



Blood Pressure Monitoring: Wearable Solutions

MICRO-568

Seminar in Physiology
and Instrumentation

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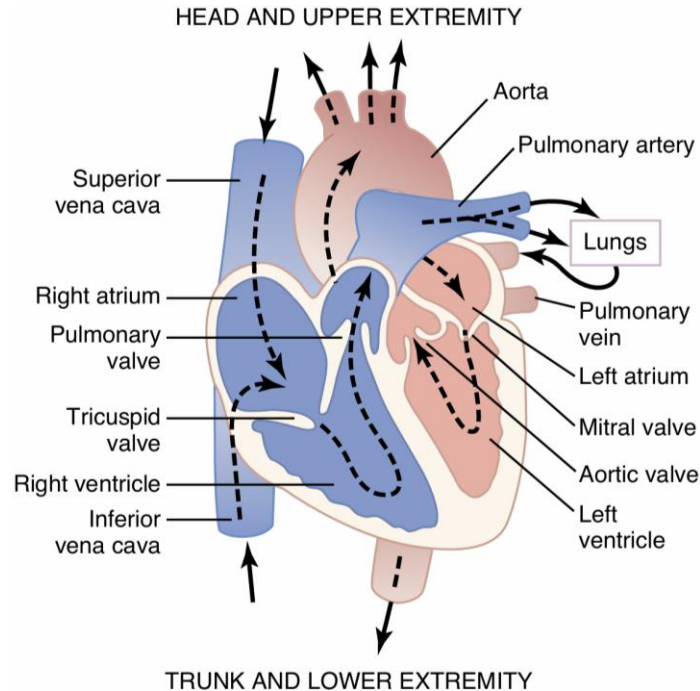
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All images are from cited papers/books, if not mentioned otherwise

- **The Problem:**
 - **Hypertension** (to high blood pressure)
- **Physiological Aspects:**
 - The **cardiovascular system**
- **The Medical Device:**
 - **Wearable blood pressure monitoring devices** (smartwatch or bracelets)

Introduction



Physiological Aspects: The Cardiovascular System

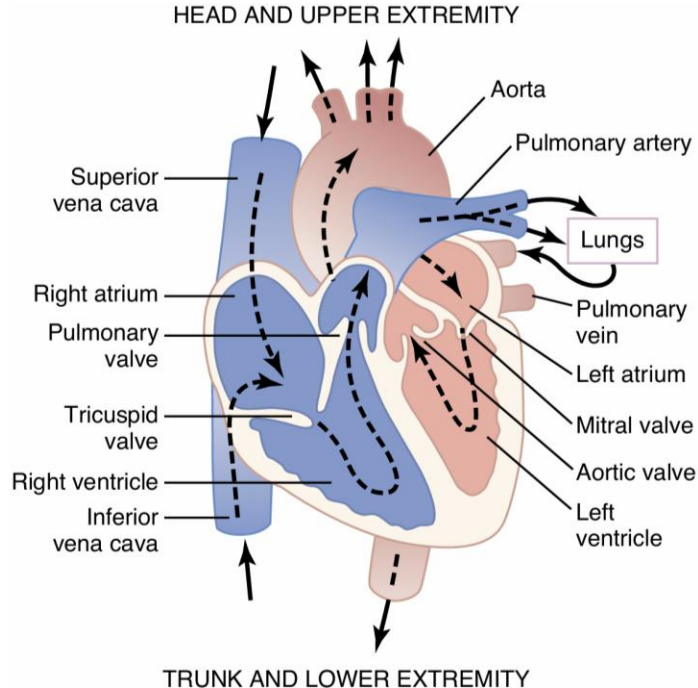
The Heart as a Pump

The Circulation

Blood Pressure

Hypertension

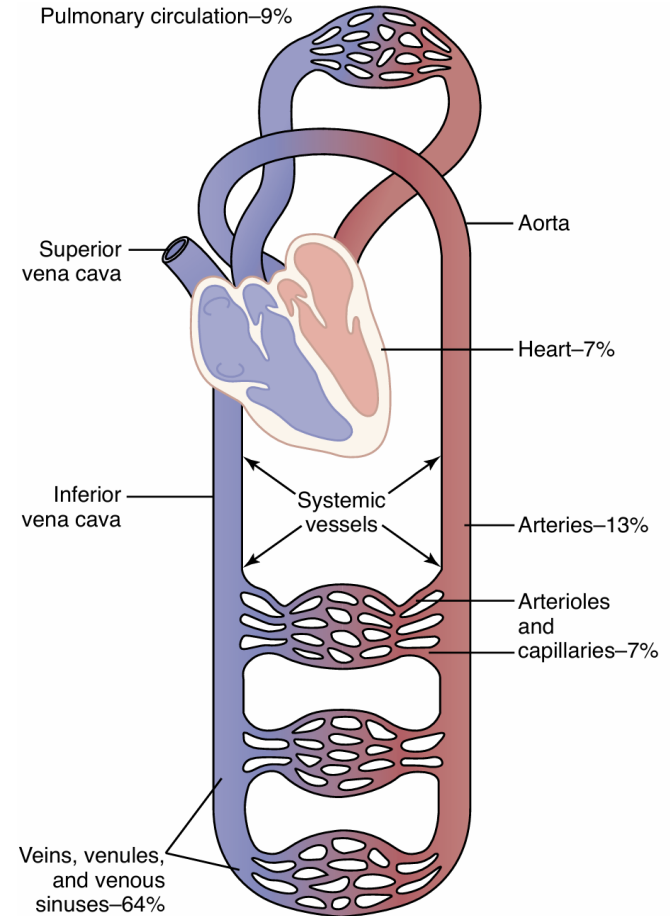
Cardiovascular System: The Heart as a Pump



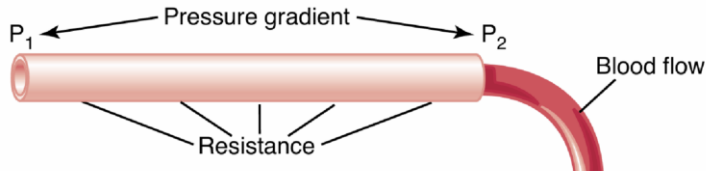
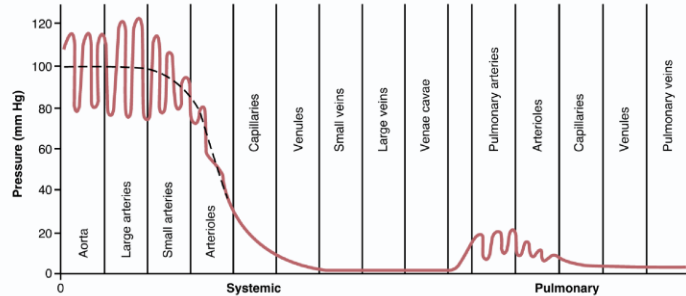
- **Two separate pumps:**
 - **Right heart** → pumps blood through the **lungs**
 - **Left heart** → pumps blood through the **peripheral organs**
- Each pump is composed of an **atrium** and a **ventricle** (two-chamber pump)
- Cardiac cycle:
 - **Systole:** period of **contraction**
 - **Diastole:** period of **relaxation**
- Three main **types** of **muscles**:
 - **Atrial** muscle
 - **Ventricular** muscle
 - **Excitatory** and **conductive** muscle fibers

Cardiovascular System: The Circulation

- **Primary Roles** of the circulation:
 - **Transport oxygen and nutrients** to the body tissues
 - **Remove waste** products
 - Conduct **hormones**
 - **Support the immune system**
 - **Regulate** the body **temperature**
- **Functional Parts:**
 - Arteries
 - Arterioles
 - Capillaries
 - Venules
 - Veins



Cardiovascular System: Blood Pressure



■ Circulatory Function:

- The **local blood flow** to each tissue: **precisely** and **locally** controlled relative to the needs
- **Cardiac output**: mainly controlled by the **sum** of all local **tissue flows** / the blood **returning** from the **veins**
- **Arterial pressure**: **independently** controlled from cardiac output or local blood flow

■ Ohm's law applied to the cardiovascular system:

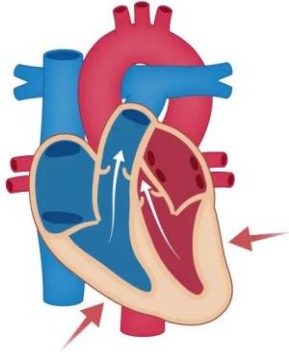
$$F = \Delta P / R$$

■ Pressure levels:

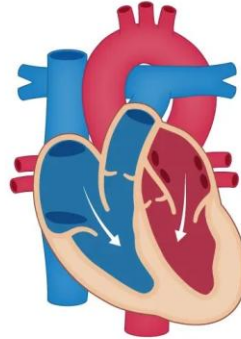
- **Systolic** ~120 [mmHg]
- **Diastolic** ~80 [mmHg]

Hypertension (High Blood Pressure)

Systolic blood pressure
140 mmHg or higher



Diastolic blood pressure
90 mmHg or higher



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- **Hypotension (Low Blood Pressure)**
 - Dizziness, fainting, blurred vision, etc.
 - Falls
 - Severe drops: organ damage/failure

- **140/90 [mmHg] or higher**
- **~1.28 billion adults** aged 30-79 years worldwide
- **~46%** of are **unaware**
- Major cause of **premature death** worldwide
- **“Silent killer”**: May not feel symptoms! (Possible symptoms: Headaches, nosebleeds, chest pains, etc.)
- Can **cause**:
 - **Stroke**: Burst or block arteries
 - **Heart Disease**: Heart attack, heart failure, irregular heart beat
 - **Kidney Disease, eye Damage, etc.**
- **Risk factors**
 - Old age, genetics, obese or overweight, not physically active, high salt diet, alcohol, tobacco, stress, medication etc.



Technical Description

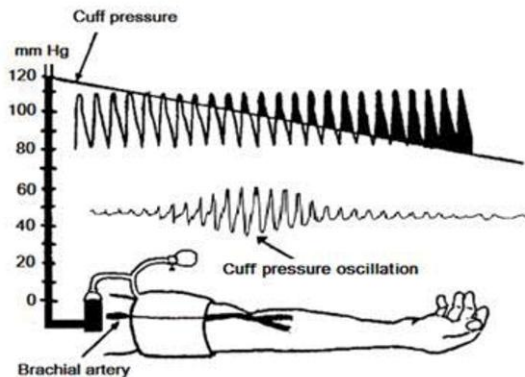
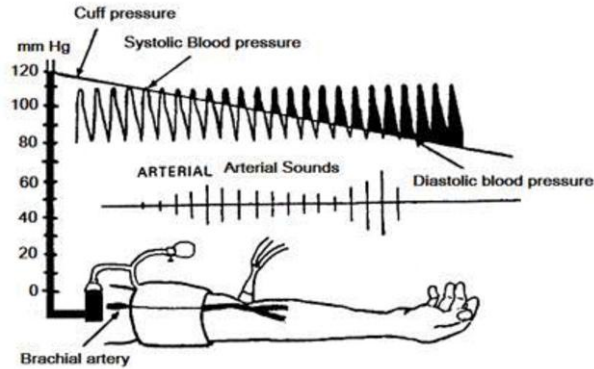
Overview of Different Techniques

Ambulatory Blood Pressure
Monitoring (ABPM)

Photoplethysmography (PPG)

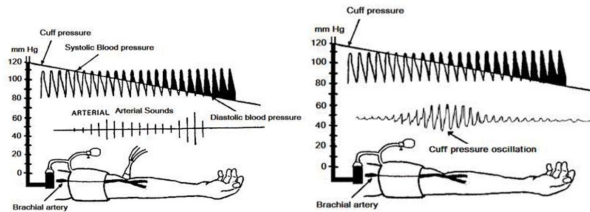
Pulse Wave Analysis

Overview of Different Techniques



- Common-used for clinical diagnosis
 - **Auscultatory BP monitoring**
 - Using a **sphygmomanometer** (composed of an inflatable cuff and a manometer)
 - **Stethoscope** (over brachial artery)
 - **Korotkoff Sounds**
 - (+) Accurate and Reliable
 - (-) Not automated/Requires skill, adapted cuff-size is needed
 - **Reference method** for validating other BP measurements and devices
 - **Oscillometric BP monitoring**
 - Using a **sphygmomanometer**
 - **Electronic pressure sensors** (transducer) inside the cuff
 - **Pressure oscillations** caused by the expansion and contraction of the artery
 - (+) Automated, easy to use, faster, consistent and reproducible results
 - (-) Needs calibration, can be less accurate than auscultatory method

Overview of Different Techniques



■ Research and Critical care:

- **Direct (Intra-Arterial) Measurement**
 - (+) accurate, continuous, reliable
 - (-) Invasive
- **Tonometry**
 - (+) entire wave form, no cuff
 - (-) sensible to placement, less accurate
- **Ultrasonic Doppler**
 - (+) detect blood flow abnormalities
 - (-) specialized equipment, expertise
- **MRI**
 - (+) detailed picture of blood flow dynamics
 - (-) expensive, specialized equipment

■ Common-used for clinical diagnosis

• Auscultatory BP monitoring

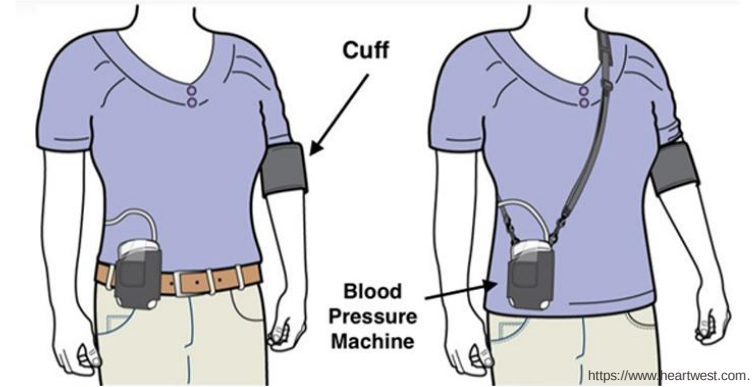
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• Oscillometric BP monitoring

- Using a **sphygmomanometer**
- **Electronic pressure sensors** (transducer) inside the cuff
- **Pressure oscillations** caused by the expansion and contraction of the artery
- (+) Automated, easy to use, faster, consistent and reproducible results
- (-) Needs calibration, can be less accurate than auscultatory method (especially with irregular heartbeats, etc.)

Ambulatory Blood Pressure Monitoring (ABPM)

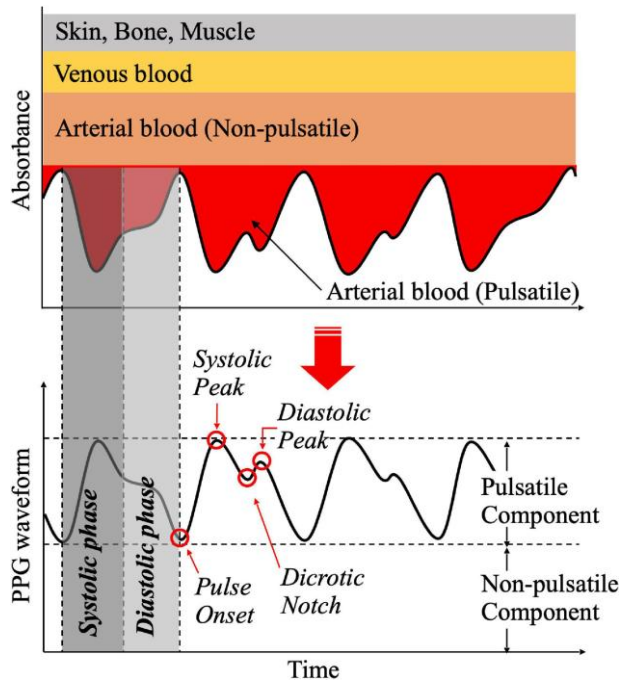
- The Device:
 - Measuring over 24-48 hours
 - Usually using **oscillometric** BP monitoring
 - **Cuff** on the upper arm connected to a small **BP monitor** attached to a belt/strap
 - Cuff inflates every **~30 min** during the **day** and **~1 hour** during **nighttime**
- Goal:
 - Avoid **white coat-hypertension** (15%-30% of subjects)
 - Detect **masked hypertension**
 - Detect **nocturnal BP**
 - Evaluate **treatment efficacy**
 - Assess **BP variability**
- Limitations:
 - **Discomfort**
 - Oscillometric BP monitoring (same limitations)



How to measure blood pressure continuously with **high comfort(cuffless)**?
 → Using a **smartwatch/bracelet** on the **wrist!**

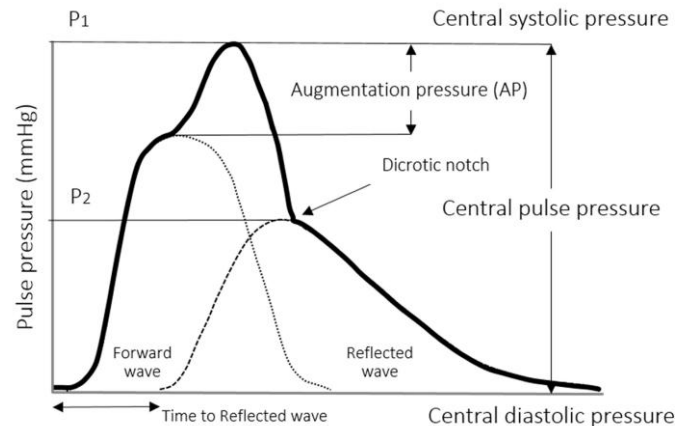
Which **technique** is adapted for this purpose?
 → **Optical sensing** combined with **advanced data analysis**

Photoplethysmography (PPG)



- Measuring **changes of blood volume** in tissues beneath the skin using optical sensors
- **Working principle:**
 - Light **emission** (by the device)
 - Light **interaction** with the tissue
 - **Photodetection** of the reflected light (by the device)
 - Signal Analysis and **waveform generation**
- **Advantages**
 - Non-invasive
 - Multifunction (heart rate, oxygen saturation, respiration rate)
 - Compact and low-cost
 - Enables real time tracking
- **Limitations**
 - Limited in depth (not always the dynamics of the central cardiovascular system)
 - Sensitive to motion artifacts
 - Sensitive to external light sources, skin tones, etc.

- Using machine learning algorithms
- **Extracting waveform** features correlating with **blood pressure** (amplitude, pulse wave velocity proxies (slope, rise time, etc.), reflection indices, ...)
- Higher BP → Stiffer arteries → Faster Pulse wave
- Some devices **additionally** use:
 - ECG signals to compute pulse arrival time (PAT)
 - Contextual data (demographic factors, heart rate variability, motion tracking)
- **Advantages**
 - Comfortable, non-invasive and continuous monitoring
- **Limitations**
 - Calibration with an initial cuff-based blood pressure device to link the features to the absolute blood pressure
 - Low accuracy





The Wearable Blood Pressure Monitoring Device

Specifications

Medical Significance

Clinical Applications

The product

Further Improvements

- **General** requirements:
 - **Comfortable**, **lightweighted** and **compact**
 - **User-friendly** app for data visualization
- **Specifications** for smartwatches or bracelets:
 - PPG sensor:
 - **Sampling rate**: ~25-100 Hz
 - **Wavelength**: Green, red or infrared
 - Processing Unit:
 - **Low-power** microcontroller (real-time processing)
 - **ML algorithms** and **efficient signal processing** techniques
 - Battery
 - Life 2-10 days of regular use
- Regular calibration(~monthly)

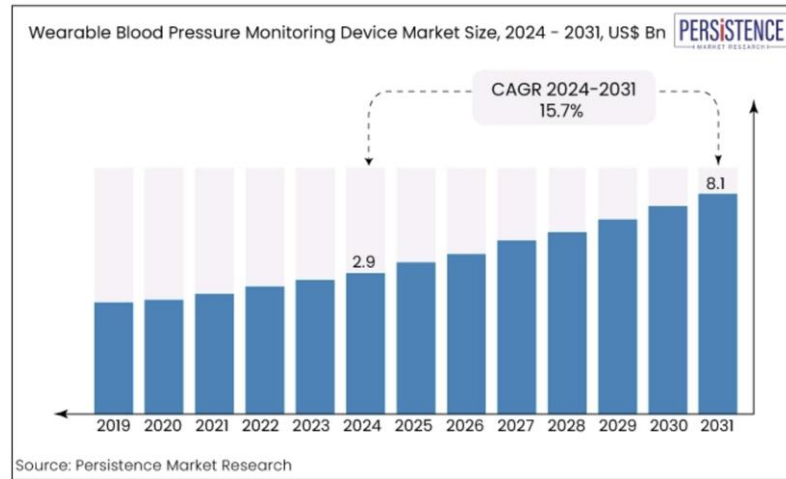
- **Early detection** of hypertension
 - Many people remain **undiagnosed** before **complications** occur
 - User can **seek medical advice** early
 - Help doctors to **optimize treatment strategy**
- **Continuous** monitoring
 - Capture **variations**
- **Real-time** feedback
 - Medication
 - Life-style changes
 - Stressors
 - Awareness and Motivation
- **Reduce** the need of **clinical visits**
- **Combination** with other **health measurements** (heart rate, SpO2, ...)



"This is the first cuffless blood pressure solution to be cleared by the FDA—no more need for an inflating cuff"
- Arik Ben Ishay, Founder and CEO of Biobeat

- FDA Risk Classification
 - Class I: Low Risk
 - Class II: Moderate Risk
 - Class III: High Risk
- Class II requires a clearance (510(k) premarket notification)
 - Demonstrate that the device is substantially equivalent to an existing device already on the market.
- Biobeat (first to get FDA clearance in 2019)
- Multiple brands are in the current process for FDA clearance:
 - Samsung Galaxy Watch
 - Withings ScanWatch
 - Aktiia (CE-marking but not yet FDA)
 - And many more....

- Cost: ~ \$150 - \$600
- Mode of use:
 - Wearing on the wrist
 - Frequent calibration
 - Frequent charging of the watch
- Market trends:
 - Wearable health tech devices are largely demanded (in general a multi-billion-dollar industry)
 - “The global wearable blood pressure monitor market size totaled US\$ 1.8 Bn in 2021” cited in Future Market Insights





- Improving **accuracy** and **reliability**
 - **Adaptive algorithms** (to environmental conditions, etc.); **Machine learning** and **AI models** (could learn from user's physiological data)
 - Improving the **PPG sensors** by for example using **multiple wavelengths**
 - Reducing **Motion artifacts** by compensating body movement
- **Cuffless calibration**
 - Cross-validation with other sensors (ECG)

- **Hypertension** is a major global health issue, affecting over one billion people worldwide
- **Technical advancements** in wearable technology are unlocking the **high potential** of **wearable** and **continuous blood pressure monitoring**
- **Multiple companies** are in the process of pursuing FDA clearance (**Clinical Accuracy** remains a challenge)
- Wearable blood pressure devices can **link individual health tracking** and **clinical care**
- Will these **optical techniques** one day **overtake** the **classic, well-established** methods?

Conclusion

Thank You for Listening
QUESTIONS

