Detection of Parkinson’s through Static Analysis of Handwriting

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ABSTRACT: Detection of changes in micrographia is a symptom in Parkinson’s disease (PD). An analysis of handwriting samples would be valuable as it could supplement and support clinical assessments, help monitor micrographia, and link it to PD. Such an analysis would be especially useful if it could detect subtle yet relevant changes in handwriting morphology, thus enhancing solution of the detection procedure. It is a new method for detecting the Parkinson’s disease through the static analysis of handwriting. It improves the opportunity for testing the disease, since there are no laboratory tests like blood based tests exist to determine the existence or extent of PD. Examination of handwriting presents an enormous opportunity for tracking PD conditions over time, in and away from the clinic. The approach has potential to examine simple writing samples of patients in a natural environment. Since it only evaluating the handwriting samples for the disease prediction, this method is less costly. The accuracy of the system get increased as the number of training samples get increased. Different features are extracted from the writing samples to detect the disease.

Keywords: Parkinson’s disease, Feature

I. INTRODUCTION

Detection of changes in micrographia is a symptom in Parkinson’s disease (PD). A quantitative analysis of handwriting samples would be valuable as it could supplement and support clinical assessments, help monitor micrographia, and link it to PD. Such an analysis would be especially useful if it could detect subtle yet relevant changes in handwriting morphology, thus enhancing solution of the detection procedure.

Currently, there are no laboratory tests exist to determine the existence or extent of PD. The efficacy of any intervention is generally determined via detection of changes in symptoms they have. The gold standard in this regard is a physical examination administered by a neurologist, who may score symptomatic severity using a scale like the Unified Parkinson’s Disease Rating Scale (UPDRS). While this process is quite reliable, established, and has been modified over years of experience with clinicians including recent improvements with MDS-UPDRS, it remains relatively subjective and there is certainly potential to improve its resolution to capture symptomatic responses to therapy, which can be fine. The requirement of a clinical visit for this also limits this process. Examination of handwriting presents an enormous opportunity for tracking PD conditions over time, in and away from the clinical infrastructure.

Handwriting is a task that is strongly affected by PD and its debilitation may be the first and important observable sign of the disease.

Parkinson’s disease (PD) is a degenerative neurological disorder. The main cause of Parkinson’s disease is actually unknown until now. However, it has been researched that the combination of environmental and genetic factors play an important role in causing PD for people. For general understanding the Parkinson’s disease is treated as disorder of the central nervous system which is the result of loss of cells from various parts of the brain in people.

There are mainly four cardinal features of PD that can be grouped under the acronym TRAP: Tremor at rest, Rigidity, Akinesia and Postural instability. In addition, flexed posture and freezing (motor blocks) have been included among the features of parkinsonism, with PD as the most common form. Because of the diverse profiles and lifestyles of those people affected by PD, motor and non-motor impairments should be evaluated in the context of each patient’s needs and goals. Most of these scales have not been fully evaluated for validity and reliability. The Hoehn and Yahr scale is commonly used to compare groups of patients and provide gross assessment of disease progression, ranging from stage 0 (no signs of disease) to stage 5 (wheelchair bound or bedridden unless assisted). The Unified Parkinson’s Disease Rating scale (UPDRS) is the most well established scale for assessing disability and impairment. Rating scales are used for the evaluation of motor impairment and disability in patients with PD.

II. METHODS AND MATERIAL

Supervised learning is the machine learning task of inferring a function from labeled training data. The training data consist of a set of training examples. In supervised learning, each example is a pair consisting of an input object (typically a vector) and a desired output value (also called the supervisory signal). A supervised learning algorithm analyzes the training data and produces an inferred function, which can be used for mapping new examples. An optimal scenario will allow for the algorithm to correctly determine the class labels for unseen instances. This requires the learning algorithm to generalize from the training data to unseen situations in a reasonable way.

In machine learning, one aims to construct algorithms that are able to learn to predict a certain target output. To achieve this, the learning algorithm is presented some training examples that demonstrate the intended relation of input and output values. Then the learner is supposed to approximate the correct output, even for examples that have not been shown.
problem cannot be solved exactly. The kind of necessary assumptions about the nature of the target function are subsumed in the phrase inductive bias.

**Data set**

The dataset used for the detection of the parkinson’s disease is the handwriting samples collected from the PD patients and healthy people. Data samples from the patients and healthy people are used for the feature extraction to detect the disease.

**Preprocessing**

Image preprocessing is crucial in the recognition pipeline for correct disease and character prediction cases. These methods typically include noise removal, image segmentation, cropping, scaling, etc. In this project, these methods have mainly been used when recognizing from an image, but some of them, such as cropping the written character and scaling it to our input size, are also performed. This step is important in the case of disease prediction stage. Because for predicting the disease using the handwriting samples we use the differences in their writings. Therefore each of the differences in the images are important. So in order to obtain the accurate result these images should undergo preprocessing stage.

**Feature Extraction**

Features of input data are the measurable properties of observations, which one uses to analyze or classify these instances of data. The task of feature extraction is to choose relevant features that discriminate the instances well and are independent of each other. Selection of a feature extraction method is probably the single most important factor in achieving high recognition performance. There is a vast amount of methods for feature extraction from character images, each having different characteristics, invariance properties, and reconstructability of characters. Different features are used here for the prediction of disease from the character samples are sum of mean and standard deviation, energy, eigen values, anisotropy and orientation.

After the completion of preprocessing the corresponding input image is represented as a collection of matrix elements.

Mean indicate the mean of all matrix elements and standard deviation indicate the standard deviation of all matrix elements.

Structure tensor is an image texture analysis technique often used in image processing and computer vision. Structure tensor, J, of an image is a matrix derived from the image partial derivatives. It is defined as,

\[
J = \begin{bmatrix}
< f_x, f_x >_w & < f_x, f_y >_w \\
< f_x, f_y >_w & < f_y, f_y >_w
\end{bmatrix}
\]

Where fx and fy are the partial derivatives of image f(x,y) along the x and y directions respectively. It is defined for each pixel as a second order symmetric positive matrix.

The eigenvalues 1 and 2 and the corresponding eigen vectors e1 and e2 summarize the distribution of the gradient of the image within the window defined by w. If an eigen value is zero, the grey values in the direction of the corresponding eigen vector do not change. If one eigen value is zero and one greater than zero, it represents a simple neighborhood with ideal orientation. An isotropic structure is observed when 1 = 2.

Local orientation, anisotropy and energy for each pixel can be calculated for the structure tensor matrix.

The anisotropy measure gives a relation between the lengths of the orientation vector to the length of the gradient vector. The values of anisotropy measure vary from 0, indicating isotropic to 1 indicating highly oriented structures.

**III. PROPOSED METHODOLOGY**

A new method for detecting the Parkinson’s disease through the static analysis of handwriting. It improves the opportunity for testing the disease. Currently, there are no laboratory tests like blood based tests exist to determine the existence or extent of PD. Examination of handwriting presents an enormous opportunity for tracking PD conditions over time, in and away from the clinic. The approach has potential to examine simple writing samples of patients in a natural environment. This will also provide the recognition of characters written by the PD patients which we can’t read easily.

The writing samples of both the PD patients and healthy people were collected. These samples are collected in the form of images. So it undergoes some pre-processing stages to remove the unwanted data and thereby obtain the area of interest after the preprocessing stage it undergo the feature extraction stage to obtain the required features from the data set. Using the obtained features from both group of data set training process will be conducted finally the classification process classify the input data set to any one of the category i.e. patient or healthy.

In sample data collection stage data samples, i.e. handwriting samples were collected from both patients and healthy people. These data samples can be used for the feature extraction. The writing samples of PD patients are different from the healthy people. The characters written by the patients are not easily readable by human beings. As the number of dataset get increased the accuracy of the prediction will get more accurate.
Image preprocessing is crucial in the recognition pipeline for correct disease and character prediction cases. These methods typically include noise removal, image segmentation, cropping, scaling, etc. In this project, these methods have mainly been used when recognizing from an image, but some of them, such as cropping the written character and scaling it to our input size, are also performed.

Digital capture and conversion of an input image often introduces noise which makes it hard to decide what is actually a part of the object of interest and which is not. Considering the problem of character recognition, we want to reduce as much noise as possible, while preserving the strokes of the characters, since they are important for correct classification into the correct character.

This step is important in the case of disease prediction stage also. Because for predicting the disease using the handwriting samples we use the differences in their writings. So each of the differences in the images are important. So in order to obtain the accurate result these images should undergo preprocessing stage.

Features of input data are the measurable properties of observations, which one uses to analyze or classify. These instances of data. The task of feature extraction is to choose relevant features that discriminate the instances well and are independent of each other. Selection of a feature extraction method is probably the single most important factor in performance. There is a vast amount of methods for feature images, each having different properties, and reconstructability of characters.

Different features are used here for the prediction of disease from the character sample.

Structure tensor is an image texture analysis technique often used in image processing and computer vision. Structure tensor, $J$, of an image is a matrix derived from the image partial derivatives. It is defined as,

$$J = \begin{bmatrix}
< f_x f_x > _w & < f_x f_y > _w \\
< f_y f_x > _w & < f_y f_y > _w
\end{bmatrix}$$

The different features that are needed can be calculated by using the structure tensor.

Supervised learning is the machine learning task of inferring a function from labeled training data. The training data consist of a set of training examples. In supervised learning, each example is a pair consisting of an input object, typically a vector and a desired output value. It also called as the supervisory signal. Here support vector machines (SVM) are used for the training and classification.

The features selected are then sent to the classification block. Here the binary classification is done using the SVM. The two classes are healthy and patient. An input image provided will be in any of these two categories.

IV. CONCLUSION

A new method for detecting the Parkinson’s disease through the static analysis of handwriting. It improves the opportunity for testing the disease. Since there are no laboratory tests like blood based tests exist to determine the existence or extent of PD. Examination of handwriting presents an enormous opportunity for tracking PD conditions over time, in and away from the clinic. The approach has potential to examine simple writing samples of patients in a natural environment. Since it only evaluating the handwriting samples, this method is less costly. The accuracy of the system get increased as the number of training samples get increased.

REFERENCES


