Research Article

Trichy, India

Normalized Power are used in the Diagnosis of Insomnia Medical Sleep Syndrome through EMG1-EMG2 Channel

Heyat BB^{1*}, Akhtar F², Mehdi A³, Azad S⁴, Hayat AB⁵, Azad S⁶ and Azad S⁷

¹Department of ECE, Glocal University, Saharanpur India

 $^2 \mbox{Department}$ of CSE, Jamia Hamdard, New Delhi, India $^3 \mbox{Department}$ of Electronics and Communication, NIT

⁴Department of Electronics, Integral University, Lucknow, India

⁵Department of Medicine, Medical College, India

⁶AKT College and Charitable Hospital, India

Department of Nursing, HIN, Lucknow, India

*Corresponding author: Md Belal Bin Heyat, Department of ECE, Glocal University, Lucknow, UP, India

Received: January 17, 2017; Accepted: February 10,

2017; Published: February 13, 2017

EEG: Electroencephalogram; INS: Insomnia; N: Normal; N/A: Channel not available; PSD: Power Spectral density; EMG: Electromyogram

Introduction

Abbreviations

Insomnia

Slumber disease in which about inability to stay insensible as long as preferred. A person misery from a sleeplessness wake up recurrently during the darkness and feels tired with powerlessness to distillate. It's mutual problem in overall population in current time. It is likewise collected with pain & exhaustion. The possessions of wakefulness can also include short-tempered mood & increased probability of accidents while hired with machine. Insomnia is not an indication of other diseases, but it is inferior to other health situations [1-5].

Types of insomnia

- 1. According to Sleep Pattern- Two types of sleep pattern insomnia:
- a) Sleep-maintenance Insomnia- The sleep-maintenance wakefulness sufferer awakens frequently throughout the darkness & sleep is disjointed.
- b) Sleep-onset Insomnia- Sleep-onset sleeplessness sufferer takes a long passe to get to sleep then can sleep through the obscurity once sleep starts.
 - 2. According to Duration- Three types of duration insomnia:
- a) Transient Insomnia- It is most wide and mutual spread form among the individuals.
- b) Chronic Insomnia- Continues for four or more week & may be due to essentially causes in the organism.

Abstract

Insomnia is a very harmful disease to the zoological species. Insomnia is a neurological and sleep disease. The diagnosis of insomnia is use in the electroencephalogram signal. Delta Wave & Theta Wave are use in the detection of insomnia sleep disorder. The all simulation is completed by MATLAB programming. The detection time both normalized power of the insomnia patient and normal patient is associated. Nine insomnia and sixteen normal patient, four electroencephalogram wave and three sleep stages successfully achieve the all research of investigation of insomnia. The normalized power are achieved by MATLAB programming i.e. normalized power are used in the recognition of insomnia

Keywords: Insomnia; Normalized power; Electroencephalogram

- c) Acute Insomnia- It has connected to stress inspirations but extended permanent than for passing insomnia [6-10].
- According to etiology- Two types of etiology insomnia:
 Table 1: Normalized Power of Insomnia Patient.

| Table 1. Norma | able 1. Normalized Fower of Insomilia Fatient. | | | | |
|----------------|--|------------|------------|--|--|
| Patient | Stage | Delta Wave | Theta Wave | | |
| INS1 | S0 | 0 | 0.23417 | | |
| INS1 | REM | 0 | 0.26232 | | |
| INS2 | S0 | 0 | 0.32262 | | |
| INS2 | REM | 0 | 0.47154 | | |
| INS3 | S0 | 0 | 0.23654 | | |
| INS3 | S1 | 0 | 0.25188 | | |
| INS3 | REM | 0 | 0.22354 | | |
| INS4 | S0 | 0 | 0.3637 | | |
| INS4 | REM | 0 | 0.46438 | | |
| INS5 | S0 | 0 | 0.43103 | | |
| INS5 | S1 | 0 | 0.42748 | | |
| INS5 | REM | 0 | 0.45064 | | |
| INS6 | S0 | 0 | 0.24692 | | |
| INS6 | S1 | 0 | 0.32362 | | |
| INS6 | REM | 0 | 0.32038 | | |
| INS7 | S0 | 0 | 0.3034 | | |
| INS7 | S1 | 0 | 0.30848 | | |
| INS7 | REM | 0 | 0.48365 | | |
| INS8 | S0 | 0 | 0.31856 | | |
| INS8 | REM | 0 | 0.48128 | | |
| INS9 | S0 | 0 | 0.33279 | | |
| INS9 | S1 | 0 | 0.34105 | | |
| INS9 | REM | 0 | 0.36049 | | |

Heyat BB Austin Publishing Group

Table 2: Normalized Power of Normal Patient.

| Patient | Stage | Delta Wave | Theta Wave |
|---------|-------|------------|----------------|
| N1 | S0 | 0 | 0.27951 |
| N2 | S0 | 0 | 0.31279 |
| N3 | S0 | 0 | 0.29706 |
| N4 | S0 | N.A | N.A |
| N5 | S0 | 0 | 0.29706 |
| N6 | S0 | 0 | 0.32383 |
| N7 | S0 | 0 | 0.34696 |
| N8 | S0 | N.A | N.A |
| N9 | S0 | 0 | 0.23212 |
| N10 | S0 | 0 | 0.35355 |
| N11 | S0 | 0 | 0.2684 |
| N12 | S0 | N.A | N.A |
| N13 | S0 | N.A | N.A |
| N14 | S0 | N.A | N.A |
| N15 | S0 | N.A | N.A |
| N16 | S0 | N.A | N.A |
| N1 | S1 | 0 | 0.27469 |
| N2 | S1 | 0 | 0.38684 |
| N3 | S1 | 0 | 0.31338 |
| N4 | S1 | N.A | N.A |
| N5 | S1 | 0 | 0.31384 |
| N6 | S1 | N.A | N.A |
| N7 | S1 | N.A | N.A |
| N8 | S1 | N.A | N.A |
| N9 | S1 | N.A | N.A |
| N10 | S1 | N.A | N.A |
| N11 | S1 | 0 | 0.31897 |
| N12 | S1 | N.A | N.A |
| N13 | S1 | N.A | N.A |
| N14 | S1 | N.A | N.A |
| N15 | S1 | N.A | N.A |
| N16 | S1 | 0 | 0.18151 |
| N1 | REM | 0 | 0.39655 |
| N2 | REM | 0 | 0.36229 |
| N3 | REM | 0 | 0.35896 |
| N4 | REM | N.A | N.A |
| N5 | REM | 0 | 0.37114 |
| N6 | REM | 0 | 0.35398 |
| N7 | REM | 0 | 0.37197 |
| N8 | REM | N.A | N.A |
| N9 | REM | 0 | 0.32951 |
| N10 | REM | 0 | 0.35682 |
| N11 | REM | 0 | 0.38049 |
| N12 | REM | N.A | 0.36049 N.A |
| N13 | REM | N.A N.A | N.A N.A |
| | | N.A N.A | N.A N.A |
| N14 | REM | | |
| N15 | REM | N.A | N.A |

Table 3: Normalized power of the theta wave of normal patient and insomnia patient for EMG1-EMG2 channel and stage S1.

| Stage S0 | Normal 1 | Normal 11 | Insomnia I2 | Insomnia 4 |
|-------------|-------------------------|-----------|--------------------------|------------|
| Theta Wave | 0.27951 | 0.2684 | 0.32262 | 0.3637 |
| Observation | Normalized Power is Low | | Normalized Power is High | |

Table 4: Normalized power of the theta wave of normal patient and insomnia patient for EMG1-EMG2 channel and stage S1.

| Stage S1 | Normal 3 | Normal 5 | Insomnia 5 | Insomnia 9 |
|-------------|-------------------------|----------|------------|------------------|
| Theta Wave | 0.31338 | 0.31384 | 0.42748 | 0.34105 |
| Observation | Normalized Power is Low | | | d Power is gh |

Table 5: Normalized power of the theta wave of normal patient and insomnia patient for EMG1-EMG2 channel and stage REM.

| Stage REM | Normal 6 | Normal 10 | Insomnia 2 | Insomnia 4 |
|-------------|-------------------------|-----------|--------------------------|------------|
| Theta Wave | 0.35398 | 0.35682 | 0.47154 | 0.46438 |
| Observation | Normalized Power is Low | | Normalized Power is High | |

- a) Primary Insomnia- Primary insomnia has no notorious pain, depression, noise at darkness causes is establish.
- b) Secondary Insomnia- This is when the victim has sleep difficulties because of approximately else such as health condition like asthma, cancer, arthritis being used like alcohol [11-15].

Methods

Datasheet of insomnia & normal patient

The total numbers of 25 patients are use in the research work, sixteen normal (nine female and seven male) and nine insomnia patients (4 Male and 5 Female) sleep disorder [15-21].

Examination of electroencephalogram signal

Step 1: Apply electroencephalogram signal to the insomnia patient's data of one minute.

Step 2: Extracted the EMG1-EMG2 signal.

Step 3: Apply low pass filter i.e. filtering the electroencephalogram signal. The frequency of the signal is used in 25Hz.

Step 4: Apply Hamming window to the electroencephalogram signal.

Step 5: Apply Power Spectral Density, calculated by Welch Method

Step 6: Finally gain the Normalized Power of electroence phalogram signals of sleep stage S0, S1 & REM.

Results

The Normalized power of Insomnia Patient is gained by the MATLAB coding, the stage S0, S1 and REM stage are used. The two wave of electroencephalogram delta and theta wave are used because the reduction of noise. The Delta value of all stages is zero and theta value is different, it has shown in (Table 1, 2).

On future research data time is less i.e. 30sec are used in the recognition of Insomnia.

Competing Interests- Md Belal Bin Heyat is a researcher and author asserts that they have no competing interests.

Heyat BB Austin Publishing Group

Conclusion

Table 3-5 shown that normalized power of different stages of normal patient is low and insomnia patient is high.

References

- Srivastava, Siddiqui, Rahman, Saeed, Heyat. Carbon Nano tubes & Its Application In Medical Field & Communication. 2016; 5: 170-173.
- 2. Heyat, Shaguftah, Hasan YM, Maroof Siddiqu. EEG signals and wireless transfer of EEG Signals. IJARCCE. 2015; 4: 502-504.
- Hasan YM, Heyat, Mohd Maroof Siddiqui, Shafan Azad, Faijan Akhtar. An Overview of Sleep and Stages of Sleep. IJARCCE. 2015; 4: 505-507.
- Mehdi, Heyat, Akhtar, Ammar Bin Heyat, Tanya Gupta. Cure of Epilepsy by Different System of Medicine. IJTRS. 2016; 1: 244-247.
- 5. Heyat, Akhtar, Azad S. A Review on use of Sunlight in Human Life. IJTSRD. 2016; 1: 22-24.
- Syed Rafi Ahmed, Shahnawaz, Heyat, Akhtar F, Tauheed. Superiority Control of Concrete. 3rd International Seminar on Sources of Planet Energy, Environmental & Disaster Science: Challenges and Strategies (SPEEDS-2016). School of Management Sciences. 2016.
- Heyat, Akhtar F, Azad S, Shadab Azad, Shaguftah. Dual Tone Multi-Frequency Based Premises Appliance Control Switch. IJTRS. 2016; 1: 215-218.
- Khan, Shahabaz Ahmad. "Industrial Tank Temperature, Pressure and Humidity Controller Using Microcontroller." National Conference on Emerging Trends in Non Conventional Energy Resources. Integral University. 2016.
- Heyat. Power Spectral Density are used in the Investigation of insomnia neurological disorder. XL PRE-CONGRESS Symposium. Indian Academy of Social Sciences [ISSA]. 2016.
- Heyat, Khan SA, Zakariya, Akhtar F, Azad S. Microcontroller Using Industrial Tank. Onyx Journal of Multi- Disciplines. 2016; 1: 5-8.

- 11. Heyat. An Overview of Renewable Energy. IJTRS. 2016; 1: 119-121.
- Heyat, Faijan Akhtar, Siddiqui, Shafan Azad. "An Overview of Dalk Therapy and treatment of Insomnia by Dalk Therapy." National Seminar on Research Methodology in Ilaj-Bit-Tadbeer. State Takmeel-ut-Tib-College & Hospital, Lucknow. 2015.
- Heyat, Siddiqui. "Recording of EEG, ECG, EMG Signal." IJARCSSE. 2015;
 813-815.
- Farooq, Touseef Rahman, Heyat, Siddiqui, Akhtar. "An Overview of NFLE." IJIREEICE. 2016; 4: 209-211.
- 15. Rahman, Farook, Heyat, Siddiqui. "An Overview of Narcolepsy." IARJSET. 2016: 3: 85-87
- Heyat, Belal Bin, Akhtar F, Shadab Azad. "Comparative Analysis of Original Wave & Filtered Wave of EEG signal Used in the Prognostic of Bruxism medical Sleep syndrome." IJTSRD. 2016; 1: 51-53.
- 17. Heyat. Hamming Window are used in the Prognostic of Insomnia Medical Sleep syndrome. International Seminar on Present Scenario & Future Prospectives of Research in Engineering & Sciences (ISPSFPRES-17). Integral University. 2017.
- 18. Heyat. Insomnia: Medical Sleep Disorder & Dignosis. 2016.
- Shafan Azad, Hayat, Mehdi S, Akhtar F. A Review on Neurological disorder Epilepsy affected in the Human body. IAEMR. 2016.
- 20. Siddiqui, Mohd Maroof, Geetika Srivastava, Syed Hasan Saeed. Detection of Rapid Eye Movement Behaviour Sleep Disorder using Time and Frequency Analysis of EEG Signal Applied on C4-A1 Channel Communication and Power Engineering. Berlin, Boston: De Gruyter. 2016; 310-326.
- Siddiqui MM, Srivastava, Saeed. Diagnosis of insomnia sleep disorder using short time frequency analysis of PSD approach applied on EEG signal using channel ROC-LOC. Sleep Science. 2016.
- 22. The CAP Sleep Database. 2001.