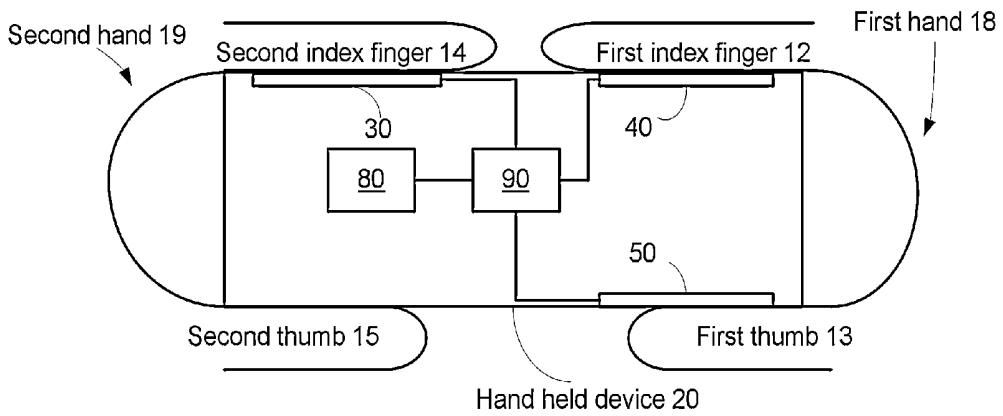


FIG. 1B

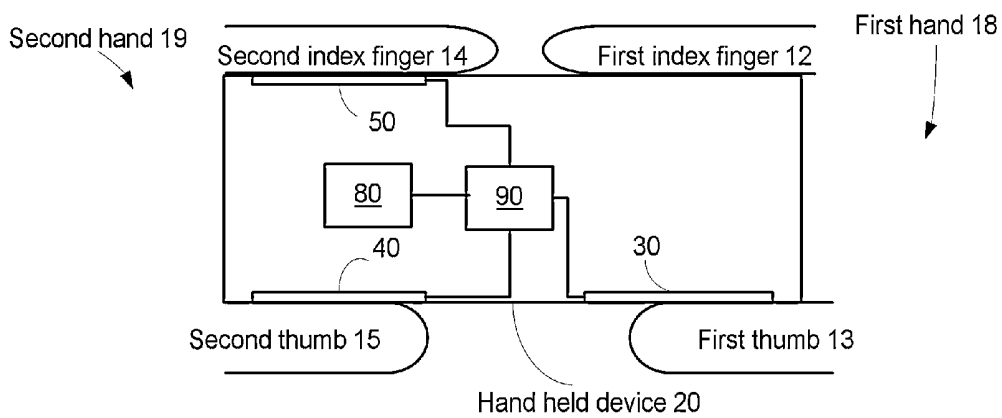


FIG. 1C

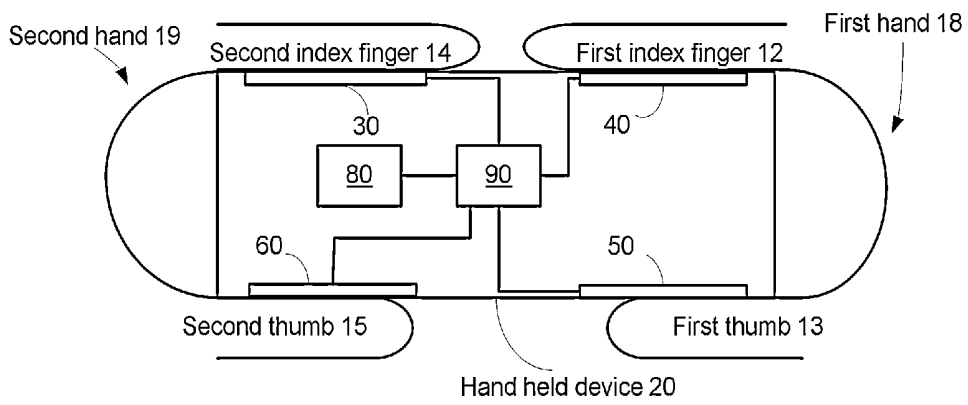


FIG. 2A

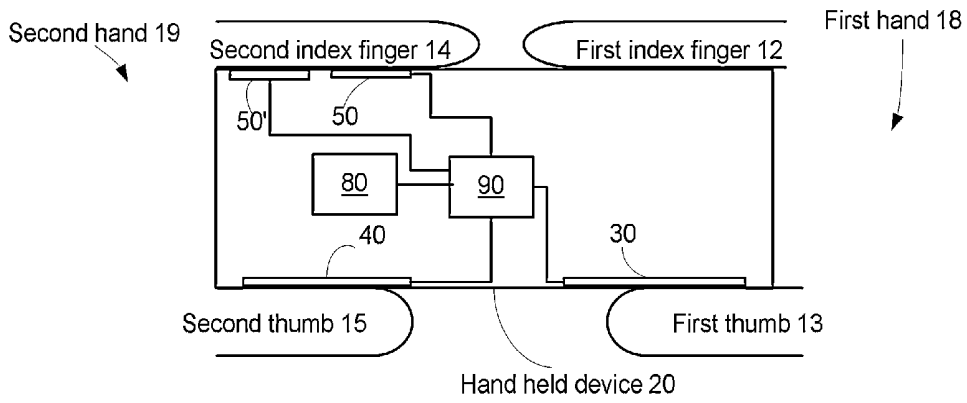


FIG. 2B

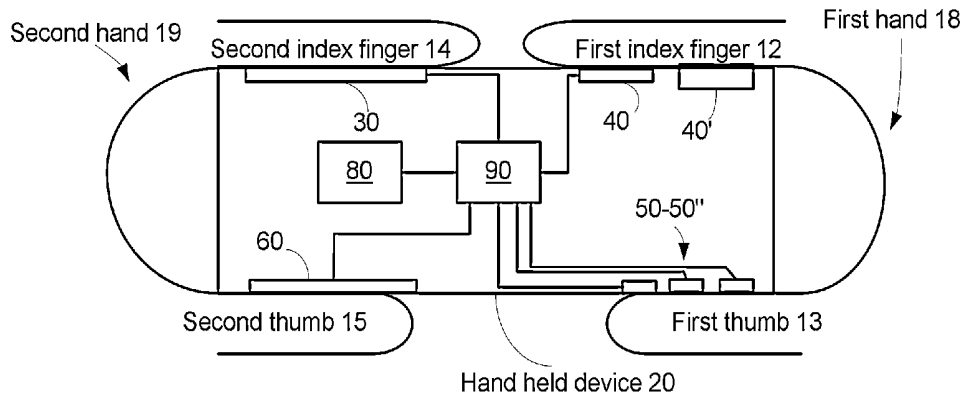


FIG. 3A

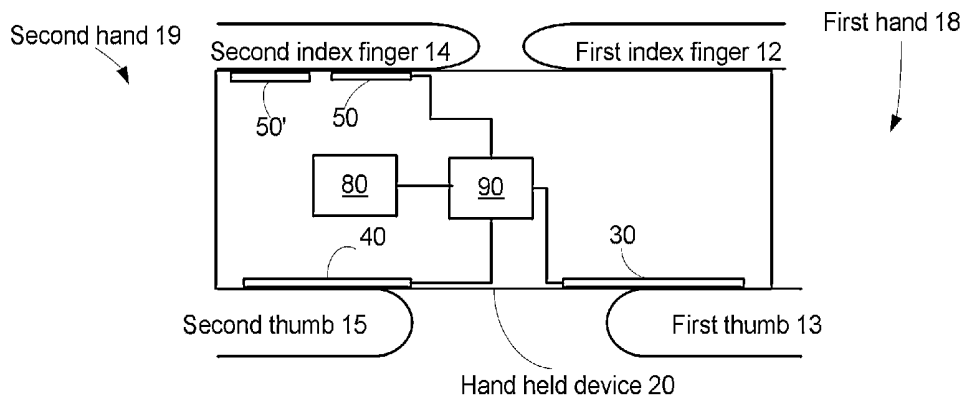


FIG. 3B

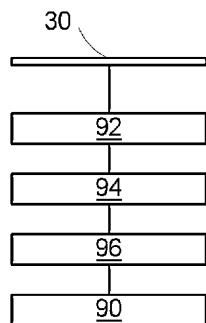


FIG. 3C

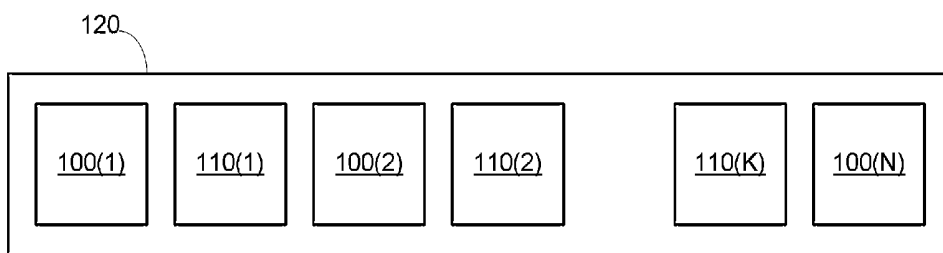


FIG. 4A

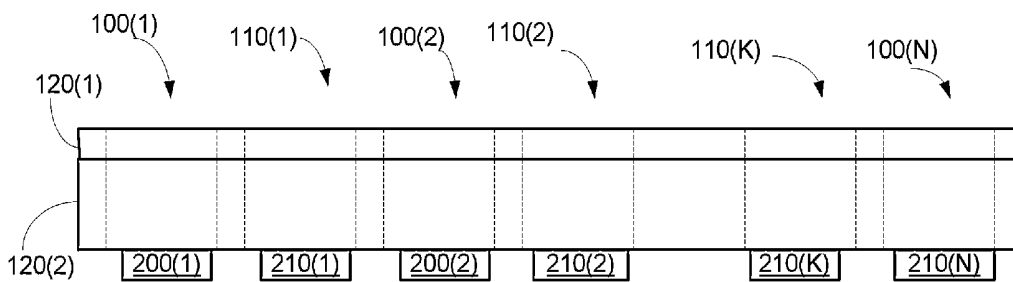


FIG. 4B

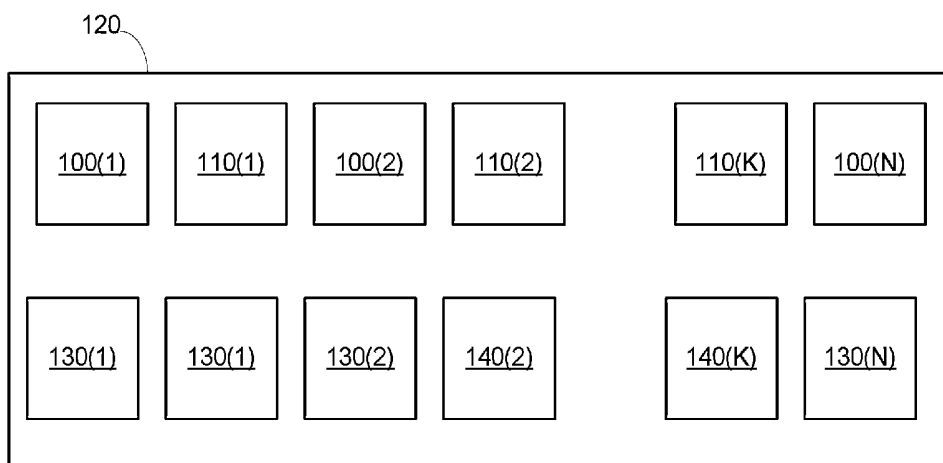


FIG. 4C

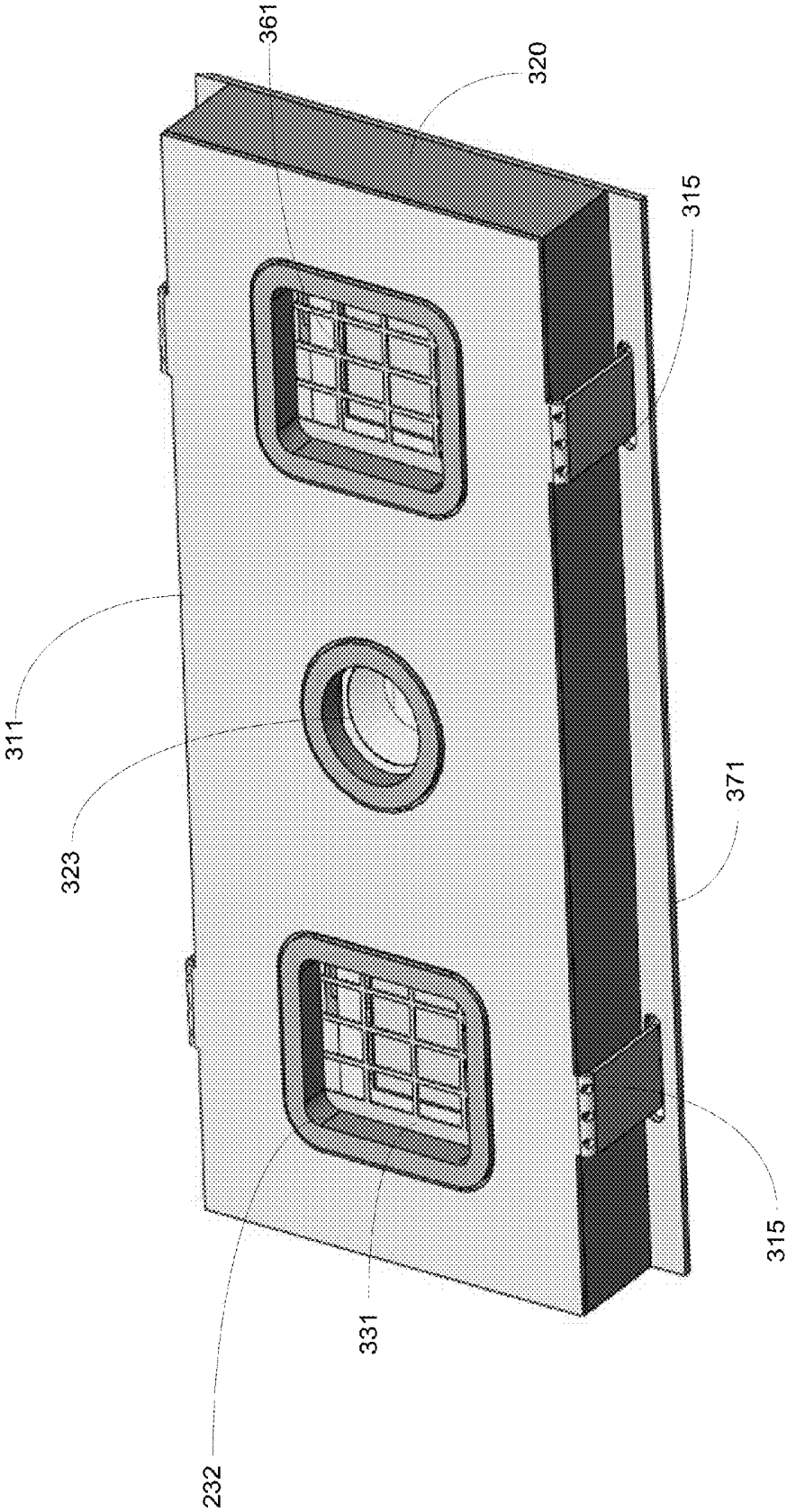


FIG. 5A

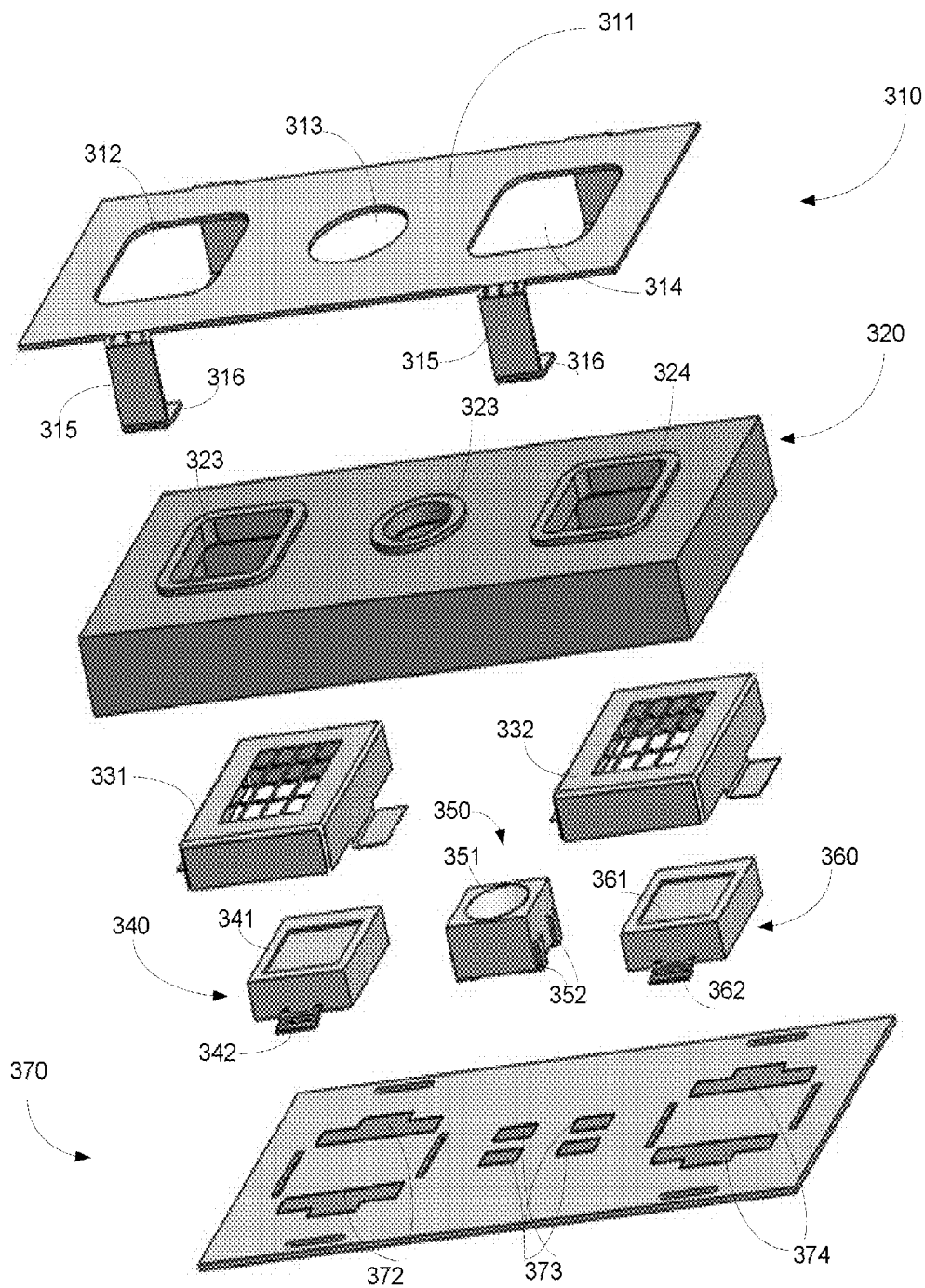


FIG. 5B

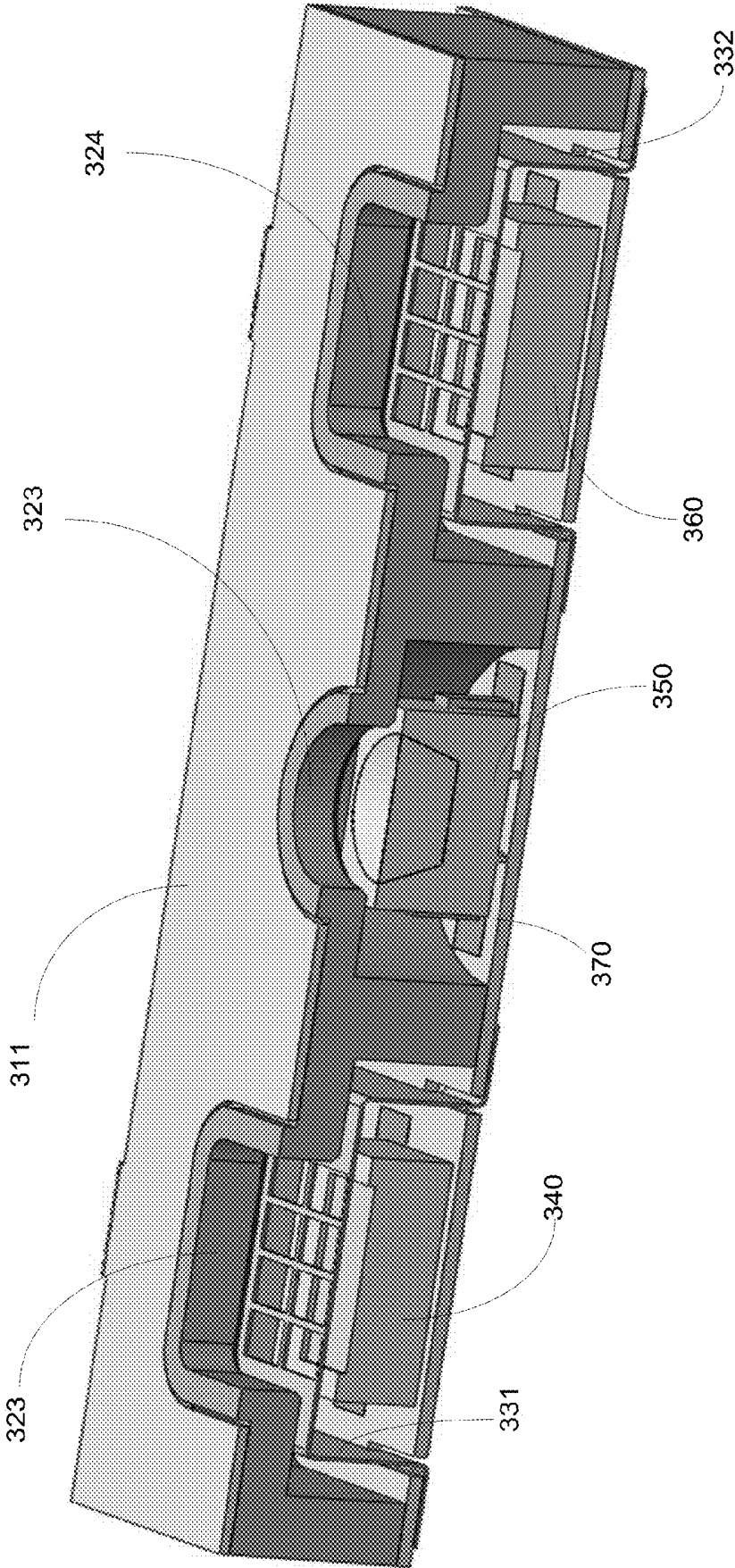
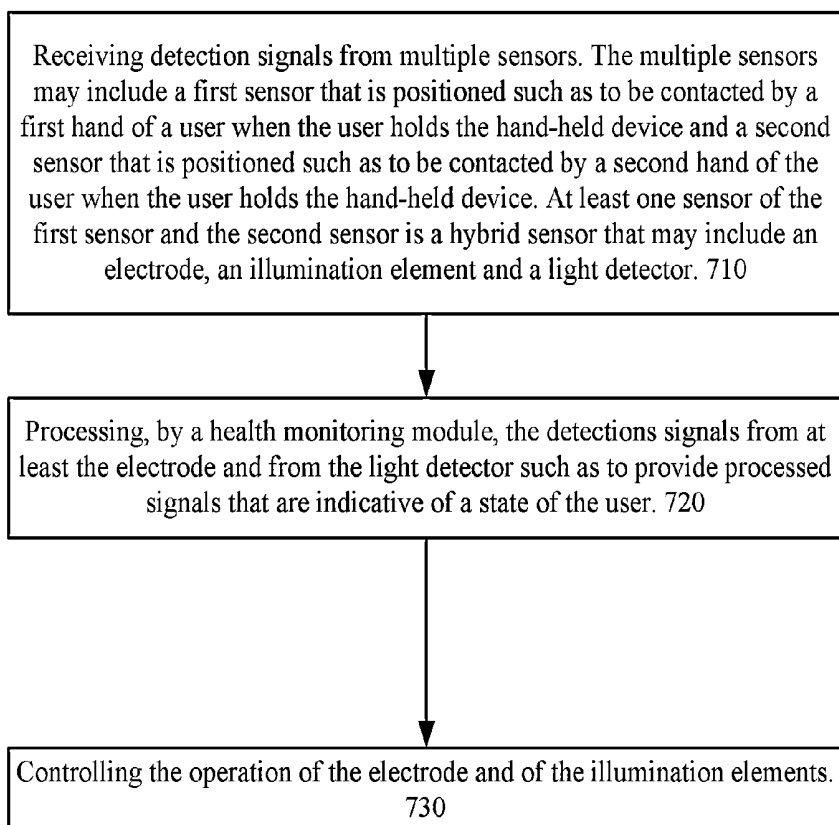
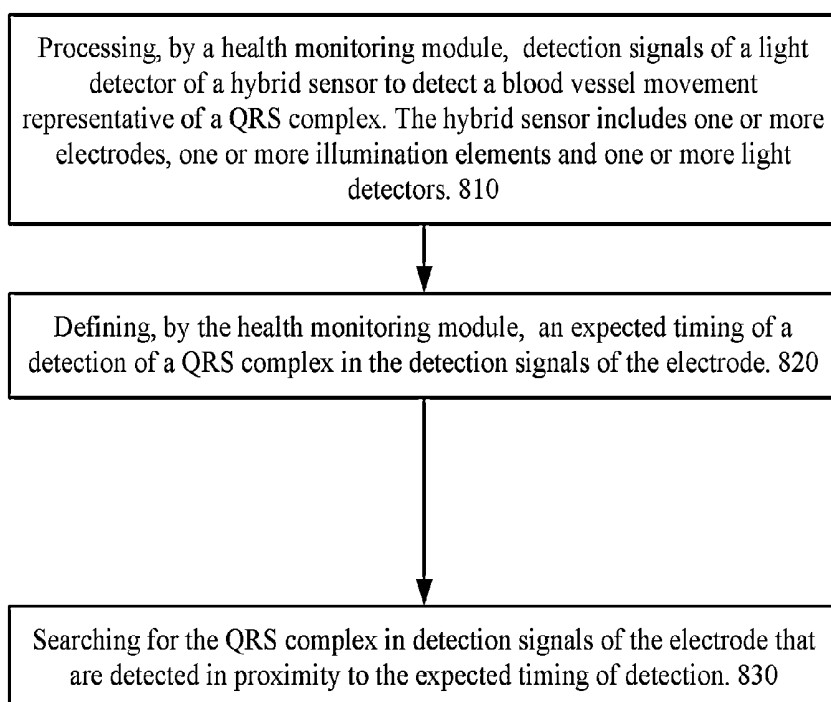


FIG. 5C



700

FIG. 6



800

FIG. 7

replacement sheet

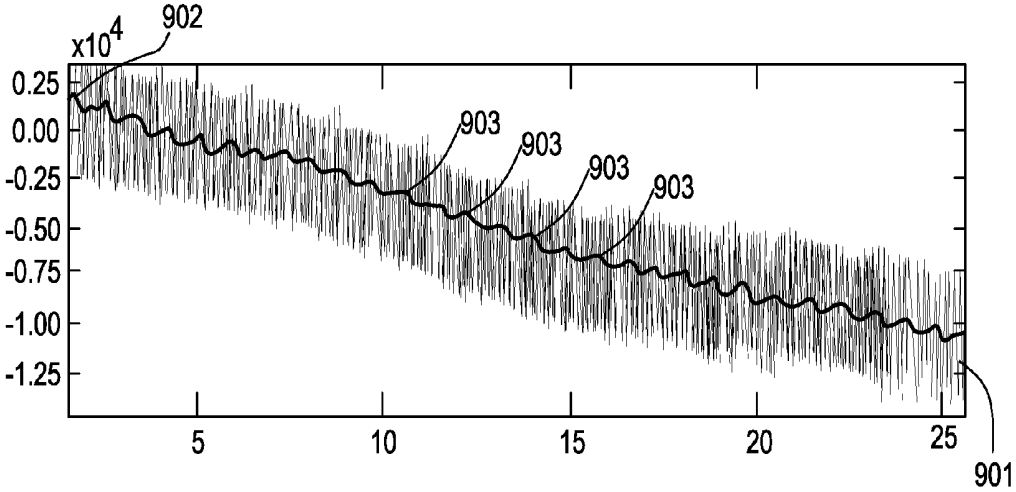


FIG 8

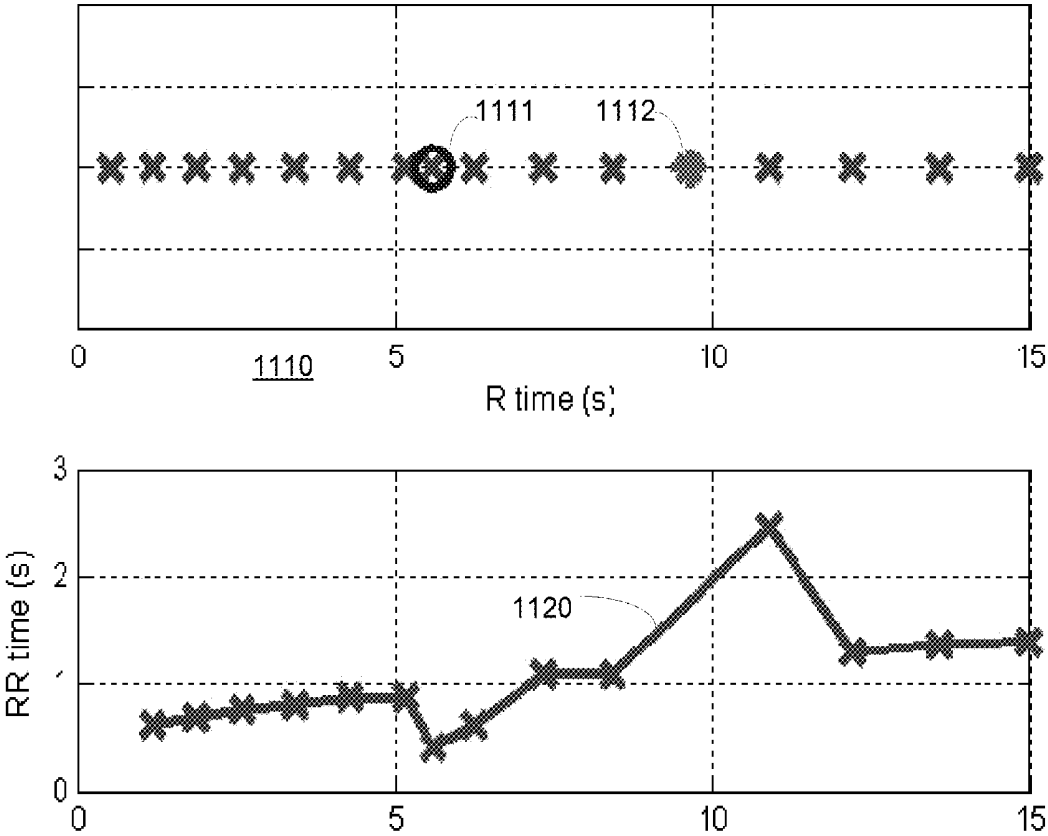


FIG. 10

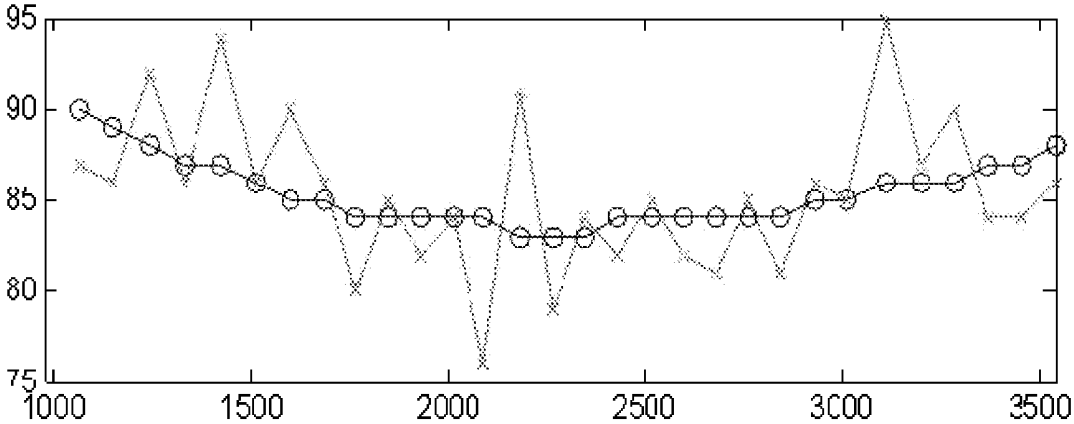


FIG. 11

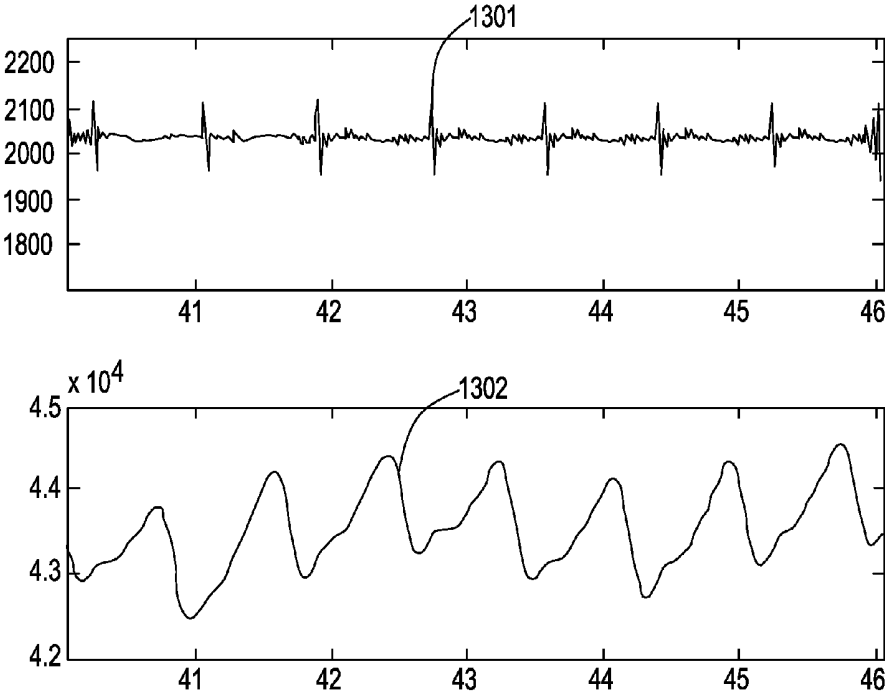
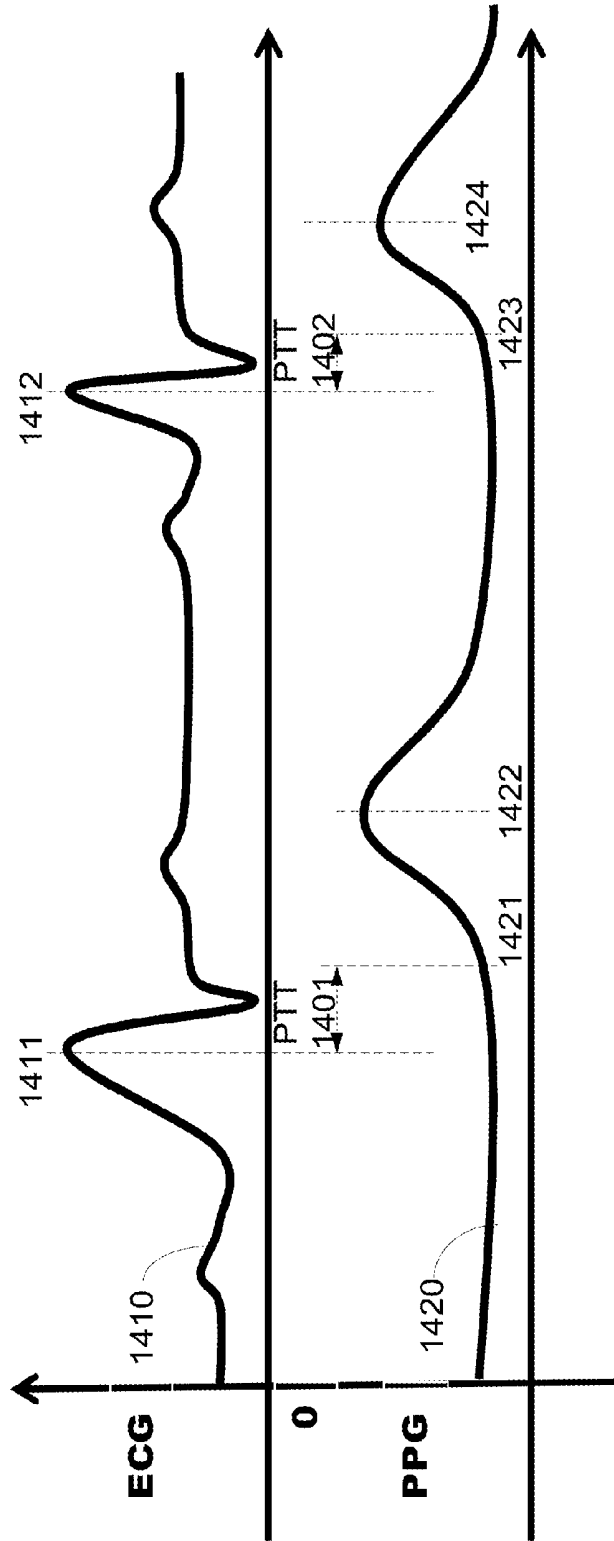


FIG 12



1400

FIG. 13

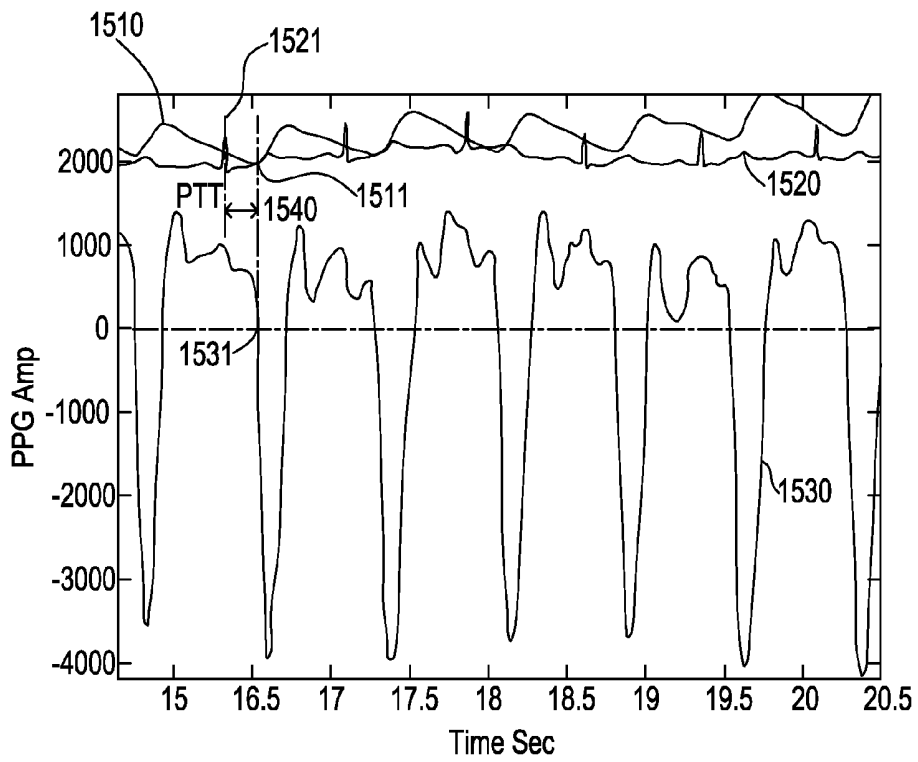
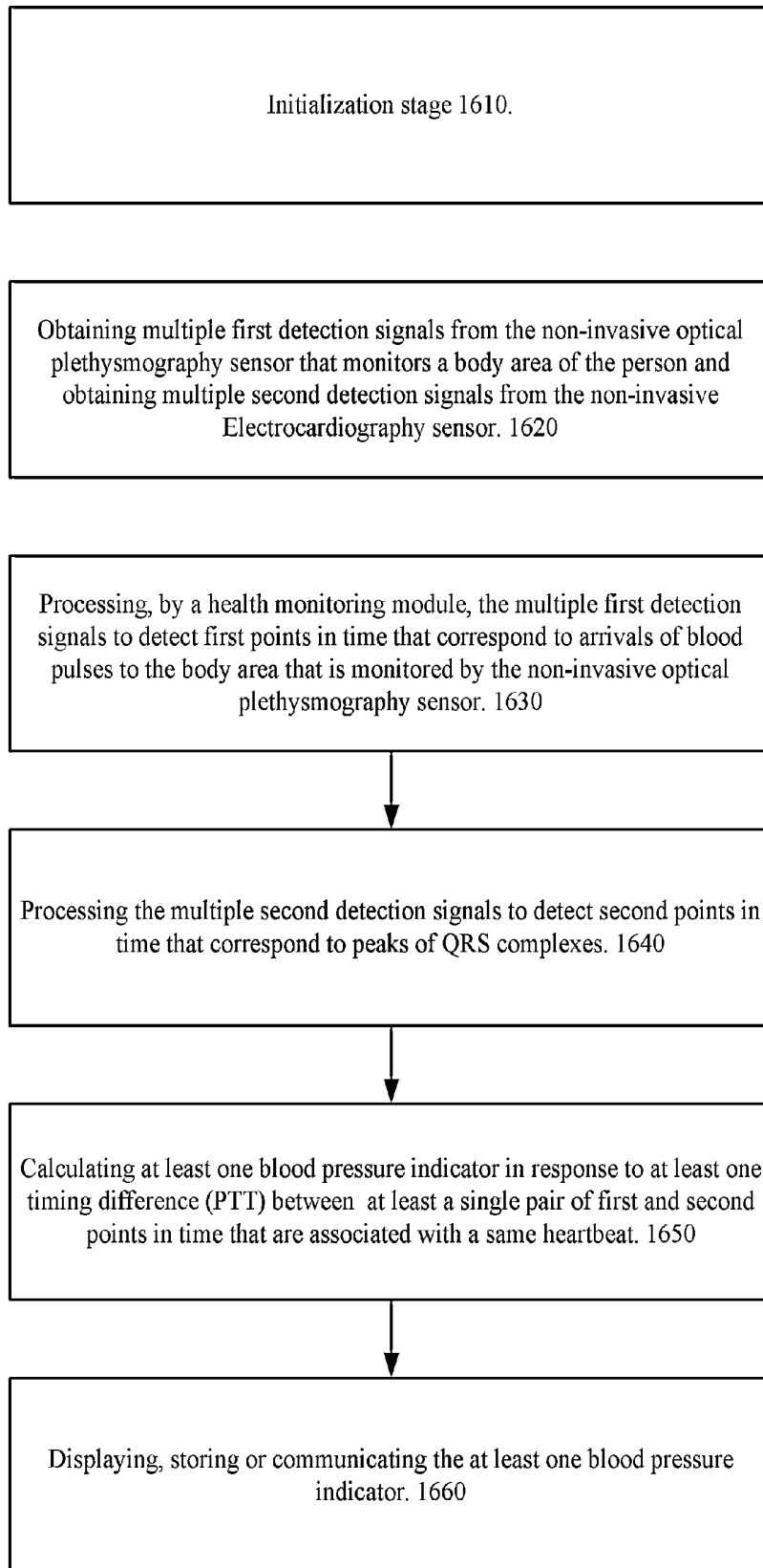
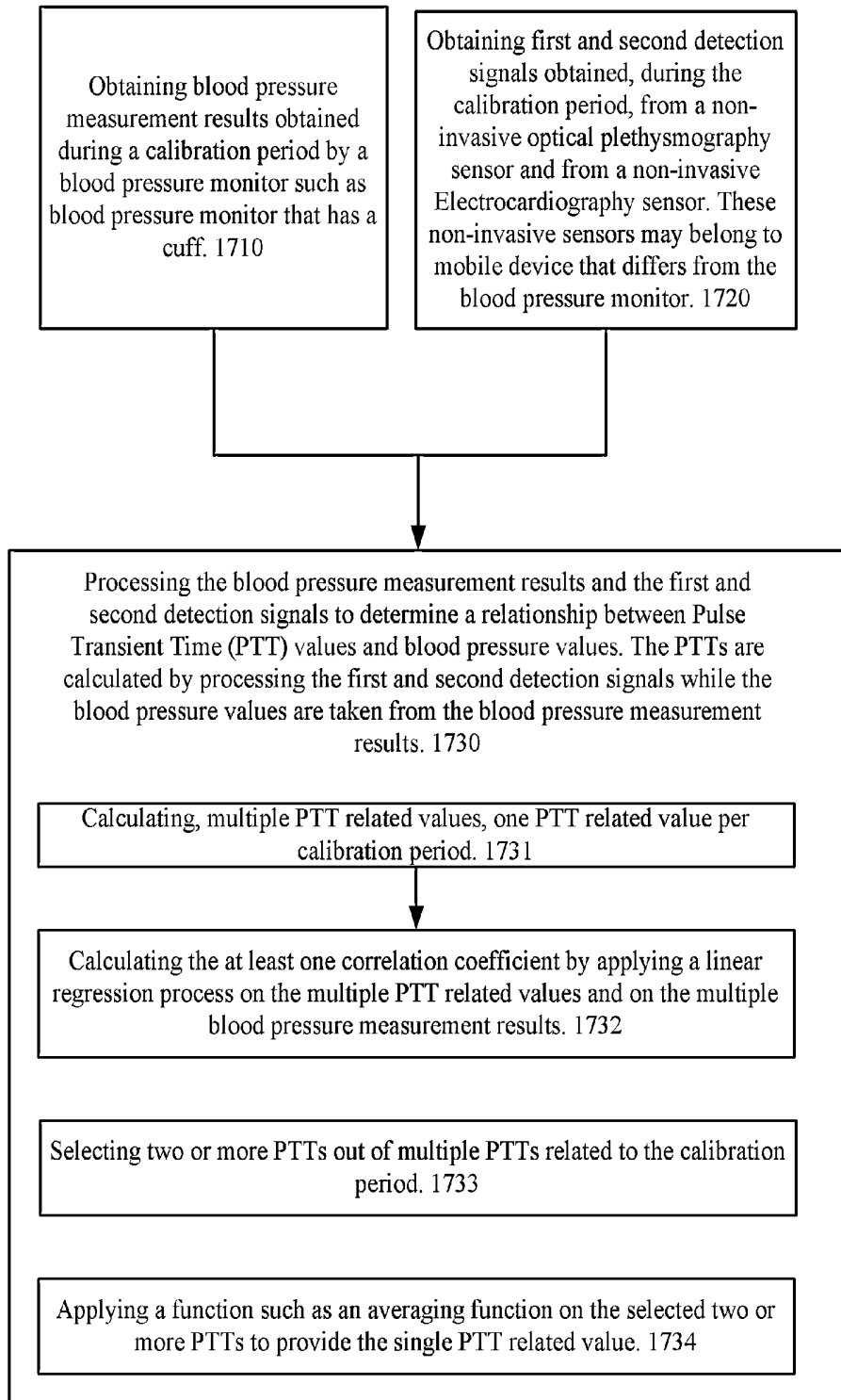


FIG 14



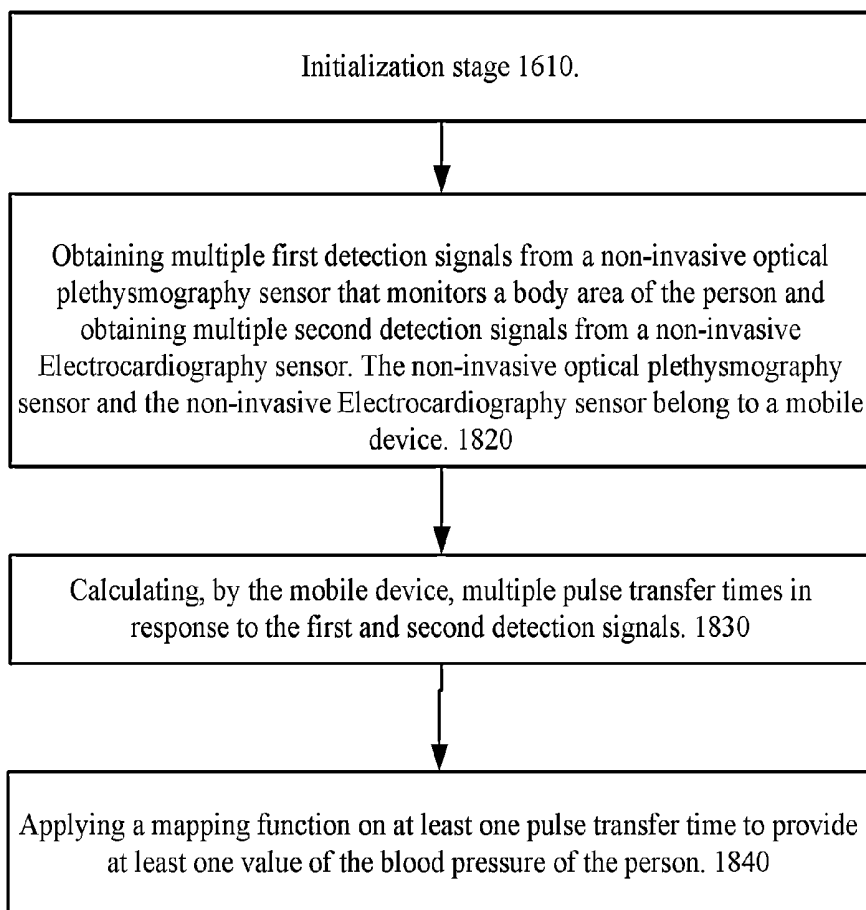
1600

FIG. 15



1700

FIG. 16



1800

FIG. 17

BLOOD PRESSURE ESTIMATION USING A HAND-HELD DEVICE

RELATED APPLICATIONS

[0001] This application is a continuation in part of U.S. patent application Ser. No. 13/433,608, filing date Mar. 29, 2012 which is incorporated herein by reference.

BACKGROUND OF THE INVENTION

[0002] Blood pressure measurements are cumbersome or inaccurate. Cuff based solutions require either expensive or inaccurate measurement equipment and are cumbersome.

[0003] There is a growing need to provide a systems and methods for blood pressure measurements that are inexpensive and easy to implement.

SUMMARY OF THE INVENTION

[0004] According to an embodiment of the invention there may be provided systems and methods for blood pressure measurements.

BRIEF DESCRIPTION OF THE DRAWINGS

[0005] The subject matter regarded as the invention is particularly pointed out and distinctly claimed in the concluding portion of the specification. The invention, however, both as to organization and method of operation, together with objects, features, and advantages thereof may best be understood by reference to the following detailed description when read with the accompanying drawings in which:

[0006] FIGS. 1A-1C illustrate hand-held devices according to various embodiments of the invention;

[0007] FIGS. 2A-2B illustrate hand-held devices according to various embodiments of the invention;

[0008] FIGS. 3A-3B illustrate hand-held devices according to various embodiments of the invention;

[0009] FIG. 3C illustrates a portion of the hand-held device of any of FIGS. 1A-1C, 2A-2B and 3A-3B, according to an embodiment of the invention;

[0010] FIGS. 4A-4C illustrate a hybrid sensor according to various embodiments of the invention;

[0011] FIGS. 5A-5C illustrate a hybrid sensor according to various embodiments of the invention;

[0012] FIG. 6 illustrates a method according to an embodiment of the invention; and

[0013] FIG. 7 illustrates a method according to an embodiment of the invention;

[0014] FIGS. 8-12 illustrate various signals according to various embodiments of the invention;

[0015] FIGS. 13-14 illustrate various signals according to various embodiments of the invention; and

[0016] FIGS. 15-17 illustrate various methods according to various embodiments of the invention.

[0017] It will be appreciated that for simplicity and clarity of illustration, elements shown in the figures have not necessarily been drawn to scale. For example, the dimensions of some of the elements may be exaggerated relative to other elements for clarity. Further, where considered appropriate, reference numerals may be repeated among the figures to indicate corresponding or analogous elements.

DETAILED DESCRIPTION OF THE DRAWINGS

[0018] The subject matter regarded as the invention is particularly pointed out and distinctly claimed in the concluding portion of the specification. The invention, however, both as to organization and method of operation, together with objects, features, and advantages thereof, may best be understood by reference to the following detailed description when read with the accompanying drawings.

[0019] In the following detailed description, numerous specific details are set forth in order to provide a thorough understanding of the invention. However, it will be understood by those skilled in the art that the present invention may be practiced without these specific details. In other instances, well-known methods, procedures, and components have not been described in detail so as not to obscure the present invention.

[0020] The following abbreviations and terms are used in this specification:

HR	Heart Rate
BE	Backend of a hand-held device. It can be a server which among other tasks runs the algorithm on data which was sent from the hand-held device.
QRS	A waveform presented in an ECG during ventricular depolarization
RR interval	Distance (time) between sequential QRS complexes - two consecutive R waves
PTT	Pulse Transient Time. Time between the occurrence of the QRS complex and the corresponding PPG pulse.
Tachycardia	A rapid heart rate, especially one above 100 beats per minute in an adult

[0021] There is provided a compact, cheap and resilient hand-held device that has health monitoring capabilities. The hand-held device can include one or more sensors that are integrated with a smart phone, a media player, a game console, a communication device, a mobile phone, a palm computer and the like.

[0022] The device is hand-held in the sense that it can be held by one or two hands of a user. The user can hold the hand-held device with one hand, the device can be attached to a user or to another user accessory but the user can be requested to hold the hand-held device by one or two hands when performing at least one medical examination.

[0023] The shape of the hand-held device can be rectangular (as illustrated in FIGS. 1A-1B, 2A-2B and 3A-3B) but can have other shapes such as an oval shape, elliptical shape, a polygon shape and the like.

[0024] The hand-held device can include multiple medical sensors that may include electrodes, optical elements, infrared elements, chemical sensors and the like. One or more of these sensors can be a hybrid sensor that can include different types of sensing elements such as electrodes and light sensing elements.

[0025] FIGS. 1A, 1B, 1C, 2A, 2B, 3A and 3C illustrate various examples of hand-held devices 20 that are contacted by users. The following table illustrates the mapping between fingers and sensors (30, 40, 40', 50, 50' 50") that should be contacted by the user, according to various embodiments of the invention.

FIG.	First hand 18		Second hand 19	
	1st index finger 12	1st thumb 13	2nd index finger 14	2nd thumb 15
1A	40		30	
1B	40	50	30	
1C		30	50	40
2A	40	50	30	60
2B	40	30	50, 50'	
3A	40, 40'	50, 50', 50''	30	60
3B		30	50, 50'	40

[0026] FIG. 1A illustrates a hand-held device 20 that is being held by two hands (18 and 19) of a user. The hand-held device 20 may include: (a) a first sensor 40 that is positioned such as to be contacted by a first hand 18 of a user when the user holds the hand-held device 20; (b) a second sensor 30 that is positioned such as to be contacted by a second hand 19 of the user when the user holds the hand-held device; and (c) a health monitoring module 90 arranged to process detections signals from the electrodes and from the light detector such as to provide processed signals that are indicative of a state of the user. The health monitoring module 90 can perform the entire processing, can perform a partial processing and then send (or assist in sending) the partially processed signals to another entity (such as the main processor of the hand held device, a remote processing entity, a medical hub, a hospital etc) to be further processed. The health monitoring module 90 can be dedicated for medical processing or can be also allocated to other tasks. The health monitoring module 90 can be a general purpose processor or a digital signals processor, it can control the functionality of the hand-held device 20.

[0027] Either one of the first sensor 40 and the second sensor 30 can be placed on (or embedded with) an edge or a surface of the hand-held device 20 so that once the user touches that edge or surface, the user may touch the first sensor 40.

[0028] FIGS. 1A and 1B illustrate the first sensor 40 and the second sensor 30 as belonging to a top side of the hand-held device 20 while FIG. 1C illustrates the first sensor 40 and the second sensor 30 as belonging to a bottom side of the hand-held device 20.

[0029] The first and second sensors 40 and 30 can be located at the same side of the hand-held device 20, can be positioned at different sides and even opposite sides of the hand-held device 20. For example, first sensor 40 can be positioned at a top side of the hand-held device 20 while the second sensor 30 can be positioned at a bottom side, a side-wall, a back side or even at the front panel of the hand-held device 20.

[0030] FIG. 1A also illustrates the hand-held device 20 as including a man machine interface (MMI) element 80. This MMI element 80 can be a screen, a keyboard, a microphone, a loudspeaker, a touch screen and the like. This MMI element 80 can be much bigger than is being illustrated in FIG. 1A. It can span across the entire (or almost entire) hand held device 20. Yet according to another embodiment of the invention one or more sensor is connected to the application processor of the hand held device.

[0031] The MMI element 80 can provide to the user instructions to be followed during the medical test. For example, the MMI element 80 can request a user to contact one or more

sensors, to limit the movement of the user, to change position or try to clean an electrode if it is detected that a certain electrode does not receive goon enough (too noisy or too weak) signals, and the like. The MMI element 80 can display or otherwise make the user aware of the outcome of the medical evaluation.

[0032] At least one sensor out of the first sensor 40 and the second sensor 30 can be a hybrid sensor that may include an electrode, an illumination element and a light detector. Non-limiting examples of a hybrid sensor (denoted 70) are shown in FIGS. 4A-4C and 5A-5C.

[0033] According to an embodiment of the invention the hand-held device 20 can include more than two sensors. It can include for example, a third sensor such as third sensor 50 of FIGS. 1B and 1C, 2A, 2b, 3A and 3B.

[0034] Yet for another example, the hand-held device 20 can include a fourth sensor, such as fourth sensor 60 of FIGS. 2A, 3A and 50' of FIG. 3B.

[0035] Yet for a further example, the hand-held device 20 can include a fifth sensor, such as fifth sensor 40' of FIG. 3A, can include a sixth sensor such as sixth sensor 50' of FIG. 3A and can include a seventh sensor such as seventh sensor 50'' of FIG. 3A.

[0036] The number of sensors of the hand-held device can exceed seven.

[0037] The sensors can be positioned such that each sensor is touched by a different finger of the user (as illustrated in FIGS. 1A, 1B, 1C, 2A, 2B) although multiple sensors can be positioned such as to be touched by the same finger of the user (as illustrated in FIGS. 3A and 3B). The number of sensors that can be touched by the same finger can be two, three or more.

[0038] FIG. 3C illustrates a portion of the hand-held device of any of FIGS. 1A-1C, 2A-2B and 3A-3B, according to an embodiment of the invention. FIG. 3A illustrates that a sensor (such as second sensor 30) is coupled to the health processing module 90 via analog circuits such as amplifier 92, mixed signal circuits such as analog to digital converter (ADC) 94 and memory unit 96. Electrical detection signals from an electrode of the second sensor 30 are amplified to amplifier 92 to provide amplified detection signals. The amplified detection signals can be converted to digital detection signals that can be stored in memory unit 96 and/or processed by health monitoring module 90.

[0039] The following figures illustrate a hybrid sensor. It is noted that this is merely a non-limiting example and that other sensors can be used.

[0040] FIGS. 4A and 4B are top and side views of a hybrid sensor 70 according to an embodiment of the invention.

[0041] The hybrid sensor 70 includes an electrode 120 that has apertures—light illumination apertures 110(1)-110(K) and light collection apertures 100(1)-100(N). The user, or more specifically a finger of the user that touches the electrode (or is positioned above these apertures) is illuminated by light generated by illumination elements 210(1)-210(K) and directed through the light illumination apertures 110(1)-110(K). Light (scattered and/or reflected) from the finger passes through the light collection apertures 100(1)-100(N) and is detected by light detectors 200(1)-200(N). N and K are positive integers. N may differ from K but N may be equal K.

[0042] The electrode 120 is illustrated as including a conductive portion 120(1) that is supported by another portion 120(2).

[0043] While FIGS. 4A and 4C illustrate a linear array of illumination elements and light detectors it is noted that the light detectors and light detectors can be arranged in other manners—for example, as a rectangular array—as illustrated by the two row array of FIG. 4A.

[0044] It is noted that the illumination elements and the light detectors can be arranged in an interleaved manner (as illustrated in FIGS. 4A, 4B, 5A, 5B, and 5C) but can be arranged in other manners.

[0045] It is noted that unwanted artifacts and signal noises can be reduced by either one of using electrodes with low impedance, shielding power and signal lines and raising the input impedance of the amplifier.

[0046] Light from an illumination element can be collected by one or more light detectors. FIGS. 5A-5C illustrate a pair of light detectors per a single illumination element but the ratio can differ from 1:2. If there are more than one illumination elements then the number of light detectors associated with a single illumination element can differ from one illumination element to the other or can be equal to each other.

[0047] FIGS. 5A-5C provide a top view, an exploded view and a cross sectional view of a hybrid sensor 70 according to an embodiment of the invention.

[0048] The hybrid sensor 70 includes: (a) a conductive portion 310 of an electrode, (b) an additional portion 320 of the electrode, (c) protective shields 331 and 332, (d) illumination element 350, (e) light detectors 340 and 360, and (f) electrical circuit 370.

[0049] The electrical circuit 370 can be a rigid or flexible electrical board that provides electrical connectivity (for power supply, control signals and communications) to the illumination element 350 and to light detectors 340 and 360. The electrical circuit 370 can be connected to a power supply source and to the health monitoring processor.

[0050] The conductive portion of the electrode 310 is positioned above other parts of the hybrid sensor 70. It has an upper surface 311 that defines a light illumination aperture 313 that is positioned between two light collection apertures 312 and 314. The upper surface 311 is connected to four supporting legs, each supporting leg is conductive and include a vertical plate 315 and a horizontal plate 316. The horizontal plate 316 can be connected to the board 371 of the electrical circuit 370. The electrical circuit 370 can have slits in which each leg can be inserted to that the horizontal plate 316 can be positioned below the board 371 and can be used for assisting in fastening the elements of the hybrid sensor 70 to each other.

[0051] The additional portion 320 of the electrode can provide mechanical support to the conductive portion 310 and can defined spaces (322, 323 and 324) that are positioned below apertures 312, 313 and 314 and allow light to be directed towards the user (through space 323) and be collected (via spaces 322 and 324).

[0052] The additional portion can be made of non-conductive material.

[0053] Protective shields 331 and 332, and light detectors 340 and 360 can be placed within spaces 322 and 324 while illumination element 350 can be placed within space 323.

[0054] Each one of light detectors 340 and 360 and illumination element 350 can conductors (such as 342, 352 and 362) to provide electrical connectivity with conductors (372, 373 and 374) of the board 371.

[0055] The hand-held device 20 can activate one sensor or multiple sensors and can correlate or otherwise use detections

signals from one sensor to evaluate detection signals from another sensor. For example, the electrode 310 can provide signals that are characterized by a low signal to noise ratio and thus various waveforms such as the QRS complex can be hard to detect. The light detector 350 can sense light that is indicative of a movement of the blood vessels of the user that corresponds to the QRS complex and this detection can be used for defining a time window in which to search for the QRS complex at the signals of the electrode. The time window is time shifted from the appearance of the QRS complex at the light detector signal due to a known delay between the generation of the RQS complex pulse and appearance of a movement that reflects the blood wave at the user's finger.

[0056] FIG. 6 is a flow chart of a method 700 according to an embodiment of the invention.

[0057] Method 700 for monitoring a state of a user may start by stage 710 of receiving detection signals from multiple sensors; wherein the multiple sensors comprise a first sensor that is positioned such as to be contacted by a first hand of a user when the user holds the hand-held device and a second sensor that is positioned such as to be contacted by a second hand of the user when the user holds the hand-held device; wherein at least one sensor of the first sensor and the second sensor is a hybrid sensor that comprises an electrode, an illumination element and a light detector.

[0058] Stage 710 may be followed by stage 720 of processing, by a health monitoring module, the detections signals from at least the electrode and from the light detector such as to provide processed signals that are indicative of a state of the user.

[0059] The hand-held device 20 that executes method 700 can be any of the mentioned above hand-held devices.

[0060] For example, stage 710 can include at least one of the following:

[0061] 1. Receiving detection signals from a hybrid sensor that includes an electrode that defines a light illumination aperture and a light collection aperture; wherein the illumination element is arranged to direct light towards the user through the light illumination aperture; and wherein the light detector is arranged to detect light from the user that passes through the light collection aperture.

[0062] 2. Receiving detection signals from a hybrid sensor that includes an electrode that defines a light illumination aperture and multiple light collection apertures; wherein the illumination element is arranged to direct light towards the user through the light illumination aperture; and wherein at least one light detector is arranged to detect light from the user that passes through the multiple light collection apertures.

[0063] 3. Receiving detection signals from a hybrid sensor that includes a light illumination aperture that is positioned between a pair of light collection apertures.

[0064] 4. Receiving detection signals from a hybrid sensor that includes at least one light detector that is shielded by an apertured shield.

[0065] 5. Receiving detection signals from a hybrid sensor that includes multiple illumination elements and multiple light detectors that are spaced apart from each other.

[0066] 6. Receiving detection signals from a hybrid sensor that includes an electrode, a light detector and an illumination element that are proximate to each other.

- [0067] 7. Receiving detection signals from a third sensor that is positioned such as to be contacted by the first or second hand of the user when the user holds the hand-held device. The third sensor can be a hybrid sensor or can differ from a hybrid sensor.
- [0068] 8. Receiving detection signals from a third sensor that is positioned at a first side of the hand-held device while the first and second sensors are positioned at a second side of the hand-held device, the second side is opposite to the first side.
- [0069] 9. Receiving detection signals from a third sensor that is positioned such as to be contacted by a thumb of one of the hands of the user while the first and second sensors are positioned such as to be contacted by index fingers of the user.
- [0070] 10. Receiving detection signals from a fourth sensor that is positioned such as to be contacted by the hand of the user that differs from a hand of the user that contacts the third sensor.
- [0071] 11. Receiving detection signals from a hybrid sensor that includes an electrode that includes a conductive portion and at least one additional portion. The additional portion may be insulating or partially conductive. The additional portion may be thicker (for example—at least three times thicker) than conductive portion.
- [0072] For example, stage 720 can include at least one of the following:
- [0073] 1. Performing, by the health monitoring module, a common noise rejection algorithm on detection signals received from electrodes of multiple sensors out of the first, second and third sensors.
- [0074] 2. Performing, by the health monitoring module, the common noise rejection algorithm on detection signals received from electrodes of the first, second and third sensors.
- [0075] 3. Processing, by the health monitoring module, detection signals from the light detector to provide an indication about a blood oxygen saturation level of the user.
- [0076] 4. Processing, by the health monitoring module, detection signals from the electrode to provide an indication about an electrical activity of a heart of the user.
- [0077] 5. Processing, by the health monitoring module, detection signals from the light detector to provide an indication about an electrical activity of a heart of the user.
- [0078] 6. Correlating, by the health monitoring module, between the detection signals of the light detector and of the electrode to provide an indication about an electrical activity of a heart of the user.
- [0079] 7. Processing, by the health monitoring module, the detection signals of the light detector to define a processing window for processing the detection signals of the electrode.
- [0080] 8. Processing, by the health monitoring module, the detection signals of the light detector to detect a QRS complex; defining an expected timing of a detection of a QRS complex in the detection signals of the electrode; and searching for the QRS complex in detection signals of the electrode that are detected in proximity to the expected timing of detection.
- [0081] Method 700 can include stage 730 of controlling the operation of the electrode and of the illumination elements.

Stage 730 may include activating the illumination element and the light detector of the hybrid sensor while collecting detection signals from the electrode. Stage 730 may include ignoring detection signals from the electrode while measuring a blood oxygen saturation of the user.

[0082] FIG. 7 illustrates method 800 according to an embodiment of the invention.

[0083] Method 800 may start by stage 810 of processing, by a health monitoring module, detection signals of a light detector of a hybrid sensor to detect a blood vessel movement representative of a QRS complex. The hybrid sensor includes one or more electrodes, one or more illumination elements and one or more light detectors.

[0084] Stage 810 is followed by stage 820 of defining, by the health monitoring module, an expected timing of a detection of a QRS complex in the detection signals of the electrode.

[0085] Stage 820 may be followed by stage 830 of searching for the QRS complex in detection signals of the electrode that are detected in proximity to the expected timing of detection.

[0086] A non-limiting example of an execution of method 800 can be found in FIG. 6.

[0087] There is provided a method for monitoring heart related parameters. The method may include detecting QRS complexes on ECG signal, detecting pulsing activities on PPG signals, phase matching and at least zero optimization stages out of (a) optimal estimation of HR for Bradycardia and Tachycardia detection, and (b) Optimal estimation of HRV for AFIB detection.

[0088] The Detection of QRS complexes on ECG signal may include receiving detection signals from one or more electrodes and then differentiating the detection signals in order to get QRS complex slope data.

[0089] The following filter can be used to approximate that derivative (X_n , X_{n+1} and X_{n+2} are samples of the detection signal)

$$y_n = -x_{n-2} - 2 * x_{n-1} + 2 * x_{n+1} + x_{n+2}$$

[0090] The resultant signal (Y_n) is compared to a set of adaptive thresholds to make the final decision (together with the noise detection results).

[0091] The detection of pulsing activity on PPG signal may include preprocessing and peak detection.

[0092] The preprocessing may include filtering the PPG signal (for example using a finite impulse response filter with 128 taps between 0.5 and 4 Hz. The outcome of this filtering is a filtered signal. In FIG. 8 the filtered signal is represented by line 902 and the PPG signal is represented by curves 901. The filtered signal 902 shows a pulsing activity where each pulse corresponds to a single heartbeat.

[0093] The peak detection includes detecting peaks which correspond to each heartbeat. These peaks are identified by testing whether within each N samples the maximum value appears on sample N/2. N is adjusted so small maxima are not found.

[0094] The dots 903 of filtered signal 902 represent some of these peaks. The number of those peaks within a given minute will give the HR in beat per minute (BPM) units.

[0095] Two sources of information (PPG pulse timing and QRS pulse timing) both report on the temporal location of the heart contraction and therefore they can be combined and therefore improve the QRS detection. Two problems have to be overcome in order to combine the sources of information:

(A) False positive and miss detection of complexes in both the signals and (B) the relative temporal shift between the two sources of information.

[0096] FIG. 9 illustrates an ECG signal 1001. A first ellipse 1002 shows a false detection of a QRS complex. A second ellipse 1003 shows a missed QRS complex.

[0097] In FIG. 10 an ECG trace is shown along with beat by beat heart rate (numbers on the bottom of the figure) which are derived by taking the difference in QRS timing. In cases where a QRS is missed and falsely detected the HR which should be around 90 BPM would shift to 144 or 46. The same is true for the PPG signal where complexes might be falsely detected or missed. In order to match between the two sets of detections these false detections and missed complexes should be removed.

[0098] False and negative detections may be removed by fitting a polynomial model (for example—of a third order) to the RR sequence.

[0099] The RR sequence is generated by taking the difference in time between two consecutive QRS complexes. A missed QRS complex within the sequence will create a large entry whereas a false detection will create a rather small entry into the sequence.

[0100] FIG. 10 shows a sequence of detection time for QRS complexes. The top graph 1100 shows the timing of each QRS. The circle 1111 marks a false detection and the magenta asterisk 1112 corresponds to a false detection (the complex was not found).

[0101] The bottom graph 1120 shows the RR sequence. It is evident that the false detection (1111) leads to a momentary decrease in RR value. The miss detected QRS complex (1112) led to a large value in the RR sequence.

[0102] Once the RR sequence is estimated the method can perform one or more iterations of:

[0103] 1. Estimating a polynomial model (order 3) to the current RR sequence.

[0104] 2. Calculating the estimated RR sequence based on the model—call it Err

[0105] 3. Calculating an error term $e=RR-eRR$. In this error term find large entries (IErr) and small entries (sErr). Essentially the IErr terms correspond to missed QRS complexes which result in a high value of RR. The sErr correspond to false detections. And

[0106] 4. Searching for out layers (IErr and sErr). Remove sErr. Store the IErr.

[0107] Stages 1-4 can be repeated until no out layers are found.

[0108] Relative temporal shift between PPG and ECG R location.

[0109] FIG. 12 illustrates an example of a RR sequence 1201 and an estimated RR sequence (eRR) 1202.

[0110] The estimated phase and optimal RR interval can be derived for the remaining sequence of R (after removing IErr and sErr—see above). The optimal RR interval can be:

$$RR_{opt} = \text{argmax over } RR \text{ of } (\text{absolute value of } (\text{sum over } RR \text{ of } e \text{ by the power of } (j * 2 * \pi * R(n)) / (RR(n))))$$

[0111] wherein RR ranges between minRR and maxRR.

[0112] Once the optimal RR value is found (RR opt) the angle (or phase) of each R entry can be calculated by: angle (n) = e by the power of $(j * 2 * \pi * R(n)) / (RR_{opt})$.

[0113] The optimal RR and angle is evaluated or both the QRS complexes and the PPG output.

[0114] The two outputs are then compared.

[0115] Three ways can be used:

[0116] 1. Calculating a goodness metric for each measurement, ECG and PPG (usually between 0 to 1) and then combining the two by a weighted sum of the two outputs.

[0117] 2. Statistical comparison—matching the statistics of Angle_{QRS} and Angle_{PPG} by using the Kullback-Leibler divergence.

[0118] 3. Direct matching—testing the agreement of each entry of one sequence (Angle_{PPG}) with the other (Angle_{QRS}).

[0119] Assuming the angle (both PPG and QRS) has a normal distribution the overall agreement between Angle_{QRS} and Angle_{PPG} is evaluated by:

$$L(X, N(\mu, \sigma)) = \frac{1}{\sqrt{2\pi}\sigma} e^{-\frac{(X-\mu)^2}{2\sigma^2}}$$

[0120] Where L is the likelihood function between a single sample (of Angle_{PPG}) in this case and the distribution of Angle_{QRS}.

$$L_T = \prod_i L_i(\text{Angle}(i)_{PPG}, N(\mu_{QRS}, \sigma_{QRS}))$$

[0121] FIG. 12 illustrates the ECG signal 1301, the PPG 1302, as a function of time. It is evident that every ECG QRS complex matches with a peak in the PPG signal.

[0122] FIG. 13 illustrates filtered ECG and filtered PPG signals according to an embodiment of the invention.

[0123] Curve 1410 represents the filtered ECG signals and it includes two peaks (second points in time) 1411 and 1412.

[0124] Curve 1420 represents the filtered PPG signals and it includes two peaks 1422 and 1523 and two start points (first points in time) 1421 and 1423 that represent the beginning of the pulse.

[0125] This figure shows two PTTs—a first PTT 1401 is the difference between points in time 1411 and 1421 and the second PTT is the difference between points in time 1412 and 1423.

[0126] FIG. 14 illustrates filtered ECG, filtered PPG signals and a derivative of the filtered PPG signals according to an embodiment of the invention.

[0127] Curve 1520 represents the filtered ECG signals and it includes peaks (second points in time) such as peak 1521.

[0128] Curve 1510 represents the filtered PPG signals and it includes starts (foots) of pulses (first points in time) such as 1511. First point in time 1511 occurs when the value of the derivative of the filtered PPG signals equals zero (at point 1521 of curve 1530).

[0129] There are provided method for calculating blood pressure indicators. A blood pressure indicator can be indicative of a blood pressure of a person including but not limited to a mean blood pressure, a diastolic blood pressure a systolic blood pressure and the like.

[0130] The value of the blood pressure indicator can be the value of the blood pressure of the person or may differ from the value of the blood pressure of the person. For example, the value of the blood pressure indicator can represent the pulse transfer time (PTT) of the person. The blood pressure can be responsive to various variables in addition to the PTT so that

in some cases changes in values of blood pressure indicators may provide an indication of changes in the blood pressure—even if the exact value of the blood pressure is not known.

[0131] FIG. 15 illustrates method 1600 for providing a blood pressure indicator according to an embodiment of the invention.

[0132] Method 1600 may start by an initialization stage 1610. During stage 1610 the relationship between the PTT and the blood pressure can be determined. Additionally such information about the relationship between the PTT and the blood pressure can be received. The information can be a mapping function or one or more correlation coefficients. FIG. 17 illustrates a method 1700 for calibration during which such information can be obtained.

[0133] The initialization stage 1610 may include placing a mobile device in proximity to a person in order to monitor a body area of the person. The mobile device may include sensors such as a non-invasive optical plethysmography sensor and a non-invasive Electrocardiography sensor. The placement may include allowing a person to contact the mobile phone.

[0134] Stage 1610 may be followed by stage 1620 of obtaining multiple first detection signals from the non-invasive optical plethysmography sensor that monitors a body area of the person and obtaining multiple second detection signals from the non-invasive Electrocardiography sensor.

[0135] Stage 1620 can be executed by any of the devices illustrated above.

[0136] Stage 1620 may be followed by stages 1630 and 1640.

[0137] Stage 1630 may include processing, by a health monitoring module, the multiple first detection signals to detect first points in time that correspond to arrivals of blood pulses to the body area that is monitored by the non-invasive optical plethysmography sensor.

[0138] Stage 1630 may include at least one out of: (a) low-pass filtering the multiple first detection signals to provide multiple first filtered detection signals; (b) calculating a derivative of the first filtered detection signals and detecting the first points in time in response to values of the derivative; (c) calculating the derivative of the first filtered detection signals by applying a least squares parabolic differential filter; (d) detecting first points in time by having a value that is a predetermined fraction (or within a predetermined fraction range) of the maximal value of the maximal filtered first detection signals.

[0139] Stage 1640 may include processing the multiple second detection signals to detect second points in time that correspond to peaks of QRS complexes.

[0140] Stages 1630 and 1640 may be followed by stage 1650 of calculating at least one blood pressure indicator in response to at least one timing difference (PTT) between at least a single pair of first and second points in time that are associated with a same heartbeat.

[0141] Stage 1650 may include at least one of the following stages: (a) calculating a blood pressure indicator per each PTT, (b) calculating a blood pressure indicator per multiple PTTs, (c) comparing different blood pressure indicators to provide an indication of a trend of changes in a blood pressure of the person, (c) calculating the blood pressure indicator in response to at least one correlation coefficient that correlates between one or more PTTs and the one or more PTTs.

[0142] Stage 1650 may be followed by stage 1660 of displaying, storing or communicating the at least one blood pressure indicator.

[0143] FIG. 16 illustrates method 1700 according to an embodiment of the invention.

[0144] Method 1700 can be executed randomly, in a pseudo-random manner, in a periodic manner (every few hours, every few days, every few weeks . . .), in response to events (such as an occurrence of unacceptable measurement errors) and the like.

[0145] More frequent calibration sequences may be followed by more accurate results.

[0146] Method 1700 may start by stages 1710 and 1720. Stages 1710 and 1720 are executed during a calibration period. According to an embodiment of the invention stages 1710 and 1720 may be repeated for multiple calibration periods.

[0147] Stage 1710 may include obtaining blood pressure measurement results by a blood pressure monitor such as blood pressure monitor that has a cuff.

[0148] Stage 1720 may include obtaining first and second detection signals obtained, during the multiple calibration periods, from a non-invasive optical plethysmography sensor and from a non-invasive Electrocardiography sensor. These non-invasive sensors may belong to mobile device that differs from the blood pressure monitor.

[0149] Stages 1710 and 1720 may be followed by stage 1730 of processing the blood pressure measurement results and the first and second detection signals to determine a relationship between Pulse Transient Time (PTT) values and blood pressure values. The PTTs are calculated by processing the first and second detection signals while the blood pressure values are taken from the blood pressure measurement results.

[0150] The relationship can be represented by at least one correlation coefficient, by a mapping function and the like. The mapping function can be liner or non-linear.

[0151] Non-limiting examples of the mapping function include:

[0152] 1. $\text{Blood pressure} = -A \cdot \ln(\text{PTT}) + B + A \cdot \ln(L)$; wherein \ln represent the logarithmic operation, A and B are correlation coefficients, and L is a length of a pressure wave path. The blood pressure can be the systolic blood pressure, the diastolic blood pressure, a mean blood pressure and the like.

[0153] 2. $\text{DBP} = \text{SBP} \cdot \frac{1}{3} + 2 \cdot \text{DBP} \cdot \frac{1}{3} + C \cdot \ln(\frac{\text{PTT}_{\text{tw}}}{\text{PTT}_{\text{wO}}}) - ((\text{SBP} - \text{DBP}) / 3) \cdot (\frac{\text{PTT}_{\text{tw}}}{\text{PTT}_{\text{wO}}}) \cdot (\frac{\text{PTT}_{\text{tw}}}{\text{PTT}_{\text{wO}}})$, wherein SBP is the systolic blood pressure, DBP is the diastolic blood pressure, SBP_0 and DBP_0 are SBP and DBP values obtained during a calibration period, PTT_{tw} is an average PTT measured in present time and PTT_{wO} is an average PTT measured in previous time.

[0154] 3. $\text{SBP} = \text{DBP} + (\text{SBP}_0 - \text{DBP}_0) \cdot (\frac{\text{PTT}_{\text{tw}}}{\text{PTT}_{\text{wO}}}) \cdot (\frac{\text{PTT}_{\text{tw}}}{\text{PTT}_{\text{wO}}})$.

[0155] 4. $\text{SBP}_{\text{PTT}} = \text{P1} \cdot \text{PWV} \cdot \exp(\text{P3} \cdot \text{PWV} + \text{P2} \cdot \text{PWV}^2 - (\text{BP}_{\text{PTT}_{\text{cal}}} - \text{BP}_{\text{cal}}))$, wherein $\text{BP}_{\text{PTT}_{\text{cal}}}$ is the calculated BP (from PTT) corresponding to the BP_{cal} measured by the reference method (cuff) at a distinct time at the beginning of the experiment. The parameters P1 - P4 were estimated by least square fitting of the function to the data of multiple persons and PWV (cm/ms) $= 0.5 \cdot \text{height}(\text{cm}) / \text{PTT}$.

[0156] 5. $SBP = P_B - (2/\alpha * T_B) * \Delta T$, where ΔT is the change in the PTT over time, T_B is the value of the PTT corresponding to the pressure P_B .

[0157] 6. $BP = aPTT + b$.

[0158] 7. $SBP = a1 \cdot PAT + b1 \cdot HR + c1$.

[0159] 8. $DBP = a2 \cdot PAT + b2 \cdot HR + c2$.

[0160] Wherein PAT is a pulse arrival time. PAT equals PTT+aorta valve opening delay, HR is a heart rate, correlation coefficients a1, a2, b1, b2, c1 and c2 can be calculated by adaptive filtering on base of minimum least squares criterion.

[0161] It is noted that with an acute rise in blood pressure (BP), vascular tone increases—the arterial wall becomes stiffer causing the PTT to shorten. In contrast, when the BP falls there is relaxation of vascular tone and the PTT increases. In addition, arteries stiffen with age, arteriosclerosis and diabetes mellitus, also resulting in a shortening of the PTT. Thus—without a mapping function that takes such parameters into account it is hard to provide an accurate measurement of the blood pressure itself.

[0162] Stages 1710 and 1720 may be repeated multiple times, over multiple calibration periods and stage 1730 may include (a) stage 1731 of calculating, multiple PTT related values, one PTT related value per calibration period; and (b) stage 1732 of calculating the at least one correlation coefficient by applying a linear regression process on the multiple PTT related values and on the multiple blood pressure measurement results.

[0163] A PTT related value can be the PTT itself, or can be an outcome of processing one or more PTTs obtained during one or more calibration values.

[0164] For example, a single PTT related value can be calculated (during stage 1730) per a single calibration period by a process that may include: (a) selecting (stage 1733) two or more PTTs out of multiple PTTs related to the calibration period, and (b) applying (stage 1734) a function such as an averaging function on the selected two or more PTTs to provide the single PTT related value. The selecting may include clustering the PTTs values, and selecting the two or more PTT values that form a cluster that includes PTT values that are relatively close to each other.

[0165] The selecting may include ignoring PTTs if their values is outside an allowable range of timing difference values.

[0166] FIG. 17 illustrates method 1800 according to an embodiment of the invention.

[0167] Method 1800 may start by initialization stage 1810 that may resemble stage 1610 of method 1600.

[0168] Stage 1810 may be followed by stage 1820 of obtaining multiple first detection signals from a non-invasive optical plethysmography sensor that monitors a body area of the person and obtaining multiple second detection signals from a non-invasive Electrocardiography sensor. The non-invasive optical plethysmography sensor and the non-invasive Electrocardiography sensor belong to a mobile device.

[0169] Stage 1810 may include calculating the mapping function based upon blood pressure measurement results obtained by a blood pressure monitor that differs from the mobile device. Stage 1810 may include any of the stages of method 1700.

[0170] The mapping function can be a linear or non-linear mapping function.

[0171] Stage 1820 may be followed by stage 1830 of calculating, by the mobile device, multiple pulse transfer times in response to the first and second detection signals.

[0172] Stage 1830 may be followed by stage 1840 of applying a mapping function on at least one pulse transfer time to provide at least one value of the blood pressure of the person.

[0173] Stage 1820 may include processing the multiple first detection signals to detect first points in time that correspond to arrivals of blood pulses to the body area that is monitored by the non-invasive optical plethysmography sensor; processing the multiple second detection signals to detect second points in time that correspond to peaks of QRS complexes; and calculating at least one timing difference between at least a single pair of first and second points in time that are associated with a same heartbeat.

[0174] Stage 1820 may include processing the first and second detection signals to find points in time that differ from the first points and the second points in time.

[0175] There can be provided a non-transitory computer readable medium that can store instructions for executing any of the mentioned above methods or any combination of any two or more stages of any of the mentioned above methods.

[0176] The invention may also be implemented in a computer program for running on a computer system, at least including code portions for performing steps of a method according to the invention when run on a programmable apparatus, such as a computer system or enabling a programmable apparatus to perform functions of a device or system according to the invention.

[0177] A computer program is a list of instructions such as a particular application program and/or an operating system. The computer program may for instance include one or more of: a subroutine, a function, a procedure, an object method, an object implementation, an executable application, an applet, a servlet, a source code, an object code, a shared library/dynamic load library and/or other sequence of instructions designed for execution on a computer system.

[0178] The computer program may be stored internally on a non-transitory computer readable medium. All or some of the computer program may be provided on computer readable media permanently, removably or remotely coupled to an information processing system. The computer readable media may include, for example and without limitation, any number of the following: magnetic storage media including disk and tape storage media; optical storage media such as compact disk media (e.g., CD-ROM, CD-R, etc.) and digital video disk storage media; nonvolatile memory storage media including semiconductor-based memory units such as FLASH memory, EEPROM, EPROM, ROM; ferromagnetic digital memories; MRAM; volatile storage media including registers, buffers or caches, main memory, RAM, etc.

[0179] A computer process typically includes an executing (running) program or portion of a program, current program values and state information, and the resources used by the operating system to manage the execution of the process. An operating system (OS) is the software that manages the sharing of the resources of a computer and provides programmers with an interface used to access those resources. An operating system processes system data and user input, and responds by allocating and managing tasks and internal system resources as a service to users and programs of the system.

[0180] The computer system may for instance include at least one processing unit, associated memory and a number of input/output (I/O) devices. When executing the computer

program, the computer system processes information according to the computer program and produces resultant output information via I/O devices.

[0181] In the foregoing specification, the invention has been described with reference to specific examples of embodiments of the invention. It will, however, be evident that various modifications and changes may be made therein without departing from the broader spirit and scope of the invention as set forth in the appended claims.

[0182] Moreover, the terms “front,” “back,” “top,” “bottom,” “over,” “under” and the like in the description and in the claims, if any, are used for descriptive purposes and not necessarily for describing permanent relative positions. It is understood that the terms so used are interchangeable under appropriate circumstances such that the embodiments of the invention described herein are, for example, capable of operation in other orientations than those illustrated or otherwise described herein.

[0183] The connections as discussed herein may be any type of connection suitable to transfer signals from or to the respective nodes, units or devices, for example via intermediate devices. Accordingly, unless implied or stated otherwise, the connections may for example be direct connections or indirect connections. The connections may be illustrated or described in reference to being a single connection, a plurality of connections, unidirectional connections, or bidirectional connections. However, different embodiments may vary the implementation of the connections. For example, separate unidirectional connections may be used rather than bidirectional connections and vice versa. Also, plurality of connections may be replaced with a single connection that transfers multiple signals serially or in a time multiplexed manner. Likewise, single connections carrying multiple signals may be separated out into various different connections carrying subsets of these signals. Therefore, many options exist for transferring signals.

[0184] Although specific conductivity types or polarity of potentials have been described in the examples, it will be appreciated that conductivity types and polarities of potentials may be reversed.

[0185] Each signal described herein may be designed as positive or negative logic. In the case of a negative logic signal, the signal is active low where the logically true state corresponds to a logic level zero. In the case of a positive logic signal, the signal is active high where the logically true state corresponds to a logic level one. Note that any of the signals described herein may be designed as either negative or positive logic signals. Therefore, in alternate embodiments, those signals described as positive logic signals may be implemented as negative logic signals, and those signals described as negative logic signals may be implemented as positive logic signals.

[0186] Furthermore, the terms “assert” or “set” and “negate” (or “deassert” or “clear”) are used herein when referring to the rendering of a signal, status bit, or similar apparatus into its logically true or logically false state, respectively. If the logically true state is a logic level one, the logically false state is a logic level zero. And if the logically true state is a logic level zero, the logically false state is a logic level one.

[0187] Those skilled in the art will recognize that the boundaries between logic blocks are merely illustrative and that alternative embodiments may merge logic blocks or circuit elements or impose an alternate decomposition of func-

tionality upon various logic blocks or circuit elements. Thus, it is to be understood that the architectures depicted herein are merely exemplary, and that in fact many other architectures may be implemented which achieve the same functionality.

[0188] Any arrangement of components to achieve the same functionality is effectively “associated” such that the desired functionality is achieved. Hence, any two components herein combined to achieve a particular functionality may be seen as “associated with” each other such that the desired functionality is achieved, irrespective of architectures or intermedial components. Likewise, any two components so associated can also be viewed as being “operably connected,” or “operably coupled,” to each other to achieve the desired functionality.

[0189] Furthermore, those skilled in the art will recognize that boundaries between the above described operations merely illustrative. The multiple operations may be combined into a single operation, a single operation may be distributed into additional operations and operations may be executed at least partially overlapping in time. Moreover, alternative embodiments may include multiple instances of a particular operation, and the order of operations may be altered in various other embodiments.

[0190] Also for example, in one embodiment, the illustrated examples may be implemented as circuitry located on a single integrated circuit or within a same device. Alternatively, the examples may be implemented as any number of separate integrated circuits or separate devices interconnected with each other in a suitable manner.

[0191] Also for example, the examples, or portions thereof, may be implemented as soft or code representations of physical circuitry or of logical representations convertible into physical circuitry, such as in a hardware description language of any appropriate type.

[0192] Also, the invention is not limited to physical devices or units implemented in non-programmable hardware but can also be applied in programmable devices or units able to perform the desired device functions by operating in accordance with suitable program code, such as mainframes, minicomputers, servers, workstations, personal computers, notepads, personal digital assistants, electronic games, automotive and other embedded systems, cell phones and various other wireless devices, commonly denoted in this application as ‘computer systems’.

[0193] However, other modifications, variations and alternatives are also possible. The specifications and drawings are, accordingly, to be regarded in an illustrative rather than in a restrictive sense.

[0194] In the claims, any reference signs placed between parentheses shall not be construed as limiting the claim. The word ‘comprising’ does not exclude the presence of other elements or steps than those listed in a claim. Furthermore, the terms “a” or “an,” as used herein, are defined as one or more than one. Also, the use of introductory phrases such as “at least one” and “one or more” in the claims should not be construed to imply that the introduction of another claim element by the indefinite articles “a” or “an” limits any particular claim containing such introduced claim element to inventions containing only one such element, even when the same claim includes the introductory phrases “one or more” or “at least one” and indefinite articles such as “a” or “an.” The same holds true for the use of definite articles. Unless stated otherwise, terms such as “first” and “second” are used to arbitrarily distinguish between the elements such terms

describe. Thus, these terms are not necessarily intended to indicate temporal or other prioritization of such elements. The mere fact that certain measures are recited in mutually different claims does not indicate that a combination of these measures cannot be used to advantage.

[0195] While certain features of the invention have been illustrated and described herein, many modifications, substitutions, changes, and equivalents will now occur to those of ordinary skill in the art. It is, therefore, to be understood that the appended claims are intended to cover all such modifications and changes as fall within the true spirit of the invention.

1. A method for providing a blood pressure indicator of a person, the method comprises:

obtaining multiple first detection signals from a non-invasive optical plethysmography sensor that monitors a body area of the person;

obtaining multiple second detection signals from a non-invasive Electrocardiography sensor;

processing, by a health monitoring module, the multiple first detection signals to detect first points in time that correspond to arrivals of blood pulses to the body area that is monitored by the non-invasive optical plethysmography sensor;

processing the multiple second detection signals to detect second points in time that correspond to peaks of QRS complexes; and

calculating at least one blood pressure indicator in response to at least one timing difference between at least a single pair of first and second points in time that are associated with a same heartbeat.

2. The method according to claim 1, wherein the processing of the multiple first detection signals comprises low-pass filtering the multiple first detection signals to provide multiple first filtered detection signals.

3. The method according to claim 2, further comprising calculating a derivative of the first filtered detection signals and detecting the first points in time in response to values of the derivative.

4. The method according to claim 3, comprising calculating the derivative of the first filtered detection signals by applying a least squares parabolic differential filter.

5. The method according to claim 1, comprising comparing different blood pressure indicators to provide an indication of a trend of changes in a blood pressure of the person.

6. The method according to claim 1, comprising calculating a blood pressure indicator that is indicative of a value of a blood pressure of the person in response to (a) at least one correlation coefficient that correlates between a timing difference between a pair of first and second points in time that are associated with the same heartbeat; and (b) a value of the timing difference.

7. The method according to claim 6, comprising calculating the at least one correlation coefficient in response to (a) blood pressure measurement results obtained by a blood pressure monitor during multiple calibration periods and in response to (b) first and second detection signals obtained, during the multiple calibration periods, from the non-invasive optical plethysmography sensor and the non-invasive Electrocardiography sensor.

8. The method according to claim 7, comprising calculating, multiple timing difference value, one timing difference value per calibration period; and calculating the at least one correlation coefficient by applying a linear regression process

on the multiple timing difference values and on the multiple blood pressure measurement results.

9. The method according to claim 7, comprising calculating a timing difference value for a calibration period by averaging at least two timing differences between at least two pairs of first and second points in time, each pair of first and second points in time are associated with a same heartbeat.

10. The method according to claim 7, comprising calculating a timing difference value for a calibration period by ignoring a timing difference between a pair of first and second points in time that are associated with a same heartbeat if the timing difference value is outside an allowable range of timing difference values.

11. The method according to claim 7, comprising calculating a timing difference value for a calibration period by ignoring a timing difference between a pair of first and second points in time that are associated with a same heartbeat if the timing difference value differs by at least a predetermined amount from values of timing differences that belong to cluster that comprises a majority of timing differences obtained during the measurement period.

12. The method according to claim 1, wherein the non-invasive Electrocardiography sensor comprises an electrode, the non-invasive optical plethysmography sensor comprises an illumination element and a light detector; and wherein the electrode, the illumination element and the light detector form a hybrid sensor.

13. The method according to claim 8, wherein the electrode defines a light illumination aperture and a light collection aperture; wherein the illumination element is arranged to direct light towards the user through the light illumination aperture; and

wherein the light detector is arranged to detect light from the user that passes through the light collection aperture.

14. A mobile device that comprises:

a non-invasive optical plethysmography sensor that monitors a body area of the person and is arranged to obtain multiple first detection signals;

a non-invasive Electrocardiography sensor that is arranged to obtain multiple second detection signals; and

a health monitoring module that is arranged to:

process the multiple first detection signals to detect first points in time that correspond to arrivals of blood pulses to the body area that is monitored by the non-invasive optical plethysmography sensor;

process the multiple second detection signals to detect second points in time that correspond to peaks of QRS complexes; and

calculate at least one blood pressure indicator in response to at least one timing difference between at least a single pair of first and second points in time that are associated with a same heartbeat.

15. A non-transitory computer readable medium that stores instructions that cause a computerized system to:

obtain multiple first detection signals from a non-invasive optical plethysmography sensor that monitors a body area of the person;

obtain multiple second detection signals from a non-invasive Electrocardiography sensor;

process the multiple first detection signals to detect first points in time that correspond to arrivals of blood pulses to the body area that is monitored by the non-invasive optical plethysmography sensor;

process the multiple second detection signals to detect second points in time that correspond to peaks of QRS complexes; and

calculate at least one blood pressure indicator in response to at least one timing difference between at least a single pair of first and second points in time that are associated with a same heartbeat.

16. A method for calculating a blood pressure of a person, the method comprises:

obtaining multiple first detection signals from a non-invasive optical plethysmography sensor that monitors a body area of the person;

obtaining multiple second detection signals from a non-invasive Electrocardiography sensor; wherein the non-invasive optical plethysmography sensor and the non-invasive Electrocardiography sensor belong to a mobile device;

calculating, by the mobile device, multiple pulse transfer times in response to the first and second detection signals;

applying a mapping function on at least one pulse transfer time to provide at least one value of the blood pressure of the person.

17. The method according to claim **16**, comprising calculating the mapping function based upon blood pressure measurement results obtained by a blood pressure monitor that differs from the mobile device.

18. The method according to claim **16**, comprising calculating the mapping function in response to (a) blood pressure measurement results obtained, during calibration period, by a blood pressure monitor that differs from the mobile device; and (b) pulse transfer times calculated in response to first and second detection signals obtained during the calibration period.

19. The method according to claim **16**, comprising processing the multiple first detection signals to detect first points in time that correspond to arrivals of blood pulses to the body area that is monitored by the non-invasive optical plethysmography sensor; processing the multiple second detection signals to detect second points in time that correspond to peaks of QRS complexes; and calculating at least one timing difference between at least a single pair of first and second points in time that are associated with a same heartbeat.

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专利名称(译)	使用手持设备估计血压		
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摘要(译)

一种用于提供人的血压指示器的方法，该方法包括：从监测人的身体区域的非侵入性光学体积描记传感器获得多个第一检测信号；从非侵入性心电图传感器获得多个第二检测信号；所述健康监测模块处理所述多个第一检测信号，以检测对应于由所述非侵入性光学体积描记传感器监测的到所述身体区域的血液脉冲到达的第一时间点；处理多个第二检测信号以检测对应于QRS波群峰值的第二时间点；并且响应于与同一心跳相关联的至少一对第一和第二时间点之间的至少一个定时差来计算至少一个血压指示符。

