

The Design of ECG-on-Chip

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Outlines

- Personalized healthcare.
- Why Electrocardiogram(ECG)-on-Chip?
- Low power techniques for wearable biomedical devices
- Design examples
- Conclusion

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Wireless Healthcare

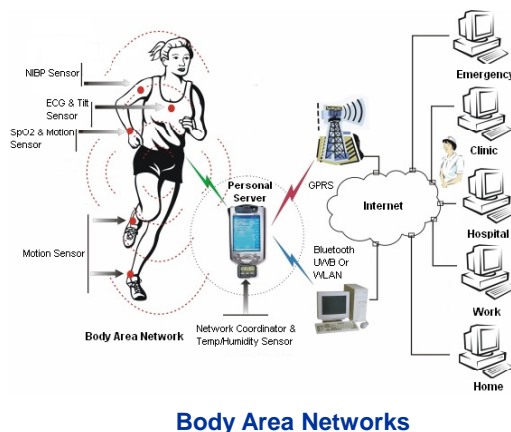
- New trends in healthcare: personalized and prevention-oriented healthcare
- Overburdened healthcare system in ageing society
- Improving productivities and cost saving for healthcare providers, patients, and payers.
- Huge market size and potential new market segment in wireless health

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Personalized Healthcare



- A latest evolution of healthcare providing healthcare-on-demand service
- Body area networks facilitate:
 - Monitoring patients with chronic disease
 - Monitoring hospital patients
 - Monitoring elderly patients at home
 - Seamless integration with home, working, and hospital environments

E. Jovanov et al., "A wireless body area network of intelligent motion sensors for computer assisted physical rehabilitation", *Journal of NeuroEngineering and Rehabilitation*, 2 (2005):6.

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Why ECG-on-Chip?

- Cardiovascular diseases are the leading cause of deaths globally
- The direct costs of heart diseases was USD 190b in USA alone¹
- Prevalence will increase with global aging population and affluence
 - Atrial fibrillation (AF), a common arrhythmia, afflicts nearly 9% of persons over 80 years old²

¹Heart Disease and Stroke Statistics, American Heart Association, 2010

²Alan S Go, et al. Prevalence of diagnosed atrial fibrillation in adults, *JAMA*, 2001.

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Idea ECG Device

- Full 12-lead measurement
- Early warning of abnormal ECG
- Wireless connection to remote doctor
- Large memory to record raw ECG data
- Long battery life: more than 7 days
- Easy to use: can be operated by anyone
- Small size, light, comfortable to wear, and waterproof

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Wearable ECG Devices: Available Products

VitalJacket (Biodevices)

- Disposable electrodes embedded in T-shirt
- Bluetooth transmission, software package provides on-line visualization



Sensium (Toumaz)

- Low-power wireless sensor interface platform
- Uses proprietary wireless link
- Limited number of input channels and low data rate (50kb/s)



Zio patch (iRhythm)

- Fully recyclable and disposable cardiac monitoring patch
- Off-line recording only, no real-time wireless transmission
- Requires manual event recording and transmission to technical operator via phone line



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What are the Gaps?

- Available multi-channel ECG recording chip
 - TI ADS1298: 0.75mW per channel
- Available commercial wireless sensors

Platform	Power(Rx/Tx)	Sleep power
TelosB	18.8/17.4 mA	0.02-426 μ A
MicaZ	18.8/17.4 mA	0.02-426 μ A
SHIMMER	40/60 mA	50-1400 μ A
IRIS	15.5/16.5 mA	20 nA
Sun SPOT	18.8/17.4 mA	0.02-426 μ A

Two key limitations:

- Size and capacity
- Lifetime

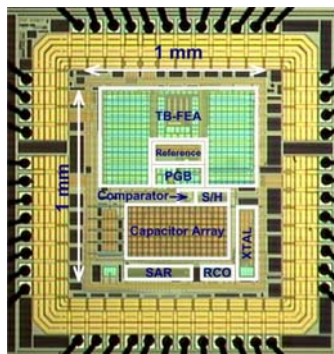


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NUS Solution: NanoWatt ECG-on-Chip

- Fully integrated and 450-900nW
- Patented low voltage on-chip tunable band-pass filter(4.5mHz-290Hz)
- Programmable gain(45/ 50 / 54 / 60 dB)
- 12-bit ADC
- On-chip oscillator



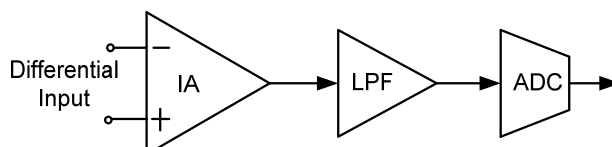
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Conventional Low Power Techniques(1)

- Conventional approach for ECG front-end
 - Instrumentation Amplifier (IA): low noise
 - Low pass filter (LPF): cut-off around 100Hz
 - High pass filter (HPF): cut-off < 100mHz
 - Programmable gain
 - Analog to Digital Conversion (ADC)



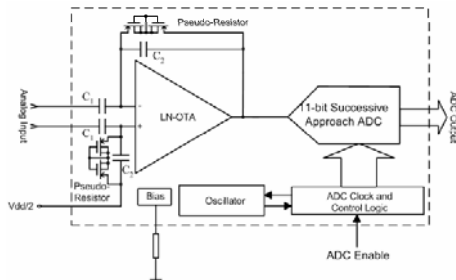
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Conventional Low Power Techniques(2)

- A 2.3μW ECG chip



Honglei Wu and Yong Ping Xu, "A 1V 2.3μW Biomedical Signal Acquisition IC", ISSCC, 2006

- Dense integration
 - Amplification
 - Band Pass Filter (BPF)
 - Sample/Hold (S/H)
 - 11-bit ADC

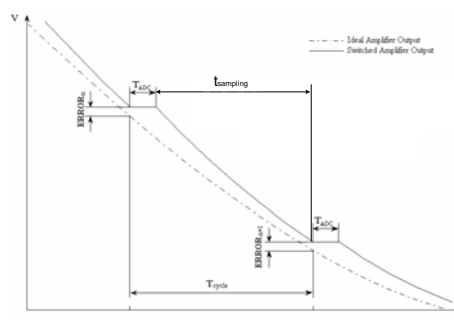
- Issue
 - Narrow bandwidth (<250Hz) and large capacitive load (128pF) require long settling time

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Conventional Low Power Techniques(3)

- Address the problem
 - Increase the sampling time, i.e. shortening hold time.
- Drawbacks
 - All conversion activities take place during TADC
 - High conversion clock frequency (20MHz)
 - High power consumption for ADC block and clock gen



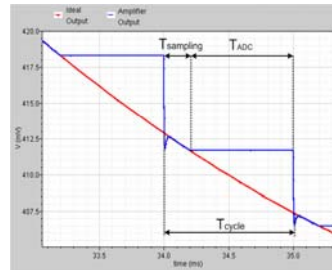
$$Err = V_o \cdot e^{-t_{sampling} / \tau} = \left. \frac{dV_{out}}{dt} \right|_{max} \cdot t_{hold} \cdot e^{-t_{sampling} / \tau}$$

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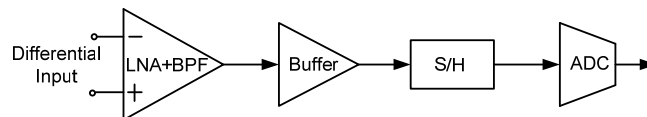
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Cross-Domain Optimization

- Optimization done in analog and digital domains
 - Inserting a unity gain buffer between LNA and S/H circuit
 - Increasing hold time leading to low clock frequency for ADC, i.e. 16kHz versus 20MHz.
- Result: 40% reduction in power



$$Err = V_o \cdot e^{-t_{sampling} / \tau} = \left| \frac{dV_{out}}{dt} \right|_{max} \cdot t_{hold} \cdot e^{-t_{sampling} / \tau}$$

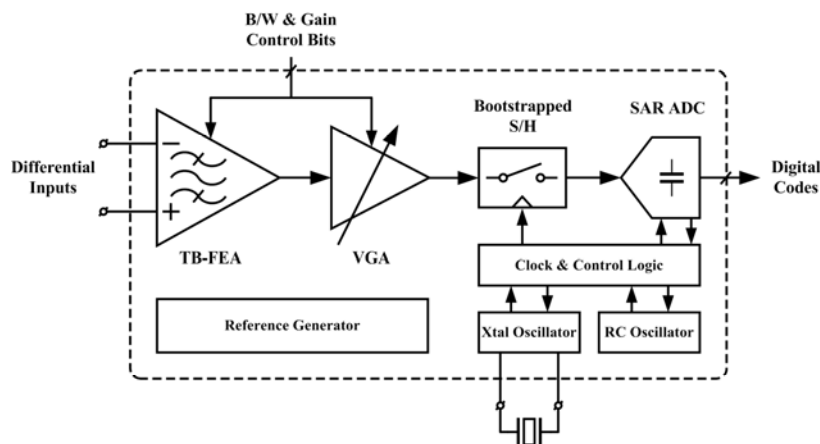


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Proposed System Architecture



XD Zou, XY Xu, LB Yao, and Y Lian, "A 1-V 450-nW fully integrated programmable biomedical sensor interface system," *IEEE Journal of Solid-State Circuits*, vol.44, No. 4, pp.1067-1077, April 2009.

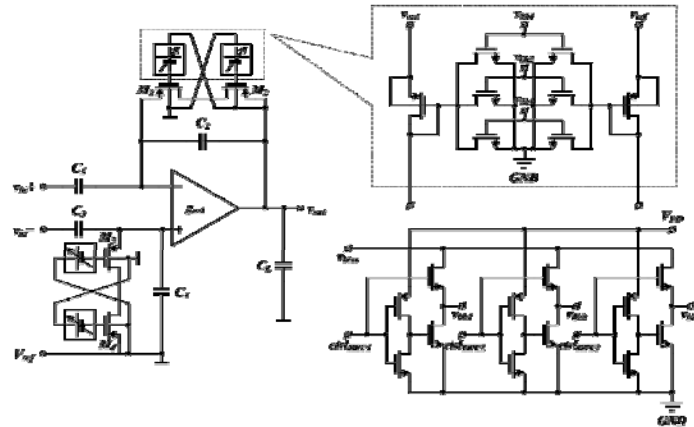
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Front-end Amplifier

- Balanced tunable active resistor structure
- 3-bit current-controlled HPF



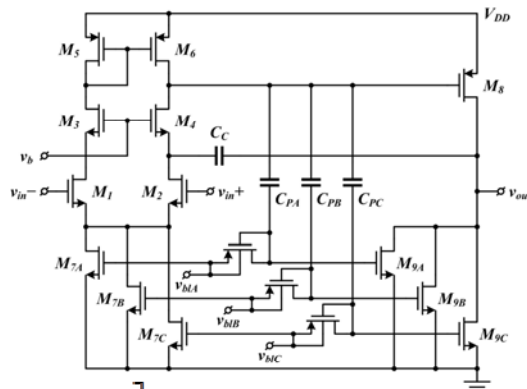
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Low-power Low-noise OTA

- Push-pull output
- M3 & M4 for freq compensation
- 3-bit current-controlled LPF
- Input-referred thermal noise



$$\overline{v_n^2} = 4kT \frac{1}{g_{m1,2}} \left[1 + \frac{2r_{O5}^2}{g_{m1,2} g_{m3,4} r_{O1}^2 R_{O1}^2} + \frac{g_{m5,6}}{g_{m1,2}} \right] + 2kT \frac{1}{(g_{m8} + g_{mD})(g_{m1,2} R_{O1})^2}$$

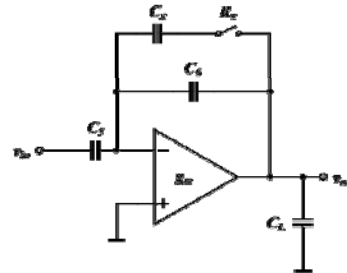
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Programmable Gain Buffer

- Over 15 kHz bandwidth for faster S/H tracking
- 2-bit gain tuning
- “Flip-over-capacitor” scheme to avoid Rx in the feedback path



$$G = \frac{C_3}{C_6} \cdot \frac{sC_x R_x + 1}{sC_x R_x + 1 + C_x/C_6}$$

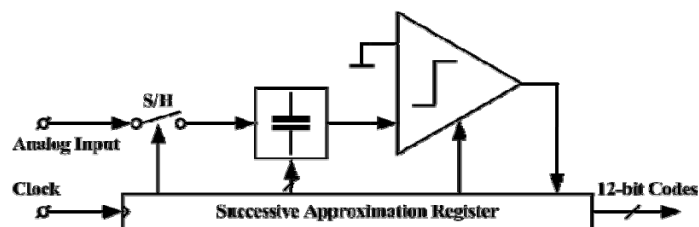
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12-bit SAR ADC

- **Passive S/H** to reserve power
- **Constant comparator reference** to avoid dynamic offset



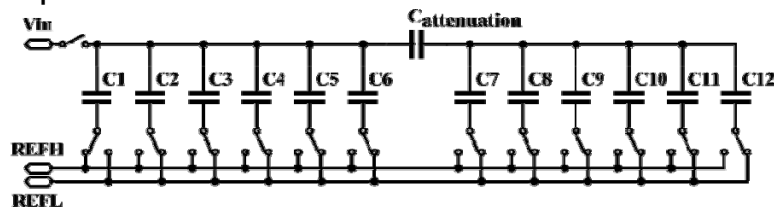
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12-bit Binary Search Array

- $C_{\text{attenuation}}$ chosen to be equal to C_{unit} to compensate the input and bottom plate parasitic capacitances



$$e_{IT} \approx \frac{V_{FS}}{2^{n+n}} \left[(p_{CMF} - 1) \left(\frac{1}{2} - \frac{1}{2^n} \right) + p_{FF} \left(1 - \frac{1}{2^n} \right) \right]$$

$$\approx 1LSB \left[\frac{1}{2} (p_{CMF} - 1) + p_{FF} \right] \approx 0.7LSB$$

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32 kHz Low-power RC Oscillator

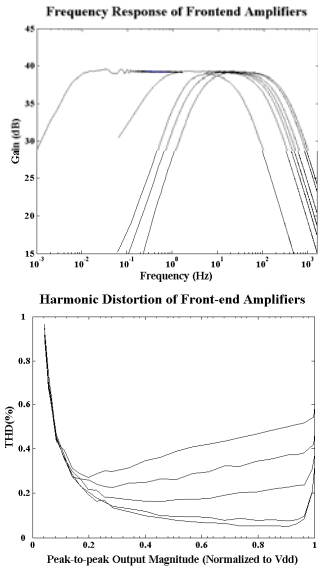
- Active-load-capacitor oscillator for further power saving
- < 60 nA operating power
- < 3 μs_{rms} measured jitter
- > 9-bit accuracy
- Sufficient for QRS detection

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Front-end Measurement Results



- High-pass cutoff freq
 - 4.5 mHz ~ 3.5 Hz
- Low-pass cutoff freq
 - 30 Hz ~ 292 Hz
- Mid-band gain
 - 45.6 / 49 / 53.5 / 60 dB
- Input-referred noise
 - 2.04 μV_{rms}
- THD
 - < 0.6% @ full swing

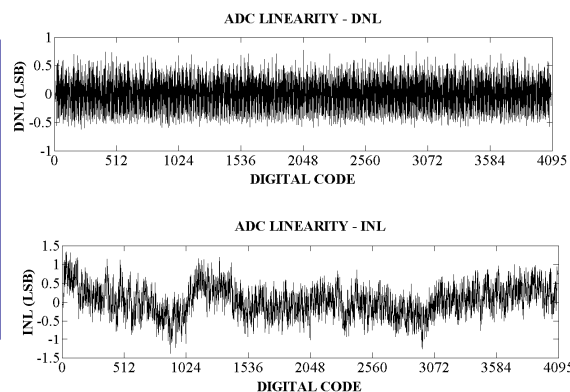
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12-bit SAR ADC

- DNL < ± 0.8 LSB
- INL < ± 1.4 LSB
- SFDR: 74 dB
- SNDR: 63 dB



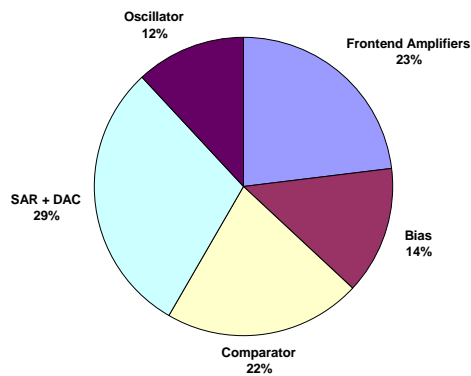
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Power Breakdown

- Low-power mode (QRS detection): 445 nW

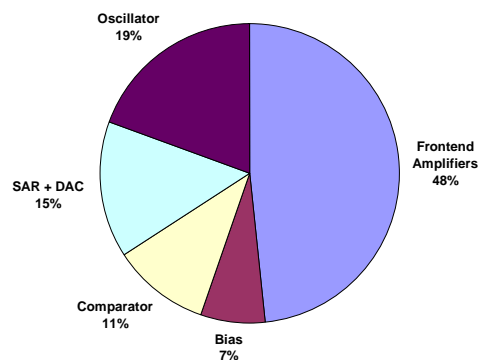


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Power Breakdown

- Max power mode (ECG recording): 895 nW



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Performance Comparison

Parameter	Design in [1]	Design in [5]	Design in [2]	This work
Supply Voltage	±1.7 V	2.8 V	1 V	1 V
Process Technology	1.5 μm CMOS	0.5 μm CMOS	0.35 μm CMOS	0.35 μm CMOS
Current (TB-FEA)	8 μA	743 nA	330 nA	337 nA
Mid-band Gain	39.3 / 45.6 dB	40.9 dB	40.2 dB	45.6 / 49 / 53.5 / 60 dB
-3 dB Bandwidth	0.015 Hz ~ 4 kHz (Tunable)	0.392 ~ 295 Hz	0.003 ~ 245 Hz	4.5 mHz ~ 292 Hz (Tunable)
Input Referred Noise	3.6 μV _{rms}	1.66 μV _{rms}	2.7 μV _{rms}	2.04 μV _{rms}
Noise Efficiency Factor	4.9	3.21	3.8	2.66
Output @ 1% THD	~ 48% Full Swing	~ 29% Full Swing	~ 85% Full Swing	100% Full Swing
CMRR	N/A	66 dB	64 dB	≥ 71.2 dB
PSRR	N/A	75 dB	62 ~ 63 dB	≥ 84 dB
ADC Resolution	N/A	N/A	11-bit	12-bit
ADC Sampling Rate	N/A	N/A	1 KS/s	1 KS/s
ADC DNL	N/A	N/A	< ±1.5 LSB	< ±0.8 LSB
ADC INL	N/A	N/A	< ±2 LSB	< ±1.4 LSB
Total Power	27.2 μW (Amplifier)	2.08 μW (Amplifier)	2.3 μW	445 nW ~ 895 nW

[1] M. Yin and M. Ghovanloo, "A Low-Noise Preamplifier with Adjustable Gain and Bandwidth for Biopotential Recording Applications," *Proceedings of IEEE International Symposium on Circuits and Systems*, pp. 321-324, May 2007.

[2] W. Wattapanitch, M. Fee and R. Sarpeshkar, "An Energy-Efficient Micropower Neural Recording Amplifier," *IEEE Transactions on Biomedical Circuits and Systems*, Vol. 1, No. 2, June 2007.

[3] H. Wu, Y. P. Xu, "A 1V 2.3μW Biomedical Signal Acquisition IC," *Proceedings of the 2006 IEEE International Solid-State Circuit Conference*, Feb. 2006, 119-128.

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NUS ECG-on-Chip

- 450 nW fully integrated programmable ECG chip
- 2.3μW ECG recording with on-chip QRS detection, memory, and MCU interface
- 12-lead ECG recording chip
- 32-channel EEG recording chip (lowest power consumption < 20μW)
- Wireless ECG-on-Chip (available soon)

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Application (1): Wireless ECG Plaster

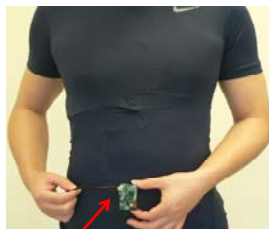


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Prototype of NUS ECG Plaster



Wearable ECG Device



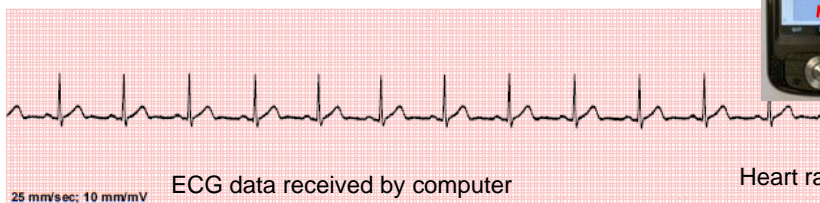
ECG data received by PDA

Recorded Lead-II ECG

Detected QRS and heart rate



Heart rate profile



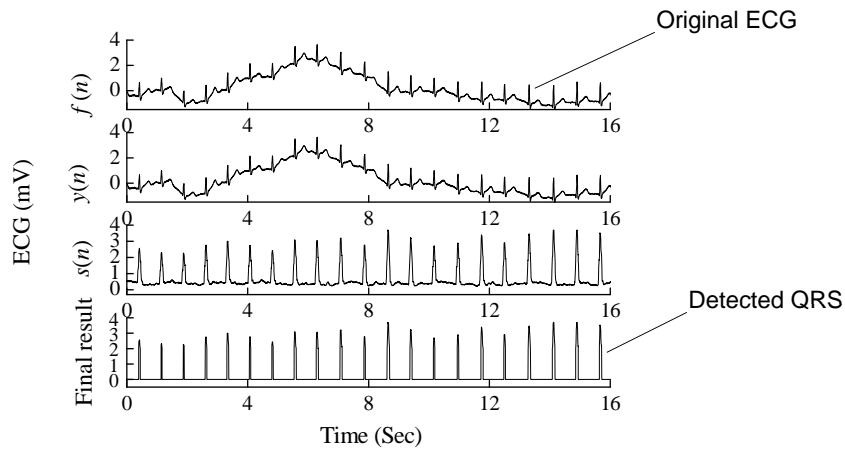
ECG data received by computer

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Detection of QRS for Exercise ECG under Running by NUS Algorithm (NanoWatt)



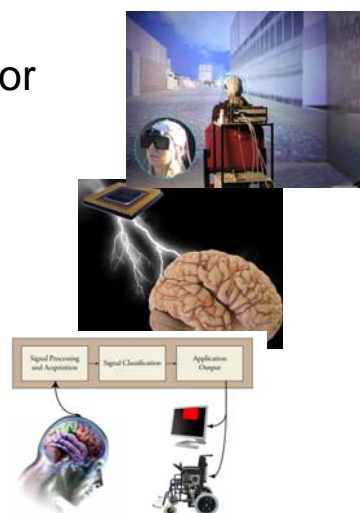
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Applications(2): Wearable EEG Sensor

- Wearable wireless EEG for seizure detection, brain-computer-interface, gaming, education, cognitive enhancement.



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Conclusions

- Wireless wearable ECG devices are essential for personalized healthcare, especially for ageing society
- Very challenging for the design of plaster based ECG device
- Cross domain optimization technique offers better power efficiency

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Acknowledgment

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Thank You

Q&A

For technology licensing and commercialization,
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