



RESEARCH ARTICLE

Comparison of Classification Algorithms on Dataset of Sensor Based Wireless Gait Analysis System

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Abstract— *Gait analysis systems have recently been promising tools to aid the clinician to diagnose as well as prognosis of diseases that disturbs the gait of the patient. In this study, dataset of a previously designed custom-made gait analysis system is used to end up with a clinical decision support system. The custom-made gait analysis system is equipped with accelerometer, gyroscope, bend sensor, and force sensors, and by means of these sensors, twenty-two gait parameters are calculated and the dataset used in this study are composed. The contribution of this paper is a comprehensive comparison of pattern recognition algorithms to differentiate hemiplegic patients from the healthy individuals. The results of this study showed the success of k-nearest neighbour algorithm with Principal Component Analysis (PCA) and without PCA by a classification performance of 80%.*

Keywords— *Gait recognition, support vector machines, k-nearest neighbour, principal component analysis, classification tree, clinical decision support system, inertial sensors*

I. INTRODUCTION

Gait analysis systems has various areas of application like human identification [1]-[2], determining the risk of fall [3], assessment of human body kinematics and kinetics [4], determination of some neurological diseases [5]-[7], tracking the improvement of the patient after orthopaedic operations [8]. These systems can be video camera systems, pressure-sensor equipped mats and treadmill systems which are all laboratory dependent. In the recent years the body-worn systems are more popular because of their laboratory independent, cost-effective, calibration free characterizations [9] –[12].

Gait analysis is a very useful technique in determining some neurological diseases affecting gait and assess the improvement during the physical rehabilitation period. The clinicians diagnose the patients based on their experiences in qualitative and subjective ways. Gait analysis provides them to make objective diagnosis and judgement about the progression of the diseases by means of quantitative methods.

In the gait analysis systems, pattern recognition is one of the major tools that make the classification, find the most dominant features needed for gait recognition. Principal component analysis is one of the most referred algorithms with SVM and k - nearest neighbour for gait recognition [17]-[20]. Also same techniques are combined with for recognition and differentiation of diseases. The success of SVM with fuzzy clustering for the abnormal gait classification is reported in [24]. As being used on a gait dataset of a video camera based gait analysis system, the promising classification performance of combination of PCA and statistical pattern recognition algorithms for the diagnosis of knee illnesses are declared [22]. Comparison of probabilistic neural network, support vector machine and logistic regression classification performances after the principal component analysis for discriminating the Parkinson patients from the normal individual on the ground reaction force resulted by the better performance of probabilistic neural network [21]. An application of SVM on gait

classification of spastic hemiplegia and other diseases is also performed and consistent types of kinematic patterns to differentiate the spastic hemiplegia is characterized with SVM are reported. [23].

In this study, three recognition algorithms are compared to see their success in order to discriminate hemiplegic patients from the healthy individuals.

II. MATERIALS AND METHODS

The dataset that is used in this study is obtained from the custom- made gait analysis system equipped with a 3-d accelerometer, 3-d gyroscope, four force sensitive resistors (FSR) and a bend sensor. The FSR and bend sensor is installed in the shoe insole, while the accelerometer and the gyroscope are mounted at the back of the shoe under the ankle. The raw data transmission of the gait analysis is shown in Fig 1.

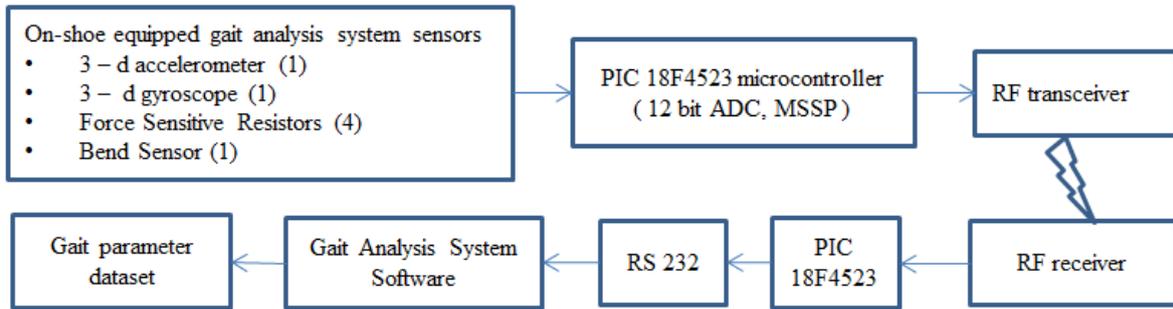


Fig 1. Raw data transmission of the gait analysis system

The raw data obtained from the hardware is processed in gait analysis system software and twenty-two gait parameters are computed. In Table 1, the gait parameters which are also features of dataset used in the recognition analysis are given. The (m) and (sd) are the notations for mean and standard deviation respectively.

The gait tests are performed with healthy individuals and hemiplegic patients on a straight line walking path. Ten healthy individual and ten hemiplegic patients gait cycles are recorded and the raw data is processed with the gait analysis system. Three pattern recognition algorithms are performed on the dataset to compare the classification success of the algorithms in differentiating the hemiplegic patients from the healthy individuals by means of their gait parameters.

**TABLE 1
GAIT PARAMETERS (RECOGNITION FEATURES)**

No	Parameter	Description	No	Parameter	Description
1	step speed(m)	Mean of ratio of step speed of feet	12	Mean of four FSR (sd)	Standard deviation of ratio of force sensitive resistor sensors mean normalized with weight.
2	step speed (sd)	Standard deviation of ratio of step speed of feet	13	x-acceleration (m)	Mean of ratio of lateral acceleration of feet
3	step length (m)	Mean of ratio of step length of feet	14	x-acceleration (sd)	Standard deviation of ratio of lateral acceleration of feet
4	step length (sd)	Standard deviation of ratio of step length of feet	15	y-acceleration (m)	Mean of ratio of vertical acceleration of feet
5	step timing (m)	Mean of ratio of step timing of feet	16	y-acceleration (sd)	Standard deviation of ratio of vertical acceleration of feet
6	step timing (sd)	Standard deviation of ratio of step timing of feet	17	z-acceleration (m)	Mean of ratio of forward acceleration of feet
7	swing timing (m)	Mean of ratio of swing timing of feet	18	z-acceleration (sd)	Standard deviation of ratio of forward acceleration of feet
8	swing timing (sd)	Standard deviation of ratio of swing timing of feet	19	pitch angle (m)	Mean of ratio of pitch angle of feet
9	stance timing (m)	Mean of ratio of stance timing of feet	20	pitch angle (sd)	Standard deviation of ratio of pitch angle of feet
10	stance timing (sd)	Standard deviation of ratio of stance timing of feet	21	roll angle (m)	Mean of ratio of yaw angle of feet
11	Mean of four FSR (m)	Mean of ratio of force sensitive resistor sensors mean normalized with weight.	22	roll angle (sd)	Standard deviation of ratio of yaw angle of feet

As pointed out in the description of the data in Table 1, the features are all the mean and standard deviation of ratio of the gait parameter measured for two feet. In this way, the data become invariant to the speed, length, timing of the individuals but just dependent on the comparison of the gait parameters of one foot to the other one of the same individual. The distribution of the data with respect to the features is shown in Fig. 2.

Before the classification, in order to decrease the feature space dimension, a principal component analysis (PCA) is also carried out. The principal component analysis reduces the feature dimension space by forming

linear combinations of features and seeks a lower dimensional representation that accounts for as much of the total variation of features as possible [13]. A principal component is linear combination of observed features that is obtained by computing the eigenvectors of variance-covariance matrix and the importance of eigenvector is expressed by the corresponding eigenvalue. In PCA, decreasing the dimension of the feature space, result in reducing the capability of the features expression of the whole data set. The number of the principal components selected to continue to the recognition should be decided first.

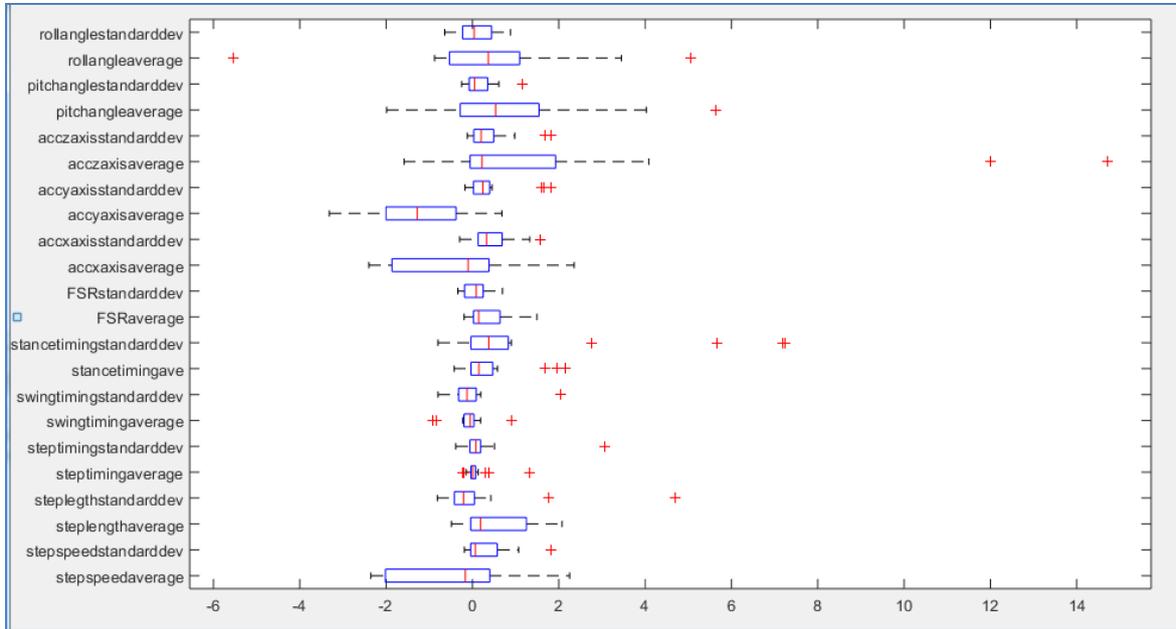


Fig 2. The distribution of the data

The pattern recognition algorithms compared for the classification success are support vector machines, k-nearest neighbour and classification tree algorithms. Training the data set with a support vector machine (SVM) consists of finding the optimal hyper plane that has the maximum distance from nearest training patterns where the support vectors are the ones nearest to the determined hyper plane [15]. The nearest neighbour algorithm uses the “k” closest point measured by Euclidian distance to perform classification [16]. Classification trees store the pattern information through nodes, which may store pattern primitive or substructure information and through arcs, which reflect relational information between the parent node and successors [14].

In our study, the principal component analysis as well as pattern recognition algorithms are performed in MATLAB R2015a Statistics and Machine Learning Toolbox. The dataset is divided randomly as the three quarter of it used for the training while the remaining quarter for the prediction.

III.RESULTS

Principal component analysis performed on the whole dataset and the scores of the data and the weights of the features are showed in the first and second principal component plane in Fig 3. The eigenvalues of the covariance matrix and the percentage of the total variance explained are given in Table 2.

Table 2. The Eigenvalues of the Covariance Matrix and Percentage of Total Variance Explained

Principal Component	Eigenvalues of covariance	Percentage of total variance (%)
First	7.4059	33.6631
Second	4.8745	22.1570
Third	2.7745	12.6114
Fourth	1.9208	8.7310
Fifth	1.5884	7.2201

As seen from the table, the first five principal components explain the 77% of total variance. If one more principal component, sixth one, is included, first six principal components will express more than 80% of the

total variance. By using the principal component for the rest of the analysis the feature space will decreased from twenty-two dimensions to six dimensions.

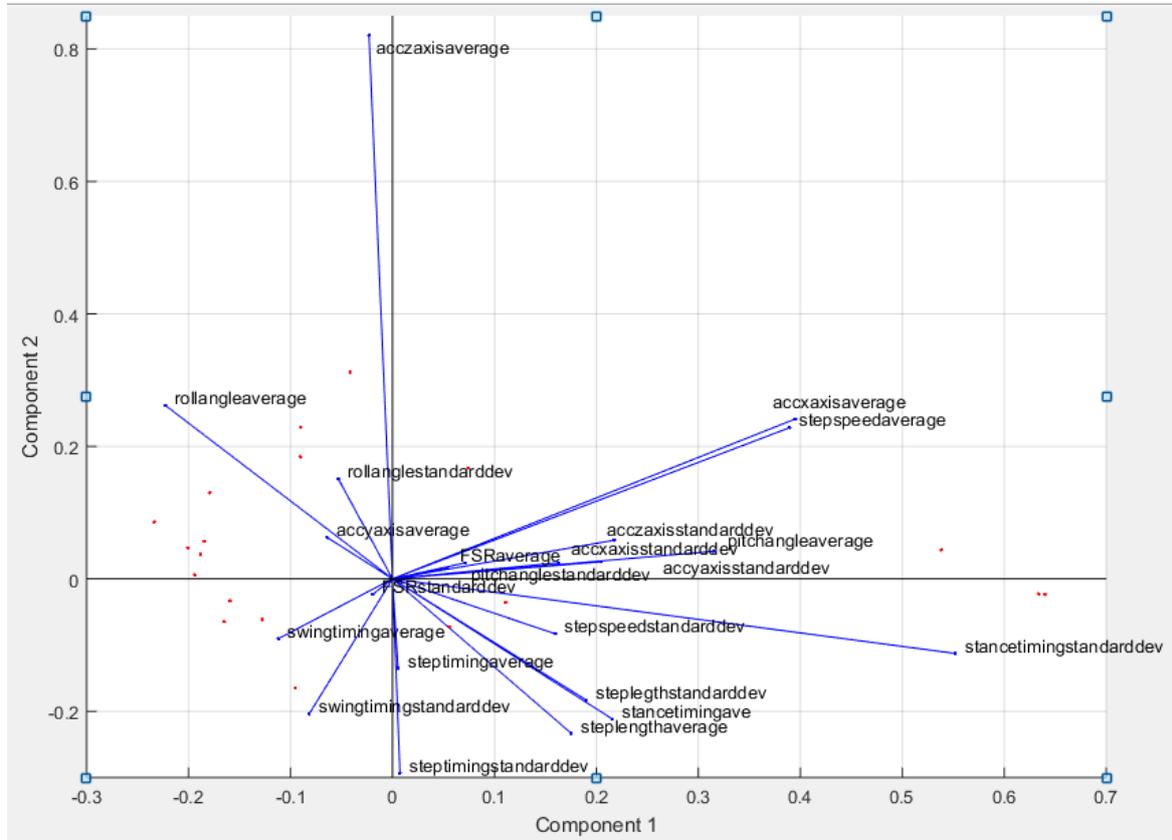


Fig 3. The first and second principal components for the gait parameters

After the gait parameters are transformed to the principal component space, the classification analysis is performed by means for different techniques. The results of pattern recognition algorithms are compared in case of classification rate in Table 3.

Table 3. Comparison of Pattern Recognition Algorithms

Algorithm	Training set (observations x parameter)	Misclassification rate recorded by the algorithm	Prediction set (observations x parameter)	Differentiation Rate	Misclassified observation
k-Nearest Neighbour	15 x 6	None	5 x 6	%80	One healthy misclassified
Support Vector Machine	15 x 6	None	5 x 6	%20	Four healthy misclassified
Tree	15 x 6	13%	5 x 6	%60	One healthy and one hemiplegic misclassified

As seen from Table 3, the k-nearest neighbour algorithm accomplishes the best classification rate (80%) for both the training set and the prediction set. Although the support vector machine algorithm performed the 100% in training set, its classification rate is very low for the prediction set with 20%. The misclassification is experienced when classifying the healthy individuals. The classification tree algorithm show low misclassification rate for training set about 87%, it has a moderate success in prediction set with 60% classification rate. The classification tree algorithm differentiates the dataset according to the sixth principal component.

The same pattern recognition algorithms are also performed on the original dataset without any principal component analysis seen on Table 4. The performance of k-nearest neighbour algorithm classification doesn't change, however the support vector machine algorithm classification success of the prediction set increased to

80%. The misclassification rate of the classification tree algorithm of the training set has decreased to zero, however the classification success for the prediction set remained as in the previous analysis with PCA at 60 %.

Table 4. Comparison of Pattern Recognition Algorithms with Twenty-two Features

Algorithm	Training set (observations x parameter)	Misclassification rate recorded by the algorithm	Prediction set (observations x parameter)	Differentiation Rate	Misclassified observation
k-Nearest Neighbour	15 x 22	None	5 x 22	%80	One healthy misclassified
Support Vector Machine	15 x 22	None	5 x 22	%80	One healthy misclassified
Tree	15 x 22	None	5 x 22	%60	Two healthy misclassified

When classification tree algorithm is utilized with the original feature set without any PCA analysis, the “step speed (sd)” is the feature that differentiates the healthy individual from the hemiplegic patients. The parameter is the standard deviation of ratio of step speed of two feet. The gait with step speed (sd) is greater than 0.035 is classified as hemiplegic.

IV. CONCLUSIONS

In this study, different pattern recognition algorithms are compared in discriminating of hemiplegic patient from the normal individuals. The algorithms are used on two dataset with different features. In the first dataset, twenty-two gait parameters calculated from the gait analysis system are directly utilized while in the second analysis the principal components are determined and the data set is transferred to the principal component space by using the first six principal components weights. After this transformation, pattern recognition is studied and although the classification rate on the training set is extremely successful, on the prediction set support vector machine failed. However the k-nearest algorithm succeeded with a classification rate of 80%, while the classification tree algorithm has moderate success rate. On the first dataset without principal component transformation, support vector machine accomplish a classification as good as k-nearest neighbour algorithm. The transformation of twenty-two parameters onto the principal component space, seems to make the discriminating features recessive. Differentiating of hemiplegic gait from the normal gait is a binary classification problem, so the effect of features individually seems to be more successful than the linear combination of them. In the classification tree algorithm the step speed (sd) is found to be the significant feature, which is consistent with the clinical observations during the gait tests because the hemiplegic patients moves their healthy and impaired feet in a very different pattern with different speeds with respect to each other. It is recommended to increase the number of the records by including more hemiplegic patients and healthy individuals in the gait tests for further studies.

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