

HRV 2006

# Time Domain Measures: From Variance to pNNx

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# Outline

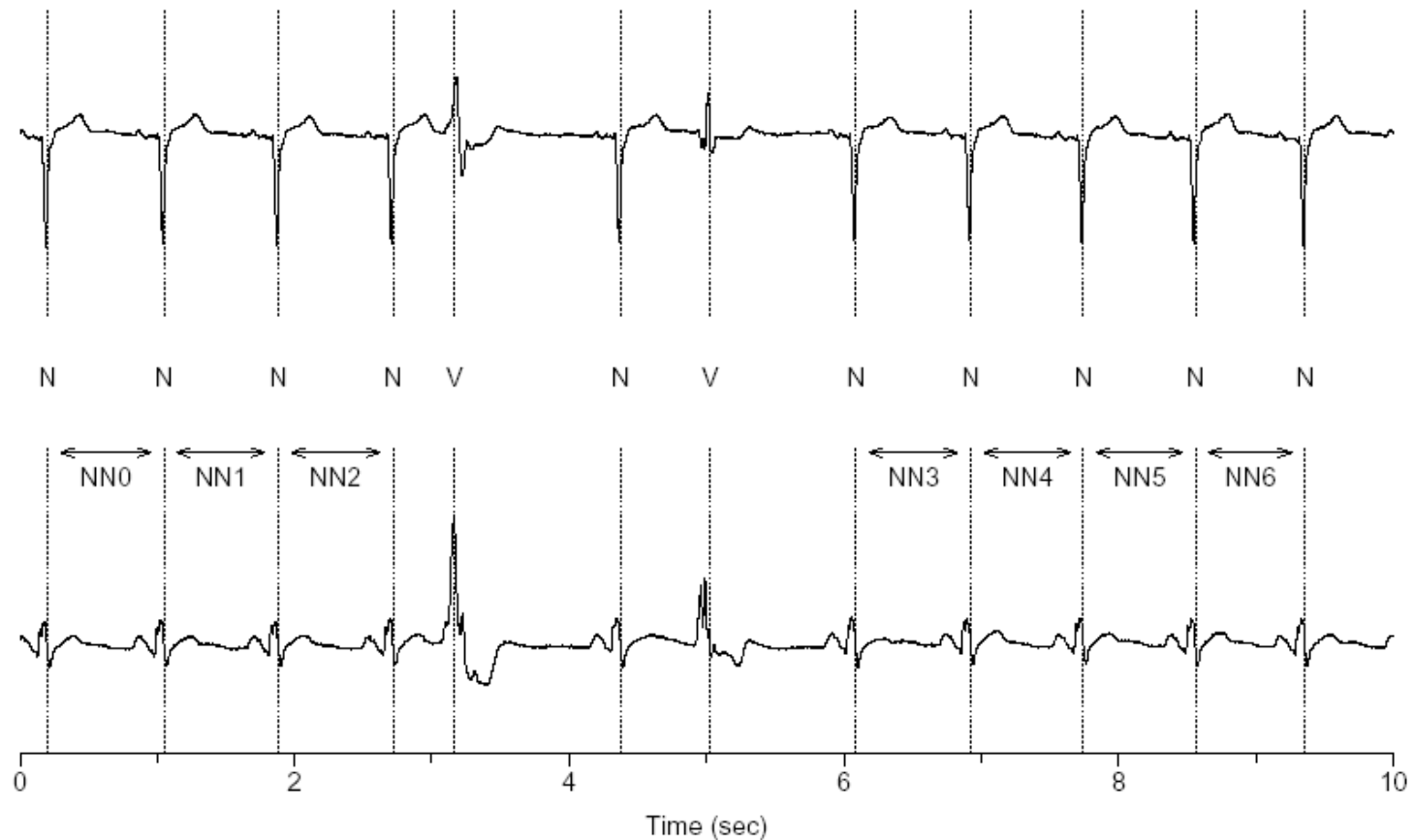
- Background concepts
- Basic time and frequency domain measures
  - Definitions
  - Representative values
  - Correlations between measures
- Confounding factors
  - False/missed normal beat detections
  - Fiducial point misalignment
  - Supraventricular ectopy/conduction disorders
- The pNNx family of statistics

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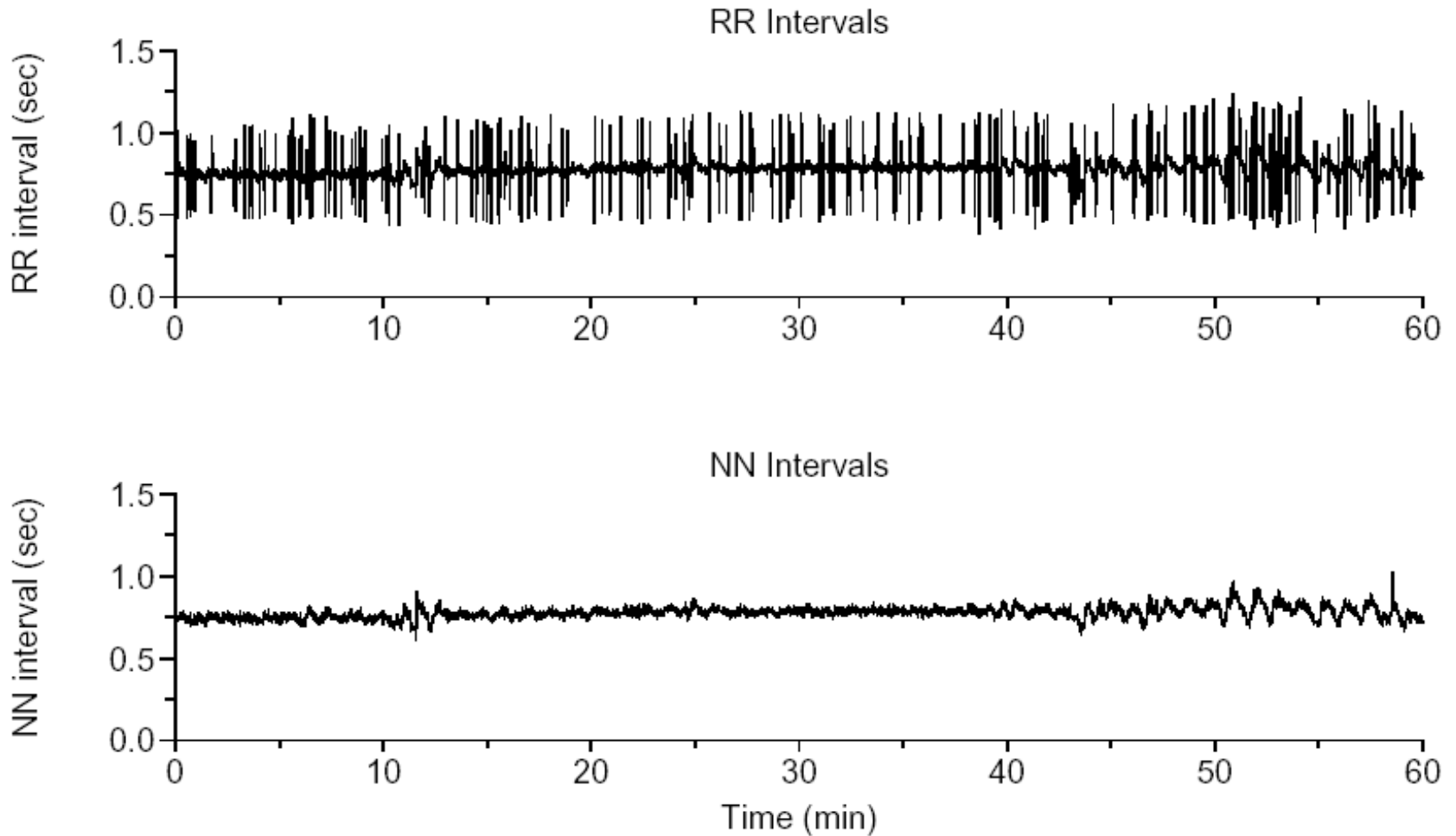
# HRV and Cardiac Autonomic Tone Modulation

- HRV analysis attempts to assess cardiac autonomic regulation through quantification of sinus rhythm variability
  - Fast variations reflect parasympathetic (vagal) modulation
  - Slower variations reflect a combination of both parasympathetic and sympathetic modulation and non-autonomic factors

Sinus rhythm time series is derived from the RR interval sequence by extracting only normal sinus to normal sinus (NN) interbeat intervals



# Underlying sinus rhythm time series in the presence of frequent PVCs



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# Classification of HRV Measures

- Time domain measures
  - Treat the NN interval sequence as an unordered set of intervals (or pairs of intervals) and employ different techniques to express the variance of such data
- Frequency domain measures
  - Power spectral density analysis provides information on how the power (variance) of the ordered NN intervals distributes as a function of frequency
- Complexity/Non-linear measures
  - Analysis also based on the time-dependent ordering of the NN interval sequence



# Commonly Used Time Domain Measures

- AVNN : Average of all NN intervals
- SDNN : Standard deviation of all NN intervals
- SDANN : Standard deviation of the average of NN intervals in all 5-minute segments of a **24-h recording**
- SDNNIDX (ASDNN) : Mean of the standard deviation in all 5-minute segments of a **24-h recording**
- rMSSD : Square root of the mean of the squares of the differences between adjacent NN intervals
- pNN50 : Percentage of differences between adjacent NN intervals that are >50 msec; this is one member of the larger pNNx family

# Commonly Used Frequency Domain Measures

- Total power : Total NN interval spectral power up to 0.4 Hz.
- ULF (Ultralow frequency) power : Total NN interval spectral power up to 0.003 Hz. of a **24-h recording**
- VLF (Very Low Frequency) power : Total NN interval spectral power between 0.003 and 0.04 Hz.
- LF (Low Frequency) power : Total NN interval spectral power between 0.04 and 0.15 Hz
- HF (High Frequency) power : Total NN interval spectral power between 0.15 and 0.4 Hz.
- LF/HF ratio : Ratio of low to high frequency power

# Representative values of HRV measurements in a 24 hour data set of ostensibly healthy subjects\*

(35 males, 37 females, ages 20-76, mean 55)

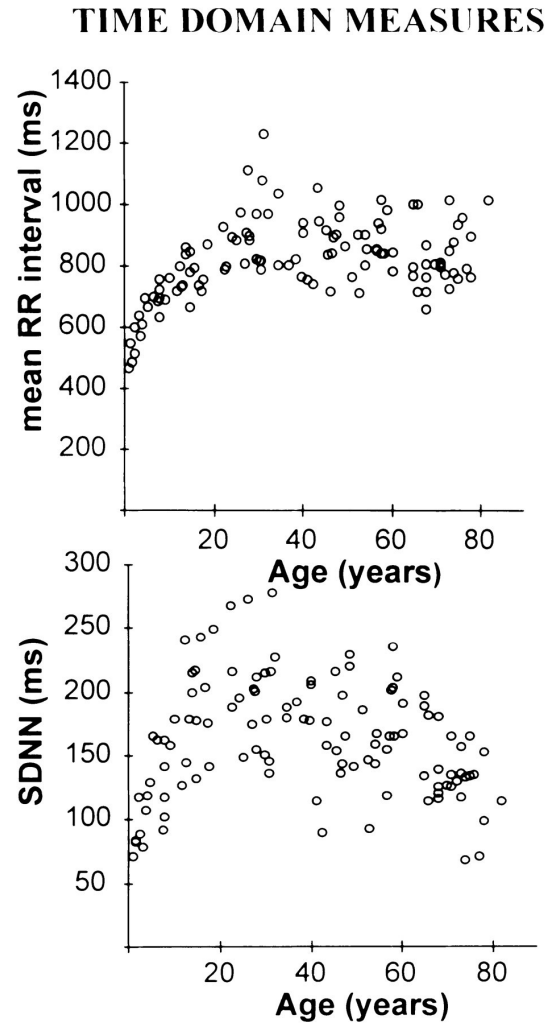
Measurement	Average Value
AVNN (msec)	787.7 ± 79.2
SDNN (msec)	136.5 ± 33.4
SDANN (msec)	126.9 ± 35.7
SDNNIDX (msec)	51.3 ± 14.2
rMSSD (msec)	27.9 ± 12.3
pNN20 (%)	34.2 ± 13.7
pNN50 (%)	7.5 ± 7.6
TOTPWR (msec <sup>2</sup> )	21470 ± 11566
ULF PWR (msec <sup>2</sup> )	18128 ± 10109
VLF PWR (msec <sup>2</sup> )	1900 ± 1056
LF PWR (msec <sup>2</sup> )	960 ± 721
HF PWR (msec <sup>2</sup> )	483 ± 840
LH/HF ratio	2.9 ± 1.4

\* Data from <http://www.physionet.org/physiotools/pNNx>

Values of HRV measurements are dependent on:

- Data length
- Age
- Physical conditioning
- Activity
- Sleep/wake cycle
- Disease
- Drug effects
- Gender

# Time Domain Measures Change with Age

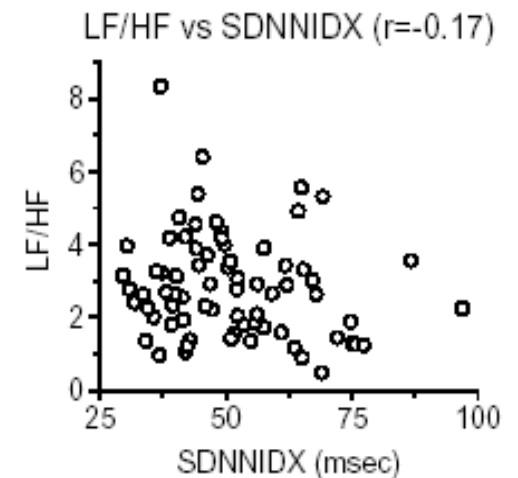
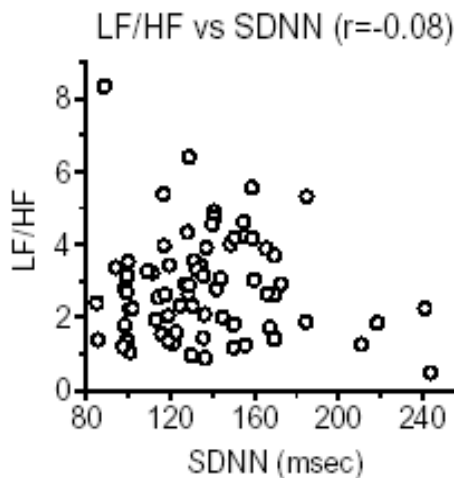
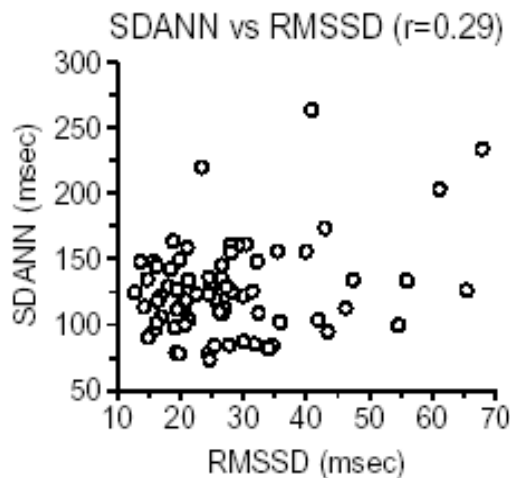
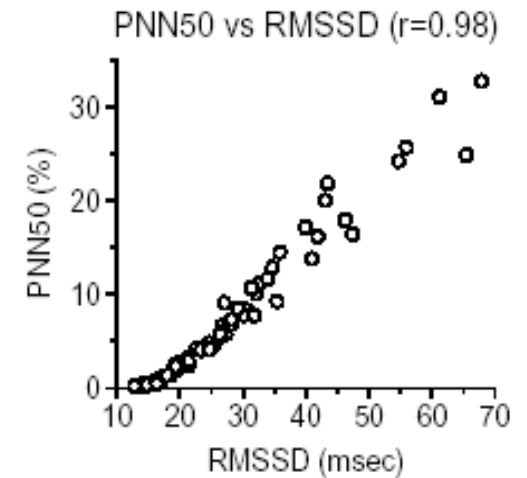
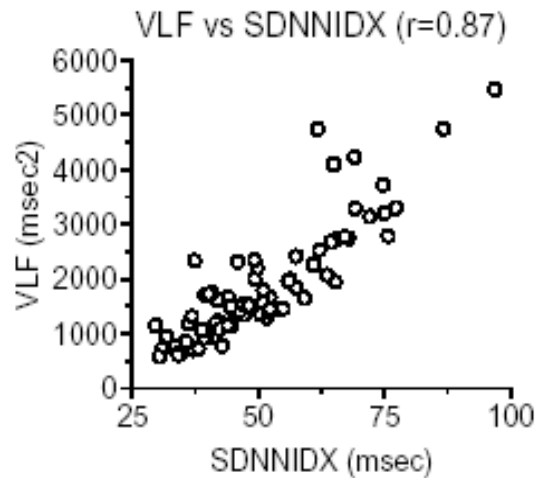
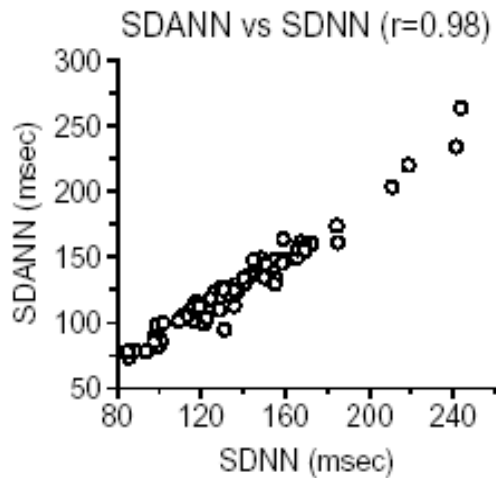


From: Pikkujamsa, et al. *Circulation* 1999;100:393-399

# Correlations between HRV Measures

- Highly correlated measures
  - SDNN, SDANN, total power and ULF power
  - SDNNIDX, VLF power and LF power
  - rMSSD, pNN50 and HF power
- LF/HF ratio does not strongly correlate with any other HRV measures

# Examples of strong and weak HRV correlations

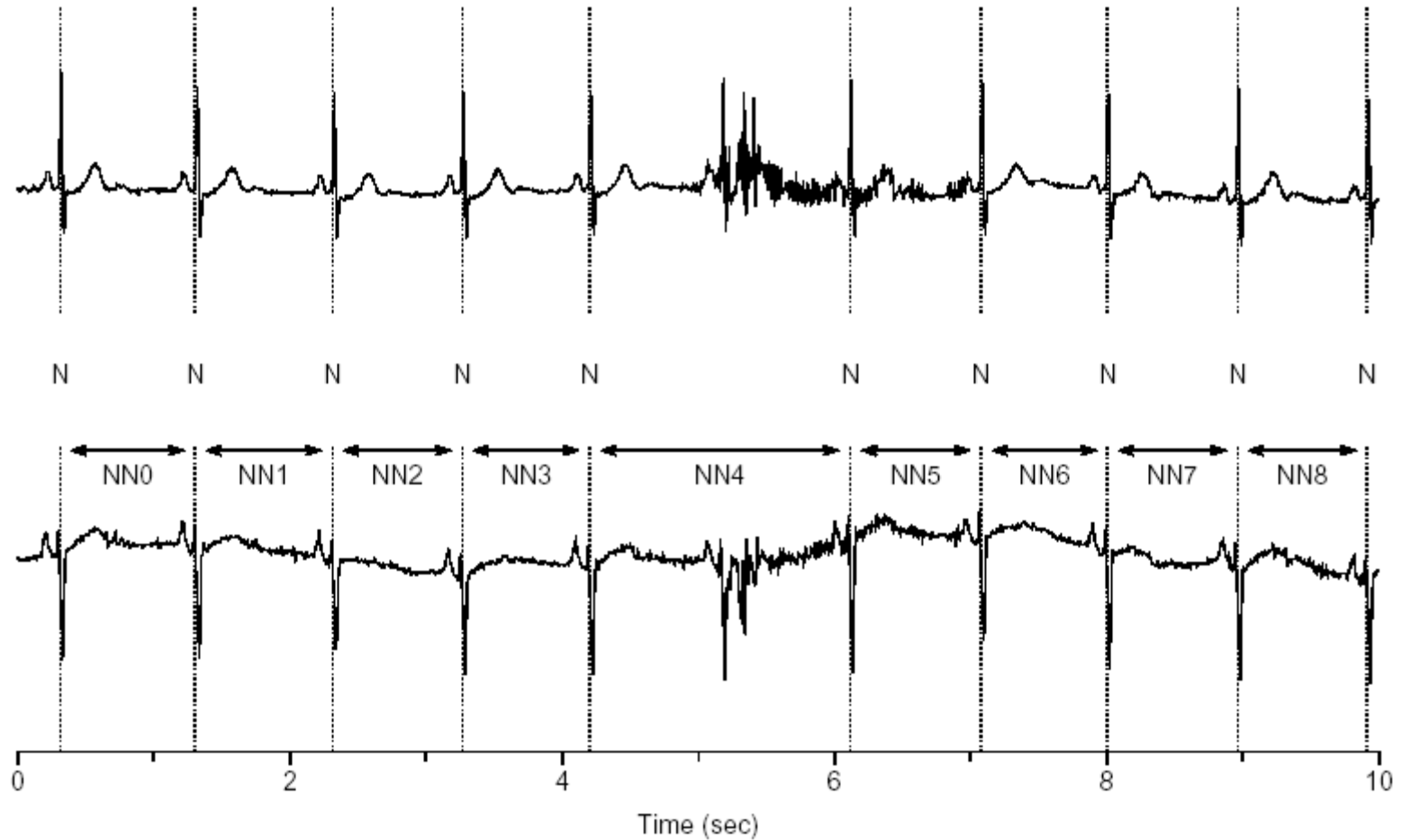


\* Normal data from <http://www.physionet.org/physiotools/pNNx>

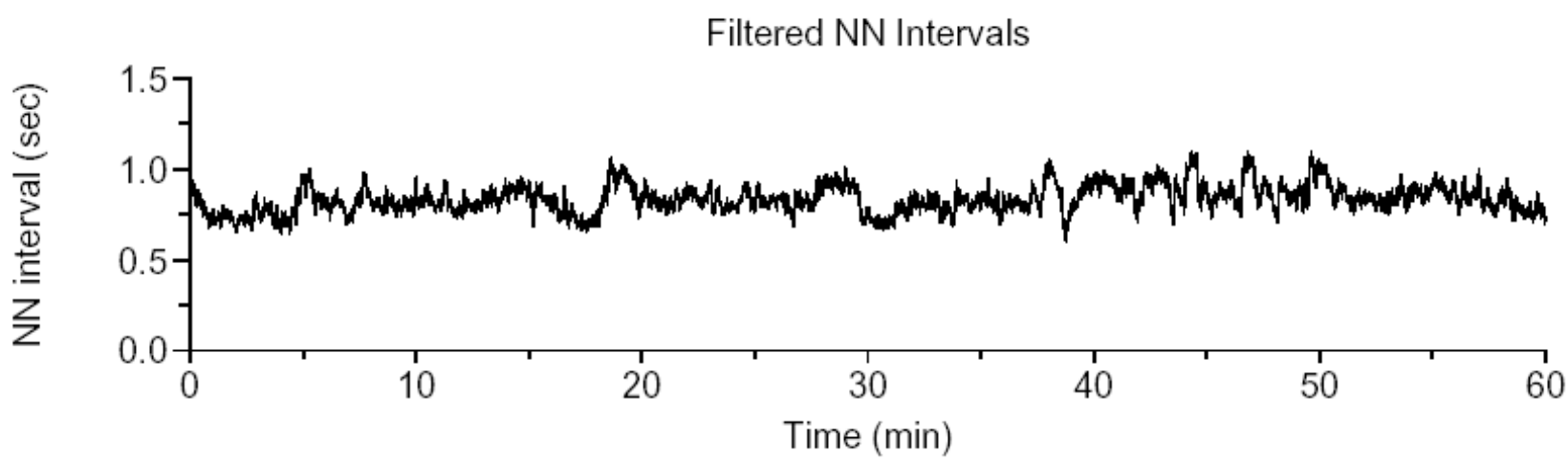
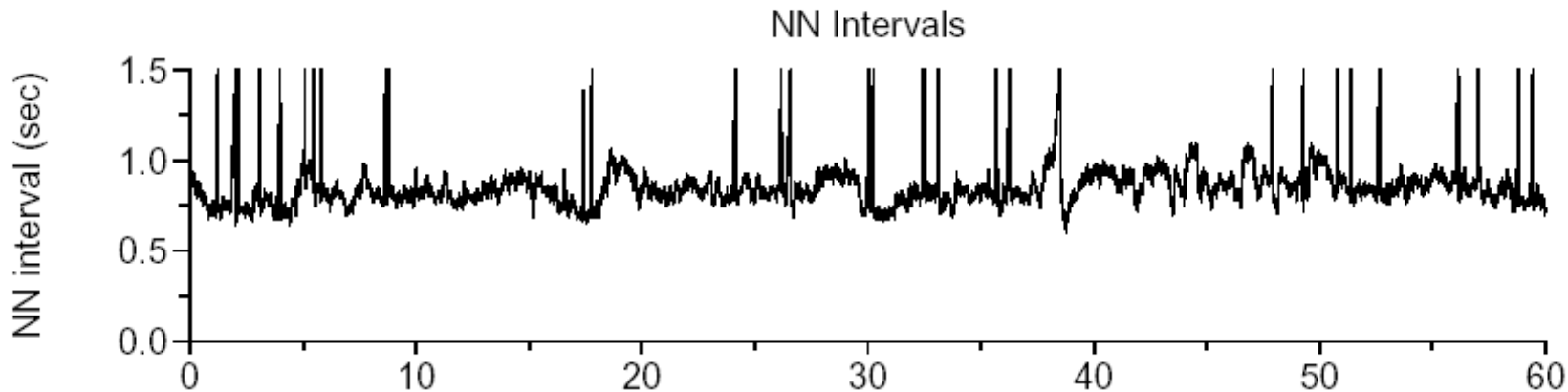
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# Missed Normal Sinus Beat Detection



# Outliers due to missed normal beat detections



# Sliding Window Average Filter

- Delete non-physiologic intervals (e.g.,  $<0.4$  or  $>2.0$  sec)
- Select a window size of  $2N+1$  (e.g. 41) data points
- Average the  $N$  data points on either side of the central point
- Exclude central point if it lies some fixed fraction (e.g. 20%) outside of window average
- Advance to next data point
- Variations
  - Use window median rather than mean
  - Calculate the standard deviation of data in window and reject central point if it lies outside 3 standard deviations

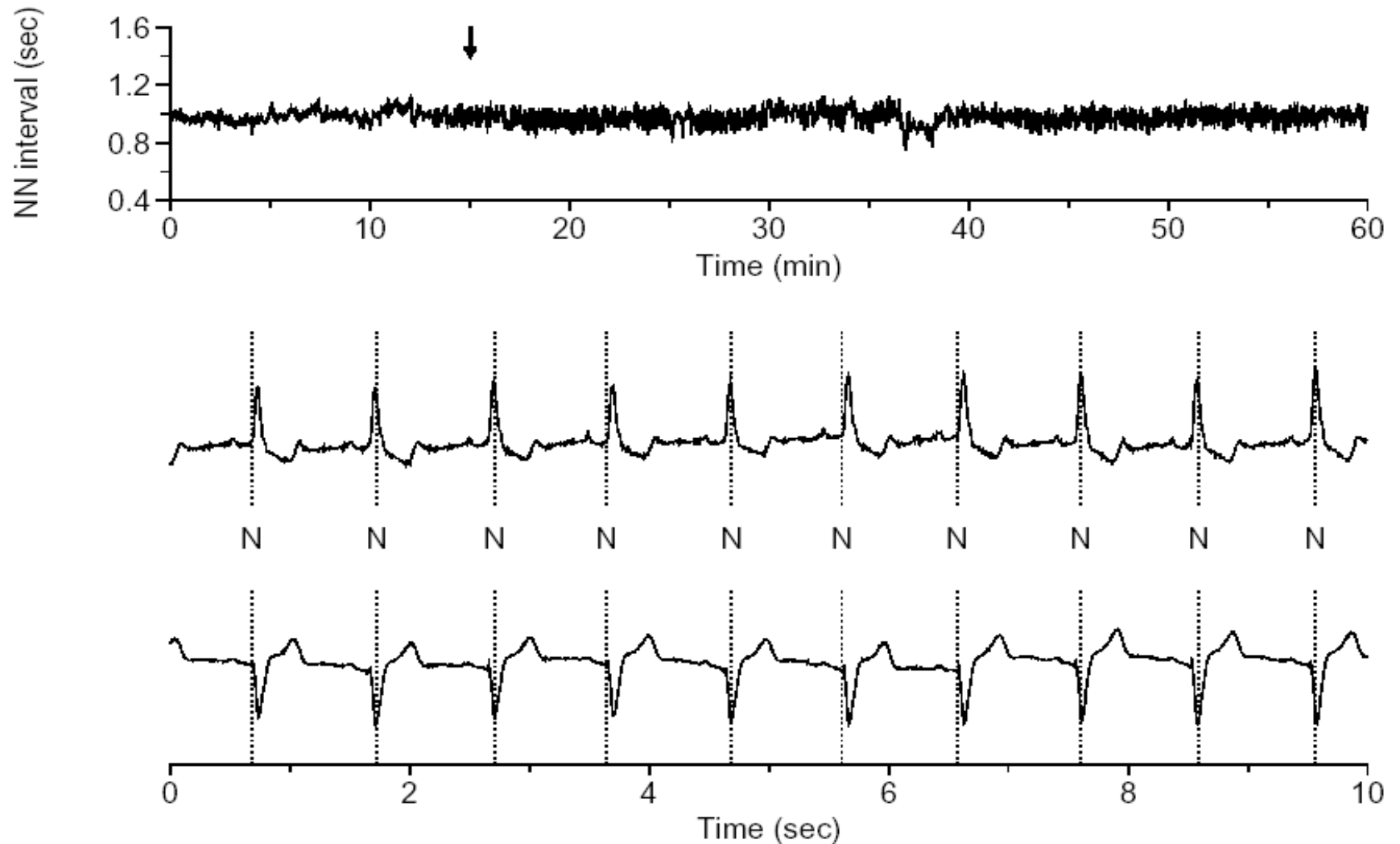
# Effect of Outliers on HRV Measurements in One 24-Hour Data Set

Measurement	Filtered	Unfiltered	%Change
AVNN (msec)	920.9	961.7	4%
SDNN (msec)	134.6	1090.1	710%
SDANN (msec)	119.1	241.6	103%
SDNNIDX (msec)	61.7	503.7	716%
rMSSD (msec)	25.6	1539.8	5907%
pNN20 (%)	39.2	40.3	3%
pNN50 (%)	5.0	6.7	35%
TOTPWR (msec <sup>2</sup> )	22430.4	916873.0	3988%
ULF PWR (msec <sup>2</sup> )	14989.5	16255.8	8%
VLf PWR (msec <sup>2</sup> )	4740.5	84665.3	1686%
LF PWR (msec <sup>2</sup> )	2092.3	249524.0	11826%
HF PWR (msec <sup>2</sup> )	608.0	566427.0	93058%
LH/HF ratio	3.4	0.4	-87%

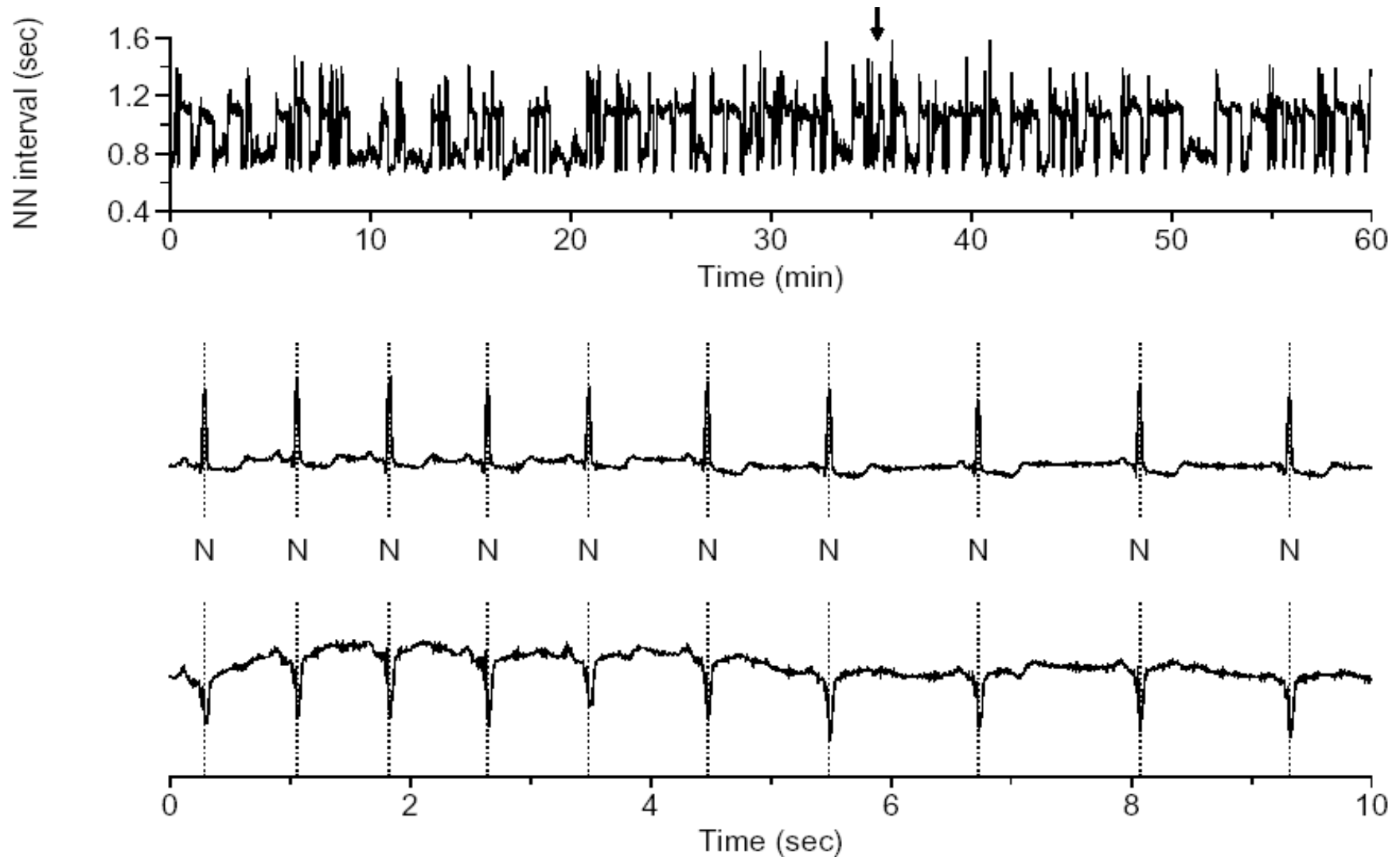
# Effect of Outliers on HRV Measurements

- Most frequency domain measures are especially susceptible to outliers particularly LF and HF power, can be  $>1000\%$  error
- Most time domain measures are less affected but still give erroneous results, can be  $>100\%$  error
- AVNN, pNN20 and ULF power are least affected generally  $<10\%$  error

# Artifactual variability due to fiducial point misalignment



# Erratic supraventricular rhythm: wandering atrial pacemaker vs SA node dysrhythmia



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# The pNNx Family of HRV Statistics: a measure of cardiac vagal tone modulation

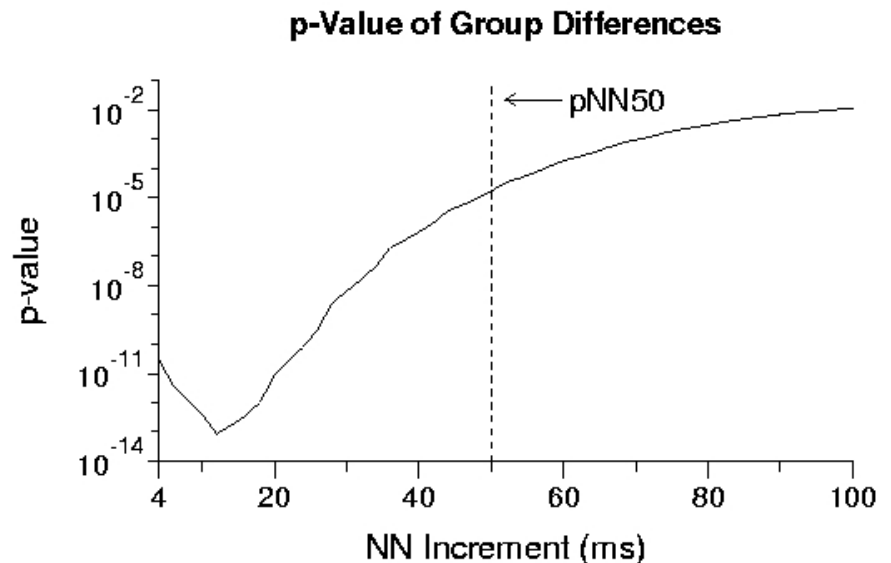
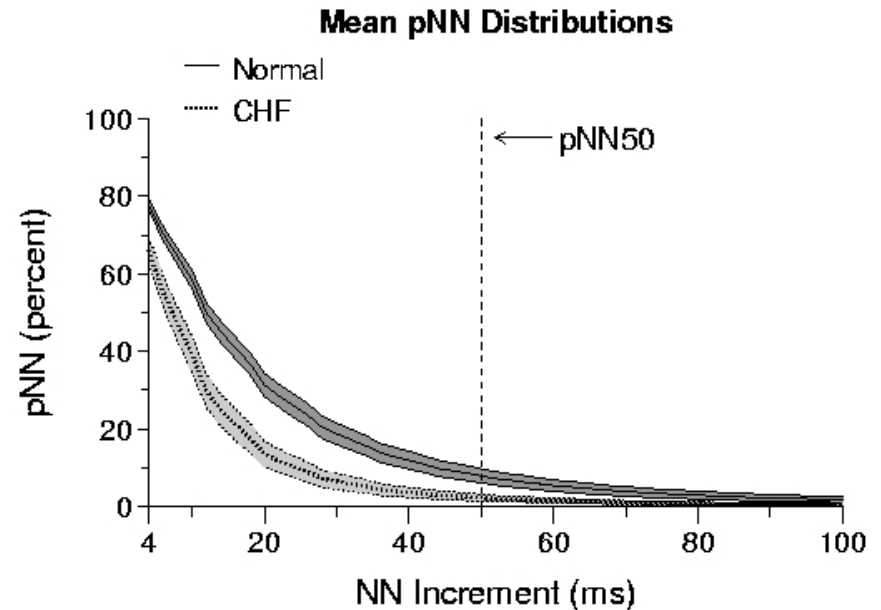
- 1984: Ewing et al. introduced the NN50 count
  - Defined as the mean number of times per hour in which the change in successive NN intervals exceeds 50 msec
- 1988: Bigger et al. introduced the pNN50 statistic
  - Defined as the NN50 count / total NN count
- 2002: Mietus et al. introduced the pNNx family of statistics
  - Defined as the NNx count / total NN count for values of  $x \geq 0$
  - Finding pNNx for  $x < 50$  msec provided more robust discrimination between groups

pNN distributions for  
Healthy subjects (n=72)  
and Congestive Heart  
Failure subjects (n=43)

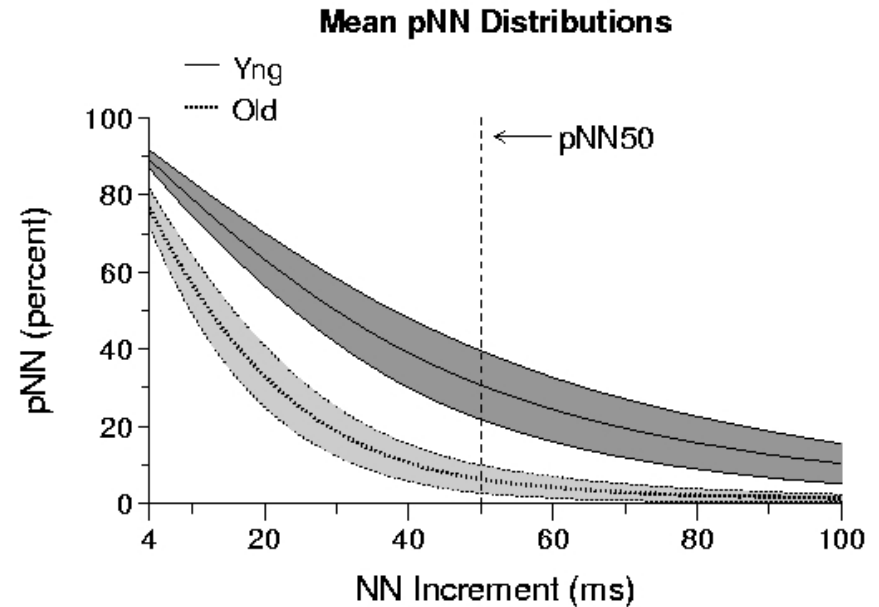
p-values for the  
separation of groups  
(t-test)

pNN50 :  $p < 10^{-4}$

pNN12 :  $p < 10^{-13}$



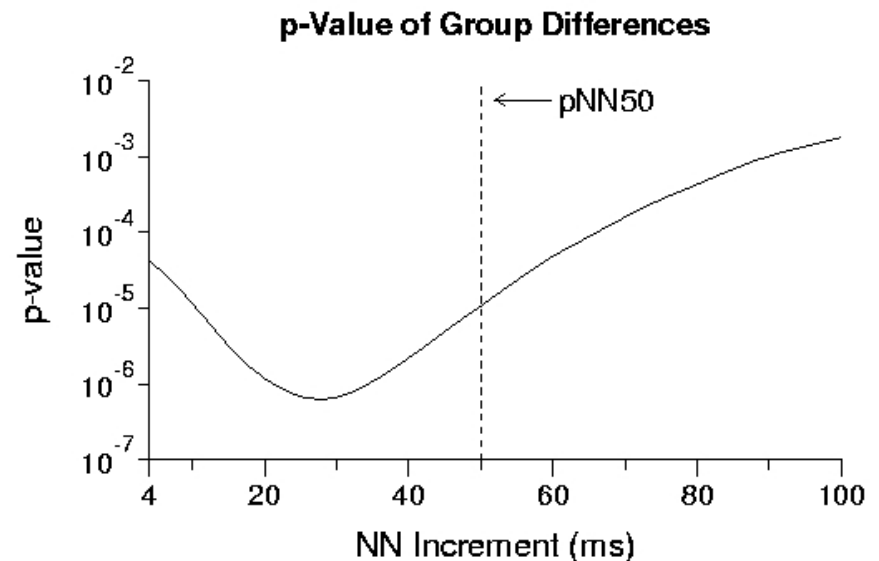
pNN distributions for Young subjects (n=20, ages 21-34) and Old subjects (n=20, ages 68-85)



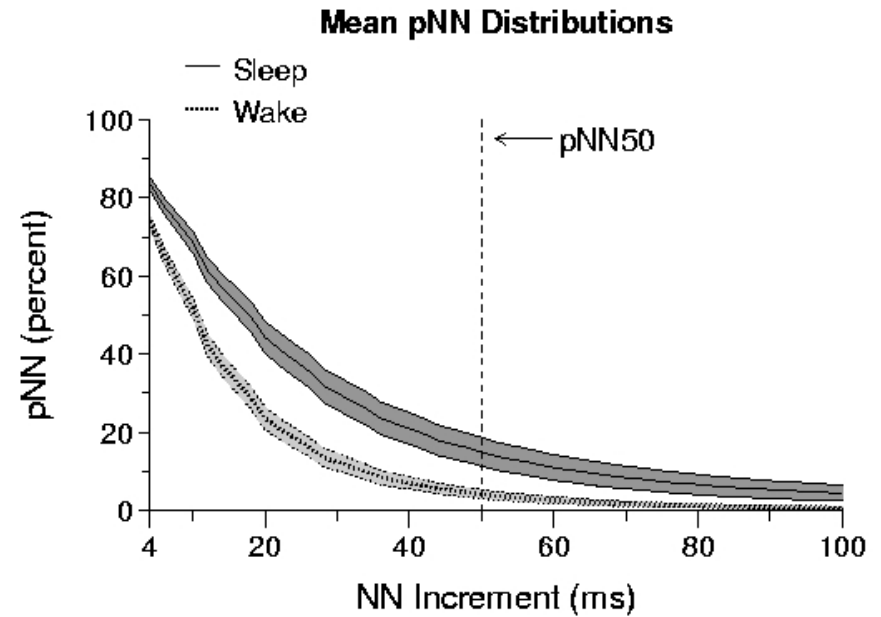
p-values for the separation of groups (t-test)

pNN50 :  $p < 10^{-4}$

pNN28 :  $p < 10^{-6}$



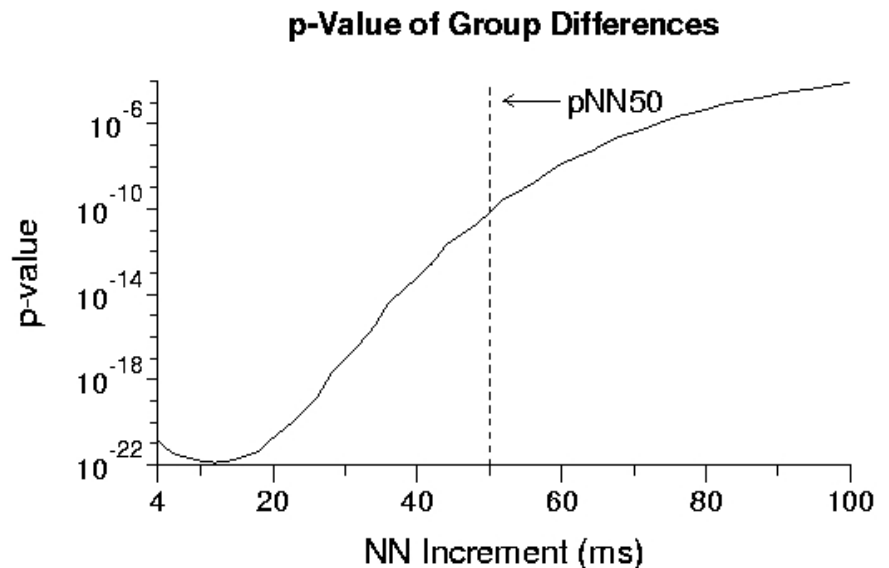
pNN distributions for Normal subjects (n=72) during 6 hours of Sleep and Wake



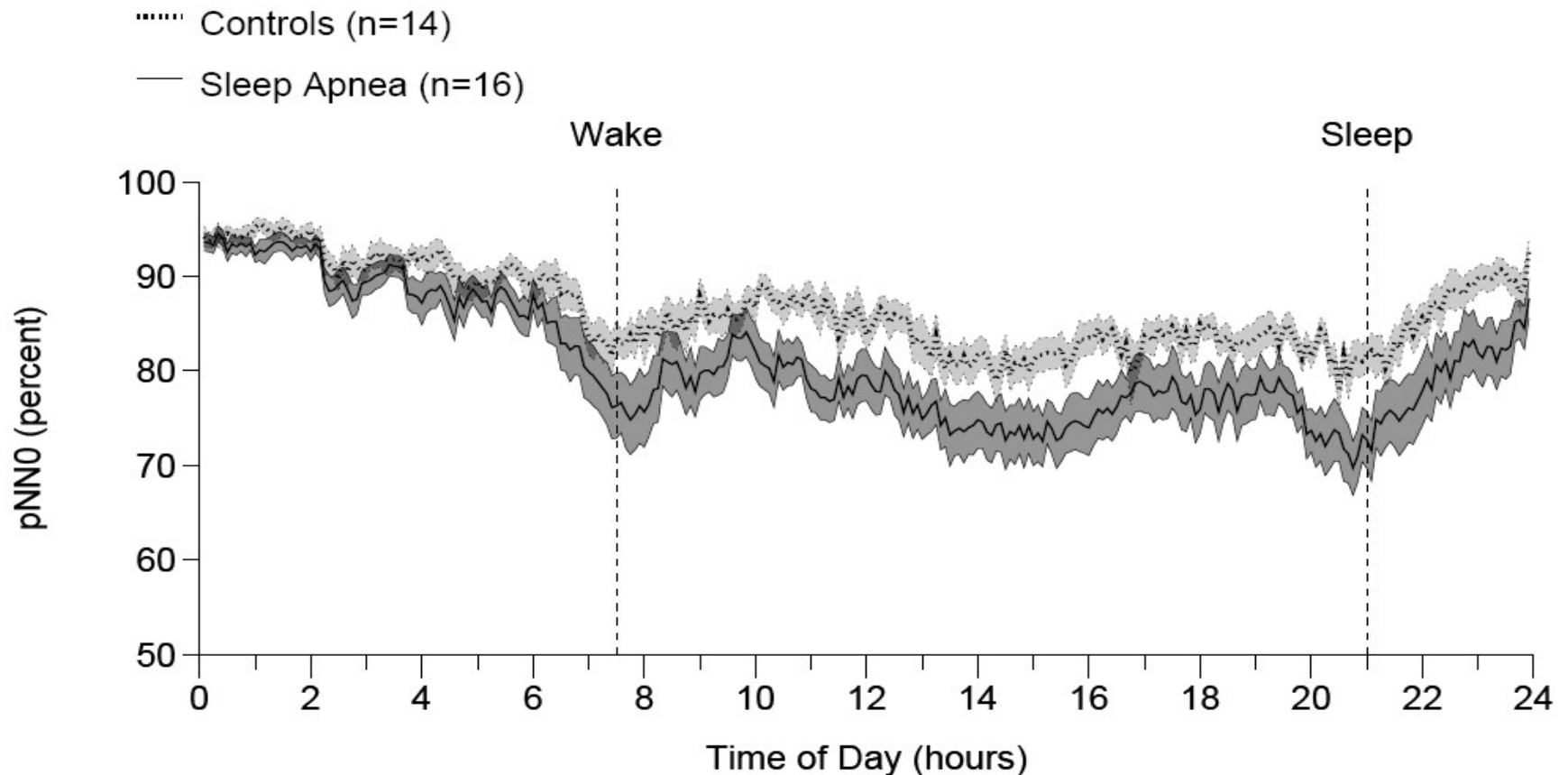
p-values for the separation of groups (paired t-test)

pNN50 :  $p < 10^{-10}$

pNN12 :  $p < 10^{-21}$



# Loss of daytime cardiac vagal modulation in sleep apnea hypopnea syndrome



Unpublished data courtesy of Steven Shea and Michael Hilton,  
Brigham and Women's Hospital

# The pNNx Heart Rate Variability Metric: A Generalization of pNN50 (`pnnlist`)

JE Mietus,<sup>1</sup> C-K Peng,<sup>1</sup> I Henry,<sup>1</sup> RL Goldsmith,<sup>2</sup> AL Goldberger<sup>1</sup>

<sup>1</sup>Margret and H.A. Rey Institute for Nonlinear Dynamics in Physiology and Medicine, Cardiovascular Division, Harvard Medical School/Beth Israel Deaconess Medical Center, Boston, MA

<sup>2</sup>Division of Circulatory Physiology, Columbia-Presbyterian Medical Center, New York, NY

A detailed description of an application of the pNNx algorithm can be found in:

Mietus JE, Peng C-K, Henry I, Goldsmith RL, Goldberger AL. [The pNNx files: re-examining a widely used heart rate variability measure.](#) *Heart* **88**:378-380; 2002.

**Please cite this publication when referencing this material, and also include the standard citation for PhysioNet:**

Goldberger AL, Amaral LAN, Glass L, Hausdorff JM, Ivanov PCh, Mark RG, Mietus JE, Moody GB, Peng C-K, Stanley HE. PhysioBank, PhysioToolkit, and PhysioNet: Components of a New Research Resource for Complex Physiologic Signals. *Circulation* **101**(23):e215-e220 [Circulation Electronic Pages; <http://circ.ahajournals.org/cgi/content/full/101/23/e215>]; 2000 (June 13).

<http://www.physionet.org/physiotools/pNNx>

Source code freely available

# Conclusions

- Most time and frequency domain measures are sensitive to outliers
- Always visually inspect data and filter outliers if necessary
- pNNx for values of  $x < 50$  msec may provide more robust estimates of cardiac vagal tone modulation even in the presence of outliers

# References

- Bigger JT Jr, Kleiger RE, Fleiss JL, et al. Components of heart rate variability measured during healing of acute myocardial infarction. *Am J Cardiol* 1988;61:208-215
- Ewing DJ, Neilson JMM, Travis P. New method for assessing cardiac parasympathetic activity using 24 hour electrocardiograms. *Br Heart J* 1984;52:396-402
- Heart rate variability: standards of measurement, physiological interpretation and clinical use. Task Force of the European Society of Cardiology and the North American Society of Pacing and Electrophysiology. *Circulation* 1996;93:1043
- Malik M, Camm AJ. *Dynamic Electrocardiography*. Elmsford, NY. Blackwell/Futura, 2004
- Mietus JE, Peng C-K, Henry I, et al. The pNNx-files: Reexamining a widely-used heart rate variability measure. *Heart* 2002;88:378-380
- Pikkujamsa SM, Makikallio TH, Sourander LB, et al. Cardiac interbeat dynamics from childhood to senescence: comparison of conventional and new measures based on fractals and chaos theory. *Circulation* 1999;100:393-399